

2018 National Opioid Crisis Management Congress

February 22-23, 2018 JW Marriott, Orlando Grande Lakes, Orlando, Florida

About the Conference

National attention is focused on the opioid crisis, and communities are struggling to respond. According to the U.S. Centers for Disease Control, as the clinical use of opioids has risen over the past two decades, opioid-associated harm has risen in parallel.

Chronic pain affects approximately 100 million Americans, making it one of the most common reasons for patients to seek medical care. Over the past decade there has been a four-fold increase in opioid prescribing. During the same time period, there was a four-fold increase in unintentional opioid overdose deaths, and a five-fold increase in substance abuse treatment admissions for prescription opioid addiction.

The ongoing opioid crisis lies at the intersection of two substantial public health challenges—reducing the burden of suffering from pain and containing the rising toll of the harms that can arise from the use of opioid medications.

This conference will address the state of the science in pain management, characterize the epidemiology of the opioid epidemic, and identify actions that can be taken to respond to this crisis. Gain expert insight into an epidemic from top thought leaders in opioid management who will share their latest research and real world knowledge in the evolving paradigm of opioids in medicine. In addition, experts at the state and federal levels providing leadership on the opioid public health crisis will present developing collaborative strategic partnerships to serve our most vulnerable citizens.

Preliminary Agenda

Day One

7:15am – 8:00am

Conference Registration & Networking Breakfast

8:00am – 8:10am

Chairperson's Opening Remarks

8:10am – 8:55am

Keynote

The Opioid Epidemic in the United States: The CDC Response

The U.S. is in the midst of an opioid epidemic. This presentation will outline the public health burden and detail the CDC's public health approach to prevention. Specifically, it will highlight the agency's signature initiatives: including the dissemination of CDC Opioid Prescribing guideline for chronic pain; the implementation of our large-scale and multi-pronged Overdose Prevention in State Initiative and our new communication campaign to raise awareness about the risks of prescription opioids.

Jamie E. Mells, PhD

Lieutenant, U.S. Public Health Service

Division of Analysis, Research and Practice Integration

Centers for Disease Control and Prevention (CDC)

8:55am – 9:35am

Opioid Drug Abuse in the United States: Challenges and Solutions

The opioid epidemic is often portrayed as a recent phenomenon. However, the roots extend back at least 30 to 90 years. Abuse of prescription opioids is an important but certainly not the only influence on the human toll caused by substance abuse. This presentation will present trends in all types of substance abuse, but focus on the opioid epidemic. There are many data to show how the popular view of opioid abuse to suggest appropriate public health and clinician activities. What is the relation between prescription opioids and other drugs of abuse like the GABA-ergic medications and antipsychotic medications like quetiapine (Seroquel) as well as illicit drugs like cocaine, amphetamines or heroin? What guidance can we glean from former attempts to eliminate opioids abuse or substance abuse in general? What interventions for opioid abuse look promising based on research data?

Richard C. Dart, MD, PhD

Director

Rocky Mountain Poison and Drug Center

Chairman

Denver Health and Hospital Authority

Professor

University of Colorado School of Medicine

9:35am – 10:05am

Networking & Refreshments Break

10:05am – 10:45am

How Insurers Can Help Fight the Opioid Epidemic

Of the approximately 100 million Americans who take prescription opioids each year, almost 3 million receive their prescriptions from five to as many as 20 different physicians. The practice, often called “doctor shopping,” allows opioid-addicted individuals to consume an enormous and dangerous number of pills with the unwitting help of doctors. Doctor shopping also lets drug dealers use the healthcare system to subsidize their business. Doctor shopping is possible because none of the doctor shoppers’ prescribers knows that they are only one of many providers of opioids. Enter someone with full information: the insurer. This session will discuss the role of health plans in curbing the opioid crisis. Topics will include:

- Using innovative data analysis to monitor opioid prescribing of providers
- “Reimbursement lock-in,” (when the enrollee’s prescriptions for opioids will only be covered if they are written by a single provider of the patient’s choosing)
- Implementing a pharmacist-led medication therapy management program
- Steps to curb the abuse of opioid prescriptions

