





Substance Use Disorder Treatment Initiation and Engagement

Vermont Department of Health Department of Vermont Health Access

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What is treatment initiation and engagement? How is it calculated?

What is initiation and engagement in treatment?

Describes system's ability to identify people with substance use disorder, assist them in accessing treatment, and subsequently stay in treatment

Index Event

Person receives a new substance use disorder diagnosis by a provider anywhere in the Medicaid system

- Primary care
- Hospital
- Specialty treatment provider
- Mental health practitioner
- Etc.



Treatment Initiation

Person begins substance use disorder treatment

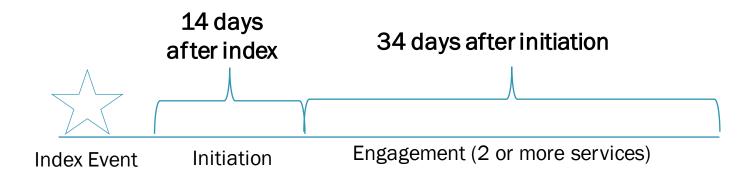


Treatment Engagement

Person continues to receive treatment

Initiation and Engagement (IET) Measurement

 Standardized Measure Used by the Centers for Medicare And Medicaid Services based on the <u>Healthcare Effectiveness Data Information Set (HEDIS)</u>



 Many index events occur in the medical system (primary care, hospitals) so regional coordination care between providers and provider types is essential to improving initiation and engagement

Data Notes

- The data source for the initiation and engagement calculations presented is Medicaid claims
- The year of the data presented in this document refers to the year the services were provided. Please note that this is different than how Healthcare Effectiveness Data Information Set (HEDIS) data are reported. HEDIS 2021 data is based on 2020 claims
- Medicaid data are used because it includes claims that span multiple provider and services types, allowing the calculations to be made across providers and systems
- "Other" used to describe substances in this report include any drug other than alcohol or opioids. This includes but is not limited to substances such as cocaine/crack, methamphetamines, cannabis, etc.
- The county calculations are based on the Medicaid recipient's county of residence
- Vermont modified the measure specifications to accommodate VT-specific billing mechanisms
- IET is used widely to monitor treatment for substance use disorders:
 - CMS' Core Quality Measure Set for Medicaid Adults
 - Vermont Medicaid's Global Commitment Core Measure Set
 - VMNG ACO payment measure
 - Vermont's Substance Abuse 1115 Waiver
 - All Payer Model measure
 - Former Medicaid ACO Shared Savings Program measure
 - Blueprint annual report measure

Data details

IET measure summary is here and technical details from Centers for Medicare and Medicaid are here

Definitions used for IET are modified annually to reflect the intent of the measure and coding changes

Index Event: Medicaid patients who were diagnosed with a new episode of alcohol, opioid, or other drug abuse or dependency during a visit between January 1 and November 14 of the measurement period.

- New episode = Medicaid patients with a previous active diagnosis of alcohol, opioid or other drug abuse or dependence in the 60 days prior to the first episode of alcohol or drug dependence
- Exclude patients whose hospice care overlaps the measurement period

Initiation: Initiation of treatment includes either an intervention or medication for the treatment of AOD abuse or dependence within 14 days of the diagnosis (index event)

Engagement: Engagement in ongoing treatment includes two additional interventions or a medication for the treatment of AOD abuse or dependence within 34 days of the initiation visit. For patients who initiated treatment with a medication, at least one of the two engagement events must be a treatment intervention (i.e., engagement for these members cannot be satisfied with medication treatment alone).

Vermont modifications due to unique billing mechanisms and coding

In Vermont Medicaid, medication for opioid use disorder (MOUD) in hubs is currently billed as one unit per month. The HEDIS IET specification looks for one service within 14 days of index event to count as initiation and two services within 34 days of initiation for engagement. An adjustment to the IET rate was used to count the multiple visits each week occurring at the hubs. Also, VT billing codes for behavioral health residential substance use disorder treatment facilities do not match the IET measure, so for this measure are counted as subacute facility visits.

Please note that treatment services are offered through Community Health Teams and Spoke Staff that may not be reflected in these numbers because the funding mechanism for these teams does not require the generation of a service claim. Since the measure is based on Medicaid claims data, the numbers likely under-represent the rates of initiation and engagement in treatment.

Vermont treatment initiation and engagement rates

The Challenge: Many Vermonters are not starting or staying in treatment for substance use disorders after the initial diagnosis

Index Event: A person is diagnosed with a substance use disorder

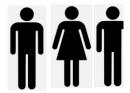


Initiation: Percent who received a treatment service within 14 days of index event



50% of Index Events

Engagement: Percent getting 2+ treatment services in the 34 days after initiation



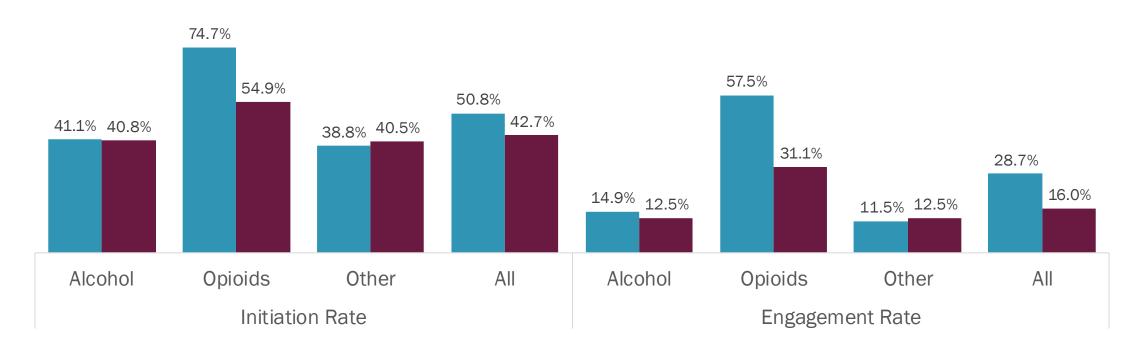
28% of Index Events

Data Source: Medicaid Claims. Measure is based on the 2021 Healthcare Effectiveness Data and Information Set (HEDIS) initiation and engagement in treatment methodology modified to accommodate Vermont-specific billing mechanisms.

Vermont's Medicaid initiation and engagement rates for opioids are higher than other states, but similar for alcohol and other substances



■ Adults 18+ ■ US, Adults 18+



There were a few changes between 2019 and 2020

 There was a 12% decrease in index events between 2019 and 2020. This is likely due to fewer people accessing care because of Covid-19

2019 - 4,796 index events

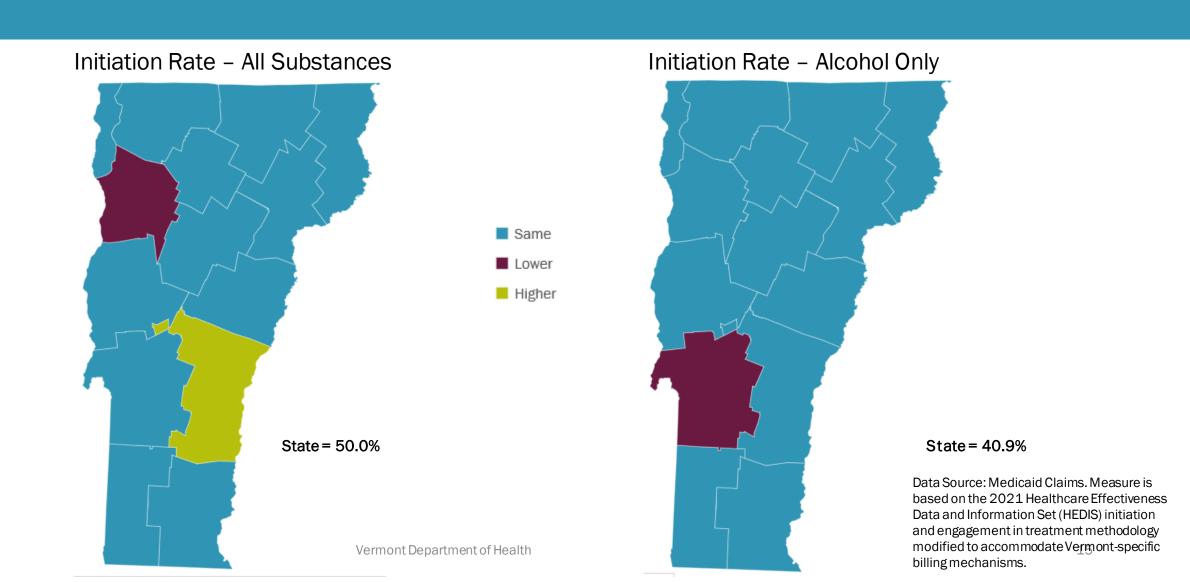
2020 - 4,248 index events

- Alcohol remains the substance most frequently associated with index events
 - it accounted for 45% of all index events in both 2019 and 2020

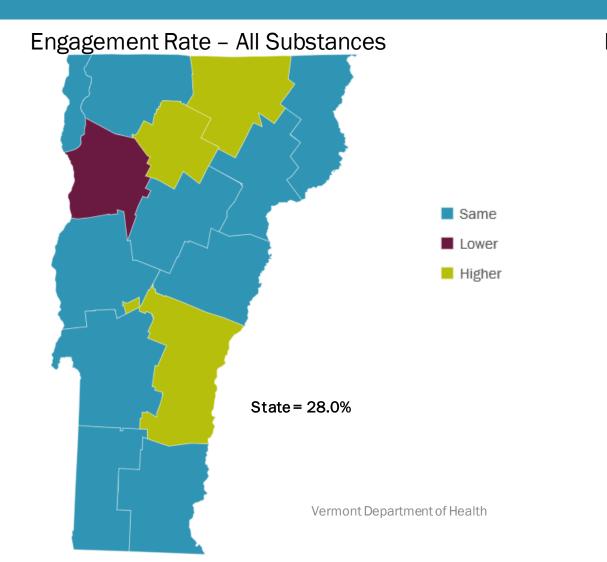
Opioids made up 34% of all index events in both 2019 and 2020

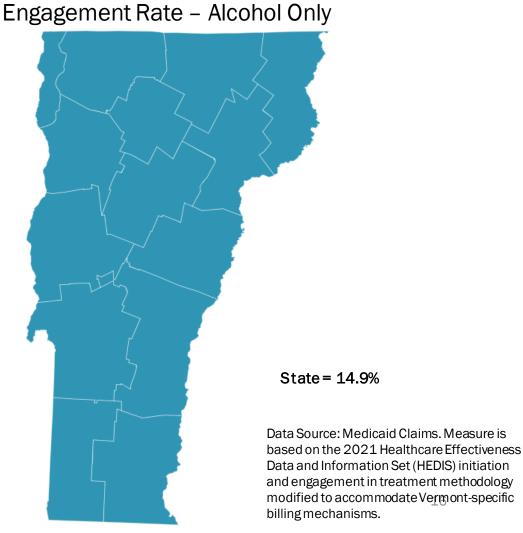
Vermont 2020 county treatment initiation and engagement rates compared to state rates

Treatment initiation rates in most counties were statistically similar to state treatment initiation rates in 2020



Treatment engagement rates in most counties were statistically similar to state treatment engagement rates in 2020

