



# Utah Rural Opioid Healthcare Consortium (UROHC)

## Project ECHO Incentive Payment Program for Providers

2020 Comagine Health MOUD ECHO Module

### What is UROHC?

The Utah Rural Opioid Healthcare Consortium (UROHC) brings together providers, health care entities, federally qualified health centers, public and behavioral health organizations, and nonprofit organizations to coordinate resources, expertise, and efforts to combat the Opioid Use Disorder (OUD) in Beaver, Carbon, Emery, Garfield, Grand, Iron, Kane, Piute, and Wayne Counties in Utah. UROHC is housed at Southern Utah University; managed by the Utah Center for Rural Health; and is funded through grants from HRSA.

### Comagine Health MOUD Project ECHO Incentive Payment Program:

As part of the UROHC grant, funding has been made available to providers who serve Beaver, Carbon, Emery, Garfield, Grand, Iron, Kane, Piute, and Wayne county residents to participate in Project ECHO training sessions through the Comagine Health. **Eligible providers can receive \$50.00 per hour of Project ECHO's Implementing MAT training attended. Providers are eligible to complete the full series of 6 sessions for a total of \$300.00.**

- Sessions **MUST** be attended **LIVE** to qualify for the incentive payment.

### Who is eligible?

To receive Project ECHO Incentive Payments through UROHC, providers must meet the following criteria:

- 1) Hold the following credentials (with current license): Physician (MD or DO), Dentist (DMD or DDS), Physician Assistants (PA-C), Advance Practice Nurses (NP, MSN, DNP, and APRN), Podiatric Physicians (DPM), Pharmacists (PharmD) Licensed Clinical Social Workers (LCSW), Social Service Worker (SSW), Social Worker (MSW), & Marriage and Family Therapists (MFC).
- 2) They must serve residents from serve Beaver, Carbon, Emery, Garfield, Grand, Iron, Kane, Piute, and/or Wayne County.
- 3) Must be willing to complete associated surveys to aid Comagine Health and UROHC in collecting data on benefits of participation as well as barriers to participation and case presentation.

### How to register:

In order to be eligible to participate, eligible providers must first register with UROHC to participate in the program. Please follow this link to complete the registration and begin participating:

<https://tinyurl.com/UROHCProjectECHOMOUD2020>

### How to receive the Incentive Payment:

Eligible providers who are approved to participate will need to complete the required tracking form provided and submit the form via email to [samanthathompson4@suu.edu](mailto:samanthathompson4@suu.edu) along with a W-9 form prior to deadlines.

Payments will be distributed twice during the Project ECHO Behavioral Health Module. Deadlines to submit and disbursement dates are listed below

- Deadline: December 31, 2020 with disbursement of incentive payment by January 31, 2021

**QUESTIONS:** Please contact Kasey Shakespear at [kaseyshakespear@suu.edu](mailto:kaseyshakespear@suu.edu)



# Medication for Opioid Use Disorder (MOUD) in Outpatient Clinics

Join us for a six-part series to help you develop or augment a medication for opioid use disorder (MOUD) program with special considerations for COVID-19.

This series is designed for clinicians and administrators, who are looking to build OR grow a MOUD program that immediately impacts patient's lives. Building a MOUD program doesn't require advertising or adding new patients – you already have patients in your practice that you can treat today!

Participants will be provided with direction in setting up or growing a MOUD program including guidance on:

- How to discuss MOUD with your staff
- How to accurately identify which patients will benefit and resources for those who need extra assistance
- Policy, procedure, visit templates and billing
- Risk mitigation strategies

## Sessions begin November 4!

All sessions will be held virtually on Wednesdays from 12:30 - 1:30 p.m. MT and will run from Nov. 4 – Dec. 9, 2020

**CE credits available** (1.0 per session hours in *AMA PRA Category 1 Credit(s)™* )

Contact **Rebecca Wilson** with questions or to **sign up for the free series** (advanced registration is preferred)

[RWilson@comagine.org](mailto:RWilson@comagine.org)

Office: 801-892-6616

## Our Subject Matter Experts:



Dr. Paula Cook is currently the Chief Medical Officer for a large non-profit treatment program and primary care clinic targeting people with addiction. She has extensive experience in addiction medicine and

developing Controlled Substance Monitoring Programs for rural communities. She was one of the primary developers of the University of Utah's Bridge program. She is a mentor for the Opioid Response Network program and is the President-elect of the Utah Chapter of ASAM.



