

FLORIDA

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 Florida

Florida's Office of Substance Abuse and Mental Health within the Department of Children and Families (DCF) received \$27 million through STR for each of FY 2017 and 2018, and \$49 million through SOR in FY 2018. In FY 2019, Florida received a total of \$76 million through SOR.

Overview of Florida's efforts to address the opioid crisis

Florida's STR and SOR grant projects are designed to reduce opioid-related deaths by increasing access to medication-assisted treatment (MAT) and by increasing access to the opioid overdose reversal agent known as naloxone, and associated overdose prevention, recognition, and response training.

These grants also support hospital bridge programs that aim to initiate buprenorphine treatment with individuals who are hospitalized for medical problems due to opioid misuse, using peer specialists to facilitate engagement and linkage to partial agonist maintenance treatment. DCF implemented Botvin LifeSkills Training under STR, and an expanded menu of evidence-based primary prevention programs under SOR, to prevent opioid misuse. Behavioral Health Consultants are deployed to assist Child

Protective Investigators and case managers with assessment and engagement, and Recovery Quality Improvement Specialists are conducting quality assurance visits with providers and managing activities related to the development of recovery-oriented systems of care. Providers are being equipped with the American Society of Addiction Medicine's (ASAM) computerized structured interview and clinical decision support tools, and training and technical assistance on medication-assisted treatment is being provided to a variety of stakeholders, including potential prescribers, court staff, and correctional staff. Training on a variety of MAT-related topics was provided to 3,441 individuals under the STR grant. Florida's projects are also increasing recovery housing using the Oxford House model as well as establishing certified Recovery Community Organizations.

Collaborating with local entities

The Department of Children and Families (DCF) collaborates with six regional DCF offices and seven regional Managing Entities (ME). These partners collaborate with local provider networks, emergency departments, Recovery Community Organizations, and other local stakeholders. Many of Florida counties have specific opioid taskforces and regional Department and ME staff are members. To ensure funding to ME's is proportional to the impact of the opioid epidemic in each respective region, DCF applied a funding methodology similar to that of SAMHSA. Allocations were based on the number of adults ages 18 and older that used heroin in the past year, and the number of deaths caused by at least one opioid. This method has aided Florida in deploying resources to areas with the greatest need, while also supporting communities in managing emerging opioid problems throughout the State.

Primary prevention: stopping opioid misuse before it starts

Under the STR grant, funds were used to provide **Botvin LifeSkills Training** to 3,414 middle and high schools students in six rural counties. Findings from an evaluation of pre- and post-test surveys found statistically significant improvements in anti-drug attitudes, knowledge, drug refusal skills, and relaxation skills were observed at several sites. The evaluation report concluded that LST was somewhat effective overall, but results varied considerably across different providers and schools.

Under the SOR grant, all seven regional Managing Entities receive funds which they may use to contract with entities (including coalitions) for the provision of **evidence-based prevention services** from an expanded menu of allowable options. The Department authorizes the use of SOR funds for the following prevention programs: Caring School Community, Guiding Good Choices, InShape Prevention Plus Wellness, PAX Good Behavior Game, Positive Action, Project SUCCESS, Project Towards No Drug Abuse, SPORT Prevention Plus Wellness, Teen Intervene, Botvin LifeSkills Training, and the Strengthening Families Program (for Parents and Youth 10-14) if done in combination with Botvin Life Skills Training.

The SOR grant also allows States to implement “evidence-based strategic messaging” as part of community-based prevention efforts. SAMHSA’s Center for Application of Prevention Technologies (CAPT) recently summarized evaluation findings from a selection of media campaigns designed to prevent prescription drug misuse and identified only one that documented changes in SOR-related outcomes: “Use Only as Directed,” Utah’s prescription pain medication prevention program. SOR prevention funds may be used for media campaigns based on the Use Only as Directed initiative. One provider that is implementing the **“Use Only as Directed” media campaign** has reached 129,582 youth and 438,844 adults.

To date, 13 SOR-funded prevention providers have initiated one of the approved **curriculum-based programs**, most commonly Botvin LifeSkills Training, but also InShape Prevention Plus Wellness, SPORT Prevention Plus Wellness, Project SUCCESS, Teen Intervene, Project Towards No Drug Abuse, Strengthening Families, and Guiding Good Choices. Approximately 9,479 youth have been served by these programs to date.

Encouraging safe prescribing practices is another way to prevent opioid misuse and opioid use disorders. In partnership with the Florida Alliance for Health Communities, the Department also uses SOR funds for in-person and online trainings, which offer CME credits, on evidence-based practices for preventing and treating opioid misuse, including **safe prescribing practices**. Training is provided to a range of disciplines in the healthcare workforce, with a focus primary care doctors, physician assistants, nurse practitioners, and dentists.

Increasing access to treatment

- STR/SOR funds are used to provide medication-assisted treatment services to indigent, uninsured, or underinsured individuals with opioid use disorders. Individuals are given preference in admission to services in the following order: (1) Pregnant women; (2) Injection drug users; (3) Caretakers involved with child welfare; (4) Caretakers of children ages 0-5; and (5) Individuals re-entering the community from incarceration.
- In addition to paying for FDA-approved medications that treat opioid use disorders (methadone, buprenorphine, and naltrexone), these funds also cover the following services: aftercare, assessment, case management, crisis support, day care, day treatment, incidental expenses (excluding direct payments to participants), in-home and on-site, medical services, outpatient, outreach (to identify and link individuals with opioid use disorders to MAT providers), recovery support, supported employment, supportive housing/living, detoxification, and residential. If detoxification is provided and it is not a medically necessary precursor to methadone or buprenorphine induction, perhaps due to poly-drug use (particularly alcohol or benzodiazepines), then it must be accompanied by injectable extended-release naltrexone to protect such individuals from opioid overdose.

