Call to Order and Introductions
Welcome and Call to Order

Chairperson Carrie Bridges Feliz

- Name
- Title and Organization
Where We Are Today

Select Expert and Community Representatives

Full Kick-Off Meeting

Committee Begins Funding Discussion

Refine Spending Priorities

EOHHS Reviews Recs and Begins Procurement

Elect New 2-Year Term Positions

Seek Community Nominations & Appoint Chair

EOHHS Requests Spending Authority

Review Community Needs

Engage with Community and Task Force

Submit Funding Recs to EOHHS

Submit Next Year Priorities to EOHHS

Repeat Cycle Aligned with Budget Prep

SPRING (March–June 2022)

10K RACE (July 2022–Oct 2022)

MARATHON (17+ Yrs)

Thursday, July 21, 2022
Our Meeting Agenda

I. Call to Order & Introductions

II. Recap of June Meeting and Review State Fiscal Year 2023 Existing Funding

III. Review of Letter from Ana P. Novais, Acting Secretary of Health and Human Services, and Other Letters Received
   a. Presentation of Draft Recommendations for Funding

IV. Building Consensus and Formal Vote for State Fiscal Year 2023 Funding Recommendations (Including Public Comment)

V. Overview of State Fiscal Year 2024 Budgeting Process

VI. Next Steps
   a. August Meeting: Thursday, August 25th 1:00 – 2:30PM, Location: TBA

VII. Public Comment

VIII. Adjourn

Thursday, July 21, 2022
Recap of June Meeting and Review
State Fiscal Year 2023 Existing Funding
Recap of June OSAC Meeting

• **Subject-Matter Expert Presentations:** Dennis Bailer & Dr. Brandon Marshall

• **Reviewed OSAC Guiding Principles**

• **Discussed Community Funding Priorities:**
  - EOHHS compiled all funding recommendations on a comprehensive master list, [linked here on the EOHHS website](#), including:
    1. Governor’s Overdose Prevention and Intervention Task Force (GOTF) Working Groups,
    2. 6/8 GOTF Meeting,
    3. Community Engagement Survey,
    4. Open Letter & other direct correspondence
  - EOHHS presented the most popular funding recommendations received for each strategic pillar

• **Began to Build Consensus for State Fiscal Year 2023 Funding Recommendations:**
  - EOHHS proposed draft funding recommendations with a % of funding allocated to each strategic pillar
  - OSAC considered recommendations and provided feedback on initial recommendations
Summary of Feedback Received on June Draft Recommendations

Version of EOHHS Recommendations from 6/20 Meeting
(OSAC requested EOHHS revise these initial recommendations.)

<table>
<thead>
<tr>
<th>Ensuring Racial Equity</th>
<th>Prevention</th>
<th>30%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infused Throughout</td>
<td>Rescue &amp; Harm Reduction</td>
<td>23%</td>
</tr>
<tr>
<td></td>
<td>Treatment</td>
<td>14%</td>
</tr>
<tr>
<td></td>
<td>Recovery</td>
<td>10%</td>
</tr>
<tr>
<td></td>
<td>Social Determinants of Health</td>
<td>15%</td>
</tr>
<tr>
<td></td>
<td>Effective Governance</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Data</td>
<td>6%</td>
</tr>
<tr>
<td></td>
<td>Public Communications &amp; Messaging</td>
<td></td>
</tr>
</tbody>
</table>

Feedback We Heard in June Meeting:
- EOHHS should generate new suggestions including both % and $ amounts. As is possible, call out where funding overlaps between pillars.
- Explain how investments could support or disrupt the continuum of care.
- Focus on key areas like housing, newborn intervention, harm reduction and harm reduction centers, treatment and recovery supports, workforce building, and crosscutting principles like racial equity, evidence-based strategies.
- Because we will already be receiving naloxone kits through the settlements, focus more on building naloxone distribution infrastructure rather than purchasing kits.
SFY 2023 Existing Funding Summary

- Communications & Messaging: 2%
- Data & Analytics: 10%
- Governance & Infrastructure: 2%
- Prevention: 22%
- Race Equity: 0%
- Recovery: 15%
- Rescue/Harm: 20%
- SDOH: 4%
- Treatment: 26%
Reminder: Funding Available for State Fiscal Year 2023

The Opioid Settlement Advisory Committee will make recommendations on how to spend at least $20M of funding for State Fiscal Year 2023 (July 2022 – June 2023).

