Statewide Opioid Task Force
Meeting 1 Summary
Wednesday, October 4, 2017
Atlanta Technical College

State of Georgia

Attorney General Chris Carr

- There is no silver bullet to solving the opioid crisis as it impacts every corner of the state – and no one group, community or agency can shoulder the burden of solving this problem.
- The purpose of this taskforce is to bring together all stakeholders, identify and leverage opportunities for partnerships, identify gaps and fill them.
- There is no predetermined outcome for this taskforce – and its formation and function is not intended to usurp anything going on in the state— but to create a platform for discussion and to enhance communication between entities.
- As communication is key to the success of the Statewide Opioid Task Force, the Department of Law wants to be a conduit and a clearinghouse via the listserv managed by Communications Director Katie McCreary.
  - Should you know anyone who would like to be added or should you have information to share with the listserv, contact kmccreary@law.ga.gov.

Georgia Drugs and Narcotics Agency

- The Georgia Drugs and Narcotics Agency (GDNA) functions as the enforcement and investigative arm for the Georgia Board of Pharmacy who has been battling this crisis for years.
- Anything dealing with prescription drugs, GDNA has the authority to inspect and investigate on behalf of the Board.
- GDNA goes in to inspect pharmacies, manufacturers and wholesalers every day – and they will continue to serve this function in an investigatory role.
- The staff seeks to educate pharmacies and pharmacists about the Prescription Drug Monitoring Program (PDMP), which has recently transitioned ownership.
- The program is now being administered by the Department of Public Health (DPH) who is growing the program, and GDNA will remain involved with investigative side of PDMP.
- The staff further seeks to educate pharmacists on diversion trends for the opioid epidemic.
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- GDNA is unique in that its agents are P.O.S.T. certified and licensed Georgia pharmacists. This creates an opportunity to bring together law enforcement and the healthcare and pharma communities to address the issue.

Georgia Council of Accountability Court Judges

- By the end of the calendar year, there will be at least one accountability court in all 49 state judicial circuits.
- The accountability court teams are multi-discipline teams lead by judges, attorneys, law enforcement, clinical providers and social services agencies, and their purpose specifically in the drug court program is to provide treatment service programs to persons who are struggling with substance abuse coupled with behavioral health issues.
- The Council of Accountability Court Judges collects data regarding drugs of choice and ASAM data to target training and resources across the state.
- Medically Assisted Treatment (MAT) training for accountability court teams is part of their CLE training.
- They just recently concluded statewide training conference in Athens with MAT playing a significant role in the program.
- The funding from the legislature to start working statewide on MAT has been effective, and the CACJ have focused this funding on a pilot project in 9th and 10th judicial districts.

Prosecuting Attorneys’ Council of Georgia

- The Prosecuting Attorneys’ Council (PAC) provides operational support, legislative support, and training for all of the District Attorney’s Offices and Solicitor-General’s Offices across the state.
- The PAC joined with legislative partners to help secure the passage of legislation that will be key in the efforts of our prosecutors to address the sale, manufacture, and abuse of these highly addictive and dangerous drugs. HB 231 sought to prevent illicit drug manufactures from evading criminal responsibility by changing a salt or isomer. HB 249 and SB 104 also helped to address the issue from PAC’s perspective.
- A co-occurring public safety threat arising from the opioid epidemic is occurring on our roads. A person struggling with opioid addiction risks their lives daily – through overdose, through disease – to satisfy that addiction. But each time a driver impaired by drugs takes the wheel of a car, or a truck, they risk the lives of every Georgian. In fact, DUID cases are rapidly increasing and are on pace to surpass alcohol related DUI’s. This must be addressed.
- In cooperation with the Governor’s Office of Highway Safety (GOHS), PAC provides focused training, investigative support, and trial support on DUID related issues to police officers, deputy sheriffs, state troopers, and line prosecutors throughout the state. Our goal is to increase the quality and effectiveness of investigations and prosecutions with the belief that these efforts will work to change violator behavior and improve the safety of our roads.
Georgia Department of Behavioral Health and Developmental Disabilities

