



MIDWEST HIDTA KANSAS OVERDOSE REPORT - 2024



KANSAS

MIDWEST HIDTA – EXECUTIVE DIRECTOR DANIEL W. NEILL



Background Information

The results of the Midwest High Intensity Drug Trafficking Area (HIDTA) 2024 Threat Assessment revealed that fentanyl and methamphetamine were again the top two drug threats to the region.^[1] This conclusion was made utilizing Midwest HIDTA initiative responses to a law enforcement survey (LES) and public health partner responses to the public health survey (PHS), as well as drug trend and other related information collected over the past 12 months. This is the second year in a row fentanyl was ranked as the number one drug threat.

Ongoing Causes for Concern

- Fentanyl will likely continue to pose the greatest threat to the region as the supply is expected to increase.^[1]
- Drug Enforcement Administration (DEA) laboratory testing in 2023, revealed 7 out of 10 fentanyl-laced counterfeit prescription pills now contain a potentially lethal dose of fentanyl, up from 4 out of 10 in 2021.^[2]
- Fentanyl is expected to remain the greatest driver of drug poisoning deaths. Adulterants such as xylazine and medetomidine are of great concern to the Midwest HIDTA and will continue to be, especially if they have an increased impact on poisoning deaths in the region.^[1]
- Methamphetamine will endure as a significant threat to the region with its high levels of availability, demand, use, and its transportation to and through the region.^[1] Low-cost, high potency methamphetamine transported from the Southwest Border will continue to saturate both rural and metropolitan drug markets.^[1]
- The level of violence and crime surrounding methamphetamine production, trafficking, and use will remain a threat to both law enforcement and the public.^[1]

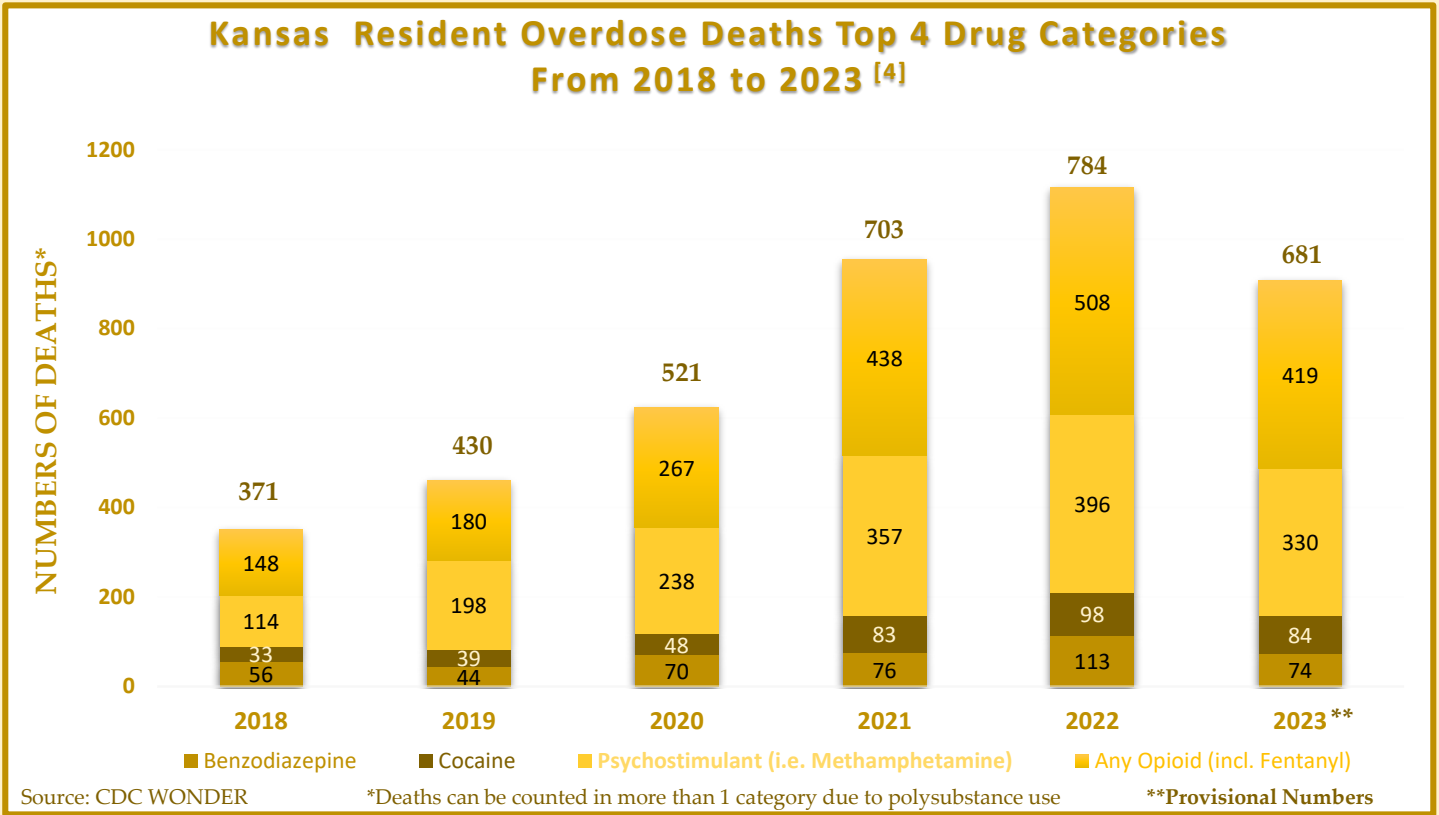
Kansas Outlook

The LES and PHS responses for Kansas coincided with the overall Midwest HIDTA results, ranking fentanyl as the primary threat and methamphetamine as the secondary threat in the state. The responses to the Kansas LES indicated the availability and use levels of fentanyl, in both pill and powder form, and methamphetamine, were all considered to be “high.”^[1] The LES respondents also stated there had been a continued increase of fentanyl being mixed with other illicit drugs, specifically methamphetamine, which has led to an increase of overdoses.

