DRAFT

F-01922 (12/2019)

OPEN MEETING MINUTES

Name of Governmental Body: State Council on A Other Drug Abuse	Virgil, Jennifer Stegall, Autumn Lacy, Nichol Wienkes,
Time Started: 9:32 a.m. Time E 11:57	THE PLANT BY DIVERSION OF CO.
Location: Online via Zoom	Presiding Officer: Kevin Florek

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1. Call Meeting to Order

K. Florek, SCAODA Chairperson, called the meeting to order at 9:32 a.m. K. Florek welcomed Jeremy Gundlach as the newest SCAODA Ex-Officio Designee, representing the Liaison to the Wisconsin Board for People with Developmental Disabilities.

Review and approval of the minutes of June 7, 2024.

J. Stegall moved to accept the minutes. M. Morgen seconded the motion. Motion carried; minutes approved.

Public Comment

M. Morgen announced that the Department of Public Instruction (DPI) has a number of school-based grants related to Alcohol and Other Drug Abuse. M. Morgen asked SCAODA Council audience to share these opportunities out to schools eligible to apply. With questions, email Michael Morgen at michael.morgen@dpi.wi.gov

- https://dpi.wi.gov/sspw/aoda/mini-grant https://dpi.wi.gov/sspw/aoda/opioidpreventiongrant
- https://dpi.wi.gov/sspw/mental-health/youth-suicide-prevention/student-programs/peer-to-peer-suicideprevention-grants

P. Jolly shared that she was approached by the Good Samaritan Coalition about weighing in on bills SB595 and AB634. R. Bhatnagar explained that during the COVID-19 pandemic, Good Samaritan protections sunset. This is an alarming issue as protection for a person who has overdosed, as well as the person who assists them has been evidenced to reduce morbidity and mortality. The Good Samaritan Coalition testified and sponsored legislation, but the legislation did not pass. When they testified it was approved in Committee but was not brought to the House, and thus was not voted upon. The coalition has not received clear answers in regard to why the legislation was not voted on in the House. See here, for more information about the Coalition's legislative efforts, https://wigoodsamaritancoalition.com/wpcontent/uploads/2024/09/04-10-2024-Legislative-Debriefing-Webinar-2.pdf. For more information on the Good Samaritan Coalition, visit their website: https://wigoodsamaritancoalition.com/home/about/

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R. Bhatnagar and P. Jolly asked the Council for their input and advocacy on this issue. The Council discussed various ways to support. J. Stegall inquired if the bill's author plans to re-introduce it. E. Salisbury-Afshar responded that she was unsure. J. Stegall recommended strategizing a timeline for advocacy for after the election, as there is usually a period of time post- election when the composition is changing, the landscape is ambiguous, and outcomes dramatically impact who we would need as sponsor to the legislation. B. Collier recommended writing a joint letter by the coalition that could be signed by all relevant institutions in the state. C. Wardlow suggested that efforts surrounding Good Samaritan protections be furthered in a workgroup, such as one of SCAODA's committees. K. Florek asked R. Bhatnagar to continue to keep SCAODA informed on advocacy efforts and how best SCAODA can plug in to support.

Next B. Dean, a member of the Wisconsin Association of School Boards, shared that there is funding available to start recovery high schools. Currently Horizon High School is the only recovery high school in Wisconsin. B. Dean asked SCAODA audience members to share these opportunities with school districts who could benefit from this funding. Please see more information on Horizon High school here, https://www.horizonhs.org/. Additionally, Horizon is hosting a Fall Festival and Fundraiser in celebration of Horizon High School's 20th Anniversary. The fundraiser will be held, Wednesday, September 18th, 5:30 - 8:00 pm at Madison Sheraton Hotel.

