

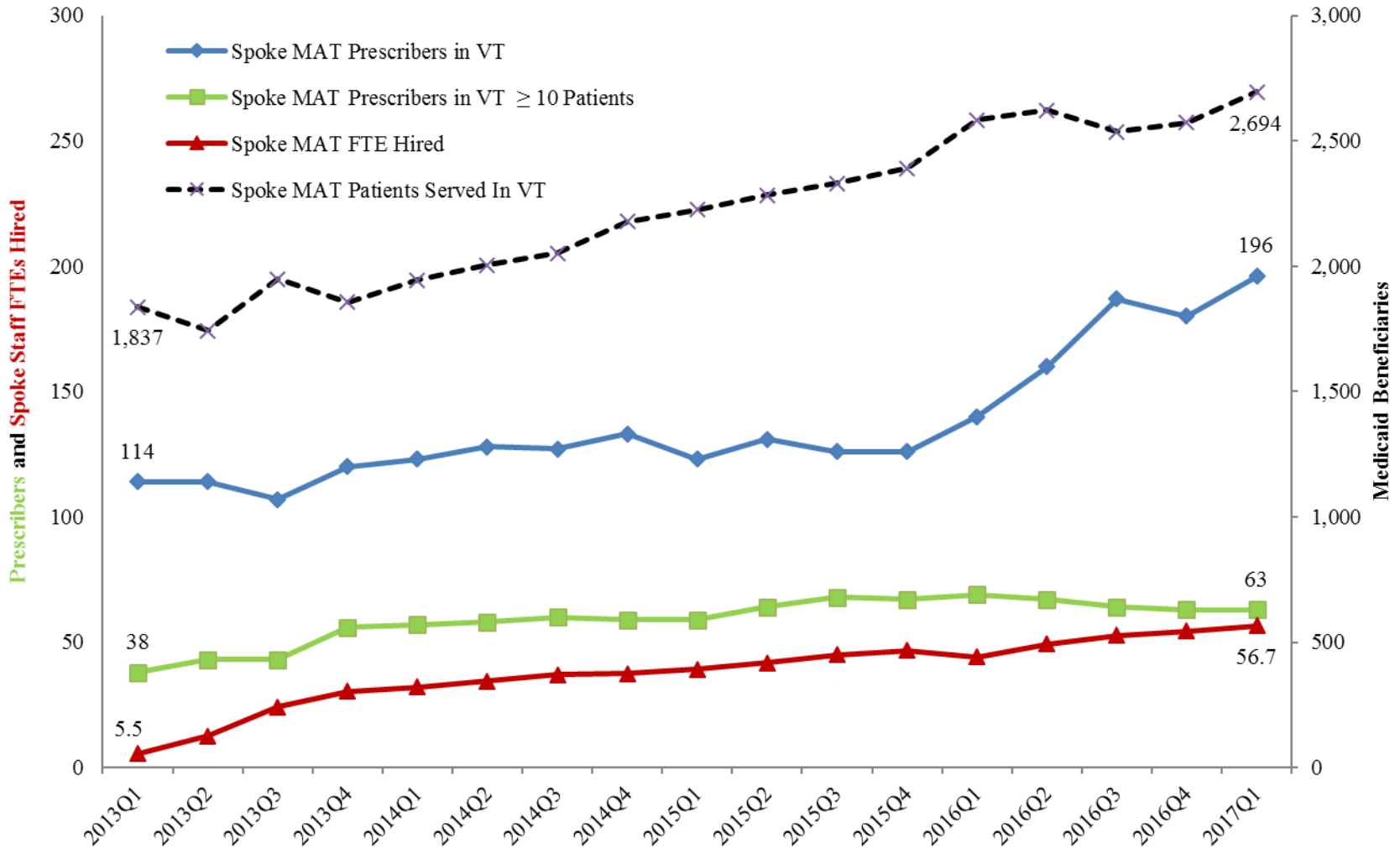
OPIOID TREATMENT PROGRAM (HUB) AND OFFICE-BASED OPIOID TREATMENT (SPOKE) PROGRAM DATA PROFILES AND THE WOMEN'S HEALTH INITIATIVE

