Advisory Council on Heroin and Opioid Prevention and Education:

2023 Year-End Report of State and Local Responses to the Opioid Crisis: Interagency Coordination Plan

Act 88 of the 2017 Legislative Session

State of Louisiana

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ACRONYMS - HOPE End of Year Report

ACLA: AmeriHealth Caritas Louisiana

ADHD: Attention Deficit Hyperactivity Disorder

ASAM: American Society of Addiction Medicine

ATLAS: Addiction Treatment Locator, Assessment and Standards Platform (by Shatterproof)

BOR: Board of Regents

CADCA: Community Anti-Drug Coalitions of America

CCYS: Caring Communities Youth Survey

CDC: Centers for Disease Control and Prevention

DCFS: Department of Children and Family Services

DOC: Department of Corrections

ED: Emergency department

ER: Emergency room

ECHO: (Project) Extension for Community Healthcare Outcomes

FFY: Federal Fiscal Year

FQHC: Federally Qualified Health Center

FUA: Follow-up after emergency department visit for substance use

HCV: Hepatitis C virus

HEDIS: Healthcare Effectiveness Data Information Set

HIV: Human immunodeficiency virus

HOPE: Heroin and Opioid Prevention and Education (Advisory Council)

ICSED: Improving Care for the Substance-Exposed Dyad

IOP: Intensive outpatient program

IPRO: Island Peer Review Organization

LaPQC: Louisiana Perinatal Quality Collaborative

LaSOR: Louisiana State Opioid Response grant

LCSW: Licensed clinical social worker

LDH: Louisiana Department of Health

LGE: Local Governing Entity

LODSS: Louisiana Opioid Data & Surveillance System

LOSI: Louisiana Opioid Surveillance Initiative

LSP: Louisiana State Police

MAT: Medication-assisted treatment (now referred to as MOUD)

MCO: Managed care organization

MOUD: Medications for opioid use disorder

NASTAD: National Alliance of State and Territorial AIDS Directors

OBH: Office of Behavioral Health

OBOT: Office-based opioid treatment

OPH: Office of Public Health

OTP: Opioid treatment program

OUD: Opioid use disorder

PDTS: Prescription digital therapeutics

SAMHSA: Substance Abuse and Mental Health Services Administration

SBIRT: Screening, brief intervention and referral to treatment

SCT: SPOKE care teams

SFY: State fiscal year

SHHP: STD/HIV/Hepatitis Program

SSP: Syringe Service Program

SUD: Substance use disorder

SUM: Stimulant use and misuse

SUN: Substance use navigator

YRBS: Youth Risk Behavior Survey

Executive Summary

The Louisiana Advisory Council on Heroin and Opioid Prevention and Education (HOPE Council), created by Act 88 of the 2017 Regular Legislative Session and adopted as La. Revised Statute (R.S.) 49:219.5 later that year, has completed its sixth full year of operation. The following is the Council's fifth year-end Interagency Coordination Plan. All HOPE Year End reports are posted at www.ldh.la.gov/hope.

Act 88 requires that the Annual Interagency Coordination Plan include, but not be limited to, the following:

- Parish-level data on opioid overdoses and the dispensing of overdose-reversal medication,
- Progress of current initiatives in the state relating to the heroin and opioid epidemic, and
- Specific impacts to agencies in addressing education, treatment including the use of medications for opioid use disorder, prevention, overdose and recovery.

The Louisiana Opioid Surveillance Initiative (LOSI) developed the Louisiana Opioid Data & Surveillance System (LODSS) (www.lodss.ldh.la.gov) for the collection of information, including health data, from the Louisiana Department of Health (LDH) and external organizations related to opioid use disorder. LODSS analyzes the collected information and disseminates results through fact sheets, publications, training and educational materials, and the online data and surveillance system.

Similar to previous years, LODSS reveals a consistent upward trend in opioid-related deaths in Louisiana, with a nearly two-fold increase since the onset of the COVID-19 pandemic in early 2020. The trend of deaths by fentanyl and synthetic opioids has also continued to climb, overtaking prescription opioids and heroin.

National and Louisiana Drug Overdose Trends

- **CDC national overview:** Drug overdose deaths rose to 109,705 (1.9% increase) by December 2022 (CDC data).
- **CDC Louisiana overview:** Drug overdose deaths decreased by 2.74% to 2,443, for the 12-month reporting period ending December 2022.
- Louisiana Medicaid opioid prescriptions: Decreased by 23,833 compared with 2022 Medicaid treatment and prescriptions: MOUD prescriptions and naloxone prescriptions rose, while emergency room visits and inpatient admissions for opioid issues decreased.
- Naloxone distribution and education: 46,960 kits distributed through LaSOR 2.0 and 3.0 grants (increased by 18,559 from the prior report), and 27,262 individuals educated on use of naloxone through the LaSOR 2.0 and 3.0 grants (increased by 10,497 from the prior report).

State Initiatives

- The Louisiana Opioid Response Plan continues to tackle the crisis with data analytics, surveillance and increased treatment access.
- Federal grants via LaSOR have expanded treatment and recovery services, with a notable increase in naloxone kit distribution and overdose reversals.

- The LDH Office of Public Health has bolstered surveillance improvements and collaborative efforts in harm reduction and treatment, particularly for hepatitis C and HIV prevention.
- The Louisiana Legislature has enacted to address opioid-related crimes and improve Good Samaritan protections.

Key Developments

- Xylazine and kratom concerns: The Drug Enforcement Agency (DEA) has listed kratom as a "drug
 and chemical of concern," citing it as an "imminent hazard to public safety." Xylazine, while only
 authorized by the FDA for veterinary use, is being used to reduce the amount of fentanyl or heroin
 in final products. Xylazine's increasing prevalence in drug overdose deaths is a growing concern
 in Louisiana.
- **Technology and training:** Telehealth usage for outpatient opioid use disorder treatment peaked at 45% of all services offered in SFY 2021, decreasing slightly thereafter to 34% of all persons served in 2023.

Recommendations

As the HOPE Advisory Council transitions into 2024, with a new administration, new leadership on the Drug Advisory Board and additional changes in the participating membership of the HOPE Council, this year's recommendations focus on priorities that build on prior years' recommendations and advance some already-established polices, programs and strategies. Recommendations also reflect the growing concerns regarding buprenorphine availability challenges and the emergence of xylazine and kratom usage in our state.

The 2023 HOPE Council report highlights progress and improvements in several areas, including decreases in Louisiana opioid overdose deaths, decreases in emergency department (ED) utilization and decreased use of inpatient acute hospitalization, as well as decreased utilization of both residential and inpatient opioid use treatment settings. Louisiana also saw continued progress in terms of use of MOUD, increased utilization of outpatient American Society of Addiction Medicine (ASAM) substance use services, and increased naloxone utilization. Several strategies likely contributed to these improvements, and some show particular promise moving forward, including, but not limited to the following:

- Address outpatient pharmacy Suboxone access and dispensing barriers.
 - Pharmacies in Louisiana are experiencing a growing challenge with Suboxone supply chain shortages, leading to instances where some patients attempting to fill prescriptions are being denied. Regulatory dispensing barriers should be eased, if not eliminated, to help assure sufficient availability of buprenorphine in retail pharmacies.
- Require and support treatment of opioid use disorder (OUD) in EDs.
 - Support or request EDs to facilitate and engage case management and to initiate medications for opioid use and alcohol use disorders, when clinically appropriate.
 - Support development of the Louisiana Bridge Program, naloxone access and increased availability of Peers and Substance Use Navigators in ED settings.
- Examine the effect of current Medicaid rates on community SUD providers and services, including residential SUD treatment providers.

- Adoption of new ASAM criteria in 2024.
- Continue support of telehealth/remote options for SUD service delivery.
- Continue and enhance support for harm reduction efforts.
 - Encourage and support local governments in the use of opioid abatement funds for harm reduction strategies.
 - o Establish a Harm Reduction Review Panel.
 - o Advocate for local ordinances to legalize and support SSPs across the state.
 - Collaborate on public health-based messaging, programming and legislation around drug use and emerging drug trends that is not fear or stigma-based but instead rooted in data and best practices.
- Expand access to methadone clinics through expanded hours and mobile dosing units.
 Regulatory dispensing barriers should be eased, if not eliminated, to help assure sufficient availability of buprenorphine in retail pharmacies.
- Reevaluate operation of the HOPE Advisory Council. As additional substances have become
 associated with the opioid crisis and newer treatment strategies have emerged, it is important
 for the HOPE Advisory Council, the Drug Advisory Board and the Louisiana Legislature to
 consider how best to structure the HOPE Advisory Council moving forward.

About the HOPE Council

The HOPE Council is an advisory board established within the Governor's Drug Policy Board charged with:

- Coordination of parish-level data on opioid overdoses and usage of overdose-reversal medication; and
- Coordination of a central online location to disseminate information and resources, including the Interagency Heroin and Opioid Coordination Plan.

The plan is submitted annually to the Governor, the Governor's Drug Policy Board, President of the Senate, Speaker of the House, and Chief Justice of the Louisiana Supreme Court.

The Council consists of 13 state agency members, listed in Appendix A. The Council also engages and solicits input, recommendations and guidance from interested parties and stakeholders. (See appendix A.) The Council welcomes participation from all interested parties and stakeholders. Over 300 persons are invited to HOPE Council meetings, and all requirements of the Louisiana Open Meetings Law are satisfied to encourage attendance and participation.

Information about the HOPE Council is available at https://www.cfprd.doa.louisiana.gov/boardsandcommissions/home.cfm.

Description of the Problem

National Data

According to the CDC's National Vital Statistic System Provisional Drug Overdose Death Counts¹ Update from November 5, 2023, drug overdose deaths occurring in 2022 continued to rise nationally, with 109,705 deaths for the 12-month reporting period ending in December 2022. This represents an increase from 107,573 deaths reported for the same period in 2021 — a rise of 2,132 drug deaths (1.9%) nationally during this time. In the figure below, the highlighted area identifies January as beginning of the 2022 calendar year and December as the end of the 2022 calendar year.

140,000 O Predicted Value ■ Reported Value 120,000 100,000 80,000 Number of Deaths 60,000 40,000 20 000 Jan 2023 Jan 2016 Jan 2018 Jan 2021 Jan 2022 12-Month Ending Period

Figure 1: 12 Month-ending Provisional Number and Percent Change of Drug Overdose Deaths, United States

Source: https://www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm

State Data

Louisiana Statewide Overdose Death Trends

As seen in the CDC visualization² below, Louisiana's recorded number of drug overdose deaths declined slightly when compared to the broader national drug overdose trend. The CDC reports that Louisiana's

¹ Source note: Provisional drug overdose death counts are based on death records received and processed by the National Center for Health Statistics (NCHS) on the first Sunday of each month. National provisional estimates include deaths occurring within the 50 states and the District of Columbia. NCHS receives the death records from state vital registration offices through the Vital Statistics Cooperative Program. Provisional death counts presented in this data visualization are for "12-month ending periods," defined as the number of deaths occurring in the 12-month period ending in the month indicated. Provisional data are based on available records that meet certain data quality criteria at the time of analysis and may not include all deaths that occurred during a given time period. Therefore, they are subject to change.

