

Opioid Settlement Advisory Committee



Wednesday, May 28, 2025

**RHODE
ISLAND**

Call to Order & Introductions

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Welcoming to New Committee Members

- Samantha Binienda – Peer Recovery Specialist/Community Health Worker, Parent Support Network, RI
- Katie Hansen – Director of Outpatient Services, Thrive Behavioral Health
- Chief Humphrey Donnelly IV – Chief of Newport Fire Department
- Maria Santos – Real Estate Agent
- Shawn Lacey – Town Manager of Westerly

Our Meeting Agenda



- I. Call to Order, Introductions, & Welcome New Members
- II. Review of Minutes
- III. Facilitated Conversation around National Trends
 - Sara Whaley, MSW, MPH, MA, Executive Director of Overdose Response, Baltimore
 - Kristen Pendergrass, MSW, Vice President, State Policy, Shatterproof
- IV. Community Conversations and Workgroup Recommendations
 - Cathy Schultz, MPH, Director of Overdose Task Force, Executive Office of Health and Human Services
- V. Public Comment
- VI. Next Steps/Adjourn

Facilitated Conversations around National Trends

Sara Whaley, Executive Director of Overdose
Response, Baltimore

Kristen Pendergrass, Vice President, State Policy,
Shatterproof

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Sara Whaley, MSW, MPH, MA, Executive
Director of Overdose Response, Baltimore



Kristen Pendergrass, MSW, Vice
President, State Policy, Shatterproof



Opioid Settlement Funds: A National Perspective of Current Challenges

Sara Whaley

Baltimore City

Kristen Pendergrass

Shatterproof

The Principles for the Use of Funds from the Opioid Litigation

Nationally Recognized Guidance for opioid settlement funds, The Principles were developed by a coalition of organizations across the spectrum of the substance use field including physicians, addiction medicine specialists, recovery, treatment, and harm reduction.

These Principles have been [endorsed by over 60 different organizations](#) and have been incorporated into settlement planning in over 25 states.



American Academy of
Addiction Psychiatry
Transforming Lives.



National
Association
for Behavioral
Healthcare
Access. Care. Recovery.



COLUMBIA
MAILMAN SCHOOL OF PUBLIC HEALTH
EPIDEMIOLOGY

AIR
INSTITUTES FOR RESEARCH*



NATIONAL COUNCIL
for Mental Wellbeing
HEALTHY MINDS • STRONG COMMUNITIES

NATIONAL
HARM REDUCTION
COALITION



Duke
MARGOLIS CENTER
for Health Policy



PPH
INSTITUTES OF SCHOOLS &
PUBLIC HEALTH



The Coalition

FACES & VOICES
OF RECOVERY
ADVOCATE. ACT. ADVANCE.

FXB Center
for Health & Human
Behavior at Harvard University

DGE

Center for Prescription Drug
Abuse Prevention
SPOKES SCHOOL OF PHARMACY
AND PHARMACEUTICAL SCIENCES
UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS

Partnership
to End Addiction



LAC LEGAL ACTION CENTER
Breaking Barriers. Doing Good.

