March 1, 2019

Capitol Hill Happenings

Mark Stringer (SSA, MO) testifies before Senate L-HHS Appropriations Committee
On February 28th, Mark Stringer (SSA, MO), Director of the Missouri Department of Mental Health and Chair of NASADAD’s Public Policy Committee, testified before the Senate Appropriations Committee on Labor, Health and Human Services (HHS), Education, and Related Agencies. The hearing was titled, “Review of the Opioid Epidemic in America.” The Subcommittee, led by Chairman Roy Blunt (R-MO) and Ranking Member Patty Murray (D-WA), oversees federal funding for the Departments of Labor, HHS, and Education, including NASADAD’s priority programs within the Substance Abuse and Mental Health Services Administration (SAMHSA).

In addition to Senators Blunt and Murray, other Senators in attendance included Patrick Leahy (D-VT), Lamar Alexander (R-TN), Richard Durbin (D-IL), Shelley Moore Capito (R-WV), Jeanne Shaheen (D-NH), Cindy Hyde-Smith (R-MS), Marco Rubio (R-FL), Joe Manchin (D-WV), Chris Murphy (D-CT), and Jeff Merkley (D-OR).

In addition to Mr. Stringer, witnesses were:
- Dr. Charissa Fotinos, Deputy Chief Medical Officer, Washington State Health Care Authority
- Ms. Beth Tanzman, Executive Director, Vermont Blueprint for Health, Department of Vermont Health Access
- Dr. Karen Cropsey, Psy.D., Conatser Turner Endowed Professor Of Psychiatry, University of Alabama at Birmingham
- Dr. James Berry, DO, Associate Professor And Vice Chair, Director of Addiction Services, Department of Behavioral Medicine and Psychiatry, West Virginia University
- Dr. Daisy Pierce, PhD, Executive Director, Navigating Recovery of the Lakes Region

During the hearing, Director Stringer highlighted the positive impact that the State Targeted Response (STR) and State Opioid Response (SOR) grants are having on prevention, treatment, and recovery services in Missouri. Mr. Stringer also offered four recommendations to the Subcommittee: 1) while these recent grant dollars have been critical in saving lives, Missouri is facing an uphill battle and we need more funding; 2) over time, we should transition from...
opioid-specific resources to investing funds in the Substance Abuse Prevention and Treatment (SAPT) Block Grant; 3) federal efforts to address substance use disorders should work through the State alcohol and drug agencies; and 4) Congress should maintain robust support for the SAPT Block Grant.

The recording and other hearing materials will be accessible here.

House Passes Bipartisan Poison Control Bill to Help Combat Opioid Epidemic

Earlier this week the House of Representatives passed the Poison Center Network Enhancement Act of 2019 (H.R. 501). The bill, introduced by Reps. Eliot Engel (D-NY), Susan Brooks (R-IN), Jaime Herrera Beutler (R-WA), and Diana DeGette (D-CO), reauthorizes the national network of Poison Control Centers, which offer free, confidential, 24/7 medical advice. These programs often serve as the primary resource for poisoning information and help reduce emergency room visits through in-home treatment. The legislation now moves to the Senate for a vote.

News from NASADAD

NASADAD releases updated Prevention Set-Aside Fact Sheet

NASADAD has released an updated version of our fact sheet on the Substance Abuse Prevention and Treatment (SAPT) Block Grant’s Prevention Set-Aside. The SAPT Block Grant is funded at $1.858 billion in FY 2019, and at least 20% of that ($371 million) must be spent on primary prevention services. The prevention set-aside represents the single largest source of funding in each State’s prevention system, comprising 68 percent of the primary substance use prevention funding in States, U.S. territories, and Washington, D.C. In terms of overall substance use disorder prevention funding managed by State alcohol and drug authorities, in:

- 6 States, the set-aside makes up 100 percent;
- 14 States, the set-aside makes up 75-99 percent;
- 15 States, the set-aside makes up 50-74 percent;
- 14 States, the set-aside makes up 25-49 percent; and
- 2 States, the set-aside makes up 24 percent or less.

The fact sheet reviews the scope of substance use disorders in the U.S. among adults and youth, and highlights the positive impact of prevention efforts for youth, especially with regard to alcohol, prescription opioid, and ecstasy use.

The document outlines specific categories of primary prevention, and offers examples for each one: information dissemination, education, alternatives, problem identification, community-based process, and environmental strategies.

Finally, the fact sheet notes that both State and federal funding for primary prevention has remained stagnant over recent years. Despite ongoing increases in opioid overdose deaths, total primary prevention expenditures managed by State alcohol and drug agencies have not changed significantly in recent history. We note that States need funding dedicated not only to treatment and recovery services but also for primary prevention in order to stop substance use before it starts.

NASADAD releases updated overview of “Role of State Alcohol and Drug Agency Directors”

NASADAD has updated our overview of the role of State alcohol and drug agency directors. The overview describes who NASADAD’s members are, and outlines some of the State directors’ primary functions, including:

- Managing the Substance Abuse Prevention and Treatment (SAPT) Block Grant;
- Managing opioid-specific grants to States, including the State Targeted Response (STR) and State Opioid Response (SOR) grants;
- Developing and implementing annual plans for service delivery;
- Collecting and reporting on data;
- Promoting use of State-established

National Prevention Network (NPN) Call for Presentations

The 2019 National Prevention Network (NPN) Conference will be held August 27-29 in Chicago, IL. The purpose of the conference is to highlight 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 call for presentations is now open for the conference, with a deadline of April 12th. Highlighted topics for this year’s conference include:

- Evidence-based Programs and
News from the States

NY OASAS launches "Know the Facts" campaign
The New York State Office of Alcoholism and Substance Abuse Services (OASAS) led by NASADAD Board Member Arlene González-Sánchez, recently announced the launch of the "Know the Facts" campaign. This campaign will dispel myths, provide facts, and raise awareness about addiction services in New York State, and will help direct people to addiction services and help. In a press release, Commissioner González-Sánchez stated, "There are still misconceptions about addiction, which can be dangerous for people who are in need of care. This campaign will help people learn the facts that they need to know when it comes to addiction, while at the same time helping direct them to the help they need to fight this disease."

As described in the press release, the "Know the Facts" campaign will address facts related to topics that include the availability of treatment in New York, insurance coverage and paying for treatment, and the support that is available for people in recovery. The campaign highlights that 23 million people are living in recovery, and there is hope for people who are suffering from addiction. The campaign will run statewide in English and Spanish, through March 25th.

Around the Agencies

CMS releases new bulletin on Medicaid Strategies for non-opioid pain management
Over the last several years, the Centers for Medicare and Medicaid Services (CMS) have issued several bulletins outlining State approaches and effective practices for addressing the opioid crisis within Medicaid. Recently CMS issued a new bulletin, "Medicaid Strategies for Non-Opioid Pharmacologic and Non-Pharmacologic Chronic Pain Management." The bulletin expands upon earlier guidance by providing information to States looking for ways to promote non-opioid options for chronic pain management in their Medicaid programs.