Challenges of Opioid Use Disorder in Rural Settings: A Federal Perspective

Richard A. Jenkins PhD National Institute on Drug Abuse

8th Annual Vermont Center on Behavior & Health Conference Rural Addiction and Health October 9, 2020

No conflicts to disclose.





- Rural---many federal (& other) definitions
 - Important drivers of policy and resources
 - Urban is better defined than rural, some define urban but not rural
 - Zip codes, counties, & census blocks/tracts used; some aggregate, e.g., % urban or rural tracts in county
 - Rural definitions can be very restrictive (census)
 - Some definitions can be overruled (e.g., states can enable rural health center areas)

Contents lists available at ScienceDirect



Drug and Alcohol Dependence

journal homepage: www.elsevier.com/locate/drugalcdep



Review

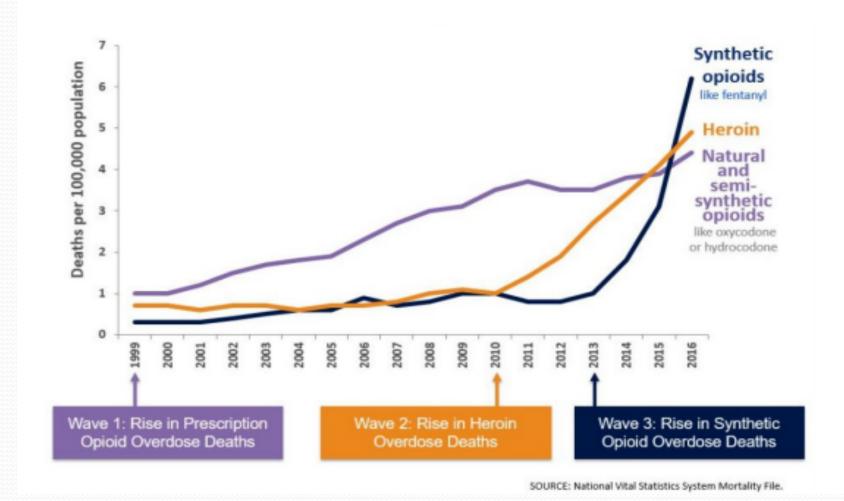
Injection drug use, HIV/HCV, and related services in nonurban areas of the United States: A systematic review



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- Department of Psychology and Neuroscience, University of North Carolina at Chapel Hill, 235 E. Cameron Avenue, Chapel Hill, NC, 27599, United States
- ^c Injury Control Research Center and Department of Behavioral Medicine and Psychiatry, West Virginia University, 3606 Collins Ferry Road, Suite 201, Morgantown, WV, 26505, United States
- Identified 34 papers from 24 unique research projects among PWID in 17 states 1990-2016 (KY & IN over-rep, VT=1, NH=0)
- HIV/HCV testing in only 3 studies since 2010
- Sharing injection equipment used varying definitions of sharing and was reported in 12, and 8 of them examined correlates of injection risk.
- Syringe access addressed in 9 studies on suggesting limited access through SSPs and pharmacies.
 - HCV testing access addressed by 2 studies, HIV testing by none

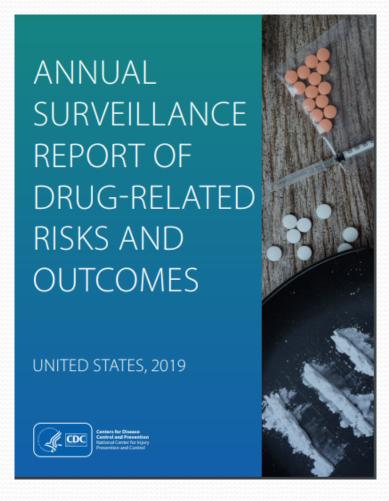
3 Waves of the Rise in Opioid Overdose Deaths

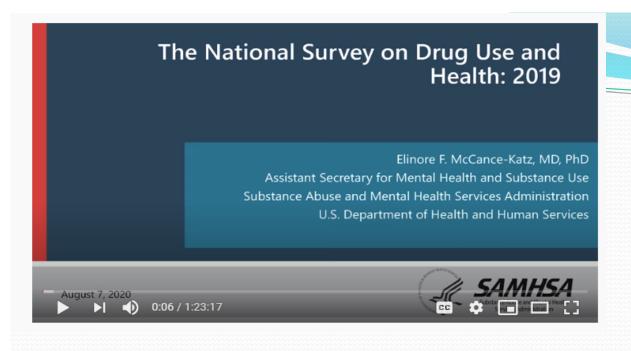


https://www.cdc.gov/cpr/readiness/oo_docs/OpioidOverdoseResponseFundingNationalWebinar_June 182018_508c.pdf

