



Opioid Abuse Advisory Committee

Meeting #8 Minutes
Wednesday, December 5, 2018

Teleconference

The eighth meeting of the Opioid Abuse Advisory Committee was called to order by Advisory Committee Chair Tom Martinec at 8:00 a.m. (CST). The following members of the Advisory Committee were in attendance: Tom Martinec, Kristen Bunt, Sara DeCoteau, Maureen Deutscher, Margaret Hansen, Amy Hartman, Amy Iversen-Pollreisz, Steve Lee, Kari Shanard-Koenders, Jon Schuchardt, Senator Jim White, and Brian Zeeb.

Advisory Committee members who were not able to attend were Chris Dietrich and Robert VanDemark.

Support staff in attendance included: Sharon Chontos, Melissa DeNoon, Mark East, Derrick Haskins, Kiley Hump, Amanda Nelson, Rachel Oelmann, Susan Sporrer, Laura Streich, Colleen Winter and Tiffany Wolfgang.

Guests included: Alyson Becker (Sanford Research), Cassie Deffenbaugh (SD Department of Health), Mark East (SD State Medical Association), Amanda Flores (Great Plains Tribal Chairmen's Health Board), Denise Kolba (SD Foundation for Medical Care), Amber Letcher (SD State University), Steve Lindquist (Avera Health), Sandra Melstad (SLM Consulting), Bob Mercer (KELOLAND Media Group), Linda Penisten (SD Foundation for Medical Care), Rita Pettigrew (Advocate), Brandon Pfaff, (Advocate), Steve Schroeder (SD Foundation for Medical Care), Barb Smith (SD State Medical Association), and Charles Smith (SAMHSA).

July 19, 2018 Minutes Approval. The July 19, 2018 minutes were approved via e-mail in August 2018.

Welcome

Tom Martinec, Chair, welcomed the Advisory Committee members and guests. Martinec noted the meeting outcomes were to a) provide a status update of the strategic plan, and b) provide updates and awareness of grants received by other agencies to prevent and respond to opioid use/misuse.

Funding Source Review

Please refer to the July 19, 2018 minutes for an overview of the CDC and SAMHSA grants listed below. The reports below were brief status updates to the Advisory Committee.

CDC Prescription Drug Overdose: Data-Driven Prevention Initiative (CDC DDPI). Report provided by Laura Streich, DOH. The CDC DDPI grant began its final year (Year 3) in September 2018. The CDC will be offering continuation grants that could be used to support efforts outlined in the South Dakota's Opioid Road Map. The grant activities were briefly reviewed in later agenda items.

CDC Cooperative Agreement for Emergency Response: Public Health Crisis Response (PHCR).

Martinec reported DOH was recently awarded the CDC PHCR grant. The award is approximately \$1.5M and began September 1, 2018. Projects include further opioid training for personnel and crisis response teams; training for hospital personnel on opioid abuse; law enforcement training on stress, compassion and fatigue; emergency medical services (EMS) chart reviews (looking at Naloxone use and overdose protocols); integration of EMS patient records with electronic health record (EHR) systems; additional PDMP enhancements; health information exchange (HIE) enhancements and further integration of data systems; and increasing capacity of the state public health laboratory to analyze opioids.

SAMHSA Screening, Brief Intervention, and Referral to Treatment (SBIRT) State Implementation Grant.

Tiffany Wolfgang, DSS, reported that the five-year grant, currently in Year 3, works to integrate behavioral health and substance use screening tools and supports into primary care settings. Six primary care clinic sites are currently implementing SBIRT: Avera Medical Group – 69th & Cliff (Sioux Falls), Avera Medical Group Family Health Center (Sioux Falls), Avera St. Benedict Health Center (Parkston and Lake Andes clinic sites), and Brown Clinic (Watertown, two clinic sites). To date, more than 10,000 patients have been screened since January 2017 throughout the project. The DAST-10 is being used for drug use screening. Expansion to additional primary care sites will continue throughout the remainder of the grant period. Expansion of Medication Assisted Treatment (MAT) as a specialty service available to patients is also being supported in partnership with Avera Health.

SAMHSA State Targeted Response to the Opioid Crisis (STR-Opioid Grant).

