

# Addressing Opioid and Stimulant Misuse and Use 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 need, 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): California Department of Health Care Services (DHCS)

In FY 2017 and FY 2018, the California Department of Health Care Services (DHCS) received a total of \$89.4 million in STR funds. From FY 2018 through FY 2020, the state received a total of \$176.1 million in SOR funds.

## Overview of California's efforts to address opioid and stimulant misuse and disorders

DHCS is using STR and SOR funds to implement the California MAT Expansion Project. This project aims to increase access to MAT, reduce unmet treatment need, and reduce opioid overdose deaths through prevention, treatment, and recovery activities.

The MAT Expansion Project consists of six main objectives:

- Develop additional MAT locations with a focus on rural areas;
- Provide MAT access to specialized and underserved communities;
- Transform entry points for individuals with OUD and create effective referrals into treatment;
- Develop coordinated referral processes to manage high-risk transitions;
- Engage current and potential MAT prescribers; and

- Enact overdose prevention activities to prevent opioid misuse and overdose deaths.

With the addition of new flexibilities that allowed the funding of stimulant use treatment, the MAT Expansion Project is broadening its focus to include treatment opportunities and programs for individuals with cocaine and methamphetamine use disorders.

Since the project began, California has:

- Provided treatment to more than 66,000 new patients in communities across California, through the Hub and Spoke System and other initiatives.
- Reversed more than 37,000 overdoses with the opioid overdose reversal medication naloxone.
- Trained more than 18,000 stakeholders on MAT and the science of addiction. This number includes health care providers, justice system professionals, and members of the substance use disorder (SUD) workforce.
- Created 650 new access point locations where patients can receive treatment for OUD.

### Innovative service delivery models

- California Hub and Spoke System (H&SS)
- California Bridge Program
- Expanding MAT in County Criminal Justice Settings project
- Mother & Baby Substance Exposure Initiative
- California Youth Opioid Response Project
- MAT Access Points Project
- TRUST (Treatment and Recovery for Users of Stimulants) Stimulant Treatment Pilot
- Tribal MAT Project

### Building workforce capacity

Many of California's MAT Expansion Project efforts are focused on building workforce capacity. Several of California's projects are specifically geared toward MAT prescribers and clinical staff. These include prescriber support webinars; MAT Extensions for Community Healthcare Outcomes (ECHO) clinics; and a 24/7 substance use hotline where clinicians can call with questions and receive guidance. Additionally, many projects focus on training other members of the workforce who may interact with individuals with OUD. These include trainings for county criminal justice staff through the MAT in County Jails and County Touchpoints project, as well as learning collaboratives and training sessions for counselors, peers, and other frontline staff who may be critical members of the treatment team.

### Collaborating with public and private entities

Local collaboration has occurred through community coalition meetings, town halls, task forces, presentation forums, strategic planning sessions, stakeholder meetings, and community panel discussions. DHCS has collaborated with a multitude of local coalitions, including the California Opioid Safety Network and tribal local opioid coalitions.

The MAT Expansion Project has funded community organizations such as hospitals and emergency department (EDs), primary care and mental health clinics, Opioid Treatment Programs (OTPs), residential treatment centers, Federally Qualified Health Centers (FQHCs), and law enforcement. DHCS

partners with each agency or facility to identify the local needs of the community and provide funding or resources to these organizations.

Additionally, the MAT Access Points project has funded MAT start-up activities and/or MAT enhancement efforts in hundreds of community-based MAT Access Points throughout California, such as primary care practices, hospitals, EDs, OTPs, jails, residential centers, recovery housing, tribal health centers, DUI program providers, community or county mental health centers, maternity care, and other access points. Funding can be used to purchase equipment, train and recruit staff, make capital improvements, and cover other start-up and enhancement costs. For the Expanding MAT in County Criminal Justice Settings project, county teams include members from a wide variety of criminal justice disciplines, such as law enforcement, judges, drug courts, attorneys, parole and diversion programs, and county administrators.

## Preventing opioid and stimulant misuse before it starts

### Education and public awareness

California’s OUD prevention activities are aimed at rural, American Indian and Alaska Native (AI/AN), perinatal, and youth populations. All of the special populations of focus have unique cultural, physical, mental health, and substance use needs that require targeted treatment and recovery services. DHCS is developing a multitude of clinician-oriented educational materials and toolkits to facilitate prevention, including development of prescribing guidelines and screening criteria, disseminating opioid safety bundles, and adapting materials to specific health care settings where special population patients are most likely to be receiving services.

