

# New Program Changes Utilization Patterns for Patients with Substance Use Disorders

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## BACKGROUND

- ✓ Intensive case management is effective in improving treatment engagement for individuals with substance use disorders (SUDs). Such models of care are uncommon in SUD treatment.
- ✓ Assertive Community Treatment (ACT), designed for patients with severe mental illness, enhances social functioning and reduces hospitalization rates.
- ✓ Limited research suggests that patients with SUDs can benefit from ACT, particularly those with high rates of hospitalization.

## PROGRAM OVERVIEW

### ACCESS TRANSFORMATIVE OUTREACH PROGRAM (ATOP)

- ✓ Created to serve patients with substance use disorders who are high utilizers of services
- ✓ Follows an Assertive Community Treatment model

### CRITERIA

- ✓ 18+ visits/6 months to ED/UC/IP settings and/or 3.2 WM
- ✓ Primary substance use disorder diagnosis
- ✓ Voluntary participation
- ✓ Began enrolling August 2022

### STRUCTURE/PHILOSOPHY

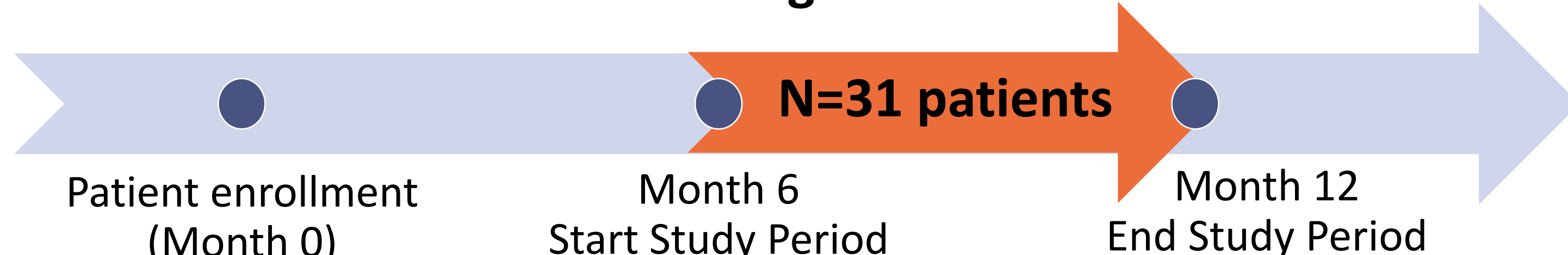
- ✓ Community-based
- ✓ Focus on harm reduction
- ✓ Frequent contact (up to 3x/week)
- ✓ Walk-in services M-F
- ✓ Provide basic human needs, assistance with transportation, financial support for milestones

### TEAM COMPOSITION

- ✓ 1 Program Supervisor (LCSW, LAC)
- ✓ 4 Case Managers (CAS/MSW/LCSW)
- ✓ 1 Peer Support Specialist
- ✓ 1 Registered Nurse
- ✓ 1 Care Navigator
- ✓ 1 Psychiatrist (0.6 FTE)

## METHODS

**Study Question: Does ATOP increase patient engagement with outpatient services and decrease engagement with acute care and withdrawal management services?**



Eligible patients were engaged with ATOP for a minimum of 6 months.

We compared utilization patterns of ATOP patients to two different controls:

- ✓ **Control 1 (N=31):** ATOP patients 6 months pre-enrollment
- ✓ **Control 2 (N=84):** Patients eligible for the program but not enrolled

### PRIMARY OUTCOMES

Average Monthly Visits to the following settings:

- ✓ Emergency Department, Urgent Care and Inpatient Settings (ED/UC/IP)
- ✓ ASAM 3.2 Withdrawal Management Settings (3.2 WM)

