



Opioid Settlement Advisory Committee (OSAC)

Wednesday, July 23, 2025

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Call to Order and Review of Minutes

Our Meeting Agenda

- I. Call to Order, Introductions, Review of Minutes
- II. Review of OSAC Guiding Principles and Policy Discussion
- III. Recommendation Process and Whole of Government Approach
- IV. Public Comment
- V. Budget Review for FY23 to Date
- VI. Review of Proposed Recommendations and Discussion
- VII. Public Comment
- VIII. Updates and Next Steps
 - a. EOHHS Update
 - b. Next Meeting – **Wednesday, August 27th** from 1 to 3 pm at the Department of Administration, 1 Capitol Hill, Providence
- IX. Adjourn





Review of OSAC Decision-Making Principles and Policies

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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 gaps in existing budgets rather than expand needed programs, but the Committee should use the funds to enhance 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 people and families with lived experience and representatives from communities that are disproportionately impacted.
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.

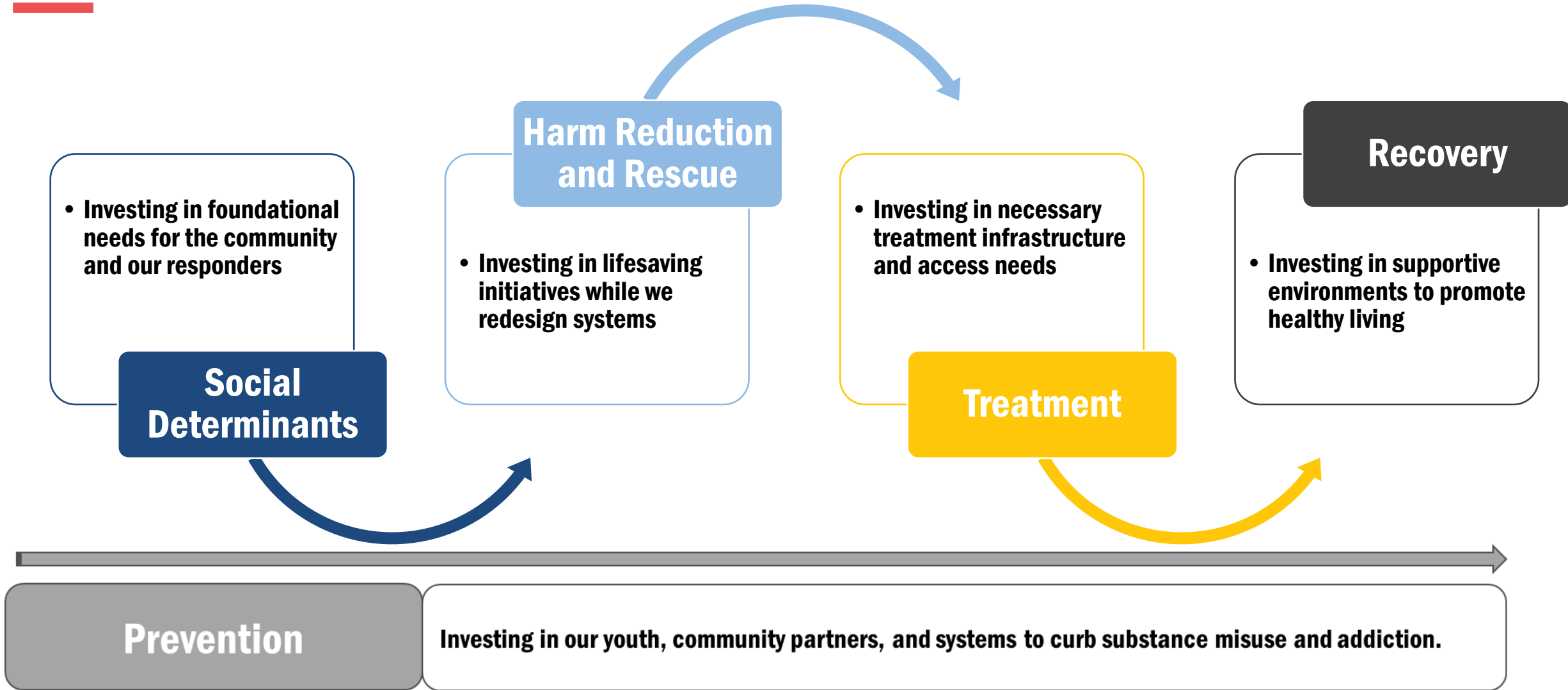
**The first five items are paraphrased and summarized from the Johns Hopkins guide entitled, [The Principles To Guide Jurisdictions In The Use Of Funds From The Opioid Litigation, We Encourage The Adoption Of Five Guiding Principles.](#)*

