



**New Jersey Mental Health and Addiction
Providers Meeting**
April 26, 2018



Shereef Elnahal, M.D., M.B.A.
Commissioner
New Jersey Department of Health

DOH Healthcare & Public Health Priorities

**Reduce disparities in
public health outcomes**

**Improve & expand
access to medicinal
marijuana**

**Decrease maternal
mortality &
improve access to
reproductive care**

**Eradicate the opioid
epidemic**

**Increase health
coverage &
lower costs**

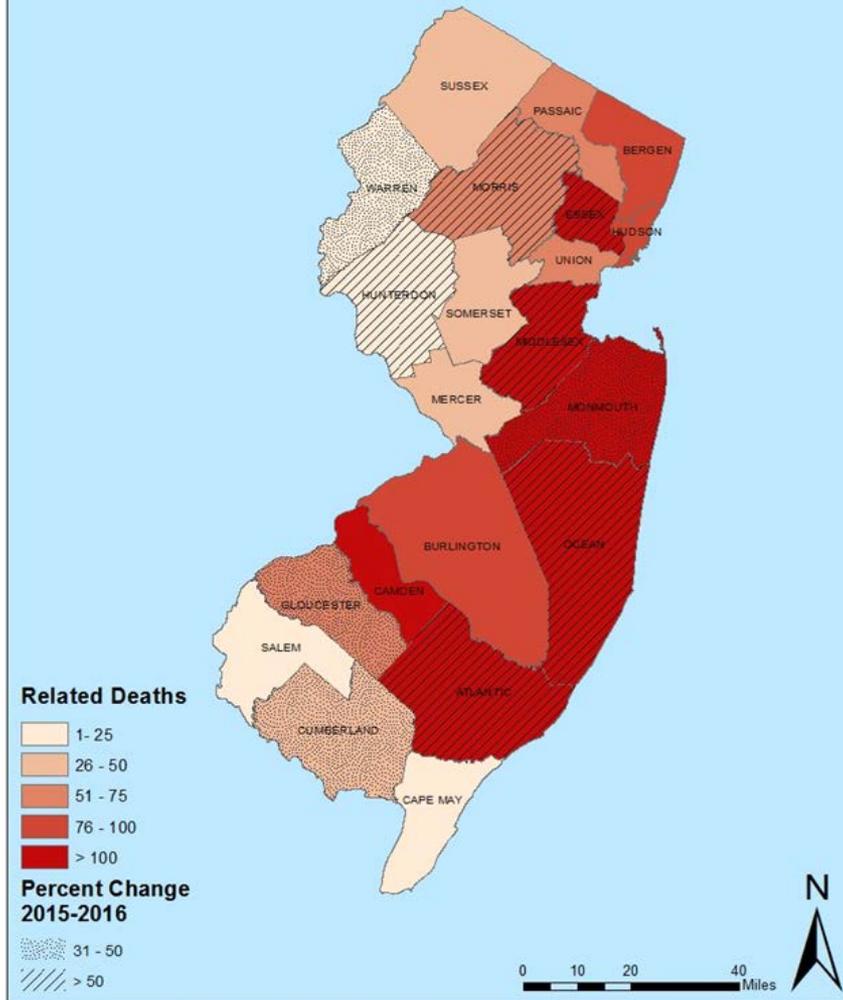
**Enhance access and
quality of mental
health care**

Value-Based Care

Interoperability

Eradicating the Opioid Epidemic

2016 Opioid-Related Deaths



\$100M FY19 Budget

- \$56M - Prevention, Treatment and Recovery
- \$31 Million - Social Risk Factors
- \$13 Million - Infrastructure and Data

