



American Association for the Treatment of Opioid Dependence, Inc.

2015 CONFERENCE

Addressing a Public Health Crisis: Opioid Dependence

MARCH 28–APRIL 1, 2015

Hyatt Regency Atlanta

Conference
Registration

**REGISTER BY
FEBRUARY 28, 2015
TO TAKE ADVANTAGE
OF PRE-REGISTRATION
DISCOUNT**

ATLANTA



www.aatod.org

HOSTS:

Georgia Department of Behavioral
Health and Developmental Disabilities
Opioid Treatment Providers of Georgia

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 improve the collaboration between Opioid Treatment Programs and community partners in response to the heightened risks associated with the use of opioids
- To develop strategies to assist healthcare partnerships and collaborations by advancing their understanding of medication assisted treatment as a crucial element to community wellness in an era of healthcare reform
- To formulate methods to promote, support, facilitate, and integrate medication assisted treatment 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

CONFERENCE CONTACTS

Talley Management Group, Inc.

Alexandra Springer, CMP
Meetings & Exhibits Manager

19 Mantua Road
Mount Royal, New Jersey 08061
Phone: 856-423-3091
Fax: 856-423-3420
E-mail: aatod@talley.com
Website: www.aatod.org

Exhibit Sales

Sue Parker
Sales Associate
sparker@talley.com

LETTER FROM THE CONFERENCE CHAIR

Dear Friends and Colleagues,

On behalf of the American Association for the Treatment of Opioid Dependence, Inc. (AATOD), it is my pleasure to invite you to the 2015 AATOD Conference being held March 28–April 1, 2015 at the Hyatt Regency in Atlanta, Georgia. The 2015 Conference is sponsored by the Georgia Department of Behavioral Health and Developmental Disabilities along with the Opioid Treatment Providers of Georgia.

AATOD has a history of providing an outstanding conference which continuously strives to provide conference attendees with new and exciting avenues for learning and growth, 2015 will be no different. In fact, for this conference we will have a first ever Documentary Screening. The documentary *The Fix: The Feeling is Mutual* is one way to accomplish this. What a unique opportunity to be both enlightened and trained! The conference will be filled with an abundance of other opportunities to socialize with those in the Medication Assisted Treatment (MAT) field and to gain knowledge about opioid overdose prevention, research within MAT, current ideas, and issues through Hot Topic Round Table Discussions, and a variety of other treatment related concerns. One of the most important issues that will be addressed at this conference will be the health crisis America faces as it relates to opioid dependence.

The conference theme is “**Addressing a Public Health Crisis: Opioid Dependence**” and the event comes at a unique time in American history. In their 2014 National Drug Control policy, President Obama, and the Office of Drug Control Policy (ONDCP) proclaimed that the United States is in an Opioid Epidemic. In addition, ONDCP has officially stated “we are significantly bolstering support for Medication Assisted Opioid Treatment.” It is important for us to take the opportunity of MAT becoming more recognized and accepted as a valid and essential piece of the recovery puzzle. We have a responsibility to those we treat to remain proficient in our knowledge of treating this disease. Our plenary speakers have been chosen to assist us in reaching this goal. To name a few, we expect CDC Director, Dr. Thomas Frieden, SAMHSA Administrator, Pamela Hyde, and ONDCP Director, Michael Botticelli as featured speakers.

The largest gathering of the MAT community will be at the 2015 AATOD Conference. AATOD and its membership are the authority on MAT. Although these modalities of treatment have been available since the 60s, with growing support there is a renewed interest in MAT. This conference has been designed to meet the needs of everyone from novice personnel to seasoned MAT providers, with offerings of the Clinicians Course, Workshops, Hot Topic Round Tables, Patient Advocate Training, and vendors for products and services that will benefit clinic business. This conference is intended for anyone who has an interest or concern about the opioid epidemic we are facing. It is our hope that this event is a catalyst for change in this public health crisis. Your participation is vital to the success of the conference.

Please join us for the 2015 AATOD Conference in Atlanta.

Sincerely,



Jonathan P. Connell, MA
2015 AATOD Conference Chair

CONFERENCE AT A GLANCE

All events and times listed are subject to change.

Saturday, March 28	7:30 a.m.–5:00 p.m.	Registration Open
	8:00 a.m.–5:00 p.m.	The Certified Medication Assisted Treatment Advocate (CMA) Training Course
	8:00 a.m.–5:30 p.m.	Buprenorphine for the Treatment of Opioid Dependence in Office-Based Treatment and OTPs
	9:00 a.m.–12:00 p.m.	Opioid Dependence in Peri-Partum Women: Policy, Collaboration, and Strategy
	9:00 a.m.–5:00 p.m.	OTP Clinical Staff Education: Appropriate Use of Methadone in the OTP
	1:00 p.m.–4:00 p.m.	Nurses and Opioid Treatment Programs
	1:00 p.m.–5:00 p.m.	Countering Opioid Stigma: Communicating Messages to Influence Public Perception
	1:00 p.m.–5:00 p.m.	New & Emerging Medications for Treating Opioid Use Disorder
	5:00 p.m.–8:30 p.m.	AATOD Open Board Meeting
	Sunday, March 29	7:30 a.m.–7:30 p.m.
8:00 a.m.–5:30 p.m.		Opioid Maintenance Pharmacotherapy: A Course for Clinicians
8:30 a.m.–12:30 p.m.		Countering Opioid Stigma: Communicating Messages to Influence Public Perception
8:30 a.m.–12:30 p.m.		Intersection of Pain and Opioid Addiction: Research and Clinical Practice
8:30 a.m.–5:30 p.m.		State Opioid Treatment Authorities' Meeting <i>(Closed Session for State and Federal Officials)</i>
9:00 a.m.–12:00 p.m.		Opioid Treatment Program Accreditation Town Hall Meeting
9:00 a.m.–12:00 p.m.		Recovery and Medication Assisted Treatment
1:00 p.m.–4:00 p.m.		Managing Workplace Risks: 10 Things Employers Need to Know
1:00 p.m.–4:00 p.m.		OTP Liability for Patient-Related Motor Vehicle Accidents: A Mock Trial and Focus Group Presentation
1:00 p.m.–5:00 p.m.		Presentations by the World Federation for the Treatment of Opioid Dependence (WFTOD)
1:00 p.m.–5:00 p.m.		Overdose Prevention Implementation Strategies
4:00 p.m.–7:30 p.m.		Posters in Grand Hall
4:00 p.m.–7:30 p.m.		Exhibits
5:30 p.m.–7:30 p.m.		Welcome Reception in Exhibit Hall
7:30 p.m.–8:30 p.m.		Methadone Anonymous Meeting (Open)
Monday, March 30	7:30 a.m.–5:30 p.m.	Registration Open
	7:30 a.m.–8:30 a.m.	Continental Breakfast in Exhibit Hall
	7:30 a.m.–8:45 a.m.	Poster Author Session—Author(s) presentation including Q&A
	7:30 a.m.–4:30 p.m.	Exhibits <i>(Exhibit Hall closed 9:30 a.m.–11:30 a.m.)</i>
	7:30 a.m.–4:30 p.m.	Posters in Grand Hall
	8:45 a.m.–10:15 a.m.	Opening Plenary Session—Challenges and Opportunities to Impact the Opioid Dependence Crisis
	10:30 a.m.–12:00 p.m.	Workshop Sessions
	11:30 a.m.–4:30 p.m.	Exhibits
	12:00 p.m.–1:30 p.m.	Lunch (on your own)
	1:30 p.m.–3:00 p.m.	Workshop Sessions / Hot Topic Roundtables
	3:00 p.m.–4:00 p.m.	Exhibitor Networking Break in Exhibit Hall
	3:00 p.m.–4:00 p.m.	Poster Author Session—Author(s) presentation including Q&A
	4:00 p.m.–5:30 p.m.	Workshop Sessions
	6:30 p.m.–8:30 p.m.	Documentary Screening— <i>The Fix: The Healing is Mutual</i>
7:00 p.m.–8:30 p.m.	Methadone Anonymous Meeting (Open)	
Tuesday, March 31	7:30 a.m.–3:30 p.m.	Registration Open
	7:30 a.m.–8:30 a.m.	Continental Breakfast in Exhibit Hall
	7:30 a.m.–1:30 p.m.	Exhibits
	7:30 a.m.–1:30 p.m.	Posters in Grand Hall
	8:45 a.m.–10:15 a.m.	Middle Plenary Session—Addressing a Public Health Crisis: Opioid Dependence
	10:30 a.m.–12:00 p.m.	Workshop Sessions
	12:00 p.m.–1:30 p.m.	Lunch (on your own)
	1:30 p.m.–3:00 p.m.	Workshop Sessions
	3:15 p.m.–4:45 p.m.	International Presentations – new session for 2015
	7:00 p.m.–9:30 p.m.	Awards Banquet
	9:30 p.m.–10:30 p.m.	Methadone Anonymous Meeting (Open)
Wednesday, April 1	7:30 a.m.–1:00 p.m.	Registration Open
	7:30 a.m.–8:00 a.m.	Continental Breakfast
	8:00 a.m.–9:30 a.m.	Workshop Sessions
	9:45 a.m.–11:15 a.m.	Workshop Sessions
	11:30 a.m.–12:45 p.m.	Closing Plenary Session—The Federal Response to the Opioid Dependence Crisis
	1:00 p.m.–3:30 p.m.	Clinic Tours (Sign-Up at Hospitality Table)

Saturday, March 28, 2015

8:00 a.m.–5:00 p.m.

The Certified Medication Assisted Treatment Advocate (CMA) Training Course

Walter Ginter, CMA, NAMA Recovery, New York, NY

Roxanne Baker, CMA, NAMA Recovery, New York, NY

Laura McNicholas, MD, University of Pennsylvania, Philadelphia, PA

Claude Hopkins, CADC, NAMA Recovery, New York, NY

Cheryl Blankenship Kupras, LCSW, Santa Clara County DADS-AMT Program, San Jose, CA

Joycelyn Woods, MA, NAMA Recovery, New York, NY

Herman Joseph, PhD, NAMA Recovery, New York, NY

Wilma Townsend, MSW, Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, MD

Vonshurii S. Wrighten, M.Div., Georgia Department of Behavioral Health and Developmental Disabilities, Atlanta, GA

The leading advocate and recovery organization for medication assisted treatment, the National Alliance for Medication Assisted Treatment (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 assisted treatment (MAT). Both patients and non-patients are encouraged to become Certified Medication Assisted Treatment Advocates (CMA).

The course presentation includes:

Medication Assisted Treatment – Basic clinical information about medication assisted treatment.

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 medication assisted treatment, and the State Opioid Treatment Authority.

Hands On 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.

Break Out/Creating Goals – Participate in breakout sessions to strategize the effective ways of communicating information (research findings, new initiatives, support groups) via the internet, OTPs, community, etc.

Certified Medication Assisted Treatment Advocate (CMA) – Role of a CMA, ethics of advocacy, the mechanism of certification, and professionalize those committed to advocacy.

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).

Candidates for certification must register with NAMA Recovery prior to the conference. There is a separate registration fee for this pre-conference event. The fee includes all materials, 2014/2015 membership in NAMA Recovery, and the application for CMA. Registration information is available at: www.methadone.org. 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)

8:00 a.m.–5:30 p.m.

Buprenorphine for the Treatment of Opioid Dependence in Office-Based Treatment and Opioid Treatment Programs

John A. Renner, Jr., MD, Boston University School of Medicine, Education Section VA Outpatient Clinic, Boston, MA

Laura McNicholas, MD, Philadelphia Veterans Administration Medical Center, Philadelphia, PA

The “Drug Addiction Treatment Act of 2000” created the opportunity to expand treatment for opioid dependence into the mainstream of medical practice, increase the number of persons treated, and have an important positive public health impact. The legislation specifies several ways in which physicians can be considered qualified to prescribe and dispense buprenorphine in their offices for the treatment of opioid dependence. The completion of this training fulfills the requirement prior to notifying the U.S. Department of Health and Human Services (DHHS) of their intention to begin prescribing buprenorphine for the treatment of opioid dependence.

The presentation is designed to train qualified physicians in dispensing or prescribing specifically approved Schedule III, IV, and V narcotic medications for the treatment of opioid addiction in an office-based setting. The goal of this training is to acquire the knowledge and skills needed to provide optimal care to opioid dependent patients by providing: 1) an overview of opioid

dependence, 2) the efficacy and safety of buprenorphine, 3) process of patient selection, 4) clinical use of buprenorphine, 5) non-pharmacological interventions, 6) medical psychiatric conditions in opioid dependent patients, office procedures, and 7) special treatment population.

Designated by the DHHS, this training meets the eight-hour requirement and is designed for physicians to dispense buprenorphine in office practice for treatment of opioid dependence. Participation in this training will provide physicians with 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.

