

# **Opioid Abatement Council Meeting**

December 5, 2022

12:00pm – 3:00pm CDT

West Tennessee Healthcare

City/County Boardroom

Jackson, TN

### Introductions & Gratitude

Dr. Stephen Loyd - Chair, Opioid Abatement Council

 Taryn Sloss, TDMHSAS Assistant Commissioner for Substance Abuse Services



# Review & Approval of September minutes

Dr. Stephen Loyd



## Council Accomplishments

# Approved the Revised Remediation List

- To be used by the counties
- To be used by the community applicant

# Learning about the system

- Overview of the Treatment Eco-System
- Presentation from Dr. Maranda Williams on Overdose Fatalities

#### Application Process Workgroup

- Identified the members
- Met twice to discuss the process
- Will present their recommendations later in the meeting

# Administrative Updates

## Administrative Updates

- OAC Binders
- Conflict of Interest Statements
- OAC staff positions
  - Project Administrator
  - Program Manager
- Travel expense form
  - (Inside pocket)



FOR FISCAL USE ONLY  FUND TNOpdACnol  DEPT/DIV TDMHSAS/Office  COST CENTER 3391811000		GRANT of CMW		OBJECT	AMOUNT	STATE OF TENNESSEE CLAIM FOR TRAVEL EXPENSES FOR PERIOD FROM TO THIS CLAIM MUST BE PREPARED IN ACCORDANCE WITH TRAVEL REGULATIONS TYPE OF PREPARE IN INK				THI I SOUTH						
DATE		LEF	TIME	_	THE		TRANSPORTATION			SUBSISTENCE				OTHER EXPENSES		
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Please leave all completed forms in your binder



## Sunset Hearing

- Thank you to these Council members for attending:
  - Tommy, Wayne, Armando, Lisa, Charme, Ken, Karen
- The Gov Ops Subcommittee approved 2 more years for the Opioid Abatement Council.
- At that time, they will call us back to hear more about our progress and operations.



 Link to the hearing <u>Joint Government Operations Subcommittee</u> -<u>Education, Health, & General Welfare</u> - Nov 30th, 2022 (granicus.com) (OAC Starts around 58 mins)

### Draft Vision for the work of the council

To approve and allocate the dollars through the Opioid Trust Fund so that Tennesseans struggling with opioid addiction find relief and pathways of recovery to bring hope and restoration through effective and transparent work for all Tennesseans, which will bring prevention and support for those families impacted by opioid use disorder.



# Fiscal Update

## **Opioid Abatement Trust Fund**

- Each meeting, Mary will share the current monthly Opioid Abatement Trust Fund Statement
- Please note that the information is current to date the statement was created.



# Budgeting the Opioid Trust Fund Dollars

#### Payments made into Abatement Trust Fund by end of calendar year 2022

- Payments made in calendar year 2022 are unusual because the distributors are making two payments and J&J / Janssen is making an accelerated payment for multiple years.
- Additionally, the J&J / Janssen payments are front-loaded, with larger amounts paid in the earlier year. Despite there being a ten-year payment period for J&J, more than 70% of Tennessee's share of those funds will be paid in 2022.

Company	Amount	Status/Notes			
McKinsey \$13.2 million		Paid.			
Distributor \$30.5 million		1 <sup>st</sup> payment of \$14.9 million paid			
		2 <sup>nd</sup> payment of \$15.6 million expected by			
		10/15			
J&J/Janssen \$59.7 million		Expected by 10/30			
		Includes accelerated payments for 2023-25			
Mallinckrodt [\$4.5 million]		Anticipated by end of year.			
Total	\$107.9 million	Two distributor payments and accelerated J&J			
		payments make 2022 totals several times			
		higher than what will be typical year.			



