Update on Ohio’s Opiate Crisis

In January 2011, Governor John Kasich announced that his Administration would battle the prescription drug abuse epidemic on all fronts. The Governor’s Cabinet Opiate Action Team (GCOAT) was formed to lead and coordinate the cross-systems effort to address the issue of addiction and overdose caused by opiates. Beginning with the coordinated efforts of the Administration and passage of House Bill 93 by the 129th General Assembly, Ohio has:

Shuttered pill mills across the state;

Opened a treatment center in Southern Ohio, the area hardest-hit by the opiate epidemic;

Established a statewide network of local opiate task forces to share knowledge and resources to combat the problem; and

Launched Start Talking!, a prevention initiative championed by the Governor and First Lady, aimed at Ohio’s youth in schools across the state.

Through these and other efforts undertaken by Ohio’s General Assembly and state agencies Ohio accomplished a great deal of work to position Ohio to deal with the opiate epidemic.

Ohio General Assembly

- House Bill 93, sponsored by Rep. Terry Johnson and Sen. David Burke — a doctor and a pharmacist, respectively — was passed and signed into law by Governor Kasich in May 2011. The law placed limits on prescribers’ ability to furnish certain drugs and strengthened licensing of, and law enforcement involvement in, pain-management clinics. The law also developed a statewide prescription-drug “take-back” program.

- In May 2013, the Ohio House of Representatives convened the Prescription Drug Addiction and Healthcare Reform Legislative Study Committee. In October, the committee published their report, resulting in the introduction of more than thirteen bills addressing opiate addiction which are now being considered by the Ohio House and Senate.

- House Bill 170 sponsored by Rep. Terry Johnson and Rep. Michael Stinziano, was passed and signed into law in March 2014 to expand access to naloxone, a life-saving drug that can reverse the effects of an opiate overdose. Physicians and other prescribers can now prescribe naloxone to family and friends of known opiate addicts.

- House Bill 59, the 2014-2015 biennial budget legislation, included a provision creating the Addiction Treatment Pilot Program (ATPP), which expands treatment options for low-level drug offenders.
State Agencies

Bureau of Workers Compensation

- In 2011, BWC targeted fraud involving opiate abuse and took action against pill mill doctor James Lundeen, whose medical license was subsequently revoked.

- BWC has centralized the drug utilization review process, helping to identify injured workers who may be on dangerous combinations or doses of prescription drugs with the goal of ensuring workers receive appropriate medical care. Opiate prescriptions for injured workers decreased nearly 28 percent between 2010 and 2013.

- The pharmacy “lock-in” program is helping BWC better manage prescriptions and prevent pharmacy shopping for dangerous opiates.

- As of January 2014, all BWC providers are required to register with OARRS, Ohio’s Prescription Drug Monitoring Program.

Ohio Department of Mental Health and Addiction Services

- In conjunction with the Office of the Governor, the Office of First Lady Karen Kasich, the Departments of Public Safety, Aging and others, MHAS launched Start Talking!, a prevention campaign aimed at middle and high school students statewide. Start Talking! will equip parents, guardians, educators and community leaders with the tools to start the conversation with Ohio’s youth about the importance of living healthy, drug-free lives.

- More than 35 groups form the GAP Network of family engagement groups, seeking to end the crisis of substance abuse, specifically prescription drug and opiate addiction in all Ohio communities. These groups provide support to individuals and families affected by addiction, advocate for policy changes that can change environmental conditions that encourage drug use, and mobilize communities to affect their own change.

- Using an expert panel of addiction physicians, the department established a set of guidelines for the use of buprenorphine in the treatment of opioid addiction. These best practice guidelines were made available to the field in the spring of 2012.

- The Southern Ohio Treatment Facility was opened in Jackson, Ohio, in April 2013 specifically to provide opiate addiction treatment. This facility is the first federally-designated opiate treatment program in southern Ohio.
MHAS is implementing the Addiction Treatment Pilot Project, which provides funding to drug courts in six counties to enable addicted, low-level offenders to engage in medication-assisted treatment for their addiction. The program began in January 2014 will conclude in June 2015. The program includes an extensive evaluation component that will allow the department to determine the effectiveness of drug court intervention with opioid addicts when treatment and medication are available.

