D.C. Update: ONDCP announces new team and priorities, study finds continued increase in opioid affected births, and more

Meet the Member
Maria Morris-Groves, Women’s Services Coordinator for State of New York

Maria Morris-Groves serves as the Director of Adolescent, Women and Family Services in the Division of Addiction Treatment and Support at the New York State Office of Addiction Services and Supports (OASAS). Maria has provided leadership in the development of clinical practice standards for women and their children, as well as adolescents and young adults with substance use disorders, at the State and federal level. Most recently she has overseen the development of an Adolescent Endorsement for OASAS outpatient programs, based on NYS Clinical Practice Standards for Adolescents. Maria has also served as the Project Director for two Substance Abuse and Mental Health Services Administration (SAMHSA/Center for Substance Abuse Treatment (CSAT)-funded grants, focused on developing and enhancing treatment and recovery services for youth with substance use disorders and/or co-occurring mental health disorders and their families. She has also overseen NYS’ CSAT grant for the Treatment of Pregnant and Postpartum Women (PPW). Maria holds a B.A. in Social Work from Siena College and an M.S. in Education from the College of Saint Rose. She has over 25 years of experience in the field of prevention and treatment of substance use disorders, as a prevention educator, clinician, and in program and policy development.
ONDCP announces new team and priorities
Regina LaBelle, Acting Director for the White House Office of National Drug Control Policy (ONDCP), recently announced the Biden-Harris Administration’s priorities for ONDCP and several new appointments to the office. Ms. LaBelle listed several priorities including advancing the workforce through recovery-ready workplaces and expansion of the addiction workforce, confronting racial equity issues related to drug policy, supporting evidence-based prevention efforts, enhancing evidence-based harm reduction efforts, and expanding access to evidence-based treatment. The announcement noted that Mario Moreno, who previously served as ONDCP’s Press Secretary, will serve as Chief of Staff. Anne Sokolov, who most recently served as Chief of Staff to former Congressman Max Rose (D-NY), will assume the role of Associate Director of Legislative Affairs. Ms. LaBelle also announced two appointments to ONDCP with lived experience. Ariel Britt will serve as Associate Director of Outreach while Tom Hill will join as a Senior Policy Analyst. Both are in long-term recovery and have extensive backgrounds working in the addiction field. Finally, Ms. LaBelle announced that Robert Kent will serve as General Counsel. Mr. Kent is the former General Counsel for the New York State Office of Addiction Services and Supports (OASAS).

Around the Agencies

NIAAA releases new dataset on COVID-19 restrictions regarding alcohol sales
The National Institute on Alcohol Abuse and Alcoholism (NIAAA) announced the release of updated resources for the Alcohol Policy Information System (APIS). As described in the announcement, the dataset and codebook include State-level policies affecting alcohol availability during the COVID-19 emergency and complements another resource from APIS titled Digest of State Alcohol-Related Laws During the COVID-19 Emergency for On-Premise and Off-Premise Establishments. This resource describes restrictions on sales and deliveries of alcohol adopted in response to the pandemic in all 50 States and the District of Columbia.

Issue brief examines relationship between data-waiver provider patient capacity and the prescribing of buprenorphine and opioids
The Office of Behavioral Health, Disability, and Aging Policy, within the Department of Health and Human Services (HHS) Office of the Assistant Secretary for Planning and Evaluation, published an issue brief examining how increases in patient capacity among buprenorphine waivered providers related to prescribing of buprenorphine and opioids at the county-level. Researchers found that, from 2016 to 2017, 48% of counties in the sample experienced an increase in buprenorphine patient capacity. In the same time period, counties on average experienced an 8% decrease in opioid prescribing and a 9.4% increase in buprenorphine prescribing. However, the study also found a significant difference in the relationship between patient capacity and opioid prescribing between metropolitan and non-metropolitan counties. As noted in the study, this implies that the marginal effect of buprenorphine waivered providers is much smaller in non-metropolitan counties where inadequate access to opioid use disorder (OUD) treatment is a significant problem and thus small increases in patient capacity among waivered providers might not necessarily translate into expanded access.
News from the States
Maine Governor's Office releases 2021 strategic action plan to address the opioid crisis

The Maine Governor, Janet Mills', Office of Policy Innovation and the Future recently released their updated strategic action plan, including efforts to address the opioid crisis. The strategic plan for 2021 includes a goal of “reducing the negative health and economic impacts of opioid and other substance use disorders (SUD) on individuals, families, and communities in Maine and, in doing so, giving hope to all person with an SUD that recovery is not just possible, but probable.” The plan also includes several priorities such as taking decisive, evidence-based and community focused actions in response to the crisis; preventing the early use of addictive substances by youth; reducing the number of prescribed and illicitly obtained opioids; reducing the number of fatal and non-fatal overdoses; engaging active users and the recovery community in harm reduction; engaging providers, law enforcement, and the public in harm reduction; ensuring the availability of treatment; increasing the proportion of persons with SUD/OUSD who seek or are in treatment; supporting individuals in recovery; and building and supporting recovery-ready communities. NASADAD recognizes the vision and leadership of Association member Jessica Pollard, Director of the Office of Behavioral Health within the Maine Department of Health and Human Services. Special thanks to Gordon Smith, Maine’s Director of Opioid Response, for his work and sharing the strategic plan.

In the News

New article discusses the potential role of SUD workforce in COVID-19 vaccine distribution

An article recently published in Health Affairs discusses the potential role of substance use disorder (SUD) and mental health providers in improving COVID-19 vaccine distribution. As described in the article, individuals in residential facilities, or living in shared housing, are more vulnerable to COVID-19. These individuals are also more likely to have comorbid physical health conditions that place them at risk for poor COVID-19 outcomes. The article discusses the critical role that SUD and mental health providers could play in educating clients and distributing vaccines. For many individuals receiving treatment, their provider is a trusted advisor and often their only source of regular contact with the healthcare system. The article notes that providers are in a unique position to both educate clients and link them with health departments and pharmacies for access to the vaccine. The article also discusses the importance of engaging the workforce, as patients will need to return for a second dose, something that might be difficult for those with severe mental illness or SUD. Providers could serve as another support system to ensure patients receive a second dose.

Research Roundup

Study finds continued increase in opioid affected births

The Health Resources and Services Administration (HRSA), in collaboration with the Centers for Disease Control and Prevention (CDC), the Agency for Healthcare Research and Quality (AHRQ), and Vanderbilt University Medical Center, announced a new study showing a continued rise in opioid affected births. Researchers examined trends in pregnant women diagnosed with opioid use disorder (OUD) and infants born with neonatal abstinence syndrome (NAS). The
study found that mothers with opioid-related diagnoses documented at delivery increased by 131% from 2010-2017, and infants born with NAS increased by 82% over the same period. These increases were seen in nearly every State and all demographic groups with rural, white, and Medicaid populations continuing to have the highest rates. In addition, the study found plateaus in opioid diagnoses in New England States suggesting that progress is being made in the region.