SOUTH CAROLINA CENTER *of* EXCELLENCE *in* ADDICTION

How to Access & Use Opioid Data Sources for Local Planning

Christina Andrews, PhD

Laura Bogardus, PhD

Jodi Manz, MSW

Monday, March 18, 2024

Welcome and Housekeeping

- Please keep your lines muted
- Feel free to put questions in the chat box, or hold them for Q & A at the end of the presentation
- Slides will be posted to www.addictioncenterofexcellence.sc.gov

South Carolina for South Carolina

The Center of Excellence in Addiction is a collaboration of state agencies and universities that is **maximizing** South Carolina's **opioid** and **addiction knowledge** and **resources**.

Today's Speakers

SOUTH CAROLINA CENTER of EXCELLENCE in ADDICTION

Dr. Christina Andrews
Associate Professor
University of South Carolina

Dr. Laura S. Bogardus
Associate Director
Clemson University Center for Addiction &
Mental Health Research

APPLYING SC DATA

Laura Bogardus, PhD

Clemson University

Center for Addiction and Mental Health Research

South Carolina Center of Excellence in Addiction

NEEDS ASSESSMENT
ASSESS THE CURRENT LANDSCAPE WITH DATA

Provide Data on

- Prevention
- Harm Reduction
- Treatment
- Recovery

To Do

- Local Demographics & Statistics
- Asset Inventory
- Gap Analysis
- Select Strategy(ies)

Don't try to do it all in one application!

Demographics (age, gender, race/ethnicity, urban/rural, zip/county)
Social Determinants (housing, transportation, social support, job)

Many More Options

overdose fatalities
non-fatal overdoses
EMS responses to possible overdoses
ED visits for overdose
hospitalization rates for overdose
SUD diagnosis and treatment rates
MOUD prescriptions

tested for communicable diseases
testing positive for communicable diseases
connected to treatment for communicable diseases

connected to professional mental health care
connected to peer supports

#, location of health care providers
    # Healthcare providers authorized to prescribe MOUD
    # Providers offering harm reduction, drug checking, syringe services

#, capacity of SUD services

Barriers to SUD services
• Distance / transportation barriers
• Technology barriers (# telehealth providers, access)
• Culturally relevant SUD services (language / translation, workforce representation by demographic)

Drug Offenses (#, rates, clearances by county – SLED)
Incarceration rates (#, types of charges, convictions)

IMPLEMENTATION PLAN
STRATEGIES / GOALS / MEASURES / TIMELINE

- Strategy and Plan to Implement Selected Strategies

  - Identify abatement strategies

  - SMART goals

  - Performance Measurement Plan

  - Timeline

The South Carolina Opioid Recovery Fund must be used for one or more of the following approved opioid remediation uses. The Core Strategies are given priority and include the following:

- Naloxone or Other FDA-Approved Drug to Reverse Opioid Overdoses;
- Medication-Assisted Treatment (MAT) Distribution and Other Opioid-Related Treatment;
- Pregnant and Postpartum Women;
- Expanding Treatment for Neonatal Abstinence Syndrome (NAS);
- Expansion of Warm Handoff Programs and Recovery Services;
- Treatment for Incarcerated Population;
- Prevention Programs;
- Expanding Syringe Service Programs; and
- Evidence-Based Data Collection and Research Analyzing the Effectiveness of the Abatement Strategies within the State.
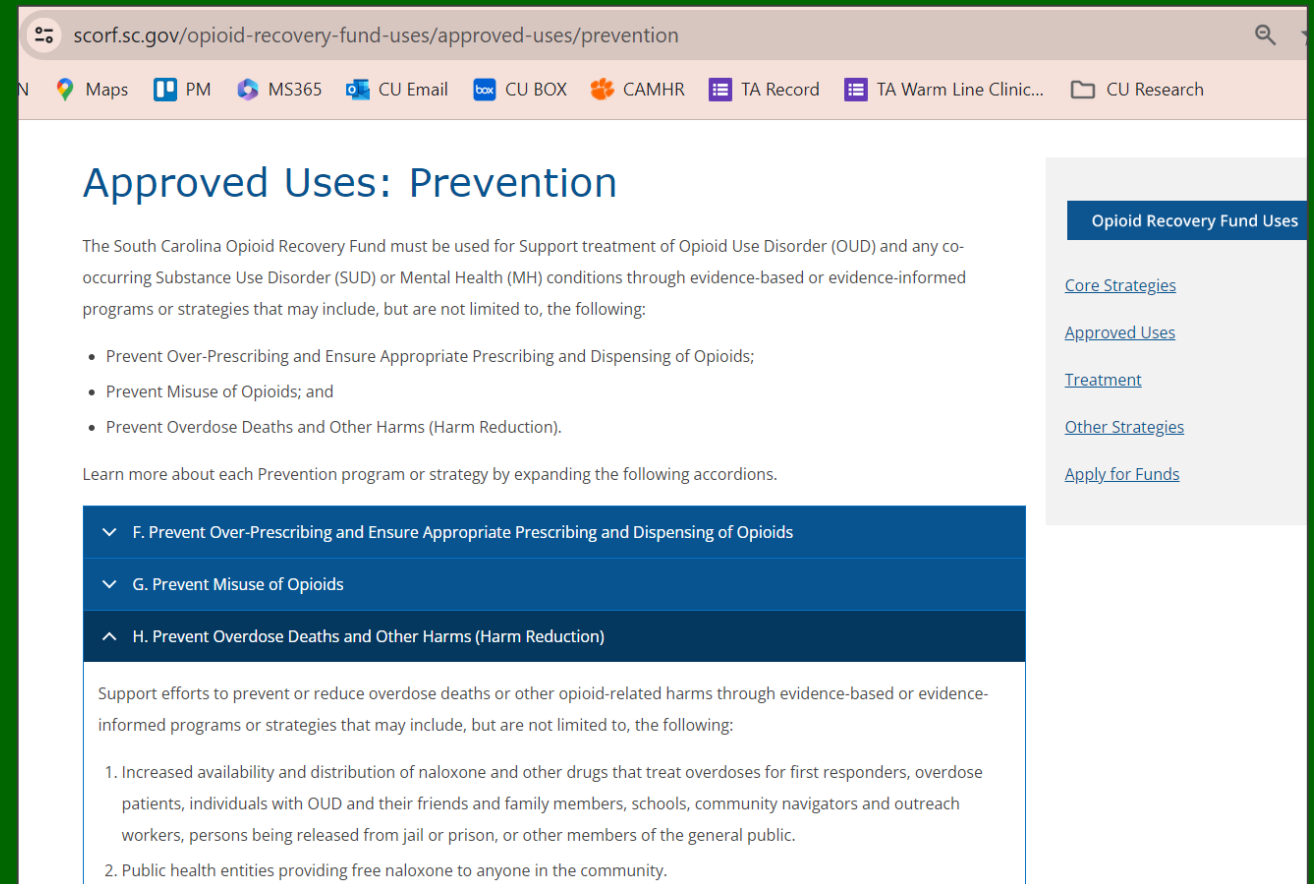
TIPS FOR APPLICATION SUCCESS

