

Welcome!

The Webinar will begin promptly at 12pm

Due to the number of participants, you will be automatically placed on mute as you join to ensure good quality sound. If you would like to comment or ask a question, please use the “chat feature”

Send your questions to the host via the chat window in the Zoom meeting.

Q+A will open at the end of the presentation.

Follow-up questions?

Contact



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TELEMAT PART 1: SHOWCASE OF TELE-MAT GRANTEES: LESSONS LEARNED FROM THE FIELD

PRESENTED BY:
Jean Glossa, MD, MBA, FACP

Tuesday,
January 11, 2021
12:00pm – 1:00pm EST

The Integrated Care DC is managed by the DC Department of Health Care Finance (DHCF) in partnership with the DC Department of Behavioral Health (DBH). This project is supported by the Centers for Medicare and Medicaid Services (CMS) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$4,616,075.00 with 100 percent funded by CMS/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, or an endorsement by, CMS/HHS, or the U.S. Government.

TeleMAT Part 1: Showcase of tele-MAT grantees: Lessons Learned from the Field

- >> Welcome and Program Announcements
- >> Showcase of Tele-MAT Grantees
 - >> MedStar Health Research Institute
 - >> Howard University and Pennsylvania Avenue Baptist Church
 - >> Honoring Individual Power & Strength (HIPS)
- >> Q&A
- >> Closing Remarks/Announcements

OBJECTIVES

1. Describe three models of tele-MAT offered in the DC safety net community
2. Apply lessons learned from on the ground experiences of providing tele-MAT
3. Outline approaches for best practices for micro-grants to test approaches to tele-MAT



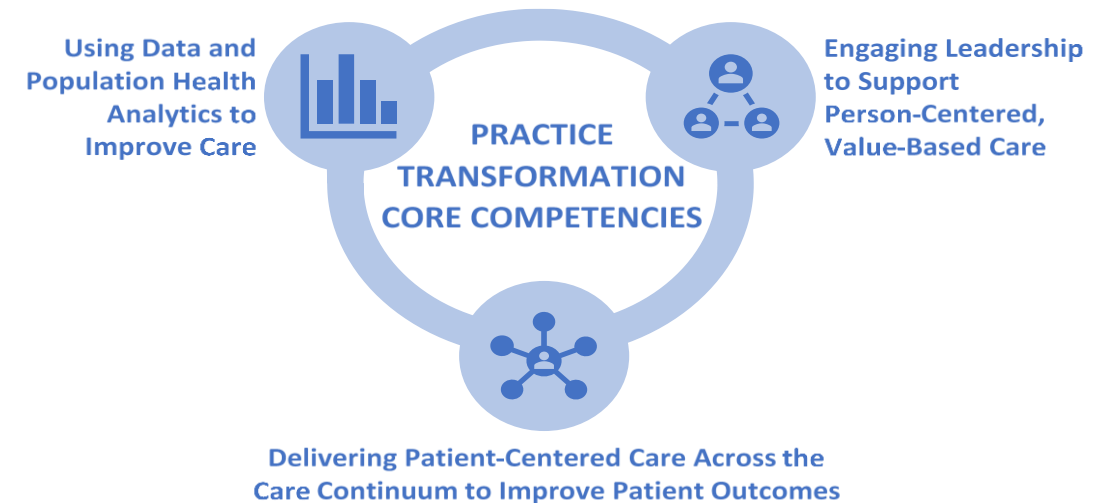
Image permitted by DC Department of Health Care Finance

WHAT IS THE INTEGRATED CARE DC PROGRAM?

