

Substance Use Disorder and Patient Identification

Module 2



Today's Presenters

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Program Manager for MI-CCSI's involvement in the Michigan Overdose Data to Action (MODA) program, content expert, faculty member, and participant in practice transformation initiatives. Dr. Nolan has experience in community, specialty, and ambulatory pharmacy.



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Trainer for MI-CCSI with care management experience in the primary care, behavioral health, and payer settings. She has trained hundreds of clinicians on the care management process and motivational interviewing. Her love of and partnership with patients, families and clinicians is rooted in early work as a psychiatric nurse and the deep conviction that care management is a privilege and calling.

Disclosure

MI-CCSI, or the presenter, does not have any financial interest, relationships, or other potential conflicts, with respect to the material which will be covered in this presentation.

Patient-Centered Treatment for Substance Use Disorder in Primary Care

Clinical





Module	Title
1	Navigating Buprenorphine Prescribing for the Primary Care Physician
3	Buprenorphine Medical Management: Monitoring the Patient
5	Challenging Clinical Scenarios in MOUD: Early Refills and Lost or Stolen Medication
7	Complex Cases in Buprenorphine Treatment, Part 1
9	Complex Cases in Buprenorphine Treatment, Part 2
11	Pain and Addiction

Operational

Module	Title
2	Substance Use Disorder and Patient Identification
4	OBAT Eligibility, Intake and Assessment
6	Patient Support for Induction and Maintenance
8	Operationalizing Team Meetings, Systematic Case Review, & Documentation
10	Team Roles and Responsibilities
12	Supporting the Patient Beyond Buprenorphine

OBJECTIVES

At the conclusion of this presentation, the participant will be able to:

-  **Identify key components of office-based addiction treatment (OBAT)**
-  **Understand the importance of identifying patients with substance use disorder (SUD) within your population.**
-  **Describe systematic ways of using data to identify patients with substance use disorder in your practice.**
-  **List screening tools available to assist with the process of patient identification.**

AGENDA

1	Introduce Office-Based Addiction Treatment (OBAT)
2	Importance of Patient Identification
3	Using Data for Population Management
4	Operationalizing Patient Identification
5	Practice Interviews

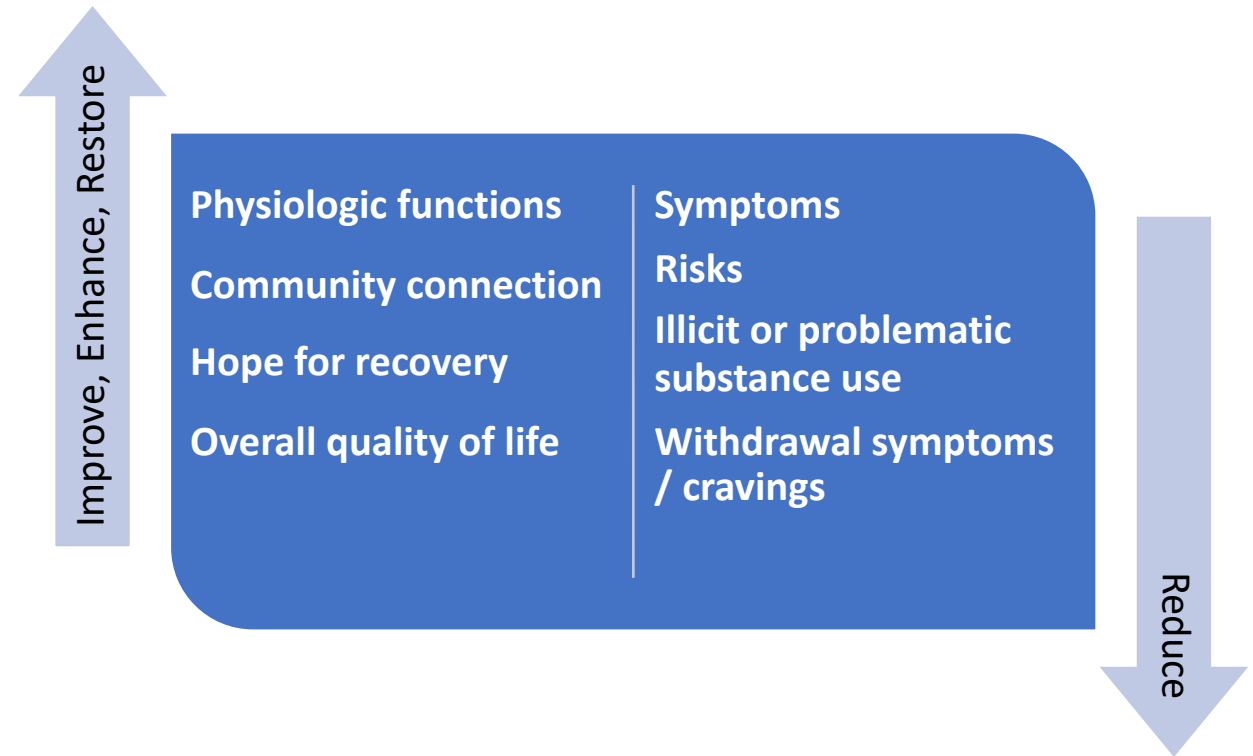
Office-Based Addiction Treatment (OBAT)