1. Only approved strategies AND approved uses

2. Follow guidelines closely. Scoring system. Early deadline. Proofread!

3. Determine what others are doing

4. Connect with community partners

5. Focus on deliverables

1. Only Approved Strategies AND Approved Uses per Guidelines

https://scorf.sc.gov/opioid-recovery-fund-uses/approved-uses
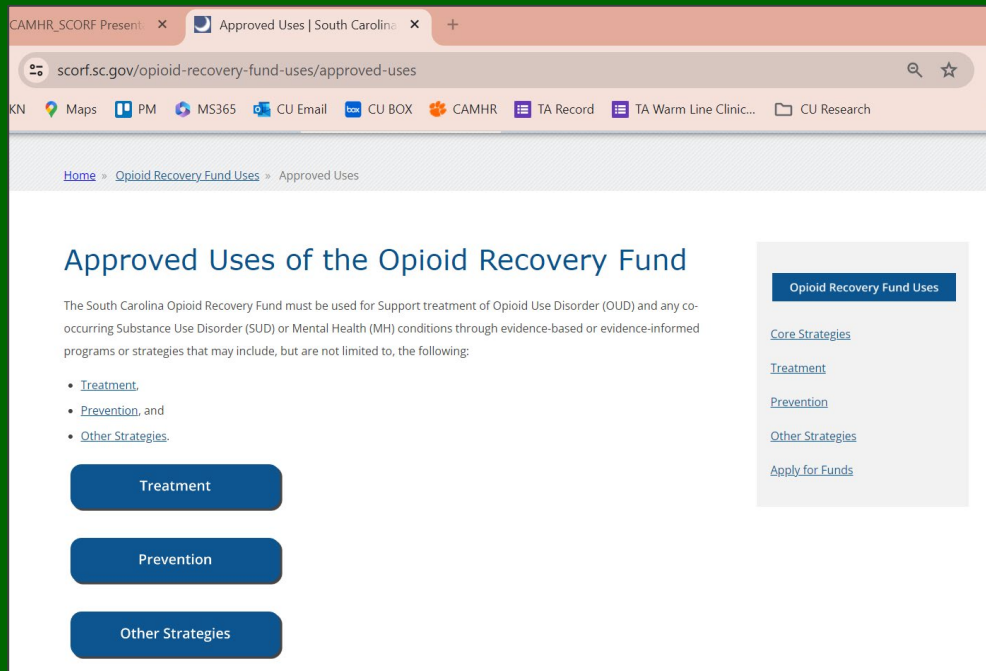
2. Follow Proposal Guidelines closely. Scoring. Early deadline. Proofread.

Technical Proposal Requirements

All Applicants must submit a Technical Proposal attached as a single PDF file to Application Form. The Technical Proposal must be no longer than eight pages. Applicants for the Discretionary Subfund must also submit the Qualifications and Experience (no longer than four pages), Budget and Budget Narrative (no longer than four pages). Please restate each of the required items and provide responses immediately thereafter.

Applications that do not meet Technical Requirements will not be presented to the SCORF Board for consideration.

- Technical Proposal Requirements (PDF)

| ∨ Guaranteed Political Subdivision SubFund |
| ∨ Discretionary SubFund |

https://scorf.sc.gov/apply-for-funds/technical-proposal-requirements

scorf.sc.gov/apply-for-funds/discretionary-subfund

Maps   PM   MS365   CU Email   CU BOX   CAMHR   TA Record   TA Warm Line Clinic...   CU Resea

Discretionary Subfund Application Scoring Process

Applications will be reviewed and scored using the following criteria:

- Technical Proposal (25 points)
- Qualifications and Experience (15 points)
- Budget (10 points)

Scoring Criteria

Technical Proposal (25 points)

Outstanding	Very Good	Good	Marginal	Poor
25-20	19-15	14-10	9-5	4-0

Qualifications and Experience (15 points)

Outstanding	Very Good	Good	Marginal	Poor
15-12	11-9	8-6	5-3	2-0

Apply for Opioid Recovery Funds

The South Carolina Opioid Recovery Fund Board (SCORF) will be accepting applications through the website on the following dates:

Dates for 2024 GPS Applications				
TYPE	Application portal open	Application portal close	Project period start date	Project period end date
GPS	9/14/2023	10/15/2023	1/1/2024	12/31/2024
GPS	12/20/2023	2/5/2024	4/1/2024	3/31/2025
GPS	4/1/2024	5/3/2024	7/1/2024	6/30/2025
GPS	7/3/2024	8/5/2024	10/1/2024	9/30/2025
Dates for 2024 DSF Applications				
New Applicants	11/1/2023	2/15/2024	10/1/2024	9/30/2025
DSF Continuation	4/1/2024	5/15/2024	10/1/2024	9/30/2025

https://scorf.sc.gov/apply-for-funds

https://scorf.sc.gov/apply-for-funds/discretionary-subfund

3. Determine what others who have been funded are doing.

https://appalachiaopioidremediation.org/

https://scorf.sc.gov/accountability/fund-recipients

4. Connect with Community partners and stakeholders

https://findtreatment.gov/locator

https://www.wbpgreenville.org/

CoE Opioid Abatement Strategy TA

https://addictioncenterofexcellence.sc.gov/technical-assistance

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5. Focus on Deliverables – What will you improve? How will you count it?

