



# Rocky Mountain HIDTA Overview

For

Legislative Study Committee on Opioids and Other SUDs

August 7, 2023

# ONDCP Mission

OFFICE OF NATIONAL DRUG CONTROL POLICY

Reducing substance use disorder and its consequences by:

- Developing and implementing the *National Drug Control Strategy*
- Coordinating and overseeing the National Drug Control Budget
- Administering the High Intensity Drug Trafficking Areas (HIDTA) and Drug-Free Communities (DFC) Support programs

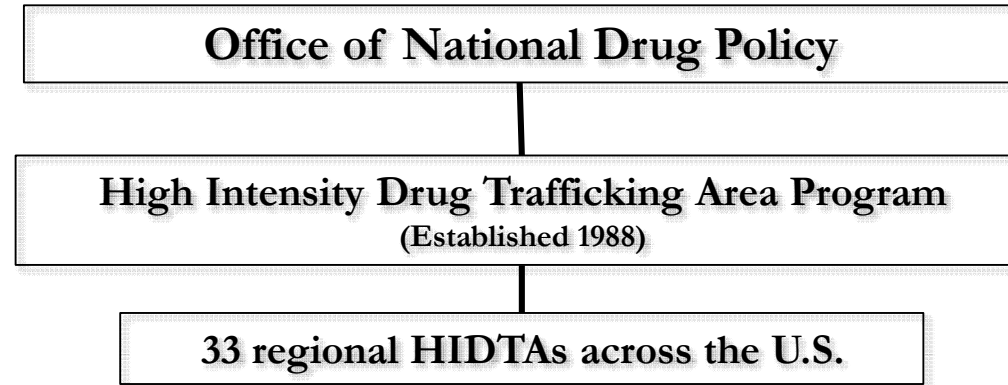


# National HIDTA Program

- The placement and structure of the HIDTA Program within ONDCP was part of the original authorizing statute ( Anti-Drug Abuse Act) passed by Congress in 1988
- Partnership of federal, state, local, and tribal law enforcement agencies
  - Federal grant funds to critical drug trafficking regions of the U.S.
- HIDTA is not a typical grant program as it funds strategies developed and implemented at the local levels
- Support law enforcement efforts through the HIDTA Program to disrupt and dismantle domestic drug trafficking networks and support initiatives to advance coordinated responses in designated areas



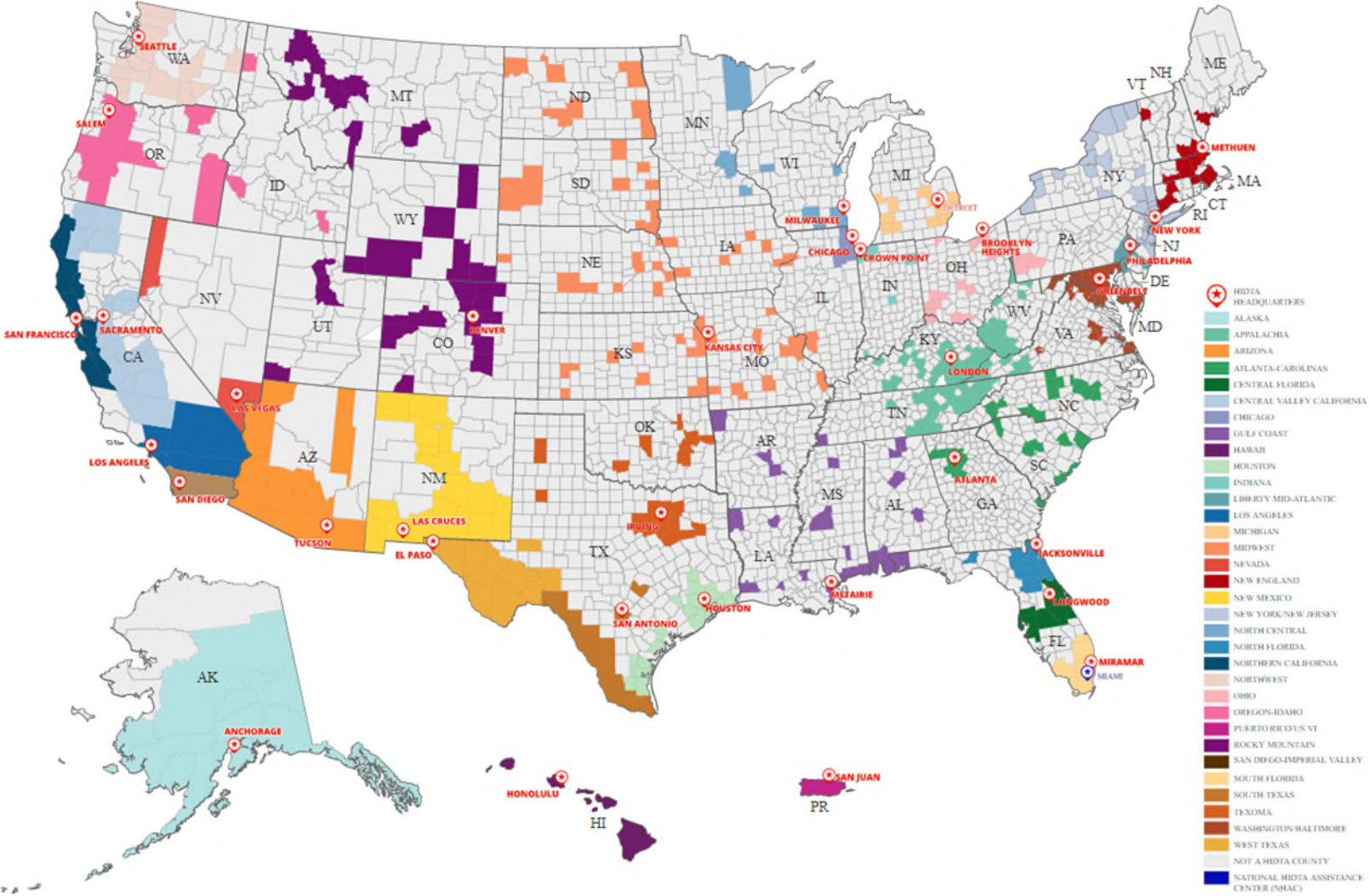
# HIDTA Program Nationally



Appalachia HIDTA - London, KY (1998)  
Alaska HIDTA - Alaska (2018)  
Atlanta-Carolinas HIDTA - Atlanta, GA (1995)  
Central Florida HIDTA - Sanford, GA (1998)  
Central Valley HIDTA - Rancho Cordova, CA (1999)  
Chicago HIDTA - Chicago, IL (1995)  
Gulf Coast HIDTA - Metairie, LA (1996)  
Hawaii HIDTA - Honolulu, HI (1999)  
Houston HIDTA - Houston, TX (1990)  
Indiana HIDTA - Crown Point, IN (1996)  
Los Angeles HIDTA - Los Angeles, CA (1990)  
Michigan HIDTA - Detroit, MI (1997)  
Midwest HIDTA - Kansas City, MO (1996)  
Nevada HIDTA - Las Vegas, NV (2001)  
New England HIDTA - Methuen, MA (1999)  
New York/New Jersey HIDTA - New York, NY (1990)  
North Florida HIDTA - Jacksonville, FL (2001)

Northern California HIDTA - San Francisco, CA (1997)  
Northwest HIDTA - Seattle, WA (1997)  
Ohio HIDTA - Brooklyn Heights, OH (1999)  
Oregon-Idaho HIDTA - Salem, OR (1999)  
Liberty Mid-Atlantic HIDTA- Philadelphia, PA (1995)  
Puerto Rico/U.S. Virgin Islands HIDTA - San Juan, PR (1994)  
Rocky Mountain HIDTA - Denver, CO (1996)  
South Florida HIDTA - Miramar, FL (1990)  
Southwest Border HIDTA Region: (1990)  
    Arizona HIDTA - Tucson, AZ  
    New Mexico HIDTA - Las Cruces, NM  
    San Diego / Imperial HIDTA - San Diego, CA  
    South Texas HIDTA - San Antonio, TX  
    West Texas HIDTA - El Paso, TX  
Texoma HIDTA - Irvin, TX (1998)  
    \* Note: Renamed from North Texas in 2013  
Washington/Baltimore HIDTA - Greenbelt, MD (1994)  
North Central HIDTA - Milwaukee, WI (1998)

# 33 HIDTAs

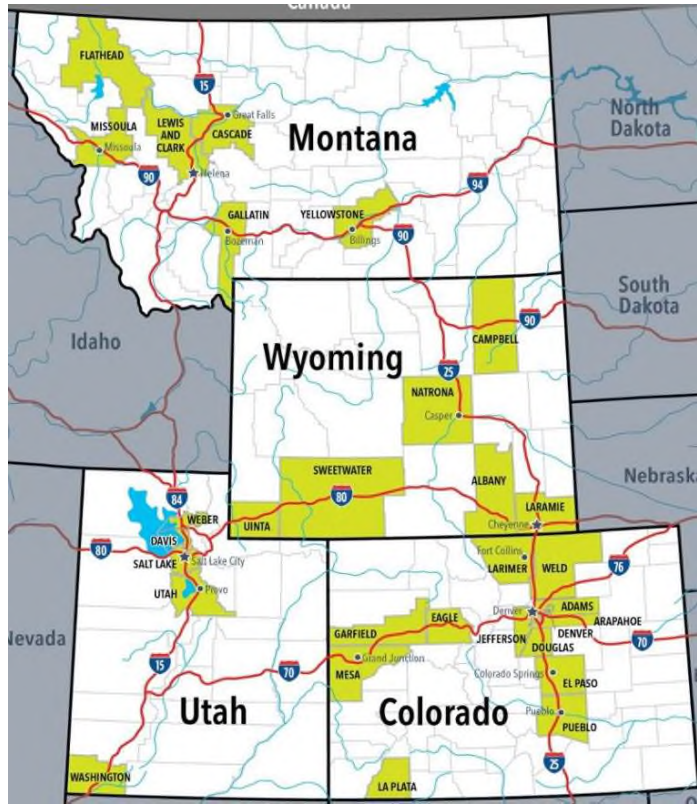


## HIDTA - 2022

- 22.3 billion dollars (wholesale value) worth of illicit narcotics seized (fentanyl, heroin, prescription drugs, methamphetamine, cocaine, marijuana)
- More than 44 million dosage units and 13,657 pounds of fentanyl seized (287% and 38% increases over 2021)
- 31,243 firearms seized from illicit drug trafficking groups
- 9,135 drug trafficking organizations (DTOs) investigated
- Over 500 public health agencies were coordinated with under the National Overdose Response Strategy (ORS), which is a partnership between the HIDTA Program and the CDC Foundation to focus on reducing drug overdoses



