



South Carolina
Institute of Medicine & Public Health
HEALTH POLICY FELLOWS
Program

Pathways to Address Opioid Overdose

Exploring State Policy and Regional Solutions



What is IMPH?

Our Mission



www.imph.org



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[@South Carolina Institute of Medicine and Public Health](https://www.linkedin.com/company/@South Carolina Institute of Medicine and Public Health)

Our mission is to collectively inform policy to improve health and health care.

We serve as an independent, nonprofit organization working to collectively inform policy to improve health and health care in South Carolina. IMPH provides nonpartisan, evidence-based information to guide policymakers in making impactful health policy decisions.

We strive to be the leading and trusted nonpartisan resource for evidence-based health policy information on South Carolina's most critical population health issues.



IMPH Upstate Regional Health Policy Fellows Meeting

Jodi Manz, MSW

South Carolina Center of Excellence in Addiction

10.29.25



Agenda

- 1) SC Center of Excellence in Addiction
- 2) Evidence-Based Interventions for Opioid Use Disorder
- 3) Drug Data Trends
- 4) Emerging Drug Trends
- 5) Policy Landscape
- 6) Opportunities in the Upstate
- 7) Questions

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**.

South Carolina Stakeholders

Counties

Municipalities

Advisory Board

Provider Organizations

People with Lived Experience

Law Enforcement

Policy Leaders

Payers

Core Organizations

Clemson

MUSC

USC

DBHDD

DPH

SC Center of Excellence in Addiction Composition

Functions of the Center of Excellence



OPIOID SETTLEMENT
SUPPORT



PROVIDER CAPACITY
BUILDING



INNOVATION
DEVELOPMENT

1) Opioid Settlement Support

Data analytics on treatment system capacity so that county and municipal leaders working on opioid abatement projects are equipped with information to make decisions for their communities.

Technical assistance for county and municipal leaders and their partners so that they can more deeply understand how to implement approved abatement strategies.

Training for county and municipal leaders on what implementation of those strategies can look like in their communities.



2) Provider Capacity Building

Delivering targeted trainings for clinicians and staff on things like the science of addiction, prescribing medications for substance use disorder, and other evidence-based addiction-related needs.

A dedicated Clinician Warmline that South Carolina providers can call any time between 9 am - 5 pm, Monday through Friday, for free, confidential, peer-to-peer consults on any addiction-related clinical question.

Maintaining a curated set of resources for providers to access evidence-based, clinical information.



3) Innovation Development

Jail-based treatment to support our local jail administrators and sheriffs in managing opioid use disorder among our locally incarcerated populations.

Diversion and deflection programs to help local public safety systems enhance their strategies to keep individuals out of incarceration settings and able to access community-based services.

Emergency Department-based treatment to build out South Carolina hospital capacity to begin treatment for opioid use disorder in emergency departments and effectively transition care to community providers

Behavioral Health System support to help South Carolina develop an integrated behavioral health payment approach



Evidence-Based Interventions for Opioid Use Disorder

What is Opioid Use Disorder, and how do we treat it?



What is Substance Use Disorder?



The Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5): “a cluster of cognitive, behavioral, and physiological symptoms indicating that the individual continues using the substance despite significant substance-related problems.”

“underlying change in brain circuits that may persist beyond detoxification, particularly in individuals with severe disorders...these brain changes may be exhibited in the repeated relapses and intense drug craving ...These persistent drug effects may benefit from long term approaches to treatment.”



ASAM: “Addiction is a treatable, chronic medical disease involving complex interactions among brain circuits, genetics, the environment, and an individual’s life experiences. People with addiction use substances or engage in behaviors that become compulsive and often continue despite harmful consequences. Prevention efforts and treatment approaches for addiction are generally as successful as those for other chronic diseases.”



Opioid Use Disorder (OUD) is specific to the chronic use of opioids, both licit and illicitly manufactured, in this context.

Evidence-Based Treatment

- **FDA-approved medications for OUD:**
 - Methadone (agonist)
 - Buprenorphine (partial agonist)
 - Naltrexone (antagonist)
- **SAMHSA [TIP 63](#) (2021 Update):**
 - “Patients can take medication for OUD on a short-term or long-term basis. However, patients who discontinue OUD medication generally return to illicit opioid use.”
 - Counseling: “counseling and ancillary services should target patients’ needs and shouldn’t be arbitrarily required as a condition for receiving OUD medication (although they are required by regulations in OTPs), especially when the benefits of medication outweigh the risks of not receiving counseling.”
- **Peer support services:** ancillary services, often related to service navigation and community engagement, delivered by certified individuals with lived experience who are in recovery