Kat Wolf Khachatourian, PharmD, MBA

Vice President, Delegation Oversight; Pharmacy Services & Strategy

QualChoice Health Plan

10:45am – 11:25am

The Prescription Drug and Heroin Epidemic in Wisconsin

The Division of Care and Treatment Services State Opioid Treatment Authority (SOTA) will provide an overview of Wisconsin’s drug trends, current data and evidence based strategies. Attendees will leave with a knowledge of how the Department of Health Services is addressing the problem, evidence based strategies, and what state resources are available in Wisconsin. Learning objectives will include:

- Learn drug trends and current data in Wisconsin
- Understand the signs and symptoms of heroin use, opioid prescription misuse/abuse
- Understand the extent of the Opioid problem in Wisconsin and nationally
- Understand medication assisted treatment (MAT) and its application in Wisconsin

- Learn ways to implement MAT into current practices

Elizabeth Collier, MSW, CSAC, ICS, LCSW

State Opioid Treatment Authority

Wisconsin Department of Health Services, Division of Care and Treatment Services, Bureau of Prevention Treatment and Recovery

11:25am – 12:05pm

The Opioid Crisis: Substance Abuse and Mental Health Services Administration's (SAMHSA) Response

Approximately 11.8 million Americans misused an opioid in 2016, the new report says. Of those, just 8% used heroin. The majority misused prescription painkillers, and the main reason wasn't to get high but to get pain relief. In addition, an estimated 2.1 million people were addicted to heroin or prescription painkillers last year, a number that has remained fairly constant since 2011. But while opioid use hasn't changed much, the number of drug overdoses is expected to grow. The number of heroin users in the United States jumped from 404,000 in 2002 to 948,000 in 2016, a 135% increase, according to the most recent government numbers. The number of people who had fatal overdoses related to heroin has skyrocketed from 2,089 in 2002 to an estimated 13,219 in 2016 -- a 533% jump. In response to the current crisis the federal government has committed over \$70 million over multiple years to help communities and healthcare providers prevent opioid overdose deaths and provide treatment for opioid use disorder, of which \$28 million will be dedicated for medication-assisted treatment (MAT).

Anthony Campbell, DO, FACP

Medical Officer

Center for Substance Abuse Treatment

Substance Abuse Mental Health Services Administration (SAMHSA)

U.S. Department of Health & Human Services

12:05pm – 1:05pm

Lunch

1:05pm – 1:45pm

Expanding the Use and Benefits of the Prescription Drug Monitoring Program

Prescription Drug Monitoring Programs (PDMPs) are one important tool to help with reducing the opioid crisis. PDMPs help to identify individuals who may be misusing or abusing opioid prescriptions and other prescription drugs. By leveraging the success and benefits of these programs, clinicians have valuable information to identify possible misuse of opioids and other prescription drugs. The integration of the PDMP directly into the provider's workflow can encourage and increase the use of the system to remove barriers to access.

Kevin C. Borchert, PharmD

PDMP Program Director

Nebraska Health Information Initiative

1:45pm – 2:25pm

Collaboration Between Opioid Treatment Programs and Community Partners

Reducing the Community Prescribed Opioid Load as a Harm Reduction Strategy

In response to the heightened risks associated with the use of opioids, this session will discuss community safety strategies to reduce the harm imposed by opioids on communities, and help to control the opioid epidemic. Topics will include:

- Best practice in opioid prescribing and monitoring to reduce the quantity of opioids in circulation

- Strategies to assist healthcare partnerships and collaborations by advancing their understanding of medication assisted treatment as a crucial element to community wellness in an era of healthcare reform
- The essential role that the community plays in recovery support and prevention

Terry Cook, Ed.S.

