

2019 Proposed Opioid Project Plan

NCACH Regional Opioid Stakeholders Workgroup

Background

The North Central Accountable Community of Health (NCACH) is implementing six Medicaid Transformation Projects, one of which is the Opioid Project. The Opioid Project should have elements of opioid prevention, treatment, overdose prevention, and recovery incorporated into it.

The NCACH Governing Board allocated an overall budget for the Opioid Project of \$1,000,000 for the duration of the Medicaid Transformation (through 2021). The expected annual breakdown of this allocation is:

2018	2019	2020	2021
\$100,000	\$300,000	\$300,000	\$300,000

The Regional Opioid Workgroup was tasked with assessing current initiatives and need in the region and developing an implementation plan using strategies outlined in the Medicaid Toolkit. In addition, there was desire by the Workgroup to prioritize the following:

- Prevention efforts;
- Fostering collaboration among diverse stakeholders who are impacted by the opioid epidemic; and,
- Engaging sectors that have not been engaged with other aspects of the Medicaid Transformation Project to date.

Strategies

The Workgroup proposes seven strategies to implement in 2019 addressing prevention, treatment, overdose prevention (OD prevention), and recovery.

Prevention, Treatment, OD Prevention, and Recovery

Rapid Cycle Opioid Application

- Short term application process to award up to \$10,000/award to agencies to implement shovel-ready opioid projects during a 6 month funding cycle
- Two cycles in 2019 for up to \$50,000/cycle: January – June 2019, and July – December 2019
- This is intended to be seed money and a sustainability plan is critical to the long-term success of this funding
- Collaboration among agencies is strongly encouraged

Expenses	Amount
January – June 2019	\$50,000
July – December 2019	\$50,000
Total	\$100,000

North Central Opioid Response Conference – Distributed Conference Model

- ½ day conference at multiple sites within NCW at one time
- This allows many more people to engage without traveling to one regional location
- After keynote presentations that are heard by all sites at the same time, each site is hosted by a facilitator to hold community level discussions and move into action
- Promote cross-sector collaboration
- Promote funding opportunities, including the NCACH Rapid Cycle Opioid Application

Expense	Amount
Venue	\$2,000
Catering	\$4,000
Accommodations for speakers	\$500
Speaker fees	\$2,500
Meeting Materials	\$500
Miscellaneous	\$500
Total	\$10,000

North Central Opioid Response Conference

- 1-day conference in North Central Washington, September 2019
- Potential sessions include sessions focused on: youth, opioid prescribing, pain management, medication assisted treatment, education, jails/criminal justice/law enforcement, schools)
- Bring in SME as well as highlight local work and champions
- Highlight opportunities to collaborate and expand current projects to or in the North Central region
- Highlight funding opportunities
- Provide CMEs if possible

Expense	Amount
Venue	\$5,000
Catering	\$10,000
AV needs	\$1,500
Swag	\$1,500
Accommodations for speakers	\$3,000
Speaker fees	\$15,000
Meeting Materials	\$2,000
Photographer	\$1,200
Miscellaneous	\$800
Total	\$40,000

Prevention

Dissemination of Dental Prescribing Guidelines

- Evidence-based Dental Pain Care: A New Opioid Prescribing Guideline from Washington State
- Potential Agenda: Personal Story, Presentation of Dental Opioid Prescribing Guidelines by SME, Prescription Monitoring Program and relevance to Dentists, and how to discuss opioids with clients and screen for a history of opioid use/abuse.
- One in Grant, Chelan/Douglas, and Okanogan County utilizing already existing Dental Society Meetings or a 2 hour workshop
- Contract with BREE collaborative or other SME
- Provide CMEs and dinner

Expense	Amount
Venue	\$1,500
Catering	\$1,500
Swag	\$500
Accommodations for speakers	\$2,000
Speaker fees	\$8,000
Meeting Materials	\$1,000
Photographer	\$600
Total	\$15,000

Increase awareness

- Increase awareness of opioid use, addiction, and treatment options
- Reduce stigma in the general public and by providers
- Contracted through an RFP process

