Increasing Access to Medications for Opioid Use Disorder (MOUD) within CCBHCs:

Low-Barrier Approaches and Strategies

June 24, 2025

CCBHC S-TAC

CCBHC State Technical Assistance Center

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Today's Agenda

- Welcome & Introductions
- What is Low-Barrier MOUD and Why Is It Important?
- Assessing the Barriers to MOUD
- Approaches and Strategies to Increase Access to MOUD
- Q&A and Closing

Webinar Objectives

By the end of this 2-part series, participants will:

- Increase knowledge and understanding of why and how medications are used to treat OUD within the CCBHC model, the importance of ensuring low-barrier care to improve access, and how to apply this knowledge to program implementation.
- Identify systemic and other barriers to rapid access to MOUD for individuals served in CCBHCs.
- Identify appropriate strategies to provide and incentivize low-barrier care within CCBHCs, utilizing examples of successful models designed to improve access from a clinic and state policy staff perspective.

Today's Presenters

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What is Low-barrier MOUD and Why Is It Important?

What Is Low Barrier/Threshold Care?

"Low barrier care reduces requirements and restrictions that may limit access to care and increases access to treatment for individuals with substance use disorders. This approach meets individuals where they are and helps provide culturally sensitive care tailored to the unique circumstances and challenges that each person faces." – 2023 SAMHSA Advisory

Source: Substance Abuse and Mental Health Services Administration. (2023). Low barrier models of care for substance use disorders (Advisory Publication No. PEP23-02-00-005). U.S. Department of Health and Human Services. https://library.samhsa.gov/sites/default/files/advisory-low-barrier-models-of-care-pep23-02-00-005.pdf

Current Trends: Substance Use

107,543 drug overdose deaths in 2023 (3% decrease from 2022).[1]

In 2023, **48.5 million** people had a SUD. The vast majority receive no treatment (39.6 million).[2]

An estimated **56,743** opioid overdose deaths are projected in 2024.[3]

Yet, medications for SUD treatment are underutilized. **Only 1 in 5** with an opioid use disorder receive medications.[4]

Sources:
1. National Center for Health Statistics. (2024, May 15). U.S. overdose deaths decrease in 2023, first time since 2018 [Press release]. Centers for Disease Control and Prevention. https://www.cdc.gov/nchs/pressroom/nchs_press_releases/2024/20240515.htm
2. Substance Abuse and Mental Health Services Administration. (2024). Key substance use and mental health indicators in the United States: Results from the 2023 National Survey on Drug Use and Health. https://www.samhsa.gov/data/sites/default/files/reports/rpt47095/National%20Report/National%20Report/2023-nsduh-annual-national.pdf
3. Ahmad, F. B., Cisewski, J. A., Rossen, L. M., & Sutton, P. (2025). Provisional drug overdose death counts. National Center for Health Statistics. https://dx.doi.org/10.15620/cdc/20250305008
4. Jones, C. M., Han, B., Baldwin, G. T., Einstein, E. B., & Compton, W. M. (2023). Use of medication for opioid use disorder among adults with past-year opioid use disorder in the US, 2021. JAMA Network Open, 6(8), e2327488. https://doi.org/10.1001/jamanetworkopen.2023.27488

Barriers to the Use of Addiction Medications

- Stigma
- Treatment experience
- Transportation/ Logistics
- System-imposed barriers
- Program Rules/Level of program flexibility
- Program Availability
- Knowledge and Education

Sources:
1. Mackey, K., Veazie, S., Anderson, J., Bourne, D., & Peterson, K. (2020). Barriers and facilitators to the use of medications for opioid use disorder: A rapid review. Journal of General Internal Medicine, 35(Suppl 3), 954–963. https://doi.org/10.1007/s11606-020-06257-4
2. T.J. Stopka, A.T. Estadt, G. Leichtling, J.C. Schleicher, L.S. Mixson, J. Bresett, E. Romo, P. Dowd, S.M. Walters, A.M. Young, W. Zule, P.D. Friedmann, V.F. Go, R. Baker, R.J. Fredericksen, Barriers to opioid use disorder treatment among people who use drugs in the rural United States: A qualitative, multi-site study, Social Science & Medicine, Volume 346, 2024, 116660, ISSN 0277-9536, https://doi.org/10.1016/j.socscimed.2024.116660