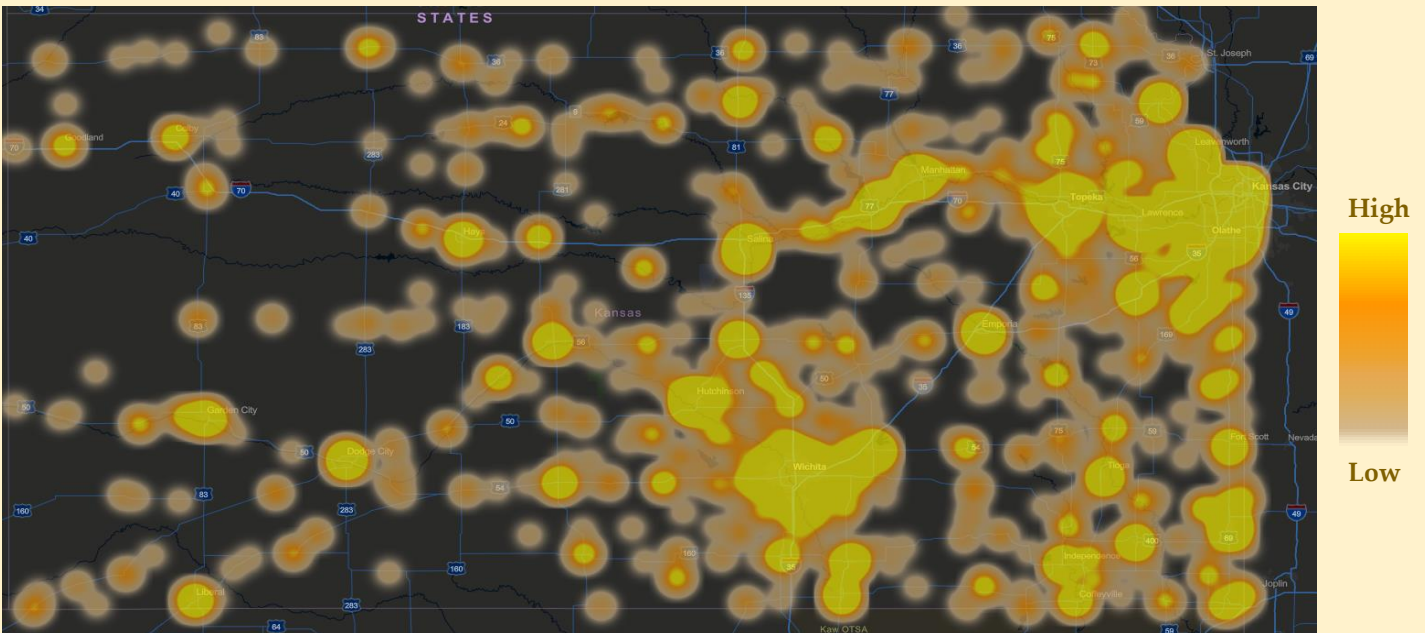
Kansas Treatment Claims by Primary Diagnosis – July 2022 to September 2023

Carelon Behavioral Health operates under the guidance of the Kansas Department for Aging and Disability Services (KDADS). They manage inpatient and outpatient substance use disorder treatments for individuals eligible for Substance Abuse Prevention and Treatment (SAPT) BHS funded services. Their responsibilities also include overseeing substance use disorder treatments for those in the Kansas Driving Under the Influence program and all services funded by the Problem Gambling and Addictions Fund.

During the fifteen month time span from July 2022 to September 2023, the total number of treatment claims by primary diagnosis submitted to Carelon, were as follows: amphetamine 5,102 (monthly average 340), cannabis 403 (monthly average 27), cocaine 313 (monthly average 21), and opioids 1,515 (monthly average 101). The lowest number of treatment claims for each of the drug types was in December of 2022: amphetamine – 259, cannabis – 15, cocaine – 10, and opioid – 68. While the highest number of claims for each of the drug types varied: amphetamine – August 2022 (436), cannabis – July 2022 (39), cocaine – September 2022 (31), and opioids – May 2023 (133).^[3]

