

# NEWS BITES

**JULY 2020** 

### LAPPA NEWS

# LAPPA Convenes its Peer Support/Recovery Coach Model Act Drafting Meeting

Despite the challenges of meeting in person due to COVID-19, LAPPA successfully convened its Peer Support/Recovery Coach Model Act Drafting Meeting on May 19-20, 2020 via the Zoom Meeting Platform. Jim Carroll, the Director of the Office of National Drug Control Policy, Executive Office of the President, kicked off the meeting by addressing the working group members, lauding their tireless work on the topic, and stating how important the use of peer support is to recovery. The working group was comprised of approximately 20 experts in the peer support arena, ranging from those who run programs to those who accredit them. The group drafted a practical and comprehensive model law on which LAPPA is currently working. Once completed, LAPPA will send the draft out for review, not only to its working group members, but to other experts for their edits and comments. LAPPA plans to publish and disseminate the model in the fall of 2020. For more information on the peer support model law, please email <a href="mailto:info@thelappa.org">info@thelappa.org</a>.

#### IN THE NEWS

# **American Medical Association Urges Changes to Prescribing Guidelines**

As part of an effort to protect pain patients from unintended consequences of long-term opioid therapy, the American Medical Association (AMA) wants the Centers for Disease Control and Prevention (CDC) to make significant changes to its 2016 Guidelines for Prescribing Opioids for Chronic Pain. Among the recommendations, the AMA is calling for the CDC to remove arbitrary limits and other restrictions on opioid prescribing, citing a lack of evidence that these limits actually improve pain patients' outcomes. To read the full letter from the AMA, click here.

#### **Cracking Down on Online Opioid Sales**

The U.S. Departments of Health and Human Services and Commerce recently announced a pilot aimed at decreasing the number of illegal sales of opiates online. Under this program, the U.S. Food and Drug Administration (FDA) will notify three participating Internet registries when it sends a warning letter to a website operator who is illegally selling opioids and that website operator does not adequately respond to the warnings. The registries will review the FDA's notifications and assess whether to take further action against the website operator, either blocking its domain name or having its operations suspended. To read the full press release from the FDA, click <a href="here">here</a>.

# **Drug Use Up Among Pilots Involved in Fatal Accidents**

A report from the National Transportation Safety Board (NTSB) has shown that a greater percentage of pilots involved in fatal crashes are using prescription, over the counter, and illicit drugs. A new study, conducted as an update to a 2014 study, examined toxicology results from pilots who died in plane crashes between 2013 and 2017. In that timeframe, just over 1,000 accidents occurred in the U.S. in which the flying pilot died and of those, 91 percent had available toxicology test results. During the five-year span ending in 2017, 266 or 28 percent of the fatally injured pilots tested positive for at least one potentially impairing drug; five percent tested positive for an illicit drug. The study further revealed an increase in the percentage of fatally injured pilots who tested positive for THC, the psychoactive compound in marijuana. To visit the NTSB website for more information about its study, click <a href="here">here</a>.

# Plans to Build an Opioid Treatment Center Face Opposition

The Jamestown S'Klallam Tribe plans to build a 17,000 square foot outpatient clinic for medical and addiction treatment but is facing pushback from a group of residents who have rallied together to block the project. Opponents claim that they agree with the mission of such a treatment facility but that the proposed location of the building is inappropriate because it would overwhelm the resources of their small community. Their argument is that a large treatment facility will draw too many people into the small town of Sequim, overwhelming schools and social services, stretching law enforcement too thin, and lowering housing prices in the area. Conversely, tribal leaders point to woefully inadequate resources for treatment in their community and other small communities, and they believe that helping people with substance use disorder will strengthen their community. The two sides are currently locked in a zoning dispute, but the tribe says it will persevere and that it intends to build the facility. To read the full article that appeared in the *Washington Post*, click here.

### **Rising Concerns Over Isotonitazene**

The potent opioid isotonitazene was first synthesized and reported in literature in the 1950s, yet compared to other synthetic opioids little is known about the substance that scientists now think is even more potent than fentanyl. Last fall, the Center for Forensic Science Research & Education issued a "Potent Synthetic Opioid" warning for isotonitazene, and crime lab technicians are beginning to see the opioid reflected in drug samples. While reported incidents involving isotonitazene are still uncommon, concern is mounting, and the Drug Enforcement Administration recently issued a notice of intent to publish a temporary order to add the substance to the list of Schedule I controlled substances. This temporary scheduling will impose the regulatory controls and sanctions applicable to Schedule I substances. Several states, including Ohio and Wisconsin, have also promulgated emergency scheduling orders. For more information, and to view the scheduling order, click here.

