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D.C. Update: Senate releases draft FY 2020 L-HHS appropriations bill, CMS announces demonstration project to increase substance use provider capacity, and more



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### Capitol Hill Happenings Senate releases draft L-HHS appropriations bill for FY 2020

On September 18th, the Senate Appropriations Committee released its draft FY 2020 (Oct. 1, 2019 - Sept. 30, 2020) Labor, Health & Human Services, Education, and Related Agencies (L-HHS) appropriations [bill](#). The bill and accompanying report include the following proposed funding levels for certain programs within the Substance Abuse and Mental Health Services Administration (SAMHSA):



- **State Opioid Response Grant:** \$1.5 billion (level compared to FY 2019)
- **Substance Abuse Prevention and Treatment (SAPT) Block Grant:** \$1.858 billion (level compared to FY 2019)
- **Center for Substance Abuse Treatment (CSAT) within the Substance Abuse and Mental Health Services Administration (SAMHSA):** \$474,677,000 (+\$16 million), including:
  - **Medication-Assisted Treatment for Prescription Drug and Opioid Addiction (MAT-PDOA):** \$89 million (level)
  - **Drug Courts:** \$70 million (level)
  - **Pregnant & Postpartum Women:** \$29.9 million (level)
  - **Treatment, Recovery, and Workforce Support:** \$4 million (+\$4

- million; new program)
- **Emergency Department Alternatives to Opioids:** \$4 million (+\$4 million; new program)
- **Center for Substance Abuse Prevention within SAMHSA:** \$205,469,000 (level), including:
  - **Strategic Prevention Framework-Partnerships for Success:** \$119.484 million (level)

NASADAD has developed a preliminary [overview of select programs within HHS](#), including SAMHSA, the National Institute on Alcohol Abuse and Alcoholism (NIAAA), National Institute on Drug Abuse (NIDA), Centers for Disease Control and Prevention (CDC), Health Resources and Services Administration (HRSA), and the Administration for Children and Families (ACF). The overview includes report language from the Senate Appropriations Committee, which offers more detailed guidance to agencies than is provided in the appropriations bill itself.

The House and Senate must reach a deal on final FY 2020 appropriations before the start of the new fiscal year on October 1<sup>st</sup>. If not, the two chambers will have to agree on a continuing resolution as a stopgap measure to avoid a government shutdown.

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## Around the Agencies

### [SAMHSA releases advisory on physical and cognitive disabilities in treatment settings](#)

The Substance Abuse and Mental Health Services Administration (SAMHSA) recently released an [advisory](#) highlighting how mental and substance use disorder (SUD) treatment programs can better serve individuals with physical and cognitive disabilities. The advisory notes that mental health and SUD treatment providers may underestimate the barriers of accessibility to their program or mistake some cognitive disabilities with nonadherence due to the “invisible” nature of these disabilities. The advisory urges providers to develop best practices for individuals who present with physical and cognitive disabilities, and also provides recommendations that are required, may be required, or may exceed federal, state, or local disability rights laws.

### [SAMHSA releases prevention resources and videos on suicide prevention](#)

The Substance Abuse and Mental Health Services Administration (SAMHSA) [released](#) new suicide prevention resources, including three videos. Resources include the National Suicide Prevention Lifeline with a phone number and live chat option, information on recognizing warning signs in others, and resources specific to at-risk populations, including Alaskan Natives and American Indians.

### [DEA proposes reduction in opioid manufacturing and increases in marijuana production for 2020](#)

The Drug Enforcement Administration (DEA) issued a [press release](#) proposing to reduce the opioid production quota, with a simultaneous increase in marijuana quotas. The DEA would reduce the amount of five Schedule II opioid controlled substances including fentanyl, hydrocodone, hydromorphone, oxycodone, and morphine for a reduction in manufacturing quotas by 53% since 2016. The Administration is also proposing an increase to marijuana production, triple the amount produced in 2018, due to increases in approved research involving marijuana. According to Acting Administrator Uttam Dhillon, “[the] DEA takes seriously its obligations to both protect the public from illicit drug trafficking and ensure adequate supplies to meet the legitimate needs of patients and researchers for these substances.”

### [CMS announces demonstration project to increase substance use provider capacity](#)

The Centers for Medicare & Medicaid Services (CMS), in collaboration with the

Substance Abuse and Mental Health Services Administration (SAMHSA) and the Agency for Healthcare Research and Quality (AHRQ), [announced](#) a demonstration project required under Section 1003 of the Substance Use Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities (SUPPORT) Act. The 54-month demonstration project is intended to increase the treatment capacity of Medicaid providers to deliver substance use disorder treatment and recovery services. The project includes planning grants awarded to 15 States for 18 months and 36-month demonstrations with up to 5 States that received planning grants. The purpose of the planning grants include: 1) an ongoing assessment of the substance use disorder treatment needs of the State; 2) recruitment, training, and technical assistance for Medicaid providers that offer substance use disorder treatment or recovery services; and 3) improved reimbursement for and expansion of the number or treatment capacity of Medicaid providers.

CMS awarded \$48.5 million in grants to State Medicaid agencies in Alabama, Connecticut, Delaware, District of Columbia, Illinois, Indiana, Kentucky, Maine, Michigan, Nevada, New Mexico, Rhode Island, Virginia, Washington, and West Virginia.

### **CMS request for information on OUD prevention and access to MAT**

The Centers for Medicare and Medicaid Services (CMS) recently released a [Request for Information \(RFI\) for the Development of a CMS Action Plan to Prevent Opioid Addiction and Enhance Access to Medication-Assisted Treatment](#).

