



SOUTH CAROLINA  
CENTER *of*  
EXCELLENCE *in*  
ADDICTION

JUNE 2023 - JUNE 2026

# State Impact Report



# Contents

|           |                                                                                                  |
|-----------|--------------------------------------------------------------------------------------------------|
| <b>3</b>  | <b>Letter from the Director</b>                                                                  |
| <b>4</b>  | <b>Executive Summary</b>                                                                         |
| <b>6</b>  | <b>Technical Assistance: Clinical Consultation &amp; Opioid Abatement Support</b>                |
| 8         | Trainings: Highlighted Examples                                                                  |
| 9         | Data and Program Evaluation Support: Highlighted Examples                                        |
| 9         | Warmline Consultations                                                                           |
| 10        | Learning Collaboratives                                                                          |
| 10        | Needs Assessments: Highlighted Examples                                                          |
| 10        | Resource Hubs                                                                                    |
| 11        | Implementation TA Impact: Highlighted Case Studies                                               |
| 11        | The Center’s Policy Impact: Highlighted Case Studies                                             |
| <b>12</b> | <b>Data Analytics: Tracking Treatment for Opioid Use Disorder</b>                                |
| 15        | South Carolina Opioid Treatment Dashboard Optics                                                 |
| <b>16</b> | <b>Training and Education: Building Workforce Capacity Through Training &amp; Tele-mentoring</b> |
| 17        | Community Opioid Response Initiatives (CORI) ECHO                                                |
| 19        | Project ECHO for Opioid Use Disorder                                                             |
| 19        | Project ECHO for Peer Support Specialists                                                        |
| 19        | Consultations                                                                                    |
| 20        | Trainings                                                                                        |
| <b>22</b> | <b>Governor’s Summit on Addiction: A Statewide Commitment to Action</b>                          |
| 23        | The Center Convenes the SC Governor’s Summit on Addiction                                        |
| 23        | Bringing People and Solutions Together                                                           |
| 23        | Growing Reach and Impact                                                                         |
| 24        | 2024 Summit Highlights                                                                           |
| 25        | 2025 Summit Highlights                                                                           |
| <b>26</b> | <b>Collaboration in Action: Complementing and Catalyzing Efforts to Fight Addiction in SC</b>    |
| <b>30</b> | <b>Community and Stakeholder Presentations</b>                                                   |
| <b>31</b> | <b>News Mentions</b>                                                                             |
| <b>31</b> | <b>Report Acronyms</b>                                                                           |



# Letter from the Director

It is my privilege to introduce this report on behalf of the South Carolina Center of Excellence in Addiction. Having just stepped into the role of Director in April, I do so with appreciation for the strong foundation that has been built since the Center's founding. I want to recognize our founding director, Jodi Manz, whose leadership was instrumental in establishing the Center and advancing its early work. I also want to acknowledge the generous support of the South Carolina Opioid Recovery Fund, which has provided support for the Center's core activities since its inception in 2023.



The South Carolina Center of Excellence in Addiction is a statewide collaboration between Clemson University, the University of South Carolina, the Medical University of South Carolina, the Office of Substance Use Services at the Department of Behavioral Health and Developmental Disabilities, and the S.C. Department of Public Health. Since its inception, the Center has focused on strengthening South Carolina's response to substance use disorders through coordinated, practical support to communities across the state. Over the past three years, it has developed into a statewide resource for technical assistance, data, and training.

A core part of this work has been expanding technical assistance. The Center has provided hundreds of consultations to clinicians, local governments, community organizations, and other partners, along with direct support through the clinician warmline. These efforts have helped communities implement opioid abatement strategies and address gaps in care across regions of the state.

The Center has also built tools to support data-informed decision-making. The South Carolina Opioid Treatment Data Dashboard provides accessible information on opioid use disorder diagnosis, treatment, and retention, giving stakeholders a clearer picture of needs and opportunities at the local level.

Training and education have been another major focus. Through programs such as the Community Opioid Response Initiatives (CORI) ECHO and the Opioid Use Disorder ECHO, the Center has delivered regular sessions to participants across multiple sectors, including healthcare, public safety, and community organizations. These efforts have supported consistent learning and communication across counties and disciplines.

Finally, the Center has supported statewide coordination by bringing together opioid response professionals and partners on a regular basis and through events such as the South Carolina Governor's Summit on Addiction. These efforts create opportunities to share information, identify needs, and align strategies across agencies and communities.

As I begin in this role, I am focused on continuing this work and supporting the partners who make it possible. The need for coordination and practical support remains high, and the Center will continue to prioritize efforts that help communities respond effectively.

Together, we will build on this strong foundation to advance a coordinated, effective response to addiction across South Carolina.

Sincerely,

A handwritten signature in black ink, reading "Lara Raymond". The signature is fluid and cursive, with the first name "Lara" and last name "Raymond" clearly distinguishable.

**LARA RAYMOND, MPH**

**Director**

South Carolina Center of Excellence in Addiction

# Executive Summary

The Center of Excellence has demonstrated significant impact through **statewide technical assistance**, direct **provider support, training and education**, and the development of **publicly accessible data resources**. The Technical Assistance Core has delivered over **500 consultations via technical assistance** and **112 consultations via the warmline**, supporting communities across all four South Carolina regions. In parallel, the Center has facilitated ongoing **collaboration among 40 opioid response professionals and coordinators**, strengthening cross-site learning and coordination through the “Needs & Leads” program, with ongoing efforts for continued expansion for additional collaboratives.

The Data Analytics Core has further extended the Center’s impact by translating complex health data into actionable insights through the **South Carolina Opioid Treatment Data Dashboard**. In the past year alone, the dashboard attracted nearly 2,000 visitors, reflecting sustained engagement with tools designed to support clinical, policy, and community decision-making.

The Training and Education Core has delivered consistent, high-impact training to stakeholders across South Carolina, demonstrating strong reach and engagement. Through the **Community Opioid Response Initiatives (CORI) ECHO program**, the Training and Education Core has delivered **52 sessions**, engaging **300 unique participants** across **1,554 total attendances**, with representation from 33 of 46 counties statewide. The **Opioid Use Disorder (OUD) and Peer ECHO** programs reached nearly 2,200 participants between November 2024 and March 2026.

| IMPACT AREA           | METRIC                       |
|-----------------------|------------------------------|
| Technical Assistance  | <b>500+</b> consultations    |
| Warmline Support      | <b>112</b> consultations     |
| Education             | <b>52</b> CORI ECHO sessions |
| Summit on Addiction   | <b>1,276</b> attendees       |
| Data Dashboard        | <b>4,632</b> views           |
| Website Engagement    | <b>35</b> presentations      |
| Dissemination of Work | <b>19</b> news mentions      |
| Public Visibility     |                              |

*The Center of Excellence has demonstrated significant impact through:*

- ▶ **STATEWIDE TECHNICAL ASSISTANCE**
- ▶ **PROVIDER SUPPORT**
- ▶ **TRAINING AND EDUCATION**
- ▶ **PUBLICLY ACCESSIBLE DATA**

The Center’s research output is steadily growing, with five peer-reviewed publications to date, and is already gaining visibility across academic and public audiences through media coverage. While the Center has predominantly been promoted by local news outlets, including *The State* and *The Post and Courier*, the Center has also gained national attention through coverage by The Pew Charitable Trusts. The Center has fostered partnerships that have expanded the state’s collective capacity to address addiction, including grant-funded initiatives through the Department of Justice (DOJ) and the National Institutes of Health (NIH).





TECHNICAL ASSISTANCE:

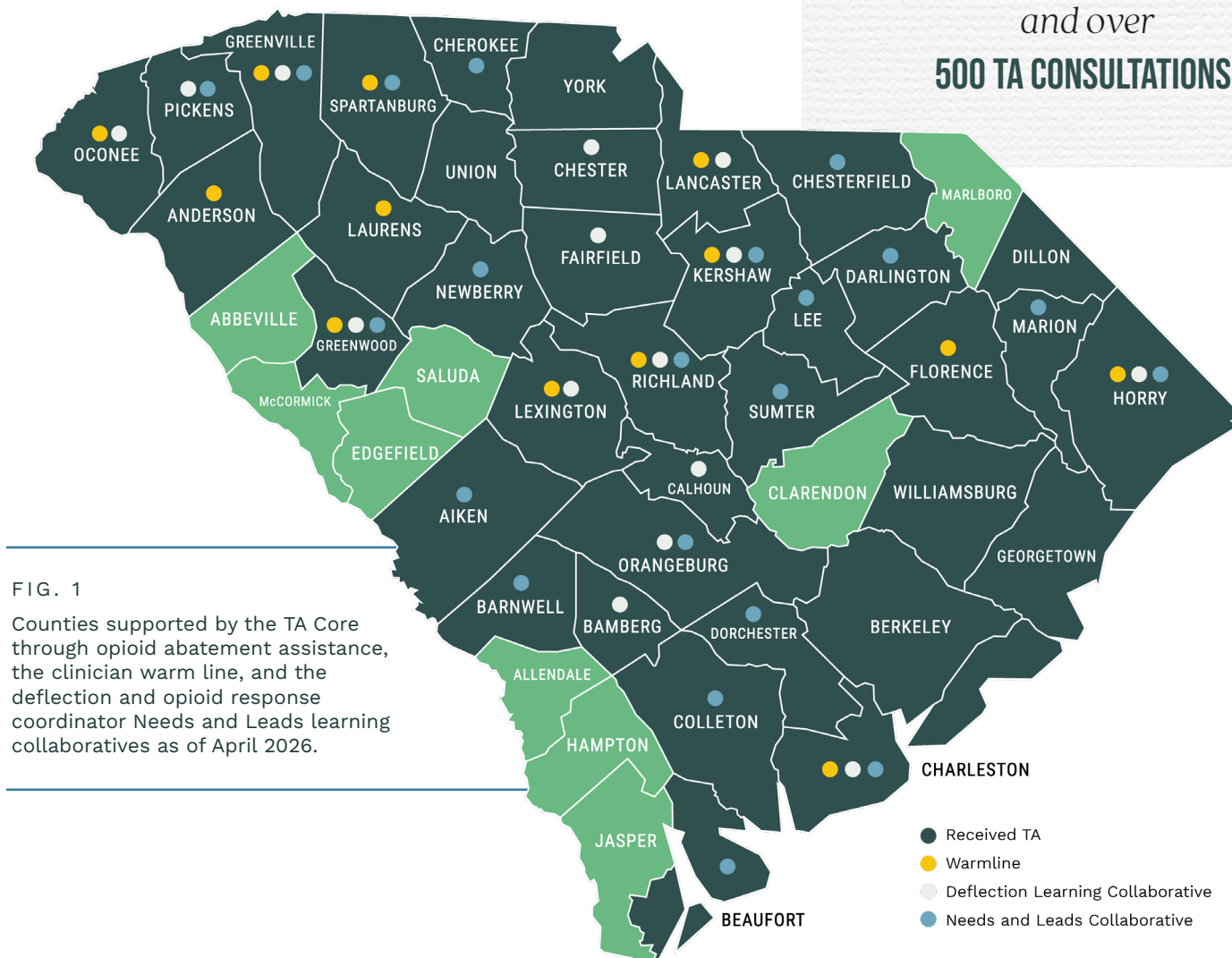
# Clinical Consultation & Opioid Abatement Support

