

Washington State Opioid Settlement

Greg Thompson & Joe Fuller

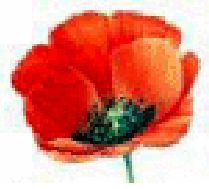
January 10, 2023



Whatcom County
HEALTH
Department



Definitions



- **Opiates** – chemicals (drugs) derived from the opium poppy

- Opium, Morphine, Codeine, Heroin



- **Opioids** – Synthetic “lab made” chemicals that are related to opiates

- oxycodone (Oxycontin), Hydrocodone (Vicodin), Methadone, **Fentanyl**, **Carfentanil**

- **Narcotic** – a less specific term

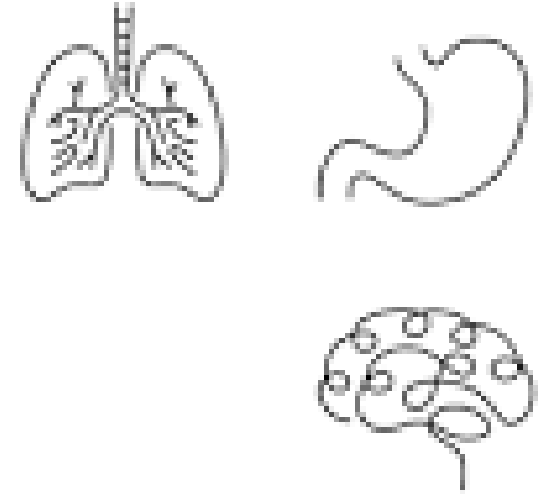
- “sleep-inducing” or “numbness-inducing”

- Medically often refers to opioids/opiates

- Lay use or law enforcement – typically refers to illegal drugs

Function of opioids

- Bind to natural opioid receptors in the body
 - Medical uses:
 - Pain relief
 - Cough suppression, reduce diarrhea, sedation
 - Most opioid addiction begins with medical use
 - Nearly 4 out of 5 heroin users started with prescription pain medications
 - Side effects:
 - Euphoria
 - Dependence/Withdrawal
 - Sedation, Respiratory depression
- Effects may be reversed with naloxone (Narcan)



Fentanyl

- 50 times more potent than heroin
 - Cheap to synthesize
 - Easier to smuggle
 - Easy to overdose
 - Small error = huge consequences
 - Harder to reverse with naloxone (Narcan)
 - As many as 4/10 pills tested by DEA may contain lethal dose**ref
- Carfentanil
 - 100x more potent than fentanyl
 - Veterinary medication



Source: GAO adaptation of U.S. Drug Enforcement Administration information. | GAO-21-499

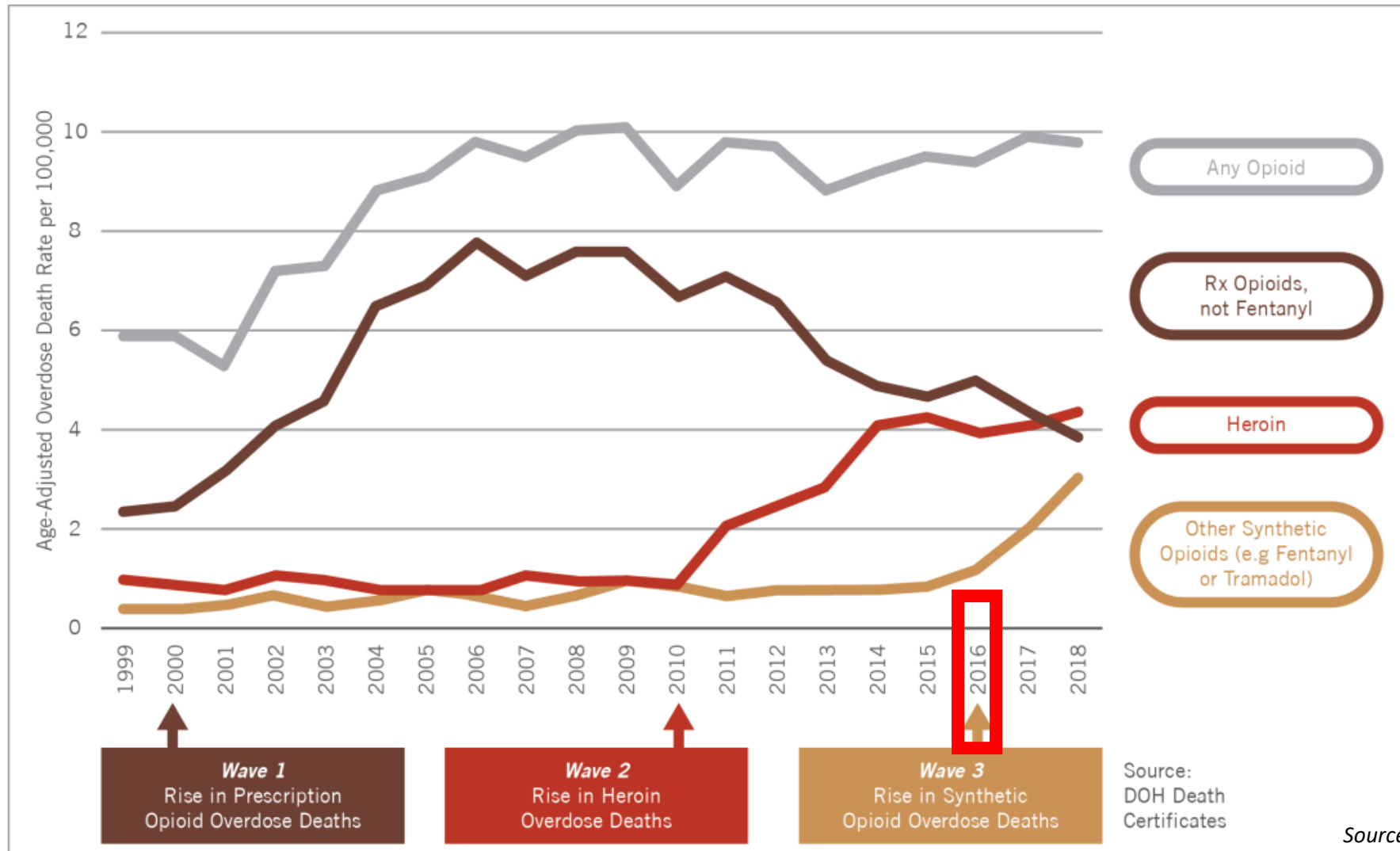
2 mg dose (injected) can be lethal to most people

