

USE OF STR/SOR GRANT FUNDS TO ADDRESS THE OPIOID CRISIS

Background on opioid-specific grants to States

The Substance Abuse and Mental Health Services Administration (SAMHSA) administers the State Targeted Response to the Opioid Crisis (STR) and State Opioid Response (SOR) grant programs. These grants aim to address the opioid crisis by increasing access to treatment, reducing unmet treatment need, and reducing opioid overdose related deaths through the provision of prevention, treatment, and recovery activities for opioid use disorder (OUD) in the States. States received a total of \$500 million for each of FY 2017 and FY 2018 through STR. Additionally, in FY 2018, States received an additional \$1 billion in new funding through the SOR grants. In FY 2019, States received \$1.5 billion through SOR. Eligible applicants for both STR and SOR are the State alcohol and drug agencies.

Allocations for Iowa

Iowa received \$2.7 million through STR for each of FY 2017 and 2018, and \$4.4 million through SOR in FY 2018. In FY 2019, Iowa received a total of \$6.7 million through SOR.

Overview of Iowa's efforts to address the opioid crisis

The Iowa Opioid State Targeted Response (STR) and the State Opioid Response (SOR) projects are related initiatives to increase access to prevention, treatment, and recovery services for people with an opioid use disorder (OUD). Through these funds, Iowa is expanding the capacity of the existing regional prevention and treatment provider network with a focus on accessible opioid treatment services, particularly medication-assisted treatment (MAT). The Iowa opioid response projects leverage the service improvements gained through smaller, focused prevention and treatment grants (MAT-PDOA, SPF-Rx), to make these evidence-based practices more accessible across the State to all Iowans affected by opioids. Providers in all service areas completed opioid-specific community assessments and strategic plans involving community stakeholders. The assessment and planning processes aim to build opioid-informed communities and provide the foundation for implementation of evidence-based practices.



Primary prevention: stopping opioid misuse before it starts

The Iowa Department of Public Health (IDPH) is using STR/SOR funds to develop, expand and support the annual state-wide opioid media campaign. Prescriber education and community trainings are also provided about opioid-related topics.

Media Campaigns

The lowa DPH uses a professional local advertising agency for all public health campaigns. The current campaign expands prevention strategies by coordinating across multiple opioid grants to maintain unified branding and consistent messages. IDPH's Strategic Prevention Framework for Prescription Drugs (SPF-Rx) federal grant supported development of a youthfocused statewide media campaign to help reduce misuse or non-medical use of prescription drugs. After conducting foundational research with 12- to 25-year-olds, IDPH determined youth needed to understand that there are real health consequences associated with sharing or misusing prescription drugs. To get that message out, IDPH developed the "Prescription Drugs Are Still Drugs" health promotion campaign for radio, TV, billboards, and social media. IDPH built on this campaign to expand the message to adults statewide. From November 2017 through March 2018, IDPH directed funding from the State Targeted Response (STR) federal grant to a media campaign intended to raise awareness in lowa adults of the risks of overdose and addiction and to provide information on treatment options. Similar campaigns with additions and improvements from the previous year continued through the second year of STR and are ongoing into the SOR grant.

Enhancement of the Prescription Monitoring Program

The Iowa Board of Pharmacy's Prescription Monitoring Program (PMP) is a vital tool in understanding opioid prescribing and reducing the risk of patients developing an opioid use disorder. Prior to 2018's PMP legislation (HF 2377), provider utilization of the PMP was voluntary, meaning a prescriber could choose whether or not to use the system to verify a patient's prescribing history. Left as an option, less than one-third of prescribers in Iowa registered to use the PMP, and even fewer used it. As a result of HF 2377, prescribers will be required to register and use the PMP at pre-determined intervals. At the time of this report, PMP registration for prescribers that have a current and active Controlled Substances Act (CSA) registration had increased to 86 percent. While the requirement to use the PMP is a major step forward, the PMP had existed on an outdated platform and did not support needed functionality. Through federal grants, IDPH made funding available to the Board of Pharmacy to obtain a new PMP platform. Launched in April 2018, the new PMP not only provides improved functionality, it allows for easier development of reports useful in understanding prescribing patterns in the State.

