

## State Targeted Response to the Opioid Crisis grants

The state awarded grants to community agencies aimed at addressing the opioid crisis through prevention, increasing access to treatment, and reducing opioid overdose related deaths.

Vendor Name	Project Category	Total Contract Amount over two years	Description
Minnesota Department of Health (statewide)	Naloxone Distribution	\$300,000	The Minnesota Department of Health will provide Minnesota's eight regional Emergency Medical Service (EMS) programs with funds to purchase opiate antagonists. EMS and law enforcement officers will be trained in the recognition, response and treatment of drug overdose.
Rural AIDS Action Network (statewide)	Naloxone Distribution	\$249,986	The Rural AIDS Action Network (RAAN) will provide syringe exchange services and naloxone training and distribution to community members and professionals.
The Steve Rummeler HOPE Network (statewide)	Naloxone Distribution	\$200,000	<p>The Steve Rummeler HOPE Network will provide training and naloxone kits to any individual or group in need, including hospitals and healthcare agencies, first responders, treatment centers, sober living facilities, treatment court and the public.</p> <p>The Steve Rummeler HOPE Network will educate and provide opioid overdose rescue kits to populations and regions of Minnesota identified as Minnesota's potential opioid service gaps. Some of the counties scheduled in this initiative include Beltrami, Stearns, Dakota, Washington, Nobles, Carlton, St. Louis, Crow Wing Baker, Polk, Roseau, Clearwater, Cass, Mahnommen, Hennepin and neighboring regions.</p>

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Meridian (greater Metro)	Naloxone Distribution	\$399,860	Valhalla Place will target high-risk active opioid users, along with their friends and families, to provide education about opioid overdose and train them to use Naloxone to reverse an opioid overdose. Naloxone kits will be distributed through syringe exchange programs, community outreach agencies, Native American/Tribal organizations and substance use disorder treatment programs to promote access to treatment whenever possible.
Mille Lacs Band of Ojibwe  Leech Lake Band of Ojibwe  Red Lake Nation  White Earth Nation	ICHiRP	\$75,000  \$150,000  \$150,000  \$150,000	The Integrated Care for High Risk Pregnancies (ICHiRP) supports programs targeted at opiate use during pregnancy. The grant supports planning, system development and integration of medical, chemical dependency, public health, social services and child welfare. Additional funds have been added to support the training and hiring of paraprofessionals to the care team. These workers will have knowledge and skills related to peer recovery support, maternity care, system navigation and advocacy.
Northwest Indian Community Development Center	Community Health Worker Mother's Recovery Training	\$140,000	The Northwest Indian Community Development Center will train workers hired by five tribes to become certified as Peer Recovery Support Specialists, design culturally appropriate training for a paraprofessional-level position providing integrated supportive services to pregnant and newly parenting women, support the tribal sanctioning process needed for tribal recognition of this paraprofessional maternal support worker, and cross-train the certified Peer Recovery Support Specialists with the additional knowledge and skills identified for the maternal support worker role.

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Minnesota Community Health Worker Alliance	Community Health Worker Mother's Recovery Training	\$80,000	The Minnesota Community Health Worker Alliance will offer community health worker training to paraprofessionals who are providing support to high risk pregnant and newly-parenting women, develop and deliver specialized maternal health training to better equip paraprofessionals for their roles, orient supervisors to the community health worker role and effective integration in team-based recovery services, and prepare recommendations on training needs.
<p>American Indian Family Center (Ramsey County)</p> <p>Fond du Lac Band of Ojibwe Human Services (Carlton and St. Louis Counties)</p> <p>Hope House of Itasca County (Itasca, St. Louis Counties and Leech Lake Reservation)</p> <p>Journey Home (St. Cloud Hospital)</p>	Parent Child Assistance Program (PCAP)	<p>\$54,400</p> <p>\$57,400</p> <p>\$59,200</p> <p>\$110,000</p>	<p>The projects will train and hire paraprofessional maternal outreach workers cross-trained in recovery support. These workers will be added to programs supported by Women's Recovery Services, a DHS grant program. The care model is inspired by the Parent Child Assistance Program, which is an evidence-based approach whose goals are to:</p> <ul style="list-style-type: none"> <li>• Assist substance-abusing pregnant and parenting mothers in obtaining substance use disorder treatment, staying in recovery, and resolving myriad complex problems related to their substance abuse</li> <li>• To link mothers to community resources that will help them build and maintain healthy, independent family lives, and to prevent the future births of alcohol and drug-affected children.</li> </ul>

