Arizona Opioid Planning Summit

A Look at the Data & ADHS Actions

April 16, 2019

Cara Christ, MD, MS Director Arizona Department of Health Services



Emergency Declaration

Governor Ducey Declares Statewide Health Emergency In Opioid Epidemic

News Release

June 5, 2017 🛛 🖪 🎔 Ġ + 🛅 🖨

As the number of opioid overdoses and deaths increase at an alarming rate, we must take action."

declaration to address the growir

In New Front Against Opioid PHOENIX - Governor Doug Di Epidemic, Formal Statewide **Health Emergency Declaration Comes To A Close; Fight Against Crisis Just Beginning**

News Release

May 29, 2018 🛛 🖬 🕊 G+ 🕅 🚔

Governor Ducey: "This fight is far from over, and we aren't going to let up"

PHOENIX — With the Opioid Action Plan now enshrined in state law, Governor Doug Ducey today ended the formal emergency public health declaration he issued last year and declared that Arizona's commitment to addressing the opioid epidemic remains unwavering.

DECLARATION OF EMERGENCY and NOTIFICATION OF ENHANCED SURVEILLANCE ADVISORY *Opioid Overdose Epidemic*

WHEREAS, the Arizona Department of Health Services has confirmed 790 deaths due to opioids in Arizona in 2016, which equates to an average of more than two Arizonans per day; and

WHEREAS, the Arizona Department of Health Services has confirmed that the number of opioid deaths has increased 74% from 2012-2016, with 2016 showing Arizona's highest number of deaths; and

WHEREAS, opioids are powerful pain killers that are highly addictive; and

WHEREAS, of the 1,497 drug overdose deaths in 2016, 52.7% noted opioids as a primary cause of death; and

WHEREAS, these deaths as a result of overdose are preventable; and

WHEREAS, the opioid overdose epidemic affects all Arizonans; and

WHEREAS, in Arizona, law enforcement and first responders have the authority to carry and administer the life saving drug Naloxone; and

WHEREAS, the Arizona Department of Health Services requires more robust and more accurate data to successfully combat the opioid overdose epidemic; and

> Director of the Arizona Department of Health Services have illness, and health conditions, including death, are being caused

riate to take action to ensure that the residents of Arizona remain

I to declare an emergency pursuant to A.R.S. § 26-303(D).

Ducey, Governor of the State of Arizona, by virtue of the ion and Laws of the State, do hereby determine that the opioid stifies a declaration of a State of Emergency and issuance of an uant to A.R.S. §§ 26-303(D), 36-782, and 36-787, and I do

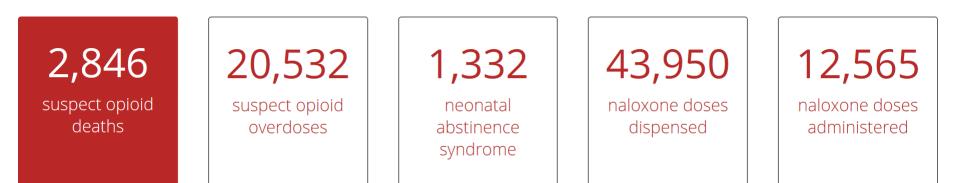
ncy exists in Arizona due to the Opioid Overdose Epidemic,

Emergency Response and Recovery Plan be used to direct and and authorize the Director of the Arizona Department of to coordinate State assets: and

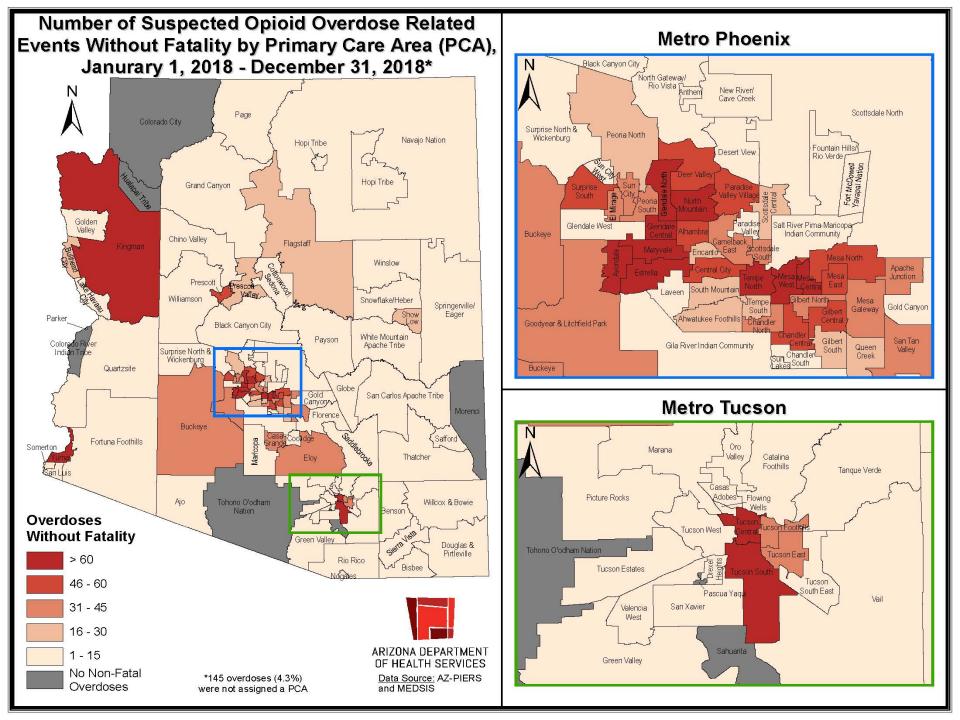
izona Department of Health Services to coordinate all matters hergency response of the State in accordance with A.R.S. § 36-

