National Opioid Crisis Management Congress

Addressing the Opioid Epidemic: A State’s Perspective

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2. Shift due to COVID-19 Pandemic
3. Recovery Priorities
The Opioid and Substance Use Action Plan broadens its focus to include polysubstance use and centers equity and lived experience.
1. Action Plan Progress

**Community**
Trained 300+ Community Partners to advance harm reduction strategies, and funded 31 local organizations to implement linkage to care strategies.

**Working With Providers**
Provided waiver training to 1200 prescribers and worked with 29 residency and advanced practice programs to incorporate it into their curriculum. Trained 4000+ providers on clinical issues relating to the opioid epidemic including safe prescribing. Worked with 29 other states to improve and expand the controlled substance reporting system to allow health record queries.

**Harm Prevention**
250,000 Doses of Naloxone distributed since 2019, and 40 Syringe Services Programs serving 57 countries and one Federally recognized tribe.

**Access and Awareness**
Launched multiple public education campaigns, and revamped the OAP dashboard to add local actions in monitoring OAP Progress. Over 21,000 people without insurance received treatment with federal funds.

**Justice Involved**
Funded 19 programs to connect justice-involved individuals to care, including a technical assistance manager. Funding to four Jail-based medication assisted treatment programs.
2. Resurgence of Overdoses during COVID-19

Overdose deaths and emergency department visits had declined in 2018 and plateaued in 2019.

An average of 9 North Carolinians died each day from a drug overdose in 2020. That number is a 40% increase from the previous year.

Technical Notes: Medication and drug poisoning, all intents;
Analysis by Injury Epidemiology and Surveillance Unit
2. What’s Driving the 40%?

In North Carolina, as in the United States as whole, deaths due to medication/drug overdoses have been steadily increasing since 1999, and the vast majority (92%) of these are unintentional.

Opioid Treatment Census During the Pandemic

Opioid Treatment Programs saw an increase in number of people served during the pandemic.

Increase in Stress and Reported Mental Health Symptoms

Lack of Access to Treatment and Care

Loss of Employment

Increased substance abuse accounts for between 9% and 26% of the decline in prime-age labor-force participation during the pandemic.

Increase in Alcohol Consumption

Limited Social and Family Interactions

During the pandemic, 1 in 3 North Carolinians reported symptoms of depression and/or anxiety.

Alcohol retail sales increased by 39% from last year based on the average from April, May, and June.
Invested $400,000 in naloxone to provide to local government agencies, providers, and other community-based organizations.

Funded 15 mobile health clinics that will assess clients and provide treatment, primary care and recovery support services in hard-to-reach areas.

Provided funding and support to community-based organizations to extend the reach of overdose prevention, harm reduction and substance use treatment.

Funded trainings for professionals working on initiatives like harm reduction, justice-involved linkages to care, and prescribing medications.

Monitoring progress on data dashboard that tracks state regional and county-level metrics and local actions.

In the first year, Hope4NCHelpline received over 9,000 total Calls with 10% referred for more intensive services.
3. Priorities

These priorities and our work across the department are grounded in **whole-person health**, driven by **equity**, and responsive to the lessons learned responding to the greatest health crisis in more than a generation.

**Behavioral Health & Resilience**

We need to offer services further upstream to build resiliency, invest in coordinated systems of care that **make mental health services easy to access** when and where they are needed and **reduce the stigma** around accessing these services.

**Child & Family Wellbeing**

We will work to ensure that North Carolina’s children grow up safe, healthy and thriving in nurturing and resilient families and communities. **Investing in families and children’s healthy development builds more resilient families, better educational outcomes and, in the long term, a stronger society.**

**Strong & Inclusive Workforce**

We will work to strengthen the **workforce that supports early learning, health and wellness by delivering services to North Carolina.** And we will take action to be an equitable workplace that lives its values and ensure that all people have the opportunity to be fully included members of their communities.

The **health insurance coverage gap** coupled with insufficient access to affordable care disproportionately impacts **Historically Marginalized Populations** who have also experienced worse outcomes than others under **COVID-19. Medicaid expansion would help close the health insurance coverage gap.**
3. Substance Use Recovery System

An estimated 89% of people don’t receive the substance use disorder treatment they need.

DHHS supports a comprehensive system of care to enable individuals to live in communities of their choosing. Services include:

- Basic Outpatient Services
- Mobile and Walk-in Crisis Services
- Residential and Inpatient Treatment Services
- Opioid/medication Assisted Treatment
- Recovery Supported Housing Services
- Peer Support
- Work First Services

87 Opioid Treatment Programs in North Carolina

After 6-month participation in the programs:
- Employment increased from 38.3% to 58.2%
- ED visits decreased from 16.3% to 9%

State Opioid Response Grant

- Fund priority treatment and support services for individuals without insurance.
- Fund priority treatment and support services not covered by Medicaid, Medicare or private insurance for low-income individuals.
- Fund primary prevention activities and services.
- Collect data to determine the ongoing effectiveness of support services and plan new services.
In North Carolina, the uninsurance rate is around 13%.

In 2020, 1 in 3 (33%) emergency department visits for a medication/drug overdose was self-pay. As of May 2022, the number has increased to 38%.

Disproportionate amount of ED visits for Med/Drug Overdoses are uninsured North Carolinians.

Expanding Medicaid would provide insurance to over 500,000 North Carolinians.
3. Justice-Involved Populations

Serious mental illness affects an estimated **14.5% of men** and **31% of women** in jails.

- **60%** reported symptoms of a mental disorder in the past year
- **68%** have a history of misusing drugs, alcohol, or both
- **83%** did not receive mental healthcare after admission
Compared to other North Carolinians, within the first 2 weeks post incarceration, formerly incarcerated people are 40 times more likely to die from an opioid overdose.

**STRATEGY 1: Early Diversion/Alternatives to Incarceration**
*Goal:* To reduce incarceration and increase access to mental health and substance use disorder treatment through promoting early diversion and alternatives to incarceration.

**STRATEGY 2: Treatment During Incarceration**
*Goal:* To close the treatment gap in incarcerated settings. Through treatment during incarceration, access to care is increased, equity in healthcare is addressed, and re-entry success is increased.

**STRATEGY 3: Re-entry Services**
*Goal:* To increase potential for productive re-entry into society and decrease likelihood of recidivism through providing linkages to care and needed recovery supports upon re-entry from jail/prison.

**STRATEGY 4: Invest in Behavioral Health Care and Justice System Reforms**
*Goal:* To address potential system infrastructure/process issues to increase access to needed care and increase availability of services system-wide.
3. Justice Involved Populations

Crisis Intervention Team (CIT) Training

74% of NC counties have received CIT training

1,417 of non-law enforcement officers were trained to become CIT certified by the end of 2021.

64% of all law enforcement officials trained in CIT

Progress of Combination Diversion and Re-entry Programs

65% of programs have met or exceeded target for serving marginalized communities.

100% of programs operational

13,016 contacts with existing and potential service users

2,412 unique individuals served

1,254 Naloxone kits distributed

Progress for Justice Populations

170 Individuals continued Medication Assisted Treatment post release

804 The number of individuals diverted to drug education programs.

500 Number of Justice Involved People who received treatment advice and overdose prevention information

120 People were referred to community-based recovery services