## Overdose reversal efforts: saving lives

The Naloxone Distribution Project (NDP) aims to reduce opioid overdose deaths through the provision of free naloxone in its nasal spray formulation. Eligible entities include first responders, emergency medical services (EMS), fire departments, law enforcement and criminal justice, veteran organizations, homeless programs, schools and universities, libraries, hospitals, substance use treatment programs, and community organizations.

## Increasing access to treatment

Treatment activities include expanding MAT in primary care and hospital settings, targeting rural populations, and expanding access to treatment for stimulant use disorder.

### California Hub and Spoke System

California’s H&SS, launched in July 2017, aims to increase access to MAT services throughout the state, particularly in rural counties with the highest overdose rates. This program was modeled after the Vermont Hub and Spoke System. California’s H&SS has increased the availability of MAT for patients with OUD by increasing the total number of physicians, physician assistants, and nurse practitioners prescribing buprenorphine. The H&SS consists of OTPs, which are referred to as “Hubs” and serve as experts in treating OUD, and office-based treatment settings, which are referred to as “Spokes” and provide ongoing care and maintenance treatment. Approximately 40 percent of Spokes are FQHCs, meaning that they provide care in underserved areas.

## California Bridge Program

The California Bridge Program began in February 2018. The California Bridge Program has developed hospitals and EDs into primary access points for the treatment of OUD. Participating sites have developed procedures to immediately begin treatment for individuals presenting to the hospital or ED with an SUD, through expedited access to buprenorphine and warm handoff to an outpatient SUD treatment setting using a substance use navigator. Recently, additional state funds have been added to expand the program statewide, which has led to over 200 hospitals receiving funds to implement the model in their EDs.

## TRUST (Treatment and Recovery for Users of Stimulants) Stimulant Treatment Pilot

In order to address the rising trend of stimulant use across the state, the UCLA Integrated Substance Abuse Programs launched a pilot project to enhance and improve the treatment experience of individuals with stimulant use disorder. Selected treatment programs are being trained and coached to deliver a manualized integrated, research-supported, multicomponent approach to improve the treatment experience of individuals with stimulant use disorder. The TRUST manual includes motivational incentives, based on contingency management research; elements of cognitive behavioral therapy, community reinforcement approach, and motivational interviewing; physical exercise; and participation in self-help or mutual support groups. An estimated 400 patients are anticipated to receive treatment through the program, and the findings of the project will be disseminated to improve patient care across the state.

## Supporting long-term recovery

Recovery support services are an integral component of the MAT Expansion Project. Through the MAT Expansion Project, two programs currently provide recovery housing in high-need areas of the state: San Francisco and Riverside (Los Angeles area). A third recovery housing project is planned for the Northern California/Central Valley area. These programs provide temporary housing and services for individuals in recovery from OUD. Additional initiatives with a recovery focus include the California H&SS, where patients receive access to a continuum of services, including substance use education, transportation, and relapse prevention services. MAT Expansion Project efforts have led to more than 28,000 individuals receiving recovery support services.

## Serving special populations

### Expanding MAT in County Criminal Justice Settings Project

In August 2018, DHCS launched the Expanding MAT in County Criminal Justice Settings project, a technical assistance program that is available to teams from all California counties interested in developing or expanding MAT for opioid addiction in their jails and through their drug court systems. County teams must demonstrate an interest in expanding access to at least two forms of MAT for OUD (naltrexone, methadone, buprenorphine) in order to be eligible.

In total, 34 counties are participating in the MAT in County Criminal Justice Settings project. Each county receives an initial grant to cover the cost of attending learning sessions and participation in other MAT-related activities, and other approved expenses. Additional funding is available after the first few

months for participating counties to expedite implementation of SUD screening, assessment, treatment, MAT, and community engagement while local sustainable funds are secured.

### **Mother & Baby Substance Exposure Initiative**

The overarching goal of the Mother & Baby Substance Exposure Initiative is to increase access to MAT using the three FDA-approved medications for the treatment of OUD, reduce unmet treatment need, and reduce opioid overdose–related deaths through the provision of prevention, treatment, and recovery activities for OUD. The project also has the following goals:

- Decrease neonatal abstinence syndrome (NAS) length of stay by decreasing NAS severity;
- Increase the number of maternal patients identified with OUD;
- Decrease number of child protective services referrals; and
- Increase the number of mothers in long-term recovery.

The project, which concluded in 2020, included stakeholder outreach to build on the framework of existing treatment access points capable of screening, assessing, and inducting perinatal patients into treatment. Project leads focused on developing protocols, guidelines, and materials for best practices in treatment, as well as providing technical assistance and a resource library for ongoing use by practitioners. Perinatal-specific services continue to serve as a major component of other initiatives, including the County Touchpoints project, as well as through direct service projects, such as the California H&SS.