Wolfgang reported that South Dakota received \$4,000,000 over a 2-year period to address treatment/recovery services and prevention; many of the SD Opioid Road Map objectives were derived from the state's original application to SAMHSA, particularly in the areas of treatment services and emergency response. The grant ends April 30, 2019 and ongoing activities will be supported by the State Opioid Response grant.

SAMHSA State Opioid Response Grant (SOR).

Update provided by Wolfgang. South Dakota was awarded \$8,000,000 over a 2-year period to combat opioid use and misuse. The award began October 1, 2018 and will end September 30, 2020. The Division of Behavioral Health leads this effort, similar to the STR-Opioid grant. Focus is on 1) continuing STR-Opioid funded efforts as appropriate, 2) building additional capacity for MAT, 3) direct marketing to consumers, providers and the public at large regarding the Opioid Resource Hotline and Avoid Opioid SD campaign components, and 4) building additional capacity to leverage the peer recovery support model statewide. Brian Zeeb, Division of Criminal Investigation (DCI), and Wolfgang agreed to re-engage discussions of supporting jails with substance abuse disorder treatment.

US Department of Justice Office of Justice Programs Comprehensive Opioid Abuse Program (COAP).

SD Board of Pharmacy was awarded \$749,000 to improve Prescription Drug Monitoring Program (PDMP) work flows for prescribers and creation of a personalized report card for patients. Brian Zeeb, DCI, expressed the need to sustain PDMP funding to maintain the platform. Shanard-Koenders reported it costs approximately \$600,000 per year to maintain the PDMP platform and \$94,000 per year for the add-on feature including the individualized report cards.

Additional Opioid Abuse Prevention and Response Funding Updates.

Advisory Committee members and guests were asked to provide an overview of grants they have been awarded to address opioid abuse.

- **Tribal Opioid Response (TOR) Grants, SAMHSA.** Sara DeCoteau reported that Sisseton-Wahpeton Oyate (SWO) is using TOR funding to fund a nurse care connector to identify and connect patients to available resources, and to navigate resources for individuals returning from treatment in support of their recovery. Dakota Pride Center does not presently offer MAT. SWO is also working on building capacity for treatment in jails. DeCoteau and Wolfgang agreed to collaborate on this project, including naloxone training for first responders. GPTCHB reported that they are aware of the other TOR grants funded and are working with those tribes to assist as needed.
- **Rural Opioid Response Program Planning Grant, HRSA – Avera Health.** Steve Lindquist reported Avera Health was awarded a \$200,000 planning grant from HRSA. The grant began September 2018 and ends September 2019. Strategic partners include DSS Division of Behavioral Health, Dakota Pride Center, GPTCHB, University of South Dakota Social Work Department, and Hazelden Betty Ford. The grant has three areas of focus, seeking to understand gaps in and develop solutions as it relates to opioid use for:
 - workforce development;
 - MAT program expansion and sustainability, including telemedicine; and
 - care coordination/navigation services.
- **Rural Opioid Response Program Planning Grant, HRSA – GPTCHB.** Amanda Flores, GPTCHB, reported they were also awarded \$200,000 from HRSA. Their focus is opioid abuse prevention for the nine SD tribes. They are currently conducting a needs assessment.
- **Rural Health and Safety Education Competitive Grant Program, USDA and Rural Opioids Technical Assistance Grant, SAMHSA – South Dakota State University.** Update provided by Amber Letcher, SDSU on the activities supported by both grants. Work is being done in collaboration with North Dakota State University. The target audience is rural families – farmers and ranchers. Prevention programs for youth will begin in early 2019. They will hold quarterly webinars on opioid abuse prevention through the SDSU Extension Office. The first webinar is on Friday, December 7th.
- **Centers for Medicaid and Medicare Services (CMS) Hospital Innovation Improvement Network (HIIN) – SDAHO.** Kristen Bunt reported SDAHO is partnering with the Iowa Hospital improvement and Innovation Network (HIIN) known as Compass to educate prescribers on opioid prescribing practices, PDMP, resources and treatment services available within the state. In SD, 42 hospitals participate in the Compass HIIN, of which 38 are critical access hospitals. The educational program is titled “Opioid – Change the Script,” which is a multi-part series beginning with hospital-based training for medical personnel and culminating in a community convening to discuss opioid use at the community level and the community’s response systems in place/gaps in service. A similar event was held in Brookings, SD, during the Fall of 2018.
- **USDA Rural Development (RD): Opioid Misuse in Rural America.** Martinec reminded the committee that USDA RD can provide funding in support of equipment (medical, safety, emergency response, distance learning or telemedicine), facilities (hospitals, mobile clinics, outpatient clinics, among others), and other needs (workforce development, strategic planning, community planning) to prevent and address opioid misuse and abuse within rural communities.