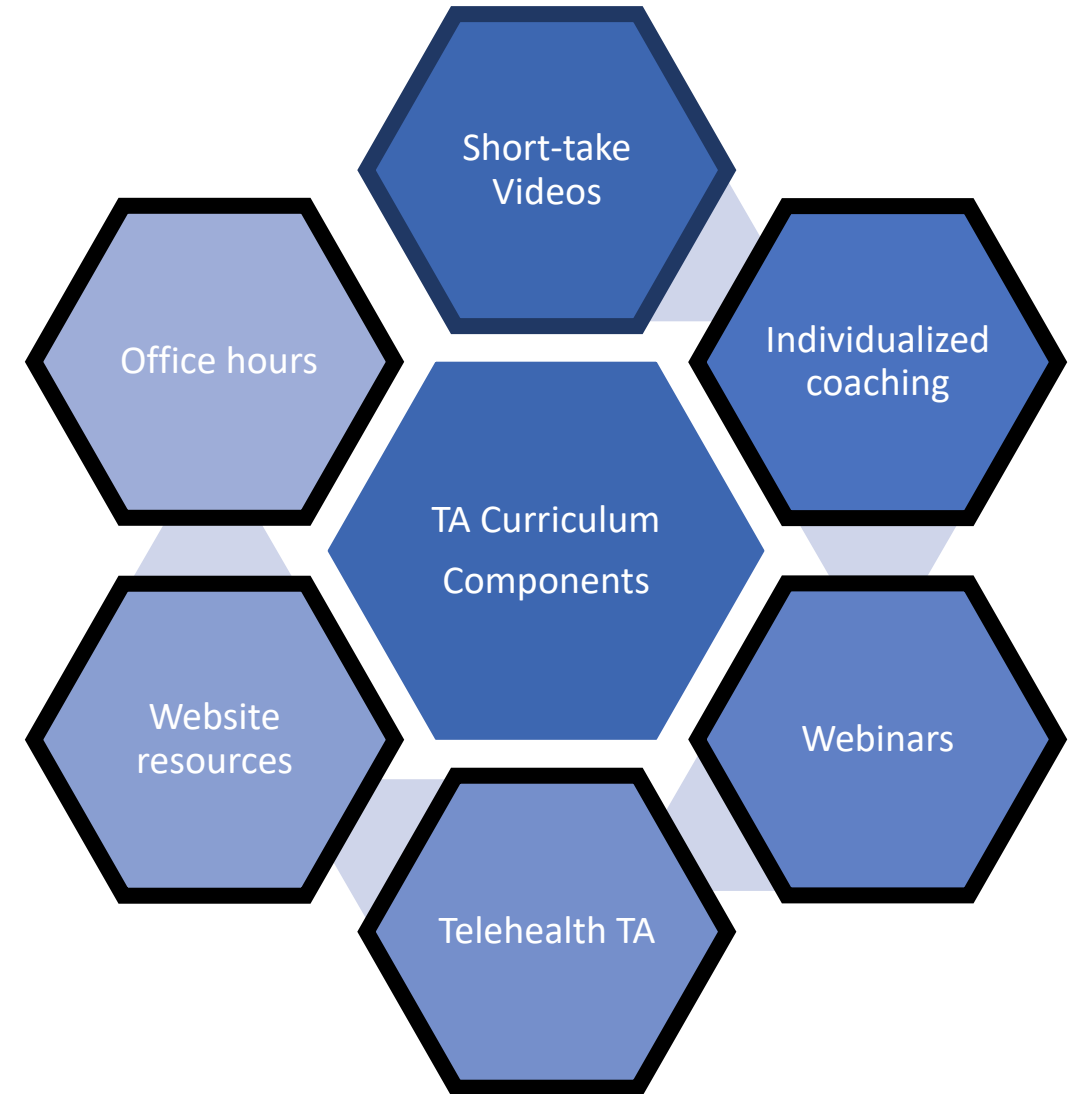


- >> The Integrated Care DC Program is a five-year program aimed to enhance Medicaid providers' capacity and core competencies to deliver whole person care for physical, behavioral health, SUD and social needs of beneficiaries.
- >> The Integrated Care DC Program is managed by the DC Department of Health Care Finance (DHCF) in partnership with the DC Department of Behavioral Health (DBH). Health Management Associates will provide the training and technical assistance.

The goal is to improve care and Medicaid beneficiary outcomes within three practice transformation core competencies:



- » The program offers several components of coaching and training. Material is presented in various formats. The content is created and delivered by HMA subject matter experts with provider spotlights.
- » All material is available on the project website: [Integratedcaredc.com](https://integratedcaredc.com)
- » Educational credit is offered at no cost to attendees for select elements.



