Utilizing Peer Coaches in Primary Care for SUD Services

Lindsey Naeyaert, MPH, CHCEF

Michigan Primary Care Association

• MPCA is the voice of 45 community health centers that provide primary and preventive health care to more than 700,000 patients in rural and urban communities across Michigan. We advocate to influence and advance health policy in Lansing and Washington, D.C., and we offer operational support and training to our health centers to enhance the delivery of integrated care inclusive of primary care, dental, vision and behavioral health.

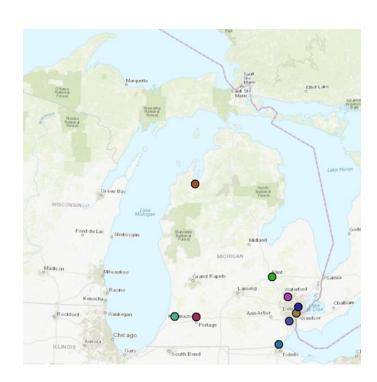
SUD Innovations Program Overview

Overview

- 9 health centers received funding
- Increase capacity to provide SUD treatment services and primary prevention and intervention
- Clinical team in each center with a community health worker or peer recovery coach.
- Follow ASAM guidelines for medication assisted treatment (MAT) services
- Health centers use HIT
- The overall purpose of the grant is to evaluate the use of a care team within a primary care setting to effectively treat people with a substance use disorder.

Participating Health Centers

- Advantage Health Centers
- Covenant Community Care, Inc.
- Family Health Center
- Family Medical Center of Michigan
- Hamilton Community Health Network
- InterCare Community Health Network
- Oakland Integrated Healthcare Network
- Traverse Health Clinic
- Western Wayne Family Health Centers



Goals and Objectives

- To provide a Substance Use Disorder (SUD) treatment model, offering MAT including Naltrexone, Buprenorphine, and Methadone*
- Provide a primary prevention and intervention plan in at least two health centers
 - Pregnancy
 - ACES
 - Adolescents
 - Individual and group therapy

Care Team

- Primary Care Provider
- Nurse Care Manager (BSN)
- Behavioral Health Provider (LMSW or LPC)
- Peer Recovery Coach or Community Health Worker
- Licensed Substance Use Disorder Provider or access to provider via contracted hours in FQHC

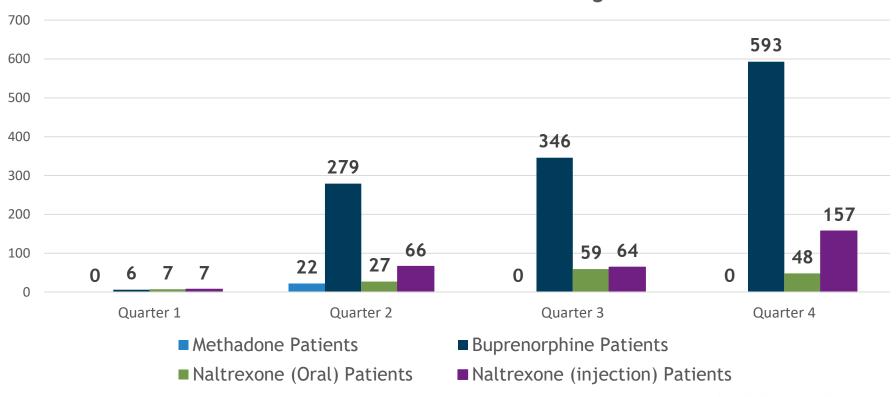


Year 1 Progress

- 798 MAT patients
- 76.36% Caucasian, 11.96% African American
- 66.57% 22-44 years old, 31.08% 45-64 years old
- 54.50% male