CCBHC Success: Improving Access to Medications

Data from the 2024 CCBHC Impact Survey indicated that:

- 87% of Medicaid CCBHCs and established grantees offer one or more medications for opioid use disorder, compared to 64% of substance use treatment facilities nationwide.
- 62% of CCBHCs and established grantees offered at least 2 forms of OUD medications.
- 68% of CCBHCs reported that the number of clients receiving medications for opioid use disorder has increased since becoming a CCBHC, with 29% reporting increases of 20% or higher.

Source: The National Council for Mental Wellbeing. (2024). 2024 CCBHC Impact Report. https://www.thenationalcouncil.org/resources/2024-ccbhc-impact-report/

Assessing the Barriers to MOUD

Identify Barriers to MOUD

States can work with clinics to identify unique and/or cross-cutting barriers to MOUD through community and organizational assessments:

- CCBHC Community Needs Assessment
- Organizational Assessment
  - Outreach and engagement methods
  - Admissions process
  - Service requirements
  - Workforce availability and training

Sources: Substance Abuse and Mental Health Services Administration (SAMHSA): Increasing Access to Medications for Opioid Use Disorder (MOUD): Low-Threshold MOUD Approaches and Strategies. Publication No. PEP25-02-011 Substance Abuse and Mental Health Services Administration, 2025.

CCBHC Needs Assessment

States Can Consider Enhancing Assessments to Capture MOUD Specific Data

Questions to Consider:

- Do individuals with OUD have adequate access to services?
- Who is not receiving MOUD, e.g., pregnant women, young adults, older adults?
- What barriers stand in their way, e.g., lack of knowledge, transportation, service location, and service hours?
- Are all three MOUD available in CCBHCs and through DCOs or other service providers in the community ?

Organizational Assessment – Outreach

States can consider requiring or promoting these methods

Questions to Consider:

- Does outreach staff regularly visit places where people use opioids?
- Are peers used to engage individuals with OUD?
- Do clinics use social media and advertising to promote MOUD availability?
- Is transportation available?
- Are home visits utilized?
- Do clinics partner with other prevention and recovery support organizations to promote MOUD?

Organizational Assessment – Admission Process

States can consider requiring or promoting these methods

Questions to Consider:

- Is the clinic open beyond “business hours”?
- How long does it take from initial encounter to first dose?
- Can MOUD induction be completed in one visit?
- Can any part of the process be handled virtually?
- Can staff explain the process?
- What documentation is required from the person? Can it be reduced?
- Where and how are medical assessments done? Can the process be shortened?

Organizational Assessment – Service Requirements

States can consider requiring or promoting these methods

Questions to Consider:

- Is MOUD allowed without the initiation of counseling?
- Can the staff explain all treatment and medication options?
- Is the patient encouraged and empowered to participate in treatment planning?
- Is drug screening used in a therapeutic rather than punitive manner?
- Are all FDA-approved medications available, via DCOs and other providers?
- Are clinically-approved take-home options available for methadone?

Sources: Substance Abuse and Mental Health Services Administration (SAMHSA): Increasing Access to Medications for Opioid Use Disorder (MOUD): Low-Threshold MOUD Approaches and Strategies. Publication No. PEP25-02-011 Substance Abuse and Mental Health Services Administration, 2025.

Organizational Assessment – Workforce Availability/Training

States can consider requiring or promoting these methods

Questions to Consider:

- Is staff up-to-date on the latest opioid trends and “emerging threats”?
- Is staff familiar with the benefits of the three FDA-approved medications and their side-effects?
- Does the clinic have available prescribers and necessary staff for injectables?
- Is the staff trained in Motivational Interviewing techniques to encourage MOUD where appropriate?

Source: Substance Abuse and Mental Health Services Administration (SAMHSA): Increasing Access to Medications for Opioid Use Disorder (MOUD): Low-Threshold MOUD Approaches and Strategies. Publication No. PEP25-02-011 Substance Abuse and Mental Health Services Administration, 2025.

Help clinics identify the
“trip points” BEFORE deciding what strategies and approaches to try.

