

**Performance of North Carolina's System
for Monitoring Opioid and Prescription Drug Abuse**

Session Law 2017-57, Section 11F.10.(e)



**Report to the
Joint Legislative Oversight Committee on Health and
Human Services
and
Joint Legislative Oversight Committee on Justice and
Public Safety
and
Fiscal Research Division
by
North Carolina Department of Health and Human
Services**

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INTRODUCTION

Session Law (S.L.) 2015-241, Section 12F.16.(q), updated in S.L. 2017-57, Section 11F.10.(e), *directs the NC Department of Health and Human Services (DHHS) to submit an annual report on the performance of North Carolina's system for monitoring opioid and prescription drug abuse* to the Joint Legislative Oversight Committee on Health and Human Services and the Joint Legislative Oversight Committee on Justice and Public Safety, and the Fiscal Research Division beginning on December 1, 2016, and annually thereafter.

Created by DHHS in 2017, the Opioid and Prescription Drug Abuse Advisory Committee (OPDAAC) serves as the primary vehicle through which opioid and prescription drug abuse is monitored. Comprised of representatives from agencies including, but not limited to, local health departments, healthcare organizations, law enforcement agencies, emergency medicine departments, and regulatory boards. The OPDAAC is also responsible for overseeing the implementation of the Opioid and Substance Use Action Plan (OSUAP). Mandated by G.S. 90-113.75E, the OSUAP was developed to monitor opioid and prescription drug abuse. Version 3.0 of this Plan was issued in May 2021.

This report covers the period August 1, 2022 through July 31, 2023.

OPIOID AND PRESCRIPTION DRUG ABUSE ADVISORY COMMITTEE

The OPDAAC convened on September 23, 2022, December 9, 2022, and March 3, 2023. The meetings were hybrid in-person and virtual events, had an average of 150 attendees per meeting, and covered topics ranging from overdose prevention in historically marginalized communities and overdose prevention in justice involved populations to drug checking as an overdose prevention measure. The NC Summit on Preventing Overdose replaced the Committee's June 2023 meeting, and was a larger conference focused on the use of the NC Opioid Settlements. More than 500 people registered for this event.

Ongoing activities between August 2022 and July 2023 include:

- **Professional Training and Education:** DHHS partnered with the Governor's Institute, Mountain Area Health Education Center, and the National Association of Drug Diversion Investigators to provide training and instruction regarding best practice in opioid prescribing practice, evidenced-based treatment practice, and the use of the controlled substances reporting system to reduce misuse and diversion. These initiatives reached more than 4,000 professionals.
- **Increasing Access to Treatment:** DHHS provided funding to nine local health departments and 17 community-based organizations to provide linkages to substance use treatment for justice involved individuals.
- **Community engagement:** Between August 1, 2022 and July 31, 2023, DHHS continued existing and started new, county-based programs to support local communities in taking action to prevent opioid and prescription drug abuse. The State Opioid Response (SOR) grant supported several programs supporting youth and families, including the Eastern

Band of Cherokee, and campaigns such as the Lock Your Meds campaign, aimed at reducing harm caused by illicit and prescription drugs. The Substance Abuse and Mental Health Services Administration’s Strategic Prevention Framework-Prescription Drugs (SPF-Rx) grant supported a campaign to monitor prescription drug misuse in Robeson, Scotland, Mitchell, Columbus, Caldwell, Wilkes and Surry counties.

OPIOID AND SUBSTANCE USE ACTION PLAN (OSUAP) 3.0

The OSUAP has four overarching priorities:

1. Put equity and lived experiences at the foundation of its work.
2. Prevent future addiction and address trauma by supporting children and families.
3. Reduce harm by expanding the focus beyond opioids to address polysubstance use.
4. Connect people to care by increasing treatment access for justice-involved people, expanding access to housing and employment supports, and recovering from the pandemic together.

