

Maternal Opiate Medical Supports (MOMS) OHIO PROGRAM

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Overview

- MOMS Introduction
- MOMS 1.0 Columbus
- Lessons Learned
- MOMS 2.0 Columbus Current Model
- Sustainability

MOMs Program - OHIO

- Provision of care for pregnant women struggling with opiate addiction
- GOALS:
 - To improve maternal and infant outcomes
 - Improve family stability
 - Reduce NICU costs associated with Neonatal Abstinence Syndrome
- Achieved through the work of a collaborative group of partners from a range of professions including obstetrics, behavioral health and addiction services, and pediatrics to create a maternal medical home.



MOMs 1.0 OHIO

- Ohio Department of Mental Health and Addiction Services (OHMHAS) Grant Funding
- 75 women per pilot site over 2.5 years
- 4 pilot sites –
 - CompDrug (Columbus)
 - First Step Home (Cincinnati)
 - MetroHealth (Cleveland)
 - Health Recovery Services (Athens)

MOMS 1.0

Columbus, OH

CompDrug/Columbus Site

- Maternal Medical Home was outpatient hospital-based clinic model
- Maternal Infant Recovery Clinic (MIRC)
- “One-Stop Shop” Model

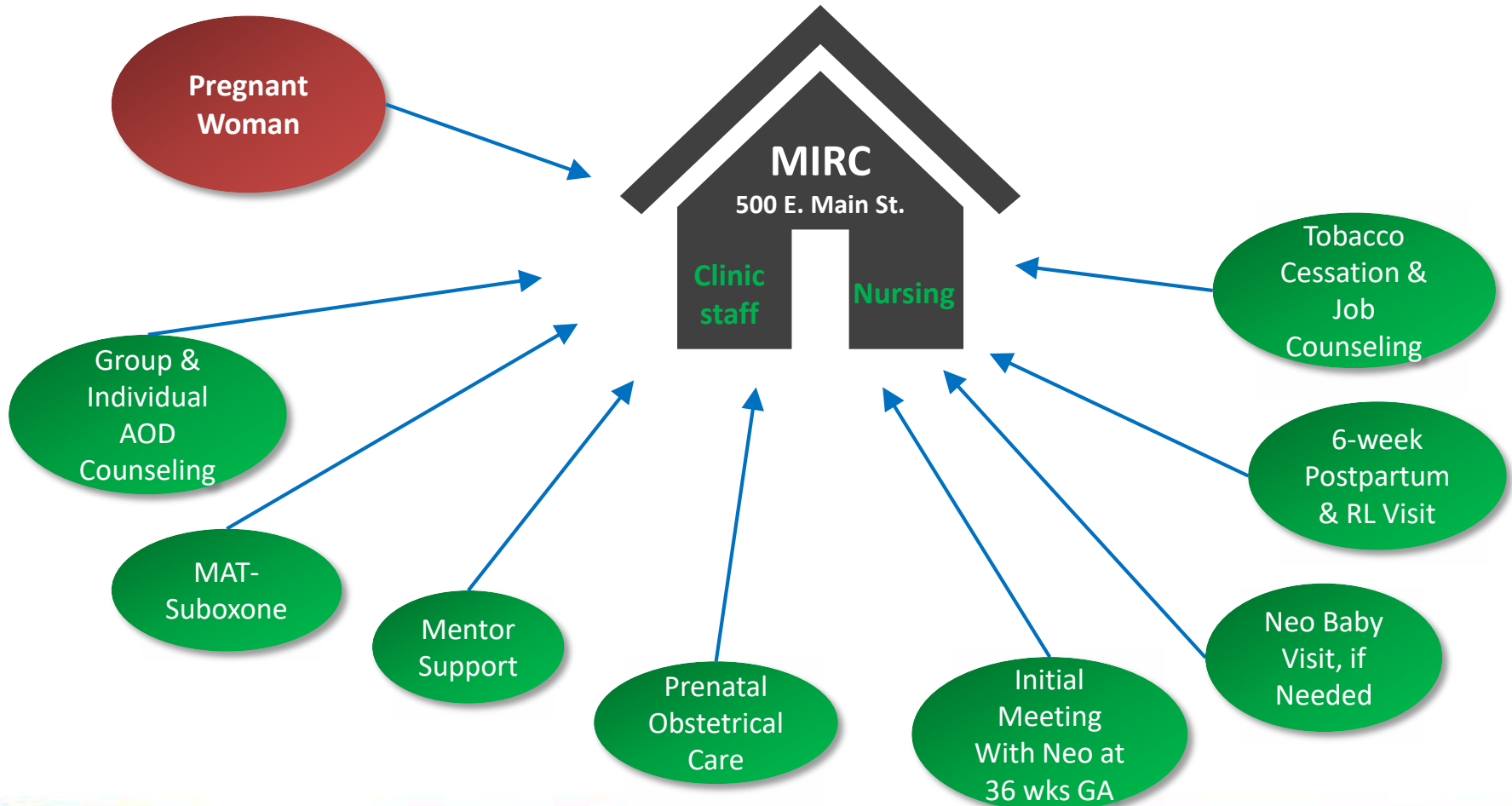
MOMS Partners in Columbus, OH



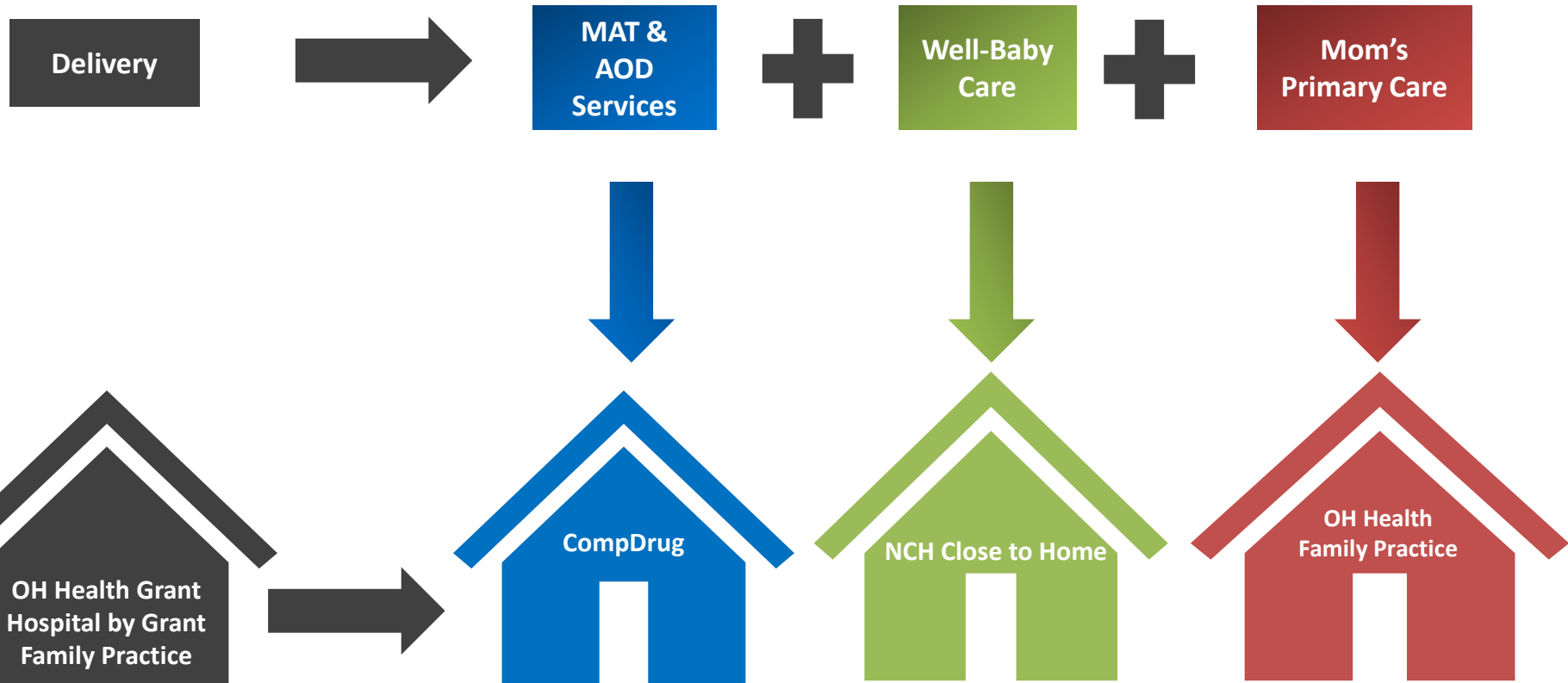
MOMS Partners in Columbus, OH

Organization	Role
CompDrug (SUD Treatment Provider/OTP)	Project lead, tobacco cessation, job counseling, postpartum MAT and AOD site
Nationwide Children's Hospital	Clinic site with clinical staff support for all services during pregnancy, Pediatric care, Neurodevelopmental follow-up, if needed