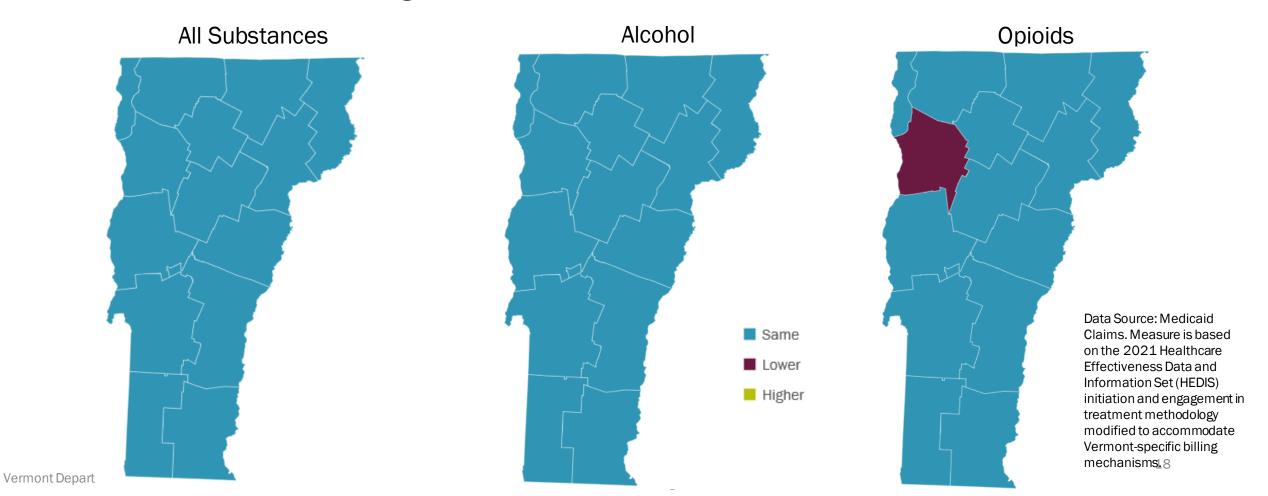




Vermont 2020 county treatment initiation and engagement rate distribution and change compared to 2019

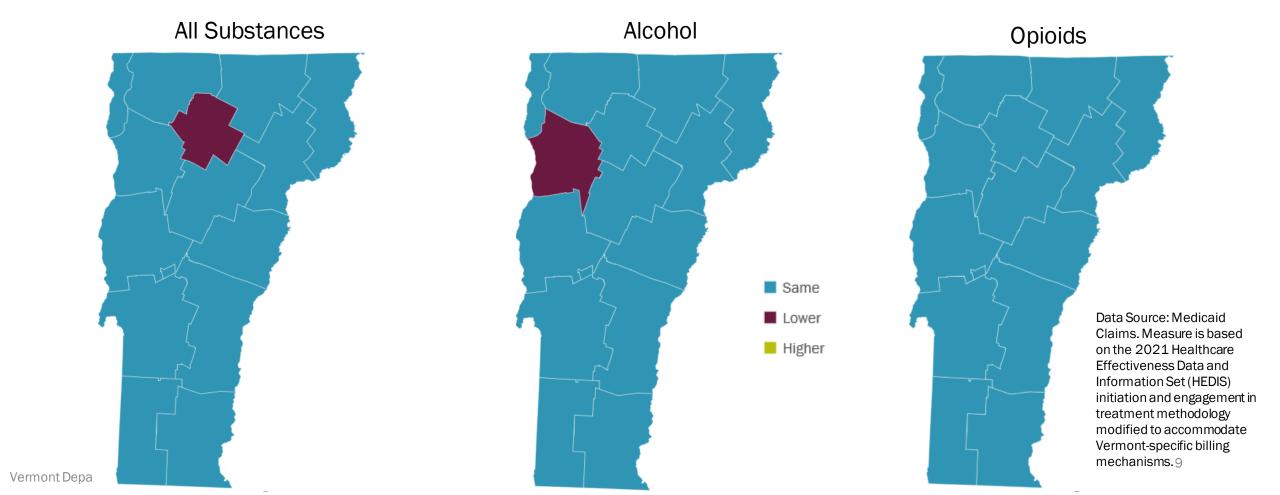
The only change in county-level initiation rate between 2019 and 2020 was a statistically significant decrease in opioid initiation in Chittenden County. No county had a significant increase. The state initiation rate did not change significantly.

Change in Initiation Rate between 2019 and 2020

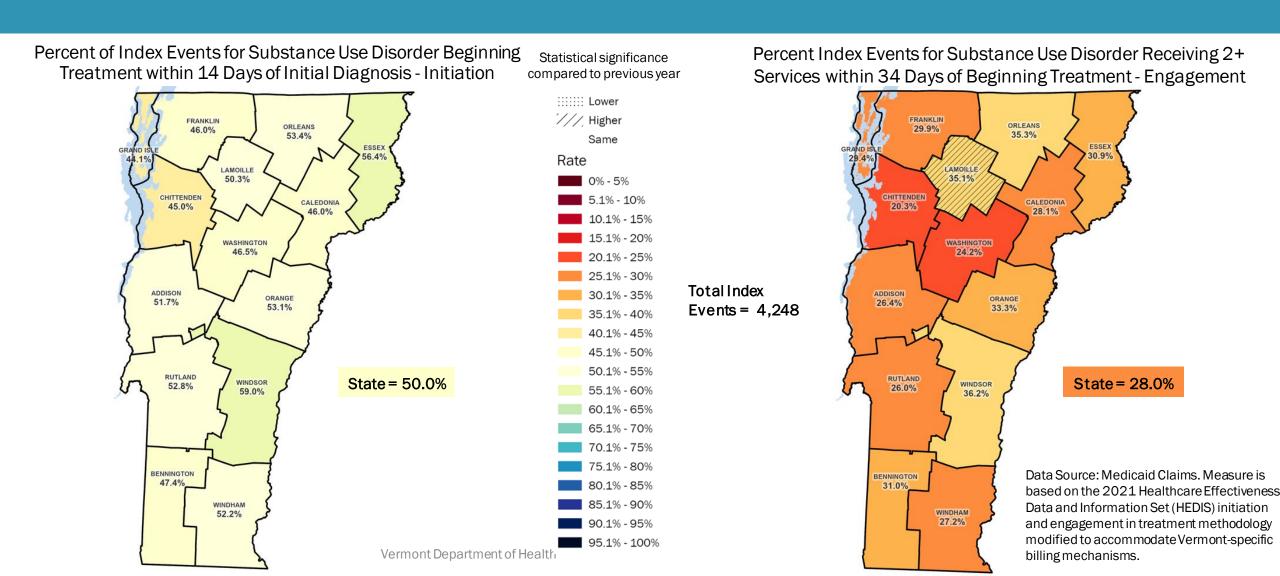


There were few changes in county-level engagement rates between 2019 and 2020 – Lamoille County had a statistically significant decrease for all substances and Chittenden had a decrease in alcohol engagement. No county had a significant increase. The state engagement rate did not change significantly.

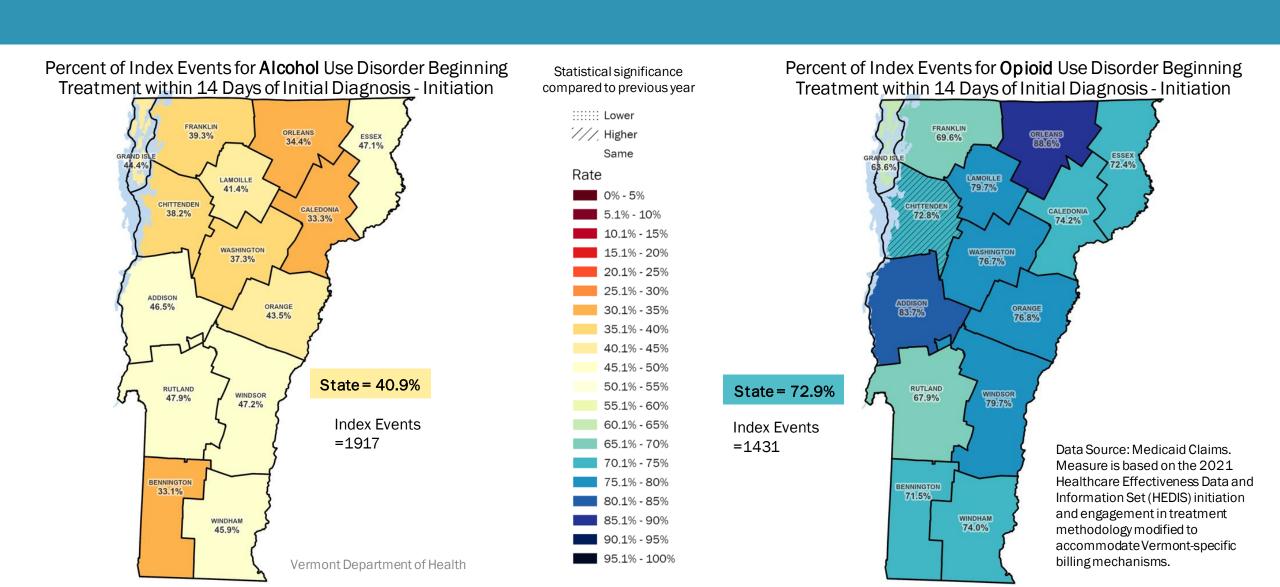
Change in Engagement Rate between 2019 and 2020



There were very few changes in treatment initiation and engagement rates for substance use disorder between 2019 and 2020

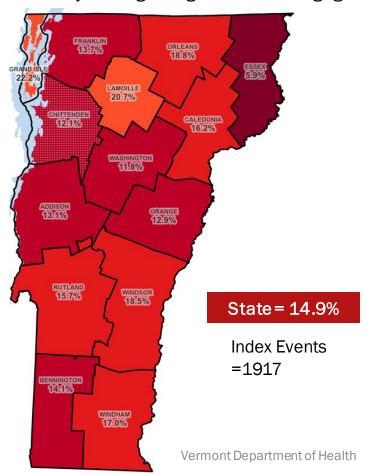


2020 treatment initiation rates for opioid use disorder are nearly 1.8 times higher than initiation rates for alcohol use disorder

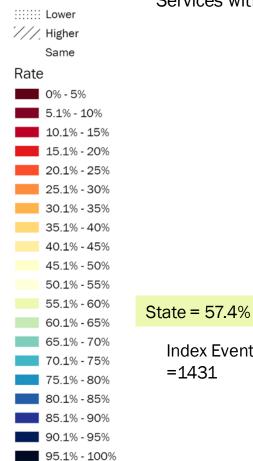


2020 treatment engagement rates for opioid use disorder are more than 3.8 times higher than engagement rates for alcohol use disorder

Percent of Index Events for Alcohol Use Disorder Receiving 2+ Services within 34 Days of Beginning Treatment - Engagement



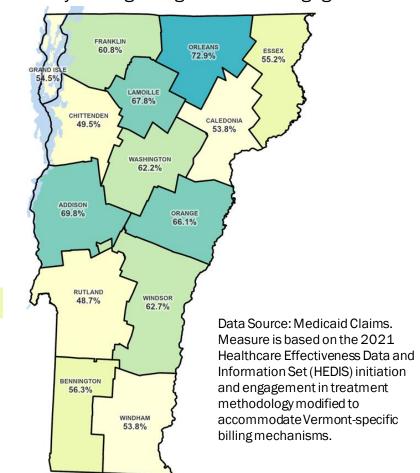
Statistical significance compared to previous year



Index Events

=1431

Percent of Index Events for Opioid Use Disorder Receiving 2+ Services within 34 Days of Beginning Treatment - Engagement



How to improve treatment initiation and engagement rates

Strategies and best practices to improve treatment initiation and engagement

The Department of Vermont Health Access and the Department of Health Division of Alcohol and Drug Abuse Programs completed a Performance Improvement Project addressing treatment initiation and engagement. These are strategies and best practices identified as improving initiation and engagement of alcohol and other drug treatment in clinical and community settings

- Strengthen the substance use disorder referral and evaluation systems at the community-level
- Increase the capacity to treat all substance use disorders in the community
- Strengthen partnerships between medical, substance use disorder treatment providers, and recovery support services
- Build relationships to improve communication and collaboration
- Strengthen peer support services and build connections for individuals to access those services
- Develop workforce through partnerships with local colleges and universities
- Establish policies and procedures to assess and treat clients at risk for or experiencing a substance use disorder that incorporate principles of harm reduction and the social determinants of health
- Establish and integrate principles of harm reduction and the social determinants of health into all new and existing programs that address substance use across the system (e.g., needle exchange programs, naloxone overdose prevention programs)

