

The Role of Prevention, Treatment and Recovery in Illinois' Opioid Crisis Response

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State of Illinois

Division of Substance Use Prevention and Recovery (SUPR)

- Single State Authority (SSA) charged with providing a system of care along the continuum of prevention, intervention, treatment and recovery support where individuals with SUD, those in recovery and those at risk are valued and treated with dignity and where stigma, accompanying attitudes, discrimination, and other barriers to recovery are eliminated
 - Prevention
 - Intervention
 - Treatment for Substance Use Disorders (SUD) and other related disorders (gambling disorder)
 - Recovery Support Services

SUPR Services Provided

Prevention

Assessment

Early Intervention

Outpatient Treatment

Intensive Outpatient Treatment

Residential Extended Care

Residential Withdrawal Management, Clinically or Medically Monitored

Short term Residential

Medication Assisted Treatment (including Methadone)

Toxicology

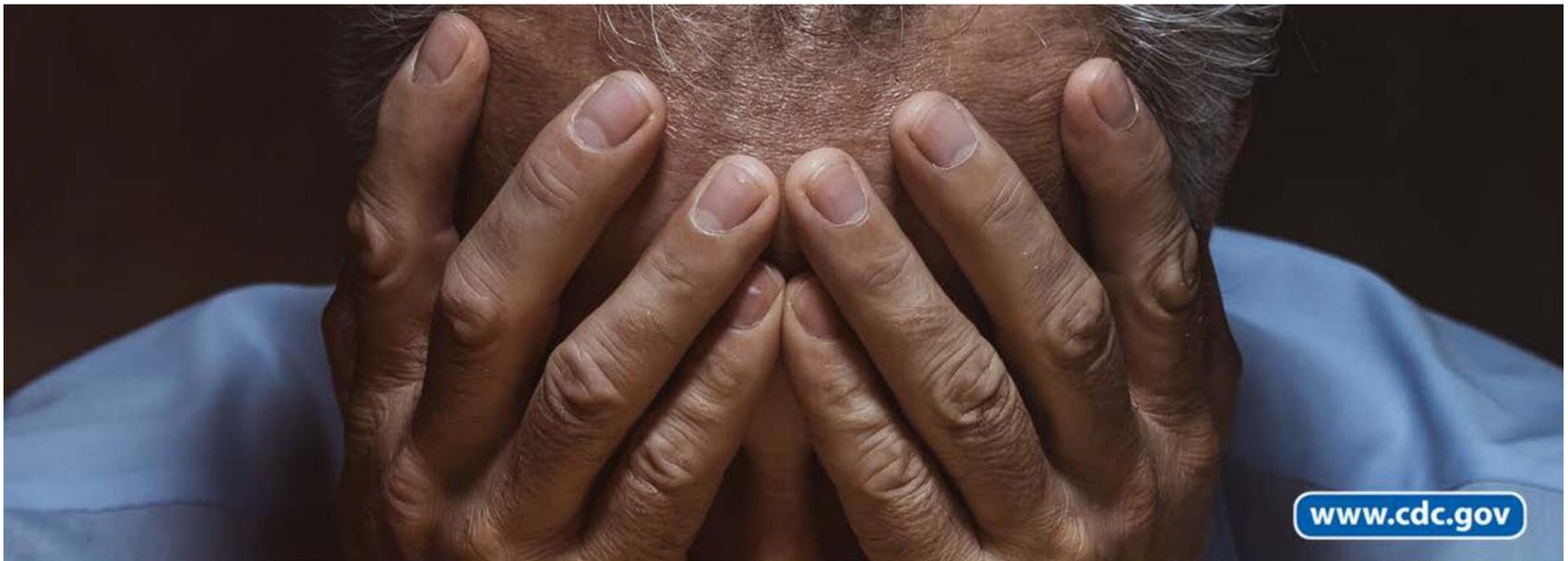
Recovery Homes

Recovery Support Services

Case Management

Community Intervention

National opioid epidemic



From 1999 to 2017, 399,000 Americans have died from an opioid overdose (including Rx and illicit opioids).

Why is this happening?

There are many factors that impact America's drug overdose crisis.

