

Texas Targeted Opioid Response

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TEXAS
Health and Human
Services

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1. Introduction

On September 19, 2018, the federal Substance Abuse and Mental Health Services Administration (SAMHSA) awarded Texas \$46.2 million in State Opioid Response (SOR) funds to extend and expand HHSC's response to the opioid crisis. HHSC is implementing these funds through the Texas Targeted Opioid Response (TTOR) Program, which was created in May 2017 when SAMHSA initially awarded State Targeted Response (STR) funds in the amount of \$27.4 million.

SAMHSA also awarded HHSC two smaller discretionary grants in 2016 and 2017 targeting opioid use. Services provided with these funds are coordinated with the SOR and STR funds to maximize services without duplication.

- The Texas Strategic Prevention Framework for Prescription Drugs (SPF-Rx) is a five-year grant in the amount of \$1,858,080 aimed at raising awareness about the risks of overprescribing to young adults, and bringing prescription misuse prevention activities and education to schools, communities, and parents.
- The Texas First Responders - Comprehensive Addiction and Recovery Act (FR-CARA) grant is a four-year grant in the amount of \$3.2 million. The goal of this collaborative project is to reduce opioid overdose related mortality rates, strengthen the successfulness of first response to overdose, and coordinate care for overdose survivors in Bexar County.

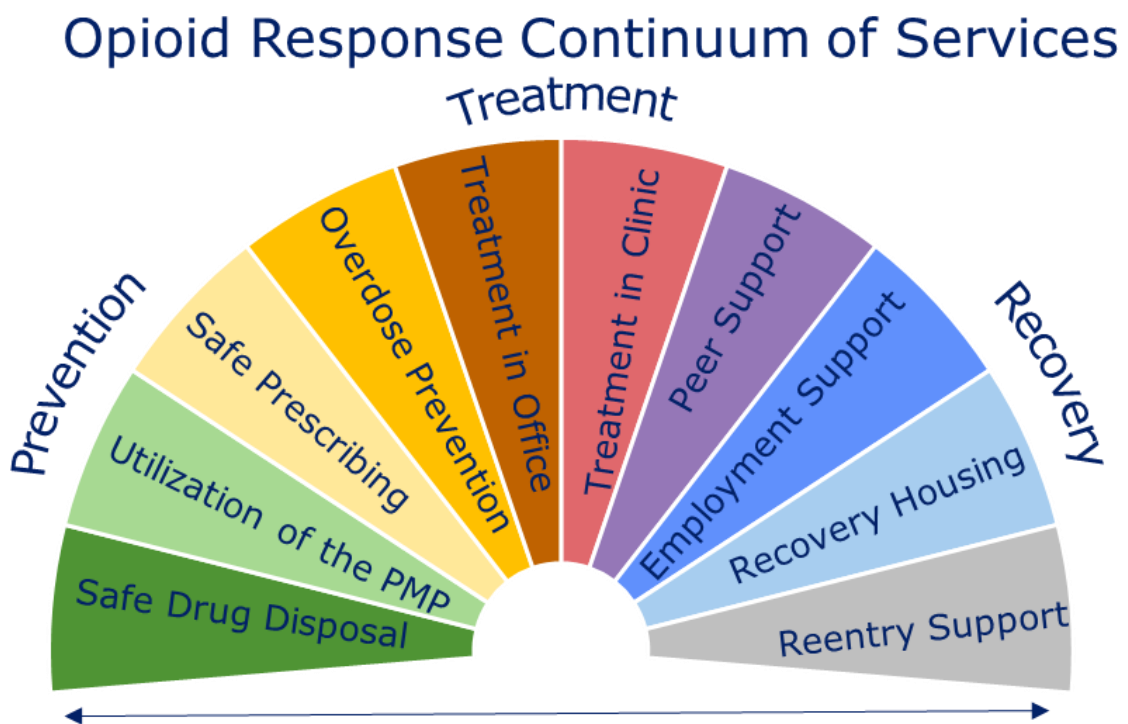
TTOR strategies span the behavioral health continuum of care funding prevention activities, treatment and recovery services, as well as integrated projects. To meet federal grantee requirements, streamline deployment of funds, and maintain quality services, HHSC plans to expand existing contracts and partner with governmental entities such as academic institutions and local mental health authorities (LMHAs) that provide Outreach, Screening, Assessment, and Referral (OSAR) functions.

2. Implementation Approach

Grant Program Overview

The TTOR program implemented a continuum of services model to target prevention, treatment, and recovery focus areas as illustrated in Figure 1.

Figure 1. Opioid Response Continuum of Services Model



Opioid Response Integrated Services



Prevention

Safe Drug Disposal - This project includes safe drug disposal initiatives such as take back events, drop-boxes, and disposal pouches. The goal is to reduce the availability of unused medications that can lead to opioid misuse.

Utilization of the Prescription Monitoring Program – The goal of this project is to increase prescriber and pharmacist enrollment and meaningful use of the Prescription Monitoring Program to ensure not only patient screening but identification of problematic opioid use and appropriate referral to treatment.