Data Update.

Amanda Nelson, DOH, provided an update on statewide opioid data. Refer to the attached presentation. The opioid data dashboard is also available on the Avoid Opioid website - <https://www.avoidopioidsd.com/key-data/>

As shown in the syndromic surveillance data, suspected opioid overdoses have increased since 2015. However, this data should be used with caution, as the numbers may also be increasing due to more reporting from participating emergency rooms and an increased awareness of opioid overdose symptoms. Vital Statistics data indicated that the top five drugs resulting in deaths due to drug overdose in South Dakota in 2017 were methamphetamine, fentanyl, heroin, oxycodone, and hydrocodone.

The 2017 Behavioral Risk Factor Surveillance System (BRFSS) reported 15% of adults had taken a prescription pain medication in the last 12 months. This was the first year this data was collected so no trends were available.

Prescription Drug Monitoring Program Update.

Melissa DeNoon, PDMP Director, South Dakota State Board of Pharmacy provided the following updates on the SD PDMP:

Program statistics for October 2018:

- Compliance with mandated prescriber registration is at 95%.
- Total number of PMP AWARe approved users is 6,552 which is double the number of users as reported at the end of 2016.
- PDMP utilization, measured by the number of queries performed by registered users, continues to increase as is shown by an almost eightfold increase from January 2016 to October 2018 (7,300 to 56,000). Both the increase in registered users and the additional entities that have integrated the PDMP into their electronic health records or pharmacy management systems contribute to this increase in utilization.
- Opioid prescriptions overall for 2018 are continuing the downward trends seen from 2015 to 2016 to 2017 in all three parameters: total prescription count, total quantity dispensed, and total days of supply.
- The PDMP vendor is adding new reporting capabilities which will be utilized, including for example reporting on South Dakota patients only vs patients in all states who are dispensed prescriptions by SD-licensed pharmacies.

PDMP enhancement and project updates include:

- *Clinical Alerts* – 1) total number for January 2018 was 9,005 and for October 2018 was 6,406; months in between went up and down but seeing a positive downward trend, 2) total prescribers receiving alerts has stayed relatively consistent at about 1,100 per month.
- *Prescriber Reports* – 4th round of reports went out on November 21, 2018 for Q2 and Q3 2018.
- *MedDrop Drug Take-Back Project* – 1) 10 locations are operational, two (2) locations have receptacles on order, and the last three (3) sites are in progress; 2) through November 2018, a total of 1,362 lbs. of disposed drugs have been collected and returned for destruction; 3) established a SD master takeback site list in partnership with DOH, DSS and the Helpline Center, accessible at <https://www.avoidopioidsd.com/take-action/take-back-sites/>; and 4) DSS STR-Opioid grant funding has been made available to expand this project to additional SD pharmacies in 2019.

- *EHR Integrations* – 1) Avera Health System went live May 2016, 2) Yankton Medical Clinic went live July 2018, 3) Walmart and Sam’s Club Pharmacies went live June 2018, 4) Regional Health System went live October 2018, and 5) Sanford Health System is in progress for end of Q4 2018 or early Q1 2019 to go live.

Zeeb noted DeNoon is assisting with training law enforcement personnel on the PDMP software platform so they can better read reports for surveillance and investigative purposes.

Media Update.

Derrick Haskins, DOH, provided the update on the media campaign. A five-week media flight of CDC ads aired in August and September on television stations statewide. A new flight will begin on December 17 and run through February 2019. Four (4) SD stories are being filmed and will be integrated into the public awareness ads and TV flight schedule as they are completed in late 2018/early 2019.

Avoid Opioid ads are currently running on Facebook and Instagram. Public awareness ads on SD radio stations will be added early 2019.

