

# Opioid Epidemic Response Advisory Council (OERAC)

## Meeting Minutes for February 21, 2025

**Meeting Location:** Hybrid meeting using WebEx and in-person at Elmer L. Andersen Building – 2<sup>nd</sup> Floor, Room C2380, 540 Cedar Street, St. Paul MN 55101

**Members present:** (Names in italics are non-voting OERAC members)

Remote: Dr. Kathy Nevins Rep. Robert Bierman, Sadie Broekemeier, Dr. Ashwin George, Senator Zaynab Mohamed, Brock Reed, Kristi Schoen

In person: Joe Clubb, Sarah Grosshuesch, Rep. Dave Baker, Curtis Jackson, Jack Martin, Dr. Charles Reznikoff, Dr. Antony Stately, *Deepa McGriff, Jolene Rebertus, Teresa Steinmetz*

**Members not present:** Dr. Heather Bell, Peter Carlson, Senator Bill Lieske, Toni Napier, Judge Nicole Starr

**State Staff Members Present:** Laura Farlow, Kate Toftness, Michaela Seiber

### Call to order

Facilitator Stacy Sjogren began the meeting at 10:00 am, reviewed the OERAC mission, the meeting ground rules and gave a guest welcome. The meeting agenda was confirmed, and a roll call followed. Quorum was secured. See voting log for details.

### Business items

**Minutes approval:** Dave Baker moved to approve the minutes from the January 17, 2025 meeting. Seconded by Charles Reznikoff. Motion passed with roll call vote. See voting log for details.

**MAD Facilitator Change:** Stacy Sjogren will be turning OERAC facilitation over to Estelle Brouwer.

### Public Comment

Facilitator, Stacy Sjogren, welcomed public comment at 10:20AM.

- Sharon Day, Executive Director of the Indigenous Peoples Task Force (IPTF)

- The Indigenous People Task Force provides prevention, intervention, harm reduction, case management, and counseling services. Sharon shared data from Hennepin County, highlighting that Native Americans are dying at a rate 10 times higher than the white population in Minnesota. While statewide overdose rates are declining, this trend is not reflected in Native community, where Native women experience the highest overdose death rate of any demographic. Sharon shared that Native people have faced targeted genocidal practices for land and resources since first contact with Europeans, which historical traumas continue to affect Indigenous communities. She stressed that every person in the community has been impacted by addiction or overdose deaths. Additionally, opioid addiction is closely linked to increasing trafficking and violence in the Native community.
- Sharon shared personal stories of family members lost to fentanyl overdose and violence. She posed a question to the council: Will the council provide the Indigenous community with funding commensurate with their needs, specifically for prevention, harm reduction, treatment, and aftercare? Culturally specific programming is essential, as mainstream approaches are not effective for Indigenous communities.
- Louise Matson, Executive Director at Division of Indian Work
  - Division of Indian Work is the oldest social service agency in Minneapolis, offering a variety of programs, with its core program being youth leadership development. The program focuses on culture as prevention, and the organization incorporates cultural teachings into all of its programming. Louise highlighted significant disparities faced by Native youth and urgent need for funding to support prevention programs. There is a need to expand these programs that are successful in reaching Native youth. Incorporating culture helps youth stay sober and build life skills. It is important to have direct funding for programs that communities know are effective.
- Jode Freyholtz-London, Founder and Executive Director of Wellness in the Woods
  - Wellness in the Woods operates with 60 staff across Minnesota, who identify as being in recovery. The organization services geographically and culturally diverse populations. The organization had previously been awarded for a Recovery Talk grant in North Dakota, but that grant was cancelled before work began. They applied for the Recovery Talk to partner peers with individuals coming out of substance use treatment, mental health treatment, and incarceration. If individuals who have been incarcerated are connected to peer support resources, the likelihood for recidivism rate goes from 43% to 22% in the first year. If individuals coming out of treatment center are connected to peer support resources, the relapse rate decreases by as much as 71%. Jode urges OERAC to consider a similar pilot program for this work in Minnesota.

## **Attorney General's Office Update on Settlement**

Assistant Attorney General Evan Romanoff presented information regarding two National Opioid Settlements.

