

Addressing Opioid 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 SAMHSA 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): Michigan Department of Health and Human Services, Behavioral Health and Developmental Disabilities Administration, Office of Recovery Oriented Systems of Care

In FY 2017 and FY 2018, the Michigan Department of Health and Human Services, Behavioral Health and Developmental Disabilities Administration, Office of Recovery Oriented Systems of Care received a total of \$32.6 million in STR funding. From FY 2018 through FY 2020, the state received a total of \$106.3 million in SOR funding.

Overview of Michigan’s efforts to address opioid misuse and disorders

In order to prevent opioid misuse and addiction, Michigan is using STR and SOR funds to implement a statewide media campaign, prescriber education, prescription drug monitoring program (PDMP) improvement, and more. In order to prevent opioid overdose deaths, Michigan has implemented a statewide Overdose Education and Naloxone Distribution (OEND) program and a centralized NARCAN ordering and distribution process. Treatment and recovery efforts have involved training and fidelity monitoring of Motivational Interviewing, Project ASSERT (Alcohol and Substance Abuse Services, Education, and Referral to Treatment), Medication-Assisted Recovery Services (MARS), dialectical behavioral therapy (DBT), contingency management, and mindfulness training. Michigan is also supporting recovery housing for individuals with OUD.

Innovative service delivery models

- PDMP enhancements
- Statewide training and expansion of evidence-based prevention programs
- Mobile care units
- MAT initiation in emergency departments
- Peer-initiated and peer-based recovery support project
- Project ASSERT in emergency departments
- Tribal Opioid Treatment and Recovery (TOTR) initiative
- Maintaining Independence and Sobriety Through Systems Integration, Outreach and Networking (MISSION) project
- Opioid Health Home hub-and-spoke models of care

Building workforce capacity

Michigan Collaborative Addiction Resources and Education System (CARES)

The Michigan CARES program guides physicians through the Addiction Medicine (AM) accreditation application and is currently developing an AM curriculum for medical students to help prepare for the exam.

Michigan Opioid Prescribing Engagement Network (OPEN)

Michigan is expanding OPEN to provide training consultation to primary care physicians, surgeons, oral surgeons, and dentists on proper prescribing of opioids. Under SOR, Michigan OPEN is focusing on transitions of care pathways for high-risk patients following surgery and developing naloxone distribution protocols for emergency departments.

Collaborating with public and private entities

Prepaid Inpatient Health Plans (PIHPs), Michigan's sub-state entities, have collaborated with local jurisdictions for media campaigns, community education, OEND, naloxone kit distribution, and prescription drug take-back initiatives, as well as the Angel Program and Hope Not Handcuffs initiatives.

Michigan has partnered with the Inter-Tribal Council of Michigan to implement strategies in the 12 federally recognized tribes to combat opioid use. Additional partners include Wayne State University, Michigan State University, University of Michigan, Michigan Opioid Partnership (MOP), Michigan Primary Care Association, and Michigan Association of Recovery Residences.

Persons with OUD may walk into Michigan State Police posts and ask for assistance, and Angel Program volunteers provide support and transportation to an identified treatment facility. The program also equips police posts with naloxone. The program is currently held at 30 Michigan State Police posts statewide.

Preventing opioid misuse before it starts

Expansion of Evidence-Based Prevention Programming

Under the STR and SOR grants, Michigan has implemented evidence-based substance use prevention programs including Strengthening Families Program, Botvin *LifeSkills*, Prime for Life, Guiding Good Choices, and Project Towards No Drug Abuse.

Education and public awareness

Statewide Opioid Media Campaign

Michigan created four media campaigns under the STR and SOR grants. The first campaign was developed to educate the public about proper storage and disposal of prescription drugs and increase awareness among prescribers on the dangers of prescription drugs. Two more campaigns were developed with the goal of reducing the stigma of OUD. The most recent campaign was officially launched in March 2021 and seeks to also increase awareness of harm reduction services.

PDMP Initiative

Michigan is upgrading software in its PDMP to include NarxCare, which automatically analyzes PDMP data and a patient's health history and provides patient risk scores. The state will then conduct an outcome-based study of the effectiveness of the program. The platform provides tools and resources to enable prescribers, dispensers, and care teams to help patients and connect them to the regional Access Management System for prevention and treatment services, as appropriate. An average of 36,000 individuals were reported to have actively used the program through September 2020.

