



Foundation *for*
Opioid Response Efforts

01/25/24

Policy and Regulatory Opportunities to Address the Opioid and Overdose Crisis in 2024



Bipartisan Policy Center



Temple
University
Beasley School of Law



ROBERT H. MCKINNEY
SCHOOL OF LAW
INDIANA UNIVERSITY

Introduction



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Ken Shatzkes, PhD
Program Director
Foundation for Opioid Response Efforts



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Agenda

1. Introduction and Webinar Logistics

2. Assessing Federal Levers Addressing the Opioid Crisis

Michele Gilbert, MPH (Senior Policy Analyst, Bipartisan Policy Center)

3. Overcoming Legal Barriers to a Whole-of-Government Approach to Overdose

Nicolas P. Terry, LLM (Hall Render Professor of Law & Executive Director, Hall Center for Law and Health, Indiana University McKinney School of Law)

4. Fireside Chat

Regina LaBelle, JD (Director of the Addiction and Public Policy Initiative, O'Neill Institute for National and Global Health Law, Georgetown University Law Center)

Richard G. Frank, PhD (Leonard D. Schaeffer Chair and Director, Schaeffer Initiative on Health Policy, The Brookings Institution)

Karen A. Scott, MD, MPH (President, FORE)

5. Question and Answer Session

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Webinar Speakers



FORE Grantees

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**Michele
Gilbert, MPH**

*Senior Policy
Analyst
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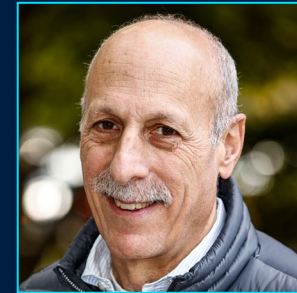
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**Richard G.
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Webinar Logistics

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1. The webinar is being recorded and will be available on www.ForeFdn.org shortly after the session ends.
2. Presentation slides will be made available for download on our website.
3. Please use the “Q&A” found at the bottom of your Zoom screen.
 - If you have a similar question, please upvote using the thumbs up button on the question.
 - We will read as many questions live as time permits.
4. There will be a brief survey immediately following the webinar. Please provide us with feedback!

About FORE

Founded in 2018, the **Foundation for Opioid Response Efforts (FORE)** is a 501(c)(3) private, national, grantmaking foundation focused on one urgent public health emergency – **the opioid crisis**.

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Vision

To inspire and accelerate action to end the opioid crisis

Mission

To convene and support partners advancing patient-centered, **evidence-based solutions** addressing the opioid crisis

Focus

With **patients at the center**, our focus includes:



Professional
education



Payer & Provider
strategies



Policy initiatives



Public awareness



FORE

Assess Federal Levers Addressing the Opioid Crisis



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Michele Gilbert, MPH

Senior Policy Analyst
Bipartisan Policy Center

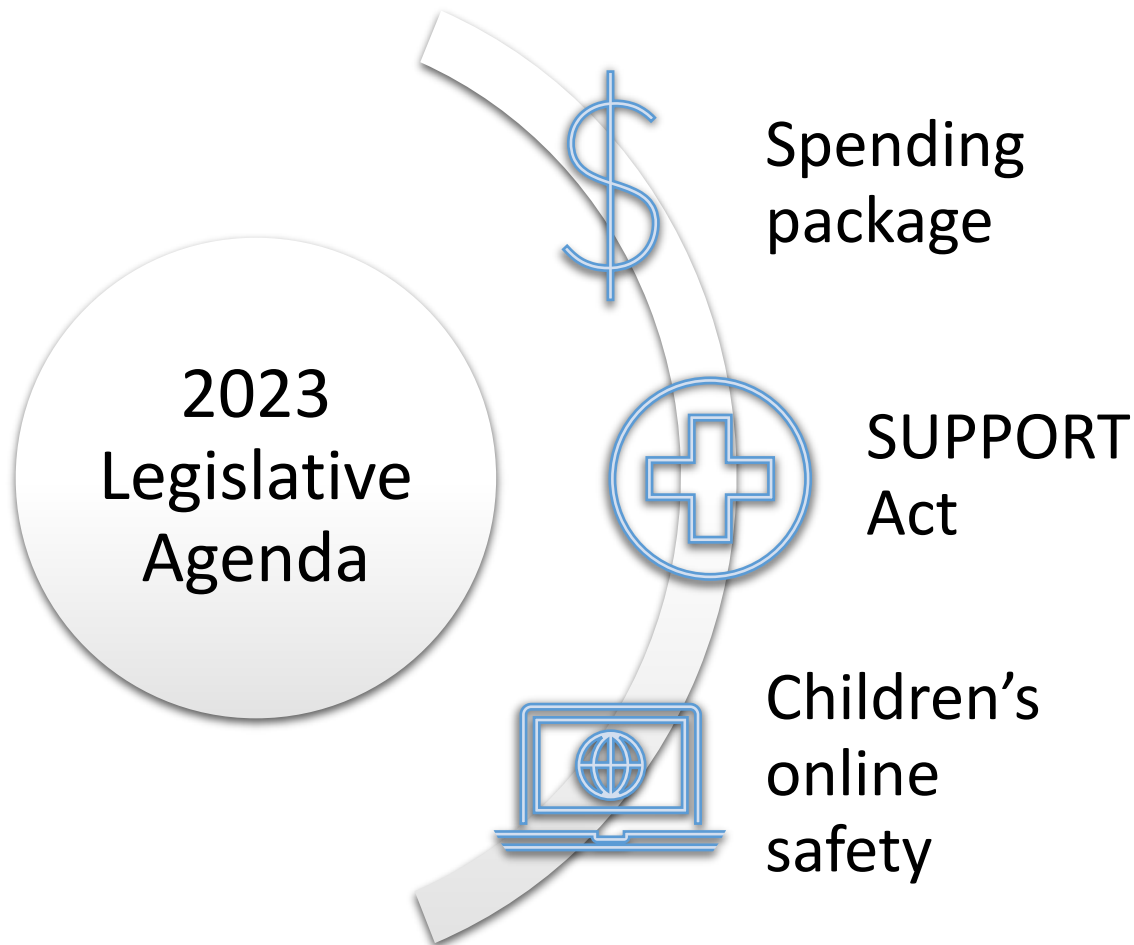
Background on BPC

- The Bipartisan Policy Center (BPC) is a Washington, DC-based think tank that **actively fosters bipartisanship** by combining the best ideas from both parties to promote health, security, and opportunity for all Americans.
- Our policy solutions are the product of informed deliberations by former elected and appointed officials, business and labor leaders, and academics and advocates who represent both sides of the political spectrum.

BPC's Impact

- Over the past several years, we've developed solutions to address the nation's mental health and substance use crises. This includes
 - BPC's Opioid Crisis Task Force, which was comprised of former elected officials, academics, and health care leaders
 - Our Behavioral Health Integration Task Force, led by former Sen. John Sununu of New Hampshire and former Rep. Patrick Kennedy of Rhode Island
 - We have also focused on crisis response, workforce, rural access to care, and other topics.
- We just launched our Youth Mental Health and Substance Use Task Force!
- BPC prioritizes one thing above all else: Getting things done.

Congress still needs to finish its 2023 to-do list



Congress has advanced behavioral health policies in recent years...

Since 2024 is an election year, Congress may be content with their achievements thus far, including:

- **American Rescue Plan Act (ARPA):** Expanded resources for formula grant programs, workforce development efforts, and community-based services.
 - *Many grants will expire in 2025 if they aren't reauthorized*
- **Bipartisan Safer Communities Act (BSCA):** Authorized additional resources for mental health and crisis care, including in schools.
- **Consolidated Appropriations Act of 2023:** Expanded workforce programs, strengthened integration with primary care (including telehealth), and eliminated the X waiver.
- **National Suicide Hotline Designation Act:** Authorized the new 988 program

... But there's still room to build on progress

- ***Youth substance use***
 - Social media companies
 - Schools
- ***Address the fentanyl crisis***
 - Supply
 - Drug sales
 - Crisis response/harm reduction
- ***Enhance care delivery***
- Peer support/recovery specialists
- Access to MOUD, especially methadone and training providers to prescribe buprenorphine
- Digital health and technology (e.g., AI)
- ***Reauthorize ONDCP and expiring grants***

BPC's Impact: SUPPORT Act

BPC played an instrumental role in educating members of Congress and their staff on policies relevant to the SUPPORT Act. This has resulted in provisions that:

- *enhance peer support and recovery specialists;*
- *improve access to care for justice-involved individuals;*
- *expand resources for key programs and services; and*
- *improve data reporting and evaluation potential.*

BPC continues to educate members to ensure the SUPPORT Act includes evidence-based, bipartisan policies.

Opportunities in the Administration

Since 2024 is an election year, the Biden administration will showcase and add to their achievements.

- Behavioral health was part of President Biden's Unity Agenda unveiled in 2022.
 - *HHS recently released their [list of accomplishments](#)*
- With telehealth flexibilities expiring on December 31, 2024, there is an opportunity to conceptualize next policy steps.
- CMS has been working toward:
 - improved payment (e.g., CMMI's most recent behavioral health integration payment model)
 - improved coverage for behavioral health services and providers

Key opportunities:

- Tele-behavioral health and tele-prescribing
- Medicare and Medicaid programs
- Physician payment

BPC's Impact: Biden Administration

BPC supported the Biden administration in:

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- *developing a county-level dashboard for nonfatal overdoses (late 2022);*
- *joining advocates' calls to eliminate the X waiver (late 2022);*
- *expanding access to treatment via telehealth (spring 2023);*
- *contributing to a GAO report exploring the State Opioid Response grant program (summer 2023);*
- *improving Medicare payment for unlicensed behavioral health providers (late 2023); and*
- *developing a CMMI model on reverse behavioral health integration (early 2024).*

Overcoming Legal Barriers to a Whole-of-Government Approach to Overdose



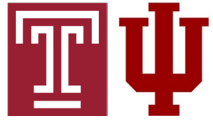
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Disclosures

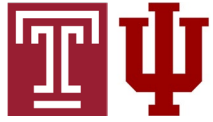


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This work was funded by the Foundation for Opioid Response Efforts (FORE). The views and conclusions contained in this presentation are those of the authors and should not be interpreted as representing the official policies or stance, either expressed or implied, of FORE.

The speaker does not have any conflicts of interest to disclose.