Opioid Surveillance

June 15, 2017- April 11, 2019

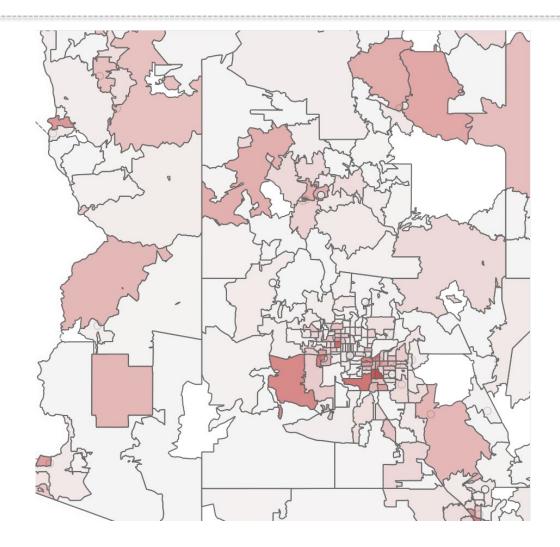


Updates posted at www.azhealth.gov/opioid



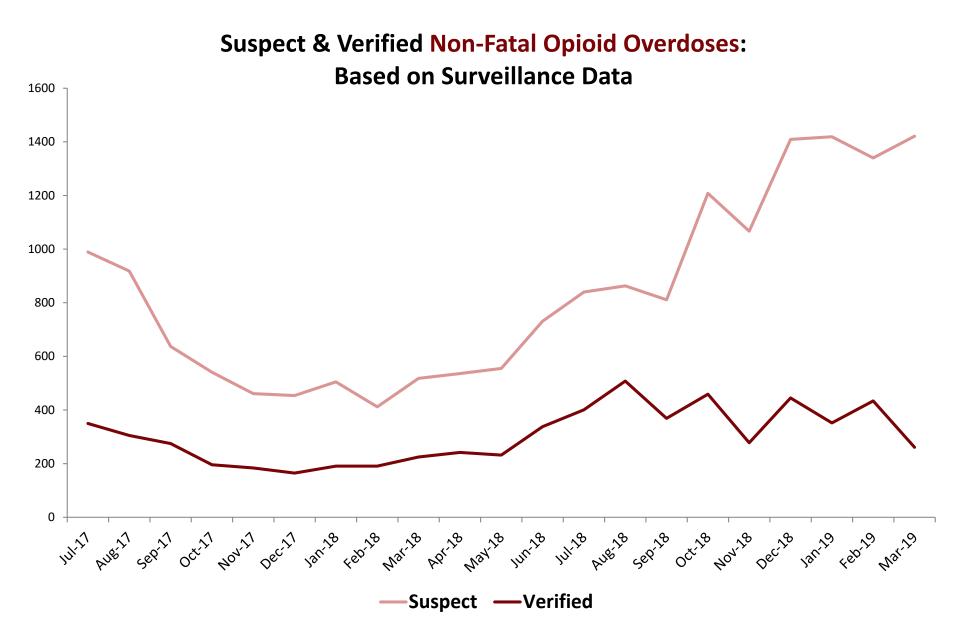
Opioid Surveillance

Interactive Dashboard includes Map by Zip Code of Reported **Suspect Overdoses**

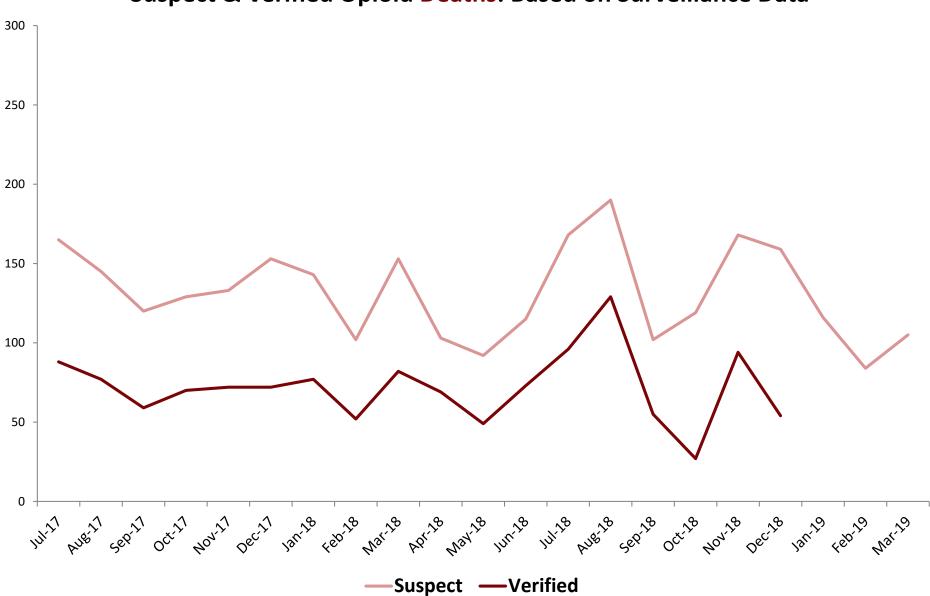


Updates posted at <u>www.azhealth.gov/opioid</u>



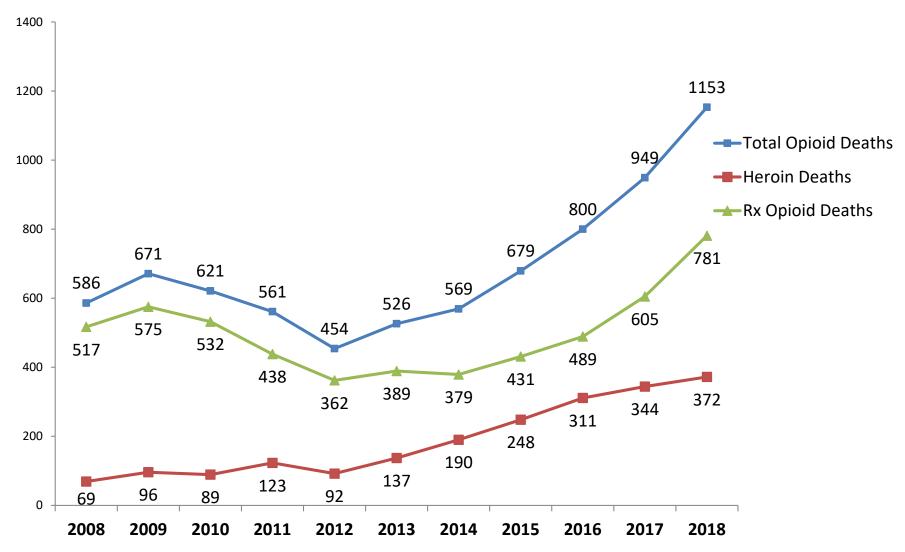






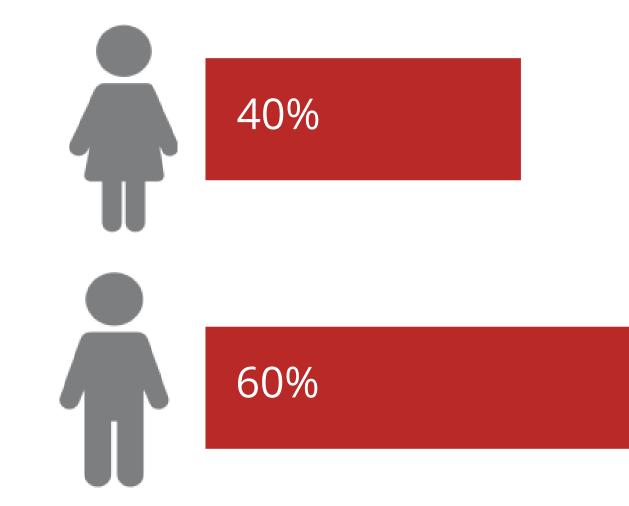
Suspect & Verified Opioid Deaths: Based on Surveillance Data

Opioid Induced Deaths, Arizona 2008-2018

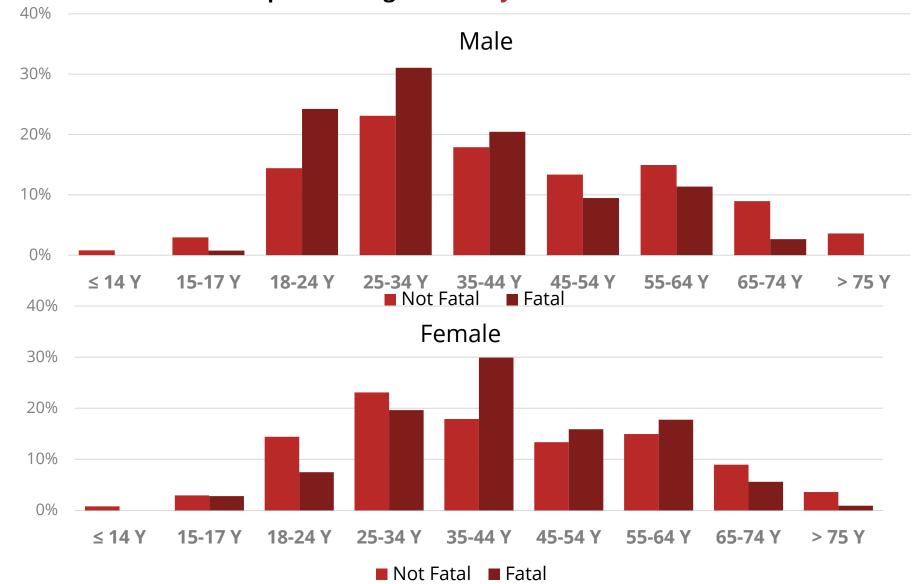


Note: 2018 data is preliminary data from Vital Records

The majority of possible opioid overdoses reported since the enhanced surveillance began were male.

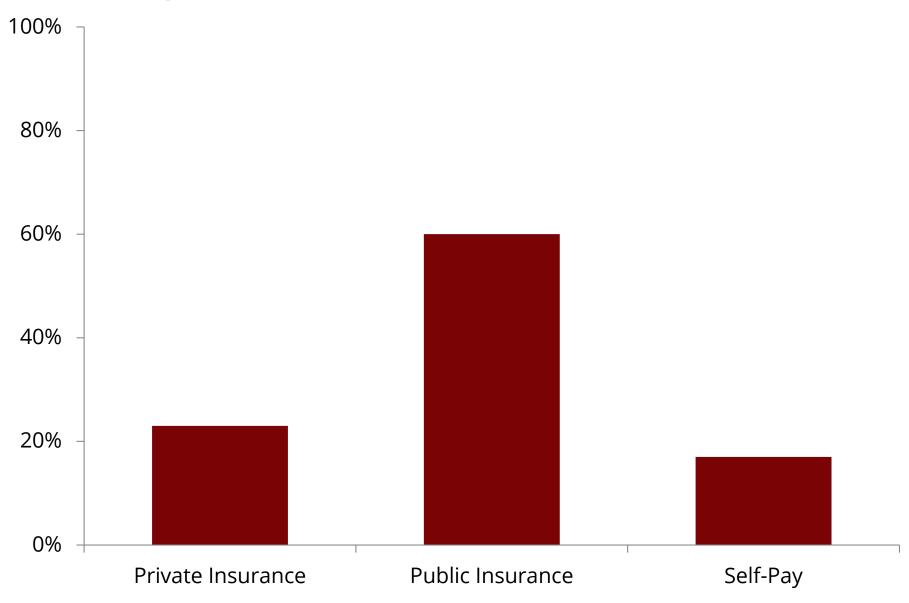


For verified cases that occurred between October 1, 2018 & April 4, 2019, in males, the most fatal & non-fatal overdoses were reported in ages 25 – 34 years old. In females, the most fatal overdoses were reported in ages 35 – 44 years old & non-fatal overdoses were reported in ages 25 – 34 years old & non-fatal overdoses were reported in ages 25 – 34 years old

