



COLLEGE OF SCIENCE & ENGINEERING

INSTITUTE OF BEHAVIORAL RESEARCH

Research and News Worth Repeating

Issue 14, February 22, 2021

Substance Use

Biden kills Trump plan on opioid-treatment prescriptions

The Washington Post – January 27, 2021

The Biden administration plans to cancel a last-minute plan by former President Donald Trump. The plan allowed more physicians the ability to prescribe buprenorphine, an opioid treatment drug, with the exemptions of an “X” waiver. This waiver is a two-decade-old requirement to undergo training before they could prescribe buprenorphine for opioid-use disorder. However, many physicians and Congress members suggested the waiver was outdated and inconvenient. The Biden administration stands by their decision and vow to continue working to increase access to buprenorphine, reduce overdose and save lives.

<https://www.washingtonpost.com/health/2021/01/27/biden-kills-buprenorphine-waiver/>

Oregon law to decriminalize all drugs goes into effect, offering addicts rehab instead of prison

USA Today – February 1, 2021

A recovering drug addict and now executive director of the Mental Health & Addiction Association of Oregon has created a new opportunity for many Oregonians. Janie Gullickson pushed for the passage of Measure 110 which is the first-of-its-kind legislation that decriminalizes the possession of all illegal drugs in Oregon, including heroin, cocaine, meth and oxycodone. This is a health-care-based approach for addicts that allows them treatment instead of prison time. Those in possession will be fined \$100, a citation that will be dropped if they agree to a health assessment. This law will be implemented over the next decade by the state officials at the Oregon Health Authority. Nationally, others are hopeful this could be the first in a wave of progressive measures that undo years of damage caused by drug criminalization, which disproportionately imprisoned people of color across the U.S.

<https://www.usatoday.com/story/news/nation/2021/02/01/oregon-decriminalizes-all-drugs-offers-treatment-instead-jail-time/4311046001/>

Rochester doctor indicted for manslaughter after opioids overdose death of patient

***Rochester First* – February 19, 2021**

A doctor in Rochester, New York was indicted by Attorney General Letitia James for manslaughter and other felonies related to the overdose death of a patient. 55-year-old Sudipt Deshmukh was indicted for second degree manslaughter. According to the Office of the Attorney General, Desmukh was a primary care physician who prescribed a lethal mix of opioids and other controlled substances that resulted in the overdose death of a patient who Desmukh knew struggled with addiction. It is alleged that between 2006 and 2016, Desmukh was aware of and fostered his patients' addictions and ignored his professional responsibilities. Without any legitimate medical purposes, Deshmukh prescribed dangerous combinations of opioid pain killers and other controlled substances, including hydrocodone, Oxycontin, oxycodone, Zohydro, methadone, morphine, Opana, and fentanyl, the benzodiazepine alprazolam (Xanax), and carisprodol (Soma) without regard to the risks of death associated with such high levels and dangerous combinations of those drugs. He is facing a class C felony with a maximum sentence of 5 to 15 years imprisonment.

<https://www.rochesterfirst.com/crime/rochester-doctor-indicted-for-manslaughter-after-opioids-overdose-death-of-patient/>

Investigators say alleged clinic gunman angry after being denied opioids

***MPR News* – February 19, 2021**

Investigators say the man who allegedly shot and killed a nursing assistant and wounded four others at a clinic in Buffalo, Minnesota, was upset that physicians cut off his supply of opioid painkillers. Gregory Ulrich, 67, is charged with murder, attempted murder, using explosives and carrying a gun without a permit in the February 9th attack at the Allina Health clinic. In a newly unsealed search warrant application, Wright County Sheriff's Deputy Patrick Bailey writes: "Ulrich has a dependency on opioid-style pain medications and was upset that his legal supply had been stopped." Ulrich was prescribed opioid pain medication following back surgery in 2016. Shortly thereafter, he was hospitalized for an opioid overdose, and physicians refused to prescribe any more due to his statements about mixing the opioids with alcohol. According to court documents, a search of Ulrich's room at the Buffalo Super 8 motel turned up a plastic bag that contained six oxycodone pills. Bailey suggests Ulrich appears to have obtained the pills on the black market because "people who obtain oxycodone legally rarely store the pills in a sandwich bag."

