CONFERENCE OBJECTIVES

- To present the latest evidence relevant to the field and critically evaluate the implications for patients, clinicians, administrators, and policy makers.
- To disseminate evaluation and treatment techniques to better serve patients and providers, improve program development and administration, and enhance patient outcomes.
- To develop strategies to assist healthcare partnerships and collaborations by advancing their understanding of medication for opioid use disorder as a crucial element to community wellness.
- To improve the collaboration between opioid treatment programs and community partners in response to the heightened risks associated with the use of opioids.
- To formulate methods to promote, support, facilitate, and integrate medication for opioid use disorder into the judicial and penal systems, government, and social service organizations.
- To discuss the magnitude and impact of prescription opioids on the healthcare system and Opioid Treatment Programs.

HOSTS:
New York State Office of Alcoholism and Substance Abuse Services (OASAS)
COMPA, the Coalition of Medication Assisted Treatment Providers and Advocates

CONFERENCE PLANNING COMMITTEE

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Conference Chair
COMPA, the Coalition of Medication Assisted Treatment Providers and Advocates
West Midtown Medical Group

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Alexandra Springer, CMP

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Lawrence Brown, MD
Molly Carney, PhD
Cheryl L. Gardine, LCSW
Michael Rizzi
FROM THE CONFERENCE CHAIR

Dear Colleagues, Patients, Advocates, Stakeholders and Friends:

The Coalition of Medication Assisted Treatment Providers and Advocates (COMPA) and New York State Office of Alcoholism and Substance Abuse Services (OASAS) warmly welcome you to the 2018 AATOD Conference!

We come together during a national public health emergency. The opioid epidemic continues to escalate, and the epidemic is blamed for the decrease in the life expectancy of Americans, which fell for the second consecutive year.

Over the next five days, nationally and internationally recognized research, medical, clinical and policy experts will convene at this conference to share their wisdom, innovations and vision to address this crisis. Our conference theme, Advancing & Integrating Specialized Addiction Treatment & Recovery, focuses on realizing the goals of Medication Assisted Treatment in a Comprehensive Hub setting. This theme is woven throughout the plenary sessions, workshops, posters and hot topic roundtables. Each element of the conference is filled with information and ideas to improve our programs and the treatment field. Our planning committees have prepared exciting, creative and critical programming aimed at better quality, better outcomes and recovery for individuals with opioid use disorder.

Your presence at this conference is important to us. Your perspective adds to the richness of learning and breadth to the dialogue to ensure our response is grounded and remains at the cutting edge. Stop by the Open Board Meeting. Visit our International Presentations. Go to see our exhibit booths with the latest technologies, science and products that support our work. Take a tour of a local program—in person or virtually. Consider whether a new approach would work in your program and in your community. Reconsider it.

The Awards Banquet on Monday evening captures the essence of what we are trying to accomplish. The vitality of this night is felt by all in attendance. I hope you will join us for this elegant celebration to honor those who have made significant contributions to our field.

Finally, I encourage you to take time to explore New York City. I hope you enjoy the exhilaration of Times Square and the amazing sights, sounds and tastes that the city has to offer. You don’t have to travel far to experience the city. You can find the spirit of New York on every block, in every hot dog stand and in every neighborhood. It’s the spirit that built New York and made us who we are today.

I welcome and thank each of you for coming and sharing your knowledge, energy and creativity.

Allegra Schorr
2018 Conference Chair

PS: Please help us improve and plan our 2019 AATOD Conference in Orlando, FL. Remember to complete an evaluation at the end of each session and the overall conference evaluation!
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<td>The Certified Medication Assisted Treatment Advocate (CMA) Training Course</td>
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<td>8:00 a.m.</td>
<td>State Opioid Treatment Authorities Training (Invitation Only)</td>
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<td>Buprenorphine and Office-Based Treatment of Opioid Use Disorders</td>
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<td>Opioid Overdose Prevention and Naloxone Access: Opportunities for Integration into Substance Use Disorder Treatment and Recovery</td>
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<td>Triple E for HCV: Engagement, Education and Eradication of HCV Among Patients with Substance Use Disorders</td>
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<td>Collaborative Practice Settings Facilitate Integrative Approaches to Treating Opioid Use Disorder: Findings from Three National Programs</td>
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<td>State Opioid Treatment Authorities’ Meeting (Closed Session for State and Federal Officials)</td>
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<td>Adding Peer Recovery Support Services to Effective Medication Assisted Treatment</td>
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<td>Moving the Treatment Paradigm: Measuring Outcomes to Improve the Delivery of Care, Treatment and Services</td>
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<td>The New York Experience—“Reversing the Stigma” Documentary Premiere and Panel Discussion</td>
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<td>Management of Pregnant and Parenting Women with Opioid Use Disorder and their Infants</td>
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<td>Closing Plenary Session—How the Federal Government is Fighting Back Against the Opioid Epidemic</td>
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PRE-CONFERENCE SESSIONS
Saturday, March 10, 2018

8:00 a.m.–5:00 p.m.

The Certified Medication Assisted Treatment Advocate (CMA) Training Course

Chelsea/Gotham

Laura F. McNicholas, MD, NAMA-R Advisory Board, Philadelphia, PA
Joycelyn Woods, MA, MARS™ Project, Bronx, NY & NAMA-R, New York, NY
Belinda Greenfield, PhD, New York State Office of Alcoholism and Substance Abuse Services (OASAS), New York, NY
Mary Lou Ojeda, MS, Center for Substance Abuse Treatment (CSAT), Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, MD
Nichole Smith, MHSA, Center for Substance Abuse Treatment (CSAT), Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, MD
Claude Hopkins, CDAC, NAMA-R, Neptune, NJ
Brenda Davis, MSW, NAMA-R & Beth Israel Medical Center, New York, NY
Paul Bowman, Jr, CMA, NAMA-R, Boston, MA
Herman Joseph, PhD, Stop Stigma Now, New York, NY

The leading advocate and recovery organization for medication assisted treatment, the National Alliance for Medication Assisted Recovery (NAMA Recovery), developed this training believing that professionals, patients and their families can work together for a better understanding of the physiology of addiction and the use of medication for opioid use disorder (OUD). Both patients and non-patients are encouraged to become Certified Medication Assisted Treatment Advocates (CMA).

The course presentation includes:

Medication for Opioid Use Disorder (OUD)—Basic clinical information about medications for OUD.
Addiction & Methadone—Current science about addiction in a language understandable to the non-clinician.
Regulations & Accreditation—Current regulations explained by the federal agency that oversees medications for the treatment of OUD, and the State Opioid Treatment Authority.
Basic Advocacy—Basic tools for advocacy, managing simple issues that confront advocates, educating patients about their rights, handling grievances, legal issues, and working within communities to benefit patients and treatment.

Participants will gain the initial tools for basic advocacy in order to grow and develop into successful advocates. The course involves eight hours of rigorous training and fulfills the training requirement for Certification as a Medication Assisted Treatment Advocate (CMA).

There is a separate registration fee for this pre-conference event.

Onsite registration will begin at 8:00 a.m. outside the session room. NAMA Recovery cannot guarantee a place to anyone not pre-registered. Lunch is not provided.

Sponsored by the National Alliance for Medication Assisted Recovery (NAMA Recovery) and Mallinckrodt Pharmaceuticals

8:00 a.m.–5:30 p.m.

Buprenorphine and Office-Based Treatment of Opioid Use Disorders

Soho Complex

John A. Renner, Jr., MD, American Academy of Addiction Psychiatry / PCSSMAT, Boston, MA
Laura F. McNicholas, MD, Independent Medical Consultant, Philadelphia, PA

Designated by the Department of Health and Human Services, this training meets the eight-hour requirement and is designed to instruct physicians, nurse practitioners and physician assistants to dispense buprenorphine in office-based treatment for opioid use disorder. Participation in this training will provide a comprehensive overview of buprenorphine prescribing and its safe and effective use in an office-based setting. This training is designed for physicians and other primary care providers who are likely to treat opioid dependent persons in their practice, such as those in family practice, general internal medicine, psychiatry, pediatrics, adolescent medicine specialists and Opioid Treatment Programs.

Sponsored in part by the Substance Abuse and Mental Health Services Administration (SAMHSA) and in partnership with the American Academy of Addiction Psychiatry (AAAP)

Funding for this course was made possible (in part) by U79TI026556 from SAMHSA. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.

8:30 a.m.–5:00 p.m.

Improving Cultural Competence in Substance Abuse Treatment

Hudson/Empire

Maxine Fuller, MS, The Bizzell Group, Atlanta, GA
Robert Johnson, MEd, Accreditation Readiness, LLC, Columbia, MO

As the United States becomes more and more racially and ethnically diverse, it is important for healthcare providers to provide culturally competent services. The goal of this session is to provide mental and behavioral health staff and counselors with the knowledge, skill and strategies to serve diverse patients, families and communities. This session targets specific racial, ethnic and cultural considerations and the core elements of cultural competence such as cultural awareness, general cultural knowledge, cultural skill knowledge and cultural knowledge of behavioral health. The foundation for this interactive training is the Substance Abuse Mental Health Services Administration’s (SAMHSA) Treatment Improvement Protocols (TIP) 59: Improving Cultural Competence. This comprehensive guide was published in 2014 and is a free resource for healthcare professionals. The primary objective of TIP 59 is understanding the role of culture in the delivery of behavioral health services. Upon completion of this session, participants will be able to (1) Understand what cultural competence is and why it is important, (2) Know the core competences counselors and other clinical staff must have to be able to effectively serve diverse patients, families and communities, (3) Practice the
nine steps of culturally responsive evaluation and treatment planning, (4) Know what is necessary to become a culturally competent organization and (5) Understand how to provide effective services to major racial and ethnic groups.

**Note:** Due to the interactive nature of the session, participation is limited to 60 individuals.

**Sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA)**

**9:00 a.m.–12:00 p.m.**

**Opioid Overdose Prevention and Naloxone Access: Opportunities for Integration into Substance Use Disorder Treatment and Recovery**

**Astor**

**LCDr Brandon Johnson, PhD (c),** Center for Substance Abuse Treatment (CSAT), Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, MD

**Maya Doe-Simkins, MPH, JBS International, Maple City, MI**

**Sharon Stancliff, MD, Harm Reduction Coalition, New York, NY**

**Eliza Wheeler, MS, Harm Reduction Coalition, New York, NY**

This half-day session is an opportunity for attendees to learn about the Substance Abuse Mental Health Services Administration’s (SAMHSA) detailed overdose prevention and response curriculum, which serves to support implementation of strategies discussed in the Opioid Overdose Prevention toolkit and Federal Guidelines for Opioid Treatment Programs. The presenters will discuss why it is most essential to expand our ability to provide naloxone to those most likely to be present at the scene of an overdose: heroin/opioid users themselves. To do this effectively, we need to use low threshold models, reaching individuals where they are and Substance Use Disorder (SUD) treatment programs and Recovery Community Organizations (RCO) are important existing infrastructures for accessing people at high risk. Jointly with attendees, the presenters will discuss various models for integrating overdose prevention in SUD treatment programs and RCOs and brainstorm some strategies for addressing common barriers. The presenters will facilitate a discussion of some of the nuanced details of increasing naloxone access through SUD treatment organizations or collaboration with other organizations in the community. With a sample agency policy as a template, attendees will have the opportunity to develop a policy that fits the context of their respective agencies. The presenters will discuss approaches in modifying overdose prevention education including illicitly manufactured fentanyl (IMF) and counterfeit prescription pills. In addition to case scenarios for incorporating real-time information from people who use drugs into safety campaigns. The presenters will also discuss how overdose prevention education differs based on population, including people who are incarcerated. All presenters will facilitate a question and answer session and conclude the session with an explanation of activities and opportunities for overdose prevention support that reflect SAMHSA’s commitment to overdose prevention.

**Sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA)**

**1:00 p.m.–4:00 p.m.**

**Concurrent Use and Misuse of Benzodiazepines Among Patients Receiving Pharmacotherapy for Opioid Use Disorder**

**Duffy/Columbia**

**Onaje Salim, EdD, Center for Substance Abuse Treatment (CSAT), Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, MD**

**Stephen A. Wyatt, DO, Carolinas HealthCare System, Charlotte, NC**

**Julie A. Kmiec, DO, Western Psychiatric Institute and Clinic, Pittsburgh, PA**

**Kenneth Stoller, MD, Johns Hopkins Bayview Medical Center, Baltimore, MD**

This session will provide an evidence-based overview for addressing the concurrent use of benzodiazepines in patients receiving pharmacotherapy for opioid use disorder (OUD). Experts will share clinical recommendations and lessons learned from the field. Concurrent use and abuse of benzodiazepines among patients receiving pharmacotherapy for OUD are important public health issues. Nearly 30% of fatal “opioid” overdoses involve the concurrent use of benzodiazepines (Sun et al., 2017). Lack of monitoring and inaccurate reporting from patients make it difficult to determine the scope of benzodiazepine misuse among patients receiving pharmacotherapy for OUD (Chen et al., 2011). Safe prescribing methods and interventions are needed to prevent harm among patients receiving pharmacotherapy for OUD who concurrently use or misuse benzodiazepines. However, evidence-based information about the clinical management of this population is lacking (Lintzeris & Nielsen, 2009). The medical community, patients receiving treatment for OUD, and their family members need education to raise awareness about the health risks associated with benzodiazepine and opioid use, treatment options for managing OUD and anxiety, and best practices for managing risks. To educate those in the field and community stakeholders, the Substance Abuse and Mental Health Services Administration (SAMHSA) conducted a literature review and convened an expert panel of providers with experience in prescribing pharmacotherapy for OUD and managing anxiety with or without benzodiazepines. The presenters will discuss results from the literature review and provide clinical recommendations for improving health outcomes and mitigating risks for overdose among this patient population. The presenters will also address gaps that remain in the literature and recommendations from the field as well as seek audience members’ input for effective approaches used in treatment programs.

**Sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA)**
**Opioid Maintenance Pharmacotherapy: A Course for Clinicians**

Astor Ballroom
Laura F. McNicholas, MD, Independent Medical Consultant, Philadelphia, PA
Abigail Kay, MD, Thomas Jefferson University, Philadelphia, PA
Brian McCarroll, DO, BIO-MED Behavioral Healthcare, Roseville, MI
Kenneth Stoller, MD, Johns Hopkins Bayview Medical Center, Baltimore, MD

The course is recommended for clinicians who have an interest in increasing their knowledge of medications to treat opioid use disorder (OUD). The updated curriculum includes guidance for best practice treatment for opioid use disorder.