- The Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD) has a very specific role in addictive disease services – serving as the single state agency (federal designation responsible for planning, organizing and monitoring of critical mental health and substance use services in state) for persons who lack insurance and/or at the highest level of need.
- DBHDD’s Office of Addictive Disease and Office of Prevention Services manage network of providers who deliver services to people in need serving the mission of the Department, prevention, treatment and recovery in communities across Georgia.
- DBHDD was the recipient of a federal opioid use grant – and in Y1 received $11.1M (dictated by population) coupled with a strategic plan for addictive disease services.
- The grant is a two-year grant.
- The Georgia Opioid State Targeted Response project will develop a targeted response to the opioid crisis in the state through prevention, treatment and recovery initiatives. Project activities will strengthen infrastructure and focus on addressing gaps in evidence-based practices and services and creating a continuum of prevention and recovery-oriented treatment.
- Strategies/interventions have been established for prevention, treatment, and recovery.
- It is the intent of DBHDD to meet the charge of Attorney General Carr and work collaboratively with partners to combat crisis

Georgia Department of Public Health

- During the 2017 legislative session, the Department of Public Health (DPH) was given primary oversight of the PDMP.
- Moving forward, all prescribers must be registered in the PDMP by January 1, 2018.
- The PDMP is extraordinarily important to combat the crisis – and Sheila Pierce will function as coordinator for opioid epidemic and DPH.
- DPH recognizes that abuse and misuse of prescription drugs is the fastest growing drug problem in the United States and DPH has made this top priority.
- The Department staff wants to make the PDMP a better public health tool for prescribers, and there will likely be changes which will be submitted to the legislature for 2018 consideration to make it an even more effective tool.
- DPH is currently in process of developing a comprehensive statewide strategic plan for opioid abuse – stakeholders will be invited to strategic meetings to coordinate statewide efforts.
- The plan will continue internal data surveillance and reporting efforts started this past year through a separate DPH initiative.
- DPH is seeking to assemble the best data resource in the state relating to the crisis – known as the DPH Prescription Drug Management Report.
- They will plan to produce annual and quarterly reports on mortality, hospital visits, PDMP data, as well as monthly syndromic surveillance reports for internal distribution.
- A 2016 report on mortality and hospital visits is forthcoming.

**Georgia Department of Community Health**

- The Georgia Department of Community Health has several roles that intersect with opioid abuse being the Medicaid provider for state of Georgia, along with State Health Benefit Plan for all state employees – there is potential for prescription drug abuse within both plans.
- The Office of the Inspector General Program Integrity Unit has focused on their pharmacy lock-in program which seeks to assist health care providers in monitoring potential abuse of prescription medications for at-risk referred members by restricting prescriptions to a single pharmacy for better oversight.
- Healthcare Facility Regulation Division (HFRD) regulates Narcotic Treatment Programs by providing licensing and inspection of program facilities and is currently in the process of revising rules to comply with the passage of SB 88.
- The senior staff of DCH is coordinating with strategic partners through the Behavioral Health Coordinating Council, like the Criminal Justice Coordinating Council, the Council of Accountability Court Judges and the Department of Behavioral Health and Developmental Disabilities, to coordinate efforts and facilitate treatment alternatives in our state’s Accountability Courts.

**Georgia Composite Medical Board**

- The Board is in the process of amending the Rule 360-15-.01 for physicians who hold a Drug Enforcement Administration (DEA) permit and prescribe controlled substances to complete three or more hours of AMA/AOA PRA Category 1 CME that is designed to specifically address controlled substance prescribing practices
- These hours will count towards the CME required for license renewal.
- This goes into effect January 1, 2018 and must be completed within the next license renewal period.
- The Board has placed a GCMB Investigator on the DEA’s Drug Diversion Task Force.
- The Board continues to investigate and discipline as appropriate, any licensee found to have prescribed below the minimum standard of acceptable care.

**Georgia Board of Pharmacy**

- The Board of Pharmacy is an eight member, Governor appointed board.
- They are responsible for the rules and regulations for drugs in the state.
- The Georgia Drugs and Narcotics agency is the enforcement arm of the Board.
- The Board of Pharmacy has the authority to revoke a Pharmacy technician’s registration if they are found to be stealing medications of performing other unlawful activities.
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- This prevents the technician from becoming employed at another pharmacy and continuing the same practices.
- They also may suspend pharmacists that are found to be taking opioids from the Pharmacy.
- Prior to the Naloxone law change, they were able to allow for pharmacists to dispense this life saving medicine to those in need.

