Building Capacity for Data-Driven Opioid Policy: The Maryland Chapter 211 Study

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May 10, 2019
Background
The Opioid Epidemic in Maryland

- Maryland is among the top five states with the highest rates of opioid-related deaths.
- In 2017, deaths related to opioids in Maryland more than doubled the national average.
In 2018, the Maryland General Assembly passed HB 922, which became Chapter 211 of the Acts of 2018.

Chapter 211 requires the Maryland Department of Health (MDH) to oversee a comprehensive multi-agency study on the opioid epidemic in Maryland.
Statutory Mandates

1. Examine the prescription and treatment history of individuals in the State who suffered fatal overdoses involving opiates and other controlled dangerous substances over the preceding four calendar years;

2. Collaborate with DPSCS, DHS, DJS, MIEMSS, and the DHCD and other State and local agencies;

3. Beginning July 1, 2019 and each year thereafter, submit a report on the findings of the above examination that describes the data reviewed and provides recommendations on service and program improvement priorities and actions; and;

4. Identify potential funding sources available to support the implementation of the project.
Methods
Chapter 211 Activities, 2018-2019

- Partner engagement and project coordination
  - CRISP
  - Internal MDH coordination
  - Outreach to DPSCS, DJS, and other agencies.
- Grant acquisition
- Development of targeted research questions
Targeted Research Questions

1. What are the characteristics of the population in MD at risk of opioid-related morbidity and mortality?
2. What existing programs are targeting opioid use and misuse? How do they evaluate their outcomes?
3. What is the utilization of behavioral health and related services for people at risk of overdose?
4. What are the methods of intervening with populations found to be at risk of overdose?
5. What are recommendations for improving programs and treatment services?
Findings
Life expectancy in Maryland is declining.
Fentanyl is contributing to increases in overdose fatality rates.
Discussion
Future Directions

- Continue working with state partners to link data at MDH with data from DPSCS, DHS, DJS, MIEMSS, DHCD.

- Establish strong data governance practices to continue to identify populations vulnerable to opioid overdose and monitor impact of policy interventions
Acknowledgements

• Office of the Secretary, Maryland Department of Health
• Behavioral Health Administration, Maryland Department of Health
• Kathleen Rebbert-Franklin
• Sarah Hoyt
• Sydney Rossetti
• PHASE Faculty, Beth Resnick and Paulani Mui


