Four Hospital Pathways Linking Opioid Use Disorder (OUD) Patients To Treatments & Medications

Jess Davis

Mentor: **Fran Barg, PhD, MEd**

Setting: **Mixed Methods Research Lab (MMRL)**
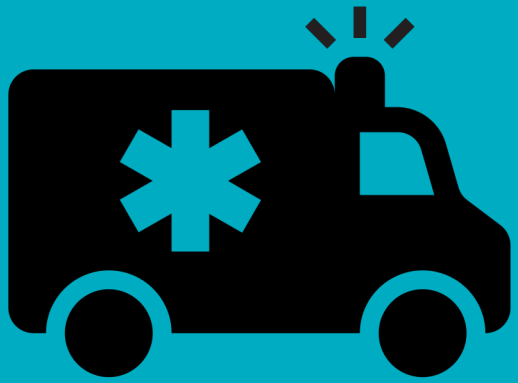
Study PI: **Austin Kilaru, MD**

Roadmap

OVERVIEW > POLICY > PROJECT > EXPERIENCES

PROJECT OVERVIEW

Opioid Use Disorder → **ED** (Emergency Department) → Pathway 1, Pathway 2, Pathway 3, Pathway 4

Overview: Use mixed methods to evaluate the implementation of a statewide health policy specifically designed to target the opioid epidemic in PA.
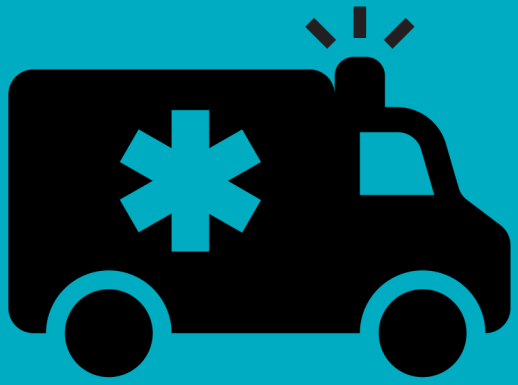
health policy

HQIP

HQIP

Hospital **Q**uality **I**ncentive **P**rogram

HQIP SUMMARY

a recent policy response to PA's opioid crisis.

provides financial **incentives** for hospitals to implement 4 specific **pathways...**
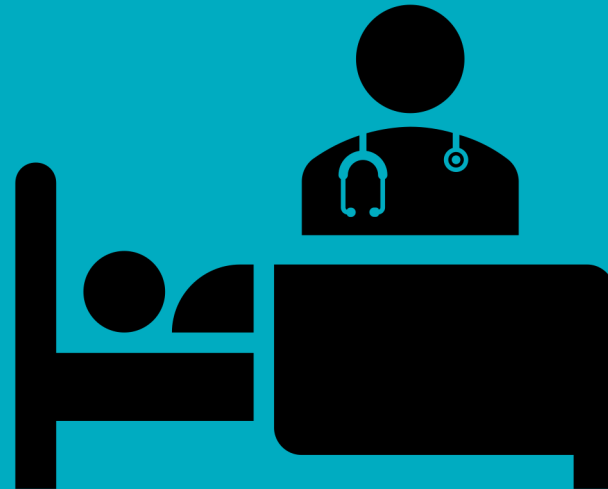
Opioid Use Disorder