Overdose Prevention and Intervention

Naloxone – reverses overdose-induced respiratory depression

Overdose prevention services

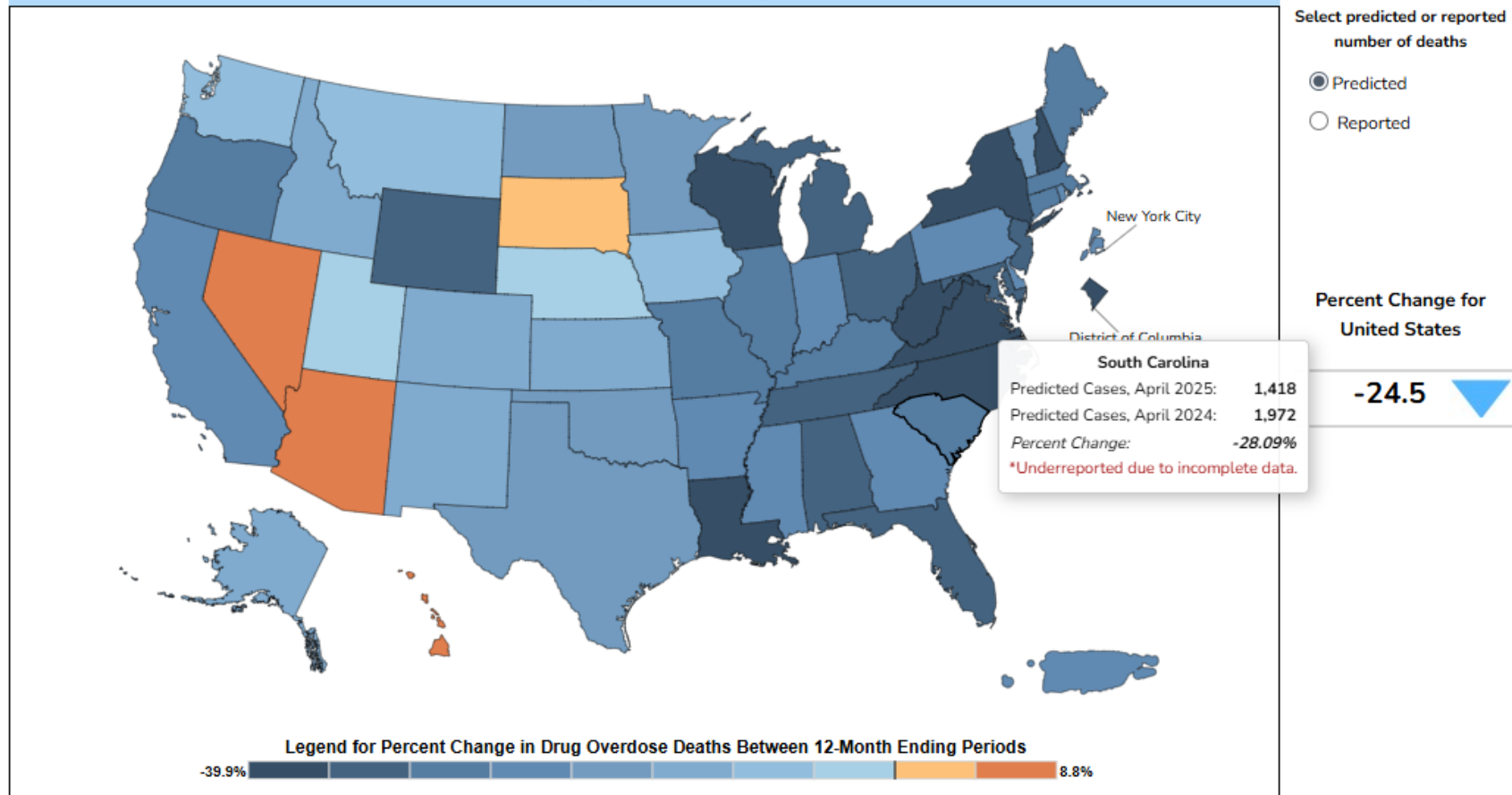
- HIV/HCV testing and connections to treatment
- Wrap around services connections
- Wound care/wound supplies
- Drug checking supplies
- Can include safe use supplies

Drug Data Trends

What is the data telling us?

National Overdose Fatality Data

Figure 1b. Percent Change in Predicted 12 Month-ending Count of Drug Overdose Deaths, by Jurisdiction: April 2024 to April 2025



Source: CDC National Vital Statistics System; Provisional Drug Overdose Death Counts.
<https://www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm>

