

An Evolving Crisis and Response: A View from SAMHSA

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SAMHSA
Substance Abuse and Mental Health
Services Administration

A close-up photograph of several hands of different skin tones being held together in a supportive grip. The hands are positioned in the center-right of the frame, with fingers interlaced. The background is softly blurred, showing parts of people wearing blue and teal clothing. The overall mood is one of care and solidarity.

Learning Objectives:

- Briefly describe the current state of the overdose crisis
- Discuss at least 2 key federal actions being taken to address the overdose crisis
- Identify SAMHSA/CSAT's role and strategies for each of these actions

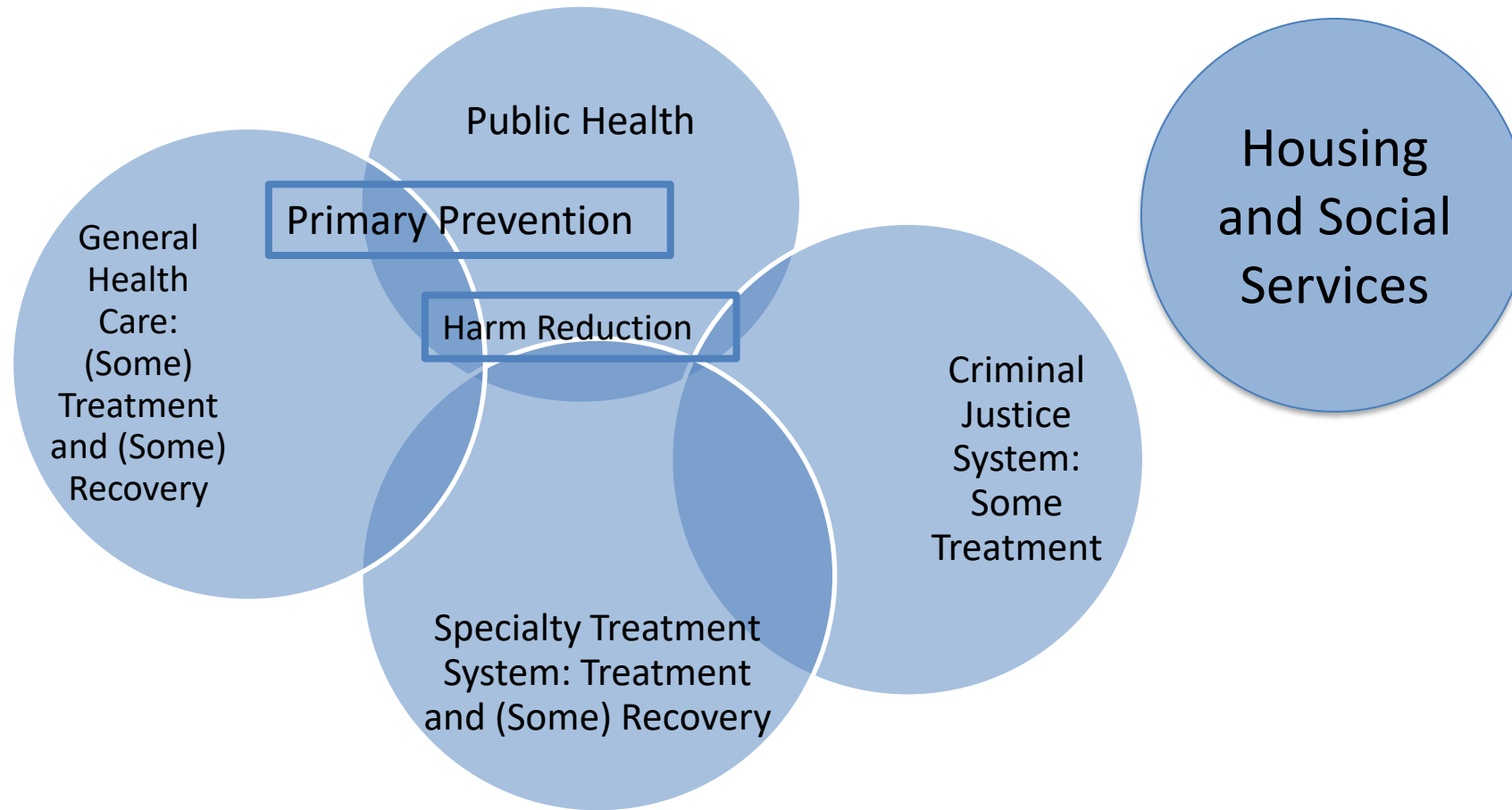
A National Snapshot on Overdose and Substance Use Disorders