History of Opioid/Opiate use and addiction

- Opium has over 8,000 year history of medical use (and dependence)
- 1830s Opium was the cause of 1/3 of lethal poisonings in US
- 1860s morphine widely used for pain control in civil war soldiers
 - Resulted in widespread addiction
 - Also marketed for colicky children, diarrhea, coughs, etc.
- 1898 Bayer Co invented heroin
 - Promised to be less addictive than morphine
 - Treatment of cough, TB symptoms, arthritis
 - Sold in Sears Roebuck catalog
- 1920s AMA resolved heroin should not be prescribed, produced, or imported
- 1995 OxyContin marketed as less addictive
 - Very widely prescribed for pain
- 2000s – “Three Waves”
- 2017 Opioid Epidemic declared a US Public Health Emergency



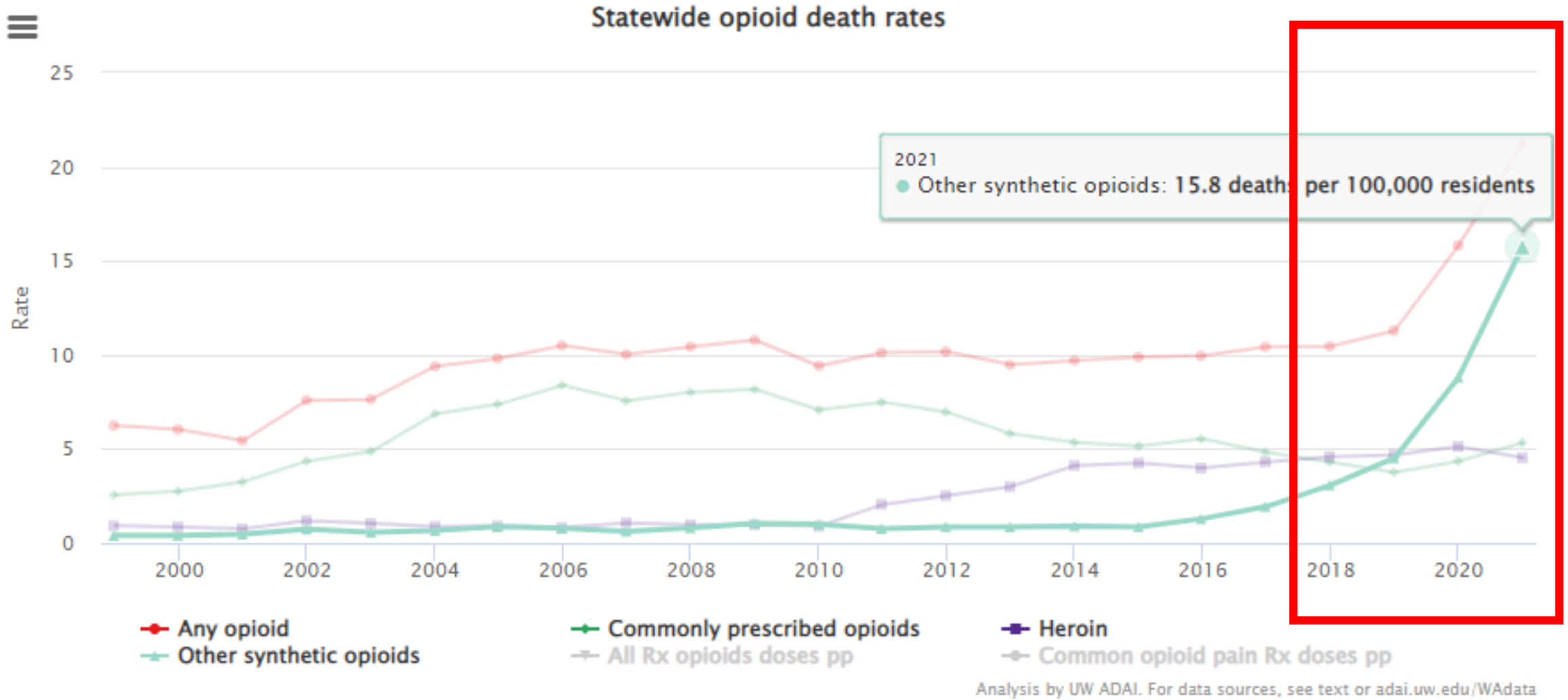
Opioid-Related Overdose Deaths by Type of Opioid, Washington 2000-2018