# Rocky Mountain HIDTA



- *Four state HIDTA: Montana, Wyoming, Utah and Colorado*
- *Area : 434,000 square miles, 545 miles of border with Canada*
- *Region's population : 11 million, most dense areas are Denver, Colorado Springs, Salt Lake City Metro, Cheyenne and Billings*
- *19 Native American Tribes (UT – 8, MT – 7, CO- 2, WY – 2)*
- *30 counties designated, 31 initiatives: 24 Investigative Task Forces, four DHE teams and three support groups (Management, ISC, Training)*
- *13 Initiatives in Colorado (12 Investigative and one Interdiction)*
- *2023 region's, which includes Colorado top drug threat is illicit fentanyl*
- *More than 600% increase in ODMAP user accounts in Colorado*

# Rocky Mountain Region TF Seizures





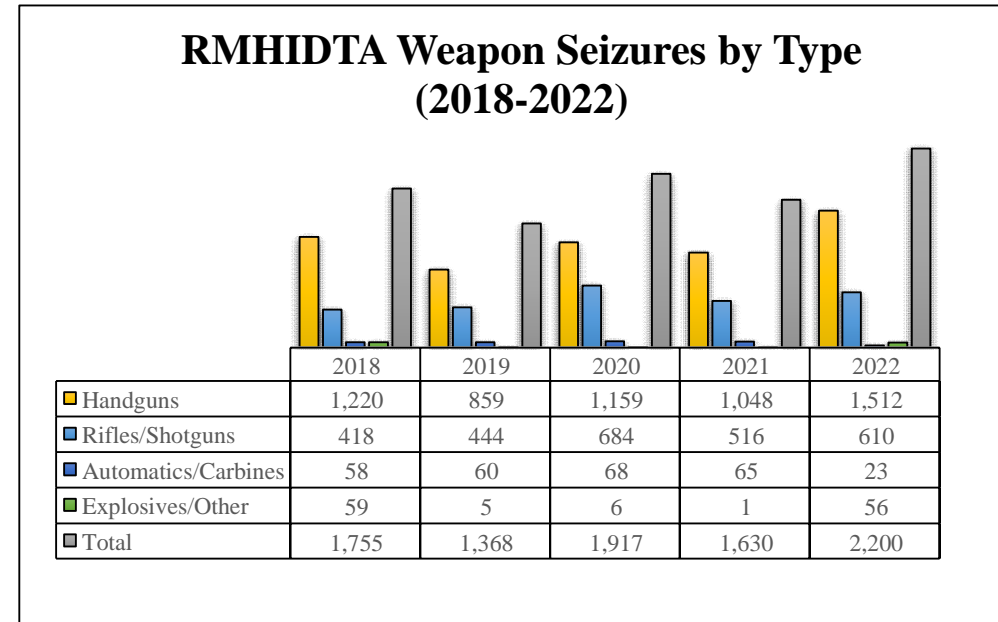
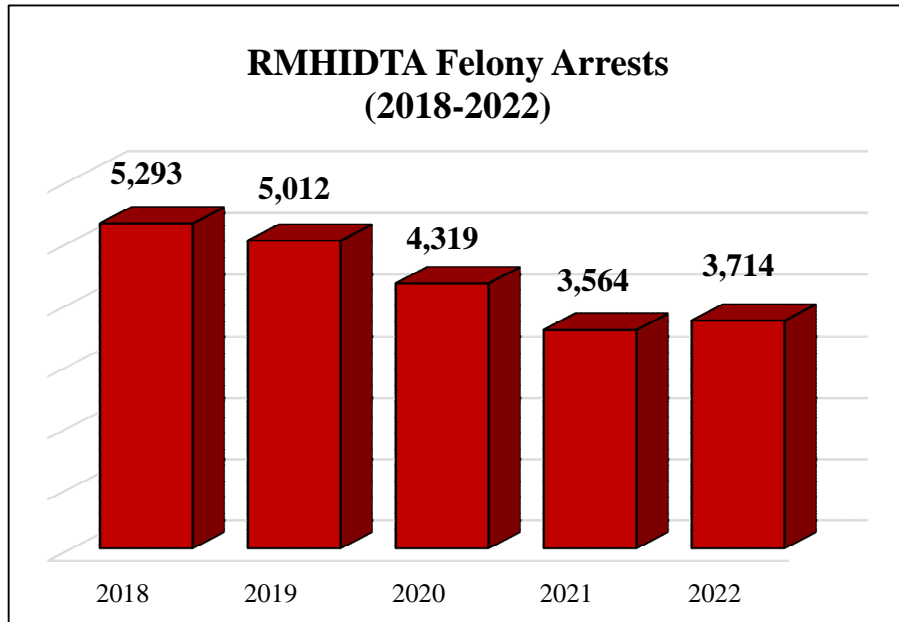


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# RMHIDTA Region 2022 Reported Statistics

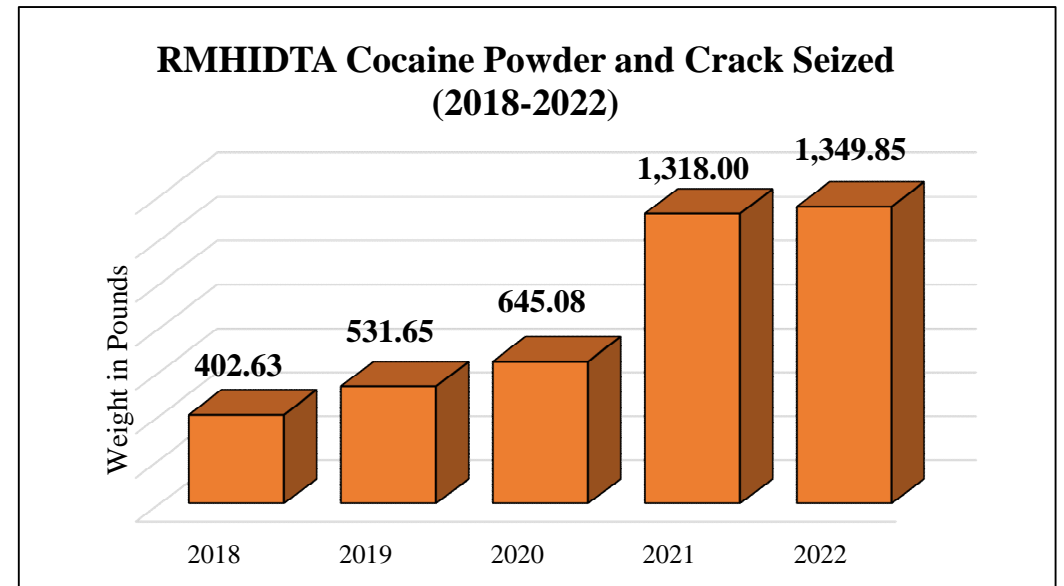
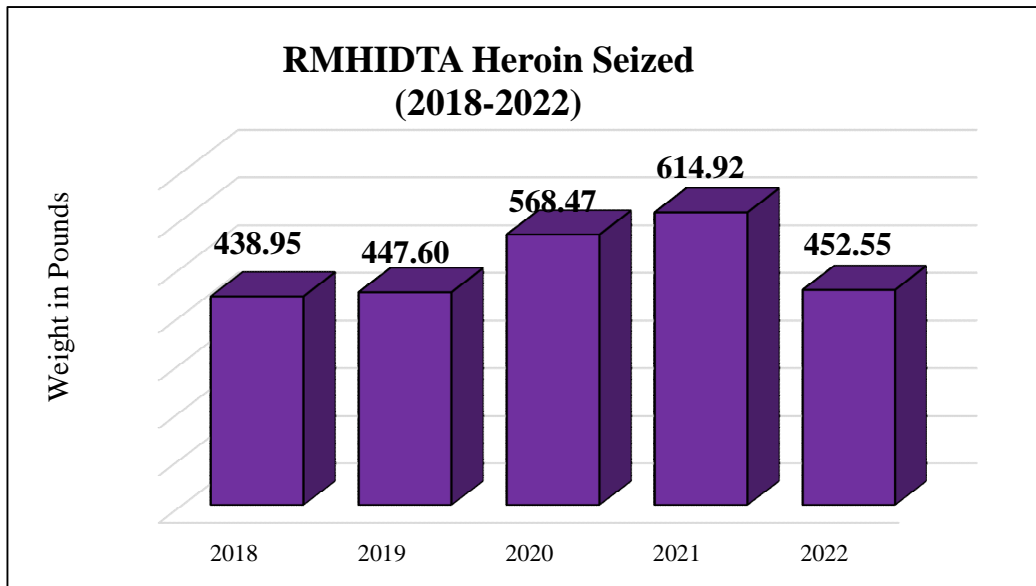
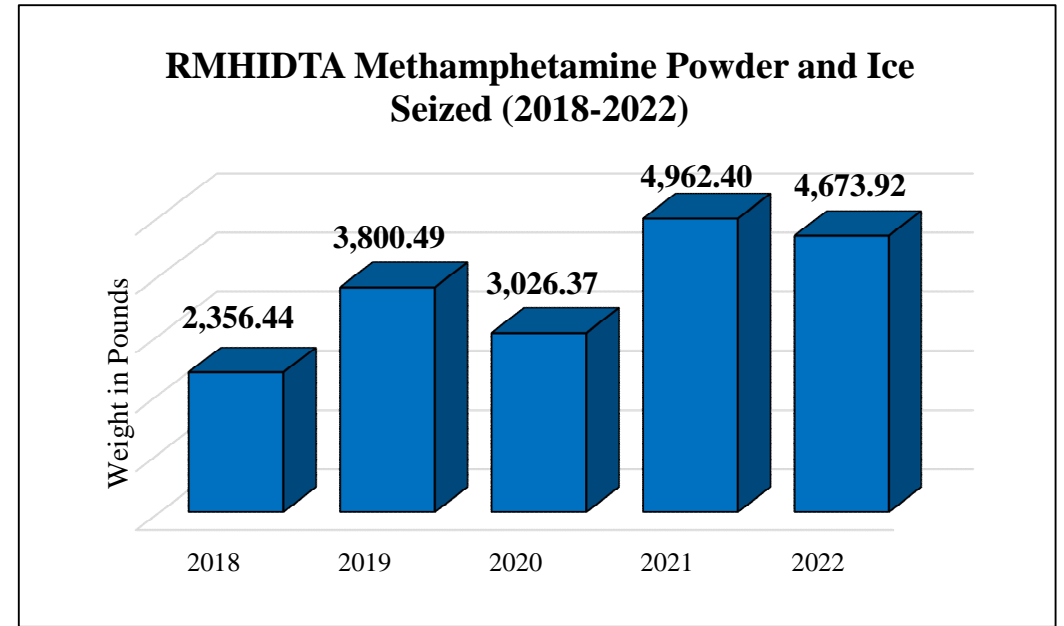
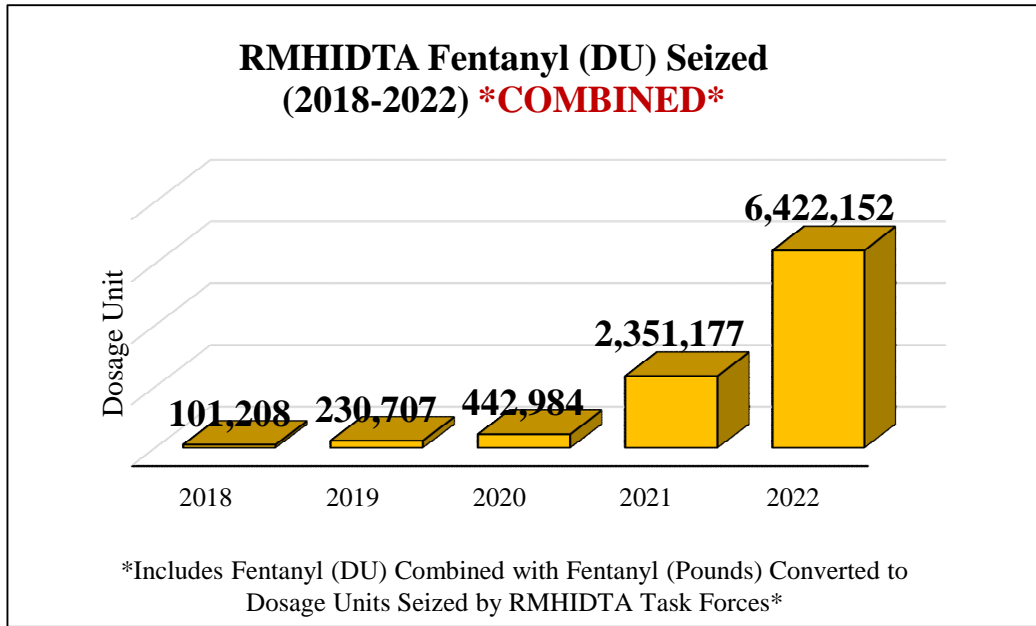
Year	Felony Arrests	Fentanyl (DU)	Fentanyl (Pounds)	Heroin	Cocaine	Meth	Bulk Marijuana	Marijuana Edibles (DU)	Marijuana (Plants)	Halluc (DU)	Halluc (Pounds)	Pharma (DU)	Pharma (Pounds)	Weapons
2018	5,293	4,644	21.29	438.95	402.63	2,356.44	27,948	27,703	60,903	268,488	105.67	107,986	0.00	1,755
2019	5,012	30,210	44.20	447.60	531.65	3,800.49	23,852	35,288	68,926	91,345	3.52	109,586	0.00	1,368
2020	4,319	110,802	73.23	568.47	645.08	3,026.37	19,168	95,639	86,601	13,124	237.22	121,139	33.96	1,917
2021	3,564	622,507	381.11	614.92	1,318.00	4,962.40	25,683	52,440	23,895	8,752	295.05	27,822	19.49	1,630
2022	3,714	1,827,910	1,012.86	452.55	1,349.85	4,673.92	25,614	14,567	9,565	9,058	162.04	15,826	25.57	2,200

