

The Opioid Crisis in Colorado: Latest Developments and Responses

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November 27, 2018



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Objectives

- Describe the scope and impact of the opioid crisis in the U.S. and Colorado
- Introduce you to the Consortium and give examples of how we are working to address the problem
- Highlight current solutions being applied effectively here in Colorado, particularly with local (county) collaborations



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What are the current data?



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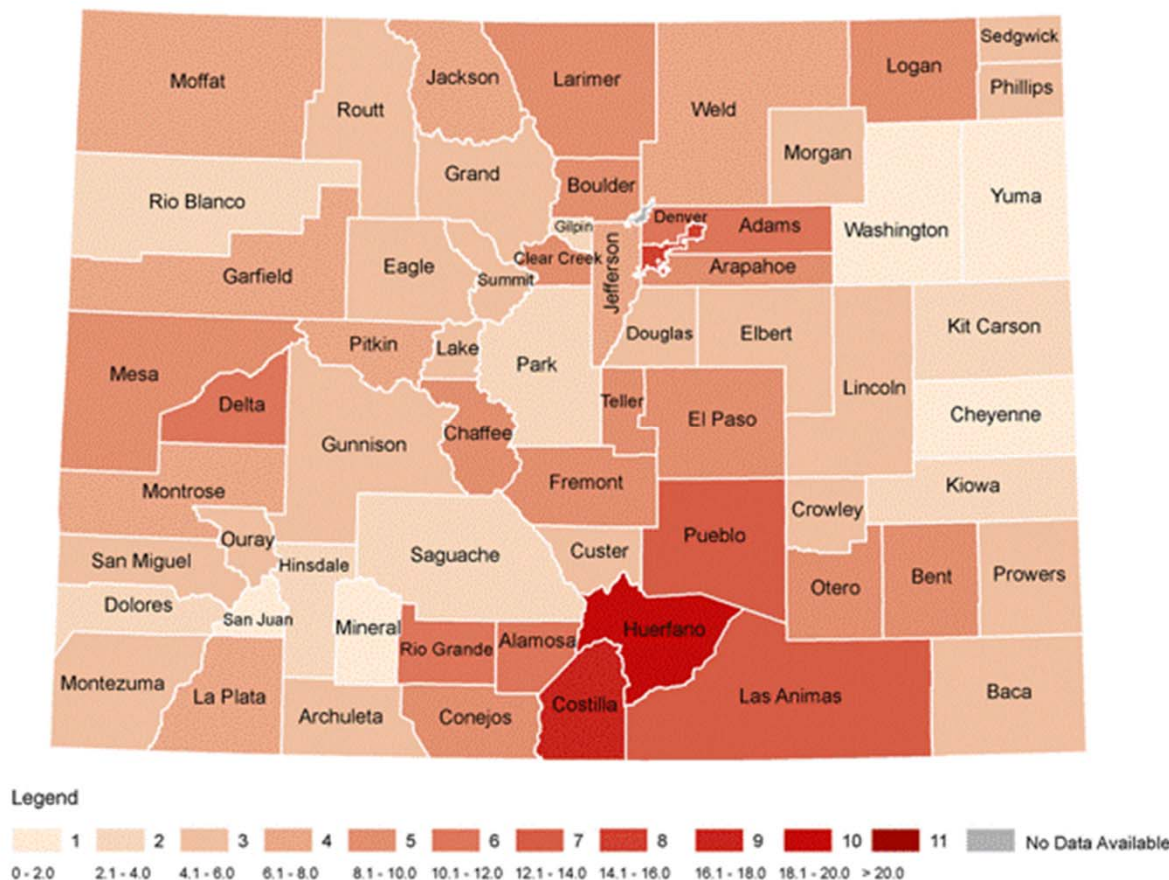
Drug Overdose Mortality

- In 2017, over 72,000 people died from drug overdoses in the United States
 - One every 10 minutes (8 more during this session)
 - Nearly 2/3 of those deaths involved prescription drugs
 - Opioids (Rx or illicit) were involved in 75% of those deaths
- In Colorado, there were 1,012 drug overdose deaths in 2016
- Of these, 560 were opioid involved (Rx or illicit, combined)
 - Rx opioid deaths rising again (329 in 2015, 300 in 2016, **373** in 2017)
 - Heroin deaths holding steady (160 in 2015, 228 in 2016, **224** in 2017)
 - Fentanyl deaths rising (41 in 2015, 49 in 2016, **81** in 2017)
 - Methadone deaths holding steady (34 in 2015, 56 in 2016, **58** in 2017)
- The problem knows no regional, gender, age, income, or other bounds: it is truly an epidemic (CDC: top four)



Drug Overdose Mortality in Colorado

Colorado Drug Overdose Death Rate, 2002



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CDC/NCHS National Vital Statistics System,
CDC Wonder. Updated 2010.

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Drug Overdose Mortality in Colorado

Colorado Drug Overdose Death Rate, 2014



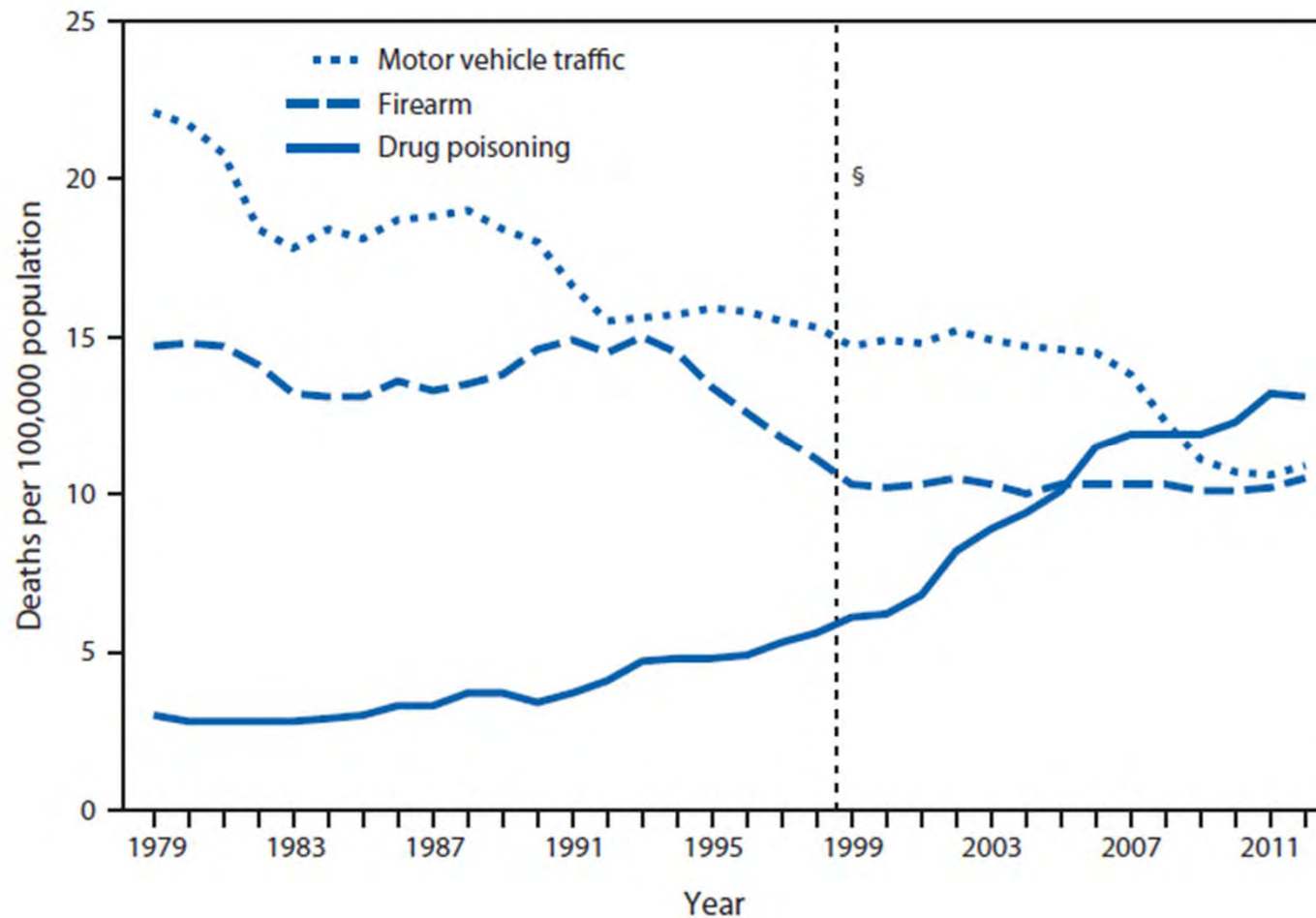
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CDC/NCHS National Vital Statistics System,
CDC Wonder. Updated 2010.