An Overview

Office-Based Addiction Treatment (OBAT)

Overview

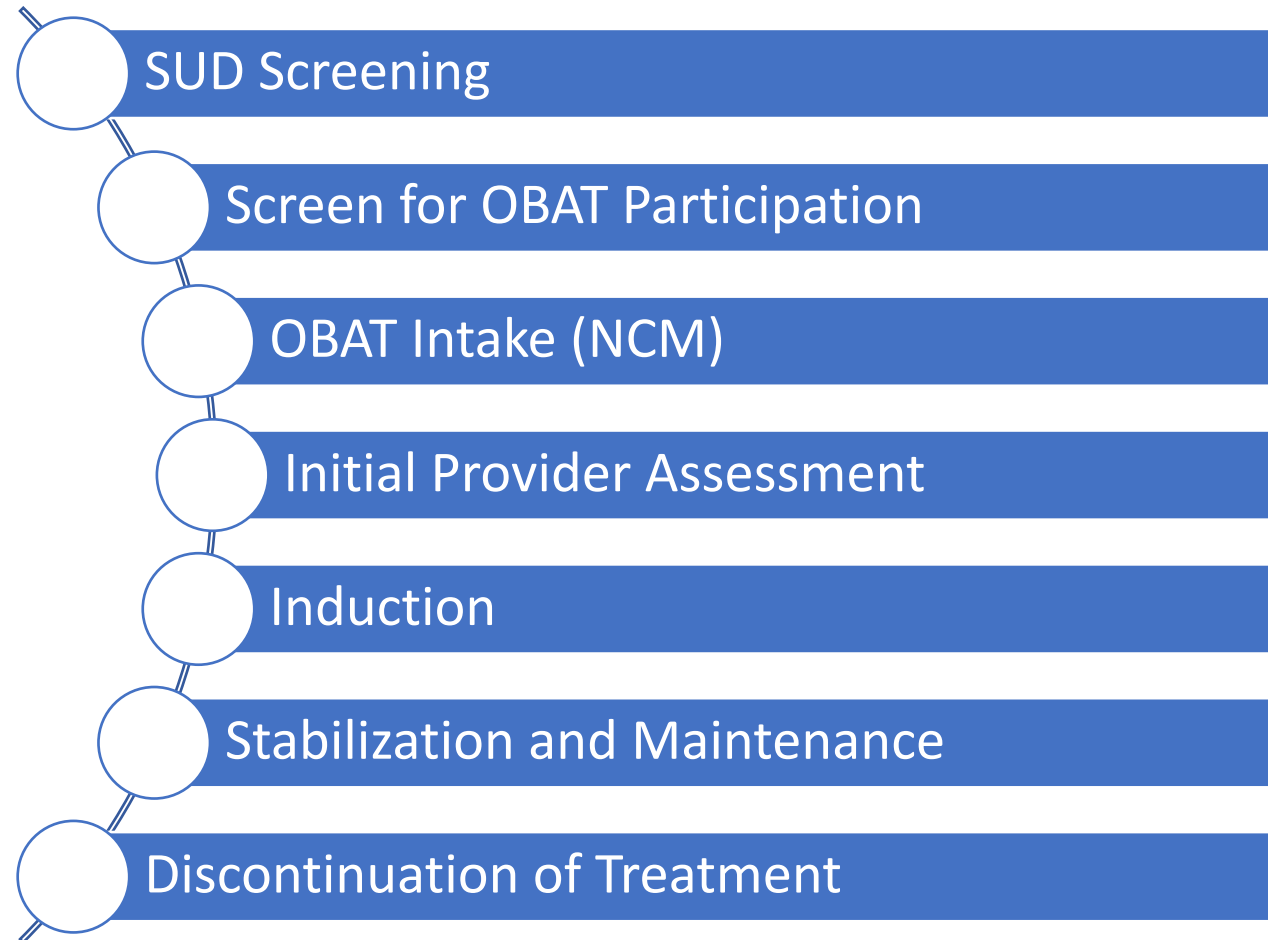
- Patient-focused
- Evidence-based
- Primary care / community model
- Offer of medication and psychosocial therapies as a component of a comprehensive care plan
- Select patients identified via screening may be candidates for OBAT



Reference Massachusetts Nurse Care Model of Office Based Addiction Treatment: Clinical Guidelines. (2021). Office Based Addiction Treatment Training and Technical Assistance. Boston Medical Center.
https://www.bmcobat.org/resources/index.php?filename=22_2021_Clinical_Guidelines_06.22.21.FINAL.pdf