Funding for this course was made possible (in part) by H79T1022022 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.

9:00 a.m.–12:00 p.m.

Opioid Dependence in Peri-Partum Women: Policy, Collaboration, and Strategy

Nancy K. Young, PhD, National Center on Substance Abuse and Child Welfare, Lake Forest, CA

Sally Borden, MEd., Kid Safe Collaborative, Inc., Burlington, VT

Anton C. Bizzell, MD, The Bizzell Group, Silver Spring, MD

This session will discuss policy and practice considerations for collaborative practice in working with opioid dependent pregnant and parenting women. The presenters will discuss the newly published guidance document, Medication Assisted Treatment for Pregnant Women with Opiate Dependence. In addition, the session will examine the unique challenges of serving pregnant/postpartum women as it relates to opioid addiction and treatment. Finally, the session will explore the different approaches that SAMHSA's Pregnant and Postpartum Women grantees use to manage and support integrated care for patients with opioid dependency through medication assisted treatment.

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

9:00 a.m.–5:00 p.m.

OTP Clinical Staff Education: Appropriate Use of Methadone in the OTP

Valentin Bonilla, PA, Beth Israel Hospital, New York, NY

Carolyn Baird, DNP, Waynesburg University, McMurray, PA

While methadone is recognized as a safe and effective medication, it is important that it be prescribed, dispensed, and taken properly. Clinical staff must appreciate its idiosyncrasies and be able to identify potentially dangerous drug interactions, misuse, and abuse. Patients' lives depend on it. The recent rise in methadone mortality has brought additional scrutiny to the use of methadone and although the increase in deaths appears to be linked to the increased use of the medication in treatment of pain rather than in Opioid Treatment Programs (OTPs), the Substance Abuse and Mental Health Services Administration is proactive in developing and delivering targeted clinical training to providers in OTPs to assure that they apply best practice and the most current information on methadone use in the OTP setting.

Participants will be able to describe the unique characteristics of methadone pharmacology and pharmacotherapy; understand OTP patient screening, assessment, induction, stabilization, and maintenance techniques; identify and address co-occurring medical and psychiatric disorders; and outline treatment services and appropriate levels of care.

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

1:00 p.m.–4:00 p.m.

Nurses and Opioid Treatment Programs

Linda Burhans, PhD, North Carolina Board of Nursing, Wilson, NC

The team providing patient care at an Opioid Treatment Program (OTP) is typically composed of a variety of professionals fulfilling different roles. Nurses in OTPs conduct assessments, evaluations, render professional judgment, implement physician orders, administer medication, and participate on a multi-disciplinary team for obtaining desired patient outcomes.

OTPs are staffed by counselors, physicians, other professionals, and nurses. Nurses make up one of the largest professional groups employed in OTPs. This session will focus on understanding the scope of practice, particularly of Licensed Practical (or Vocational) Nurses (LPNs) in the OTP setting, and provide strategies for individual nurses to determine what may or may not be included in his or her job functions.

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

Pre-Conference Sessions

Saturday, March 28, 2015

1:00 p.m.–5:00 p.m.

Countering Opioid Stigma: Communicating Messages to Influence Public Perception

Frank J. Carillo, BS, ECG, Inc, Englewood, NJ

Opioid Treatment Programs and patients have historically been the target of negative public opinion and adverse media coverage. This has affected our ability to effectively influence national drug policy, explain the science of opioid addiction and treatment, gain the funding necessary to provide quality treatment to those who require it, and ultimately operate in the best interests of our patients and communities.

This session teaches three key messages specifically designed to counter the stigma and stereotypes deeply embedded in the perception of opioid addiction and medication assisted treatment. These messages resulted from a yearlong pilot project, “Communicating Messages that Achieve Results.” Participants will hear these messages and learn how to communicate them in order to create a positive impact within their communities. This session will include Q & A techniques designed to effectively manage emotional audiences while reinforcing the presentation objectives.

For session effectiveness, participation is limited to the first 50 attendees who arrive for the session.

Sponsored by the American Association for the Treatment of Opioid Dependence, Inc. (AATOD)

Supported by VistaPharm, Inc.

1:00 p.m.–5:00 p.m.

New & Emerging Medications for Treating Opioid Use Disorder

Jack Stein, PhD, National Institute on Drug Abuse (NIDA), Bethesda, MD

Charles P. O'Brien, MD, University of Pennsylvania, Philadelphia, PA

Maria A. Sullivan, MD, Columbia University, New York, NY

William Marrone, DO, Synergy Medical Education Alliance, Saginaw, MI

Injectable naltrexone is a relatively new medication to prevent opioid misuse relapse. Naltrexone is a long-acting opioid antagonist with a high affinity for the mu-opioid receptor. Maintenance therapy with naltrexone has been strongly associated with extremely motivated patients or with use in controlled settings. Moreover, additional medications and formulations of currently approved medications are under development for the treatment of opioid dependence.

With the rise in prescription opioid abuse and the transition of these patients to heroin, the co-prescribing of naloxone is increasing in popularity. This session highlights medications for treating opioid dependence and overdose and non-opioid pharmacotherapy options that can be used in Opioid Treatment Programs.

Sponsored by the National Institute on Drug Abuse (NIDA) and the Substance Abuse and Mental Health Services Administration (SAMHSA)

AATOD OPEN BOARD MEETING

Saturday, March 28, 2015 | 5:00 p.m.–8:30 p.m.

Supported by Addiction Treatment Providers Insurance Program

BECOME AN AATOD MEMBER

Visit the AATOD website for details regarding membership categories, membership benefits, and the application process.

Pre-Conference Sessions

Sunday, March 29, 2015

8:00 a.m.–5:30 p.m.

Opioid Maintenance Pharmacotherapy: A Course for Clinicians

Laura McNicholas, MD, Philadelphia Veterans Administration Medical Center, Philadelphia, PA

Susan Neshin, MD, JSAS Healthcare, Inc., Neptune, NJ

Abigail Kay, MD, Thomas Jefferson University, Philadelphia, PA

Laura Murray, DO, NHS Human Services, Philadelphia, PA

This course is recommended for clinicians who have an interest in increasing their knowledge of medication assisted treatment (MAT) for opioid dependence. The updated curriculum includes current consensus guidance for best practice treatment for opioid addiction, focusing primarily on utilization of methadone.

Topics include overview of opioid dependence, 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 MAT, 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.

Experienced 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 medication assisted treatment for patients with opioid dependence.

The \$235.00 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

8:30 a.m.–12:30 p.m.

Countering Opioid Stigma: Communicating Messages to Influence Public Perception

Frank J. Carillo, BS, ECG, Inc, Englewood, NJ

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Sponsored by the American Association for the Treatment of Opioid Dependence, Inc. (AATOD)

Supported by VistaPharm, Inc.



Pre-Conference Sessions

Sunday, March 29, 2015

8:30 a.m.–12:30 p.m.

Intersection of Pain and Opioid Addiction— Research and Clinical Practice

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

*Seddon Savage, MD, Chronic Pain & Recovery Center, Silver Hill
Hospital, New Canaan, CT, and Dartmouth Center on Addiction,
Concord, NH*

*Peggy Compton, PhD, Georgetown University School of Nursing,
Washington, DC*

*Judith Tsui, MD, Boston University School of Medicine,
Boston, MA*

*Richard Schottenfeld, MD, Yale University School of Medicine,
New Haven, CT*

*Walter Ling, MD, UCLA Integrated Substance Abuse Programs,
Los Angeles, CA*

Pain is highly prevalent in patients with opioid addiction. Dhingra (2013) found a presence of clinically significant pain in almost half of the patients in Opioid Treatment Programs (OTPs). In this study as well as previous studies, the presence of pain was found to be associated with medical and psychological comorbidity and distress. Rupp and Delaney (2004) shows that patients with substance use disorders (SUDs) are less likely than others to receive effective pain treatment as clinicians are concerned that they may misuse opioids.

The research evidence and clinical experience on how to treat comorbid opioid addiction and pain is emerging. Chang and Compton (2013) described that the goal of chronic pain treatment in patients with SUDs should be the same as that for patients without SUDs, which is to maximize functionality while providing adequate pain relief. However, the complex relationship between pain and addiction requires careful assessment, sustained monitoring, and integrated relapse prevention & pain management in patients treated with methadone, buprenorphine, or naltrexone.

This session will summarize the current research base for the treatment of pain in OTP patients, present assessment and treatment strategies, and specific interventions that have demonstrated its effectiveness.

***Sponsored by the National Institute for Drug Abuse,
the National Drug Abuse Treatment Clinical Trials
Network (NIDA/CTN)***

8:30 a.m.–5:30 p.m.

State Opioid Treatment Authorities' Meeting (Closed Session for State and Federal Officials)

Participants:

*Robert Lubran, MPA, Substance Abuse and Mental Health
Services Administration (SAMHSA), Rockville, MD*

*Melinda Campopiano, MD, Substance Abuse and Mental Health
Services Administration (SAMHSA), Rockville, MD*

*Wilma Townsend, MSW, Substance Abuse and Mental Health
Services Administration (SAMHSA), Rockville, MD*

*Brandon Johnson, MBA, Substance Abuse and Mental Health
Services Administration (SAMHSA), Rockville, MD*

*Mary Lou Ojeda, MS, Substance Abuse and Mental Health
Services Administration (SAMHSA), Rockville, MD*

*Nichole Smith, MHSA, Substance Abuse and Mental Health
Services Administration (SAMHSA), Rockville, MD*

*Jinhee Lee, PharmD, Substance Abuse and Mental Health
Services Administration (SAMHSA), Rockville, MD*

*Steve Mason, MSW, Substance Abuse and Mental Health Services
Administration (SAMHSA), Rockville, MD*

*Tony Campbell, DO, Substance Abuse and Mental Health
Services Administration (SAMHSA), Rockville, MD*

*Ruth Carter, Drug Enforcement Administration (DEA), Crystal
City, VA*

State Opioid Treatment Authorities

Federal officials, including Substance Abuse and Mental Health Services Administration/Center for Substance Abuse Treatment (SAMHSA/CSAT) staff and State Opioid Treatment Authorities, will convene to share information and discuss a variety of topics of interest to both SAMHSA and the States. Issues of mutual concern in the approval and monitoring of Opioid Treatment Programs, including clinical, administrative, financing, and regulatory policy topics, will be discussed to improve and coordinate joint oversight.

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

9:00 a.m.–12:00 p.m.

Opioid Treatment Program Accreditation Town Hall Meeting

Megan Marx, MPA, The Joint Commission, Oakbrook Terrace, IL

This session is designed to be an open forum for Joint Commission accredited programs. It is an opportunity for accredited programs to learn about recent and upcoming standards revisions and to discuss how to achieve standards compliance. Topics expected to be reviewed include: “Behavioral Health Home Certification—One Year Later”; “Roadmap to Accreditation—Staying on the Path to Success”; “Strategies for a Successful Accreditation Survey”; “Overcoming Challenges to Person Centered Care, Treatment or Service Planning”; “Accreditation Standards Top Compliance Challenges for 2014”; and “Strategies to Address Human Resource/ Staffing Challenges.” This session will also include an overview of the revised *Federal Guidelines for Opioid Treatment Programs* with a focus on how the revised guidelines will affect accreditation standards. (Note: Pending the release of the revised federal guidelines.)

Registration for this session is open to all Joint Commission accredited Opioid Treatment Programs. To pre-register for this session please contact Megan Marx at 630-792-5131 or at mmarx@jointcommission.org.

Sponsored by The Joint Commission

9:00 a.m.–12:00 p.m.

Recovery and Medication Assisted Treatment

Wilma Townsend, MSW, Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, MD

Walter Ginter, CMA, Medication-Assisted Recovery Supports (MARS) Project, New York, NY

Kelly Moehling, CRC Health Group, Portland, OR

Erika Helmerichs, CRC Health Group, Portland, OR

Recovery has been defined by the Substance Abuse and Mental Health Services Administration (SAMHSA) as “A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.” SAMHSA has also identified four major dimensions that support a life in recovery: Health, Home, Purpose, and Community. Receiving medication assisted treatment is one part of a person’s recovery process. It is important for people to learn about all aspects of recovery from taking medication to the inclusion of health, home, purpose, and community. This session will help organizations understand the recovery process for individuals receiving medication assisted treatment and how they can assist individuals in their recovery process.

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

1:00 p.m.–4:00 p.m.

Managing Workplace Risks: 10 Things Employers Need to Know

Emily S. Borna, Esq., Jackson Lewis P.C., Atlanta, GA

Kathryn J. Russo, Esq., Jackson Lewis P.C., Melville, NY

Looking ahead in 2015, savvy employers and employees are paying close attention to the current hot-button labor and employment law issues including: aggressive federal agencies; rampant state legislation; social media; criminal background checks; crisis management; FMLA expansion (sexual assault, domestic violence, stalking); enhanced pregnancy protections; transgendered employees; continuation of the misclassification campaign; and supreme court decisions.

