Substance Abuse: Bold Steps Forward

Presented by:

National Association of Attorneys General

WEST VIRGINIA ATTORNEY GENERAL’S OFFICE
2014 Overdose Death Rate

West Virginia: 35.5
United States: 14.7

Deaths per 100,000 people*

* Center for Disease Control

Office of the West Virginia Attorney General
KEY PARTS OF THE SUBSTANCE ABUSE PROBLEM IN WV

• Fueled by pills, heroin, meth and synthetics

• Lowest workforce participation rate in U.S. – under 50%

• Loss of population and sense of despair in parts of state

West Virginia Workforce, May 2016

49.4% employed

Total Population
Key Parts of the Substance Abuse Problem in WV

- Heavy demand for addictive products and excessive supply
- Lack of coordination and resources to effectively attack the problem
- Governmental policies exacerbate crisis
• West Virginia AG attacking problem holistically
  – Supply, demand, educational perspective
    • Enforcement
    • Education/Prevention
    • Policy changes
      – Establish Best Practices in private sector and government
    • Eliminate improper financial incentives
    • Prosecution of traffickers
    • Treatment
MAJOR INITIATIVES OF WVAG

• Best Practices Project
• Establishment of new partnerships (local, state, federal)
• Public education
• Enforcement
• Expansion of treatment options
• Other value added services
  – DRoP boxes
  – Incinerators
  – Changes to private sector insurance coverage
  – Efforts to modify DEA permissible drug production
  – Modify reimbursement for non-opioid alternatives
A TASTE OF SOME SPECIFICS

• Best Practices Project
• Public Service Announcements
• Changes in Treatment Options
Multi-faceted approach, collaborating with prosecutors, law enforcement, faith-based leaders and experts in the field, of prescribing and dispensing opioid painkillers

• Taken CDC guidelines and gone a step further – drafting best practices on a local level in a first-of-its-kind collaboration for West Virginia
DRAFT BEST PRACTICES

Reduce use of opioid painkillers in WV by at least 25%

• GOAL: help patients experience the relief they need without the risk of becoming addicted to a drug that may shares some of the addictive properties as heroin

• Recommendations for prescribers and pharmacists so as to reduce misuse, while preserving legitimate patient access to necessary
Pharmacists: verify legitimacy of each patient, prescriber and prescription; and ensure the medication, dose, quantity and any mix thereof is safe and appropriate

Prescribers: regularly monitor patient’s use of opioid drugs; utilize physical exams and urine tests to spot evidence of misuse; and educate each patient about the risks of opioid treatment
Public Service Announcement

- Partnership with Boards of Medicine and Osteopathic Medicine for a series of Public Service Announcements to encourage patients to question their need for opioid treatment:
  - Many patients don’t realize they have been prescribed opioids for pain management
  - Don’t understand the risks involved with opioid pain medications, including the potential of addiction, overdose and death
• Utilize settlement money to fund new treatment
• Enhance faith-based treatment options
  – Replicating success from other states