Strategies and Updates of the Kentucky Opioid Response Effort (KORE) and the Statewide Opioid Stewardship Program KYSOS

2020 KHA Quality Conference

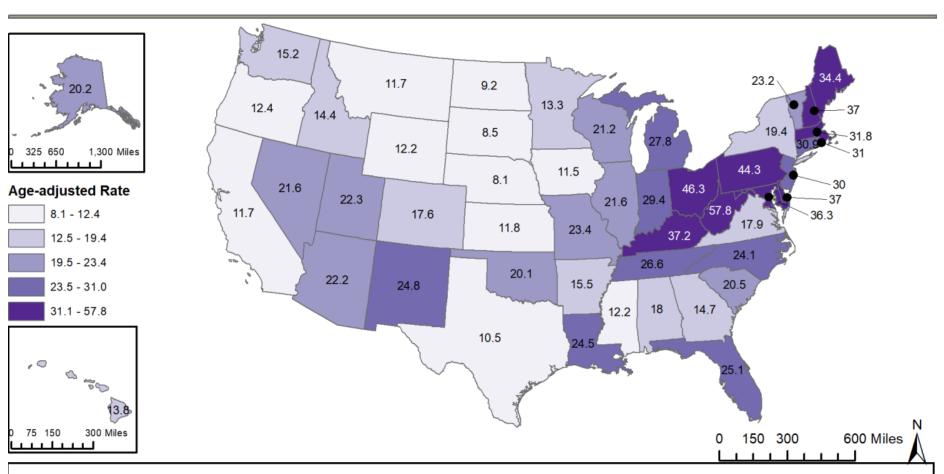




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Figure 1: Age-adjusted Drug Overdose Mortality Rates by State, 2017

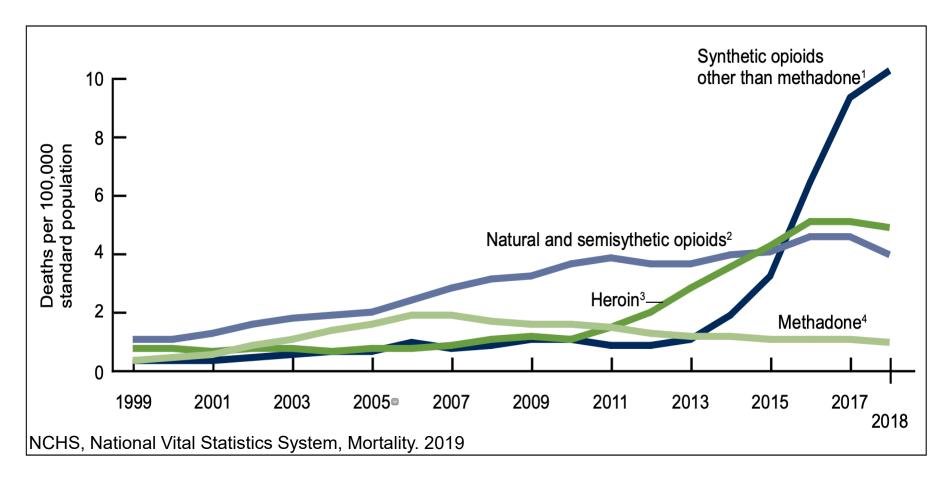


Produced by the Kentucky Injury Prevention and Research Center (KIPRC), a bona fide agent for the Kentucky Department for Public Health, Dec 2018. Data sources: Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2017 on CDC WONDER Online Database, released December, 2018. Data are from the Multiple Cause of Death Files, 1999-2017, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Accessed at http://wonder.cdc.gov/mcd-icd10.htmlon Dec, 2018. Data are provisional and subject to change.

