

Health + Hospitals details systemwide plan to treat substance-use disorder

New York City Health + Hospitals is redesigning its treatment model for individuals with substance-use disorders.

Outpatient detox will be offered in a variety of care settings, the health system said, in contrast to its previous focus on traditional inpatient programs. The plan includes offering addiction consultation in all 11 of its emergency departments, traditional methadone services and integrated support for substance-use disorder in primary care. It also includes inpatient rehabilitation when needed.

The goal is to provide quicker access to addiction treatment that's focused on long-term results, executives said.

"One of the aspects of this transition was to really make treatment accessible no matter where you enter the health system," said Dr. Charles Barron, deputy chief medical officer and director of the Office of Behavioral Health at H+H.

In December President and CEO Dr. Mitchell Katz said H+H would transition existing beds in all seven of its detox units.

Inpatient detox programs were previously the standard of care used by the health system, but they provided limited services in a narrow time frame, H+H noted. Patients had to arrive in an emergency department during the short window when detox symptoms presented. They could be treated only for withdrawal symptoms that didn't require admission to the intensive care unit and were left at high risk of relapsing or returning for care soon after their release.

"The whole idea is to reduce what used to be a very high readmission rate for people," Barron said.

In the new model, treatment provided in an emergency department will target opioid-use disorders through greater access to medication-assisted treatment, support from peer advocates and links to long-term treatment in outpatient settings, such as clinics and primary care.

Barron noted that H+H has continued a push in recent years for more of its primary, specialty and behavioral health providers to obtain the necessary waiver to prescribe buprenorphine for the treatment of opioid-use disorder.

Medical inpatient stabilization in the acute-care setting is also part of the redesign to treat patients suffering from withdrawal from opiates or alcohol and then connect them to ongoing treatment, including at a 28-day rehab or an outpatient clinic.

Intensive outpatient detox is another component. It's for individuals who do not require hospitalization to stabilize. The goal is for them to access addiction treatment while remaining in the community, H+H said. The approach will be primarily for people seeking to stabilize on a maintenance dose or gradually taper off medications or other substances. Outpatient detox will be available at locations including H+H/Bellevue, Coney Island, Kings County, Jacobi and Woodhull.

Additionally, in response to the pandemic, Bellevue began operating the health system's first virtual buprenorphine clinic for individuals seeking to start treatment or facing a gap in coverage to treat their opioid-use disorder. Evaluation and treatment can typically be done on the same day patients call the clinic, H+H said.

"This has been an opportunity to not only bring in new people but also keep patients engaged who otherwise might have dropped off," said Rebecca Linn-Walton, assistant vice president of the Office of Behavioral Health at H+H.

Stressors induced by the pandemic are only expected to intensify demand.

The new treatment model is expected to be rolled out across the entire health system by fall 2021.