<https://www.mprnews.org/story/2021/02/19/warrant-opioid-addiction-may-have-motivated-clinic-shooting>

Telehealth

Lawmakers Reintroduce COVID-19 Telehealth Licensure Bill

mHEALTH INTELLIGENCE -- February 4, 2021

The Equal Access to Care Act was reintroduced last week by Texas Rep. Ted Budd and Texas Senator Ted Cruz, after dying in committee last year. This bill would allow healthcare providers to use telehealth to treat patients in any state for up to six months after the coronavirus pandemic. The bill highlights the barrier to telehealth expansion: state and federal licensing regulations hindering providers from treating patients in other states. However, the rules have somewhat been relaxed during the pandemic, with some states recognizing licenses issued in other states, but those freedoms will end with the pandemic. If this bill is passed, it would maintain those freedoms and remain in effect for up to 180 days after the pandemic ends.

<https://mhealthintelligence.com/news/lawmakers-reintroduce-covid-19-telehealth-licensure-bill>

Telehealth Update: Extension of the Public Health Emergency, OIG Workplan Updates, and the Protecting Access to Post-COVID 19 Telehealth Act

The National Law Review – February 3, 2021

In a recent letter to state Governors, the Acting Secretary for the United States Health and Human Services (HHS) acknowledged the uncertainty caused by the 90-day extensions for the public health emergency. In an effort to bring greater predictability to providers, the Acting Secretary also stated that the public health emergency will likely remain in place for the remainder of 2021. Finally, HHS has committed to provide states with 60 days' notice once the decision has been made to terminate the declaration of the public health emergency or let it expire.

The Office of Inspector General (OIG) has included two telehealth-related sections to the 2021 OIG Workplan. The first, "Audit of Home Health Services Provided as Telehealth During the COVID-19 Public Health Emergency" will focus on home health services provided during the public health emergency to determine which types of skilled services were furnished via telehealth, and whether those services were administered and billed appropriately. The second, "Audits of Medicare Part B Telehealth Services During the COVID-19 Public Health Emergency" is strictly focused on exploring how telehealth services can be expanded beyond the public health emergency.

The Protecting Access to Post-COVID 19 Telehealth Act was re-introduced last month. Initially introduced in July 2021, the bill works to expand the use of telehealth beyond the public health emergency by: eliminating most geographic and originating site restrictions on the use of telehealth; preventing a sudden loss of telehealth services for Medicare beneficiaries; making the disaster waiver authority permanent; and requiring a study on the use of telehealth during COVID. These developments are good indicators that the federal government will take the necessary steps to ensure telehealth access is expanded, however there are still concerns at the state level.

<https://www.natlawreview.com/article/telehealth-update-extension-public-health-emergency-oig-workplan-updates-and>

Will Telehealth Payment Parity Be Permanent or a Passing Fancy?

mHealthIntelligence – February 22, 2021

As federal and state lawmakers look to establish telehealth policy beyond the coronavirus pandemic, much of the conversation will focus on payment parity. A recent study of state telehealth commercial insurance coverage and parity laws by the Foley & Lardner law firm rendered some interesting findings. The study depicts a nation rushed to embrace telehealth roughly one year ago to better deal with the COVID-19 crisis, and was aided by federal and state emergency measures that improved access and coverage. Now lawmakers are grappling with the idea of making some or all of those emergency measures permanent to keep the momentum going. Almost everyone agrees that telemental health should be permanently expanded to take on the growing issues of substance abuse, depression, stress and anxiety, while measures that expand telehealth coverage to clinics, health centers and the patient's home are seeing widespread support. This also holds true for proposals to expand the types of providers able to use telehealth, such as therapists, social workers and home health workers, and coverage for remote patient monitoring and asynchronous telehealth.