Years and Years of Terrible Impact

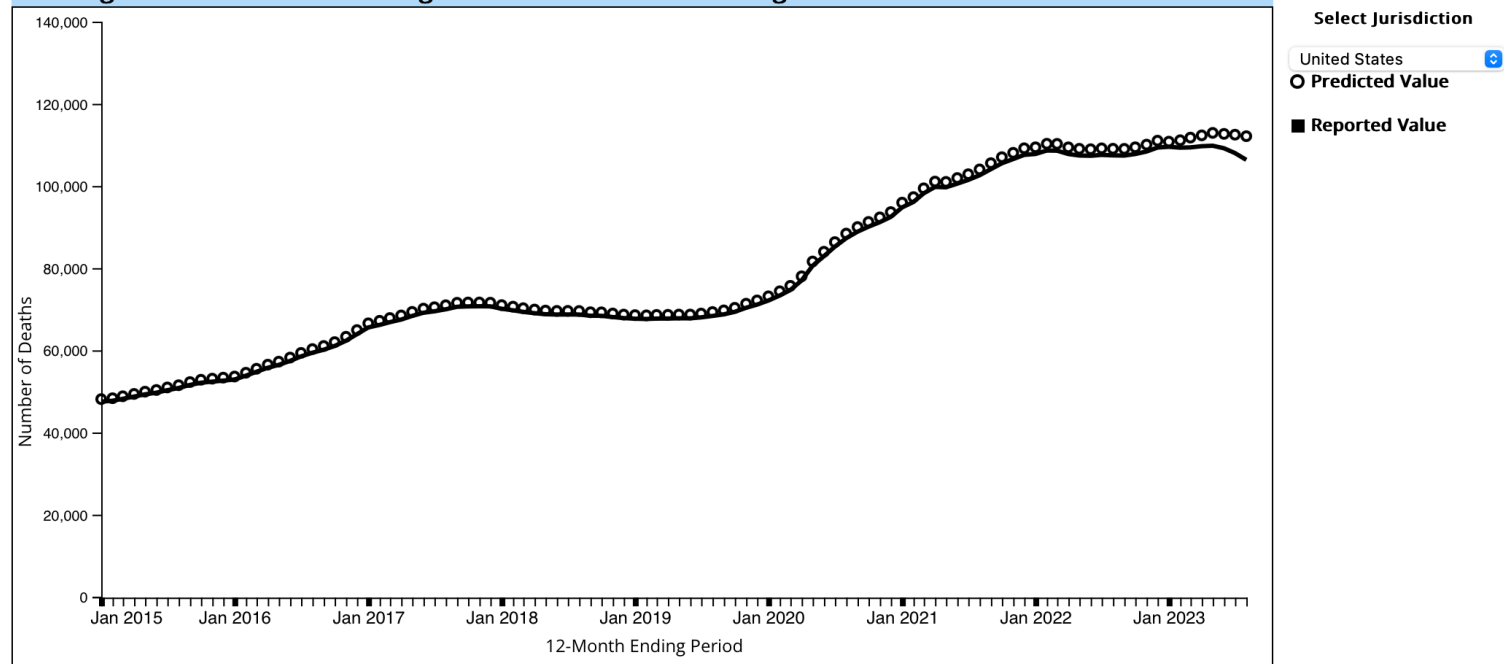


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12 Month-ending Provisional Number and Percent Change of Drug Overdose Deaths

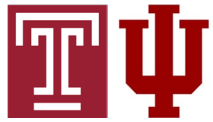
Based on data available for analysis on: January 7, 2024

Figure 1a. 12 Month-ending Provisional Counts of Drug Overdose Deaths: United States



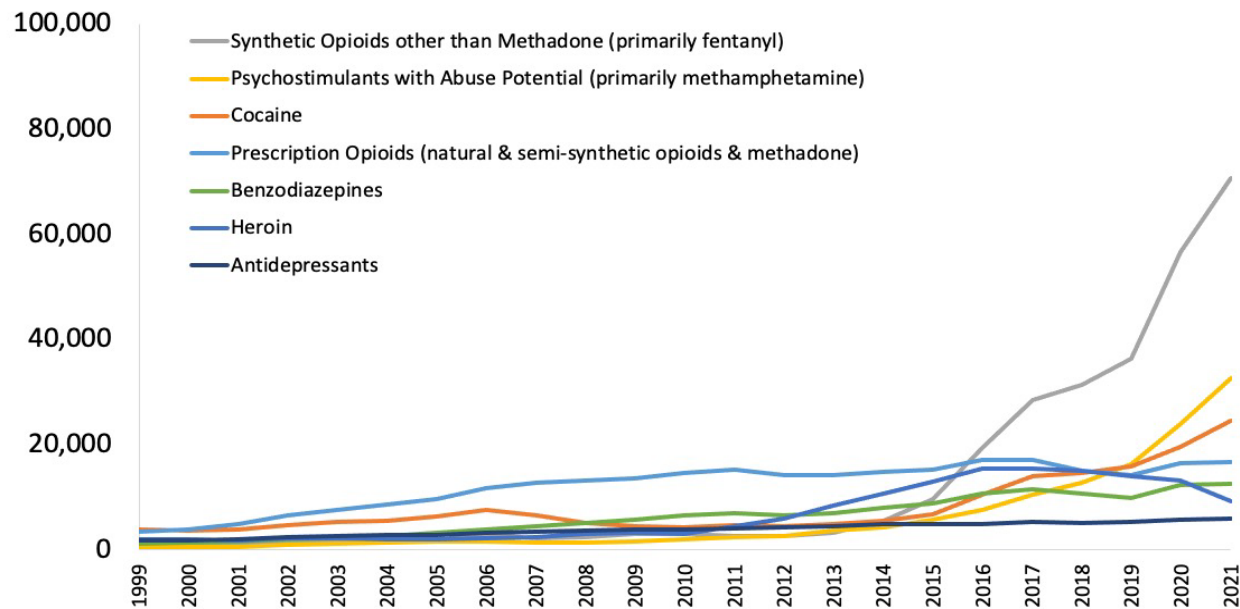
<https://www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm>

Years and Years of Terrible Impact



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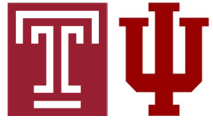
Figure 2. National Drug-Involved Overdose Deaths*, Number Among All Ages, 1999-2021



*Includes deaths with underlying causes of unintentional drug poisoning (X40–X44), suicide drug poisoning (X60–X64), homicide drug poisoning (X85), or drug poisoning of undetermined intent (Y10–Y14), as coded in the International Classification of Diseases, 10th Revision. Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999–2021 on CDC WONDER Online Database, released 1/2023.

