

Governor's Subcabinet on Opioids, Substance Use, and Addiction

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Subcabinet on Opioids, Substance Use, and Addiction

Created in 2022 by the legislature and Governor Walz and Lt. Governor Flanagan to improve outcomes for Minnesotans experiencing substance use disorder, their families, and their communities by working across state government.

Chaired by the Addiction and Recovery Director and consisting of eight state agencies:

- Human Services
- Health
- Education
- Higher Education
- Management and Budget
- Corrections
- Public Safety
- Interagency Council on Homelessness

2/21/2024

Governor's Advisory Council on Opioids, Substance Use, and Addiction

- Co-led by Director of Addiction and Recovery
- A significant number are people with lived experience with substance use disorder
- In January released a year-end report out with legislative recommendations around justice-involved populations and other key areas
- Report has been shared with the subcabinet, legislature, counties and other partners
- You can read the report here:
 <u>Recommendations to the Governor's</u>
 <u>Subcabinet on Opioids, Substance Use, and Addiction (mn.gov)</u>

Advisory Council Members	
Gavin Bart	Minneapolis, MN
Brandy Brink	Mankato, MN
Farhia Budul	Minneapolis, MN
Colin Cash—Vice Chair	Onamia, MN
Autumn Dillie	Minneapolis, MN
John Donovan	Big Lake, MN
Beth Elstad – Chair	Duluth, MN
Wendy Jones	St. Paul, MN
Fiyyaz Karim	St. Paul, MN
Pamela Lanhart	Burnsville, MN
Jeffrey Lind	Bemidji, MN
William Messinger	St. Paul, MN
Suzanne Nash	Minneapolis, MN
Lynne Redleaf	Minneapolis, MN
Anderson Saint Georges	Detroit Lakes, MN
Kimberly Stokes	Britt, MN
LaTricia Tate	Minneapolis, MN
Travis Winship	Minneapolis, MN

Office of Addiction and Recovery (OAR)

The 2023 budget included funding for a permanent OAR

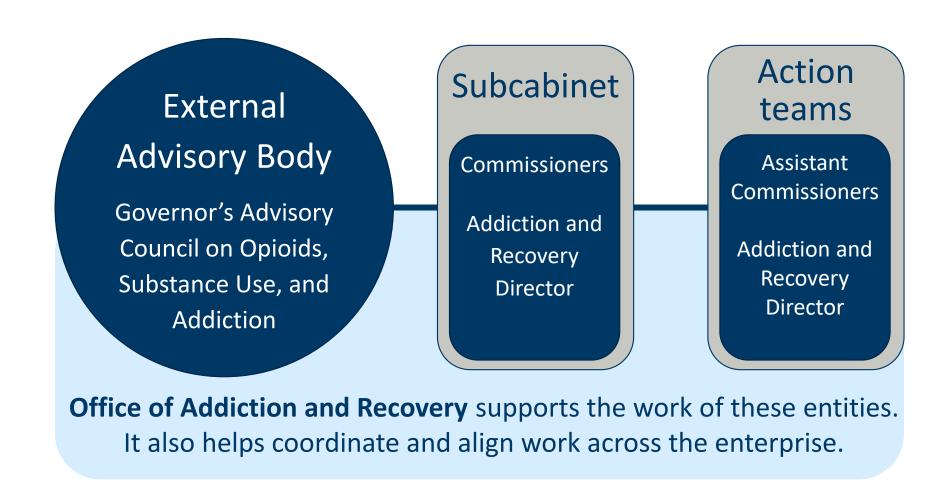
- Director and Assistant Commissioner
- Deputy
- Youth focused FTE
- Project coordinator

The OAR staffs the subcabinet and the Governor's Advisory Council

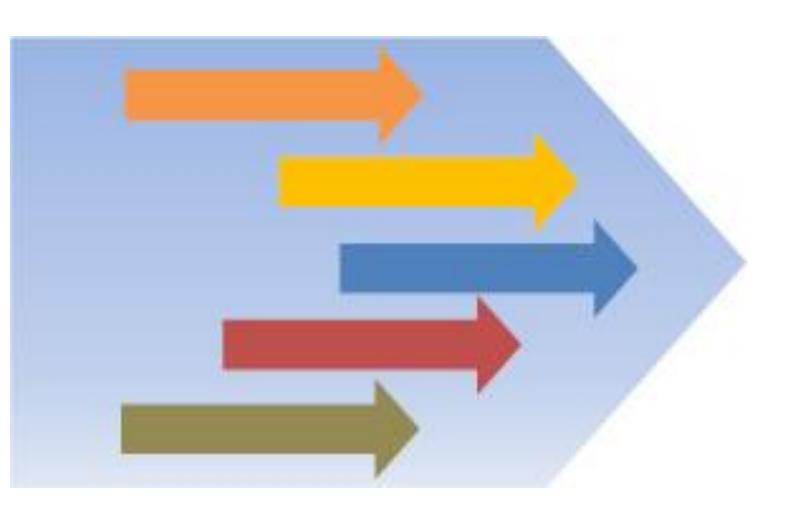
Office of Addiction and Recovery core functions