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Drug Overdose Death Rates in the US



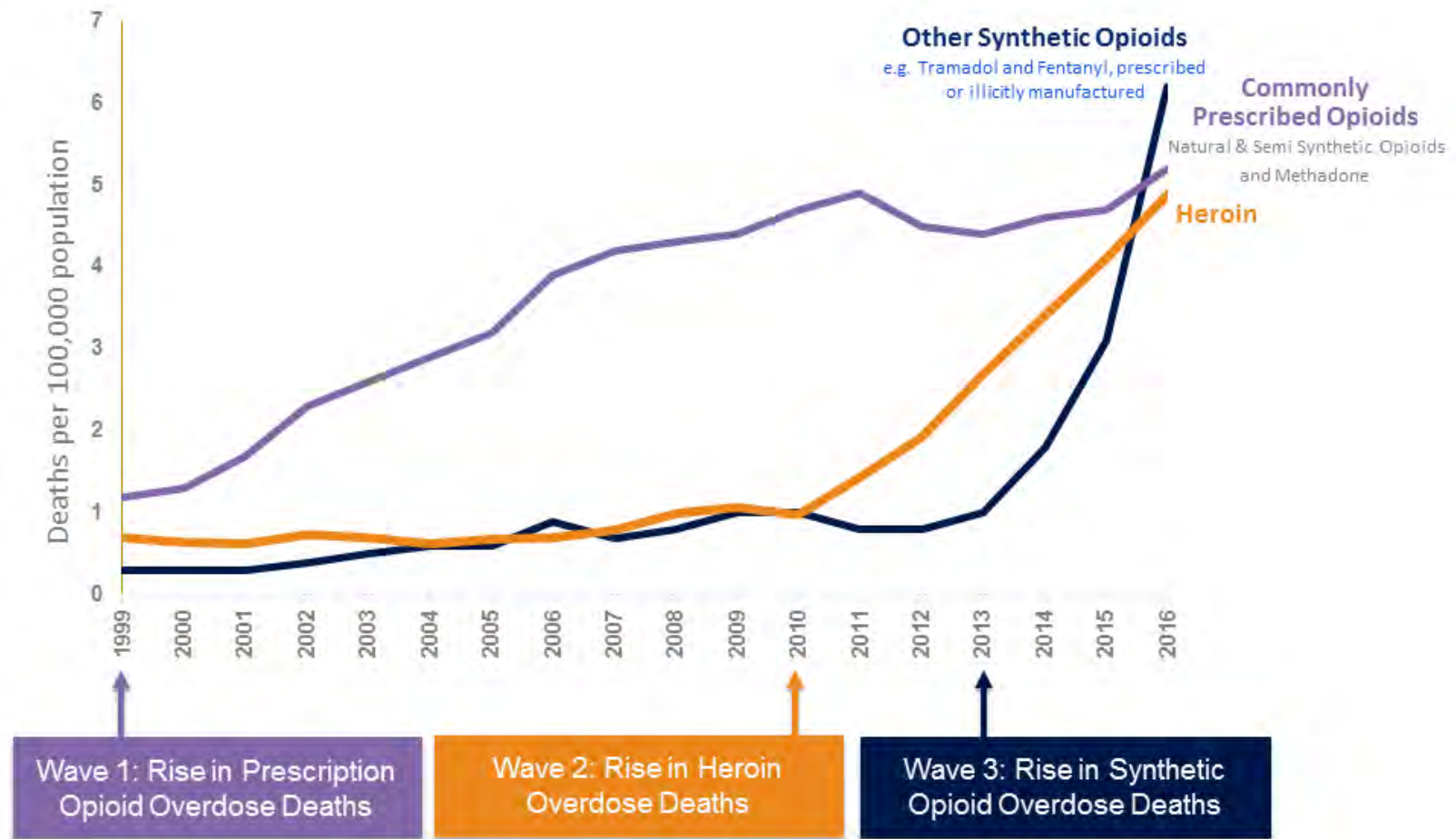
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CDC WONDER data file, Nov 21,
2014; 63(46);1095.

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3 Waves of the Rise in Opioid Overdose Deaths



SOURCE: National Vital Statistics System Mortality File.



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Deaths are the Tip of the Iceberg

For every opioid overdose death in 2014 there were...

For every **1** death there are...



10 treatment admissions for abuse¹

32 emergency dept visits for misuse or abuse¹

130 people who abuse or are dependent

825 nonmedical users¹



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SAMHSA NSDUH, DAWN, TEDS data sets

Coalition Against Insurance Fraud. Prescription for Peril.

<http://www.insurancefraud.org/downloads/drugDiversion.pdf> 2007

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Substance Abuse Treatment Gap: 90%

Number
of People
Needing
Treatment for
Substance
Abuse
Problems



Number of People
Who Received
Treatment at a
Substance Abuse
Facility

2.3
million



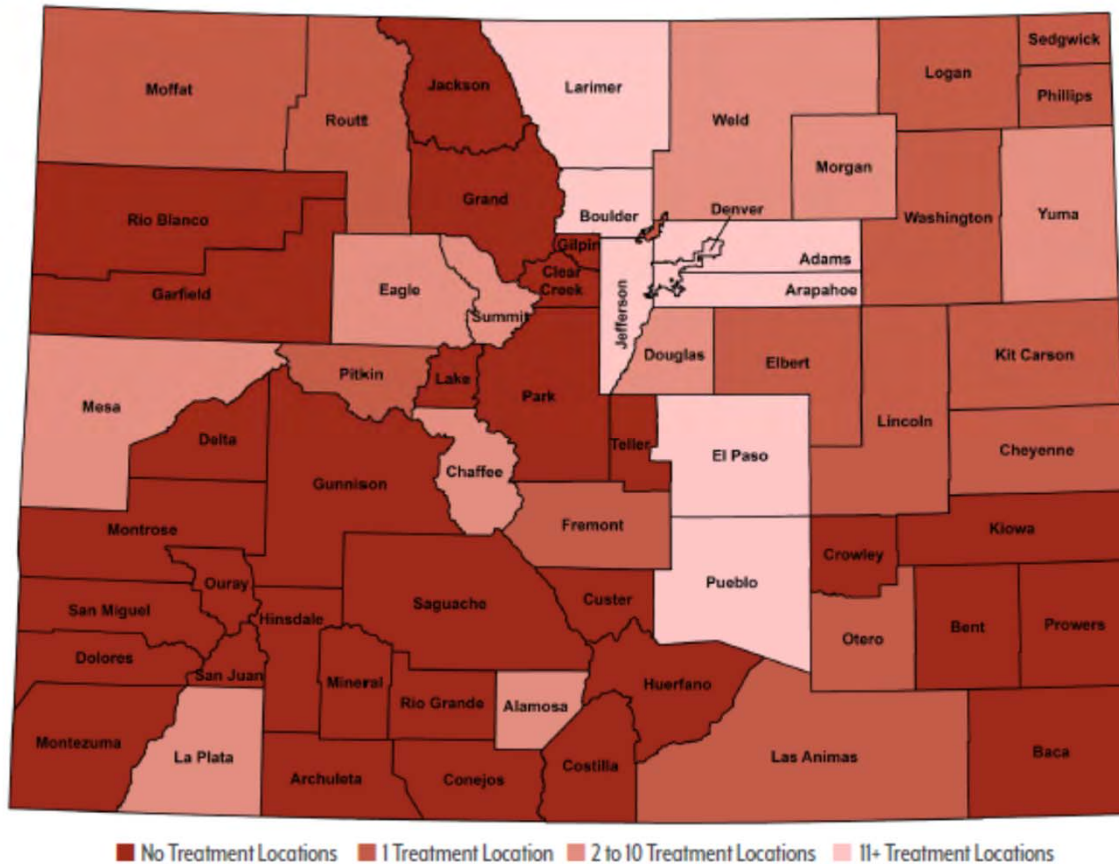
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SAMHSA/NSDUH 2011 survey