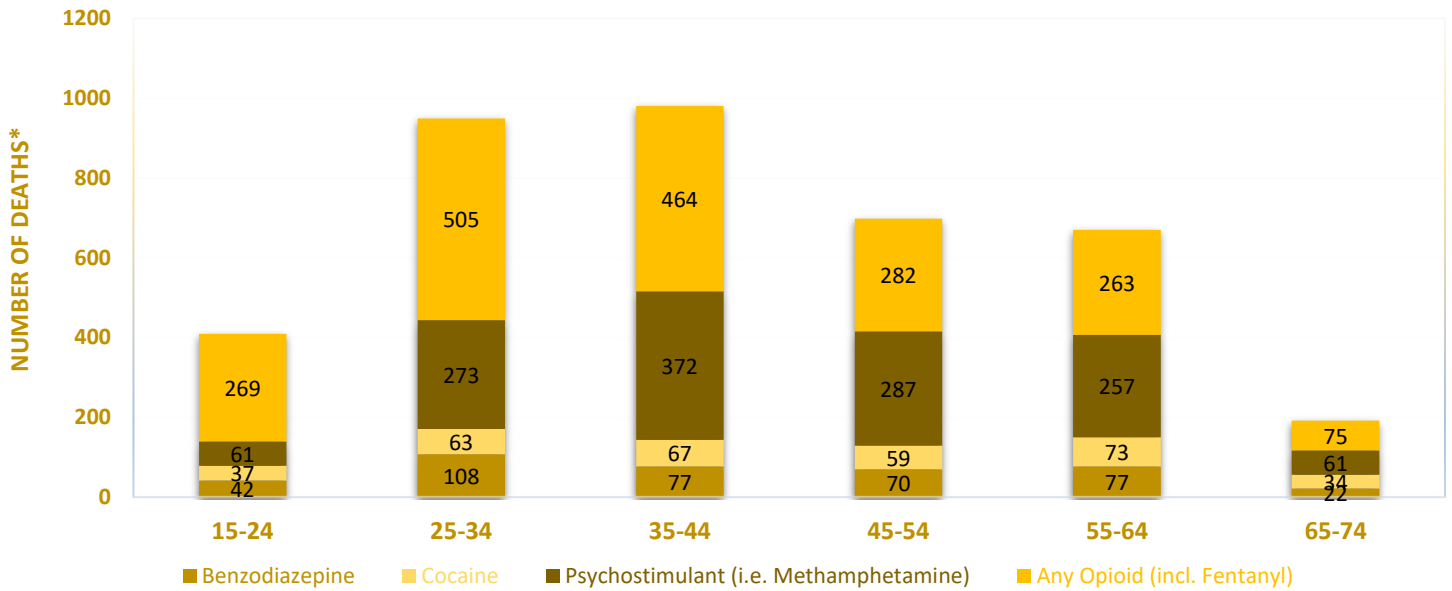


- Psychostimulant overdose deaths increased 247.4% (114 to 396) from 2018 to 2022 [4]
- Any opioid deaths increased 243.2% (148 to 508) from 2018 to 2022; 82.7% of these were synthetic opioids (420 of 508) [4]
- From 2018 to 2022, the overall overdose deaths increased 111.3% (371 to 784) with a provisional decline of 13.1% (784 to 681) from 2022 to 2023 [4]
- The highest annual % increase was from 2020/2021, 34.9.% (521 to 703) [4]



- The above heatmap is a visual representation of the 11,103 suspected overdoses reported to ODMAP from June 30, 2023 to June 30, 2024. The use of naloxone was reported at 1,809 of these incidents.

Kansas Resident Overdose Death Rates by Age Group - Top 4 Drug Categories 2018-2023 [4]

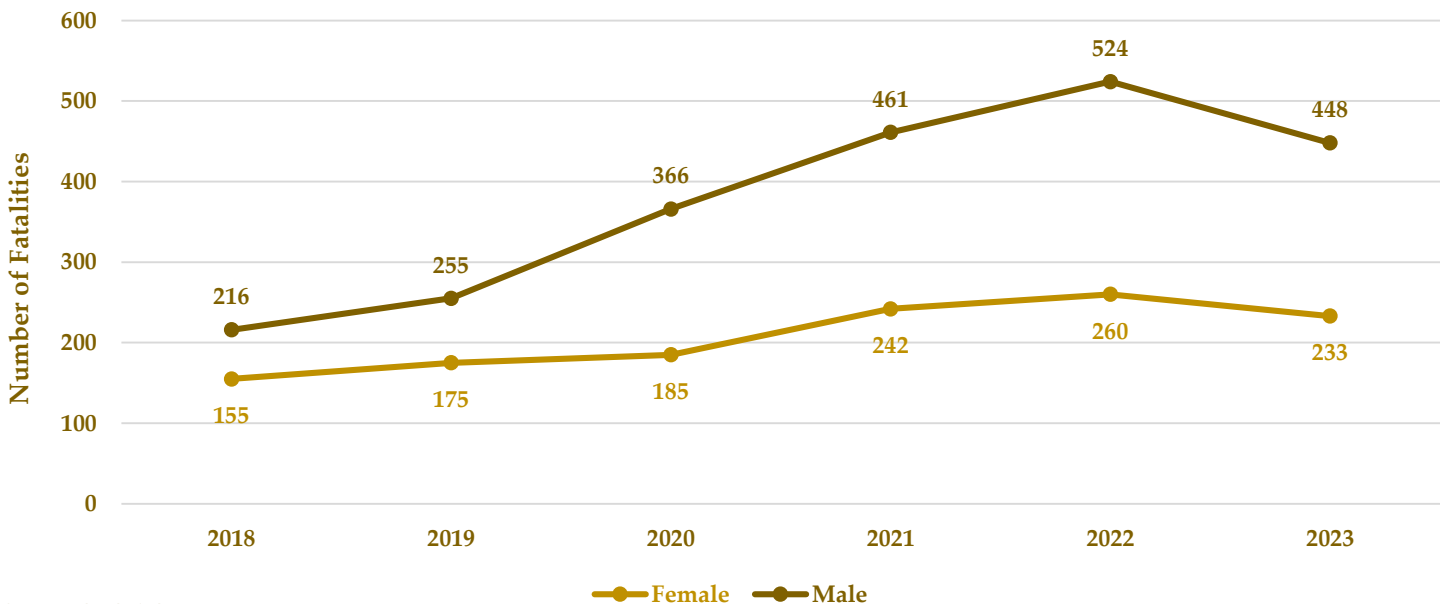


Source: CDC WONDER

*Deaths can be counted in more than 1 category due to polysubstance use

- There is an 88% difference in benzodiazepine overdose fatalities between age groups 15-24 and 25-34 (42 to 108). [4]
- There is a 52% difference in cocaine overdose fatalities between age groups 15-24 and 25-34 (37 to 63). [4]
- There is a 127% difference in psychostimulant overdose fatalities (including methamphetamine) between age groups 15-24 and 25-34 (61 to 273). [4]
- There is a 61% difference in opioid overdose fatalities (including fentanyl) between age groups 15-24 and 25-34 (269 to 505). [4]

Kansas Overdose Death Rate by Sex - All Drug 2018 to 2023 [4]

