

# Northeast

## Physician Hospital Organization

500 Cummings Center • Suite 6500 • Beverly, MA 01915  
(P) 978-236-1744 • (F) 978-236-1777 • [www.nepho.org](http://www.nepho.org)

# NEWS

INFORMATION LINE

**978-236-1732**

CALL FOR UPDATED  
MEETING CANCELLATIONS  
AND OFFICE CLOSURES

OPTUM Newsletter:

October Focus—Breast Cancer (*see page 7 of this newsletter*)

Oct 2017

## PHYSICIAN AND PRACTICE CHANGES/UPDATES

### New Physicians

- **Dr. Ashley Mastrangelo**, a Podiatrist, has joined **Coastal Orthopedic Associates** at 77 Herrick Street, Suite 201, Beverly, MA 01915 (P) [978-927-3040](tel:978-927-3040) (F) 978-927-0443.
- **Dr. Kyle Lacy** has joined **Coastal Orthopedic Associates** at 77 Herrick Street, Suite 201, Beverly, MA 01915 (P) [978-927-3040](tel:978-927-3040) (F) 978-927-0443.

### Practice Changes

- The practice name for **Drs. Jagruti Patel and Mahesh Patel** has changed from KayaKalp Aesthetics to **Premier Plastic Surgery of New England**; their location at 77 Herrick St, Suite 105, Beverly, MA 01915 and their phone [978-927-6556](tel:978-927-6556) and fax 978-927-9467 remain the same, although the website address has changed to [www.ppsfne.com](http://www.ppsfne.com); they are celebrating the name change and office remodeling with an Open House on November 3, 2017 (*see page 8 of this newsletter for more details*).
- **Dr. Sydney Wedmore**, a PCP in Rockport, MA, announced his retirement effective October 25, 2017.
- Effective October 23, 2017, **Dr. Holly Mason** has joined **Northeast Dermatology Associates** at 5 Paradise Road, Salem, MA 01970 (P) [978-691-5690](tel:978-691-5690) and (F) 978-691-5693.

## SAVE THE DATE

### MD Orientation

**Date:** Monday, November 13, 2017 @5:30 P.M.

**Place:** 500 Cummings Center, Suite 6500  
Good Harbor Conference Room  
Beverly, MA 01915

**RSVP:** Alycia Messelaar (P) [978-236-1784](tel:978-236-1784) or  
via e-mail at [Alycia.Messelaar@Lahey.org](mailto:Alycia.Messelaar@Lahey.org)

### NP/PA Meeting

**Date:** Tuesday, November 14, 2017 @12:00 P.M.

**Place:** Addison Gilbert Hospital  
Women's Health Conference Room  
Gloucester, MA 01930 (*lunch provided*)

**RSVP:** Judy O'Leary (P) [978-236-1739](tel:978-236-1739) or  
via e-mail at [Judith.O'Leary@Lahey.org](mailto:Judith.O'Leary@Lahey.org)

## RECOGNITION—PHIL CORMIER



### Distinguished Leader

On November 15, 2017, the North Shore Chamber of Commerce will be holding their 7th Annual Dinner Meeting where they will be presenting the **2017 North Shore Distinguished Leadership Awards**. We are proud to announce that Phil Cormier, President of Beverly and Addison Gilbert Hospitals, is one of this year's recipients. Please join us in congratulating Phil on this honor (*see page 8 of this newsletter for more details*).

## NEW LOGO

# Northeast

## Physician Hospital Organization

### New Logo

Did you notice our logo has changed? It has a new, fresh look with a font style that mirrors the Lahey branding and with colors in the NEPHO tradition.

## NEW WEBSITE—COMING IN NOVEMBER

### Upgraded Website

It's about time—for a new and improved NEPHO website—that is! NEPHO will be launching its updated website next month with a new look and enhanced features such as:

- Compatibility with all device types, including mobile phones and tablets
- Public access to more information without logging in, including the Provider Search functionality
- Pictures and special interests are now included in the Provider Search
- A Meeting Calendar with the ability to
  - filter by meeting type
  - click on hyperlinks to RSVP
  - upload meetings to your personal calendar
- A Fee Schedule search function that now allows filtering by office-based vs. facility-based fees
- A section dedicated to New Providers
- Monthly Provider Spotlight
- A list of Hot Topics
- And so much more!

