



Opioid Settlement Advisory Committee

Thursday, July 21, 2022

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Call to Order and Introductions

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Welcome and Call to Order

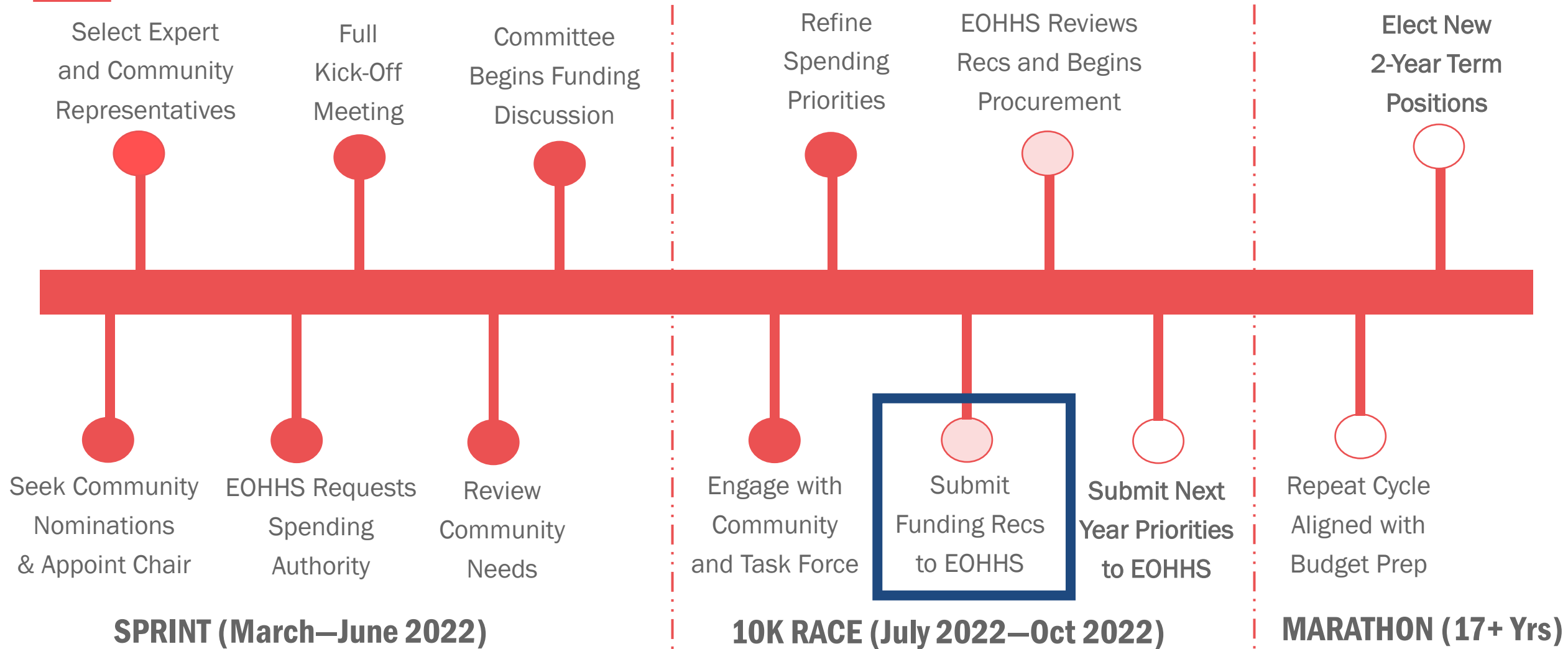


Chairperson Carrie Bridges Feliz



- **Name**
- **Title and Organization**

Where We Are Today



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





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 one 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