# **Government Accountability Office Recommends Sharing More Information with Beneficiaries**

A 2018 analysis by the U.S. Government Accountability Office (GAO) showed that nearly five million beneficiaries used behavioral health services/services for mental and substance use disorders, representing about 14 percent of Medicare beneficiaries and \$3.3 billion in spending. Behavioral health disorders often go untreated, leading to negative health consequences, and as such, the GAO recommends that the Centers for Medicare and Medicaid Services (CMS) should share more information with beneficiaries about the specific behavioral health services that are covered. Currently, coverage for substance use disorder is not explicitly outlined in Medicare's most widely disseminated materials, leaving many Medicare beneficiaries unaware of the coverage and therefore less likely to seek treatment. To read the full GAO report, click here.

#### Food and Drug Administration Issues Warning to CBD Companies

The United States Food and Drug Administration (FDA) issued warning letters to two companies, charging them with illegally selling unapproved products that contain cannabidiol (CBD) in violation of the federal Food and Drug Cosmetic Act. Each of these companies allegedly marketed the CBD products as a treatment for serious diseases even though it is illegal to make such treatment claims for CBD products. BIOTA Biosciences received its warning letter after marketing its injectable CBD products, both of which were touted as alternatives to opioid treatments. Homera Corp DBA Natures CBD Oil Distribution was also issued a warning letter, in its case for marketing and distributing CBD products as a treatment for opioid addiction and other serious diseases. The federal government has yet to evaluate (1) the efficacy of CBD products for their intended use or (2) whether those products have dangerous side effects or other safety concerns. To read the full article that appeared in *Nutraceuticals World*, click <a href="here">here</a>.

## Study finds Disparity in Use of Medication for Opioid Use Disorder During Pregnancy

Massachusetts General Hospital has released the results of a study based on a population-level sample of women with opioid use disorder (OUD) across the Commonwealth of Massachusetts. Researchers found that black, non-Hispanic and Hispanic women with OUD are significantly less likely to receive or to consistently use any medications to treat their disorder during pregnancy as compared to white, non-Hispanic women. Disparities in the range of 60 to 75 percent were noted in the study even though use of methadone and buprenorphine is widely associated with improved outcomes for both mothers and infants. The biggest disparity was in the under 25 age group, with black women 76 percent less likely and Hispanic women 66 percent less likely than white women to receive consistent treatment for more than six months prior to delivery. To read the press release from Massachusetts General Hospital, click here.

# Primary Care Physicians Do Not Support Certain Medications for Treating Opioid Addiction

Investigators have found that as many as one third of this country's primary care physicians (PCPs) do not believe that medications used to treat opioid use disorder (OUD) are more effective than traditional nonpharmacologic treatments or that these medications are safe for long-term use. It was also determined that even PCPs who support medication for addiction treatment, and believe it to be an effective modality, have little interest in treating OUD and show little support for policies that allow office-based physicians to prescribe methadone or eliminate the buprenorphine waiver requirements. Researchers sent out questionnaires to a random sample of 1,000 physicians based in the U.S. and drawn from a physician database. Of the eligible respondents, 67.1 percent believed that treatment of OUD with medication was more effective than without, and 63.7 percent believed patients can safely use medication to manage OUD. However, only 20.2 percent expressed any interest in actually treating patients with OUD. This study's results were published in the online version of *Annals of Internal Medicine* – Click here to visit that website.

#### **Prescribing for Youth Orthopedic Injuries Dropping**

From 2004 to 2017 there was a noted decrease in the proportion of pediatric patients with minor orthopedic injuries who were prescribed opioids. The research was released as part of the American Academy of Orthopedic Surgeons' Virtual Education Experience and included a review of data from a national Pediatric Health Information System comprising 42 pediatric hospitals. Researchers found that just over 50 percent of patients received at least one dose of an opioid during an emergency visit for an orthopedic injury. In the study population, there was a decrease in the opioid prescription rate from 60 percent to under 30 percent from 2004 to 2017. In 2017, patients were 75 percent less likely to receive an opioid, with older teens being more likely to receive an opioid prescription and black patients being less likely than whites to receive an opioid. To visit the website for the American Academy of Orthopedic Surgeons, click here.

