


# NYC ED MAT QUALITY COLLABORATIVE

July 15, 2021

**GREATER NEW YORK HOSPITAL ASSOCIATION**

*Over 100 years of helping hospitals deliver the  
finest patient care in the most cost-effective way.*

# Welcome to the NYC ED MAT Quality Collaborative

- Lines will be muted during the presentation
- Let us know who you are! Please share your name and institution in the chat box! 
- To ask a question
  - Type your question in the chat box or unmute yourself
- The slides and materials will be made available in the chat section.
- For technical difficulties, please email [AVassistance@GNYHA.org](mailto:AVassistance@GNYHA.org)

# Agenda

I. Welcome

II. Updates and Announcements

III. FAQs: Discussion and Round Robin

IV. Next Steps

July 15 2021	Aug 19 2021	Sep 16 2021	Oct 21 2021	Nov 18 2021	Dec 16 2021
	Check in & Office hour calls				Conclusion of Project



## Upcoming Collaborative Activities

- **Office Hour and Check-In Calls**
  - Data contact
  - Baseline and monthly measures data submission
    - *\$5000 Stipend*
  - Mid-point assessment – rapid turnaround
  - 2 iPad tablets
- **Next ED MAT Collaborative webinar:**
  - Thursday, September 16, 2021 – 12 p.m. – 1 p.m.
- **Other member needs**

# NYS Attorney General's Opioid Settlements

- Johnson & Johnson, Purdue/Sackler family, pharmacy chains, distributors
- Abatement, treatment and recovery
  - Workforce development
    - Reduce stigma
    - MAT training
    - Addiction medicine fellowships
  - Full continuum of care
  - Transportation to treatment or recovery services

- Train ED personnel
- Ensure providers are screening
- Improve PDMP
- Fund and support SBIRT
- Fund peers and care coordinators
- Support alternatives to EDs for persons with OUD
- Support EMS

# FAQs: Discussion and Round Robin



# FAQ #1: Starting a Protocol

What are the most important components of an ED MAT treatment protocol?

- **Who** develops and is responsible for implementation?
- **How** are individuals with OUD identified?
- **What** assessment is conducted?
- **Who** does the assessment?
- **Where** is the assessment recorded?
- **How** is it monitored?

# Strategies for Identifying Patients with OUD

## Strategies Used by Participating Hospitals

- Initiate informal conversations about opioid use
- Conduct formal screening
- Review Prescription Drug Monitoring Program (PDMP) database

## Strategies Not Used by Participating Hospitals

- Receive practitioner/community referral
- Review PSYCKES for previous OUD flags
- Review PSYCKES for case history

# Implementing and Optimizing Buprenorphine Protocols

**Only 50% of responding hospitals had a protocol in place to provide patients with OUD with buprenorphine.**

- 75% of those with a protocol train all prescribers
  - Could also train social workers, nurses, clerks, and discharge planners
- 75% of those with a protocol make it available in their EMR
  - Could also be made available at ED stations or made into pocket guides

# FAQ #2: Buprenorphine Specifics

## How is the ED workflow affected when initiating buprenorphine in the ED?

- How is withdrawal measured?
- Observation time-who does it and for how long?
- How many patients do you administer or initiate on buprenorphine monthly?
- Do identified patients receive a referral and bridge prescription?
- What if the patient is not yet in full withdrawal?