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Access to Medication Assisted Treatment (MAT) in Colorado: April 2017



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Colorado Health Institute. Miles Away from Help: The Opioid Epidemic and Medication-Assisted Treatment in Colorado. May 2017. Accessed at: www.coloradohealthinstitute.org

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What has this cost us?

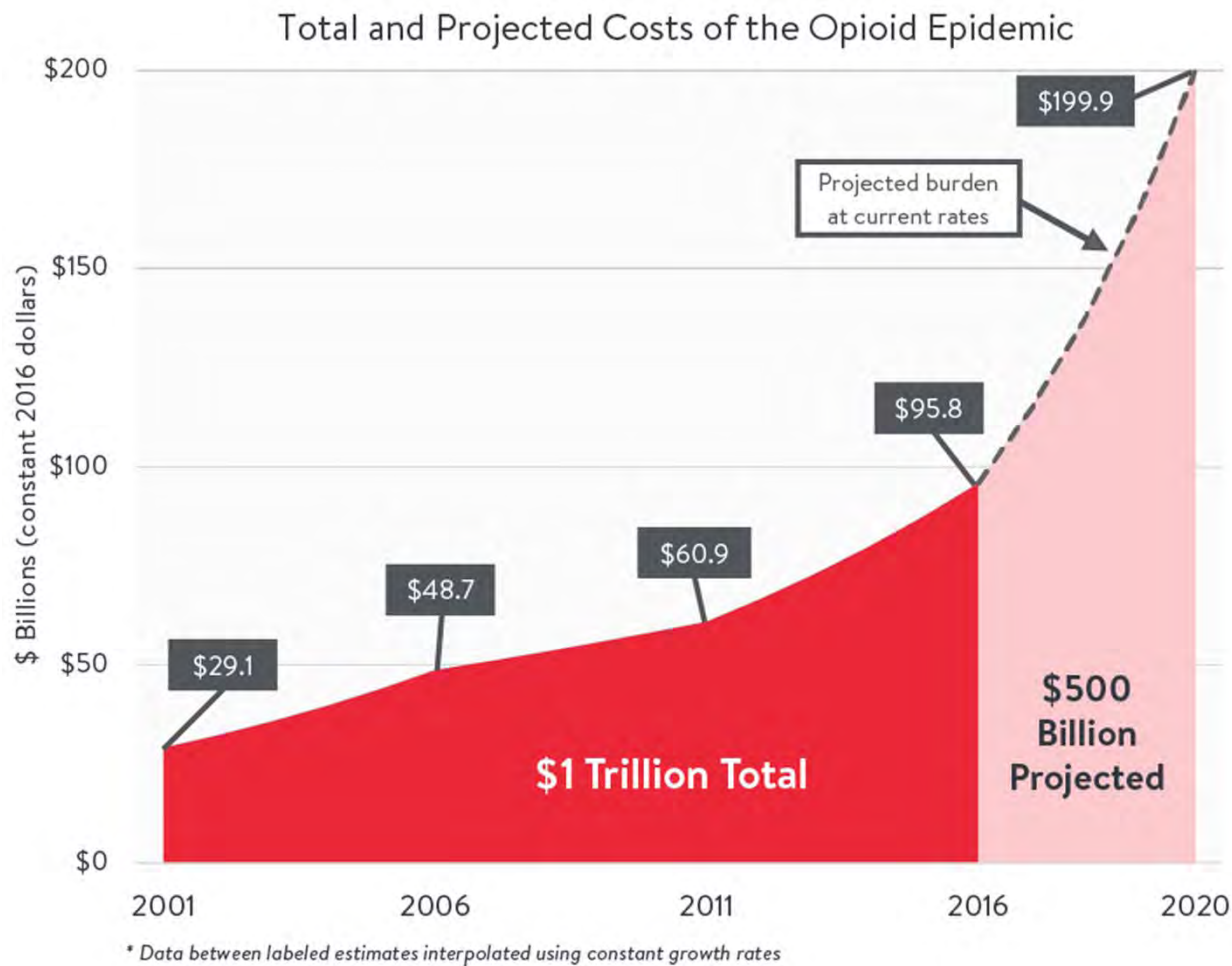


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Costs of the Epidemic: Past and Projected



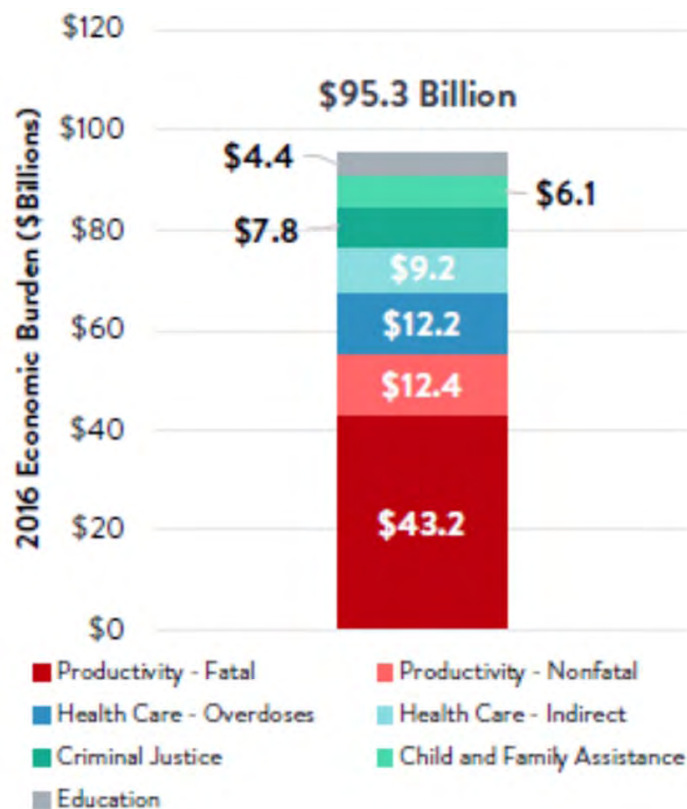
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Altarum Research Institute. Economic Toll of Opioid Crisis in U.S.
Exceeded \$1 Trillion Since 2001. Feb 13, 2018. Viewed at:
www.altarum.org/about/news-and-events/

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Societal Benefit of Eliminating Opioid Crisis



Rhyan, C. Altarum Research Brief, November 16, 2017. Accessed at: <https://altarum.org/publications/the-potential-societal-benefit-of-eliminating-opioid-overdoses-deaths-and-substance-use-disorders>



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How did we get here?

