BEHAVIORAL HEALTH UPDATE

A Monthly Report for Members
of the American Hospital Association and the
National Association for Behavioral Healthcare
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Congress Passes Bipartisan Bill to Address Opioid Crisis
Congress passed the SUPPORT for Patients and Communities Act, an opioid-response legislative package that House and Senate negotiators agreed to last month.

The Senate passed the measure in a 98-1 vote on Oct. 3, the 10-year anniversary of the Mental Health Parity and Addiction Equity Act. Days earlier, House members approved the comprehensive bill that includes the first substantive change to Medicaid’s Institutions for Mental Diseases (IMD) exclusion since the early 1970s. Twenty-seven members did not vote on the bill.

The legislation provides an optional benefit for states to pay IMDs for substance use disorder (SUD) treatment for patients between the ages of 21-64 for 30 days each year. In addition,
patients with mental illness could be treated under this provision as long as they have at least one SUD, although the bill does not specify if SUD must be a primary or secondary condition. The provision is scheduled to take effect in October 2019 and end in September 2023. Congressional action is required to extend the measure beyond that four-year period.

The SUPPORT Act includes a maintenance-of-effort provision that would require states to maintain their current funding levels for both inpatient and outpatient services. In addition, a state would need to show the federal government that it has the full continuum of services, including early intervention, outpatient, intensive outpatient, partial hospitalization, and inpatient/residential transitions of care. All of these requirements are consistent with the recommendations NABH made in *Pathways to Care: Treating Opioid and Substance Use Disorder*.

In addition, eligible IMDs would be required to follow “reliable, evidence-based practices” and offer at least two forms of medication assisted treatment, including one antagonist and one partial agonist.

**HHS Awards More than $1 billion for Opioid Crisis**

HHS last month awarded more than $1 billion in grant funding to address America’s opioid crisis.

An announcement from HHS said the grants support the department's five-point opioid strategy, which was launched last year and focuses on better addiction prevention, treatment, and recovery services; better data; better pain management; better targeting of overdose-reversing drugs; and better research.

"This week, HHS updated its strategic framework for tackling the opioid crisis, which uses science as a foundation for our comprehensive strategy," Admiral Brett Giroir, M.D., assistant secretary for health and senior advisor for opioid policy, said in the announcement. "With these new funds, states, tribes, and communities across America will be able to advance our strategy and continue making progress against this crisis."

SAMHSA awarded more than $930 million in state opioid response grants, and about $90 million to other programming for states and communities to expand access to medication assisted treatment; increase distribution and use of overdose-reversal drugs; and increase workforce-development activities.

**U.S. Surgeon General Urges ‘Cultural Shift’ in How Americans Talk About Opioids**

No area of the country has been spared from the opioid crisis, yet only 53 percent of the public consider opioid addiction a major concern, according to a new *Spotlight on Opioids* from U.S. Surgeon General Jerome Adams, M.D., M.P.H.

Consequently, the U.S. Surgeon General has asked the public to take specific actions that could ultimately help shift the dialogue on this public health emergency. These include: talking about opioid misuse; taking opioid medications only as prescribed; storing medication in a secure place; understanding pain and talking with a healthcare provider about non-opioid treatments to manage pain; understanding that addiction is a chronic disease; and learning how to use naloxone, an opioid overdose-reversing drug.

Also this week, HHS announced it has developed materials to help clarify how clinicians can use telemedicine as a tool to expand buprenorphine-based medication assisted treatment for opioid use disorder treatment. Click [here](#) to learn more.

**SAMHSA Releases 2017 National Survey on Drug Use and Health Report**

The Substance Abuse and Mental Health Services Administration (SAMHSA) last month released the 2017 National Survey on Drug Use and Health (NSDUH) Annual National Report, which summarizes key findings for national indicators of substance use and mental health among people aged 12 or older in the civilian, non-institutionalized population of the United States.
According to the annual report, 30.5 million people aged 12 or older used an illicit drug in the past 30 days, which relates to about 1 in 9 Americans, or 11.2 percent.

Meanwhile, an estimated 46.6 million adults aged 18 or older, or about 18.9 percent, had any mental illness in the past year, and about 11.2 million adults nationwide had a serious mental illness, which represents about 4.5 percent of all U.S. adults.

Click here to access the annual report and detailed tables based on the survey’s results.

The Joint Commission Releases First Data-Driven Estimate of Suicides in U.S. Hospitals

About 49 to 65 hospital inpatient suicides occur in the United States each year, far fewer than a widely circulated estimate of about 1,500, according to new data published in The Joint Commission Journal on Quality and Patient Safety.


According to the findings, about 49 to 65 hospital inpatient suicides occur each year in the United States. Of these, 75 percent to 80 percent were among psychiatric inpatients.

Hanging accounted for more than 70 percent of suicides in both databases. About half of suicides occurred in the bathroom; one third occurred in the bedroom, and the remainder occurred in the closet.