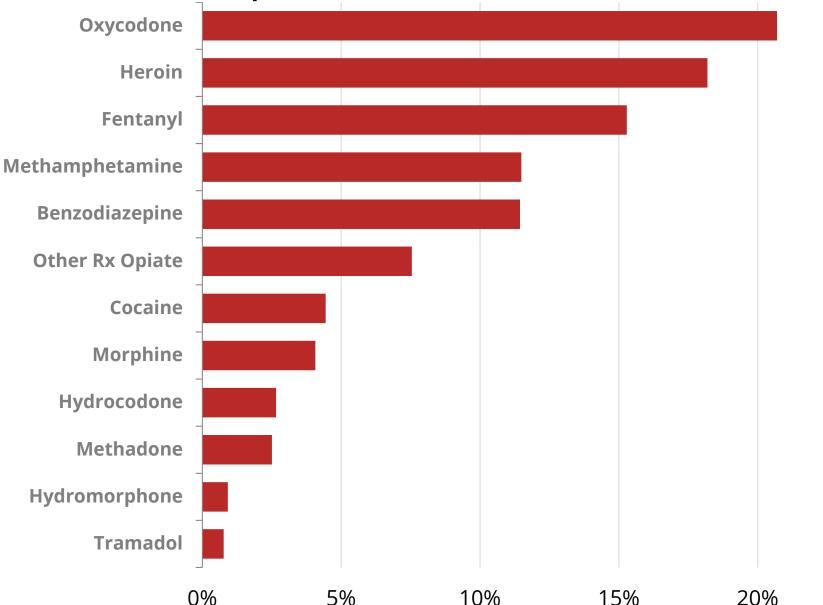




Of the people who overdosed between June 15, 2017 and April 4,2019 60% had public insurance (unknown insurance status excluded)



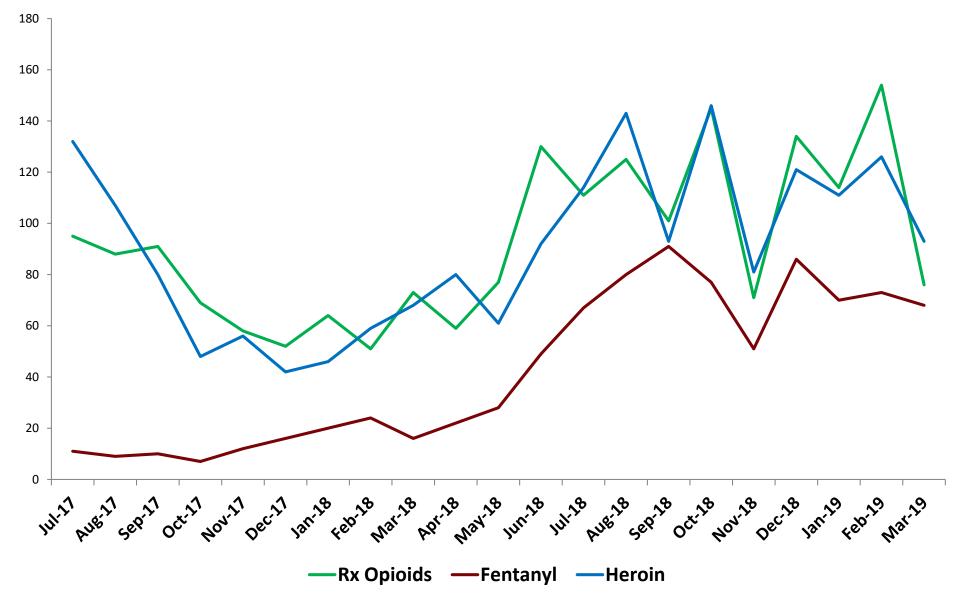
Oxycodone and heroin were the opiate drugs most commonly noted in overdoses determined to be due to opioids during review, October 1, 2018 - April 4, 2019



