

# Opportunities and Challenges for Nursing in WA State Medicaid Expansion and other New Initiatives

Session 2





# Learning Objectives

- Learn about WA State strategies for addressing the opioid crisis, including plans for treatment expansion
- Learn about nursing roles in successful WA State programs that have expanded depression care to pregnant women and high risk moms



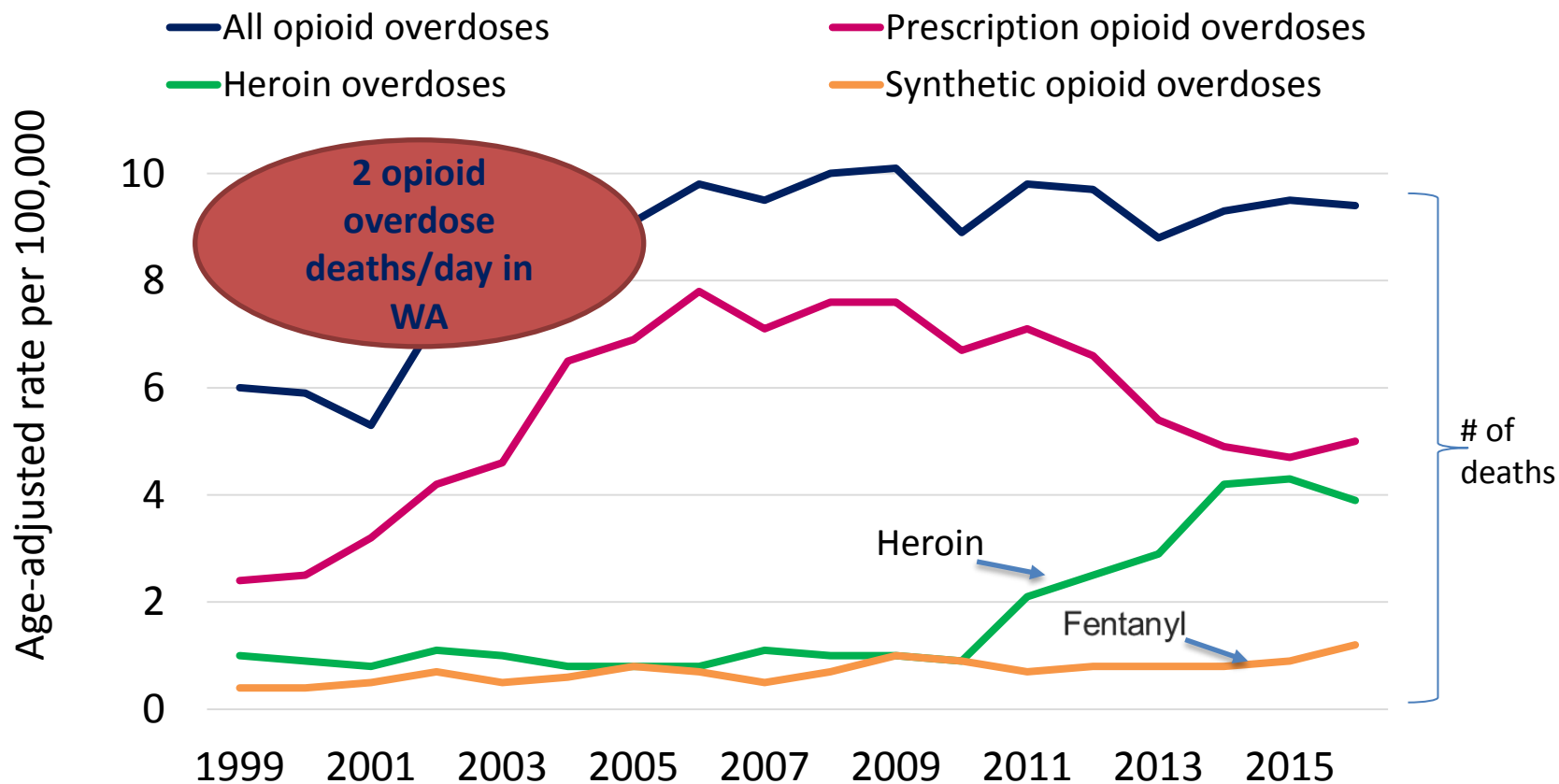
# Strategic Target Response to the Opioid Crisis Grants