June 5 Population Health Opioid Summit

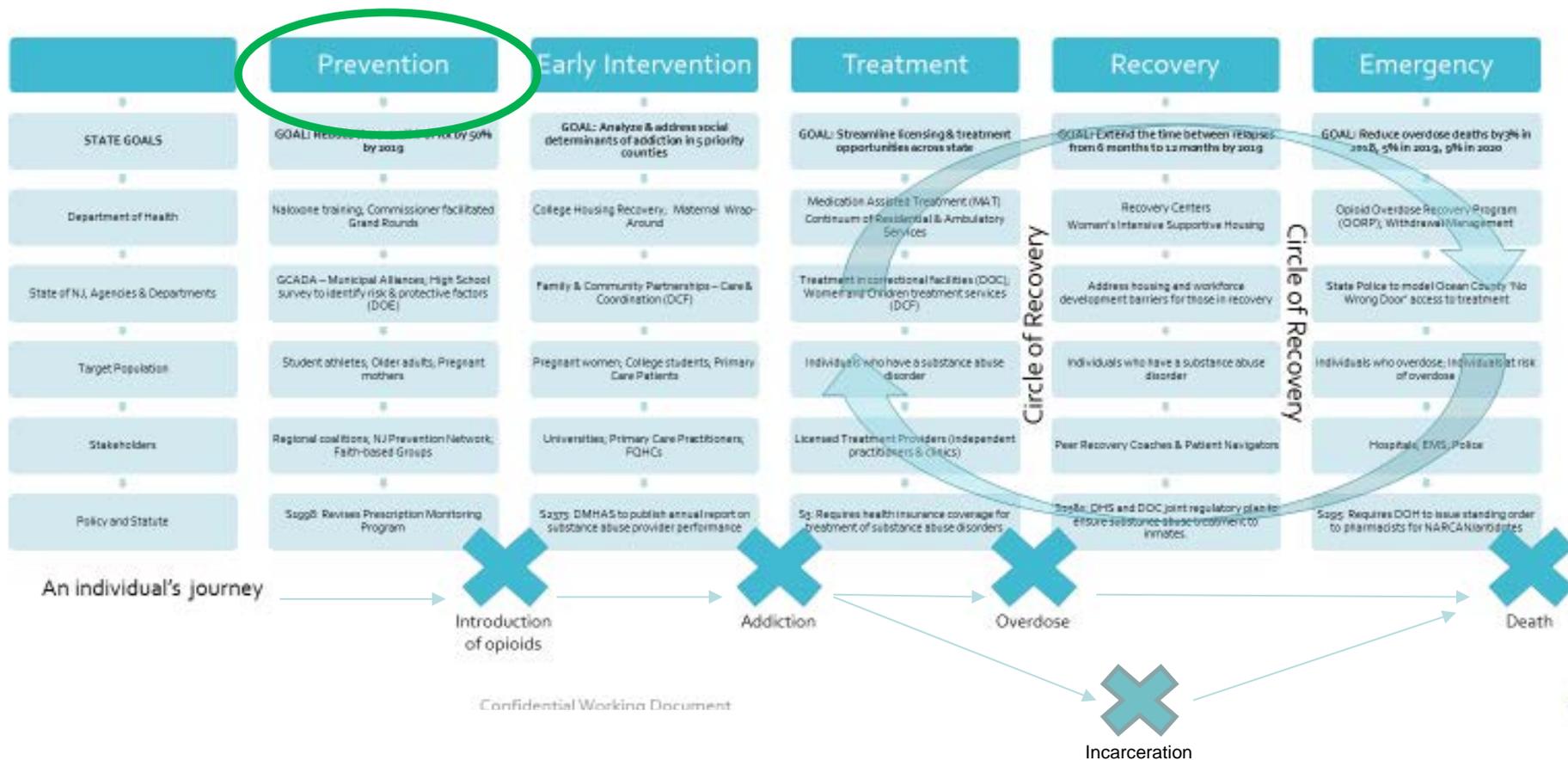
Better Together
AN INTEGRATED APPROACH TO ADDRESS THE OPIOID EPIDEMIC

Save the Date **June 5th 2018**
BRIDGEWATER MARRIOTT
700 Commons Way • Bridgewater, NJ

NJ Health
New Jersey Department of Health

Opioid Addiction journey

Journey Map of Opioid Crisis



Prevention: Expansion of Medicinal Marijuana

Medicinal Marijuana Program

[Home](#) [Patients](#) [Physicians](#) [Caregivers](#) [Alternative Treatment Centers](#) [Program Rules](#) [Review Panel](#)

SPOTLIGHT

Patient Access

An executive order by Governor Murphy and a pending decision on the recommendations of the Medicinal Marijuana Review Panel could affect patient access to medicinal marijuana.



