

July 3, 2024



**D.C. Update: CMS Approves Five New States for the Medicaid Reentry Section 1115 Demonstration Opportunity, NIH RFI on the HEAL Initiative, CDC Study Finds Gaps in Care for People with OUD, and More.**

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## Meet The Member

### **Teesha Kirschbaum, SSA for Washington, Division Director, Division of Behavioral Health and Recovery, Washington State Health Care Authority**

Teesha Kirschbaum leads the Division of Behavioral Health and Recovery (DBHR) at the Washington State Health Care Authority (HCA). With a background in non-profit and State government, Teesha brings nearly 20 years of experience to her position. She has served in multiple capacities at the agency, including recovery supports supervisor, senior project manager, and, most recently, DBHR deputy director. Prior to joining HCA in July 2018, she served as the supported employment and supportive housing program administrator at the Washington State Department of Social and Health Services (DSHS).



Teesha is dedicated to fostering collaboration and strategic thinking to address complex mental health and substance use disorder (SUD) issues. In her current role, she oversees the agency's treatment and recovery programs, providing leadership and management to achieve DBHR's objectives, goals, and mission. Her commitment to HCA is driven by her desire to ensure that DBHR integrates the full spectrum of mental health and SUD care, including mental health, co-occurring disorders, substance use, problem gambling, and recovery supports. This approach allows DBHR to effectively meet the diverse needs of individuals across the continuum of care.

## 2024 NASADAD National Prevention Network Conference Registration Now Open



The NASADAD National Prevention Network (NPN) Conference highlights the latest research in the substance use prevention field. It provides a forum for prevention professionals, coalition leaders, researchers, and federal partners to share research, best practices and promising evaluation results for the purpose of integrating research into prevention practice.

The NPN Conference will take place August 13-15 in Phoenix, Arizona, at the Arizona Grand Resort. This year's theme is: *Shining a Light on Prevention: Connecting Research, Practice, Innovation, and Equity*.

Register for the conference here: <https://nnpconference.org/registration/>.

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## Capitol Hill Happenings

### Labor-HHS-Education Revised Allocations Bill Mark-Up in the House

Last week, the House Appropriations Subcommittee on Labor, Health and Human Services (HHS), Education, and Related Agencies met to mark-up and voted to advance the [Labor, Health and Human Services, Education, and Related Agencies Appropriations Act, 2025](#) to the Full Appropriations Committee for consideration. The Labor, Health and Human Services, Education, and Related Agencies bill outlines the Fiscal Year (FY) 2025 funding levels for NASADAD priority programs within HHS, including the Substance Abuse and Mental Health Services Administration (SAMHSA), the Centers for Disease Control and Prevention (CDC), and the Health Resources and Services Administration (HRSA), among others. Details on the funding level for each program within each agency at HHS will become available as the Full Committee considers the package.

A markup for the bill by the Full Appropriations Committee will be on July 10, at 9:00 am ET in 2359 Rayburn Building. The Full Committee will mark-up and vote on whether to advance the measure to the full House chamber for consideration and passage.

The Full Committee markup can be viewed live, and a recording of the hearing will be made available, [here](#).

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## Around the Agencies

### CMS Announces Approval of Five Additional States to the Medicaid Reentry Section 1115 Demonstration Opportunity



On July 2, the Department of Health and Human Services (HHS), through the Centers for Medicare & Medicaid Services (CMS), announced the approval of five additional States to participate in the Center for Medicaid and the Children's Health Insurance Programs' (CHIP) [Medicaid Reentry Section 1115 Demonstration Opportunity](#). [The Medicaid Reentry Section 1115 Demonstration Opportunity](#) allows authorized States to cover certain services not otherwise covered in Medicaid and CHIP, including coverage of substance use disorder (SUD) treatment, up to 90 days before an eligible Medicaid or CHIP beneficiary's expected release from incarceration. In addition, approved States are permitted to help connect the person to community-based Medicaid and CHIP providers up to 90 days prior to release to ensure a seamless transition and continuity in coverage for incarcerated people upon their return to the community.

The five States approved today include: Illinois, Kentucky, Oregon, Utah, and Vermont. They join California, Massachusetts, Montana, and Washington as States authorized to participate in the Medicaid Reentry Section 1115 Demonstration Opportunity.

CMS' press release announcing the approval of the five new States can be found [here](#).

## NIH RFI on the Helping to End Addiction Long-term (HEAL) Initiative



The National Institutes of Health (NIH) recently released a [Request for Information \(RFI\) on the Helping to End Addiction Long-term \(HEAL\) Initiative](#). This RFI solicits input on future research priorities of the HEAL Initiative regarding scientific research to address the public health challenges related to opioid use disorder (OUD), overdose, and chronic pain. The HEAL Initiative is designed to support research on evidence-based solutions to the overdose crisis, including strategies to address OUD, overdose reversal medications, and pain management. Specifically, NIH is seeking input on:

1. “Research on opioid use disorder and overdose not already captured in [NIDA’s strategic plan](#),
2. research aimed at addressing unmet needs for pain management, and
3. cross-cutting research at the intersection of opioid use disorder/overdose and pain management.”

