

## Illinois Opioid Crisis Response Advisory Council Meeting

October 19, 2020

### MEETING MINUTES

IDHS/SUPR Chief of Staff Danielle Kirby welcomed the group. IDHS Secretary Grace Hou thanked Chief of Staff Kirby for her leadership and welcomed new IDHS/SUPR Director David Jones. Director Jones thanked the Council for their warm welcome and looks forward to our work together.

#### **IDHS/SUPR Updates**

Chief of Staff Kirby provided the following updates:

- IDHS/SUPR continues to look for alternative approaches to improve their response to the opioid epidemic, especially as cold weather approaches and COVID cases are anticipated to increase. IDHS/SUPR and IDPH are collaborating with the Helpline to promote harm reduction efforts.
- Chief of Staff Kirby thanked Katie Hinshaw at the Department of Healthcare and Family Services (HFS) for her recent presentation to the Access to Medication Assisted Recovery (AMAR)/Hub & Spoke providers on how to better connect with Managed Care Organizations.
- Lt. Governor Juliana Stratton has a new podcast “Walk, Listen, Learn: Our Journey to Justice” that includes interviews with experts on key topics relating to justice and equity. The podcast can be found at: <https://www.listennotes.com/podcasts/walk-listen-learn-our-journey-to-justice-oVKiH3c6PfQ/>

#### **IDHS/Prescription Monitoring Program (PMP) Updates**

Sarah Pointer, PharmD, Clinical Director of the PMP, gave the following updates:

- The PMP was awarded a Harold Rogers 2020 grant from the Department of Justice (DOJ), which will provide funding for several activities, including developing a real-time webservice allowing access to current licensing data and automated process, creating a publicly available statistical dashboard to display de-identified data, and using the weighted score of risk to identify groups for educational intervention to be evaluated for effectiveness during targeted academic detailing.
- The PMP continues to develop website enhancements. New statistical graphs and proactive alerts are being added to MyPMP. PMP is collaborating with SUPR on data for MAR deserts and will report on that in an upcoming meeting.
- It was noted that the PMP now mandated January 2021 deadline to link the PMP with Electronic Health Records (EHR) is quickly approaching. To date, over 760 organizations and almost 11,000 sites have integrated the PMP now.

#### **Illinois Department of Public Health (IDPH) Updates**

Jenny Epstein, Director of Strategic Health Initiatives, gave the following updates:

- IDPH’s Semi-Annual Report on opioid overdoses has been released and can be found at: <https://www.dph.illinois.gov/sites/default/files/publications/semiannual-opioid-overdose-reppdfort9292020final.pdf>
- Dr. Leslie Wise reviewed 2019 opioid overdose data (see attached handouts). These data show that Blacks are twice as likely to die from any drug overdose than non-Hispanic White. Hispanics are 1.8e times less likely to die from any drug overdose than non-Hispanic Whites. Males comprise 72% of opioid overdose deaths. The highest rate of opioid overdose

deaths occur among people ages 35-54 years old. Opioids are involved in the majority of overdoses with other drugs; for example, opioids are involved in 86% of benzodiazepine overdose deaths.

### **HFS Update**

Dr. Arvind Goyal, Medical Director, gave the following updates:

- Please reach out to Dr. Goyal directly with suggestions regarding what HFS can do to mitigate the opioid crisis for Illinois' Medicaid population. Please email suggestions to Dr. Goyal at [Arvind.Goyal@illinois.gov](mailto:Arvind.Goyal@illinois.gov).

### **Governor's Opioid Overdose Prevention and Recovery Steering Committee Update**

Sherie Arriazola Martinez, the Council's Steering Committee representative, gave the following updates:

- The Steering Committee (SC) met on October 14<sup>th</sup> and reviewed the fatal opioid overdose data that Dr. Wise presented.
- The SC reviewed the 2020 SOAP recommendations submitted by the Council Committees. The SC suggests that Council pare down the 85 recommendations to those that are most strategic and actionable. It was further suggested that each Committee consider selecting its two top priority recommendations.

### **2020 Statewide Opioid Action Plan (SOAP) Development**

Chief of Staff Kirby and Dr. Sue Pickett, Deputy Director for Research & Evaluation, Advocates for Human Potential Inc., led a discussion of Committee's SOAP recommendations (see attached handouts). Committee Chairs briefly summarized their Committee's recommendations as part of this discussion.

