

November 21, 2019



D.C. Update: SAMHSA releases e-cigarette prevention resources for adolescents, House & Senate pass continuing resolution to avert government shutdown, and more

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### Meet the Member

#### Linda Mahoney, Vice President for Treatment

Linda Mahoney, who serves as Vice President for Treatment on the NASADAD Board of Directors, is Rhode Island's Senior Administrator for the Division of Behavioral Health at the Rhode Island Department of Behavioral Healthcare, Developmental Disabilities & Hospitals (BHDDH). Linda has worked in the field of substance use and mental health, primarily as a clinician, since 1986. She has co-authored several published studies and is a Licensed Certified Advanced Alcohol and Drug Counselor (CAADC) and Certified Clinical Supervisor (CCS). For the last eight years, Linda has been the designated State Opioid Treatment Authority (SOTA), along with the designee to NASADAD as the representative for both the National Treatment Network (NTN) and the Opioid Treatment Network (OTN). She currently serves as President of the NTN.



Prior to her work at the State level, Linda's 25-year employment history included working as a Clinical Director of a 32-bed Substance Use Detox/residential program, the Director of a Statewide Behavioral Health Outpatient Program, and the Clinical Director of a long-term adolescent treatment program, which eventually led to becoming the Chief Executive Officer.

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### News from the States

#### New York submits Medicaid waiver to fund healthcare for incarcerated individuals

The New York Department of Health recently submitted a Section 1115

demonstration [application](#) to the Centers for Medicare and Medicaid Services (CMS) requesting Medicaid dollars to provide certain healthcare services to incarcerated individuals within 30 days of release. Substance use disorder (SUD) and mental health services are included in the application as covered services, and if the application is approved, it will be the first time Medicaid dollars are used to provide healthcare for incarcerated individuals. Once CMS receives the application there will be a 30-day public comment period.

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## Capitol Hill Happenings

### House and Senate pass continuing resolution to avert government shutdown

The House of Representatives and Senate recently passed a continuing resolution (CR) to extend temporary funding levels as the current stopgap law expires today. The President is also expected to sign the stopgap funding measure, keeping the government open through December 20<sup>th</sup>. This would give appropriators an additional month to finalize appropriations for federal programs, including NASADAD's priority programs within the Department of Health and Human Services (HHS).



### Around the Agencies FDA releases e-cigarette prevention resources for adolescents

The Food and Drug Administration (FDA), in partnership with Scholastic, has announced the development of

new e-cigarette prevention resources for middle and high school students. Tools, including lesson plans and activity sheets, will be sent to over one million teachers to aid them in educational conversations about the harms of e-cigarettes. Scholastic also created a website, [The Real Costs of Vaping](#), with resources including a parent take-home sheet, infographics, youth cessation resources, and an educational program that can be used as a substitute for suspensions.

### Surgeon General releases video on marijuana

Vice Admiral Jerome M. Adams, the United States Surgeon General, released a new [video](#) addressing commonly asked questions about marijuana use. Dr. Adams discusses the chemical composition and potency of today's marijuana, risks that are associated with using marijuana, and what parents and teachers can say to young people about marijuana. The Surgeon General also encourages individuals to visit the Office of the Surgeon General (OSG) [website](#) to learn more about marijuana.

### SAMHSA GAINS Center accepting applications for Sequential Intercept Model Workshops



The Substance Abuse and Mental Health Services Administration's (SAMHSA) GAINS (Gather, Assess, Integrate, Network, and Stimulate) Center is currently accepting applications from communities interested in Sequential Intercept Model (SIM) Mapping Workshops. The SIM Workshops are designed to bring together a multidisciplinary group of stakeholders to identify and discuss ways in which barriers between the criminal justice, substance use, and mental health systems can be reduced through the development of local strategic plans.

The first workshop will focus on identifying and treating opioid use disorders (OUD), including screening and assessment, diverting individuals out of the criminal justice system and into community-based treatment programs, expanding

medication-assisted treatment (MAT), and maintaining continuity of care through transitions in and out of custody. The second workshop will focus on responding to the needs of adults with mental and substance use disorders who are involved or at risk for involvement in the criminal justice system. Applications are due by December 20, 2019 and more information can be found [here](#).

MILLIMAN RESEARCH REPORT

### Addiction and mental health vs. physical health: Widening disparities in network use and provider reimbursement

A deeper analytical dive and updated results through 2017 for 37 million employees and dependents

Commissioned by Mental Health Treatment and Research Institute LLC, a not-for-profit subsidiary of The Bowman Family Foundation  
November 19, 2019

Steve Melik, FSA, MAAA  
Stoddard Davenport, MPH  
T.J. Gray, FSA, MAAA



 Milliman

## Research Roundup Research report finds widening disparities in network use and provider reimbursement for individuals with mental health and SUD

The actuarial firm Milliman, commissioned by The Bowman Family Foundation, recently released a [report](#) titled, "Addiction and mental health vs. physical health: Widening disparities in network use and provider reimbursement." The report is updated and expanded from a similar Milliman report published in 2017 and indicates that conditions have worsened. There are increasing disparities in out-of-network utilization rates for addiction

and mental healthcare services compared to medical and surgical services for inpatient, outpatient, and professional office-based settings. There are also increasing disparities in provider reimbursement rates between addiction and mental healthcare providers compared to primary care and specialty care providers for office-based services. The report also found increasing disparities in in substance use disorder (SUD) care specifically. Additionally, the percentage of total healthcare spending that is attributed to mental health and SUD was 5.2% in 2017 which is a decline from 2015 data. The report concludes that the disparate results could point to compliance problems with the Mental Health Parity and Addiction Equity Act (MHPAEA).