State of the Opioid Epidemic

- Opioid prescribing has decreased, 2012-18.
- The rate of drug overdose deaths increased significantly from 1999 to 2017.
- There were small increases in Rx opioid-involved deaths from 2006 to 2017.
- Heroin-involved deaths were stable from 2015 to 2017.
- Deaths rates involving synthetic opioids other than methadone, cocaine, and psychostimulants with abuse potential all increased from 2016 through 2017.
- Drug use in rural counties generally was similar or less than in metro areas.



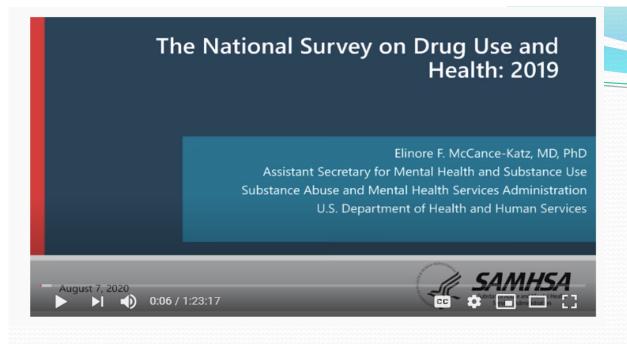


https://www.youtube.com/watc h?v=baZyL2WoG50&feature=yo utu.be

https://www.samhsa.gov/data/si tes/default/files/reports/rpt2939 2/Assistant-Secretarynsduh2019_presentation/Assista nt-Secretarynsduh2019_presentation.pdf

NSDUH Highlights (Trends 2016-19, past year behavior)

- Opioid misuse signif decline (mostly reflecting age 12-17)
- Rx pain reliever misuse/disorder/initiation stable
- Heroin misuse/disorder stable, heroin initiation had a signif decline (2019)
- Rx stimulant use stable
- Methamphetamine use has increased among those 26 & older



https://www.youtube.com/watc h?v=baZyL2WoG5o&feature=yo utu.be

https://www.samhsa.gov/data/si tes/default/files/reports/rpt2939 2/Assistant-Secretarynsduh2019_presentation/Assista nt-Secretarynsduh2019_presentation.pdf

More NSDUH Highlights

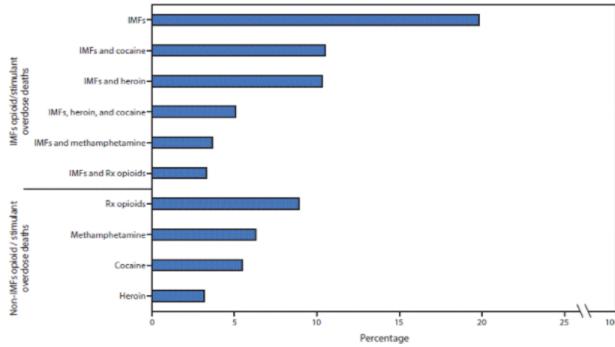
- 89% of illicit drug users not in treatment
 - Self-help groups are most common form of treatment
- Co-occurring mental illness/SUD
 - Increasing numbers of people since 2016
 - 49.4% of those with SMI, 38.8% with any MI report illicit drug use
 - Only 12.7% of those with co-occurring MH/SU in treatment received services for both disorders

Morbidity and Mortality Weekly Report
September 4, 2020

Vital Signs: Characteristics of Drug Overdose Deaths Involving Opioids and Stimulants — 24 States and the District of Columbia, January–June 2019

Julie O'Donnell, PhD1; R. Matt Gladden, PhD1; Christine L. Mattson, PhD1; Calli T. Hunter, MPH1; Nicole L. Davis, PhD1

FIGURE 2. Percentage of drug overdose deaths involving the 10 most common combinations of opioids and stimulants (mutually exclusive), by involvement of illicitly manufactured fentanyls (IMFs) — State Unintentional Drug Overdose Reporting System (SUDORS), 25 jurisdictions, January–June 2019*,



Abbreviation: Rx = prescription.

Retu

^{*} Drug overdose deaths involving IMFs with no other opioids or stimulants was the most frequent combination among Northeastern (24.3%), Midwestern (21.2%), and Southern (15.4%) jurisdictions.

