MATPharm: A Collaborative Care Model for Addiction Treatment in Pharmacies

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Aim: Even as opioid overdoses increase, the demand for medications for addiction treatment (MAT) vastly exceeds availability. This pilot study determined the feasibility of providing pharmacy-based MAT care to 11 patients with opioid use disorder, and to consider adaptations of this model to increase MAT access during COVID-19.

Methods: In Rhode Island, a pharmacist collaborative practice agreement (CPA) for MAT care was adapted from an existing nurse case manager office-based model. Once approved by state officials, we trained 17 pharmacists in MAT care provision principles using a customized 20-hour online and in-person course adapted from national curricula. We enrolled 11 patients receiving buprenorphine maintenance doses who visited the study pharmacy at least weekly for one month. Study assessments were in-person and included self-reported behavioral measures of drug use, safety, and social and health stability and clinical measures such as drug toxicology, counseling, and pharmacy visit attendance. Feasibility was assessed from patients as well as from pharmacists delivering the intervention through a self-reported Likert-scale item. During the COVID-19 crisis, state and community concerns for broader MAT care brought about further approved CPA adaptations.

Results: Eleven patients (45% women, 40% non-white race) aged 23 to 60 years completed 70 clinic visits at two locations. Patients with mandated counseling and other requirements continued outside the pharmacy. All pharmacists rated the CPA model feasible; patients rated the care receipt highly. Patients noted efficient care, flexibility, family-friendly setting, and low perceived stigma of the pharmacy experience. During COVID-19, changes in permissions from DEA/SAMHSA led to expanding the CPA to support withdrawal care management and pharmacist-facilitated induction.

Conclusions: Findings suggest that a MAT CPA care model is feasible and safe for patients and pharmacists. This model proves the value of pharmacists as part of the OUD patient care team to meet the dynamic needs of patients in the COVID-19 pandemic.

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