Implications of Reduction



Reduced to pre-pandemic levels



Successful interdiction



Successful interventions



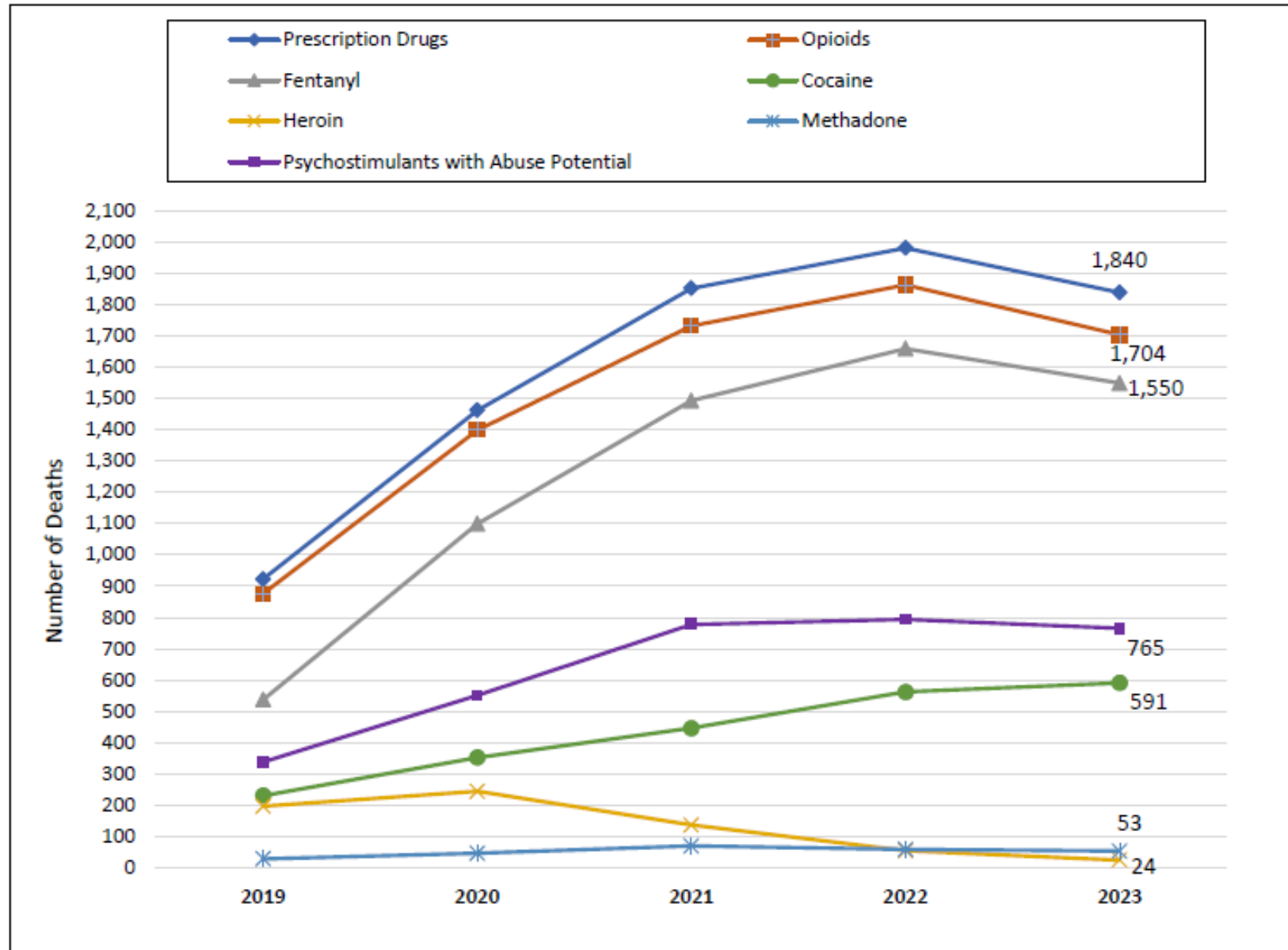
Shifts in supply and usage



DON'T TAKE YOUR FOOT OFF THE GAS!

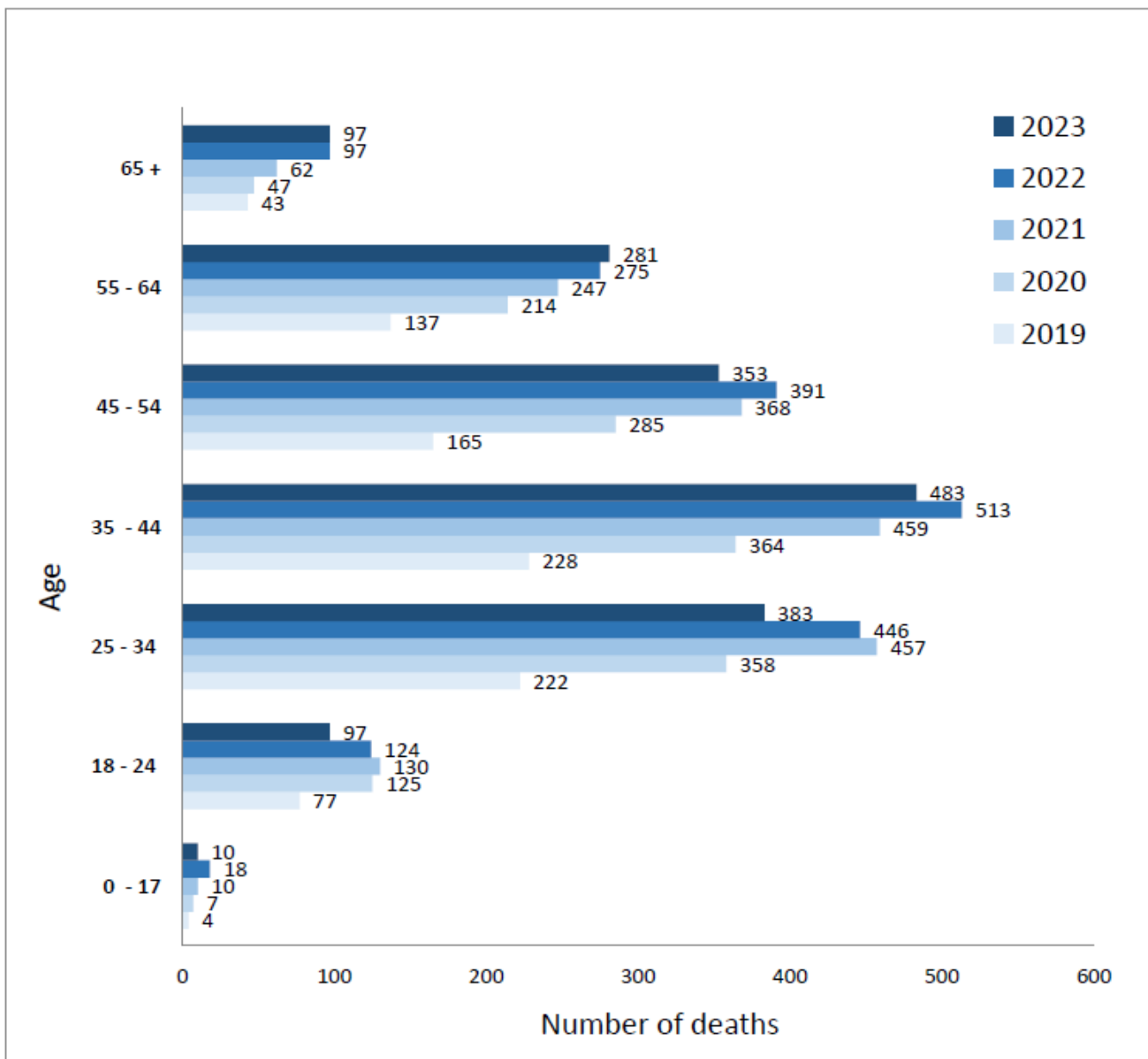
Source: DPH Drug Overdose Deaths, SC 2023.
<https://dph.sc.gov/sites/scdph/files/2025-03/Drug-Overdose-Report-2023.pdf>

