State Opioid Response (SOR) & Medications for Opioid Use Disorder (MOUD)

Div of Behavioral Health, Bureau of Services, Planning and Performance: Prevention, Treatment, and Recovery





Introduction & Disclosure

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Prevention, Treatment and Recovery

- Iowa HHS protects and improves the health of Iowans to mitigate the risks and harms associated with substance use and gambling by:
 - Supporting policy and regulating treatment programs.
 - Reducing substance use and gambling problems through public education, evidence-based prevention, and early intervention services.
 - Increasing remission and recovery from substance use disorders and problem gambling through timely, accessible, ongoing, and effective treatment services.
 - Assuring a resiliency- and recovery-oriented system of care statewide through local contractors who specialize in substance use and problem gambling services.
- Iowa HHS licenses, monitors, and regulates approximately 100 substance use disorder and problem gambling treatment programs across the state



Iowa Behavioral Health Service System

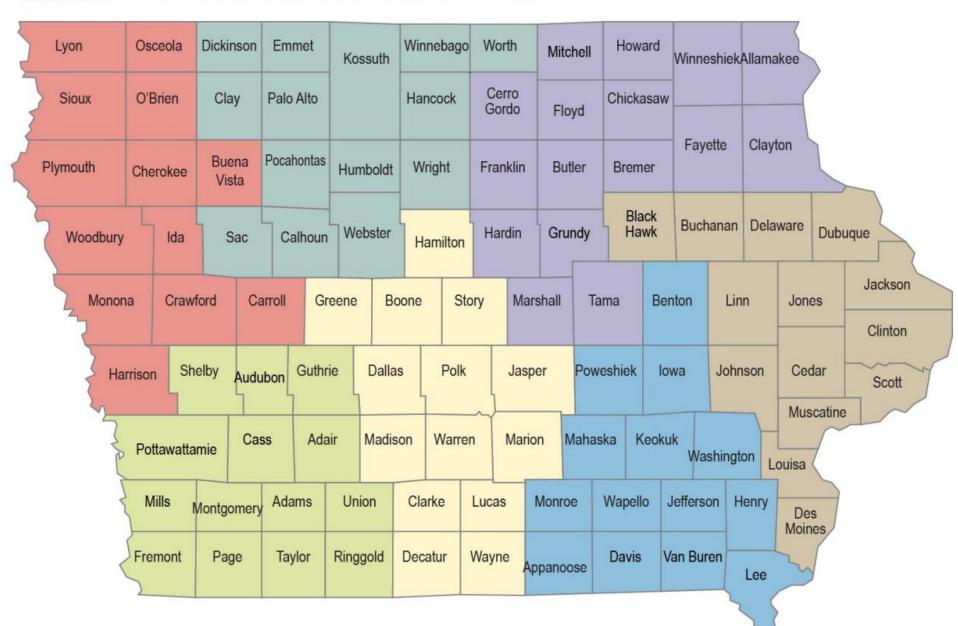
https://hhs.iowa.gov/initiatives/systemalignment/ibhss







Behavioral Health Districts

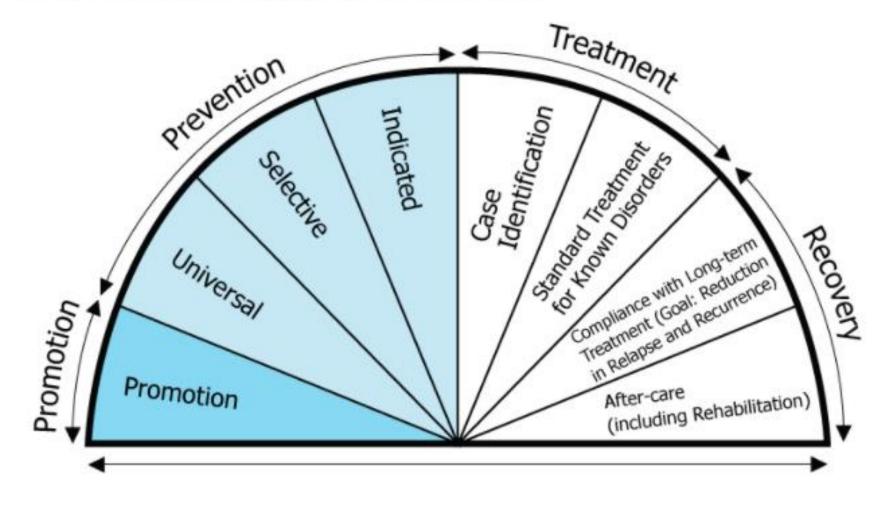


State Opioid Response

- SAMHSA funded since 2017 with overall increased funding: next award \$8.9 million annually for 3 years
- ▶ Discretionary grant (not guaranteed to continue) requires application but is noncompetitive formula-funded
- ► Focus only on effects of opioids and stimulants across the continuum of care



