

## Meeting Minutes: Opioid Epidemic Response Advisory Council (OERAC) Meeting

**Date and time of meeting:** November 19, 2021 from 8:30 AM to 11:15 AM

**Meeting Location:** Microsoft Teams meeting

**Participants:**

Nicole Anderson; Dave Baker, Representative – Vice Chair; Heather Bell, MD; Pete Carlson; Joe Clubb; Mary Kunesh; Dana Farley; Randy Goodwin; Sarah Grosshuesch; Alicia House; Cody Wiberg for Katrina Howard; Tiffany Irvin; Erin Koegel, Representative; Mark Koran, Senator; Gertrude Matemba-Mutasa; Esther Muturi; Toni Napier; Kathryn Nevins; Darin Prescott; Anne Pylkas, MD – Chair; Judge D. Korey Wahwassuck

Minnesota Management and Budget (MMB): Kristin van Amber

Minnesota Department of Human Services (DHS): Boyd Brown; Tara Holt; Sam Nord; Johanna Schels

### Meeting Goals

Meeting goals per the PowerPoint presentation, *Opioid Epidemic Response Advisory Council, November 19, 2021*, emailed to OERAC members on November 18 by Tara Holt of Behavioral Health Division:

1. Discuss the next steps in the Opioid Settlement
2. Discuss and determine reporting measure recommendations for the opioid settlements
3. Receive an update on the OERAC request for proposals

### Ground Rules, Welcome, Meeting Goals and Agenda, OERAC Introductions

Kristin van Amber: 8:30 AM to 8:45 AM

Kristin van Amber reviews the ground rules, *How to participate*, and welcomes guests. She explains the procedure for the public comment period to guests. She also explains the meeting goals and reviews the agenda.

OERAC members introduce themselves.

**Motion** to approve the meeting minutes for the OERAC meeting on October 15, 2021. **Approved**

**Motion** to approve the meeting minutes for the OERAC meeting on November 16, 2021. **Approved**

**Note:** The OERAC meeting on November 16 was a “discussion and motion of the Opioid Epidemic Response Advisory Council’s position on the opioid settlement, and in preparation for the November 18 “signers table” discussion held by the Minnesota Attorney General Office.”

### **Randy Goodwin Honor Statement**

Randi “Randy” Jay Goodwin passed away on November 10, 2021 from COVID-19. “Randy was the Director of Public Safety for White Earth, Executive Director for White Earth and finished his career at the time of his death at the State of Minnesota Department of Corrections as Tribal Liaison.” (<https://www.ceasefuneralhome.com/obituaries/Randi-Jay-Goodwin?obId=23069119>)

## **Requested Public Comment**

Kevin Roy, Chief Public Policy Officer of Shatterproof: 8:45 AM to 8:55 AM

Shatterproof is a national nonprofit organization dedicated to reversing the addiction crisis in the United States. Shatterproof is a grassroots organization and supported by donors; it is not a provider and does not represent a third party, such as a provider (of substance use treatment services), an industry association, etc.

The mission of Shatterproof is:

- Revolutionize addiction treatment.
- End the stigma of addiction.
- Empower and educate communities.

Shatterproof developed five principles for the use of funds from the opioid litigation:

- Spend money to save lives.
- Use evidence to guide spending.
- Invest in youth prevention.
- Focus on racial equity.
- Develop a fair and transparent process for deciding where to spend the funding.

Shatterproof developed an opioid abatement strategy that includes the following steps:

- Reduce addiction-related stigma.
- Educate and equip primary care practices.
- Build workforce capacity for specialty addiction treatment.
- Improve oversight and evaluation of specialty addiction treatment programs.
- Provide comprehensive and trustworthy information on addiction.
- Increase availability and distribution of naloxone.
- Promote evidence-based prevention strategies.

Mr. Roy explains the strategy behind a highly successful campaign to reduce the stigma of addiction; the campaign was rolled out in Pennsylvania and can serve as a model for such a campaign in Minnesota.

Mr. Roy explains the Collaborative Care Model (CoCM), which involves “an integrative treatment approach to improve outcomes for behavioral health disorders in the primary care setting” and relies on “measurement-based care to track patient progress through validated clinical rating scales.”

The Shatterproof National Principles of Care© align with the CoCM.

Shatterproof created the online platform [ATLAS](#), which stands for Addiction Treatment Locator, Assessment, and Standards. The plan is to expand ATLAS nationwide.

The user of the platform can review how a provider complies with national principles and standards of care. Providers can get information on how they can improve the quality of their services.

