



# Opioid Use & Misuse

## *Behavioral Health*

Abt Associates has taken bold action to help prevent opioid misuse and overdose in communities and states. Our work has helped address the supply and demand of illegal drugs and the misuse of legal and illegal substances for federal, state and local agencies, as well as other key stakeholders. We've pioneered research strategies to estimate the worldwide supply of illegal drugs, led research on drug-trafficking organizations, generated methods to estimate the demand for illegal drugs in the U.S. and evaluated the effectiveness of substance use disorder (SUD) treatment programs. Our team of multidisciplinary experts brings critical insight and approaches to help access the hard-to-reach and at-risk substance-using populations.

### **Selected Projects**

#### **Building Evidence on Employment Strategies**

As a subcontractor to MDRC, Abt plays a lead role on the Building Evidence on Employment Strategies for Low-Income Families Study (BEES), a project sponsored by the Administration for Children and Families at the U.S. Department of Health and Human Services. The goal: to conduct rigorous evaluations of innovative programs that increase earnings of low-income families and focus on addressing SUDs and/or mental health conditions. Abt leads work on identifying and evaluating programs that blend employment and SUD recovery and treatment services.

#### **Buprenorphine Outreach & Information**

**Dissemination** In December 2002, the Substance Abuse and Mental Health Services Administration's (SAMHSA) Centers for Substance Abuse Treatment launched New Paths to Recovery, a nationwide education program aimed at informing physicians about the availability of buprenorphine as a treatment option for opioid addiction. To support that program, Abt and its partners conducted eight forums in communities with high rates of opiate use. The first four were held in largely rural communities; the remaining forums were held in large cities. This contract also supported the development and production of Buprenorphine: A Guide for Nurses, which was published by SAMHSA in 2009 as a technical assistance paper.



#### **Supporting CDC's Development of the Opioid Prescribing Guideline**

To support safe prescribing and reduce the adverse effects of opioid use, the Centers for Disease Control and Prevention (CDC) developed a prescribing guideline for physicians. Abt synthesized research, assembled evidence tables and provided editorial support for draft clinical recommendations. We conducted rapid literature reviews on the harms associated with the use of opioids for chronic and acute pain; the harms of combining opioids with alcohol, other prescription drugs and illicit drugs; the effectiveness of non-opioid treatments for pain; patient and provider values and preferences for opioids; the cost-effectiveness of opioid therapy for chronic pain; and the impact of prescription drug monitoring programs on prescribing behavior and patient outcomes.

#### **Development and Evaluation of a Technical Package on Coordinated Care for Chronic Opioid Therapy**

The CDC hired Abt to develop a coordinated care plan for safe opioid prescribing. This included upper-limit dosing thresholds, attention to drug-drug and drug-disease interactions, urine testing for drugs and use of medication-assisted treatment. With MedStar Health, we evaluated the extent to which the demonstration sites were able to implement the plan's safer prescribing practices. The guide, along with other resources, is part of the resource CDC Quality Improvement and Care Coordination: Implementing the CDC Guideline for Prescribing Opioids for Chronic Pain.



### **Opioid Clinical Improvement Implementation Package for Large Healthcare Systems: Activities to Support Guideline Dissemination and Implementation**

The CDC funded Abt and partners to support our implementation of the CDC Opioid Prescribing Guideline in primary care practices. The project consisted of developing 16 opioid quality improvement (QI) measures that reflect the guideline recommendations and an associated implementation package. Both the opioid QI measure specifications and implementation package are available in the resource CDC Quality Improvement and Care Coordination: Implementing the CDC Guideline for Prescribing Opioids for Chronic Pain. In addition, we are supporting a QI collaborative of five health care systems implementing the CDC Guideline and associated QI measures. The QI collaborative consists of monthly clinical webinars, system leads calls to discuss implementation, IT staff calls to discuss producing the measures and support of systems and a central web resource.

### **Opioid Clinical Improvement Measures Implementation and Evaluation**

CDC funded Abt and our partners to implement the CDC Guideline and associated QI measures in six additional health care systems from across the country, adding to the current QI collaborative described above.

### **Development and Evaluation of Electronic Clinical Decision Supports (CDS) for Pain Management and Opioid Prescribing**

To help implement the opioid prescribing guidelines, CDC funded Abt's work with four healthcare systems to develop and implement CDS tools built into electronic medical record systems. We then evaluated the use of these tools in primary care settings and their impacts on clinical practices.

