

Opiate Overdose Outreach Pilot Program

Legislative Report September 1, 2018

During the 2016 General Session, the Utah State Legislature passed the Opiate Overdose Response Act which included the following House Bills (HB):

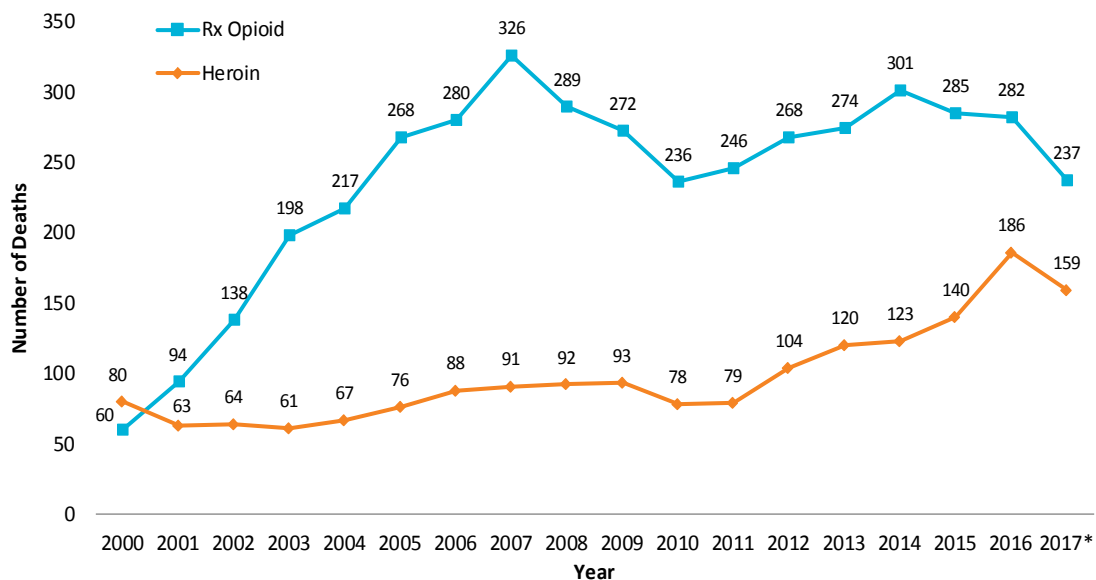
- **HB 192: Opiate Overdose Outreach Pilot Program** (Sponsored by Representative McKell) created the Opiate Overdose Outreach Pilot Program within the Utah Department of Health and authorized the department to make grants through the program to persons that are in a position to assist an individual who is at increased risk of experiencing an opiate-related drug overdose event.
- **HB 238: Overdose Outreach Providers** (Sponsored by Representative Spackman Moss) authorized an overdose outreach provider to furnish an opiate antagonist without civil liability and required an overdose outreach provider to furnish instruction on how to recognize and respond appropriately to an opiate-related drug overdose event.
- **HB 240: Standing Orders** (Sponsored by Representative Eliason) authorized the use of a standing prescription drug order issued by a physician to dispense an opioid antagonist.

According to Utah Code 26-55-107(8) the Utah Department of Health (UDOH) shall report to the Legislature’s Social Services Appropriations Subcommittee no later than September 1 of each year on the outcomes of the Opiate Overdose Outreach Pilot Program.

The expected outcome of the Opiate Overdose Outreach Pilot Program is to reduce opioid overdose deaths.

The number of prescription opioid overdose deaths has decreased 16.0% from 2016 to 2017 and the number of heroin overdose deaths decreased by 14.5% in the same time period (Figure 1).

Figure 1: Number of occurrent opioid overdose deaths by type of opioid, Utah, 2000-2017



*Counts from 2017 are preliminary and subject to change as additional toxicology results become available.
Data note: Deaths involving both heroin and prescription opioids are included in both categories

Outcomes

Opiate Overdose Outreach Pilot Program

The Opiate Overdose Pilot Program was implemented from July 1, 2016 to June 30, 2017 with one-time funding.

- \$236,037 awarded to 17 law enforcement agencies, five local health departments, and nine direct service agencies
- 3,821 naloxone kits purchased
- 2,671 naloxone kits disseminated
- 1,971 individuals received naloxone kits
- 54 lives known to be saved

Overdose Outreach Providers (January 1, 2018 – August 31, 2018)

The UDOH Violence and Injury Prevention Program (VIPP) continues to implement the program through state general funds and federal funds from the Division of Substance Abuse and Mental Health State Targeted Response grant.

Through an open application for individuals and organizations interested in receiving Narcan® nasal spray, 2,508 naloxone kits have been purchased through general funds, and 2,076 naloxone kits have been purchased through federal funds. The open application for naloxone can be found at <https://naloxone.utah.gov/narcan-request>.