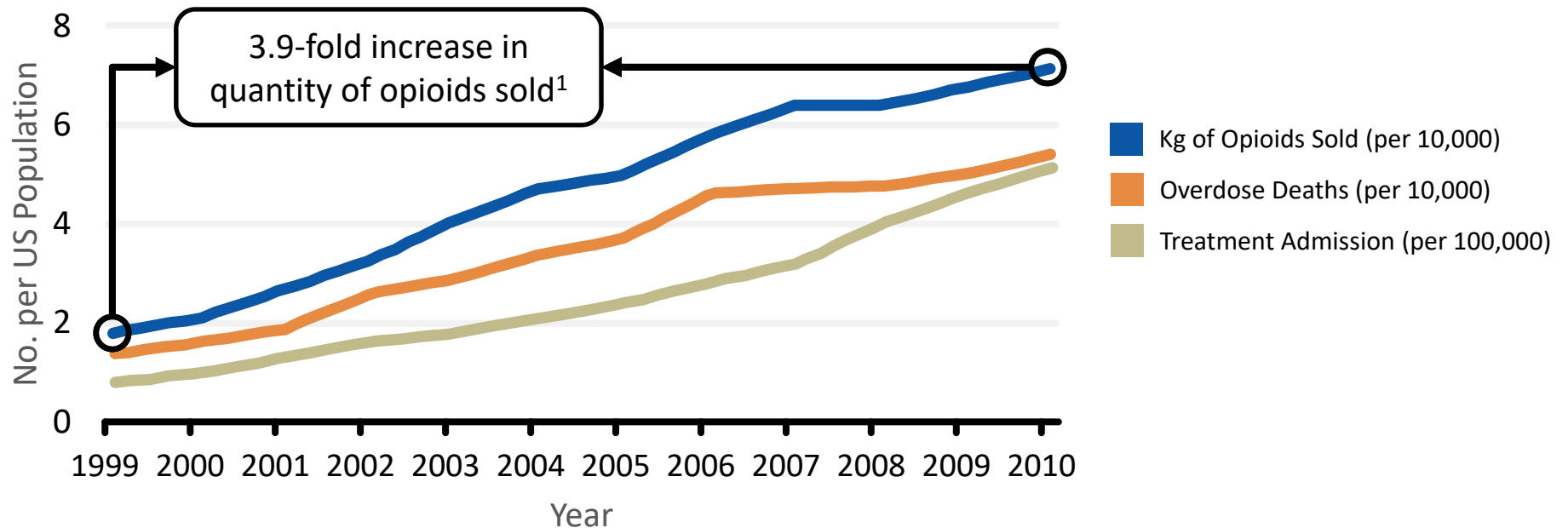


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The Ubiquity and Impact of Opioid Prescription Drugs on the US Population



259 million opioid prescriptions were dispensed at retail in 2013²
...enough for every American adult to have a bottle of pills...every year



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1. Volkow ND et al. *N Engl J Med.* 2014;370:2063-2066.
2. CDC Vital Signs. <http://www.cdc.gov>.

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The “Perfect Storm” of Opioids

- Causes of the increase came from many directions:
 - Increased recognition of pain, under-treatment of pain
 - Pain as the “fifth vital sign”, JCAHO and CAHPS measures, etc.
 - Drug company advertising and promotion
 - Practitioners not well trained in opioid pharmacology, addiction, medication assisted treatment (MAT)
 - Drugs are very powerful, highly addictive if not used properly
 - Scamming, doctor/pharmacy shopping, black market for opioids



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CDC/MMWR Jan 13, 2012; 61(01):10-13.
SAMHSA/NSDUH 2009 survey
SAMHSA/NSDUH 2009 survey

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How does this problem start?

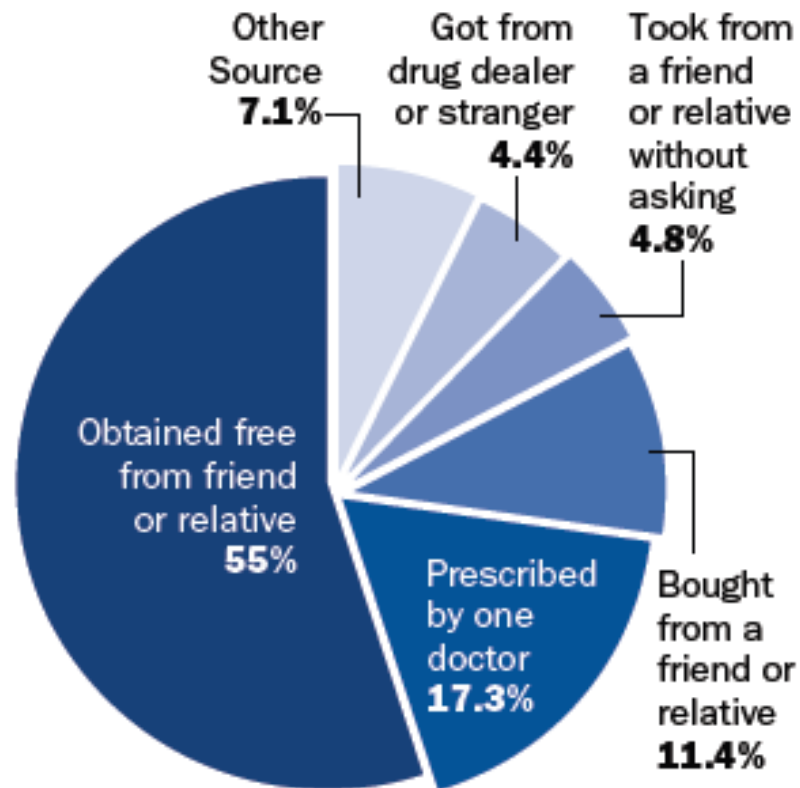


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Sources of Opioids among Nonmedical Users