Connect Outcome Measures to Abatement Strategy Goals

5. Deliverables – What change do you seek? Increase, no change, decrease?

Demographics (age, gender, race/ethnicity, urban/rural, zip/county)
Social Determinants (housing, transportation, social support, job)

Many More Options

overdose fatalities
non-fatal overdoses
EMS responses to possible overdoses
ED visits for overdose
hospitalization rates for overdose
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    Distance / transportation barriers
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Drug Offenses (#, rates, clearances by county – SLED)
Incarceration rates (#, types of charges, convictions)

5. Deliverables – Measuring performance

Construct	Measure	Baseline	Post-test	1 Mo F-up	3 Mo F-up
Depression	Patient Health Questionnaire-9 (PHQ) (Kroenke et al., 2001)	X	X	X	X
Knowledge of Resources	Knowledge of resources scale (Swartout et al., 2019)	X	X	X	X
Referrals to Resources # of referrals to medical, behavioral, trauma-focused treatment	Chart History; Survey of PSS referrals	X	X	X	X
Service Use % accepted referral; # of visits in 3 months prior to/after the study	Chart History: Medical, Behavioral, Trauma-Specific	X	X	X	X
Recruitment and Retention	Enrollment and attendance tracking, % of assessments completed		X	X	X
Feasibility	Peer Support Specialist Interviews Qualitative survey items- feedback on protocol		X		

TIP – Read Final Report Templates

	Final Project Report	
	South Carolina Opioid Recovery Fund	
1	Project Overview	A project overview should include the project's purpose, the required abatement strategies and how those strategies worked in action. It also includes a brief look at the issue or opportunity that was addressed, the project objectives and success metrics. This includes the initial goals of the project, how many of those goals were achieved and what objectives may have adjusted during the project. Your overview can also include a summary statement at the end that indicates what the report includes.
2	Success Criteria Performance	This section refers to the KPIs, performance metrics and how success was defined for this specific project. Explain how, when or if the project achieved its performance goals.
3	Accomplishments, Outcomes and Results	In a section below the overview, plese explain what key performance indicators (KPIs) were used to measure success, the outcome targets and any achievements in hitting those targets. Consider listing the outcome targets in a table that describes what the target was, the project completion date and the actual completion date. This section analyzes the entire project in relation to these success metrics and recounts what caused each positive or negative outcome.
4	Challenges and Barriers	This section details the challenges and risks faced throughout the project timeline and includes information like how these challenges affected other areas of the project, such as the budget and timetable. You can also list barriers, such as working conditions or budget limitations. This can be helpful for future reference when planning other projects.
5	Lessons Learned/Solutions	Listing the challenges that were overcame during the project and what was learned in the process that may be helpful for future reference. When working on future projects you may look at this information to avoid the same challenges. Please list future recommendations for implementing or completing projects based on the experiences of the project being reportd. These recommendations can improve the overall completion and reception of other projects. Recommendations can include timeline suggestions, comments on the use of resources or budget adjustments for similar projects.
6	Budget Performance	This section describes the schedule and budget set for the project and if the project stayed within those limits in this section. If the project didn't stay within those limits, list the reasons.
7	Financial Summary	The financial summary of the project closure report lists the cost of each abatement strategy, ongoing costs, the projected budget and the actual money spent. You can format this section as two tables separated by the abatement strategy's costs and ongoing costs to improve readability and effectively organize the project's financial information. The bottom of the table may also include a notes section to explain any variances in cost or additional reasons for requesting more funds if you needed them to complete the project.

https://scorf.sc.gov/information-resources/forms-and-report-information

Data Sources & Evidence Based Strategies Handout

Data Sources and Evidence-Based Strategies for the Treatment of Opioid Use Disorder (OUD)

General Repository:
- CaroNova's Online Library for Opioid Stewardship
- Centers for Disease Control and Prevention (CDC) – Evidence-Based Strategies for Preventing Opioid Overdose
- Comprehensive Opioid, Stimulant, and Substance Use Program (COSSUP)
- Substance Abuse and Mental Health Services Administration (SAMHSA) Resources for Opioid Overdose
- South Carolina SBIRT
- The American Society of Addiction Medicine (ASAM) National Practice Guideline for the Treatment of Opioid Use Disorder

Data Sources:
- Agency for Healthcare Research and Quality (AHRQ) – Healthcare Cost and Utilization Project (HCUP)
- Appalachia Opioid Remediation Database
- CDC – Underlying Cause of Death Database
- Overdose Detection Mapping Application Program
- SAMHSA – Treatment Episode Data Set (TEDS) 2021: Admissions/Discharges from SUD Treatment

How to Access and Use Opioid Data Sources for Local Planning

Christina M. Andrews, PhD
Associate Professor
Dept. of Health Policy and Management
Arnold School of Public Health
University of South Carolina

Director, Data Analytics Core
South Carolina Center of Excellence in Addiction

Angela M. Shoulders
Dept. of Economics
Darla Moore School of Business
University of South Carolina

How Can Data Help You Do Your Job?

- ✓ Inform needs assessment and planning

- ✓ Identify emerging challenges early to allow for proactive responses

- ✓ Track trends and progress over time

- ✓ Pinpoint specific areas in great need of resources to invest resources most efficiently

- ✓ Document needs and outcomes to funders

Challenges to Using Data

- Cost of accessing data

- Infrastructure required to collect and store data

- Data application processes

- Requirements of data use agreements

- Staff expertise to analyze data

- Time to do all of these things!

Today's Roadmap

- Today, we are going to focus on free, publicly available data sources that you can download and use today:

    - Opioid mortality by county, year, and selected demographic characteristics (CDC Wonder)

    - Availability of substance use disorder treatment services and medications by zip code and county (FindTreatment.gov)

    - Health care availability and social determinants of health (HRSA Area Health Resource Files)

- Share resources for more data sources for those who want to pursue more advanced analytic aims

Tracking Overdoses

BENEFITS

- The CDC's WONDER database provides data on drug-related overdose mortality at the _county level on a very timely basis_

- Data can be broken down across many _demographic characteristics_, including race, ethnicity, age, gender, urbanicity, etc.

