

Ohio's Accomplishments to Reduce Opiate Addiction and Overdose

Ohio Bureau of Workers Compensation

- BWC took action against notorious pill mill doctor James Lundeen, who lost his license following a BWC investigation.
- BWC centralized its drug utilization review process to identify injured workers who may be on dangerous combinations or doses of Rx drugs. The goal is to ensure the right medicines for the right condition at the right time.
- BWC's first-ever formulary and coordinated services, or pharmacy "lock-in" program, are helping to better manage prescriptions and prevent pharmacy shopping for opiates. Early data show the number of narcotics prescribed to injured workers decreased by 12 percent, or 1.1 million doses, in the first three months following implementation.

Ohio Department of Alcohol & Drug Addiction Services

- State Board of Pharmacy data for 2011 indicates a 12-15 percent decrease in opiates dispensed in Scioto and Gallia counties for the full year. This reduction converts to nearly two million fewer available doses.
- Expanding the SOLAGE model to the SOLAGE Family Engagement Network with creation of 25 new groups to date.
- Medication-Assisted Treatment is being made available to all Medicaid clients with opiate addiction to aid recovery.
- Launched *Don't Get Me Started* opiate abuse prevention/education campaign, see www.dontgetmestartedohio.org.
- Created 24 new Opiate Task Forces focusing on prevention, treatment, and law enforcement efforts.
- More than 4,000 clients enrolled in the Rehabilitation Services Commission Recovery to Work program that provides behavioral health treatment services and employment training for Ohioans.

Ohio Department of Health

- The Governor's Cabinet Opiate Action Team Professional Education workgroup developed and released the *Ohio Emergency and Acute Care Facility Opioids and Other Controlled Substances Prescribing Guidelines*. The Guidelines provide guidance for prescribing opioids and other controlled substances in an acute care setting where treatment of pain is often indicated without an established physician-patient relationship.
- Portsmouth City Health Department, in partnership with the Ohio Department of Health, announced the startup of Ohio's first Naloxone overdose prevention program, Project DAWN (Deaths Avoided with Naloxone) in June, 2012. Individuals are trained to respond to an opioid overdose, including use of Naloxone. Visit: <http://www.healthyohioprogram.org/vrpp/drug/ProjectDAWN.aspx>.
- For 2011-12, funded four new community-based prescription drug abuse prevention coalitions for a total of 10.

Ohio Department of Public Safety & State Highway Patrol

- Through June 2012, the Patrol has seized 327% more heroin as compared to the same time in 2011.
- The Patrol has seized 13% more prescription narcotics than compared to the same time period in 2011.
- Patrol drug arrests are up 30% compared to the same time in 2011; total is 3,963 drug arrests.
- Patrol OVI arrests are up 10% compared to the same time in 2011; total is 12,361 OVI arrests.

Office of the Attorney General

- Since 2011, the Bureau of Criminal Identification and Investigation seized 55,000 Rx pills valued at about \$1.5 million.
- The Attorney General's special prosecutors have convicted eight people that were major sources of improper prescribing, dispensing and diversion of prescription drugs; 16 other investigations are underway.
- The Attorney General's Office is partnering with the Ohio Department of Health, Drug Free Action Alliance, and ODADAS to provide 75 Prescription Drug Drop Boxes to southern Ohio's law enforcement agencies.
- The Ohio Peace Officer Training Academy has trained 1,100 officers on the scope of the prescription drug problem.

Office of Medicaid

- Established a pharmacy lock-in rule to prevent pharmacy shopping, effective January, 2012.

State Medical Board of Ohio

- Inappropriate prescribing/pill mill issues account for 20% of the 136 actions taken against physicians in 2011-12.
- 40% of the inappropriate prescribing/pill mill sanctions suspended the physician's license to practice.
- Published FAQs for new rules related to prescribing of narcotics and use of Ohio Automated Rx Reporting System (OARRS) and provided 23 presentations related to HB 93 in 2011.

