

Moving Forward Together: The Role and Value of Behavioral Health Integration Toward Addressing the Opioid Crisis

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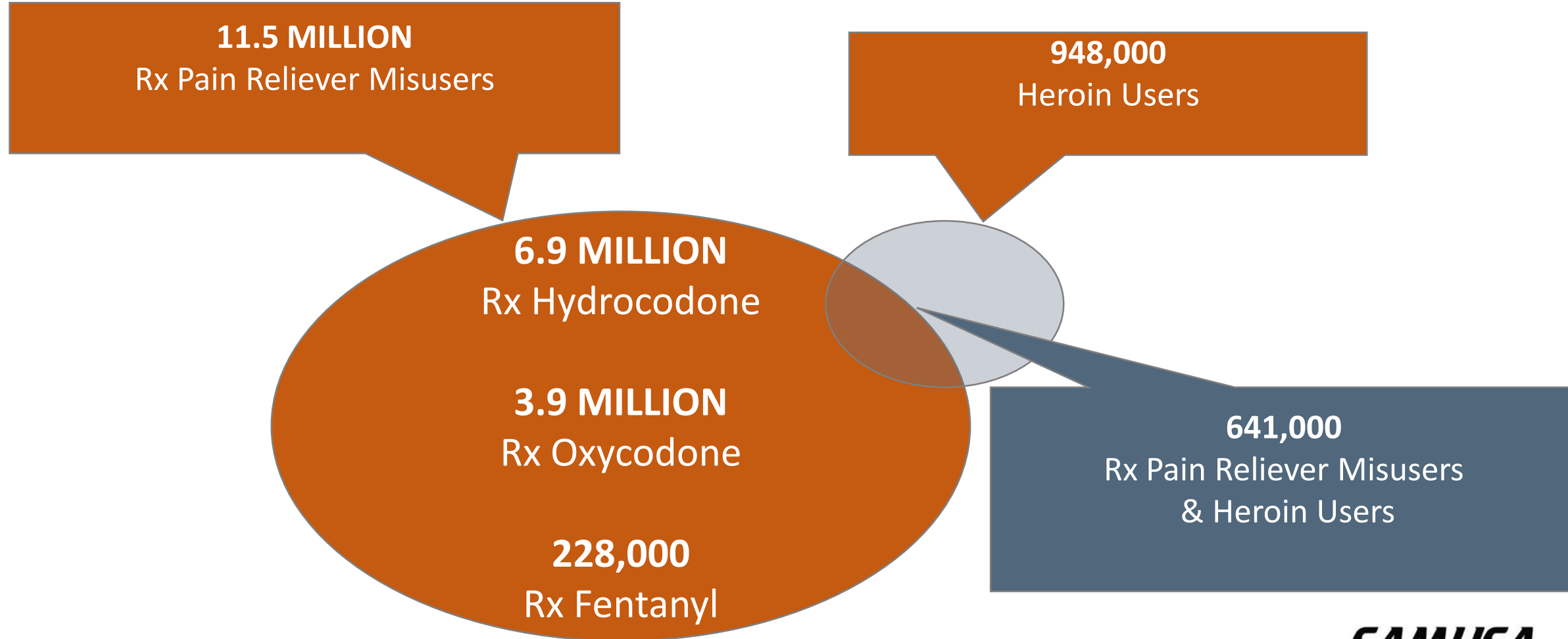
SAMHSA
Substance Abuse and Mental Health
Services Administration

Opioid Crisis

- 2.1 million Americans with Opioid Use Disorder (OUD)
- Only 20% with OUD received specialty addiction treatment and only 37% of those received MAT
- Over 63,632 drug overdose deaths in 2016 of which 42,249 – 66% from opioids