Topics include overview of opioid use disorder, epidemiology, opioid pharmacology, evidence-based treatment options, patient assessment/selection, special populations, induction and maintenance protocols, pain management, drug-to-drug interactions, adverse effects, methadone deaths, managing medical/psychiatric problems, drug testing, regulatory issues, an accreditation update, risk management, and an overview of other medication modalities.

While the course is primarily intended for clinicians with limited experience in using medication for OUD, it also provides updated information for more experienced clinicians. Participants will receive a comprehensive syllabus with reference and resource materials. To further integrate the educational objectives, participants are encouraged to discuss challenging problems and clinical issues to facilitate understanding of didactic principles.

Experience opioid treatment program Medical Directors will conduct the program, focusing on the goal for participants to acquire the essential knowledge and skills necessary to deliver safe and effective medications for opioid use disorder.

The course includes overview of opioid use disorder, epidemiology, opioid pharmacology, evidence-based treatment options, patient assessment/selection, special populations, induction and maintenance protocols, pain management, drug-to-drug interactions, adverse effects, methadone deaths, managing medical/psychiatric problems, drug testing, regulatory issues, an accreditation update, risk management, and an overview of other medication modalities.

The $275.00 separate registration fee includes course materials, morning coffee service and afternoon luncheon.

Sponsored by the American Association for the Treatment of Opioid Dependence, Inc. (AATOD)
Supported by the National Institute on Drug Abuse (NIDA) and through a grant from Mallinckrodt Pharmaceuticals

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**Triple E for HCV: Engagement, Education and Eradication of HCV Among Patients with Substance Use Disorders**

Manhattan Ballroom
Stevan Gonzalez, MD, Baylor All Saints Medical Center, Fort Worth, TX
Daniel Fierer, MD, Icahn School of Medicine at Mount Sinai, New York, NY
Andrew Talal, MD, University at Buffalo, Buffalo, NY
Lawrence S. Brown, Jr., START Treatment and Recovery Centers, Brooklyn, NY

Hepatitis C virus (HCV) infection is a leading cause of chronic liver disease (CLD) with an estimated global prevalence of more than 150 million, with up to an estimated 3.2 million infected individuals in the United States. Currently, injection drug use is the leading risk factor for HCV acquisition. In fact, people who inject drugs (PWID) represent the majority of HCV disease burden in developed countries. HCV prevalence among PWID is as high as 80% depending on frequency and duration of use, while incidence ranges from 16-42% per year. Recent FDA-approved HCV treatments can cure >90% of patients without the need for interferon. Despite these facts, HCV treatment uptake amongst PWID participants has been low.

Unfortunately, a variety of factors contribute to the limited number of PWID entering HCV care and treatment. Such barriers exist at the patient, physician, and health system levels. Although there are different barriers that are specific to each group, in general these barriers are either 1) based on misperceptions or 2) have become “partially resolved” in the wake of advances in HCV management, healthcare reform including expanded Medicaid coverage for low-income patients, increased pharmaceutical access through public insurance and private indigent care support programs, and federal and state government screening mandates. Addressing such barriers is the important first step toward formulating interventions to increase access to care.

The Triple E session will be built around a series of expert-led presentations with the integration of real-world cases serving to highlight and reinforce the recognition of, methods for diagnosing, and the management of HCV. These clinical cases will provide abundant opportunities for audience input, faculty presentation, panel discussion, and debate regarding the best treatment strategies for a given patient. This session emphasizes the need to ensure that PWID have access to viral hepatitis prevention, care, and treatment services; to develop and mobilize community resources that prevent viral hepatitis caused by injection drug use; and to advance research into the prevention of viral hepatitis among persons who use drugs.

Sponsored by the Chronic Liver Disease Foundation and an educational grant from AbbVie and Gilead

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**AATOD Open Board Meeting**

Saturday, March 10 • 5:00 p.m.–8:30 p.m.
Astor Ballroom

Supported by Addiction Treatment Providers Insurance Group
8:30 a.m.–11:30 a.m.

**Collaborative Practice Settings Facilitate Integrative Approaches to Treating Opioid Use Disorder: Findings from Three National Programs**

Soho Complex

**Petra E. Jacobs, MD, National Institute on Drug Abuse, Center for the Clinical Trials Network (NIDA/CTN), Bethesda, MD**

**Brad Shapiro, MD, University of California, San Francisco School of Medicine, San Francisco, CA**

**Felicity Homsted, PharmD, Community Care Partnership of Maine—Accountable Care Organization, Newburgh, ME**

**Beth Tanzman, MSW, Vermont Blueprint for Health, Shelburne, VT**

In the wake of the current prescription opioid crisis, improving access to treatment is critical. Until the Drug Abuse Treatment Act (DATA) of 2000, patients could only receive medication treatment through federally-approved and licensed Opioid Treatment Programs (OTPs). Now, providers may offer pharmacotherapies for opioid use disorders (OUD) and naloxone to prevent overdose in office-based settings. However, research shows that access to these vital medications remains limited. This is due in part to the low numbers of physicians seeking buprenorphine licenses as well as issues of insurance, accessibility and stigma. Many OUD patients may also present with co-occurring conditions—including mental disorders and infectious diseases (e.g., HIV and/or HCV)—and may be unable, unwilling, or unlikely to seek separate treatment. Integrated care for addiction and other conditions at one treatment center is most likely to engage and retain these patients. It is therefore crucial to identify creative and practical solutions that meet patients where they are and offer comprehensive, accessible treatment options.

This session will explore three models showcasing different implementation strategies for the treatment of OUD patients: Vermont’s Hub & Spoke Model; San Francisco’s Office-Based Opioid Treatment (OBOT) program incorporating pharmacies for dispensing of methadone; and Penobscot Community Health Care (PCHC) efforts to engage pharmacists in medication management. Attendees will hear about program goals, methods, challenges, and preliminary outcome and evaluation results. In keeping with the AATOD conference theme of “Advancing & Integrating Specialized Addiction Treatment & Recovery,” presenters will describe creative models for provision of comprehensive OUD treatment in settings that are accessible to patients with multiple medical or psychosocial challenges. There will also be a presentation of the results of outcome and evaluation studies, feedback on utilization and efficacy, and challenges to widespread adoption. The session will allow the opportunity for discussion.

**Supported by the National Institute on Drug Abuse, the National Drug Abuse Treatment Clinical Trials Network (NIDA/CTN)**
9:00 a.m.–12:00 p.m.

Adding Peer Recovery Support Services to Effective Medication Assisted Treatment

Duffy/Columbia

Walter Ginter, CMA, MARS™ Project, New York, NY
Suzanne Half-Westcott, MS, Beyond MARS™ Training Institute, New York, NY
Onaje Salim, EdD, Center for Substance Abuse Treatment (CSAT), Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, MD
Sharon Dow, MS, The Bizzell Group, Lanham, MD

This session will help participants understand the importance and the role of peer recovery support services in improving outcomes in Medication Assisted Treatment (MAT). It will also provide the opportunity for them to enroll in a special, SAMHSA-funded effort for programs that want to create their own structured program of peer support.

The session begins with a description of recovery supports that have been shown to work for MAT patients and that peer support services are often underutilized. This introduction will include an overview of how peer recovery support services fit into the holistic, Bio-Psycho-Social model of chronic disease treatment services. Participants will see how social support, in conjunction with a traditional medication and counseling approach, can effectively work to help patients achieve and sustain recovery. An example of a structured program of peer support will be presented.

While peer-group social supports have been an important part of medication-free recovery for many decades (12 Step, Therapeutic Communities, etc.), it is only recently that this type of support has been shown to be effective in MAT. The MARS™ (Medication Assisted Recovery Services) Project is a trademarked intervention that provides an easy-to-implement model of peer-group based social support and patient education. In addition to this unique community of peer support, there will also be a discussion about recovery coaching. Recovery coaching has been used in the medication free recovery community in the last decade and is now showing its effectiveness in MAT. The session concludes by showing how to access SAMHSA-funded OTP-Q Training and Technical Assistance to support their programs’ efforts to implement peer recovery support services or to enhance an existing program of peer support services.

Sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA)

9:00 a.m.–12:00 p.m.

Moving the Treatment Paradigm: Measuring Outcomes to Improve the Delivery of Care, Treatment and Services

Empire

Megan Marx, MPA, Joint Commission, Behavioral Healthcare and Psychiatric Hospital Accreditation Program, Oakbrook Terrace, IL
John (“Chuck”) Ross, MSSA, Joint Commission, Oakbrook Terrace, IL
Darren Lubbers, PhD, Integrated Health Analytics, LLC, Keego Harbor, MI
Jaimie Brandon, MS, Integrated Health Analytics, LLC, Keego Harbor, MI

According to a recent report from the Kennedy Forum, “Patients with mental health and substance use disorders (MH/SUD) treated in routine care experience worse outcomes than patients enrolled in clinical trials that have demonstrated the effectiveness of evidence-based treatments. This large gap between routine outcomes and optimal outcomes exists across a wide range of patient populations and treatment settings, including primary care and specialty behavioral health.” Part of what contributes to these poor outcomes is the lack of consistent utilization of measurement based care to determine whether individuals receiving care, treatment and services are improving. This, despite nearly two decades of research that suggests that the effects of utilizing measurement based care are robust, cutting across treatment modalities, populations and settings.

Mental Health America (MHA), in their position statement on Evidence Based Healthcare, state that “Outcome measurement is essential to make any system of care accountable.” Incorporating measurement based care in behavioral health care settings has been demonstrated to allow providers to address opportunities in real time to improve the delivery of treatment and services while a patient is in their care. These improvements also translate into improved outcomes for future patients. According to MHA, as outcome data are accumulated and analyzed, it will become more and more feasible to use the data in evaluating and modifying treatment and monitoring and improving provider services and systems of care. This is essential in a behavioral healthcare environment where there is a growing emphasis on demonstrating outcomes.

The Kennedy Forum has developed and endorsed the policy that “All primary care and behavioral health providers treating mental health and substance use disorders should implement a system of measurement-based care whereby validated symptom rating scales are completed by patients and reviewed by clinicians during encounters. Measurement-based care will help providers determine whether the treatment is working and facilitate treatment adjustments, consultations, or referrals for higher intensity services when patients are not improving as expected.”

Beginning in January 2018 the Joint Commission will require all programs accredited under the Comprehensive Accreditation Manual for Behavioral Health Care (CAMBHC) to use a standardized instrument to collect data measuring treatment outcomes. Data collected and analyzed using the selected standardized tool(s) should be used by the accredited organization to inform and improve the delivery of care, treatment and services. This session will focus on the Joint Commission’s revised accreditation elements of performance, what research tells us about the use of standardized instruments to measure outcomes and the challenges programs face in selecting and implementing standardized tools to measure outcomes.

Sponsored by the Joint Commission
12:15 p.m.–5:15 p.m.

**Presentations by the World Federation for the Treatment of Opioid Dependence (WFTOD): EUROPAD Forum**

**Empire**

The World Federation for the Treatment of Opioid Dependence (WFTOD) was founded during the European Opiate Addiction Treatment Association (EUROPAD) meeting of July 2007 in Ljubljana, Slovenia. All of the member nations, which included the member countries of EUROPAD and all of the member states with AATOD, agreed to a charter for the World Federation.

**CHAIR:** Icro Maremmani, MD, President, World Federation for the Treatment of Opioid Dependence, NGO with Special Consultative Status with United Nations Economic and Social Council, Pisa, Italy

**INTRODUCTIONS:** Michael Rizzi, AATOD International Committee Chair, Cranston, RI

12:15 p.m.

The Performance of a National Opioid Maintenance Treatment Program: Are the benefits from the program in terms of mortality reduction stable or changing during a period from 1997-2009?

Thomas Clausen, MD, Norwegian Centre for Addiction Research, University of Oslo, Norway

12:35 p.m.

Optimizing HCV Screening and Treatment in Prisoners—An Irish Perspective

Des Crowley, MD, Irish College of General Practitioners, Dublin, Ireland

12:55 p.m.

Polyuse: Pragmatic Strategy of Treatment

Didier Touzeau, MD, Paul Guiraud Hospital, Bagneaux, France

1:15 p.m.

The TDOLEG Project

Olivier Simon, MD, University Hospital of Lausanne, Lausanne, Switzerland

1:35 p.m.

Difficult to Reach Populations: Preventing HIV and HCV Infections Through Addiction Treatment

Andrej Kastelic, MD, Center for Treatment of Drug Addiction, Ljubljana, Slovenia

1:55 p.m.

Heroin-Assisted Treatment: Evidence-Based, Current Practice and New Developments

Wim van den Brink, MD, Academic Medical Center of the University of Amsterdam, Amsterdam, The Netherlands

2:15 p.m.

Implementation and Direct Administration of AOT at Mathari Clinic in Nairobi, Kenya

Tracy Njonjo, MD, Mathari National Teaching and Referral Hospital, Nairobi, Kenya

2:35 p.m.

No Pain, No Gain? Is a Comfortable Way to Switch to Buprenorphine possible?

Peter Vossemberg, MD, Tactus, Deventer, The Netherlands

2:55 p.m.

Jihadism and Addiction to Death

Marc Reisinger, MD, EUROPAD, Brussels, Belgium

3:15 p.m.

Opioid Maintenance During Pregnancy: Facts and Figures Over the Last 30 Years

Gabriele Fischer, MD, Center of Public Health, Medical University Vienna, Vienna, Austria

3:35 p.m.

Oxycodone in Opioid Addiction: From Early Discoveries to the Present

Lorenzo Somaini, MD, Addiction Treatment Center, Biella, Italy

3:55 p.m.

High Dose Approach to Methadone Treatment

Alexander Kantchelov, MD, The Kantchelov Clinic, Sofia, Bulgaria

4:15 p.m.

PH8, A French National Study on Completion Rate of HIV and HCV Treatment in Prison

André-Jean Remy, MD, Centre Hospitalier de Perpignan, Perpignan, France

4:35 p.m.

A Buprenorphine Treatment Model and Outcomes for Military Veterans

James E. Phelan, LCSW, Veteran Health Administration, Columbus, OH

4:55 p.m.