² See footnote 1 for source notes on this data.

drug overdose deaths in 2022 totaled 2,443 deaths for the 12-month reporting period ending December 2022, a decrease from 2,512 deaths for the same period in 2021. This represents a decrease of 281 deaths (2.74%) in Louisiana during this time. In the figure below, the highlighted area identifies January as beginning of the 2022 calendar year and December as the end of the 2022 calendar year.

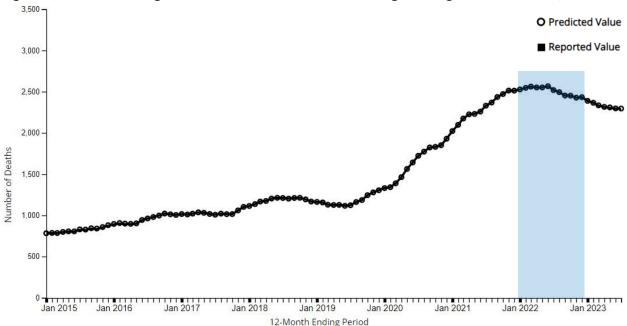


Figure 2: 12 Month-ending Provisional Number and Percent Change of Drug Overdose Deaths, Louisiana

Source: https://www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm

State Overdose Data

As in previous years, the HOPE Council collaborated with the Louisiana Opioid Surveillance Initiative (LOSI) in the LDH Office of Public Health (OPH). LOSI has received federal grants to collect, analyze and disseminate opioid-related data, in addition to other drug types, and administer the Louisiana Opioid and Data Surveillance System (LODSS). This web-based data dissemination tool provides data visualizations and tables of fatal and non-fatal overdose-related data at the parish and state level, and is the source of the parish-level data included in this report. LOSI staff analyzed and visualized the following data. Whereas the data reported via national sources in Figures 1 and 2 are marked provisional, the data that follow in Figures 3-6 and Tables 1-2, extracted directly from the state's vital records database, are not provisional and are considered final.

Number of Deaths† +Note the graph has been magnified to 100-1500 to better display trend

Figure 3: Opioid-Involved³ Deaths Occurring in Louisiana, 2014-2022

Source: Louisiana Electronic Event Registration System, extracted from LODSS

The deaths in Figure 3 above represent opioid-involved deaths⁴ that occurred in the state of Louisiana in the calendar year indicated. Louisiana opioid-involved deaths from January to December 2022 totaled 1,420, an increase of 2.6% over the previous year, which is a much smaller rate of change than prior years. Louisiana residents and non-residents who died in the state are included in this number.

While there were more deaths in all opioid types, a surge occurred in the category of synthetic opioids, which includes fentanyl and its more potent formulations, as demonstrated in Table 1 below.

Table 1. Number of Deaths by Specific Opioid Drugs Used, Louisiana 2015-2022								
Drug Involved / Year	2015	2016	2017	2018	2019	2020	2021	2022
Synthetic Opioids	38	82	154	215	335	722	1211	1241 (个5% from 2021)
Fentanyl	25	72	136	194	321	664	969	1216 (个25% from 2021)
Heroin	127	150	169	178	229	268	160	51 (↓ 67% from 2021)
Methadone	17	18	10	20	21	28	37	33 (\$\square\$ 11% from 2021)
Natural & Semi- Synthetic Opioids	103	110	165	151	197	278	327	323 (↓1% from 2021)

Source: Louisiana Electronic Event Registration System, extracted from LODSS

Note: categories do not sum, as several drugs could have been detected in one death.

³ The state's vital records database used by coroners to record deaths was enhanced in August 2019. Among the enhancements were additional opportunities for coroners to indicate whether an opioid was present in the toxicology for drug overdoses. The vertical gold line on the graph above indicates the start date for this data collection.

⁴ An opioid-involved death is one where the coroner recorded an opioid as either a cause or contributor to the death.

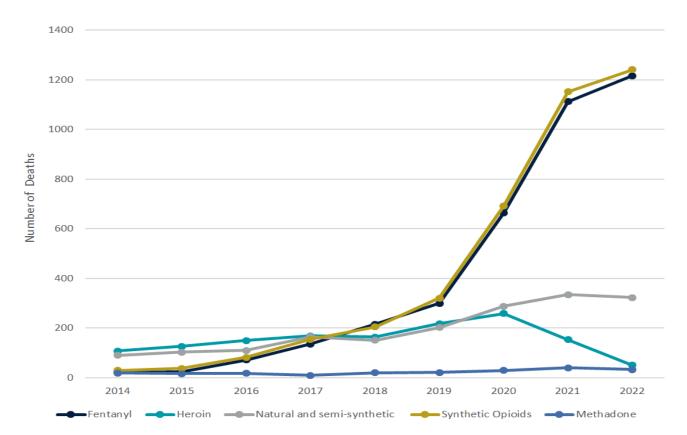


Figure 4: Drug Overdose Deaths by Specific Opioid Drug Used in Louisiana, 2014-2022

Source: Louisiana Electronic Event Registration System, extracted from LODSS

Figure 4 above displays trends of death data involving several types of opioids, including heroin, fentanyl and methadone. Few deaths are attributed to methadone, and these have demonstrated in toxicology to be listed with other drugs as the cause of death. Deaths involving heroin began to decrease in 2020, but deaths involving synthetic opioids (mostly illicit fentanyl) surged in 2020 and have continued to increase. Deaths involving fentanyl have increased more than 2,000% since 2014. Deaths involving synthetic opioids/fentanyl surpassed the number of deaths involving heroin or natural and semi-synthetic opioids in 2018. These troubling trends continue to warrant a shift in strategies as efforts to reduce prescription drug availability in the community has led to a shift in substance availability to more potent formulations.

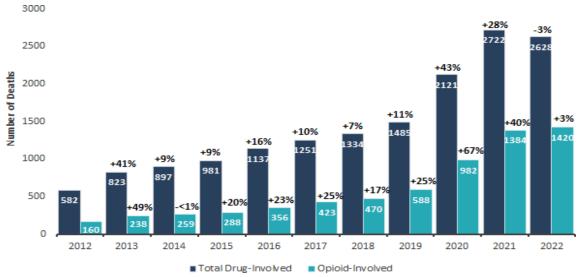


Figure 5: Drug-Involved and Opioid-Involved Deaths in Louisiana, 2012-2022

Source: Louisiana Electronic Event Registration System, from LODSS

The clear increase in drug-involved deaths occurring in Louisiana is displayed in Figure 5 above. For the first time in nearly a decade (and as indicated in Figure 2), a decrease in the total number of drug-involved deaths was recorded in 2022. For years prior, the percent increase ranged from 43% to 7%. Data showed a nearly 3% increase in opioid-involved deaths in 2022, a markedly smaller increase than recorded in previous years.

Parish Overdose Data

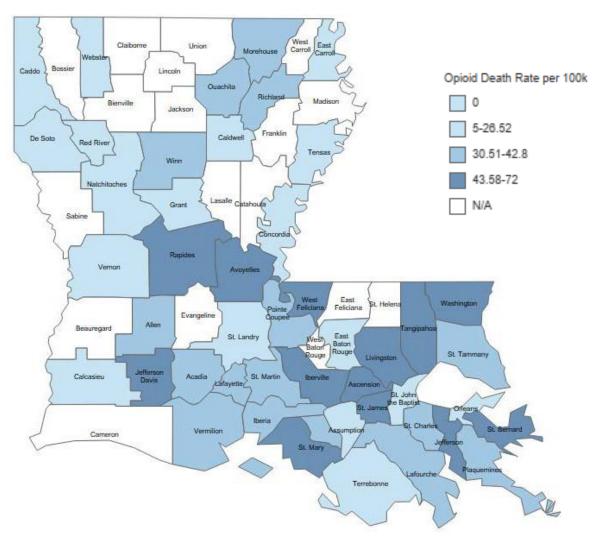
A total of 1,420 opioid-involved deaths occurred in Louisiana during 2022, up from 1,384 recorded in the prior year. These deaths include Louisiana residents, as well as residents from other states and countries who fatally overdosed in Louisiana. For deaths listed by parish of residence, the parishes of death indicated are those in which the decedent maintained a residential address. All deaths included in this section are ones in which the parish coroner determined the cause of death was directly attributed to opioid poisoning or opioids were specifically listed in the secondary cause of death fields. Table 2 lists the top five parishes for opioid-involved deaths by the decedent's residence and by the parish where the death occurred.

Table 2: Opioid-Involved Overdose Deaths by Parish of Residence and by Parish of Occurrence, Louisiana, 2022

Parish of Residence - Count	Parish of Occurrence - Count
1. Jefferson - 218	1. Jefferson - 251
2. St. Tammany - 99	2. Lafayette - 115
3. Livingston - 94	3. St. Tammany - 111
4. Lafayette - 90	4. Orleans - 95
5. Orleans - 83	5. Livingston- 83

Deaths listed for the five parishes above represent 43% (584 of 1,348) of statewide deaths by parish of residence and 46% (655 of 1,420) of statewide deaths by occurrence. While Figure 4 below maps the rates of opioid-involved death by decedent's parish of residence, a table containing number of opioid deaths by parish of residence and occurrence for all 64 parishes for 2022 is included in Appendix B.

Figure 6. Rates of Opioid-Involved Deaths per 100,000 Residents Louisiana, 2022



Source: Louisiana Electronic Event Registration System, from LODSS

Opioid Prescription Data

Using data from the state's Prescription Monitoring Program, LDH has identified the number of opioid prescriptions issued to residents by parish for 2018-2022. In 2022, there was an average of **70 opioid prescriptions per 100 individuals** in Louisiana, which is down 3% from 72 prescriptions per 100

Louisianans in 2021. When examining opioid prescriptions at the parish level for 2022, the parishes listed below exhibited the highest rates of opioid prescriptions. In 2022, each of these parishes saw a greater number of prescriptions issued than people residing in the parish.

- Rapides: 115 prescriptions issued per 100 residents, down from 128 prescriptions in 2021
- Caddo: 132 prescriptions issued per 100 residents, down from 133 prescriptions in 2021
- Lafayette: 105 prescriptions issued per 100 residents, down from 112 prescriptions in 2021
- East Baton Rouge: 107 prescriptions issued per 100 residents, down from 112 in 2021
- Evangeline: 97 prescriptions issued per 100 residents, down from 102 prescriptions in 2021

Figure 7 maps opioid prescription rates by parish for 2022. A table listing the number of prescriptions issued to residents per 100 individuals for all 64 parishes for 2022 is included in Appendix C.

