

Maternal Opiate Medical Support (M.O.M.S.) Pilot Project Program Abstracts

Health Recovery Services, Inc. (Athens County)

The proposed project will be based at the facility operated by Health Recovery Services, Inc. located at 224 Columbus Road, Athens, Ohio. Outpatient counseling and MAT services will be offered at that location also. Additional services will be delivered at the site of project partners including Athens Medical Associates Obstetric Gynecology, and University Medical Associates. Other partners including Integrated Services of Appalachian Ohio (ISAO), and the Ohio University Heritage College of Osteopathic Medicine Office of Community Health Programs Family Navigator/Pathways Program will deliver home based and community based services. Potentially as many as 150 pregnant women will be served and a conservative estimate is that at least 90 will complete programming.

The primary medication to be utilized will be buprenorphine, with Suboxone and Vivitrol (postpartum) also being available. During the first year Methadone will be available through referral from a facility operated by HRS in Jackson, Ohio, while it is anticipated by year 2 the primary facility in Athens, Ohio will be certified to provide Methadone.

Treatment services in addition to MAT include outpatient and intensive outpatient services, residential services, and access to detox services by referral. Vocational and job placement services will include vocational assessment, and educational assistance/dropout recovery programs

Key positions include the Project Medical Director/OBGYN physicians, Project Director, Project Coordinator, MAT physicians, nurses to assist in MAT, counselors, case managers, Family Navigators, and Behavioral Health counselors.

Critical factors the project intends to achieve include establishing an infrastructure that allows the project to provide identification and intervention in the first trimester, effective MAT and treatment and a rich array of ancillary services. The anticipation is to reduce the coincidence of NAS.

Collaborative partners are designated above.

Most aspects of the project are underway and the project plans to open within 2 weeks of the start date. The project requests funding for a period of three years. Aside from revenue generated from Medicaid billing, other funding is not anticipated. Total projected cost is \$600,000.

MetroHealth Medical Center (Cuyahoga County)

The MetroHealth System is a public health system committed to providing care to everyone in Cuyahoga County, Ohio. It is organized and operated under Chapter 339 of the Ohio Revised Code. It consists of a 550-bed acute care hospital, the largest Emergency Department in the region, and 16 community health centers distributed throughout the County. The Magnet-credentialed MetroHealth Medical Center, the flagship of the system, provides care to nearly 30,000 inpatients, including 2,900 newborns annually, and boasts a superb high risk obstetrics service that has the only Maternal-Fetal medicine fellowship in the city and a level 3 NICU capable of caring for the smallest, sickest infants. MetroHealth Medical Center is recognized by the Ohio Department of Mental Health and Addiction Services as a provider for both mental healthcare and addiction treatment. MetroHealth has been an invaluable asset to the Cleveland area for 176 years.

The proposed pilot program will be coordinated from the main campus of MetroHealth Medical Center. The strength of this pilot is that it assembles resources that currently exist in the community and stitches them together into a “quilt” designed to wrap around opiate dependent pregnant women to facilitate the pregnant woman having the best possible outcome for herself and her baby. Each portion of the treatment plan has duplicate providers such that the grant is not dependent on any one agency for success.

The grant proposes to serve 50 patients per year for a total of 125 women over the course of the grant. This pilot will start opiate dependent pregnant women on Subutex rather than the current medication used in pregnancy, methadone. Subutex has been associated with less neonatal dependency and less time in the hospital for newborns exposed to it when compared with methadone (from 9.9 days in the hospital to 4.1 days). {Jones, NEJM, 2010} While the multidisciplinary opiate dependent mother’s clinic at MetroHealth is currently seeing close to 100 patients/year, it is anticipated that not all of these patients will present at <24 weeks or meet the pilot’s criteria for starting Subutex. Thus, we conservatively estimate enrolling 125 women over the 2.5 years of the grant.

There are several key components to the pilot: medical care (including prenatal, delivery, and postnatal care, nutrition, childbirth education, addiction psychiatry, neonatal care, general pediatric and behavioral pediatric care, hepatology and infectious disease care, and long term maternal primary care), MAT care (prescriptions for Subutex and monitoring with toxicology screens), drug treatment (intensive inpatient or outpatient care as appropriate, mutual aid groups), and ancillary services (GED, vocational, literacy, housing, and daycare). We will also collaborate with the Department for Child and Family Services (DCFS), the Cuyahoga County Common Pleas drug court, Medicaid managed care, and the local ADAMHS board. These components of care will be brought together by a care coordinator and supported through the grant.