[Learn More](#)



Annual and Biennial Reports

- 2016 Annual Report [pdf 796k]
- 2015 Annual Report and 2015 Biennial Report [pdf 784k]
- 2014 Annual Report [pdf 347k]
- 2013 Annual Report [pdf 867k]
- 2013 Biennial Report [pdf 627k]

Contact Us

Contact our Customer Service Unit at: 609-292-0424 or send us a message.

Frequently Asked Questions

Use the following links to find answers to the MMP's most frequently asked questions. Due to the development of the program, questions and answers are subject to change. Visit this section periodically to stay updated with current information.

- [Patient FAQ's](#)
- [Physician FAQ's](#)
- [ATC FAQ's](#)

In States with Medicinal Marijuana Programs (compared to states without):

- 5.88% lower rate of opioid prescribing (Bradford, et al. *JAMA Int. Med.* 2018)
- 3.742 million fewer daily doses filled (Bradford, et al. *JAMA Int. Med.* 2018)
- **24.8% lower mean annual opioid overdose mortality rate** (Bachhuber, et al. *JAMA Int. Med.* 2014)
- **And importantly... the association strengthens with program expansion**

Prevention: Effect trends stronger with expansion

From: **Medical Cannabis Laws and Opioid Analgesic Overdose Mortality in the United States, 1999-2010**