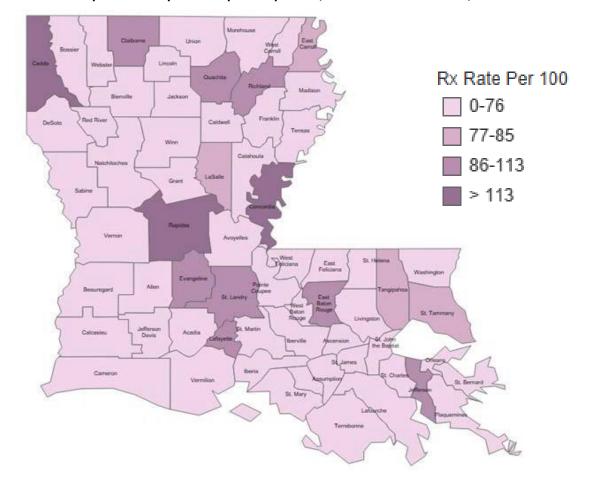


Figure 7. Rates of Opioid Prescriptions Dispensed per 100,000 Residents Louisiana, 2022

Source: Louisiana Prescription Monitoring Program of the Louisiana Board of Pharmacy, extracted from LODSS

Note: The prescription rates discussed in this section and displayed in Figure 7 are by parish of prescriber, not parish of patient residence. Four of the five parishes with the highest rates on the prescriber parish map are parishes containing large cities, such as Rapides (Alexandria), Caddo (Shreveport), Lafayette (Lafayette) and East Baton Rouge (Baton Rouge). The pattern shows the parish containing the population

centers of each region has a higher rate of prescriptions than the surrounding parishes. Providers tend to concentrate in areas with a high population density, but the population they serve are distributed more evenly across the area.

Kratom in Louisiana, 2022

Kratom is a tropical tree native to Southeast Asia. The major psychoactive ingredient in kratom is mitragynine. In the U.S., the use of kratom has increased markedly in recent years. The DEA has listed kratom as a "drug and chemical of concern," citing it as an "imminent hazard to public safety." The side effects of using kratom can include psychotic behaviors and psychological or physiological dependence. Therefore, even in low doses kratom is considered an unsafe substance.

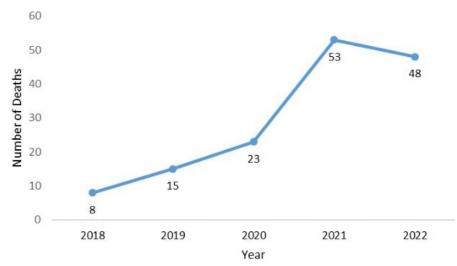


Figure 8. Kratom-Involved Deaths in Louisiana, 2018-2022

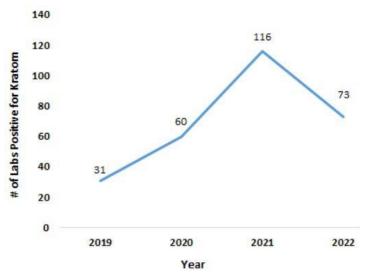
Source: Louisiana Electronic Event Registration System, extracted 11/2023 by the Louisiana Opioid Surveillance Initiative

These data were certified by the parish coroners and extracted from the state vital records database. From 2018 through 2021, the number of deaths involving kratom in Louisiana increased from eight cases in 2018 to 53 cases in 2021. In this time, the highest number of kratom-involved deaths was in 2021, as shown in Figure 8.

NMS Labs conducts postmortem toxicology for coroners around the state. The OPH Bureau of Health Informatics (BHI) directs grant funding to support the forensic toxicology testing for suspected drug overdoses on behalf of parish coroners as part of LDH's opioid surveillance program. BHI received a monthly feed of toxicology results to aid in the public health surveillance of the state's opioid crisis. From the start of the program in February 2019 through the end of 2022, 7,664 decedents were submitted for forensic toxicology testing through the NMS partnership. Figure 9 is based on analysis of those toxicology results.

Figure 9. Number of Toxicology Results Positive for Mitragynine (kratom) in Louisiana, 2019-2022

⁵ https://nida.nih.gov/research-topics/kratom



Source: NMS Labs, extracted 11/2023 by LOSI

From 2019 through 2022, the number of deaths involving kratom in Louisiana has been steadily increasing. The highest number of kratom-involved deaths was in 2021, as shown in Figure 9.

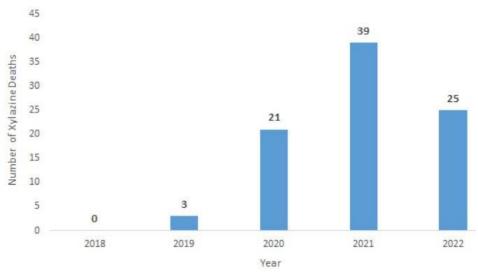
It is important to note that this data collection began in 2019 and built up through that year, potentially resulting in uncounted results for 2019.

Xylazine in Louisiana, 2022

Xylazine is a non-opiate sedative, analgesic and muscle relaxant and is currently only authorized in the United States for veterinary use. The first use of xylazine as an illicit substance produced for human consumption in the United States was in the late 1990s. An important distinction is that xylazine produced for veterinary use is in a liquid form, while illicit xylazine is a white or brown powder. Xylazine has been most commonly found combined with fentanyl, but has also been seen in combination with cocaine and heroin.

Human consumption of xylazine can lead to physical dependence and physiological effects similar to those of opioids. Withdrawal symptoms include sharp chest pains, seizures and depression of the central nervous system. Xylazine is used to reduce the amount of fentanyl or heroin contained in the final product of those drugs because xylazine is less expensive. It may also lead to a more powerful, prolonged effect than heroin or fentanyl. The increasing prevalence of xylazine in drug overdose deaths is a growing concern in Louisiana.

Figure 10. Xylazine-Involved Deaths in Louisiana, 2018-2022



Source: Louisiana Electronic Event Registration System, extracted 11/2023 by LOSI

Figure 10 data was certified by parish coroners and extracted from the state vital records database. From 2018 through 2021, the number of deaths involving xylazine in Louisiana steadily increased. Xylazine-involved deaths increased 600% from 2019 to 2020 and 86% from 2020 to 2021.

NMS Labs conducts postmortem toxicology for coroners around the state. BHI directs grant funding to support the forensic toxicology testing for suspected drug overdoses on behalf of parish coroners as part of LDH's opioid surveillance program. BHI received a monthly feed of toxicology results to aid in the public health surveillance of the state's opioid crisis. From the start of the program in February 2019 through the end of 2022, 7,664 decedents were submitted for forensic toxicology testing through the NMS partnership. Figure 11 is based on analysis of those toxicology results.

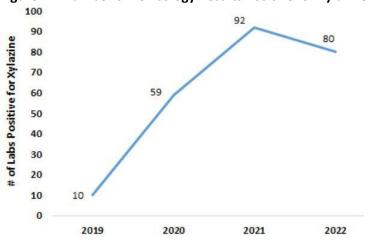


Figure 11. Number of Toxicology Results Positive for Xylazine in Louisiana, 2019-2022

Year
Source: NMS Labs, extracted 11/2023 by LOSI

The number of postmortem toxicology results testing positive for xylazine in Louisiana steadily increased from 2019 to 2021. Throughout this period, the highest number of xylazine-involved deaths was seen in

2021, as shown by Figure 11. It is important to note that data collection began in 2019 and grew through that year, so results could be undercounted for 2019. Additionally, while the values of xylazine-involved deaths differ between the coroner reporting and the toxicology testing, the trend line is consistent.

Impact on Louisiana

The number and percent change of drug overdose deaths increased nationally when compared to the previous year. However, in calendar year 2022, Louisiana experienced decreases in overdose deaths, opioid pain medication prescriptions, and emergency department and hospital days. In 2022, Louisiana saw increases in the number of MOUD prescriptions filled, including the number of naloxone prescriptions filled in Medicaid. It is notable that the number of Medicaid inpatient/residential ASAM OUD services decreased very slightly compared to the prior reporting period.

Impact Metrics

Table 3. Measurable Impacts of the Opioid Epidemic

Measure	Impact Data						
Louisiana Department of Health (LDH)							
LA Medicaid opioid prescriptions filled in	Total Prescriptions Filled: 489,619 Decreased by 23,833 compared to 2022						
SFY 22	Unduplicated Recipients: 215,893 Decreased by 5,648 compared to 2022						
	Medicaid Payments: \$22,763,128 Increased by \$6,141,896 compared to 2022 Data source: Medicaid data warehouse						
LA Medicaid MOUD prescriptions in SFY 23 Note: MOUD = buprenorphine, Suboxone, Bunavail, Zubsolv, Probuphine, Naltrexone, Vivitrol Medicaid claims date of service between July 1, 2022 and June 30, 2023 using 3-month claim lag for the following:	Total Prescriptions Filled: 170,077 Increased by 11,344 compared to 2022 Unduplicated Recipients: 21,369 Increased by 1,086 compared to 2022 Medicaid Payments: \$ 78,081,374 Increased \$8,670,623 compared to 2022 Data source: Medicaid data warehouse						
MOUD (buprenorphine, naltrexone, etc. –							

Measure	Impact Data						
excluding methadone) prescriptions							
Does not include							
methadone utilization							
or costs LA Medicaid	Standing Order:						
naloxone	75 Decreased by 10 compared to 2022						
prescriptions filled in SFY 23	Non-standing Order:						
361.23	10,521 Increased by 4,573 compared to 2022						
Medicaid claims date	Total Prescriptions Filled:						
of service between July 1, 2022 and June 30,	10,596 Increased by 4,563 compared to 2022						
2023 using 3-month	Unduplicated Recipients:						
claim lag for the following: naloxone	8,440 Increased by 3,022 compared to 2022						
HICL seq no. 001874	Medicaid Payments:						
	\$922,710.75 Increased by \$189,155.75 compared to 2022						
	Data source: Medicaid data warehouse						
LA Medicaid number	Emergency Department Days:						
of emergency department days for	8,679 Decreased by 1,530 days compared to 2022						
OUD in SFY 23	Unduplicated Recipients:						
	6,633 Decreased by 1,041 recipients compared to 2022						
	Medicaid Payments:						
	\$2,581,324.12 Increased by \$269,977 compared to 2022						
	Data source: Medicaid data warehouse						
LA Medicaid hospital admits in for OUD in	Inpatient Admissions:						
SFY 23	11,386 Decreased by 549 compared to 2022						
	Unduplicated Recipients:						
	8,103 Decreased by 314 compared to 2022						
	Medicaid Payments:						
	\$59,205,266.13 Decreased by \$3,886,834 compared to 2022						
	Data source: Medicaid data warehouse						
LA Medicaid inpatient/residential	Unduplicated Recipients:						
ASAM OUD in SFY 23	8,573 Decreased by 100 compared to 2022						