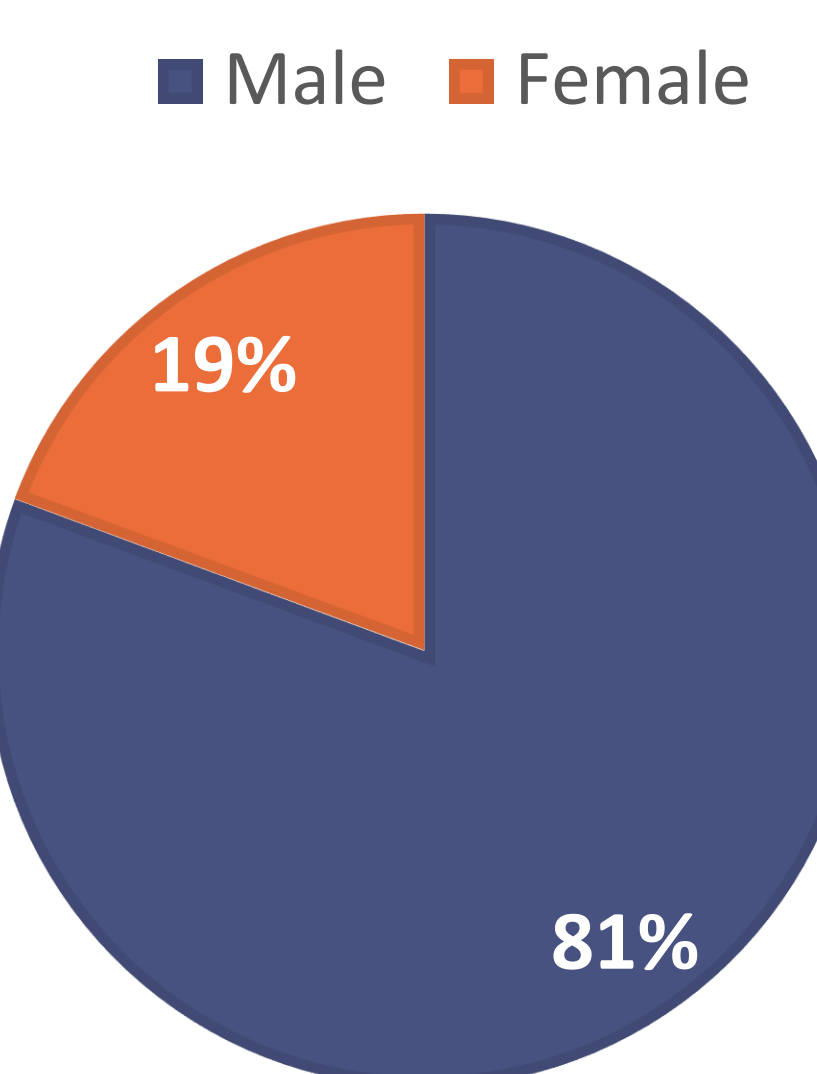
Utilization data from electronic medical record (includes other systems in the state with record sharing capability).

