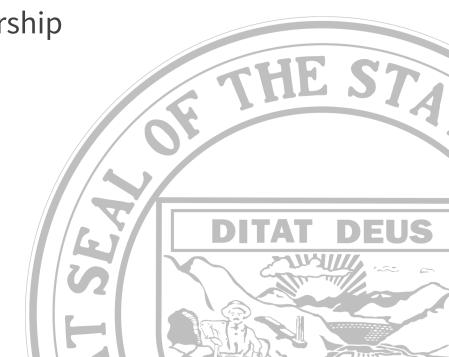
Arizona Substance Abuse Partnership

Thursday, June 6, 2019

State Capitol Executive Tower 2nd Floor Conference Room





Next Steps in Addressing Arizona's Opioid Epidemic

June 6, 2019

Sheila Sjolander, MSW Assistant Director



Emergency Declaration

Governor Ducey Declares Statewide Health Emergency In Opioid Epidemic

News Release

As the number of opioid overdoses and deaths increase at an alarming rate, we must take action."

declaration to address the growing

In New Front Against Opioid PHOENIX - Governor Doug Dt Epidemic, Formal Statewide **Health Emergency Declaration** Comes To A Close; Fight **Against Crisis Just Beginning**

News Release

May 29, 2018 F & G+ fin 🖴

Governor Ducey: "This fight is far from over, and we aren't going to let up"

PHOENIX — With the Opioid Action Plan now enshrined in state law. Governor Doug Ducey today ended the formal emergency public health declaration he issued last year and declared that Arizona's commitment to addressing the opioid epidemic remains unwavering.

DECLARATION OF EMERGENCY and NOTIFICATION OF ENHANCED SURVEILLANCE ADVISORY *Opioid Overdose Epidemic*

WHEREAS, the Arizona Department of Health Services has confirmed 790 deaths due to opioids in Arizona in 2016, which equates to an average of more than two Arizonans per day; and

WHEREAS, the Arizona Department of Health Services has confirmed that the number of opioid deaths has increased 74% from 2012-2016, with 2016 showing Arizona's highest number of deaths; and

WHEREAS, opioids are powerful pain killers that are highly addictive; and

WHEREAS, of the 1.497 drug overdose deaths in 2016, 52.7% noted opioids as a primary cause of

WHEREAS, these deaths as a result of overdose are preventable; and

WHEREAS, the opioid overdose epidemic affects all Arizonans; and

WHEREAS, in Arizona, law enforcement and first responders have the authority to carry and administer the life saving drug Naloxone; and

WHEREAS, the Arizona Department of Health Services requires more robust and more accurate data to successfully combat the opioid overdose epidemic; and

> Director of the Arizona Department of Health Services have illness, and health conditions, including death, are being caused

> riate to take action to ensure that the residents of Arizona remain

to declare an emergency pursuant to A.R.S. § 26-303(D).

Ducey, Governor of the State of Arizona, by virtue of the ion and Laws of the State, do hereby determine that the opioid istifies a declaration of a State of Emergency and issuance of an uant to A.R.S. §§ 26-303(D), 36-782, and 36-787, and I do

ncy exists in Arizona due to the Opioid Overdose Epidemic,

Emergency Response and Recovery Plan be used to direct and and authorize the Director of the Arizona Department of to coordinate State assets: and

izona Department of Health Services to coordinate all matters sergency response of the State in accordance with A.R.S. § 36-