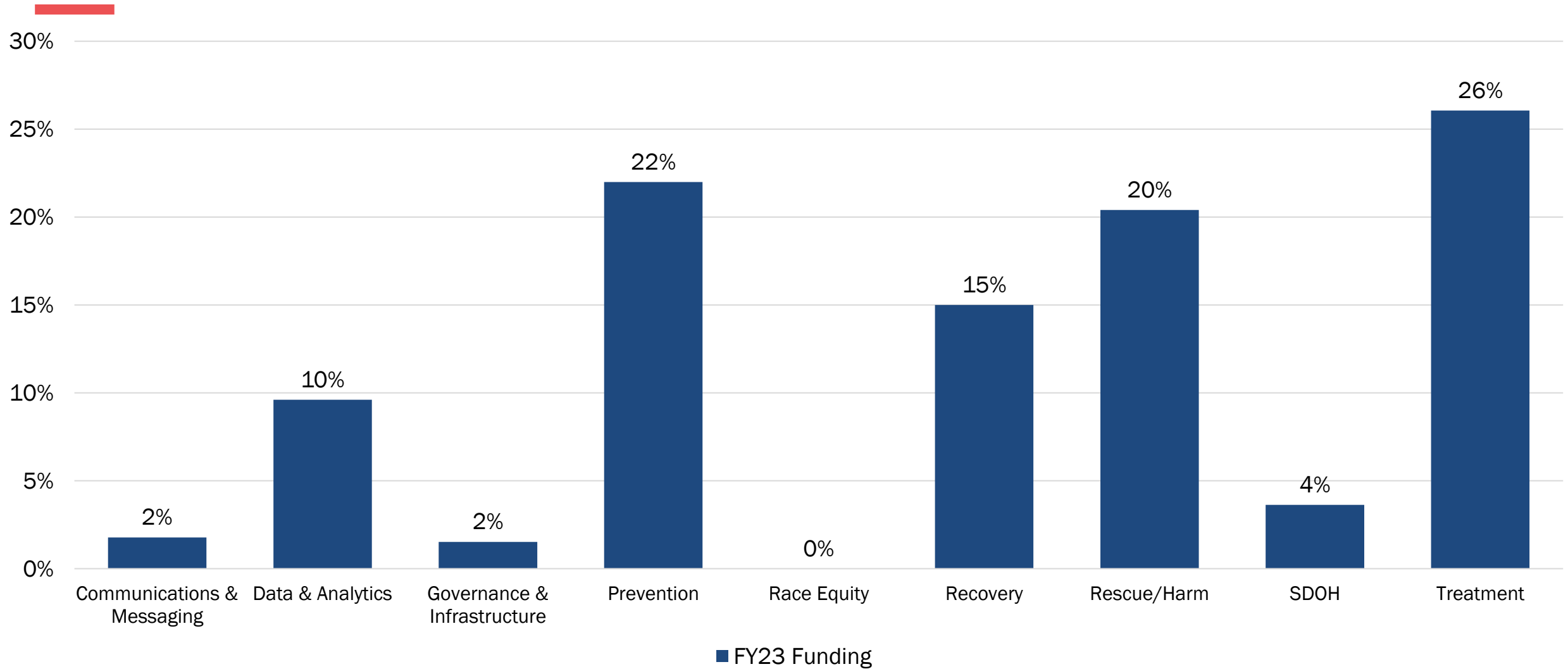
(OSAC requested EOHHS revise these initial recommendations.)

Ensuring Racial Equity	Infused Throughout	Prevention	30%
		Rescue & Harm Reduction	23%
		Treatment	14%
		Recovery	10%
		Social Determinants of Health	15%
		Effective Governance	6%
		Data	
		Public Communications & Messaging	

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



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

**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

Urgency & Timing

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

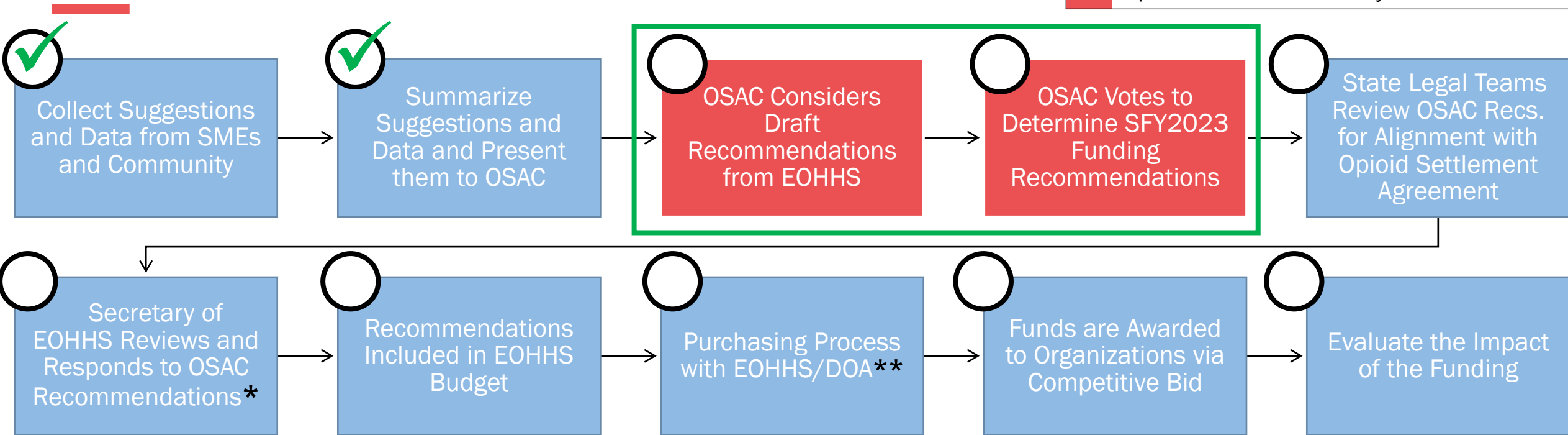
State Agency Partnerships to Leverage Funding