Improving regional initiation and engagement rates

- Health Department initiatives to improve IET:
 - RAM Rapid Access to Medication for Opioid Use Disorder Complete
 - RTA Rapid Treatment Access for Alcohol Use Disorder In process
- Regional providers are working to:
 - Build agreements and smooth pathways to improve timely intake; and referral between providers:
 - Hospitals/Emergency Departments
 - Primary care practices
 - Local specialty substance use disorder treatment providers
 - Recovery centers
 - Identify people with substance use disorder through screening/assessment
 - Use Certified Peer Recovery Coaches to support people through referrals
 - Commit to maintaining capacity that allows rapid access to treatment
 - Use data to improve processes that support rapid access to care

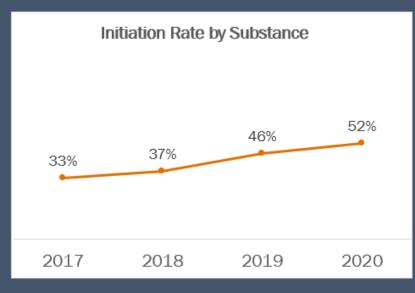
County level treatment initiation and engagement rate trends

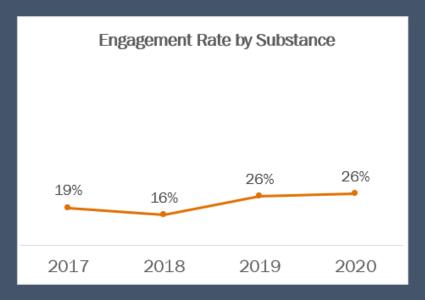
Trends over time by county

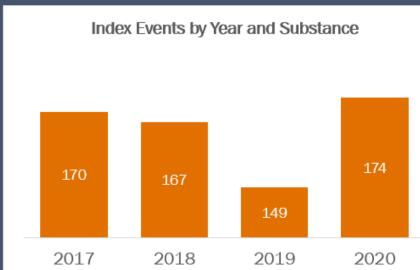
- The following slides summarize treatment initiation and engagement trends for each county compared with Vermont trends
- There are separate slides for overall IET rates and IET rates by substance for each county
- County-level data may be used to monitor the effectiveness of new initiatives regions have undertaken to connect people with substance use disorder to care

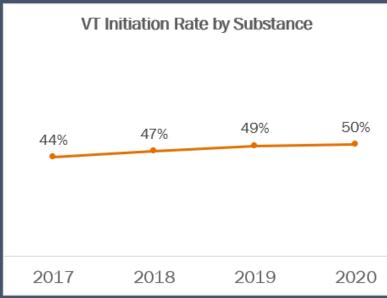
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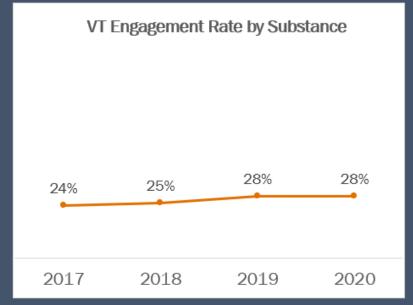
ANNUAL OVERALL RATES - ALL SUBSTANCES

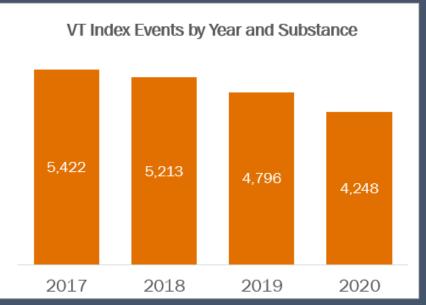








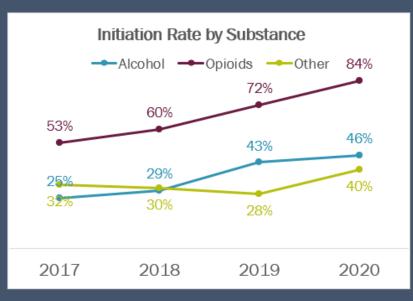


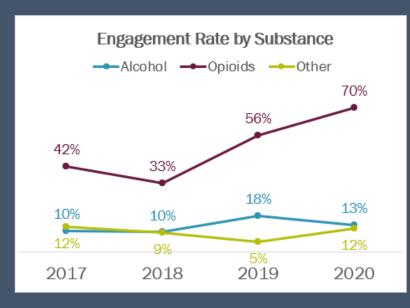


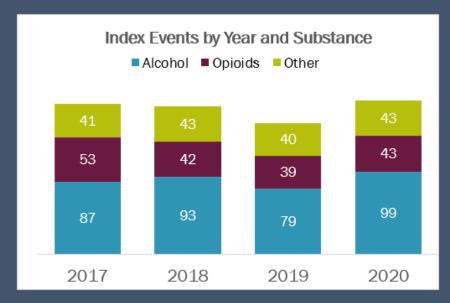
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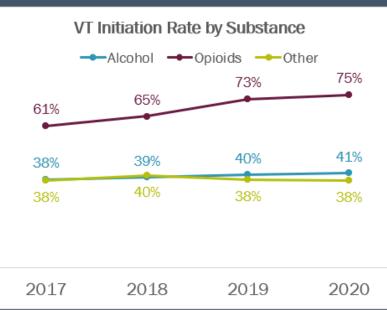
ANNUAL RATES - BY SUBSTANCE

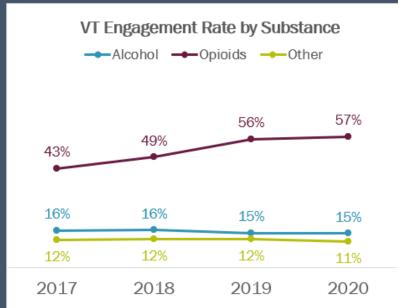
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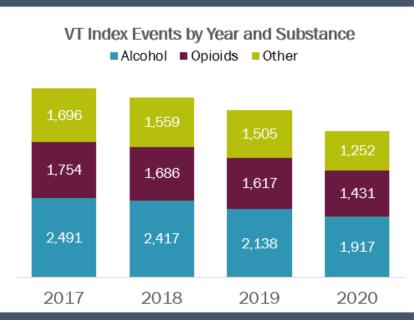






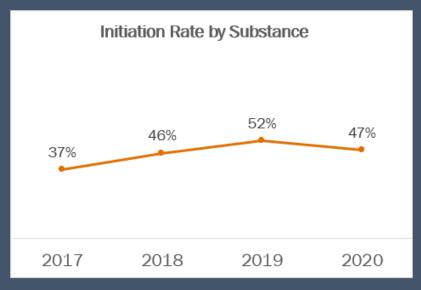


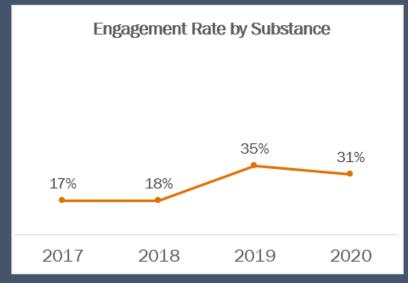


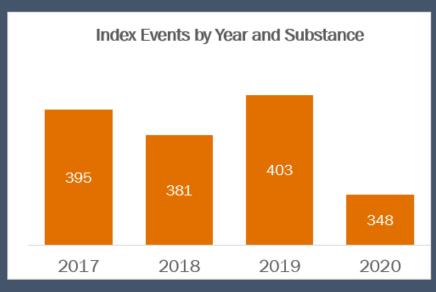


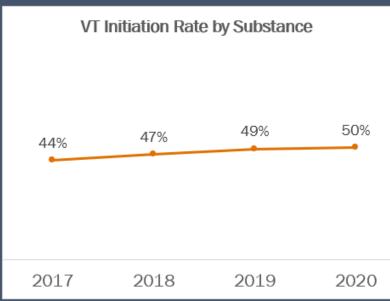
BENNINGTON

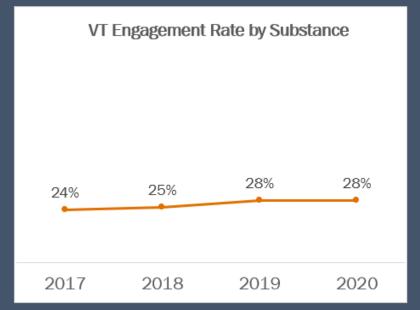
ANNUAL OVERALL RATES - ALL SUBSTANCES

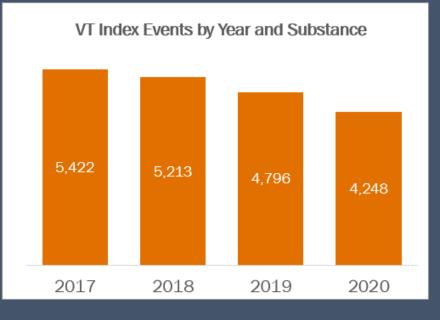






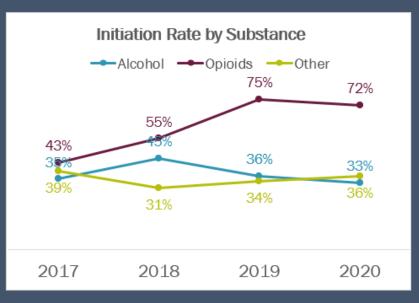


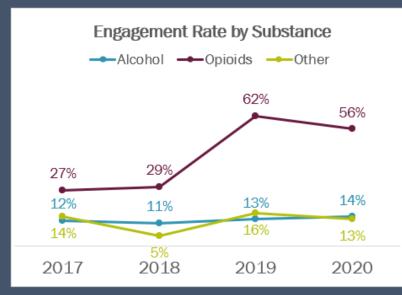


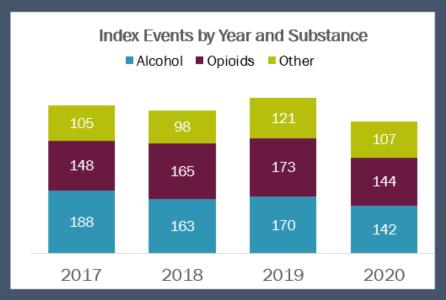


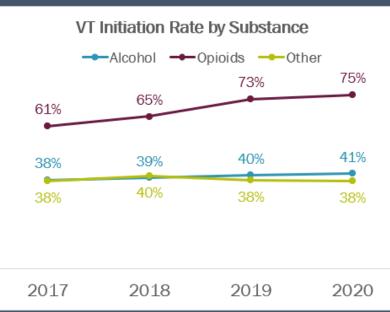
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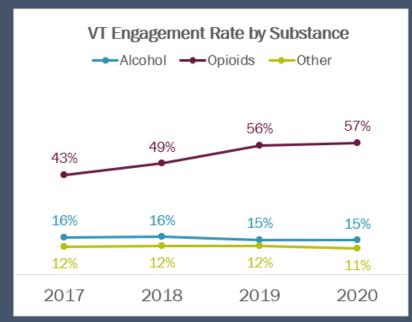
ANNUAL RATES - BY SUBSTANCE

