

HAWAII

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 Hawaii

Hawaii's Alcohol and Drug Abuse Division within the Department of Health received \$2 million through STR for each of FY 2017 and 2018, and \$4 million through SOR in FY 2018. In FY 2019, Hawaii received a total of \$6 million through SOR.

Overview of Hawaii's efforts to address the opioid crisis

With the initial award of STR funding, Hawaii developed the Hawaii State Opioid Plan through the *Hawaii Opioid Initiative, A Statewide Response (HOI)*. This plan formalized State, county, city, for-profit, and non-profit stakeholders into seven focus areas:

- 1) Access to treatment;
- 2) Prescriber education and pain management practices;
- 3) Data-informed decision making;
- 4) Prevention and public education;
- 5) Pharmacy-based interventions;
- 6) Support for law enforcement and first responders; and
- 7) Screening, Brief Intervention and Treatment and Referral to Treatment (SBIRT).

Objectives for each focus area were created by workgroups with three primary themes: system improvement through collaborative response; a balanced public health/public safety approach; and healthcare integration. The first HOI plan (HOI 1.0) provided a coordinated roadmap for Hawaii's targeted response and develop a coordinated policy framework for policy development and implementation that has been widely successful

in bringing stakeholders together and coordinating efforts. The plan is treated as a living document intended to be reviewed and revised at least annually. The first annual review led to the release of the second plan (HOI 2.0) which indicated which goals had been achieved, assessed goals that were still in progress and identified new objectives. The plan is available here: https://health.hawaii.gov/substance-abuse/files/2019/01/The-Hawaii-Opioid-Initiative_2.pdf.

Preventing opioid misuse and overdose deaths

The State is using STR and SOR funds to implement a variety of prevention strategies.

- One such strategy is the collaborative activities with High Intensity Drug Trafficking Areas (HIDTA). As part of the HOI, HIDTA has been instrumental in working the Attorney General, DOH, Narcotics Enforcement Division (NED), and statewide police departments implementing 27 year-round medication drop boxes throughout the State, collecting over 400 lbs. of prescription medication since July 2018.
- Pharmacies are now a point of contact where education, brief screening and potential referral to brief treatment can occur, adding a new component to the prevention and treatment continuum of care.
- While prevention efforts have a broad impact on the general public, there are some special populations of focus, including the homeless, OUD patients, MAT patients, families of OUD patients, educators, coaches, pharmacists, and alternative pain practitioners.
- “Let’s Talk About Opioids” trifold being developed for educators by Hawaii Student Health Survey Committee (DOE/DOH/UH) as one of three focus areas to present Youth Risk Behavior Surveillance System (YRBSS) results.
- Hawaii opioid website (www.hawaiiopioid.org):
 - Website is up and running, each stakeholder group will have a section where they can go for information pertaining to their field.
 - Hawaii Health and Harm Reduction Center managing website with designated staff.
 - Working on an interactive map that will identify pharmacies that carry naloxone.
 - Adding more take-back boxes to the map as well. Currently, all available take-back boxes are listed on website.
 - Social media campaign to raise awareness.
 - Exploring translation services for website and information sheets.
- Increased registration and use of PDMP statewide by prescribing physicians. Since May 2018, with the collaboration of the HOI stakeholders, monthly activity in the Hawaii PDMP has increased from 61,000 to 109,000. Between July to December 2018, PDMP use by dentists rose 1940%, use by physicians rose 395%, and use by

prescriber delegates rose 405%. Hawaii PDMP data also indicates that **from 2015 to 2018, the State experienced a 21% decrease in monthly number (actual and predicted) of opioid prescriptions**, from 69,000 per month in 2015 to 54,500 per month in 2018.

Increasing access to treatment

Hawaii is expanding access to treatment in a variety of ways:

- **Expansion of SUD provider network referrals:** Through revision of contractual processes, the State facilitates a coordinated hand-off for treatment and recovery support services between service providers. This has resulted in increased access to SUD Continuum of Care services, specifically coordination of access to MAT.
- **Methadone take-home policy:** The State, in coordination with SAMHSA and the Narcotics Enforcement Division, provided revised policies for the network of SUD treatment providers that related to inclusion and access to methadone take-home doses in residential treatment. Previously this was a barrier to residential treatment for many clients prescribed take-home doses of MAT. The revised policy provided clarification of procedures for take-home medication and storage of it by providers for clients.
- **Identifying Drug Addiction Treatment Act (DATA) waived physicians:** Identification of DATA waived physicians with the objective of integrating them into the Statewide Continuum of Care and network of treatment providers.
- **Implementation of the Hawaii Coordinated Addiction Resource Entry System (CARES):** This implementation will create a network of service providers and a managing entity to assure treatment on demand.
- **Integrated care:** Revised contracting practices to expand opportunities for treatment network providers to offer MAT or coordinate for integrated care.

These actions have resulted in increased access to treatment for 572 individuals diagnosed with OUD. Increased access includes improved care coordination amongst 32 contracted service providers, improved coordination for client access to MAT, transportation for OUD clients, improved outreach coordination, stabilization of clients while awaiting long term service arrangements, improved protocols for storage of take-home MAT.

Overdose reversal efforts: saving lives

Through mutual efforts to pass legislature to provide pharmacists authority to prescribe and dispense naloxone, **pharmacists statewide are identifying procedures to provide naloxone with prescribed opioid medication.**

The Hawaii Syringe Exchange Program works with a network of outreach service providers to **provide intervention, screening, and referral to treatment along with education and harm reduction.**

Activities targeted toward prescriber education have included implementing an **online library of educational training topics that include registration and utilization of the PDMP, integration of SBIRT practice, and pain management.**

The State works closely with local non-profits to **distribute naloxone and provide opioid overdose prevention training to over 500 individuals** in the State, including law enforcement, and Hawaii has recorded over 151 overdose reversals in the last year.

Supporting recovery

Of the 572 clients that are being served by STR/SOR funding, 220 of them have been transitioned to sober housing and group recovery homes for stability and recovery support services. The expanded coordination between provider agencies resulted in more comprehensive coordination to ensure recovery support services are applied effectively and efficiently to meet the needs of the clients. Recovery support services include connection to support groups, assistance with employment services, assistance with follow up to primary care needs, educational services assistance, and substance use and mental health needs.

Additional positive outcomes

Utilizing STR/SOR funding, the State has provided SUD continuum of care services for 557 unduplicated individuals diagnosed with OUD. Treatment services include residential, clinically managed residential, intensive outpatient, outpatient, care coordination, MAT to include suboxone and methadone, and recovery support services to include continuing care and sober housing. As a result of clarification of MAT storage protocols, coordination for client's transition to SUD treatment and recovery services for OUD clients were expanded to 32 treatment facilities. Of the 572 clients that are being served by STR/SOR funding, 220 of them have been transitioned to sober housing and group recovery homes for stability and recovery support services. The expanded coordination between provider agencies resulted in more comprehensive coordination to ensure recovery support services are applied effectively and efficiently to meet the needs of the clients. Recovery support services include connection to support groups, assistance with employment services, assistance with follow up to primary care needs, educational services assistance, and follow up with substance use and mental health needs.

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