Employment law challenges present risks and often divert attention from other important business matters. Staying on top of the latest developments and looking ahead is essential to avoiding the courthouse.

This session will break down the top workplace legal developments at this juncture and explain how recent regulatory changes and state and federal case holdings affect your workforce. This session will also address some best practices recommended for employers to take for compliance and explore ways employers may avoid liability with preventive strategies.

Sponsored by the American Association for the Treatment of Opioid Dependence, Inc. (AATOD)

Pre-Conference Sessions

Sunday, March 29, 2015

1:00 p.m.–4:00 p.m.

OTP Liability for Patient-Related Motor Vehicle Accidents: A Mock Trial and Focus Group Presentation

James A. Bello, Esq., Morrison Mahoney, Boston, MA

Noel Dumas, Esq., Morrison Mahoney, Boston, MA

The objective of this session is to highlight the risk of Opioid Treatment Program (OTP) liability for patients and third parties who are injured in vehicular accidents arising out of the negligent administration of methadone and/or inadequate counseling or monitoring of continuous illicit drug use. The Mock Trial and Focus Group Presentation are premised upon an actual case brought by an injured patient against an OTP.

Conference participants will be presented with the closing arguments of counsel. The plaintiff's (injured party) case focuses on "profits over people." The plaintiff alleges that the clinic failed to implement any meaningful consequences in response to the patient's continued use of illicit drugs, specifically benzodiazepines. Plaintiff contends that if she was faced with consequences for continued drug use, she would have stopped using benzodiazepines, and the accident would not have occurred. The plaintiff's case highlights the legal consequences of violating company policies, state regulations and industry standards, and the legal implications of such violations in a court of law.

The defense of the clinic focuses upon the concept of harm reduction and personal responsibility. Despite continuous positive drug screens, the patient made significant progress in the program, with periods of complete abstinence. The defense contends that the clinic cannot be held responsible for the poor decisions of a fully informed, consenting adult. There is also emphasis on the absence of legal "causation"; i.e. evidence that had the consequences been attempted, the patient would have stopped using illicit drugs (and the accident would have been avoided).

The teaching session will focus on the importance of adequate documentation and compliance with policies and regulations. The presenters will show actual video clips from mock trial jury deliberations which reveal laypersons' thoughts on methadone treatment, the OTP industry, and drug addiction in general.

Sponsored by the American Association for the Treatment of Opioid Dependence, Inc. (AATOD)

1:00 p.m.–5:00 p.m.

Presentations by the World Federation for the Treatment of Opioid Dependence (WFTOD)

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 within AATOD, agreed to a charter for the World Federation.

Chairman: Icro Maremmani, MD, Santa Chiara University Hospital, Pisa, Italy

Introductions: Michael Rizzi, AATOD International Committee Chair, Cranston, RI

1:00 p.m.–1:20 p.m.

Speaker: Alice Deschenau, MD, What's Up Doc, Villejuif, France

The Misuse: A Part of Opioid Maintenance Treatment

A. Deschenau, D. Touzeau (Villejuif, France, EU)*

1:20 p.m.–1:40 p.m.

Speaker: Icro Maremmani, MD, Santa Chiara University Hospital, Pisa, Italy

Measuring Outcomes in Opioid Dependence Care: Expert Consensus on Need for Improved Outcome Measurement Tools

I. Maremmani (Pisa, Italy, EU), H. Alho (Helsinki, Finland, EU), R. Littlewood* (London, UK)*

1:40 p.m.–2:00 p.m.

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

Agonist Opioid Treatment and Sexual Dysfunctions

L. Somaini (Biella, Italy, EU)

2:00 p.m.–2:20 p.m.

Speaker: Samir Kasper, MD, Cantonal Institute for Addiction Zenica, Bosnia & Herzegovina

Replacement Therapy Method Resettlement in Prisons—Yes or No?

S. Kasper, J. Softic, H. R. Awad* (Zenica, Bosnia & Herzegovina)*

2:20 p.m.–2:40 p.m.

Speaker: Jody L. Green, PhD, Researched Abuse, Diversion, and Addiction-Related Surveillance (RADARS® System), Denver, CO

Emerging Trends in Alternative Routes Reported for Prescription Drug Misuse: An International Perspective

J. Green (Denver, CO, USA)

2:40 p.m.–3:00 p.m.

Speaker: Stephen R. Andrew, LCSW, Health Education and Training Institute, Portland, ME

Motivational Interviewing to Facilitate 12 Steps for Opiate Addiction

S. R. Andrew (Portland, ME, USA)

3:00 p.m.–3:20 p.m.

Speakers: André-Jean Remy, MD and Hugues Wenger, MD, Centre Hospitalier de Perpignan, France

Treatment of Chronic Hepatitis C in Drug Users: Ethical, Successful, and Useful

A.J. Remy, H. Wenger, H. Bouchkira (Perpignan, France, EU)*

3:20 p.m.–3:40 p.m.

Speaker: Mirjana Delic, MD, Center for Treatment of Drug Addiction, University Psychiatric Clinic Ljubljana, Slovenia

Factors Associated with Outcome of Inpatient Opioid Addiction Treatment

M. Delic, L. Lusa, P. Pregelj* (Ljubljana, Slovenia, EU)*

3:40 p.m.–4:00 p.m.

Speaker: Einat Peles, PhD, Dr. Miriam & Sheldon G. Adelson Clinic for Drug Abuse, Treatment & Research, Tel Aviv, Israel

Risk Factors for Weight Gain during Methadone Maintenance Treatment

E. Peles, S. Schreiber, A. Sason*, M. Adelson* (Tel Aviv, Israel)*

4:00 p.m.–4:20 p.m.

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

Introducing a Naloxone Nasal-Spray Project as Part of a National Overdose Prevention Campaign in Norway: First Experiences and Results

T. Clausen (Oslo, Norway)

4:20 p.m.–4:40 p.m.

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

Effectiveness of Medication-Assisted Treatment with Methadone, Buprenorphine, and Sustained Release Morphine

A. Kastelic (Ljubljana, Slovenia EU)

4:40 p.m.–5:00 p.m.

Questions & Answers

* Contributed to research but will not be presenting.

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.–5:00 p.m.

Overdose Prevention Implementation Strategies

*Sharon Stancliff, MD, Harm Reduction Coalition, New York, NY
Reverend Fred Wells Brason II, President/CEO, Project Lazarus, and Project Director, Community Care of North Carolina's Medicaid Management System Statewide Chronic Pain Initiative, Moravian Falls, NC*

Pam Lynch, LLMSW, WhoSoEver Collaborative, Traverse City, MI

There have been significant increases in overdose deaths related to prescription drug misuse and illicit heroin in the past 10 years. Thus, there is a significant need for both systemic and individual interventions for healthcare professionals and first responders to address opioid overdoses.

This session will cover Overdose Prevention Programs that include the distribution of naloxone, training of non-healthcare first responders, and the current evidence for bystander administration of naloxone to reverse opioid overdoses.

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

WELCOME RECEPTION

Sunday, March 29, 2015 | 5:30 p.m.–7:30 p.m.

The Welcome Reception affords all participants the opportunity to make new professional and personal acquaintances, as well as to enjoy some relaxing time with old friends and colleagues not seen for too long.

Supported in part by Atlantic Diagnostic Laboratories and Orexo



Exhibit and Poster Sessions

The AATOD Conference serves as a central gathering point for the opioid treatment community and offers significant opportunities for exhibiting companies and attendees to interact with other professionals who are devoted to the treatment of opioid dependence throughout the nation and abroad. The registrants will consist of the decision makers in this field who spend over \$1 billion annually treating more than 325,000 patients in Opioid Treatment Programs. In order to provide exhibitors with steady exposure to conference attendees, all continental breakfasts and refreshment breaks will be held exclusively in the exhibit area. **An Exhibitor's Networking Event will be held Monday, March 30th** to encourage contact and dialogue between opioid treatment professionals and the exhibiting companies.

Exhibit Hours

Sunday, March 29 4:00–7:30 p.m.
Monday, March 30 7:30–9:30 a.m.; 11:30 a.m.–4:30 p.m.
Tuesday, March 31 7:30 a.m.–1:30 p.m.

Exhibitors as of November 19, 2014

AATOD	MethodOne by Computalogic
Addiction Technology Transfer Center Network	Naples Medical Devices, LLC
Addiction Treatment Providers	Netalytics
ADVIX Electronic Health Record	Netsmart Technologies, Inc
Alkermes, Inc.	Nutritional Supplements Corporation, Inc
American Screening Corporation	O.Berk Co. of New England & Kols Container
Atlantic Diagnostic Laboratories LLC	OraSure Technologies, Inc
BioDelivery Sciences International	Orexo US, Inc
Brown Consulting, Ltd.	Parker domnick hunter
C&C Containers, LLC	Redwood Toxicology Laboratory, Inc
CARF International	Roxane Laboratories, Inc.
Clinical Science Lab	SAMMS
Council on Accreditation	San Diego Reference Laboratory
Harwoods Miami Safe Company	Silver Hill Hospital
Journal of Opioid Management/Weston Medical Publishing	SMART Management, Inc.
Mallinckrodt Pharmaceuticals	The Joint Commission
MARS Project	Tower Systems, Inc
	VistaPharm, Inc.
	Wedgewood Pharmacy
	White Deer Run/Cove Forge/Bowling Green

POSTER TOPICS

Posters are in place at all times when the Grand Hall is open. Authors will present their topic on **Monday, March 30, from 7:30 a.m.–8:45 a.m. and 3:00 p.m.–4:00 p.m.**

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

It Ain't Me: Reducing the Impact of Implicit and Unconscious Provider Bias on OTP Patients

James Anderson, PA-C

The Methadone Education Project: Providing Resources for Community Providers

James Anderson, PA-C

An Evaluation of Pregnant & Postpartum Women Treatment Programs/Services

Anton C. Bizzell, MD

Cannabis—The Anti-Gateway Drug

Angela Bonaguidi, LCSW

Utilization of Telemedicine to Treat Hepatitis C at a Medication-Assisted Opioid Treatment Program

Lawrence Brown, Jr., MD

Smoking or not Smoking Buprenorphine

Alice Deschenau, MD

Integrating Horticulture Therapy into an Opioid Treatment Program and Other Service Models

Kathryn Eggert, LCSW

Integrating Overdose Prevention into an Opioid Treatment Program

Scott Farnum, PhD(c)

How Strong is the Relationship Between Methadone Dose and QTc Interval?

Scot Fleshman, MSN

Reductions in Prescription Opioid Abuse among Enrollees into Opioid Treatment Programs

Chunki Fong, MS

Improving Self-Esteem Among Opiate Addicted Patients on MAT: A Six-Week Intervention

Bonnie Franckowiak, DNP

Integrating an Opioid Treatment Program into a Correctional Facility

Robert Freeman, BS

The Effects of Mothers' Addiction and Substance Abuse on their Infants

Hamideh Jahangiri, MD

Pattern and Intensity of Smoking and Alcohol Drinking on Adolescents

Hamideh Jahangiri, MD

CBT Effect to Reduce Nicotine Dependence in Heavy Smoker Patients with Hypertension

Hamideh Jahangiri, MD

Integrated Care: Mental Health and MAT

Evan Kletter, PhD

Primary Care Integration

Michelle Kletter, BA

Age and Gender Distribution among Patients Entering Treatment for Opioid Addiction

Sarah Lavery, BS

Utilization of an Electronic Information System to Evaluate Practice at a Medication-Assisted OTP

Melissa Lin, MS

Community Based Overdose Prevention – Providing Naloxone in Methadone Maintenance Programming

Deborah Malatesta, LCSW

Challenges to Opioid Treatment Providers after Hurricane Sandy: Impact, Preparedness, and Recovery

Harlan Matusow, PhD

The Association of PHQ-9 & MDQ Scores with Lifetime Suicide Ideation & Attempt among Ageing Opioid-Dependent Individuals

Mary Mbaba, MPH

Decisions in Recovery: A Web-Based Shared Decision Making Tool for Medication-Assisted Treatment

Niki Miller, MS

Prevalence of Substance Abuse Among University Students

Alireza Norouzi, PhD

Self-Reported Overdose Risks in a Sample of Patients Enrolled in an Opioid Treatment Program

K. Michelle Peavy, PhD

Risk Factor for Weight Gain during Methadone Maintenance Treatment

Einat Peles, PhD

Treatment of Chronic Hepatitis C in Drug Users: Ethical, Successful, and Useful

Andre Jean Remy, MD

Use of Opiates to Get High in Patients Seeking Replacement Therapy: Europe and the United States

Lorenzo Somaini, MD

Policy Considerations and Collaborative Partnerships: Working with Opioid Dependent Pregnant and Parenting Women

Nancy Young, PhD

Effects of Buprenorphine/Naloxone Dosing in Opioid-Dependent Medicaid Patients

Vladimir Zah, PhD(c)

Analysis of the 'Revolving Door' Effect in Opioid Dependent Patients from Medicaid Insurance Claims

Vladimir Zah, PhD(c)



Conference Sessions

Monday, March 30, 2015

CONTINENTAL BREAKFAST

Monday, March 30 | 7:30 a.m.–8:30 a.m.

