

## Meeting Agenda

**SUD OVERSIGHT POLICY BOARD**

Wednesday, December 6, 2023 4:00 PM

Board Room - Community Mental Health of Ottawa County  
12265 James Street, Holland, MI 49424

1. Call to Order: Chair
2. Roll Call/Introductions: Chair
3. Public Comment: Chair
4. Conflict of Interest: Chair
5. Review/Approval of Agenda-Chair (*Attachment 1*)  
**Suggested Motion:** To approve the December 6, 2023 LRE Oversight Policy Board meeting agenda as presented.
6. Review/Approval of Minutes-Chair (*Attachment 2*)  
**Suggested Motion:** To approve the September 6, 2023 LRE Oversight Policy Board meeting minutes as presented.
7. Finance Report (Maxine Coleman)
  - a. Statement of Activities (*Attachment 3*)
  - b. Budget Amendment #1 (*Attachment 3a*)  
**Suggested Motion:** The Oversight Policy Board:
    - (a) Approves the allocation of PA2 funds for the LRE SUD Budget as presented.
    - (b) Advise and recommends that the LRE Board approve the non-PA2 fund budgets for SUD services as presented
8. Old Business
  - a. N180 Use of FY23 Extra PA2 Funds requested September 2023 – Stacia Chick (*Attachment 4*)
9. New Business
  - a. Opiate Settlement Dollars – LRE Team (*Attachment 5*)
  - b. Oversight Policy Board Meeting Schedule – Stephanie VanDerKooi (*Attachment 6*)  
**Discussion:** 2024 Meeting location  
**Suggested Motion:** To approve the 2024 Lakeshore Regional Entity Oversight Policy Board meeting schedule as presented.
10. State/Regional Updates (Stephanie VanDerKooi)
  - a. LRE 3-Year SUD Strategic Plan
  - b. Legislative Update (*Attachment 7*)

11. Prevention Updates – Amy Embury

- a. Prevention Providers (*Attachment 8*)
- b. Gambling Grant Allocation
- c. Marihuana Operation and Oversight Grants (*Attachment 9*)

12. SUD Treatment Updates – Amanda Tarantowski

13. Next Meeting

March 6, 2024 – 4:00 PM - TBD

Meeting Minutes (proposed)  
**SUD OVERSIGHT POLICY BOARD**

Wednesday, September 6, 2023 4:00 PM  
 Board Room - Community Mental Health of Ottawa County  
 12265 James Street, Holland, MI 49424

CALL TO ORDER

Mr. Andrew Sebolt, LRE Oversight Policy Board Vice-Chair, called the September 6, 2023 meeting to order at 4:00 PM

ROLL CALL/INTRODUCTION– Chair

Present at Roll Call:

MEMBER	P	A	MEMBER	P	A
Martha Burkett		x	Stan Ponstein	x	
Shelly Cole-Mickens		x	Julie Sanford		x
Mark DeYoung	x		Andrew Sebolt	x	
Bethany Fisk		x	Sarah Sobel	x	
Marcia Hovey-Wright	x		James Storey	x	
Rebecca Lange	x		Patrick Sweeney		x
Richard Kanten	x		Clyde Welford	x	
David Parnin	x		Doug Zylstra		x

Welcome Mr. Clyde Welford to the Oversight Policy Board representing Lake County.

PUBLIC COMMENT

No Public Comment

CONFLICT OF INTEREST

No Conflict of Interest declared.

REVIEW/APPROVAL OF AGENDA

OPB 23-009 Motion: To approve the September 6, 2023 LRE Oversight Policy Board meeting agenda as presented.

Moved: Hovey-Wright

Support: Ponstein

MOTION CARRIED

REVIEW/APPROVAL OF MINUTES

OPB 23-010 Motion: To approve the June 7, 2023 LRE Oversight Policy Board meeting minutes as presented.

Moved: Ponstein

Support: Hovey-Wright

MOTION CARRIED

FINANCE REPORT - Maxine Coleman

**Statement of Activities** – Ms. Coleman reviewed the statement of activities through July, 2023.

Revenues as of the report date are 50 percent, expenditures are at 48 percent. Grant expenditures

reflect as being over target due to the practice of using PA2 funds only after all other funds are applied. PA2 can be carried forward; whereas grant dollars must be spent within the fiscal year. The region is projecting a surplus of approximately \$10 million in Healthy Michigan and a projected deficit in Medicaid of \$2.3 million. Overall, there are no budgetary concerns noted.

### **FY23 Budget Amendment #2**

OPB 23-011 Motion: *The Oversight Policy Board:*

- (a) Approves the allocation of PA2 funds for the FY23 LRE SUD Budget as presented.
- (b) Advises and recommends that the LRE Board approve the FY23 non-PA2 fund budgets for SUD services as presented.

Moved: Hovey-Wright

Support: Parnin

MOTION CARRIED

All providers were asked to present requests for additional funds (or provide surplus information), and all requests were able to be accommodated. Gambling grant funds were reduced by the state mid-year and those allocation were reflected in the adjustment. Overall adjustment is approximately \$84,000.

### OLD BUSINESS

No Old Business

### NEW BUSINESS

#### **FY24 Budget Proposal**

##### ***Suggested Motion:***

OPB 23-12 Motion: The Oversight Policy Board:

- (a) Approves the allocation of PA2 funds for the FY24 LRE SUD Budget as presented.
- (b) Advises and recommends that the LRE Board approve the FY24 non-PA2 fund budgets for SUD services.

Moved: Ponstein

Support: Welford

MOTION CARRIED

FY24 grants compared to FY23 reflect a \$1.7 million increase in funding. COVID grant will end in March, 2024, but PA2 is projected to increase for all counties. SOR3 allocation remained steady.

### **Policy & Procedure Review**

Policy 12.1 relates to the use of Reserve PA2 funds. Some minor edits were reviewed. Organizational Procedure 12.4b was created to outline a process for SUD Treatment and Prevention providers to request additional PA2 funds within the current fiscal year.

### **Discussion/Recommendation:**

- Include language that there is no appeal process in the procedure.
- Total reserve of PA2 is 14.5 million (through June 30) which includes fund balance for prior fiscal year and allocations for this year. Funds are specific to each county and cannot be used by other counties.

### **CMHOC Request for PA2 Special Project funds**

OPB 23-13 Motion: To approve Community Mental Health of Ottawa County's request to use reserve Ottawa County PA2 funds in the amount of \$60,000 to fund Recovery

Coach Support Services to the Homeless Population in FY2024. This approval is contingent upon all other available funding options (COVID-19 Funds, ARPA Funds, PBIB funds) being applied prior to applying PA2 funds.

Moved: Hovey-Wright  
MOTION CARRIED

Support: DeYoung

Mr. Joel Ebbers, CMHOC SUD Program Supervisor, reviewed the proposal for additional funds. These funds will allow a CMHOC Recovery Coach to work with the homeless population. The position was previously funded by a Community Foundation grant that ends 9/30/2023. Will revisit continuation of the program next year.

#### **N180 Request for FY23 Additional PA2 Funds**

OPB 23-14 Motion: LRE Oversight Policy Board approves the transfer of up to \$1.4 million in reserve PA2 funds to Kent County for the purpose of funding two programs (Family Engagement Team and Recovery Management) at Network180 for FY2023 expenditures. This approval is contingent upon N180 exhausting all other available funding options (e.g. Women's Specialty Grants, COVID-19 Funds, ARPA Funds, PBIP funds) prior to applying any reserve PA2 funds. N180 must provide the final amount needed for this transfer after applying all available funds no later than September 15, 2023.

Moved: Kanten  
MOTION CARRIED

Support: Parnin

Mr. William Ward, Network180 Director reported that Medicaid and Healthy Michigan funds are currently financing these programs. By applying PA2 funds to these programs, it will alleviate the need to request Internal Service Funds to pay for these services. Kent County reserve PA2 funds are currently approximately \$8 million.

#### STATE/REGIONAL UPDATES – Stephanie VanDerKooi

##### **CMHAM SUD Conference** – September 10 – 12

One Board member has expressed interest in participating; updates will be provided in December.

#### PREVENTION UPDATES - Amy Embury

**Prevention Procurement** - the procurement process is complete, and ten providers have been selected.

**SYNAR** - Tobacco compliance checks are completed in each county annually. The compliance rate is higher than last year. Block grant funding is tied to these compliance checks and meeting the minimum standard.

#### SUD TREATMENT UPDATES – Amanda Tarantowski

**FY23 Q3 SUD Treatment Evaluation Report** – The only area of concern noted is that the region did not meet the benchmark for time to service for injecting drug users (3 days from call). This will be addressed with providers.

#### **Grants** – Multiple grants funding creative projects

- Kent County Engagement Center
- Mobile Health Unit

- Recovery Peers
- Expansion of recovery residences

ADJOURN

OPB 23-015 Motion: To adjourn the September 6 2023 Lakeshore Regional Entity Oversight Policy Board meeting.

Moved: Welford

Support: Parnin

MOTION CARRIED

Mr. Sebolt adjourned the September 6, 2023 Lakeshore Regional Entity Oversight Policy Board meeting at 5:10 pm.

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Patrick Sweeney, OPB Chair

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Sarah Sobel, OBP Secretary

NEXT MEETING

December 6, 2023 – 4:00 PM  
CMHOC Board Room

**Lakeshore Regional Entity  
Substance Use Disorders  
FY24 Block Grant Expenditures**

Block Grant	Year Ending	Year To Date	Budget to Actual Variance	
	9/30/2024	10/31/2023		
	FY24 Budget Initial Budget	FY24 Budget to Date	Actual	
<b>Operating Revenues</b>				
SUD Block Grant (includes SDA)	6,731,364	560,947	0	560,947
SUD Block Grant SOR	3,279,552	273,296	0	273,296
SUD Block Grant Gambling	171,801	14,317	0	14,317
SUD Block Grant COVID	1,042,370	86,864	0	86,864
Drug Free Communities (DFC) Grant	125,000	10,417	0	10,417
SUD Block Grant Amer Rescue Plan Act (ARPA)	544,060	45,338	0	45,338
<b>Total Operating Revenues</b>	<b>11,894,147</b>	<b>991,179</b>	<b>0</b>	<b>991,179</b>
<b>Expenditures - Treatment</b>				
<b>LRE Direct &amp; Regional Administration - Treatment</b>	311,418	25,952	3,825	22,127
LRE Direct & Administration - SOR	281,364	23,447	7,294	16,153
LRE Administration - COVID	45,513	3,793	3,983	(190)
LRE Administration - ARPA	10,100	842	660	182
<b>Treatment Payments to Members</b>				
OnPoint (Allegan Co CMH) - Treatment	488,460	40,705	0	40,705
OnPoint (Allegan Co CMH) - SOR	228,651	19,054	0	19,054
OnPoint (Allegan Co CMH) - COVID	171,963	14,330	0	14,330
Healthwest - Treatment	751,523	62,627	0	62,627
Healthwest ARPA	50,000	4,167	0	4,167
Healthwest SOR	1,022,005	85,167	0	85,167
Healthwest - COVID	6,487	541	0	541
Network180 - Treatment	2,497,540	208,128	193,688	14,440
Network 180 - SOR	1,139,341	94,945	0	94,945
Network 180 - ARPA	175,000	14,583	0	14,583
Network180 - COVID	229,006	19,084	7,926	11,157
CMH of Ottawa County - Treatment	824,524	68,710	4,791	63,920
CMH of Ottawa County - SOR	167,742	13,979	0	13,979
CMH of Ottawa County - ARPA	150,000	12,500	0	12,500
CMH of Ottawa County - COVID	220,000	18,333	0	18,333
West Michigan CMH - Treatment	411,819	34,318	18,456	15,862
West Michigan CMH - SOR	185,068	15,422	4,560	10,862
West Michigan CMH - COVID	65,000	5,417	0	5,417
<b>Expenditures - Prevention</b>				
<b>LRE Direct &amp; Regional Administration - Prevention</b>	259,401	21,617	8,433	13,183
LRE Direct & Regional Administration - COVID	87,401	7,283	928	6,355
LRE Direct & Regional Administration - ARPA	36,441	3,037	417	2,620
LRE Direct & Regional Administration - Prevention SOR	41,147	3,429	1,425	2,004
LRE Direct Administration - Gambling	68,801	5,733	1,036	4,698
LRE Direct Administration - DFC	25,000	2,083	1,343	741

**Expenditures - Prevention - continued**

<b>OnPoint (Allegan Co CMH) - Prevention</b>	108,701	9,058	19,291	(10,232)
OnPoint (Allegan Co CMH) - Prevention SOR	39,000	3,250	3,726	(476)
OnPoint (Allegan Co CMH) - Prevention ARPA	16,660	1,388	1,369	19
OnPoint (Allegan Co CMH) - Prevention COVID	25,000	2,083	1,210	874
<b>Arbor Circle / Pathways - Prevention</b>	272,398	22,700	39,638	(16,938)
Arbor Circle / Pathways - Prevention SOR	25,000	2,083	2,113	(30)
Arbor Circle / Pathways - Prevention Gambling	28,000	2,333	2,132	201
Arbor Circle / Pathways - ARPA	31,908	2,659	2,918	(259)
Arbor Circle - COVID	32,000	2,667	3,036	(369)
<b>District 10 Health Department - Prevention</b>	65,075	5,423	0	5,423
District 10 Health Department - SOR	37,200	3,100	0	3,100
District 10 Health Department - ARPA	14,766	1,231	0	1,231
District 10 Health Department - COVID	15,000	1,250	0	1,250
District 10 Health Department - DFC	100,000	8,333	0	8,333
District 10 Health Department - Gambling	32,000	2,667	0	2,667
<b>Kent County Health Department - Prevention</b>	242,773	20,231	0	20,231
Kent County Health Department - Prevention SOR	65,000	5,417	0	5,417
Kent County Health Department - ARPA	16,667	1,389	0	1,389
Kent County Health Department - COVID	30,000	2,500	0	2,500
<b>Mercy Health - Prevention</b>	40,000	3,333	0	3,333
Mercy Health - COVID	15,000	1,250	0	1,250
Mercy Health - ARPA	9,170	764	0	764
<b>Network 180 - Prevention</b>	175,000	14,583	0	14,583
Network 180 - COVID	25,000	2,083	0	2,083
<b>Ottawa County Health Department - Prevention</b>	85,000	7,083	0	7,083
Ottawa County Health Department - Prevention SOR	28,000	2,333	0	2,333
Ottawa County Health Department - ARPA	8,810	734	0	734
Ottawa County Health Department - COVID	10,000	833	0	833
<b>Community Mental Health of Ottawa County - COVID</b>	10,000	833	0	833
Community Mental Health of Ottawa County - ARPA	8,810	734	0	734
<b>Public Health Muskegon County - Prevention</b>	127,732	10,644	0	10,644
Public Health Muskegon County - Prevention Gambling	43,000	3,583	0	3,583
Public Health Muskegon County - Prevention SOR	20,034	1,670	0	1,670
Public Health Muskegon County - ARPA	9,168	764	0	764
Public Health Muskegon County - COVID	30,000	2,500	0	2,500
<b>Wedgwood Christian Services - Prevention</b>	70,000	5,833	10,228	(4,395)
Wedgwood Christian Services - COVID	25,000	2,083	335	1,748
Wedgwood Christian Services - ARPA	16,660	1,388	1,960	(572)
<b>Total Expenditures</b>	11,904,247	992,021	346,721	645,300
<b>Total Change in Net Assets</b>	<b>(10,100)</b>	<b>(842)</b>	<b>(346,721)</b>	<b>345,879</b>

As of 12/4/23



**Lakeshore Regional Entity  
Substance Use Disorders  
FY24 PA2 Expenditures**

<b>PA2</b>	Year Ending 9/30/2024	Year To Date 10/31/2023		
	FY24 Budget Initial Budget	FY24 Budget to Date	Actual	Budget to Actual Variance
<b>Operating Revenues</b>				
PA2 Liquor Tax - Current FY	3,748,366	312,364	0	312,364
PA2 Liquor Tax - Reserves	0	0	0	0
<b>Total Operating Revenues</b>	<b>3,748,366</b>	<b>312,364</b>	<b>0</b>	<b>312,364</b>
<b>Expenditures - Prevention</b>				
OnPoint (Allegan Co CMH) - Prevention	191,925	15,994	0	15,994
Arbor Circle / Pathways - Prevention	234,597	19,550	0	19,550
District 10 Health Department - Prevention	60,702	5,059	0	5,059
Kent County Health Department - Prevention	180,000	15,000	0	15,000
Mercy Health - Prevention	30,000	2,500	0	2,500
Network 180 - Prevention	200,000	16,667	0	16,667
Community Mental Health of Ottawa County	82,763	6,897	0	6,897
Ottawa County Health Department - Prevention	71,822	5,985	0	5,985
Public Health Muskegon County - Prevention	209,424	17,452	0	17,452
Wedgwood Christian Services - Prevention	65,000	5,417	0	5,417
<b>Expenditures - Treatment</b>				
Treatment Payments to Members				
Healthwest	180,511	15,043	0	15,043
Network180	1,447,774	120,648	0	120,648
CMH of Ottawa County	267,723	22,310	0	22,310
West Michigan CMH	20,000	1,667	0	1,667
<b>Total Expenditures</b>	<b>3,242,241</b>	<b>270,187</b>	<b>0</b>	<b>270,187</b>
<b>Total Change in Net Assets</b>	<b>506,125</b>	<b>42,177</b>	<b>0</b>	<b>42,177</b>