- They work with the GBI crime lab when a new compound is identified that is not currently covered under law, and the Pharmacy Board can make that compound illegal.
  - An example of this is the new synthetic fentanyl that is now appearing on the streets.
- One of the places that medications of abuse can be found is in the cabinets in the home.
- When the DEA changed rules to allow for drugs to be returned to pharmacies by allowing receptacles, the Pharmacy Board also mirrored the rule to allow this.

Georgia Criminal Justice Coordinating Council

- Opioid abuse is a very complex issue – especially regarding trying to address the problem through legislative action.
- The Criminal Justice Coordinating Council works with all partners in some form or fashion, and the council is made up of every stakeholder in the criminal justice realm.
- CJCC is the administering agent for federal criminal justice grants – administering Byrne Jag grant providing funding for drug task forces across the state – identifying trends via data collection and surveillance.
- There has been a 97 percent increase in drug task force heroin seizures across the state.
- CJCC also administers state grants – drug court and juvenile justice grants.
- CJCC is currently looking for gaps in services and identifying opportunities to fill those gaps – the 2015 State Drug Enforcement Needs Assessment identifying trends within the issue and subsequent recommendations are very relevant.
The Metro Atlanta Chamber’s interest is distinct in that the epidemic is leading to shrinkage of our labor force.
- Research shows that the increase in opioid prescriptions from 1999 to 2015 could account for about 20 percent of the decline in men’s labor force participation (during the same period) as well as 25 percent of the decline in women’s labor force participation.
- Nearly half of prime age men (ages 25-54) who are not in the labor force take pain medication on a daily basis.
- Two-thirds of those men take prescription pain medication on a daily basis.
- Opioid prescription rates compound the problem as many people who are out of the labor force find it difficult to return to work because of reliance on pain medication.
- To fill the new jobs created, the state must continue to ensure labor force is robust and not diminished due to addiction and abuse.

Each of the 170 hospitals and health systems across the state who are members of the Georgia Hospital Association are seeing issues with the opioid epidemic because these patients come from all walks of life.
- GHA wants to push for patient safety in facilities coupled with appropriate prescription drug use.
- The GHA partnership for health accountability is an education program for providers at all hospitals funded through federal grants – which seek to ask membership to sign on to pledges like ‘Turn the Tide’ pledge on behalf of U.S. Surgeon General.
- From a data collection lens, GHA is currently working on an all-membership survey, looking to identify the things members are working on within their facility to address the issue.
- The most common answer thus far is staff education on prescribing for all staff.
- GHA is also focused on education around Neonatal Abstinence Syndrome which is becoming more prevalent across the state.
- GHA wants to educate pregnant mothers on safe pain management during pregnancy.
- GHA has also seen greater utilization of unused prescription drug drop-offs at various members facilities across the state – and the association is partnering with communities across Georgia to promote this effort.
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- Appriss is based in Louisville, Kentucky and is passionate about the PDMP, supporting 42 states in their PDMP including Georgia.
- Appriss is leveraging best practices within the prescription drug monitoring area via their platform that enables the PDMP to serve all stakeholders.
- Appriss operates the national hub – PMP InterConnect – which enables states to share data with other states.
- Currently, 46 states share PDMP data securely – generating more than 10 million reports per month.
- Appriss is working to integrate PDMP data and analytics within the workflow of clinicians – coupled with Electronic Health Records (EHR) and Health exchanges – generating more than 25 million reports per month.
- As of December 2016, GA is now connected to PMP InterConnect and is sharing data with most of its border states.

CVS

- CVS Health is sincerely committed to be a leader in communities with respect to fight against opioid abuse.
- A set of programs announced recently that will significantly impact and reduce the number of unnecessary opioid prescriptions in communities include aligning insurance coverage to CDC guidelines that were passed last year (7 day limitations for acute prescriptions opioid prescription daily quantity limits, and step therapy requirements) and enhanced commitment to drug disposal.
- CVS has historically operated a program to donate disposal units to local police stations – over 20 units in Georgia and more than 800 nationwide – and is now rolling out 750 disposal receptacles in pharmacies – police stations get disposal units for free and can request one online.
- CVS operates approximately 350 pharmacies in Georgia.
- These pharmacists are committed to helping patients and communities with this issue.
- The CVS Pharmacists Teach program allows pharmacists to conduct an education program in a health class setting for middle and high school students – impacted over 300,000 students nationally with the program.
- CVS is rolling out similar program for parents in the coming months.