### October Opioid Abatement Trust Fund Statement

		Opioid Abatement Fo	und Activity		
		As of the Period Ended O	ctober 31, 2022		
		Description	Cash	Split	Liability
		McKinsey Deposit 3.31.2021	12,613,210.59	· •	0.00
		McKinsey Deposit 4.19.2022	651,080.54		
		Distributor Settlement 8.12.2022 Yr. 1	14,914,621.88		
		Distributor Settlement	15,674,540.42		
		FY 22 Interest Earned	27,134.50		
		Totals	43,880,587.93		0.00
Fund	Account	Descr	Combined		
20044	10000000	Equity in Treasurer Cash	43,880,587.93		See above
20044	34000101	Opioid Abatement_LIAB	0.00		See above
20044	68085000	Departmental Interest-FY23	0.00		Not yet received
11000	7xxxxxxx	33918 Departmental Expenses	(28,011.47)		See below
		Net Cash Available	43,852,576.46		



# Work of the Council

# OAC Application Sub-committee Report

Clay Jackson
Karen Pershing
Shayne Sexton
Mary Shelton
Stephanie Vanterpool

#### OAC PROCESS GUIDELINES (suggested by Subcommittee)

#### Within OAC (member handbook)

- contains Counsel mission, applicable statutes and regulations, operating procedures and pertinent schedules.
- includes "talking points" explaining the framework of OAC, preventing confusion and inconsistent messaging to the public.
- Includes conflict of interest policy for OAC members

#### Outside OAC(application)

- develop an application that thoroughly explains the purposes of the funds and the role of the OAC in selecting grantees.
- within that framework, the application should be less than complicated and applicant-friendly so the responses are more discernible.

#### Summary:

 Brevity should be a major objective within and without OAC. This process can become overwhelming without limits on applicant responses and information. The subcommittee recommends response limits as decided by the full body.

### Approved Opioid Abatement Strategies

- Remediation list
  - suggested modifying the list to add "the latest best practices" and the
     CDC prescribing guidelines of 2022
  - include Tennessee's Department of Health chronic pain guidelines

### **Proposed Funding Buckets**

Strategy	Allocation Percentage
Primary Prevention B2,C1,G1,G2,G3,G4,CC2,CC3,CC4,CC12,E1,GG1,GG2,GG3,GG4,GG5,GG6,GG7,GG8,GG9,GG10,GG11,JJ1,JJ3,LL2,LL3	15%
Harm Reduction A2,G5,H1,CC2,CC3,DD1.3, HH1,HH2,HH4,HH5,HH6,HH7,HH8,HH9,HH10,HH11,JJ1,JJ3	10%
Treatment B1,B3,B4,C1,C2,E1,F1,F2,AA1,AA2,AA3,AA4,AA5,AA7AA9,AA10,AA11,AA12,AA13,AA14,BB2,BB3,BB7,BB10,CC5 ,CC7,CC8,CC9,CC10,CC12,CC15,CC16,DD1.1,DD1.2,DD1.3,DD1.4,DD1.5,DD1.6,DD2, DD3,DD4,DD5,DD6,E1,E2,E4,HH9,JJ1,JJ3	40%
Recovery Support B4,C3,D1,D2,D3,E2,E3,E4,E5,AA5,AA6,BB1,BB2,BB3,BB4,BB5,BB6,BB7,BB8,BB9,BB10,BB14,CC10,CC11,CC12,D D3,E1,E2,E4,E6,E7,E8,E9,JJ1,JJ3	20%
Education/Training A1,B3,AA8,BB11,BB12,BB15,CC1,CC6,CC13,CC14,DD7,E3,E5,E10,FF1,FF2,FF3,FF4,FF5,FF7,FF8,GG12,HH3,HH7,H H8,HH12,HH13,II1,II2,KK1,KK2	10%
Research/Evaluation of Abatement Strategy Efficacy I,FF5.1,FF5.2,FF5.3,FF6,JJ2,JJ4,LL1,LL4,LL5,LL6,LL7,LL8,LL9	5%

### **Rubric for Application Evaluation**



1

#### **Impact**

How many persons will be impacted, how, & how long?

What changes are expected, & what metrics will be used to track them?

How will inequities in care be remediated?

20%

2

#### Innovation

What new approaches to existing challenges are proposed in this program?

Is there a plan to share learnings with the medical and larger communities? 3

#### Integration

How does the proposed program fit within the existing ecology of prevention and care?

