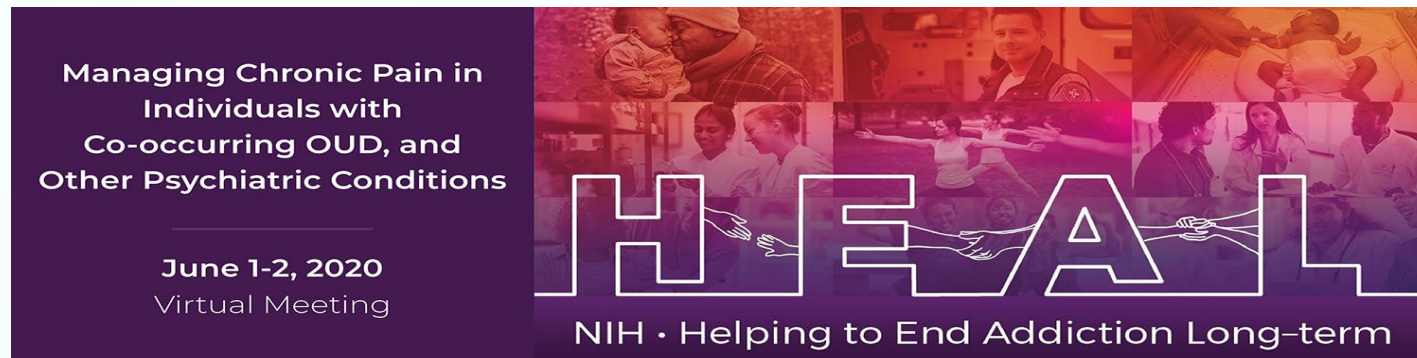


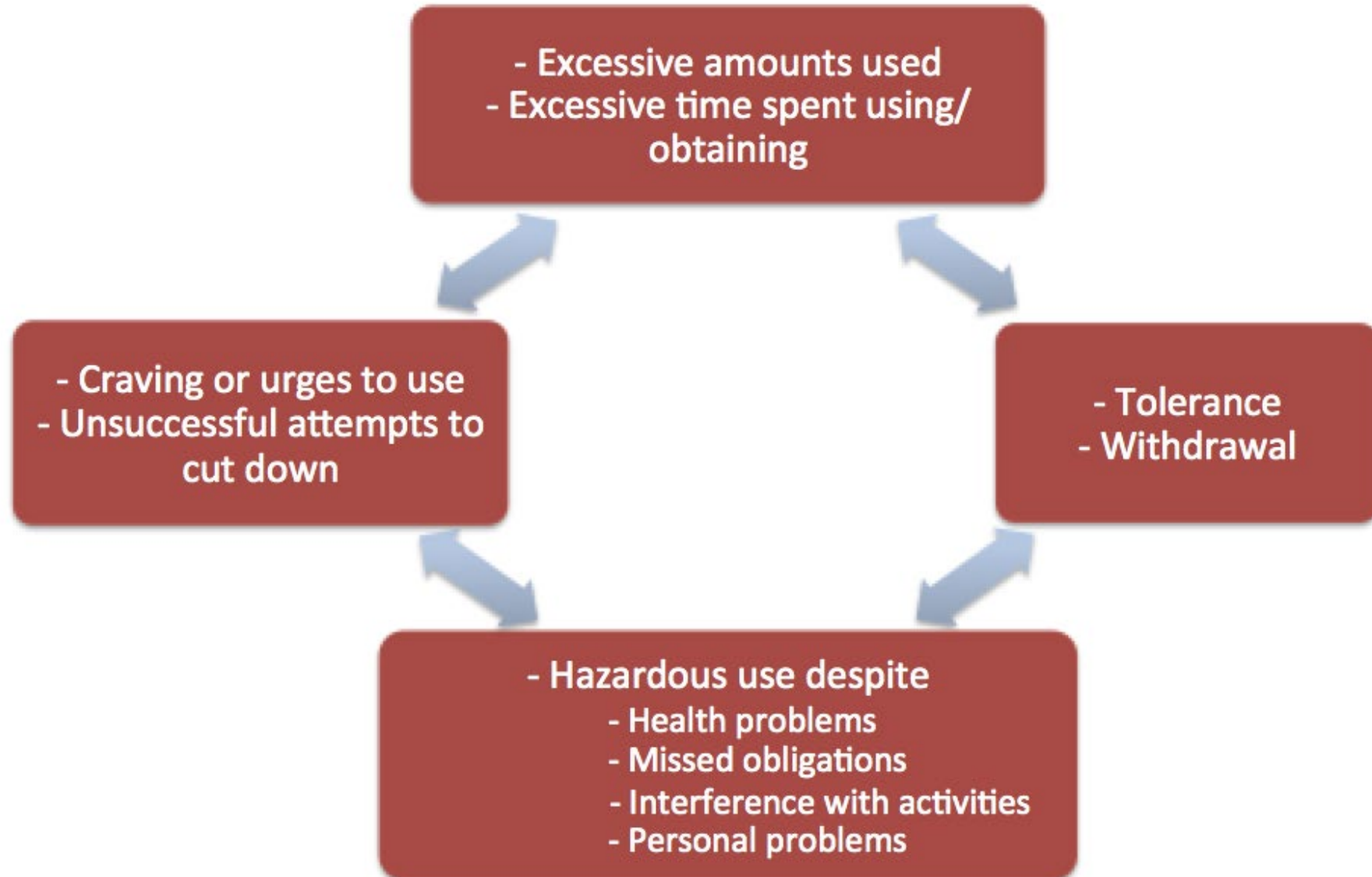
OUD vs Physical Dependence Overview & Cascade of Care