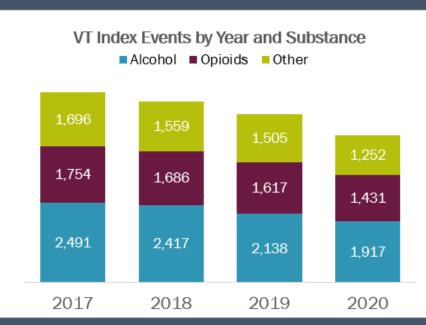








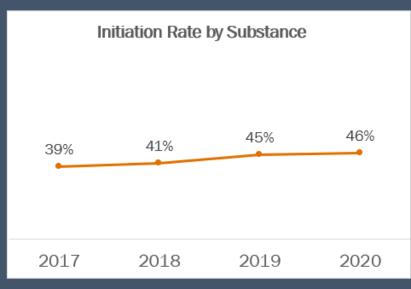


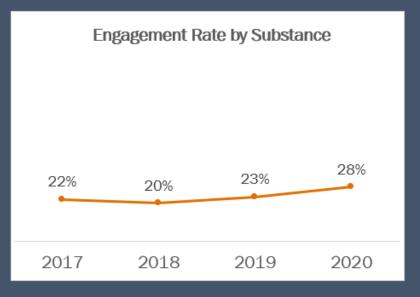


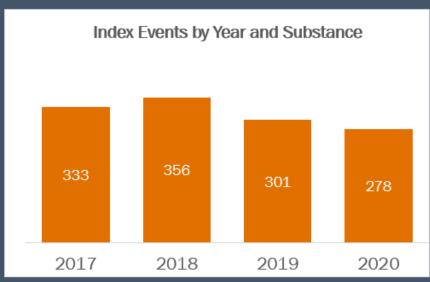
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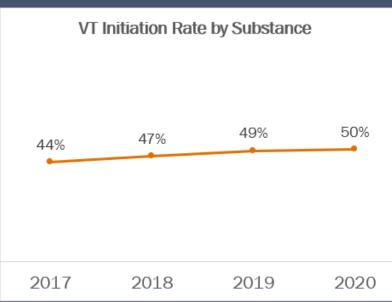
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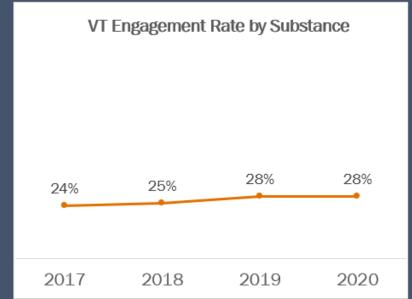
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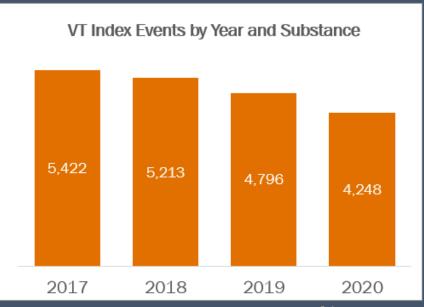








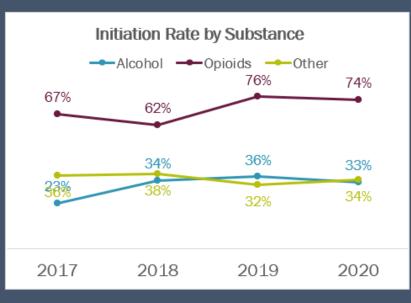


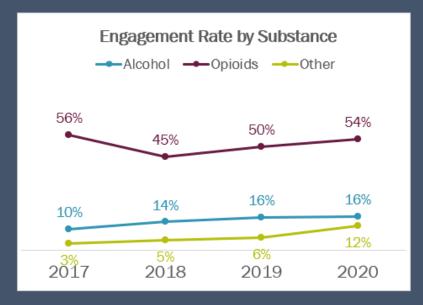


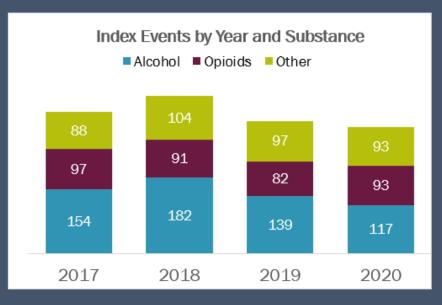
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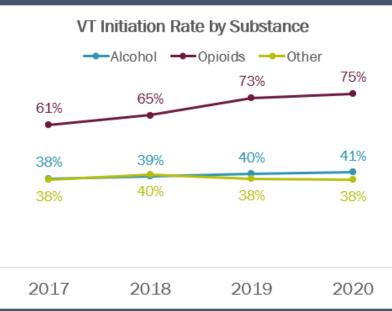
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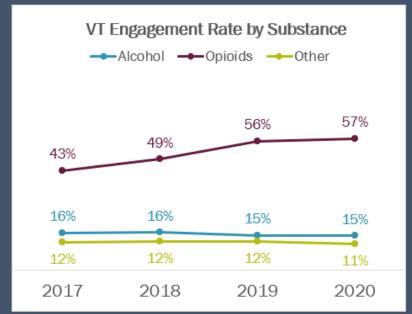
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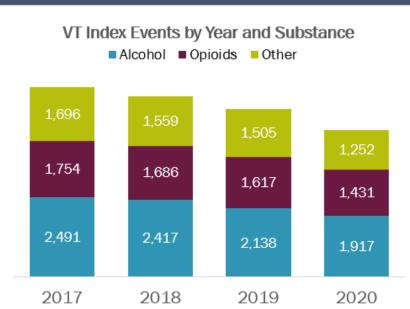






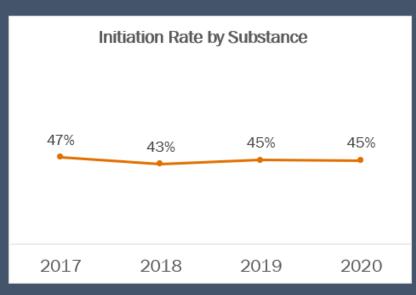


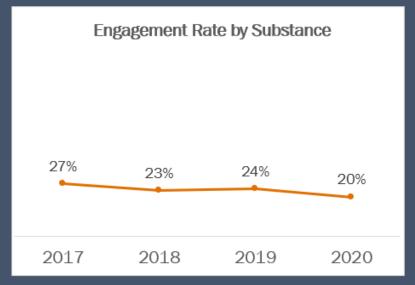




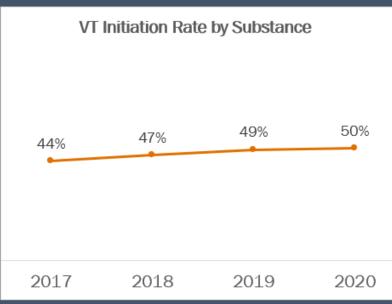
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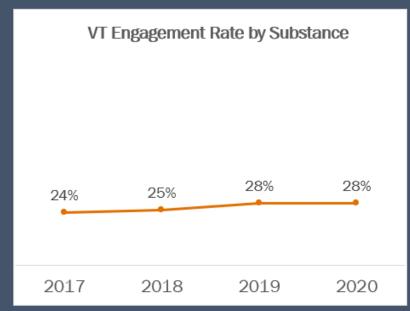
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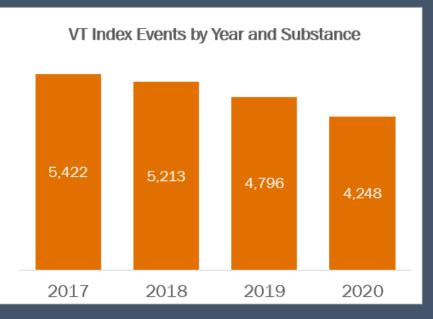






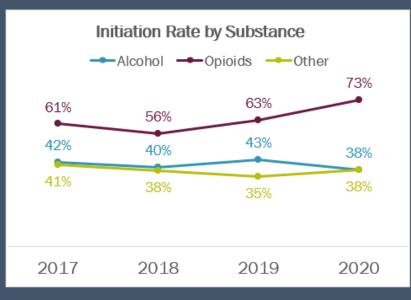


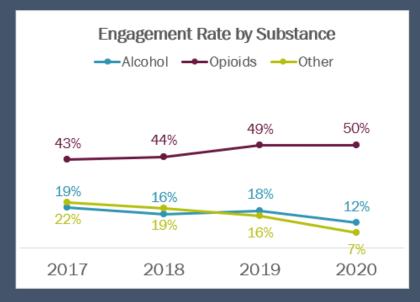


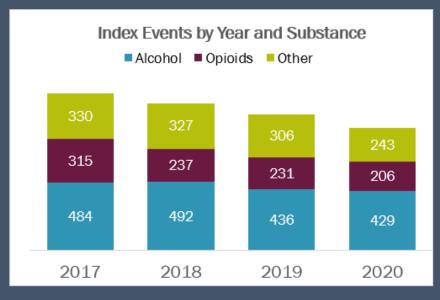


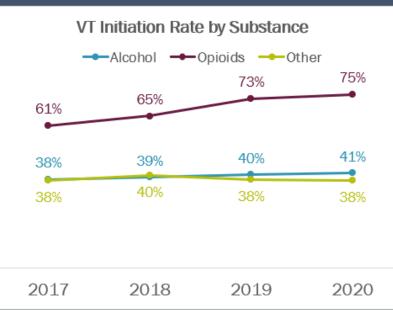
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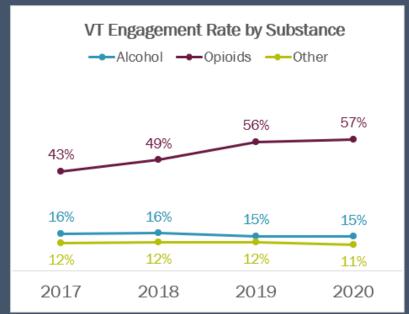
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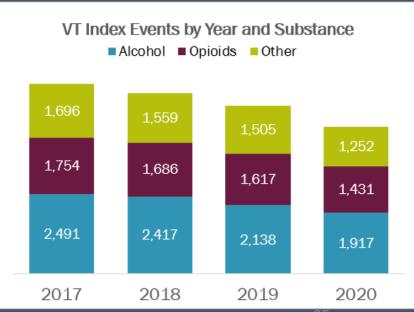






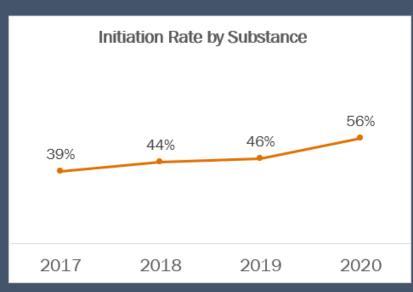


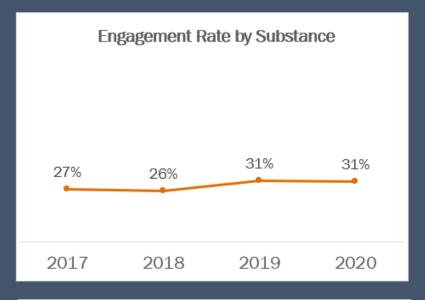


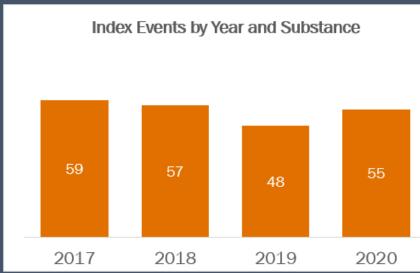


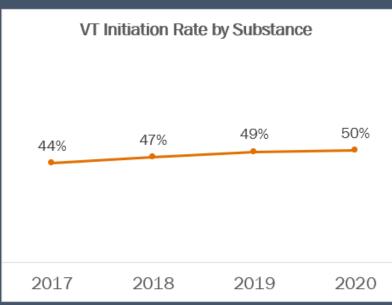
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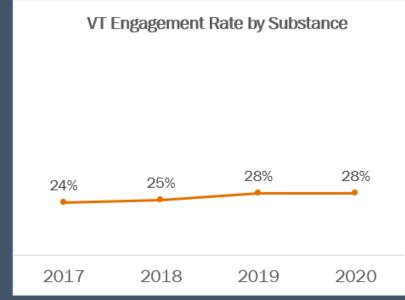
ANNUAL OVERALL RATES - ALL SUBSTANCES