Path Forward to Operationalize Equity

- The OSAC recognizes there are significant disparities within communities related to: (1) overdose outcomes; (2) access to treatment, harm reduction, prevention, and other services; and (3) the drivers of both substance use and substance use disorders. These disparities are driven by structural racism and other historical and structural systems of oppression. The OSAC is committed to prioritizing and addressing these disparities in all its work.
- The **Equity Expectations**, aligned with EOHHS' core values of choice, voice, and equity, were developed based on feedback from EOHHS and other State agency staff who have subject-matter expertise and training in equity initiatives. They were also informed by a cursory literature review and key informant interviews with other grant makers.

Transparent Approach	Equity-Focused Recommendation Process	Equitable Procurement	Capacity Building	Shared Communication
<ul style="list-style-type: none">• Public Sharing of Disparity Data• Share Evidence Base• Multiple Pathways for Community Feedback	<ul style="list-style-type: none">• OSAC Member Equity Training• Recommendations in Multiple Languages• Equity Impact Statements	<ul style="list-style-type: none">• Accessible Process• Equity Statement in Procurements• CLAS and ADA Compliance and Training• Lived Experience on Review Committees• Equity Scoring Criteria	<ul style="list-style-type: none">• Indirect Rate Support• Equity Workplans in Contracts• Equity Reporting• Required Equity-Focused Training	<ul style="list-style-type: none">• Equity Standards for Meetings• Value Alignment (Voice, Choice, and Equity)• Plain Language Use• State/Partner Communications Staff Training

Investing to Support People Through the Continuum of Care



Supplantation

The Colorado Opioid Abatement Council (COAC) defines "supplantation" in the context of Opioid Settlement Funds as:

*To deliberately replace or reduce existing federal, state, or locally allocated funds with **Opioid Settlement Funds**. Opioid Settlement Funds are to be used to create, maintain, and/or expand program activities. Opioid Settlement Funds are not to be used to replace or reduce existing federal, state, or local funds that have already been appropriated or allocated for the same purpose.*

Source: <https://coag.gov/app/uploads/2025/06/Supplantation-is-Not-an-Approved-Purpose-for-Opioid-Settlement-Funds.pdf>



Recommendations Process and Whole-of-Government Approach

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Whole-of-Government Governance Structure

Level	Internal Structure	Agencies
1	Core Agency Leadership	<i>RIDOH, BHDDH, EOHHS Ad hoc: DCYF, DOC, Department of Housing</i>
2	Interagency Team	<i>EOHHS (including Medicaid), RIDOH, BHDDH, RIDE, DCYF, DOC, Department of Housing, OHA</i>
3	Agency Core Teams	<i>Programmatic, Fiscal, Evaluation, and Data</i>
4	Core Function Convening	<i>Emerging Issues, Planning, etc.</i>

Strategic Approach to Finance Decision Making Across the Overdose Continuum of Care

Guiding strategy toward a whole-of-government approach for decision-making, focused on **impact** and **sustainability**.

Strategic Approach	Major Components	Timeline
<p>IMPACT AND PERFORMANCE MONITORING:</p> <p>Surveillance, Data, Evaluation, and Community Input</p>	Data Review and Key Measure Trends	January - March
	Work Group and Community Priorities	February - June
	Overarching Overdose Goal Yearly Review: Fatal and Non-Fatal Overdose Trends	June - July
	Year in Review	September - December
<p>STRATEGIC FORECASTING AND SUSTAINABILITY:</p> <p>Spending Projections, Allocations, Budget, and Investments</p>	Funding Projections and Budget Look Ahead	February - March
	Interagency Review of Revenue, Budgets, and Sustainability	April - June
	External Review	July - August
	New Budget Development and Reallocations	August - September
	Revised Governor Budget Amendments with Allocations	November - December

Funding Recommendations Process

Input

- **March 2025 - April 2025:** Compiled recommendations from the Task Force work groups, community conversations, State agencies, and public input.

Report Out

- **May 2025:** Task Force recommendations shared with the OSAC Committee.
- **June 2025:** 2024 Fatal overdose data presented, agency programmatic updates offered, and overview report shared with the OSAC.