The Technical Assistance (TA) Core designs and delivers statewide technical assistance, including a clinician “warmline” for consultation and hands-on implementation support for local opioid abatement. It has built a cadre of **over 50 experts** and linked them with communities across the state to meet needs in program evaluation, data analysis, and strategic planning.

The TA Core provides a comprehensive range of supports to strengthen systems, improve service delivery, and expand access to care, including: (1) one-time and durable educational trainings; (2) formal presentations; (3) data and program evaluation support; (4) clinical and operational expertise via warmlines, protocol development, and implementation of abatement strategies; (5) change in policy to improve access to care; (6) learning collaboratives for opioid response coordinators and law enforcement deflection programs; (7) needs assessments; (8) maintaining resource hubs for both general TA and law enforcement TA; (9) grant writing assistance; and (10) hosting regional workshops and summits. Figures 1 and 2 show the reach and types of support delivered.

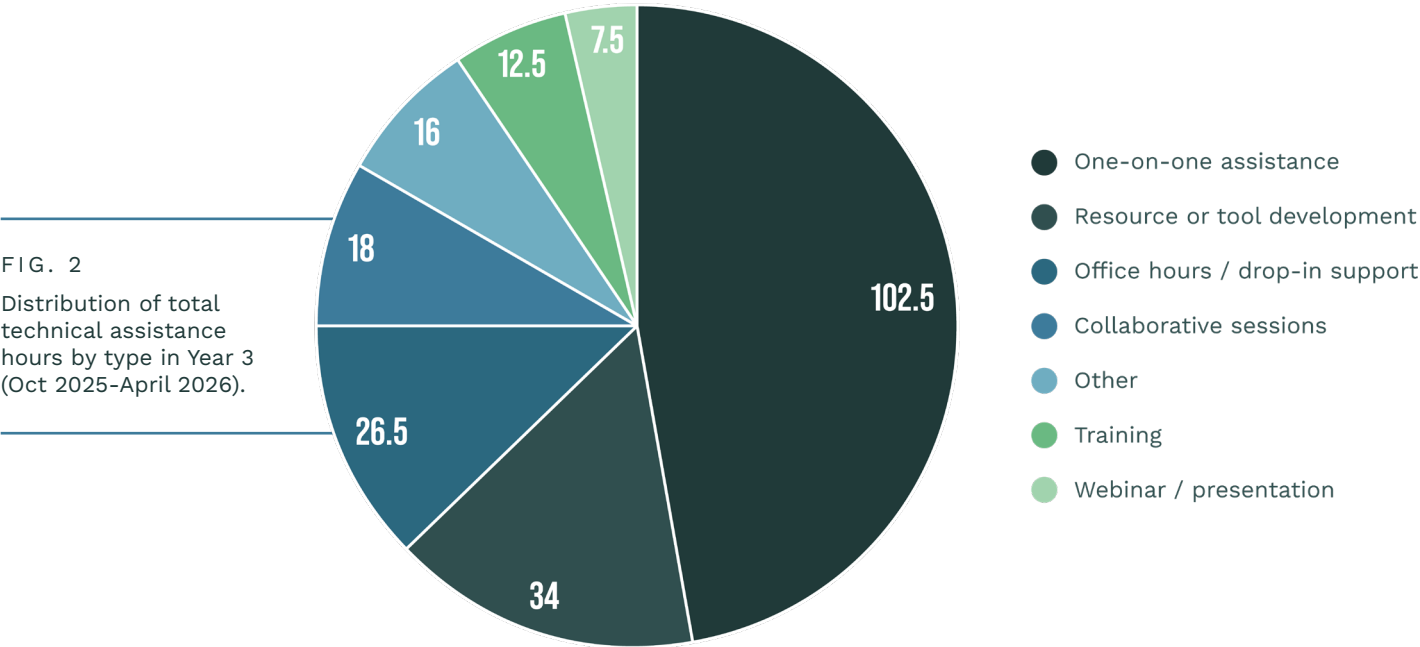
## Statewide Technical Assistance

Since 2024,  
the TA team has provided  
**112 WARMLINE CONSULTATIONS**  
and over  
**500 TA CONSULTATIONS.**



# Technical Assistance Provided

OCT 2025 - MAY 2026



## Trainings: Highlighted Examples

### THE SCIENCE OF ADDICTION VOICEOVER (Dec 2025)

Produced 1-hour voiceover trainings on addiction science for the Center’s TA Repository.

### TRIBAL HARM REDUCTION (Dec 2025)

Delivered a 2-hour in-person training to 8 representatives from an Upstate SC Tribal community on harm reduction, overdose response, drug trends, and OUD community resources.

### AIKEN-BARNWELL CROSS-TRAINING INITIATIVE (2025 - Ongoing)

Partnering with MUSC and the county alcohol and drug authorities and mental health centers serving Aiken and Barnwell to build curriculum and strengthen care for co-occurring substance use and mental health disorders.

### OPIOID AND PAIN MANAGEMENT (2026)

With the City of Mauldin Fire Department, launching a Cognitive Behavioral Therapy (CBT) based pain management and opioid prevention program for adults 55 and over who face elevated risk from chronic illness and opioid prescribing.

### COMPASSION FATIGUE & BURNOUT (April 2026)

Delivered a 2-hour in-person session to 40 clinical and peer support staff at The Phoenix Center in Greenville, addressing burnout, compassion fatigue, and boundaries; a second session follows in late May. Participants valued the experiential format over lecture.



# Data and Program Evaluation Support: Highlighted Examples

## HORRY COUNTY DETENTION CENTER

(May 2024 – Fall 2025)

Delivered 35 hours of consultation to design data collection strategies, evaluate outcomes, and identify collection software, and build REDCap surveys for the Recovery Program. Findings will be disseminated statewide to other detention centers and support publications and presentations.

## LANCASTER COUNTY SHERIFF'S OFFICE

(March 2026 - ongoing)

Delivering 35 hours of TA to launch REDCap and streamline cross-agency data integration and analysis.



## Warmline Consultations

The TA Core tapped into Center clinical and operational expertise to deliver **112 warmline consultations** (Jan 2024 - May 2026), serving Anderson, Charleston, Darlington, Florence, Greenville, Horry, Laurens, Oconee, Richland, and Spartanburg counties. The warmline gives clinical expert advice on MAT implementation and follow-through, improving continuation of care for individuals with OUD and co-occurring SUD and mental health disorders (Figure 3).

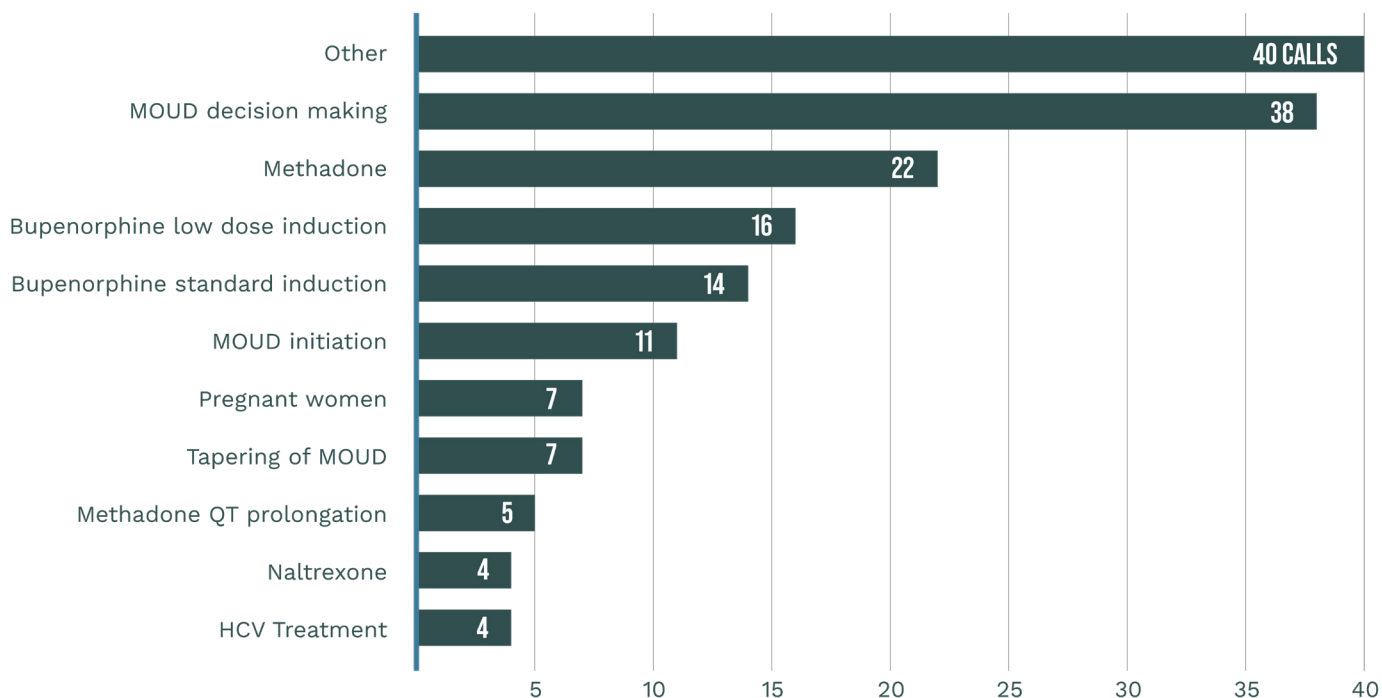


FIG. 3

Distribution of reasons for calls among Warmline consultations (Jan 2024–May 2026).

