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Putting Predictive Modeling and Analytics Front and Center to Build a Recovery Ecosystem

A Guest Article from Dr. Stephen Loyd, Chief Medical Officer, of Cedar Recovery

Addressing the opioid crisis in America received a major financing boost three years ago as a large multi-district litigation case against pharma, distributors, pharmacies, and consultants was settled for more than \$50 billion. More than forty states were signatories to the settlement money allocation. This is not the first time states have received substantial money from industry for the downplaying of risk of addiction by major companies—in the 1990's, billions of dollars were secured from Big Tobacco for a lot of the same reasons as Big Pharma today.

Unfortunately, the Big Tobacco money did almost nothing to change the smoking and tobacco habits in the United States. The money went to the legislatures and became part of the general fund states allocate yearly. An abysmal percentage of the tobacco money went to prevention programs or other programs which could have addressed problems associated with tobacco use.

The opioid settlement money *must*, by signed agreements from the MDL, be spent to help make those affected by the opioid crisis whole. This obviously is a great thing.

Here's my concern—without the use of predictive modeling on the front end and measurement analytics on the back end, I feel we are at risk of distributing the dollars in programs which already exist. If we do so, there will be people and families that are helped—this is not debatable. However, will that strategy help us build an effective system of care for the next 2-3 decades?? I don't think so.

Most people are familiar with the four strategies to help address the opioid crisis—prevention, treatment, education, harm reduction. There are multiple strategies within each of these four domains. Major public health “think tanks” and university public health departments are in agreement on these strategies. Here is the issue—how do we know how much to allocate to each strategy based on funding and existing programs to maximize the number of people who find recovery from opioid addiction?

I work in different states, and I can tell you the prevailing approach is ***to guess***. Really?? With all the technology and analytics along with developing machine learning we have at our disposal and our best strategy is ***to guess***??

Here is my proposal—use established system dynamics modeling (started in the 60's at MIT and has a long successful track record in the court system and our nation's military) and available data sources to model the current system, recovery assets, and drug policy to make informed decisions on allocation of opioid settlement dollars to the accepted strategies. This model is developed ***BEFORE*** a dime is spent. On the back end, use analytics and machine learning to measure outcomes based on the modeling and have the wherewithal to move the money from things that aren't working into things that are to properly scale effective modalities to other counties, states, or regions.

If we have the courage to use available technology to guide the building of a meaningful recovery ecosystem, I feel we have a chance to make a lasting impact in substance use treatment which will lead to more people finding long term recovery in the next twenty to thirty years.

Dr. Loyd has been in recovery from opioid and benzodiazepine addiction since July 8, 2004. His personal connection to opioid addiction and recovery serves as a driving force, motivating him to continue making strides in this industry and creating positive change for the future. As the inspiration behind Michael Keaton's character in the Emmy Award-winning series “Dopesick” on Hulu, Dr. Loyd continues to make a significant impact in the field. Currently, he serves as Chief Medical Officer at Cedar Recovery in Tennessee and chairs the Tennessee Opioid Abatement Council, appointed by Governor Bill Lee. He gave an impactful presentation at mhca's Summer Conference in Providence, Rhode Island, which will be available to members online at <https://mhca.com/conference-presentations/2024-providence-ri> in about a week.

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