### SECONDARY OUTCOMES

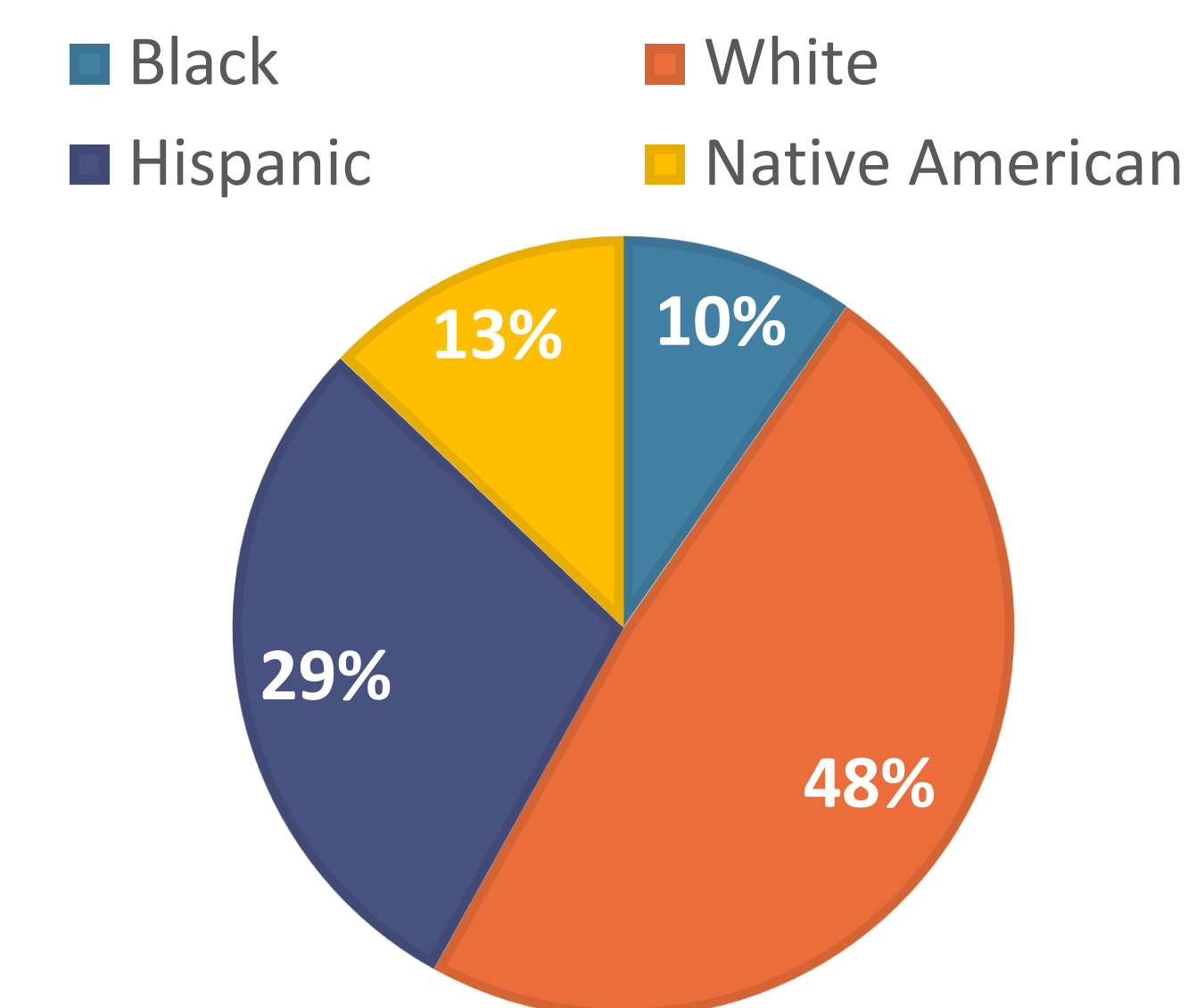
- ✓ Jail bookings (Cumulative; Denver Sheriff's Office Data)
- ✓ Deaths (Cumulative; Colorado Department of Health Data)