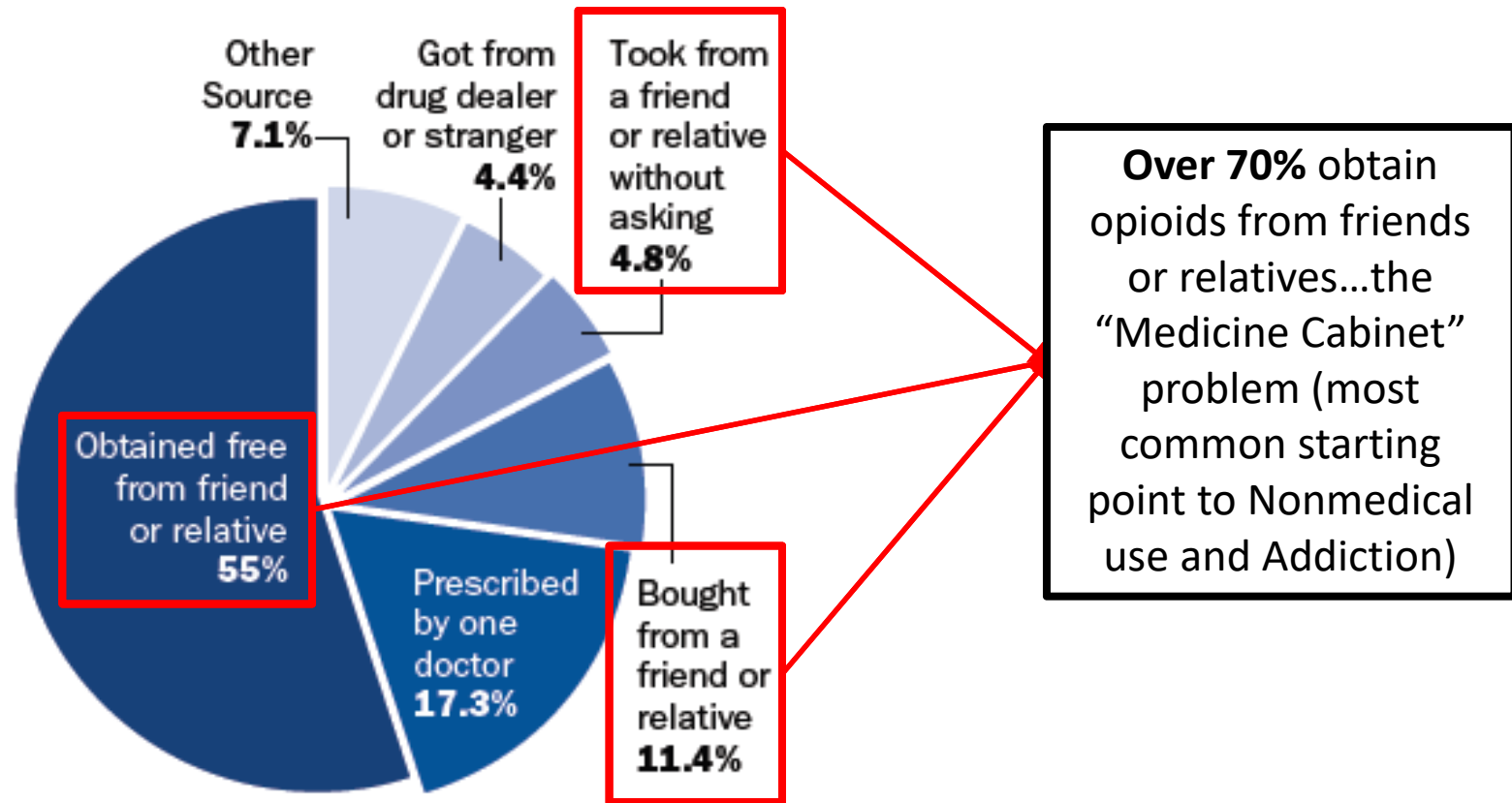
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CDC/MMWR Jan 13, 2012; 61(01):10-13.
SAMHSA/NSDUH 2009 survey

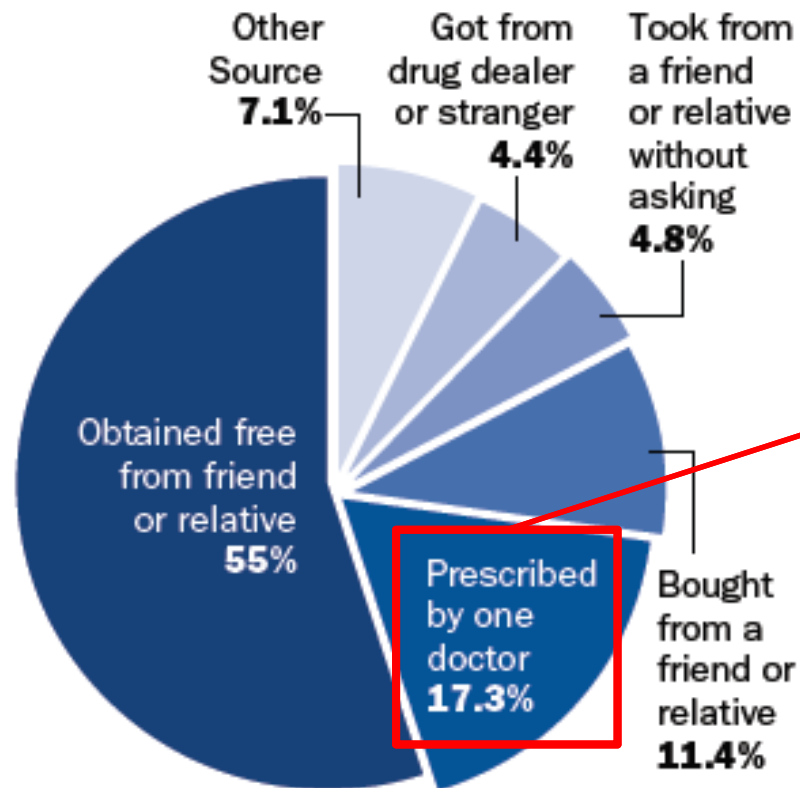
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Sources of Opioids among Nonmedical Users



Sources of Opioids among Nonmedical Users



Also significant: **17%** of patients who are started on opioids legitimately, but begin nonmedical use with the “leftovers” (after their acute pain has subsided)



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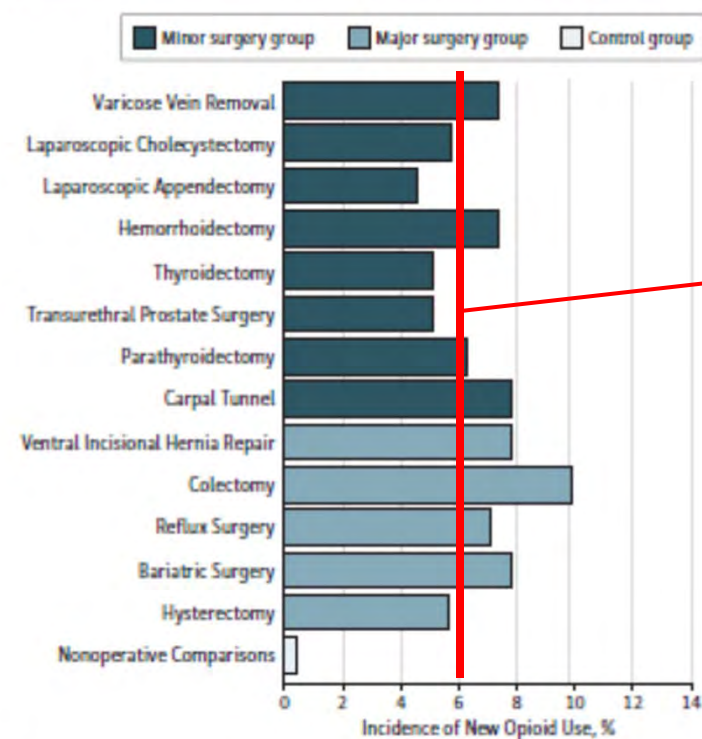
CDC/MMWR Jan 13, 2012; 61(01):10-13.
SAMHSA/NSDUH 2009 survey

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New Persistent Opioid Users after Surgery

Figure 3. Incidence of New Persistent Opioid Use by Surgical Condition



After surgery, major or minor, **6%** of people started on opioids for post surgical pain are new, persistent users 1 year later

The incidence of new persistent opioid use was similar between the 2 groups (minor surgery, 5.9% vs major surgery, 6.5%; odds ratio, 1.12; SE, 0.06; 95% CI, 1.01-1.24). By comparison, the incidence in the nonoperative control group was only 0.4%.