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THE ACKNOWLEDGEMENTS

- Division of Alcohol and Drug Abuse Programs (ADAP)
- ONPOINT Health Data
- Blueprint for Health Data Team
- Mental Health and Substance Use Disorder Advisory Committee
- Blueprint Project Managers
- Spoke Learning Community

MAT - SPOKE IMPLEMENTATION January 2013 - March 2017



SPOKE REGIONAL PROFILE

- Health Status:
 - 51.5% of beneficiaries receiving MAT at a Spoke had 1 or more of 7 Selected Chronic Conditions.

	Spoke	Non-MAT Opioid Addicted	Medicaid Statewide
Average Members	2,600	1,379	72,874
Average Age	33.2	35.5	38.1
% Female	53.5	49.3	56.7
% Maternity	8.4	3.2	3.6
% with Selected Chronic Conditions	51.5	59.2	35.2
% CRG Significant Chronic	46.1	47.3	21.8
% Depression	37.6	43.9	16.9
% Hepatitis C	13.2	12.0	2.3
% ADD	17.6	15.3	5.5
% Asthma	18.4	20.2	12.0
% Mental Health (Non-Substance Use)	75.2	81.4	40.7
% Other Substance Use	62.7	66.3	12.5
% Tobacco Dependence	63.9	64.3	23.1

HUB REGIONAL PROFILE

- Health Status:
 - 46.4% of beneficiaries receiving MAT at a Hub had 1 or more of 7 Selected Chronic Conditions.

	Hub	Non-MAT Opioid Addicted	Medicaid Statewide
Average Members	2,331	1,379	72,874
Average Age	33.8	35.5	38.1
% Female	53.5	49.3	56.7
% Maternity	6.1	3.2	3.6
% with Selected Chronic Conditions	46.4	59.2	35.2
% CRG Significant Chronic	41.5	47.3	21.8
% Depression	32.5	43.9	16.9
% Hepatitis C	20.2	12.0	2.3
% ADD	17.8	15.3	5.5
% Asthma	18.2	20.2	12.0
% Mental Health (Non-Substance Use)	69.3	81.4	40.7
% Other Substance Use	50.3	66.3	12.5
% Tobacco Dependence	59.1	64.3	23.1

SPOKE REGIONAL PROFILE

- Health Status:
 - 75.2% of beneficiaries receiving MAT at a Spoke had had a mental health, non-substance use, condition.
 - 37.6% depression

	Spoke	Non-MAT Opioid Addicted	Medicaid Statewide
Average Members	2,600	1,379	72,874
Average Age	33.2	35.5	38.1
% Female	53.5	49.3	56.7
% Maternity	8.4	3.2	3.6
% with Selected Chronic Conditions	51.5	59.2	35.2
% CRG Significant Chronic	46.1	47.3	21.8
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% ADD	17.6	15.3	5.5
% Asthma	18.4	20.2	12.0
% Mental Health (Non-Substance Use)	75.2	81.4	40.7
% Other Substance Use	62.7	66.3	12.5
% Tobacco Dependence	63.9	64.3	23.1

HUB REGIONAL PROFILE

- Health Status:
 - 69.3% of beneficiaries receiving MAT at a Hub had a mental health, non-substance use, condition.
 - 32.5% depression

	Hub	Non-MAT Opioid Addicted	Medicaid Statewide
Average Members	2,331	1,379	72,874
Average Age	33.8	35.5	38.1
% Female	53.5	49.3	56.7
% Maternity	6.1	3.2	3.6
% with Selected Chronic Conditions	46.4	59.2	35.2
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% Mental Health (Non-Substance Use)	69.3	81.4	40.7
% Other Substance Use	50.3	66.3	12.5
% Tobacco Dependence	59.1	64.3	23.1

