

MOMS D CARE

The Moms Do Care (MDC) Project began in August of 2015 as a grant awarded to Massachusetts Department of Public Health’s Bureau of Substance Addiction Services (MDPH/BSAS) by the Federal Substance Abuse and Mental Health Services Administration (SAMHSA) in order to expand access to medication assisted treatment (MAT) for opioid use disorder (OUD). Due to the state’s rising rates of pregnant women with OUD and increasing reports of neonatal abstinence syndrome (NAS), MDPH/BSAS wrote the grant specifically to serve pregnant and post-partum women with OUDs.

The Project began in two health care systems: UMASS Memorial Medical Center in Worcester, and Cape Cod Health Care on the Cape. In 2017 under the Massachusetts Health Policy Commission’s Health Care Innovation Initiative funding, the MDCP expanded to two more health care systems: Lahey-Beverly Hospital and Lowell General Hospital (funded through June 2019).

In 2018, MDPH used a portion of the SAMHSA State Opioid Response grant to replicate and enhance MDC in six more sites: Bay State Franklin Healthcare in Greenfield, Brockton Neighborhood Health Center, Lynn Community Health Care Center, Massachusetts General Hospital, Whittier Street Health Care Center (through September 2020), and a SAMHSA MAT-PDOA grant to fund MDC at Duffy Health Center (through September 2021).

Population served: Women age 18 or older who are pregnant, post-partum and parenting a child 36 months or younger who have a history of opioid use disorder or opioid overdose.

The Moms Do Care Project employs a multipronged implementation approach:

Strategy	Goal	Approach
Client level	<ul style="list-style-type: none"> • Provide access to fully integrated clinical care (seamless continuum of care including MAT, trained obstetrical providers, recovery coaches, pediatric and community providers) • Build client capacities 	<ul style="list-style-type: none"> • Utilize Peer Recovery Moms as care navigators, recovery coaches and case managers • Peer Recovery Moms help build a recovery plan, connect to services, provide trauma-informed recovery groups and parenting skills groups
System level	<ul style="list-style-type: none"> • Increase access to MAT • Decrease stigma 	<ul style="list-style-type: none"> • Regional Buprenorphine waiver trainings and follow up T/TA for providers • Training in Substance Use Disorders and Trauma Informed Care for providers along the care continuum • Increase engagement by providing a model of recovery supports • Build local provider collaboratives
Sustainability	<ul style="list-style-type: none"> • Replicate and enhance MDC • Third party reimbursement for the positions • Ongoing integrated care 	<ul style="list-style-type: none"> • Increase number of implementation sites • Reimbursement specifications for peer recovery coaches/mentors • Build regional, integrated, ongoing provider care collaborative groups