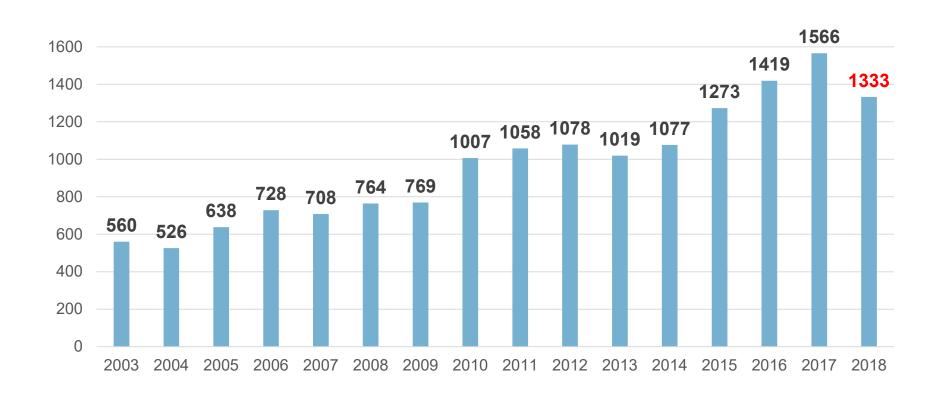




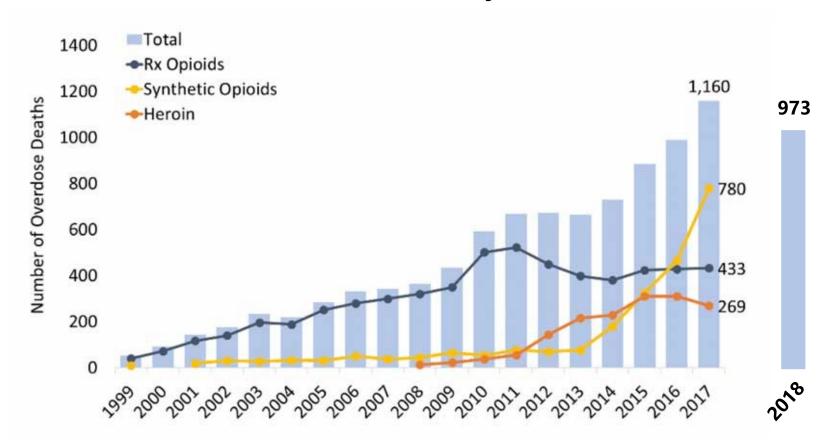
Age-adjusted drug overdose death rates involving opioids: United States, 1999 - 2018



KENTUCKY OVERDOSE DEATHS



Number of opioid-related overdose deaths in Kentucky



CDC, WONDER. 2018; KIPRC, 2019



AGE-ADJUSTED OVERDOSE DEATH RATE

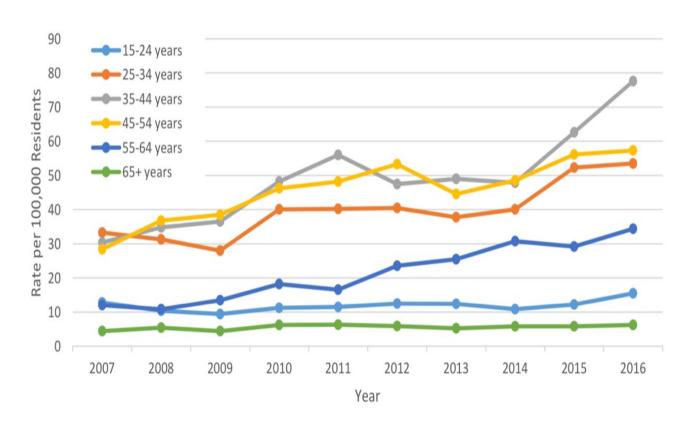
State	2017		2018		Percent
	Deaths	Rate	Deaths	Rate	change in rate
West Virginia	974	57.8	856	51.5	-10.90
Ohio	5,111	46.3	3,980	35.8	-22.46
Pennsylvania	5,388	44.3	4,415	36.1	-18.51
Washington, DC	310	44.0	254	3.54	-19.55
Kentucky	1,566	37.2	1,315	30.9	-16.94
New Hampshire	467	37.0	452	35.8	-3.24
Delaware	338	37.0	401	43.8	+18.38
Maryland	2,247	36.3	2,324	37.2	+2.48
Maine	424	34.4	345	27.9	-18.90
Massachusetts	2,168	31.8	2,241	32.8	+3.14

NCHS, National Vital Statistics System, Mortality. 2019





KY DRUG OVERDOSE DEATHS BY AGE

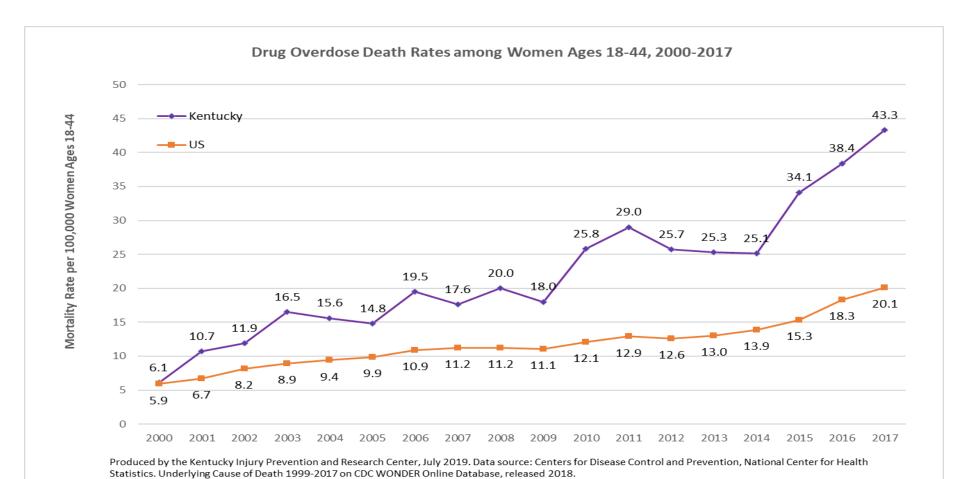


Data source: Drug Overdose Deaths among Kentucky Residents, 2000-2016. Produced by the Kentucky Injury Prevention Research Center, July 2016. Data are provisional and subject to change.