As described in the RFI, Section 6032 of the [SUPPORT Act](#) directs the HHS Secretary, in collaboration with the Department of Health and Human Services (HHS) Pain Management Best Practices Inter-Agency Task Force (PMTF), to develop an Action Plan to “prevent opioids addictions and enhance access to medication-assisted treatment (MAT).” The Action Plan will include a review of Medicare and Medicaid payment and coverage policies for MAT and the treatment of acute and chronic pain, emphasizing treatment that minimizes the risk of opioid misuse and opioid use disorders (OUD). This Request for Information (RFI) seeks feedback from the public regarding ways for CMS to address the opioid crisis through the Action Plan. Comments should be submitted electronically to [PainandSUDTreatment@cms.hhs.gov](mailto:PainandSUDTreatment@cms.hhs.gov) by 5 p.m. EDT on October 11, 2019.

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### **In the News**

#### **ASAM CEO, Penny Mills, announces retirement**

The American Society of Addiction Medicine (ASAM) announced that its CEO, Penny Mills, will be retiring in June 2020. As described in a [press release](#), Ms. Mills contributed to significant growth within the organization, including doubling membership from 2010 to 2019 and increasing the number of ASAM staff members. Ms. Mills also increased the reach of the organization’s educational and quality improvement activities with the release of new and updated guidelines, tools, and resources. ASAM President, Dr. Paul Earley, [stated](#) that, “Her leadership set ASAM on a rapidly expanding growth trajectory through key programs and services for its members. More importantly, her legacy will ensure millions of Americans who suffer from addiction will have a better chance at remission and recovery.”



#### **USA Today article discusses polysubstance misuse and the importance of flexible funding**

USA Today recently published an [article](#) on the growing prevalence of polysubstance use disorders and the importance of federal funding for substances other than opioids. The article notes that State health officials have been urging the federal government to consider flexibility with funding

dedicated to the opioid crisis. The article also mentions Mark Stringer, the director of Missouri's Department of Mental Health, who serves as Immediate Past President on NASADAD's Board of Directors as well as Chair of NASADAD's Public Policy Committee. The authors note that Mr. Stringer "called on a Senate Appropriations subcommittee to start transitioning from opioid-only grants to states' existing Substance Abuse Prevention and Treatment block grants to meet changing demands."

### **News article examines the effects of the opioid crisis on Cherokee children**

An [article](#) in Stateline examines the ramifications of the opioid crisis on the Cherokee Nation and its children. According to the article and data from the Centers for Disease Control and Prevention (CDC), Native Americans had higher rates of opioid overdose deaths than any other racial or ethnic group from 2003 to 2013. Nikki Baker-Limore, the previous head of the Cherokee child welfare agency, stated that more than 1,700 Cherokee children are now in State or tribal custody and at least 40% of those cases are due to opioids. Of those children, nearly three-quarters have been placed in non-native homes because there are not enough tribal members to take them in. The article notes that research indicates that Native children fare better when they remain in a tribal family.

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### **Upcoming Events**

#### **Webinar on links between opioids and suicide**

The Mental Health Technology Transfer Center (MHTTC) Network is holding a webinar on the links between opioids and suicide. According to the website, the presentation will identify key links between overdose and suicide; describe types of suicidal thoughts and behaviors and how health professionals can address them; and describe crisis management and suicide prevention models. The webinar will be held on September 25<sup>th</sup> from 11:00 am-12:00 pm EDT. Registration is available [here](#).

#### **Webinar on State marijuana policies and the role of prevention**

The New England Prevention Technology Transfer Center (PTTC) Network is holding a webinar that will provide an overview of marijuana policies in the New England States and discuss how prevention efforts fit into the conversation. According to the announcement, the training will examine the importance of policy at the federal, State, municipal, and organizational levels and the unintended consequences of policies that are not informed by the science of marijuana, addiction, and public health. Prevention tools that are already available will also be discussed as States begin to see commercial marijuana sales grow. The webinar will be held September 25<sup>th</sup> from 11:30 am-12:00 pm EDT and registration is available [here](#).

#### **SAMHSA Recovery Month Webinars**

The Substance Abuse and Mental Health Services Administration (SAMHSA) announced their 2019 National Recovery Month [webinar series](#). Recovery Month, now in its 30<sup>th</sup> year, is a national observance held every September to educate Americans on substance use. The following webinars will be held throughout the month:

- September 20<sup>th</sup>: Strong Community, Strong Recovery - this webinar will focus on the use of community resources to maintain recovery
  - September 25<sup>th</sup>: Recovery Is... - Individuals living in recovery who now work in the field will share their personal recovery stories and what they are doing to give back
  - September 27<sup>th</sup>: Celebrating Recovery Across the Nation - organizations hosting Recovery Month and other educational events discuss their efforts to raise awareness around substance use disorders
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## Research Roundup

### AHRQ releases study comparing the effectiveness of opioids to nonopioid analgesics

The Agency for Healthcare Research and Quality (AHRQ) recently published a [study](#) examining the comparative effectiveness of opioids and nonopioid analgesics provided by emergency medical services in the prehospital setting. The systematic review found that nonsteroidal anti-inflammatory drugs (NSAIDs), acetaminophen, and ketamine provide similar pain relief to opioids. Results also indicated that both NSAIDs and acetaminophen may cause fewer overall side effects, including less drowsiness and dizziness, compared to opioids.

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