State Pharmacy Board of Ohio

- The effects of HB 93 on the OARRS from pre-HB 93 and new rules compared to June 30, 2012: Prescribers and delegates - 39% increase in OARRS registration; 159% increase in patient reports requested. Pharmacists - 85% increase in OARRS registration; 475% increase in patient reports requested.
- A federal grand jury returned an 11-count indictment against John Randy Callihan of West Portsmouth, and Christopher Stegawski of Cleveland, alleging that they operated "pill mills" in Dayton, Lucasville and Southpoint, where they sold prescriptions for controlled substances (primarily oxycodone), without a legitimate medical need.
- Of 96 investigations, a total of 82 suspects were identified and prosecuted criminally.

Ohio State Dental Board

- In line with HB 93, enacted rules to address when dentists must access OARRS prior to prescribing controlled substances. Educational course offered in September 2012 at Ohio Dental Association's Annual Session.
- Published FAQs for new rules related to prescribing of narcotics and use of OARRS.

Ohio's Attack on the Opiate Addiction and Overdose Epidemic

SFY 2012 Annual Report

OVERVIEW

The abuse of prescription medications, specifically opiates, has reached epidemic proportions in Ohio. The crisis has dramatically impacted individuals and families, leaving communities devastated and anxious to find ways to prevent addiction and to stop the deaths caused by abuse of narcotic painkillers and use of heroin. In fact, these substances accounted for nearly 63 percent of the state's 1,544 overdose deaths in 2010, and currently, opiate addiction is the diagnosis for about one-third of all clients in addiction treatment.

In addition to the human toll, Ohio's opiate epidemic has severely strained law enforcement, criminal justice, and health care resources and stretched the capacity of the state's publicly-funded alcohol and other drug addiction treatment services system. Evidence increasingly points to opiate addiction as a major driver of increasing health care costs as well. A study in the *Journal of Managed Care Pharmacy* estimates that the medical expenses of a person who is abusing opioids are eight times those of a non-addict.

Thanks to a number of initiatives launched in 2011, two of the counties hardest hit by the crisis, Scioto and Gallia, saw a combined drop in narcotics prescribed of nearly two million doses, about a 15 percent reduction. Where efforts were less concentrated in northern counties, the Ohio Board of Pharmacy continued to see small increases in opiate doses prescribed.

Developing and implementing cost-effective policies and strategies to resolve the crisis is a collective responsibility. From generating greater public awareness around the issue to toughening state laws and regulations around how controlled substances are prescribed (HB 93), and embracing evidence-based treatment technologies such as Medication-Assisted Treatment (MAT), Ohio is acting swiftly and decisively to rein in spiraling health care costs and prevent more tragic deaths.

GOVERNOR'S CABINET OPIATE ACTION TEAMS

In January 2011, Governor John Kasich announced that his administration would battle the opiate epidemic on all fronts. The Ohio Department of Alcohol and Drug Addiction Services (ODADAS) was tasked with leading and coordinating the cross-systems efforts to impact addiction and overdose caused by opiates. To address the many facets of the issue, a Governor's Cabinet Opiate Action Team was formed.

The five Opiate Action Teams represent Professional Education, Treatment, Public Education (including prevention), Enforcement, and Recovery Supports. Directors of Ohio's Cabinet-level state departments chair these working groups. Many initiatives have been launched under the umbrella of the Action Teams and numerous positive accomplishments can be traced to this inter-disciplinary work.