Many thanks to everyone who provided input and helped in the website redesign. Our goal has been to create a web tool that is more visually-appealing, user-friendly and tech-savvy. Please help us keep the site current by providing ideas for Hot Topics and letting us know of special clinical interests and demographic changes. We will send out a notification when the new site launches — let us know what you think.

## LAHEY RESOURCES

### New Resources

The Lahey Health System has added two new resources to assist with management of our patients:

- **Stress Management Training for patients.** Unmanaged stress, from whatever cause can affect our patients both physically and mentally. This program is free to patients with a Lahey Health Primary Care provider and consist of eight weekly sessions. In our area it is offered on Fridays at LOCD ([see page 9 of this newsletter](#)).
- **Opiate Addiction Treatment Program** both in Danvers and Gloucester. These outpatient treatment programs consist of medication-assisted treatment and counseling. They will also provide direct access to additional levels of care for opiate addiction offered at Lahey Health ([see page 11 of this newsletter](#)).

## NEPHO POD MEETING SUMMARY—OCTOBER 2017

### **Urgent Care**

Terry Giove, Executive Director of Lahey Urgent Care, attended several POD meetings this month to provide an update on the timeline for Urgent Care clinic openings in Danvers and Gloucester and to answer questions. The hope is that the sites will open early winter of the new year.

### **Out-of-PHO Data**

Dr. Di Lillo reviewed 1st Quarter 2017 out-of-PHO (OOPHO) referral data. Reasons to keep care in PHO include: improved quality of patient care due to better communication, ease of coordination and cost effectiveness compared to having care provided downtown.

- Compared to same period last year, there is a 3% improvement in the OOPHO rate overall (20% down from 23%).
- When Lahey, Winchester, and HVMA are excluded, the OOPHO rate drops to just below 11%.
- Looking at the Top OOPHO locations, the preferred tertiary is Lahey (36%) (a trend which began mid-year 2016 and continues) followed by Boston Children's Hospital (17%), MGH (16%), and Atrius (10%).
- The top OOPHO specialties and out of network specialties by number and percentage were reviewed and discussed for opportunities.

### **Provider Burnout**

Liz Isaac reviewed the motivation, methods, and results of the 2017 Provider Burnout survey. This year the survey was expanded to include NPs and PAs.

- We continue to observe a moderate amount of burnout, with the higher burnout rates in employed (versus private practice) and Family Practice specialty (compared to Internal Medicine and Pediatric colleagues), which is consistent with the previous survey conducted in winter 2016.
- The presentation included a review of available local and web resources for clinicians to access.
- Individualized reports will be mailed to clinicians who provided their names on the survey.

### **Clinical Inertia**

Alison Gustafson reviewed clinical inertia related to hypertension. She reviewed tips to remember when obtaining readings and presented an algorithm based on the latest Joint National Committee hypertension guidelines (JNC 8).

### **Quality Scorecards**

Quality scorecards and patient lists were distributed. The strategy of focusing on 2-3 patients with upcoming visits was discussed, and a projection of what individual scores would be if those patients came into compliance was individualized to each provider.

### **PCP Report Cards**

PCP report cards reporting through 2<sup>nd</sup> Quarter 2017 were distributed.

### **Medication Reminder Apps**

Liz Isaac reviewed a letter being sent on behalf of providers to diabetes patients on statins that includes directions on how to upload medication reminder apps to smart phones.

## QUALITY UPDATES

### PHO Quality Pep Talk

We are counting down the weeks until the end of the 2017 Quality Measurement Period. Here are a few items to focus on in these final weeks:

- **Well Child Visits** – Schedule those physicals and try to reschedule any cancellations or no-shows before the end of December.
- **Hypertension** – Schedule appointments for any patient with a blood pressure 140/90 and above. Consider medication changes if warranted. Don't forget to take a repeat blood pressure if the first is above target (**target BP = 139/89 or less**).
- **Diabetes** – Order **HbA1cs** and **urine micro albumin tests** for all patients on your list who have not yet had one. Consider medication adjustments for any patient with an **HbA1c above 9**.
- **Colorectal Cancer Screening** – Urge your patients in this measure to complete a **FIT/Cologuard** test before the end of the year. Please track any **FIT/Cologuard** tests you distribute to patients to ensure they have been completed. Follow up with patients regarding **FIT/Cologuard** tests that are still outstanding, and work on scheduling their colonoscopy for 2018.
- Your most recent patient lists have **"high impact"** patients circled along with the tests they need performed. Focus on scheduling these patients for appointments and/or labs before the end of the year.