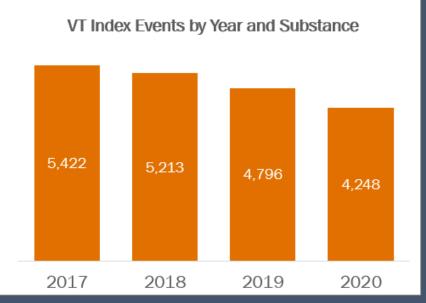






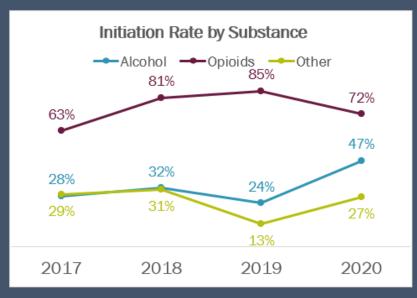


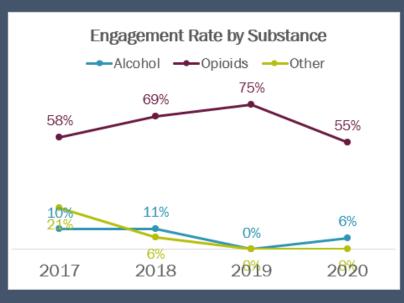


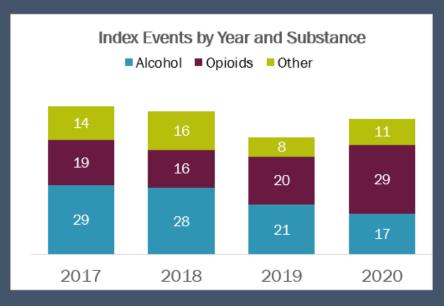


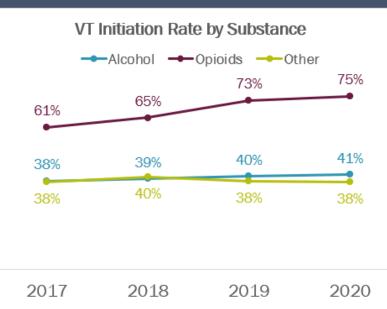
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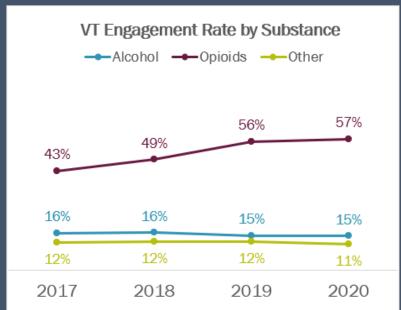
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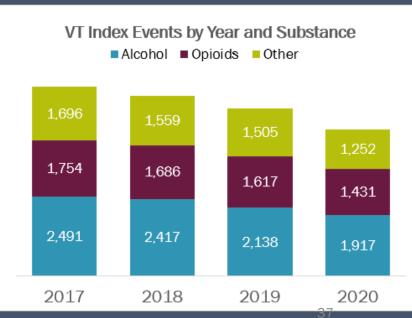






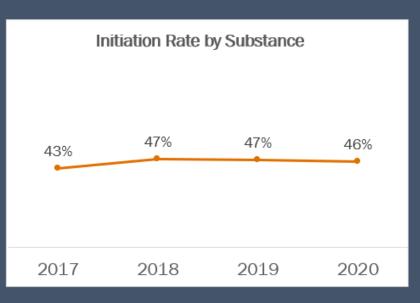


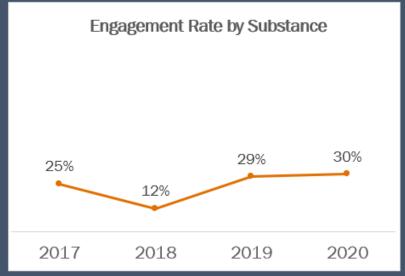


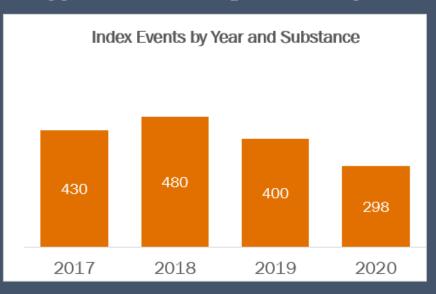


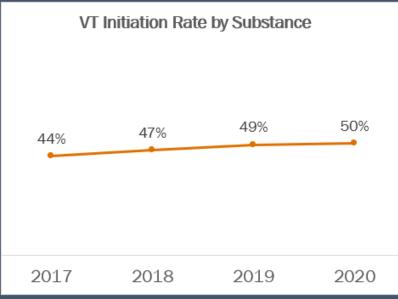
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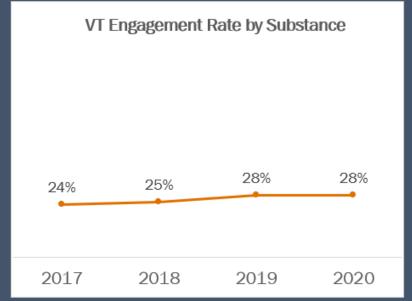
ANNUAL OVERALL RATES - ALL SUBSTANCES

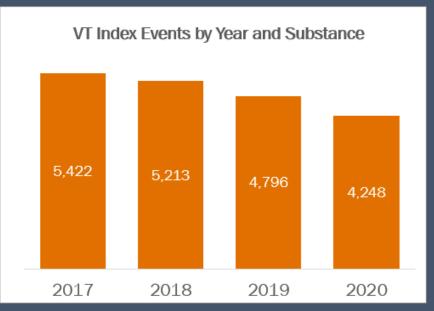








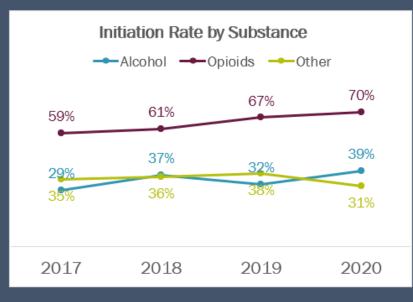


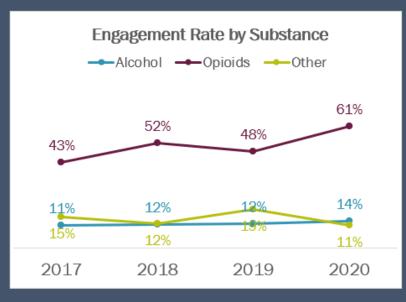


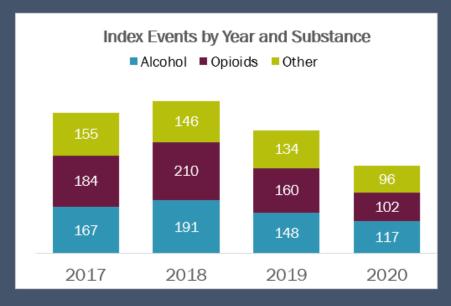
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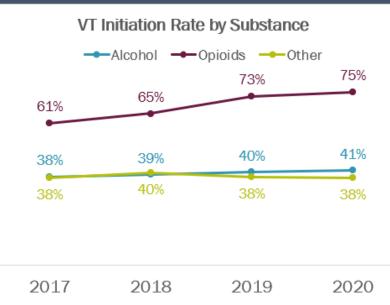
ANNUAL RATES - BY SUBSTANCE

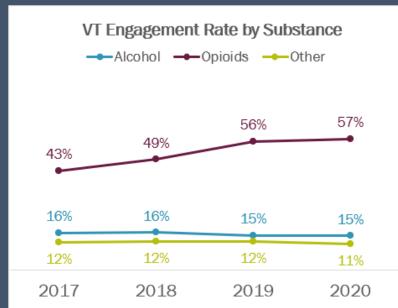
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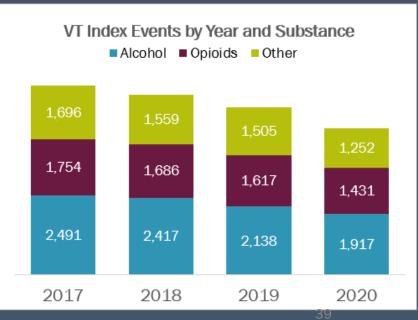








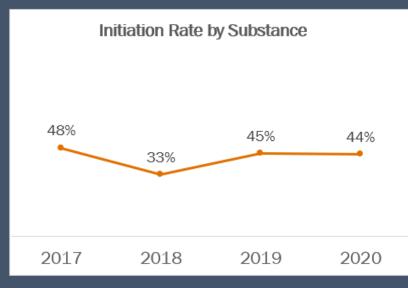


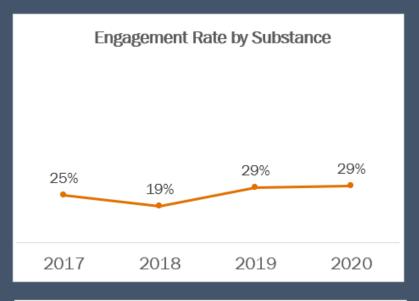


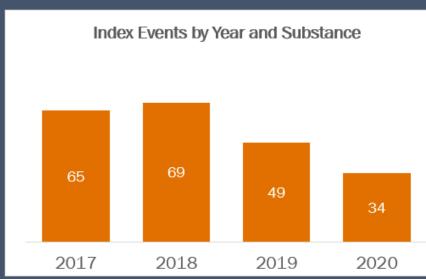
nt Department of Health

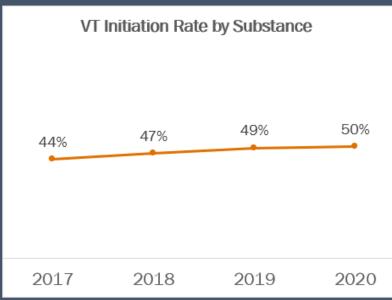
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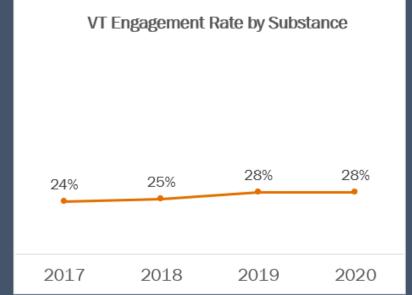
ANNUAL OVERALL RATES - ALL SUBSTANCES

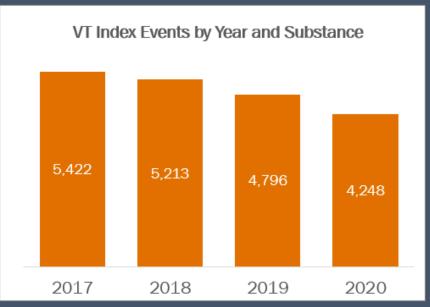






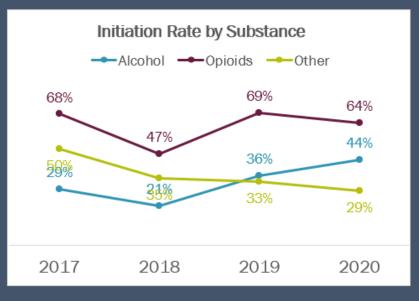


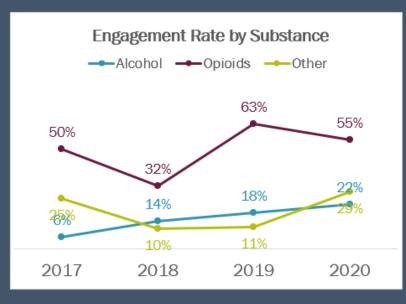


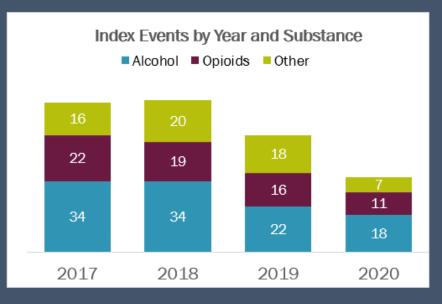


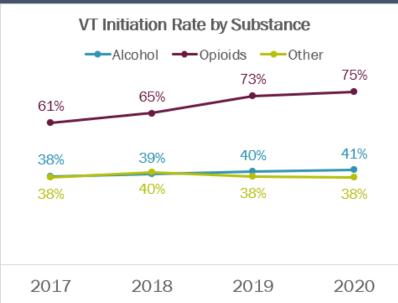
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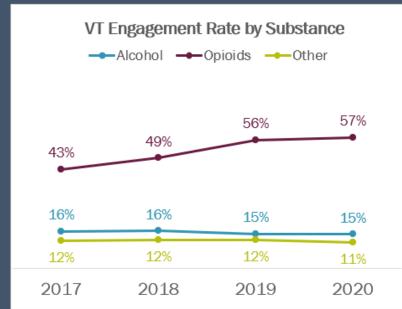
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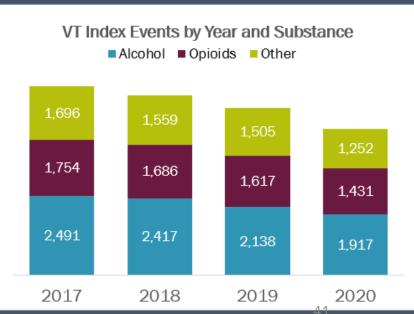