The Principles for the Use of Funds from the Opioid Litigation

1

- Spend Money to Save Lives

2

- Use Evidence to Guide Spending

3

- Invest in Youth Prevention

4

- Focus on Racial Equity

5

- Develop a Fair and Transparent Process

Fair and Transparent Process

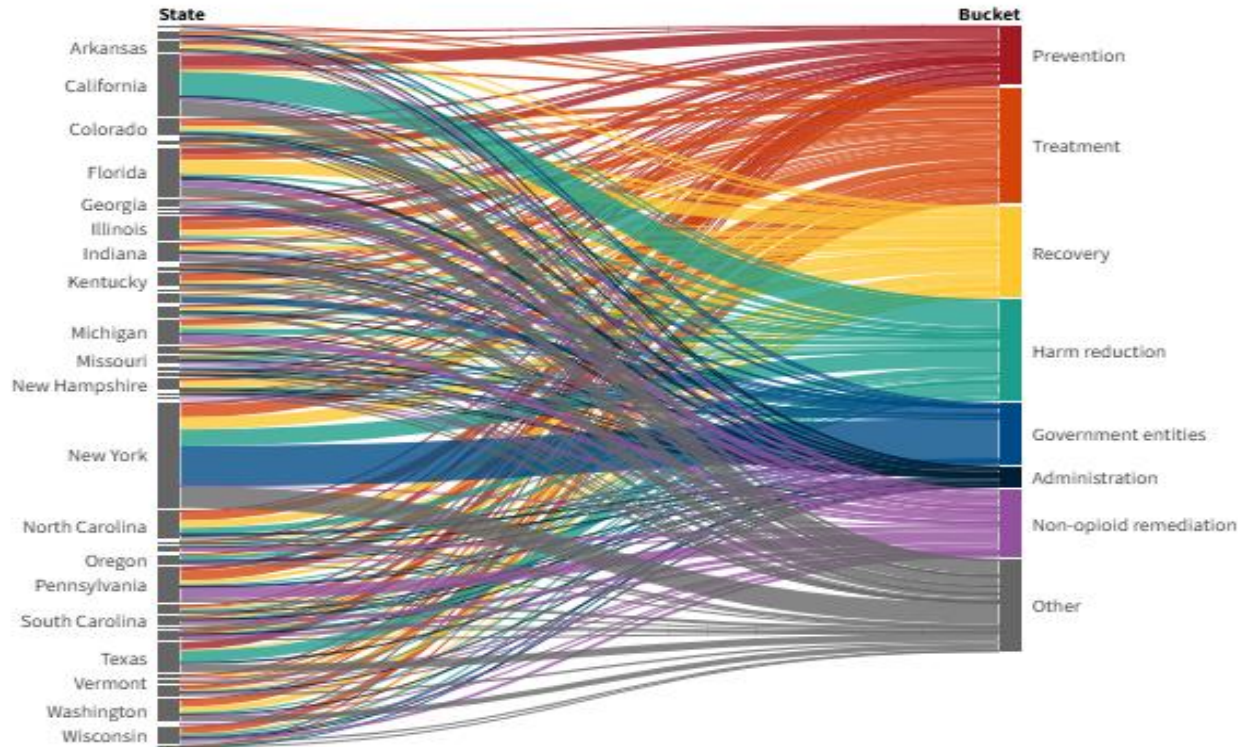


Tracking



State and local governments publicly reported spending or committing more than \$2.1 billion in opioid settlements in 2022 and 2023. We categorized those expenditures into the main buckets of spending that legal experts, public health officials, and researchers recognize: prevention, treatment, recovery, and harm reduction. We added more buckets for clarity.

Click on states or buckets to explore more about how opioid settlement money was spent in 2022 and 2023.

