

OPIOID SETTLEMENT ADVISORY COMMITTEE (OSAC)
Meeting of Tuesday, March 11th, 2025
Teams Virtual Meeting
10:00 a.m. – 12:00 p.m.

ATTENDANCE

Members/Designees: Nancy Navarretta, Commissioner, Jennifer Kolakowski, Dr. Srinivas Muvvala; Judy Dowd, OPM; Kimberly Grove; Senator Cathy Osten; Representative Toni Walker, Hartford; Bridget Fox; First Selectwoman Maureen Nicholson, Pomfret; John Lally; Patrick McCormack, Amy Bethge, Erica Teixeira, Maritza Bond, Maggie Young, Robert Miller, Megan Albanese, Attorney Timothy Birch, Elizabeth Rivera-Rodriguez, Christine Gagnon, Ebony Jackson-Shaheed, Erica Texeira, Russell Melmed, Tracey Hanson, Dr. Marilyn Sanders, Janine Vose, Kevin Elak, Daniel Rezende, Mayor Thomas Dunn, Katherine Tucker, Katherine Milde, Representative McCarthy Vahey, Mayor Elinor Carbone, Torrington, Elizabeth Fitzgerald, Representative Tammy Nuccio, Kevin Elak, Jeanne Milstein, Kaye White, Senator Heather Somers, Katherine Tucker, Mayor Paul Pernerewski

Visitors/Presenters: Luiza Barnat; Christopher McClure, Danielle Ebrahimi, Dr. David Fiellin, Michael Hines, Sarah Messier-Smith, Matthew Fitzsimmons, Gretchen Shugarts, Dr. Sheila Alessi, Robert Heimer, Justin Mehl, Michael Williams, Gail D'Onofrio, Kris Robles, Susan Logan, Keith Radziwon, Gina Florenzano, Melissa Sienna, Taylor Aitken, City of Waterbury, Lora Passetti, Gary Roberge, Sandra Springer, Kevin Shuler, Andrew Brown, Kimber King, Kimberly Haugabook, Erica Previti, Carl Schiessl, Edith Atwerebour, Karolina Wytrykowska, Evan Dantos, Eliza Halsey, PJ Cimini, Katherine Meslow, Travis Tanuis

Recorder: Melanie Richard

The March 11th, 2025 meeting of the Opioid Settlement Advisory Committee (OSAC) was called to order at 10:00 a.m. by Commissioner Nancy Navarretta, DMHAS.

Topic	Discussion	Action
Welcome and Introductions	Commissioner Navarretta welcomed all in attendance.	Noted
Review and Approval of Minutes	Minutes approved from the January 14 th , 2025 meeting – moved by Attorney Timothy Birch, seconded by Representative Tammy Nuccio.	Informational
Administrative Updates	<p>Chris McClure, DMHAS Chief of Staff, gave a presentation on updates regarding the Opioid Settlement Advisory Committee and the funding disbursements of the settlement dollars thus far. Please see the linked Power Point presentation for key takeaways.</p> <p><u>Presentation by Chris McClure: Administrative Update OSAC Update</u></p> <p>As of January 14th, 2025, the State has received a total of \$158,299,575, with funding recommendations having passed for \$91,279,158, leaving a balance in the fund of \$67,020,417. The estimated annual budget is \$33,333,333 and, to date, the estimated approved recommendations amount is \$28,738,203. Today, the OSAC is considering one recommendation with a total of \$2,160,000.</p> <p>Representative Nuccio asked if anyone from the Governor's Office has spoken to the DMHAS team about their assumptions that they're building into the budget the use of this funding for the next two fiscal years, to which Chris McClure responded yes, that OPM and he had spoken about that. This proposal would not affect any recommendations that had already been passed by this Committee.</p> <p>Representative Walker asked if there are any projected dates for the contracts for passed recommendations. Luiza Barnat explained that the projects are either in the stage where the RFP process has been completed, and others are being worked on for contract execution. Unfortunately there's not one date for the entire list of passed recommendations but they are all being worked on according to the dates that were presented.</p>	Informational Chris McClure, DMHAS