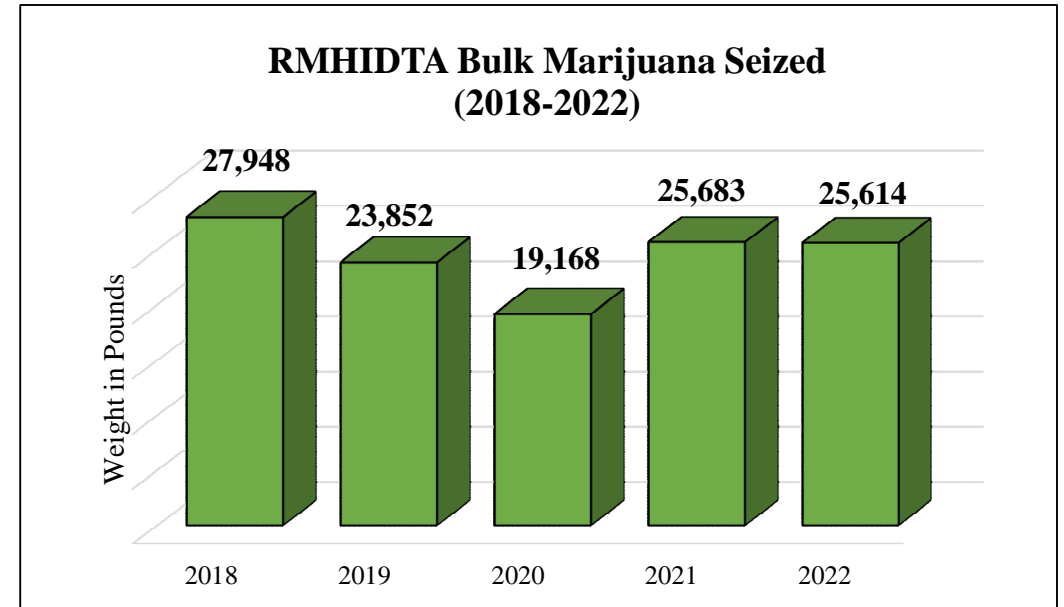
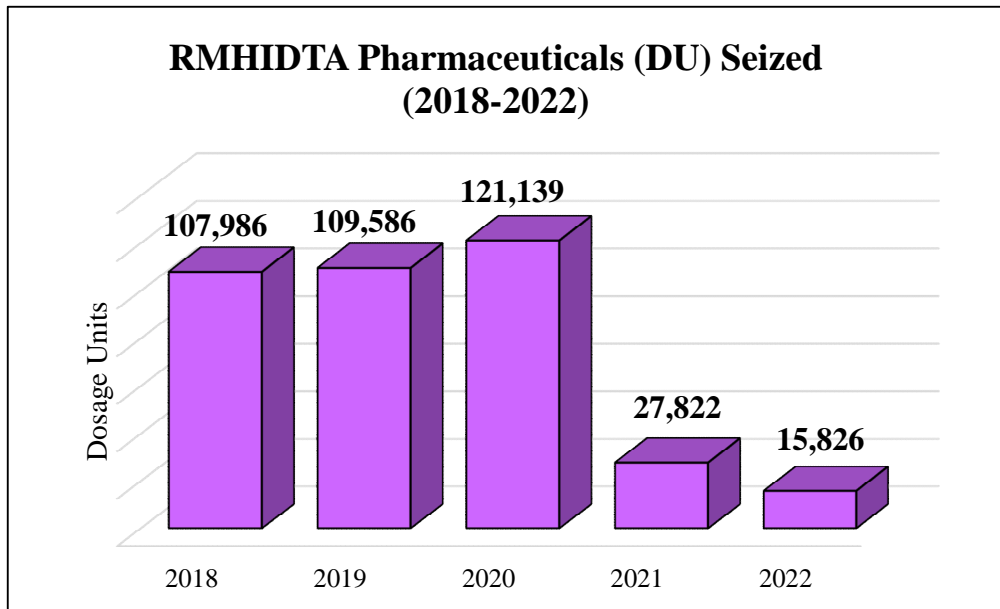
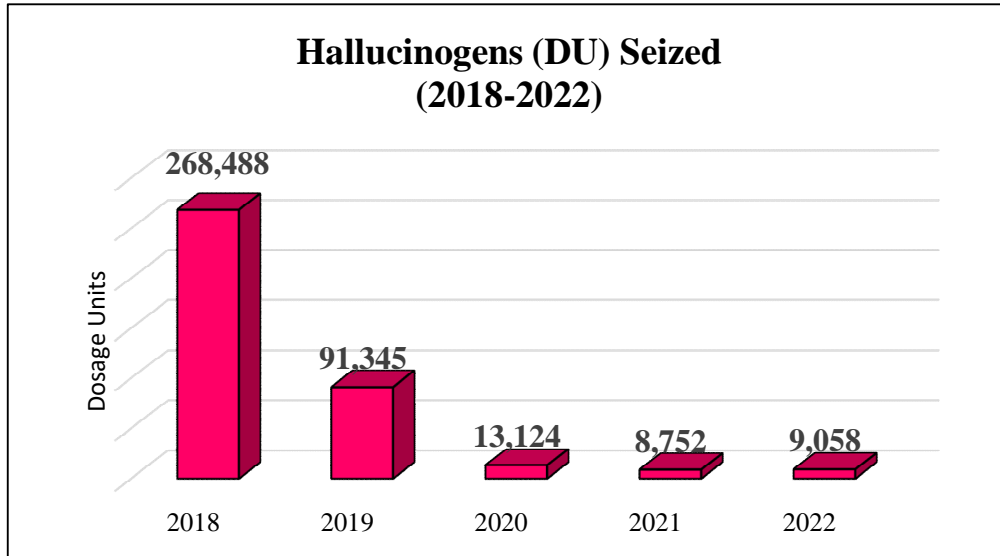
DU = Dosage Units    *Seizures in pounds unless noted.*



