

Opioid Settlement Advisory Committee Funding Recommendations 24-2, 24-3, 24-4, and 24-5 Summary Sheet

In 2022, Public Act 22-48, AN ACT IMPLEMENTING THE GOVERNOR'S BUDGET RECOMMENDATIONS REGARDING THE USE OF OPIOID LITIGATION PROCEEDS was passed into law. The Act establishes an Advisory Committee in Connecticut General Statutes Secs. 17a-674b through 674g. The Committee is co-chaired by the Commissioner of the Department of Mental Health and Addiction Services (DMHAS) and a representative from the municipalities, to ensure the proceeds received by the state as part of the opioid litigation settlement agreements are allocated appropriately. The statutes specify the proceeds will be spent on substance use disorder abatement infrastructure, programs, services, supports, and resources for prevention, treatment, recovery, and harm reduction with public involvement, transparency, and accountability.

Section (e) of CGS Sec. 17a-674c states:

"(e) Moneys in the fund shall be spent only for the following substance use disorder abatement purposes, in accordance with the controlling judgment, consent decree or settlement, as confirmed by the Attorney General's review of such judgment, consent decree or settlement and upon the approval of the committee and the Secretary of the Office of Policy and Management:

- (1) State-wide, regional or community substance use disorder needs assessments to identify structural gaps and needs to inform expenditures from the fund;
- (2) Infrastructure required for evidence-based substance use disorder prevention, treatment, recovery or harm reduction programs, services and supports;
- (3) Programs, services, supports and resources for evidence-based substance use disorder prevention, treatment, recovery or harm reduction;
- (4) Evidence-informed substance use disorder prevention, treatment, recovery or harm reduction pilot programs or demonstration studies that are not evidence-based, but are approved by the committee as an appropriate use of moneys for a limited period of time as specified by the committee, provided the committee shall assess whether the evidence supports funding such programs or studies or whether it provides a basis for funding such programs or studies with an expectation of creating an evidence base for such programs and studies;
- (5) Evaluation of effectiveness and outcomes reporting for substance use disorder abatement infrastructure, programs, services, supports and resources for which moneys from the fund have been disbursed, including, but not limited to, impact on access to harm reduction services or treatment for substance use disorders or reduction in drug-related mortality;
- (6) One or more publicly available data interfaces managed by the commissioner to aggregate, track and report data on
 - (A) substance use disorders, overdoses and drug-related harms, (B) spending recommendations, plans and reports, and (C) outcomes of programs, services, supports and resources for which moneys from the fund were disbursed;
- (7) Research on opioid abatement, including, but not limited to, development of evidence-based treatment, barriers to treatment, nonopioid treatment of chronic pain and harm reduction, supply-side enforcement;
- (8) Documented expenses incurred in administering and staffing the fund and the committee, and expenses, including, but not limited to, legal fees, incurred by the state or any municipality in securing settlement proceeds, deposited in the fund as permitted by the controlling judgment, consent decree or settlement;
- (9) Documented expenses associated with managing, investing and disbursing moneys in the fund; and

Opioid Settlement Advisory Committee Funding Recommendation 24-2

Summary of Current Proposal

The OSAC approved three-years of funding for the Judicial Branch's Treatment Pathway Program.

TPP is an innovative court-based pretrial diversionary initiative that provides clinical evaluation and referral services. TPP services include substance use disorder treatment, mental health treatment and support services, medication assisted treatment (MAT), housing assistance, enrollment with entitlements, access to medical care, employment services, social supports, basic need items, and peer support by a recovery coach. The target population is justice involved individuals with substance use disorders, mainly opioid/alcohol dependent, charged with nonviolent offenses, who are less likely to be released from custody at time of arraignment. Court Support Services Division (JB-CSSD) Pretrial Services staff identifies the clients, who are then evaluated by the court-based Adult Behavioral Health Services (ABHS) JB-CSSD contracted Licensed Clinical Social Worker (LCSW). The LCSW evaluates clients for appropriateness and motivation to participate in TPP. Clients are assessed in lockup prior to their arraignment. During the arraignment, Pretrial Services makes a recommendation to the Court that clients be granted the TPP as a condition of release into the community program in lieu of incarceration. Clients granted TPP are immediately connected with clinical services, a recovery coach, and supportive services in the community. The clients' care is managed during the pendency of their case under the collaborative supervision of Pretrial Services, ABHS clinical provider, recovery coach, and Adult Probation Services. Regions served: Bridgeport, Waterbury, New Haven, New Britain, New London, Torrington, Danielson, Manchester. Current TPP funding expires on June 30, 2024.