Safe Prescribing – This project supports prescriber education and online training modules aimed at reducing opioid misuse through safe prescribing practices.

Overdose Prevention – This project supports overdose prevention education, access to overdose reversal medication (naloxone), and overdose reversal tracking tools with the goal of providing timely community response and reducing overdose death.

Treatment

Office Based Treatment – This project increases access to medication assisted treatment (MAT) in a variety of settings outside of the traditional clinic by increasing the number of physicians providing both buprenorphine and extended release naltrexone, expanding opportunities for physicians to obtain DATA 2000 Waiver training, creating a professional peer mentoring network, and expanding the network of state-funded treatment providers.

Clinic Based Treatment – This project increases access to all three U.S. Food and Drug Administration-approved medications for the treatment of opioid use disorder (methadone, buprenorphine, and extended release naltrexone) by expanding capacity at new and existing clinics. This will enable clinics to treat both primary opioid use disorder along with co-morbid conditions such as hepatitis C, psychiatric conditions, and wound care at a single clinic site.

Recovery

Peer Support – This project expands peer recovery support services throughout the state in a variety of settings and provides opportunities for enhanced training in medication assisted recovery for the peer support workforce.

Employment Services – This project includes job developer and supported employment services for individuals in medication assisted recovery from opioid use disorders.

Recovery Housing – This project provides resources to reduce discrimination and increase safe housing for individuals in medication assisted recovery from opioid use disorders.

Reentry - This project provides peer support services for individuals being released from jail who are at risk for opioid overdose. These services include overdose prevention education and access to naloxone, peer recovery support coaching, and linkage to MAT.

Integrated

Emergency Response – This project serves individuals at high risk for overdose and overdose survivors to ensure they receive treatment induction, recovery support, community paramedicine support, and overdose prevention services. In addition, select Mobile Crisis Outreach Teams provide opioid crisis services.

Community Access – This project supports access to treatment, recovery support, overdose prevention, and linkage to care through OSAR services and 24/7 community drop-in sites.

Pre-Arrest Diversion - This project provides 24/7 drop-in pre-arrest diversion services that include treatment induction, recovery support, overdose prevention, and linkage to care.

3. Grant Award Information

Funding

TTOR encompasses four grant opportunities from SAMHSA totaling more than \$152 million over funding periods:

- STR: \$54,724,714
- SOR: \$92,458,184
- SPF-Rx: \$1,858,080
- FR-CARA: \$3,200,000

Timeline

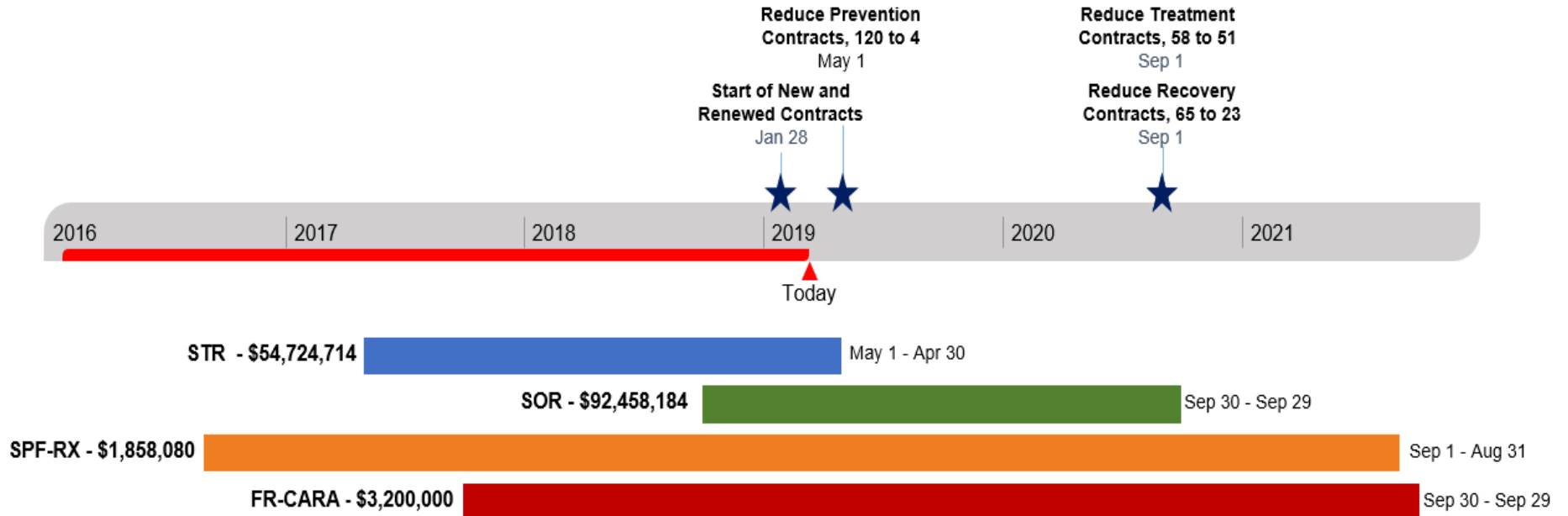
On September 19, 2018, SAMHSA awarded Texas \$46.2 million in SOR funds to extend and expand HHSC's response to the opioid crisis. HHSC is implementing these funds through the TTOR Program, which was created in May 2017 when SAMHSA initially awarded STR funds in the amount of \$27.4 million.