- **Overdose** remains a **leading cause** of injury-related death, with more than **109,000 lives lost (Jan. 2023)**.
 - In 2022, provisional data found 68% of the 107,000 fatal overdoses involved synthetic opioids, primarily **illicitly manufactured fentanyl**.
 - **Xylazine** is an adulterant increasingly found in the illicit drug supply.
 - Among overdose deaths reported during January–December 2021, a total of 5.3% had xylazine detected on postmortem toxicology and xylazine was listed as a cause of death in 79.0% of deaths in which it was detected
 - **Stimulants** are increasingly adulterated with illicitly manufactured fentanyl.
 - In 2021, 81.9% of deaths involved at least one opioid and 54.2% involved at least one stimulant
- Among people aged 12 or older in 2021, 57.8% (or 161.8 million people) used tobacco, alcohol, or an illicit drug in the past month. 14.3% (or 40.0 million people) reported use of an illicit drug.
- Only 3.2% of these people felt that they needed treatment.
- **7 in 10 adults** who had a substance use problem considered themselves to be in recovery or recovering.

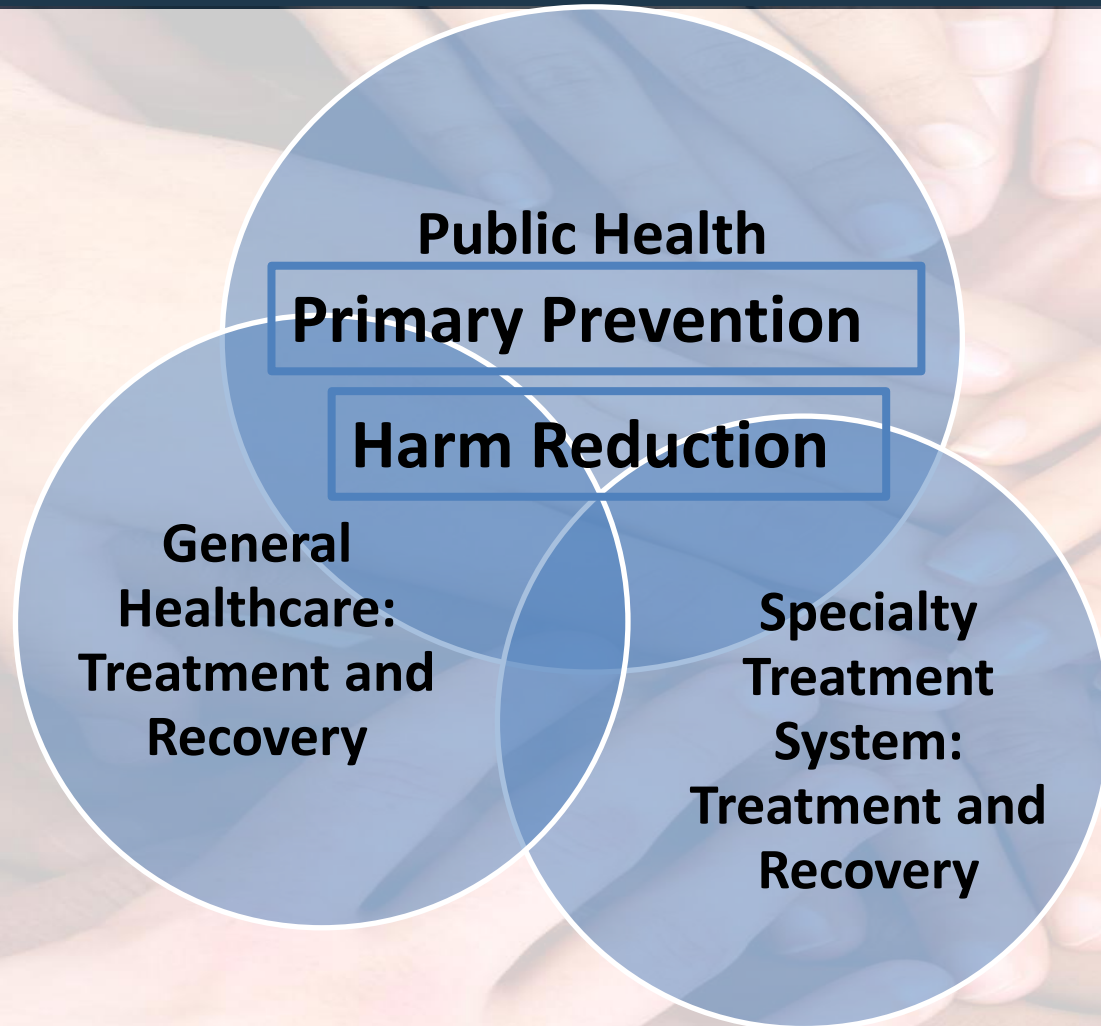
*Data sources include SAMHSA National Survey on Drug Use and Health and the CDC

Challenge: Uncoordinated Systems Encountering People with SUD



In the community: people living with SUD at different stages of recovery and their families with many trying to navigate their way through barely coordinated systems.