JAMA Intern Med. 2014;174(10):1668-1673. doi:10.1001/jamainternmed.2014.4005

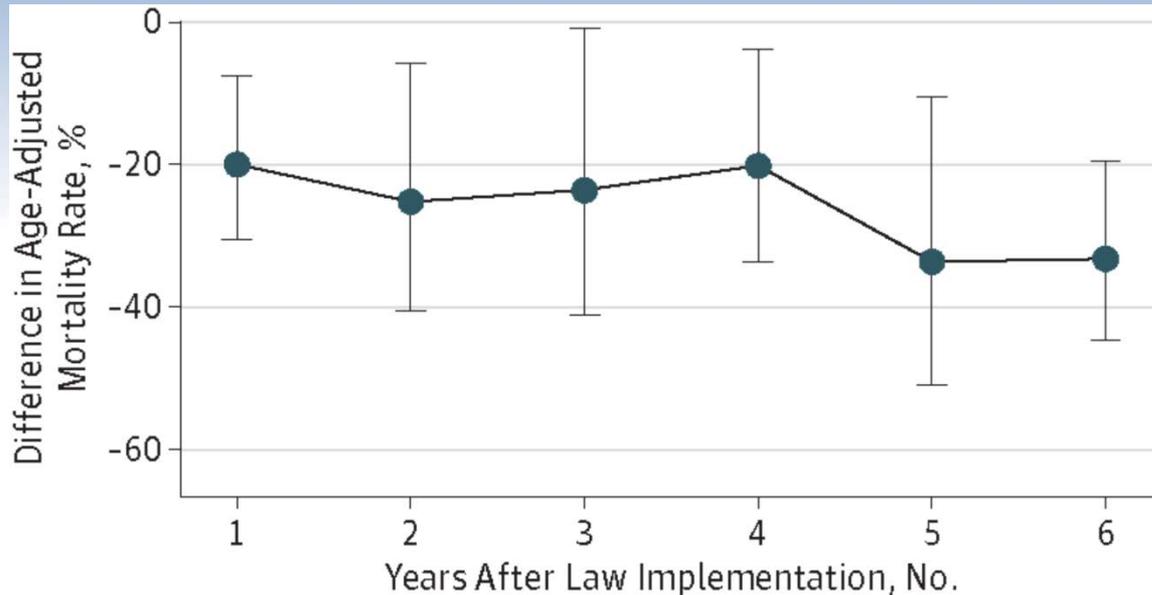
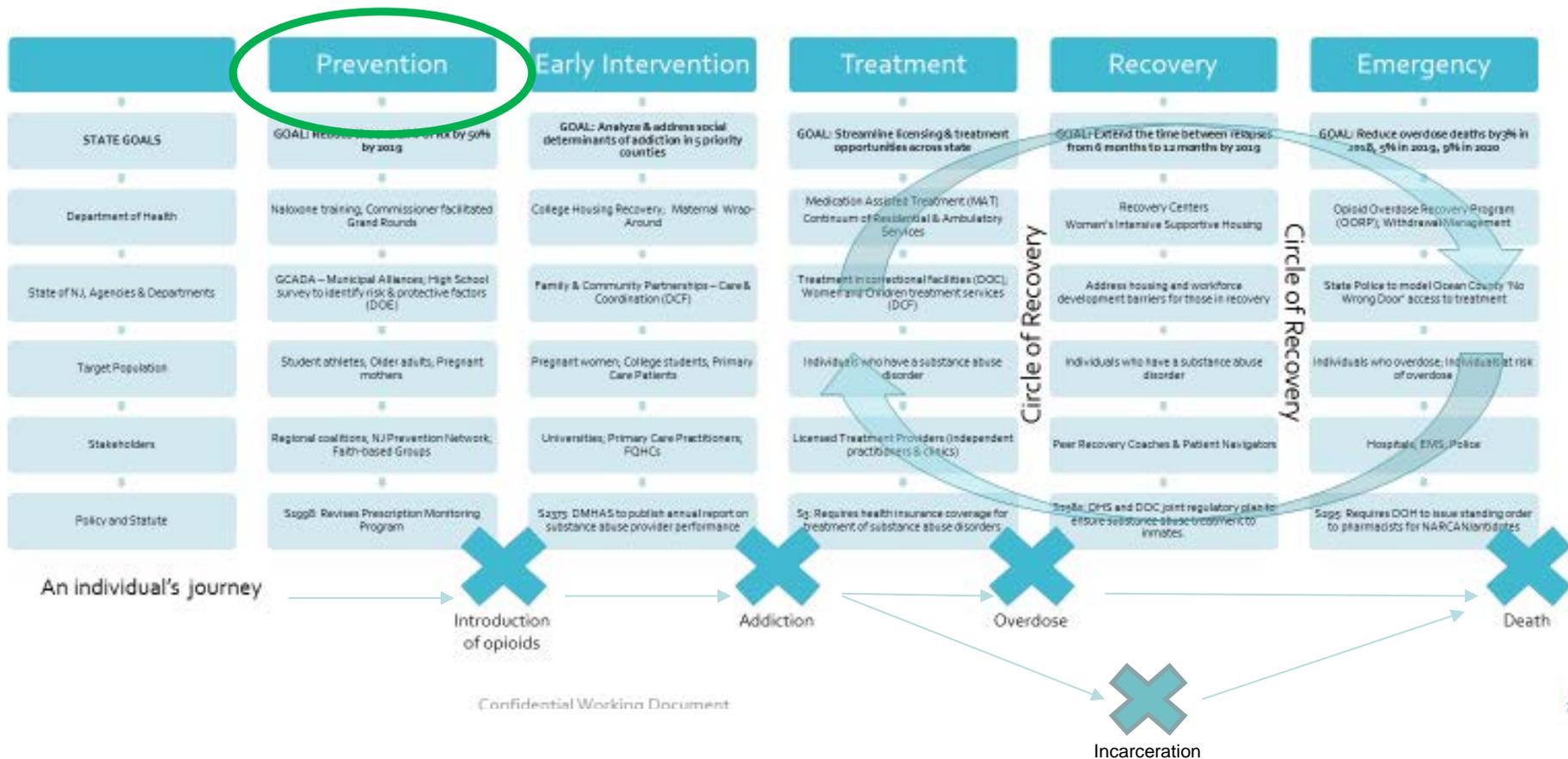


Figure Legend:

Association Between Medical Cannabis Laws and Opioid Analgesic Overdose Mortality in Each Year After Implementation of Laws in the United States, 1999-2010 Point estimate of the mean difference in the opioid analgesic overdose mortality rate in states with medical cannabis laws compared with states without such laws; whiskers indicate 95% CIs.

Opioid Addiction journey

Journey Map of Opioid Crisis



Intervening Before Neonatal Abstinence Syndrome



**Help Yourself...
Help Your Baby...
Get Treatment!**

Prescription pain medications and heroin can harm your baby.

◆ Possible risks to your baby include:

- ◆ premature birth
- ◆ low birth weight
- ◆ birth defects
- ◆ withdrawal symptoms (irritability, seizures, vomiting, diarrhea, fever)

Talk to your doctor about what drugs you are taking.

