Final FY 2019 appropriations, SUPPORT Act, and more

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Capitol Hill & White House Happenings

**President signs FY 2019 HHS Appropriations bill**

Last week the President signed into law the FY 2019 appropriations bill for the Departments of Labor, Health & Human Services (HHS), and Education. The bill funds several of NASADAD’s priority programs within HHS, including the Substance Abuse and Mental Health Services Administration. NASADAD created an overview of final FY 2019 funding levels for our priority programs. Some of the highlights include:

**SAMHSA:**
- $1.858 billion for the Substance Abuse Prevention and Treatment (SAPT) Block Grant (level compared to FY2018)
- $1.5 billion for the State Opioid Response (SOR) grant program (+$500 million)
- $458 million for the Center for Substance Abuse Treatment (CSAT) (+$55 million)
  - $89 million for the Medication-Assisted Treatment for Prescription Drug and Opioid Addiction program (+$5 million)
  - $29 million for the Pregnant & Postpartum Women program (level)
  - $205 million for the Center for Substance Abuse Prevention (CSAP) (-$42 million)
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**Congress passes SUPPORT for Patients and Communities Act**

On Wednesday, October 4th, the Senate passed legislation to address the opioid crisis, the SUPPORT for Patients and Communities Act (H.R. 6), with a vote of 98-1. The House passed the bill last week with a vote of 393-8.

Some of the provisions in the bill include:
- Reauthorizing grants to States to address the opioid crisis (previously authorized in the 21st Century Cures Act of 2016), and adding to the grant program a 5% set-aside for Indian tribes, as well as up to a 15% set-aside for States and Tribes with the highest age-adjusted rate of drug overdose deaths based on CDC data. The bill authorizes $500 million for each of FY 2019 - FY 2021.
- Establishing a grant program for emergency rooms to create a protocol to support individuals who have survived an opioid overdose, including having onsite peer recovery coaches.
- Creating a grant program to establish at least 10 Comprehensive Opioid Recovery Centers (CORCs) throughout the U.S.
- Developing and disseminating best
$119 million for the Strategic Prevention Framework-Partnerships for Success program (level)

NIH:
- $525 million for the National Institute on Alcohol Abuse and Alcoholism (NIAAA) (+$16 million)
- $1.4 billion for the National Institute on Drug Abuse (NIDA) (+$36 million)

CDC:
- $648 million for Injury Prevention and Control (level)
  - $475 million for Opioid Prescription Drug Overdose (PDO) (level)

HRSA:
- $1.625 billion for Community Health Centers (level)

Student loan repayment for SUD treatment professionals in mental health professional shortage areas or counties that have been hardest hit by drug overdoses.

Reauthorizing the Office of National Drug Control Policy (ONDCP), as well as the Drug-Free Communities (DFC) and High-Intensity Drug Trafficking Areas (HIDTA) programs.


Temporarily (FY 2019-FY 2023) repealing the IMD exclusion, allowing State Medicaid programs to receive federal reimbursement for up to 30 total days of care in an IMD during a 12-month period for eligible individuals with a substance use disorder.

News from the States

Eight-year low in prescription opioid overdose deaths in Ohio
A recent report from the Ohio Department of Health (ODH) highlights that prescription opioid-related overdose deaths have reached an eight-year low and heroin-related overdose deaths are at a four-year low. Fentanyl is now driving Ohio’s unintentional overdose deaths, which climbed to 4,854 in 2017. The report also revealed that the number of overdose deaths declined during the second half of 2017 by 23 percent. In a press release, Director of the Ohio Department of Mental Health and Addiction Services and NASADAD member, Dr. Mark Hurst said, “The good news is Ohio is seeing significant progress in reducing the number of prescription opioids available for abuse. “This progress is significant because prescription opioid abuse is frequently a gateway to heroin and fentanyl use.”

Vermont’s "Over The Dose" campaign educates the public about the risks associated with misusing prescription opioids
Over The Dose, a campaign funded by and developed in collaboration with the Vermont Department of Health, aims to educate Vermonters about the potential risks of using opioids not as prescribed. Over The Dose is focused on building the audience’s knowledge in a logical sequence, based on their current knowledge to ensure they have the background necessary to process and act upon new information. The latest Over The Dose video shows the dangers of mixing opioids with alcohol, illustrates how the two interact in the body, and explains the heightened risk and consequences that can come from using prescription opioids with alcohol. The NASADAD member in VT is Cindy Thomas.

In the News

Urban Institute publishes brief on Using Pay for Success Principles to Better Understand and Address the Opioid Crisis
The Urban Institute recently published a brief titled, "Rethinking the Opioid Crisis: Using Seven Pay for Success Principles to Better Understand and Address the Crisis." Pay for success (PFS) is described as, "an innovative financing mechanism in which a third party provides the capital to implement an evidence-based program. If the program successfully meets or surpasses its outcome targets (as verified by a rigorous evaluation), the government will repay investors, with a potential positive return." The aim of this brief is to offer a framework that decision-makers can use to accelerate progress in overcoming policy challenges related to the opioid crisis and improve new or existing efforts to address the problem.

Around the Agencies
SAMHSA partners with NCHS to make Restricted-use NSDUH data available
The Substance Abuse and Mental Health Services Administration (SAMHSA) has partnered with the National Center for Health Statistics (NCHS) to host restricted-use National Survey on Drug Use and Health (NSDUH) data at their Federal Statistical Research Data Centers (RDCs). RDCs are secure facilities that provide access to a range of restricted-use data for statistical purposes. SAMHSA is the most recent federal partner to work with NCHS in making NSDUH restricted-use data available to approved researchers at RDC sites.

Task Force on Research Specific to Pregnant Women and Lactating Women submits report to Congress
The Task Force on Research Specific to Pregnant Women and Lactating Women, led by the NIH Eunice Kennedy Shriver National Institute of Child Health and Human Development, was established by the 21st Century Cures Act of 2016, and was charged with providing advice and guidance to the Secretary of Health and Human Services (HHS) on activities related to identifying and addressing gaps in knowledge and research on safe and effective therapies for pregnant women and lactating women. In addition to advising the Secretary, the Task Force was charged with preparing and submitting to the Secretary and Congress a report, which was released last month. Some of the recommendations included in the report include:

- Designing research studies to include pregnant women and nursing mothers, unless there is scientific justification not to
- Expanding the workforce of clinicians and researchers with expertise in obstetric and lactation pharmacology and therapeutics
- Removing regulatory barriers to pregnant women’s and nursing mothers’ participation in research

Issues related to substance use, including opioid use in pregnant women and lactating women, are considered in the report.