

SPOTLIGHT: Care Alliance for Opioid Addiction the Hub and Spoke Model



Program

In 2012, the state of Vermont created the Hub and Spoke model for opioid addiction -- regional, specialized addiction treatment centers working in meaningful clinical collaboration with general medicine. This is formally referred to as the Care Alliance for Opioid Addiction and has five hubs, and nine different program sites in total, with a sixth hub coming online this spring. These hubs deliver intensive treatment to patients with opioid use disorder while the “spokes” throughout the state consist of a three-person primary care team with a care coordinator, clinician, and physician.

There are upwards of 190 spoke physicians with an embedded staff of more than 50 full time employees assisting them. The clinicians are licensed behavioral health providers similar to alcohol and drug counselors, or licensed social workers for example.

The “hub and spoke” model does not reinvent the wheel. It weaves together existing infrastructure already dispensing substance use disorder medication including Federally Qualified Health Centers, methadone clinics, Office-Based Opioid Treatment and more. Communication is king, and bringing together these groups already engaged in this work has been critical to making this program a success.

The need for the program arose as the State witnessed an increase in opioid and heroin-related use, and rising mortality related to the increase in usage. To combat this, individuals within three key governmental agencies – the Vermont Blueprint for Health, the Department of Vermont Health Access Medicaid Health Services and Managed Care Division, and the Vermont Department of Health’s Division of Alcohol and Drug Abuse Programs -- came together with local social service groups, addiction specialists, and doctors to work on a program to address the State’s specific needs, resulting in this model.

How it works

Individuals come to the Care Alliance for Opioid Addiction in a variety of ways—a self-referral, their physician, a counselor, or through the court system, as well as other pathways.

“As evidenced by high rates of access to treatment, the decrease in overdoses, and the active buy-in from local, state and federal partners, the bright future of this program gives me reason to be optimistic about our efforts to address this public health emergency.”

– Barbara Cimaglio, Deputy Commissioner,
Vermont Department of Health

Building on the concept first introduced by Vermont physician Dr. John Brooklyn, Hub and Spoke creates specialized, regional addiction treatment centers, the “hubs”, working in coordination with general medicine and other supports locally to create a continuum of care. The Hubs located throughout the state are specialized addiction treatment centers and prescribe medication assisted treatment (MAT), like methadone, naltrexone or buprenorphine, and connect patients directly with their “spoke”.

The “spokes” include multipronged services to address opioid addiction, bringing in general medicine along with a continuum of care for recovery support. The most common Spoke practice settings are primary care, ob-gyn, psychiatry, and pain management practices. Under Hub and Spoke, each patient undergoing MAT has an established medical home, a single MAT prescriber, a pharmacy home, and access to Hub or Spoke nurses and clinicians. Each individual has a unique plan overseen by a doctor and buttressed by the clinical team that connects the patient with community-based support services.

In working to address the underlying issues associated with the substance use disorder, the patient may be referred to mental health treatment, job placement, and/or family and recovery support.

Hub and Spoke has also implemented regional prevention efforts, drug take back programs, intervention services through prescription drug monitoring, recovery services at eleven Recovery Centers, and the distribution of Naloxone rescue kits for overdose reversal.

Spotlight Series: highlighting innovative programs across the nation enacting a comprehensive strategy to address substance use disorders and addiction.

How is this program innovative?

Hub and Spoke creates a coordinated, reciprocal clinical connection between specialty addiction treatment centers and general medical practice. The model not only expands medication assisted treatment for individuals with opioid addictions, it creates a framework for integrating treatment for addiction into general medicine, while expanding the recovery support and continuum of care needed to improve outcomes.

While many programs offer counseling, this model specifically provides intensive support from the staff of nurses, counselors and physicians to the patient to address all potential needs. The bi-directional referral of patients between the Hubs and Spokes attempts to replicate other medical specialties, with those individuals experiencing the highest level need related to their opioid use disorder, or the least amount of stability, able to be seen in Hubs while those individuals who achieve or present with higher levels of stability able to be seen in spokes. As individuals in the Hubs on buprenorphine stabilize they can be referred to spokes, and should a patient in the Spokes experience acute difficulties/destabilize, they can be referred back to the Hubs for stabilization.

Demonstrating Success

Since the implementation of Hub and Spoke, Vermont has improved access to care and the integration of addiction treatment into healthcare. People are being retained in treatment and report improved functioning after discharge.

The state has continued to see a decline in all age groups reporting misuse of a prescription pain relievers in the past year. At the same time, the number of Vermonters receiving treatment for opioid abuse and dependence has significantly increased, a direct result of the expansion of care through the Hub and Spoke Model. Also since 2012, fatalities related to an overdose in prescription opioids have remained stable, after having risen in the years prior.

Stakeholders and Partners

There are 7 hubs participating in the program:

- Howard Center/Chittenden Clinic
 - Operates two locations: Burlington and South Burlington

“The time has come for us to stop quietly averting our eyes from the growing heroin addiction in our front yards, while we fear and fight treatment facilities in our backyards.”

– Peter Shumlin, Governor

- BAART Behavioral Health Services
 - Operates two locations: Newport and St. Johnsbury
- Central Vermont Addiction Medicine
- West Ridge Center for Addiction Recovery
- Brattleboro Retreat
- Habit OPCO
 - Operates two locations: Brattleboro and West Lebanon

State government involvement includes the legislature, the governor’s office, and six different State departments such as the Departments of Mental Health, Corrections, and Health. At a more micro level, there are local partners that play a role; from federally qualified health centers to housing authorities, hospitals, police agencies and recovery centers, to name a few.

The Future of the Program

Vermont continues to take legislative and executive action to enhance both the Hub and Spoke model, as well as to combat the opioid epidemic more broadly. Just last year, Act 173 was signed into law that strengthened prescribing guidelines and funded access to naloxone statewide. As a result of these legislative changes, the State’s Health Department updated its rules for MAT for office-based opioid treatment providers, like the ones included in the Care Alliance for Opioid Addiction program.

As evidenced by its high rates of access to treatment, the decrease in overdoses, and broad buy-in from local, State, and federal actors, the program will continue to work to decrease overdose rates and increase recovery among Vermonters.

Resources & References

“Medication Assisted Treatment Resources.” *Health Vermont*. State of Vermont, 2017. Web. 12 Feb. 2017.

“Care Alliance for Opioid Addiction.” *Health Vermont*. State of Vermont, n.d. Web. 27 Jan. 2017.

“Alcohol and Drug Abuse.” *Health Vermont*. State of Vermont, n.d. Web. 27 Jan. 2017