- More granular data also available at SC DAODAS's _Just Plain Killers_ website, although it is updated less frequently

DRAWBACKS

- Prior work has established _underreporting_ of overdoses, and the frequency of underreporting may vary across counties

- _Small values are suppressed_, which can be a problem for smaller counties and for folks interested breaking down overdose rates across demographic characteristics

- _Newly-released data is provisional_ and hence not fully complete or accurate

Provisional Mortality Statistics, 2018 through Last Week Request
Deaths occurring through February 24, 2024 as of March 03, 2024

Request Form	Results	Map	Chart	About

Multiple Cause of Death Data   Dataset Documentation   Other Data Access   Data Use Restrictions   How to Use WONDER   Save   Reset

*Make all desired selections and then click any **Send** button one time to send your request.*

1. Organize table layout: Send   Help

Group Results By [Residence State ▼]

And By [Residence County ▼]

And By [None ▼]

And By [None ▼]

And By [None ▼]

Notes:

• Group Results By "15 Leading Causes" to see the top 15 rankable causes selected from the corresponding 113 or 130 Cause List. More information.

Measures (**Default measures** always checked and included. Check box to include any others.)

☑ **Deaths**   ☑ **Population**   ☑ **Crude Rate**

For crude rates: ☐ **95% Confidence Interval**   ☐ **Standard Error**

☐ **Age Adjusted Rate**   ☐ 95% Confidence Interval   ☐ Standard Error

☐ **Percent of Total Deaths**

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Send **Help**

Pick between:
- ◉ **Residence States**
- ○ **Residence Census Regions**
- ○ **Residence HHS Regions**

Browse or **search** to find items in the Residence States Finder Tool, then **highlight** the items to use for this request. (The *Currently selected* box displays all current request items.)

Finder Tool Help   **Advanced Finder Options**

Browse	Search	Details

Residence States

Residence States list	Currently selected:
+ 40 (Oklahoma)	45 (South Carolina)
+ 41 (Oregon)	
+ 42 (Pennsylvania)	
+ 44 (Rhode Island)	
+ 45 (South Carolina)	
+ 46 (South Dakota)	
+ 47 (Tennessee)	
+ 48 (Texas)	
+ 49 (Utah)	
+ 50 (Vermont)	
+ 51 (Virginia)	

Open   Close   Close All

Browse the list by opening and closing items.
Use Ctrl+Click to multiple select, Shift+Click for a range.

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Occurrence 2013 Urbanization

Pick between:

Occurrence 2013 Urbanization ●
Occurrence 2006 Urbanization ○

Occurrence 2013 Urbanization
All Categories
Large Central Metro
Large Fringe Metro
Medium Metro
Small Metro
Micropolitan (Nonmetro)
NonCore (Nonmetro)

---

3. Select demographics: Send   Help

Hint: Use Ctrl + Click for multiple selections, or Shift + Click for a range.

Ten-Year Age Groups

Pick between:

Ten-Year Age Groups ●
Five-Year Age Groups ○
Single-Year Ages ○
Infant Age Groups ○

Ten-Year Age Groups
All Ages
< 1 year
1-4 years
5-14 years
15-24 years
25-34 years
35-44 years
45-54 years
55-64 years
65-74 years
75-84 years
85+ years

Default rates per 100,000

Gender

Gender
All Genders
Female
Male

Hispanic Origin

Hispanic Origin
All Origins
Hispanic or Latino
Not Hispanic or Latino
Not Stated

Single Race 6

Pick between:

Single Race 6 ●
Single Race 15 ○
Single/Multi Race 31 ○

Single Race 6
All Races
American Indian or Alaska Native
Asian
Black or African American
Native Hawaiian or Other Pacific Islander
White
More than one race

Pick between Year/Month of Death, or MMWR Year / MMWR Week of Death.

- ● **Year/Month of Death**
- ○ **MMWR Year / MMWR Week of Death**

Browse or **search** to find items in the Year/Month Finder Tool, then **highlight** the items to use for this request.
(The *Currently selected* box displays all current request items.)

     Finder Tool Help   **Advanced Finder Options**

Browse	Search	Details

Year/Month

All (All Dates)	Currently selected:
+ 2018 (2018)	*All* (All Dates)
+ 2019 (2019)	
+ 2020 (2020)	
+ 2021 (2021)	
+ 2022 (2022 (provisional))	
+ 2023 (2023 (provisional))	
+ 2024 (2024 (provisional and partial))	

Open   Close   Close All

Browse the list by opening and closing items.
Use Ctrl+Click to multiple select, Shift+Click for a range.

Click a button to select ICD codes by Chapters or by Groups.

○ **UCD - ICD-10 Codes**   ○ **UCD - ICD-10 130 Cause List (Infants)**   ● **UCD - Drug/Alcohol Induced Causes**
○ **UCD - ICD-10 113 Cause List**   ○ **UCD - Injury Intent and Mechanism**

Browse or **search** to find items in the UCD - Drug/Alcohol Induced Causes Finder Tool, then **highlight** the items to use for this request.
(The *Currently selected* box displays all current request items.)

Finder Tool Help   Advanced Finder Options

Browse	Search	Details

UCD - Drug/Alcohol Induced Causes

All Causes of Death
- Drug-induced causes
    Drug poisonings (overdose) Unintentional (X40-X44)
    Drug poisonings (overdose) Suicide (X60-X64)
    Drug poisonings (overdose) Homicide (X85)
    Drug poisonings (overdose) Undetermined (Y10-Y14)
    All other drug-induced causes
+ Alcohol-induced causes
+ All other non-drug and non-alcohol causes
+ Data not shown due to 6 month lag to account for delays in death certificate completion for cert

Currently selected:

Drug poisonings (overdose) Un

Open   Close   Close All

Browse the list by opening and closing items.
Use Ctrl+Click to multiple select, Shift+Click for a range.

