

# OHIO

## 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 Ohio

Ohio received \$26 million through STR for each of FY 2017 and 2018, and \$55 million through SOR in FY 2018. In FY 2019, Ohio received a total of \$85 million through SOR.

### Overview of Ohio's efforts to address the opioid crisis

The Ohio State Opioid Response (SOR) Project is intended to:

- 1) expand prevention efforts related to naloxone distribution, provide training across systems for professionals to improve system responses to the opioid crisis, and deploy targeted awareness messaging for communities;
- 2) expand access to medication-assisted treatment (MAT) and a clinical workforce with the expertise to provide MAT and psychosocial treatment to individuals with an opioid use disorder, and
- 3) expand the use of certified peer supporters and access to recovery housing, in particular recovery housing for families; and development of employment opportunities for persons in recovery from opioid addiction.

In achieving these aims, programs and services are building upon the work already established by Ohio's STR initiative.

## Primary prevention: stopping opioid misuse before it starts

- **Drug take back:** Disseminating drug destruction bags across local networks in the community.
  - Working with local prevention coalitions across the State and disseminating drug take back bags through community networks and pharmacies. By leveraging existing Parent-Teacher Associations, senior outreach programs, and existing prevention coalitions, the distribution takes place across the community.
- **Public health prevention campaign:** Partnership with Denial, Ohio and the prevention materials developed through StartTalking and TakeChargeOhio for broad distribution.
  - The prevention campaign is targeted toward older adults for drug disposal and toward parents for communication with their children.
  - Data collected for targeted social media prevention campaign indicates just over 4,000,000 persons were reached and directed to educational materials.
- **Medical college program:** Developing pain management, Drug Addiction Treatment Act (DATA 2000) waiver training, and addiction curriculum for medical colleges in Ohio.
  - Participation from all medical colleges is slightly higher than expected.
- **Increasing screening and referral:** Providing funding for regional screening, brief intervention, and referral to treatment (SBIRT) training that targets education around screening for risks related to opioid misuse.

## Increasing access to treatment

- **Expanding telemedicine:** expanding telemedicine access in emergency departments and in jail settings through partnership with the Supreme Court of Ohio.
- **Prescriber initiatives:** offering 25 additional DATA 2000 waiver trainings that include referral to local treatment options training; providing 10 additional American Society of Addiction Medicine (ASAM) criteria trainings to assist medical providers in referring to appropriate levels of care; providing ongoing Project ECHO for prescribers in mentorship and continuing education.
- **MOMS (Maternal Opiate Medical Supports) program:** increasing the number of opioid treatment programs (OTP) and medical settings that provide the MOMS model for pregnant and parenting women, including increased access to MAT.
- **OhioSTART:** expanding the reach of the OhioSTART model to 30 counties to increase access to MAT and psychosocial support for families involved in the child welfare system.
- **Local System Supports:** providing funding to local Alcohol, Drug Addiction, and Mental Health Services (ADAMHS) boards that oversee the local treatment system to enhance access to all forms of MAT and support recovery housing and peer supporters.
- **Family Recovery:** family recovery options are a focus of SOR dollars; Ohio is ensuring access to recovery housing for families that allows all forms of MAT in addition to increasing the number of peer supporters available to families involved with the child welfare and family court systems.

## Overdose reversal efforts: saving lives

In partnership with the Ohio Department of Health, 38 additional Project DAWN (Deaths Avoided With Naloxone) sites are now operating across the State. Additional training will be provided to communities with a focus on first responders, peer supporters and family members.

## Supporting recovery

- Recovery housing for families is a focus of funding provided to the local system and currently 46 additional housing projects are underway.
- Peer support in special settings such as child welfare and the emergency department are starting up. In addition to the local system funding there are 35 projects serving special populations.

## Collaborating with local entities

SOR funding is channeled through the local ADAMHS boards, a local government entity tasked with coordinating mental health and substance use prevention, treatment, and recovery in the local community. Funding for local treatment and recovery supports, with a focus on access to all forms of MAT is currently working through the local ADAMHS boards to target locally identified needs within the communities.

## Positive outcomes

- Currently just over 1,400 persons completed the intake to local services through the programs funded through the ADAMHS board.
- Slightly more than 4,000,000 persons engaged with the social media prevention campaign. Commitments are in place and work underway at all medical colleges in Ohio to implement a curriculum that targets opioid prevention and treatment.
- Telemedicine in incarcerated settings is being offered in three jails and data from the pilot suggests that an expansion is recommended in the next several months.
- MOMS programs are engaged in training and beginning to expand services to women in their community.
- Enhancements to the Prescription Drug Monitoring Program (PDMP) in Ohio are providing better data related to problematic prescribers and strengthening prescriber training.

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