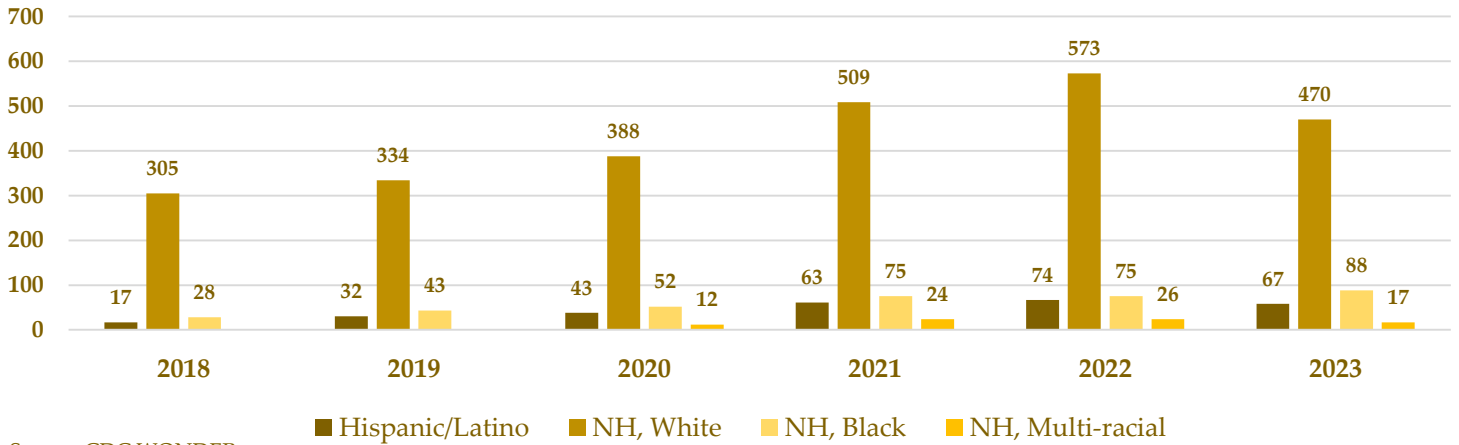


Source: CDC WONDER

- From 2018 to 2023, the number of male overdose fatalities increased 107.4% (216 to 448) [4]
- From 2018 to 2023, the number of female overdose fatalities increased 50.3% (155 to 233) [4]

Kansas Overdose Deaths by Race/Ethnicity - All Drugs 2018 to 2023

[4]

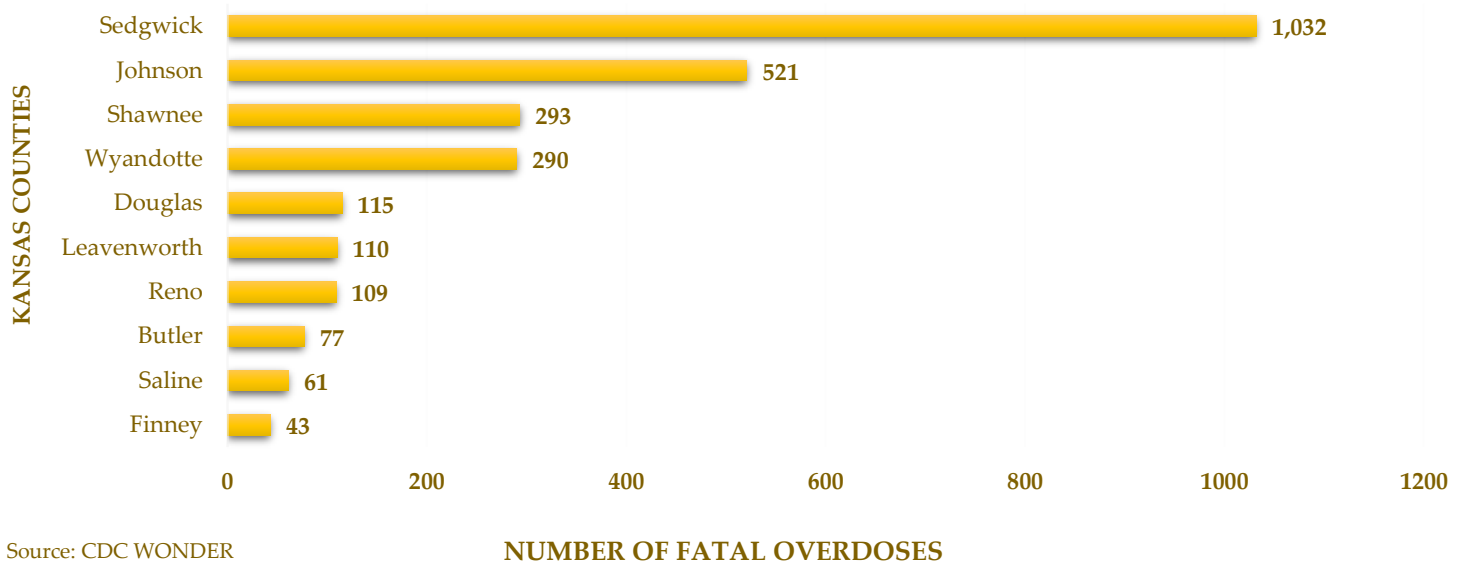


Source: CDC WONDER

From 2018 to 2023, the number of overdose deaths involving all drugs, and the average number of deaths per year over the time period (per 100,000 persons) broken down by race, is as follows: Mixed Race – 92 deaths (19.2 deaths per 100k/per year); Black – 361 deaths (35.8 deaths per 100k/per year); Native American – 42 deaths (30.3 deaths per 100k/per year); White – 2,579 deaths (19.6 deaths per 100k/per year); Hispanic – 296 deaths (13.4 deaths per 100k/per year); Asian – 22 deaths (4.0 deaths per 100k/per year). [4]

NOTE: The Hispanic/Latino numbers for 2018 and 2019 are not available due to suppression constraints, but are included in the total number.