www.cdc.gov

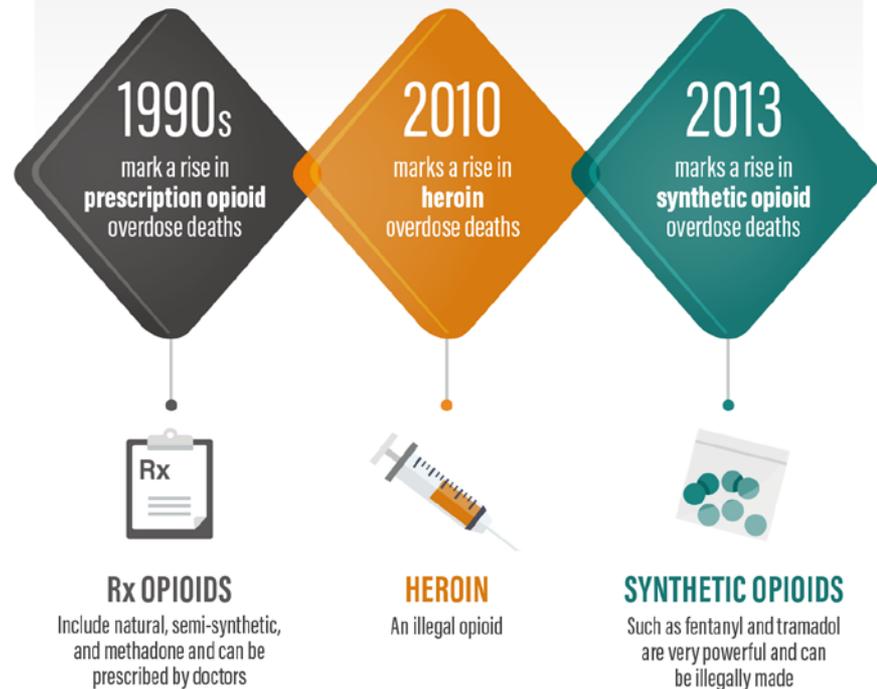


Historical Perspective

RISE IN OPIOID OVERDOSE DEATHS IN AMERICA

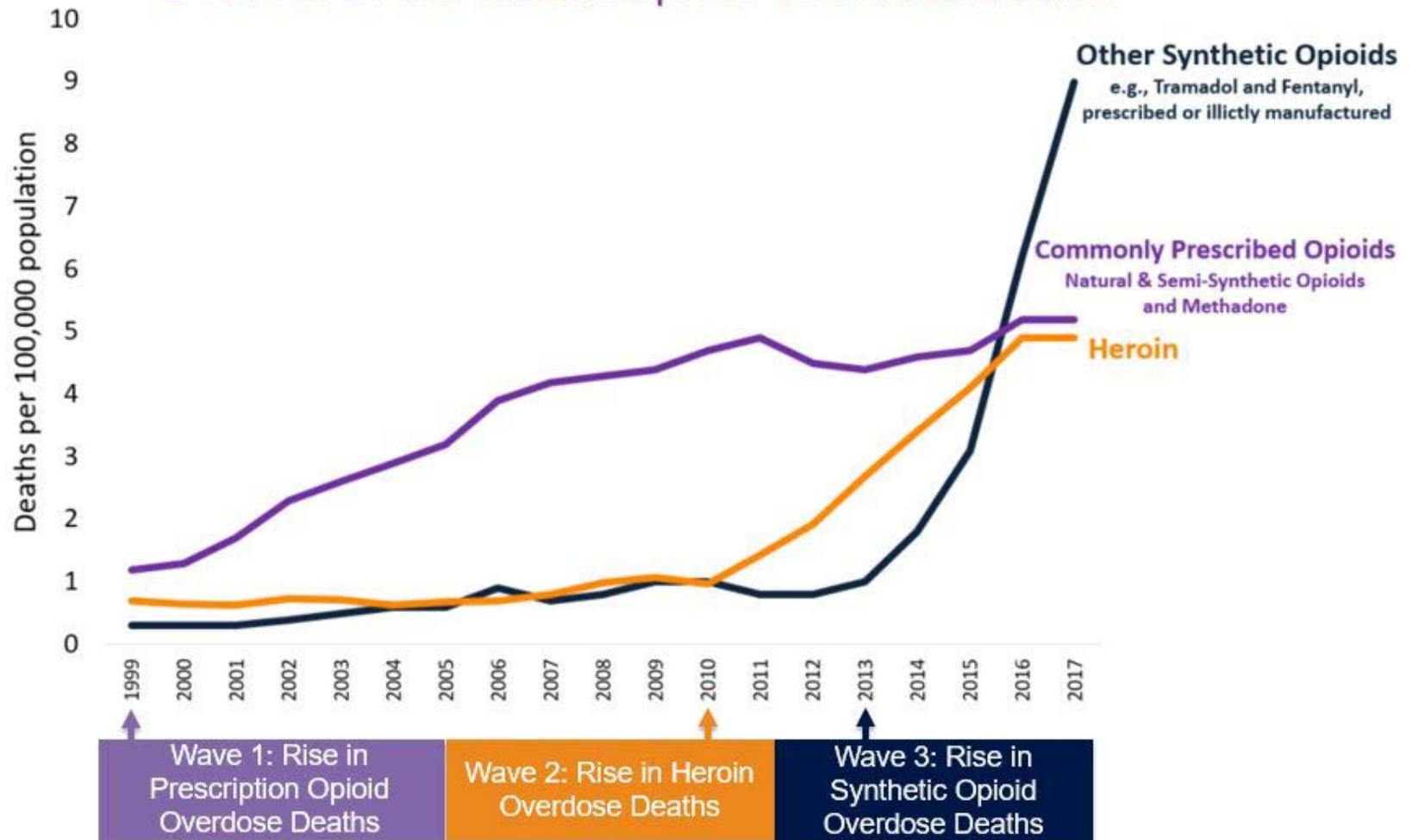
A Multi-Layered Problem in Three Distinct Waves

399,000 people died
from an opioid overdose (1999–2017)



Learn more about the evolving opioid overdose crisis: www.cdc.gov/drugoverdose

3 Waves of the Rise in Opioid Overdose Deaths



SOURCE: National Vital Statistics System Mortality File.

In Illinois 2016 Data

There were **1.5x** as many
opioid overdose deaths as
homicides in Illinois

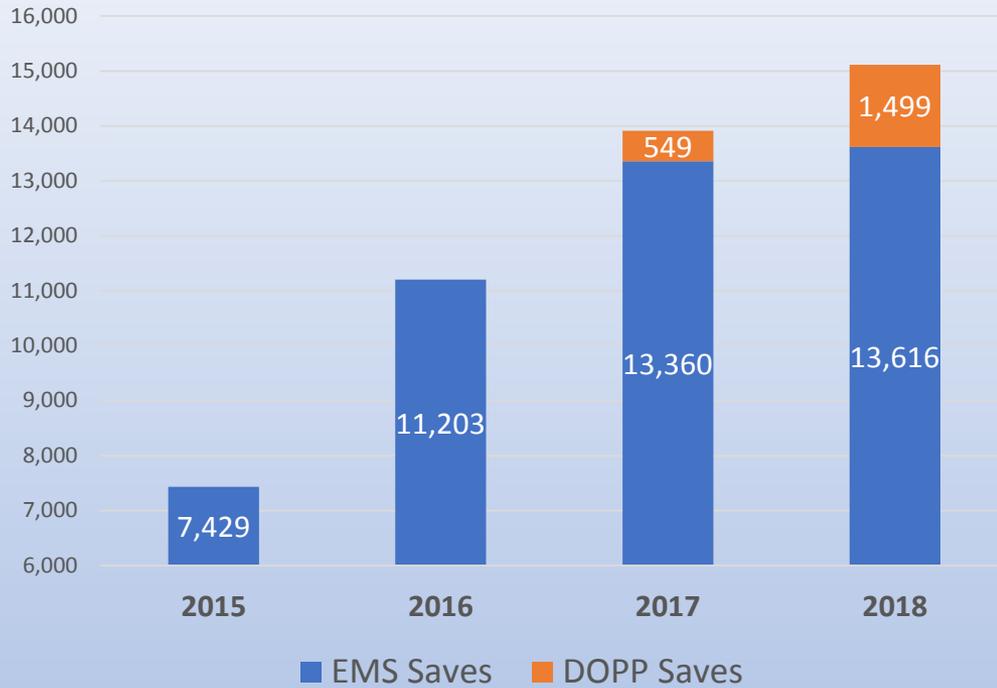
There were **2x** as many
people in Illinois who died
from opioid overdoses
than died in **car accidents**

Illinois Department Public Health EMS Opioid Overdose Data

Fatal Overdose 2015 - 2018



EMS/DOPP Overdose Saves



EMS/ DOPP
OVERDOSE
SAVES

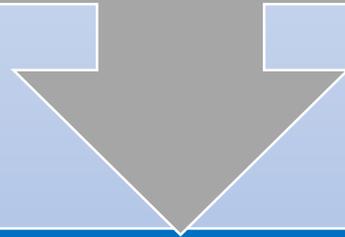
DOPP Enrollment is a voluntary program

- The training, saving and reporting is not mandated and is also voluntary.
- Saves made by DOPP Programs are in addition to saves made by Emergency Medical Service (EMS) saves which is published by Illinois Department of Public Health (IDPH) and located on their Data dashboard.