We are seeing improvement in all of these measures. The overall PHO Gate Score is steadily climbing. Continue to focus on the to-do list above, and let us know how we at the PHO can help you help your patients get the care they need. Keep up the good work!

## PAYOR UPDATES

### HPHC —2018 Tier Reclassification

Effective January 1, 2018, Harvard Pilgrim Health Care (HPHC) has re-tiered its ChoiceNet and Hospital Prefer HMO and PPO products. Please note that tier assignments for physicians apply only to ChoiceNet products as physician group practices are not tiered in the Hospital Prefer products. The 2018 tier assignments for the Lahey Clinical Performance Network (LCPN) units are noted to the right.

Tier assignments are based on quality and cost performance, as measured by health status adjusted total medical expenses and relative prices.

To develop the quality score used to determine tier placement, HPHC utilized measures endorsed in the Standard Quality Measurement Set (SQMS), introduced by the Massachusetts Statewide Quality Advisory Committee to provide a standardized quality measurement system. If applicable quality measures were unavailable, tiers were based solely on health status adjusted total medical expenses or relative prices, or both.

Hospitals	2018 Tier	2016-2017 Tier
Lahey Clinic Hospital	2	2
Northeast Hospital Corporation	1	1
Winchester Hospital	1	1
Physicians	2018 Tier	2016-2017 Tier
Lahey Clinic	2	2
Northeast Physician Hospital Organization	1	2
Winchester Physicians	2	2

cont.

## **PAYOR UPDATES, cont.**

### **NEPHO Payor Contracts—2018 Discontinued Contracts**

- As of January 1, 2019, CeliCare will no longer be offering its Ambetter Connector product.
- NEPHO did not renew its contract with Commonwealth Care Alliance (CCA) for the Senior Care Options (SCO) product for PCPs; our current contract expires on December 31, 2017. The hospital and specialists CCA SCO contracts will continue.

### **MassHealth**

Did you know that out of 1.8 million MassHealth members, around 1.3 million are currently served by one of four managed care programs:

1. MassHealth MCO (Managed Care Organization) program
2. Primary Care Clinician (PCC) Plan
3. OneCare program (for those under 65 years of age and dually-eligible for both Medicaid and Medicare)
4. Senior Care Option (SCO) program (for those 65 years of age or older and dually-eligible)?

### **MassHealth—Reprocurement**

At the end of 2016, the Massachusetts Executive Office of Health and Human Services (EOHHS) issued a request for responses (RFR) for Medicaid MCOs to serve MassHealth patients; this review process is referred to as “re-contracting” or “reprocurement”.

- The State evaluated bids from 6 MCOs for a 5-year contract (2018-2022).
- 2 MCOs were selected to sell MassHealth products throughout the State:
  - Tufts Health Public Plans (THPP) and
  - Boston Medical Center (BMC) HealthNet.
- Selection was based on the MCO's:
  - Statewide presence and
  - Responses to the bid, which included the MCO's plans to improve quality and lower costs.
- The following plans were not selected:
  - Neighborhood Health Plan, Fallon Health Plan, Health New England and CeliCare.

### **LCPN / MassHealth ACO**

As you are aware, Lahey Clinical Performance Network (LCPN) applied for and was awarded a contract with the State to become a MassHealth ACO.

- As a Model C program, LCPN will partner with one or more MCOs to manage the MassHealth patients enrolled in the ACO.
  - LCPN's original partner choice, Fallon, was not reprocured by the State to sell MassHealth products, so LCPN is actively seeking another partner.
- All Lahey Clinic PCPs and 11 NEPHO PCPs will participate.
- The MassHealth ACO operational start date is March 1, 2018.

## **PATIENT EXPERIENCE COMMENT REPORTS—OCTOBER 2017**

### **LAHEY HEALTH PRIMARY CARE, GLOUCESTER**

- Dr. Karen Damico and staff are caring, welcoming, efficient and have a “human touch”.