Topic	Discussion	Action
	<p>When it comes to the Governor's requests in the budget, the procedure for the use of OSAC funding will be that they will have to follow the recommendation process, so those will come to the Committee for review.</p>	
<p>Funding Recommendations for Committee Vote:</p> <ul style="list-style-type: none"> • Connecticut Community for Addiction Recovery (CCAR) Emergency Department Recovery Coach (EDRC) Continuation 	<p>Nancy Navarretta, Commission, DMHAS presented the following recommendation for Committee review and vote:</p> <p>Title: <u>Connecticut Community for Addiction Recovery (CCAR) Emergency Department Recovery Coach (EDRC) Continuation</u></p> <p>The purpose of this recommendation is to provide continued funding for Recovery Coaching in the Emergency Departments at 9 acute care hospitals (Bradley Memorial, Bridgeport Hospital, Greenwich Hospital, John Dempsey Hospital, Milford Hospital, Sharon Hospital, Waterbury Hospital and the two Yale New Haven Campuses). Funding for this initiative will expire on 6/30/25.</p> <p>In March 2017, DMHAS partnered with CCAR to pilot an initiative that pairs on-call recovery coaches with Emergency Departments in four hospitals in eastern Connecticut. The recovery coaches, who are individuals with lived addiction recovery experience, assist people who are admitted with opioid overdose and other alcohol or drug-related medical emergencies and connect them to treatment and other recovery support services. CCAR coaches provide Naloxone education bedside and educate individuals on various Harm Reduction resources, including connecting the individual to their chosen resources and services. Coaches are available 16 hours per day (8:00 am – 12:00 midnight), 7 days per week. With information from this successful pilot and support of federal grants, the program expanded to additional hospitals in 2018, serving a total of 22 emergency departments. This portion of the initiative is funded through SAMSHA SOR funding.</p> <p>In 2022, DMHAS partnered with CCAR to expand the initiative into the last 9 acute care hospitals to cover all 31 emergency departments in CT, as well as 5 Satellite 24-Hour Emergency Departments. This made Connecticut the first state to offer this service to every emergency department. The CCAR EDRC expansion was initially funded by the McKinsey Settlement Fund, and funding will expire on 6/30/25.</p> <p>In 2023, CCAR received 5056 referrals from the original 22 SOR-funded Hospitals and 565 referrals from the additional nine, during which time CCAR Recovery coaches aided in the connection to care to over 55 different community-based providers. In 2024, CCAR received 1250 referrals from the nine hospitals included in this recommendation. Based on the individual's identified wants and needs, individuals were connected to a variety of levels of care including Withdrawal Management, Inpatient Treatment, Intensive Outpatient, Medication for Opioid Use Disorder, and Outpatient Treatment. The Recovery Coaches involved in this initiative are expected to be well-versed in Evidence-Based Practices (EPB) for opioid use disorders (OUD), including Medications for Opioid Use Disorder (MOUD), to ensure all eligible clients are educated on MOUD and other EBP as treatment options, including awareness of the decrease in overdose risk when an individual is receiving MOUD vs other available treatments.</p> <p>A report compiled in 2021 by individuals with Yale Program for Recovery and Community Health identified that persons treated for an opioid-use disorder or overdose in one of CT's EDs who had a CCAR Recovery Coach had a significantly reduced chance of death or likely death than those without a RC, despite presenting with greater severity of illness (including comorbid serious mental illness, history of suicide attempts, and polysubstance use). Additionally, these individuals were more likely to receive withdrawal management, IOP, MOUD treatment with Suboxone, and other therapeutic services.</p> <p>Funding Amount Requested: \$60,000 per hospital annually for 9 hospitals Annual Amount: \$540,000 Number of years: 4 Total Amount Requested: \$2,160,000</p>	<p>Motion to Vote</p>