<https://idph.illinois.gov/OpioidDataDashboard/>

Opioid Response Advisory Council

Goal: to prevent and reduce opioid misuse and overdoses



Purpose:

Gain an understanding of the existing statewide efforts and initiatives identify gaps

Promote evidence-based strategies and policies designed to combat this crisis

Support the implementation of Illinois' comprehensive strategic plan

COUNCIL MEMBERS AND MEETINGS

Five Committees:

- Children and Families
- Criminal Justice
- Medication Assisted Treatment/Recovery
- Prescribing Practices
- Public Awareness and Education

230 members representing 85 organizations

- Council members include people with lived experience of opioid use disorder (OUD) and family members.

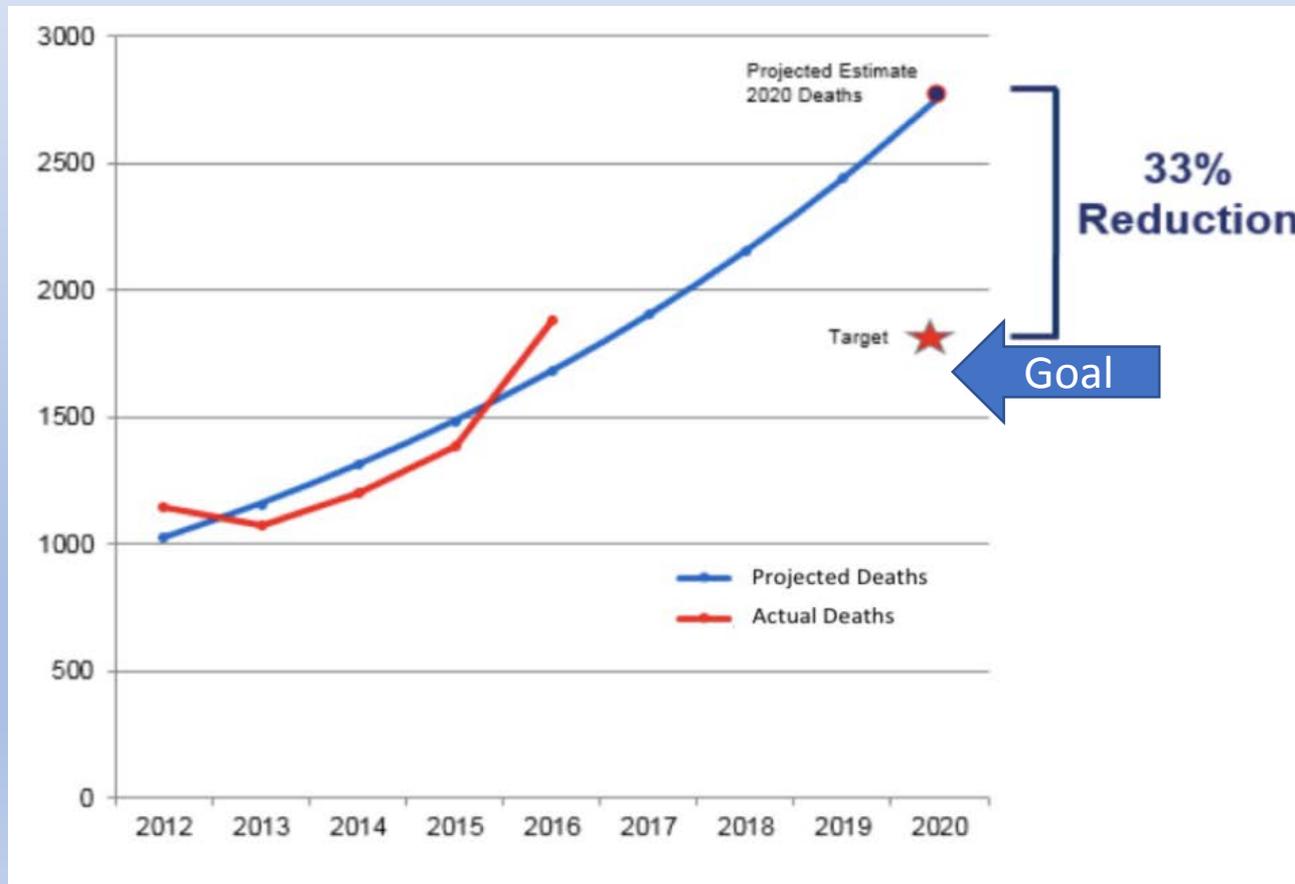
Monthly meetings led by IDHS/SUPR and Illinois Department of Public Health (IDPH)

- Committee reports
- Presentations on state and local initiatives

50% of Council members participate on committees

Statewide Opioid Action Plan (SOAP)

<http://www.dhs.state.il.us/OneNetLibrary/27896/documents/SOAP.pdf>



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OVERALL GOAL

Reduce Opioid-Related Deaths by 33%
Against Estimated Deaths in Three Years

PREVENTION

A Safer Prescribing and Dispensing

- 1 Increase PMP use by providers
- 2 Reduce high-risk opioid prescribing through provider education and guidelines

B Education and Stigma Reduction

- 3 Increase accessibility of information and resources
- 4 Increase impact of prevention programming in communities and schools

C Monitoring and Communication

- 5 Strengthen data collection, sharing, and analysis to better identify opportunities for intervention

TREATMENT AND RECOVERY

D Access to Care

- 6 Increase access to care for individuals with opioid use disorder

E Supporting Justice-Involved Populations

- 7 Increase the capacity of deflection and diversion programs statewide

RESPONSE

F Rescue

- 8 Increase the number of first responders as well as community members who are trained and have access to naloxone

G Supporting Justice-Involved Populations

- 9 Decrease the number of overdose deaths after an at-risk individual's immediate release from a correctional or other institutional facility

Stakeholder Collaboration

Illinois Legislation and Funding: Steps in the right direction

- Current Funding



Opioid Crisis Response Grants
(OCR) 2016

Heroin Crisis Act (2015)

Emergency Medical Services Access Law (2012)
The Good Samaritan Law

Drug Overdose Prevention Law (2010)

Opioid Crisis Grants (OCR)

Illinois has been awarded over \$82 million across four federal grants to address the opioid crisis, from the Substance Abuse and Mental Health Services Administration (SAMHSA) a branch of the U.S. Department of Health and Human Services (HHS). Each grant includes initiatives that align with the [Statewide Opioid Action Plan \(SOAP\)](#).

Grant	Start Date	End Date	Years	Year 1 Award (In Millions)	Total Award (In Millions)
MAT-PDOA	September 2016	August 2019	3	\$1	\$3
IPDO	September 2016	August 2021	5	\$1	\$5
Opioid-STR	May 2017	April 2020*	3	\$16.3	\$32.6
SOR	October 2018	September 2020	2	\$44.1**	\$73.1***

*Duration of Opioid-STR Grant reflects a 12-month No-Cost Extension.

Includes \$15.1 million in Year 1 supplemental funds. *If approved for a second year.