Measure	Impact Data
Medicaid claims date of service between July 1, 2021 and June	Medicaid Payments: \$60,350,780 Decreased by \$1,306,864 compared to 2022
30, 2022 using 3- month claim lag for the following:	Data source: Medicaid data warehouse
Inpatient/residential ASAM levels 4-WM, 3.7-WM, 3.7, 3.5, 3.3, 3.2-WM, and 3.1	
LA Medicaid	Unduplicated Recipients:
Outpatient ASAM OUD in SFY 23	9,179 Increased by 1,195 compared to 2022
Services related to	Medicaid Payments:
opioids for Outpatient	\$9,618,389 Increased by \$1,389,743 compared to 2022
ASAM levels 2.1, 2- WM, and 1.0	Data source: Medicaid data warehouse
Number of	Overdose ED/naloxone distribution:
prevention/ education activities	46,960 kits distributed through LaSOR 2.0 and 3.0 grants (increased by 18,559)
(LaSOR 2.0 and 3.0 grant funded)	27,262 individuals educated on use of naloxone through the LaSOR 2.0 and 3.0 grants (increased by 10,497)
	Evidence-based Prevention Practices:
	4,476 individuals participated in evidence-based prevention programs through the LaSOR 2.0 and 3.0 grants (decrease of 2,425)
	Data source: LaSOR 2.0 Grant annual report, LaSOR 3.0 Grant annual report The LaSOR 2.0 and 3.0 data range: September 30, 2022 – September 29, 2023
Number and type of treatment services provided through	1,942 people served through OTPs, LGEs, DOC and OBOTs (increase of 287 people served in the prior year)
LaSOR 2.0 and 3.0	Data source: LaSOR 2.0 Grant annual report, LaSOR 3.0 Grant annual report LaSOR 2.0 and 3.0 data range: September 30, 2022 – September 29, 2023

Interagency Heroin and Opioid Coordination Plan

As in previous years, numerous state and local entities have reported activities related to addressing the ongoing opioid crisis in Louisiana. Highlights of such activities as received from those agencies, providers and organizations are below.

This year's updates are organized into one of the following state and local response categories for the purposes of this report:

- Louisiana Opioid Response Plan
- Federal Opioid Grant Funded Programs
- Education and Prevention
- Treatment and Recovery
- Resource and Capacity Development
- Legislative Updates 2023

Louisiana Opioid Response Plan

LDH released Louisiana's Opioid Response Plan in September 2019, aiming to reduce the negative impact of the state's opioid epidemic by implementing strategies to address the under-reporting of opioid deaths, enhance monitoring of opioid prescriptions and increase access to treatment services. The plan identified five pillars upon which to build the state's response to the opioid epidemic. While there is clearly much more work to be done, as is demonstrated below, LDH's and the state's opioid response shows much progress since 2019. Since its original drafting, ongoing progress and improvements are identifiable in data analytics and surveillance, education and awareness, prevention activities, intervention and rescue activities, accessibility of naloxone, and access to quality treatment and recovery support services. Specific examples of such activities in 2022 are included below.

Read the full 2019 plan at www.ldh.la.gov/assets/opioid/LaOpioidResponsePlan2019.pdf.

Federal Opioid Grant-funded Programs

Through LaSOR 2.0 and 3.0, OBH has implemented statewide services for OUD and stimulant use/misuse (SUM), focusing on treatment, prevention and recovery. Between September 30, 2022, and September 29, 2023, the program enhanced access to FDA-approved MOUD, benefiting populations such as the underinsured, criminal justice population, tribes and pregnant women, among others. A total of 1,942 individuals received OUD treatment, with 1,883 choosing MOUD, while 1,441 received recovery support services.

Significant achievements include the distribution of 46,960 naloxone kits, resulting in 3,285 overdose reversals, and the education of 27,262 individuals on naloxone use. The program also facilitated the expansion of harm reduction via vending machines and established 52 distribution sites.

As part of its Hub and Spoke Model, LaSOR supported 11 Opioid Treatment Programs (OTPs), which serve as Hubs, and 48 Office-Based Treatment Providers (OBOTs), which serve as Spokes, across the state, serving hundreds of individuals with MOUD and other support services. Additionally, nine Spoke care teams, which support and serve as liaisons to the Hub and Spoke providers, conducted 2,674 screenings and interventions.

Collaborative initiatives like Project ECHO and academic detailing sessions with Tulane University provided learning and mentorship to OBOTs. Mobile outreach teams also educated over 29,000 individuals on OUD.

Education and Prevention

OBH and OPH Prevention Initiative

Prevention, education and Intervention services associated with and funded by the LaSOR program are detailed in Appendix D. Accomplishments include 4,476 individuals participating in Generation Rx

evidence-based prevention programs for elementary, teen, college and older adult individuals. In addition, LGEs distributed and placed prescription drop boxes, safe storage and disposal products strategically throughout the state. LGEs, DOC, OTPs/methadone clinics, office-based providers and other partners participated in naloxone distribution to family members of persons in recovery, those actively using opioids, first responders, jails, FQHCs, EDs and other entities. During this latest reporting period, 46,960 naloxone kits were distributed and 27,262 individuals were educated on the use of naloxone.

HIV and Viral Hepatitis Prevention and Harm Reduction Efforts

In 2017, Louisiana passed the Syringe Access Authorization Legislation (RS 40:1040), allowing for the legalization of syringe service programs (SSPs) if authorized by local governments. To date, two parishes (Orleans and East Baton Rouge) and two cities (Alexandria and Shreveport) have authorized SSPs and there are a total of seven active programs throughout the state. The Office of Public Health's STD/HIV/Hepatitis Prevention Program (SHHP), in partnership with the Office of Behavioral Health (OBH), provides partial funding along with trainings and other technical assistance to four of these programs:

- The Philadelphia Center in Shreveport
- Central Louisiana AIDS Support Services (CLASS) in Alexandria
- Capital Area Re-entry Program (CARP) in Baton Rouge
- CrescentCare/New Orleans Syringe Access Program (NOSAP) in New Orleans

Over the 2022-23 fiscal year, the four state-supported SSPs served 5,664 unique participants across the state, with over 26,800 participant visits. These four SSPs distributed approximately 2.75 million sterile syringes — an instrumental HIV and hepatitis C (HCV) prevention intervention for people who inject drugs (PWID) — as well as 7,624 fentanyl test strips and 21,160 doses of naloxone, preventing an estimated 5,112 overdose-related deaths. Demand for these programs and their services continues to rise, indicating a greater need for local authorizations, services and funding, especially for essential supplies such as sterile syringes. In addition, authorization challenges persist, especially where the need is evident, despite the demonstrated need and evidence for the public health efficacy of SSPs.

As part of efforts to reduce overdose-related deaths across Louisiana, SHHP and OBH have collaborated on the development and implementation of a statewide distribution portal for harm reduction supplies, including naloxone and fentanyl test strips (https://louisianahealthhub.org/hrdhub). Eligible institutions can apply to be distribution hubs, which receive these supplies for free to distribute in their communities. As of November 2023, 67 organizations across Louisiana have become distribution hubs. Between December 2022 and the end of October 2023, 37,444 nasal naloxone kits and 31,865 fentanyl test strips were distributed to community members across the state via the portal, with 4,705 overdose reversals reported using naloxone obtained from the portal.

To help bolster overdose response efforts, the SHHP Harm Reduction team conducts monthly trainings on naloxone and fentanyl test strip use for partners across the state. The team has also provided, throughout the year, trainings on topics including harm reduction basics, reducing stigma, and syringe service

programs and their role in public health. These trainings have been well attended by state employees, medical professionals and community partners.

As overdose-related deaths and HCV and HIV transmission continue to be public health issues for PWID across Louisiana, harm reduction efforts must continue to be supported at a statewide level. This includes but is not limited to support at the local governmental level for SSP ordinances, support for local naloxone distribution efforts, and, of course, funding for harm reduction work, including essential harm reduction supplies (e.g., sterile syringes).

Treatment and Recovery

OUD is a devastating chronic illness of the brain, associated with significant risks to health and life. However, the disease can be treated successfully and recovery is possible. Below are some highlights of treatment and recovery activities for 2023.

- Program in Lake Charles and New Orleans has initiated ED overdose protocols to immediately link patients to substance use treatment. Lake Charles Memorial Hospital, along with two others in Region V, now have substance use navigators (SUNs) to provide treatment linkages, ED initiation of MOUD, and Narcan and harm reduction resources for discharged patients. Since its inception in September 2021, the SUNs have helped support over 500 patients, with the number of patients steadily increasing each quarter. Many hospitals across the state have expressed interest in implementing this model of care. It has been highly successful: 95% of people connected to a SUN leave the ED with Narcan and 70% of them are linked to follow-up care (which is much higher than the 10-20% who may follow up without a bridge program).
- ATLAS: LDH is also promoting ATLAS, a free online substance use disorder treatment locator developed with Shatterproof, showing locations, insurance accepted, services offered and patient experiences. ATLAS includes a SUD level-of-care placement-screening tool, and 63% of treatment facilities are participating in 2023.
- University Medical Center (UMC) provides comprehensive inpatient and outpatient opioid use disorder treatments, including MOUD, and specialized care for pregnant women.
- Tulane School of Medicine provides physician services and addiction consultation at facilities that offer withdrawal management and addiction care services, including an OTP (methadone maintenance) and residential programs, with a focus on individualized OUD treatment and training addiction medicine physicians.
- Odyssey House Louisiana Inc. (OHL) offers a range of addiction treatments, including a COVID-19
 positive residential facility, and has conducted extensive COVID testing and care for those seeking
 treatment.

Resource and Capacity Development

Louisiana Department of Health/Office of Behavioral Health Performance Improvement Projects

Performance improvement projects are those conducted by Medicaid managed care entities designed to achieve significant improvement, sustained over time, in health outcomes and enrollee experience.

OBH required the MCOs to implement a performance improvement project in 2019 with the goal of **Improving Initiation and Engagement of Substance Use Services**. These projects were implemented in consideration of state performance on the measures pertaining to initiation and engagement of substance use treatment services, the newly implemented 1115 demonstration waiver focused on the substance use service delivery system, and clinical importance/need. At the conclusion of the project in 2021, state performance on the initiation and engagement measures greatly exceeded the national 50th percentile.

The Office of Behavioral Health, in consultation with the Behavioral Health subcommittee (part of the larger Medical Care Advisory Committee), required the MCOs (n=6) to implement a new performance improvement project in 2022 with a focus on **Improving Behavioral Health Transitions of Care** in light of performance measure results and clinical importance/need. This measure includes the measure Follow-up after Emergency Department Visit for Substance Use, which has two sub-measures:

- The percentage of ED visits for members 13 years of age and older with a principal diagnosis of alcohol or other drug (AOD) abuse or dependence, with a follow-up visit for AOD within 7 days of the ED visit.
- The percentage of ED visits for members 13 years of age and older with principal diagnosis of alcohol or other drug (AOD) abuse or dependence, with follow-up visit for AOD within 30 days of the ED visit.

