OPIOID RESTITUTION FUND

ADVISORY COUNCIL

Meeting Minutes

November 14, 2022

1:00 p.m. – 3:00 p.m.

I. Welcome and Introductions

OOCC Executive Director, Robin Rickard, welcomed advisory council members and those viewing the meeting as members of the public.

Members present: Robin Rickard, Attorney General Brian Frosh, Delegate Samuel Rosenberg, Marian Bland, Lauren Levy, Dr. David Myles, Tiffinee Scott, Marcus Webster, Kristin Thomas, Carlos Hardy, Meghan Westwood, Howard Ashkin

Members not in attendance: Tricia Roddy and a designee for the Senate

Council staff: Teresa Heath

II. Overview of Settlement and Timeline

Presented by AG Brian Frosh

McKinsey & Company

- Role in marketing OxyContin for Purdue
- $12,048,381.47 (2.11% of national share)
- $10,533,137.84 paid
- $517,081.21 more due each spring, 2023-2025

Johnson & Johnson (and Distributors)

- Maryland will receive $395 million over 18 years
- Baltimore City did not participate (MD share reduced by $100 million)
- 30% for statewide use
    - $23 million in FY23
    - Distributed in accordance with ORF
- 45% to state to make grants to subdivisions
    - $24 million in FY23

- 25% paid directly to subdivision
    - $13.5 million in FY 23

Mallinckrodt

- Approximately $23 million over 8 years
    - $3.3 million in FY23
    - Uses different allocation than J&J settlement
    - Most funds will go into ORF with requirements that the state will distribute a certain amount to support to local programs

Endo

- Approximately $9 million paid over 10 years.

Purdue Pharma & The Sacklers

- Maryland is expected to receive between $120-$132 million over 18 years pending judicial approval.
- Distributions between between state and local entities

ORF

- In total, approximately $24 million is expected to be received during FY23 (J&J)
- Most funds will be available by December.
- An additional $24 million will be made available to MDH to be distributed as grants according to the state-subdivision agreement
- $3.3 million from Mallinckrodt

III. Overview of the ORF and Advisory Council

Presented by Teresa Heath, OOCC Deputy Director

The Opioid Restitution Fund (ORF) was established through House Bill 1274, which passed during the 2019 legislative session. The ORF is a special, non-lapsing fund that was created to hold the funds received by Maryland from settlements with the opioid industry.

The fund may only be used to support certain programs, including:

- Improving access to naloxone and other medications proven to prevent or reverse an opioid overdose
- Peer support programs and Screening, Brief Intervention, and Referral to Treatment for hospitals, correctional facilities and other high-risk populations
- Increasing access to medications that support recovery from substance use disorder
- Expanding the Heroin Coordinator Program
- Expanding access to crisis beds and residential treatment services
- Expanding and establishing Safe stations, mobile crisis-response systems, and crisis-stabilization centers
- Supporting the health crisis hotline
- Organizing primary and secondary school education campaigns to prevent opioid use

- Enforcing laws regarding opioid prescriptions and sales
- Research and training for treatment and overdose prevention
- Supporting and expanding other evidence-based interventions for overdose prevention and substance use treatment.

The Opioid Restitution Fund advisory council was established during the 2022 legislative session, with the passage of House Bill 794. This legislation charges advisory council members with providing specific findings and recommendations on the use of ORF funds that take into account the impacts of the overdose crisis on our state, available resources for individuals with substance use disorders, and disparities in access to care and health outcomes. The council met for the first time in November 2022 and will meet again in January 2023.

IV. Organizational Items

Presented by Teresa Heath, OOCC Deputy Director

The advisory council is required to meet at least four times per year, and as otherwise called by the chair.

In order to conduct a meeting, the majority of members must be present for the meeting. Otherwise, the meeting will be rescheduled.

The council is able to adopt organizational policies and procedures, provided they pass by two-thirds vote.

Lastly, this council is required to comply with the Open Meetings Act. This entities the general public to the following:

A. Adequate notice of the time and location of meetings
B. To view the agenda available in advance
C. The ability to witness the meeting and the phases of the deliberation, policy formation, and decision making that take place.

Members of the council are expected to attend meetings, review documents and correspondence between meetings, and respond to communications from the chair or council staff.

Members are expected to comply with the Maryland Public Ethics Law, and to file a financial disclosure form with the state.

This group is responsible for providing written recommendations to the governor and secretary of health, which take the following factors into consideration:

- The rate of substance use disorders and overdoses by jurisdiction
- Disparities in access to care and health outcomes
- The availability of necessary programs, services and supports

V. Group Discussion

OOCC plans to provide the following data and resources: Data-Informed Overdose Risk Mitigation (DORM) report, 2022-2024 Opioid Coordination Plan, Racial Disparities in Overdose Taskforce recommendations, MDSOS Town Hall feedback

We need to designate a chair for the council.

Considering the information that the AG shared, we need to develop a timeline for initial recommendations.

When should we meet next? The member consensus in the chat was that a virtual meeting in the second or third week of January would be best for the next meeting.

Notices to local subdivisions have already been sent out addressing the funds that will go directly to them. Funding is expected by the end of 2022.

Oversight is built into the settlements. Local governments were required to establish local abatement funds similar to the ORF. Distributions will be made to those funds and will be spent in accordance with their

Q: What opioid programs/initiatives are currently being funded through various sources?
A: We will gather some information to share with the council.

Q: (from Delegate Rosenberg) How much money is in the fund currently?
A: We will share the breakdown of where the funds from the McKinsey settlement have been spent/allocated.

Del. Rosenberg comment: The General Assembly will approve the FY2024 budget in January.

Q: (from Howard Ashkin) Will organizations whose employees serve on the council be exempt from ORF funding?
A: No. We've been advised that because the ORF Advisory Council will not be scoring applications or determining which organizations receive funding, members will not be exempt from receiving ORF funds.

VI. Issues mentioned by members of the public:

- Increase in overdoses in the 55+ population.
- Overlap of mental health and substance use disorders and the need for integrated care approaches.
- Request to focus on smaller marginalized populations that may not speak English, have access to health care, and may live in multi-generational households.
- Need to focus on social determinants of health.