JAMESTOWN MAT CAMPUS FACT SHEET

August 1, 2019 by Mark Ozias

There are many claims being made, and information flowing online and in print, about Medically Assisted Treatment (MAT) for opioid addiction and about the new MAT Clinic that is being proposed for location in the City of Sequim. This Fact Sheet is an attempt to address the concerns being raised by individual citizens and in some cases being promulgated by the political action effort known as "Save Our Sequim."

Do we have excess capacity at the existing MAT clinics on the Peninsula? I've heard that our existing MAT programs don't even have a waiting list so why do we need another one?

No. We DO NOT have excess capacity at our existing clinics. While we've worked hard to expand services locally and thus decrease wait times, there is nowhere in the county that offers regular same-day services for folks who are ready for recovery, which would be one of the goals of the Jamestown facility. As of July 31, 2019, we know:

- North Olympic Healthcare Network (NOHN) in Port Angeles has a wait list
- Jamestown Family Health Center in Sequim can see patients within 1-2 business days
- Olympic Medical Center (Port Angeles and Sequim) can see patients within 1-2 business days
- Olympic Peninsula Health Services in Port Angeles is taking new patients, but is only open three days a week from 9:00am 2:00pm
- Baymark in Port Angeles is not yet open, and plans to open with one part-time physician working up to 15 hours/week

Importantly, there is no one in Clallam County offering what Jamestown is planning to do — daily observed dosing with wrap-around services/ primary care/ mental health in an integrated model. Baymark will start offering daily observed dosing soon, though they will not have onsite primary and mental health care.

What is "daily observed dosing" and why is it important in Sequim?

It's important to differentiate daily observed dosing (of methadone or suboxone) from other treatment modalities. Outpatient primary-care-based suboxone (which is what is currently available in Clallam County) is not right for everyone and is rarely the right match for some of our

highest needs folks struggling with addiction – those with serious chronic pain and those who need a higher level of supervision/support that comes with daily dosing clinics. Because we don't have that anywhere right now, a lot of our highest needs community members are going unserved and are continuing to use.

Does MAT work? Why can't we rely on abstinence-based treatment for opioid addiction?

MAT is incredibly effective and is the standard of care for treating opioid addiction, and the statistics backing this up are truly stunning. A recent study in the medical journal *Lancet* found:

- Sobriety and treatment retention at 1 year with MAT and counseling was 75%,
- Sobriety and treatment retention at 1 year with abstinence and counseling was 0%
- Within the abstinence group, 100% of patients relapsed within 60 days

There are so many studies that show similar results that it is no longer considered ethical to run a trial comparing MAT to abstinence-based therapy due to MAT's proven superiority and decreased mortality.

The CDC, Washington Department of Health, AMA, American Psychiatric Association, American Society for Addiction Medicine, Federal Department of Health and Human Services, and the Attorney General all support MAT as the standard of care for treating opiate use disorder. This is settled science. It is of course also supported by CCHHS as well as by our local law enforcement and first responders.

Is MAT just another way for the pharmaceutical industry to make money on the opioid crises they perpetuated?

No. Methadone and Suboxone, the two most widely-used drugs for MAT, are generic and not sources for pharma profits.

Do MAT clinics correspond to an increase in crime?

No. Multiple studies have shown large-scale reductions in crime with the initiation of MAT – typically reductions of up to 80% in both property crime and in violent crime.

- Link: Methadone maintenance and drug-related crime.
- Link: The efficacy of methadone maintenance interventions in reducing illicit opiate use, HIV risk behavior and criminality: a meta-analysis
- Link: Associations between Methadone Maintenance Treatment and Crime

Will this new Jamestown MAT Clinic bus patients in from far away, patients who might get stranded in Sequim with no family or resource?

There are no plans to bus people in from Seattle; they already have methadone treatment facilities there and don't need ours. However, there are currently more than two dozen people who are either using public transportation or being driven by a friend or relative every single day from Clallam County to Tacoma or Seattle to receive the kind of MAT that isn't yet available in our county.

Is there a difference between methadone and "meth?"

Yes. At a recent public forum held by the City of Sequim, more than one speaker confused methamphetamine (a highly-addictive stimulant and illegal drug, also known as meth, crystal meth, and other names) with methadone (a safe and effective medication that has been used for decades to treat addiction to heroin and opioids.) The proposed Jamestown MAT Clinic will be offering methadone, not meth, as part of their MAT program.

Is the Jamestown Tribe pursuing this MAT Clinic to make a profit?

As long as our national health care system relies on profit, and as long as health care providers need to ensure they make a profit in order to keep their doors open, the reality is that our regional opioid response system — and local citizens — will benefit from the entity/agency that is best-positioned to operate this type of business (namely, the Jamestown S'Klallam Tribe) actually taking the public relations risk of doing so. Because of the way that reimbursement rates are calculated, Tribal governments are often the partners who are able to operate MAT facilities with the highest level of support for the wraparound services that are so critical to a patient's success.

Is jail the right place for most addicts?

The Clallam County jail is often the appropriate place for opioid addicts who commit crimes or become a public nuisance. Fortunately, the Sheriff created an MAT program which operates inside of the jail with some success — successes that would be much more sustainable if there were improved options for continuing on an MAT protocol upon release from jail. Furthermore, we know to expect fewer crimes related to opioid addiction as more people have access to the treatment they need, whether inside the jail or our in the community.