## Purdue Pharma Settlement

A settlement in principle has been reached with Purdue Pharma. The bankruptcy case, which halted the original lawsuit in 2019, is nearing completion. Under the settlement terms, the Sackler family would pay \$6.5 billion nationwide, and Purdue Pharma would pay \$800 million upon finalization of the bankruptcy. Minnesota has not yet decided whether to join the national settlement or continue with a separate lawsuit. There is no set timeline for Minnesota's decision until the settlement is finalized. If the State joins, the funds will be distributed similarly to the other settlements; 25% to the state, 75% to counties and cities. If finalized, the distribution time frame would be 15 years.

## Teva Settlement

States have the option every two years to choose between additional cash or product from the Teva settlement. The previous choice was additional cash. The next decision is due by April 1<sup>st</sup>. New considerations include the new product of over-the-counter naloxone and the new distribution partner, Direct Relief. The Attorney General's office is looking for input from stakeholders to inform their choice.

- Member comments: Baker, Stately, Steinmetz, Reznikoff, Clubb, Martin, Grosshuesch, Rebertus
- Cash vs Product
  - Does this product option fill gaps in the State's Naloxone Portal?
  - Is the product more cost effective than standard purchasing prices?
  - Strategic planning for naloxone distribution in Minnesota is needed.
  - Council concerns over branded pharmaceutical products and cost efficiency.
  - There is a high need for naloxone across the state. A strategic plan for distribution is needed.
    - Jeremy Drucker shared that the State's Naloxone Saturation Strategy is currently in the draft stage. Once the strategy is finalized, it will be brought to OERAC.
- Naloxone Portal
  - Discussion of the inconsistencies of operation on the State's Naloxone Portal
  - Current demand does not have the funding to support it. A plan is being considered to keep the portal open continuously by allocating funding partially based on need. Strategy will be brought to OERAC when finalized.
  - Discussion of different organization that use the portal. Some Harm Reduction Organizations may distribute thousands of doses while others stockpile. Many organizations in Minnesota do not realize they need to queue requests when the portal is closed in order to be in line when it opens.
  - Important to note that intramuscular (IM) naloxone is more cost effective, and the Naloxone Portal only distributes nasal naloxone. A blended approach is needed throughout the state.
  - Clarification of ownership: MDH and DHS share ownership of the portal. Funds from DHS are transferred to MDH for operation. Direct allocations from SOR and OERAC are possible, but some grantees, such as recovery organizations, may prefer to use grant funds to purchase IM naloxone.
- The Attorney General's Office will have a presentation with Teva and invite relevant stakeholders.

## 2025 RFP Discussion and Vote

Joe Clubb grounded council and reaffirmed that decisions would need to be made today to meet timeline to get funding out to community. OERAC continuously improves the RFP process each year by looking at data and listening to community members.

Roll call vote on the voting process. Motion passed, see voting log for details.

Laura Farlow provided information on 2025 RFP. Approximately \$12 million is available (\$3.2 million from Registration and Licensing Fees fund and \$8.7 million from the Settlement fund) and the 5 categories from 2024 will be maintained.

The list of recommendations was presented to council which had also been sent prior to the meeting. Each purpose behind the recommendation was explained.

### Vote to recommendation:

- *Redundant questions throughout the RFP are removed.*
- *The Targeted Organizations points are maintained from 2024. The expectation to quality as a Targeted Organization is clarified and DHS will verify. This is formatted as a Yes or No question for reviewers.*
- *The Professional Responsibility and Data Privacy question is reduced to 0 points and formatted as a Yes or No question for reviewers. The 5 points are transferred to the Community Impact section.*
- *The Health Equity section will include the most updated questions on CLAS standards.*
- Motion passed with roll call vote, see voting log for details.

### Vote on recommendation:

- *A funding cap of \$750,000 for all applications will be applied.*
- **Member comments: Baker, Grosshuesch, Broekemeier**
- Important note that a specific funding amount would not be associated with each category due to the flexibility of the funding. Categories will still be present to guide decision making.
- Motion passed with roll call vote, see voting log for details.

### Vote on recommendation:

- *Define Organization Type. This information will be used as a NON-SCORED REVIEW FEATURE only. Small organization (annual revenue: Less than 1.5 million); Medium organization (annual revenue: 1.5million – 16 million); Large organization (annual revenue: 16 million +); Tribal Nation; Urban Indian Organization*
- *Populations currently being served by this organization?*
- *How long has the applicant organization been operating in Minnesota?*
- *Describe demographics (race, ethnicity, gender identity, etc.) of staff and leadership and in what ways they reflect the population being served.*
- *Has your organization been a past recipient of an Opioid Epidemic Response Advisory Council (OERAC) grant? How many contracts has your organization had from OERAC?*
- **Member comments: Clubb, Reznikoff**

- Confirmation that the organization type will be used as a review feature.
- Clarification that the term population is defined by the applicant.
- Motion passed with roll call vote, see voting log for details.