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Recovery Plus) (Statewide)  Meeker-McLeod-Sibley (MMS) Counties Human Services (Meeker, McLeod and Sibley Counties)  Perspectives, Inc. (Metro)  Resource, Inc. (Metro)  RS Eden, Inc. (Metro)  Ramsey County Mothers First  Wayside Recovery Center (statewide)  Wellcome Manor Family Services (statewide)		 \$57,400  \$59,800  \$73,000  \$66,600  \$74,000  \$71,200  \$62,400	

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Hennepin County Medical Center (statewide)	Extension for Community Healthcare Outcomes (ECHO) Hub	\$1,025,000	The Hennepin County Medical Center will serve as Minnesota’s Project ECHO hub. Along with other ECHO sites throughout Minnesota, HCMC will engage Minnesota’s medical communities in a series of learning collaboratives via videoconference “clinics” focusing on evidence-based assessment and management of patients with opioid use disorders and associated comorbidities. The teaching faculty and audience will be multidisciplinary and work together to discuss patient needs within the context of effective, patient-centric models of health care delivery. HCMC will assist community providers in the stabilization of their patients through education, consultation, and direct care with the ultimate goal of empowering general medical practices to bring quality evidence-based care to their patients.
Wayside Recovery Center (statewide)	Extension for Community Healthcare Outcomes (ECHO) Hub  Peer Recovery  Recently Released from Incarceration	\$295,669  \$236,131  \$118,800  TOTAL \$650,600	Wayside will serve as a Project ECHO hub, providing capacity and competency building regarding best practices that best serve pregnant, post-partum and parenting women struggling with opioid dependence.  Wayside Recovery Center will increase their Peer Recovery services to assist with transitions between levels of care, better integration into community life, be supported, and engage in long-term relationships with Wayside in order to achieve a sustainable future on the recovery journey.  Women who are pregnant, post-partum or parenting who are also incarcerated and need opioid based treatment options many times fall through the cracks. Wayside will offer treatment and recovery liaisons who will go into the community and offer outreach, assessments, and transition care coordination for those women coming straight from incarceration into treatment.

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St. Gabriel's Health (statewide)	Extension for Community Healthcare Outcomes (ECHO) Hub	\$293,331	CHI St. Gabriel's Health will provide expertise and experience on best practices in addressing opioid use disorder in the family practice setting.
Native American Community Clinic (greater Metro)	Office Based Opioid Treatment (OBOT)  Innovation	\$125,000  \$5,000  TOTAL \$130,000	<p>Native American Community Clinic (NACC) will increase access to opioid-related treatment and improve retention in care through the expansion of their medically assisted treatment program. NACC plans to train a provider for the addition of one new office based opioid treatment provider to prescribe buprenorphine/naloxone to increase their capability of prescribing to 130 patients. NACC will build on its comprehensive program with Minneapolis-based White Earth Substance Abuse Treatment Program to screen and to provide intake, daily dosing, nurse care coordination and recovery services (counseling at NACC and recovery groups at White Earth). NACC will prioritize American Indian pregnant women for the program.</p> <p>NACC will develop a syringe exchange program in partnership with the community organization. The syringe exchange program will greatly decrease the risk for transmission of blood borne pathogens (HIV, Hepatitis C) as well as provide an opportunity for nurse triage, overdose prevention education with naloxone, and referral and linkage to critical health resources. Under this community partnership, NACC will provide sterile needles, syringes and biohazard sharps removal. NACC will provide in-kind registered nurse and community health worker time to assist in staffing of the syringe exchange.</p>