Behavioral Health Continuum of Care Model



* Risk mitigation and infection prevention efforts are useful across the continuum



Prevention

Focus on reducing overdose deaths



Prevention Approach

Local level prevention approx. 19 FTEs statewide
 Providing informational presentations on opioids, stimulants, naloxone and overdose reversal, medications for opioid use disorder, etc.
 Now able to distribute naloxone for free

- Working across the Division of Behavioral Health to collaborate and align prevention activities for behavioral health (mental health, substance use, gambling)
- Using research-based strategies and best practices
- Data collection and community needs assessments updated
- Sustainability of efforts through sustainability of funding



Overdose Education and Naloxone Distribution

- Naloxone is
 - FDA approved for opioid overdose reversal (now OTC)
 - Easy to use
 - Safe for most people
 - Available for free

- Over 800 school locations now stocked
- Available to all law enforcement and fire departments
- Distribution at approved community service providers



Treatment: Medications for Opioid Use Disorder (MOUD)

Also known as Medications for Addiction Treatment (MAT) which can include meds for alcohol or tobacco as well



FDA-approved MOUD medications:

Medication for
Opioid Use
Disorder (MOUD)
is the use of
medication to help
treat addiction.
Specific to opioids:

- Opioid Agonist (Methadone)
- Opioid Partial Agonist (Buprenorphine, Suboxone)
- Opioid Antagonist (Naltrexone, Vivitrol)



Methadone

Methadone is a long-acting opioid that works by changing how the brain and nervous system respond to pain.

- It lessens the painful symptoms of opioid withdrawal
- It blocks the euphoric effects of opioid drugs whether illicit or prescription, such as heroin, morphine, codeine, oxycodone and hydrocodone
- Offered in pill, liquid, and wafer forms, taken once a day.
- By law, methadone for OUD treatment can only be dispensed through an opioid treatment program (OTP) certified by the DEA and SAMHSA.



Buprenorphine (aka. Suboxone, Sublocade)

Buprenorphine was approved for clinical use by the Food and Drug Administration (FDA) in October of 2002.

- Daily sublingual films are most common, but also comes in tablets, or monthly injectable.
- Qualified U.S. prescribers can offer buprenorphine for opioid use disorder from various settings as a prescription (Health care clinic or doctor's office, community hospital, health center, or correctional facilities)
- Buprenorphine can also be dispensed directly at OTPs that offer methadone, if the patient and prescriber decide it is the best treatment option for the patient.



Naltrexone (aka. Vivitrol)

Naltrexone is approved by the Food and Drug Administration (FDA) to treat both opioid and alcohol use disorders.

- While it comes in a pill form as well, only the injectable extendedrelease form (lasts 28 days) of the drug (Vivitrol) is FDA approved for treatment of OUD.
- Naltrexone blocks the euphoric and sedative effects of drugs such as heroin, morphine, and codeine. It works differently in the body than buprenorphine and methadone, which activate opioid receptors in the body that suppress cravings. Naltrexone binds and blocks opioid receptors and is reported to also reduce cravings. There is no misuse or diversion potential with naltrexone.
- Naltrexone can be prescribed by any health care provider who is licensed to prescribe medications.
- To reduce the risk of precipitated withdrawal, patients are warned to abstain from illegal opioids and opioid medication for a minimum of 7-10 days before starting naltrexone. If switching from methadone to naltrexone, the patient has to be completely withdrawn from all opioids.



The Efficacy of MOUD

MOUD has proved to be clinically effective and to significantly reduce the need for inpatient detoxification services for these individuals.

MOUD provides a more comprehensive, individually tailored program of medication and behavioral therapy. MOUD also includes support services that address the needs of most patients.

Research also shows that MOUD and other harm reduction strategies contributes to lower risk of contracting HIV or hepatitis C.

It is highly under-utilized due to:

Lack of adequate training in it's use

Stigma/discrimination against patients who use MOUD, despite state and federal laws clearly prohibiting it.

Unfamiliarity with recent changes and negative opinions toward MOUD in communities and among health care professionals.