## FAQ #3: Clinical Considerations

**How do you manage patients recently reversed with naloxone from a non-fatal overdose?**

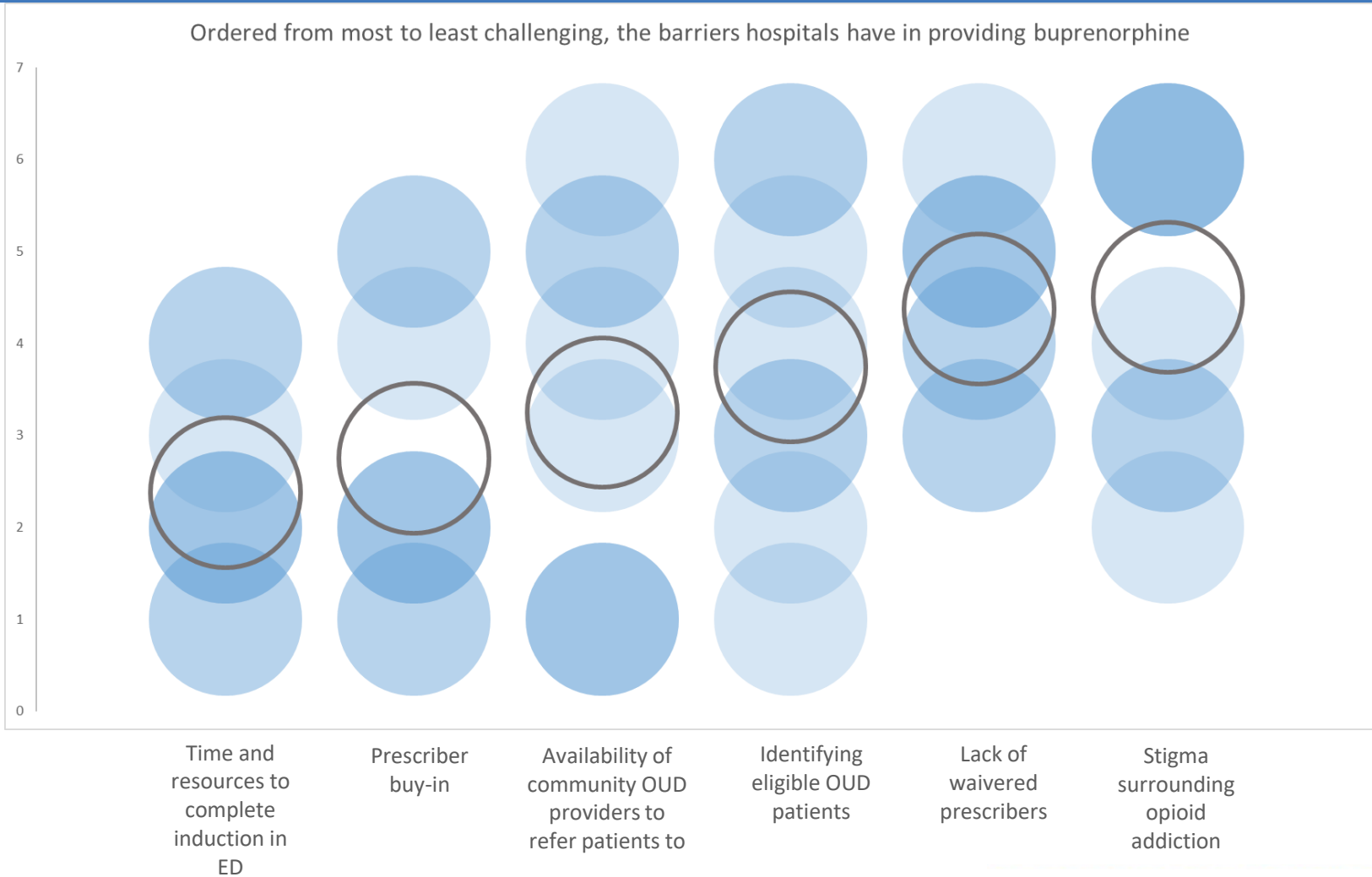
- Clinical considerations including withdrawal severity and precipitated withdrawal concerns
- What is included in protocol on this?
- Do individuals with OUD, previous overdose or opioid use receive naloxone upon discharge?