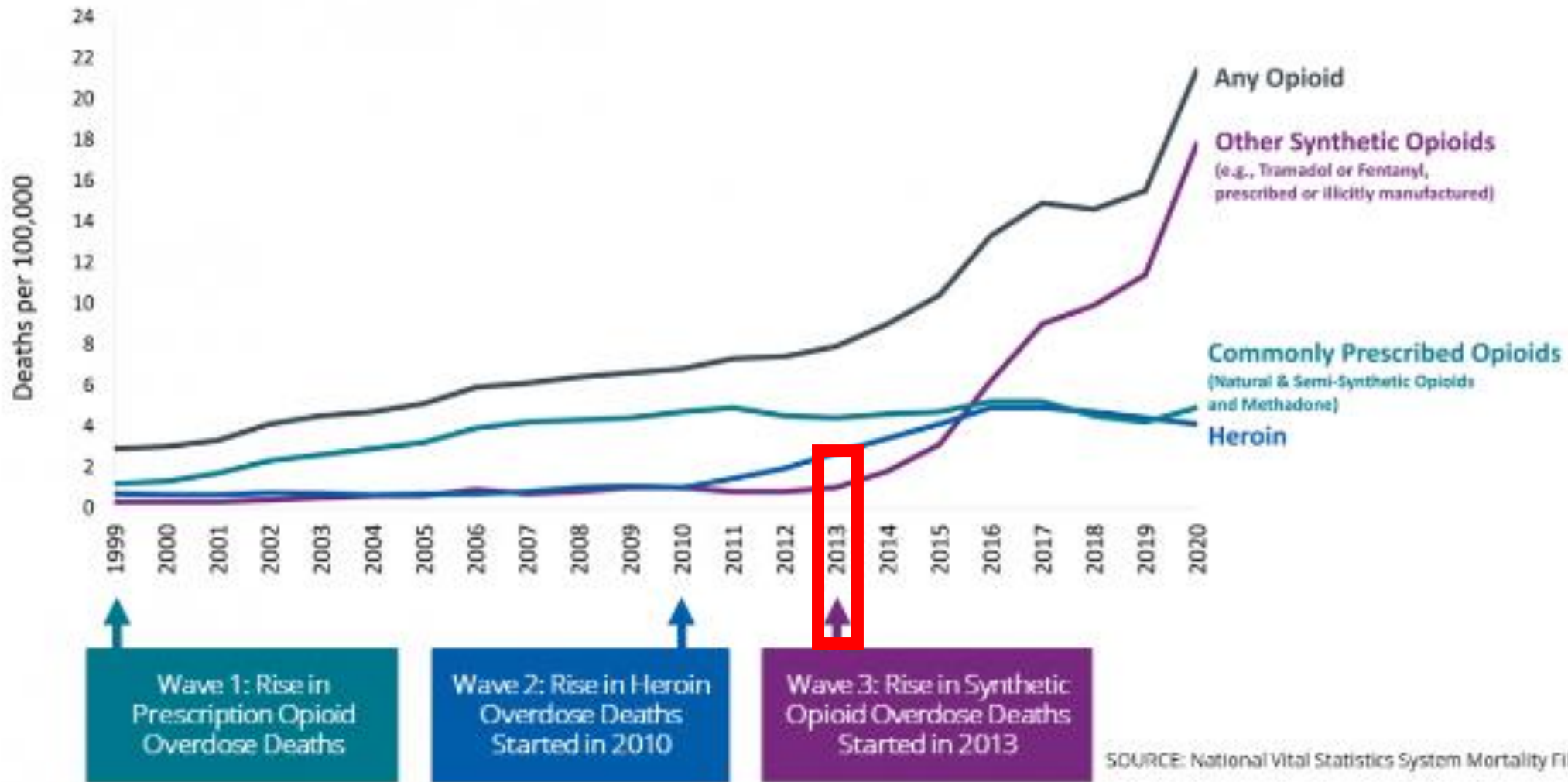
Source: DOH Death Certificates

Source: WA State Opioid & Overdose Response Plan 2021-2022

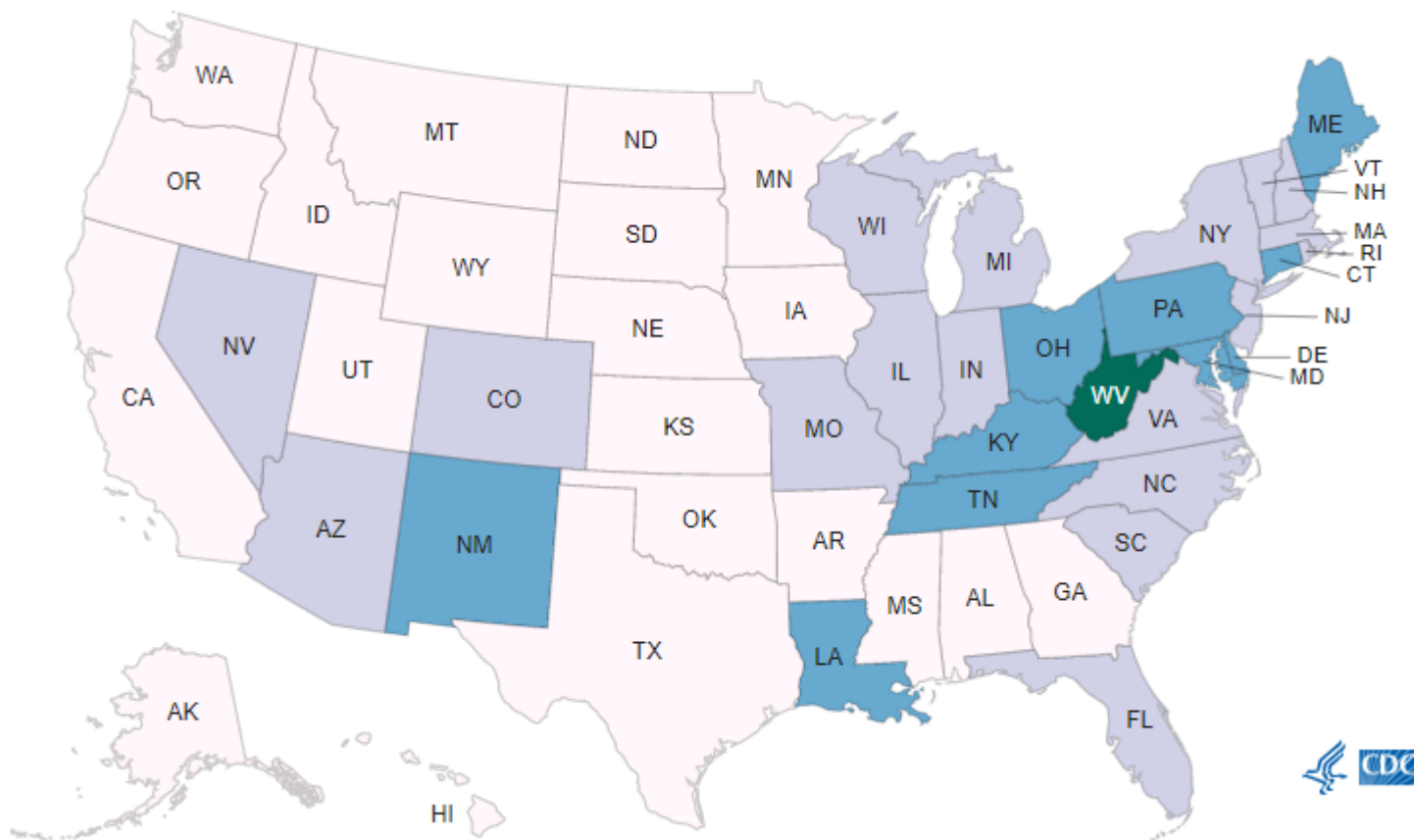
WA Opioid Deaths by Drug



The Modern US Opioid Crisis – 3 waves



Overdose death rates 2020 (all drugs)



- Deaths per 100k/yr
- Range:
 - 10 South Dakota
 - 81 West Virginia
- WA State
 - 22