Expense	Amount
Salaries, wages, and benefits	\$5,000
Travel	\$100
Printing costs	\$2000
Communications and media costs (social media, website, radio, rack cards, email distributions, local coalitions, etc)	\$22,000
Total	\$30,000

School-based prevention

- Evidence-based opioid prevention curriculum at Grade, Middle, and/or High Schools
- Provide funding for training teachers and incorporating into curriculum

Expense	Amount
Salaries, wages, and benefits	\$5,000
Travel	\$1000
Training	\$1000
Curriculum Expenses	\$2000
Printing	\$500
Focus Group	\$500
Total (per school)	\$10,000
Total for 5 schools	\$50,000

Overdose Prevention

Naloxone training and distribution

- Train providers (healthcare, BH, social service), schools, public health, general public, etc. on how to administer Naloxone
- Distribute Naloxone to people who have been trained to use it and are at risk of witnessing an overdose

Expense	Amount
Naloxone (200 doses @ \$75 each)	\$15,000
Admin (booth fees, venue fees, etc)	\$5,000
Total	\$20,000

Recovery

Support recovery initiatives or events – specifics TBD

Expense	Amount
<i>Support recovery initiatives/events – Specifics TBD</i>	\$20,000
Total	\$20,000

Summary 2019 Proposed Strategies

Prevention	Treatment	OD Prevention	Recovery	Strategy	Budget
				<i>Rapid Cycle Opioid Application</i>	\$100,000
				<i>North Central Opioid Response Conference – DCM</i>	\$10,000
				<i>North Central Opioid Response Conference</i>	\$40,000
				<i>Dissemination of Dental Prescribing Guidelines</i>	\$15,000
				<i>Increase Awareness of Opioid Use and Addiction & Reduce Stigma</i>	\$30,000
				<i>School-based Prevention</i>	\$50,000
				<i>Naloxone Training and Distribution</i>	\$20,000
				<i>Recovery Initiatives and Events</i>	\$20,000
TOTAL					\$285,000

There is \$15,000 of funding that is currently allocated to the Opioid Project but unbudgeted in the project plan. This funding will be available for emerging initiatives next year that the Workgroup would like to recommend for funding or could be used if proposed strategies exceed the budgeted amount.

Preliminary 2019 Timeline

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Rapid Cycle Opioid Project (Application Process)				App open	App closed	Award				2020 App open	2020 App closed	2020 Award
North Central Opioid Response Conference			DCM						IP			
Dissemination of Dental Prescribing Guidelines												
Increase awareness of opioid use and addiction												
School-based prevention												
Naloxone training and distribution												
Recovery Initiatives/Events												

DCM – Pathways to Prosperity using the Distributed Conference Model; IP – In person Conference

Strategies will start in the month highlighted in dark blue and continue through the months highlighted in the light blue.

Other Initiatives

NCACH Whole Person Care Collaborative

In addition to the proposed strategies above, the Workgroup wants to ensure that adequate provider Medication Assisted Treatment (MAT) trainings are offered to providers in our region. It is unclear if access to training is a barrier for providers becoming waived providers. To understand this, the Opioid Workgroup recommends that the Whole Person Care Collaborative (WPCC) solicit feedback from its members to determine if access to local MAT trainings is a barrier to providers becoming waived providers. And if so, the Opioid Workgroup recommends that the WPCC provide MAT trainings in each of the counties where providers responded that access to training opportunities is a barrier.

Opioid Overdose as a Notifiable Condition

Chelan-Douglas Health District (CDHD) is in the process of making drug overdoses, both fatal and non-fatal, notifiable by healthcare professionals as well as encouraging all first responders and others witnessing an overdose to report the condition. CDHD is doing this in collaboration with The Center for Alcohol and Drug Treatment. Reporting of overdoses will allow for effective surveillance and case finding as well as offering an opportunity to engage individuals in treatment (through outreach done by The Center for Alcohol and Drug Treatment). If this pilot is successful, NCACH will partner with appropriate stakeholders to encourage expanding this model to Grant and Okanogan Counties.