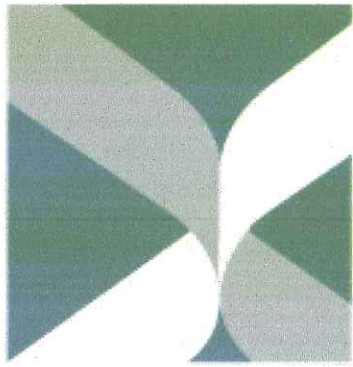


# Marijuana Revenues: The Provider Perspective



COLORADO  
PROVIDERS  
ASSOCIATION

# Matt Sundeen, Executive Director

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# Key Takeaways

- 1. Substance abuse challenges not limited to marijuana**
  - The most effective investments will address marijuana plus alcohol and other drugs
- 2. Support full continuum of substance abuse services**
  - Prevention, early intervention, treatment, recovery
- 3. Utilize existing expertise**
  - Colorado providers use evidence-based practices for the full spectrum of services
- 4. Strengthen the existing infrastructure**
  - Support prevention and treatment infrastructure at the Colorado Office of Behavioral Health
  - The current system is significantly underfunded

# Colorado's Challenge

Behavior	National Rate	Colorado Rate	Rank
Illicit drug use	8.82%	13.48%	3
Marijuana use	11.47%	16.93%	3
Illicit drugs	3.6%	4.17%	9
Cocaine	1.85%	3.06%	2
Pain relievers	4.89%	6.23%	4
Alcohol dependence	7.27%	8.71%	4
Alcohol dependence age 12-17	4.59%	5.68%	4
Illicit drug dependence	2.82%	3.19%	4
Drug or alcohol dependence	8.87%	10.21%	6

# Substance Abuse Services

1. Prevention
  - Address substance abuse before it starts
2. Early intervention
  - Recognize early signs of addiction and address
3. Treatment
  - After a problem
  - Often is an emergency
4. Recovery
  - Lifetime process
  - Without adequate recovery support easy to relapse



Arapahoe House

**SIGNAL**  
*Behavioral Health Network*

Art Schut

President and CEO - Arapahoe House

President of the Board – Signal Behavioral Health  
Network

# Treatment Services

- **Residential:** Intensive care in a 24/7 setting.
- **Outpatient and DUI:** Services allow clients to receive treatment and continue to live at home and attend school or work.
- **Detox:** Monitors clients through a safe withdrawal from alcohol and drugs.

# Marijuana Treatment

At Arapahoe House:

- Marijuana is the #1 drug of use for our teens.
- When comparing the same six month period (Jan 1 – June 30, 2013/2014), the percentage of clients who came to Arapahoe House on a DUI charge who reported marijuana as a drug of choice jumped from 8% to 14.7%.



# Marijuana and Adult Clients

- 90% increase in marijuana as a secondary drug of choice from 2008 to 2014.
- 252% increase in marijuana as a tertiary drug of choice from 2008 to 2014.

# Marijuana and Teen Clients at Arapahoe House

- FY11: 193 marijuana adolescent admissions
- FY12: 246 marijuana adolescent admissions
- FY13: 313 marijuana adolescent admissions
- FY14: 320 marijuana adolescent admissions

**66% increase in teen marijuana  
admissions from 2011 to 2014**

# Marijuana and Addiction

According to the National Institute on Drug Abuse  
(NIDA):

- 10 percent of people who use marijuana will become dependent
- 1 in 6 who start using in their teens become dependent
- 25-50% of daily users become dependent

# Not Just Marijuana

**No providers for substance abuse prevention, early intervention, treatment or recovery specialize only in marijuana.**

- Heroin admissions at Arapahoe House have more than quintupled in the last 6 years.
- The number of clients admitted for prescription drug addiction have more than quintupled in the past 6 years.
- Clients seeking help for methamphetamine use have nearly doubled since 2008.
- The number one reason for admission to Arapahoe House continues to be alcohol.