Age-Adjusted Death Rates¹

○ 10.3 - < 24.52

● 38.74 - < 52.96

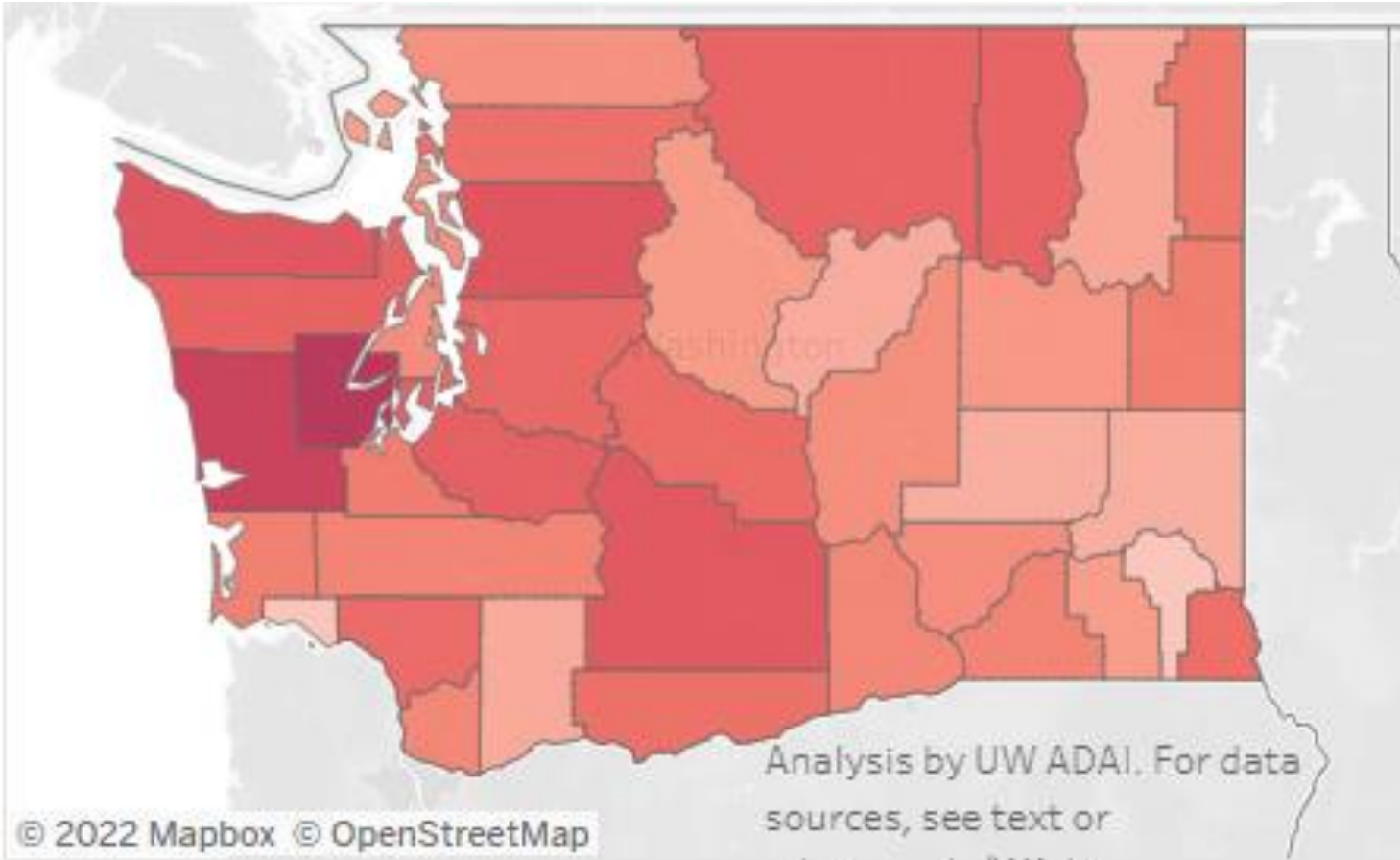
● 67.18 - 81.4

● 24.52 - < 38.74

● 52.96 - < 67.18

https://www.cdc.gov/nchs/pressroom/sosmap/drug_poisoning_mortality/drug_poisoning.htm

Opioid Death Rate by County (2019-2021)



- Urban and rural counties all affected
 - Grays Harbor and Mason Counties have highest rates
- WA State
 - 16 deaths/100k
 - 280% increase since early 2000's
- Whatcom
 - 10 deaths/100k
 - 82% increase since early 2000's

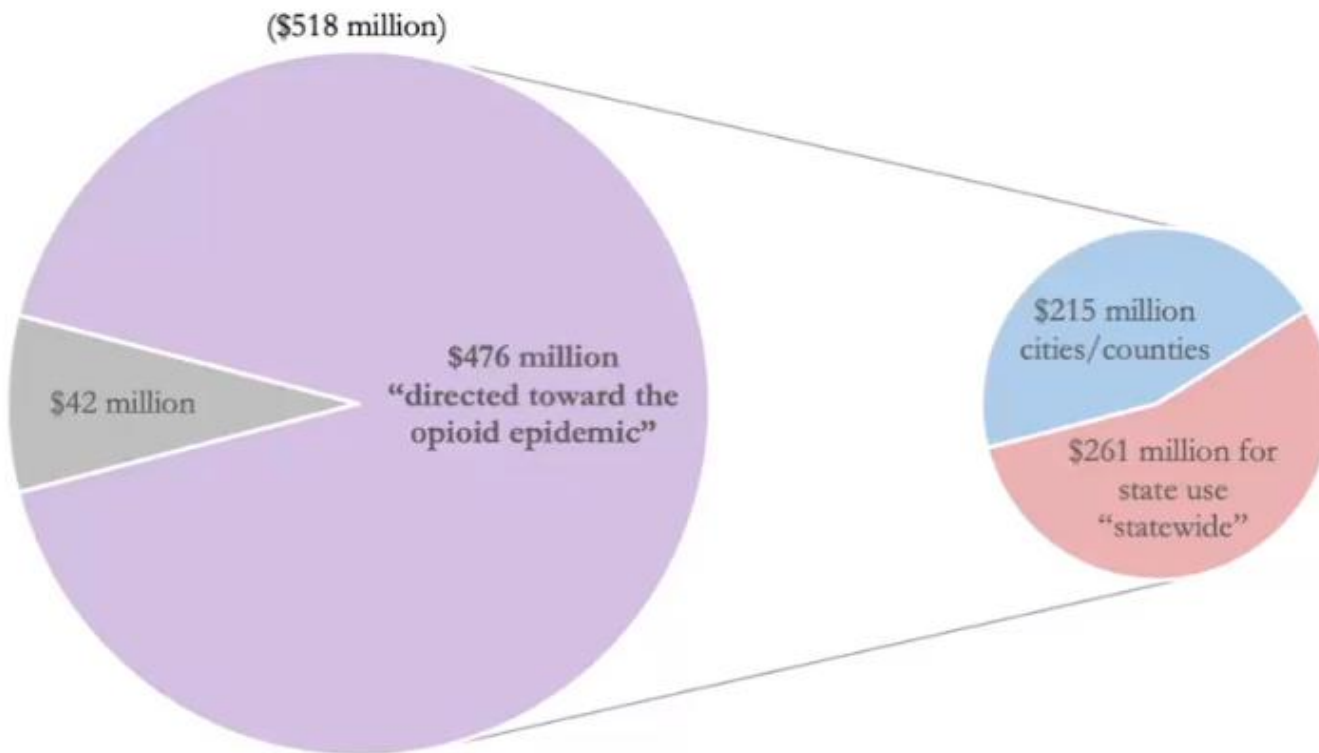
Region 10 Opioid Settlement Summary

| | Alaska | Idaho | Oregon | Washington |
|---|--|--|--|--|
| Settlement involvement | J&J, McKesson, Amerisource Bergen, Cardinal Health | J&J, McKesson, Amerisource Bergen, Cardinal Health | J&J, McKesson, Amerisource Bergen, Cardinal Health, Purdue | McKesson, Amerisource Bergen, Cardinal Health, Purdue, J&J (trial in September) |
| Settlement amount (over 18 years?) | \$58 million | \$119 million | \$97 million (Purdue) \$329 million (J&J, McKesson, Amerisource, Cardinal Health) | \$183 million (Purdue) \$518 million (McKesson, Amerisource, Cardinal Health) |
| Who's receiving the settlement? | 85% state 5% political subdivisions | 40% state 40% participating cities and counties 20% participating health districts | 45% state 55% participating subdivisions | 50% state 50% counties |

Washington: Opioid Settlement Decisions

- Washington State Office of the Attorney General
 - <https://www.atg.wa.gov/news/news-releases/ag-ferguson-opioid-distributors-pay-518-million-washington>
- Washington State Opioid and Overdose Response Plan 2021-22 will be primary guide
 - <https://www.hca.wa.gov/assets/program/WashingtonStateOpioidandOverdoseResponsePlan-final-2021.pdf>
- Contact: Kris Shera, State Opioid Coordinator Washington State Health Care Authority, kristopher.shera@hca.wa.gov

Washington's Allocation Structure



“The **State** will receive **approximately \$261 million** to be spent throughout the State on combatting the opioid epidemic. The **State’s [2021-2022] Opioid [and Overdose] Response Plan** can be found under Resources.”

