MEDICATION-ASSISTED TREATMENT CENTERS OF EXCELLENCE

May 17th, 2023 **BIWEEKLY NEWSLETTER** Vol. 74



TIMELINE OF END DATES FOR KEY HEALTH-RELATED FLEXIBILITIES PROVIDED THROUGH COVID-19 EMERGENCY DECLARATIONS, LEGISLATION, AND ADMINISTRATIVE ACTIONS

On May 11, 2023, the COVID-19 public health emergency (PHE) ended after three years. The PHE was implemented as a response to the COVID-19 pandemic to handle the public health crisis and has been renewed, releasing and supporting resources for the treatment and prevention of COVID-19. Flexibilities that came to an end on May 11th included:

- COVID-19 vaccine requirements for federal employees and contractors and international air travelers
- The CDC's Data Use Agreements for reporting COVID-19 vaccination data
- Medicaid options to cover uninsured for COVID-19 vaccines, tests, and treatments
- Medicaid Disaster-Relief State Plan Amendments, and so much more

Clinicians prescribing controlled substances via telemedicine was also supposed to come to an end on May 11th, but the DEA and SAMHSA recently issued a six-month extension.

WHAT'S INSIDE

UPCOMING EVENTS

6/15: Best Practices in Trauma Informed Overdose Prevention Conference

NJ Opioid Recovery and Remediation Fund Advisory Council

HEADLINES

State Policies Could Impede New Efforts to Increase Access to Medications for Opioid Use Disorder

Quality of Opioid Use Disorder Treatment for Persons With and Without Disabling Conditions

Pharmacist Involvement in Combating the Opioid Crisis

DEA, SAMHSA Extend COVID-19 Telemedicine Flexibilities for Prescribing Controlled Medications

RESOURCES

NJFamilyCare: Medicaid "Unwinding" Process

Evening ECHO Series: Caring for Pregnant & Parenting People with an OUD

UPCOMING EVENTS



BEST PRACTICES IN TRAUMA INFORMED OVERDOSE PREVENTION CONFERENCE

Last year, New Jersey recorded the first annual decrease in fatal drug overdoses in over a decade. This success should be celebrated, but is only part of the story. As NJ looks to strengthen and expand the overdose prevention and recovery ecosystem, it is critical to reflect on past successes and challenges and dive deeper into the data to ensure forward progress. Join to better understand which communities are being disproportionately impacted and hear from leaders and changemakers in NJ and across the country that are innovating care and saving lives.

THURSDAY, JUNE 15TH, 2023 (9AM-3:30PM)

REGISTER HERE



UPCOMING IN-PERSON LISTENING SESSIONS: NJ OPIOID RECOVERY AND REMEDIATION FUND ADVISORY COUNCIL

MERCER COUNTY COMMUNITY COLLEGE
ROMA BANK AUDITORIUM, CONFERENCE CENTER
1200 OLD TRENTON ROAD, WEST WINDSOR, NJ
MONDAY, MAY 22, 2023 (1-3PM)

CAMDEN COUNTY COLLEGE (BLACKWOOD)
CIM AUDITORIUM
200 COLLEGE ROAD, BLACKWOOD, NJ
THURSDAY, JUNE 22, 2023 (11AM-1PM)

RECENT NEWS

STATE POLICIES COULD IMPEDE NEW EFFORTS TO INCREASE ACCESS TO MEDICATIONS FOR OPIOID USE DISORDER

The Ryan Haight Online Pharmacy Consumer Protection Act of 2008 demands clinicians to perform in-person medical evaluations in order to prescribe controlled substances such as buprenorphine. During the PHE, the Ryan Haight Act was waived, allowing clinicians to prescribe controlled substances via telemedicine. With the PHE ending, so will this waiver. Fortunately, the DEA recently issued a Notice for Proposed Rulemaking which will enable clinicians to prescribe MOUD without an in-person medical evaluation in some circumstances. However, certain states restricting telemedicine can limit patient access to MOUD, as states including AK, FL, LA, NH, OK, PA, RI, and SC created new restrictions making it more difficult to prescribe MOUD via telemedicine during the PHE. It is critical that MOUD is easily accessible, and telemedicine may increase access to MOUD treatment and decrease overdose rates. The special registration pathway implemented by the DEA will be a step toward increasing access to MOUD, but it is up to the states to change their telemedicine restriction policies and remove legislation.