# Learning Collaboratives

## OPIOID RESPONSE PROFESSIONALS NEEDS AND LEADS

Monthly collaborative offering peer-supported implementation help, statewide resource links, and site-specific problem-solving; **40 participants across 21 counties.**

## DEFLECTION LEARNING COLLABORATIVE

Monthly peer-centered forum advancing strategies, best practices, and local resources for SC deflection sites.

## OTHER LEARNING COLLABORATIVES

The team will extend the Needs and Leads to justice-involved agencies and collegiate recovery programs.



## Needs Assessments: Highlighted Examples

Drafted a plan and partnership invitation for Faces & Voices of Recovery (FAVOR Upstate) to lead a multi-county rural Behavioral and Mental Health Regional Needs Assessment focused on substance and opioid use disorder.

Interviewed stakeholders at **21 SCORF-grantee agencies** on their use or planned use of recovery funds and their abatement needs, successes, and challenges. Results inform policy and programming, sharpen awareness of and connections to existing resources, and promote the Center's TA offerings statewide.

## Resource Hubs

The TA Core curates a comprehensive repository of evidence-based guidelines, national and state data sources, clinical protocols, and tools spanning areas such as MOUD, harm reduction, prevention, incarceration-based care, maternal health, and more. Drawing on the Centers for Disease Control and Prevention (CDC), the Substance Abuse and Mental Health Services Administration (SAMHSA), the Health Resources and Services Administration (HRSA), and the American Society of Addiction Medicine (ASAM), it provides actionable best practices for local decision-making and updates continually to match evolving needs across South Carolina.



# Implementation TA Impact: Highlighted Case Studies

## GREENVILLE COUNTY DETENTION CENTER (GCDC)

Since January 2024, the TA core has provided ongoing assistance to GCDC with withdrawal management and induction protocols, MOUD management approaches, review of all protocols including screening, discussion of MOUD options including injectable buprenorphine, close coordination with linkage to community via community paramedics after release, and at four field-level site visits. Results from 7/1/2025 to 4/1/2026: 14,196 screened, 477 suboxone tapers, 169 MAT initiations or continuations, and 207 peer support contacts. Since 12/2024, 889 opioid withdrawal management cases and 220 new MAT inductions for maintenance treatment. *SCORF strategies:* MAT Distribution and other Opioid-related Treatment, Pregnant and Postpartum Women, Expansion of Warm Handoff Programs and Recovery Services, Treatment for Incarcerated Programs; and Training.

## JUST SAY SOMETHING

Since February 2024, the TA Core has supported this prevention-focused community organization, helping launch Camp Mariposa, a free year-round prevention and mentoring program for youth ages 9-17 affected by a family member's substance use, and providing grant-writing support that secured a **\$1.4 million Year 3 SCORF grant**. The work was recognized at a May 14, 2026, press conference led by Attorney General Alan Wilson. To date, Just Say Something has reached 37,000+ individuals, distributed 81,000+ lockable vials (securing nearly 4.8 million opioid pills), and delivered 11,000 prevention materials including naloxone kits; its efforts are projected to prevent 142 deaths and 27 new substance use disorders. *SCORF strategies:* Naloxone or Other U.S. Food and Drug Administration (FDA) approved Overdose Reversal Drugs; Prevention Programs.



## CITY OF CAYCE FIRE DEPARTMENT

Partnering with Hoof Beat Ranch, Cayce runs equine-assisted programs (Mini Horse Outreach and Therapeutic Equine Activities) that build coping strategies and wellness support for people facing substance use and mental health challenges, first responders, and the broader community. The TA Core contributed **16 hours** to develop an impact survey. *Reported gains:* consistent engagement and attendance, improved self-regulation and self-awareness, greater help-seeking, and progress toward reducing overdoses and mental health challenges.

## CHALLENGES, INC.

As South Carolina's first syringe services program, Challenges, Inc. delivers syringe exchange, overdose prevention and naloxone distribution, HIV and hepatitis C testing with linkage to care, and harm reduction education through mobile, low-barrier outreach. The TA Core's grant-writing support helped secure a **\$243,000 SCORF award** and an All-In grant.

# The Center's Policy Impact: Highlighted Case Studies

## EMERGENCY MEDICAL SERVICES (EMS) SCHEDULE III PATHWAY

(March 3, 2026)

South Carolina created a pathway for all EMS agencies to obtain a Schedule III license, enabling Prisma Health Ambulance Services to update its license. TA experts are now training all Prisma Health Ambulance Services staff ahead of restarting the prehospital buprenorphine program; community paramedics can already provide buprenorphine in the field, with 9-1-1-based delivery projected to resume June 15, 2026. The Center's TA Core led the policy work and presented these efforts at the 2025 SC Governor's Opioid Conference. The pathway will let thousands of people with OUD initiate buprenorphine and connect to treatment and recovery, including those who are uninsured, rural, marginally housed, or recently released from carceral settings. *SCORF strategies:* Medication-Assisted Treatment; Expansion of Warm Handoff Programs and Recovery Services; Treatment for Incarcerated Individuals; First Responders; Leadership, Planning, and Coordination; Training.

## SC TELEHEALTH & TELEMEDICINE MODERNIZATION ACT

(Act 120 of 2024)

This Center-supported law authorizes buprenorphine prescribing for OUD via telehealth without a prior in-person visit; Governor McMaster signed it on March 11, 2024. Audio-only visits are permitted, extending treatment to those without smartphones or computers. While the Center encourages in-person visits whenever possible, this innovation has expanded access to lifesaving MOUD for thousands of individuals with OUD, particularly those in rural areas, marginally housed, or lacking transportation. *SCORF strategies:* Medication-Assisted Treatment.





DATA ANALYTICS:

# Tracking Treatment for Opioid Use Disorder

The purpose of the Data Analytics (DA) Core is to leverage statewide data to inform timely, targeted, and data-driven clinical, educational, and programmatic interventions. The DA Core developed and maintains the **South Carolina Opioid Treatment Dashboard**, which tracks opioid use disorder (OUD) diagnosis, treatment initiation and engagement, and retention across the state. This tool tracks the full OUD care continuum for Medicaid and uninsured individuals in South Carolina, from first diagnosis through 180 days of treatment retention, across both medication and psychosocial treatment. These measures are not only reported at the entire state level, but also by county.

Data that feeds the dashboard includes health insurance billing records and treatment program **data for over 680,000 South Carolinians, both Medicaid enrollees and uninsured adults**. The data measures follow nationally validated standards, so South Carolina's progress can be compared to other states and tracked over time. The data shows exactly where counties stand in the pipeline from diagnosis to sustained care and where gaps exist, so that targeted, data-informed investments can be made.

These data were made available under a data use agreement to researchers at the University of South Carolina after approval from the Office of Revenue and Fiscal Affairs, the Department of Health and Human Services, and the Department of Alcohol and Other Drug Abuse Services. The DA team has analyzed data for adult Medicaid enrollees between ages 18 and 64 who received a new opioid use disorder diagnosis and for uninsured adults who received care at county drug treatment programs or hospital emergency departments. To count as a “new” diagnosis, individuals could not have had any opioid use disorder diagnosis or treatment in the two months prior to diagnosis, giving us a clean window to observe whether treatment occurred. To identify opioid use disorder, the team used a list of standardized diagnosis codes, the same codes clinicians use to document OUD in medical records. Records were drawn from all available claim types, including inpatient, outpatient, emergency department, and pharmacy claims. Codes indicating opioid overdose or accidental poisoning alone were excluded to ensure the sample reflected a true disorder diagnosis rather than a one-time exposure. Among those identified, the team examined whether individuals received treatment, what type, and how long they remained in treatment.

All of the measures reported were adapted from Healthcare Effectiveness Data and Information Set (HEDIS) measures, nationally standardized tools developed by the National Committee for Quality Assurance (NCQA) and used by health plans across the country. This means the findings can be compared across states and over time. The DA Core has **built the infrastructure to run these metrics on an annual basis, enabling consistent tracking of treatment trends over time**.

In addition to the dashboard, the DA Core has released **over 70 county- and regional-level data profiles** including 35 county- and regional-level profiles on Opioid Cascade of Care outcomes for the Medicaid population and 35 county- and regional-level profiles on Opioid Cascade of Care outcomes for the uninsured population in South Carolina. Figure 4 includes an example of the kinds of metrics included in the dashboard and on the profiles.