Top 10 Counties with the Highest Mortality Counts - All Drug Types - 2018 to 2023 [4]



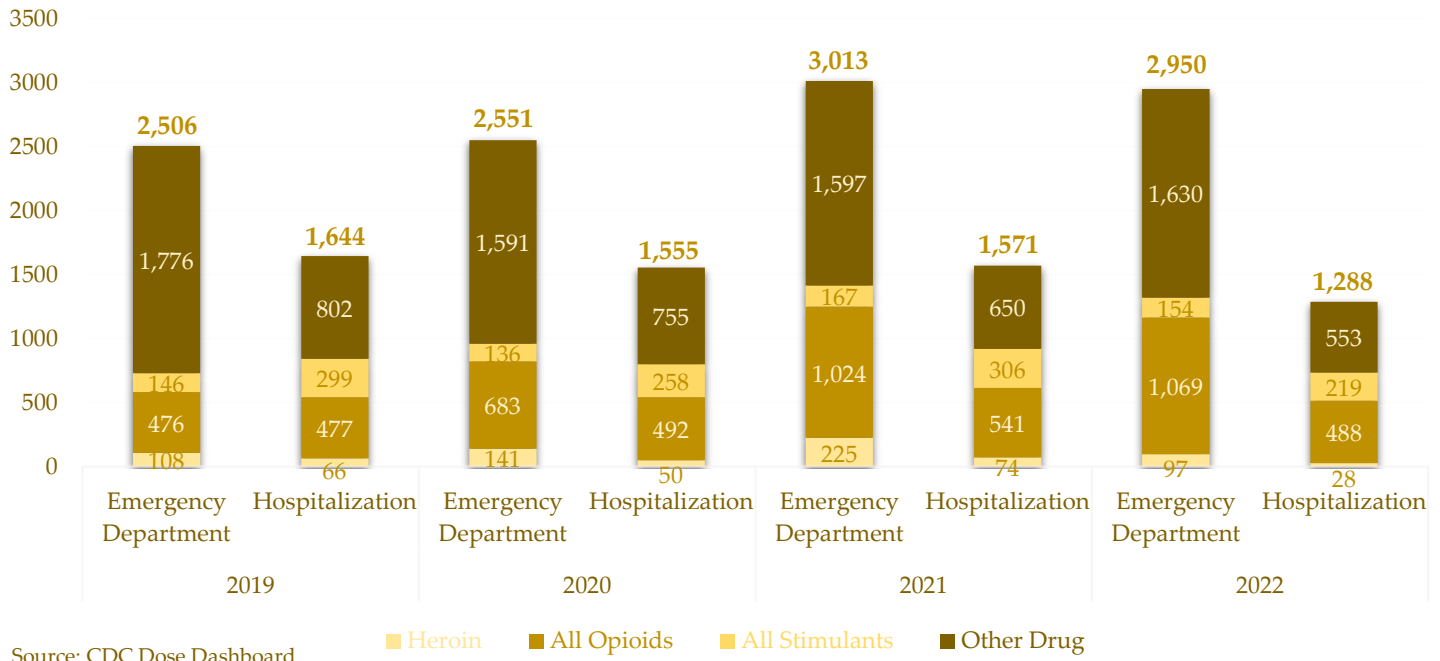
Source: CDC WONDER

Nine of the top ten counties with the highest fatal overdose counts were also in the top ten most populated counties in Kansas, with the lone exception being Finney County, which was ranked twelfth in population in 2024 estimates. [5] The top four counties with the highest fatal overdose counts were nearly consistent regardless of the drug type. [4]

Overdose Deaths – Top 4 Drug Categories – 2018-2023

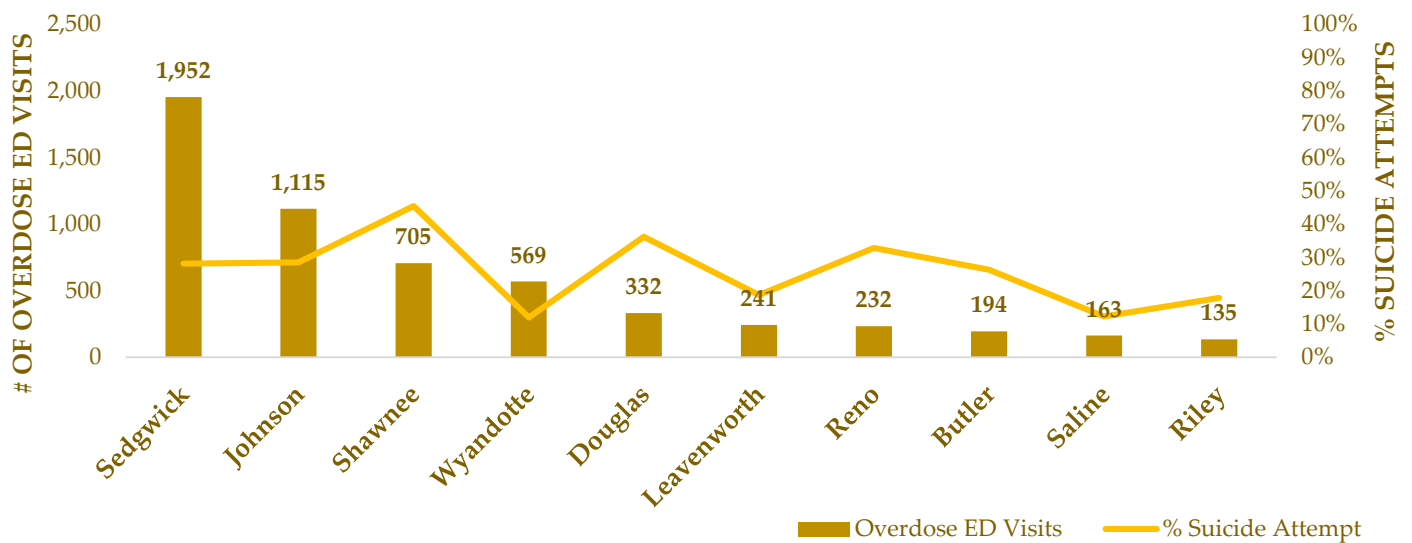
- Any Opioid OD deaths: Sedgwick (666), Johnson (339), Wyandotte (168), and Shawnee (138) [4]
- Benzodiazepine OD deaths: Sedgwick (115), Johnson (94), Shawnee (37), and Wyandotte (30) [4]
- Cocaine OD deaths: Sedgwick (161), Wyandotte (65), Johnson (45), and Shawnee (28) [4]
- Psychostimulant OD deaths: Sedgwick (466), Shawnee (205), Johnson (137), and Wyandotte (118) [4]

