

Meeting Minutes: Opioid Epidemic Response Advisory Council (OERAC) Meeting

Date and time of meeting: February 19, 2021 from 8:30am to 11:00am

Meeting Location: Microsoft Teams meeting

Participants: Nicole Anderson; Representative Dave Baker; Heather Bell; Boyd Brown; Wendy Burt; Peter Carlson; Joe Clubb; Senator Chris Eaton; Dana Farley (represented by Pearl Evans); Sarah Grosshuesch; Tara Holt; Alicia House; Katrina Howard; Representative Erin Koegel; Senator Mark Koran; Gertrude Matemba-Mutasa; Esther Muturi; Toni Napier; Kathryn Nevins; Darin Prescott; Anne Pylkas; Jolene Rebertus; Kristin van Amber; Judge D. Korey Wahwassuck.

Meeting Goals

Meeting goals per the agenda (see OERAC PowerPoint 2 19 21 Meeting SOR RFP slide), dated 02/19/2021 and emailed to OERAC members by Tara Holt on 02/19/2021:

1. Receive an update on the McKinney Settlement
2. Approve and publish on OERAC website the meeting minutes for the public
3. Get a motion to approve the OERAC Legislative Report
4. Determine next steps for the OERAC Health Equity Subcommittee
5. Receive an update from the Legislators on House hearings and opioid policy initiatives

Ground Rules, Guests, Welcome, Meeting Goals, Agenda

Tara Holt - 8:30am - 8:50am

Tara Holt briefly reviews ground rules, agenda, and meeting goals.

Tara Holt introduces to OERAC Joseph Clubb, Vice President of Allina Health's Mental Health and Addiction Services. Mr. Clubb is an advisory board member of the Minnesota Hospital Association, a member of the Substance Use Disorder Fiscal Workgroup for the Minnesota Department of Human Services, and an adjunct professor at University of Minnesota and Augsburg College. Mr. Clubb joined OERAC as a member in April 2021.

Council Introductions and OERAC Open Seats Update

Tara Holt - 8:50am - 9:00am

The members of OERAC are introduced to Mr. Clubb:

Anne Pylkas, MD and OERAC Chair; Dave Baker, Representative and OERAC Vice Chair; Toni Napier; Alicia House; Sarah Grosshuesch; Peter Carlson; Nicole Anderson; Mark Koran, Senator; Katrina Howard; Kathryn Nevins; Judge D. Korey Wahwassuck; Jolene Robertus (Department of Corrections representative); Heather Bell, MD; Gertrude Matemba-Mutasa (Department of Human Services representative); Esther Muturi; Erin Koegel, Representative; Darin Prescott; Dana Farley (represented by Pearl Evans); Chris Eaton, Senator.

As of 02/19/2021 there remains one open seat on OERAC: Public Member (in Opioid Addiction Recovery).

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McKinsey Settlement

All - 9:00am - 9:20am

Evan Romanoff of the Minnesota Attorney General's Office provides an update on the "McKinsey settlement." McKinsey & Company is one of the largest consulting firms in the world and provided consulting services to Purdue Pharma and other opioid producing companies. McKinsey & Company has been under investigation for helping opioid producing companies promote their drugs and thus profiting from the opioid epidemic. For example, McKinsey & Company advised those companies on how to "supercharge" their sales of opioids and how to develop their markets with the goal to ensure a smooth supply of the drugs to more patients and for a longer time. On 02/04/2021, Minnesota Attorney General Keith Ellison joined the attorney generals from 47 other states, the District of Columbia, and five U.S. territories in a \$573 million settlement with McKinsey & Company to resolve the investigations into the role of the consulting firm.

