

# Opioid State Targeted Response (STR) Evaluation

State/Territory STR Director Baseline Survey

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## Information and Directions

The purpose of this evaluation is to collect important grantee-level information about the implementation of the Substance Abuse and Mental Health Services Administration (SAMHSA) Opioid State Targeted Response (STR) grant. Survey questions focus on opioid use disorder\* services and activities in your state/territory before receiving Opioid STR funding, and planned services and activities to address opioid use disorder using Opioid STR funds. Survey results will be aggregated to protect anonymity. It will take approximately **four (4) hours** to complete this survey, including the time for reviewing instructions, searching existing data sources, gathering the data needed to answer questions, and answering the questions. The survey does not need to be completed in one sitting, and will automatically save your answers as you enter them.

\*Except where noted, all questions in this survey refer to prevention strategies, treatment and/or recovery services for opioid use disorder and related conditions (e.g., non-medical use of prescription pain medication, heroin users, one-time users, overdose) in your state/territory one year before receiving Opioid STR funding. For the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) definition of opioid use disorder, please refer to the attached glossary.

### Helpful Materials

Before completing the survey, it may be helpful to gather the following materials to help answer questions:

- Funding and budget information;
- Intervention implementation materials (curricula, programs, etc.);
- Evaluation findings and reports; and
- Organizational policies.

## Background Information

Please provide your contact information and information about your current position and role on the Opioid STR grant below.

Name

Work Street  
Address

Work Street  
Address

Work City,  
State, Zip

Work Phone

Work Email

What is your current employment position?

How long have you been in this position?

Years

Months

What is your role in the Opioid STR grant?

## Needs & Resources

This section focuses on your state/territory's needs related to addressing opioid use disorder, and the resources available to your state/territory to address opioid use disorder as of May 1, 2017.

Describe the geographic areas/locations in your state/territory where opioid use disorders were most prevalent as of May 1, 2017. Provide the data source used to make this determination.

**Geographic Areas/Locations**

**Data Source**

a.

b.

c.

d.

e.

Describe the geographic areas/locations in your state/territory where opioid-related deaths were the highest as of May 1, 2017. Provide the data source used to make this determination.

**Geographic Areas/Locations**

**Data Source**

a.

b.

c.

d.

e.

Did your state/territory receive any funding that you used for opioid use disorder prevention strategies, treatment, and/or recovery services (including any federal, state, local, foundation, or private funding) between May 1, 2016 and April 30, 2017?

Yes → GO TO QUESTION 8

No GO TO QUESTION 9

**In the table below, indicate whether your state/territory used each funding source for opioid use disorder prevention strategies, treatment, and/or recovery services between May 1, 2016 and April 30, 2017. Where possible, estimate the amount of funding your state/territory has received and used for opioid use disorder prevention strategies, treatment, and/or recovery services between May 1, 2016 and April 30, 2017. (If grant program spans two fiscal years, please include funding received and used during both fiscal years.)**

Funding Source	Check if funding received	Total amount received	Total amount used for opioid prevention strategies	Total amount used for opioid treatment, and/or recovery services
a. SPF-Partnerships for Success (PFS) (SAMHSA)	<input type="checkbox"/>			
b. Substance Abuse Prevention and Treatment Block Grant (SAMHSA)	<input type="checkbox"/>			
c. SAMHSA Prescription Drug Overdose	<input type="checkbox"/>			
d. SAMHSA Medical-Assisted Treatment (MAT)	<input type="checkbox"/>			
e. CDC Prevention for States (PFS)	<input type="checkbox"/>			
f. CDC PDO Data-Driven Prevention Initiative (DDPI)	<input type="checkbox"/>			
g. SAMHSA Minority HIV/AIDS Initiative	<input type="checkbox"/>			
h. HRSA Rural Opioid Overdose Reversal (ROOR)	<input type="checkbox"/>			
i. Drug-Free Communities (DFC) grant	<input type="checkbox"/>			
j. Other Federal funds (Specify)	<input type="checkbox"/>			
k. Other state/tribal/jurisdiction funds (Specify)	<input type="checkbox"/>			
l. Other local government funds (Specify)	<input type="checkbox"/>			
m. Foundations/nonprofit organizations	<input type="checkbox"/>			
n. Corporate/business entities	<input type="checkbox"/>			
o. Individual donations/funding from fundraising events	<input type="checkbox"/>			
p. Other funding source (Specify)	<input type="checkbox"/>			

