

February 20, 2020



D.C. Update: NASADAD releases updated timeline of STR and SOR funding, Caroline Halsted joins NASADAD Research Department, and more

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### Meet the Member

#### Lawrence P. Scott, Ed.S., Michigan NASADAD Member

Larry Scott currently serves as the Director for the Office of Recovery Oriented Systems of Care within the Michigan Department of Health and Human Services, and has over 30 years of experience in substance use services as a training and certification coordinator; communicable disease prevention coordinator; coordinator of HIV/AIDS Regional Training Centers; surveillance and research analyst; and State Opioid Treatment Authority (SOTA). During his tenure with the office, Mr. Scott also served as the State Project Director for eleven Substance Abuse and Mental Health Services Administration (SAMHSA) Discretionary Grant Projects and Food and Drug Administration (FDA) Contracts totaling \$100 Million. He possesses a bachelor's degree in Communication Studies from University of Massachusetts (Amherst) as well as master's and Education Specialist Degrees in Instructional Development and Design from Michigan State University.



### News from NASADAD

#### Caroline Halsted joins NASADAD as a Research Associate

Caroline Halsted will work with the opioid treatment,



youth, and women's services learning community courses at NASADAD. Caroline holds a B.S. in Community Health with a concentration in health planning and administration and a minor in Political Science from the University of Illinois at Urbana-Champaign.

As an undergraduate at the University of Illinois, Caroline completed an internship at the National Center for Health Research where she focused heavily on issues related to the opioid crisis, specifically among adolescents and transitional-aged youth. Caroline also assisted in the development and implementation of the University of Illinois' tobacco-free campus policy in coordination with the Champaign-Urbana Public Health District.

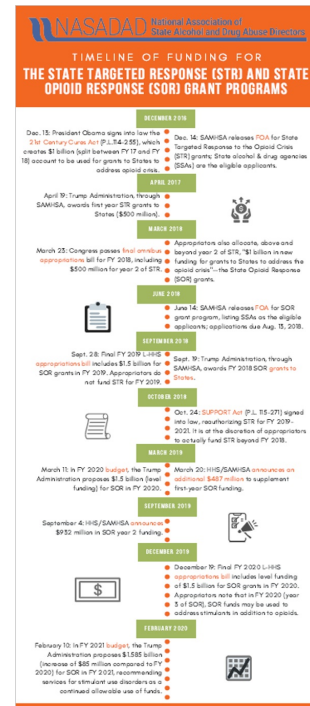
After graduation, Caroline completed the National Institute on Drug Abuse's (NIDA) summer research internship through the Northwestern Feinberg School of Medicine. At Northwestern, Caroline worked with the Center for Prevention Implementation Methodology (Ce-PIM) to develop a tool for policymakers to predict negative outcomes of substance use-related policies. Before coming to NASADAD, Caroline worked as a fellow for Governor JB Pritzker's (IL) Federal Affairs Office.

### NASADAD releases updated timeline of STR and SOR funding

NASADAD recently published an updated [timeline](#) of the State Targeted Response to the Opioid Crisis (STR) and State Opioid Response (SOR) grant programs. The timeline outlines key dates, such as: when grants were authorized; when Congress appropriated funds; when funding opportunity announcements (FOAs) were released; funding award periods for States for each of the grant programs; and more.

The updated version reflects two recent developments regarding the grant programs:

- 1) In December 2019, Congress appropriated level funding of \$1.5 billion for the SOR grant program, and noted that "stimulant abuse" would be an allowable use of SOR funds in FY 2020; and
- 2) In February 2020, the Administration released its proposed budget for FY 2021 and included a request of \$1.585 billion for SOR, an increase of \$85 million compared to FY 2020.



### Around the Agencies

#### FDA launches "Every Try Counts" campaign

The Food and Drug Administration's (FDA) Center for Tobacco Products (CTP) created "[Every Try Counts](#)", a consumer education program that targets adult smokers between the ages of 25-54 who have attempted to quit smoking but were unsuccessful. The program includes messages of non-judgmental support that highlight the health benefits of quitting and encourage smokers to "practice the quit," as many smokers will need to make multiple attempts to quit before succeeding. Campaign posters are displayed in and around convenience stores or other



retail locations that typically feature cigarette advertisements, a potential trigger for smokers who are trying to quit. In addition to the visual campaign, [EveryTryCounts.gov](http://EveryTryCounts.gov) provides quitting tools including text message programs, a mobile quitting app, trained cessation coaches that can be reached through online chat or by phone, and information on FDA-approved cessation medications.

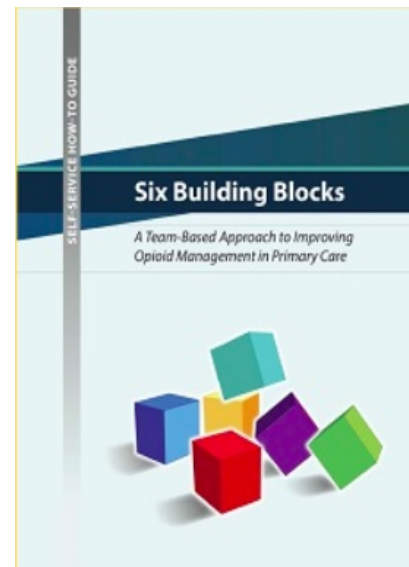
### **CDC updates data on vaping related lung injuries**

The Centers for Disease Control and Prevention (CDC) have updated their e-cigarette/vaping product use-associated lung injury (EVALI) [resource toolkit](#) to reflect the most current available data. The

toolkit provides an overview of the EVALI outbreak, CDC recommendations, key facts about e-cigarette use and vitamin E acetate, a map of reported cases across the country, an epidemiological chart of reported hospital admissions, and information on what the CDC is doing to address the issue. Additional resources targeted towards healthcare providers and health departments are also available.