- *WA AGO’s Jeff Rupert on 8/15/2022* — “State’s opioid spending is being coordinated by HCA and DOH,” who are “formulating plans to spend this money to try to provide immediate relief and also achieve long-term solutions.”

“The **One Washington Memorandum of Understanding between the Washington Municipalities** is the agreement splitting the money between the local governments. Exhibit B lists each local governments share.”

Timeline & Process

WA State:

Recommendations for the use of settlement funds for year 1 were developed by the eight workgroups of the [State Opioid and Overdose Response Plan](#). Recommendations will be shared with the legislature and the Governor who will make the ultimate decision about the settlement funding.

Locally:

Whatcom County and several local cities submitted forms agreeing to join the settlement in late September. Current planning is focused on:

1. Identifying needs and gaps to establish additional local priorities
2. Aligning or coordinating efforts with the state plan to maximize impact
3. Implement response efforts once the Regional Opioid Abatement Council is formed (this is expected to be convened by the North Sound Behavioral Health Administrative Services Organization for our five county region)

Statewide Workgroups

Goal 1 – Prevention

Alicia Hughes – HCA alicia.hughes@hca.wa.gov

Erika Jenkins – HCA erika.jenkins@hca.wa.gov

Jaymie Mai – LNI MAIJ235@LNI.WA.GOV

Goal 2 – Treatment

Patricia Dean – HCA patty.dean@hca.wa.gov

Jessica Blose – HCA jessica.blose@hca.wa.gov

Goal 3 – Opioid and Overdose

Emalie Huriaux – DOH emalie.huriaux@doh.wa.gov

Alison Newman – UW – alison26@uw.edu

Sean Hemmerle- DOH sean.Hemmerle@doh.wa.gov

Goal 4 - Data

Cathy Wasserman – DOH Cathy.Wasserman@doh.wa.gov

Goal 5 – Recovery

Meta Hogan – HCA meta.hogan@hca.wa.gov

Malika Lamont – Public Defender’s Office/Vocal WA- malika.lamont@defender.org

Criminal Justice

Michelle Gayle –HCA michele.gayle@hca.wa.gov

Pregnant and Parenting

Tiffani Buck – DOH tiffani.buck@doh.wa.gov

American Indian/Alaskan Native

Lucy Mendoza – HCA lucilla.mendoza@hca.wa.gov

Vicki Lowe – vicki.lowe.aihc@outlook.com

Lisa Rey Thomas – lisarey51@gmail.com

General questions or comments about settlement process, contact:

Kris Shera-HCA- kris.shera@hca.wa.gov

Mary Beth Brown-DOH-marybeth.brown@doh.wa.gov

Opioid Abatement Strategies

PART ONE: TREATMENT

- a. Treat Opioid Use Disorder (OUD)
- b. Support People in Treatment and Recovery
- c. Connect People Who Need Help to the Help They Need (Connections to Care)
- d. Address the Needs of Criminal Justice-Involved Persons
- e. Address the Needs of Pregnant or Parenting Women and their Families, including Babies with Neonatal Abstinence Syndrome 6

PART TWO: PREVENTION

- f. Prevent Over-Prescribing and Ensure Appropriate Prescribing and Dispensing of Opioids
- g. Prevent Misuse of Opioid
- h. Prevent Overdose Deaths and Other Harms

PART THREE: OTHER STRATEGIES

- i. First Responders
- j. Leadership, Planning, and Coordination
- k. Training
- l. Research

Allocations

| Local Government | Allocation % | Based on 215 Settlement |
|--|-----------------------------|------------------------------|
| Whatcom County | 1.3452637306% | \$2,892,317.02 |
| Bellingham | 0.8978614577% | \$1,930,402.13 |
| Ferndale | 0.0646101891% | \$138,911.91 |
| Lynden | 0.0827115612% | \$177,829.86 |
| <i>County total</i> | <i>2.3904469386%</i> | <i>\$5,139,460.92</i> |
| <i>Blaine, Everson, Nooksack, & Sumas below 10k population</i> | | |

National Guides & Resources

- Rand: Strategies for Effectively Allocating Opioid Settlement Funds
 - <https://www.rand.org/health-care/centers/optic/tools/fund-allocation.html>
- Johns Hopkins: The Principles for the Use of Funds from the Opioid Litigation
 - <https://opioidprinciples.jhsph.edu/the-principles/>
- National Prevention Science Coalition: Strategy for Preventing Opioid Use Disorders in Communities
 - <https://www.npscoalition.org/post/strategy-for-preventing-opioid-use-disorders-in-communities>

Three Key Takeaways

1. Advocate for primary (universal) prevention
2. Understand the common risk and protective factors
 - Pandika, Bailey et al. (2022) article: doi.org/10.1016/j.drugalcdep.2022.109442
3. Use funds to implement tested, effective programs that meet your community needs

Heroin use is part of a larger substance abuse problem.

Nearly all people who used heroin also used at least 1 other drug.

