



Opioid Use & Misuse Disorders

Behavioral Health

Abt Associates has taken bold action to help prevent opioid misuse and overdose in communities and states. Our work has helped address the supply and demand of illegal drugs and the misuse of legal and illegal substances for federal, state and local agencies, as well as other key stakeholders. We've pioneered research strategies to estimate the worldwide supply of illegal drugs, led research on drug-trafficking organizations, generated methods to estimate the demand for illegal drugs in the U.S. and evaluated the effectiveness of substance use disorder treatment programs. Our team of multidisciplinary experts brings critical insight and approaches to help access the hard-to-reach and at-risk substance-using populations.

Selected Projects

Building Evidence on Employment Strategies

As a subcontractor to MDRC, Abt plays a lead role on the Building Evidence on Employment Strategies for Low-Income Families Study (BEES), a project sponsored by ACF at the U.S. Department of Health and Human Services. The goal: to conduct rigorous evaluations of innovative programs that increase earnings of low-income families and focus on addressing SUDs and/or mental health conditions. Abt leads work on identifying and evaluating programs that blend employment and SUD recovery and treatment services.

Buprenorphine Outreach and Information Dissemination

In December 2002, the Substance Abuse and Mental Health Services Administration's (SAMHSA) Centers for Substance Abuse Treatment launched New Paths to Recovery, a nationwide education program aimed at informing physicians about the availability of buprenorphine as a treatment option for opioid addiction. To support that program, Abt and its partners conducted eight forums in communities with high rates of opiate use. The first four were held in largely rural communities; the remaining forums were held in large cities. This contract also supported the development and production of Buprenorphine: A Guide for Nurses, which was published by SAMHSA in 2009 as a technical assistance paper.



Development and Evaluation of a Technical Package on Coordinated Care for Chronic Opioid Therapy

The Centers for Disease Control and Prevention (CDC) hired Abt to develop a coordinated care plan for safe opioid prescribing. This included upper-limit dosing thresholds, attention to drug-drug and drug-disease interactions, urine testing for drugs and use of medication-assisted treatment. With MedStar Health, we evaluated the extent to which the demonstration sites were able to implement the plan's safer prescribing practices. The guide, along with other resources, is part of the resource CDC Quality Improvement and Care Coordination: Implementing the CDC Guideline for Prescribing Opioids for Chronic Pain.

Estimating the Prevalence of Opioid Diversion by "Doctor Shoppers" in the U.S.

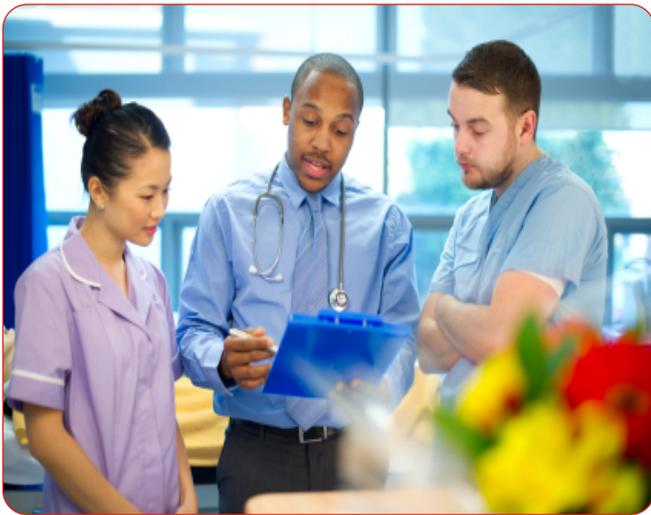
Abt examined a nationwide sample of 146.1 million opioid prescriptions dispensed during 2008 and found that patients who legitimately need opioids may be receiving uncoordinated care. States have established monitoring programs to collect information on drugs dispensed, but most physicians do not access this information. The study recommends that monitoring programs improve access and response time, scan data to flag suspicious purchasing patterns and alert physicians and pharmacists. Practitioners could prevent doctor shopping by screening new patients for risk of abuse and monitoring their adherence to prescribed treatments.