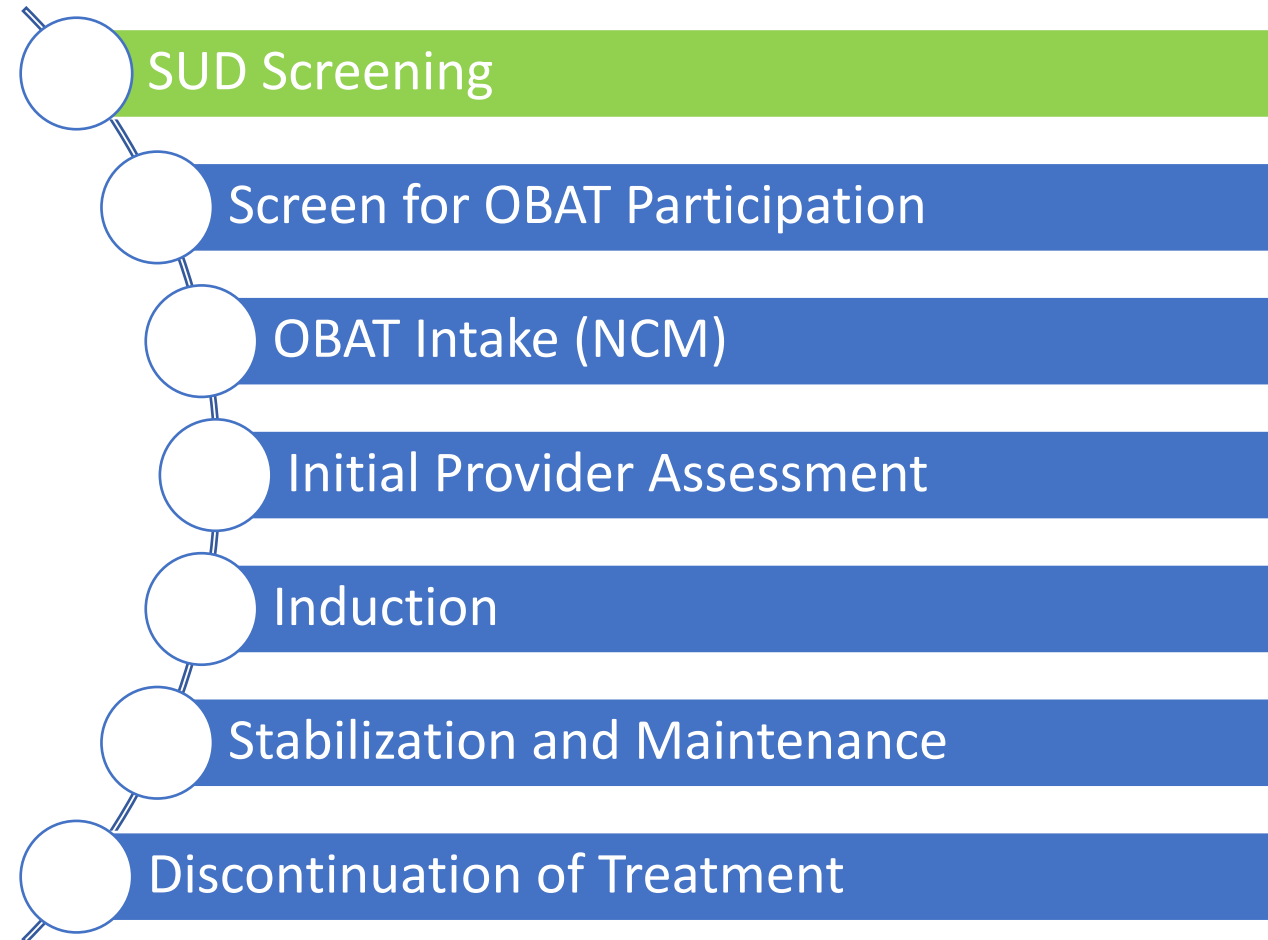
OBAT

Program Components



OBAT

Program Components



Importance of Patient Identification

The “Why”

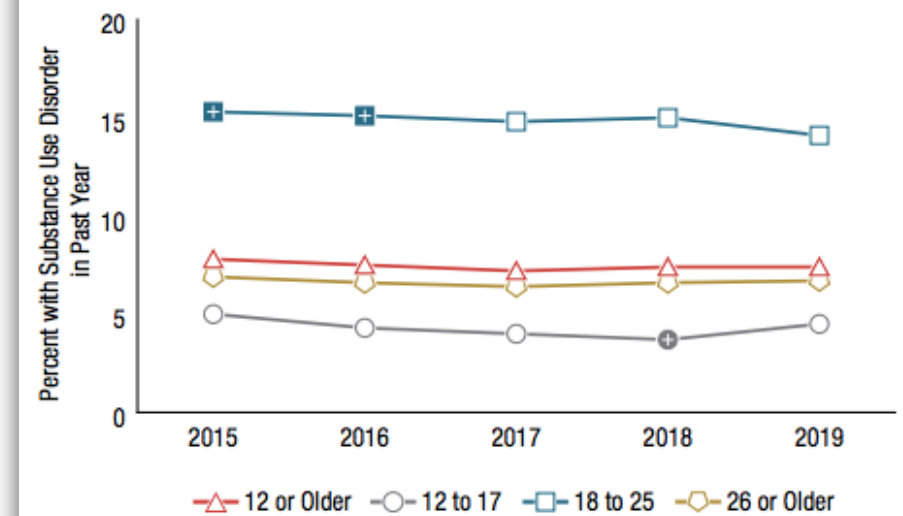
Substance Use Disorder

Hiding in Plain Sight

- “This isn’t a problem for my practice”
- “There aren’t that many patients with substance use disorder in my practice”
- “How do we know who these patients are?”

