Pennsylvania's Response to the Opioid Epidemic

October 2018

Jennifer Smith, Secretary

Department of Drug and Alcohol Programs



Learning Objectives

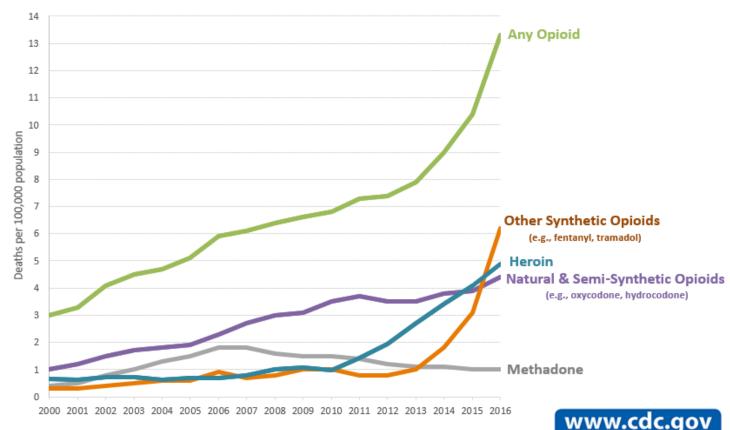
- Learners will be able to identify two recent changes in the Substance Use Disorder (SUD) landscape
- Participants will be able to list three commonwealth projects to address the epidemic
- Attendees will be able to identify at least two next steps for continued action



Substance Abuse Mortality

NUMBERS CDC Statistics, August 2018

- Jan 2017 Jan 2018
 - Drug overdose deaths: 71,568
 - Opioid deaths: 48,612
 - Drug overdose deaths increased 6.6% from previous year
 - Opioid overdose deaths increased 8.5% from previous year
- June 14, 2018 (CDC YRBS):
 - 1 in 7 US High School students report misusing opioids

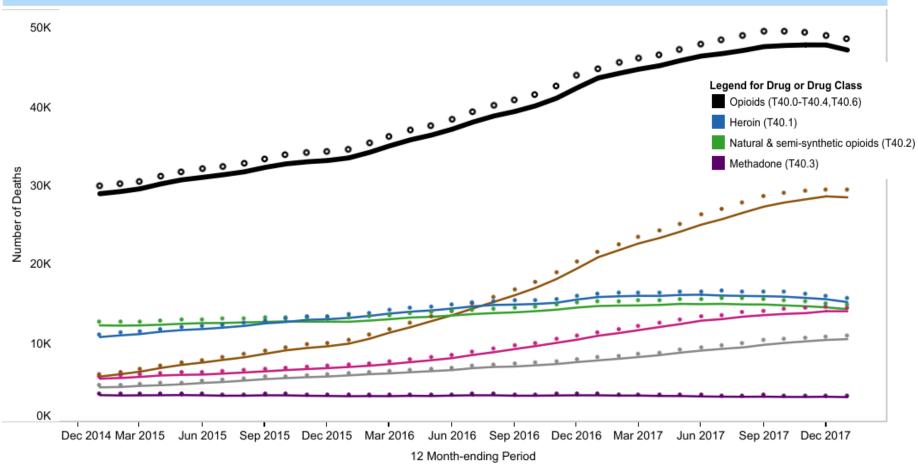






Overdose Mortality by Drug Class

Figure 2. 12 Month-ending Provisional Number of Drug Overdose Deaths by Drug or Drug Class: United States



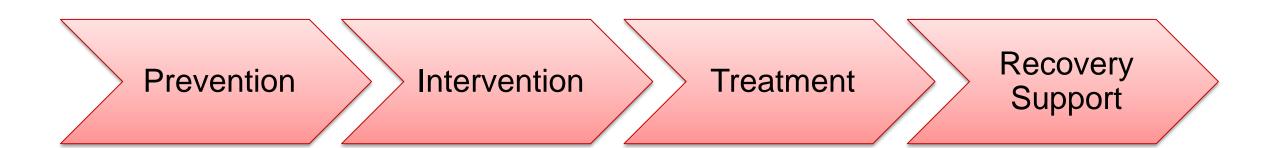


Synthetic opioids, excl. methadone (T40.4)

Psychostimulants with abuse potential (T43.6)

Cocaine (T40.5)

