



Office of the Director

Kate Brown, Governor

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Authority

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April 7, 2015

The Honorable Senator Richard Devlin, Co-Chair  
The Honorable Representative Peter Buckley, Co-Chair  
Joint Committee on Ways and Means  
900 Court Street NE  
H-178 State Capitol  
Salem, OR 97301-4048

Re: Request to Apply Letter – Competitive Grant – Prescription Drug Overdose  
Prevention for States (OHA-PH-15-06)

Dear Co-Chairpersons:

### **Nature of the Request**

The Oregon Health Authority (OHA), Public Health Division (PHD) requests permission to apply for the Prescription Drug Overdose for States grant for federal funds up to \$875,000.00 a year for 4 years, beginning September 5, 2015 and ending September 4, 2019, for a total of up to \$3,500,000.00.

The intent of the grant is to enhance and maximize the state prescription drug monitoring program, and implement community and insurer/health system interventions aimed at preventing prescription drug overdose and abuse. The funding is available through the Centers for Disease Control and Prevention, Center for Injury Prevention and Control. The request for proposals was received on March 5, 2015, and the application is due on May 8, 2015. This grant funding requires no state matching funds. There is not a federal requirement for maintenance of effort.

### **Agency Action**

While every state in the nation is continuing to experience annual increases in overdose deaths, Oregon's drug overdose prevention efforts have resulted in a decrease in prescription drug overdose deaths and heroin overdose deaths in both 2013 and 2014. The Prescription Drug Monitoring Program (PDMP) launched in 2011 is used by 42% of healthcare providers who write controlled substance prescriptions (74% of the top 2,000 providers who write 59% of prescriptions are registered to use the system – unpublished data). In Multnomah County and in Jackson County, community public health efforts to

reduce over prescribing opioids (dosages over 100 milligrams morphine equivalency), implement naloxone rescue, and increase the number and quality of treatments for opioid dependence have contributed to reducing death rates significantly. However, there is much work to be done to mobilize the healthcare community to address an opioid overdose epidemic that began when the medical community instituted a practice of aggressively treating pain with opioids in 2000.

This grant project will engage local opioid prescriber groups to enhance a shift in more cautious prescribing for chronic non-cancer pain, sustain and increase naloxone rescue in cases of overdose, and expand the access to medication assisted treatment for opioid dependency. These outcomes will in turn prevent prescription drug overdose and heroin overdose. The project intends to promote safety and health for patients while it increases patient safety and makes medication assisted therapy accessible throughout Oregon. The project activities will increase delivery of PDMP data to prescribers, evaluate policies that reduce drug overdose and abuse, provide technical assistance and data to high-burden communities and counties, promote the uptake of opioid prescribing guidelines by health systems and promote the use of PDMP use guidelines by health systems. The system enhancements will help to make medication-assisted therapy accessible and increase use of non-pharmacological treatment for chronic non-cancer pain. The project will engage state and local partners and stakeholders who will participate in a system design, implementation and evaluation of the PDMP program.

The grant will help to increase and improve data from community or county level sources to guide local efforts in systems planning for better coordination and continuity of care across health systems. Data from this project will support local efforts to address opioid overdose, prescribing opioids at greater than 100 milligram morphine equivalent dose, doctor shopping, medication assisted therapy for opioid dependence, lay person naloxone rescue of persons experiencing an overdose, and the development of improved care from chronic non-cancer pain, including non-pharmacological care, peer support, medication-assisted therapy. Grant activities conducted by Department staff in the Injury and Violence Prevention Program will also accelerate the processing of existing electronic data from emergency departments will add a much needed level of understanding beyond death and hospitalization data.

Stakeholders for this project include researchers and physicians at Oregon Health Science University, local public health departments, local substance abuse treatment programs, pain management clinics, medical communities, health care systems, State Medical Examiner and local medical examiners, Lines for Life (suicide prevention), Western Oregon Advanced Health, Jackson County Opioid Prescribers Group, Oregon Pain Advisors, Acumentra Health, Portland Veterans Administration, Oregon Department

of Justice, Healthy Columbia Willamette, Outside In, the Prescription Drug Monitoring Program Advisory Commission, and the OHA Transformation Center, Addictions and Mental Health Division, and Health Evidence Review Committee.

Funds will be used to create two limited duration positions. One full time equivalent Program Analyst 3 will work with local opioid prescriber groups in six regions of Oregon to implement project activities. The Program Analyst will plan, track, and manage all aspects of this four year cooperative agreement. This work includes but is not limited to: developing contracts with local health departments, convening and facilitating a state level project management work group, contracting for state level evaluation (required by Centers for Disease Control and Prevention) for which PHD presently has a contract with Portland State University, and to liaison with national level evaluators, disseminate quarterly data and evaluation information to local opioid prescribers groups, work with Centers for Disease Control and Prevention staff to align project objectives with evaluation findings, travel to Atlanta for annual reverse site visit, travel to local project sites to participate in quarterly meetings, facilitate monthly project teleconferences with opioid prescriber group leaders, convene and participate in an evaluation team to study the impact of public policies on the prescription drug overdose epidemic, develop reports and continuation applications, assist in development of manuscripts and public presentations, and other activities as assigned.

One full time equivalent Administrative Specialist 1 will serve as point of contact for the project. This position will set up and coordinate project meetings with local partners, grant management work group, evaluation team, CDC project officers, and national evaluation team, document action items and deliverables for all meeting proceedings, develop materials and assist other staff to develop documents for publication and dissemination, and track all program activities in project management software.

Funds will also be used to provide grants to up to six regions of the state. The site selection will be determined by a group of data points: 1) the 10 year county mortality rate (which was necessary, since some of these counties have very small counts of overdose deaths due to population size); 2) the prescription opioid hospitalization rate (also an aggregated 10 year rate); 3) the all opioid prescribing rate per 1,000; 4) the average patients per month in the county receiving opioid at greater than 100 morphine equivalent dose; 5) the county population.

The Honorable Richard Devlin, Co-Chair  
The Honorable Peter Buckley, Co-Chair  
March 19, 2015  
Page 4 of 4

There is no expectation that the state will continue to fund these activities or positions at the end of the grant period.

The OHA mission is to help people and communities achieve optimum physical, mental and social well-being through partnerships, prevention and access to quality, affordable health care.

**Action Requested**

The Oregon Health Authority (OHA), Public Health Division requests authority to accept a Prescription Drug Overdose Prevention for States grant from the Centers for Disease Control and Prevention if the state's application is successful.

**Legislation Affected**

None.

For additional information, please call Lisa Millet, at 971-673-1059.

Sincerely,



Bill Coulombe  
Budget Director  
Oregon Health Authority

CC: Ken Rocco, Legislative Fiscal Office  
George Naughton, Chief Financial Office  
Linda Ames, Legislative Fiscal Office  
Kate Nass, Chief Financial Office  
Art Ayre, Chief Financial Office