Timeline/Budget

To continue operation after June 30, 2024, the cost is \$1.28 million per year for the current 8 sites (\$160,000 per location funds recovery coach and clinician). OSAC approved three years of funding for a total of \$3,840,000 to keep the program funded through June 30, 2027.

Compliance Analysis

Allowable Use:

Statutory: CGS Sec. 17a-674c(e)3

(3) Programs, services, supports and resources for evidence-based substance use disorder prevention, treatment, recovery or harm reduction

Settlement Agreement: Exhibit E, Schedule B, Part 1 (A)(1) and (5).

- (1) Expand availability of treatment for OUD and any co-occurring SUD/MH conditions, including all forms of Medication-Assisted Treatment ("MAT") approved by the U.S. Food and Drug Administration.
- (5) Support mobile intervention, treatment, and recovery services, offered by qualified professionals and service providers, such as peer recovery coaches, for persons with OUD and any co-occurring SUD/MH conditions and for persons who have experienced an opioid overdose.

Exhibit E, Schedule B, Part 1 (D) (1), (2), (5)

- (1) Support pre-arrest or pre-arraignment diversion and deflection strategies for persons with OUD and any co-occurring SUD/MH conditions, including established strategies

The Treatment Pathway Program (TPP) is an innovative court-based pretrial diversionary initiative that provides clinical evaluation and referral services. TPP services include substance use disorder treatment, mental health treatment and support services, medication assisted treatment (MAT), housing assistance, enrollment with entitlements, access to medical care, employment services, social supports, basic need items, and peer support by a recovery coach. The target population is justice involved individuals with substance use disorders, mainly opioid/alcohol dependent, charged with nonviolent offenses, who are less likely to be released from custody at time of arraignment. Judicial Branch, Court Support Services Division (JB-CSSD) Pretrial Services staff identifies the clients, who are then evaluated by the court-based Adult Behavioral Health Services (ABHS) JB-CSSD contracted Licensed Clinical Social Worker (LCSW). The LCSW evaluates clients for appropriateness and motivation to participate in TPP. Clients are assessed in lockup prior to their arraignment. During the arraignment, Pretrial Services makes a recommendation to the Court that clients be granted the TPP as a condition of release into the community program in lieu of incarceration. Clients granted TPP are immediately connected with clinical services, a recovery coach, and supportive services in the community. The clients' care is managed during the pendency of their case under the collaborative supervision of Pretrial Services, ABHS clinical provider, recovery coach, and Adult Probation Services. Regions served: Bridgeport, Waterbury, New Haven, New Britain, New London, Torrington, Danielson, Manchester. Current TPP funding expires on June 30, 2024.

Priority: Justice-involved individuals with substance use disorders and high rate of recidivism, but no history of violence.

Budget: To continue operation after June 30, 2024, the cost is \$1.28 million per year for the current 8 sites (\$160,000 per location funds recovery coach and clinician).

Project Dates: July 1, 2024, which is the date the funding lapses.

CORE Priority:

Priority 1: Increase Access to and Support the most Effective Medications for OUD (MOUD)

Priority 2: Reduce overdose risk and mortality

Priority 6: Address social determinants and needs of at-risk and impacted populations

Category: X treatment X harm reduction X prevention X recovery supports

Recommended Lead & Partnering Agencies:

Lead: Judicial Branch, Court Support Service Division

Opioid Settlement Advisory Committee Funding Recommendation 24-3

Summary of Current Proposal

The OSAC approved funding for the Department of Corrections expansion of opioid treatment for incarcerated individuals at Brooklyn, Chesire, Garner, MacDougall CI, and Manson Youth. The goal is to provide individuals screened for an OUD with access to one of the three (3) FDA-approved medications at the time of entry and exit from the CT DOC. Continuity of care and services into and out of the correctional system assists in lessening the chances for illegal use of substances within the facilities as well as decreasing the chances of overdose upon release.

