Remarks, as Prepared for Kody Kinsley,
Deputy Secretary for Behavioral Health and Intellectual and Developmental Disabilities

2019 Opioid Misuse and Overdose Prevention Summit

Good Morning,

- Welcome to the 2019 Opioid Misuse & Overdose Prevention Summit. We are here today to learn from each other, and leverage our collective experience, expertise and passion to fight the opioid epidemic.

- We envision a healthier North Carolina that provides unfettered access to treatment for those struggling with substance use disorder and systems of care that provide access to the supports that drive health.
• We don’t just want people to recover. We want individuals, their families and their communities to recover and become healthy and resilient.

• Combatting the epidemic is a **top priority** for our state and for the Department of Health and Human Services. We work every day to engage, educate and energize North Carolina’s communities to battle the opioid epidemic and prevent opioid misuse and overdose.

• North Carolina has been hit hard by the epidemic. Five North Carolinians die every day from a drug overdose.

• Just yesterday, we saw early reports of five people overdosing on heroin in a span of 36 hours. Our public health team is actively monitoring this situation – and it’s a fresh reminder of how crucial it is for us to stay vigilant.

• The epidemic has devastated people, families and communities across our state.
• But there is GOOD NEWS. Substance Use Disorder is a chronic disease. Treatment Works. And people recover.

• Over the past two years our state has done a tremendous amount of work to increase access to the supports that help people recover.

• North Carolina has three state operated treatment centers, represented here at the Summit: Julian F. Keith in Black Mountain, serving the West; R.J. Blackley in Butner, serving central North Carolina; and Walter B. Jones Center in Greenville, serving the East.

• Our charge for these centers is to constantly innovate, to implement evidence-based practices and build treatment programs that meet the needs of North Carolinians, today.

• Each of these centers have started offering Medication Assisted Treatment (MAT).

• MAT is the GOLD STANDARD OF CARE for opioid and heroin use disorder.
• There is still a LOT of misinformation about MAT in our communities. You’ve heard it: “Why should I just replace one drug with another?”

• A close friend of mine, who is in school right now in NC on her journey to become a Licensed Clinical Addiction Specialist, was being taught at her internship that MAT is not okay.

• WELL, friends, THAT is NOT OKAY. And NC can do better. We must do better.

• STIGMA kills. And fake news about effective treatment is stigma run-a-muck.

• MAT is effective. The evidence is clear.

• Now, let me be clear. Substance Use Disorder is a whole-person issue. And many individuals struggle with poly-substance abuse and co-occurring mental illnesses. Our treatment strategies MUST treat the whole person.
• We must offer the full array of services and supports for ALL North Carolinians struggling with opioid or heroin use disorder to access treatment and truly recover – mind – body – family – community.

• Governor Cooper, who will be here with us today, launched the North Carolina Opioid Action Plan in 2017, and since then we’ve made lots of progress.

• More than 12,000 people have received treatment from the $54 million in federal funding we have secured thus far.

• In April, Governor Cooper announced North Carolina will receive an additional $12 million in federal grants to continue our fight against the opioid epidemic.

• But we have so much more work to do. Almost 90 percent of people don’t receive the substance use disorder treatment they need.
• We would never accept a treatment system that didn’t treat 90 percent of patients with hypertension, diabetes or any other chronic disease.

• We cannot accept that here.

CRIMINAL JUSTICE

• This is especially troubling for formerly incarcerated individuals who are 40 times more likely to die of an overdose in the two weeks post incarceration than anyone else.

• This is a very sad statistic – a short stint in prison or jail can turn into an accidental death. All because someone has a chronic disease and is not getting treatment.

• We are committed to developing treatment initiatives for those in the criminal justice system, including diversion to treatment programs, treatment in jail supports and re-entry programs.
• A few months ago, the Departments of Health and Human Services and Public Safety announced a collaborative pilot to fund treatment for individuals returning from incarceration to ensure they’ve started treatment and have linkages to continue treatment in their community.

• Just last week, we applied for another grant from the Bureau of Justice Assistance, for an additional $6.5 million, focused on treating those in jail and prison.

• We are finding every dollar we can, and we are putting those dollars to good use. Saving lives, expanding treatment and building the evidence-base for interventions that not only heal people, but are more cost-effective for our society overall.

INSURANCE

• But we have much further to go. Almost half of those who overdose and end up in an emergency room do not have health insurance.
• Every program we build with temporary grant dollars is just that – temporary.

• And convincing providers to expand their capacity with new buildings and new providers, without sustainable funding, is an uphill struggle.