- Gabriela Zapata-Alma, the Children and Families Committee Co-Chair, noted that the Committee focuses on the family as whole and thus several recommendations related to maternal morbidity, transition-age youth, prenatal care, etc., were submitted. The Committee will work with IDPH's Office of Women's Health to ensure that recommendations are aligned with their work, as well as the work of other state agencies in order to prevent redundancies in their recommendations.
- Ron Vlasaty, MAR Committee Chair, noted that the Committee chairs proposed the Hub & Spoke model as a unifying framework for the recommendations and to ensure that there is "no wrong door" for people to access and receive services and recovery supports. The Chairs welcome feedback on this recommendation. In regard to MAR Committee recommendations, it was noted that lack of funding is the biggest barrier residential treatment centers, jails, and other agencies face in adopting and providing MAR. It was suggested that the Committee prioritize recommendations regarding the development of alternative financing structures for MAR.
- OSE Committee recommendations address social equity and racial disparities. Two key recommendations are reviewing client demographic data to better address disparities in access to and receipt of MAR, and addressing structural racism via ongoing dialogues with people from racially and geographically diverse communities and people who use drugs on the root causes of treatment inequities. It was also noted that outreach efforts need to be expanded on the West and South sides of Chicago to reduce overdose deaths in these communities.
- Dr. Mike Nelson, Prescribing Practices Committee Chair, emphasized that the Hub & Spoke model creates ways to link treatment and recovery strategies implemented in the past three years. He noted that the MAR and Prescribing Practices Committees' joint recommendation

to increase initiation to buprenorphine in emergency departments (EDs) recognizes that the ED is an ideal setting for starting a person who has experienced an overdose on MAR. Many ED physicians are doing this (i.e., initiating buprenorphine) but this evidence-based practice is not mandated. It was also noted that hospital linkages to community-based care (i.e., warm handoffs) have been funded by IDHS/SUPR via federal State Opioid Response dollars and that these programs should continue. Dr. Nelson also noted that while several recommendations support increasing the number of DATA-waivered prescribers, the more innovative solution would be to join other states in efforts to remove the federal DATA-waiver mandate.

- Sherie Arriazola Martinez, Criminal Justice Populations Chair, noted that there is no universal facilitated access to MAR for individuals leaving criminal justice systems thus Committee recommendations focus on ensuring linkages to MAR and other resources to people leaving jails and prisons. She concurred with Dr. Nelson that it would be considered best practice to offer buprenorphine to patients leaving the ED in conjunction with warm handoffs to OTPs or local providers.
- Several Council members provided feedback on recommendations on naloxone prescribing. It was noted that provider education is needed to 1) encourage providers to co-prescribe naloxone with an opioid prescription and 2) encourage providers to discuss the importance of naloxone with their patients so that patients actually fill their naloxone prescriptions. It was also suggested that recommendations to make naloxone publicly available—especially in communities with high overdose rates—be included in the SOAP. Other suggestions included first responder/EMS leave-behind naloxone and hospital take-home naloxone.
- Next steps: Recommendations will be reviewed and prioritized by state agencies. The SC also will provide additional guidance on prioritizing recommendations to the Committees. We continue to work on our timeline of finalizing the 2020 SOAP and submitting it to the Governor's Office by the end of December. Please send feedback on the recommendations to Dr. Pickett at [spickett@ahpnet.com](mailto:spickett@ahpnet.com).

### **New Business**

- Sherie Arriazola Martinez announced that the Safer Foundation received DOJ funding to provide MAR to the Crossroads Adult Transitional Center and Lawndale Adult Transitional Center; the facilities help justice-involved individuals start jobs in their communities and obtain their GEDs prior to release. Both facilities will partner with UI Health to provide counseling, therapy and naloxone upon release. The project is anticipated to begin on April 1, 2021.

### **November Council Meeting**

The next Council meeting will be on November 16<sup>th</sup> from 1-3 pm. This will be a virtual meeting. The meeting agenda and information on how to connect to the meeting will be sent out to the Council closer to the meeting date. Minutes from prior meetings can be found at: <https://www.dhs.state.il.us/page.aspx?item=97186>.