Ohio Health (Adult Health Care System)	Prenatal Obstetric Care, MAT, Delivery service, Primary Care for Mom
Mount Carmel (Adult Health Care System)	Prenatal Obstetric Care, MAT
Central Ohio Newborn Medicine (Private Neonatology Practice)	Neonatal Service
Maryhaven (SUD Treatment Provider)	Managed phone line for entry into care, Behavioral and AOD counseling services during and after pregnancy, care coordination, mentor community support
Amethyst (SUD Treatment Provider)	Short-term residential care, as needed for mom & baby post-delivery

Maternal Infant Recovery Clinic (MIRC)



Services After 6 Weeks Postpartum



Medication Assisted Treatment

- MAT is the first line of treatment for opioid addiction by the American Academy of Addiction Psychiatry, The National Institute on Drug Abuse, Substance Abuse and Mental Health Administration and Centers for Disease Control and Prevention
- MAT has demonstrated **improved patient survival rates, increased treatment retention, decreased criminal activity, increased ability to gain or maintain employment, and improved birth outcomes for women with substance use disorder**

Medication Assisted Treatment

- **Methadone** is a daily liquid dispensed only in specialty regulated clinics called Opiate Treatment Providers or OTPs
- **Buprenorphine/Suboxone** is a daily dispense or prescribed dissolving tablet or film
- **Naltrexone/Vivitrol** is a daily pill or monthly injection; patients must have abstained from opioids for 7-10 days before receiving this medicine

Figure 1