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8. Other options:

Export Results ☐ (Check box to download results to a file)
Show Totals ☑
Show Zero Values ☑
Show Suppressed Values ☑

Precision [1 ⌄] decimal places
Data Access Timeout [10 ⌄] minutes

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Provisional Mortality Statistics, 2018 through Last Week Results

Deaths occurring through February 24, 2024 as of March 03, 2024

Multiple Cause of Death Data   Dataset Documentation   Other Data Access   Help for Results   Printing Tips   Help with Exports   Save   Export   Reset

Quick Options   More Options   API Options   Top   Notes   Citation   Query Criteria

Residence States: South Carolina (45); UCD - Drug/Alcohol Induced Causes: Drug poisonings (overdose) Unintentional (X40-X44)

Residence State ⬇	Residence County	➡ Deaths ⬆⬇	⇄ Population ⬆⬇	⬅ Crude Rate Per 100,000 ⬆⬇
South Carolina (45)	Abbeville County, SC (45001)	33	170,839	19.3
South Carolina (45)	Aiken County, SC (45003)	386	1,206,394	32.0
South Carolina (45)	Allendale County, SC (45005)	Suppressed	56,517	Suppressed
South Carolina (45)	Anderson County, SC (45007)	330	1,443,044	22.9
South Carolina (45)	Bamberg County, SC (45009)	13	94,160	Unreliable
South Carolina (45)	Barnwell County, SC (45011)	46	144,605	31.8
South Carolina (45)	Beaufort County, SC (45013)	205	1,357,354	15.1
South Carolina (45)	Berkeley County, SC (45015)	369	1,657,037	22.3
South Carolina (45)	Calhoun County, SC (45017)	17	100,329	Unreliable
South Carolina (45)	Charleston County, SC (45019)	724	2,906,153	24.9
South Carolina (45)	Cherokee County, SC (45021)	67	396,109	16.9

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Crude Rate for South Carolina
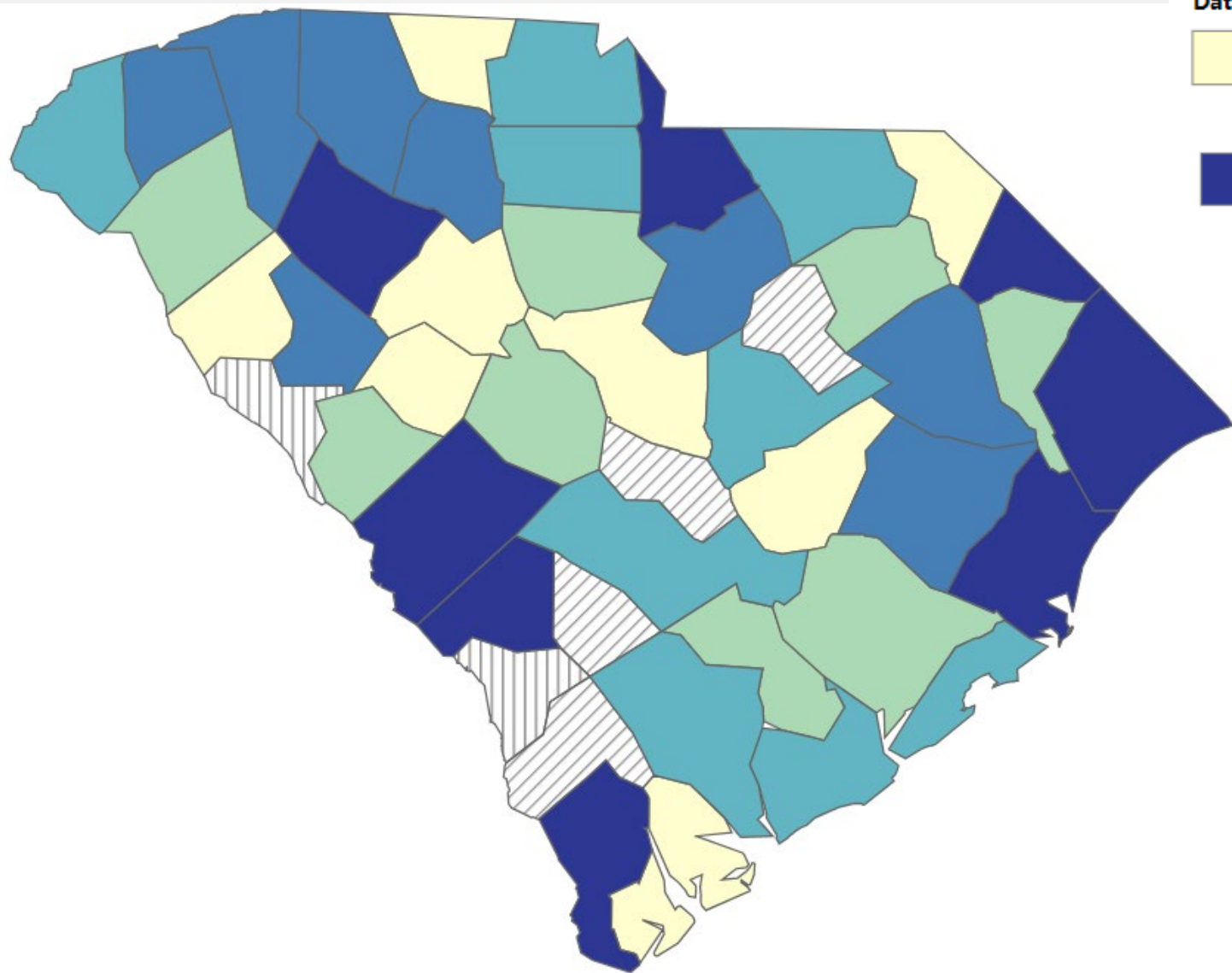
Data classified using quantiles

