

## Overview: Healey-Driscoll Administration Opioid Strategy – December 2023

### Administration Actions

The Healey-Driscoll Administration is committed to addressing substance use disorder and providing resources to communities to reverse the trend in overdose deaths. Since taking office, the Administration has:

- Signed a FY24 budget including more than \$700 million for substance addiction prevention and treatment programs.
- Distributed more than 173,500 doses of naloxone, at no cost to consumers, to almost 52,000 individuals through more than 170 community naloxone distribution programs. This has resulted in at least 2,600 overdose reversals.
  - Provided 35,200 additional doses of free naloxone to use to first responders and schools for emergency response.
  - Distributed over 233,000 fentanyl test strips at no cost to consumers.
- Provided support and funding for 12 additional [Peer Recovery Support Centers](#), bringing the total to 39 across the Commonwealth by the end of summer 2023.
- Continued to fund [Low Threshold Housing and Services](#) that provide permanent housing and intensive case management for unaccompanied adults.
  - Since inception, over 400 people have been housed with a retention rate over 90%.
- Launched the [Redefining Community Wellness Grants Program](#) to intentionally center Black, Indigenous and People of Color (BIPOC) voices throughout the grantmaking and capacity building process, in partnership with Health Resources in Action (HRiA).
- Became the first state in the country to direct public health funding to a virtual overdose detection service through an investment in the [MA Overdose Prevention Helpline](#). So far, the helpline has supervised over 1,192 use events and successfully facilitated the reversal of 9 overdoses.
- Partnered with Berkshire Medical Center to pilot a **harm reduction vending machine** in Pittsfield. For the month of October 2023, 179 participants were registered to use the service and it dispensed 327 products, including 141 safer smoking kits, 91 sterile syringes, and 35 snacks.
- Funded two new **Stimulant Treatment and Recovery Teams (START)**. START programs expand access to treatment and services for people who use stimulants using innovative and evidence-based treatment.
- Published a data dashboard to [create community profiles](#), which present relevant indicators of substance addiction specific to cities/towns. These profiles can be used to inform public health decision-making related to SUD and will support municipalities in developing an informed plan to distribute municipal allocations of opioid settlement money within their communities.
- Strengthened SUD workforce by launching [The Substance Use Treatment Provider Loan Repayment Initiative](#) as part of the MA Repay Program. Granted awards to all eligible applicants in August 2023, for a total of 395 substance use treatment providers. Award amounts ranged from \$12,500 to \$50,000, depending on provider credentials, degree, and full-time/part-time hours in an eligible setting.

## Current Initiatives

**Increased Naloxone Access:** The Department of Public Health (DPH) has been working with syringe service providers (SSPs) to explore opportunities to provide services through harm reduction vending machines as an additional component of harm reduction programming.

**Opioid Recovery and Remediation Fund (ORRF):** The Opioid Recovery and Remediation Fund (ORRF) was established in 2020 to receive and administer funds from certain legal settlements relating to allegations brought against companies in connection with the opioid crisis. Over the next 18 years, Massachusetts can anticipate \$1 billion to be received through the settlements and used for substance use prevention, harm reduction, treatment, and recovery; 40% of this funding is allocated for municipalities. The Fund has received over \$101M from opioid settlements, including \$62M in FY23. The ORRF Advisory Council has met 12 times, including four times in the Healey-Driscoll Administration.

Currently, the ORRF is supporting:

- Expansion of Harm Reduction Services: The development of a program for existing harm reduction partners to collaborate with organizations that reach historically underserved populations. To date, seven programs have been awarded a contract under this opportunity.
- Increased Access to Medication for Opioid Use Disorder (MOUD): Expanded access to MOUD, such as buprenorphine and methadone, including by adding 3 new mobile methadone delivery programs and a new medication unit, with a focus on underserved communities.
- Workforce Investments: Investing \$15 million in loan forgiveness for SUD workers employed by DPH Bureau of Substance Addiction Services (BSAS) licensed facilities.
- Community-led Initiatives: Recently announced a direct-to-community grant initiative to create a pathway for municipalities and non-profit organizations to apply for ORRF funds, particularly those based in historically underserved communities with a disproportionately high rate of overdose deaths.
- Consult Teams: Recently announced funding for Addiction Consult Teams in 15 hospitals across the state. Consult teams support individuals with a substance use disorder and their care teams by providing brief intervention and motivational interviewing, initiation on medications for addiction treatment, and facilitated referral to treatment.

