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**Supporting Evidence-informed Policies to
Increase Harm Reduction & Substance Use
Treatment Access in California
— *Researcher Perspective***

Erika Crable, PhD, MPH

Assistant Professor

Department of Psychiatry

University of California San Diego

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ACKNOWLEDGEMENTS

AGENDA

1. Research to policy gap
 - ...Has drastic consequences for SUD service access
 - ...Is problem researchers have the tools to solve
2. Dissemination & implementation science (D&I) x policy approaches
3. Recommendations for policy & use driven SUD research



RESEARCH TO POLICY GAP

The failure to translate research findings into real-world, evidence-informed policies



RESEARCH TO POLICY GAP

Population- & individual-level harms from non-evidence-based care

- Prevalence of low-value healthcare services^{1,2}
 - Non-evidence-based services
 - Scans, lab tests, inappropriate prescribing
- 30% of care provided in the US constitutes unnecessary services²
- **But what happens when the research to policy gap blocks access to care?**

UNMET NEED FOR SUD TREATMENT³ – A CONSEQUENCE OF THE RESEARCH TO POLICY GAP

- Policy gaps occur at multiple levels to hinder access to quality substance use treatment and harm reduction services
- 19.1% of Americans (54.2 million) need substance use treatment
 - Highest need among young adults (18-25 years)
- Of those needing services, only 14.6% received any treatment in the past year
 - Mostly outpatient
 - Very little medications for addiction treatment
- 85.4% of those needing care did not receive any treatment



**If we have evidence-based practices,
why aren't people able to access them?**

SOME GAPS ARE CLOSING (IN CALIFORNIA)

Ex. Contingency management programs are associated with reduced substance use⁴ & abstinence⁵

- No FDA-approved medication for stimulant use disorder
- Multiple federal policy barriers
- Between 2020-2021: 37% increase in rate of overdose deaths involving stimulants⁶

CA Recovery Incentives Program (1115 waiver)

- Medi-Cal beneficiaries can participate in a 24-week outpatient program & ≥ 6 weeks of recovery support services

Federal policy has not caught up with science & poses barriers to delivering contingency management services:

- Antikickback Statute
- Beneficiary Inducement Statute
- Physician Self-Referral Law/Stark Law

CALIFORNIA HAS A TRACK RECORD OF USING 1115 WAIVERS TO CLOSE RESEARCH TO POLICY GAPS IN SUD SERVICES

- 1115 waivers = flexibility in the design of Medicaid benefits, eligibility, payment
- CA's DMC-ODS program was the first SUD 1115 demonstration
 - First to adopt a continuum of care modeled on best practices set by the American Society of Addiction Medicine
 - Expanded residential treatment access
 - Focused on meeting individuals where they are
- Became the benchmark for other states

RESEARCH ARTICLE | AUGUST 01 2022

How Do Medicaid Agencies Improve Substance Use Treatment Benefits? Lessons from Three States' 1115 Waiver Experiences



Erika Crable; David K. Jones; Alexander Y. Walley; Jacqueline Milton Hicks; Allyn Benintendi; Mari-Lynn Drainoni

J Health Polit Policy Law (2022) 47 (4): 497–518.

Crable et al. *Implementation Science* (2022) 17:3
<https://doi.org/10.1186/s13012-021-01182-4>

Implementation Science

RESEARCH

Open Access

Translating Medicaid policy into practice: policy implementation strategies from three US states' experiences enhancing substance use disorder treatment

Erika L. Crable^{1,2*}, Allyn Benintendi³, David K. Jones⁴, Alexander Y. Walley³, Jacqueline Milton Hicks⁵ and Mari-Lynn Drainoni^{4,6}

BUT SOME RESEARCH TO POLICY GAPS PERSIST

Harm Reduction

- 56 authorized syringe service programs in CA
 - but half of the state lacks access
- Public health preemption challenges
- Overdose prevention centers are not legal

Need for a Health in All policies evidence approach throughout policy implementation

- Executive order to remove homeless encampments
 - *Research: Increased rates of HIV among people who use drugs following encampment closures⁷*
- Passage of Prop 36 increases penalties for theft & drug crimes, creates a drug court program
 - *Research: Harsher sentences do not reduce reoffending, recidivism⁸*

THE SACRAMENTO BEE



Ban on needle exchanges in El Dorado County halted by judge as state lawsuit continues

BY JENNAH PENDLETON
JUNE 15, 2024 3:43 PM | 

Los Angeles Times

Newsom orders California agencies to clear homeless camps, but the impact remains a question

Why Californians got tougher on crime: Bleak downtowns and attention-getting retail thefts

  BY NIGEL DUARA AND JOE GARCIA
NOVEMBER 6, 2024 UPDATED NOVEMBER 7, 2024

THE RESEARCH TO POLICY GAP...