## Douglas Novins, M.D.

Chair, Department of Psychiatry and Behavioral Sciences, Children's Hospital Colorado

Professor and Vice Chair, Department of Psychiatry, University of Colorado School of Medicine

## Marijuana Concerns for our Children

- Medicalization: Lowered perception of risk
- Impacts of Misuse
  - Decline in neurological function
  - Highly comorbid with other mental health problems
    - Elevated risk of psychosis
  - Increased chance of using “harder” drugs
  - Negative educational outcomes
- Adolescents don't seek help on their own
  - Recognition by adults often critical to accessing care

# Effective Hospital and Clinic-Based Services

- Anticipatory Guidance
- Screening
  - Identification of youth at high risk of substance misuse
  - Identification of youth with current substance use problems
- Brief Intervention
- Referral to Treatment
- Specialty Substance Abuse Services

# Children's Colorado's Behavioral Health Strategy

- Targeted expansion of Tertiary Services
  - Crisis Services, Services for children with ASD/ID and additional BH conditions
- Ongoing Improvement of existing Tertiary Services
  - Emergency, Inpatient, Partial Hospitalization, Eating Disorders, Medical Psychiatric

**Tertiary Care**

- Transformation and substantial expansion of Specialty Services
  - Anschutz and Network of Care Outpatient Clinics

**Specialty Care**

- Enhanced Services and Support for Primary Care
  - Integrated Care Models, Consultative Care Models, Professional Education

**Primary Care**

- Selected Expansion of Prevention/Community Education Programs
  - School-Based Prevention, Community Education

**Prevention**

- Assertive Program of Advocacy & Alliance Building
  - Governmental, Allied Service Organizations, Families and Youth

**Community Infrastructure, Health Promotion, Advocacy, Policymaking**



# Substance Abuse Services at Children's Hospital Colorado: Current State

Clinical Program	Prevention, Screening, Assessment	Treatment
<b>Tertiary Services</b> <ul style="list-style-type: none"> <li>Inpatient (Medical &amp; Psychiatric)</li> <li>Partial Hospitalization</li> <li>Emergency Department</li> </ul>	Prevention Screening Assessment	Refer to other providers
<b>Secondary Services</b> <ul style="list-style-type: none"> <li>Outpatient Behavioral Health</li> <li>Specialty Pediatrics Clinic</li> </ul>	Prevention Screening Assessment	Refer to other providers
<b>Primary Services</b> <ul style="list-style-type: none"> <li>General Pediatrics Clinics</li> <li>Community Providers</li> </ul>	Prevention Screening	Refer to other providers

# Substance Abuse Services at Children's Hospital Colorado

## Colorado: Planned Future State

Clinical Program	Prevention, Screening, Assessment	Treatment
<b>Tertiary Services</b> <ul style="list-style-type: none"><li>• Inpatient (Medical &amp; Psychiatric)</li><li>• Partial Hospitalization</li><li>• Emergency Department</li></ul>	Prevention Screening Assessment	<b>Brief Intervention</b> <b>Consultation from and referral to behavioral health outpatient teams</b>
<b>Secondary Services</b> <ul style="list-style-type: none"><li>• Outpatient Behavioral Health<ul style="list-style-type: none"><li>• <b>Crisis Team</b></li><li>• <b>Substance Abuse Treatment Team</b></li></ul></li><li>• Specialty Pediatrics Clinic</li></ul>	Screening Assessment	<b>Outpatient treatment services</b>
<b>Primary Services</b> <ul style="list-style-type: none"><li>• General Pediatrics Clinics</li><li>• Community Providers</li></ul>	Prevention Screening	<b>Brief Intervention</b> <b>Consultation from and referral to behavioral health outpatient teams</b>

# Prevention Strategies

- No simple solution
- CSAP's 6 research-based strategies
  1. Information dissemination
  2. Prevention education
  3. Environmental strategies
  4. Community-based processes
  5. Alternative activities
  6. Problem identification and referral
- Effective when combined and data driven

# CO Prevention Efforts

- State level efforts
  - Survey (CDPHE)
  - Information campaigns (CDPHE)
- Community approaches
  - Community-based grant programs (OBH)
- Targeted populations
  - School-based services (HCPF)
  - Tony Grampas Youth Services (OBH)
  - SBIRT (OBH)
  - Access to Recovery (OBH)