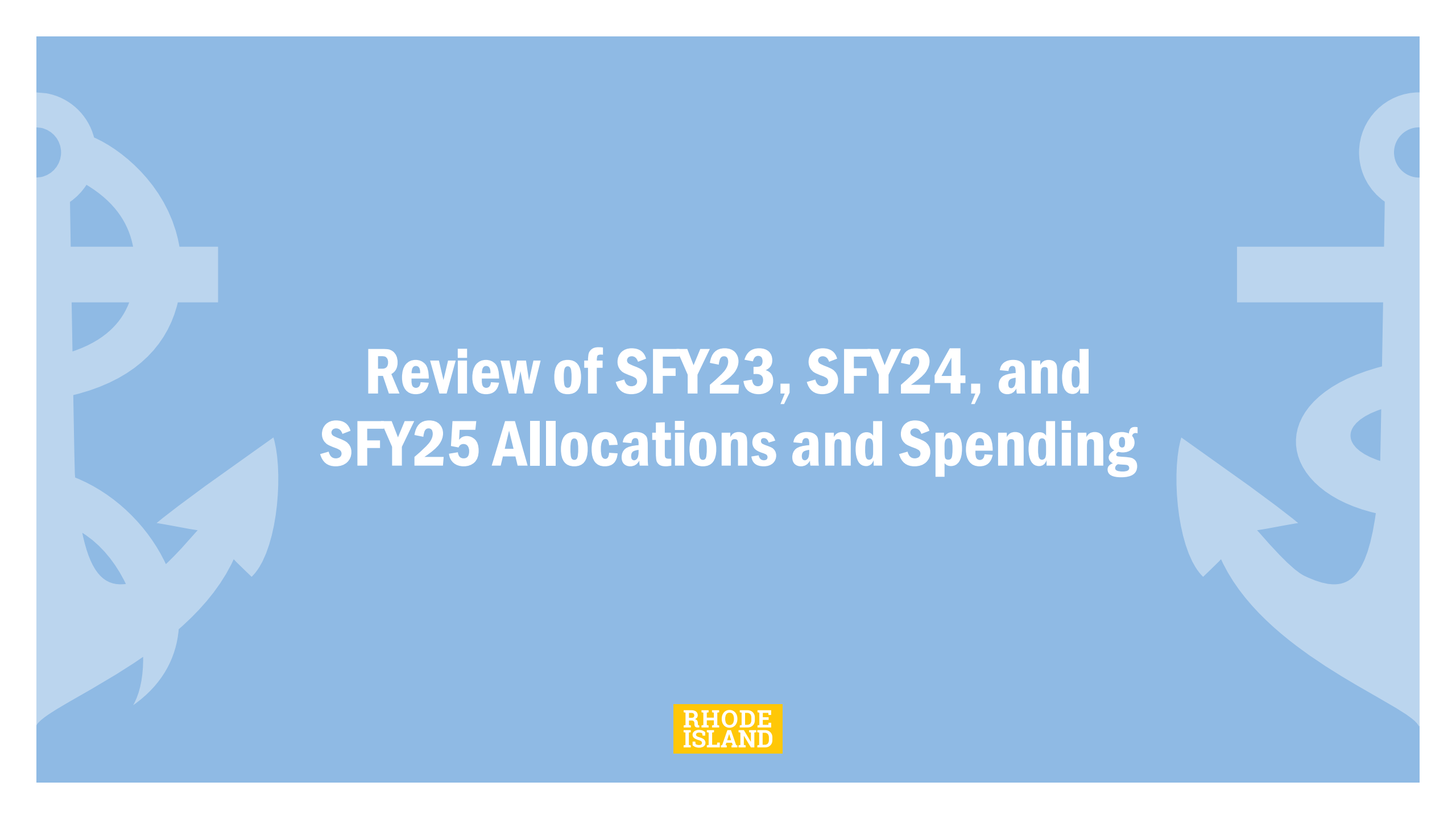
Budget and Process Review

- **July 2025:** SFY25 allocation and spending review, policy, and decision-making process discussion.