# FAQ #4: Beyond the Protocol

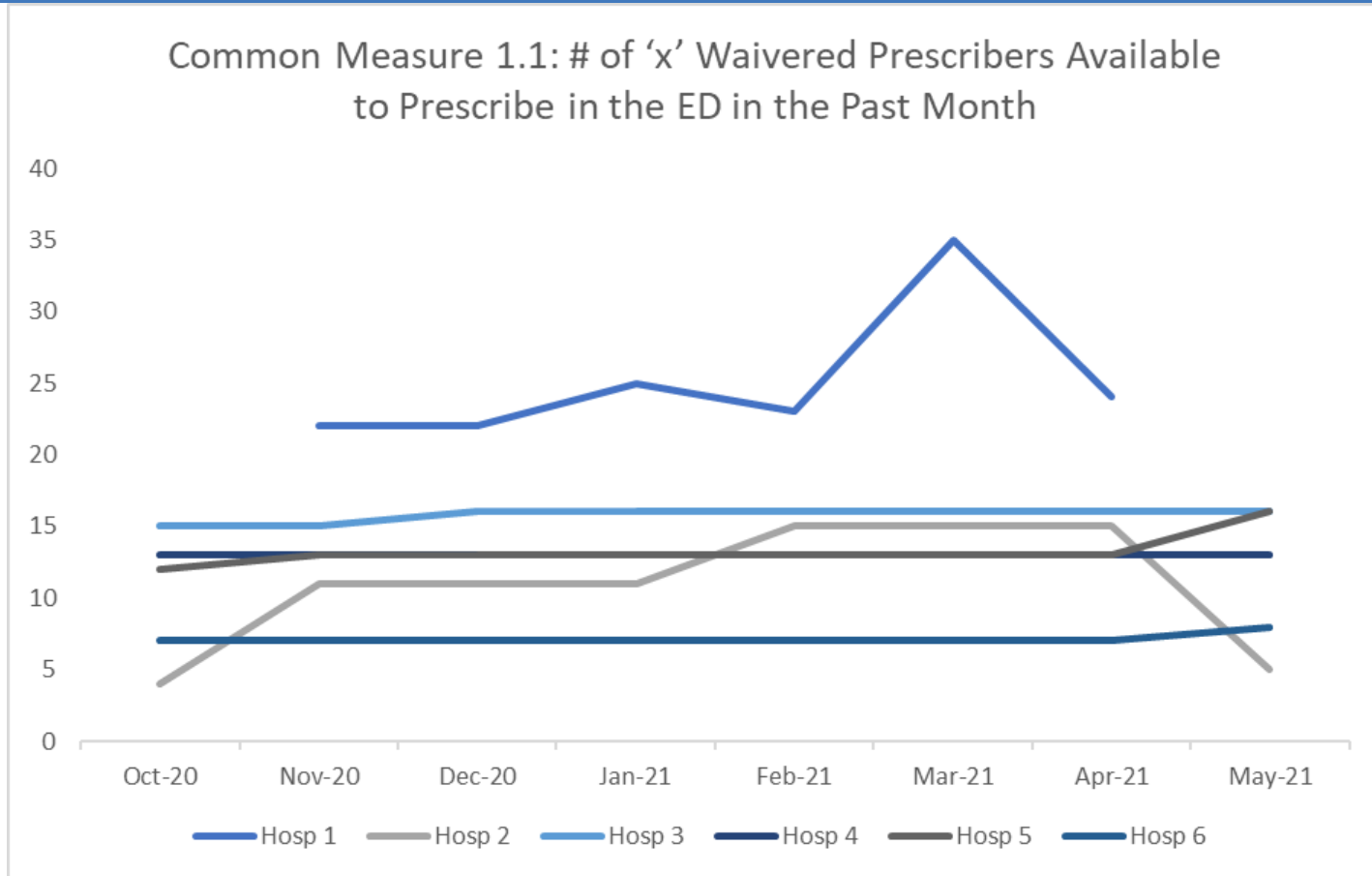
## What were your biggest challenges in implementing an MAT program?

- Perception of MAT in the ED
- Number of waived prescribers
- Providers prescribing buprenorphine in ED