Sponsored by VistaPharm, Inc.

8:45 a.m.–10:15 a.m.

OPENING PLENARY SESSION

Challenges and Opportunities to Impact the Opioid Dependence Crisis

Jonathan P. Connell, MA, President, Private Clinics, and TLC Clinic, Albany, GA

Frank W. Berry, III, Commissioner, Department of Behavioral Health and Developmental Disabilities (DBHDD), Atlanta, GA

Mark W. Parrino, MPA, President, American Association for the Treatment of Opioid Dependence, Inc. (AATOD), New York, NY

Merrill Norton, PharmD, Clinical Associate Professor, University of Georgia, Athens, GA

As opioid dependence becomes part of the national and international conversation, the Opening Plenary Session will review AATOD's projects and efforts in the Southeast and around the world to expand knowledge of and decrease stigma of medication assisted treatment. Jonathan P. Connell will welcome the attendees and provide an overview of this exciting conference. Mr. Connell will be followed by a very special welcome to Georgia by Frank W. Berry, Commissioner of Georgia's Department of Behavioral Health and Developmental Disabilities. Mr. Mark Parrino, AATOD President, will provide an overview of the challenges, opportunities, and accomplishments of AATOD. Dr. Merrill Norton will provide the closing remarks and present information regarding nationwide and state efforts to address opioid dependence from a pharmacy/pharmacist perspective. Dr. Norton will also explore efforts to coordinate care and reduce the escalation of addiction from the perspective of a pharmacist and educator.

10:30 a.m.–12:00 p.m.

WORKSHOP SESSIONS

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

Basic Track: 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. Those who attend all six sessions listed will receive a special certificate of completion.

Basic Track Workshop Sessions: A1, B1, C1, D1, E1, and F1

A1 Methadone 101

Laura F. McNicholas, MD, University of Pennsylvania, Philadelphia, PA

Methadone maintenance treatment has been available for decades; yet many clinicians do not understand how and why it is effective in treating opioid dependence and addiction. The presenter will review the basic elements of opioid agonist treatment; examine the pharmacologic aspects of methadone; present initial screening, admission procedures, and assessment techniques; describe associated medical, psychiatric, and substance abuse conditions associated with opioid addiction; evaluate the efficacy of methadone therapy; and review other opioid agonist treatments.

*Basic Track

A2 Rhode Island OTP Health Homes: Making a Difference in Patients' Lives

Linda Hurley, MA, CODAC Behavioral Healthcare Inc., Cranston, RI

Susan A. Storti, PhD, Rhode Island Opioid Treatment Program Health Home Initiative, Warwick, RI

Peter Morris, BS, Discovery House/Smart Management Inc., Providence, RI

In November 2010, the State of Rhode Island approved a State Plan Amendment to implement health homes within Opioid Treatment Programs (OTP). This workshop will provide a comprehensive overview of the ongoing implementation of this statewide service delivery model. Initial planning, implementation guidelines, and data collection methods will be discussed. Presenters will also describe successful outreach methods which have resulted in new or strengthened collaborations with the medical community, legal and corrections community, housing resources, and employment providers. Patient engagement and workforce development strategies will be shared in addition to a comprehensive overview of revenue and costs.

A3 Mindfulness-Based Parenting for Mothers in Drug Treatment

Diane Abatemarco, PhD, Nemours duPont Pediatrics, Philadelphia, PA

Wendy Weingarten, MSW, Thomas Jefferson University, Philadelphia, PA

Karol Kaltenbach, PhD, Thomas Jefferson University, Philadelphia, PA

Practicing Safety Mindfulness Project for Mothers in Drug Treatment is an innovative intervention project intended to improve parenting responsiveness in mothers receiving treatment for opioid dependence by implementing Mindfulness-Based Parenting (MBP), enhanced pediatric care, and case management. This workshop will provide hands on skill-learning by sharing the experience of development and implementation. Topics of discussion will include: comprehensive curriculum adaptation, planning, and reiteration that include conducting interviews with key personnel/stakeholders; reviewing state-of-the-art substance use treatment guidelines; developing mother/baby dyad education; and informing the program with the impact of trauma. Presenters will discuss the rationale for using MBP as a foundation for parenting intervention.

A4 Marijuana and Medication Assisted Treatment

Anthony Campbell, DO, Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, MD

Katherine Cuoto, LADC, Maine Office of Substance Abuse and Mental Health Services, Augusta, ME

Ron Jackson, LICSW, University of Washington, Seattle, WA

Marijuana is the most commonly used illicit substance in the United States. This session will provide information on risks associated with marijuana use in patients treated for opioid disorders with opioid therapies. While marijuana is still considered an illegal substance, SAMHSA recognizes that new state policies have resulted in an increased number of patients using marijuana. Additionally, questions have arisen about the potential therapeutic and adverse health effects on patients in Opioid Treatment Programs. This session will examine federal, state, and local program policy implications on the use of marijuana for patients engaged in medication assisted treatment for opioid dependence.

A5 Health Policy Opportunities & Challenges: Update from Legal Action Center

Gabrielle de la Gueronniere, JD, Legal Action Center, Washington, DC

Paul Samuels, JD, Legal Action Center, New York, NY

Dan Belnap, MA, Legal Action Center, Washington, DC

With the implementation of the Affordable Care Act (ACA), millions more Americans have access to quality, affordable health coverage, including coverage for substance use disorders. New initiatives

and ongoing challenges impact the future of treatment delivery and financing. These changes have unprecedented implications for expanding access to critical drug and alcohol-related services and transforming the treatment delivery system. This workshop will discuss current and future federal developments related to substance use disorder treatment, the future of medication assisted treatment in the new health reform environment, delivery system reforms, and opportunities available for improving federal policy moving forward.

1:30 p.m.–3:00 p.m.

HOT TOPIC ROUNDTABLES

Hot Topic Roundtables are facilitated discussions that focus on current controversial issues in an informal context. Meet with your colleagues as you learn, challenge, support, and share your views with others who may have similar or different opinions, experiences, or interests.

Experienced leaders in the field will be facilitating these sessions.

Confronting Stigma and Misinformation within Methadone Treatment and Beyond

Facilitators: Robert C. Lambert, MA and Alan Lee Nolan, LCSW

Buprenorphine, Methadone, Extended Release Naltrexone: Medication Choice as Collaboration between Patient and Doctor

Facilitator: Robert Kearney, MD

Addressing Stimulant Use in the OTP

Facilitator: Kellie Rollins, PsyD

Confidentiality: Balancing Privacy with Informed Care

Facilitator: Karla Lopez, JD

Dose Capping: Is It Still Happening Under the Current Federal Regulations?

Facilitators: Zac Talbott, CMA and Bettye Harrison, MSW

POLICY MAKERS LUNCHEON

Monday, March 30, 2015

Sponsored by the American Association for the Treatment of Opioid Dependence, Inc. (AATOD)

Monday, March 30, 2015

WORKSHOP SESSIONS

#1 Managing Workplace Risks: Medical Marijuana and Disability-Related Topics

Kathryn Russo, JD, Jackson Lewis P.C., Long Island, NY

This workshop will explore recent legal trends in several disability related topics including: legal and practical issues raised by recent laws permitting medical marijuana and recreational marijuana; current trends in workplace drug and alcohol testing programs and litigation arising out of such testing; balancing the need for a safe workplace environment with an employee's need to take lawful prescription medications; legal trends in "reasonable accommodations" of employees' medical conditions; and the EEOC's new Enforcement Guidance on Pregnancy Discrimination.

#2 A Practical Approach to Implementing Cardiac Intervention in Opioid Treatment Programs

Mori J. Krantz, MD, University of Colorado, Cardiology Division, Denver, CO

Ryan Borne, MD, University of Colorado, Cardiology Division, Denver, CO

Megan Marx, MPA, Joint Commission, Oakbrook Terrace, IL

Feedback from physicians attending the AATOD 2013 Cardiac Safety session was unanimous that current guidelines for implementation of cardiac safety programs in methadone maintenance treatment do not provide adequate clarity on clinical action steps. This workshop will present data on three tools that were developed to aid clinicians implementing cardiac safety interventions. The tools were harmonized to be congruent with published guidelines in several domains. Refinement of these tools is ongoing. Evaluation of their utility in practice may provide insights into their efficacy and optimize related accreditation standards.

#3 Right as RAIN: Corrections & Addictions Treatment—Partners in Recovery

Katharina Wiest, PhD, CODA, Inc., Portland, OR

Kimberly Bernard, PhD, Department of Community Justice, Portland, OR

Nancy Griffith, MFT, Department of Corrections Health Services, Portland, OR

Believing that the public interest is best served by interrupting the "revolving door" of addiction, crime, and incarceration, the RAIN (Recidivism Addiction Intervention Network) program was initiated in Portland, Oregon, with the primary purpose of delivering enhanced services to criminally-involved individuals with substance use disorders. Working collaboratively, Department

EXHIBITORS NETWORKING BREAK

Monday, March 30 | 3:00 p.m.–4:00 p.m.

Supported in part by O.Berk Co. of New England and Kols Container

of Community Corrections, Corrections Health, and a treatment agency offer extended-release naltrexone to criminally-involved opioid dependent patients, focusing on coordinated integrated interventions. This presentation will share the successes and challenges of RAIN, with emphasis on the advantages for patients and providers of a cooperative system between community justice partners and addiction treatment.

4:00 p.m.–5:30 p.m.

WORKSHOP SESSIONS

B1 Meeting the Needs of Patients with Co-Occurring Disorders

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. Addictive behavior and psychiatric problems, barriers to addressing them, prioritization of treatment tasks, and appropriate education for patients, will also be discussed. Additionally, the presenter will focus on anxiety disorders (especially PTSD) and mood disorders, and 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. A review of several evidence-based treatments will be provided.

*Basic Track

B2 The Intersection between PDMPs, OTPs, and HIT Evaluation

Ronald Vlasaty, Family Guidance Centers, Inc., Chicago, IL

Michael O'Neil, PharmD, South College School of Pharmacy, Knoxville, TN

Kristen Cincotta, PhD, CDC/National Center for Injury Prevention and Control, Atlanta, GA

Data suggest that prescription drug abuse remains a public health problem with 81% of new heroin initiates indicating prior prescription analgesic misuse. ONDCP's Prescription Drug Abuse Prevention Plan identifies Prescription Drug Monitoring Programs

(PDMPs) as a means to reduce prescription drug misuse and abuse since PDMPs can be used as a clinical decision-making tool to ensure appropriate medication therapy and identify individuals in need of further assessment/treatment. While federal rules currently prohibit Opioid Treatment Programs (OTPs) from transmitting prescription data to PDMPs, OTPs are encouraged to access PDMPs to enhance medication management. Presenters will describe PDMPs, their use in OTPs, and the integration of PDMPs into Health Information Technology (HIT) systems.

B3 Neurobiological Basis & Interventions: Comorbid Opioid Use Disorder & PTSD

Icro Maremmanni, MD, Santa Chiara University Hospital, Pisa, Italy

Ayman Fareed, MD, Atlanta VA Medical Center, Decatur, GA
Pamela Eilender, PsyD., Atlanta VA Medical Center, Decatur, GA

There is a high comorbidity between post-traumatic stress disorder (PTSD) and substance use disorders (SUD). Self-medication with alcohol and drugs is a common reaction to the physical and psychological impacts of PTSD, which can lead to significant consequences including the development of an opioid use disorder. Brain imaging has been used recently to provide more information about the neurobiological basis for PTSD and opioid use disorder. The neurobiological link, pharmacological interventions, and integrated psychological treatment approaches for comorbid PTSD and SUD will be reviewed.

B4 Current Issues: From the Viewpoint of the Patient

Herman Joseph, PhD, National Drug Research Institute, New York, NY

Joycelyn Woods, MA, National Alliance for Medication Assisted (NAMA) Recovery, New York, NY

Brenda Davis, CASAC-T, Beth Israel/Mount Sinai Methadone Maintenance Program, New York, NY

With the ongoing opioid addiction epidemic, programs must gear up for an influx of patients. While prescribing methadone, buprenorphine, or naltrexone is important, it is not enough. Patients have developed their own ideas about addiction and suspicions about treatment. The stigma they experience affects social interactions, programs, and their views about medications. Conveying research findings, regulation, and rights is important if patients are to understand their conditions, succeed in recovery, and eliminate stigma. Certified methadone advocates and enlightened programs will discuss successful methods to assist patients to resolve these and other challenging issues.