Medical Association of Georgia

- The Medical Association of Georgia has taken an active role in addressing prescription drug epidemic over the last several years with their “Think About It” campaign which was founded in 2011 to fund prescription drug disposal boxes, distribute educational leaflets in provider buildings across the state and to host presentations at town halls and physician education events.
They also partner on Attorney General Carr’s ‘Were Not Gonna Take It’ campaign which is a contest where high school students submit video and audio advertisements to deter their peers from experimenting with prescription drugs and social media campaigns on college campuses.

- The MAG Foundation also manages Project DAN (Deaths Avoided by Naloxone) - providing law enforcement with naloxone in 59 Georgia counties.
- MAG encourages physicians to register for PDMP and advocated for increased funding for PDMP to integrate PDMP with EHR in Georgia.

**Georgia Dental Association**

- The American Dental Association, Georgia Dental Association, American Academy of Oral & Maxillofacial Surgeons, and Georgia Society of Oral & Maxillofacial Surgeons have been monitoring this issue at both the national and state levels for some time. They have been proactive in formulating policies, protocols, and initiatives to help curb the opioid epidemic.
- The American Dental Association recently adopted a statement on the use of opioids in the treatment of dental pain that is intended to provide additional guidance to dentists when they are prescribing such substances. The ADA also has numerous member education resources and is actively supporting various national drug disposal campaigns.
- The GDA has been working across the state in concert with subspecialty sponsors and partners to educate members on ADA guidelines The GDA has also implemented a Continuing Education series that it presents to members from across the state on the new prescriber requirements.
- The GDA is working with the Georgia Board of Dentistry to establish an opioid prescriber education component to its dental licensure requirements, which is currently ongoing.

**Georgia Pharmacy Association**

- The Georgia Pharmacy Association believes that reforming PDMP to allow for delegation for prescribers and letting healthcare professionals communicate with each other has tremendously helped to address the crisis over the last two years.
- The Senate Opioid Study Committee also did tremendous work in the 2017 legislative session.
- Pharmacists are now checking and uploading to the system every 24 hours which has further equipped pharmacists to address the crisis.
- The GPhA is focusing on member facing and patient facing education regarding dispensing of naloxone that will be free to members.

**Georgia Society of Health-System Pharmacists**

- The society engages in educational efforts through statewide meetings, district meetings and webinars on pain management standards and state and federal laws regarding controlled substances and naloxone.
Through the Society, there are monthly forums for pharmacy managers to discuss issues relating to opioid abuse and how to tackle the issue from a pharmacy management perspective.

**Anthem Inc.**

- Drug overdoses are the leading cause of accidental death in America, killing tens of thousands of people every year.
- Anthem has chronicled the opioid epidemic plaguing our country in previous blog posts on this site, and discussed the ways those in the health care industry can work together to help address this complex and growing crisis.
- The company believes that insurers have a responsibility to do what we can to combat this epidemic, and reducing the number of opioid prescriptions through prevention is one part of that battle.
- Anthem is responding to this epidemic through a three pillar strategy focusing on prevention, treatment and deterrence.
- The same week of the first meeting of the Statewide Opioid Task Force, Anthem announced that it has found early success with efforts to reduce the number of opioid prescriptions filled at pharmacies.
- Anthem reached a reduction of 31.4 percent in May, 2017, and created a new goal of a 35 percent reduction by 2019.
- These quantity limits began rolling out in October 2016 for individual short-acting opioids, with the limit on the most popular drug, Vicodin, taking effect in July.
- This goal was achieved as a result of the following implemented policies:
  - Limiting coverage of opioids to seven days
  - Requiring provider prior authorization
  - Directing those most at risk for opioid use disorder to one pharmacy
- While these steps forward are encouraging, much more remains to be done to address this public health crisis, recently declared a national emergency by President Donald Trump.
- To that end, Anthem has also committed to helping its affiliated health plans double the number of members who receive behavioral health services as part of medication-assisted therapy for opioid addiction by 2019, as well as identifying and addressing instances of opioid waste, fraud and abuse by leveraging its data mining and analytic capabilities.
Georgia Educational Institutions

University System of Georgia

- All law enforcement officers within the University System of Georgia have been trained and can deploy naloxone.
- Every USG public safety department carries naloxone.
- All R1 institutions are engaged in impactful research around this epidemic, including neuroscience, safety, public policy and more.
- Kennesaw State University has a comprehensive addiction recovery program – and are doing great work on behalf of USG in that region.