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(STR), Division of Behavioral Health and Recovery  
Behavioral Health Administration



# Rate of opioid-related overdose deaths by type of opioid, WA 2000–2016



Source: DOH Death Certificates (Note: prescription opioid overdoses exclude synthetic opioid overdoses)

# DBHR Opioid Grants

- Grants to Prevent Prescription Drug/Opioid Overdose-Related Deaths (PDO)
- Medication-Assisted Treatment Prescription Drug & Opioid Addiction Grant Program (MAT-PDOA)
- Nurse Care Managers – State Proviso
- Opioid State Targeted Response (STR)

# SAMHSA STR Grant

Part of the 21st Century Cures Act, signed December 13, 2016, by President Obama

- Promotes and funds the acceleration of research into preventing and curing serious illnesses; accelerates drug and medical device development
- Addresses the opioid abuse crisis; and tries to improve mental health service delivery
- STR State award allocations based on need: \$485 million in grants to help states and territories combat opioid addiction
- WA State received \$11,790,25.
- 18 projects linked to WA State Interagency Opioid Working Plan and Governor's Executive Order 16-09

# Treatment Projects Overview

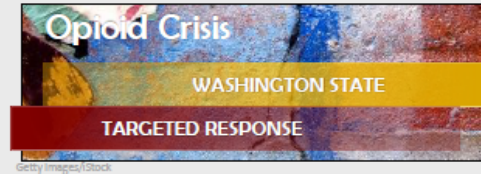
1. Hub and Spoke
2. Mobile OTP Van
3. Low-Barrier Buprenorphine Pilot
4. PathFinder Peer Project
5. Tribal Treatment
6. Treatment Payment Assistance
7. DOC Treatment Decision Re-entry Services & COORP
8. Bridge to Recovery (JRA)
9. Naloxone Distribution
10. Prescription Monitoring Program

## Hub and Spokes

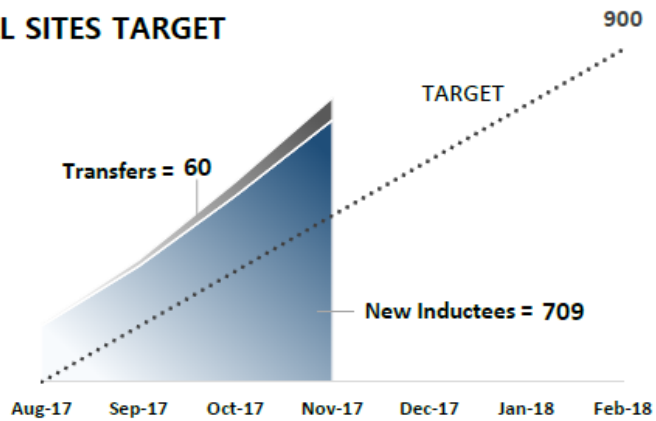
### All Sites

#### STR Monthly Summary Report

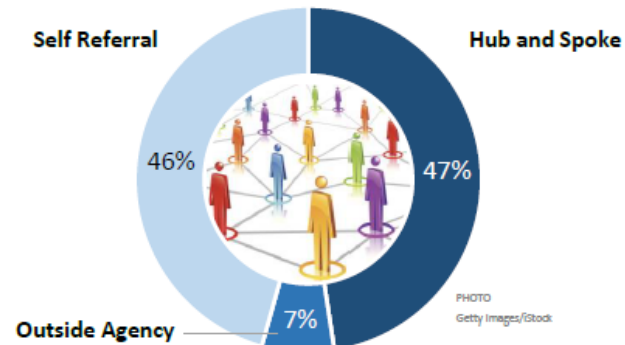
|                        |            |
|------------------------|------------|
| Total Treatment Events | <b>780</b> |
| Unduplicated Patients  | <b>774</b> |