Twenty four Opiate Task Forces have been created across the state to focus on prevention, treatment and law enforcement efforts.

MHAS launched the Maternal Opiate Medical Supports (MOMS) Project, which allocates $1.8 million over three years to support intervention and prenatal treatment that improve outcomes for women and babies while reducing the cost of specialized care by shortening length of stay in the Neo-Natal Intensive Care Unit (NICU). By engaging expectant mothers in a combination of counseling, Medication-Assisted Treatment (MAT) and case management, the three-year project is estimated to reduce infant hospital stays by 30 percent.

Ohio Department of Health

In conjunction with the Ohio Department of Aging, ODH led the effort to develop the Emergency Department/Acute Care Facilities prescribing guidelines in May 2012.

In 2013, the same team recommended clinical guidelines when prescribing opioids to treat chronic, non-terminal pain and produced Ohio’s Opioid Prescribing Guidelines for Treatment of Chronic, Non-Terminal Pain.

In 2013, ODH also developed educational materials related to the Guidelines, including a CME training featuring an introduction by the Governor and presentations by subject matter experts.

ODH has led the creation of six Project D.A.W.N. (Deaths Avoided with Naloxone) sites across the state, starting with Scioto County in 2011. In that time, Project D.A.W.N. has expanded to Cuyahoga, Franklin, Stark, Hamilton and Ross counties.

The Prescription Drug Abuse Action Group (PDAAG), coordinated by ODH, is an ongoing multi-disciplinary work group devoted to reducing prescription drug abuse and overdose. The PDAAG serves as a point-of-contact for sharing information and resources regarding prescription drug abuse across the state.

Prescription drug overdose prevention projects are funded by the Violence and Injury Prevention Program (VIPP) through the Preventive Health and Health Services Block Grant from CDC. Using the grant, ODH will be funding Scioto, Clermont and Cuyahoga counties to conduct overdose prevention activities from 2014-18. These projects are funded to implement comprehensive community-based efforts to address prescription drug abuse and overdose.

ODH created awareness campaign materials to educate Ohioans about the epidemic of prescription drug misuse, abuse and overdose. Prescription for Prevention materials
include state and county factsheets, brochures and TV and radio public service announcements, as well information about locations of prescription drug dropboxes where prescription drugs can be safely disposed.

Ohio Department of Public Safety/Ohio Highway Patrol

- For the fourth year in a row, OSHP interdicted a record amount of heroin in 2013.
- Seizures of prescription drugs increased 92 percent between 2010 and 2013, and seizures of heroin increase 488 percent in that same time.

State Medical Board

- In 2013, 26 percent of the formal actions taken by the Medical Board involved a prescribing violation, up from 9 percent of the total actions in 2009.
- Notified 2,400 physicians who have written prescriptions for controlled substances but have not signed up for OARRS, of the requirements to sign up for OARRS. In addition, the Medical Board is working to develop a letter to physician assistants not signed up for OARRS.
- Developing additional methods to share data with the Board of Pharmacy. The Medical Board has sent notification of specified CME requirements to owners of pain management clinics licensed by the Board of Pharmacy.

Board of Pharmacy

- Promoted the Shared Prescription Investigation Deconfliction Resource (SPIDR). This resource is designed to prevent overlapping investigations of pharmaceutical drug violations by law enforcement and other regulatory agencies.
- Proactively provides OARRS data to the Department of Mental Health and Addiction Services to monitor trends in opioid prescribing.
- In 2014, the Board began proactively reporting Practice Insight Reports to prescribers using OARRS, which can notify them of patients obtaining prescriptions for opioids from multiple prescribers and warn them of patients receiving high doses of prescription drugs who may be in danger of overdose.

Ohio Attorney General

Ohio Attorney General Mike DeWine has made combating the problem of opiate addiction a priority since 2011. You can find out more about the work he and his office have done to fight abuse of prescription drugs and heroin here.