

COLORADO

USE OF STR/SOR GRANT FUNDS TO ADDRESS THE OPIOID CRISIS

Background on opioid-specific grants to States

The Substance Abuse and Mental Health Services Administration (SAMHSA) administers the State Targeted Response to the Opioid Crisis (STR) and State Opioid Response (SOR) grant programs. These grants aim to address the opioid crisis by increasing access to treatment, reducing unmet treatment need, and reducing opioid overdose related deaths through the provision of prevention, treatment, and recovery activities for opioid use disorder (OUD) in the States. States received a total of \$500 million for each of FY 2017 and FY 2018 through STR. Additionally, in FY 2018, States received an additional \$1 billion in new funding through the SOR grants. In FY 2019, States received \$1.5 billion through SOR. Eligible applicants for both STR and SOR are the State alcohol and drug agencies.

Allocations for Colorado

Colorado received \$7.8 million through STR for each of FY 2017 and 2018, and \$15.1 million through SOR in FY 2018. In FY 2019, Colorado received a total of \$22.9 million through SOR.

Overview of Colorado's efforts to address the opioid crisis

Colorado's primary objectives have been to expand access to care and to reduce deaths due to opioid overdose. The State alcohol and drug agency—the Office of Behavioral Health (OBH)—has taken a multi-faceted approach to expanding access to care. Access expansion efforts include:

- Reimbursing primary care practices for the training time required for physicians and advanced practice providers to obtain their Drug Addiction Treatment Act (DATA) 2000 waiver to prescribe buprenorphine;
- Managed care expanded networks (7 providers to 24) to contract with all opioid treatment providers (OTPs) in the State to help uninsured citizens access medication-assisted treatment (MAT);
- Pilot program where two emergency departments are buprenorphine induction sites;
- Five county jail day-of-release induction programs under STR, and now 17 county jails offer MAT continuation, induction and/or day of release services using SOR funding;
- MAT within the State's Department of Corrections and the Division of Youth Services; and
- Paying for residential care for high system utilizers and homeless individuals starting MAT.

Prevention efforts: stopping opioid misuse before it starts

Some examples of prevention initiatives supported by STR and SOR are:

- Expansion of Colorado Hospital Association's **Alternative to Opioid Prescribing (ALTO)** efforts to include training for family medicine, emergency department, orthopedic, and other specialty physician teams; and
- Two emergency department induction sites that have incorporated screening, brief intervention, and referral to treatment (**SBIRT**) as a part of their treatment protocol.

OBH works closely with the State coalition, the **Colorado Consortium for Prescription Drug Abuse Prevention**, with members of the OBH opioid team sitting on each of the Consortium's nine work groups. Additionally, OBH funds positions at the Consortium, including the Strategic Planning Coordinator for OBH grants, and three Community Liaisons who work to build and mature local coalitions around the State.

Increasing access to treatment

Colorado's OBH is using STR/SOR funds to expand access to treatment in a variety of ways:

- STR/SOR pays for MAT in OTPs for the working poor (uninsured individuals under 300% of the federal poverty line who do not qualify for Medicaid), and CO has expanded contracts with OTPs to now include all OTPs in the State;
- Increased DATA 2000 waived physicians and advanced practice providers;
- Expanded day-of-release from jail induction;
- Emergency department inductions;
- Residential care for homeless and high-system utilizers to facilitate induction;
- "OpiRescue" phone app expanded to include a MAT treatment locator;
- Creating six mobile treatment units to serve rural populations impacted by opioid use disorders (OUDs); OpiRescue.com
- "Lift the Label," a public awareness campaign that strives to remove damaging labels and stigmas that prevent those with opioid addiction from seeking effective treatment. The campaign has more than 196 million impressions. LiftTheLabel.org
- New educational curricula for medical professionals, mental health professionals, and law enforcement that educates professionals on how MAT works in the brain, the benefits of MAT, and how to reduce stigma in their line of work.
- OBH has a certified Community Reinforcement and Family Training (CRAFT) trainer who trains professionals on the evidence-based family model for families of individuals with OUD.
 - The CRAFT trainer has trained 190 new group facilitators to support skill building. CRAFT trains prevention specialists, peer recovery coaches, case managers and other clinical staff in building skills to support loved ones' engagement in treatment. Those providers have delivered the group to 266 individuals to date.

Serving special populations

- Jail and prison-based inductions are focused on those individuals entering or leaving incarceration.
- Residential services target high utilizers and persons experiencing homelessness.
- Colorado has contracted with federally recognized tribes, and with SOR, OBH will be working with urban native populations, both for treatment and prevention.

Collaborating with local entities

- Colorado has engaged alternative court systems, local sheriff and jail personnel, law enforcement, mental health centers, and FQHCs in training and implementation efforts to provide MAT and/or to connect individuals with OUD who are in their purview with MAT and other treatment services.

The impact of STR/SOR on access to treatment

- With STR/SOR funding, 1902 uninsured and under-insured individuals have been provided MAT;
- 98 individuals have been inducted in the emergency department through ED pilot program;
- 181 high system utilizers and homeless individuals have been supported with residential care during their induction;
- 446 individuals have been inducted onto MAT while incarcerated or on day-of-release;
- 1781 individuals have been assisted by Colorado's crisis hotline to find treatment services in the community.
- Specialized peer navigators have assisted 448 individuals to get into MAT and other treatment services.
- 530 physicians and advanced practice providers have been trained to provide MAT.

Overdose reversal efforts: saving lives

OBH has distributed nearly 25,000 naloxone kits to high-risk individuals, harm reduction and treatment agencies and law enforcement. Over 1,000 overdose reversals with these kits have been reported to date.

Supporting recovery

Colorado is sponsoring a research report on recovery support services, including a formal needs assessment and strategic planning process. The outcome of these efforts will be presented to the CO State legislature in January 2020.

OBH is supporting several recovery events to engage these important partners in our work moving forward. SOR is also supporting the **expansion of Oxford House peer-run recovery residences**. All Oxford Houses operating in Colorado are MAT-friendly. Additionally, SOR will be funding three pilots to implement the Individual Placement and Support model of supported employment within OTPs in Colorado.

An important connectedness piece has been the **hiring and deployment of peer navigators**. These are individuals with lived experience in recovery who assist individuals in accessing treatment, recovery support services and other emergency needs (such as emergency food and housing supplied by other State entities). Currently, with STR funds, OBH employs 7.5 FTE peer navigator positions; with SOR that number is being expanded to 24 grant-funded peer navigators, as well as a supervisor/trainer for these individuals.

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