Recommended SFY27 Proposals

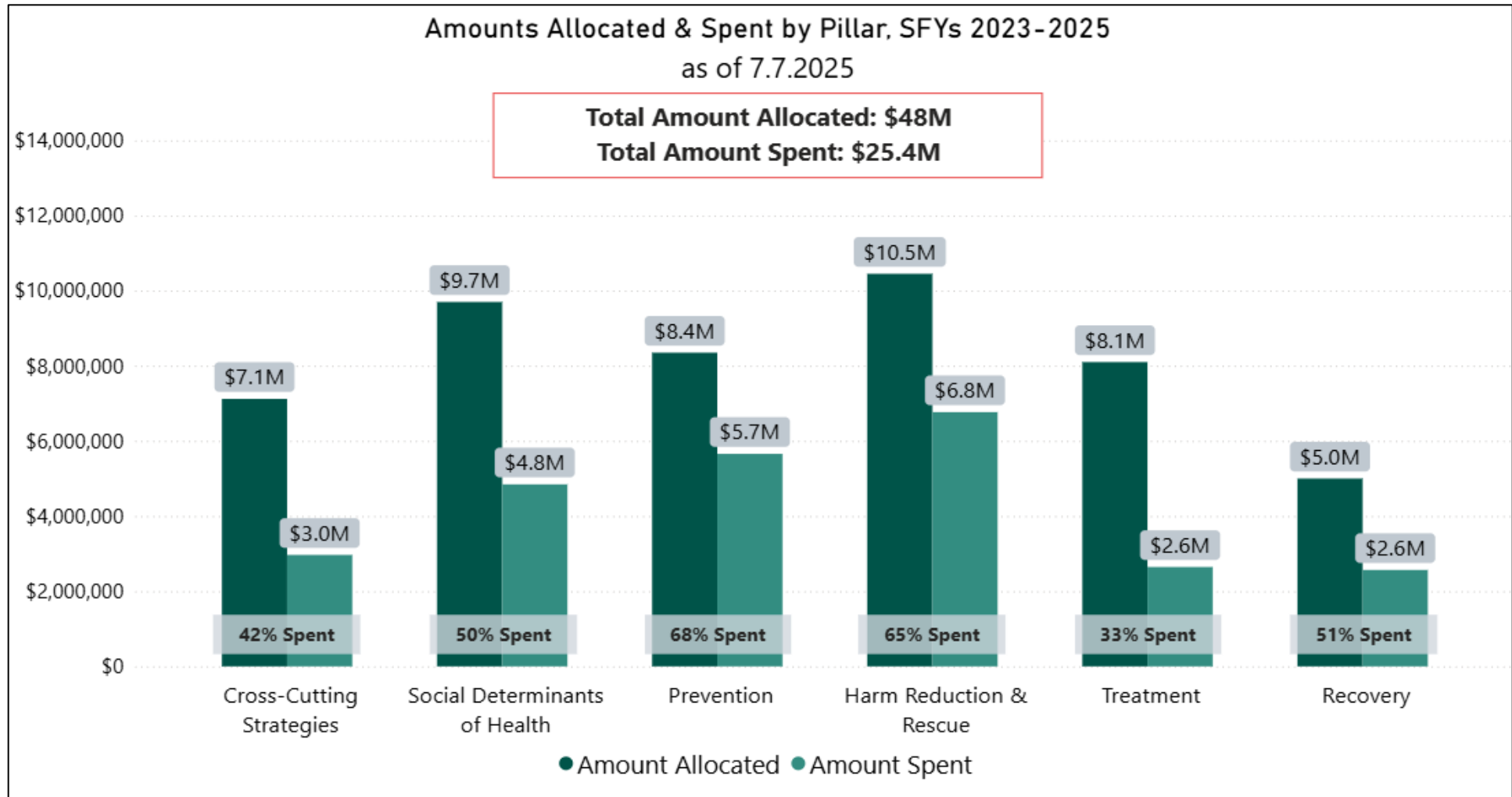
- **July and August 2025:** Reviewed existing revenue and draft allocation proposals presented.
- **August 2025:** OSAC determines priorities and holds vote.

Public Comment



Review of SFY23, SFY24, and SFY25 Allocations and Spending

SFY 2023 to 2025: Existing Settlement Funding Summary



Proposed SFY27 Recommendations and Discussion

SFY25 and SFY26 Percentages and SFY27 Proposed Percentages

Pillars/Priorities	Strategies/Programs	SFY2025 Allocations (\$18M)	SYF26 Allocations (\$20.7M)	SFY27 Proposed Allocations (\$10M)
Racial Equity	Ensuring racial equity across the continuum of care.	3%	2%	2%
Emerging Issues and Municipal Funds	Responding to emerging issues and increasing alignment with municipalities.	5%	5%	7%
Administration	Monitoring investments, financing and contract management	4%	4%	7%
Evaluation	Comprehensive evaluation across the continuum of care.	3%	4%	3%
Data	Using data to inform action.	3%	7%	6%
Social Determinants of Health (including Communications)	Addressing root causes and ensuring public dashboards, resources, messaging, and information are accessible and equitable.	12%	10%	5%
Prevention	Sustaining school- and community-based youth prevention.	13%	13%	12%
Harm Reduction and Rescue	Sustaining the statewide naloxone distribution center, harm reduction education and supplies to all partner organizations, targeted mobile outreach, Overdose Prevention Center, and drop-in centers.	18%	26%	27%
Treatment (Infrastructure)	Ensuring treatment is accessible and available on demand to all individuals, including youth.	22%	12%	13%
Recovery	Increasing recovery capital for individuals, families, pregnant people, as well as supporting the peer workforce and recovery housing initiatives.	17%	17%	18%

