
Meet the Member

Katie Stratton, M.S., WSC for Kentucky, Program Administrator, Kentucky Department of Behavioral Health

Katie earned her Master of Science in Clinical Psychology from Capella University. She is currently a Program Administrator at the Kentucky Department of Behavioral Health, Developmental and Intellectual Disabilities in the Adult Substance Use Treatment and Recovery Services Branch where she collaborates with several agencies within Kentucky working to assist in creating and establishing a System of Care for women with substance use concerns and their families. Katie also serves as the Women’s Service Coordinator (WSC) for Kentucky. Prior to her work with substance use, Katie was a child and adolescent therapist in a Psychiatric Residential Treatment Facility for almost 5 years and an outpatient therapist for 2 years. In her free time, she is a wife, mother of a soon-to-be 15-year-old daughter, a first-born over achiever who takes on way too much including crafting, a youth competitive archery coach, and a 4H Shooting Sports Coach.

Around the Agencies

New SAMHSA Webpage on Training Requirements (MATE Act)

The Substance Abuse and Mental Health Services Administration (SAMHSA) recently created a new webpage with several resources around updated guidance on the Drug
Enforcement Administration’s (DEA) Training Requirements (MATE Act) for evidence-based care for opioid use disorder (OUD). This comes after the elimination of the DATA waiver previously required to prescribe buprenorphine and the institution of new training requirements for substance use disorder (SUD) practitioners. This webpage answers frequently asked questions (FAQ) about the elimination of the waiver and DEA training requirements within the Mainstreaming Addiction Treatment (MAT) and Medication Access and Training Expansion (MATE) Acts, as well as providing new educational outreach materials created by both SAMHSA and the DEA. To access the webpage on updated MAT/MATE Act information, visit the SAMHSA website here.

New SAMHSA Resource: TIP 64: Incorporating Peer Support Into Substance Use Disorder Treatment Services

The Substance Abuse and Mental Health Services Administration (SAMHSA) recently released a new resource: Treatment Improvement Protocol (TIP) on Incorporating Peer Support Into Substance Use Disorder Treatment Services. This new resource “...supports learning about the key aspects, functions, and uses of Peer Support Services (PSS) in recovery from problematic substance use, which will help providers, supervisors, and administrators in SUD treatment programs better understand and respond to these changes.” The guide can be downloaded on SAMSA’s website, here.


The Substance Abuse and Mental Health Services Administration (SAMHSA) recently announced a $2 million funding opportunity for the Minority HIV/AIDS Fund: Integrated Behavioral Health and HIV Care for Unsheltered Populations Pilot Project. The program intends to “…pilot an approach to comprehensive healthcare for racial and ethnic medically underserved people experiencing unsheltered homelessness through the delivery of portable clinical care delivered outside that is focused on the integration of behavioral health and HIV treatment and prevention services.”

SAMHSA will offer 3 awards of up to $666,666 per year for projects of up to 3 years. Applications are due July 24, 2023.

New SAMHSA Funding Opportunity: Cooperative Agreement for the Refugee and Migrant Behavioral Health Technical Assistance Center

The Substance Abuse and Mental Health Services Administration (SAMHSA) recently announced a $3 million funding opportunity for the Cooperative Agreement for the Refugee and Migrant Behavioral Health Technical Assistance Center. The program is designed to create “…a Technical Assistance (TA) center to grow the capacity of healthcare providers and organizations that serve refugee and migrant people in the US. The TA Center will provide learning opportunities, training, and technical assistance, including clinical consultation; interactive online learning modules; learning communities; targeted TA and coaching; online educational materials and resources that are culturally relevant, language-relevant, resiliency-focused, and trauma-informed.”

SAMHSA will provide one award of $3 million for a project of up to 5 years. Applications are due August 29, 2023.

BJA and NIC Releases New Tool to Manage Substance Withdrawals within Jails

The Department of Justice’s (DOJ) Bureau of Justice Assistance (BJA) and the National Institute of Corrections (NIC) recently released the Guidelines for Managing Substance Withdrawal in Jails: A Tool for Local Government Officials, Jail Administrators, Correctional Officers and Health Care Professionals. The guide “…outlines the steps all jails should take to implement effective withdrawal management. It is designed to inform development of or revisions to existing withdrawal management policies and procedures responsive to specific substances or combinations of substances and reflective of a jail’s capacity.” With the wide-spread knowledge of the high
prevalence of SUD among individuals in jail, these guidelines serve as “an important tool for corrections and health care staff who often face life-saving situations in their daily work life.” These guidelines can be downloaded on the BJA website, here.

**New NIAAA Resource: Alcohol And Your Brain Virtual Reality Experience**

The National Institutes of Health’s (NIH) National Institute on Alcohol Abuse and Alcoholism (NIAAA) recently released a new resource: the Alcohol and Your Brain Virtual Reality (VR) Experience. This interactive activity is designed for youth ages 13 and older to learn about the effects of alcohol use on five areas of the brain. The immersive educational experience shares age-appropriate messages to teach users about key brain regions affected by alcohol and how alcohol affects behavior. Two versions of the Alcohol and Your Brain Experience are currently available:

1. “Free Download - For anyone age 13+ with Quest, Quest 2, or Meta Quest Pro VR headsets, the free NIAAA app can be downloaded through the App Lab.
2. On YouTube - Parents and educators can share the non-VR YouTube video version with students on any computer or mobile device. An audio-described video is also available.”

Additional information on the Alcohol and Your Brain Experience’s can be found on NIAAA’s website, here.

