



Governor's Advisory Council on Opioids, Substance Use, and Addiction

Office of Addiction and Recovery

Agenda

- Welcome and roll call
- Public comment (approximately 11:20)
- Council time with the Office of Addiction and Recovery
- MDH use of cannabis dollars –Dr. Catherine Diamond
- Lunch break (approximately 12:30)
- Legislative priorities and Year-end Report to the Governor and Subcabinet
- Break (approximately 1:45 p.m.)
- Debrief and vote of legislative priorities
- Next steps and adjourn

Observer reminders

If observing remotely

- Stay on mute and off camera except if you are speaking during public comment time.
- Do not use chat or raise your hand to comment on Council discussion.
- If you would like to address the Council, use the **'raise hand'** button during the public comment period and we'll call on you at that time.

If observing in the room

- See the information table for the posted meeting materials.
- If you would like to address the Council, add your name to the public commentor list on the information table. When the formal public comment period is opened wait for the facilitator to call on you.



Open meeting law requires public bodies to **record and maintain votes** of its members.



Formal votes will be held for meeting minutes and formal decisions made by the Advisory Council.



Virtual meetings require a vote by roll call and a quorum (simple majority) is required to vote.

Council member reminders

When participating remotely

- **Please be on video**, if possible, to help with overall engagement.
- Ensure your **name** is reflected under your WebEx picture.
- **Mute** when not speaking.
- Use the **'raise hand'** button when you would like to speak.
- Do not post comments related to Council discussion in chat.

When participating in person

- **Raise your hand** when you would like to speak, and Stacy or Beth will cue you.
- **Share your name** before speaking.

Roll call and introductions

- Share your name
- Affiliation or background you would care to share
- In the chat – share any parting words you'd like to share with Beth

Approval of meeting minutes

Approval of October 2024, meeting minutes will be taken by roll call.

Public comment opportunity

- Try to limit comments to two minutes so others may speak.
- Facilitator will help you mind the time.
- You are also welcome to communicate with Jeremy Drucker, Addiction and Recovery Director Jeremy.drucker@state.mn.us

Council time with the Office of Addiction and Recovery

- MARRCH Conference – Perspective from the Governor’s Advisory Council
- 2911 Rule rewrite – Proposed rules will be presented on Thursday, December 12, 3:00 – 4:30 p.m.
 - Meeting details and agenda can be found [on the DOC Rulemaking webpage](#)
- 1115 Reentry Waiver – First in-person hearing is Tuesday, December 10, 3:30 – 4:30 p.m., second video conference hearing is December 11, 9:30 – 10:30 a.m.
 - Meeting details, the waiver application, and summary can be found the [on the DHS Federal health care waivers webpage](#)
 - Written comments may be submitted to the following email mailbox: Section1115WaiverComments@state.mn.us. Comments must be received by Dec. 26, 2024.
 - Reentry Services Working Group begins meeting on December 16, 10:00 – 2:30
 - Members include Jennifer Blanchard and Brandy Brink

MDH use of cannabis dollars

Update and Q/A: Dr. Catherine Diamond



Legislative priorities and Year-end Report

- Recap the process used to develop the draft set of recommendations
- Share an overview of the results of the following up to the October 1 meeting
- Use an interactive Mentimeter survey to identify top priority recommendations and gather additional input to inform the final Year-end Report
- Debrief and provide an overview of next steps

Supporting Justice-Involved Individuals

	Mentimeter ranking	Top 5 - % of votes for "Highest Impact"	Highest votes during Oct. 1 council meeting	Highest votes from the MARRCH survey	Highest % of votes "Strongly Aligns" with the guiding principles	New for consideration
Ensure affordable and accessible MOUD access post-incarceration during recovery	7	X				
Mandate with federal law that requires access to all FDA-approved MOUDs in jails and prisons – Support recommendations from MOUD in Jails workgroup	3	X	X	X		
Increase funding for withdrawal management programs in rural communities –Are these really specific to CJ populations	4	X				
(Incentivize rate) funding to support increasing MOUD providers in rural communities – Are these really specific to CJ populations	3	X		X		
Increase funding for diversion programs in treatment courts for families/children involved in the child protection system	5	X		X		
Support for peer recovery specialists in jails and prisons and explore establishing Forensic Peer Recovery Specialist as a certified, MA-reimbursable service	1		X	X	X	
Provide funding to MN Dept. of Health and Dept. of Corrections to build capacity to provide peer recovery services in jails and prisons	4		X	X	X	
Ongoing funding to implement and expand the 1115 Reentry Medicaid waiver	6			X		
Support connection with local recovery support (RCOs) and peer recovery services in jails and prisons	2					X
Require a veteran peer recovery specialist to work with every veterans'	8					X

