

State Targeted Response to the Opioid Crisis Grants  
Short Title: Opioid STR  
Overview Document  
March 1, 2017

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**Washington State Allocation:** \$11,790,256 per year/Two year grant. Actual amounts subject to change pending SMAHSA grant approval.

- Administrative/Infrastructure \$589,513
- Primary and Secondary Prevention \$2,155,768
- Treatment/Recovery Expansion \$9,044,975
- Total amount for program development \$11,200,743

**Prevention**—\$2,155,768

**1. Prescriber/Provider Education (\$80,000)**

Contract with Washington State Labor and Industries (L&I) to organize and host two full-day symposium events for Washington State prescribers and health care providers who commonly treat youth with athletic injuries, and acute pain to focus on opioid prescribing practices and guidelines.

**2. UW TelePain (\$40,619)**

Provide partial funding to the University of Washington (UW) for a weekly TelePain program that provides access to a multidisciplinary panel of experts that provide didactic teaching and case consultation support to primary care providers to reduce overdose related deaths by improving the knowledge and prescribing practices of primary care providers.

**3. Public Education Campaign (\$868,149)**

Work with the DSHS Communications Office, and additional media vendors as needed to design, test and disseminate various public education (cable, radio, newsprint, and social media) messages that promote public education with tribes to meet their community needs.

**4. Safe Storage Curricula and Training (\$20,000)**

Innovative pilot project to integrate prescription drug misuse and abuse prevention education with existing state services that parents and caregivers receive. This project will engage state agencies to submit project proposals up to \$5,000 to establish internal capacity to provide prescription misuse and abuse prevention education and messaging to clients in the long-term.

**5. Prevention Workforce Enhancements (\$60,000)**

Enhance funding support to Annual Washington State Prevention Summit and Spring Youth Forum. This support will increase the availability of educational opportunities for youth and

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prevention professionals (and related fields) by providing presentations and workshops geared toward opiate misuse and abuse prevention.

#### **6. Community Prevention and Wellness Initiative (CPWI) Expansion (\$752,000)**

Using an evidenced based school and community process DBHR will develop CPWI in five (5) high-need communities to support local strategic planning and decision-making to focus on addressing local needs by implementation of evidence-based strategies and programs, as well as, initiating educational and informational community events to increase community awareness about prescription drug and opioid misuse and abuse.

#### **7. Analysis of Evidence-Based Practices (\$35,000)**

Contract with Washington State University to conduct analysis of current selection of evidence-based practice with outcomes in the most salient factors related to youth misuse and abuse of prescriptions drugs to include opiates to be used in implementation of prevention services.

#### **8. Community Enhancement Grants (\$300,000)**

Utilize application process to fund services to 10-15 communities in Washington State to implement evidence-based programs and drug take back and educational strategies over the course of one-year with the goal of reducing or preventing prescription medicine and opiate misuse and abuse.

### **Treatment—\$9,044,975**

#### **1. Hub and Spoke (\$4,995,951)**

DBHR will expand access for statewide access to Medication Assisted Treatment (MAT) and reduce unmet need by developing and implementing a six (6) hub and spoke model. Hubs are regional centers serving a defined geographical area that will support spokes. Hubs will be responsible for ensuring that at least two of the three Federal Drug Administration approved MAT are available. Spokes (five per hub) are facilities that will provide behavioral health treatment and/or primary healthcare services, wrap around services, and referrals to patients referred to them by the hub.

#### **2. Mobile OTP Van (\$400,000)**

Funding will be provided to Evergreen Treatment Services to purchase, customize, and deploy two mobile vans for Opioid treatment, one will be targeted in rural communities and the other will be used to expand services in urban areas.

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#### **3. Low-Barrier Buprenorphine Pilot (\$130,000)**

WA-Opioid STR together with ADAI will develop a low-barrier buprenorphine model to induce and stabilize highly vulnerable people with OUD on buprenorphine in a community based setting. People will be provided buprenorphine quickly, typically within 1-48 hours, then will receive flexible dosing/prescribing so that they are able to stabilize over 30-60 days. They will be provided ongoing support of a nurse care manager and transitioned to maintenance at a community based health clinic.

#### **4. PathFinder Peer Project (\$1,660,000)**

PathFinder Peer Project will build on the already established DBHR Projects for Assistance in Transition from Homelessness (PATH) program to provide SUD peers recovery support in two environments, emergency rooms and homeless encampments. The project will link the individuals to needed MAT services and assist in navigating systems and addressing barriers to independence and recovery.

#### **5. Tribal Treatment (\$275,000)**

WA-Opioid STR funding will be used to add treatment training tracks to currently established tribal conferences, provide funding for tribal participants to attend the conferences. Funding will also be used to create and distribute a media campaigns for tribes to build awareness related to MAT/OUD treatment options for Native Americans.

#### **6. Treatment Payment Assistance (\$242,524)**

Each of the 10 Regional Service Areas will receive funding to off-set the cost of providing treatment services to opioid use disorder patients who have financial barriers to treatment access. This funding is intended to offset deductible and co-pays for patients seeking treatment for OUD services but are unable to meet co-pay requirements.

#### **7. OUD Treatment Decision Re-entry Services & COORP (\$690,500)**

WA-Opioid STR together with the Department of Corrections (DOC) will develop and operate two programs. The reentry work-release and violator programs will be located in five communities across Washington State and provide re-entry services for discharging work-release and parole violators who have been identified as having OUD. The second program; Care for Offenders with OUD Releasing from Prison (COORP) will identify incarcerated individuals with OUD, expected to be released, and connect individuals to MAT services in the county of their release, and expedite their enrollment in a Medicaid health plan.

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#### **8. Bridge to Recovery (JRA) (\$201,000)**

Develop an evidenced-based Juvenile Rehabilitation model that reduces substance abuse disorders, increases education and employment opportunities for youth and addresses systemic barriers that perpetuate the cycle, and implement ACRA reentry transition activities that link youth to mainstream services.

#### **9. Naloxone Distribution (\$200,000)**

WA-Opioid STR funding will provide naloxone to vulnerable and underserved populations in partnership with ADAI. This program will help meet the need by providing naloxone to places at both high relative risk (in terms of the local opioid overdose mortality rate) and high absolute risk (in terms of the total number of fatal overdoses and estimated heroin using population).

#### **10. Prescription Monitoring Program (\$250,000)**

WA-Opioid STR funding together with the Department of Health (DOH) will support PMP staffing in creating prescriber feedback reports to assist individual providers and provider groups in reviewing their prescribing practices. PMP data will also be provided to DBHR prevention data as an integral part of the developing data books in the development of the CPWI sites and other local substance use disorder planning efforts.