#### **Vote on recommendation:**

- *Describe the impact if funded at 75% of the requested amount.*
- *Has this project received any opioid settlement funding outside of OERAC? This includes city, county, state, or tribal funding.*
- *If a separate organization is mentioned by name in this proposal, please attach a letter of support*
- **Member comments: Stately, Baker**
- Suggestion to request letter of commitment rather than support.
- Language change to confirm that funding from any opioid settlement is accounted for.
- Motion passed with a roll call vote, see voting log for details.

#### **Vote on recommendation:**

- *The Target Population multiple choice question will include this language: We recognize that your project will impact all populations in your designated area that experience SUD. Select only the target populations that your project will specifically outreach with to encourage participation. You may be asked to provide supporting documentation on any target population you select (media campaigns, strategic plans, letters of support from community leaders, etc).*
- *Provide a clear description of the service area and/or who will be served.*
- *Describe how the target populations were selected and what data source(s) were used to justify selection.*
- *To what extent will your proposal increase the number of services actually received by cultural and ethnic minorities?*
- **Member comments: Clubb, Reznikoff, Baker, Stately, Broekemeier**
- Confirmation that target population is specific to the project being proposed, not the organization.
- Motion passed with a roll call vote, see voting log for details

#### **Vote on recommendation:**

- *How does your proposal provide the appropriate types of programs and services to meet the diverse needs of participants and clients? Explain.*
- *How will your specific project design reduce disparities by targeting specific populations?*
- *Explain your current community outreach methods, and how you gather community input.*
- **Member comments: Grosshuesch, Stately**
- Clarification that this section would be increased to 10 points, utilizing the points removed from the Professional Responsibility and Data Privacy question.
- Motion passed with a roll call vote, see voting log for details

## Vote on recommendation:

- *OERAC will dedicate 30% of the funding, totaling \$3,602,400, to Urban Indian Organizations and Tribal Nations. However, if there are not enough eligible proposals to meet this amount, the final distribution of funds will reflect the available qualifying proposals.*
- Initial vote failed, moved to discussion.
- **Member comments: Clubb, Bierman, Reznikoff, Rebertus, Baker, Grosshuesch, Nevins, George, Stately, Steinmetz**
- Background information requested:
  - In 2024, the percentage of total funding granted to Tribal Nations and Urban Indian Organizations was 10.4%. In 2023, the percentage was 7.2%.
  - In 2024, one out of three proposals by Tribal Nations were selected and two out of five proposals by Urban Indian Organizations were selected.
- The proposals for Tribal Nations and Urban Indian Organizations would follow the same procedure of application and review as all other RFP proposals.
- Positive feedback to put funding towards the Native community. Questions on if 30% is the right number. Discussion that the number of proposals selected would naturally increase based on changed language.
- DHS Staff, Michaela Seiber, provided insight on the current grants on the American Indian team at DHS. Identified that after the subcommittee meeting, no Urban Indian Organizations were originally selected for funding.
- Discussion around review process and need for reviewers that understand the cultural significance of certain interventions.
  - Noted that this year, reviewers will only review proposals from one organization type.
  - The council discussed the need to change the system of reviewers and find reviewers who understand culture-based proposals.
- Dr. Stately testified about the need for this funding in the Native community. Native people are 1% of the population but account for 30% of the overdose deaths. Intent is to carve out resources to a community that is heavily impacted. The sovereignty of Tribal Nations allows for a political status and clear way to identify the organizations that are considered owned and operated by Native people in Minnesota.
  - Council noted that the African American community experiences the next highest rate of overdose.
- Suggestion to adjust language to organizations serving the Native population. Council members attested that many organizations select they serve certain communities when they do not have targeted outreach. Need for definition for serving a population.
- Dr. Stately discussed his work to develop an analysis of county level data on opioid overdose. Dr. Stately states that nowhere else in the nation or planet are Native people dying at a faster rate than in South Minneapolis. The need for funding is high.
- Acknowledgement that if there are not enough applications, the funding goes to rest of the proposals.
- Dave Baker motioned to approve the following language: *OERAC will dedicate at least 30% of the funding, totaling \$3,602,400, to Urban Indian Organizations and Tribal Nations. However, if there are not enough eligible proposals to meet this amount, the final distribution of funds will reflect the available*

*qualifying proposals.* Seconded by Charlie Reznikoff. Motion passed with roll call vote, see voting log for details.