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Dakota Communities  (contract with the Upper Sioux)	Rule 25 Assessments	\$142,269	The Dakota Communities will develop an assessment tool based upon Dakota cultural strengths and resources to better assess the healing needs through a holistic and cultural lens.
	Care Coordination	\$142,669	The Dakota Communities will design and develop a collaborative care plan that is coordinated between, and capitalizes upon, the cultural strengths and resources of the four Dakota communities in Minnesota.
	Innovative	\$270,000	The Dakota Communities will design and develop a plan for a culturally intrinsic healing center and transitional housing facility that more effectively and sustainably responds to the opioid epidemic in the four Minnesota Dakota communities.
		TOTAL \$554,938	
Wilder Recovery Services (Metro)	Care Coordination	\$96,800	Wilder Recovery Services will offer bilingual, bicultural care coordination services to clients in its outpatient treatment program, which specializes in serving clients from Southeast Asian backgrounds with dual diagnosis mental health and substance use disorders. The primary goal of care coordination is supporting the whole-client, whole-family recovery journey, all from a culturally-affirming and responsive lens while building an active continuum of care relationships with other providers and support services in the state of Minnesota.
	Peer Recovery	\$27,869	
		TOTAL \$124,669	



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Minnesota Indian Women's Resource Center  (Metro)	Care Coordination	\$93,075	Nokomis Endaad, of the Minnesota Indian Women's Resource Center, will provide care coordination to clients who have mental health, housing, or medical needs, in addition to economic assistance and life skills support. Included is their weekly Women's Sobriety Support group which is an avenue for women to develop and maintain relationships with other sober women in the community.
Recovery is Happening  (11 SE Minnesota Counties)	Peer Recovery  Rule 25 Assessments	\$261,000  \$157,731  TOTAL \$418,731	Recovery is Happening (RIH) will hire two peer recovery specialists to assist clients suffering from opioid use disorder. The peer recovery specialists will help provide a comprehensive approach to recovery by replacing "referrals" to treatment with "accompaniment and support." The peer accompanies the individual to every needed appointment and ensures that all providers are working together to provide appropriate services directed at achieving long term recovery. The peer recovery specialists will attend medicated assisted recovery implementation team training. The training will teach the implementation team how to replicate the medicated assisted recovery model at RIH, including peer recovery support and education about medication-assisted treatment and recovery.  RIH will employ a full-time Rule 25 assessors to provide substance use disorder assessment at RIH, as well as off campus by appointment to meet individuals where they are in the entire southeastern Minnesota region. Further, the assessor will be available for outreach in adult detention centers, detox centers, and hospitals to facilitate urgent evaluations for those incarcerated or on commitment with opioid use disorder. This will remove administrative hurdles and allowing for immediate



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			additional waived physicians and will maintain a support system for physicians and their patients as needed. The OBOT project will reduce unmet treatment needs contributing to overdoses in Northeastern Minnesota.
Clay County	Detox	\$300,000	The Clay County Detox will be hiring a full time care coordinator who will serve opioid use disorder clients and assist them with successful transitions for a continuum of care. Referral and assistance to access medication-assisted treatment will begin within the first 48 hours of admission to the detox facility and the coordinator will identify referring, treatment and support agencies in the county and surrounding communities. The care coordinator will integrate person centered planning as a key component for discharge planning.
Minnesota Mental Health Community Foundation (statewide)	Fast Tracker	\$134,125	Fast-Tracker is an online, searchable database of substance use disorder and opioid use disorder treatment programs and resources. The Minnesota Mental Health Community Foundation's Fast-TrackerMNSUD.org will offer searchers information about programs, availability, services offered, and special aspects of each program. Emergency contacts and information about life-saving resources are available on every page online anytime. Fast-TrackerMnSUD.org is also a resource for information offering information and links to more.
Broadway Family Medicine	Innovative Office Based Opioid Treatment (OBOT)	\$250,000 \$400,000	University of Minnesota and the Broadway Family Medicine (BFM) faculty will work to strengthen existing Medication Assisted Treatment (MAT) services through improving the behavioral health component. These services will increase the number of trained providers at BFM and bolster competence and confidence of all faculty preceptors and improving clinic processes for MAT. In addition, they will build an integrated MAT