"Funds from the settlement will be used to abate the damage that the opioid epidemic has wrought in Minnesota and the participating states. Minnesota will receive more than \$7.98 million from the multistate settlement, with \$6.6 million paid within 60 days of the settlement and the remainder paid over four years. Under state law, the Opioid Epidemic Response Advisory Council will help facilitate distribution of this money to fund abatement efforts throughout Minnesota. This is the first multistate opioid settlement to result in substantial payment to the states to address the epidemic." (extracted from the website, The Office of the Minnesota Attorney General Keith Ellison, on 03/19/2021)

The aforementioned settlement also requires McKinsey & Company to disclose online their internal documents about their work with Purdue Pharma and other opioid producing companies. McKinsey & Company will adopt a strict document-retention plan, cooperate in other investigations, and implement a strict ethics code. McKinsey & Company agreed to stop advising companies on potentially dangerous Schedule II and Schedule III narcotics. McKinsey & Company will remain in operation but will withdraw from their opioid consulting business.

The McKinsey & Company settlement is for states and not for counties and cities; the settlement payment does not include Minnesota American Indian tribes. The settlement payment will be deposited into the Opioid

Epidemic Response Fund and not the General Fund. Minnesota Management and Budget (MMB) and the Minnesota Department of Human Services (DHS) can explain the flow of the funds pursuant to the statutes that apply. The Office of the Attorney General will keep OERAC updated.

Travis Bunch of MMB speaks on the conditions for and restrictions of the use of the settlement payment pursuant to statute.

Note: The Legislature can use the settlement payment for other priorities. OERAC has been collecting their own money from fees.

Motion to Approve Meeting Minutes

Tara Holt - 9:20 - 9:30

Motion to approve meeting minutes for the OERAC meetings in September, October, November, and December 2020 and in January 2021.

The aforementioned meeting minutes do not require any corrections and OERAC members approve the meeting minutes. The motion to approve the meeting minutes is passed. The meeting minutes can be published on the OERAC website.

OERAC Legislative Report

Tara Holt - 9:30am - 10:00am

Boyd Brown of BHD emailed Version 4 of the Legislative Report – Opioid Epidemic Response Advisory Council, January 31 and March 1 Reports, February 21, 2021 to OERAC members on 02/18/2021.

Note: The report still needs to be formatted to make the document accessible, including the interactive map on page 26. BHD will update the report when additional information is available. For example, Cody Wiberg of the Board of Pharmacy will provide the exact dollar amounts for IV. Individual Grants - Status Updates, A. Available Funding on page 13 and the exact dollar amounts for the table, Opioid Epidemic Response Fund Annual Revenue, on page 14. Chelsea Magadance of BHD will provide information for ADA 1. For the public on page 2 when the information has been confirmed.

BHD explains that the changes introduced by DHS leadership are related to the clarity of the information to ensure it is understandable. Anne Pylkas introduced some changes related to policy objectives. OERAC members are asked to review the Legislative Report and to approve it. OERAC members motion to approve the Legislative Report, pending the aforementioned minor changes. The motion is passed.

The goal is to submit the Legislative Report to the Legislature on 02/22/2021.

Public Comment

10:00am - 10:05am

Dr. Peter Hayden requested to speak at the OERAC meeting but did not confirm it. Dr. Hayden is not present at today's meeting. OERAC members suggest Dr. Hayden submit his comments in writing.

OERAC Equity Subcommittee Recommendations

Neerja Singh - 10:05am - 10:30am

Neerja Singh is the Behavioral Health Clinical Director at DHS and speaks about the structural and social determinants of health that must be acknowledged within the frame of providing equitable health care services, including treatment for substance use disorders (SUD) and opioid use disorder (OUD).

For example, American Indians are seven times more likely to die from a drug overdose than Whites, and African Americans are two times more likely to die from a drug overdose than Whites (MDH, 2019); 11% of homeless American Indians in reservations attested to using heroin or other opioids (Wilder Research, 2020).

Research shows that the racial and ethnic composition of a community tends to determine the kind of opioid treatment medications community members have access to (Goedel et al., 2020).

Medication must be accessible to all who need it, and health care disparities must be eliminated by reforming the respective regulations.