<https://nida.nih.gov/research-topics/trends-statistics/overdose-death-rates>

Years and Years of Terrible Impact



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Overall life expectancy at birth in years

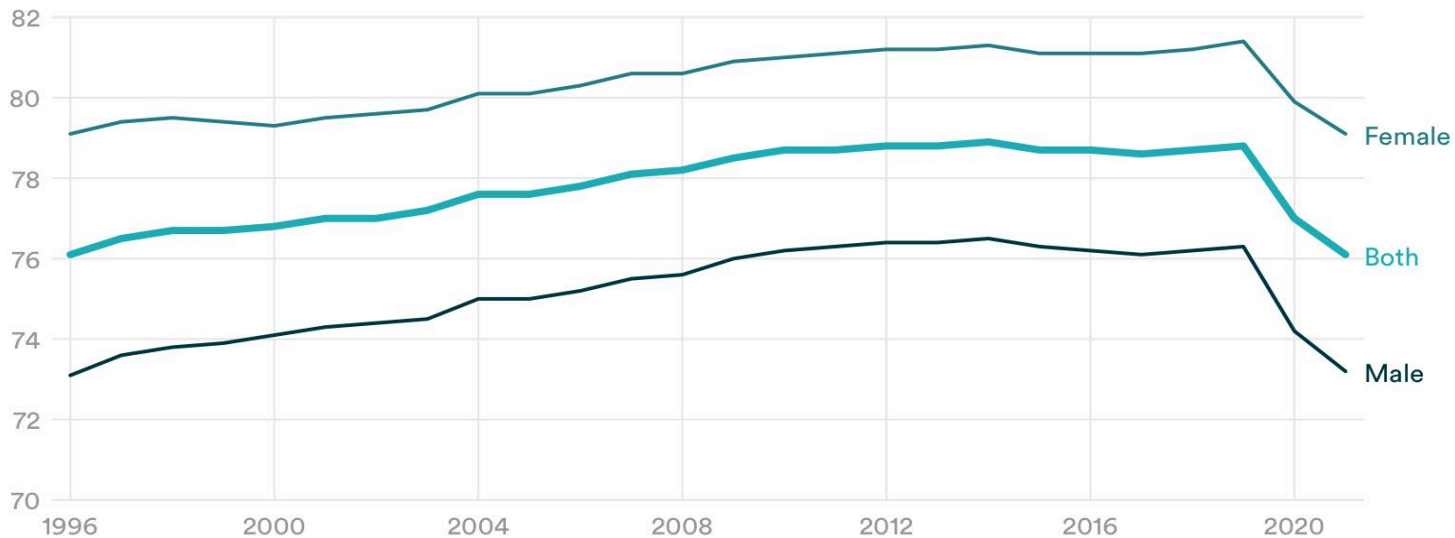
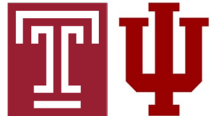


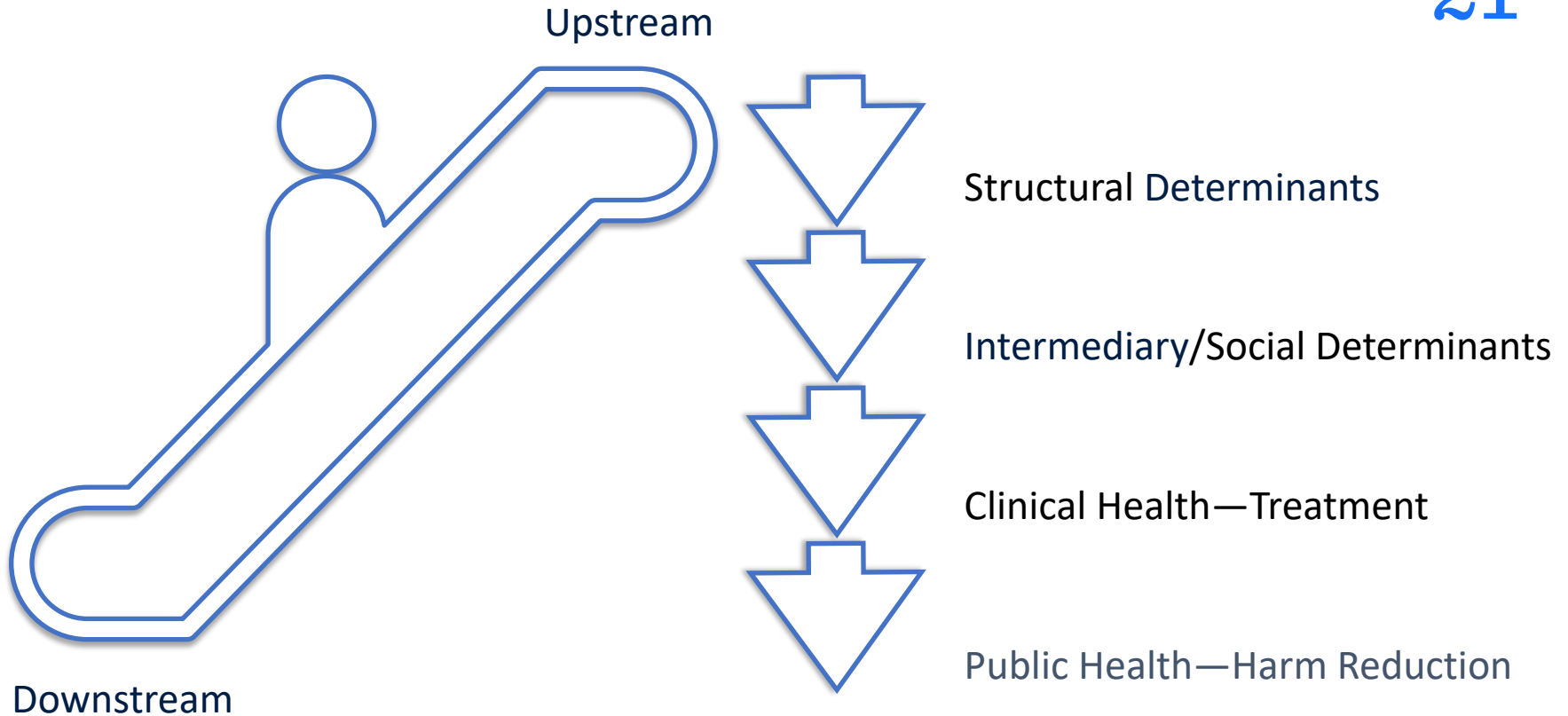
Chart: J. Emory Parker/STAT • Source: National Center for Health Statistics, National Vital Statistics System, Mortality