As of 12/4/23

**Lakeshore Regional Entity  
Substance Use Disorders  
FY24 Medicaid Treatment Expenditures**

Year To Date Through 10/31/23

CATEGORY	CMHSP Medicaid YTD Totals	LRE Admin Med YTD Totals	LRE Medicaid Budget Totals	LRE % of Budget Spent
<b>Total Expenditures for Treatment Services</b>				
	\$ 377,991.19	\$ -	\$ 9,505,856	3.98%
Women's Specialty Services	\$ 21,847.55	\$ -	\$ -	#DIV/0!
Other Specialty Services	\$ -	\$ -	\$ -	0.00%
Access Management System	\$ 17,269.44	\$ -	\$ -	#DIV/0!
General Administration	\$ 6,652.26	\$ -	\$ -	#DIV/0!
<b>GRAND TOTAL OF SA EXPENDITURES</b>	<b>\$ 423,760.44</b>	<b>\$ -</b>	<b>\$ 9,505,856</b>	<b>4.46%</b>
<b>SOURCE OF FUNDS</b>				
Medicaid	\$ 423,760.44	\$ -	\$ 9,505,856	4.46%
Other: Local	\$ -	\$ -	\$ -	0.00%
Other: Federal	\$ -	\$ -	\$ -	0.00%
Fees	\$ -	\$ -	\$ -	0.00%
<b>TOTAL FUNDING</b>	<b>\$ 423,760.44</b>	<b>\$ -</b>	<b>\$ 9,505,856</b>	<b>4.46%</b>

As of 12/4/23

**Lakeshore Regional Entity  
Substance Use Disorders  
FY24 Healthy MI Plan Treatment Expenditures**

Year To Date Through 10/31/23

CATEGORY	CMHSP HMP YTD Totals	LRE Admin HMP YTD Totals	LRE HMP Budget Totals	LRE % of Budget Spent
<b>Total Expenditures for Treatment Services</b>				
	\$ 596,871.94	\$ -	\$ 17,676,231	3.38%
Women's Specialty Services	\$ 6,648.46	\$ -	\$ -	#DIV/0!
Other Specialty Services	\$ -	\$ -	\$ -	0.00%
Access Management System	\$ 29,257.30	\$ -	\$ -	#DIV/0!
General Administration	\$ 14,823.72	\$ -	\$ -	#DIV/0!
<b>GRAND TOTAL OF SA EXPENDITURES</b>	<b>\$ 647,601.42</b>	<b>\$ -</b>	<b>\$ 17,676,231</b>	<b>3.66%</b>
<b>SOURCE OF FUNDS</b>				
Healthy MI Plan	\$ 647,601.42	\$ -	\$ 17,676,231	3.66%
Other: Local	\$ -	\$ -	\$ -	0.00%
Other: Federal	\$ -	\$ -	\$ -	0.00%
Fees	\$ -	\$ -	\$ -	0.00%
<b>TOTAL FUNDING</b>	<b>\$ 647,601.42</b>	<b>\$ -</b>	<b>\$ 17,676,231</b>	<b>3.66%</b>

As of 12/4/23

Lakeshore Regional Entity  
Oversight Policy Board

ATTACHMENT 3A

**ACTION REQUEST**

**SUBJECT: FY2024 LRE SUD Budget Amendment 1**

- Approval of PA2 Funds
- Advice and Recommendation to LRE Board for Budgets Containing non-PA2 Funds

**MEETING DATE:** December 6, 2023

**PREPARED BY:** Stacia Chick, LRE Chief Financial Officer

**RECOMMENDED MOTION:**

**The Oversight Policy Board:**

- (a) Approves the allocation of PA2 funds for the LRE SUD Budget as summarized below.**
- (b) Advises and recommends that the LRE Board approve the non-PA2 fund budgets for SUD services as summarized below.**

**PROPOSED TO GO TO THE BOARD ON DECEMBER 20, 2023**

**SUMMARY OF REQUEST/INFORMATION:**

- Public Act 500 of 2012 requires each PIHP region to establish an Oversight Policy Board with certain roles and responsibilities relative to substance abuse services.
- The Lakeshore Regional Entity Oversight Policy Board is the Oversight Policy Board for Region 3 PIHP.
- Among other functions, the Oversight Policy Board is responsible to approve budgets which contain local funds and to advise and recommend budgets containing non-local funds to the LRE board for services within the region.

**STAFF:** Stacia Chick, LRE Chief Financial Officer

**DATE:** December 4, 2023

**FY2024 LRE SUD Budget Amendment 1 Summary:**

<u>PREVENTION (direct by LRE)</u>	<u>PA2</u>	<u>Block Grant</u>	<u>SOR</u>	<u>ARPA</u>	<u>COVID-19</u>	<u>Gambling</u>	<u>DFC</u>	<u>Medicaid</u>	<u>Healthy Michigan</u>	<u>Total</u>
<i>Allegan County</i>	\$ 191,925	\$ 133,818	\$ 39,000	\$ 16,660	\$ 70,758	\$ -	\$ -	\$ -	\$ -	\$ 452,161
<i>Kent County</i>	\$ 479,597	\$ 656,135	\$ 65,000	\$ 33,327	\$ 186,700	\$ -	\$ -	\$ -	\$ -	\$ 1,420,759
<i>Lake County</i>	\$ 4,340	\$ 11,225	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 15,565
<i>Oceana County</i>	\$ 27,058	\$ 25,852	\$ -	\$ -	\$ -	\$ -	\$ 117,215	\$ -	\$ -	\$ 170,125
<i>Mason County</i>	\$ 29,304	\$ 35,571	\$ 37,200	\$ 14,766	\$ 25,000	\$ 32,000	\$ -	\$ -	\$ -	\$ 173,841
<i>Muskegon County</i>	\$ 239,424	\$ 187,232	\$ 20,034	\$ 18,338	\$ 55,000	\$ 50,000	\$ -	\$ -	\$ -	\$ 570,028
<i>Ottawa County</i>	\$ 355,588	\$ 286,317	\$ 53,000	\$ 49,528	\$ 24,000	\$ 40,000	\$ -	\$ -	\$ -	\$ 808,433
<i>LRE Regional Projects</i>	\$ -	\$ 73,300	\$ -	\$ 21,700	\$ 80,500	\$ 64,000	\$ -	\$ -	\$ -	\$ 239,500
<i>LRE Staffing</i>	\$ -	\$ 32,630	\$ 41,147	\$ 14,741	\$ 30,550	\$ 35,306	\$ 25,000	\$ -	\$ -	\$ 179,374
<i>Unallocated</i>	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>PREVENTION TOTAL</b>	<b>\$ 1,327,236</b>	<b>\$ 1,442,080</b>	<b>\$ 255,381</b>	<b>\$ 169,060</b>	<b>\$ 472,508</b>	<b>\$ 221,306</b>	<b>\$ 142,215</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 4,029,786</b>
<u>TREATMENT(delegated to CMH members)</u>	<u>PA2</u>	<u>Block Grant</u>	<u>SOR</u>	<u>ARPA</u>	<u>COVID-19</u>	<u>Gambling</u>	<u>DFC</u>	<u>Medicaid</u>	<u>Healthy Michigan</u>	<u>Total</u>
<i>Allegan</i>	\$ -	\$ 488,460	\$ 228,651	\$ -	\$ 171,963	\$ -	\$ -	\$ 685,665	\$ 952,728	\$ 2,527,466
<i>Healthwest</i>	\$ 180,511	\$ 751,523	\$ 1,180,955	\$ 164,900	\$ 70,830	\$ -	\$ -	\$ 1,692,188	\$ 2,191,484	\$ 6,232,391
<i>Network 180</i>	\$ 1,447,774	\$ 2,721,264	\$ 1,139,341	\$ 175,000	\$ 229,006	\$ -	\$ -	\$ 4,222,449	\$ 5,221,872	\$ 15,156,706
<i>Ottawa</i>	\$ 327,723	\$ 824,524	\$ 167,742	\$ 150,000	\$ 220,000	\$ -	\$ -	\$ 1,086,173	\$ 1,711,336	\$ 4,487,497
<i>West Michigan (Lake, Mason Oceana)</i>	\$ 20,000	\$ 411,819	\$ 185,068	\$ -	\$ 65,000	\$ -	\$ -	\$ 552,104	\$ 449,222	\$ 1,683,212
<i>LRE Staffing &amp; Regional Projects</i>	\$ -	\$ 311,418	\$ 281,364	\$ 10,100	\$ 45,513	\$ -	\$ -	\$ 349,514	\$ 521,514	\$ 1,519,423
<i>Unallocated</i>	\$ 445,122	\$ 281,306	\$ 13,056	\$ -	\$ 390,192	\$ -	\$ -	\$ -	\$ -	\$ 1,129,676
<b>TREATMENT TOTAL</b>	<b>\$ 2,421,130</b>	<b>\$ 5,790,314</b>	<b>\$ 3,196,177</b>	<b>\$ 500,000</b>	<b>\$ 1,192,504</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 8,588,092</b>	<b>\$ 11,048,156</b>	<b>\$ 32,736,372</b>
<b>TOTAL PREVENTION &amp; TREATMENT</b>	<b>\$ 3,748,366</b>	<b>\$ 7,232,394</b>	<b>\$ 3,451,558</b>	<b>\$ 669,060</b>	<b>\$ 1,665,012</b>	<b>\$ 221,306</b>	<b>\$ 142,215</b>	<b>\$ 8,588,092</b>	<b>\$ 11,048,156</b>	<b>\$ 36,766,158</b>

## Lakeshore Regional Entity FY 2024 SUD Budget

Prevention	Initial FY24 Allocation	Budget Am 1 FY24 Allocation	Block Grants	SOR	Amer Rescue Plan Act	COVID-19	PA2	Gambling	DFC
<b>Allegan County</b>									
OnPoint (Allegan Co CMH)	381,286	452,161	133,818	39,000	16,660	70,758	191,925	-	-
<b>Total</b>	<b>381,286</b>	<b>452,161</b>	<b>133,818</b>	<b>39,000</b>	<b>16,660</b>	<b>70,758</b>	<b>191,925</b>	<b>-</b>	<b>-</b>
<b>Kent County</b>									
Arbor Circle	166,607	201,695	117,098	-	-	50,000	34,597	-	-
Family Outreach	-	-	-	-	-	-	-	-	-
Kent County Health Department	534,440	556,528	259,861	65,000	16,667	35,000	180,000	-	-
Network 180	400,000	452,088	192,088	-	-	60,000	200,000	-	-
Wedgwood	176,660	210,448	87,088	-	16,660	41,700	65,000	-	-
<b>Total</b>	<b>1,277,707</b>	<b>1,420,759</b>	<b>656,135</b>	<b>65,000</b>	<b>33,327</b>	<b>186,700</b>	<b>479,597</b>	<b>-</b>	<b>-</b>
<b>Lake County</b>									
District Health Department #10	15,565	15,565	11,225	-	-	-	4,340	-	-
<b>Total</b>	<b>15,565</b>	<b>15,565</b>	<b>11,225</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>4,340</b>	<b>-</b>	<b>-</b>
<b>Oceana County</b>									
District Health Department #10	152,910	170,125	25,852	-	-	-	27,058	-	117,215
<b>Total</b>	<b>152,910</b>	<b>170,125</b>	<b>25,852</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>27,058</b>	<b>-</b>	<b>117,215</b>
<b>Mason County</b>									
District Health Department #10	156,268	173,841	35,571	37,200	14,766	25,000	29,304	32,000	-
<b>Total</b>	<b>156,268</b>	<b>173,841</b>	<b>35,571</b>	<b>37,200</b>	<b>14,766</b>	<b>25,000</b>	<b>29,304</b>	<b>32,000</b>	<b>-</b>
<b>Muskegon County</b>									
Arbor Circle (Muskegon Co)	-	-	-	-	-	-	-	-	-
Public Health Muskegon County	439,358	456,108	137,482	20,034	9,168	30,000	209,424	50,000	-
Mercy Health	94,170	113,920	49,750	-	9,170	25,000	30,000	-	-
<b>Total</b>	<b>533,528</b>	<b>570,028</b>	<b>187,232</b>	<b>20,034</b>	<b>18,338</b>	<b>55,000</b>	<b>239,424</b>	<b>50,000</b>	<b>-</b>
<b>Ottawa County</b>									
Arbor Circle (Ottawa Co)	457,296	484,262	187,354	25,000	31,908	-	200,000	40,000	-
CMH of Ottawa County	101,573	115,573	-	-	8,810	24,000	82,763	-	-
Ottawa County Department of Public Health	203,632	208,598	98,963	28,000	8,810	-	72,825	-	-
<b>Total</b>	<b>762,501</b>	<b>808,433</b>	<b>286,317</b>	<b>53,000</b>	<b>49,528</b>	<b>24,000</b>	<b>355,588</b>	<b>40,000</b>	<b>-</b>
<b>LRE Regional Projects (TalkSooner, Trainings, Conference, Tech. Assistance, Family Meals Month)</b>									
	152,700	239,500	73,300	-	21,700	80,500	-	64,000	-
<b>LRE Staffing</b>	<b>189,352</b>	<b>179,374</b>	<b>32,630</b>	<b>41,147</b>	<b>14,741</b>	<b>30,550</b>	<b>-</b>	<b>35,306</b>	<b>25,000</b>
Unallocated	176,139	-	-	-	-	-	-	-	-
<b>Total</b>	<b>518,191</b>	<b>418,874</b>	<b>105,930</b>	<b>41,147</b>	<b>36,441</b>	<b>111,050</b>	<b>-</b>	<b>99,306</b>	<b>25,000</b>
<b>Overall Prevention Total</b>	<b>3,797,956</b>	<b>4,029,786</b>	<b>1,442,080</b>	<b>255,381</b>	<b>169,060</b>	<b>472,508</b>	<b>1,327,236</b>	<b>221,306</b>	<b>142,215</b>

Treatment	Initial FY24 Allocation	Budget Am 1 FY24 Allocation	Block Grants (incl. SDA)	SOR	Amer Rescue Plan Act	COVID-19	PA2	Medicaid	Healthy Michigan
OnPoint (Allegan Co CMH)	2,916,699	2,527,466	488,460	228,651	-	171,963	-	685,665	952,728
Healthwest	7,435,414	6,232,391	751,523	1,180,955	164,900	70,830	180,511	1,692,188	2,191,484
Network 180	18,746,307	15,156,706	2,721,264	1,139,341	175,000	229,006	1,447,774	4,222,449	5,221,872
CMH of Ottawa County	5,193,471	4,487,497	824,524	167,742	150,000	220,000	327,723	1,086,173	1,711,336
West Michigan CMH (Lake, Mason Oceana)	2,590,278	1,683,212	411,819	185,068	-	65,000	20,000	552,104	449,222
LRE Staffing & Regional Projects	1,648,450	1,519,423	311,418	281,364	10,100	45,513	-	349,514	521,514
Unallocated	1,508,873	1,129,676	281,306	13,056	-	390,192	445,122	-	-
<b>Overall Treatment Total</b>	<b>40,039,492</b>	<b>32,736,372</b>	<b>5,790,314</b>	<b>3,196,177</b>	<b>500,000</b>	<b>1,192,504</b>	<b>2,421,130</b>	<b>8,588,092</b>	<b>11,048,156</b>
<b>SUD Total Prevention + Treatment:</b>	<b>43,837,448</b>	<b>36,766,158</b>	<b>7,232,394</b>	<b>3,451,558</b>	<b>669,060</b>	<b>1,665,012</b>	<b>3,748,366</b>	<b>8,809,398</b>	<b>11,190,371</b>

August 1, 2023

William Ward, Executive Director  
Network180  
790 Fuller Avenue  
Grand Rapids, MI 49503

Mr. Ward,

Lakeshore Regional Entity is in receipt of N180's request for unused PA2 Funds for FY2023 and FY2024. We are carefully considering this request and will endeavor to complete our review prior to presenting a recommendation to the Oversight Policy Board during the September 6, 2023 meeting.

The rationale for this request and the programs seem sound. However, the programs for which the PA2 funds are intended might possibly be funded through other sources such as specialty grants. There may be unused funds in the region from other sources that could be applied to these programs prior to accessing unused PA2 funds.

We respectfully request the following information be supplied in writing for both FY23 and FY24:


1. A complete budget and budget narrative for each FY.
2. A justification for why the additional funds are needed for each FY.
3. A description of the programs/services and applicable service codes for which the funds are intended.
4. A sustainability plan to ensure programs for which these funds are intended will continue beyond the end of FY2023.
5. A list of other sources of funding (Block Grant, Specialty Grant, Medicaid, other) that have been considered and why these sources were not used.

We look forward to your response.

Sincerely,



Mary Marlatt Dumas  
Chief Executive Officer



Stephanie VanDerKooi  
Chief Operating Officer

cc: Patrick Sweeney, LRE OPB Chair

July 24, 2023

LRE Oversight Policy Board Patrick Sweeney, Oversight Policy Board Chair  
Lakeshore Regional Entity  
5000 Hakes Dr. 250  
Norton Shores, MI 49441

Network180 is requesting the use of unused PA2 dollars to pay for Kent County Substance Use Disorder treatment programs. Network180 is requesting \$1.4 million for FY2023 and \$2 million for FY 2024 to pay for the community outreach programs Recovery Management and Family Engagement. Currently, Network180 has significant funding constraints for Medicaid and Health Michigan. Kent County has decided that it will use PA2 dollars, allocated to Kent County, to pay for the above programs in lieu of program cuts. Network180 is attempting to maximize all funding sources to address significant revenue issues that Network180 and the LRE region are currently experiencing.