NSDUH: The Grip Of Opioids

11.8 MILLION PEOPLE W/OPIOID MISUSE (4.4% OF TOTAL POPULATION)

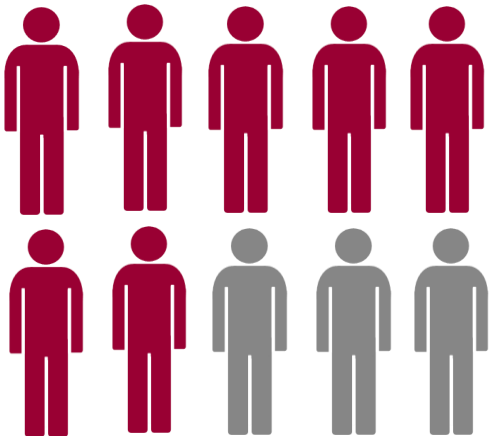


Risk Factors for Heroin Misuse

Nonmedical use of Rx Opioids => significant risk for heroin use

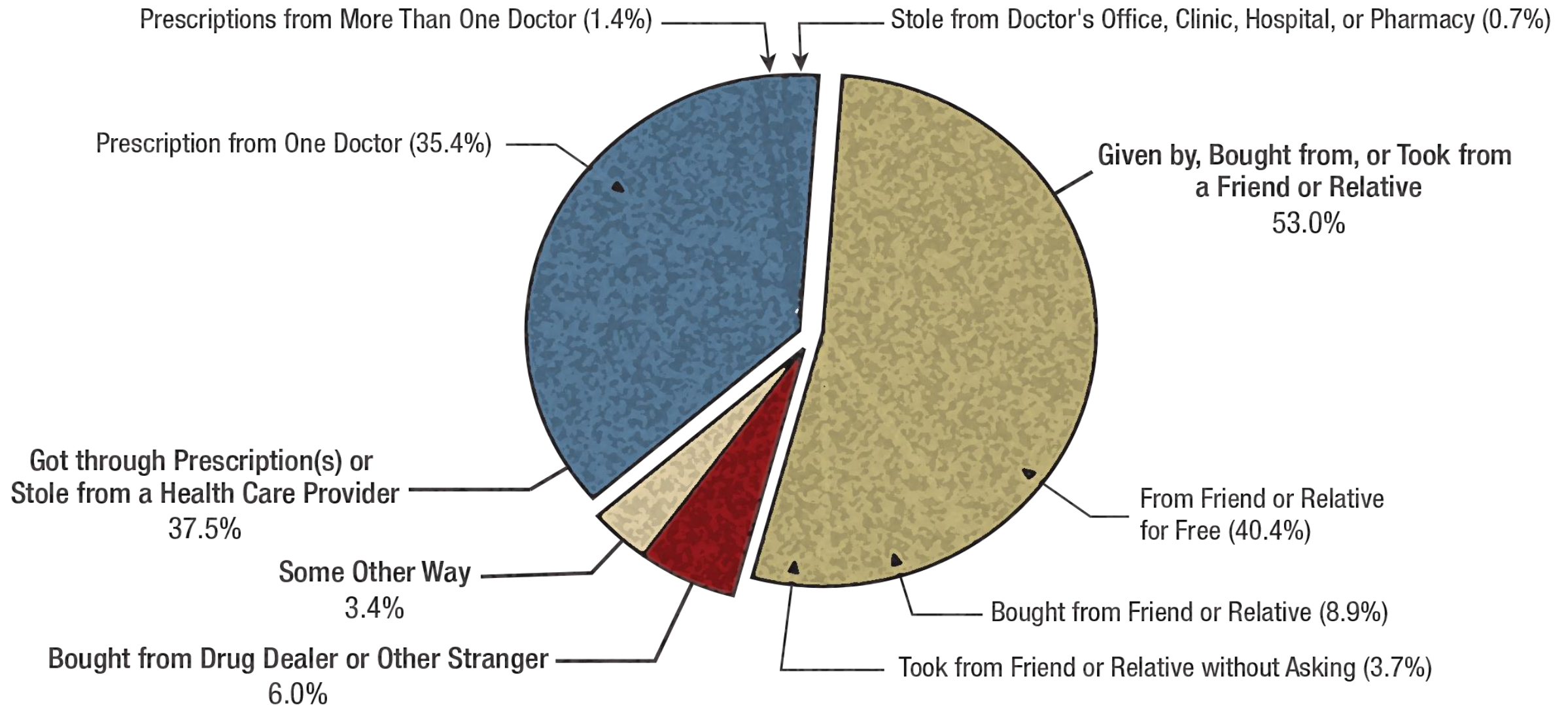


3 out of 4 people who used heroin in the past year misused opioids first



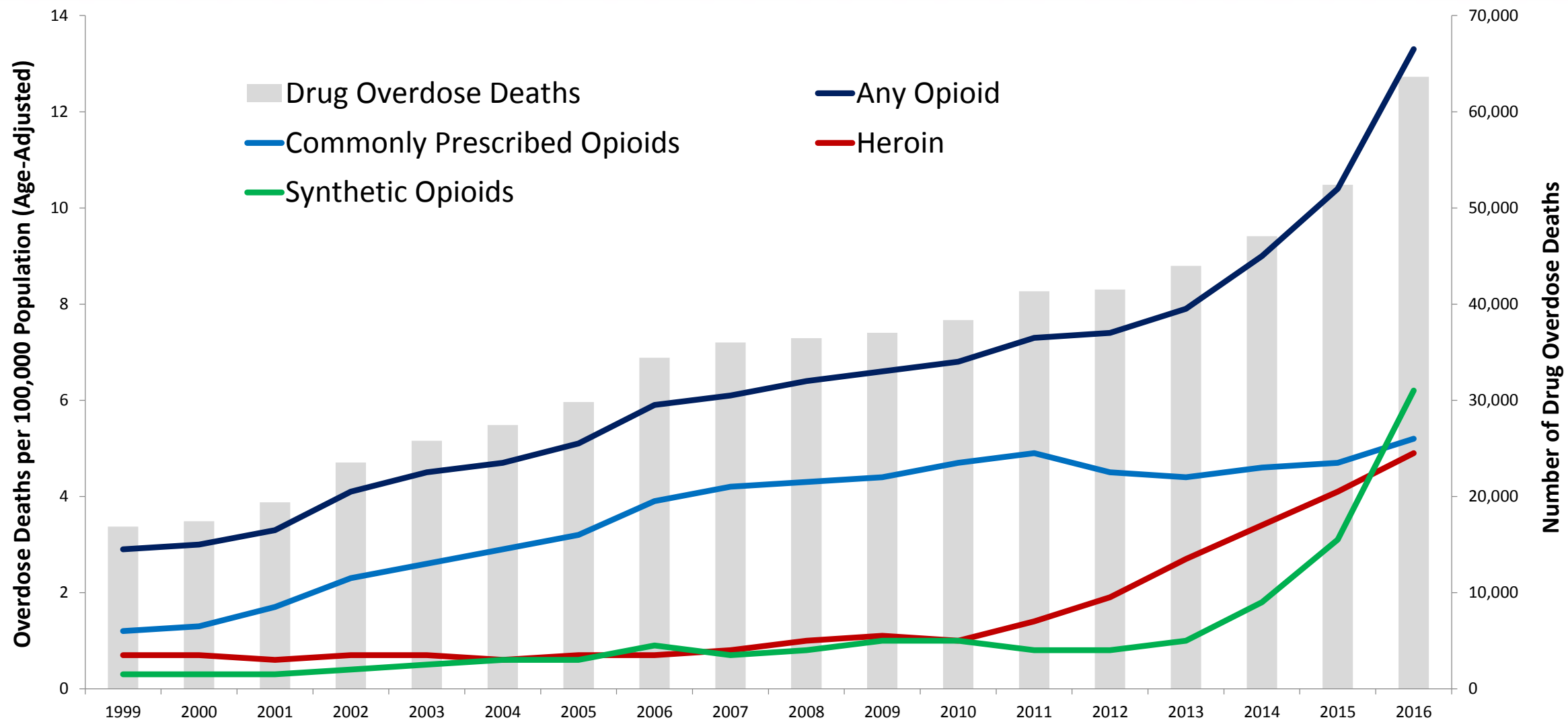
7 out of 10 people who used heroin in the past year also misused opioids in the past year

Source of Opioid Pain Medication Misuse (NSDUH, 2016)



11.5 Million People Aged 12 or Older Who Misused Prescription Pain Relievers in the Past Year

Opioid Overdose Deaths at Historically High Levels



Opioid Related Deaths

State	2011	2012	2013	2014	2015	2016	Total
Illinois	907	1151	1072	1203	1382	1946	7,661
Indiana	347	361	350	452	529	785	2,824
Michigan	714	685	909	1001	1275	1699	6,283
Minnesota	291	293	306	317	336	395	1,938
Ohio	1163	1272	1539	2020	2590	3495	12,079
Wisconsin	468	502	588	622	614	827	3,621
Total							34,406

HHS Opioid Strategy

HHS 5-POINT STRATEGY TO COMBAT THE OPIOID CRISIS



HHS Response

- SAMHSA: Grants for prevention, treatment, and recovery services
- CDC: Data tracking, PDMPs, Prescriber guidelines; community prevention grants
- FDA: Reviewing what should come off market, and looking at non-addictive pain alternatives.
- NIH: Research on treatment of addiction, overdose, and non-addictive pain therapies.
- CMS: Medicaid and Medicare policies and payments for prescriptions and for treatment.
- HRSA: CHC SUD treatment funds; tele-health grants; NHSC; community planning grants
- OASH: National Pain Task Force; National Pain Strategy; Grants for opiates & women; the Surgeon General Report *"Facing Addiction in America."*
- ACF: Foster care for children impacted by opioids
- OCR: Clarifying HIPAA rules regarding information sharing
- IHS: National Committee on Heroin, Opioids, and Pain Efforts (HOPE)

Strategies to Address the Opioid Epidemic

Community Prevention

1. Strategic Planning
2. Community & Provider Education
3. Harm Reduction
4. Medication Disposal

Crisis Services

1. Naloxone distribution & education: 1st responders, patients, family
2. ER overdose education (MAT initiation)
3. Detoxification
4. Link ER/Detox to treatment

Clinical Practice

1. CDC Pain Management Guidelines
2. Screening & Assessment
3. Medication Assisted Treatment
4. SUD Levels of Treatment
5. PDMP
6. Tele-Health

Recovery Support

1. Access to Health Care
2. Safe & Affordable Housing
3. Education & Employment
4. Social & Community Connections

Workforce

1. Data 2000 Waiver (MD/PA/APRN)
2. Clinician Support & Continuing Education
3. Recruitment & Retention Plans
4. Integrated Care Competencies
5. Peer Recovery

MAT: Standard of Care for Opioid Use Disorders

Medicated-Assisted Treatment (MAT) is the use of FDA- approved medications, in combination with counseling and behavioral therapies, to provide a “whole-patient” approach to the treatment of substance use disorders.

