

Press Release

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SAFE Glen Cove Coalition: How is Funding for Opioid Crisis Being Spent?

In 2017, more than 70,000 people in the United States died from a drug overdose; almost 50,000 of those deaths involved an opioid. In 2018, the Trump administration increased opioid funding to states to more than \$7 billion, from a little more than \$3 billion in 2017.

A recent report from the Bipartisan Policy Center (BPC) maintains Federal funding to combat the opioid crisis more than doubled last year, marking an important commitment to prevention, treatment and recovery. The report looks at whether and how that extra \$4 billion is being effectively spent. While funding is being directed to the communities with the highest overdose death rates, the report writers feel that this funding approach lacks long-term vision. "Providing one-time funding is treating addiction as if it's an acute condition instead of a chronic one," says BPC's chief medical adviser. It typically takes eight years for people struggling with addiction to achieve one year of recovery. That statistic is a big reason why addiction policy experts believe that the end of the epidemic is nowhere in sight. But in some places, the funding influx may already be saving lives. In Ohio, one of the states with the highest overdose death rates, officials say fatal overdoses appeared to slightly drop last year as the increase in federal investment has also helped change the addiction conversation- connecting addicts to access the care they need.

The BPC advises that to improve the long-term plan for combating the opioid crisis, better coordination of federal grant programs is key. The BPC found that federal grants related to the opioid crisis are spread across 57 different programs. The diversity of funding -- and sheer volume -- makes it more difficult for state agencies to avoid redundancies and to make sure the money is flowing everywhere it needs to go. This is especially important as states build out treatment networks that include a wide array of stakeholders, such as schools, hospitals and the criminal justice system. On the plus side, the report noted, those 57 programs reflect a multifaceted response to the epidemic, funding not just addiction care but research, criminal justice reforms, public health surveillance and supply reduction efforts.

At the state level, the BPC found that a statewide coordinating body, typically convened by the governor, is an essential part of developing a strategic opioid epidemic response. It also noted that Medicaid expansion has been essential to providing services to people

who struggle with opioid addiction and would otherwise be uninsured and unable to afford treatment. Looking at the opioid treatment medication buprenorphine, the report found that Medicaid coverage accounted for just 3 percent of buprenorphine prescriptions in Tennessee (a nonexpansion state) in 2017. By comparison, 93 percent of buprenorphine prescriptions in Ohio were covered by Medicaid.

The Bipartisan Policy Center is a Washington, D.C.–based think tank that actively promotes bipartisanship. The organization combines the best ideas from both the Republican and Democratic parties to address the nation's key challenges. For more information please visit <https://bipartisanpolicy.org/>

The SAFE Glen Cove Coalition is conducting an opioid prevention awareness campaign entitled, "Keeping Glen Cove SAFE," in order to educate and update the community regarding opioid use and its consequences. To learn more about the SAFE Glen Cove Coalition please follow us on www.facebook.com/safeglencovecoalition or visit SAFE's website to learn more about the Opioid Epidemic at www.safeglencove.org.