**Program information**

Program Descriptions:

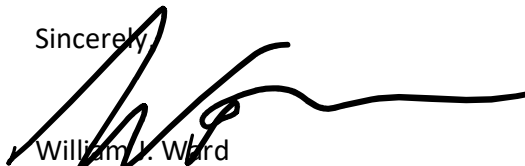
Recovery Management provides community based services to individuals who have complex and often co-occurring substance use and mental health needs. This service is focused on consumer engagement and motivation and assisting consumers to navigate the treatment system and move toward recovery. Network180 self runs one team and contracts with Arbor Circle, Family Outreach, Pine Rest, and Cherry Health to provide 6 teams in total. Teams are comprised of an MSW Clinician and a Peer Recovery Coach.

Family Engagement Program provides community based comprehensive, family-focused, clinical services and case management in the home and other community-based settings for adults (usually women) with school-aged children. The program intent is to provide substance use disorder treatment to the mother with the goal of keeping the family together. FET is designed to address the practical issues of child care, transportation, relationships, housing and/or other situations that can otherwise lead to insurmountable treatment barriers and pose risks to a client's ability to parent his/her children. Network180 currently contracts with Arbor Circle, Cherry Health, and the Family Outreach Center for a total of five teams. A Family Engagement team consists of a MSW Clinician, a Case Manager, and a Peer Recovery Coach.

These programs, over the years, have provided valuable care to Kent County residents and have kept families together and provided care for complex individuals that other treatment programs refused to serve.

If you have any questions please contact me at [william.ward@network180.org](mailto:william.ward@network180.org)

Sincerely,



William J. Ward  
Executive Director Network180

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**From:** Bill Ward <william.ward@network180.org>  
**Sent:** Wednesday, November 29, 2023 10:34 AM  
**To:** andysebolt@yahoo.com; Patrick E. Sweeney <psweeney@rhoadesmckee.com>  
**Cc:** Mary Marlatt-Dumas <marymd@lsre.org>; Stephanie VanDerKooi <stephaniev@lsre.org>; Stan Stek <stanstek@gmail.com>  
**Subject:** RE: Questions Regarding Network180 PA2 Request

**ALERT:** This email was received from a source outside of LRE. Please consider the risks before clicking any links or opening attachments.

Resending I had the wrong email address for Andy.

---

**From:** Bill Ward  
**Sent:** Wednesday, November 29, 2023 9:58 AM  
**To:** [andysebott@yahoo.com](mailto:andysebott@yahoo.com); Patrick E. Sweeney <[psweeney@rhoadesmckee.com](mailto:psweeney@rhoadesmckee.com)>  
**Cc:** Mary Marlatt-Dumas <[marymd@lsre.org](mailto:marymd@lsre.org)>; Stephanie VanDerKooi <[stephaniev@lsre.org](mailto:stephaniev@lsre.org)>; Stan Stek <[stanstek@gmail.com](mailto:stanstek@gmail.com)>  
**Subject:** Questions Regarding Network180 PA2 Request

I understand that the Substance Use Disorder Oversight Board has some questions regarding the motion passed at your last meeting. While I cannot claim authorship over the motion I can clarify Network180's intent with respect to the request.

First, due to a multitude of factors at the conclusion of the fiscal year, Network180 is facing a multimillion-dollar deficit. Network180 saw a drop in revenue, higher than expected utilization, and under projections of Medicaid and Healthy Michigan at the regional level. This caused Network180 to have to rethink its year end closing procedures to minimize its deficit. It was soon discovered that already incurred costs for Family Engagement Team and Recovery Management could be reclassified as Public Act 2 Funds rather than utilizing Medicaid or Healthy Michigan Funds. By doing this reclassification the Lakeshore Regional Entity would lessen its risk by \$1.4 million which normally have to be borne by the Internal Service Fund or its Medicaid Savings. Again, I am not sure who wrote the below motion but hopefully I can explain why the motion has all been satisfied and therefore Kent County Taxpayers dollars can be distributed to Network180. Here is the motion as passed:

LRE Oversight Policy Board approves the transfer of up to \$1.4 million in reserve PA2 funds to Kent County for the purpose of funding two programs (Family Engagement Team and Recovery Management) at Network180 for FY2023 expenditures. This approval is contingent upon N180



exhausting all other available funding options (e.g. Women's Specialty Grants, COVID-19 Funds, ARPA Funds, PBIP funds) prior to applying any reserve PA2 funds. N180 must provide the final amount needed for this transfer after applying all available funds no later than September 15, 2023.

The use of other funds upon which the transfer is contingent references three federal fund sources: Women's Specialty Grants, Covid-19 and ARPA funds. These federal funds are ineligible for use for this purpose, making those references and contingencies irrelevant. If Network180 were to apply any of those referenced funds, it would constitute "Federal Supplanting." Network180 communicated this problem to both the CFO and COO at the LRE several weeks ago. To the extent the Board or LRE leadership disagree, here is the issue in a nutshell. "Federal supplanting" occurs when a state or local unit of government reduces available state or local funds for an activity specifically because federal funds are or are expected to be available. Here, the LRE has local funds (specifically Kent County PA2 dollars) which are available to support the network180 Family Engagement Team and Recovery Management costs but is withholding those funds on the condition that Network180 first use federal funds that may be allocated to that purpose. "Federal supplanting" is a serious matter and can constitute grounds for debarment from participation in any Federal program. I understand the nuances of Federal rules are very technical but as a former Chief Compliance Officer who had to testify in front of the US Congress's General Accounting Office in Washington to justify expenditures under the American Recovery and Reinvestment Act, I can assure the SUD Board that the federal government takes federal supplanting very seriously. We believe the condition imposed by the Motion's required use of federal funds is problematic, and that it would be unlawful for Network180 to apply federal funds in the manner required by the Motion.

As it relates to the Performance Based Incentive Payment (PBIP), those funds had already been committed to another program prior to the Motion of the SUD Oversight Board. In late summer 2023 Network180 was awarded Certified Community Behavioral Health Clinic status by the Michigan Department Health and Human Services (MDHHS). As the Pre-Paid Inpatient Health Plan, the LRE is a full risk contract with MDHHS up until September 30, 2023. As of October 1, 2023, Network180 became a CCBHC and therefore is now the at-risk entity for the 9 core CCBHC services. As the Board can presumably appreciate after the funding problems at the LRE in 2018 and 2019, the inability to cover unanticipated costs can snowball quickly. The LRE began existence with a risk reserve funded by its member CMHs. Since the creation of the LRE and prior to October 1 of this year, Network180 has been unable to retain savings from its operations, being required to remit all such surpluses back to the LRE. To create a reserve to protect against the financial risks it has now assumed (and that are no longer assumed by the LRE), its only option was to pledge its PBIP to the CCBHC, making those funds unavailable (and therefore "exhausted") to cover the prior year's unfunded cost for Family Engagement or Recovery Management.

It is my hope that this explanation satisfies the SUD Board that the conditions in its motion that can lawfully be met have been met, and that the LRE may and should implement the motion by transferring the authorized funds. If further questions are required, please feel free to reply to this email. I am happy to attend the SUD advisory board meeting next week if further clarifications are needed.

William J. Ward  
Executive Director  
Network 180 Kent County's Community Mental Health Authority  
82 Ionia Ave NW  
Grand Rapids, MI 49503  
313-399-0313

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[network180 - Lives Redirected](#)

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# Opioid Settlement Funds: State & Local Perspectives

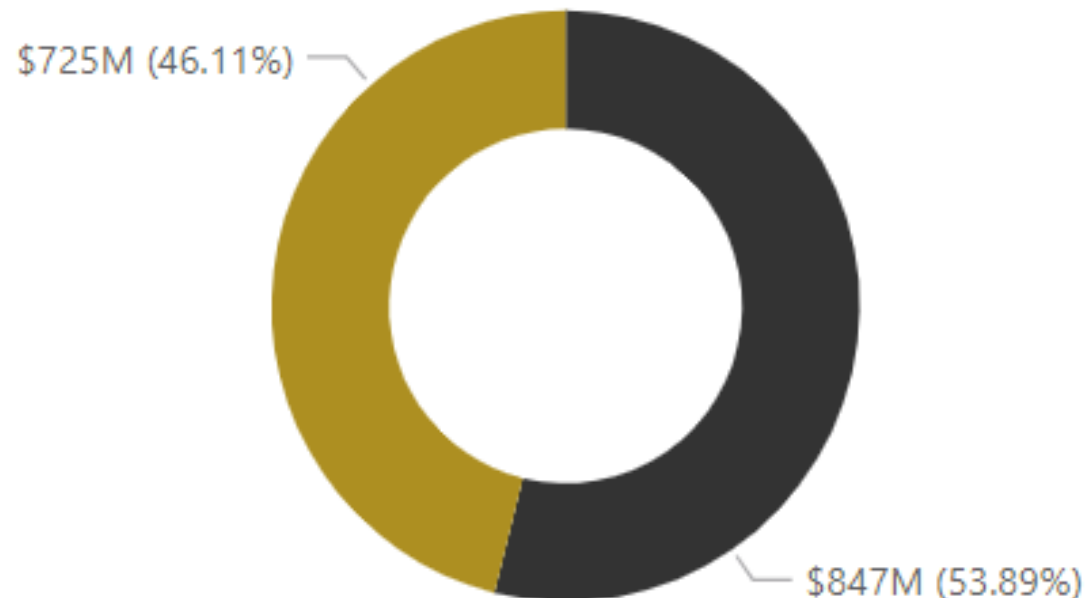
Katie Abraham, Policy Advisor,  
Michigan Opioids Strategy – Michigan  
Department of Health and Human  
Services

Amy Dolinky, Technical Advisor, Opioid  
Settlement Funds – Michigan  
Association of Counties



# Opioid Settlements Overview

- Total estimated funds coming to Michigan - **\$1,572,482,366**
  - Total estimated state share - **\$847,440,366**
  - Total estimated subdivision share - **\$725,042,000**
  - Estimated totals from settlements with:
    - Distributors (McKesson, Cardinal Health, and AmerisourceBergen)
    - J&J
    - Walgreens
    - Walmart
    - CVS
    - Teva
    - Allergan
    - McKinsey & Co.
    - Mallinckrodt
    - Meijer



# J&J and Distributors Settlements

- The state of Michigan is slated to receive nearly \$776 million over 18 years from two settlements, Distributors (McKesson, Cardinal Health and AmerisourceBergen) and J&J
- 50% of the settlement amount will be sent directly to county and local governments
- Allocation percentages can be found in Exhibit A of the [Michigan State-Subdivision Agreement for Allocation of Distributor Settlement Agreement and Janssen Settlement Agreement](#)
- Distribution to subdivisions began on January 31, 2023
- Tribal settlements are separate

# Pharmacy and Manufacturer Settlements

- Expected to bring in around \$735 million to Michigan
- Sign-on for settlements with CVS, Walmart, Allergan and Teva are complete
- Local subdivision sign-on for Walgreens closed September 20, 2023
- 50% of the settlement amount will be sent directly to county and local governments
- Distribution has not started
- Tribal settlements are separate
  
- Meijer is a separate, non-national, settlement for which 4 counties, 3 cities, and 6 townships received funds during the summer of 2023

# Settlement Requirements

- **Specific to J&J, Distributors, CVS, Teva, Allergan, Walgreens, and Walmart**
- Spend in alignment with Exhibit E and the definition of opioid remediation
- Report biannually in payment portal
  - Report only expenditures that do not align with Exhibit E and/or the definition of opioid remediation
- 85% of funds must be used for opioid remediation, with 70% used for future opioid remediation,
- Exhibit E provides a non-exhaustive list of allowable uses of funds. Qualifying expenditures may include reasonable related administrative expenses.

# Opioid Remediation - Definition

- Care, treatment, and other programs and expenditures (including reimbursement for past such programs or expenditures except where this Agreement restricts the use of funds solely to future Opioid Remediation) designed to
  - **(1)** address the misuse and abuse of opioid products,
  - **(2)** treat or mitigate opioid use or related disorders, or
  - **(3)** mitigate other alleged effects of, including on those injured as a result of, the opioid epidemic.



# Additional Settlements

- Settlements pursuing bankruptcy plans
  - Mallinckrodt is expected to bring in \$37 million to Michigan
    - First payments made in May 2023
    - Potential to not receive all funds
    - 30% to state/non-regional use
    - 70% to regional use
      - 5 counties with direct distribution of funds
      - Remaining funds allocated based on recommendations from Opioids Task Force
  - Expected to take place in the future
    - Purdue Pharma
    - Endo
    - Kroger
- \*Distribution process, requirements on spending and reporting are will differ from other settlements

# Allowable Uses & Reporting Requirements

- Allowable uses in the Mallinckrodt settlement are outlined in [Schedule A](#)
- Reporting requirements available at: [National Opioid Abatement Trust II Trust Distribution Procedure](#)
- Qualifying Block Grantees:
  - “At least annually, each Qualifying Block Grantee which has elected to take a Local Government Block Grant shall publish on its lead agency’s or Local Government’s website, and deliver to NOAT II, a report detailing for the preceding time period, respectively (i) the amount of Local Government Block Grants received, (ii) the allocation of awards approved (indicating the recipient, the amount of the grant, the program to be funded and disbursement terms), and (iii) the amounts disbursed on approved allocations. Such annual reports for NOAT II may be combined with any reports submitted by a Qualifying Block Grantee as required in the National Opioid Abatement Trust Distribution Procedures, to the extent set forth in guidance to be provided by the NOAT II Trustees.”
- “As applicable, each State or Local Government shall impose reporting requirements on each recipient to ensure that NOAT II Funds are only being used for Approved Uses, in accordance with the terms of the allocation.”
- Anticipate annual voluntary survey from MAC on all spending

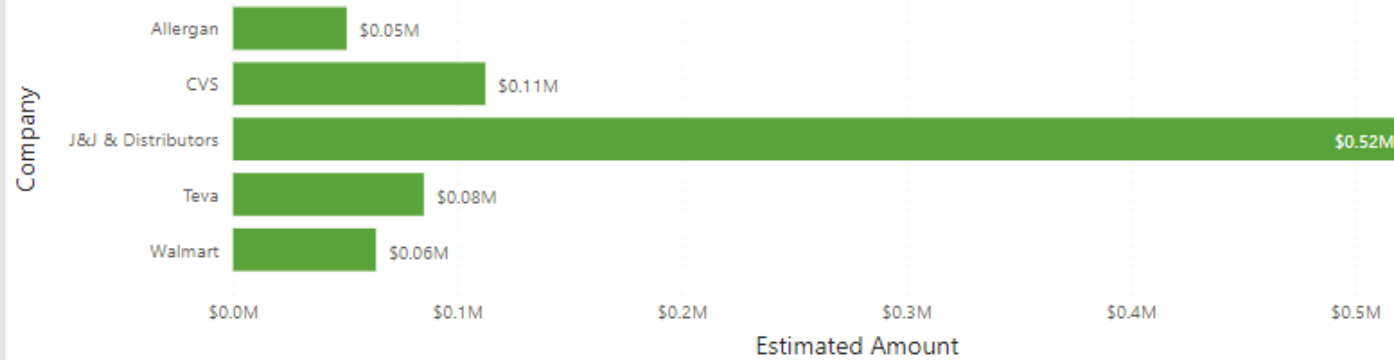
# MAC Settlement Dashboard

## MAC Opioid Settlement: Home Page

Funds provided are estimates and are subject to change

- Funds**
- Technical Assistance
- Engagement
- Planning
- Management
- Strategies

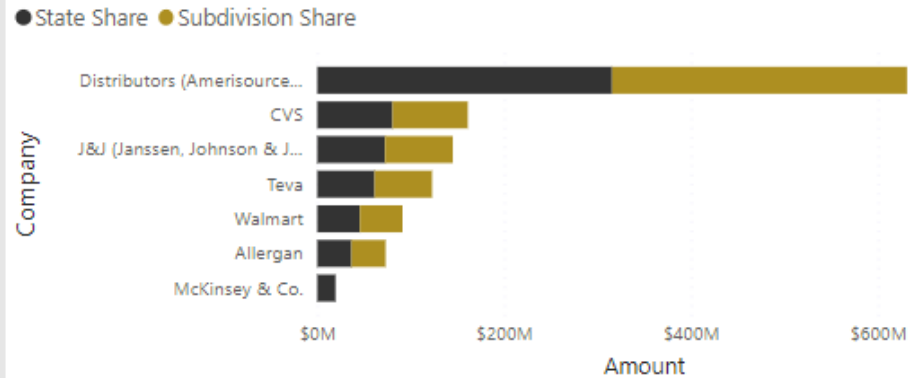
### Settlement Funds by Company for Michigan Counties



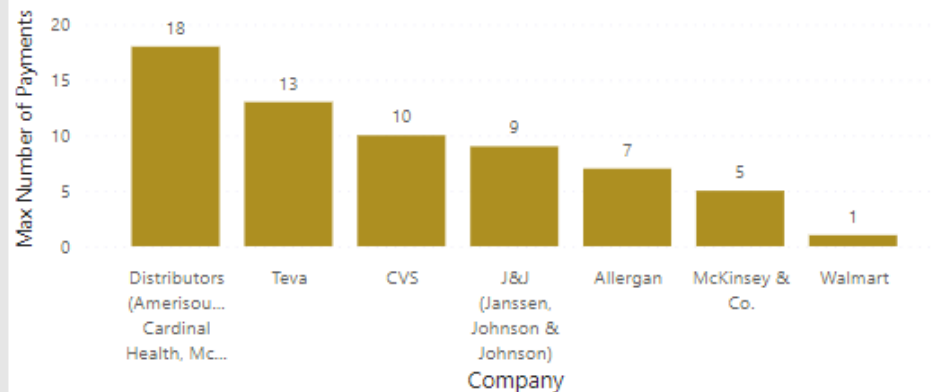
County

Company	Estimated Amount
Walmart	\$63,653.5
Teva	\$84,977.45
J&J & Distributors	\$523,236
CVS	\$112,405.51
Allergan	\$50,625.52
<b>Total</b>	<b>\$834,897.98</b>

