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

Single State Agency (SSA): Iowa Department of Public Health Division of Behavioral Health Bureau of Substance Abuse

The Iowa Department of Public Health (IDPH) Division of Behavioral Health Bureau of Substance Abuse received a total of $5.4 million in STR funding in FY 2017 and FY 2018. From FY 2018 through FY 2020, the state received a total of $20.1 million through SOR.

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

The Iowa STR and SOR projects are related initiatives to increase access to prevention, treatment, and recovery services for people with an OUD. Through these funds, Iowa has expanded the capacity of the existing regional prevention and treatment provider network with a focus on accessible opioid treatment services, particularly MAT. The Iowa opioid response projects leverage the service improvements gained through smaller, focused prevention and treatment grants (e.g., Medication-Assisted Treatment – Prescription Drug and Opioid Addiction [MAT-PDOA], Strategic Prevention Framework for Prescription Drugs [SPF Rx]), to make these evidence-based practices more accessible across the state to all Iowans affected by opioids. Providers in all service areas completed opioid-specific community assessments and strategic plans involving community stakeholders. The assessment and
planning processes aim to build opioid-informed communities and provide the foundation for implementation of evidence-based practices.

**Innovative service delivery models**

- Community needs assessment and strategic planning
- Enhancement of the Prescription Monitoring Program (PMP)
- Naloxone distribution programs: Tele-Naloxone and local pharmacies initiative
- MAT expansion through methadone medication units
- Recovery support service expansion
- Corrections liaison projects

**Building workforce capacity**

The Iowa STR and SOR projects helped support opioid-specific information and trainings to the behavioral health workforce both as individual events and by adding relevant topics to larger events such as the Annual Governor’s Conference on Substance Abuse, Approaches to Pain Management, and A Closer Look: Methamphetamine, Opioids, and Poly-Substance Use. The funds have supported training for a cadre of prevention specialists working in communities statewide to address the informational gaps and risk factors contributing to the ongoing overdose crisis. Additionally, the grants have supported capacity building among health care and the substance use community service-provider workforce through a partnership to provide a series of regional trainings on identifying opioid misuse.

**Collaborating with public and private entities**

**Developing Opioid-Informed Communities**

IDPH funded a community needs assessment and strategic planning to support local communities to become “opioid-informed,” defined as communities where stakeholders:

- Are aware of current opioid-related risks and problems in their communities;
- Prioritize education, prevention, treatment, and recovery from OUDs; and
- Agree to implement a plan of action to address both the current opioid crisis and underlying factors that may contribute to the crisis.

**Corrections Liaisons**

Partnerships on the state and local levels are helping fill the gaps for those with substance use disorders returning to communities from incarceration. Iowa is increasing access to MAT during incarceration and providing naloxone upon release through joint efforts with the Department of Corrections and county jails.

**Recovery-Ready Communities**

IDPH partnered with Iowa State University to assess priority supports needed to build more recovery-focused partnerships and organizations. An environmental scan was conducted to collect relevant services available in communities across the state, including 12-step meetings, housing options, and additional recovery-focused services.
Preventing opioid and stimulant misuse before it starts

IDPH is using STR/SOR funds to develop, expand, and support the annual statewide opioid media campaign. Increased prevention resources at the local level allow for community-specific priorities to be addressed while advancing statewide priorities such as promotion of overdose reversal efforts.

Enhancement of the Prescription Monitoring Program

The Iowa Board of Pharmacy’s PMP is a vital tool to understand opioid prescribing and reduce the risk of patients developing an OUD. In 2018, House File (HF) 2377 passed, requiring prescribers to register and use the PMP at predetermined intervals. At the time of this report, PMP registration for prescribers that have a current and active Controlled Substance Act (CSA) registration has increased to 86%. Through federal grants, IDPH made funding available to the Board of Pharmacy to obtain a new PMP platform. Launched in April 2018, the new PMP not only provides improved functionality, it allows for easier development of reports useful in understanding prescribing patterns in the state. Functions were also added to allow prescribers to compare their own prescribing history with those of others in their specialty.

Approaches to Pain Management Symposium

To assist providers in understanding alternatives to opioids, IDPH sponsored the Approaches to Pain Management Symposium on October 30, 2018, and again in October 2020. The symposium provided an overview of a range of nonpharmacological approaches to addressing pain in addition to, or as an alternative to, the use of opioids.