A Descriptive Study Mapping Service User Needs in the City of Cork, Ireland

John Horan, MD, Arbour House, Cork Ireland

**Sponsored by the American Association for the Treatment of Opioid Dependence, Inc. (AATOD), EUROPAD, and the World Federation for the Treatment of Opioid Dependence (WFTOD)**

1:00 p.m.–4:00 p.m.

**The New York Experience—“Reversing the Stigma” Documentary Premiere and Panel Discussion**

Duffy/Columbia

**MODERATORS:** Zoraida Diaz, MA, New York State Office of Alcoholism and Substance Abuse Services (OASAS), New York, NY

Robert A. Kent, Esq., New York State Office of Alcoholism and Substance Abuse Services (OASAS), New York, NY

**SPEAKERS:** Micky Jimenez, BSN, ACACIA Network, Albany, NY

Donna Mae DePola, CASAC, The Resource Training & Counseling Center, Brooklyn, NY

Roy Kearse, LCSW, Samaritan Daytop Village, Queens, NY

New York State (NYS) will showcase a documentary film titled “Reversing the Stigma” providing a historical perspective that looks at what is happening in NYS to address addiction and highlights New Yorkers sharing their experiences in recovery. The film, narrated by acclaimed television journalist Laurie Dhue, profiles multiple people in various stages of recovery, who share their stories and experiences. Medication assisted treatment (MAT) recovery paths are highlighted in the film.

After the film is shown, the audience will participate in a structured dialogue with a panel that will include individuals whose stories and experiences are seen in the film (e.g., patients, family and treatment staff). The conversation will look towards ways the film helps to demystify the use of addiction medications including methadone, MAT enhancement strategies, and clinical opportunities that NYS is recommending to further address and successfully treat opioid dependence.

**Sponsored by the New York State Office of Alcoholism and Substance Abuse Services (OASAS)**
1:00 p.m.–5:00 p.m.

Management of Pregnant and Parenting Women with Opioid Use Disorder and their Infants—Clinical Guidance Development and Recommendations

Soho Complex

Anne Leopold, MSc, JBS International, Inc., North Bethesda, MD

LCDR Brandon Johnson, PhD(c), Center for Substance Abuse Treatment (CSAT), Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, MD

Diana Colfa, MD, University of California, San Francisco School of Medicine, San Francisco, CA

Charles W. Schauburger, MD, Gundersen Health System, La Crosse, WI

Susan Hayashi, PhD, JBS International, Washington, DC

Joseph Perpich, PhD, JBS International, Washington, DC

Hendrée Jones, PhD, UNC School of Medicine, Chapel Hill, NC

This session will present the publication Clinical Guidance for Treating Pregnant and Parenting Women With Opioid Use Disorder (OUD) and their Infants—a comprehensive Clinical Guide on managing optimal OUD care and treatment developed by the Substance Abuse and Mental Health Services Administration (SAMHSA). This Clinical Guide meets an urgent need among healthcare professionals who treat women with OUD and children exposed to substances by providing reliable information that can be applied in clinical practices to achieve positive outcomes for both mother and infant. It contains an introduction to the guide and factsheets that include clinical scenarios, clinical action steps, supporting evidence, clinical considerations and web resources.

The factsheets are organized into three sections:

• Section I—Prenatal Care (Factsheets #1–8)
• Section II—Infant Care (Factsheets #9–13)
• Section III—Maternal Postnatal Care (Factsheets #14–16)

The Clinical Guide is based on the recommendations published in Advancing the Care of Pregnant and Parenting Women with Opioid Use Disorder and their Infants: A Foundation for Clinical Guidance. The presenters will discuss the process for developing the Clinical Guide and treatment recommendations. Attendees will have the opportunity to ask questions about the development of the Clinical Guide, the recommendations it provides, and next steps.

Sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA)
Posters are in place during the times listed on the schedule. However, authors will be present to discuss their topic(s) on Monday, March 12 from 7:30 a.m.–8:45 a.m. and 3:15 p.m.–4:15 p.m.

The following domestic and international posters will provide valuable research findings to treatment providers:

1. **Bringing it to the MAT: A Collaboration Between Courts and Medication Assisted Treatment Programs**
   Angela Bonaguidi, LCSW

2. **Providing Ongoing Peer-led Motivational Interviewing Trainings for Clinical Staff at Opioid Treatment Program: Model for Fostering Professional Development While Also Providing Patients with State-of-the-art Care**
   Yunhee Choi-Kuaea, MSW

3. **Relevance of Pharmacogenomic Testing In an OTP: A Case Series Report**
   Reynolds Clodfelter, Jr., PsyD

4. **Implementation of Overdose Education and Naloxone Distribution**
   Emily Daniell, MSN

5. **Clinical Utility of a Data-Based Mental Health Patient Engagement Tool in the Dual Diagnosis Population**
   Sydney Goldblatt, MD

6. **Optimal Opioid Substitution Treatment Based on the European Union (EU) Statistics Through 30 Years: What to Learn from Portugal and France?**
   Martin Haraldsen, MD

7. **SUD Services for Prescription Opioid Use in 4-Year College and University Health Centers**
   LCDR Brandon Johnson, PhD(c)

8. **Factors Predicting Treatment Outcome in Heroin Addicts Treated with Naltrexone and Cognitive Behavioral Therapy**
   Jasmina Knežević-Tasi

9. **Average Treatment Duration and Clinical Practice Behaviors in Buprenorphine Treatment: A National Survey of Buprenorphine-Prescribing Physicians**
   Hannah Knudsen, PhD

10. **Relevance of Pharmacogenomic Testing in a Methadone Clinic: A Case Series Report**
    John Kriak, PharmD

11. **Prescription Drug Monitoring Program Data as a Predictor of Diversion in Medication-Assisted Treatment**
    Emily Loscalzo, PsyD

12. **Novel Synthetic Opioids As A Public Health Threat**
    Mercedes Lovrecic, MD

13. **Reported Chronic Pain and Overdose by Patients Enrolling in Opioid Dependence Treatment in France and the United Kingdom**
    Karin McBride, MA

14. **Use of Treatment History to Identify Drug Use Differences in Patients Entering Medication-Assisted Maintenance Substance Abuse Treatment Programs in France and the United Kingdom**
    Karin McBride, MA

15. **Opioid Treatment Program (OTP) Patient Perceptions and Attitudes on Newer Medications for Medication-Assisted Treatment (MAT) at a NYC Treatment Provider**
    Jung-Yun Min, MS

16. **Pregnancy Outcomes Among Female Opioid Drug Users on Medication Assisted Therapy (MAT) in Mathari MAT Clinic, Kenya**
    Chaterine Mutahi, MBChB

17. **Implementation of Directly Administered for ART and Treatment Outcome at Mathari Teaching & Referral Hospital Medically Assisted Therapy Clinic Nairobi, Kenya**
    Tracy Njonjo (Nairobi, Kenya)

18. **The Relation Between Mindfulness Trait and Perceived Stress among Methadone Maintenance Treatment Patients**
    Einat Peles, PhD

19. **The Four Pillars Project: Integrating Substance Use Disorder Treatment and Primary Care within a Community-Based Behavioral Health Care Organization**
    Laura Peters, MPH

20. **Empowering Primary Care Providers to Identify and Effectively Treat Prescription Opioid Use**
    Diego Ponieman, MD

21. **Cognitive Impairments and Intervention in Dual Diagnosis (Mental Illness and Opioid Abuse) Patients**
    Pat Precin, PhD

22. **Quantifying Urinalysis Results to Predict Treatment Retention**
    Angelo Rannazzisi, PsyD

23. **Viral Hepatitis and Liver Fibrosis Screening in Psychiatric Patients by Cross Multidisciplinary Approach: Experience of French Mobile Unit**
    Andre Jean Remy, MD

24. **Increase in Drug Injectors in Southeast U.S. and in Rural-Suburban Counties among Entrants to Opioid Treatment Programs**
    Andrew Rosenblum, PhD

25. **Pharmacists Can Provide MAT: Examining Innovative Models of Collaborative Care**
    Gail Scott, MPH

    Olivier Simon, MD

27. **Peer-Delivered Support Groups in MAT: Observations from the MARS Project**
    Jo Sotheran, PhD

28. **Opioid Misuse and Abuse among Older Adults: Raising Awareness and Improving Access to Care**
    Gilbert Thompson

29. **The Factors Associated with Drop-Out Rate in the Ho Chi Minh City (Vietnam) Methadone Program**
    Vi Thi Tuong Vu, MA
8:45 a.m.–10:15 a.m.
OPENING PLENARY SESSION

Tackling the Opioid Crisis Both Locally and Globally
Broadway Ballroom

MODERATOR:
Allegra Schorr, President, Coalition of Medication Assisted Treatment Providers and Advocates (COMPA), & Vice President, West Midtown Medical Group, New York, NY

KEYNOTE SPEAKERS:
Arlene González-Sánchez, Commissioner, New York State Office of Alcoholism and Substance Abuse Services (OASAS), Albany, NY
Mark W. Parrino, MPA, President, American Association for the Treatment of Opioid Dependence, Inc. (AATOD), New York, NY
Icro Maremmani, MD, President, World Federation for the Treatment of Opioid Dependence, NGO with Special Consultative Status with United Nations Economic and Social Council, Pisa, Italy

The Opening Plenary Session will review AATOD’s strategies and critical efforts in New York State (NYS), as well as plans for work both nationally and internationally. Ms. Allegra Schorr, Conference Chairperson and President of the Coalition of Medication Assisted Treatment Providers and Advocates (COMPA) and Vice President of West Midtown Medical Group, will welcome conference attendees and provide an overview of this exciting conference and the rich offerings available. Ms. Schorr will be followed by Commissioner González-Sánchez who will provide insight into how NYS OASAS is continuing treatment, prevention and recovery efforts to combat addiction across the state. Mr. Mark Parrino, AATOD President, will provide an overview of the challenges, opportunities and accomplishments of AATOD over the past 18 months and will provide insight into the Association’s plans and strategies for the future. Dr. Icro Maremmani, President of the World Federation for the Treatment of Opioid Dependence, will conclude by providing an overview of the opioid crisis throughout the world and will share some of the international work being done to address opioid use disorders abroad.

10:30 a.m.–12:00 p.m.
WORKSHOP SESSIONS

Workshops will offer a chance to review the latest treatment data and health care policies, examine their implications for our patients, and strengthen the skills needed to improve the quality of services.

Foundations of Medication for Opioid Use Disorder (OUD)
Sessions: We offer a special sequence of workshops designed to act as a refresher for seasoned professionals and to meet the needs of individuals who are new to this field. These sessions are designated as Foundations of Medication for OUD.

A1 Methadone 101
Shubert
Laura F. McNicholas, MD, Independent Medical Consultant, Philadelphia, PA
Kenneth B. Stoller, MD, Johns Hopkins University, Baltimore, MD
Methadone maintenance treatment within the setting of comprehensive opioid treatment programs (OTPs) has been available for decades. Yet many clinicians and policymakers do not understand how and why it is effective in treating opioid use disorder (OUD). The presenters will review the basic elements of opioid agonist treatment; examine the pharmacologic aspects of methadone; present initial screening, admission, and assessment techniques; describe associated medical, psychiatric, and substance use conditions associated with OUD; describe the efficacy of methadone maintenance; review other OUD pharmacotherapies; and review the continuum of routine and wrap-around services that are provided in OTPs.

A2 Opioids, Pregnancy, NAS: How We Provide the Best Care for Women and Babies
Majestic
Mishka Terplan, MD, Virginia Commonwealth University, Richmond, VA
Loretta Finnegan, MD, College on Problems of Drug Dependence, Philadelphia, PA
The majority of newborns born to women who receive pharmacotherapy for opioid use disorder develop neonatal abstinence syndrome (NAS). We will review opioid use disorder through the lens of reproductive health with a particular focus on the management of pregnant women and their newborns. Attention will be focused on the responsibilities of Opioid Treatment Program (OTP) providers for reproductive-aged women in general, including the postpartum period, and substance-exposed newborn reporting guidelines. Concrete tools to integrate reproductive health care into OTPs will be shared and the most current evidence regarding NAS etiology and management will be detailed.
A3 Opioid Overdose Recovery Program—An ED-Based Peer Led Initiative

Astor

Suzanne Boyes, EdD, NJ Division of Mental Health and Addiction Services, Trenton, NJ
Adam Bucon, LSW, NJ Division of Mental Health and Addiction Services, Trenton, NJ
Eric McIntira, RWJ Barnabas Health, Institute for Prevention, Opioid Overdose Recovery Program, West Orange, NJ

The Opioid Overdose Recovery Program (OORP) is designed to respond to individuals who are reversed from opioid overdoses and are subsequently treated at hospital emergency departments (ED). OORP utilizes Recovery Specialists and Patient Navigators to engage individuals in the ED and provide non-clinical assistance, recovery supports, referrals for assessment and substance use disorder (SUD) treatment, and follow-up with these individuals. This workshop will provide an overview of OORP including data regarding patients served, preliminary outcomes, and lessons learned. Additionally, the presenters will describe how OORP services have been of benefit to both the patients served as well as the Recovery Specialists who serve them.

A4 Improving Cultural Competencies in Substance Abuse Treatment

Broadway Ballroom

Maxine Fuller, MS, The Bizzell Group, Atlanta, GA
Robert Johnson, MED, Accreditation Readiness, LLC, Columbia, MO

The foundation for the Improving Cultural Competence in Substance Abuse Treatment Seminar is SAMHSA’s TIP 59 Improving Cultural Competence. This comprehensive guide was published in 2014 and is a free resource for healthcare professionals. This workshop will focus on what cultural competence is and the core competences counselors and other clinical staff must have to be able to effectively serve diverse patients, families and communities.

A5 A Patient-Centered Policy to Enhance Retention in OTPs

Soho Complex

K. Michelle Peavy, PhD, Evergreen Treatment Services, Seattle, WA
Paul Grekin, MD, Evergreen Treatment Services, Seattle, WA
Molly Carney, PhD, Evergreen Treatment Services, Seattle, WA

Opioid Treatment Programs (OTPs) can adopt a more patient-centered approach by avoiding punitive measures for discharge, and emphasizing the individual’s clock for change. In this workshop, the presenters will discuss a high tolerance treatment model developed and implemented at an OTP. This workshop will focus on how the OTP can best support the health and safety of patients who continue to use; and how the OTP can promote a recovery environment given a growing proportion of drug using and unstable patients. The discussion will be informed by the presentation of results from a patient satisfaction survey, as well as an internal evaluation of the model.