Please refer to the PowerPoint presentation, *Shatterproof™ Stronger Than Addiction*, prepared by Kevin Roy, Chief Public Policy Officer for Minnesota Opioid Epidemic Advisory Council, Public Comment.

## Opioid Settlement Updates

Representative Baker, Evan Romanoff, and Weston Merrick: 8:55 AM to 9:55 AM

### OERAC Opioid Settlement Updates by Special Panel of OERAC Members

Representative Baker refers to “the stewardship fund that was created with House file 400” and explains that all funds OERAC receives based on current legislation and through litigation goes directly into the stewardship fund (managed by OERAC). There is already a plan in place for the distribution of the funds OERAC receives. For example, roughly 50% goes to Minnesota counties for child protection services. There is also a flat amount or approx. \$1,000,000 that goes to American Indian Tribes in Minnesota. In addition, there are administrative fees and costs for services provided by Minnesota Management and Budget. The current fund distribution plan will not change. This means “the counties will get another 50% again (for) dedicated child protection services.” The rest (of the funds) goes to OERAC. Representative Baker, Heather Bell, Kathy (Kathryn) Nevins, and Sarah Grosshuesch are members of a special panel that works with the Office of the Minnesota Attorney General in a consulting role on how to allocate/ distribute the expected opioid settlement funds to Minnesota’s local governments.

### Office of Minnesota Attorney General – Update

Evan Romanoff, Assistant Attorney General, provides an update on the opioid settlement agreement process. The opioid settlements “are still on track to go through.” (This involves \$337 million dollars over 18 years from distributors McKesson, Cardinal Health, and AmerisourceBergen; and manufacturer Johnson and Johnson.) Notice was sent to cities and counties, asking they register by the deadline (January 2, 2022) to receive opioid settlement funds. The Office of Minnesota Attorney General and the aforementioned panel of OERAC members met every Wednesday since the beginning of September 2021 and for six weeks; the panel provided recommendations and guidance on the allocation/ distribution of opioid settlement funds to cities and counties. The Office of Minnesota Attorney General will implement these recommendations in the “state sub-division agreement.”

A “signers table” consisting of the Office of Minnesota Attorney General and the Association of Minnesota Counties was established and has been meeting since the first week in November; three meetings have been held so far. The purpose of the meetings is do discuss and agree on the terms of the Memorandum of Understanding (MOU) that cities and counties need to sign “to get them onboard” the opioid settlement agreement. Minnesota’s share of the opioid settlement funds will be higher if more cities and counties sign the MOU.

The opioid settlement agreement provides flexibility on how the opioid settlement funds are distributed. The default is “85 to 15”, whereby the state’s share is 85%. The meetings of the “signers table” serve to discuss the

allocation/ distribution amounts to be received from the opioid settlements. The Office of Minnesota Attorney General hopes to finalize the terms of the MOU soon; they will update OERAC after their next meeting

### **Reporting Measure Recommendations for Opioid Settlements**

Weston Merrick of Minnesota Management and Budget explains how a) statewide performance measures and b) local government performance measures can be used to measure and monitor the effectiveness of the opioid settlement agreement funding, “while keeping reporting costs low for recipients.”

#### **Statewide performance measures**

How is the state or how are the state’s regions performing when it comes to preventing and treating opioid use disorder, and to supporting recovery.

#### **Local government performance measures**

How are local governments spending the opioid settlement funding? What are the outcomes based on that funding?

### **Recommendations**

Continue to use OERAC performance measures.

Ask local governments for their feedback and performance measures they would like to add.

Minnesota Department of Health, Minnesota Department of Human Services, Minnesota Management and Budget, and Minnesota Department of Corrections will continue to advise recipients and conduct the analysis for these performance measures, and in consultation with Opioid Epidemic Response Advisory Council (OERAC), Association of Minnesota Counties (AMC), and LPH.

Minnesota Management and Budget (MMB) proposes MMB will continue annual impact evaluations of up to three “innovative services to understand who is better off.” MMB proposes OERAC, AMC, and LPH provide consulting services. MMB can assist local governments in the area of planning additional evaluations, using opioid settlement funding to pay for these evaluations. Additional evaluations may be conducted with the help of internal resources or by contracting external evaluators.