A card with a list of resources is being developed to be available for the public. A first responder package, modeled after Minnehaha County, is being developed to be provided to families in crisis situations. Zeeb agreed to review the packet and provide feedback.

The Helpline Center resource database, hotline, and texting services are live and available via the Avoid Opioid website (<https://www.avoidopioidsd.com/find-help/>).

A planning session to discuss communication strategy between campaign sponsors (DSS and DOH) as well as several contracted service providers (including the Helpline Center) is planned for January 2019.

Strategic Plan Update

The SD Opioid Road Map progress updates are posted on the Avoid Opioid website: (<https://www.avoidopioidsd.com/about/strategic-plan/>). SD DOH and SD DSS will update on a regular basis.

The following are responses to questions from Committee members:

- DSS is currently working with Avera Health (Sioux Falls), Lewis & Clark Behavioral Health Services (Yankton), Sanford Health (Sioux Falls), Center for Family Medicine (Sioux Falls) and Project Recovery in partnership with Addiction Recovery Centers of the Black Hills (Rapid City) to increase MAT capacity.
- The Helpline Center has hired an opioid care coordinator to assist individuals and professionals in navigating resources in their community.
- Face It Together is providing face-to-face peer recovery support in Sioux Falls and via remote technology statewide.
- SDSMA is updating opioid prescribing guidelines for acute pain. In 2015 – 2016, a committee created guidelines addressing chronic non-cancerous pain. SDSMA has re-engaged the committee; guidelines are expected to be released in July 2019.

Zeab requested two additional tasks in the strategic plan. The first is to increase SUD treatment and recovery resources in county jails. Second, under Goal 3 – Illicit Supplies, add a task to develop strategies in data mapping overdoses to assist law enforcement to improve surveillance.

CDC Emergency Response Vulnerability Assessment (Cassie Deffenbaugh, DOH, and Sandra Melstad, SLM Consulting).

Deffenbaugh and Melstad provided an overview of one activity within the CDC Cooperative Agreement for Emergency Response: Public Health Crisis Response (PHCR) grant awarded to DOH. The vulnerability assessment will identify sub regional areas at high risk for opioid overdoses and bloodborne infections (HIV, Hep C, Hep B) associated with non-sterile drug injection. The findings of the assessments will be used to develop plans to strategically allocate prevention and intervention services. The grant period is September 1, 2018 – August 31, 2019.

In the attached PowerPoint presentation (Vulnerability Assessment Overview 2018), Deffenbaugh and Melstad outlined the key activities and performance measures of the grant. In 2019, the project team aims to hold community outreach events and provide each county a report card of their findings. The project team will keep the Advisory Committee updated.

Public Input

Steve Schroeder, family physician in Miller and medical director at SD Foundation for Medical Care and Quality Innovation Network (QIN) reported that QIN is working on a medication safety program with Centers for Medicare and Medicaid Services (CMS). They are partnering with SDAHO on similar projects including mitigating opioid misuse with senior citizens.

Advisory Committee Updates

Wolfgang observed South Dakota has comprehensive plans in place to address substance use disorder when layering the SD Opioid Road Map, tribal and rural communities' programs, medical and behavioral health programs, and other agency programs.

Deutscher was encouraged by today's report. She and her family understand firsthand the pain of opioid misuse due to her son's death. She encouraged all to get involved. "You are saving lives. Thank you!"

Zeab reported drug abuse and narcotic investigations take a great majority of DCI's time. The problem is not slowing down. Organizations that sell drugs are aiming to make a lot of money in South Dakota. DCI focus remains on stopping illicit supply of drugs into the state.

Senator Jim White as a member of the SD Legislature is working on appropriations to fund programs to mitigate and respond to drug abuse and misuse. He encouraged the Committee members to let him know how the Legislature can help.

Upcoming Events

- SD PDMP Annual Report to the SD Legislature – January 2019
- SDAHO "Opioids: Change the Script" Project webinar presentation on the SD PDMP – January 2019

Closing Remarks. Sharon Chontos, facilitator, will reach out to the Committee members and support staff to schedule the next meeting in 2019. The next meeting will be a face-to-face meeting in Pierre. In the interim, contact Martinec or Chontos with questions or concerns.