

February 27, 2025



**DC Update: FDA Approves First-in-Class Non-Opioid Treatment for Moderate to Severe Acute Pain, New CoE-PHI Resources, HHS OIG Report: Continuation of OUD Treatment Among Medicare Enrollees, and More.**



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## Meet the Member

### **Teresa Steinmetz, SSA for Minnesota, Assistant Commissioner of the Minnesota Department of Human Services**

Teresa Steinmetz serves as Assistant Commissioner of the Minnesota Department of Human Services, a role she assumed in September 2024. She also serves as the Single State Agency (SSA) Director for Minnesota.



Ms. Steinmetz previously served as Director of the Bureau of Prevention, Treatment, and Recovery in the Wisconsin Department of Health Services, where she oversaw the direction of the State's mental health and substance use system along the continuum of care, including prevention, crisis intervention, treatment, and peer and recovery support services.

In her role as Assistant Commissioner, Ms. Steinmetz oversees policies and programs that serve individuals with mental health and substance use disorder (SUD) across Minnesota. Her administration works to integrate mental health and SUD services into physical health care, promote successful treatment, and serve people close to their communities, families,

and other supports.

Ms. Steinmetz received her bachelor's in psychology and Spanish from the University of Wisconsin LaCrosse, and her master's degree in community mental health from Southern New Hampshire University.

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## NASADAD News

### NASADAD Resource Spotlight: Members-Only Transition Portal

The Public Policy Department has developed a webpage on the NASADAD Members-Only site dedicated to sharing information and resources related to presidential transition. The [Transition Portal](#) is designed to keep the membership up to date on the latest actions of the Trump-Vance Administration and the 119th Congress during the transition process, as well as NASADAD actions and policy positions related to transition. Specifically, the Transition Portal includes the following categories of resources:

- **NASADAD Transition Resources**
  - Resources developed by the NASADAD Public Policy Department on key policy priorities and the impact of other transition-related developments on State Directors and the Association as a whole.
- **Trump-Vance Administration and 119th Congress Actions**
  - Resources released by the Trump-Vance Administration and 119th Congress related to transition, including memos, executive orders, and other guidance.
- **Trade Press**
  - Articles from mainstream news outlets on various issues related to transition.

If you experience any difficulties with accessing the NASADAD Members-Only site, please reach out to Daniel Diana, Public Policy Associate, at [ddiana@nasadad.org](mailto:ddiana@nasadad.org).

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## Around the Agencies

### FDA Approves First-in-Class Non-Opioid Treatment for Moderate to Severe Acute Pain

On January 30, the Food and Drug Administration (FDA) approved Journavx (suzetrigine) 50 milligram oral tablets, a first-in-class non-opioid analgesic, for treatment of moderate to severe acute pain in adults. Journavx reduces pain by targeting a pain-signaling pathway involving sodium channels in the peripheral nervous system before pain signals reach the brain. FDA has also recently updated its [clinical practice guidelines](#) for the management of acute pain conditions to support the safe use of these products.

FDA's press release on the approval of Journavx can be found [here](#).

### HRSA Announces Tom J. Engels' Return as HRSA Administrator

The Health Resources and Services Administration (HRSA) recently announced the return of Tom J. Engels as HRSA Administrator. Engels previously led the agency from 2019 to 2021 under the first Trump Administration. During that time, he also served on the White House COVID-19 task force and helped to implement the Provider Relief Fund. Prior to first joining HRSA, Engels was Deputy Secretary of the Wisconsin Department of Health Services from 2015 to 2019. He most recently served as Sergeant-at-Arms at the Wisconsin Senate.



As Administrator, Engels will be tasked with overseeing HRSA's efforts to expand access to quality health care through grants to State and local government and providers of health profession trainings, including substance use disorder (SUD) services and mental health

and SUD workforce training. Under his leadership, HRSA is expected to work to expand the number and quality of health centers in underserved and rural communities, grow the mental health and SUD workforce in high-need areas, and improve services for vulnerable populations. Engels is a native of Wisconsin and holds a Bachelor of Arts degree from the University of Wisconsin-Madison.

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

### CoE-PHI Resource: Notice to Accompany Disclosures of Information

The Substance and Mental Health Services Administration (SAMHSA)-funded Center of Excellence for Protected Health Information (CoE-PHI) released a resource on [Notice to Accompany Disclosures of Information](#). This resource is designed to review requirements related to disclosures of information for patients' substance use treatment records under 42 CFR Part 2 between organizations that provide substance use treatment services and other healthcare organizations and professionals. Key points include:

- "Changes to Part 2 took effect in April 2024, with a compliance date of February 16, 2026. The Final Rule updated 42 CFR Part 2 to align with HIPAA (the Health Insurance Portability and Accountability Act).
- One of these changes requires new language in the notice that accompanies disclosure of Part 2-protected records with patient's written consent.
- There are two versions of the notice: the standard notice and a short, abbreviated notice."