Standing Orders

- 173 pharmacies currently participating
- 2,138 naloxone kits dispensed between January 1, 2017 and December 31, 2017

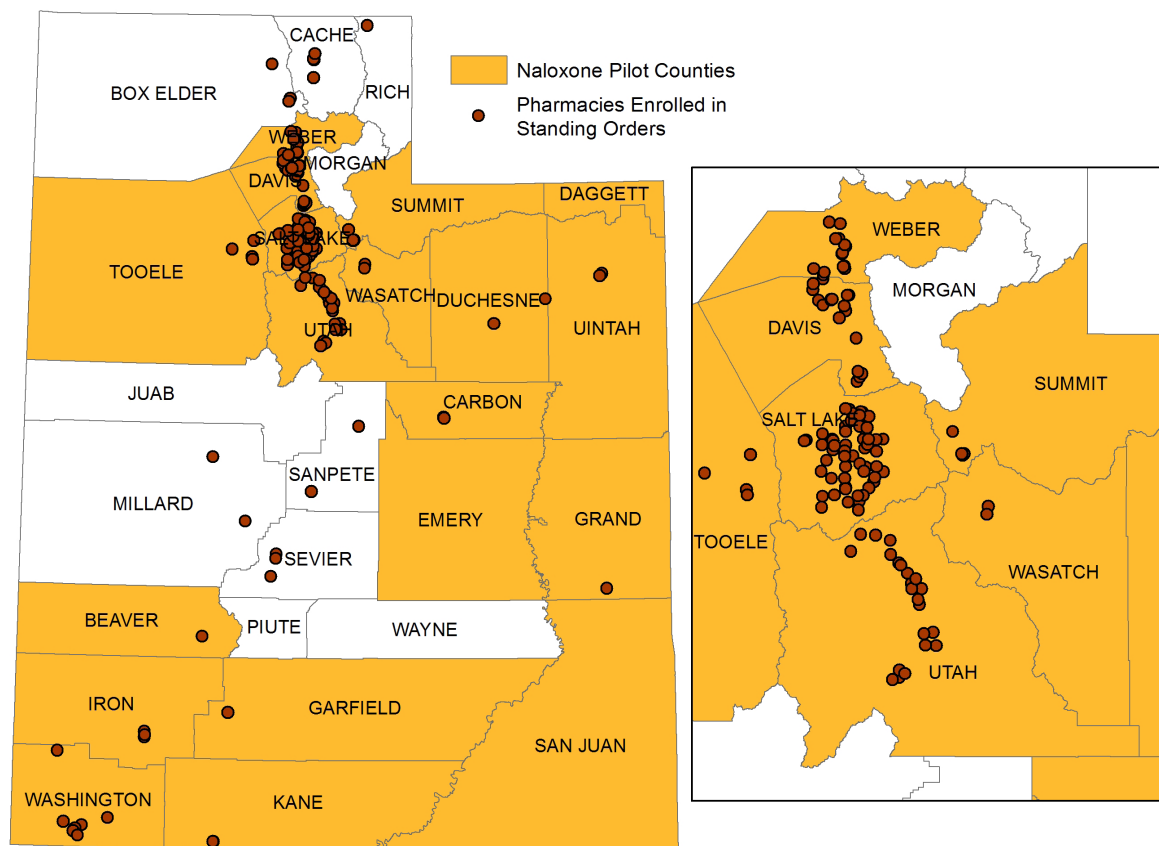
Naloxone Educational Resources

In 2017, the following naloxone specific materials were distributed as part of the Stop the Opioid epidemic media campaign (www.opidemic.org):

- More than 267,000 views of the [Naloxone awareness](#) video
- 20,900 [brochures](#) disseminated
- 9,782 [overdose prevention Pocketcards](#) disseminated

Figure 2 shows the Utah counties that benefited from the Opiate Overdose Pilot Program and the distribution of pharmacies which participate in the Utah statewide standing order for naloxone (voluntary enrollment).

Figure 2: Map of Geographic Reach of Opiate Overdose Response Act



Implementation of Opiate Overdose Outreach Pilot Program

The UDOH VIPP released two Requests for Proposals (RFP) in 2016 to contract with qualified opiate overdose outreach providers for the Opiate Overdose Outreach Pilot Project. Funds were provided to purchase naloxone and provide training on the proper administration of naloxone for individuals who are at risk for an opiate-related drug overdose event, as well as their family or friends.

Although the pilot program was only funded for one year, the UDOH VIPP continues to implement the program through an open application system for naloxone. This is done through additional funding sources.

Opiate Overdose Outreach Providers

Eligible grantees for the pilot program included organizations in a position to assist an individual at increased risk of experiencing an opiate-related drug overdose event and included the following:

- Law enforcement agencies
- Local health departments
- Local substance abuse or mental health authorities
- Substance abuse treatment, recovery, or support services
- Homeless services
- Naloxone training services
- Schools
- Harm reduction services

Currently an open application for individuals and organizations interested in receiving Narcan[®] nasal spray can be found at <https://naloxone.utah.gov/narcan-request>.

Reporting Requirements

Contracts with each of the pilot program grantees were processed with the following reporting requirements. The grantee shall submit an interim and final report to the UDOH and will include:

- The amount of opiate antagonist purchased and dispensed by the grantee during the reporting period.
- The number of individuals to whom the opiate antagonist was dispensed by the grantee.
- The number of lives known to have been saved during the reporting period as a result of the opiate antagonist dispensed by the grantee.
- The manner of which the grantee shall record, preserve, and make available for audit by the department, the annual report requirements listed above.

Rulemaking

The UDOH Violence and Injury Prevention Program filed an emergency rule with the Utah Department of Administrative Services to establish procedures and application processes pursuant to Title 26, Chapter 55 for the UDOH by July 1 to provide funds to pay for the purchase of an opiate antagonist or to pay for the cost of providing training on the proper administration of an opiate antagonist in response to an opiate-related drug overdose event. The emergency rule was published in the July 15, 2016, issue (Vol. 2016, No. 14) of the Utah State Bulletin.

A permanent rule was filed with the Utah Department of Administrative Services to replace the 120-day emergency rule and was published in the September 15, 2016 issue (Vol. 2016, No. 18) of the Utah State Bulletin.