DEPARTMENT OF BEHAVIORAL HEALTH AND INTELLECTUAL disability Services

Summer 2020 Fact Sheet 2

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ADVANCING THE SUBSTANCE USE DISORDER (SUD) TREATMENT CONTINUUM

DBHIDS Response to the Opioid Crisis

DBHIDS is continuing its concerted efforts to increase the availability of and access to Medication Assisted Treatment (MAT) in all forms across all levels of care.

- Significantly increased availability of Buprenorphine and Naltrexone XR at Opioid Treatment Programs
- Opened a partial hospitalization program, Pathways to Recovery, offering MAT and cooccurring treatment
- Opened a 24/7 Access Point offering same-day withdrawal management serves
- Launched the Mobile Outreach Program which engages individuals daily in Kensington utilizing innovative approaches, and the Mobile Engagement Unit, which is offering MAT inductions in the Kensington area

- Added 8 Early Intervention Programs
- Expanded the Recovery Overdose Survivor
 Engagement (ROSE) Project to include Temple
 Main in addition to Temple Episcopal and increased capacity to connect at-risk individuals to treatment at those locations
- Launched a MAT initiation program at Temple Episcopal Crisis Response Center
- Issued 11 grants to Recovery House providers for improvements and capacity increases, totaling more than \$250,000

SUD Treatment Continuum

Within DBHIDS, Community Behavioral Health (CBH) manages the behavioral health services for Medicaid beneficiaries while the Division of Behavioral Health (DBH) manages care for uninsured individuals and various recovery support services.















































DBHIDS.org/contact/resources



^{*}Coordinated Response to Addiction by Facilitating Treatment (CRAFT)

^{**}Federally Qualified Health Center (FQHC)

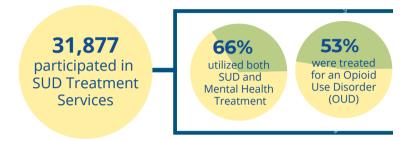
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ADVANCING THE SUBSTANCE USE DISORDER (SUD) TREATMENT CONTINUUM

SUD Utilization Data

(1/1/18 - 12/31/18)



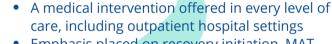
MAT System Transformation

DBHIDS employed a more comprehensive response by transforming the practice of detoxification to withdrawal management.

Detoxification

- Isolated level of care; Siloed programs
- Emphasizing detox as the major entry point for treatment strains the perceived availability of treatment
- Individuals who receive only detoxification are at greater risk of relapse and overdose
- Inconsistent with current evidence based practice

Withdrawal Management





- Emphasis placed on recovery initiation, MAT stabilization, and engagement in sustained treatment
- Expansion of withdrawal management in various settings will reduce perceived unavailability of treatment slots

Multiple studies have proven that Medication Assisted Treatment in combination with psychosocial treatment is effective in:

DBHIDS is linking individuals to a MAT treatment provider to align with best practice and out of concern that numerous individuals are cycling through detox and residential treatment.

- Reducing mortality
- Lessening illicit opioid use
- ✓ Increasing retention in treatment
- ✓ Lowering criminal justice consequences of substance use
- ✓ Diminishing overall health care and societal costs

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