

Quick Tips: Innovative Practices

Modified August 2020

Purpose/Overview: This fact sheet serves as an overview of various innovative practices being implemented by MAT providers across the country.

Considerations: In many ways, the increased access to MAT in general is considered an innovative practice. In addition to expanded prescribers and treatment settings in recent years, there are a number of different initiatives underway. Many innovations are dependent on state regulations. States are, however, working to learn from each other in their efforts to address the opioid epidemic.

- **Telehealth** is a promising approach for addressing some of the barriers that impede patient's access to MAT such as limited hours, distance to treatment, and transportation. While it varies by setting, changes regarding COVID-19 have forced many providers to transition some of their services into telehealth formats.
- **Alternative sites for induction** - there are various programs and pilots underway that are providing buprenorphine inductions in Emergency Departments, through paramedics, mobile MAT vans, and needle exchange programs.
- **Applying lessons from other settings** - some MAT programs are revising lessons learned from global health responses and piloting utilization of direct-observed therapy technologies. In addition, some MAT providers are utilizing apps and other electronic engagement tools modeled off of other chronic disease models to provide additional engagement with patients and data for providers.
- **New medication administration methods** - over the past years, there have been innovations in delivery modes of buprenorphine, giving patients and prescribers more options to increase access to MAT.

Resources/examples for the team:

- **Telehealth Resources**
 - Utilization of telehealth platforms can increase access for patients who face barriers to attending visits in-person. Due to recent changes related to COVID-19, there has been increased access to telehealth visits. While many providers are transitioning some services to telemedicine others have been successfully providing comprehensive telemedicine services including online appointment booking, for transitions from EDs and online intake completion across the country.
 - [Covid guidelines for telehealth from SAMHSA](#)
 - In order to address disparities in access to telehealth infrastructure, some clinics - including sites in NJ - are piloting community-based telehealth kiosks. For more information reach out to the Centers of Excellence to be connected to specific clinics piloting these innovations.
- **Increasing access to MAT (with focus on buprenorphine)**



- Paramedics - Cooper University Hospital has been operating a [pilot where paramedics](#) are carrying buprenorphine and calling a physician for an order to administer in the field for interested individuals post over-dose response. The program then works to bridge patients to ongoing MAT treatment.
- There is clear [evidence](#) that needle exchange programs are an effective strategy to link patients to treatment when they are ready. Some needle exchange programs offer MAT at their site.
- In order to address access to treatment, some communities have launched mobile clinics which provide MAT. One [study](#) in New Haven found that mobile clinics that provide MAT and HIV/HCV services are more appealing to some patients, even when there are other brick-and-mortar options available, especially for vulnerable and historically stigmatized populations. Colorado has recently launched a [broad effort](#) to expand access to MAT through a fleet of mobile MAT units. For information about examples of mobile MAT within New Jersey please contact the CoEs.
- **Applying lessons from other settings**
 - Global health and infectious disease programs have utilized methodologies such as direct-observed therapy and patient incentives. While direct-observed therapy is not new to MAT, there are new platforms - such as the video captured DOT platform, [emocha](#) - that was originally used for TB and HIV management and are now being utilized in MAT settings. In addition, the NIH is funding a [study to look at MAT medication adherence incentive programs](#). Various programs are also utilizing mobile technology to keep patients engaged and provide their treatment teams with more data and tracking. [this article](#) summaries two such tools - [re-set-O](#) and [A-Chess](#).
 - Note: The Center of Excellence is not specifically endorsing any IT platform, simply acknowledging the technology available for practices to consider.
- **Other pharmaceutical and technological advances**
 - A growing number of providers are transitioning patients onto extended-release injectable buprenorphine ([Sublocade](#)). Some plans are covering [Probuphine](#) - the subdermal buprenorphine implant. If you think this may be a good option for your patient, reach out to their MCO to learn about the requirements for prior authorization.
 - Another innovation has come through dispensing techniques - in 2017, Vermont piloted the [Med-O-Wheel](#) which is a locked dispensing device that released daily doses of buprenorphine for patients who were waiting for intake to an MAT program. They found the tool worked well, and it is available commercially for patients who may be interested in tools to help them monitor their medication intake.



- In summary, medication advances have utilized innovative vehicles (depot) for delivery of medications to the site of action to improve patient outcomes. This includes using various delivery methods such as liposomal, intradermal, or fluid nano-technology, which may be used to extend the release of medications to avoid the need for daily dosing.

Additional information/resources: (links, etc.)

- California Health Care Foundation, [Innovation Landscape: Telehealth MAT](#). June 2019.
- Rural Health Information Hub, [Telebehavioral Health and Opioid Use Disorder - RHlhub Toolkit](#)
- Pew, [Innovative Approaches Can Help Improve Availability of Opioid Use Disorder Treatment](#)