Fighting the Epidemic – Major Focal Areas



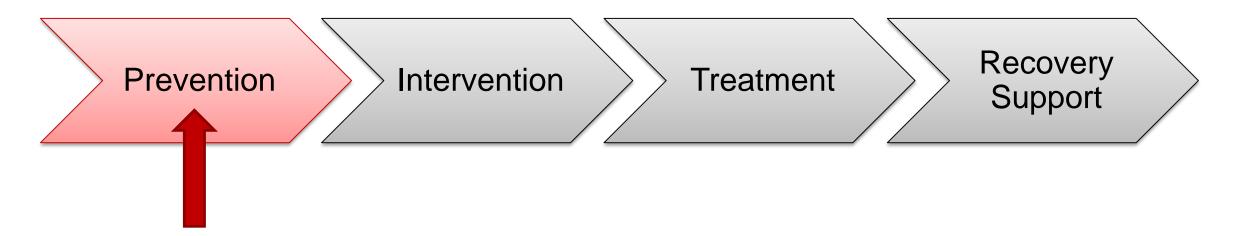


Fighting the Epidemic—Wolf Administration Efforts

- Disaster Declaration
- Opioid Data Dashboard
- Prescription Drug Monitoring Program
- Updated Prescribing Guidelines
- Warm Handoff Protocols
- Centers of Excellence (COEs)

- Naloxone Standing Order
- Pennsylvania Coordinated Medication-Assisted Treatment Centers (PacMAT)
- Prescription Drug Take-Back Program
- PA Get Help Now Hotline
- Provider Capacity and Service Expansion





Prevention is a critical component for reducing the rate of substance use disorder (SUD) and overdose in the coming years.



Prevention

Strategic Prevention Framework

Pennsylvania's prevention system is built on an Evidence Based model used at the federal level called the *Strategic Prevention Framework (SPF)*. PA requires the Single County Authorities (SCAs) to use the SPF model which utilizes the following 5 steps:

- 1. Assess their prevention needs based on epidemiological data
- 2. Build prevention capacity to meet needs
- 3. Develop a strategic plan
- 4. Implement effective community prevention programs, policies, and practices
- 5. Evaluate their efforts for outcomes.



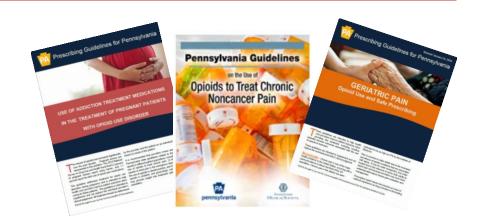


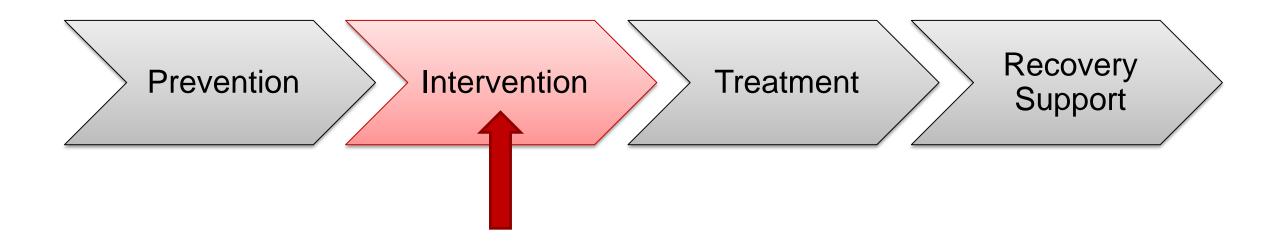
Prevention

Prescribing Guidelines

- Opioids to Treat Chronic Non-cancer Pain
- Emergency Department Pain Treatment
- Opioids in Dental Practice
- Opioid Dispensing
- Obstetrics and Gynecology Pain Management
- Geriatric Pain
- Use of Addiction Treatment Medications in the Treatment of Pregnant Patients with OUD
- Safe Prescribing of Benzodiazepines for Acute Treatment of Anxiety and Insomnia
- Safe Prescribing of Opioids in Orthopedics and Sports Medicine
- Safe Prescribing of Opioids in Pediatric and Adolescent Populations
- Safe Prescribing for Workers' Compensation
- Continuing Medical Education Course Development
- Medical School Curriculum Changes







Intervention involves targeted efforts to support at-risk individuals.