### **Estimating the Prevalence of Opioid Diversion by "Doctor Shoppers" in the U.S.**

Abt examined a nationwide sample of 146.1 million opioid prescriptions dispensed during 2008 to develop the first national, state and county estimates of the numbers of individuals who obtain excessive amounts of opioids from multiple physicians unaware that others are prescribing to these patients. The analyses of county-level prevalence examined the association of doctor shopping with several different characteristics of county populations and healthcare supply, among other factors.



### **Evaluating and Implementing the Six Building Blocks Team Approach to Improve Opioid Management in Primary Care**

The Agency for Healthcare Research and Quality (AHRQ) funded Abt and partners to improve the Six Building Blocks [for opioid management] and develop guidance for and evaluate their implementation in a diverse set of 15 primary care practices. The Six Building Blocks represent six key work areas that need to be redesigned in a primary care practice to improve a clinic's management of patients on chronic opioids.

### **Evaluating Prescription Drug Monitoring Programs' (PDMP) Effects on Physicians' Opioid Prescribing**

Abt used data from a national survey to assess the effects of PDMPs on the prescribing of opioid analgesics and other pain medications in ambulatory care settings in 24 states from 2001 to 2010. We found that the implementation of a PDMP was associated with more than a 30 percent reduction in the rate of prescribing of Schedule II opioids. This reduction was seen immediately following the launch of the program and was maintained in the second and third years afterward.

### **An Experimental Trial of Proactive Reporting by a PDMP**

Abt worked with Nevada's Prescription Drug Monitoring Program (PDMP) to conduct a test of mining its prescription data to identify suspicious opioid purchasing patterns indicative of doctor shopping. Patients so identified were assigned randomly to an experimental or control group; prescribers and pharmacists serving patients in former group were notified proactively. Comparing subsequent purchasing activity of patients in both groups showed that proactive notification had only a small impact on doctor shopping.





### **Evaluating SAMHSA's Strategic Prevention Framework for Prescription Drugs**

On behalf of SAMHSA, Abt leads the Program Evaluation for Prevention Contract (PEP-C) to evaluate the Strategic Prevention Framework for Prescription Drugs (SPF-Rx). The SPF-Rx program empowers grantees to use the resources of stakeholders—including public health departments, school systems, the criminal justice system and the pharmaceutical industry—to prevent and reduce prescription drug and illicit opioid misuse and abuse among youth and adults. Our evaluation will help answer whether the SPF-Rx produces desired outcomes.

### **Implementing Evidence-Based Practices in State Medicaid Systems: Medication Assisted Treatment**

To improve knowledge of mental health and substance use disorder services in Medicaid, SAMHSA's Center for Mental Health Services contracted with Abt to conduct an array of activities to educate Medicaid directors and staff. The project included the development of a report, "Implementing Evidence-Based Practices in State Medicaid Systems: Medication Assisted Treatment." This report demonstrates how successful implementation of MAT requires collaboration across general health, SUD and other social service systems (e.g., corrections, child welfare), as well as across individuals with different perspectives on the nature of recovery from SUDs.

### **Integration of Buprenorphine Treatment for Opioid Use Disorder (OUD) in HIV Primary Care Settings - Dissemination and Evaluation Center (DEC)**

Untreated OUD is associated with increased risk of HIV transmission, interferes with treatment adherence and impedes viral suppression. Abt, in partnership with the Boston University Center for Innovation in Social Work and Health, supports the Health Resources and Services Administration's Dissemination of Evidence-Informed Interventions Buprenorphine initiative. As the DEC, the team leads the multi-site implementation science study.

Findings will be integrated into four care and treatment interventions that are replicable; cost-effective; capable of producing optimal HIV care continuum outcomes; and easily adaptable to the changing healthcare environment.

### **Know Your Rights Brochure – Medication-Assisted Treatment**

Abt and its partner, the Legal Action Center, developed the "Know Your Rights" brochure and webinars to train and educate the public and those in recovery about the rights under federal and state laws of individuals in recovery from alcohol or drug problems. The information covers laws prohibiting discrimination against people with disabilities in the areas of employment, housing, public accommodation and government benefits and services. It also covers the rights of individuals with criminal conviction histories and individuals in medication-assisted treatment.

### **Massachusetts Health Policy Commission Behavioral Health and Substance Use Disorder Recommendations**

Charged with conducting a study of SUD treatment, the Massachusetts Health Policy Commission contracted with Abt to examine aspects of the opioid epidemic in the state and to provide recommendations to address the crisis. The study involved describing a plan to define a set of behavioral health system specifications, including considerations of financing and return on investment, provider capabilities, quality metrics and workforce development, followed by a gap analysis between these system characteristics and current capabilities.