Each of our key components of care has duplication so that the grant is not dependent on any one community group. Our collaborator, University Hospitals, provides an alternative clinical site allowing for better geographic access for patients. Our MAT sites include Center for Community Action Against Addiction (CAAA), Rosary Hall, and Dr. Greg Boehm. Drug

treatment will be provided by Rosary Hall, Recovery Resources, Dr. Boehm, Matt Talbot House and Hitchcock Center for Women which also offers inpatient treatment and sober housing post treatment. For ancillary services including literacy, GED training and job readiness, our partners are Seeds of Literacy, the May Dugan House, and Merrick House which also provides day care services. Providence House, a residential facility for children when their mothers are in crisis or inpatient rehab, has agreed to work with us for 24/7 child care while mothers are in intensive drug treatment.

The grant requests \$395,170 over 2.5 years to support: the care whose roles is pivotal to the program's success; a data entry associate to meet the data collection/submission requirements; increased addiction psychiatry resources; and co-located OB/GYN and addiction psychiatry resources at University Hospital. As the multi-disciplinary clinic at MetroHealth is already operational, we can start new patients on Subutex rather than methadone as soon as grant funding begins. The clinics at University Hospitals currently see opiate dependent mothers but do not have co-located services; we anticipate that the co-location will begin in March 2014.

We anticipate that this pilot program will show significant cost savings for the insurers as a result of reduced admissions to the neonatal intensive care unit (NICU) due to a decrease in frequency, intensity and duration of neonatal abstinence syndrome (NAS) in the babies born to pregnant mothers treated in our program with Subutex. At the conclusion of the grant period, we expect to be able to show insurers that reimbursement for care coordination services will result in better outcomes and lower costs of care leading to program self-sufficiency through clinical revenues.

We anticipate \$3.75 million in revenue from Medicaid billing for the 125 women and their babies served. We have additional support through a grant from the March of Dimes that will continue through February of 2014. We have applied for a March of Dimes renewal. Thus, we anticipate that the State support in grant form would only be needed for the 2.5 years of the grant period. Clinical billing and philanthropy should cover services beyond that time.

CompDrug, Inc. (Franklin County)

It is the mission of Central Ohio Coordinating Obstetrics & Addiction to improve Child Health (CO-COACH) Pilot Project to identify gaps in care for drug-addicted expectant moms and their babies impacted by Neonatal Abstinence Syndrome (NAS), and increase access to resources for this population. This will be accomplished both by enhancing services in the community and through the creation of a patient-centered medical home housed by Nationwide Children's Hospital to offer comprehensive obstetric and pediatric care, counseling, Medication-Assisted Treatment (MAT), and case management for the duration of pregnancy and the first postpartum year. FDA approved medications for MAT that will be used by CO-COACH partners will include buprenorphine/naloxone and methadone. The total cost of the Central Ohio MOMS Project is \$597,093.00.

As a pilot, the project will support interventions and prenatal treatments that improve outcomes for roughly 75-100 women and babies. The key medical personnel involved in this project include physicians Krisanna Deppen, MD; Mona Prasad, DO, MPH; and Barry Halpern, MD. The measurable objectives/critical success factors are to:

1. Increase in timely access to resources for opiate addicted pregnant women
2. Improved neonatal outcomes, assessing: APGARS, birth weight, gestational age, NICU admission, urine drug screens, breastfeeding, newborn weight gain, neonatal demise
3. Improved maternal outcomes, assessing; premature prolonged rupture of membranes, preterm labor, abruption, stillbirth, maternal weight gain, compliance with care, % positive utox in third trimester, smoking cessation
4. Improved family stability as measured by avoiding the need for children in the foster care system and other ancillary services
5. Reduced costs associated with NAS including shortening the length of stay of babies in Neonatal Intensive Care Units (NICU) by 30%.

The Central Ohio community has seized the opportunity to collaborate on the MOMS project, and to align efforts toward this population. Organizations represented include: Amethyst, Inc.; Central Ohio Newborn Medicine; CompDrug, Inc.; Franklin County Children Services; Maryhaven; Nationwide Children's Hospital; OhioHealth/Grant Family Medicine; and OSU Wexner Medical Center, to name a few. Each organization contributes uniquely to the optimization of care for the opiate-addicted pregnant woman and her newborn baby.

The pilot is predicated upon providing compassionate, non-judgmental care, beginning with a single phone call to a centralized phone line with knowledgeable staffing provided by the Stable Cradle program at Maryhaven. They will be charged with triaging phone calls, efficiently directing patients to appropriate resources, and providing intake services. The pilot will limit the focus to Franklin County mothers, 18 years of age or older, experiencing their first pregnancy and able to be enrolled prior to 20 weeks gestation. Expectant mothers who do not meet these criteria will be referred to existing community resources available to opioid-addicted pregnant women.

Four to eight weeks of transitional housing is provided by Amethyst with funding from ADAMH; Maryhaven will also provide up to 60 days of residential housing. Vocational and job training modules are provided onsite at CompDrug that include employability training (basic computer and software skills development, business reading and math, professionalism, emotional intelligence, a national customer service certification, resume writing and job search supportive services) to ensure sustainable employment. Family wrap-around services, including home visits, will be provided by Maryhaven/Stable Cradle. Addiction and smoking cessation will be supplied through services offered at CompDrug, Maryhaven and Amethyst.