Kansas Nonfatal Overdose Emergency Department Visits & Hospitalizations 2019-2022 ^[6]



- Emergency Department visits reported to be associated with “All Opioids” increased 124.6% from 2019 to 2022 (476 to 1,069) ^[6]
- Hospitalizations reported to associated with “Heroin” decreased 57.6% from 2019 to 2022 (66 to 28) ^[6]

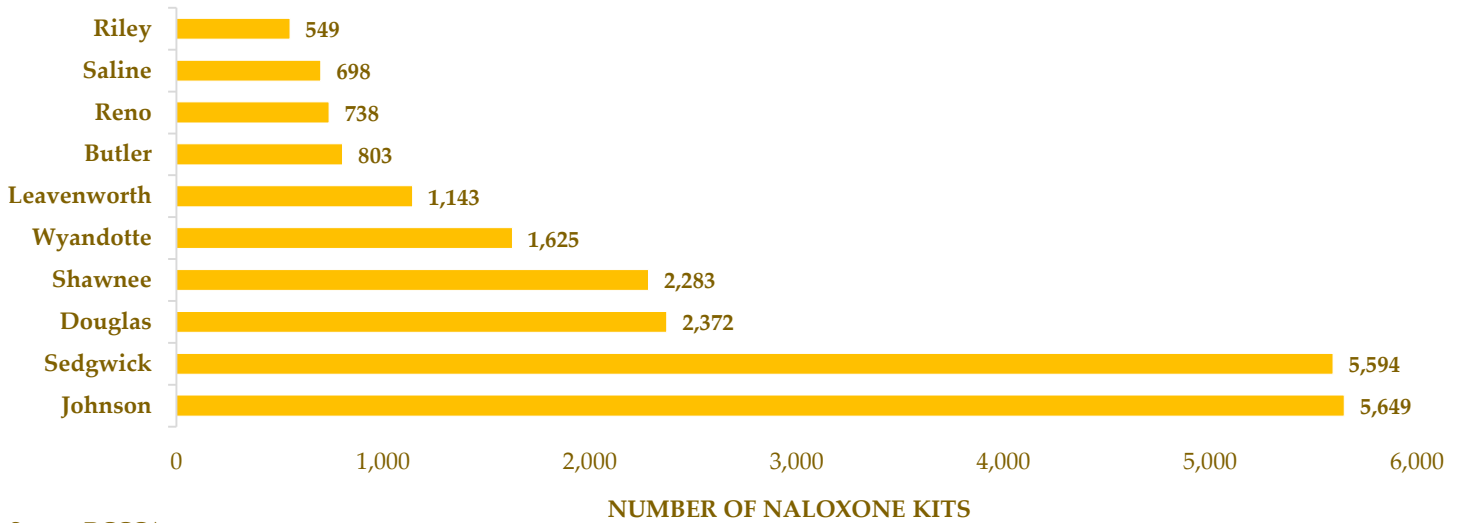
Overdose Emergency Department Visits - All Drug Types (2023) ^[7]



In 2023, there were 7,810 suspected overdose emergency department (ED) visits in Kansas hospitals, and 6.7% of these visits were individuals who were unhoused. While 27.2% of Kansas overdose hospital ED visits were suicide-related, that number is much higher in Shawnee County, where nearly 50% of the suspected overdose ED visits were documented as suicide attempts. ^[7]



Naloxone Kits Distributed by County (Top 10 Counties for 2023) [8]



Source: DCCCA

Developing Caring Communities Committed to Action (DCCCA) provides the bulk of naloxone to local communities through a mail-based program. Some communities, such as Sedgwick, Reno, and Wyandotte counties, have some form of community-based naloxone distribution and those numbers are not reflected in the chart or graph. In 2023, the top 2 counties with the most naloxone kits distributed to them by DCCCA are also the two most populous counties in Kansas. [8]

On February 13th, 2023, DCCCA installed naloxone vending machines in Hutchinson and Wichita. As of July 7th, the vending machine in Hutchinson had dispersed 559 naloxone kits, and the vending machine in Wichita had dispersed 2,054 kits. [8] The Overdose Response Strategy team in Kansas for Midwest HIDTA ran suitability analyses to help determine the best locations for each machine.

HIDTA INITIATIVE	SEIZED DRUG - YEAR - AMOUNT							
	FENTANYL (GRAMS)				METH/ICE (GRAMS)			
	2021	2022	2023	TOTAL	2021	2022	2023	TOTAL
GARDEN CITY/FINNEY CO. DTF	466	9,991	406	10,863	4,008	60,330	5,201	69,539
KC DEA INTERDICTION	15,719	9,672	2,123	27,514	806,892	75,105	96,611	978,608
KC FBI COMBINED TF	1,268	5,781	52,169	59,218	18,889	73,719	230,348	322,956
KC/OVERLAND PARK DEA TF	1,344	13,641	17,628	32,613	128,211	81,127	78,600	287,938
KS INTERDICTION SUPPORT KHP	62,536	52,849	15,577	130,962	291,787	337,915	191,111	820,813
NORTHEAST KANSAS DTF	1,200	560	19	1,779	2,216	2,121	6,372	10,709
TOPEKA DEA TASK FORCE	2,000	0	115	2,115	76,718	48,391	16,170	141,279
WICHITA DEA TASK FORCE	6,579	6,198	8	12,785	55,859	12,417	86,031	154,307
TOTALS	91,112	98,692	88,045	277,849	1,384,580	691,125	710,444	2,786,149

