

## **Contingency Management for Medication Assisted Treatment Program (MAT) – County of Santa Cruz Health Services Agency**

**Background:** Contingency Management (CM) is the application of tangible positive reinforcers to change behavior, and specifically substance-using behavior. This evidenced based practice is effective in medication-assisted treatment programs that target stimulant use for patients being treated for opioid use disorder. At HSA clinics, the contingency management pilot program will broaden patient selection to include all MAT patients who have positive urine drug screens (UDS), with the exception of buprenorphine and THC, and are in tiers two and three. In the future we plan to include Tier 4 and 5 but are still in the development stage. The CM program at HSA clinics will be led by the MAT Clinic Nurse III/ Mental Health Client Specialist, with eligible patients participating for a duration of 12 continuous weeks. A new session of contingency management will restart every 12 weeks.

**Goal:** To support our patients with an evidence-based practice that has been proven to work in decreasing patients' stimulant and other drug use. Patients attendance and negative/favorable UDS % will increase during the continuous 12 week CM program.

### **Materials needed:**

- Fishbowl
- Gift cards \$5-\$50
- Paper for gift cards/positive affirmation
- Excel password protected spreadsheet or somewhere to track inventory or data
- Somewhere to keep the gift cards locked with an inventory sheet

**Patient Selection:** MAT patients in tiers two and three who test positive on urine drug screen (UDS) for substances other than buprenorphine and THC. Ideal candidates will test positive for 3 out of 4 weeks or more prior to starting contingency management. We will do a pre-CM base line of previous UDS 6-12 weeks prior to enrollment. Patients have the right to refuse to do contingency management.

### **Procedure:**

All patients that enroll in the contingency management program will sign a contingency management agreement/ consent explaining the procedure, agreeing to come twice a week to provide a UDS, what the expectations are, and making sure that they have interest in discontinuing substance use.

- RN /MHCS/ Prescriber/ IBH will work together to identify patients for CM program.
- Inform patient about CM program. Information about CM program occurs during initial intake, support group, and at one on one's.
- Use Point of Care UDS and result in Epic immediately.
- Send out for confirmation only if a positive result is contested.
- Continue to monitor UDS for duration of 12 continuous weeks for patients in Tier 2 and Tier 3. Clinic Nurse III/Mental Health Client Specialist tracks all data from Epic in a password protected excel spreadsheets.
- CM will continue new sessions every 12 weeks.
- Prizes will be awarded the same day for negative/favorable UDS results. Any patients who arrive late will receive earned prizes after group or a 1x1 session with SUDCM/IBH.

Clinic staff will pull data from our 12 continuous weeks to track attendance, UDS results, prize entries earned, and prizes awarded. We will track and graph data separately by Tier status (Tier 2 vs Tier 3). In addition, we will also track UDS results (Stimulant use vs Opiate Use). With this data we are able to measure the percentage of decreased substance use and attendance throughout all 12 weeks of the program. We will use an Excel spreadsheet with a graph to show the data of patients receiving contingency management. We could also pull strictly the patients who have been testing positive for stimulants to isolate that data.

Clinic staff will compare the UDS from the pre period (% positive) to the % positive during the 12 week CM/incentives period. This could be done in aggregate or per subject. And it would be even better if these same data could be presented for a group of people with stimulant use who did not participate in the trial. (Just using their routine UDS results).

### **Tier 2 (weekly requirement)**

- 1. Submit Urine Drug Screens 2X per week. (Tuesdays & Fridays/ Mondays & Thursdays)**
  - a. Earn one prize drawing from the fishbowl for the first UDS negative/favorable for any substances, with the exception of THC and buprenorphine.
  - b. Earn one additional entry for the second UDS negative/favorable for any substances, with the exception of THC and buprenorphine.
  - c. Total possible draws for the week, 3 if all UDS negative/favorable.
  - d. Contingency management does not have to be done in group. CM can be done in one on one with SUDCM if patient not appropriate for group or other factors such as work schedule.
- 2. Each week there will be a total possible of 3 prize drawings depending on the negative/favorable or positive/unfavorable UDS.**
  - a. If patient does not show up, there will be no prize drawing awarded for that day.
  - b. If patient has a positive UDS, no prize drawing will be awarded for that day.
- 3. Example A:**
  - a. A patient will be able to get one extra draw for a total of 3 each week if all UDS are negative/favorable. First negative/favorable UDS, one draw. Second negative UDS two draws. Total possible draws if all 12 weeks are negative/favorable 36. (see example A table 2)

### **Tier 3 (bi-weekly requirement)**

- 1. Submit Urine Drug Screen 1x every other week as required (Tuesday MAT group)**
  - a. Earn one prize drawing from the fishbowl for the negative/favorable UDS, with the exception of THC and buprenorphine.
  - b. Patient who is on Tier 3 is only required to come bi-weekly. Patient will only have one chance to test and draw at their required group. Tier 3 timeframe is 12 weeks which will allow for 6 group attendances max. If patients on Tier 3 come outside their group or every week they will only get to participate according to their bi-weekly requirement.

**Prize drawings will be in the form of gift cards ranging from \$5-\$50 and positive affirmations. The fishbowl will consistently be filled with half gift cards and half positive affirmations.**

**Example A for Tier 2.**

Patient X has come to his Tuesday appointment but has had a positive/unfavorable UDS. No prize drawing will be awarded this day. On Friday patient X has a negative/favorable UDS and has earned one prize drawing which will be awarded immediately.

Patient X has come to his Tuesday appointment but has had a negative/favorable UDS. One prize drawing will be awarded this day. On Friday patient X has a negative/favorable UDS and has earned Two prize drawing which will be awarded immediately.

**Example A for Tier 3:**

Patient Y has come to her Monday appointment and has a negative/favorable UDS. One prize drawing will be awarded during group session. Patient Y does not need to come to the 2<sup>nd</sup> testing day that week that is required for Tier 2 patients. Patient who chooses to come to the next Tuesday group (which is additional) or to any extra groups which is not required, will not participate in CM. Patient Y will only earn one prize drawing awarded during their required group session. Tier 3 patients have 6 chances to draw from the fish bowl until they promote to Tier 4, provided they submit consistent negative/favorable UDS tests.

**Example A.**

**Table 1. Example all negative/favorable UDS for all 12 weeks:**

<b>UDS Testing</b>			
<b>Weeks</b>	<b>Monday, Tuesday</b>	<b>Thursday, Friday</b>	<b>Total draws</b>
1	- one draw	- two draws	3
2	- three draw	- two draws	3
3	- one draw	- two draws	3
4	- one draw	- two draws	3
5	- one draw	- two draws	3
6	- one draw	- two draws	3
7	- one draw	- two draws	3
8	- one draw	- two draws	3
9	- one draw	- two draws	3
10	- one draw	- two draws	3
11	- one draw	- two draws	3
12	- one draw	- two draws	3
<b>Total Possible Draws</b>			<b>36</b>

**Table 2. Example positive/unfavorable and negative/favorable UDS draws:**

<b>UDS Testing</b>		
<b>Monday, Tuesday</b>	<b>Thursday, Friday</b>	<b>Total Draws</b>
- one draw	- two draws	3
+ no draw	- one draw	1
- one draw	+ no draws	1
+ no draw	+ no draw	0