

# 3:45 pm - 4:50 pm Breakout Descriptions

## **Option 1: Team Time**

#### **Team Time**

Your team can use this team to debrief and to discuss next steps.

## **Option 2: Office Hours (Meet in Foyer)**

#### Katie Bell: Program Design and Workflow

Katie can support teams interesting in learning more about ways to respond to patients' case management needs, scheduling with behavioral health care, and other program design and workflow questions. She can also answer questions around probation, drug court, incarceration, and CPS.

## Carolyn Chu: Warm Line

Carolyn will discuss the new, special partnership behind the California Substance Use Line (involving UCSF's Clinician Consultation Center and California Poison Control) and how it has expanded access to 24/7 telephone-based support for clinicians with questions on SUD evaluation/ management, including how to initiate medications for OUD. Participants can also provide feedback on how the Substance Use Line can support your current and planned activities to expand treatment access.

#### Meaghan Copeland + Tammy Fisher: ATSH Measure Set and Data Driven Decision Making

Meaghan and Tammy are available to answer questions about ATSH program measures, how to use data to make progress on your MAT work, and anything else related to ATSH data collection and reporting.

#### **Brian Hurley: Clinical Concerns**

Brian can answer questions regarding buprenorphine treatment in patients who use methamphetamine, 42 CFR, Part 2 (e.g., who is and isn't a counted program under Part 2), psychosocial treatment and MAT programs, and other clinical questions.

#### Mark McGovern: Behavioral Health

Join Mark's office hours to get questions answered around co-occurring psychiatric issues, including what to look for and which are associated with MAT treatment effectiveness. He can also discuss stimulant use and related behavioral health interventions.

## Shelly Virva: Patient Engagement, Coordination, and Clinical Questions

Shelly is available to discuss approaches to engaging difficult patients, coordinating with community agencies or payers, and other program design questions.



# Option 3: Gallery of Innovations (Fountain Room)

## **Appriss Health**

Appriss Health provides the nation's most comprehensive platform for opioid stewardship and early identification, prevention, and management of SUD. Appriss Health delivers real-time clinical decision support, critical insights, and interventions to physicians, pharmacists, and care team members. Solutions help prescribers and dispensers assess and manage clinical risk by providing access to critical information at the point of care. Appriss Health includes: (1) a managed service platform provides healthcare providers with comprehensive connectivity, clinical decision support, patient support and engagement, and care coordination; (2) aggregation and analysus if prescription information from providers and pharmacies and presents interactive, visual representations of that information, as well as advanced analytic insights, risk scores, and resources (include MAT locator) to help physicians, pharmacists, and care teams provide better patient safety and outcomes; and, (3) a cloud-based platform that delivers an easier way for providers to identify, unify, and track all behavioral health treatment options.

#### **Aunt Bertha: The Social Care Network**

Aunt Bertha is the largest social care network in America! Its mission is to connect people in need and the programs that serve them (with dignity and ease). Today, millions of people use the platform to find and connect to services electronically, simplifying the application process for all involved. Aunt Bertha invests in high-quality program data, curated by humans, in order to connect folks to free and reduced cost resources. They view this investment as the only way to ensure that people get the help they need, simply and quickly.

# **Bright Heart Health (BHH)**

BHH is a Joint Commission-certified telemedicine provider of addiction treatment services. BHH's goal is to provide no barrier, rapid access to evidence-based treatment for all addictive disorders. BHH initiates care as soon as the patient is ready to receive it. BHH has the capacity to initiate MAT on the same day patients make contact. BHH can provide counseling to prescribers without behavioral health services and vice-versa. BHH innovates as a digitally native platform. BHH uses artificial intelligence and predictive analytics to predict which interventions are most valuable based upon a comprehensive patient assessment.

#### **Workit Health**

Workit Health offers award-winning online, on-demand, evidence-based addiction treatment. Through mobile and web apps, members meet with clinicians, counselors, and coaches and work towards self-set recovery goals. Workit Health has an interactive curriculum of over 800 engaging online courses about addiction keep members on track in the comfort of home. It offer 24/7 recovery that fits into daily life, designed by experts and is accredited by the Joint Commission and have partnered with the National Science Foundation. Workit Health offers three tiers of programs to address addiction at every level: evaluation and prevention; telehealth intensive outpatient; and a Workit Clinic program that offers telemat opioid addiction treatment with medication (like buprenorphine) and online therapy.