Louisiana adopted the Follow-up after Emergency Department Visit for Substance Use, with initial reporting in 2021. Healthy Louisiana rates show improved results from 2021 to 2022.

Follow-Up After Emergency Department Visit for Substance Use (FUA)	Aetna Better Health	Ameri- Health Caritas of Louisiana	Healthy Blue	Louisiana Healthcare Connections	United Healthcare Community	Measurement Year (MY) 2022 STATEWIDE AVERAGE	MY 2021 STATEWIDE AVERAGE	MY 2020 STATEWIDE AVERAGE	MY 2022 Quality Compass South Central – All LOBs (Excluding PPOs): 50th Percentile Benchmark	MY 2022 Quality Compass National – All LOBs (Excluding PPOs): 50th Percentile Benchmark
Within 7 Days	22.24%	17.38%	16.87%	15.88%	16.39%	17.19%	8.64%	NA	17.38%	24.51%
Within 30 Days	33.81%	28.94%	27.70%	26.05%	25.98%	27.70%	13.74%	NA	28.94%	36.34%

Louisiana Opioid Treatment Programs (OTPs):

Louisiana expanded OTPs from 10 to 11 clinics statewide. Each region has one clinic, with two clinics in Region 3; the new Houma clinic opened in August 2023.

The statewide census for OTPs is an average of 5,100 patients, with an increasing trend. Grant funding has facilitated OTP contracts to subsidize 24/7 services in Shreveport, Hammond and New Orleans.

- Expanded hours are available at several locations for increased access to services.
- o OTPs are seeking grant-funded subsidies to purchase Mobile Dosing Units.
 - 1. LA regulations do not permit OTP use of mobile units at this time; OBH is drafting language to amend these in-state regulations.
 - 2. When SAMHSA and DEA post the federal regulatory update, LDH is ready to circulate language to align with the federal provisions allowing the use of mobile dosing units to increase access to OTP services.

Legislative Updates 2023

HCR No. 7: Representative Charles Owen authored House Concurrent Resolution (HCR) No. 7 to petition the United States Congress to take actions necessary to halt the influx of fentanyl from Mexico and China into the United States. It passed both chambers and was sent to the Secretary of State for enactment, which included communicating the petition to the presiding officers of the U.S. Senate, U.S. House of Representatives and all members of the Louisiana congressional delegation.

Act 399: Representative John Stefanski authored HB 90, which provides for increased penalties by aggregate weight for distribution or possession with intent to distribute fentanyl or carfentanil. Ultimately, the bill passed both chambers and was signed by the Governor to become Act 399 of the 2023 regular legislative session. The act became effective on August 1, 2023.

Act 412: Representative John Stefanski authored HB 586, providing that any entity or foreign state engaging in or facilitating illicit fentanyl trafficking or its commercial activity shall be liable for damages for serious bodily injury or death of persons through civil court actions. The bill further allows for civil liability actions to be retroactive beginning January 1, 2015. Ultimately, the bill passed both chambers and was signed by the Governor to become Act 412 of the 2023 regular legislative session. The act became effective on August 1, 2023.

Act 183: Representative Dustin Miller authored HB 645, which provides that it is unlawful for any person to knowingly or intentionally produce, manufacture, distribute or possess with intent to produce, manufacture or distribute xylazine. It provides for exceptions in the course of a legitimate veterinary practice, for the purpose of pharmaceutical compounding by a licensed pharmacist or veterinarian, and pursuant to a valid prescription from a licensed veterinarian. The bill also provided for penalties for violation of the law. The bill passed both chambers and was signed by the Governor to become Act 183 of the 2023 regular legislative session. The act became effective on August 1, 2023.

Act 148: Senator Sharon Hewitt authored SB 49, which provides for increased penalties for the crime of creation or operation of a clandestine laboratory for the unlawful manufacture of certain controlled dangerous substances. These include fentanyl or a mixture or substance containing a detectable amount of fentanyl or its analogues, or carfentanil or a mixture or substance containing a detectable amount of carfentanil or its analogues. The bill passed both chambers and was signed by the Governor to become Act 148 of the 2023 regular legislative session. The act became effective on August 1, 2023.

Recommendations

As the HOPE Advisory Council transitions into 2024, with a new administration, new leadership on the Drug Advisory Board and changes in the participating membership of the HOPE Council, this year's recommendations focus on priorities that build on previous years' recommendations and advance some already-established polices, programs and strategies. Recommendations also reflect the growing concerns regarding buprenorphine supply chain shortages and the emergence of xylazine and kratom usage in our state.

The 2023 HOPE Council report highlights progress and improvements in several areas, including decreases in Louisiana opioid overdose deaths, emergency department utilization, use of inpatient acute hospitalization and utilization of residential and inpatient opioid use treatment settings. Louisiana also saw continued progress in terms of use of MOUD, increased utilization of outpatient ASAM substance use services and increased naloxone utilization. Several strategies likely contributed to these improvements and some show particular promise moving forward, including but not limited to the following:

Addressing Outpatient Pharmacy Suboxone Access and Dispensing Barriers

Louisiana pharmacies are increasingly facing Suboxone availability challenges, resulting in some patients seeking to fill prescriptions being turned away. According to local reports, provider and pharmacist complaints, also noted by the American Medical Association (https://jamanetwork.com/journals/jamahealth-forum/fullarticle/2795746), pharmacies ordering larger quantities of buprenorphine to meet the growing prescription demand may be flagged by wholesalers and distributors as suspicious when aggregate pharmacy orders of opioid products, including buprenorphine, are above pre-specified amounts or thresholds. These pharmacies may receive an insufficient supply and may be reported to the DEA, making them subject to audits and litigation.

To ensure an ample supply of buprenorphine in retail pharmacies, it is essential to address regulatory dispensing barriers contributing to these concerns at the federal level. Federal laws should address the exemption of buprenorphine from audits or restrictions when prescribed for OUD by qualified clinicians or prescribers. Additionally, there is a need to review in-person dispensing requirements and homedelivery restrictions for buprenorphine. The Journal of the American Medical Association suggests safeguarding retail pharmacies and pharmacists from DEA liability and litigation related to the diversion of buprenorphine.

In addition to considering the above legislative changes affecting changes at the DEA level, the Louisiana Legislature should consider supporting individuals with OUD attempting to fill their buprenorphine prescription by requiring retail pharmacies to fill all valid buprenorphine prescriptions, and to do so in full.

Require and Support Treatment of Opioid Use Disorders in Emergency Departments

Support or request Emergency Departments to facilitate and engage case management and to initiate medications for opioid use and alcohol use disorders, when clinically appropriate.

Support the development of the Louisiana Bridge Program, Naloxone access and increased availability of Peers and Substance Use Navigators in Emergency Department settings and similar MOUD-ED programs.

Seek Medicaid Reimbursement for Peer Navigators in Emergency Departments

Examine the effect of current Medicaid rates on community SUD providers and services, including residential SUD treatment providers. Some providers have asserted that current and historic Medicaid provider reimbursement rates may be adversely affecting utilization and access to needed services. Providers have indicated that as the need for services intensifies, lower Medicaid rates may be contributing to a reduction in residential (ASAM Level III) capacity in terms of numbers of providers and overall bed capacity.

Continue and Enhance Support for Harm Reduction Efforts

- Educate and support local governments in the use of opioid abatement funds for harm reduction strategies. These may include but are not limited to:
 - o Funding for existing SSPs in New Orleans, Baton Rouge, Shreveport and Alexandria,
 - Funding to establish and sustain new SSPs in areas where they are legal, allowing for the
 possibility that SSP ordinances will be passed in other parts of the state; and
 - Advocate for local ordinances to legalize and support SSPs across the state, as these programs are essential, recommended and much-needed public health resources.
- Continue funding the already existing statewide harm reduction portal to purchase supplies such as naloxone and fentanyl test strips, thus ensuring the program's sustainability and expansion.
- Establish a Harm Reduction Review Panel consisting of representatives across LDH and state government, as well as medical professionals and community-based programs especially including SSPs and other harm reduction programs to collaborate on harm reduction strategies and future recommendations. This panel will give equal representation to community-based programs, especially harm reduction programs, as these groups have firsthand experience and understanding on the priority populations and needs.
- Collaborate on public-health based messaging, programming, and legislation around drug use and emerging drug trends that is not fear or stigma-based but instead rooted in data and best practices.

Expand Access to Methadone Clinics through Extended Hours and Mobile Dosing Units

The Department recently expanded the number of OTPs from 10 to 11 with an OTP located in Houma. Due to the continued demand for outpatient treatment, emergency department and hospitalization services, issues with Suboxone access and continued unacceptable overdose deaths, LDH should make necessary policy and statutory changes to facilitate further expansion of OTP/methadone clinic services statewide, based on demonstrated local need. In addition, LDH should continue to work with the DEA and SAMHSA to amend regulations to facilitate the employment of mobile dosing units for OTPs and other SUD services.

Adoption of New ASAM Criteria in 2024

The American Society of Addiction Medicine (ASAM) Criteria is the most widely used and comprehensive set of guidelines for placement, continued stay, transfer or discharge of patients with addiction and co-occurring conditions in the U.S. Louisiana, like other states, is transitioning from the third to the fourth edition of the ASAM Criteria in 2024. There will be changes for providers of these levels of care. ASAM's newly defined levels of care have been broken out separately for adults and adolescents, and those

involved with DOC. Specific ASAM criteria for adolescents and for those individuals with a substance use disorder involved with DOC will be made public later in 2024 and 2025. LDH will develop an implementation plan accordingly. The tentative expected effective date of the transition to the fourth edition of the ASAM Criteria for adult substance use service providers is January 1, 2025.

Continue Support of Telehealth/Remote Options for SUD Service Delivery

Louisiana should consider how to enhance access to indicated opioid use disorder treatment, including intensive outpatient treatment services, by continuing to support telemedicine services when appropriate.

Include Isotinazene, Brophine, Xyalazine and Kratom into Future HOPE Annual Reports

These substances are increasingly associated with opioid misuse, posing potential new risks to Louisianans. The inclusion of these substances in end-of-year HOPE reports might allow for discussion of strategies to address these concerns.

Reevaluate Operational Goals of HOPE Advisory Council

As additional substances have become associated with the opioid crisis and newer treatment strategies have emerged, it is important for the HOPE Advisory Council, the Drug Advisory Board and the Louisiana Legislature to consider how to best structure the HOPE Advisory Council moving forward. Consider, for example, inclusion of representatives from pharmacy, the Managed Care Association, harm reduction, Louisiana Hospital Association, Louisiana Coroner's Association and pain management, among others.