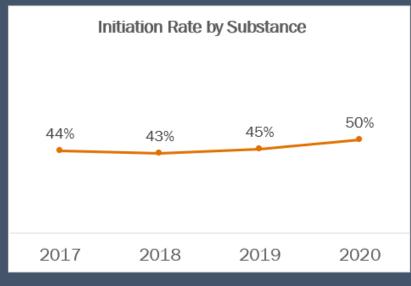


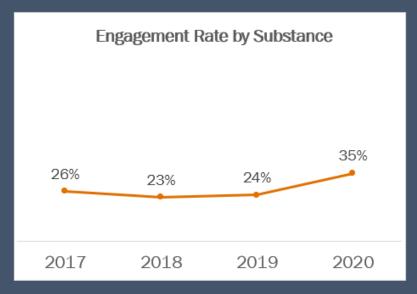


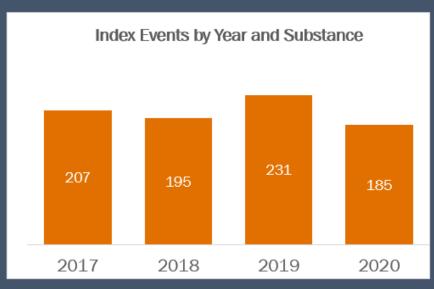


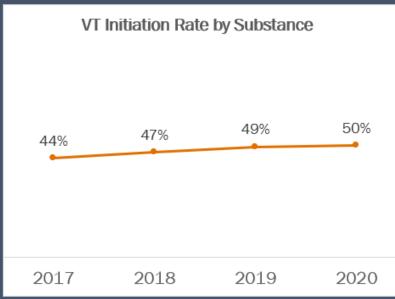
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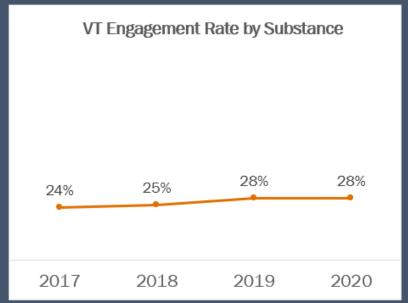
ANNUAL OVERALL RATES - ALL SUBSTANCES

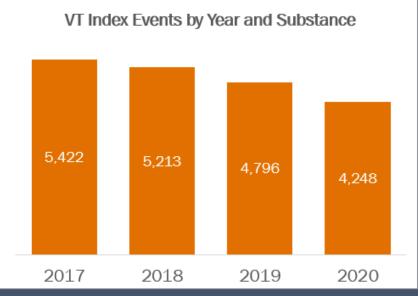






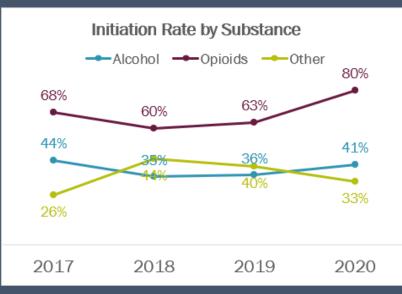


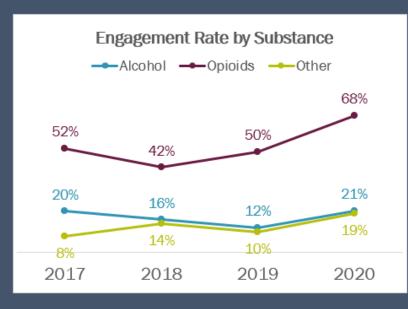


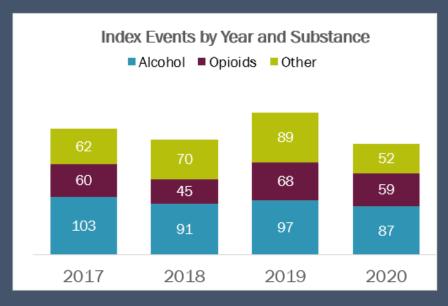


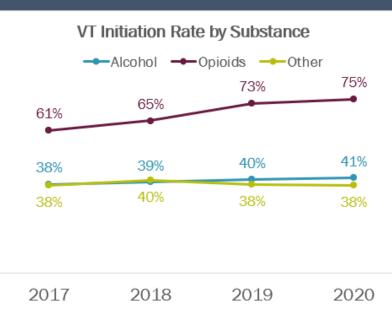
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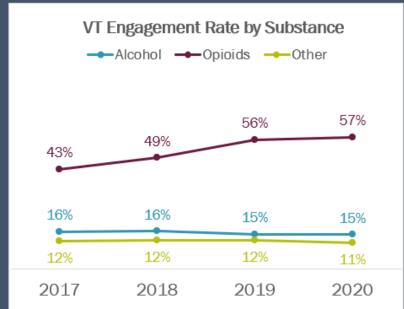
ANNUAL RATES - BY SUBSTANCE

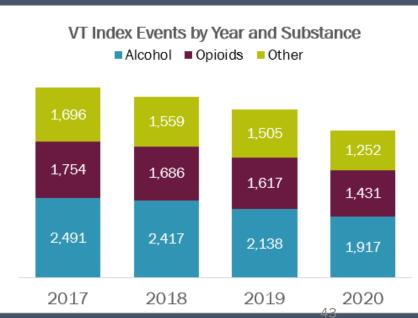






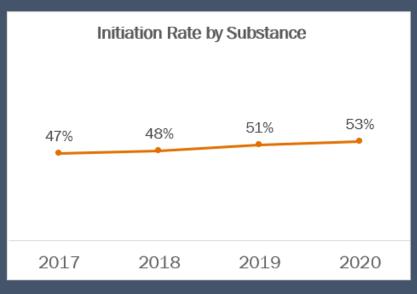


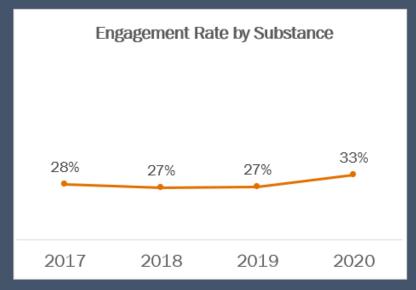


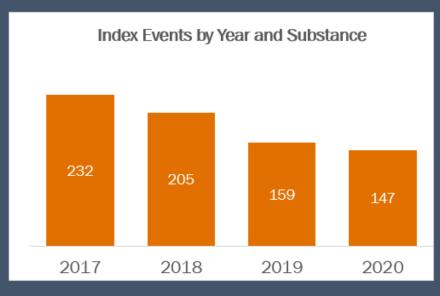


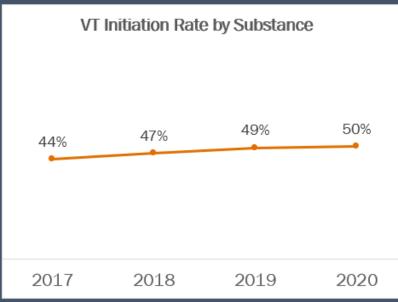
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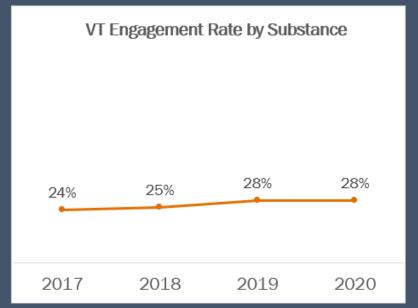
ANNUAL OVERALL RATES - ALL SUBSTANCES

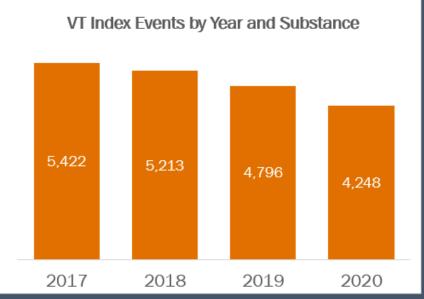






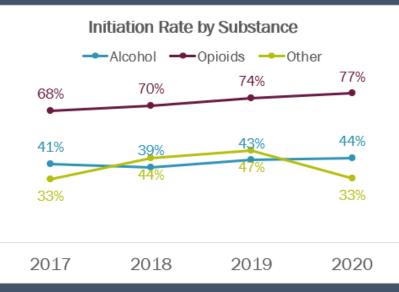


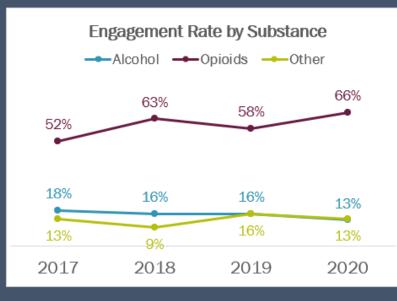


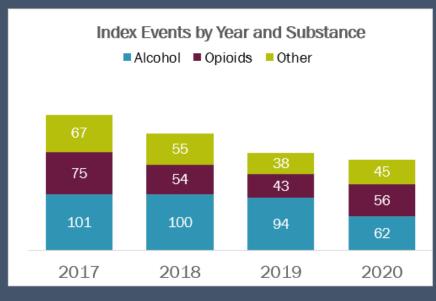


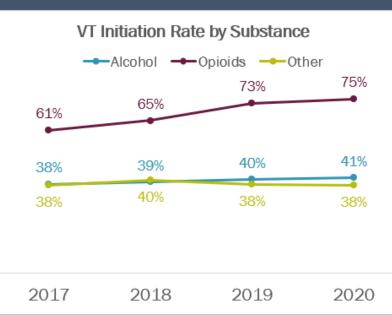
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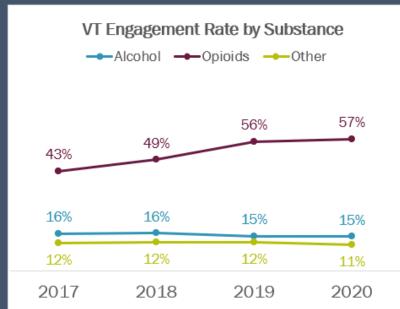
ANNUAL RATES - BY SUBSTANCE

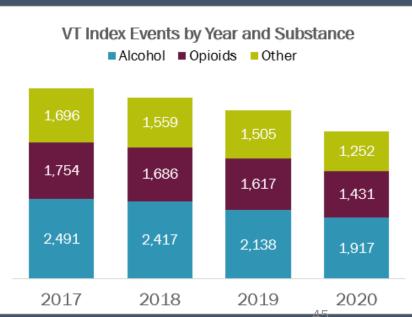






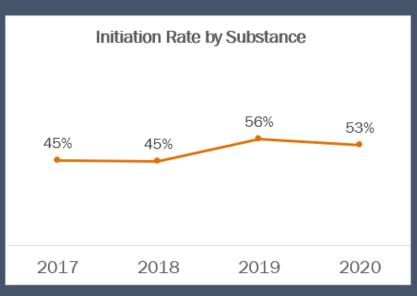


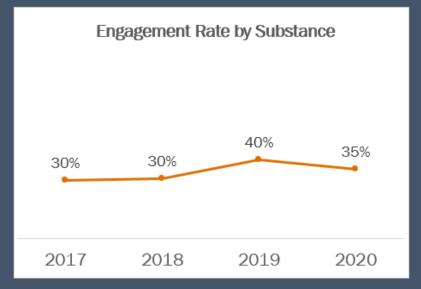


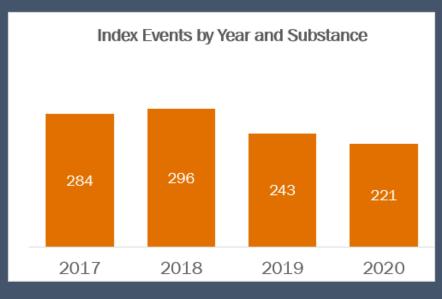


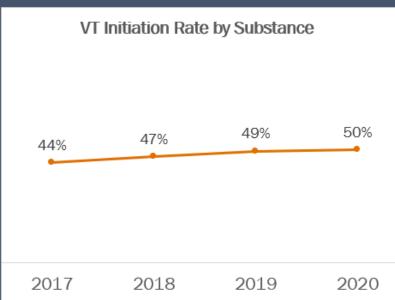
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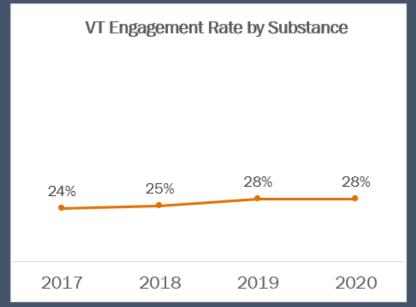
ANNUAL OVERALL RATES - ALL SUBSTANCES

