

January 21, 2020



D.C. Update: HHS announces elimination of x-waiver requirement for DEA-registered physicians, CDC study finds binge drinking strongly associated with use of other substances, and more



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Meet the Member

Patricia Zuber-Wilson, Prevention Coordinator from State of New York

In April 2019, Patricia Zuber Wilson was appointed as Associate Commissioner for the Division of Prevention and Problem Gambling Services at the New York State Office of Addiction Services and Supports (OASAS). In this position, she manages the policy oversight for a continuum of substance use prevention services and problem gambling prevention, treatment, and recovery supports. Ms. Zuber-Wilson joined the agency in 2007 and prior to her recent appointment, served as the Director of Government Affairs and Federal Policy for OASAS. In this position, she oversaw the agency's efforts to monitor State and federal legislation, regulations and policy issues. Responsibilities also included working with local, State, and federal elected officials and government agencies, including the Substance Abuse and Mental Health Services Administration (SAMHSA). Ms. Zuber-Wilson worked closely with NASADAD; federally recognized Native American nations in the State; and other key State and federal constituency groups. Ms. Zuber-Wilson is a life-long resident of New York State. She graduated from Brown University in Providence, Rhode Island with a BA in Organizational Behavior and Management and did graduate level coursework at the State University of New York at Albany.





Biden Administration appoints interim Assistant Secretary for Mental Health and Substance Use and director of ONDCP

[Tom Coderre](#) has been named as the interim Acting Assistant Secretary for Mental Health and Substance Use, leading the Substance Abuse and Mental Health Services Administration (SAMHSA) as the new administration takes office. Prior to this role, Mr. Coderre served as a SAMHSA Regional Administrator and Senior Advisor to the Governor of Rhode Island. In addition, Mr. Coderre

previously served as the Chief of Staff of SAMHSA.

The Biden Administration also appointed [Regina LaBelle](#) as Acting Director of the Office of National Drug Control Policy (ONDCP). Ms. LaBelle previously served as director and founder of the Addiction and Public Policy Initiative at The O'Neill Institute for National and Global Health Law at Georgetown University Law Center, and under the Obama Administration served as Chief of Staff of ONDCP.



HHS releases report on postpartum opioid prescriptions

The Office of Behavioral Health, Disability, and Aging Policy (BHDAP),

within the Department of Health and Human Services' (HHS) Office of the Assistant Secretary for Planning and Evaluation (ASPE), released a new report titled [Postpartum Opioid Prescription Fills, Opioid Use Disorder \(OUD\), and Utilization of Medication-Assisted Treatment \(MAT\) among Women with Medicaid and Private Health Insurance Coverage](#). As described in the report, the study aims to analyze Medicaid and private health insurance claims data to estimate postpartum opioid prescribing rates among women who gave birth; rates of OUD development among those with postpartum opioid prescriptions; and utilization of MAT among those who develop opioid use disorder (OUD) after childbirth. The report includes figures and tables that summarize key findings and statistics relating postpartum opioid prescribing to the development of OUD and utilization of MAT. For example, among the Medicaid and privately insured patients who gave birth, over 50% had an opioid prescription filled within a week of giving birth. In addition, Medicaid patients were more likely to fill an opioid prescription postpartum, compared to patients on private insurance.

HHS announces elimination of x-waiver requirement for DEA-registered physicians

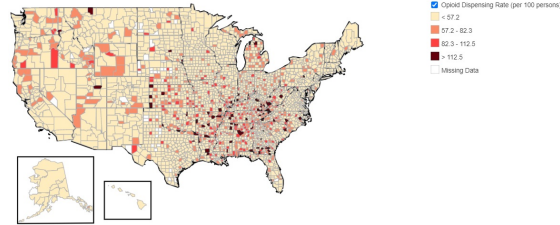
The U.S. Department of Health and Human Services (HHS) recently announced that it will publish [Practice Guidelines for the Administration of Buprenorphine for Treating Opioid Use Disorder](#), in order to expand access to medication-assisted treatment (MAT). As described by HHS, the guidelines will eliminate the requirement that physicians with a Drug Enforcement Administration (DEA) registration number apply for a separate waiver to prescribe buprenorphine for opioid use disorder (OUD) treatment. Physicians utilizing the exemption will be limited to treating no more than 30 patients at any one time and applies only to buprenorphine. The announcement was prompted by [recent provisional data](#) from the Centers for Disease Control and Prevention (CDC) that highlights an increase in overdose deaths, resulting in a demand for more accessible treatment services like MAT.

CMS releases new Medicaid data to help target SUD prevention and treatment efforts

The Centers for Medicare & Medicaid Services (CMS) recently [released](#) a second publication of the Medicaid Substance Use Disorder (SUD) Data Book, as required by the 2018 Substance Use Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act. The data book is intended to help policymakers, researchers, and other stakeholders better understand areas of need regarding prevention and treatment efforts. As described in the [announcement](#), the data book contains 2018 data on Medicaid beneficiaries treated for SUD, and the services they received by type and setting, delivery system, and progression of care.

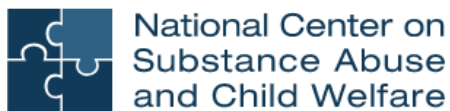
CDC updates Opioid Dispensing Rate Maps

The Centers for Disease Control and Prevention (CDC) recently updated their [U.S. Opioid Dispensing Rate Maps](#), showing the geographic distribution, at both State and county levels, of retail opioid prescriptions dispensed per year



from 2006 to 2019. The update indicates that a steady increase in overall opioid dispensing rates peaked in 2012 at more than 255 million and a dispensing rate of 81.3 prescriptions per 100 persons. However, the overall dispensing rate then declined from 2012 to 2019, and in 2019, the dispensing rate had fallen to the lowest levels since data collection began, to 46.7 prescriptions per 100 persons. The data also indicates that, while overall dispensing rates decline, certain areas of the country continue to see high dispensing rates.

Upcoming Events



National Center on Substance Abuse and Child Welfare

[SAMHSA to hold webinar on updated guidance regarding neonatal opioid withdrawal syndrome](#)

The Substance Abuse and Mental Health Services Administration's (SAMHSA) Center for Substance Abuse Treatment (CSAT) and the Administration on Children, Youth, and Families (ACYF), in partnership with the National Center on Substance Abuse and Child Welfare (NCSACW), announced two upcoming [webinars](#). The webinars will feature Dr. Stephen Patrick, the primary author of new guidance on neonatal opioid withdrawal syndrome (NOWS) from the American Academy of Pediatrics (AAP). The first webinar, to be held on January 26th, will provide information on the opioid crisis and implications for pregnant and parenting women. The webinar will also include an overview of the revised guidance which provides recommendations for management and treatment of infants with opioid exposure. The second webinar, to be held on January 28th, will include a 1-hour dialogue where Dr. Patrick will answer questions and discuss further aspects of the guidance.

Research Roundup

[CDC study finds binge drinking is strongly associated with use of other substances](#)

The Centers for Disease Control and Prevention (CDC) published a new [study](#) showing that binge drinking is strongly associated with the use of other substances. The study, using data from the 2016-2018 National Survey on Drug Use and Health (NSDUH), found that almost one in four people who binge drank also reported using other substances in the past month, and people who binge drank were twice as likely to use other substances as non-binge drinkers. The study also noted that, among people who binge drank, other substance use was most common among males, young people aged 12-17, non-Hispanic black people, people with an annual household income of less than \$20,000, and people living in large metropolitan counties. Finally, the study found that individuals who binge drank

were twice as likely to report prescription opioid misuse while drinking alcohol compared to people who did not binge drink.

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