



EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES
COMMONWEALTH OF MASSACHUSETTS
ONE ASHBURTON PLACE, BOSTON, MA 02108

Tel: (617) 573-1600
Fax: (617) 573-1891
www.mass.gov/eohhs

MAURA T. HEALEY
GOVERNOR

KATHLEEN E. WALSH
SECRETARY

KIMBERLEY DRISCOLL
LIEUTENANT GOVERNOR

October 1, 2024

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

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

RE: FY2024 Opioid Recovery and Remediation 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 ("ORRF" or "Fund"): To date, the Fund has received \$207,245,292.38 from opioid settlement recoveries secured by the Attorney General's Office (AGO), including \$92,604,460.64 in fiscal year (FY) 2024. 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 fourth year, a total of \$23,842,846.17 in expenditures were made from the Fund. Please find an overview of these expenditures in the Council Activities section below. Importantly, the Council engaged in a strategic prioritization process in FY2024 to help optimize the Fund's impact in addressing racial and geographic disparities and promoting a full continuum of care across the opioid use disorder (OUD) lifespan. As guided by the Council, the ORRF's strategic priorities are equity; service expansion and enhancement; workforce; family supports; social determinants of health; and data collection and analysis. Pursuant to Massachusetts's [State Subdivision Agreement](#), the ORRF is also responsible for municipal capacity-building and technical support as cities and towns work to leverage municipal opioid settlement dollars to combat the opioid crisis. Guided by these priorities, the ORRF developed a [5-year spending plan](#) that calls for increased investments in FY2025-2029 to keep pace with funds coming into the ORRF, to ensure the Fund is maximizing its impact

in the Commonwealth's efforts to combat the opioid epidemic, especially through an equity lens. Under the plan, a minimum of \$55 million in investments across the ORRF's six strategic priorities has been identified and committed for FY2025, as described further below.

Council Activities: Since our last Annual Report, the Council has met four times, which it has spent prioritizing strategic initiatives in accordance with the mission, vision and principles of the [ORRF Strategic Framework](#); developing a 5-year spending plan based on these priorities; welcoming and onboarding new Council members; and discussing and providing feedback on key initiatives, including the ORRF's work to (a) expand low-threshold housing, (b) improve substance use disorder (SUD) data collection and analysis, (c) provide technical support for municipal opioid abatement, and (d) expand community-based investments. The ORRF strategic framework and priority initiatives reinforce the Commonwealth's and its municipalities' shared commitment to using abatement funds to supplement and strengthen SUD prevention, harm reduction, treatment, and recovery, particularly in historically underserved communities that have experienced a disproportionately high rate of opioid-related overdose deaths. Below, please find an overview of the Fund's FY2024 expenditures and FY2025 commitments to date, organized around the ORRF's six strategic priorities.

Equity

FY24 ORRF Commitment: \$4.38 million (\$16 million commitment planned for FY25)

- Launched the *Redefining Community Wellness Grant-Making Program* to intentionally center BIPOC voices throughout the grantmaking and capacity building process. This funding supports activities that include a wide range of programming to address substance use disorder directly, as well as indirectly by focusing on the social determinants of health and building organizational capacity. Moreover, this initiative is guided by community advisory boards whose members reflect the populations that have been disproportionately affected by the opioid epidemic.
- Invested in additional Black and Latino Men's Re-Entry program sites, funding local nonprofits and community-based organizations to provide culturally responsive wraparound services and case management pre-and post-release, including individual recovery support for SUD.
- Launched the Mosaic Opioid Recovery Partnership, an innovative public-private partnership with RIZE Massachusetts to implement an equity-centered community grantmaking program designed to create a pathway of access for grassroots organizations and municipalities to apply for ORRF funding. Mosaic seeks to foster innovative community efforts across the OUD lifespan, promote regional collaboration, and enhance local efforts funded through municipal settlement dollars, with a focus on organizations serving historically underserved communities that have experienced a disproportionately high rate of opioid-related overdose death.

Service Expansion & Enhancement

FY24 ORRF Commitment: \$10.5 million (\$24.5 million commitment planned for FY25)

- Established and/or expanded hospital-based SUD programs at 15 hospitals located throughout the state to provide addiction consult services and/or bridge clinics to increase access to care and strengthen linkages to ongoing care.
- Expanded access to medications for opioid use disorder (MOUD) by funding five new programs located throughout Massachusetts to add mobile components and/or medication units in areas of high need.
- Expanded access to harm reduction programming through Syringe Services Programs (SSPs) to include services not currently covered by federal funding, such as access to non-injection harm

reduction services and supplies, and additional education and information on the proper use of fentanyl test strips.

