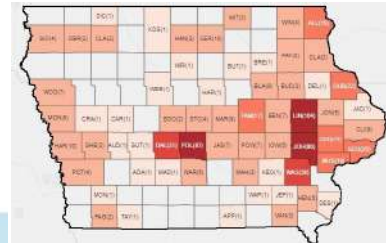
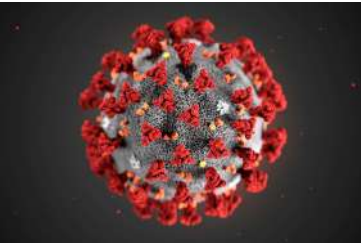


Medication Assisted Treatment & COVID-19 in Iowa

Welcome to the Webinar

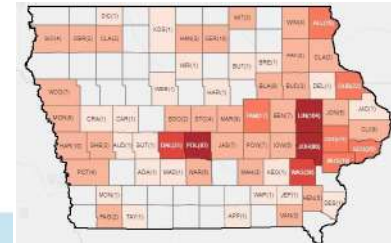
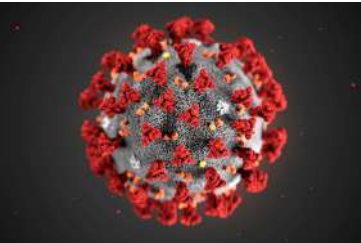


Friday, June 12, 2020

12:00 - 1:30 pm CST

A Few Housekeeping Items...

- All participant microphones & video will be placed on mute during the session.
- Please place comments, questions, & concerns in the chat box and IHRC staff will respond.
- All questions for speakers should be saved until the Q&A segment, following the presentations from all speakers.
- This webinar is being recorded and will be posted to the IHRC website following the webinar.



Changing Barriers to MAT Accessibility in Iowa During COVID-19
Friday, June 12, 2020 12:00pm - 1:30pm CST

I H

R C

Iowa Harm Reduction Coalition

Founded in 2017, the Iowa Harm Reduction Coalition (IHRC) is a 501c3 nonprofit organization whose mission is to promote the health, wellbeing, rights, and dignity of people who use drugs, as well as people impacted by drug use.

We do this by:

- Educating decision-makers about **evidence-based policies** and providing support for policy development, research, & analysis
- Building community power through **grassroots organizing** and advocacy
- Providing **training and technical assistance** to build capacity to improve drug user health across Iowa
- **Convening** experts, stakeholders, & thought leaders across professions, life experiences, and communities to facilitate collaboration and innovation
- Providing **public health & social services** for people who use drugs, with a broadly defined focus on the prevention of infectious disease and overdose
- **Centering the expertise of directly impacted persons** at the heart of everything we do



@IAHarmReduction



@iowaHRC



@IowaHarmReductionCoalition



www.iowaharmreductioncoalition.org

IHRC

Moderator: Sarah Ziegenhorn

Sarah Ziegenhorn is the Executive Director and Founder of the Iowa Harm Reduction Coalition (IHRC). Sarah has worked at the intersection of public health, harm reduction, and public policy for the past decade, previously at the Washington, D.C. think tank, the National Academy of Sciences. She is currently (still) a M.D. candidate at the University of Iowa Carver College of Medicine and earned a B.A. in Geography & Community Health from Macalester College (Saint Paul, MN). A native Iowan, Sarah grew up both on her family's farm near Muscatine and in Iowa City, where she lives today.



Agenda

12:00 Introductions

12:05 Speaker Remarks

- Chad Fairchild, MAT patient
- Kyle Wiand, IHRC volunteer
- Alison Lynch, Psychiatrist and MAT Provider, University of Iowa
- Jen Pearson, UCS CEO
- Monica Wilke-Brown, IDPH Iowa Opioid State Targeted Response Director
- Evelyn Fortier, Health Policy General Counsel, Office of Senator Charles Grassley
- Anna Bonelli, CMS Senior Policy Advisor
- Shannon Lundgren, Iowa State Representative