Opioid Settlement Recoveries (millions) (State Fiscal Year)

<table>
<thead>
<tr>
<th>Settlements covered by R.I. Agreement Between State and All Cities and Towns</th>
<th>SFY2023</th>
</tr>
</thead>
<tbody>
<tr>
<td>Janssen/Johnson &amp; Johnson</td>
<td>$4.6 M</td>
</tr>
<tr>
<td>Distributors (AB, Card, &amp; McKesson)</td>
<td>$8.0 M</td>
</tr>
<tr>
<td>Teva</td>
<td>$13.0 M</td>
</tr>
<tr>
<td>Allergan/AbbVie</td>
<td>$2.6 M</td>
</tr>
<tr>
<td><strong>Total directly to Cities/Towns (20%, not under OSAC advisement)</strong></td>
<td>( -$8.2 M )</td>
</tr>
<tr>
<td><strong>Total to Statewide Abatement (80%)</strong></td>
<td><strong>$20.0 M</strong></td>
</tr>
</tbody>
</table>

*The annual breakdown for Purdue Pharma is still being determined.*
Review of Letter from Ana P. Novais, Acting Secretary of Health and Human Services, and Other Letters Received
Ana P. Novais, Acting Secretary of Health and Human Services, urges the Opioid Settlement Advisory Committee to reach decisions today regarding recommendations for SFY2023 opioid funding allocation.

• We simultaneously have more resources than ever before and a worsening overdose crisis that requires our swift response.

• In 2021, we lost 436 of our family members, friends, colleagues, and neighbors to accidental drug overdoses. This is higher than any year previously recorded.

• In 2022, we have already lost at least another 87 members of our community.
EOHHS-Led Efforts to Assist in Decision-Making

In response to the last Opioid Settlement Advisory Committee meeting, our EOHHS staff conducted the following activities to assist with your decision-making at the July meeting:

1. Utilize the evidence-base, where applicable, in review of community feedback

2. Review recently enacted budget items and ongoing cross-agency funding needs

3. Assess opportunities to partner across government to maximize the leveraging of funds
EOHHS will continue to partner with various agencies across government to maximize leveraging other funding to allow the opioid settlement dollars to be used most effectively. For example:

- **Department of Housing** – Alignment of ongoing and new plans for housing
- **Office of the Health Insurance Commissioner** – Review and consider rates
- **Medicaid Program** – Alignment with home and community-based settings work
- **Department of Labor and Training** – Workforce development and planning
- **Office of the Postsecondary Education Commissioner** – Youth prevention
Logistics & Guidance for Moving Forward

Collect Suggestions and Data from SMEs and Community

Summarize Suggestions and Data and Present them to OSAC

OSAC Considers Draft Recommendations from EOHHS

OSAC Votes to Determine SFY2023 Funding Recommendations

State Legal Teams Review OSAC Recs. for Alignment with Opioid Settlement Agreement

Secretary of EOHHS Reviews and Responds to OSAC Recommendations

Recommendations Included in EOHHS Budget

Purchasing Process with EOHHS/DOA

Funds are Awarded to Organizations via Competitive Bid

Evaluate the Impact of the Funding

Responsibility by Color Code

EOHHS or Other State Agencies

Opioid Settlement Advisory Committee

Notes:

- * If Secretary Novais must reject any OSAC recommendations, she will issue a written response to explain.
- ** We are not permitted to designate funds for specific organizations. On average, the purchasing process can take months.
- This process only applies to SFY23 funding because EOHHS proactively secured budget authority for this funding in the SFY23 budget process. For SFY24, recommendations will be implemented into the EOHHS budget and subject to approval from the RI General Assembly.
Potential Draft Funding Recommendations for Committee Review

The EOHHS team has prepared a recommended list of draft funding priorities for the Committee’s review that represents community-identified needs by Evidence Update Focus Area and inclusive of:

- **Evidence-based Interventions**
- **Chronic funding gaps**
- **De-duplicated efforts by aligning across agencies**
# Guiding Principles for Decision-Making

To guide decisions for use of these funds, the Committee agreed to:

<table>
<thead>
<tr>
<th>Guiding Principle</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Spend money to save lives.</strong></td>
<td>It may be tempting to use the dollars to fill holes in existing budgets rather than expand needed programs, but the Committee should use the funds to add to rather than replace existing spending.</td>
</tr>
<tr>
<td><strong>Use evidence to guide spending.</strong></td>
<td>At this point in the overdose epidemic, researchers, clinicians, and community partners have built a substantial body of evidence demonstrating what works and what does not. States and localities should use this information to make funding decisions.</td>
</tr>
<tr>
<td><strong>Invest in youth prevention.</strong></td>
<td>Support children, youth, and families by making long-term investments in effective programs and strategies for community change.</td>
</tr>
<tr>
<td><strong>Focus on racial equity.</strong></td>
<td>This process should be guided by public health leaders with the active engagement of people and families with lived experience, clinicians, as well as other key groups.</td>
</tr>
<tr>
<td><strong>Develop a fair and transparent process for funding recommendations.</strong></td>
<td>This process should be guided by public health leaders with the active engagement of people and families with lived experience, clinicians, as well as other key groups.</td>
</tr>
<tr>
<td><strong>Consider future sustainability in all recommendations.</strong></td>
<td>Although there may be some on-time funding recommendations, the Committee should consider the financial sustainability of all investments and try to plan for investments that can be sustained long-term.</td>
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</tbody>
</table>

*The first five items are paraphrased and summarized from the Johns Hopkins’ “The Principles To Guide Jurisdictions In The Use Of Funds From The Opioid Litigation, We Encourage The Adoption Of Five Guiding Principles”.*
Based on the collected input EOHHS collected from subject matter experts, the community, and the discussion in the June meeting, the following themes have received the most support. Some items map to multiple categories and are listed twice.

<table>
<thead>
<tr>
<th>Prevention</th>
<th>Rescue / Harm Reduction</th>
<th>Social Determinants of Health</th>
<th>Data &amp; Analytics</th>
</tr>
</thead>
</table>
| o Injury and Pain Management  
o SubstanceExposed Newborn Interventions  
o Youth Prevention | o Expand Street Outreach  
o Justice Reform  
o Harm Reduction Culture Change  
o Technology Innovations  
o Trauma Supports  
o Alternative Post-Overdose Engagement | o Housing Capital & Operating  
o Build Family Recovery Capital  
o Expand Street Outreach  
o Basic Needs Provision | o Enhanced Surveillance  
o Staff Augmentation |

<table>
<thead>
<tr>
<th>Treatment</th>
<th>Recovery</th>
<th>Governance / Infrastructure</th>
<th>Race Equity</th>
</tr>
</thead>
</table>
| o Rate Improvements  
o Treatment Infrastructure  
o Treatment Alternatives | o Building Family Recovery Capital  
o Housing Operating  
o Basic Needs Provision  
o Recovery Capital and Supports | o Non-Profit Capacity Building  
o Justice Reform | o Expand Street Outreach  
o Treatment Access  
o Data Improvements |

Thursday, July 21, 2022
Recommended Draft Funding Approach for Committee Discussion

$18.75M Allocated below + $1.25M for Governance = $20M Total

**Social Determinants**
- First Responder/Peer Recovery Specialist Trauma Supports ($1.0 M)
- Basic Needs Provision for High-Risk Clients and Community Members ($700,000)
- Housing Capital, Operating, and Services for High-Risk Communities ($1.75 M)

**Harm Reduction**
- Expanded Street Outreach—including Undocumented Resident Engagement ($1.5 M)
- Harm Reduction Centers Infrastructure and Technologies ($2.25 M)
- Alternative Post-Overdose Engagement Strategies ($750,000)

**Treatment**
- BIPOC Industry Workers and Chronic Pain Treatment and Prevention ($500,000)
- Bricks & Mortar Facility Investments, Treatment On-Demand, and Contingency Management ($1.5 M)
- Additional SUD Provider Investments ($800,000)

**Recovery**
- Recovery Capital and Supports—including Family Recovery Supports ($900,000)
- Substance-Exposed Newborns Interventions and Infrastructure ($600,000)
- Recovery Housing Incentives ($500,000)