<http://www.dhs.state.il.us/page.aspx?item=105980>

Ongoing Pillars to Programs

OVERALL GOAL

Reduce Opioid-Related Deaths by 33%
Against Estimated Deaths in Three Years

Prevention

Opioid Crisis Helpline

Marketing Outreach

Overdose Education

Naloxone Distribution

Expansion OUD Primary
Prevention

Treatment and Recovery

Expanded Methadone
Treatment

Access to MAT - AMAT

Recovery Homes/Oxford
Houses

Pregnant/Post partum
Services

Hospital Warm Hand-off

Residential Stabilization Centers

Response

Correctional Facility MAT

Pregnant/Post partum

Community Based
Outreach/Linkage

Tech Assistance for MAT
Providers

Digital Toolkit

Improved PMP

Stakeholder Collaboration

Recovery Oriented Systems of Care

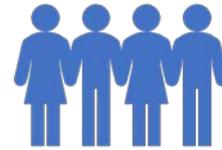
- *A ROSC is a coordinated network of community based services and supports that is person-centered and builds on the strength and resilience of individuals, families, and communities to achieve abstinence* and improved health, wellness and quality of life for those with or at risk of alcohol and drug problems.*

*Note that abstinence is in the SAMHSA ROSC definition, but others have replaced “abstinence” with “recovery”.

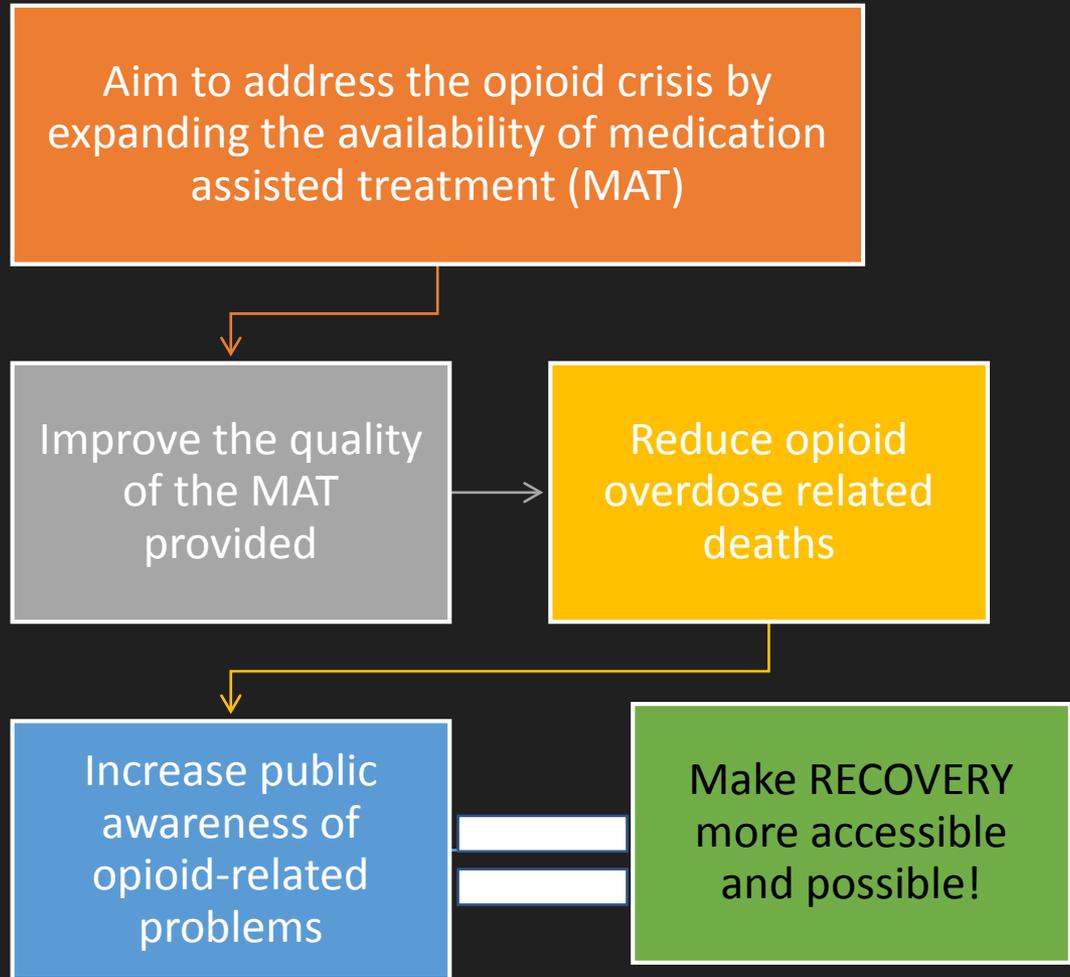
https://www.samhsa.gov/sites/default/files/rosc_resource_guide_book.pdf

Recovery Oriented System of Care (ROSC) Goals:

- Building a **culture** that builds and nurtures recovery
- Building **capacity** and infrastructure to support a recovery-oriented system of care
- Developing **commitment** to implement and sustain a recovery-oriented system of care



Opioid Crisis Response Grants (OCR)



What is Medication Assisted Treatment/ Recovery (MAT)

The use of FDA-approved medications with counseling and behavioral therapies to treat substance use disorders and to prevent opioid overdose



MAT is primarily used for the treatment of Opioid Use Disorders

FDA Approved Medications Medication Assisted Treatment (MAT)

Medication	Mechanism of action	Route of administration	Dosing frequency	Available through
Methadone	Full agonist	Available in pill, liquid, and wafer forms	Daily	Opioid treatment program
Buprenorphine	Partial agonist	Pill or film (placed inside the cheek or under the tongue)	Daily	Any prescriber with the appropriate waiver
		Implant (inserted beneath the skin)	Every six months	
Naltrexone	Antagonist	Oral formulations	Daily	Any health care provider with prescribing authority
		Extended-release injectable formulation	Monthly	

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Agonist: a substance that fully activates the receptor that it binds to; Blocks the craving for opioids;

Antagonist: a substance that occupies the receptor but does not activate them; Blocks the effect of opioids;

Reasons to
choose
Medication
Assisted
Treatment/
Recovery

Increase Retention in
Treatment

Reduced Illicit opioid use

Reduced death for any
reason

Reduced HIV risk
behaviors

Source: SAMHSA website *Decisions in
Recovery: Treatment for Opioid Use Disorder*

Effectiveness of Medication Assisted Treatment (MAT)

Opioid Use Disorder Treatment Retention Rates

Opioid treatment WITHOUT Medication Assisted Treatment (MAT)	6%
Injectable Naltrexone	10 – 31%
Buprenorphine	60 – 90%
Methadone	74 – 80%

Source: SAMHSA website *Decisions in Recovery: Treatment for Opioid Use Disorder*

What is the Access to Medication Assisted Treatment (A-MAT) Network?