## RESULTS

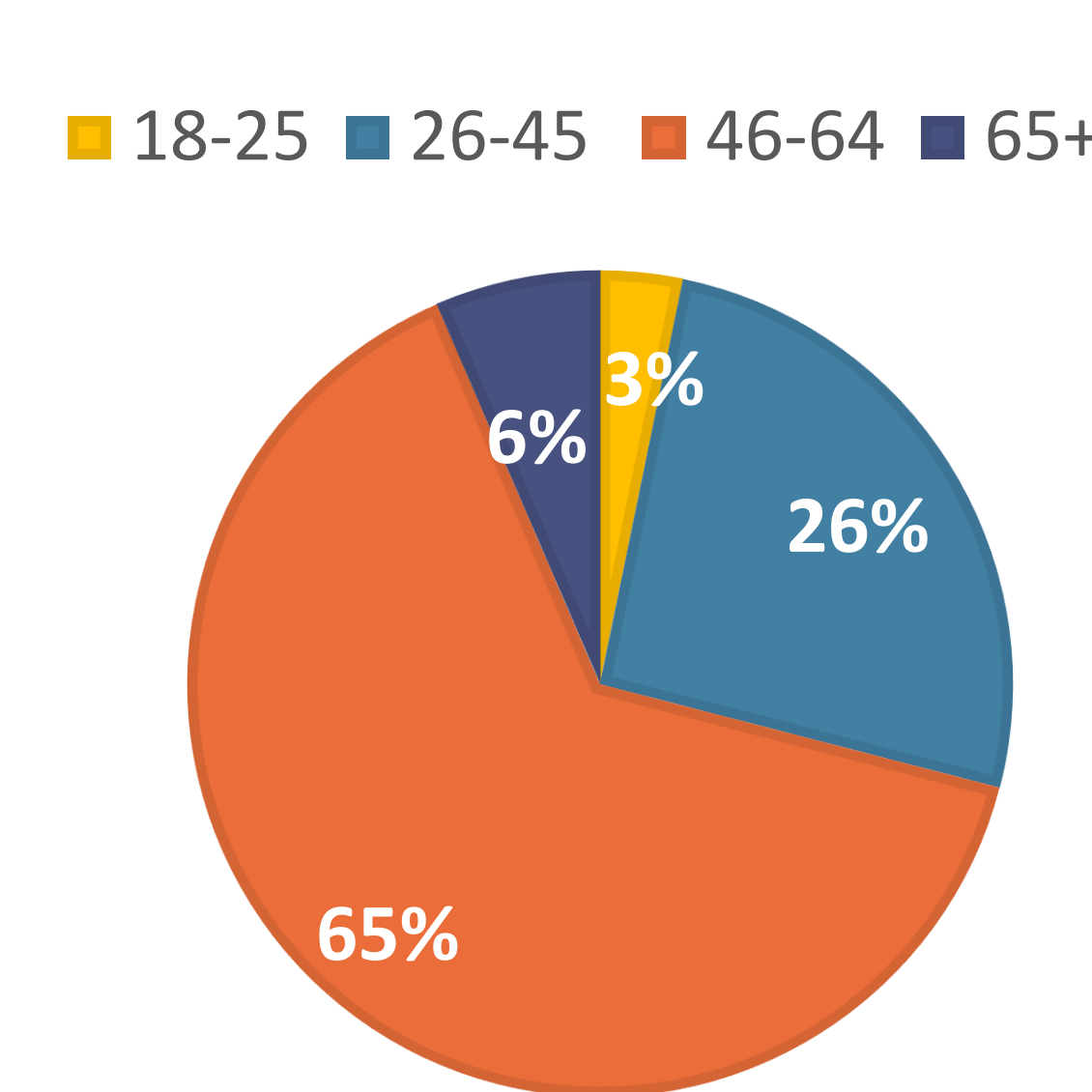
### GENDER IDENTITY