Weak dissemination plans, outcomes reported in language that is not useful



Little relevance to current policy issues (not talking to or partnering with policymakers)



Overshadowed by special interest groups

...IS (PARTIALLY) A RESEARCHERS' PROBLEM TO SOLVE

'If they would just use the evidence...'

A dangerously naïve view of policymakers and the policymaking process



- Policy is shaped by several interests
 - Evidence – IF researchers do a good job communicating data they need, in the right way, at the right time
 - Finances
 - Political capital
 - Personal values of policymakers
 - Societal values

RESEARCH TO POLICY GAP

- *'Evidence-based policy'* = wrong expectation
 - Many competing inputs during the policymaking process
 - Multi-level factors: Costs, constituents, values/norms, politics, special interest groups...
 - Evidence (with challenges)
- Policy succession & incrementalism
- Policymaking & implementing is non-linear, shaped by policy networks (not just leaders/officials)

Research is irrelevant to policy questions

Low capacity to search for, interpret, use research

Outcomes are unclear, jargon

Low trust, no relationships with researchers

Low managerial support to use research

WE'RE NOT DOING A GREAT JOB COMMUNICATING OUR RESULTS & RIGOR IN RELATABLE WAYS (A DISSEMINATION PROBLEM)

Trust is high, but decreasing⁹

- 73% of US adults have a great deal or fair amount of trust in scientists to act in the public's interest
 - Great deal ratings: 39% in 2020; 23% in 2023

Confidence is decreasing⁹

- 27% of Americans do not have too much or no confidence in scientists
 - Increase from 12% in 2020

Investment in science is still strong⁹ – for now

- 78% of Americans say government investment in scientific research is worthwhile for society (stable over years)

WAITING FOR POLICY WINDOWS

Kingdon's Multiple Streams Framework

- Three streams need to come together for policy change to happen
 - Problem
 - Policy
 - Politics
- Great for observing what happened, what might happen based on observed factors
 - *but what if we use science to open them & expand service access?*



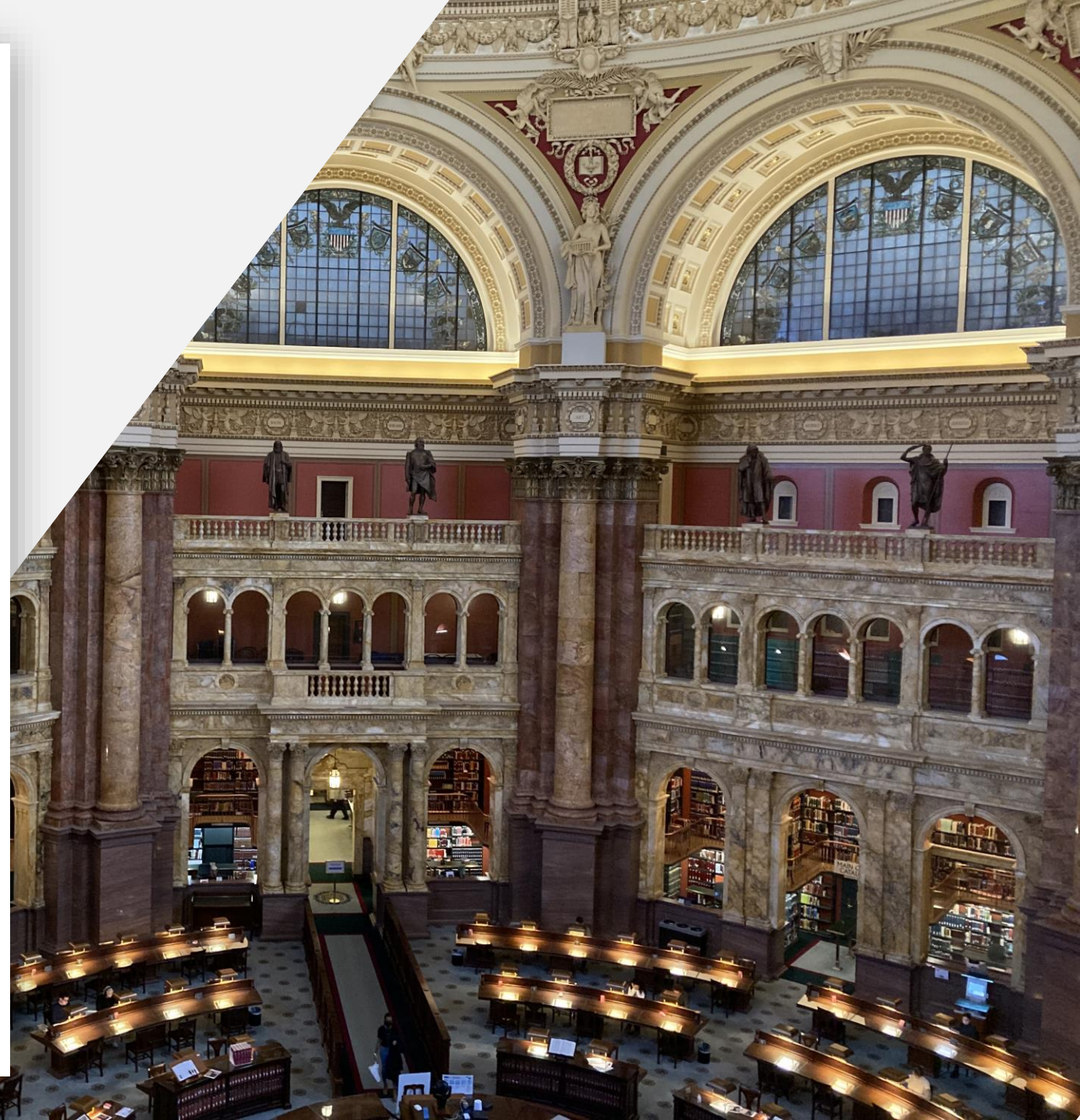
DISSEMINATION SCIENCE:

“Scientific study of targeted distribution of information & intervention materials to a specific public health or clinical practice audience”¹⁰

POLICY DISSEMINATION SCIENCE:

Investigates the most effective processes for communicating evidence to policymakers so that it is used in decisions that impact public health¹¹⁻¹²

Sources: **(10)** NIH, <https://grants.nih.gov/grants/guide/pa-files/PAR-19-274.html>. **(11)** Hoagwood KE et al. Aligning dissemination and implementation science with health policies to improve children’s mental health. *Am Psychol.* 2020;75(8):1130-1145. **(12)** Brownson RC et al. Implementation science should give higher priority to health equity. *Implement Sci.* 2021;16(1):1-16.



The background of the slide is a photograph of a grand, ornate interior space, likely a government building or a museum. It features high ceilings with intricate murals and decorative elements, including a central archway with a small plaque that reads "FOR A WEB BEGUN GOD KNOTS THE AD". The architecture is characterized by classical columns and arches, with a color palette of gold, green, and red accents on a light background.

IMPLEMENTATION SCIENCE:

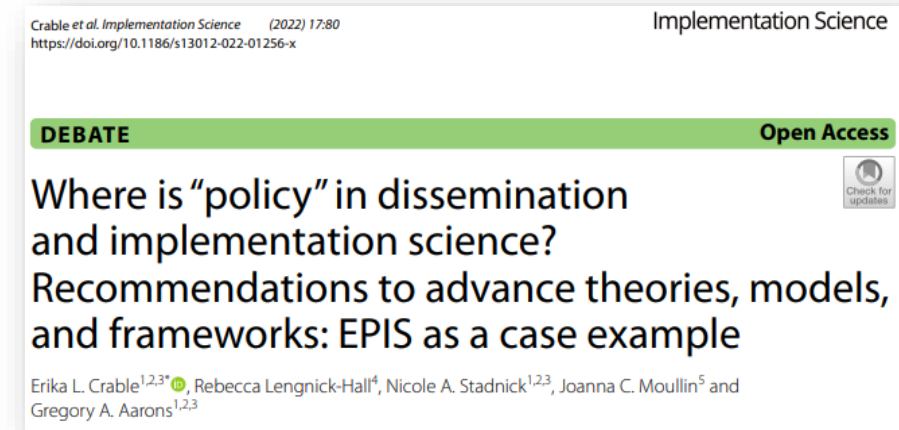
“Scientific study of the use of strategies to adopt & integrate evidence-based health interventions... to improve individual outcomes & benefit population health”¹⁰

POLICY IMPLEMENTATION SCIENCE:

Investigates effective strategies and processes by which evidence-informed policies are put into routine practice¹¹⁻¹²

CORE ELEMENTS OF (POLICY) D&I RESEARCH TO INCREASE ACCESS TO SUD SERVICES

- 1. SUD Care/Quality Gap**
- 2. Implementation Object** (e.g., evidence-informed policy)
- 3. Framework to Guide Study Design, Instruments**
 - Tool to help identify relevant stakeholders
- 4. Dissemination or Implementation Strategy**
 - The 'how to' of changing practice
 - Specific methods for initially adopting & sustaining the implementation object
 - Requires understanding the underlying mechanism of why it will work
- 5. Dissemination/implementation outcomes**
 - Acceptability
 - Adoption
 - Appropriateness
 - Awareness
 - Implementation Costs
 - Feasibility
 - Fidelity
 - Reach



MEDICATIONS FOR OPIOID USE DISORDER (MOUD)



Every fatal overdose is a preventable death.

