

The Connecticut Opioid REsponse (CORE) Initiative

Working together to develop a strategic plan to address use,
addiction and overdose

Problem

- Prescription opioids, heroin and fentanyl are taking a devastating toll on the people of Connecticut

Goal

- Develop an effective strategic plan to support the efforts of the
 - Governor’s Alcohol and Drug Policy Council
 - Department of Mental Health and Addiction Services
 - Department of Children and Families
 - Department of Consumer Protection
 - Connecticut Prescription Monitoring and Reporting System
 - Department of Public Health
 - Office of Injury Prevention
 - Department of Corrections
 - Department of Education
 - Connecticut Prevention Network
 - Connecticut addiction treatment providers
 - Others
- To combat opioid addiction and overdose in Connecticut

Rhode Island Strategic Plan

- Values
 - Address stigma, locally derived, data-driven, evidence-based, sustainable, responsive, extraordinary, measurable
- Goal – to reduce opioid overdose deaths by one-third within 3 years
- Four key strategies
 - Increase treatment access
 - Increase access to naloxone
 - Decrease opioid and benzodiazepine co-prescribing
 - Increase access to peer recovery support

Rhode Island Metrics

- Treatment
 - Number of patients with opioid use disorder, number receiving medication assisted treatment (MAT) per year, retention in medication-assisted treatment, medication utilized
- Naloxone access
 - Number of prescribers prescribing naloxone; Number of naloxone prescriptions dispensed (overall), and to patients filling Schedule II opioid prescriptions or to patients filling opioid and benzodiazepine prescriptions

Rhode Island Metrics (2)

- Opioid-benzodiazepine co-prescribing
 - Number of benzodiazepines and opioid prescriptions dispensed within 30 days for same patient; number of opioid treatment program patients also receiving prescribed benzodiazepine
- Peer recovery support
 - Number of peer recovery coach encounters to Emergency Department, to hospital, to prison, in street outreach sessions; Rate of referral and retention (one-month) to treatment, to medication-assisted treatment, to recovery supports

Proposed Connecticut Strategic Plan

- Days 1-90
 - Consult with local and national experts
 - Meet with key stakeholders in Connecticut
 - Develop a succinct, prioritized, 3-year strategy for the state on opioid addiction and overdose
 - Proposal will emphasize several strategic initiatives, based on evidence, public input, and judgment about where efforts can have the most impact
 - Draw upon key elements, and lessons learned and promising models from existing plans and initiatives
 - Take public comments on a draft report

Timeline

May

Gather & analyze data

Meet with representatives, stakeholders

Review existing literature

Consult with national experts

June

Gather & analyze data

Meet with representatives, stakeholders

Consult with national experts

July

Analysis & Writing

Public comment on draft plan components

Connecticut Strategic Plan

- From **days 91 through to years 2 and 3**, the Yale team will be available to support the implementation of the strategy
- Assist in monitoring key metrics

CORE Initiative Team

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Potential CORE Targets

- **Treatment**

- Strategic expansion of opioid treatment programs, long and short-term treatment services
- Increase DATA waivers and support services for office-based treatment of opioid use disorder
- Increase linkage from ED, hospital, criminal justice, syringe exchange programs
- Increase recovery support services

Potential CORE Targets

- **Education**

- Providers

- Monthly DATA 2000 and REMS trainings

- Public

- Education regarding treatments including opioid agonist treatment

Potential CORE Targets

- **Risk reduction**

- Overdose education and naloxone distribution in primary care (with all opioids), pain clinics, treatment programs
- Increased guideline adherence
 - Dose reduction in medical settings
 - Opioid/benzodiazepine co-prescribing

- **Prevention**

Potential CORE Targets

- **Outreach**

- Rapid response to overdose events
- Peer driven interventions

- **Identify Barriers**

- Prior authorizations
- Co-pays

Potential CORE Methods and Metrics

- **Mapping**

- Overdose and

- Treatment sites

- Opioid Treatment programs

- Buprenorphine providers

- Other treatments

- **Overdose**

- % among patients receiving opioids/benzos in PDMP

- % among patients receiving buprenorphine in PDMP

- % among patients receiving addiction treatment

Potential CORE Metrics

- **Treatment**

- Number receiving MAT

- Methadone, buprenorphine, naltrexone

- Number of providers prescribing buprenorphine or naltrexone (30, 100, 200)

- **Education**

- Number of providers trained

- DATA 2000
- REMS

Potential CORE Metrics

- **Risk reduction**

- Number of naloxone prescribers
- Number of naloxone prescriptions
- Number of patients receiving high dose opioids
- Number of patients receiving opioids and benzodiazepine prescriptions
- Number of patients in addiction treatment receiving benzodiazepine prescriptions
- Retention in medication-assisted treatment