



Opioid Response Workgroup – Goal 1 Update

Strategic Prevention Enhancement
Policy (SPE) Consortium

January 13th, 2020

Washington State
Health Care Authority

Strategy 1: Implement strategies to prevent opioid misuse in communities, particularly among youth

1.1.1 – Community Prevention and Wellness Initiative (CPWI)

The 23 CPWI Coalitions funded in part by the SOR and STR grants implement all of the CSAP categories, including: environmental, information dissemination, community-based process, alternatives, and education. The Student Assistance Professionals meet the problem identification and referral CSAP category.

Types of Programs Implemented	Total participants reached
Community-based process	694
Trainings	1,460
Environmental	15
Take Back/Lock Boxes	1,638
Media Strategies	3,085,378
Alternatives	22
Parenting Education	51
Youth Education/Skill Building	212

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1.1.2 – Implement the State Substance Abuse Prevention and Mental Health Promotion Five-Year Strategic Plan

The SPE Consortium completed the Five-Year Strategic Plan “Mini-Update” in November 2019. This strategic plan is a comprehensive planning document for 25 state agencies outlining Washington State’s substance use disorder and mental health needs assessment, resources assessment, and plan for prevention programming.

1.1.4 Provide prevention grants to local health jurisdictions, community-based organizations, coalitions, local education partners and other partners to implement prevention strategies.

The goal of the CBO grants are to provide direct prevention services to high-need communities and in November 2018, nine sites were funded through the SOR grant. These sites are continuing with program implementation of opioid prevention services through 9/29/20.

Types of Programs Implemented	Total participants
Alternatives	74
Youth Education	313
Parenting Education	238
Training	77
Environmental/Media	2,319,314

Strategy 1: Implement strategies to prevent opioid misuse in communities, particularly among youth

1.1.5 – Tribal prevention grants

- Funding distributed to Tribal partners throughout the state to implement opioid prevention activities.
- Funding to 16 tribes (\$346,000) and 2 Urban Indian Health Programs (\$100,000) to meet the unmet needs of previous state opioid tribal requests.
- Development of a Tribal Opioid Epidemic Response Workgroup (\$10,000)
- The Lower Elwha Klallam Tribe utilized the One Tribal Opioid campaign materials to increase community awareness of the dangers of prescription drug misuse during the months of March and June.
- Additionally, secure/safe home storage education was provided at two community events. One event was titled “Community Conversation about Opioids.” Pill pods and lock bags as well as educational materials were provided at both events. A total of 79 people participated in the events.

Strategy 2: Promote use of best opioid prescribing practices among health care providers

1.2.3 – Educate health care providers on the AMDG and CDC opioid prescribing guidelines and new prescribing rules

HCA created two online e-courses around the WA State Opioid Prescribing Guidelines, utilizing the conference information from the 2019 Prescribing Conferences, and the Dental Guidelines for Opioid Prescribing, based on the content and guidelines from the Bree Collaborative. This was geared for both providers and the general community. The goal is to show the general community how they can support prescriber education efforts in their area. Trainings and e-courses are available through the Learning Management System and are available for free to community members and providers.

1.2.4 – Provide technical assistance and coaching to providers and clinics

PMP continues to provide technical assistance and coaching from the PMP helpdesk at DOH as well as in person and webinar presentations to healthcare provider and PMP user groups upon request. Requests for PMP presentations can be made by email to PrescriptionMonitoring@doh.wa.gov

Strategy 2: Promote use of best opioid prescribing practices among health care providers

1.2.5 – Enhance healthcare education curricula

WSU has a \$1.9 million HRSA grant underway to roll out pain/PMP/OPUD training over the next 5 years across 40 clinics and hundreds of health professional students in WA.

The College of Nursing received a \$2.7 million HRSA to assist training nurse practitioner students and they will be creating free continuing education on substance use, including opioid use.

WSU is leading a group of complementary pain practitioners in a smaller project to work on inviting people on opioids to try non-pharmacological pain management option.

1.2.6 – Explore innovative methods to deliver evidence-based alternatives

L&I expanded coverage for non-opioid pharmacologic alternatives (effective January 1, 2019) as well as acupuncture for chronic low back pain (June 1, 2019).

HCA is working to identify non-pharmacologic alternatives for possible Medicaid policy implementation as part of a legislative report related to SSB 5380.