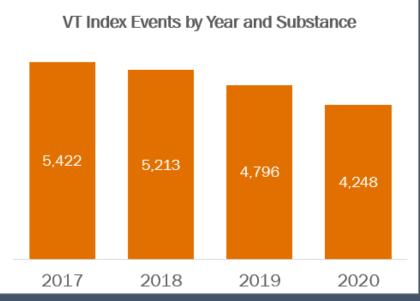








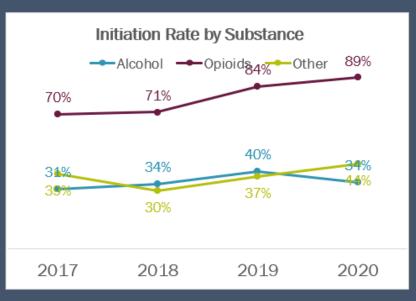


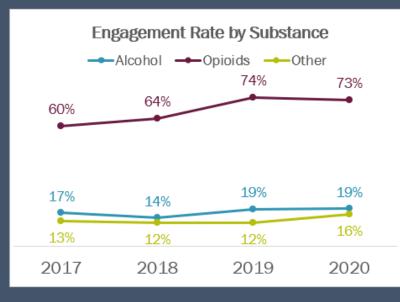


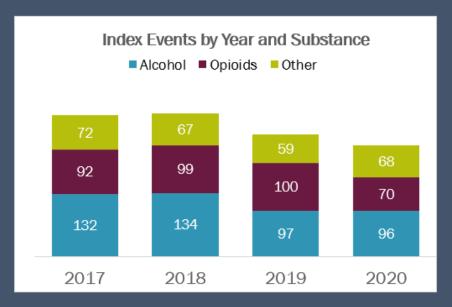
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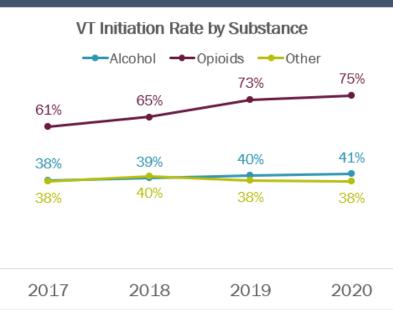
ANNUAL RATES - BY SUBSTANCE

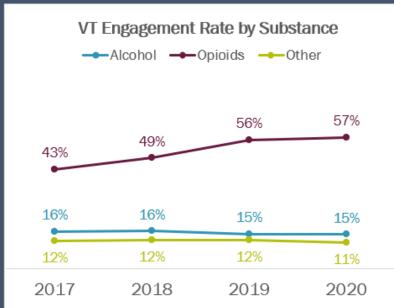
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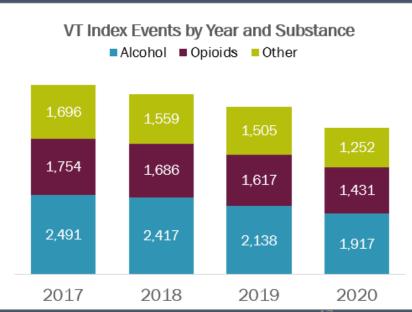








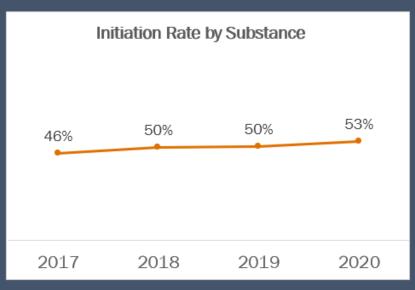


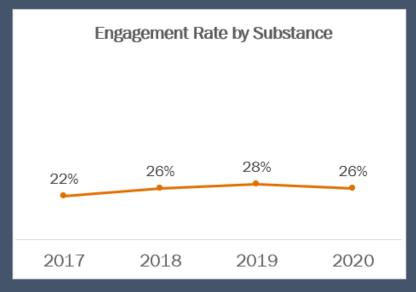


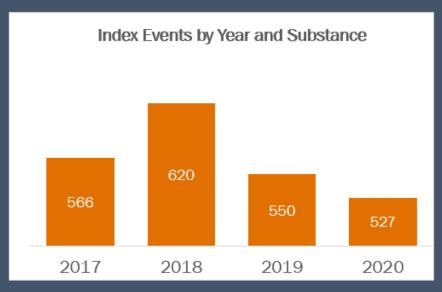
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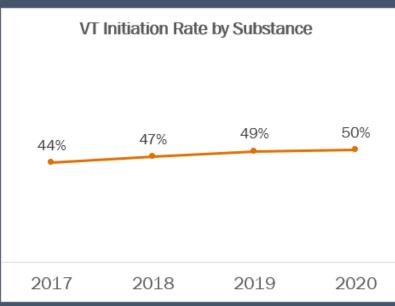
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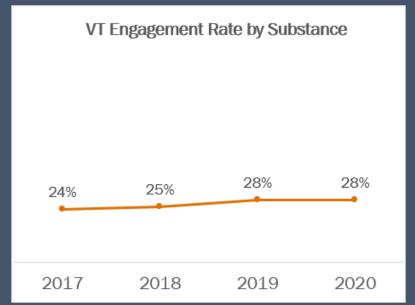
ANNUAL OVERALL RATES - ALL SUBSTANCES

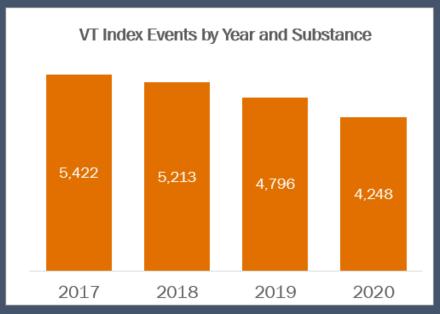






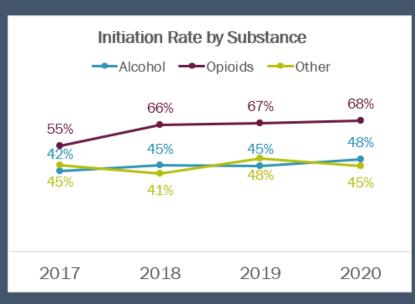


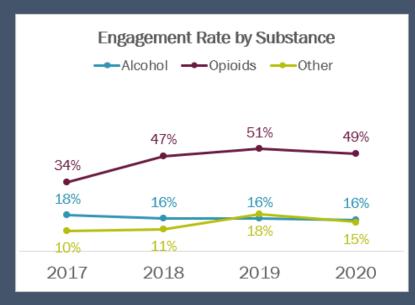


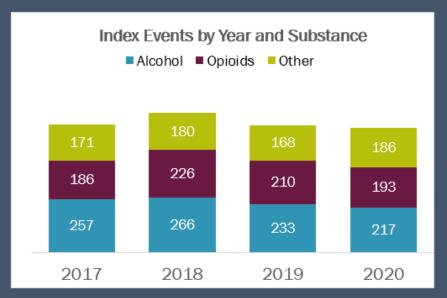


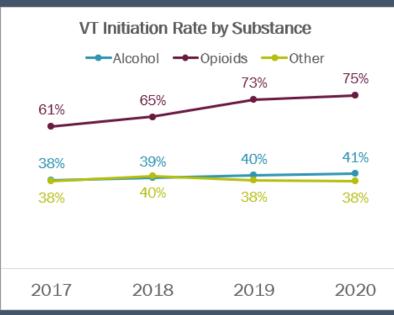
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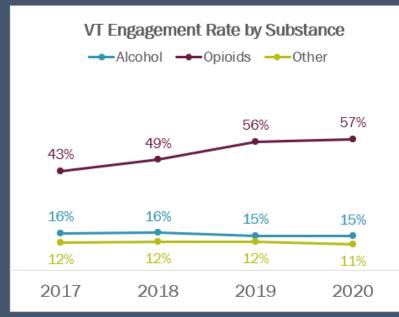
ANNUAL RATES - BY SUBSTANCE

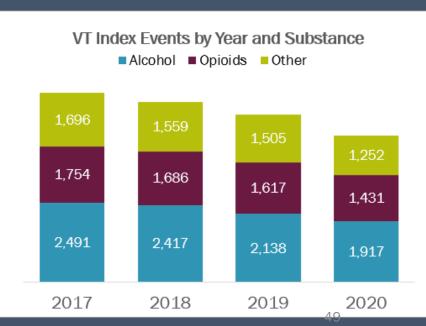






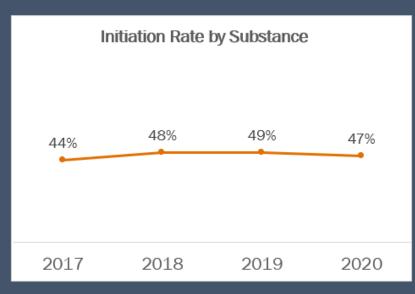


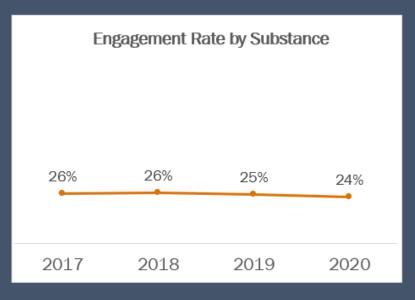




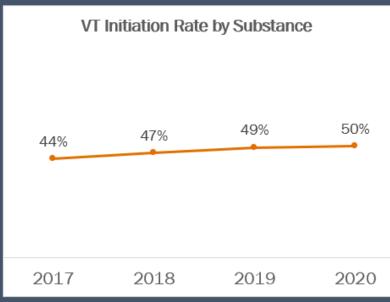
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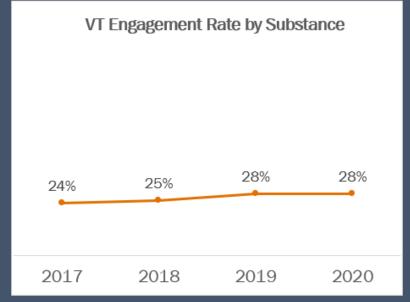
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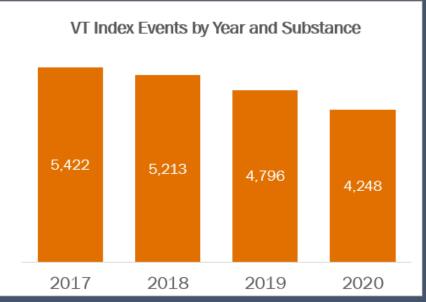