Reference - Substance Abuse and Mental Health Services Administration. (2020). Key substance use and mental health indicators in the United States: Results from the 2019 National Survey on Drug Use and Health (HHS Publication No. PEP20-07-01-001, NSDUH Series H-55). Rockville, MD: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. Retrieved from <https://www.samhsa.gov/data/>

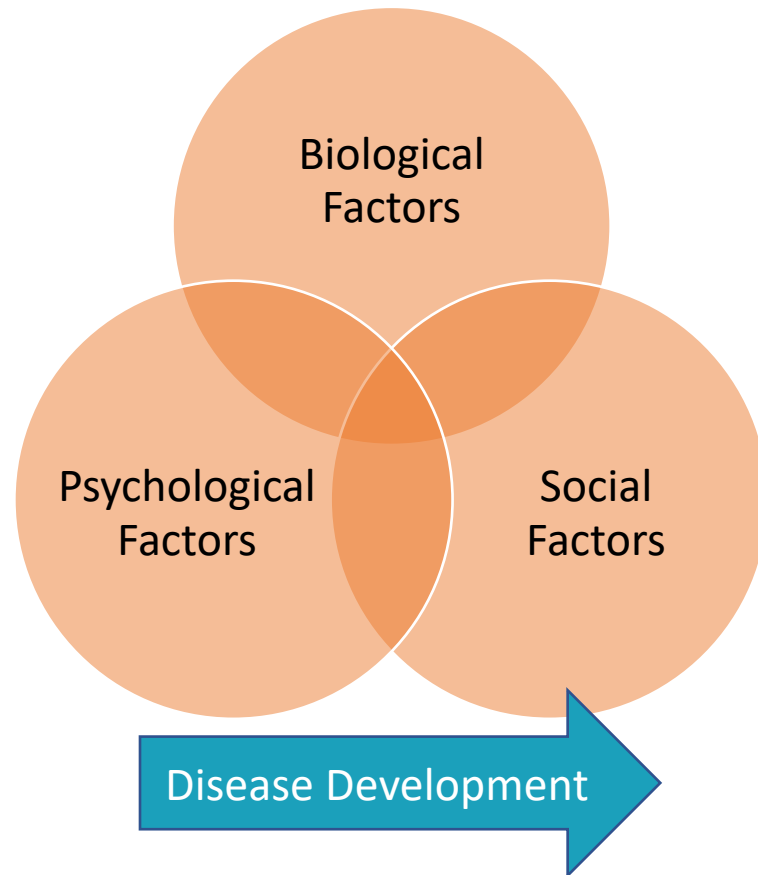
Figure 45. Substance Use Disorder in the Past Year among People Aged 12 or Older: 2015-2019



* Difference between this estimate and the 2019 estimate is statistically significant at the .05 level.

Substance Use Disorder

Biopsychosocial Model of Care



Consider the following condition:

- **Family history increases risk**
- **Medical treatment improves outcomes**
- **Access to care issues ↑ risk of death**

Depression or SUD?

References -

- Engel, George L. The need for a new medical model: a challenge for biomedicine. (PDF). *Science*. 1977;196(4286):129–36. Available from: <https://globalization.anthro-seminars.net/wp-content/uploads/2016/11/Need-for-a-New-Medical-Model-A-Challenge-for-Biomedicine.pdf>. Accessed April 7, 2020.
- Loeser JD and Cahana A. Pain medicine versus pain management: ethical dilemmas created by contemporary medicine and business. *Clin J Pain*. 2013;29(4):311-6)

Substance Use Disorder

Parallels With Other Chronic Conditions

- **Goal is appropriate treatment**
- **Proactive approach is ideal**
- **Consideration for baseline and continuous screening**



Population Management

Using Data as a Tool

Population Management

A Journey



Population Management

Customize for your Population

- **Outreach after ED visit for overdose**
- **Screen patients at “high risk”**
- **Regular screening for all patients**
- **Use registry data**
- **Admission, Discharge, Transfer (ADT) feed**
- **Warm handovers**

Population Management

Defining a Scope

- Diagnostic criteria
- Medical & medication history
- Quality measures



Diagnostic Criteria

DSM-V Criteria for SUD

Problematic pattern of use leading to clinically significant impairment/distress manifested by ≥ 2 of these within 12-months:

<input type="checkbox"/> Larger amounts or over a longer period than was intended
<input type="checkbox"/> Persistent desire or unsuccessful efforts to cut down or control use
<input type="checkbox"/> Great deal of time is spent in activities necessary to obtain, use, or recover from substance's effects
<input type="checkbox"/> Craving or a strong desire or urge to use
<input type="checkbox"/> Recurrent use resulting in a failure to fulfill major role obligations
<input type="checkbox"/> Continued use despite persistent/recurrent social/interpersonal problems caused/exacerbated by use
<input type="checkbox"/> Important social, occupational, or recreational activities are given up or reduced because of use
<input type="checkbox"/> Recurrent use in situations in which it is physically hazardous
<input type="checkbox"/> Continued use despite knowledge of persistent/recurrent physical/psychological problem that is likely to have been caused or exacerbated by use
<input type="checkbox"/> Tolerance
<input type="checkbox"/> Withdrawal

Reference - Dugosh, K. L., & Cacciola, J. S. (2021). Clinical assessment of substance use disorders.. UpToDate. Retrieved July 6, 2021, from https://www.uptodate.com/contents/clinical-assessment-of-substance-use-disorders?search=clinical-assessment-of-substance-use%20disorders&source=search_result&selectedTitle=1~150&usage_type=default&display_rank=1

Medical & Medication History

Using Data

- **Prescription and non-prescription drug use**
- **Morphine milliequivalent (MME)**
- **State Prescription Drug Monitoring Program (PDMP)**
- **Naloxone utilization**
- **ER visit(s) for overdose**
- **Registries**

Quality Measures

Using Data

- **Provide opportunities to “zoom in” on specific cohorts within your population**
- **Data may already be available within your organization**

Examples

- Electronic clinical quality measures (eCQMs) – government programs
- CDC-supported quality improvement (QI) measures
- Pharmacy Quality Alliance (PQA) endorsed measures

References -

- <https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/ClinicalQualityMeasures>
- https://www.cdc.gov/drugoverdose/pdf/prescribing/CDC-DUIP-FactSheet-At-A-Glance_Opioid-Measures-508.pdf
- <https://www.pqaalliance.org/pqa-endorses-new-opioid-measures>

Operationalizing Patient Identification Tools

PATIENT IDENTIFICATION

Where to Start?

- Understand current state and define goals
 - Where is your practice team on the reactive / proactive continuum?
 - Work with patients defined as high risk or screen?
 - Screen who (and when)?



TOOLS

Different Tools for Different Needs

Data

Screening
Tools

Workflows

DATA

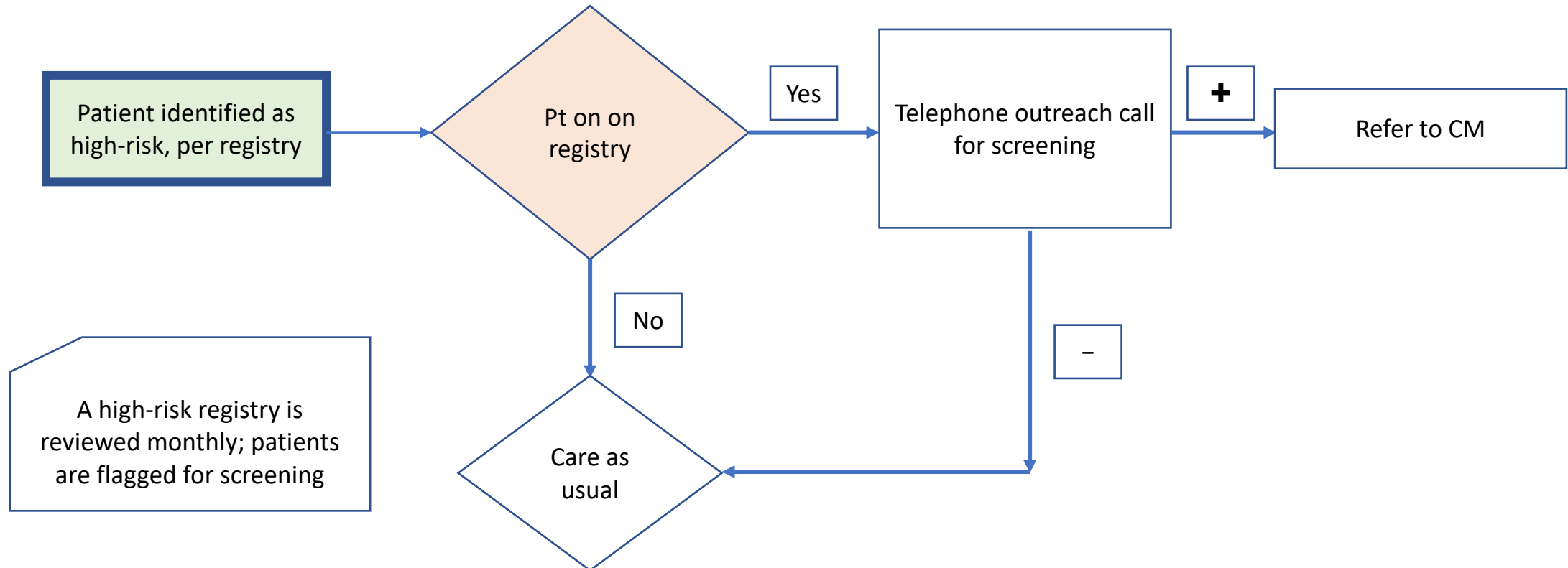
Data as a Tool

- **Organizational teams**
 - Analytics
 - Quality
- **Payer organizations**
- **Registries**
- **ADT feeds**