Resources

- 1. Louisiana Department of Health: Opioids: www.ldh.la.gov/opioids
- 2. Louisiana Department of Health: HOPE Council (includes previous reports): www.ldh.la.gov/hope
- 3. CDC National Vital Statistics System Provisional Drug Overdose Death Counts Update: https://www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm
- 4. Louisiana Department of Health: Opioid Response Plan: www.ldh.la.gov/assets/opioid/LaOpioidResponsePlan2019.pdf
- 5. Louisiana Opioid Data and Surveillance System (LODSS): www.lodss.ldh.la.gov
- 6. California Bridge Program: https://cabridge.org
- 7. Louisiana Board of Pharmacy: www.pharmacy.la.gov
- 8. Louisiana State Board of Medical Examiners: www.lsbme.org
- 9. Louisiana-Mississippi Hospice and Palliative Care Organization: www.lmhpco.org
- 10. American Academy of Hospice and Palliative Medicine: www.aahpm.org
- 11. Substance Abuse and Mental Health Administration (SAMHSA): www.samhsa.gov
- 12. National Institute on Drug Abuse: www.drugabuse.gov
- 13. American Society of Addiction Medicine: www.asam.org
- 14. US Drug Enforcement Administration: www.dea.gov
- 15. Faces and Voices of Recovery: www.facesandvoicesofrecovery.org
- 16. Louisiana Opioid Abatement Task Force: https://laoatf.org

Appendices

APPENDIX A – HOPE Council Member Agencies and Appointees per Act 88 of 2017

2020 Advisory Council on Heroin and Opioid Prevention and Education members:

- Chair: Secretary of LDH designee: Dr. James Hussey, Medical Director, Office of Behavioral Health
- Secretary of Department of Children and Family Services designee: Lori Miller, Child Welfare Manager
- Commissioner of Higher Education designee: Dr. Allison Smith, Program Administrator, Board of Regents
- Superintendent of Education designee: Michael Comeaux, Healthy Communities Section Leader
- Secretary of Department of Public Safety and Corrections designee: Shelley Edgerton, LPC, DPS&C Program Director for Opioid/MAT/Substance Treatment Programs
- Superintendent of State Police designee: Lieutenant William Bosworth
- Secretary of Veterans Affairs designee: Ronald Callegari, RN, Program Manager
- Secretary of Louisiana Workforce Commission designee: Tavares A. Walker, Deputy Assistant Secretary 2, Office of Workers Compensation
- President of Senate designee: Senator Regina Barrow, District 15
- Speaker of the House designee: Elsie Joanne Brown
- Attorney General designee: Monica Taylor, Special Projects Representative, Louisiana Attorney General's Office
- Commissioner of Insurance designee: Crystal Lewis
- A Judge from the drug division of a district court appointed by the Chief Justice of the Louisiana Supreme Court: Judge Timothy Marcel, Division E 29th Judicial District Court, St. Charles Parish

The Advisory Council on HOPE Stakeholder Organizations listed in Act 88 of 2017:

- 1. The Louisiana Board of Pharmacy
- 2. The Louisiana State Board of Medical Examiners
- 3. The Louisiana Sheriffs' Association
- 4. The Louisiana District Attorneys Association
- 5. The Louisiana State Medical Society
- 6. The Chiropractic Association of Louisiana
- 7. The Louisiana Physical Therapy Association
- 8. The Louisiana Association of Chiefs of Police
- 9. The Louisiana Independent Pharmacies Association
- 10. The Louisiana State Nurses Association
- 11. The Louisiana Association of Nurse Practitioners
- 12. The Louisiana Ambulance Alliance
- 13. The Louisiana State Board of Nursing
- 14. The Louisiana Psychiatric Medical Association
- 15. The Louisiana Poison Control Center
- 16. The Louisiana-Mississippi Hospice and Palliative Care Organization
- 17. The Optometry Association of Louisiana
- 18. The Louisiana Association of Health Plans
- 19. The Louisiana State Coroners Association

Staff supporting the effort are Lisa Longfellow and Catherine Peay from the Office of Behavioral Health and Kristy Miller from the Governor's Office of Drug Policy.

APPENDIX B – Opioid Death Data

APPENDIX B. Opioid-Involved Deaths by Parish of Occurrence and by Parish Residence — Louisiana, 2022 (counts and age-adjusted rate per 100,000 residents)

•	Deaths by	Deaths by	Age-Adjusted Rates
Area	Location	Residence	(Residence)
Acadia	21	20	37.75
Allen	5	8	34.17
Ascension	58	61	49.81
Assumption	*	5	26.45
Avoyelles	21	22	60.49
Beauregard	*	*	*
Bienville	*	*	*
Bossier	6	6	4.18
Caddo	15	15	7.13
Calcasieu	54	46	24.56
Caldwell	0	0	0
Cameron	*	*	*
Catahoula	*	*	*
Claiborne	*	*	*
Concordia	*	0	0
DeSoto	0	0	0
East Baton Rouge	67	60	15.11
East Carroll	*	0	0
East Feliciana	*	*	*
Evangeline	*	*	*
Franklin	*	*	*
Grant	*	5	21.56
Iberia	21	22	38.24
Iberville	12	13	43.58
Jackson	*	*	*
Jefferson	251	218	52.55
Jefferson Davis	21	19	71.77
Lafayette	115	90	37.81
Lafourche	32	28	30.51
LaSalle	*	*	*
Lincoln	*	*	*
Livingston	83	94	67.48
Madison	5	*	*
Morehouse	*	6	31.06
Natchitoches	5	7	24.57

Area	Deaths by Location	Deaths by Residence	Age-Adjusted Rates (Residence)
Orleans	95	83	21.36
Ouachita	47	38	26.52
Plaquemines	5	9	37.72
Pointe Coupee	9	8	40.38
Rapides	70	61	52.54
Red River	0	0	0
Richland	5	6	38.03
Sabine	*	*	*
St. Bernard	25	28	56
St. Charles	15	21	40.33
St. Helena	*	*	*
St. James	9	10	59.33
St. John the Baptist	7	5	14.14
St. Landry	9	11	15.27
St. Martin	15	18	33.03
St. Mary	23	21	42.8
St. Tammany	111	99	40.76
Tangipahoa	67	61	48.28
Tensas	0	0	0
Terrebonne	*	11	12.44
Union	5	*	*
Vermilion	11	16	31.19
Vernon	6	6	14.1
Washington	29	30	70.49
Webster	5	6	17.98
West Baton Rouge	*	*	*
West Carroll	0	*	*
West Feliciana	12	9	54.99
Winn	5	5	37.21

Source: Louisiana Electronic Event Recording System, extracted from LODSS

APPENDIX C – Opioid Prescription Data

APPENDIX C. Opioid Prescriptions Dispensed by Parish — Louisiana, 2022 (counts and rates per 100 residents)

		Percent change	Rate
Area	Count	from 2018	per 100
Acadia	20541	-5.26%	36
Allen	8917	-2.58%	39
Ascension	46176	-6.40%	35
Assumption	1475	-14.19%	7
Avoyelles	15267	-1.77%	39
Beauregard	15014	-9.12%	41
Bienville	1183	-6.40%	9
Bossier	83886	-0.74%	64
Caddo	303295	-2.64%	132
Calcasieu	131165	-5.63%	64
Caldwell	3279	-1.56%	34
Cameron	238	-18.21%	4
Catahoula	1273	-27.83%	14
Claiborne	12368	-0.88%	89
Concordia	21325	-14.03%	117
DeSoto	3495	-28.74%	13
East Baton Rouge	484867	-4.27%	107
East Carroll	5448	+2.06%	77
East Feliciana	2821	-15.31%	14
Evangeline	31171	-5.55%	97
Franklin	12841	-1.95%	66
Grant	1651	-12.92%	7
Iberia	39619	-4.93%	57
Iberville	3565	-14.65%	12
Jackson	4212	-15.04%	28
Jefferson	413845	-1.86%	97
Jefferson Davis	12340	-26.01%	38
Lafayette	262687	-4.69%	105
Lafourche	57089	+1.85%	59
LaSalle	11996	+1.80%	81
Lincoln	17340	-35.28%	36
Livingston	12068	-26.41%	8
Madison	1322	-45.77%	13
Morehouse	11668	-5.45%	47
Natchitoches	16552	-8.33%	45

Area	Count	Percent change from 2018	Rate per 100
Orleans	187848	-6.87%	50
Ouachita	143270	-4.46%	90
Plaquemines	4717	-4.89%	20
Pointe Coupee	4913	-10.57%	24
Rapides	146908	-11.34%	115
Red River	4537	-4.03%	61
Richland	18712	+8.67%	94
Sabine	5526	-10.14%	25
St. Bernard	9784	-1.77%	21
St. Charles	3106	-14.10%	6
St. Helena	2993	-11.18%	27
St. James	11862	-1.04%%	61
St. John the Baptist	12265	-39.07%	30
St. Landry	74287	-0.95%	90
St. Martin	8647	-11.83%	16
St. Mary	17048	-4.54%	35
St. Tammany	226367	-4.43%	82
Tangipahoa	109772	+2.22%	80
Tensas	955	-8.61%	24
Terrebonne	78649	-2.76%	75
Union	8787	-8.27%	42
Vermilion	18928	-1.67%	33
Vernon	17661	-7.42%	37
Washington	14966	-1.18%	33
Webster	16652	+0.91%	46
West Baton Rouge	4231	-2.39%	15
West Carroll	2978	-4.70%	31
West Feliciana	4918	+5.71%	31
Winn	4723	-9.45%	35
Louisiana	3238009	-20.48%	70

Source: Louisiana Prescription Monitoring Program of the Louisiana Board of Pharmacy, extracted from LODSS

Project ECHO: Opioid Dose Tapering	7/7/2022	20	LaSOR 2.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
Project ECHO: Social Media	7/14/2022	18	LaSOR 2.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
Recovery-Oriented Cognitive Therapy	7/15/2022	5	CMHS Set Aside ESMI/FEP	Stanford Master Clinician Series 2022	Dimitri Perivoliotis	Virtual
Project ECHO: Pre- Addiction	7/21/2022	24	LaSOR 2.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
Project ECHO: High Dose Antagonists	7/28/2022	22	LaSOR 2.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
LASACT Conference 2022: "Prevention & Recovery With So Many Uncertainties"	7/31 - 8/3/2022	350	LaSOR 2.0 Grant		Multiple presenters	Astro Crowne Plaza New Orleans, LA
Voice Dialgue	8/19/2022	17	CMHS Set Aside ESMI/FEP	Stanford Master Clinician Series 2022	Rufus May and Elisabeth Svanholmer	Virtual
Project ECHO: Nicotine and Brain Development	9/1/2022	22	LaSOR 2.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
"Let's Talk" Series: Session 1: Drugs The Good, The Bad and the Ugly	9/7/2022	85	OD2A/CAHS	This session is designed to expand your knowledge of The Good like prescription medication, The Bad like counterfeit drugs, and The Ugly like highly potent synthetic opioids like fentanyl and carfentanil.	Dr. Leslie Faulkner, DEA; Dr. Orlando Palmer, Pharmacist; and Trudy Wickham, LDH-OPH	Virtual
Project ECHO: Telemed and Addiction Tx	9/8/2022	17	LaSOR 2.0 Grant	Provider Education	TBD	Virtual

