



EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES
COMMONWEALTH OF MASSACHUSETTS
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October 1, 2023

Michael D. Hurley, Clerk
State House, Room 335
Boston, MA 02133

Steven T. James, Clerk
State House, Room 145
Boston, MA 02133

RE: FY2023 Opioid Recovery and Remediation Fund (Fund) Annual Report

Dear Clerks Hurley and James:

On behalf of the Opioid Recovery and Remediation Fund Advisory Council (Council), I am pleased to provide the following letter summarizing the Opioid Recovery and Remediation Fund's activities, revenues, and expenditures, pursuant to Chapter 309 of the Acts of 2020. Please accept this letter as the Fund's Annual Report.

Opioid Recovery and Remediation Fund: To date, the Fund has received \$101,676,905.01 from opioid settlement recoveries secured by the Attorney General's Office (AGO), including \$62,758,301.34 in fiscal year (FY) 2023. Per statute, these funds are administered by the Executive Office of Health and Human Services, in consultation with the Opioid Recovery and Remediation Fund Advisory Council. During the Council's third year, a total of \$27.93 million in expenditures were made from the Trust Fund. Please find an overview of these expenditures in the Council Activities section below.

Council Activities: As of this report, the Council has met three times in 2023, and has focused its work on reviewing status updates to approved initiatives in flight; discussing and endorsing a forthcoming grant program to support community-based and municipal initiatives; leveraging the ORRF strategic framework, grounded in equity, to recommend spending priorities for FY2024; and welcoming and onboarding new Council members. The ORRF strategic framework prioritizes the investment of funds to address racial and geographic disparities in opioid use disorder (OUD), with a goal of creating a full continuum of prevention, harm reduction, treatment, services, and supports for an individual's recovery from opioid addiction and in support of their loved ones. A specific objective is that the ORRF funds augment and do not replace services and supports that are currently funded. In FY2023, the Council allocated a total of \$27.5 million across five initiatives. Below, please find an overview of each initiative.

Expansion of Harm Reduction Services

Annual ORRF Commitment: \$3.4 million

- Implemented Community Naloxone Purchasing Program. Since its launch, the program has distributed over 40,000 doses of Naloxone.
- Developed a competitive application opportunity for existing harm reduction partners to collaborate and expand through sub-contractual arrangements with organizations that reach historically underserved populations and communities. To date, seven programs have been awarded a contract under this opportunity, including:
 - Expanding harm reduction and HIV/HCV/STI testing services, inclusive of naloxone and the distribution of safe consumption supplies, to underserved communities in Springfield and Western Massachusetts;
 - Funding syringe service programming and additional outreach services on mobile health vans in Brockton and Worcester;
 - Funding the distribution of harm reduction kits in Boston Medical Center's emergency department, providing clinical staff with training on culturally competent care for patients who use drugs, and creating linkages to care follow-up teams to assist unhoused people who use drugs to remain on prescribed medication post-discharge.
- Increased access to fentanyl test strips by making them available at no cost through the newly-established Massachusetts Clearinghouse. Since launching in August 2022, the initiative has distributed over 274,000 test strips.

Increased Access to Medication for Opioid Use Disorder

Annual ORRF Commitment: \$3.1 million

- Expanded access to medications for opioid use disorder (MOUD), including by adding three new mobile methadone delivery programs and a new medication unit, with a focus on underserved communities.
 - New Mobile Methadone Delivery Programs: Worcester (operational), Wellfleet (operational), and Western region (operational Fall 2023).
 - New Medication Unit: Middlesex House of Correction (with a second unit, Suffolk County House of Correction, pending application approval).

Workforce

Total ORRF Commitment: \$15 million

- Strengthened OUD workforce by launching *The Substance Use Treatment Provider Loan Repayment Initiative*, part of the MA-Repay Program, with applications opening on December 5, 2022 and closing on January 30, 2023.
- Granted awards to all eligible applicants in August 2023, for a total of 395 substance use treatment providers. Award amounts ranged from \$12,500 to \$50,000, depending on provider credentials, degree, and full-time/part-time hours in an eligible setting.
- In surveying awardees, over half of respondents reported speaking a language other than English, 36% identified as BIPOC, and 81% reside outside the Greater Boston area, including 22% from Western Massachusetts and 24% from Central Massachusetts.

Expansion of Supportive Housing Programs

Annual ORRF Commitment: \$6 million

- Expanded statewide capacity of 16 supportive housing providers, resulting in more than 600 units contracted and available for the start of FY2024, over 400 of which have been filled.

Community Outreach and Engagement

- The Council reviewed findings from a landscape analysis it approved in the prior fiscal year to identify models of multidisciplinary community outreach teams that would be effective at engaging people at high risk of opioid overdose into treatment and promoting harm reduction.
- The Council discussed funding options for future fiscal years to pilot two community outreach teams, with important work ahead to ascertain a sustainability plan for this model.

