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House Committee on Oversight and Government Reform
Health Care, Benefits, and Administrative Rules Sub-Committee
c/o Ranking Member Raja Krishnamoorthi
515 Cannon House Office Building
Washington, DC 20515

April 9, 2018

Testimony on Local Responses and Resources to Curtail the Opioid Epidemic

Dear Chairman Jordan and Ranking Member Krishnamoorthi:

DuPage County was recently named the healthiest county in Illinois by the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute. It isn't the first time the study bestowed our county this distinction, as DuPage has consistently ranked in the top 10 counties in the survey. Despite its status as the "healthiest county" in the state, DuPage is not immune to one public health crisis impacting the other 101 counties in Illinois and virtually every community in the United States. The opioid epidemic has continued to be a devastating problem that requires well-researched solutions on multiple levels from entities both within and outside of government.

From a public health standpoint, the effects of opioid abuse are far-reaching. Opioid use disorder is defined as using a prescription opioid for non-medical reasons or using it for a time greater than prescribed. An estimated 2.4 million people in the United States abuse prescription painkillers, and almost half a million people suffer from heroin abuse.¹ By now, most Americans should be aware that there is a connection between prescription opioid use disorder and the use of heroin. However, while prescription opioid misuse is a risk factor for heroin use, only a small fraction of people who misuse pain relievers switch to heroin. According to a national survey, less than 4 percent of people who had misused prescription pain medicines started using heroin within five years.² Opioid use disorder has been linked to higher rates of depression, anxiety, and bipolar disorders.³ In addition to the fact that many of the addicted individuals will find themselves within the court system, the combination of mental illness, opioid use disorder and heroin addiction may make recovery more difficult.

¹ <https://www.drugabuse.gov/publications/research-reports/prescription-drugs/trends-in-prescription-drug-abuse/how-many-people-abuse-prescription-drugs>

² Muhuri PK, Gfroerer JC, Davies MC. *Associations of Nonmedical Pain Reliever Use and Initiation of Heroin Use in the United States*. Rockville, MD: Substance Abuse and Mental Health Services Administration; 2013.

³ <https://www.ncbi.nlm.nih.gov/pubmed/21999943>



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Research suggests that simply using prescription opioids can put one at higher risk for depression. In one study at St. Louis University, researchers found that 10 percent of more than 100,000 patients prescribed opioids developed depression after using the medications for longer than one month. These patients were taking the medication for ailments such as back pain, headaches, arthritis, etc. and had not received a diagnosis of depression prior to treatment.⁴

Opioid addiction can lead to the feelings of hopelessness, despair and guilt often associated with depression, and researchers have estimated that 48 percent of people dependent on the drug will also experience depression. Heroin users are also at increased risk of suicide, with death by suicide among users reaching 35 percent.⁵

DuPage County's Response to the Opioid Epidemic

In 2011, the Pain Medicine Journal released a study showing the economic impact of the opioid crisis. The country has spent a staggering \$55 million a year in health and social costs related to prescription opioid use disorder and \$20 million a year in emergency department and inpatient care for opioid poisonings.⁶ Subsequent studies have agreed that the costs remain staggering. These costs are particularly hard-felt by counties like DuPage, where the growth in this epidemic's size and scope has far surpassed available funding mechanisms needed to respond appropriately. Despite the daunting health and financial impacts of this crisis, DuPage County responded quickly and effectively to address the spread of opioid addiction and treat those in need of help.

DuPage Narcan Program

In 2013, a coalition of DuPage County leaders, including County Board Chairman Dan Cronin, members of the County Board, Coroner Rich Jorgensen, State's Attorney Robert Berlin, Sheriff John Zaruba, Public Defender Jeff York, Regional Office of Education Superintendent Darlene Ruscitti, the DuPage County Health Department, and the Chiefs of Police Association formed the DuPage Narcan Program to administer Naloxone, an overdose reversal medicine commonly referred to as Narcan, in emergency situations in which individuals are found unresponsive due to an overdose. The DuPage Narcan Program was the first countywide program in Illinois and has become the model for counties throughout Illinois.

