State of Connecticut
State Board of Mental Health and Addiction Services
June 18, 2025
Microsoft Teams Meeting

Present online: Chmn. John Hamilton, Thomas Burr, Sharon Castelli, Manuel Paris

DMHAS Staff: Commr. Navarretta, Deputy Commr. Harrington, Cheryl Arora, Luiza Barnat, Marilyn Duran, Christopher McClure, Chandra Persaud, Sarju Shah, Kelly Sinko, Elsa Ward

Agenda Item 1: Welcome and Call to Order

The meeting was called to order at approximately 2:30 PM Chmn. John Hamilton

Agenda Item 2: Minutes of previous meeting review and action

The meeting minutes from May 21, 2025, were reviewed and accepted.

Agenda Item 3: Commissioner's Update

Budget: The mental health and substance use grant funding for prevention contracts is restored and the funding for the DMHAS prevention staff is also restored. The budget does still include $850,000, which is needed to support the 988 suicide hotline requirements. And there is $1.3 million in the discharge and diversion services account to meet current requirements. The budget picks up ARPA mobile crisis beginning in FY27. We do need funding for FY26 beginning on December 1st and we are working internally and with OPM to resolve how we're going to take care of that. There is caseload growth for the nursing home waiver, the home and community-based services waiver for each year in the biennium, and the budget also picks up what's currently ARPA funded housing supports and so midway through FY26 the ARPA funds are exhausted and the General Fund will pick up and continue into 2027. There are some legislative earmarks in the budget, and these are pending confirmation. There will be $200,000 in each year for Homes for The Brave; $350,000 each year for Artreach; $185,000 for Root Center but that is one time only in FY26; $100,000 for Clifford Beers; and $150,000 for Pathfinders. We should have confirmation in the next couple of weeks. These are not in the DMHAS budget, but in the OPM's budget. There are funds provided for private provider COLA increases in each year of the biennium but we don't have details yet.

And lastly, the OPM's budget unfortunately includes what we refer to as back of the budget cuts. These are lapses in the OPM's budget that they will assign out to the different executive branch agencies, and we don't have any information on how those will impact DMHAS just yet.

Legislative: The session is over, and lot of bills did not pass this year. Over 4000 bills were introduced and of those, about 1/4 were given a public hearing. After a public hearing, 900 made it out of committee, and then out of the 4000 introduced only 200 bills passed both chambers. Kelly and Chandra have been combining bills to try to get them through the finish line. They have been going through all the amendments just to make sure they haven't missed anything.

Chandra talked about our agency bill, which was included in the budget implementer. So throughout the session and throughout this year at various state board meetings they have talked about the DMHAS agency bills. While not all the proposals they had made it in the implementer, there were a few that did. One is the Pretrial Intervention Program, which would make DMHAS the last pay of resort just to support the sustainability of our diversionary programs for those operating motor vehicle under the influence or possessing any sort of controlled substances. Next would be telehealth authority for outpatient MAT. So

that would just simply preserve the current access that individuals have to Buprenorphine. And then another technical fix would be just correcting an outdated federal statutory reference when it comes to the definition of opioid drugs. And then lastly, they had to do another sort of technical fix just to stay in compliance with the OSAC settlement and then also in the implementer. This was a provision that came out of Senate Bill 7, which would create a new working group within ADPC known as Alcohol and Drug Policy Council, which would just require ADPC to convene a working group to set one or more goals for the state to combat the opioid use disorder. And it also would declare OUD as a public health crisis in Connecticut until goals are met. It is important to note that calling something a public health crisis in this way does not have anything attached to it. It's important you know that people know this is a crisis, but there isn't any funding or anything else attached to making this kind of statement and statue. They will be putting together this working group and will keep you updated. And then as far as other bills that passed both chambers:

HB 7214 - The Perinatal Mental Health Task Force and DMHAS would serve on the task force.
SB 1367 - Bails Bondsman, prohibiting them from being able to pursue individuals in healthcare facilities.
HB 6894 - The codification of the Interagency Council on Homelessness.
HB 7179 - Naloxone Distribution clarification removes limitations for naloxone secure boxes and adds exemptions to nonligand drug permits.
SB 1358 - Requires annual increases for nonprofit providers in the next biennium.
SB 10 - Mental Health Parity requires annual health carrier certification to the Insurance Department (CID), makes reported compliance public information, and allows CID to impose civil penalties.
HB 7887 and HB 7181 - Tobacco/Electronic nicotine delivery systems (ENDs) hemp and cannabis things. This is part of the budget bill and a bigger enforcement bill, but something that was put forward and worked with the AG's office and DCP on making sure that right now if you are trying to get tobacco products, you must show your ID. They increase maximum fines for underage sales to $1000. It also allows DCP to revoke the e-cigarette dealer's registration if they do violate the age verification laws. The cigarette enforcement pieces for shipping are under Department of Revenue Services, but when E cigarettes were added to the bunch, it's under Department of Consumer Protection. So what they did this year was try to mirror some of the in-state shipping and transportation and packaging laws that are in the DRS statutes for cigarettes into the DCP laws for ENDs. Putting a lot of different laws around that, there's going to be a new Statewide Cannabis and Hemp Enforcement Policy Board and DMHAS will be on that as well as other relevant state agencies. And that's just going to look at enforcement opportunity as well as recent developments about cannabis and hemp and because both contain THC and how they overlap. It also put into statute specifically that there is a cannabis control division and kind of outline specifically what that division is responsible for. It made it clear that there needs to be comprehensive compliance initiatives across state agencies to make sure that we can do stings or stop underage sales. For cigarette dealer locations, the public is allowed to weigh in on a renewal or a new dealer registration.

