



MINNESOTA

**OPIOID EPIDEMIC RESPONSE
ADVISORY COUNCIL**

July 26th 2021

Agenda

- ▶ History of the Council
- ▶ Council Membership
 - ▶ City/County/General public participation in the Council
- ▶ Funding of the Council
- ▶ Role of the Council in the Settlement(s)

256.042 OPIATE EPIDEMIC RESPONSE ADVISORY COUNCIL

- Legislation passed in 2019 that created the Opioid Epidemic Response Advisory Council and the Opiate Epidemic Response Account.
- The first meeting took place on September 27th 2019
- The council is required to meet at least quarterly, and may convene other meetings as necessary.
 - At this time the council has been meeting monthly.
 - The public meetings are on the 3rd Friday of each month and broadcasted on Microsoft Teams
- The meetings are required to be held at different locations in the state to provide geographic access.
- At least one-half of the meetings are held at locations outside of the seven-county metropolitan area.

256.042 OPIATE EPIDEMIC RESPONSE

ADVISORY COUNCIL FOCUS

- (1) **Prevention and education**, including public education and awareness for adults and youth, prescriber education, the development and sustainability of opioid overdose prevention and education programs, the role of adult protective services in prevention and response, and providing financial support to local law enforcement agencies for opiate antagonist programs;
- (2) **Training on the treatment of opioid addiction**, including the use of all Food and Drug Administration approved opioid addiction medications, detoxification, relapse prevention, patient assessment, individual treatment planning, counseling, recovery supports, diversion control, and other best practices;
- (3) **Expansion and enhancement of a continuum of care for opioid-related substance use disorders**, including primary prevention, early intervention, treatment, recovery, and aftercare services; and
- (4) **Protect access to needed prescription pain medications**
the development of measures to assess and protect the ability of cancer patients and survivors, persons battling life-threatening illnesses, persons suffering from severe chronic pain, and persons at the end stages of life, who legitimately need prescription pain medications, to maintain their quality of life by accessing these pain medications without facing unnecessary barriers. The measures must also address the needs of individuals described in this clause who are elderly or who reside in underserved or rural areas of the state.

256.042 OPIATE EPIDEMIC RESPONSE ADVISORY COUNCIL CHARGES

- The Opioid Epidemic Response Advisory Council is charged with developing and implementing a comprehensive and effective statewide effort to address the opioid addiction and overdose epidemic in Minnesota by;
 - Reviewing local, state and federal initiatives and activities related to education, prevention, treatment and services for individuals and families experiencing and affected by opioid use disorder;
 - Establishing priorities to address the state's opioid epidemic, for the purpose of recommending initiatives to fund;
 - Recommending to the commissioner of human services specific projects and initiatives to be funded;

256.042 OPIATE EPIDEMIC RESPONSE ADVISORY COUNCIL CHARGES CONTINUED

- Ensuring that available funding is allocated to align with other state and federal funding to achieve the greatest impact and ensure a coordinated state effort;
- Consulting with the commissioners of human services, health, and management and budget to develop measurable outcomes to determine the effectiveness of funds allocated; and
- Developing recommendations for an administrative and organizational framework for the allocation, on a sustainable and ongoing basis, of any money collected from the Opiate Epidemic Response Account

256.042 OPIATE EPIDEMIC RESPONSE

ADVISORY COUNCIL CHARGES CONTINUED

- **Award grants to proposals that include promising practices or theory-based activities**

(c) The council, in consultation with the commissioner of management and budget, and within available appropriations, shall select from the awarded grants projects that include promising practices or theory-based activities for which the commissioner of management and budget shall conduct evaluations using experimental or quasi-experimental design. Grants awarded to proposals that include promising practices or theory-based activities and that are selected for an evaluation shall be administered to support the experimental or quasi-experimental evaluation and require grantees to collect and report information that is needed to complete the evaluation. The commissioner of management and budget, under section 15.08, may obtain additional relevant data to support the experimental or quasi-experimental evaluation studies.

- **Establish goals related to addressing the opioid epidemic**

(d) The council, in consultation with the commissioners of human services, health, public safety, and management and budget, shall establish goals related to addressing the opioid epidemic and determine a baseline against which progress shall be monitored and set measurable outcomes, including benchmarks. The goals established must include goals for prevention and public health, access to treatment, and multigenerational impacts. The council shall use existing measures and data collection systems to determine baseline data against which progress shall be measured. The council shall include the proposed goals, the measurable outcomes, and proposed benchmarks to meet these goals in its initial report to the legislature under subdivision 5, paragraph (a), due January 31, 2021.

