

December 16, 2022



**D.C. Update: Administration Releases Notice of Proposed Rule Making Regarding 42 CFR Part 8, New National Data Dashboard for Non-Fatal Overdoses Launched, NIDA Releases Latest Monitoring the Future Survey, and More.**

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## Meet the Member

### **Ryan Mueller, State Opioid Treatment Authority for Colorado, Behavioral Health Administration**

Ryan Mueller has served as Colorado's State Opioid Treatment Authority (SOTA) since October 2021. In his first year, he oversaw licensing for Colorado Opioid Treatment Programs (OTP), including 10% statewide expansion, supported redraft and promulgation of state OTP rule in the direction of evidenced-based practice and access to care, and assisted development and rollout of new automated state-held central registry. In addition, he coordinated efforts with the Pew Charitable Trusts' Substance Use Prevention and Treatment Initiative to implement Colorado's Opioid Treatment Access Action Plan, advocated for State Opioid Response grant dollars (SOR III) towards OTPs, strategized response to Office of Inspector General (OIG) Colorado OTP audit, and program managed a fentanyl education platform connected to Colorado House Bill 1326.



Ryan is a Licensed Professional Counselor and Licensed Addiction Counselor with fourteen years' experience in the health field, ranging from direct clinical care, hospital system leadership, and regulatory oversight. He has nine years of OTP experience. Ryan holds a Masters of Education from the University of Missouri, specializing in addiction and family therapy. The values driving his work are compassion, justice, and advocacy.

## Administration releases Notice of Proposed Rule Making (NPRM) re: 42 CFR Part 8 impacting OTPs and medications for opioid use disorders

On December 13th, the Administration released a Notice of Proposed Rule Making (NPRM) impacting opioid treatment programs (OTPs), including the flexibilities that were put in place during the COVID-19 Public Health Emergency (PHE).

**The NPRM:** To see the NPRM, visit [2022-27193.pdf \(federalregister.gov\)](https://www.federalregister.gov/documents/2022/12/13/2022-27193)

**Highlights:** As noted on the Federal Register, “...the Department proposes to modify certain provisions of part 8 to update OTP accreditation and certification standards, treatment standards for the provision of medications for opioid use disorder (MOUD) as dispensed by OTPs, and requirements for individual practitioners eligible to dispense (including by prescribing) certain types of MOUD with a waiver under 21 U.S.C. 823(g) (2).” The NPRM proposes the following, among many provisions:

- **Removal of the one-year requirement for opioid use disorder (OUD)**
  - The proposed rule “...instead specifies that the individual should either: meet diagnostic criteria for active moderate to severe OUD; that the individual may be in OUD remission; or at high risk for recurrence or overdose.”
- **Revision of the definition of counseling services**
  - The NPRM would “...include psychoeducational services, harm reduction and recovery-oriented services, and counseling and linkage to treatment for anyone with positive test results on human immunodeficiency virus (HIV), viral hepatitis, and other sexually transmitted infection (STI) panels, or from OTP-provided medical examinations.”
- **Revision of rules related to take home doses of methadone**
  - According to the NPRM, “...the revised criteria allow up to 7 days of take home doses during the first 14 days of treatment, up to 14 take home doses from 15 days of treatment and up to 28 take home doses from 31 days in treatment. The requirement that OTPs maintain procedures to protect take homes from theft and diversion was continued, and patient education on safe transport and storage of take home doses is added, including documentation of the provision of this education in the patient’s clinical record...”
- **Revision of definition of interim treatment duration**
  - The NPRM “...extends the potential duration of interim treatment from 120 days to 180 days. It also clarifies the circumstances in which interim treatment may apply and maintains priority access to comprehensive services for pregnant individuals. The proposed rule removes the requirement for observation of all daily doses during interim treatment. It clarifies the expectation that crisis services and information pertaining to locally available, community-based resources for ancillary services be made available to individual patients in interim treatment. A requirement of a plan for continuing treatment beyond 180 days of interim services was added to the proposed rule.”
- **Practitioners seeking to treat 275 patients**
  - The NPRM says the “...regulations in subpart F of this part establish the procedures and requirements that practitioners who are authorized to treat up to 100 patients with OUD pursuant to a waiver obtained under section 303(g)(2) of the CSA (21 U.S.C. 823(g)(2)), must satisfy in order to treat up to 275 patients with medications covered under section 303(g)(2)(C) of the

The press release from the Substance Abuse and Mental Health Services Administration (SAMHSA) is available [here](#).

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## Capital Hill Happenings

### Bipartisan Rural Opioid Abuse Prevention Act Bill Passes Both Chambers

On December 6th, the House of Representatives passed the [Rural Opioid Abuse Prevention Act \(S.2796\)](#), a bill that would authorize funding to rural communities to provide resources that support community-based efforts to combat the opioid epidemic. The bipartisan bill was introduced by Senators Jon Ossoff (D-GA) and Chuck Grassley (R-IA) and passed the Senate last December. The bill authorizes funding for the Department of Justice’s (DOJ) [Rural Responses to the Opioid Epidemic Initiative](#). The bill also provides grants for community response pilot programs to identify gaps in prevention, treatment, and recovery services in the criminal justice system in rural areas that provide substance use disorder (SUD) services.

Senator Ossoff’s press release can be found [here](#).

