The Bureau of Drug and Alcohol Services (BDAS) administers an array of initiatives and services including:

► Prevention Services Unit
  • Population Level Strategies (supporting local communities in taking a public health approach)
  • Prevention Direct Services

► Clinical Services
  • Impaired Driver Programming (regulatory)
  • Crisis Intervention Services (Treatment locator / crisis line / regional access points)
  • Specialty substance Use Disorder (SUD) services
  • Withdrawal Management (WM) / Medication Assisted Treatment (MAT)
  • Opioid Treatment Programs (OTP) – regulatory
  • Recovery Support Services

► Resources and Development (service capacity / training / technical assistance)

► BDAS serves as a subject matter resource within DHHS, to other State Agencies and to other state & community stakeholders.
Types of Clients and Services

### General population / Individuals at risk for misuse:

**Services include:** Population level prevention strategies / prevention direct services  
**Client Eligibility:** General population / individuals across the life span at risk for misuse of alcohol and drugs with a priority focus on youth and young adults and with a growing emphasis on early childhood.

### Individuals misusing alcohol and drugs who may not yet be addicted:

**Services include:** Juvenile Diversion Programming / Impaired Driving Services (regulatory oversight)  
**Client Eligibility:** Youth involved with the juvenile justice system / Individuals convicted of an impaired driving offense.

### Individuals diagnosed with a substance use disorder including priority populations:

**Services include:** Crisis Intervention services / specialty Substance Use Disorder treatment services / Medication Assisted Treatment / Recovery Support Services.  
**Client Eligibility:** Individuals with a substance use disorder below 400% of Federal Poverty Level (sliding fee) that do not have insurance or their insurance does not cover the type of treatment services needed.

Service Gaps Analysis / Program Capacity Development / Workforce Development
## Caseload – Bureau of Drug and Alcohol Services

<table>
<thead>
<tr>
<th>Year</th>
<th>Prevention Services</th>
<th>Gov. Commission</th>
<th>Clinical</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td>1,717</td>
<td>2,190</td>
<td>1,671</td>
<td>5,578</td>
</tr>
<tr>
<td>2013</td>
<td>1,748</td>
<td>1,788</td>
<td>9,500</td>
<td>13,036</td>
</tr>
<tr>
<td>2014</td>
<td>8,926</td>
<td>2,552</td>
<td>9,872</td>
<td>21,350</td>
</tr>
<tr>
<td>2015</td>
<td>14,914</td>
<td>4,305</td>
<td>9,238</td>
<td>28,457</td>
</tr>
<tr>
<td>2016</td>
<td>11,360</td>
<td>15,478</td>
<td>10,413</td>
<td>37,251</td>
</tr>
<tr>
<td>2017</td>
<td>17,515</td>
<td>15,478</td>
<td>10,413</td>
<td>43,406</td>
</tr>
</tbody>
</table>

Does not include caseload numbers for additional funding made available from SB 533 (provided in other slide)
BDAS Contract Performance Monitoring & Data Sources

Contract Performance:
Contracts administered by BDAS include a number requirements, including:

• Performing certain service functions that are required to meet particular practice standards as outlined in the scope of work (exhibit A), including:
  • Evidence based practices
  • Performed by staff that are required to be certified, licensed or otherwise meet training and practice standards
  • Report on identified outcomes
• The Department of Health and Human Services has instituted Department wide mechanisms to monitor performance and fiscal management of contracts.

Examples of Data Sources / Metrics:
• National Outcome Measures as from the Federal Block Grant (SAMHSA)
• Metrics as identified under Senate Bill 533
• Utilizes data sources that include NH specific data to inform policy and services
Outcomes – Substance Misuse Prevention

NH Youth Risk Behavior Survey

Substance Use Prevalence Trends; 2005 - 2015
High School- Aged Youth

- Drank alcohol before age 13
- Alcohol Use in the Past 30 days
- Binge Drinking in the Past 30 days
- Marijuana use in the Past 30 days
- Prescription Drug Use in the Past 30 days (Use Rx drug not prescribed to you)
Outcomes – Substance Use Disorders Treatment