Workforce

- Carried over \$2 million of the ORRF's FY2023 \$15 million commitment to workforce into FY2024, to fund a second and final round of *The Substance Use Treatment Provider Loan Repayment Initiative*. This second round opened in Summer 2024 and award notifications are anticipated to be shared in Spring 2025, with the total round consisting of \$2 million.

Family Supports

FY24 ORRF Commitment: \$500K (\$3.5 million commitment planned for FY25)

- Funding a nonprofit that offers statewide peer grief support to individuals and families who have lost loved ones due to SUD, in which trained staff and volunteers serve as peer grief helpers who have experienced similar losses, which has led them to support other grieving people.

Social Determinants of Health

FY24 ORRF Commitment: \$6.65 million (\$8.0 million commitment planned for FY25)

- Expanded low-barrier recovery housing options and other basic needs support, including access to technology and transportation for high-risk populations in historically underserved communities, in which 585 individuals have been sheltered across seven low-threshold housing sites, and 200 of these individuals have been placed in permanent housing through a housing navigation program or have been housed through reunification with friends or family.

Data Collection & Analysis

FY24 ORRF Commitment: \$500K (\$2.0 million commitment planned for FY25)

- Deployed a new SUD Community Dashboard housed at the state's Bureau of Substance Addiction Services (BSAS), which includes (1) Community Profiles that provide disaggregated city, town, and county level data on substance-related deaths, emergency events, and services; and (2) a BSAS Enrollments page, which reports on individuals who received services for SUD, broken out by geography, fiscal year, and demographic characteristics.

Municipal Capacity-Building & Support

Annual ORRF Commitment: \$1.1 million

Per Massachusetts's State Subdivision Agreement, the ORRF is responsible for providing technical resources and support to participating municipalities receiving opioid abatement funding.

- Launched Care Massachusetts: The Opioid Abatement Partnership as the state-sponsored training and technical assistance (TTA) program for municipal opioid abatement. Care Massachusetts's goal is to ensure municipalities are equipped with knowledge, skills, and resources to effectively oversee opioid abatement activities at the local level. As the TTA provider, Care Massachusetts responded to over 480 individual requests from 179 municipalities; held 17 Office Hour sessions covering an array of topics including annual reporting, community engagement, and cross-sector collaboration; convened five regional forums; and hosted a two-day inaugural conference attended by 537 participants from 169 municipalities.
- Procured the services of the Massachusetts Association of Health Boards to provide training and technical assistance aimed at helping municipalities navigate the fiscal and/or legal considerations associated with pooling opioid abatement funds across jurisdictions, including conducting consultations with existing Public Health Excellence grantees; drafting and amending intermunicipal

agreements and memorandums of understanding; complying with municipal finance laws pertaining to fund appropriation and utilization; and establishing governance committees.

The Council continues to receive regular updates from the AGO on ongoing opioid litigation and settlements, including an update during the June 2024 Council meeting in which the AGO estimated the Commonwealth will receive a total of \$987,695,331.46 in settlement funds over the next 18 years. Approximately \$610 million of these settlement funds, or roughly 60%, 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 of these settlement funds in our State's efforts to combat the opioid epidemic, especially through an equity lens. In FY2024, we are pleased to highlight in particular the innovative public-private partnership with RIZE Massachusetts supporting community and municipal initiatives, described above, which is an annual commitment of up to \$6 million through the life of the 18-year Fund, and thus represents 18% of the entire ORRF principal. The Council looks forward to deploying additional investments in FY2025 pursuant to its six strategic priorities and 5-year spending plan, to help drive the systemic changes needed to combat the opioid crisis. The Council also looks forward to renewing a series of listening sessions across the Commonwealth in FY2025 to begin planning for its next 5-year spending cycle.

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,

A handwritten signature in cursive script, reading "Kathleen E. Walsh".

