



US FAMILY
HEALTH PLAN

Substance Use Toolkit

An Educational Guide to Understanding, Recognizing, and Addressing Substance Use Disorder

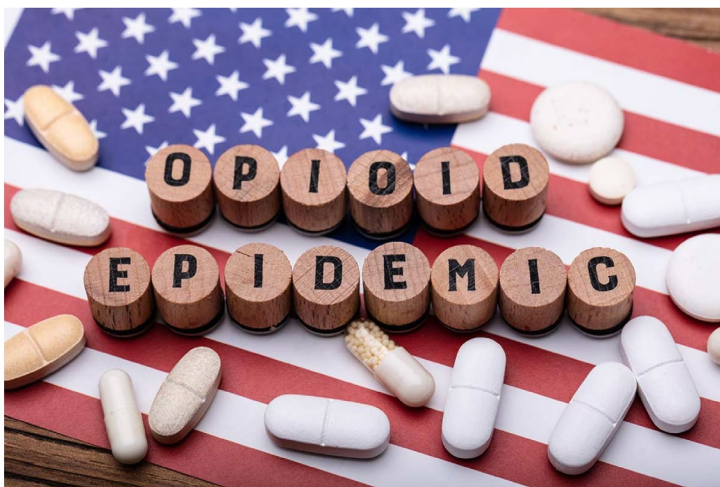
This is an informational toolkit to provide you, your family, and the general public with knowledge and resources related to substance use disorder (SUD), as well as Post Traumatic Stress Disorder (PTSD).

In this toolkit, you'll learn what substance use disorder is, get some facts about the opioid crisis and lifesaving Narcan®, understand the link between PTSD and SUD, learn about marijuana use in teens, and find out about **treatment options**.



Substance Use Disorder (SUD)

Substance Use Disorder (SUD) is a medical condition characterized by an inability to control the use of a substance (such as alcohol, opioids, cannabis, or stimulants) despite harmful consequences to health, relationships, work, or legal problems. SUD is a medical condition, not a moral failing. It changes brain chemistry, especially areas of the brain that regulate reward, stress, and self-control.



The Opioid Crisis in America

One particularly concerning aspect of substance use disorder (SUD) today is opioid abuse, which involves both the misuse of prescription pain medications and the use of street drugs. You have likely heard about this issue in the news, especially regarding fentanyl and fentanyl overdoses.

- Fentanyl is a synthetic opioid 50-100 times stronger than morphine, it is now found in many street drugs.
- Among people aged 12 or older in 2024, 0.3 percent (or 816,000 people) had misused fentanyl in the past year, including 0.2 percent of adolescents aged 12 to 17.
- A Fentanyl overdose can happen when someone takes even a tiny amount of this extremely strong opioid which can cause slow breathing, so much so that the brain doesn't get enough oxygen. Immediate rescue treatment such as with Narcan® is critical.

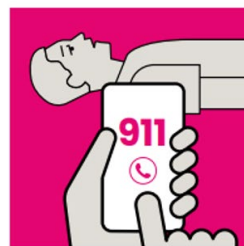
What is Narcan?

Narcan® (Naloxone) Saves Lives! Narcan® can instantly reverse an opioid overdose. It works by rushing to the same areas in your brain where opioids (such as fentanyl or pain pills) are attached and causing an overdose to happen. It replaces the opioids in these areas, instantly reversing the overdose and allowing the person to breathe again. You should have it available if someone in your home uses prescription opioids or has a history of opioid abuse.

Any prescriber can write you a prescription for Narcan®. It is covered under the pharmacy benefit for a \$0 copayment. USFHP members can get Narcan® through VytOne or any USFHP network pharmacy.

Additionally, you can get free Narcan® delivered to you through nextdistro.org, an online and mail-based harm reduction service.

Narcan® is now available over-the-counter at most pharmacies in New York, Pennsylvania, Connecticut, and New Jersey—no prescription necessary, but you would need to pay out of pocket.



How to help someone who may need Narcan® (nasal spray):

1. Check for responsiveness — shout their name, shake their shoulders
2. Call 911 immediately
3. Give 1 spray into **one** nostril
4. Start rescue breathing or CPR if trained
5. If no response in 2-3 minutes, give second spray in other nostril
6. Stay with the person until help arrives

Marijuana Use in Teens: What Parents Need to Know

Another SUD issue currently in the news is the growing use of marijuana in teens. Part of the problem is that today's marijuana is much stronger than in past decades. THC is the primary psychoactive compound in marijuana. Average THC levels have risen from 4% in 1995 to 20-30%, or even higher today. High-potency marijuana use in teenagers significantly increases the risk of developing psychosis, schizophrenia, permanent IQ loss (up to 8 points), severe anxiety disorders, and cannabis use disorder, with earlier and heavier use linked to worse long-term mental health and cognitive outcomes.

Warning Signs of Teen Marijuana Use

- Red or glassy eyes
- Strong odor on clothes/breath
- Increased appetite
- Poor motivation or school performance
- Anxiety, paranoia, or rapid heart rate
- Using eye drops or perfume to mask signs

What Parents Can Do

- Have open, non-judgmental conversations early and often
- Set clear rules and consequences —and follow through
- Monitor online activity and friends
- Model healthy coping skills (exercise, hobbies, talking)
- If concerned, reach out to your child's Primary Care Provider—early help prevents escalation

Resources for Parents

- Partnership to End Addiction: www.drugfree.org
- Substance abuse and Mental Health Services Administration (SAMHSA) National Helpline: **1-800-662-HELP (4357)**



PTSD and Substance Use Disorder

PTSD, or post-traumatic stress disorder, is a mental health condition that can develop after someone experiences or witnesses a terrifying or life-threatening event, causing ongoing symptoms like flashbacks, nightmares, severe anxiety, and feeling constantly on edge.