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

### CoE-PHI Resource: Criminal Court Orders Authorizing Disclosure of Part 2 Records



The Substance and Mental Health Services Administration (SAMHSA)-funded Center of Excellence for Protected Health Information (CoE-PHI) recently released an updated resource on [Criminal Courts Orders Authorizing Disclosure of Part 2 Records](#). This resource is intended for providers and administrators of substance use treatment services and seeks to assist them with determining what patient information is protected from court orders and other requests under 42 CFR Part 2 protections for substance use treatment records and, specifically, what constitutes a Part 2 compliant court order. Key points include:

- "Under 42 CFR Part 2 (Part 2), records are subject to more stringent privacy protections than those that apply to Protected Health Information (PHI) under the HIPAA.
- A general court order, subpoena, warrant, or official request for records is not sufficient to allow the disclosure of records protected under Part 2. However, a court may issue a special order authorizing the use or disclosure of Part 2 records to investigate or prosecute a patient if the court determines, among other factors, that the crime is "extremely serious."

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

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## Research Roundup

### HHS OIG Report: Not All Medicare Enrollees Are Continuing Treatment for Opioid Use Disorder

The Office of Inspector General (OIG) of the Department of Health and Human Services (HHS) recently published a report on [Not All Medicare Enrollees Are Continuing Treatment for Opioid Use Disorder](#). The report evaluated Medicare enrollees who started treatment with buprenorphine for opioid use disorder (OUD) in office-based settings in 2021 or 2022 against Centers for Medicare & Medicaid (CMS) quality measures for continuity of care for OUD treatment to determine the extent to which Medicare enrollees in traditional Medicare and Medicare Advantage continue treatment with buprenorphine. Both the enrollees who

started treatment with buprenorphine for the first time and those who restarted treatment with buprenorphine after a gap in treatment were considered. The enrollees who received buprenorphine continuously for at least six months were considered to have continued treatment. Findings include:

- “About 40 percent of Medicare enrollees who started treatment with buprenorphine continued; fewer enrollees who continued treatment died compared to those who did not continue treatment.
- Just one-third of enrollees who started buprenorphine received at least one behavioral therapy service; those who did not receive any of these services were less likely to continue treatment.
- Few enrollees received services billed to Medicare under payments aimed, in part, at helping enrollees stay in treatment.”

OIG’s recommendations for CMS include:

1. “Educate Medicare providers about Medicare services that help enrollees continue treatment for opioid use disorder;
2. Educate Medicare enrollees about Medicare services that help enrollees continue treatment for opioid use disorder;
3. Assess and make changes, as appropriate, to the new bundled payment codes for office-based treatment to ensure they meet provider and enrollee needs; and
4. Inform providers of emergency department services about the Medicare payment for the initiation of medication for the treatment of opioid use disorder and connecting patients to ongoing care.”

Report highlights can be downloaded [here](#).

The report can be downloaded in full, [here](#).

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## Webinars to Watch

### Northeast and Caribbean PTTCs Webinar: Bringing it Back to the Fundamentals: Protecting Youth from Alcohol and Other Drug Use



The Northeast and Caribbean Prevention Technology Transfer Centers (PTTC) are hosting a webinar on [\*Bringing it Back to the Fundamentals: Protecting Youth From Alcohol and Other Drug Use\*](#). This no-cost webinar is on March 19, at 1:00 pm ET. The webinar will explore the fundamentals of prevention, including reviewing skills and principles that contribute to positive prevention outcomes and key aspects of the Strategic Prevention Framework (SPF). Learning objectives include:

- “Describe at least three fundamental skills that are important for prevention practitioners to learn
- Identify community partners and sectors to involve in prevention activities to maximize success
- List key tasks and processes in an evidence-informed prevention planning process (Strategic Prevention Framework)”

[Registration](#) is required.

### CoE-TFR Webinar: The Power of Incentives: Leveraging a Contingency Management Approach to Address Tobacco Use for Individuals with Mental Health and Substance Use Challenges

The Substance Abuse and Mental Health Services Administration (SAMHSA) funded National Center of Excellence for Tobacco-Free Recovery (CoE-TFR) is hosting a webinar on [\*The Power of Incentives: Contingency Management Approach to Address Tobacco Use for Individuals with Mental Health and Substance Use Challenges\*](#). This no-cost webinar is on March 20, at 2:00 PM ET. The webinar will review the evidence base for

contingency management (CM) as a cost-effective intervention improving mental health and substance use outcomes, as well as offer strategies to apply CM to address tobacco use in mental health and substance use disorder (SUD) treatment settings. Learning objectives include:

- “Describe the efficacy of Contingency Management (CM) in behavioral health and substance use treatment settings
- Review how CM can be used to address tobacco use among individuals with behavioral health conditions
- Review potential funding mechanisms and treatment considerations for implementing CM to address tobacco use among people with behavioral health conditions in inpatient, outpatient, and residential settings”

Registration is required.

NASADAD | 1919 Pennsylvania Avenue NW Suite M 250 | Washington, DC 20006 US

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