

LIVE.LONG.DC. Accomplishments

Goal 1

- Instituted an Opioid Fatality Review Board composed of 15 people from 10+ agencies/organizations across DC. The purpose of the Board is to examine the cases of opioid decedents, review existing data, and make recommendations.
- Received approval on the innovative 1115 waiver that expanded Medicaid coverage for behavioral health services including Psychosocial Rehabilitation Services, residential and inpatient Institutions for Mental Disease (IMD) stays, and recovery support services. Additionally, it removed co-pays for medication for opioid use disorder (MOUD) services and allows psychologists and other behavioral health professionals to bill Medicaid for certain services. In addition, as a condition of reimbursement for services authorized under Chapter 86, IMDs are required to have a participation agreement with the DC Health Information Exchange (DC HIE).
- Connected all Chapter 63 certified providers to the DC HIE. As of spring 2020, the DC HIE includes two registered HIE partners, Chesapeake Regional Information System for our Patients (CRISP) and the District of Columbia Primary Care Association (CPC-HIE). (CRISP is the District's Designated HIE partner.) The CRISP HIE data now includes naloxone distribution in the ambulance data feed as well as the hospital discharge data. There is also an alert for an overdose event in the system.
- Solicited input from stakeholders through a DBH and DHCF Behavioral Health RFI on approaches to integrate behavioral services more fully into the benefits offered through the District's Medicaid managed care program. Stakeholders agreed the vision for this effort is to transform behavioral health care in the District to achieve a whole-person, population-based, integrated Medicaid behavioral health system that is comprehensive, coordinated, high quality, culturally competent, and equitable.
- Implemented Overdose Detection Mapping Application Program (ODMAP) to create an overdose tracking and response system that

uses data to inform decision making and enables the deployment of outreach workers to the scene of an overdose.

Goal 2

- Launched public education campaigns, including an anti-stigma campaign, to increase awareness about opioid use, treatment, and recovery.
- Awarded \$1,150,000 in grants to 23 faith-based institutions to plan for opioid awareness activities and provide information about treatment and recovery services and supports.

Goal 3

- Increased Prescription Drug Monitoring Program (PDMP) registrations due to 2018 legislation requiring mandatory registration for providers: 2,586 users in 2018 → 16,277 users in 2019.

Goal 4

- Expanded education and distribution of naloxone, including enabling 28 pharmacies across all 8 wards to distribute naloxone for free.
- Launched Text to Live (“LiveLongDC” to 888-811) to receive information about where to access treatment and free naloxone from 35 pharmacies and community sites.
- Expanded peer support across the District to include harm reduction services, treatment, and recovery support by growing the network of peer workers through programs such as Rapid Peer Responders and hospital-based peers who support patients after an overdose.
- Expanded outreach capacity to include 6+ outreach teams who are working across the District to connect individuals to needed resources including MOUD, syringe exchange, naloxone, opioid use disorder (OUD) treatment, clothing, housing, and food.

Goal 5

- Implemented Screening, Brief Intervention, Referral, and Treatment (SBIRT) in five emergency departments (with a sixth one launching soon) and the induction of MOUD, in conjunction with peer engagement and referrals to community services and supports. Since program inception (May 2019), 258,052 screenings have been completed and 9,923 patients with risky alcohol or substance use behaviors were given a brief intervention to assess their willingness to change their behavior since program inception.
- Funded the expansion of buprenorphine in eight community clinics and established the Buprenorphine Drug Assistance Plan (BupDAP), a benefit for the uninsured or underinsured.
- Created Supported Employment services for individuals with OUD, which became available in March 2020 for individuals with substance use disorders (SUD) under the 1115 Waiver.
- Established four peer-operated centers that are focused on serving the needs of individuals with OUD. Since March 2020, they served 11,339 individuals and conducted 729 group sessions (mainly virtual).

Goal 6

- Offering all three forms of MOUD in the DC Jail.
- Providing naloxone to individuals upon discharge from the jail.

Goal 7

- Better characterized the supply of illegal opioids, including the discovery of new opioids, through advanced testing at the DFS opioid surveillance lab.
- Enacted the provisions in the SAFE DC Act, which criminalizes synthetic drugs, including variants of fentanyl, based on the class of the chemical compounds, rather than the individual compound, strengthening law enforcement officials' ability to test for and prosecute cases against sellers and distributors of these drugs.