ADDRESSING THE OPIOID CRISIS

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OVERDOSE FATALITIES

2,599

2,354

2,684 2020 YTD

*2020 data is preliminary; all years include all drug overdoses

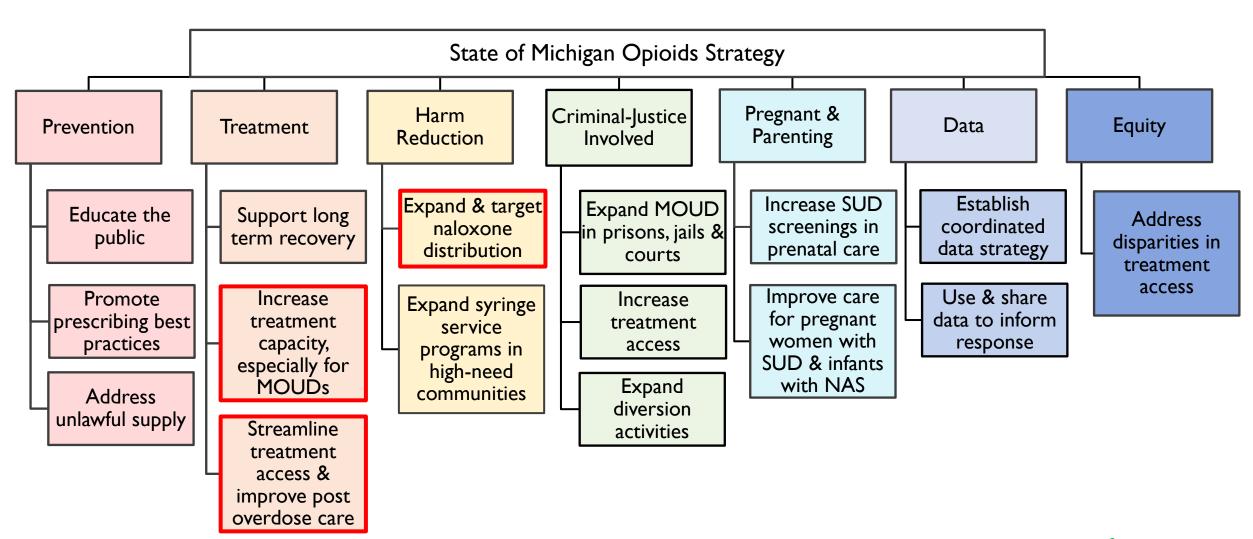


OVERDOSE FATALITIES

- In 2020, MI saw increases in drug overdose deaths across demographic groups and across different regions of the state, based on preliminary data:
 - Males (+17%)
 - Michiganders 0-24 years-old (+18%)
 - Hispanic Michigan residents (+50.5%)*
 - Upper Peninsula (+53.8%) and Northwest Lower Peninsula (+53.5%)

^{*}Preliminary 2020 death data has a higher percentage of unknown race and ethnicity data than finalized 2019 data; this may impact estimates of drug overdose death increases in 2020 compared to 2019.







LEGISLATIVE PACKAGE TO ADDRESS THE OPIOID CRISIS

- MDHHS and the Michigan Opioids Task Force are championing a two-bill package to fight the opioid epidemic:
 - I. Improve post-overdose connections to treatment and MAT in emergency departments (HB 5163)
 - 2. Increase access to naloxone (HB 5166)



HB 5163 : IMPROVE OVERDOSE CARE

Background

- 5.5% of nonfatal overdoses treated in emergency departments die within one year *
- Hospitals typically treat and release nonfatal opioid overdose patients
- Standard of care is initiating medication assisted treatment (MAT), specifically buprenorphine, in emergency department and warm hand-off to community-based treatment
- MDHHS in partnership with Michigan Opioid Partnership have launched ED-based MAT in 19 hospitals

Weiner, SG., Baker, O. et al. One-Year Mortality of Patients After Emergency Department Treatment for Nonfatal Opioid Overdose. Ann. Of Emergency Med. 2020.



HB 5163 : IMPROVE OVERDOSE CARE

Overview and Impact

- HB 5163 creates grant program to provide hospitals funding to stand up ED-based MAT programming
- In all, an ED-based MAT program requires:
 - I. Institutionalized overdose care protocol
 - 2. Capacity to initiate buprenorphine, if patient desires
 - 3. Capacity to facilitate connection to community-based care
- All hospitals that treat 50+ overdoses annually are eligible
- Partners MOP and MHA providing technical assistance to hospitals developing overdose protocols
- Grant program funded through federal discretionary grants, no impact on state general fund
- ED-based access to MAT will reduce overdose fatalities and support providers to connect individuals to treatment



HB 5166: EXPAND NALOXONE ACCESS

Background

- 2016 legislation created naloxone standing order issued by MDHHS Chief Medical Executive
- Current standing order allows pharmacies to dispense without unique prescription
 - 55% of pharmacies participate
 - 21,427 kits dispensed since 2018
- HB 5166 expands naloxone standing order to allow community-based organizations to purchase naloxone without needing a medical director



HB 5166: EXPAND NALOXONE ACCESS

Overview and Impact

- Reduces cost for community-based organizations to access naloxone
- Expands naloxone access to organizations that reach individuals at the highest risk of overdose
- Reduces overdose fatalities
- No impact to state general fund

