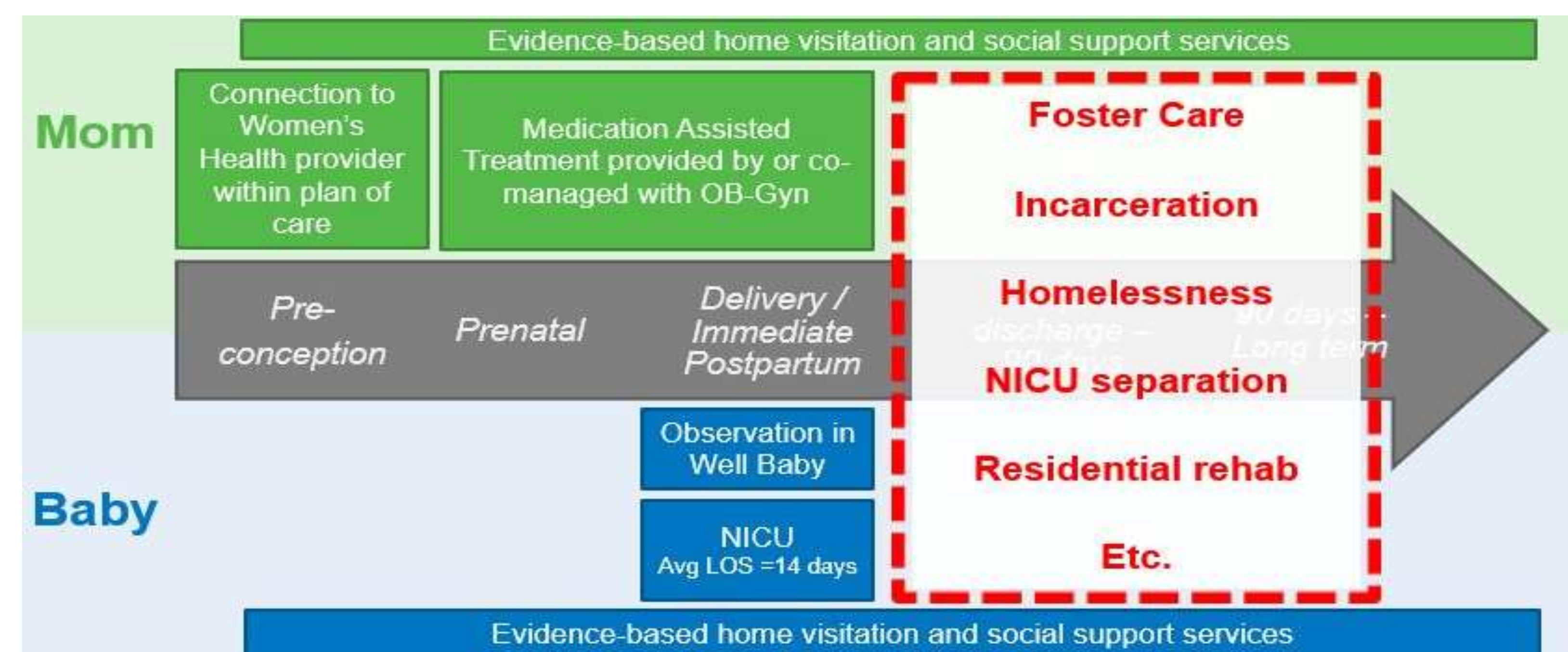