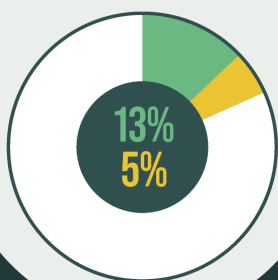


## Percent of South Carolina Uninsured Adults Who Received Opioid Use Disorder Treatment in a County Alcohol and Drug Authority or Opioid Treatment Program in Richland County in 2021



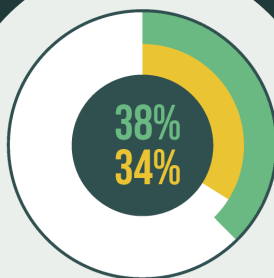
### Medication

Of uninsured adults in Richland County with opioid use disorder, **13% received buprenorphine** and **5% received methadone** in the 34 days following diagnosis.



### Counseling

Of uninsured adults in Richland County with opioid use disorder, **38% had one or more psychosocial treatment sessions** and **34% had two or more sessions** within 34 days of their initial session.



### Retention

Of uninsured adults in Richland County, **50% who initiated medication** for opioid use disorder **continued it** for 90 days and **28% of those who initiated psychosocial treatment** for opioid use disorder **continued it** for 90 days.

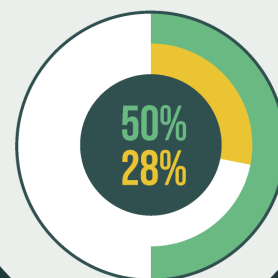


FIG. 4

Sample Graphic from the South Carolina Opioid Treatment Dashboard's County Profiles of Treatment for Uninsured Residents.

DA Core analytic findings show **more than half of South Carolinians living with an active, untreated OUD have not yet received a diagnosis**. Among those who are, treatment uptake remains low: roughly 40% of Medicaid enrollees and only 20% of uninsured adults received any medication for OUD (MOUD). Among those who did receive medication, buprenorphine was most common (around 30%) compared to methadone (around 10%). Put simply, 60% of Medicaid enrollees and 80% of uninsured individuals with OUD are going untreated with medication, which is the gold standard of treatment. In addition, fewer than a third of individuals with OUD received timely psychosocial treatment. Even among those who do initiate treatment, retention in treatment remains a challenge. For example, nearly half (around 35-55%) of those on Medication treatment are not retained for 90 days - a period of time that is clinically meaningful; even fewer (20-30%) are retained in counseling for 90 days.

Data findings vary substantially by county and region, pointing to clear geographic disparities in access to care and offering a roadmap for where targeted, data-informed investments in South Carolina's opioid response can have the greatest impact. Percentages over time (from 2021 to 2025) have generally decreased. In addition to data, the dashboard includes important information about opioid use disorder, what treatment works, what strategies can be implemented to help communities fight the opioid crisis.



By integrating Medicaid healthcare and prescription claims, county alcohol and drug authority records, opioid treatment program data, and emergency department encounters, the DA Core constructed a comprehensive, population-level view of the opioid treatment pipeline, something very few states have been able to accomplish. A 2023 review by The Pew Charitable Trusts of opioid dashboards in 46 states found that only 10 states publicly report on any of the core OUD treatment measures, and only one state reported all of them. While many states track overdose deaths, only a handful track the full Cascade of Care from diagnosis to medication and psychosocial treatment

receipt to long-term retention. South Carolina is among that small group. **The DA Core has laid the foundational groundwork for positioning the state as a national leader in data-driven opioid treatment accountability.** This work equips policymakers and local leaders with the granular, county-level evidence needed to target investments where they matter most. Thus far, the DA Core team has delivered **over 10 presentations** to key South Carolina stakeholders on the dashboard and conducted **targeted dissemination efforts (>25 direct emails)** across the state.

## National Recognition

In May 2025, The Pew Charitable Trusts spotlighted South Carolina's opioid treatment database, citing the state's Cascade of Care reporting as a national model for accessible, data-driven addiction treatment measurement.

## South Carolina Opioid Treatment Dashboard Optics

Between February 23, 2025, and February 23, 2026, the dashboard attracted 1,982 active users across 2,741 sessions, generating **4,632 total views** across the webpages (Figure 5). Currently, the DA Core is expanding the dashboard in response to Center of Excellence Advisory Board and broader stakeholder feedback. New features will include core metrics for major cities and municipalities in addition to the existing county and regional data, an extension of the data timeline from 2022 through 2025, and demographic breakdowns of key metrics by gender, race/ethnicity, and age. The expansion also introduces new resources to help stakeholders understand and act on the data, including dedicated sections guiding providers, policymakers, and researchers on how to interpret and apply the data in their respective contexts.

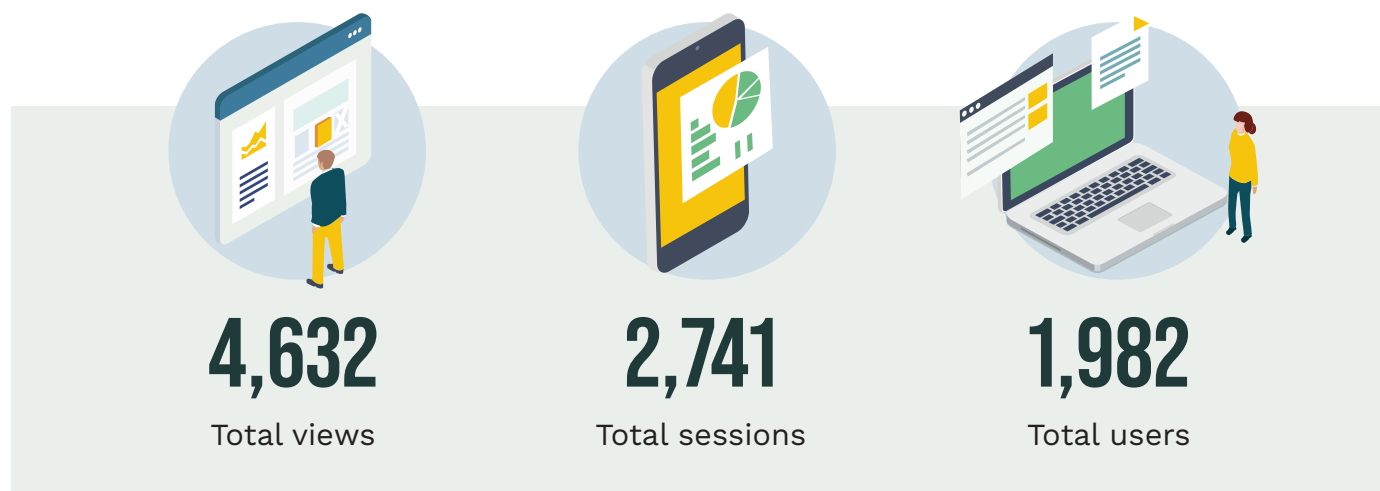


FIG. 5

Website traffic for the South Carolina Opioid Treatment Data Dashboard (February 2025 – February 2026).



TRAINING AND EDUCATION:

# Building Workforce Capacity Through Training & Tele-mentoring



The Training and Education Core has two central goals: (1) to develop and deliver a learner-driven, accessible, and actionable training curriculum focused on evidence-based opioid response strategies; and (2) to expand the reach and impact of this training curriculum among local community leaders and stakeholders to support their efforts in implementation of abatement strategies.

## Community Opioid Response Initiatives (CORI) ECHO

The CORI ECHO, founded in 2023, uses the evidence-based and cost-efficient Project ECHO model to deliver statewide education and tele-mentoring aligned with South Carolina’s opioid response priorities. The CORI ECHO develops and delivers a responsive curriculum tailored to the needs of agencies and stakeholders across the state. Since its inception, the CORI ECHO has demonstrated strong reach, engagement, and alignment with statewide opioid response priorities:

|                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CONSISTENT DELIVERY                                                                                   | 2 sessions per month                                                                                                                                                                                                                                                                                                                                                |
| SCALE AND REACH                                                                                       | <b>52 sessions</b> delivered since December 2023, engaging <b>300 unique participants</b> across <b>1,554 total attendances</b>                                                                                                                                                                                                                                     |
| ENGAGEMENT                                                                                            | Average of 30 participants per session, with 59% of participants returning for multiple sessions                                                                                                                                                                                                                                                                    |
| STATEWIDE IMPACT                                                                                      | Participants represent 33 of 46 counties (Figure 6)                                                                                                                                                                                                                                                                                                                 |
| MULTI-DISCIPLINARY HUB                                                                                | All of the ECHO hubs are multi-disciplinary and include experts across South Carolina, including physicians, psychologists, social workers, peers, RCOs, pharmacists, and 301 leadership. Expertise spans from prevention and treatment of adolescents to older adults and special populations.                                                                     |
| CROSS-SECTOR PARTICIPATION                                                                            | Participant professions include healthcare professionals (52%), law enforcement (4%), teachers (2%), and first responders (2%), along with members of the general public (40%). Program reach has expanded in 2026 through the integration of Physician Assistant students; PA student attendance at ECHO sessions has been incorporated as a training requirement. |
| NAADAC APPROVED<br>EDUCATION PROVIDER<br><small>(THE ASSOCIATION FOR ADDICTION PROFESSIONALS)</small> | Each session provides 1-hour of Continuing Education Unit (CEU) for attendees. We have provided over 15 certificates since January 2026.                                                                                                                                                                                                                            |
| PARTICIPANT SATISFACTION                                                                              | Consistently high ratings, averaging 4.5 out of 5 and above. The highest-rated item was the user-friendliness of the ECHO technology followed by the recommendation to attend ECHO sessions. Participants also rated speaker knowledge and case presentations highly (Figure 7).                                                                                    |