1:05 Moderated Q&A

1:20 Audience Q&A

1:30 Adjourn



Speakers

Today's Webinar

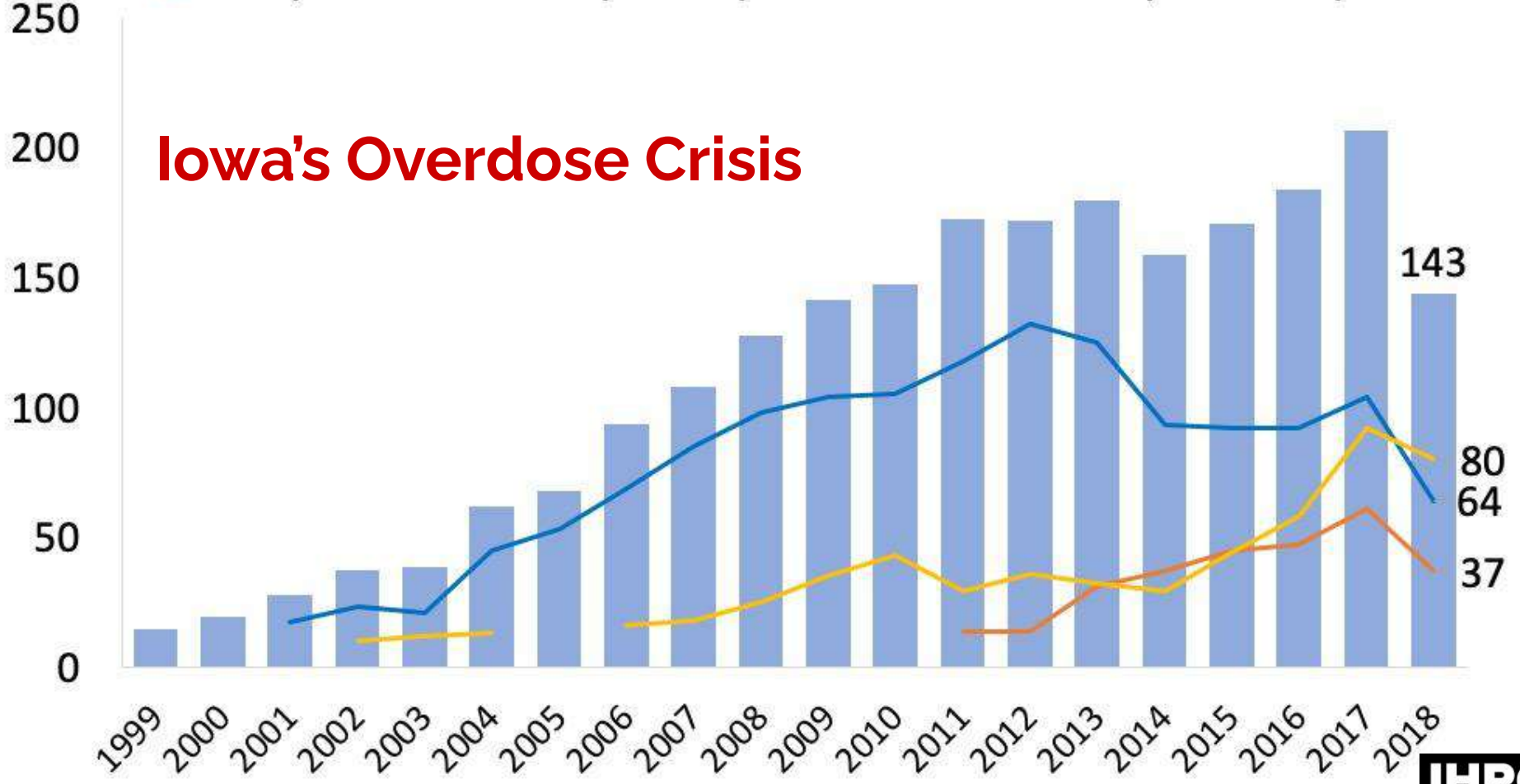
- Features 8 expert speakers from across the state of Iowa, representing diverse perspectives
- The second in series of webinars from IHRC examining the impact of COVID-19 on the lives of people impacted by drug use
- Streaming via Facebook live
- Live tweet @IAHarmReduction
- A written summary of the webinar will be released

Objectives

- Understand the historical barriers to accessing Medication Assisted Treatment (MAT).
- Recognize the benefits and importance of providing uninhibited access to MAT.
- Review the changes at the state and federal levels to MAT access.
- Highlight effective interventions and identify recommendations for further action.
- Consider the potential for gaps in policy and practice and the consequences of incomplete policy implementation.