**Approximately how many state-sponsored trainings on opioid use disorder prevention strategies, treatment, and recovery services were delivered in your state from May 1, 2016 to April 30, 2017? This may include trainings conducted using funding received through state, federal, or other sources (e.g., state general funds, SAMHSA block grants, and others).**

Training Topic	Number of trainings
a. Prevention of Opioid Use Disorders	
b. Treatment and/or Recovery Services for Opioid Use Disorders	
c. Both (Prevention and Treatment and/or Recovery Services for Opioid Use Disorders)	

**In the table below, indicate the total number of practitioners/staff in your state/territory's behavioral health care workforce that provide prevention strategies, treatment, and/or recovery services for opioid use disorders as of May 1, 2017. Provide the data source(s) used to make this determination.**

	For opioid use disorders, total number of practitioners/staff providing prevention strategies, treatment and/or recovery services	Data Sources
a. Physicians (excluding Psychiatrists)		
b. Psychiatrists		
c. Nurse Practitioners		
d. Psychologists		
e. Counselors		
f. Social Workers		
g. Paid Peer Specialists		
h. Volunteer Peer Specialists		
i. Others (Specify)		
j. Total		

In the list below, identify A) if the following activities or programs were present in your state/territory as of May 1, 2017, and B) whether your state/territory plans to expand/enhance/develop (or pass new legislation for) any of these activities or programs to address the opioid use disorders in your state.

	A		B		
	SELECT ONE		SELECT ALL THAT APPLY		
	YES	NO	PLANS TO EXPAND, ENHANCE, OR DEVELOP/PASS USING OPIOID STR FUNDING	PLANS TO EXPAND, ENHANCE, OR DEVELOP/PASS <b>NOT</b> USING OPIOID STR FUNDING	<b>NO</b> PLANS TO EXPAND, ENHANCE OR DEVELOP/PASS
a. Alcohol/Drug Testing Programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Alcohol/Drug-free Support Centers (e.g., clubhouses, drop in centers)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Drug Take-Back Program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Good Samaritan Law	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Governor's Cabinet-Level Opioid Council/Team	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Integrated Community Care Models	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. MAT Collaboratives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. Naloxone Access Laws	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. Naloxone Distribution	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j. Opioid Prescribing Guidelines	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k. Opioid-Specific Community Trainings (e.g., first responders)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
l. Pain Management Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
m. "Pill Mill" Laws	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
n. Prescription Drug Monitoring Program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
o. Public Information Campaigns	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
p. Substance Abuse Education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
q. Syringe Services Including Distribution Sites	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
r. Telehealth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
s. Other (Specify)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## Data Use

This section focuses on data sources available to your state/territory and data management strategies used to address opioid use disorders before receiving Opioid STR funding.



In the table below, list all sources of state/territory-level data relevant to opioid use disorder that your state/territory has used to monitor opioid use disorder as of May 1, 2017. (Possible data sources include the Youth Risk Behavior Surveillance System (YRBSS), the Behavioral Risk Factor Surveillance System (BRFSS), other statewide school or adult state surveys, arrest data, and emergency room overdose data).