Kathleen E. 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

- Charles Anderson MD, MPH, MBA, The Dimock Center
- Matilde Castiel, MD, Worcester Department of Health and Human Services
- Maureen Cavanagh, Magnolia New Beginnings
- Michele Clark, Boston Public Health Commission
- Abby Dean, LICSW, Brookline Health Department
- Lisa Golden, Lowell Health & Human Services Department
- Lindsay Hackett, City of Springfield
- Vaira Harik, Barnstable County Department of Human Services
- Adrian Madaro, Massachusetts House of Representatives
- Candice McClory, Lynn Department of Public Health
- John McGahan, Gavin Foundation
- Carla B. Monteiro, MSW, LICSW, Grayken Center for Addiction at Boston Medical Center
- Jeffery Olmstead, Amherst Fire Department
- Andy Ottoson, Berkshire Regional Planning Commission
- Alyssa Peterkin, MD, Grayken Center for Addiction at 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
- LaToya Whiteside, Prisoners' Legal Services

Summary of Council Activities Since FY23 Annual Report

December 11, 2023

Summary: *Updates on settlement payments into the ORRF; review of municipal abatement funds; recommendation of funding priorities for FY25-29 based on Advisory Council feedback and ORRF strategic framework*

In addition to receiving updates on statewide opioid settlements and municipal abatement funds, the Council reviewed their ranking of ORRF priorities, as follows: 1. Equity; 2. Service Expansion; 3. Workforce; 4. Supporting Families; 5. Social Determinants of Health; 6. Data Collection/Analysis; and 7. Awareness. Based on these Advisory Council surveyed priorities and the ORRF strategic framework, the Council Chair presented and led a discussion of ORRF funding recommendations for FY25-29. Key feedback from the Advisory Council included ensuring data about outcomes and performance is disaggregated; ensuring smaller/nontraditional/innovative organizations in the community have equitable access to ORRF funding opportunities; the importance of supporting families; and leveraging ORRF funds toward system change.

March 6, 2024

Summary: *Welcome to new members; announcements regarding vendor selection for the ORRF's Community Grantmaking initiative, the upcoming MA Municipal Opioid Abatement Conference, and updates to the Municipal Opioid Abatement Expenditures Dashboard; review of ORRF strategic priorities and new and ongoing initiatives; presentation of the SUD Community Profiles Dashboard*

In addition to introducing new Council members and receiving updates on ongoing ORRF initiatives, including selection of RIZE Massachusetts as the vendor for ORRF's Community Grantmaking program, Council members reviewed the ORRF strategic framework first presented in December 2022 and progress toward implementation of strategic priorities. As part of that discussion, the Council reviewed and provided feedback on several new initiatives being rolled out pursuant to the ORRF's FY25-29 spending priorities discussed during the previous Advisory Council meeting. The Director of BSAS's Office of Statistics and Evaluation then presented on a new SUD Community Profiles Dashboard, which was developed to address communities' SUD data needs, and performed a live demonstration of the dashboard. Council members praised the dashboard and provided suggestions for future iterations of the dashboard.

June 13, 2024

Summary: *Welcome to new members; announcements regarding the ORRF's Mosaic Community Grantmaking initiative; updates on 2024 payments to the ORRF and ongoing litigation; review of the ORRF's strategic priorities and updates on initiatives in flight; presentation on ORRF investments in low-threshold housing*

In addition to welcoming new Council members, the Council received updates from the AGO on 2024 payments into the ORRF, and from the BSAS team on the upcoming application deadline for the first round of grants under the ORRF's Mosaic Community Grantmaking initiative. The Council also reviewed progress on implementation of the ORRF's six strategic priorities. The Director of BSAS's Office of Housing and Homeless Services then provided an in-depth presentation of the state's low-threshold

housing initiatives, including outcomes made possible due to ORRF investments to reduce housing instability for people experiencing SUD. Council members expressed appreciation for and provided feedback on the work of the ORRF in this domain.

September 10, 2024 (held in person at Lynn City Hall)

Summary: *Announcements regarding reporting on FY24 municipal settlement expenditures, the upcoming Massachusetts Municipal Opioid Abatement Report, and the ORRF's annual report to the General Court; review of the ORRF's strategic priorities and updates on initiatives in flight; presentation on the Mosaic Opioid Recovery Partnership*

In addition to receiving updates on upcoming municipal and annual reports, the Council reviewed progress on implementation of the ORRF's six strategic priorities and ORRF revenues and expenditures to date, as well as provided feedback on initiatives in flight. RIZE Massachusetts then provided an in-depth presentation of the ORRF-funded Mosaic Opioid Recovery Partnership, including the recently-awarded Community-based Opioid Response Efforts (CORE) grants, as well as an upcoming application for Municipal Matching Grants. Council members voiced their support for Mosaic and provided feedback on future grant opportunities.