DISCLOSURES



Faculty	Nature of Commercial Interest
Jean Glossa, MD, MBA, FACP	Dr. Glossa discloses that she is an employee of Health Management Associates, a national research and consulting firm providing technical assistance to a diverse group of healthcare clients
Elizabeth Wolff, MD, MPA CME Reviewer	Dr. Wolff discloses that she is an employee of Health Management Associates, a national research and consulting firm providing technical assistance to a diverse group of healthcare clients.
Mary Wozniak, MPH	Ms. Wozniak discloses that she is an employee of Unity Health Care, Inc.
Shayna Waites, PhD, LICSW	Dr. Waites discloses that she is an employee of Howard University.
Gloria Cain, PhD	Dr. Cain discloses that she is an employee of Howard University.

Telehealth Innovation Program

The Department of Health Care Finance (DHCF) awarded grants to local organizations to support new telehealth services for residents in Wards 7 and 8 as well as residents of homeless shelters and public housing developments.

These projects will connect(ed) patients to specialists such as cardiologists, psychiatrists, emergency physicians and pharmacists, using interactive audio, video, or other new technology.

DHCF also awarded grants to local organizations to support telemedicine services among the District's medication-assisted therapy (MAT) network of providers, including providers authorized ("waivered") to treat opioid dependency with buprenorphine.

More information can be found here: <https://dhcf.dc.gov/telehealthinnovation>

TELEMEDICINE MEDICATION ASSISTED THERAPY (TELEMAT) 2021 GRANTEES



Grantees	Description
MedStar Health Research Institute	MedStar Washington Hospital Center (MWHC) in partnership with Unity Health Care, will implement LINK-MAT, a patient-centered program, embedded in the evidence-based SBIRT model employed at MWHC to address the increasing opioid-related overdose and mortality rates among DC's vulnerable and underserved populations by providing a more seamless experience of care that integrates continuing behavioral health care in the Emergency Department to improve treatment outcomes for OUD.
Howard University and Pennsylvania Avenue Baptist Church	The Better Together TeleMAT Community Partnership, a collaboration between Howard University and the DC Dream Center and Pennsylvania Avenue Baptist Church plans to provide MAT via telehealth to persons with OUD in Ward 7 and neighboring communities.
Honoring Individual Power & Strength (HIPS)	HIPS has refined a harm reduction clinical model that has been successfully replicated five times since 2016. HIPS is working in collaboration with the GWU School of Medicine by implementing a TeleMAT Internal Medicine Resident Training (TIMRT) that will expand access to MAT and encourage these future providers to increase their patient outreach and capacity. HIPS will also leverage their current programs (Syringe Exchange, Foot Outreach, and Mobile MAT) to identify patients that may be eligible for the TeleMAT program.



TeleMAT Pilot: LINKMAT PROJECT

Grantee: MedStar Health Research Institute

Dr. Mihriye Mete, Director, Behavioral Health Research at MedStar Health Research Institute and Dr. Maryann Amirshahi at MedStar Washington Hospital Center.

Sub-Grantee: Unity Health Care

Dr. Andrew Robie, Chief Medical Information Officer, Medical Director of Opioid Recovery Program

Mary Wozniak, Program Manager of Behavioral Health



Overview of Pilot Project:

Goal: Expand upon efforts in MedStar Washington Hospital Center's ED to screen and connect patients with OUD to buprenorphine treatment. With grant support from DHCF, improve the connection to addiction treatment at Unity using telemedicine for patients in the ED.

Method: Established grant agreement, data sharing agreements, and BAA with Bluestream. MedStar and Mosaic Group collaborated to train hospital peer recovery coaches to discuss treatment options and obtain consent from patients with OUD interested in buprenorphine treatment during their visit.

From June to Sept 2021, Unity had a pool of on-call providers from 7am to 11pm waived to prescribe buprenorphine. Hospital peers linked patients immediately to televideo appointment using MedStar's BlueStream platform. The patients were either dosed in the ED or instructed on home initiation of buprenorphine, and provided a follow up appointment with Unity's Opioid Recovery Program in person or via telemedicine.

