NASADAD National Association of State Alcohol and Drug Abuse Directors

D.C. Update: Proposed Legislation Designed to Increase Capacity to Address OUD, New Funding Opportunities, HHS OIG Findings on Medicaid Beneficiaries and OUD Risk and Treatment, and More

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Meet the Member

Brittney Allen, PhD., SSA for Kentucky, Director for the Division of Substance Use Disorder, Kentucky Department of Behavioral Health, Developmental and Intellectual Disabilities



Brittney Allen, PhD., completed her doctorate degree in Behavioral Science at the University of Rhode Island. As junior research faculty at Brown University, Dr. Allen served as the Project Director for multiple National Institutes of Health-funded studies, including a prospective cohort study exploring the longitudinal developmental course of delinquency, mental, and behavioral health outcomes among justice-involved youth.

At the Kentucky Department for Behavioral Health, Developmental and Intellectual Disabilities she has served as the State Opioid Coordinator and Deputy Project Director for the Kentucky Opioid Response Effort (KORE). In this role, she was responsible for monitoring federal and State funding aimed at addressing the opioid crisis and assisting in the implementation of numerous State programs and initiatives including prevention, treatment, and recovery support services for individuals and families impacted by the opioid crisis.

Currently, she serves as Director for the Division of Substance Use Disorder within the Kentucky Department of Behavioral Health, Developmental and Intellectual Disabilities overseeing the provision of federal and State funds that support and enhance the implementation of a vast array of substance use prevention, treatment, and recovery

support services.

Capital Hill Happenings

Senator Baldwin Introduces Legislation Designed to Increase Access to Opioid Overdose Reversal Drugs

U.S. Senator Tammy Baldwin (D-WI) recently introduced the <u>Naloxone Education and Access Act</u>, which is designed to expand States' and Tribal communities' access to opioid overdose reversal drugs, primarily naloxone. The Act intends to amend the <u>Public Health Service Act</u> to provide grants to "eligible State and Tribal entities" to promote education, access, and co-prescribing of approved opioid overdose reversal drugs and devices. The legislation proposes to provide \$10 million annually from 2023 through 2027 to:

- "Implement strategies for pharmacists to dispense an overdose reversal drug or device;
- Encourage pharmacies to dispense opioid overdose reversal medication;
- Encourage health care providers to co-prescribe overdose reversal drugs or devices;
- Support innovative community-based distribution programs of overdose reversal drugs and devices;
- Develop or provide training materials that persons authorized to prescribe or dispense an overdose reversal drug or device may use to educate the public concerning—
 - When and how to safely administer such drug or device; and
 - Steps to be taken after administering such drug or device; and
- Educate the public concerning the availability of overdose reversal drugs or devices"

Full text of the legislation can be found <u>here</u>.

Around the Agencies

SAMHSA Announces New Legislative Affairs Director: Michelle Greenhalgh



The Substance Abuse and Mental Health Services Administration (SAMHSA) <u>announced</u> the hiring of Michelle Greenhalgh as the new Legislative Affairs Director. Ms. Greenhalgh will advise on legislative matters, lead in the development of legislation, and serve as the primary SAMHSA contact on all legislative activities.

Ms. Greenhalgh most recently served as Deputy Director of Federal Relations at the American Psychiatric Association (APA), where she focused on legislation that increases access to mental health and substance use disorder (SUD) services. Before working at the APA, Ms. Greenhalgh served as a health staffer for Representatives Joe Courtney (D-CT), Diana DeGette (D-CO), and Senator Jeanne Shaheen (D-NH). She received her master's degree from Johns Hopkins University and holds a bachelor's degree from the University of New Hampshire.

NIDA Funding Opportunity: New Models of Integrated HIV/AIDS, Addiction, and Primary Care Services



The National Institutes of Health's (NIH) National Institute on Drug Abuse (NIDA) announced a <u>funding opportunity</u> for research on improving health outcomes for those who are at heightened risk for or live with HIV and substance use disorder (SUD) and stra

risk for or live with HIV and substance use disorder (SUD) and strategies for integrating primary care, HIV, and SUD prevention and treatment services. NIDA seeks applications to develop/test replicable, scalable, and sustainable organizational and systems-level interventions that provide comprehensive, optimally integrated evidence-based care

across the full continuum of HIV, SUD prevention and treatment, and primary care services to improve coordination of care and health outcomes related to HIV and SUD. Interventions should also aim to reduce social and structural barriers to care coordination. Research objectives and areas of interest include studies that:

- "Develop or test implementation of new models of integrated evidence-based drug abuse prevention or treatment interventions in HIV care settings
- Test implementation science approaches to translate strategies with demonstrated efficacy or effectiveness in other settings or locations (e.g., low resource international settings).
- Test integrated HIV/AIDS and SUD care approaches that capitalize on electronic health record systems and other efforts to increase integration within and between health systems.
- Develop or test methods for improving the coordination and communication between behavioral health and HIV care providers within and across settings."

Applicants are urged to prioritize integration or expansion of care in single point of care delivery systems. Participating organizations must have existing collaborative relationships/partnerships by the time of application.

SAMHSA Funding Opportunity: Support for 988 Tribal Response Cooperative Agreements

The Substance Abuse and Mental Health Services Administration (SAMHSA) announced a two-year funding opportunity aimed at enhancing tribal communities' 988 response. These cooperative agreements will provide resources to improve response to 988 Suicide and Crisis Lifeline contacts originating in Tribal communities or activated by American Indians/Alaskan Natives (AI/AN). The program's priorities are to:

- 1. "Ensure American Indians/Alaska Natives have access to culturally competent, trained 988 crisis center support;
- 2. improve integration and support of 988 crisis centers, Tribal nations, and Tribal organizations to ensure there is navigation and follow-up care; and
- 3. facilitate collaborations with Tribal, state and territory health providers, Urban Indian Organizations, law enforcement, and other first responders in a manner which respects Tribal sovereignty."

