

CALIFORNIA

USE OF STR/SOR GRANT FUNDS TO ADDRESS THE OPIOID CRISIS

Background on opioid-specific grants to States

The Substance Abuse and Mental Health Services Administration (SAMHSA) administers the State Targeted Response to the Opioid Crisis (STR) and State Opioid Response (SOR) grant programs. These grants aim to address the opioid crisis by increasing access to treatment, reducing unmet treatment need, and reducing opioid overdose related deaths through the provision of prevention, treatment, and recovery activities for opioid use disorder (OUD) in the States. States received a total of \$500 million for each of FY 2017 and FY 2018 through STR. Additionally, in FY 2018, States received an additional \$1 billion in new funding through the SOR grants. In FY 2019, States received \$1.5 billion through SOR. Eligible applicants for both STR and SOR are the State alcohol and drug agencies.

Allocations for California

California received \$44.7 million through STR for each of FY 2017 and 2018, and \$69.8 million through SOR in FY 2018. In FY 2019, California received a total of \$106.2 million through SOR.

Overview of California's efforts to address the opioid crisis

The California Department of Health Care Services (DHCS) is using STR and SOR funds to implement the California Medication-Assisted Treatment (MAT) Expansion Project. The California MAT Expansion Project aims to increase access to MAT, reduce unmet treatment need, and reduce opioid overdose deaths through prevention, treatment, and recovery activities.

The MAT Expansion Project consists of six main objectives:

- Develop additional MAT locations with a focus on rural areas;
- Provide MAT access to specialized and under-served communities;
- Transform entry points for individuals with opioid use disorders (OUDs) and create effective referrals into treatment;
- Develop coordinated referral processes to manage high-risk transitions;
- Engage current and potential MAT prescribers; and
- Enact overdose prevention activities to prevent opioid misuse and overdose deaths.

Primary prevention: stopping opioid misuse before it starts

California's OUD prevention activities are aimed at rural, American Indian and Alaskan Native (AI/AN), perinatal, and youth populations. All of the special populations of focus have unique cultural, physical, mental health, and substance use needs that require targeted treatment and recovery services. DHCS is developing a multitude of clinician-oriented educational materials and toolkits to facilitate prevention, including **development of prescribing guidelines and screening criteria, disseminating opioid safety bundles, and adapting materials to specific health care settings where special population patients are most likely to be receiving services.**

Increasing access to treatment

OUD treatment activities include expanding MAT in primary care settings and targeting rural populations through the California Hub and Spoke System, as well as developing new MAT access points for perinatal, youth, and AI/AN populations.

California Hub and Spoke System

The California Hub and Spoke System (H&SS) launched in July 2017 and aims to increase access to MAT services throughout the State, particularly in counties with the highest overdose rates. This program was modeled after the Vermont Hub and Spoke System. The H&SS has increased the availability of MAT for patients with OUD by increasing the total number of physicians, physician assistants, and nurse practitioners prescribing buprenorphine.

The H&SS consists of opioid treatment programs (OTPs) which are referred to as "Hubs" and serve as experts in treating OUD, as well as office-based treatment settings which are referred to as "Spokes" and provide ongoing care and maintenance treatment. The CA H&SS is composed of 18 Hub and Spoke networks and more than 200 Spoke locations. Approximately 40 percent of Spokes are federally qualified health centers (FQHCs), meaning that they provide care in underserved areas. **As of August 2019, nearly 20,000 patients have been treated in the H&SS,** with significant expansions in the availability of treatment in the northern and central parts of the State, which have been most greatly impacted by the opioid crisis.

California Bridge Program

The California Bridge Program began in February 2018. The California Bridge Program is developing hospitals and emergency departments (EDs) into primary access points for the treatment OUD. Participating sites are developing procedures to immediately begin treatment for individuals presenting to the hospital or ED with a substance use disorder, through expedited access to buprenorphine and warm handoff to an outpatient SUD treatment setting using a peer navigator. **As of August 2019, 52 health care facilities have been selected to participate in this program, spanning 35 counties throughout the State.**

Expanding MAT in County Criminal Justice Settings Project

In August 2018, DHCS launched the Expanding MAT in County Criminal Justice Settings Project, a technical assistance program that is available to teams from all California counties interested in developing or expanding MAT for opioid addiction in their jails and through their drug court systems. County teams must demonstrate an interest in expanding access to at least two forms of MAT for opioid use disorder (naltrexone, methadone, buprenorphine) in order to be eligible.

The 22 counties in the first cohort of the project began in August 2018 and will continue until January 2020. The second cohort will begin in April 2019 with an additional six counties and will end in September 2020. Each county receives an initial grant to cover the cost of attending in person learning sessions and participation in other MAT related activities, and other approved expenses. Additional funding is available after the first few months for participating counties to expedite implementation of SUD screening, assessment, treatment, MAT, and community engagement while local sustainable funds are secured.