2. Updates from the Wisconsin Council on Mental Health

C. Barnard, Wisconsin Council on Mental Health Co-Chair, shared about the Council's upcoming Fall Tour. The Fall Tour is an annual 2-day meeting occurring both virtually, and in-person at UW Superior. This year, the Fall Tour will be taking place on Tuesday, September 17th with their full Council meeting taking place the next day on, Wednesday, September 18th. Some highlights of this agenda include presentations and discussions on border county issues, mental health programs & services in schools, and peer support.

3. Housing Recovery Vouchers Presentation

E. Bourne and D. Duquette provided a presentation on the Recovery Voucher Grant. The slide deck is available on the Wisconsin Public Meeting Notices and Minutes website, https://publicmeetings.wi.gov/view/6601f7cc-9e14-41e2-ab50-56f38fad9fb0/1

Presenters began by providing background that the program is funded by a portion of Wisconsin's McKinsey & Company opioid settlement funds. Recognizing that safe and stable housing is fundamental to recovery, DHS decided to use \$2.9 million to create the Recovery Voucher (RV) Grant Program. DHS is partnering with the Department of Administration (DOA), Division of Energy, Housing, and Community Resources (DEHCR) to administer this grant given DEHCR's expertise in housing programs and existing relationships with homeless service providers. The program started in 2023 and is now in it's second year. Over 260 people have been served to date with 76% of clients identifying as white, and 24% BIPOC. Clients have been placed in recovery residences in 11 counties across the state. Six agencies were awarded grants to be RV admins and have been encouraging recovery residences to sign up for the DHS Registry, contributing to the significant growth.

Both individuals and families are eligible to be supported by the RV program. To be eligible for the RV program, clients must meet two requirements: 1. Documentation of an opioid use disorder (OUD) diagnosis or having received OUD treatment in the past, 2. Documentation of HUD Homelessness. Eligible clients participate in the below client flow:

- a. The RV Admin works with the client to find the best possible recovery residence placement.
- b. The RV Admin enters into an agreement with the recovery residence outlining the client's stay parameters.
- c. The client moves into the recovery residence.
- d. The recovery residence and the RV Admin stay in communication through periodic check-ins and when issues arise.
- e. At the end of the client's stay, the recovery residence performs an exit interview with the client, the RV Admin provides housing navigation.

Rate requirements include:

 Best Rate: The rate provided to the program must be the same or lower than rates provided to clients not supported by the program. F-01922 Page 3 of 7

 At or under the RV Maximum Allowable Rate: The RV Maximum Allowable Rate (RV Max Rate) differs by client type (single or family). The RV Max Rate is based on the HUD Fair Market Rates (FMR)* for the recovery residence's location:

- Efficiency FMR * 75% * 135% = RV Max Rate for Singles
- Efficiency FMR * 135% = RV Max Rate for Families

Clients can be supported for a maximum of 24-months by the program.

To refer clients for RV Assistance, connect with the nearest RV Administrator. A map showing each RV Administrator's service area as well as their contact information is available on DEHCR's website, https://energyandhousing.wi.gov/Pages/AgencyResources/RecoveryVoucherGrant.aspx.

In looking ahead, the Recovery Voucher Grant plans to expand access by adding more funding per RV Admin and bringing on more RV Admins. In 2025 there are plans to start recovery residence inspections.

To conclude their presentations D. Duquette and E. Bourne provided the DHS DQA email with any questions, DHSDQAMentalHealthAODA@dhs.wisconsin.gov.