**Prevention**
- Enhanced Surveillance and Communications (e.g., Race/Ethnicity Data and Multilingual Media) ($1.0 M)
- Project Success Expansion for School Mental Health ($4.0 M)
- Non-Profit Capacity Building and Technical Assistance ($1.0 M)
How Draft Proposals Would Support Clients Through the Continuum of Care

Social Determinants
- $3.45 Million (17%)
- Investing in foundational needs for the community and our responders

Harm Reduction
- $4.5 Million (23%)
- Investing in lifesaving initiatives while we redesign systems

Treatment
- $2.8 Million (14%)
- Investing in necessary treatment infrastructure and access needs

Recovery
- $2.0 Million (10%)
- Investing in supportive environments to promote healthy living

Prevention
- $6.0 M (30%)
  Investing in our youth, community partners, and systems to curb substance misuse and addiction.

Thursday, July 21, 2022
Building Consensus and Formal Vote for State Fiscal Year 2023 Funding Recommendations

(Including Public Comment)
The Opioid Settlement Advisory Committee will be using a Modified Consensus-Building Approach.

Recommendations will be reviewed, discussion will be held, and intermittent polls for consensus using the cards shown will be taken. Once modified consensus is achieved, a motion for a vote will be requested, as will a second.

<table>
<thead>
<tr>
<th>THUMBS UP:</th>
<th>NO THUMBS:</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Strongly agree with the proposal</td>
<td>- Abstaining from vote (e.g., potential conflict, no</td>
</tr>
<tr>
<td>at hand as initially presented.</td>
<td>preference)</td>
</tr>
<tr>
<td>- No questions or concerns remaining and fully ready to vote.</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>THUMBS SIDEWAYS:</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>- Can live with the proposal at hand as initially presented and/or modified.</td>
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<tr>
<td>- Limited questions or concerns remaining and generally ready to vote.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>THUMBS DOWN:</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>- Cannot live with the proposal at hand as initially presented and/or modified.</td>
<td></td>
</tr>
<tr>
<td>- Several questions or concerns remaining and not ready to vote.</td>
<td></td>
</tr>
</tbody>
</table>
Pause for Brief Public Comment

5 Minutes
Formal Vote
Overview of State Budget Development and Procurement Process for State Fiscal Year 2024
### Funding Available:
- Currently $10.3M (Distributors, Teva, Allergan, J&J) but likely to be more
- Purdue Pharma $ still TBD and could increase this
- Remaining Opioid Stewardship and McKinsey funds will also increase this amount

### Sustaining SFY23 Funded Items
- There may be items from the SFY23 recommendations that *may require* additional funding to sustain. We will know more about this once OSAC votes on SFY23 recommendations.

### Timeline:
- August, September, & October OSAC meetings
- Goal is to have recommendations ready to add to EOHHS budget in October

### Process
- We already have the highest priorities from SMEs and the community documented
- Unlike the SFY23 process, SFY24 will require approval by the RI General Assembly as part of EOHHS’s annual budgeting process
Next Steps

August Meeting:
Thursday, August 25th 1:00 – 2:30PM, Location: TBA
Where We Are Headed Next Meeting

- Select Expert and Community Representatives
- Full Kick-Off Meeting
- Committee Begins Funding Discussion
- Refine Spending Priorities
- EOHHS Reviews Recs and Begins Procurement
- Elect New 2-Year Term Positions

SPRINT (March–June 2022)
- Seek Community Nominations & Appoint Chair
- EOHHS Requests Spending Authority
- Review Community Needs
- Engage with Community and Task Force
- Submit Funding Recs to EOHHS

10K RACE (July 2022—Oct 2022)

Submit Next Year Priorities to EOHHS

Repeat Cycle Aligned with Budget Prep

MARATHON (17+ Yrs)

Thursday, July 21, 2022
Public Comment
THANK YOU

Opioid Settlement Advisory Committee Chairperson:
Carrie Bridges Feliz, MPH
Vice President, Community Health and Equity
Lifespan
335R Prairie Avenue, Suite 2B | Providence, RI 02905
Phone: 401-444-8009
cbridgesfeliz@lifespan.org
Appendix
## Crosswalk of Evidence Update and Settlement Priorities