COUNCIL MEMBERSHIP

- ▶ The council membership is made up of 19 voting members
 - ▶ legislators from both bodies,
 - ▶ representatives from the Ojibwe and Dakota tribal nations,
 - ▶ providers, advocates, and individuals personally impacted by the opioid crisis
 - ▶ law enforcement
 - ▶ social service agencies
 - ▶ judicial branch
- ▶ The commissioner of human services ensures that the council includes diversity
 - ▶ geographic
 - ▶ Racial
 - ▶ Gender
 - ▶ least one-half of council members reside outside of the seven-county metropolitan area.

COUNCIL MEMBERS

- ▶ Chair - Dr. Anne Pylkas – MN Society of Addiction Medicine
- ▶ Vice Chair - Dave Baker – MN House of Representatives
- ▶ Nicole Anderson – MN Indian Tribes Representative – Ojibwe
- ▶ Joe Club, Allina Health – MN Hospital Association
- ▶ Peter Carlson – MN Ambulance Association
- ▶ Chris Eaton – MN Senate
- ▶ Tiffany Irvin- Public Member in Opioid Addiction Recovery
- ▶ Dr. Heather Bell – MN Medical Association
- ▶ Sarah Grosshuesch – Local Department of Health
- ▶ Katrina Howard – Board of Pharmacy
- ▶ Erin Koegel – MN House of Representatives
- ▶ Mark Koran – MN Senate
- ▶ Esther Muturi – Mental Health Advocate
- ▶ Toni Napier – Alternative Pain Management Therapies
- ▶ Kathryn Nevins – Public Member with chronic pain, intractable pain, or a rare disease or condition
- ▶ Darin Prescott – MN Indian Tribes Representative – Dakota
- ▶ Alicia House – Nonprofit Organization
- ▶ Vacant– Licensed Opioid Treatment Program, Sober Living Program or Substance Use Disorder Program Representative
- ▶ D. Korey Wahwassuck - Minnesota Courts Representative
- ▶ Delegate for the Department of Human Services – Assistant Commissioner Gertrude Matemba-Mutasa
- ▶ Delegate for the Department of Health – Dana Farley
- ▶ Delegate for the Department of Corrections – Randy Goodwin

OPPORTUNITIES FOR COUNTY AND CITY PARTICIPATION

- ▶ Attendance at the monthly meetings
- ▶ Request for agenda time
- ▶ Take city and county concerns to Sarah Grosshuesch, who has the local department of health representative on the council
- ▶ Ongoing dialogue with the Council Chair, Vice Chair and DHS staff
- ▶ Other ideas are welcome

256.043 OPIATE EPIDEMIC RESPONSE ACCOUNT

Subdivision 1. **Establishment.** The opiate epidemic response account is established in the special revenue fund in the state treasury.

- The registration fees assessed by the Board of Pharmacy under section 151.066 and the license fees identified in section 151.065, subdivision 7, paragraphs (b) and (c), shall be deposited into the account. Beginning in fiscal year 2021, the funds in the account are appropriated each fiscal year to the commissioner of human services, unless otherwise specified in law.
- Subd. 2. [Repealed by amendment, 2020 c 115 art 3 s 15]
- Additionally, the council has will receive an allocation of funding from the Substance Abuse Prevention and Treatment Block grant pending federal approval of the proposed spending plan.

Subd. 3. APPROPRIATIONS FROM THE ACCOUNT

Subd. 3. Appropriations from Previous fund (a) After the appropriations in Laws 2019, chapter 63, article 3, section 1, paragraphs (e), (f), (g), and (h) are made,

- \$249,000 to the commissioner of human services for administration of the Opiate Epidemic Response Advisory Council
- \$126,000 to the Board of Pharmacy for the collection of the registration fees
- \$672,000 is appropriated to the commissioner of public safety for the Bureau of Criminal Apprehension.
 - \$384,000 is for drug scientists and lab supplies
 - \$288,000 is for special agent positions focused on drug interdiction and drug trafficking.