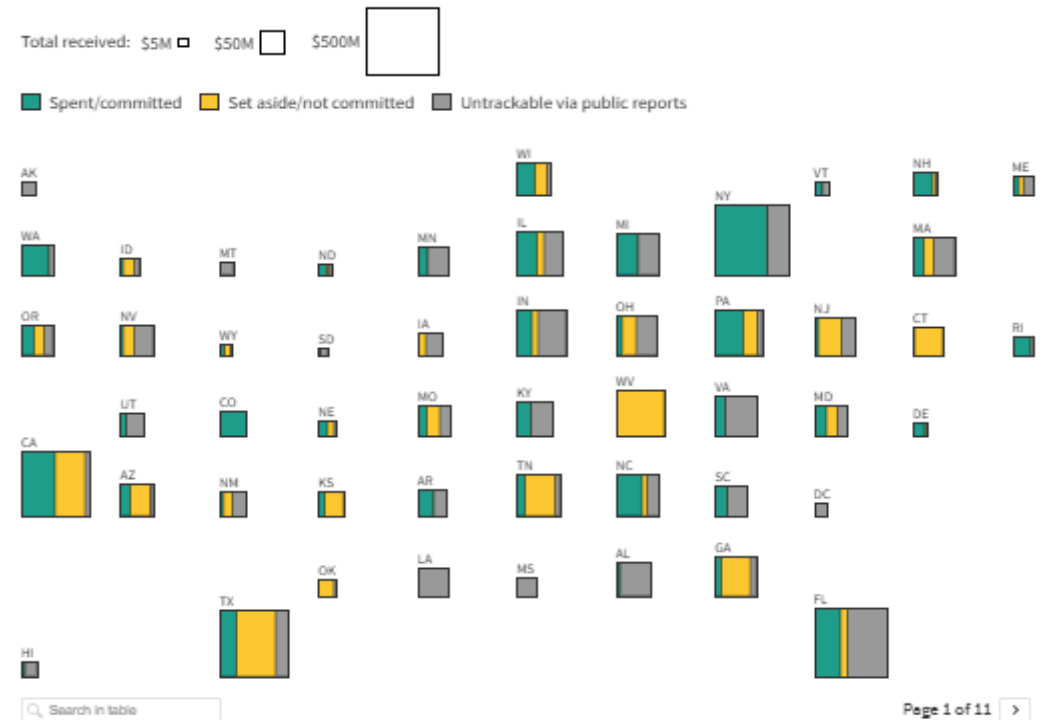


Note: Data collected as of August 2024. It reflects government actions as of Dec. 31, 2023. • [Read our methodology](#) • [Download the data](#) • [Read state responses](#)

Source: Data collection by KFF Health News, Johns Hopkins Bloomberg School of Public Health, Shatterproof
 Credit: KFF Health News' Lydia Zuraw, Aneri Pattani, Henry Larweh, and Megan Kalata; Johns Hopkins Bloomberg School of Public Health's Sara Whaley and Vivian Flanagan; Shatterproof's Kristen Pendergrass and Sahvanah Prescott

State and Local Governments Received More Than \$6 Billion in Opioid Settlements in 2022 and 2023

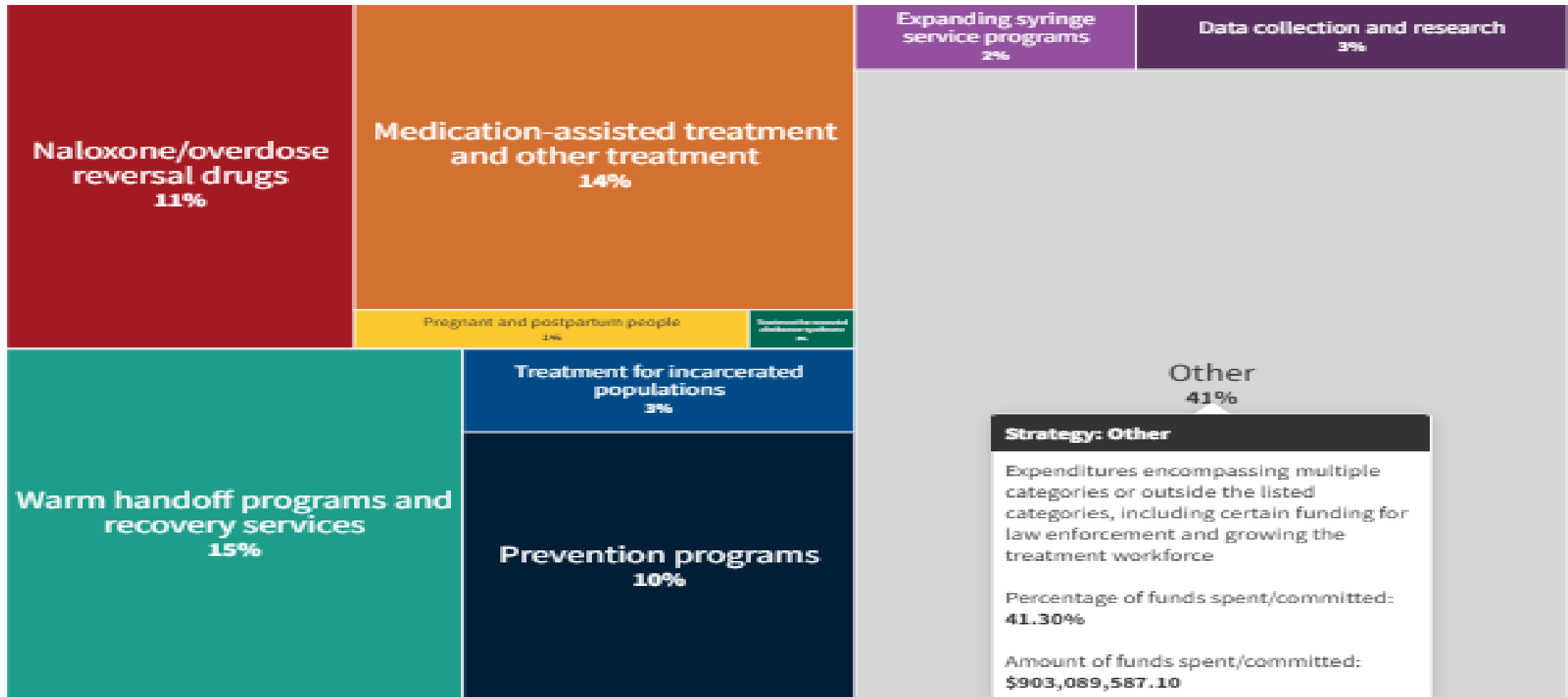
Governments spent or committed about one-third of settlement funds and set aside about another third for future use. The final third was untrackable, as many places didn't produce public reports on the money.