- MAT for Opioid Use Disorder
- MAT for Alcohol Use Disorder
- MAT for Smoking

How is Opioid Use Disorder Treated?

- **Combination of FDA-approved medication (Medication Assisted Treatment (MAT):** for as long as the person benefits from the care
 - Naltrexone: blocks effects of opioids
 - Methadone: long acting, once-daily, opioid from specially licensed programs
 - Buprenorphine/naloxone: long acting, once-daily, opioid from doctor's offices; available by prescription
- **Medical Withdrawal ("Detoxification")**
 - > 80% relapse rate in the year following treatment
 - High risk for overdose and death when relapse occurs
 - Should not be a stand alone treatment
- **Addressing Safety:** Naloxone dispensing

How is Opioid Use Disorder Treated?

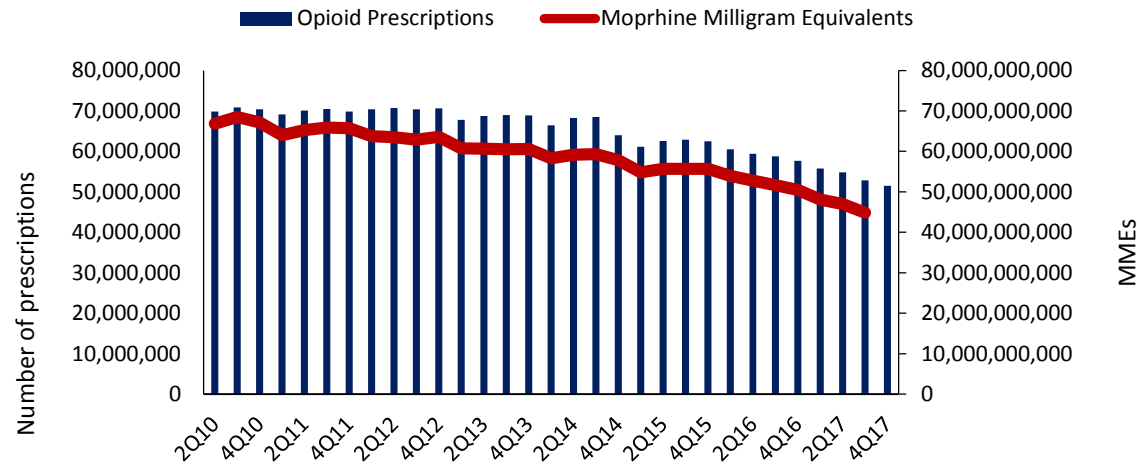
- **Psychosocial therapies/treatment components:**
 - Counseling: Coping skills/relapse prevention
 - Education about issues related to substance use
 - PDMP use
 - Toxicology screening
- **Plus Recovery Supports: Rebuilding One's Life**
 - Social supports to bring the person back into the healthy community: family, friends, peers, faith-based supports
 - Recovery Housing/Residential Treatment Facilities
 - Employment/Vocational training/education
 - Assistance with transportation
 - Assistance with child care
- **Behavioral Health Treatment Services Locator: [Findtreatment.samhsa.gov](https://findtreatment.samhsa.gov)**

MAT: People Recover

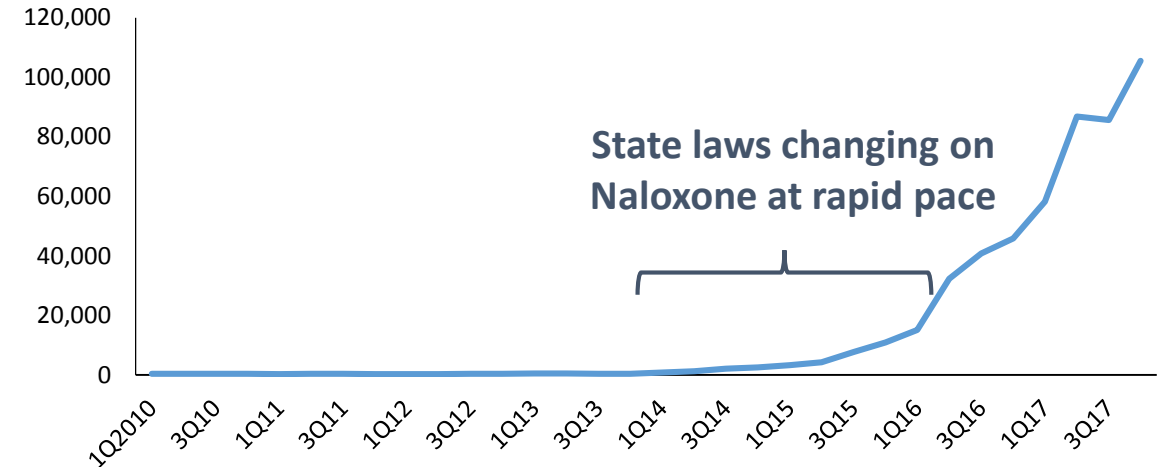
1. Addiction is a chronic AND treatable illness.
2. Use of medication to treat opioid use disorder is NOT continuing addiction; it is NOT substituting one drug for another.
3. Opioid medications used to treat opioid addiction block withdrawal and reduce craving; eliminates compulsive use of illicit opioids multiple times a day
4. Patient-centered health care empowers patients with information that helps them make better treatment decisions with their healthcare professionals.
5. Patients with OUD should have access to mental health care, medical care, & addiction counseling, as well as recovery support services, to supplement MAT.
6. Numerous studies show that relapse occurs at high rates when medication is stopped; Discontinuation needs to be done carefully; requires collaboration with primary providers
7. Treatment helps people re-establish healthy lifestyles, rebuild relationships, attain employment, and care for their families