Treatment for Stimulants

- No FDA-approved MAT options, research is on-going
- Contingency Management is the strategy with a strong research base for effectiveness, but implementation barriers are significant
- Overdose also a risk, due to contamination with fentanyl



SOR Treatment Access

- Through IPN-funded providers
- Partnership with the Dept of Corrections



Growing Recovery

Building Iowa's recovery supports beyond clinical treatment services



Approach

- Building a strategic plan for recovery in Iowa
- Working across the Division of Behavioral Health to collaborate and align recovery activities for behavioral health (mental health, substance use, gambling)
- Recovery is the expectation rather than the exception
- People with lived experience building recovery as a part of team Iowa HHS
- Data collection and informed decision making
- Workforce development and enhancement

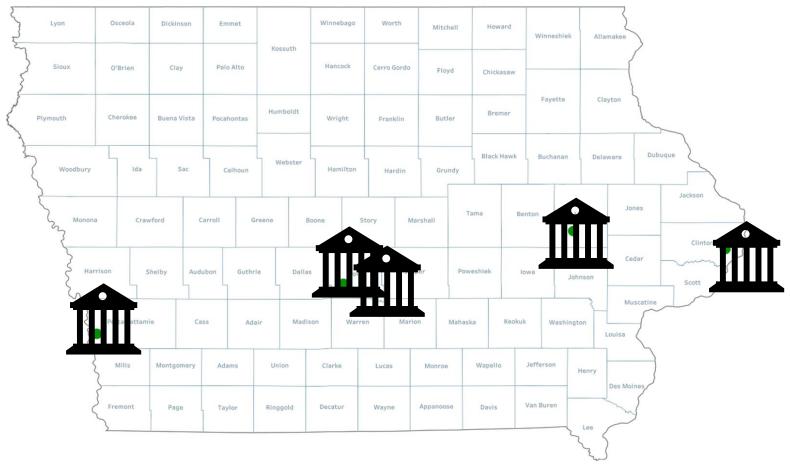


Current Initiatives

- Access to Recovery (ATR) offering recovery support services to help people navigate and access recovery and increasing the number of provider organizations providing services
- Iowa Peer Workforce Collaborative This project provides training for Peer Support Specialists, Family Peer Support Specialists, and Peer Recovery Coaches to grow the workforce and organizations that employ peers
- Recovery Support Services build into every appropriate discretionary grant
- Recovery Housing create a system that establishes a certification process ensuring access to available federal funding
- Recovery Community Centers
- Linkage to Outreach, Referral, & Engagement (LORE)
- Recovery Conferences



Did you know there are 5 Recovery Community Centers in Iowa?

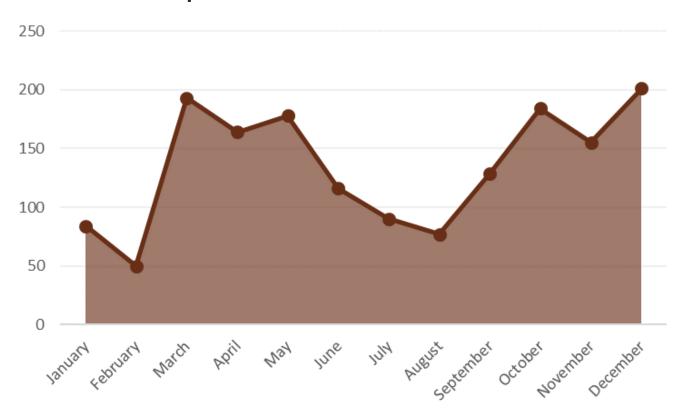




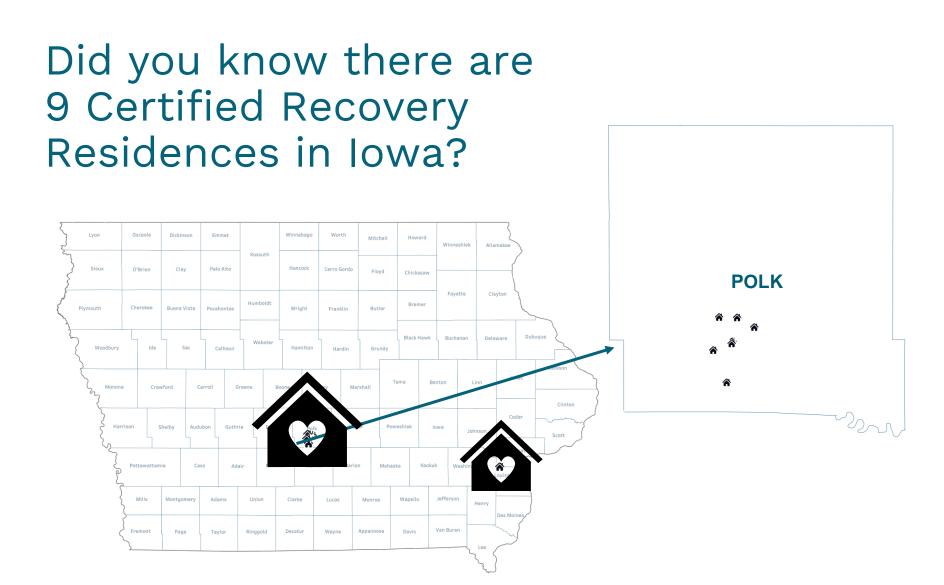
In 2023, there were
26,636 in-person visits
to lowa's Recovery
Community Centers and RCC
staff &volunteers made
1,084 community referrals..