Morbidity and Mortality Weekly Report

August 28, 2020

Nonfatal Drug and Polydrug Overdoses Treated in Emergency Departments — 29 States, 2018–2019

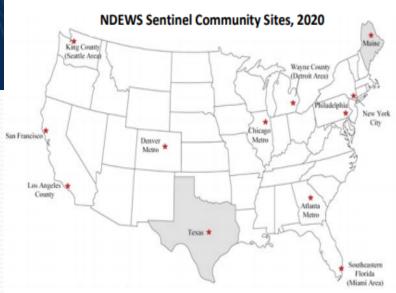
Stephen Liu, PhD1; Lawrence Scholl, PhD1; Brooke Hoots, PhD1; Puja Seth, PhD1

- Rates of ED-treated suspected nonfatal drug overdoses involving opioids, cocaine, and amphetamines, and of polydrug overdoses co-involving opioids and amphetamines increased from 2018 to 2019.
- Rates of suspected benzodiazepine-involved overdoses declined.
- Opioids were substantially co-involved with cocaine, amphetamine, and benzodiazepine overdoses in 2019 (17-24% of stimulant or benzo overdoses included opioids).

Suspected case: EHR text indicating an overdose or poisoning and involvement of a drug or a diagnostic code for opioid use, abuse, and dependence.



https://ndews.org/



- Site reports (including some of 2020)
 - Changes in overdose reports vary by location—mostly stable or small decreases
 - Fentanyl dominates overdose
 - Stimulants increasing among overdoses, usually in conjunction with fentanyl
 - Bup/Naloxone appear in overdoses, usually in conjunction with heroin and fentanyl
 - Some sites report overall overdose increases for early 2020
 - Racial differences noted locally, with some evidence of meth spreading beyond white communities

Responding to the Opioid Epidemic





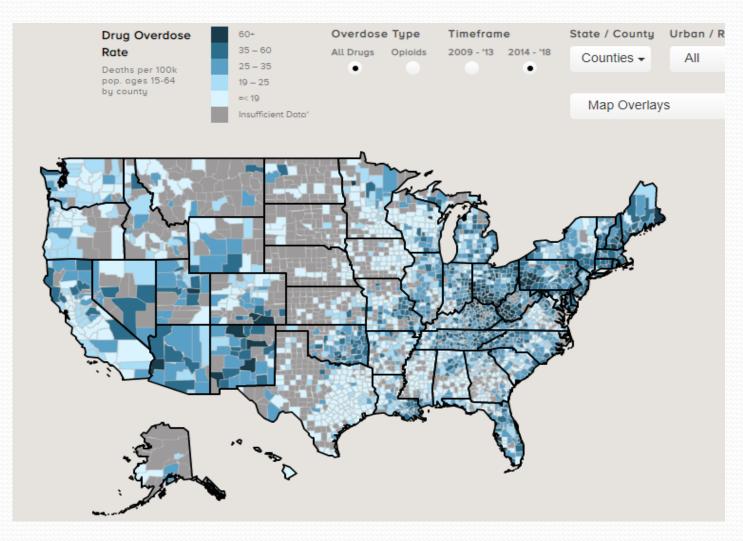
https://www.ruralcommunitytoolbox.org/assets/3664-15201/federal-rural-resource-guide.pdf?v=1

Federal Resources

- Volunteer programs like AmeriCorps
- USDA supports construction of health clinics
- Commerce supports broadband initiatives
- VA, SAMHSA, USDA & others have had telehealth initiatives
- DOT supports rural transit
- HHS has supported rural health integration for children
- Justice has supported development of drug court programs in rural areas
- Tribal programs are supported through Indian Health & other agencies

Drug Overdose in the US

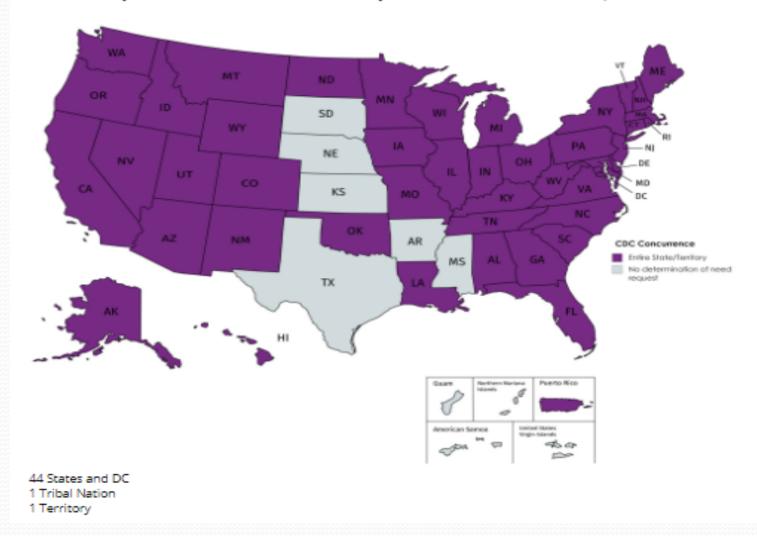
(Interactive Dashboard)