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

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.

Presentation of Draft Recommendations

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:

Spend money to save lives.

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.

Use evidence to guide spending.

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.

Invest in youth prevention.

Support children, youth, and families by making long-term investments in effective programs and strategies for community change.

Focus on racial equity.

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

Develop a fair and transparent process for funding recommendations.

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.

Consider future sustainability in all recommendations.

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.

**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".*

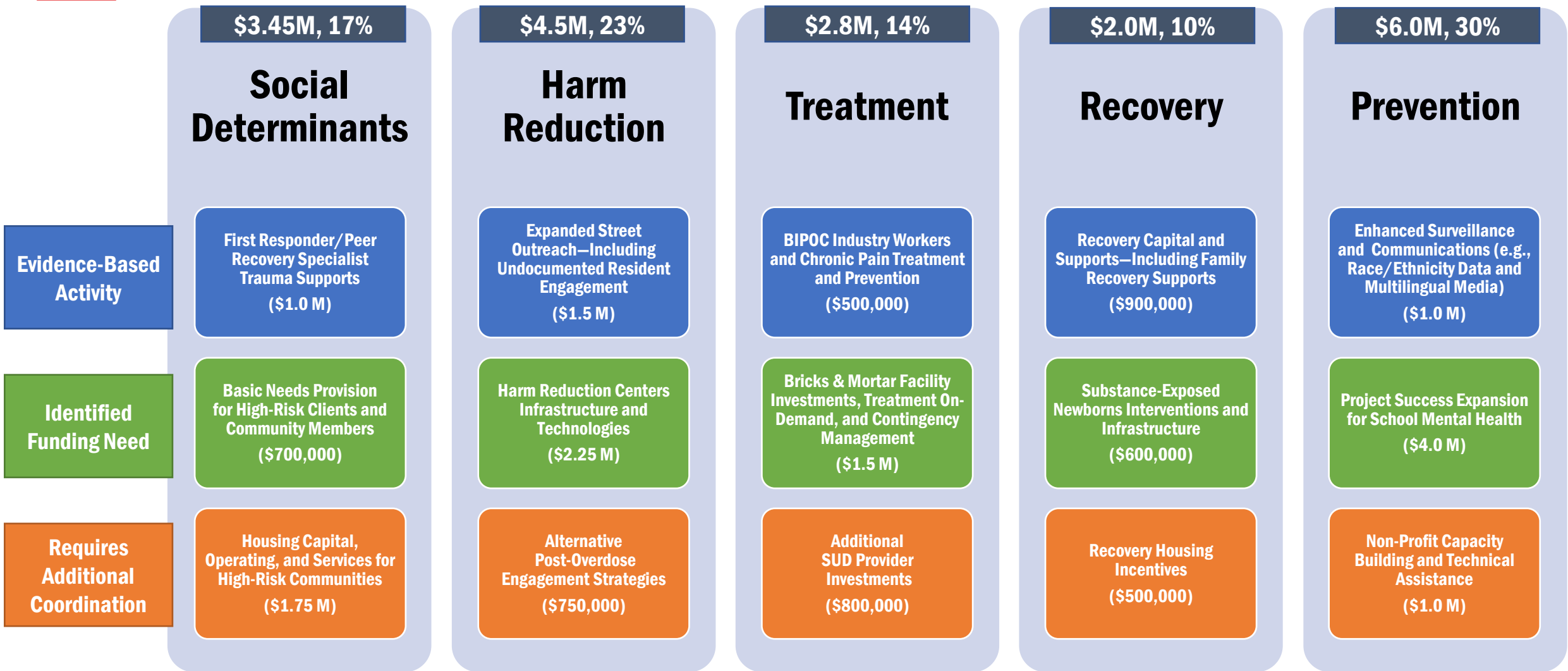
Work Group & Community Proposed Themes with the Most Support

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.