Over the past three years, these initiatives have seized almost 139,000,000 potentially lethal doses of fentanyl. In 2023, the grams of fentanyl pills seized also began to be reported. These seizures (50,852gms/112.1 lbs.) convert to approximately 504,000 dosages units, and with 7 out of 10 containing a potentially lethal dose of fentanyl, equates to another 352,000 potentially lethal dosages being seized. [9]



Updates Regarding the Good Samaritan Law in Kansas

Significant updates to the Good Samaritan Law in Kansas have focused on addressing the opioid crisis, specifically the surge in overdose cases linked to substances like fentanyl. A notable amendment grants immunity to individuals who seek medical help for someone experiencing an overdose. This change aims to reduce drug-related deaths by encouraging bystanders to call 911 without the fear of criminal charges for possession of controlled substances or drug paraphernalia, provided they are seeking help.^[10]

The legislation, known as House Bill 2487, was introduced by a bipartisan group of representatives to promote public health and safety. It stipulates that the immunity from arrest or prosecution extends to the person in need of medical help, as long as both parties cooperate with the authorities. However, there is no immunity for possession with intent to distribute or for drug production paraphernalia.^[10]

Governor Laura Kelly and several state representatives have emphasized the importance of this law as a lifeline for Kansans battling substance use disorders. By fostering an environment where people can seek help without fear, the law seeks to not only save lives but also provides those affected with a chance for recovery.^[11] On May 9, 2024, Governor Laura Kelly signed the legislation ensuring that individuals who seek or provide medical help during such emergencies are not prosecuted for drug possession or use.^[11] This legal protection seeks to foster an environment where every individual is encouraged to act without hesitation during life-threatening situations involving controlled substances like fentanyl.

FAQs

What is the purpose of the Good Samaritan law?

The Good Samaritan law is designed to encourage individuals to assist others in emergency medical situations by providing legal protection from civil liability. This protection applies when someone voluntarily tries to help a person in need of medical attention, before emergency personnel arrive.

Can you summarize the Good Samaritan law?

The Good Samaritan law offers legal protection to individuals who provide emergency medical assistance to accident victims during the critical "Golden Hour" following an accident. This law motivates people to offer help, ensuring that they are legally protected even if their efforts to assist are unsuccessful.

What does the overdose law in Kansas entail?

In Kansas, a new law has been enacted that allows individuals to call 911 for a drug overdose without facing criminal charges. This law aims to reduce drug-related deaths by providing immunity to those who seek emergency medical help for someone experiencing an overdose.

Are there any limitations to the protection provided by the Good Samaritan law?

Yes, the Good Samaritan law does not offer protection against actions that constitute "gross negligence" or deliberate misconduct. Gross negligence refers to a severe lack of care that demonstrates a reckless disregard for the safety of others, potentially leading to serious harm or injury.

Kansas Overdose Response Strategy 2024 Highlights – Activity Summary - FAQs

Kansas Overdose Response Strategy team receives the 2024 Special Achievement in GIS Award from Esri

The award is given to organizations that exhibit innovative ideas/strategies that advance the field of GIS. The ORS team was recognized for its work linking high-density overdose areas to specific risk factors (i.e., lodging facilities, gas stations, apartment complexes) and socioeconomic profiles that allowed local organizations to allocate resources to areas that need it most.

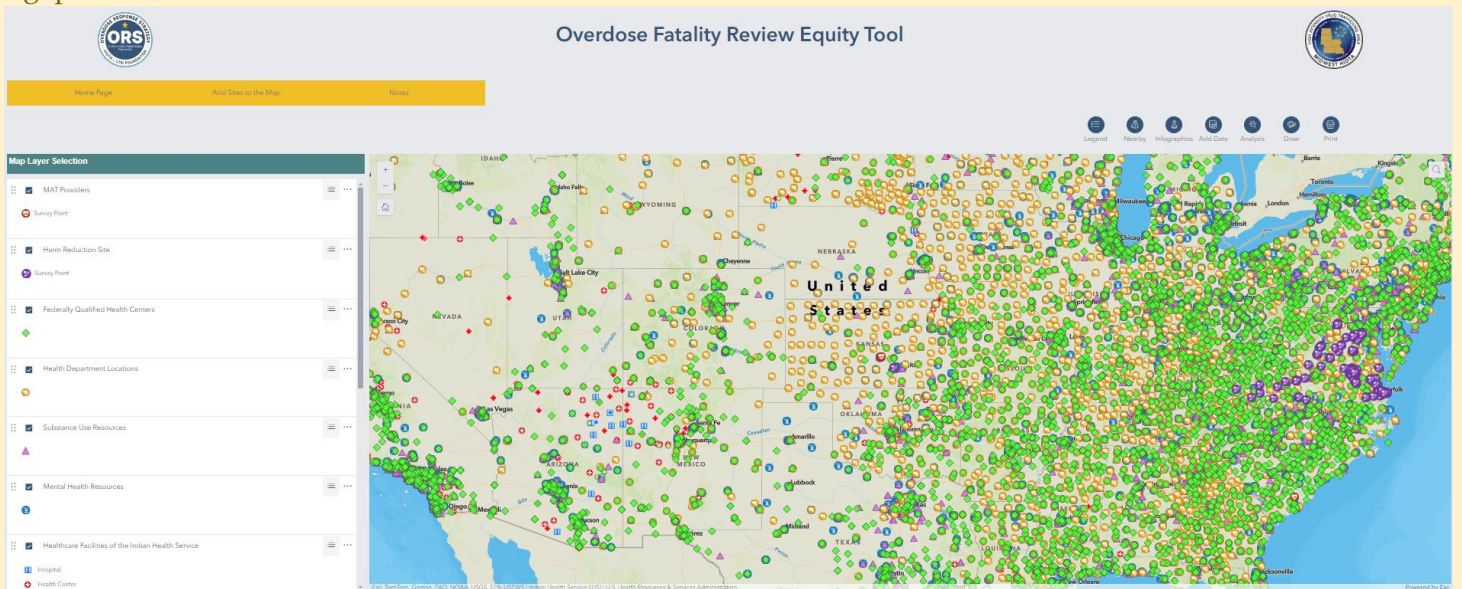


Overdose Fatality Review Begins in Reno County, KS

What is an Overdose Fatality Review (OFR)? A series of confidential individual death reviews by a multidisciplinary team to effectively identify system gaps and innovative community-specific overdose prevention and intervention strategies (source: ofrtools.org)

