



## Montana Focus on Opiate Crisis

Since 2000, there have been more than 700 deaths from opioid overdose in Montana. DPHHS, along with key partners, is committed to reducing Opioid Use Disorder (OUD) and develop a strong infrastructure to address Substance Use Disorder (SUD) in Montana. Through federal funding opportunities, resources are being allocated towards prevention, treatment, and recovery support services, to strengthen our SUD system, as outlined below.

### **State Targeted Response (STR) Grant Award**

The AMDD applied for and received a two-year SAMHSA funded State Targeted Response (STR) grant, which began 5/1/2017 and ends 4/30/2019 in the amount of \$2 million each year, a total of \$4 million over the two years. This grant aims to:

- Increase access to OUD treatment,
- Reduce unmet treatment need, and
- Reduce opioid overdose related deaths in Montana.

The AMDD is using this grant to target at-risk populations in Montana; American Indians; pregnant women and women of childbearing age; veterans, and justice system-involved individuals. The two overarching goals of the grant are to support opioid use disorder prevention programs and to develop comprehensive, evidence-based services for OUD treatment.

The activities implemented under this grant are to:

- Create a comprehensive needs assessment and strategic plan to address SUD, including OUD, in Montana. This was done in partnership with the Opioid Task Force managed by DPHHS, Public Health and Safety Division.
- Provide access to free training for administering Naloxone and access to Naloxone medication by law enforcement, first responders, school nurses and staff, and any other interested community member. Naloxone is a drug that prevents death by overdose for opiates.
- Distribute free Deterra disposal bags to easily and safely dispose of extra or expired household medications. This is important because teenagers and others often get access to addictive drugs in the medicine cabinets of family or friends.
- Implement Medication for Addiction Treatment (MAT) by increasing the number of healthcare providers and clinics trained on the standards of care for MAT delivery and the use of FDA approved medications. This is important because it is the current best practice standard of care for OUD and it brings primary care doctors up to speed on current practices which recognize primary care as SUD care.
- Provide funding for Peer Support Specialists to become trained and hired within MAT clinics for supporting individuals with OUD as they receive MAT services.

### **The State Opioid Response (SOR) Grant Award**

The AMDD applied for and received a two-year SAMHSA State Opioid Response (SOR) grant, which began 9/30/2018 and ends 9/29/2020, in the amount of \$4 million each year, a total of \$8 million over the two years. This grant aims to build upon the activities of the STR grant and substantially:

- Increase access to OUD treatment,
- Reduce unmet treatment need, and
- Reduce opioid overdose related deaths in Montana.

This grant targets the same populations identified in the STR grant with the addition of older adults. This is important because we are recognizing that seniors are often at risk of opioid overdose and they are more often prescribed opiates which may be diverted.

This grant will continue STR activities as well as:

- Increase the number of healthcare providers and clinics trained in MAT and providing MAT delivery of care.
- Establish an Advisory Workgroup to develop a plan to integrate MAT into criminal justice, hospital and primary care settings and a workforce development plan to guide training, academic detailing and technical assistance.
- Collaborate with key stakeholders to develop and distribute public information targeting older adults and prescription drug disposal and safety to prevent accidental overdoses or diversion of prescription medications.

To date (December 2018), in collaboration with other key partners, the following successes has been accomplished in MT:

- 100,000 Detera bags were distributed across 56 counties;
- 377 individuals were trained in Naloxone administration and 256 Master Trainers are available;
- 1,022 units of Naloxone have been distributed to use in case of an overdose;
- Since January 2017 there has been at least a 336% increase in the number of healthcare providers who have become Waivered by the DEA to prescribe buprenorphine, one of the FDA approved MAT medications (from 22 to 96\*);
- 133 individuals have been trained as Peer Support Specialists; 58% are female and 35% male and 27% are Native American.

Medicaid Expansion has substantially increased access to health care services for individuals with a substance use disorder, including opioids who otherwise would not qualify for standard Medicaid. MAT physician and mid-level services, along with the FDA-approved medications and behavioral health services are reimbursable services under Medicaid. In 2017, the MT Legislature approved the Naloxone Standing Order, HB333, which authorizes pharmacists who maintain a current active license practicing in a pharmacy located in MT to initiate a prescription and dispense a naloxone opioid antagonist formulation listed a standing order. By making Naloxone medication readily available during the time of an overdose, we hope to see the number and rate of fatal overdoses dramatically decrease, ultimately saving lives and connecting individuals to life-saving healthcare and behavioral health services.

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\*This number comes from SAMHSA locator which waived providers can self-declare to be included in the list