



Indiana Initiatives Addressing Prescription Drug Abuse and Addiction

Secretaries Innovation Group Meeting

November 17, 2015

Washington, D.C.



Timeline

- **September 2012** - Indiana Attorney General's Prescription Drug Abuse Prevention Task Force was established.
- **October 2013** – Indiana Medical Licensing Board adopted an Emergency Rule on pain management prescribing.
- **September 2014** – Indiana Medical Licensing Board adopted final rule on pain management prescribing.
- **March 2015** – Public health emergency declared.
- **July 2015** – State of Indiana Awarded SAMHSA grant.
- **September 2015** – Governor's Prescription Drug Task Force was established.



Indiana Pain Management Prescribing Rule

- Adopted by the Indiana Medical Licensing Board September 25, 2014.
- The rule regulates physicians engaged in the practice of pain management prescribing of opioid-containing controlled substances.
- The rule does not apply to:
 1. Patients with terminal medical conditions.
 2. Residents of a health facility.
 3. Patients enrolled in a hospice program.
 4. Patients enrolled in a palliative care program of a hospital or hospice.



Indiana Pain Management Prescribing Rule

- The rule only applies when a patient's opioid drug therapy meets, or exceeds, dosage or duration thresholds.
- Requires the Physician to:
 1. Perform a patient assessment.
 2. Conduct a patient informed consent.
 3. Schedule prescribed periodic visits.
 4. Monitor the patient's INSPECT reports.
 5. Perform drug monitoring tests based on 18 patient-specific factors.
 6. Conduct a face-to-face review of treatment plan and patient evaluation when the daily morphine equivalent doses exceed >60mg/day.
 7. Establish a treatment agreement with the patient.



MAT-Prescription Drug and Opioid Addiction Grant

- Awarded by SAMHSA to the State of Indiana, Division of Mental Health and Addiction in July 2015
- Total award amount is \$2,848,352, over 3 years.
 - Year 1: \$950,000
 - Year 2: \$948,352
 - Year 3: \$950,000
- Funds will be targeted to two regions of Indiana for the purpose of helping addicts overcome barriers to access of substance abuse treatment.
 - transportation, drug and treatment cost, child care, vehicle repair, emergency housing, etc.



MAT-Prescription Drug and Opioid Addiction Grant

- Indiana Project Sites:
 1. **Northwest Indiana** – targeting adults (>18 yrs) residing in Porter, Starke, or LaPorte counties with opioid abuse disorder. Individuals must fall below the poverty line and have significant barriers that impair their ability to access the services for MAT at an opiate treatment program.
 2. **Southeast Indiana** - targeting adults (>18 yrs) residing in Scott county with opioid abuse disorder. Individuals must be diagnosed with, or be at risk for HIV/HCV or other infections due to IV drug use and have significant barriers to accessing MAT at an opiate treatment program.



Governor's Prescription Drug Task Force

- Ordered by Governor Mike Pence through executive order on September 1, 2015.
- Brings together a diverse group of experts for the purpose of assessing the resources and programs available statewide, identifying local models that can be extended to other areas of the State, and encouraging collaboration among agencies.
- The group focuses on four specific areas:
 - Statewide assessment
 - Enforcement
 - Treatment
 - Prevention



Governor's Prescription Drug Task Force

- Regional meetings are conducted monthly from September through November 2015 and include testimony from local experts and families affected by the addiction epidemic.
 - Indianapolis (September 16)
 - Evansville (October 16)
 - South Bend (November 19)
- The task force will submit a report to the Governor with their findings and recommendations on contending with drug abuse and addiction.



Governor's Prescription Drug Task Force

- Recent directives from Governor Pence that stemmed from Task Force recommendations:
 - The ISDH has been directed to develop guidelines to prescribing acute pain medications and to create a new group of task force members to discuss possible changes to INSPECT.
 - The DHS has been directed to assess the availability of naloxone in rural areas and areas of the state experiencing high incidences of overdoses.
 - Various state boards have been directed to collaborate on new rules regarding chronic pain prescriptions.
 - Appropriate organizations have been directed to create age-appropriate substance abuse curriculum for students.



SUD Treatment in HIP 2.0



- HIP Plus and HIP Basic benefit programs provide comprehensive substance abuse treatment coverage:
 - **Inpatient:** Benefit includes detoxification for alcohol or other drug addiction and partial hospitalization with no limitation on duration or scope of service.
 - **Outpatient:** Coverage includes detoxification for alcohol or other drug addiction with no limitation on duration or scope of service.
 - **Pharmacy:** Coverage includes naltrexone extended-release injection, buprenorphine oral products, and naloxone for rescue.
- Consistent approach to treatment of SUD among all MCE and FFS Medicaid Programs.



Questions?