Intervention

Naloxone for police and first responders

Act 139 of 2014 made naloxone available to police, firefighters and family members and friends of those at risk of heroin or other opioid overdose. Through their efforts, more than **16,000** overdoses have been reversed. Currently, more than 700 municipal police departments and 1,200 State Police patrol cars are equipped with naloxone through DDAP's efforts. Also, Governor Wolf dedicated \$5 million for free naloxone distribution to first responders across the state.

How do I get naloxone?

- o Doctor's prescription
- Standing order (a prescription written for the general public, rather than specifically for an individual) issued by, then Physician General, now Secretary Dr. Rachel Levine

Types of naloxone commonly used

- Narcan Nasal Spray (manufactured by Adapt Pharma)
- Evzio Auto-Injector (manufactured by Kaleo)

Training is available

- o www.getnaloxonenow.org
- o https://www.pavtn.net/act-139-training







Intervention

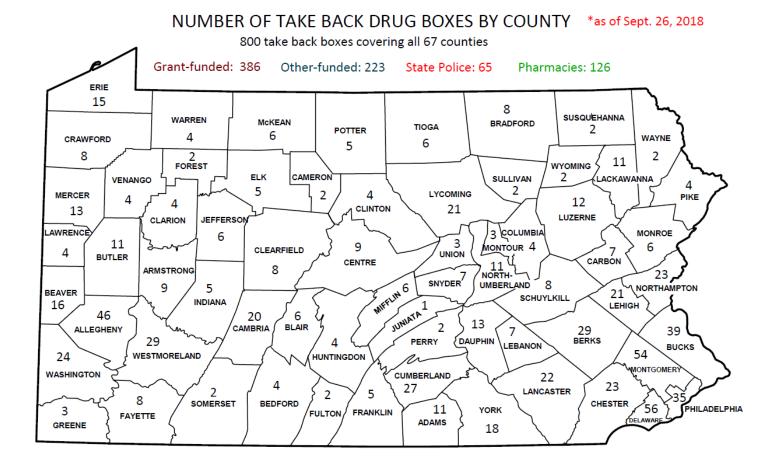
Prescription Drug Take-Back Program

2018: 103,150lbs. (to date)

2017: 162,049lbs.

2016: 124,336 lbs.

Over 440,000 lbs. of medication has been collected and destroyed since January 2014





Intervention (and referral to Treatment)

Warm handoff

A protocol to get overdose survivors directly from an emergency department into to treatment.

Single County Authorities are required by DDAP's Treatment Manual to have warm handoff procedures in place, which necessitate coordination with hospital emergency departments and Centers of Excellence (COEs).



Intervention (and referral to Treatment)

Student Assistance Program

This evidence based approach involves the coordination of a range of professionals to identify, screen, and refer at-risk youth to appropriate SUD clinical services.

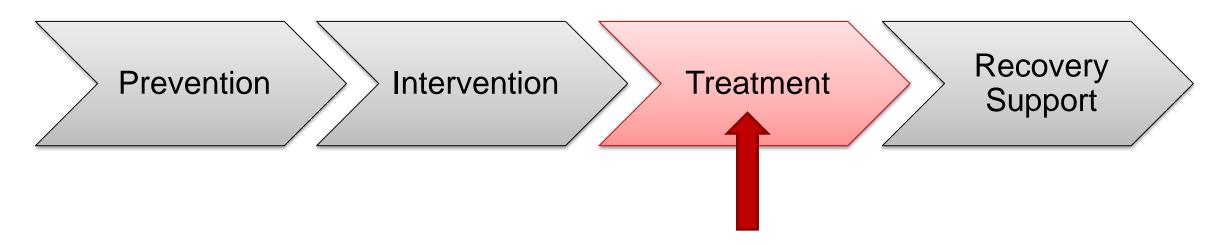
Prescription Drug Monitoring Program (PDMP)

Collects information on all filled prescriptions for controlled substances. This information helps health care providers safely prescribe controlled substances and helps patients get the treatment they need.

Outcomes: Opioid prescriptions are down 20% from 2016

Doctor shopping eliminated





Treatment, as clinically assessed, must be accessible and available.



Treatment

- Ensuring Clinical Integrity
- Implementation of ASAM Criteria Placement Tool
 - Implemented July 2018
 - **Benefits include:** Shifting clinicians from checklists to a more individualized approach, addressing MAT in a more comprehensive manner; standardizing PA with others across the nation; aligning the tool used for both adult and adolescent assessments; allowing for submission of an 1115 waiver; and integrating with the new DDAP treatment data system (i.e. WITS)
- > Implementation of a new Treatment Data System (WITS)
 - Implemented July 2018
 - Goals: Enable PA to meet its SAPT block grant requirements to ensure continued program funding and replace the previous treatment data system that was decommissioned in 2015.