Possible Goal from CSAT Perspective



CSAT's Work: Expand access to and quality of effective care in a coordinated, integrated system that includes general healthcare and specialty treatment settings (and for now public safety, housing, and social services) to save and improve the lives of people with substance use disorders and related conditions, grounded in recovery and equity.

In the community: With family, people living with SUDs at different stages of recovery, no wrong door to services, and (they get to fill in the blank).

SAMHSA's Priorities and Core Principles



Guiding Frameworks

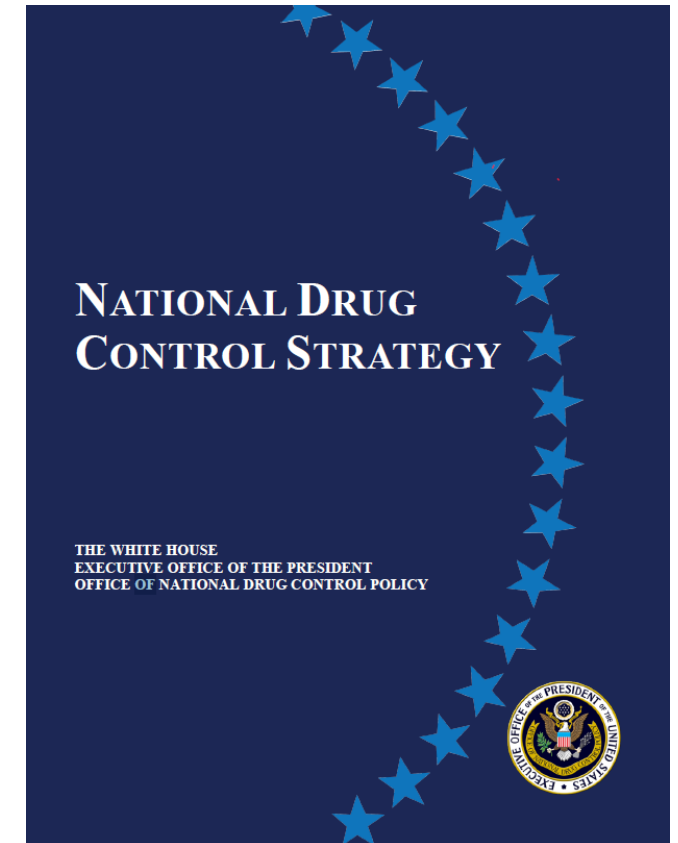
HHS Overdose Prevention Strategy



HHS.gov

<https://www.hhs.gov/overdose-prevention/>

White House Strategy



<https://www.whitehouse.gov/wp-content/uploads/2022/04/National-Drug-Control-2022Strategy.pdf>

Addressing Overdose Through Improved Policy

- Policy changes are **presenting new opportunities**
- DEA temporarily extended the COVID-19 telemedicine flexibilities to prescribe controlled medications
- FDA approved **over-the-counter** naloxone nasal spray
- President Biden signed into law **H.R. 2617**, the “Consolidated Appropriations Act, 2023”

Mainstreaming Addiction Treatment (MAT) Act	Medication Access and Training Expansion Act (MATE)
Removes the DATA-2000 Waiver to prescribe buprenorphine	Requirement for a non-recurring, 8-hour training on SUD for practitioners applying for registration from the DEA
Lifts caps on number of patients who can be treated; removes counseling and reporting requirements	Met through addiction board certification, as part of or post-healthcare professional degree training

Implementation of MAT and MATE requires close collaboration and coordination between the Department of Justice/Drug Enforcement Administration, and Health and Human Services/SAMHSA

2023 – Current Status of DATA-2000 Waiver

- “With this provision, and effective immediately, SAMHSA will no longer be accepting NOIs (waiver applications).”
- “All practitioners who have a current DEA registration that includes Schedule III authority, may now prescribe buprenorphine for Opioid Use Disorder in their practice if permitted by applicable state law and SAMHSA encourages them to do so.”
- Additional FAQs added April 25, 2023

Section 1263 (MATE Act) Actions To Date

Requirements for training for Medication Assisted Treatment as part of the MATE Act (PDF) (March 27, 2023)

Please see the letter which outlines the requirements for training for Medication Assisted Treatment as part of the MATE Act, which was part of the Omnibus Bill at the end of December 2022. DEA was given 90 days to let practitioners know how to meet the MATE Act's training requirement which is tied to their initial or renewal DEA registration beginning on June 27, 2023. This letter provides the information to the practitioners as to how they can meet those training requirements.