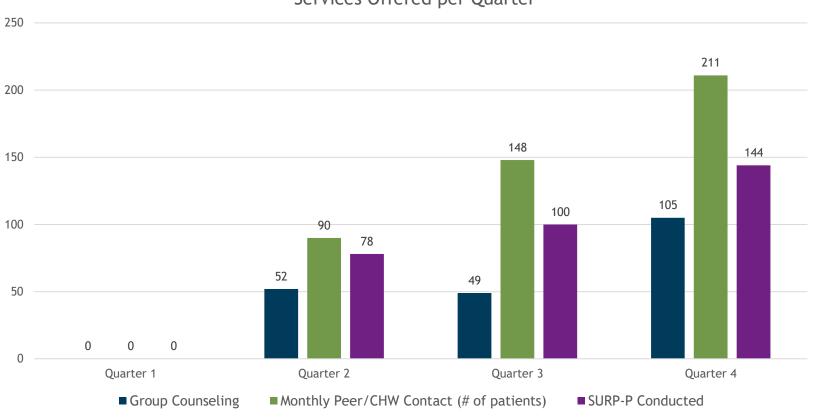
Year 1 Progress

Total Number of Patients Receiving MAT



Year 1 Progress

Services Offered per Quarter



Team Work Flow



Care Team Roles

Provider

- •DSM-5 Diagnosis Confirmation
- Determines Patient Eligibility
- Physical Exam
- Orders Labs
- Prescribes Medication
- Checks MAPS
- Opioid Start Talking Form
- Creates UDS/Bup. Film Count Schedule
- Consent for Treatment

Behavioral Health Provider

- Providers SUD Screener
- Patient History
- Age of first use, family history or addiction, history of mental health, trauma, military service, and sleep
- Craving assessment
- ACEs screening
- Patient Treatment Plan
- Individual and group counseling

Peer Recovery Coach or Community Health Worker

- Liaison between patient and care team
- Patient Advocate
- Mentor and coach patient
- PRAPARE Assessment
- Addresses SDOH Needs
- Meets with Patient on Monthly Basis (at minimum)
- •Supports Medication and Treatment Plan Adherence
- •Outreach for community referrals
- •Leads Peer Support Groups
- Program Orientation
- •OBAT agreement
- Team introduction
- •Overview of Buprenorphine and Naltrexone

Nurse Care Manager

- Enrollment
- Patient Education
- Leads Huddle
- Assigns follow up patient needs (medical, SDOH, labs, UDS, med count)
- Prior Authorization
- Patient Treatment Plan
- Tracks Medication Adherence
- •Follow up calls post induction
- •Tracks appointments/no-shows
- Views UDS Results
- Suboxone Induction
- COWS



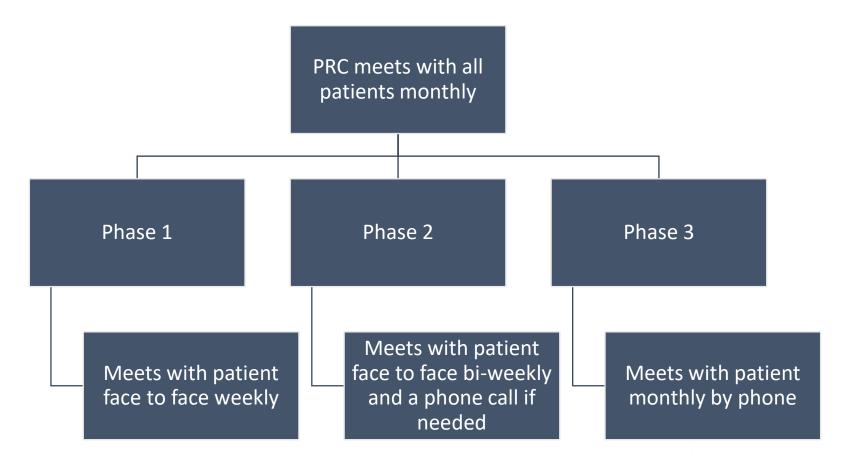
PRAPARE Assessment

- Protocol for Responding to and Assessing Patient Assets, Risks, and Experiences.
- Used to identify the social determinants of health needs for patients.
 - Housing status
 - Education
 - Employment
 - Income
 - Access to food, utilities, medicine, health care, phone
 - Transportation
 - Social and emotional assessment

http://www.nachc.org/research-and-data/prapare/



Example PRC Patient Stratification



Testimonials

 Medication Assisted Treatment has been a very influential part of my recovery thus far. The peer recovery specialist has helped me through a lot of the struggles that I have overcame these past few months, and I honestly don't know what I would've done without her guidance. I have my family back, friends, and two jobs that I like. I am now looking forward to my future instead of destroying it. I am super grateful that I get the opportunity to be a part of this awesome program." "Medication Assisted Treatment has been a

Thank you!

For more information, please contact

Lindsey Naeyaert, MPH, CHCEF Associate Director of Integrated Health

517.827.0874

Inaeyaert@mpca.net

www.mpca.net