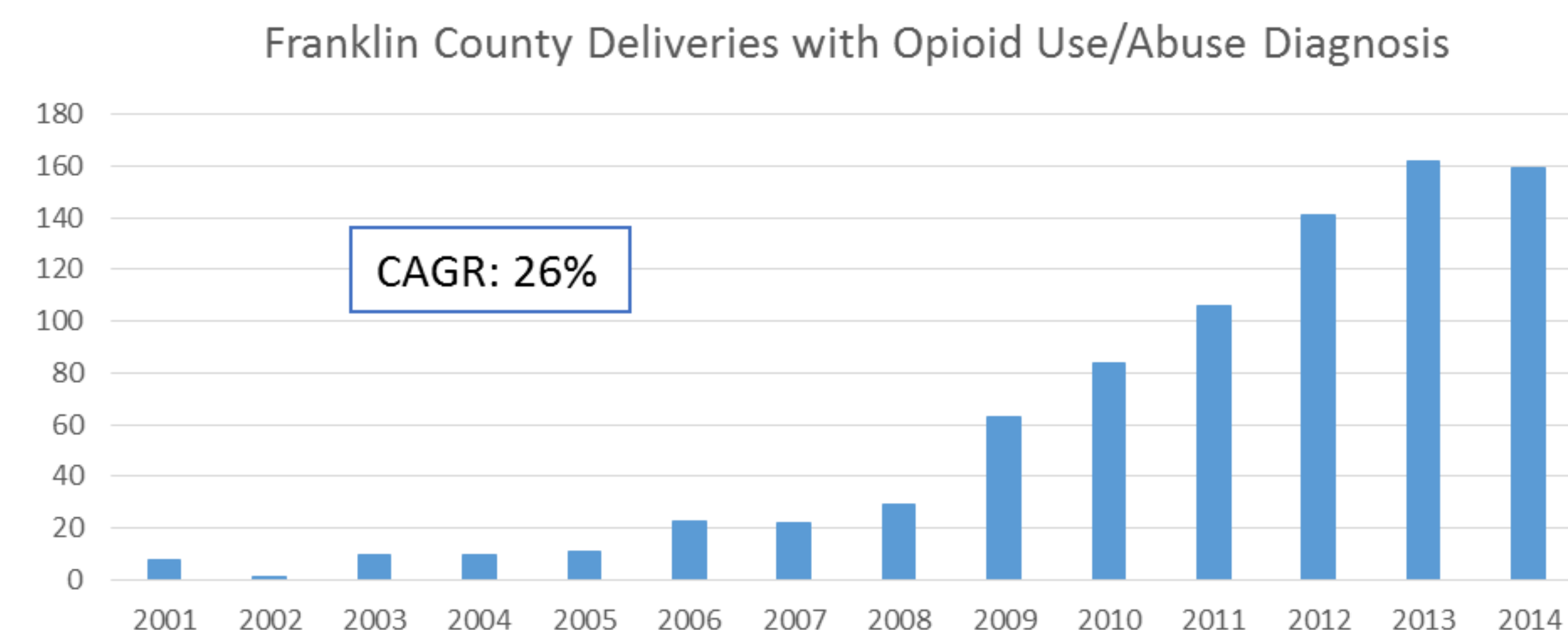