SC Overdose Fatality by Drug Category, 2019-2023



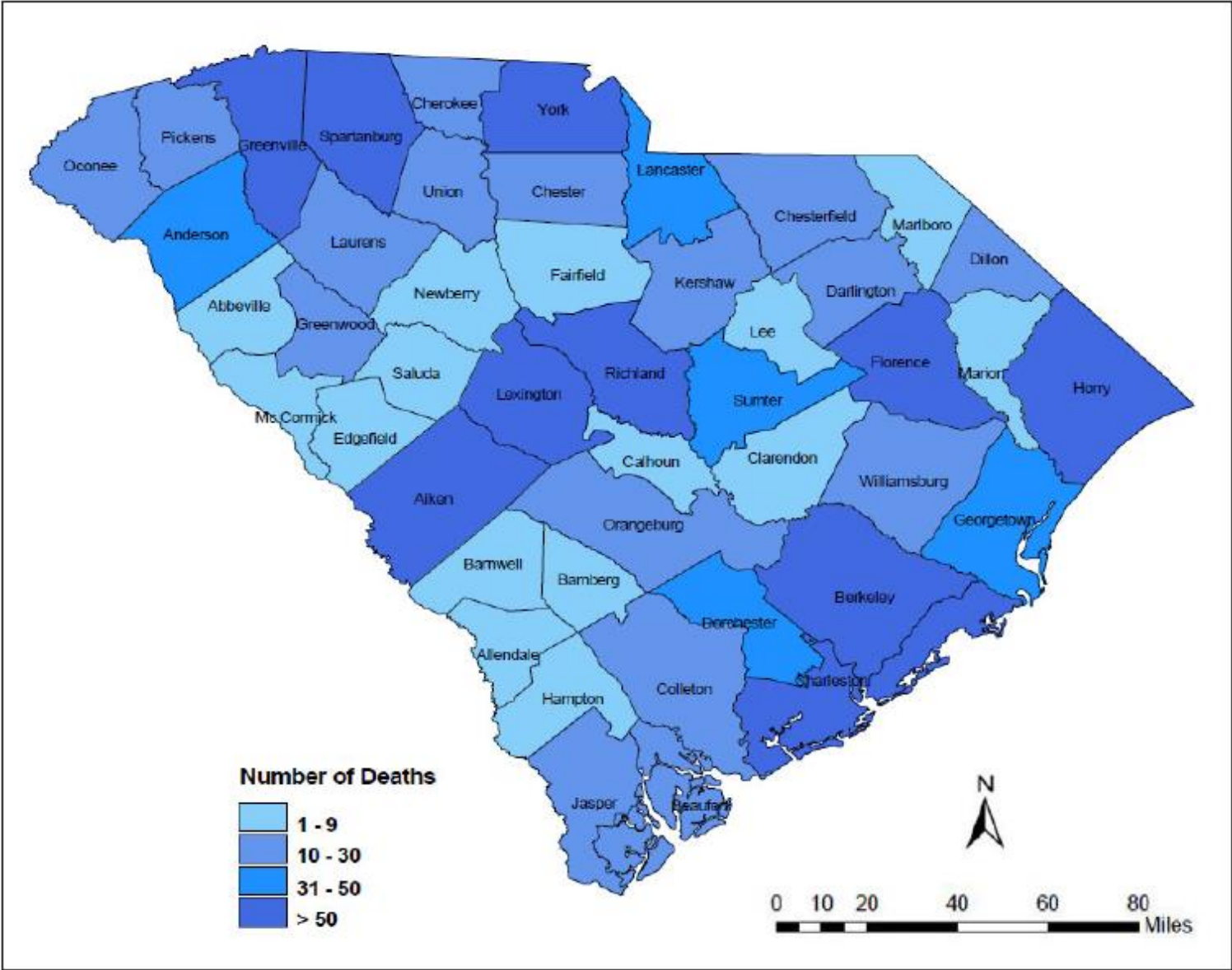
Source: DPH Drug Overdose Deaths, SC 2023.
<https://dph.sc.gov/sites/scdph/files/2025-03/Drug-Overdose-Report-2023.pdf>

SC Opioid-Involved Deaths by Age, 2019-2023



Source: DPH Drug Overdose Deaths, SC 2023.
<https://dph.sc.gov/sites/scdph/files/2025-03/Drug-Overdose-Report-2023.pdf>

SC Opioid-Involved Deaths by County, 2023



Opioid Mortality in the Upstate, 2023

Total Drug Overdose Fatalities

602

By County

Oconee	26
Anderson	64
Pickens	40
Greenville	215
Spartanburg	172
Cherokee	20
Union	11
Laurens	27
Greenwood	22
Abbeville	4
McCormick	1

Naloxone Administration in the Upstate, 2023

Total recorded EMS naloxone administration events

3,392

By County

Oconee 148
Anderson 403
Pickens 305
Greenville 1,269
Spartanburg 671
Cherokee 102
Union 91
Laurens 165
Greenwood 178
Abbeville 41
McCormick 19

Overdose Hospitalizations in the Upstate

Total hospitalizations related to overdose

4,783

By County

Oconee	284
Anderson	663
Pickens	432
Greenville	1,594
Spartanburg	1,146
Cherokee	209
Union	140
Laurens	249
Greenwood	249
Abbeville	51
McCormick	15