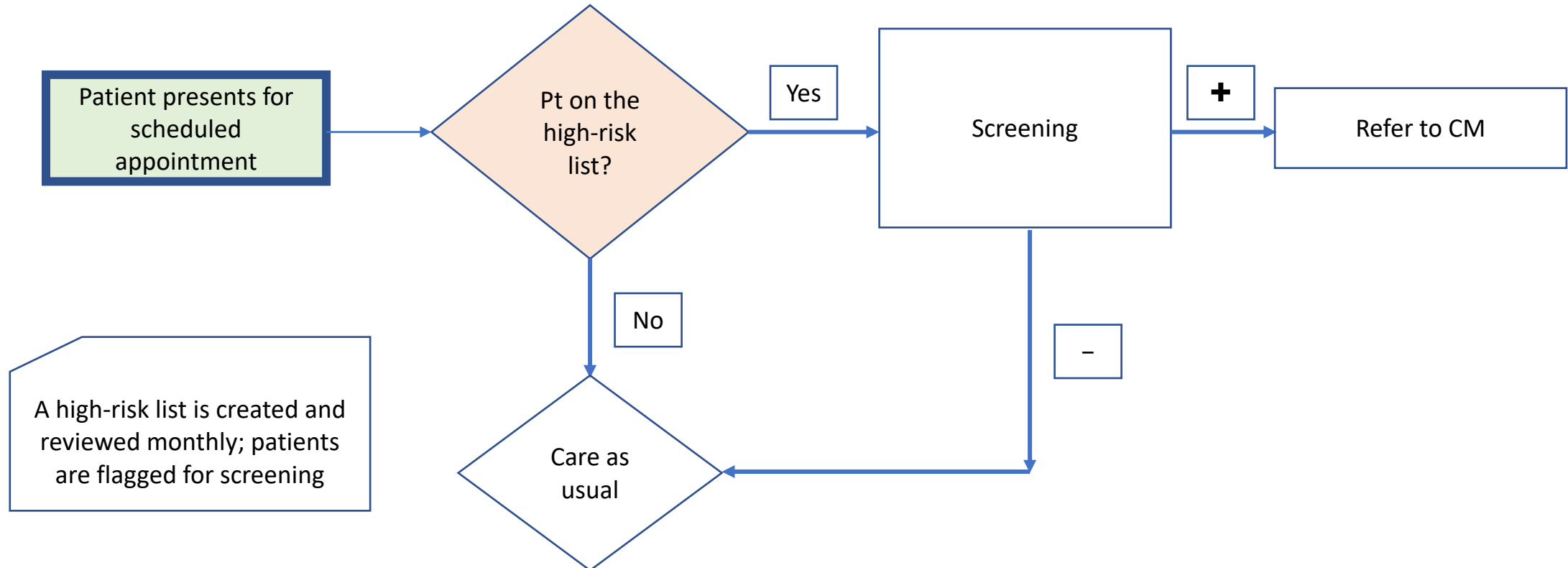
SAMPLE WORKFLOW

Telephonic Outreach to High-Risk Patient



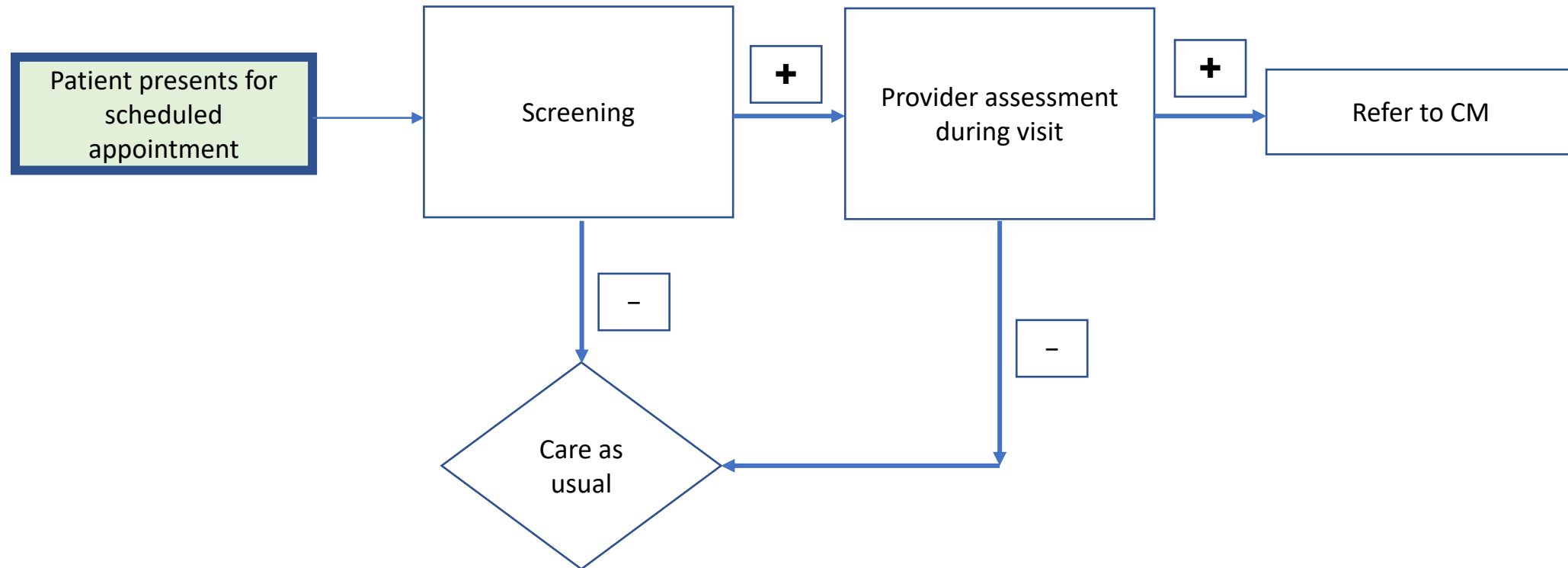
SAMPLE WORKFLOW

In-Person Visit with High-Risk Patient



SAMPLE WORKFLOW

In-Person Visit – Universal Screening



PATIENT IDENTIFICATION

Practical Considerations for Screening

- **Who will conduct the screening?**
- **When will the screening be done?**
- **Note:**
 - **Your EHR may have the ability to integrate a particular tool into your workflow**
 - **Many written and electronic open-access tools exist**

SCREENING

Example Tools

- **Single-question screen**
- **Drug Abuse Screening Test (DAST-10)**
- **National Institute on Drug Abuse Modified Alcohol, Smoking, and Substance Involvement Screening Test (NIDA Modified ASSIST / NM ASSIST)**

SINGLE-QUESTION SCREEN

Additional Details

- “How many times in the past year have you used an illegal drug or used a prescription medication for non-medical reasons?”
 - ≥ 1 considered positive
- Workflow integration mirroring PHQ-2/9 for depression

Reference - Smith PC, et al. A Single-Question Screening Test for Drug Use in Primary Care. Arch Intern Med. 2010;170(13):1155-60. Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2911954/pdf/nihms176758.pdf>

DAST-10

Additional Details

Have you used drugs other than those required for medical reasons?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Do you use more than one drug at a time?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Are you always able to stop using drugs when you want to?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Have you had "blackouts" or "flashbacks" as a result of drug use?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Do you ever feel bad or guilty about your drug use?