EMERGENCY DEPARTMENT
E D
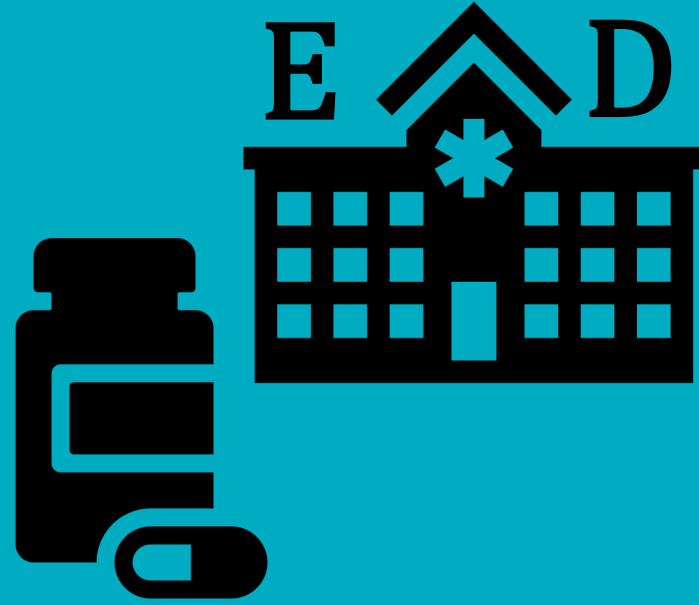
PATHWAY 1

PATHWAY 2

PATHWAY 3

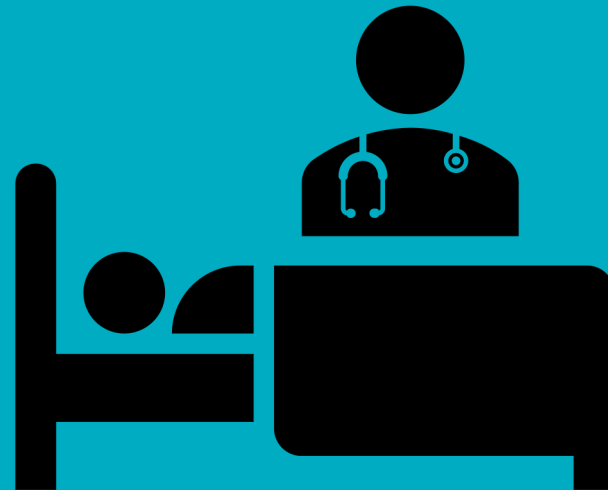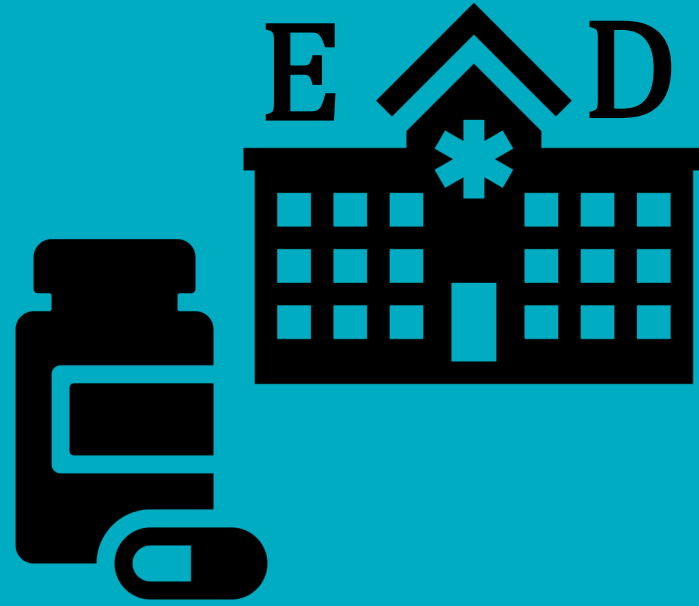PATHWAY 4

...4 specific pathways that transition Medicaid OUD patients into treatment within 7 days of ED discharge.

4
HQIP
pathways

E D

MAT

Hospital says "yes" to all 4, receives the $193,000 incentive.

E ⌂ D

MAT

PROJECT SIGNIFICANCE

80% ⬆ in patients visiting PA EDs for opioid overdose[1]

JULY 2016

SEPT 2017

Vivolo-Kantor AM et al. Vital Signs: Trends in Emergency Department Visits for Suspected Opioid Overdoses –United States, July 2016 –September 2017.CDC Morbidity Mortality Weekly Report 2018;67(9):279-285.