Dr. Darlene Petersen is a Family and Addiction Medicine Physician in Roy, Utah and is the Medical Director of Rock Run Family

Medicine. She has previous experience on the NQF Opioid Technical Expert Panel to give her expertise in decisions for quality measures in value-based payment and reporting modules under Medicare. She is also on the Davis Hospital Controlled Substance Committee and is a member of the AAFP Opioid Advisory Committee.

*Comagine Health is accredited by the New Mexico Medical Society to provide continuing medical education for physicians. Comagine Health designates this Recurring Scheduled Series for maximum of 1.0 per session attended AMA PRA Category 1 Credit(s)™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.*

## MOUD ECHO™ Series: Outline and Learning Objectives

### Description:

This ECHO™ series is designed for clinicians, care givers and management to help implement a medication for opioid use disorder program in their clinic or enhance an existing program. Subject matter experts will be discussing the various topics listed below in each session.

Comagine Health Lead: Rebecca Wilson, BS, CPHQ [RWilson@comagine.org](mailto:RWilson@comagine.org)

### Session 1: Introduction – Wednesday, November 4, 2020

Learning Objectives:

- Participants will understand the ECHO model® including logistics
- Participants will understand steps required to launch or enhance MOUD program
- Participants will understand opioid use disorder terminology

### Session 2: Finding the Right Patients for Your Program – Wednesday, November 11, 2020

Learning Objectives:

- How to identify patients appropriate for MOUD for your primary care practice
- What to do with the patients that are, and are not, ready for outpatient treatment

### Session 3: Patient Throughput and Roles – Wednesday, November 18, 2020

Learning Objectives:

- Brief overview of medicines
- Identify the people, processes and documentation involved
- Identify the quality metrics associated with a MOUD program

### Session 4: Risk Mitigation and Patient Communication – Wednesday, November 25, 2020

Learning Objectives:

- Identify common deviations to treatment protocol and corresponding policy response(s)
- Identify policy related communications strategies for use with patients

### Session 5: MOUD Program Development – Wednesday, December 2, 2020

Learning objectives:

- Understand patient costs – common process
- Understand insurance issues
- Considerations for COVID-19

### Session 6: Roundtable Report – Wednesday, December 9, 2020

- Everyone report on where they were, and where they are now – discuss the gap between the ideal state discussed in Session 1 and today





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## Project ECHO Incentive Payment Program for Providers Form

2020 Comagine Health MOUD ECHO Module

<b>Provider's Name:</b>	<b>Credentials:</b>
<b>License Number:</b>	<b>Practice Location:</b>
<b>Organization:</b>	<b>Date of Submission:</b>
<b>Mailing Address:</b>	<b>Phone:</b>

MOUD ECHO Topic Attended	Date Attended

I certify that I have attended the training listed above. *Signature:* \_\_\_\_\_

Please email this completed form and a completed W-9 form to Samantha Thompson at [samanthathompson4@suu.edu](mailto:samanthathompson4@suu.edu).

Payments will be distributed Once during the 2020 Comagine Health Project ECHO MOUD Module. The deadline to submit and disbursement date are listed below:

- Deadline: December 31, 2020 with disbursement of incentive payment by January 31, 2021

# Request for Taxpayer Identification Number and Certification

**Give Form to the  
 requester. Do not  
 send to the IRS.**

<b>Print or type See Specific Instructions on page 2.</b>	<b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	<b>2</b> Business name/disregarded entity name, if different from above	
	<b>3</b> Check appropriate box for federal tax classification; check only <b>one</b> of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <b>Note.</b> For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____	
	<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>	
	<b>5</b> Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	<b>6</b> City, state, and ZIP code	
	<b>7</b> List account number(s) here (optional)	

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

**Note.** If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

<b>Social security number</b>									
-				-					
<b>or</b>									
<b>Employer identification number</b>									
-									

## Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
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## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at [www.irs.gov/fw9](http://www.irs.gov/fw9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.*

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.