- Work across state government to break down silos to better target the state's role in addressing addiction, treatment, and recovery
- Coordinate and align efforts across state government and with city, county, and tribal partners
- Conduct robust public engagement to build relationships with communities and community leaders to ensure people with direct experience drive efforts
- Look for new interagency opportunities to leverage systems to address addiction, treatment, and recovery
- Promote innovative programs that are demonstrating results
- Provide oversight to programs and strategies developed to more effectively coordinate and marshal state resources

Governance Structures



Strategic alignment



- One Minnesota Plan
- Legislature
- Tribal/county/local level efforts
- Opioid Epidemic Response Advisory Council (OERAC)
- Federal Strategy

Current areas of work

Public Engagement

Naloxone Distribution

One Minnesota SUD goal

Inter-agency coordination

Recovery Friendly Workplaces

Connections between law enforcement and human services

Budget development and implementation

2023 Legislative Overview

The 2023 budget invests over \$200M over four years in addressing substance use

Many of these proposals focus on reducing deaths in Native and Black communities, where the disparities are greatest

These investments
cross the
continuum of
care—prevention,
harm reduction,
treatment,
recovery

Many of these investments look at the intersection of SUD, housing, health care, and other supports.

2023 budget session significantly moved Minnesota toward a more public health approach to substance use disorder

Select 2023 Legislative Highlights

- Safe recovery sites DHS (\$18M): Brick and mortar locations that will offer a continuum of harm reduction services, including potentially safer use
- Harm reduction for culturally specific organizations DHS (\$8M): Grants for tribes and other culturally specific organizations to provide harm reduction supplies and services such as naloxone, fentanyl and xylazine test strips
- Family treatment start up and capacity building grants DHS (\$11.2M): Grants to support family treatment centers
- Treatment quality enhancements DHS (\$2.25M): Funding to support providers in improving quality of services
- Peer support investments DHS (\$9M): Grant funding for recovery community organizations and for starting up culturally specific recovery community organizations
- Overdose Prevention and Morbidity Act MDH (\$24.4M): This Act consists
 of seven strategies to combat overdoses including prevention,
 recovery, drug surveillance, neo-natal substance related issues, recovery
 friendly workplaces, overdose prevention hubs, and culturally specific
 outreach
- Overdose surge alert system DHS (\$350K): A statewide opioid overdose surge text message alert system, to prevent opioid overdose by cautioning people to refrain from substance use or to use harm reduction strategies when there is an overdose surge in their surrounding area

- Housing investments for people experiencing SUD DHS (\$10M): Allows individuals with SUD to qualify for PATH (projects for assistance in transition from homelessness) funding
- Presumptive eligibility for housing support for individuals exciting a Minnesota Correctional Facility DHS (\$2.3M): Provides presumptive eligibility for housing for people exiting incarceration
- Decriminalization of paraphernalia and residue (public safety policy)
- Supporting culturally specific organizations DHS (\$5M): Technical assistance for culturally specific organizations to apply for state grant opportunities
- Children's behavioral grants DHS (\$14M): Additional funding for children's behavioral grants
- Cannabis bill prevention, treatment, and recovery grants OCM (\$11M):
 Grant program that can be used for a multitude of substance use prevention, treatment, and recovery activities
- Cannabis youth education grants MDH (\$10M): Grants to fund programs and activities advising youth on the impacts of cannabis use
- Grants to local and tribal health for cannabis education MDH (\$20M):
 Grants to trivial and local health boards to educate their communities about the impacts of cannabis

Note: None of these are represented in the OMBI

Substance Use Disorder Three-Year Goal

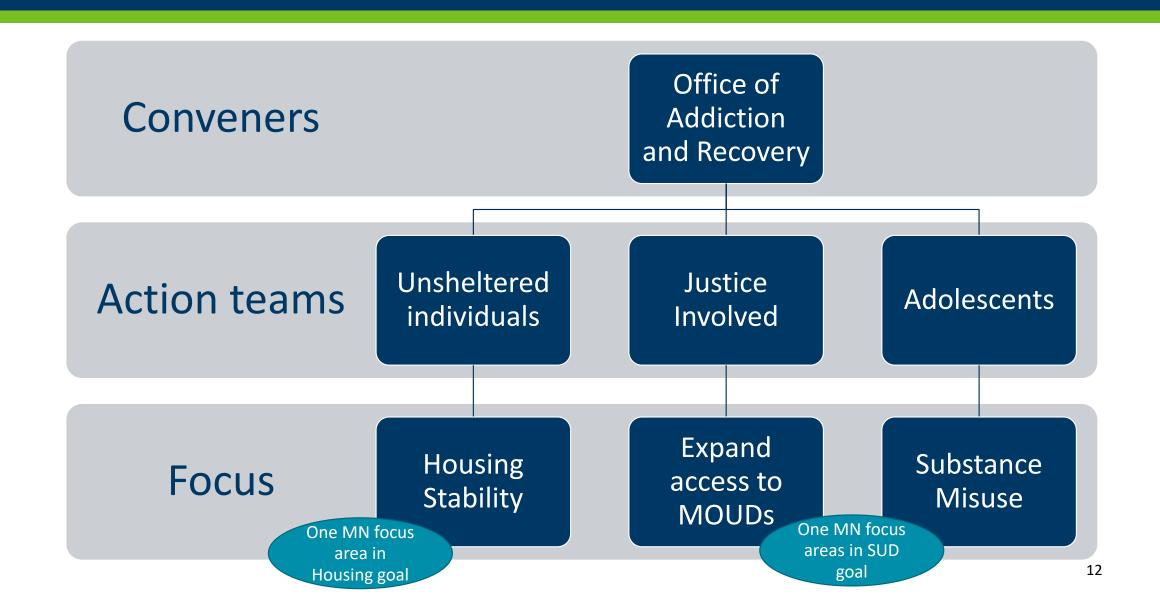
Goal: Reduce the impact of the opioid crisis on Minnesotans, their families, and their communities.

