Addressing Opioid and Stimulant Misuse and Disorders: The Impact of State Targeted Response and State Opioid Response Grants

Background on State Targeted Response and State Opioid Response Grants

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. The STR program was designed to address the opioid crisis by increasing access to treatment, reducing unmet treatment needs, and reducing opioid overdose–related deaths through the provision of prevention, treatment, and recovery support activities for opioid use disorder (OUD). Following STR, the SOR program similarly aims to address the opioid crisis by increasing access to medication-assisted treatment (MAT) using the three Food and Drug Administration (FDA)–approved medications for treatment of OUD and through the provision of prevention, treatment, and recovery activities for OUD. In addition, the SOR program supports evidence-based prevention, treatment, and recovery support services to address stimulant misuse and use disorders, including for cocaine and methamphetamine.

In FY 2017 and FY 2018, grantees received a total of $1 billion through STR. From FY 2018 through FY 2020, states, territories, and jurisdictions received a total of $4 billion in SOR grants.

Single State Agency (SSA): Alaska Department of Health & Social Services Division of Behavioral Health

Through STR, the Alaska Department of Health and Social Services (DHSS) Division of Behavioral Health received $4 million in total funding in FY 2017 and 2018. The state received a total of $14 million through SOR grants from FY 2018 through FY 2020.

Overview of Alaska’s efforts to address opioid and stimulant misuse and disorders

Over the course of the STR and SOR grants, Alaska set out to achieve forward movement in the areas of prevention, treatment, recovery, and workforce development. Their goals are outlined below.

Prevention

1. Conduct educational outreach and distribution of naloxone
2. Screen newborns for substance exposure
3. Enhance the functions of the Prescription Drug Monitoring Program (PDMP)

Expansion of MAT/treatment opportunities

1. Expand availability of MAT providers
2. Establish new MAT programs
3. Establish American Society of Addiction Medicine (ASAM) level 3.3 capabilities within the state

**Expansion of the availability of recovery supports**

1. Expand availability of recovery housing
2. Expand availability of peer support programs
3. Expand availability of Supported Employment programs

**Workforce development**

1. Develop credentialing standards for peer support specialists
2. Increase number of peer support specialists through provided training
3. Link providers to Project ECHO Opioid and other educational opportunities
4. Host trainings on evidence-based practices for addiction treatment
5. Publish guides on MAT

**Innovative service delivery models**

- Expansion of MAT
- Hub-and-spoke model
- Establishment of a state-recognized certification for peer support specialists

**Building workforce capacity**

**Project ECHO**

The state established a Project ECHO in partnership with the University of Alaska, coordinating with partners across the state such as the Southcentral Foundation, the Alaska Native Tribal Health Consortium, and Providence Alaska Medical Center. This project expanded services by educating and expanding the number of physicians, physician assistants, and advanced nurse practitioners willing to prescribe buprenorphine and/or naltrexone. In 2017, the state had 70 buprenorphine-waivered physicians. As of the last report, Alaska had over 500 buprenorphine-waivered physicians.

**Alaska Training Institute**

Grant funds have also allowed sponsorship for attendance at NAADAC’s Fifth Annual Alaska Training Institute. The conference featured three plenary sessions, 24 breakout sessions, including three 4-hour intensive training sessions, a virtual exhibit hall, and networking opportunities. Over 280 attendees from 41 states and three countries came together online to network, learning from some of the best trainers from Alaska and the United States and earning up to 27 continuing education hours.

**Trainings on Evidence-Based Practices**

Grant funds supported trainings on evidence-based practices for addiction treatment. Over 240 providers received subscriptions to participate in web-based ASAM training. SOR funds also allowed for the creation of peer support training curriculum, the development of credentialing standards, and the establishment of a credentialing entity. With the recent ability to spend SOR funds to address stimulant misuse, the state offered the Matrix Model training to 45 providers. They also purchased 30 subscriptions to Hazelden’s Living in Balance comprehensive curriculum, with components on treatment, recovery and co-occurring disorders, to 21 agencies.
Collaborating with public and private entities

The Alaska Division of Behavioral Health served as lead in the state’s opioid response and established an instant command structure that met regularly and had representation from across multiple state departments and divisions. From this structure grew an effort led by the Office of Substance Misuse and Addiction Prevention to hold Community Cafés across the state, where 13 communities were visited and town hall meetings were held to identify gaps and barriers in their prevention, treatment, and recovery services related to opioid misuse. Citizens, providers, individuals in recovery, and community leaders provided input. The narratives collected through the series of cafés and town hall meetings contributed toward developing a process of establishing workgroups to develop a strategic plan to address these gaps and barriers. The workgroups met for 2 days and developed the 2018-2022 Statewide Opioid Action Plan, which contributes toward steering priorities and funding allocation for opioid efforts.