Background

- The Opioid epidemic continues to be a priority for Ohio legislators and healthcare officials
- Ohio Department of Medicaid has announced support for NAS dyad care models to reduce infant and mother morbidity/mortality



Opportunity

Care Model

- Create an integrated "step-down" model where mom obtains residential addiction treatment and baby receives supportive care
- Mother maintains custody of baby
- Include enrollment into evidence-based home visitation
- Equip mother with strategies for success in caring for infant, life skills and ultimate independence

Reimbursement Model

- Short-term: Community, private funding, grant opportunities
- Long-term: Create Medicaid amendment to establish payment mechanism for dyad care

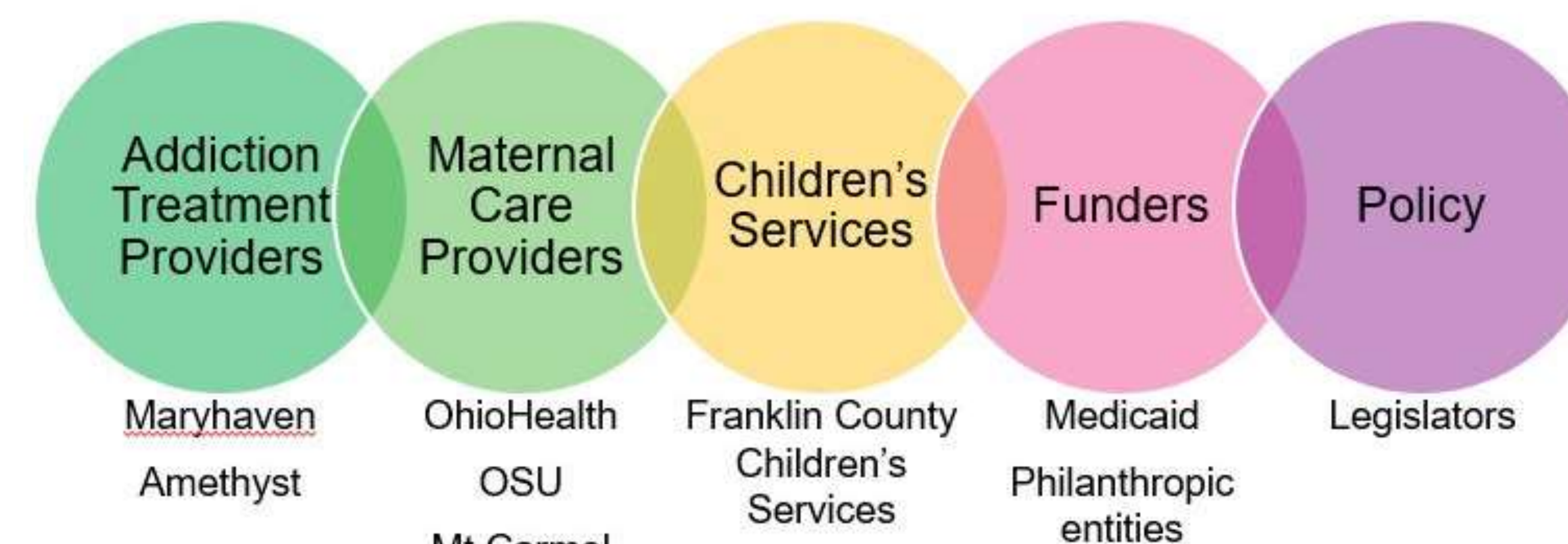
Methods

Universal Testing

- Engage Central Ohio Hospital Association
- Education of Obstetricians, Pediatricians, OB Directors
- Development of Community Guidelines

Mother/Infant Dyad Program

- Needs Gap Assessment
- Business Plan Development
- Discussions with Community Partners
 - ADAMH Board
 - Mary Haven- Women Resource Center
 - Children Services
 - Clinicians (OB, Peds and Mental Health)
 - Medicaid



Postpartum Care Models

Rooming-in Model

Previous

- Limited maternal focus
- Only covers immediate postpartum period

Hybrid Model

Our Aim

- Reimbursement and space

24/7 Residential

Future

- Reimbursement and space

Results

Universal Testing

- CEOs from 4 central Ohio hospital systems approve community guidelines
- Each hospital system establishing process to test
- Education to community stakeholders including pregnant women
- Universal testing to begin January 4th

Hybrid Model

Mom
Residential/
Outpatient

- Medication management
- Group therapy x3-5 per week
- Individual therapy x1-2 per week
- Ongoing planning and engagement with care manager/discharge planner
- Parenting education and wellness activities

Leverage Existing Community Program

Goals

- Reduced maternal mortality
- Engagement in treatment
- Safe spacing
- Continued custody
- Cont'd benefits enrollment
- Stable relationships

Baby
Inpatient

- Daily rounding including medication management
- New baby education
- Participation in home visiting

Lower Acuity Care Setting

Goals

- Decreased length of stay
- Managing without medical treatment
- Decreased days on medication
- Reduced infant mortality

Discussion

- Integrate care with community partners
- Demonstration implementation
- Financial sustainability
- Future scalability

