

**California MAT Expansion Project 2.0
State Overdose Response (SOR) Funding**

	Project Topic / Title	Description	Approximate* Budget
MAT ACCESS POINT EXPANSION			
1	MAT Access Points	<ul style="list-style-type: none"> • Provide grant funding for 200+ new access points to start-up or enhance MAT programs; including administration, slight infrastructure, physician recruitment, staffing, funding services and other needs. • Sites could be in primary care, hospitals, EDs, Medication Units, jails, colleges, residential treatment centers, tribal health centers, DUI providers, community mental health centers and other locations. • Grants would be awarded for start-up activities (depending on size of location). Grants would be awarded statewide with a focus on higher OD areas and/or limited access. 	\$40M
2	Access Point Transitions	<ul style="list-style-type: none"> • Provide an in-depth analysis for high OD counties/areas: convene/meet with local leaders to find solutions for select high OD counties and/or areas with limited MAT access. 	\$3M
3	Counselors in Rural EDs	<ul style="list-style-type: none"> • Test concept of rural hospital's being a primary MAT location at ten sites (manage subcontracts to cover AOD counselor hospital salaries in EDs for referral into outpatient services). 	\$2M
4	Tribal MAT	<ul style="list-style-type: none"> • Expand MAT Champions Project for telehealth, naloxone, opioid coalitions, and TA. • Expand Tele-MAT with Academic Detailing including tele-medicine support, training, webinars, physician consultation and technical assistance and training services, to Tribal and Urban Indian Health programs and patients. 	\$5M
5	Special Populations	<ul style="list-style-type: none"> • Increase access through expansion of current and new services for MAT for perinatal, NAS, veterans, services members (and families) and youth (and families). • Project would include covering the cost of service provision for under- or uninsured senior patients. • Primary and secondary prevention activities would also be available with the funding including school programs. 	\$26M
6	Media Campaign	<ul style="list-style-type: none"> • Design a media campaign for individuals with an OUD to access services. • Include a toll-free line or website for individuals to connect to MAT treatment services. 	\$5M
PRIMARY CARE			
7	Treating Addiction in Primary Care	<ul style="list-style-type: none"> • Fund 25 new clinics to join the Treating Addiction in the Primary Care Safety Net (TAPC 2.0) and tie into CA H&SS. 	\$3M
HOSPITALS			

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8	ED Bridge Program	<ul style="list-style-type: none"> Enhance ED-BRIDGE expansion with 24 new EDs. Integration of paramedics into the continuum of care for buprenorphine treatment. Make bup part of the standard emergency medicine curriculum for all CA emergency medicine residency programs. 	\$4M
9	Project SHOUT	<ul style="list-style-type: none"> Expand Project Support for Hospital Opioid Use Treatment (equip hospitals to increase bup starts) to 24 new hospitals (some will overlap with ED MAT Bridge Hospitals). 	\$3M
SUD PROVIDERS			
10	Toolkits	<ul style="list-style-type: none"> Expand CHCF-funded residential treatment toolkit. Develop toolkits and webinars for outpatient facilities, DUI facilities, youth, counselors, telehealth and utilizing peer supports with MAT; develop drug interactions quick reference guide. Develop on-line toolkits for EDs, hospitals, primary care and criminal justice. 	\$2M
11	NTP Treatment Capacity	<ul style="list-style-type: none"> Develop specialized training program for NTP medical directors: CSAM conference, year-long group mentorship program including protocols for implementing all FDA approved medications, host convening, provide site-visit TA. 	\$1M
12	DUI MAT Integration	<ul style="list-style-type: none"> Pilot program with DUI participants with OUD. Provide extensive TA to DUI providers and law enforcement pertaining to MAT, referrals, and overdose prevention. 	\$4M
JUSTICE INVOLVED			
13	County Touchpoints	<ul style="list-style-type: none"> Implement a “targeted information campaign” at key county referral touchpoints (including courts, law enforcement and Child Welfare & County Welfare Agencies) to ensure awareness of tx resources and how to access services. Train judges and probation staff on overdose prevention and intervention tactics (like motivational interviewing). 	\$2M
14	MAT in County Criminal Justice Settings	<ul style="list-style-type: none"> Extend current project to expand MAT in jails and drug courts with an additional 18 months and add additional sites. 	\$1.5M
MENTORING RESOURCES			
15	24/7 MAT Coaching	<ul style="list-style-type: none"> Expand current 24/7 mentorship network to cover all new ED, primary care, and hospital access points: funding to cover training, and extra staff coverage during ramp-up. 	\$1.5M

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1 6	CSAM Mentoring	<ul style="list-style-type: none"> Expand CSAM mentoring project with 40 mentoring experiences each year for two years. 	\$500K
1 7	Waivered Prescriber Support	<ul style="list-style-type: none"> Deploy a survey to waivered prescribers (1000+). Based on survey results, provide support to waivered prescribers via “physician champions” who would be hired to travel throughout California to provide on-site support. 	\$1M
1 8	MAT Workforce	<ul style="list-style-type: none"> Host two: a northern and southern convening specifically designed for counselors pertaining to MAT. 	\$375K
1 9	Academic Detailing	<ul style="list-style-type: none"> Incorporate academic detailing into health plans and health payers systems. Hire pharmacy detailer: identify which pharmacies across the state furnish naloxone, and conduct academic detailing. 	\$700K
OVERDOSE PREVENTION			
2 0	Naloxone Distribution	<ul style="list-style-type: none"> Distribute naloxone to non-health entities including: first responders, community-based outreach teams, homeless shelters, law enforcement, courts, veteran’s centers, jails, schools and probation. Purchase naloxone for each residential, outpatient and DUI facility to distribute with toolkits. 	\$19.7M
2 1	Fentanyl	<ul style="list-style-type: none"> Provide toxicology lab testing equipment to detect fentanyl. Set-up fentanyl reporting system for California; incorporate into current mandated reporting system. Improve the dashboard for poly drug use and to expand the dashboard to determine the social determinants of health. Improve detection of fentanyl outbreaks through the 58 Coroners to facilitate effective response. 	\$3.2M
2 2	Drug Take-Back	<ul style="list-style-type: none"> Fund statewide drug take-back programs: bags, bins and start-up take back programs in approved locations. 	\$3M
2 3	CURES PDMP	<ul style="list-style-type: none"> Enhance CA’s Prescription Drug Monitoring Program database. 	\$2.5M
TECHNICAL ASSISTANCE			
2 4	SOR Consulting	<ul style="list-style-type: none"> Assist DHCS with extensive staff work for the SOR including data, reporting, and project implementation. 	\$600K
2 5	Evaluation	<ul style="list-style-type: none"> Conduct an evaluation of the Tribal MAT Project. Evaluate key projects in the SOR. 	\$1.7

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2 6	DHCS Staff	<ul style="list-style-type: none"> Prepare RFAs, contracts, invoices and other fiscal/contract duties. 	\$1.26M

*The project budgets are estimates and can change throughout the grant period.

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