- 15.1 - 19.4
- 19.6 - 23.5
- 24 - 26.3
- 27 - 30
- 31.4 - 40.4
- Suppressed
- Unreliable
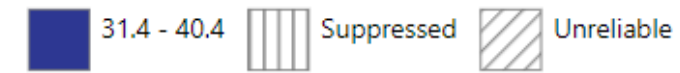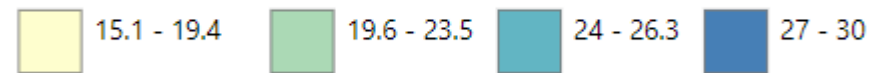
Assessing Treatment Availability

BENEFITS

- SAMHSA's FindTreatment.gov (National Substance Use and Mental Health Services Survey) provides information on treatment service and medication availability

- Data is available at a _very granular level_ and includes specific addresses of providers

- Information includes specific information about the _types of treatment services and medications provided_ and is updated annually

DRAWBACKS

- This is _not a complete census_ of all available providers—only those who agree to be included on the website

- Some providers in the database _may not actually be providing advertised services_

- The database does _not provide information on facility capacity_

- _Cannot be used to measure trends_ over time unless one intentionally builds a database with point-in-time measures

Search Results
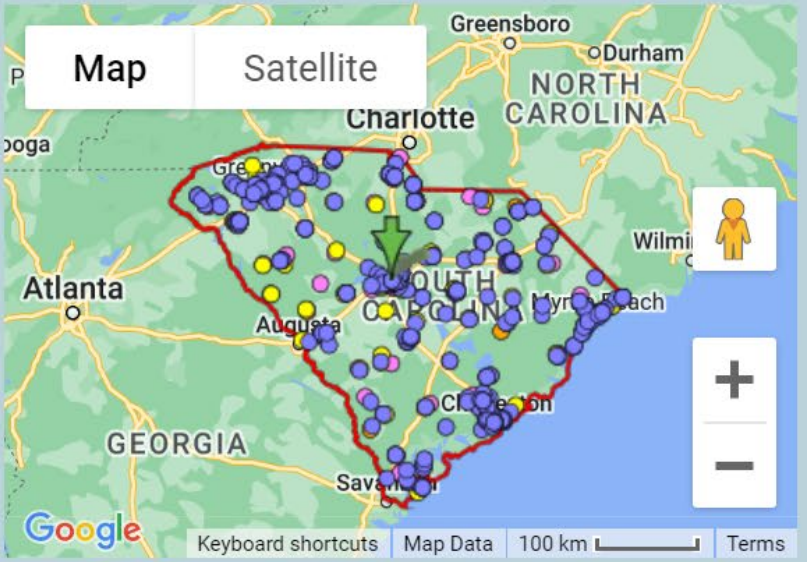
View in a map

Legend: Facility Types
- 🟣 Substance Use
- 🟡 Mental Health
- 🟢 Health Care Centers
- 🟣 Buprenorphine Practitioners
- 🟠 Opioid Treatment Programs

Your Location

Richland County, SC, USA ✕

☑ State ☐ County ☐ Distance [25 miles ▾]

[Search]

PLEASE NOTE: Call the facility before your visit to make sure they provide the services you need. See common questions to help guide your conversation. Learn more about treatment options.

Substance Use & Mental Health —

Search filters

Popular Filters ⌃

☐ Veterans Affairs ❶
☐ Medicaid ❶
☐ Adults ❶
☐ Outpatient ❶
☐ Residential/24-hour residential
☐ Telemedicine/telehealth therapy ❶

Type of Care ⌃

☐ Substance use treatment ❶
☐ Treatment for co-occurring substance use plus either serious mental health illness in adults/serious emotional disturbance in children ❶

Service Setting (e.g., Outpatient, Residential, Inpatient, etc.) ⌃

☐ Hospital inpatient/24-hour hospital inpatient ❶
☐ Outpatient ❶
☐ Residential/24-hour residential

Medication Therapy ⌃

☐ Nicotine replacement ❶
☐ Non-nicotine smoking/tobacco cessation ❶

Treatment Approaches ⌃

☐ Cognitive behavioral therapy ❶
☐ Telemedicine/telehealth therapy ❶

Facility Operation (e.g., Private, Public) ⌃

☐ Local, county, or community government
☐ Department of Defense ❶
☐ Indian Health Services
☐ Private for-profit organization ❶
☐ Private non-profit organization ❶
☐ State government ❶
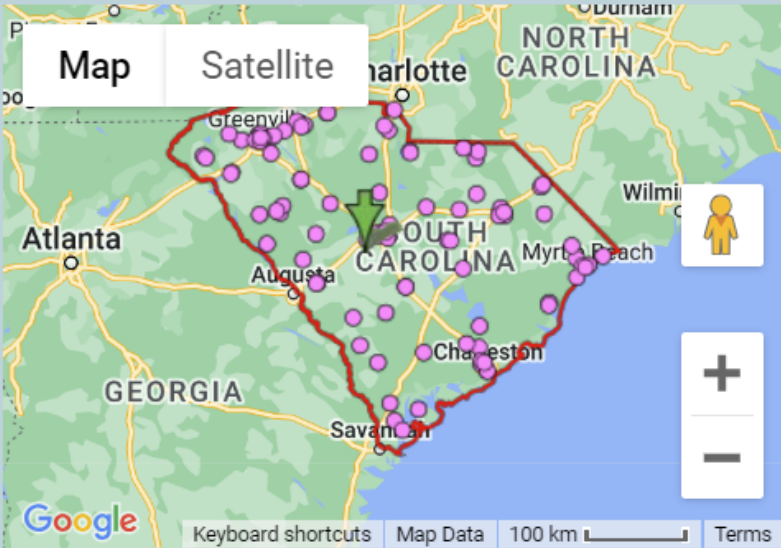
Search Results

Map | Satellite

View in a map

Legend: Facility Types
- Substance Use
- Mental Health
- Health Care Centers
- Buprenorphine Practitioners
- Opioid Treatment Programs

Your Location

South Carolina, USA

☑ State   ☐ County   ☐ Distance   [25 miles ▾]

[Search]

PLEASE NOTE: Call the facility before your visit to make sure they provide the services you need. See common questions to help guide your conversation. Learn more about treatment options.

▼ Filter by

Facility Name

e.g., Montgomery Recovery Services

Facility Types *(select all that apply)*

☑ Substance Use ⓘ

Showing 102 records in the state of South Carolina.

