



Roll Call – HOPE Council Members

- ► Chair Dr. James Hussey: Department of Health
- ► Co-Chair: TBD
- ► Mona Michelli: *Department of Children and Family Services*
- ► Michael Comeaux: *Department of Education*
- ▶ Dr. John Morrison: *Department of Public Safety and Corrections*
- ► Major Bob Brown: *State Police*
- ▶ Dr. Allison Smith: *Higher Education*
- ► Linda Theriot: *Veterans Affairs*
- ► Sheral Kellar: Workforce Commission
- ➤ Senator Regina Barrow: *State Senate*
- ► Troy Prevot: *House of Representatives*
- ► Monica Taylor: *Attorney General's Office*
- ► Thomas Travis: *Department of Insurance*
- ▶ Judge Jules D. Edwards, III: 15th Judicial Court

Welcome

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Discussion



Approval of Agenda

- Call to Order
- > Roll Call
- Approval of Agenda
- Approval of Minutes from December 2018 meeting
- Pew Charitable Trusts Update
- Review of HOPE Year-End Report to the DPB
- ASTHO Update
- LODSS Update
- OBH Grants Update
- Public Comment
- Discussion on Quorum Challenges
- Co-Chair Election
- > Date, Time, Place of Next HOPE Council Advisory Meeting
- Adjournment

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Approval of December 7, 2018 Minutes

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PEW Charitable Trusts - Update

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HOPE Council Recommendations to Drug Policy Board (DPB)

Worksheet:

Proposal to DPB		
(e.g., legislation,		
Executive Order, Workgroup, other)		
Workgroup, other)		
Timeline		
Lead	Email:	Phonos
Leau	 Ellidit.	Phone:

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Recommendation 1:

Lead Agency for Interagency Heroin and Opioid Coordination Plan - Designate an organization, agency, or department through executive order or legislative action to have lead authority over the Interagency Heroin and Opioid Coordination Plan.

- > Strategy 1: Issue a mandate to all organizations, agencies, and departments that receive state funding and self-funded agencies that regulate in the interest of the public's safety, to promptly respond to all data requests from the lead agency regarding opioid and heroin use prevalence, prevention, education, arrest/adjudication, treatment, overdose prevention, and recovery.
- > Strategy 2: Issue a mandate for all organizations, agencies, and departments that receive state funding and self-funded agencies that regulate in the interest of the public's safety to annually report the status of initiatives to address opioid and heroin use prevention, education, arrest/adjudication, treatment, overdose prevention, and recovery to the lead agency.
- > Strategy 3: Support the designated lead agency with resources for the coordination of state and local responses to the adverse effects of heroin and opioid consumption in Louisiana.

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Recommendation 2:

Data - Provide resources to fill data gaps and enhance existing data collection, analysis, reporting, and evaluation of initiatives to address opioid and heroin use and related consequences (e.g., overdoses and deaths).

- > Strategy 1: Mandate through legislation the procurement of all pertinent data from the public and private sector agencies to inform the Interagency Heroin and Opioid Coordination Plan.
- > Strategy 2: Investigate and address data gaps and integration of reporting systems related to law enforcement and judicial sectors, such as # of citations, # of arrests, and # of convictions, where appropriate.
- > Strategy 3: Investigate and address, where appropriate, data gaps on workers' compensation claims and absenteeism related to opioids.
- > Strategy 4: Investigate and address, where appropriate, data gaps related to financial costs of the opioid epidemic and its adverse effects.

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Recommendation 2: Data (continued)

- > Strategy 5: Investigate data gaps and address, where appropriate, related to special/vulnerable populations affected by opioids.
- > Strategy 6: Investigate and address, where appropriate, substance use/behavioral health integration data gaps within primary care.
- > Strategy 7: Investigate and address, where appropriate, data gaps related to the harm reduction efforts.