• That’s where Medicaid Expansion would be a game-changer.

• Addiction is a chronic disease and requires long-term, stable support. We must build a sustainable infrastructure that meets the scale of the problem.

• Long-term, sustainable and affordable insurance is the only true fix.

AGENDA OVERVIEW

• Over the next two days, we will hear from a diverse collection of national, state, regional and local community leaders.
• I urge you to listen, ask questions and share your expertise. A key strategy of our Opioid Action Plan is a “coordinated infrastructure” and a value of our Department is Team Work.

• This epidemic is going to take the hard work of every single person in this room. And we can’t afford to NOT be coordinated. So please speak up. Engage. Be actively involved.

• So perhaps other then tweeting about what’s going on – perhaps give your cell phone a rest. I know your thumb joints and wrists will be grateful.

• Here is what you can expect:

• We have keynotes that highlight our focus on the three pillars of Prevention, Harm Reduction and Treatment.

• After Secretary Cohen and Governor Cooper, Admiral James “Sandy” Winnefeld, Jr. will share with us how losing his 19-year-old son, Jonathan, led him and his family to get
involved in stopping the epidemic together, providing a comprehensive response to the opioid epidemic.

- The lunch keynote, featuring Senators Jim Davis and Gladys Robinson, two amazing leaders in this work, is going to focus on legislative action to combat the opioid epidemic.

- Tomorrow, Attorney General Josh Stein will share the ‘More Powerful NC’ campaign with you, along with other Department of Justice initiatives to intervene and reduce the impact of this issue.

- Two especially insightful speakers after Attorney General Stein are Dr. Bertha Madras and Monique Tula.

- Dr. Madras is a drug abuse expert and professor of psychobiology at Harvard Medical School. She will delve into some of the major contributors, offer recommendations for reducing this deadly public health problem and help us find solutions for implementation challenges.
• Monique Tula is the executive director for the National Harm Reduction Coalition. Going along with one of the key areas we focus on with our Opioid Action Plan, Ms. Tula emphasizes how harm reduction is a pathway to responsibility. Stigma kills. Barriers to care aren't helping those we serve. People who use drugs need solutions that they can access and afford.

• We appreciate all these great minds coming together. We need multifaceted, multidisciplinary and community-wide approaches to overdose prevention and that starts here.

• Again, make sure you connect with each other. You will have the opportunity during the conference to explore disciplines, meet other leaders and work hands-on to find strategies and solutions for opioid misuse and overdose prevention that you can take home to your communities.

• Please, everyone, stay through the end of the day to be part of a special reception and networking activity to assemble
Naloxone Rescue kits. Who here has a Naloxone kit with them already?

- I want to highlight this reception because these kits save lives every day, and the ones assembled tonight will be distributed all over North Carolina to those who need it most – active drug users and their loved ones.

- Today and tomorrow, you’ll learn more about the Opioid Action Plan 2.0 that continues the goal of reducing expected opioid overdose deaths by 20 percent by 2021 and aims to identify impactful, feasible strategies to reduce opioid overdoses in North Carolina, and prevent the next wave of the epidemic.

- The fight continues and there is lots of work left to do. We are in this together. We couldn’t do it without your hard work every day. Thank you for being part of the solution.
INTRODUCTION

• Finally, I have the pleasure of introducing Secretary Mandy Cohen of the North Carolina Department of Health and Human Services.

• Dr. Mandy Cohen was appointed to the role of Secretary in January 2017 by Governor Roy Cooper. She and her team work tirelessly to improve the health, safety and well-being of all North Carolinians. Secretary Cohen and her team are focused on building a strong, efficient Medicaid program, improving early childhood health, safety and education and combatting the opioid crisis.

• Secretary Cohen is an internal medicine physician and has experience leading complex health organizations. Before coming to DHHS, she was the Chief Operating Officer and Chief of Staff at the Centers for Medicare and Medicaid Services.
• She brings a deep understanding of health care to the state and has been responsible for implementing policies for Medicare, Medicaid, the Children’s Health Insurance Program and the Federal Health Insurance Marketplace.

• The Secretary has been a leading force in addressing the opioid epidemic in North Carolina and has made prevention a tenant of her work. Thank you, Secretary Cohen, for your dedication to addressing the opioid epidemic in North Carolina.

• On a more personal note, I have the very distinct pleasure of working for and closely with Dr. Cohen. Watching her work – her passion – commitment – and drive for North Carolina is truly humbling.

• Friends, please join me in welcoming, Secretary Cohen.