SPOKE REGIONAL PROFILE

- Demographic:
 - Age is consistent with other data
 - Females represent over half ...
- Health Status:
 - 8.4% of beneficiaries receiving MAT at a Spoke had an occurrence of a maternity diagnosis

	Spoke	Non-MAT Opioid Addicted	Medicaid Statewide
Average Members	2,600	1,379	72,874
Average Age	33.2	35.5	38.1
% Female	53.5	49.3	56.7
% Maternity	8.4	3.2	3.6
% with Selected Chronic Conditions	51.5	59.2	35.2
% CRG Significant Chronic	46.1	47.3	21.8
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% Asthma	18.4	20.2	12.0
% Mental Health (Non-Substance Use)	75.2	81.4	40.7
% Other Substance Use	62.7	66.3	12.5
% Tobacco Dependence	63.9	64.3	23.1

HUB REGIONAL PROFILE

- Demographic:
 - Age is consistent with other data
 - Females represent over half ...
- Health Status:
 - 6.1% of beneficiaries receiving MAT at a Hub had an occurrence of a diagnosis for maternity

	Hub	Non-MAT Opioid Addicted	Medicaid Statewide
Average Members	2,331	1,379	72,874
Average Age	33.8	35.5	38.1
% Female	53.5	49.3	56.7
% Maternity	6.1	3.2	3.6
% with Selected Chronic Conditions	46.4	59.2	35.2
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% Mental Health (Non-Substance Use)	69.3	81.4	40.7
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SPOKE REGIONAL PROFILE

Cervical Cancer Screening*

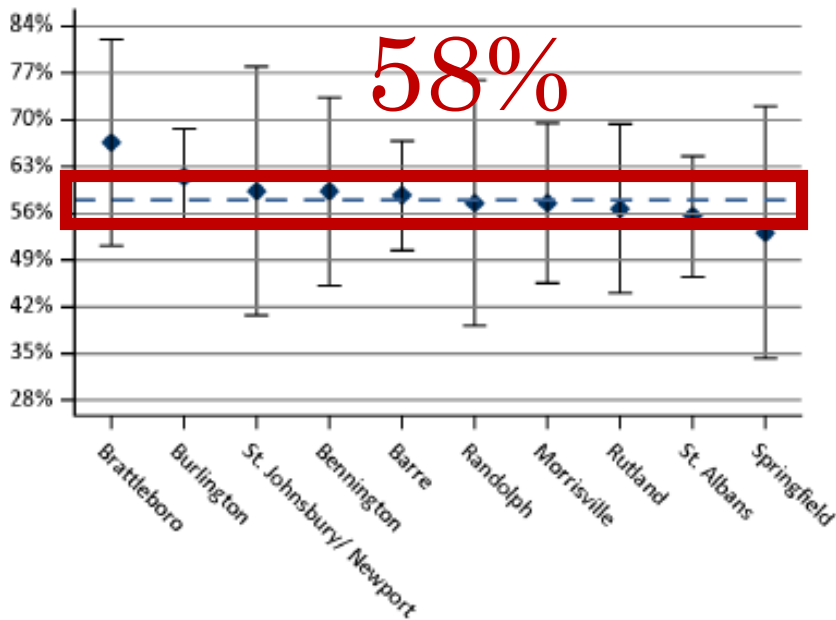


Figure 17: Presents the proportion, including 95% confidence intervals, of continuously enrolled female members either (a) ages 21–64 years who received one or more Papanicolaou (Pap) tests to screen for cervical cancer during the measurement year or two years prior to the measurement year or (b) ages 30–64 years who received one or more Pap tests to screen for cervical cancer during the measurement year or four years prior to the measurement year. The blue dashed line indicates the Spoke statewide average.