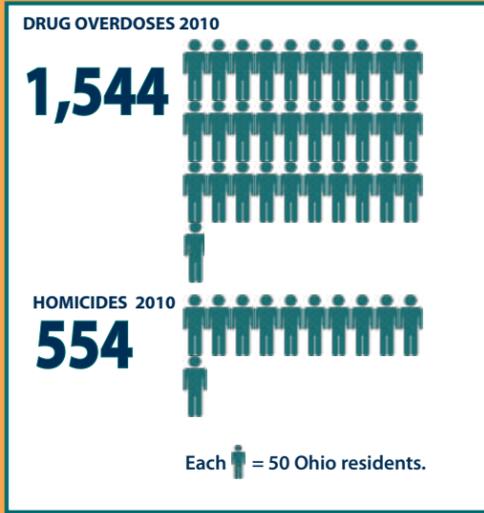
KEY FACTS

- Prescribing of narcotic painkillers in Ohio grew an estimated 1000 percent from 1997-2010. (ODADAS with ARCOS data, 2011)
- Since 2007, unintentional drug overdoses have been the leading cause of accidental death in Ohio. Fatal and non-fatal poisonings cost Ohioans \$3.6 billion annually. (*Ohio Department of Health, "Burden of Poisoning in Ohio, 1999-2008"*)
- Prescription opiates and heroin accounted for nearly 63 percent of unintentional overdose deaths in 2010. (*Ohio Department of Health*)
- Nearly 30 percent of Ohioans in publicly funded addiction treatment have a diagnosis of opiate addiction. (ODADAS, MACSIS, SFY 2012)
- 85 percent of substance abuse treatment requests at The Scioto County Counseling Center are for opiate addiction, marking a 300 percent increase in the past three years. (*Scioto County Rx Drug Action Team*)
- The Ohio Substance Abuse Monitoring (OSAM) Network reports a move from prescription painkillers to heroin among opiate abusers with age of first use becoming younger and younger. Heroin is highly available in all regions of the state. (ODADAS, OSAM Network, 2012)