Assistant Director, DHMA

State Opioid Treatment Authority, Indiana

2:25pm – 2:55 pm

Networking & Refreshments Break

2:55pm – 3:35pm

Integrated Treatment for Pregnant and Parenting Women with Opioid Use Disorders

Communities across Kentucky are being ravaged by the opioid epidemic. Pregnant and parenting women with opioid use disorders are a particularly vulnerable population with unique and often unmet treatment needs. However, progress is being made and there is cause for hope. The Kentucky Cabinet for Health and Family Service's Supporting Mothers to Achieve Recovery through Treatment and Supports (SMARTS) Initiative has been working in several communities to combat this epidemic. Topics covered include integrated treatment for this population, history of the opioid crisis, adverse childhood experiences, neonatal abstinence syndrome, medication assisted treatment, trauma informed care, and parent/infant attachment.

Kris Shera

Grant Project Director

Department of Behavioral Health, Intellectual and Developmental Disabilities

Kentucky Cabinet for Health and Family Services

3:35pm – 4:15pm

Maternal Opiate Medical Support: Building Partnerships to Improve Care

Funded by the Ohio Department of Medicaid and the Ohio Department of Mental Health and Addiction Services, the Maternal Opiate Medical Supports (MOMS) project was a two-year initiative that emphasized a holistic approach for providing treatment to pregnant women with opioid substance use disorder. Attendees will review learn about the development of the MOMS model, outcomes of the project, and collaboration efforts between MOMS project sites and child welfare agencies.

Rick Massatti, PhD, MSW, MPH, LSW

State Opioid Treatment Authority, Medical Director's Office

Ohio Department of Mental Health and Addiction Services

4:15pm – 4:55pm

UPMC Health Plan's Hub & Spoke Model: Providing Effective Engagement and Treatment for People with an Opioid Use Disorder

This workshop will highlight UPMC Health Plan's comprehensive approach to addressing the opioid epidemic through payer and provider strategies. UPMC is an integrated network that combines providers (hospitals and PCPs) and payer systems (private, Medicaid and Medicare) within the largest healthcare system in Pennsylvania. The session will feature a SAMHSA funded project that will organize many of the effective strategies into a hub and spoke model in three PA counties impacted by the opioid epidemic. Attendees will learn how UPMC has:

- Organized community stakeholders through collaboration and advocacy
- Educated medical and behavioral providers on effective treatments for opioid use disorders
- Disseminated guidelines for effective use of opioid medications in the treatment of pain
- Created payment protocols that improved as well as expand access to medication assisted treatments

- Designed assertive outreach protocols to intercept and engage individuals with an OUD
- Developed universal screening and assessments based on the ASAM criteria
- Used data tracking procedures to identify and retain individuals in need of treatment
- Expanded the realm of recovery through the inclusion of the target members, their families and the greater community

David Loveland, PhD

Senior Program Director

Community Care Behavioral Health Organization

4:55pm – 5:35pm

Developing a Partnership Between a Health Department and a University Health System to Combat a Major Community Opioid Overdose Epidemic

Anne Arundel County is located in the state of Maryland and is home to more than 556,000 residents. Prescription opioid and heroin addiction is now a major public health crisis. In 2016, Anne Arundel County had the third highest number of prescription opioid-related deaths in Maryland. Anne Arundel County has seen a 252% increase in opioid-related intoxication deaths from 2013 to 2016. In January of 2016, the Overdose S.O.S team was formed. Overdose Survivor’s Outreach Services (ODSOS) is a partnership between the University of Maryland Baltimore Washington Medical Center (UM BWMC) and the Anne Arundel County Department of Health (AA DOH) to provide outreach to opioid overdose survivors. We will showcase the development, implementation and evaluation of the Opiate SOS program in Anne Arundel County since project inception in April, 2015. We will use both quantitative and qualitative data from the University of Maryland Systems Evaluation Center to show how the successful partnership between a health care system and a government agency can produce positive outcomes for opiate users, families, community members and hospital administrators.