State	Settlement funds received	Spent/committed	Set aside/not committed	Untrackable via public reports
New York	\$529,180,000.00	\$379,279,230.40	\$0.00	\$149,900,769.60
California	\$452,452,619.62	\$219,825,491.91	\$202,810,474.89	\$29,816,652.82
Florida	\$508,498,740.00	\$177,637,147.92	\$52,252,352.00	\$278,609,240.08
Pennsylvania	\$209,426,069.09	\$128,665,291.60	\$62,437,687.82	\$18,323,089.67
Texas	\$457,435,565.28	\$107,668,212.00	\$262,440,989.30	\$87,326,363.98

Tracking

Nationwide commitments



What's Next



**Supplanting
Funds**



Sustainability



**Targeting Funds to
Most Impacted
Communities**



**Reporting &
Transparency**



**Data & Measuring
Impact**

Supplanting Funds

Definition from Colorado:

"To deliberately replace funds because of the receipt of opioid settlement funds. Opioid settlement funds should be used to supplement existing funds for program activities and not replace those funds that have already been appropriated or allocated for the same purpose."

Sustainability – Leverage Existing Resources



EXISTING CAPITAL



EXISTING PROGRAMS



PUBLIC BUILDINGS

Sustainability - Partnerships

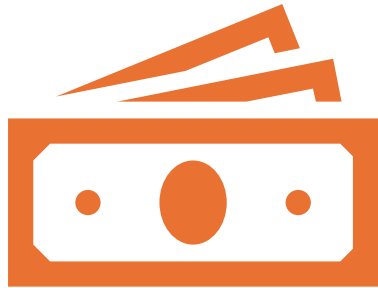


PHILANTHROPY



PUBLIC / PRIVATE
PARTNERSHIPS

Sustainability – Financial Options



Endowment, separate fund



Smooth decay

Resources



MENU X

About Us

The Principles ▾

Tools & Resources ▾

OSPRI

Implementation Tools

Blog

Downloads

Resources

- [KFF Health News](#) - Reporting on opioid settlement funds
- [NationalOpioidSettlement.com](#) - Legal documents
- [Vital Strategies](#) – State guides
- [National Association of Counties](#) – Strategy Briefs and Quick Guides
- [SAFE Project: SAFE Solutions](#) – Collection of strategies
- [Appalachia Opioid Remediation](#) – State & local opioid settlement tracking
- [National Academy for State Health Policy](#) – State-level information
- [Bipartisan Policy Center](#) – Federal and state funding resources
- [Pew Charitable Trusts](#) – SUD research & information
- [OpioidSettlementTracker.com](#) – News, resources, etc.

Questions?

- **Sara Whaley**
- sara.whaley2@baltimorecity.gov
- **Kristen Pendergrass**
- kpendergrass@shatterproof.org

Governor's Overdose Task Force Priority Recommendations

Overdose Strategic Plan (Roadmap)

Color Code Key:	
Cross-Cutting Components	Blue
Core Pillars	Black

I. Ensuring Racial Equity and Eliminating Disparities

II. Building Strong Governance and Community Engagement

III. Expanding Data Capacity and Surveillance

IV. Addressing the Social Determinants of Health

1. Reinforcing Comprehensive Prevention

2. Strengthening Harm Reduction and Rescue

3. Increasing Investment in Treatment

4. Supporting Recovery

Cross-Cutting Components

Core Pillars

Governor's Overdose Task Force Recommendation Process

Each year, the Governor's Overdose Task Force provides priority recommendations to the Opioid Settlement Advisory Committee for consideration in their allocation of funding for the next State fiscal year.

