Access to Medication Assisted Therapy
Department of Vermont Health Access

VERMONT
AGENCY OF HUMAN SERVICES

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AIM Agency Improvement Model
CUSTOMER FOCUSED SYSTEMS CHANGE

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PLAN
Identify an opportunity and plan for improvement.

Area for Improvement (Why focus on this area?)
Medication Assisted Therapy (MAT) uses medications, such as methadone and/or buprenorphine, to treat beneficiaries with an opioid dependence diagnosis. DVHA was aware that beneficiaries were having difficulty accessing buprenorphine MAT services.

Target Goal
Increase access to buprenorphine MAT services for Medicaid beneficiaries. This will be measured by a reduction of 1% in total calls requesting access to medical services. [The team discovered that beneficiary requests specifically for MAT providers have historically not been reported separately from overall medical resource requests, making it impossible track buprenorphine-related requests only.]
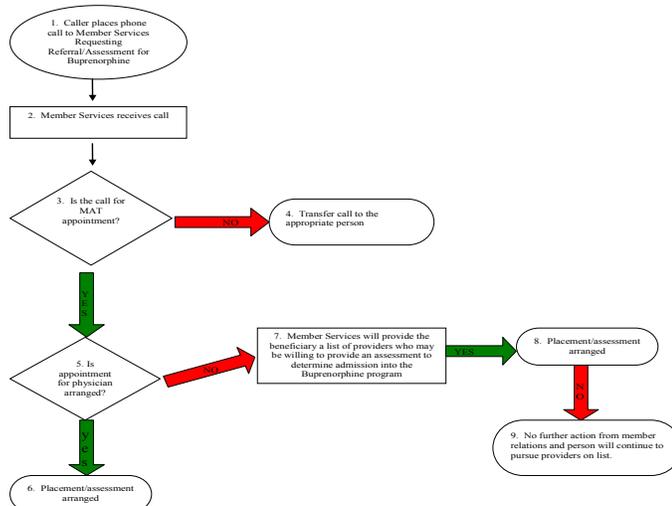
Baseline Data
According to Green Mountain Care Member Services (GMMS) data for the month of July 2012, there were approximately 562 calls requesting information about access to medical resources (such as to a PCP or other medical specialist).

What change ideas (theories) did you have before you started testing changes?

DVHA Provider and Member Relations would:
- Inform and encourage beneficiaries to call and reach out to their Primary Care Providers and ask them to assist in finding MAT resources.
- Encourage beneficiaries to call the preferred drug and alcohol treatment provider in their catchment area and request their services.

Our team flowcharted the current Access to Medication Assisted Therapy process below:

DO
What ideas for improvement did you test?

1. Provide DVHA Provider and Member Relations with an updated list of MAT buprenorphine providers who currently may be accepting new patients.

   o Map the number of Medicaid specialized (buprenorphine) providers in the state and provide their geographical locations.

   o Use Medicaid claims to map the number of beneficiaries receiving MAT services.

2. Identify beneficiaries potentially in need of MAT.

   o Use Green Mountain Care Member Services (GMMS) data to identify beneficiaries who have requested MAT services from DVHA.

   o Work with DVHA Provider and Member Relations to identify potential MAT beneficiaries and match them with available buprenorphine providers.

STUDY
What were the results of your test(s)? What is your final post-change data compared to the baseline data?

- Mapping of all Medicaid buprenorphine physicians located in the state has been completed and the approximate number of beneficiaries they are serving has been determined.

- Current Medicaid MAT beneficiaries have been matched with their MAT providers.

- Post-implementation data is being gathered.

ACT
What lessons did you learn from the process? How will this change be sustained?

- To fully utilize the GMMS data, we will need to implement a process to identify and separate beneficiary calls specifically requesting MAT services.

  - The Provider and Member Relations Director will provide a line item in the GMMS report that identifies beneficiary calls requesting information about buprenorphine.

- The list of buprenorphine prescribing physicians to be provided to beneficiaries will be updated quarterly.