Get Treatment:
1-844-276-2777 (24/7)
Get #Treated4Baby

nj.gov/health/treated4baby

NJ Health
New Jersey Department of Health

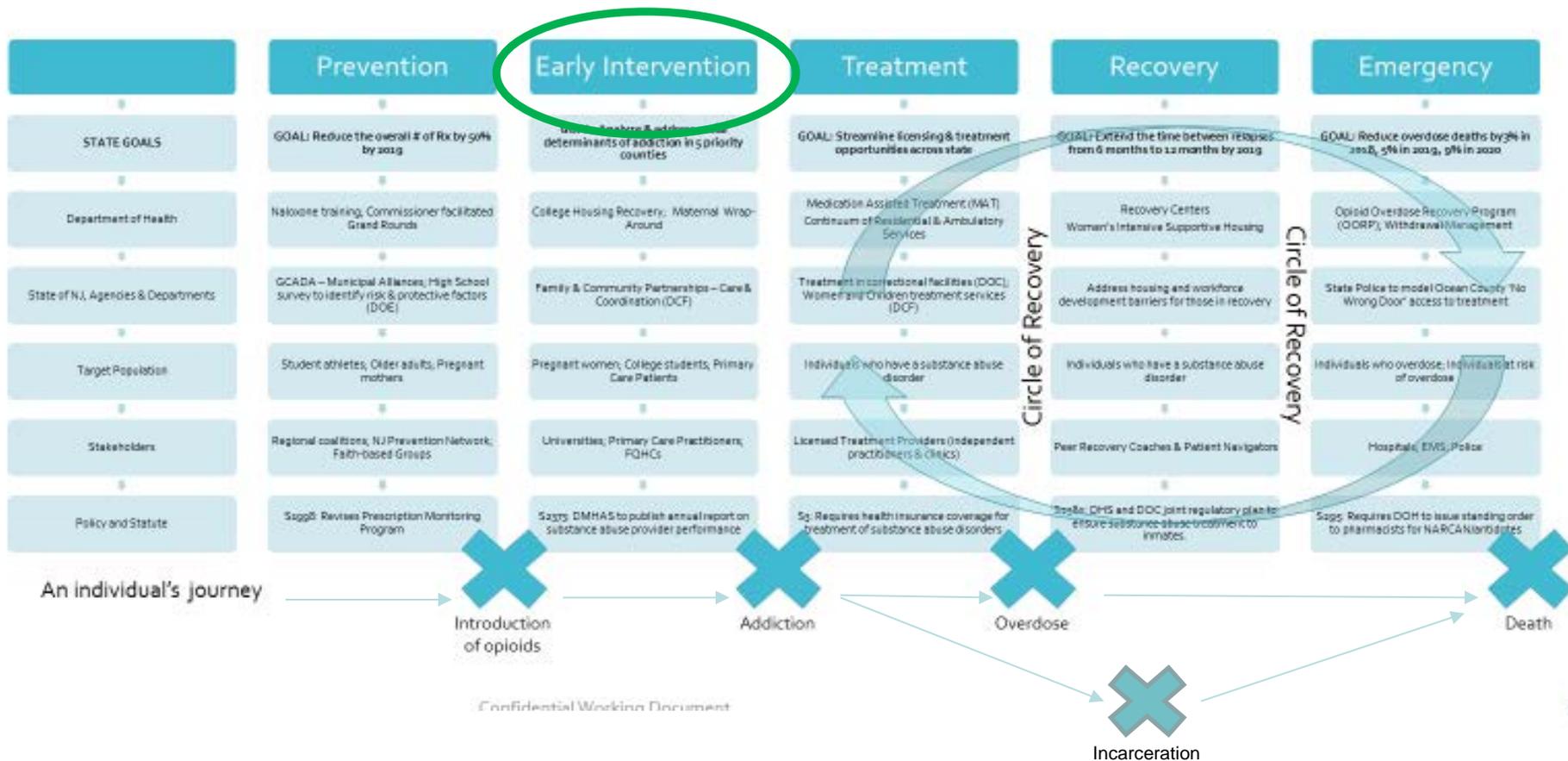


Since 2008, cases of NAS in NJ have doubled to 685 babies diagnosed in 2016

- Most common substances used by NJ's pregnant women:
 - Heroin (59.8%)
 - Other opiates (9.7%)
 - Marijuana (13.5%);
 - and Alcohol (9.3%)

Opioid Addiction journey

Journey Map of Opioid Crisis



Treating “Behind the Wall”

- About 65% of 2.3M U.S. inmates meet medical criteria for substance abuse addiction
 - But only about 11% actually receive treatment
- Risk of death from overdose in 2 weeks following release is **129 times general population.**

DOH Pilot Program

- John Brooks Recovery Center Mobile Van/Atlantic County Jail
- Began in August 2017
 - Served 204 people to date

Source: National Center on Addiction and Substance Abuse Behind Bars II, Substance Abuse and America's Prison Population.