### **BEACON FAMILY MEDICINE**

- I appreciate Dr. Curtis Ersings’ scope of knowledge, services and referrals. He gives very complete and balanced explanations to my questions.
- Dr. Erin Heiskell is the best!! And all in the practice are wonderful.

### **BRIAN ORR PEDIATRICS**

- Always a pleasure my children love Dr. Brian Orr is wonderful.

### **CAPE ANN MEDICAL CENTER**

- Dr. James Maguire is the best, he listens to me. It's a nice feeling to know that your doctor cares and I feel very confident in him.
- I was treated on time and with dignity & respect.

### **DANVERS FAMILY DOCTORS**

- Dr. Subroto Bhattacharya is the VERY BEST doctor.

### **FAMILY MEDICINE ASSOCIATES – MANCHESTER**

- I’m 78 and have been to a lot of doctors. Dr. Harlow LaBarge is the best I have ever experienced. You never wait long and you know what they have going for them . . . they care. You don’t find that often. They’re the best!

### **LAHEY PRIMARY CARE, DANVERS (480 Maple Street, Suite 204)**

- Dr. Manju Sheth has always been available when I need her, an excellent provider and respects my needs.

### **NORTH SHORE PEDIATRICS**

- Dr. Maureen Mathews is an excellent physician. Always takes the time to listen to my children & to me. Appreciate all the care she goes there! She is an amazing physician. I was recommended her to anyone with children.
- Dr. Thomas Seaman has been extremely great to work with. We look forward to many more years at the practice with him as our family provider.
- We love Dr. Shannon Dufresne! She has always provided us with excellent care.
- Dr. David Danis is consistently thorough, caring and has a wealth of health-care knowledge. His discussion with kids in his office is THE BEST!
- I love Dr. Lance Goodman! He is so patient with my daughter who does not take well to strangers.

### **NORTH SHORE PRIMARY CARE**

- Dr. Deborah Zucker is first rate and takes the time to listen to you. She really cares about her patients. I have never has a bad experience with her.

### **THOMAS PEARCE, MD**

- Dr. Thomas Pearce is professional and caring – always knowledgeable about my health status.



# Insider

Educational and coding information for providers

## Focus on: Breast Cancer

### Facts about breast cancer

More women are diagnosed with breast cancer than any other cancer (excluding skin cancer); one in eight women will develop breast cancer over a lifetime. Breast cancer is the second most common cause of death from cancer in the United States following lung cancer. Since 1989, thanks to early detection and improved treatments, the number of women who die from breast cancer has steadily declined. Currently in the United States there are approximately three million women living with breast cancer. Although rare, men are also at risk accounting for less than 1% of all breast cancers.<sup>1</sup> The risk of developing breast cancer increases as a woman ages, with most cancers developing in women older than 50. Mammography is an excellent screening tool for breast cancer.<sup>2</sup> Screening mammography is a Five-Star Quality measure from the Centers for Medicare & Medicaid Services (CMS) and also a Healthcare Effectiveness Data and Information Set (HEDIS) quality measure.<sup>3</sup>

### Current cancer vs. History of cancer

To correctly report a diagnosis of cancer, determine whether the patient's cancer has been eradicated or is currently being treated. The neoplasm table in the ICD-10-CM code book establishes three categories of malignancy: primary, secondary and in situ. Malignant neoplasms should be coded as categorized; unknown sites (primary or secondary) must also be coded. Patients with cancer who are receiving active treatment for the condition should be reported with the malignant neoplasm code corresponding to the affected site. This applies even when a patient has had cancer surgery, but is still receiving active treatment for the disease. Patients with a history of cancer, with no evidence of current cancer, and not currently under treatment for cancer should be reported as "Personal history of malignant neoplasm." These Z85 codes require additional characters to identify the site of the cancer and should be reported only when there is no evidence of current cancer. If a patient's presenting problem, signs, or symptoms may be related to the cancer history or if the cancer history impacts the plan of care, then report the appropriate Z code and not the code for the active cancer.

### Always remember ...

- Patients taking antineoplastic medications (for example, Tamoxifen, Femara) for breast cancer are coded to an active malignant neoplasm as long they are taking the medications.<sup>4</sup>
- Use additional code to identify estrogen receptor status (Z17.0, Z17.1), and for Long term (current) use of anti-neoplastic medications (Z79.810, Z79.818).