Kurt Haspert, MS, CRNP, APN-BC

Clinical Director of Addiction Services

University of Maryland Baltimore Washington Medical Center

5:35pm

End of Day One

Day Two

7:15am – 8:00am

Networking Breakfast

8:00am – 8:10am

Chairperson’s Remarks

8:10am – 8:50am

FDA’s Response to the Opioid Epidemic

FDA is actively using its regulatory authority to address the opioid crisis. In 2016, FDA developed an action plan with the goal of addressing the epidemic, while still providing patients in pain access to relief. The opioid crisis continues to be Commissioner Scott Gottlieb’s highest priority. FDA actions will be discussed in relation to FDA’s strategic goals:

- Decreasing exposure and preventing new action
- Treating those with opioid use disorder
- Developing novel pain treatment therapies
- Improving enforcement and assessing benefit-risk

Scott K. Winiecki, MD

Team Lead, Safe Use Initiative

Professional Affairs and Stakeholder Engagement Staff

Center for Drug Evaluation and Research

U.S. Food and Drug Administration

8:50am – 9:30am

Behavioral Health: Improving Pain Management and Reducing Opioid Use

Chronic pain is an international health issue of immense importance that is influenced by both physical and psychological factors. Pharmacological approaches are often used for alleviating chronic pain, but recently there has been a reluctance to prescribe opioids for chronic noncancer pain because of concerns about tolerance, dependence, and addiction. As a result, there has been increased interest in behavioral medicine strategies to help manage pain and to reduce reliance on prescription opioids. This presentation will discuss the role of psychiatric comorbidity and the use of validated assessment tools to identify those individuals who are at the greatest risk for opioid misuse. A review of behavioral interventions for pain such as cognitive behavioral therapy, acceptance and commitment therapy, mindfulness meditation, alternative integrative treatments, and use of innovative technology will be presented. The future of specific behavioral interventions designed to improve pain management and compliance with prescription opioids among persons treated for chronic pain will also be discussed.

Robert N. Jamison, PhD

Psychologist

Brigham and Women's Hospital

Professor, Departments of Anesthesia and Psychiatry

Harvard Medical School

9:30am – 10:10am

Safer and Effective Opioid Prescribing Practices

Providers who prescribe opioids to treat chronic pain are in a key position to balance the benefits and risks of chronic opioid therapy (COT). However, providers struggle with the need to assist their patients with adequate management of chronic pain while confronting the risks associated with opioid prescribing. This session will provide recommendations for safer and more effective prescribing of opioids. Topics will include:

- Identify opioid practice updates as outlined in the CDC opioid guidelines
- Monitoring and documentation strategies to meet best practice standards and medical and legal requirements
- Apply a practical framework for decision-making on the initiation, dosage modification, and when and how opioids should be discontinued
- Tools to adequately assess risk in patients being considered for opioid therapy
- Limiting the use of opioid prescriptions for combatting pain and recommending new treatments for pain management without the use of addictive substances

Paul A. Sloan, MD

Professor of Anesthesiology

Vice Chair for Research

Associate Program Director, Pain Medicine Fellowship

University of Kentucky Healthcare

Editor-in-Chief

Journal of Opioid Management

10:10am – 10:40am

Networking & Refreshments Break

10:40am – 11:20am

Medication-Assisted Treatment and New Models of Care for Opioid Use Disorder

The occurrence of opioid use disorder (OUD, opioid abuse/addiction) is a concern shared by many clinicians who prescribe opioids in the context of pain management. Addiction and Medication Assisted Treatment (MAT) remains highly stigmatized, not only in our general communities, but also in health care settings, health policy forums, and health payer institutions. This session will attempt to mitigate this stigma by describing the disease concept of addiction, the features of the disease and how this disease concept should inform care. The rationale and benefits of using medications to treat addiction with specific emphasis on the medications available for OUD will be addressed. The state of West Virginia has led the nation in rates of drug overdose. The “West Virginia Model” developed by West Virginia University will be introduced as an efficient and effective model to provide quality MAT to a large population of vulnerable patients.