Mother & Baby Substance Exposure Initiative

The goal of the Mother & Baby Substance Exposure Initiative is to increase access to MAT using the three FDA-approved medications for the treatment of opioid use disorder, reduce unmet treatment need, and reduce opioid overdose related deaths through the provision of prevention, treatment and recovery activities for opioid use disorder (OUD). DHCS aims to ensure the following outcomes through the project:

- Decrease neonatal abstinence length of stay by decreasing neonatal abstinence syndrome (NAS) severity
- Increase the number of maternal patients identified with OUD
- Decrease number of child protective services referrals
- Increase the number of moms in long-term recovery

The project includes the following deliverables to achieve the above outcomes:

- Perform outreach to build on the framework of existing treatment access points capable of screening, assessing, and inducting perinatal patients into treatment
- Develop or build on existing protocols, guidelines, opioid safety bundles, and toolkits
- Standardize the language of treatment for perinatal patients and build shared knowledge and understanding
- Distribute patient education materials specific for opioid use disorder and perinatal patients
- Provide technical assistance to stakeholders, treatment access points, etc.
- Develop a resource library for ongoing education and house all the materials in a single location

California Youth Opioid Response Project

The California Youth Opioid Response (YOR) Project focuses on providing prevention, treatment, and recovery services for youth aged between 12 and 24. The project funds:

- Development of protocols, guidelines, and toolkits to address the clinical judgement involved in developing an appropriate treatment plan for the delivery of services to youth populations
- Distribution of OUD prevention, treatment, and recovery education materials
- Coordinating learning collaboratives between stakeholders, prescribers, clinicians, and others to support networking, peer learning, and provide a platform for discussion
- Expansion and implementation of MAT and OUD prevention and treatment services for youth, young adults, and their family members

Tribal MAT Project

In Fall 2018, DHCS launched the Tribal MAT Project, which addresses the culturally unique needs of AI/AN populations. This includes the following projects:

- MAT Champions: Distribute naloxone and provide training to first responders, patients, and family members; provide telehealth equipment; conduct training and media campaign; and monitor Urban and Tribal Local Opioid Safety Coalitions. Through March 2019, there have been 23 new Local Opioid Safety Coalitions established specific to tribal populations. Additionally, the MAT Champions programs are on track to distribute 700 naloxone kits to American Indian and Alaska Native organizations.
- Suicide Prevention: Develop a culturally-informed system that provides OUD treatment, suicide prevention, case management, and community engagement in tribes. The Suicide Prevention consortium is ongoing and intended to address the OUD and co-occurring disorders of up to 30 tribal youth and their families.
- Project ECHO: Increase the number of total tribal and Urban Indian prescribers. Through March 2019, there have been 7 training sessions for clinicians on topics such as treating OUD, safe usage of opioids, managing pain, and polysubstance use.
- Tribal Needs Assessment: DHCS is in the process of conducting a Statewide Needs Assessment of American Indian and Alaska Native communities. The needs assessment will identify treatment gaps and inform DHCS of future initiatives targeting these special populations.
- Tele-MAT Project: The Tribal MAT Project includes treatment services performed through the Tele-MAT with Academic Detailing project. This project provides telemedicine support, physician consultation, and OUD medical and psychiatric treatment services. Through March 2019, tele-MAT services have been implemented in 15 new Indian Health Providers (IHP). In addition, coaching programs have been implemented in 14 IHPs, on-site technical assistance has been provided to 6 IHPs, and referrals for MAT direct services have occurred at 4 IHPs.

Overdose reversal efforts: saving lives

The Naloxone Distribution Project (NDP) aims to reduce opioid overdose deaths through the provision of free naloxone in its nasal spray formulation. Eligible entities include first responders, emergency medical services, fire authorities, law enforcement and criminal justice, veteran organizations, homeless programs, schools and universities, libraries, hospitals, substance use treatment programs, and community organizations. Through July 2019, the NDP has distributed more than 220,000 units to law enforcement (38%), fire, EMS, and first responders (15%), harm reduction organizations (8%), as well as community organizations, county behavioral agencies, schools, and homeless programs in 54 counties. **As of July 2019, 1,621 overdose reversals were reported by recipient organizations.**

Supporting recovery

Recovery support services are an integral component of MAT Expansion Project services and include initiatives such as the California Hub and Spoke System, where patients receive access to a continuum of services, including substance use education, transportation, and relapse prevention services. Additional projects with key recovery support services include the Emergency Department Bridge Program, which establishes referral services between emergency departments and outpatient providers to deliver sustained treatment for patients not currently enrolled in MAT maintenance. This program provides life skills, child care, education, and employment support services through the use of a Substance Use Navigator. **MAT Expansion Project efforts have led to 12,500 individuals receiving recovery support services.**

Collaborating with local entities

Local collaboration has occurred through community coalition meetings, town halls, taskforces, presentation forums, strategic planning sessions, stakeholder meetings, and community panel discussions. DHCS has collaborated with a multitude of local coalitions including the California Opioid Safety Network and tribal local opioid coalitions.

The MAT Expansion Project has funded community organizations such as hospitals and EDs, primary care and mental health clinics, OTPs, residential treatment centers, FQHCs, and law enforcement. DHCS partners with each agency or facility to identify the local needs of the community and provide funding or resources to these organizations.

Additionally, the MAT Access Points project, a \$40 million initiative, funds MAT start-up activities and/or MAT enhancement efforts in at least 200 community-based MAT Access Points throughout California, such as primary care practices, hospitals, EDs, OTPs, jails, residential centers, tribal health centers, DUI providers, community or county mental health centers, maternity care or other access points. Funding can be used to purchase equipment, train staff, recruit staff, make capital improvements, and other start-up and enhancement costs. For the Expanding MAT in County Criminal Justice Settings Project, county teams include members from a wide variety of criminal justice disciplines, such as law enforcement, judges, drug courts, attorneys, parole and diversion programs, and county administrators.

Positive outcomes

Recovery support under the MAT Expansion Project through the California Hub and Spoke System, ED Bridge Program, Expanding MAT in County Criminal Justice Settings program, and the Tribal MAT Project has led to a substantial increase in **patients receiving integrated services, culturally responsive services, transportation services, life skills education, child care and housing assistance services, employment and job training services, and case management services.**

To learn more about each of the 28 projects in the California MAT Expansion project, visit www.CaliforniaMAT.org.

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