



## **AIM Opioid Bundle and Community Engagement: Considerations for State Perinatal Quality Collaboratives**

Due to state differences in resources, laws, and regulations, implementation of the community engagement aspects of the AIM Opioid Bundle may vary by state. Answering the questions below may be helpful with development of quality initiatives around *Obstetric Care for Women with Opioid Use Disorder*.

### **1. Treatment Services:**

Be aware of treatment services in your state. Priority entry into treatment services for pregnant women is recommended.

*Considerations include:*

- What services are available in your state for the treatment of opioid use disorder for pregnant and postpartum women? Are there needs for any type of service (residential, intensive outpatient, etc.?)
- What levels of care does Medicaid pay for and how does Medicaid eligibility work for this population in your state? Does state Medicaid cover residential services? Does eligibility for Medicaid end in the postpartum period for some women and if so, which women?
- SAMHSA federal substance abuse block grants require funding to be set aside for pregnant and parenting women. How has the SAMHSA federal substance abuse block grant been implemented in your state?
- How has your state operationalized requirements for timely admission to addiction treatment services for pregnant women?
- How does your state support MAT (Medication Assisted Treatment)? How many MAT providers are there in your state? Where are the providers in your state? How are they regulated compared to other substance use disorder treatments services (outpatient, residential, detox, etc.)? Are there differences in the regulation of buprenorphine vs. methadone MAT? Will a patient be able to access both MAT and other treatment services concurrently if indicated?
- How will the average doctor in practice know how to find the services needed, both MAT and other services? Does resource mapping need to be done in your state? (Often there may be centralized referral programs, phone numbers or websites. How helpful are these existing referral mechanisms?)

### **2. Prescription Monitoring Programs:**

Be aware of Prescription Monitoring Programs in your state. These are typically databases that collect information on the prescribing and dispensing of controlled substances.

*Considerations include:*

- How does the Prescription Monitoring Program (PMP) in your state operate? (Who puts information in? Who can see the information in it?)

- What is the law in your state regarding PMP? (Who is required to add and/or access information and when?)

### 3. Child Welfare and Medication Assisted Treatment

Be aware of child welfare services in your state and common interventions and resources.

*Considerations include:*

- What are the reporting requirements around Substance Use Disorder and child welfare?
- How does the child welfare system in your state support or penalize women on MAT?
- Are women on MAT more likely to get a referral to child protective services?
- Are judges requiring detoxification (as opposed to MAT) as part of reunification or parenting plans?
- Are there ways for providers to partner with child welfare services to support recovery and decrease punitive interventions?

### 4. Naloxone

Be aware of Naloxone and its use for rescue in the setting of overdose.

*Considerations include:*

- Are there laws in your state related to Naloxone and its use as intervention in overdose?
- Are there organizations in your state that promote availability and use of Naloxone?
- Are your EMS agencies equipping their officers and personnel with Naloxone?
- Are patients and family members getting prescriptions or supplied with Naloxone?

### 5. Home Visiting

Be aware of home visiting programs in your state. Priority entry into home visiting programs for mother with substance use disorder is recommended in the AIM maternal opioid bundle.

*Considerations include:*

- What models of home visiting programs exist are available in your state/county?
- What is the process for a family to become enrolled home visiting?
- Are local healthcare providers knowledgeable about home visiting programs and the services they provide? If not, how can they be made aware of these services for families?