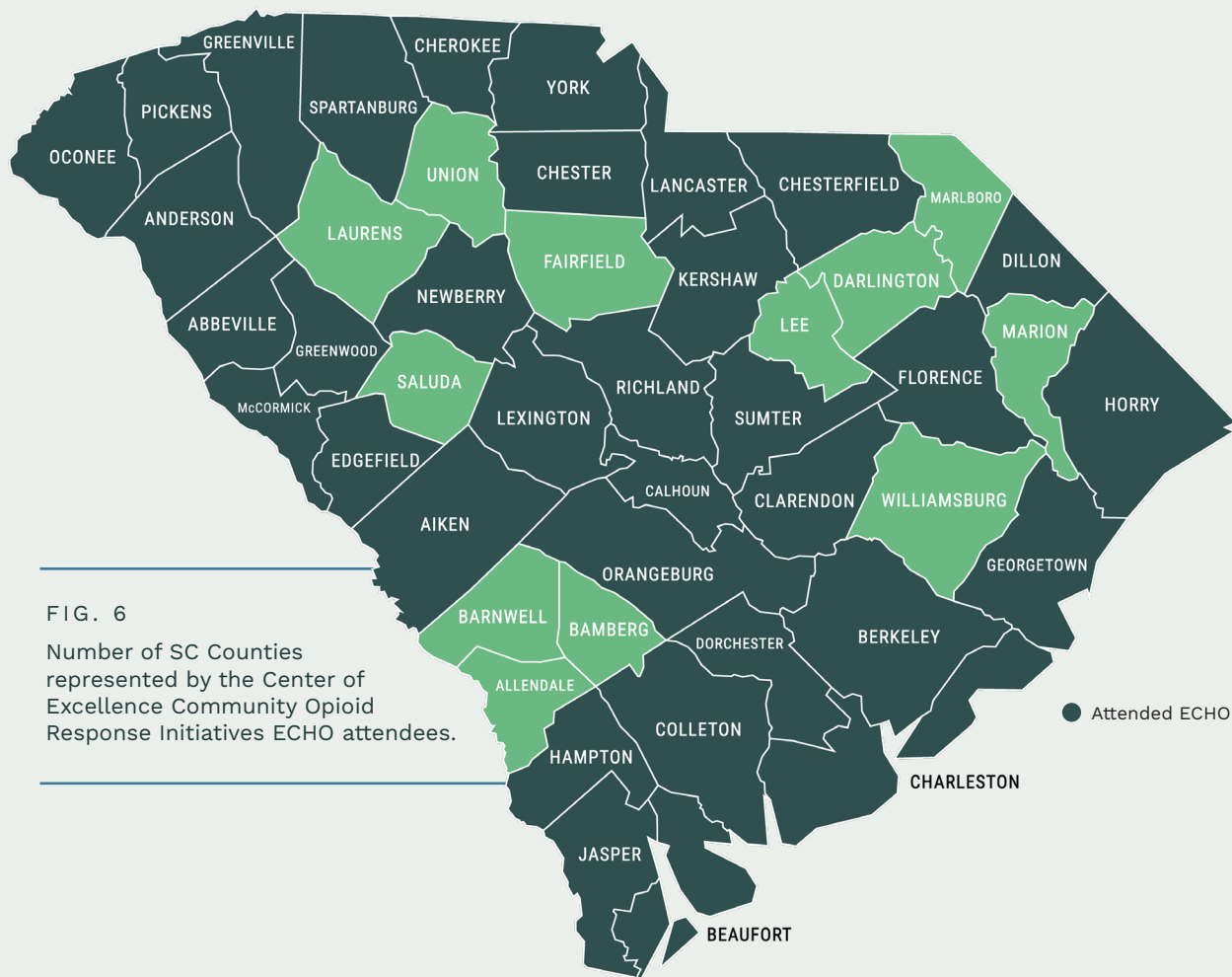


FIG. 6  
Number of SC Counties represented by the Center of Excellence Community Opioid Response Initiatives ECHO attendees.

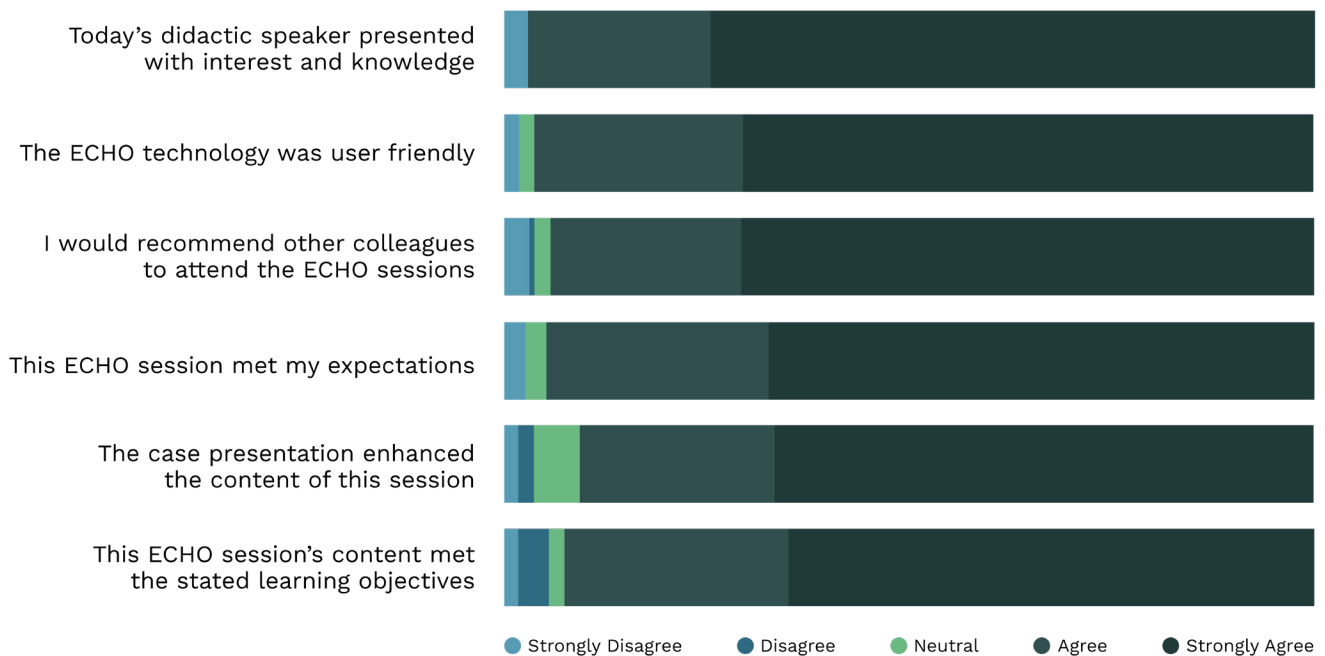


FIG. 7  
CORI ECHO participant satisfaction average scores, December 2023 - June 2026



## Project ECHO for Opioid Use Disorder

The Training and Education Core continues to support the Opioid Use Disorder (OUD) ECHO program, maintaining both monthly sessions despite reduced funding in Fall 2024 in recognition of sustained demand and demonstrated value. Between November 2024 and March 2026, more than **1,400 participants attended 35 OUD ECHO sessions.**

## Project ECHO for Peer Support Specialists

The Training and Education Core continues to support the monthly Peer Support Specialist ECHO program, sustaining access to interdisciplinary education and workforce development. Between November 2024 and March 2026, there were **795 participants who attended 23 Peer ECHO sessions.**

The Peer ECHO was awarded the **Telehealth Program of Excellence Award at the 9th Annual Telehealth Summit of South Carolina** (2021) for programming excellence. Building on the Peer ECHO's recognition, the team has continued to demonstrate leadership in telehealth education and has been invited to present at the 2026 Telehealth Summit.

## Consultations

**Individual consultations** are provided outside of regularly scheduled ECHO sessions to address emerging clinical and community needs. For example, in June 2026, Dr. Hartwell provided consultation to a local Dept. County Alcohol and Drug Authority agency regarding the assessment and management of Kratom and 7-OH dependence. Multiple additional consultation requests related to 7-OH and Kratom were received, highlighting increasing concern and the growing need for evidence-informed guidance on this emerging substance.

# Trainings

## MEDICATIONS FOR OPIOID USE DISORDER (MOUD) TRAININGS

- Reached 191 physician assistant students across two trainings (October 2025 and April 2026)
- Delivered in-person training at the SC Governor's Summit on Addiction (April 2024)
- Provided targeted virtual training for Peer Support Specialists (November 2025)
- Quarterly MOUD training for Peers in the Emergency Department (ED) throughout the state (Ongoing).
- Annual MUSC Resident training on MOUD (Ongoing).
- Several MOUD trainings will be offered in 2026-2027 for a statewide audience.

## AIKEN-BARNWELL CROSS-TRAINING INITIATIVE (2025)

The Training Core leads the development of a training curriculum to strengthen care for individuals with co-occurring substance use and mental health disorders through partnership with the county alcohol and drug authorities and mental health centers serving Aiken and Barnwell counties. This initiative aims to serve as a scalable pilot model that can be adopted and implemented by other counties in future years, supporting broader dissemination of co-occurring disorder best practices and expanding statewide impact.

## Governor's Award

In April 2024, **Dr. Kelly Barth** received a Governor's Award for championing the science of addiction medicine in South Carolina, recognizing her leadership in advancing the Training and Education Core's evidence-based curriculum and statewide impact. In November 2025, **Asa Wilson** received a Governor's Award (Recovery Advocate Category), recognizing exceptional leadership in promoting wellness, expanding addiction recovery support systems, and advancing collaborative public health frameworks like the CORI ECHO program.

### DR. KELLY BARTH

GOVERNOR'S AWARD RECIPIENT



### ASA WILSON

GOVERNOR'S AWARD RECIPIENT







GOVERNOR'S SUMMIT ON ADDICTION:

# A Statewide Commitment to Action

# The Center Convenes the SC Governor's Summit on Addiction

The Governor's Summit on Addiction stands as South Carolina's premier gathering dedicated to addressing the addiction crisis head-on. Convened by the Center of Excellence in partnership with state agencies and academic institutions, the Summit brings together a diverse network of professionals and leaders committed to meaningful change.

Behavioral health providers, healthcare professionals, law enforcement, researchers, policymakers, faith leaders, and community advocates come together under a shared mission: to strengthen South Carolina's response to substance use disorders through collaboration, innovation, and evidence-based practice.