Are there plans to incorporate collaboration with other community resources? 4

#### Evidence Base

Does existing evidence support the proposed approach?

Is there good reason to believe it will succeed? 5

#### Feasibility

How practical is the proposal? Are the business and management plans solid?

Does the entity have staff and infrastructure required? 6

#### Sustainability

How will the proposed initiative extend beyond the funding period?

What percentage of budget will be carried by abatement funding?

#### Credibility

What is the track record of the principals in the healthcare space?

How strong is the commitment to the community?

10% 10%

10%

20%

15%

15%

#### OAC DECISIONS FOR PROCEDURES

#### Scheduling

- 1. Application Deadlines
- 2. Initial Vetting by OAC Staff
- 3. Pertinent Subcommittee Review
- 4. Full OAC Decision

#### Questions:

- How often will full Counsel meet to determine grants?
- How much time for each of the four above stages?

#### Hypothetical:

- Application Deadline February 28, 20xx
- Initial Vetting Ends \_\_\_\_ (30 days?)
- Subcommittee Review \_\_\_\_ (30 days?)
- Full OAC Decision\_\_\_\_(45 days?)

#### **Factors to Consider:**

Full OAC grant meetings scheduled semi-annually will potentially lead to an overload in application reviews for that session. Meeting quarterly would suggest fewer applications per gathering. Full Counsel decision.

## Notice of Funding Opportunity

\*Large Cap vs. Small Cap Organizations:

- Small caps-annual budgets
- under \$1M Large caps-annual budgets
- \$1M and over Allows for even playing field for similarly resourced

organizations.

**Funding Categories** 

**Estimated Total Available Funding** 

**Estimated Number of Awards** 

**Funding Opportunity Title** 

**Due Date for Applications** 

**Funding Opportunity Number** 

**Estimated Award Amount Cost Sharing/Match Required** 

**Anticipated Award Date** 

**Length of Project Period** 

**Eligible applicants** 

**Authorizing Statute** 

- **Anticipated Project Start Date**
- No (Proposed) 7/31/2023
- (Proposed) 6/15/2023

Tennessee Opioid Abatement Fund

them by quarter?)

TBD by Committee

TBD by Committee

-Harm Reduction -Treatment

-Recovery Support -Education/Training

2/28/2023

-Prevention

-Research

(If funding opportunity will be quarterly - number

TBD By Full committee (Large Cap vs Small Cap\*)

- Up to 3 years

- Eligible applicants are domestic public and private
- entities



# Break

# Work of the Council

### 1. Outside Parties Presentations to the OAC

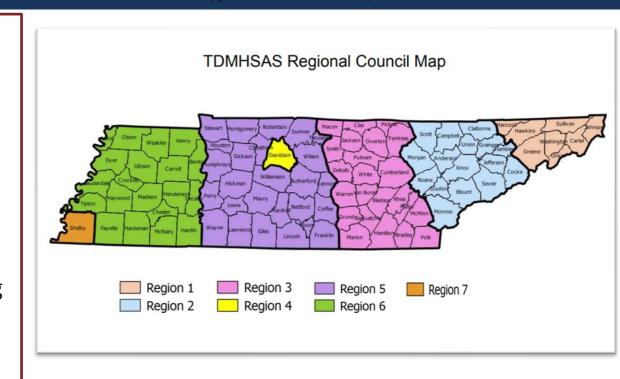
Opioid Abatement Council statutes provide that *before the Council makes a decision* regarding the disbursement of funds, the Council shall receive input from:

- (1) the department's statewide planning and policy council's need assessment process, which is conducted with the assistance of seven (7) regional planning and policy councils, and
- (2) allow for comment and input from community stakeholders, local governments, state and local public health officials, public health advocates, law enforcement and judiciary representatives, opioid remediation service providers, and other parties interested and actively involved in addressing the opioid crisis and its abatement.