Task Force Work Group Co-Chairs

- In March 2025, an Annual Recommendations survey was developed by EOHHS and Brown University's People, Places & Health Collaborative. The survey gathered feedback about the Task Force Overdose Strategic Plan (Roadmap) and priorities. It also asked open-ended questions about emerging issues and future challenges.

Gather Task Force Work Group Recommendations

- The survey was released in March 2025 to participants in all nine Overdose Task Force Work Groups and was featured in the March Task Force Newsletter.

Overdose Task Force Community Conversation

- The May 2025 Overdose Task Force meeting includes a community conversation about the survey findings. Additionally, facilitated group discussions will focus on eight areas: Racial Equity; Social Determinants of Health (Families); Social Determinants of Health (Housing); Emerging Response to the Epidemic, Harm Reduction and Rescue; Treatment; Recovery; and Prevention.

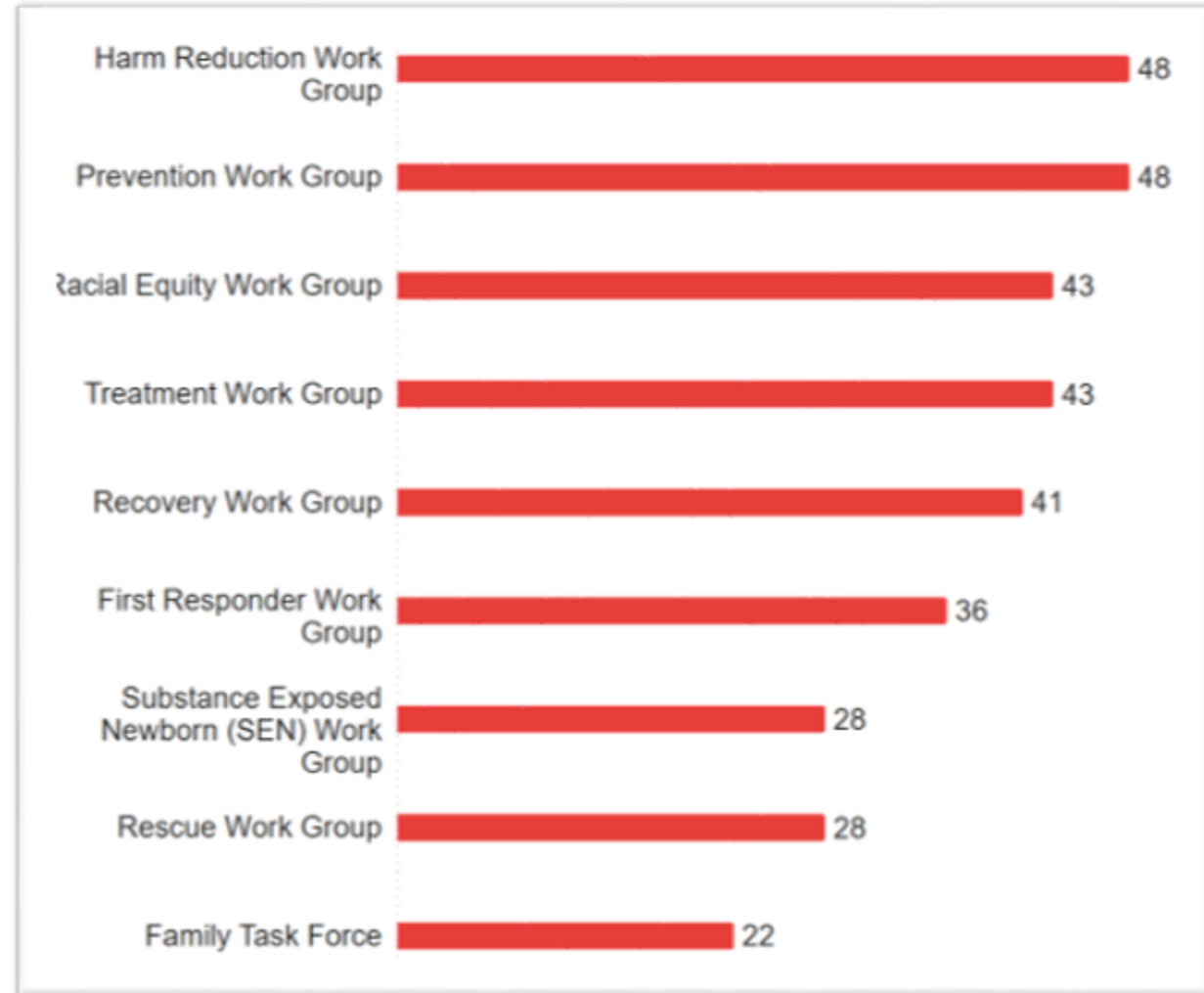
Report Out to the Opioid Settlement Advisory Committee

