

**WAUKESHA COUNTY  
AODA ADVISORY COMMITTEE  
TUESDAY, MAY 17, 2016  
MINUTES**

**PRESENT:** John Kettler, Mary Goggins, Dennis Williams, Patrick Reilly, Marla Bell, Rachael Cooper, Rebecca Scott, Kevin Schaefer, Deb Adamus, Pat Miller, Rose Barton, Joan Sternweis, Pat Russell, Jeff Lewis, Brenda Cooper, Lindsay Just,

**Excused Absence:** Laurie McHugh-Badura, Kelly Morgan, Lou Hernandez

**Guest:** Kerri Ackerman, Dr. Michael Miller, Peter Brenzel

**INTERESTED PARTIES:**

The meeting was called to order at 10:32 a.m. by Chair Barton. Introductions amongst the group were exchanged.

**REPORT ON SIXTEENTH STREET CLINIC AODA SERVICES OFFERED AND NEW GRANT PROGRAM:** Kerri Ackerman manages the Waukesha 16<sup>th</sup> Street Community Health Center and the Behavioral Health Division in Milwaukee. Ackerman provided some background information on the Community Health Center. The center is patient board and joint commission certified, a federally qualified health center that accepts patients with Medicare and Medicaid, and meets all of the expectations and standards outlined by the federal government. Medical and behavioral health, alcohol and other drug abuse, as well as OB services are provided for a fully integrated program model based on the needs of the community. Uninsured individuals are placed on a sliding fee schedule based on their income.

Over the last couple of years, the Community Health Center partnered with Waukesha County on a three way AODA grant. The most recent grant received is the HERSA grant. The HERSA grant is specifically for 1) Medicaid assisted treatment, 2) collaboration between behavioral health, AODA, and medical so the individual is not seeing one or the other in any aspect, and 3) medicated assisted treatment therapy and medication. Two medical providers currently prescribing Vivitrol will be used to bring together this whole integrated theory for the Community Health Center. Requirements of individuals in the program receiving Vivitrol will have to see a therapist, maintain group sessions, and maintain therapy to be conducted at their site.

Referred individuals for the medicated assisted treatment aspect of the program will go through an intake process with a registered nurse and standard lab draws and urine drug screens. Once completed, the individual returns within two days to meet with the medical provider. The medical provider will do complete physical, history, request records, EKG, etc., to make sure individual is a good candidate to receive the medication. This part of the program will begin in June 2016.

Ackermann shared an invitation for the upcoming open house of the Community Health Center on June 1, 2016, 7:30-9:00 a.m. RSVP by Thursday, May 26. A question and answer period followed.

**REPORT ON MEDICATIONS CURRENTLY USED AND TREATMENT LENGTH OF STAYS:** Dr. Michael Miller with Rogers Memorial Hospital in Oconomowoc discussed medicated assisted treatment for alcohol and opioids. Dr. Miller is on the speaker's bureau for Vivitrol, speaker's bureau and national physician advisory board for Bunavail, and on the physician advisory board for ProBuphine. Additionally, Dr. Miller is sought out to do talks and brought in by pharmaceutical companies to give advice as an experienced clinician

Nicotine replacement therapy is an important component for an individual's inpatient stay. Various nicotine therapies include chewing gum, nasal spray, or medications like Chantex, Wellbutrin, or Ziban which came about in the 1990's. There is controversy and psychiatric side affects to medications. More often, more people die from major depression, opioids, and heroin overdose. Tobacco is still the largest killer and alcohol is second. Medications for alcohol treatment were mentioned and the most controversial medications are used and accepted to date.

Dr. Miller spoke about three Federal Drug Administration (FDA) approved medicines. Naltrexone is an oral form of medication for opioid dependency, and Vivitrol is a monthly injectable formula that is widely used. Methadone is still around for alcohol dependency in various forms. Buprenorphine came to America and appeared in retail pharmacies in spring of 2003. In France, they experienced buprenorphine to be divertable. Diversion over the last 13 years has become a big deal. Because of other formulations on the market people should use and talk about the generic name buprenorphine. At first there was a generic called buprenorphine hydrochloride, a mono product that did not have naloxone in it. Suboxone clinics should speak about buprenorphine. The 2<sup>nd</sup> FDA approved formulation of buprenorphine was Zubsolv, a tablet form. The newest approved medication is Bunavail which is a whole different product. Bunavail you don't put under your tongue, you put on the side of your cheek. Bunavail is expected to be approved and released within the next 30 days. ProBuphine is an implant placed under the skin of the upper arm.

Dr. Miller went thru the different buprenorphine products and discussed the naltrexone oral products. Methadone in Waukesha County has always been private. Milwaukee County enforced two methadone clinics for the County and Veterans Administration Center. Since that time Milwaukee County is no longer in the methadone business. Methadone is tried and true since the early 1970's. Dr. Miller shared his experience on best practices for rapid withdrawal or rapid detox with buprenorphine, which is very science based. There are various buprenorphine products you can expect to come on the market and Dr. Miller indicated he would be happy to come back and discuss differences between the products.

### **HHS BOARD LIAISON REPORT**

No Report.

### **HHS STAFF LIAISON REPORT**

Kettler reported the Health and Human Services Outpatient Clinic Adolescent IOP program will be reopening in four weeks. Drug Free Communities is celebrating prevention week with events each day; check their website for further details. Another physician was hired at ProHealth Care geared specifically for medication assisted therapy and to expand treatment services.

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**AGENCY/MEMBER UPDATES**

The Greenfield Police Department will be presenting in the month of June on the COPS Assisting Addiction Recovery Program.

**ADJOURNMENT**

Schaefer made a motion, second by Reilly to adjourn the meeting at 11:47 a.m.

Respectfully Submitted  
Linda Johnson, Recorder

Approved on 7-19-16