

Substance Use Treatment Helpline 1-855-780-5955

This confidential service is provided at no added cost to you. It is part of your health benefit. Your personal information will be kept confidential in accordance with state and federal laws.

MIIWAYS

Call the number above or visit: liveandworkwell.com/recovery

It starts with a single call — and we stay with you for up to six months.



Our specialized licensed clinicians are available 24/7.

The substance use treatment advocate will:

Take the time to fully understand your personal situation and guide you on the next steps most helpful to you

Educate you on appropriate treatment options and types of providers

Arrange a face-to-face clinical evaluation for you by a trusted licensed substance use treatment provider — usually within 24 hours



thorough evaluation, create a

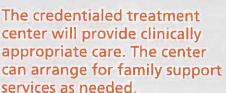
designed just for you and get

personalized treatment strategy

you to the treatment you need.





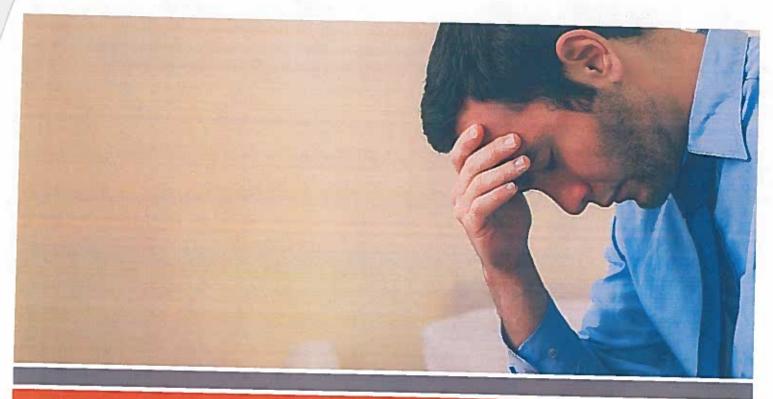


We assign a dedicated licensed care advocate to you and your family. He or she will provide ongoing support for up to six months to help ensure the best chance of recovery.

Only a treating health care clinician or physician can endorse any treatment or medication, specific or otherwise. This service provides referrals to such a professional as well as information to help you maintain and enhance your personal health management. This service and information is not meant to replace professional medical advice. Certain treatments may not be included in your insurance benefits. Check your health plan regarding your coverage of services.

^{1.} Grant BF, Goldstein RB, Saha TD. Chou SP, et al. Epidemiology of DSM-5 alcohol use disorder results from the National Epidemiologic Survey on Alcohol and Related Conditions III. JAMA Psychiatry, June 3, 2015

^{2.} Fletcher AM. Inside Rehab. The Surprising Truth About Addiction Treatment — and How to Get Help That Works. New York, NY. Viking, 2013.



Alcohol and drug addiction

Not a character weakness — a treatable condition.

Why wouldn't you treat a life-threatening condition?

It's hard to acknowledge that you or a loved may have a problem. You may feel it's a character weakness that needs to be hidden. But alcohol and drug addiction is a condition, and it's treatable. Almost one-third of adults in the U.S. will experience a substance use disorder at some time in their life. Yet only 20 percent get help, due to the stigma associated with the disorder. However, if it were any other life-threatening illness, you would seek care right away. You and your family can beat this. And we can help.

Everyone's unique — and their treatment should be too.