Agency Update: Here are some of the things the Commissioner has been participating in over the course of the month.

- Participated in a panel with Dept. of Housing Commr. Seila Mosquera-Bruno at the CCEH training event focusing on housing and ending homelessness barriers.
- Recovery Day was the 22nd of May. There was a press conference which Commr. Navarretta represented DMHAS and there were legislators that spoke. Some shared their story of lived experience of themselves and or of their family members. CCAR and New Life were there too. NAR was represented with a table, so they had a lot of foot traffic and a lot of good discussion around recovery.

- CMHA, a LMHA out of New Britain, had a retirement event for Ray Gorman, and the new CEO there is going to be Grace Carvalho. She has been with the system for quite some time and will be a good successor to Ray.
- Attended the CCB annual event and training day and presented an award to Miriam Delphin Rittman for her service in the field.
- Attended the International Recovery and Citizen Citizenship Conference. It's now done hybrid both virtual and in person, with attendance from United States, Canada, South America and other countries on recovery and citizenship values.
- Attended the NASADAD Conference along with Michael Girlamo, Julienne Giard and Natalie DuMont That is a convening of the SSAs, which is the State Substance Use Authorities. We are both Substance Use Authority and Mental Health Authority in the state of Connecticut.

Agenda Item 4: Opioid Services and Settlement – Luiza Barnat, DMHAS Opioid Services Director

Luiza provided an overview of what has been happening since 2016. DMHAS received the first federal grant for opioid abatement and that was for $3 million over three years. We were able to implement what we called MATx, so expansion of medication assisted treatment for four agencies across the state. Then in 2017, we received the first CT State Targeted Response Grant for $5.5 million per year for two years. We were able to grow that initial MATx grant to include many recovery services in addition to the effort on expanding medication for opioid use disorder. In 2018 we received our largest grant, initially $11 million per year, that was called the State Opioid Response Grant and that we're still receiving an iteration of that grant; and the latest one is at $15 million on October 24th and that grant is ending in 2027. That is our largest part of grant money for opioid services that includes prevention, recovery support and treatment.

In 2021, two agencies, McCall and Liberation, urged us to apply for a Bureau of Justice Administration grant called the COSSAP grant. The initial amount was $6 million over a three-year period and now we're in the second iteration of that grant at $7 million over 3 years. We just received that money in October of 2024 and that will run till September 2027. And then we did have proud parents recovering from opiate use disorders grant back in 2020 to 2023.

Under the SOAR grant there is money going into each of these priorities Naloxone, treatment, recovery supports, outreach and engagement, overdose prevention, harm reduction, public education, family support, and criminal justice interventions.

In terms of the settlement budget update, the SOAR grant is our largest pot of money with about $33 million per year that will be allocated towards opioid abatement. And as of June 16, 2025, we have some confirmation that with the funding received to date in the state is a little over $161 million, and we have lots of recommendations that have passed through the Opioid Settlement Advisory Committee. And those recommendations are totaling a $110,818,461 and we have a balance in that fund of about $50 million remaining. A projected annual budget is $33,333,333 and the estimated approved recommendations amount is $34,267,675.

There are other partners and municipalities that are also receiving about 15% of the settlement money and they do report to DMHAS yearly and we do post that the annual municipal report. The process for recommendations includes an e-mail where funding recommendations can be submitted in terms of the public to get ideas about what is needed for opioid abatement and that process has ended. We have since gone through all of those recommendations received from the public and we continue to do so as we get them through the e-mail address, and we vet them through different subject matter experts that

sit on the ADPC and also there is a Referral Subcommittee of the OSAC that reviews all of the recommendations to make sure that they are appropriate for funding. And once that happens there is some conversations between the ADPC and the Referral Subcommittee. Once that happens if the recommendations move from this Referral Subcommittee, they progress through the data research and data subcommittee; then to the Finance and Compliance Subcommittees of the OSAC and following that there was an overall OSAC vote followed by OPM and AG's approval. Then it comes back to us for implementation of the recommendations. One huge recommendation was for supportive housing that is a $14 million per year and it is a recommendation that includes housing vouchers for folks and includes case management and supports to keep folks housed and to mitigate some of their some of the barriers to housing.

Agenda Item 5: RBHAO Report – Highlights for this month:

- Tabled.

Agenda Item 6: General Updates/Announcements

- The American Association of Treatment of Opiate Disorders AATODD is awarding Connecticut's very own Joann Montgomery an award and she is representing Connecticut and has done an outstanding work over the years to really challenge some of the stigma to methadone treatment specifically and increase access, support, and awareness for people needing medication assisted treatment.

Adjournment: The meeting was adjourned at 4:00 P.M. The next meeting will be held on Wednesday, September 17, 2025, beginning at 2:30 PM.