Why this goal? Drug overdose deaths a tragically high cost, reverberating throughout a community and impacting the wellbeing of friends, family, and neighbors. The emergence of fentanyl, a synthetic opioid 50 times more powerful than heroin has driven a nationwide overdose crisis that claimed the lives of over 100,000 Americans in 2022. In Minnesota opioid-involved overdose deaths increased 43% from 2020 to 2022, and the number of deaths has more than doubled since 2019.

How the goal is measured: The number of opioid deaths in Minnesota

Target: 5% reduction in overdose deaths

Focus of action teams



Action teams

Justice-Involved and SUD

- Focus area: Increase access to MOUD in jails and prisons
 - 1115 Reentry waiver opportunity
 - Workgroup to identify additional barriers
- Focus area: Better support transitions into and out jails and prisons
 - Use of emerging professions (i.e., peer support and community health workers) with justice involved populations
 - Use of Officer-Involved Community Based Care Coordination and other local service strategies shown to reduce recidivism among people who are incarcerated

Action teams

Unsheltered and SUD

- Focus area: Create a comprehensive, trauma-informed, and culturally responsive continuum of care for people facing homelessness with behavioral health needs which includes mental health and substance use
 - Strategies are aligned with the Interagency Council on Homelessness'
 Justice Plan
- Focus area: Work on solutions to current encampment issues
 - Partner on a multi-jurisdictional response that includes housing and substances use options that meet the needs of unhoused Minnesotans living in encampments

Action teams

Adolescent Substance Misuse

Currently in early stages inventorying activities across the administration to identify gaps/opportunities

- Collegiate recovery and student basic needs (OHE)
- Recovery secondary schools (MDE)
- Community-based prevention campaigns (MDH)
- Disrupting pathways to adolescent substance misuse ACEs and protective factors (MDH)
- Community-based prevention activities (DHS)
- Cannabis education and prevention-related activities as outlined in the Adult Use cannabis bill (MDH, OHE)
- Office of Justice Programs activities focused on youth (DPS)
- DCFY and Children's Cabinet Initiatives (DCYF, Children's Cabinet)



Thank You!

Office of Addiction and Recovery

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APPENDIX

Increase access to MOUD for incarcerated individuals:

- Create a work group including counties, jails, medical professionals, and others to identify barriers and solutions, and a cost estimate for providing 100 percent access to MOUD and other treatment options to those incarcerated.
- Pursue federal Medicaid dollars to drive towards universal access to MOUD in jails and prisons – 1115 Reentry waiver.
- Encourage local governments to consider opioid settlement dollars to support MOUD and SUD supports for individuals with opioid use disorder in jails.

Justice-involved individuals and substance and opioid use disorder:

- Develop and enforce a consistent template for community releases and releases between jails and prisons, including access to SUD services.
- Support successful re-entry for individuals with SUD leaving incarcerations.
- Harm reduction kits for people leaving incarceration.
- Support peer recovery specialists in jails and prisons and explore establishing Forensic Peer Recovery Specialists as a certified, MA-reimbursable service.
- Invest in the expansion of Minnesota treatment courts for both adults and adolescents to improve public safety.
- Create an ombudsperson for substance use disorder and recovery.

Background studies reform:

- Implement recommendations from the background study task force including:
- Decrease decision timeline for reconsiderations.
- Remove barriers for applicants in the background studies process.
- Require educational systems to educate on licensure requirements and possible barriers to employment.

Additional recommendations include:

- Support traditional healing throughout the substance use disorder continuum of care.
- Create more flexible, permanent, and culturally responsive funding opportunities for Tribes, counties, and non-profit organizations.
- Fully fund and implement the findings from the substance use disorder rate study completed in 2023.
- Create more housing support opportunities for individuals with substance use disorder.