JULY
2018
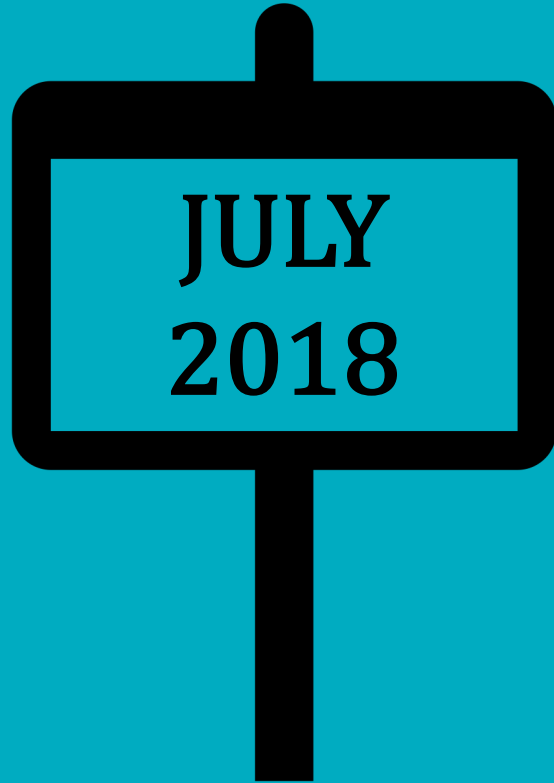
HQIP

"a natural policy experiment"
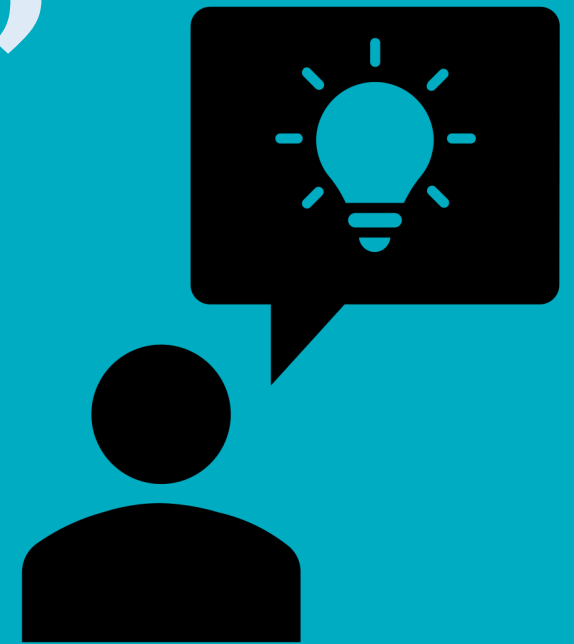
PROJECT AIM

Aim: Compare the **measurable characteristics** & **reasoning** of hospitals that decided to agree to **all**, **some**, or **none** of the HQIP pathways.

PROJECT (Mixed)METHODS

Aim: Compare the measurable characteristics of hospitals

= QUANTITATIVE METHODS

Aim: Compare the reasoning of hospitals

= <u>QUALITATIVE</u> METHODS

QUANTITATIVE METHODS

HQIP Pathways: | **All = 77** | **Some = 44** | **None = 32** | N = 153

Quantitatively compare hospital:

location

size

for- vs non-profit

⟩ (AHA Annual Survey)

OUD patients ⟩ (Medicaid Claims Data)

QUALITATIVE METHODS

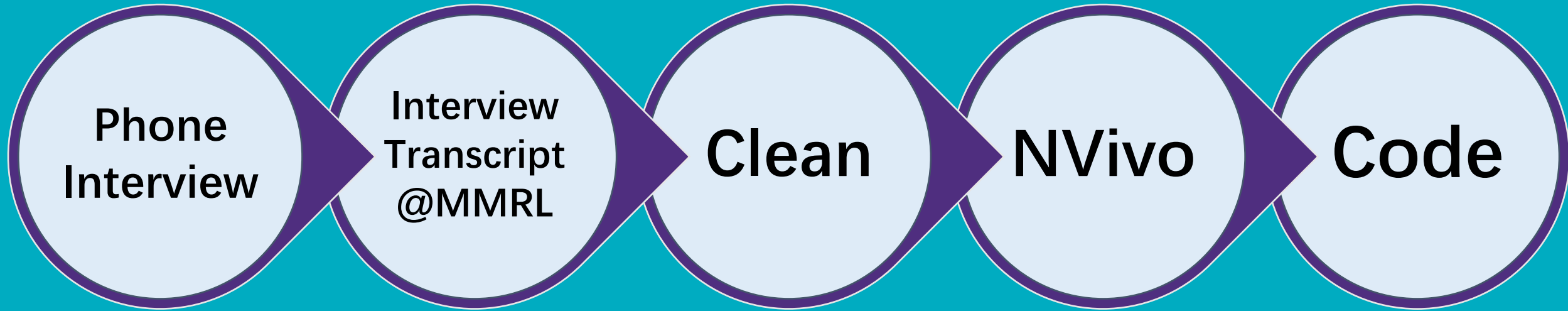# Qualitatively compare hospital:

reasons
factors
decisions

(semi-structured
telephone interviews)

with hospital
administrators
+ ED leaders

QUALITATIVE ANALYSIS

Qualitative analysis timeline:

Phone Interview → Interview Transcript @MMRL → **Clean** → **NVivo** → **Code**

CODEBOOK (RE-)DEVELOPMENT

Analysis: Codebook Design

Code Name	Code Definition
Barriers	Difficulties faced in HQIP implementation.
Facilitators	Factors that helped HQIP implementation.
... + 20 more codes & definitions	

Analysis: interview coding example

Interviewer: asks **what factors influenced** the hospital's **decision** to participate in HQIP?

Interviewee: mentions that the hospital had **implemented similar pathways already** before HQIP. Plus, they had strong **links** with other **community-based MAT resources**. As such, there was a lot of **leadership engagement** to adopt all 4 HQIP pathways and get the **$193,000** incentive.

Analysis: interview coding example

Interviewer:

what factors influenced decision

Interviewee:

implemented similar pathways already

links

community-based

MAT resources.

leadership engagement

$193,000

# Analysis: interview coding example

Interviewer:
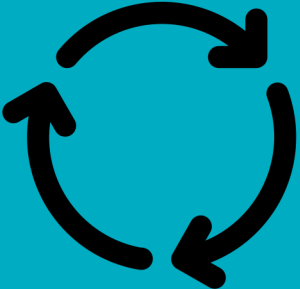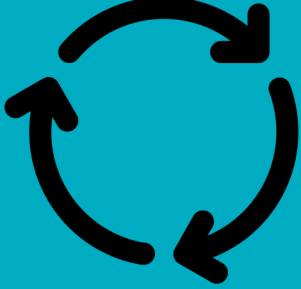
what factors influenced hospital's decision

FACILITATORS

Interviewee:

mentions that the hospital had **implemented similar pathways already** before HQIP. Plus, they had strong **links** with other **community-based MAT resources**. As such, there was a lot of **leadership engagement** to adopt all 4 HQIP pathways and get the **$193,000** incentive.

Phone Interview → Interview Transcript @MMRL → Clean → NVivo → Code
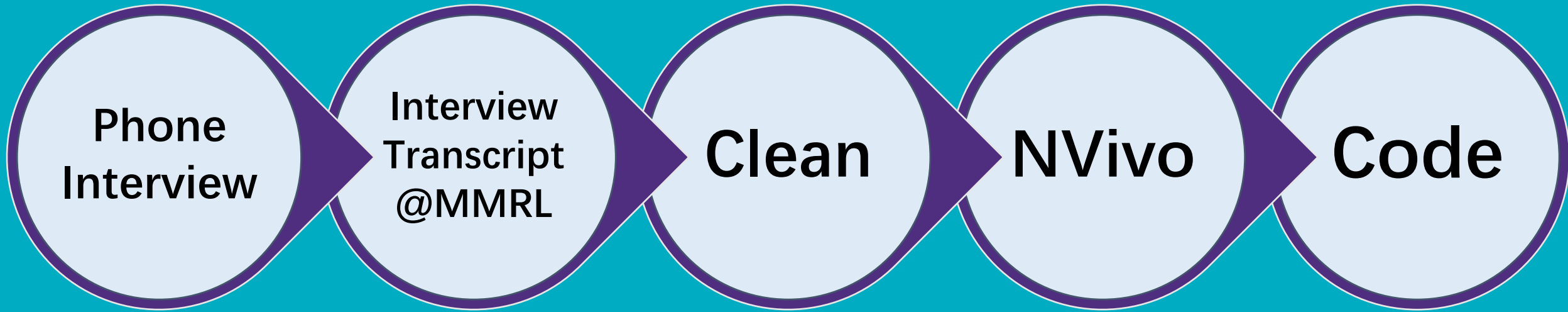
REPEAT x20 transcripts