### **AHRQ releases guide for providers treating chronic pain patients with opioids**

The Agency for Healthcare Research and Quality (AHRQ) recently released a [guide](#) titled, "Six Building Blocks: A Team-Based Approach to Improving Opioid Management in Primary Care." As described in the release, the guide is a step-by-step approach, designed to support clinics as they implement effective, guideline-driven care for their patients with chronic pain who are using opioid therapy. The Six Building Blocks, written for quality improvement personnel and project managers, addresses six key areas: 1. Providing leadership support; 2. Revising and aligning clinic policies, patient agreements, and workflows; 3. Tracking and monitoring the population of patients using long-term opioid therapy; 4. Engaging in planned, patient-centered visits; 5. Identifying resources for complex patients; and 6. Measuring success.



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## **Research Roundup**

### **Study examines impact of office-based opioid treatment in adolescents**

A [study](#) recently published in the *Journal of Pediatrics* examined the impact of office-based opioid treatment (OBOT) on emergency department (ED) visits and hospitalization among adolescents with opioid use disorder (OUD). Researchers identified ED and outpatient visits among adolescents, aged 10-19 years, referred for OBOT between 2006 and 2016 and created two cohorts based on whether or not the adolescent engaged in OBOT. Results of the study showed a decrease in ED and hospital visits, from 76.1% to 27.8%, in the cohort that engaged in OBOT. In comparison, 80.8% of adolescents not engaged in OBOT were admitted to EDs or hospitals for opioid-related events. Additionally, outpatient visits for the OBOT group were 10.9 times that of the non-OBOT group. Researchers concluded that office-based opioid treatment has a significant impact in decreasing ED and hospital visits for adolescents.

### **Youth exposure to medication is often the result of parents carrying loose pills**

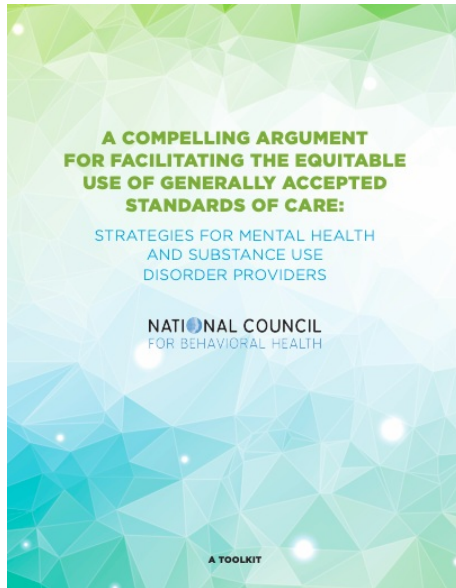
Researchers from the Centers for Disease Control and Prevention (CDC) recently published a [study](#) that examines the types of containers involved in unsupervised



medication exposures among children. Five poison control centers gathered information from individuals who called about a child that was unintentionally exposed to medication. Researchers found that over half (51.5%) of all exposures involved prescription medications that had been removed from their original packaging, the majority of which required child-resistant packaging. Additionally, 42.6% of exposures were attributed to opioids that were not in their original containers. Participants indicated that pills were removed and put into pill organizers or placed in small baggies or containers for ease of travel. Researchers concluded that efforts to reduce medication exposure among children will need to address the importance of using child-resistant packaging.

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## In the News



### National Council for Behavioral Health releases parity toolkit

The National Council for Behavioral Health released a new [toolkit](#) for providers handling potential parity violations and the resulting appeals process. As described in the toolkit, a recent court ruling in *Wit v. United Behavioral Health (UBH)* found that UBH denied patients coverage for mental health and substance use disorder (SUD) treatment due to guidelines that were more restrictive than generally accepted standards of care. The toolkit highlights this case as a justification for providers who pursue appeals for overly restrictive insurance utilization decisions. The implications of this case for mental health and SUD organizations and detailed appeal strategies are also included in the toolkit.

### NASHP releases chart tracking governors' speeches referencing substance use disorders

The National Academy for State Health Policy (NASHP) created a [chart](#) and [blog](#) to track references to health care in each governor's annual State of the State speech. As described by NASHP, governors use these speeches to highlight recent policy achievements and to promote future initiatives they want State legislators to consider. To date, 42 governors have given their speeches and all of them addressed health issues to some extent. Mental health and/or substance use disorder (SUD) issues were the most frequently mentioned, with 33 governors addressing the issue in their speeches. The governors mentioned efforts to increase access to mental health and SUD services and coordinating care across agencies. Additionally, 19 governors specifically mentioned the opioid crisis including efforts to enhance prescription drug monitoring programs and increasing access to naloxone and medication-assisted treatment (MAT).

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