Treatment Outcomes
State Contracted Treatment Services, 2016

- Alcohol Abstinence: 31.2% at Admission, 56.5% at Discharge
- Drug Abstinence: 28.6% at Admission, 51.6% at Discharge
- Employment and School Participation: 26.0% at Admission, 32.3% at Discharge
- No Criminal Justice Involvement: 89.9% at Admission, 95.6% at Discharge
- Stable Housing: 55.0% at Admission, 67.0% at Discharge
- Peer Support Participation: 43.0% at Admission, 74.4% at Discharge
Delivery System

13 Regional Public Health Networks

Public Awareness & Information

Training & Technical Assistance

School and Community Based Substance Misuse Prevention Services

Community Based Juvenile Diversion Programs

Impaired Driver Intervention Programs

Crisis Intervention Services: Crisis Line (1-844-711-HELP) / Regional Access Point Services / Hospital ED Services / Naloxone Program

15 Specialty Substance Use Disorders (SUD) Treatment Service Providers

Opioid Treatment Programs (Methadone Clinics) – Regulatory Oversight

Peer Recovery Support Services

Note: pending final approval by CMS and subject to change
<table>
<thead>
<tr>
<th></th>
<th>Funds Appropriated to Governor’s Commission Org and made available under SB 533</th>
<th>Appropriation SFY-17</th>
<th>SB 533 SFY-17</th>
<th>Total Funding SFY-17</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Susbstanbce Use Disorders Treatment (SUD) Services</td>
<td>$ 1,419,697</td>
<td></td>
<td>$ 1,419,697</td>
<td>Supporting evidenced based treatment services in contracts with 15 agencies across the state, serving approximately 900 individuals per year in a variety of modalities (residential, Intensive outpatient and outpatient services). &lt; use of alcohol and drug use and justice involvement and &gt; rates of employment and stable housing</td>
</tr>
<tr>
<td>2</td>
<td>Recovery Support Services and Infrastructure</td>
<td>$ 500,000</td>
<td>$ 116,000</td>
<td>$ 616,000</td>
<td>Recovery community Center operations and to develop capacity for the provision of community based peer recovery support services</td>
</tr>
<tr>
<td>3</td>
<td>Peer Family Support Services</td>
<td>$ 105,000</td>
<td>$ 105,000</td>
<td></td>
<td>18 Parent Support Groups across the state. Average of 19 parents attending each of 18 groups each month</td>
</tr>
<tr>
<td>4</td>
<td>Prevention Direct Service</td>
<td>$ 819,327</td>
<td></td>
<td>$ 819,327</td>
<td>Projecting to serve 4,100 youth and 3,370 parent in SFY-18</td>
</tr>
<tr>
<td>5</td>
<td>Life of an Athlete - School Based Substance Misuse Prevention Program</td>
<td>$ 250,000</td>
<td></td>
<td></td>
<td>Projecting to serve 1,980 students. LoA schools reporting &lt; % of students use of alcohol (8% vs. 15%), tobacco (3% vs. 8%), and marijuana (5% vs. 9%)</td>
</tr>
<tr>
<td>6</td>
<td>Ambulatory Medication Assisted (MAT)</td>
<td>$ 200,000</td>
<td>$ 356,000</td>
<td>$ 556,000</td>
<td>Developing capacity for MAT services in 2 to 3 Primary Care Practices in each of 10 Hospital Primary Care Networks + Supporting the development of MAT services in Community Health Centers (CHCs) across the state</td>
</tr>
<tr>
<td>7</td>
<td>Juvenile Court Diversion</td>
<td>$ 49,500</td>
<td>$ 258,424</td>
<td>$ 307,924</td>
<td>Projecting to serve 1,000 youth in SFY-18</td>
</tr>
<tr>
<td>8</td>
<td>Bridge Housing Support for Justice Involved Clients released from Corrections</td>
<td>$ 500,000</td>
<td></td>
<td>$ 500,000</td>
<td>Housing subsidies of up to $689 per month for up to 3 months, supporting up to 240 individuals per year</td>
</tr>
<tr>
<td>9</td>
<td>Public Awareness &amp; Targeted Education</td>
<td>$ 100,000</td>
<td>$ 200,000</td>
<td>$ 300,000</td>
<td>Delivery of evidence-based / data-informed messages to a variety of audiences utilizing radio, television, newspapers and social media outlets. Focus on the risks the associated with misuse and resources made available by the state</td>
</tr>
<tr>
<td>10</td>
<td>Regional Access Point Services</td>
<td>$ 183,500</td>
<td></td>
<td>$ 183,500</td>
<td>Providing Crisis Intervention / Care Coordination for approx. 1,073 clients</td>
</tr>
<tr>
<td>11</td>
<td>Licensed Masters Level Alcohol &amp; Drug Counselors (MLADC) in DCYF DO</td>
<td>$ 31,590</td>
<td></td>
<td>$ 31,590</td>
<td>MLADCs to conduct SUD screenings and referrals for DCYF involved parents/guardians + consultation services for DCYF child protection workers</td>
</tr>
<tr>
<td>12</td>
<td>Misc. (Shea Farm, CADY, Gov’s Policy Advisor)</td>
<td>$ 168,136</td>
<td></td>
<td>$ 168,136</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Training &amp; Technical Assistance</td>
<td>$ 504,103</td>
<td>$ 145,249</td>
<td>$ 649,352</td>
<td></td>
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<tr>
<td></td>
<td>Gov’s Commission Approp.+ SB 533</td>
<td>$ 3,406,526</td>
<td>$ 2,500,000</td>
<td>$ 5,906,526</td>
<td></td>
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<tr>
<td></td>
<td>SB 533 Funds to DHHS Peer Recovery Servs.</td>
<td></td>
<td>$ 500,000</td>
<td>$ 500,000</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total Funds under Administered by DHHS</td>
<td>$ 3,406,526</td>
<td>$ 3,000,000</td>
<td>$ 6,406,526</td>
<td></td>
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<tr>
<td></td>
<td>Recovery Housing Allocation to the NH Housing &amp; Finance Authority</td>
<td></td>
<td></td>
<td>$2,000,000</td>
<td></td>
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<tr>
<td></td>
<td>*Total Appropriation under SB 533 (6-24-16)</td>
<td></td>
<td></td>
<td>$5,000,000</td>
<td></td>
</tr>
</tbody>
</table>
Federal Grants