- During the May 2025 meeting of the Opioid Settlement Advisory Committee, the Task Force Director will share a report out of the key takeaways from the Annual Recommendations Survey and May Task Force Community Conversation.

Task Force Annual Recommendations Survey

Survey for feedback and recommendations on priorities, issues, and strategic focus for the upcoming year.

- Survey respondents could choose multiple Work Groups they were most involved in.
- Respondents could arrange a list of priorities associated with each Work Group to indicate which ones they thought were most important.
- We also asked open-ended questions about emerging issues and upcoming challenges.
- We identified key priorities within each Work Group and analyzed open-ended answers to identify themes.
- **149 surveys were completed between March 12 and April 1.**



May Task Force Community Conversation Break Out Sessions

Review of survey results and open-ended questions.

Breakout Room Topic	
1	Emerging Response to the Changing Epidemic
2	Social Determinants of Health: Strengthening Families
3	Social Determinants of Health: Housing, Employment, and Basic Needs
4	Harm Reduction and Rescue
5	Treatment
6	Racial Equity
7	Prevention
8	Recovery

- Do you agree with the highest-ranked core strategy identified? Why or why not?
- Of the listed key themes, what do you think should be prioritized?
- For your top key theme, what resources, activities, approaches, policy, programs, etc. need to occur?
- Are there any themes that should be included in this list? If so, please describe.
- How do the resources, approaches, policy, programs, etc. for the themes present across the lifespan (children, youth, young adult, adults (adult, middle-aged, older))?
- How can we improve access for people with disabilities?

Cross-Cutting Pillars



Racial Equity
Emerging Issues
Social Determinants of Health

Racial Equity

Key themes:

- Addressing Stigma: Overcoming stigma related to substance use in marginalized communities.
- Coordination of Efforts: Improving communication and resource availability to reduce duplication and increase access.
- Equitable Services: Ensuring equitable access to housing, healthcare, and recovery services for BIPOC communities.
- Community Outreach: Enhancing outreach efforts to marginalized populations.

Emerging Response to the Changing Epidemic

Key themes:

- **Drug Supply Monitoring**: Keeping up with changes in drug supply, including novel adulterants and synthetic drugs.
- **Communication and Education**: Providing risk communication materials and educating the public about emerging substances.
- **Naloxone Accessibility**: Ensuring the availability and proper use of naloxone.
- **Legal and Policy Challenges**: Navigating increased legal scrutiny and potential changes in funding due to federal executive orders.

Social Determinants of Health: Strengthening Families

Key themes:

- **Addressing Stigma**: reducing stigma and increasing access to SUD treatment for pregnant people.
- ***Perinatal Support**: Enhancing support for pregnant and parenting individuals, including peer recovery specialists.
- **Family-Centered Care**: Focusing on the long-term impact of substance use on families and children.
- **Education and Engagement**: Engaging families in recovery to support child development and healthy pregnancies.
- **Transparency and Accountability**: Improving measurement and accountability in family and youth support services.

Social Determinants of Health: Housing, Employment, and Basic Needs

Key themes:

- **Supportive Housing**: Providing stable and harm-reduction focused living environments including temporary and permanent housing.
- **Reduce Discharge to Homelessness**: Increasing availability of housing, i.e. discharges from nursing homes and emergency departments.
- **Resource Allocation**: Managing resource scarcity and improve partnerships with homelessness and housing providers.
- **Comprehensive Support**: Providing holistic support that includes housing, employment, and basic needs.

Core Pillars



Prevention
Treatment
Harm Reduction/Rescue
Recovery

Reinforcing Comprehensive Prevention

The highest-ranked strategy identified by survey respondents was Core Strategy 1.