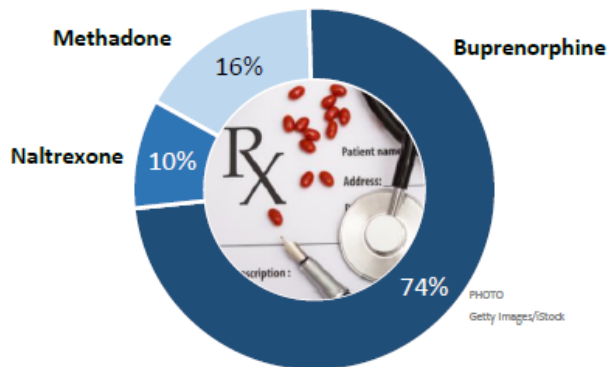
### ALL SITES TARGET



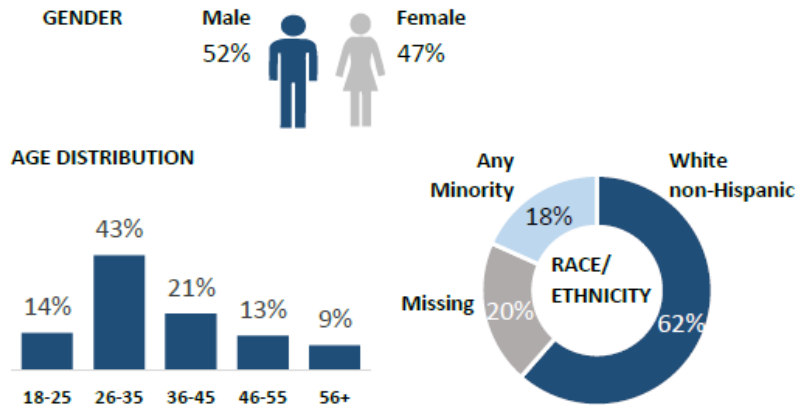
### REFERRAL SOURCE



### PRESCRIPTIONS



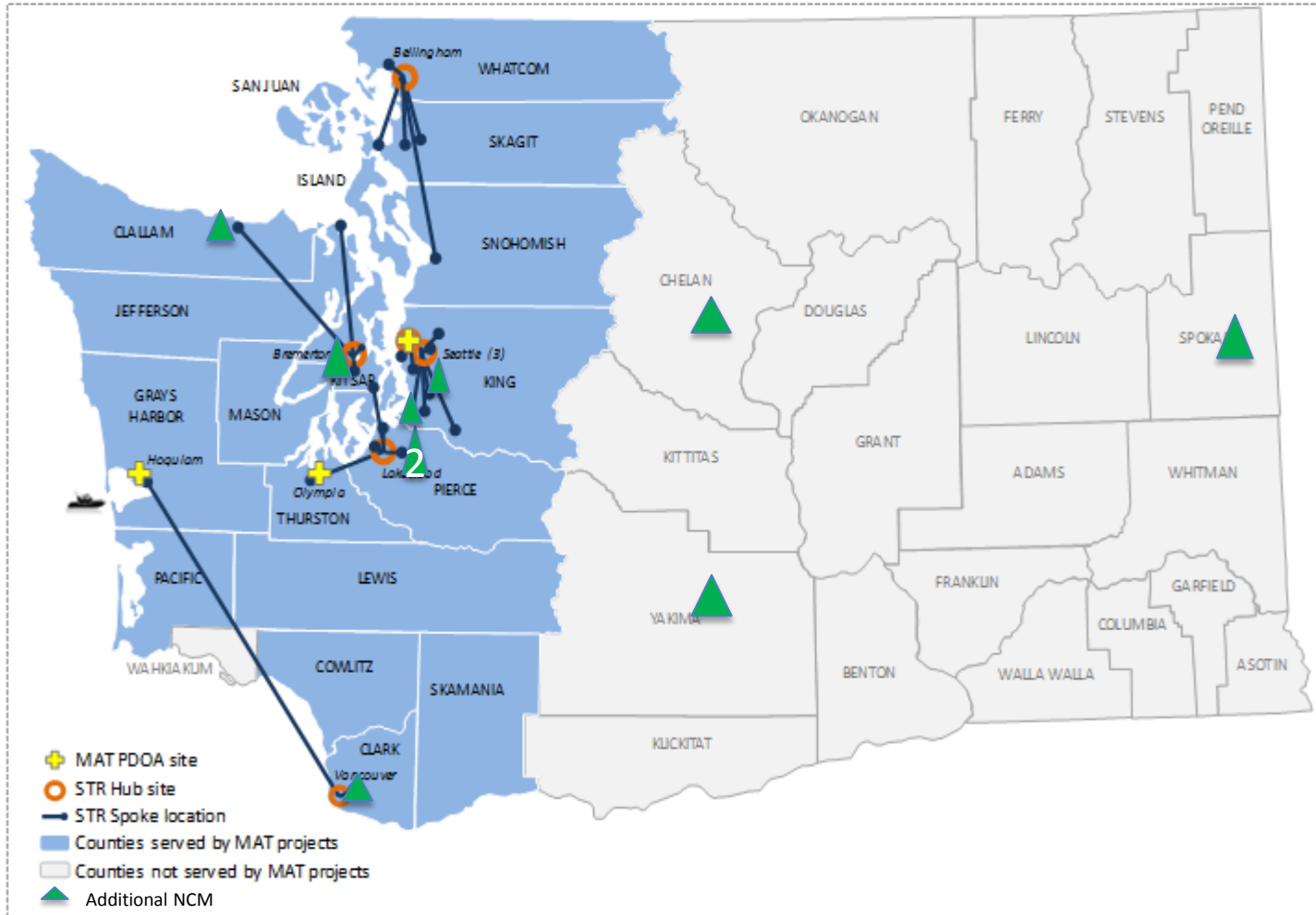
### DEMOGRAPHICS





### Medication Assisted Treatment Initiatives to Address the Opioid Crisis

WASHINGTON STATE



DATA SOURCE: Division of Behavioral Health and Recovery.

NOTE: STR Spoke locations may represent more than one clinic or agency providing MAT services or referrals to the STR Hub site.

# Importance of the nurse care manager

- Greater numbers of patients able to access treatment
- Supports complex patient needs without burdening providers
- Allows patients to access treatment in their community
- Integrated within primary care therefore supports primary care needs
- Integrates addictions care into medical treatment
- Individualizes treatment
- Removes stigma
- Engages providers
- Is financially sustainable

# Other State Efforts to Address Opioid Abuse & Misuse

- Policy/Legislation
- Prescription Take Back
- Revision of the WA State Interagency Opioid Plan
- Opioid Prevention & Treatment Workgroups
- Prescription Monitoring Program (DOH)
- Collaboration with the criminal justice system, Labor & Industries, Tribes, etc.
- Syringe Exchange (DOH)

# DBHR Updates

- **SAMHSA notification of year two STR funding:**
  - Continuation application due January 30, 2018, by DBHR to SAMHSA
- **Governor's proposed budget would fund:**
  - H&S expansion to four additional sites
  - Continuation of Naloxone distribution
  - MAT capacity tracking tool with ADAI/HelpLine
  - Drug take back
- **Legislature:**
  - Opioid crisis response – agency sponsored  
Anticipate many bills addressing the opioid crisis



# Nursing Roles in Depression Care for Pregnant Women and High Risk Moms

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PSYCHIATRY & BEHAVIORAL SCIENCES





