

## GOVERNOR'S ADVISORY COUNCIL ON OPIOIDS, SUBSTANCE USE, AND ADDICTION

# **Meeting Notes**

Date: 4.1.2025

Location: Wilder Foundation

## **Attendance**

Open meeting law virtual meeting, staffing and council members in attendance.

#### **Council members in attendance:**

Colin Cash

Wendy Jones

• Pamela Lanhart

Jeffrey Lind

William Messinger

Lynne Redleaf

LaTricia Tate

Janice Mehle

Travis Winship Khou Vang

Absent:

Gavin Bart

• John Donovan

Fiyyaz Karim

**Brandy Brink** 

Suzanne Nash

**Anderson Saint Georges** 

Autumn Dillie

**Kimberly Stokes** 

## Office of Addiction and Recovery (OAR), Minnesota Management and Budget (MMB) staff:

• Jennifer Blanchard

Jose Phipps

Jeremy Drucker

## Welcome and Roll call

- Members and guests were welcomed: Wendy Jones, Chair provided opening remarks and introduced Imagine Deliver.
- Roll call: Roll call was taken
- Review of Agenda: Objectives for the meeting were reviewed
- Approve minutes: February 2025 minutes will be voted on at the June meeting.

## **Public comment**

No public comment

## Office of Addiction and Recovery updates

To set the context for the day's activities, Assistant Commissioner Jeremy Drucker provided an update on the impacts of federal funding cuts, State budget and the 2025 legislative session:

## **Tight Federal-State Interdependence and Ripple Effects**

- Minnesota's substance use disorder (SUD) efforts are deeply impacted by federal shifts due to the tightly integrated federal-state compact.
- Recent sudden federal funding cuts have disrupted grant-supported work statewide, forcing immediate stop-work orders and creating uncertainty across agencies and providers.
- A multistate legal challenge is underway to seek a temporary restraining order against the funding cancellation.

#### **Medicaid Concerns**

- Federal budget proposals could cut up to \$880 billion in healthcare funding; Medicaid is not explicitly targeted but is expected to bear major cuts.
- Minnesota could face a \$1.6B annual shortfall in Medicaid funds, which support a wide range of services including 50% of SUD treatment and peer recovery supports.
- This would deepen an already projected \$6B state deficit for FY 2028–29.

## **State Budget & Legislative Landscape**

- Minnesota's budget is strained due to declining revenues and program growth.
- Governor's budget prioritizes SUD and mental health services relative to other areas.
- Efforts are underway to track federal cuts and identify areas where state funding could fill gaps to preserve core functions (e.g., overdose data, prevention, public health labs).

### **2025 Legislative Session: SUD-Focused Bills**

- **Data Modernization:** Legislation is proposed to streamline overdose (OD) map data entry using Emergency Medical Services (EMS) data to improve overdose surveillance and response.
- **Subcabinet Expansion:** To reflect structural changes in government, additional state agencies (Children, Youth & Families; Cannabis Management; Commerce) are being added.
- **Fraud, Waste & Abuse Prevention:** Bills introduced to outlaw patient kickbacks (e.g., free housing for treatment enrollment) and reform midpoint billing practices to ensure service accuracy.
- **Recovery Housing Reform:** Proposed legislation to decouple housing from treatment funding to ensure people don't lose one when they lose the other.

## **Ongoing Implementation Work**

• 1115 Re Entry Waiver: Submitted in January; work is ongoing with county partners to develop reinvestment and implementation plans. Council members and Jennifer Blanchard, the OAR representative, are involved in monthly work group meetings.

- Recovery-Friendly Workplace: Vendor secured to help design certification program; Council will be engaged in rollout.
- Medications for Opioid Use Disorder (MOUD) in Jails Workgroup: Interim report released, identifying barriers and gaps in jail-based treatment.
- Naloxone Saturation Strategy: The strategy has been finalized and is transitioning into the
  implementation phase, which is led by Assistant Commissioner Teresa Steinmetz. Portal-based and huband-spoke distribution models will both continue, with new portal admin processes to prevent service
  interruptions.

## **Governor's Advisory Council Workshop**

Imagine Deliver facilitated a workshop for council members to align on key priorities and begin shaping a two-year strategic roadmap. The session focused on refining the Council's 2025 recommendations and identifying new priority areas to inform actionable, forward-looking plans that reflect the Council's core responsibilities and shared vision.

The session was structured to:

- Set the Context: Clarify the Subcabinet's current direction and strategic priorities.
- Center the End User Experience: Ground the Council's work in lived experience by creating a representative persona to illustrate how the Council's work may impact end-users in their communities.
- Prioritize Focus Areas: Identify and elevate the most urgent, high-impact, and feasible areas for action.
- Develop Strategic Roadmaps: Outline clear next steps to move from vision to implementation.

Following the state of the State, the Council co-created a list of actions they can take as individuals and as a collective:

- Support others by creating spaces for diverse voices
- Work together to create a collective response
- Write personal testimonials and focus on individual advocacy
- Educate clients in our communities on available resources
- Get information out to the communities we serve
- Show up every day and build infrastructure to support community
- Educate and bring awareness
- Show up with empathy
- Listen to the voices of the community
- Develop a creative solution to complex problems
- Take wisdom from the council and be more responsive

## **Avatar Reflections Summary**

During the workshop, the council engaged in several activities to identify some of the issues faced by individuals and communities in Minnesota. This brainstorming activity was designed to identify and prioritize key issues and develop a decision-making framework.