How OUD Medications Work in the Brain



Methadone



*Full agonist:
generates effect*

Buprenorphine



*Partial agonist:
generates limited effect*

Naltrexone



*Antagonist:
blocks effect*

Mentor Component

- 2 part-time (20-hour/week) staff
- Bachelor's + Associate's level education
- Chemical Dependency Counselor Assistant (CDCAs)
- Family history + personal interest



Mentor Component Cont

- All participants assigned a mentor
- Needs Assessment conducted at outset
 - Housing, Insurance, Medical (primary care), Income/Benefits, Food, Legal, DV, Transport, Employment, Child Care, Education
- Ongoing case management
- Ongoing support



Additional Partnerships

- Medicaid/Managed Care Organizations (MCOs)
 - Prior Authorizations for buprenorphine
- Child Welfare

Lessons Learned

MOMS 1.0 Columbus Learnings

- Proximity of services “one-stop” shop
- Contingency Management
- Care Coordination
- Collaboration
 - Is a must
 - Can involve challenges/barriers
 - Takes time

MOMS 2.0

Columbus

MOMS 2.0 Columbus

- Continued partnerships
- Leveraging other community work
- Continued focus on 'one-stop' shop
- Model shift while retaining key components

MOMS 2.0 Columbus Cont

- Tobacco Cessation
 - Franklin County Public Health
- Infant Mortality
 - Celebrate One/StepOne
- Reproductive Life Planning
 - Columbus Public Health

Access to Prenatal Care

- Celebrate One Infant Mortality Reduction Efforts
- Centralized Intake Number/Referral for prenatal care
- CompDrug embedded Engagement Specialist for linkage and referral to SUD treatment