Public Treatment System in the Upstate

OOD Patients with state or Medicaid treatment funding

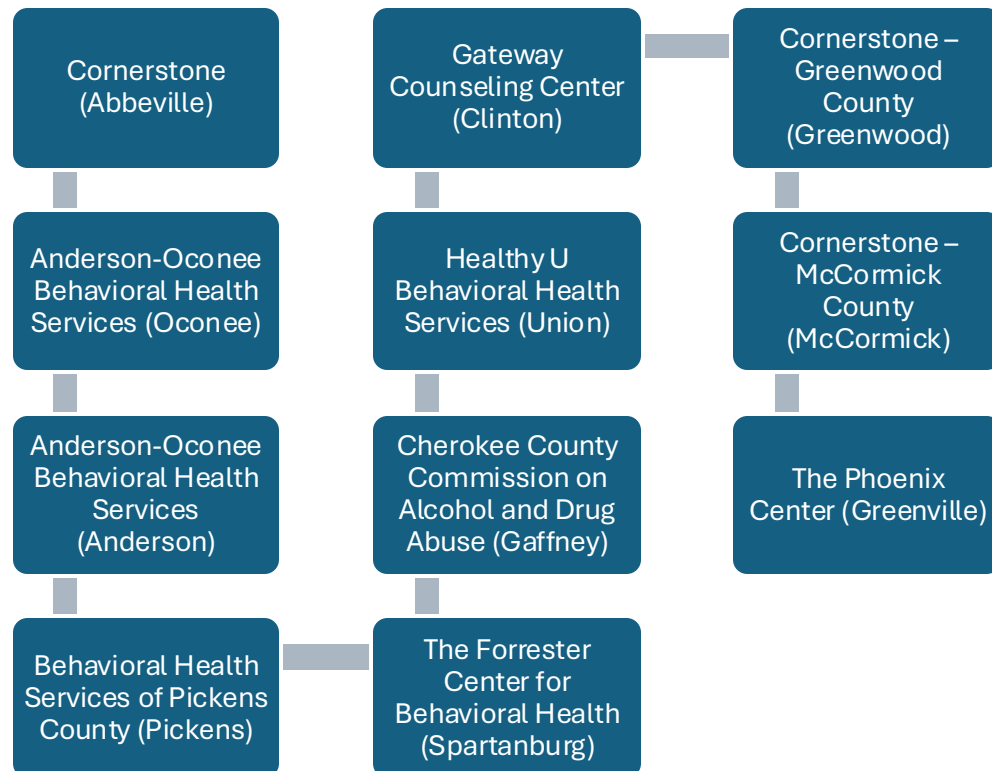
8,110

By County

Oconee	416
Anderson	1,065
Pickens	820
Greenville	2,192
Spartanburg	1,845
Cherokee	456
Union	241
Laurens	488
Greenwood	443
Abbeville	101
McCormick	34

OUD Treatment Providers in the Upstate

County Drug & Alcohol Centers



Opioid Treatment Programs

- Crossroads Treatment Center of Seneca (Seneca)
- Easley Comprehensive Treatment Center (Easley)
- Southwest Carolina Treatment Center (Anderson)
- Greenville Metro Treatment Center (Greenville)
- Crossroads Treatment Center of Greenville (Greenville)
- Palmetto Carolina Treatment Center (Duncan)
- Behavioral Health Group (Spartanburg)
- Clear Skye Treatment Center OTP (Clinton)
- Greenwood Treatment Specialists (Greenwood)

Recovery Organizations in the Upstate



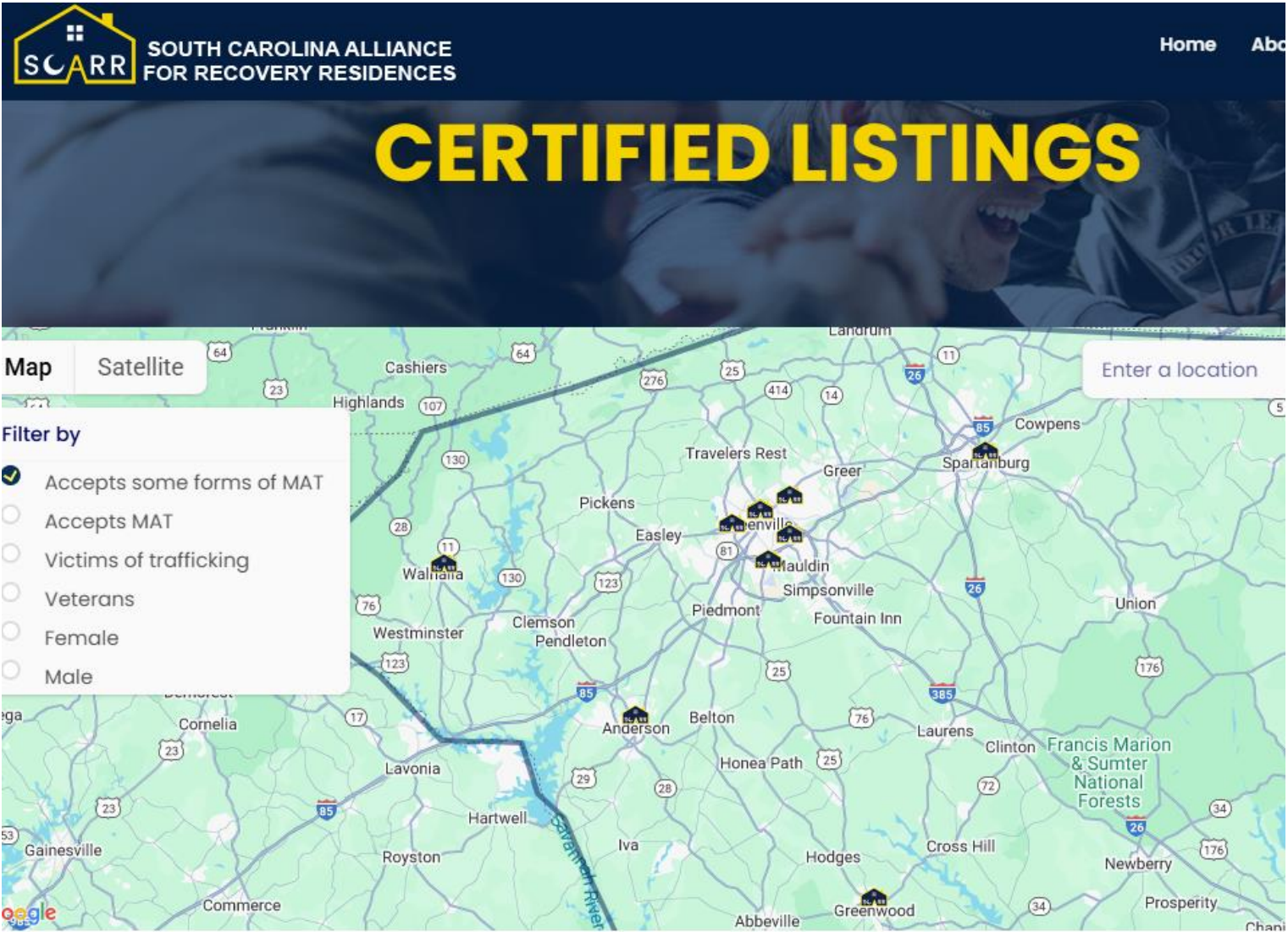
**Faces & Voices of Recovery
(FAVOR) Upstate**