■ All Opioids — Prescription Opioids — Heroin — Synthetic Opioids

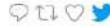
Iowa's Overdose Crisis





Sarah Wakeman

@DrSarahWakeman



Feb 5th 2020, 9 tweets, 3 min read

Bookmark Save as PDF My Authors

Excited to share study @LarochelleMarc @darshaksanghavi, others & I did comparing effectiveness of different #opioid use disorder treatments. Bottom line- only methadone or buprenorphine associated w/ reduced #overdose at 3 and 12 months

Outcome	Reference	OR (95% CI)	p-value	OR (95% CI)	p-value
Overdose	Reference	1.0		1.0	
ED	Reference	1.0		1.0	
Hospitalization	Reference	1.0		1.0	
30-day mortality	Reference	1.0		1.0	
12-month mortality	Reference	1.0		1.0	
3-month mortality	Reference	1.0		1.0	
6-month mortality	Reference	1.0		1.0	
9-month mortality	Reference	1.0		1.0	
12-month mortality	Reference	1.0		1.0	
3-month mortality	Reference	1.0		1.0	
6-month mortality	Reference	1.0		1.0	
9-month mortality	Reference	1.0		1.0	
12-month mortality	Reference	1.0		1.0	
3-month mortality	Reference	1.0		1.0	
6-month mortality	Reference	1.0		1.0	
9-month mortality	Reference	1.0		1.0	
12-month mortality	Reference	1.0		1.0	

Comparative Effectiveness of Different Treatment Pathway...

This comparative effectiveness research study examines associations between opioid use disorder treatment pathways and overdose and opioid-related acute care use as proxies for opioid use disorder re...

https://jamanetwork.com/journals/jamanetworkopen/fullarticle/276...

We looked at claims data for nearly 41,000 individuals w/ OUD and compared outpatient counseling, IOP, detox/residential, naltrexone, or methadone/buprenorphine to no treatment on outcomes of overdose or opioid-related ED or hospitalization at 3 months.

1st takeaway: despite evidence supporting MOUD w/ opioid agonist therapy, in this insured population only 12.5% of cohort received methadone/buprenorphine and average treatment duration was shorter than would be recommended at ~150 days.

2nd takeaway: only methadone/buprenorphine assoc w/ reduced OD at 3 and 12 months; also assoc w/ reduced opioid-related ED visits and hospitalizations at 3 & 12 months. Treatment w/ methadone/buprenorphine assoc w/ 76% reduction in OD at 3 months! These are lifesaving meds.

Treatment duration matters. Ppl treated w/ methadone or buprenorphine for <30 days were nearly 6 times more likely to experience an #overdose than those treated >180 days. Need systems of care that not only offer immediate access but also prioritize engagement and retention.

We also looked at association btwn different tx and likelihood of subsequent "detox" admission. Compared to methadone/buprenorphine tx all other pathways more likely to have post-treatment "detox" admit. AHR 3.76 for those who started w/ "detox" and 2.64 for naltrexone.

MAT for OUD

Medication Assisted Treatment for Opioid Use Disorder



This is not about being “pro-medication” or “anti” other treatments. I am pro science, pro things that keep people alive, healthy, & happy. Patients & families deserve evidence to make informed decisions that are right for them. Just like with any other illness. 🧐

For insurers & policymakers: too much evidence to continue to support barriers to access to meds. Prior auths, arbitrary dose/duration limits, discrimination in housing/corrections/employment against ppl on agonist therapy=harm.

[#XtheXWaiver](#) & office-based methadone also needed. 🧐

MAT for OUD

Medication Assisted Treatment for Opioid Use Disorder

On March 31, SAMHSA and the Drug Enforcement Agency (DEA) released guidance providing flexibility to **prescribe buprenorphine to new and existing patients with opioid use disorder via telephone** by otherwise authorized practitioners without requiring such practitioners to first conduct an examination of the patient in person or via telemedicine.

COVID & MAT

- What impact have the revised MAT regulations had on patients and the community?
- What is the role of MAT via telehealth in eliminating overdose deaths in Iowa?
- How have providers responded to the ability to practice via telehealth?
- How will the federal government sustain, modify, or end the new MAT regulations?
- How can state legislators and state agencies harness the changes surrounding MAT access to address Iowa's overdose crisis?