Strategy 3: Increase use of PMP to encourage safe prescribing practices

1.3.1 – Increase use of PMP among health care providers

Over 30 Healthcare Organizations (HCO) have integrated the PMP transaction to their Electronic Health Records (EHR) systems via Washington's Health Information Exchange (HIE). Through vendor supported sharing programs the integrated PMP functionality is available in around 1000 healthcare outlets throughout the state and is servicing over 3 million PMP queries each month.

1.3.2 – Share data with providers on their prescribing practice

PMP has joined the Better Prescribing, Better Treatment (BPBT) collaborative with WSHA, WSMA, and HCA. The collaborative has been actively working on metrics for a revamped prescriber feedback report that the collaborative will start sending out in early 2020. The quarterly report will go out to all prescribers and will contain a combination of BREE and non-BREE metrics.

Strategy 4: Educate the public about risks of opioid use, including overdose

1.4.1 – Educate patients about best practices for managing acute pain

The Region 10 (Washington, Alaska, Idaho, and Oregon) Opioid Summit was held in August 2019 with a focus on prevention, intervention, treatment, and recovery. We had a special focus on Tribal Communities and Pregnant and Parenting Individuals. Year 3 planning is underway, to be held in Oregon August 10-13.

1.4.2 - Implement targeted and culturally appropriate public education campaigns

In year three of *Starts with One*, Washingtonians will be encouraged and empowered to play an active role in keeping their community and state safe. The latest arm of the *Starts with One* campaign will rely on digital and broadcast advertisements, earned media efforts and social media to model actions that the target audiences can take to prevent opioid misuse in their own communities. A Spanish version of the website is also being developed to maximize reach of the campaign within Washington.

Strategy 5: Promote safe home storage and appropriate disposal of prescription pain medication to prevent misuse

1.5.1 – Educate patients and public on safe storage and disposal

Starts with One Take Back Day campaign from this past year:

- Number of people reached: 812,697
- Supplied 2,304 marketing pieces to support coalition for National Take Back Your Medication Day (October 26th)
- Promoted National Take Back Your Medication Day via: social media, coalitions, InsideHCA, HCA website, SmartHealth

1.5.3 – Fund community-based organizations and coalitions to promote safe storage and disposal

13 community-based organizations in high-need communities are required to implement direct service program(s) aimed at prevention opioid misuse, the statewide Starts with One opioid prevention campaign, the National Prescription Drug Take-Back Days in April and October of each year, contributing to the state's secure medicine return policies.

Strategy 6: Decrease supply of illegal opioids

- **1.6.1 Begin engaging stakeholders to discuss potential new policies to eliminate paper prescriptions**

Federal (SUPPORT Act) and state (SSB 5380) law require electronic transmission of controlled substance prescriptions by January 1, 2021. Filed the 101 with the code reviser's office week of 1/6/20.

- **1.6.2 Develop criteria for when opioid distributors should report suspicious orders to Pharmacy Quality Assurance Commission (PQAC).**

Medicaid Fraud Control Unit (MFCU) has the authority to investigate fraud cases through final CMS rule changes effective May 21, 2019. MFCU is working with law enforcement on suspicious cases.

Workgroup Updates:

- Workgroup brainstormed what we want to accomplish in 2020:
 - Meeting and organizational style
 - Workgroup logistics
 - 2020 goals and how to track progress
- In an effort to reduce stigma, we have decided to move away from using the word “abuse” in the name of our workgroup. A decision will be made during our March meeting

Conferences/Trainings/Summits 2020:

- Washington Mental Health and Opioid Summit- Jan 22 & 23rd
- Compassionate Care for Women, Infants, Families and Communities Impacted by Substance Use Disorders- Jan 24th & 25th
- North Sound Tribal Behavioral Health Conference April 3rd & 4th
- Rx Drug Abuse Summit (National Conference) April 13th -16th
- Children's Justice Conference- May 13th
- Region 10 Opioid Summit – Date TBD

State & Community Partners

- Department of Health
- Washington Poison Center
- Labor and Industries
- Office of Superintendent of Public Instruction
- Department of Children, Youth, and Family
- Attorney Generals Office
- Pharmacy Quality Assurance Commission
- Washington State University
- University of Washington
- WashPIP
- Comagin Health
- Bellegrove Pharmacy

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