The funding for all grants is awarded evenly on an annual basis. For example, the FR-CARA grant is a four-year grant, with HHSC receiving \$800,000 per fiscal year. HHSC is in the process of applying for a no-cost extension of the STR funds.

- STR: May 1, 2017, through April 30, 2019
- SOR: September 30, 2018, through September 29, 2020
- SPF-Rx: September 1, 2016, through August 31, 2021
- FR-CARA: September 30, 2017, through September 29, 2021

Figure 2 illustrates the overlap for all TTOR projects implementation timelines.

Figure 2. All TTOR Project Implementation Timelines 2016-2021



Distribution of Funds

SOR implementation includes funding prevention activities, treatment and recovery services, as well as integrated projects. To meet federal grantee requirements and be more efficient in deployment of funds and expand quality services, HHSC plans to expand existing STR contracts and partner with governmental entities and local units of government such as academic institutions and LMHAs that provide OSAR functions.

Overall, this approach seeks to ensure compliance with federal timeline and grant requirements, ensure access to evidence-based and timely care, and streamline contracting processes to allow for a more expedited deployment of resources into communities to address the opioid crisis. This approach will reduce the number of contracts from approximately 300 to 100.

4. Addressing System Gaps

Texas Statewide Behavioral Health Strategic Plan Goals

The TTOR program aims to address the following goals in the *2017-2021 Statewide Behavioral Health Strategic Plan*:

- **Goal 1:** Program and Service Coordination – Promote and support behavioral health program and service coordination to ensure continuity of services and access points across state agencies.
- **Goal 2:** Program and Service Delivery – Ensure optimal service delivery to maximize resources to effectively meet the diverse needs of people and communities.
- **Goal 3:** Prevention and Early Intervention Services – Maximize behavioral health prevention and early intervention services across state agencies.
- **Goal 4:** Financial Alignment – Ensure that the financial alignment of behavioral health funding best meets the needs across Texas.

Goal Outputs

To date, approximately 122,579 individuals have received TTOR program services:

- **Prevention Services**
 - ▶ 104,948 people have participated in opioid misuse prevention activities;
 - ▶ 2,409 individuals have received overdose prevention training;
 - ▶ 73,780 medication disposal pouches have been distributed;
 - ▶ 1,742 medical and behavioral health professionals have received overdose prevention online continuation education;
 - ▶ 21,750 pounds of prescription drugs were disposed; and
 - ▶ More than 49,000 naloxone kits (98,000 2mg doses) have been distributed.

- **Treatment Services**
 - ▶ 5,409 individuals have received treatment in the clinic setting;
 - ▶ 540 individuals have received treatment services in the office setting, and
 - ▶ 3,059 individuals with opioid use disorder (OUD) have been treated for comorbid conditions.

- **Recovery Support Services**
 - ▶ 2,379 individuals with OUD have received peer coaching services;
 - ▶ 159 individuals with OUD have been authorized to receive employment services;
 - ▶ 46 individuals with a history of opioid use have received recovery support services including overdose prevention services prior to and upon release from jail; and
 - ▶ 159 individuals with OUD have entered recovery housing.

- **Integrated Services**
 - ▶ 433 individuals have received overdose-related emergency response services;
 - ▶ 318 individuals with OUD have received overdose-related services through Mobile Crisis Outreach Teams; and
 - ▶ 978 individuals with OUD have accessed treatment services through OSAR Priority Admission Counselors within three days of screening.

Goal Outcomes

Through evidence-based strategies implemented with STR funding, HHSC has seen the following outcomes:

- Reported overdose reversals increased from 82 in year 1 to 155 in year 2; an 89 percent increase;
- Almost 100 percent increase in the proportion of OUD admissions admitted to MAT from year 1 to year 2;
- Increased the proportion of people served in evidence based treatment for OUD from 16 percent to almost 35 percent;
- Identified over 225 lives saved as a direct result of these efforts; and
- 110 Recovery Coaches have directly facilitated access to MAT services.

List of Acronyms

Acronym	Full Name
FR-CARA	Texas First Responders - Comprehensive Addiction and Recovery Act Grant
HHSC	Health and Human Services Commission
LMHA	Local Mental Health Authority
MAT	Medication Assisted Treatment
OSAR	Outreach, Screening, Assessment, and Referral
OUD	Opioid Use Disorder
PMP	Prescription Monitoring Program
SAMHSA	Substance Abuse and Mental Health Services Administration
SPF-Rx	Strategic Prevention Framework for Prescription Drugs
SOR	State Opioid Response Grant
STR	Texas Targeted Opioid Response Grant
TTOR	Texas Targeted Opioid Response Project
U.S.	United States