June 1, 2020

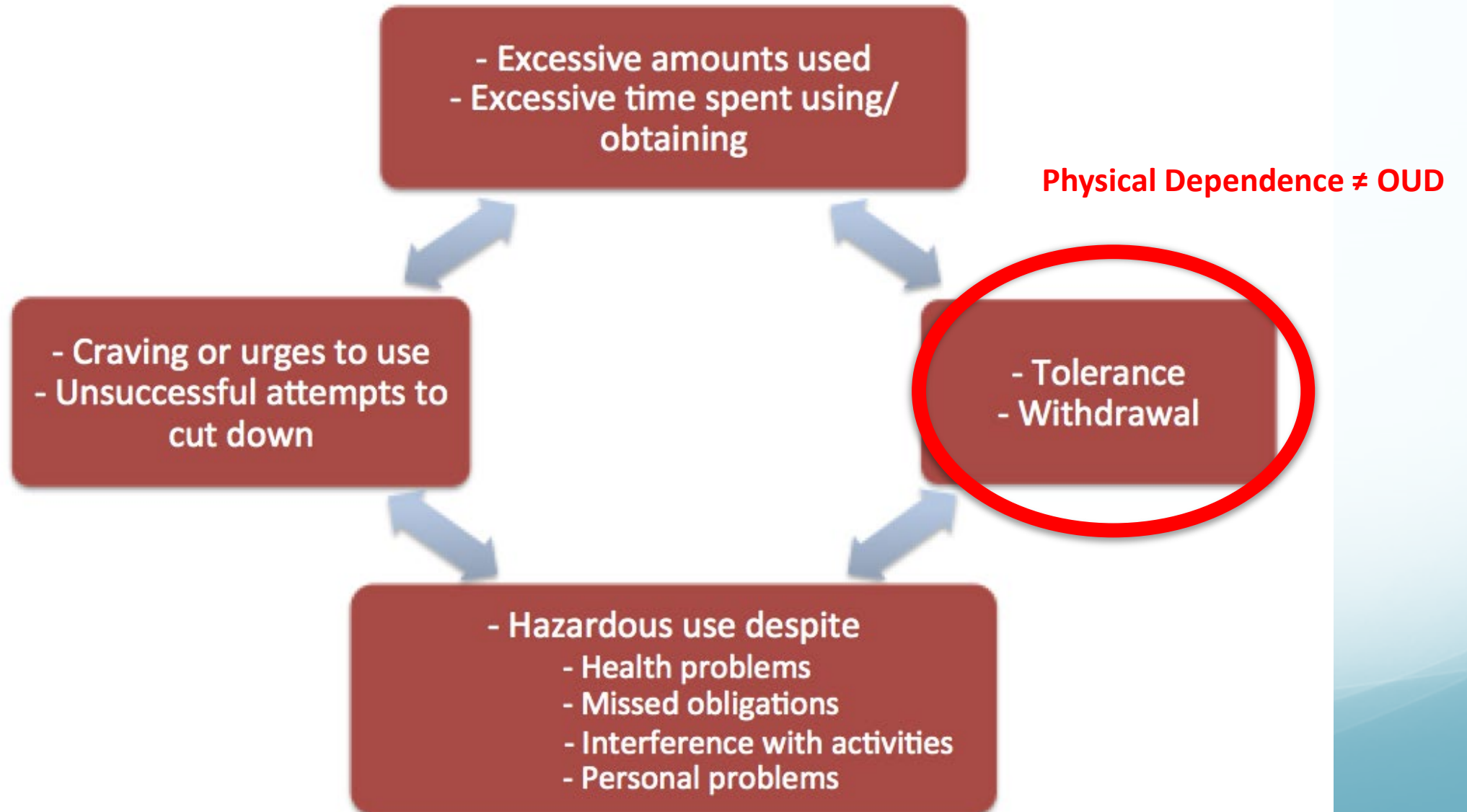


Arthur Robin Williams MD MBE FASAM
NIDA K23DA044342-01
Assistant Professor,
Division on Substance Use Disorders
Columbia University Department of Psychiatry