	Data Source	Frequency of data collection <b>SELECT ONE ONLY</b>	Most recent data collection time point (Year)	Geographic level of data availability <b>SELECT ALL THAT APPLY</b>	Subgroup level of data availability <b>SELECT ALL THAT APPLY</b>	Respondents/population <b>SELECT ALL THAT APPLY</b>
a.		<input type="radio"/> Semi-annual <input type="radio"/> Annual <input type="radio"/> Every 2 years <input type="radio"/> Other (Specify)		<input type="checkbox"/> State <input type="checkbox"/> Tribal entity <input type="checkbox"/> Jurisdiction <input type="checkbox"/> Region <input type="checkbox"/> County <input type="checkbox"/> School <input type="checkbox"/> Other (Specify)	<input type="checkbox"/> Race <input type="checkbox"/> Ethnicity <input type="checkbox"/> Gender <input type="checkbox"/> Age <input type="checkbox"/> Other (Specify)	<input type="checkbox"/> Adolescents <input type="checkbox"/> Adults <input type="checkbox"/> Other (Specify)
b.		<input type="radio"/> Semi-annual <input type="radio"/> Annual <input type="radio"/> Every 2 years <input type="radio"/> Other (Specify)		<input type="checkbox"/> State <input type="checkbox"/> Tribal entity <input type="checkbox"/> Jurisdiction <input type="checkbox"/> Region <input type="checkbox"/> County <input type="checkbox"/> School <input type="checkbox"/> Other (Specify)	<input type="checkbox"/> Race <input type="checkbox"/> Ethnicity <input type="checkbox"/> Gender <input type="checkbox"/> Age <input type="checkbox"/> Other (Specify)	<input type="checkbox"/> Adolescents <input type="checkbox"/> Adults <input type="checkbox"/> Other (Specify)
c.		<input type="radio"/> Semi-annual <input type="radio"/> Annual <input type="radio"/> Every 2 years <input type="radio"/> Other (Specify)		<input type="checkbox"/> State <input type="checkbox"/> Tribal entity <input type="checkbox"/> Jurisdiction <input type="checkbox"/> Region <input type="checkbox"/> County <input type="checkbox"/> School <input type="checkbox"/> Other (Specify)	<input type="checkbox"/> Race <input type="checkbox"/> Ethnicity <input type="checkbox"/> Gender <input type="checkbox"/> Age <input type="checkbox"/> Other (Specify)	<input type="checkbox"/> Adolescents <input type="checkbox"/> Adults <input type="checkbox"/> Other (Specify)
d.		<input type="radio"/> Semi-annual <input type="radio"/> Annual <input type="radio"/> Every 2 years		<input type="checkbox"/> State <input type="checkbox"/> Tribal entity <input type="checkbox"/> Jurisdiction	<input type="checkbox"/> Race <input type="checkbox"/> Ethnicity <input type="checkbox"/> Gender	<input type="checkbox"/> Adolescents <input type="checkbox"/> Adults <input type="checkbox"/> Other (Specify)

**Between May 1, 2016 and April 30, 2017, did your state/territory collect information on how it implements prevention strategies that address opioid use disorders (e.g., what prevention approaches are implemented, who implements them, what population(s) and/or geographic areas are targeted, how many dollars are spent, who monitors reach and/or impact)?**

- <sub>1</sub> Yes  
 <sub>0</sub> No

**Between May 1, 2016 and April 30, 2017, did your state/territory collect information on how it implements treatment and/or recovery services interventions that address opioid use disorders (e.g., what treatment and/or recovery approaches are implemented, who implements them, what population(s) and/or geographic areas are targeted, how many dollars are spent, who monitors reach and/or impact)?**

- <sub>1</sub> Yes  
 <sub>0</sub> No

**Between May 1, 2016 and April 30, 2017, did your state/territory integrate opioid use disorder data (such as data that must be reported for the Opioid STR grant) with data from other agencies/groups to address opioid use disorder (e.g., data from pharmacies, poison control, first responders, etc.)?**

- <sub>1</sub> Yes  
 <sub>0</sub> No

**Between May 1, 2016 and April 30, 2017, did your state/territory share state/territory-level data with key stakeholders to address opioid use disorders?**

- <sub>1</sub> Yes  
 <sub>0</sub> No

In the table below, indicate whether the following community-level and state-level data elements were available as of May 1, 2017 and, if so, whether your agency had access to these data elements as of May 1, 2017.

	Data Availability						Data Access					
	Were data available at the state-level?			Were data available at the community-level?			Did your agency have access to these data at the state-level?			Did your agency have access to these data at the community-level?		
	YES	NO	DON'T KNOW	YES	NO	DON'T KNOW	YES	NO	DON'T KNOW	YES	NO	DON'T KNOW
a. Rates of prescription drug misuse in the past 30 days	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Rates of lifetime prescription drug misuse (ever misused)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Rates of high dose opioid prescribing (e.g., >90MME/day)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Rates of opioid and benzodiazepine co-prescribing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Rates of multiple prescriber episodes for opioid pain medication (as indicator of possible "doctor shopping")	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Rates of multiple pharmacy episodes for opioid pain medication	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

In the table below, indicate whether the following community-level and state-level data elements were available as of May 1, 2017 and, if so, whether your agency had access to these data elements as of May 1, 2017.