The Access to Medication Assisted Treatment Program creates a systemic treatment response to the opioid epidemic; based on the hub and spoke model, an evidence-based model developed in Vermont to address rural opioid crisis.

This program enhances the provision of MAT by developing both Hub designated providers (OTPs) and the Spokes (primary care/FQHCs) to provide coordinated care. Through Federal Opioid Crisis Response Grant funds we have funded 5 project sites.

SAMHSA technical assistance, combined training and coaching for new Hub & Spoke sites. Focus on model implementation and development of MAT Team. Clinical training for key staff.

Rush University Opioid Use Disorder Treatment Fellowship Program- Immersion Weekend Training

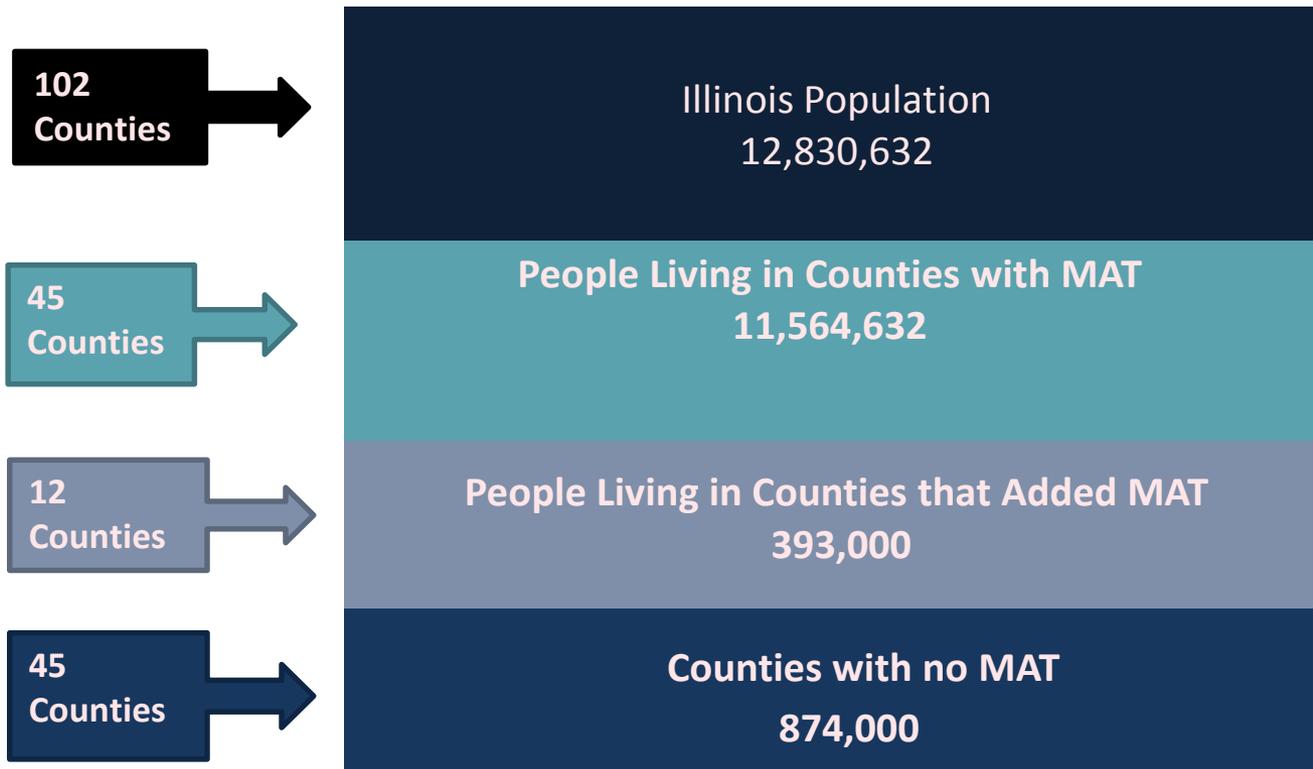
HUB and SPOKE Model = AMAT

A Hub is a regional opioid treatment center responsible for coordinating the care and support services for patients who have complex substance use disorders and/or co-occurring substance use and mental health conditions. Patients who need methadone must be treated here. Patients who need buprenorphine or naltrexone may be treated here.

A Spoke is a primary care practice or health center responsible for coordinating the care and support services for patients with opioid use disorders who have less complex medical needs. Only patients who are treated with buprenorphine or naltrexone receive treatment in the spokes.

Depending on the patient's needs, **Support Services** may include mental health and/or substance use disorder treatment, pain management, family supports, life skills, job development, and recovery supports.

FY 19 Progress- Reducing the Number of MAT Deserts



FY 20 Goal: Reduce the number of people living in counties with no Medication-Assisted Treatment (MAT) from 874,000 (45 counties) to less than 250,000 (25 counties). Baseline: 3/2019

Expanded Outpatient Methadone Treatment (OMT) Services

Require certification by multiple federal agencies as an OTP and licensure by SUPR

Funded by Medicaid, Federal Substance Abuse Block Grant and state funds

Eighty five OMT programs statewide

As of May 22, 2019, 3,088 clients admitted to 12 OCR-funded OTP community based programs.

Correctional Facility Based MAT Services

Injectable naltrexone is the FDA-approved form of medication assistance for OUD that is most often preferred by correctional facility administrators

Six (6) organizations providing injectable Naltrexone services for persons with OUD in county jails and at the Sheridan Correctional Center

Services consist of screening, assessment, initial injections, and post-release treatment referrals while incarcerated..

Services have been implemented at 10 county jails, with services in the planning stage at four additional jails and 766 persons have been served through May 22, 2019.

SUPR's Recovery Home Services

Alcohol and Drug Free
Homes -

Rules, peer-led groups, staff
activities and/or other
structured operations are
directed toward
maintenance of sobriety.

Expanded Recovery Home Services for
persons with Opioid Use Disorder (OUD)
who have unstable living arrangements
and are active in some form of
Medication Assisted Treatment (MAT)

(7) Recovery Home organizations were
identified to provide expanded services
for persons with

As of May 22, 2019, 192 clients have been
admitted to these services

Hospital Warm Hand-off

Optimal timing and services offered to patients after an overdose reversal - Patients who arrive at a hospital emergency department after an overdose reversal are at a high risk of subsequent overdose.

Robust evidenced based screening throughout hospital and referral to treatment utilizing Peer Recovery Specialists establishes a collaborative relationship with patient and providers involved.

Services have thus far been initiated at over 12 hospitals, with **3,481** patients having been served to-date. Of these 3,481 patients, **72.7% (2,532)** were admitted by the community-based treatment providers to which they were referred following discharge.