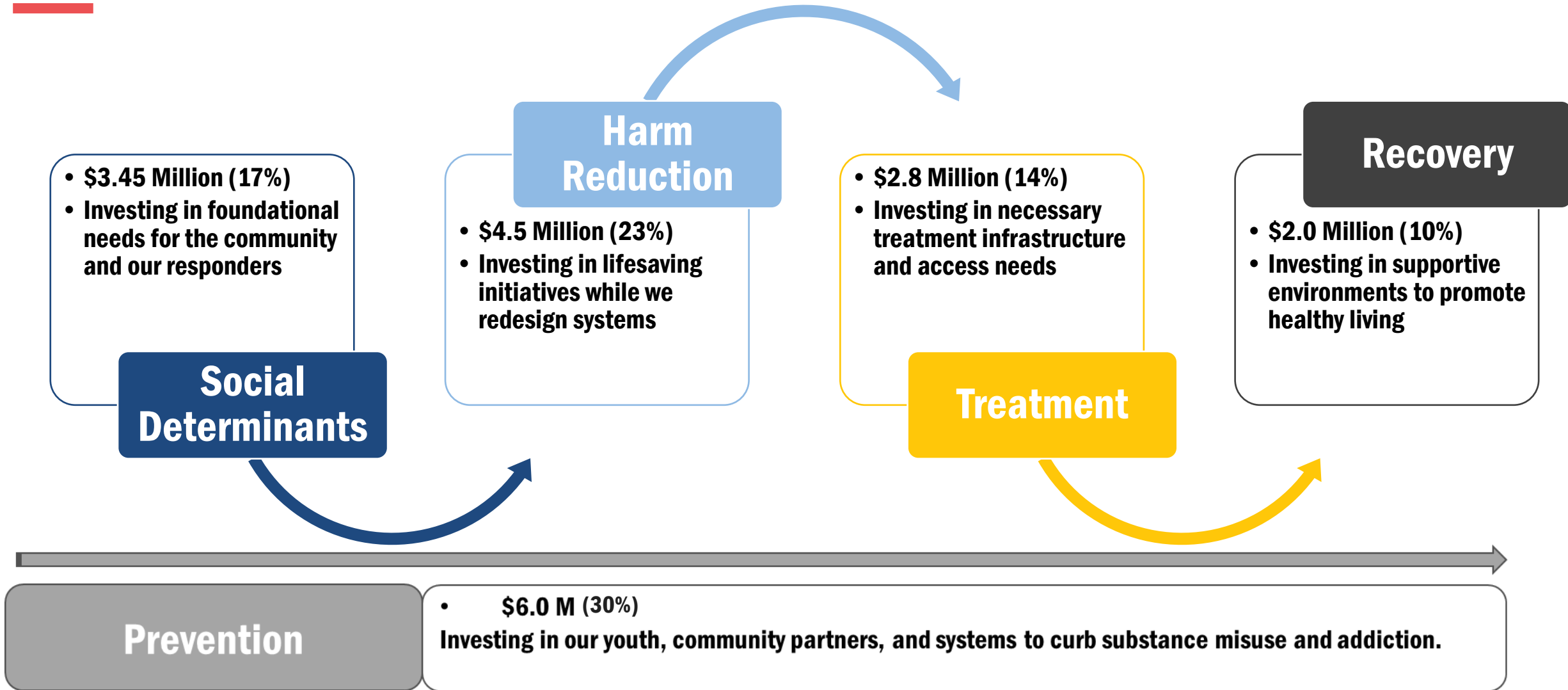
Prevention	Rescue / Harm Reduction	Social Determinants of Health	Data & Analytics
<ul style="list-style-type: none"> ○ Injury and Pain Management ○ Substance Exposed Newborn Interventions ○ Youth Prevention 	<ul style="list-style-type: none"> ○ Expand Street Outreach ○ Justice Reform ○ Harm Reduction Culture Change ○ Technology Innovations ○ Trauma Supports ○ Alternative Post-Overdose Engagement 	<ul style="list-style-type: none"> ○ Housing Capital & Operating ○ Build Family Recovery Capital ○ Expand Street Outreach ○ Basic Needs Provision 	<ul style="list-style-type: none"> ○ Enhanced Surveillance ○ Staff Augmentation
Treatment	Recovery	Governance / Infrastructure	Race Equity
<ul style="list-style-type: none"> ○ Rate Improvements ○ Treatment Infrastructure ○ Treatment Alternatives 	<ul style="list-style-type: none"> ○ Building Family Recovery Capital ○ Housing Operating ○ Basic Needs Provision ○ Recovery Capital and Supports 	<ul style="list-style-type: none"> ○ Non-Profit Capacity Building ○ Justice Reform 	<ul style="list-style-type: none"> ○ Expand Street Outreach ○ Treatment Access ○ Data Improvements