QUALITY OF OPIOID USE DISORDER TREATMENT FOR PERSONS WITH AND WITHOUT DISABLING CONDITIONS

People with disabilities account for 26% of the US population. While research has been conducted on inequities in OUD treatment by race, SES, ethnicity, etc., there is a huge gap in research examining access to care and quality of OUD care for people with disabilities. The risk of OUD is heightened among people with disabilities and health equity is a constant concern due to barriers to health care. This case-control study investigates MOUD use and continuity among Medicaid-enrolled adults with disabilities, suffering from OUD. Findings showed that **people with a disability were 40% less likely to initiate MOUD compared to those without a disability. People with a disability were also 13% less likely to continue MOUD than those without a disability. These findings highlight inequities in treatment** such as intersecting barriers like stigma of disability and stigma of SUD, and lack of accessibility in SUD programs. Policies and procedures to increase access to MOUD are critical in reducing inequities in treatment and as well mortality and morbidity among people with disabilities.

RECENT NEWS

PHARMACIST INVOLVEMENT IN COMBATING THE OPIOID CRISIS: A MIXED-METHODS APPROACH REVEALING CONFLICTING PERCEPTIONS

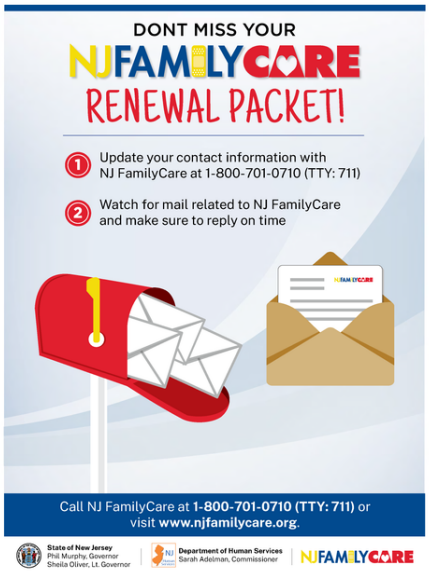
The opioid crisis has been acknowledged as a PHE that requires partnership and participation from pharmacists, but their views on opioid use and their perceptions of their role in harm reduction have not been examined. This mixed-methods study surveyed 1,564 Minnesota pharmacists on their views of the profession's clinical roles within the opioid crisis, attitudes toward harm reduction strategies, and views on distributing naloxone. The pharmacists in the study were concerned about liability regarding distributing naloxone, unaware of Minnesota's Good Samaritan/naloxone legislation. Pharmacists also commented on the lack of need for naloxone within their communities, despite the rise of overdose related deaths throughout the state. About a quarter of participants reported that distributing naloxone would promote opioid use, even though research shows that naloxone does not increase opioid misuse. **These findings prove that increased education on OUD, pharmacists' roles, and education surrounding dispensing naloxone is needed to encourage pharmacists to distribute naloxone without fear of legal repercussions**. Pharmacists can and should play a role in responding to the opioid crisis by educating their communities and providers while reducing stigma surrounding OUD. However, it is critical that pharmacists are fully knowledgeable on the matter.



DEA, SAMHSA EXTEND COVID-19 TELEMEDICINE FLEXIBILITIES FOR PRESCRIBING CONTROLLED MEDICATIONS FOR SIX MONTHS WHILE CONSIDERING COMMENTS FROM THE PUBLIC

The DEA and SAMHSA issued temporary rules, extending telemedicine flexibilities for prescribing MOUD for 6 months, beginning May 11th and ending on November 11th, 2023.

RESOURCES



MEDICAID "UNWINDING" PROCESS: POST-COVID PHE

Since March 2020, NJ FamilyCare/Medicaid has followed special rules related to the federal COVID-19 Public Health Emergency. These rules have allowed most NJ FamilyCare/Medicaid members to keep their health coverage without recertifying. This continual enrollment ended on March 31, 2023 and NJ FamilyCare will begin "unwinding." During the unwinding, NJ FamilyCare/Medicaid will send renewal packets that members must complete and return to determine if they are still eligible. Members who do not respond to this renewal packet will lose their health coverage. Please see the following resources for further information, including FAQs.

1) NJFamilyCare Medicaid "Unwinding" FAQs
2) NJFamilyCare Medicaid "Unwinding" English Flyer
3) NJFamilyCare Medicaid "Unwinding" Spanish Flyer



EVENING ECHO SERIES: CARING FOR PREGNANT & PARENTING PEOPLE WITH AN OUD

SELECT TUESDAYS FROM 6:30PM-7:30PM

Join the MCH OUD ECHO at a special evening time for practitioners to learn and discuss the latest updates on helping pregnant patients with substance use disorders and their unborn babies. In this ECHO, you will understand how to build a more trusting, empowering relationship for pregnant people with an OUD. You will learn best practices for treatment and identify helpful community resources with a panel of Maternal Child Health and Addiction Medicine specialists and your peers. Help ensure that NJ mothers can give birth safely with the treatment and support they receive within their community.

MEDICATION-ASSISTED TREATMENT
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24/7 MAT Provider Hotline: 844-HELP OUD (844-435-7683)

Northern NJ MAT COE Website & Email
Southern NJ MAT COE Website & Email