



AGENDA

Eau Claire County
Opioid Settlement Task Force
Tuesday, December 20, 2022, at 5:30 p.m.
Eau Claire County Government Center
721 Oxford Ave., Eau Claire • Room 3312

Join from the meeting link:

<https://eauclairecounty.webex.com/eauclairecounty/j.php?MTID=m595ea5fbbd692c69f8fbc5c91f9ef9dd>

Join by meeting number:

Meeting number: 2598 030 4468 Password: cxAKi5t8Ek7

Join by phone:

Dial in: 415-655-0001 Access Code: 2598 030 4468

1. Call to Order and confirmation of meeting notice
2. Roll call and introductions
3. Public Comment
4. Election of Chair and Vice-Chair – **Discussion/Action**
5. Meeting decorum – **Information/Discussion**
 - a. Open Meetings Law
 - b. Roberts Rule Overview
6. Scope of the Task Force – **Discussion/Information**
7. Set meeting schedule – **Discussion**
8. Adjourn

Prepared by: Samantha Kraegenbrink – Assistant to the County Administrator

PLEASE NOTE: Upon reasonable notice, efforts will be made to accommodate the needs of individuals with disabilities through sign language, interpreters, remote access, or other auxiliary aids. Contact the clerk of the committee or Administration for assistance (715-839-5106). For additional information on ADA requests, contact the County ADA Coordinator at 839-6945, (FAX) 839-1669 or 839-4735, TTY: use Relay (711) or by writing to the ADA Coordinator, Human Resources, Eau Claire County Courthouse, 721 Oxford Avenue, Eau Claire, WI 54703.



Recommendations for Use of National Prescription Opioid Litigation Settlement Funds

**Eau Claire County Opioid Task Force
May 2022**

Introduction

On January 28, 2022, Eau Claire County Administrator Kathryn Schauf formed the Eau Claire County Opioid Task Force (Task Force) in response to the settlement reached in the National Prescription Opiate Litigation. Membership of the Task Force included individuals from public health, human services, law enforcement, criminal justice, and veterans' services departments. The Task Force was charged with engaging in cross-functional discussion regarding the current state of the opioid crisis in the County to identify gaps in programming and funding and develop recommended uses for the expected funding Eau Claire County will receive as part of the settlement.

Background

While a full recitation of the history of opioids in the U.S. is outside of the scope of this paper, a brief overview is in order to provide a general idea of the scale of the issue.

Opioids are a particular class of both prescription and illegal street drugs. Prescription opioids, like oxycodone, hydrocodone, morphine and others, when prescribed and used correctly can effectively relieve pain (United States Department of Health and Human Services [HHS], n.d.-a). Incorrect use or prescription opioids or use of illegal opioids such as heroin or fentanyl creates a risk of dependence and addiction. The United States has a long, winding history with opioid use, both licit and illicit, stretching back to the late 1800s (National Association of County & City Health Officials [NACCHO], 2019). Opioids and other pain-reduction remedies were widely unregulated until Congressional action in 1914 (Jones et al., 2018). This action was prompted by increased presence of illicit opiates on the streets and growing concern with opioid dependency. The result of the legislation was a general aversion to opiates by prescribers and patients alike for most of the 20th century. The late 1990s, however, saw a resurgence in opioid pharmaceutical products and their prescription. Increased availability of new prescription opioids, coupled with misinformation about their addictive nature perpetuated by the pharmaceutical companies, lead to significant over-prescription (NACCHO, 2019).

Since 1999, overdose deaths involving prescription opioids has increased six-times (NACCHO, 2019).

The U.S. government officially declared the opioid epidemic a public health emergency on October 16, 2017 (Jones et al., 2018). Despite the declaration, the opioid epidemic is still raging. More than 70,000 people died from drug overdose in 2019 and 1.6 million people reported having an opioid use disorder in 2019 (HHS, n.d.-b).

In light of the dramatic, irreparable harm caused by the misinformation and recklessness of pharmaceutical manufacturers and distributors with prescription opioids, various civil lawsuits were filed by the federal, state, and local governments against opioid distributors and manufacturers (Addiction Center, n.d.). The most sweeping of the lawsuits, and perhaps the largest ever civil law lawsuit in U.S. history, is *In re: National Prescription Opiate Litigation*, Case No. MDL 2804. The National Prescription Opiate Litigation is a consolidation of more than 2,000 opioid-related lawsuits that were filed in various U.S. courts (Dwyer, 2019). On July 21, 2021, a settlement agreement was announced to resolve the vast majority of the lawsuits under the National Prescription Opiate Litigation.