### Michigan Opioid Settlements Overview (hover over bars for more information)



### Maximum Number of Payments by Company (payment amounts will differ and may not be received annually)



# Allowable Uses of Funds

# Exhibit E Overview – Core Strategies

- Settlements outline specific strategies for utilization of funds, including:
  - Core Strategies:
    - Naloxone or other FDA-approved drug to reverse opioid overdoses
    - Medication-assisted Treatment (MAT) distribution and other opioid-related treatment
    - Address needs of pregnant and postpartum women
    - Expanding treatment for Neonatal Abstinence Syndrome (NAS)
    - Expansion of warm hand-off programs and recovery services
    - Treatment for incarcerated population
    - Prevention programs
    - Expanding syringe service programs
    - Evidence-based data collection and research analyzing the effectiveness of the abatement strategies within the state

# Exhibit E Overview – Approved Uses

- Approved Uses – Treatment:
  - Treat Opioid Use Disorder (OUD)
  - Support people in treatment and recovery
  - Connect people who need help to the help they need (connections to care)
  - Address the needs of criminal justice-involved persons
  - Address the needs of pregnant or parenting women and their families, including babies with NAS

# Exhibit E Overview – Approved Uses

- Approved Uses – Prevention:
  - Prevent over-prescribing and ensure appropriate prescribing and dispensing of opioids
  - Prevent misuse of opioids
  - Prevent overdose deaths and other harms (harm reduction)

# Exhibit E Overview – Approved Uses

- Approved Uses – Other Strategies:
  - Support first responders
  - Leadership, planning and coordination
  - Training
  - Research



# Spending Principles

# Spending Principles – Johns Hopkins

- Spend money to save lives
- Use evidence to guide spending
- Invest in youth prevention
- Focus on racial equity
- Develop a fair and transparent process for deciding where to spend the funding

# Strategies for adopting the **Spending Principles**

## **Principle 1: Spend money to save lives**

- Establish a dedicated fund
- Supplement rather than supplant existing funding
- Don't spend all the money at once
- Report to the public on where the money is going

## **Principle 2: Use evidence to guide spending**

- Direct funds to programs supported by evidence
- Remove policies that may block adoption of programs that work
- Build data collection capacity

## **Principle 3: Invest in youth prevention**

- Direct funds to evidence-based interventions

## **Principle 4: Focus on racial equity**

- Invest in communities affected by discriminatory policies
- Support diversion from arrest and incarceration
- Fund anti-stigma campaigns
- Involve community members in solutions

## **Principle 5: Develop a fair and transparent process for deciding where to spend the funding**

- Determine areas of need
- Receive input from groups that touch different parts of the epidemic to develop a plan
- Ensure that there is representation that reflects the diversity of affected communities when allocating funds

# Local Perspective

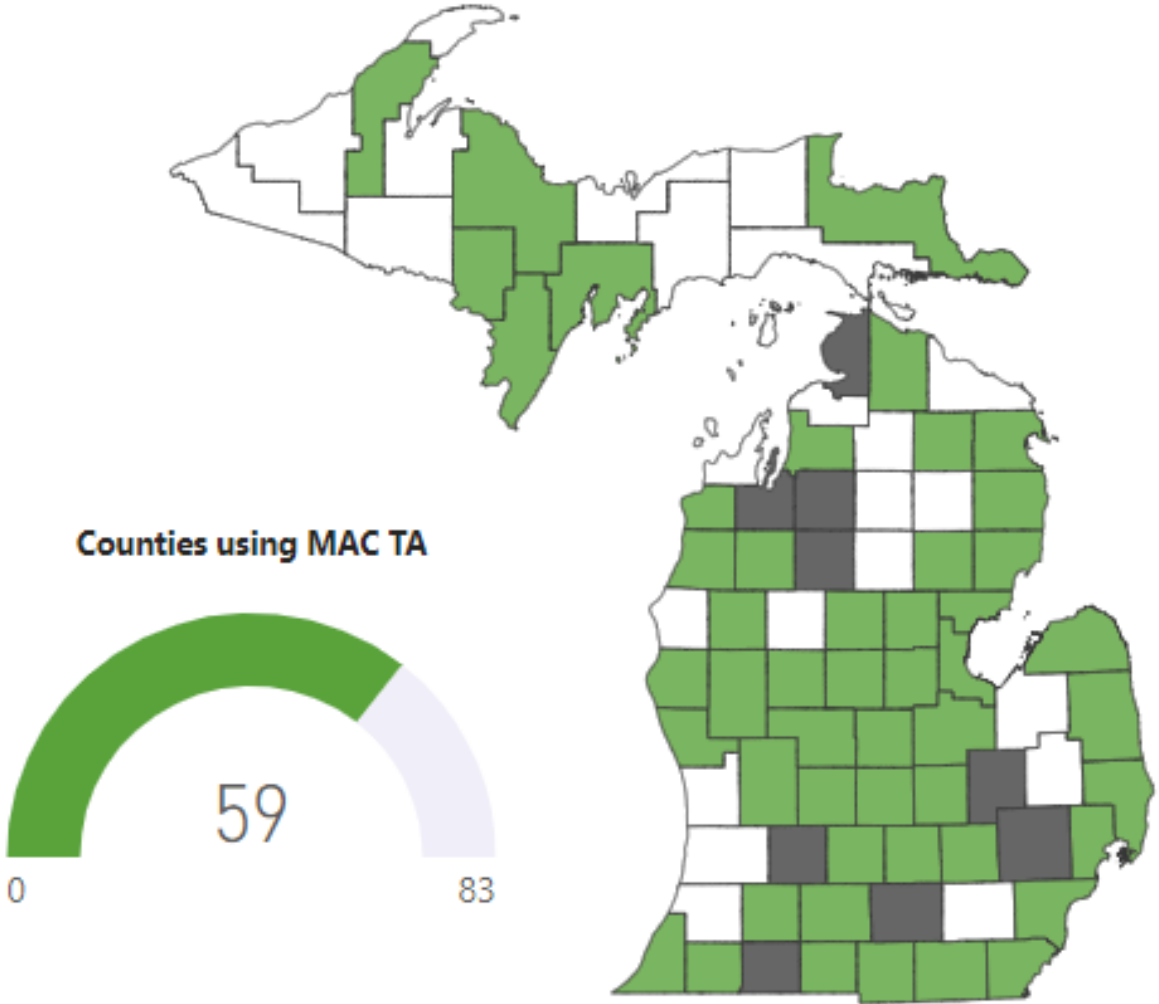
# Supports through MAC

- General Settlement Questions and Settlement Landscape Assistance
- Strategic Planning
- Advising on Allowable Uses
- Spending Plan Development and Review
- Request for Proposals Development and Scoring
- Policy Analysis
- Resource Linkage
- Resource Library
- Reporting and Evaluation
- Story Sharing, Peer to Peer Learning
- [Support Request Form](#)

# MAC Engagement

## Map of MAC Technical Assistance Engagement

Engagement type ● Engaged ● Information Request None



# Michigan Opioid Settlement Fund Toolkit: A Guide for Local Spending

- **Purpose** - The toolkit begins with the purpose of the document, highlighting the intention to assist with planning for, and utilization of, opioid settlement funds.
- **Settlements overview** - The next section provides an overview of the opioid settlements, including information on the state and local agreement, estimated funds per county, future funds and tribal settlements.
- **Statistical overview and local data** - The toolkit describes the scope of the overdose crisis, providing state-level data and where to access local data.
- **Spending principles** – This section provides an overview of the spending principles laid out by Johns Hopkins Bloomberg School of Public Health and FXB Center for Health and Human Rights, as well as indicators for spending readiness from Johns Hopkins.

# Michigan Opioid Settlement Fund Toolkit: A Guide for Local Spending

- **Steps for spending** – This section is the core component of the toolkit and provides a framework for where jurisdictions can begin their process and general steps to follow, including stakeholder engagement, gathering information, determining the process moving forward and monitoring and accountability.
- **Strategies for spending** - In the strategies for spending section, information is outlined providing key strategies from the State of Michigan, Exhibit E of the current settlements and Johns Hopkins.



# Recommended Steps: Stakeholder Engagement

- Utilize existing community resources to ensure that those with expertise are represented when planning for spending (health departments, prevention coalitions, harm reduction providers, behavioral health provider agencies, recovery support providers, etc.)
- Consider additional collaborators, such as surrounding counties and regional entities
- Ensure an equity lens, consider who is not at the table
- Ensure those with lived experience with substance use disorder and people who use drugs are engaged in the process

# Recommended Steps: Gather Information

- Review needs assessments, landscape analyses, gap inventories, reports, plans and other information from stakeholders
- Identify if additional information on community priorities needs to be gathered
- Determine the specific needs of your community, consider new and existing programming
- Utilize the [MAC Opioid Settlement Resource Center Resource Library](#) to explore principles and tracking, evidence-based and promising practices, statewide tools, local government tools, legal resources, equity resources,
  - other toolkits and reports and additional opportunities
  - for funding

# Recommended Steps: Determine Process Moving Forward

- Identify where to start (multi-sector strategic planning, strategy selection, spending plan development, etc.)
- Determine where capacity to support spending is present and sustainability of funding and strategies
- Choose strategies that are allowable and align with the needs of your community and take into account sustainability due to polysubstance use and the changing overdose environment
- Ensure equity and lived experience are at the core of
- planning and design

# Recommended Steps: Reporting & Evaluation

- There are no comprehensive reporting requirements for the Distributors and J&J settlements. While additional reporting is not required, it is essential to provide transparency and accountability for the spending process.
- It is recommended that local governments create annual financial and impact reports. These reports may include the amount of funds spent, strategies and programs funded, impact of programs funded, process of strategy selection and dollar amount determinations, and other relevant information.
- Evaluation of the outcomes and effectiveness of funding and programming should also be considered

# State Perspective

# MDHHS 2021-2022 Opioid Settlement Prioritization Survey



In 2021, MDHHS contracted with Center for Health and Research Transformation (CHRT) to analyze results from a survey of key Michigan respondents about the best ways to use opioid settlement dollars within state and federal guidelines. This information helped provide insight for Spend Plan decision making.



- Survey questions and response options based on federal settlement funding strategies and the State's Opioid Strategy strategic pillars
- Offered in English, Spanish and Arabic
- 1,040 respondents with representation from 78 of 83 counties

# MDHHS 2021-2022 Opioid Settlement Prioritization Survey Findings: Summary

- ✓ Survey's purpose was to gather data to understand priorities for settlement funding among respondents across Michigan, including individuals with lived experience, to inform strategies to be conducted with funding.
- ✓ There were limitations within the respondent pool.
  - ✓ Feedback provided by 1,040 respondents between October 2021 and January 2022
  - ✓ Survey utilized snowball sampling method; 45 organizations received the survey and were asked to share with their networks
  - ✓ Most respondents were affiliated with an organization; 39% identified as being part of the mental health, substance use, or harm reduction workforce
  - ✓ Only 11% of respondents identified as being racial minorities
  - ✓ Not all regions were represented proportionately (i.e. limited responses from Wayne County PIHP region)
- ✓ **Recovery Support Services, Prevention Programming, and Expanding Access to MOUD** emerged as the top 3 priorities of respondents.

# MDHHS 2021-2022 Opioid Settlement Prioritization Survey Findings

Priorities for opioid settlement funding	% ranked #1 priority
<b>Recovery support services</b> , including peer support and wrap-around services for individuals with Substance Use Disorder (SUD) and co-occurring mental health diagnoses	36%
<b>Prevention programming</b>	19%
<b>Expanding access to Medications to treat Opioid Use Disorder (MOUD)</b> and other opioid-related treatment	16%
<b>Support for pregnant &amp; post-partum women</b> affected by substance use, and infants with Neonatal Abstinence Syndrome (NAS)	9%
<b>Naloxone distribution and training</b>	7%
<b>Treatment for incarcerated population</b>	6%
<b>Syringe Service Programs (SSP)</b>	4%
<b>Research and evaluation of abatement strategies</b>	3%

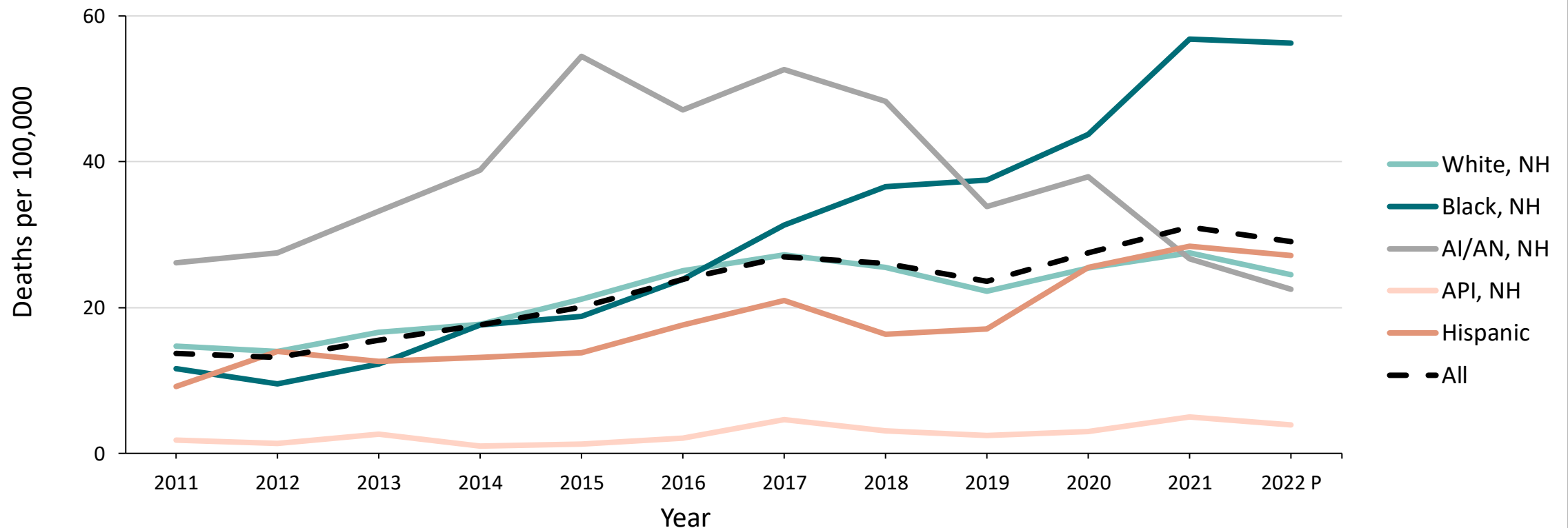
Source: [Opioid settlement prioritization survey results 2021-22 - CHRT](#)



# Other Identified Needs: Racial Equity and Harm Reduction

Overdoses amongst Michigan's Non-Hispanic Black population continue to rise, indicating that there is much still to be done to reduce overdoses amongst all Michiganders and narrow the widening gap of racial health disparities and inequities.

Figure 1. Drug Overdose Death Rate by Race and Ethnicity per 100,000 Michigan Residents, 2011- Preliminary 2022



Source: 2011-2021 Mortality: Finalized Michigan Resident Death files, Office of Vital Records and Health Statistics, MDHHS.

2022 P: Provisional Michigan Resident Death files, Office of Vital Records and Health Statistics, MDHHS, provided for the MiVDRS and SUDORS projects.