Preventing opioid and stimulant misuse before it starts

The State of Alaska focused prevention efforts on a three-pronged approach: targeting prescription drug misuse activities via the PDMP, expanding the Plans of Safe Care (POSC) program, and expanding the Alaska Prenatal Screening Program (APSP).

Prescription Drug Monitoring Program

Alaska funded a full-time investigator to manage a PDMP caseload of up to 100 incidents annually, allowing for more timely review and resolution of potential violations. To further enhance the capabilities of the PDMP in Alaska, funds were used to subscribe to the compliance model of Appriss, which would allow prescribers to view their compliance with the requirement to review a patient’s prescription history prior to prescribing or administering a federal Schedule II or III controlled substance issued for more than a 3-day supply. This feature also allows PDMP staff to monitor compliance with this mandate, allowing the staff to set real-time alert email notifications when given data sets that have reached certain thresholds, supporting immediate analysis of concerning prescribing or dispensing practices.

Plans of Safe Care

The state also used funds to support the POSC program for Alaskans as established by the federal Child Abuse Prevention and Treatment Act. The program team is comprised of multidisciplinary leadership from the Office of Children’s Services, the Division of Behavioral Health, Alaska Medicaid, the DHSS chief medical officer, the Southcentral Foundation, and the APSP nurse consultant. Staff work with community partners in the Matanuska-Susitna (Mat-Su) region, including R.O.C.K. (Raising Our Children with Kindness) Mat-Su; the Families with Infants and Toddlers Court; Mat-Su Regional Medical Center; and community prevention and treatment partners to conduct a pilot for development of plans and systems to support the program. This collaborative pilot project seeks to strengthen effective working relationships among these community and program partners to pursue a comprehensive approach to addressing substance-affected infants and their families in the state. In May 2019, DHSS hosted a 2-day kick-off meeting with assistance from the Center for Children and Family Futures, National Quality Improvement Center for Collaborative Community Court Teams. While COVID has made it challenging to integrate work across multiple sectors and domains around issues of statewide public policy changes—standardized screening and health care provider education—the team continues to make strides in service provider engagement collaboration and local implementation.
Alaska Prenatal Screening Program

The state also funded a DHSS/Division of Public Health Women’s, Children’s and Family Health nurse consultant who provides ongoing support to the APSP to support clinical care providers working with the Association of State and Territorial Health Officials Alaska team addressing issues of prenatal substance use. The Substance-Exposed Newborns Initiative (SENI) promoted universal screening of pregnant women with the validated 4P’s Plus tool. Because marijuana is legal for recreational use in Alaska, SENI worked with the developer of the 4P’s Plus tool and modified it to accommodate for this. Screening pregnant women for substance use at the time of the first prenatal visit is ideal; however, data indicated that about 50% of the mothers giving birth to babies diagnosed with neonatal abstinence syndrome in 2016 received either inadequate or no prenatal care. For this reason, intervention and care at birthing facilities is critical. SENI continues to work with screeners to improve these rates. SENI has recently expanded to partner with South Peninsula Hospital and two tribal health corporations. The Eat, Sleep, Console model has been trained to all SENI hospitals as well.

Education and public awareness

MAT conferences

Over the course of the past 4 years the state has hosted four MAT conferences with over 278 attendees, with a special focus on integration of multidisciplinary teams including the medical community, corrections staff, therapeutic court staff, public health personnel, and peer support specialists. Conference topics have included Recovery-Oriented Systems of Care and stimulant use disorders.

Region 10 Summit

Alaska, in conjunction with the other U.S. Department of Health and Human Services Region 10 states, hosted an opioid summit and sponsored travel for 19 providers to attend, thereby allowing providers an opportunity to expand workforce development and engage with providers from other states, bringing new passion and ideas into how MAT services are offered to Alaskans. Overall, 80 Alaskans attended this summit.

MAT guide

In 2021 the state updated an MAT guide to assist in the expansion of waivered providers. The guide is titled *Medication for Addiction Treatment Guide: Key Components for Delivering Community-based medications for Addiction Treatment Services for Opioid Use Disorders in Alaska.*

Media campaigns

Alaska plans to create three prevention-focused campaigns to assist in driving down the number of Alaskans impacted by substance misuse and use disorders. The first campaign will focus on individuals who need care. The states will work with the DHSS Public Information Team to develop online capacity for multimedia stakeholder outreach and engagement related to decreasing stigma for OUD and stimulant use disorder. The second campaign will focus on overdose prevention and be designed to inform and educate young adults, their parents, and older adults about the dangers of prescription drug misuse and the importance of safe storage, use, and disposal. The final campaign will focus on creating online training for parents, professionals, and educators. It will cover topics like how the opioid crisis came about, its consequences, youth substance use, and how adults can support youth to avoid substance misuse and addiction.
Overdose reversal efforts: saving lives

STR and SOR funds have contributed to Alaska’s Project Hope, an overdose education and naloxone distribution program offered statewide. As of May 2021, nearly 21,000 naloxone kits have been distributed, and 108 programs have become distributors of naloxone. Over 250 overdose reversals can be credited to these efforts.