Kennesaw State University Addiction & Recovery Center

- The Kennesaw State University Addiction and Recovery Center was the fifth of its kind in the nation – established 10 years ago.
- The Center provides various services – focusing on education of addiction prevention, hitting 99 percent of freshman seminar classes at KSU.
- The Center conducts naloxone training through grants to residential assistants and student housing and others in the KSU community like the college of nursing.
- KSU will be the host of the pilot of ‘Were Not Going to Take It’ Campaign through the Office of the Attorney General.
- The Center also has spearheaded recovery research – identified gap in research and hope to be part of ‘revamping’ of system of care in a social integration model that meets the needs of every single individual.
State/Federal Law Enforcement

Georgia Bureau of Investigation

- The Georgia Bureau of Investigation has been working very hard to combat this epidemic through their investigative division and the state crime lab.
- The West Metro office is offering training on proper administration of naloxone, and this training is administered by a certified paramedic and guidance is offered on how policies should be implemented.
- The North Georgia office responds directly to drug overdoses in that region – via an assisting role – and are focused on identifying the seller of the drug and prosecution if feasible.
- There are 11 agents that are assigned to upper level task forces that are assigned to combat major drug trafficking organizations.
- The GBI is constantly partnering with the DEA and local law enforcement agencies to identify distribution networks.
- The state crime lab is a repository for a substantial amount of information – worked closely with legislature on a bill that would control new formulations of dangerous opioids.
- GBI monitors drug trends.
- In the last year, they’ve been able to identify ten new fentanyl analogues.

Georgia Association of Chiefs of Police

- The Georgia Association of Chiefs of Police is committed to offering suggestions from the task force in the form of education and training to chiefs across the state to help understand the scope of the problem.
- The Association has had very good success with legislators and federal regulators in the past to address other drug issues.
- They are looking forward to future partnerships with these entities to address the crisis.

Atlanta – Carolinas High Intensity Drug Trafficking Area HIDTA

- The Atlanta-Carolinas High Intensity Drug Trafficking Area (HIDTA) is assigned to the heroin response strategy: which is a partnership of both public health and public safety across 28 states including Georgia.
- This network fosters cross disciplinary collaboration and enhances interstate and intrastate collaboration.
- HIDTA is currently working on increasing felony arrest notification – where a person across the country from Georgia gets arrested for drug trafficking, information is then passed to partners in Georgia to help prosecute.
- HIDTA also operates the Overdose Detection Mapping application program – which is a real time overdose surveillance mapping system designed to track known and suspected overdose incidents.
- The application tracks data in terms of fatal/non-fatal and naloxone administration.
- The application is currently live with 12 states, Forsyth and Cherokee county are live in Georgia and Grady EMS and Atlanta Fire will be on board in next 60 days.
- The app is funded through the National Office of Drug Control Policy.

**Atlanta Police Department**

- The Atlanta Police Department has been in partnership with GBI and the US Attorney’s Office to combat opioid abuse.
- Drug Market Initiative (DMI) was conducted in the English Ave. Neighborhood to combat open air heroin drug sales. DMI removed career criminals from the neighborhood and gave others hope with resources provided from various organizations. This is a continued partnership that meets on a monthly basis dedicated to opiate abuse.
- The At Promise Center was created for the kids in the neighborhood but also provide resources for adults living in the area. It also provided Atlanta Police sources to address particular issues after hours of other organizations.
- Atlanta Police, HIDTA, and the USAO continue to investigate over dose deaths in an attempt to identify and prosecute those selling potent heroin.