Questions to explore today:

Chad Fairchild



Chad lives in Davenport, IA, and operates a family-owned business started by his parents. Primarily raised in the Quad Cities, Chad spent parts of his childhood living in Japan and the Philippines while his mother served in the Marine Corps.

Chad is a first responder, serving in Civil Air Patrol, and has completed extensive training in search and rescue, advanced first aid, and Ground Team Level 3. Additionally, he works in sales with Cutco Cutlery and has previously worked as a Chief Security Officer. Chad's family's business sells health and wellness supplies and supplements, working with customers to quit smoking,

As an infant, Chad was diagnosed with sickle cell anemia, a rare blood disease that has brought considerable struggle, hardship, joy, and pain - both mental and physical - to Chad's life. Sickle cell is a genetic disease that primarily occurs in patients of African descent, including Black Americans. It is characterized by a malformation of red blood cells, where a percentage of these cells appear to be shaped like a crescent, rather than a sphere. Red blood cells' capacity for storing and transporting oxygen around the body is thus diminished, and it causes patients to experience extreme pain. Chad was prescribed opiates for pain control as a child and later developed opioid dependency, for which he now addresses with suboxone.

Kyle Wiand

Kyle is a native of Knoxville, Iowa (Marion County), where he currently works in the agricultural industry and in security for a Des Moines media company. Kyle is a dedicated volunteer with the Iowa Harm Reduction Coalition and trains central Iowans to utilize naloxone to reverse opioid overdose. Through his volunteer work, Kyle has been credited with saving over 300 lives via the naloxone he has distributed in the Des Moines community and the rural communities south of Des Moines. Kyle is a father of two beautiful children and currently lives in Knoxville with his partner Amanda.





Alison Lynch, M.D.

Alison Lynch is a psychiatrist and family physician at the University of Iowa Hospitals and Clinics, where she is also Director of Addiction Medicine. She directs the Co-MAT-IA (“Co-MAT-Iowa”) project that is working to increase access to MAT in Iowa by building services and training providers. In 2017, she started the UIHC MAT Clinic, which provides care to people with opioid use disorder and other substance use disorders through the use of medication. She has trained over 100 providers in eastern Iowa to get their DEA waiver so they can prescribe buprenorphine to treat opioid use disorder. Other current projects include starting a new fellowship in addiction medicine at the University of Iowa Carver College of Medicine, the North Bridge and South Bridge projects which provide services to people with opioid use disorder who are reentering the community from incarceration, and a project to increase services for pregnant and new moms in recovery.

Monica Wilke-Brown, LMSW

Monica is the Project Director for the Opioid Response grants at the Iowa Department of Public Health. She has experience with several opioid grants as well as County Substance Abuse Prevention grants, the Iowa's Child Protection Centers' grants, and the Screening, Brief Intervention, and Referral to Treatment (SBIRT) grant, which integrated substance use screenings into primary care, other medical services, and the National Guard. Monica's prior experiences include HIV Prevention work as a Peace Corps Volunteer in Ecuador, substance abuse and violence prevention services in central Iowa, and work with international students and immigrant groups in St. Louis. Monica spent ten years managing community-based programs at a Central-Iowa non-profit prior to joining the Department. Monica received her Bachelor of Arts degree from Loras College in Dubuque, Iowa and her Masters of Social Work degree from the Brown School, at Washington University in St. Louis.