Collegiate Recovery Programs:

Clemson University
Greenville Technical College

Recovery Housing in the Upstate



Emerging Drug Trends

What to know about trending substances and their use

Convenience Store Drugs (“Mood Enhancers”)

Tianeptine

Kava

Phenibut

Akuamma

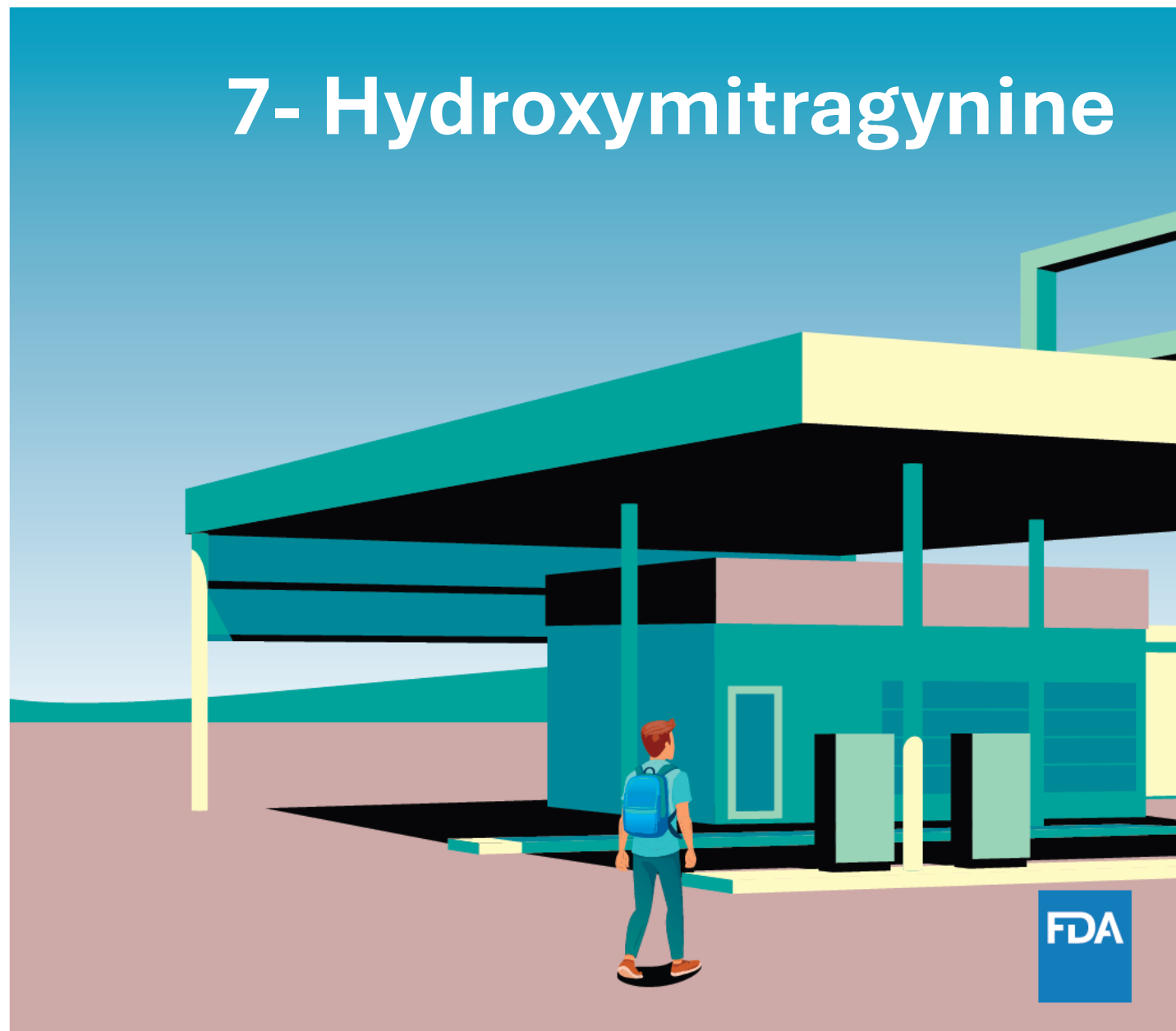
Kratom

7-OH

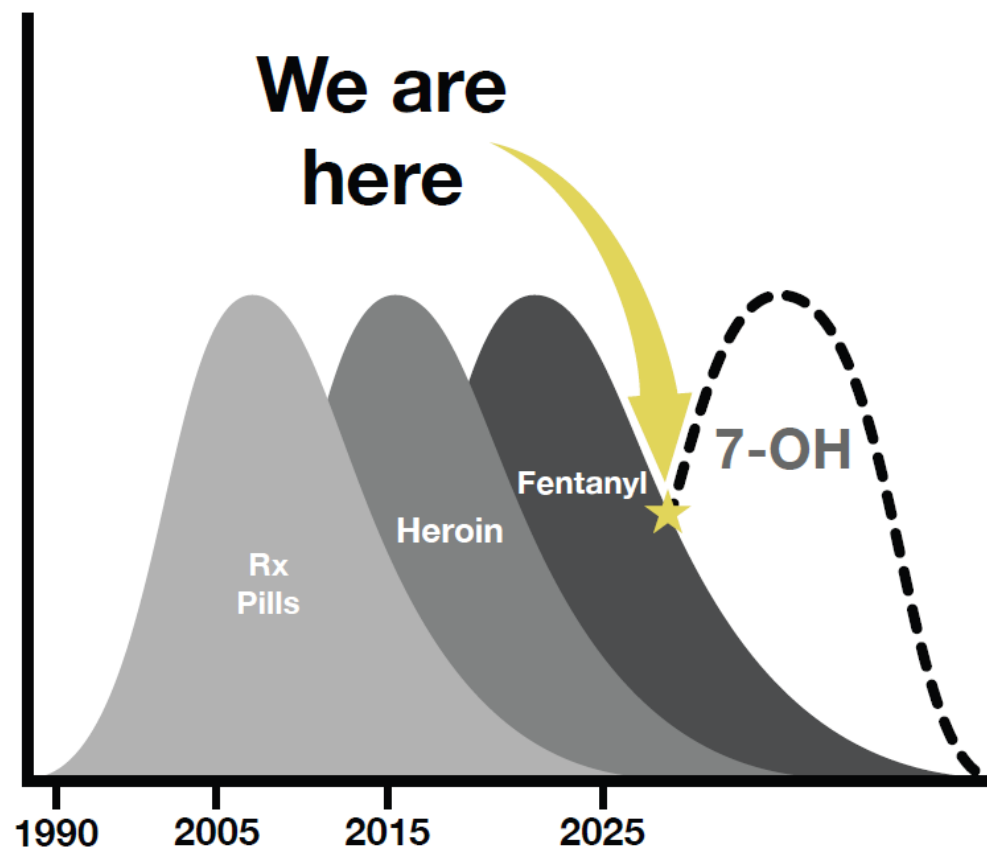
Preventing The Next Wave of the Opioid Epidemic:

What You Need to Know About 7-OH

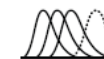
7- Hydroxymitragynine



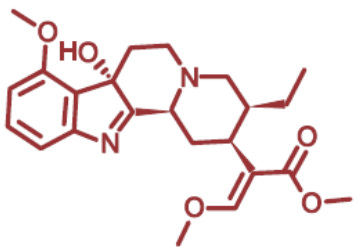
The Opioid Epidemic is Evolving with 7-OH. We Can and Must Act Now to Prevent a New Wave.



Note: The next potential phase of the opioid crisis may be defined by the emergence of novel synthetic opioids like 7-OH, combined with an increasing prevalence of concurrent use of opioids and other controlled substances.



7-OH is Engineered to be Addictive. It is a Potent Opioid by Design.

	
Rx Pills	Heroin
	
Fentanyl	7-OH

7-OH (formally known as **7-Hydroxymitragynine**) is a powerful psychoactive compound that occurs naturally in very small amounts in the Kratom plant.

7-OH products are concentrated derivatives often falsely marketed as Kratom.

Street names include 7-Hydroxy, 7-OHMG and '7'.



