

August 4, 2022



[D.C. Update: SAMHSA FY21 Profile on TOR Grant Recipients, CDC DOSE Dashboard on Nonfatal Overdose Data, CoE-PHI Webinar on SUD Treatment Privacy Laws, and More](#)

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## Meet the Member

### **Dr. Tammie Ross McCurry, SSA for Alabama, Associate Commissioner, Alabama Department of Mental Health, Division of Mental Health and Substance Abuse Services**



Associate Commissioner Dr. Tammie Ross McCurry's mental health experience spans over twenty-plus years. Starting her career as a counselor for the District Attorney's Pretrial Diversion Program; continuing on to Contract Counselor for the Department of Human Resources in numerous counties throughout the state; transitioning to Program Director for Mental Health and Substance Abuse Programs; and culminating as Executive Director for an agency serving individuals with Intellectual and Developmental Disabilities. Her career transitioned to working at the State level when she accepted a position as Director of Performance Improvement and Risk Management for the Alabama Department of Mental Health. She also served as Executive Assistant to the Associate Commissioner until December 1, 2019, when she was appointed as Associate Commissioner for Mental Health and Substance Abuse Services.

Dr. McCurry has been married to her husband and best friend Michael for over thirty-three years. She is the proud mother of six daughters and mother in love to three sons. She is also the proud grandmother of six grandsons and three granddaughters.

Dr. McCurry is a graduate of Jacksonville Theological Seminary where she received the Doctor of Ministry in Christian Counseling degree. She also holds an Associate of Science Degree in Criminal Justice; a Bachelor of Science Degree in Social Science; and a Master of Science Degree in Marriage and Family Therapy. Dr. McCurry is credentialed as a Human Services-Board Certified Practitioner (HS-BCP) and a Licensed Clinical Pastoral Counselor (LCPC).

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### SAMHSA Resource: Take Action to Prevent Underage Alcohol Use

The Substance Abuse and Mental Health Services Administration (SAMHSA) recently released a new [resource](#) on the importance of preventing underage alcohol use and the status of efforts to do so. The flyer illustrates the steady decline of alcohol use amongst adolescents, as well as provides parents and communities with information on the effectiveness of local, State, and national actions against underage drinking. More resources on the prevention and reduction of underage drinking can be found [here](#).



### SAMHSA FY21 Profile: Tribal Opioid Response Grant Recipients Encouraged to Incorporate Traditional Approaches to Recovery

**Tribal Opioid Response Grants**

**SAMHSA**  
Substance Abuse and Mental Health Services Administration

The Substance Abuse and Mental Health Services Administration's (SAMHSA) Office of Tribal Affairs and Policy (OTAP) recently released the [FY21 Profile on Tribal Opioid Response \(TOR\) Grant Recipients](#), detailing the achievements of the first three years of the [TOR grant program](#). The TOR grant program strives to decrease unmet treatment needs and opioid overdose-related deaths in Tribal communities by increasing access to culturally appropriate and evidence-based prevention, treatment, and recovery services for those with opioid use disorder (OUD). The brief includes data on client attributes, substances used, common diagnoses, and patient outcomes, as well as the treatment, prevention, recovery services, and cultural practices TOR grantees are implementing.

### CDC DOSE Dashboard: Nonfatal Overdose Data

The Centers for Disease Control and Prevention's (CDC) [Drug Overdose Surveillance and Epidemiology \(DOSE\) Dashboard](#) provides up-to-date data on nonfatal drug overdoses from the CDC's DOSE system, updated monthly. The [DOSE system](#) aims to rapidly identify outbreaks and provide situational awareness of drug overdose-related emergency department visits at the local, State, and regional levels by analyzing electronic health records from syndromic surveillance systems. CDC's DOSE dashboard is an interactive site that allows users to compare aggregate DOSE data on emergency department visits by drug, State, and timeframe. Currently, 47 states and the District of Columbia share data with DOSE, and states that do not are labeled "data not available" or "unfunded state." A how-to guide for using the dashboard can be found [here](#).