These kits were used to support Opioid Treatment Programs when take-homes doses were increased as a result of COVID-19. The Fairbanks Wellness Court also distributed kits as a part of their recovery supports.

Increasing access to treatment

Expanding MAT

Grant funds have contributed to the expansion of MAT in Alaska. One community received technical assistance provided by the Opioid Response Network in mapping out the availability of substance use disorder services throughout the continuum of care, identifying where referrals and care coordination needed strengthening.

Providence Alaska Medical Center used funds to enhance outpatient services by providing access to MAT and wraparound services. As a special focus they developed a partnership with a residential program that cares for pregnant women and new mothers and with organizations that serve youth. Petersburg Medical Center (PMC) MAT services have been enhanced by funding case management services to help establish the linkages necessary for coordinating MAT. PMC expanded services to address medical and psychological issues early, with the goal of having patients stop using opioids before they become addicted and require MAT services. They employ both full-time physical therapists and occupational therapists who contribute to holistic approaches to addressing substance use and chronic pain.

Central Peninsula Hospital implemented MAT hub and spoke with the establishment of MAT in the clinic or withdrawal management facility and community referral for ongoing care, opioid treatment services, emergency department outreach, or, as appropriate, referral to residential programs. They were also able to establish peer support interactions in the emergency department.

The state was also successful in funding one start-up ASAM level 3.3 program, the only one in the state. This program accepted its first client on February 1, 2021.

In addition to expanding access to MAT, Alaska is focusing on improving the quality of MAT services. For example, grant funds helped one stand-alone clinic in Fairbanks enhance its capacity to provide on-site psychosocial services in addition to medication management.

Supporting long-term recovery

Peer Support

Sub-recipients have received funds to hire and train peer support specialists and employment support specialists. Alaska also established a state-recognized certification for peer support. This new certification will further the development of the workforce in Alaska. During COVID, in-person activities have been curtailed, but peer support specialists offer “social distancing” hikes and other safe outdoor events.
Recovery Residences
Funds have also been awarded to each region in the state to establish 12 recovery residences. During the COVID pandemic, residences have provided unlimited internet access to allow for telehealth group and individuals sessions. Staff have worked to connect residents to Zoom Narcotics Anonymous and Alcoholics Anonymous meetings, and peer support workers provide human-to-human interactions to support recovery.

Supported Employment Services
Funds allowed for the establishment of four Supported Employment programs. Due to the pandemic, programs had to be creative in how to provide services. Agencies built partnerships with their local Division of Vocational Rehabilitation (DVR) office and tribal organizations; joined the DVR JOBZ Club, which is a video-based conference platform promoting the development and implementation of innovative programs that prepare students to transition to postsecondary education, training, and/or employment; and presented their programs at a local Chamber of Commerce meeting.

Serving special populations
In September 2020, the Alaska Medicaid program began covered SENI screening as a billable Screening, Brief Intervention, and Referral to Treatment service. SENI is partnering with the Alaska Office of Children’s Services as they develop POSC. Through this effort the state seeks to develop more resources to support both pregnant women and women with young children impacted by substances. In January 2020, the Alaska State Hospital and Nursing Home Association’s (ASHNHA’s) Perinatal Quality Collaborative adopted SENI’s work as a focus area. SENI’s webpage is hosted on ASHNHA’s website. Alaska recently expanded this initiative, adding Facilitating Attuned Interactions (FAN) training to support the program. FAN is a practical tool for staff working with families affected by depression, mental health issues, violence, and substance misuse, to promote resilience-developing family engagement. This tool will improve the skill sets of professionals working to support the affected population.

Demonstrating outcomes for a healthier future

Prevention
- Conducted educational outreach and distribution of 21,000 naloxone kits and a reported 240 overdose reversals.
- Screened newborns for substance exposure with overall screening rates improving from 19% in 2018 to 63% in 2020.

Expansion of MAT/treatment opportunities
- Awarded 7 sub-recipients to provide MAT, with roughly 1,000 individuals served.

Expansion of the availability of recovery supports
- Established 12 new recovery homes with 361 individuals served
- Established 4 Supported Employment programs serving 138 individuals
- Established 4 peer support programs serving 716 individuals
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