# MAT Effective Teams – Structure and Clarity

## Tier 1: Induction/Stabilization

**Common Activities/Responsibilities**
- Weekly follow-up medical appointments
- Starting care coordination and case management
- Individual MAT care plans created
- Referrals/Enrollments made (SUD Support Groups, behavioral health, etc.)
- Initial attendance at SUD support groups
- Coordination with MAT team, Primary Care, and Behavioral Health
  o If any of this involved an outside agency, who coordinates this?

**Challenges Encountered by Team**

## Tier 2: Engagement

**Common Activities/Responsibilities**
- Patient gains coping strategies to reduce risk of relapse
- Medical visits every 2 weeks
- Regular attendance at SUD program and community-based support groups
- Bi-weekly contact with MAT case manager
- Coordination with MAT team and specialists, including psychiatry
- Urine drug screens

**Challenges Encountered by Team**

## Tier 3: Maintenance

**Common Activities/Responsibilities**
- Maintain recovery w/ monthly medical visits,
- Completion of SUD treatment program,
- Have a recovery support system in place
- Monthly contact with case manager
- Review MAT Care Plan, track progress on goals, make adjustments as needed
- Urine drug screens

**Challenges Encountered by Team**

Source: Adapted from Hill Country’s MAT PLUS Program Manual