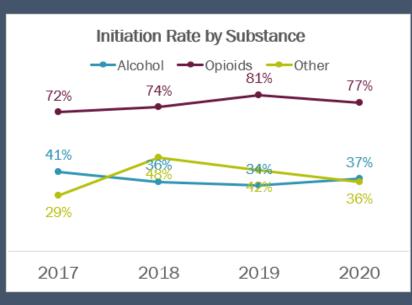


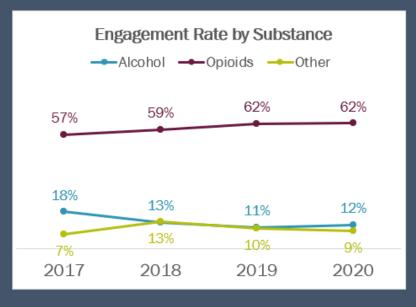


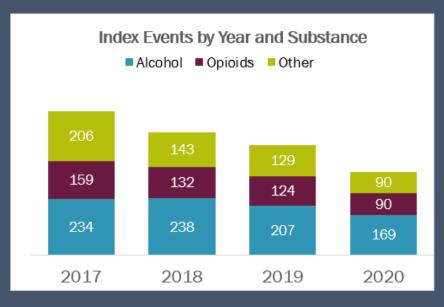


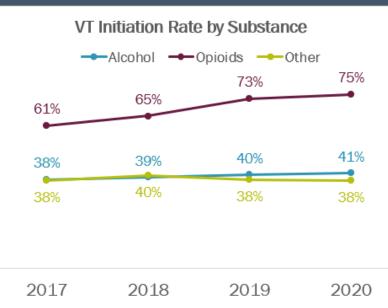
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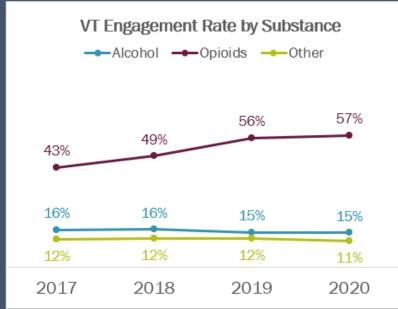
ANNUAL RATES - BY SUBSTANCE

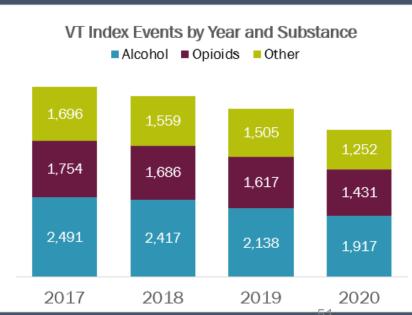






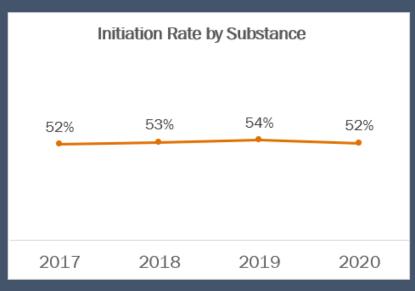


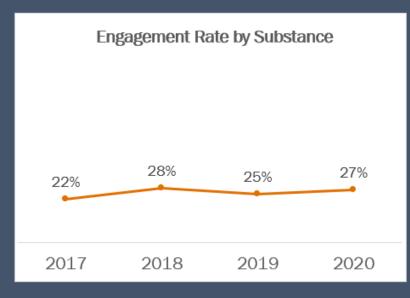


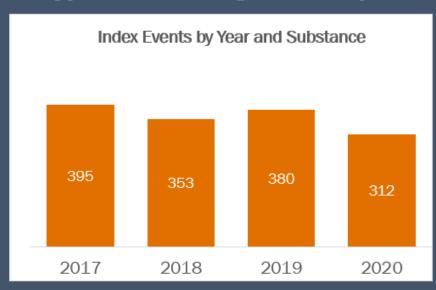


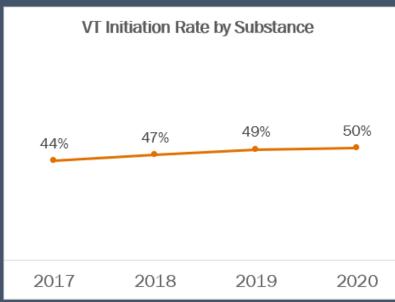
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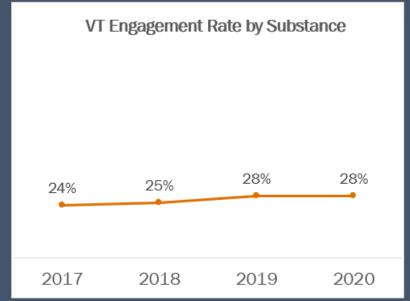
ANNUAL OVERALL RATES - ALL SUBSTANCES

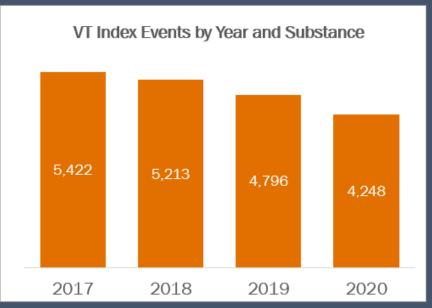






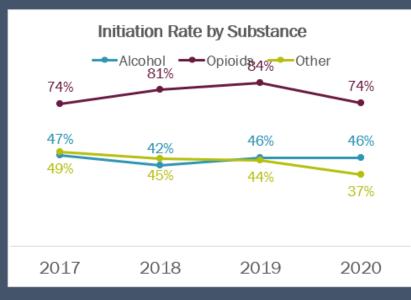


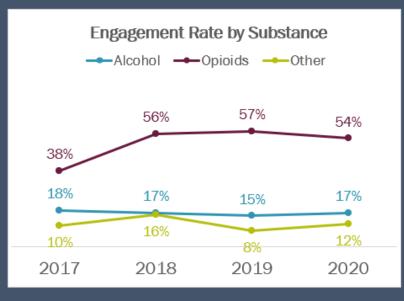


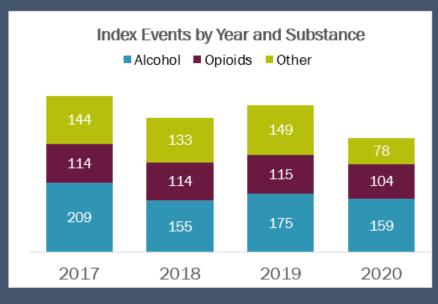


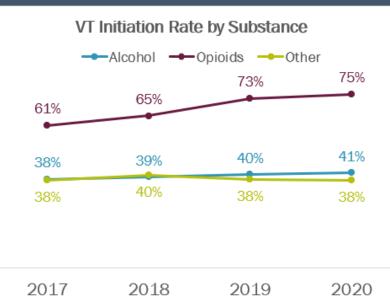
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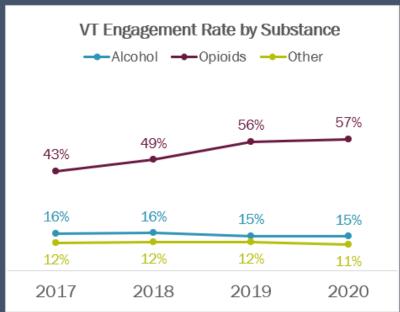
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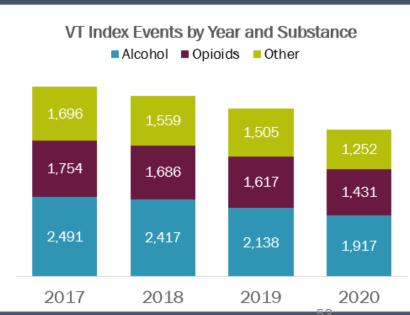






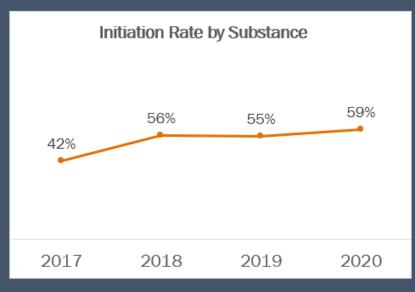


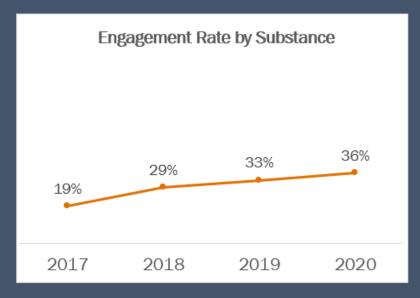


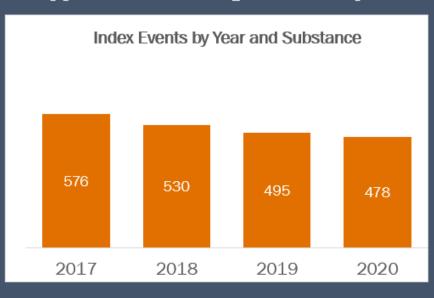


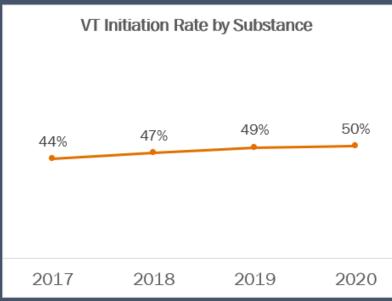
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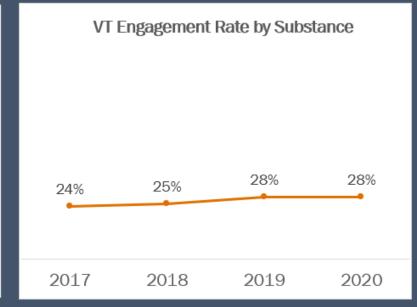
ANNUAL OVERALL RATES - ALL SUBSTANCES

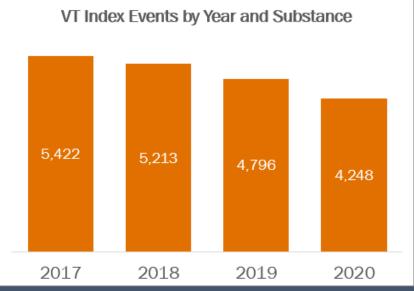






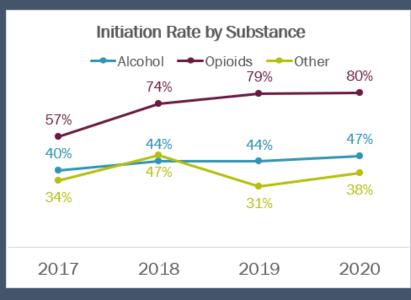


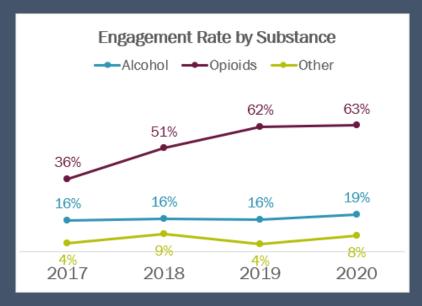


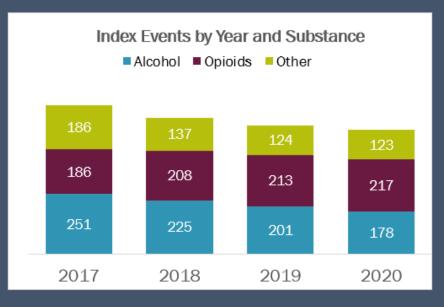


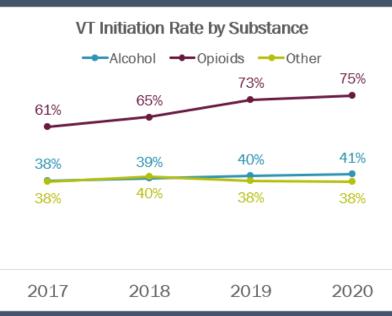
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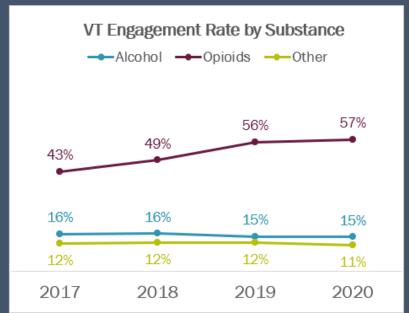
ANNUAL RATES - BY SUBSTANCE

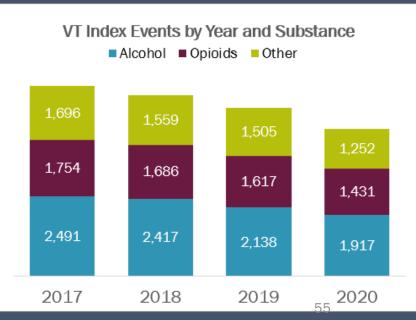












Questions or Technical Assistance?

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