★ **Core Strategy 1: Implement evidence-based primary prevention in schools, professional settings, and high-risk communities.**

Core Strategy 2: Incorporate prevention for workplace injuries, disability leaves, and rehabilitation services.

Core Strategy 3: Prioritize prevention activities that recognize race equity, eliminate structural racism and disparities.

Core Strategy 4: Prevent overprescribing and ensure appropriate prescribing and dispensing of opioids.

Reinforcing Comprehensive Prevention

Key themes:

- **Youth Education**: Raising awareness about substance use among youth and families and its long-term risks.
- **Mental Health Awareness**: Promoting awareness of complementary and alternative treatments for anxiety.
- **Community Engagement**: Using culturally linguistic and innovative methods like drama therapy to support prevention education.

Strengthening Harm Reduction and Rescue

The highest-ranked strategy identified by survey respondents was Core Strategy 1.

★ **Core Strategy 1: Sustain naloxone accessibility via a statewide plan and evaluate impact.**

Core Strategy 2: Maximize access to harm reduction materials and resources.

Core Strategy 3: Ensure harm reduction services are comprehensive and responsive to evolving needs of people who use drugs (PWUD).

Core Strategy 4: Improve alternate post-overdose engagement strategies.

Core Strategy 5: Prioritize racially focused harm reduction outreach strategies, including undocumented people.

Core Strategy 6: Develop robust harm reduction policies.

Strengthening Harm Reduction and Rescue

Key themes :

- **Harm Reduction Education**: Educating families and communities about harm reduction strategies.
- **Policy Advocacy**: Advocating for harm reduction, decriminalization, and better legislative support.
- **Service Accessibility**: Ensuring multiple access points for harm reduction services and supplies targeting private locations (examples: leave behind, canvassing, public housing authorities).

Increasing Engagement in Treatment

The highest-ranked strategy identified by survey respondents was Core Strategy 1.

★ **Core Strategy 1: Increase capacity and reduce barriers to ensure treatment-on-demand.**

Core Strategy 2: Monitor and improve treatment program outcome assessments.

Core Strategy 3: Improve partnerships among substance use and primary care providers.

Core Strategy 4: Modernize treatment policies.

Increasing Engagement in Treatment

Key themes:

- **Equitable Access**: Expanding access to treatment including stimulant use, parents with children, and youth residential SUD treatment.
- **Communication and Messaging**: Providing information and resources for treatment options including residential and outpatient treatment across the lifespan.
- **Trauma-Informed Care**: Providing trauma-informed behavioral healthcare services across the lifespan.
- **Innovative Treatment Strategies**: Expanding treatment in primary care and developing new tools and strategies to improve treatment outcomes.

Supporting Recovery

The highest-ranked strategy identified by survey respondents was **Core Strategy 3**.

Core Strategy 1: Standardize recovery-focused data collection methods and success metrics.

Core Strategy 2: Build recovery capital across personal, family/social, community, and cultural environments.

 **Core Strategy 3: Recruit, support, expand, and train Peer Recovery Specialists (PRS).**

Core Strategy 4: Support substance-exposed newborns (SEN) interventions and infrastructure.

Core Strategy 5: Develop and implement recovery policies

Supporting Recovery

Key themes :

- **Supportive Housing**: Providing stable and recovery-focused living environments post-overdose and post-treatment.
- **Workforce Integration**: Connecting peer workforce with professional development, internship, and career ladder opportunities.
- **Insurance and Parity**: Addressing insurance and parity issues to ensure equal access to recovery resources.
- ***Perinatal Support**: Enhancing peer recovery specialist support for pregnant and parenting individuals.

Public Comment



Reminder of Upcoming Opioid Settlement Advisory Committee

DATE:	<ul style="list-style-type: none">• Wednesday, June 25, 2025 – Agency programmatic updates• Wednesday, July 23, 2025 - Determine process and share additional materials• Wednesday, August 27, 2025 - Consensus vote on proposed recommendations• Wednesday, October 22, 2025 – Year in Review
TIME:	1:00 – 3:00
LOCATION:	Department of Administration 2 nd Floor

If you have any questions, feel free to reach out to: OHHS.OpioidSettlement@ohhs.ri.gov

THANK YOU

Opioid Settlement Advisory Committee Chairperson:

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