

Beacon Health Options, in conjunction with the Connecticut Behavioral Health Partnership, is at the forefront of treating Alcohol Use Disorder and other substance use disorders. It promotes an evidence-based, holistic treatment approach that includes medication-assisted treatment (MAT), community support, and other recovery-oriented interventions. Our local strategies include:

- Expanding access to MAT through network development, education, and collaboration
- Sharing and promoting best practices by educating and engaging providers in Beacon Project ECHO® (Extension for Community Healthcare Outcomes). Beacon is the first behavioral health management company to become an official partner of ECHO
- Providing Substance Use Disorder (SUD) clinical management to improve member engagement and retention in outpatient treatment
- Maintaining a MAT locator map on our website, ctbhp.com, featuring MAT clinics, medications, transportation accessibility, and treatment offered for Connecticut Medicaid members
- Coordinating care with Community Health Network of CT (CHNCT), the Medical Administrative Services Organization, to address members at risk for substance use disorders
- Collaborating with local agencies, organizations, and providers to share resources and best practices, and to offer trainings.

NEXT STEPS:

Interested in locating a MAT Provider? Want to be listed on the MAT Medicaid Provider Locator map? Interested in participating in the ECHO initiative? Visit the MAT Resources page on the CT BHP website at <http://www.ctbhp.com/medication-assisted-treatment.html> or contact the Provider Relations Department at 877-552-8247 Options 1,3,7.



OTHER RESOURCES

Connecticut Behavioral Health Partnership (CT BHP)
877-552-8247
Medication-Assisted Treatment
www.ctbhp.com/medication-assisted-treatment.html

HUSKY Healthcare
800-859-9889
www.huskyhealth.com

United Way-211
Dial 211
www.211ct.org

Department of Social Services (DSS)
Programs & Services
www.ct.gov/dss/cwp/view.asp?a=2345&q=490632

Department of Mental Health & Addiction Services (DMHAS)
Medication Assisted Treatment
www.ct.gov/dmhas/cwp/view.asp?q=335224

CT Alcoholics Anonymous
www.ct-aa.org/home/

Advanced Behavioral Health (ABH)
Access Line: 1-800-563-4086
Programs & Services
www.abhct.com/Programs_Services

Connecticut Community for Addiction Recovery (CCAR)
Services & Resources
ccar.us/#services

Substance Abuse and Mental Health Services Administration (SAMHSA)
Medication Assisted Treatment
www.samhsa.gov/medication-assisted-treatment

National Institute on Alcohol Abuse and Alcoholism (NIAA)
Alcohol Treatment Navigator
<https://alcoholtreatment.niaaa.nih.gov/>



MEDICATION-ASSISTED TREATMENT (MAT) FOR ALCOHOL USE DISORDER

Connecticut Behavioral Health Partnership (CT BHP)

Telephone: 877-552-8247

Hearing Impaired TDD/TTY:
866-218-0525 or 711

Website: www.ctbhp.com

MAT Provider Locator Map:
<http://bit.ly/2ctbhpmap>



WHAT IS MEDICATION-ASSISTED TREATMENT (MAT) FOR ALCOHOL USE DISORDER?

MAT is an evidence-based treatment for alcohol and other substance use disorders (SUD) utilizing first-line and second-line medications, based on how effective and well tolerated they are.

First line:

Naltrexone (oral form (previously branded as Revia®) and extended-release injection (Brand name Vivitrol®))

Acamprosate (Previously branded as Campral®)

Second line:

Disulfiram (Brand name Antabuse®)

Topiramate (Brand name Topamax®)

Gabapentin (Brand name Neurontin®)

Naltrexone is a medication that blocks receptors that are part of the addiction pathways in the brain. This decreases the pleasant effects of alcohol and the associated cravings. The extended-release form, Vivitrol®, is an injection that is given by a medical professional into a muscle once every 30 days. The medication slowly releases into the body until the next injection is due.

Acamprosate is a medication that helps to regulate the areas of the brain that become affected in the process of addiction.

Disulfiram is a medication that deters an individual from drinking alcohol as it triggers a severe reaction if alcohol is ingested after the medication has been taken.

Topiramate and **Gabapentin** can be used for other conditions, but have been found to reduce alcohol consumption in those with alcohol use disorder.

MAT SERVICES ARE COVERED UNDER MEDICAID

The medications listed below are for treatment of Alcohol Use Disorder and are covered by Connecticut Medicaid. These medications are available under a generic and/or brand name and the formulations covered can be found on the “preferred” drug list for Connecticut Medicaid. You can see the most up to date version of this list here: https://www.ctdssmap.com/CTPortal/Portals/0/StaticContent/Publications/CT_PDL_medicaid.pdf

Name	Freq	When can treatment be started?	Pharmacy prior auth. needed?
Naltrexone Tablet	Daily	Can start while the patient is still drinking. Opioid-dependent-patients must be opioid-free at the time of initiation to avoid precipitated opioid withdrawal	No
Naltrexone extended-release injectable	Injectable (gradual release) every 30 days	Can start when abstinence is achieved. Patients should not be actively drinking at the time of initiation. Opioid-dependent-patients must be opioid-free at the time of initiation to avoid precipitated opioid withdrawal	No
Acamprosate (Brand name Campral)	Daily	As soon as possible after withdrawal when abstinence is achieved	No
Disulfiram (Brand name Antabuse)	Daily	Can only be started once all alcohol has cleared the body, otherwise a severe reaction may occur	No
Topiramate (Brand name Topamax)	Daily	As clinically indicated, not FDA-approved for this indication but supportive evidence exists	No (not ER, generic only)
Gabapentin (Brand name Neurontin)	Daily	As clinically indicated, not FDA-approved for this indication but supportive evidence exists	No (generic only)

Unless otherwise noted, all the medications listed in the table above are dispensed in tablet form. They can be prescribed by any number of medical providers but are most often prescribed by primary care providers and psychiatrists. Patients are recommended to be free from alcohol use on the start date for all medications listed above and free from opioids (seven to 14 days) for naltrexone. The medications have been shown to be helpful for some people who struggle with alcohol use. They assist individuals with Alcohol Use Disorder to avoid the consumption of alcohol. None of the medications above cause or prolong addiction.