Emerging Signs of Progress

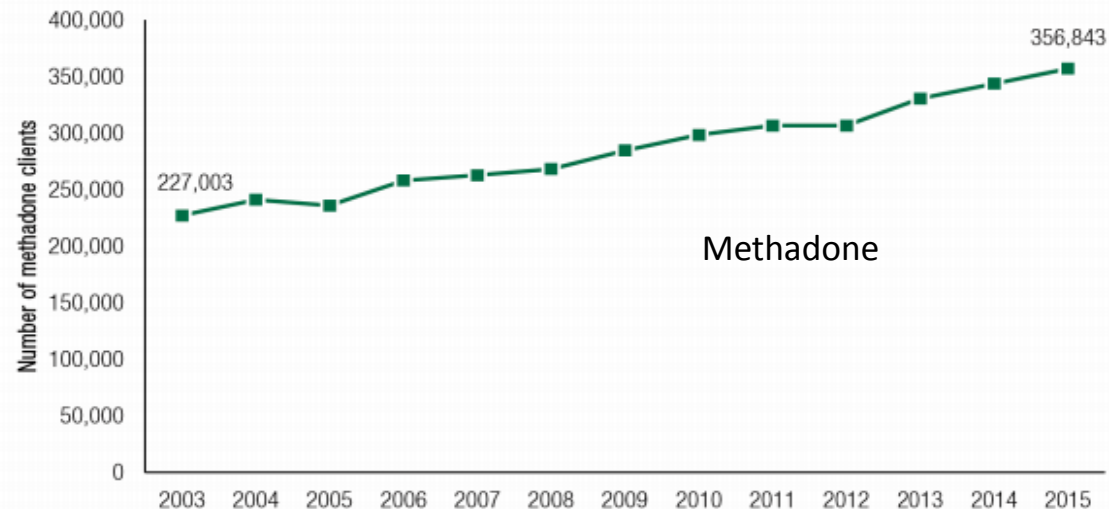
Decreasing Opioid Prescribing



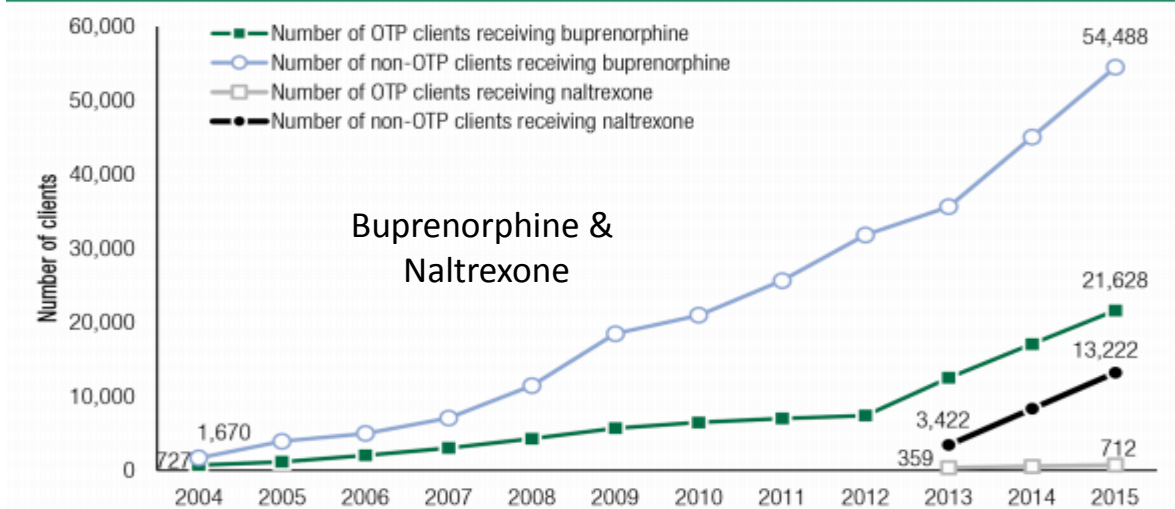
Increasing Naloxone Dispensing



Increasing Receipt of MAT

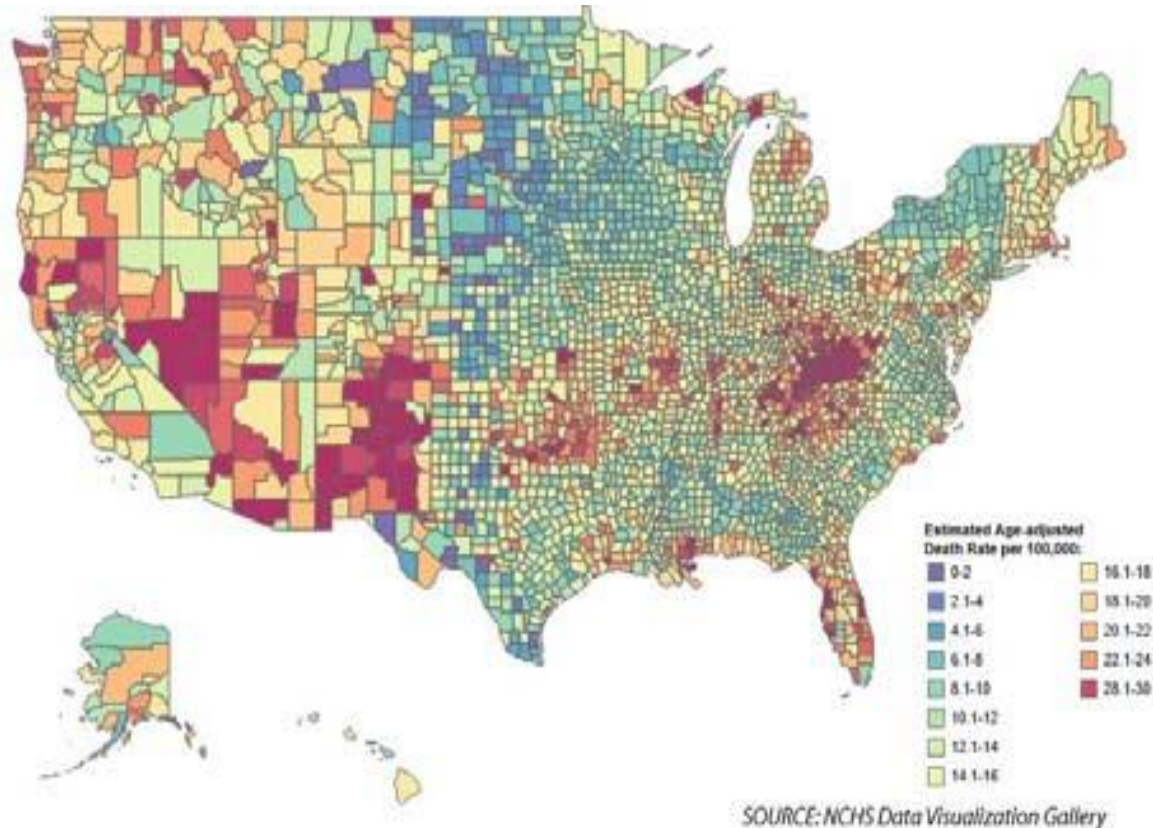


Increasing Receipt of MAT



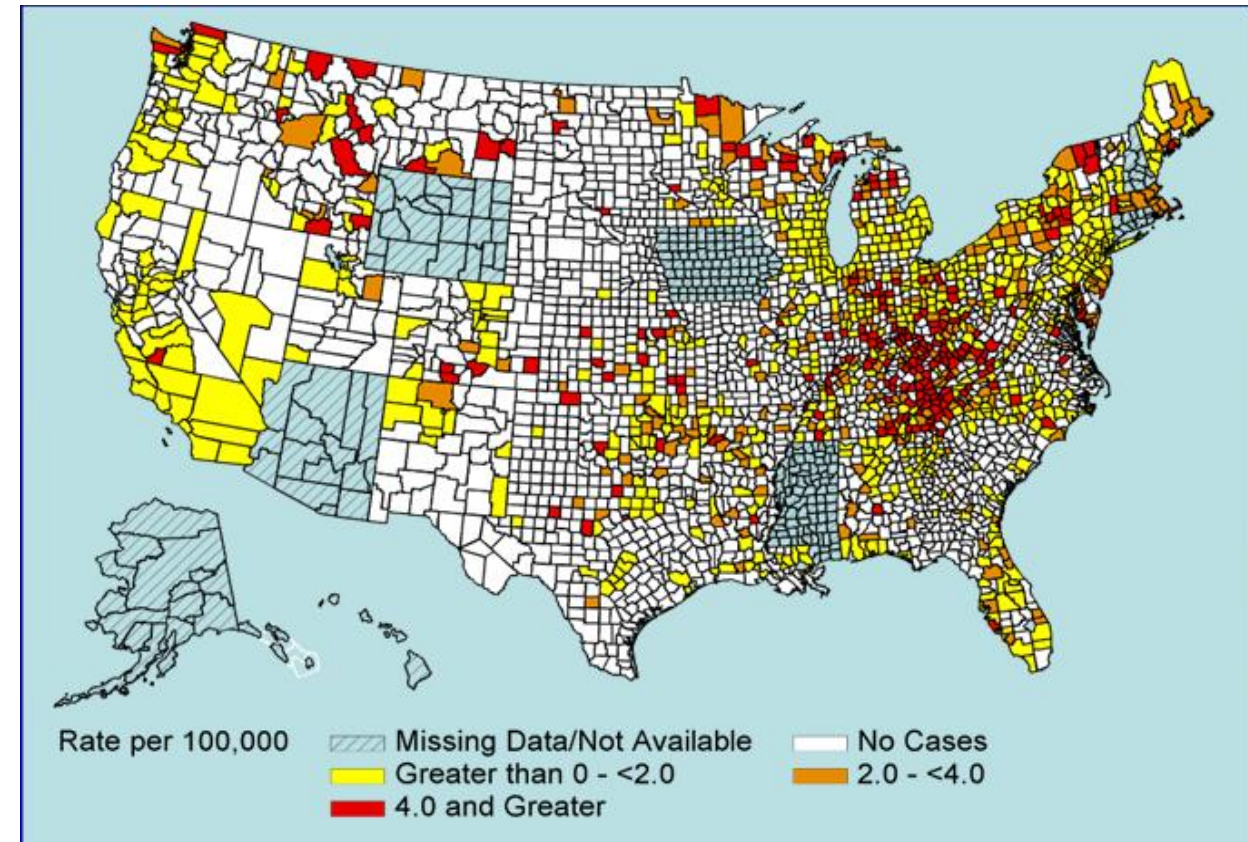
Drug Overdoses and Hepatitis C: Interconnected Epidemics

Drug Overdose Death Rates



SOURCE: CDC/NCHS Data Visualization Gallery 2015

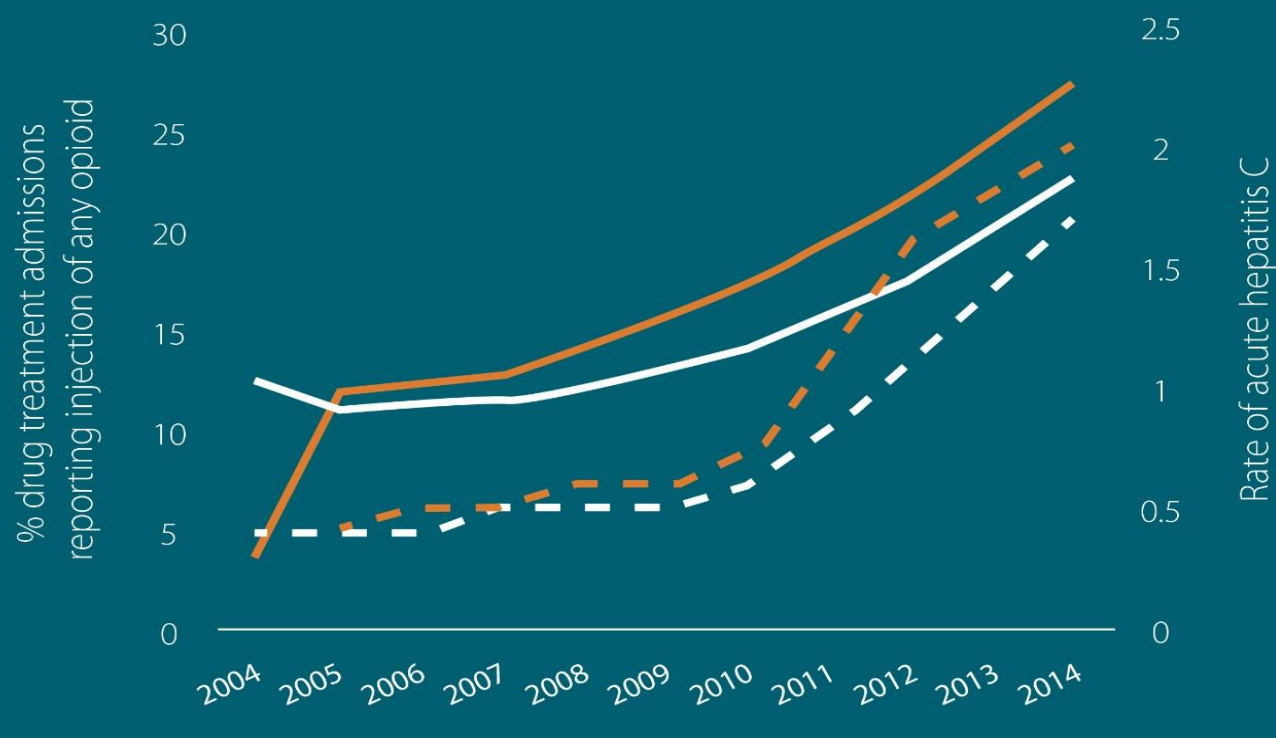
Reported New HCV Infections



SOURCE: CDC National Notifiable Disease Surveillance System 2013-14

Hepatitis C and Injection Drug Use

HEPATITIS C AND OPIOID INJECTION ROSE DRAMATICALLY IN YOUNGER AMERICANS FROM 2004-2014



- Among people **aged 18-29**, HCV increased by **400%** and admission for opioid injection by **622%**
- Among people **aged 30-39**, HCV increased by **325%** and admission for opioid injection by **83%**

— Any Opioid Injection (18-29)
— Any Opioid Injection (30-39)
- - HCV Rate (18-29)
- - HCV Rate (30-39)

Source: Centers for Disease Control and Prevention and Substance Abuse and Mental Health Services Administration

The Impact of Adverse Childhood Experiences

As ACEs “score” goes up, so does risk for...