PROJECT FUTURE

x20 transcripts

x4 double code

x8 Coder 1

x8 Coder 2

Early Findings:
most used codes (so far)

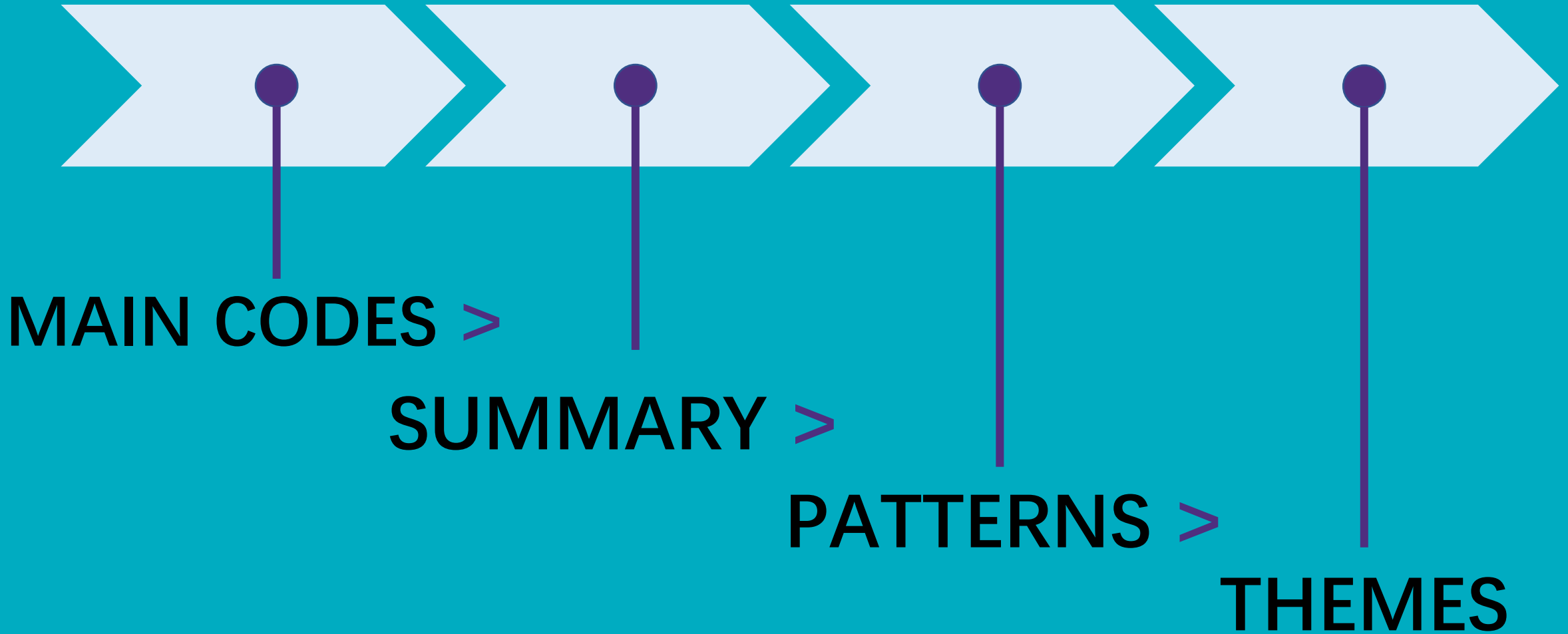| Main Codes: |
| --- |
| Implementation Climate |
| Community Partners |
| Resources |
| Pre-HQIP |
| Understanding & Communication |

Future Project Roadmap

MAIN CODES >

SUMMARY >

PATTERNS >

THEMES

FINAL TAKEAWAYS

Lessons Learned: with Fran Barg & MMRL

Qualitative research is tough!

Mixed Methods: look beyond the numbers.

Interviews: Minimize the "umm."

Codebook design, get involved!

Code BIG, then go small.

Thank you

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Whitney Eriksen, PhD, RN

Austin Kilaru, MD

Su Fen Lubitz, MPH

Mixed Methods Research Lab (MMRL)