Results:



Objective: increase referrals for MAT:

- Intervention: Avg. 4.25/month, (17 referrals)
- Control: Avg. 2.25 referred per month (27 referrals)



Objective: Improve connection to first MAT visit:

Target: 50 telemedicine visits

- Intervention: 82.4% (14/17): 11 received buprenorphine
- Control: 44.4% (12/27)

Objective: Improve patient retention at 30 days

- Intervention: 54.5% (6 of 11)
- Control: 66.7% (8 of 12)



Healthier You. Healthier Communities.

TeleMAT Findings:

Lessons Learned/Conclusions:

- Lower volume than anticipated. Many patients not ready for treatment or are interested in methadone or acute detoxification. Expanded intervention to inpatient admissions.
- Poor access to consistent phone number for patients, resulting in loss to follow up. Open access hours for patients could help close the gap.
- Financial sustainability of on-call pool would be dependent on expanding the volume of referrals.
- Build provider capacity in ED and inpatient to initiate buprenorphine

Next Steps

- Address prevention via rational opioid prescribing practices.
- Encourage ED and inpatient providers to obtain waivers.
- Expand inpatient protocol for buprenorphine inductions.
- Increase staff education to increase comfort with buprenorphine initiation and procedures.
- Expanded take home naloxone access.
- Consider methadone expansion in the ED and inpatient settings.



Integrated Care DC Webinar Series- Lessons Learned

January 11, 2022

Shayna Waites, PhD, LICSW and Gloria Cain, PhD

Integrated Care DC Webinar Series: Lessons Learned

Howard University-Better Together Program



January 11, 2022

Shayna Waites, PhD, LICSW
Gloria Cain, PhD



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HOWARD UNIVERSITY DEPARTMENT OF PSYCHIATRY
INITIATIVE FOR A HEALTHY, THRIVING DC COMMUNITY, FREE FROM ADDICTION

Better Together TeleMAT Community Partnership

This program is a collaboration between Howard University (HU), the DC Dream Center and the Pennsylvania Avenue Baptist Church to provide medication assisted treatment (MAT) via telehealth (TeleMAT) to persons with opioid use disorder (OUD) in Ward 7 and neighboring communities. Access to TeleMAT will be available at the DC Dream Center and the Pennsylvania Avenue Baptist Church, which will serve as originating sites for TeleMAT.



KEY TEAM MEMBERS

Richard S. Schottenfeld, M.D.

Denise Scott, PhD

Shayna Waites, PhD, LICSW

Gloria Cain, PhD, LMSW

Kayla Bulluck, BA

Dephanie Jordan



Fig. 2: Total Number of Opioid Drugs Contributing to Drug Overdoses by Year (All Opioids)