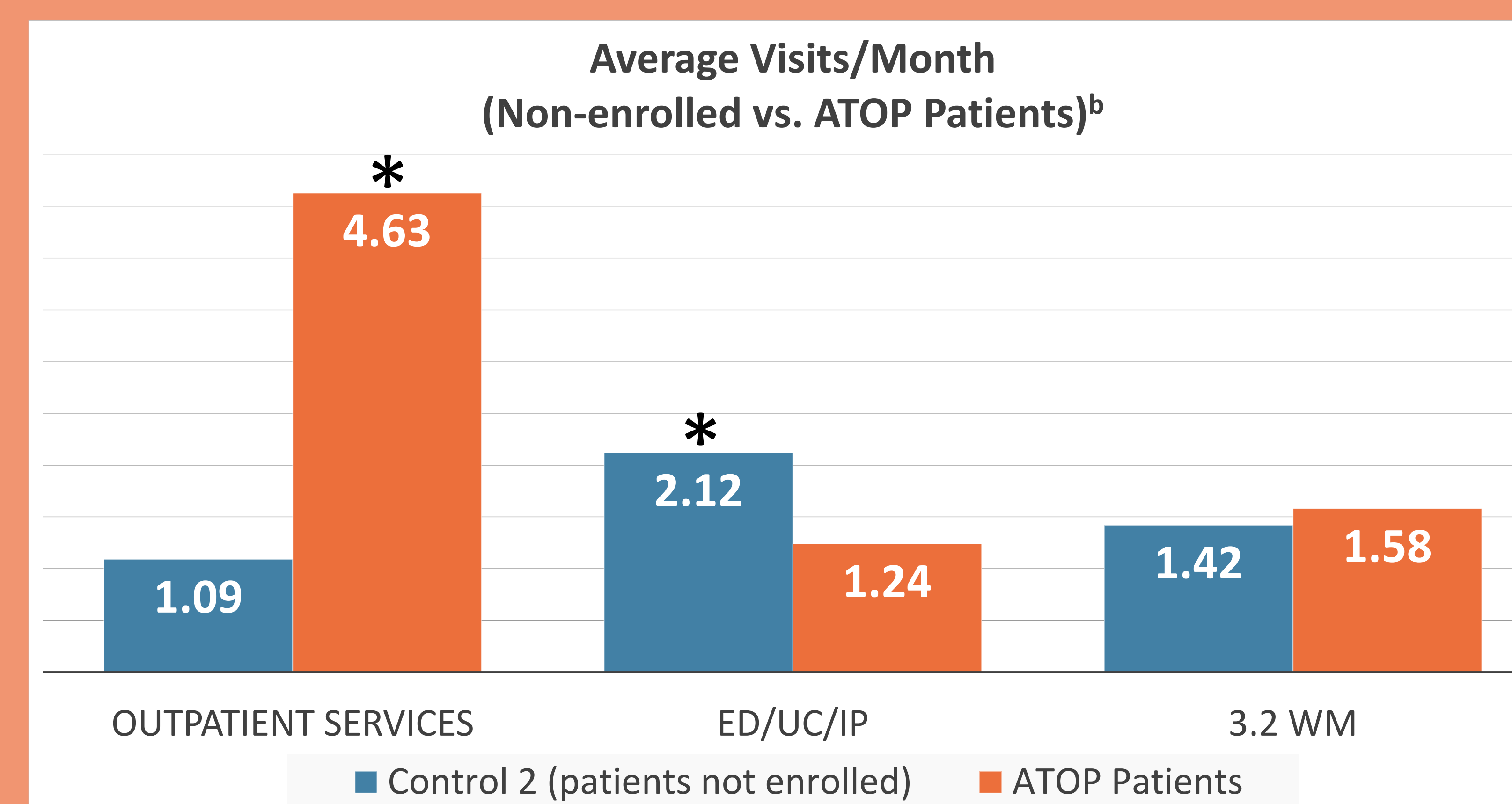
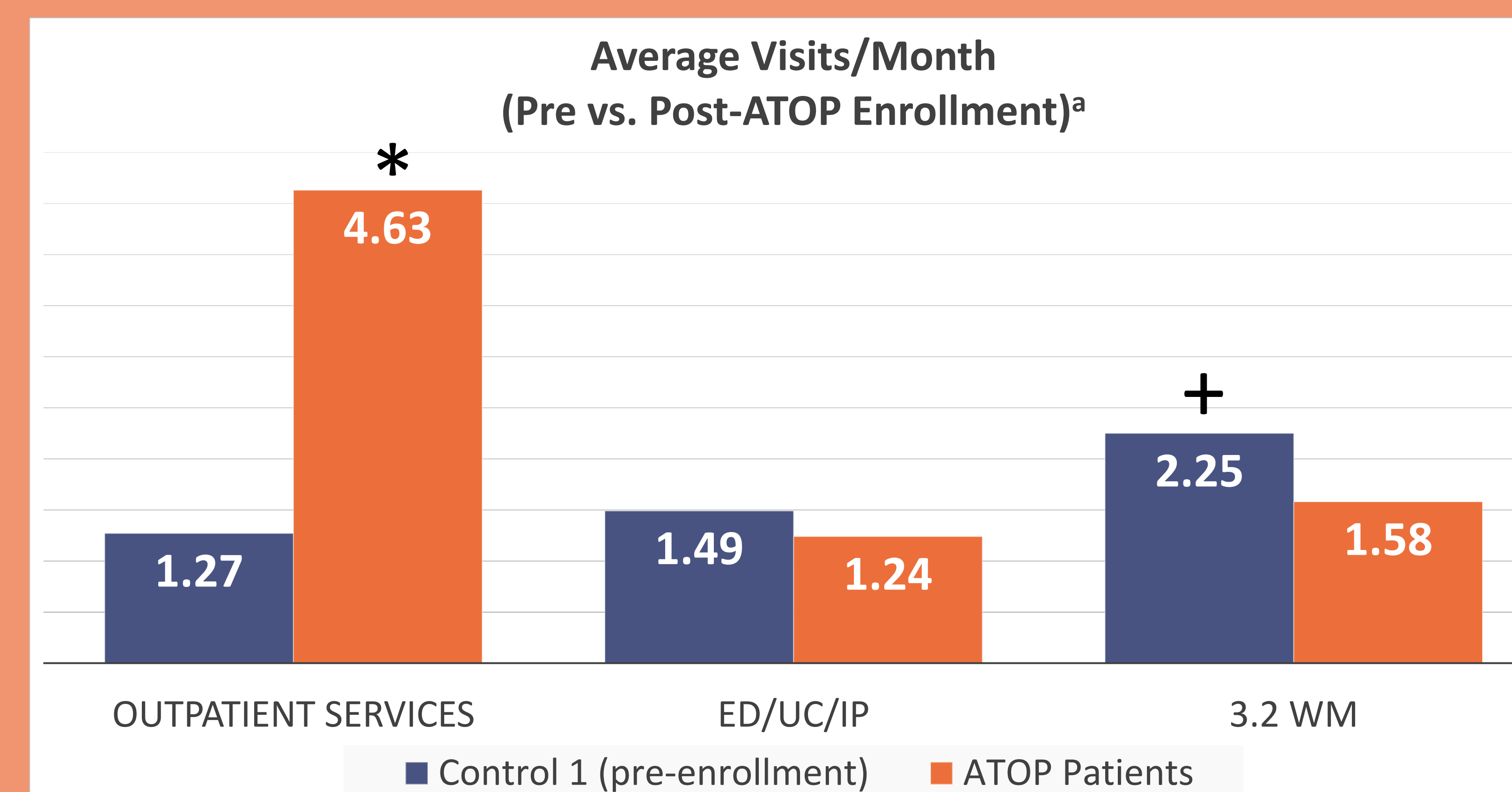
### RACE/ETHNICITY