<https://www.statnews.com/2022/08/31/u-s-life-expectancy-drops-sharply-the-second-consecutive-decline/>

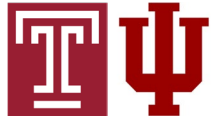
Don't We Know Already What to Do/Where to Intervene?



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Our Project: Improving Intervention Using W-G Lens



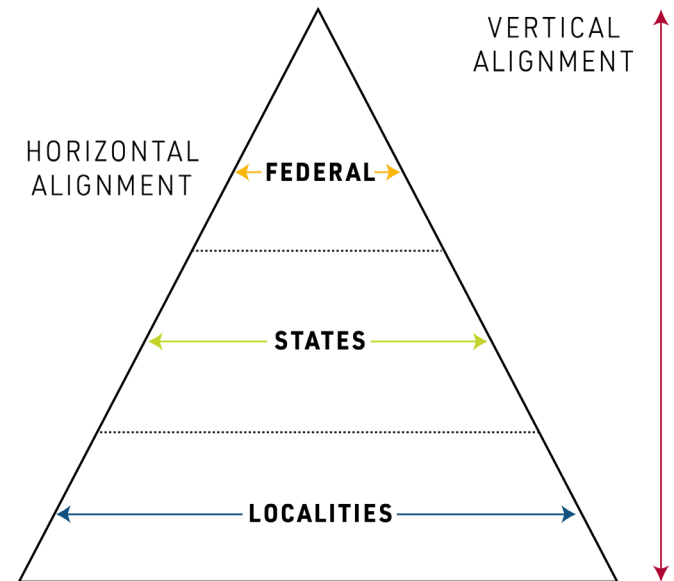
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Whole of Government (W-G)

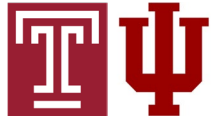
Assumption: What is required for effective policy making is comprehensive, coordinated government action across different agencies at one level of government (federal or state and between different levels (federal, state, tribal, and local)

The former = horizontal W-G

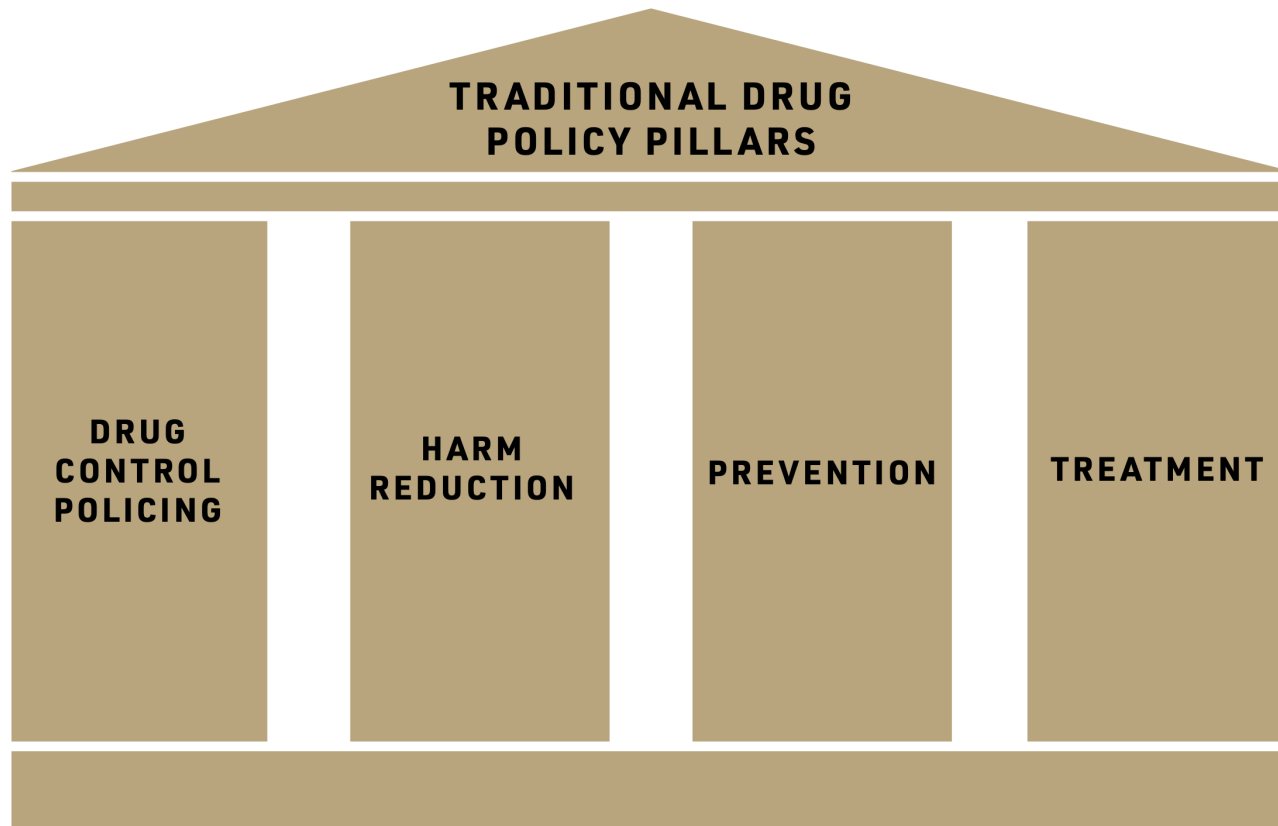
The latter = vertical WG.