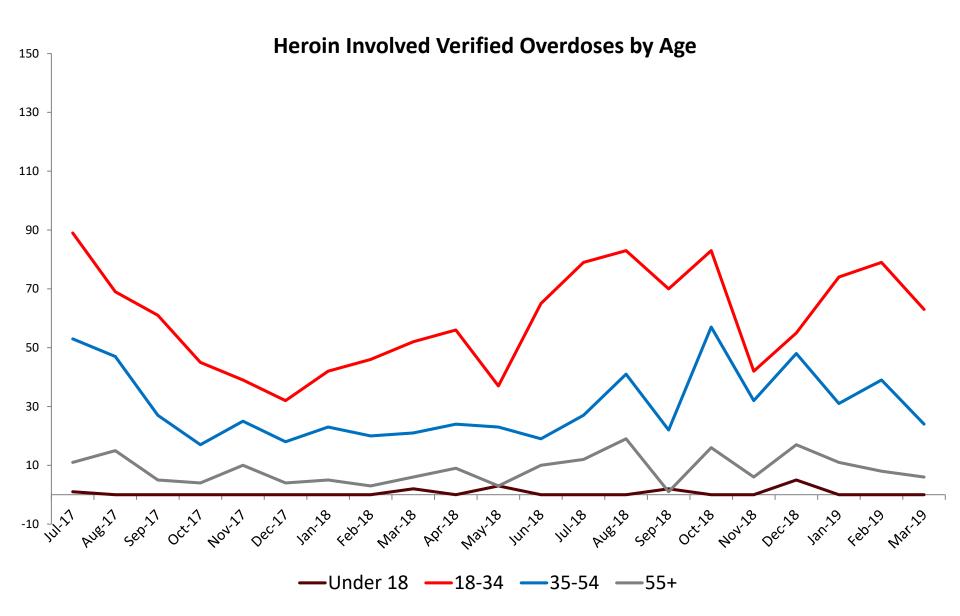
25%

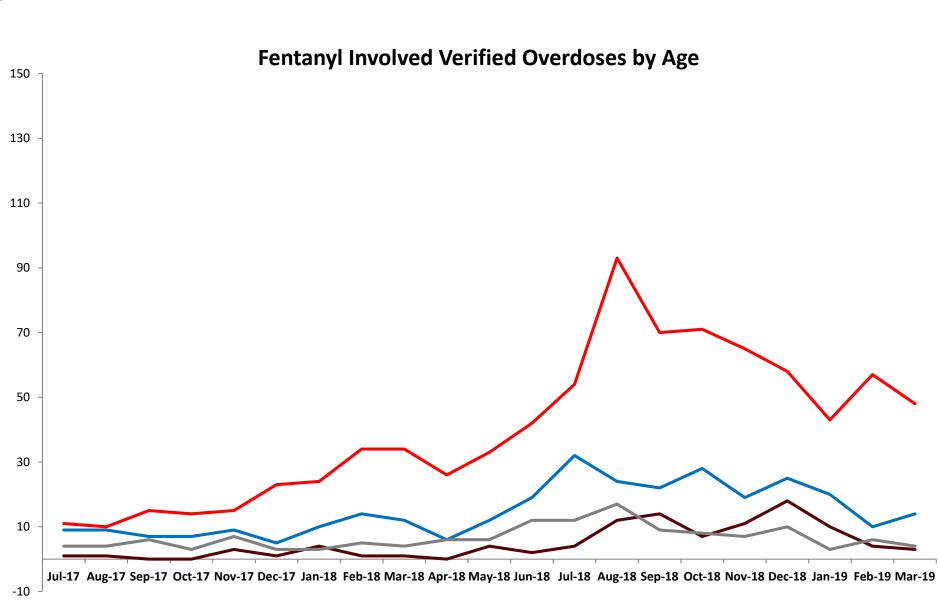


Verified Opioid Overdoses by Opioid Type





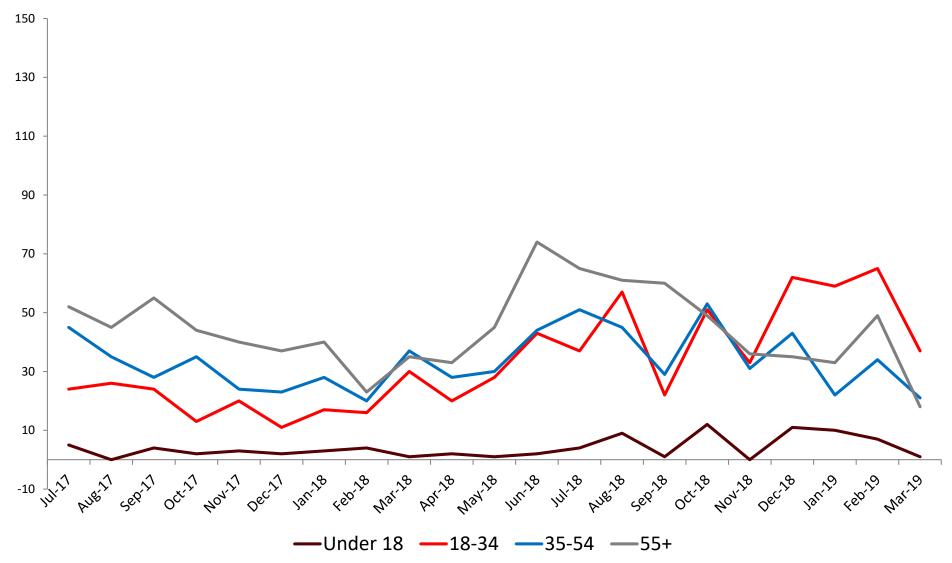




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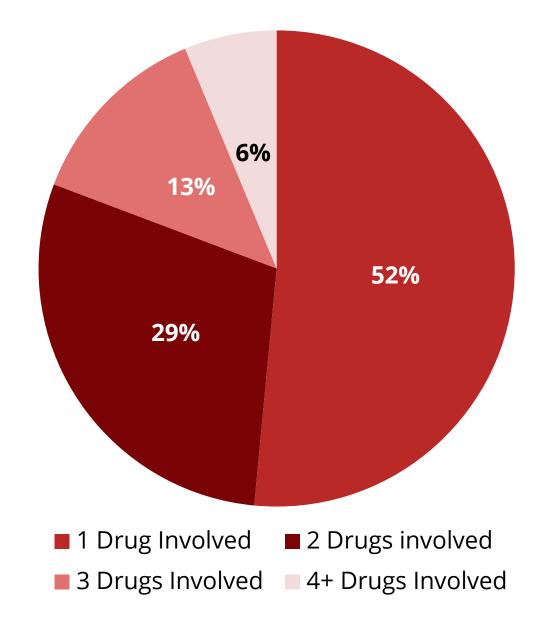




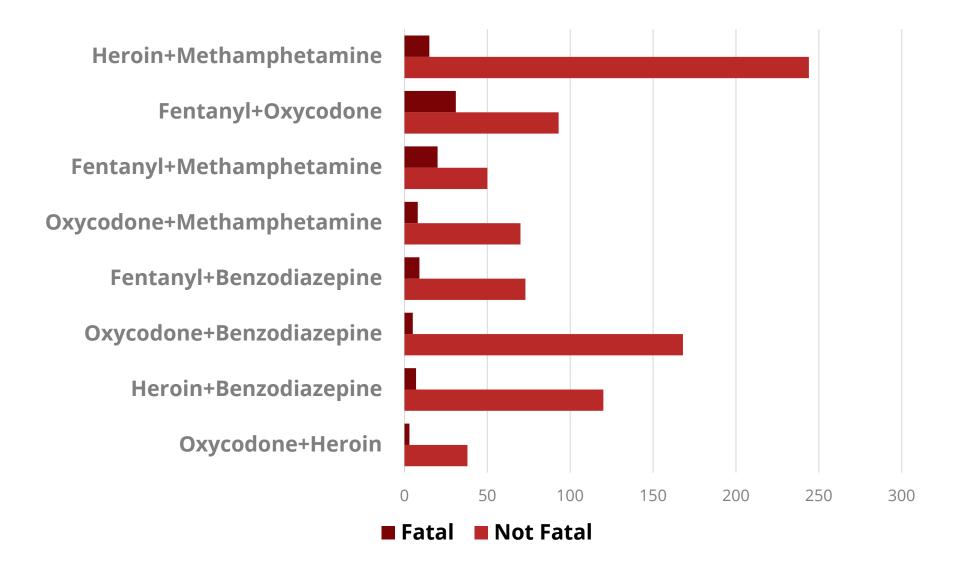


Prescription Opioid Involved Verified Overdoses by Age

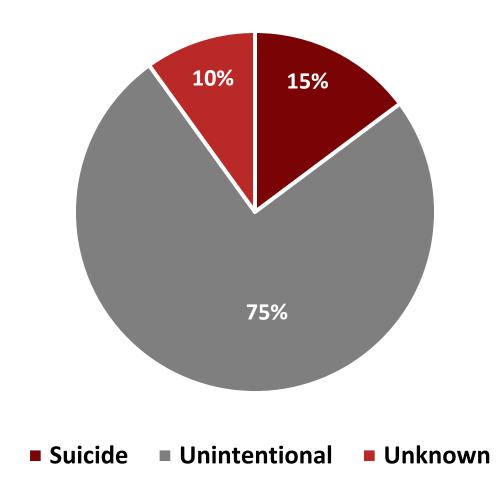
From October 1, 2018 - April 4, 2019, more than half of verified overdoses cases had only one substance identified as involved in the overdose.



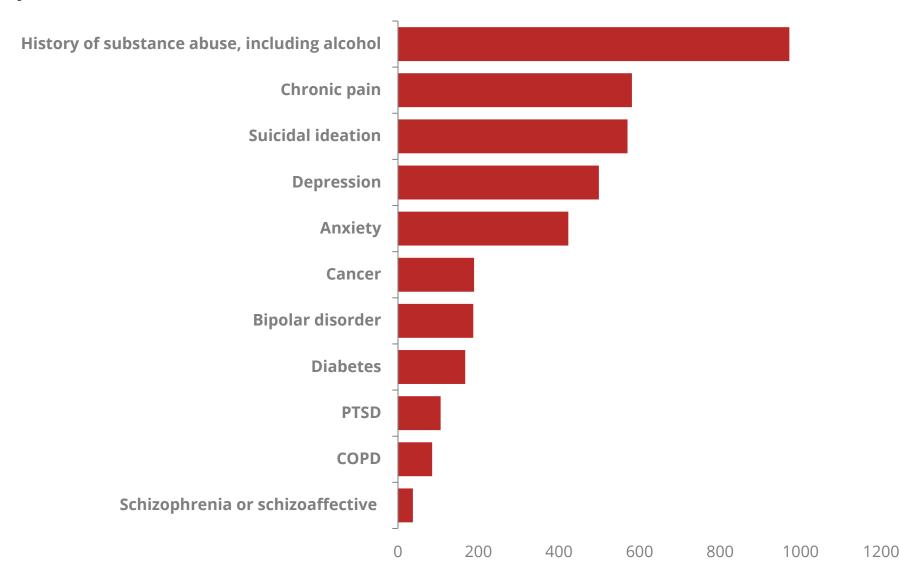
On review, the most common drug combination in fatal & non-fatal overdoses was heroin & methamphetamine, 10/1/2018 – 4/4/2019



75% of the overdoses were determined to be unintentional upon review, 6/15/2017 – 4/4/2019

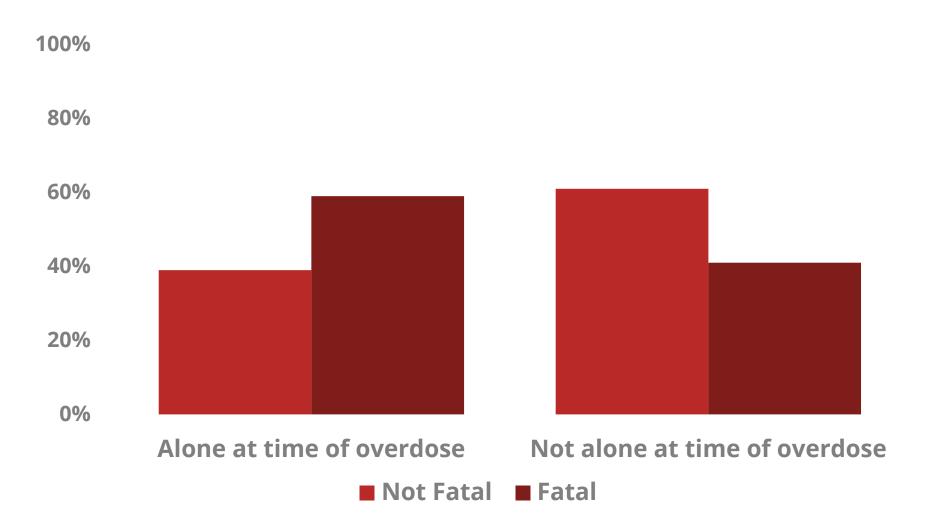


History of substance abuse, including alcohol and chronic pain were the two most common pre-existing condition for overdoses determined to be due to opioids during review for cases that occurred from October 1, 2018-April 4, 2019.