Community-Based Outreach/Linkage/Referral Services

Specialized and specific community-based outreach, referral, and linkage services are available for persons with OUD in high-need areas

Peer outreach workers canvass multiple locations that are frequented by high-risk individuals, such as parks, street corners, public transportation stations, mini-marts, and liquor stores.

Through the end of April 2019: 6,038 persons were provided outreach services; 3,395 of these persons screened positive for opioid and other illegal substance use and expressed an interest in treatment; 2,042 of these completed a meeting with a linkage manager; and 1,707 presented for the treatment intake.

Illinois Helpline



Statewide 24-hour, 7-day/week, 365 day/year helpline for persons with OUD-related issues

- ❑ The Helpline was launched on December 5, 2017 and has received **13,671** calls as of June 9, 2019.
- ❑ The Helpline's website was launched in March 2018 and has received **29,242** visits by **22,311** unique individuals as of June 9, 2019.

IDHS/SUPR Prevention Program

- Chicago Substance Abuse Prevention Services (CSAPS)

- Substance Abuse Prevention Services (SAPS)

- State and/or Regional Substance Abuse Prevention Services (SRSAPS)

- Tobacco Programs:

- Illinois Tobacco Enforcement Program (TEP)
- USFDA Compliance and Enforcement Tobacco Retail Inspection Program (FDA)

- The 2014 Illinois Youth Survey

My Generation RX

My Generation Rx, an evidenced-based Youth Prevention Education program.

My Generation Rx, the teen version of Generation Rx, educates teens about the potential dangers of misusing prescription medications.

PUBLIC AWARENESS CAMPAIGNS



- **Guard and Discard** –Focuses on importance of safe use, storage and disposal of prescription pain medications
- **Ending Opioid Misuse in Illinois (#EOM)** - Targets individuals who are misusing opioids as well as their friends, families, and communities, using non-stigmatizing messaging.
- **A Dose of Truth** - Creates base knowledge in the general population about what opioids are.

Improved Medical Provider EHR Opioid- Prescriber Reporting

The Illinois Prescription Monitoring Program (PMP) receives Controlled Substance prescription data from retail pharmacies which enables prescribers and dispensers to view the historical data for current and prospective patients.

Prescribers are required to review the PMP when considering opioids for individual patients, but this manual process is burdensome for medical practitioners in a busy practice.

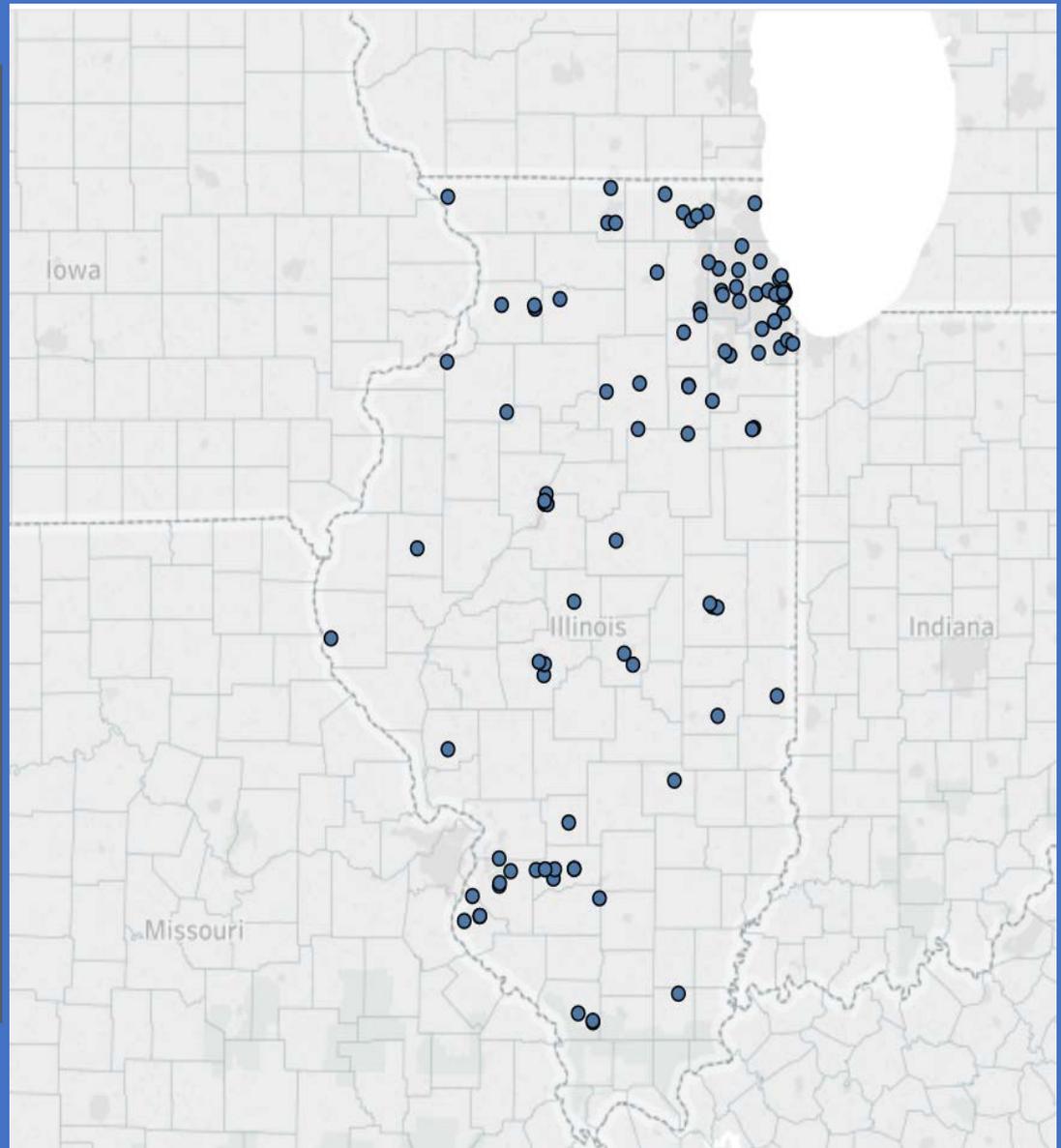
IDHS/SUPR is supporting a portion of the PMP's **PMPnow** campaign, an effort to support improved opioid prescriber reporting in commonly used Electronic Health Record (EHR) systems among Illinois medical provider systems. These “automated connections” make it more convenient for prescribers to check the PMP through their EHR, rather than logging into an external system.

As of April 30, 2019, there were 107 PMP/EHR connectivity implementations and 69,709 registered PMP users.