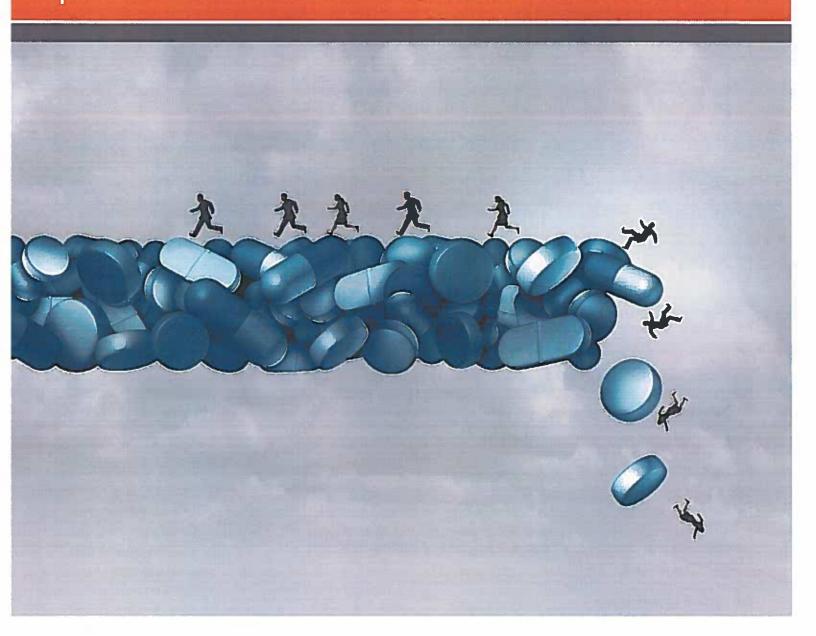
Seeking treatment is the first important step. But understanding different types of treatment and knowing where to go are just as critical. It can be confusing. Some private, upscale treatment centers promote spalike amenities and guarantees of recovery. These should be avoided. The truth is, everyone is unique. Each individual should be evaluated by a trusted licensed doctor to be sure that their treatment plan is designed around their individual needs and follows clinical best practices.

A licensed clinical advocate just for you — any time.

To help make this process as effective and easy as possible, we have introduced our Substance Use Treatment Helpline program. It's managed by a highly specialized group of licensed clinicians. They are experts in supporting you and your family in getting the appropriate help you need — almost immediately.

Allways

Opioid Use Disorder – Quick Reference Guide



A handy reference guide for clinicians working with patients that are presenting with indications of opioid use disorder.

The information herein offers informational resources and tools and is intended for educational purposes only. All treatment and level of care decisions are at the discretion of the clinician. Nothing herein is intended as legal advice or opinions. Please consult your legal advisor related to your particular practice.

To download the most up-to-date version of this document, visit: www.providerexpress.com -> Quick Links: Behavioral Health Toolkit -> Opioid Use Disorder Quick Reference Guide



Tools that can help you make a difference



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Allow your patients to communicate with a licensed clinician 24/7 to:

- Identify local MAT and behavioral health treatment providers and provide targeted referrals for evidence-based care
- Educate members/families about substance use
- Assist in finding community support services
- Assign a care advocate to provide ongoing support for up to 6 months, when appropriate

This toolkit provides resources to help clinicians **identify**, **diagnose** and **refer** individuals suffering from Opioid Use Disorder to timely mental health resources.

Opioid Use Disorder (OUD)

Facts

- 2.1 million Americans suffer from an OUD.
- In 2017, an estimated 70,000 deaths were caused by opioid overdose, meaning every 13 minutes someone in the U.S. died from an opioid overdose.²

Treatment is Available

- Evidence-based OUD treatment combines both:
 - a) FDA-approved medication-assisted treatments (MAT)*, for example: buprenorphine, naltrexone and methadone
 - b) Evidence-based OUD-focused behavioral therapy.
- Individuals who receive MAT are 50% more likely to remain free of opioid misuse,³ compared to those who receive detoxification or psychosocial treatment alone.

In This Toolkit

P.2....OUD Screening Tool

P.3....OUD Treatment and Speaking with Patients

P.4.....Referring Patients to Treatment

P.5.....Additional Resources

Note: FDA approval does not guarantee coverage by your health plan – please be sure to verify coverage based on your benefits

Substance Abuse and Mental Health Services Administration (SAMHSA). (2017) Key substance use and mental health indicators in the United States. Results from the 2016 National Survey on Drug Use and Health (HHS Publication No. SMA 17-5044, NSDUH Series H-52). Rockville, MD. Center for Behavioral Health Statistics and Quality. SAMHSA.