### TDMHSAS Statewide Planning & Policy Council

- Councils and Committees consist of mental health and substance abuse service providers, consumers, family members, advocates and other stakeholders.
- 7 Regional Councils and 1 Statewide Council, which administers/partners with several committees, including the Adult Committee, the Children's Committee, and Consumer Advisory Board.
- All Councils and Committees meet quarterly





### Needs Assessment

- The Tennessee Department of Mental Health and Substance Abuse Services completes an annual assessment of need in order to prioritize programming.
- TDMHSAS ensures that the most relevant needs are prioritized by asking the Statewide and Regional Planning and Policy Councils to complete an annual Needs Assessment.
- Each Spring, the seven Regional Planning and Policy Councils as well as the Statewide Planning and Policy Council's Committees (Adult, Children's, and Consumer Advisory Board) work independently to identify and prioritize up to three mental health and three substance abuse needs. 2022 Needs Assessment Summary.

#### The process helps in two ways:

- 1. The planning and policy councils help identify regional needs and assets in order to influence the mental health and substance abuse system; and,
- 2. It provides a method for the Department to target limited state resources to more effectively and efficiently meet the identified needs.

### 2022 Needs Assessment - Multiple Region Needs

In 2022, multiple regions identified identical/similar substance abuse-related needs:

- Increase funding/number of and access to residential & detox beds for adults and children (identified in 2016, 2017, 2018, 2019, 2020, and 2021)
  - Regional Council 1
  - Regional Council 2
  - Regional Council 5
  - Regional Council 6
  - Regional Council 7
- Increase prevention and school-based programs for at-risk youth (identified in 2017, 2018, 2019, 2020, and 2021)
  - Regional Council 3
  - Regional Council 7
  - Children's Committee
- Increase recovery housing (identified in 2016, 2017, 2018, 2019, 2020, and 2021)
  - Regional Council 1
  - Regional Council 2
  - Adult Committee

<sup>\*</sup>The TDMHSAS Planning and Budget Committee of the Statewide Planning and Policy Council acknowledges that the department has created or expanded programs to address these needs in the past and on an ongoing basis.

# Discussion & Motion to Vote

# TDMHSAS Planning & Policy Council

- Frequency to hear updates
- Method to receive the information



### 1. Outside Parties Presentations to the OAC

Opioid Abatement Council statutes provide that *before the Council makes a decision* regarding the disbursement of funds, the Council shall receive input from:

- (1) the department's statewide planning and policy council's need assessment process, which is conducted with the assistance of seven (7) regional planning and policy councils, **and**
- (2) allow for comment and input from community stakeholders, local governments, state and local public health officials, public health advocates, law enforcement and judiciary representatives, opioid remediation service providers, and other parties interested and actively involved in addressing the opioid crisis and its abatement.



# Discussion & Motion to Vote

### Comment and input from community stakeholders

- Frequency
- Method
- Guidelines



# 2. County Grantee Application Process

In order to disburse the 1<sup>st</sup> payment to the counties by early Q12023, The Council Chair and Executive Director are proposing using systems currently available within TDMHSAS and the State of Tennessee.

#### **Proposed Process:**

- TDMHSAS Opioid Abatement Office will send a Request for Information to each County Mayor based on contact information from David Conner, Executive Director, Tennessee County Services Association.
- Each County Mayor will enter their contact information, certify that they will use the Tennessee Remediation List, sign the Letter of Authorization, and agree to Reporting Requirements.
- The funding for each county will be loaded in TDMHSAS Budget Contract Management System under the new OAC budget code. This will initiate the payment from Edison.
- Edison will pay the counties.
- The Comptroller will use a new and unique account code for the Opioid Abatement funds in order for the counties to track the funds

# Discussion & Motion to Vote

## County Grantee Application Process

- 1) Discussion and approval of the process developed within TDMHSAS to manage the first payment to the counties.
- 2) Does the Council wish to develop rules and time limitations for the use of medication assisted therapies in treating OUD that are paid for through the fund (T.C.A. 33-11-103(s))?
- 3) Does the Council wish to create a timeline for monies paid to the counties to revert back to the opioid treatment fund if they are not used within a certain period by a county (T.C.A. 33-11-103(s))?

# Next Opioid Abatement Council Meeting

- When to meet?
- Middle TN?



# Thank you