This Opioid is not Prescribed or Purchased on the Street - It's Sold like Candy at Retail Stores and Online.



What began as doctor-prescribed painkillers migrated to back-alley dealers when prescriptions dried up. Opioids have disturbingly gone mainstream with 7-OH—no prescription needed, no dealer required. This dangerous opioid is sitting on store shelves, making gas stations and convenience stores risky places where kids can purchase these drugs as easily as buying candy.



Hiding in Plain Sight: 7-OH Products are Designed to Look Like Everyday Treats Like Gummies, Candies and Ice Cream.



Note: These images are select illustrative examples and do not represent the full scope of 7-OH products on the market. Consumers should read packaging and labels carefully to determine whether a product contains 7-OH.



While Some 7-OH Products are Marketed as Natural Kratom, They are Not the Same. 7-OH Presents Significant Risks.

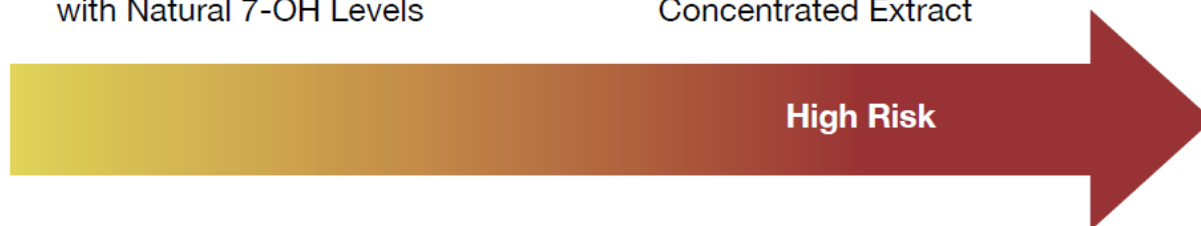


Crushed/Powdered Leaves
with Natural 7-OH Levels



Kratom 7-OH Significantly
Concentrated Extract

**7-OH is 13x
more potent
than morphine.**



“Enhanced” or “spiked” kratom products may appear to be natural leaf, but actually contain as much as 500% more 7-OH than would be expected naturally.