https://opioidmisusetool.norc.org/

Jurisdictions Determined to be Experiencing or At-risk of Significant Increases in Hepatitis Infection or an HIV Outbreak Due to Injection Drug Use Following CDC Consultation

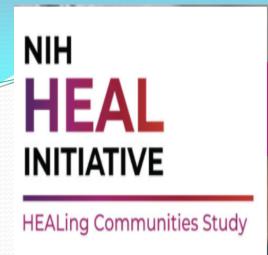
There are currently 44 states and DC, 1 tribal nation, 1 territory and with a determination of need in place.

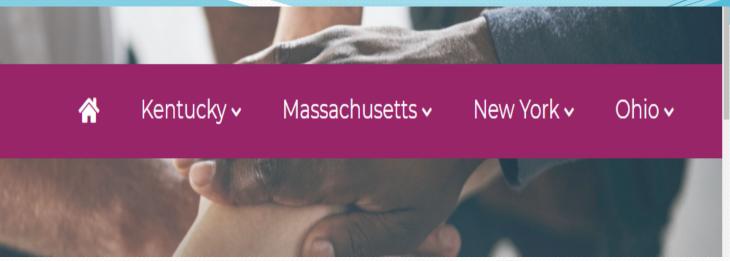




- Multiple research initiatives across NIH including:
 - Research to practice translation
 - Understanding, treating & managing pain
 - Implementation of addiction services in criminal justice settings
 - Implementation of MAT in primary care settings
 - Prevention of opioid misuse among youth

https://heal.nih.gov/about





- NIDA/SAMHSA collaboration
- 30%+ of communities rural
- Specific outcome targets (40% reduction in OD mortality)
- Service planning/implementation through local coalitions, leveraging existing resources/platforms. Elements include:
 - Prevention of opioid use, misuse, OUD, and overdose
 - Screening and assessment of opioid misuse and OUD
 - Linkages and engagement in treatment (medications and behavioral therapies)
 - Ongoing recovery support services.

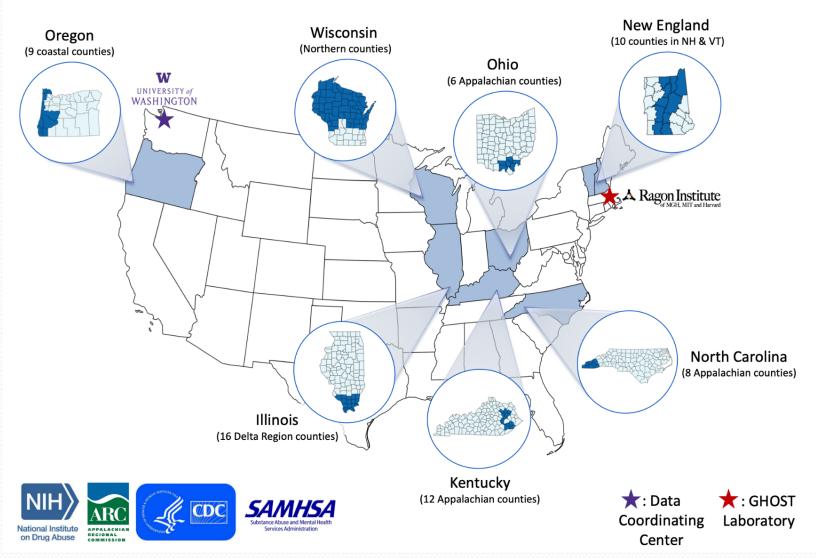
https://healingcommunitiesstudy.org/

Rural Opioid Initiative: Overview

- UG3/UH3 grants: Biphasic awards
 - UG3: Multi-method community assessments---first 2 years
 - Integrating available surveillance data related to opioid use, overdose & infectious disease consequences
 - Qualitative & quantitative data from injectors
 - Qualitative interviews with stakeholders
 - UH3: Propose & test implementation of evidence-based practices to address opioid use & related comorbidities in their communities—next 3 years
 - Projects reflect local concerns and needs
 - 7 UG3 sites have proceeded to the UH3 phase
- U24 Lab:
 - Uses GHOST (next-generation phylogenetic sequencing) technology, works with CDC to identify HCV transmission clusters using
- U24 data Coordinating Center:
 - Coordinating harmonization of cross-site data & analyses