# Opioid Advisory Commission and the Michigan Opioids Task Force

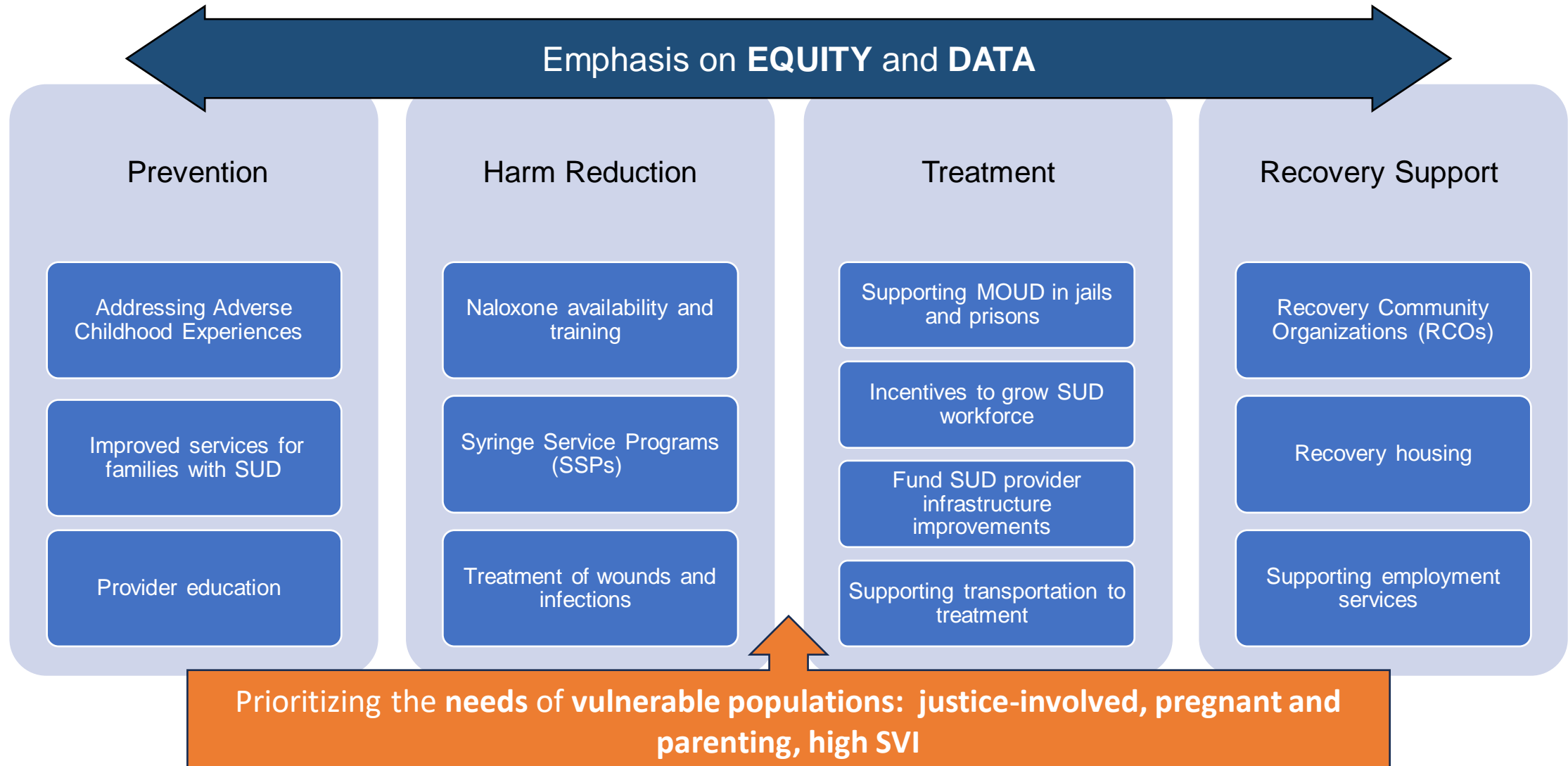
## Opioid Advisory Commission (Legislative)

- ✓ Created by PA 84 of 2022 (MCL 4.1851) and charged with establishing priorities to address substance use disorders and co-occurring mental health conditions, for the purpose of **recommending funding initiatives to the legislature.**
- ✓ **Reports to legislative leadership**
- ✓ Tasked with conducting **statewide needs assessment**; developing **goals and recommendations to reduce disparities in access** to behavioral health services; **assessing use of opioid settlement funds and impact** on abating the opioid epidemic in Michigan
- ✓ **Consists of 12 voting members** with experience in prevention, health care, mental health, law enforcement, local government, first responder work, or similar fields. The Director of MDHHS and the Legislative Council Administrator serve as ex-officio members.
- ✓ **Required to submit annual report to legislative leadership, chairs of House and Senate Appropriations Committees, the Governor, and the Attorney General**

## Michigan Opioids Task Force (Executive)

- ✓ Created by Executive Order 2019-18, then updated under Executive Order 2022-12 to optimize its work and allow the group to efficiently receive and distribute resources
- ✓ **Charged with identifying root causes of the opioid epidemic and implementing response actions**
- ✓ **Reports to MDHHS**
- ✓ **Current membership appointed in June 2023**, with membership consisting of reps from local governments with SUD experience, reps from State Departments, and a rep from the Michigan Supreme Court; CME to serve as Chair
- ✓ Will be required to **report to Governor regularly** and expected to **issue an annual report**

# Opioid Response Framework



# Opioid Settlement Spend Plan Development

MDHHS program area leads met to draft consensus spend plan based on Opioids Strategy and partner feedback



April – May  
2022

June  
2022

Legislature approved funding



July  
2022

December  
2022

First payment received by State of Michigan from Janssen, and program implementation begins



January  
2023

Deputy Directors met to discuss and approve consensus spend plan



First payment received by State of Michigan from the Distributors



# Opioid Settlement FY23 Spend Plan Initiatives (\$39 million)

## Prevention

**FY23: \$4.5 million**

- Adverse Childhood Experiences (ACEs) initiatives.
- Awareness campaigns.
- Quick Response Teams.

## Treatment

**FY23: \$9.1 million**

- Staffing incentives.
- Infrastructure grants.
- Expanding capacity to treat stimulant and polysubstance use.

## Recovery

**FY23: \$7.6 million**

- Recovery Community Organization grants.
- Recovery housing.
- Additional recovery supports.

## Harm Reduction

**FY23: \$8.5 million**

- Naloxone Portal.
- Syringe Service Programs Operations.

## Other Initiatives

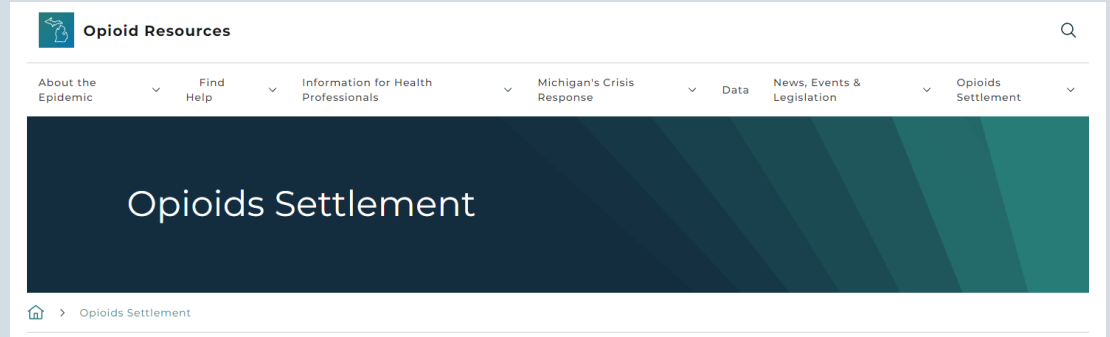
**FY23: \$9.3 million**

- Medications for opioid use disorder in prisons and jails.
- Overdose surveillance system improvements, maintenance, and rapid toxicology from medical examiners.
- High Touch High-Tech screening expansion for pregnant individuals.
- Rooming-In for infants born with Neonatal Abstinence Syndrome (NAS).
- Technical assistance to local governments on best practices.
- Projects related to opioids task force Racial Equity Workgroup.

# Opioid Settlement Website



Goal launch date: Fall 2023



## Website content will include:

- Overview and status of settlements
- Resources to support implementation of local opioid abatement strategies
- Allowable uses for funds and resources to aid in creation of strategies and spend plans
- A request form for accessing no-cost technical assistance for local governments
- A detailed description of state opioid abatement investments
- Program monitoring and evaluation dashboard for state initiatives
- Information on equity specific investments and equity considerations in all investments
- Contact information, including a link to a settlement-specific inbox at: [MDHHS-opioidsettlementhelp@michigan.gov](mailto:MDHHS-opioidsettlementhelp@michigan.gov)

**[www.michigan.gov/opioids/opioidsettlement](http://www.michigan.gov/opioids/opioidsettlement)**

# The Michigan Technical Assistance Collaborative

- ✓ In 2023, MDHHS contracted 3 universities to assist in providing technical assistance to local governments as they plan for investing Opioid Settlement funds
- ✓ Michigan State University, Wayne State University, and the University of Michigan will provide individualized technical assistance to priority counties
- ✓ Universities will also host learning series, and provide other resources, that will be made available to all local governments



WAYNE STATE  
UNIVERSITY



MICHIGAN STATE  
UNIVERSITY



OPIOID RESEARCH INSTITUTE  
UNIVERSITY OF MICHIGAN

# Resources



# Resources

- [MAC Opioid Settlement Resource Center](#)
  - [MAC Opioid Settlement Resource Center Resource Library](#)
  - Templates for local government use
  - [Michigan Opioid Settlement Funds: A Guide for Local Spending](#)
- [Opioid Advisory Commission](#)
  - [Annual Report](#)
- [Michigan Department of Health and Human Services \(MDHHS\)](#)
  - [2023 Opioid Settlement Spend Plan](#)
- [Michigan Department of Attorney General – Opioids](#)
- [National Association of Counties \(NACo\) Opioid Solutions Center](#)

Questions

# Contact

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Michigan Department of Health  
and Human Services Opioid  
Resources

<https://www.michigan.gov/opioids>

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847.309.4340

Michigan Association of  
Counties Opioid Settlement  
Resource Center

[https://micounties.org/opioid-  
settlement-resource-center/](https://micounties.org/opioid-settlement-resource-center/)

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**2024 Oversight Policy Board Meeting Schedule**

4:00 – 6:00 PM

**March 6, 2024**

**June 5, 2024**

**September 4, 2024**

**December 4, 2024**



# Lakeshore Regional Entity's Legislative Update – 11/7/2023



This document contains a summary and status of bills in the House and Senate, and other political and noteworthy happenings that pertain to both mental and behavioral health, and substance use disorder in Michigan and the United States.

Prepared by Melanie Misiuk, SEDW & 1915(i)SPA Specialist & Stephanie VanDerKooi, Chief Operating Officer

Highlight = new updates

Highlight = old bill, no longer active

Highlight = Suggestions for Action & Supported/ Opposed by CMHAM (Community Mental Health Association of Michigan)

**ATTACHMENT 7**

## STATE LEGISLATION

BILLS & REGULATIONS PERTAINING TO MENTAL HEALTH				
Priority	BILL #	SUMMARY	SPONSOR	ACTION DATE
	SB 27	Legislation that would require insurers to provide coverage for mental health and substance abuse disorder services on the same level as that of coverage for physical illness. Federal law requires mental health coverage to be equal to physical illness. The bill would require insurance coverage for mental health conditions, including substance use disorders, to be no more restrictive than insurance coverage for other medical conditions.  <b>*Supported by CMHAM</b>	Sarah Anthony	1/18/23 – Introduced to the Senate; Referred to Committee on Health Policy 10/12/23 – Reported favorably with substitute; Referred to committee oof the whole with substitute <b>10/18/23 – Passed the Senate, Referred to House Committee on Insurance and Financial Services</b>
<b>***</b>	HB 4576 & 4577	Reintroduced versions of Sen. Shirkey's legislation (SB 597 & 598) from 2022. Legislation to create an integrated plan to merge the administration and provision of Medicaid physical health care services and behavioral health specialty services.  <b>*Opposed by CMHAM</b>	Curtis VanderWall	5/16/23 – Introduced, read, and referred to Committee on Health Policy
	HB 4320 & 4387	Provides for penalties for coercing a vulnerable adult into providing sexually explicit visual material; and provides sentencing guidelines for crime of coercing vulnerable adult into providing sexually explicit visual material	Sharon MacDonell	3/22/23 – Introduced; referred to Committee on Families, Children and Seniors 6/27/23 – Referred to a second reading 10/5/23 – Read a second time; substitute adopted; placed on third reading <b>10/17/23 – Referred to Committee on Civil Rights, Judiciary, and Public Safety</b> <b>11/7/23 – Reported favorably without amendment; Referred to Committee of the Whole</b>

## BILLS & REGULATIONS PERTAINING TO MENTAL HEALTH

Priority	BILL #	SUMMARY	SPONSOR	ACTION DATE
	HB 4081	Establishes a minimum number of school counselors to be employed by a school district, intermediate school district or public school academy	Felicia Brabec	2/14/23 – Introduced; referred to Committee on Health Policy
	HB 4495 & 4496	Provides general changes to the medical assistance program	Will Snyder Graham Filler	5/2/23 – Introduced; referred to Committee on Health Policy 6/13/23 – Passed House 6/27/23 – Passed Senate 7/10/23 – Presented to Governor 7/19/23 – Approved by the Governor; Filed with Secretary of State; assigned PA 98'23 with immediate effect
	HB 4523	Modifies eligibility for mental health court for those with violent offenses	Kara Hope	5/4/23 – Introduced; referred to Committee on Judiciary 6/7/23 - reported with recommendation with substitute (H-1), referred to a second reading 10/31/23 – read a third time, passed given immediate effect 11/1/23 - Referred to Committee on Civil Rights, Judiciary, and Public Safety
	HB 4579 & 4580	Requires reimbursement rate for telehealth visits to be the same as office visits  *Supported by CMHAM	Natalie Price, Felicia Brabec	5/16/23 – Introduced; referred to Committee on Health Policy 10/31/23 – Referred to a second reading
	HB 4649	Require height-adjustable, adult-sized changing tables in public restrooms	Lori Stone	5/23/23 – Introduced; referred to Committee on Regulatory Reform
	HB 4745-4749	Bills related to access to assisted outpatient treatment, outpatient treatment for misdemeanor offenders, hospital evaluations, mediation, and competency exams	Brian BeGole, Donni Steele, Tom Kuhn, Mark Tisdell	6/14/23 – Introduced; referred to Committee on Health Policy
	HB 4171	Modifies the priority of a professional guardian.	Curtis VanderWall	3/2/23 – Introduced; Read; referred to Committee on Judiciary
***	HB 4909-12 & 5047	HB 4909-12 would institute long-awaited reforms to Michigan’s guardianship statutes, and HB 5047 would create the Office of State Guardian.  Supported by the Department of Attorney General, Disability Rights Michigan, the Michigan Elder	Kelly Breen	7/18/23 – Introduced; Referred to Committee on Judiciary 10/11/23 – Reported with recommendation with substitute (H-1); Referred to a second reading

### BILLS & REGULATIONS PERTAINING TO MENTAL HEALTH

Priority	BILL #	SUMMARY	SPONSOR	ACTION DATE
		Justice Initiative, AARP, Alzheimer's Association, and The Michigan Long Term Care Ombudsman Program.		10/24/23 – Read a third time 10/25/23 – Referred to Committee on Civil Rights, Judiciary, and Public Safety
	HB 5184 & 5185	Legislation would remove the social work test as a criterion for social work licensure and replace it with the strengthening of the supervised clinical experience requirements already required for licensure.  *Supported by CMHAM	Felicia Brabec	10/19/23 – Introduced, Read a first time, Referred to Committee on Health Policy

### BILLS & REGULATIONS PERTAINING TO SUD

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
***	TBD	Keep MI Kids Tobacco Free Alliance is working on a legislative package that will address the areas of Tobacco Retail Licensure, Taxation on Vaping Products & Parity, Ending the Sale of Flavored Tobacco, and Preemption Removal (Restoration of local authority to regulate tobacco control at the municipal level)	Keep MI Kids Tobacco Free Alliance Sam Singh	<a href="https://d31hzhk6di2h5.cloudfront.net">Preemption one pager (d31hzhk6di2h5.cloudfront.net)</a>  10/17/23 – Anticipating Senator Singh will be introducing the bill package this week.  To support the upcoming legislation that would ban the sales of all flavored tobacco products, including menthol, the Alliance has launched an online petition to gather support from individuals around the state. The goal is to have a large list of Michiganders signing this petition before the bills are introduced this fall.  <a href="#">Click here to sign the petition!</a>
	HB 4049	A bill to require CRA to consider all applications by spouses of government officials for licensed marijuana establishments, and to not deny them based on their spouse's government affiliation.	Pat Outman	1/31/23 - Introduced and referred to Committee on Regulatory Reform
	HB 4061	Kratom Consumer Protection Act: A bill to regulate the distribution, sale, and manufacture of kratom products	Lori Stone	2/1/23 - Introduced and referred to Committee on Regulatory Reform

**BILLS & REGULATIONS PERTAINING TO SUD**

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	SB 133	A bill to provide for the review and prevention of deaths from drug overdose; allow for creation of overdose fatality review teams and power and duties of those teams; and for other purposes	Sean McCann	3/2/23-Introduced and referred to Committee on Health Policy 10/5/23 – Reported and referred by committee of the whole favorably with substitute; passed roll call 10/10/23 – Referred to Committee on Health Policy 11/2/23 – Referred to second reading
	HB 4430	A bill to require all marijuana sales to provide safety information at the point of sale. Safety info includes: Safe storage, proper disposal, poison control information and the following statements: (A) To avoid dangerous drug interactions, it is recommended that you consult with your prescriber or pharmacist before consuming this product. (B) Exercise care if you consume this product with alcohol. (C) Consuming this product with a controlled substance could increase the risk of side effects or overdose. (D) Do not operate heavy machinery or perform other dangerous tasks under the influence of this product unless you know how this product affects you.	Veronica Paiz	4/19/23-introduced and referred to Committee on Regulatory Reform
	SB 180/179	Allow the Cannabis Regulatory Agency (CRA) to enter into an agreement with an Indian tribe pertaining to marijuana related business if the agreement and the Indian tribe met certain conditions. It prohibits the CRA from employing any individual with pecuniary interests in tribal marijuana; and specifies that sales of marijuana by a tribal marijuana business on Indian lands would be exempt from the State's 10% excise tax on marijuana. Require the Department of Treasury to deposit money into the Marihuana Regulation Fund that was collected under an Indian Tribe Agreement.	Roger Hauck	6/14/23-Passed Senate and received in House Committee on Regulatory Reform 10/5/23 – Reported with recommendation without amendment; referred to second reading; place on third reading; passed by ¾ vote; returned to Senate 10/10/23 – Ordered enrolled 10/24/23 – Signed by Governor and given immediate effect, assigned PA 0166'23
	SB 141/HB 4201	<i>The bill would amend the Michigan Liquor Control Code to eliminate a January 1, 2026, sunset on provisions that allow a qualified licensee to fill and sell qualified containers with alcoholic liquor for the purpose of off-the-premises consumption and to deliver alcoholic liquor to a consumer in the State if the qualified licensee meets certain conditions.</i>	Mallory McMorrow & Kristian Grant	6/13/23 - Passed Senate, referred for second reading in House Committee on Regulatory Reform. 5/3/23 - Passed House, referred to Senate Committee on Regulatory Affairs 7/19/23-Assigned PA 0095'23 with immediate effect
	HB 4833	The bill would amend the public health code to eliminate the requirement for acute care and behavioral health hospitals to carry a SUD Service Program license. The issue was identified through a LARA workgroup revealing duplicate licensure in some circumstances. The endeavor is to clean up the duplication and reduce burden on LARA as well as our members.	Ranjeev Puri	6/22/23 - referred to Committee on Health Policy
	HB 4913	A bill to criminalize all possession or distribution of Xylazine under the Controlled Substances Act.	Kelly Breen	7/18/23-Introduced and referred to Committee on Judiciary
	SB 247	<i>The bill would allow the holder of a special license issued by the MLCC to sell and serve alcoholic</i>	Sean McCann	7/19/23-Assigned PA 0096'23 with immediate effect