HUB REGIONAL PROFILE

Cervical Cancer Screening*

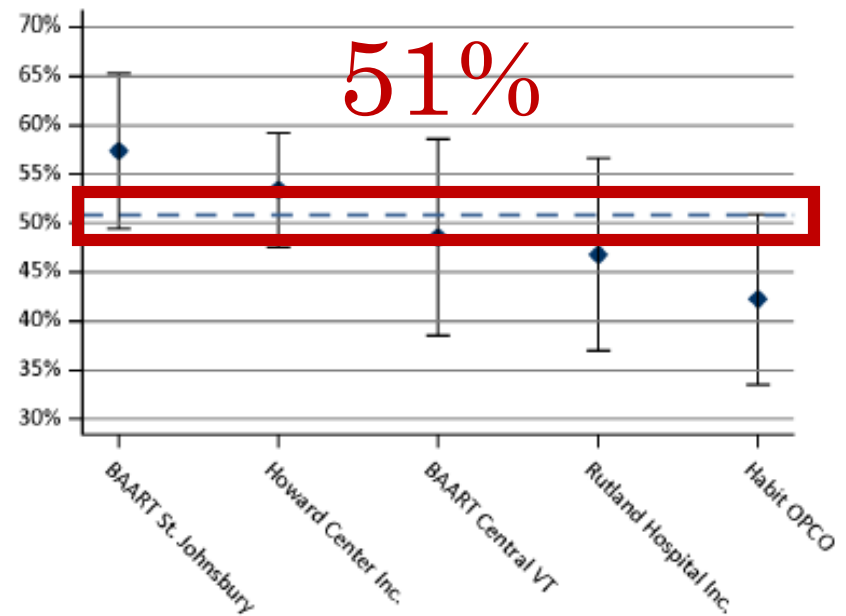


Figure 16: Presents the proportion, including 95% confidence intervals, of continuously enrolled female members either (a) ages 21–64 years that received one or more Papanicolaou (Pap) tests to screen for cervical cancer during the measurement year or two years prior to the measurement year or (b) ages 30–64 years that received one or more Pap tests to screen for cervical cancer during the measurement year or four years prior to the measurement year. The blue dashed line indicates the Hub statewide average.

If we know that **8.4%** of Medicaid beneficiaries receiving MAT at a **Spoke** and **6.1%** of Medicaid beneficiaries receiving MAT at a **Hub** have an occurrence of a maternity diagnosis **AND 58%** or **51%**, respective to **Spoke** or **Hub** statewide averages, of continuously enrolled female beneficiaries are receiving tests to screen for cervical cancer, is there a way can positively impact both measures?

WOMEN'S HEALTH INITIATIVE: DATA-DRIVEN APPROACH TO BETTER HEALTH OUTCOMES

- In Vermont, it is estimated that 50% of all pregnancies are unintended
- Unintended pregnancies may be associated with increased health risks, including:
 - Poor health outcomes for mothers and babies
 - Long-term negative consequences for health and well-being of children, including adverse childhood experiences (ACEs)
- Successful interventions may help lower risks
 - Increased access to contraceptive counseling has been shown to be an effective intervention for reducing the rate of unintended pregnancies
 - Psychosocial screening for early identification / identification, counseling and health interventions for women who may become pregnant may reduce risk(s)

WOMEN'S HEALTH INITIATIVE: DATA-DRIVEN APPROACH TO BETTER HEALTH OUTCOMES

- In Vermont, many women receive majority of their health care at OB-GYN and women's health clinics.
 - Increase comprehensive family planning counseling
 - Provide timely access to long-acting reversible contraception (LARC)
 - Enhance psychosocial screening
- Women also access family planning and contraception through Patient Centered Medical Homes.
 - Increase comprehensive family planning counseling
 - Provide timely access to long-acting reversible contraception (LARC)
 - Enhance psychosocial screening

