

Getting Back to the Opioid Crisis

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February 23, 2022

Association of State and Territorial Health Officials (ASTHO)

Washington Week

Renaissance Arlington Hotel

Overview of NASADAD

- NASADAD's mission is to promote effective and efficient publicly funded State substance use disorder prevention, treatment, and recovery systems.
- Office in Washington, D.C.
 - Research and Program Applications Department
 - Research Department houses component groups: prevention, treatment, women's services, and SOTAs
 - Public Policy Department
- Governed by Board of Directors
 - Sara Goldsby (SC), President
 - Cassandra Price (GA), Public Policy Committee Chair

What do we do?



Serve as the national voice of State substance use agencies



Foster partnerships among States, federal agencies, and other key national organizations



Develop and disseminate knowledge of innovative substance use programs, policies, and practices



Promote key competencies of effective State substance use agencies



Promote increased public understanding of prevention, treatment, and recovery processes and services

NASADAD Component Groups

Under the
NASADAD umbrella
are special interest
groups that
represent State
alcohol & drug
agency staff:



Prevention
Coordinators



Treatment
Coordinators



Women's Services
Coordinators



State Opioid
Treatment
Authorities (SOTAs)



Youth
Coordinators



HIV Coordinators

Placement & Role of State Alcohol & Drug Agencies

Placement in State government varies: May be Departments of Health, Human Services, Social Services, some Cabinet Level

Develop annual **State plans** to provide prevention, treatment, and recovery services

Ensure **service effectiveness, quality, improvement and coordination of programming**

Collaborate with other State agencies, NGOs and sectors representing child welfare; housing; criminal justice; primary care/medical system; transportation; job training/placement, etc.

Represent **key link to substance use disorder program/provider/recovery community**

Convene stakeholder meetings

Manage the Federal Substance Abuse Prevention and Treatment (SAPT) Block Grant

Manage STR Grant and SOR Grant



Substance Abuse Prevention and Treatment (SAPT) Block Grant

- Historically a \$1.8 billion formula grant administered by SAMHSA
- Senate recommends \$3 billion for FY 2022
- Supports treatment for 2 million Americans per year
- 20 percent set-aside for primary prevention
- Flexible program that allows each State to direct resources for prevention, treatment, and recovery to meet their own needs
- Infrastructure for efficient and effective management and allocation of funds



RECENT (FUTURE?) INVESTMENTS IN SUBSTANCE ABUSE PREVENTION AND TREATMENT (SAPT) BLOCK GRANT

	Increase
■ FY 21 appropriations/COVID Supp (Dec 2020):	\$1.65 billion
■ American Rescue Plan (March 2021):	\$1.5 billion
■ FY 2022 (TBD):	Proposed Increase
	\$1.65 billion (President proposed)
	\$1 billion (House)
	\$1.1 billion (Senate)

STATE TARGETED RESPONSE (STR) AND STATE OPIOID RESPONSE (SOR) GRANTS

- 21st Century Cures Act authorized account for State Targeted Response (STR) to the Opioid Crisis Grants
 - \$500 million in FY 2017 (year 1)
 - \$500 million in FY 2018 (year 2)
- Additionally, in FY 2018, appropriators allocate , above and beyond year 2 of STR, "\$1 billion in new funding for grants to States to address the opioid crisis"--the State Opioid Response (SOR) grants.
 - \$1.5 billion in each FY 2019, FY 2020, and FY 2021
 - \$2 billion recommended by House and Senate for FY 2022
- The program aims to address the opioid crisis by increasing access to medication-assisted 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 FY 2020, Congress made stimulants an allowable use of funds under SOR

CURRENT ENVIRONMENT CAPITOL HILL

Large interest in substance use and mental health issues – including a reexamination of or interest in reauthorizing 40 programs set to expire.

Hearings to date:

- 2 hearings in Senate Finance Committee on youth mental health
- 1 hearing in Senate Health, Education, Labor and Pensions (HELP) Committee
- 1 hearing in the House Energy and Commerce Oversight Subcommittee

The byproduct of this interest is a deep dive on current programming. Others see opportunity for new programming

OBSERVATIONS REGARDING NOTEWORTHY STATE ACTIONS

Some observations on use of funds to address areas of need

YOUTH/YOUNG ADULTS

- In **Kentucky**, Youth Empowerment Specialists work to increase youth engagement in prevention, including help applying for Youth Empowerment System grants to support prevention projects; participation in EmpowerKY Youth Summit; and involvement in community anti-drug coalitions.
- **California's** Youth Opioid Response Project focuses on providing prevention, treatment and recovery services for youth aged between 12 and 24.
- **Vermont** supports youth drop-in centers to allow visitors to do laundry, use a computer, get a meal, take a shower, and convene.
- **Maryland** is supporting Adolescent Clubhouses for youth 12-17 at risk for, or receiving treatment, or following discharge from treatment.
- Young People in Recovery (YPR) Chapters exist in **California, Colorado, Georgia, Kentucky, Maine, Maryland, Massachusetts, Mississippi, Nevada, New York, Ohio, Pennsylvania, Tennessee, Utah, Virginia, Washington**

JUSTICE INVOLVED POPULATIONS

- **New Jersey** is initiating its County Correction Facilities MAT Program/Reentry services where MAT programs are established or enhanced for inmates with opioid use disorders at county correctional facilities. Case managers at county jails will conduct intake assessments and establish pre-release plans for needed services in the community.
- **Delaware** is partnering with the Delaware State Police to implement a pre-arrest diversion program in 3 troop stations Statewide, one per county, to divert individuals in custody to substance use disorder treatment. Each troop office has on-site care managers and have developed workflows for the referral pathways to treatment.
- **Washington State's** Care for Opioid Offenders Released from Prison Program (COORP) enhances Department of Corrections (DOC) SUD staff ability to provide assessments and treatment decision-making for warm handoffs with priority on connecting people to medication assisted treatment. Contract incentives given for successful handoffs to providers and retention.

RECOVERY SUPPORT

- More emphasis being placed on recovery housing through collaboration with the National Alliance for Recovery Residences (NARR)
- Created standards for recovery housing in order to promote universally accepted protocols. In the process, promote ethical, high quality recovery residences
- Developed chapters in States cross the country to help support / facilitate the work.

National Alliance for Recovery Residences (narronline.org)

NEED FOR MORE OUTREACH AND ENGAGEMENT

- **Illinois** used STR and SOR funds to support specialized and specific community-based outreach, referral and linkage to services that are offered for persons with opioid use disorders in high need areas. Illinois utilizes peer outreach workers to canvas multiple locations that are frequented by high-risk individuals.
- **Colorado** utilized SOR funds to support 6 mobile health units that offer access to a physician that can prescribe medications for opioid use disorder, naloxone distribution, peer recovery coaching and more.
- DEA issues regulations on June 28, 2021 to resume applications for mobile methadone units. No new units were approved since 2007
- **Overall theme:** Much more needs to be done on outreach/engagement. More retail.

OPPORTUNITY: 988 / CRISIS SERVICES

- Efforts will have to be made to ensure specific considerations are made related to substance use disorders
- Messaging must reference substance use disorders
- Systems need to build SUD components into response
- Stakeholder engagement needs to include SUD orgs and people in recovery

CHALLENGE:WORKFORCE

- The number one challenge to addressing the opioid crisis
- Large gaps cross the continuum
- NASADAD is promoting strong leadership role for SAMHSA on workforce issues – including statutory authority to offer support to ensure an “all-hands-on deck approach”

QUESTIONS?



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