**United States Drug Enforcement Agency**

- Heroin availability remains at an all-time high nationwide and purity is the highest the nation has ever seen, while the price remains low.
- The epidemic used to be confined to certain areas in Georgia and has since spread to across metro-Atlanta.
- It is almost exclusively Mexican heroin, which is much more likely to have fentanyl mixed in.
- Local purity has risen dramatically – around 50-60% purity with stable pricing.
- Fentanyl spiked in 2015 and has since leveled off, but is now being mixed with cocaine and methamphetamine.
- Georgia is ranked amongst the middle of the country for average prescription of hydrocodone and oxycodone.
- There were more than 100 million prescriptions per quarter in 2013, down to 50 million prescriptions per quarter – oxycodone has risen slightly but hydrocodone has decreased sharply.
- The DEA is seeing a dramatic rise in prescriptions of amphetamines - double where the state was three years ago – and this is likely the next problem for the state to address.

**Federal Bureau of Investigation**

- The Federal Bureau of Investigation is attacking the supply side of this issue through criminal investigations and prosecutions. Examples include:
Targeting the criminal enterprises for federal prosecution (RICO, etc.), whether Cartels, Drug Trafficking Organizations or Gangs

- Pursuing Health Care Fraud cases (using Medicare/Medicaid/Insurance Companies as victims; Prescription Fraud, Diversion, etc.)
- Participating in numerous long-term, ongoing multi-agency Task Forces, Initiatives and Working Groups

- The FBI is also dedicated to community outreach.
- Recently, they launched a DVD production and presentation called “Chasing

United States Attorney’s Office – Northern District of Georgia

- The U.S. Attorney’s Office for the Northern District of Georgia has long been committed to taking actions to address the opioid epidemic.
- Our opioid-specific initiatives include the Heroin-Opioid Working Group, community outreach, the Drug Market Intervention in the English Avenue area in Atlanta, pill mill prosecutions and civil actions, and criminal prosecutions of illicit opioid traffickers.
- Since 2015, the USAO-NDGA has convened bi-monthly meetings of the Heroin/Opioid Working Group to bring together a diverse set of stakeholders, including law enforcement, treatment providers, public health, harm reduction, and the medical community. This group meets on a bi-monthly basis to share ideas and best practices, problem solve, and work together towards achieving concrete goals that will help stem the opioid epidemic in Georgia.
- At the same time, the USAO-NDGA works to raise awareness about opioid and heroin abuse in our community. The USAO-NDGA hosts community awareness events, like community screenings of Chasing the Dragon, a film concerning the dangers of heroin and opioid abuse. The office also appears on multiple community panels, offers training to law enforcement and other community groups, and engages the public through traditional and social media, all to raise awareness of the epidemic.
- The USAO-NDGA’s leadership in the Drug Market Intervention in English Avenue has helped that neighborhood recapture its streets from the open air heroin market. As a result of this program, the open air market has been significantly disrupted and there has been an approximately 40 percent reduction in violent crime in English Avenue.
- Pill mill prosecutions remain a high priority. Notably, 63 percent of people misusing pain pills in the United States do not have a prescription. So, while these prosecutions are complex and time intensive, the USAO-NDGA is committed to continue to bring criminal cases to address the oversupply of opioids in Georgia. The USAO-NDGA will also use its civil enforcement powers – including civil prosecutions and forfeiture – against those who fail to comply with the responsibilities that come with a DEA license or who try to illegally profit off of this epidemic.
- The USAO-NDGA will continue to investigate and bring criminal prosecutions to stop individuals illegally distributing heroin, fentanyl, and fentanyl analogues in Georgia.
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Georgia Community Outreach Organizations

Georgia Prevention Project/SARA Alliance

- The Georgia Prevention Project (GPP) expanded its focus to prescription drugs and heroin in 2014.
- GPP offers training programs in schools (700 teachers in last 18 months) – and GPP can track the program every day down to number of kids in the room.
- The project is privately funded, with small grants from DBHDD – created SARA (Substance Abuse Research Alliance) – 100 participants in higher education, public agencies, researchers and law enforcement to look at several aspects of research and what’s needed in regard to substance abuse.
- SARA published a white paper earlier this year – with 8 recommended legislative actions – new version of white paper with new recommendations is due before the end of the month.
- The Alliance met with the Governor’s Office regarding developing a strategic plan – and are fully in support of DPH strategic plan to draft and implement the plan.