	Data Availability						Data Access					
	Were data available at the state-level?			Were data available at the community-level?			Did your agency have access to these data at the state-level?			Did your agency have access to these data at the community-level?		
	YES	NO	DON'T KNOW	YES	NO	DON'T KNOW	YES	NO	DON'T KNOW	YES	NO	DON'T KNOW
g. Mortality rates due to prescription drug/opioid overdose	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. Emergency room visits/hospital admissions related to prescription drug/opioid use disorder	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. Calls to poison center related to prescription drug/opioid use disorder	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j. Local data on geographic patterns of opioid overdoses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k. Other (specify)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## Prescription Drug Monitoring Program (PDMP) Data

**As of May 1, 2017, did your state/territory have an active Prescription Drug Monitoring Program (PDMP)?**

- <sub>1</sub> Yes  
<sub>0</sub> No  
<sub>d</sub> Don't know

**As of May 1, 2017, did your state/territory have access to the PDMP to extract and use data?**

- <sub>1</sub> Yes  
<sub>0</sub> No  
<sub>d</sub> Don't know

**Did your state/territory use PDMP data for the following purposes between May 1, 2016 and April 30, 2017?**

**MARK ONE FOR EACH ROW**

	YES	NO
a. Help select and implement strategies and services to address opioid use disorders	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>0</sub>
b. Help make decisions about selecting providers and organizations that receive Opioid STR funding (that is, Opioid STR sub-recipients)	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>0</sub>
c. Extract and report rates of physician registration with prescription drug monitoring program	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>0</sub>
d. Extract and report use of PDMP by physicians (number of queries; percentage of physicians making queries)	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>0</sub>
e. Extract and report opioid prescribing rates	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>0</sub>

**ASK ONLY IF Q18 AND Q19 ARE “YES”**

**Which PDMP data management and data use activity or activities has your state/territory completed between May 1, 2016 and April 30, 2017?**

***SELECT ALL THAT APPLY***

- <sub>1</sub> Increased access to PDMP data at the grantee/state/territory level
- <sub>2</sub> Increased access to PDMP data at the sub-recipient level
- <sub>3</sub> Increased usage of PDMP data at the grantee/state/territory level
- <sub>4</sub> Increased usage of PDMP data at the sub-recipient level
- <sub>5</sub> Increased the quality of PDMP data collected
- <sub>6</sub> Increased registration for the PDMP
- <sub>7</sub> Increased voluntary PDMP enrollment
- <sub>8</sub> Increased mandatory PDMP enrollment
- <sub>9</sub> Increased timely data upload by pharmacists to the PDMP
- <sub>10</sub> Integrated PDMPs with electronic health records
- <sub>11</sub> Integrated PDMPs with health information exchanges
- <sub>12</sub> Integrated PDMP data with vital records (e.g., deaths)
- <sub>13</sub> Increased reports to prescribers
- <sub>14</sub> Increased reports to dispensers
- <sub>15</sub> Increased reports to licensing boards
- <sub>16</sub> Any other efforts to improve data infrastructure (Specify)

## Infrastructure

One of the goals of the Opioid STR program is to understand and support the infrastructure at the state/territory and community levels needed to address opioid use disorder. This section focuses on ways in which grantees and sub-recipients (communities/programs) used and leveraged structures, processes, and policies to address opioid use disorder in their state before receiving Opioid STR funding.

Which of the following guidelines and regulations existed in your state/territory as of May 1, 2017?

**SELECT ALL THAT APPLY**

- <sub>1</sub> Required universal registration with the Prescription Drug Monitoring Program (PDMP)
- <sub>2</sub> Doctors can assign authorized delegates to access the PDMP
- <sub>3</sub> Requirements for prescribers to query PDMP before prescribing opioids in certain conditions (e.g., for more than short-term use)
- <sub>4</sub> Pharmacists have a set timeframe for uploading opioid dispensing data
- <sub>5</sub> Using PDMP data for public health surveillance and prevention
- <sub>6</sub> Inter-state agreements to share PDMP data
- <sub>7</sub> Requirements for prescribers to receive training on safe opioid prescribing
- <sub>8</sub> Limit to dose of opioid prescription without special approval
- <sub>9</sub> Limit to the duration of opioid prescription without special approval
- <sub>10</sub> Limit to the duration of opioid prescription for non-cancer patients without special approval
- <sub>11</sub> Requirements to regularly certify pain clinics by the state medical board
- <sub>12</sub> Requirements that pain clinics must be owned and operated by a licensed physician
- <sub>13</sub> Other relevant PDMP guidelines or regulations not captured above (Specify)