"Let's Talk" Series: Session 2: Stigma Kills How to Talk to Your Love Ones Who Misuse Drugs	9/14/2022	78	OD2A/CAHS	Learn how to check your feelings, attitudes and bias at the door. Learn what to say and what not to say to your loved one who misuses drugs.	Joi Plain, LCSW, CAHS; Sonya Milliman, CARP; and Joshua Hill, EBRP Library System	Virtual
Project ECHO: Buprenorphine and Pharmacy Barriers to Access	9/15/2022	24	LaSOR 2.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
An introduction to the Maastricht Interview	9/16/2022	17	CMHS Set Aside ESMI/FEP	Stanford Master Clinician Series 2022	Peter Bullimore	Virtual
Behavioral Health Symposium (Woman's Foundation) BH Summit	9/19- 21/2022	931	Mental Health Grant	Louisiana Opioid Action along with other behavioral health topics	Multiple presenters	Virtual and In-person
"Let's Talk Series": Session 3: Too Lit Too Often Is it Addiction or Just Chillin'?	9/21/2022	57	OD2A/CAHS	This session explores how mixing of drugs and alcohol is often the alternative to coping with life issues.	Rebecca Chiasson, LA State Police Crime Lab; and Dawn Collins, CAHS	Virtual
Project ECHO: Crystal Methamphetamine and OUD Treatment Retention	9/22/2022	NA	LaSOR 2.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
"Let's Talk Series": SESSION 4: "Signs of Drug Problem and How to Save a Life"	9/28/2022	54	OD2A/CAHS	Learn how traumas experienced earlier in our lives can have a huge impact on whether a person may battle with substance use	Tobechukwu Udeigbo, Odyssey House; and Ricki Davis CAHS	Virtual
Project ECHO: Nitazenes: What, Where & Why	9/29/2022	15	LaSOR 2.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual

Project ECHO: Opioid Dose Tapering	7/7/2022	20	LaSOR 2.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
Project ECHO: Social Media	7/14/2022	18	LaSOR 2.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
Recovery Oriented Cognitive Therapy	7/15/2022	5	CMHS Set Aside ESMI/FEP	Stanford Master Clinician Series 2022	Dimitri Perivoliotis	Virtual
Project ECHO: Pre- Addiction	7/21/2022	24	LaSOR 2.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
Project ECHO: High Dose Antagonists	7/28/2022	22	LaSOR 2.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
LASACT Conference 2022: "Prevention & Recovery With So Many Uncertainties"	7/31 - 8/3/2022	350	LaSOR 2.0 Grant		Multiple presenters	Astor Crowne Plaza New Orleans, LA
Voice Dialogue	8/19/2022	17	CMHS Set Aside ESMI/FEP	Stanford Master Clinician Series 2022	Rufus May and Elisabeth Svanholmer	Virtual
Project ECHO: Advocating in Washington DC	10/6/2022	21	LaSOR 2.0 Grant	Provider Education	Lilly Harvey	Virtual
Project ECHO: Presentation on Micro-Dosing Buprenorphine	10/13/2022	23	LaSOR 2.0 Grant	Provider Education	Stephen Milhollin, DO	Virtual
Project ECHO: Buprenorphine: Taper and Risk of Overdose	10/20/2022	21	LaSOR 2.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
Attachment and Psychosis: Theory and Clinical Implications	10/21/2022	17	CMHS Set Aside ESMI/FEP	Stanford Master Clinician Series 2022	Katherine Berry	Virtual
Project ECHO: Motility Rates: Buprenorphine vs Methadone	10/27/2022	25	LaSOR 2.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual

Project ECHO: OUD Treatment Gap	11/3/2022	22	LaSOR 2.0 Grant	Provider Education	George Singletary,	Virtual
Treatment dap			Grane		MD, MPH	
Project ECHO: High Dose Buprenorphine Induction in the ER	11/10/2022	23	LaSOR 2.0 Grant	Provider Education	"George Singletary, MD, MPH	Virtual
LaHEC: Be the One, Save Someone with Naloxone: A Multimedia Bystander Intervention for Opioid Overdose Reversal	11/10/2022	79	LaSOR 2.0 Grant	Address overdose prevention and response on West Virginia's college and university campuses	Dr. Susan Bissett Susie Mullens	Virtual
Project ECHO: When Prescribing Is not Enough: Level Barriers to Buprenorphine Access	11/17/2022	21	LaSOR 2.0 Grant	Provider Education	Jennifer Corapi, PharmD, BCCP	Virtual
Formulating Psychosis	11/18/2022	17	CMHS Set Aside ESMI/FEP	Stanford Master Clinician Series 2022	Louise Isham	Virtual
Project ECHO: Opioids and Stimulants Concurrent Risk of Fatal Overdose	12/1/2022	15	LaSOR 2.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
Project ECHO: Buprenorphine Access in Louisiana Residential Facilities	12/8/2022	17	LaSOR 2.0 Grant	Provider Education	Ford Baker	Virtual
Project ECHO: Statutory Holidays Impact the Number of Opioid Related Hospitalizations Among Canadian Adults	12/15/2022	21	LaSOR 2.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
Working with Systematized Delusions	12/16/2022	17	CMHS Set Aside ESMI/FEP	Stanford Master Clinician Series 2022	David Kingdon	Virtual

Project ECHO: The Effects of Methamphetamine and Other Illicit Mood Altering Chemical Subtances on the Brain, Heart and Other Bodily Functions	12/22/2022	13	LaSOR 2.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
Project ECHO: Methamphetamines and Psychosis	12/29/2022	11	LaSOR 2.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
Project ECHO: Medication for OUD	1/4/2023	19	SAPT COVID Supplemental	Provider Education	Shannon Robinson, MD	Virtual
Project ECHO: Preventing Occupational Fentanyl and Fentanyl Analog Exposure to Emergency Responders	1/5/2023	18	LaSOR 3.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
Project ECHO: Serious Mental Illness and SUG in Jail Settings	11/11/2023	23	SAPT COVID Supplemental	Provider Education	Rich V, HMA	Virtual
Project ECHO: Bupe amd Cravings	1/12/2023	21	LaSOR 3.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
Project ECHO: Evidenced-Based Informed Trauma Care	1/18/2023	23	SAPT COVID Supplemental	Provider Education		Virtual
Project ECHO: Case Presentation	1/19/2023	21	LaSOR 3.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
Stanford Master Clinician Series: Introduction to the Power, Threat, Meaning Framework: an alternative to diagnostic models of distress	1/20/2023	2	FEP Grant	Provider Training	Lucy Johnstone and Amanda Griffiths	Virtual

LaSOR Learning Community Session: Words Matter: Recovery, Stigma, and Story Telling and LaSOR 2.0 and 3 GPRA Client Outcome Survey Updates for 2023	1/24/2023	80	LaSOR 3.0 Grant	The purpose of these quarterly sessions is to provide our partners and stakeholders the opportunity to learn and share best practices in their respective areas of expertise.	Katy Penton and Samuel Robinson (LSU SREC)	Virtual
Project ECHO: Detox Protocols Commonly Used in Corrections	1/25/2023	19	SAPT COVID Supplemental	Provider Education		Virtual
Project ECHO: Patient Important Measures of Success	1/26/2023	20	LaSOR 3.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
Icare 2023 10th Annual Prevention Summit	1/30/2023	NA	ICare Advisory Council	Mental wellness, suicide prevention, mindfulness, technology in schools, dealing with trauma	Multiple presenters	Pennington Biomedical Research Center
Project ECHO: Medication Administraton & Diversion Mitigation	2/1/2023	21	SAPT COVID Supplemental	Provider Education	Shannon Robinson, MD	Virtual
Project ECHO: Case Presention, Academic Detailing Materials & Insomnia Management	2/2/2023	18	LaSOR 3.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
Project ECHO: Reentry and Release Planning	2/8/2023	19	SAPT COVID Supplemental	Provider Education	Ben Manaugh	Virtual
Project ECHO: Alcohol and Opioid Overdoses	2/9/2023	18	LaSOR 3.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
Behavioral Health Symposium (Woman's Foundation): "Promoting Justice, Equity and Inclusion of Immigrants in Louisiana While	2/16/2023	264	Mental Health Grant	Become competent about important terminology around immigrants; Discover unique challenges that immigrants face in the U.S.; Examine ethical considerations when delivering	Marcela Hernandez, LMSW	Virtual

Facing a World- Wide Humanitarian Crisis"				services to immigrants; Become aware of local initiatives and resources for immigrant communities		
Project ECHO: Pregnant People and OUD	2/14/2023	9	SAPT COVID Supplemental	Provider Education	Shannon Robinson, MD	Virtual
Project ECHO: Harm Reduction and Low Barriers	2/15/2023	13	SAPT COVID Supplemental	Provider Education	Linda Follenweider	Virtual
Project ECHO: Alcohol and Opioid Overddoses Part 2	2/16/2023	29	LaSOR 3.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
Stanford Master Clinician Series: Treating Sleep Problems in Early Psychosis	2/17/2023	2	FEP Grant	Provider Training	Felicity Waite	Virtual
Project ECHO: Toxicology	2/22/2023	17	SAPT COVID Supplemental	Provider Education	Shannon Robinson, MD	Virtual
Project ECHO: Fentanyl Test Strips	2/23/2023	22	LaSOR 3.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
Community Opioid Symposium (Woman's Foundation): "Louisiana's Opioid Epidemic"	2/27/2023	415	LaSOR 2.0 NCE	Understand the definition, potency and tolerance of Heroin/Fentany, how an overdose occurs, and the statistical analysis of Heroin and Opioid/Fentanyl deaths in East Baton Rouge Parish.	William "Beau" Clark, MD	Virtual
Project ECHO: Identifying SUD- Screening and Assessment- Veterans Court	2/27/2023	18	SAPT COVID Supplemental	Provider Education	Rich V, HMA	Virtual
Project ECHO: Identifying SUD- Screening and	2/28/2023	27	SAPT COVID Supplemental	Provider Education	Rich V, HMA	Virtual