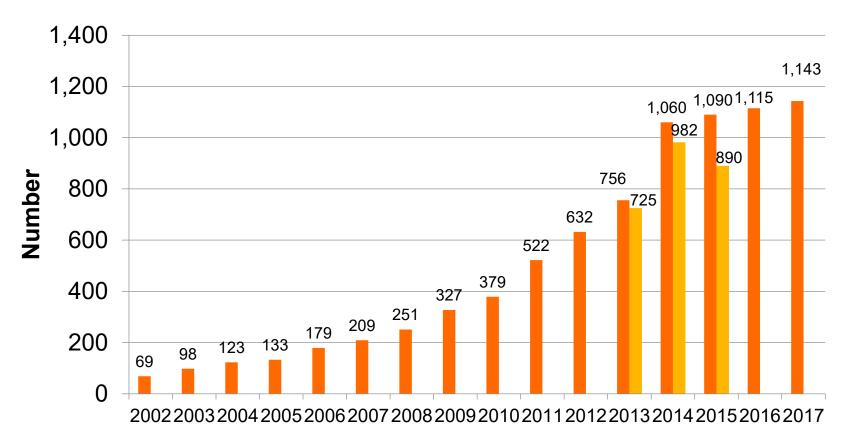
Fatal Drug Overdose Rate, Women Ages 18-44







NAS Hospitalizations of Kentucky Newborns



NAS Hospitalizations

NAS Paid by Medicaid

Produced by the Kentucky Injury Prevention and Research Center, May 2016.

Kentucky Inpatient Hospitalization Claims Files, Frankfort, KY, [2000-2015];

Cabinet for Health and Family Services, Office of Health Policy.

Data for 2010-2015 are provisional; therefore these results are subject to change.

NAS Case Definition: Any mention of ICD9CM diagnosis code 779.5 AND any mention

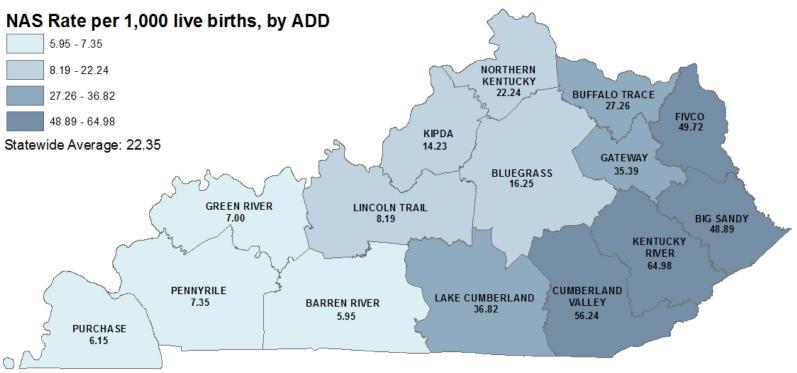
of ICD9CM diagnosis code V3x AND Kentucky resident AND patient's year of birth matches the reporting year

Medicaid data provided by the Department for Medicaid Services and include claims with a diagnosis

code of V30-V39 and 779.5 and for ICD10 P96.1 and Z38



NEONATAL ABSTINENCE SYNDROME, 2017

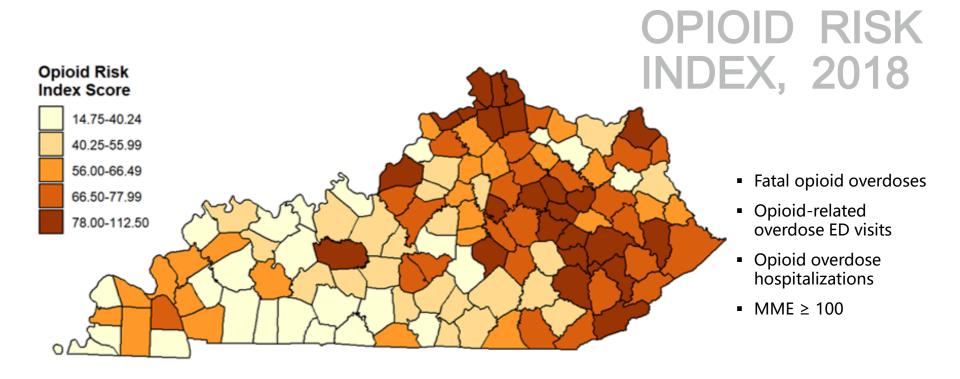


November 16, 2018

Data Source: Public Health Neonatal Abstinence Syndrome Reporting Registry; Kentucky Certificate of Live Birth, 2017