Substance Misuse Prevention - Partnership for Success Grant (SAMHSA)
- $2.4 M per year through 2019 - Prevention Targeting High Risk Populations
- Reduce underage drinking among 12-20 year olds, binge drinking among 18-20 year olds and opioid use among 18-25 year olds.

Substance Misuse Treatment - Medication Assisted Treatment (SAMHSA)
- $1 M per year through 8/31/2019 – Targeting individuals with Opioid Use Disorders (including heroin / Fentanyl) in our states largest two cities.
- Increase access to care planning, MAT services & recovery supports
- Expand capacity thru training providers & implementing Community of Practice

Substance Misuse Continuum – State Targeted Response (SAMHSA)
- $3.1 M per year (2 years) - Prevention, Treatment & Recovery (Opioid Focus)
- Targeting children, parents, pregnant women, justice-involved individuals
- Peer support, care coordination, engagement, development, education
Delivery System

NH DHHS $30 M+ Investment in the NH Substance Misuse Service Delivery Continuum Dec 2016

What's Available?
What's Needed?

Key Partners:
- Medicaid & Programs Across DHHS
- Gov's Commission
- Regional Public Health Networks
- Other Key Stakeholders

Gaps & Other Challenges:
- Prevention Direct Services
- Early Identification
- SUD Treatment
- Medication Assisted Tx
- Recovery Support Svs.
- Recovery Shelter/Housing
- Access / Coordination Svs.

Workforce Gaps
- Other:
  - Stigma of Addiction
  - Lack of Public Awareness

Bureau of Drug and Alcohol Services - BDAS
Division for Behavioral Health
NH Department of Health and Human Services
## Major Spend – Bureau of Drug and Alcohol Services

### Amounts in millions

<table>
<thead>
<tr>
<th></th>
<th>SFY 16 Actual</th>
<th>SFY 17 Adjusted Authorized</th>
<th>SFY 18 Governor’s Budget</th>
<th>SFY 19 Governor’s Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Funds</strong></td>
<td>$12.7</td>
<td>$21.0</td>
<td>$25.8</td>
<td>$25.9</td>
</tr>
<tr>
<td><strong>General Funds</strong></td>
<td>$2.9</td>
<td>$6.4</td>
<td>$2.6</td>
<td>$2.7</td>
</tr>
</tbody>
</table>

*Gov. Commission 36%, Clinical 44%, Prevention 16%, Program Operations 4%*