Policy Makers Luncheon

Monday, March 12

Supported through grants from the Joint Commission, Pinnacle Treatment Centers and CSS, Inc.

1:30 p.m.–3:00 p.m.

Workshop Sessions

B1 Building Therapeutic Partnerships: The Most Important Evidence-Based Practice

Shubert

Robert C. Lambert, MA, Connecticut Counseling Centers, Inc., Waterbury, CT

Research indicates that the quality of the therapeutic relationship has a greater effect on patient retention and outcomes then the specific counseling approach used. This workshop will focus on the opportunities and unique challenges involved in enhancing the therapeutic alliance with medication assisted patients within the clinic setting, a review of the fundamentals of forming and maintaining a therapeutic relationship and the factors that affect the quality of the therapeutic relationship, explore patient expectancy as a therapeutic factor, and discuss the use of patient feedback to strengthen the therapeutic alliance.

*Bases of Medication for OUD

B2 Addressing the Complexity of Working with Pregnant Women with Opioid Use Disorders

Astor

Holly Hills, PhD, University of South Florida, Tampa, FL
Tara Richards, PhD, University of Baltimore, Baltimore, MD
Sherri Kincade, MS, DACCO Behavioral Health, Tampa, FL

Pregnant women with opioid use disorders present unique clinical challenges for Opioid Treatment Programs (OTPs). This workshop will discuss co-occurring disorders in this population and efforts to integrate care. Screening for traumatic experience and evidence-based methods to intervene will be described. Prescriptive practice will be described, drawing on a recent analysis of 4,324 women in Florida OTPs. Current “best practice” recommendations, and debates, will be explored. Implementation of clinical strategies, drawn from experience at a large OTP in Florida, informed by CSAT (2008) recommendations will be reviewed. Case vignettes, highlighting decision-making strategies in a community-based program, will be discussed.

B3 A Case for Integration: Innovative Programs for Veterans with Opioid Use

Majestic

William Hua, PhD, San Francisco VA Healthcare System, San Francisco, CA
Stephanie Cardoos, PhD, San Francisco VA Healthcare System, San Francisco, CA
Matthew Tierney, APRN, University of California, San Francisco, CA
Compared to civilians, veterans are at elevated risk of high-risk opioid use concerns (Seal et al., 2012). Best practices for the treatment of opioid use include integration of medical and non-pharmacological modalities of care. This presentation will describe innovative opioid use treatment options for veterans at the San Francisco VA Healthcare System. Programs include: 1) integrated psychology in the HIV/Liver Clinics, 2) provider-to-provider consultation through a telehealth network and the Prescription Opioid Safety Team and 3) specialty substance use treatment through Addiction Recovery Treatment Services program. Each program’s successes, challenges, and approach to integrated opioid use care will be highlighted.

**B4 A Peace Plan in Action for the Internal Addiction Treatment War**  
Broadway

Robert L. DuPont, MD, Institute for Behavior and Health, Inc., Rockville, MD  
George Kolodner, MD, Kolmac Treatment Centers, Burtonsville, MD

The opioid epidemic requires an end to the decades-long conflicts in treatment over the role of medications and the definition of the core goal of the treatment of opioid and other substance use disorders. This workshop presents the history of these conflicts and explores the challenges that frustrate a peace between programs that do and do not use medications. Results of two pioneering programs will be presented: 1) Hazelden Betty Ford Treatment Centers’ initiative to integrate buprenorphine and naltrexone into an abstinence-oriented program, and 2) Kolmac Treatment Centers’ experience in combining medication for opioid use disorder in an abstinence-oriented intensive outpatient rehabilitation program.

**B5 Financing and Policy Issues for Medication for Opioid Use Disorder**  
Soho Complex

LCDR Brandon Johnson, PhD(c), Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, MD  
Nina Marshall, MSW, National Council for Behavioral Health, Washington, DC  
Peggy O’Brien, PhD, Truven Health Analytics, Bethesda, MD

The economic cost of opioid misuse has proven burdensome ($37 billion annual cost on the health care system) and the number of lives lost to opioid use overdose continues to climb (33,091 opioid-related overdose deaths in 2015). Greater access to medication for opioid use disorder (OUD), an evidence-based intervention to treat various substance use disorders, can mitigate the financial and personal losses that have grown under our nation’s current opioid epidemic. This workshop will describe financing and policy issues for medication for OUD at the regulatory and provider level, including Medicaid coverage of medications to treat opioid use disorder and alternative financing models.

**NEW YORK CITY PRESENTATION**

**The Opioid Overdose Epidemic and NYC Public Health Responses**  
Empire Complex

**MODERATOR:** Hillary Kunins, MD, Bureau of Alcohol and Drug Use Prevention, Care, and Treatment, Division of Mental Hygiene, New York City Department of Health and Mental Hygiene, New York, NY

**SPEAKERS:**  
Mindy Nass, MSW, Bureau of Alcohol and Drug Use Prevention, Care, and Treatment, Division of Mental Hygiene, New York City Department of Health and Mental Hygiene, New York, NY  
Alexandra Harocopos, PhD, Bureau of Alcohol and Drug Use Prevention, Care, and Treatment, Division of Mental Hygiene, New York City Department of Health and Mental Hygiene, New York, NY  
Emily Winkelstein, MSW, Bureau of Alcohol and Drug Use Prevention, Care, and Treatment, Division of Mental Hygiene, New York City Department of Health and Mental Hygiene, New York, NY

In response to the growing opioid overdose epidemic in New York City (NYC), NYC has launched HealingNYC: a comprehensive, multi-agency, multifaceted response. Under HealingNYC, the NYC Department of Health and Mental Hygiene Bureau has implemented a public health approach to achieve HealingNYC goals. Presenters will describe NYC’s burden of overdose, overall approach, and highlight some of its new initiatives, including: Rapid Assessment and Response, a program that uses real-time surveillance data to identify NYC communities experiencing overdose outbreaks and deliver targeted interventions and education; the naloxone distribution program, which aims to distribute 100,000 kits citywide; and the peer workforce development program, to support organizations to include peers in their services and to train and place peers into a variety of treatment and care settings.

**Sponsored by the New York City Department of Health and Mental Hygiene**

**3:15 p.m.–4:45 p.m.**

INTERNATIONAL PRESENTATIONS

**Psychopharmacological Treatment of Dual Disorder Heroin Use Disorder Patients**  
Soho Complex

Luca Rovai, MD, Dept. of Psychiatry, Northern-West Tuscany Region Local Health Unit, Versilian Zone, Viareggio, Italy  
Angelo Gi Maremmani, MD, Dept. of Psychiatry, Northern-West Tuscany Region Local Health Unit, Apuan Zone, Massa, Italy

This workshop will describe in details the combinations between methadone and psychopharmacological medications that are useful in the experience of Dual Diagnosis Unit at Santa Chiara University Hospital in Pisa, Italy, to treat heroin addicts with dual disorders. We will pay attention to the combinations methadone-antidepressants, methadone-antipsychotics, methadone-mood stabilizers and methadone-benzodiazepines for patients with affective disorders and chronic psychosis.

**Sponsored by the New York City Department of Health and Mental Hygiene**

**Pre-Banquet Cocktail Reception**

**Monday, March 12**

**Supported through a grant from Acadia Healthcare**
Please join us for the centerpiece of our Conference, a moving tribute to those individuals who have been nominated and selected by their peers for extraordinary service in the opioid treatment community. These successful Award recipients have devoted themselves to improving the lives of patients in our treatment system. Dr. Vincent Dole and Dr. Marie Nyswander were the first recipients of this Award in 1983. The Association has been responsible for bestowing this honor since the first Regional Conference of 1984 in New York.

The Nyswander/Dole “Marie” Awards will be presented by Loretta Finnegan, MD.

The 2018 American Association for the Treatment of Opioid Dependence Conference recognizes outstanding contributions to opioid treatment by honoring the following individuals with the Nyswander/Dole Award.

**C. HOPE BOLGER, RPh, VIRGINIA**

Cynthia Hope Bolger has made significant contributions to the field of Medication Assisted Treatment for 30 years. Ms. Bolger served as a monitor of Opioid Treatment Programs for the Office of Substance Abuse Services from 1987-1994. She continually served as a valuable and respected resource for SAMHSA and CSAT projects through various government contractors. She has served as a CARF surveyor since 2002 and serves as a mentor for surveyor training. Consistent with her commitment to comprehensive, respectful, and quality treatment, Hope has consulted with several state agencies addressing opioid treatment services, provided technical assistance for accreditation readiness for scores of individual treatment programs and multi-site providers, and participated in curriculum development for training events. Additionally, during her time as monitor and SOTA for Virginia the number of OTPs more than tripled. As Virginia’s SOTA, Hope signed the Memorandum of Agreement Among the Southeast State Authorities in 1994, which led to Model State Standards which became a model for CSAT accredita-
tion standards. Hope also participated in the development of the DEA NTP Best Practice Guidelines in 2000. The positive impact that Ms. Bolger has had on this field has been so significant that in 2007 the Virginia Association of Medication Assisted Recovery Programs created an award to recognize outstanding individuals in the MAT field and named it the Hope Bolger Award. Ms. Bolger has had a substantial influence on the quality of treatment in OTPs not only in Virginia, but across the nation.

**GABRIELE FISCHER, MD, AUSTRIA**

Dr. Gabriele Fischer is an internationally renowned and respected psychiatrist, scientist, and teacher in the field of MAT. She has dedicated her career to the ideals embodied in the concept of “Civil Society” and has applied those ideals to causes that the United Nations has deemed to be among the most important facing the world today. Dr. Fischer has promoted effective opioid maintenance treatment through ground-breaking research, countless worldwide activities, and technical consultancy for WHO & UNODC. Her academic and scientific contributions are extensive and have international impact. She has conceived, designed, and carried out numerous research investigations, particularly ones that relate to the female addict and co-morbidities in the drug addicted population. Dr. Gabriele Fischer’s appointment at the Medical University of Vienna recognizes her commitment to and effectiveness in treatment, research and teaching at different levels. Not only has she successfully established for decades a methadone maintenance program at her addiction treatment program, she has engaged with a network of general practitioners in collaborating with patients on opioid maintenance. Dr. Fischer has been an inspiration to countless colleagues all over the globe who have had the privilege of observing her compassionate care, listening to her impassioned advocacy of evidence-based treatment of addiction, and reading reports in the professional literature that describe her scientific contributions. Her work demonstrates the curiosity, humility, and courage that are indispensable in the quest for new and improved therapeutic approaches.

**W. JONAS COATSWORTH, MA, SOUTH CAROLINA**

Jonas Coatsworth demonstrates the clinical skills necessary to empower patients to become the change agents in their own lives and also serves as a change agent at the systems level. Jonas assumed the Chair of the South Carolina Association for the Treatment of Opioid Dependence (SCATOD) at a critical juncture for opioid treatment in South Carolina. Through his tireless efforts, he laid the foundation for SCATOD to have a seat at the table whenever the topic related to opioid treatment. He constantly worked to increase people’s understanding of the positive benefits to individuals, families and communities of Medication Assisted Recovery. Jonas established working relationships with the new regulators and provided resources to expand their understanding of OUD and MAR. He pushed to have SCATOD included as part of the work group that was developing solutions to the opioid related issues in the state. He became the “go to” person related to all things MAR. He did not sit back and wait to be invited, he reached out and created opportunities. He not only worked to improve the quality of services provided to individuals with OUD in South Carolina, but to raise the visibility and awareness of MAR. Jonas Coatsworth’s boundless energy and total commitment to reducing the stigma and discrimination has improved the lives of individuals with opioid use disorder in South Carolina.

**KATHLEEN MAURER, MD, CONNECTICUT**

Dr. Kathleen Maurer is the Connecticut Department of Correction’s Director of Health and Addiction Services and Medical Director. During her career, Dr. Maurer has provided hands-on clinical care and medical program management in the private sector. In the realm of correctional care, she is particularly interested in the quality of patient care, in the role of correctional healthcare in the broader scope of public health such as in the treatment of Hepatitis C Virus in offender patients, and in facilitating re-entry programs through integration of community and correctional healthcare. Her recent initiatives include working to expand Medicaid access to halfway house residents and to integrate Medicaid utilization management with the correctional system. Dr. Maurer is the primary author of the monograph entitled “Hepatitis C in Correctional Settings: Challenges and Opportunities” and published by the American Correctional Association. She is a member of the Institute of Medicine Committee charged with evaluating the feasibility of eliminating Hepatitis B and C in the US. In August 2017, she played a key role in the adoption of a resolution by the American Correctional Association supporting medication assisted treatment in the correctional environment. Dr. Maurer earned her MD from Yale University. She also earned a MPH from Yale. She holds a MBA from the University of
Connecticut and is board-certified in internal medicine, occupational, environmental and addiction medicine.

**STACEY PEARCE, GEORGIA**

Stacey Pearce has been in the field of medication-assisted treatment in Georgia since 1995. Stacey served as program director of one of the pilot programs for accreditation, where her love of policy and procedure writing was born. Stacey became a Certified Addiction Specialist (CAS) from the American Academy of Health Care Providers in Addictive Disorders and opened her own OTP in 2002. Since 2007, Stacey has served as the Georgia state delegate to the AATOD Board and is an active CARF surveyor. Stacey has been instrumental in educating policy makers and the public in Georgia about medication assisted treatment. She helped organize the providers during two Methadone Treatment Awareness Days at the State Capitol, helped obtain Medicaid coverage for OTP services and continues to work on obtaining a more comprehensive reimbursement package, and ultimately helped pass legislation that lifted the moratorium on new OTPs. Stacey has also been involved in the development of new regulations that were required following the new legislation in 2017. Stacey’s educational involvement extends to serving as the Plenary Chair for the 2015 AATOD Conference, providing ongoing dissemination on the evidence base of MAT to the Georgia providers group, mentoring new program directors and is always available to answer a provider’s question. Stacey’s selfless nature, her dedication, her honesty and sincerity would make Drs. Dole and Nyswander proud for her to receive this prestigious award.