Most used at least **3** other drugs.

Heroin is a highly addictive opioid drug with a high risk of overdose and **death** for users.

People who are addicted to...



ALCOHOL

are

2x



MARIJUANA

are

3x



COCAINE

are

15x



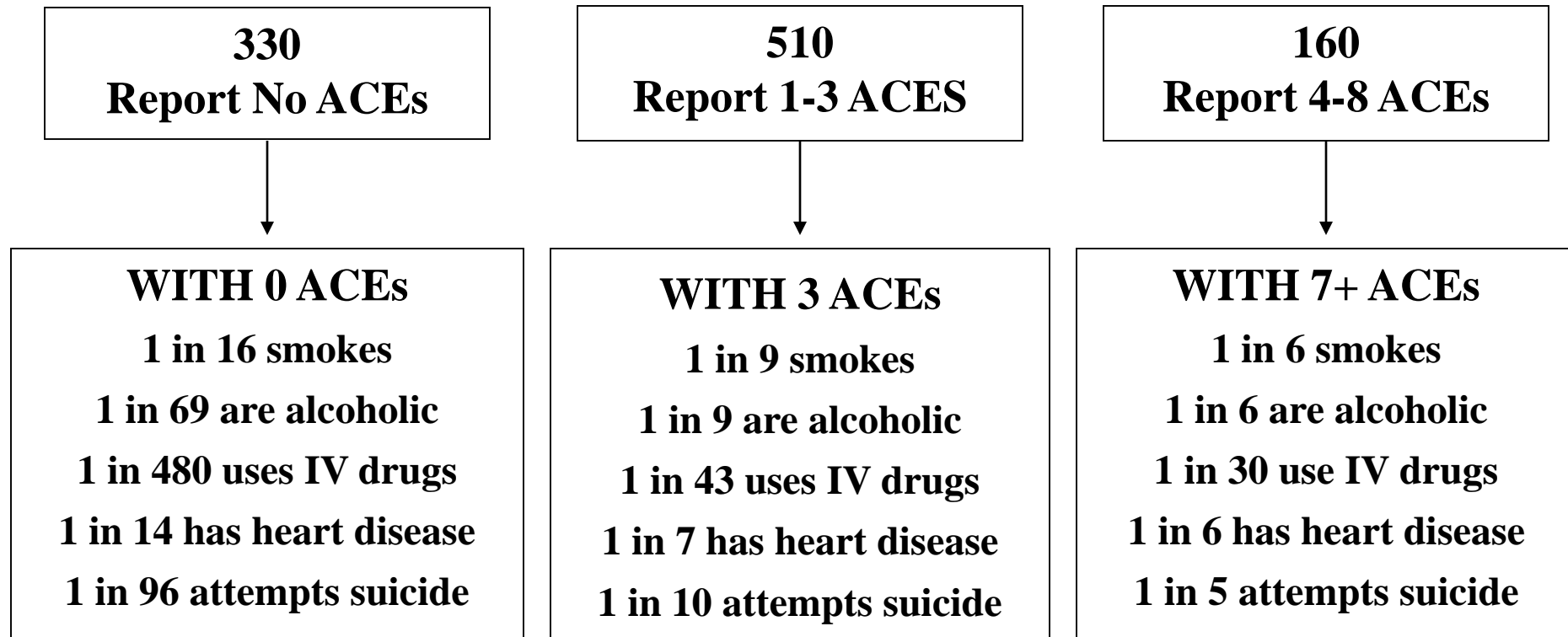
Rx OPIOID PAINKILLERS

are

40x

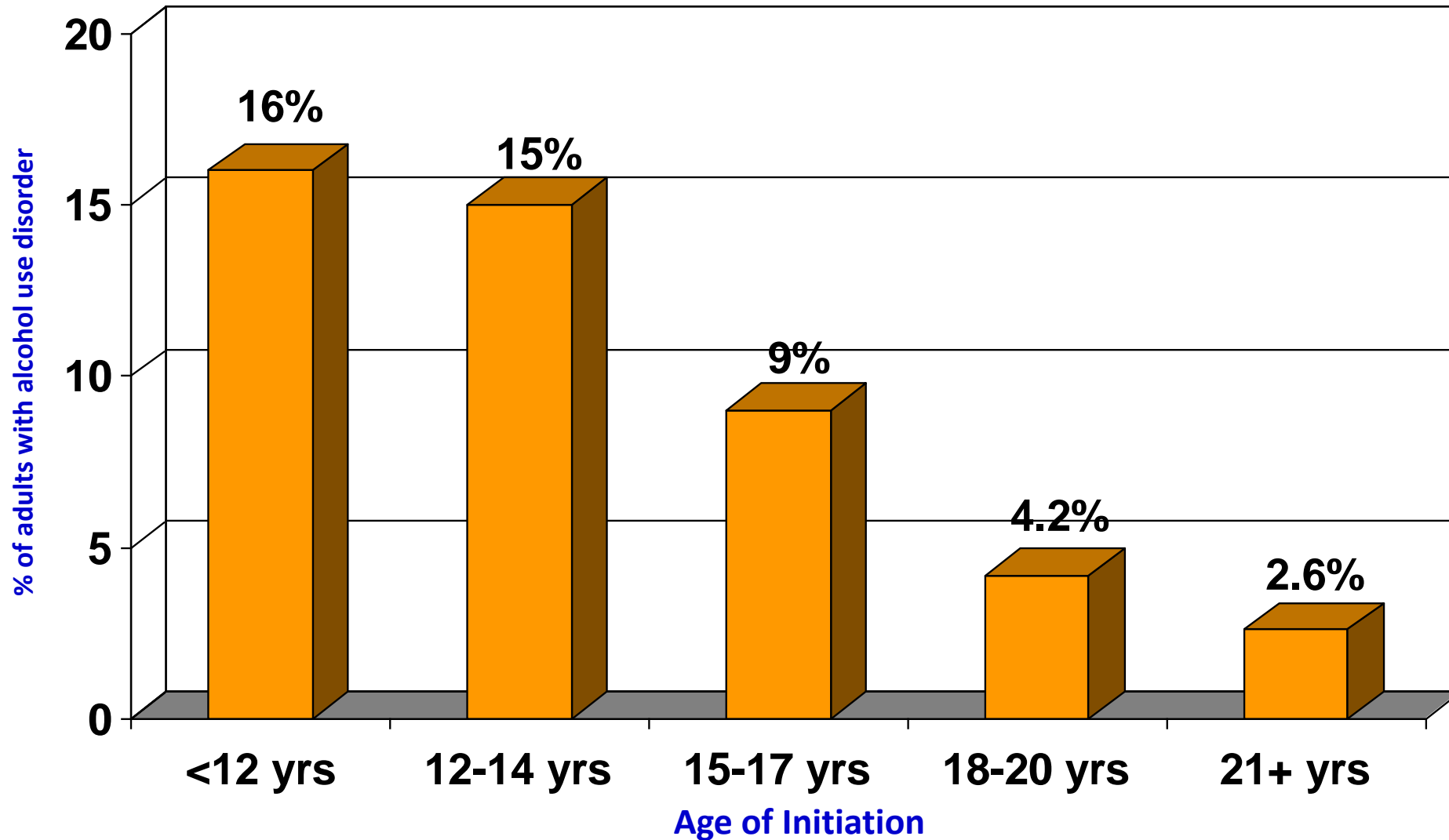
...more likely to be addicted to heroin.