Shapefiles from Kentucky Geography Network

Prepared by Emily Ferrell, MPH CPH



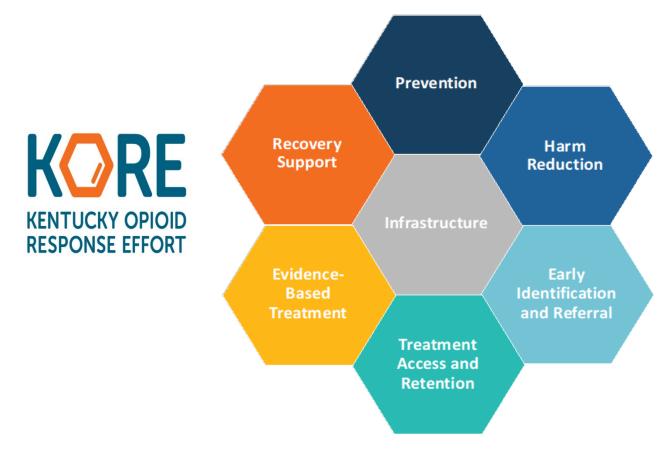
Data sources: This report was produced using Kentucky Inpatient and Outpatient Hospitalization Claims Files, Frankfort, KY; Cabinet for Health and Family Services, Office of Health Data and Analytics; Kentucky Death Certificate Database, Kentucky Office of Vital Statistics, Cabinet for Health and Family Services; Kentucky All Schedule Prescription Electronic Reporting, Kentucky Office of Inspector General, Cabinet for Health and Family Services. Data are provisional and subject to change.

Consequences

- Record number of children in out of home care
- Record rates of incarceration in state and local jails
- Highest number of children with one or more parents incarcerated in the country
- Highest rates of woman incarcerated in the country
- Record Healthcare costs for associated medical conditions
- Decreased life expectancy
- Economic impact on recruiting and retaining employers

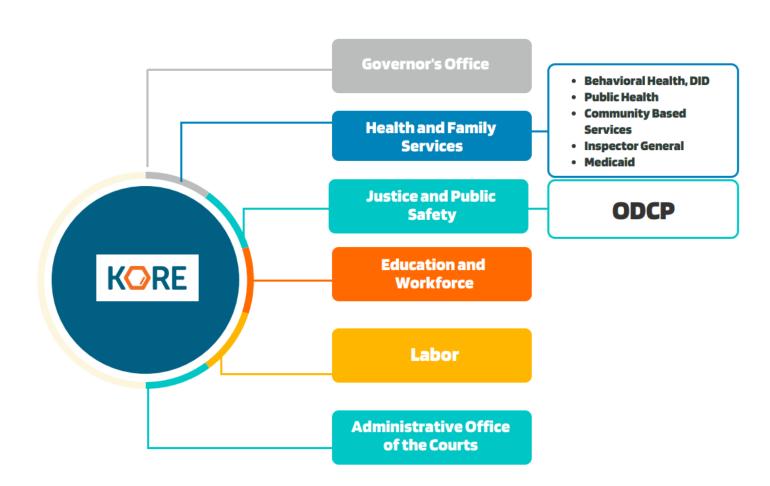


Kentucky Opioid Response Effort (KORE)



Guided by the Recovery-Oriented Systems of Care Framework, the purpose of KORE is to implement a comprehensive targeted response to Kentucky's opioid crisis by expanding access to a full continuum of high quality, evidencebased opioid prevention, treatment, recovery support services.

INTERAGENCY PARTNERS



Timeline and Funding

May 1, 2017 –

April 30, 2018

\$10.5M

STR Year 1

September 30, 2018

September 29, 2019

\$31.4M

SOR Year 1

May 1, 2019 – September 29

September 29, 2020

\$16M

SOR Supplement

STR Year 2

May 1, 2018 – April 30, 2019

\$10.5M

STR No Cost Extension

May 1, 2019 –

April 30, 2020

Carry Forward Funds

SOR Year 2

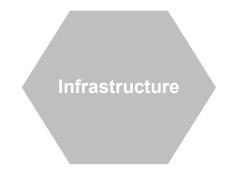
September 30, 2019 –

September 29, 2020

\$31.4M

INFRASTRUCTURE









INFRASTRUCTURE TARGETS







Specific Trainings

DATA Waiver trainings

Peer Support
Specialists
and
Supervisor
trainings

ASAM Multidimensional Assessment training

Standardized OUD training



HealthDoers

Recovery Management Checkups

ORN Faith-Based Community training

Communications



Justice System Trainings

Responsive Education to Support Treatment in Opioid Recovery Efforts (RESTORE)

- Summits in Supreme Court and and Court of Appeals Districts
- Topics include: Science of Addiction, Evidence-based Treatment, MOUD, Treatment Access, Trauma, Stigma, ROSC

Summer Summits (5)				
Juvenile Services	135			
Judges/Justices	48			
Circuit Clerks	10			
Specialty Courts	43			
Pretrial Services	24			
Other	67			
TOTAL	327			



Child Welfare Staff Training

Pre and post assessment of DCBS employees, foster parents, and community partners' perceptions of OUD/SUD