### Documentation and coding tips

Documentation should include the specific site of tumor and laterality (e.g., right, left, bilateral).

#### C50 Malignant neoplasm of breast<sup>5</sup>

- 4th character identifies *site*: nipple/areola (0); quadrants (2-5); overlapping boundaries (8); unspecified (9)
- 5th character identifies *sex*: female (1); male (2)
- 6th character identifies *laterality*: right side (1); left side (2); unspecified (9)

#### Example of coding *female* breast cancer

**C50.411** Malignant neoplasm of RUOQ of female breast

**C50.919** Malignant neoplasm of unspecified site of unspecified female breast

#### Example of coding *male* breast cancer

**C50.029** Malignant neoplasm of nipple/areola, unspecified male breast

**C50.829** Malignant neoplasm of overlapping sites of unspecified male breast

#### History of breast cancer

**Z80.3** Family history of malignant neoplasm of breast

**Z85.3** Personal history of malignant neoplasm of breast

#### Breast cancer screening

**Z12.31** Encounter for screening mammogram for malignant neoplasm of breast

**Coding example:** A 68-year-old female seeing hematology-oncology for Stage IIA, ER+ breast cancer, RUOQ, previously removed by ultrasound-guided biopsy. Radiation therapy completed, currently on Femara

**C50.411** Malignant neoplasm of upper-outer quadrant of right female breast

**Z17.0** Estrogen receptor positive status [ER+]

**Z79.818** Long term (current) use of other agents affecting estrogen receptors and estrogen levels

Per the ICD-10-CM Official Guidelines for Coding and Reporting FY 2018: "A dash (-) at the end of an Alphabetic Index entry indicates that additional characters are required. Even if a dash is not included at the Alphabetic Index entry, it is necessary to refer to the Tabular List to verify that no 7th character is required." The bolding of ICD-10-CM codes represents categories, subcategories or codes that map to the 2017 CMS-HCC risk adjustment model for Payment Year 2018.

- Please refer to ICD-10-CM Mappings for all codes that map to risk in this model: <https://www.cms.gov/Medicare/Health-Plans/MedicareAdvtgSpecRateStats/Risk-Adjustors.html>
- Please refer to the 2018 Announcement which applies to 2017 dates of service: <https://www.cms.gov/Medicare/Health-Plans/MedicareAdvtgSpecRateStats/Downloads/Announcement2018.pdf>
- Please refer to 2017 Announcement for condition risk scores, disease interactions and hierarchy (pp 78-87), which apply to 2017 dates of service: <https://www.cms.gov/Medicare/Health-Plans/MedicareAdvtgSpecRateStats/Announcements-and-Documents.html>

This guidance is to be used for easy reference; however, the ICD-10-CM code book and the Official Guidelines for Coding and Reporting are the authoritative references for accurate and complete coding. The information presented herein is for general informational purposes only. Neither Optum nor its affiliates warrant or represent that the information contained herein is complete, accurate or free from defects. Specific documentation is reflective of the "thought process" of the provider when treating patients. All conditions affecting the care, treatment or management of the patient should be documented with their status and treatment, and coded to the highest level of specificity. Enhanced precision and accuracy in the codes selected is the ultimate goal. Lastly, on April 3, 2017, the Centers for Medicare & Medicaid Services (CMS) announced that 2017 dates of service for the 2018 payment year model is based on 100% of the 2017 CMS-HCC model mappings released April 4, 2016, which include additional code updates in the 2017 Midyear Final ICD-10 Mappings released December 30, 2016. For more information see: <https://www.cms.gov/Medicare/Health-Plans/MedicareAdvtgSpecRateStats/Downloads/Announcement2018.pdf>, <https://www.cms.gov/Medicare/Health-Plans/MedicareAdvtgSpecRateStats/Risk-Adjustors-Items/Risk2017.html?DLPage=1&DLEntries=10&DLSort=0&DLSortDir=descending>. Optum™ and its respective marks are trademarks of Optum, Inc. This document is proprietary and confidential; altering, rebranding, public posting, digital downloading is not permitted without the express consent of Optum. All other brand or product names may be registered marks of their respective owners. Because we are continuously improving our products and services, Optum reserves the right to change specifications without prior notice. Optum is an equal opportunity employer. ©2017 Optum, Inc. All rights reserved.

