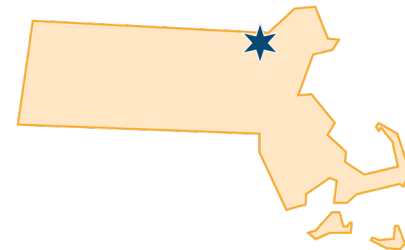
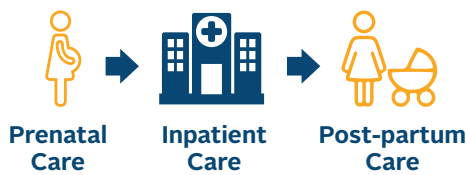


CARE MODEL

Lowell General Hospital's (LGH) initiative incorporates an inpatient quality improvement program emphasizing non-pharmacologic treatment for newborns exposed to opioids and a multi-pronged outpatient approach. The inpatient initiative provides care through increased rates of breastfeeding, encouraging skin-to-skin contact between infants and their families, and decreasing environmental stimuli to offer a more soothing setting for newborn care. LGH utilizes the Eat, Sleep, Console model for monitoring and scoring infant withdrawal symptoms. The LGH team works closely with Early Intervention providers, who offer access to developmental services at home for at least the first year of an infant's life. The

outpatient initiative, "HPC Moms Do Care – Lowell," expands access to prenatal care and medication assisted treatment for pregnant women with opioid use disorder (OUD). LGH's model provides behavioral health counseling and peer support for women with OUD for six months post-partum. This initiative integrates care between the emergency department and outpatient providers of pharmacologic treatment and behavioral health services, and provides education on trauma-informed care, the science of addiction, and self-care strategies for staff who work with patients with a substance use disorder.



IMPACT

\$999K
HPC AWARD

TARGET POPULATION
Inpatient: All opioid-exposed infants monitored for NAS
Outpatient: Pregnant women who test positive for OUD

TECHNICAL ASSISTANCE PARTNERS
NeoQIC
MA Department of Public Health
Institute for Health and Recovery
Advocates for Human Potential

PRIMARY AND SECONDARY AIMS:

Inpatient



↓ 15%

inpatient length of stay

Outpatient



↑ 20%

utilization of pharmacologic treatment

HCII PATHWAY SUMMARY & HPC BACKGROUND

In 2016, the Massachusetts Health Policy Commission (HPC) launched its \$3 million Mother and Infant-Focused Neonatal Abstinence Syndrome (NAS) Interventions, a pathway of the HPC's Health Care Innovation Investment (HCII) Program. The NAS Interventions aim to contribute to the Commonwealth's nation-leading efforts to address the opioid epidemic by supporting enhanced care and treatment for mothers and infants impacted by opioid use. The six NAS initiatives develop or enhance programs for opioid-exposed infants at risk of developing NAS and pregnant and postpartum women with opioid use disorder through a dyadic care model, providing rooming-in care for the mother and infant for the duration of the infant's inpatient stay. Many initiatives also offer integrated pre- and postnatal supports, including coordinated

access to behavioral health care, medication assisted treatment, education and support for breastfeeding, and early intervention programming for full family care both in the hospital and in the community after discharge.

The Massachusetts Health Policy Commission (HPC), established in 2012, is an independent state agency charged with monitoring health care spending growth in Massachusetts and providing data-driven policy recommendations regarding health care delivery and payment system reform. The HPC's mission is to advance a more transparent, accountable, and innovative health care system through independent policy leadership and investment programs. Visit us at Mass.gov/HPC. Tweet us @Mass_HPC.