Guidance / Questions and Answers

- **Updated DEA Registration Certificate after Removal of X-Waiver**
- **Buprenorphine (MOUD) Q&A**
- **Registration Q&A**

<https://www.dea diversion.usdoj.gov/pubs/docs/index.html>

Training requirement effective as of June 27, 2023

<https://www.samhsa.gov/medications-substance-use-disorders/provider-support-services/recommendations-curricular-elements-substance-use-disorders-training>

The screenshot shows the SAMHSA website with the following elements:

- Header:** SAMHSA Substance Abuse and Mental Health Services Administration. Navigation links: Home, Site Map, Contact Us. Search bar: Search SAMHSA.gov.
- Menu:** Find Help, Practitioner Training, Public Messages, Grants, Data, Programs, Newsroom, About Us, Publications.
- Breadcrumbs:** Home » Programs » Medications for Substance Use Disorders » Provider Support Services » Recommendations for Curricular Elements in Substance Use Disorders Training.
- Left Sidebar:**
 - Medications for Substance Use Disorders
 - Removal of DATA Waiver Requirement
 - Medications, Counseling, and Related Conditions
 - Find Treatment
 - Provider Support Services
 - Recommendations for
- Main Content:**

Recommendations for Curricular Elements in Substance Use Disorders Training

The United States faces a crisis of deaths from opioids, stimulants, synthetic agents, tobacco and alcohol.¹ These deaths represent a mere fraction of the total number of Americans harmed by substance misuse, and many people suffer daily from chronic use disorders. The long-term effects of substance misuse impact individuals, families, and communities. This is further compounded by changing patterns of substance misuse, as well as an increasing incidence of polysubstance use. The rise in fentanyl use or exposure, concurrent substance misuse, as well as overdose deaths.
- Right Sidebar:**

Buprenorphine Waiver Contacts

For more information on buprenorphine waiver, contact SAMHSA's Center for Substance Abuse Treatment (CSAT) at [866-BUP-CSAT](tel:866-BUP-CSAT) (866-287-2728) or providersupport@samhsa.hhs.gov.

SAMHSA Actions to Reduce Barriers



Messaging to practitioners through FAQs, publications and the SAMHSA website



Work with Federal partners, in particular the DEA and FDA



Training and TA – The Provider’s Clinical Support System, Publications, TA provided through SAMHSA-funded platforms