**VICKIE L. WALTERS, LCSW-C, MARYLAND**

Ms. Vickie Walters has more than 25 years of experience in the addiction treatment field. She served as the Executive Director of REACH Health Services since 2009; where she has added IOP services and an office based opioid treatment program, had all staff trained and maintained in Motivational Interviewing, Trauma Informed Care and LGBTQ Cultural Competency. In this position, she is responsible for active legislative advocacy and continued engagement in implementing program refinements, expansion of clinical services, and integration with research initiatives. Ms. Walters has served on the Maryland Medicaid Advisory Board since 2015 and as President of the Baltimore City Substance Abuse Directorate since 2015 and serves as a member of the Behavioral Health System Baltimore’s Community Advocacy Committee. She was a member of the Baltimore City Mayor’s Heroin Task Force in 2015 and currently serves on the Baltimore City Health Departments Neighborhood Relations Workgroup and co-chairs a committee within the workgroup. Within these many committees she works tirelessly to advance the use and acceptance of medication assisted treatment. In addition, she has been an officer of the Maryland Association for the Treatment of Opioid Dependence since 2007, and serves currently as President-Elect. Ms. Walters was the chairperson of the 2016 American Association for the Treatment of Opioid Dependence International Conference in Baltimore, MD. Ms. Walters is a caring and empathetic person whose advocacy promotes the power of recovery and the dignity of the human spirit.

**RICHARD LANE/ROBERT HOLDEN PATIENT ADVOCACY AWARD**

Richard Lane was a long-term heroin user who, upon release from prison in 1967, was instrumental in establishing one of the Nation’s first methadone treatment programs. In 1974, he became the Executive Director of Man Alive and later served as Vice President of the American Methadone Treatment Association and as Vice Chairman of the Governor’s Council on Alcohol and Drug Abuse in Maryland. Mr. Lane was a passionate advocate for methadone treatment and, by disclosing his own treatment experiences, provided inspiration to patients and colleagues alike. Robert Holden was also a recovering heroin user, who later became the Director of PIDARC, an outpatient methadone treatment program in the District of Columbia. He later served as the Vice President of AATOD, succeeding Richard Lane’s term of office. This award was established in 1995 and recognizes extraordinary achievements in patient advocacy.

**PAUL BOWMAN, CMA**

Paul Bowman serves as Boston NAMA Chapter Director and Vice Chair of Consumer Advisory Board, MA Bureau of Substance Abuse Services. Paul has dedicated his life to treating the disease of addiction, addressing injustice, and removing stigma. Paul Bowman sat on the Advisory Board of Boston Public Health Commission needle exchange, served as a patient advisor to Habit OPCO Opioid Treatment Board and successfully changed policy that created better access for treatment. Mr. Bowman was personally selected by SAMHSA/CSAT as an expert on a panel to address QT prolongation. He served as a member of SAMHSA National Hepatitis C roundtable for five years. Paul has attended many of the Annual Chief Residents Immersion Training on Addiction Conferences to train Residents on addiction from real lived experience to give them skills to be better informed in treating addiction. He has taken part in the annual statewide recovery day at the Statehouse giving a story and a face of recovery. Paul Bowman exemplifies the values of a true leader who is vested in the good of others. He is the voice for recovery, for the many who have no voice, for the many lives we have lost, and for the many that continue in anguish every day. Paul has passion, commitment, and empathy to make a difference for others. He fights this battle every day.

**FRIEND OF THE FIELD AWARD**

The prestigious Friend of the Field Award was established by AATOD’s Board of Directors. This award recognizes extraordinary contributions to the field of opioid treatment by an individual whose work, although not directly related to opioid treatment, has had a significant impact on our field. The 2018 Friend of the Field Award has been awarded to:

**THE HONORABLE CHRIS CHRISTIE**

As Governor of New Jersey, Chris Christie spotlighted the need to address stigma, change the conversation on drug addiction, and focus on treatment. Governor Christie has remained steadfast in his advocacy for a holistic approach to battling the scourge of drug addiction by increasing funding for Narcan; expanding the successful recovery coach program; and proposing and signing a historic, first in the nation, 5-day limit on initial opioid prescriptions. Chris Christie also executed landmark, bipartisan legislation to put in place a state-wide, mandatory drug court program. Chris Christie shows unwavering commitment to supporting solutions to the opioid crisis through his work on the President’s Commission on Combatting Drug Addiction and the Opioid Crisis in addition to his extensive contributions in the state of New Jersey. He directed hundreds of millions of dollars toward prevention, treatment, and recovery initiatives, and used his entire state of the state address last January to outline his plan. This contribution will make the difference to so many lives in New Jersey and hopefully will serve as a national model for other states to emulate. Chris Christie is a national leader who truly understands the depth of the crisis from both a policy and personal stand point. As chairman of the President’s Commission he asked the President to declare opioid addiction and overdoses a national public health emergency. He continues to keep this topic in the national spotlight, which is necessary if we want to stop the relentless and senseless loss of American lives to this life-threatening disorder.
8:45 a.m.–10:15 a.m.
MIDDLE PLENARY SESSION

Advancing & Integrating Specialized Addiction Treatment & Recovery
Broadway Ballroom

MODERATOR: Robert A. Kent, Esq., General Counsel, New York State Office of Alcoholism and Substance Abuse Services (OASAS), Albany, NY

KEYNOTE SPEAKERS:
Jason A. Helgerson, MPP, Deputy Commissioner/New York State Medicaid Director, New York State Department of Health Office of Health Insurance Programs, Albany, NY
Kathleen Maurer, MD, Director of Health and Addiction Services & Medical Director Connecticut Department of Corrections, Wethersfield, CT
Mark Friedlander, MD, Chief Medical Officer, Aetna Behavioral Health, Blue Bell, PA

The conference theme, Advancing and Integrating Specialized Addiction Treatment and Recovery, was chosen to place a special focus on the need for multiple different systems to work using an integrated approach in order to provide quality care to patients struggling with addiction. This themed plenary session features three thought leaders who have been responsible for integrating care for opioid use disorders into large healthcare systems. Moderated by Robert A. Kent, this session will focus on the incorporation of expert addiction care through the differing perspectives of Medicaid reform, commercial insurance and the corrections system. Jason Helgerson will provide an overview of his pioneering work as the Director of New York State’s Medicaid program in which he has developed innovative payment systems for treatment and recovery. Dr. Kathleen Maurer will share her groundbreaking work in integrating medication for opioid use disorder into the entire Connecticut Department of Corrections system and Dr. Mark Friedlander will discuss the integration of medication for opioid use disorder into the commercial insurance benefit. Differing perspectives on integration of addiction treatment into healthcare systems will be provided that will demonstrate the importance of collaboration and integration in order to support patients and treatment providers.

10:30 a.m.–12:00 p.m.

C1 Meeting the Needs of Patients with Co-Occurring Disorders
Soho Complex
Joan E. Zweben, PhD, University of California, San Francisco, CA

This workshop will discuss how counselors can help integrate the treatment of psychiatric disorders into the opioid treatment program. We will discuss addictive behavior and psychiatric problems, barriers to addressing them, prioritization of treatment tasks and appropriate education for patients. We will focus on anxiety disorders (especially PTSD), and mood disorders and also review screening and assessment of suicide risk from the perspective of agency protocols as well as the role of the counselor. Treatment issues will include psychosocial issues (coping strategies, stigma), medication issues (attitudes, feelings, adherence), and collaboration with physicians. We will review several evidence-based treatments.

*Foundations of Medication for OUD

C2 Federal Addiction Policy: Protecting and Building on the Gains We’ve Made
Broadway
Paul Samuels, JD, Legal Action Center, New York, NY
Ellen Weber, JD, Legal Action Center, Washington, DC
Gabrielle de la Gueronniere, JD, Legal Action Center, Washington, DC

The addiction care system continues to face tremendous change and upheaval. A new administration and new Congress have brought additional uncertainty about the policies governing coverage for and access to substance use disorder care. This workshop will review recent developments at the federal level related to coverage and access to addiction care, including medication for opioid use disorder. Workshop presenters will also discuss potential future federal developments related to substance use disorder treatment, the future of medication for opioid use disorder (OUD) access, delivery system reforms, and opportunities available for improving federal policy moving forward.

C3 Integrating Medication for Opioid Use Disorder into Adult Drug Court
Shubert
Jeri Cohen, JD, 6th Circuit Court, Miami, FL
Patricia Ares-Romero, MD, Jackson Health System, Miami, FL

The Miami Dade Circuit Court and Jackson Behavioral Health Services have partnered to create an outpatient clinic for individuals with opioid use disorder who are entering adult drug court. The clinic, funded through a SAMHSA grant, provides outpatient detoxification services with medication for Opioid Use Disorder (OUD), targeted case management, drug and mental health counseling and other health related services. This is a unique partnership between the Court and a public hospital. The workshop will provide other jurisdictions with a comprehensive set of guidelines for incorporating medication for OUD into court practice.
C4 Medication for Opioid Use Disorder Expansion in the RI Department of Corrections: Needs Assessments, Clinical Intervention, Reentry and Outcomes

Majestic

Jennifer Clarke, MD, Rhode Island Department of Corrections, Providence, RI
Rosemarie Martin, PhD, Brown University, Providence, RI
Linda Hurley, MA, CODAC Behavioral Healthcare, Providence, RI

This workshop will examine the medication for opioid use disorder (OUD) program instituted by the Rhode Island Department of Corrections (RIDOC) in cooperation with CODAC Behavioral Healthcare, an Opioid Treatment Program contracted vendor. Utilizing a PowerPoint presentation and handouts, the presenters will describe the program from initial conception to implementation. The presenters will provide a description of Rhode Island’s needs assessment, drug screening, and medication for OUD protocols. Outcome data will be presented and patient testimonials will highlight the impact of the program on the incarcerated population. This workshop will provide participants with information they will need to consider when expanding medication for OUD within their own correctional facilities.

C5 A Most Vexing Clinical Conundrum: Is it Pain, Addiction, or Both?

Astor

Mark L. Kraus, MD, Connecticut Counseling Centers, Inc., Waterbury, CT
Matthew Guzzetti, MA, Connecticut Counseling Centers, Inc., Waterbury, CT

This workshop will provide an in depth look at a patient population that we see in our Medication for Opioid Use Disorder (OUD) Programs and Primary Care Settings, i.e., those patients who struggle with a primary opioid use disorder and are concomitantly being treated for chronic pain. The workshop content will focus on issues inclusive of epidemiology, triage, and practice management strategies in regard to the physician’s and clinician’s role in successfully managing these patients to achieve the best possible therapeutic and medical outcomes in a medication for OUD setting.
#3 Addressing the Opioid Epidemic and Overdose: Grief and Loss Clinical Intervention in the Opioid Treatment Program

Astor
Heidi DiRoberto, MA, Spectrum Health Systems, Worcester, MA
Lynn Leblanc-Marrone, MA, Spectrum Health Systems, Worcester, MA
Jill McKiernan, LMHC, Spectrum Health Systems, Worcester, MA

It is estimated that Massachusetts is experiencing 4-6 fatal opioid overdoses a day. These premature deaths affect patients and staff tremendously. With the rise in numbers of fatal overdoses our patients are experiencing premature loss at much higher rates than other populations served. The need for a clinical intervention was identified to address loss with patients who are in recovery. This workshop will include a description of the development of the curriculum, implementation and integration throughout our continuum of care. Outcome data will also be presented, which includes patient self-report, and collaboration between the individual clinician and group leader.

HOT TOPIC ROUNDTABLES

Confronting Stigma and Misinformation within Methadone Treatment and Beyond
Shubert
FACILITATORS:
Robert C. Lambert, MA, Connecticut Counseling Centers, Inc., Waterbury, CT
Alan Nolan, LCSW, Connecticut Counseling Centers, Inc., Danbury, CT
Matt Guzzetti, MA, Connecticut Counseling Centers, Inc., Norwalk, CT

Medical Maintenance
O’Neill
FACILITATORS:
Edwin Salsitz, MD, Mount Sinai Beth Israel, New York, NY
Kellie Rollins, PsyD, San Francisco VA Medical Center, San Francisco, CA

Integrated Care in the OTP
Ziegfield
FACILITATORS:
Patrick Seche, MS, University of Rochester Medical Center, Rochester, NY
Kevin Armington, MD, West Midtown Medical Group, New York, NY

Elderly Patient Care
Duffy/Columbia
FACILITATORS:
Soteri Polydorou, MD, New York University School of Medicine, New York, NY
Benjamin Han, MD, New York University School of Medicine, New York, NY

3:15 p.m.–4:45 p.m.
WORKSHOP SESSIONS

D1 Methadone: From Narcotic to Normalizer, the Misperceptions and the Persistence of Bias and Prejudice
Soho Complex
Herman Joseph, PhD, Stop Stigma Now, New York, NY
Joycelyn Woods, MA, NAMA Recovery, New York, NY
Brenda Davis, MSW, NAMA Recovery, New York, NY

This workshop concentrates on methadone treatment as a normalizer for the impairments of opioid use disorder, and the misperceptions of it as substitute for heroin and continued opiate addiction. Drs. Dole, Nyswander and Kreek developed the first hypothesis of opioid addiction as a metabolic disease and that methadone normalized these impairments. Methadone treatment continues to be criticized as just substituting one addiction for another. Another misperception that treatment needs to be controlled results in a clinic system for persons early in treatment. Office-Based Opioid Treatment (OBOT) has not been developed for patients in long term recovery resulting in comprehensive treatment to normalize their lives.

*Foundations of Medication for OUD

D2 Mindfulness Interventions with Mothers in Substance Use Treatment
Majestic
Diane Abatemarco, PhD, Thomas Jefferson University, Philadelphia, PA
Meghan Gannon, PhD, Thomas Jefferson University, Philadelphia, PA

This workshop will introduce attendees to the principles of mindfulness and describe how a Mindfulness Based Parenting (MBP) intervention was implemented into an outpatient drug treatment program for pregnant and parenting women. Attendees will experience mindfulness activities such as brief meditation. Presenters will discuss how the intervention was adapted to a drug treatment program setting, results from 19 cohorts that completed the program, basic tenets of the curriculum of the program, integration in a clinical setting, sustainability, and lessons learned. Attendees will also learn how a similar mindfulness based intervention could be applied in their own treatment program.
D3 Shared & Different Aims: Treatment and Probation Systems in Collaboration
Astor
Laura Levine, LMHC, CODAC Behavioral Healthcare, East Providence, RI
Kathleen Hopkins, MPA, United States Probation Office, Foster, RI

Today’s treatment programs addressing substance use disorders seek to meet the needs of the rapidly increasing, high-risk population of individuals in prison or on probation. Historically, differing priorities and objectives of the criminal justice system and those of the substance abuse treatment profession have created gaps in care and a lack of cohesive treatment approaches. Using case studies, presenters from both CODAC and the Federal Probation system will consider these challenges and how to address them effectively, minimizing risk to the public while expanding access to Medication for opioid use disorder (OUD) and maintaining the integrity of professional evaluations and treatment services.

