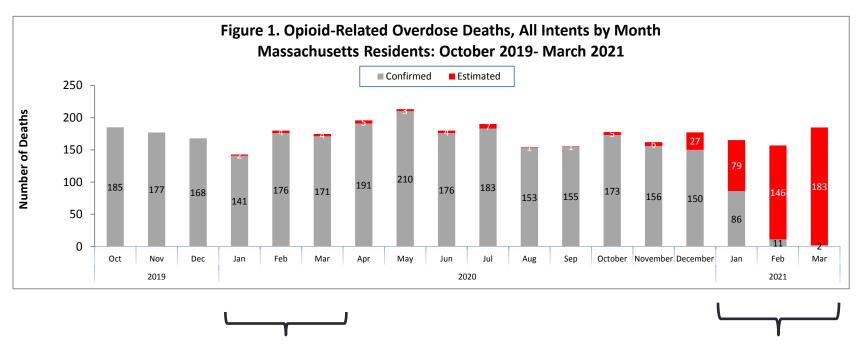
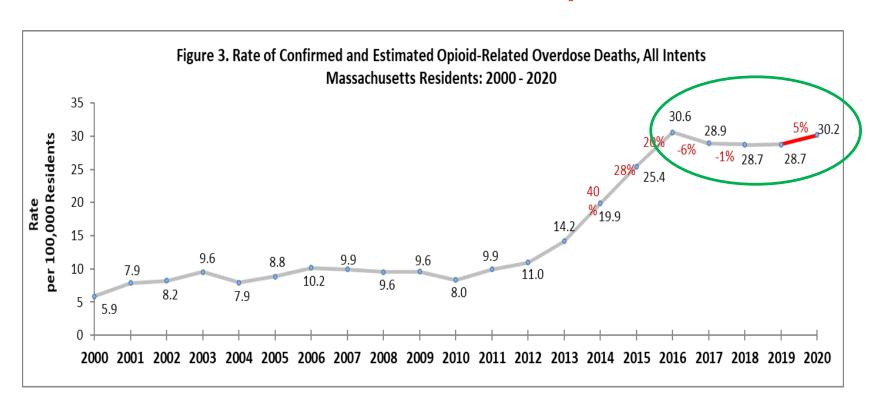
Preliminary data show 507 confirmed and estimated opioid related overdose deaths in the first three months of 2021, an estimated 2% increase compared with the same period in 2020.



Estimated 498 deaths

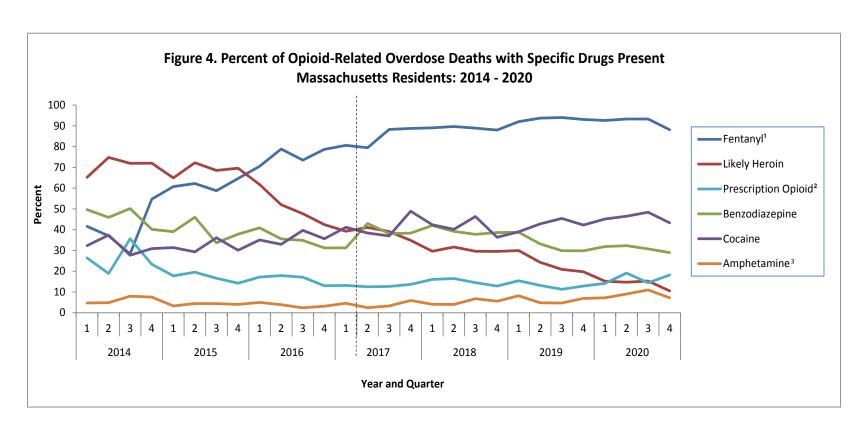
Estimated 507 deaths

The <u>rate</u> of opioid-related overdose deaths has increased 5% in 2020 compared with 2019 and is 1% lower than the 2016 peak.





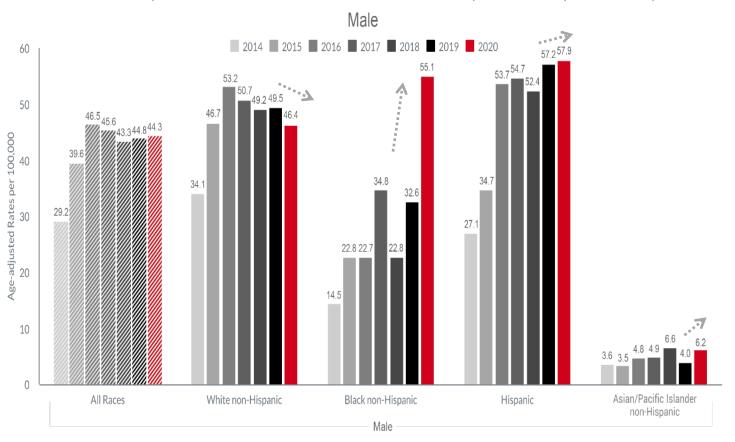
Fentanyl remains a key factor in opioid-related overdose deaths (92% present in toxicology screen in 2020).