After the appropriations in paragraphs (a) to (c) are made,

- **50%** of the remaining amount is appropriated to the commissioner of human services for distribution to:
 - **county social service**
 - **tribal social service agencies**
 - To provide child protection services to children and families who are affected by addiction

The Opiate Epidemic Response Advisory Council receives the remaining money, unless otherwise appropriated by the legislature.

Subd. 4. Settlement; sunset.

- (a) If the state receives a total sum of \$250,000,000 either as a result of a settlement agreement or an assurance of discontinuance entered into by the attorney general of the state, or resulting from a court order in litigation brought by the attorney general of the state on behalf of the state or a state agency related to alleged violations of consumer fraud laws in the marketing, sale, or distribution of opioids in this state, or other alleged illegal actions that contributed to the excessive use of opioids, or from the fees collected under sections [151.065, subdivisions 1](#) and 3, and [151.066](#), that are deposited into the opiate epidemic response fund established in this section, or from a combination of both, the fees specified in section [151.065, subdivisions 1](#), clause (16), and 3, clause (14), shall be reduced to \$5,260, and the opiate registration fee in section [151.066, subdivision 3](#), shall be repealed.
- (b) The commissioner of management and budget shall inform the board of pharmacy, the governor, and the legislature when the amount specified in paragraph (a) has been reached. The board shall apply the reduced license fee for the next licensure period.
- (c) Notwithstanding paragraph (a), the reduction of the license fee in section 151.065, subdivisions 1 and 3, and the repeal of the registration fee in section 151.066 shall not occur before July 1, 2024.

ROLE OF THE COUNCIL IN THE SETTLEMENT IN LEGISLATION

(f) Any money received by the state resulting from a settlement agreement or an assurance of discontinuance entered into by the attorney general of the state, or a court order in litigation brought by the attorney general of the state, on behalf of the state or a state agency, against one or more opioid manufacturers or opioid wholesale drug distributors related to alleged violations of consumer fraud laws in the marketing, sale, or distribution of opioids in this state or other alleged illegal actions that contributed to the excessive use of opioids, **must be deposited in a separate account in the state treasury** and the commissioner shall notify the chairs and ranking minority members of the Finance Committee in the senate and the Ways and Means Committee in the house of representatives that an account has been created. Notwithstanding section 11A.20, all investment income and all investment losses attributable to the investment of this account shall be credited to the account. This paragraph does not apply to attorney fees and costs awarded to the state or the Attorney General's Office, to contract attorneys hired by the state or Attorney General's Office, or to other state agency attorneys. If the licensing fees under section [151.065, subdivision 1](#), clause (16), and subdivision 3, clause (14), are reduced and the registration fee under section 151.066, subdivision 3, is repealed in accordance with section [256.043](#), subdivision 4, then the commissioner shall transfer from the separate account created in this paragraph to the opiate epidemic response fund under section [256.043](#) an amount that ensures that \$20,940,000 each fiscal year is available for distribution in accordance with section 256.043, subdivisions 2 and subdivision 3.

(g) Notwithstanding paragraph (f), if money is received from a settlement agreement or an assurance of discontinuance entered into by the attorney general of the state or a court order in litigation brought by the attorney general of the state on behalf of the state or a state agency against a consulting firm working for an opioid manufacturer or opioid wholesale drug distributor and deposited into the separate account created under paragraph (f), **the commissioner shall annually transfer from the separate account to the opiate epidemic response fund under section 256.043 an amount equal to the estimated amount submitted to the commissioner by the Board of Pharmacy in accordance with section 151.066, subdivision 3, paragraph (b). The amount transferred shall be included in the amount available for distribution in accordance with section 256.043, subdivision 3.** This transfer shall occur each year until the registration fee under section 151.066, subdivision 3, is repealed in accordance with section 256.043, subdivision 4, or the money deposited in the account in accordance with this paragraph has been transferred, whichever occurs first.

ROLE OF THE COUNCIL IN THE SETTLEMENT

Money will come in yearly allocations until the fund reaches \$250,000,000.

The amount the council expects to receive each year until then is the amount the Board of Pharmacy estimates to collect in that fiscal year.

The settlements have been in negotiations and have not been finalized, thus the council has not formally determined how to award these funds.

The council will discuss, determine a plan and will seek input from interested stakeholders.