SFY25 and SFY26 Dollar Amounts and SFY27 Dollar Amounts

Pillars/Priorities	Strategies/Programs	SFY2025 Amounts (\$18M)	SFY26 Amounts (\$20.7M)	SFY27 Proposed Amounts (\$10M)
Racial Equity	Ensuring racial equity across the continuum of care.	\$500K	\$350K	\$200K
Emerging Issues and Municipal Funds	Responding to emerging issues and increasing alignment with municipalities.	\$1M	\$1M	\$700K
Administration	Monitoring investments, financing, and contract management	\$750K	\$800K	\$700K
Evaluation	Comprehensive evaluation across the continuum of care.	\$500K	\$800K	\$350K
Data	Using data to inform action.	\$600K	\$1.5M	\$600K
Social Determinants of Health (including Communications)	Addressing root causes and ensuring public dashboards, resources, messaging, and information are accessible and equitable.	\$2.25M	\$2.1M	\$500K
Prevention	Sustaining school- and community-based youth prevention.	\$2.4M	\$2.7M	\$1.2M
Harm Reduction and Rescue	Statewide naloxone distribution center, harm reduction education and supplies to all partner organizations, targeted mobile outreach, Overdose Prevention Center, and drop-in centers.	\$3.3M	\$5.475M	\$2.75M
Treatment (Infrastructure)	Ensuring treatment is accessible and available on demand to all individuals, including youth.	\$4.15M	\$2.425M	\$1.25M
Recovery	Increasing recovery capital for individuals, families, and pregnant people, as well as supporting peer workforce and recovery housing.	\$3M	\$3.55M	\$1.75M

Reminder: Consensus-Building Approach

The OSAC 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.



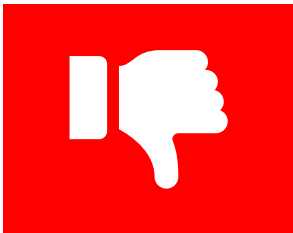
THUMBS UP:

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



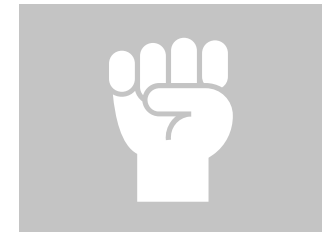
THUMBS SIDWAYS:

- 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).

Public Comment

Updates and Announcements

EOHHS Federal Tracking and Contingency Planning

- Changes in policy on the Federal level are likely to have ranging impacts on health and human services programs and resource availability moving forward.
- These potential changes may require that difficult decisions are made to preserve the progress made to date, while simultaneously right-sizing resources and investments to adjust to a changing landscape.
- EOHHS is taking a targeted approach to understanding potential changes and impacts, reviewing existing programs, and creating a framework for future decision-making.
- We look forward to continuing to bring updates to you all, as appropriate.

CONTINGENCY PLANNING FOR FEDERAL POLICY CHANGES IN RHODE ISLAND

Federal Policy Tracking and Potential Impact Analysis

Federal Compliance Advisory Group (per State Budget)

Program Inventories

Monitoring Grants and Federal Agency Changes

Example Potential Implications: Behavioral Health/Overdose

Access, Stigma, and Vulnerability

- Reduced access for marginalized, diverse groups
- Policies impacting LGBTQ+ and gender discrimination
- Law enforcement and immigration authorities
- Reduced policies to improve social connectedness

Overdose Response and SUD Treatment

- Potential supply chain or drug supply changes
- Possible reduce funding for substance use treatment
- Less access to affordable medications (e.g., expansion)
- Weakened harm reduction infrastructure

System Capacity and Workforce

- Workforce reduction and potential for increased burnout
- Increased system regulation through audits on waste
- Unclear path for deregulation efforts and standards
- Impacts on justice-involved populations' system access

Resilience and Equity

- Potential erosion of core behavioral health areas of focus
- Weakened emergency preparedness and response
- Decreased focus on data-driven surveillance
- Elimination of climate change and mental health efforts

Next Steps

Save the Date: Next OSAC Meeting

All OSAC meeting agendas will be posted to the [Open Meetings section of the Rhode Island Secretary of State website](#) at least two business days before each meeting. For questions, please email Ohhs.OpioidSettlement@ohhs.ri.gov.

DATE:	Wednesday, August 27, 2025
TIME:	1 p.m. to 3 p.m.
LOCATION:	Department of Administration, 2 nd Floor, Conference Room 2A, 1 Capitol Hill, Providence, RI

Thank You



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