7-hydroxymitragynine Impact in South Carolina



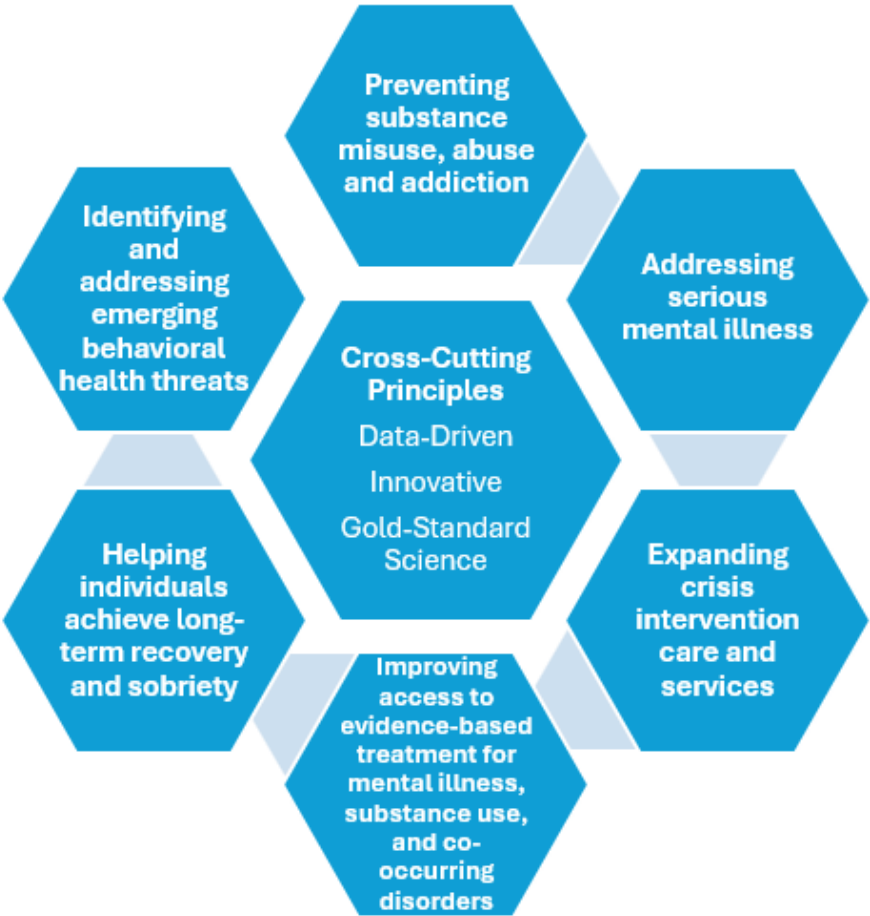
- Promoted as a “safe alternative” and a “better high”
- Multiple deaths (under-recognized)
- Fast dependency and **severe withdrawal**
- Drained bank accounts, marriages failing
- People seeking help
- No defined Dx or FDA approved treatment

Policy Landscape

State and Federal Action to Shape Local Investment

Federal Substance Abuse and Mental Health Services Administration

SAMHSA Strategic Priorities



Funding for Treatment in South Carolina

State Opioid
Response (SOR)
Grant

Substance Abuse
Prevention and
Treatment Block
Grant (SABG)

Medicaid

Innovation in Behavioral Health Grant

SC's Department of Health and Human Services (DHHS) awarded [Innovation in Behavioral Health Grant](#)

\$7.2 Million in federal funding over 8 years

Focuses on integrating physical and behavioral health care in community-based practices

Model to streamline services for dually-diagnosed individuals

Addresses system fragmentation and develops a payment model to enhance care integration for people with SUD

Opioid Settlement Funds

- Administered by the [South Carolina Opioid Recovery Fund \(SCORF\) Board](#)
- Counties/municipalities – “General Political Subdivisions (GPS)” receive 85% of funding in SC
- Unique opportunity for localities to assess their needs and spend funds accordingly
- Settlement-directed [Approved Uses and Core Strategies](#)
- Funds are [reallocated](#) if unused



Opportunities in the Upstate

What strengths can be leveraged?

Scale, Spread, and Innovate in the Upstate

- More of everything!
- Leverage what is working
 - Certified Recovery Housing
 - Pickens Behavioral Health Youth prevention program
 - Recovery workplace initiatives
 - Youth prevention programming
 - Overdose Prevention Services
 - Greenville Detention Center and Greenville EMS programs
 - Many others – who do you know and what can be enhanced?
- Engage in community needs assessments to identify treatment system and workforce needs

Opioid Settlement Resources

- **SCORF Coffee Chat:** virtual meeting on the first Friday at 9:30 am for all local administrators and stakeholders. Meetings cover administrative needs, introduce tools to help manage funds, and provide opportunities to ask SCORF administrative staff questions about your funding. The Board also periodically hosts public comment sessions during these meetings
- **ECHO Virtual Meeting:** The South Carolina Center of Excellence in Addiction hosts calls on the 2nd and 4th Friday at noon. Open to all local administrators and stakeholders to learn about approved abatement strategies and hear presentations from fellow local administrators on how they are being implemented across the state. Pre-registration is required.
- **Needs & Leads:** Hosted by Center of Excellence Technical Assistance leads on the first Tuesday at 11 am, open to anyone receiving technical assistance for opioid settlement projects, or anyone who would like to. Informal space to bring challenges and wins to connect with other in communities across South Carolina. Email camhr@clermson.edu to join.
- **County Treatment System Data:** County profiles analyzing treatment system data
- **Direct technical assistance:** The Center of Excellence in Addiction offers free consultation and referral to technical experts on developing and implementing abatement strategies, community action planning, and administration. [Submit your request here](#) or contact camhr@clermson.edu
- **Application help:** For assistance with applications to be submitted to the SCORF Board, please reach out to contact@scorf.sc.gov or contact Roberta Braneck, SCORF Administrator at Roberta.branneck@scorf.sc.gov



2025 SC GOVERNOR'S **SUMMIT***on***ADDICTION**

Governor's Summit on Addiction

- November 13-14
- Columbia Metropolitan Convention Center
- [Vendor link](#)
- [Registration link](#)
- Local, state, and federal presenters



Questions and Contact

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Panel Discussion

Marc Burrows

Challenges, Inc.

Alain Litwin, MD

Prisma Health

Jessica Seel, MPH

South Carolina Office of Rural Health





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*For more information and to sign
up for our newsletter:*

Thank you!

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