## Study finds adolescent opioid use higher in certain cities

A [study](#) recently published in the journal *Drug and Alcohol Dependence* examined local-level differences in the prevalence of adolescent heroin and prescription opioid misuse. Researchers from the Johns Hopkins Bloomberg School of Public Health used data from the Centers for Disease Control and Prevention's (CDC) Youth Risk Behavior Surveillance System (YRBSS) and evaluated 21 urban school districts. The highest estimates of heroin use were in Baltimore, MD (7.6%), Shelby County, TN (6.3%), and Duval County, FL (6.1%), whereas prescription opioid misuse was highest in Duval County, FL (18.1%), Cleveland, OH (18.0%), and Shelby County, TN (16.8%). In comparison, the national data from the CDC indicates that only 2% of U.S. high-schoolers report having used heroin at least once. Researchers noted that the results indicate that heroin and prescription opioid misuse are at much higher levels in some cities and counties.

## In the News

### Institute for Healthcare Improvement and Boston Medical Center release guide for hospitals to address opioid crisis

Boston Medical Center's Grayken Center for Addiction, led by former Director of the Office of NATIONAL Drug Control Policy (ONDCP), Michael Botticelli, along with the Institute for Healthcare Improvement, recently published a guide titled, "Effective Strategies for Hospitals Responding to the Opioid Crisis." The guide provides system-level strategies that can be implemented in hospital settings to

address the prevention and treatment of opioid use disorders (OUD). Each section includes case studies from hospitals that have successfully implemented the corresponding strategy and specific ideas for further improvement. The five system-level strategies are: identify and treat individuals with OUD at key clinical touchpoints; modify opioid prescribing practices to minimize harm and maximize benefit; train stakeholders on the risk of OUD and how to reduce stigma; identify and screen individuals at high risk of developing OUD; and reduce the harms of substance use disorder (SUD).

### **NASHP releases issue brief on State Medicaid strategies to address pregnant women with SUD**

The National Academy for State Health Policy (NASHP) recently released an [issue brief](#) titled, "State Medicaid Strategies to Promote Early Identification and Treatment of Pregnant Women with Substance Use Disorder." The organization researched Medicaid quality measures and initiatives that specifically address pregnant women who have or who are at risk of developing a substance use disorder (SUD) in every State. The issue brief identifies strategies including a statewide Medicaid opioid strategy, quality measures, financial incentives, waivers, and public-private partnerships that improve maternal and birth outcomes.

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### **Upcoming Events**

#### **Informational webinar will discuss two new technical assistance opportunities for Medicaid agencies**

The Medicaid Innovation Accelerator Program's (IAP) Substance Use Disorder program announced two new technical assistance events for Medicaid agencies. An information session will be held on Tuesday, December 17<sup>th</sup> at 2:00 p.m. EST and States will have the opportunity to learn about the two upcoming events and ask questions. The first learning opportunity will focus on medication-assisted treatment (MAT), and participating States will focus on methods to improve and expand MAT delivery services. The second opportunity focuses on substance use disorder (SUD) data dashboards, and States will work to design or update their dashboards for internal and external audiences. To register for the informational webinar click [here](#).

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### **Job Postings**

#### **North Carolina seeking Director for the Division of Mental Health, Developmental Disabilities, and Substance Abuse Services**

North Carolina is looking for an ambitious and accomplished executive to develop and drive state-wide public policy as the [Director of the Division of Mental Health, Developmental Disabilities, and Substance Abuse Services](#).

The Director of the Division of Mental Health, Developmental Disability, and Substance Abuse Services is a senior leader at DHHS. She or he reports to the Deputy Secretary for Behavioral Health & IDD and oversees a staff of 160 and annual budget of \$500 million. The director sets state-wide public policy and funds programs across the state in concert with the Division's aspirational mission: *through the lens of behavioral health and supporting those with disabilities, we aim to lead with our ideas to identify gaps, invest in promising interventions, and efficiently scale a system that promotes health and wellness for all North Carolinians across all payers, providers, and points of care.*

We are looking for a leader who can help build on the good work currently taking place and recent accomplishments, including:

- Further advancing the Department's priority of turning the tide of the opioid epidemic by making progress on our [Opioid Action Plan 2.0](#), which is producing results such as a [reduction](#) in opioid overdose deaths for the first

time in five years;

- Leveraging past work and strategic directions for behavioral health services;
- Contributing to the goal of substantial compliance for the Transitions to Community Living Initiative by supporting continued development of more community-based supports to enable individuals' success in their community;
- Meeting the behavioral health needs of North Carolinians impacted by disasters such as Hurricanes; and
- Partnering with stakeholders to pilot new programs to improve individuals' health and well-being.

Past experience for well-qualified candidates may include or relate to:

- leading managers of managers, responsible for motivating diverse teams in complex organizations, driven by a relentless hunger for achieving goals;
- working in a public-policy role with a birds-eye view of government or complex health-care operations where you've pulled all the levers of driving multi-faceted change: money, legislation, regulation, partnerships, and communications;
- being a senior portfolio manager or executive at a foundation responsible for identifying, piloting, and scaling promising interventions through multi-year funding strategies;
- building lasting and meaningful relationships with stakeholders and partners within all branches of government in the midst of complex incentives and difficult trade-offs;
- living a life with personal connection to our work, either as an individual with lived experience, a family member, or advocate -- fully embracing the core belief of those we serve: "nothing about us without us."
- sensitivity to and educated on issues of diversity, equity, and inclusion especially as it relates to mental health, developmental disabilities and substance use.