In response to the settlement reached under National Prescription Opiate Litigation, [2021 Wisconsin Act 57](#)¹ was enacted, establishing [Wis. Stat. § 165.12](#) which governs how the funds from the settlement are used by the state and local governments. In relevant part, Wis. Stat. § 165.12 sets forth the following requirements for local governments receiving settlement funds:

- All funds must be deposited into a segregated account and may not be comingled with any other funds.
- Funds may only be used for approved opioid abatement purposes as identified in the [settlement agreement](#) or other court order.
- Funds may not be used to substitute for budgeted funds from other sources.
- Funds may be pooled between other local governments if each local government complies with these and other reporting requirements.
- Local governments must submit a report to the Wisconsin Department of Justice and Joint Committee on Finance by May 1 of each year. The report must include the amount of the money in the segregated account as of December 31 of the previous year and an accounting of the receipts and disbursements from the segregated account.

2021 Wisconsin Act 57 mandates 30% of the total settlement proceeds as payable to the State. The remaining 70% of the total settlement proceeds are payable to the local governments that are parties to the litigation. The Eau Claire County Board of Supervisors, having previously joined the litigation, voted to enter into a proposed settlement of the litigation in December 2021 making Eau Claire County eligible for a share of the 70% allocation. In total, Eau Claire County is expected to receive approximately \$3.3 million dollars over 18 years as part of the settlement. After applicable attorney and other court ordered fees are assessed, Eau Claire County will receive

¹ For a detailed explanation of 2021 Wisconsin Act 57, see the [Wisconsin Legislative Council Act Memo](#).

approximately \$2.5 million dollars, or approximately \$137,000 each year, for 18 years for opioid abatement purposes.

Recommendations

In coming to the recommendations that follow, the Task Force met seven times between February and May 2022. The Task Force reviewed various publications that outline best practices for opioid treatment and abatement (See, e.g., Carroll, Green, & Noonan, 2018; NACCHO, 2019) and relied on the collective knowledge and expertise of the Task Force members.

The Task Force recommends using settlement funds to support the following projects and programs:

- A. Medication-Assisted Treatment (MAT) support in the Eau Claire County Jail with a focus on MAT maintenance while incarcerated.
 - a. Deemed one of the most effective therapies for opioid dependence by the World Health Organization (2004), MAT provides patients with FDA approved medication that has been proven to assist patients with opioid withdrawal symptoms. MAT is administered by qualified healthcare professionals. By establishing a MAT maintenance program in the Eau Claire County Jail, individuals experiencing periods of incarceration will be able to continue to receive the needed medication to help them lead a normal life.
- B. Sober living opportunities in the community including increasing available in-patient bed space and peer support.
 - a. A key to maintaining sobriety is surrounding oneself with a community of likeminded individuals and stable housing. Increasing sober living opportunities and support networks within them is one way to assist individuals who are on the path of recovery from opioid use disorder.
- C. Peer support programs, with funding specifically used to deploy peer support after periods of incarceration or hospitalization.
 - a. The bedrock of successful re-entry into the community after individuals experience periods of incarceration or hospitalization is a support network. By expanding accessibility of community-based peer support programs that are available prior to re-entry, individuals can have an established support network in place and ready to help them get back to normal life.

- D. Naloxone supply and distribution, including additional or total allocation of naloxone based on jurisdiction or organization.
 - a. Naloxone (better known by the brand name Narcan) is a fast acting opioid antagonist that can safely reverse the oftentimes fatal effects of an opioid overdose. By ensuring first responders, community agencies, organizations, and citizens have access to and education about the proper administration of naloxone, opioid overdose fatalities can be reduced.
- E. Licit and illicit opioid disposal options in the community including bags, receptacles, needles, needle collection.
 - a. Reducing the overall amount of opioids in the community is essential to begin addressing the root of the opioid crisis. Providing no-questions-asked disposal options for both licit and illicit opioids and related paraphernalia is one way to begin the reduction of overall quantity. Individuals can simply place unused or unwanted opioids in receptacles that are routinely emptied.
- F. AODA assessment services for individuals experiencing a period of incarceration in the Eau Claire County Jail.
 - a. In order to begin the journey to recovery from not only opioid use disorder but other substance use disorders is understanding the scope and scale of the needs of the individual. By expanding AODA assessment services in the Eau Claire County Jail, individuals will be more likely to receive the targeted care and treatment that will best addresses their particular needs.
- G. Opioid Treatment funds (program and R&B) for uninsured or underinsured persons.
 - a. Removing financial access barrier for residents that are uninsured and/or underinsured is a way to provide timely treatment to an individual that might otherwise forgo treatment. Eligible residents must have an opioid dependency diagnosis, poly substance dependency diagnosis, or documented opioid use history.