Assessment-Drug Court						
LAHEC Webinar Series: Killing Me Softly	2/28/2023	89	LaSOR 3.0 Grant	This webinar discussed types of opioids, their misuse and overdose death rates in the Black population.	Samuel M. Chesterfield, LPC	Virtual
Project ECHO: The Neuroscience of Stimulant Use Disorder	3/1/2023	27	SAPT COVID Supplemental	Provider Education	Shannon Robinson, MD	Virtual
Project ECHO: Stimulant Use and Impact on Initiation of Treatment for OUD	3/2/2023	27	LaSOR 3.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
Project ECHO: Veterans Ct 2 - SUD and Brain Disease	3/6/2023	12	LaSOR 3.0 Grant	Provider Education		Virtual
Project ECHO: Drug Ct 2 - SUD and Brain Disease	3/7/2023	13	SAPT COVID Supplemental	Provider Education		Virtual
Project ECHO: Judicial Court 2 - Co- occurring SUD and Serious Mental Illness in Justice System	3/8/2023	11	SAPT COVID Supplemental	Provider Education		Virtual
Project ECHO: The Use of Opioids in the Management of Chronic Pain: Synopsis of the 2022 Updated US Dept. of Veterans Affairs and the US Dept. of Defense Clinical Practice Guidelines	3/9/2023	24	LaSOR 3.0 Grant	Provider Education	Chris Patin, MD	Virtual
Project ECHO: Veterans Ct 3 - Medications for SUD	3/13/2023	12	SAPT COVID Supplemental	Provider Education		Virtual

Project ECHO: Drug Ct 3 - Medications for SUD	3/14/2023	15	SAPT COVID Supplemental	Provider Education		Virtual
Project ECHO: MAT in LA DOC	3/15/2023	19	SAPT COVID Supplemental	Provider Education	Shelley Lee	Virtual
Project ECHO: Xylazine Pharmacology Brief	3/16/2023	20	LaSOR 3.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
Stanford Master Clinician Series: Walking With Voices	3/17/2023	2	FEP Grant	Provider Training	Eleanor Longden	Virtual
Project ECHO: Veterans Ct 4 - Alcohol Use Disorder	3/20/2023	10	SAPT COVID Supplemental	Provider Education		Virtual
Project ECHO: Drug Ct 4 - Alcohol Use Disorder	3/21/2023	15	SAPT COVID Supplemental	Provider Education		Virtual
Project ECHO: FQHC 1 - FQHC and Reentry	3/22/2023	17	LaSOR 3.0 Grant	Provider Education	Shelley Lee	Virtual
Community Opioid Symposium (Woman's Foundation): Pharmacy Based Buprenorphine Induction	3/22/2023	343	LaSOR 2.0 NCE	Explain the key elements of a novel collaborative model of pharmacy-based buprenorphine induction; describe the characteristics of the participants in the model; and educate healthcare providers to reduce the stigma, discrimination, financial barriers, and other social/structural determinants of health.	Jeffrey Bratberg, Pharm.D., FAPhA	Virtual
Project ECHO: Xylazine Case Withdrawal	3/23/2023	23	LaSOR 3.0 Grant	Provider Education	George Singletary, MD, MPH	Virtual
Project ECHO: Veterans Ct 5 - Trauma Informed Care	3/27/2023	12	SAPT COVID Supplemental	Provider Education		Virtual
Project ECHO: Drug Court - Trauma Informed Care	3/28/2023	16	SAPT COVID Supplemental	Provider Education		Virtual
Project ECHO: Pregnant People and OUD	3/29/2023	12	SAPT COVID Supplemental	Provider Education		Virtual

Project ECHO: Security and MOUD	3/30/2023	12	SAPT COVID Supplemental	Provider Education		Virtual
Project ECHO: Suboxone in Pregnancy	3/30/2023	23	LaSOR 3.0 Grant	Provider Education	Muhammad Asif Basit, MD	Virtual
Community Opioid Symposium (Woman's Foundation)	4/3/2023	66	LaSOR 2.0 NCE	Suicide Prevention Training, The Opioid Epidemic and Treatments; Partnering Together to Help Those Struggling with Substance Abuse; and The Important Role of Primary Care in the Opioid Epidemic	Brittney Williams- Wright Louis Catadlie, MD; John Nugent; Crystal Breaux; Jan Kasofsky, PhD; Leigh Ann Monredon, C- ANP; and Dr. Rochelle Dunham	Acadiana Area Human Services District 302 Dulles Dr, Lafayette, LA 70506
Project ECHO: Harm Reduction in Primary Care: Focus on Buprenorphine Tx	4/6/2023	26	LaSOR 3.0 Grant	Provider Education		Virtual
Project ECHO: ED Buprenorphine Injectable RCT - Early Results JAMA Article Discussion	4/13/2023	12	LaSOR 3.0 Grant	Provider Education		Virtual
Louisiana Opioid Action Summit: Starting Where the Client is: Guidelines for Harm Reduction Practice	4/19/2023	309	LDH		Sheila Vakharia, Ph.D. MSW	Virtual
Behavioral Health Symposium (Woman's Foundation): Getting to Know the Local Latino Community: Expanding Meaningful Equity in Behavioral Health	4/19/2023	226	Mental Health Grant	Identify Latino community demographics in Louisiana to become more familiar with the local community; leverage information about common behavioral health experience in Latino communities to improve service delivery; and address key social	Maxine Henry, MSW, MBA	Virtual

Service Delivery for Diverse Communities				determinants of health as a tool to overcome barriers to equitable care.		
Project ECHO: ED Perspective on Buprenorphine Initiation	4/20/2023	23	LaSOR 3.0 Grant	Provider Education		Virtual
Stanford Master Clinician Series: Cross Cultural Counseling: American Muslims as a Case Study	4/21/2023	2	FEP Grant	Provider Training	Hamada Altalib	Virtual
LaSOR Learning Community Session: Racial Disparities in Access to and Treatment for Opioid Use Disorder (LSU-HSC) Harm Reduction Portal (OPH)	4/25/2023	74	LaSOR 3.0 Grant	The purpose of these quarterly sessions is to provide our partners and stakeholders the opportunity to learn and share best practices in their respective areas of expertise.	Dr. Jennifer Velander; Dr Rahm Bailey; and Sarah Robertson, OPH	Virtual
Community Opioid Symposium (Woman's Foundation) "'Nah' to Naloxone: The Roles of Risk Compensation Beliefs and Stigma"	4/27/2023	290	LaSOR 2.0 NCE	Identify patients to whom naloxone should be recommended; confidently recommend it without the concern that it will encourage more opioid abuse/abuse; Communicate the need for naloxone while considering potential roles of stigma	Samuel Adeosun, RPh, PhD	Virtual
Project ECHO: Case Studies	4/27/2023	21	LaSOR 3.0 Grant	Provider Education		Virtual

Behavioral Health Symposium (Woman's Foundation): The Power of Human Connection: Strategies to (Re)Connect	5/3/2023	173	Mental Health Grant	Participants will identify the risk factors for loneliness and disconnection, be able to utilize the strategies provided to take steps to reconnect to increase their sense of belonging, and develop steps to implement these strategies within their workplace and through supervision with students.	Traci Lilley, MSW, BACSLCSW	Virtual
Project ECHO: Multicenter Study of Xylazine Cases Presenting in ED's	5/4/2023	24	LaSOR 3.0 Grant	Provider Education		Virtual
Behavioral Health Symposium (Woman's Foundation): Crisis Services	5/10/2023	325	Mental Health Grant	Learn about key aspects of 988 and services offered.	Ann Darling, LCSW Kristin Savicki, Ph.D. Robyn Thomas, Ph.D.	Virtual
Community Opioid Symposium (Woman's Foundation) "High in Plain Sight: Current Drug Culture, Trends, and Identifiers"	5/11/2023	243	LaSOR 2.0 NCE	Identify alcohol and drug use and abuse indicators, Recognize the current drug culture at first observation or interview, and provide education for improved policy and procedures regarding current alcohol and drug abuse prevention and intervention	Officer Jermaine "Tall Cop" Galloway	Virtual
Project ECHO: Case Study: Research Chemicals Substance Use Disorders	5/11/2023	20	LaSOR 3.0 Grant	Provider Education		Virtual
Project ECHO: Motivational Interviewing	5/18/2023	16	LaSOR 3.0 Grant	Provider Education		Virtual

Stanford Master Clinician Series: Metacognitive Training (MCT) for Psychosis	5/19/2023	2	FEP Grant	Provider Training	Jakob Scheunemann	Virtual
2023 LaHEC Annual Professional Development Summit	5/24- 25/2023	176	LaSOR 3.0 Grant	Discuss trending substance use issues, emergent prevention programming, and viable solutions to implement.	Multiple presenters	Pennington Biomedical Research Center
Project ECHO: Sleep Deficiency and Opioid Use Disorder: Treatment, Mechanisms, and Interventions	5/25/2023	20	LaSOR 3.0 Grant	Provider Education		Virtual
Project ECHO: Microdosing Buprenorphine for Acute or Chronic Pain	6/1/2023	18	LaSOR 3.0 Grant	Provider Education		Virtual
Project ECHO: Opioid Blocking 'Vaccines'-What Are They?	6/8/2023	30	LaSOR 3.0 Grant	Provider Education		Virtual
Community Opioid Symposium (Woman's Foundation)	6/8/2023	288	LaSOR 2.0 NCE	The goal of this symposium is to give healthcare providers additional knowledge about the epidemic and to increase their awareness on how they can help manage the crisis	Multiple presenters	Hybrid 537 Cajundome Blvd., Lafayette, LA
Stanford Master Clinician Series: A Culturally-adaptive Approach to Trauma-focused Assessment in People with Psychosis	6/9/2023	2	FEP Grant	Provider Training	Peter Panayi	Virtual

Opioid Action Summit (Woman's Foundation): Addiction IS an Emergency: The Bridge Model of Care	6/12/2023	315	LDH	Begin implementation of CA Bridge Model in Emergency Department; treat overdose and OUD with evidenced-based medications; mavigate patients to ongoing SUD care; create and maintain a culture of care in the emergency department that reduces stigma and meets the patient where they are.	Sarah Windels Arianna Campbell, PA- C Melissa Stainback, Ph.D. Tanya McGee, MS	Virtual
Behavioral Health Symposium (Woman's Foundation): Pediatric Mental Health	6/13/2023	303	Mental Health Grant		Natalie Bunner, LCSW	Virtual
Northeast Delta HSA's 2023 Opioid Summit: Building Resilience for Recovery through Trauma-Informed Care	6/15/2023	281	LaSOR 3.0 Grant	Identify the issues of the epidemic and how it is impacting the NEDHSA catchment area and the opportunity to network and build upon working relationships.	Dr. Monteic Sizer Diane Kelly, LCSW	Virtual and In-Person
Community Opioid Symposium (Woman's Foundation): Ethical Considerations in the Treatment of Suicidal Ideation, Self-Injury, and Substance Use	6/26/2023	308	LaSOR 2.0 NCE	Identify standards of professionalism in the treatment of clients who experience suicidal ideation, self-injury and substance use as coping strategies; communicate knowledge about being nonjudgemental in the treatment of life threatening, therapy interfering, and quality of life-threatening behaviors that are used as coping strategies; define/describe best practices as it relates to confidentiality, mandatory reporting, assessment and planning, and competence; and identify evidence-based practices in treatment of suicidal ideation, self-injury and substance use.	Brynne Angelle, LMSW	Virtual

TOTAL 8,060

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