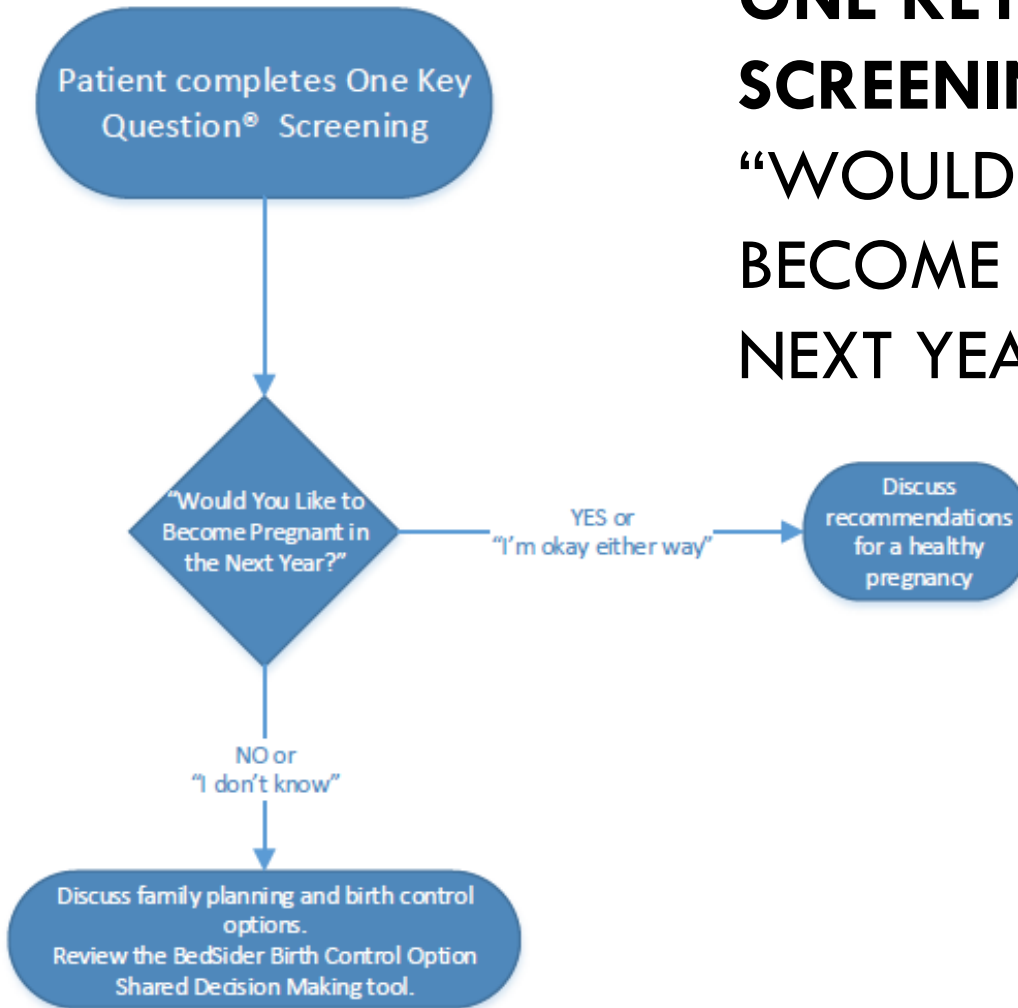
WOMEN'S HEALTH INITIATIVE: DATA-DRIVEN APPROACH TO BETTER HEALTH OUTCOMES

- Women who experience social needs are also served by community-based agencies.
- Building the skills of community agencies and organizations involves:
 - Increasing the understanding and identification of, and improving referral protocols for, family planning counseling, mental health conditions, substance use disorder, food insecurity, housing instability and intimate partner violence.
 - Development of referral relationships that are bidirectional and formally structured
 - know who providers are in each community

WOMEN'S HEALTH INITIATIVE: DATA-DRIVEN APPROACH TO BETTER HEALTH OUTCOMES

- How do we improve the rate of unintended pregnancies in Vermont and improve health outcomes for women receiving MAT?
 - Expand the Women's Health Initiative by embedding those services within the Spoke Program
 - Provide training to MAT practitioners on the psychosocial screening and comprehensive family planning counseling techniques
 - » Proficient in care coordination, bidirectional referral relationship development and follow-up for holistic care

ONE KEY QUESTION SCREENING: “WOULD YOU LIKE TO BECOME PREGNANT IN THE NEXT YEAR?”