What is Addiction: DSM 5 criteria

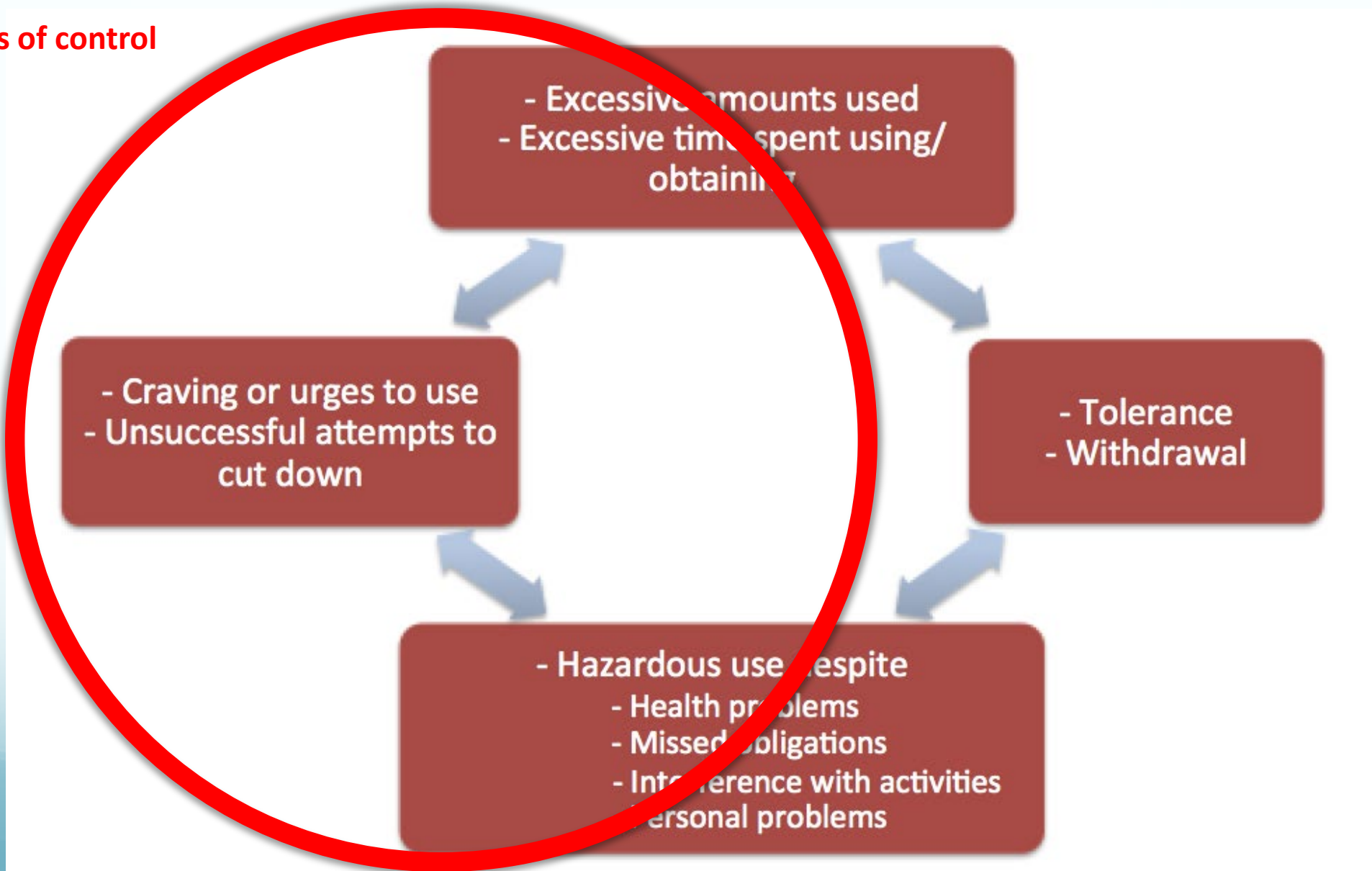


What is Addiction: DSM 5 criteria

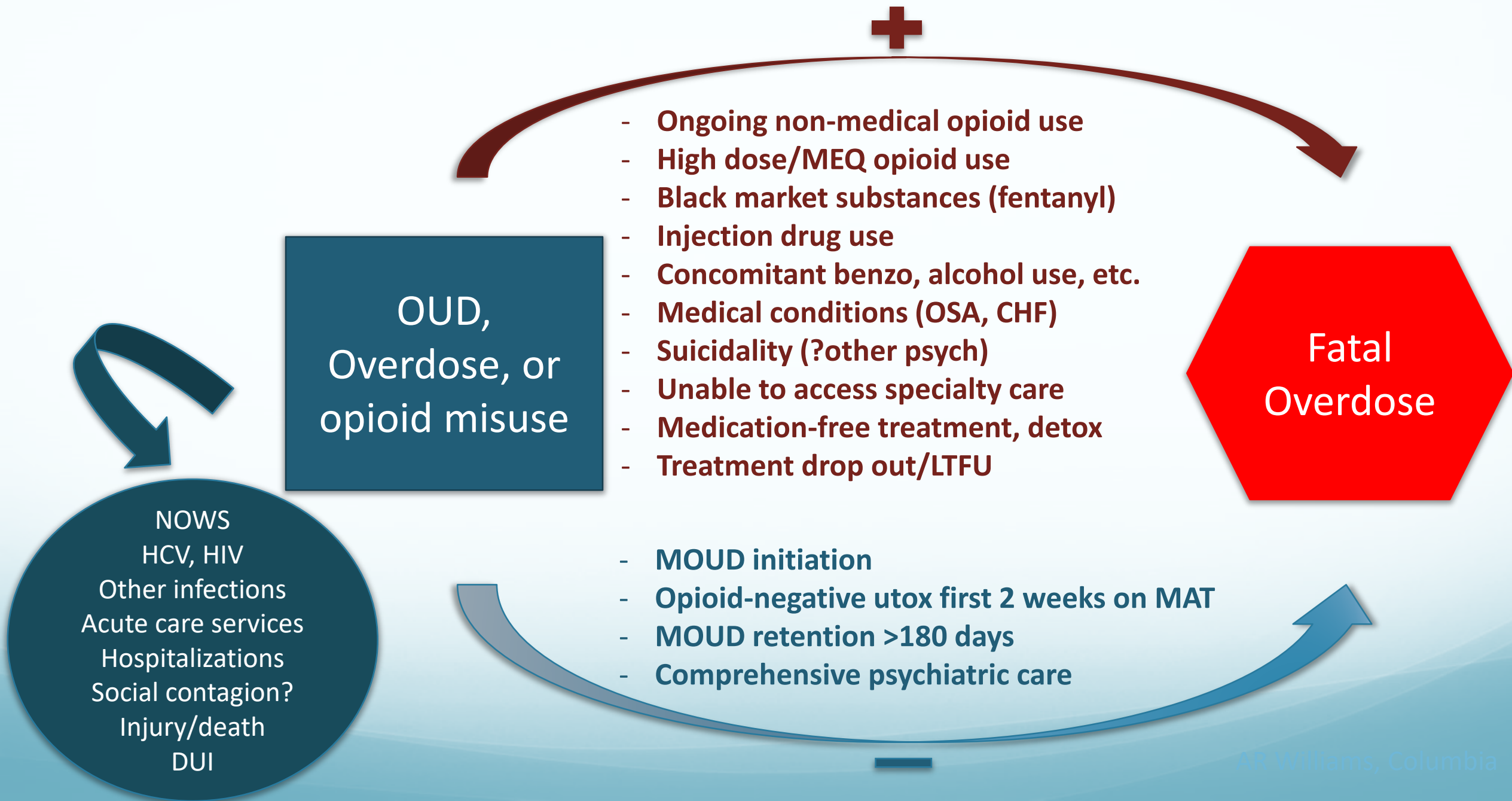


What is Addiction: DSM 5 criteria

Addiction = loss of control
and worsening
consequences



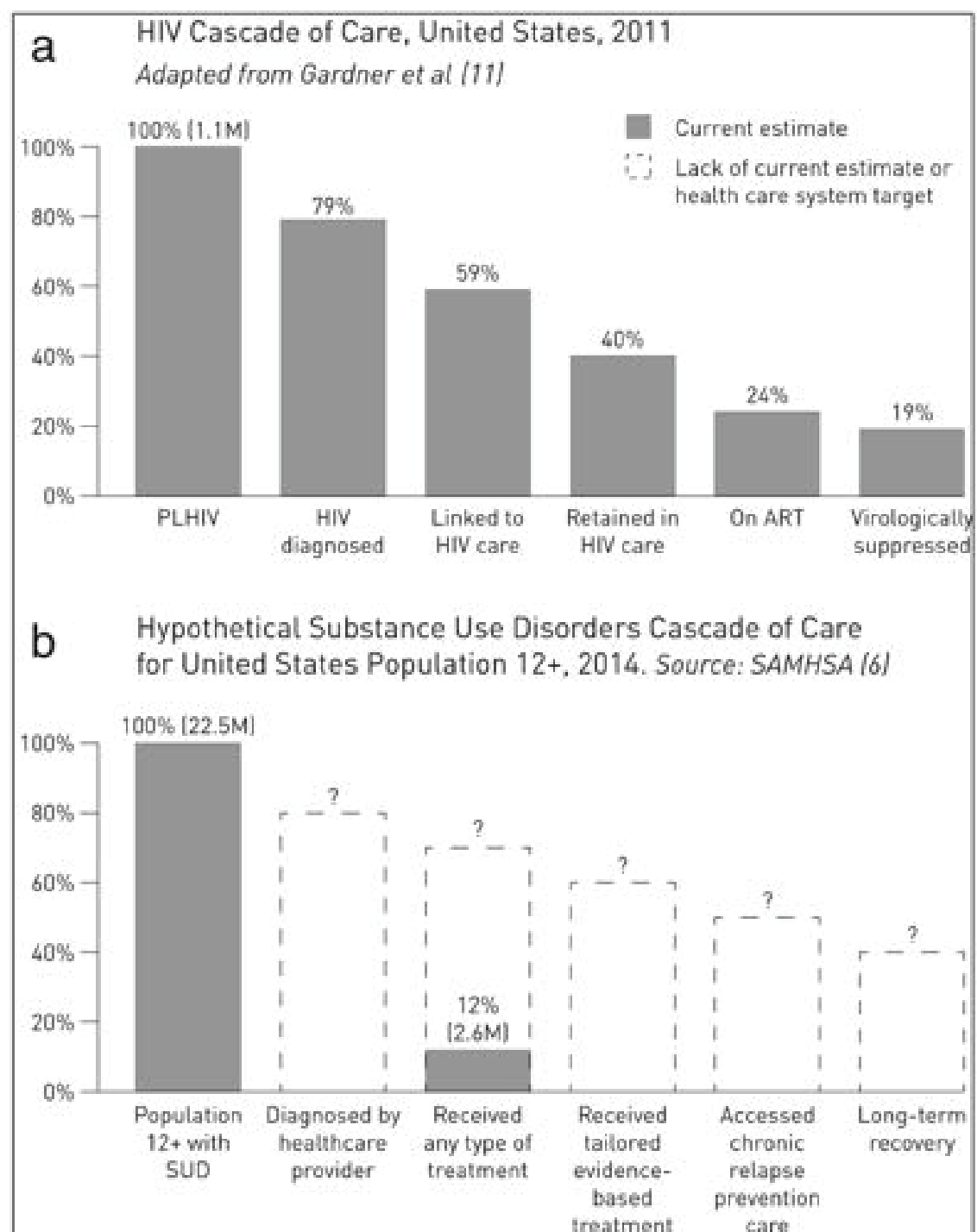
