

## Buprenorphine Boot Camp Learner Objectives

February 21-22, 2019

### **Core Conference Concepts – All Participants**

#### **Overview: Opioid Use Disorder Treatment with Buprenorphine/Naloxone**

1. Describe presentations and diagnosis of opioid use disorder
2. Describe the clinical implications of buprenorphine's function at the receptor level
3. Recognize buprenorphine's abuse potential
4. Describe impact of buprenorphine on treatment outcomes for opioid use disorder

#### **Patient Evaluation**

1. Describe rationale for comprehensive intake for office-based buprenorphine therapy
2. Differentiate opioid use disorder from prescribed chronic high dose opioids use
3. Describe tools to predict likelihood of a patient's success in an office-based model of buprenorphine therapy
4. Describe approaches to diagnosing comorbid psychiatric and pain conditions

#### **Track #1 – Buprenorphine prescriber training\***

*\* Participation in the core conference sessions and this track are required to certify completion of the 4 hours of live training required for an X-waiver to prescribe buprenorphine for opioid use disorder. Materials will be provided that describe how to complete the remaining online training – 4 hours for physicians and 20 hours for APPs – at no additional financial cost.*

#### **Induction and maintenance**

1. Explain rationale for the process of buprenorphine induction
2. Describe pros and cons of different approaches to initiating a patient on buprenorphine
3. Use patient-centered language to explain expected duration of treatment on buprenorphine

#### **Case discussions**

1. Recognize and manage precipitated buprenorphine withdrawal
2. Discuss pain management options for patients on buprenorphine
3. Discuss ASAM criteria as a guideline for when to escalate different types of addiction care

#### **Track #2**

#### **Team-based intakes, inductions, and visits: Key roles and considerations for non-prescribers**

1. Describe models of triaging patients by telephone or in-person interview
2. How to manage inductions by protocol (by phone or in-clinic)
3. Explain how nurse care manager can expand treatment access

#### **High risk prescription management: Tapers, diversion reduction, and overdose reduction**

1. Discuss principles for safely tapering opioids and sedatives

2. Describe protocols of prescribing naloxone for patients at increased risk of experiencing or witnessing an overdose
3. How to use patient-centered language to set appropriate expectations before starting medication tapers
4. Develop policies to detect and mitigate medication diversion risks

### **Track #3**

#### **Financial feasibility & sustainability: Why prescribe buprenorphine in your clinic**

1. Identify how prescribing buprenorphine can impact finances
2. Develop public relations opportunities associated with office-based buprenorphine treatment
3. Discuss plans for potential changes to clinic flow depending on clinic model

#### **Operational models of care panel: What and who do I need in clinic**

1. Describe opportunities to leverage a care team for cost and care efficiency
2. Explain how medical home status aligns with office-based buprenorphine treatment
3. Assess how different roles could impact your budget and patient outcomes

#### **Dinner plenary – Dr. Jeff Schiff**

1. Describe successful initiatives that encourage safe prescriptions of opioids and other controlled substances
2. Explain how the state is trying to incentivize and support clinics to care for people with opioid use disorders
3. Inspire prescribers and clinics to build their capacity to care for people with opioid use disorders
4. Describe resources for clinics and providers interested in learning more about how to care for people with opioid-related problems

### **Friday Morning Workshops**

*These workshops are designed to provide a forum for care teams to hear about best practices and adaptations for many of the most common and perplexing issues that face clinics as they start to prescribe buprenorphine for opioid use disorder. Teams are encouraged to attend sessions together to foster discussion when you head home. All materials and faculty contact information will be available for future reference when these clinical issues inevitably arise in your practice.*

#### **Pain management and buprenorphine**

1. Discuss how to approach acute pain management for someone on buprenorphine
2. Distinguish between acute, chronic, and recurrent pain generators
3. Describe a conceptual framework for chronic pain management in people with opioid use disorder

#### **Urine drug test interpretation and troubleshooting**

1. Interpret standard urine drug test results
2. Discuss how your clinic can reduce risk of falsified urine specimens
3. Discuss how to respond to unexpected urine drug test results

#### **Other substance use management**

1. Discuss how to assess for and manage risky alcohol use
2. Discuss how to assess for and manage methamphetamine use
3. Discuss how to assess for and manage cannabis use

#### **Motivational Interviewing skills**

1. Discuss principles of motivational interviewing
2. Demonstrate how to practice reflective listening with equivocal and challenging patients
3. Experiment with motivational interviewing techniques

#### **Patient-centered addiction care**

1. Understand what “trauma-informed care” is and what it looks like in practice
2. Be able to identify trauma-informed and patient-centered treatment organizations and navigate referral processes
3. Develop a framework for how to talk about and manage patients’ “difficult” behavior

#### **Regulatory & Prior authorization issues**

1. How to be prepared and be successful with a DEA visit
2. Understand and be able to navigate the current landscape of prior authorizations for buprenorphine across the state
3. How to set up clinic work flows to minimize prior authorization stresses for patients on buprenorphine and providers

#### **Coordination with addiction treatment programs**

1. Explain the Rule 25 assessment and levels of addiction treatment
2. Recognize the ASAM criteria / Minnesota Matrix for treatment placement
3. Explain how to coordinate care with an addiction treatment program when an escalation of treatment intensity is indicated
4. Discuss evidence for levels of care and expected outcomes

#### **Coordination with law enforcement and pharmacies**

1. Explore strategies to engage and appropriately partner with law enforcement
2. Discuss opportunities to recruit and engage pharmacies as partners in opioid management efforts
3. Explain how pharmacists’ role in opioid and overdose risk management

#### **How to measure success**

1. Describe what metrics of success look like conceptually, clinically, and from an organizational perspective
2. Explore how to document and leverage successes with various stakeholders

3. Set a short-term and longer-term vision for your clinic and care team