B5 Treatment for Youth Opioid Addiction: Pathways to Engagement

Marc Fishman, MD, Maryland Treatment Centers, Baltimore, MD

Ann Bruner, MD, Mountain Manor Treatment Center, Baltimore, MD

The current epidemic of opioid dependence has devastating consequences for youth and their families. Recent findings have supported approaches that combine relapse prevention medications, such as buprenorphine and extended release naltrexone, with psychosocial interventions. However, the field has many questions about the appropriate use of these medications in youth: selecting good candidates, how to choose among treatments, duration of treatment, benchmarks for adequate response, how to improve retention, response to ongoing opioid or non-opioid substance use, response to medication non-compliance, and the appropriate role for families. This workshop will feature presentations to frame the central questions, followed by case-based scenarios with unfolding decision points as a basis for discussion.

6:30 p.m.–8:30 p.m.

Screening of Documentary Film — The Fix: The Healing is Mutual

Sarah Church, PhD, Division of Substance Abuse, Albert Einstein College of Medicine, Bronx, NY

Laura Naylor, By the By Productions, New York, NY

Junior Alcantara, Division of Substance Abuse, Albert Einstein College of Medicine, Bronx, NY

The Fix conveys a message of hope and recovery by telling the stories of successful methadone patients who become Hepatitis C Peer Educators. This film demonstrates methadone treatment as a platform for therapeutic narrative storytelling, innovative group treatment for hepatitis C, and shows the power of peer educators in building an advocacy movement and community within an Opioid Treatment Program (OTP). It was an official selection at AFI Docs 2014, Maine International Film Festival 2014, and winner of the Jury Prize for Best Documentary at SOHO International Film Festival 2014. The documentary will be followed by a panel discussion including question and answer session.

Conference Sessions

Tuesday, March 31, 2015

CONTINENTAL BREAKFAST

Tuesday, March 31 | 7:30 a.m.–8:30 a.m.

*Sponsored by Reckitt Benckiser
Pharmaceuticals, Inc.*

MIDDLE PLENARY SESSION

8:45 a.m.–10:15 a.m.

Addressing a Public Health Crisis: Opioid Dependence

MODERATOR: *Jonathan P. Connell, MA, President, Private Clinics, and TLC Clinic, Albany, GA*

SPEAKERS:

Richard C. Dart, MD, Director, Rocky Mountain Poison and Drug Center, and Executive Director, Researched Abuse, Diversion, and Addiction-Related Surveillance (RADARS® System), Denver, CO

Reverend Fred Wells Brason, II, President/CEO, Project Lazarus, and Project Director, Community Care of North Carolina's Medicaid Management System Statewide Chronic Pain Initiative, Moravian Falls, NC

Thomas Frieden, MD, Director, Center for Disease Control and Prevention, Atlanta, GA (Conditional Acceptance)

The conference theme “Addressing a Public Health Crisis: Opioid Dependence” will be explored during the themed Middle Plenary. The three speakers are leaders within their fields and will discuss how each experiences the opioid dependence crisis and how they work to address the issue. Dr. Richard Dart will discuss current trends in prescription drug abuse research and how current strategies can ensure the safe and proper use of prescription medications. From a different perspective, Reverend Brason will discuss how Project Lazarus efforts have affected the opioid dependence health crisis through opioid prescribing practices, emergency department interventions, treatment provision, and overdose rescue medication provision. The final speaker, Dr. Thomas Frieden, will provide the public health perspective and how this can improve prevention and treatment efforts.

10:30 a.m.–12:00 p.m.

WORKSHOP SESSIONS

C1 Building Therapeutic Partnerships: The Most Important Evidence-Based Practice

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

Research indicates that the quality of the therapeutic relationship has a greater effect on patient retention and outcomes than 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, discuss the use of patient feedback to strengthen the therapeutic alliance, and explore boundary issues specific to the counselor in recovery.

*Basic Track

C2 Prescription Monitoring Among Patients in an OTP: Using the PMP for Good

Robert Roose, MD, Providence Behavioral Health Hospital, Sisters of Providence Health System, Holyoke, MA

Gwen Fenton, RN, Providence Behavioral Health Hospital, Sisters of Providence Health System, Holyoke, MA

Heather Peterson, PA-C, Providence Behavioral Health Hospital, Sisters of Providence Health System, Holyoke, MA

An interactive presentation will be used to discuss the use of state-wide Prescription Monitoring Program (PMP) Data to guide Opioid Treatment Program (OTP) best practices. Topics will include the use of PMP Data in OTPs, prevalence of controlled substance prescriptions among patients enrolled in OTPs, clinical follow up, patient education, communication between prescribers, use of benzodiazepines, and chronic use of opiates.

C3 Emerging Pathways for the Diagnosis and Treatment of Persons with Opioid Dependence and Pain

Holly Hills, PhD, University of South Florida, Tampa, FL

Tara Richards, PhD, University of Baltimore, School of Criminal Justice, Baltimore, MD

Non-malignant chronic pain is one of the most pervasive problems faced by medical professionals. As such, questions remain as to whether primary care physicians, or physicians in other medical specialties, identify and diagnose patients who present with opioid dependence, and subsequently, whether these patients become engaged in medication assisted treatment. This workshop will focus on the relationship between pain and opioid dependence and

the pathways to addiction care among persons who have previous or ongoing pain. Additionally, findings from a study focused on prescription opioid use for the treatment of pain and engagement in addiction treatment among Medicaid recipients will be presented.

C4 Challenging Punitive State Responses to Opioid Dependence & Treatment

Kylee Sunderlin, JD, National Advocates for Pregnant Women, New York, NY

Karla Lopez, JD, Legal Action Center, New York, NY

Despite medication assisted treatment's (MAT) well-established value and effectiveness, state actors often refuse to defer to medical judgment. Throughout the country, drug courts, parole and probation departments, and judges frequently prohibit participation in MAT, and individuals who are incarcerated are often denied and forced to detoxify from MAT. Such punitive responses to treatment fly in the face of evidence-based medical care and create dangerous legal precedent. This workshop will discuss relevant legal protections and barriers, as well as ways to challenge the criminal justice and civil child welfare policies that routinely subject people in the United States to unjust, inhumane, and unconstitutional treatment.

C5 Overdose Prevention Updates

Melinda Campopiano, MD, Substance Abuse and Mental Health Service Administration (SAMHSA), Rockville, MD

Reverend Fred Wells Brason, II, Project Lazarus and Community Care of North Carolina's Medicaid Management System Statewide Chronic Pain Initiative, Moravian Falls, NC

Pamela Lynch, LLMSW, Northern Lakes Community Mental Health, Traverse City, MI

Community Based Opioid Overdose Prevention Programs that include the distribution of naloxone have increased in response to alarmingly high overdose rates in recent years. The current evidence from non-randomized studies suggests that bystanders (mostly opioid users) can and will use naloxone to reverse opioid overdoses. Opioid overdose prevention treatment programs are well placed to reach potential bystanders and directly assist patients. The presenters will discuss different models of overdose prevention education and means of providing naloxone. The focus will be on successful collaborative relationships with Opioid Treatment Programs and strategies for implementing similar models.

1:30 p.m.–3:00 p.m.

WORKSHOP SESSIONS

D1 Recovery Coaching in OTPs

Walter Ginter, CMA, Medication-Assisted Recovery Supports (MARS) Project, Bronx, NY

Suzanne Hall-Westcott, MS, Beyond MARS Training Institute, Bronx, NY

John Coppola, MSW, New York Association of Alcoholism and Substance Abuse, Bronx, NY

This presentation will provide an overview of what Recovery Coaching is (with acknowledgement of other similar terminology that is used for peer-to-peer services), as well as what training and implementation concerns need to be addressed. There will also be a discussion of outcome data in support of peer recovery services as well as anecdotal evidence in support of implementation efforts for recovery coaching by sharing the MARS experience of instituting Recovery Coaching in a medication assisted treatment environment. In addition, the guidelines and issues around the credentialing of Recovery Coaches will be discussed.

*Basic Track

D2 Health Reform and Access to Opioid Treatment Medications: Early Findings

Sharon Reif, PhD, Brandeis University, Waltham, MA

Cynthia Campbell, PhD, Kaiser Permanente, Oakland, CA

Traci Rieckmann, PhD, Oregon Health & Science University, Portland, OR

Researchers will present recent findings from three ongoing studies examining various aspects of access to opioid treatment medications pre and post health reform. The first examines changes in the management of access to methadone, buprenorphine, and extended release naltrexone using data from a nationally representative survey of health plans. The second examines changes in the utilization of buprenorphine in specialty treatment within a large, private, integrated healthcare delivery system. The third examines strategies related to the provision of methadone, buprenorphine, and extended-release naltrexone in Oregon's Medicaid Coordinated Care Organizations. Findings provide insights into the promise and challenges of this coverage expansion.

INTERNATIONAL LUNCHEON

Tuesday, March 31, 2015

Supported through grants from Colonial Management, LP and Gallagher Bollinger

Tuesday, March 31, 2015

D3 Engagement and Psychosocial Treatment of Youth with Opioid Use Disorders

Susan E. Caverly, PhD, Therapeutic Health Services, Seattle, WA

Among young opioid users, the impact of substances is magnified by life skill deficits, normal pressure for independence (expressed as oppositionality), adolescent omnipotence, and frequently coupled with psychiatric illness. This presentation describes an integrated psychosocial treatment approach based on the ENCOMPASS model. Standardized assessment and repeated measure outcomes are reported, demonstrating implication for structured motivational enhancement therapy, cognitive behavioral therapy, and contingency management, plus psychopharmacologic intervention to support engagement and therapy adherence. The importance of combining psychosocial therapy with pharmacologic interventions directed toward both psychiatric symptom management and medication assisted opioid treatment will be considered in context of treatment outcomes.

D4 Treat Anxiety and Reduce Benzodiazepine Use with Evidence-Based Intervention

Lynn LeBlanc-Marrone, LMHC, Spectrum Health Systems, Inc. Worcester, MA

Lisa Blanchard, LMHC, Spectrum Health Systems, Inc. Worcester, MA

Anxiety disorders are prevalent in individuals with substance use disorders. While benzodiazepines are a commonly used and effective pharmacological treatment for anxiety, these medications may exacerbate addiction and increase clinical risk of overdose. The workshop will present a promising clinical intervention which provides patients non-pharmacological tools to manage anxiety through a cognitive behavioral therapy group curriculum. Data collected on group effectiveness, toxicology results, and patient surveys will be shared.

D5 Methadone Safety Guidelines for Treating Opioid Dependence & Chronic Pain

David Fiellin, MD, Yale University, New Haven, CT

Melissa Weimer, DO, CODA Opioid Treatment Program, Portland, OR

Dennis McCarty, PhD, Oregon Health & Science University, Portland, OR

The American Pain Society in collaboration with the College on Problems of Drug Dependence and the Heart Rhythm Society developed clinical practice guidelines to enhance safety when treating chronic pain and/or opioid dependence with methadone. Recommendations address a) the need for patient education, b) use of electrocardiography to identify patients at risk for cardiac arrhythmia, c) use of alternative medications, d) careful initiation and titration of methadone, and e) ongoing monitoring and follow-up. This session will review the guidelines, the evidence-base for the guidelines, and strategies for implementation of the guidelines in Opioid Treatment Programs.



3:15 p.m.–4:45 p.m.

**INTERNATIONAL PRESENTATIONS:
Outcome Measures in Heroin Addicted Patients
Treated with Agonist Opioid Medication**

**Increasing Importance of Measuring Outcomes
in Opioid Dependence Care**

*Icro Maremmanni, MD, Santa Chiara University Hospital,
University of Pisa, Pisa, Italy*

Heroin addiction represents a major public health issue. Specific actions have been introduced to improve services and promote recovery. Currently used outcome measures, such as access and retention in treatment, provide a limited picture of results. The most likely outcome for success is a combination of all the tools currently employed, but it will be essential to have the outcome measures in place to guide the decisions and ensure access to the right mix of appropriate services and interventions. Review of evidence shows that there is no holistic tool for measuring outcomes in opioid dependence care. Existing tools in opioid dependence care provide measures of progress at the patient level—a tool that allows comparison of outcomes above the patient level is needed.

**Reduction of Specific Psychopathology as Outcome
Measure in Heroin Addicted Patients Treated with
Agonist Opioid Medications**

*Pier Paolo Pani, MD, Social Health Division, Health District 8
(ASL 8), Cagliari, Italy*

Current “official” nosology (e.g. DSM 5) is largely limited to physical manifestations of addiction that can be objectively observed. However, addicted subjects display additional psychiatric symptoms that affect their well-being and social functioning and, in accordance with DSM nosological approach, are typically relegated to the domain of psychiatric “comorbidity.” Mood, anxiety, and impulse-control dysregulation are relevant in both the origins and clinical manifestations of addiction. Using the Self-Report Symptom Inventory (SCL-90), we studied the psychopathological dimensions of patients with heroin addiction at the beginning of treatment and their relationship with clinical conditions. We looked also at the impact of psychopathology on the outcome of treatment. We found that heroin-dependent patients may benefit from opioid agonist treatment not only because it targets their addictive problem, but also because it is effective against the associated mental problems.