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For additional information as well as publications and products available for HEDIS®, please visit the National Committee for Quality Assurance (NCQA) website at [ncqa.org](http://ncqa.org).

For additional information about the Medicare Advantage Five-Star Quality Rating System, please refer to: <http://go.cms.gov/partcandstarratings>

Optum360 ICD-10-CM: Professional for Physicians 2018. Salt Lake City: 2017.

1. American Cancer Society's publication. Cancer Facts & Figures 2017 and the National Cancer Institute Surveillance Epidemiology and End Results (SEER) database.

2. Mandelblatt JS, Cronin KA, Bailey S, et al. Effects of mammography screening under different screening schedules: model estimates of potential benefits and harms. *Annals of Internal Medicine* 2009;151(10):738-747

3. "Medicare Claims Processing Manual: Chapter 18 - Preventive and Screening Services." Centers for Medicare & Medicaid Services (CMS). N.p., n.d. Web. 3 Sept. 2014. <<http://www.cms.gov/Regulations-and-Guidance/Manuals/downloads/cim104c18.pdf>>.

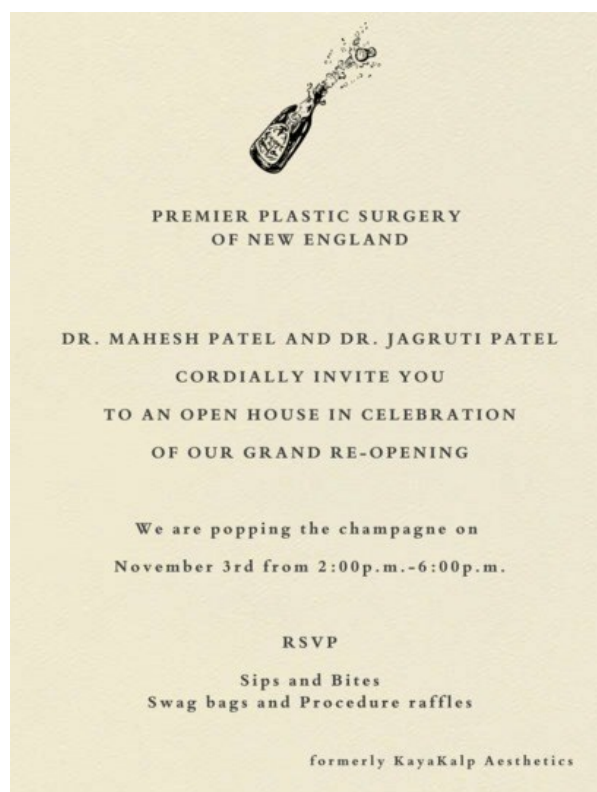
4. AHA Coding Clinic, 4th Quarter 2008, pg 156

5. The Centers for Medicare & Medicaid Services (CMS) and the National Center for Health Statistics (NCHS). "ICD-10-CM Official Guidelines for Coding and Reporting." Department of Health and Human Services. DHHS. 2017. September. Web. 6 September 2018 <https://www.cms.gov/Medicare/Coding/ICD10/Downloads/2018-ICD-10-CM-Coding-Guidelines.pdf>.

**Dr. Mahesh Patel** and **Dr. Jagruti Patel** are now practicing under their new name **Premier Plastic Surgery of New England** (formerly KayaKalp Aesthetics). They are in their newly renovated offices at 75 Herrick Street, Parkhurst Building, Suite 105, Beverly, MA 01915 (P) [978-927-6556](tel:978-927-6556) (F) [774-348-4930](tel:774-348-4930).

For more information click on the website link [www.ppofne.com](http://www.ppofne.com) or e-mail the office directly at [info@ppsofne.com](mailto:info@ppsofne.com)

*Come join the celebration at the  
Open House  
November 3rd. from 2:00-6:00 p.m.*



*North Shore Chamber of Commerce*

# *Annual* **DINNER**

WEDNESDAY • NOVEMBER 15, 2017 at Danversport Yacht Club • 5:00-8:00PM  
7TH ANNUAL NORTH SHORE DISTINGUISHED LEADERSHIP AWARDS