National Drug Overdose Deaths—Number Among All Ages, by Gender, 1999-2017, More than 70.200 Americans died from drug overdoses in 2017, including illicit drugs and prescription oploids (CDC Wonder) revised January 2019.

Calculated by Optum, based on relative risk ratios from the meta-analysis in: Nielsen S, Larance B, Degenhardt L, Gowing L, Kehler C, Lintzens N. Opioid agonist treatment for pharmaceutical opioid dependent people. Cochrane Database of Systematic Reviews 2016, Issue 5 Art. No. CD011117, DOI: 10.1092/14651858.CD011117 pub2, pages 17 and 19.

Screening for OUD

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DSM-5 Opioid Use Disorder Checklist⁴

Instructions

- 1. Answer "yes" or "no" for the questions below
- 2. Sum all "yes" symptoms
- 3. Use the Severity Scale (to the right) to measure OUD severity based on the number of symptoms present

Severity Scale	Corresponding ICD-10 Code*
Mild = 2-3 symptoms	305.50 (F11.10)
Moderate = 4-5 symptom	oms304.00 (F11.20)

^{*} Not to be used with intoxication, withdrawal, and/or opioid mental disorders

Severe = 6+ symptoms......304.00 (F11.20)

DIAGNOSTIC CRITERIA (Opioid use disorder requires that at least 2 criteria be met within a 12-month period.)		MEETS CRITERIA? Yes OR No	NOTES/SUPPORTING INFORMATION
1.	Opioids are often taken in larger amounts or over a longer period of time than intended.		
2.	There is a persistent desire or unsuccessful efforts to cut down or control opioid use.		
3.	A lot of time is spent in activities necessary to obtain the opioid, use the opioid, or recover from its effects.		
4.	Craving, or a strong desire to use opioids.		
5.	Recurrent opioid use resulting in failure to fulfill major role obligations at work, school, or home.		
6.	Continued opioid use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of opioids.		
7.	Important social, occupational, or recreational activities are given up or reduced because of opioid use.		
8.	Recurrent opioid use in situations in which it is physically hazardous.		
9.	Continued use despite knowledge of having a persistent or recurrent physical or psychological problem that is likely to have been caused or exacerbated by opioids.		
ā	Tolerance,** as defined by either of the following: a need for markedly increased amounts of opioids to achieve intoxication or desired effect markedly diminished effect with continued use of the same amount of an opioid		
â	Withdrawal,** as manifested by either of the following: i) the characteristic opioid withdrawal syndrome i) the same (or a closely related) substance is taken to relieve or avoid withdrawal symptoms		

^{**} This criterion is not met for individuals taking opioid solely under appropriate medical supervision
4. Substance Abuse and Mental Health Services Administration (SAMHSA). TIP 63. Medications for Opioid Use Disorder – Full Document, Page 5-21. Retrieved from https://store.samhsa.gov/product/TIP-63-Medications-for-Opioid-Use-Disorder-Full-Document-Including-Executive-Summary-and-Parts-1-5-/SMA18-5063FULLDOC

OUD treatment and speaking with patients

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Evidence Based Treatment of OUD

It is important that patients receive <u>BOTH</u> MAT and evidence-based OUD-focused behavioral therapy. When combined there is improved adherence and engagement in patients with OUD treatment compared to patients receiving pharmacological therapy alone.

Potential MAT Providers

- Physicians
- Physician Assistants
- Nurse Practitioners

Potential Licensed Behavioral Therapy Clinicians

- Psychologists
- Psychiatrists
- Nurse Practitioners
- · Therapists/Social Workers

Approaching a Patient with an Initial Diagnosis⁵

Example Language when Approaching your Patient



with OUD

- As your doctor, I am concerned about your opioid use
- Per my assessment, your opioid use is causing you/others harm
- I recommend that you stop or cut down on your opioid use.
- You are the only one that can change your behavior
- I know you can do this and I am happy to help
- Is this something that you are interested in doing?