**Reduction of Specific Addictive Behaviors and
Improvement of Quality of Life as Outcome
Measures in Heroin Addicted Patients Treated with
Agonist Opioid Medications**

*Angelo Giovanni Icro Maremmanni, MD, School of Psychiatry,
University of Pisa, Italy*

The main goals of opioid treatment in heroin addiction are to eliminate or reduce the use of heroin and other substances of abuse, to reduce patients' addictive behaviors, and to improve their quality of life. In this presentation we propose special quality of life and addictive behavior questionnaires. We present studies demonstrating one-year statistically significant improvements in quality of life, evaluated with this new questionnaire, for methadone or buprenorphine treated patients suggesting the long-term efficacy of methadone treatment and buprenorphine treatment on symptoms of opioid addiction and quality of life. In particular, patients treated with buprenorphine show a better improvement of quality of life especially regarding improvements in jobs, leisure activities, income, and self-acceptance when we considered markedly ill patients with severe impairment in their quality of life parameters.

PRE-BANQUET COCKTAIL RECEPTION

Tuesday, March 31, 2015

*Supported through a grant from
CRC Health Group*

Awards Program

Tuesday, March 31, 2015

7:00 p.m.–9:30 p.m.

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 2015 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.

Henry Bartlett, MS, New York

Henry Bartlett has been in the field for more than 37 years, starting in 1977 in state government, transitioning in 2001 to representing the Opioid Treatment Program (OTP) community in New York as Executive Director of Committee of Methadone Program Administrators (COMPA), and in 2014 becoming the Associate Director for New York State Government Affairs with Alkermes. While still in state government, Henry initiated the restructuring of the Medicaid rates for OTPs which included automatic annual inflation trending, bringing millions of additional dollars annually to the treatment of opioid addiction. Continuing his advocacy while at COMPA, he obtained Medicaid rate equity for freestanding programs and favorable overall Medicaid rates for all OTPs. Henry's advocacy (both in state government and while at COMPA) has had the effect of adding more than two hundred million Medicaid dollars to the OTP treatment system in New York in the last 25 years. Henry has successfully prevented multiple program closures due to fiscal problems and difficulties in relocation. He has also been a driving force in the expansion of OTP services in upstate New York. At both the legislative and executive levels of state and local government, Henry has been a consistent advocate for all patients in New York to have access to evidence-based addiction treatment.

Donna Boone, MD, Illinois

Dr. Donna Boone has served as Medical Director at WellSpring Resources in Alton, Illinois, for nearly 26 years and is a compassionate physician and strong patient advocate. Dr. Boone was named Physician of the Year in 2012 by the Illinois Association for Medication Assisted Addiction Treatment for her dedication to delivering high quality treatment to each patient regardless of ability to pay. She has dedicated herself to the recovery of each individual in the program and proven to be a tremendous resource to the staff as well as the community. Her commitment extends to training staff in all areas of the organization. Dr. Boone has also educated primary care physicians on pregnancy and methadone, as well as serving

as an advocate for her patients. She holds a deep respect for her patients and their right to self-determination. As a physician, she has raised the bar for patient care in the state of Illinois. Dr. Boone has made meaningful and consistent contributions that have had significant impact on opioid treatment in Illinois.

JoAn Brown, LPN, Louisiana

JoAn Brown is the owner, CEO, and Administrative Director of Choices of Louisiana, Inc., a multi-site Opioid Treatment Program (OTP). Ms. Brown is also a founding member of Louisiana's Association for the Treatment of Opioid Dependence (LATOD) where she has served as President since 2000. With nearly two decades of dedication in advocating for the rights of patients enrolled in medication assisted treatment (MAT) programs, Ms. Brown utilizes the legal and legislative systems to increase patient access to OTP services and programs. Her involvement and strong belief in the benefits and credibility of methadone treatment prompted her to initiate a campaign to reduce OTP related stigma and abolish prejudicial practices toward methadone patients by educating addiction treatment specialists and other professionals who provide MAT services. Ms. Brown has served as a board member of the Louisiana Addictive Disorder Regulatory Authority, being nominated by the Louisiana Association of Substance Abuse Counselors & Trainers, Inc. (LASACT) and appointed by the Governor for multiple terms. Among numerous awards and recognitions, Ms. Brown's organization, Choices of Louisiana, received the Addiction Treatment Services Provider of the Year award from LASACT in 2010.

Richard Froncillo, LCDS, Pennsylvania

Richard "Ricky" Froncillo began his career in the substance abuse/addiction treatment field as an entry level counselor in 1976. Since entering the field, he has been actively involved in associations that advocate for persons in recovery in multiple states. In 1999, he became active in the Pennsylvania Association for the Treatment of Opioid Dependence (PATOD) and in 2006 he was elected President of the organization, an office that he currently holds. PATOD represents the majority of medication assisted treatment programs in Pennsylvania and as the Chair of this group, Ricky was appointed to the Joint State Government Commission of the Distribution of Methadone and invited to participate on the buprenorphine access workgroup and the Value Behavioral Health workgroup that developed the Recovery Oriented Systems of Care for Opioid Treatment Programs. Pennsylvania legislators have proposed numerous bills directed towards Opioid Treatment Programs and patients treated in these facilities and Ricky has worked tirelessly to help educate these legislators. Since 1996, Ricky has worked with Discovery House, a national network of medication assisted treatment programs, in one of his most important roles, patient ombudsman.

Sara Hartman, MSW, Massachusetts

Sara Hartman served 16 years as the Vice President of Mental Health for the Association for Behavioral Healthcare in Massachusetts. During her 16-year tenure, Sara worked on federal and state regulatory and monitoring, accreditation, healthcare reform, managed care policies, rate setting, access to care, and quality improvement initiatives. She helped establish the Opioid Treatment Providers Committee in 1999. Sara provided guidance to the providers, wrote state and federal testimony and regulatory feedback, represented and provided interface on behalf of the Opioid Treatment Providers with the Massachusetts Department of Public Health Bureau of Substance Abuse Services, Massachusetts Office of Medicaid, and managed care organizations. She was a major policy advocate during the 2002 and 2003 Massachusetts budget cycle in the successful fight to preserve Medicaid coverage for 10,000 individuals receiving services in OTPs. Sara has demonstrated unwavering dedication, compassionate leadership, commitment, and advocacy for methadone treatment. She has been a compassionate leader and has provided sincere advocacy for methadone treatment and is described by her colleagues as self-directed, organized, resourceful, trustworthy, and a conscientious professional.

Jason Kletter, PhD, California

Dr. Jason Kletter is the President of Bay Area Addiction Research and Treatment, which operates 22 Opioid Treatment Programs (OTPs) in five states. Dr. Kletter also serves as the President of the California Opioid Maintenance Providers (COMP) and as a Board Member of AATOD. Dr. Kletter has demonstrated excellence in many different aspects of the field as evidenced by support from colleagues, staff, patients, regulatory officials, and legislators. He is recognized in California for his determined patient advocacy and vocal support of increased access to high quality care with evidence-based practices. Those who know Dr. Kletter are familiar with his collaborative leadership and communication styles. Dr. Kletter is also known as an excellent resource given his exceptional knowledge base. This was highly evident in his work leading COMP providers through a political campaign to defeat the Governor's budget proposal that would eliminate Medicaid funding for OTPs in California. Dr. Kletter developed and maintains a statewide conference on opioid treatment in California tailored specifically for OTP staff that includes many respected researchers and clinicians. He serves on the advisory board for the National Alliance for Medication Assisted Treatment (NAMA) Recovery and educates state policy makers on medication assisted treatment. Dr. Kletter has served as advisor to the California Department of Health Care Services, has participated in federal work groups with the Center for Substance Abuse Treatment initiatives as well as advising state legislators helping to craft sound policy into legislation.

Yngvild Olsen, MD, Maryland

Dr. Yngvild Olsen is the Medical Director for the Institutes for Behavior Resources in Baltimore and previously served as the Vice President of Clinical Affairs for the Baltimore City Substance Abuse Systems, as the Deputy Health Officer for the Harford County Health Department, and as the Medical Director for the Johns Hopkins Hospital's outpatient substance use disorder treatment services. She is a graduate of Harvard Medical School, completed her residency training in internal medicine at Boston University's Boston Medical Center, and received a Masters in Public Health from the Johns Hopkins Bloomberg School of Public Health. Throughout her career, Dr. Olsen has written and lectured extensively on addiction, opioid use disorder, and co-morbid medical issues. Dr. Olsen was recently published in the *Journal of the American Medical Association* on confronting the stigma of opioid use disorder and its treatment. She is a true patient advocate who works in her treatment center and in the community to help reduce the stigma of those affected by opioid addiction.

Lorenzo Somaini, MD, Italy

Dr. Lorenzo Somaini directs a hospital service unit specializing in addictions treatment following the methods and protocols of Drs. Dole and Nyswander. While primarily a practicing clinician, his mission also includes developing and delivering education and training for physicians and nurses on opioid agonist treatment. He conducts ongoing extensive research in such areas as the genetic factors influencing individual response to methadone and buprenorphine, the role of adverse childhood experiences in the development of addiction, and the immunologic effect of treatment. Dr. Somaini is a recognized expert on opioid agonist treatment and collaborates extensively with the Department for Antidrug Policies – Ministry for International Cooperation and Integration, Italy, the UN Office of Drug Prevention and Health, the Italian Society of Addiction Medicine, EUROPAD, the World Federation for the Treatment of Opioid Dependence, as well as Italian and international universities. He is also recognized for his contribution to the development of Ukraine's national strategy on opioid dependence.

Rubie Walker, MA, Arizona

Rubie Walker, Program Director of Southwest Behavior Health Services, has been a member of the Arizona Coalition since 2003 and has served as Co-Chair for the past six years. Since her start with the Coalition, she has been enthusiastic, engaged, dedicated, and hardworking. She diligently educates community members about the benefits of medication assisted treatment (MAT). Rubie is well known and respected throughout the behavioral health treatment community for her work with victims and perpetrators of domestic violence, juvenile court incarcerated and adjudicated youth, Head Start, and other agencies. She has tirelessly fought for better MAT, both in her facility and in all of Arizona. The natural enthusiasm with

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which she approaches every challenge has resulted in challenging others to become better educated about treatment, to be better advocates for treatment, and to be better equipped to meet the challenges. Arizona is deeply grateful to Rubie, who has never quit battling the systems that try to deny people the opportunity for MAT and for a better future for themselves and their families. The treatment community in Arizona is a better place because of Rubie.

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 2015 Friend of the Field Award has been awarded to:

The Honorable Peter Shumlin, Governor of Vermont

Governor Peter Shumlin's career in public service began more than 30 years ago when at the age of 24 he was elected to serve on Putney, Vermont's select board.

In 1990, he was appointed to fill an empty seat in the Vermont House of Representatives where he served for three years. He then served eight terms in the Vermont Senate and was elected by his colleagues to lead the Senate as President pro tempore during that time. Elected Governor in 2010, he recognized the reality of the rising opioid related deaths in Vermont. In June 2013, Gov. Shumlin signed into law two bills aimed at reducing the toll of drug overdose deaths in the state. In 2014, Governor Shumlin decided to take a bold approach to this problem and devoted his entire "State of the State Address" to this public health crisis. In this call-to-arms speech, the Governor outlined an ambitious program to address opioid addiction. Since then, he has implemented plans increasing access and funding to addiction treatment programs and has had a significant impact on the surrounding region. Vermont is now said to lead the country in addressing opioid overdose through broad scale and comprehensive overdose prevention legislation. The Governor is currently working with other governors in New England to be certain that he is doing all that he can to increase access to quality addiction treatment services.

Governor Shumlin is being recognized for his holistic approach in confronting this public health crisis and the passion and energy he brings to this issue.

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.

Claude Hopkins, CADC

Claude Hopkins serves as a National Grievance Coordinator for National Alliance for Medication Assisted Recovery (NAMA-R), Substance Abuse Counselor and Patient Advocate for JSAS HealthCare, serves on NAMA-R Board of Directors as a State Chapter Director, and is a member of "Stop Stigma Now." Claude Hopkins applies over 40 years of his own personal recovery on methadone to help others still struggling with their addiction. He has established positive working relationships at the state and national level enhancing his ability to be an effective advocate and changing negative attitudes regarding the efficacy of medication assisted treatment (MAT). Claude previously served as a Patient Representative in New Jersey's Citizen's Advisory Committee, has served as a NJ Representative to "Faces and Voices of Recovery," and is currently a Consultant to the NJ State Opioid Treatment Authority. Claude is described as an authentic, willing, and devoted Advocate. He has had a positive effect on NJ's policies and practices as they relate to MAT. He is intelligent and balanced in his approach to challenges, which lends itself to positive outcomes for patients in the state of New Jersey.