Approaches and Strategies to Increase Access to MOUD

Principles that Guide Low-Barrier MOUD Care

- Same-day treatment entry and medication access
- Flexibility in the initiation of medication
- Wide availability in places to go for people with OUD

Sources: Substance Abuse and Mental Health Services Administration (SAMHSA): *Increasing Access to Medications for Opioid Use Disorder (MOUD): Low-Threshold MOUD Approaches and Strategies.* Publication No. PEP25-02-011 Substance Abuse and Mental Health Services Administration, 2025.

State Approaches to Support Low-barrier Care

- Facilitate partnerships
- Support flexibility in regulatory and contractual requirements
- Recommend new or modified practices
- Provide training and technical assistance
- Track and monitor services, (e.g., MOUD prescribed, utilized, time to initiation) to promote systems improvement

Sources: Substance Abuse and Mental Health Services Administration (SAMHSA): *Increasing Access to Medications for Opioid Use Disorder (MOUD): Low-Threshold MOUD Approaches and Strategies.* Publication No. PEP25-02-011 Substance Abuse and Mental Health Services Administration, 2025.

Ultimately, low-barrier care creates a welcoming, non-judgmental, and accepting environment to meet people where they are.

Strategies to Improve Access to MOUD

Reduce requirements to begin MOUD

Improve access to comprehensive care

Expand locations, hours, and methods

Sources: Substance Abuse and Mental Health Services Administration (SAMHSA): *Increasing Access to Medications for Opioid Use Disorder (MOUD): Low-Threshold MOUD Approaches and Strategies.* Publication No. PEP25-02-011 Substance Abuse and Mental Health Services Administration, 2025.

Reduce Requirements to Receive MOUD

Up-front requirements can delay initiation of treatment and sometimes discourage individuals from considering or starting MOUD if they see them as overwhelming.

Sources: Substance Abuse and Mental Health Services Administration (SAMHSA): *Increasing Access to Medications for Opioid Use Disorder (MOUD): Low-Threshold MOUD Approaches and Strategies.* Publication No. PEP25-02-011 Substance Abuse and Mental Health Services Administration, 2025.

Reduce Requirements to Receive MOUD

Actions states can take

- Review state level requirements that can impose barriers to rapid access to MOUD
- Work with clinics to eliminate and/or address
  - Restrictive and/or punitive policies
  - “Fail First” practices
  - Social determinants of health factors that might impact use of medications
- Work with state partners to reduce
  - Medication and formulary limitations
  - Prescriber restrictions

Sources: Substance Abuse and Mental Health Services Administration (SAMHSA): *Increasing Access to Medications for Opioid Use Disorder (MOUD): Low-Threshold MOUD Approaches and Strategies.* Publication No. PEP25-02-011 Substance Abuse and Mental Health Services Administration, 2025.

Flexible MOUD Requirements

Burrell Behavioral Health, MO

Provides comprehensive behavioral healthcare with flexible scheduling and reduced requirements as part of the Missouri Medication First Model.

- Individuals can walk in, call, chat, or text 988 to reach a crisis counselor 24/7
- Their workflow process generally takes less than 3 hours and includes
  - nursing assessment,
  - crisis screening, and
  - evaluation for other needed services

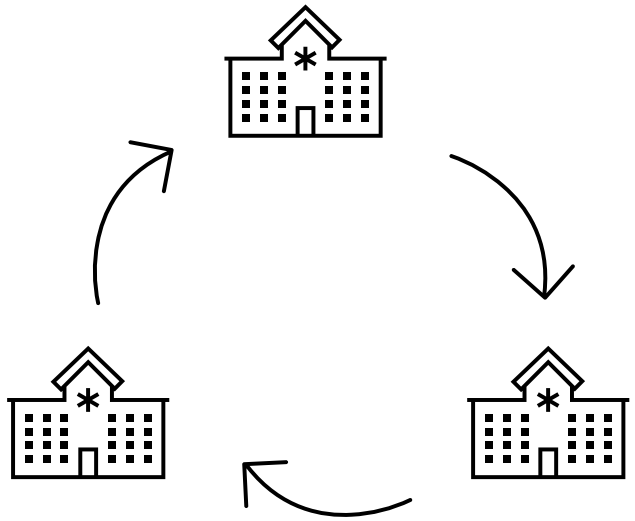
Principles of the Medication First Model

1. People with OUD receive pharmacotherapy treatment as quickly as possible, prior to lengthy assessments or treatment planning sessions.
2. Maintenance pharmacotherapy is delivered without arbitrary tapering or time limits.
3. Individualized psychosocial services are continually offered but are not required as a condition of pharmacotherapy.
4. Pharmacotherapy is discontinued only if it is worsening the person's condition.