Outreach to professional associations to encourage prescribing

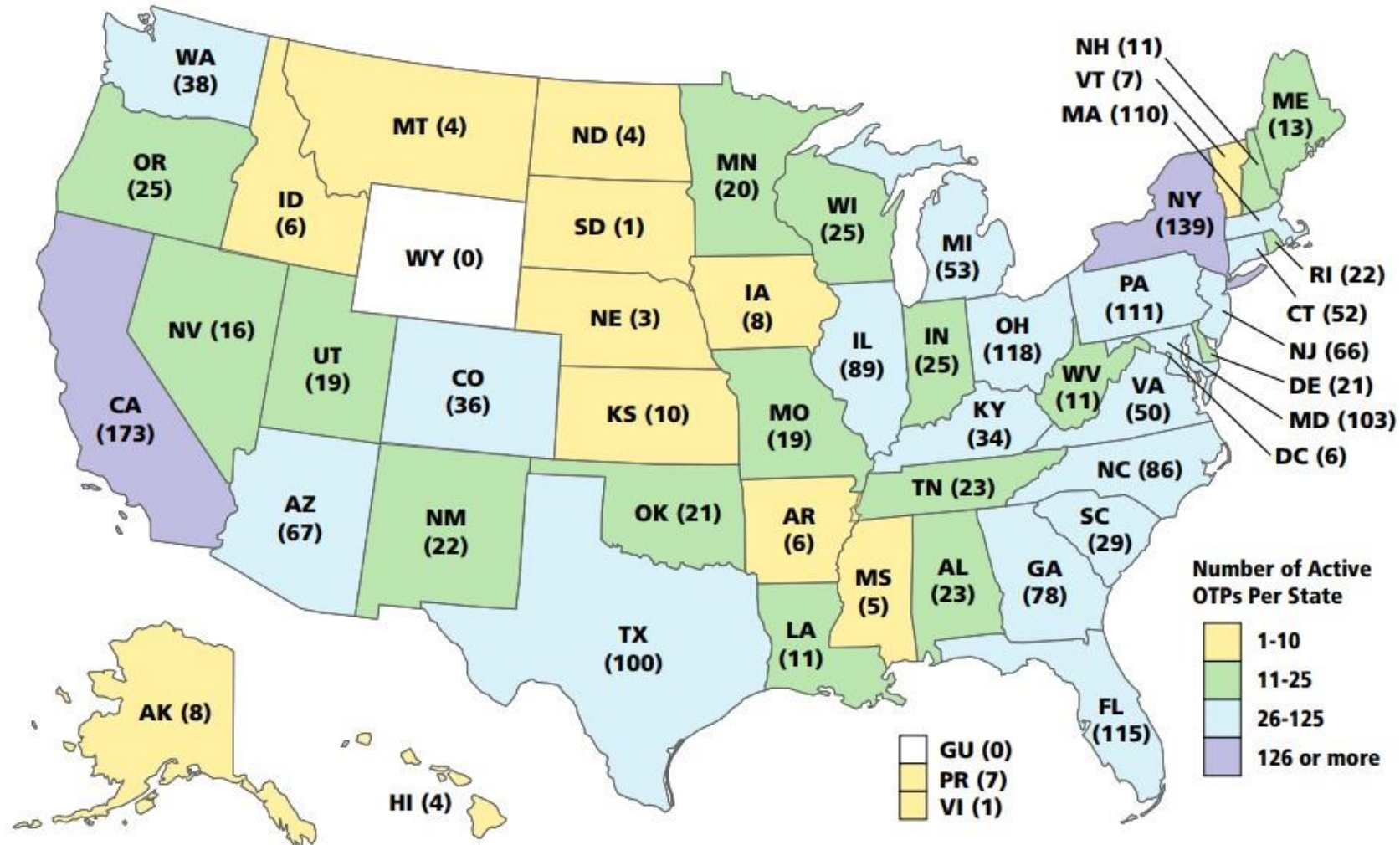


Buprenorphine pharmacy access August 2022 summit

Opioid Treatment Program Growth

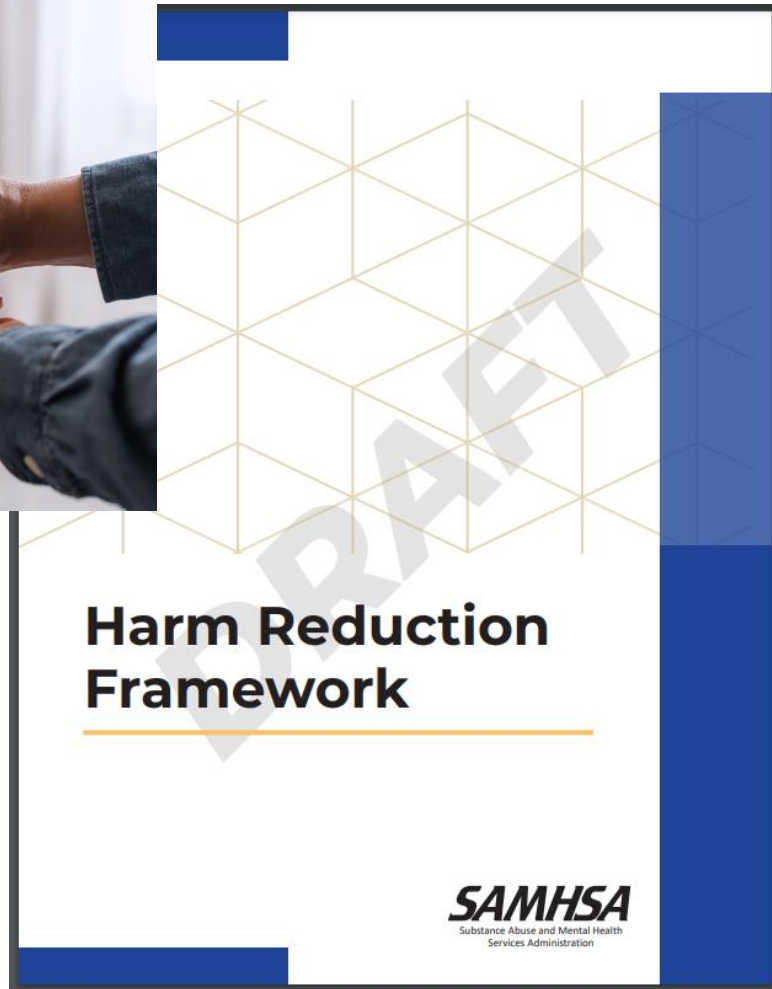
SAMHSA Certified Opioid Treatment Programs

Total=2,054



Source: SAMHSA, CSAT, OTP Database. October 2023

Addressing Overdose Through Harm Reduction



<https://www.samhsa.gov/find-help/harm-reduction/framework-comment-form>

Finalizing Harm Reduction Framework

- Result of first-ever collaborative Harm Reduction Summit
- Established to inform harm reduction activities, policies, programs, and practices