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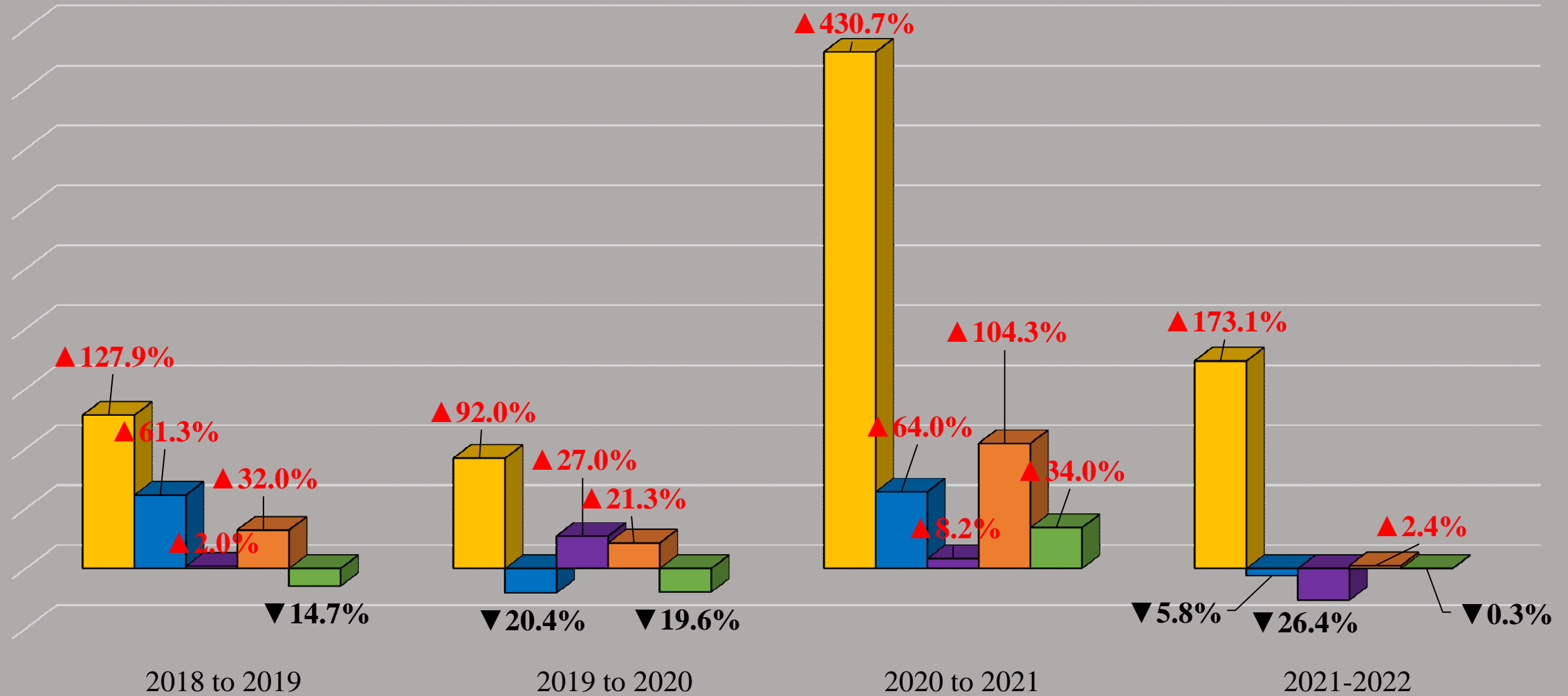
INCLUDES INVESTIGATIVE AND INTERDICTION DATA





# RMHIDTA: Percent Change of Seizures in Pounds for Top Drug Threats

Fentanyl   Meth   Heroin   Cocaine   Marijuana



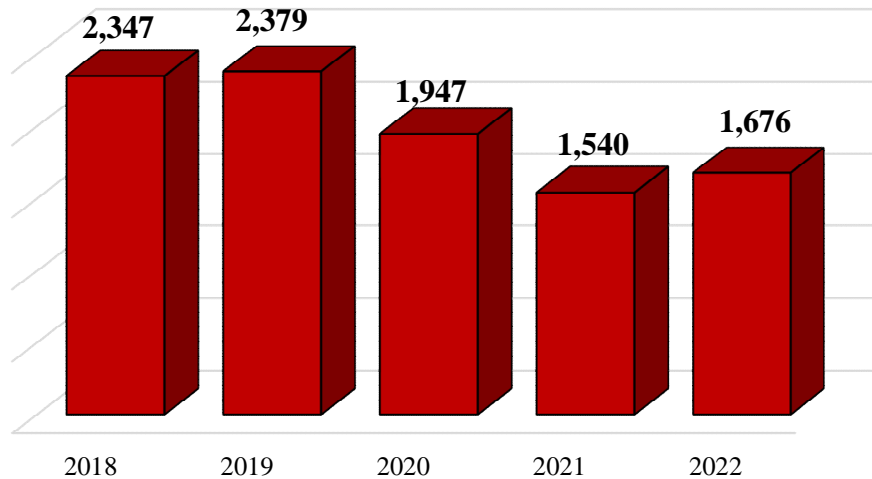


# Colorado 2022 Reported Statistics

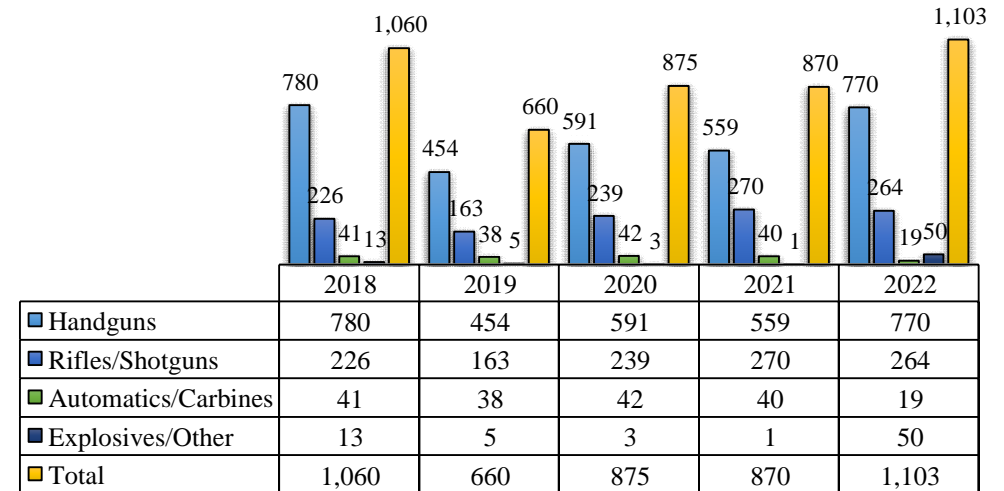


	Felony Arrests	Fentanyl (DU)	Fentanyl (Pounds)	Heroin	Cocaine	Meth	Bulk Marijuana	Marijuana Edibles (DU)	Marijuana (Plants)	Halluc (DU)	Halluc (Pounds)	Pharma (DU)	Pharma (Pounds)	Weapons
2018	2,347	2,540	0.35	213.73	255.83	1,143.58	13,694	4,265	60,090	12,149	0.14	46,787	0.00	1,060
2019	2,379	14,861	40.42	235.06	389.73	1,786.66	16,327	15,119	68,600	32,015	1.25	50,397	0.00	660
2020	1,947	84,317	66.09	409.44	591.13	1,675.17	12,153	4,250	86,524	4,951	184.90	102,658	28.48	875
2021	1,540	360,158	285.96	424.92	1,112.93	2,878.89	9,304	417	23,770	2,225	68.65	16,580	4.22	870
2022	1,676	923,996	835.35	141.32	664.73	1,781.47	6,833	1,271	6,037	1,465	48.19	4,023	7.47	1,103

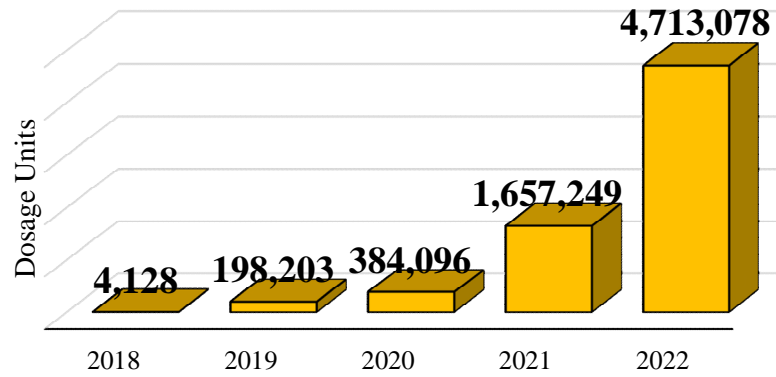
**Colorado Felony Arrests  
(2018-2022)**



**Colorado Weapon Seizures by Type  
(2018-2022)**

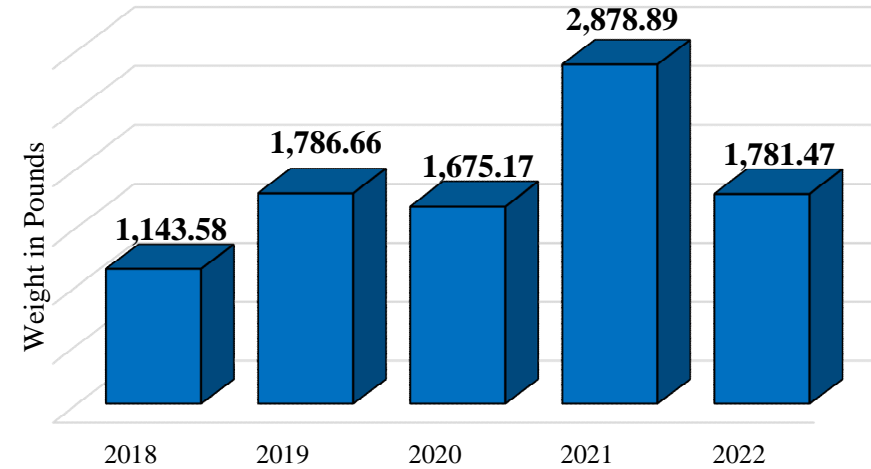


### Colorado Fentanyl (DU) Seized (2018-2022) ~COMBINED~

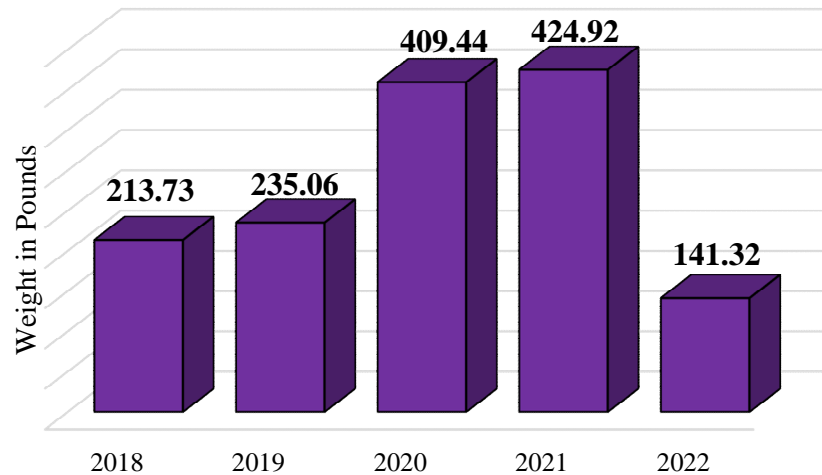


~Includes Fentanyl (DU) Combined with Fentanyl (Pounds) Converted to Dosage Units Seized by RMHIDTA Colorado Task Forces~