Providing Education to Veterinarians

Veterinarians prescribe and dispense medications for the treatment of animals in their care. These medications can be sources of opioids that can be diverted and misused. Veterinarians recognize that some pet owners, family members, handlers and veterinary practice staff may engage in diversion of opioid prescriptions intended for pets. To assist veterinarians, IDPH created an educational infographic and two electronic informational briefs: one on the role of veterinarians in reducing opioid misuse, and the other on the role of veterinarians in preventing opioid diversion, which includes educating pet owners on the risks of opioid misuse and proper storage and disposal of medications.

Approaches to Pain Management Symposium

To assist providers in understanding alternatives to opioids, IDPH sponsored the Approaches to Pain Management Symposium on October 30, 2018. With nearly 100 people in attendance, the symposium provided an overview of a range of non-pharmacological approaches to addressing pain in addition to, or as an alternative to, the use of opioids.

Presentation topics included a national perspective on research supporting approaches to pain management, chiropractic care, mindfulness-based stress reduction, physical therapy, acupuncture and alternative medicine, yoga therapy, nutrition and physical activity, and interventional orthopedics.

Work with Local Coalitions

Materials are offered to coalitions through the Alliance of Coalitions for Change (AC4C) association as well as through local prevention and treatment providers.

Special Populations

lowa identified the age group of 18-44 for targeted STR grant efforts, while more specific online targeting is available for media, to target those who search topics related to opioids. Community trainings have targeted first responders, social service providers, healthcare workers, and others as requested. Increased collaboration with the Bureau of HIV, STD, and Hepatitis has also increased the efforts focusing on health initiatives for people who use drugs.

Increasing access to treatment Expanding MAT

lowa has seen a significant increase in the availability of MAT services statewide, including in previously underserved areas of the State. That increase is due in part to the addition of Nurse Practitioners and Physician Assistants to the list of eligible prescribers and to the expansion of MAT.

STR has played a valuable role in expanding MAT. Through STR grant activities, including community needs assessments and strategic planning, 16 of the 23 local programs in IDPH's treatment provider network used STR funding to enhance or expand MAT services. In the first year of the STR grant, 118 more lowans received MAT as part of their treatment experience than in the previous year.



Hepatitis C Testing

The IDPH Bureau of HIV, STD, and Hepatitis provides funding for 10 sites across lowa to administer HIV/HCV testing and hepatitis A/B immunizations. These sites test patients for hepatitis C who have ever engaged in injection drug use, or are in the baby boomer age range and are being seen for other services. Through November 30, 2018, there were 1,714 HCV tests administered at test sites, with a 2.3 percent positivity rate. IDPH also supports HCV testing at Federally Qualified Health Centers (FQHCs) across Iowa through a partnership with the Iowa Primary Care Association. In 2017, eight FQHCs administered routine HCV testing to patients in the baby boomer age range. The number of HCV tests administered at a distance of the participating FQHCs increased 66 percent from 2016 to 2017, with 3,222 tests administered, and a 2 percent positivity rate.

UCS Healthcare, a medication-assisted treatment (MAT) provider based in Des Moines, has partnered with the Bureau of HIV, STD, and Hepatitis on a demonstration project to integrate and routinize HIV and HCV testing in a MAT setting. IDPH staff provided training on the fundamentals of HIV and Hepatitis for UCS clinic staff in March 2018. From March to September, UCS Healthcare administered 146 HCV tests at their Des Moines office, with a 31 percent positivity rate. The results of this demonstration project are promising and will contribute to additional strategic discussions around integration of testing in similar settings.

Overdose reversal efforts: saving lives

Distribution of Naloxone

IDPH has worked with other State agencies and stakeholders to prevent opioid overdose by providing access to naloxone. Made possible by federal grant funds, examples of IDPH naloxone distribution efforts include:

• 1,300 kits provided to emergency departments across the State for distribution to individuals being released from the hospital following treatment for an opioid overdose.