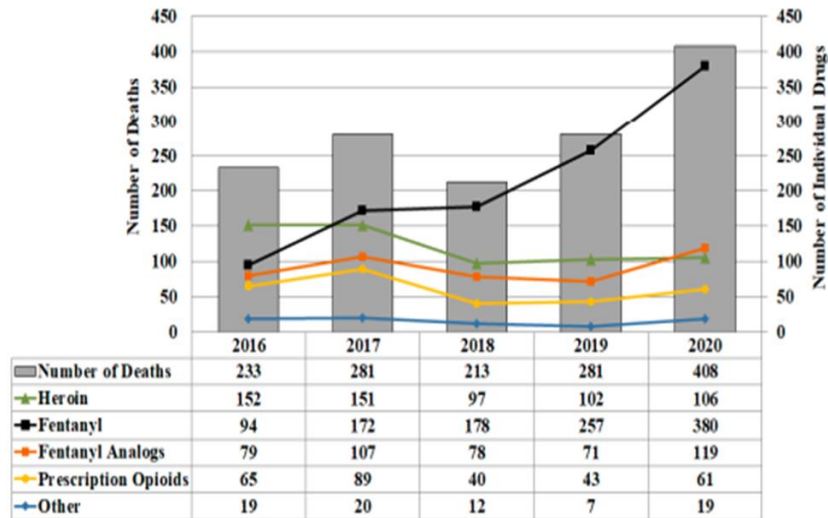


Fig. 6: Number of Drug Overdoses due to Opioid Use by Race/Ethnicity and Year

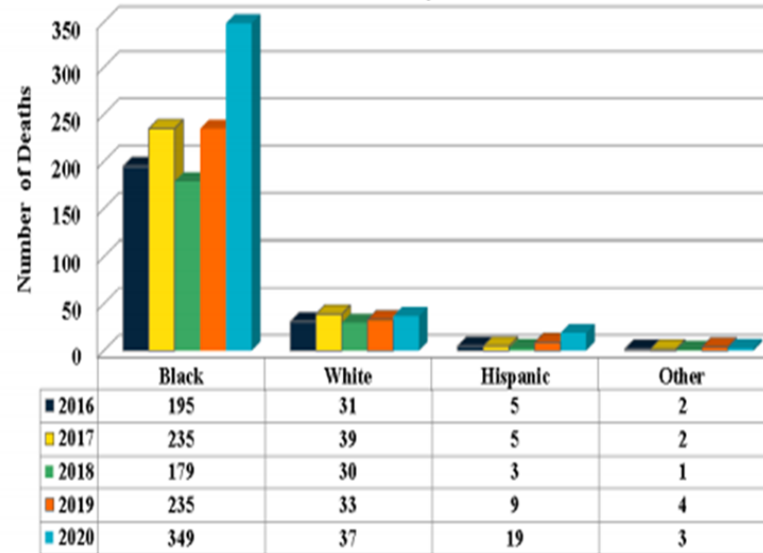
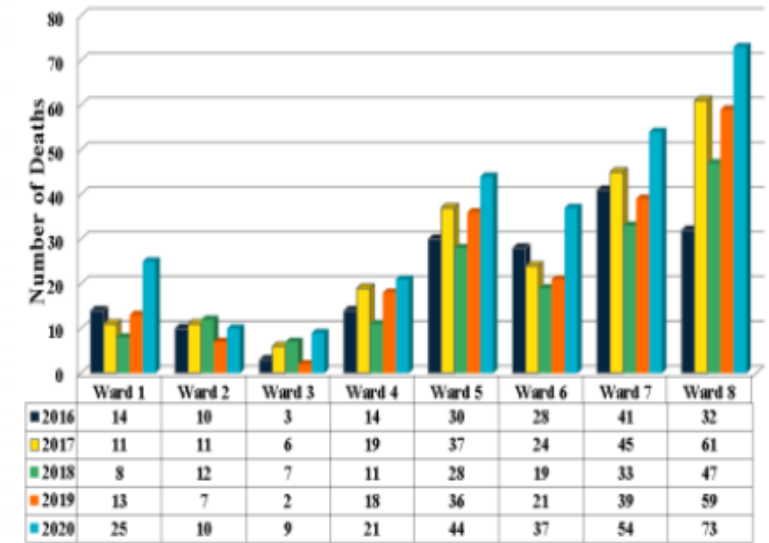