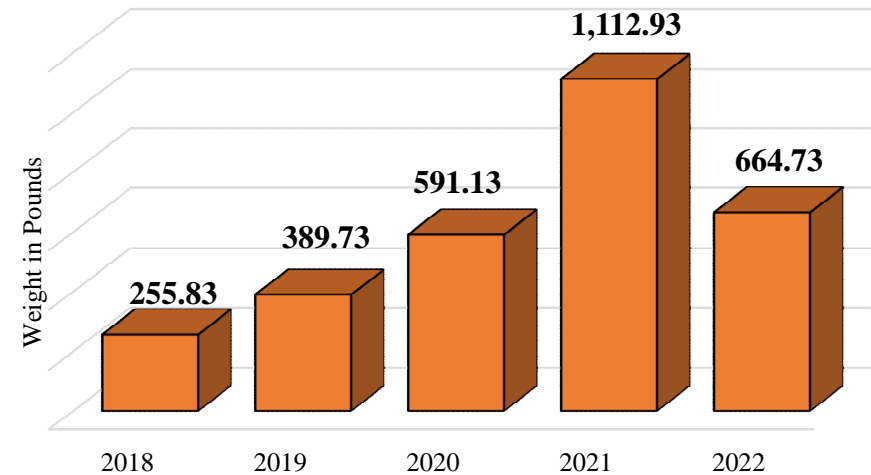
### Colorado Methamphetamine Powder and Ice Seized (2018-2022)



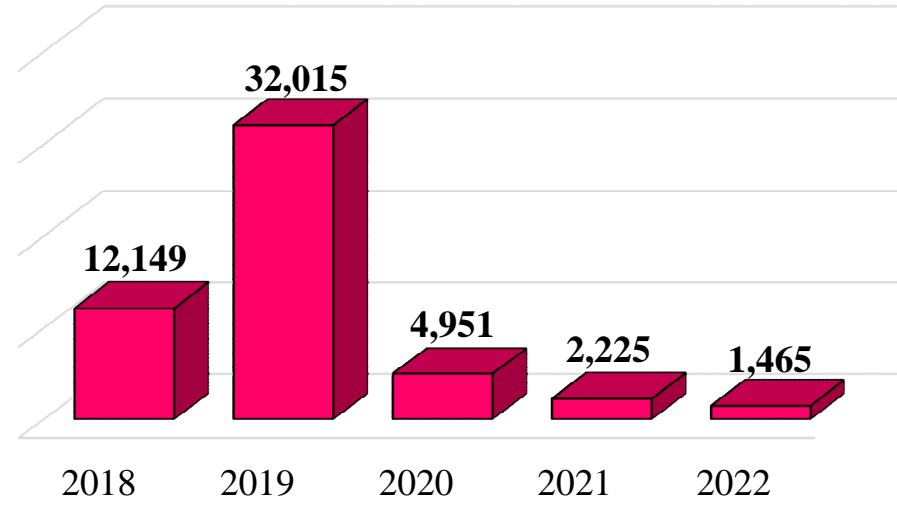
### Colorado Heroin Seized (2018-2022)



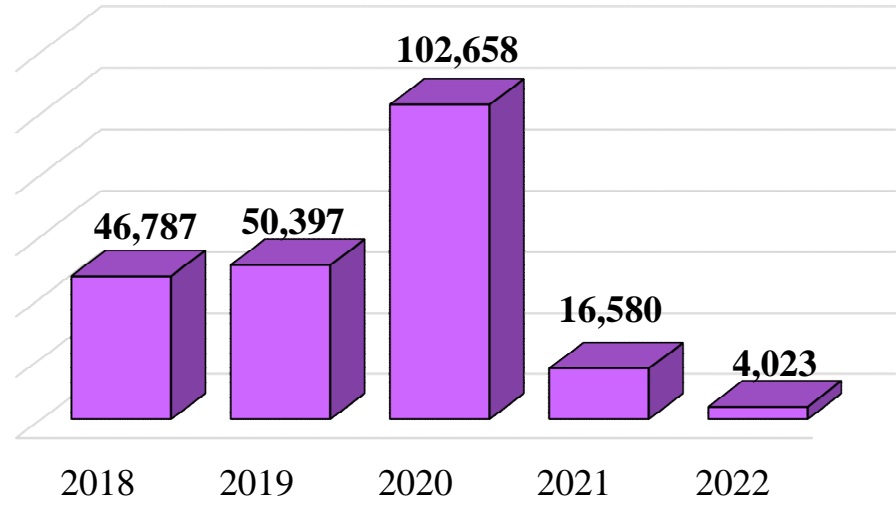
### Colorado Cocaine Powder and Crack Seized (2018-2022)



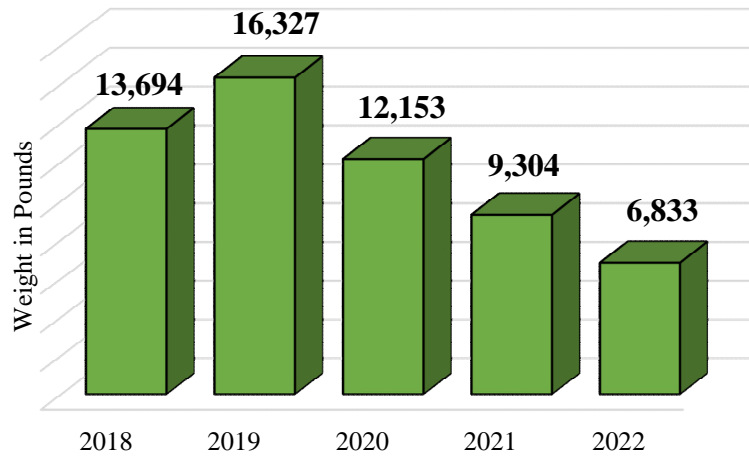
**Hallucinogens (DU) Seized  
(2018-2022)**



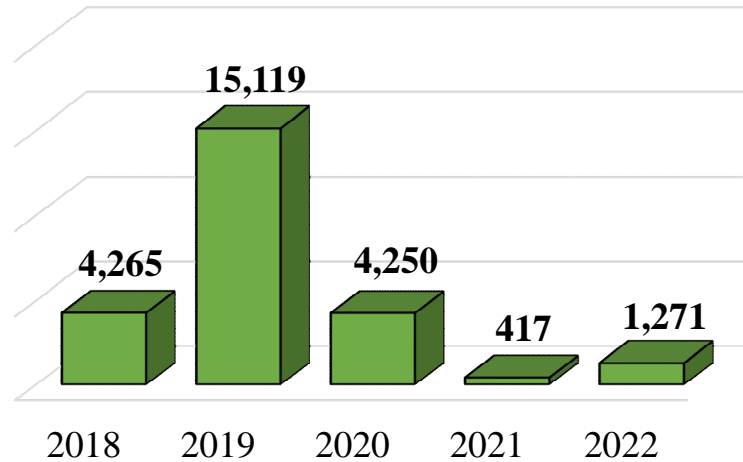
**Pharmaceuticals (DU) Seized  
(2018-2022)**



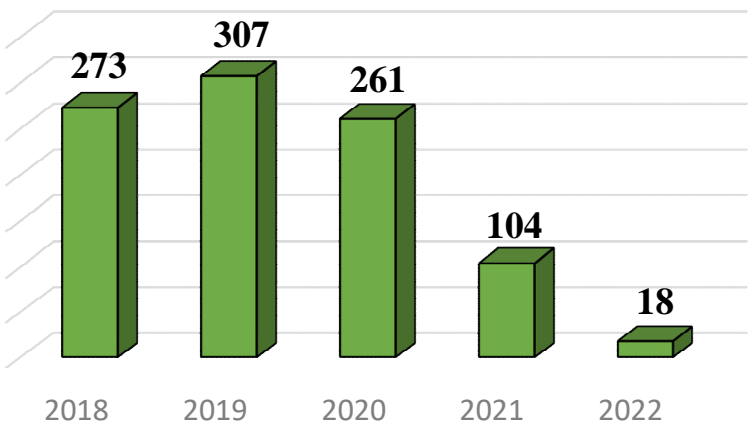
**Colorado Bulk Marijuana Seized  
(2018-2022)**



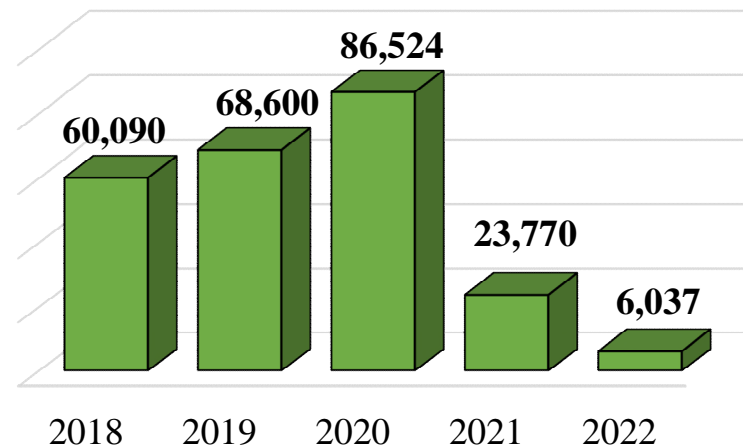
**Colorado Marijuana Edibles (DU) Seized  
(2018-2022)**