### **Medicare Part D Opioid Policy Impact Evaluation**

The Centers for Medicare and Medicaid Services (CMS) implemented a policy to improve controls on opioid prescribing and dispensing and to reduce the number of beneficiaries at high risk of misuse and overdose. CMS developed a surveillance system that scans Part D prescription claims to identify Medicare beneficiaries who obtain excessive daily doses of opioids for 90 consecutive days or more; beneficiaries who use more than three prescribers and dispensers for opioids during a one-year period; and beneficiaries who meet both of these criteria. Abt conducted quantitative analyses to evaluate the effects of this policy.

### **Opioid Treatment Program Service Continuity Project**

Through a subcontract with FEi, Abt was contracted by SAMHSA to evaluate a project that used health information technology to support opioid treatment continuity. The purpose of the project was to assess the





feasibility of a technology designed to enable patients to control the sharing of their opioid treatment information with other providers via a Health Information Exchange and a patient portal in compliance with state and federal regulations, including 42 CFR Part 2. Abt's evaluation detailed the challenges and solutions associated with developing the technology and the extent to which SAMHSA's goals for this pilot were met.

### **Surgeon General's Report on Alcohol, Drugs and Health**

Abt supported the development of the first-ever Surgeon General's Report on Alcohol, Drugs and Health. This seminal project will have major implications for how the U.S. addresses the opioid epidemic and the public health problems associated with alcohol and other substances. The report discusses the growing relationship between prescription drug misuse and heroin use and provides evidence-based strategies for addressing opioid use.

### **Text Message Library for Individuals with Behavioral Health and Opioid Use Disorders**

Abt led the development of a text messaging library for SAMHSA to support individuals with opioid use disorders. Abt conducted stakeholder interviews with SAMHSA grantees who expressed interest in using text messaging services. Abt also interviewed subject matter experts with direct experience developing and implementing text messaging libraries and technology-based services for the behavioral health community. We developed and tested 150 text messages targeted to individuals in various stages of recovery and developed supporting implementation materials for the library.

### **Medication Assisted Treatment in Long Term Care Technical Support**

Abt and our partner, Healthcentric Advisors, are working collaboratively with the Massachusetts Department of Public Health (MDPH) Bureau of Health Care Safety and Quality (BHCSQ) and stakeholders to develop Medication for Opioid Use Disorder (MOUD) policies and procedures to treat residents in long-term care facilities (LTCF). We will provide an in-person learning session in four locations in the Commonwealth, provide on-site and remote technical support, engage an MOUD workgroup consisting of a range of relevant stakeholders, observe on-site practices, interview LTCF staff and conduct a detailed analysis of our findings.

### **Identifying and Testing Strategies for Management of Opioid Use and Misuse in Older Adults in Primary Care Practices**

Abt and our partner, Kaiser Permanente Washington Health Research Institute, are working with the Agency

for Healthcare Research and Quality to assess and describe current perceptions of the challenges associated with managing opioid use and misuse in older adults. We will create a compendium of tools, strategies and approaches for managing opioid use and misuse in older adults in primary care settings; support a primary care practice learning collaborative, which will develop and test innovative strategies, approaches or tools for opioid management; and identify remaining evidence gaps and areas of needed research. To accomplish this work, we will engage a technical expert panel (TEP) with a range of diverse, relevant backgrounds to provide guidance and feedback throughout the project. The results of all components of the environmental scan and input from the TEP will inform the development of the compendium of tools and strategies and their implementation and testing in the learning collaborative.

### **ODU and Housing Options for Recovery**

Abt conducted an exploratory study for the U.S. Department of Health and Human Services, Assistant Secretary for Planning and Evaluation (ASPE), to identify and document housing models for individuals with opioid use disorder who experience housing instability or homelessness. The systematic study examined housing models seeking to support individuals in their recovery so that governments and jurisdictions may scale up and evaluate such programs. The study methods included an environmental scan and interviews with experts in homelessness, housing, and OUD, family advocates, and providers.

### **For More Information**

**Christopher Spera, Ph.D.**

Division Vice President, Health & Environment

[Chris\\_Spera@abtassoc.com](mailto:Chris_Spera@abtassoc.com)



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Abt Associates uses data and bold thinking to improve the quality of people's lives worldwide. From increasing crop yields and combatting infectious disease, to ensuring safe drinking water and promoting access to affordable housing—and more—we partner with clients and communities to tackle their most complex challenges.