Subject matter expert review of existing DCBS OUD/SUD curriculum and recommendations for improvement

Development and delivery of a web-based training for tenured staff; In-person regional trainings

Assessment of DCBS employees, foster parents, and community partners' perceptions of OUD/SUD





PREVENTION

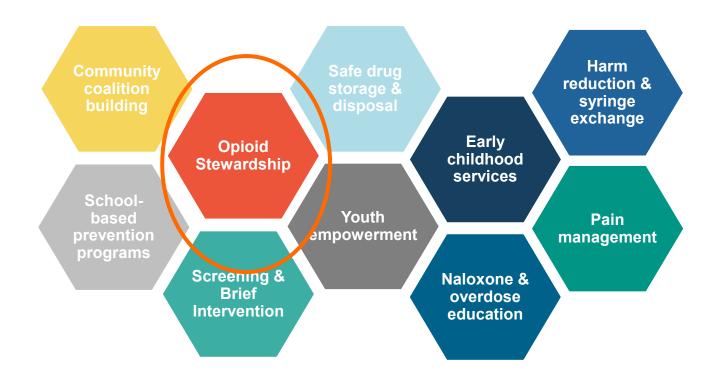








PREVENTION TARGETS























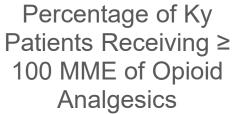
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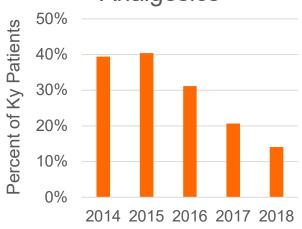




OPIOID STEWARDSHIP







 Collaboration with health care community, Kentucky Hospital Association



Training and hospital certification to improve



prescribing for opioid and non-opioid pain management



- 120 hospital commitments



School and Community-based Prevention

Community Aim - Engage and equip community coalitions and stakeholder agencies to become effectively involved in opioid prevention efforts

Youth Aim – Increase protective factors and decrease risk factors

Community

Community Coalition Toolkits and Training
Youth Mental Health First Aid
Collaboration Specialists

Youth

Sources of Strength Too Good for Drugs Positive Action

Youth Empowerment Specialists





Capacity Building

Collaboration Specialists

 Build collaboration at the community level to support the completion of the RPC work plan and meet goals of the State Opioid Response (SOR) project

Youth Empowerment

 Empower youth to support the completion of the Regional Prevention Center work plan and meet goals of the State Opioid Response (SOR) project

13/14 positions filled

14/14 positions filled



School Based Primary Prevention

Too Good for Drugs

- 150 Schools
- 41,000 Students

Sources of Strength

- 78 Schools
- 23,400 Students





Tertiary Prevention: Harm Reduction







NARCAN DISTRIBUTION AND TRAINING















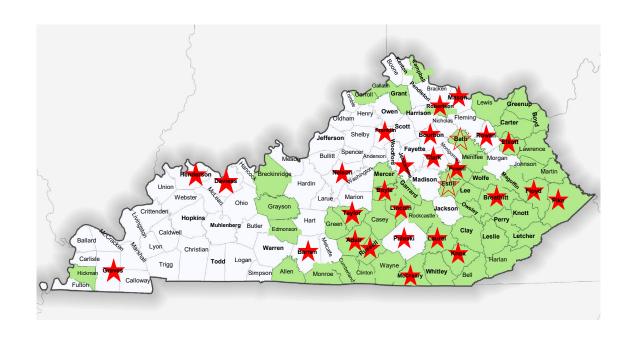


30,938 NARCAN KITS



SYRINGE SERVICE PROGRAM TARGETED EXPANSION

- Stigma reduction
- Recruitment
- Expanded hours of operation
- Staffing capacity
- Treatment linkage
- Peer support



Narcan Distribution and Overdose Prevention Training

 Kentucky Department for Public Health and Kentucky Pharmacists Association

Community Pharmacies Hospitals/Emergency Departments Treatment Programs Local Health Departments **HRSEPs Mobile Pharmacy Community Events**