**Colorado Marijuana-Related Felony  
Arrests**



**Colorado Marijuana Plants Seized  
(Indoor/Outdoor)**



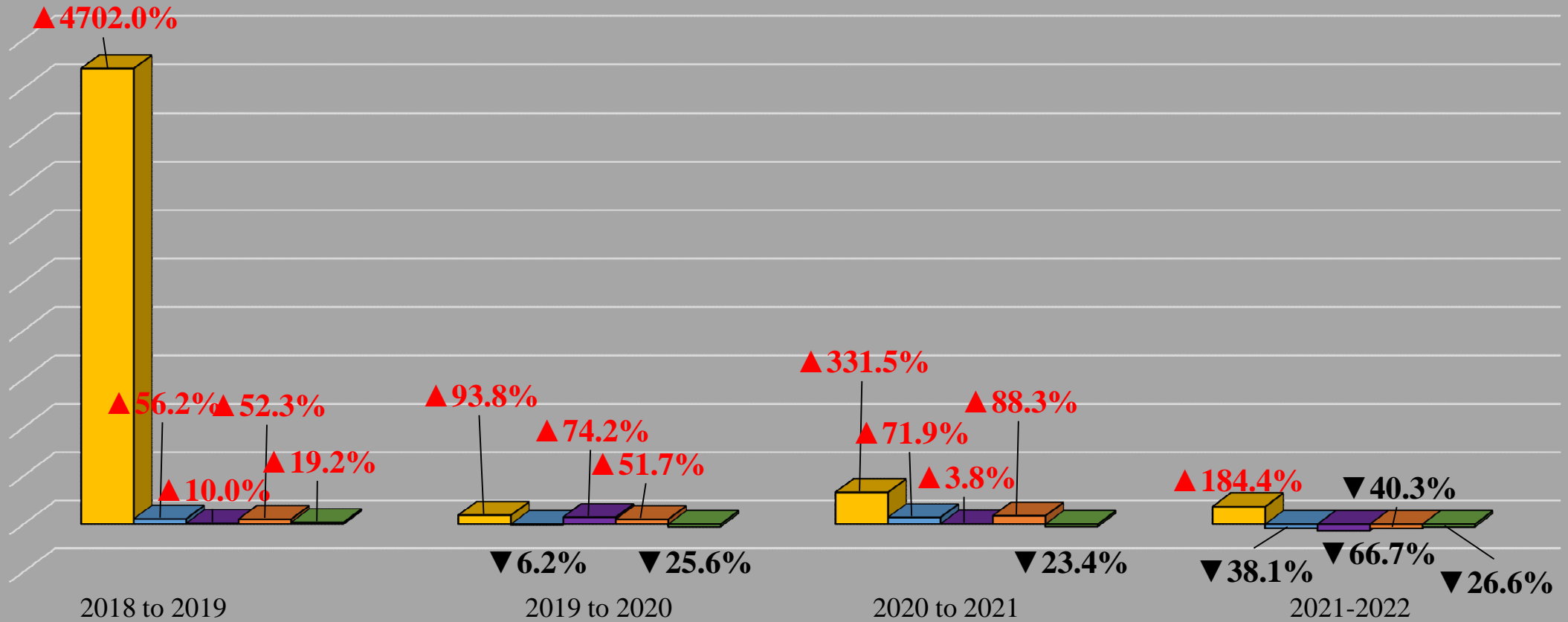
**Colorado Marijuana Facts**

- Seizures of bulk marijuana decreased 50% from 2018-2022.
- Marijuana edibles seized in 2022 increased 205% over 2021, representing the sole increase in marijuana-related seizures in 2022. Overall edible seizures remain down 70% from 2018-2022.
- Plants seizures (both indoor and outdoor) decreased 90% from 2018-2022.
- Marijuana-related felony arrests decreased 93% from 2018-2022.



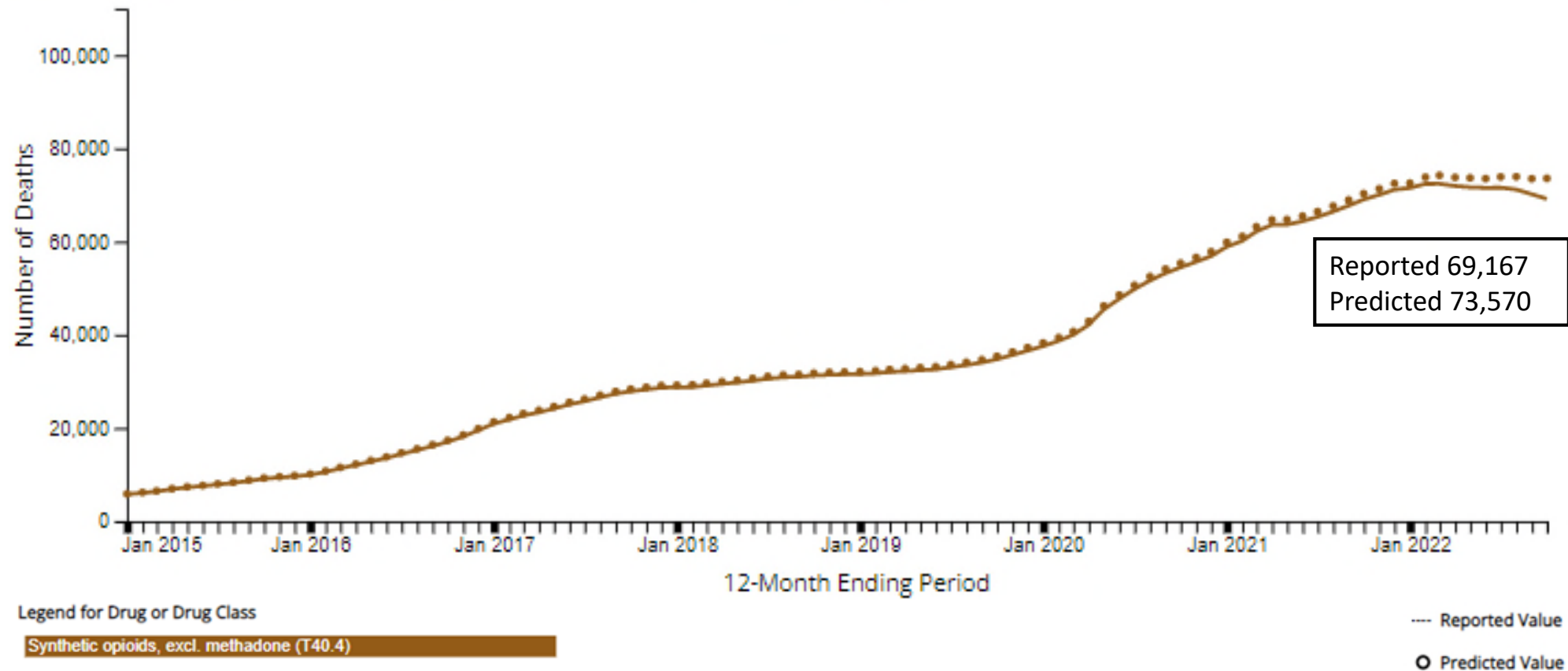
## Colorado: Percent Change of Seizures in Pounds for Top Drug Threats

■ Fentanyl   
 ■ Meth   
 ■ Heroin   
 ■ Cocaine   
 ■ Marijuana



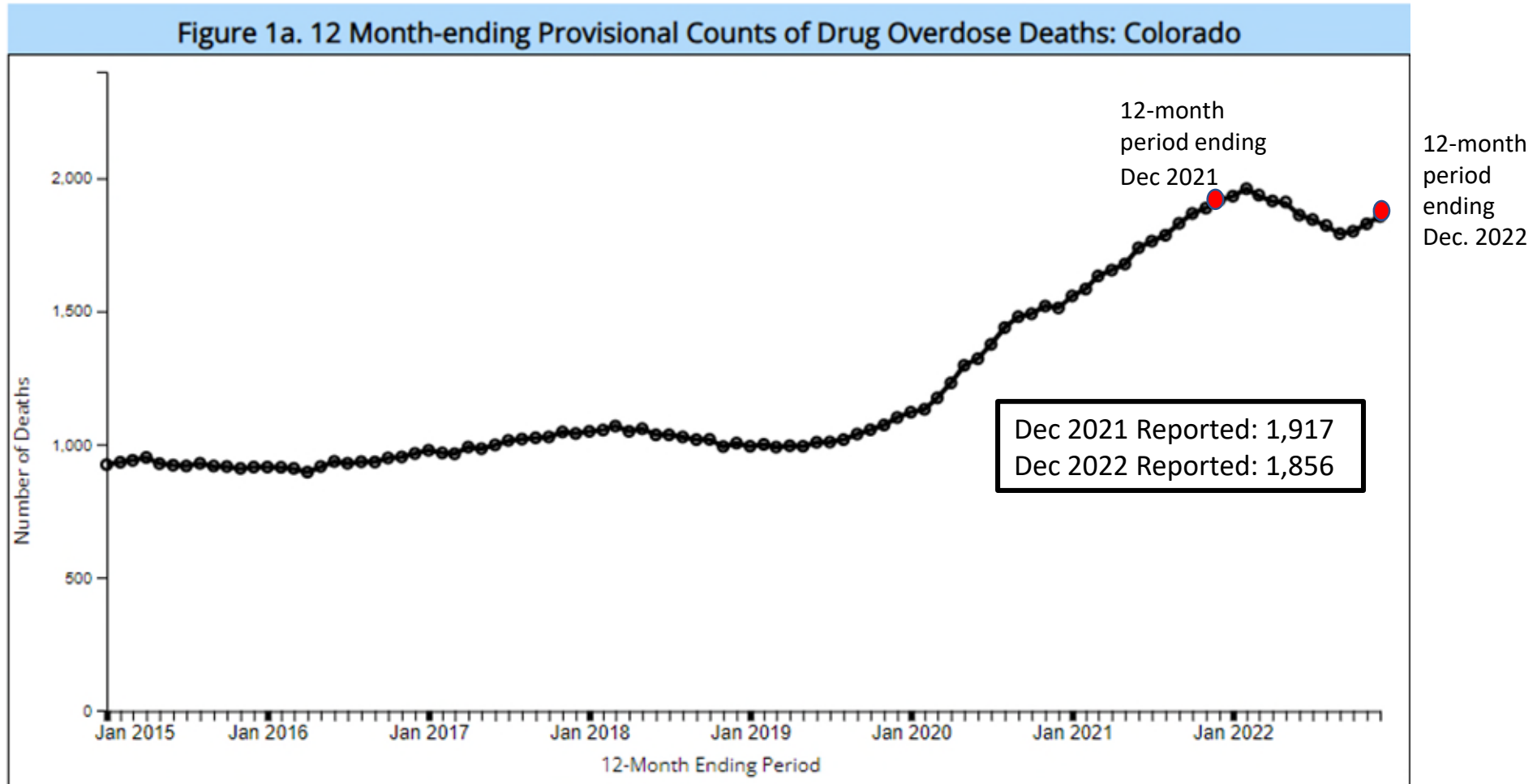
# Oct 2021 to Oct 2022 Provisional Number of Drug Overdose Deaths by Synthetic Opioids (excl. Methadone)

Figure 2. 12 Month-ending Provisional Number of Drug Overdose Deaths by Drug or Drug Class: United States



# Colorado

## December 2021 to December 2022 Provisional Number of Drug Overdose Deaths by Synthetic Opioids (excl. Methadone)



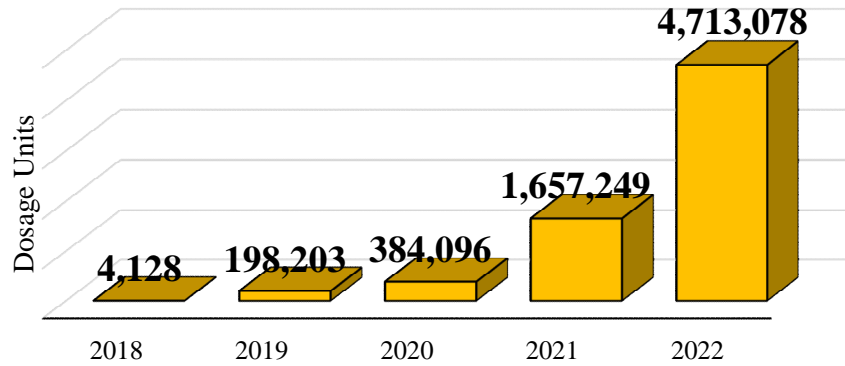
Legend for Drug or Drug Class

Synthetic opioids, excl. methadone (T40.4)