D4 The Treatment Challenges of the Emerging Role of Legal Cannabis in OTPs
Broadway
Alan Lee Nolan, LCSW, Connecticut Counseling Centers, Inc., Danbury, CT

Medical and legal cannabis uses are becoming an increasing focus within Opioid Treatment Programs (OTPs). This workshop focuses on the unique challenges involved with addressing the evolving role of medical marijuana for patients enrolled in an OTP. The presenter will examine the numerous questions relating to marijuana’s potent psychoactive properties, associated risk management concerns, the inconclusive empirical data regarding adverse health consequences, and how these factors create significant challenges for policy decisions, treatment providers, treatment models, and consumer perspectives. An analysis of the potential service implications of marijuana use among OTP patients will be explored.

D5 Psychopharmacological Treatment of Dual Disorder Heroin Use Disorder Patients
Shubert
Icro Maremmani, MD, Santa Chiara University Hospital, Pisa, Italy
Angelo Gi Maremmani, MD, Dept. of Psychiatry, Northern-West Tuscany Region Local Health Unit, Versilian Zone, Viareggio, Italy
Luca Rovai, MD, Dept. of Psychiatry, Northern-West Tuscany Region Local Health Unit, Apuan Zone, Massa, Italy

The workshop will describe in detail the combinations between methadone and psychopharmacological medications that are useful, in the experience of Dual Diagnosis Unit at Santa Chiara University Hospital in Pisa, Italy, to treat heroin addicts with dual disorders. We will pay attention to the combinations methadone-antidepressants, methadone-antipsychotics, methadone-mood stabilizers and methadone-benzodiazepine for patients with affective disorders and chronic psychosis.
CONFERENCE SESSIONS

Wednesday, March 14 continued

E3 Buprenorphine Administration in the ED: Combating the Opioid Epidemic

Shubert

Marla Oros, MS, The Mosaic Group, Towson, MD
Christopher Welsh, MD, University of Maryland School of Medicine, MD
Eric Weintraub, MD, University of Maryland School of Medicine, MD

The United States is experiencing an opioid epidemic. Opioid-dependent patients are at high-risk for acute and chronic health complications, often presenting to Emergency Department for treatment. Patients being treated for acute medical problems have been shown to be in a vulnerable period with a resulting readiness to make behavioral changes and enter drug treatment. This team has developed guidelines to integrate buprenorphine administration for patients who present to their emergency departments with an opioid use disorder. They will describe the process used to gain hospital approval and to develop the clinical protocol. Preliminary data, along with lessons learned will be presented.

E4 Effective Use of Technical Assistance for Opioid Treatment Programs

Astor

Stephen Shearer, BS, The Bizzell Group, Redwood City, CA
Brenda Gilliam-Jones, MPA, The Bizzell Group, Orlando, FL
Ivette M. Ruiz, MA-CRP, Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, MD

The Opioid Treatment Program Quality contract at The Bizzell Group was developed by the Substance Abuse and Mental Health Services Administration (SAMHSA) to provide strategies such as onsite and offsite technical assistance (TA) and resources that improve quality of care within opioid treatment programs (OTPs). The purpose of this workshop is to discuss the effective use of TA within an OTP from the perspective of 3 successful programs and 2 consultants that conduct TA visits. Previous versions of this contract have indicated that programs that use TA have fewer deficiencies cited in their accreditation survey and are able to provide consistent quality care and treatment to their patients.

E5 Public Policy and Access to Recovery Housing for People on Medication for Opioid Use Disorder

Soho Complex

Sterling K. Johnson, JD, Mental Health Partnerships, Philadelphia, PA
Gail G. Scott, MPH, Substance Use Disorders Institute for Education, Policy and Research, Philadelphia, PA

In this workshop, the presenters will provide examples of policies that have been implemented in different states to increase access to recovery housing for patients taking buprenorphine and methadone. The workshop will compare and contrast regulations and laws from several states, and outline research gaps in this emerging area of public health policy. Participants will receive copies of a policy brief that workshop attendees can use to advocate with recovery housing operators to educate them on civil rights and medication for opioid use disorder. The emerging issue of medical cannabis and recovery housing policy will also be discussed.

9:45 a.m.–11:15 a.m.

WORKSHOP SESSIONS

F1 Regulatory Updates—42 C.F.R. Part 2, Part 8, and CARA

Soho Complex

LCDR Brandon Johnson, PhD(c), Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, MD
C. Danielle Johnson Byrd, MPH, Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, MD
Suzette Brann, PhD, Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, MD

Federal officials will provide an update on efforts to modernize privacy regulations of substance abuse treatment records and to increase the patient limit for physicians prescribing opioid medications to treat an opioid use disorder under the Drug Addiction Treatment Act of 2000. They will also discuss new legislation that allows advanced practice practitioners to dispense and prescribe buprenorphine products for an opioid use disorder. Finally, the process for using midlevel practitioners within opioid treatment settings will be discussed.

Sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA)

F2 Red Light: Reducing the Harm in Sex Work

Broadway

Pastor James Sizemore, Southeastern Exchange, Fayetteville, NC
Stephanie Dixon, CSAC, Carolina Treatment Center of Fayetteville, NC

Many patients in treatment are or have been sex workers. How do you start a conversation about their work? Should we expect a patient to stop this work if they do not want to, and how can we make their work safer? This will be an interactive discussion for treatment providers interested in strengthening their knowledge of sex workers, their legalities and rights, and will also help providers learn how to have open and honest conversations that are not stigmatizing. Topics will include HIV and STD testing and how to help a patient understand the importance of knowing their status.

Sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA)

F3 Feedback Informed Treatment: Enhancing Cultural Sensitivity & Alliances

Shubert

Alan Lee Nolan, LCSW, Connecticut Counseling Centers, Inc., Danbury, CT
Matthew Guzzetti, LADC, Connecticut Counseling Centers, Inc., Danbury, CT

Steps required for removing barriers toward enhancing culturally sensitive medication for opioid use disorder services, requires an agency’s refinement toward a culture of a “collective alliance.” Such a collective is based upon culturally mindful, person-centered recovery alliances focused on: a motivational enhancement skill streaming process; a strength-based patient centered perspective; progressive cultural competence; valuing a patient’s self-determination; and individual accountability in the recovery process. This model facilitates a shift away from any predetermined course of treatment, toward patient empowerment and the identification of resources needed for creating a self-directed recovery action plan, as well as the augmentation of personnel developments required for this challenge.
11:30 a.m.–1:00 p.m.
CLOSING PLENARY SESSION

How the Federal Government is Fighting Back Against the Opioid Epidemic

Broadway Ballroom

MODERATOR:
Allegra Schorr, President, Coalition of Medication Assisted Treatment Providers and Advocates (COMPA), & Vice President, West Midtown Medical Group, New York, NY

KEYNOTE SPEAKERS:
The Honorable Elinore McCance-Katz, MD, Assistant Secretary for Health and Substance Use, United States Department of Health and Human Services (HHS), Washington, DC
Honorable Patrick J. Kennedy, II, Former Congressman (D-RI); Founder, The Kennedy Forum; Co-Founder, One Mind; Commissioner, President’s Commission on Combating Drug Addiction and the Opioid Crisis

Innovations in Strengthening Partnerships Between OTPs & Recovery Homes

Astor
Carolyn Hartfield, CAADC, Illinois Department of Human Services Division of Alcoholism and Substance Abuse, Chicago, IL
Kate Mahoney, LCSW, Naomi Ruth Cohen Institute at The Chicago School of Professional Psychology, Chicago, IL

Learn to replicate Illinois’ collaborative model to deliver integrated staff training for the recovery home and opioid treatment systems, designed to: 1) strengthen working relationships between the two systems; 2) improve treatment retention by building support for treatment; 3) dispel any lingering myths about medication for opioid use disorder still held by recovery home staff; 4) increase system coordination and break down system silos; 5) increase knowledge of recovery home staff on the changing trends and demographics of the opioid epidemic; and 6) increase referrals between the two systems to better respond to the needs of opioid dependent individuals.

Prescribing Buprenorphine Using Telemedicine: Practical and Regulatory Issues

Majestic
Eric Weintraub, MD, University of Maryland School of Medicine, Baltimore, MD
Joy Chang, MD, University of Maryland School of Medicine, Baltimore, MD
Aaron Greenblatt, MD, University of Maryland School of Medicine, Baltimore, MD

The United States is in the midst of an opioid epidemic resulting in a national public health crisis. The rate of deaths related to opioid overdose has more than quadrupled since 1999. Rural areas have been disproportionately impacted. Medication for opioid use disorder (OUD) with methadone and buprenorphine are evidence based treatments for OUD. However, numerous barriers exist and restrict access to treatment especially in rural areas. This workshop will provide an overview of telemedicine and the use of telemedicine to provide addiction treatment. It will then discuss regulatory and clinical issues specific to the use of telemedicine to prescribe buprenorphine.
GREENWICH HOUSE
Keeping true to its Settlement House roots, Greenwich House continues to address the most critical social needs of the New York City community. With this holistic view, Greenwich House provides MAT, as a gold standard of care, in a comprehensive and community-focused environment. Additional services offered include outpatient substance use treatment services, family development services as well as aging and youth.

LOWER EASTSIDE SERVICE CENTER SU CASA
Su Casa is part of the Lower Eastside Service Center that began in 1959 at 7 Gouverneur Slip East, New York. Su Casa, meaning your home, is the site for three unique residential therapeutic community programs. Methadone to Abstinence Rehabilitation is a 12/18-month therapeutic community for adults with opioid dependence wanting to taper off of methadone/buprenorphine and reach long-term stable recovery. ShortStay Methadone Rehabilitation is a 6- to 9-month methadone/buprenorphine maintenance therapeutic community for adults needing the intensity of residential treatment and MAT. It is designed for clients presenting great difficulty maintaining stability at ambulatory programs. Pregnant Women and Infant’s Program is a very unique 6- to 15-month treatment program for mothers and their infants. It is designed for pregnant women who have a history of opiate dependence or receive methadone. Each combines the effectiveness of community as method with the most current evidence-based clinical practices including medication-assisted treatment.

MONTEFIORE MEDICAL CENTER—DIVISION OF SUBSTANCE ABUSE (DOSA) WELLNESS CENTER AT PORT MORRIS
The Montefiore (previously Albert Einstein) Division of Substance Abuse clinics opened in the late 1960’s as MAT pioneers in both New York City and internationally. Montefiore has more than 1,100 opioid treatment patients at the Port Morris Wellness Center. Come see this patient-centered clinic in the South Bronx, an easy commute from midtown. In addition to comprehensive services that include MAT (methadone and buprenorphine), individual counseling, group counseling, family and peer support (Montefiore/Albert Einstein is the birthplace of the world famous MARS program), the Port Morris program offers integrated primary care that includes treatment for HIV and Hepatitis C. As a part of their medical services, Port Morris offers Direct Observed Therapy (DOT) for patients who choose this support to promote adherence to all physical and behavioral health medications. Arts programs are a growing part of the clinic’s offerings and currently include a creative writing group and a dance group.

VIP COMMUNITY SERVICES
Located in the epicenter of New York City’s opioid epidemic in the Tremont area of the Bronx, VIP offers MAT services to close to 1,500 patients and provides residential and outpatient substance use and mental health treatment services. The continuum of services at VIP also includes housing and shelter services. VIP is dedicated to providing quality care that inspires to successfully meet the multifaceted and ever-changing needs of a culturally diverse community. In addition to being designated as a Certified Community Behavioral Health Clinic (CCBHC), VIP is the NYS downstate provider working with New York State OASAS on their SAMHSA project to increase access to opioid treatment in three high-risk areas identified by OASAS. OASAS is establishing Centers of Treatment Innovation (COTIs) to enhance existing SUD services and build a robust capacity to provide the full range of MAT options, evidence-based practices and peer support services. With the support of OASAS, VIP is also constructing its very own state of the art facility, and reconfiguring the organizational structure to sustain the same proficient localized services.

WEST MIDTOWN MEDICAL GROUP
Conveniently located in Midtown Manhattan, West Midtown Medical has been a leader in MAT services for over 40 years. Offering a comprehensive and individualized approach to recovery, West Midtown offers individualized treatment options including methadone maintenance, outpatient treatment, buprenorphine, extended-release naltrexone and ancillary withdrawal management. Fully believing in a holistic approach to treatment, West Midtown Medical Group offers fully integrated primary care services including HIV treatment and podiatry care, and it has incorporated Hepatitis C treatment into its continuum.

NEW THIS YEAR—VIRTUAL CLINIC TOURS
Virtual Tours may be viewed in the COMPA Booth in the exhibit hall.

CONIFER PARK PLATTSBURGH
Conifer Park Plattsburgh’s outpatient program is one of six Conifer Park outpatient treatment programs in upstate New York. An integrated program provides a wide range of services addressing the needs of a diverse patient base. The program provides intensive programming both day and evening, dual recovery services and medication assisted treatment that includes methadone, Suboxone and Vivitrol, not to mention any other medications necessary to assist one’s recovery. In November of 2013, this site opened the first OTP program in the North Country and until the opening patients would have to travel roughly six hours round trip to receive treatment.

CROUSE HOSPITAL
Take a virtual tour of Crouse Hospital’s OTP in Syracuse, NY. Dedicated to serving their community, the Crousse OTP is located in a converted house on a residential street. This focus on community integration is evident in their patient-centered approach and how they demonstrate dignity and respect in the treatment process. The Crousse team has been incremental in advocating for the advance of MAT in Central New York and developed a Central New York providers’ collaborative to advance treatment, support the expansion of capacity and ensure support for providers and patients.

STRONG MEMORIAL HOSPITAL
Strong Memorial’s OTP is part of their comprehensive behavioral health services. In fact, Strong was selected as one of a small group of New York providers to participate in a SAMHSA Certified Community Behavioral Health Clinic/CCBHC demonstration project. Recognizing the importance of all forms of MAT in this continuum and the benefit of the CCBHC to OTP clients, Strong has incorporated their OTP into their CCBHC, which will make for an interesting virtual tour of an integrated continuum.