#### **Laws Punishing Pregnant Drug Users Are Not Working**

A new study shows that punitive laws and policies aimed at pregnant drug users are doing more harm than good. The study, co-authored by researchers at two universities and published in *Health Affairs*, compared the effects of punitive laws in states that have implemented them against states that do not have such laws on the books. Researchers used data from the Healthcare Cost and Utilization Project's State Inpatient Databases which houses records for 95 percent of hospital discharges from 37 states. It was found that in states with punitive laws in place, 29 percent fewer women were admitted to treatment programs compared to states without those laws. The authors further concluded that there was no significant statistical difference in the number of babies born with withdrawal symptoms in states with punitive laws compared to states without them. Proposed alternatives to punishing pregnant drug users include providing better prenatal care, behavioral counseling, and access to medication for addiction treatment such as methadone or buprenorphine. To visit the *Health Affairs* website, click here.

### Wage Supplements Helping Those with Opioid Use Disorder Stay Sober

A research team from John Hopkins University recruited 91 participants from the Center for Learning and Health at the Hopkins Bayview Medical Center and put them through three months of job training and drug testing. Fifty-six percent of the participants were African American, 40 percent were white, and 55 percent were men; all study participants suffering from opioid use disorder were receiving methadone or buprenorphine. Forty-four participants were randomly chosen to receive a wage supplement of \$8 per hour after the first three months, while the other 47 people received no extra financial incentives once the first three months ended. It was found that those given the wage supplements were 20 percent more likely to give a voluntary urine sample, 2.9 times more likely to get a job, and 2.7 times more likely to rise out of poverty. Participants will be followed for an additional year now that the wage supplements have ended to see if the reduced drug use and steady employment continues. This study was reported in the *Journal of Epidemiology & Community Health* – To read the full study, click here.

#### **Muscle Relaxant Use Skyrocketing**

Long-term use of skeletal muscle relaxant drugs tripled from 2005 to 2016, according to a new study from researchers at the University of Pennsylvania's Perelman School of Medicine. Researchers also found that (1) nearly 70 percent of patients prescribed muscle relaxants were simultaneously prescribed an opioid (a potentially dangerous combination) and (2) muscle relaxants were prescribed disproportionately to older adults (despite caution that the class of drugs including relaxants should be avoided in the 65 and older population). Muscle relaxants were originally approved and prescribed for short-term treatment of spasms and back pain but are today used to treat chronic pain, despite the lack of scientific evidence supporting alternative uses or long-term usage. To conduct the study, researchers used publicly available data from the National Ambulatory Medical Care Survey, examining the total number of visits per year and whether during those visits, the patient was prescribed a muscle relaxant either as a new prescription or as part of continued therapy. The number of visits resulting in new muscle relaxant prescriptions remained relatively stable during the period from 2005 to 2016, while office visits for continued muscle relaxant drug therapy tripled during that same time period. To read the full study in *JAMA Network Open*, click here.

#### **NEWS BITS**

California: Several Los Angeles City Council members are calling for a new emergency response model that promotes the use of trained specialists, rather than police officers, to assist homeless people and those suffering from mental health issues and substance use disorders. The motion that was filed calls for the development of a model that would divert nonviolent calls for service away from the Los Angeles Police Department and to non-law enforcement agencies.

A bill is pending in the California legislature that would greatly change the state's mental health and substance abuse parity law. According to the author of the bill, insured individuals cannot access the health services they need because current law only requires commercial health plans to cover medically necessary treatment for a limited number of disorders. The proposed measure would require coverage for all mental health and substance use disorders

California set new rules for accessing the state's prescription drug database, CURES (Controlled Substance Utilization Review and Evaluation System). New regulations, effective on July 1, 2020, spell out changes to how doctors, law enforcement officials, and others can access the database that contains personal information on what prescription drugs have been given to patients. Physicians and pharmacists will now be permitted to view patient records as far back as 24 months and will also be permitted to assign to a delegate, like a nurse practitioner, limited access to the database.

**Colorado:** Twelve pints of the prescription narcotic liquid codeine were recently found during a traffic stop outside the town of Frederick, Colorado. Liquid codeine is known on the street as "Lean," "Sizzurp," and "Purple Drank," and typically sells between \$300 and \$500 per pint. A popular drink among younger people is liquid codeine mixed with 7UP, and law enforcement is warning that this mixture can cause opioid dependency.