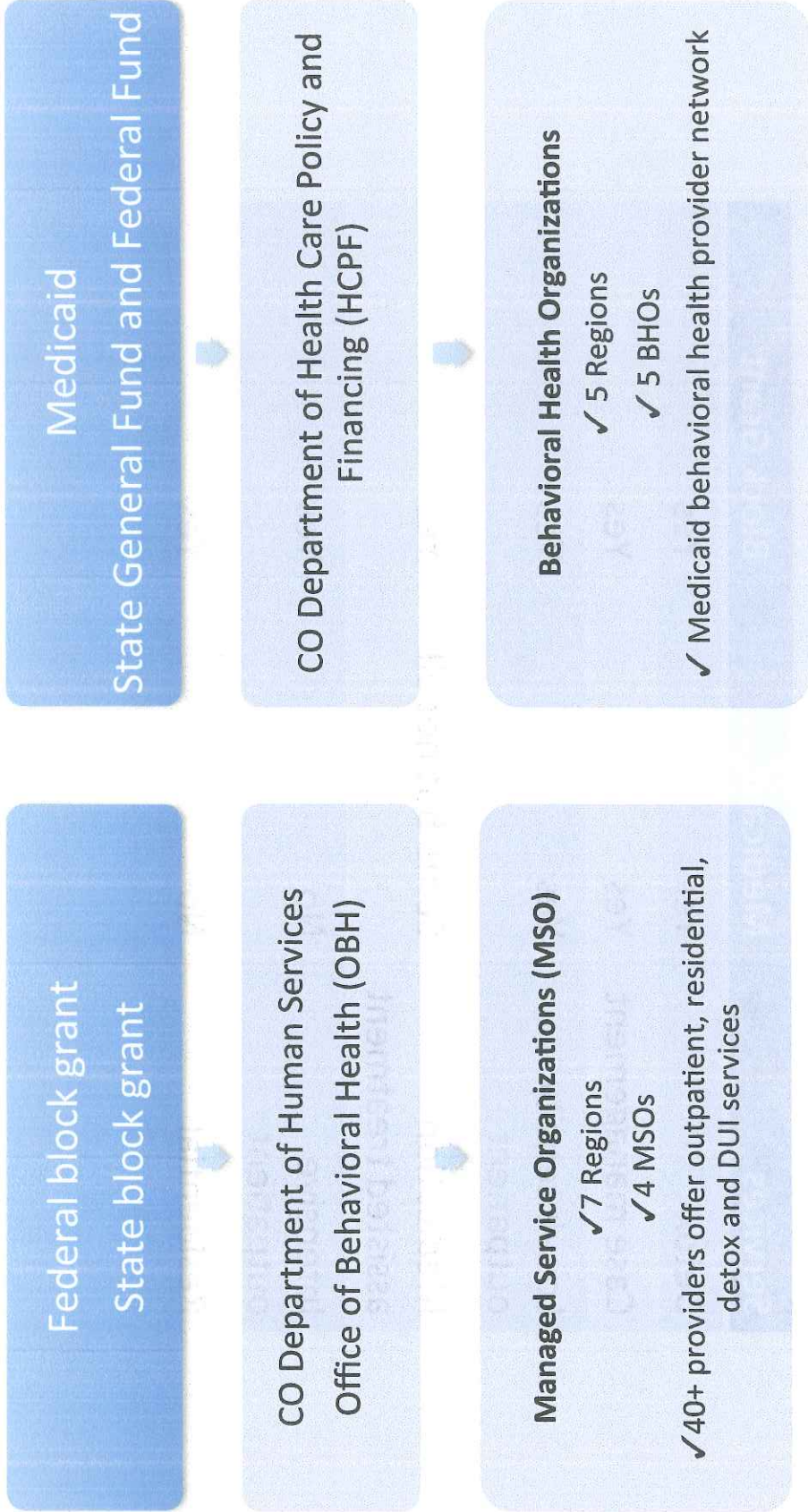
# Supporting SUD Programs

- Public Sources of Funding
  - Federal Block Grant Funds
  - Medicaid
  - State general fund
- State Agencies
  - Colorado Office of Behavioral Health, CDHS
  - Health Care Policy and Financing
  - Department of Corrections
  - Department of Education

# Primary Public Sources for Treatment Support

- CDHS, Office of Behavioral Health
  - Distributed through Managed Service Organizations
  - Largest source of funds
  - Prioritized service
  - Service limited by funds
- Health Care Policy and Financing
  - Distributed through Behavioral Health Organizations
  - Benefit changed in January, 2014
  - Limited to Medicaid clients

# Treatment Funding Structure



# Funding Source Matters

Services	Medicaid	Block Grant
Detox	Yes	Yes
Case management	Yes	Yes
Low-intensity outpatient	Yes	Yes
Medication assisted treatment	Some but not all	Yes
Intensive outpatient	No	Yes
Residential	No	Yes



# Provider Recommendations

1. Don't look at marijuana in a silo
  - Support services that address marijuana as well as alcohol and other drugs
2. Support the whole continuum of services
  - Prevention, early intervention, treatment and recovery are equally important
3. Utilize proven experts and strategies
4. Strengthen existing infrastructure
  - Don't reinvent

Questions?