“Hospitalization is intended to provide patients a safe, protected environment designed to heal and stabilize them during periods of crisis, and suicides that occur within a hospital are considered to be sentinel events,” Scott C. Williams, Psy.D., director of the Joint Commission’s research department and the study’s lead author, said in a news release about the findings. “The Joint Commission is improving its methods for analyzing inpatient suicides to collect more detailed information so we can provide better guidance on how hospitals can mitigate suicide risk more effectively.”

Report Shows One-Third of Americans Received an Opioid Prescription in the Past Two Years

About thirty-two percent of American adults have received a prescription for opioids in the past two years, according to a new survey from NORC at the University of Chicago.

Results from the new AmeriSpeak® Spotlight on Health survey also found that nearly one in five adults, or about 18 percent, have received a prescription for opioids in the last year.

Meanwhile, among adults who ever received an opioid prescription, 91 percent reported that they filled the prescription when they received it, and 29 percent refilled it more than once. Click here to read the news release and learn more.

GAO Examines How Federal Agencies Use Grants to Address Adolescent and Young Adult Substance Use

A recent Government Accountability Office (GAO) study has found there are too few studies about drug addiction treatment for adolescents, too few providers to treat these patients, and too few services to sustain their recovery.

The study examined how federal agencies, through grants, are addressing substance use prevention, treatment, and recovery among adolescents and young adults. According to the study, about 16 percent of adolescents and 38 percent of young adults used illicit substances in
2016, and most young adults who develop substance use disorders start using during adolescence.

GAO researchers interviewed officials from four federal agencies—HHS, ONDCP, the Justice Department, and the Education Department—and 20 stakeholder groups (including advocacy groups, research organizations, and state agencies) about gaps in services or research, and agency efforts to address them.

GAO identified 12 federal grant programs within three federal agencies that funded substance use prevention, treatment, and recovery services in 2017 and targeted adolescents’ and young adults’ use of illicit substances such as marijuana and non-medical use of prescription opioids.

HHS’ National Institute on Drug Abuse (NIDA), the agency that is the primary funder of research on illicit substance use, had 186 active grant-funded research projects that received a total of about $61 million from NIDA in 2017.

“There are federal grants that fund drug addiction treatment for adolescents and young adults,” the GAO noted in a brief summary of the report. “But most of the stakeholders we talked to believed that there are too few studies about drug addiction treatment for adolescents, too few providers to treat these patients, and too few services to sustain their recovery.”

**NIH Study Finds Daily Use of Marijuana Among Non-College Students at All-Time High**

Daily, or near daily, marijuana use among non-college young adults has reached its highest level, according to the Monitoring the Future (MTF) survey results released last month from NIDA at the National Institutes of Health (NIH).

As a result, daily, or near daily, marijuana use is now nearly three times as high among non-college young adults as among college students. In 2017—for the first time—the MTF included questions about vaping marijuana. According to the results, past month use appears to be higher among non-college young adults than amount college students (7.8 percent versus 5.2 percent).

More data and an infographic are available on NIDA’s [College-Age & Young Adults](https://nida.nih.gov/Research-Publications-and-Data/Research-Results/College-Age-and-Young-Adults) webpage, which also includes links to statistics and trends, and a list of more than 400 college programs in addiction science, information about the Addiction Medicine Subspecialty, and other materials, including a [toolkit](https://nida.nih.gov/Events/National-Drug-Alcohol-Facts-Week) for those hosting events during National Drug & Alcohol Facts Week® early next year.

Separately this week, a study published in *Nature Neuroscience* found that some of the same genes associated with the use of cannabis are also associated with certain personality types and psychiatric conditions.

**The Lancet Study Finds Alcohol Use a Leading Risk Factor for Global Disease Burden**

Alcohol use is a leading risk factor for global disease burden and causes substantial health loss, according to results in *The Lancet’s* Global Burden of Diseases, Injuries, and Risk Factors Study 2016.

Researchers found that the risk of all-cause mortality, and of cancers specifically, rises with increasing levels of consumption, and the level of consumption that minimizes health loss is zero.

“These results suggest that alcohol control policies might need to be revised worldwide,” the study noted, “refocusing on efforts to lower overall population-level consumption.”

**SAMHSA Posts Disaster Distress Hotline for Hurricane Florence Survivors**

The Substance Abuse and Mental Health Services Administration (SAMHSA) posted information regarding immediate crisis counseling for those affected by Hurricane Florence in the Carolinas and Virginia.
SAMHSA’s Helpline, 1-800-985-5990, is available 24 hours a day, seven days a week, for anyone who needs counseling after a natural or human-made tragedy. Click here for more information.

NABH thanks its members in the region who have provided and will continue to provide care for those who need it.

**Save the Date for Next Year’s Annual Meetings**
The National Association for Behavioral Healthcare (NABH) and the American Hospital Association (AHA) have posted the dates for their 2019 Annual Meetings in Washington, D.C.

NABH will host its Annual Meeting from **March 18-20, 2019** at the Mandarin Oriental Washington, DC, and the AHA will host its Annual Meeting from **April 7-10, 2019** at the Marriott Marquis.

Feel free to send your feedback, stories, and suggestions:
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