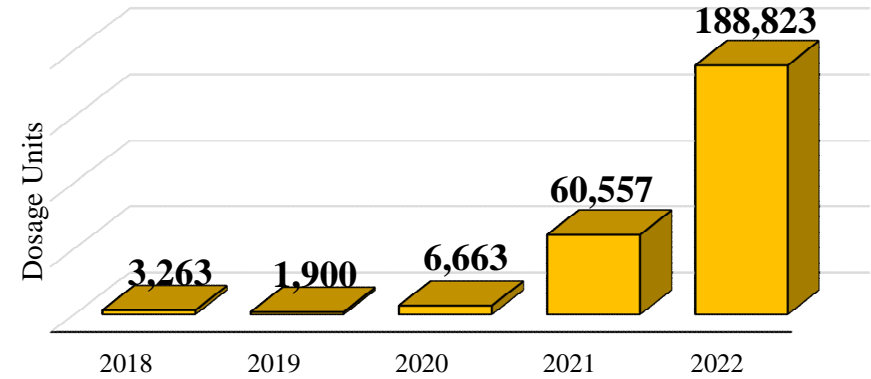
Illicit Fentanyl

### Colorado Fentanyl (DU) Seized (2018-2022) \*COMBINED\*



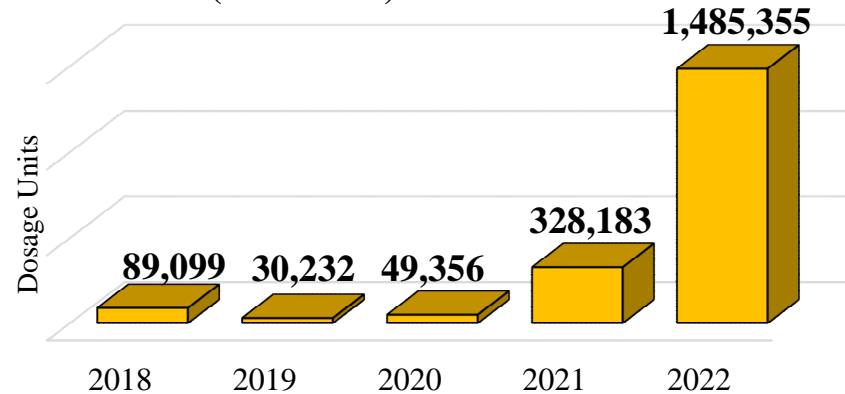
\*Includes Fentanyl (DU) Combined with Fentanyl (Pounds) Converted to Dosage Units Seized by RMHIDTA Colorado Task Forces\*

### Montana Fentanyl (DU) Seized (2018-2022) \*COMBINED\*



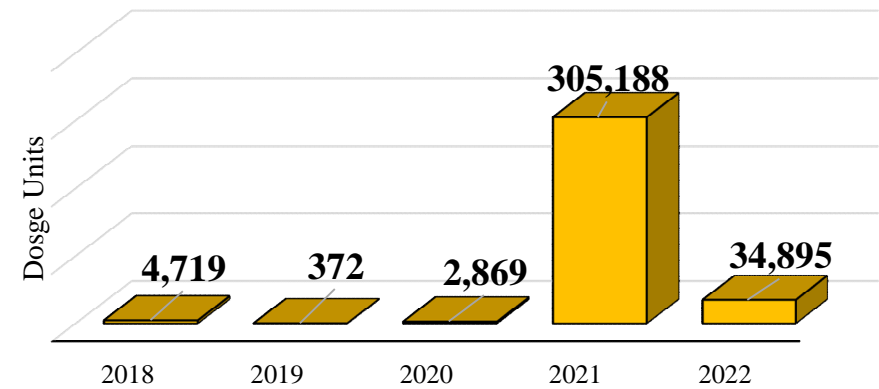
\*Includes Fentanyl (DU) Combined with Fentanyl (Pounds) Converted to Dosage Units Seized by RMHIDTA Montana Task Forces\*

### Utah Fentanyl (DU) Seized (2018-2022) \*COMBINED\*



\*Includes Fentanyl (DU) Combined with Fentanyl (Pounds) Converted to Dosage Units Seized by RMHIDTA Utah Task Forces\*

### Wyoming Fentanyl (DU) Seized (2018-2022) \*COMBINED\*



\*Includes Fentanyl (DU) Combined with Fentanyl (Pounds) Converted to Dosage Units Seized by RMHIDTA Wyoming Task Forces\*

# 2023 Drug Trends

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- In the first two quarters (**Provisional data**) of 2023 RMHIDTA task forces in Colorado:
  - Seized 77% of total 2022 fentanyl seizures. More than 3.6 million DU (combined)
  - just 16% of 2022 methamphetamine seizures
  - 13% of 2022 marijuana seizures
  - 40% of pharmaceutical seizures
  - 3% of 2022 hallucinogen seizures
  - Carried out 80% of 2022 total arrests
  - 2023 cocaine and heroin seizures are following the same trend as 2022, with roughly 45% of total 2022 seizures

\*Fentanyl powder seizures are occurring with more frequency across the region, especially in CO. Of the four states that make up RMHIDA (CO, MT, UT, WY) 87% of fentanyl powder seizures occurred in CO in 2022, and thus far nearly 60% in 2023

\*Fentanyl continues to experience a steep decrease in dosage unit prices, ranging between \$3 and \$10 per pill in 2022, down from \$15 - \$30 in 2018

\*Xylazine (also known as “tranq”) has been confirmed in Colorado. Xylazine is typically part of a polydrug compound containing fentanyl. RMHIDTA continues to closely collaborate with our Drug Intelligence Officers (DIOs) and public health partners to monitor this emerging trend.

# OVERDOSE RESPONSE STRATEGY

The Overdose Response Strategy is an unprecedented and unique collaboration between public health and public safety, created to help local communities reduce drug overdoses and save lives by sharing timely data, pertinent intelligence and innovative strategies.

The ORS is implemented by joint teams made up of Drug Intelligence Officers and Public Health Analysts, who work together on drug overdose issues within and across sectors, states and territories. By sharing information across sectors, the ORS is growing the body of evidence related to early warning signs and prevention strategies. With the information shared, and programs inspired by the ORS, we are helping communities and individuals make healthier, safer choices.

The mission of the Overdose Response Strategy is to help communities reduce fatal and non-fatal drug overdoses by connecting public health and public safety agencies, sharing information, and supporting evidence-based interventions.



To learn more visit [hidtaprogram.org/ORS.php](https://hidtaprogram.org/ORS.php)  
Funded by the Office of National Drug Control Policy and  
the Centers for Disease Control and Prevention



**Collaborate** across public health and public safety sectors



**Share** data, insights, and trends related to drug overdose in our communities



**Inform & help** local communities develop local solutions to reduce overdoses and save lives

## THE PROBLEM

Between January 2021 and January 2022, it is estimated 107,375 people died of a drug-related overdose death, a 12.5% increase from the previous same 12-month period<sup>1</sup>. Despite increased surveillance efforts throughout the epidemic, a gap in cross-jurisdictional, near real-time data collection and analysis methodology for fatal and non-fatal overdose events remained until the development of the Overdose Detection Mapping Application Program (ODMAP).

## THE CONCEPT

ODMAP enables users to collect data on both suspected fatal and non-fatal overdoses, in near real-time, across jurisdictions, to mobilize a cohesive, data-driven, collaborative overdose response in their communities. Overdose events are added to the National Map, allowing agencies to look at overdoses across the country that impact their area of responsibility.

## CURRENT OVERVIEW

As of December 2022, over 4,200 agencies in all 50 states, the District of Columbia, and Puerto Rico are utilizing the system, and more than 1.64 million suspected overdoses have been entered. Due to the success of the program, ODMAP has a community of over 27,000 users. ODMAP has evolved significantly, with 30 statewide strategies across the country, including 20 active statewide application programming interfaces (APIs) pushing real-time data.

## HOW IT WORKS

ODMAP users (ex. public health, law enforcement, fire/EMS, and medical examiner/coroner) enter suspected overdose data into the system. There are four required data points to submit a suspected overdose: 1) date/time of the incident, 2) location of the incident, 3) outcome (fatal/non-fatal), and, 4) whether or not naloxone was administered.

Agencies are encouraged to enter additional information, such as if there are multiple overdose victims or if they were transported to the hospital. No Protected Health Information (PHI) is collected on the victim or location.

ODMAP users can be granted access to a secure server to view the National Map, which features filtering tools for analytical purposes. Additionally, users can elect to receive email notifications when an overdose spike, defined specifically for each county, occurs within a 24-hour period. The spike notification system is designed to help public health and public safety entities mobilize a response to affected areas including treatment and prevention strategies.

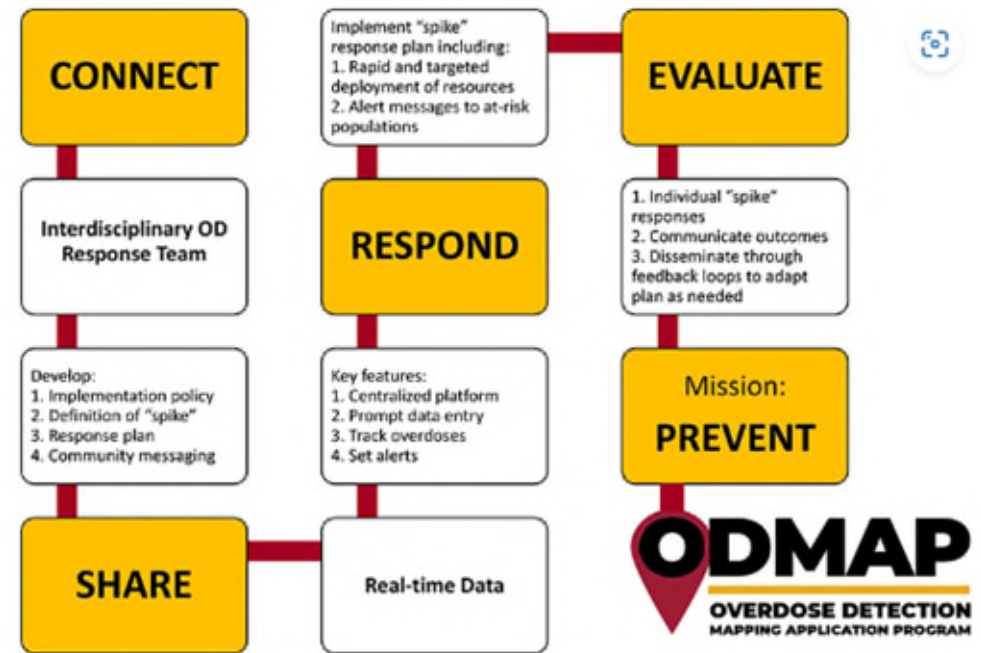
ODMAP is a mobile-friendly tool, capable of being used in the field on any mobile device or data terminal. Agencies can also connect their local Record Management System (RMS) to ODMAP via an API.