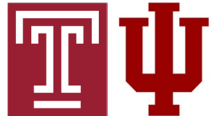
Hypothesis #1: A House Divided Against Itself



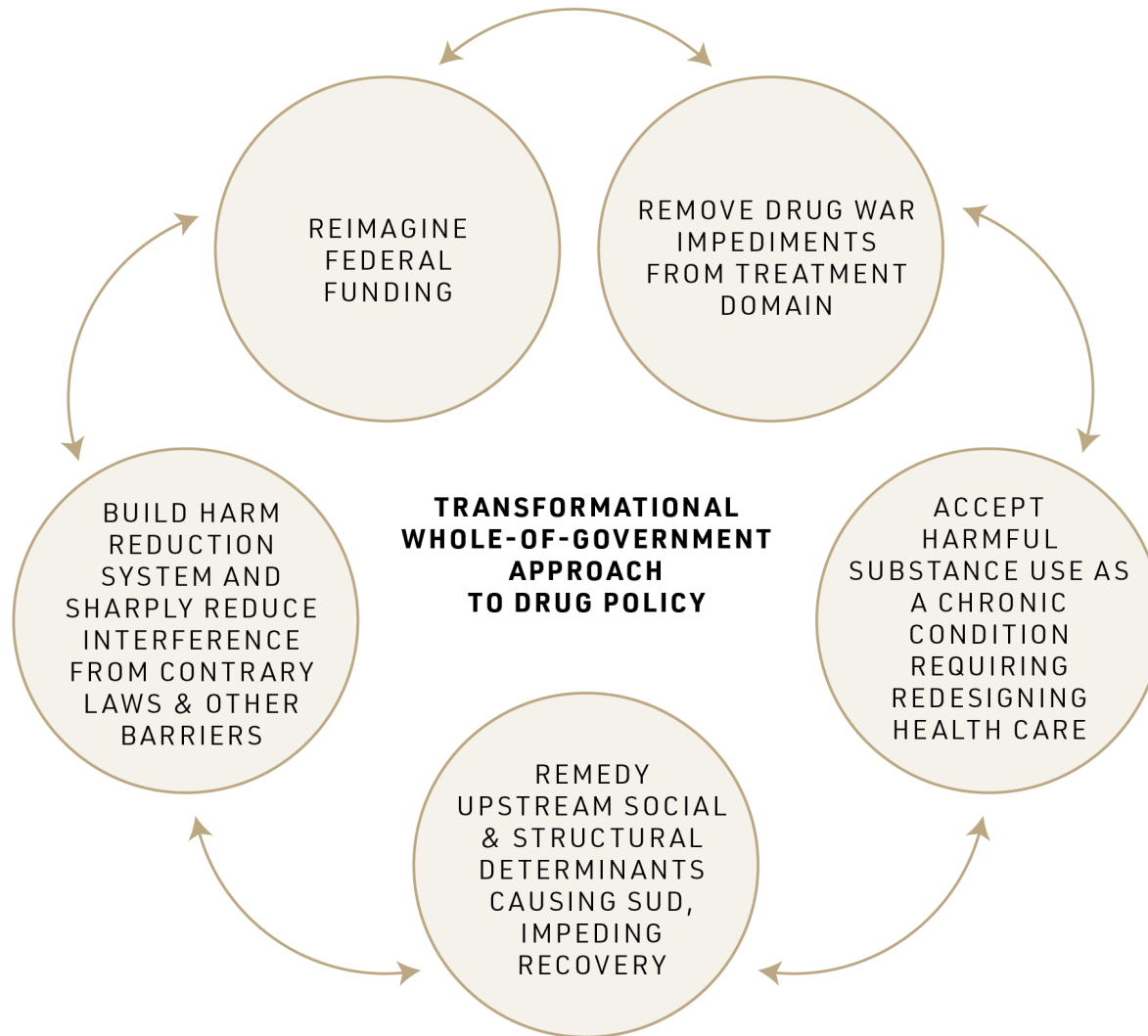
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Rethinking Policy Fundamentals

