

OBSERVER-DISPATCH

Bassett addiction program earns state award for quality

By [Amy Neff Roth](#)

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Heroin has penetrated urban, suburban and rural communities in New York state, but addiction treatment options remain scarce in many rural areas.

So Bassett Healthcare Network has, since the fall of 2016, offered addiction treatment through its network of primary care providers. So far, 27 of the network's primary care doctors, nurse practitioners and physician assistants have become licensed to prescribe the drug buprenorphine or a drug that combines buprenorphine with naloxone (the overdose reversal drug), which is known by the brand name Suboxone. They provide primary care and addiction treatment to more than 200 patients in five offices, but primarily in Norwich, Oneonta and Cobleskill.

“Offering this treatment in primary care gives the best access to patients,” said Dr. Jennifer O’Reilly, who works in Norwich. “It makes it part of their regular care and not something that’s special or additional that they have to do.”

And it removes the stigma of going to a chemical dependence treatment facility, which keeps some people with opioid-use disorder out of treatment, she said. Treatment through primary care also means that underlying medical conditions, which often get neglected,

receive treatment, she said. O'Reilly said she's seen, for example, at least 10 patients whom she's started on hepatitis C treatment.

The health system has set a goal of expanding the program to 90 percent of its primary care offices within the next three years.

On Thursday, the Healthcare Association of New York State awarded Bassett one of four 2018 Pinnacle Awards for Quality and Patient Safety for its addiction treatment program. The award recognizes hospitals and health systems that show innovation and commitment in improving patient care in their communities, according to a release.

The Bassett program received funding through the state's Delivery System Reform Incentive Payment program and its participation in the Leatherstocking Healthcare Partners Collaborative. Bassett partnered with the University of Massachusetts to provide training, consultation and support to its staff.

Many clinics offering medication-assisted treatment mandate that patients enter counseling. Bassett providers strongly encourage counseling and help connect patients with therapists.

About buprenorphine

- An opioid used in medication-assisted treatment to help people with opioid-use disorder reduce or quit their use of heroin or prescription painkillers.
- Represents a "whole-patient approach" to treatment when used with counseling and behavioral therapies.
- Approved by the federal Food and Drug Administration in 2002.
- Unlike methadone, can be prescribed in physician offices.
- Providers must receive a waiver to prescribe buprenorphine.
- Most often used in combination with naloxone, the overdose-reversal drug, a combination best known by the brand name Suboxone.

Source: U.S. Substance Abuse and Mental Health Services Administration

“Most of these patients have other mental health problems — depression, anxiety. There is so much trauma history,” said James Anderson, a clinical psychologist in the Oneonta office.

But Bassett does not require counseling for its patients.

“We’re there for people,” Anderson said. “It takes a whole lot to get kicked out of primary care. We try to facilitate that work. We try to encourage it, but we don’t kick them out if they’re not quite ready when we would like them to be.”

Anderson said he does see patients in the Oneonta office and an addiction psychiatrist in Cobleskill also sees patients, but all practices collaborate with other agencies and providers to get patients the care and help they need in terms of both counseling and other services. He admitted, though, that resources are lacking in some rural areas, which can make it harder to get patients all the help they need.

“For places like Chenango County, because resources are scarce, we thought it was all the more important to really dive into the pool in areas like that,” he said.

Only one other provider offers medication-assisted treatment in the Norwich area and that’s on a cash basis, which most patients can’t afford, O’Reilly said.

Her practice has treated 58 patients for addiction, 46 of whom still are patients and three of whom have moved. About 80 percent of those patients were new to the practice when they started treatment. Some had been self-treating with Suboxone they got from family or friends or bought in the streets, O’Reilly said. Some had been waiting to find a way to get help, she said. Some people have decided to stop in her office on their way to buy drugs because they’re going through withdrawal, she said.

The combination of treatment for their addiction and treatment for their other medical issues has changed lives, she said. Patients have

gotten their children back, gone to college, found housing and gotten jobs, she said.

“It’s incredible. This has been some of the most rewarding work I’ve ever done,” O’Reilly said. “I don’t refer people for something I can easily handle myself and this is something we can easily handle. And this had made a huge difference for patients.”

Contact reporter Amy Neff Roth at 315-792-5166 or follow her on Twitter ([@OD_Roth](#)).

The Daily Star

Bassett earns recognition for addiction treatment

- By Erin Jerome Staff Writer
- Jun 28, 2018

A Bassett Healthcare Network opioid-addiction treatment program has been recognized for improving the lives of patients by the Healthcare Association of New York State.

The network was honored with the HANYS Pinnacle Award for Quality and Patient Safety for the third consecutive year on Thursday. The two previous awards recognized initiatives for diabetic patients and patients on dialysis.

Medication-assisted treatment for opioid addiction is considered essential in preventing relapse and helping patients overcome opioid and heroin use, doctors told The Daily Star. Before the Bassett program launched in fall of 2016, some patients in the area had to travel long distances to receive treatment drugs.

Practitioners in the network have been encouraged to obtain Drug Addiction Treatment waivers that allow them to prescribe buprenorphine drugs to patients in primary care settings. More than 200 patients from around central New York are currently in the program, and 27 primary care practitioners at five health centers have obtained the prescribing licenses. The network's goal is to have 90 percent of primary care clinics offering addiction treatment within the next three years.

Buprenorphine, which is commonly sold in the brand-name drug Suboxone, is an opioid considered a “partial agonist,” which has milder effects than heroin, oxycodone, methadone and other “full agonists” and prevents withdrawal from them.

“We’re shooting for much more than just the absence of use of heroin,” said psychologist James Anderson, who coordinated assistance for the first year of the program with the medical school at the University of Massachusetts in Worcester.

Anderson explained that rolling addiction treatment into primary care has allowed practitioners to address other health problems in patients who may not have seen a doctor in years. Many addicted patients also have issues with depression, anxiety, or trauma, he said. They may need treatment for conditions such as Hepatitis C or HIV, or want to start taking contraceptives. An addictionologist, Dr. Roxanne Lewin, has also joined Bassett to assist clinicians and patients with complex or severe cases.

Dr. Jennifer O’Reilly, medical director of the Bassett clinic in Norwich, said that some patients have been able to turn their lives around after starting treatment — a number have found jobs or regained custody of their children. The clinic has also been able to offer prenatal care in conjunction with medication-assisted treatment.

O’Reilly said that patients make weekly visits when they are beginning medication and receive check-in calls from nurses. They are referred to local care navigators who can help with transportation and picking up prescriptions, and will make monthly office visits once they are stable in the program. So far, there has been about an 80 percent retention rate, she said.

“Everyone here has gotten very comfortable treating it- it’s just a regular visit,” O’Reilly said. “We get really invested and we feel the successes a lot more than other patients.”

Many people stay on buprenorphine drugs for an extended period of time, but the doctors said they work with patients who have a goal to wean off of it.

Anderson noted that the federal government announced a commitment this year to expanding access to drug treatment for opioid addiction, and is now allowing physician assistant and nurse practitioners to prescribe it. Health and Human Services Secretary Alex Azar said in February that treating the condition without medication is “like treating an infection without antibiotics.”

The Bassett program is proceeding under Medicaid redesign that aims to better measure and pay for quality and value in health care. Among other quality measures, the state is looking at the time between the identification of addiction and the first engagement of treatment, Anderson said, with a goal of starting within 14 days.

Anderson said that he would like to see all primary care physicians in the network eventually obtain the prescribing license, which requires about eight hours of training and a brief test for doctors. More social workers and mental health professionals on hand in clinics would also be a boon, as would allowing emergency room physicians to start work on treating addictions, he said.