Overdose reversal efforts: saving lives

Michigan operates a statewide Narcan portal where PIHPs, law enforcement, community organizations and government agencies can request and order Narcan. As of March 31, 2021, over 90,000 Narcan kits have been shipped to community organizations throughout Michigan.

The Grand Rapids Red Project provides statewide training and expansion of community-based opioid overdose prevention utilizing the SAMHSA Opioid Overdose Prevention Toolkit and the procurement of naloxone. All 10 PHIPs have received funding to support OEND, resulting in the distribution of thousands of kits to community members, families, and individuals at risk.

Funding was also utilized to support Michigan OPEN, which connects with hospital systems throughout the state to develop protocol for naloxone distribution with emergency departments for individuals presenting with an overdose. Additionally, the Inter-Tribal Council has developed a culturally informed overdose education training and also distributed naloxone kits in tribal communities. Wayne State University Center for Behavioral Health and Justice has partnered with the Michigan Opioid Partnership to provide technical assistance to county jails to develop protocol for naloxone distribution for individuals released from incarceration.

Michigan has supported local health departments and harm reduction agencies in the development of syringe services programs, which distribute harm reduction materials, including naloxone, to individuals with an OUD. Five agencies in geographically diverse regions of the state have implemented post-overdose rapid response teams, which assist individuals in the 72 hours after experiencing an overdose by providing naloxone and connecting them to harm reduction resources.

Increasing access to treatment

The Michigan Opioid Collaborative program

The Michigan Opioid Collaborative program uses tele-mentoring and consultant services to increase access to MAT for individuals with OUD. The program helps to increase the workforce of physicians prescribing the medications used in MAT, increase clinician access to training on counseling services that

accompany those medications in MAT, and provide a process for linkages to other OUD treatment services in the community.

MAT in Emergency Departments

Michigan is currently piloting the initiation of MAT in emergency departments in nine hospital systems, with plans to expand the program to all hospital systems statewide. These hospitals connect with local outpatient SUD providers to facilitate referral to care after an individual is initiated on buprenorphine in the emergency department.

Increasing access to MAT

One of the barriers to accessing MAT services in Michigan is transportation. The state has been able to significantly increase access by helping with the costs of transportation to get to treatment and MAT statewide.

Additionally, through partnerships, Michigan has sponsored multiple Drug Addiction Treatment Act (DATA) waiver trainings to increase the number of physicians and other providers who are able to prescribe buprenorphine for the treatment of OUD.

Screening for pregnant and parenting women

The High Touch High Tech (HT2) screening tool will be expanded to additional obstetrician offices across Michigan. HT2 promotes engagement in treatment and provides information to prenatal clinics on patient needs. HT2 uses evidence-based screening to increase identification of behavioral risks among patients and to connect pregnant and parenting women to available services, including MAT.

Opioid Health Home (OHH) program

Opioid Health Homes have been implemented in five PIHP regions, with an additional two in the planning stages. These homes provide comprehensive care management and coordination services to Medicaid beneficiaries with OUD. The OHH program serves as the central point of contact for directing patient-centered care across the health care system.

Mobile care units

Michigan implemented mobile care units with consumer-focused locations and times for dispatch using culturally competent care. Services provided by these mobile units include naloxone kit distribution and trainings, MAT services, individualized therapy and referrals to treatment services, peer support, and drug screens. Strategic partnerships in the community have also led to enhanced care on the mobile units by providing clothing and food services.

Other programs

Michigan is providing statewide training for clinicians to increase the availability of Motivational Interviewing in MAT programs and is implementing Project ASSERT, a Screening, Brief Intervention, and Referral to Treatment (SBIRT) model designed for use in health clinics or emergency departments. Contingency management is being piloted to increase retention in treatment.

Supporting long-term recovery

Peer-based recovery support project

The state implemented a peer-initiated and peer-based recovery support project sponsored by the National Alliance of Medication Assisted Recovery. The initial focus is on opioid treatment providers to encourage and support engagement with the program and help with connections to other resources individuals need to be successful in recovery.

Employment training

Michigan implemented individualized placement and support services including employment training for individuals ages 18–25. Referrals are made from treatment or recovery homes, and services include resume building, interviewing skills, and assistance with purchasing professional clothing. Programming is currently taking place in three regions.

Serving special populations

Prevention services for special populations

Evidence-Based Prevention for Older Adults: This prevention initiative is targeted at adults age 55 and older and provides education aimed at reducing high-risk behaviors. Programs include Stress Less with Mindfulness, Chronic Pain Self-Management, and Wellness Initiative for Senior Education.