WOMEN'S HEALTH INITIATIVE

Adapted from VT SBIRT Initial Screening Tool and Institute for Health and Recovery Integrated Screening Tool

Smart choices. Powerful tools.




Name: _____ DOB: _____ Today's Date: _____

Once a year, all our patients are asked to complete this form because these factors can affect your health as well as medications you may take. Please help us provide you with the best medical care by answering the questions below.

One Key Question®

Would you like to become pregnant in the next year?	YES	I'm okay either way	NO	I don't know
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Substance Use Assessment

1. Do you use any tobacco products?	YES		NO			
<small>Office Use Only:</small>	No	Yes (CHT and Tobacco Cessation Resources)				
Alcohol: One drink =	 12 oz. beer	 5 oz. wine	 1.5 oz. liquor (one shot)			
1. How many times in the past year have you had 4 (women)/ 5 (men) or more drinks in one day?	Never	Monthly or less	2-4x month	2-3x week	4+ times per week	
2. How often in the past year have you used marijuana/cannabis?	<small>I have a medical marijuana card</small> Never	1 day a month or less	2-3 days per month	1 day per week	Several days per week (2-4 days per wk)	Daily or almost daily (5 to 7 days per wk)
3. In the past year, have you used prescription drugs for non-medical reasons?	YES		NO			
4. In the past year, have you used other drugs? (such as heroin, inhalants, cocaine, etc)	YES		NO			
<small>Office Use Only:</small>	No and Never	Any Yes or Frequency (CHT & US-AUDIT and DAST – 10)				

Emotional Health

1. Over the last few weeks, has worry, anxiety, depression, or sadness made it difficult for you to do your work, get along with people, or take care of things at home?	YES	NO
<small>Office Use Only:</small>	No	Any Yes (CHT & PHQ – 9)

Violence

1. Do you ever feel unsafe in your home?	YES	NO
2. Are you scared that your partner or someone else might try to hurt you or your child?	YES	NO
<small>Office Use Only:</small>	No	Any Yes (CHT)

WOMEN'S HEALTH INITIATIVE SCREENING TOOL

WOMEN'S HEALTH INITIATIVE

Adapted from VT SBIRT Initial Screening Tool and Institute for Health and Recovery Integrated Screening Tool

Food Security

Please let us know if either of these statements is true for you or your family.

1. Within the last 12 months we worried whether our food would run out before we got money to buy more.	YES	NO
2. Within the last 12 months the food we bought just did not last and we did not have the money to get more.	YES	NO
Office Use Only:	No	Any Yes (CHT & Review Resources)