OPIOID ACTION PLAN

Completed June 30, 2018



Goals	Recommendations
Reduce Opioid Deaths	Enact legislation that impacts opioid deaths by reducing illicit acquisition and diversion of opioids promoting safe prescribing and dispensing, decreasing the risk of opioid use disorder, and improving access to treatment
Improve Prescribing and Dispensing Practices	Establish a Regulatory Board work group to identify prescribing trends and discuss enforcement issues
	Establish a task force to identify specific improvements that should be made to enhance the Arizona Controlled Substances Prescription Monitoring Programs (CSPMP)
Reduce Illicit Acquisition and Diversion of Opioids	Meet with leaders of law enforcement and first responder agencies to expand Angel Initiative and other OUD diversion programs and assist the DEA with filling vacancies in the DEA Tactical Diversion Squad
improve Access to Treatment	Require all undergraduate and graduate medical education programs to incorporate evidence- based pain management and substance-use disorder treatment into their curriculum
	Create a call-in line resource to provide consultation to prescribers seeking advice about prescribing opioids and caring for patients with opioid use disorder
	Establish through executive order a work group to identify, utilize, and build upon Arizona's existing peer recovery support services
	Convene an Insurance Parity Task Force to research and provide recommendations regarding parity and standardization across the state
	Engage the federal government outlining necessary federal changes to assist Arizona with our response to the opioid epidemic
	Increase access to naloxone and Vivitrol for individuals leaving state and county correctional institutions and increase access to MAT therapy for individuals with opioid-use disorder while incarcerated
Prevent Opioid Use Disorder/ Increase Patient Awareness	Utilize Public Service Announcements to educate patients, providers and the public regarding opioid use and naloxone
	Create a youth prevention task force to identify and implement evidence based, emerging and best practice substance abuse prevention/early identification curriculum, expand after-school opportunities, and identify resource needs.

Arizona Management System



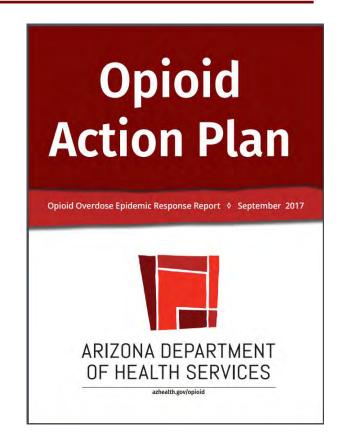
Governor Doug Ducey's vision is for Arizona to be the number one state to live, work, play, recreate, retire, visit, do business, and get an education. To achieve this vision, Arizona is deploying a professional, results-driven management system to transform the way our State government thinks and does business as one enterprise. State agencies are doing more good for Arizona by tracking and improving their performance each and every day.



Website: ams.az.gov

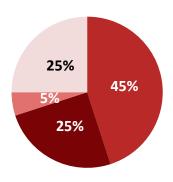
OPIOID ACTION PLANNING

- Time for "Version 2.0"
- July 1, 2019 June 30, 2021
- Opioid Planning Summit held April 16
- Draft recommendations from participants
- Follow-up survey of participants
- Connect to ASAP for oversight, coordination, and reporting out progress

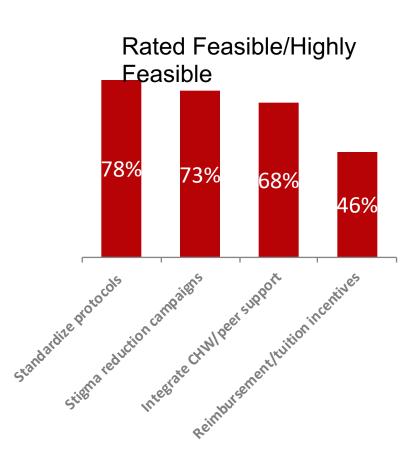


A Look at Draft Recommendations, Survey Results And a Sample of Proposed Actions

Improving Referrals to Treatment



- Integrate community health workers(CHW)/peer support into high impactsettings
- Community stigma reduction campaigns
- Reimbursement and tuition incentives

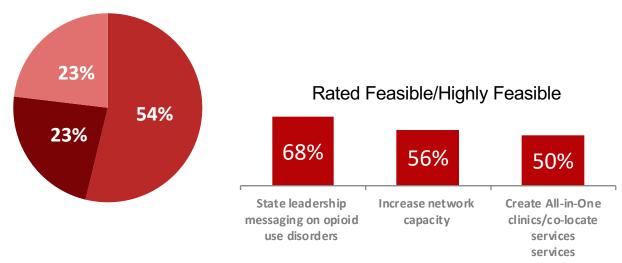


Improving Referrals to Treatment: Proposed Actions

- ADHS will complete new rules for voluntary certification of CHWs by September 2020
- Payors should consider reimbursement of CHW and peer support services
- Provide information on availability of peer support, how to access, and how to become a peer (AHCCCS)
- Implement evidence-based practice in peer support training and formalized graduate placement services (AHCCCS)

