News from the States

**Louisiana launches Center for Prevention Resources**

At the Annual Louisiana Substance Abuse Counselors and Trainers (LaSACT) Conference held in Baton Rouge last month, the Louisiana Office of Behavioral Health announced its partnership with Southern University and A&M College's Nelson Mandela College of Government and Social Science in the Department of Psychology to open the Louisiana Center for Prevention Resources (LCPR). The LCPR aims to help jump start the community with resources, training, and technical assistance to address conditions related to substance use disorders from a prevention perspective. With funding from the State Targeted Response (STR) grant, "the Center, which will focus on evidence-based prevention practices for professionals to learn and implement targeted prevention strategies, especially for the opioid epidemic, is definitely an asset," remarked Janice Petersen, Ph.D., OBH Deputy Assistant Secretary and Principal Investigator for the STR grant. Dr. Petersen serves on NASADAD's Board of Directors.

**Around the Agencies**

**SAMHSA releases 2018 NSDUH data**

On August 20th, the Substance Abuse and Mental Health Services Administration (SAMHSA) released its latest data from the [2018 National Survey on Drug Use and Health (NSDUH)](https://www.samhsa.gov). NSDUH provides estimates of substance use, mental disorders, co-occurring substance use and mental disorders, and need for and receipt of treatment in the U.S. According to NSDUH, in 2018, approximately 165 million people aged 12 or older used a substance in the past month, amounting to 60%
of the population. This includes 140 million million people who drank alcohol, 59 million people who used tobacco, and 32 million people who used an illicit drug.

Heroin use disorder impacted 0.2 percent of the population, not significantly different from recent years, and 0.6 percent of the population had a pain reliever use disorder, similar to the percentages in 2016 and 2017, but lower than in 2015. In 2018, 0.4 percent of the population had a methamphetamine use disorder, which was higher than the percentage in 2016, but similar to the percentages in 2015 and 2017. Over 5 percent of the population had an alcohol use disorder in 2018, which was lower than the percentages in 2002 to 2015, but similar to the percentages in 2016 and 2017.

In 2018, an estimated 21.2 million (7.8%) people aged 12 or older needed substance use treatment, similar to the percentages from 2015-2017. Approximately 3.7 million people received any treatment in the past year, and 2.4 million received specialty treatment.

Access all of the NSDUH results here, and watch the Assistant Secretary for Mental Health and Substance Use, Dr. Elinore McCance-Katz, presenting the 2018 data here.

Figure 1. Past Month Substance Use among People Aged 12 or Older: 2018

Graph retrieved from SAMHSA's Key Substance Use and Mental Health Indicators in the United States: Results from the 2018 National Survey on Drug Use and Health

CDC finds that naloxone was dispensed once per every 69 high-dose opioid prescriptions

The Centers for Disease Control and Prevention (CDC) recently released a report on naloxone dispensing at retail pharmacies from 2012-2018. Naloxone dispensing increased from 2012 to 2018. However, in 2018, only one naloxone prescription was dispensed for every 69 high-dose opioid prescriptions. In 2018, naloxone dispensing rates were higher for female recipients (187.7 per 100,000) than for male recipients (151.6) and higher for those aged 60–64 years (362.8) than for any other age group. Additionally, the largest percentage of dispensed naloxone prescriptions were to persons with commercial insurance (51.1%), followed by Medicare (35.9%), Medicaid (10.7%), and self-pay (2.4%). The lowest rates of naloxone dispensing were observed in the most rural counties.

AHRQ releases protocol for prevention, diagnosis, and management of opioids in older adults; seeks unpublished scientific information on the topic

The Agency for Healthcare Research and Quality (AHRQ) recently released a research protocol focused on the prevention, diagnosis, and management of opioids, opioid misuse, and opioid use disorder in older adults. This protocol outlines AHRQ’s plan to develop a conceptual framework and an evidence map of the current evidence base related to opioid use in older adults. Ultimately, the
framework and evidence map will allow federal agencies to design an evidence-based research agenda to address opioid use among older adults. AHRQ's ultimate goals are to accelerate practice change and improve outcomes in older adults.

As part of its plan to gather evidence related to opioid use in older adults, AHRQ is seeking unpublished scientific information relevant to the topic. Relevant information can be submitted through the Supplemental Evidence and Data for Systematic Reviews (SEADS) portal. The deadline for submissions is September 17th. Materials submitted cannot be confidential as they may be made public.

**GAO releases report on U.S. imports of e-cigarettes**
Per the request of Senator Ron Wyden (D-OR), the Government Accountability Office (GAO) recently released a report on e-cigarettes imported into the United States from 2016 through 2018. Specifically, the GAO studied the customs value of e-cigarette devices, parts, and liquid imported into the U.S. in 2016 through 2018. The customs value was $2.4 billion, increasing 300 percent from 2016 to 2018. Although e-cigarettes were imported from 65 countries during this period, imports from China accounted for 97 percent of the customs value of all e-cigarette imports.

**In the News**

**Attorneys General send letter to congressional leaders regarding 42 CFR Part 2, DATA waiver, and IMD exclusion**
The National Association of Attorneys General (NAAG) recently sent a letter to House and Senate leaders urging them to align current patient confidentiality rules contained in 42 CFR Part 2 with the Health Insurance Portability and Accountability Act (HIPAA). NAAG also notes support for eliminating the Drug Addiction Treatment Act (DATA) waiver that is currently required of providers who treat patients with buprenorphine for opioid addiction. Finally, NAAG calls for full repeal of the Medicaid Institutions for Mental Diseases (IMD) exclusion, stating that it "detrimentally limit[s] States' ability to provide the full continuum of clinically appropriate care for Medicaid enrollees with a substance use disorder." A total of 39 Attorneys General signed on to the letter.

**Upcoming Events**

**Police, Treatment, and Community Collaborative (PTACC) 2nd Annual Conference on Deflection and Pre-Arrest Diversion November 10-13 in Florida**
The Police, Treatment, and Community Collaborative (PTACC) 2nd Annual National Conference on Deflection and Pre-Arrest Diversion will be held November 10th – 13th in Ponte Verda, Florida. This conference is the second of two annual conferences devoted to the development and support of pre-arrest deflection efforts across the U.S., and building the treatment and funding capacity to sustain them. The first year featured workforce development for 30 or more jurisdictions from around the nation led by members of the Police, Treatment, and Community (PTACC) Collaborative as well as peers from the fields of law enforcement, addiction and mental health, social services, research, and community advocacy. The goal for the conference is to guide teams as they plan and develop pre-arrest deflection programs to implement in their communities/jurisdictions.