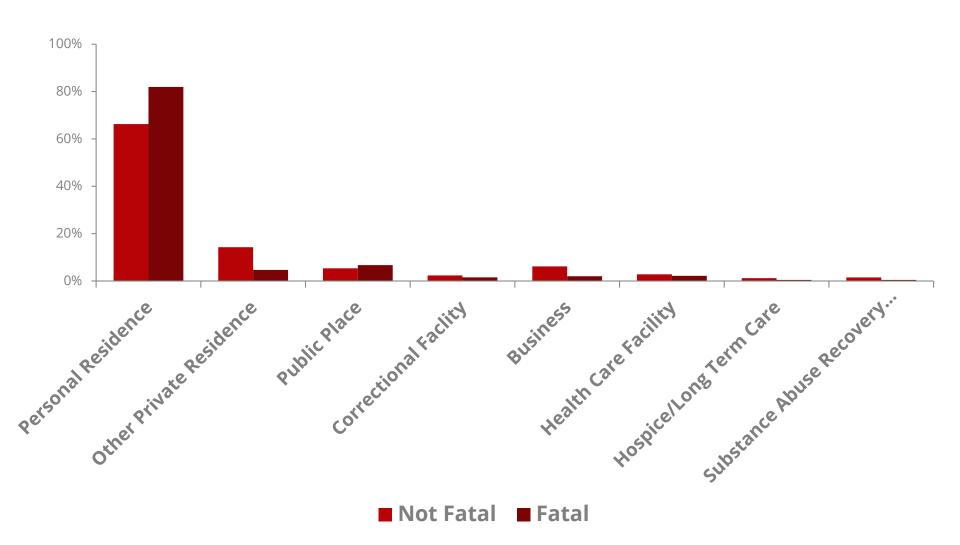


More people who were alone at the time of an overdose had a fatal overdose, 6/15/2017 – 4/4/2019

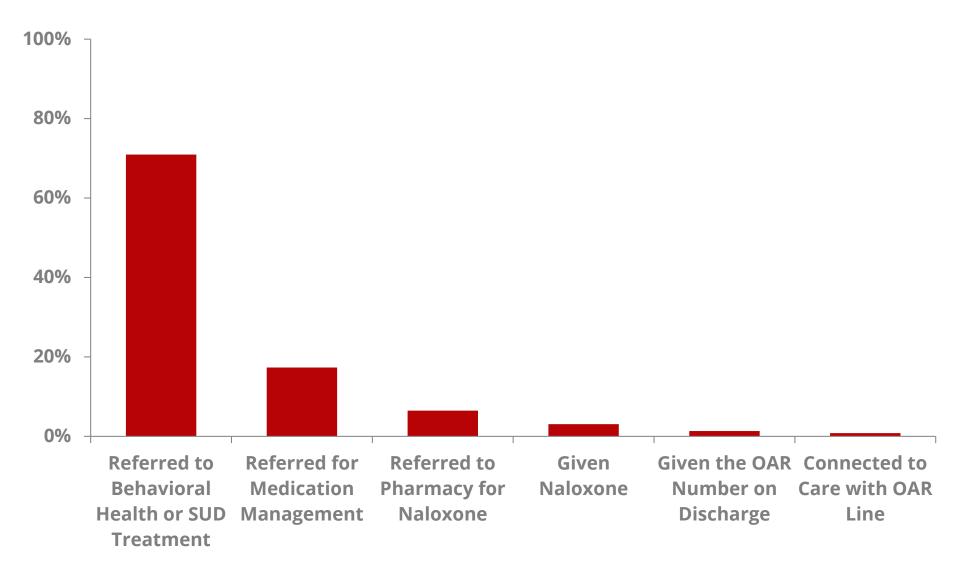


The majority of people who overdosed did so in their personal residence, 6/15/2017 – 4/4/2019

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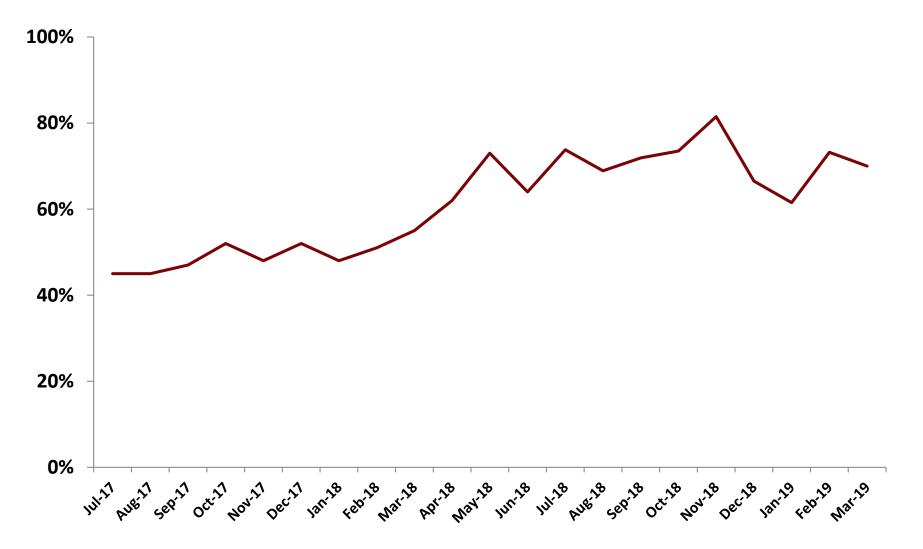


For those that survived an overdose, hospital discharge recommendations & referrals varied, 6/15/2017 – 4/4/2019



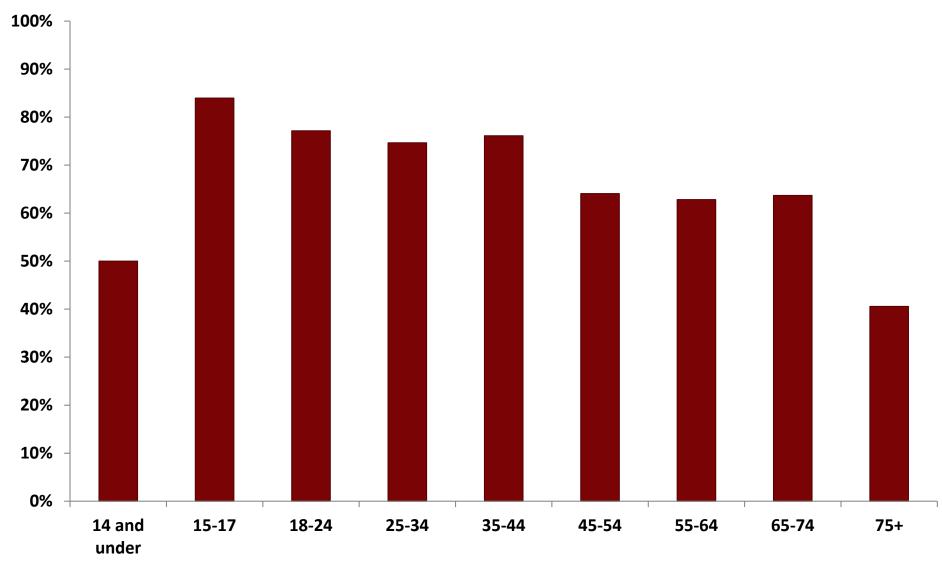


Referrals by Hospitals to Behavioral Health or Substance Use Disorder Treatment for Patients with Verified Overdose was highest in November 2018 at 82%

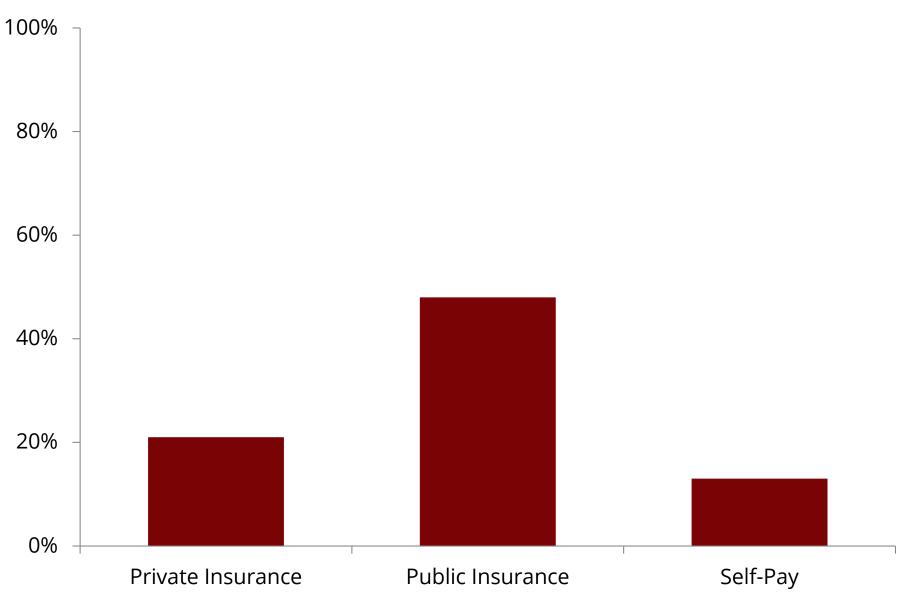




Referrals by Hospitals to Behavioral Health/SUD Treatment by Age, 6/15/2017 - 4/4/2019



People with **public insurance** were more likely to be referred to behavioral health or substance use disorder treatment, 6/15/2017-4/4/2019



Treatment Capacity Survey

- Under the Arizona Opioid Epidemic Act of 2018, each facility that provides inpatient or outpatient substance use disorder treatment (SUDT) is required to submit a quarterly ADHS
- The first survey was sent out in August 2018
- The estimated response rate for the surveys has been:
 - Quarter Ending September 2018: 31.8%
 - Quarter Ending December 2018: 26%

Treatment Capacity Survey Results

September 2018

- Less than 25% of facilities accept patients under 18 years of age.
- In the three months prior to the survey, 3,148 people presented for care, but were unable to receive services. Most of these individuals (68%) were seeking services in Tucson.
- 40% of respondents offered any type of medication assisted treatment (MAT) with Suboxone the most commonly offered (53%).