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Recommendation 3:

Partnerships and Collaboration - Ensure that the Interagency Heroin and Opioid Coordination Plan supports the development of new partnerships, maintains existing collaborations, and encourages alignment with community partners, private providers and payers to target the special and most vulnerable populations.

- > Strategy 1: Create a subcommittee of the HOPE Council comprised of providers of who offer hospice and palliative medical care, the LA-MS Hospice and Palliative Care Organization, the Louisiana Board of Pharmacy, the Louisiana Department of Health, the Louisiana State Board of Nursing and the Louisiana State Board of Medical Examiners to ensure that future proposed state regulations follow CDC Guidelines regarding exemption provided to patients undergoing active cancer treatment, palliative care, or end-of-life care.
- > Strategy 2: Develop mechanisms by which hospice and palliative medical prescriptions are distinguished from others, exempting them from certain state pharmacy regulations.

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Recommendation 3: Partnerships and Collaboration (continued)

- > Strategy 3: Create a subcommittee of the HOPE Council led by the Louisiana Department of Health and the Department of Children and Family Services to coordinate heroin and opioid-specific education, prevention, and treatment services specifically for women of childbearing age, pregnant women, and women with newborn infants along with services to meet the needs of newborns impacted by the mother's Opioid use.
- > Strategy 4: Explore the feasibility of implementing a mobile opioid treatment initiative to service rural communities.
- Strategy 5: Explore the feasibility of the Louisiana Legislature developing a resolution to the United States Congress regarding 42 CFR Part 2 which regulates outpatient treatment programs to require Methadone clinics to report into state prescription monitoring programs.

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Recommendation 3: Partnerships and Collaboration (continued)

- Strategy 6: Explore methodologies for agencies and stakeholders to report on efforts and strategies to address access issues. Examples when appropriate, may include but are not limited to:
 - Assessing existing MAT capabilities and expand MAT network
 - Increase access to Medicaid eligibility assistance
 - Elimination of the prior authorization requirement for receiving buprenorphine or injectable
 - Naltrexone in the first 24 48 hours of presentation for treatment
 - Include methadone list of controlled substances entered into the LAPMP database
 - Make Naloxone available without co-payment
 - Other competing treatment methodologies

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ASTHO Update

Purpose of ASTHO Collaborative

- ► Look at population health by addressing upstream factors, life-span support, and whole-person approach through effective prevention.
- ▶ Identify potential alignment, direction and resources for the interconnection of behavioral and public health.
- ▶ Remove financing and data silos while maintaining pillars of excellence with subject matter expertise of each agency.
- ► When discussing data driven action, data sharing agreements can be a useful tool, but they should include clear outcomes, accountability and protection of data.
- ▶ Various policies have paved the way to improve or enhance the interconnection of behavioral health and public health, however funding challenges can hinder this interconnection. When certain policy changes take place, the funding mechanism can also change from being fully funded to partially funded.

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Next Steps



ASTHO Update

ASTHO Goals

► Apply cross-sector data to Louisiana's opioid crisis:

- Include Louisiana Opioid Data and Surveillance System (LODSS) in Heroin and Opioid Prevention and Education (HOPE) Council report
- Position HOPE council as a data and analysis advisory board goal date would be shortly after the next HOPE council meeting
- Establish regular cadence and processes for advisory board meetings and developing recommendations for the future direction of LODSS

▶ Develop multi-agency strategic planning and action on opioids:

- Obtain leadership support for collective input model of multi-agency efforts to address opioid epidemic
- Establish regular meetings amongst LDH agencies involved in addressing the opioid crisis
- Provide multi-agency input on Louisiana Opioid Strategy OBH should have goal date for this input
- Establish metrics for agency-specific efforts advancing the Opioid Strategy

► Participate in multi-state learning collaborative

Share progress updates at first quarterly virtual meeting

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LODSS Update

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OBH Grants Update

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Public Comment

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Discussion of Quorum Challenges

Next Steps

Election of Co-Chair



Next HOPE Council Meeting - Date, Time, Place

Adjournment

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Next Steps





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