

WISCONSIN

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 Wisconsin

Wisconsin received \$7.6 million through STR for each of FY 2017 and 2018, and \$11.8 million through SOR in FY 2018. In FY 2019, Wisconsin received a total of \$18.2 million.

Overview of Wisconsin's efforts to address the opioid crisis

The Wisconsin Opioid STR and SOR projects focus on the reduction of opioid-related deaths and other adverse events, and treatment and recovery interventions within high-need Wisconsin communities through implementation of the following programs:

- Hospital, community-based, and other recovery coaches with lived addiction experience to provide outreach to persons experiencing opioid overdose or addiction
- Add, increase, and expand opioid treatment capacity and provide treatment funds for uninsured or under-insured persons and in rural, underserved, and high need areas of the State
- Develop and implement an Addiction Recovery Hotline to assist people in finding treatment

- Expand opioid prevention efforts at regional prevention centers that support local prevention coalitions across the State
- Provide access to naloxone to programs that provide outreach directly to people who are using opioids
- Provide training in evidence-based approaches for community direct service workers

Primary prevention: stopping opioid misuse before it starts

Wisconsin has a contract with the Wisconsin Alliance for Wisconsin Youth (AWY) to coordinate regional prevention centers to support and distribute targeted funding to local prevention coalitions. AWY made STR and SOR funding available to any local coalition that had adequate resources to implement specific strategies aimed at reducing the availability of and access to opioids for nonmedical purposes and to prevent the consequences of opioid misuse. Funds were intended to enhance local coalition-led efforts rather than supplanting current efforts and did not target specific populations. They were required to select strategies from an approved list of activities.

Funding was made available via an application process to all prevention coalitions. Sixty-three local coalitions were approved to provide prevention activities from a menu of strategy options. In the first year of STR funding, the following programs were implemented:

- Permanent prescription drug drop box placements
- Drug take back events
- Prescription drug deactivation units
- Coordination of naloxone training and distribution
- “Dose of Reality” prevention awareness and educational materials distribution
- Town Hall meetings and community education events

Increasing access to treatment

To increase access to treatment, Wisconsin took a two-fold approach. First, to get funding out quickly to support unmet treatment needs for the uninsured and underinsured, Wisconsin issued a Request for Applications to all counties and tribes with priority going to those identified as high-need areas of the State. This project continues to expand with SOR. Providers were required by the second year to provide at least two forms of medications for the treatment of OUD, based on the need of the individual. The high-need areas were selected based on criteria that included: opioid-related deaths, hospitalizations, ambulance runs, and the number of Medicaid

and county opioid-related treatment admissions. Pregnant women and people who inject drugs are always a priority for admission in Wisconsin's treatment programs and were also a priority for STR/SOR grant funds.

Second, Wisconsin issued Grant Funding Opportunity Announcements for treatment organizations to apply to build and implement their infrastructure to offer MAT. To date, eight organizations have been developing and expanding their capacity to offer comprehensive treatment for OUD and providers have reported using at least two forms of FDA-approved medications for the treatment of OUD, with the choice depending on the person's need and the availability of treatment in their community. Projects are being continued and expanded with SOR.

Wisconsin also established a Project ECHO to increase the number of community providers using evidence-based practices to treat OUD and funding was awarded to 2-1-1 Wisconsin, an addiction recovery helpline.

Overdose reversal efforts: saving lives

- Naloxone training and distribution through the Alliance for Wisconsin Youth
- Contract with UW-Madison to develop overdose toolkit for hospitals
- Under SOR, funding has been allocated to create a toolkit for counties and tribes on best practices for responding to an opioid overdose

Supporting recovery

- Contracted with Wisconsin Voices for Recovery to provide peer support/recovery coaching to people experiencing an opioid overdose through a network of 13 community organizations and 22 hospitals located in 17 counties
- Grant to Marshfield Clinic to equip their AmeriCorps workers with recovery coach training

Collaborating with local entities

Wisconsin partnered with the county and tribal human services agencies in over 21 high-need communities to offer opioid use disorder treatment and recovery support services. In addition, funds were made available through local coalitions to partner with their local jurisdictions to offer naloxone trainings and kit distributions across the State in 32 communities.

Positive outcomes

- 21 prescription drug drop box placements
- 39 drug take back events held
- 40 prescription drug lock boxes distributed
- 41 prescription drug deactivation units
- 50 Dose of Reality prevention and educational sets distributed
- 55 Town Hall and community education events held
- As of April 2019, 1,348 people had received direct treatment services for OUD
- 32 naloxone trainings, 6,500 naloxone kits distributed, and 1,559 overdose death reversals reported
- 912 individuals received recovery support services and 545 received peer support services
- 26 counties and 7 tribes expanded capacity to provide direct treatment services to individuals with an OUD
- Achieved an expansion of trained prescribers in year two of STR, with an additional 56 prescribers receiving their data waiver training
- Two statewide trainings focused on trauma and the opioid crisis with over 500 in attendance for each training.

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