The Addictions Benefit Coordinator (ABC) program: a collaboration between CareOregon and Multnomah County

The Addictions Benefit Coordinator program began in January 2016, and now has four full-time coordinators working to bridge the gaps between high utilizers of detoxification, emergency, or other healthcare services and substance use treatment or other appropriate care. The intent is to connect clients to the care that best fits their needs, while also reducing overreliance on these other services where not appropriate.

As of November 22nd, 2016, there have been 342 clients served.* The coordinators average 13.9 clients per month.

Successful outcomes were defined in three ways:

1) As a warm handoff directly into a detoxification, treatment, or other appropriate facility. The ABC would coordinate the placement and assist the client in getting into the program, even attending initial appointments with them if desired. The majority of these are into formal alcohol/drug treatment, at over 80%--however, some clients are placed into detox or into non-alcohol/drug facilities, such as skilled nursing or connecting with a peer services organization, if that is the best first step for their own journey.

2) As the client accepting a referral to pursue on their own. Some clients do not desire the coordinator's direct intervention, but do want information on who to call and where to go and intend to pursue it themselves.

3) As assistance in transitioning to a better level of care. For example, some clients may already be engaged in outpatient, but need and are struggling to access residential, or another similar transition. ABCs are able to help facilitate these essential transitions, keeping the client in services and helping them get the most appropriate care for their needs.

The closed case success rate for the entire program is currently 74.9%.** This means that approximately three out of every four appropriate referrals who have been contacted by an ABC have had a successful outcome.

Of those successful outcomes, over half have been direct warm handoffs into services, and over 80% of those warm handoffs were into substance use treatment.

Less than 6% of clients contacted have declined services from the ABC; 11.4% lapsed in engagement, meaning that after some amount of initial conversation and working together, the client has stopped all contact with their ABC without notice for at least 30 days.

Of Hispanic and African-American clients working with our two culturally-specific focused coordinators had successful outcomes--above the program average.

ABCs frequently spend their time at specific “hot spots” around town to work with high utilizers; for example, Hooper Detox. The closed case success rate at Hooper is 76%.

Two of the four ABCs were also hired to be culturally-specific care coordinators; one with a focus on the African-American community, one with a focus on the Latino community. Clients who identify as one of these two communities that have worked with these coordinators have experienced an even higher rate of successful outcomes, at 77.9%, showing excellent progress in fighting disparities within the system.

*Some clients may repeat; if a client is closed with a defined outcome and reopened over 30 days later, it counts as a new client episode.

**Closed case rate excludes clients still being actively case managed, who could not ever be reached, or who were already in services by the time of contact and did not need assistance.