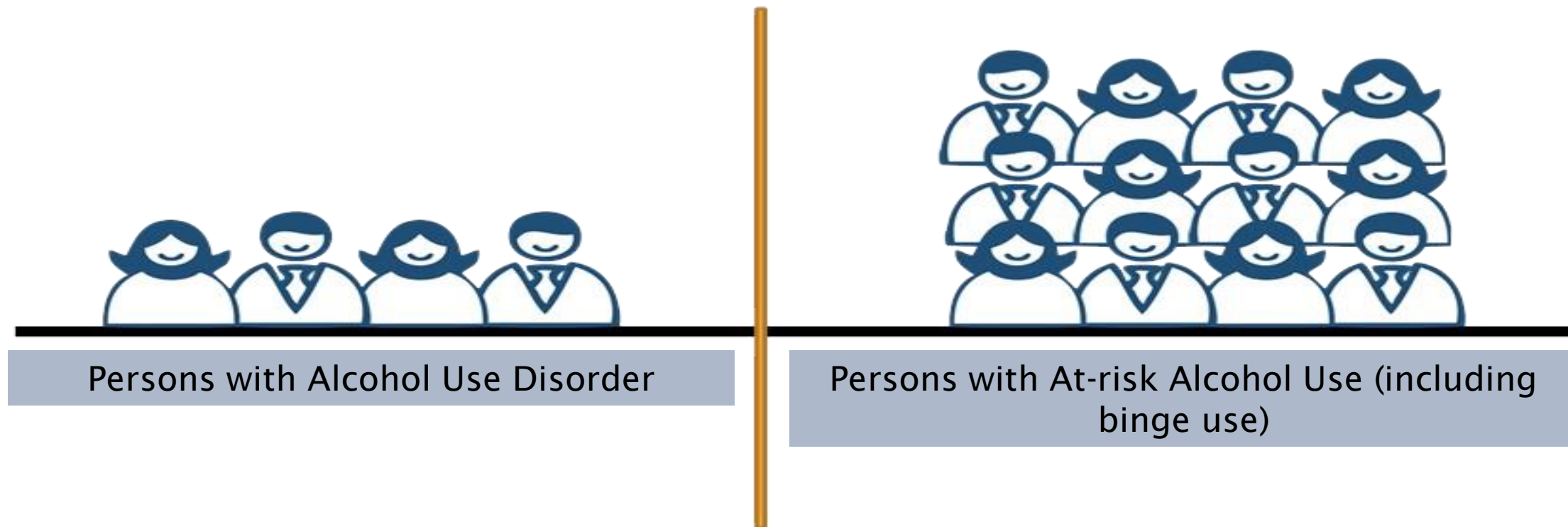
- Risky Behaviors
 - Physical Inactivity, Smoking, Drug/Alcohol Abuse, Early Sexual Activity
- Chronic Disease
 - Obesity, COPD, Asthma, Diabetes, Liver Disease, Heart Disease
- Other Health Outcomes
 - Teen Pregnancy, STDs, Miscarriage, Depression, Suicide Attempts, Early Death, Job Problems/Lost Time from Work, Perpetration of IPV



Deaths from Suicide

State	2011	2012	2013	2014	2015	2016	Total
Illinois	1226	1292	1321	1398	1363	1415	9193
Indiana	881	940	944	948	960	1034	6571
Michigan	1221	1261	1295	1354	1410	1364	9168
Minnesota	683	656	678	686	730	745	4784
Ohio	1465	1542	1526	1491	1650	1707	10820
Wisconsin	745	723	850	769	877	866	5623
Total							46,159

Alcohol Use Disorder and At Risk Alcohol Use

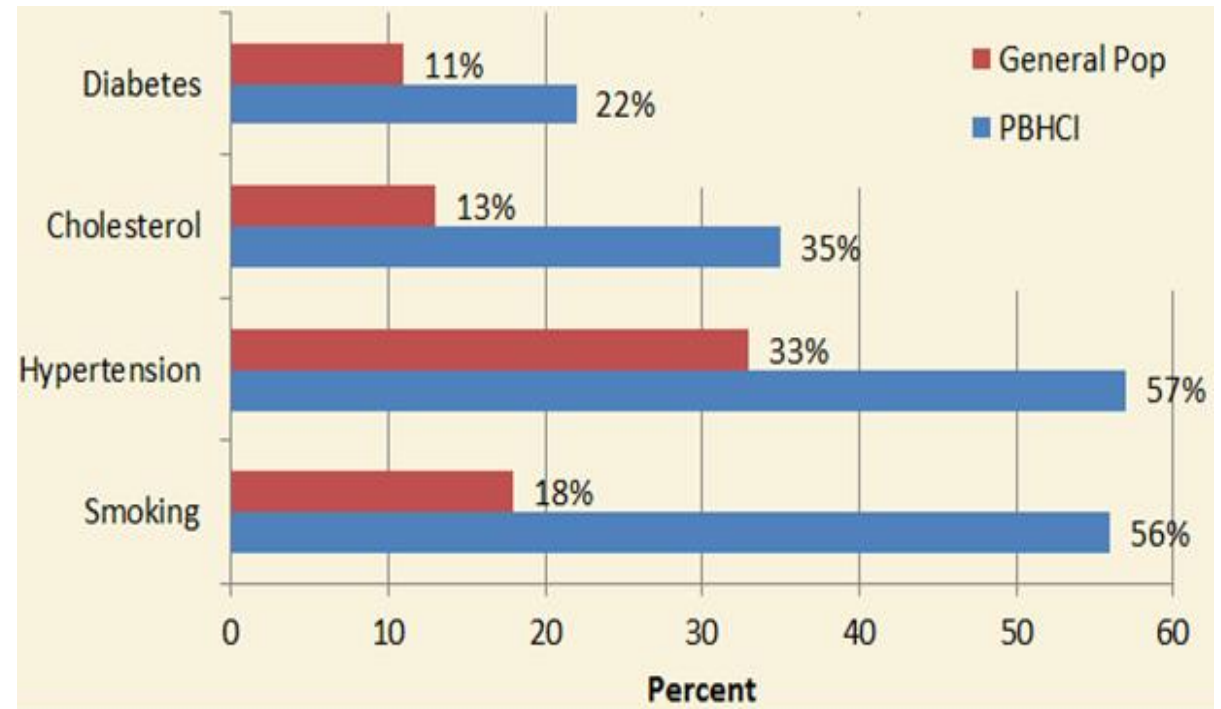


(SAMHSA, 2015)

SAMHSA/HRSA Primary and Behavioral Health Care

Goal: improve the physical health status of adults with serious mental illnesses who have or are at risk for co-occurring primary care conditions.

The grant also supports the triple aim of improving the health of those with SMI, enhancing the consumer's experience of care (including quality, access, and reliability), and reducing/controlling the per capita cost of care.



