

Iowa Department of Public Health  
Division of Behavioral Health  
Opioid Update for Wednesday, April 18, 2018

The Iowa Department of Public Health (IDPH) offers the Opioid Update to share information about opioid use and Iowa's efforts to address the national opioid epidemic. Please feel free to submit topics to Julie Jones at [julie.jones@idph.iowa.gov](mailto:julie.jones@idph.iowa.gov).

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**Department Efforts**

**A Look at Iowa's Substance Use Disorder Treatment Services**

Through funding provided by a combination of State appropriations and the Federal (SAMHSA) Substance Abuse Prevention and Treatment Block Grant, Iowa has a limited provider network of 23 "IDPH-Funded" substance use disorder (SUD) treatment providers, offering subsidized treatment services to financially eligible residents of all 99 counties. Services available range from Early Intervention and Outpatient Treatment, to Residential Treatment and Halfway House services. Along with this funded provider network, IDPH licenses nearly 100 additional SUD programs, offering a similar range of services. Some facts about available SUD services:

- Iowa has **21** residential treatment providers with a combined **669** beds.
- In 2017, Iowa SUD treatment providers served more than **45,000** individuals.
- Another **30,000** Iowans received Early Intervention services from the IDPH-funded provider network in 2017.

Specific to the opioid epidemic, the majority of Iowa's treatment programs have expanded their existing services or introduced new ways to treat opioid use disorders with medications. Through opportunities such as the Medication Assisted Treatment – Prescription Drug and Opioid Addiction (MAT-PDOA) grant and the State Targeted Response (STR) grant, IDPH has been able to assist providers in their efforts. Some examples of progress in the state include:

- As part of the STR grant, **16** of the **23** IDPH-Funded providers have established plans to enhance or expand their treatment services to include MAT for opioid use disorders.
- The number of practitioners in Iowa who are eligible to prescribe Buprenorphine for MAT increased from **31** in 2015, to **84** so far in 2018.
- Through use of Medication Units, providers like **UCS Healthcare** (Des Moines) are expanding availability of MAT services to areas of the state in need.
- Organizations like **SATUCI** (Marshalltown) are partnering with their local Federally Qualified Health Center and correctional facility to improve access to MAT for people re-entering their communities after incarceration.
- **Prairie Ridge Integrated Behavioral Healthcare** (Mason City) provides both Buprenorphine and Naltrexone as MAT options by using telehealth to make MAT more accessible to rural communities.

For assistance in locating treatment services in your area, visit the Your Life Iowa webpage at [YourLifelowa.org](http://YourLifelowa.org) or call **855-581-8111**.

## **Iowa News**

### **Iowa Board of Pharmacy Changes PMP Reporting Requirements**

Effective May 16, 2018, dispensers will be required to report to the Iowa Prescription Monitoring Program (PMP) *no later than the next business day following dispensing*, pursuant to 657 Iowa Administrative Code subrule 37.3(3). The Board adopted the change at its March 14, 2018 regular meeting. The change in reporting frequency will offer providers and pharmacists more timely information when using this data in their prescribing and dispensing decision-making.

For more information about the change in reporting frequency, contact Jennifer Tiffany at [jennifer.tiffany@iowa.gov](mailto:jennifer.tiffany@iowa.gov).

## **Opioid News**

### **U.S. Surgeon General Releases Public Health Advisory**

U.S. Surgeon General Jerome M. Adams, M.D., M.P.H., released a public health advisory to urge more Americans to carry the potentially lifesaving medication, Naloxone, that can reverse the effects of an opioid overdose. The medication is already carried by many first responders, such as EMTs and police officers.

The Surgeon General is now recommending that more individuals, including family, friends and those who are personally at risk for an opioid overdose, also keep the drug on hand. Surgeon General Adams went on to say, "It is time to make sure more people have access to this lifesaving medication, because 77 percent of opioid overdose deaths occur outside of a medical setting and more than half occur at home."

An estimated 2.1 million people in the U.S. struggle with an opioid use disorder. Rates of opioid overdose deaths are rapidly increasing. Between 2010 and 2016, the number of opioid overdose deaths in the U.S. more than doubled, from 21,000 to more than 42,000, with the sharpest increase occurring for deaths related to illicitly made fentanyl and fentanyl analogs (synthetic opioids).

To read the entire press release, click on the following link: [Surgeon General](#).

### **SAMHSA Announces Grant Availability for FQHCs, OTPs and Buprenorphine Waivered Prescribers to Improve Access to Overdose Treatment**

SAMHSA is accepting applications for Improving Access to Overdose Treatment (Short Title: OD Treatment Access) grants totaling up to \$4.7 million over the next five years.

SAMHSA will award OD Treatment Access funds to Federally Qualified Health Centers (FQHC), Opioid Treatment Programs (OTP), or practitioners who have a waiver to prescribe Buprenorphine to expand access to FDA-approved drugs or devices for emergency treatment of known or suspected opioid overdose. Grant recipients will partner with other prescribers at the community level to develop best practices for prescribing and co-prescribing FDA-approved overdose reversal drugs. After developing best practices, grant recipients will train other prescribers in key community sectors, as well as individuals who support persons at high risk for overdose.

SAMHSA expects to fund up to 5 grantees up to \$200,000 per year for up to five years. To learn more about this funding opportunity, click on the following link: [SAMHSA](#).