Recommended Action Steps:

1. Guiding Principles
 - OERAC is committed to address racial inequities in connection with access to quality treatment for opioid use disorder.
 - OERAC acknowledges systemic racism as a fundamental cause of health inequities.
 - OERAC is committed to lead reforms to ensure equitable access to evidence-based and culturally responsive treatment for OUDs.
2. Reflect the Diversity of the Community Served
Community Engagement:
 - Use existing platforms to reach the Black, Indigenous and People of Color (BIPOC) communities.
 - Statewide survey.
 - Identify evidence-based and culturally responsive practices.
 - [Addressing opioid overdose deaths: The vision for the HEALing communities study - ScienceDirect](#)
 - [Evidence-Based Strategies for Preventing Opioid Overdose: What's Working in the United States, 2018 \(cdc.gov\)](#)
 - Develop criterion to evaluate programs based on evidence-based and culturally responsive practices.
3. Equity Analysis

- Population Groups Served including the groups impacted adversely by racial inequities
- Processes identified to address inequities
- Evidence-based and culturally responsive programs with research.
- Desired Outcomes to address inequities
- Actions identified to mitigate biases
- Evaluation Plan to measure progress on equitable access
- Community Engagement
- Culturally & Linguistically Appropriate Services

Neerja Singh reports that the Minnesota Department of Health and the Minnesota Department of Human Services have met twice to discuss the formation of the OERAC Equity Subcommittee. OERAC members are asked to review the aforementioned recommended action steps and to consider the existing platforms to reach BIPOC communities (see 2. Reflect the Diversity of the Community Served).

Housing instability will be examined as well.

A timeline needs to be established. Recommendations should be completed between February and July of 2021 and prior to the RFP in August 2021.

The emphasis is on community engagement.

Representative Baker prefers a straight-forward approach to ensure equity in health care services for OUD and with clear results.

Gertrude Matemba-Mutasa, Assistant Commissioner of the Community Supports Administration, Minnesota Department of Human Services, wants to reach people “who have fallen through the cracks”. With regard to health care equity, the State of Minnesota has a terrible reputation, and this is why DHS must be responsive and reach out to communities in the most inclusive way to ensure all people who need and want health care treatment, specifically for substance use disorders (SUD) and opioid use disorder (OUD) receive equitable treatment services in their communities. The OERAC members will need to develop a strategy for this challenging but just endeavor. DHS is more than willing to guide OERAC members during this process.

OERAC House Legislative Hearing Update

All - 10:30am - 10:40am

OERAC Vice Chair, Representative Dave Baker provides an update of the OERAC House Legislative Hearing. Representative Baker, Representative Koegel, and Anne Pylkas presented the OERAC work to the 2020 Legislature because the opioid epidemic has been getting worse.

Legislative Opioid Policy Initiative Update

All - 10:40am - 10:50am

Representative Erin Koegel provides an update on bills.

With regard to “unlimited drug screens,” the language needs to be revised because providers may take advantage of the bill right now based on its language. Also, some health insurance companies voiced concerns about urine testing.

St. Gabriel’s Hospital in Little Falls (Morrison County) is a critical access hospital and part of CHI St. Gabriel’s Health. St. Gabriel’s Hospital is undergoing a transition with staff leaving the hospital to transition to MEND Correctional Care in Sartell (Benton and Stearns Counties). As a result, St. Gabriel’s Hospital does not want to continue their addiction program. However, Morrison County needs a clinic for addiction medicine. The concern is that the program funding follows staff who are moving from St. Gabriel’s Hospital to MEND Correctional Care; the program funding does not follow the program. Another concern is the sustainability of ECHO programs and to what point they need to be funded by grants. Representative Baker notes that there was no RFP and the grant had been given directly by the Legislature to St. Gabriel’s Hospital, which is one of the main ECHOs in Minnesota. (ECHO stands for Emergency and Community Health Outreach.)

Representative Baker asks DHS to provide reports about ECHO participation.

Next Steps and Meeting Wrap-up

Kristin van Amber - 10:50am - 11:00am

The next meeting will be on 16-April-2021

Assignment review: Who will do what?

OERAC Meeting Survey Introduction by Kris Van Amber

Bi-monthly meeting schedule