High risk populations, modifiers of fatal overdose, other adverse outcomes



Cascade of Care (COC) Frameworks

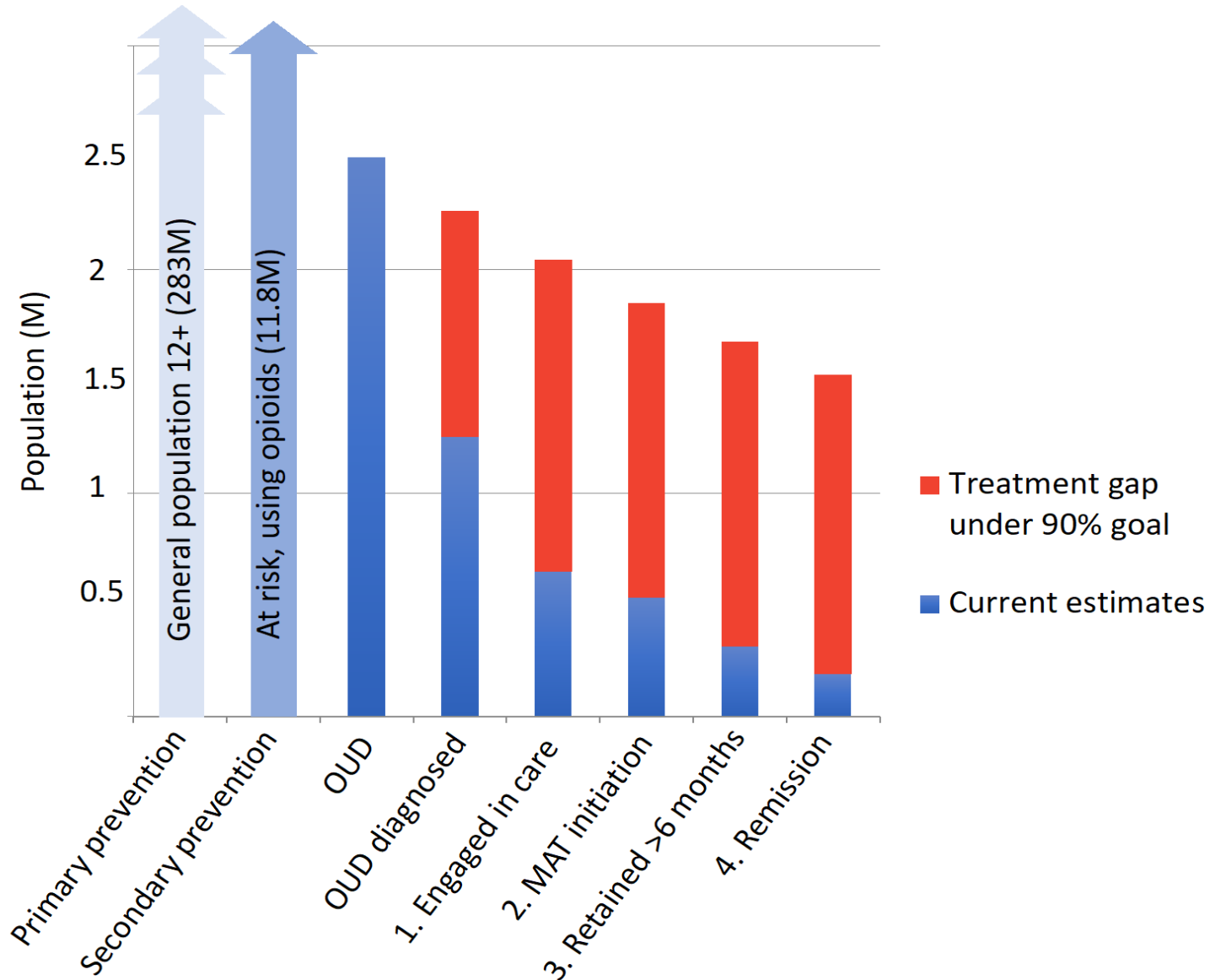
- Becoming standard approach to chronic disease management
- Breaks long-term management into key, sequential stages
- Success/failure at each stage can help identify needed interventions
- Multiple applications
 - Practice guidelines and standards of care → accreditation standards
 - Quality measure development
 - Funding allocations and value based reimbursement
 - Inform further research
- HIV, Diabetes, Hepatitis C have deployed effectively