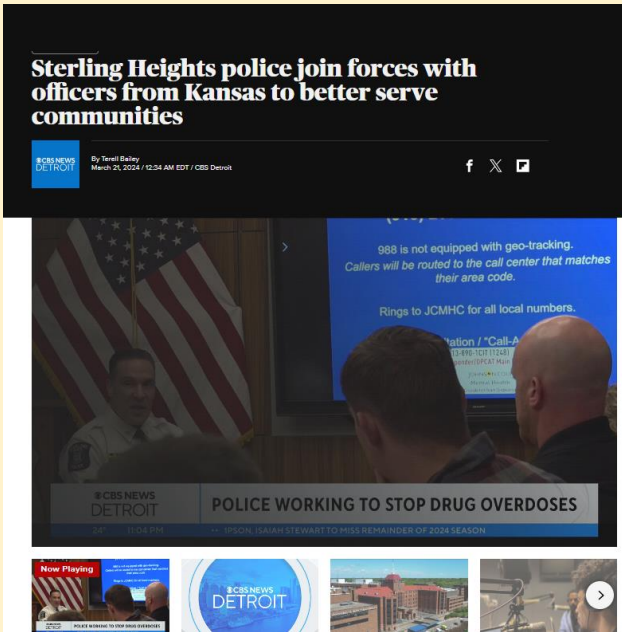
Reno County, KS held its first OFR in January 2024 with the help of the Kansas ORS team. The team consists of public health and public safety stakeholders to find and address system gaps and improve processes. The ORS team is also working with stakeholders in Shawnee County to begin an OFR there with a projected start date in mid-2025.

The team also developed a national OFR Tool to help local organizations collect data and identify resource gaps.



Kansas ORS team visits Sterling Heights, Michigan, with the Overland Park Police Department and Heartland Regional Alcohol and Drug Assessment Center (RADAC)

In March 2024, the ORS team went to Sterling Heights for training from Sterling Heights Police Department and Families Against Narcotics (FAN) on a post-overdose outreach program.



What is a post-overdose outreach program? A multi-disciplinary team consisting of a health provider (i.e., peer recovery coach, social worker) and a law enforcement officer to assess the needs and risks of an individual who recently experienced an overdose. (source: CDC)

For three days, the teams engaged in classroom learning about the different services and programs offered in Michigan and shadowed multiple post-overdose outreach teams.

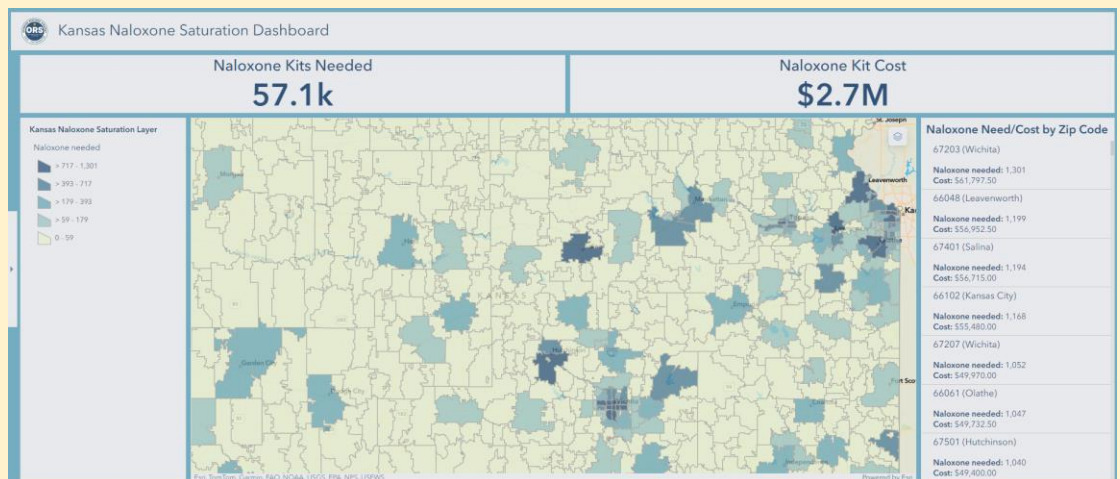
The goal is for the Overland Park Crisis Action Team (OPCAT) to team up with peer recovery coaches from Heartland RADAC to offer services and resources to individuals who recently experienced an overdose.

<https://www.cbsnews.com/detroit/video/police-in-michigan-and-kansas-working-together-to-stop-drug-overdoses/>

Public Health Analyst from Kansas ORS Team Invited to the Naloxone Policy Academy in Rockville, Maryland

A group of people from Kansas—including the Overdose Response Strategy, Kansas Department of Aging & Disability Services (KDADS), Kansas Department of Health & Environment (KDHE), DCCCA, Sunflower Foundation, and Reno County Health Department—went to Rockville, Maryland, to learn more about best practices for providing naloxone to people who need it most. The team is working on clarifying state policy for allowable activities and tracking naloxone distributions.

The ORS team developed a naloxone saturation and estimate dashboard to help state and local organizations identify areas with the most need and how much it would cost.





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