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Does your spouse (or parents) ever complain about your involvement with drugs?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Have you neglected your family because of your use of drugs?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Have you engaged in illegal activities in order to obtain drugs?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Have you ever experienced withdrawal symptoms (felt sick) when you stopped taking drugs?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Have you had medical problems as a result of your drug use (e.g., memory loss, hepatitis, convulsions, bleeding, etc.)?	<input type="checkbox"/> No	<input type="checkbox"/> Yes

References - Instrument: Drug Abuse Screening Test (DAST-10). Instrument: Drug Abuse Screening Test (DAST-10) | NIDA CTN Common Data Elements. (n.d.). <https://cde.drugabuse.gov/instrument/e9053390-ee9c-9140-e040-bb89ad433d69>

SCREENING – EXAMPLE TOOL

NIDA-Modified ASSIST (NM ASSIST)

+ NIDA Drug Screening Tool NIDA-Modified ASSIST (NM ASSIST)

Clinician's Screening Tool for Drug Use in General Medical Settings*

In the past year, how often have you used the following?

Alcohol (For men, 5 or more drinks a day. For women, 4 or more drinks a day)

Never

Once or Twice

Monthly

Weekly

Daily or Almost Daily

Tobacco Products

Never

Once or Twice

Monthly

Weekly

Daily or Almost Daily

Prescription Drugs for Non-Medical Reasons

Never

Once or Twice

Monthly

Weekly

Daily or Almost Daily

Illegal Drugs

Never

Once or Twice

Monthly

Weekly

Daily or Almost Daily

PREVIOUS

NEXT

Reference - NIDA. NIDA-Modified ASSIST (NM ASSIST). NIDA Drug Screening Tool. <https://archives.drugabuse.gov/nmassist/step/0>

SCREENING – EXAMPLE TOOL

NIDA-Modified ASSIST (NM ASSIST)