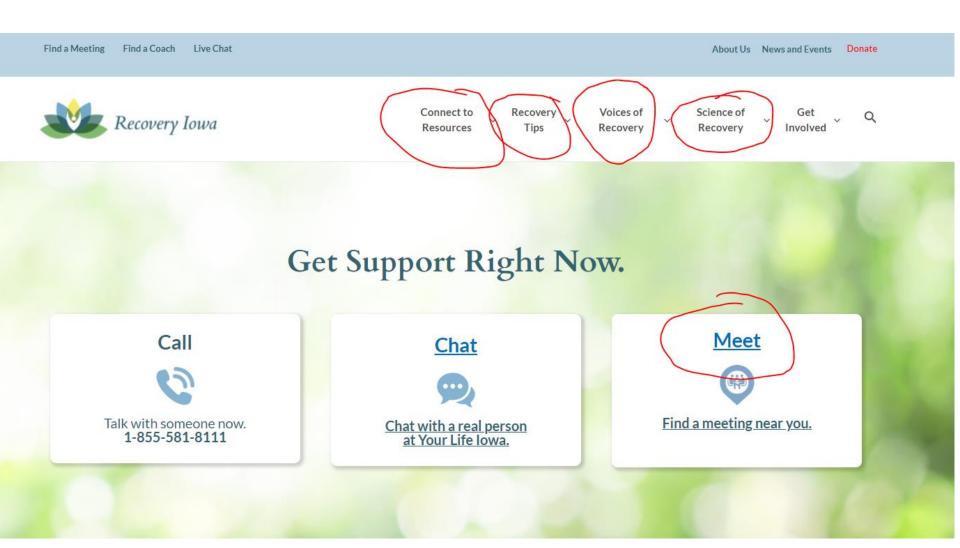


In 2023, a total of **1,621 recovery support calls** were made from Iowa's Recovery Community Centers with an average of 135 calls per month.



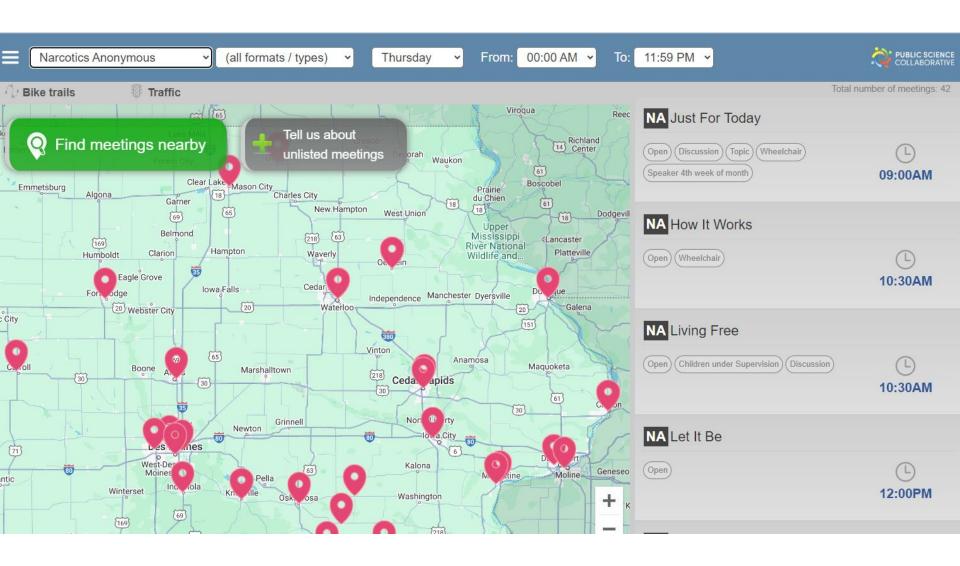






www.recovery-iowa.org







Other Opioid/Stimulant Resources also available

National and Regional funded efforts

- Opioid Response Network (ORN): free technical assistance to all
- Addiction Technology Transfer Centers
- Rural Opioid Technical Assistance-Regional Center
- Providers' Clinical Support System

Local and County

- Opioid Settlement funded priorities
- Iowa Economic Development funds
- Iowa Finance Authority funds
- Iowa Healthcare Collaborative RCORP