**North Shore Chamber of Commerce**  
**2017 Annual Dinner Meeting**  
***“The Region’s Business Event of the Year!”***

Phillip Cormier, President & CEO, Beverly and Addison Gilbert Hospitals, will be one of the honorees at the 2017 Annual Dinner Meeting of the North Shore Chamber of Commerce on the evening of November 15<sup>th</sup> at the Danversport Yacht Club. To reserve tickets or a table, please contact the Chamber at 978-774-8565 or click [here](#)



# Compassionate & Comprehensive

[Home](#) **Stress Management**

## Stress Management Training



### Manage your stress for a happier, healthier life.

Whether balancing the demands of daily living, job pressures, or living with health problems— we all have stressors in our life. Left unmanaged, they can start affecting us physically and emotionally; often leaving us with headaches, insomnia and feeling anxious and overwhelmed. Stress can also affect job performance as well as relationships. Experts agree that Stress-related problems may be among the most serious challenges to our health.

Join us for eight consecutive, weekly, 90-minute sessions. Learn practical Mindfulness techniques to improve your ability to handle stressful situations.

**To view the week-by-week course outline [click here](#).**

By the end of the program, participants will:

- Identify the stressors in their lives

- Develop a range of positive coping skills, including relaxation techniques to reduce stress

- Understand how mindfulness can increase our overall mental and physical health

#### **Fall Session Offerings:**

Mondays

Oct 30 – Dec 18 • 1 – 2:30 p.m.

The Center for Healthy Living  
200 Unicorn Park Drive, Woburn, MA

#### Tuesdays

Oct 31 – Dec 19 • 5:30 – 7 p.m.

Kariotis Conference

Lahey Hospital & Medical Center

41 Mall Road, Burlington, MA

#### Fridays

Nov 3 – Dec 22 • 8 – 9:30 a.m.

Lahey Outpatient Center, Danvers

480 Maple St, Danvers, MA

#### Fridays

Nov 3 – Dec 22 • 1 – 2:30 p.m.

The Center for Healthy Living

200 Unicorn Park Drive, Woburn, MA

**Offering on-going classes, for other fall offerings as well as spring classes, please [click here](#).**

## Details

Training programs are being offered FREE to anyone with a Lahey Health Primary Care Provider. Find a doctor.

Morning and Evening Classes Available

> Fall/Spring Class Schedule

**To register or for more information, please call 781.744.WELL or email [wellness@lahey.org](mailto:wellness@lahey.org).**

# Opiate Addiction Treatment Program

Medication-assisted treatment and counseling for opiate users.



## Who we serve

We serve adult men and women (over 18) from throughout Essex County, Massachusetts and beyond.

## Confidentiality

All our services are strictly confidential. We respect and protect your privacy.

## Our Services

Daily dosing with consultation by nursing staff

Family, couples and group therapy

Care for expecting mothers, including education and treatment specific to Methadone Maintenance Treatment and pregnancy. Coordination with OBGYN staff, hours of SNICU and support for family members

Direct access to other levels of care offered at Lahey Health, including step-down and half way houses, Vivitrol treatment and intensive outpatient and crisis services.

Free medical consultation and coordination of care with outside healthcare providers

In-house psychiatric services and psychopharmacology

Help with transportation, legal matters and payment for services (for those who qualify).



## Opiate Addiction Treatment Services

We are a medically-assisted treatment and counseling program for opiate users. Our clinics are located in Danvers and Gloucester, Massachusetts, and we serve adult men and women. Through a combination of medication, therapy and links to other healthcare services, our program can help you to live a drug-free life.

After two to three days of first treatment, our clients report alleviation from withdrawal and diminished cravings, which allows them to break the cycle of addiction.

For more information, please contact:

### Danvers

111 Middleton Road  
Danvers, MA 01923

978.739.7677 P  
978.750.4067 F

### Gloucester

298 Washington Street  
Gloucester, MA 01930

978.283.0296 P  
978.283.9379 F

## About Lahey Health Behavioral Services

We provide a range of outpatient, inpatient and residential care, including mental health clinics; addiction treatment; family services; mobile crisis teams; psychiatric treatment and school-based programs for children and teens.

**We serve communities  
in Greater Boston,  
the North Shore and  
the Merrimack Valley,  
Massachusetts.**



Scan with smart phone to  
access our website.

**NebHealth.org**



# Opiate Addiction Treatment Program (OTP)