<https://mhealthintelligence.com/news/will-telehealth-payment-parity-be-permanent-or-a-passing-fancy>

Mental Health

Absolutely defeated': Black nurses struggle with mental health support while battling Covid-19

CNN – February 22, 2021

Cardiac and COVID-19 nurse, Olivia Thompson works 12-hour shifts caring for several patients at a time. Maysa Akbar, chief diversity officer at the American Psychological Association suggests nurses are often the first medical professionals a patient will see, and most have a great deal of contact with patients throughout their care. In addition to one-the-job stress, Black people are generally more likely to have feelings of sadness, hopelessness and worthlessness than White adults, according to Mental Health America. Thompson says there are times when she said she comes home "absolutely defeated," so on those days, she gives herself the space to process her emotions by talking with her family and watching television. In response to similar sentiments by many individuals, the National Black Nurses Association (NBNA) launched RE:SET, a free mental health program for nurses. The program's goal is to teach nurses how to relieve the stresses they're facing in healthy ways and connect them to mental health resources. The program offers a series of videos and podcasts centered around relieving stress and seeking professional help when you need it that are free to everyone. Members of NBNA get the additional benefit of free counseling services. Nurses receive five free sessions per wellness issue they're facing. If a

nurse needs to communicate with a mental health professional while on a break for even the simplest reason, they have access to an unlimited number of telephone calls and text messages to do so.

<https://www.cnn.com/2021/02/22/health/black-nurses-mental-health-wellness/index.html>

More seasonal affective disorder this winter? 'It's obvious this year is different'

NBC News – January 27, 2021

Even when there is not a pandemic, winter can be a challenging time for mental health. For an estimated 5 percent of adults in the United States, the mood changes that occur as the amount of natural sunlight decreases are severe enough to merit a diagnosis of seasonal affective disorder. However, this year as the pandemic continues, seasonal depression may be much more prevalent, experts say. They suggest a multitude factors related to the pandemic are exacerbating winter depression this year: social isolation, stress over health, finances and remote-schooling, in addition to staying at home and being exposed to less sunlight. While there is no clear data on how many people currently have seasonal affective disorder, experts believe it is almost certainly up from prior years. They suggest ways to combat seasonal affective disorder while staying safe during the pandemic include going outside more often, social Zoom calls, or virtual game nights.

<https://www.nbcnews.com/health/mental-health/more-seasonal-affective-disorder-winter-it-s-obvious-year-different-n1255677>

COVID-19 Pandemic

Racial diversity lags in clinical vaccine trials despite push for inclusion, JAMA study finds

NBC News – February 19, 2021

Vaccinating communities of color, which have been disproportionately affected by the coronavirus pandemic, has been a focus for both the Biden administration and many local governments. But federal data show that despite guidelines from the National Institutes of Health recommending more diversity in clinical trials, people of color are largely underrepresented. A study released Friday in JAMA Network Open suggests that the disparities started long before the pandemic magnified existing inequities. According to the report 78 percent of all participants in clinical trials dating to 2011 were white. Latinos, who are 18 percent of the U.S. population, were 12 percent of participants and Black Americans, who are more than 12 percent of the total population, accounted for 11 percent of participants. According to a recent report by the Centers for Disease Control and Prevention (CDC), the team's findings reflect a broader, ongoing issue exacerbated by the coronavirus pandemic. Older white women are being vaccinated at a higher rate than Blacks, Latinos, Asians and Native Americans. The CDC report also found that among the 13 million people who received first doses of a vaccine when they became available in mid-December, more than 60 percent were women, and more than 50 percent were over 50. Recent CDC numbers show that Covid-19 hospitalizations and deaths are more likely to occur among Native Americans, Latinos and Blacks. According to the CDC, race and ethnicity are risk markers for other

underlying conditions that affect overall health outcomes, including access to medical care and exposure to the coronavirus at work. However, according to a recent survey by the COVID Collaborative, Black and Latino people also report higher levels of vaccination hesitance and distrust compared to white Americans.

<https://www.nbcnews.com/news/us-news/racial-diversity-lags-clinical-vaccine-trials-despite-push-inclusion-jama-n1258305>