Please refer to the PowerPoint presentation, *Opioid settlement agreement – draft proposal for performance measure, OER advisory council – 11/19/21*, by Weston Merrick, Senior Manager, Impact Evaluation Unit, Minnesota Management and Budget

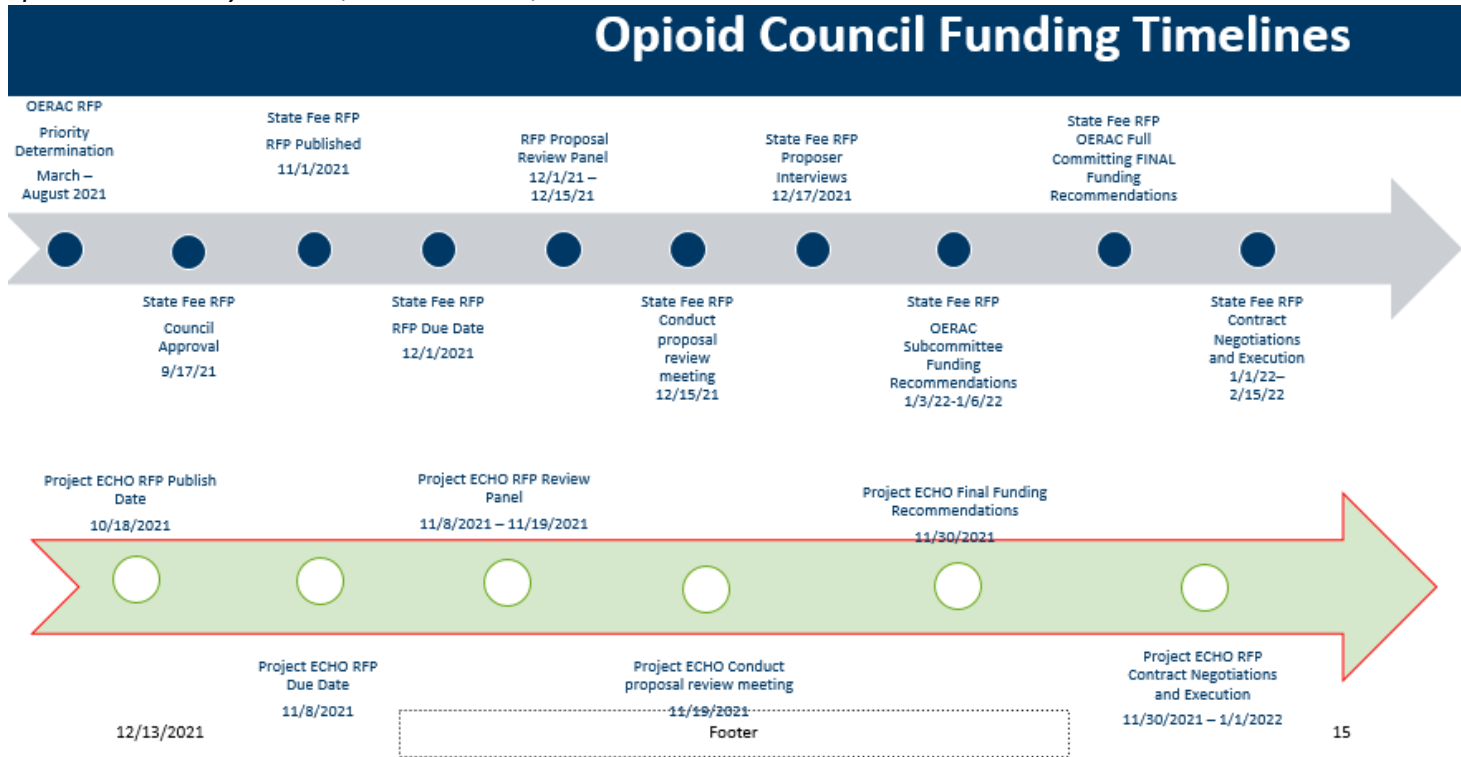
## **OERAC Request for Proposal Updates**

Boyd Brown: 9:55 AM to 10:55 AM

Boyd Brown, Grants and Contracts Supervisor, Behavioral Health Division, Department of Human Services, and his team manage the process for the OERAC grant proposals.

Boyd Brown provides an update on: Project ECHO RFP; State Fee RFP; federal block grant funding.

For **Project ECHO RFP** and **State Fee RFP** timelines, please refer to the PowerPoint presentation, *Opioid Epidemic Advisory Council, November 19, 2021*. Go to slide No. 15.



### Federal Block Grant Funding

BHD received SAMHSA’s approval for the block grant funds that will be dedicated to OERAC.

Boyd Brown explains the supplemental block grants BHD/ DHS received from SAMHSA:

**Coronavirus Response and Relief Supplement Appropriations Act (CAA)**, signed into law December 2020, directed SAMHSA to provide states COVID-19 emergency relief funding through block grants. SAMHSA has approved Minnesota’s spending plans for:

**\$22,591,036** in **additional Substance Abuse Treatment and Prevention Block Grant** funding through CAA to assist in the response to the COVID-19 pandemic. This one-time grant period is from March 15, 2021 through March 14, 2023.

