# Illinois Learning Collaborative to Support Medication Assisted Recovery (MAR) Implementation for Justice-Involved Populations

**ICAHN Conference June 27, 2023** 

These services are funded in full or in part through a State Opioid Response Grant (TI083278) to the Illinois Department of Human Services, Division of Substance Use Prevention and Recovery, from the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.





#### **TODAY'S PRESENTER**



Julie White

County Coach and SME

Health Management Associates

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#### **AGENDA**

- >> Introduction to Health Management Associates (HMA) and the Team
- Overview of Illinois Learning Collaborative
- >> Jail as Core Component of Addiction Treatment Ecosystem
- >>> Why do MAR? An Overview of the Legal Landscape
- >> Technical Assistance Resources



#### **HEALTH MANAGEMENT ASSOCIATES (HMA)**

We are a leading independent, national healthcare research and consulting firm providing technical and analytical services.

We specialize in publicly-funded health programs, system reform and public policy.

We work with purchasers, providers, policy-makers, program evaluators, investors, community-based organizations, and others.

We have extensive experience advising on and supporting the use of medication assisted recovery (MAR) for opioid use disorder in jails and communities across the country.

#### **Core Team**



BREN MANAUGH, LCSW, CPHQ, CCTS

Principal

Project Director, SME



MARC RICHMAN, PH.D Principal County Coach, SME



RICH VANDENHEUVEL, MSW

Principal

County Coach, SME



JULIE WHITE, MSW

Principal

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MARGOT SWIFT, MPH

Consultant

Project Coordinator

#### **SMEs**



SHANNON ROBINSON, MD

Physician Principal



SCOTT HAGA, MPAS, PA-C Senior Consultant



Additional
Faculty:
Clinical
Advisors and
Subject Matter
Experts



MARGARET KIRKEGAARD, MD, MPH

Physician Principal

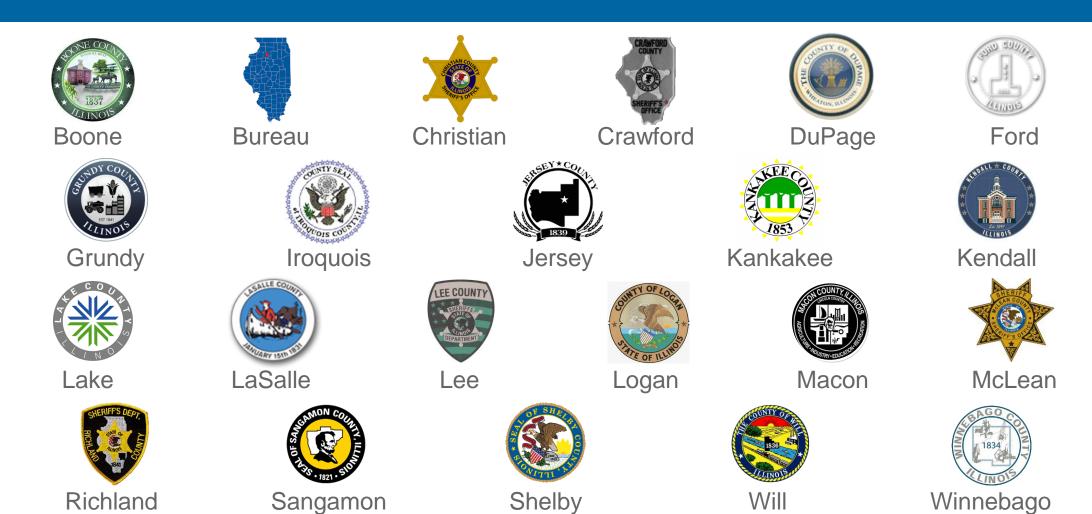
County Coach, SME



MARY KATE BROUSSEAU, MPH
Principal
Project Manager



#### PARTICIPATING COUNTIES - 22 AND COUNTING!







# IL LEARNING COLLABORATIVE TO SUPPORT MAR FOR JUSTICE-INVOLVED POPULATIONS



#### **Priority Population**

Illinois State Overdose Action Plan identifies justice-involved individuals as high priority for receiving services to treat and prevent overdose