Team-based Care



Nurse



Case Manager



LCSW

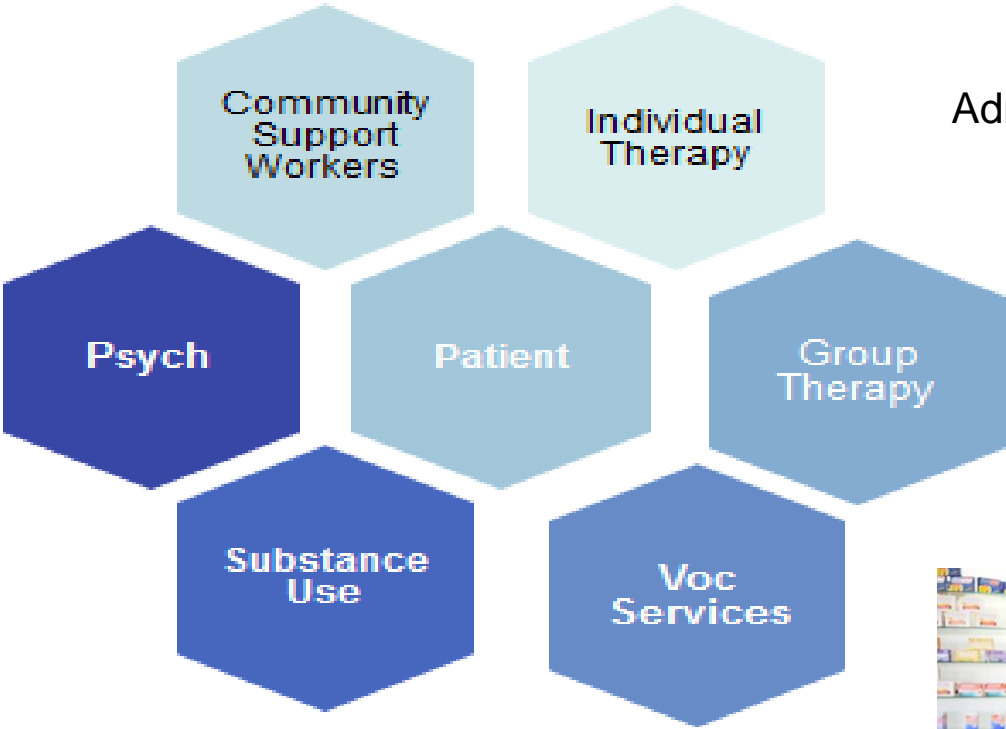


Psychiatric Providers

Addiction Specialist



Primary Care Doctor



Admin

Psychologist



Peer



Pharmacist

Service Dog

Key Components of Integration

- *Screening* for depression, anxiety, and other behavioral disorders using validated screening tools
- *Team-based* care with non-physician staff to support primary care physicians (PCPs) and co-manage treatment
- *Shared information systems* that facilitate coordination and communication cross providers
- Standardized use of *evidence-based guidelines*
- Systematic review and measurement of *patient outcomes* using registries and patient tracking tools
- Engagement with broader *community services*
- Individualized, *person-centered care* that incorporates family members and caregivers into the treatment plan

icer-review.org/wp-content/uploads/2016/01/BHI-CEPAC-REPORT-FINAL-VERSION-FOR-POSTING-MARCH-231.pdf

Levels of Integration

Coordinated		Co-located		Integrated	
1	2	3	4	5	6
Minimal Collaboration	Basic Collaboration at a Distance	Basic Collaboration Onsite	Close Collaboration Onsite with some System Integration	Close Collaboration Approaching an Integrated Practice	Full Collaboration in a Transformed / Merged Integrated Practice

Use the Standard Framework for Levels of Integrated Healthcare to understand where your organization is on the integration continuum.

www.integration.samhsa.gov/resource/standard-framework-for-levels-of-integrated-healthcare

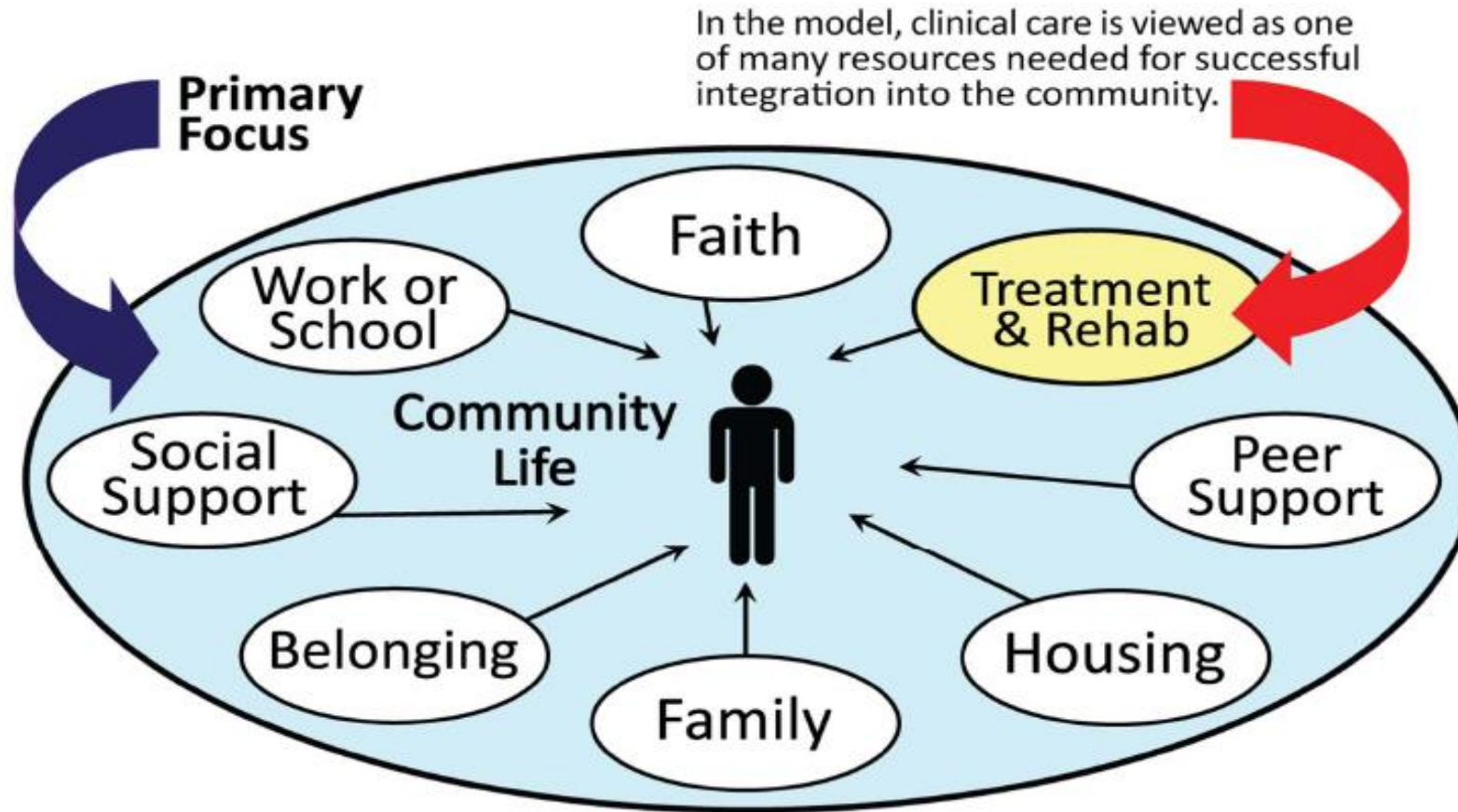
The Quick Start Guide to Behavioral Health Integration presents questions to consider when integrating primary care and behavioral health and includes resources.

www.integration.samhsa.gov/resource/quick-start-guide-to-behavioral-health-integration

Four Dimensions of Recovery

- Health—overcoming or managing one’s disease(s) or symptoms
- Home—having a stable and safe place to live
- Purpose—conducting meaningful daily activities, such as a job, school volunteerism, family caretaking, or creative endeavors, and the independence, income, and resources to participate in society
- Community—having relationships and social networks that provide support, friendship, love, and hope