Agencies sign a teaming agreement and can upload data and view the map in near real-time once they have completed the agency application process and have been approved. If your agency is interested in joining ODMAP, please click here complete the form.

**PROGRAM SUMMARY**

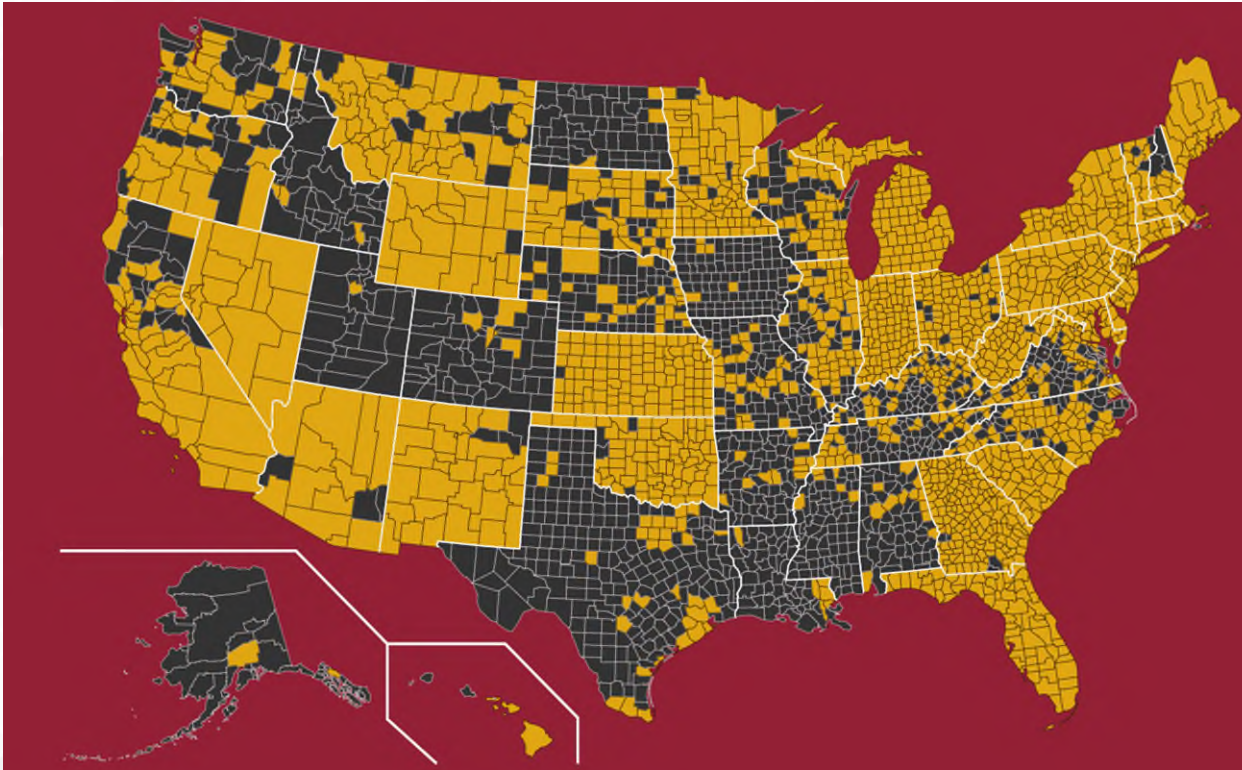
**ODMAP**  
OVERDOSE DETECTION  
MAPPING APPLICATION PROGRAM

FOR MORE INFORMATION go to [www.odmap.org](http://www.odmap.org)



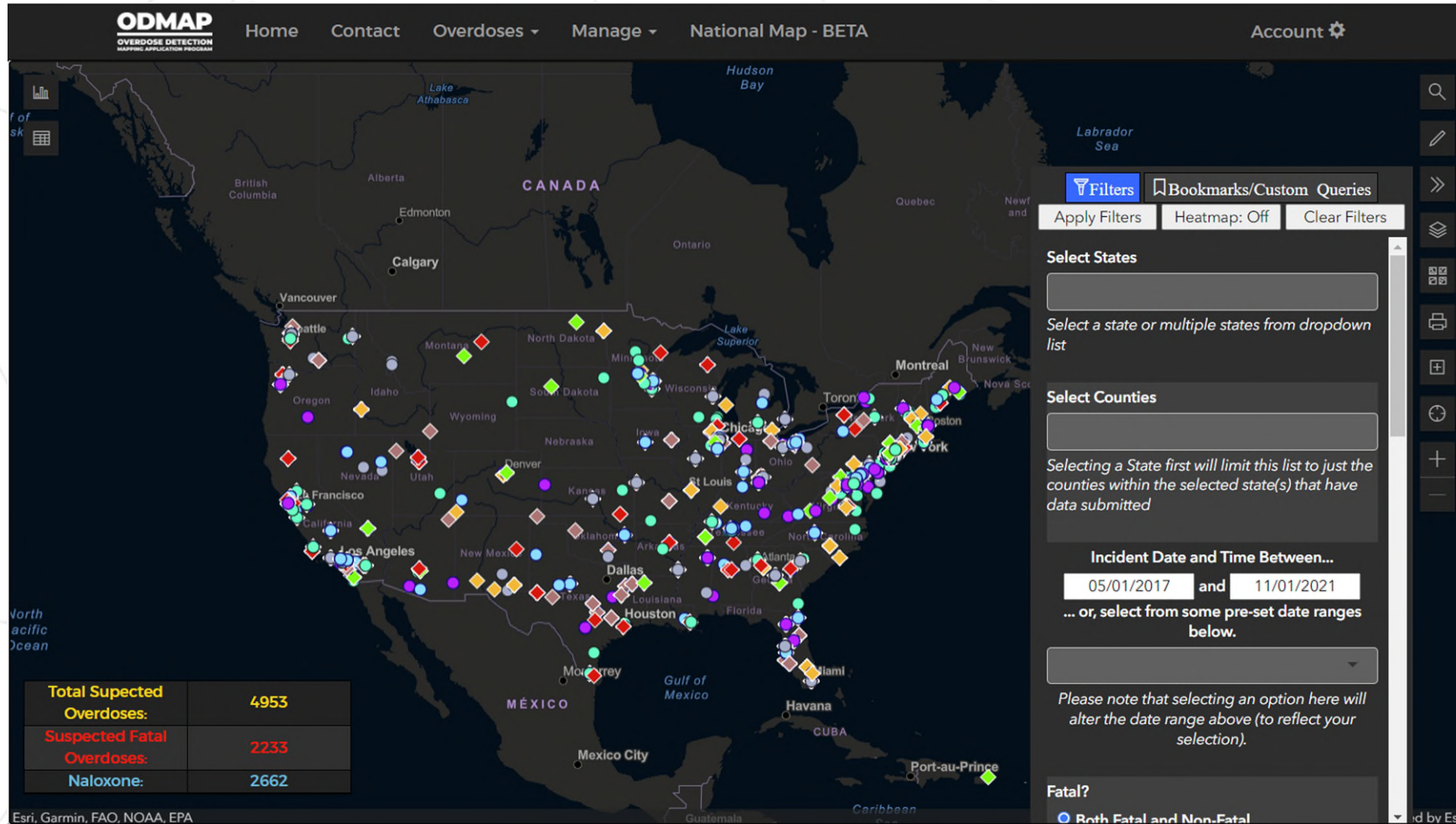


# ODMAP National Engagement



ODMAP has participating agencies  
in **all 50 states**, the **District of  
Columbia**, and **Puerto Rico**.

# National Map and Its Features



# RMHIDTA ORS and Prevention Efforts

- On August 2, 2023 ORS Team (DIOs/PHAs) from Colorado hosted a public safety and health engagement (drug information opportunity symposiums) in Colorado Springs. Successful event in bringing together law enforcement, prevention, treatment and harm reduction professionals
- RMHIDTA Training in collaboration with ADAPT conducted a Youth Substance Use Prevention Use Institute May 17- 18, 2023. RMHIDTA coupled prevention training with school appearances, town hall and other media outreach, in total over 3,000 people reached.



**2023 Colorado Drug Information Opportunity Symposium**



[www.hidta.org](http://www.hidta.org) [www.ors.org](http://www.ors.org) [www.rmhidta.org](http://www.rmhidta.org)

★ Chief Brandt discussing Evans PD's Co-Responder Program

★ Dr. Don Stader presenting on the myths, facts, and stigma of MAT/MOUD

Other topics include Addiction Science, Overdose Response Strategy Highlights, Drug Task Force, Recovery and Peer Support, and Panel Discussion

**Register Here!**  
[Colorado Drug Information Opportunity Symposium | Rocky Mountain HIDTA \(rmhidta.org\)](http://Colorado Drug Information Opportunity Symposium | Rocky Mountain HIDTA (rmhidta.org))

**August 2, 2023 • 8:30am-4:30pm**  
**Pikes Peak State College**  
**5675 S. Academy Blvd. Colorado Springs, CO 80906**



*A special thank you to Pikes Peak State College Police Dept for their partnership on this event*



**YOUTH SUBSTANCE USE PREVENTION INSTITUTE**  
FOR PUBLIC SAFETY & PUBLIC HEALTH

**REGISTER HERE!**

**MAY 17-18 2023**

**Up to 10.75 FREE**  
Continuing Education Units available!

**PURPOSE**  
To support public safety and public health professionals in engaging in substance use prevention activities with youth.

**OBJECTIVES**

1. Review substance use prevention fundamentals.
2. Introduce evidence-based prevention interventions for youth.
3. Examine opportunities for prevention in school and community settings.
4. Prepare participants to develop a community substance use prevention strategy that leverages public safety and public health partnerships.

**LAURA STACK**  
KEYNOTE SPEAKER

**WORKSHOPS!**  
START BUILDING YOUR COMMUNITY PREVENTION SYSTEM





Questions?

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