



## Arapahoe House

Opioid Interim Study Committee

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## Arapahoe House 101

- Founded in 1975
- Largest provider of substance use disorder treatment in Colorado
- We envision a Colorado where help is embraced so people impacted by substance use and mental health disorders are able to lead their best lives.
- Youth and adults; public and private insurance



Arapahoe House

## Priorities and Vision

- Focus on treatment programs that provide deep therapeutic and life-changing impact
  - Outpatient
  - Residential
  - Medication assisted treatment
- Expand into new communities to meet the need

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## Current Trends - Overall

- Increasing need
  - Increased calls to patient access line
  - Daily outpatient walk-ins
  - Residential waitlists
- Top 5 drugs of choice:

|                 | % of admissions  |
|-----------------|------------------|
| Primary Drug    | Fiscal Year 2017 |
| Alcohol         | 46.7             |
| Methamphetamine | 21.7             |
| Marijuana       | 12.5             |
| Heroin          | 10.3             |
| Cocaine         | 4.9              |

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## Current Trends - Opioids

- Opioid admissions (heroin and prescription drugs) have increased 540% since 2008.
- Prescription drug admissions are declining, and heroin use is increasing.
  - 29% decrease in prescription painkiller admissions, over the last 12 months.

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## What is working well?

- SB202 funding
- Increased public awareness
- Private insurance parity
- SB1351 study

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## Challenges and Gaps

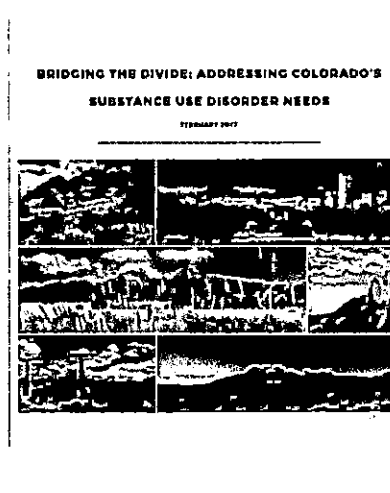
- Highly regulated and underfunded, even for priority populations
  - Pregnant and post-partum women
  - Justice-involved men and women
- Workforce shortages
  - 22 vacant clinical positions
  - 50% staff turnover rate

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## Challenges and Gaps

*"The field is experiencing high turnover rates, worker shortages, inadequate compensation, and insufficient training especially for trauma-informed care, medication assisted treatment, and treatment for adolescents. Workforce vacancies for master's level clinicians, counselors and social workers; nurses; peer support specialists; and mobile crisis staff all contribute to many of the service gaps identified by stakeholders across the regions."*



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## Policy Recommendations

- Statewide solution to expand workforce
  - Tuition assistance
  - Loan forgiveness
  - Training
- Funding models that cover the true cost of services
- Support patient-centered programs, based on readiness to change

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