**Green Font = Priority 1: Core Abatement Strategies / Grey Font = Allowable Uses**

<table>
<thead>
<tr>
<th>Ensuring Racial Equity</th>
<th>Prevention</th>
<th>Rescue &amp; Harm Reduction</th>
<th>Treatment</th>
<th>Recovery</th>
<th>Social Determinants of Health</th>
<th>Effective Governance</th>
<th>Data</th>
<th>Public Communications &amp; Messaging</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Prevention Programs</td>
<td>• Naloxone Or Other FDA-approved Drug To Reverse Opioid Overdoses</td>
<td>• Medication-assisted Treatment (“MAT”) Distribution And Other Opioid-related Treatment</td>
<td>• Expansion Of Warm Hand-off Programs And Recovery Services</td>
<td>• Pregnant &amp; Postpartum Women</td>
<td>• Analyzing The Effectiveness Of The Abatement Strategies Within The State</td>
<td>• Evidence-based Data Collection And Research</td>
<td>• Public Media Campaigns</td>
</tr>
<tr>
<td></td>
<td>• Prevent Overprescribing and Ensure Appropriate Prescribing And Dispensing of Opioids</td>
<td>• Expanding Syringe Service Programs</td>
<td>• Expanding Treatment For Neonatal Abstinence Syndrome (“NAS”)</td>
<td>• Support People In Treatment And Recovery</td>
<td>• Address The Needs Of Criminal Justice-involved Persons</td>
<td>• Leadership, Planning And Coordination</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Prevent Misuse Of Opioids</td>
<td>• Prevent Overdose Deaths And Other Harms (Harm Reduction)</td>
<td>• Treatment For Incarcerated Population</td>
<td></td>
<td>• Address The Needs Of Pregnant Or Parenting Women And Their Families, Including Babies With Neonatal Abstinence Syndrome</td>
<td>• Training</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **Ensuring Racial Equity**
- **Prevention**
  - Prevention Programs
  - Prevent Overprescribing and Ensure Appropriate Prescribing And Dispensing of Opioids
  - Prevent Misuse Of Opioids
- **Rescue & Harm Reduction**
  - Naloxone Or Other FDA-approved Drug To Reverse Opioid Overdoses
  - Expanding Syringe Service Programs
  - Prevent Overdose Deaths And Other Harms (Harm Reduction)
  - First Responders
- **Treatment**
  - Medication-assisted Treatment (“MAT”) Distribution And Other Opioid-related Treatment
  - Expanding Treatment For Neonatal Abstinence Syndrome (“NAS”)
  - Treatment For Incarcerated Population
- **Recovery**
  - Expansion Of Warm Hand-off Programs And Recovery Services
  - Support People In Treatment And Recovery
- **Social Determinants of Health**
  - Pregnant & Postpartum Women
  - Address The Needs Of Criminal Justice-involved Persons
  - Address The Needs Of Pregnant Or Parenting Women And Their Families, Including Babies With Neonatal Abstinence Syndrome
- **Effective Governance**
  - Analyzing The Effectiveness Of The Abatement Strategies Within The State
  - Leadership, Planning And Coordination
  - Training
  - Research
- **Data**
  - Evidence-based Data Collection And Research
- **Public Communications & Messaging**
  - Public Media Campaigns

**Thursday, July 21, 2022**
## Community Input on Funding Recommendations

EOHHS solicited recommendations from several different sources and compiled them into one comprehensive report for the Opioid Settlement Advisory Committee to review.

### GOTF Working Group Funding Priorities

- Each GOTF Working Group Chair completed slides indicating their top 5 funding priorities ([linked here](#)).

### GOTF June Meeting Discussion

- At the 6/8 GOTF meeting, attendees were encouraged to add their funding recommendations in the meeting chat or discuss verbally during the public comment time.

### Open Letter from the Community

- Several community harm reduction and treatment organizations composed an Open Letter to the Opioid Settlement Advisory Committee summarizing their requests for funding. Seven organizational partners and 54 individuals have signed on to this letter, and they shared the letter with the Advisory Committee on June 17, 2022.

