



MOUD Treatment in Rural East Tennessee

Why would this be different than in urban areas?

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Understanding the Rural Community

- **It is important to understand that many areas of rural Tennessee can be vastly different than their urban counterparts in the State.**
 - There is a strong sense of “family”
 - Many families rely on agriculture as their employment
 - Often continuing education may not be a priority
 - With the lack of industry, many rural Tennesseans have Government funded health insurance such as TennCare or Marketplace plans
 - This lack of industry can also lead to lower socio-economic status as most of the top paying jobs are in the urban areas.
 - Travel to and from more urban areas can be a time-consuming challenge
 - Many have very strong Religious beliefs

What are the barriers?

Distance

- *Rural communities often have worse health outcomes related to SUD compared to urban communities.*
- *Urban areas see about 31.4% of all treatment admissions compared to the most rural areas, which see 7.2% of admissions.*

Stigma

- *The sense that something is shameful, may be felt more acutely in small rural towns because of the relative lack of anonymity.*
- *In a small town it is more likely that people will know that a person visited a certain provider for help.*
- *Some people believe that treating addiction with these drugs simply substitutes one substance for another.*

Insurance Coverage

Without industry, there is little opportunity for “commercial coverage plans”, so Government funded plans are much more prevalent and with lower reimbursement not all facilities will accept those plans.

Education Level

“Stigma will fade in the face of education about the negative impacts of untreated addiction on families and communities”.

Harm Reduction

- As it relates to substance use, harm reduction is not an alternative to abstinence or treatment (just as using a seatbelt is not an alternative to careful driving). Rather, it is part of a continuum of options that helps reduce the risk of death and other negative health consequences stemming from substance use
- Because methadone and buprenorphine are opioids, some people believe that treating addiction with these drugs simply substitutes one substance for another.
- Evidence-based treatment has proven that when patients take these medications as prescribed, they are more likely to maintain employment, avoid criminal behavior, and reduce their exposure to HIV by injection or substance-related high-risk sexual behaviors.
- They are also more likely to engage in counseling and other behavioral interventions that improve their recovery.
- MOUD has reduced heroin use, crime, and HIV and hepatitis C infection
- MOUD has prevented people from suffering a fatal overdose.
- MOUD has made communities safer and allowed people to rejoin society

Goals of Treatment

- Research shows that a combination of medication and therapy can successfully treat substance use disorders, and for some medications can help sustain recovery. Medications are also used to prevent or reduce opioid overdose.
- The ultimate goal is full recovery, including the ability to live a self-directed life. This treatment approach has been shown to:
 - Improve patient survival
 - Increase retention in treatment
 - Decrease illicit opiate use and other criminal activity among people with substance use disorders
 - Increase patients' ability to gain and maintain employment
 - Improve birth outcomes among women who have substance use disorders and are pregnant

MOUD Treatment at Myrtle Recovery Centers, Inc. (MRCI)

- MRCI is a unique facility.
 - We are located in a very rural area. Oneida, in Scott Co TN.
 - We occupied an unused area of a critical access hospital.
 - This allows MRCI to have a fully functional emergency department within 50 feet of the inpatient facility.
 - This proximity to an emergency department allows us to accept patients with pre-existing health conditions that would preclude them from most treatment facilities.
 - We are fully wheelchair accessible since the patient rooms are former hospital rooms.
 - Many of the rooms are fully ADA acceptable.
 - We accept patients with TennCare as well as most of the Market Place insurance plans.



MOUD For Inpatient

- In the “not too distant past” use of medications to manage withdrawal symptoms of OUD were generally symptom focused.
- The use of buprenorphine to alleviate withdrawal symptoms was uncommon (the thought of changing from one drug to another)
- With more potent opioids such as Fentanyl as well as the increase in the amount of milligram usage, the withdrawal symptoms increased significantly.
 - This makes stopping opioid use extremely difficult as withdrawal symptoms often cause patients to leave treatment without some relief of symptoms
- Often patients will either taper off the buprenorphine prior to discharge, or will have outpatient aftercare set up before discharge

MOUD Treatment in the MRCI OBOT

- Understanding both the need as well as the barriers for MOUD treatment in rural areas, we developed an Office Based Opioid Treatment (OBOT) facility for patients located in the rural areas in and surrounding Scott Co.
- This allows our local inpatients an opportunity to receive aftercare treatment in their local community.

MOUD Treatment is more than Medication

- Understanding that addiction is a chronic illness, there is more to treatment than taking “a pill”
- MRCI provides intense counseling sessions that include:
 - Individual sessions
 - Group sessions
 - Family sessions
- We provide case management services that not only work with the patient with any current situation (legal, social issue, and or physical needs), but work hand in hand with the patient to develop a strong after care plan that would include:
 - Post D/C treatment (MOUD/IOP/PHP/Sober Living)
 - Housing needs (shelters/sober living facility)
 - Probation concerns if warranted
 - Follow appointments with primary care provider and behavioral health provider if warranted
 - Any specialty appointment that may be warranted as well



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