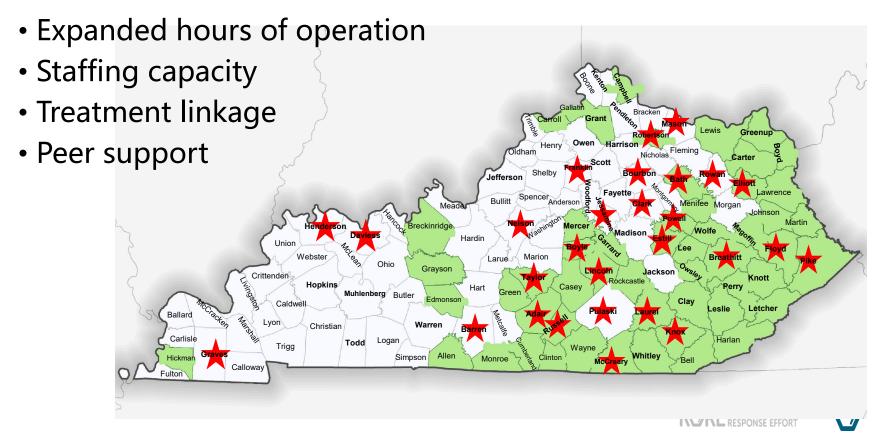




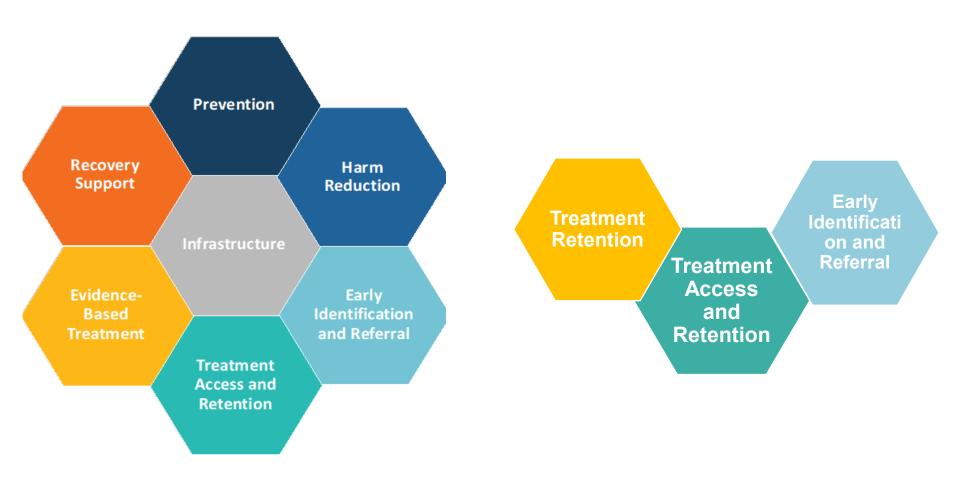
HRSEP Targeted Expansion

28 SSPs funded:

- Stigma reduction
- Recruitment



Treatment







TREATMENT TARGETS







Research Supports Medications

- Opioids profoundly disrupt the brain's reward system
- MOUD + psychosocial intervention is most effective
- MOUD is more effective than traditional treatment in:
 - Reducing opioid use, craving, and return to use
 - Reducing risk of overdose and mortality
 - Reducing criminal activity, disease rates
 - Improving treatment retention
- MOUD provides opportunities for people to have increased choice and collaboration





Bridge Clinics

- Conduct emergent assessments in ED
- Initiate MOUD, HCV and HIV testing
- On-site peer support and/or care coordination
- Overdose prevention training & naloxone
- Link to appropriate levels of ongoing care
 - University of Kentucky
 - University of Louisville
 - · St. Elizabeth
 - Appalachian Regional Healthcare (Hazard)
 - Baptist Health (Lexington & Corbin)
 - Norton Healthcare
 - Advent Health
 - Kings Daughters





BRIDGE CLINIC MODEL

increases rapid access to treatment

- Screen
- On-site engagement
- Hepatitis,

Identify and Connect

Treat in ED

- Brief assessment and buprenorphin e induction
- Connect to treatment and harm reduction
- Narcan kit and training

Refer and Reduce Harm

Follow-Up

- Peer support
- Recovery supports

Hospital Service Line Expansion

- Expansion to inpatient units
- Infectious disease treatment
- Outpatient clinic
- Telemedicine to rural communities
- Addiction Stabilization Recovery Center
 - Stabilization service, open 24/7, Nurse and PSS
 - Assessment, referral, treatment & recovery planning





TREATMENT IN FQHCS



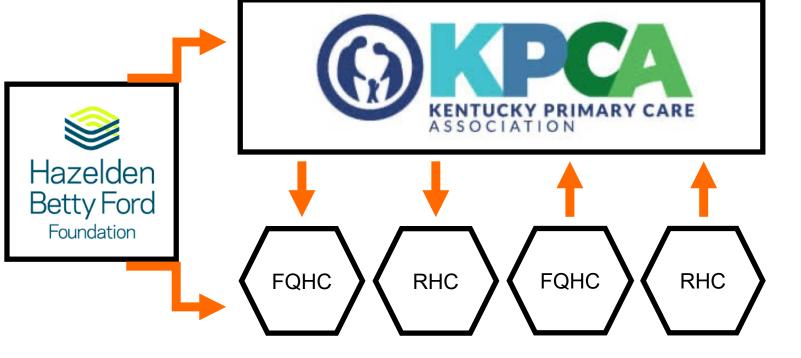












MOUD Access Expansion

Increase access to and utilization of FDA-approved medications for OUD

- Evidence-based models:
 - Office-based Opioid Treatment (OBOT)
 - Collaborative Opioid Prescribing
 - Hub and Spoke
 - One Stop Shop
 - Emergency Department Initiation of OBOT