**Did your state/territory have a state-level workgroup to address opioid use disorder that met regularly (e.g., every two weeks, monthly, quarterly) between May 1, 2016 and April 30, 2017?**

- <sub>1</sub> Yes, my state/territory had a workgroup that met regularly
- <sub>2</sub> Yes, my state/territory had a workgroup, but it did not meet regularly
- <sub>3</sub> No, my state/territory did not have a workgroup

**Did a statewide/territory-wide strategic plan exist to address opioid use disorder, including prevention of overdose and misuse, treatment and recovery services as of May 1, 2017?**

- <sub>1</sub> Yes
- <sub>0</sub> No



## Addressing Opioid Use Disorder

This section focuses on opioid use disorder prevention strategies, treatment, and/or recovery services available in your state/territory before receiving Opioid STR funding.

In the table below, provide the total number of a) people who received opioid use disorder-specific treatment services, and b) people who received opioid use disorder-specific recovery services in your state/territory between May 1, 2016 and April 30, 2017.

	TOTAL
a. Total number of people who received treatment services between May 1, 2016 and April 30, 2017.	
b. Total number of people who received recovery services between May 1, 2016 and April 30, 2017.	

In the table below, to the best of your knowledge, list all of the opioid-specific prevention strategies that your state/territory has delivered between May 1, 2016 and April 30, 2017, the type of prevention strategy delivered, and the total number of people that received each strategy. Primary prevention refers to preventing new cases of opioid use disorder, while secondary prevention refers to identifying and treating opioid use disorder early on.

	Prevention strategy	Type of prevention strategy (Primary or Secondary)	Total number of people that received the strategy (if able to obtain)
a.			
b.			
c.			
d.			
e.			
f.			

27.

In the table below, to the best of your knowledge, list all of the opioid-specific treatment strategies that your state/territory has delivered between May 1, 2016 and April 30, 2017 and the total number of people that received each strategy.

	Treatment strategy	Total number of people that received the strategy (if able to obtain)
a.		
b.		
c.		
d.		
e.		
f.		

In the table below, to the best of your knowledge, list all of the opioid-specific recovery strategies that your state/territory has delivered between May 1, 2016 and April 30, 2017 and the total number of people that received each strategy.

	Recovery strategy	Total number of people that received the strategy (if able to obtain)
a.		
b.		
c.		
d.		
e.		
f.		

## Plans to Address Opioid Use Disorder Using Opioid

This section focuses on plans to provide opioid use disorder prevention strategies, treatment, and/or recovery services in your state/territory using Opioid STR funding.

7 In the list below, identify the opioid use disorder treatment and/or recovery services that your state/territory: (1) has not implemented as of May 1, 2017 and does not plan to develop using Opioid STR funding; (2) has not implemented as of May 1, 2017 and plans to develop using Opioid STR funding, (3) has already implemented and plans to expand using Opioid STR funding; or (4) has already implemented and does not plan to expand using Opioid STR funding. Where possible, estimate how your capacity to treat will be improved by specifying the number of expected new cases (i.e., individuals who have not previously received service) you expect to serve with these services using Opioid STR funding. We will use these data to monitor capacity improvements over time.

MARK ONE FOR EACH ROW

	NOT IMPLEMENTED; NO PLANS TO DEVELOP	NOT IMPLEMENTED, PLANS TO DEVELOP	IMPLEMENTED; PLANS TO EXPAND	IMPLEMENTED, NO PLANS TO EXPAND	# EXPECTED NEW CASES
<b>PREVENTION CONTINUUM OF CARE</b>					
a. Primary or Secondary Prevention (e.g., universal school-based prevention)	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
b. Outreach, Information, and Referral	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
c. Screening Brief Intervention and Referral to Treatment (SBIRT)	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
d. Early Intervention (e.g., .5 ASAM level of care)	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
<b>TREATMENT CONTINUUM OF CARE</b>					
e. Detoxification	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
f. Outpatient (e.g., treatment that occurs once a week in an outpatient setting)	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
g. Intensive Outpatient	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
h. Day Treatment	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
i. Inpatient/Hospital (Other Than Detox)	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
<b>RECOVERY CONTINUUM OF CARE</b>					
j. Continuing Care (e.g., step-down treatment services)	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
k. Practitioner Recovery Supports	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
l. Peer Recovery Support Services	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	