Undergirding these four priorities are efforts to **track progress, measure impact, and monitor emerging trends** to ensure that actions are informed by data. The North Carolina OSUAP 3.0 aims to identify impactful, feasible strategies to reduce overdoses in North Carolina and prevent the next wave of the epidemic.

Track Progress

The OSUAP measures success through several key metrics, five of which are outcome-based measuring progress in reducing harm (i.e., overdose deaths and emergency department visits), reducing supply (i.e., dispensed controlled substance prescriptions), and increasing access to treatment.

Overdose Deaths

- In 2022, North Carolina recorded 3,875 overdose deaths, a decrease from 2021, when 4041 deaths were recorded. The number of deaths recorded in 2017, when the plan was developed, was 2,474. The percentage of overdose deaths due to illicit substances was 79.4% in 2022, an increase from 78.3% in 2021. In 2017, the percentage of overdose deaths due to illicit substances was 63.4%

Emergency Department Visits

- In 2022, 16,937 drug-related ED visits were recorded. This was an increase from 2021, when 16,816 drug-related ED visits were recorded.
- While North Carolina witnessed an overall increase in emergency department visits for overdose, those enrolled in opioid treatment programs (OTPs) had overall decreases in self-reported ED visits. After six months of treatment, new OTP patients reported a 38% reduction in ED visits, from an average of 12.1% reporting having visited a hospital ED

during the three months prior to treatment to 7.1% reporting having visited a hospital ED during treatment.

Controlled Substances Prescriptions

- In 2022, 16,153,455 controlled substance prescriptions were dispensed to people residing in North Carolina, and opioids accounted for 35% of dispensations. This is a decrease of 2% compared to 2021, when 16,529,272 controlled substance prescriptions were dispensed (35% of which were opioids). Prescription Drug Monitoring Programs, like the NC Controlled Substances Reporting System (CSRS), were specifically designed to help reduce overprescribing of controlled substances by providing timely information to health practitioners and law enforcement. The increased use of the system, alongside education, are factors contributing to the decrease. In 2018, the number of controlled substance prescriptions dispensed was 18,389,645, of which 40% were opioids¹.

Treatment Service Access

- Between August 1, 2022 through July 31, 2023, a total of 47,789 individuals, comprised of both uninsured or with Medicaid, who had an opioid use disorder received any treatment services. For the previous year, covering a similar time-range (i.e., 08/01/2021 through 07/31/2022), 49,011 individuals (uninsured or with Medicaid) who had an opioid use disorder received any treatment services. When the OSUAP launched in 2017, that number was 36,167.
- Between August 1, 2022 through July 31, 2023, a total of 70,827 individuals were dispensed a prescription for buprenorphine - a medication approved by the Food and Drug Administration (FDA) to treat opioid use disorder. This is an increase from 69,099 from the prior year (August to July 2021-2022), and 46,846 during the period of August 2017 to July 2018². This data excludes data from Opioid Treatment Providers and includes dispensations for other FDA approved uses and off-label use.

CONCLUSIONS

Beginning in 2017, the OPDAAC has advanced and implemented a number of strategies, initiatives and activities to monitor opioid and prescription drug abuse. Advances and successes have been realized in several areas; however, according to limited data in a recent study from the National Institute on Drug Abuse, there was a significant increase in drug use during the COVID-19 pandemic³ In North Carolina, drug overdose deaths decreased in 2018 and 2019, but drastically increased in 2020 and 2021. While data for 2022 shows improvements in several metrics, overdose deaths still remain high.

¹ Controlled Substances Reporting System Annual Legislative Report 2018-2022. These reports cover calendar years from January to December.

² Controlled Substances Reporting System data extract performed 1/17/2023.

³ <https://nida.nih.gov/research-topics/covid-19-substance-use/#increase>

Sustained and enhanced efforts in harm reduction, prevention and treatment services remain necessary to successfully address and mitigate the continued consequences of the opioid epidemic.