⁴ Ibid.

⁵ <http://www.annfammed.org/content/14/1/54>

⁶ <https://sunspirehealth.com>



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The Narcan program, administered by the Health Department, has saved 429 lives between 2013 and 2017. While patients primarily tended to be white males between the ages of 18 and 29, the program's results have found that no race or demographic group is immune to opioid addiction. Despite the relative success of the Narcan program, the DuPage County Coroner noted there were 126 people who died of heroin overdoses between 2014 and 2017. Just as alarming, another 108 died from a combination of heroin and fentanyl or strictly through an overdose on fentanyl. These figures made clear that Narcan alone wouldn't address the root of the opioid problem. It was clear DuPage needed to establish a coordinated, multi-stakeholder effort to combat opioid addiction.

The HOPE Taskforce

In recognition of this fact, Chairman Cronin formed the Heroin Opioid Prevention and Education (HOPE) Taskforce as the successor to the DuPage Coalition Against Heroin. HOPE comprises a broad group of local stakeholders, including the criminal justice system, the health system, substance abuse and treatment providers, and educators. The Taskforce has five primary goals: (1) Reduce access to drugs; (2) Reduce opioid use and misuse; (3) Increase overdose response; (4) Integrate mental health and substance use disorder treatment and recovery; and (5) Increase access to tools for substance use prevention and education.

Reducing access to drugs has been a principle of the HOPE Taskforce's efforts. The DuPage County Health Department has operated the RxBox program, which collects unused medication at 17 different sites in DuPage County. Since its inception in 2009, the program has collected more than 44 tons of unused medication that otherwise could have been misused. The county has been working with the goal to expand the RxBox program and other drug take back programs.

Disposing of unused opioids is one of many steps in the process of addressing the epidemic. At the forefront of the battle, as recognized by Congress and the President, is reducing the number of opioids being prescribed. Marketing campaigns designed to convince patients that opioids are necessary contributed to the increase of prescriptions, and built a market based on consumers demanding pain relief. Between 1997 and 2002, the number of opioids prescribed by doctors increased tenfold.⁷ DuPage County has been supportive of the Prescription Drug Monitoring Program and supports the increased use of the program by prescribers. At the same time, the county's efforts have recognized that the historic misuse of opioids can be traced back to 1996, when the American Pain Society introduced pain as the "fifth vital sign." In

⁷ Ibid.



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partnership with the medical community, the county's Health Department has hosted three prescriber education events to reduce the number of opioid prescriptions.

The DuPage County Health Department, which treats behavioral health illnesses, faces an added burden due to the connection of opioids and mental illness. DuPage County law enforcement, including the Sheriff's Office and the State's Attorney, have experienced a sharp increase in costs associated with opioid use disorder and mental illness. The cost of incarcerating a prisoner in Illinois is more than \$38,000 a year. That cost, along with lost economic productivity, healthcare costs, and police enforcement costs, can be greatly reduced through a focus on treating addiction as a health issue as opposed to imprisonment. Addressing this epidemic as a public health crisis is more likely to enable rehabilitated opioid patients to attain a healthier and more productive life in the future.

The county has also attempted to coordinate primary care, emergency care, and other healthcare providers with patient referrals to treatment facilities. Some of those efforts have proven to be difficult due to privacy laws such as HIPPA and the inability to share information about individuals saved by Narcan or treated at the emergency room for an opioid overdose, even to their own family members. Additionally, first responders are often prevented from transporting overdose victims to any location other than a hospital emergency room. If first responders were able to transport patients directly to substance abuse treatment facilities, it may help improve patients' likelihood of seeking long-term treatment for their addiction.