Recovery Oriented System of Care

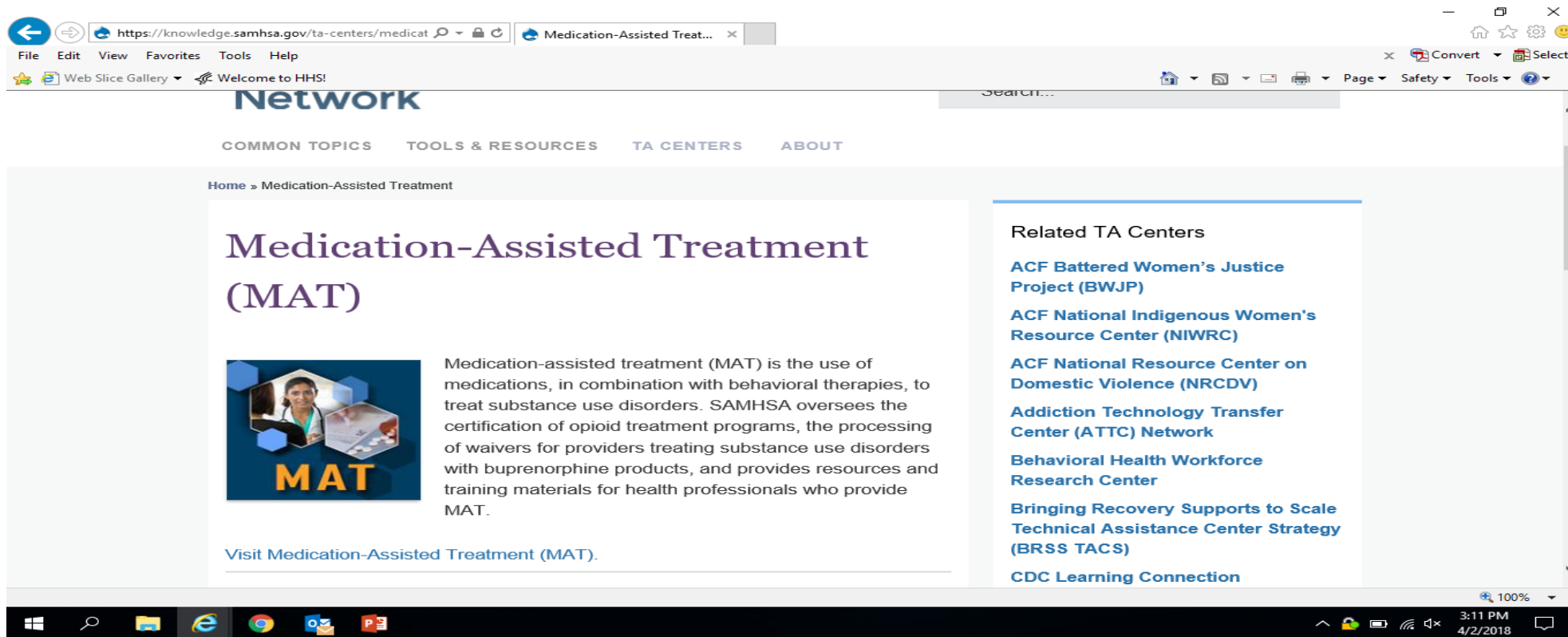


Partnership, collaboration, information sharing are key ingredients for a ***coordinated & comprehensive*** public health response to the opioid epidemic



SAMHSA Knowledge Network

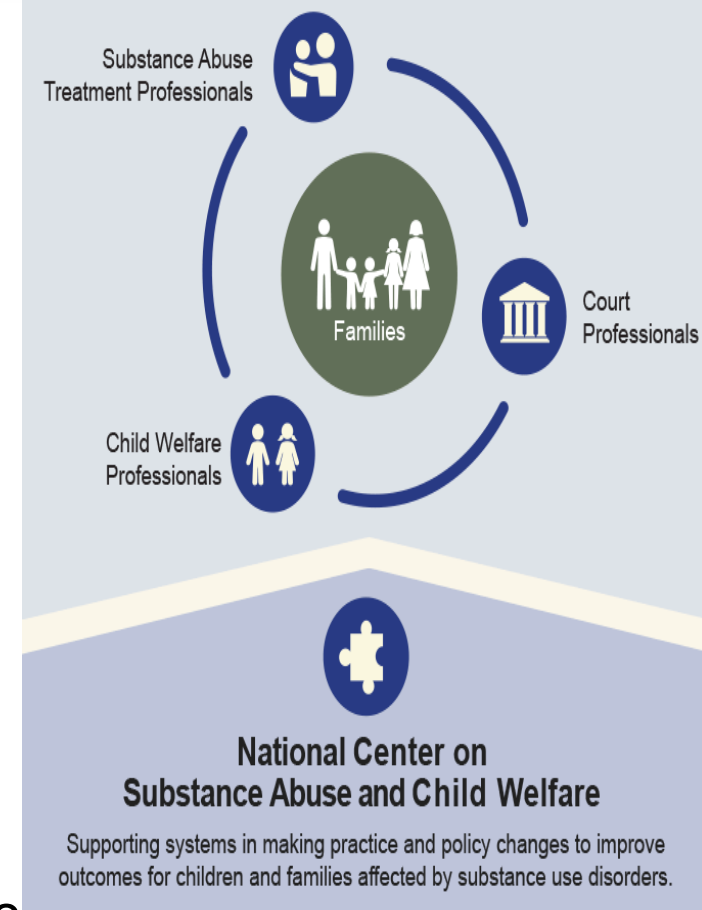
SAMHSA's premier library of behavioral health training, technical assistance, collaboration, and workforce development resources for the health care community.



<https://knowledge.samhsa.gov/>

Addressing Opioids Issues In Youth And Families

- Programs to Help Youth and Families:
 - National Center on Substance Abuse and Child Welfare
 - <https://ncsacw.samhsa.gov>
- National Child Traumatic Stress Initiative (NCTSI)
Examples of Products Developed by the NCTSN
 - Children and Domestic Violence: How Does Domestic Violence Affect Children?
 - Age-Related Reactions to a Traumatic Event
 - After a Crisis: Helping Young Children Heal
 - <http://www.nctsn.org>
- Pregnant-Post Partum Parenting Women with Substance Use Disorders
 - Residential and Outpatient Treatment Programs; Treating NAS
 - Release of PPW Factsheets (2/18)
 - Family factsheets in development



Evidence-Based Practices Resource Center

- Aims to provide communities, clinicians, policy-makers and others in the field with the information and tools they need to incorporate evidence-based practices into their communities or clinical settings
- Contains a collection of scientifically-based resources for a broad range of audiences, including Treatment Improvement Protocols, toolkits, resource guides, clinical practice guidelines, and other science-based resources

www.samhsa.gov/ebp-resource-center

Revamping TA Model to Deliver More Support to Communities

National and Regional Technical Assistance Centers.

- Utilize local expertise and experience to provide these services
 - Free of charge to the grantees
 - Additional dollars to grantees to procure their own TA should a specific tailored need arise.
- Free service field at large

SAMHSA Regional Administrators

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THANK YOU FOR WHAT YOU DO IN YOUR COMMUNITY TO HELP OTHERS

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