December 2018

- Facilities reported having 4,727 inpatient treatment beds, 90% were occupied, and 52,416 outpatient treatment places, 99% occupied.
- Respondents indicated that they had a total of 307 MAT providers, a 127% increase from previous quarter.
- Respondents indicated that there were 138 people interested in becoming waivered MAT providers, a 44% increase over previous quarter.
- 33% offer peer support services.

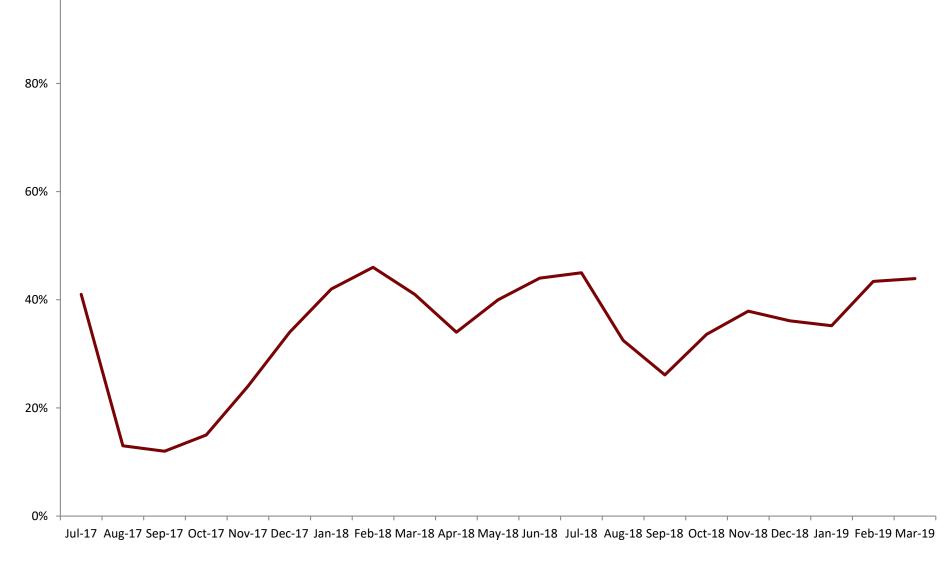
Monitoring Indicators of Progress



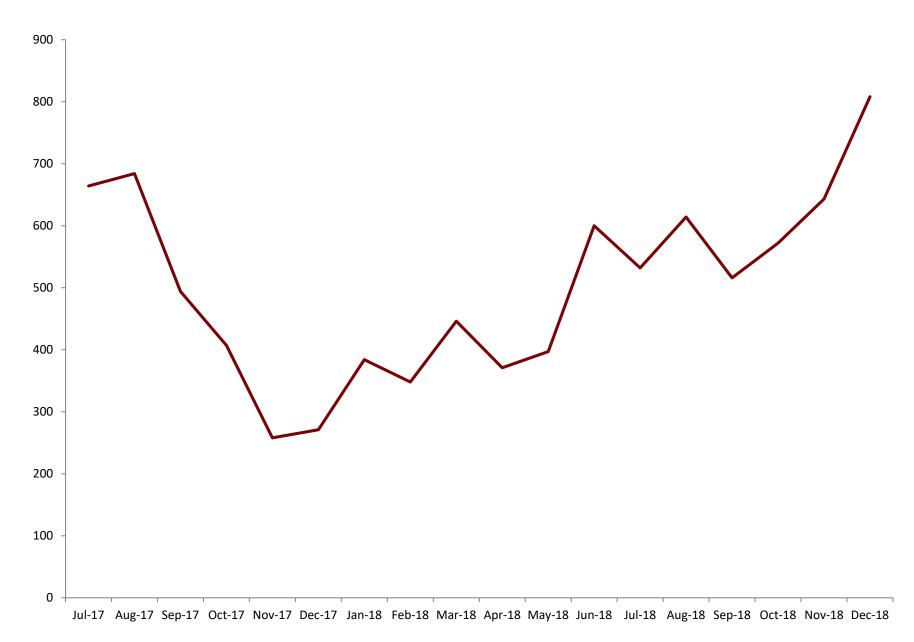


Percent of Suspect Opioid Overdoses who had Prescriptions from 10 or More Prescribers

100%



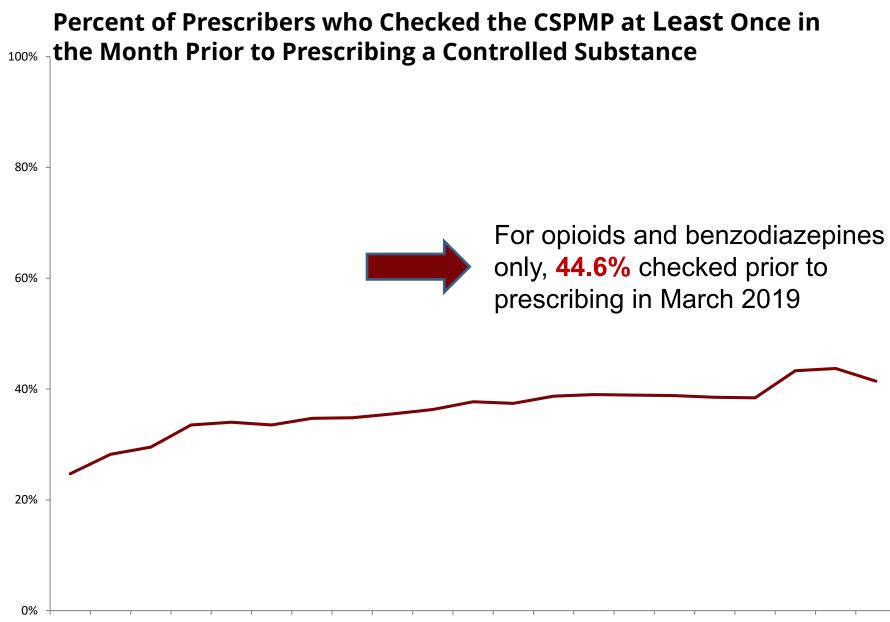
Naloxone Administered Pre-Hospital: Based on Surveillance Data





Naloxone dispensed by pharmacies peaked in May 2018 after Opioid Epidemic Act went info effect.

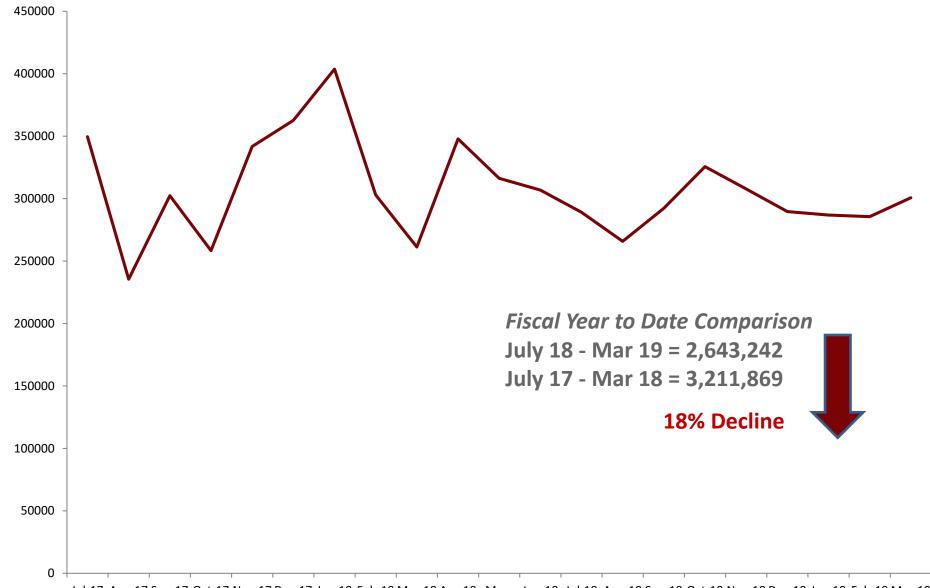




Jul-17 Aug-17 Sep-17 Oct-17 Nov-17 Dec-17 Jan-18 Feb-18 Mar-18 Apr-18 May- Jun-18 Jul-18 Aug-18 Sep-18 Oct-18 Nov-18 Dec-18 Jan-19 Feb-19 Mar-19



