Confronting the Opioid Epidemic in Massachusetts: Understanding the Community Treatment System

Massachusetts Health Data Consortium
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Association for Behavioral Healthcare
Association for Behavioral Healthcare (ABH)

• Statewide association of mental health and addiction treatment provider organizations

• Our mission is to lead in promoting and advocating for community-based mental health and addiction treatment services

• Over eighty members across Massachusetts

• Members’ revenues range from $1 million to $150+ million per year
What do ABH Members Do?

• Our members are the Commonwealth’s system of community-based behavioral health care

• Services funded by Department of Mental Health, Department of Public Health/Bureau of Substance Abuse Services, MassHealth, commercial insurers

• Serve 81,000 individuals daily, 1.5 million annually

• Employ 46,500 people
What Do ABH Members Do?

- ABH members serve adults, adolescents, children, and families.
- Provide full range of community-based and diversionary services.
- Outpatient/medication management, Day Treatment, CBFS, Clubhouses, PACT, CBHI.
- Detox, Step-Down Detox, TSS, Recovery Homes, Methadone, Suboxone.
Opioid Epidemic – Unprecedented Crisis

• 1,173 Opioid-related deaths in Massachusetts according to Department of Public Health (DPH) in 2014

• 17.4 deaths per 100,000 residents

• 228% increase from 2000 when there were 5.3 opioid-related deaths per 100,000 residents
Epidemic’s impact across populations

- 791 Opioid Related Deaths in Massachusetts from January – September 2015

Race/Ethnicity:
- 83% White, Non-Hispanic
- 9% Hispanic
- 5% Black

Gender:
- 76% Male
- 24% Female
Epidemic’s impact across ages

Percentage of Victims in Each Age Group

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<thead>
<tr>
<th>Age Group</th>
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<tr>
<td>15-24</td>
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<td>45-54</td>
<td>23%</td>
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<td>55-64</td>
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Treatment System in Massachusetts

• Can be divided into two broad categories
  – Inpatient/24 hours levels of care (bedded programs)
  – Outpatient

• Access is either through voluntary admission or court-ordered civil commitment (Section 35)
Inpatient/24 hour Levels of Care

- Acute Treatment Services/Detoxification (ATS/Detox)
- Clinical Stabilization Services (CSS/Post Detox)
- Transitional Support Services (TSS)
- Residential Recovery Homes
American Society for Addiction Medicine (ASAM) Criteria

• ASAM has established criteria for admission to individual Levels of Care (LOC) and standards for each LOC

• Massachusetts publicly-funded treatment system mirrors ASAM criteria

• Important for standardization and quality
Demand for Treatment Exceeds Capacity

- Accessing treatment is often a challenge for individuals and families
- Bottlenecks occur across treatment continuum
- Goal must be treatment on demand
- Despite significant investments in the treatment system by state government over past 13 years, we are not there yet.
ATS/Detox – ASAM 4.0 and 3.7 LOC

- Provides inpatient detoxification for individuals who are dependent on medications or illicit drugs and are at risk of experiencing physical withdrawal
- Average length of stay is 4 – 8 days depending upon substance
- Currently 879 licensed beds in Massachusetts
- 41,277 enrollments of 22,092 individuals in FY15
- Payers: DPH/BSAS, MassHealth, commercial plans (mandated by Ch. 258 of Acts of 2014)
CSS/Post Detox Step Down – ASAM 3.5 LOC

• Provides short-term post detox stabilization services for individuals who are no longer at risk of withdrawal
• Designed for up to 30 days of treatment – stay is usually 10 – 14 days
• 340 licensed beds in Massachusetts – state is currently procuring additional beds which will increase licensed capacity to approximately 600
• 7,039 enrollments of 5,696 individuals in FY15
• Payers: DPH/BSAS, MassHealth, commercial plans (mandated by Ch. 258 of Acts of 2014)
Transitional Support Services – ASAM 3.3 LOC

- Provides intermediate residential support services to transition individuals from ATS and CSS to residential recovery programs
- Average length of stay is 30 days
- 344 licensed beds in Massachusetts
- 4,431 enrollments of 3,804 individuals in FY15
- Payers: DPH/BSAS
Residential Recovery Homes – ASAM 3.1 LOC

- Provides long-term residential treatment to support persons in early phases of recovery
- Goal is to develop/redevelop life skills to help maintain recovery and live independently
- Length of stay is based on individual need – can range from one month to a year
- 2,375 licensed beds
- 6,930 enrollments of 6,169 individuals in FY15
- Payers: primarily DPH/BSAS; some federal probation and county sheriffs
Services for Civilly Committed Individuals (Section 35)

• Judges can commit individuals for treatment who have been determined to be at risk to themselves or others
• 226 licensed community-based ATS and CSS beds
• 3,685 enrollments of 3,287 individuals in FY15
• Additional beds for men operated by Department of Correction at MASAC in Bridgewater
Specialized programs for Families, Youth and Adolescents

- 110 licensed recovery homes slots for parents with minor children to live with kids and receive treatment services
- 48 licensed beds for youth in need of detox and stabilization – 791 enrollments of 604 individuals
- 81 residential beds for kids 13 – 17 years old; 310 enrollments of 287 individuals
- 30 beds for Transitional Aged Youth (16 – 21); 80 enrollments of 80 individual clients
Outpatient Services

• Access to outpatient services is vital to individuals in maintaining long-term recovery
• Structured Outpatient Addiction Program (SOAP)
• Intensive Outpatient Program (IOP)
• Outpatient Counseling
• Medication Assisted Treatment (MAP)
• Payers: DPH/BSAS, MassHealth, commercial plans
Medication Assisted Treatments

- MATs are vital tool in combating epidemic; access is growing
- Methadone – Evidenced based practice endorsed by the AMA; provided in licensed, highly regulated Opioid Treatment Programs (OTPs) across the state
- Buprenorphine (Suboxone) – provided by Primary Care and Addiction docs; office based
- Vivitrol – monthly injectable
Gaps in the Continuum

• Services for individuals dually-diagnosed with co-occuring substance and mental health disorders

• Trauma-informed services and care

• Post-residential supportive housing and case management services
Questions/Discussion

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