Brummett et al, JAMA Surg. 2017; 152(6)

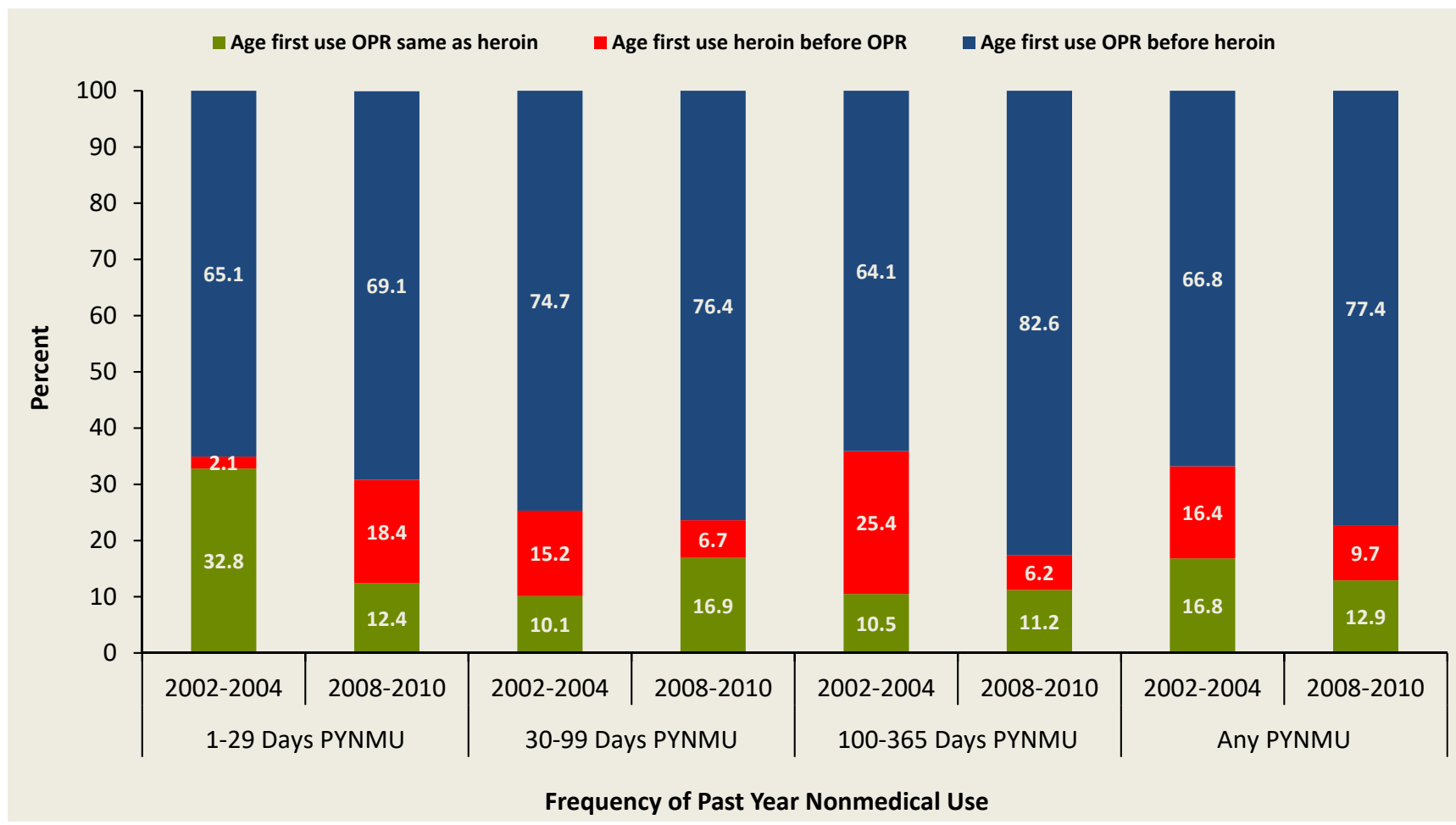


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Majority of Heroin users in past year reported Nonmedical use of Opioids before heroin initiation (US, 2002-2004 and 2008-2010)



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Jones, C.M. Drug Alcohol Depend., 2013.

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What is being done?



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President's Commission

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Grants & Programs

Key Issues

Additional Links & Resources

Office of Science and Technology Policy

See All

President's Commission on Combating Drug Addiction and the Opioid Crisis

On March 29, 2017, President Donald J. Trump signed an Executive Order establishing the President's Commission on Combating Drug Addiction and the Opioid Crisis. The Commission will be chaired by Governor Chris Christie and will study ways to combat and treat the scourge of drug abuse, addiction, and the opioid crisis, which was responsible for more than 50,000 deaths in 2015 and has caused families and communities across America to endure significant pain and suffering. The Commission will work closely with the White House Office of American Innovation led by Jared Kushner.

President Trump said, "I made a promise to the American people to take action to keep drugs from pouring into our country and to help those who have been so badly affected by them. Governor Christie will be instrumental in researching how best to combat this serious epidemic and how to treat those it has affected. He will work with people on both sides of the aisle to find the best ways for the Federal Government to treat and protect the American people from this serious problem. This is an epidemic that knows no boundaries and shows no mercy, and we will show great compassion and resolve as we work together on this important issue."

The Office of National Drug Control Policy (ONDCP) provides administrative and financial support for the Commission and its activities.

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President's Commission: Recommendations

- *Declare national public health emergency (done)*
- Treatment Expansion: eliminate Medicaid IMD exclusion, create incentives for delivery of MAT, enforce MHPAEA (mental health/SUD parity)
- CME: mandatory continuing education for prescribers
- Naloxone: equip law enforcement, create standing orders laws at state level, require coprescribing for at risk patients
- PDMPs: fund interstate data sharing, require federal facilities to participate/report data
- Other: Address 42 CFR Part 2 consent issues, develop fentanyl detection sensors/systems, review rules/regs



Recent Federal Initiatives

- **CDC:** named Prescription Drug Abuse as one of the top four epidemics facing the U.S.; issued *Guideline for Prescribing Opioids for Chronic Pain* (March 2016)
- **CMS:** stated “will adopt” CDC guidelines for Medicare patients
- **FDA:** issued Black Box Warning for opioids (risk of addiction, OIRD and death); guidance for abuse deterrent formulations; and recommended Opana ER be pulled from the market (MFR complied)
- **DEA:** tougher scheduling (Tramadol; Hydrocodone combination products); National Drug Take Back days (most recent was 4/28); new rules allowing pharmacies and law enforcement departments to be “reverse distributors” (collect and take back medications)



Recent Federal Legislation (one month ago)

- House Energy & Commerce committee held hearings over the last winter/spring, drafted a package of 56 opioid bills, combined into HR-6 (SUPPORT for Patients and Communities)
- Timeline:
 - In June, HR-6 passed House by vote of 396-14
 - On Sept 17, Opioid Crisis Response Act passed Senate 99-1
 - On Sept 27, cleared Conference Committee
 - On Oct 24, President Trump signed into law
- Topics range from treatment access, to workforce development, to incentives for development of non opioid medications, to safe disposal, to fentanyl interdiction (etc.)
- For details: <https://energycommerce.house.gov/opioids/>
- President has pledged ~\$13 Billion to opioid crisis over the next two fiscal years (10X prior funding, still 1/10 of HIV/AIDS)



Colorado Plan to Reduce Prescription Drug Abuse



September 2013
Kelly Perez
Policy Advisor
Office of Governor John Hickenlooper



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- Created by Governor John Hickenlooper in the fall of 2013 to establish a coordinated, statewide response to this major public health problem
- The Consortium serves as a backbone, which links the many state agencies, organizations, health professions, associations, task forces, and programs that are currently addressing the prescription drug abuse problem
- Seeded with \$1M in funding from former AG John Suthers

Colorado Consortium for Prescription Drug Abuse Prevention. About the consortium. <http://www.corxconsortium.org>.

