

Project funded by the Colorado Department of Healthcare Policy and Finance per House-Bill 22-1302 Healthcare Practice Transformation



1302 PF Learning Community

May 21, 2024





Welcome!

Please put your name, pronouns, role and organization in the chat.

You can ask questions via the chat we will monitor it as we go along. We will also pause for questions periodically.

Slides from today will be made available on the Practice Innovation Program website.



AGENDA

- e-Learning Modules Stephanie Kirchner
- PF Substance Use Disorder Treatment
 Supports & Practice Discussions Kathy
 Cebuhar & Jennifer Halfacre
- Upcoming events and deliverables
 reminders







University of Colorado Anschutz Medical Campus

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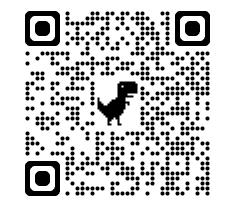
E-learning Module Topics

- Introduction to Behavioral Health Integration
- Alcohol Screening and Treatment in Primary Care
- Substance Use Disorders
- Depression, Distress, and Anxiety
- Behavioral Health Providers on the Care Team
- Integrated Care Workflow
- Behavioral Health in Pediatrics: Adverse Childhood Experiences
- Patient Engagement and Behavioral Health
- Obesity and Depression
- Men and Depression
- Whole-Person Care for the Aging and Senior Patient
- Psychological Trauma and the Integrated Care Team



Access for <u>NEW</u> learners

Go to <u>CUeLearning.org</u> Register using code 1302



Access for <u>RETURNING</u> learners

Returning users request access: <u>https://cuelearning.org/support/</u>





1302 Practice Affinity Groups

- Interactive, Peer to Peer Learning: Connect with peers facing similar challenges and exchange invaluable knowledge and experiences.
- Expert Guidance: Benefit from expert-facilitated sessions offering actionable advice and insights into optimizing your practice's operations.
- Resource Sharing: Access and share resources with peers and facilitators, including toolkits, templates, and case studies, to streamline your journey towards integrated care.
- Networking Opportunities: Forge meaningful connections with other care teams to foster collaborations that drive positive change in integrated care delivery.



1302 Practice Affinity Groups

- 1. Processes and Workflows to Support Integrated Care
- 2. Behavioral Health in Pediatrics
- 3. Integrating Primary Care in Behavioral Health Organizations

Please complete this survey to express your interest in joining an Affinity Group: <u>https://redcap.ucdenver.edu/surveys/?s=DJ97JNACXDW3P3RW</u>



Join us on 5/29/2024, 12:00-1:00 for our virtual Affinity Group Kickoff Meeting: https://ucdenver.zoom.us/j/97279403447

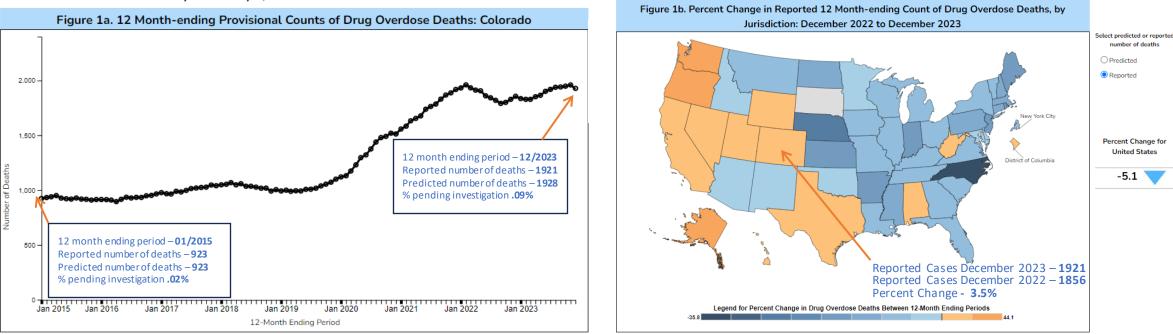


Substance Use Disorder Treatment Discussions with Your Practices



Why Should We Address This Issue?