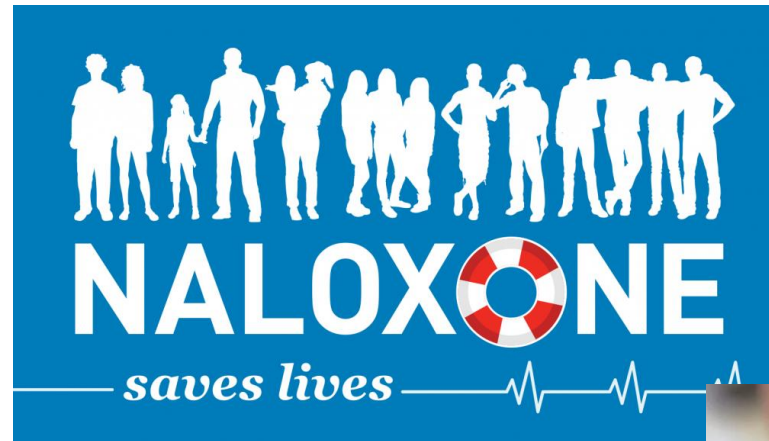
Innovative and community-based harm reduction strategies continue

- ✓ Lives are being saved
- ✓ Social determinants of health being addressed
- ✓ Cultural humility and traditions incorporated
- ✓ Infectious diseases prevented
- ✓ Community partnerships formed
- ✓ Policies updated
- ✓ Innovative practices implemented
- ✓ Increasing access to care
- ✓ Access to life-saving supplies increasing
- ✓ Stigma and community education being addressed

Naloxone Saturation Plans



<https://www.mlive.com/news/muskegon/2021/12/vending-machine-stocked-with-free-narcan-aims-to-curb-overdose-deaths-in-muskegon.html>



Source: FDA



<https://www.indystar.com/story/news/2018/05/05/indiana-health-officials-give-free-naloxone-prevent-overdose-deaths/582337002/>

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Jan 25th and 26th:
**State Opioid Response Learning Community: Strengthening
State Naloxone Saturation Plans and Implementation**

July 18th and 19th:
10 State Naloxone Saturation Policy Academy

Addressing Overdose: State and Tribal Opioid Response (SOR/TOR)

- **Approximately 489,755 overdoses were reversed**
- Program received nearly \$1.5 billion
- Data show that there was a 22.8% increase in SOR clients who reported no alcohol or illegal drug-related health, behavioral, or social consequences in the last 30 days.
- **Community naloxone saturation is our goal**

To date*, SOR and TOR grant recipients:

- Purchased more than **7.8 million** naloxone kits
- Distributed about **7.3 million** naloxone kits
- Distributed about **1.7 million** fentanyl test strips