### Community Engagement Survey

- Everyone at the 6/8 GOTF meeting and on the GOTF distribution list was encouraged to complete a survey to share their suggested funding priorities. The survey was live and accepting recommendations for about a week and received over 30 responses.
## Evidence Update

<table>
<thead>
<tr>
<th>Focus Area</th>
<th>Running Total</th>
<th>Community-Identified and EOHHS Prioritized Need</th>
<th>Recommended Funding Level</th>
<th>Recommended Funding Level</th>
<th>% of Total</th>
<th>Running Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Social Determinants</strong></td>
<td>$3,450,000</td>
<td>First Responder/Peer Recovery Specialist Trauma Supports</td>
<td>$1.0 M</td>
<td>$1,000,000</td>
<td>5%</td>
<td>$1,000,000</td>
</tr>
<tr>
<td></td>
<td>$3,450,000</td>
<td>Basic Needs Provision for High-Risk Clients and Community Members</td>
<td>$700,000</td>
<td>$700,000</td>
<td>4%</td>
<td>$1,700,000</td>
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<tr>
<td></td>
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<td>Housing Capital, Operating, and Services for High-Risk Communities</td>
<td>$1.75 M</td>
<td>$1,750,000</td>
<td>9%</td>
<td>$3,450,000</td>
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<tr>
<td><strong>Harm Reduction</strong></td>
<td>$4,500,000</td>
<td>Expanded Street Outreach—including Undocumented Resident Engagement</td>
<td>$1.5 M</td>
<td>$1,500,000</td>
<td>8%</td>
<td>$4,950,000</td>
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<tr>
<td></td>
<td>$7,950,000</td>
<td>Harm Reduction Centers Infrastructure and Technologies</td>
<td>$2.25 M</td>
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<td>11%</td>
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<tr>
<td></td>
<td></td>
<td>Alternative Post-Overdose Engagement Strategies</td>
<td>$750,000</td>
<td>$750,000</td>
<td>4%</td>
<td>$7,950,000</td>
</tr>
<tr>
<td><strong>Treatment</strong></td>
<td>$2,800,000</td>
<td>BIPOC Industry Workers and Chronic Pain Treatment and Prevention</td>
<td>$500,000</td>
<td>$500,000</td>
<td>3%</td>
<td>$8,450,000</td>
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<tr>
<td></td>
<td>$10,750,000</td>
<td>Bricks &amp; Mortar Facility Investments, Treatment On-Demand, and Contingency Management</td>
<td>$1.5 M</td>
<td>$1,500,000</td>
<td>8%</td>
<td>$9,950,000</td>
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<td>Additional Substance Use Disorder (SUD) Provider Investments</td>
<td>$800,000</td>
<td>$800,000</td>
<td>4%</td>
<td>$10,750,000</td>
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<tr>
<td><strong>Recovery</strong></td>
<td>$2,000,000</td>
<td>Recovery Capital and Supports—including Family Recovery Supports</td>
<td>$900,000</td>
<td>$900,000</td>
<td>5%</td>
<td>$11,650,000</td>
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<tr>
<td></td>
<td>$12,750,000</td>
<td>Substance-Exposed Newborn Interventions and Infrastructure</td>
<td>$600,000</td>
<td>$600,000</td>
<td>3%</td>
<td>$12,250,000</td>
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<tr>
<td></td>
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<td>Recovery Housing Incentives</td>
<td>$500,000</td>
<td>$500,000</td>
<td>3%</td>
<td>$12,750,000</td>
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<tr>
<td><strong>Prevention</strong></td>
<td>$6,000,000</td>
<td>Enhanced Surveillance and Communications (e.g., Race/Ethnicity Data and Multilingual Media)</td>
<td>$1.0 M</td>
<td>$1,000,000</td>
<td>5%</td>
<td>$13,750,000</td>
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<tr>
<td></td>
<td>$18,750,000</td>
<td>Project Success Expansion for School Mental Health</td>
<td>$4.0 M</td>
<td>$4,000,000</td>
<td>20%</td>
<td>$17,750,000</td>
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<td>Non-Profit Capacity Building and Technical Assistance</td>
<td>$1.0 M</td>
<td>$1,000,000</td>
<td>5%</td>
<td>$18,750,000</td>
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<td><strong>Governance</strong></td>
<td>$1,250,000</td>
<td>Project Evaluation</td>
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<td>$500,000</td>
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<td>$19,250,000</td>
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<td>$20,000,000</td>
<td>Emergency Response Set-aside</td>
<td>$500,000</td>
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<td>Program Administration</td>
<td>$250,000</td>
<td>$250,000</td>
<td>1%</td>
<td>$20,000,000</td>
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