Sorted by: [Distance: Low to High ▾]

< previous | **1** | 2 | 3 | ... | 10 | 11 | next >

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Measuring Local Capacity

BENEFITS

- HRSA's Area Resource File includes extensive data at the county level

- Includes data on health professionals, facilities, health care utilization rates and expenditures, shortage areas, and other of community indicators

- Measurement of these _contextual factors_ can be important in making the case for community need

DRAWBACKS

- Data on health care utilization and expenditures is not comprehensive and limited to subset of reporting facilities

- While longitudinal data is available, the _files require linkage across multiple datasets,_ which can be complex to perform

- The Area Resource File does not provide any data points specific to opioid use disorder or overdose-related mortality

B.	**HEALTH PROFESSIONS**	
B- 1)	Physicians	
B- 2)	Dentists	
B- 3)	Physician Assistants	
B- 4)	Nurses	
B- 5)	Chiropractors	
B- 6)	Optometrists	
B- 7)	Podiatrists	
C.	**HEALTH FACILITIES**	
C- 1)	Hospital Type	
C- 2)	Hospital Services (or Facilities)	
C- 3)	Hospital Employment	
C- 4)	Medicare Fee-For-Service Readmission Data	
C- 5)	Preventable Hospital Stays Rate	
C- 6)	Nursing and Other Health Facilities	
C- 7)	Community Health Centers (CHC)	
C- 8)	National Health Service Corps (NHSC)	
D.	**UTILIZATION**	
D- 1)	Utilization Rate	
D- 2)	Inpatient Days	
D- 3)	Outpatient Visits	
D- 4)	Surgical Operations and Operating Rooms	
D- 5)	Medicare FFS Emergency Department Data	
E.	**EXPENDITURES**	
E- 1)	Hospital Expenditures	
E- 2)	Medicare Fee-For-Service Cost Data	
E- 3)	Medicare Advantage Rates	
E- 4)	Veteran Expenditures Data	

F.	**POPULATION**
F- 1)	Population Estimates
F- 2)	Population Counts and Number of Families and Households
F- 3)	Population Percent
F- 4)	Labor Force
F- 5)	Per Capita Incomes
F- 6)	Income
F- 7)	Persons and Families Below Poverty Level
F- 8)	Deep Poverty
F- 9)	Ratio of Income to Poverty Level
F-10)	Median Family Income
F-11)	Household Income
F-12)	Medicare Enrollment Data
F-13)	Medicare Fee-For-Service Demographic Data
F-14)	Medicare Advantage Penetration
F-15)	Medicare Prescription Drug Plan (PDP) Penetration
F-16)	Health Insurance Estimates
F-17)	Marketplace Health Insurance Enrollment
F-18)	Disability Data
F-19)	Food Stamp/SNAP Recipient Estimates
F-20)	Social Security Program
F-21)	Supplemental Security Income Program Recipients
F-22)	5-Year Infant Mortality Rates
F-23)	Mortality Data
F-24)	Total Deaths
F-25)	Natality Data
F-26)	Births in Hospitals
F-27)	Total Births
F-28)	Education
F-29)	Census Housing Data
F-30)	Veteran Population

Data Downloads

Area Health Resources Files ⓘ   **+**

Note:

- The 2022-2023 AHRF contains a number of changes (e.g., new variable names, subset files in CSV format). Please review "What's New" in the AHRF technical documentation for more information.
- Please contact NCHWAInquiries@hrsa.gov for technical questions about the Area Health Resources Files (AHRF) data. Historical data are available for some variables in the AHRF county level data file. Please review the AHRF Technical Documentation (excel) for a list of variables and years included in the published data file.

2022–2023 County Level Data

Technical documentation (Approx. 1.9 MB)		`ZIP`
CSV (Approx 23.6 MB)		`CSV`
ASCII format (Approx 17.6 MB)		`ASCII`
SAS format (Approx 17.6 MB)		`SAS`

2022–2023 State and National Level Data

Technical documentation (Approx. 1.05 MB)		`ZIP`
CSV (Approx 507 KB)		`CSV`
ASCII format (Approx 550 KB)		`ASCII`
SAS format (Approx 222 KB)		`SAS`

2021–2022 County Level Data

Technical documentation (Approx. 768 KB)		`ZIP`

2021–2022 State and National Level Data

Technical documentation (Approx. 184 KB)		`ZIP`

HPSA Find

Find data on the geographic, population, and facility [HPSA designations](#) throughout the United States.

Use this tool to:

> Search HPSAs by location or HPSA ID

> Filter HPSAs by discipline, status, type, score, and rural status

Search	HPSA ID Search	Export Data XLSX PDF

Select a State/Territory (required)

South Carolina ⌄

Select County(s) (required)

All Counties
Abbeville County

	Discipline ⓘ	HPSA ID ⓘ	HPSA Name ⓘ	Designation Type ⓘ	Primary State Name ⓘ	County Name ⓘ	HPSA FTE Short ⓘ	HPSA Score ⓘ	PC MCTA Score ⓘ	Sta ⓘ
				No data available in table						

40

Select County(s) (required)

All Counties
Abbeville County
Aiken County
Allendale County
Anderson County
Bamberg County
Barnwell County
Beaufort County
Berkeley County
Calhoun County

Submit

Apply Filters (Optional)

HPSA Discipline   ⊖

☑ Primary Care
☐ Dental Health
☑ Mental Health

HPSA Status ⊖

- ☑ Designated
- ☐ Proposed for Withdrawal
- ☐ Withdrawn

HPSA Designation/Population Types ⊖

- ☑ All Geographic HPSAs
  - ☑ Geographic HPSA
  - ☑ High Needs Geographic HPSA
- ☑ All Population HPSAs
  - ☑ Homeless Population HPSA
  - ☑ Low Income Homeless Migrant Farmworker Population HPSA
  - ☑ Low Income Homeless Migrant Seasonal Worker Population HPSA
  - ☑ Low Income Homeless Population HPSA
  - ☑ Low Income Migrant Farmworker Population HPSA