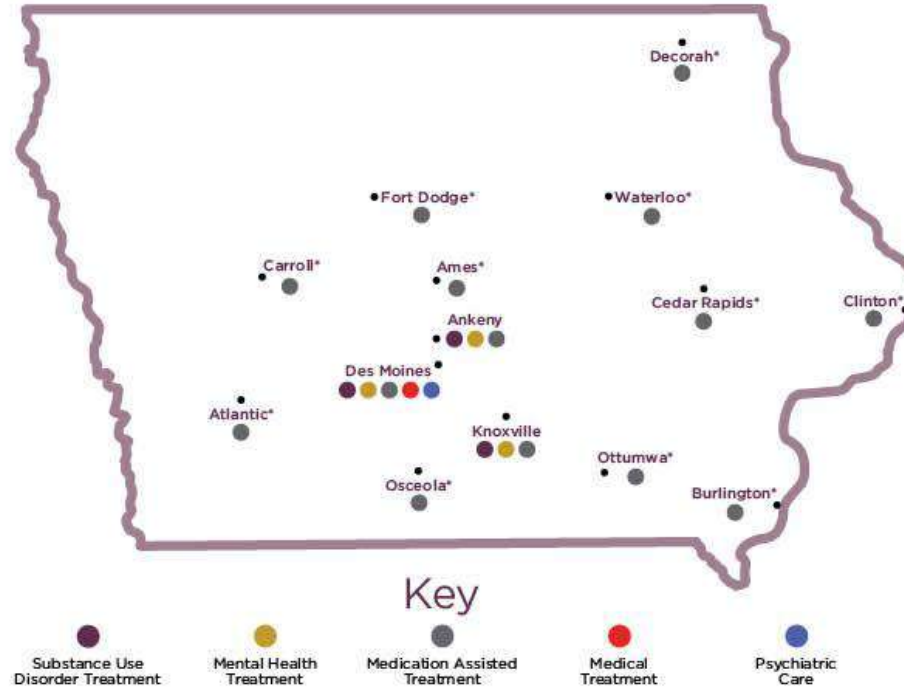




Jen Pearson

Jen Pearson became CEO of UCS Healthcare in March of 2019 after joining the nonprofit organization in 2008. She has held many different positions within UCS including patient services, insurance contract management, as a case manager for Access to Recovery, accounting, and as chief operations officer. Jen now oversees an organization that has seen rapid growth over the past three years expanding into a total of 14 locations across Iowa and doubling the size of their workforce to more than 115 professionals. UCS Healthcare provides integrated medical and therapeutic care for persons seeking treatment for substance use disorder including medication assisted treatment, mental health therapy, medical care, psychiatric care and informed LGBTQ+ health care. Jen serves as a board member for several organizations including Iowa Behavioral Health Association, Integrated Behavioral Health Network, Ankeny Substance Abuse Project. She is also involved as a Queer Supports Advisory Team member for Iowa Safe Schools, a member of the Iowa Opioid Use Disorder Consortium and is a task force member for the Clive Community Health + Wellness Initiative.

LOCATIONS AND SERVICES



*Substance use disorder treatment services provided by certified treatment provider partners in these locations.

as of February 2020

Evelyn Fortier

Fortier currently serves as general counsel for health policy and chief counsel for special projects on the staff of the U.S. Senate Finance Committee, chaired by U.S. Sen. Chuck Grassley, R-Iowa. She previously served as chief counsel for justice programs in the crime unit of the U.S. Senate Judiciary Committee, during Sen. Grassley's tenure as its chairman in the 114th and 115th Congresses. She has worked for federal lawmakers in both chambers of the U.S. Congress for nearly two decades, serving as counsel to two other members of the Senate Judiciary Committee, legislative director and chief counsel to a member of the Senate Commerce and Environment Committees, and general counsel to the chairman of the Commerce Subcommittee on Consumer Affairs. Fortier also spent nearly six years in the nonprofit sector, serving as vice president for policy and deputy general counsel at a trade association for nonprofit credit counseling agencies and as vice president for policy at a national charitable organization, where she advocated for crime victims' rights, launched a legal database to support the work of rape crisis hotline volunteers, testified before Congress, and championed the use of DNA to solve crimes. Fortier began her legal career at Richards, Layton & Finger, Delaware's largest law firm. She earned her law degree at the University of Virginia and bachelor's degree, magna cum laude, from Harvard University.





Anna Bonelli

Anna Bonelli is the Senior Policy Advisor to the Principal Deputy Administrator of CMS, who leads the opioids portfolio. Anna manages the implementation of initiatives that support CMS's efforts to combat the opioids crisis across Medicare, Medicaid, the Children's Health Insurance Program, and qualified health plans in the exchanges. As part of that effort, she works on the day-to-day implementation of CMS's 49 provisions under the SUPPORT Act. Before coming to CMS, Anna detailed to the Senate Finance Committee during her career at the U.S. Government Accountability Office. At GAO, Anna led projects on Medicaid data, home and community-based services, and private plan affordability.