MOUD use is associated with

- Reduced opioid misuse¹³⁻¹⁴
- Reduced overdose¹⁵⁻¹⁶
- Reduced opioid-related morbidity¹⁵⁻¹⁶
- Increased treatment retention¹⁷
- Recovery for adults and youths¹⁸

Only 48% adult & 4.7% youth Medicaid/CHIP members living with OUD receive MOUD¹⁹

MISALIGNMENT BETWEEN POLICY & EVIDENCE²⁰

Effectiveness Evidence for MOUD
+ Evidence-Informed Policy
≠ Access to MOUD for Medicaid members

Federal policy

- SUPPORT Act (federal policy) requires MOUD coverage

State policy

- Medicaid agencies have flexibility in how they design & implement benefits
- Which formulations are covered, how much

Organizational policy

- Medicaid managed care organizations (MCOs)
- State variation in MCO coverage and prior authorization policies
- In CA – all MCOs cover all 3 MOUD but prior authorization policies differ by plan

PolicyWISE Survey

Working to Improve how Scientific Evidence is communicated to policymakers

Funded by the National Institute on Drug Abuse

- » National survey
- » Decision-makers at 56 Medicaid agencies & contracted managed care organizations
- » Empirically identify groups of agencies with similar evidence use processes, behaviors, preferences
- » Tailor policy dissemination strategies to each group of agencies

Primary Research Questions:

- What factors & intermediaries influence MOUD benefit design? Where does evidence fit in?
- Do tailored dissemination strategies improve the use of evidence in MOUD coverage decisions?

TRANSLATING EVIDENCE USE BEHAVIORS INTO DISSEMINATION STRATEGY FEATURES

- Survey data to empirically design dissemination strategies, tailored to different agencies
 - Takes researchers' a priori ideas out of the equation
- Deliver (mis)matched strategies to agencies
 - Do tailored dissemination strategies improve the use of evidence in MOUD coverage decisions?
- Testing the utility of dissemination strategies
 - Acceptability: satisfaction with content, delivery method
 - Appropriateness: relevance, usefulness of evidence for policy benefit decisions
 - Feasibility: practicability for using presented evidence when revising MOUD benefits

WE NEED MORE POLICY-USE INSPIRED RESEARCH QUESTIONS

- Timely intervening, not just observing at the policy-level
 - Not only studying the impact of a policy
 - More studying the impact of evidence in the policy formation phase
- Engage with policymakers & policy-making institutions
 - Learn the language

RECOMMENDATIONS FOR PURSUING POLICY & USE DRIVEN RESEARCH



Work Locally

- Local needs might look different from state needs
- Local concerns might differ
- Don't sleep on local Board of Supervisor, City Council meetings



Be a Sentinel

- New trends in illicit drug supply = new treatment & harm reduction service needs
- Policy surveillance to identify opportunities to share evidence



Know the Stakeholders

- Understand how SUD care delivery systems work
- Know the landscape of work already being done to avoid duplication & instead spread, scale-up what works



Prioritize Equity

- Equitable access to quality programs
- Think about costs, location, populations

RECOMMENDATIONS FOR PURSUING POLICY & USE DRIVEN RESEARCH

Build Relationships with Policymakers

- Cold calls
- Ratio of asks to offers
- Show up, know what's going on
- Figure out who is in the room
- Ask which outcomes matter most – you may need to negotiate priorities with funders

Things to Avoid

- Not getting involved because of 'politics'
- Telling people they are wrong
- Myth & fact presentation – people remember the myths
- Thinking conferences, peer-reviewed articles are enough

The background of the slide is a scenic coastal landscape. On the left, there are brown, brushy hills leading up to a concrete bridge. In the distance, there are green mountains under a blue sky with scattered white clouds. On the right, the ocean is visible with waves crashing against a rocky shore. The overall scene is bright and clear.

THANK YOU!

Erika Crable, PhD, MPH
UC San Diego
ecrable@health.ucsd.edu
[@ErikaCrable.bsky.social](https://www.bsky.social/ErikaCrable)