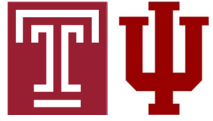


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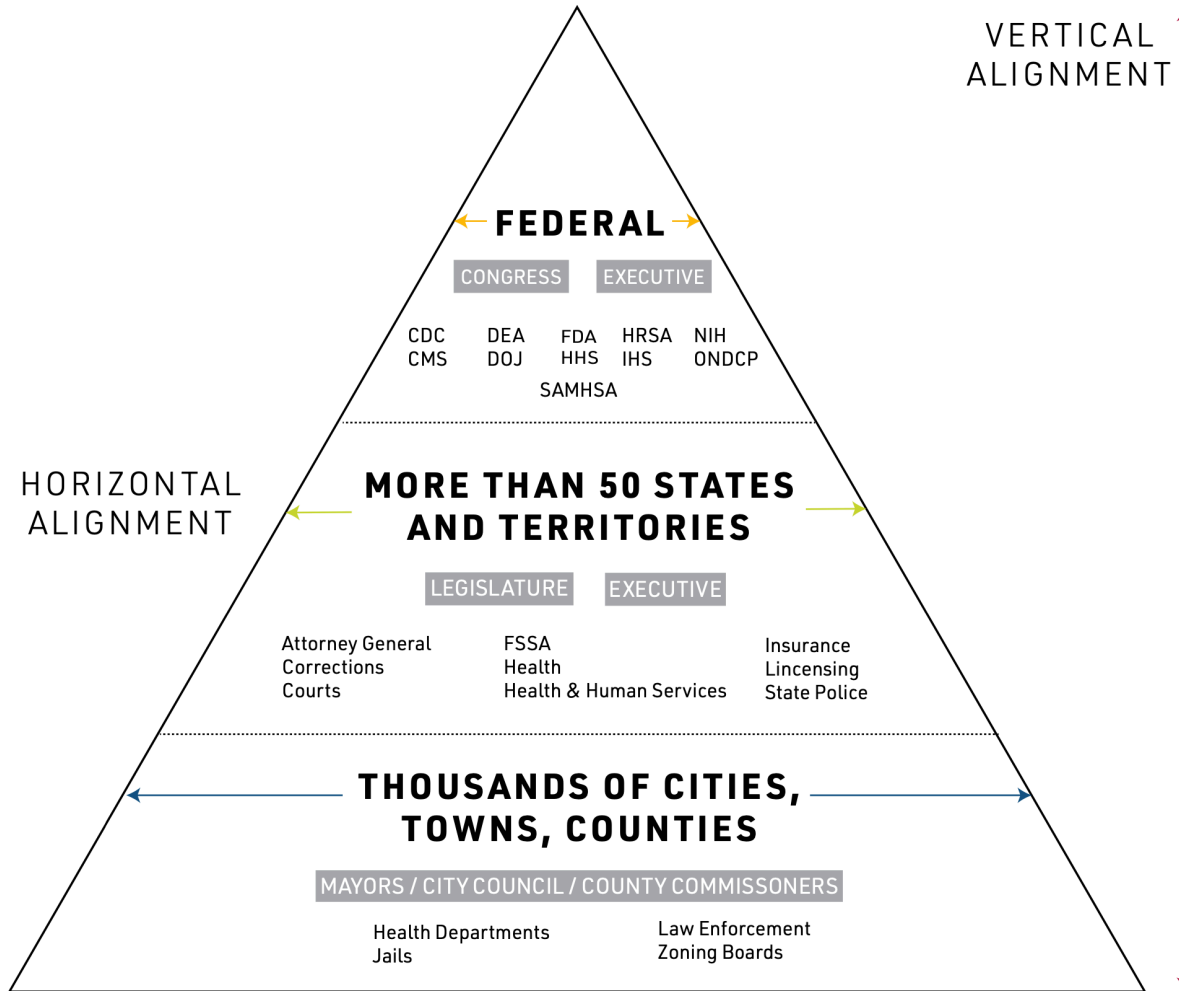


**No more policy “pillars”
No more drug war**

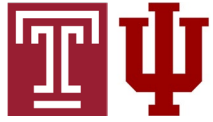
Hypothesis #2: A House Divided...



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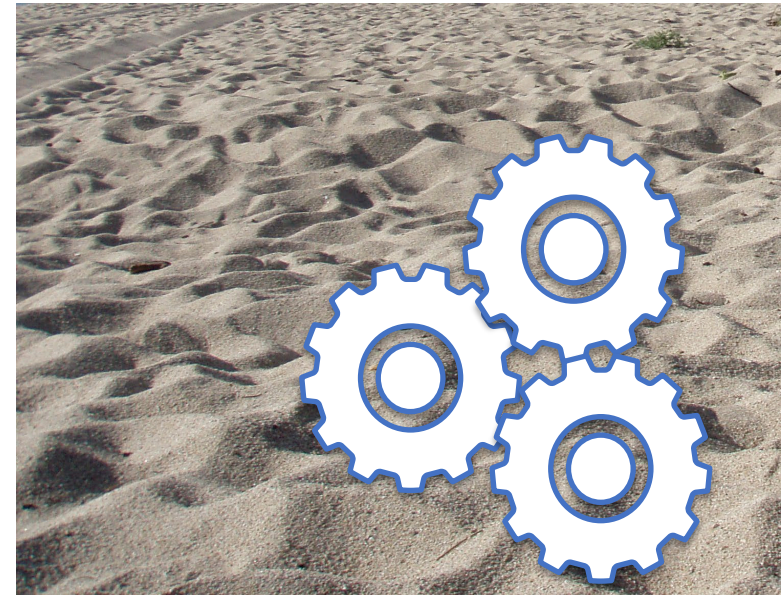


What Explains the Sand in the Gears? Low-Hanging Fruit

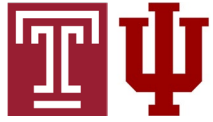


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- Components of “Wicked” Problems frequently are other wicked problems (e.g., limited access to affordable health care)
- Horizontal—Lack of Interagency Alignment/Cooperation (e.g., DEA-DoJ-HHS-SAMHSA-FDA)
- Vertical—Federalism (e.g., Medicaid Expansion); Home Rule (NIMBYism)
- Federal Funding of State Action—Endorsed BPC’s “braiding” framework proposals/payer of last resort model