SUPR Statewide Naloxone Distribution Sites

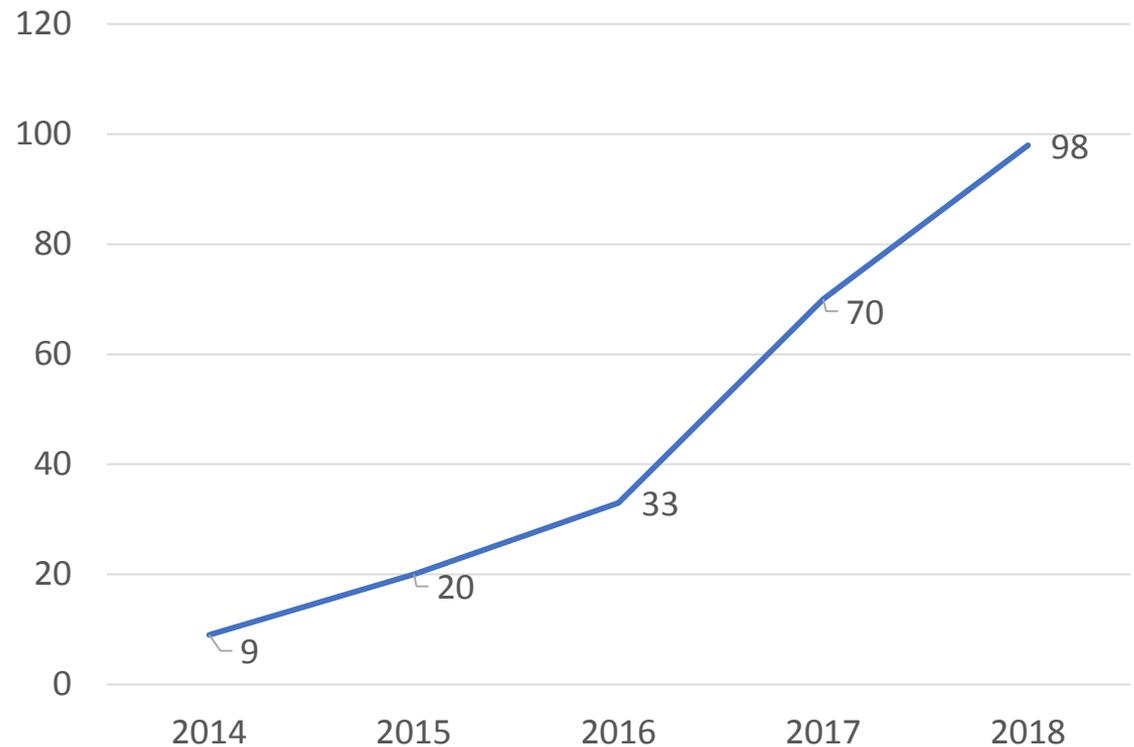
Drug Overdose Prevention Program (DOPP)

117 DOPP OEND
Programs as of 6.1.19



SUPR Drug Overdose Prevention Program (DOPP)

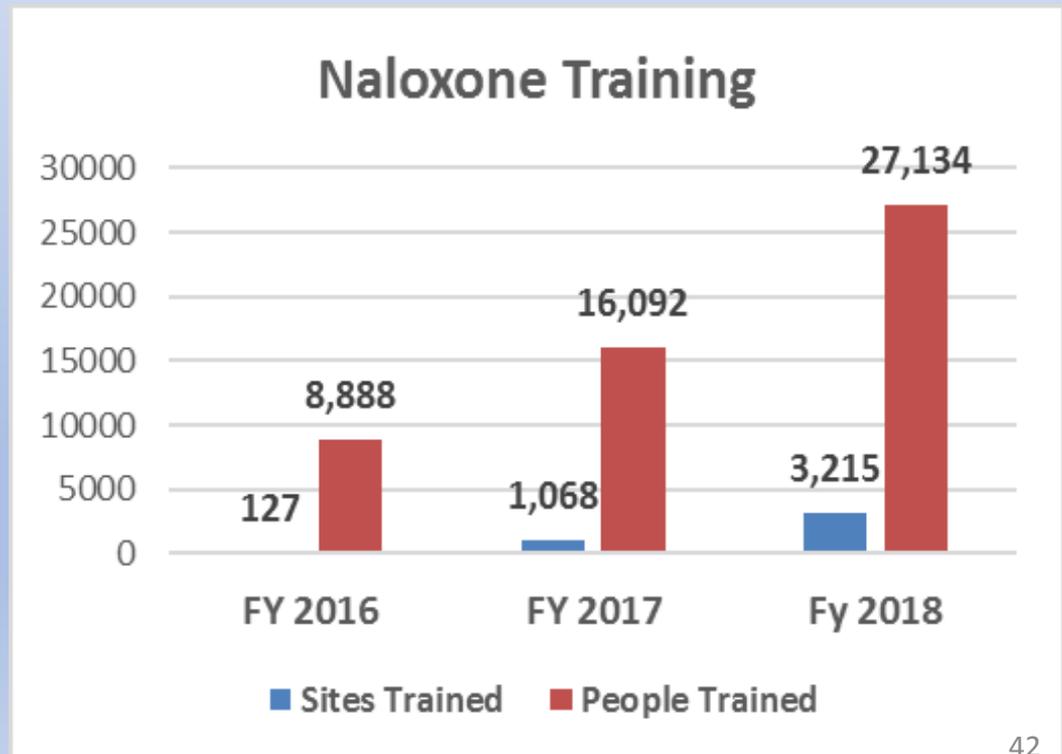
DOPP Enrollee Programs by Fiscal Year



SUPR Drug Overdose Prevention Program (DOPP)

Expanded Naloxone Purchase/Training/Distribution Services

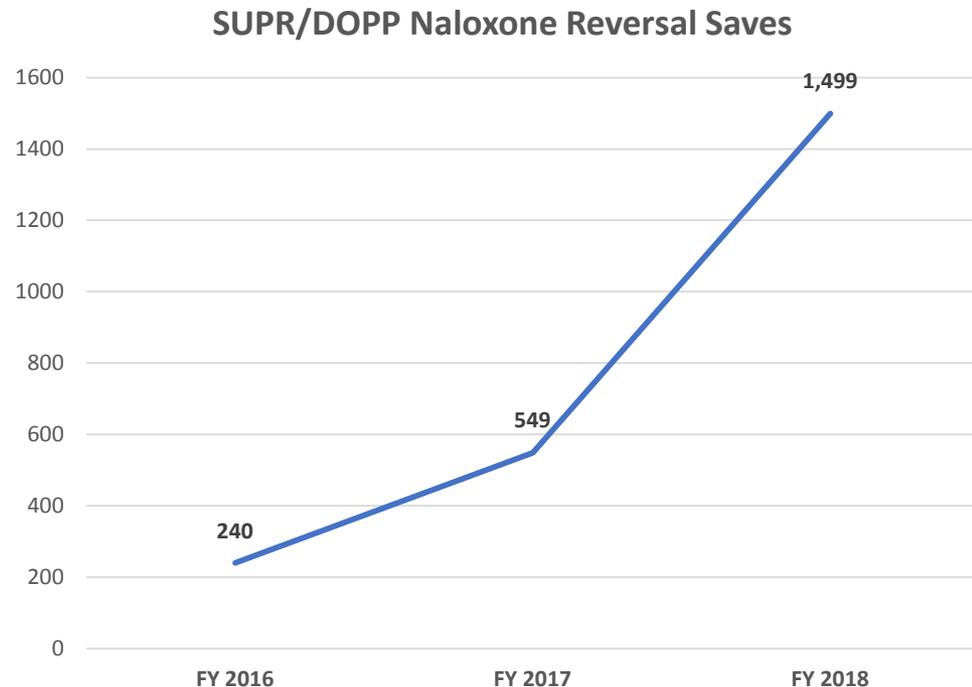
- Naloxone is a medication that reverses an overdose by blocking opioids, including prescription opioids, synthetics like fentanyl, and heroin.
- Federal funds are used for naloxone purchase, training, and distribution to traditional first responders like law enforcement officers and fire departments as well as *non-traditional* first responders like bystanders, friends, family members of heroin or other opioid dependent persons, and others.