Project Collaborators and Settings

Rural Opioid Initiative (ROI) UH3 Sites



Rural Opioid Initiative

- Projects and papers are underway
- Key issues in program implementation
 - Scarcities
 - Geography
 - Homelessness
 - Stigma MAT, harm reduction, drug users (& anticipated by practitioners)
 - Adapting SSPs to rural environments
- Key observations over the first two years
 - Rapid growth of fentanyl
 - Resurgence of methamphetamine
 - Relaxation of Hep C treatment prerequisites in some locations
 - "Compassion fatigue" among first responders

Other Federal Investments & Initiatives

- Investigator initiated NIH grants
 - Determinants of access & services use (Bup, HCV testing, etc.)
 - Implementing services in rural environments
 - Policy effects on drug use & prescribing
- Centers for AIDS Research supplements
 - Community assessment in rural areas
- CDC RFAs related to HCV, including
 - Integrated Viral Hepatitis Surveillance and Prevention Funding for Health Departments (NOFO PS21-2103)
 - Improving Hepatitis B and C Care Cascades, Focus on Increased Testing and Diagnosis (NOFO PS17-1702)
- CDC 2020-2025 Hepatitis Strategic Plan https://www.cdc.gov/hepatitis/pdfs/DVH-StrategicPlan2020-2025.pdf

What About COVID?



Substance Abuse and Mental Health Services Administration

5600 Fishers Lane • Rockville, MD 20857 www.samhsa.gov • 1-877-SAMHSA-7 (1-877-726-4727)



3/16/2020 (Updated 3/19/2020)

Opioid Treatment Program (OTP) Guidance



U. S. Department of Justice Drug Enforcement Administration 8701 Morrissette Drive Springfield, Virginia 22152

www.dea.gov

DEA Qualifying Practitioners DEA Qualifying Other Practitioners





DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services Center for Consumer Information and Insurance Oversight 200 Independence Avenue SW Washington, DC 20201

Substance Abuse and Mental Health Services Administration 5600 Fishers Lane Rockville, MD 20857

June 29, 2020

Centers for Medicare & Medicaid Services (CMS) and Substance Abuse and Mental Health Services Administration (SAMHSA): Leveraging Existing Health and Disease Management Programs to Provide Mental Health and Substance Use Disorder Resources During the COVID-19 Public Health Emergency (PHE)¹

SAMHSA COVID-related Guidance (Independently & with DEA or CMS)

- States may request blanket exceptions for all stable patients in an OTP to receive 28 days of Take-Home doses of the patient's medication for OUD.
- States may request up to 14 days of Take-Home medication for patients who are less stable but who the OTP believes can safely handle this level of Take-Home medication.
- DEAto prescribe buprenorphine to new and existing patients with OUD via telephone by otherwise authorized practitioners without requiring such practitioners to first conduct an examination of the patient in person or via telemedicine.
- With CMS...further encourage insurers to enable adequate reimbursement of telehealth services (in addition to Medicare & Medicaid).

Other COVID-19 Related Initiatives

- NIH COVID-19 Supplements
 - Rural Opioid Sites: WI, OR
 - Looking at effects of COVID on OUD tx and harm reduction
- NIH RADx-UP Initiative (increasing reach of COVID testing)
 - Rural areas and substance users targeted as vulnerable populations
 - Review is ongoing

Take Homes

- Available federal data suggest:
 - Transition to a polysubstance use epidemic characterized by fentanyl and meth, as well as some cocaine use
 - Stimulants often reflect prior stimulant epidemics
 - Many new resources in the field, with targeting of rural communities
 - Stabilization in some opioid epidemic indicators
 - Some regional variation in opioid epidemic trajectories
 - Treatment utilization remains low
 - SSP coverage continues to increase
 - Potential significant role in naloxone distribution
- Impact of COVID:
 - Changes to OUD treatment prescribing
 - Changes to service implementation being studied
 - Changes to drug markets apparent, but locally & temporally variable

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301-443-1923