**CDC’s Division of Overdose Prevention Releases New Prevention and Surveillance Resources**

The Centers for Disease Control and Prevention’s (CDC) Division of Overdose Prevention recently released new prevention and surveillance resources, including a report on overdose deaths from fentanyl mixed with xylazine and two nonfatal overdose dashboards.

- The Morbidity and Mortality Weekly Report (MMWR) Illicitly Manufactured Fentanyl-Involved Overdose Deaths with Detected Xylazine - United States, January 2019-June 2022 highlights the emerging threat of the presence of xylazine in illegal fentanyl products, finding that “…the monthly percentage of IMF-involved deaths with xylazine detected increased 276% (from 2.9% to 10.9%).”
- The DOSE Emergency Department (ED) and Inpatient Hospitalization Discharge Data nonfatal overdose dashboard “…provides monthly and annual counts and rates of nonfatal overdose ED visits and inpatient hospitalizations for overdoses involving all drugs, all opioids, heroin and all stimulants.”
- The Fentalog Study: A Subset of Nonfatal Suspected Opioid Overdoses with Toxicology Testing nonfatal overdose dashboard “Provides estimates of substances detected by toxicology testing in blood samples from patients experiencing a suspected opioid-involved overdose.”

The CDC’s Division of Overdose Prevention website with additional prevention resources can be found here.

**Research Round-Up**

**SAMHSA’s Mental and Substance Use Disorders Prevalence Study Findings**

The Research Triangle Institute (RTI) International recently published findings of the Mental and Substance Use Disorders Prevalence Study (MDPS), a Substance Abuse and Mental Health Services Administration (SAMHSA)-funded study. From October 2020 to October 2022, this study conducted 5,679 clinical interviews among 18-65-year-olds to address gaps in the understanding of mental health and substance use disorder (SUD) among people who do not reside in households, including the homeless, those living in prisons, state psychiatric hospitals, and homeless shelters. Key findings related to the prevalence of mental health and SUD and treatment rates include:

- “The most common substance use disorder among adults aged 18 to 65 was...
alcohol use disorder. Approximately 13.4 million adults (6.7 percent) met criteria for alcohol use disorder in the past year.

- A total of 3.8 percent of adults aged 18 to 65 had cannabis use disorder (approximately 7.7 million adults), 1.6 percent had stimulant use disorder (approximately 3.2 million adults), and 0.5 percent had opioid use disorder (approximately 1.0 million adults). Substance use disorder estimates are lower than those found in prior research.
- One in 20 adults aged 18 to 65 (5.5 percent) had at least one MDPS mental disorder and at least one MDPS substance use disorder. This percentage represents approximately 11.0 million adults aged 18 to 65 with co-occurring mental and substance use disorders in the past year.
- Among adults aged 18 to 65 with any MDPS substance use disorder, 12.2 percent received any treatment in the past year.”

To read more about this study and its findings, visit the RTI website [here](#).

### Webinars to Watch

**O’Neill Institute’s Addiction and Public Policy Initiative In-Person Meeting and Webinar: Lessons Learned from Portugal’s Pioneering Drug Policy**

The O’Neill Institute’s Addiction and Public Policy Initiative is hosting a hybrid meeting with Dr. João Goulão, Portugal’s General-Director for Intervention on Addictive Behaviours and Dependencies, on Lessons Learned from Portugal’s Pioneering Drug Policy. The meeting aims “…to discuss the future of addiction policy in the U.S. and globally.” This no-cost discussion will be held on July 11th at 10:30 AM (ET). In-person participants can attend at 500 First Street NW, Georgetown University Law Center while virtual participants can attend through Zoom. Registration is required.

**CoE-PHI Webinar: 2023 Privacy Update: Federal Laws, Regulations, and Trends for SUD and Mental Health Treatment Data**

The Center of Excellence for Protected Health Information (CoE-PHI), in collaboration with Cicatelli Associates Inc (CAI) and the Legal Action Center, are hosting a webinar on 2023 Privacy Update: Federal Laws, Regulations, and Trends for SUD and Mental Health Treatment Data. This no-cost webinar is being offered on July 12 at 2:00 pm (ET). The webinar will outline the current State of the federal laws, regulations, and guidance concerning privacy of substance use disorder (SUD) and mental health treatment data. Specifically, the webinar will:

- “Identify recent and forthcoming changes related to HIPAA, 42 CFR Part 2, the Information Blocking Rule, and the end of the Public Health Emergency; and
- share resources and access to CoE-PHI’s technical assistance.”

Registration is required and will be open through July 12 at 1:45 pm (ET).

**CMCS Webinar: From Corrections to Community: Navigating the New Medicaid Section 1115 Demonstration Opportunity, Part 1**

The Department of Health and Human Services’ (HHS) Center for Medicaid and CHIP Services (CMCS) have partnered with the Department of Justice’s (DOJ) Office of Justice Programs (OJP) to offer a webinar on From Corrections to Community: Navigating the New Medicaid Section 1115 Demonstration Opportunity. This no-cost webinar is offered on July 19th at 2:00 PM (ET) and will introduce “…correctional leaders and allied stakeholders to the opportunities available under the new Medicaid Reentry Section 1115 demonstration opportunity to support transition-related strategies, pre-release services, and community reentry.”

The webinar aims to:

- “Identify key opportunities for covering pre-release services under the...”
demonstration opportunity and how the demonstration can support continuity of care for individuals with physical and behavioral health needs during reentry”

- “Highlight potential benefits from the demonstration opportunity, including to corrections agencies and to people incarcerated and reentering into the community.”

Registration is required.