4. Prevention Committee Presentation on Psychoactive Hemp Derivatives Ad Hoc Report

C. Wardlow and M. Moore presented the report on psychoactive hemp derivates, produced by an ad hoc group within Prevention Committee. The group formed about one year ago after a Council motion was approved to form an ad hoc group to study the effect of hemp derivates, given increases in Wisconsin's use. To read the full report, see page 37 of the SCAODA booklet provided on the Wisconsin Public Meeting Notices & Minutes website, https://publicmeetings.wi.gov/view/6601f7cc-9e14-41e2-ab50-56f38fad9fb0/1

The intent of the report is to generate awareness about the emerging public health threat of unregulated derived psychoactive cannabis products and provide recommendations to state and local policymakers, and agencies, on actions needed to deter underage use of these harmful substances. The report explains that historically, the production of hemp in the US (and cannabis) were federally prohibited under the 1970s Controlled Substances Act (CSA). However, the 2014 Farm Bill allowed for states to launch pilot programs where farmers were allowed to apply to participate in growing industrial hemp. In 2018 the Farm Bill was released again, but this time eliminated the word "industrial" from the term and redefined "hemp" as "the plant Cannabis sativa L. and any part of that plant, including the seeds thereof and all derivatives, extracts, cannabinoids, isomers, acids, salts, and salts of isomers, whether growing or not, with a delta-9 THC concentration of not more than 0.3 percent on a dry weight basis". The new definition explicitly includes cannabinoids, such as cannabidiol (CBD), which clarifies the scope of the defined term of "hemp" when used in other related laws. To align with the new federal bill, the Wisconsin legislature adopted the 2019 Wisconsin Act 68 (effective date of November 28, 2019), which modified state law in accordance with the 2018 Farm Bill. In the years that have followed the passage of the 2018 Farm Bill, the FDA issued ten warnings to various manufacturers of cannabis-derived products based on illegally promoting unsubstantiated health claims. In addition to Δ8 THC, other derived psychoactive cannabis products (DPCPs) continue to flood the market.

Wisconsin, like the rest of the country, has been inundated with DPCPs. DPCPs are available in many communities throughout the state in a variety of retail settings like gas stations, convenience stores, grocery stores, vape and smoke shops, and in some instances, vending machines. They are also available online. DPCPs include vapes, gummies, candies, edibles, concentrates, and tinctures (e.g., infused liquids). Some manufacturers are not shy about promoting the intoxicating qualities of their products and packaging them in ways that appeal to children and mimic well known commercial food products. Of major concern is the impact DPCPs can have on the health and development of young people. Research continues to shed light on the deleterious effects delta-9 THC can have on adolescent mental, emotional, and behavioral health. Numerous studies have found that adolescent cannabis use is associated with: Compromised cognitive development (learning, memory, and attention); Poor academic performance; Development of cannabis use disorder; Risk of psychiatric disorders, such as depression, psychosis, and suicidality. Intoxication leading to

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impaired decision making, reaction time, and coordination. For these reasons, this report prioritizes strategies aimed at reducing access and appeal to young people. DPCPs are currently unregulated at both the federal and state level. In Wisconsin, unless a municipality chooses to impose their own restrictions, there are no state-level regulations in place to prevent underage exposure to, and use of, these products. With lessons learned from tobacco and alcohol, the report offers evidence informed recommendations for state, local, and school district policymakers to take the first steps in protecting our young people from the harms of underage use of derived psychoactive cannabis products.

After the report was presented, C. Wardlow and M. Moore requested a motion.

Motion: That SCAODA adopt the analysis and recommendation report of the Psychoactive Hemp Derivatives Ad Hoc Committee

- K. Florek moved to pass the motion.
- T. Virgil seconded the motion.
- D. Johnson asked a clarification question about where Goal 2 originated from, and C. Wardlow responded that it is cited on the SCAODA Strategic Plan, https://www.dhs.wisconsin.gov/scaoda/strategicplan.htm
 All in favor, none opposed. J. Grebel abstained.
 Motion passes.

5. SCAODA Committee Updates

a. Prevention Committee

M. Busalacchi provided updates for the Prevention Committee, beginning with an announcement regarding the Alcohol Policy Seminar to be held October 7-8 in Oshkosh. The seminar is a training and networking opportunity for communities working to reduce excessive alcohol use. For more information visit the following website, https://www.wisconsinconnect.org/2024aps.html

Next, M. Busalacchi shared that the Prevention Committee has been working on Place of Last Drink (POLD) so that all state law enforcement has access to that data that identifies problematic areas. Additionally, POLD allows the ability to share back with bars and restaurants to alert them of potential overservice so that they may adjust their service accordingly.