**BILLS & REGULATIONS PERTAINING TO SUD**

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
		<i>liquor on the premises of a licensed public area of a facility used for intercollegiate athletic events on dates and times other than the dates and times provided to the MLCC. A licensee that had been issued a catering permit could deliver and serve alcoholic liquor at a private event on the premises on dates and times other than the dates and times provided to the MLCC.</i>		
	HB 4734/4735 /4736	A bill package to require all school districts to have an opioid antagonist in each school building, and at least one trained staff in each building; require local health departments to provide antagonist and training to schools & staff.	David Prestin John Fitzgerald Matt Koleszar	6/13/23-Introduced and referred to Committee on Education
	HB 4322	The bill would allow individuals who are 19 years of age or older to be employed at or volunteer for marijuana establishments, with the direct supervision of a person 21+.	Kevin Coleman	6/28/23-Read a third time in House, substitute adopted, and postponed temporarily
	HB 4600	The bill would prohibit the CRA from denying an application based on spouses of applicants holding positions in certain governmental bodies	Mike McFall	5/18/23-Introduced and referred to Committee on Regulatory Reform 9/12/23 – Reported with recommendation without amendment, referred to a second reading. 9/28/23 – Read a second time; placed on third reading
	HB 4601	The bill to include within a Cannabis Processor License the ability to extract THC concentrates and package for sale on the premises; allow for transfer of products amongst other licensed establishments both on the same location and to other locations; prohibit the denial of a license based upon the background check of an applicant’s spouse.	Mike McFall	5/23/23-Introduced and referred to Committee on Regulatory Reform 9/12/23 – Reported with recommendation without amendment, referred to a second reading. 9/28/23 – Read a second time; placed on third reading
***	HB 4707	The bill would amend the Insurance Code to require health insurers in Michigan to provide coverage for medically necessary treatment of a mental health or substance abuse disorder. The bill would set requirements for coverage of out-of-network services and emergency services, as well as requirements related to prior authorization, utilization review, and the determination of level of care for insured individuals. The bill states that it would not apply to any entity or contracting provider that performs utilization review or utilization management functions on an insurer’s behalf. ***Supported by CMHAM.	Felicia Brabec	6/7/23 – Introduced, read, and referred to Committee on Insurance and Financial Services 6/21/23 – Reported with recommendation without amendment, referred to a second reading 10/24/23 – Read a second time, placed on third reading 10/25/23 – Removed from the House Agenda  <b>CMHAM REQUEST FOR ACTION:</b> We are asking you to reach out to your legislators (House & Senate) and the Governor and URGE them to support HB 4707 and encourage their leadership to bring the bill up for a vote in the fall legislative session. HB 4707 will go a long way in improving people’s lives across the

**BILLS & REGULATIONS PERTAINING TO SUD**

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
				state.
	HB 4213	The bill would require telemedicine coverage for SUD and behavioral health services  *Supported by CMHAM	Christine Morse	3/8/23 – Introduced; Referred to Committee on Health Policy 10/31/23 – Referred to second reading
	HB 4690	Secular Recovery Bill: This bill would amend the Code of Criminal Procedure to require a court that orders a defendant to attend a court-ordered substance use disorder recovery program as part of a sentence or deferred proceeding to ask on the record whether the defendant has an objection to a religious element of that program. If the defendant objects to a religious element, the court would have to identify a secular treatment program that the defendant confirms on the record eliminates their religious objection. The court would have to allow the defendant to participate in a secular treatment program online if one is not available locally	Betsy Coffia	5/30/23 – Introduced, Read, and referred to the Committee on Judiciary
	S 542	A bill to allow government agencies who are providing opioid antagonists free of charge the choice of formulation, dosage, and route of administration for opioid antagonists	Kevin Hertel	10/3/23-Introduced and referred to Committee on Health Policy
	HB 5078	A bill to allow a dispensing prescriber or pharmacist may dispense an opioid antagonist to any of the following: (a) An individual patient at risk of experiencing an opioid-related overdose. (b) A family member, friend, or other individual in a position to assist an individual at risk of experiencing an opioid-related overdose.	Carrie Rheingans	10/4/23-Introduced and referred to Committee on Health Policy
	HB 5063 & 5064	A bill to protect the use of Medical Marijuana-A qualifying patient who has been issued and possesses a registry card must not be denied any right or privilege and it allows students to be treated with medical marijuana and CBD products during school; a public school or nonpublic school shall do all of the following: (a) Authorize a qualified guardian of a qualified pupil to administer a marihuana-infused product or CBD product to the qualified pupil on the school premises, on a school bus, or at a school-sponsored activity in a location off of the school premises at which the use of a marihuana-infused product or CBD product is not prohibited. (b) Authorize a designated staff member to administer a marihuana-infused product or CBD product to a qualified pupil as described in subsection (2). (c) Authorize a qualified pupil to use or self-administer a marihuana-infused product or CBD product under the direct supervision of a designated staff member as described in subsection	Dylan Wegela Jimmie Wilson Jr.	9/28/23-Introduced and referred to Committee on Regulatory Reform
	S 466	The bill would amend Part 126 (Smoking in Public Places) of the Public Health Code to allow a cigar bar that met specified conditions and whose smoking ban exemption had lapsed to requalify for the exemption if the owner or operator of the bar filed an affidavit certifying those conditions.	Kristen McDonald Rivet	9/6/23 – Introduced, Referred to Committee on Regulatory Affairs 10/10/23 – Referred to Committee on the Whole 10/24/23 – Referred to Committee on Regulatory Reform

## FEDERAL LEGISLATION

BILLS & REGULATIONS PERTAINING TO MENTAL HEALTH				
Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
***	S. 2993	<p>Ensuring Excellence in Mental Health Act: The legislation would amend the Social Security Act and the Public Health Service Act to permanently authorize Certified Community Behavioral Health Clinics (CCBHCs) – it establishes a federal definition of CCBHCs into law and create the infrastructure needed to achieve the long-term vision of the model.</p> <p>*Supported by CMHAM</p>	Debbie Stabenow	09/28/2023 - Read twice and referred to the Committee on Finance.

BILLS & REGULATIONS PERTAINING TO SUD				
Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	H.Res. 39	A res. Requesting that all illicit fentanyl and illicit fentanyl-related substances should be permanently placed in Schedule I; and for other purposes.	Neal Dunn	1/17/23-Introduced and referred to Committee on Energy and Commerce & Committee on the Judiciary 1/27/23 - Referred to the House Subcommittee on Health.
	N/A – Proposed Rule	There is a proposed rule by the Substance Abuse and Mental Health Services Administration (SAMHSA) that would permanently allow providers to prescribe buprenorphine specifically for opioid use disorder treatment without an in-person visit in an opioid treatment program, but this is still in the proposal phase with comments due on Feb. 14, 2023.	SAMHSA	12/16/22 – Proposed 2/14/23 – Public Comment Due  <a href="#">Federal Register :: Medications for the Treatment of Opioid Use Disorder</a>
	HR 901	To require the Food and Drug Administration to prioritize enforcement of disposable electronic nicotine delivery system products.	Sheila Cherfilus-McCormick	2/09/2023 - Referred to the House Committee on Energy and Commerce. 2/17/23 - Referred to the House Subcommittee on Health.
	S. 464	A bill to amend the Internal Revenue Code of 1986 to deny the deduction for advertising and promotional expenses for tobacco products and electronic nicotine delivery systems.	Jeanne Shaheen	2/16/2023 - Read twice and referred to the Committee on Finance.

## BILLS & REGULATIONS PERTAINING TO SUD

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	HR 610	Marijuana 1-3 Act of 2023: A bill to provide for the rescheduling of marijuana into schedule III of the Controlled Substances Act.	Gregory Steube	1/27/23 - Referred to the Committee on Energy and Commerce, and in addition to the Committee on the Judiciary
	HR 467	HALT Fentanyl Act (S.1141): This bill places fentanyl-related substances as a class into schedule I of the Controlled Substances Act; the bill establishes a new, alternative registration process for schedule I research that is funded by the Department of Health and Human Services or the Department of Veterans Affairs or that is conducted under an investigative new drug exemption from the Food and Drug Administration.	H. Morgan Griffith/Bill Cassidy 5	03/24/2023 Ordered to be Reported (Amended) by the Yeas and Nays: 27 – 19 (S)-3/30/23-Read twice and referred to the Committee on the Judiciary. 5/17/2023 - Placed on Union Calendar #47 5/25/2023 – House adopted the amendment 5/30/2023 – Received in Senate and referred to the committee on the Judiciary.
	HR 1291	Stopping Overdoses of Fentanyl Analogues Act: To amend the Controlled Substances Act to list fentanyl-related substances as schedule I controlled substances.	Scott Fitzgerald	03/01/2023 Referred to the Committee on Energy and Commerce, and in addition to the Committee on the Judiciary 3/10/23 - Referred to the Subcommittee on Health.
	HR 1839	Combating Illicit Xylazine Act (S.993): To prohibit certain uses of xylazine.	Jimmy Panetta/ Catherine Cortez Masto 7	03/28/2023 Referred to the Committee on Energy and Commerce, and in addition to the Committee on the Judiciary (S)-3/28/23-Read twice and referred to the Committee on the Judiciary 4/7/23 – Referred to the Subcommittee on Health
	S.983	Overcoming Prevalent Inadequacies in Overdose Information Data Sets Act or “OPIOIDS” Act: The Attorney General may award grants to States, territories, and localities to support improved data and surveillance on opioid-related overdoses, including for activities to improve postmortem toxicology testing, data linkage across data systems throughout the United States, electronic death reporting, or the comprehensiveness.	Rick Scott	03/27/2023 Read twice and referred to the committee on the Judiciary
	HR 1734	TRANQ Research Act: To require coordinated National Institute of Standards and Technology science and research activities regarding illicit drugs containing xylazine, novel synthetic opioids, and other substances of concern, and for other purposes.	Mike Collins	03/29/2023 Ordered to be Reported (Amended) by the Yeas and Nays: 36 – 0 5/15/23 - Passed in House, Received in Senate 6/26/23 – Passed in Senate

## BILLS & REGULATIONS PERTAINING TO SUD

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	S 606	To require the Food and Drug Administration to revoke the approval of one opioid pain medication for each new opioid pain medication approved.	Joe Manchin	03/01/2023 - Read twice and referred to the Committee on Health, Education, Labor, and Pensions
	HR 2867 & S 1235	Bruce's Law: Re-introduced as new bills (formerly HR 9221 in 2022). To establish an awareness campaign related to the lethality of fentanyl and fentanyl-contaminated drugs, to establish a Federal Interagency Work Group on Fentanyl Contamination of Drugs, and to provide community-based coalition enhancement grants to mitigate the effects of drug use.	David Trone & Lisa Murkowski	04/20/2023 - Read twice and referred to the Committee on Health, Education, Labor, and Pensions. 04/25/2023 - Referred to the House Committee on Energy and Commerce 04/28/2023 – Referred to the Subcommittee on Health
***	HR 2891 & S 1323	SAFE Banking Act: To create protections for financial institutions that provide financial services to State-sanctioned marijuana businesses and service providers for such businesses, and for other purposes. ***The LRE opposes this bill, as it indirectly supports the federal legalization of marijuana.	David Joyce & Jeff Merkley	5/3/23 - Referred to Subcommittee on Economic Opportunity 5/11/23 - Referred to Committee on Banking, Housing, and Urban Affairs
***	S 2860	SafER Banking Act: To create protections for financial institutions that provide financial services to State-sanctioned marijuana businesses and service providers for such businesses, and for other purposes.	Jeff Merkley	9/20/2023 - Read twice and referred to the committee on Banking, Housing, and Urban Affairs. 9/28/2023 - Placed on Senate Legislative Calendar under General Orders. Calendar No. 215.
	HR 3375	To establish programs to address addiction and overdoses caused by illicit fentanyl and other opioids, and for other purposes.	Ann Kuster	05/16/2023-Referred to the Committee on Energy and Commerce, and in addition to the Committee on the Judiciary 5/19/2023 – Referred to the Subcommittee on Health
	HR 4106	To amend the 21st Century Cures Act to expressly authorize the use of certain grants to implement substance use disorder and overdose prevention activities with respect to fentanyl and xylazine test strips.	Jasmine Crockett	06/14/2023 - Referred to the House Committee on Energy and Commerce 06/16/2023 - Referred to the Subcommittee on Health.
	S. 1785	To establish programs to address addiction and overdoses caused by illicit fentanyl and other opioids; i.e, enhanced surveillance, collection of overdose data, increase fentanyl detection and screening abilities, and other purposes.	Ed. Markey	05/31/2023 Read twice and referred to the Committee on Health, Education, Labor, and Pensions

**BILLS & REGULATIONS PERTAINING TO SUD**

Priority	BILL #	SUMMARY	SPONSOR(S)	STATUS/ACTION DATE
	HR 3563	STRIP Act: To amend the Controlled Substances Act to exempt from punishment the possession, sale, or purchase of fentanyl drug testing equipment.	Jasmine Crockett	05/22/2023 - Referred to the Committee on the Judiciary, and in addition to the Committee on Energy and Commerce 05/26/2023 - Referred to the Subcommittee on Health.
	S. 1080	Cooper Davis Act – This legislation would require Big Tech to take a more proactive role against drug dealing on their social media platforms. It will amend the Controlled Substances Act to require electronic communication service providers and remote computing services to report to the Attorney General certain controlled substances violations. <i>(Any and all electronic communications programs/applications will be required to submit reports of communications that include the sale of any counterfeit or illicit substance within a reasonable time; failure to do so will result in penalties.)</i>	Roger Marshall	3/30/2023 - Read twice and referred to the Committee on the Judiciary. 7/13/2023 - Committee on the Judiciary. Ordered to be reported with an amendment in the nature of a substitute favorably. 09/05/2023 - Committee on the Judiciary. Reported by Senator Durbin with an amendment in the nature of a substitute. Without written report, Placed on Senate Legislative Calendar under General Orders. Calendar No. 200.
	HR 3684	To direct the Secretary of Defense to establish a grant program for using psychedelic substances to treat certain conditions, and for other purposes.	Dan Crenshaw	5/25/2023-Referred to the House Committee on Armed Services.
	HR 4531 & S 2433	Support for Patients and Communities Reauthorization Act: The bill was originally passed in 2018. This bill would reauthorize certain programs under the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities (SUPPORT) Act, and for other purposes. <i>(Reauthorize Block Grant Funding for current programs, and expansion of MAT Studies for OUD, FASD support, and others.)</i>	Brett Guthrie Bill Cassidy	7/11/2023 – Introduced in House, referred to House Energy and Commerce Committee 7/19/23 - Ordered to be Reported (Amended) by the Yeas and Nays: 49 – 0 07/20/2023 Read twice and referred to the Committee on Health, Education, Labor, and Pensions 9/28/23 – Committee consideration and mark-up sessions held; ordered to be reported in the Nature of a Substitute (Amended) by the Yeas and Nays: 29-3.
	HR 3521	Saving America’s Future by Educating Kids Act of 2023: To direct the Secretary of Education to develop and disseminate an evidence-based curriculum for kindergarten through grade 12 on the dangers of vaping and misusing opioids, synthetic drugs, and related substances	Alexander Mooney	5/18/2023 - Referred to the House Committee on Education and the Workforce.