Post-Traumatic Stress Disorder (PTSD) and SUD often occur together — approximately 7% of all U.S. veterans — equating to an estimated 1.4 million individuals will experience PTSD at some point in their lifetime.

- 40% of civilians and veterans with PTSD have co-occurring SUD.
- People with PTSD may use alcohol or drugs to “quiet” nightmares, flashbacks, or severe anxiety, thinking this would help these PTSD symptoms.
- Substance use/abuse (like abuse of alcohol, overuse of opiates etc.) actually makes PTSD symptoms worse over time.

If you or a loved one has experienced trauma and is also struggling with substance use, reach out to your Primary Care Provider as early as possible—the good news is that both conditions can be treated effectively. The best approach is called dual treatment (also known as integrated

or concurrent treatment). Dual treatment means addressing PTSD and SUD at the same time, in the same program or with the same clinical team—instead of treating them separately. This integrated approach is now considered the gold-standard because PTSD and SUD are highly intertwined.

Treatment & Recovery Work

SUD treatment options vary in intensity depending on how severe the addiction is and what kind of support a person needs.

Detox is a short, medically supervised process to safely clear drugs or alcohol from the body, while residential treatment means living full-time at a facility for weeks or months with round-the-clock care and therapy.

Outpatient programs let people live at home and attend treatment during the day: IOP (Intensive Outpatient Program) involves several hours of therapy several days a week, and PHP (Partial Hospitalization Program) is a step more intense, often 5–7 days a week for most of the day, almost like going to a hospital program without staying overnight.

Substance use disorder is treatable and is covered under USFHP. **Recovery is possible!**

Levels of Care and USFHP Coverage available include:*

Level of Care	Description	Active-Duty Family Members and/or those with Medicare Part B	Retirees and Family Members without Medicare Part B
Outpatient	1-2 sessions per week (45-60 min each)	\$0	\$39
Intensive Outpatient (IOP)	3-5 days/week, 3-4 hours per day	\$0	\$39/ visit
Partial Hospitalization (PHP)	5-7 days/week 5-8 hours per day	\$0	\$39/ visit
Medically Managed Detox	27/7 medical care, usually 3-10 days	\$0	\$198/admission
Residential Treatment	24 hour structured care, 30-90+ days	\$0	\$198/admission

For referrals: US Family Health Plan covers mental health and substance use treatment. Call Member Services at 1-800-241-4848 to find an in-network provider.

**Cost is subject to change annually.*

You do NOT have to hit “rock bottom” to get help. The earlier the treatment begins, the better the outcome.

How to Help a Loved One

- Express concern using “I” statements (“I’m worried because...”)
- Avoid shame or lectures
- Offer to help find treatment—go with them if possible
- Set healthy boundaries
- Take care of yourself—support groups like Al-Anon or Nar-Anon (support groups for loved ones)



**US FAMILY
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Recognizing, and
Addressing Substance
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**Questions or Concerns? Contact a Behavioral Health Care Manager
for more resources and support at (800) 241-4848 option 2.**

ADDITIONAL RESOURCES

**IN AN EMERGENCY CALL 911 IMMEDIATELY
for overdose or danger to self/others**

- **National Suicide & Crisis Lifeline:** 988
- **SAMHSA National Helpline:** 1-800-662-HELP (4357)
- **Crisis Text Line:** Text HOME to 741741
- **Veteran Crisis Line:** Dial 988 then press 1
- **To find out more about Mental Health treatment call:**
1-800-241-4848 option 2



• **AA -
Alcoholics
Anonymous**



• **NA -
Narcotics
Anonymous**



• **Narcan Use
Fact Sheet**

For Family Members:

- **Al Anon:** www.al-anon.org
- **Nar-Anon:** www.nar-anon.org

Sources:

- 2024 National Survey on Drug Use and Health (NSDUH) Releases | CBHSQ Data
- How Common is PTSD in Veterans? - PTSD: National Center for PTSD
- National Institute on Drug Abuse (NIDA) - National Institutes of Health
<https://nida.nih.gov/publications/drugs-brains-behavior-science-addiction/drug-misuse-addiction>
- American Psychiatric Association (DSM-5-TR definition of Substance Use Disorder) <https://www.psychiatry.org/patients-families/addiction-substance-use-disorders>
- <https://www.cdc.gov/overdose-prevention/about/understanding-the-opioid-overdose-epidemic.html>
- <https://www.samhsa.gov/substance-use/treatment/overdose-prevention/otc-naloxone-faqs>
- https://www.health.ny.gov/diseases/aids/general/opioid_overdose_prevention/directories.htm
- https://www.accessdata.fda.gov/drugsatfda_docs/label/2015/208411lbl.pdf
- <https://www.cdc.gov/cannabis/health-effects/cannabis-and-teens.html>
- <https://www.brownhealth.org/be-well/kids-and-cannabis-your-child-using-marijuana>
- <https://library.samhsa.gov/sites/default/files/pep20-02-01-021.pdf>
- <https://www.psychiatry.org/patients-families/ptsd/what-is-ptsd>
- <https://www.samhsa.gov/families>