Evaluating and Implementing the Six Building Blocks Team Approach to Improve Opioid Management in Primary Care

The Agency for Healthcare Research and Quality (AHRQ) funded Abt and partners to improve the Six Building Blocks [for opioid management], develop guidance for and evaluate their implementation in a diverse set of 15 primary care practices. The Six Building Blocks represent six key work areas that need to be redesigned in a primary care practice to improve a clinic's management of patients on chronic opioids.



Evaluating Prescription Drug Monitoring Programs' (PDMP) Effects on Physicians' Opioid Prescribing

Abt used data from a national survey to assess the effects of PDMP on the prescribing of opioid analgesics and other pain medications in ambulatory care settings in 24 states from 2001 to 2010. We found that the implementation of a PDMP was associated with more than a 30 percent reduction in the rate of prescribing of Schedule II opioids. This reduction was seen immediately following the launch of the program and was maintained in the second and third years afterward.

Evaluating SAMHSA's Strategic Prevention Framework for Prescription Drugs

On behalf of SAMHSA, Abt leads the Program Evaluation for Prevention Contract (PEP-C) to evaluate the Strategic Prevention Framework for Prescription Drugs (SPF-Rx). The SPF-Rx program empowers grantees to leverage the resources of stakeholders—including public health departments, school systems, the criminal justice system and the pharmaceutical industry—to prevent and reduce prescription drug and illicit opioid misuse and abuse among youth and adults.

Our evaluation will help answer whether the SPF-Rx produces desired outcomes.

Formative Evaluation of Prescription Drug Monitoring Programs

The Department of Justice contracted with Abt to conduct an early assessment of PDMPs operating in various states and to explore the feasibility of conducting a systematic evaluation of their effectiveness. The Department of Justice was especially interested in determining if PDMPs reduce inappropriate prescribing practices and/or diversion of drugs having a high likelihood of abuse. The Department was also interested in determining if these programs have unwanted effects on physicians' prescribing or pharmacists' dispensing practices. Abt surveyed all existing PDMPs, characterized their structures and operations, and outlined research designs to evaluate their effectiveness.

Implementing Evidence-Based Practices in State Medicaid Systems: Medication Assisted Treatment

To improve knowledge of mental health and substance use disorder services in Medicaid, SAMHSA's Center for Mental Health Services contracted with Abt to conduct an array of activities to educate Medicaid directors and staff. The project included the development of a report, "Implementing Evidence-Based Practices in State Medicaid Systems: Medication Assisted Treatment." This report demonstrates how successful implementation of MAT requires collaborations across general health, substance use disorder (SUD) and other social service systems (e.g., corrections, child welfare), as well as across individuals with different ideological perspectives on the nature of recovery from SUDs.

Integration of Buprenorphine Treatment for Opioid Use Disorder (OUD) in HIV Primary Care Settings - Dissemination and Evaluation Center (DEC)

Untreated OUD is associated with increased risk of HIV transmission, interferes with treatment adherence, and impedes viral suppression. Abt, in partnership with the Boston University Center for Innovation in Social Work and Health, supports the Health Resources and Services Administration's Dissemination of Evidence-Informed Interventions Buprenorphine initiative. As the Dissemination and Evaluation Center, the team leads the multi-site implementation science study. Findings will be integrated into four care and treatment interventions that are replicable; cost-effective; capable of producing optimal HIV care continuum outcomes; and easily adaptable to the changing healthcare environment.





Know Your Rights Brochure – Medication-Assisted Treatment

Abt and its partner, the Legal Action Center, developed the “Know Your Rights” brochure and webinars to train and educate the public and those in recovery about the rights of individuals in recovery from alcohol or drug problems under federal and state laws. The information covers laws prohibiting discrimination against people with disabilities in the areas of employment, housing, public accommodation, and government benefits and services. It also covers the rights of individuals with criminal conviction histories and individuals in medication-assisted treatment.