Timeline/Budget

This recommendation is for \$416,500 to used between 7/1/2024 and 6/30/2025

Compliance Analysis

Allowable Use:

Statutory: CGS Sec. 17a-674c(e)3

(2) Infrastructure required for evidence-based substance use disorder prevention, treatment, recovery or harm reduction programs, services and supports;

(3) Programs, services, supports and resources for evidence-based substance use disorder prevention, treatment, recovery or harm reduction

Settlement Agreement: Exhibit E, Schedule B, Part 1 (A)(1) and (5).

(2) Expand availability of treatment for OUD and any co-occurring SUD/MH conditions, including all forms of Medication-Assisted Treatment ("MAT") approved by the U.S. Food and Drug Administration.

Exhibit E, Schedule B, Part 1 (D)(5)

(5) Provide evidence-informed treatment, including MAT, recovery support, harm reduction, or other appropriate services to individuals with OUD and any cooccurring SUD/MH conditions who are leaving jail or prison or have recently left jail or prison, are on probation or parole, are under community corrections supervision, or are in re-entry programs or facilities.

Background

OSAC Funding Recommendation Form:

	Source of Recommendation: Connecticut Department of Corrections
	ADPC Subcommittee Name:

	<p>Recommended Lead & Partnering Agencies: Connecticut Department of Corrections</p>																																							
	<p>Vetted by Referral Subcommittee <input checked="" type="checkbox"/></p>																																							
	<p>Vetted by Research and Data Subcommittee? <input checked="" type="checkbox"/></p> <ul style="list-style-type: none"> • EBP <input checked="" type="checkbox"/> or Promising Practice <input type="checkbox"/> Program evaluation recommended? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no • Pilot <input type="checkbox"/> or Established Program <input checked="" type="checkbox"/> • Local <input type="checkbox"/> or Statewide Rollout <input checked="" type="checkbox"/> 																																							
	<p>Vetted by Finance and Compliance Subcommittee? <input checked="" type="checkbox"/></p> <ul style="list-style-type: none"> • Allowable Strategy <input checked="" type="checkbox"/> Compliant yes <input type="checkbox"/> no <input type="checkbox"/> • How much funding/funding amount \$416,650.00 • Proposed project dates ___7/1/2024-6/30/2025___ • Proposed budget __\$ 416,650.00 • ___ Budget submitted <input checked="" type="checkbox"/> RFP <input type="checkbox"/> Sole Source <input type="checkbox"/> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;"></th> <th style="width: 60%;"></th> <th style="width: 10%; text-align: right;"><u>ONE-TIME COST</u></th> </tr> </thead> <tbody> <tr> <td>EXPANDED SERVICES</td> <td>Cheshire - full OTP services</td> <td></td> </tr> <tr> <td></td> <td>Cheshire - build out (one-time)</td> <td style="text-align: right;">98,550.00</td> </tr> <tr> <td></td> <td>Brooklyn - software & licensing</td> <td></td> </tr> <tr> <td></td> <td>Brooklyn - full OTP services</td> <td></td> </tr> <tr> <td></td> <td>Brooklyn - build out (one-time)</td> <td style="text-align: right;">98,550.00</td> </tr> <tr> <td></td> <td>Brooklyn - software & licensing</td> <td></td> </tr> <tr> <td></td> <td colspan="2" style="border-top: 1px solid black;"></td> </tr> <tr> <td>EXPANDED SERVICES</td> <td>MacDougall - full OTP services</td> <td></td> </tr> <tr> <td></td> <td>MacDougall - build out (one-time)</td> <td style="text-align: right;">98,550.00</td> </tr> <tr> <td></td> <td>MacDougall - software & licensing</td> <td></td> </tr> <tr> <td></td> <td>Garner - pump and safe</td> <td style="text-align: right;">24,500.00</td> </tr> <tr> <td></td> <td>Garner - software & licensing</td> <td></td> </tr> </tbody> </table>			<u>ONE-TIME COST</u>	EXPANDED SERVICES	Cheshire - full OTP services			Cheshire - build out (one-time)	98,550.00		Brooklyn - software & licensing			Brooklyn - full OTP services			Brooklyn - build out (one-time)	98,550.00		Brooklyn - software & licensing					EXPANDED SERVICES	MacDougall - full OTP services			MacDougall - build out (one-time)	98,550.00		MacDougall - software & licensing			Garner - pump and safe	24,500.00		Garner - software & licensing	
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Opioid Settlement Advisory Committee Funding Recommendation 24-4