During the Council's August 2023 meeting, the Council discussed and approved a multiyear grant program to support community-based and municipal initiatives, to foster innovative community efforts across the OUD lifespan, and to promote regional collaboration and enhance municipal efforts funded through municipal settlement dollars with matching ORRF grants. The Council continues to receive regular updates on ongoing litigation and settlements from the AGO, including an update during the June 2023 Council meeting in which the AGO estimated the Commonwealth will receive a total of \$1,004,203,674 in settlement funds over the next 18 years. Approximately 60% of these settlement funds, or roughly \$625 million, will go directly to the Fund, with the remaining 40% split across 150 cities and towns in the Commonwealth.

The Council recognizes the significant impact that these settlement funds will have in our State's efforts to combat the opioid epidemic, especially through an equity lens. To ensure the Fund has a maximum impact in addressing racial and geographic disparities, and promoting a full continuum of care across the OUD lifespan, the Council completed and approved its 3-5 year strategic plan during FY2023. Through a competitive procurement, KPMG was engaged to support these strategic planning efforts, including assessing service gaps within the Commonwealth, identifying best and promising practices in other states and municipalities, and conducting stakeholder sessions, for a total administrative expense of \$432,700. In addition to the annual grant program supporting community and municipal initiatives, described above, the Council looks forward to recommending additional investments for FY2024 pursuant to this strategic framework, to help drive the systemic changes needed to combat the opioid crisis.

The Council acknowledges and appreciates the Legislature's, Attorney General's, and Executive Branch's continued commitment to engage in assertive opioid prevention and treatment initiatives, and investments in upstream prevention, particularly among historically underserved communities.

Sincerely,



Kate Walsh
Secretary, Executive Office of Health & Human Services and
Non-voting Chair, Opioid Recovery and Remediation Fund Advisory Council

Cc: The Honorable Karen E. Spilka, Senate President
The Honorable Ronald Mariano, Speaker of the House

APPENDIX

Opioid Recovery and Remediation Fund Statute

Legal Authority: Chapter 309 of the Acts of 2020

Statute:

Section 35000 (a) There shall be an Opioid Recovery and Remediation Fund. Expenditures from the fund shall be made by the Executive Office of Health and Human services, without further appropriation and consistent with the terms of settlements made in connection with claims arising from the manufacture, marketing, distribution or dispensing of opioids, as applicable. The secretary of health and human services, in consultation with the Opioid Recovery and Remediation Fund advisory council established in subsection (b), shall administer the fund.

The fund shall be expended to mitigate the impacts of the opioid epidemic in the commonwealth, including, but not limited to, expanding access to opioid use disorder prevention, intervention, treatment and recovery options. Amounts credited to the fund shall not be subject to further appropriation and monies remaining in the fund at the end of a fiscal year shall not revert to the General Fund, but shall instead be available for expenditure during the next fiscal year. Any fiscal year-end balance in the fund shall be excluded from the calculation of the consolidated net surplus pursuant to section 5C of chapter 29.

There shall be credited to the fund: (i) amounts recovered by the commonwealth and credited thereto in connection with claims arising from the manufacture, marketing, distribution or dispensing of opioids; (ii) transfers from other funds authorized by the general court and so designated; (iii) funds from public or private sources, including, but not limited to, gifts, grants, donations, rebates and settlements received by the commonwealth designated to the fund; and (iv) any interest earned on such amounts.

(b) There shall be an Opioid Recovery and Remediation Fund advisory council regarding the expenditures from the fund. The council shall consist of the following members or their designees:

- the secretary of health and human services, who shall serve as a non-voting chair;
- 1 person to be appointed by the senate president;
- 1 person to be appointed by the speaker of the house of representatives;
- 1 person to be appointed by the minority leader of the senate;
- 1 person to be appointed by the minority leader of the house of representatives;
- 3 persons to be appointed by the governor, including not less than 1 person qualified by experience with opioid use disorder, either first-hand or as a family member of an individual with opioid use disorder;
- 3 persons to be appointed by the attorney general, including not less than 1 person qualified by experience with opioid use disorder, either first-hand or as a family member of an individual with opioid use disorder; and

- 10 people to be appointed by the Massachusetts Municipal Association, Inc., who are officials employed by a city or town and who represent the diversity of the commonwealth's cities and towns; provided, however, that not less than 2 officials appointed under this clause shall be employed by a city or town that is a gateway

municipality, as defined in section 3A of chapter 23A; and provided, further, that no 2 officials appointed under this clause shall be employed by a city or town that is in the same county.