Fig. 9: Number of Drug Overdoses due to Opioid Use by Ward of Residence and Year

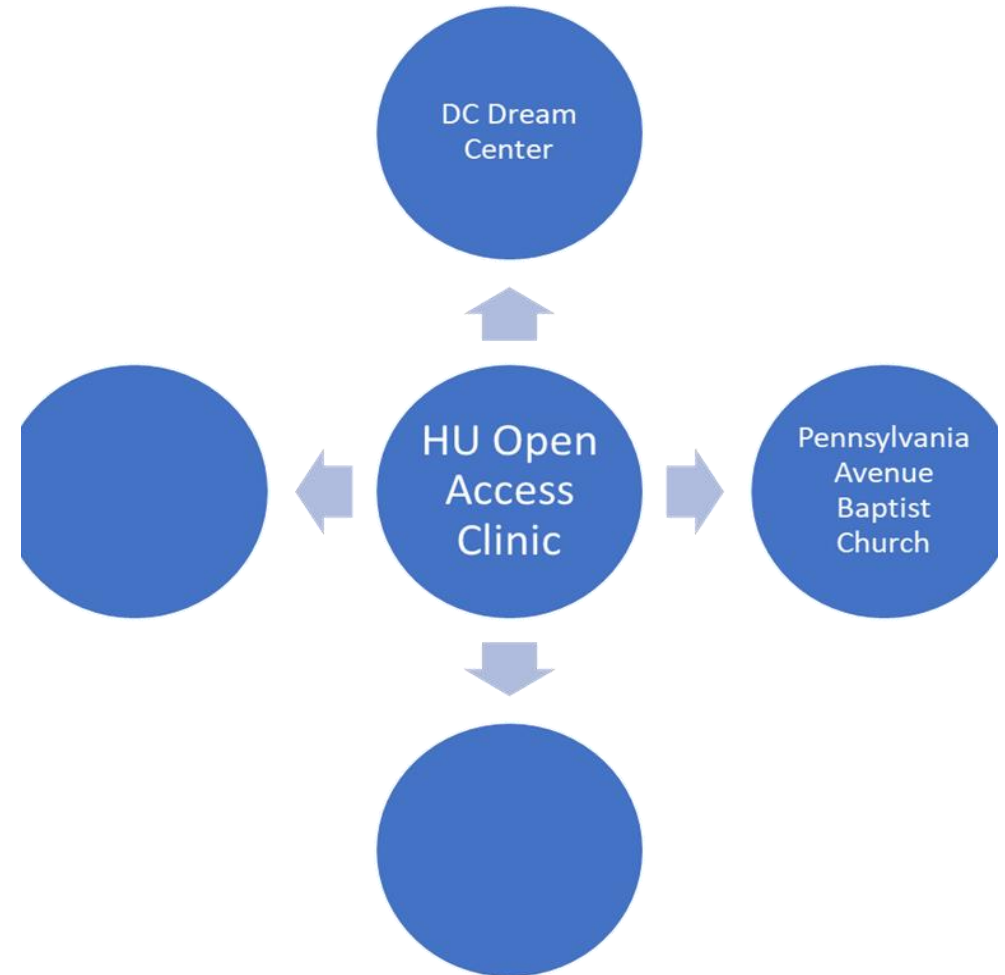


What's the Problem Being Addressed?

- Overdose deaths increasing rapidly in District: tripled from 2014 to 2016, then doubled from 2016 to 2020
- Overdose deaths occur predominantly among Black persons (mainly older, Black males)
- Highly concentrated in most segregated, economically disadvantaged, medically underserved communities

Better Together TeleMAT Project Design

- **Hub and Spoke Model**
- MAT with buprenorphine provided via telemedicine in nonmedical community sites (spokes): DC Dream Center, Pennsylvania Avenue Baptist Church (PABC)
- Outreach/Engagement conducted by Peer Recovery Specialist (DC Dream Center) and Health Ministers (PABC)





Better Together TeleMAT Project Design

- Peer Recovery Specialist and Health Ministers serve as telepresenters (assisting utilization of laptops, video conferencing, linkage with hub clinic buprenorphine providers)
- Patients registered for care in HU Open Access Clinic (hub)
- HU waived providers prescribe buprenorphine
- Counseling provided by Peer Recovery Specialist and Health Ministers in DC Dream Center or PABC





Grant Overview: Telemedicine Innovations in Medication Assisted Therapy (TeleMAT) Grant

The program sought to accomplish five objectives for the implementation, improvement, enhancement, and measurement of MAT telehealth services for District residents:

Objective #1: Design TeleMAT services to Align with Clinical Workflows and Evidence-Based practice

Objective #2: Deploy the TeleMAT Solution

Objective #3: Implement and Test the TeleMAT solution

Objective #4: Assess experience using TeleMAT to increase access to MAT services in the District of Columbia