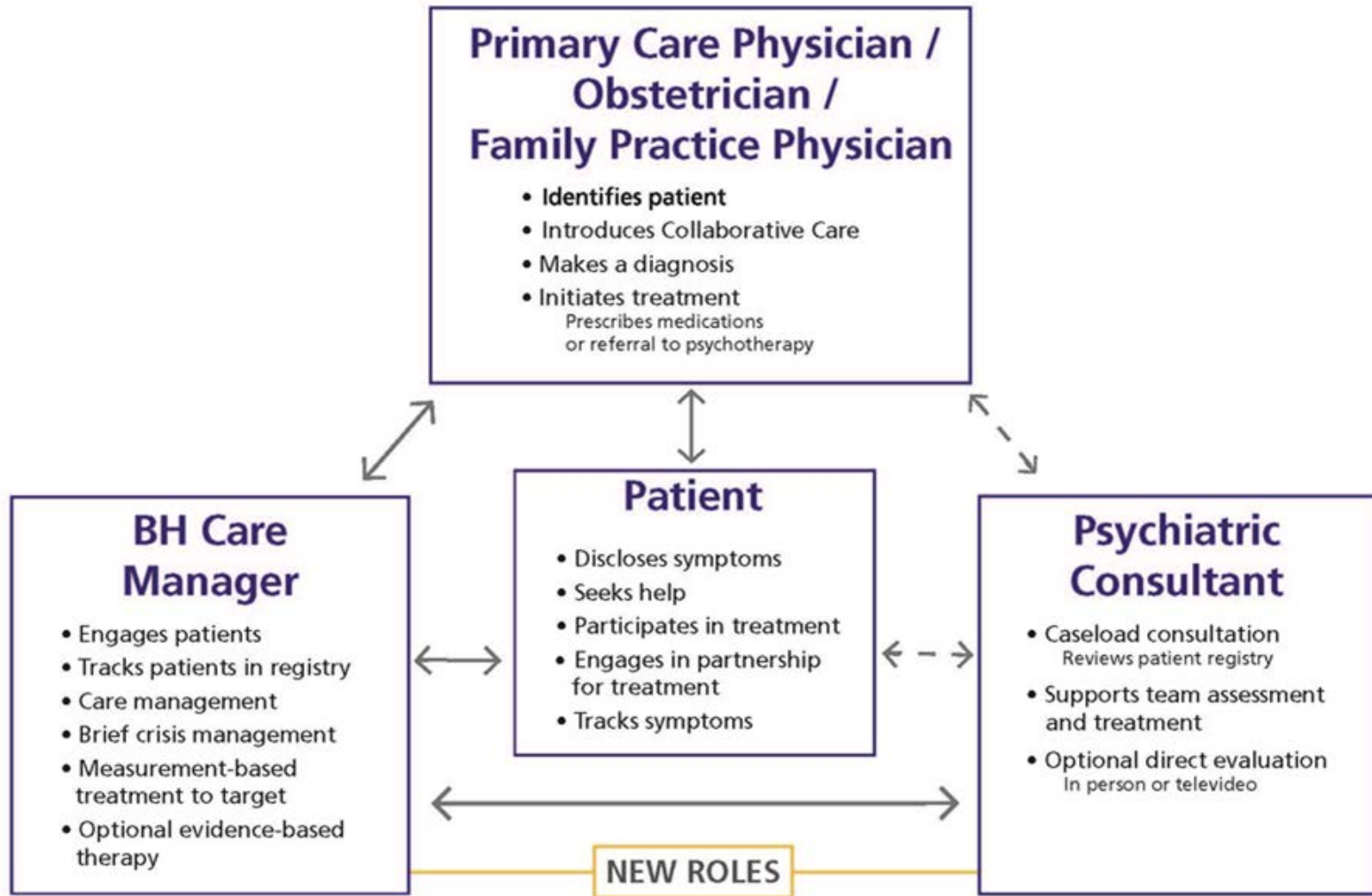
# Home Visiting Nurses and Perinatal Mental Health

- Implementation of perinatal collaborative care in a rural obstetric clinic
- To deliver mental health care as part of prenatal and postpartum care
- Ethnically diverse women (48% Hispanic, 44% Caucasian, 5% Native American, and 3% other) of all ages with either public or private insurance (44% Medicaid eligible).