Opiate Abuse in Ohio

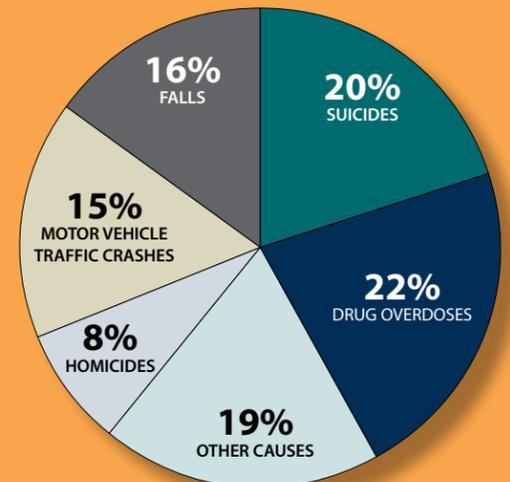


Source: ODH Office of Vital Statistics

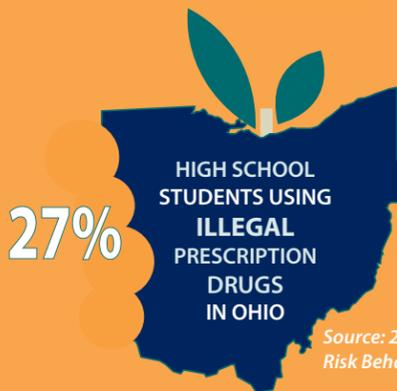


Source: ODH Office of Vital Statistics

LEADING CAUSES OF TOTAL INJURY DEATHS



Source: ODH Office of Vital Statistics



Source: 2009 Ohio Youth Risk Behavior Survey

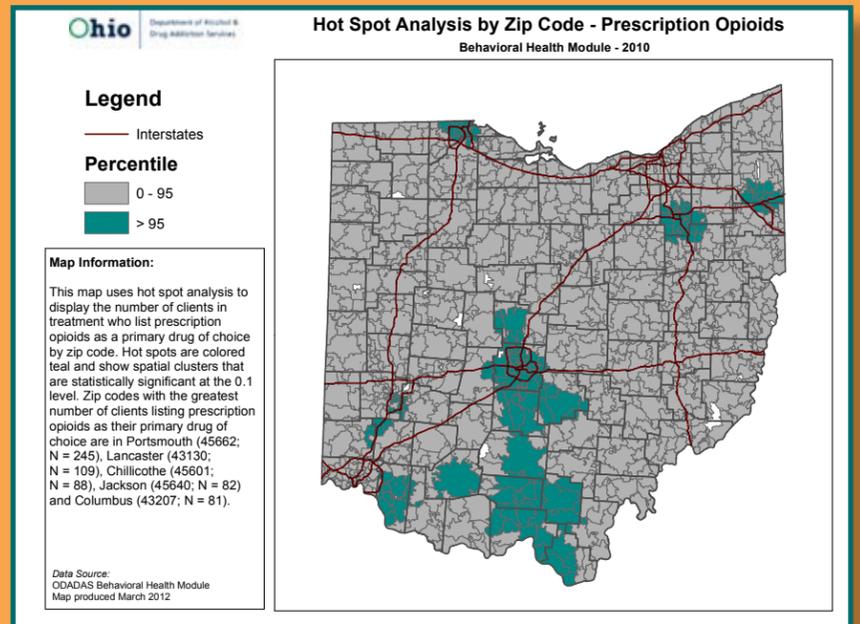
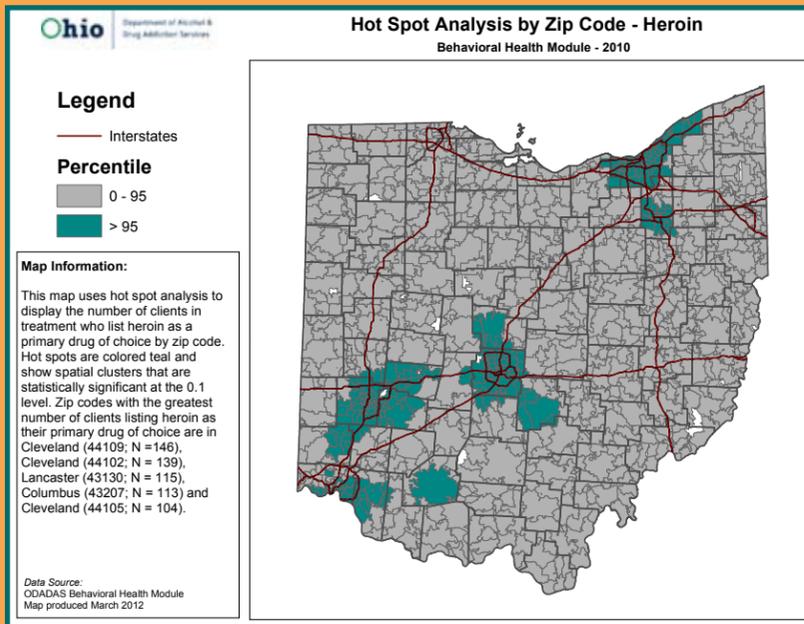