#### Vote on recommendation:

- *OERAC is committed to ensuring that 60% of selected proposals come from Targeted Organizations, including Tribal Nations and Urban Indian Organizations. However, if there are not enough eligible proposals to meet this threshold, the final selection will reflect the available qualifying proposals.*
- Initial vote failed, moved to discussion.
- **Member comments: Baker, Stately, Nevins, Grosshuesch, Martin, Reznikoff, Rebertus**
- Clarification: eligible proposals relate to applications that met documentation requirements and were reviewed by community reviewers.
- Reached 58% in 2024 without limit in place. Discussion if this threshold is necessary. Council members recommend keeping the language to set a goal.
- Council noted importance of all populations that contribute to target organizations, including rural communities, women, racial minority/people of color, veterans, and people of disability.
- Verification that the previous recommendation, 30% of funding to Tribal Nations and Urban Indian Organizations, is included within this recommendation.
- Discussion if Tribal Nation and Urban Indian Organization language should be included or not. Agreement that addition of language does not change any decisions being made.
- Council emphasized need to direct funds to communities hardest hit. Discussion that a OERAC Strategy is needed to determine intentions behind funding.
- Sarah Grosshuesch motioned to approve the following language: *OERAC is committed to ensuring that at least 60% of selected proposals come from Targeted Organizations, including Tribal Nations and Urban Indian Organizations. However, if there are not enough eligible proposals to meet this threshold, the final selection will reflect the available qualifying proposals.* Seconded by Curtis Jackson. Motion passed with roll call vote, see voting log for details.

#### Vote on the recommendation:

- *Organizations are ineligible to receive a grant from the OERAC 2025 RFP if they have an active OERAC contract. This would be grantees from OERAC 2023 and OERAC 2024.*
- Initial vote failed, moved to discussion
- **Member comments: Stately, Nevins, Baker, Martin, George, Grosshuesch, Bierman, Reznikoff, Rebertus, Steinmetz**
- Positive feedback that this change would introduce new organizations and serve more people across Minnesota. Concern that some organizations have been funded routinely every year.
- Acknowledgement that skipping one year may be reasonable for a grantee, but multiple years is difficult to justify.
- Clarification:
  - Grantees whose contracts have ended would be eligible to apply.
  - Project continuation is possible since the original contracts would expire before new grant is awarded.

- Purpose is to limit number of OERAC funded projects happening simultaneously within one organization.
- Council noted that large organizations may circumvent rule by creating separate entities that are not listed under their organization.
- Discussion on if restricting applicants would hinder efforts to be funding populations of greatest need.
- Conflict of Interest discussion to determine if council members whose organization have current contracts, should abstain from voting due to the specific language of the recommendations. Agreement that conflict of interest is in place.
- Dave Baker moved to allow staff to make the decision on this issue. Seconded by Robert Bierman. Motion passed with roll call vote, see voting log for details.
  - Verification that staff will take the Council's input into consideration.

**Sarah Grosshuesch moved for organizations to only be eligible for one grant award from OERAC 2025 RFP. Seconded by Kathy Nevins.**

- **Member comments: Grosshuesch, Reznikoff, Nevins, Bierman**
- Confirmation that conflict of interest does not apply since it does not relate to current grantees
- Discussion that in large organizations, there are separate teams that do not communicate. One team being awarded does not benefit the other team, since their work is different. Organizations that have broad expanses should not be penalized.
- Clarification: Organizations could continue to submit multiple applications. They would only be awarded once.
- Concern around taking away applicant eligibility.
- Motion failed, see voting log for details.

## **Council Education: Current Minnesota Data and Projects**

Shelbi Giesel and Deepa McGriff from the Substance Use Epidemiology Unit at the Minnesota Department of Health (MDH) provided an overview drug overdose trends in Minnesota. This included regional trends, access to harm reduction and treatment resources, and MDH's overdose prevention efforts. Shelbi and Deepa recognized the limitations of the data and the lack of Tribal specific data.

Anna Solmeyer from Minnesota Management and Budget presented information on Opioid Settlement Spending projects from OERAC, Counties, Cities, and Tribal Nations.