M. Busalacchi then shared about alcohol age compliance checks, noting that there has been some recent media covering a new mobile application being released in several months. To view this media, visit https://www.wsaw.com/2024/09/06/alcohol-compliance-checks-increasing-northcentral-wisconsin/

Next, M. Busalacchi discussed environmental scans currently being conducted in tobacco retail, that can be adapted for alcohol in a given environment. An organization called Counter Tools will host a free opportunity for people to participate in those alcohol environmental scans.

K. Florek asked M. Busalacchi, given her affiliation with the University and prevention, if she could provide insight on the decision to sell alcohol at Badger football games. M. Busalacchi that yes, she is concerned, and she as well have others have expressed concern and shared recommendations with UW.

b. Executive Committee

K. Florek began the Executive committee announcements by thanking committees for submitting budget recommendations. These recommendations were reviewed by the Executive Committee and will be presented on later in the meeting. Additionally, Executive Committee thanks Council members for their active attendance. Council member attendance is being tracked.

Next K. Florek announced that the Executive Committee is preparing a workshop to present at the 20th Annual Mental Health and Substance Use Recovery Conference to be held at Kalahari Resort and Convention Center, October 17-18th. The workshop will be held Thursday, October 17th, 1-2:30 p.m. and is titled, "SCAODA: Not Just Another Acronym! How the Council Can Help You and Your Consumers."

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c. Diversity Committee

D. Johnson provided the update for Diversity Committee. The committee last met August 29th to develop their goals. They will be altering their meeting cadence to meet the second Tuesday of every other month. Their next meeting will be held Oct 15th. Recently the Diversity Committee lost two of its members and is are actively recruiting to fill those seats.

d. Intervention and Treatment Committee

S. Weix provided the update for ITC. S. Weix explained the reasoning for why ITC felt it necessary to highlight Vivitrol in the budget recommendation to expand access to SUD treatment medications. S. Weix elaborated there are gaps in assisted treatment using vivitrol for alcohol use disorder. Unless a patient has Medicaid or insurance cost can be a major barrier. Especially considering the aging population, elderly people have increased barriers.

e. Planning and Funding Committee

B. Collier provided the update for Planning and Funding Committee, sharing that the committee has been focused on drafting budget recommendations for the State Budget. Additionally, the committee recently met with Pam Lano regarding Medicaid reimbursement. The committee is tracking developments that have been completed, as well as those planned in coming years.

6. Review and approval of committee budget recommendations

During this portion of the meeting, the Council presented all recommendations put forth by SCAODA committees that were approved of by the Executive Committee. See page 13 of the meeting booklet provided here, https://publicmeetings.wi.gov/view/6601f7cc-9e14-41e2-ab50-56f38fad9fb0/1, for all committee budget recommendations. While reviewing, the following recommendations received comments:

- Expand vivitrol to providers: B. Collier suggested expanding the recommendation's language to include all treatment medication, not just Vivitrol. S. Weix explained that ITC Committee's intention in calling out Vivitrol was that it's a medication that can be very expensive and inaccessible if a patient is uninsured or insurance does not cover. The Council discussed the language being broadened to cover all treatment medications for Substance Use Disorder, but being sure to specifically list Vivitrol in some of the examples.
- 24-hour childcare/daycare services: D. Johnson asked if 24- hour daycare was currently available in Wisconsin. S. Weix responded that there used to be care available to those working night shift that was critical to their recovery. However now, regardless of time of day, clients struggle to find affordable day care. The Council moved this recommend forward without any changes.
- Stabilization Funds: B. Collier commented that DOC used to have a sundry fund, to request funds for trades
 equipment (like steel toed boots) that would help with recovery in getting employment, but that in her
 experience she's mostly seen these types of supports fade away. The Council moved this recommend forward
 without any changes.
- 1115 Waiver: B. Collier explained that this recommendation came from the Planning and Funding Committee, to encourage DHS to replicate the 1115 Waiver for incarcerated individuals. The intention would be for these individuals to receive services at the end of their sentences while still in custody as part of the reentry process. Also, to replicate the 1115 Waiver process for contingency management to be implemented at the evidence-based practice level. B. Collier Shared that Bill Hanna, Wisconsin Medicaid Director, attended a recent committee meeting and explained that it was not able to be moved forward because the Medicaid budget needs to be zero sum cost for its funding. The Council moved this recommend forward without any changes.
- **Peer Support Services:** S. Weix noted that there have been disagreements in the language with those supervising peer support specialists being named "clinical supervisory staff." This term has not been openly accepted in the peer support services community, but the Council's intention is to support their efforts and is using this title term as a placeholder until new language may replace. The Council moved this recommend forward without any changes.

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Having reviewed all the Committee budget recommendations as a Council, a motion was then made to move recommendations forward, to share with DHS.

Motion: To move forward SCAODA Committee recommendations to DHS, with amended language in recommendation #1 (Expand treatment medication to providers)

- S. Barry moved to pass the motion.
- D. Johnson seconded the motion.

All in favor, none opposed. J. Grebel, T. Virgil, A. Lacy, M. Morgen, P. Krupski abstained. Motion passes.

7.Agency Reports:

- a. Department of Health Services
- P. Krupski shared that the Governor's Task Force on Healthcare Workforce recently wrapped up, and that particularly the behavioral health workforce was a focus of many recommendations. See here for the final recommendations and report, https://www.dhs.wisconsin.gov/hc-workforce/index.htm, of which will be incorporated into the Governor's State budget.
- b. Substance Use Initiatives
- M. Haese shared that funding opportunities continue to be released, and encouraged Council meeting attendees to apply to funding where eligible.
- c. Other Agencies
- S. Barry shared that DSPS continues to oversee the prescription drug monitoring program, which has seen huge success for pharmacies and providers.

8. Updates from the Bureau of Prevention Treatment and Recovery

J. Cram shared updates from the Bureau of Prevention Treatment and Recovery, as previous Director, Teresa Steinmetz, has departed from her role. Other staff updates include the leave of Ryan Stachoviak, as Section Manager in the Bureau who provided staffing support to SCAODA Council. The Bureau is hiring for multiple positions and encourages those interested to apply.

Next J. Cram shared the following webpages for the Council's awareness:

- https://www.dhs.wisconsin.gov/rules/active-rulemaking-projects.htm
- https://www.dhs.wisconsin.gov/scaoda/index.htm
- https://www.dhs.wisconsin.gov/business/solicitations-list.htm

Notably the Bureau is working on DHS 72 (a treatment certificate for recovery coaches), DHS 75 (Advanced Practice Social Workers treating substance use disorder), DHS 33 (crisis hostels) and DHS 31 (Crisis urgent care and observation facilities). The Bureau will continue to share updates on rulemaking projects as they develop, and Council meeting attendees are welcome to provide comments via the listed contacts on the rule-making website.

9.Call for future SCAODA agenda items

- Provide updates on any developments with Good Samaritan legislation
- S. Chauhan suggested a discussion about collaborating with DSPS to accept SUD certifications from IC&RC states

The next SCAODA Council meeting will be held Friday, December 6, 2024, 9:30 a.m. - 1:00 p.m.

10. Adjourn

- D. Johnson moved to adjourn.
- T. Virgil seconded the motion.

All in favor. None opposed.

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Meeting adjourned at 11:57 a.m.

Prepared by: Kim Dawson on 9/6/2024.

These minutes are in draft from. They will be presented for approval by the governmental body on: 12/6/2024