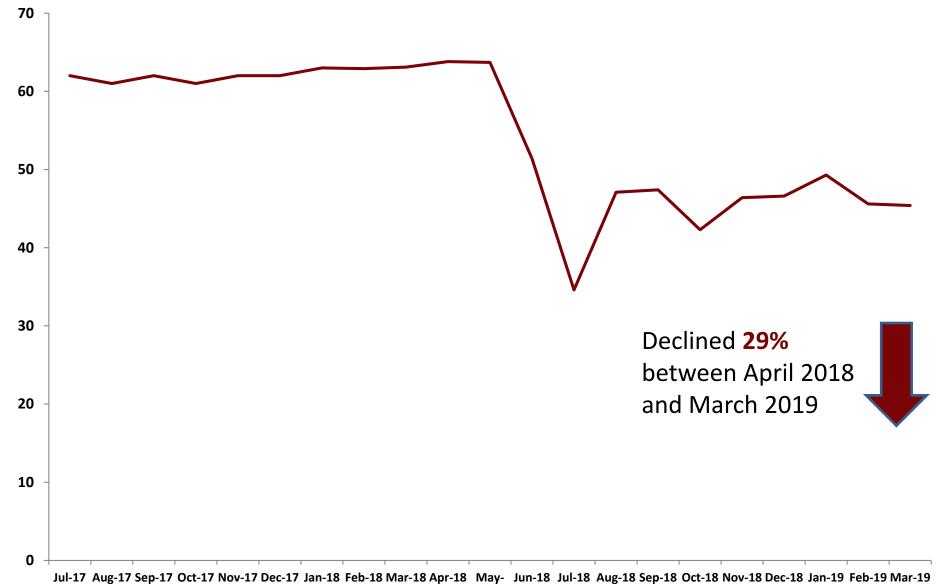
Number of Opioid Prescriptions Filled in Arizona



Jul-17 Aug-17 Sep-17 Oct-17 Nov-17 Dec-17 Jan-18 Feb-18 Mar-18 Apr-18 May- Jun-18 Jul-18 Aug-18 Sep-18 Oct-18 Nov-18 Dec-18 Jan-19 Feb-19 Mar-19

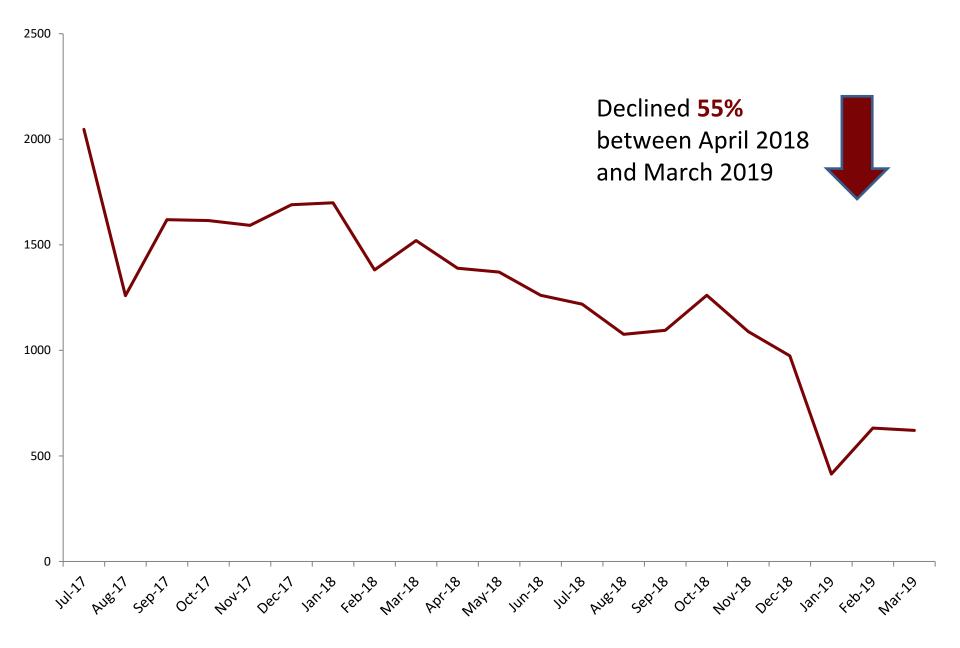


Average Morphine Milligram Equivalent Prescribed

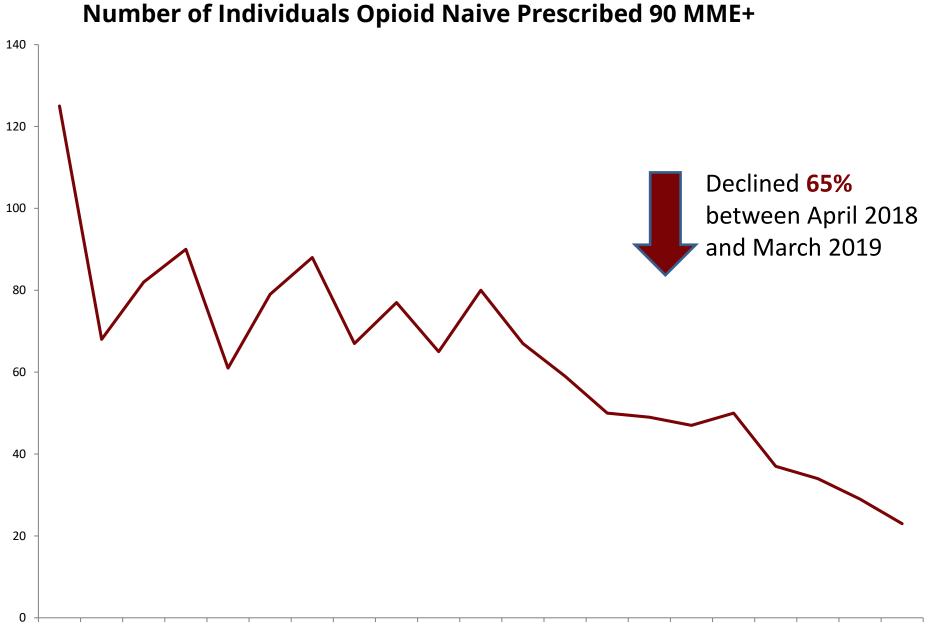




Individuals who Were Opioid Naive Prescribed Opioids for 5 or More Days







Jul-17 Aug-17 Sep-17 Oct-17 Nov-17 Dec-17 Jan-18 Feb-18 Mar-18 Apr-18 May-18 Jun-18 Jul-18 Aug-18 Sep-18 Oct-18 Nov-18 Dec-18 Jan-19 Feb-19 Mar-19

ADHS Implementation Highlights



Required Arizona Department of Health Services to:

- Provide consultation to governor on identifying and recommending elements for Enhanced Surveillance
- Initiate emergency rule-making for opioid prescribing and treatment practices
- Develop guidelines to educate providers on responsible prescribing practices
- Provide training to local law enforcement agencies on proper protocols for administering naloxone in overdose situations
- Provide report on findings and recommendations by September 5, 2017

ADHS Response Activities

New Regulations

- Final rules for licensed health care facilities went into effect March 2018
- Opioid reporting rules were finalized in April 2018
- Pain Management Clinic regulations began January 1, 2019. 34 applications received so far.
- Sober living licensure projected to go into effect in July 2019

Prescribing Guidelines Update

Healthcare providers can request free printed guidelines online at <u>azhealth.gov/OrderRxGuidelines</u>

or download online:

azhealth.gov/opioidprescribing

2018 ARIZONA OPIOID PRESCRIBING GUIDELINES

A voluntary, consensus set of guidelines that promote patient safety and best practices if prescribing opioids for acute and chronic pain.



Naloxone Distribution

ADHS has distributed approx. 14,000 kits of naloxone to more than 114 law enforcement agencies.

Law enforcement officers have administered naloxone to **1,089** people June 2017 – December 2018; **97% survived** the immediate prehospital event.

	NALOXONE REQU	EST FORM
ARIZONA DEPARTMENT OF HEALTH SERVICES	Law enforcement agencies whose staff have completed opioid overdose recognition and treatment training consistent with ADHS or AZ-POST standards are eligible for free naloxone.	
AGENCY INFORMATION	Agency Name:	
	Agency SHIPPING address:	
	Agency Director Name:	
	Contact Email:	
	Agency Size:	
TRAINING INFORMATION	Training Date(s):	
	Trainer Name(s):	
	Number of staff Trained:	
NALOXONE REQUESTED	Description: Narcan Nasal Spray 2/pack	Quantity Requested:
AGENCY DIRECTOR		DATE:

You may submit completed application multiple ways:

• Email: <u>azopioid@azdhs.gov</u>

- Fax: 602-364-1494 Attn: Naloxone Distribution, Office of Injury Prevention
- Mail: ADHS Office of Injury Prevention Naloxone Distribution Program 150 N. 18th Ave., Suite 320 Phoenix, AZ 85007