7 In the list below, identify the opioid use disorder treatment and/or recovery services that your state/territory: (1) has not implemented as of May 1, 2017 and does not plan to develop using Opioid STR funding; (2) has not implemented as of May 1, 2017 and plans to develop using Opioid STR funding, (3) has already implemented and plans to expand using Opioid STR funding; or (4) has already implemented and does not plan to expand using Opioid STR funding. Where possible, estimate how your capacity to treat will be improved by specifying the number of expected new cases (i.e., individuals who have not previously received service) you expect to serve with these services using Opioid STR funding. We will use these data to monitor capacity improvements over time.

MARK ONE FOR EACH ROW

	NOT IMPLEMENTED; NO PLANS TO DEVELOP	NOT IMPLEMENTED, PLANS TO DEVELOP	IMPLEMENTED; PLANS TO EXPAND	IMPLEMENTED, NO PLANS TO EXPAND	# EXPECTED NEW CASES
SPECIFIC SERVICE COMPONENTS w/in CONTINUUM OF CARE					
<u>Pharmacological Interventions</u>					
m. Methadone	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
n. Buprenorphine	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
o. Naltrexone (Oral)	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
p. Naltrexone (Extended-release injectable)	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
Treatment Services					
q. Case Management	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
r. Co-Occurring Treatment Services (i.e., mental health and substance abuse services)	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
s. Infectious Disease (e.g., HIV/AIDS, Hepatitis) Services	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
t. Trauma-focused/informed Services	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
u. Education/Support Groups (patients/families)	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
v. Other Enhanced Services That Address Psychosocial Problems Concomitant with the OUD (Specify)	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	

7 In the list below, identify the opioid use disorder treatment and/or recovery services that your state/territory: (1) has not implemented as of May 1, 2017 and does not plan to implement using Opioid STR funding; (2) has not implemented as of May 1, 2017 and plans to develop using Opioid STR funding, (3) has already implemented and plans to expand using Opioid STR funding; or (4) has already implemented and does not plan to expand using Opioid STR funding. Where possible, estimate how your capacity to treat will be improved by specifying the number of expected new cases (i.e., individuals who have not previously received service) you expect to serve with these services using Opioid STR funding. We will use these data to monitor capacity improvements over time.

MARK ONE FOR EACH ROW

		NOT IMPLEMENTED; NO PLANS TO DEVELOP	NOT IMPLEMENTED, PLANS TO DEVELOP	IMPLEMENTED; PLANS TO EXPAND	IMPLEMENTED, NO PLANS TO EXPAND	# EXPECTED NEW CASES
w.	Wrap-Around Services (If possible, provide additional information about specific wrap-around services below in rows x through cc)	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
x.	Child Care	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
y.	Employment Services	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
z.	Housing	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
aa.	Individual Services Coordination	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
bb.	Transportation	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
cc.	Other (specify)	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
	<input type="text"/>					
<b>INFRASTRUCTURE</b>						
dd.	Health Information Technology Systems	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
ee.	Data Extraction for Real Time Reporting	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
ff.	Secured Physical Space (e.g., purchased building)	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
gg.	Opioid-Specific Practitioner Trainings	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
<b>OTHER</b>						
hh.	Other (specify)	<input type="radio"/> <sub>1</sub>	<input type="radio"/> <sub>2</sub>	<input type="radio"/> <sub>3</sub>	<input type="radio"/> <sub>4</sub>	
	<input type="text"/>					

In the table below, indicate the population(s) that your state/territory plans to target for your Opioid STR prevention strategies, treatment, and/or recovery services. For this question, we would like to know if your state/territory plans to target specific groups of people for these treatment and recovery interventions. For example, if you are delivering a treatment intervention designed to target all pregnant women in an area, then you would select only “Females”; you would not have to select all the possible race/ethnicity categories that might be pregnant. If, however, you are delivering a treatment specifically designed to target African American and Hispanic pregnant women, then you would select “Hispanic/Latinos” and “African Americans” as well.