HPSA Score ⊖

0   13   26

Rural Status ⊖

- ☑ Rural
- ☑ Partially Rural
- ☑ Non-Rural
- ☑ Unknown

Update Date ⊖

From MM/DD/YYYY 📅

To MM/DD/YYYY 📅

	Discipline	HPSA ID	HPSA Name	Designation Type	Primary State Name	County Name	HPSA FTE Short
⊕	Primary Care	1455758029	Hampton County	Geographic HPSA	South Carolina	Hampton County, SC	2.90
⊕	Primary Care	1454197965	Allendale County	High Needs Geographic HPSA	South Carolina	Allendale County, SC	0.15
⊕	Primary Care	1457396008	Bamberg County	High Needs Geographic HPSA	South Carolina	Bamberg County, SC	1.00
⊕	Primary Care	1454747595	Barnwell County	High Needs Geographic HPSA	South Carolina	Barnwell County, SC	3.16

U.S. Department of Health and Human Services
Assistant Secretary for Planning and Evaluation
Office of Health Policy

Data Sources and Data-Linking Strategies to Support Research to Address the Opioid Crisis

FINAL REPORT

Data Description	Summary	Examples of Important Measures	Data Source Examples
National surveys	**Description**: Generally household or school-based surveys with self-reported information on drug use and health; other surveys are of hospitals, treatment facilities, or other medical service providers **Geographic coverage**: National **Timing**: Generally collected and available annually	Prescription opioid use, heroin use, opioid use disorder, medical conditions, health care utilization	National Survey on Drug Use and Health, National Ambulatory Medical Care Survey, National Survey of Substance Abuse Treatment Services Data, Medical Expenditure Panel Survey
EHR	**Description**: An EHR contains the medical and treatment histories of patients. However, it often contains more than standard clinical data, and may also include a broader view of a patient's care. EHRs may contain a patient's medical history, diagnoses, medications, treatment plans, allergies, radiology images, and laboratory and test results **Geographic coverage**: Varies by source **Timing**: Near-real time or real-time collection	Previously prescribed opioids or other medications; patient history, medications, clinical conditions, treatment plans, and lab/test results; may include clinician notes	Stanford Translational Research Integrated Database, HealthCore Integrated Research Database, Group Health Cooperative in Washington State
Claims data	**Description**: Patient-level claims data for reimbursement for services submitted by health care providers and pharmacies to insurance companies. Validated algorithms to identify opioid misuse or abuse from claims data are being developed **Geographic coverage**: Varies by source **Timing**: Varies by source	Prescription drug utilization; service utilization	IQVIA, Symphony Health, Truven Marketscan data, Medicaid claims, Medicare Part D Prescription Drug Event data
Mortality records	**Description**: Death rates and causes of death by drug compound and/or International Classification of Diseases code. Additional information can include toxicology reports **Geographic coverage**: National or single state **Timing**: Generally available annually	Rates of opioid-involved deaths; drugs involved in overdose deaths	CDC WONDER Multiple-cause-of death data; Fatal Accident Reporting System; NDI
Prescription monitoring data	**Description**: Data systems to track and monitor the distribution or prescription of controlled substances **Geographic coverage**: Varies by source **Timing**: Varies by source	Opioid prescribing rates (by type); indicators of "doctor shopping," coprescribing of opioids and other controlled drugs, geographic variation in opioid distribution	Automation of Reports and Consolidated Orders System (ARCOS); state prescription drug–monitoring programs
Contextual and policy data	**Description**: Causal analyses of the effects of policy changes on opioid-related outcomes generally use data on state laws from these sources and/or includes controls for state or county characteristics to support causal interpretation **Geographic coverage**: National **Timing**: Varies, but generally semiannually	State opioid policies, state and county demographic and socioeconomic factors, state and county health care variables	Area Health Resources Files, Policy Surveillance System, PDAPS
Other national, state, and local sources	**Description**: Includes data collected through law enforcement, national public health surveillance systems (e.g., poison control center data, emergency department visit data), OEND program data, other hospitalization and emergency department data **Geographic coverage**: Varies by source **Timing**: Varies by source	Law enforcement drug seizures, nonfatal opioid overdose, opioid-related emergency department visits and hospitalizations, naloxone distribution through community organizations	NEMSIS, NPDS, HCUP emergency department and hospitalization data

Other Resources

- [AHRQ's Healthcare Cost and Utilization Project](#) (longitudinal hospital care data)

- [CDC's National Death Index Data](#)

- [Just Plain Killers: Overdose Deaths by County](#)

- [SAMHSA's Substance Abuse and Mental Health Data Archive](#) ([TEDS](#), [NSDUH](#), [N-SUMHSS](#))

- [RAND Opioid Tools Policy and Information Center](#) (OPTIC)

- [South Carolina Revenue and Fiscal Affairs Office](#)

- [Temple University's Prescription Drug Abuse Policy System](#)

- [United States Census Bureau](#)/[American Community Survey](#)

# April 30-May 1

https://scopioidsummit.org

Technical Assistance

Connection to the SC Center of Excellence in Addiction and associated resources:

- **Provider Warmline for medical clinicians and practitioners**
  - **864-914-1301, Mon - Fri 9:00 am - 5:00 pm**
  - Consultation on assessing and treating substance use disorders
  - Harm reduction and overdose prevention
  - Medically-assisted treatment
  - Connections to community supports
  - ➤ Local [news story](#) on the warmline

- **Opioid Abatement Strategies**
  - Evidence-based strategies for opioid prevention and treatment
  - Strategic planning and capacity building
  - Data collection and analysis
  - **addictioncenterofexcellence.sc.gov** or **camhr@clemson.edu**
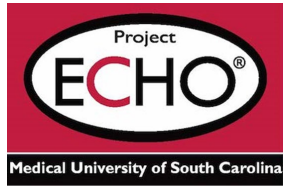
Technical Assistance, cont.

- ECHO (Extension for Community Healthcare Outcomes)

  - Trainings and tele-mentoring for stakeholders to address opioid abatement in their communities

  - Connect with leaders and experts and share with peers

  - https://addictioncenterofexcellence.sc.gov/training

QUESTIONS?