Recommended Draft Funding Approach for Committee Discussion

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



How Draft Proposals Would Support Clients Through the Continuum of Care





Building Consensus and Formal Vote for State Fiscal Year 2023 Funding Recommendations

(Including Public Comment)

Reminder: Consensus-Building Approach

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.



THUMBS UP:

- Strongly agree with the proposal at hand as initially presented.
- No questions or concerns remaining and fully ready to vote.



THUMBS SIDWAYS:

- Can live with the proposal at hand as initially presented and/or modified.
- Limited questions or concerns remaining and generally ready to vote.



THUMBS DOWN:

- Cannot live with the proposal at hand as initially presented and/or modified.
- Several questions or concerns remaining and not ready to vote.



NO THUMBS:

- Abstaining from vote (e.g., potential conflict, no preference)



Pause for Brief Public Comment

5 Minutes

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Formal Vote



Overview of State Budget Development and Procurement Process for State Fiscal Year 2024

Making Recommendations 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

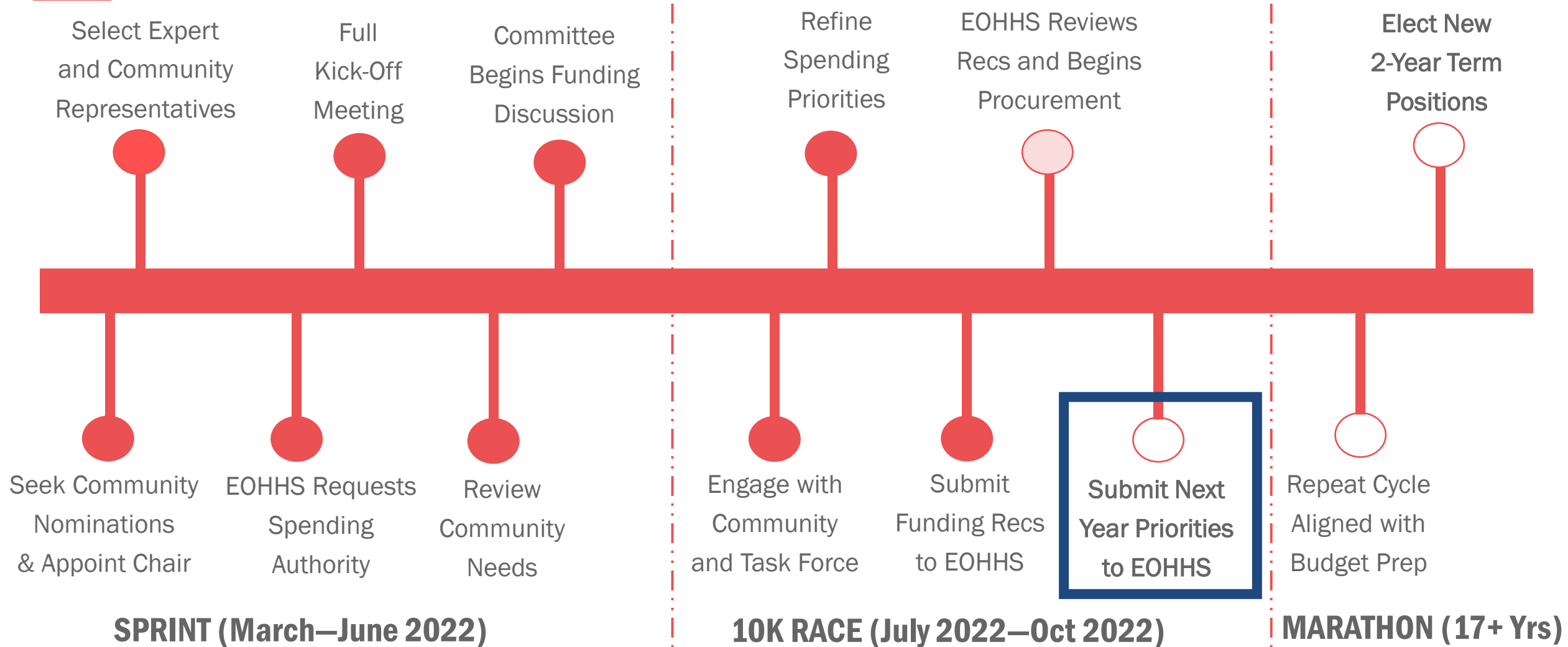


August Meeting:

Thursday, August 25th 1:00 – 2:30PM, Location: TBA

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Where We Are Headed Next Meeting



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

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Appendix

Crosswalk of Evidence Update and Settlement Priorities

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

Ensuring Racial Equity	Prevention	<ul style="list-style-type: none"> Prevention Programs Prevent Overprescribing and Ensure Appropriate Prescribing And Dispensing of Opioids Prevent Misuse Of Opioids
	Rescue & Harm Reduction	<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> Medication-assisted Treatment (“MAT”) Distribution And Other Opioid-related Treatment Expanding Treatment For Neonatal Abstinence Syndrome (“NAS”) Treatment For Incarcerated Population
	Recovery	<ul style="list-style-type: none"> Expansion Of Warm Hand-off Programs And Recovery Services Support People In Treatment And Recovery
	Social Determinants of Health	<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> Analyzing The Effectiveness Of The Abatement Strategies Within The State Leadership, Planning And Coordination Training Research
	Data	<ul style="list-style-type: none"> Evidence-based Data Collection And Research
	Public Communications & Messaging	<ul style="list-style-type: none"> Public Media Campaigns

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.

EOHHS Draft Recommendations - Alternate View

Evidence Update Focus Area	Running Total	Community-Identified and EOHHS Prioritized Need	Recommended Funding Level	Recommended Funding Level	% of Total	Running Total
<i>Social Determinants</i> \$3,450,000	\$3,450,000	First Responder/Peer Recovery Specialist Trauma Supports	\$1.0 M	\$1,000,000	5%	\$1,000,000
		Basic Needs Provision for High-Risk Clients and Community Members	\$700,000	\$700,000	4%	\$1,700,000
		Housing Capital, Operating, and Services for High-Risk Communities	\$1.75 M	\$1,750,000	9%	\$3,450,000
<i>Harm Reduction</i> \$4,500,000	\$7,950,000	Expanded Street Outreach—including Undocumented Resident Engagement	\$1.5 M	\$1,500,000	8%	\$4,950,000
		Harm Reduction Centers Infrastructure and Technologies	\$2.25 M	\$2,250,000	11%	\$7,200,000
		Alternative Post-Overdose Engagement Strategies	\$750,000	\$750,000	4%	\$7,950,000
<i>Treatment</i> \$2,800,000	\$10,750,000	BIPOC Industry Workers and Chronic Pain Treatment and Prevention	\$500,000	\$500,000	3%	\$8,450,000
		Bricks & Mortar Facility Investments, Treatment On-Demand, and Contingency Management	\$1.5 M	\$1,500,000	8%	\$9,950,000
		Additional Substance Use Disorder (SUD) Provider Investments	\$800,000	\$800,000	4%	\$10,750,000
<i>Recovery</i> \$2,000,000	\$12,750,000	Recovery Capital and Supports—including Family Recovery Supports	\$900,000	\$900,000	5%	\$11,650,000
		Substance-Exposed Newborn Interventions and Infrastructure	\$600,000	\$600,000	3%	\$12,250,000
		Recovery Housing Incentives	\$500,000	\$500,000	3%	\$12,750,000
<i>Prevention</i> \$6,000,000	\$18,750,000	Enhanced Surveillance and Communications (e.g., Race/Ethnicity Data and Multilingual Media)	\$1.0 M	\$1,000,000	5%	\$13,750,000
		Project Success Expansion for School Mental Health	\$4.0 M	\$4,000,000	20%	\$17,750,000
		Non-Profit Capacity Building and Technical Assistance	\$1.0 M	\$1,000,000	5%	\$18,750,000
<i>Governance</i> \$1,250,000	\$20,000,000	Project Evaluation	\$500,000	\$500,000	3%	\$19,250,000
		Emergency Response Set-aside	\$500,000	\$500,000	3%	\$19,750,000
		Program Administration	\$250,000	\$250,000	1%	\$20,000,000