- Expand loan repayment or other incentives for people providing behavioral health services in underserved communities:
 - ADHS will monitor and map number of behavioral health providers in the State Loan Repayment Program
 - ADHS will implement donation funding to expand number of providers
 - ADHS will consider revising rules to add prioritization criteria for primary care clinicians who provide MAT

Improving Access to MAT



■ All-in-One clinics; co-location of services

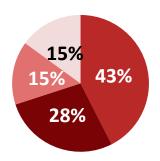
■ Increase network capacity for peer support; for those with opioid use disorders and prescribers (provider consultation)

Improving Access to MAT: Proposed Actions

- Launch a MAT mentoring program for newer DATA-waivered providers (ADHS & U Of A Center for Rural Health)
- ADHS will work with licensing boards to adopt a curriculum as meeting DATAwaiver requirements per SB 1029
- Promote the OAR line (ADHS & Poison Control Centers)

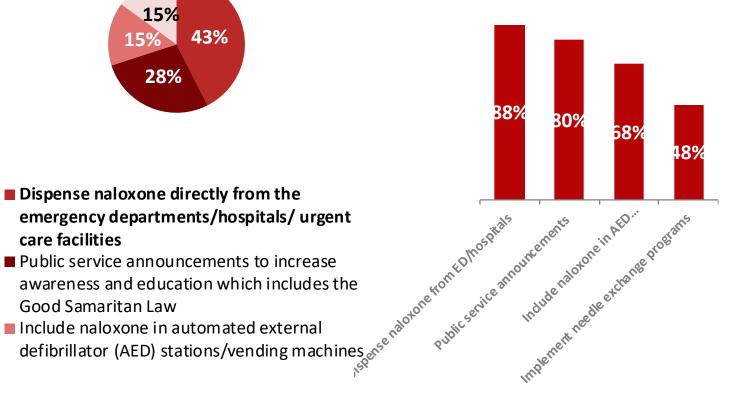
- Expand initiation of buprenorphine in emergency departments (AHCCCS)
- AHCCCS to consider barriers to colocation of services/all-in-one clinics
- AHCCCS to consider payment structures for telehealth services

Improving Access to Naloxone



- Dispense naloxone directly from the



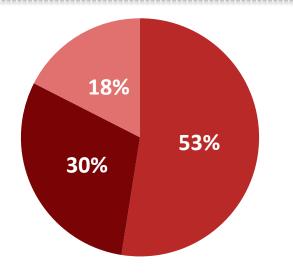


Improving Access to Naloxone: Proposed Actions

- Work with hospitals to implement best practices for discharges of patients who have overdosed or have an identified substance use disorder
 - Expand access to naloxone in emergency department and upon hospital discharge (ADHS)
 - ADHS will identify hospitals with low referrals to behavioral health services and provide technical assistance

 ADHS will review statutes and policies and look at other states to advise on what would be needed to implement a "leave behind" program for EMS in Arizona

Improving Work with Priority Populations



All ideas were rated as feasible/highly feasible by 77-80% of the respondents

- Public campaign to educate on drug use/medication assisted treatment (MAT) when pregnant and parenting
- Training services providers, public awareness campaigns, addressing the punitive treatment model, denying people services due to relapse, defining clinical language