- Over 13,000 individuals have received treatment services through the STR grant, including 4,642 served with methadone, 3,568 served with buprenorphine, and 946 served with naltrexone.
- Before STR, there were only 65 authorized buprenorphine prescribers in Florida's publicly-funded provider networks. Now there are 163 buprenorphine prescribers, which constitutes a 150% increase in prescriber capacity.
- The number of naltrexone prescribers in the Department's network quadrupled over the course of STR, increasing from only 11 prescribers up to 46.
- • The rate of non-fatal overdoses among individuals served decreases by 82% between the first month in treatment and the sixth month in treatment.
- The percent of drug tests with negative results was 65% among those in care for 28 days, compared to 92% among those enrolled for 180 days or more.
- Among those enrolled during the initial 28 days, 28% were employed, compared to 60% among those enrolled for 180 days or more.
- The percent of individuals in stable housing is 85% among those enrolled during the initial 28 days, compared to 96% among those enrolled for 180 days or more.

Overdose reversal efforts: saving lives

The Department's Overdose Prevention Program provides overdose recognition and response training and naloxone kits to community-based organizations that provide services to people who use drugs, people who are in recovery, and their loved ones. Organizations enrolled in the program are required to hand out take-home naloxone kits directly to people at risk of experiencing an opioid overdose and to their loved ones that may witness an overdose. There are currently 96 organizations enrolled in the program, including substance use and mental health treatment providers, homeless service organizations, harm reduction programs, recovery organizations, hospital emergency departments, federally qualified health centers, and other community-based organizations. The STR grant helped the Department conduct 49 overdose prevention/response training events that educated 1,643 individuals.

Approximately 56,595 naloxone kits were purchased and distributed across the entire STR project period with STR funds, including 5,000 kits provided to local law enforcement agencies. An estimated **2,647 overdose reversals** have been reported. The SOR Grant will continue the purchase of naloxone for community-based distribution, with an estimated \$3.5 million allocated for naloxone kits each year of the grant.

During the first half of 2018, Florida saw a 7% decrease in overall opioid-caused deaths compared to the second half of 2017. Hopefully with ongoing MAT and overdose prevention service supported by SOR funds, this trend will continue, and the full 2018 Medical Examiners' data will reflect an overall decrease in opioid deaths.

Supporting recovery

Recovery support services provided by certified specialists are part of the comprehensive array of treatment services available to individuals served under STR/SOR. Over 2,100 individuals received recovery support services through STR.

SOR funds are being used to implement **Recovery Community Organizations (RCOs)** with training and technical assistance and start-up funds to help them develop into organizations that are accredited by the Association of Recovery Community Organizations and that have mission statements, strategic plans, independent governance by-laws, Department-approved standards of care, and a sustainable infrastructure. RCOs work closely with community treatment providers and other stakeholders to provide outreach services, information and referral, wellness recovery centers, harm reduction services, and recovery support services. RCOs use the recovery capital assessment scale as a component of the recovery planning process for individuals receiving services. SOR seed funds are used to support the South Florida Wellness Network and Rebel Recovery Florida, two peer-operated providers, to become certified RCOs. SOR funds are also allocated to the Peer Support Coalition of Florida to help develop 4 additional RCOs in the other regions of the State. Faces and Voices, the lead agency for Recovery Community Organization (RCO) development, is responsible for training and technical assistance to help establish and implement recovery community organizations and recovery support services throughout the State. Faces and Voices has begun assessments of existing and emerging RCO's and recovery support services in each region across the State.

Sixty new Oxford Houses will be established throughout the State using SOR funds. Oxford Houses provide housing for individuals in recovery from substance use disorders that is structured, peer-supported, and provides as much time a person needs to relearn values and responsible behavior. Oxford Houses require start-up funds, but over time household expenses are paid by the residents. Prior to receiving SOR funding, there was only one Oxford House in Florida. To date, ten houses are now chartered throughout the State; five for men; four for women; and one for women with children, for a total of 72 beds. Overall, Florida Oxford Houses have maintained an occupancy rate of 71%. Of eleven departures, only three were due to relapse. Oxford House reports an abstinence rate of 95.2%.

SOR funds also support the **expansion of the Department of Veterans Affairs 1-844-MyFLVet Support Line** to include Care Coordination activities provided by veteran peers in 2-1-1 agencies across the State, including a mobile application for military personnel.

The Crisis Center of Tampa Bay manages the support line 24 hours, 7 days a week. Through SOR funding, the agency has expanded its existing information and referral services, which includes referrals, crisis intervention, and peer-to-peer care coordination services to connect Florida veterans to addiction services. To date, the support line has received over 3,600 calls from veterans and family members which resulted in over 9,000 referrals. There were 493 veterans actively linked to care coordination services.

For more information, contact Robert Morrison, Executive Director, at rmorrison@nasadad.org, or Shalini Wickramatilake-Templeman, Federal Affairs Manager, at swickramatilake@nasadad.org.