Treatment for incarcerated people is one of the <u>eight core strategies</u> for overdose settlement funds in IL



#### **Learning Collaborative**

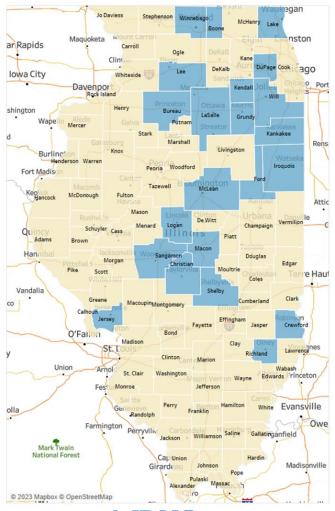
HMA is offering robust expert technical assistance (TA) for county teams interested in standing up or expanding medication assisted recovery (MAR) programs in their jail and to support continued recovery support in the community post-release.

- Initiated with SOR II funding, continuing with SOR III funding
- 3 19 counties currently participating with "open enrollment" to other interested counties to join the learning collaborative: Receive individualized county team coaching, participation stipends, and multiple modes of learning and TA



<sup>\*</sup>Services are funded in full or in part through a State Opioid Response Grant the Illinois Department of Human Services, Division of Substance Use Prevention and Recovery, from the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.

# ILLINOIS JAIL-BASED MAR LEARNING COLLABORATIVE



22

#### **Active Counties:**

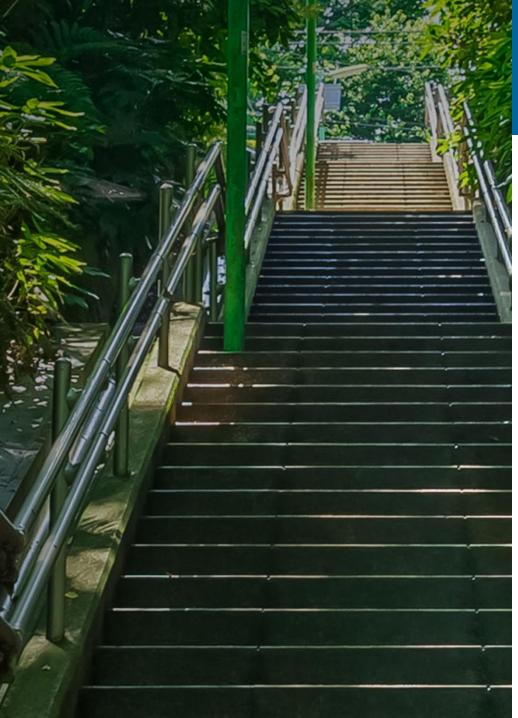
Boone Lake Bureau Lasalle Christian Lee Crawford Logan Macon DuPage Ford McLean Grundy Richland Iroquois Sangamon Jersey Shelby Kankakee Will Kendall Winnebago Active counties represent:

50.6%

of the state population (excluding Cook County)







# HMA MODEL FOR IMPLEMENTATION OF MAR IN JAILS, PRISONS, AND JUSTICE ECOSYSTEMS

#### In our model MAR is defined as:

- Implementation of at least two forms of the FDAapproved medications: naltrexone; buprenorphine; methadone -- continuation and/or initiation
- >>+ other evidence-based interventions for Opioid Use Disorder and Stimulant Use Disorders
- »Access to naloxone for overdose prevention