The application deadline is Tuesday, October 25, 2022, with an estimated total program funding of \$35,000,000 and up to 100 awards. Eligibility is limited to Federally recognized Indian Tribes and tribal organizations. Tribes and tribal organizations can apply as part of a consortia and can only be included in one application. The notice of funding opportunity can be found here.

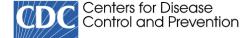
HHS Office on Women's Health Awards Funding to Bolster Support and Training on SUD During Pregnancy and Postpartum



The Department of Health and Human Services (HHS) Office on Women's Health (OWH) awarded more than \$3.6 million in competitive grants from the <u>Reducing Maternal</u> <u>Deaths Due to Substance Use Disorder</u> grant program and the <u>Violence Against Women</u> <u>and Substance Use Prevention Initiative</u> to seven organizations to bolster support for individuals with substance use disorder (SUD) during pregnancy and postpartum. The grants strive to promote evidence-based treatment and recovery practices and train providers to integrate the full continuum of care for mental health and SUD into pregnancy and postpartum health care. Five recipients also intend to use the funds to address the intersection of SUD and intimate partner violence (IPV). Details on the grant programs and winners can be found here.

Research Roundup

and Progress Toward National Goals



The Centers for Disease Control and Prevention (CDC) recently published two reports with new data on viral hepatitis and national efforts to address its spread and mortality. The <u>Viral Hepatitis Surveillance Report—United States</u>, 2020 highlights surveillance and mortality data on hepatitis A, B, and C and outcome data from <u>CDC's Perinatal Hepatitis B Prevention Program</u>. CDC also released the <u>2022 Viral Hepatitis National Progress Report</u> on progress toward national goals of preventing viral hepatitis transmission, disease, and associated mortality. Key findings about the relationship between substance use disorder (SUD) and hepatitis include:

- A 47% decrease in the rate of hepatitis A cases during 2020 compared to 2019 following four successive years of increasing rates due to outbreaks driven by person-to-person transmission primarily among adults who use drugs or experience homelessness
- A 15% increase in the rate of reported cases of acute hepatitis C during 2020 compared to 2019 due to increases in injection drug use, which have significantly contributed to annual increases in newly reported cases of hepatitis C since 2013

This data will inform CDC's strategies to prevent new infections, reduce morbidity and mortality, and eliminate health disparities associated with viral hepatitis.

HHS OIG Findings on Medicare Beneficiaries and OUD Risk and Treatment

The Department of Health and Human Services (HHS) Office of Inspector General (OIG) recently published a <u>data brief</u> on trends in access to opioid use disorder (OUD) medication and behavioral therapy in Medicare Part D beneficiaries. Specifically, the brief covers data on opioid use, access to treatment for OUD, and access to naloxone for Medicare Part D beneficiaries in 2021. Key findings include:

- While approximately 1 million Medicare beneficiaries were diagnosed with OUD in 2021, less than 20% received OUD medication.
- About 50,400 Part D beneficiaries received medical care for an opioid overdose linked to prescription opioids, illicit opioids, or both during 2021.
- The number of Medicare Part D beneficiaries who received opioids in 2021 decreased to almost a quarter of beneficiaries.
- Nearly 200,000 Part D beneficiaries received high amounts of opioids in 2021 with about 23,000 put at serious risk for health issues due to the extreme amounts received
- The number of Part D beneficiaries receiving naloxone increased.

OIG recommends the Centers for Medicare & Medicaid Services (CMS) monitor opioid use and access to medications, namely naloxone, for treatment of OUD to address the opioid crisis. The complete report can be found here.

Webinars to Watch

HRSA Webinar: Social Determinants of Health and Cultural Humility

The Health Resources and Services Administration (HRSA), in partnership with experts from the UCLA Integrated Substance Abuse Programs and the Pacific Southwest Addiction Technology Transfer Center (ATTC), will host a <u>webinar</u> on the intersection of mental health, substance use disorder (SUD), social determinants of health, and cultural humility. This no-cost webinar will be offered on September 28, 2022, at 2:00 pm (ET). The webinar is part of HRSA's Webinar Series for Behavioral Health Providers on emerging issues pertaining to adolescent mental health and SUD treatment. Recordings of the other sessions in this series can be found below:

- Pediatric and Adolescent Mental Health and Substance Use, Part 1
- Pediatric and Adolescent Mental Health and Substance Use, Part 2

NCSACW Webinar: How Using Contingency

Management Can Support Families Affected by Substance Use Disorders



The National Center on Substance Abuse and Child Welfare (NCSACW) will host a <u>webinar</u> on the effectiveness of contingency management as an evidence-based behavioral intervention for treating stimulant use disorder. This no-cost webinar will be offered on September 29, 2022, at 1:30 pm (ET). The webinar will provide an overview of contingency management, including its implementation within different cultural populations, myths and stigma associated with it, and strategies to help agencies implement the treatment in their communities. The webinar will also cover:

- "Science and research behind contingency management
- Key principles and implementation strategies of contingency management, including program effectiveness related to individuals with stimulant use disorders involved in the child welfare system
- How to apply principles outside of substance use disorder (SUD) treatment to improve outcomes for parents affected by SUDs"

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