The Task Force further recommends the following:

- A. Public input sessions for settlement fund use.
- B. Transparent annual review of settlement uses, availability, and best practices.
- C. Formation of a continued planning and oversight group for the duration of the settlement fund use period.

The foregoing recommendations should be considered as a starting point and adjustments may be necessary as final settlement amounts are determined and additional statutory and administrative rules may be promulgated. Initial program area budgets are attached as Appendix A. In coming to the funding figures, there is still uncertainty about the full cost of each program as the Task Force was unable to fully flesh costs and had to rely on best-estimate costs and they are still being collected.

Conclusion

While the settlement funds Eau Claire County, and the rest of the nation, is to receive from the National Prescription Opiate Litigation pales in comparison to the incredible amount of money and resources already expended to respond to the opioid crisis, the additional funding to support expansion and creation of new evidence-based programs is welcome. This initial work of the Eau Claire County Opioid Task Force is just the beginning on the long road to remedying the lasting and devastating effects of the opioid epidemic. Though the task ahead is daunting, the Task Force expressed great hope and commitment to serving all Eau Claire County residents affected by the opioid epidemic.

Appendix A – Budget

Program	Description(s)	Annual Cost
A.	MAT support – Eau Claire County Jail - focused on MAT maintenance while incarcerated. Calculation/Estimate: Jail is working with a contractor.	\$ 23,674.00
B.	Sober Living –bed increases, peer support. Calculation/Estimate: EC Sober living sponsorship 1500/mo x 15 mo	\$ 22,500.00
C.	Peer Support Programs – funding could be used to deploy peer support after incarceration or hospitalization. Calculation/Estimate: Certified Peer Support Specialist 60\$/hr x 416 hours	\$ 24,960.00
D.	Narcan Supply/Distribution – to include additional or total allocation of Narcan based on jurisdiction or organization. Calculation/Estimate: \$75 per unit (2 doses/unit); 250 units = 18750	\$ 18,750.00
E.	Illicit and licit opioid disposal – bags, receptacles, needles, needle collection. Calculation/Estimate: 6 community needle disposal bins + monthly pick-up = 19160 300 lock boxes (32.95/ea) and 100 lock bags (20.95/ea)= 11980	\$ 31,140.00
F.	AODA Assessment Services in the county jail environment. Calculation/Estimate: \$55/hr* 208	\$ 11,440.00
G.	Opioid Treatment funds (program and R&B) for uninsured or underinsured persons. Calculation/Estimate: 30 residential days @ \$339/day program max + \$101/Day R&B max	\$ 13,200.00
		\$ 145,664.00

References

- Addiction Center. (n.d.) *Notable opioid settlements*. <https://www.addictioncenter.com/opiates/opioid-epidemic/notable-opioid-settlements/>
- Carroll, J.J., Green, T.C., & Noonan, R.K. (2018). *Evidence-based strategies for preventing opioid overdose: What's working in the United States: An introduction for public health, law enforcement, local organizations, and others striving to serve their community*. United States Centers for Disease Control and Prevention. <https://www.cdc.gov/drugoverdose/pdf/pubs/2018-evidence-based-strategies.pdf>
- Dwyer, C. (2019, October 15). *Your guide to the massive (and massively complex) opioid litigation*. NPR. <https://www.npr.org/sections/health-shots/2019/10/15/761537367/your-guide-to-the-massive-and-massively-complex-opioid-litigation>
- Jones, M.R., Viswanath, O., Peck, J., Kaye, A.D., Gill, J.S., & Simopoulos, T.T. (2018). A brief history of the opioid epidemic and strategies for pain medicine. *Pain and Therapy*, 7(1), 13–21. <https://doi.org/10.1007/s40122-018-0097-6>
- Koss, T. (2021). *Act memo: 2021 Wisconsin Act 57 [2021 Assembly Bill 274]: Settlement of the multidistrict opiate litigation*. Wisconsin Legislative Council. <https://docs.legis.wisconsin.gov/document/lcactmemos/2021/REG/Act%2057.pdf>
- National Association of County & City Health Officials. (2019, May). *Local opioid overdose prevention and response: A primer for local health departments*.
- World Health Organization. (2004). *WHO/UNODC/UNAIDS position paper: Substitution maintenance therapy in the management of opioid dependence and HIV/AIDS prevention*. apps.who.int/iris/bitstream/10665/42848/1/9241591153_eng.pdf?ua=1
- United States Department of Health and Human Services. (n.d.-a) *What are opioids?* <https://www.hhs.gov/opioids/prevention/index.html>
- United States Department of Health and Human Services. (n.d.-b) *What is the U.S. opioid epidemic?* <https://www.hhs.gov/opioids/about-the-epidemic/index.html>