Alignment with community standards of care

Access to behavioral health and other services; re-entry planning





#### WHY WE USE A TEAM MODEL:

DIFFERENT PERSPECTIVES ON PERSON WITH A SUBSTANCE USE DISORDER

**Health Care Courts and Providers: Legal System: DEFENDANT PATIENT Jail Custody** Officers: **DETAINEE** 



#### HARNESSING THE POWER OF THE COUNTY LEARNING COLLABORATIVE

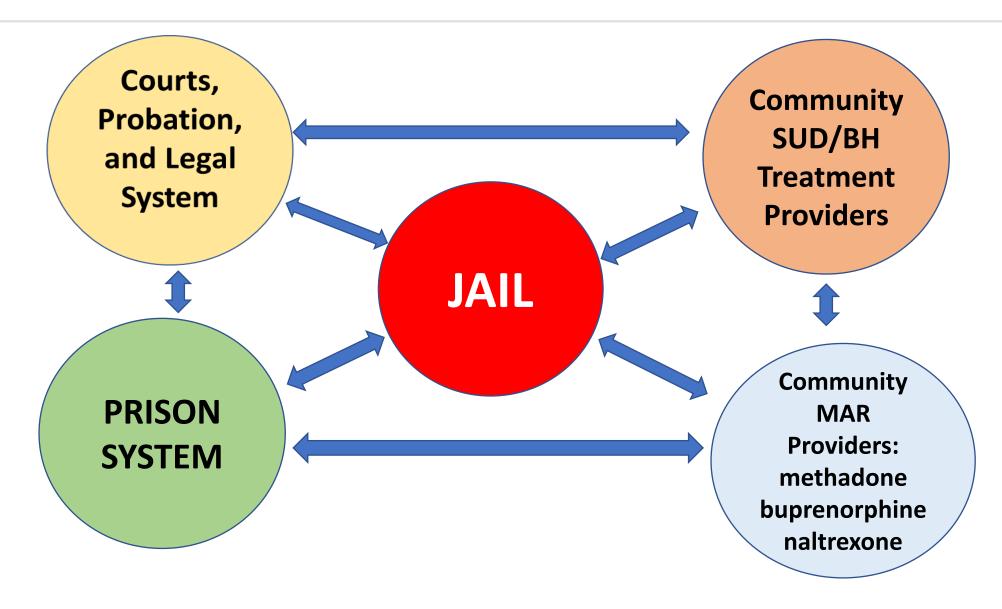
- >>> Participating teams benefit from sharing with and learning from their peers/counterparts in other counties
- >> The whole is greater than the sum of its parts Aristotle
  - >> Lessons learned
  - Shared solutioning overcoming challenges and barriers with shared experience and input
  - >> Maximizing your voice to elevate issues to the policy and state level



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#### **JAIL AS PART OF THE SAFETY NET HEALTHCARE ECOSYSTEM**





#### **ASPIRATIONAL GUIDING PRINCIPLES FOR COUNTY TEAMS**

- The jail is a health care site in the community's health care safety net
- A county resident receives the same care for acute and chronic conditions wherever they seek care in the county, including the jail, and transitions are managed and supported
- The county has a <u>single standard of care</u> such that persons with OUD have access to all FDA-approved forms of MAR available to them, via an individualized treatment plan, as well as effective treatment for stimulant use disorder





# PROGRESS WITH PARTICIPATING IL COUNTIES – A CURRENT SNAPSHOT

#### Since May 2021

- Jails progressing beyond offering no medications for MAR or using only an antagonist (naltrexone) and toward offering all 3 FDA-approved medications
- >> Increase in number of detainees receiving MAR in custody, including in-custody initiation of buprenorphine
- >> Jails adding access to methadone where clinically indicated beyond pregnant women only
- >> Increase in number of jail providers for MAR



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# PROGRESS WITH PARTICIPATING IL COUNTIES – A CURRENT SNAPSHOT

- >> Jails developing strong and sustainable relationships with county treatment providers for SUD assessment and treatment, in-custody behavioral therapies, and "hot hand-offs" at release
- Partnerships include rural and urban/suburban counties no jail too big or too small
- >> Jails developing processes for initial universal screening for and identification of SUD
- Jails implementing training for and distribution of Narcan

