



Changing Pathways on the road to recovery: Managing OUD (Opioid Use Disorder)

Inpatient/Outpatient Transition

There were over 1,300 confirmed drug overdose deaths in 2020*, a 13% increase over 2019. And that figure is likely to rise further with the COVID pandemic.

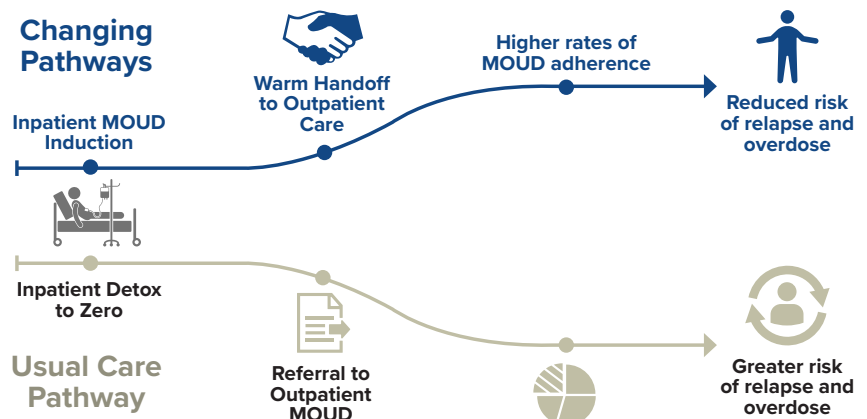
Beacon Health Options, in conjunction with the Connecticut Behavioral Health Partnership, is at the forefront of the state’s response to the opioid epidemic. It promotes Medications for Opioid Use Disorder (MOUD), the most effective treatment for opioid use disorder (OUD).

There are three FDA-approved MOUD: methadone, buprenorphine, and naltrexone. Unfortunately, MOUD is not utilized as much as it could be, especially in acute care settings with many inpatient units still relying on traditional withdrawal management (aka “detox”) protocols. These are associated with high risk for relapse, as well as accidental overdose and/or death due to decreased physical tolerance.

The Changing Pathways Model

The goal of Beacon’s Changing Pathways model is to start MOUD during the withdrawal management episode and seamlessly transition members to outpatient MOUD treatment. Changing Pathways is designed to increase and maintain participants’ engagement in MOUD by:

- Educating them on the MOUD options available (with the support of a Beacon Peer Support Specialist)
- Initiating them on MOUD during a withdrawal management episode and then discharging them on a stable dose
- Creating a plan for them to continue MOUD with a community provider



Changing Pathways Outcomes

In the program's first 18 months, inducted participants experienced a number of positive outcomes:

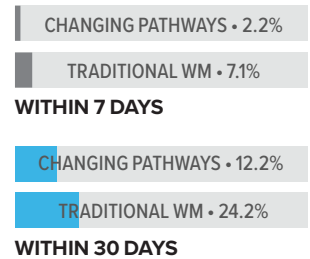


Connection to MOUD

The number of members discharged from withdrawal management who successfully connected to an MOUD provider in the community **increased 32%**.

Reduction in readmissions

A significantly lower percentage of engaged participants re-admitted to an inpatient facility within 7 and 30 days of discharge than individuals in traditional withdrawal management (WM).

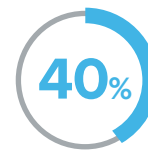


Reduction in other behavioral health (BH) episodes

In 2020, over **41% of engaged participants** adhered* to MOUD for the three-month period following discharge. That is nearly a **162%** increase over the percentage of individuals who remained adherent after traditional withdrawal management. These individuals experienced the following positive outcomes when comparing the three months prior to, and following, discharge:



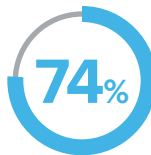
reduction in the average number of BH ED visits per member



reduction in the average number of inpatient days per member



reduction in the average number of detoxes per member



Reduction in overdoses

Individuals who engaged in Changing Pathways in 2020 and remained MOUD adherent* for 90 days following discharge, experienced a **74%** reduction in rate of overdose, from 8.2% to 2.1% of members.

*"Adherence" means using MOUD at least 80% of days for the three months following discharge.

Changing Pathways demonstrates that MOUD induction during inpatient care can mean a higher likelihood of post-discharge adherence, which can result in reduced service utilization and opioid overdose.

For more information about Beacon's Changing Pathways program and how you can become involved, contact the **Beacon Health Options Regional Network Management (RNM) Team** at CTBHPRegionalNetworkManagement@beaconhealthoptions.com.

*CT Department of Public Health

Hearing impaired members, dial 711 Relay Services. When you call, you can request a translator in the language with which you are most comfortable.