## Bringing People and Solutions Together

Across two days, the Summit creates space for learning, connection, and action. Attendees engage in keynote sessions, breakout discussions, panel conversations, and research presentations that span the full continuum of care, including prevention, treatment, and recovery.

With continuing education opportunities available across multiple disciplines, the Summit informs and equips professionals with practical tools they can immediately apply in their communities.

## Growing Reach and Impact

The Summit continues to draw strong participation from across the state:



This sustained engagement reflects both the urgency of the addiction crisis and the value of a centralized, collaborative space to address it. Participants represent a wide range of sectors, reinforcing the Summit's role as a truly multidisciplinary forum.

# 2024 Summit Highlights

The 2024 Summit featured a robust lineup of national, state, and local experts, and included:

30

Breakout sessions

40

Exhibitors

18

Poster presentations

Breakout presentations included speakers from: **University of South Carolina, The Courage Center, SCORF Board, Prisma Health, Medical University of South Carolina, Horry County and Greenville County sheriff's offices, Charleston County Coroner's Office, RIZE Prevention**, and more.

2024 sponsors included Molina Healthcare, S.C. Department of Health and Human Services, S.C. Department of Alcohol and Other Drug Abuse Services, Crossroads, Lutheran Services Carolinas, and South Carolina Alliance for Recovery Residences.

2024 keynote and plenary speakers included:

**Governor Henry McMaster**

**Keith Humphreys**, PhD, Esther Ting Memorial Professor, Stanford University

**Jon Zibbell**, PhD, Senior Scientist, RTI International

**Richard Rawson**, PhD, Professor Emeritus, UCLA Department of Psychiatry

**William Lynch**, RPh, Clinical Pharmacist, Rowan University School of Osteopathic Medicine / High Intensity Drug Trafficking Areas / National Marijuana Initiative

Presentation topics included but were not limited to:

**The Importance of Family Recovery**

**Xylazine Identification and Treatment**

**Community-Research Partnerships – Improving Addiction Care in South Carolina and Beyond**

**Rural Resilience: Navigating Challenges, Seizing Opportunities with Mobile Healthcare Clinic Initiatives for Persons with Substance Use Disorders**

**Response of South Carolina Emergency Departments to the Opioid Epidemic**

**Harm Reduction 101**

**The Critical Role of Coroner Data in Informing Public Health Advocates and Overdose Prevention**

**Innovative Practice in South Carolina: How to Facilitate an Overdose Fatality Review (OFR) Team**

**Innovative Partnerships to Combat the Opioid Crisis: How Local Police and a Not-for-Profit are Providing Safe Spaces and Resources and Saving Lives**

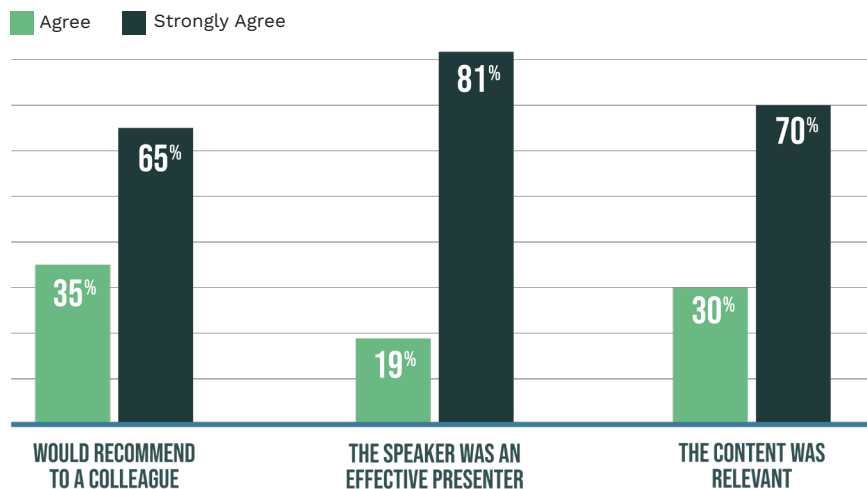
**Addressing the North American Opioid Crisis**

Attendee feedback (Figure 8) reflected a highly positive experience, with a strong majority reporting increased knowledge, confidence, and intent to apply new strategies in their work. Participants consistently highlighted the relevance of session topics and the expertise of speakers as key strengths of the event.

100%

of respondent program attendees agreed or strongly agreed that:

- ✓ they would recommend the program to a colleague
- ✓ the speaker was an effective presenter
- ✓ the content was relevant





# 2025 Summit Highlights

The 2025 Summit continued to build on this foundation, featuring nationally recognized keynote speakers from leading institutions, including the University of South Carolina, the Medical University of South Carolina, Prisma Health, and Vanderbilt University.

The program expanded opportunities for cross-sector collaboration through a wide range of sessions, poster presentations, and discussions focused on data-driven strategies, emerging trends, and innovative approaches to prevention, treatment, and recovery. The 2025 Summit included :

35

Breakout sessions

40

Exhibitors

24

Poster presentations

Breakout presentations included speakers from: **Medical University of South Carolina, University of South Carolina, Prisma Health, RIZE Prevention, S.C. Department of Public Health**, and more.

2025 sponsors included the S.C. Department of Health and Human Services, Molina Healthcare, Cordata Healthcare Innovations, Crossroads, Gilead, Narcan, FirstChoice by Select Health of South Carolina, South Carolina Alliance for Recovery Residences, Medication Assistance Pharmacy, and the Southeast Addiction Technology Transfer Center.

2025 keynote speakers included:

**Christina Andrews**, PhD, Associate Professor, Arnold School of Public Health, University of South Carolina

**Sara Goldsby**, MSW, MPH, Director, S.C. Department of Behavioral Health & Developmental Disabilities' Office of Substance Use Services

**Edward Simmer**, MD, Interim Director, S.C. Department of Public Health

**Kathleen T. Brady**, MD, PhD, Distinguished University Professor, Medical University of South Carolina

**Alain Litwin**, MD, MPH, MS, Chief Scientific Officer, Prisma Health

**Kristen Gilliland**, PhD, Research Assistant Professor – Warren Center for Neuroscience Drug Discovery at Vanderbilt University, President & Executive Director – 22 Forever, Professor Emeritus – California Polytechnic State University

Presentation topics included but were not limited to:

**Empowering Youth to Lead: The Role of Peer Advocates in Substance Use Prevention**

**Trauma, Addiction and Recovery from an Indigenous Perspective**

**The Science of Addiction: Rethinking Treatment**

**Building a Jail MOUD Program: One Doc's Story**

**The Power of Partnerships: How Behavioral Health and Law Enforcement Work Together**

**What Drugs Are "For Sale" in Your Community?**

**Addressing the Stigma of Co-Occurring Trauma and Substance Use Disorders**

**A Wellness-Oriented System of Care**

**Grassroots Recovery in Action: The RCO Model Explained**

**Family Engagement in Treatment**







COLLABORATION IN ACTION:

# Complementing and Catalyzing Efforts to Fight Addiction in SC

Establishing the SC Center of Excellence in Addiction has strengthened **collaboration** across the state, helping South Carolina **secure additional resources to fight addiction**. The Center's synergistic partnerships among the Office of Substance Use Services (OSUS), the Department of Public Health (DPH), and state universities have positioned South Carolina to secure over **\$20 million** in federal funding for opioid education and research to benefit our state. These projects **complement the Center's core efforts**, which are made possible through the **generous support of the South Carolina Opioid Settlement Fund Board**.

## The Comprehensive Opioid, Stimulant, and Substance Use Program (COSSUP): Law Enforcement Assisted Deflection in SC

### \$7 MILLION

One example is the Center's successful pursuit of COSSUP funding (Comprehensive Opioid, Stimulant, and Substance Use Program), awarded by the US Department of Justice-Bureau of Justice Assistance for three years and \$7 million (2023-2026), with OSUS as principal investigator in partnership with Clemson University. The grant supports law enforcement assisted deflection programs at six sites including:

**Chester County Sheriff's Office**  
**Myrtle Beach Police Department**  
**Oconee County Sheriff's Office**

**Richland County Sheriff's Department**  
**W. Columbia Police Department**

The Center has leveraged its resources to extend technical assistance and implementation to eight additional non-COSSUP sites (14 sites total), building strong regional buy-in as implementation continues.

As the designated TA provider for each law enforcement agency, Clemson's Center for Addiction and Mental Health Research (CAMHR) provides:

- **Individual support** through monthly office hours and by request.
- **A monthly Learning Collaborative** that facilitates statewide, peer-led discussion of strategies, best practices, and local resources for deflection programming.
- **Online training**, including monthly webinars on focused topics (harm reduction, models of care, youth deflection, MOUD, etc.) and reviews of model deflection programs nationally.
- **In-person training**, including professional development workshops and interactive sessions for any member of an agency's deflection staff.
- **An annual statewide justice summit, hosted with OSUS and the Center**, convening partner organizations and expert speakers for development, networking, education, and support.
- **An online deflection resource library**, managed by CAMHR, with the latest tools, best practices, research, regional templates, and other resources for SC deflection sites.

Although the COSSUP grant ends in September 2026, SCORF support for the Center will enable the team to institutionalize and sustain these efforts, expanding the reach of deflection and justice-involved opioid abatement strategies statewide.



## South Carolina EmPATH (Emergency Psychiatric Assessment, Treatment, and Healing) Initiative

**\$5.4 MILLION**

South Carolina's EmPATH (Emergency Psychiatric Assessment, Treatment, and Healing) initiative is a statewide investment to expand hospital-based behavioral health crisis stabilization services by establishing specialized EmPATH units that provide rapid psychiatric assessment, treatment, and connection to ongoing care in a therapeutic environment. Through a \$35 million grant program administered by the South Carolina Department of Health and Human Services (SCDHHS), 13 hospitals received funding to develop EmPATH or EmPATH-like units, with the goal of reducing emergency department boarding, improving patient outcomes, and strengthening access to behavioral health services across the state.

