



**Greenwoods Counseling Referrals**  
*White Paper*  
**Proposed Outpatient Treatment Options through Private Providers**  
**for Opioid-Dependent Clients and their Families**  
**March 25, 2016**

Greenwoods Counseling Referrals' network of private practice clinicians, The Greenwoods Association of Private Providers or GAPP, offers a broad range of treatment options for those struggling with mental health and addictive disorders. The creation of GAPP, our multidisciplinary network of clinicians, has enhanced access to behavioral health care using the Greenwoods assessment process as a gateway for individualized and targeted referrals.<sup>1</sup> This matching strategy ensures better compliance with treatment recommendations as both client and provider needs and strengths are identified and coordinated.

Greenwoods is prepared to offer services that will complement the work already taking place in the county including the needs assessment and planning of the Opiate Task Force and the United Coalition of Northwest CT. The focus for this proposal is to expand access to care through GAPP members and Greenwoods Specialty Affiliates, although referrals and services from other entities, both public and private will be included.

Regarding the needs of opiate-dependent clients and their friends and family, Greenwood initiated a survey of our GAPP providers to determine services currently being provided and to inquire about their suggestions to improve or enhance those services. We have 14 private practice clinicians who are treating opiate addicted clients in Torrington, Litchfield, Bantam, Washington, Winsted, and Woodbury. Many of them have wait lists currently due to the demand for services. All of them accept insurance and offer sliding scales. Greenwoods helps subsidize this treatment, in many cases. We currently have no addiction treatment services in the farthest northwest towns of Canaan, Sharon, Salisbury, Cornwall and Kent – despite the prevalence of the problem in that area.

**The Greenwoods survey revealed the following unmet needs:**

1. The dire necessity for additional clinicians to treat opiate addicted clients and other medical professionals who can provide medication-assisted treatment including Suboxone, Vivitrol, and Methadone. We also need to encourage providers of these services to accept insurance, especially Medicaid and Medicare and/or to have sliding scales.

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<sup>1</sup> GAPP is a multidisciplinary membership association of private practice mental health professionals. Membership entitles GAPP clinicians to referrals, client subsidies, free clinical training with continuing education credits, mentoring, Speakers Bureau and more. Specialty Affiliates are clinicians who are not GAPP members but who are credentialed by Greenwoods and receive referrals only.

2. The need for treatment on demand for low-income clients for both detox and rehab services.
3. Address barriers to care such health insurance with high copays and deductibles, which are the only plans most low-income clients can afford. These clients often transition from Medicaid to self-purchased plans when they become employed (a sign of their recovery) and then cannot continue treatment and their ongoing recovery because they cannot afford the cost.
4. Need for an online local discussion list for the Northwest Corner that both public and private providers can use to post announcements, new practices, groups being formed, openings for care etc.
5. The need to address underlying trauma once clients are stabilized to prevent or reduce relapse. This could incorporate the use of evidenced-based group therapies that address trauma and addiction such as “Seeking Safety”, TREM (*Trauma Recovery & Empowerment Model*) and TARGET (*Trauma Affect Regulation: A Guide for Education & Therapy*). These services could be posted on the list-serve mentioned above. We also need to encourage providers of these services to accept insurance, especially Medicaid and Medicare and/or to offer sliding scales.
6. Involve persons in recovery in any discussions or forums and invite groups like Faces and Voices of Recovery to participate.
7. Offer clinical services for families and friends of opiate addicted persons to assist them to be productive recovery supports and to help them better understand the addicted person as well as their own self-care needs.
8. Focus on the under-served rural communities of the northwest corner to build capacity.

**What Greenwoods could offer: (With additional resources.)**

1. We would be willing to actively recruit additional clinicians and medical professionals who are willing to prescribe medications for opiate addiction to join GAPP (membership dues and access to subsidy program) or to be Specialty Affiliates (referrals only). The advantage to this approach is that every provider is screened and credentialed by Greenwoods to ensure the highest quality of care. As Greenwoods affiliated providers, we would be able to coordinate both clinical psychotherapeutic care with medication-assisted treatment. The highest standard of care would be to use this project to develop “health homes” so that clients can get all of their care in one place, including placing clinicians in these offices to provide ongoing therapy. Greenwoods is also willing to recruit primary care providers to participate.
2. To address the issues of high copays and deductibles, with additional resources for our subsidy program we can pay up to \$40 per session for 15 weeks of treatment. This funding would be reserved for opiate-involved clients and their families, who are seen by GAPP members or

Greenwoods Specialty Affiliates. (With additional funds, we can extend the subsidies for additional 10-week sessions.)

3. Greenwoods could host an online discussion and list serve to keep all of our providers and community partners aware of the most current treatment openings.
4. Greenwoods has funded the training of 22 clinicians in EMDR – an evidence-based trauma treatment program through a grant from the Community Foundation of Northwest CT. With additional funding, we could also host training for other trauma treatment protocols as mentioned above in #5.
5. Greenwoods would invite groups of persons in recovery to participate and develop additional training and support resources for affected clients and their families.
6. We would convene a group of interested clinicians, public and private to pursue all of the above strategies in order to kick off any or all of these projects and then keep this group active over time to ensure continuity of care.

Greenwoods is uniquely positioned to be a hub for care coordination services and a convener for providers. As a gateway to mental healthcare for over 20 years, Greenwoods is well known and respected in the Litchfield County towns it serves. Beginning with a request for services, our clinicians assess clients and match them to a professional best suited to meet their needs. Most of our referrals come from physicians and because of this, we could further these relationships to address the need for co-located care. Our history of recruitment and retention of providers allows us to expand our presence into underserved areas in the northwest corner. However, we would need additional funding for all of these proposed initiatives.

While these projects are being discussed and considered, Greenwoods intends to organize a summit of our current addiction treatment providers as well as any others currently working in Litchfield County. This meeting will focus only on private practice outpatient services, both medical and behavioral health. This will allow us to narrow in on a group of providers whose strength and needs are often missed in larger group meetings that include a broad range of service delivery systems. The purpose is to discuss the survey findings and to develop an action plan, including identifying potential funding.