PROBABILITY OF SAMPLE OUTCOMES GIVEN 1,000 AMERICAN ADULTS



Source: Family Policy Council

Percentage of Past Year Alcohol Use Disorder* Among Adults Aged 21 or Older (by Age of First Use)



*Abuse or Dependence
(Source: SAHMSA, 2005)

Local Efforts

- Opioid Task Force first convened in September of 2016
 - Local strategies were prioritized to align with state plan
 - Efforts coordinated with state & regional partners

GOAL 1: Prevent opioid misuse and abuse

GOAL 2: Prevent deaths from overdose

Twelve local objectives were established to support these two identified goals. General efforts have included:

- Medication lock bag distribution
- Naloxone access & education
- Education and outreach campaigns
- Trainings & workshops
- Policy development and support
- Monitoring and review of data and trends
- Coordination with youth and family direct-services (Strengthening Families Program, etc.)
- Coordination and support of four Prevention Coalitions



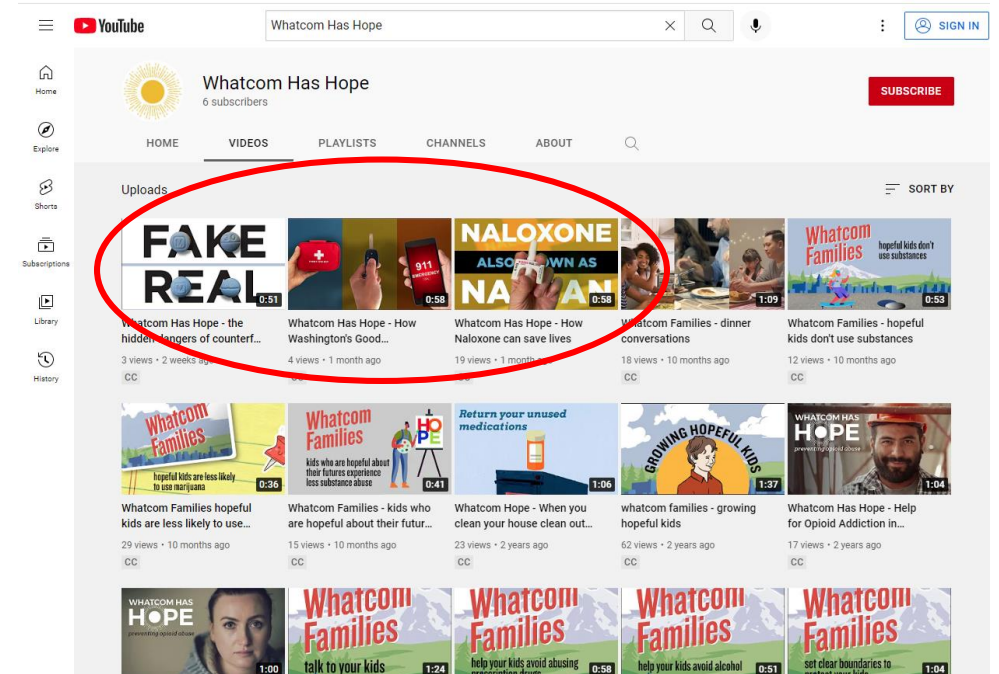
Local Efforts

<https://whatcomhope.org/>



New Videos recently created and uploaded:

- Fentanyl
- Good Samaritan Law Materials
- Naloxone



Includes:

- Good Samaritan Law Materials (cards & posters)
- Take Back Brochures (also in Spanish & Russian)
- Medication Inventory (for tracking meds)
- Where to access Substance Use Disorder Treatment
- Locally produced videos

Also currently running bus ads and have a social media toolkit for partners

Questions?

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