Tribal Population: The Tribal Overdose Prevention Project uses existing collaborative networks to facilitate local and inter-tribal planning. For Tribes that have a Tribal Action Plan in place, this initiative will enhance current efforts by focusing specifically on the opioid crisis. For this purpose, the project will support the training of facilitators using the Gathering of Native Americans (GONA) model or a locally selected approach.

African American Community: Michigan has partnered with a harm reduction agency in Flint to promote community-wide awareness of the impact of OUD on the African American community and develop and expand direct partnerships with community partners serving African American opioid users.

Treatment and recovery services for special populations

The TOTR Initiative: This initiative assists patients with treatment costs and develops strategies to eliminate or reduce treatment cost for American Indian/Alaska Native under- and uninsured patients with an OUD. The project provides vouchers for enrolled patients to access a wide array of substance use treatment and recovery support services from authorized providers. Care coordinators at the Tribal level also work with pregnant and parenting mothers experiencing OUD and connect them to community resources.

Criminal Justice–Involved Populations: The MISSION project targets the prisoner reentry population by providing 3 months of case management and peer services prior to release and up to 6 months of the same services upon release. The program also connects individuals to MAT and other services as needed. The Michigan Department of Corrections has also implemented MAT programs in four pilot prisons for individuals who present at the prison with an OUD and will implement peer recovery coaching services in three parole/probation offices. Additionally, the Hope Not Handcuffs program brings law enforcement and community organizations together in an effort to help individuals experiencing addiction find treatment services. MAT services are also supported in jail settings, with 28 regions currently implementing programs and technical assistance services offered by the Wayne State

Center for Behavioral Health and Justice. The Law Enforcement Assisted Diversion (LEAD) initiative will be launched within an existing law enforcement facility. The LEAD program will temporarily and securely hold individuals prior to diverting them to community services. Additionally, a clinical social worker or contracted provider will determine medical necessity and the appropriate level of care. The State Court Administrative Office will provide support to problem-solving courts serving opioid-using individuals, and the Michigan Judicial Institute will provide trainings to judges on the evidence base of MAT.

Pregnant and Parenting Women: A rooming-in initiative will be piloted in three Michigan hospitals that allows infants diagnosed with neonatal abstinence syndrome to stay in a private room with their mother, thereby avoiding lengthy neonatal intensive care unit stays and promoting early attachment. The HT2 screening program will expand to eight obstetrician offices in high-risk areas across Michigan. HT2 screens for major behavioral risks such as substance use and depression, helps build motivation to make changes, and facilitates connection with available services.

Demonstrating outcomes for a healthier future

- 169 staff members were trained in the Strengthening Families Program; 351 families completed the program; and 59 family skills training interventions were held across STR grant years.
- As of March 2021, 15,894 persons have been reached through evidence-based prevention programming.
- Over 9,600 pounds of pills have been collected at drug take-back events.
- Since the implementation of NarxCare, the number of patients obtaining prescriptions for controlled substances from four or more prescribers and filling them at four or more pharmacies has decreased by 70.4%.
- Michigan CARES currently has 307 registered physicians.
- 307 clinicians and 225 physicians have been enrolled in the Michigan Opioid Collaborative; six clinics have received tele-mentoring services.
- 455 clinicians were trained in Motivational Interviewing.
- 277 individuals have been enrolled through the MISSION project in five counties.
- 1,849 persons were served in jail-based MAT programs.
- 1,801 placements were made, and 144 volunteers received training through the Hope Not Handcuffs Program.
- 4,989 clients received MAT services, and 455 individuals were trained in MAT and recovery support.
- As of March 2021, 1,022 individuals were served through mobile care units.
- As of March 2021, 141,770 naloxone kits have been distributed, 30,250 individuals were trained in how to use naloxone, and 3,565 naloxone overdose reversals were reported.
- 1,400 naloxone kits have been provided to the Michigan State Police, and 2,760 naloxone kits have been provided to parole agents and criminal justice facilities.
- Over 10,000 individuals received relapse prevention services.
- Approximately 7,829 individuals received an initial contact from a peer recovery coach in outpatient or community settings; 13,762 follow-up contacts were made.
- 61 peer recovery coaches were placed in 25 Michigan hospitals through Project ASSERT, and 68% of patients receive follow-up from peer recovery coaches.

- Over 532 individuals received recovery housing support.
- 750 people accessed continuing care support.

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