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		TOTAL \$650,000	and addiction medicine training program within primary care at the University of Minnesota Department of Family Medicine and Community Health, which is the main training site for primary care providers in the state. They will create an infrastructure and interdisciplinary model in which opioid use disorder can be treated effectively in primary care.
Minnesota Hospital Association  (statewide)	Innovative	\$50,000	The Minnesota Hospital Association Neonatal Abstinence Syndrome (NAS) subgroup will develop a roadmap to better identify, screen and treat NAS. The roadmap will be based on published literature and evidence based best practices, incorporating expert feedback from obstetricians, perinatologists and neonatologists in partnership with patients and multi-disciplinary leaders. The roadmap will help medical professionals identify opioid addiction early during pregnancy to increase the number of women accessing appropriate treatment before giving birth, guide providers to newborn assessment tools to help with early identification, and share best practices in NAS treatment to help hospitals and health systems make decisions about treatment.
Leech Lake Band of Ojibwe	Recently released	\$264,000	The Leech Lake Band of Ojibwe’s AHNJI-BII-MAH-DIZ Halfway House in Cass Lake will reduce recidivism and re-offense among Native American offenders that have a history of opioid misuse. AHNJI-BII-MAH-DIZ will provide care coordination in a transitional housing setting to help clients successfully transition from correctional facilities back to their communities. Clients will develop individual treatment plans, set employment goals and work on strategies for long-term housing. At AHNJI-BII-MAH-DIZ clients will have access to a network of social support and community wellness programs that will aid in their successful transition back into the community.

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Leech Lake  Pine River-Backus School	Strategic Prevention Framework for prescription Drugs (SPF Rx)	\$500,000  \$990,537	<p>The SPF Rx project will enable Minnesota to work with communities to develop and implement prevention strategies at the local level. The SPF Rx project raises awareness about the risks of sharing medications and promotes collaboration between states/tribes and pharmaceutical and medical communities to understand the risks of overprescribing.</p> <p>In addition, the MN SPF Rx project seeks to address behavioral health disparities among racial and ethnic minorities by encouraging the implementation of strategies to decrease the differences in access, service use, and outcomes among the racial and ethnic minority populations served.</p>
Weber Shandwick	Prevention	\$100,000	Grantee will develop a physician education communications campaign about the appropriate use of opioids to treat pain. The project aims to develop a creative concept that will empower physicians to address this critical issue with their patients and bring about positive change with the opioid epidemic.
Russell Herder	Prevention	\$600,000	Grantee will develop an engagement campaign for at-risk communities in order to drive awareness of opioid abuse and offer informational and overdose intervention resources to potential and current opioid users. The campaign will seek to reach those who are using or may be statistically likely to (most specifically, American Indian and African American youth and adults, the LGBT community, and at risk women, parenting and pregnant), as well as those able to influence preventative action and treatment.

## Expanded Medically-Assisted Treatment Services grants

3-year federal grant to expand access to medication-assisted treatment (MAT) in order to decrease the ongoing epidemic of opioid use and its terrible cost to individuals, families and communities.

Vendor Name	Project Category	Total contract amount annually
White Earth Nation	MAT	\$609,392/year
Red Lake Nation	MAT	\$499,815/year
Fairview Health Services	MAT	\$470,793/year