Newborn deliveries will primarily take place at OhioHealth's Grant Medical Center, where neonatal transition will occur under the direction of Dr. Barry Halpern. Postpartum care for the mother is coordinated by Stable Cradle, and includes 4-8 weeks of residential care at Amethyst followed by outpatient care in the mother-infant dyad clinic at Nationwide Children's Hospital for 12-18 months after the baby is born.

Staff positions include: Amethyst Registered Nurse, Stable Cradle Mentor, Coordinator, Clinical Supervisor and a Licensed Independent Chemical Dependency Counselor. Contract positions are for the co-medical directors.

The CO-COACH program will start January 1, 2014 and end June 30, 2016. As noted in the timeline work on starting the Pilot will begin immediately and be operational as soon as possible. State support is needed on an ongoing basis to cover the gaps of services.

First Step Home, Inc. (Hamilton County)

First Step Home is a residential and outpatient treatment program dedicated to women's centered care for addictions and co-occurring mental health and trauma related issues. The agency is nationally accredited by CARF and certified to provide services by the Ohio Department of Drug and Alcohol Services and the Ohio Department of Mental Health. The agency is focused on bringing best practices, collaborative partnerships, and diversification of funding needed to address the needs of women of all ages and life stages to the recovery process. Our plan is to expand the current Maternal Addictions Program into to more hospitals and extend the services to more women in Hamilton County and eventually into Clermont County. The primary site would be the 2203 Fulton location located in the Walnut Hills section of Cincinnati. The agency was founded in 1993 in response to the need for a residential treatment facility that would permit children, ages 0 through 12, to live with their mother during treatment. This facilitated increased participation by women in Hamilton County in substance abuse treatment and reduced the barrier of women being forced to place their children in foster care for extended periods of time. The agency serves single women and pregnant women, women with criminal justice system involvement, and women with long histories of abuse.

The agency treats over 300 women and 130 children per year. First Step Home provides individual and group counseling, housing, life skills training, case management, financial counseling, access to medical care, on-site child care, vocational assistance and twelve step meetings. Upon completion of the residential program, women have the opportunity to move into intensive outpatient treatment and transitional housing supervised by First Step Home where they are surrounded by other women and children in recovery. Following this period, they attend continuing care sessions for up to 18 months in support of their recovery

In the fall of 2011, First Step Home invited several agencies and health care providers in the Greater Cincinnati area to work more closely together to address the needs of pregnant women addicted to opiates and their children. Staff from Good Samaritan Hospital, Crossroad Health Center, and First Step Home readily agreed that the problem is growing and welcomed the opportunity to work in a more coordinated and integrated way. A planning grant was secured from the Health Foundation to research best practices emerging in the field and to forge collaborative efforts to achieve a more integrated and comprehensive approach to meeting the needs of these women and their children. Many of these women have complex histories of trauma and abuse. At this time, 75% of the current residents of First Step Home have been victims of sexual abuse. The complexity of simultaneous recovery treatment, healing from trauma, sustaining a healthy pregnancy, and preparing for the birth and care of a newborn child will be enhanced by the coordinated efforts of the Maternal Addictions Partners.

The planning process explored current research on best practices, successful models for integration of care, and local resources. Additional partners such as Healthy Moms and Babes were invited into the process in order to achieve the comprehensive range of services needed by both the women and their children. A high degree of collaboration and communication took place throughout the planning process and the role of each partner was defined and adapted to focus more effectively and efficiently on meeting the needs of this target population. It was estimated that 75 women per year would be served by the Maternal Addictions Program at First Step Home.

The prenatal and maternity care will be provided by Good Samaritan Hospital with services concentrated during a new dedicated clinic time. Good Sam's Opiate Addictions H.O.P.E. Team RN and social worker will work closely with First Step Home to coordinate each woman's care and serve as a major referral source for addicted women who seek care for their pregnancy. Good Samaritan Hospital delivers most of the babies born to these mothers in the Greater Cincinnati area. University Hospital will serve as the secondary location for the pilot through their high risk pregnancy center located in Mt. Auburn. In year three, Mercy Anderson will be added to provide services to women in Clermont County. Healthy Moms and Babes will bring its expertise on site at First Step Home to provide individualized prenatal education and ongoing child development home visitation services to each family for the first two years of the infant's life. Mother and child will have a medical home at Crossroads Health for primary and pediatric care. The Center for Chemical Addictions Treatment will act as the lead on the MAT services and would provide a dedicated clinic to prescribe the Suboxone and Subutex. Therapeutic interventions will be provided by GLAD House for children ages 3 and up. Dress for Success will provide vocational supports such as job training and employment readiness services to all women as they process through the recovery cycle. Housing will be provided through First Step Home's Recovery Housing units and their permanent housing facility. Transportation will be provided through case managers using First Step Home vehicles.