OPIOID ACTION PLAN Completed June 30, 2018

Opioid Action Plan

Opioid Overdose Epidemic Response Report ♦ September 2017



azhealth.gov/opioid

Goals	Recommendations	
Reduce Opioid Deaths	Enact legislation that impacts opioid deaths by reducing illicit acquisition and diversion of opioids, promoting safe prescribing and dispensing, decreasing the risk of opioid use disorder, and improving access to treatment	
Improve Prescribing and Dispensing Practices	Establish a Regulatory Board work group to identify prescribing trends and discuss enforcement issues	
	Establish a task force to identify specific improvements that should be made to enhance the Arizona Controlled Substances Prescription Monitoring Programs (CSPMP)	
Reduce Illicit Acquisition and Diversion of Opioids	Meet with leaders of law enforcement and first responder agencies to expand Angel Initiative and other OUD diversion programs and assist the DEA with filling vacancies in the DEA Tactical Diversion Squad	
Improve Access to Treatment	Require all undergraduate and graduate medical education programs to incorporate evidence- based pain management and substance-use disorder treatment into their curriculum	
	Create a call-in line resource to provide consultation to prescribers seeking advice about prescribing opioids and caring for patients with opioid use disorder	
	Establish through executive order a work group to identify, utilize, and build upon Arizona's existing peer recovery support services	
	Convene an Insurance Parity Task Force to research and provide recommendations regarding parity and standardization across the state	
	Engage the federal government outlining necessary federal changes to assist Arizona with our response to the opioid epidemic	
	Increase access to naloxone and Vivitrol for individuals leaving state and county correctional institutions and increase access to MAT therapy for individuals with opioid-use disorder while incarcerated	
Prevent Opioid Use Disorder/ Increase Patient Awareness	Utilize Public Service Announcements to educate patients, providers and the public regarding opioid use and naloxone	
	Create a youth prevention task force to identify and implement evidence based, emerging and best practice substance abuse prevention/early identification curriculum, expand after-school opportunities, and identify resource needs.	

Opioid Action Plan Implementation Opioid Assistance & Referral Line (OAR Line)



A free 24/7 hotline that assists providers with complex patients with pain and opioid use disorders, answered by medical experts at the Poison and Drug Information Centers in Arizona.

Arizona **OAR** Line **1-888-688-4222**

RIZONA DEPARTA

- Free 24/7 call resource for prescribers & the public
- Implemented in partnership with Arizona's Poison and Drug Information Centers
- Expanding services: postoverdose virtual case management, first responders and emergency departments to connect patients; will also begin offering academic detailing to providers across the state
- Funded in partnership with AHCCCS STR/SOR

Opioid Action Plan Implementation

Redefining pain + addiction CREATION OF A STATEWIDE CURRICULUM

azhealth.gov/curriculum

To redefine pain + addiction as multidimensional, interrelated public health issues...

...that require the transformation of care toward a whole-person interprofessional approach with a community and systems perspective.

All undergraduate health programs in Arizona (+ nurse practitioners) participated in the curriculum

development.

THE ARIZONA PAIN AND ADDICTION CURRICULUM

- The University of Arizona College of Medicine Pho-
- The University of Arizona College of Medicine Tucse
- Mayo Clinic School of Medicine Arizona Campus
- Creighton University School of Medicine Phoenix Regional Campus
- Midwestern University Arizona Colleg of Osteopathic Medicine
- A.T. Still University School of Osteopathic Medicine in Arizona
- A.T. Still University School of Dentistry
 & Oral Health in Arizona
- Midwestern University Arizona School of Podiatric Medicine
- Northern Arizona University Post-Master's Family Nurse
 Practitioner Certificate

- Northern Arizona University Doctor of Nursing Practice
- Grand Canyon University College of Nursing and Health Care Professions
- Arizona State University College of Nursing
 and Health Innovation
- University of Arizona College of Nursing
- University of Phoenix College of Health Profession
 Southwest College of Naturopathic Medicine and
 Health Sciences
- Health Sciences
 A T Still University Physician Assistants
- Degree Program in Arizona
- Midwestern University Physician Assistant Program
- Northern Arizona University Physicia Assistant Program

Redefining pain + addiction CREATION OF A STATEWIDE CURRICULUM

azhealth.gov/curriculum

Next Steps

- Creation of a graduate medical education version of the *Arizona Pain and Addiction Curriculum*, GME Summit Event 10/3/19
- Creation of a continuing medical education version of the Arizona Pain and Addiction Curriculum, CME Summit Event 11/21/19
- Pending bill would allow the Arizona Medical and Osteopathic Boards to approve trainings or experiences as sufficient for a DATA-waiver
- Conducting statewide survey of all undergraduate health educational programs and learners on their experience with the *Arizona Pain and Addiction Curriculum*

ARIZONA OPIOID EPIDEMIC ACT



Senate Bill 1001 Signed January 26, 2018

All Provisions in Effect Now

Except E-Prescribing Controlled Substances – delayed to January 2020



An Arizona Campaign to Increase the E-Prescribing of Controlled Substances

The electronic prescribing of controlled substances (EPCS) is now legal in Arizona and many states require or will require EPCS for any prescription of a Schedule II opioid. To increase EPCS in Arizona and prepare Arizona prescribers for the new state requirement, mandated by the Arizona Opioid Epidemic Act, Health Current has launched the *Click for Control* Campaign.

Arizona Opioid E-Prescribing Requirement:

Beginning January 1, 2019, each prescription order for a Schedule II opioid in Arizona's six largest counties (Maricopa, Mohave, Pima, Pinal, Yavapai and Yuma) must be transmitted electronically to the dispensing pharmacy. Beginning July 1, 2019, these same requirements go into effect in all other Arizona counties (Apache, Cochise, Coconino, Gila, Graham, Greenlee, La Paz, Navajo and Santa Cruz).

- + Click for Control Fact Sheet
- + Benefits of EPCS
- + EPCS Steps for Prescribers
- + EPCS Frequently Asked Questions (FAQs)
- + EPCS Background and History
- + EPCS-Certified EHR Vendors and Costs
- + Click for Control Webinars

ARIZONA OPIOID EPIDEMIC ACT Implementation

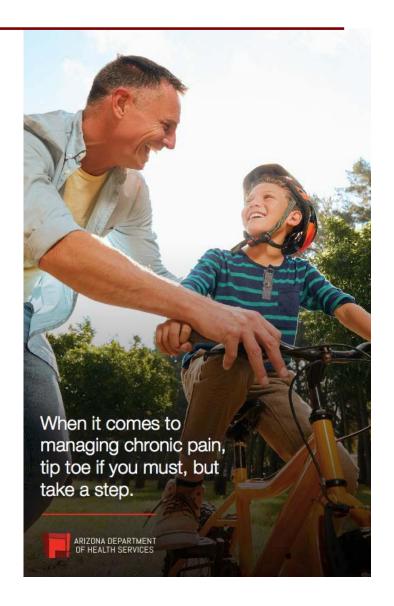
- Youth prevention campaign utilizes social media, posters
 - easierinthanout.com

Tracking Good Samaritan
 Calls = 5 calls reported since
 July 2018



MOVING UPSTREAM Chronic Pain Campaign

- azhealth.gov/chronicpain
- Features self-management strategies and other non-pharmacological methods to combat chronic pain
- Seeking success stories among people with chronic pain
- Next steps include increasing efforts to engage healthcare providers in promoting alternative pain management strategies
- Continue to build web-based resources



OTHER ACTIVITIES

SAMHSA & CDC GRANTS

- First Responder Training & Naloxone Distribution
- Piloting SBIRT among 5 first responder agencies
- University of Arizona Center for Rural Health will host trainings on overdose recognition and naloxone to Community Health Workers in the summer.
- U of A Center for Rural Health will work with EMS agencies to assist in the coordination of follow-up care to patients that have overdosed.

- State Lab provides free post-mortem testing
- Tribal Opioid Workgroup & Two-Day Summit
- Drug Overdose Fatality Review Team
- Supporting CSPMP
- NAS Plan developed and being implemented

OTHER ACTIVITIES County Health Departments

Funding 12 county health departments for variety of actions at local level:

 Cochise, Coconino, Gila, La Paz, Maricopa, Mohave, Navajo, Pima, Pinal, Santa Cruz, Yavapai, and Yuma Activities include:

- Implementing the Rx Initiative Community Toolkit
- Establishing local Drug Overdose
 Fatality Review teams in 10 counties
- Enhancing local linkages to care through the expansion of peer support and case management services
- Conducting community-wide surveys
- Developing local data dashboards

NEXT STEPS



- Arizona Osteopathic Medical Association in partnership with Arizona State University will be launching a statewide Arizona Opioid Prescriber Education program to provide free online continuing medical education (CME) program for healthcare professionals.
- Covers the latest information about Arizona's opioid laws and regulations, prescribing guidelines, and treatment options for opioid use disorder through an interactive, user-friendly e-learning system.
- Developed and presented by a multidisciplinary team of healthcare professionals, accredited for all types of prescribers, including physicians, nurse practitioners, physician assistants.
- Satisfies the license renewal three-hour CME requirements in Arizona law.
- The website site, currently under construction will be <u>www.AzRxEd.org.</u>

MORE NEXT STEPS



- Reconvene Insurance Parity Taskforce
- Launch MAT Mentoring Program in partnership with University of Arizona Center for Rural Health
- Continue monitoring data and results of programs
- Identify and implement new strategies to address the crisis

For more information azhealth.gov/opioid

Questions/Comments: azopioid@azdhs.gov