## **Themes and Insights**

#### **Systemic Failures & Stigma**

- The group acknowledged that systemic supports cause harm and often fail to respond to real needs.
- Services are "provider-centered" and not "person-centered" "we try to fit people into systems, not build systems around people."

#### **Barriers to Reintegration**

- Legal and societal stigma create long-lasting barriers to housing, employment, and healing.
- Re-entry systems are fragmented and lack coordinated care.

## **Scaffolding & Support**

- What's needed is scaffolding: flexible, wraparound supports that can evolve with the individual.
- Culturally responsive and specific services, access to childcare, and genuine community are key.

## **Generational Cycles**

• Family environment and generational trauma emerged as central; cycle-breaking is critical.

### **Navigating Complexity**

• Individuals must navigate multiple systems (child welfare, housing, legal, healthcare) while also managing trauma & survival.

### Representation, Voice & Power

• The group highlighted the necessity for power shifts and emphasized the importance of ensuring that those most affected become changemakers.

## **Prioritization Summary**

### **High-Impact Priorities:**

• The group identified housing, MOUD/MAT access, and equity-focused care as urgent and impactful. However, feasibility concerns lowered scores, signaling a need for broader policy advocacy and capacity-building in these areas.

#### Feasibility as a Filter:

- Ideas with high feasibility (like culturally responsive care and justice-involved support) were seen as opportunities for momentum-building.
- Lower-feasibility items (like housing and funding expansion) require long-term coalition work, legislative strategy, and inter-agency collaboration, limiting the Council's ability to take early action in these areas.

#### Whole Person, Whole-Systems Approach:

• Justice system intersections, peer support, and family-centered models were highlighted, reflecting a whole-person, whole-system approach to substance use and recovery.

## **Designing Strategic Roadmaps for Top Priorities**

## **Priority 1 - Evidence-Based ROSC Council**

#### **Key Actions/Initiatives**

- Initiative 1 Education about ROSC councils understanding what they are, how they differ from regular meetings, and where they've been successful. Request resources to educate both the Council and Subcabinet about ROSC councils.
- Initiative 2 Identify local partners and recovery community organizations to help pilot ROSC councils. Look for organizations with experience in recovery community work to start pilots.
- Initiative 3 Outreach and visibility Council members will engage with local communities to gather feedback on ROSC councils and share their message. This includes tabling, connecting with key community players, and gathering feedback.

#### **End Goal**

• By 2027, the goal is for the State SUD strategy to prioritize a network of ROSC councils, with two pilot councils (one urban and one rural) underway.

#### The Council's Role

- Educate networks and advocate for ROSC councils at both local and legislative levels.
- Engage in community outreach to amplify the message of ROSC councils and gather insights.
- Legislative action can be taken to secure funding for pilot programs.

#### **Connection to Individual Role**

 Actively engage with communities, educate networks, and push for legislative action to make ROSC councils a priority.

### **Level of Commitment**

- Ongoing commitment and coordination are needed to educate and advocate for ROSC councils, particularly outside formal meetings.
- Prepare to engage with your networks and advocate for legislative support between meetings.

### **Priority 2 - Culturally Responsive Care**

#### **Key Actions/Initiatives**

- Initiative 1 Listening sessions to bring in diverse voices, understand needs, and identify gaps. Focus on listening to communities and understanding the disparities they face.
- Initiative 2 Conduct needs assessments to identify gaps in culturally specific services.

- Initiative 3 Training and education for peer recovery specialists (PRS) and other workforce members to be culturally responsive. Identify funding for culturally specific Recovery Community Organizations (RCOs).
- Initiative 4 Advocate for policy and funding to ensure that culturally responsive services are prioritized.

#### **End Goal**

By 2027, the goal is to amplify diverse voices in decision-making, ensuring culturally responsive care is
integrated across the substance use recovery continuum, especially for communities facing the most
disparities.

#### The Council's Role

- Facilitate listening sessions, identify gaps in services, and advocate for culturally responsive care.
- Engage with local community leaders and identify key stakeholders to drive the work forward.
- Be proactive in advocating for funding and policies that prioritize culturally responsive care.

#### **Connection to Individual Role**

- Advocate for marginalized communities and support the integration of culturally responsive care into the recovery system.
- Amplify the voices of those often left out and ensure that services are accessible to all populations.

#### **Level of Commitment**

- This initiative requires active involvement between meetings, especially in engaging with communities and advocating for change.
- Stay engaged and ensure that culturally responsive care is a consistent focus.

# **Next Meeting and adjourn**

The Advisory Council meeting adjourned at 3:00 p.m. Next meeting details include:

- Date: Tuesday, June 3, 2025
- Time: 11:00 a.m. 3:00 p.m.
- **Location**: Hybrid. Council members may attend virtually via MS Teams or in-person at Centennial Office Building.