**BILLS & REGULATIONS PERTAINING TO SUD**

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	HR 4105 & S 1475	To amend the Controlled Substances Act to prohibit certain acts related to fentanyl, analogues of fentanyl, and counterfeit substances, Drug Enforcement Administration shall establish and implement an operation and response plan to address counterfeit fentanyl or methamphetamine substances that includes specific ways that prevention and education efforts stop the use of counterfeit pills, how ongoing efforts are effective in increasing education and prevention, how they are tailored to youth and teen access, and how those programs can be tailored, adjusted, or improved to better address the flow of counterfeit fentanyl or methamphetamine; and for other purposes.	Ken Buck Chuck Grassley	05/09/2023 - Read twice and referred to the Committee on the Judiciary 06/16/2023 - Referred to the Subcommittee on Health
	HR 3570	To provide public awareness and outreach regarding the dangers of fentanyl, to expand the grants authorized under the Comprehensive Opioid Abuse Grant Program, to expand treatment and recovery services for people with opioid addictions, and to increase and to provide enhanced penalties for certain offenses involving counterfeit pills.	Sheila Jackson Lee	05/26/2023 - Referred to the Subcommittee on Health.
	HR 4582	Protecting Kids from Fentanyl Act of 2023: To amend the Public Health Service Act to authorize the use of Preventive Health and Health Services Block Grants to purchase life-saving opioid antagonists for schools and to provide related training and education to students and teachers, and for other purposes.	Doug Lamborn	07/12/2023 - Referred to the House Committee on Energy and Commerce.
	S 2699	Opioid RADAR Act: To combat the fentanyl crisis by: 1. Secretary of Health and Human Services may award grants to States, territories, and localities to support improved data and surveillance on opioid-related overdoses, including for activities to improve postmortem toxicology testing, data linkage across data systems throughout the United States, electronic death reporting, or the comprehensiveness of data on fatal and nonfatal opioid-related overdoses. 2. Director of the Centers for Disease Control and Prevention, in collaboration with the Attorney General or their designee, shall carry out a pilot program to award grants on a competitive basis to municipal wastewater treatment facilities in order to conduct wastewater analysis to determine the prevalence of certain illicit substances, such as fentanyl or xylazine, 3. The Secretary may award grants to eligible entities to provide for the administration, at public and private elementary and secondary schools under the jurisdiction of the eligible entity, of drugs and devices for emergency treatment of known or suspected opioid overdose.	Rick Scott	07/27/2023 - Read twice and referred to the Committee on Health, Education, Labor, and Pensions.
	S 2484	To ensure that States do not prohibit an individual from obtaining, possessing, distributing, or using life-saving drug testing technologies, and for other purposes. <i>(More than 12 states currently have laws prohibiting the purchase, use, or possession of fentanyl testing strips)</i>	Cory Booker	07/25/2023 - Read twice and referred to the Committee on the Judiciary

**BILLS & REGULATIONS PERTAINING TO SUD**

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	HR 5040	To amend the Intelligence Reform and Terrorism Prevention Act of 2004 to limit the consideration of marihuana use when making a security clearance or employment suitability determination, and for other purposes.	Jamie Raskin	07/27/2023 - Referred to the House Committee on Oversight and Accountability 9/20/2023 - Committee Consideration and Mark-up Session Held, Ordered to be Reported in the Nature of a Substitute (Amended) by the Yeas and Nays: 30 - 14.
	S 2650	To establish a Commission on the Federal Regulation of Cannabis to study a prompt and plausible pathway to the Federal regulation of cannabis, and for other purposes	John Hickenlooper	07/27/2023 - Read twice and referred to the Committee on the Judiciary 9/20/23 – Committee consideration and mark-up sessions held; ordered to be reported in the Nature of a Substitute (Amended) by the Yeas and Nays: 30-14
	HR 5625	To establish education partnership programs between public schools and public health agencies to prevent the misuse and overdose of synthetic opioids by youth	Suzanne Bonamici	09/21/2023 - Referred to the Committee on Education and the Workforce, and in addition to the Committee on Energy and Commerce
	HR 5506	HANDS Act: To amend titles XVIII and XIX of the Social Security Act and title 10, United States Code, to provide no-cost coverage for the preventive distribution of opioid overdose reversal drugs.	Brittany Petersen	09/14/2023 - Referred to the Committee on Energy and Commerce, and in addition to the Committees on Ways and Means, and Armed Services
	HR 5420	Workplace Overdose Reversal Kits to Save Lives Act: To require the Secretary of Labor to issue guidance and regulations regarding opioid overdose reversal medication and employee training via OSHA	Bonnie Watson-Coleman	9/12/2023 - Referred to the House Committee on Education and the Workforce
	HR 5323	Stop Pot Act: To amend title 23, United States Code, to establish a national requirement against the use of marijuana for recreational purposes.	Chuck Edwards	9/05/2023 Referred to the Subcommittee on Highways and Transit
	HR 5715 & S2929	Tobacco Tax Equity Act of 2023: This bill increases the excise tax on cigarettes and cigars and equalizes tax rates among all other tobacco products. It also imposes a tax on nicotine for use in vaping.	Raja Krishnamoorthi	9/26/2023 Referred to the House Committee on Ways and Means 09/26/2023 Read twice and referred to the Committee on Finance
	HR 5652	Stop Overdose in Schools Act: To amend the 21st Century Cures Act to require funds to be set aside for opioid reversal agent administration training in schools, and for other purposes.	Newhouse	9/21/2023 Referred to the House Committee on Energy and Commerce



**BILLS & REGULATIONS PERTAINING TO SUD**

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	HR 5801	Preventing Overdoses with Test Strips Act: To ensure that expenses relating to the acquisition or use of devices for use in the detection of fentanyl, xylazine, and other emerging adulterant substances, including test strips, are allowable expenses under any grant, contract, or cooperative agreement entered into by the Substance Abuse and Mental Health Services Administration under this Act.	Josh Gottheimer	9/28/2023 Referred to the House Committee on Energy and Commerce. 9/28/2023 Read twice and referred to the Committee on Health, Education, Labor, and Pensions
	S2919	ALERT Communities Act : Administrator of the Drug Enforcement Administration, shall develop and make publicly available research and marketing frameworks for developing, improving, and evaluating test strip technology for detecting fentanyl and other dangerous substances; The Secretary of Health and Human Services shall— conduct a study on the impact of the availability, accessibility, and usage of drug checking supplies, including test strips, on frequency of overdose, overdose deaths, and engagement in substance use disorder treatment and report the findings to Congress.	Hassan	9/26/2023 Read twice and referred to the Committee on Health, Education, Labor, and Pensions
	S2946	School Access to Naloxone Act of 2023: To amend the Public Health Service Act to provide funding for trained school personnel to administer drugs and devices for emergency treatment of known or suspected opioid overdose	Merkley	9/27/2023 Read twice and referred to the Committee on Health, Education, Labor, and Pensions
	S 3070	Youth Prevention and Recovery Reauthorization Act: A bill to reauthorize funding to hospitals, local governments, and other eligible entities to increase access to opioid addiction medications for adolescents and young adults who have been diagnosed with opioid use disorder, improve local awareness among youth of the risks associated with fentanyl, and train healthcare providers, families, and school personnel on the best practices to support children and adolescents with opioid use disorder. Reauthorize the Youth Prevention and Recovery Initiative, which has provided three-year grants to youth-focused entities for carrying out substance use disorder treatment, prevention, and recovery support services. The legislation also expanded an existing youth substance use disorder program to include services for young adults as well as children and adolescents.	Peters	Introduced 10/18/23
	HR 3721	United States Postal Service Shipping Equity Act: This bill authorizes the mailing of alcoholic beverages by certain entities in accordance with the delivery requirements otherwise applicable to a privately carried shipment; directs the U.S. Postal Service (USPS) to prescribe regulations (1) requiring direct delivery to a duly authorized agent at a postal facility or to the addressee, who must be at least 21 years of age and present a valid, government-issued photo identification at the time of delivery; (2) prohibiting such alcoholic beverages from being for resale or any other commercial purpose; and (3) requiring such entity to certify that the mailing is not in violation of applicable laws or regulations and to provide other information as directed by the USPS.	Newhouse	5/25/2023 Referred to the Committee on Oversight and Accountability, and in addition to the Committee on the Judiciary

## LEGISLATIVE CONCERNS

LOCAL THREATS AND CHALLENGES				
	ISSUE	SUMMARY	COUNTY	ADDITIONAL INFORMATION/LINKS
	<b>End of PHE Medicaid Beneficiary Renewals</b>	MDHHS has started mailing renewal letters for Medicaid redeterminations following the end of the Public Health Emergency . Emergency Medicaid coverage protection extended during the COVID-19 pandemic expired on April 1st. This could result in up to 400,000 Michigan residents losing Medicaid coverage.		<a href="http://www.Michigan.gov/2023BenefitChanges">www.Michigan.gov/2023BenefitChanges</a>  <a href="#">Medicaid review could drop 400,000 Michigan residents from coverage   Bridge Michigan</a>

## MISCELLANEOUS UPDATES

MISCELLANEOUS UPDATES				
	ISSUE	SUMMARY	COUNTY	ADDITIONAL INFORMATION/LINKS
	<b>FY24 State Budget Recommendations</b>	<p>Governor Whitmer’s FY2024 State Budget Recommendation includes the following areas related to behavioral health and SUD:</p> <ul style="list-style-type: none"> <li>• \$300 million for student mental health to ensure students’ needs can be identified and provided with the right support.</li> <li>• \$210.1 million for Direct Care Worker Wages (\$74.5 million general fund) to increase wage support to direct care professionals providing Medicaid behavioral health services, care at skilled nursing facilities, community-based supports through MI Choice, MI Health Link, and Home Help programs and in-home services funded through area agencies on agencies. These funds support an increase that would average about \$1.50 / hour (10%)</li> <li>• \$5 million for behavioral health recruitment supports (general fund) that would fund scholarships and other recruiting tools to attract and support people interested in training to become behavioral health providers.</li> </ul>		<p>Access budget material at:</p> <p><a href="https://www.michigan.gov/budget">https://www.michigan.gov/budget</a></p>
	<b>MIHealthyLife</b>	In fall 2023, MDHHS will ask Medicaid health plans for new contract proposals to provide health services to people enrolled in Medicaid, including Behavioral Health. MDHHS is providing a survey for stakeholders to submit ideas to make the program better and collecting input about potential changes to the new contracts.		<a href="#">MIHealthyLife (michigan.gov)</a>

	ISSUE	SUMMARY	COUNTY	ADDITIONAL INFORMATION/LINKS
	<b>CMS Plan for States to Use Medicaid for Incarcerated Substance Use Treatment</b>	Recently, the Director of the Office of National Drug Control Policy (ONDCP), Dr. Rahul Gupta, announced that all federal prisons will offer medication-assisted treatment (MAT) for substance use disorder by this summer. Additionally, Dr. Gupta noted that the Centers for Medicare and Medicaid Services (CMS) will release guidance to support states in using Medicaid 1115 waivers to cover substance use treatment for people who are incarcerated		<a href="#">A disappointing report card for primary care - POLITICO</a> (relevant information is about halfway down the page)
	<b>Post-Pandemic Telehealth Policy</b>	The recently released Michigan Medicaid bulletin reflects all of the recommendations of the CMHA Behavioral Telehealth Advisory Group		<a href="#">Final Bulletin MMP 23-10-Telemedicine.pdf (govdelivery.com)</a>
	<b>Biden-Harris Administration Announce New Proposed Parity Rules</b>	The Biden Administration's new proposal would significantly strengthen the nation's parity enforcement and ensure that people with mental health and substance use conditions do not face arbitrary barriers to receiving care. The proposed rule is aimed at improving health plan compliance with the Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA), which requires health plans to provide mental health and substance use coverage at parity with medical/surgical coverage. A public comment period on the proposed rule will follow.		7/25/2023: <a href="#">Departments of Labor, Health and Human Services, Treasury announce proposed rules to strengthen Mental Health Parity and Addiction Equity Act   HHS.gov</a>

## Elected Officials

<b>FEDERAL</b>			
<b>NAME</b>		<b>NATIONAL OFFICE CONTACT INFORMATION</b>	<b>LOCAL OFFICE CONTACT INFORMATION</b>
US Senate	Debbie Stabenow	731 Hart Senate Office Building Washington, D.C. 20510-2204 Phone: (202) 224-4822	1025 Spaulding Avenue Southeast Suite C Grand Rapids, MI 49546 Phone: (616) 975-0052
US Senate	Gary Peters	Hart Senate Office Building Suite 724 Washington, D.C. 20510 Phone: (202) 224-6221	110 Michigan Street NW Suite 720 Grand Rapids, MI 49503 Phone: (616) 233-9150
US Representative	Bill Huizenga	2232 Rayburn HOB Washington, D.C. 20515 Phone: (202) 225-4401	170 College Ave. Suite 160 Holland, MI 49423 Phone: (616) 251-6741
US Representative	Hillary Scholten	1317 Longworth House Office Building Washington, DC 20515 Phone: (202) 225-3831	110 Michigan Street NW Grand Rapids, MI 49503 Phone: (616) 451-8383
US Representative	John Moolenaar	246 Cannon House Office Building Washington, DC 20515 Phone: (202) 225-3561	8980 North Rodgers Court Suite H Caledonia, MI 49316 Phone: (616) 528-7100

<b>STATE</b>	
Find Your State Senator	<a href="https://senate.michigan.gov/FindYourSenator/">Home Page Find Your Senator - Michigan Senate</a> ( <a href="https://senate.michigan.gov/FindYourSenator/">https://senate.michigan.gov/FindYourSenator/</a> )
Find Your State Representative	<a href="https://www.house.mi.gov/">Michigan House - Home Page</a> ( <a href="https://www.house.mi.gov/">https://www.house.mi.gov/</a> )



Substance Use Disorder Prevention  
Funded Agency Guide  
2023 - 2024

# Allegan County

Provider: OnPoint



- **Parent/Family Initiatives** include several different programs to reach parents and families in Allegan County. The Allegan County Substance Abuse Prevention Coalition (ASAP) implements and promotes Talk Sooner outreach, participates in Talk Sooner media campaigns and implements prescription drug prevention strategies as identified in their strategic plan. Additionally, OnPoint works with community collaboratives to provide information regarding trauma, increase access to services for youth and families regarding substance use, while supporting the social-emotional development of children. Lastly, the Allegan County Suicide Prevention Coalition works to provide resources and supports for youth and families at risk of suicide to increase awareness and decrease risk.
- **Prevention for At-Risk Youth/Behaviors** includes several groups at county elementary and middle schools, focusing on prevention for at-risk youth/behaviors. Programming supports youth in various stages of development. All groups provide population-specific skills focusing on healthy relationships, substance abuse, coping, communication and decision-making. Additionally, Prime for Life is a motivational prevention, intervention and pre-treatment program that works to change attitudes, risk perceptions, motivations, and risk reduction among youth that have been caught using substances at school and/or school-based functions.
- **Peer Assistant Leadership (PAL) Program** is a school-based youth mentoring program. Students complete a selection process and then receive training in communication and decision-making skills, as well as teen social issues. The program trains the peer during a one to two-trimester class, for which they will receive high school credit. Following training, PALs are available to provide listening, support, and mentoring to any students in the school district. PRIDE is a program developed by PALs to provide mentoring to girls in 6th-8th grades.
- **School-Based Non-ATOD Use Organizations** ASAP provides technical assistance to middle schools seeking to develop or strengthen school-based non-Alcohol, Tobacco, and Other Drug (ATOD) use groups for general population students in Allegan County school districts.
- **The Prescription Drug Misuse Prevention Project** works to prevent youth abuse of prescription and over-the-counter medications, as well as adult misuse of prescription medications by reducing access and increasing awareness of the dangers of misusing medications. Efforts to decrease youth access to prescription and over-the-counter medications will focus on encouraging parents and other family members to store medications properly and to dispose of unused medications at the eight permanent disposal drop-off sites within Allegan County. Community education on the danger of misuse will continue through informational materials and working with media outlets. This project will also include efforts of the Allegan County Suicide Prevention Coalition. The Suicide Coalition will collaborate with schools to increase early identification and referral for individuals at risk of suicide.
- **Tobacco Program:** Serves as the Designated Youth Tobacco Use Representative (DYTUR) in Allegan County and implements the No Cigs for Our Kids Program.



# Kent County

## Provider: Arbor Circle



- **Arbor Circle's Prevention Services Program** provides screening and youth education groups for high risk for youth/young adults to prevent alcohol and marijuana use. Youth education groups are specifically focused on building youth capacity and strengthening their peer refusal skills and healthy coping mechanisms. Arbor Circle's Prevention Programming also strives to enhance and support the community-based process of the systems of which they are a part, including neighborhoods, schools, community, and family. The program integrates multiple strategies and interventions aimed at developing and strengthening effective and sustainable prevention-focused relationships, skills, and activities across the community, school, family, peer, and individual domains to prevent the onset and reduce the progression of substance use disorders.
- **Total Trek Quest (TTQ)** is an after-school program that uses running and a substance abuse prevention-based curriculum to teach 3rd through 5th-grade male identifying students positive decision-making, and goal-setting skills. TTQ is delivered by community volunteers.

## Provider: Kent County Health Department (KCHD)



- **About Last Night** is an annual campaign designed to prevent adult heavy drinking by reminding people a night out does not have to end with a hangover or regrets the next morning. Excessive alcohol consumption can cause potentially harmful short- and long-term effects and lead to risky behavior. Long-term, it can lead to obesity, a higher risk of certain cancers, and organ damage. Knowing these risks early, and taking a proactive approach to preventing them, can help individuals stay healthy. Using primarily social media, KCHD employs a broad-based public health campaign to reach the priority population of residents 21 years of age and older.
- **Botvin LifeSkills Training (LST)** is a research-validated substance abuse prevention program proven to reduce the risks of alcohol, tobacco, and drug use, and violence. The major social and psychological factors that promote the initiation of substance use and other risky behaviors are addressed with students and parents. The student LST programs are for 3rd through 10th graders and the parent LST program involves parents at participating schools. The student and the parent curriculums focus on providing skills to successfully handle challenging situations and conversations. Students and parents complete pre-and post-tests that are matched to measure perception of harm outcomes and an increased knowledge of the issues related to youth substance use. Multiple health educators coordinate service delivery with schools in urban, rural and suburban districts throughout Kent County. Elementary, middle and high school curriculums are designed to address the unique developmental stage of each age group.