NIH is soliciting input from all interested parties, including the scientific community, the private sector, community-based organizations, healthcare providers, professional societies, advocacy groups, patient communities, people with living/lived experience, caregivers, funding agencies, and other interested members of the public.

Additional details, including areas of interest desired for the RFI, can be found [here](#).

Responses must be submitted by July 31, 2024.

## SAMHSA Funding Opportunity: Community-Based Maternal Behavioral Health Services Program

The Substance Abuse and Mental Health Services Administration (SAMHSA) announced a new funding opportunity for the [Community-Based Maternal Behavioral Health Services Program](#). This program aims to improve access to evidence-based, timely, and culturally relevant maternal mental health and substance use disorder (SUD) services by bolstering community referral pathways to ensure seamless transitions in care for pregnant people in the perinatal and postpartum periods who are at risk or have a mental health or SUD. Specifically, recipients must collaborate with pregnancy and post-partum healthcare organizations, refer people in need of mental health and SUD care to providers, and provide short-term mental health and SUD services to those unable to access care.

SAMHSA will provide up to 6 awards of up to \$500,000 per year, per award, for up to 5 years for total program funding of \$15,000,000. Applications are due August 26, 2024.

Additional details, including eligibility and how to apply, can be found in the program’s Notice of Funding Opportunity (NOFO) [here](#).

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## Research Roundup

### CDC Study Identifies Gaps in “Cascade of Care” for People with Opioid Use Disorder

The Centers for Disease Control and Prevention (CDC) published a new study in *Morbidity and Mortality Weekly Report (MMWR)* on [Treatment for Opioid Use Disorder: Population Estimates - United States, 2022](#). The study

applied data from the 2022 National Survey on Drug Use and Health (NSDUH) to the [“cascade of care” framework](#) to generate population estimates for the percentage of the adult U.S. population who need opioid use disorder (OUD) treatment, received OUD treatment, and, specifically, received medications for opioid use disorder (MOUD). The report found that a significant percentage of U.S. adults who needed OUD treatment in 2022 either did not perceive that they needed it (43%) or received treatment that did not include MOUD (30%). Other key points from the report include:

- “In 2022, an estimated 3.7% (9,367,000) of U.S. adults needed OUD treatment. Among these, 55.2% (5,167,000) received OUD treatment, and 25.1% (2,353,000) received medications for OUD.
- The percentage of adults aged 18-25 years who needed OUD treatment (2.2%) was lower than that among older age groups.
- The percentage of adults needing OUD treatment who received treatment was lower among those aged  $\geq 50$  years (44.9%) than among younger age groups.
- The percentage of adults who received treatment was higher among non-Hispanic White adults (60.3%) than among non-Hispanic Black or African American (43.8%) or Hispanic or Latino (45.7%) adults and among adults with severe OUD (53.0%) than among those with mild or moderate OUD (20.5%).”

The report provides additional estimates based on other characteristics, including poverty level, employment status, education level, and illicit drug use, among others.

The authors call for enhanced communication emphasizing the effectiveness of MOUD and for healthcare professionals and providers to offer or facilitate access to MOUD.



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## Webinars to Watch

### **NIDA Webinar: Hepatitis C in the Context of Drug Use; State-of-the-Art Diagnostic and Pathogenic Efforts**

The National Institute on Drug Abuse (NIDA) is hosting a webinar as part of the National Institutes of Health's (NIH) and the Coalition for Global Hepatitis Elimination's series *Moving from Hepatitis Discovery to Elimination: NIH Research Advancing Hepatitis Elimination* on [Hepatitis C in the Context of Drug Use; State-of-the-Art Diagnostic and Pathogenic Efforts](#). This no-cost webinar is on July 22, at 12:00 pm ET. The webinar will feature opening remarks from Dr. Nora Volkow, Director, NIDA, as well as presentations from several professors who will cover the expansion of Point-of-Use Acute HIV infection platforms for Hepatitis C Virus, the long-term effects of intravenous drug use on HIV and HCV, and the effect of HCV treatment on immune activation and liver fibrosis in women.

Registration is required.

### **SAMHSA Webinar: Clinical Community Partnerships to Support Behavioral Health for Service Members, Veterans, and their Families**



The Substance Abuse and Mental Health Services Administration (SAMHSA) is hosting a webinar on [Clinical Community Partnerships to Support Behavioral Health for Service Members, Veterans, and their Families](#). This no-cost webinar is on July 30, at 1:00 pm ET. The webinar will feature speakers from SAMHSA's Center for Mental Health Services (CMHS) and community-based organizations that work around access to Veterans' mental health and substance use disorder (SUD) services who will discuss strategies to develop clinical community partnerships to support the mental health and SUD needs of Service Members, Veterans, and their Families (SMVF). Specifically, the webinar will review the role of clinical community partnerships in improving SMVF's access to emergency suicide care and care coordination among the Department of Veterans Affairs (VA) and Certified Community Behavioral Health Clinics (CCBHCs). Learning objectives include:

- “Explore how CCBHCs bridge gaps in access to behavioral healthcare in

- communities, providing comprehensive support to SMVF and other populations
- Learn how the VA's COMPACT Act enhances access for Veterans to receive emergency suicide care within community-based settings
  - Understand how you can synergize efforts with Veteran-serving partners in your community to strengthen service delivery for Service Members and their Families”

Registration is required.

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