### **California Youth Opioid Response Project**

The California Youth Opioid Response (YOR) project focuses on providing prevention, treatment, and recovery services for youth age 12–24. The project funds:

- Development of protocols, guidelines, and toolkits to address the clinical judgment involved in developing an appropriate treatment plan for the delivery of services to youth populations;
- Distribution of OUD prevention, treatment, and recovery education materials;
- Coordinating learning collaboratives between stakeholders, prescribers, clinicians, and others to support networking, support peer learning, and provide a platform for discussion; and
- Expansion and implementation of MAT and OUD prevention and treatment services for youth, young adults, and their family members.

So far over the course of SOR, YOR has engaged with over 5,000 youth at risk of developing an OUD. YOR provided training to hundreds of medical professionals serving youth, as well as professionals working with high-risk youth in schools, the justice system, and homeless services. Across grantees, the projects held local events that reached thousands of individuals, including youth, families, and community entities. YOR is continuing to work with new projects serving youth at risk of an OUD, as well as youth at risk of a stimulant use disorder.

### **Tribal MAT Project**

In fall 2018, DHCS launched the Tribal MAT Project, which addresses the culturally unique needs of AI/AN populations. This includes the following projects:

- MAT Champions: Through Urban and Tribal Indian organizations, this project works to distribute naloxone and provide training to family members, friends, and first responders. So far, 13,000 naloxone kits have been distributed to AI/AN organizations. It also provides telehealth training and equipment, conducts community awareness campaigns, and has helped to establish local

safety coalitions. Through the project, there have been 23 new Local Opioid Safety Coalitions established specific to tribal populations.

- Tribal best practices: The goal of the Tribal and Urban Indian Community-Defined Best Practices program is to support the local integration of cultural and traditional healing and recovery practices into developing or existing Tribal and Urban Indian health programs for SUD services. It supports strategic planning and/or implementation activities to integrate these practices into programs.
- Suicide prevention: The Suicide Prevention Consortium is a culturally informed system that provides OUD treatment, suicide prevention, case management, and community engagement in tribes. It is ongoing and intended to address OUD and co-occurring disorders for tribal youth and their families.
- Project ECHO: This project aims to increase the number of Tribal and Urban Indian prescribers. Training sessions focus on topics such as treating OUD, safe usage of opioids, managing pain, and polysubstance use.
- Tribal MAT Needs Assessment: The University of Southern California completed a Statewide MAT Needs Assessment of AI/AN communities. The needs assessment team interviewed 279 people across 10 counties, and the needs assessment has helped to identify treatment gaps and inform DHCS of future initiatives targeting these special populations.
- Tele-MAT Project: The Tribal MAT Project includes treatment services performed through the Tele-MAT with Academic Detailing project. This project provides telemedicine support, physician consultation, and OUD medical and psychiatric treatment services. Through the project, tele-MAT services have been implemented in more than 12 new Indian Health Providers.

## Demonstrating outcomes for a healthier future

Treatment under the MAT Expansion Project through the California H&SS, California Bridge Program, Expanding MAT in County Criminal Justice Settings project, and the Tribal MAT Project has led to a substantial increase in patients receiving integrated services, culturally responsive services, transportation services, life skills education, child care and housing assistance services, employment and job training services, and case management services.

### California H&SS

- As of June 2021, more than 40,000 patients have been treated in the H&SS, with significant expansions in the availability of treatment in the northern and central parts of the state, which have been most greatly impacted by the opioid crisis.

### California Bridge Program

- As of April 2021, 208 health care facilities are participating in this program across the state. Over the course of the program, over 48,000 patients have interacted with substance use navigators in EDs; 24,191 patients have been identified with OUD; and 10,471 patients were prescribed or received MAT during their encounter.

### Expanding MAT in County Criminal Justice Settings Project

- As of March 2021, over 10,745 individuals have been treated with MAT in county jails, and this number is quickly growing.

## Naloxone Distribution Project

- Through June 2021, the NDP has distributed more than 600,000 units to law enforcement, fire departments, EMS, and first responders, harm reduction organizations, community organizations, county behavioral health agencies, schools, and homeless programs in 57 counties. As of June 2021, more than 37,000 overdose reversals were reported by recipient organizations.

To learn more about the 30 projects in the California MAT Expansion project, visit [www.CaliforniaMAT.org](http://www.CaliforniaMAT.org).

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