OUD Revision Focus Areas

Top Goal Brainstorm:

To reduce OUD overdose in Washington state:

1. Providers and people with OUD engage in shared decision-making for MOUD, especially during transitions of care.
2. People with OUD are reliably identified where they present and offered MOUD, naloxone and at a minimum referral to care
3. Patients with OUD are reliably and systematically connected to appropriate follow up care.

Audiences

* Patients and Families
* Clinicians
* Programs and Facilities
* Health Plans
* Washington State Agencies: HCA, DOH, DOC, Division Behavioral Health Recovery, DSHS, LNI
* Employers
* Health Services Academic Training Programs and Residencies

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| Original Focus Areas & Goals | **New Associated Goals** |
| Access to Evidence-Based Treatment | * Medication treatment (MOUD) – buprenorphine, methadone, and naltrexone (e.g., increase geographic reach, increase number of providers)
* Reduction in stigma associated with treatment
 | 1. **MOUD – buprenorphine and methadone, including newest formulations (e.g., increase geographic reach, increase number of providers)**
2. **Tailored approaches based on severity of OUD and comorbid conditions.**
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| Referral Information | * Providers and patients know where to access care.
* Accessible inventory of buprenorphine and methadone prescribers
* Referral infrastructure that supports patients and providers
 | 1. **Patients are transitioned effectively between care settings and between medications as appropriate (e.g., inpatient to OTP, primary care to OTP, methadone to buprenorphine)**
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| Integrated Behavioral and Physical Health to Support Whole-Person Care | * Treatment of co-morbid conditions including multiple substance use, mental illness, physical health in line with BHI report and recommendations
 | 1. **Core elements of BHI all settings should meet, while emphasizing innovative models and nontraditional settings. (MOUD in community pharmacies, health engagement hubs, etc.)**
2. **Bidirectional integration of behavioral and physical health**
3. **Plans supporting low-barrier access to MOUD**
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| Measurement for MOUD |  | 1. **Measurement that reflects high quality care for MOUD**
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