Shannon Lundgren

Shannon is a state legislator in the Iowa House of Representatives. She grew up in Dubuque Iowa raised with three younger sisters, by her parents Lynne & Rich Fluhr. She Graduated from Wahlert Catholic High School and then attended Midwest Travel Institute in Davenport Iowa and graduated with a certificate in Tourism Management. Shannon and her husband Charlie live in Peosta, Iowa and they have two grown daughters. Alexis is a business partner and the Operations Manager at their family owned restaurant, Trackside Bar & Grill. Sydney resides in Cedar Falls with her Husband Tony; and she works for Dupaco Community Credit Union. Shannon is also a certified Travel Agent and owns and operates Lone Palm Travel Co.

Shannon was first elected to the Iowa House in 2016 and is serving in her second term. As a member of the Iowa House, she has a proven track record of standing up for her constituents in District 57, and her voting record shows that she has their best interest at heart.

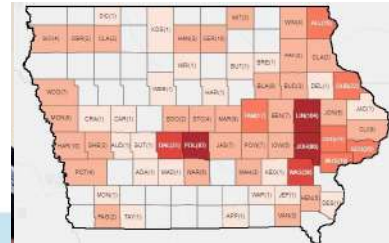
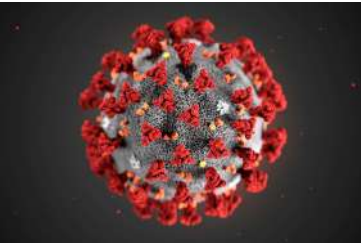
Shannon managed several complex bills early in her tenure including; the Ban on Abortions after 20-weeks, the Fetal Heartbeat bill, both an Adult and Children's Brain (Mental) Health bills and addressed the states opioid epidemic with legislation that has had an immediate impact on those suffering with opioid addiction. Her work on complex bills along with her leadership skills has earned her the Chair seat for the House Human Resource Committee, a committee that works on health policy issues for the state. She continues to work on lowering the cost of prescription drugs, transparency in the states Department of Human Services and the Department of Public Health and works tirelessly on affordable access to healthcare for Iowans. Shannon also serves on the Commerce Committee, State Government Committee, as well as the Health & Human Services Joint Budget Sub-Committee, advocating for access to care and fair reimbursement for providers.

Shannon is a known truth teller, always direct, yet very diplomatic. If asked she will tell you that she did not get elected to make friends in Des Moines, that she was elected to serve the interests of her constituents, family, friends and neighbors in Dubuque County. She continues to put District 57 and first.



Moderated Q&A

Facilitated discussion among webinar speakers

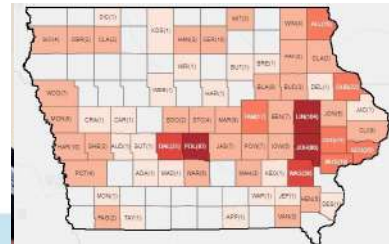
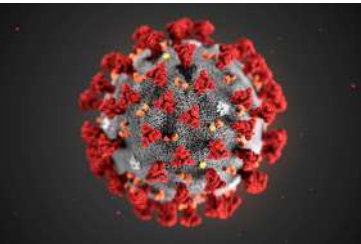


Changing Barriers to MAT Accessibility in Iowa During COVID-19
Friday, June 12, 2020 12:00pm - 1:30pm CST

Audience Q&A

Please enter questions & comments using the Chat feature;

The host will select and read questions



Changing Barriers to MAT Accessibility in Iowa During COVID-19
Friday, June 12, 2020 12:00pm - 1:30pm CST

Thank you

That concludes today's webinar.

Thank you for joining us and thank you to our expert speakers.

Please direct any follow up questions or concerns to
hello@iowaharmreductioncoalition.org.

Next Steps

- The webinar recording will be posted to www.iowaharmreductioncoalition.org
- An announcement will be made via IHRC's list-serv and social media once the recording is available.
- Access the recording sooner via Facebook livestream.
- Connect with @IAHarmReduction on Twitter to see the tweet-thread summary from today's session.
- A written summary of the webinar will be released within the coming weeks.
- Stay tuned for more information regarding IHRC's COVID-19 & MAT data project.
- Join us for an upcoming webinars in our COVID-19 series! Dates and topics TBA.