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## White House Happenings

### Biden-Harris Administration Launches National Data Dashboard for Non-Fatal Overdoses

Last week, the White House Office of National Drug Control Policy (ONDCP), in partnership with the National Highway Traffic Safety Administration (NHTSA), launched a [data dashboard](#) that tracks non-fatal opioid overdoses across the country. The National Opioid Overdose Dashboard provides national data from electronic patient records completed by first responders on:

- Average population rate of non-fatal opioid overdose, at jurisdiction and county levels all the way to national averages
- Average number of naloxone administrations per patient
- Average Emergency Medical Services (EMS) time to reach an overdose patient, and
- Percent of non-fatal opioid overdose patients not transported for further treatment

Future updates to the Dashboard will incorporate data on nonfatal overdoses involving all drugs, impacts by major demographic categories, patient outcomes, and clinical measures. The White House press release announcing the Dashboard can be found [here](#).

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## Around the Agencies

### NIDA Releases Monitoring the Future Survey: National Survey Results on Drug Use, 1975-2022: Secondary School Students

The National Institute on Drug Abuse (NIDA), in conjunction with researchers at the University of Michigan, Ann Arbor, released the [Monitoring the Future Survey: National Survey Results on Drug Use, 1975-2022: Secondary School Students](#). The Survey reports that the percentage of adolescents reporting substance use in 2022 held steady after significant declines in 2021 following the COVID-19 pandemic. The Survey also reports that the most commonly reported substances used among adolescents that year were alcohol, nicotine vaping, and cannabis.

The Monitoring the Future Survey is conducted annually with students in eighth, 10th, and 12th grades who self-report their substance use behavior. The survey also

documents perceptions of harm, disapproval of use, and availability of drugs.

NIDA's press release announcing the results can be found [here](#).

## National Council for Mental Wellbeing/CDC Funding Opportunity: "Pilot Projects to Advance Harm Reduction and Public Safety Partnerships to Prevent Overdose"

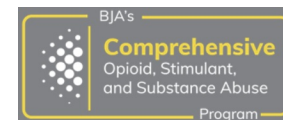


The National Council for Mental Wellbeing, with support from the Centers for Disease Control and Prevention (CDC), announced a funding opportunity for "[Pilot Projects to Advance Harm Reduction and Public Safety Partnerships to Prevent Overdose](#)." These grants will provide funding, technical assistance, and training to organizations to support pilot projects integrating harm reduction strategies and public safety initiatives designed to reduce the risk of overdose. Eligible applicants must demonstrate current or past partnership with public safety agencies that provide harm reduction services. Priority is given to highly-impacted populations, including rural.

Up to eight implementation sites will be selected, with awards of up to \$81,250 for the yearlong project beginning in February 2023. In addition to funding, awardees will receive training and technical assistance opportunities. [Applications](#) are due no later than December 23, 2022.

The full Request for Funding Applications (RFA) can be found [here](#).

## COSSAP Request to Participate: Virtual Focus Groups on Harm Reduction Strategies in Justice Settings to Reduce Overdose Deaths



The Department of Justice's (DOJ) Bureau of Justice Assistance (BJA) Comprehensive Opioid, Stimulant, and Substance Abuse Program (COSSAP), in collaboration with the Centers for Disease Control and Prevention (CDC), are [seeking stakeholders](#) across the justice continuum to help inform a new project aimed at developing educational resources for justice professionals about harm reduction strategies to reduce overdose deaths. The project aims to identify barriers to harm reduction efforts in justice settings and develop partnerships among health and safety professionals to enhance the provision of services for justice-involved individuals with substance use disorder (SUD). Specifically, they seek to hear from stakeholders about how harm reduction strategies can support justice-involved individuals with SUD and how they can be implemented.

COSSAP will be scheduling no more than 90-minute virtual focus groups in January to discuss the project. Interested parties can submit their contact information [here](#), no later than December 19, 2022.

## New SAMHSA Resource: DAWN: Findings from Drug-Related Emergency Department Visits, 2021

The Substance Abuse and Mental Health Services Administration (SAMHSA) released the most recent findings from the [Drug Abuse Warning Network \(DAWN\): Findings from Drug-Related Emergency Department Visits, 2021](#). The report analyzes final 2021 DAWN data on a myriad of outcomes for patients who had a drug-related emergency department visit in 2021, and includes:

- "nationally representative weighted estimates, including percent and unadjusted rates per 100,000, for all drug-related emergency department (ED) visits
- nationally representative weighted estimates for the top five drugs in drug-related ED visits,
- the assessment of monthly trends and drugs involved in polysubstance ED visits in a subset of sentinel hospitals, and
- the identification of drugs new to DAWN's Drug Reference Vocabulary."

The resource can be downloaded [here](#).

The Center of Excellence for Protected Health Information (CoE-PHI) announced updates to the [CoE-PHI Digital Media Toolkit](#). The Toolkit provides up-to-date content and graphics to promote the resources on CoE-PHI's website, including a suite of e-learning modules and videos, about federal health privacy laws relating to mental health and substance use disorder (SUD) care. The toolkit now contains a "feature resource" section that highlights new resources as they are developed. The current featured resource is a video on [Patient Voices: Confidentiality is the Cornerstone of Your Patients' Recovery](#), featuring five individuals with lived experiences that illustrates why confidentiality is so important to patients' treatment process.

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### Webinars to Watch

#### **POSTPONED: Entertainment Industries Council Webinar: A conversation with Dr. Nora Volkow and Ryan Dusick**

The Entertainment Industries Council's (EIC) webinar featuring a conversation with Dr. Nora Volkow, Director of the National Institute on Drug Abuse (NIDA), and Ryan Dusick, Maroon 5 co-founder/drummer and person-in-recovery, previously scheduled for December 14, has since been postponed to early 2023.