Topic	Discussion	Action
	<p>CORE Priority: #1 Linkage to Treatment Category: <input type="checkbox"/> treatment <input type="checkbox"/> harm reduction <input type="checkbox"/> prevention <input checked="" type="checkbox"/> recovery supports</p> <p>Recommended Lead & Partnering Agencies: Department of Mental Health and Addiction Services Connecticut Community for Addiction Recovery</p> <p>Vetted by Referral Subcommittee? <input checked="" type="checkbox"/> yes</p> <p>Vetted by Research and Data Subcommittee? <input checked="" type="checkbox"/></p> <ul style="list-style-type: none"> • EBP <input checked="" type="checkbox"/> or Promising Practice <input type="checkbox"/> Program evaluation recommended? <input type="checkbox"/> yes <input checked="" type="checkbox"/> no • Pilot <input type="checkbox"/> or Established Program <input checked="" type="checkbox"/> • Local or Statewide Rollout <input checked="" type="checkbox"/> <p>Vetted by Finance and Compliance Subcommittee? <input checked="" type="checkbox"/></p> <ul style="list-style-type: none"> • Allowable Strategy <input checked="" type="checkbox"/> Compliant yes <input checked="" type="checkbox"/> no <input type="checkbox"/> • Proposed Funding Amount: \$540,000 annually for 4 years totaling \$2,160,000 • Approved Funding Amount: same as proposed <p>Proposed Project Dates: 7/1/25-6/30/29</p> <ul style="list-style-type: none"> • Approved Project Dates: same as proposed • Budget submitted <input checked="" type="checkbox"/> • RFP <input type="checkbox"/> Sole Source <input checked="" type="checkbox"/> <p>Kevin Elak confirmed that this funding is just for the nine hospitals listed in the recommendation and that the other twenty-two hospitals are funded through different sources, such as through our federal grant, State Opioid Response Grant (SOR). The SOR Grant is approved until September 30th, 2027.</p> <p>This recommendation passed with 28 in favor and 1 abstention.</p> <p>To note, there were two other recommendations where subcommittees have asked for additional information and include the Youth HYPE Program and the Connecticut Drug Data Collaborative, which had presentations in the last Committee meeting. Once that additional information is provided, they will be presented to the subcommittees once more for review, so we may see those at a later Committee meeting date.</p>	

Topic	Discussion	Action
Subcommittee Updates	<p>Referral: Luiza Barnat on Behalf of First Selectman Rudy Marconi</p> <p>This subcommittee continues to meet and review proposed recommendations. The Referral Subcommittee will be meeting before the next scheduled Opioid Settlement Advisory Committee meeting to review additional proposed recommendations. This subcommittee also reviewed the budget as we did here at the beginning of this meeting.</p> <p>Research and Data: Dr. Srinivas Muvvala</p> <p>This subcommittee has continued to meet monthly and review the recommendations received from the referral and other subcommittees and will be meeting before the next scheduled Opioid Settlement Advisory Committee meeting. The subcommittee had a few questions on two proposed recommendations, so they are currently waiting to hear back from those who made the proposals. During these meetings, the group also discussed what kind of data we should obtain from the recommendations that were put forth already and in place, and there is a document for review: OSAC Recommendation Data Planning</p> <p>There will be specific data set points from these so that the group can analyze them and submit that information back to this committee.</p> <p>Finance and Compliance: Representative Toni Walker</p> <p>This subcommittee continues to meet and review proposed recommendations and will be meeting before the next scheduled Opioid Settlement Advisory Committee meeting. There were two recommendations proposed that were not approved, and this subcommittee has instead asked for more information before moving forward with that decision.</p>	<p>Informational</p>
Public Comment <ul style="list-style-type: none"> Dr. Gail D'Onofrio 	<p>Dr. Gail D'Onofrio wanted to discuss the role model of having these substance use navigators, or as they have them in the Yale System Project Assert in the Emergency Departments, as they have found them to be very successful.</p> <p>They have found that people who use our Project Assert Workers are very likely, and in some cases more than 75%, able to attend a program that's either an opiate treatment program, or other outside resource such as harm reduction services, etc. They have had good luck with initiating buprenorphine in those situations, or methadone. They have provided the Department with documents from California Bridge that have gone on to show that in over 300 treatments, which are in most of their Emergency Department's, they have received monies from the state ranging from \$125k - \$250k. There are also documents that can be provided to show the results in California that have resulted in the increased amounts of buprenorphine prescriptions.</p> <p>Dr. D'Onofrio wanted to iterate that this would be a tremendous upgrade in our systems to get those people in the Emergency Departments that have trained to really initiate treatment and referral, as there has been great success with this in California.</p> <p>Commission Navarretta wanted to remind the group that they did just pass a recommendation about the Bridge Model in a previous OSAC meeting.</p>	<p>Public Comment</p>

Topic	Discussion	Action
Next Steps	<p>The next OSAC meeting is scheduled for Tuesday, May 13th, 2025 from 10:00 – 12:00 p.m.</p> <p>The subcommittees will continue meeting to review the recommendation submissions.</p>	Informational

NEXT MEETING – Tuesday, May 13th, 2025 - Video Conference Call through Teams

ADJOURNMENT – Tuesday, March 11th, 2025 meeting of the Opioid Settlement Advisory Committee adjourned at 10:31 a.m.