

2008 Innovations Awards Program APPLICATION

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ID # (assigned by CSG): 08-S-15FL

Please provide the following information, adding space as necessary:

State: Florida – Department of Children and Families

Assign Program Category (applicant): Children and Families

1. Program Name

Medication-Assisted Treatment

2. Administering Agency

Department of Children and Families

3. Contact Person (Name and Title)

William H. Janes, Assistant Secretary for Substance Abuse and Mental Health

4. Address

Department of Children and Families
Substance Abuse and Mental Health Program Office
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8. Web site Address

Not applicable

9. Please provide a two-sentence description of the program.

During the first year, medication-assisted treatment (Vivitrol medication) was introduced as an evidence-based practice at 3 provider agencies with 40 participants.

Results of the use of Vivitrol have been dramatic, reducing number of heavy drinking days from 20.6 days to 0.6 days of heavy drinking after the second injection, and reducing urge to drink from a high of 20.6 to a low of 0.5 (out of a possible 30).

10. How long has this program been operational (month and year)? Note: the program must be between 9 months and 5 years old on March 1, 2008 to be considered.

The program has been operational since October, 2006.

11. Why was the program created? What problem[s] or issue[s] was it designed to address?

Florida provides substance abuse services to more than 100,000 individuals annually. Of those, more than 34% of the adults admitted for treatment indicate their primary drug of choice is alcohol. Nearly 24,000 persons are admitted for detoxification services in Florida each year. More than 11,000 persons receiving substance abuse treatment services report problems with alcohol abuse. Of that group, more than 4,000 have experienced multiple admissions for treatment. More than 1,700 of those individuals have been admitted more than two times previously.

12. Describe the specific activities and operations of the program in chronological order.

- In October 2006, the Department received an Advancing Recovery grant from the Robert Wood Johnson Foundation to identify and address clinical and business practices that impede the use of evidence-based practices within the alcohol and other drug treatment system. The Department serves as the lead statewide agency for the Foundation's, Advancing Recovery Project.
- During year one of implementation, medication-assisted treatment was introduced as an evidence-based practice at three provider agencies.
- Since implementation of this project, more than 300 staff persons have received education on the use of Vivitrol as a treatment for alcoholism.
- Through December 2007, more than 40 individuals have begun treatment with Vivitrol and have shown drastic results.
- Both the Robert Wood Johnson and Strengthening Treatment Access and Retention projects will additionally support and support the development of the Florida Learning System.

13. Why is the program a new and creative approach or method?

Traditionally, the state has not relied on medication for the treatment of substance abuse other than in the methadone treatment clinics. Florida's aim is to increase client retention in substance abuse treatment through the use of Vivitrol for the treatment of alcoholism. The use of medications is in conjunction with therapies. This initiative represents a significant philosophical shift in the area of substance abuse treatment. This demonstration has shown dramatic results. These results, if extrapolated to the 4,000 adults with multiple admissions for alcohol treatment, represent a breakthrough in combating alcohol dependency.

14. What were the program's start-up costs? (Provide details about specific purchases for the program staffing needs and other financial expenditures, as well as existing materials, technology and staff already in place.)

The state used the bulk purchasing agreement of the state mental health hospital to purchase the medications (\$140,000) as well as the infrastructure of their facility pharmacy within existing state resources. Training and travel paid by the grant.

15. What are the program's annual operational costs?

To be determined. These are new projects. The Department is conducting a cost-benefit analysis on the use of Vivitrol.

16. How is the program funded?

The program is funded through an Advancing Recovery Grant from the Robert Wood Johnson foundation.

17. Did this program require the passage of legislation, executive order or regulations? If YES, please indicate the citation number.

The program did not require the passage of legislation. However, the Federal Drug Administration (FDA) had to approve the use of medications for alcohol dependency. The FDA approved four medications to date, including Vivitrol.

18. What equipment, technology and software are used to operate and administer this program?

The use of evidence-based practices is strengthened by the Florida Learning System, a strategic management design that enable the program to continuously review statewide service trends, needs profiles, service delivery, monitoring results/trends, performance outcomes, and resource utilization.

19. To the best of your knowledge, did this program originate in your state? If YES, please indicate the innovator's name, present address, telephone number and e-mail address.

No.

20. Are you aware of similar programs in other states? If YES, which ones and how does this program differ?

This is a new evidence-based practice being used in approximately six other states with Advancy Recovery grants.

21. Has the program been fully implemented? If NO, what actions remain to be taken?

The initial implementation involved staff training, and use of Vivitrol with 40 participants. More widespread use of Vivitrol would strengthen results.

22. Briefly evaluate (pro and con) the program's effectiveness in addressing the defined problem[s] or issue[s]. Provide tangible examples.

Results of the use of Vivitrol have been dramatic:

- The average (mean) number of heavy drinking days drops quite dramatically after the first shot. From 20.6 days of heavy drinking to an average of 0.6 days after the second injection.
- Similarly, the urge to drink scores (out of a possible 30) also dropped with the use of Vivitrol, from a high of 20.6 to a low of 0.5.

23. How has the program grown and/or changed since its inception?

The program has provided staff training to 300 employees at three community provider agencies and has served 40 participants since inception.

24. What limitations or obstacles might other states expect to encounter if they attempt to adopt this program?

Vivitrol has been approved by the FDA but is not yet on the Medicaid formulary. Access to Vivitrol by Medicaid-eligible individuals is key.