SUD Cascade derived from HIV Cascade



Socias ME, Volkow N, Wood E; Adopting the 'cascade of care' framework: an opportunity to close the implementation gap in addiction care? *Addiction*; 2016 Dec;111(12):2079-2081.

OOD Cascade of Care





Applying the Cascade Framework



Applying the Cascade Framework

- *Practice Guidelines and Standards of Care*
 - *E.g. Kampman & Jarvis ASAM 2015; ASAM 2014*
 - *SAMHSA TIP #63 re MAT for OUD*



ASAM
**THE PERFORMANCE
MEASURES**
For the Addiction
Specialist Physician

Applying the Cascade Framework

- *Practice Guidelines and Standards of Care*
 - *E.g. Kampman & Jarvis ASAM 2015; ASAM 2014*
 - *SAMHSA TIP #63 re MAT for OUD*
- *Quality Measures*

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 - *“Measurement-based care” recent example*

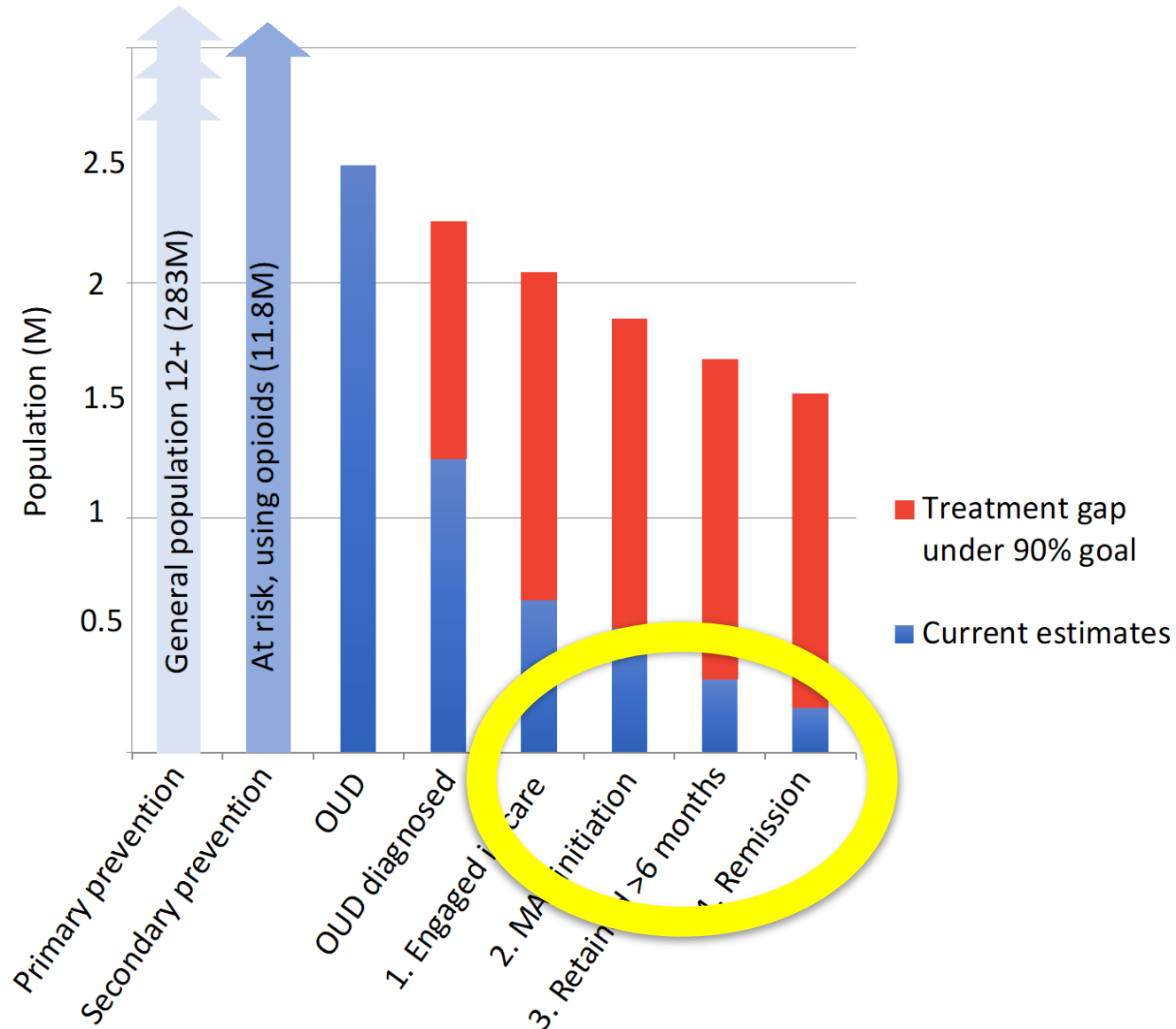
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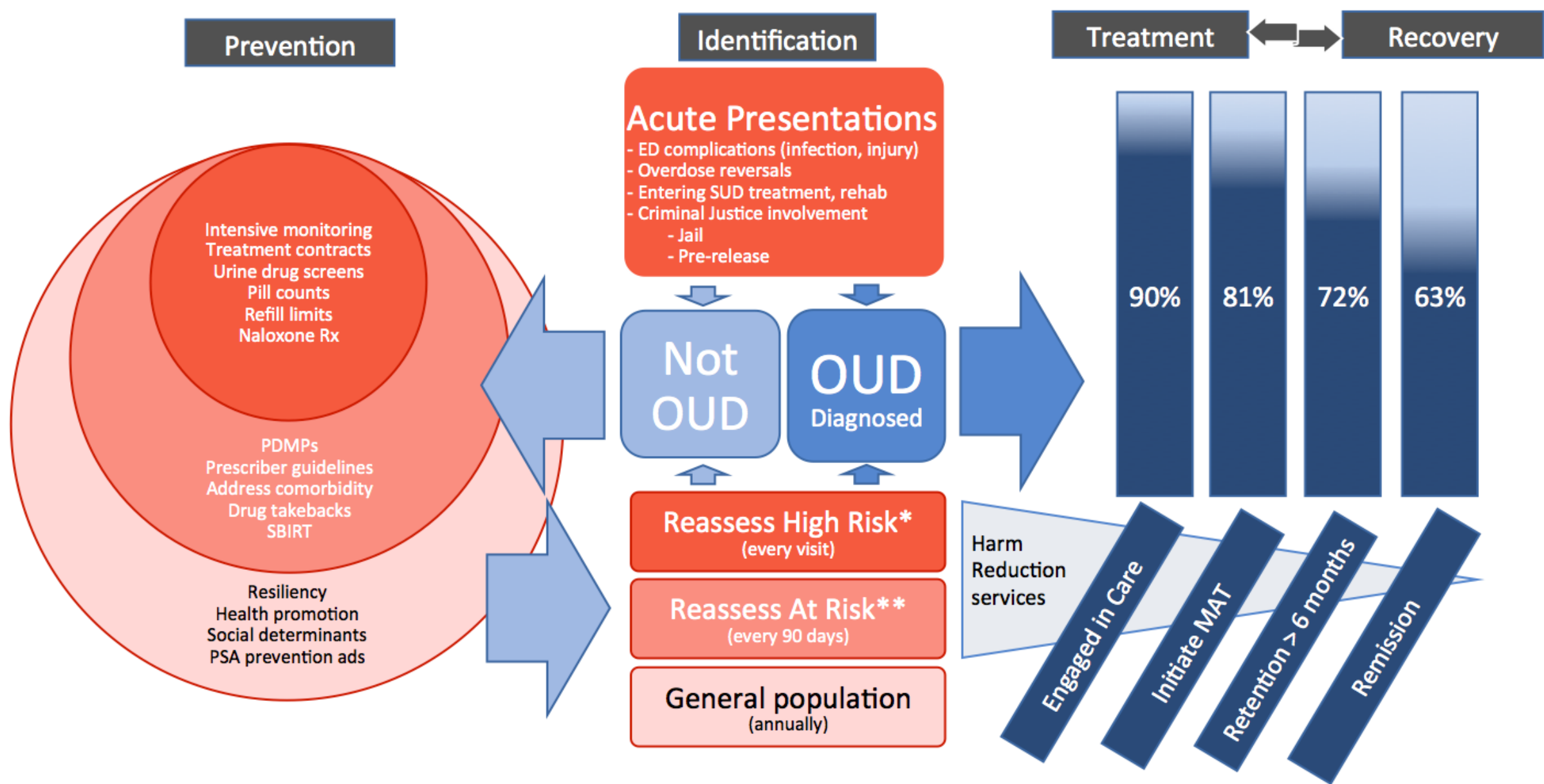
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 - E.g. Belenko et al JSAT 2017

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OUD Cascade of Care





*High Risk Population = individuals prescribed >90mg MEQ daily; history of SUD treatment or diagnosis; unstable psychiatric comorbidity; acute presentation in prior 5 years

** At Risk Population = individuals receiving long-term opioid therapy; with a family history of SUD; young males (age 18-35); those with active problematic substance use

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Sep 21, 2018

APA Awarded CMS Funding to Develop Quality Measures

Washington, D.C.— The American Psychiatric Association (APA) has been awarded funding to develop mental health and substance use quality measures as part of the Centers for Medicare and Medicaid Services' (CMS) Quality Payment Program (QPP) established under the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA). APA is working with experienced measurement developer NCQA. The three-year funding was awarded by CMS who awarded funding to a total of seven organizations.

Media Contact

Glenn O'Neal, 202
press@psych.org

Erin Connors, 202
econnors@psych.org

Quality Measures: Donabedian model

- *Structural measures* refer to quality measures at the system and provider level
 - Can be used for accreditation standards

Quality Measures: Donabedian model

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- *Process measures* refer to metrics pertaining to service delivery
 - Easiest to track through EHR



