

June 24, 2022



**D.C. Update: House Appropriations Markup, NIDA Screening Tool, New COSSAP Brief, Funding Opportunities for Rural Communities, and More**

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## Meet the Member

### Stephanie Starks-Lovelady, LSW, MSW, State of Ohio Women's Treatment Coordinator

Stephanie Starks-Lovelady, MSW, LSW holds a bachelors and masters degree in social work from The Ohio State University and currently serves as the State of Ohio Women's Treatment Coordinator for The Ohio Department of Mental Health and Addictions Services (OhioMHAS). In this position, Stephanie plans, develops, and coordinates statewide alcohol and drug addiction services for pregnant and postpartum women and their children. She develops grant applications and guidelines and gathers and analyses information regarding the needs of consumers and the capacity of alcohol and drug systems to meet these needs.

Previously, Stephanie served as a Correctional Program Coordinator with OhioMHAS. In that role, she worked to bring recovery services in the Ohio prison system and helping to also introduce a curriculum for the men. As a person in long-term recovery from addiction, Stephanie works to destigmatize mental health and substance use and says, "I will not be defined by my addiction, it was something I did and not who I am."



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## Capitol Hill Happenings

### FY 2023 House Appropriations

On Wednesday, the House Appropriations Committee released the Fiscal Year 2023 Labor, Health and Human Services, Education, and Related Agencies [funding bill](#). A markup of the bill was on [June 23<sup>rd</sup> at 5:30 p.m. EST](#). The press release is available [here](#).



## Senate Caucus on International Narcotics Control Holds Hearing on the 2022 National Drug Control Strategy

The Senate Caucus on International Narcotics Control held a hearing on June 15, 2022 to examine the 2022 National Drug Control Strategy. The hearing included testimony by Rahul Gupta, Director of ONDCP, and Triana McNeil, Director of Strategic Issues at the Government Accountability Office (GAO). The Caucus aims to strengthen U.S. counter-narcotics efforts, fight narcotics-related corruption, and reduce drug overdoses. A recording of the hearing can be found [here](#).

## Bipartisan Group of Senators Introduce Bill to Help Combat Deadly Fentanyl Epidemic

A bipartisan group of Senators recently introduced [Bruce's Law \(S.4358\)](#), named after Robert "Bruce" Snodgrass, a young Alaskan who passed away from a fentanyl overdose in 2021, which aims to bolster federal prevention and education efforts around the dangers of drugs laced with fentanyl. U.S. Senators Lisa Murkowski (R-AK), Dianne Feinstein (D-CA), Dan Sullivan (R-AK), and Maggie Hassan (D-NH) introduced the bipartisan bill to combat the rising fentanyl epidemic, particularly among youth. As stated in the [press release](#), if Bruce's law is signed into law, the legislation:

- "Authorizes the Department of Health and Human Services (HHS) to launch a public education and awareness campaign focused on the dangers of drugs that could be contaminated with fentanyl, drug prevention, and detection of early warning signs of addiction among youth.
- Authorizes the Secretary of HHS to establish a Federal Interagency Working Group on Fentanyl Contamination of illegal drugs, which would:
  - Consult with experts, including family members, youth, and individuals working toward recovery, to help develop opportunities to improve responses to the incidence of drug overdose by fentanyl-contaminated drugs.
  - Study all federal efforts to prevent and minimize drug overdose by fentanyl-contaminated drugs, and make suggestions to better educate school-aged children and youth on the dangers of drugs contaminated by fentanyl.
- Authorizes new Community-Based Coalition Enhancement Grants to educate young people on the risks of drugs contaminated with fentanyl."

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## Around the Agencies

### New NIDA Planning Tool to Integrate Drug and Alcohol Screening Into Primary Care

The National Institute on Drug Abuse (NIDA) recently [released a new electronic health record \(EHR\) screening planning tool](#) to help providers integrate drug and alcohol screening into primary care practices. The tool aims to make identifying and addressing substance use disorders (SUD) part of routine medical care. Specifically, the tool helps clinics:

- "SELECT screening tools and decide on their screening approach, including options for patient self-administered screening;



National Institute  
on Drug Abuse

- INTEGRATE screening into the EHR and clinical workflows;
- PREPARE their practice for screening;
- MONITOR the success of the screening program through simple data reports.”

The EHR-integrated substance use screening tool can be accessed [here](#).

## COSSAP Fact Sheet: State-Level Policies That Affect Opioid-Related Overdose Responses



The Bureau of Justice Assistance (BJA) Comprehensive Opioid, Stimulant, and Substance Abuse Program (COSSAP), in collaboration with RTI International, released a [fact sheet](#) on two types of State-level policies impacting opioid-related overdose response - naloxone access laws and Good Samaritan laws. This fact sheet focuses on the composition of these laws, their implications for overdose prevention programs, and implementation in specific individual jurisdictions.

## DEA: New, Dangerous Synthetic Opioid Emerging in D.C., Tri-State Area



The U.S. Drug Enforcement Administration (DEA) Washington Division issued a [warning](#) to area residents of the emergence of Isotonitazene (aka “nitazene,” or “ISO”), a synthetic opioid on the rise in the D.C. metropolitan area, which officials say is as dangerous and deadly as fentanyl. This new drug is sourced from China and mixed into other drugs (such as heroin or fentanyl) to make them cheaper to produce and more potent and marketed as common street drugs through counterfeit pills and falsified pharmaceutical medications. Nitazene's high potency has an increased risk of overdose as it can only be properly identified after a lab test.

## HHS Announces Nearly \$15 Million Investment to Prevent and Treat Stimulant Use in Rural Communities



The U.S. Department of Health and Human Services (HHS), through the Health Resources and Services Administration (HRSA), recently [announced nearly \\$15 million in funding](#) as part of its [Overdose Prevention Strategy](#) to address psychostimulant misuse and related overdose deaths in rural communities. Rural communities are facing the highest rate of drug overdose deaths associated with psychostimulants in the nation. HHS has committed \$400 million to its [Rural Communities Opioid Response Program \(RCORP\) initiative](#), which aims to reduce the morbidity and mortality of substance use, including opioid use, in high risk rural communities. This funding helps support the [National Drug Control Strategy](#) and the expansion of evidence-based practices addressing opioid and stimulant misuse across the whole spectrum of substance use prevention, treatment, harm reduction, and recovery support services.

Details on the program can be found [here](#).

## CoE-PHI: Criminal Court Order Authorizes Disclosure of Substance Use Disorder Treatment Record Protected by Part 2



The Center of Excellence for Protected Health Information (CoE-PHI) published a [resource](#) on [court order requirements](#) under 42 CFR Part 2 for disclosing substance use disorder (SUD) treatment records in a criminal case. The main requirements are:

- “A general court order, subpoena, warrant, or official request for records, does not permit the disclosure of Part 2 records.

- The use of Part 2 protected SUD treatment records to criminally investigate or prosecute a patient, requires a special court order finding that, among other factors, the alleged crime is “extremely serious.”
- If a court issues a court order authorizing the disclosure of Part 2 protected records in a criminal case, it must impose limitations on the amount of information disclosed and who may receive the information.”

To help clarify the new court order requirements, the resource contains sample provisions for a criminal court order authorizing disclosure of a patient’s Part 2 records.