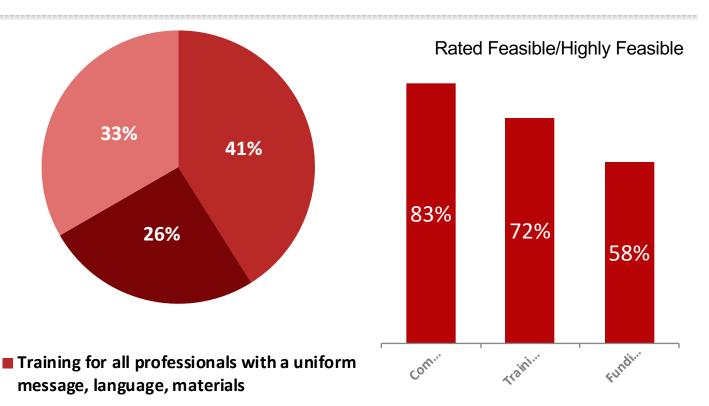
Improving work with Priority <u>Populations - Proposed Actions</u>

- Engage in a public campaign to educate on drug use and MAT when pregnant and parenting (tie to NAS Plan or Substance Exposed Newborn Taskforce)
- Explore more MAT treatment and recovery options for pregnant women

Improving Trauma-Informed Care

■ Community-wide education including public

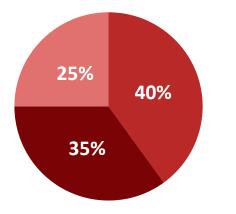
service announcements



Improving Trauma Informed Care Proposed Actions

- Provide training for all professionals on trauma-informed care with uniform message, language, and materials (GOYFF)
- Leverage Goal Council breakthrough project work
 - ADHS and other state agencies build and implement agency action plans to address ACEs and trauma-informed care

Improving Diversion Programs

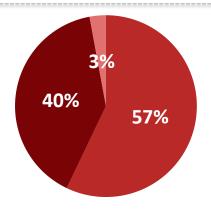


72% rated reducing stigma as feasible to highly feasible

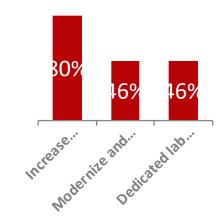
62% rated the other two ideas as feasible/highly feasible

- Reduce stigma towards substance users and raise awareness create public service announcements showing that drug use impacts all ages, cultures, ethnicities and promote MAT as as the most effective treatment for opioid use disorder
- Promote the OAR line as a single point of contact to be connected to services, improve transportation, and have state agencies examine policies that increase barriers to care

Addressing Illicit Drug Use/Trafficking



Rated Feasible/Highly Feasible



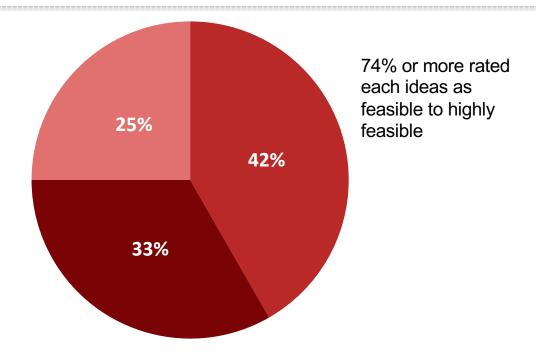
- Increased education on the effectiveness of opioid treatment services and reduction of stigma towards treatment services in the community
- Modernized and expanded ports of entry to increase the amount of inspections

Reducing Stigma Proposed Actions

- Launch a public statewide stigma reduction campaign on substance use disorder (GOYFF is lead; ADHS to help)
- Incorporate stigma reduction messaging and strategies into community toolkits
- Leverage state leadership messaging for substance use disorder as a disease and MAT as evidence-based practice

- Provide training within the criminal justice system, health care systems and communities (need to identify a lead agency)
- Include targeting of people in administrative/leadership roles
- Address marginalized communities
- Define appropriate non-stigmatizing language
- Address punitive treatment models that deny people services due to relapse
- Promote MAT as evidence-based gold standard of treatment

Updating the Rx Community Toolkit & Resources for Coalitions



- Create an implementation manual of the toolkit for various populations
- Expand the toolkit to include the 5major AZ HIDTA threats

NEXT STEPS

- Work with partner organizations to complete Opioid Action Plan
- ASAP consideration of adopting oversight of Opioid Action Plan
- Regular reporting on progress from partner agencies at future ASAP meeting



Questions & Discussion

For more information: azhealth.gov/opioid

