Emerging Populations: Challenges for the Early Childhood System

Presented by Maureen Greer

Early Intervention/Early Childhood Special Interest Group (EIEC SIG) Webinar Series
September 26, 2017
Maureen Greer is the owner and principal of Emerald Consulting, founded in 2001, specializing in perinatal and early childhood finance, policy, and integrated systems. Prior to establishing Emerald Consulting, Maureen spent eight years as the Part C Coordinator in Indiana. In that position, she was responsible for a major redesign of the early intervention system including the establishment of central financing, development of a universal application process and the establishment of independent service coordination. Prior to this position, Maureen spent five years at Indiana University directing the training and technical assistance project for early intervention serving families, providers and the health care/medical community. Maureen currently serves as the Executive Director of the IDEA Infant and Toddler Coordinators Association (ITCA).

Maureen also provides consulting services to the Early Childhood Personnel Center (ECPC), the National Center for Systemic Improvement (NCSI), the Early Childhood Technical Assistance Center (ECTA) and the Center for Early Childhood Data Systems (DaSy). Maureen has received numerous awards and commendations for her contributions and accomplishments at the state and national level to improve the lives of families and their very young children and the communities in which they live.
Neonatal Abstinence Syndrome: An emerging issue for Early Childhood Systems?

AUCD Early Childhood Special Interest Group
September 26, 2017
NAS DEFINITION

A drug withdrawal syndrome that presents in newborns after birth when transfer of harmful substances from the mother to the fetus abruptly stops at the time of delivery. Most frequently due to opioid use in the mother, but may also be seen in infants exposed to benzodiazepines, and alcohol.
NAS Origin

Fetal exposure usually occurs for one of three reasons:

1. Mothers are dependent/addicted to opioids, either prescribed or illicit.
2. Mothers require prescription opioids for another disease process.
3. Mothers receive Medicaid Assisted Therapy (MAT) to facilitate safe withdrawal from addiction to prescription or illicit opioids.
Some states have more painkiller prescriptions per person than others.

Number of painkiller prescriptions per 100 people:
- 52-71
- 72-82.1
- 82.2-95
- 96-143

SOURCE: IMS, National Prescription Audit (NPA™), 2012.
Drug Overdose Rates by State

US Resident Overdose Deaths by State, 2015

Data Source: CDC Wonder
Changes from 2015-2016

Drug Overdose Deaths per 100,000 Residents

- Maryland: 36 (36), 2016
- Delaware: 32 (21), 2016
- Florida: 25 (16), 2016
- Maine: 7 (4), 2016
- Illinois: 23 (14), 2016
- Missouri: 24 (18), 2016
- Indiana: 19 (19), 2016

Source: National Center for Health Statistics, CDC
Opioid Prescriptions

- Opioid pain relievers and benzodiazepine sedatives are commonly prescribed in the United States.
- Overprescribing of opioid pain relievers can result in multiple adverse health outcomes.
- Wide variation exists from one state to another
- Need for state monitoring of prescribing patterns
Prescribing Rates per 100 Persons

United States

- Opioid pain relievers: 82.5
- Long-acting extended release opioid pain relievers: 10.3
- High-dose Opioid pain relievers: 4.2
- Benzodiazepines: 37.6
Prevalence of Maternal Opioid Use

Rate per 1,000 births/year

- 2000: 1.19
- 2003: 1.26
- 2006: 2.52
- 2009: 5.63
Prevalence of NAS

Rate per 1,000 births/year

- 2000: 1.2
- 2003: 1.5
- 2006: 1.96
- 2009: 3.39
- 2012: 5.8
- 2013: 6

DRAMATIC INCREASES IN MATERNAL OPIOID USE AND NEONATAL ABSTINENCE SYNDROME

The use of opioids during pregnancy can result in a drug withdrawal syndrome in newborns called NEONATAL ABSTINENCE SYNDROME (NAS), which causes lengthly and costly hospital stays. According to a new study, an estimated 21,732 babies were born with this syndrome in the United States in 2012, a 5-FOLD INCREASE since 2000.

Every 25 minutes, a baby is born suffering from opioid withdrawal.

AVERAGE LENGTH OR COST OF HOSPITAL STAY

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<th>Condition</th>
<th>Days</th>
<th>Cost</th>
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<tr>
<td>WITH NAS</td>
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<td>WITHOUT NAS</td>
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NAS AND MATERNAL OPIOID USE ON THE RISE


NIH National Institute on Drug Abuse
MEAN HOSPITAL CHARGES

NATIONAL COST OF HEALTH CARE FOR INFANTS DIAGNOSED WITH NAS:

- 2000: $190 MILLION
- 2009: $720 MILLION

During that time frame, hospital stay for newborns shortened but average hospital stay for babies with NAS stayed the same.
Medical Issues in the Newborn

- Fetal Growth
  - Low birth weight
  - Growth restriction

- Breastfeeding
  - Alcohol and Tobacco - Benefits may be outweighed by impact of substances
  - Street Drugs – transmitted through breast milk
    - Methadone use

http://pediatrics.aappublications.org/content/early/2013/02/20/peds.2012-3931
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<th>Marijuana</th>
<th>Opiates</th>
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ITCA Tipping Points Questions 2015-2017

2015
- Thirteen States addressing NAS issue:

2016
- Twenty states addressing NAS issue

2017
- Eight states: Extensive efforts
- Twenty-three states: Some efforts
- Nine states: Beginning to address
So what does this mean for Part C?

- New Population
  - Eligibility Criteria
  - Mother/Baby Dyad
  - Family Dynamics

- Types of Services
  - Medical Home Involvement

- Provider Training

- System Capacity
Implications for Service Delivery

- Increasing referral numbers
- Understanding the impact of drug exposure or NAS on infant development (Assessment and Intervention)
- Understanding the needs of mothers experiencing addiction
- Collaborating with other community partners to support family needs
- Potential need for specialized service coordination
• How to Ask a Question
  – If you are on your **telephone**, You can ask a question by pressing the \* then \# key to request the floor. Questions will be answered in the order they are received.
  – If you’re using the microphone on your **computer**, you can raise your hand by clicking the little icon at the very top of the screen that looks like a person raising her hand.
  – Type your questions into the ‘**Chat**’ box below the slides and the moderator will read the questions.
THANK YOU!

Visit the Websites

- AUCD Website:  http://www.aucd.org
- EIEC SIG Website:  http://www.aucd.org/eiec

Questions about the SIG?

- SIG Co-Chairs
  - Mary Beth Bruder: bruder@uchc.edu
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Questions about the Webinar?

- Anna Costalas: acostalas@aucd.org

Please take a few minutes to complete our survey!