• 400 kits to the Department of Public Safety to equip every staff member.

• 450 kits to the Department of Corrections for individuals being released from a correctional setting who have a history of opioid misuse.

• 350 kits to the IDPH Bureau of Emergency and Trauma Services for distribution to EMS providers.

• Over 1,500 kits were provided to interested law enforcement officers.

Naloxone Standing Order

On November 3, 2016, then-IDPH Medical Director issued a statewide standing order allowing individuals to purchase naloxone from a pharmacy. That initial order was renewed through September 21, 2019 by the current IDPH Medical Director.

Narcan Access Day

On June 29, 2018, IDPH, the Iowa Board of Pharmacy and the Iowa Pharmacy Association held the first Narcan Access Day in Iowa. Through this collaborative effort, over 1,500 free naloxone nasal spray kits were dispensed to "persons in a position to assist" through more than 360 participating pharmacies across the State.

IDPH purchased the kits using federal grant funds at the reduced "public interest" price offered by the manufacturer of \$75 per kit.

Good Samaritan Informational Campaign

IDPH created informational materials to educate Iowans about the Good Samaritan Iaw, such as posters, fliers and business cards that outline eligibility requirements for protection under Iowa's Iaw. In addition, IDPH created two promotional videos (one for the general public and one for Iaw enforcement), that further explain the Iaw.

Supporting recovery

Recovery Coaching

In 2009, through the Access to Recovery (ATR) grant, IDPH identified and introduced an evidence-based model for SUD recovery coaching (Connecticut Community for Addiction Recovery [CCAR] model). Additional training in 2016 introduced the concept of a recovery community organization (RCO). This training was provided in 10 communities, and was followed by a capacity-building training in 2017. However, there were no successful applicants for a subsequent request for proposals (RFP). IDPH has strong provider relationships and was able to introduce the concept of SUD recovery coaching to providers. Recovery Coaching training is being offered to create continued opportunities for consumer and provider involvement. IDPH has also built strong partnerships with AmeriCorps workers that provide SUD education in community and professional arenas.

Recovery Stakeholders Learning Community Call

The Mid-America Addiction Technology Transfer Center (ATTC) and the Missouri Recovery Network have teamed up for a monthly Recovery Stakeholders Learning Community. The purpose of the Learning Community is to allow sharing of innovative recovery program ideas, successful advocacy efforts, and to enable recovery stakeholders to get to know each other. Recovery stakeholders and other interested individuals within SAMHSA Region 7 are welcome to participate.

Collaborating with local entities

Developing Opioid-Informed Communities

IDPH used its federal State Targeted Response (STR) grant to fund community needs assessment and strategic planning to support local communities to become "opioid-informed," defined as a community where stakeholders:



- Are aware of current opioid-related risks and problems in their communities;
- Prioritize education, prevention, treatment and recovery from opioid use disorders; and
- Agree to implement a plan of action to address both the current opioid crisis and underlying factors that may contribute to the crisis.

To assist communities, IDPH adapted the assessment workbook developed though the Iowa Partnerships for Success and Strategic Prevention Framework-Rx federal grants. Community organizers completed the workbooks, which allowed stakeholders to determine what was most needed in their communities and create strategic plans to address those identified needs.

Additional positive outcomes

- Preliminary data from the IDPH Bureau of Health Statistics indicate a 33% reduction in the number of deaths related to opioids in 2018.
- Iowa has seen a five-fold increase in the number of buprenorphine waivered prescribers since 2015, from 31 to 153.
- Iowa has increased the number of sites capable of dispensing methadone (another form of medication-assisted treatment) from eight locations in 2015, to 20 locations by mid-2019.
- The Opioid Use Media Campaign generated over 9.4 million impressions through both traditional and online media strategies.
- Training and informational sessions on opioid topics have reached more than 8,200 people.
- Over 500 people have received treatment and/or recovery services through STR funds.

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