*(These categories are not mutually exclusive. Use your judgment to select all responses that describe your target population.)*

		MARK ONE OR MORE FOR EACH ROW		
Check if you will be targeting this population for		Prevention	Treatment	Recovery
a.	A specific population has not been identified to target for Opioid STR activities	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
b.	Males	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
c.	Females	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
d.	Hispanics/Latinos (Including those from Central America, Cuba, Dominican Republic, Mexico, Puerto Rico, and South American countries)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
e.	African Americans	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
f.	Asians (Including those from Southeast Asia, China, the Philippines, Japan, Korea, Vietnam, and other Asian countries)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
g.	Native Hawaiians or other Pacific Islanders	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
h.	Alaska Natives	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
i.	American Indians	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
j.	Caucasians	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
k.	Children (aged <12)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
l.	Adolescents (12-17)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
m.	Transitional Age Youth (18-25)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
n.	Adults (26-64)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
o.	Adults (aged 65+)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
p.	Parents/caregivers	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>

In the table below, indicate the population(s) that your state/territory plans to target for your Opioid STR prevention strategies, treatment, and/or recovery services. For this question, we would like to know if your state/territory plans to target specific groups of people for these treatment and recovery interventions. For example, if you are delivering a treatment intervention designed to target all pregnant women in an area, then you would select only “Females”; you would not have to select all the possible race/ethnicity categories that might be pregnant. If, however, you are delivering a treatment specifically designed to target African American and Hispanic pregnant women, then you would select “Hispanic/Latinos” and “African Americans” as well. *(These categories are not mutually exclusive. Use your judgment to select all responses that describe your target population.)*

**MARK ONE OR MORE FOR EACH ROW**

Check if you will be targeting this population for	Prevention	Treatment	Recovery
q. Physicians/health care providers/prescribers	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
r. Pharmacists/dispensers	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
s. Current or former military or military families	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
t. Lesbian/gay/bisexual/transgender/questioning (LGBTQ)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
u. People living in poverty	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
v. People whose primary language is other than English (or who have limited English proficiency (LEP))	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
w. People with mental illness	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
x. People with disabilities (e.g., hearing, visually, or physically impaired)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
y. People who are reentering the community	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
z. Homeless	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
aa. People living with HIV/AIDS	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
bb. Injection Drug Users	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
cc. Other target population (Specify)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
<input type="text"/>			
dd. Other target population (Specify)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
<input type="text"/>			
ee. Other target population (Specify)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
<input type="text"/>			
ff. Other target population (Specify)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
<input type="text"/>			
gg. Will target all populations for Opioid STR activities	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>



**How would you describe the community or communities that you plan to target for your Opioid STR treatment and/or recovery services?**

***SELECT ALL THAT APPLY***

- Large urban area (population of more than 500,000)
- Smaller urban area (population of 50,000 to 500,000)
- Small town or urban cluster (population or 2,500 to 49,999)
- Rural
- Entire state
- Other (specify)

\_\_\_\_\_

**How would you describe the community or communities that you plan to target for your Opioid STR prevention strategies?**

***SELECT ALL THAT APPLY***

- Large urban area (population of more than 500,000)
- Smaller urban area (population of 50,000 to 500,000)
- Small town or urban cluster (population or 2,500 to 49,999)
- Rural
- Entire state
- Other (specify)

\_\_\_\_\_

**How will your state/territory increase access to opioid use disorder prevention strategies, treatment, and/or recovery services using Opioid STR funding for underserved populations (which may include racial/ethnic minority populations, individuals who are difficult to engage in services, or other populations in your state)?**

***SELECT ALL THAT APPLY***

- Complete a Disparities Impact Statement
- Identify high-needs/low capacity communities
- Identify populations that experience health disparities
- Request training/technical assistance (T/TA) about delivering services or strategies to high-needs communities
- Request training/technical assistance (T/TA) about delivering services or strategies to populations that experience health disparities
- Monitor and/or evaluate approaches used to address health disparities populations
- Measure outcomes of health disparities populations
- Other (specify)

**Thank you for your participation!**

*Placeholder for return instructions*