Housing Stability

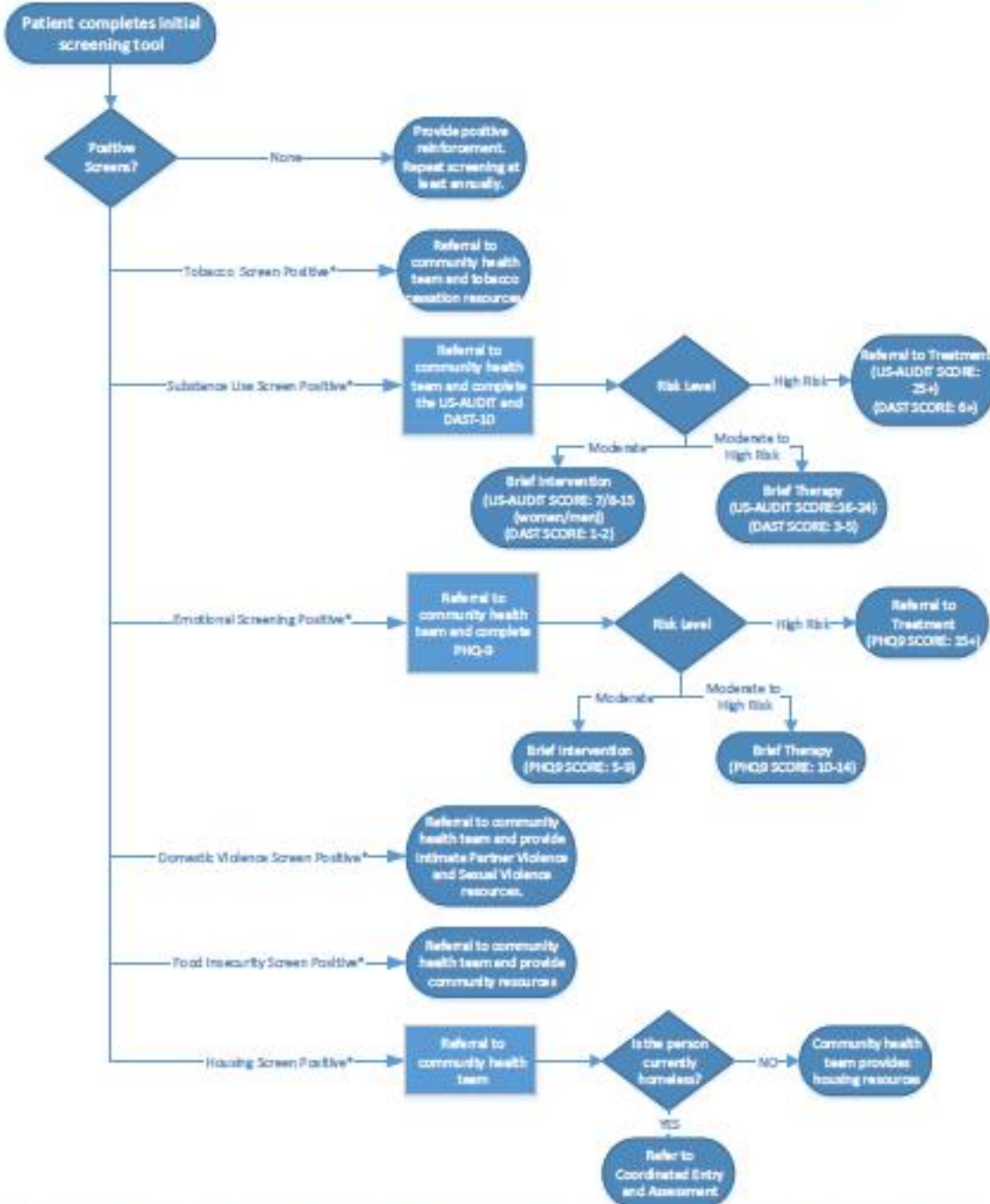
Please let us know if either of these statements is true for you or your family.

1. In the past 12 months, have you been homeless, missed rent or mortgage payments, or worried about where you would live?	YES	NO
2. During the next 12 month, do you anticipate any problems related to where you will live?	YES	NO
Office Use Only:	No	Any Yes (CHT & Review Resources)
CHT Screen for ACE and trauma upon intake when psychosocial risk		

Any urgent issues you would like to discuss today?	YES	NO
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WOMEN'S HEALTH INITIATIVE SCREENING TOOL

WOMEN'S HEALTH INITIATIVE SCREENING WORKFLOW



*For any positive screens, Adverse Childhood Experience screening is to be completed with the community health team

QUESTIONS AND DISCUSSION