**\$12,518,067** in **additional Community Mental Health Block Grant** funding through CAA to assist in the response to the COVID-19 pandemic. This one-time grant period is from March 15, 2021 through March 14, 2023.

**American Rescue Plan Act of 2021 (ARPA)**, signed into law March 2021, directed SAMHSA to provide additional funds to support states through block grants to address the effects of the COVID-19 pandemic for Americans with **mental illness and substance use disorders**. SAMHSA has approved Minnesota’s spending plans for:

**\$19,510,440** in **additional Substance Abuse Treatment and Prevention Block Grant** funding through ARPA to assist in the response to the COVID-19 pandemic. This one-time grant period is from September 1, 2021 through September 30, 2025.

**\$21,622,155** in **additional Community Mental Health Block Grant** funding through ARPA to assist in the response to the COVID-19 pandemic. This one-time grant period is from September 1, 2021 through September 30, 2025.

For **opioid epidemic response**, there are additional funds to enhance the implementation of the statewide effort to address the opioid addiction and overdose epidemic. Minnesota's allocation is: **\$5,400,000** for SFY22 and SFY23

As directed by the Minnesota Legislature in Minnesota Laws 2021, First Special Session, Chapter 7, Article 11, Section 46, **our state has allocated a total of \$5,400,000** (\$2,700,000 in FY22 and \$2,700,000 in FY23) from the substance abuse prevention and treatment block grant amount in the federal fund for grants to be awarded according to the recommendations of the Opioid Epidemic Response Advisory Council under Minnesota Statutes, section 256.042

SABG COVID-19 Supplement Funds (CAA): **\$1,114,736** through March 14, 2023

### **Opioid Warmline**

During the COVID-19 pandemic, there has been a significant increase in opioid use and overdoses in Minnesota. As a result of the opioid epidemic, the state experienced a 30% increase in opioid overdose deaths. Individuals who suffer from opioid use disorder (OUD) were not able to gather in supportive groups due to the risks associated with COVID-19 exposure. This left more individuals vulnerable to addiction, including death from an opioid overdose. The Behavioral Health Division, Minnesota Department of Human Services, identified a need for an **Opioid Warmline**, which will be equipped with telephone, text messaging, and web capabilities to respond to questions about OUD and other substance use disorders (SUD). Individuals can be referred to culturally responsive and evidence-based providers of OUD/SUD treatment services. Currently, the state does not have after-hour call support for opioid-related issues that individuals, families, or providers experience on evenings and weekends.

SABG ARPA: **\$4,285,264** through September 30, 2023 with the possibility to extend through September 30, 2025

**\$500,000** for East African culturally appropriate evidence-based opioid treatment services to a) provide more opioid treatment services and b) to provide more outreach to East African communities so that individuals with OUD can participate in opioid treatment if they need and want the treatment.

East African culturally appropriate prevention, intervention, treatment, and recovery services and increased access to these services. The services must align with federal CLAS standards for East Africans with opioid use disorder. CLAS stands for Culturally and Linguistically Appropriate Services.

East African culturally appropriate outreach to the East African communities through outreach navigators and peer recovery specialists. These services will increase understanding, acceptance, and access to culturally appropriate opioid use disorder treatment and recovery services.

**\$400,000 (approx.)** for the Leech Lake Band of Ojibwe to provide opioid treatment services and supports to their members, and to keep children of parents with OUD out of foster care. Culturally responsive drug addiction therapy for individuals with OUD and their families.

**\$3,385,264 (approx.)** remains for competitive bid. The recommendation is to use these funds to maintain the Opioid Warmline as long as possible.

## Public Comment

Kristin van Amber: 10:55 AM to 11:10 AM

Angela Reed of Turning Point draws attention to the fact that RFPs do not mention funds for COVID-19 testing, especially rapid testing. Testing would allow staff to return to their face-to-face community outreach and harm reduction work. Many providers would greatly benefit from funds for testing for COVID-19 and current mutations.

Boyd Brown of Behavioral Health Division, Department of Human Services explains that CAA and ARPA funds are COVID relief funds. This means COVID mitigation strategies can be funded through these federal block grant dollars. OERAC should consider this in their recommendations to BHD/ DHS.

## Next Steps and Meeting Wrap-up

Kristine van Amber: 11:10 AM to 11:15 AM

Assignment review: Who is going to do what?  
The next OERAC meeting is on December 17, 2021.

## Adjourn

The meeting adjourns at 11:15 AM