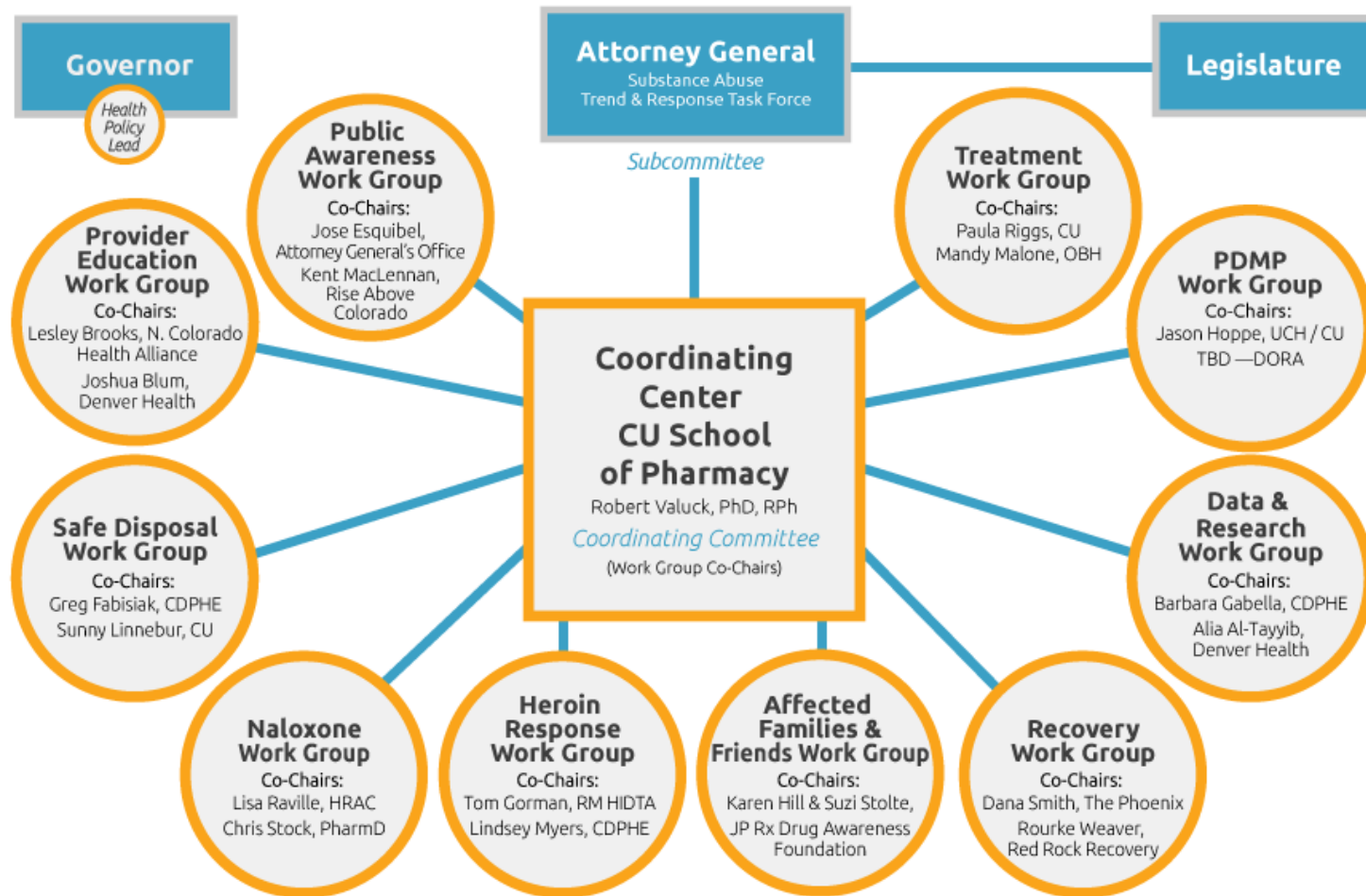


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Consortium Organization



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Public Awareness Work Group

TakeMedsSeriously.org



- Began in 2015 with \$1M in funding from former AG
- Focuses on Safe Use, Safe Storage, Safe Disposal
- Bilingual (English/Spanish)
- Campaign showed significant improvement in knowledge and behavioral intent (to use safe disposal programs)
- Collateral materials available free for physicians/practices



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#Rx Summit

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www.NationalRxDrugAbuseSummit.org

Safe Disposal Work Group

TakeMedsBack.org



- Created TakeMedsBack: statewide, permanent drug dropbox/collection program
- Received \$300K annual allocation in state funds
- 2018 goal: at least one permanent drop box in every county in CO
- 62 counties / 139 boxes as of Oct 15, 2018



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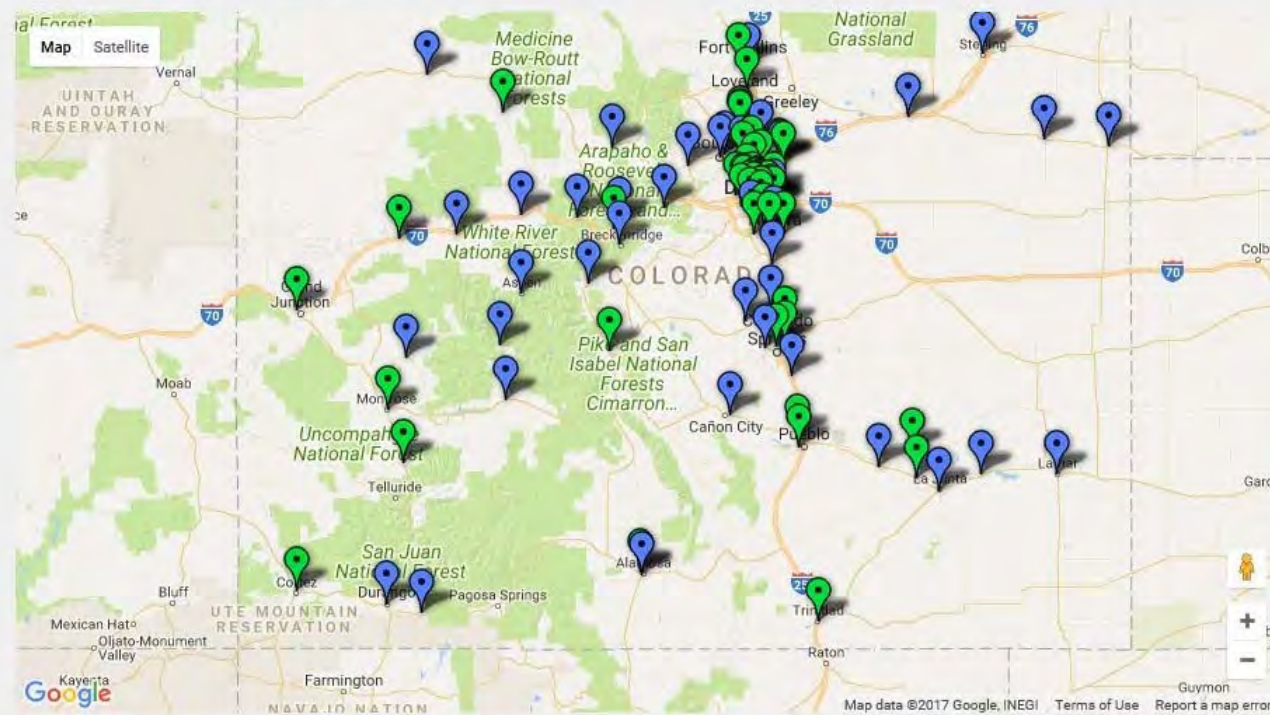
Data

News

LPHAs

Medication Take Back locations map

[Back to Medication Take-Back program](#)



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Provider Education Work Group

Moving From What to How
Practical Tools for Safe and Effective Opioid Prescribing for Chronic Pain

Thursday, January 19, 2017
5:30 – 8:30 p.m.




