**Trump More Than Doubled Funding for the Opioid Crisis. How's It Being Spent?**

The funding influx is saving lives, but a new report says the federal government needs to stop "treating addiction as if it’s an acute condition instead of a chronic one."

<https://www.governing.com/topics/health-human-services/gov-federal-funding-trump-opioid-crisis-epidemic.html>

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*(AP/Patrick Semansky)*

Federal funding to combat the opioid crisis more than doubled last year, marking an important commitment to prevention, treatment and recovery. A new report looks at whether and how that extra $4 billion is being effectively spent.

In 2017, more than 70,000 people in the United States died from a drug overdose; almost 50,000 of those deaths involved an opioid. In 2018, the Trump administration increased opioid funding to states to more than $7 billion, from a little more than $3 billion in 2017.

The [report from the Bipartisan Policy Center](https://bipartisanpolicy.org/library/tracking-federal-funding-to-combat-the-opioid-crisis/?_cldee=bGZhcm1lckBnb3Zlcm5pbmcuY29t&recipientid=contact-a6babf994984e311b6e400155d47bf00-24d1120e355b4ecdb94199ddf4e2ef73&utm_source=ClickDimensions&utm_medium=email&utm_campaign=Press%20Update%20%7C%20Health%20Project&esid=401b1aae-384f-e911-a978-000d3a18c732) concluded that while funding is being directed to the communities with the highest overdose death rates, the funding approach lacks long-term vision.

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“Providing one-time funding is treating addiction as if it’s an acute condition instead of a chronic one,” says BPC’s chief medical adviser, Anand Parekh.

It typically takes eight years for people struggling with addiction to achieve one year of recovery. That statistic is a big reason why addiction policy experts believe that the end of the epidemic is nowhere in sight.

But in some places, the funding influx may already be saving lives.

In Ohio, one of the states with the highest overdose death rates, officials say fatal overdoses appeared to slightly drop last year. Liz Henrich, CEO of the Ohio Association of County Behavioral Health Authorities, says the increase in federal investment has also helped change the addiction conversation.

“We’re not talking quite as much about the shame and stigma of addiction,” she said Tuesday at an event releasing the BPC report. “It still exists, don’t get me wrong. But all of a sudden there’s more focus on getting folks access to the care they need.”

To improve the long-term plan for combating the drug crisis, BPC's Parekh says better coordination of federal grant programs is key. The BPC found that federal grants related to the opioid crisis are spread across 57 different programs. The diversity of funding -- and sheer volume -- makes it more difficult for state agencies to avoid redundancies and to make sure the money is flowing everywhere it needs to go. This is especially important as states build out treatment networks that include a wide array of stakeholders, such as schools, hospitals and the criminal justice system.

On the plus side, the report noted, those 57 programs reflect a multifaceted response to the epidemic, funding not just addiction care but research, criminal justice reforms, [public health surveillance](https://www.cdc.gov/surveillance/improving-surveillance/Public-health-surveillance.html) and supply reduction efforts.

At the state level, the BPC found that a statewide coordinating body, typically convened by the governor, is an essential part of developing a strategic opioid epidemic response.

It also noted that Medicaid expansion “has been essential” to providing services to people who struggle with opioid addiction and would otherwise be uninsured and unable to afford treatment. Looking at the [opioid treatment medication buprenorphine](https://bipartisanpolicy.org/wp-content/uploads/2019/03/Tracking-Federal-Funding-to-Combat-the-Opioid-Crisis.pdf), the report found that Medicaid coverage accounted for just 3 percent of buprenorphine prescriptions in Tennessee (a nonexpansion state) in 2017. By comparison, 93 percent of buprenorphine prescriptions in Ohio were covered by Medicaid.