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
June 5, 2017

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

PHOENIX — Governor Doug Ducey today declared an emergency pursuant to A.R.S. § 26-303(D). Ducey, Governor of the State of Arizona, by virtue of the Executive and Legislative powers vested in the Governor by the Constitution and Laws of the State, hereby declares that the opioid epidemic constitutes a state of emergency and issuance of an emergency declaration under A.R.S. §§ 26-202(B), 26-782, and 26-787, and I do hereby by executive order issue this emergency proclamation.

The Governor also directed the Arizona Department of Health services to take action to ensure that the residents of Arizona remain safe and healthy.

In New Front Against Opioid Epidemic, Formal Statewide Health Emergency Declaration Comes To A Close; Fight Against Crisis Just Beginning

News Release
May 23, 2018

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.
## Opioid Action Plan

**Opioid Overdose Epidemic Response Report**  
September 2017

**ARIZONA DEPARTMENT OF HEALTH SERVICES**

![Image of Opioid Action Plan](image)

### Goals

<table>
<thead>
<tr>
<th>Goals</th>
<th>Recommendations</th>
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<tr>
<td><strong>Reduce Opioid Deaths</strong></td>
<td>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.</td>
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<td><strong>Improve Prescribing and Dispensing Practices</strong></td>
<td>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).</td>
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<td><strong>Reduce Illicit Acquisition and Diversion of Opioids</strong></td>
<td>Meet with leaders of law enforcement and first responder agencies to expand Angel Initiative and other ODU diversion programs and assist the DEA with filling vacancies in the DEA Tactical Diversion Squad. 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. Utilize Public Service Announcements to educate patients, providers and the public regarding opioid use and naloxone. Creates 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.</td>
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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.
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 impact settings
- Community stigma reduction campaigns
- Reimbursement and tuition incentives

Bar chart:
- Standardize protocols: 78%
- Stigma reduction campaigns: 73%
- Integrate CHW/peer support: 68%
- Reimbursement/tuition incentives: 46%

Pie chart:
- 45% for integrating CHW/peer support into high impact settings
- 25% for community stigma reduction campaigns
- 25% for reimbursement/tuition incentives
- 5% for standardizing protocols
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)

Rated Feasible/Highly Feasible:

- State leadership messaging on opioid use disorders: 68%
- Increase network capacity: 56%
- Create All-in-One clinics/co-locate services: 50%
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 DATA-waiver 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 co-location of services/all-in-one clinics

- AHCCCS to consider payment structures for telehealth services
Improving Access to Naloxone

- Dispense naloxone directly from the emergency departments/hospitals/urgent care facilities
- Public service announcements to increase awareness and education which includes the Good Samaritan Law
- Include naloxone in automated external defibrillator (AED) stations/vending machines

Rated Feasible/Highly Feasible

- Dispense naloxone from ED/hospitals: 38%
- Public service announcements: 30%
- Include naloxone in AEDs: 68%
- Implement needle exchange programs: 48%
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 Populations - Proposed Actions

• 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

Training for all professionals with a uniform message, language, materials

- Community-wide education including public service announcements

Rated Feasible/Highly Feasible

- 83%
- 72%
- 58%
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

- 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

72% rated reducing stigma as feasible to highly feasible

62% rated the other two ideas as feasible/highly feasible
Addressing Illicit Drug Use/Trafficking

- 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

Rated Feasible/Highly Feasible
- Increase...
- Modernize and...
- Dedicated lab...

- 80%
- 46%
- 46%
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

74% or more rated each ideas as feasible to highly feasible

- 25%
- 42%
- 33%

Create an implementation manual of the toolkit for various populations
Expand the toolkit to include the 5 major 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