Massachusetts Health Policy Commission Behavioral Health and Substance Use Disorder Recommendations

Charged with conducting a study of substance use disorder treatment, the Massachusetts Health Policy Commission contracted with Abt to examine aspects of the opioid epidemic in the Commonwealth and to provide recommendations to address the crisis. The study involved describing a plan to define a set of behavioral health system specifications, including considerations of financing and return on investment, provider capabilities, quality metrics, and workforce development, followed by a gap analysis between these system characteristics and current capabilities.

Medicare Part D Opioid Policy Impact Evaluation

The Centers for Medicare and Medicaid Services (CMS) implemented a policy to improve controls on opioid prescribing and dispensing and to reduce the number of beneficiaries at high risk of misuse and overdose. CMS developed a surveillance system that scans Part D prescription claims to identify Medicare beneficiaries who obtain excessive daily doses of opioids for 90 consecutive days or more; beneficiaries who use more than three prescribers and dispensers for opioids during a one-year period; and beneficiaries who meet both of these criteria. Abt conducted quantitative analyses to evaluate the effects of this policy.

Opioid Clinical Improvement Implementation Package for Large Healthcare Systems: Activities to Support Guideline Dissemination and Implementation

The CDC funded Abt and partners to support our implementation of the CDC Opioid Prescribing Guideline in primary care practices. The project consisted of developing 16 opioid quality improvement (QI) measures that reflect the guideline recommendations and an associated implementation package. Both the opioid QI measure specifications and implementation package are available in the resource CDC Quality Improvement and Care Coordination: Implementing the CDC Guideline for Prescribing Opioids for Chronic Pain. In addition, we are supporting a QI collaborative of five health care systems implementing the CDC Guideline and associated QI measures. The QI collaborative consists of monthly clinical webinars, system leads calls to discuss implementation, IT staff calls regarding producing the measures and support of systems and a central web resource.

Opioid Clinical Improvement Measures Implementation and Evaluation

CDC funded Abt and our partners to implement the CDC Guideline and associated QI measures in six additional health care systems from across the country—adding to the current QI collaborative described above.





Opioid Treatment Program Service Continuity Project

Through a subcontract with FEi, Abt was contracted by SAMHSA to evaluate a project that leveraged health information technology to support opioid treatment continuity. The purpose of the project was to assess the feasibility of a technology designed to enable patients to control the sharing of their opioid treatment information with other providers via a Health Information Exchange and a patient portal in compliance with state and federal regulations, including 42 CFR Part 2. Abt's evaluation detailed the challenges and solutions associated with developing the solution, the extent to which SAMHSA's goals for this pilot were met, lessons learned and recommendations for future applications of these findings.

Supporting CDC's Development of the Opioid Prescribing Guideline

To support safe prescribing and reduce the adverse consequences of opioid use, CDC developed a prescribing guideline for physicians. Abt synthesized research, assembled evidence tables and provided editorial support for draft clinical recommendations. We conducted rapid literature reviews on the harms associated with the use of opioids for chronic and acute pain; the harms of combining opioids with alcohol, other prescription drugs and illicit drugs; the effectiveness of non-opioid treatments for pain; patient and provider values and preferences specific to opioids; the cost-effectiveness of opioid therapy for chronic pain; and the impact of prescription drug monitoring programs on prescribing behavior and patient outcomes.

Surgeon General's Report on Alcohol, Drugs, and Health

Abt supported the development of the first-ever Surgeon General's Report on Alcohol, Drugs and Health, a seminal project that will have major implications for how the U.S. addresses not only the epidemic of opioid misuse but also public health problems associated with alcohol and other substances. This report discusses the growing relationship between prescription drug misuse and heroin use and provides evidence-based strategies for addressing the opioid epidemic.

Text Message Library for Individuals with Behavioral Health and Opioid Use Disorders

Abt led the development of a text messaging library for SAMHSA to support individuals with opioid use disorders. Abt conducted stakeholder interviews with SAMHSA grantees who expressed interest in using text messaging services and subject matter experts with direct experience developing and implementing text messaging libraries and technology-based services for the behavioral health community. We developed and tested 150 text messages targeted to individuals in various stages of recovery and supporting implementation materials for the library.

For More Information

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Abt is an engine for social impact, harnessing the power of data and our experts' grounded insights to move people from vulnerability to security worldwide.