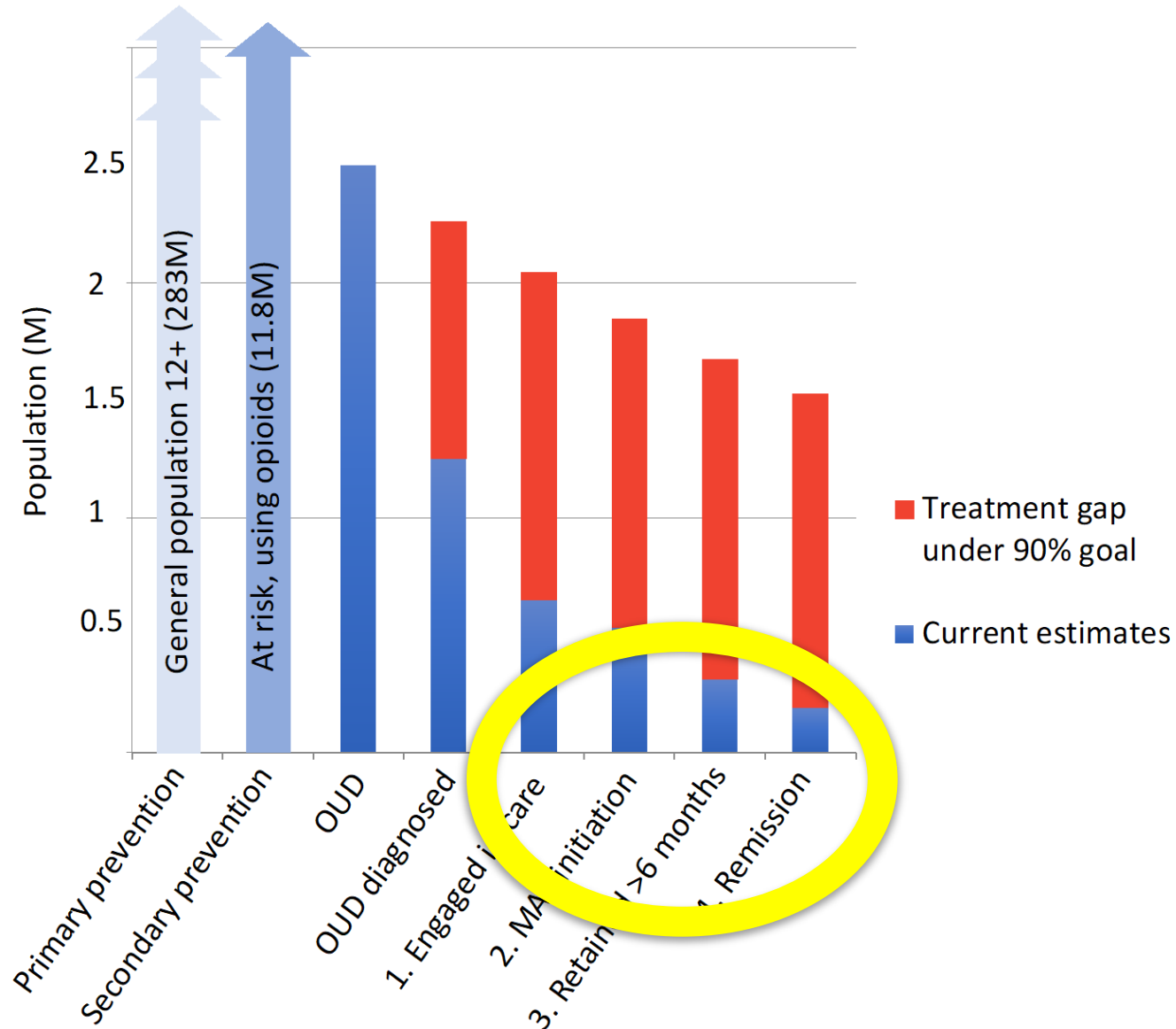
Quality Measures: Donabedian model

- *Structural measures* refer to quality measures at the system and provider level
 - Can be used for accreditation standards
- *Process measures* refer to metrics pertaining to service delivery
 - Easiest to track through EHR
- *Outcome measures* typically refer to patients' clinical outcomes
 - Require risk adjustment

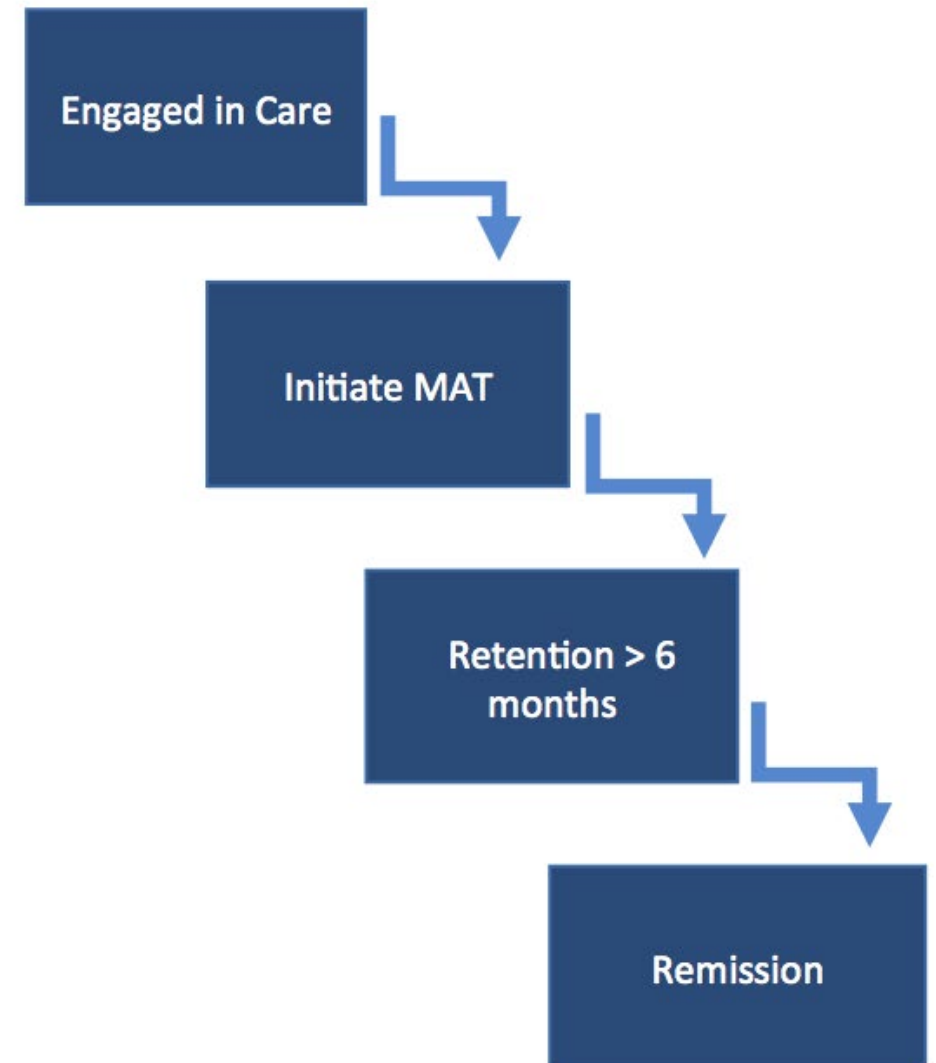
Quality Measures, specification

- Numerator (i.e. percent with OUD “receiving MAT”)
- Denominator (i.e. who counts as having “OUD”)
- Inclusion/Exclusion criteria
- *Standardization*
- *Risk adjustment*