Objective #5: Engage Stakeholders to Provide Patient Education

Services Provided

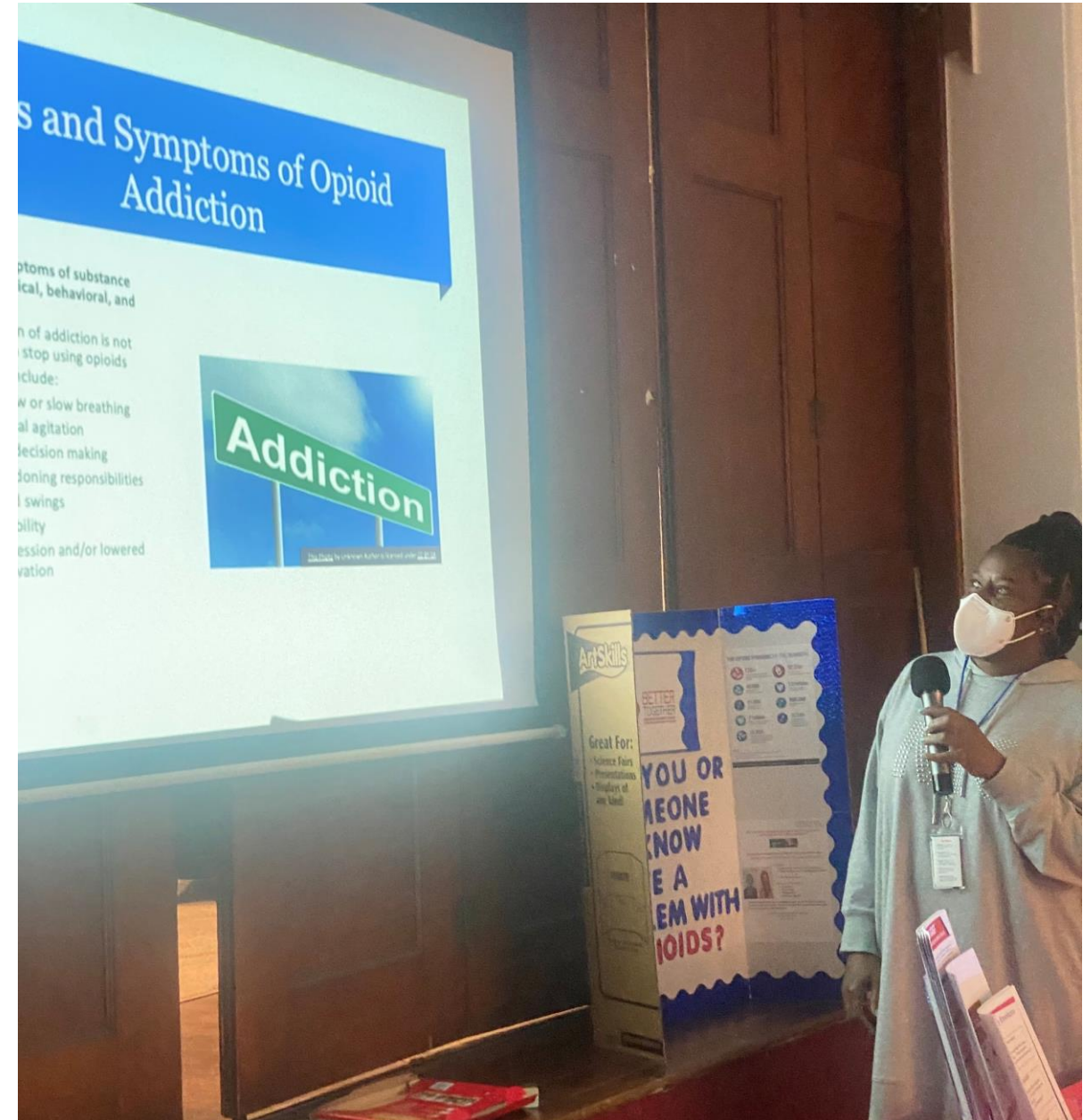
Evaluation

Recovery
Coaching

Buprenorphine
Assisted
Treatment

Recovery
Support





Successes

- Project Manager hired June 21, 2021
- Other staff were hired and onboarded beginning June 2021
- Ongoing training (GPRA, recovery coaching, NARCAN training)
- Weekly supervision meetings with health ministers and peers to address their training needs and workflow
- Prior to the end of the grant, contact was made with over 28 businesses and organizations in the surrounding area in Wards 7 and 8
- DC Dream Center MAT Site launched in September 2021