Source: Partnership @ Drugfree.org

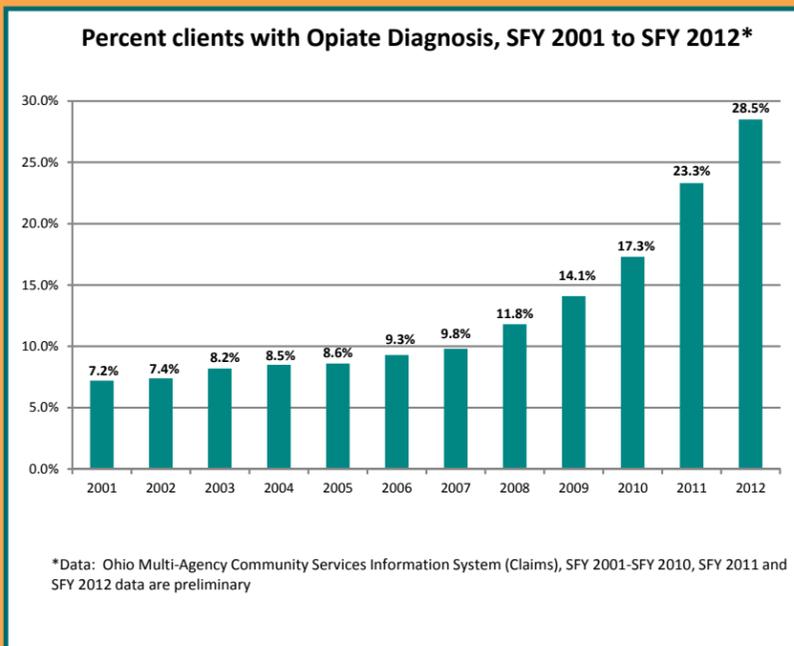
HOW Rx OPIATES ARE OBTAINED



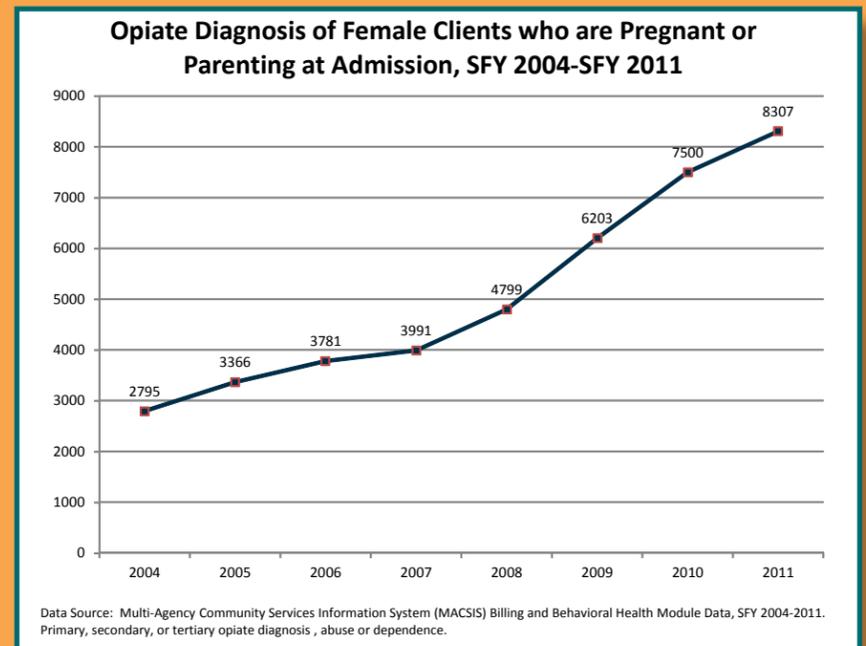
Source: 2010 National Survey on Drug Use and Health



HOME LOCALES OF CLIENTS WITH OPIATE-BASED DRUGS OF CHOICE — The maps above use claims data based on the home zip code for clients served in ODADAS' publicly funded addiction treatment system; specifically, the maps show clients with a prescription opiate (painkiller) drug of choice as compared to clients with a heroin drug of choice. Urban centers still serve as the primary locales for people with heroin addiction, while more rural communities have been hardest hit by painkiller addiction.



INCREASES SEEN IN OHIOANS WITH OPIATE ADDICTION — From 2001 to 2011, the percentage of Ohioans in ODADAS' publicly funded addiction treatment with a diagnosis of opiate addiction has continuously increased. From 7.2 percent in 2001, nearly 30 percent of all clients in SFY 2011 were in treatment due to an opiate addiction. In some treatment agencies in southern Ohio, this percentage can be as high as 85 percent.



MORE THAN JUST THE PERSON WITH THE DISEASE OF ADDICTION — When the person with addiction is pregnant or parenting, newborns and children become potential casualties of the illness. ODADAS has taken a close look at treatment claims for women with opiate addiction to track the past years' trends. This graph shows a nearly 200 percent increase over the past 8 years for women who are pregnant or parenting and in treatment with an opiate addiction diagnosis.