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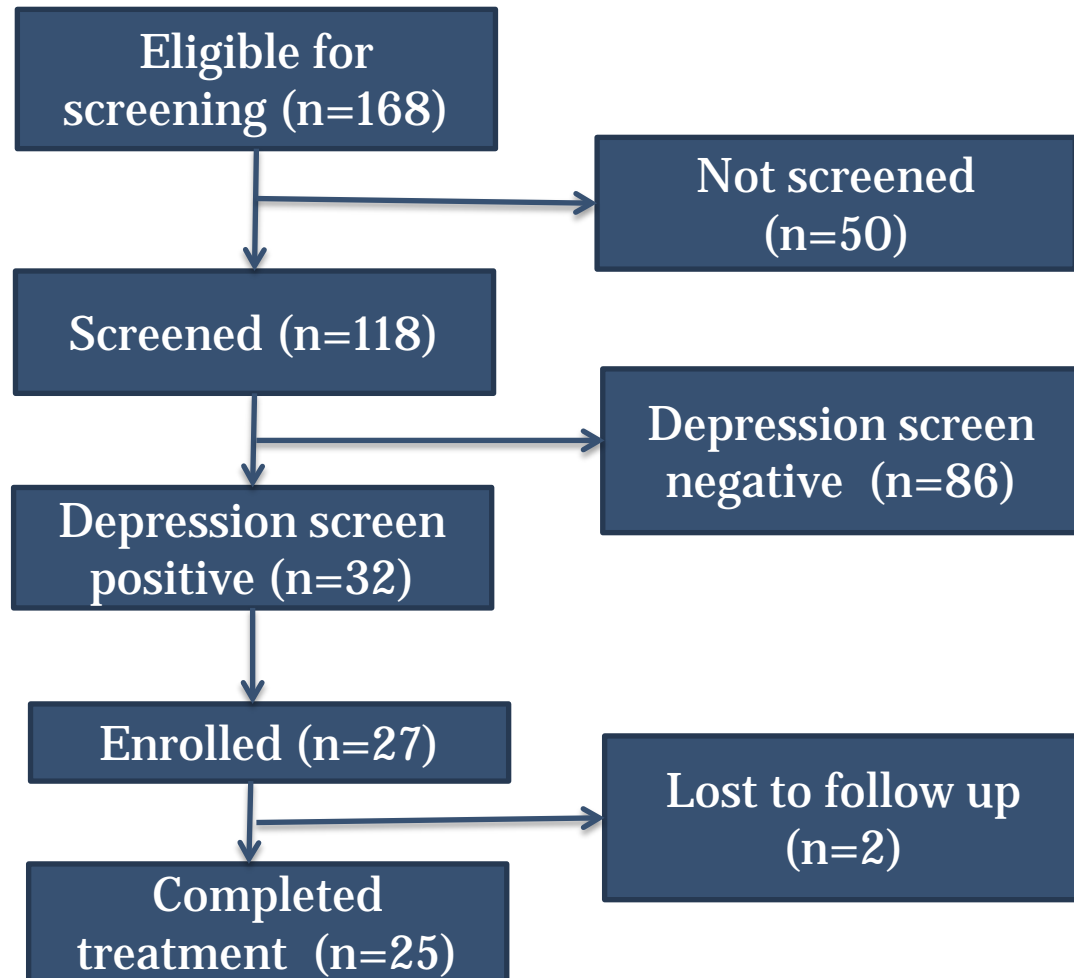


# Collaborative Care Team Structure



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# Results: Recruitment and Retention



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# Results: Treatment Outcomes

## Baseline depression score (Mean (SD))

**PHQ-9 score** 15.3 (4.0)

**EPDS score** 16.3 (5.8)

## Final depression score (Mean (SD))

**PHQ-9 score** 6.3 ± 4.4

**EPDS score** 9.7 ± 5.3

## Depression outcomes (N (%))

**Recovery (Final PHQ-9 <10)** 20 (80%)

**≥50% improvement PHQ-9** 16 (64%)

**Remission (Final PHQ-9 <5)** 8 (32%)

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# Lessons Learned

- Need for stronger connections between nurse care managers and prenatal providers
- Need for continuity in the postpartum period
- Sustainability!

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