*May 18, 2023

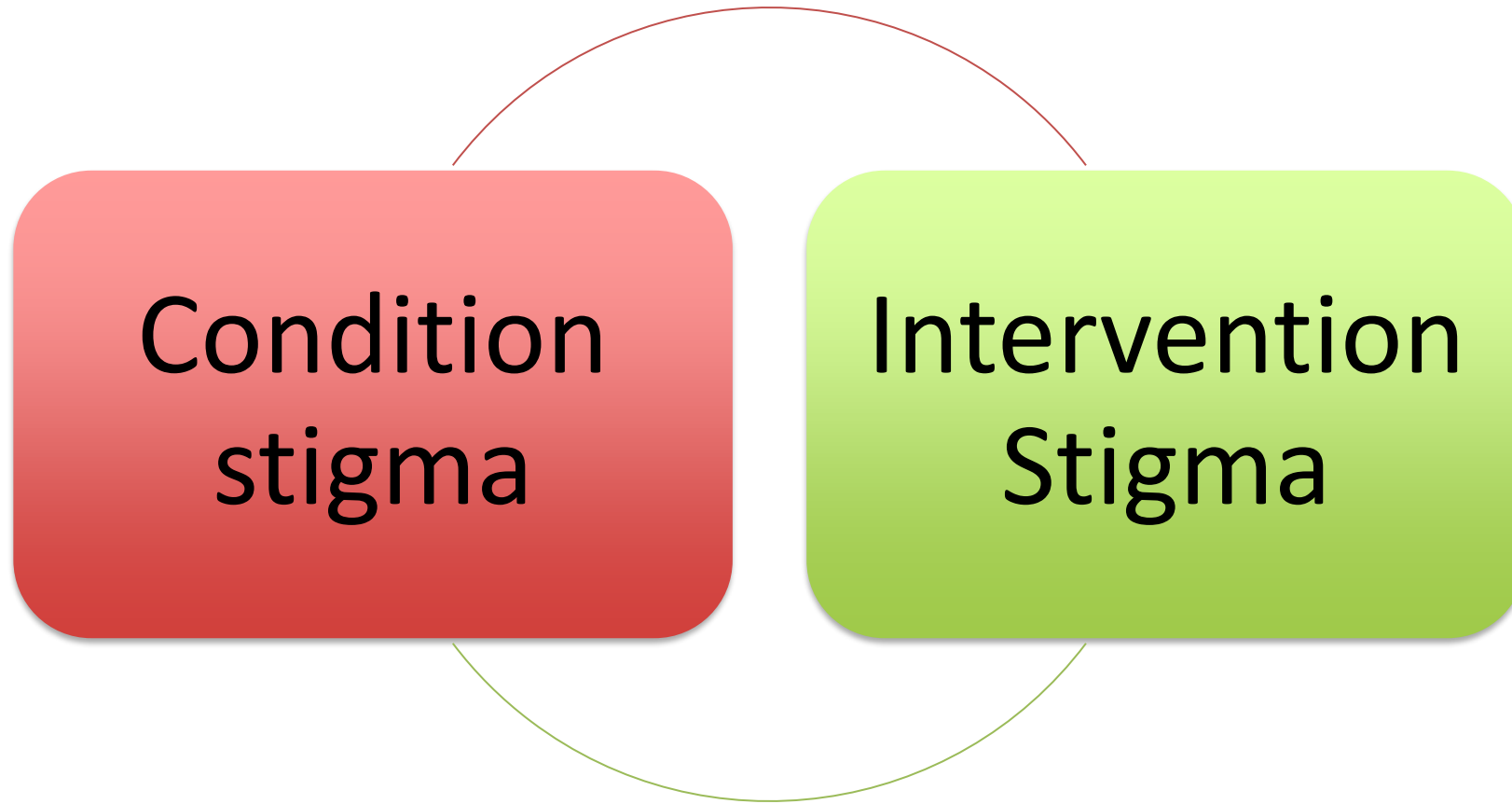
The Challenge of Stigma

SUDs carry a high burden of stigma

- People with SUD are
 - less likely to seek treatment
 - more likely to drop out of treatment
- SUD is among the most stigmatized conditions in the US and around the world
- Health care providers treat patients who have SUDs differently
- People with a SUD who expect or experience stigma have poorer outcomes



Additional Stigma in SUD

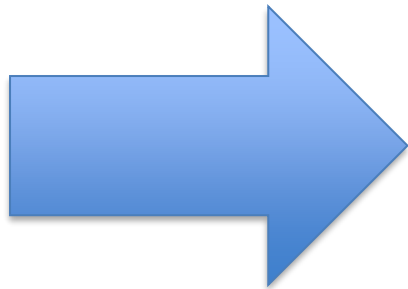


Medications for Opioid Use Disorder are often the focus of intervention stigma

Intervention Stigma Examples

- People taking methadone for OUD have been denied:
 - Custody rights of their children
 - Access to housing and shelter
 - Admission to residential SUD treatment facilities
 - Acceptance by subacute skilled nursing facilities
- Remedy: Department of Justice guidance on American With Disabilities Act

SAMHSA website – Practitioner Training



U.S. Department of Health & Human Services




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Practitioner Training

SAMHSA's practitioner training offers tools, training, and technical assistance to practitioners in the fields of mental health and substance use disorders.




Technology Transfer Centers (TTC) Program

The purpose of the Technology Transfer Centers (TTC) is to develop and strengthen the specialized behavioral healthcare and...




State Targeted Response Technical Assistance (STR-TA)

The State Targeted Response (STR) Technical Assistance (TA) Consortium was created to support efforts in addressing opioid use...




Providers' Clinical Support System for Medication Assisted Treatment (PCSS-MAT)

Providers' Clinical Support System for Medication Assisted Treatment (PCSS-MAT) is a national training and clinical...




Clinical Support System for Serious Mental Illness (CSS-SMI)

This initiative supports the use and implementation of evidence-based screening and treatment for serious mental illness (SMI)...



Suicide Prevention Resource Center (SPRC)

The Suicide Prevention Resource Center (SPRC) provides a virtual learning lab designed to help state- and community-level...



Rural Opioid Technical Assistance (ROTA)