Boulder County Clerk and Recorder Office
Houston Room
1750 33rd St., Boulder

Ideal for medical providers, pharmacists, behavioral health providers, dentists, NPs, MAs, RNs, LPNs, public health professionals and others.

TED-style talks will include:
Clinical Pearls for Safe Opioid Prescribing, Dr. Steven Wright
Laws, Regulations and Guidelines, Dr. Robert Valuck
Current Scams and How to Prevent Them, Shane Tiernan – Purdue
Tools for Education and Consultation: Project ECHO, Dr. Ricardo Valesquez
Tools for Safe Prescribing and Monitoring: OpiSafe, Dr. Robert Valuck
Panel Discussion: Medication Assisted Treatment (MAT)
Lesley Brooks, MD, North Colorado Health Alliance
Michele Ryan, CACII, CPSII, Behavioral Health Group
Denise Vinconi, Office of Behavioral Health
Jennifer Herrod, RN, Mental Health Partners
John Stanton, DO, Salud Family Health
Corey Candelaria MA, LPC, LAC, Options Treatment Program

Register
\$30 pre-registered. Dinner included.
Register at Eventbrite: <https://opioidrx.eventbrite.com>
CME credit & COPIC Point may be provided.

Contact
Jamie Feld at jfeld@bouldercounty.org for more information.

- Created live CE program for physicians, other providers
- Focused initially on Safe Opioid Prescribing and Monitoring
- Delivered 21 times (6 more planned), to >1250 providers
- Next topics: MAT in Primary Care; Alternatives to Opioids; Telemedicine for Pain Management, Addiction Treatment

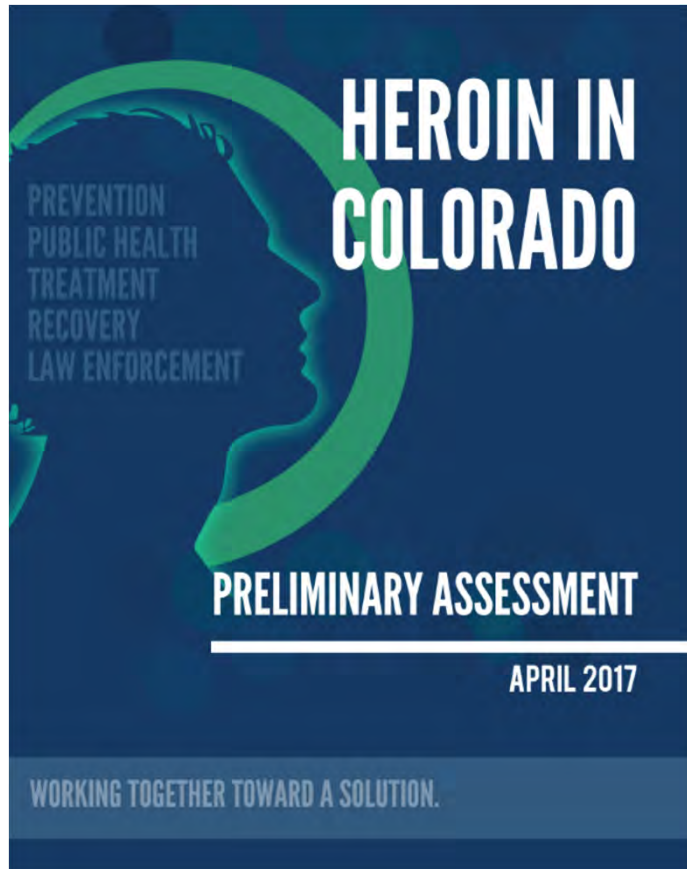


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Heroin Response Work Group



- Collaboration with Rocky Mountain HIDTA, DEA, and US Attorney
- Prevention, Public Health, Treatment, Recovery, Law Enforcement partnership
- Report: Heroin in Colorado
 - Data on scope of problem
 - Survey of OTP clients re: demographics, experiences
 - Will inform future efforts of the work groups re: heroin strategy



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Affected Families & Friends Work Group

Every 12 Minutes

Prescription Drug Awareness Share and Learn
Presented by: The JP Prescription Drug Awareness Foundation
Sponsored by: The Colorado Consortium for Prescription Drug Abuse Prevention

These Numbers have Names

AGENDA

Date:
September 22, 2015

Time: 5:30 p.m. - 7:30 p.m.

**University of Colorado
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Shore Family
Room 110 in the
Nighthorse
Campbell Building**

**13055 E. 17th
Avenue, Denver
CO**

FREE EVENT Registration
RSVP Required:
<http://www.eventbrite.com/e/jp-prescription-drug-awareness-share-learn-tickets-18398272729>

Questions:
kkendall.jpaf@gmail.com

- 5:30 p.m. - 6:00 p.m. Reception & Refreshments
- 6:00 p.m. Introductions
- 6:10-7:30 p.m.
- Karen Hill: JP's Story
- Dr. Robert Valuck: Proper Use of Rx Pain Medication
- David Maccaulay: Addiction and Recovery
- Suzi Stolte: Shares her story of the loss of her daughter
- Jeremiah Lindemann: Shares his story of the loss of his brother
- Joseph Brady & Jacqui Shumway Take Charge of your Health - Alternatives
- Hayes Veeneman: Shares his story of the loss of his son
- Wrap Up

- Forum for affected family members and friends to engage, inform, advocate
- Developed and offer public facing program: “These Numbers Have Names”
- Speakers bureau of those willing to speak with media, share their personal stories to help educate others



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INTERIM COMMITTEE INTERIM COMMITTEE

Opioid and Other Substance Use Disorders Interim Study Committee

[Committee Audio](#) [Share](#)

VIEW BY SESSION

2017 Regular Session

SUBJECTS: [Health Care & Health Insurance](#), [Human Services](#)

The study committee must review data and statistics on the scope of the substance use disorder problem in Colorado; compile an overview of the current resources available to Coloradoans; review the availability of medication-assisted treatment options and whether pharmacists can prescribe those medications; examine what other states and countries are doing to address substance use disorders; identify the gaps in prevention, intervention, harm reduction, treatment, and recovery resources; and identify possible legislative options to address these gaps.

COMMITTEE INFORMATION

STAFF CONTACTS

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Anne Wallace

303-866-4364

[Email](#)

[Committee Documents](#)

[Task Force and Committee Schedule](#)

[Task Force Documents](#)

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Senator
Dominick Moreno



Representative
Jonathan Singer



Senator
Jack Tate



Representative
James D. Wilson

- Committee met between July and October 2017, drafted 6 bills, 5 passed: Prevention/Education, Clinical Practice Improvement, Workforce Development, Treatment (Inpatient/Residential), and Payment Reform (MAT, prior auth)
- Committee meeting again this year, passed 5 bills, referred to Leg Council, which killed three of them (Prevention, Treatment, Harm Reduction), passed two (Criminal Justice, and Recovery)



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Opportunities for Counties

- Ideal geographic and political unit to address the topic
- Examples of collaborations are very good models
 - Commissioners, LPHAs, AHECs, nonprofits, partners...
- Consortium available to provide programmatic support to county (regional) efforts
 - Low hanging fruit: Data, Public Awareness materials, Safe Disposal sites and materials, Naloxone, Provider Education
 - Achieve early wins, ramp up activity as resources permit
 - Participate in our “Local Coalition Learning Community” (share with and learn from other local coalitions/peers)



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Community Reference (Toolkit)



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Thank You!

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