### HRSA Still Accepting Applications for RHC Buprenorphine-Trained Providers

**HRSA**  
Health Resources & Services Administration

The Health Resources and Services Administration (HRSA) is still accepting applications for the [Drug Addiction Treatment Act of 2000 \(DATA 2000\) Waiver Training Payment Program](#) launched in June 2021, which aims to expand access to substance use disorder (SUD) treatment through payments to providers who are [waivered to prescribe buprenorphine](#) to treat opioid use disorder (OUD). Eligible Rural Health Clinics (RHCs) can apply for a \$3,000 payment on behalf of each provider who trained to obtain the waiver necessary to prescribe buprenorphine after January 1, 2019. Approximately \$1.2 million in program funding remains available and will be offered on a first-come, first-served basis until exhausted.

### Provider Bridge: Mobilizing Health Care Workforce via Telehealth

**ProviderBridge**

The Federation of State Medical Boards (FSMB), through the Coronavirus Aid, Relief, and Economic Security (CARES) Act and Federal Office of Rural Health Policy (FORHP)-supported [Licensure Portability Grant Program](#), recently launched [ProviderBridge.org](#) to help mobilize the health care workforce during COVID-19. The site provides up-to-date

information on emergency regulations and licensing by State, as well as a provider portal to connect volunteer health care professionals to State agencies and other health care entities via telehealth. Provider Bridge fills a critical need by using telehealth services to quickly increase access to care in areas with health workforce shortages.

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## Research Roundup

### Study Finds Association Between Buprenorphine Treatment Duration and Mortality

A group of researchers published a [study](#) in the journal *Addiction* on the associations between buprenorphine treatment duration and three measures among those who discontinued treatment: all-cause mortality, drug overdose, and opioid-related overdose. The main findings include:

- The mortality rate after buprenorphine treatment was 1.82 per 100 person-years;
- With > 365 days as the reference group, treatment duration was not associated with all-cause mortality and drug overdose;
- Among patients who discontinue buprenorphine treatment, there appears to be no treatment duration period associated with a reduced risk for all-cause mortality;
- Treatment durations of 31-90 and 91-180 days were associated with increased mortality risks compared to longer treatment durations of 181-365 days;
- Compared to treatment durations of 6-12 months, those of 3-6 months were associated with an increased incidence of all-cause mortality, drug overdose, and opioid overdose;
- Patients who discontinue buprenorphine treatment after 91-180 days are at heightened risk for opioid overdose compared to patients who discontinue after > 365 days.

These findings do not support time limits on buprenorphine treatment nor an optimal period after which patients can safely discontinue treatment. The study calls for health systems to update policies on buprenorphine management, reduce patient treatment costs, implement medication first principles, and adopt low treatment threshold practices to encourage treatment retention.

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## Webinars to Watch

### CoE-PHI Webinar: The Current State of Privacy Laws for Substance Use Disorder Treatment



The Substance Abuse and Mental Health Services Administration's (SAMHSA) Center of Excellence for Protected Health Information (CoE-PHI) will host a [webinar](#) on the status of the federal privacy protections for substance use disorder (SUD) treatment records, 42 CFR Part 2, and the HIPAA Privacy Rule, and their implications for SUD treatment providers. This no-cost webinar will be offered on August 9, 2022, at 3:00 pm (ET). SUD and mental health treatment providers, clients, administrators, State Agency leaders, and others involved in SUD treatment or coordinating care for SUD treatment are encouraged to attend. The webinar will:

- "Describe the current status of the federal privacy laws that apply to SUD treatment records (42 CFR Part 2 and HIPAA)
- Outline forthcoming changes to 42 CFR Part 2 (through the CARES Act)
- Identify how to access resources and technical assistance through the CoE-PHI."

### ATTC Webinar: "A Cultural Adaptation of SBIRT for Working with Hispanic and Latinx Communities" - Part 2



The National Hispanic and Latino Addiction Technology Transfer Center (ATTC) will host the [second of its two-part webinar series](#) on culturally appropriate adaptations of

Screening, Brief Intervention, and Referral to Treatment (SBIRT) practices to help "Hispanic and Latinx clients" address substance use disorder (SUD) in at-risk communities on August 10, 2022, at 2:30 pm (ET). This no-cost webinar builds on [part 1](#) and will:

- “Define the Screening, Brief Intervention, and Referral to Treatment, (SBIRT) model
- List opportunities for cultural adaptations
- List dynamics of a culturally appropriate, trauma informed, inclusive environment
- Identify factors of a culturally responsive rapport and engagement for screening
- List benefits of the person-centered approach using core skills of motivational interviewing in a brief intervention interaction
- Identify benefits of working with client’s cultural concept of substance use
- List cultural considerations for a referral to treatment and language conducive terminology.”