Georgia Council on Substance Abuse

- The three main functions of the non-profit are as follows:
  o Public education and training around addiction and recovery
  o Peer recovery and support services
  o Advocacy
- The non-profit is heading the Recovery Community Organization (RCO) development work throughout the state.
- This work just got expanded with a $525,000 SAMHSA Grant.
- This month, GCSA will officially begin a program for CARES in Emergency Departments at Northeast Georgia Hospitals to assist those who have experienced an overdose.
- GCSA’s Recovery Warm-line, which will be staffed by CARES, will begin operating before the end of this year.

Troup County Prevention Coalition

- The Coalition is a Drug Free Communities’ grantee funded through Office of National Drug Control Policy – funding flowed from federal government to communities to address opioid addiction crisis.
- Prevention providers throughout the state assist mightily in tackling the issue.
- There are 17 DFC grantees, and multiple ASAP providers who partner with agencies and providers across the state
- Troup County coalition has had a focused awareness campaign, the ‘Think About It’ campaign utilizing billboards, pamphlets in doctors’ offices and pharmacies.
- The Coalition has brought three new drop boxes at each law enforcement agency in Troup County area.
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- The Coalition is working with a statewide collaborative to provide drop boxes in every county across the state and the coalition has worked with stakeholders and law enforcement to be trained on utilizing naloxone across county law enforcement in addition to Fire/EMS and school nurses.

Council on Alcohol and Drugs

- Drug Free Workplace:
  o The opioid crisis is taking a toll on the American labor force. We are combatting the problem by assisting employers with implementing state-certified drug free workplace programs.

- Prevention and Intervention:
  o The GA Rx Drug Abuse Prevention Collaborative, facilitated by the Council on Alcohol and Drugs is very concerned about the following issue. Patient satisfaction survey results play a major role in hospitals’ accreditation status, physician ratings and Medicare payments. In many cases if patients are not prescribed opioids, whether medically necessary or not, they will give low ratings in their satisfaction surveys. This in turn affects such status, ratings, and payments creating a vicious cycle of prescribing opioids to maintain high patient satisfaction scores. Although this is largely a Federal issue, there are some things we can do at the state level to disrupt this cycle. Rx Drug Abuse Prevention Initiative:
    ▪ The Council’s GA Rx Drug Abuse Prevention Initiative’s website, StopRxAbuseInGa.org website reached over 25,000 people last year. That website contains live-saving narrated ppt webinars on Rx drug overdose prevention and Neo-natal Abstinence Syndrome (NAS) prevention produced in association with the Dept. of Behavioral Health and Developmental Disabilities, the Dept. of Public Health and the Emory School of Medicine Maternal Substance Abuse and Child Development Project.

- The Council on Alcohol and Drugs’ drug drop box campaign provides technical assistance to law enforcement statewide including hosting an online Directory of 210 drug drop boxes operating in 185 sheriff and police departments around the state.
Rep. Sharon Cooper (R-Marietta)

- The state wants patients that need medications to be able to have access to them, but there are persons who need opioids that are being denied them.

Sen. Renee Unterman (R-Buford)

- Senator Unterman has been very active over the last three years in combatting opioid abuse – since April, community forums have been a beneficial action item in addressing the issue.
- The issue impacts families and individuals and deteriorates families.
- This issue remains a priority for 2018 session – the Lieutenant Governor is particularly interested and addressing the opioid epidemic is number three on the platform for the Senate GOP Caucus.
- There will be legislation in 2018 in the form of a comprehensive package with appropriations attached.

Rep. Terry Rogers (R-Clarkesville)

- The State can go a long way in helping to solve the problem by bringing attention and seeking solutions to it through forums like this.

Rep. Beth Beskin (R-Atlanta)

- Prescribers reporting to the PDMP does not define a veterinarian as a prescriber – legislature should consider changing this.
- The state should consider charging a per pill surcharge for opioids, and the money generated could cover addiction treatment – and could encourage the patient to opt for a less addictive type of treatment.
- The state should consider partial fills of opioids – putting fewer prescriptions on the street, and requiring more specific informed consent to opioid prescription, and opioid directive in medical chart.
- Limiting the number of days for which an opioid can be prescribed for minors and eliminating the notion that pain is the fifth vital sign for providers should also be top priorities for the legislature to consider.