- **Member comments: Broekemeier, Baker, Clubb, Stately**
- Council expressed need to hear from current OERAC grantees and receive county and city reporting as soon as it is published.
- Discussion on how this information could inform the 2026 RFP and an OERAC strategy.
- National best practice information will be presented at the March 21<sup>st</sup> meeting and the resources will be sent to Council members following this February meeting.
- A request was made for an update from the Prescription Monitoring Program at a future meeting.



## Adjourn

OERAC Chair Joe Clubb adjourned the February 2025 meeting.

Next meeting: March 21st, 10AM – 3:30PM in Morton, MN.

# Roll Call and Voting Log

February 21, 2025

P = in person    R = remote participant    A = absent                      Y = yes (approve)                      N = no    Abs = abstain

Member	Attendance	Minutes approval	Vote: Support voting process as defined by Joe/Stacy	Vote: Approve general changes 1-4	Vote: \$750K cap	Vote: 60% from targeted orgs (round 1)	Vote: 30% to Urban Indian + Tribal Nations (round 1)	Vote: Descr. of appl-icant org	Vote: Service design	Vote: Descr of Target population	Vote: Community impact	Vote: 30% to urban Indian + Tribal Nations (round 2)	Vote: 60% from targeted orgs (round 2)	Vote: DHS staff to decide -eligible with active contract	Vote: Limit orgs to 1 grant award in 2025
Joe Clubb	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	N
Sarah Grosshuesch	P	Y	Y	Y	Y	N	Y	Y	Y	Y	N	Y	Y	Y	N
Dr. Kathy Nevins	R	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y
Rep. Dave Baker	P	Y	Y	Y	Y	N	N	Y	N	N	N	Y	Y	Y	N
Dr. Heather Bell	A	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Rep. Robert Bierman	R (late)		Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Sadie Broekemeier	R	Y	A	A	N	N	N	Y	A	N	N	Y	Y	N	N
Peter Carlson	A	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Dr. Ashwin George	R	Y	Y	Y	pass	N	Pass	Y	A	Y	Y	Y	Y	Y	Y
Curtis Jackson	P(late)		Y	Y	A	A	Y	Y	Y	Y	N	Y	Y	Y	Y
Senator Bill Lieske	A	-	-	-	-	-	-	--	-	-	-	-	-	-	-

# Roll Call and Voting Log

February 21, 2025

Jack Martin	P	Y	Y	Y	Y	Pass	N	Y	N	Y	Y	Y	Y	Y	N
Senator Zaynab Mohamed	R		Y	Y	Y	A	pass	Y	A	A	A	A	A	A	A
Toni Napier	A	-	-	-	-	-	-	-	--	-	-	-	-	-	-
Brock Reed	R	Y	Y	Y	Y	pass	pass	Y	N	Y	N	Y	Y	Y	N
Dr. Charlie Reznikoff	P	Y	Y	Y	Pass	pass	pass	Y	Y	N	N	Y	Y	Y	N
Kristi Schoen	R	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	A	A	A	A
Judge Nicole Starr	A	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Dr. Antony Stately	P		Y	Y	pass	N	pass	Y	Y	Y	Y	Y	Y	Y	<b>Abs</b>
Deepa McGriff	P														
Jolene Rebertus	P														
Teresa Steinmetz	P														
Tally	voting members present= 14 absent= 5	Motion to approve: Baker Second: Reznikoff 10 = yes 0 = no  <b>Passed</b>	13 = Y 0 = N  13 total voters <b>Passed</b>	13 = Y 0 = N  13 total voters <b>Passed</b>	9 = Y 1=N 3 = Abs <b>Passed</b>	5=N 4=Y 3=Abs <b>Failed</b>	6=Y 3=N 5=Abs <b>Passed</b>	14=Y 0=N 14 total voters <b>Passed</b>	8=Y 3=N 11 total voters <b>Passed</b>	10=Y 3=N 13 total voters <b>Passed</b>	7=Y 6=N 13 total voters <b>Passed</b>	Motion= Baker 2 <sup>nd</sup> = Reznikoff 12=Y 0=N 12 total voters <b>Passed</b>	Motion= Grosshuesch 2 <sup>nd</sup> =Jackson 12=Y 0=N 12 total voters <b>Passed</b>	Motion= Baker 2 <sup>nd</sup> = Bierman  9=Y 3=N <b>Passed</b>	Motion= Grosshuesch 2 <sup>nd</sup> =Nevins  3=Y 8=N <b>Failed</b>
			Simple majority required for passage of these votes.												