Treatment

Provider Capacity and Service Expansion

PA continues to assess needs and capacity across the state to determine where gaps exist and how we can best collaborate with providers to meet those needs. We have received several federal grants that will enable us to accomplish this goal including the 21st Century Cures grant, the State Opioid Response (SOR) grant, and several grants focused on expanding MAT, as listed below.

- Enhancing Services through the Centers of Excellence (COE) COEs focus on Medication Assisted Treatment (MAT) and evidence-based practices to coordinate care for Medicaid patients with Opioid Use Disorder. Treatment is "whole-person focused" to integrate behavioral health, primary care, and substance use treatment. In addition, wrap-around supportive services are provided to improve the likelihood of sustained recovery. Each COE is expected to increase access for 300 new clients annually and report on quality metrics.
- Creation of PacMAT (Pennsylvania Coordinated Medication Assisted Treatment) Centers Hub and spoke model for uninsured and privately insured patients. Similar concept to the COEs, but provides and addiction medicine specialist at the hub. PA utilized \$7 million of its 21st Century Cures Grant funding to establish 8 PacMAT centers. We also received a \$5.7 million MAT grant from SAMHSA to implement a large-scale PacMAT center in partnership with UPMC.
- Access to MAT in Rural PA PA received a \$3 million grant to expand MAT services in rural areas.
- **Allocation to Single County Authorities** \$12 million each year for 2 years from the 21st Century Cures grant has been allocated to local authorities for the purpose of expanding access and services.



Treatment

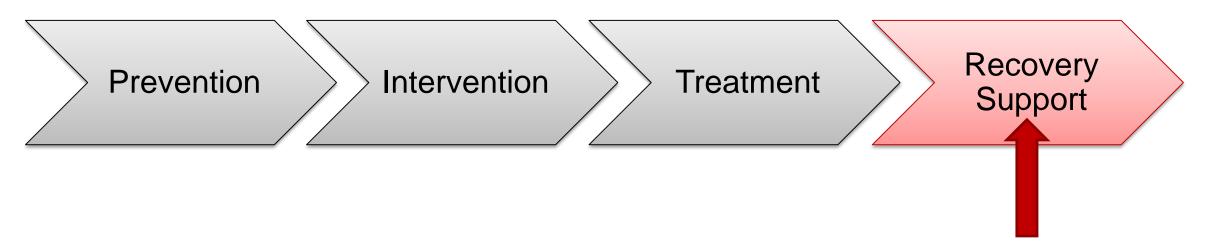
MAT Initiation in the Emergency Department

Workforce Development

- PA Get Help Now Hotline
 - Available 24/7, 365 days a year
 - More than 33,000 calls received since November 10, 2016
 - Approximately 50% of calls result in a warm line transfer directly into treatment
 - Text and chat features are available, which may be more enticing to younger generations
 - Helps access treatment providers through a warm line transfer, provides county resources, assists with navigating insurance benefits, identifies drug-take back box locations, and much more







Recovery supports are non-clinical services that supplement treatment and help individuals stay engaged in the recovery process.



Recovery Support

> Safe Recovery Housing

> Peer Support Services

> Recovery Organizations

> Pathway to Pardons



Next Steps for Continued Action

> State Opioid Response Grant

Purpose	Amount	Timeline
To increase access to treatment, reduce unmet treatment needs, and reduce opioid overdose deaths through prevention, treatment and recovery activities.	\$55.9 million annually	Funds were made available in October 2018

Overdose Dashboard Reporting



Resources

- DDAP website: www.ddap.pa.gov
 - > PA Get Help Now hotline and app for locating facilities
 - Prescription Drug Drop-box Locator
- DOH website: www.health.pa.gov
 - Prescribing Guidelines
 - Prescription Drug Monitoring Program (PDMP)
- > Centers of Excellence website: <u>www.dhs.pa.gov/citizens/substanceabuseservices/centersofexcellence</u>
- Substance Abuse and Mental Health Services Administration (SAMHSA) website: www.samhsa.gov

Jennifer Smith

jensmith@pa.gov

Phone: 717.214.1937