Between 2019 & 2020, the confirmed opioid-related overdose death rates for Black non-Hispanic men increased significantly at 69%.

Confirmed Opioid-Related Overdose Death Rates, All Intents, by Race and Hispanic Ethnicity



DPH/BSAS is implementing new investments to enhance treatment and recovery support, particularly in communities of color

- BSAS is dedicating a significant portion of supplemental funding from SAMHSA's Substance Abuse Prevention & Treatment Block Grant towards addressing racial equity, including:
 - Increasing behavioral healthcare workforce diversity, recruitment, and retention through workforce development initiatives
 - Funding community-led programming in communities of color through grant making and support for increasing community-based organizations' ability to contract with the Commonwealth
 - o **Increasing the number of culturally-specific programs** across the continuum of prevention, outreach/engagement, treatment, and recovery support services
 - Increasing investments in pre-arrest diversion/co-response models, in order to divert people with SUD from the criminal justice system, in partnership with the Department of Mental Health
 - Increasing funding for low-threshold housing/housing first models in Suffolk County, with program expansions expected in Merrimack Valley, Springfield, and Worcester to address communities in need



DPH/BSAS addresses health and racial equity by continuing and enhancing existing programs

- Current BSAS programs dedicated to addressing overdoses in the Black/Latinx community include:
 - Recovery-Based Re-Entry Services for Black and Latino Men, a pilot program for Black and Latino men leaving incarceration that will be provided by the following agencies:
 - Pathers' Uplift
 - Casa Esperanza
 - Legendary Legacies
 - New North Citizens' Council
 - Greater Lawrence Family Health Center/Lynn Community Health Center
 - Increased investments in the Black Addiction Counselor Education (BACE) and Latinx Addiction Counselor Education (LACE) programs to support Black and Latinx people seeking to enter the SUD workforce
- BSAS is also partnering with other existing culturally-specific agencies/programs
 in the Commonwealth to expand their services and provide increased access for
 communities of color

DPH/BSAS has aggressively maximized access to SUD treatment during the COVID-19 pandemic, and is continuing the fight against the opiate crisis

- Increasing access to naloxone from March 2020 to April 2021 **over 110 thousand naloxone kits** have been distributed to Opioid Treatment Providers (OTP), Syringe Service Programs, community health centers, hospital emergency departments, and county Houses of Correction.
- Implementing a **new standing order for naloxone** allowing providers/organizations such as **first responders**, **co-response/jail diversion teams**, **criminal justice personnel**, **and health and human services workers** (such as those in homeless shelters, drop-in centers, and soup kitchens) to give naloxone to individuals at risk and their friends/family.
- Obtaining a **blanket exception** from SAMHSA on behalf of Massachusetts Opioid Treatment Programs (OTP) for take home doses of MOUD. As of December 2020, **48.5% of OTP patients are receiving take home doses**, compared to the pre-COVID average of 15.6% in December 2019.
- Implementing the broad adoption of a DEA waiver allowing prescriptions for **buprenorphine and naltrexone to patients for whom providers have conducted telehealth sessions**, as well as induct patients on buprenorphine and naltrexone.
- Reimbursing contracted Office Based Opioid Treatment (OBOT) providers for cell phones and data plans to maintain patients'
 ability to keep in contact with their providers for telehealth.
- Establishing COVID+ ATS and CSS units to facilitate positive patient transfers and maintain capacity within the rest of the treatment system.
- Leveraging the second round of **State Opioid Response (SOR) funding** from SAMHSA to increase access in Massachusetts to all FDA-approved forms of MOUD, reduce unmet treatment needs, and reduce opioid/stimulant misuse and overdose.
- Working with programs to **prevent and mitigate the spread of COVID-19**, including distributing guidance on surveillance testing, screening and isolation of patients/staff, and increased flexibility in bed allocation between different service settings to accommodate changing patient needs at individual programs.