Building on this initiative, MUSC received a six-year grant (NIDA R61/R33) to develop and deliver targeted training for EmPATH unit staff on the identification and treatment of opioid use disorder (OUD), with a particular emphasis on the initiation and management of medications for opioid use disorder (MOUD). The project supports implementation across EmPATH units statewide by equipping interdisciplinary clinical teams with evidence-based protocols and ongoing education to improve access to OUD treatment for patients presenting in psychiatric crisis settings.

Through established statewide partnerships with OSUS, SC Hospital Association (SCHA) and SC Department of Mental Health (SCDMH), expertise in evidence-based education, and demonstrated capacity to deliver high-quality workforce training, the Center provided the infrastructure necessary to secure this funding and expand behavioral health training across South Carolina.

## Investigating and Addressing Modifiable Factors in the HIV Care Continuum for People with HIV (PWH) Affected by Substance Use and Mental Health

**\$3.5 MILLION**

As part of the center's efforts to innovatively address opioid use disorder and other substance use disorders, Dr. Bankole Olatosi and Dr. Alain Litwin were awarded a five-year grant by the National Institute on Drug Abuse, *Investigating and Addressing Modifiable Factors in the HIV Care Continuum for People with HIV (PWH) Affected by Substance Use and Mental Health*. The project examines how co-occurring substance use and mental health conditions affect whether people with HIV stay in care and reach viral suppression. It draws on multiple linked real-world datasets, including HIV surveillance, electronic health records, mental health and substance use treatment records, and corrections and claims data, to trace disparities in treatment and outcomes over time, and pairs that analysis with focus groups and interviews to surface the factors most amenable to intervention. Together with the Center's opioid treatment work, these efforts extend a population-level, data-informed approach to the closely related HIV and substance use syndemic in South Carolina.

## SEEDS (SEx differences EDucation in Substance Use Disorders)

**\$1.7 MILLION**

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Building on the expertise of the Training Core, Dr. Karen Hartwell was awarded a five-year grant, **SE**x Differences **ED**ucation in Substance Use Disorders (SEEDS) to provide mentored clinical research education, training, and career development activities to encourage and support junior scholars to study the intersection of sex and addiction. The overarching goal of SEEDS is to increase the pool of investigators incorporating substance use and sex-related outcomes in their research. Training a capable cadre of scientists to address these issues is critical to improve health of women and men nationwide.

## Harnessing Predictive Modeling to Identify Current and Emerging Hotspots Within the HIV/SUD Syndemic

**\$3.6 MILLION**

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Center team members, Dr. Jiajia Zhang and Dr. Christina Andrews, were awarded a five-year grant by the National Institute on Drug Abuse, *Harnessing Predictive Modeling to Identify Current and Emerging Hotspots within the HIV/SUD Syndemic*. The project addresses the intersection of HIV and substance use, a syndemic in which substance use disorder is more than six times as common among people with HIV as in the general population and a recognized barrier to the national goal of ending the HIV epidemic by 2030. The project integrates South Carolina's statewide cohort of people with HIV with the Agency for Healthcare Research and Quality's social determinants of health database, using Big Data methods to model how HIV and substance use co-occur at the county level, identify the modifiable community conditions that drive those patterns, and build predictive tools that flag current and emerging hotspots so that resources can be directed proactively. The work is designed to produce a scalable predictive tool that can strengthen HIV and substance use prevention and management in South Carolina and nationwide.

# Community and Stakeholder Presentations

1. Hudson, P., Papa, C., & Hartwell, K. (2026, Aug 31-Sept 2). *South Carolina Telehealth Supports Substance- and Opioid-Related Project ECHOs* [Poster abstract]. 14th Annual Telehealth Summit of South Carolina, Greenville, SC. (Travel not supported by the Center)
2. Hartwell, K., Papa, C., & Brady, K. (2026, June 13-17). *Community Voices, ECHOed Solutions: Navigating the Opioid Settlement* [Poster abstract]. College on Problems of Drug Dependence, Portland, OR. (Travel not supported by the Center)
3. Zinzow, H. (2026, May 26). *Trauma-Informed Care Training for Peer Support Specialists* [Virtual Presentation]. Medical University of South Carolina ECHO.
4. McClam, M., Manz, J., Andrews, C. M. (2026, March 16-18) *Data to Action: Using the South Carolina Opioid Treatment Dashboard to Drive Policy and Program Decisions* [Presentation]. South Carolina Public Health Association. Columbia, SC.
5. Clark, P. (2026, March 10). *Phillipsburg, NJ Deflection Spotlight* [Invited presentation]. CAMHR LEAD Deflection Spotlight Series.
6. Stevens, M., Litwin, A. (2025, November 14). *The Science of Addiction: Rethinking Treatment* [Invited presentation]. SC Governor's Summit on Addiction, Columbia, SC.
7. Duncan, A., Gainey, S., Lane, S., Jennings, L., Rafferty, A., Hudson, P., Moreland, A., Hartwell, K., Haynes, L., & Brady, K. (2025, November 13-14). *Utilizing telehealth to expand access to medications for opioid use disorders (MOUD) in a rural emergency department* [Poster abstract]. SC Governor's Summit on Addiction, Columbia, SC.
8. Gainey, S., Jennings, L., Lane, S., Rafferty, A., Duncan, A., Hudson, P., Hartwell, K., & Brady, K. (2025, November 13-14). *Motivational interviewing skills and satisfaction of peer support specialists providing services to patients with opioid use disorders in emergency departments in South Carolina* [Poster abstract]. SC Governor's Summit on Addiction, Columbia, SC.
9. Hartwell, K. (2025, November 13-14). *Co-occurring disorders in criminal justice* [Poster abstract]. SC Governor's Summit on Addiction, Columbia, SC.
10. Hartwell, K. (2025, November 13-14). *Project ECHO for Community Response Initiatives (CORI ECHO): Strengthening community capacity to address the opioid crisis in South Carolina* [Poster abstract]. SC Governor's Summit on Addiction, Columbia, SC.
11. Manz, J., Andrews, C. M., Brady, K., & Litwin, A. (2025, November 13). *How can we help you? A user's guide to Center of Excellence in Addiction Services* [Panel presentation]. SC Governor's Summit on Addiction, Columbia, SC.
12. Gormely, M. (2025, November 7). *Outcome vs. Process Metrics*. SCORF Coffee Chat.
13. Jennings, L., Smith, A., & Hartwell, K. (2025, November 13-14). *Addiction treatment update: A bitesize review of advances in the field* [Breakout session]. SC Governor's Summit on Addiction, Columbia, SC.
14. Lane, S., Jennings, L., Gainey, S., Rafferty, A., Duncan, A., Hartwell, K., & Brady, K. (2025, November 13-14). *Do community level social determinants of health influence an individual's overdose risk?* [Poster abstract]. SC Governor's Summit on Addiction, Columbia, SC.
15. Manz, J., Andrews, C. M., Brady, K., & Litwin, A. (2025, November 13-14). *Fewer overdose deaths: What's worked and what's ahead* [Panel presentation]. SC Governor's Summit on Addiction, Columbia, SC.
16. Rafferty, A., Lane, S., Jennings, L., Gainey, S., Duncan, A., Hartwell, K., & Brady, K. (2025, November 13-14). *ED initiated buprenorphine: An effective entry point into long term OUD treatment*. [Poster abstract]. SC Governor's Summit on Addiction, Columbia, SC.
17. Hartwell, K. (2025, October). *Bridging knowledge gaps in opioid abatement: Community opioid response initiatives Project ECHO's role in community-led change* [Poster abstract]. 36th Annual Meeting and Scientific Symposium of the American Academy of Addiction Psychiatry, San Francisco, CA. (Travel not supported by the Center)
18. McDonald, A., Beyler, A., Van Doren, E. (2025, October 14). *Longmont, CO Deflection Spotlight* [Invited presentation]. CAMHR LEAD Deflection Spotlight Series.
19. Buettner, D., Heinzl, R. (2025, October 14). *Marathon County, WI Deflection Spotlight* [Invited presentation]. CAMHR LEAD Deflection Spotlight Series.
20. Frazier, A. (2025, June 5, 21). *Naloxone Administration Training*. [Invited Presentation]. South Carolina Indian Affairs Commission.
21. Andrews, C. M., Brady, K., Goldsby, S., Litwin, A., Simmer, E., & Manz, J. (2025, April 30 – May 1). *South Carolina Center of Excellence in Addiction: Projects and outcomes* [Invited presentation]. SC Governor's Summit on Addiction, Columbia, SC.
22. Stevens, M. (2025, March 18-20). *The Science of Addiction* [Invited training]. Chester County, SC.
23. Shukla, S. (2025, March 7). *Adolescent Substance-Use Disorders* [Virtual presentation]. South Carolina Department of Mental Health.
24. Wilder, P. (2025, March 25, April 2). *"Best Practices for Community Action Planning: An Introduction to Non-Violent Communication"* [Virtual presentation]. South Carolina Center of Excellence in Addiction.
25. Andrews, C. M., & McClam, M. (2025, January). *Tracking access to treatment using the South Carolina Opioid Treatment Dashboard* [Invited presentation]. Medical University of South Carolina's Project ECHO.
26. Andrews, C. M. (2024, December). *Diagnosis, initiation, and engagement in treatment in South Carolina's Medicaid program* [Invited presentation]. South Carolina Opioid Emergency Response Team meeting.
27. Hartwell, K. J., Rafferty, A., Hudson, B., Lane, S. L., Smith, A. J., & Barth, K. S. (2024, November 14-17). *Clinical challenges in opioid use disorder care: A Project ECHO case series* [Conference presentation]. 35th Annual Meeting and Scientific Symposium of the American Academy of Addiction Psychiatry, Naples, FL. (Travel not supported by the Center)
28. Hartwell, K. (2024, September). *MUSC's substance-related Project ECHOs: Opioid use disorders, peer recovery support specialists, community response initiatives* [Invited presentation]. CDC Foundation: Prevention & Learning Community.
29. Andrews, C. M. (2024, June). *Diagnosis, initiation, and engagement in treatment in South Carolina's Medicaid program* [Invited presentation]. Medical University of South Carolina's Project ECHO.
30. Andrews, C. M., Brady, K., Goldsby, S., Litwin, A., Simmer, E., & Manz, J. (2024, April 30 – May 1). *South Carolina Center of Excellence in Addiction: Projects and outcomes* [Invited presentation]. South Carolina Governor's Opioid and Addiction Summit, Columbia, SC.
31. Andrews, C. M., & Bogardus, L. (2024, March). *How to access and use opioid data sources for local planning* [Invited presentation]. South Carolina Center of Excellence in Addiction webinar series.
32. Lane, S., Gainey, S., Jennings, L., Moreland, A., Duncan, A., Hewitt, K., Hayes, J., Rivers, D., Riner, T., Hartwell, K., Haynes, A., & Brady, K. (2023, November 7-9). *Utilizing telehealth to expand access to medications for opioid use disorders (MOUD) in a rural emergency department* [Conference presentation]. SEARCH Telehealth Research Symposium, Philadelphia, PA. (Travel not supported by the Center)
33. Gainey, S., Lane, S., Piacentine, S., & Hartwell, K. (2023, October). *Use of motivational interviewing skills and job satisfaction of peer support specialists in providing services to patients with opioid use disorder in emergency departments in South Carolina* [Invited presentation]. Motivational Interviewing Network of Trainers Forum.
34. Grater, R. G., Malone, M. F., Linder, L. M., Lane, S. M., Barth, K. M., & Hartwell, K. J. (2023, September 18-21). *Project ECHO advances evidence-based substance use care in rural and underserved areas* [Conference presentation]. MetaECHO 2023 Global Conference, Albuquerque, NM. (Travel not supported by the Center)
35. Hartwell, K., & Grater, R. (2023, September 18-21). *Project ECHO for opioid use disorders promotes interdisciplinary learning and collaborative care* [Conference presentation]. MetaECHO 2023 Global Conference, Albuquerque, NM. (Travel not supported by the Center)