As directed by statute, the Administration will continue to ensure that oversight of the ORRF decisions and operations remain in the Executive Office of Health and Human Services (EOHHS), overseen by the Secretary, as ORRF funding allows the Commonwealth to make significant changes and investments for people with SUD. EOHHS is building up a team to support the opioid settlement work.

**MassHealth Substance Use Disorder Rates:** The Administration is investing \$100 million in historic rate increases to MassHealth reimbursement for critical SUD services, including:

- \$67 million investment in rate increases to support Opioid Treatment Programs;
- 35% rate increase to Acute Treatment Stabilization (ATS) rates;
- 25% increase for Clinical Stabilization Services (CSS);
- 20% increase for Residential Rehabilitative Services (RRS); and
- 20% increase for Individualized Treatment Services (ITS)

## **Future Policy and Action**

Building on the above actions, the Administration is taking a hard-hitting, uncompromising approach to combat overdose rates. Guided by the data and needs of the Commonwealth, the Administration will continue to innovate and drive action to address substance use disorder and minimize overdose deaths.

**Addressing Unintended Exposure to Fentanyl and Stimulant Use:** DPH Bureau of Substance Addiction Services (BSAS) is launching the Nightlife Overdose Prevention Efforts (NOPE), an initiative that will outreach and distribute informational coasters, posters, and other training materials to nightlife establishments. NOPE aims to reduce unintended exposure to fentanyl, expand access to harm reduction supplies, and improve engagement of individuals using stimulants.

**Mobile Addiction Services:** DPH will be funding two Mobile Addiction Service programs (Brockton Neighborhood Health Center and Lowell Community Health Center), providing low barrier, low threshold clinical care and harm reduction services to individuals who are at high risk for overdose and other medical complications associated with substance use.

- This service engages people who use drugs and are experiencing housing insecurity, providing access to harm reduction services, primary and preventative medical care, medication for opioid use disorder, and a link to long-term, comprehensive, community-based care.
- The goal is to reduce overdose mortality and support individual health by increasing access to integrated care. Priority was given to applicants serving geographic regions experiencing high rates of overdose but not currently served by a Mobile Addiction Services Program.

**Mandate SUD Core Competencies:** DPH will be incorporating SUD core competencies into professional licensure requirements for all individuals seeking licensure (including renewals), in all fields licensed by the Department of Public Health and Veterinarian students.

**Expand Workforce Initiatives:** Current workforce initiatives for Substance Use providers are only available to workers in BSAS licensed levels of care. Additional actions will expand access to these initiatives to those who work in non-traditional levels of care, including (but not limited to) Overdose Education and Naloxone Distribution workers, Moms Do Care, First Steps Together.

- DPH will be reimbursing for costs related to tuition and internships in the substance use treatment field for state schools and community colleges.
- DPH has created a workforce pipeline of recovery and mental health workers through the Massachusetts Vocational and Technical High Schools.
- DPH recently funded a Recovery Education Collaborative (REC) to support the further development, enhancement, expansion, delivery and promotion of recovery support training and technical assistance (TA) for individuals in the substance use peer support workforce.

**Expanding Access to Methadone:** DPH has engaged a team of researchers from the HEALing Community Study and Tufts University that will identify Opioid Treatment Program (OTP) deserts, including care gaps visualized by travel times, race and ethnicity, and residence of individuals who died from an opioid-related overdose. Once identified, DPH will work with EOHHS, the ORRF, and the Administration to develop policy and funding required to address limited access.