Sources: Substance Abuse and Mental Health Services Administration (SAMHSA): *Increasing Access to Medications for Opioid Use Disorder (MOUD): Low-Threshold MOUD Approaches and Strategies.* Publication No. PEP25-02-011 Substance Abuse and Mental Health Services Administration, 2025.

Improve Access to Comprehensive Care

Many people with OUD have other health needs that go untreated and social needs that go unaddressed.



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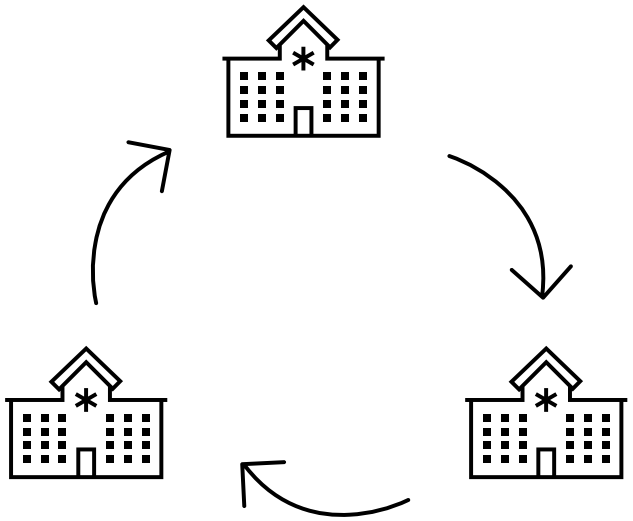
Improve Access to Comprehensive Care

Actions states can take:

- Collaborate with other state agencies/organizations to help clinics improve care coordination
- Review regulations and reporting requirements that may impede multiple service delivery options in one location



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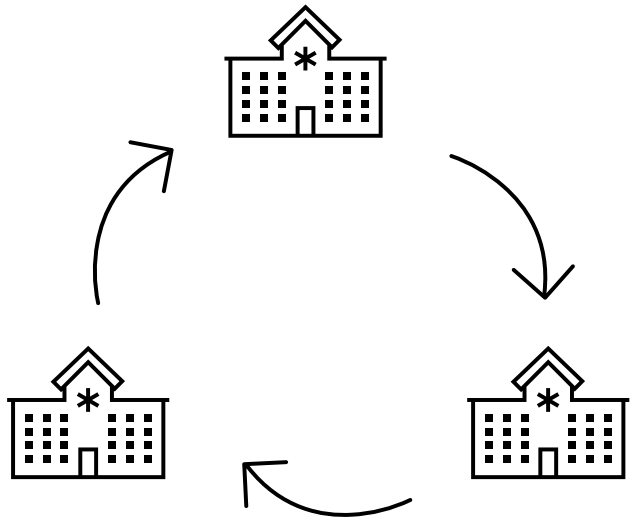
Improve Access to Comprehensive Care

Actions states can take:

- Help clinics explore DCO options and other collaboration opportunities to increase availability of all MOUDs
- Provide training on methods for delivering comprehensive care, including services delivered by peers
- Consider statewide directories to make “warm hand-off” referrals easier



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Improved Comprehensive and Coordinated Care

Columbia River Mental Health, WA

provides personalized behavioral and substance use treatment services to Southwest Washington including

- An Opioid Treatment Program (OTP) to improve ease of accessing services for MOUD including
  - methadone
  - buprenorphine
  - naltrexone
  - all injectables
- A Mobile health team (nurse, physician's assistant, clinician, and peer and case managers provide medical services, and referrals).