Presentation topics included a national perspective on research supporting approaches to pain management, chiropractic care, mindfulness-based stress reduction, physical therapy, acupuncture and alternative medicine, yoga therapy, nutrition and physical activity, and interventional orthopedics.

Work With Local Coalitions

Materials and trainings on opioids and stimulants are offered to coalitions through the statewide Alliance of Coalitions for Change (AC4C) association as well as through local prevention and treatment providers.

Education and public awareness

Media Campaigns

The IDPH works with a professional local advertising agency to implement a range of public health campaigns. One such campaign expands prevention strategies by coordinating across multiple opioid grants to maintain unified branding and consistent messages. IDPH’s SPF Rx supported development of a youth-focused statewide media campaign to help reduce misuse or nonmedical use of prescription drugs. This campaign was further expanded for adults statewide with STR funds to raise awareness of the risks of overdose and addiction and to provide information on treatment options. Similar campaigns, with additions and improvements, are ongoing with the SOR grant, utilizing traditional TV and radio ads as well as online video, banner ads, paid searches, and other novel approaches to reach the Iowa population and particularly to encourage people to get help and reduce stigma.

Providing Education to Veterinarians
Veterinarians prescribe and dispense medications for the treatment of animals in their care. These medications can be sources of opioids that can be diverted and misused. Veterinarians recognize that some pet owners, family members, handlers, and veterinary practice staff may engage in diversion of opioid prescriptions intended for pets. To assist veterinarians, IDPH created an educational infographic and two electronic informational briefs: one on the role of veterinarians in reducing opioid misuse, and the other on the role of veterinarians in preventing opioid diversion, which includes educating pet owners on the risks of opioid misuse and proper storage and disposal of medications.

**Overdose reversal efforts: saving lives**

**Naloxone Standing Order and Naloxone Kits**

On November 3, 2016, the IDPH Medical Director issued a statewide standing order allowing individuals to purchase naloxone from a pharmacy. That initial order was renewed through September 21, 2021, by the current IDPH Medical Director. Through this order, SOR has supported sending naloxone kits directly to law enforcement agencies, public safety agencies, community colleges, public health offices, emergency rooms, and fire departments.

**Narcan Access Day**

On June 29, 2018, IDPH, the Iowa Board of Pharmacy, and the Iowa Pharmacy Association held the first Narcan Access Day in Iowa. Through this collaborative effort, over 1,500 free naloxone nasal spray kits were dispensed to “persons in a position to assist” through more than 360 participating pharmacies across the state. IDPH purchased the kits using federal grant funds at the reduced “public interest” price offered by the manufacturer.

**Tele-Naloxone Program**

IDPH partnered with the University of Iowa Specialty Pharmacy Services to launch a mobile access program for naloxone that is confidential, free, and available statewide, starting in December 2019. This program complies with Iowa distribution rules for prescription medicines, while providing access to naloxone nasal spray for all of Iowa.

**Good Samaritan Informational Campaign**

IDPH created informational materials, including posters, fliers, and business cards, to educate Iowans about the Good Samaritan law; these materials outline eligibility requirements for protection under Iowa’s law. In addition, IDPH created two promotional videos, one for the general public and one for law enforcement, that further explain the law.

**Local Pharmacies Initiative**

Building on the success of the Narcan Access Day, in July 2020 IDPH launched an initiative allowing people to request free naloxone from participating local pharmacies around the state.

**Increasing access to treatment**

**Expanding MAT**

Iowa has significantly increased the availability of MAT statewide, including in previously underserved areas of the state. That increase is due in part to the addition of nurse practitioners and physician assistants to the list of eligible prescribers to support the expansion.
STR and SOR funds play a valuable role in expanding MAT. Through grant activities, including community needs assessments and strategic planning, 16 of the 19 local programs in IDPH’s treatment provider network used opioid funding to enhance or expand MAT services. This capacity improvement funded by opioid grants will be widely sustainable through the increasing coverage of MAT by most third-party payers. In the first year of the SOR grant, over 210 Iowans received grant-funded MAT as part of their treatment experience, and 300 people received recovery support services. Iowans now have increased access to all FDA-approved medications in comparison to what was available prior to STR and SOR funding. Iowa has seen a fivefold increase in the number of buprenorphine-waivered prescribers since 2015, from 31 to 183 in February 2020. The state has also increased the number of sites capable of dispensing methadone from 8 locations in 2015 to 18 locations in 2020.