Workforce Development

Often lost in the discussion about the opioid epidemic is the toll it takes on the private sector from a macroeconomic perspective. Opioid addiction already has an immediate impact on employers' bottom lines. The National Safety Council reported that healthcare costs for employees who misuse or abuse prescription drugs are three times higher than an average employee. The annual cost of untreated substance use disorders ranges from \$2,600 per employee in agriculture to more than \$13,000 per employee in information and communications.⁸

The opioid epidemic is also on track to have long-term human capital implications for the American workforce. According to the Centers for Disease Control and Prevention (CDC), drug overdoses now account for more deaths than car accidents and suicides. Nearly 66 percent of those drug overdose deaths involve an opioid, and most victims were in the between the ages of 25 and 44.⁹ While further study is needed, rising

⁸ <http://www.nsc.org/learn/NSC-Initiatives/Pages/prescription-painkillers-for-employers.aspx>

⁹ <https://www.cdc.gov/nchs/data/databriefs/db294.pdf>



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overdose rates in this age demographic – not to mention the continued negative impacts addiction has on patients' own professional development – suggest that the opioid epidemic could eventually be large enough to contribute to labor shortages in communities across the country.

To help address the epidemic's human capital impacts, workforce development programs can be linked directly to treatment and recovery. With a federal commitment to retraining the victims of this epidemic, there could be many economic opportunities for rehabilitated patients and their employers. Beyond the work of the HOPE Taskforce, DuPage County has worked in partnership with the community to develop workforce training programs. The DuPage County Workforce Development Division is funded through the federal Workforce Innovation and Opportunity Act, which provides an extensive range of services such as job training programs, career counseling, and job search workshops to find gainful employment. The federal grant allows an organization to pay for individuals to attend local training programs to obtain a professional certification or skills needed for certain jobs. Employers are eligible for workforce training grants, free job training and assistance for workers being laid off.

The DuPage Workforce Division is currently working with the county's Health Department to develop a pilot program using federal dollars to assist people in drug court who are addicted to opioids or heroin. The goal of this pilot program is to help victims of the epidemic regain their ability maintain gainful employment, increase the productivity of their employer, eliminate the residual costs on society, and work towards eliminating the negative stigma associated with those suffering from addiction. Increased workforce training designed to assist victims of the epidemic can help patients reenter the workforce during their prime years of productivity.

Discussions are underway regarding how best to braid together multiple federal funding streams to support a program that will provide foundational manufacturing skills and workplace readiness training, while also preparing participants for placement in paid internships. The Workforce Development Division is also building a relationship with Serenity House, which runs a series of seven recovery homes throughout DuPage County. They plan to provide workshops to participants in the earlier phases of recovery, and, ultimately hope to provide vocational training and job placement assistance to those who are further along.

Next Steps

The policies and programs highlighted above are excellent steps toward stopping the epidemic that is robbing so many of a productive future. While the heroin and opioid epidemic has failed to spare any area of the country, each county must have flexibility to address the problems affecting its citizens. Certainly, common trends such as the



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lack of mental health services and treatment along with the need for an increase in substance abuse treatment must be recognized.

DuPage County has been proactive in recognizing that the opioid epidemic is a challenge that must be addressed across all levels of government. The County’s HOPE Taskforce has recognized the need to increase the treatment capacity in the community and the DuPage County Health Board has adopted a resolution calling for the support of treatment within the community. The county has also spearheaded programs designed to assist patients’ re-acclimation into the workforce and daily life. However, the lack of federal or state funding for such programs and the lack of insurance available for many victims, has caused treatment to lag behind initiatives such as the DuPage Narcan Program, which provides immediate, if only temporary, results. We would respectfully encourage your Committee to seek ways to fund health, treatment, and workforce development programs like the ones outlined in this letter to enhance and bolster prevention and education initiatives that can help end the opioid epidemic in this country.

Sincerely,



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DuPage County



Grant Eckhoff
HOPE Taskforce Co-Chairman
DuPage Judicial & Public Safety Committee Chairman



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