Binswanger IA, Stern MF, Deyo RA, et al. Release from prison—a high risk of death for former inmates. *N Engl J Med* 2007



Treating “Behind the Wall” in Rhode Island

- Rhode Island Department of Corrections – 1st state to offer broad range of therapies & 3 forms of Medication Assistance Treatment (MAT) to all inmates
- Inmates can take methadone or buprenorphine for up to a year
 - Vivitrol is given 1-2 months before release
- Counseling is provided along with MAT & continues after release

Decedents: Recent Incarceration	First 6 Months 2016	First 6 Months 2017	Decrease
YES	26	9	17 (65%)
NO	153	148	5 (3%)
TOTAL	179	157	22 (12%)

Source: Green, et al. Postincarceration Fatal Overdoses After Implementing Medications for Addiction Treatment in a Statewide Correctional System. JAMA Psychiatry; Feb 2018

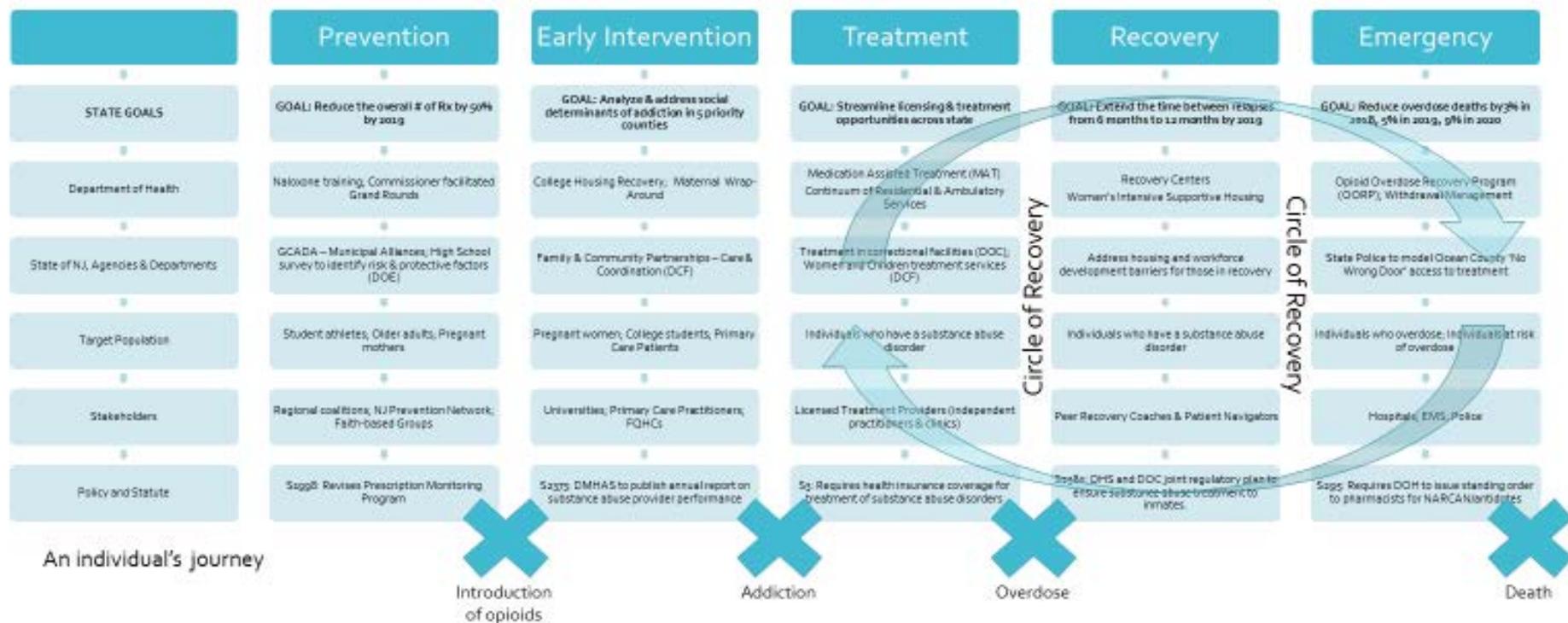


**How can mental health and
addictions treatment
providers help NJDOH meet
its public health objectives?**



1. Provide your best practices for each stage of the addiction journey.

Journey Map of Opioid Crisis

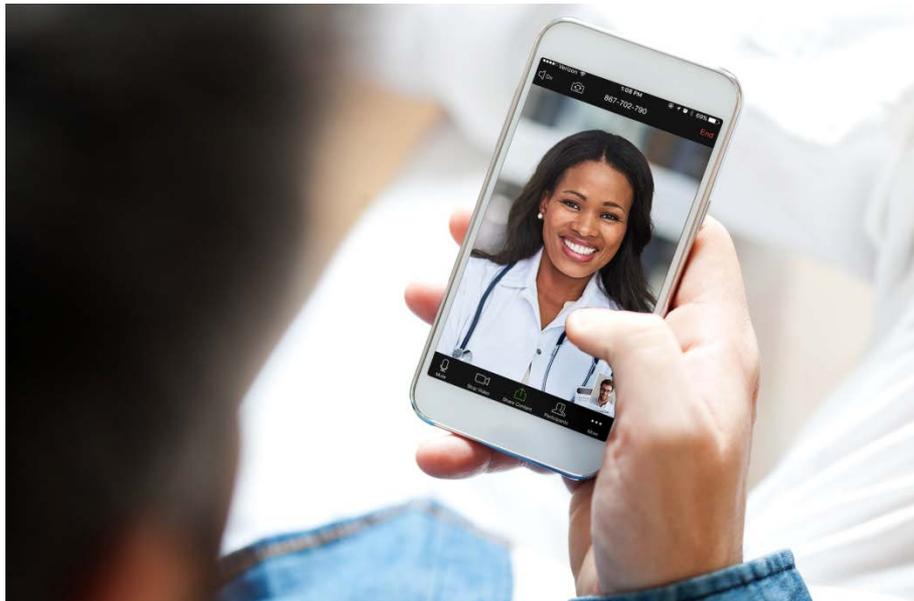


2. Provide your best practices for safe, high-quality inpatient mental health care.

- **Operational tool kits that have led to superior results in your institutions, in the following areas:**
 - Minimizing inpatient suicide risk and optimizing mental health environment of care standards
 - Minimizing patient-to-patient violence
 - Offer a safe, rewarding and attractive professional working environment for providers, staff and management
 - Fast, innovative recruitment and hiring of health care providers
 - Strategies to incorporate use of APNs & PAs
 - Ongoing/focused professional practice evaluations (OPPE/FPPE)
 - JCAHO/Medicare Accreditation success
 - Function as a collaborative partner in continuum of inpatient and outpatient BHS and community support services
 - Support workforce development for professionals at all levels
 - Support and encourage innovation in care delivery