2015 AWARDS BANQUET

Tuesday, March 31, 2015

*Supported through a grant from
Mallinckrodt Pharmaceuticals*

Conference Sessions

Wednesday, April 1, 2015

CONTINENTAL BREAKFAST

Wednesday, April 1 | 7:30 a.m.–8:00 a.m.

WORKSHOP SESSIONS

8:00 a.m.–9:30 a.m.

E1 Smoking Cessation Made Easy, or How to Save \$2,250 or More per Year!

Abigail Kay, MD, Thomas Jefferson University, Philadelphia, PA

If quitting smoking were only a matter of self-control, most would be successful. As the medical consequences are so severe, it is key that all treatment team members have an understanding of different options available to help people quit. This workshop focuses on medication assisted treatments for smoking cessation. It is designed to be accessible to the entire treatment team, from the peer counselor to the physician. Over-the-counter, as well as prescription medication options, will be covered. Additionally, smoking cessation for those with co-occurring psychiatric diagnoses and a review of physiological reasons that make quitting more challenging will be discussed.

*Basic Track

E2 Legal Cannabis Use: Emerging Treatment Challenges in Methadone Treatment

Alan Lee Nolan, LCSW, Connecticut Counseling Centers, Inc., Norwalk, CT

Medical and legal cannabis use is becoming an increasing focus within Methadone Maintenance Treatment Programs (MMTP). This workshop will focus on the unique challenges involved with addressing the evolving role of medical marijuana for patients enrolled in a MMTP. The presenter will examine the numerous questions relating to marijuana's potent psychoactive properties and associated risk management concerns, the inconclusive empirical data regarding adverse health consequences and how these questions are creating serious challenges for providers and ultimately impacting treatment models, policy decisions, and consumer perspectives. An analysis of the potential service implications of marijuana use among MMTP patients will be explored.

E3 Meeting the Need: Enhancing the Utilization of PAs-NPs in OTPs

Jim Anderson, PA-C, Evergreen Treatment Services, Seattle, WA
Ron Jackson, LICSW, University of Washington, Seattle, WA
Paul Grekin, MD, Evergreen Treatment Services, Seattle, WA

With the Affordable Care Act (ACA) now firmly in place, access to Opioid Treatment Program (OTP) care has skyrocketed. Programs across the country face challenges in finding providers capable of providing high-quality care for the growing patient population. This workshop will address this challenge and describe the benefits of enhanced utilization of Physician Assistants (PAs) and Nurse Practitioners (NPs), offering a historical framework of the deployment of PAs and NPs in OTPs, examining available data about safety, scope of practice, and quality of care issues related to PA-NP practice, and describing strategies to meet the needs of a growing patient population in the context of ACA implementation.

E4 Best Practice Guidelines for Recovery-Oriented Methadone Maintenance

James M. Schuster, MD, Community Care Behavioral Health Organization, Pittsburgh, PA
Margaret E. Hanna, MEd, Community Care Behavioral Health Organization, Pittsburgh, PA

This workshop describes *Supporting Recovery from Opioid Addiction: Community Care Best Practice Guidelines for Recovery-Oriented Methadone Maintenance*—which blend the latest national consensus guidelines and the work of William L. White, MA and Lisa Mejor-Torres, JD (Recovery-Oriented Methadone Maintenance, 2010). Community Care, a provider owned behavioral health not-for-profit managed care company, partnered with counties, providers, and persons in recovery in this effort. Presenters will review the content, especially the role of medication assisted treatment in recovery and quality of care concerns, and also discuss challenges in practical applications of these guidelines. Development methodology and lessons learned will also be shared.

E5 The Role of OTPs in Preventing, Treating, and Educating on HCV and HIV

Andrew Talal, MD, University of Buffalo, Buffalo, NY
Karen Drexler, MD, Veterans Administration, Atlanta, GA

Hepatitis C virus (HCV) and human immunodeficiency virus (HIV) infections are a common occurrence in opioid dependent intravenous drug users. However, recent advances have now produced medications that significantly improve treatment efficacy and outcomes for HCV patients. Recent literature notes patients are very open to receiving treatment for HCV in an Opioid Treatment Program (OTP) environment. Similarly, OTPs already have existing regulatory requirements to provide interventions to HIV-infected patients. The literature suggests that engagement in medication

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assisted treatment reduces risky behavior and increases positive outcomes for opioid dependent HIV-infected patients. Given the existing structure for managing complex patients, OTPs are uniquely positioned to address HCV and HIV with opioid dependent patients.

9:45 a.m.–11:15 a.m.

F1 Buprenorphine Updates

Robert Lubran, MS, Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, MD

Elinore McCance-Katz, MD, Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, MD

Wayne Wakeland, PhD, Portland State University, Portland, OR

This session provides an update on federal policy on the use of buprenorphine for opioid dependence. SAMHSA promulgated new regulations increasing flexibility for patients of Opioid Treatment Programs treated with buprenorphine. Moreover, SAMHSA held a Buprenorphine Summit in 2014 to develop recommendations on how to advance the field. In addition, a SAMHSA study will be presented using a computational policy model for understanding the interactions between buprenorphine treatment capacity, costs, and public health and safety. The model is used to answer questions about the impact of lifting the patient cap and including advanced practice providers as prescribers.

*Basic Track

F2 Preventing Premature Discharges & Alternatives to Administrative Discharges

Robert L. DuPont, MD, Institute for Behavior and Health, Inc., Rockville, MD

Howard Hoffman, MD, Foundation for Contemporary Mental Health, Washington, DC

A significant challenge in treating opioid dependence is non-compliance to treatment, including the continued use of non-prescribed drugs and low attendance. This workshop discusses strategies to prevent premature discharge, including interventions in response to non-adherence by the methadone treatment program. Partners in Drug Abuse Rehabilitation and Counseling (PIDARC) in Washington, DC utilizes a series of protocols and interventions to retain patients in treatment before imposing administrative discharge. Continued use of non-prescribed drugs is a risk factor for premature termination of methadone maintenance treatment. This workshop presents lessons learned from PIDARC including research findings and implications for other treatment programs.

F3 VT's Hub and Spoke Model for Opioid Addiction

John R. Brooklyn, MD, University of Vermont College of Medicine, Clinical Assistant Professor of Family Medicine and Psychiatry, Burlington, VT

Anthony Folland, BA, Vermont State Opiate Treatment Authority, Alcohol and Drug Abuse Programs, VT Dept of Health, Burlington, VT

Hub and Spoke is a comprehensive treatment system for patients receiving medication assisted treatment for opioid dependence. The Vermont Hub and Spoke model for treating opioid dependency will be discussed from its inception to the current time. We will discuss the underlying basis for creating this system of care based on challenges in adequately reaching all opioid addicts and coordinating the appropriate level of care in this rural state. Funding and regulatory support under Vermont's Chronic Care Initiative as part of the Blueprint for Health will be discussed.

F4 Selecting, Implementing and Maximizing the Benefits of an Electronic Health Record (EHR) at Your Opioid Treatment Program

Susan Hayashi, PhD, JBS International, Inc., Bethesda, MD

Gregory Warren, MA, Trident Group, LLC, Baltimore, MD

Sharon Dow, MS, DB Consulting Group, Inc., Silver Spring, MD

Substance Abuse and Mental Health Services Administration (SAMHSA) has indicated that Opioid Treatment Program (OTP) adoption of EHRs is a major gap in achieving health information technology (HIT) interoperability. To help OTPs more actively participate in HIT and make the transition to EHRs, this panel will build on previous efforts by AATOD and SAMHSA to discuss key lessons learned from OTP EHR implementation case studies, best practices for sustaining a successful EHR system and maximizing its use, and available resources about EHRs for OTPs, including a free online EHR portal community for OTPs.

F5 SAMHSA's Tobacco Cessation for Opioid Treatment Programs

Deborah Petska, MA, Danya International, Inc., Silver Spring, MD

Phillip Wilbur, MA, Danya International, Inc., Silver Spring, MD

This workshop will provide participants with the knowledge and tools that will enable them to determine the appropriateness of the tobacco cessation program for their treatment facilities and assess the readiness of their tobacco-addicted patients. The presentation will focus briefly on the importance of a tobacco cessation program that specifically addresses the OTP patient population. An overview of the tobacco cessation program and its fundamental principles will also be provided. There will be a strong emphasis on how the stages of change and a patient-driven approach are effective methods to encourage abstinence from tobacco in OTP patients.

CLOSING PLENARY SESSION

11:30 a.m.–12:45 p.m.

The Federal Response to the Opioid Dependence Crisis

Moderator:

Mark W. Parrino, MPA, President, American Association for the Treatment of Opioid Dependence, Inc. (AATOD), New York, NY

Speakers:

Michael P. Botticelli, MEd, Acting Director, Office of National Drug Control Policy (ONDCP), Washington, DC

Pamela S. Hyde, JD, Administrator, Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, MD

The White House Office of National Drug Control Policy (ONDCP) and the Substance Abuse and Mental Health Services Administration (SAMHSA) are the two leading federal agencies involved in developing and implementing drug addiction policies in the United States. We are fortunate to have their leaders close our conference, advising attendees on how their agencies are working to effectively coordinate policy into the future. Mr. Michael Botticelli will provide an understanding of how ONDCP is responding to the public health crisis of opioid addiction in the United States, focusing on the National Drug Control Strategy and ONDCP specific initiatives to confront this public health challenge. Administrator Pamela Hyde will focus on SAMHSA's past, current, and future efforts to address the need for increased treatment in order to provide access to care for people who are clearly in crisis. It is an important closing to our conference as we prepare to deal with the challenges that lie ahead in an era of increasing opioid addiction.

CLINIC TOURS

1:00 p.m.–3:30 p.m.

Visit the Hospitality Table on-site for more information and to sign up for the tours.



Alliance Recovery Centers—Decatur & Conyers

Alliance Recovery Centers (ARC) opened as an Opioid Treatment Program in 1996. ARC is a privately owned provider operating in Decatur, Conyers, and Athens, Georgia. ARC is a current contract provider for The Department of Behavioral Health and Developmental Disabilities and the Veterans Administration. ARC prides itself on providing clean, safe, and comfortable facilities and a professional, graduate level counseling staff.



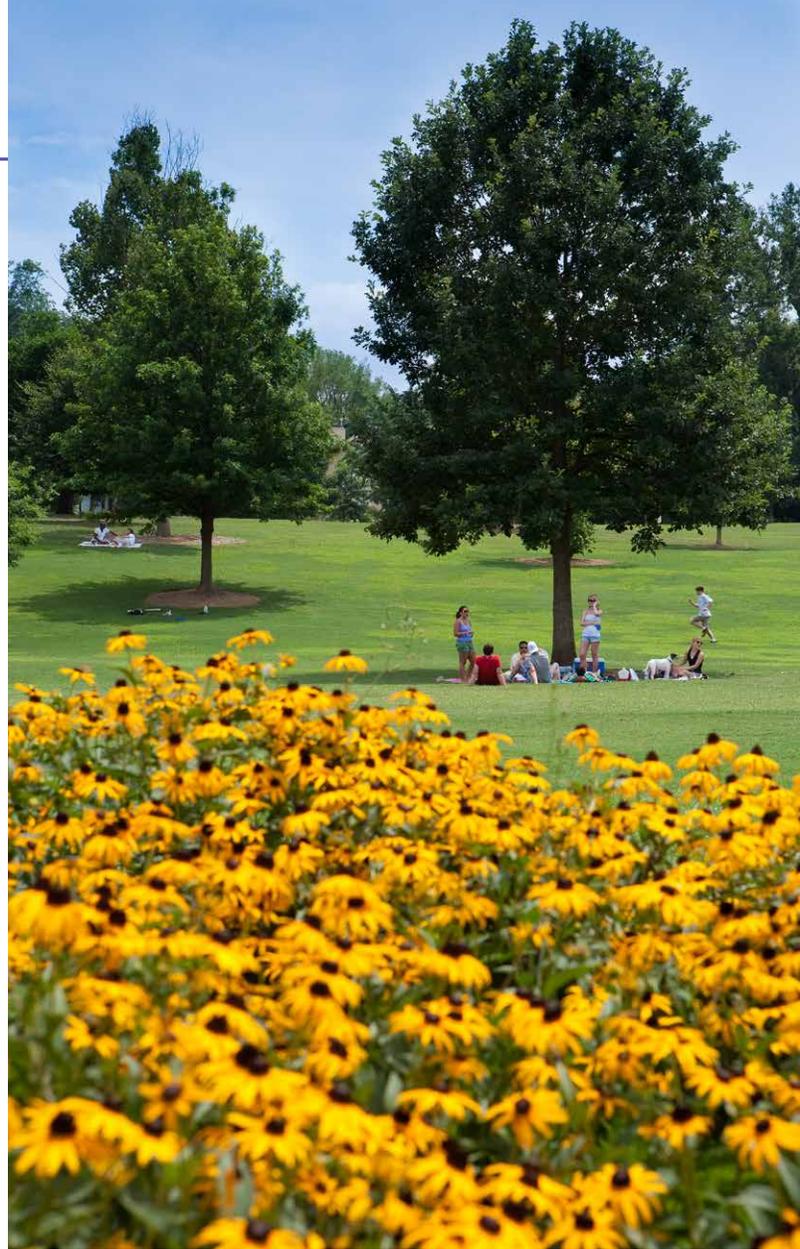
Southside Medical Center

Southside Behavioral Lifestyle Enrichment Center (SBLEC) is one of Southside Medical Center's specialty areas, providing services to men and women, aged 18 and older, with mental health and/or substance abuse issues.