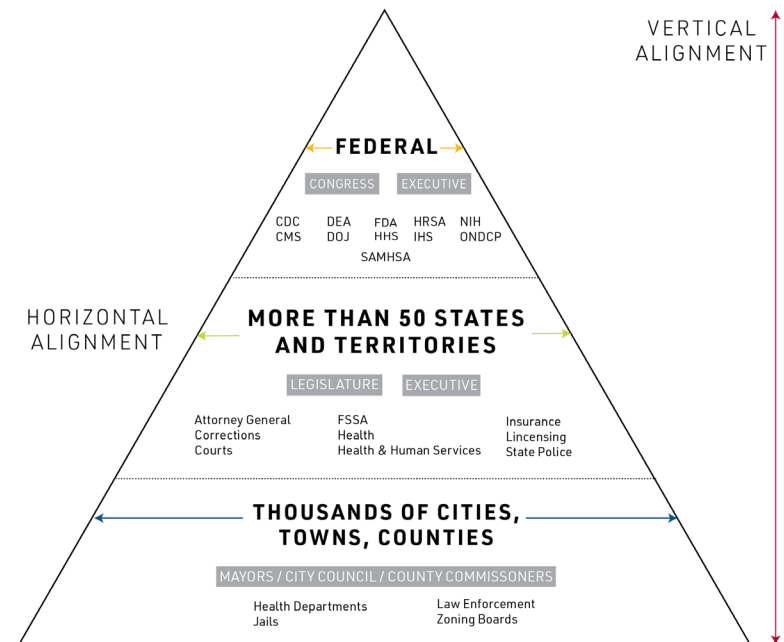


Identifying the LEGAL Barriers to Vertical and Horizontal Alignment

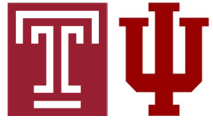


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- 84 opportunities for US drug policy reform at the federal, state, and local levels.
- Identified across federal, state, and local governments
- Categorized across four overall policy domains:
 - Drug policing
 - Harm reduction
 - Health care
 - Social determinants of health



Harm Reduction



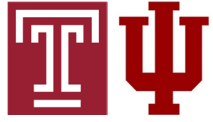
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Build a modern harm reduction system and allow it to do its job with sharply reduced interference from contrary federal policies, inconsistent state laws, and structural barriers.

17 Harm Reduction Recommendations

- 4 referenced naloxone access
- 6 referenced syringe services
- 3 referenced overdose prevention centers (OPCs)

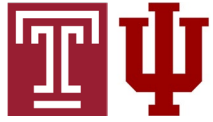
Health Care



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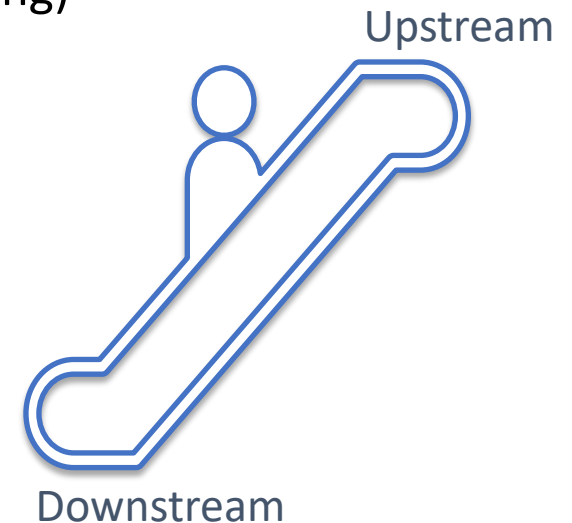
- Accept that harmful substance use is not only a chronic condition but one that requires redesigning health care
- 38 health care recommendations
 - 8 referenced Medicaid
 - 11 referenced medications, primarily opioid agonist therapy (OAT)
 - 6 referenced increased regulation of private insurance to increase access/reduce cost

Opportunities, But Progress?

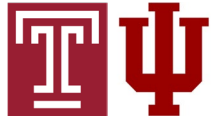


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- Long term
 - Structural Determinants (including Drug policing)
 - Social Determinants
- Medium Term
 - Renewal of SUPPORT Act
 - Support Increased Access to Health Care
- Short term
 - Agency-Based Incremental Change
 - Vigilance in the Face of States' Back-Sliding



Thank you!



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We also recognize the contributions of the Expert Advisory Committee who provided valuable feedback while developing the white paper series over the course of this project. The EAC includes Daniel Blaney-Koen, American Medical Association; Fred Wells Brason, Project Lazarus; Jessica Breslin, ChangeLab Solutions; Nabarun Dasgupta, University of North Carolina at Chapel Hill Injury Prevention Research Center; Corey Davis, Network for Public Health Law; Jeremy Douglas, Housing Works; Taleed El-Sabawi, Florida International University; Tracie Gardner, Legal Action Center; Daliah Heller, Vital Strategies; Kelli Komro, Emory University; Matthew Lawrence, Emory University; Dave Lucas, Center for Court Innovation; Emma (Beth) McGinty, Weill Cornell Medicine; Keli McLoyd, City of Philadelphia; Jennifer Karas Montez, Syracuse University; Kate Nicholson, National Pain Advocacy Center; Anand K. Parekh, Bipartisan Policy Center; and Louise Vincent, Urban Survivors Union.

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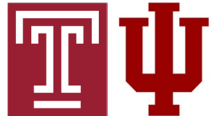
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Get the White Papers & Database of “Shovel-Ready” Legal Actions



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Scan the QR code to access the full series of white papers addressing the W-G approach to opioid policy in the United States.

Fireside Chat



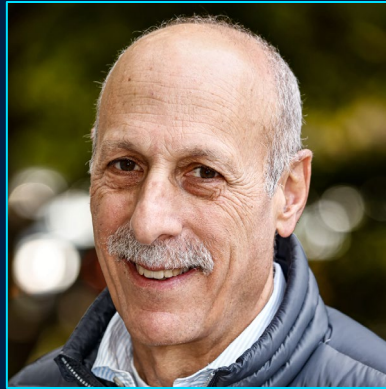
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Question and Answer Session



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Take Care of Yourself!
Thank You For Your Work!

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