Sources: Columbia River Mental Health Services. https://crmhs.org/our-services/

Expand Locations, Hours, and Methods

- Services are often not close to communities with high levels of opioid use and/or overdose.
- Limited hours to receive information, screening, assessment, and treatment, can make access difficult.
- In-person requirements can constitute a barrier to care.

Sources: Substance Abuse and Mental Health Services Administration (SAMHSA): *Increasing Access to Medications for Opioid Use Disorder (MOUD): Low-Threshold MOUD Approaches and Strategies.* Publication No. PEP25-02-011 Substance Abuse and Mental Health Services Administration, 2025.

Expand Locations, Hours, and Methods

Actions states can take

- Help connect clinics with other providers like Opioid Treatment Programs (OTPs) with mobile medication units (MMUs) to ensure access to methadone, naltrexone, and buprenorphine.
- Ensure mobile crisis units can prescribe or connect individuals to MOUD.
- Review any state restrictions on “pop-up” or other temporary clinic spaces to increase flexibility to meet people where they are.

Sources: Substance Abuse and Mental Health Services Administration (SAMHSA): *Increasing Access to Medications for Opioid Use Disorder (MOUD): Low-Threshold MOUD Approaches and Strategies.* Publication No. PEP25-02-011 Substance Abuse and Mental Health Services Administration, 2025.

Expand Locations, Hours, and Methods

Actions states can take

- Help clinics implement non-traditional hours and/or encourage partnerships to offer expanded times
- Review state requirements for telehealth and other in-home services to ensure flexibility
- Connect clinics with resources and training to put telehealth services in place

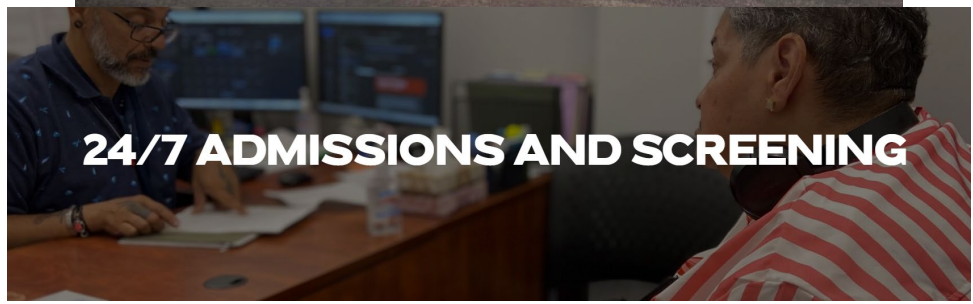
Sources: Substance Abuse and Mental Health Services Administration (SAMHSA): *Increasing Access to Medications for Opioid Use Disorder (MOUD): Low-Threshold MOUD Approaches and Strategies.* Publication No. PEP25-02-011 Substance Abuse and Mental Health Services Administration, 2025.

Expanded Locations and Hours

VIP Community Services, NY

Operates a CCBHC, Federally Qualified Health Center (FQHC), and OTP in the same location reducing barriers to accessing MOUD in the NYC boroughs. The clinic offers

- 24/7 admissions and screening
- All forms of MOUD--buprenorphine, methadone, and naltrexone
- Primary care
- A mobile medication unit (MMU)



Source: VIP Community Services. www.vipservices.org

These efforts to reduce overdoses and deaths require a collaborative approach involving states, clinics, those with lived experience, and policymakers.

Together we can:

1. Assess systems, organizations, and processes to identify barriers to care.

Sources: Substance Abuse and Mental Health Services Administration (SAMHSA): *Increasing Access to Medications for Opioid Use Disorder (MOUD): Low-Threshold MOUD Approaches and Strategies.* Publication No. PEP25-02-011 Substance Abuse and Mental Health Services Administration, 2025.

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Together we can:

2. Enhance partnerships to address state policy issues and support comprehensive services.

Sources: Substance Abuse and Mental Health Services Administration (SAMHSA): *Increasing Access to Medications for Opioid Use Disorder (MOUD): Low-Threshold MOUD Approaches and Strategies.* Publication No. PEP25-02-011 Substance Abuse and Mental Health Services Administration, 2025.

These efforts to reduce overdoses and deaths require a collaborative approach involving states, clinics, those with lived experience, and policymakers.