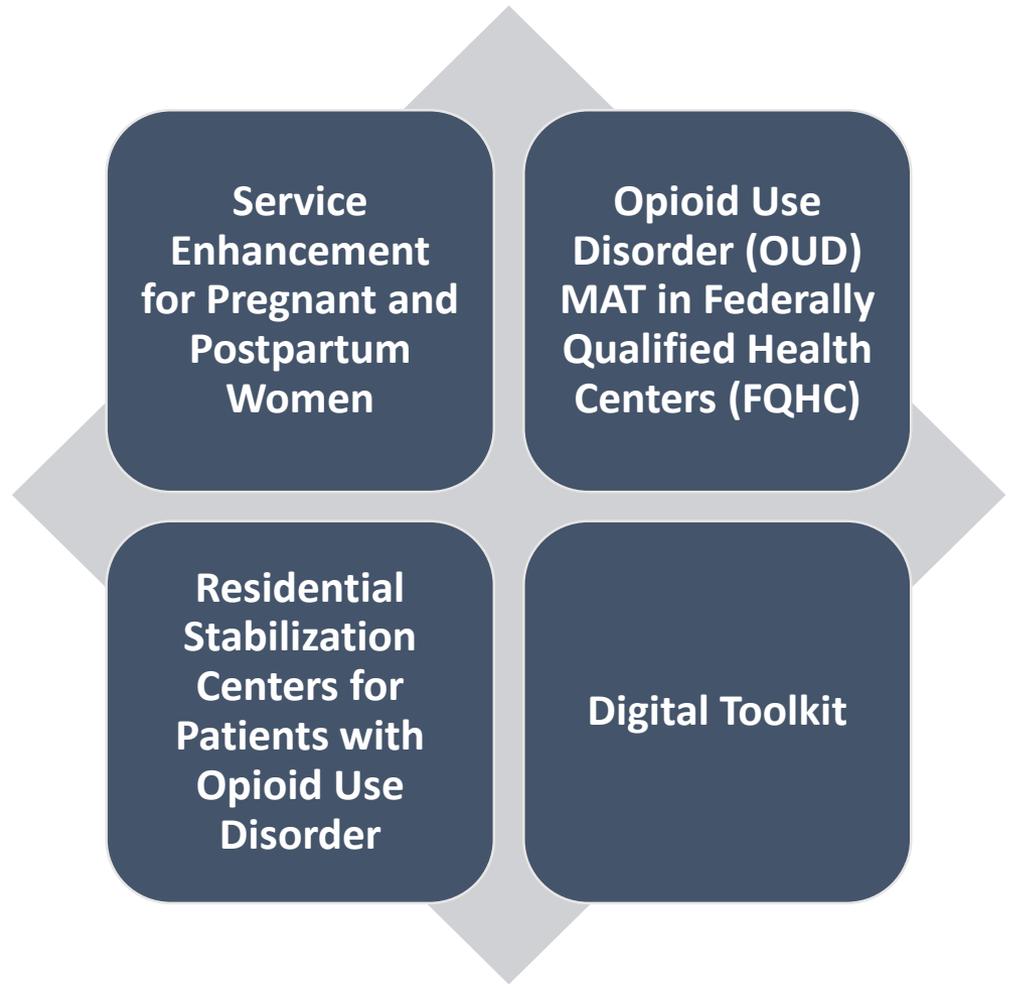
SUPR DOPP OVERDOSE SAVES

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<https://idph.illinois.gov/OpioidDataDashboard/>



What's Next



Expanded Hospital Warm Handoff Programs,
Recovery Homes and Independent Living
Initiative

Pregnant and Postpartum Women with Opioid Use Disorder (PPW- OUD)

- Enhanced multi-disciplinary teams to include a Doula Certified Peer Recovery Specialist to support pregnant women.
- The Doula Certified Peer Recovery Specialist will provide support to pregnant and postpartum women up to 12 months after giving birth and assist in addressing the needs of their families.
- A Doula Certified Peer Recovery Specialist is a person in active recovery who obtains dual certification as both a birth and a postpartum doula to assist the recovering mother through all phases of obstetrics and the CPRS to assist in recovery from her addiction.

<http://www.dhs.state.il.us/page.aspx?item=117590>

Opioid Use Disorder (OUD) MAT in Federally Qualified Health Centers (FQHC)

- The intent of this initiative is to increase the number of persons who are receiving MAT at FQHC's in Illinois.
- FQHC's can bill Medicaid for the medications and supportive services that make up MAT, so this grant will support services for patients that are not Medicaid-eligible, or services that are not Medicaid-billable.

Residential Stabilization Centers for Patients with Opioid Use Disorder

- These resources are targeted to the current gap in the service continuum for persons with OUD who lack housing and other supports to effectively engage in MAT during the early stage of their recovery process.
- Individuals still need safe, stable, temporary housing and supports like clothing, meals, and access to mental health services and primary health care.

Digital Toolkit

- A collection of individualized digital resources, online or not (e.g. webpages, videos, chat rooms, secure texting or one-way texting, secure evidence-based applications, etc.)
- Funded organizations developed and/or collected and presented as a recovery support to individuals in or seeking recovery.
- Goal: To retain patients in MAT and offer additional supports

Independent Living Initiative

- This initiative supports community-based organizations that manage a two-year loan, a start-up stipend, recovery support services and tenancy support
- Oxford Houses - Democratically run, self-supporting and drug free homes that accept people who are active in MAT

IDHS/SUPR

Opioid Resources

<http://www.dhs.state.il.us/page.aspx?item=93882>

DOPP

<http://www.dhs.state.il.us/page.aspx?item=58142>

Monthly OCR Update

<http://www.dhs.state.il.us/page.aspx?item=105980>

NOFOs

<http://www.dhs.state.il.us/page.aspx?item=114615>



State of Illinois