Further Prompts

- There is a medication that can be prescribed that may help you stop or reduce your opioid use.
- I also want to connect you with a provider to help you get counseling which is important to your long term success. Are you interested in this?
- Let's call the Substance Use Disorder Helpline together to get you the help you need.

Further Prompts

- As I said, you are the only one who can change your behavior. I am ready to help you if you decide to make a change in the future.
- Could I see you again in the future to discuss this again?

Patient Follow-Ups⁵

Assess

- Opioid use since last visit
- Participation in counseling and/or self-help programs
- General medication adherence and side effects

If Patient Used Opioids

- "Were you able to cut down on the amount used?"
- "What circumstances led you to use opioids"

^{5.} Heinzerling, Keith, Allison Ober, Karen Lamp, David De Vries, Katherine Watkins, SUMMIT Procedures for Medication-Assisted Treatment of Alcohol or Opioid Dependence in Primary Care. 2016 Retrieved from https://www.integration.samhsa.gov/clinical-practice/mat/RAND_MAT_guidebook_for_health_centers.pdf

Referring patients to treatment

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Finding a Local Behavioral Health Provider

Optum can help arrange MAT and psychosocial treatment for its members through the steps below. Non-Optum members can contact the behavioral health phone number on the back of their insurance card.

Option 1

Substance Use Helpline

Telephone: 1-855-780-5955

Online Chat: https://www.liveandworkwell.com/en/public/topics/suds.html

Option 2

Online Provider Search 1. Go to Optum's online portal: www.liveandworkwell.com

- 2. Enter access code "Clinician"*
- 3. Select the "Get Started" link under Mental Health Care Search
- 4. Input your address and enter your desired search term:
 - A. For MAT Providers search = "Medication Assisted Treatment"
 - B. For Substance Use Behavioral Therapy search "Substance Use"
- When appropriate, select "Add Filters" and the dropdown for "Coverage/Plan Type" to filter for the member's category of insurance (Medicare, Medicaid, or Commercial)
- *Because "Clinician" is a general access code, a given member's provider network can differ; therefore, please encourage members to verify any providers' in-network status by calling the number on the back of their behavioral health insurance card









Additional Resources

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Provider Resources

ASAM Fundamentals of Addiction Medicine A 40-hour CME online educational program empowering primary care and other providers to diagnose and treat patients with or at risk for addiction.

asam.org > education > Live &
Online CME > The ASAM
Fundamentals of Addiction
Medicine 40-Hour CME Program

CDC Guidelines for Prescribing Opioids Help determine: (1) when/how to initiate opioids for chronic pain, (2) what opioids to initiate, at what dose, and for what duration, and (3) how to assess risks and address harms of opioid use.

cdc.gov/drugoverdose > Info for Providers > Guideline Overview > Guideline for Prescribing Opioids for Chronic Pain

RAND - SUMMIT:

Procedures for
MAT of Alcohol or
Opioid Dependence in
Primary Care

Extensive provider resources for medication-assisted treatment including: dosing guidance, OUD assessments, and communication guides.

rand.org/pubs > All Series = Tools
> Topic = Substance Abuse
Treatment > Time = All Time >
SUMMIT: Procedures for
Medication-Assisted Treatment of
Alcohol or Opioid Dependence in
Primary Care

SAMHSA Opioid Overdose Toolkit Comprehensive toolkit on opioid overdose for providers, patients, families, and friends.

store.samhsa.gov > Opioid-Overdose Prevention Toolkit

SAMHSA Pocket Guide:
Medication-Assisted
Treatment of Opioid Use
Disorder

A guide for providers on medicationassisted treatment. store.samhsa.gov > Medication-Assisted Treatment of Opioid Use Disorder Pocket Guide

Member/Family Resources

ASAM Opioid Addiction Treatment –Guide for Patients, Families, and Friends

Information on assessing and treating opioid addiction, focused on patients, families, and friends.

asam.org > resources > patient resources > Opioid Addiction Treatment: A Guide for Patients, Families and Friends

Shatterproof: Stronger than Addiction

Extensive content regarding addiction for patients, families, and friends.

Shatterproof org