

# MICHIGAN

## 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 Michigan

Michigan received \$16.3 million through STR for each of FY 2017 and 2018, and \$27.5 million through SOR in FY 2018. In FY 2019, Michigan received a total of \$42.4 million through SOR.

### Overview of Michigan's efforts to address the opioid crisis

In order to prevent opioid misuse and addiction, Michigan is implementing a statewide media campaign, prescriber education, prescription drug monitoring program (PDMP) improvement, and more. In order to prevent overdose deaths, Michigan has implemented a statewide Opioid Overdose Education and Naloxone Distribution (OEND) program. Treatment and recovery efforts have involved training and fidelity monitoring of motivational interviewing, Project ASSERT (Alcohol & Substance Abuse Services, Education, and Referral to Treatment), Medication-Assisted Recovery Services (MARS), dialectical behavioral therapy (DBT), and mindfulness training. Under the SOR grant, Michigan is supporting recovery housing for individuals with OUD.

### Primary prevention: stopping opioid misuse before it starts

**Statewide Opioid Media Campaign:** Michigan created a media campaign to increase awareness of the dangers of opioids and educate the public about proper storage and disposal of prescription drugs. The campaign also aims to increase awareness among prescribers on the dangers of prescription drugs.

**Statewide Training and Expansion of Evidence-Based Prevention Programming:** Michigan is utilizing Strengthening Families, an evidence-based substance use prevention program. Michigan is targeting 10-14-year-olds and their families for this program. Other EBPs implemented under SOR include Botvin's Life Skills, Prime for Life, Guiding Good Choices, and Project Toward No Drug Abuse.

**Evidence-Based Prevention for Older Adults:** This prevention initiative is targeted at adults aged 55 and older and provides education aimed at reducing high-risk behaviors. Programs include Stress Less with Mindfulness, Chronic Pain Self-Management, and Wellness Initiative for Senior Education.

**Prescription Drug Monitoring Program (PDMP) Initiative:** Michigan is upgrading software in its PDMP to include NarxCare, which automatically analyzes PDMP data and a patient's health history and provides patient risk scores, and then will conduct an outcome-based study of the effectiveness of the program. The platform provides tools and resources to enable prescribers, dispensers, and care teams to help patients and connect them to the regional Access Management System for prevention and treatment services, as appropriate.

**Michigan OPEN II:** Expansion of Michigan OPEN I (Opioid Prescribing Engagement Network) to provide training consultation to primary care physicians, surgeons, oral surgeons, and dentists on proper prescribing of opioids. Under SOR, Michigan OPEN III is building on advances made with STR funding and focuses on high-risk patients.

**Tribal Population:** The Tribal Overdose Prevention Project will use existing collaborative networks to facilitate local and inter-tribal planning. For those tribes that have a Tribal Action Plan (TAP) in place, this initiative will enhance current efforts by focusing specifically on the opioid crisis. For this purpose, the project will support the training of facilitators using the Gathering of Native Americans (GONA) Model or a locally selected approach.

**Michigan State Police (MSP) Angel Program:** Persons with OUD may walk into MSP police posts and ask for assistance and Angel volunteers provide support and transportation to an identified treatment facility. The program also equips police posts with naloxone. The program is currently held at 30 MSP posts with 20 naloxone kits at each post.

**Michigan CARES:** The Michigan Collaborative Addiction Resources and Education System (CARES) program guides physicians through the Addiction Medicine (AM) accreditation application and is currently developing an AM curriculum for medical students to help prepare for the exam.

## Increasing access to treatment

### Access to MAT

- The Michigan Opioid Collaborative (MOC) program uses **tele-mentoring** and consultant services to increase access to MAT for individuals with OUDs. Specifically,

the program helps to increase the workforce of physicians prescribing the medications used in MAT, increase clinician access to training on counseling services that accompany those medications in MAT, and provide a process for linkages to other OUD treatment services in the community.

- Michigan is currently piloting the **initiation of MAT in Emergency Departments** in four hospital systems.
- One of the barriers to accessing MAT services in Michigan is transportation. The State has been able to significantly increase access by **helping with the costs of transportation to get to treatment** and dosing statewide. The State has been able to increase the number of individuals receiving services through OTPs by approximately 750 people to date.
- Through partnerships, Michigan has sponsored multiple Drug Addiction Treatment Act (DATA) waiver trainings to increase the number of physicians and other providers who are able to prescribe buprenorphine for the treatment of OUD.
- The State is providing statewide training for clinicians to increase the availability of motivational interviewing in MAT programs.
- The State is implementing Project ASSERT, a screening, brief intervention, and referral to treatment (SBIRT) model designed for use in health clinics or emergency departments.