Jails

Hospitals

Office-based
Opioid
Treatment
Programs

Treatment Providers

Primary Care Settings

Opioid Treatment Programs





Treatment & Methadone Reimbursement Programs

Objective: Increase rapid access to treatment for individuals who lack a payer source

- Eligible Programs:
 - Licensed AODE/BHSO residential programs
 - CMHCs with residential and/or IOP
 - Provide access to MOUD

- Eligible clients:
 - Diagnosed with an OUD
 - Income < 150% FPL
 - Ky resident
 - Lack a payer source





Community Pharmacy Care Delivery Model for Vivitrol

- Training for administration and management of Vivitrol within community pharmacies
- Implement practice model in four regions: Eastern KY, Northern KY, Lexington, Louisville

Community Pharmacies

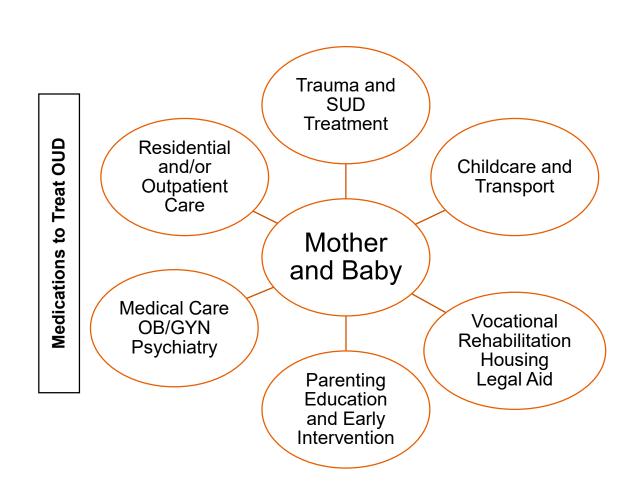
OUD Treatment Providers

Prison & Drug Court Officials



Integrated and Coordinated Care for Pregnant and Parenting Woman

- Plan of Safe Care Pilot Sites
- Chrysalis House
- University of Kentucky – PATHways
- Appalachian Regional Healthcare (Hazard)
- Centerstone and Norton Hospital
- St. Elizabeth Hospital – Baby Steps







Recovery









Peer Support

Telephonic Peer Support and Recovery Coaching

- Support for individuals in in early recovery
- Recovery meetings

Peer Support for Domestic Violence Survivors

- KY Coalition Against Domestic Violence
- Co-location of 10 PSS in shelters



Recovery Community Centers

Community-based, non-clinical setting that is safe, welcoming, peer-led, and supports all paths to recovery

RCC Services/Resources

- Peer Support
- Mutual aid groups
- Advocacy
- Linkage to housing support
- Job training and employment support
- Social activities

RCC Locations

- Centerstone (Jefferson)
- Four Rivers (McCracken)
- Kentucky River (Perry)
- NorthKey (Kenton+)
- Voices of Hope (Fayette)
- Volunteers of America (Clay)



Recovery Residence Expansion

- Increase the number of Level 1 Oxford Houses
- Increase Level 2 & 3 recovery houses supporting MOUD
- Adopt National Alliance for Recovery Residences quality standards and certification

Level 1	Level 2	Level 3	Level 4
Peer-Run	Monitored	Supervised	Service Provider
Alcohol & Illicit Drug Free			
Safe, Clean, & Dignified			
Peer Supportive Environment			
Accountability to Neighborhood, Ethics & National Standards			



Access to Recovery (ATR) Program

- Purpose: Reduce barriers to entering and and maintaining longlong-term recovery
- Aim: Increase recovery capital

ATR Pilot Locations

- Jefferson County
- Kenton County
- Letcher County







Mutual Aid Support Groups

- Nonprofessional support groups that include members who share the same problem, voluntarily support one another, and provide social, emotional and informational support for sustained health and wellness
- Smart Recovery Friends and Family
 - www.smartrecovery.org
- Double Trouble in Recovery
 - www.dtrky.org





Community Reentry Coordination

- Reintegration services for inmates with OUD or cooccurring OUD/SMI
- In-reach coordinators:
 - Targeted case management and linkages to supports
 - Collaborative treatment and services planning
 - Assist with MCO selection, Medicaid, SSI

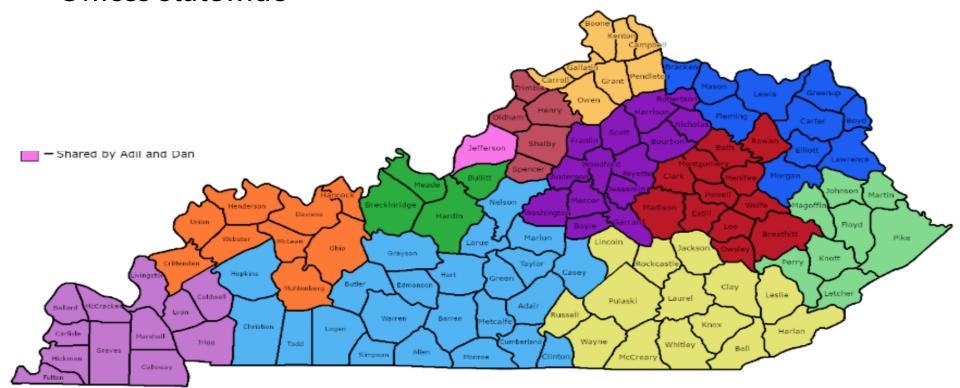
In-Reach Locations:

- KSR Complex
- Northpoint Training Center
- Western KY Correctional Complex
- Green River Correctional Complex
- Little Sandy Correctional Complex



Reentry Employment Program Administrators

- Department of Corrections
- Ten REPAs at Probation & Parole Offices statewide



Strategic Initiative for Transformational Employment (SITE)

 Support individuals in recovery seeking (re)employment and job training through Kentucky Comprehensive Career Centers

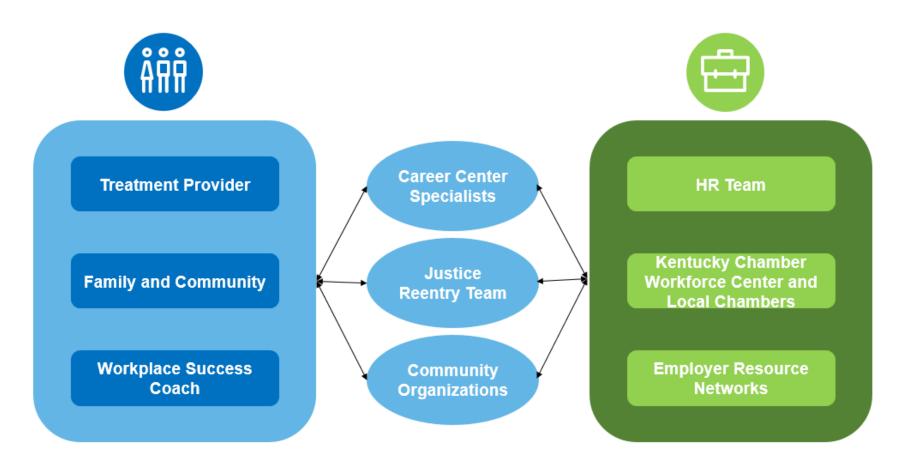
 Support individuals who enter employment to ensure they retain and succeed in their jobs

 Support businesses to implement policies for hiring and retaining employees recovering from OUD





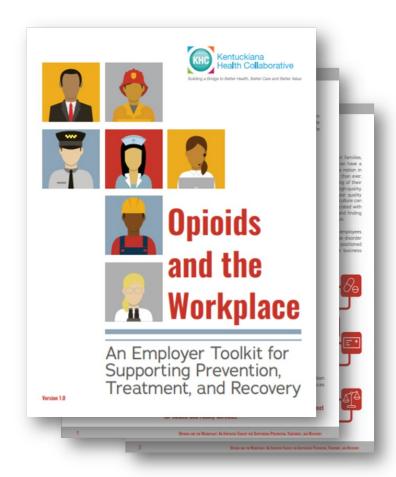
Strategic Initiative for Transformational Employment (SITE)





SITE: Employer Toolkit

- Guides employers' understanding of OUD in the workplace
- Provides best practice recommendations for prevention, treatment, and recovery support

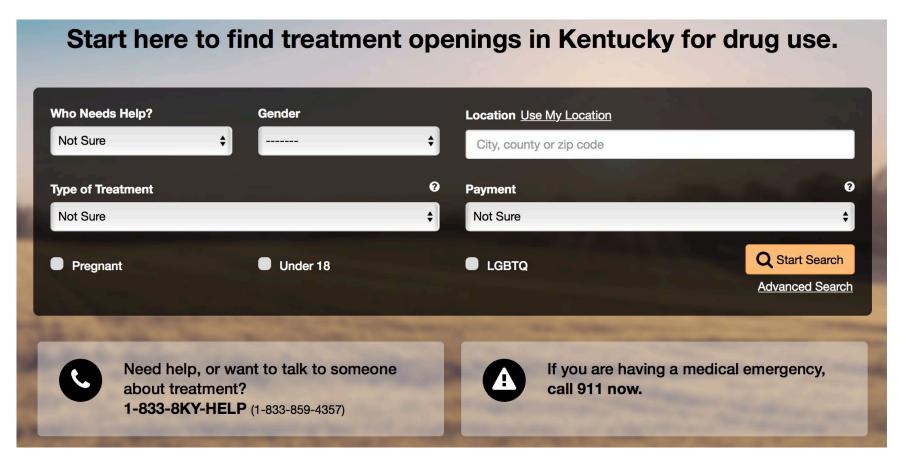


https://www.khcollaborative.org/employerhub/





Find Help Now Ky Treatment Locator



findhelpnowky.org





THANK YOU!

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www.chfs.ky.gov search "KORE"