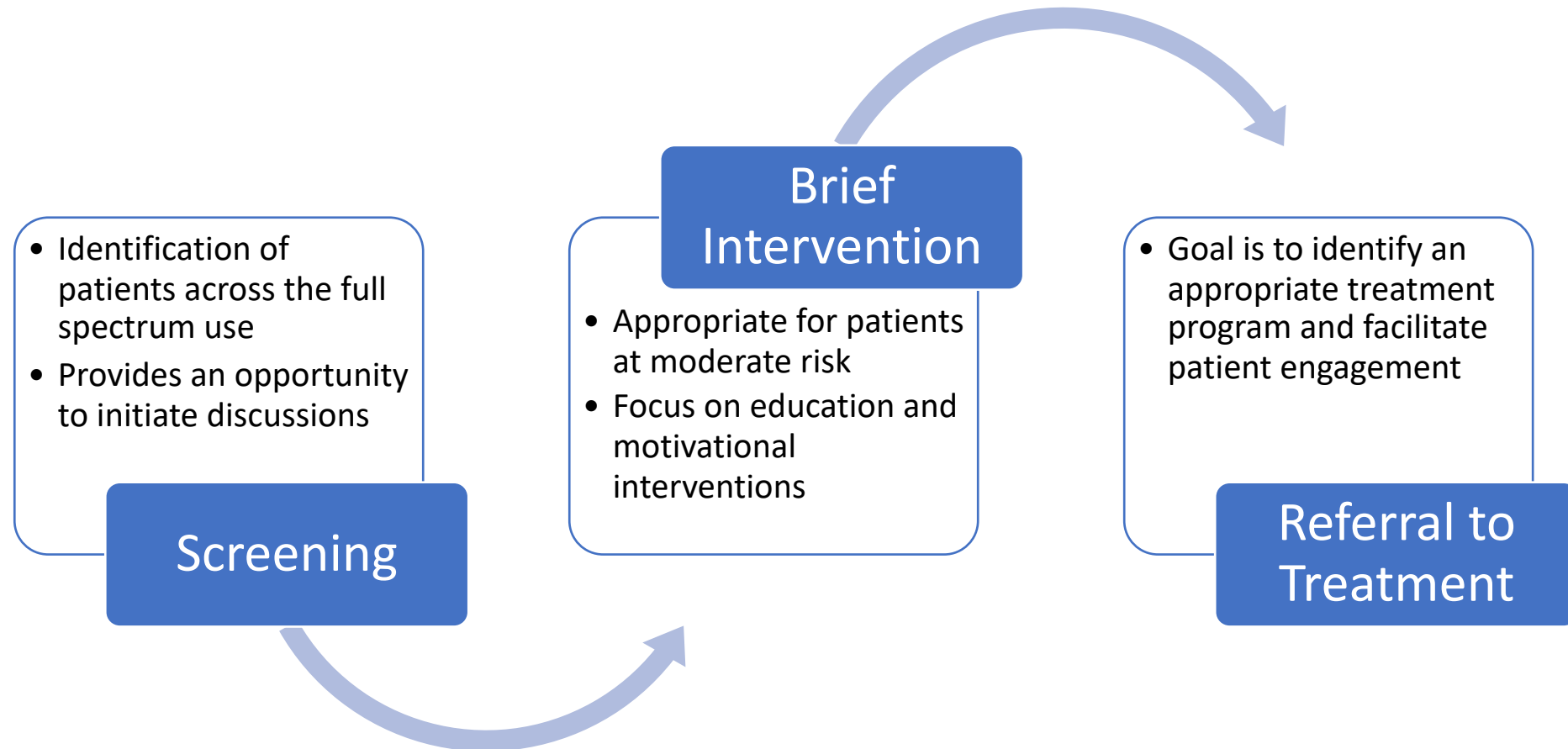
- Tool guides the user through a series of question
- Risk level, information about continued use, treatment options, and vulnerabilities are shared based on responses

Substance Involvement Score- Risk Level		
HIGH	MODERATE	LOW
Score >27	Score 4-26	Score 0-3
<ul style="list-style-type: none">• Provide feedback on the screening results• Advise, Assess and Assist• Arrange referral• Offering continuing support	<ul style="list-style-type: none">• Provide feedback on the screening results• Advise, Assess and Assist• Consider referral based on clinical judgement• Offering continuing support	<ul style="list-style-type: none">• Provide feedback• Reinforce abstinence• Offer continuing support

Reference - NIDA. NIDA-Modified ASSIST (NM ASSIST). NIDA Drug Screening Tool. <https://archives.drugabuse.gov/nmassist/step/0>

A NOTE ON SBIRT

Screening, Brief Intervention, and Referral to Treatment



References -

- <https://store.samhsa.gov/sites/default/files/d7/priv/sma13-4741.pdf>
- <https://www.samhsa.gov/sbirt/about>

HOMEWORK

Action Period

Identify the tool your team will use to identify patients across the continuum of SUD



Thank You

Please email Claire.Nolan@miccsi.org with any questions.

Examples From Practice

Substance Use Disorder and Patient Identification

Describe the journey your practice has taken to implement more robust processes to screen for substance use disorder.