SBLEC currently has two main programs of service, the Opioid Treatment Program (OTP) and the Adult Mental Health program. Clients of SBLEC also have access to all of Southside Medical Center's areas of health care to ensure that the whole person is treated and cared for.



Our Host City: Atlanta



On behalf of the AATOD Hospitality Committee, I invite you to attend the 2015 AATOD Conference in Atlanta! We need to address the pandemic of opioid dependence, a true public health crisis. Medication Assisted Treatment is the gold standard in treating opioid dependence and we are all joining together in Atlanta to better our cause to increase the awareness, availability, and quality of care that persons suffering from opioid dependence deserve.

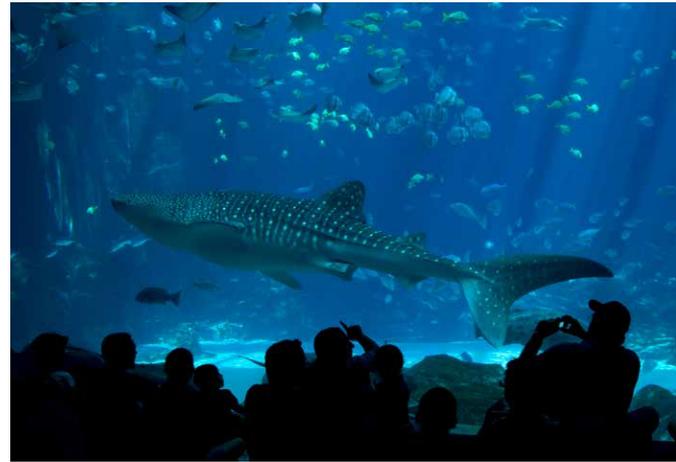
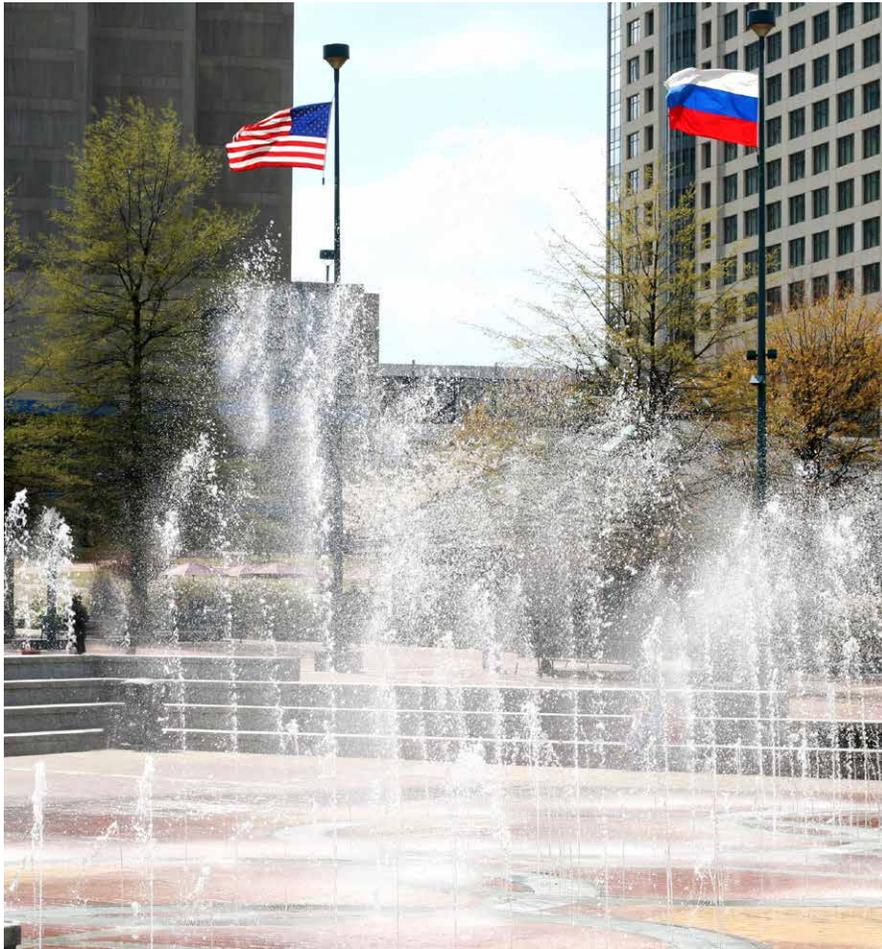
Atlanta is the big American city that everyone needs to experience. Peach trees and southern charm are only the tip of the iceberg. We are proud of our city and have a strong history of hospitality and warmth. We can't wait to show you what we have to offer!

Spring is a beautiful time to visit the southeastern United States, and is the time that Atlanta blossoms to life. Come walk our tree

lined streets, talk to our people, eat our food, and enjoy the southern way of life. Atlanta is a garden city, however, we are rich beyond our foliage. Atlanta is very unique in its place in history. We are a place of change, growth, and birth.

The 2015 AATOD Conference will be held at the Hyatt Regency Atlanta located in downtown Atlanta. Blocks away are many of Atlanta's finest attractions, including Centennial Olympic Park, the Georgia Aquarium, CNN Center, the World of Coca-Cola, the College Football Hall of Fame, the Center for Civil and Human Rights, and Underground Atlanta.

Atlanta's new street car line, the first since 1949, will be available to take passengers from Centennial Olympic Park to the Sweet Auburn historic district, one of America's richest African American cultural centers, and the Martin Luther King Historic District, among other destinations. MARTA, Atlanta's public transportation system, is connected to the Hyatt Regency Atlanta as well. You can easily reach many attractions and parts of our city including the



Fabulous Fox Theater, the High Museum of Art, the Alliance Theater, the Woodruff Arts Center, the Museum of Design Atlanta, and the Margaret Mitchell House. Piedmont Park, Atlanta's answer to Central Park, and the award winning Atlanta Botanical Garden are not to be missed. Both are accessible by MARTA. The King Memorial Center and Oakland Cemetery are also accessible by MARTA and not to be missed as well. There are restaurants located on Memorial Drive adjacent to Oakland Cemetery that make for wonderful destinations before or after a stroll through Oakland Cemetery and King Memorial.

Atlanta has many great neighborhoods that should be explored as well. The Virginia Highlands is a popular destination for dining and boutique shopping with its tree lined streets and beautiful homes. Little Five Points is a destination for counter culture, theater, music, and shopping. Take MARTA's east line from Five Points to Decatur where you will find a very charming enclave of friendly walkable streets, some of Atlanta's best restaurants, shopping, music venues, and street life. An afternoon or evening in Decatur will be time well spent. While not within walking distance from Decatur, The Centers

for Disease Control and Prevention, Fernbank Museum of Natural History, and Emory University are nearby. Emory University's Carlos Museum is a treasure and open to the public. Fernbank Museum of Natural History is an excellent destination for science and nature lovers, featuring permanent and traveling exhibitions as well as an IMAX Theatre.

AATOD, the Hospitality Committee, the Opioid Treatment Providers of Georgia, and the State of Georgia invite you to Atlanta with open arms and southern hospitality. The AATOD Hospitality Committee will be happy to give visitors any information about the above activities and destinations as well as recommendations for dining, activities, and attractions in the Atlanta area. Nothing is beyond reach. We welcome you to our city and hope you have a great experience at the 2015 AATOD Conference in Atlanta!

Sincerely,

Brook Etherington, MA
AATOD Hospitality Chair

HOTEL INFORMATION/RESERVATIONS

HYATT REGENCY ATLANTA

265 Peachtree Street NE
Atlanta, GA 30303
P: 404-577-1234



<http://atlantaregency.hyatt.com>

Sleeping rooms have been reserved for attendees at a conference rate of \$169 single/double occupancy. This reduced rate is available until March 4, 2015, subject to availability. Reservation requests received after the cutoff date of March 4, 2015 will be based on availability at the hotel's prevailing rates.

To reserve a room at the group rate contact the hotel directly by calling their reservation line at 1-888-421-1442 or by visiting the AATOD website at www.aatod.org. Please be sure to reference the American Association for the Treatment of Opioid Dependence or AATOD Conference.

CONFERENCE CONTACTS

TALLEY MANAGEMENT GROUP, INC.

Alexandra Springer, CMP – Meetings & Exhibits Manager
19 Mantua Road
Mount Royal, New Jersey 08061
PHONE: 856-423-3091
FAX: 856-423-3420
E-mail: aatod@talley.com
Website: www.aatod.org

EXHIBIT SALES

Sue Parker, Sales Associate
sparker@talley.com

CONTINUING EDUCATION CREDITS

- 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. AATOD maintains responsibility for the program. ASWB Approval Period: 6/12/2013–6/12/2016. Social workers should contact their regulatory board to determine course approval. Social workers participating in this course will receive up to 36.75 (clinical or social work ethics) continuing education clock hours.

Please visit the AATOD website at www.aatod.org to find information on specific learning outcomes and objectives for each session, the target audience for each session and the number of credit hours awarded for each session from the ASWB.

Please note: New York State no longer accepts credits for Social Work from ASWB.

- AATOD is an approved provider through the National Association of Alcoholism and Drug Abuse Counselors (NAADAC), Provider #000218.
- Application to award Continuing Education Credits will be submitted for the following specialties:
 - Counseling
 - Nursing
 - Physicians

CONFERENCE REGISTRATION

Registration for the American Association for the Treatment of Opioid Dependence, Inc. (AATOD) Conference can be done on-line by visiting the AATOD website at www.aatod.org or by completing the registration form on the inside back cover and faxing it to 856-423-3420 or by mailing it to:

AATOD 2015 Conference Registration
c/o Talley Management Group, Inc.
19 Mantua Road
Mt. Royal, NJ 08061

If faxing your registration, DO NOT mail the original form; doing so may result in duplicate charges to your credit card! Should you have any questions regarding conference registration please call 856-423-3091.

You may register individuals or groups from an Agency through the AATOD website.

Full Conference Registration *	1 person from an agency	2 or more from an agency, each
Standard Registration 7-12-14 thru 2-28-15	\$510.00	\$485.00
On-Site Rates 3-1-15 thru 4-1-15	\$595.00	No Group Discount Applies

* Includes: Admission to Pre-Conference Sessions (excluding Clinicians Course), Welcome Reception, all Plenary Sessions, Workshops, daily continental breakfast, and Awards Banquet

Splitting of conference fees is not permitted. Only one discount per conference participant is allowed, including the presenter's discount.

GROUP DISCOUNTS DO NOT APPLY FOR THE FOLLOWING CATEGORIES:

Single Day Registration (Does NOT include Awards Banquet)	\$260.00
Clinicians Course	\$235.00
Additional Awards Banquet Tickets	\$ 85.00
Additional Welcome Reception Tickets	\$ 40.00

CME/CEH FEES

These fees are not included in full conference registration fee

Physicians/Physician Assistants/Pharmacists	\$ 50.00
Nurses/Social Workers/Psychologists	\$ 40.00
Counselors	\$ 30.00

CONFERENCE RECORDINGS

AATOD has contracted to have all conference sessions recorded. Order the recordings in advance and save. You can purchase all Pre-conference sessions or all workshop sessions in advance for \$125 each or save even more and buy both sets for \$200.

SPECIAL NEEDS

The American Association for the Treatment of Opioid Dependence, Inc. wishes to take steps to ensure that no disabled person is excluded, denied services, segregated, or otherwise treated differently than other individuals because of the absence of auxiliary aids and services. If you require any auxiliary aids or services identified in the Americans with Disabilities Act, please indicate so during the registration process.

Conference Registration



**American Association for the
Treatment of Opioid Dependence, Inc.**

19 Mantua Road
Mt. Royal, NJ 08061
www.aatod.org

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Addressing a Public Health Crisis: Opioid Dependence

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