

Meeting of the OSAC Referral Subcommittee
Friday, February 20th, 2026
1:00p.m.-2:00 p.m.
Microsoft Teams
Virtual meeting

ATTENDANCE

Members present: Rudy Marconi, Jennifer Kolakowski, Jeanne Milstein, John Lally, Tracey Hanson, Kaye White

Visitors/Presenters: None

DMHAS Representatives: Luiza Barnat, Sarah Messier-Smith

Members Absent: None

Recorder: Sarah Messier-Smith

Topic	Discussion	Action
Minutes	The 12/3/25 meeting minutes were reviewed and approved: 1 st by John Lally, 2 nd by Tracey Hanson.	Noted
Recommendations	The group reviewed recommendations that had been submitted since the portal closing to determine next steps. Reviewed recommendations and identified steps are as follows: • Mentoring services for youth affected by the opioid crisis: May be considered for future proposal development: Need to determine if existing resources in CT. Ensure implementing agency has adequate experience with mentoring individuals impacted by OUD. Ensure appropriate training for mentors. • Velvet Sips: Recovery-Centered Social Infrastructure Pilot: Not recommended to move forward: No evidence of non-alcoholic beverage service being EBP for OUD. Other components appear similar to Recovery Center. "Recovery Centers Continuation" approved May 2025 and is inclusive of a future RFP. • Neuro-Inclusive Recovery Housing: Not recommended to move forward: Individual housing program requests are not being funded at this time. Housing workgroup continues to explore statewide Recovery Housing needs. May be a future RFP. Inclusivity for neurodivergent individuals across the treatment continuum should be explored by ADPC Treatment Subcommittee for potential policy or guideline recommendations. • Remote observation of methadone take-home dosing: Not recommended to move forward: Guidelines are clear around take-home methadone dosing; once guidelines are met, supervised dosing is no longer required. OTPs have access to telehealth platforms that can be utilized for live-supervised dosing as indicated. Concerns about equitable access given not all individuals have phones and internet access. CT has approved other projects to decrease OTP access barriers (Mobile OTP, OTP Access Expansion). • Glowhopper Go: Interactive Map of Free Naloxone Distribution Sites in CT: May be considered for future proposal development: Recommendation highlights an important need for CT. Explore if can be achieved using state internal and existing Naloxone-related databases/applications prior to potential OSAC project proposal development.	
Next steps	The next meeting will be scheduled after the 4/7/26 OSAC meeting or as subcommittee input needed.	Noted

NEXT MEETING – TBD

ADJOURNMENT – Friday, February 20, 2026 at 1:53pm

Meeting of the OSAC Referral Subcommittee
Friday, June 26th, 2026
1:00p.m.-2:00 p.m.
Microsoft Teams
Virtual meeting

ATTENDANCE

Members present: Rudy Marconi, Jennifer Kolakowski, Jeanne Milstein, John Lally

Visitors/Presenters: None

DMHAS Representatives: Luiza Barnat, Sarah Messier-Smith

Members Absent: Tracey Hanson, Kaye White

Recorder: Sarah Messier-Smith

Topic	Discussion	Action
Minutes	The 2/20/26 meeting minutes were reviewed and approved: 1 st by Jeannie Milstein, 2 nd by Jennifer Kolakowski.	Noted
Recommendations	The group reviewed recommendations that had been submitted since the portal closing to determine next steps. Reviewed recommendations and identified steps are as follows: • Eastern Connecticut Regional CLEAR- Deflection Model: May be considered for future project development. Identification of providers should be via RFP for provider in regions not covered by existing funding • Continuum of Care's Emergency Housing Program: Not recommended to move forward. Individual housing program requests are not being funded at this time. Housing workgroup continues to explore Recovery Housing needs. May be a future RFP. • First Defense Wipe - Fentanyl Detection, Overdose Prevention & Harm Reduction Solution: Not recommended to move forward. Concerns this product reinforces a false narrative about fentanyl contact and first responders. All First Responders should practice universal precautions to ensure safety. Concerns that a wipe may mislead individuals to believe they have cleaned, rather than tested, a surface. Only tests for fentanyl, which does not provide a complete picture given CT's changing drug adulterant landscape. • Deployment of Navigators/CHW: Not recommended to move forward. Submitter is a national organization. If a CHW project is considered in the future; implementing agencies would need to be a CT-based community organization. • Residential Treatment for Adolescents with Substance Use Disorder: Not recommended to move forward. Residential treatment is not recommended under CORE report • OpioidRx-AI: Not recommended to move forward. Duplication of efforts by DCP. • Parking Expansion for The Pathfinders Association of Manchester, CT Inc.: Not recommended to move forward. Individual infrastructure requests are not being funded at this time. Bond funds may be available for infrastructure upgrades. • Connecticut Alliance of Recovery Residences (CTARR): Not recommended to move forward. May reconsider if there is legislation that makes Recovery Housing accreditation/auditing mandatory. Currently a voluntary action without significant incentivization for participation.	
Next steps	Sarah to outreach subcommittee members via email to schedule the next subcommittee meeting.	Noted

NEXT MEETING – TBD

ADJOURNMENT – Friday, June 26, 2026 at 1:50pm