OOD Cascade of Care



OUD Treatment Cascade



Measures for OUD

S: % programs with transportation services
P: % patients Engaged within 44 days
O: % with OUD receiving acute care services

Engaged in Care

S: % programs with MOUD prescriber
P: % Initiated MOUD within x days of intake
O: Opioid negative toxicology in first 14 days of MAT

Initiate MOUD

S: % programs with CBT or CM specialist
P: % retained on MOUD for 180+ days
O: Reduction in drug use among those retained

Retention > 6
months, ?longer

S: % programs that follow patients who no-show
P: % patients drug tested monthly
O: % who no longer meet OUD criteria

Remission

Measures for OUD and Pain

S: % programs with transportation services
P: % patients Engaged within 44 days
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Engaged in Care

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P: % Initiated MOUD within x days of intake
O: **Opioid negative toxicology in first 14 days of MAT**

Initiate MOUD

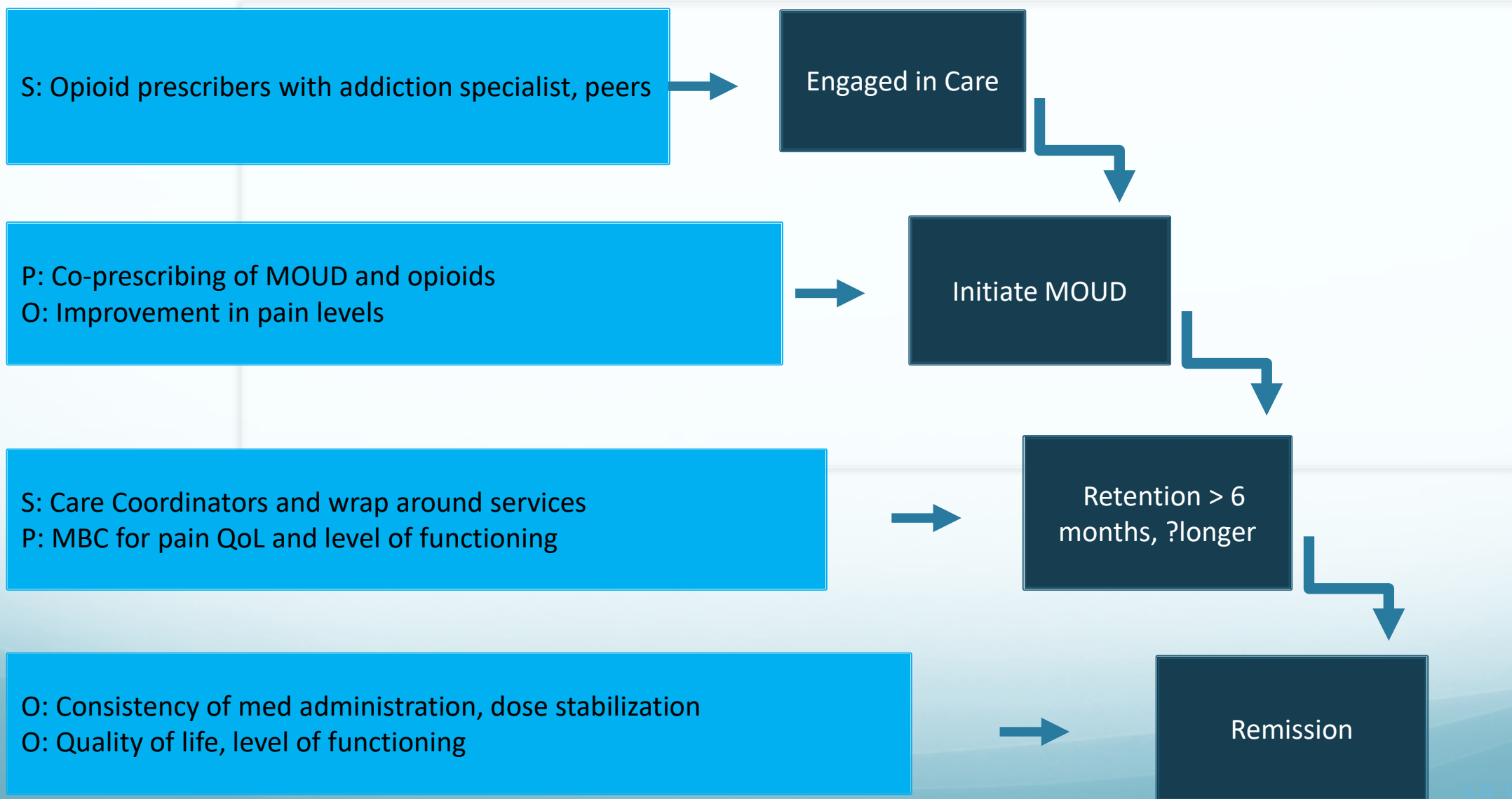
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Remission

Measures for OUD and Pain



Thank You

- Mark Olfson MD MPH
- Edward V. Nunes MD
- Adam Bisaga MD
- Frances R. Levin MD
- Robert Remien PhD
- Steven Crystal PhD
- Hillary Samples PhD
- Christine Mauro PhD
- Kimberly Johnson MD
- Peter Friedmann MD MPH
- Ben Nordstrom MD