### **Special Populations**

The Tribal Opioid Treatment and Recovery (TOTR) initiative assists patients with treatment costs and develops strategies to eliminate or reduce treatment cost for American Indian/Alaska Native under- and uninsured patients with an OUD. The project provides vouchers for enrolled patients to access a wide array of substance use treatment and recovery support services from authorized providers.

The Maintaining Sobriety Through Systems Integration, Outreach, and Networking (MISSION) Project targets the prisoner re-entry population by providing 3 months of case management and peer services prior to release and up to 6 months of the same services upon release. The program also connects individuals to MAT and other services as needed. Additionally, the Hope Not Handcuffs program brings law enforcement and community organizations together in an effort to help individuals struggling with addiction find treatment. Under SOR, MAT services were also implemented in jail settings with 6 regions currently implementing programs.

**Mobile Care Units:** Under SOR, Michigan created Mobile Care Units with consumer-focused locations and times for dispatch using culturally competent care. Services provided by the Mobile Care Units include naloxone kit distribution and trainings, MAT services, individualized therapy and referrals to treatment services, peer support, drug screens, clean needle exchange, and fentanyl testing. Strategic partnerships in the community have also led to enhanced care on the mobile units by providing clothing and food services.

## Overdose reversal efforts: saving lives

The “Red Project” provides statewide training and expansion of community-based opioid overdose prevention utilizing the SAMHSA Opioid Overdose Tool Kit and the procurement of naloxone. All 10 Prepaid Inpatient Health Plans have received funding to support overdose education and naloxone distribution (OEND), resulting in the distribution of thousands of kits to community members, families, and individuals at risk. Funding was also utilized for the Angel Project, providing Michigan State Police and the Michigan Department of Corrections with naloxone kits.

## Supporting recovery

The State implemented a peer-initiated and peer-based recovery support project sponsored by the National Alliance of Medication-Assisted Recovery (NAMA). The initial focus is on OTPs to encourage and support engagement with the program and help with connections to other resources individuals need to be successful in recovery.

Both the Tribal Opioid Treatment and Recovery initiative and the MISSION Project also include peer recovery support services.

Under SOR, Michigan implemented individualized placement and support services including employment training for individuals aged 18-25. Referrals are made from treatment or recovery homes and services include resume building, interviewing skills, and assistance with purchasing professional clothing. Programming is currently taking place in 5 regions and 3 employment specialists have been hired. SOR funding also led to the creation of a 24-hour peer line that includes peer recovery support services.

## Collaborating with local entities

Prepaid Inpatient Health Plans, Michigan's sub-State entities, have collaborated with local jurisdictions for media campaigns, community education, OEND, naloxone kit distribution, prescription drug take back initiatives, as well as the Angel Program and Hope Not Handcuffs initiatives.

Michigan has partnered with the Inter-Tribal Council of Michigan to implement strategies in the 12 federally recognized tribes to combat opioid use. Additional partners include Wayne State University, Michigan State University, University of Michigan, and the Michigan Association of Recovery Residences.

## Positive outcomes

- 169 staff members were trained in the Strengthening Families program; 351 families completed the program; and 59 family skills training interventions were held across STR grant years
- As of August 2019, 1,568 persons have been reached through evidence-based prevention programming

- 9,600 pounds of pills have been collected at drug take back events
- Since the implementation of NarxCare, the number of patients obtaining prescriptions for controlled substances from 4 or more subscribers and filling those at 4 or more pharmacies has decreased by 70.4% in a month
- Michigan CARES currently has 41 registered physicians
- 307 clinicians and 225 physicians have been enrolled in the Michigan Opioid Collaborative
- 455 clinicians were trained in Motivational Interviewing
- 187 individuals have been enrolled through the MISSION program in 5 counties
- 352 persons served in jail-based MAT programs
- 116 placements were made, and 50 volunteers received training through the Hope Not Handcuffs Program
- 3,460 clients received MAT services and 455 individuals were trained in MAT and recovery support
- As of July 2019, 292 individuals were served through Mobile Care Units
- As of August 2019, 17,797 naloxone kits were distributed, 11,671 individuals were trained in how to use naloxone, and 306 naloxone saves were reported
- 350-400 naloxone kits provided to Michigan State police annually
- 600 naloxone kits provided to parole agents and criminal justice facilities
- 7,000 individuals received relapse prevention services
- Approximately 10,000 people were offered recovery coaching services, with approximately 1,500 initiating services
- 61 peer recovery coaches placed in 25 Michigan hospitals through Project ASSERT and 68% of patients receive follow up from peer recovery coaches
- 532 individuals received recovery housing support
- 750 people accessed continuing care support

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