Governor's Advisory Board on Health Opioid Subcommittee

CURRENT OPIOID INITIATIVES

Centers of Excellence

There are currently 45 Centers of Excellence (COEs) across the commonwealth. They are existing behavioral and physical health providers that are currently providing addiction treatment-related services. The COE designation will enable these providers to expand their services to:

- treat the whole person not only the addiction, but any underlying physical and mental/behavioral health issues that may be a driver of the addiction;
- improve initiation and retention in the comprehensive addiction treatment continuum from clinical assessment throughout the appropriate levels of care through a communitybased care management team;
- help patients navigate the comprehensive healthcare system (e.g., physical and behavioral health) and provide the necessary quality care within the COE network;
- provide other social support services; and
- expand access to medication-assisted treatment, including buprenorphine, methadone, and naltrexone.

Each COE is expected to initiate and engage 250 to 300 new patients over the next year, and detailed quality metrics and outcome measures will be tracked. Anyone in need of opioid addiction treatment services can receive them through a COE.

Expanded access to medication-assisted treatment (MAT)

Through a \$3 million grant from the Agency for Healthcare Research and Quality (AHRQ), DHS is working to increase the number of primary care physicians delivering high-quality medication-assisted treatment in 23 rural counties in Pennsylvania. The grant will educate and train 24 primary care provider practices to deliver high-quality opioid use disorder treatment, focusing on implementation within primary care, facilitating coordination among the broader health system and community-based resources, providing access to clinical specialists, and linking participating practices with hubs that can guide them toward a sustainable MAT program.

Prescription Drug Monitoring Program

The Prescription Drug Monitoring Program (PDMP) is a statewide program that collects information about controlled substance prescription drugs that are dispensed to patients within the state. The Office of the Attorney General (OAG) operated the former PDMP. Previously, the PDMP required the reporting of Schedule II controlled substances only. The legislature passed



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a new law, Act 191 of 2014, which requires monitoring Schedule II through Schedule V controlled substances. The Pennsylvania Department of Health is responsible for the development and the day-to-day operation of the new system.

The purpose of the PDMP established by Act 191 of 2014 is:

- To be used as a tool to increase the quality of patient care by giving prescribers and dispensers access to a patient's controlled substance prescription medication history, which will alert medical professionals to potential dangers for purposes of making treatment determinations; and
- To aid regulatory and law enforcement agencies in the detection and prevention of fraud, drug abuse and the criminal diversion of controlled substances.

As of Nov. 2, 2016, dispensers are required by law to collect and submit information to the PDMP about each dispensing of a controlled substance prescription drug within 24 hours. The PDMP stores the information in a secure database and makes it available to healthcare professionals and others as authorized by law. SB1202, signed by Gov. Wolf on Nov. 2, 2016, amends Act 191 by requiring prescribers to check the database every time they prescribe an opioid or benzodiazepine.

Prescribing guidelines

The Administration has developed seven sets of prescribing guidelines, which are intended to provide prescribers and dispensers with recommendations for safe opioid prescribing and alternatives to opioids. The seven sets include:

- Emergency Department Pain Treatment Guidelines
- Geriatric Pain: Opioid Use and Safe Prescribing
- Guidelines on the Use of Opioids to Treat Chronic Noncancer Pain
- Guidelines on the Use of Opioids in Dental Practice
- Obstetrics and Gynecology Pain Treatment
- Opioid Dispensing Guidelines
- Use of Addiction Treatment Medications in the Treatment of Pregnant Patients with Opioid Use Disorder

Prescription drug take-back program

There are nearly 550 prescription drug take-back boxes across the commonwealth. These are safe, secure locations where Pennsylvanians can dispose of unwanted and unused



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medications, including abusable prescriptions such as opioids and benzodiazepines. Prescription drugs dropped off at take-back boxes are eventually collected and destroyed. Since 2015, nearly 200,000 pounds of prescription drugs have been destroyed.

HB 1737, signed by Gov. Wolf on Nov. 2, 2016, allows all federal, state and local law enforcement entities, hospitals, assisted-living facilities, home health care agencies, long-term care nursing facilities, hospice, and commonwealth licensed pharmacies to serve as drop-off locations for any extra, unwanted, or expired prescription drugs or over-the-counter pharmaceutical products.

Healthcare practitioners education

The Departments of Health and Drug and Alcohol Programs in partnership with the Pennsylvania Medical Society (PMS) have developed five Continuing Medical Education programs for healthcare providers: prescribing practices, naloxone, referral to treatment, and two focused on the prescription drug monitoring program. Descriptions of each of the programs can be found at https://www.pamedsoc.org/learn-lead/topics/medications-pain-management-opioids/OpioidsCrisisCME.

A sixth program focused on opioid alternatives in pain management is in development.

Prevention efforts

The commonwealth's substance abuse prevention programs and strategies are carried out in conjunction with Single County Authorities (SCAs) (county-level drug and alcohol administrators) and their contracted providers. As a result, there is flexibility in allowing SCAs to tailor service delivery based on identified needs and risk and protective factors in their communities. Prevention strategies are implemented in collaboration with local and state partners. Partnerships with other community agencies providing prevention services are also key to overseeing a comprehensive prevention plan. The administration supports proven prevention methodologies, which are based on research, local innovation and other proven strategies within the substance abuse prevention field.

Life Skills Training (LST) is one example of an evidence-based program at work in the state. Through support from Pennsylvania's Evidence-based Prevention and Intervention Support Center and others, free training, supplies and technical support, including covering the cost of substitute teachers while teachers are being trained on LST, has been provided in the past to any Pennsylvania school district that wanted it. More than 60 school districts participated statewide in the grant in 2015.