Challenges

- Patients needing extensive care coordination services (housing, insurance, no ID, primary care needs)
- Seeking long-term residential treatment
- Superseding mental health needs
- Process of getting prescriptions filled
- Stages of Change
- Transportation limitations
- Already receiving methadone or buprenorphine treatment



Moving Forward

- Ongoing community outreach
- Interview all HU providers and staff involved in provision of TeleMAT or potentially affected by implementation of the service (e.g., IT and medical records leadership; patient schedulers, etc.)
- Interview all DC Dream Center and Pennsylvania Avenue Baptist Church staff involved in project or potentially affected by it.
- Interview patients referred to or receiving TeleMAT



Questions and Answers



References

- GOVERNMENT OF THE DISTRICT OF COLUMBIA OFFICE OF THE CHIEF MEDICAL EXAMINER. (2021). (issue brief). *Opioid-related Fatal Overdoses: January 1, 2016 to June 30, 2021* (pp. 1–4). Washington, DC.
- Centers for Disease Control and Prevention. (2021, March 10). *Opioid data analysis and resources*. Centers for Disease Control and Prevention. Retrieved October 19, 2021, from <https://www.cdc.gov/opioids/data/analysis-resources.html>.
- Onderdonk, M. L., Upham, B., Ellin, A., Shapiro, M., Dunleavy, B. P., Rauf, D., & By. (n.d.). *9 celebrities who died from prescription painkiller overdoses*. EverydayHealth.com. Retrieved October 19, 2021, from <https://www.everydayhealth.com/pain-management-pictures/six-celebrities-who-have-died-from-painkiller-ods.aspx>.



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Upcoming Webinar:

TeleMAT Part 2: Treating Addiction, including MAT via Telehealth. What does your care team need to know? January 25, 12-1pm

Attachment(s):

-  [DC Medicaid Coding for Telemedicine and Coronavirus \(COVID-19\)](#) - 721.6 KB (pdf)
-  [Telemedicine Guide for Medicaid Providers 3.25.2020.pdf](#) - 336.8 KB (pdf)
-  [Telemedicine Products Table .pdf](#) - 182.0 KB (pdf)
-  [Transmittal 20-08 Public Health Emergency Guidance on Medicaid-Reimbursable Telemedicine Services Allowance for Audio-Only Visits and HIPAA.pdf](#) - 168.2 KB (pdf)
-  [Reimbursement for Healthcare Services Delivered to a Beneficiary in their Home via Telemedicine Documents](#) - 1.7 MB (pdf)
-  [Transmittal 20-28 - Billing for Telemedicine Encounters \(1\).pdf](#) - 149.4 KB (pdf)
-  [Transmittal 20-42 - Documentation Standards for Services Delivered Via Telemedicine.pdf](#) - 143.1 KB (pdf)
-  [Telemedicine 11.5.21 Final Rule.pdf](#) - 77.9 KB (pdf)
-  [Telemedicine Provider Guidance January 2022.pdf](#) - 299.1 KB (pdf)

More information:

[https://dhcf.dc.gov/
page/telemedicine](https://dhcf.dc.gov/page/telemedicine)



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- >> Please complete the online evaluation! **If you would like to receive CME credit, the evaluation will need to be completed.** You will receive a link to the evaluation shortly after this webinar.

- >> The webinar recording will be available within a few days at:
<https://www.integratedcaredc.com/learning/>

- >> **Upcoming Webinars:**
 - >> *TeleMAT Part 2: Treating Addiction, including MAT via Telehealth. What does your care team need to know?* January 25, 12-1 pm
 - >> *How to Mitigate Workforce Burnout and Fatigue*, Feb 8, 12-1 pm
 - >> *Bundle Up! What's a bundled payment and how does it fit into a VBP framework?*, Feb 15, 12-1 pm

- >> For more information about Integrated Care DC, please visit:
<https://www.integratedcaredc.com/>