**Florida:** County commissioners in Orange County, Florida have unanimously approved an ordinance that will allow the establishment of an exchange program designed to prevent transmission of infectious diseases. Orange would be the seventh Florida county to create a community-based program that may include vaccinations, counseling, and referral to treatment.

**Massachusetts:** A state legislative committee endorsed a proposal to establish at least two supervised drug consumption sites, giving momentum to the idea that such sites will lower the death toll of the opioid epidemic. Under the proposed measure, the supervised facilities would offer hygienic space, sterile injection supplies, monitoring by health care professionals or other trained individuals, and referral to treatment and recovery services.

The Massachusetts Department of Public Health announced the awarding of a contract to Tapestry Health of Springfield for the deployment of a mobile addiction-services van that would assist those most at risk of an opioid overdose. The announced award of \$1.4 million will cover the cost to deploy vans in Springfield, Worcester, Boston, Fall River, and New Bedford. The hope is that the vans will provide care to individuals who are not receiving needed services through other means.

**Michigan:** The state of Michigan plans to expand coverage of opioid use disorder treatment and overdose reversal medication for hundreds of thousands of state residents, a move experts say will lower the number of people who die from opioid overdoses. The Department of Insurance and Financial Services is aiming to increase health insurance coverage of opioid use disorder treatment for the 650,000 Michigan residents enrolled in Affordable Care Act health plans.

**New Hampshire:** Rockingham County jail officials are in the final stages of making their jail only the second in the nation to dispense methadone to inmates who are in recovery. The jail is waiting for licensure of the program from the Drug Enforcement Administration, after which officials are hoping the initiative will save some of the 25 percent of inmates who die from overdoses after their release. Once fully operational, the jail will be permitted to prescribe methadone for more than 200 inmates at a time through three providers who were hired, including a new medical director.

**New Jersey:** Attorney General Gurbir Grewal recently announced a rule that would require healthcare practitioners to prescribe naloxone to their patients who regularly take high doses of opioids or who combine opioids with benzodiazepines such as Xanax. The rule took immediate effect and is widely supported throughout the state.

**New York:** New York City health workers have begun delivering free methadone to many suffering from opioid use disorders amid the coronavirus pandemic. The program was announced by the city's health department and will quickly expand by lowering age eligibility from 65 to 50. Federal regulations previously barred home delivery of methadone, but the COVID-19 pandemic led to an emergency loosening of the rules for addicts who tested positive for the disease, show symptoms, or are at high risk if they get infected. The controversial program has many opponents claiming that limited city resources would be better spent dealing with the novel coronavirus and its many associated problems.

**Washington:** Several counties in the state of Washington are reporting that fentanyl is beginning to edge out methamphetamine and heroin as the deadliest drug in their area. The synthetic opioid pain reliever has been making headlines as it has been responsible for an increasing percentage of overdoses. The coronavirus pandemic has disrupted the supply of fentanyl but has had little effect on the number of deaths.

**West Virginia:** West Virginians now have access to a new tool that can reduce isolation and offer support resources to persons with substance use disorder. The *Connections* app is designed to allow treatment providers throughout the state to stay connected to and engaged with their patients. Developers of the technology say *Connections* is an evidence-based mobile application designed, and proven, to provide ongoing support and relapse prevention to persons in recovery.

#### AROUT LEGISLATIVE ANALYSIS AND PUBLIC POLICY ASSOCIATION

The Legislative Analysis and Public Policy Association (LAPPA) is a 501(c)(3) nonprofit organization whose mission is to conduct legal and legislative research and analysis and draft legislation on effective law and policy in the areas of public safety and health, substance use disorders, and the criminal justice system.

LAPPA produces up-to-the-minute comparative analyses, publications, educational brochures, and other tools ranging from podcasts to model laws and policies that can be used by national, state, and local criminal justice and substance use disorder practitioners who want the latest comprehensive information on law and policy. Examples of topics on which LAPPA has assisted stakeholders include naloxone laws, law enforcement/community engagement, alternatives to incarceration for those with substance use disorders, medication-assisted treatment in prisons, and the involuntary commitment and guardianship of individuals with alcohol or substance use disorders.

For more information about LAPPA, please visit: <a href="https://legislativeanalysis.org/">https://legislativeanalysis.org/</a>.

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