# News Mentions

- Adcox, S. (2022, December 28). *SC agencies, universities to combat alcohol and drug addiction through partnership*. The Post and Courier. [https://www.postandcourier.com/politics/sc-agencies-universities-to-combat-alcohol-and-drug-addiction-through-partnership/article\\_476a0c48-8616-11ed-826d-8b02b459f6ad.html](https://www.postandcourier.com/politics/sc-agencies-universities-to-combat-alcohol-and-drug-addiction-through-partnership/article_476a0c48-8616-11ed-826d-8b02b459f6ad.html)
- Associated Press. (2023, December 30). *SC universities, state agencies combine to fight addiction*. The State. <https://www.thestate.com/news/politics-government/article270583077.html>
- Bayer, C. (2024, April 30). *South Carolina opioid and addiction summit gets underway*. WLTX News19. <https://www.wltx.com/article/news/local/governors-oid-oid-and-addiction-summit-south-carolina/101-e9198611-b351-4d3b-9bcb-1542acf9d37f>
- Blair, M. (2022, December 29). *New partnership to address addiction crisis in South Carolina*. WCSC. <https://www.live5news.com/2022/12/29/new-partnership-address-addiction-crisis-south-carolina/>
- Bluvas, E. (2026, June 26). *Experts across the state use collaborative model to continue expanding impact of SC Center for Excellence in Addiction*. Arnold School of Public Health News. [https://sc.edu/study/colleges\\_schools/public\\_health/about/news/2026/addiction\\_center\\_update.php](https://sc.edu/study/colleges_schools/public_health/about/news/2026/addiction_center_update.php)
- Business briefs. (2024, March 14). The Columbia Star. <https://www.thecolumbiastar.com/articles/business-briefs-122/>
- Davis, A. (2022, December 31). *State, universities combine efforts to battle addiction*. WSAV. <https://www.wsav.com/news/local-news/south-carolina-news/state-universities-combine-efforts-to-battle-addiction/>
- Duncan, A., Izquierdo, B., & McGaffey, F. (2025, May 7). *South Carolina database makes addiction treatment measurement accessible*. The Pew Charitable Trusts. <https://www.pew.org/en/research-and-analysis/articles/2025/05/07/south-carolina-database-makes-addiction-treatment-measurement-accessible>
- Gonyo, M. (2025, November 13). *Governor's summit on addiction tackles opioid crisis in South Carolina*. WACH Fox 57. <https://wach.com/news/local/governors-summit-on-addiction-tackles-oid-oid-crisis-in-south-carolina>
- Holdman, J. (2025, November 18). *SC anti-addiction partnership aids cities, counties in treating victims of the opioid crisis*. South Carolina Daily Gazette. <https://scdailygazette.com/2025/11/18/sc-anti-addiction-partnership-aids-cities-counties-in-treating-victims-of-the-oid-oid-crisis/>
- MUSC Progress Notes (2024, June 3). *MUSC part of Center of Excellence in Addiction with statewide team* <https://muschealth.org/health-professionals/progressnotes/2024/spring/coe-addiction>
- MUSC Catalyst News (2024, August 26). *Helping communities make the most of opioid settlement funds* <https://web.musc.edu/about/news-center/2024/08/26/helping-communities-make-the-most-of-oid-oid-settlement-funds>
- Office of the Governor Henry Dargan McMaster. (2022, December 29). *DAODAS director Sara Goldsby, Gov. Henry McMaster announce S.C. Center of Excellence in Addiction*. <https://governor.sc.gov/news/2022-12/daodas-director-sara-goldsby-gov-henry-mcmaster-announce-sc-center-excellence>
- Post and Courier Editorial Staff. (2023, January 3). *Editorial: SC inter-agency cooperation should be the rule, not the exception*. The Post and Courier. [https://www.postandcourier.com/opinion/editorials/editorial-sc-inter-agency-cooperation-should-be-the-rule-not-the-exception/article\\_247cb4cc-8b90-11ed-8b63-97cce85788ed.html](https://www.postandcourier.com/opinion/editorials/editorial-sc-inter-agency-cooperation-should-be-the-rule-not-the-exception/article_247cb4cc-8b90-11ed-8b63-97cce85788ed.html)
- Raven, J. (2022, December 30). *SC establishes new partnership with universities & state agencies to tackle substance use disorder*. WSPA. <https://www.wspa.com/news/state-news/sc-establishes-new-partnership-with-universities-state-agencies-to-tackle-substance-use-disorder/>
- Tejada, A. (2024, April 30). *SC governor's summit discusses strategies to face opioid crisis*. ABC Columbia. <https://www.abccolumbia.com/2024/04/30/sc-governors-summit-discusses-strategies-to-face-oid-oid-crisis/>
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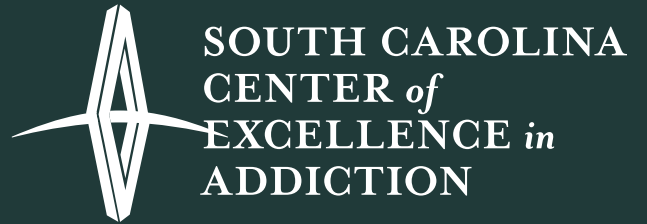
# Report Acronyms

|               |                                                                      |
|---------------|----------------------------------------------------------------------|
| <b>7-OH</b>   | 7-hydroxymitragynine (kratom-derived compound)                       |
| <b>CAMHR</b>  | Center for Addiction and Mental Health Research (Clemson University) |
| <b>CDC</b>    | Centers for Disease Control and Prevention                           |
| <b>CORI</b>   | Community Opioid Response Initiatives                                |
| <b>COSSUP</b> | Comprehensive Opioid, Stimulant, and Substance Use Program           |
| <b>DA</b>     | Data Analytics (Core)                                                |
| <b>ECHO</b>   | Extension for Community Healthcare Outcomes (Project ECHO model)     |
| <b>EmPATH</b> | Emergency Psychiatric Assessment, Treatment, and Healing             |
| <b>HIV</b>    | Human Immunodeficiency Virus                                         |
| <b>LEAD</b>   | Law Enforcement Assisted Deflection                                  |
| <b>MAT</b>    | Medication-Assisted Treatment                                        |
| <b>MOUD</b>   | Medications for Opioid Use Disorder                                  |
| <b>NIDA</b>   | National Institute on Drug Abuse                                     |
| <b>OSUS</b>   | Office of Substance Use Services                                     |
| <b>OUD</b>    | Opioid Use Disorder                                                  |
| <b>RCO</b>    | Recovery Community Organization                                      |
| <b>SCORF</b>  | South Carolina Opioid Recovery Fund                                  |
| <b>SUD</b>    | Substance Use Disorder                                               |
| <b>TA</b>     | Technical Assistance (Core)                                          |



The South Carolina Opioid Recovery Fund Board ("SCORF Board") was created by the South Carolina Opioid Recovery Act, SC Code §11-58-10 et seq., to administer and disburse the South Carolina Opioid Recovery Fund in accordance with the terms of In re South Carolina Opioid Litigation settlement agreements. Money from the South Carolina Opioid Recovery Fund will be distributed by the SCORF Board to help address and remediate the impact of the opioid epidemic in South Carolina.

Since its inception in 2023, the South Carolina Center of Excellence in Addiction has been supported through discretionary sub-funding from the South Carolina Opioid Recovery Fund (SCORF) Board. These awards allow the Center to deliver opioid settlement support, data analytics, technical assistance, and training to counties, municipalities, and providers implementing opioid abatement initiatives across the state. The Center continually works to maximize the impact of the Board's continued investment.



## State Impact Report

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