Summary of Current Proposal

Naloxone (brand name Narcan), is an opioid antagonist medication, used as a harm reduction tool to reverse an active overdose. The Department of Mental Health and Addiction Services has made it a priority to make this life saving medication available to all hospital emergency departments, treatment and recovery support providers, municipalities (first responders), and harm reduction service organizations. In the last few years the demand for naloxone has doubled reaching saturation level for the State. In an effort to ensure this life saving medication is abundant for individuals who need it, the Opioid Settlement Advisory Council (OSAC) has approved one year of funding required to maintain saturation level.

DMHAS naloxone distribution by year

2019	11,581
2020	13,162
2021	14,986
2022	29,064
2023	58,642

Timeline/Budget

OSAC unanimously passed one year of funding of the Naloxone Saturation Plan at a cost of \$2,323,200.

Compliance Analysis

Allowable Use:

Statutory: CGS Sec. 17a-674c(e)3

(3) Programs, services, supports and resources for evidence-based substance use disorder prevention, treatment, recovery or harm reduction

Settlement Agreement: Exhibit E, Schedule B, Part 1 (A)(1) and (5).

Background

OSAC Funding Recommendation Form:

	Source of Recommendation:	ADPC subcommittee
	ADPC Subcommittee Name:	Prevention and Early Intervention
	Date of Initial Recommendation Presentation (should coincide with OSAC meeting date)	May 2024
	Detail Recommendation Summary: (project title, summary of request, priority, category, funding amount requested, project dates)	

Opioid Settlement Advisory Committee Funding Recommendation 24-4

Summary of Current Proposal

This is a three year continuation request for a recommendation approved on November 17th, 2023.

Harm Reduction Supplies: Currently, CT's syringe service programs distribute harm reduction supplies to people who use drugs and have reported a shortage of supplies. This is a request to increase funding to existing programs to expand access to already available harm reduction kits by \$500,000 annually

Timeline/Budget

OSAC approved a three year extension of Opioid Settlement Advisory Committee Funding Recommendation 23-1 to run from 7/1/24-6/30/27 at \$500,000 per annum, for a total of \$1,500,000.

Compliance Analysis

Allowable Use:

Statutory: CGS Sec. 17a-674c(e)3

(3) Programs, services, supports and resources for evidence-based substance use disorder prevention, treatment, recovery or harm reduction

Settlement Agreement: Exhibit E, Schedule A (H)(1); Part Two (H)(9)).

Background

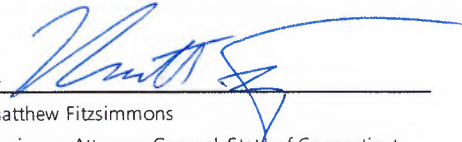
OSAC Funding Recommendation Form:

	Source of Recommendation: ADPC subcommittee
	ADPC Subcommittee Name: Treatment
	Date of Initial Recommendation Presentation (should coincide with OSAC meeting date) May 14 th , 2024
	<p>Detail Recommendation Summary: (project title, summary of request, priority, category, funding amount requested, project dates)</p> <p>This is a three year continuation request for a recommendation approved on November 17th, 2023.</p> <p>Harm Reduction Supplies: Currently, CT's syringe service programs distribute harm reduction supplies to people who use drugs and have reported a shortage of supplies. This is a request to increase funding to existing programs to expand access to already available harm reduction kits by \$500,000 annually. This initial request is for two fiscal years for a total of \$1,000,0000. The following link provides information about syringe exchange programs:</p> <p>CT-Syringe-Services-Program 8232023.pdf</p> <p>Update from FY23 funding: Here are estimates for the number of people served with the \$500,000:</p>

Signatures

X 

Jeffrey Beckham
Secretary, Office of Policy and Management

X 

Matthew Fitzsimmons
Designee, Attorney General, State of Connecticut