Access to Reproductive Life Planning

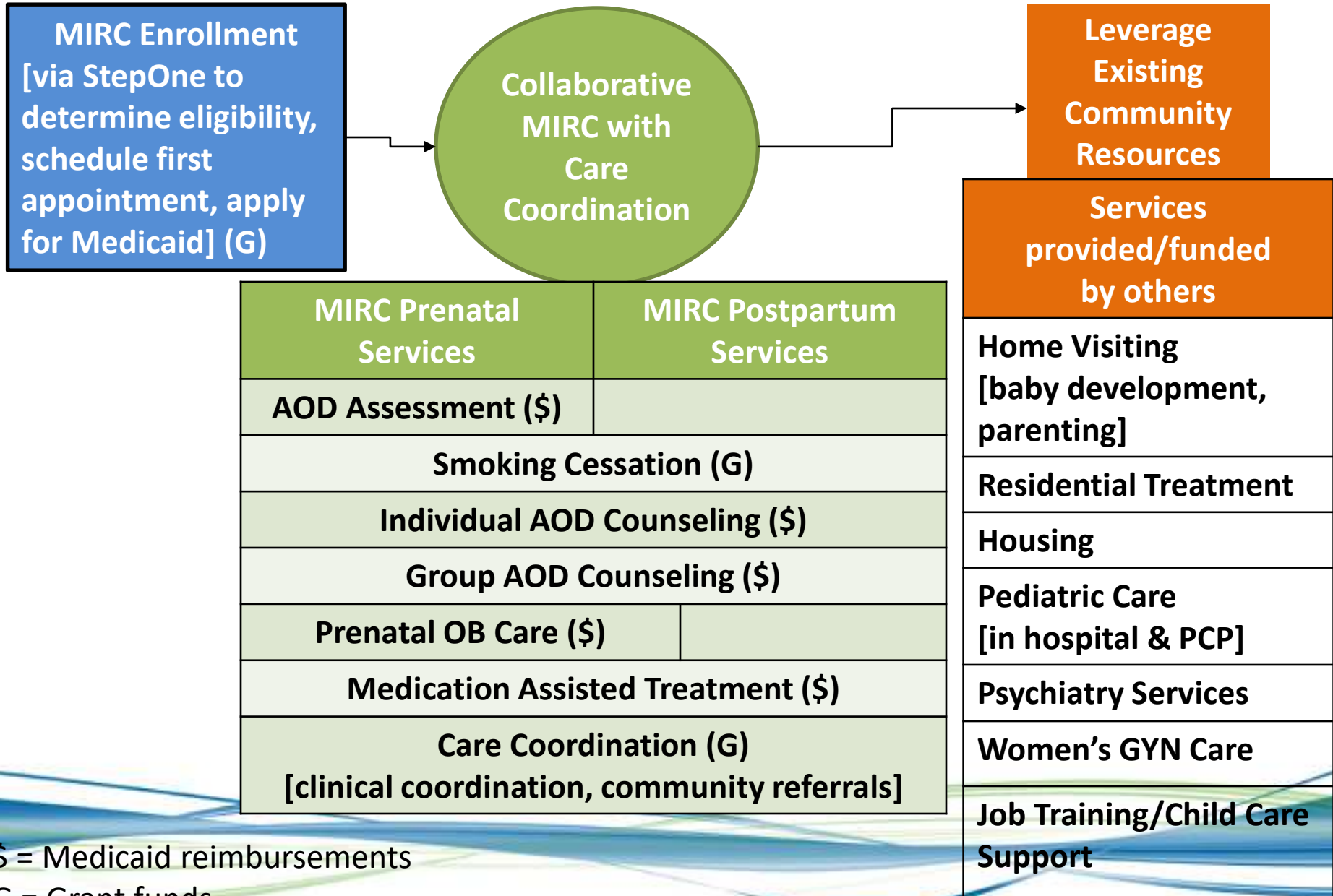
- Embedded Nurse Practitioner on-site from partner agency to provide contraception to interested women
- Available to all female patients, not just pregnant patients
- Evolved from RLP to Women's Health Clinic
- BH Nurses and Counselors trained to discuss options and internally refer
- Increase knowledge of contraceptive choices
- Increased planning of (future) pregnancy
- Increased access to option of choice

Reproductive Life Planning

- Long-active reversible contraception (LARC's) are most effective; all methods to be made available
 - Long-acting: 3-5 years
 - Reversible: can be removed at any time with no wait after removal to become pregnant
 - Other methods include the pill and condoms

Sustainability

Evolution of Collaborative MIRC (2016-2017)



\$ = Medicaid reimbursements
G = Grant funds


Evolution of Collaborative MIRC (2016-2017)

Other MIRC Expenses
Facility (\$, I)
Prenatal Care Staff (\$, I)
Equipment/supplies (\$, I)
Mentors (G)
MD Administration (G)
Grant Coordination (G)
AOD Counselors (G)
Tobacco Counselors (G)
Jobs Counselors (G)
Parenting Incredible Years (G)

\$ = Medicaid reimbursements

G = grant funds

I = In-kind



Sustainability

- MOMS 2.0 Grant \$'s
 - Care Coordinator
 - Child Care
 - Provider Admin/Start-Up: OB, Peds, Neo
- ADAMH (local alcohol/mental health board)
 - Contingency Management
- Ohio Children's Trust Fund
 - “Pregnancy Pathway” – Parenting Edu, Incredible Years, Flip-It
 - Engagement Specialist embedded at StepOne

QUESTIONS?

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