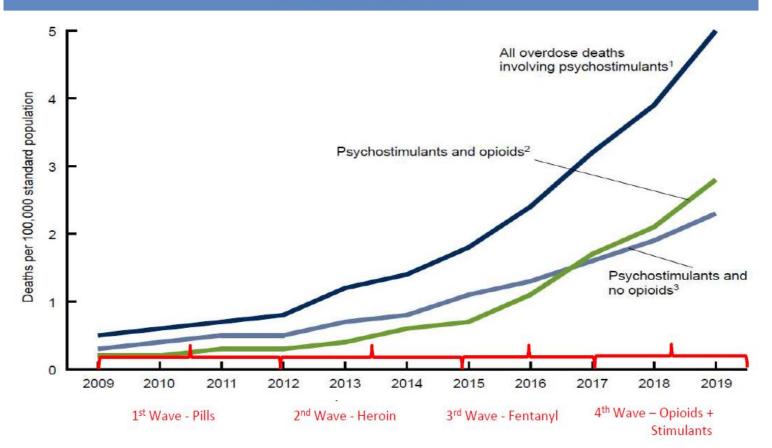


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#### INCREASE IN PEOPLE DYING FROM STIMULANT USE DISORDER

# Psychostimulant Overdose Deaths 2009-2019



Source: Hedegaardet al., Data Brief 406, April 2021 (adapted by Shoptow, S. 2021)



#### METHAMPHETAMINE

#### Methamphetamine:

- Highly addictive
- Increasingly potent, and increasingly includes fentanyl

#### Potential side effects:

- Weight loss
- Severe dental issues
- Violence
- Psychosis
- Overdose/Overamping
- Stroke
- Heart attack
- Risk of infectious disease



#### **■ BEHAVIORAL THERAPIES FOR STIMULANT USE DISORDER IN THE JAIL SETTING**

For stimulant use disorder there are BH therapies that are evidence-based and effective – HOWEVER – jails have special concerns and considerations...





#### **■ MAKING THE CASE FOR MAR FOR JUSTICE INVOLVED INDIVIDUALS IN ILLINOIS...**

- Why should counties in Illinois make MAR accessible to people in jail?
- Video from Illinois custody professionals and other champions and a person with lived experience



Medication Assisted Recovery:

Making the Case



https://vimeo.com/725707856/57a2b0c78b



### CUMULATIVE TOTAL OF INDIVIDUALS THAT RECEIVED MAR IN LC COUNTIES IN 2022\*



<sup>\*</sup> Inclusive of all 3 forms of medication



# CURRENT STATE OF MAR NATIONALLY: WHAT THE LEARNING COLLABORATIVE DIRECTLY ADDRESSES

- >> Nationally, most jails and prisons:
  - >> Withdrawal management with only symptom response ("comfort meds") is common
  - Erratic and non-evidence-based practice is common and especially risky for pregnant women
  - >> Forced withdrawal from MAR when incarcerated is common
- >> In jails/prisons, custody trends *toward*:
  - >> Transition to accepting OUD as identical to other chronic diseases
  - >> Growing recognition that appropriate treatment reduces custody challenges

Growing body of case law finding counties liable for not providing access to MAR in jails



# A HIGH-LEVEL SUMMARY OF THE ROLE OF COURTS IN INCREASING ACCESS TO MOUD IN CARCERAL SETTINGS



#### **■ FEDERAL POLICY**

#### **Managing Substance Withdrawal in Jails: A Legal Brief**

Office of Justice Programs Bureau of Justice Assistance (Feb. 2022)

Purpose: an overview of constitutional rights and key legislation related to substance use withdrawal; outlines steps for creating a comprehensive response to SUD

Laws Creating Liability: federal civil rights claims under the **Constitution** (8A, 14A, 5A) and statutes pursuant (§ 1983, CRIPA, ADA); state tort law (wrongful death, medical malpractice, IIED)

https://bja.ojp.gov/doc/managing-substance-withdrawal-injails.pdf

#### The Americans with Disabilities Act and the Opioid Crisis: Combating **Discrimination Against People in Treatment or Recovery**

Department of Justice Civil Rights Division (April 2022)

*Purpose*: information about how the ADA can protect individuals with OUD and other SUD from discrimination

Example Violation: "A jail does not allow incoming inmates to continue taking MOUD prescribed before their detention. The jail's blanket policy prohibiting the use of MOUD would violate the ADA."