In making appointments, the appointing authorities shall ensure that the council includes: (i) members representing racially and socioeconomically diverse communities; (ii) members with public health expertise concerning opioid use disorder; (iii) members with personal experience with opioid use disorder; and (iv) members who will contribute to reducing disparities in health outcomes for underserved communities experiencing opioid use disorder. The appointing authorities shall also consider having racially diverse representation on the council.

The council shall hold no fewer than 4 meetings annually and the council shall make its recommendations upon a majority vote. The council shall be subject to sections 18 to 25, inclusive, of chapter 30A. Council members shall serve without compensation for terms of 2 years. Members shall be reimbursed for actual expenses necessarily incurred in the performance of their duties. Any member shall be eligible for reappointment. In the event of a vacancy, the original appointing authority shall appoint a new member to fulfill the remainder of the unexpired term. Any member who is appointed may be removed by the appointing authority. The secretary of health and human services shall provide administrative support to the council.

(c) Annually, not later than October 1, the secretary of health and human services shall file a report on the activity, revenue and expenditures to and from the fund in the prior fiscal year with the clerks of the senate and the house of representatives, the house and senate committees on ways and means and the joint committee on mental health, substance use and recovery and made available on the executive office of health and human services' public website. The report shall include, but not be limited to: (i) the revenue credited to the fund; (ii) the amount of expenditures attributable to the administrative costs of the executive office; (iii) an itemized list of the funds expended from the fund; and (iv) data and an assessment of how well resources have been directed to vulnerable and under-served communities.

Opioid Recovery and Remediation Fund Advisory Council Membership

Council Chair (non-voting)

- Kate Walsh, Secretary, Executive Office of Health and Human Services

Appointed Members

- Jennifer Almonte, Lynn Department of Public Health
- Charles Anderson, MD, MPH, MBA, The Dimock Center
- Matilde Castiel, MD, Worcester Department of Health and Human Services
- Maureen Cavanagh, Magnolia New Beginnings
- Abby Dean, LICSW, Brookline Health Department
- Lisa Golden, Lowell Health & Human Services Department
- Lindsay Hackett, City of Springfield
- Kate Lena, Barnstable County Department of Human Services
- Adrian Madaro, Massachusetts House of Representatives
- John McGahan, Gavin Foundation
- Carla B. Monteiro, MSW, Grayken Center for Addiction, Boston Medical Center
- Jeffery Olmstead, Amherst Fire Department
- Andy Ottoson, Berkshire Regional Planning Commission
- Alyssa Peterkin, MD, Grayken Center for Addiction, Boston Medical Center
- Joanne Peterson, Learn 2 Cope
- David Rosenbloom, PhD, Boston University School of Public Health
- John Rosenthal, Police Assisted Addiction and Recovery Initiative (PAARI)
- Stephanie Sloan, New Bedford Health Department
- Jennifer Tracey, Boston Mayor's Office of Recovery Services
- LaToya Whiteside, Prisoners' Legal Services

Summary of Council Activities in 2023

June 14, 2023

Summary: *Welcome and introduction of new members, updates on ongoing settlements, ORRF strategic framework and review of initiatives in flight, call to action*

In addition to welcoming and introducing new Council members, and receiving updates on ongoing litigation led by the Office of the Attorney General, Council members reviewed the ORRF strategic framework presented in December 2022 and progress toward implementation of current initiatives in flight. The Council Chair facilitated a robust discussion anchored in a renewed call to action, especially in light of troubling 2022 data on the opioid epidemic. Council members highlighted key OUD gaps and needs, including workforce, the importance of aftercare/care continuity, community engagement, social determinants of health including housing, and the need to support children and families of those struggling with OUD. The Council agreed to convene in person for its Fall meeting, with a preference for a meeting location outside the Greater Boston area.

August 2, 2023

Summary: *Welcome and introduction of new members, discussion of strategic framework and proposed FY2024 funding approach, approval of new grant program to support innovative community initiatives and to provide matching funds for regional collaboration and promising municipal investments*

In addition to welcoming and introducing the new members, Council members discussed a proposed multiyear, stratified funding approach that encompasses dedicated funding for a community and municipal grantmaking initiative to be implemented by DPH-BSAS, as well as a significant allocation for larger scale, system change priorities. The Council approved moving forward in developing the community and municipal grantmaking initiative, and agreed to continue the discussion about advancing system change priorities at the next meeting scheduled to take place on September 27, 2023 in Worcester.

September 27, 2023 (held in person at Worcester City Hall)

Summary: *Synthesis of strategic themes and system change priorities raised by Council members to date, review of existing initiatives and discussion of potential opportunities by theme, recommending future priorities*

The Council Chair and Director of DPH-BSAS facilitated a discussion of system change priorities, by synthesizing strategic themes raised by Council members to date, presenting an overview of existing initiatives occurring in each thematic area, and fostering a discussion of potential opportunities by theme.