

Feds to let states tap opioid funds for meth, cocaine surge

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In this Aug. 29, 2019, file photo, members of the Coast Guard stand near seized cocaine in Los Angeles. The nation's drug addiction crisis has been morphing in a deadly new direction: more Americans struggling with meth and cocaine. Now the government will allow states to use federal money earmarked of the opioid crisis to help people addicted to those drugs as well. The change to a \$1.5 billion opioid grants program was buried in a massive spending bill that Congress passed late in 2019. (AP Photo/Chris Carlson, file)

Alarmed by a deadly new twist in the nation's drug addiction crisis, the government will allow states to use federal money earmarked for the opioid epidemic to help growing numbers of people struggling with meth and cocaine.

The little-noticed change is buried in a massive spending bill passed by Congress late last year. Pressed by constituents and [state officials](#), lawmakers of both parties and the Trump administration agreed to broaden the scope of a \$1.5 billion grant program previously restricted to the opioid crisis. Starting this year states can also use those federal dollars to counter addiction to "stimulants," a term the government uses for methamphetamine and cocaine.

"Meth and cocaine are making a comeback and they are more potent than they were during the last wave," said Mark Stringer, director of Missouri's Department of Mental Health. He oversees the state's efforts to prevent addiction, get drug-dependent people into treatment, and support them in recovery. "Where [meth](#) is much more prevalent than opioids, this will be a game-changer."

About 68,000 people died of drug overdoses in the U.S. in 2018, with opioids involved in about two-thirds of the cases. Opioids are a drug class that includes fentanyl, heroin, certain prescription painkillers, and various chemical combinations concocted for street sales. But the national numbers also hide dramatic differences in the deadliest drugs across the land.

In most states west of the Mississippi meth is the biggest killer, according to government data for 2017. Meanwhile, the highly lethal opioid fentanyl maintains its grip on the East and Midwest. Cocaine ranks third overall nationally in drug-involved deaths.

Sen. Jeanne Shaheen, D-N.H., whose state has been hard-hit by the

[opioid epidemic](#), said she was hearing from all quarters last year that the drug-addiction scourge is gradually changing.

"They were seeing much more impact from meth and from cocaine, substances they couldn't address because of specific language in the law," said Shaheen, referring to previous restrictions in the federal grant program aimed at opioids.

As a member of the Senate Appropriations Committee, which writes spending bills, Shaheen said she worked with Republican and Democratic leaders to add "stimulants"—not only opioids—to the language of the 2020 spending bill.

White House drug czar James W. Carroll said the Trump administration was also hearing calls for more flexibility from state officials, and supported the change.

"I know the term 'opioid crisis' is used a lot, and it's not my preferred way of describing what we're up against," said Carroll. "I say what we really have is an addiction crisis."

Other senators pushing to broaden the grant program included Republicans Rob Portman of Ohio and Shelley Moore Capito of West Virginia, also a member of the Appropriations Committee. Their states have been ravaged by opioids.

Federal lawmakers don't want to be caught flat-footed if another drug crisis breaks out in an election year. The nation has been starting to see progress on opioids, with deaths declining slightly.

Last week the House Energy and Commerce Committee sent letters to [federal agencies](#) requesting detailed information on evolving patterns of cocaine and [meth use](#).

"We are concerned that while the nation, rightly so, is devoting so much of its attention and resources to the opioid epidemic, another epidemic—this one involving cocaine and methamphetamine—is on the rise," wrote committee leaders Chairman Frank Pallone, D-N.J. and ranking Republican Greg Walden of Oregon.

Meth, which was once cooked in makeshift labs in the U.S., is now produced by Mexican cartels and smuggled across the border. The price of the drug has dropped even as its purity has risen.

The increased prevalence of cocaine is being driven by greater supply, as cultivation of the coca plant has become more widespread in Colombia. Cocaine can also be laced with fentanyl, contributing to overdose deaths. As with meth, government data show the price of cocaine has dropped while its purity has risen.

Treating people addicted to meth or cocaine is different from treating opioid dependence. There are FDA-approved medications for opioid addiction, but not for [cocaine](#) and meth.

Instead, treatment relies on counseling and support to try to help people overcome their drug habit. It's a labor-intensive effort that carries a significant risk of failure. Access to more federal dollars will help pay for treatment, particularly in states that have held out on accepting Medicaid expansion under the Affordable Care Act. Expanded Medicaid for low-income adults is a mainstay of treatment in states that embraced it.

States "are going to go ahead and apply for these grants, knowing they'll have the flexibility to treat whatever the addiction is for people walking into their clinics," said Reyna Taylor of the advocacy group National Council for Behavioral Health.

The federal Substance Abuse and Mental Health Services Administration is preparing to notify states of the newly available grant flexibility.

Ultimately, state officials want Congress to consider folding the [opioid](#) money into a larger block grant program administered by the same agency, creating a big pool of [federal money](#) to treat addiction, with fewer restrictions on its use.

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