Enforcement: investigations, warning letters, and lawsuits against jails and prisons

https://archive.ada.gov/opioid guidance.pdf

#### **2022 National Drug Control Strategy**

Office of National Drug Control Policy (April 2022)

Carceral Settings Objective 2: increase access to MOUD for BOP, state prisons, and local iails

Carceral Settings Principle 1: normalize lowthreshold access to all three MOUD throughout the criminal legal system, including maintenance and rapid initiation, and at medically appropriate dosing

Target Agencies: DOJ/OJP, BOP, NIC HHS/ASPE, NIH

https://www.whitehouse.gov/wpcontent/uploads/2022/04/National-Drug-Control-2022Strategy.pdf



#### AVOIDING LIABILITY FOR ONE-SIZE-FITS-ALL POLICIES LIMITING ACCESS TO MOUD



# WHY TREAT ADDICTION IN JUSTICE SETTINGS?

**EVERYBODY WINS** 

- >>> Person with OUD can attain recovery and gets their life back
- >> Overdose deaths are prevented
- >> Crime is prevented



Today, the emerging question for criminal justice and human service systems is no longer *IF* we should support treatment of opioid addiction with MAR, but *HOW*.



#### JOINING THE LEARNING COLLABORATIVE

#### Teams from counties apply to be part of Learning Collaborative

- Team includes jail health care, jail custody, probation, drug courts, county SUD/BH program, county administrator, key community provider(s), and other key partners
- Team Commitment: We meet the team where they are and help them move toward use of at least two forms of MAR in jails and drug courts; participate in learning sessions and monthly coaching calls
- Team Benefits:
  - \$50,000 minimum to offset project time commitment
  - Access to state and national experts for learning and barrier busting
  - Resources, webinars, in-person events with other counties to share and learn



#### TECHNICAL ASSISTANCE FOR IN-JAIL MAR DEVELOPMENT

**County-Specific MAR Implementation Plan** – We individualize our coaching to reflect each county's reality

- Access to FDA-approved medications for MAR in the jail processes, providers, and patient flows
- Training on addiction neuroscience and OUD treatment to all health care, mental health, and custody staff
- Coordinate closely with drug courts and probation on release planning
- Develop procedures for "hot hand-off" with community organizations
- Naloxone distribution plan



#### ILLINOIS LEARNING COLLABORATIVE: APPLICATION TO PARTICIPATE

#### **Applications Accepted on a Rolling Basis**

#### There are two components to applying:

- ONLINE APPLICATION: You may close the application and return to it later from the same computer; your entries will be saved. You may also move backward and change answers before submitting. No edits can be made after submission.
- 2. LETTERS OF SUPPORT: Attach your letters of support on the last page of the application. You may enter them separately or scan them all into one document to upload

#### **Access the Application here:**

https://www.surveymonkey.com/r/IL MAR in CCJS

(A Word version of the application template is available to use to prepare)



# QUESTIONS



#### **NEXT STEPS**

- Apply to the Learning Collaborative for 1:1 Coaching & Expert Support for MAR implementation at your county jail and in your community.
- Join Office Hours to support prescribers and clinicians.
  - Bi-weekly sessions, continuing through Summer 2023 (CME offered)
  - Email <u>mswift@healthmanagement.com</u> to register
- Participate in the *IL MAR Conference*, April 20, 2023
  - Register <u>HERE</u>

Please spread the word and encourage other counties to apply.

Thank you for all your hard work!



#### CONTACT US

#### FOR ANY QUESTIONS OR COMMENT

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#### HEALTH MANAGEMENT ASSOCIATES