### AGE



### PRIMARY OUTCOMES



<sup>a</sup>Compared using two-tailed Wilcoxon Signed-Rank Tests; <sup>b</sup>Compared using two-tailed Wilcoxon Rank-Sum tests; \*p<0.001; +p<0.05

### SECONDARY OUTCOMES

	Jail Bookings	Deaths
Control 1 (Pre-ATOP)	12	n/a
Control 2 (Non-enrolled)	36	6
ATOP Patients	7	2

Jail bookings and deaths were fewer for ATOP patients, but these results were not statistically significant.

## CONCLUSIONS

**Involvement with ATOP is associated with an increase in engagement in outpatient services and a decrease in utilization of acute care settings and withdrawal management settings.**

- ✓ ATOP patients demonstrated a significant increase in engagement in outpatient services.
- ✓ Mental health and substance use treatment engagement for ATOP patients was significantly higher than both controls. There was also a significant increase in engagement with other outpatient/specialty clinics when compared to non-enrolled patients.
- ✓ ATOP patients demonstrated a significant decrease in 3.2WM utilization when compared to themselves prior to enrollment.
- ✓ Visits to ED/UC/IP settings significantly decreased for ATOP patients, when compared to non-enrolled patients.
- ✓ Looking Forward: We will continue to evaluate outcomes as patients have longer with ATOP and seek to examine the effect of the program on social determinants of health.

## What Patients are Saying...

"Meeting with [ATOP] is like emotional oxygen."

"It's fantastic you are helping me in the way that you are... to have the reminder that I can reach out to, that makes a big difference."

"Sometimes you get left feeling forgotten, drinking helps to not feel that way but having you all call and check up on me is something."

## LIMITATIONS

- ✓ All visits may not be recorded due to imperfect record sharing, especially considering protections for substance use-related care.
- ✓ Patients were almost always enrolled in ATOP during an ED/UC/IP visit or 3.2WM visit at Denver Health. Therefore, eligible patients who had preference or geographic proximity to another health system were less likely to be enrolled in this program.
- ✓ Data does not account for jail bookings outside of Denver County.

## REFERENCES

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## ACKNOWLEDGEMENTS



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