Interoperability: The Case for Patients and Caregivers

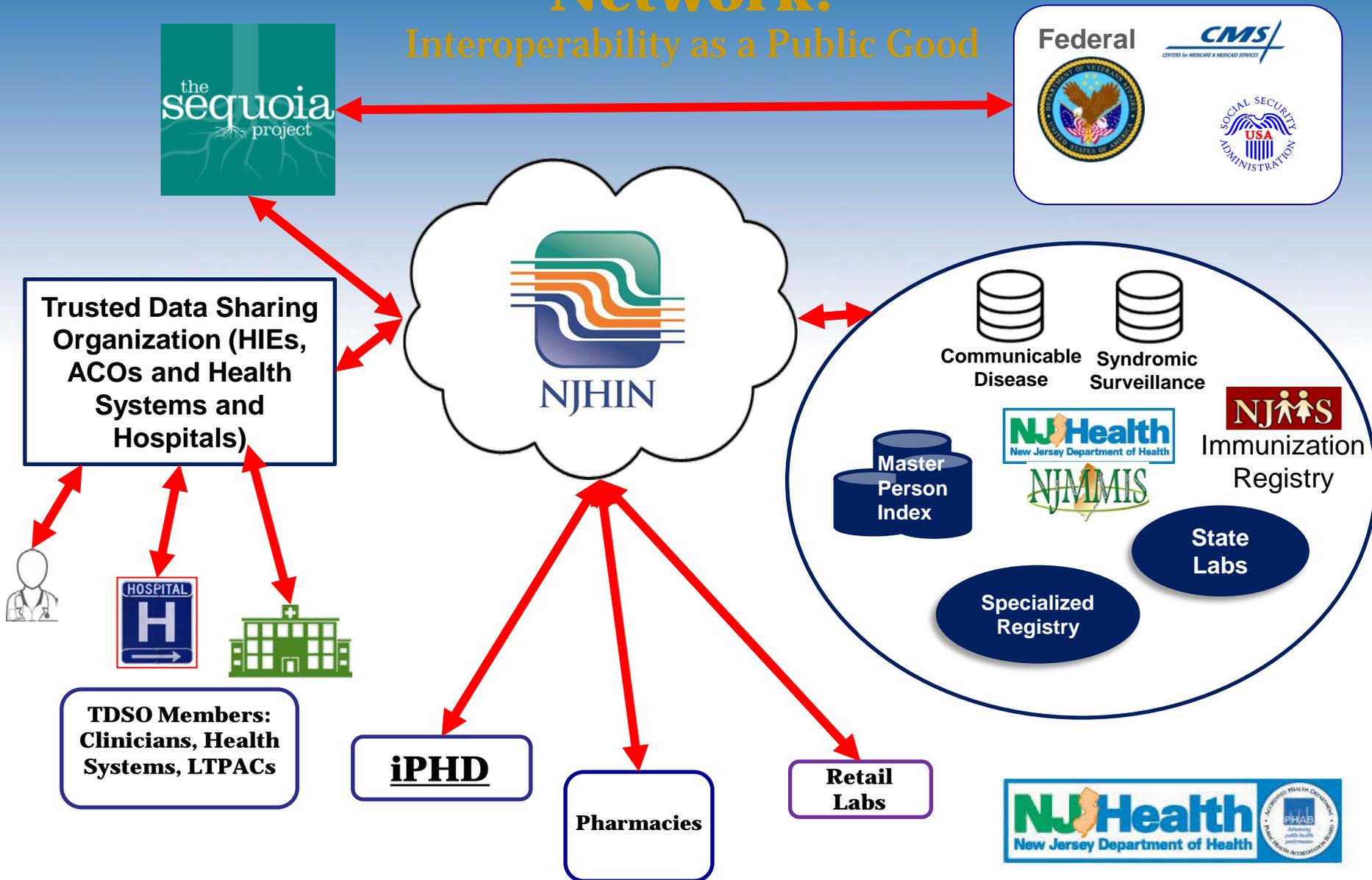
Your family member? →



← You?

New Jersey Health Information Network:

Interoperability as a Public Good



3. What electronic health record (EHR) would you recommend?

- **Inpatient care?**
- **Outpatient care?**
- **Comprehensive solutions?**

Division of Mental Health and Addiction Services

[Home](#)[Hotlines](#)[FAQs](#)[Fee for Service](#)[County & Local Administrators](#)[Publications and Reports](#)[Services and Treatment](#)

IN THE NEWS

NJMHAA Recognizes Mielke

Valerie Mielke, Assistant Commissioner of DMHAS, has been honored by the New Jersey Association for Mental Health and Addiction Agencies (NJAMHAA) for her leadership.

[More](#)

Frequently Visited

DMHAS Program Area Phone List

- Administrative Bulletins
- Crisis/Screening Centers
- Intoxicated Driving Program
- Public Notices
- Licensing
- Hotlines
- Contracting
- Funding Opportunities
- Forms
- File a Complaint
- Governor's Council on Mental Health Stigma
- Governor's Council on Alcoholism and Drug Abuse
- DMHAS Reorganization Plan

[Suicide Prevention Resource Page](#)[State Psychiatric Hospitals](#)[Upcoming Meetings and Events](#)

For more information visit:

www.nj.gov/health

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