James H. Berry, DO

Medical Director, Chestnut Ridge Center

Director of Addictions, Department of Behavioral Medicine and Psychiatry

WVU Medicine

Associate Professor

West Virginia University

11:20am – 12:00pm

How Telehealth Can Address Opioid Treatment Needs in Rural Communities

Rural and frontier communities typically lack sufficient access to substance use treatment. However, through the use of electronic information and telecommunications technologies, providers can effectively address this barrier, providing needed services that include: Medication Assisted Treatment, counseling, and peer supports. This session will discuss the treatment needs of individuals experiencing opioid use disorders (OUDs) in rural communities, and will provide information about how one state, Kansas, is utilizing its Opioid State Targeted Response grant award to expand its current telehealth OUD treatment services. Strategies discussed include the use of a smartphone application targeted to provide recovery support, as well as a TeleECHO Clinic, a knowledge-sharing network led by specialists who use videoconferencing to conduct virtual clinics with community clinicians, enabling them to provide specialty care in their own communities.

Kimberly E. Reynolds, MPA, MEd

Substance Abuse Single State Authority & State Opioid Treatment Authority, Behavioral Health Services Commission

Kansas Department for Aging & Disability Services

12:00pm – 12:40pm

Naloxone: Opioid Overdose Reversal

Naloxone plays a vital role in decreasing the number the opioid overdose deaths and we all are responsible for ensuring it's available when needed. This session will discuss currently available naloxone products and the importance of education before and after administration. Creative programs and best practices used to prevent opioid overdose deaths by removing barriers and increasing access to naloxone will be presented. Community members, family members, health plans, policy makers, prescribers, state and federal agencies all can make a difference in the overdose death rate by understanding the importance of naloxone and getting it into the hands of those need it.

Barbara Henry, RPh

Lead Clinical Pharmacy Specialist

Harvard Pilgrim Health Care

12:40pm

Conference Concludes

Workshop

1:00pm – 3:00pm

The Opioid Crisis as a Public Health Emergency: Practical Implications for Healthcare Professionals of Policy Decisions

How might decisions in Washington, D.C. to address opioid abuse affect the practice of health care? This workshop will review recommendations of the Final Report of the President's Commission on Combating Drug Addiction and the Opioid Crisis. The policy examination will also explore key Congressional and federal agency initiatives to address opioid abuse. Discussion will focus on the practical consequences of these policies for how health care professionals develop and implement patients' treatment plans.

Learning objectives:

A workshop participant should be able to:

- Identify at least two health care recommendations of the President's Commission on Combating Drug Addiction and the Opioid Crisis.
- Identify at least two Congressional and federal agency initiatives to address opioid abuse.
- Identify at least two practical consequences for health care professionals of policies to address opioid abuse.

Sherry L. Green, Esq.

CEO and Manager

Sherry L. Green & Associates, LLC

Sherry L. Green has 24 years of expertise in writing, analyzing, and training on drug and alcohol laws and policies, specializing in state prescription drug monitoring program (PMP) laws. Ms. Green served as Associate Director of the President's Commission on Model State Drug Laws and co-drafted the Commissions' 44 model laws and policies. She co-founded and for over 20 years served as CEO/Executive Director of the Commission's non-profit successor, the National Alliance for Model State Drug Laws (NAMSDL). From July 2016 – June 2017,

Ms. Green served as President, and developed a new strategic action plan for NAMSDL. The plan will enhance the organization's ability to provide more in-depth services to government officials, and health care and criminal justice professionals. Throughout her 24-year career, Ms. Green has also served as an independent consultant to state, national, federal, and international organizations and officials. Ms. Green served as the PMP subject matter expert for a U.S. HHS project on integration of PMP data into electronic health record systems. She was the drafter for NASCSA's Model PMP Act and was a primary drafter of NAMSDL's model laws and policies. She serves as a PMP subject matter expert for the Association of State and Territorial Health Officials (ASTHO) and CDC. Ms. Green trains and educates extensively on PMPs, HIPAA (Health Insurance Portability and Accountability Act), and other key drug and alcohol laws and policies for diverse bodies, including the National Conference of State Legislatures and the International Pharmaceutical Student Federation.

Ms. Green has a Juris Doctor with Honors from George Washington University's National Law Center in Washington, D.C. and is a member of the D.C. Bar. She received a Bachelor's of Arts degree in Political Science-Economics from the University of Montana.