Background Studies Reform

	Mentimeter ranking	Top 5 - % of votes for "Highest Impact"	Highest votes during Oct. 1 council meeting	Highest votes MARRCH survey	Highest votes "Strongly Aligns" with the guiding principles	New for consideration
Remove the bar to set-aside for any permanent disqualifications that do not require federal law compliance	3	X	X		X	
Simplify online appeal process –Lump with timeframes could be combined and addressed administrative barriers.	2	X				
Support the elimination for disqualification for LADCs and peer support professionals	3	X				
Improve time frames for background checks to be returned	1	X	X		X	
Fund educational campaign to address stigma and misunderstandings about background barriers	5	X	X		X	
Review the current disqualification structure to consider if changes should be made to the lookback period or the number of disqualification tiers	2			X		
Invest in infrastructure to support great transparency within the background studies process	4			X		

Additional Recommendations

	Mentimeter ranking	Top 5 - % of votes for "Highest Impact"	Highest votes during Oct. 1 council meeting	Highest votes MARRCH survey	Highest votes "Strongly Aligns" with the guiding principles	New for consideration
Create more housing support opportunities for individuals with substance use disorders	3	X	X	X	X	
Invest in high-risk morbidity programs; homeless, chronic illness	6	X				
Keep families intact, less child protection involvement, more family beds, including male-led families	4	X				
Focus on adolescent program, placement, and linkage services funding	1	X		X		
Fully fund and implement findings from the behavioral health rate study	5	X	X			
Develop a coordinated statewide strategy for peer support, family peer support, and peer recovery support services	2		X	X	X	
Support and expand funding for traditional health throughout the substance use disorder continuum of care	3			X		
Defend and expand Cannabis tax revenue to support treatment programs	7					X
Embed a veteran peer recovery specialist in every certified recovery community organization	8					X

Additional feedback

- *I support the recs with highest votes.*
- *Invest in high-morbidity programs, etc.: although i completely support this, it is so broad it is hard to see it as a specific recommendation. Most of what we have here is very specific and tangible. I think this statement and any elaboration fits best in our beginning or ending narrative.*
- *I support the background reform with timeframes improved and the permanent bar issues although I see that as a tough sell. I like the educational campaign but see the council's role as supporting a coordinated effort across the state so that the folks directly working in the field are doing the education piece.*
- *Some of the priorities are "inside baseball" for some council members. It might be nice to allow some space for members of the group to discuss what these really mean in plain English or to share their knowledge of the issues so that we all have a shared understanding.*
- *Additional factors could include which initiatives have short term, immediate impact versus long term impact*
- *Feasibility (money, time, other barriers). It's important to keep pressure on achieving long-term goals, but having some low-hanging fruit to knock down would also build momentum for this office and the advisory council. All of the proposals are well-centered in our goals and values, but it might be worth discussing what it would actually take to implement some of these proposals and then rank them by "short-term/long-term" and the resources needed to actualize them.*

- Are there any recommendations people have questions about?
- Any recommendations feel like “inside baseball” and you’d like to know more about?

Mentimeter survey

Instructions

Go to
www.menti.com

Enter the code

9284 6569



Or use QR code

Break



- Recap and discuss results of top recommendations
- Next steps on Year-end Report
- Vote on recommendations

Next steps and adjourn

- Governor will name new chair and two new members in January
- Look at the year ahead (First Tuesday of every other month from 11 a.m. – 3 p.m.)
 - 2/4/2025 – hybrid
 - 4/1/2025 – in person, location TBD
 - 6/3/2025 – hybrid
 - 8/5/2025 – hybrid
 - 10/7/2025 – in person, location TBD
 - 12/2/2025 – hybrid
- Closing comments from the co-chair
- Next meeting is **virtual** on Tuesday, February 4, 11:00 a.m.– 3:00 p.m.

Thank You!