Together we can:

3. Review and incorporate increased flexibilities in policies, regulations, and programmatic requirements to minimize barriers and increase service engagement.

Sources: Substance Abuse and Mental Health Services Administration (SAMHSA): *Increasing Access to Medications for Opioid Use Disorder (MOUD): Low-Threshold MOUD Approaches and Strategies.* Publication No. PEP25-02-011 Substance Abuse and Mental Health Services Administration, 2025.

These efforts to reduce overdoses and deaths require a collaborative approach involving states, clinics, those with lived experience, and policymakers.

Together we can:

4. Provide training and technical assistance raise awareness about MOUD and implement new and/or modified practices.

Sources: Substance Abuse and Mental Health Services Administration (SAMHSA): *Increasing Access to Medications for Opioid Use Disorder (MOUD): Low-Threshold MOUD Approaches and Strategies.* Publication No. PEP25-02-011 Substance Abuse and Mental Health Services Administration, 2025.

These efforts to reduce overdoses and deaths require a collaborative approach involving states, clinics, those with lived experience, and policymakers.

Together we can:

5. Monitor services to promote systems improvement.

Sources: Substance Abuse and Mental Health Services Administration (SAMHSA): *Increasing Access to Medications for Opioid Use Disorder (MOUD): Low-Threshold MOUD Approaches and Strategies.* Publication No. PEP25-02-011 Substance Abuse and Mental Health Services Administration, 2025.

Questions or Comments?

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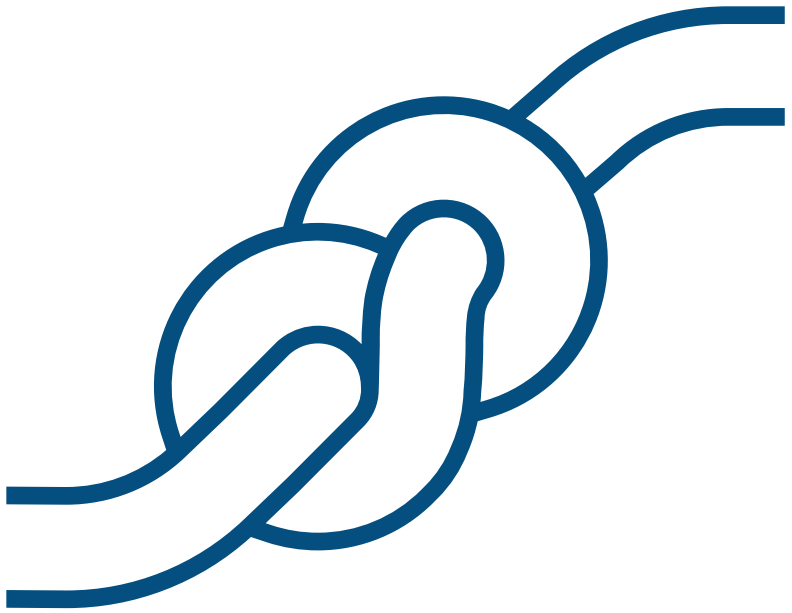
Resources



- States Can Reduce Barriers to Prescribing Buprenorphine for Opioid Use Disorder
- Low Barrier Models of Care for Substance Use Disorders
- Key substance use and mental health indicators in the United States: Results from the 2023 National Survey on Drug Use and Health
- Guide to Long-acting Medications
- Advisory: Expanding Access to Methadone Treatment in Hospital Settings
- Guidelines for Implementing Medications for Opioid Use Disorder Treatment in State Prisons
- Naloxone Saturation Policy Academy Retrospective Report
- Advisory: Clinical Considerations for Methadone Treatment of Opioid Use Disorder in Correctional Facilities

How did we do?

Please answer a few questions to let us know how we did and what we can do to support you in future sessions.

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CCBHC State Technical Assistance Center

Request Technical Assistance

Email CCBHC@TheNationalCouncil.org

Resources

The CCBHC State Technical Assistance Center is here to provides accessible, timely and evidence-based technical assistance designed to meet the needs of all states implementing the CCBHC model, as well as individualized consultation to support the needs of specific states. Please request technical assistance by clicking “Request TA” above.

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