1:00 p.m.–3:30 p.m. (subject to change)
Visit the Hospitality Table on-site for more information and to sign up for the tours.

1:00 p.m.–3:30 p.m. (subject to change)
Visit the Hospitality Table on-site for more information and to sign up for the tours.
• Smoking is prohibited at all conference events.
• Your conference badge is your admission to all events and educational sessions. Please be sure to wear your badge to all conference functions.
• Participation in this conference assumes knowledge and authorization of audio and/or video recordings of portions of this conference.
• Part of the proceeds of the sleeping room rates will be used to defray conference expenses.
• Please take the time to complete all evaluation forms. Your feedback is extremely important to the presenters and AATOD.

A SPECIAL NOTE FOR THE DISABLED
The American Association for the Treatment of Opioid Dependence, Inc. has taken steps required to ensure that no individual with a disability is excluded, denied services, segregated or otherwise treated differently than other individuals because of the absence of auxiliary aids and services, as outlined in the Americans with Disabilities Act.

CONTINUING MEDICAL EDUCATION (CME)/CONTINUING EDUCATION HOURS (CEHs)

The AATOD 2018 Conference will award Continuing Medical Education (CME) and Continuing Education Hours (CEHs).

To apply for CMEs / CEHs, conference attendees must pay the associated fee*, either in advance or at the on-site conference registration desk. Attendance at conference events will be verified electronically.

Each attendee seeking continuing education credits/hours will have an electronic code attached to his/her conference badge. At the beginning of EACH session, attendees must have their badges “scanned” by room monitors in order to record continuing education credits/hours. Please note that if you leave the session early, you will be scanned out and run the risk of not getting the associated credit(s) for that session. These monitors will have electronic equipment that will automatically record each individual’s attendance in a database. The database will track and tabulate each attendee’s continuing education credits/hours. After the conference, certificates documenting attendance and the number of continuing education credits/hours earned will be electronically generated and emailed to all eligible attendees.

Questions about CMEs / CEHs can be answered by staff at the Registration Desk.

2018 Continuing Medical Education AMA Credit Designation Statement:
The American Society of Addiction Medicine designates this live activity for a maximum of 32.5 AMA PRA Category 1 Credit(s). Physicians should claim only the credit commensurate with the extent of their participation in the activity.

ACCME Accreditation Statement:
This activity has been planned and implemented in accordance with the Essential Areas and policies of the Accreditation Council for Continuing Medical Education through the joint providership of The American Society of Addiction Medicine and The American Association for the Treatment of Opioid Dependence. The American Society of Addiction Medicine is accredited by the ACCME to provide continuing medical education for physicians.

2018 Continuing Education Hours

NADAC - AATOD is awaiting approval on renewal as an approved provider with NADAC.

AATOD has been approved by NBCC for NBCC Credit. Sessions approved for NBCC credit are clearly identified. AATOD is solely responsible for all aspects of the program.

NBCC Approval No. SP-2991*

ASWB—AATOD, provider #1044, is approved as a provider for social work continuing education by the Association of Social Work Boards (ASWB), www.aswb.org, through the Approved Continuing Education (ACE) program. The American Association for the Treatment of Opioid Dependence (AATOD) maintains responsibility for the program. ASWB Approval Period: 06/12/2016 to 06/12/2019. Social workers should contact their regulatory board to determine course approval. Social workers participating in this course will receive up to 33.75 (clinical or social work ethics) continuing education clock hours. Please visit the AATOD website (www.aatod.org) for more information on specific learning outcomes and objectives, the target audience and the number of credit hours awarded for all conference sessions from the ASWB.

NEMSD - This continuing nursing education activity was approved by the Northeast Multistate Division, an accredited approver by the American Nurses Credentialing Center’s Commission on Accreditation.

The Northeast Multistate Division (NEMSD) Approver Unit has Approved Continuing Nursing Education Activity for March 10, 2018, 2018 AATOD Conference, for 33.75 Contact Hours until February 21, 2020. A complete listing of credits approved for offered sessions is available in the registration materials or at the CE Desk in the registration area. For more information regarding continuing education credits/hours, please email aatod@talley.com or call Alexandra Springer at 856-423-3091.

* Please note that the fee is waived for New York Social Work ONLY

AUDIO TAPING INFORMATION

Don’t Miss a Single Important Word!

As a special service to attendees, the presentations will be available on MP3. With scheduling conflicts and concurrent sessions, Job Conference will make it possible to attend every important session via MP3, using advanced techniques assuring the highest quality recordings. High-speed duplication equipment eliminates long delays, allowing you to hear the important information shortly after each session has concluded. The recordings provide an excellent recap and a valuable training tool to those who could not attend.

Look for the Job Conference order desk located in the registration area and take your information home with you, or place an order through the mail after the conference. Please refer to your registration packet for a complete listing of available sessions.

Job Conference
Phone: 1-888-609-TAPE
Email: Job_CRS@att.net

• Smoking is prohibited at all conference events.
• Your conference badge is your admission to all events and educational sessions. Please be sure to wear your badge to all conference functions.
• Participation in this conference assumes knowledge and authorization of audio and/or video recordings of portions of this conference.
• Part of the proceeds of the sleeping room rates will be used to defray conference expenses.
• Please take the time to complete all evaluation forms. Your feedback is extremely important to the presenters and AATOD.
Your Hospitality Committee is eager to put you “In a New York State of Mind”
— Billy Joel

The internet is full of discount sites to make your stay in New York City not only exciting but economical. By now we’re sure you are all familiar with Groupon, thanks to Tiffany Haddish’s hilarious viral account on Jimmy Kimmel Live. However, here are a few more sites you might surf to find the best deals during your stay.

Pulsd will put you in a great place to grab dinner, or maybe even Saturday or Sunday brunch. Find anything from Caribbean to New American to Japanese dinners to bottomless brunches. Experience a 3-course Mexican dinner for two at Limón Jungle for just $39. If Italian is more your style then the chef at Cara Mia will delight your taste buds with dinner at $29, including two entrees and a bottle of house wine. Both restaurants are within a few blocks of our host hotel.

Travelzoo’s mission is to recommend the best deals from the best companies. Those deals range from entertainment to dining to spas and local tour companies. Relax at the Eden Day Spa with a 65-minute balancing massage that includes your choice of a sandwich, pasta or salad for just $69. Take a guided tour on The Ride, a high-tech bus with stadium-style seating and floor-to-ceiling glass windows that offer a panoramic view of the city for a 17% saving at $29. Savor an exquisite lunch or dinner at the Carlyle, the NYC institution where a 3-course meal for two, including a glass of wine, will set you back $89 for lunch / $129 for dinner.

These three mobile apps are not the only game in town. For Broadway and Off-Broadway discounted tickets, the host hotel is right across the street from the famed TKTS Booth at 47th and Broadway (Duffy Square), where you can save up to half the price on tickets day of show. However, download the TodayTix app for last-minute tickets at the best prices, as well as Rush tickets and daily lotteries. Both “Hamilton” and “Dear Evan Hansen” have their own daily lotteries and apps.

Visit the Hospitality Booth and speak with a Hospitality Volunteer for information on nearby restaurants with 20% off deals as well as discounts to a variety of attractions and tours. And don’t forget to sign up in advance for a Clinic Tour on Wednesday, or ask about our new Virtual Tours where you can experience some of the innovative Opioid Treatment Programs within New York State.

Once again, Welcome to New York City. We look forward to putting YOU in a New York State of Mind.

Economic-responsibly submitted by HAYNES and Debbi Witham, Your 2018 AATOD Hospitality Co-Chairs

* Tax, if applicable, and gratuity are not included in voucher pricing above. Please tip on the full value; 15-20% is customary for good service.
AATOD, Inc.
Booth 102
225 Varick Street
Suite 402
New York, New York 10014
(212) 566-5555
aatod.org

AATOD, the conference host, is a non-profit organization which sets out to expand access to quality opioid addiction treatment services since 1984. In order to achieve this goal, AATOD works diligently with federal/state agency officials and our international partner, the World Federation for the Treatment of Opioid Dependence.

Acadia Healthcare
Booth 716
6100 Tower Circle, Suite 1000
Franklin, Tennessee 37067
(855) 526-8228
www.acadiahealthcare.com

Acadia Healthcare provides a network of addiction, behavioral and mental health treatment facilities in the United States, United Kingdom and Puerto Rico. Our services include Methadone Maintenance Treatment (MMT), OBOT using Subutex and Suboxone, Vivitrol and Comprehensive Outpatient Substance Abuse Treatment (COSAT) Programs in 113 locations across the United States.

Accreditation Guru, Inc.
Booth 418
180 E. Prospect Ave #142
Mamaroneck, New York 10543
(212) 945-8504
accreditationguru.com/

Accreditation Guru helps guide behavioral healthcare organizations through the national accreditation process (The Joint Commission, CARF, etc.) via an efficient and systematic approach and provides support with strategic planning, risk management, quality improvement programs and more. Our mission is to help your organization to prepare for greatness! www.AccreditationGuru.com

Accumedic
Booth 616
11 Grace Avenue, Suite 401
Great Neck, New York 11021
(516) 466-6800
www.accumedic.com

Accumedic’s EHR is ONC Certified. Accumedic is a complete EMR/Claims/Scheduler for agencies. It offers Customized Workflow based on your agency’s requirements from first contact through discharge. AccuMed includes dispensing of multiple OTP drugs while keeping DEA required inventories. HIE interfaces, custom forms, eRx, and eLabs.

ACM Global Laboratories
Booth 712
160 Elm Grove Park
Rochester, New York 14624
(585) 429-2312
www.acmglobalab.com

ACM Global Laboratories is an industry leader in providing the technology and exceptional services that are needed for drug testing. Our SAMHSA Certified Laboratory is staffed with a knowledgeable and dedicated team looking for ways to consistently meet your goals for Drugs of Abuse Testing. For more, www.acmglobalab.com.

Adapt Pharma
Booth 115
100 Matsonford Rd
Bldg 4
Radnor, Pennsylvania 19087
(844) 232-7811
adaptpharma.com

Adapt Pharma, makers of NARCAN® Nasal Spray, is an innovative small business focused on developing cutting-edge treatments for patients with special medical conditions.

Addiction Treatment Providers Insurance Program
Booth 405
555 North Lane, Suite 6060
Conshohocken, Pennsylvania 19428
(610) 941-9877
www.atpins.com

Addiction Treatment Providers Insurance Program was designed to provide insurance for the behavioral healthcare industry. We understand the complexity of the exposures that addiction treatment facilities face. As experts in this sector, we’re able to help tailor insurance plans to include the unique coverages that these organizations require.

American Drug Screen Corporation
Booth 106

American Screening, LLC
Booth 704
9742 St. Vincent Ave, Suite 100
Shreveport, Louisiana 71106
(318) 798-3306
www.americandrugscreeningcorp.com

We are quality in all we are and all we do! We are an ISO 13485 certified company. We supply quality products that are made to exceed customer satisfaction.

Ammon Labs
Booth 701
35 East Blancke Street
Linden, New Jersey 07036
(908) 862-4404
www.ammonlabs.com

Ammon Labs is an industry-leading, College of American Pathologists (CAP) accredited, full-service toxicology lab. Since 1998, we’ve been providing quality services and competitive pricing for the testing and detection of substance misuse. We specialize in personalized and targeted health solutions for our healthcare partners.

Alkermes
Booth 306

Alkermes
501 Great Circle Dr
Nashville, Tennessee 37228
www.alkermes.com

Alkermes Sciences Corporation is a laboratory sciences company providing science-driven testing and consulting services for clients such as healthcare providers, pharmaceutical companies, professional and amateur sports organizations, leading college and university athletic programs, and Fortune 500 corporations throughout the United States.

Aegis Sciences Corporation
Booth 719
501 Great Circle Dr
Nashville, Tennessee 37228
www.aegislabs.com

Aegis Sciences Corporation is a laboratory sciences company providing science-driven testing and consulting services for clients such as healthcare providers, pharmaceutical companies, professional and amateur sports organizations, leading college and university athletic programs, and Fortune 500 corporations throughout the United States.

American Pathologists (CAP) accredited, full-service toxicology lab. Since 1998, we’ve been providing quality services and competitive pricing for the testing and detection of substance misuse. We specialize in personalized and targeted health solutions for our healthcare partners.
ensuring the delivery of accurate, cost-effective, and timely clinical information. Intense focus on client satisfaction and patient care.

**Braeburn Pharmaceuticals**  
**Booth 107**  
47 Hullfish Rd, Ste. 441  
Princeton, New Jersey 08542  
(215) 345-1515  
www.braeburnpharma.com

Braeburn is a pharmaceutical company dedicated to delivering solutions for people living with the serious, often fatal consequences of opioid addiction. The company's mission is to advance a portfolio of next-generation therapies to address the escalating disease burden of addiction faced by patients, healthcare professionals, payers and society.

**CaredFor**  
**Booth 103**  
808 Glenavon Ct  
Nashville, Tennessee 37220  
www.caredfor.com

CaredFor provides a branded app to treatment programs helping to reduce patient attrition and build brand awareness. With CaredFor, programs can stay connected and engaged with their patients through treatment by providing the tools, resources and support necessary in recovery.

**CARF International**  
**Booth 606**  
6951 E. Southpoint Rd  
Tucson, Arizona 85756  
(520) 325-1044  
www.carf.org

Founded in 1966, CARF is an international, nonprofit accreditor of human service providers and networks. Providers earn accreditation by demonstrating conformance to CARF’s internationally recognized standards in areas that span the continuum of life. More than 10.2 million persons of all ages are served annually in CARF-accredited programs.

**CSS Inc.**  
**Booth 509**  
20 E. Clementon Road, Suite 201-S  
Gibbsboro, New Jersey 08026  
(856) 344-7000  
csscheck360.com

CSS Inc. delivers customized screening services to businesses worldwide. Our 360 Advantage approach unifies background screening, drug testing, administrative solutions, and monitoring services to streamline the screening process. Due to our longevity, expertise and customer support in the...
1989, Inflexxion specialize in substance use, behavioral health, and pain management. Products include the ASI-MV and PainCAS, online assessments that streamline data collection and provide real-time reporting.

**IVEK Corporation**
**Booth 408**
10 Fairbanks Rd
N. Springfield, Vermont 05150
(802) 886-2238
www.IVEK.com

For over 30 years, IVEK has been manufacturing precision positive displacement dispensing systems for addiction management programs. These systems include ceramic internal components and are noted for their reliability, low maintenance and high precision fluid handling and are placed in treatment clinics worldwide. IVEK is ISO 9001 and 13485 certified.