**HIV/Hepatitis C Testing**

The IDPH Bureau of HIV, STD, and Hepatitis provides funding for 10 sites across Iowa to administer HIV/HCV testing and hepatitis A/B immunizations. These sites provide hepatitis C testing for patients who have ever engaged in injection drug use or are in the baby boomer age range and are being seen for other services. Through November 30, 2018, there were 1,714 HCV tests administered at test sites, with a 2.3% positivity rate. IDPH also supports HCV testing at Federally Qualified Health Centers (FQHCs) across Iowa through a partnership with the Iowa Primary Care Association. In 2017, eight FQHCs administered routine HCV testing to patients in the baby boomer age range. The number of HCV tests administered at participating FQHCs increased 66% from 2016 to 2017, with 3,222 tests administered, and a 2% positivity rate.

UCS Healthcare, a MAT provider based in Des Moines, partnered with the Bureau of HIV, STD, and Hepatitis on a demonstration project to integrate and routinize HIV and HCV testing in MAT settings. IDPH staff provided training on the fundamentals of HIV and hepatitis C for UCS clinic staff in March 2018. From March to September, UCS Healthcare administered 146 HCV tests at their Des Moines office, with a 31% positivity rate.

Medication units and other treatment providers are beginning to provide HIV and HCV rapid tests on site for SOR-funded treatment patients.

**Supporting long-term recovery**

**Recovery Coaching**

IDPH uses the Connecticut Community for Addiction Recovery (CCAR) model for recovery coaching. They also support Recovery Community organizations and have provided training in 10 communities to enable capacity building. Recovery coaching training is being offered to create continued opportunities for consumer and provider involvement. IDPH maintains communication with the network of trained recovery coaches in Iowa to invite additional educational opportunities and involve them in stakeholder groups.

**Recovery Housing Technical Assistance**

The Mid-America Addiction Technology Transfer Center (ATTC) and the Opioid Response Network are partnering with IDPH to provide technical assistance and community engagement to boost the understanding, capacity, and infrastructure of recovery housing in Iowa. Efforts include involving the National Alliance for Recovery Residences to help establish an Iowa affiliate chapter to certify recovery housing providers in the state.
Serving special populations

Prevention for special populations

Iowa identified individuals ages 18–44 for targeted prevention efforts, while more specifically targeting online media messaging to those who search topics related to opioids. Community trainings have targeted first responders, social service providers, health care workers, and others as requested. Increased collaboration with the Bureau of HIV, STD, and Hepatitis has also increased the efforts focusing on health initiatives for people who use drugs. Iowa is also participating in a collaborative project with Strengthening Systems of Care for People with HIV and OUD.

Demonstrating outcomes for a healthier future

Prevention, treatment, and recovery service outcomes

- The Opioid Use Media Campaign generated nearly 100 million impressions and more than 118,000 website clicks through both traditional and online media strategies.
- Training and informational sessions on opioid topics have reached more than 26,000 people.
- Over 1,200 people have received treatment and/or recovery services through STR/SOR funds.
- Iowa experienced a significant reduction in the number of deaths related to opioids from 2017 (206) to 2018 (137). Unfortunately, increases returned in the data for 2019 (157) and 2020 (212 still provisional), demonstrating the tragic toll of fentanyl and COVID-19.

Overdose reversal outcomes

IDPH has worked with other state agencies and stakeholders to prevent opioid overdose by providing access to naloxone. Made possible by federal grant funds, examples of IDPH naloxone distribution efforts include:

- Over 2,500 kits provided to emergency departments across the state for distribution to individuals being released from the hospital following treatment for an opioid overdose.
- 800 kits provided to the Department of Public Safety to equip every staff member.
- 450 kits provided to the Department of Corrections for individuals being released from a correctional setting who have a history of opioid misuse.
- 350 kits provided to the IDPH Bureau of Emergency and Trauma Services for distribution to emergency medical services (EMS) providers.
- Over 4,400 kits provided to interested law enforcement officers.
Funding for this initiative was made possible (in part) by grant no. 1H79TI083343 from SAMHSA. The information contained in this Brief was provided and verified by the state/jurisdiction. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.