12 Month-ending Provisional Number and Percent Change of Drug Overdose Deaths



Based on data available for analysis on: May 5, 2024



State Unintentional Drug Overdose Reporting System Dashboard

Fatal drug overdose data

You are viewing Final Data. View Preliminary Data

Final Data updated February 26, 2024; Preliminary Data updated February 26, 2024



Rate² of overdose deaths by state and drug or drug class



Scale of the chart may change based on the data presented

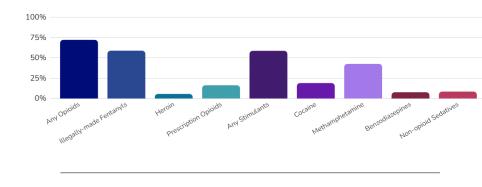


70.0% of people who died of a drug overdose were male, 25.9% were 35-44 years old, and 61.1% were White, non-Hispanic. The largest percentage of males were aged 35–44 and the largest percentage of females were aged 35–44. Male, 35–44, and American Indian/Alaska Native, non-Hispanic race had the highest overdose death rates.

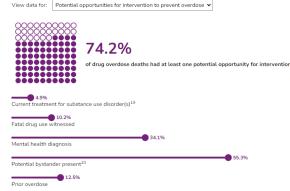


Percentages¹⁰ of overdose deaths involving select drugs and drug classes in 2022, Colorado

72.3% of deaths involved at least one opioid and 58.8% involved at least one stimulant. Illegally-made fentanyls were the most commonly involved opioids. The most common stimulant involved in overdose deaths was methamphetamine.



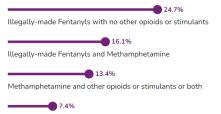
What were the circumstances¹⁸ surrounding Colorado overdose deaths in 2022, Colorado?





Percentages of overdose deaths involving the most common opioids and stimulants alone or in combination¹¹ in 2022, *Colorado*

The five most frequently occurring opioids and stimulants, alone or in combination, accounted for 69.0% of overdose deaths. The specific breakdown is represented below.



Prescription Opioids with no other opioids or stimulants



Illegally-made Fentanyls and Cocaine



Source: https://cdphe.colorado.gov/center-for-health-and-environmental-data/registries-and-vital-statistics/stateunintentional-drug https://www.cdc.gov/overdose-prevention/data-research/facts-stats/sudors-dashboard-fatal-overdose-data.html

What are the Practices Saying?





Approachable Solutions for Practices

Routine checking of the PDMP - https://dpo.colorado.gov/PDMP





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Pharmacies upload prescription data each business day

Users access and review the prescription data uploaded by pharmacies

Users make informed decisions on prescribing or dispensing controlled substances.

- Universal screening to avoid bias
- Simple workflows for screening, documentation, warm handoffs
- Establishing community supports and referrals
- Team trainings in MOUD, SBIRT, harm reduction



Resources

- Practitioner Training <u>https://www.samhsa.gov/practitioner-training</u>
- Integration of SUD and OB Care Implementation Guide
- Implementation Support for Medications for Opioid Use Disorder (MOUD)
- Monthly MOUD webinars with national experts to answer questions about your patients typically held on 2nd Wednesday of the month at 12 pm – anyone can attend.
 - Zoom link on PIP calendar and in the CHES newsletter
- Peer Assistance Services, Colorado SBIRT, motivational interviewing, online/in person, CME available – <u>https://sbirtcolorado.org/sbirt-trainingandta</u>
- UCSF <u>National Clinician Consultation Center</u>
 - Clinically supported advice on SU management for healthcare providers
- <u>https://harmreduction.org/resource-center/harm-reduction-near-you/</u>



Assessment Schedule Now – January 2025

Activity	Final Due Date
March 2024 Field Note	4/8/2024
Quarterly PTO Snapshot- Q1 2024	4/30/2024
Update Building Blocks of Behavioral Health Integration: Care Delivery Assessment	5/15/2024
April 2024 Field Note	5/8/2024
May 2024 Field Note	6/8/2024
June 2024 Field Note	6/30/2024
Quarterly PTO Snapshot- Q2 2024	6/30/2024
July 2024 Field Note	8/8/2024
August 2024 Field Note	9/8/2024
September 2024 Field Note	10/8/2024
Quarterly PTO Snapshot- Q3 2024	10/31/2024
October 2024 Field Note	11/8/2024
Update Building Blocks of Behavioral Health Integration: Care Delivery Assessment	11/15/2024
November 2024 Field Note	12/8/2024
December 2024 Field Note	1/8/2025
Quarterly PTO Snapshot- Q4 2024	1/31/2025



Questions?

https://medschool.cuanschutz.edu/practice-innovationprogram/current-initiatives/1302-behavioral-health-integration



Scan to complete the evaluation

https://practiceinnovationco.co1.qualtrics.com /jfe/form/SV_77CxyZreugTrmZM





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Thank you!