**Laboratory Corporation of America**
**Booth 614**
69 First Avenue
Raritan, New Jersey 8869
(212) 698-0307
www.labcorp.com

LabCorp makes available drug screening profiles designed to assist treatment professionals with monitoring patients’ drug use. In addition to detecting commonly abused prescription and illicit drugs, LabCorp’s Substance Abuse Recovery options test for medications commonly used to treat addiction.

**LiquiMedlock Inc.**
**Booth 713**
9420 Key West Avenue, Suite 101
Rockville, Maryland 20850
www.drfirst.com

DrFirst pioneers software solutions and services that provide real-time access to patient data, improve communication and collaboration at the point of care and across the patient’s circle of caregivers, and enhance the doctor’s clinical view of the patient to help drive better health outcomes.

**Durango Recovery Center**
**Booth 515**
736 Goeglein Gulch
Durango, Colorado 81301
www.durangorecoverycenter.com

Durango Recovery Center is a residential treatment center for men 18 and older emphasizing the use of medication assisted treatment, including buprenorphine and methadone, together with clinical programming involving co-occurring treatment as well as an experiential outdoor and adventure program in beautiful Durango, Colorado.

**Gilead Sciences**
**Booth 205**
333 Lakeside Dr
Foster City, California 94404
(516) 662-3245
www.gilead.com

Gilead Sciences, Inc. is a research-based biopharmaceutical company focused on the discovery, development, and commercialization of innovative medicines.

**IC&RC**
**Booth 415**
298 S. Progress Ave
Harrisburg, Pennsylvania 17109
(717) 540-4457
www.internationalcredentialing.org

IC&RC promotes public protection by setting standards and developing examinations for the credentialing and licensing of prevention, substance use treatment, and recovery professionals. Representing more than 50,000 professionals, IC&RC is the global leader in the credentialing of prevention, substance use treatment, and recovery professionals.

**Indivior Inc**
**Booth 517**
10710 Midlothian Turnpike
Suite 430
Richmond, New Jersey 23235
www.indivior.com/

Indivior Inc. is a global specialty pharmaceutical company at the forefront of providing educational resources and treatment options to physicians and patients dealing with opioid dependence.

**Inflexxion**
**Booth 711**
890 Winter Street
Suite 235
Waltham, Massachusetts 02451
(800) 848-3895
www.inflexxion.com

Inflexxion helps healthcare organizations, provider communities, and regulatory authorities to improve patient care and inform public policy. Founded in 1989, Inflexxion specialize in substance use, behavioral health, and pain management. Products include the ASI-MV and PainCAS, online assessments that streamline data collection and provide real-time reporting.

**Lochness Medical Inc.**
**Booth 207**
95 Dorothy Street, Suite 130
Buffalo, New York 14206
www.lochnessmedical.com

Lochness Medical Inc. is a premier distribution company carrying Rapid Response™ point of care diagnostics in the United States. We specialize in consulting offices clinically, procedurally and financially to help you provide the best patient care while effectively managing your finances. Best sellers include rapid urine and saliva drug testing.
Lumiquick Diagnostics
Booth 708
2946 Scott Blvd
Santa Clara, California 95054
Lumiquick.com
Lumiquick Diagnostics, Inc., develops and manufactures quality point of care tests and other immunoassay kits for the in-vitro diagnostic market. We offer extensive product lines of rapid tests, ELISA, CLIA and raw materials. These products provide the immunoassays in various formats to detect drugs of abuse, fertility hormones and other forms.

Mallinckrodt Pharmaceuticals
Booth 402
385 Marshall Ave
Webster Groves, Missouri 63119
(314) 654-2000
www.mallinckrodt.com
Mallinckrodt is a global business that develops, manufactures, markets and distributes specialty branded and generic pharmaceutical products and therapies, providing customers with a broad portfolio of specialty generics drugs to treat pain, ADHD, opiate and alcohol addiction, depression and insomnia. To learn more about Mallinckrodt, visit www.mallinckrodt.com.

MedHelp, Inc.
Booth 210
1530 Caton Center Drive, Suites F-G
Baltimore, Maryland 21227
www.medhelpinc.com
MedHelp, Inc. provides your organization with the valuable medical billing and technology resources needed to grow your revenue. With total transparency, you know exactly where your account stands in real time. By conversing with payers, we generate more income, increase your profits, and enhance your cash flow in the process.

MedStat, A Division of C&C
Containers, LLC.
Booth 512
3442 Battlefield Pkwy
Fort Oglethorpe, Georgia 30742
(229) 888-2077
medstatsupplies.com
We are your one-stop medical supply shop serving the MAT industry with bottles, caps, pharmacy, lab, office and medical supplies.

MedTest
Booth 217
5449 Research Drive
Canton, Michigan 48188
www.medtest.com
MedTest, an in-vitro diagnostics company in Michigan, provides tailored clinical laboratory instruments and drugs of abuse screening and confirmatory reagents that address the unique challenges facing behavioral health and addiction treatment programs. We offer a broad menu of urine drugs of abuse tests on scalable instruments that fit your needs.

Mercedes Medical
Booth 118
7590 Commerce Court
Sarasota, Florida 34243
www.mercedesmedical.com
Mercedes Medical is a national distributor of medical supplies and equipment specializing in: Pathology, Histology, Reference Lab, Physician Office Lab, Front office Physician, Dermatology, Toxicology, Urgent Care, and more. With over 10,000 customers Mercedes prides itself on being a low-cost leader in the healthcare supply chain.

Mertz Taggart
Booth 307
1375 Jackson Street, #406
Fort Myers, Florida 33901
(770) 888-1171
www.mertztaggart.com
Mertz Taggart is a healthcare merger and acquisition firm that specializes in addiction treatment. This focus yields invaluable insight into the challenges and opportunities operators face. Our industry expertise translates to maximizing value for our clients, as proven by over 80 successfully completed healthcare transactions since 2006.

Method One by Computalogic
Booth 101
5958 Snow Hill Rd
Suite 144 Box 180
Ooltewah, Tennessee 37363
(724) 371-1195
www.computalogic.com
MethodOne Clinic Management Software has everything you need to effectively and efficiently manage your clinic. Go paperless with our custom forms module — create and track your own forms right in the software. Financial management with billing option, dispensing of multiple medications, electronic signoff, configurable counseling module and more.

Millin Associates, LLC
Booth 112

MJS Packaging
Booth 312
35601 Veronica St
Livonia, Michigan 48150
(734) 744-4941
www.mjspackaging.com
At MJS Packaging, we streamline the packaging supply chain and optimize efficiencies at every point along the way. We help our customers source and purchase quality packaging to optimize costs, logistics and speed to market.

Molecular Dx
Booth 612
620 7th Street, Suite C
Windber, Pennsylvania 15963
(814) 361-6997
www.molecdx.com

Netalytics LLC (Methasoft)
Booth 505
52 Bobo St
Greer, South Carolina 29650
(864) 849-0528
www.methasoft.com
The Methasoft Treatment Management System is an advanced clinic automation methadone software designed specifically for opiate addiction treatment facilities. Methasoft assists with improving communication, increasing accountability, greater efficiency and enhancing reporting within all areas of a Methadone clinic. Modules include Accounting, Electronic Medical Billing, Pharmacy, Medical and Counseling.

Netsmart
Booth 721
4950 College Blvd.
Overland Park, Kansas 66211
(913) 272-2487
www.ntst.com
Netsmart innovates electronic health records (EHRs), solutions and services that are powerful, intuitive and easy-to-use for behavioral health, social services and post-acute care providers. We make the complex simple and personalized so our clients can concentrate on what they do best: provide services and treatment that support whole-person care.
OraSure Technologies
Booth 417
220 East 1st St
Bethlehem, Pennsylvania 18015
(610) 882-1820
www.orasure.com

OraSure Technologies manufactures oral fluid devices and other technologies designed to detect or diagnose critical medical conditions. Its innovative products include rapid tests for HIV and HCV antibodies, influenza antigens, testing solutions for detecting drugs of abuse, and oral fluid sample collection, stabilization and preparation products for molecular diagnostic applications.

Orexo US Inc
Booth 203
150 Headquarters Plaza
East Tower, 5th Floor
Morristown, New Jersey 07960
(215) 870-6151
www.zubsolv.com

Orexo US, Inc. is a specialty pharmaceutical company with a mission to advance the treatment of opioid dependence and support patient care. We recognize opioid dependence is a long-standing problem and have made a commitment to advancing evidence-based treatment.

Pinnacle Treatment Centers
Booth 116
1317 NJ-73
#200
Mt. Laurel, New Jersey 08054
(502) 608-3826
www.pinnacletreatment.com

Pinnacle Treatment Centers is a leading comprehensive provider of substance abuse treatment services to individuals that are addicted to drugs and/or alcohol. Founded in 2006, the Company has grown into an organization that operates over 30 substance abuse treatment facilities in eight states.

Precision Diagnostics
Booth 715
4215 Sorrento Valley Blvd
San Diego, California 92121
www.precisiondxlab.com

Precision Diagnostics is an innovative specialty medication adherence company employing industry-leading clinical laboratory technology and robotic automation to ensure accuracy. Precision Diagnostics specializes in quantitative confirmation urine drug testing designed to monitor patients on chronic opioid therapy that can help improve patient compliance and help protect your practice.

Pyramid Healthcare
Booth 406
P.O. Box 967
Duncansville, Pennsylvania 16635
(888) 694-9996
www.pyramidhealthcarepa.com

Pyramid Healthcare is a premier provider of behavioral healthcare founded in 1999 and headquartered in Altoona, Pennsylvania. Pyramid Healthcare operates over 80 treatment facilities in PA, NJ, and NC, offering a full continuum of addiction and eating disorder treatment programs for teens and adults.

Redwood Toxicology Laboratory, Inc.
Booth 603
3650 Westwind Blvd
Santa Rosa, California 95403
(800) 255-2159
redwoodtoxicology.com

Abbott Diagnostics family of businesses, Redwood Toxicology Laboratory, sells millions of RediTest® rapid screening devices each year for one simple reason: they work. Devices are ideal for occasions when you need to know right away. You can rely on RediTest to help you find out who is abusing.

Relias
Booth 211
111 Corning Road, Suite 250
Cary, North Carolina 27518
Lizzie Sedoma
www.relias.com

Relias provides online analytics, assessments, and learning for approximately 6,000 healthcare providers across the continuum of care. Relias offers unrivaled content, provides the ability for clients to create their own content, and allows for the demonstration of skill and performance, all in a singular, powerful learning management system.

SAMMS
Booth 202
333 W. Wacker Dr
Chicago, Illinois 60606
(877) 717-7266
sammsystem.com

SAMMS offers a complete EMR (Electronic Medical Record) for substance abuse treatment clinics, specializing in clinics dispensing Methadone and Buprenorphine (Suboxone, Subutex, and generic Buprenorphine). SAMMS is also used in organizations which offer non-medication-assisted treatment.
San Diego Reference Laboratory
Booth 413
6565 Nancy Ridge Drive
San Diego, California 92121
(800) 677-7995
www.sdrl.com
San Diego Reference Laboratory is a client-focused
toxicology laboratory, specializing in drug of abuse
testing. Offering customized laboratory testing
panels, serum methadone, clinical tests (CBC, RPR,
CMP, Hepatitis, etc.) and cost-effective on-site
products. SDRL offers clients Quality Service, Accurate Test Results, Accessibility to Technical
information, and Rapid Turn Around Time.

SciflLog | Parker Bioscience
Booth 409
Parker Hannifin Corp. | Bioscience Division
2340 Eastman Avenue
Oxnard, California 93030
www.parker.com/bioprocessing
Parker Hannifin Corporation’s Bioscience Division
offers SciflLog’s fluid management technology with
the LabTec Methadone Dispensing system. This
product brings high-precision, computer controlled
dispensing and documentation of methadone usage
for government compliance and inventory control.

Seabrook
Booth 120
133 Polk Lane
Bridgeton, New Jersey 08302
seabrook.org
Seabrook is a non-profit, CARF-accredited, alcohol
and drug addiction, and co-occurring disorder
treatment provider. Founded in 1974, Seabrook has
multiple locations providing a variety of evidence-
based, abstinence-based treatment options.

Smart Management, Inc.
Booth 313
66 Pavilion Ave
Providence, Rhode Island 02905
(401) 780-2300
smartmgmt.com
The SMART’s EHR is a cloud-based solution for
opioid treatment programs in substance abuse
and behavioral health facilities domestically and
internationally. The SMART provides functionality to
enable increased admissions, streamlined dosing,
improved team collaboration, accelerated test results and
maximized revenue.

Smith Medical Partners
Booth 513
195 E. Elk Trail
Carol Stream, Illinois 60188
(630) 616-0257
www.smbspecialty.com
Smith Medical Partners is your partner in the fight
against substance abuse by providing reliable,
accurate distribution of critical medications. Licensed in
all 50 states, we combine national reach with
accessible service. Our experienced team provides
individualized, patient-focused service, hands-on
support and expert product knowledge.

Southwest Labs
Booth 111
45 Broadway
4261 Balloon Park Rd
Albuquerque, New Mexico 87109
www.southwestlab.com
Southwest Labs is an advanced toxicology reference
laboratory, dedicated to medical professionals,
patients, and communities. Our Laboratory was
formed by individuals with years of experience as
reference laboratory professionals and addiction
treatment specialists in response to the shortcomings of
impersonal, corporate mega-labs.

Stop Stigma Now
Booth 213
2 Washington Sq, Suite 2A
Larchmont, New York 10538
(914) 318-4442
www.stopstigmanow.org
Stop Stigma Now, a not for profit organization, seeks
to end the institutional stigmatization related to
medication assisted treatment (MAT) for opioid
addiction by providing education, resources and
information for representatives of government,
political, health and human service agencies, and for
the community-at-large.

SureAdhere Mobile Technology
Booth 706
4445 Eastgate Mall
Suite 200
San Diego, California 92121
www.sureadhere.com/
SureAdhere Video Directly Observed Therapy (VDOT)
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Turning Point Clinic, located in East Baltimore, is a faith-based methadone program treating 3,000 patients daily. It was created 14 years ago by Rev. Milton Williams when he realized that faith-based counseling alone was not sufficient to produce lasting recovery from heroin addiction.

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