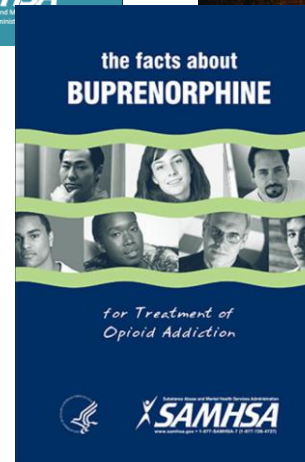
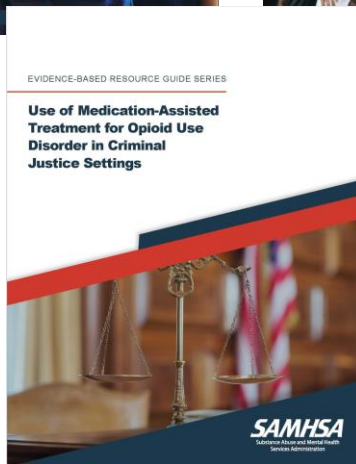
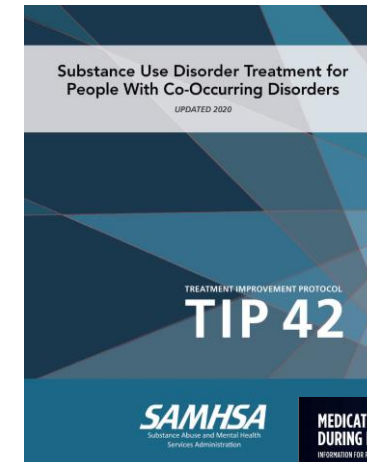
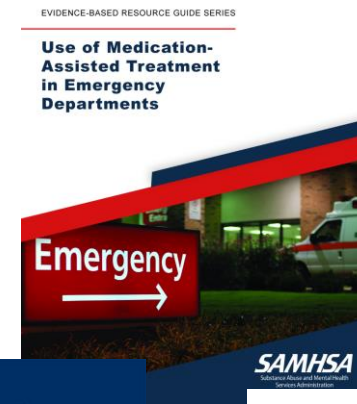
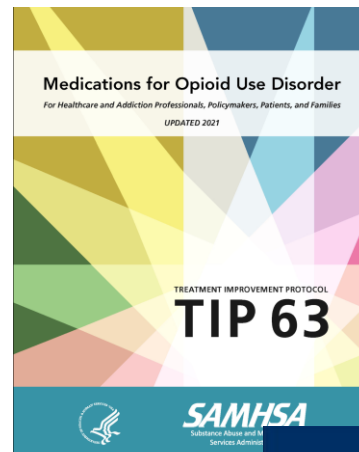
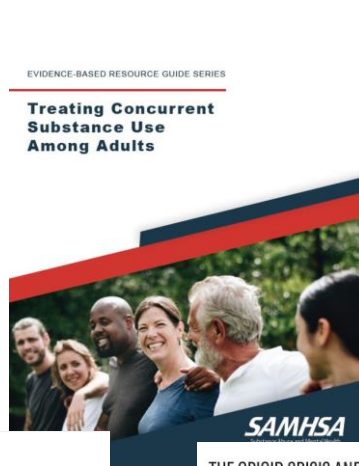
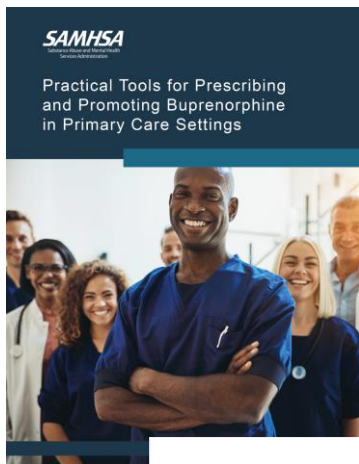
The purpose of this program is to develop and disseminate training and technical assistance for rural communities on addressing...

<https://www.samhsa.gov/practitioner-training>


SAMHSA Resources

The SAMHSA Evidence-Based Practice Resource Center (EBRC) contains resources for a range of audiences related to best practices for the treatment of OUD/SUDs

www.samhsa.gov/resource-search/ebp




You can find support



Find health care or support

Get the best ways to search for a health care professional or program.


[Find health care or support](#)



How to cope

Learn about the signs that you may need help, how to ask for help, and ways to take care of yourself.


[How to cope](#)



Learn about treatment

Find out about treatment types, how to make an appointment, and how to prepare yourself for treatment.


[Learn about treatment](#)



How to pay for treatment

Find options for covering costs with or without insurance, including free and low-cost programs.


[How to pay for treatment](#)



Helping someone

Learn how to talk to a loved one about getting help and how to take care of yourself.

[Helping someone](#)



Get help now

Sometimes help can't wait. There are people you can call, text, or chat for help right now.

[Get help now](#)

Find Health Care or Support
www.findsupport.gov

FindTreatment.gov

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For help finding treatment: 800-662-HELP (4357)

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Millions of Americans have mental and substance use disorders. Find treatment here.

Welcome to FindTreatment.gov, the confidential and anonymous resource for persons seeking treatment for mental and substance use disorders in the United States and its territories.



Find a Treatment Facility ⓘ

Enter your address, city, zip code, or facility name

[Search](#)

Find Treatment
www.findtreatment.gov

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Some of My Inspirations



Thank You!

SAMHSA's mission is to lead public health and service delivery efforts that promote mental health, prevent substance misuse, and provide treatments and supports to foster recovery while ensuring equitable access and better outcomes.

Grant Opportunities

www.samhsa.gov/grants
www.grants.gov/web/grants

988 Suicide and Crisis Lifeline Toolkit

www.samhsa.gov/find-help/988/partner-toolkit