# Barriers Hospitals have in Providing Buprenorphine: *Ordered from Most to Least Challenging*



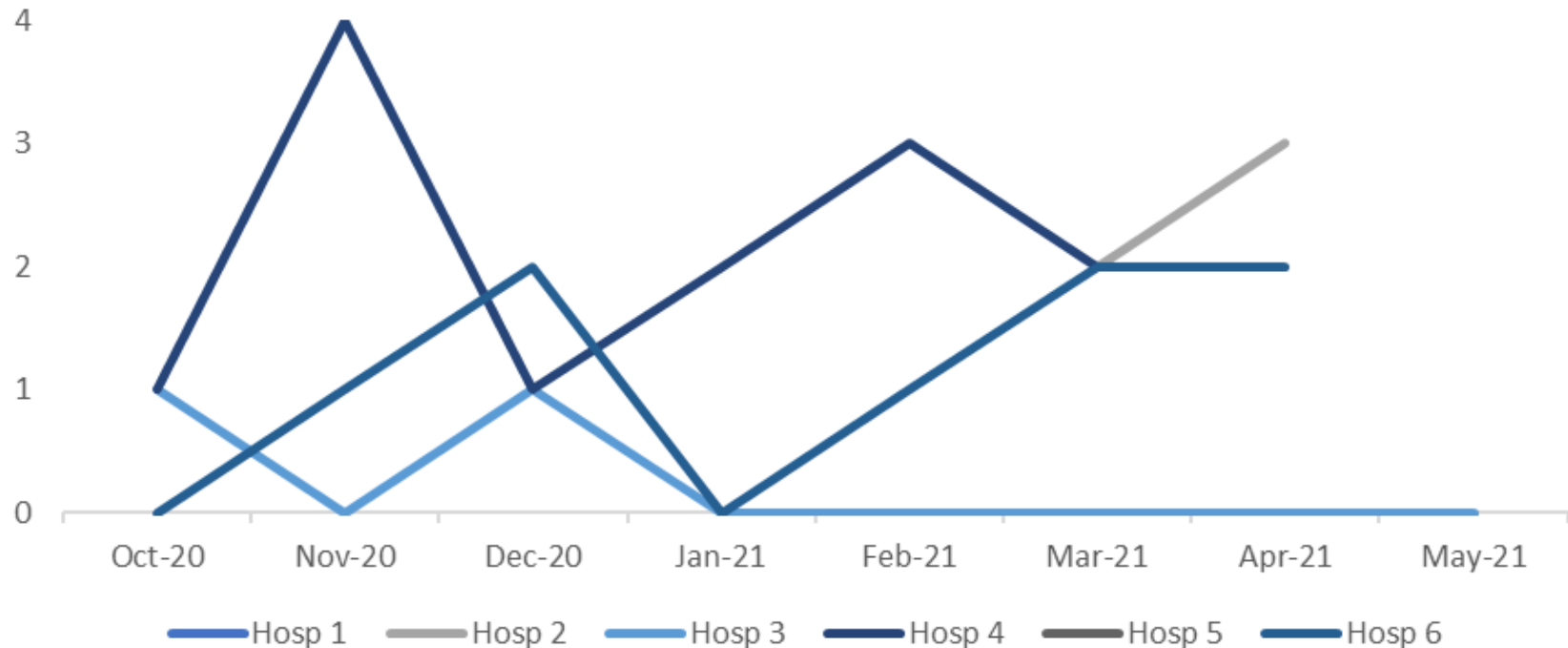
# Common Measure 1.1





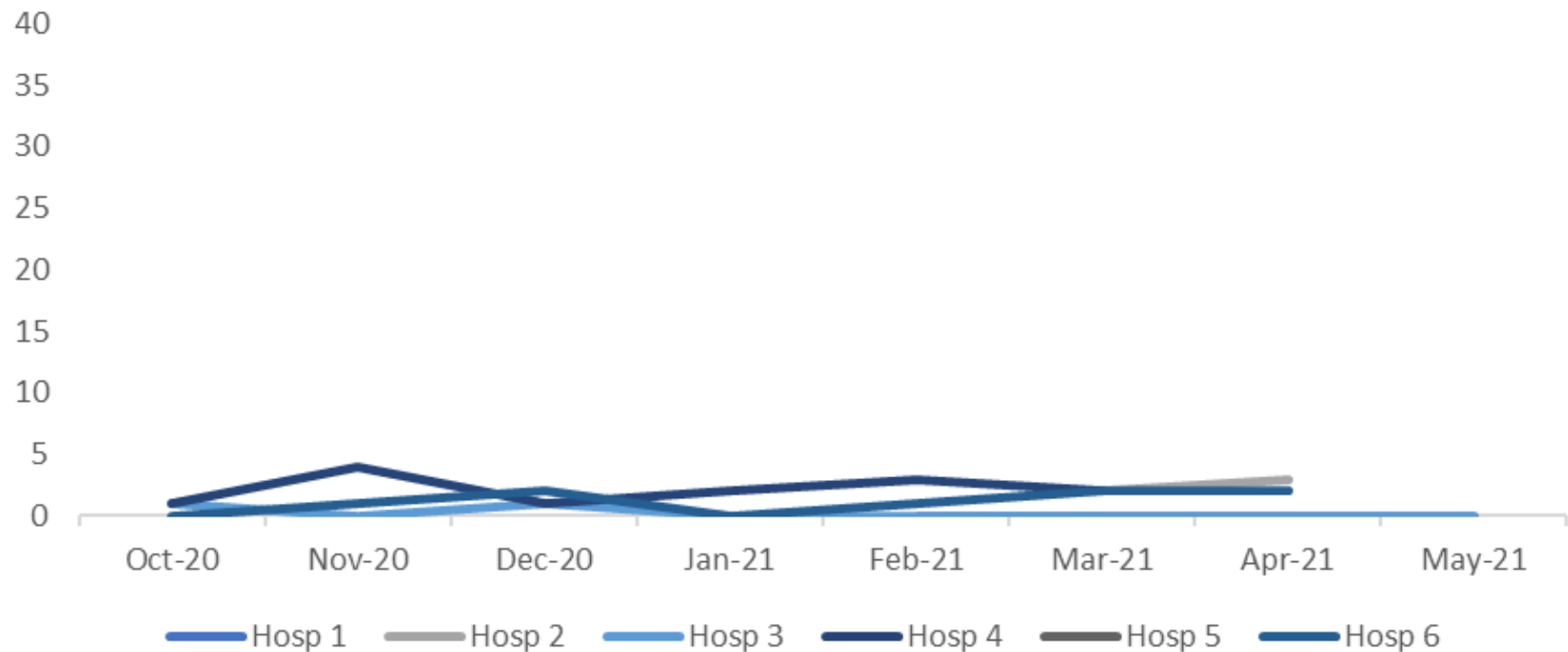
# Optional Measure 1.2

Optional Measure 1.2: # of 'x' waived prescribers who prescribed buprenorphine in the ED in the past month



# Optional Measure 1.2 with Common Measure 1.1 Scale

Optional Measure 1.2: # of 'x' waived prescribers who prescribed buprenorphine in the ED in the past month



# FAQ #5: Beyond the protocol

## How has your ED MAT program changed/mature over time?

- Patient demographic change
- Leadership support
- Staff buy-in
- Data-informed change
- Training needs
- Sustainability plan

# Questions or Comments?



# Contact Information



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