The focus of the LifeSkills Training is to:

- Teach students the necessary skills to resist social (peer) pressures to smoke, drink, and use drugs
- Help students to develop greater self-esteem and self-confidence
- Enable students to effectively cope with anxiety
- Increase students' knowledge of the immediate consequences of substance use and abuse

- Enhance cognitive and behavioral competency to reduce and prevent a variety of health risk behaviors
  - Enhance positive decision-making skills
- **Yo Puedo** means “I Can” in English. This comprehensive substance use prevention program for 7th through 12th graders consists of weekly educational sessions, virtual visits to local colleges and universities, and presentations from a variety of volunteer Latino adult professionals. The students, including a high percentage of Latino, are enrolled in the program from August through May. The curriculum modules include information about alcohol, tobacco, and other drugs to help students make healthy choices in all areas of their life. A parent program is additionally offered throughout the school year, including 6 hours of educational sessions that focus on increasing knowledge of substance use behaviors, life choices, and health consequences. Annually, three newsletters are sent electronically to teachers and enrolled students. Yo Puedo services are delivered at middle and high schools in the Grand Rapids and Wyoming Public School Districts. Student and parent education is offered in Spanish as needed by a bilingual health educator.
  - **Minor In Possession (MIP)** is a 7-hour program designated for youth, ages 13 to 17, who have been involved in an alcohol, marijuana, vaping or other drug-related incident. The purpose of the program is to offer an alternative to further legal procedures for teens who receive an MIP. Elements of the program include increasing knowledge and awareness of underage substance use issues, improving communication, strengthening decision-making skills, and recognizing the family as the center of influence in the future. A key program component is for youth to complete a parent/guardian interview, supporting the importance of communication in their home space.
  - **CATCH My Breath** is an evidence-based vaping prevention program for students in grades 5-12 to reduce their likelihood of vaping. Students will be empowered to make informed decisions about e-cigarettes and resist social pressures.
  - **Signs of Suicide** is a 1-hour evidence-based youth suicide prevention program for grades, 6 through 12, that has been proven to decrease youth suicide attempts, increase their knowledge about suicide risk, and identify depression. The program teaches students how to respond appropriately to concerning behavior in their peers and seek help with a trusted adult.
  - **MiPHY Data Collection** is working with schools to help them implement the online student health survey administered by the Michigan Departments of Education and Health and Human Services to support local and regional needs assessment. Conducted every other year, it provides student results on health risk behaviors including substance use, violence, physical activity, nutrition, sexual behavior, and emotional health in grades 7, 9, and 11. MiPHY results will help schools make data-driven decisions to improve prevention and health promotion programming.
  - **Tobacco Program:** Serves as the Designated Youth Tobacco Use Representative (DYTUR) in Kent County and implements the No Cigs for Our Kids Program.





- **Kent County Prevention Coalition (KCPC)** is a coalition committed to People, Passion, Partnerships, and Performance. Its vision is to promote a healthier community for all by developing a substance abuse prevention system that fills gaps in services, prioritizes resources, and reduces overlap. The role of this coalition is to impact community-level change via a change in knowledge, attitudes, and behaviors. The KCPC brings together a team of 30+ member organizations from various sectors who share a genuine concern for building a healthier community in Kent County by preventing and reducing harmful substance use behaviors with a special focus on youth. This village-like framework has changed community conditions, norms, systems, and policies in landmark ways.
- **ATI-Kent County Youth Summit**—an annual town hall-style youth summit, is a youth-driven conference of the KCPC “Above the Influence-Kent County” initiative. Annually, KCPC Youth Summit serves nearly 1,300 teens from urban, suburban, and rural communities within West Michigan. Birthed out of a vision to empower community youth, the Summit is designed to equip, educate, and engage middle and high school students to think critically about personal choices and future ambitions, emerging community health and wellness trends related to underage substance use, and the power community teens have individually and collectively to impact peers, family and community norms and the world by making a personal commitment to living Above the Influence.
- **ATI-Kent County Youth Coalition**—powered by network180, spearheads the Above the Influence-Kent County Youth Coalition. The purpose of Youth Coalition is to expand and enhance the vision and reach of Above the Influence-Kent County under the umbrella mission of the KCPC. Youth Coalition aims to see students share their gifts, expertise, and resources to birth and support the work, and authentically care about the wellness of the community we call home.
- **Community Lunch and Learn Series:** Annually, the KCPC sponsors interactive educational forums to educate, empower, and engage all sectors of the community in the effort to reduce and prevent substance use disorders in Kent County. Lunch and Learn Community Forums are meant to help us uncover issues and work together to improve health outcomes for all who call Kent County home, with a special focus on youth and underage substance use.
- **Family Day** is a national movement based on years of research that prove children and teens whose parents are engaged and hands-on in their daily lives—relaxing with them, fellowshiping over a meal or family activity, etc. perform better academically and are significantly less likely to drink, smoke, or use drugs. The KCPC, powered by network180, in partnership with community stakeholders who serve as event sponsors of the event in September as a collaborative venture in celebration of families. To date, the event has served over 10,000 Kent County residents.
- **Project Sticker Shock** is designed to reach adults who might purchase alcohol legally and provide it to minors. Stickers warning about the penalties for furnishing alcohol to minors are on multi-packs of beer, alcopops, and other alcohol products that might appeal to underage drinkers. The project represents a partnership between youth, retailers, concerned parents, community members, prevention professionals, and law enforcement with the goals of educating potential furnishers, raising public awareness about underage drinking, and strengthening the deterrent effect of the law against providing alcohol to minors.
- **Red Ribbon Week** includes activities at several area middle schools and high schools, including urban, suburban, and rural communities throughout Kent County. Students

receive a budget with which to create a week of programming and interactive activities designed to empower and engage their student body to live ATI as a lifestyle. Red Ribbon Week is nationally recognized and is the largest, most visible prevention awareness campaign observed annually in the United States.



## Provider: Wedgwood

- **Project SUCCESS** is an evidence-based multi-strategy approach designed to prevent and reduce substance use among youth based on the following principals:
  1. Increasing perception of risk of harm.
  2. Changing adolescents' norms and expectations about substance use.
  3. Building and enhancing social and resistance skills.
  4. Changing community norms and values regarding substance use.
  5. Fostering and enhancing resiliency and protective factors, especially in high-risk youth.

The target population of the program is Kent County youth between the ages of 12 and 18 in school and community settings. Problem areas addressed include youth alcohol use, binge drinking, and youth marijuana use.

Intervening variables include social norms that support alcohol use, the media depiction of alcohol use, and lack of perception of harm.

There are five program components to Project SUCCESS:

1. The Prevention Education Series
2. Individual Meetings and Small Intervention Groups
3. School-wide and Community Awareness and Outreach Activities
4. Parent Programs
5. Referral

## Lake/Mason/Oceana Counties



### Provider: District Health Department #10

- **Early Initiation to Alcohol, Tobacco, and Other Drugs** program aims to reduce youth use of a variety of substances including tobacco, alcohol, marijuana, and prescription drugs. Activities include in-school programming (LifeSkills), an annual youth summit, general community education, tobacco retailer compliance checks and education, medication disposal projects, and an at-risk youth intervention program.
- **Gambling Prevention Through Education & Awareness:** This project aims at reducing problem gambling in youth, adults, and seniors through education and community awareness. Specific media campaigns are used to address gambling warning signs, risks, how to identify a problem, and strategies to address problem gambling.
- **The Leeward Initiative** (Mason County Substance Abuse Prevention Coalition) is the community coalition for Mason County, focused on reducing substance use by increasing understanding, ensuring treatment services, and supporting local families and community. The coalition addresses substance use through the efforts of individual workgroups for alcohol, marijuana, opiates, synthetic drugs, and recovery/treatment. The Leeward Initiative reaches Mason County residents through outreach and educational events, as well as through specific projects— including medication take-back events, substance use treatment resources and recovery guides, along with parent prevention toolkits.

- **Oceana LEADS (Leading Efforts Against Alcohol and Drugs)** is the substance abuse prevention coalition for Oceana County. Coalition priorities include underage alcohol use, youth marijuana use, and opiate overdoses. Activities include a yearly social hosting awareness campaign, a mock teen bedroom (Keep Out: The Teen Room Project) that educates adults about identifying teen drug and alcohol use, and a lock box project to reduce easy access to prescription pain medication within the home. The coalition meets quarterly and has workgroups that help to plan and implement coalition activities.
- **Lake County Communities That Care** (Prevention Coalition) is a collaborative of human services agencies supporting youth substance use prevention efforts. The coalition works to ensure a variety of local supports are available to youth, families and parents that, ultimately, help reduce substance use in Lake County. Much of the work involves improving mental health, trauma informed communities initiatives and supporting positive childhood activities and experiences.

## Muskegon County

### Provider: Trinity Health-The Health Project

HEALTH PROJECT  
A Community Benefit Ministry of Trinity Health Muskegon

- **Coalition for a Drug Free Muskegon** directly works to reduce substance abuse in the Muskegon area while establishing and strengthening collaboration among all sectors of the community with an interest in reducing and preventing substance abuse. It acts as an organizational hub focused on reducing drug abuse, bringing together individuals, youths, and over 45 community organizations including schools, health providers, law enforcement, the faith community, and business and civic leaders. These interested parties come together to solve emerging problems in their community that are too big for one person or organization to solve alone, without broader support and resources.
- **Drug Abuse Prevention Initiatives:** Working with multiple organizations, the Coalition for Drug Free Muskegon County has assisted the launch of multiple initiatives that address targeted substance abuse related challenges in Muskegon, including:
  - Muskegon Alcohol Liability Initiative
  - KnowSmoke Tobacco Reduction Coalition
  - Muskegon Opiate Task Force
  - Muskegon Area Medication Disposal Project

### Provider: Arbor Circle



- **Gambling Prevention Services** is a project that focuses on preventing problem gambling among youth in Ottawa and Muskegon counties. By integrating curricula into other existing programs such as Bavolek Nurturing Parenting Program, the Strengthening Families 10-14 program (for both parents and youth), SFP 10-14 booster sessions, Botvin Life Skills, Raise Your Voice and TotalTrek Quest, this project will educate parents about the risks of on-line gambling, and how to support their youth in avoiding risky behavior. It will also educate youth on gambling risks and to off-set 'magical thinking'.
- **Parent Education Services** provides evidence-based parent education classes in Muskegon County. Classes cover a variety of parenting topics but include tools for parents on discipline, setting family rules, and building strong and positive relationships. Current curricula being used are the Nurturing Parenting program by Dr. Stephen Bavolek, Conscious Discipline, and the SFP 10-14 program. Circle of Parents, and other parent education and engagement services. All curricula have been found to significantly improve parenting skills and family relationships, and reduce problem behaviors, delinquency, and alcohol and drug

abuse in children. Child maltreatment also decreases as parents learn effective parenting skills and strengthen the bond with their children.

- **Total Trek Quest (TTQ)** is an after school program that uses running and a substance abuse prevention-based curriculum to teach 3<sup>rd</sup> through 5<sup>th</sup>-grade male-identifying students positive decision-making and goal setting skills. TTQ is delivered by community volunteers.



## Provider: Public Health Muskegon County

- **Alcohol Retailer Education** targets reducing the incidence of alcohol sales to minors and intoxicated adults. Includes responsible beverage service TIPS® certification at no charge for on premise and off premise retailers as well as individualized policy and procedure development assistance designed to reduce minor and intoxicated patron access.
- **ATOD Use Consequence Reduction** targets residents, specifically young adults in helping them understand the risk of using misusing drugs and alcohol. These activities specifically focus on reducing the incident of drunk/drugged driving, binge drinking, and overdose.
- **Tobacco Retailer Education** educates and provides one to one technical assistance for retailers that can help reduce the incident of tobacco and vaping sales to youth.
- **Suicide Prevention** provision of QPR® (Question, Persuade, Refer) training services known to help people recognize warning signs of a suicide crisis and how to question, persuade and refer someone to help.
- **Parent Support** provides the community with a series of resources to help parents be the best they can be. Facilitated evidence-based programming includes Parent Café® and Nurturing Fathers®.
- **Older Adult Gambling Disorder Prevention** concentrates on raising awareness of the risks associated with gaming among senior and young adult populations as well as providing information on treatment resources.
- **Perinatal Substance Use Prevention** working with community agencies to reduce the incident of perinatal substance use by encouraging use of evidence-based screening tools in healthcare environments, education on the hazards of toddler access and drug diversion, and referral to credible resources for SUD treatment.
- **Tobacco Program:** Serves as the Designated Youth Tobacco Use Representative (DYTUR) in Muskegon County, and implements the No Cigs for Our Kids Program.



## Ottawa County

### Provider: Arbor Circle



- **Botvin Life Skills Training** is geared toward older students in the 11<sup>th</sup> and 12<sup>th</sup> grades who are at high risk for substance abuse. The program provides seven weeks of classroom instruction for schools, youth-serving organizations, and other groups of youth who may need this information. The program focuses on decision making and the skills necessary to transition from high school to adulthood. Several schools offer this as an alternative to suspension for substance abuse issues, while others simply give it to their students.
- **Gambling Prevention Services** is a project that focuses on preventing problem gambling

among youth in Ottawa and Muskegon counties. By integrating curricula into other existing programs such as Bavolek Nurturing Parenting Program, the Strengthening Families 10-14 program (for both parents and youth), SFP 10-14 booster sessions, Botvin Life Skills, Raise Your Voice and TotalTrek Quest, this project will educate parents about the risks of on-line gambling, and how to support their youth in avoiding risky behavior. It will also educate youth on gambling risks and to off-set 'magical thinking'.

- **Ottawa Substance Abuse Prevention Coalition (OSAP)** is a diverse group of community members, agencies, and service providers who come together to develop a comprehensive, community-wide strategy and action plan to address the issues of youth substance use and abuse. OSAP works to address prescription drug misuse, marijuana and alcohol misuse/abuse, early age of onset, and emerging drug trends. The Coalition has four quadrant subcommittees and three task forces including the Reducing Ottawa Area Drunk Driving coalition, Building Resilient Youth coalition, and Marijuana Prevention Taskforce. OSAP supports and partners with community education and promotes responsible prescription drug disposal.
- **Parent Education Services** provides evidence-based parent education classes in Muskegon and Ottawa County. Classes cover a variety of parenting topics but include tools for parents on discipline, setting family rules, and building strong and positive relationships. Current curricula being used are the Nurturing Parenting Program by Dr. Stephen Bavolek, 24/7 Dads and Inside out Dads. Conscious Discipline, the SFP 10-14 program, Circle of Parents and other parent education and engagement services. All curricula have been found to significantly improve parenting skills and family relationships while reducing problem behaviors, delinquency, and substance use.
- **Reducing Ottawa Area Drunk Driving Taskforce (ROADD)** is a coalition of law enforcement, universities, community members, and other interested parties who come together to prevent impaired driving. The group updated its strategic action plan in 2019 and is focusing on high-risk use of substances and the negative impacts of substance misuse by young adults. The plan includes reducing teen access to alcohol. ROADD is a key component of the community trials to prevent underage drinking strategy that is co-implemented in Ottawa County.
- **Total Trek Quest (TTQ)** is an after-school program that uses running and a substance abuse prevention-based curriculum to teach 3rd through 5th-grade male identifying students positive decision-making, and goal-setting skills. TTQ is delivered by community volunteers.
- **Youth Leadership and Youth Coalitions** include SLIC-Student Leaders Initiating Change, a youth-led coalition. The youth work to develop leadership skills and encourage peers to make healthy choices. SLIC creates projects to help educate their peers about the risks of substance use/abuse and to be a support not to use substances. Arbor Circle supports the SLIC CORE Team, which includes representatives from across Ottawa County, and provides support, guidance, and technical assistance to school based SLICs throughout the county. School-based SLICs implement the initiatives created by SLIC CORE and work to address other issues directly facing their community. In most schools in Ottawa County, Arbor Circle also coordinates and provides the Raise Your Voice Program. This program trains high school students on peer refusal skills and teaches them to go into middle school classrooms to teach these same skills to students. Arbor Circle will establish other youth development opportunities as needed, or as opportunities arise.

## Provider: Community Mental Health of Ottawa County

- **Ottawa County Opiate Taskforce** works to minimize the impact of the opioid epidemic within our community. The team is comprised of medical providers, substance use treatment agencies, community members, and individuals in recovery. Our focus is on increasing access to treatment, medication disposal and harm reduction within Ottawa County.

## Provider: Ottawa County Department of Public Health



- **CRAVE** -Cannabis Reduction And prevention Education is an OSAP (Ottawa Substance Abuse Prevention) subcommittee chaired by one of the Ottawa County Health Educators. The work of this subcommittee focuses on reducing youth access to cannabis. The subcommittee focuses on safe storage through the 'Safe Homes: Lock It Up' campaign, while also educating community members on the dangers of cannabis use and addiction through community events and other educational resources.
- **Prime for Life** is a highly effective program for helping people of any age reduce high risk choices around the use of drugs or alcohol. This includes but is not limited to impaired driving offenders, high school/college students exposed to drug use, and young people charged with alcohol and/or drug offenses. OCDPH is working specifically with the Juvenile Courts and Ottawa County Public Schools to provide classes to those who may benefit. Prime For Life® is designed for these individuals to change drinking and drug use behaviors by changing beliefs, attitudes, risk perceptions, and motivations. This class aims to help develop the knowledge of how to reduce their risk of alcohol and drug related problems throughout their lives.
- **Youth and Parent Vape Education Class** is a court ordered course of instruction. Developed in coordination with the Ottawa County Intermediate School District, the course is for youth and parents of youth who are currently in the Juvenile Court System for use of Electronic Nicotine Delivery Systems (ENDS). The course provides a familiarization of products, trends, hazards, and proven health impacts related to adolescent use of nicotine in order to prevent continued use.
- **Trainings for Intervention Procedures (TIPS)** provides education and training for the responsible service, sale and consumption of alcohol. Proven effective by third-party studies, TIPS is a skills-based program that is designed to prevent intoxication, underage drinking, and drunk driving.
- **Tobacco Program** Serves as the Designated Youth Tobacco Use Representative (DYTUR) in Ottawa County and implements the No Cigs for Our Kids Program.
- **Tobacco and Alcohol Vendor Education** is provided on a yearly basis to assist local businesses with best practices and regulatory updates in order to reduce underage youth access.
- **Mobile Eyes Campaign** is conducted in order to encourage local residents to call 911 on drunk drivers and reduce instances of drunk driving across the county.
- **Alcohol and Tobacco Compliance Checks** are conducted on a yearly basis in partnership with local law enforcement agencies in order to reduce youth access to alcohol and tobacco.





## **Marihuana Operation and Oversight Grants**

### **2024 Grant Application Information and Instructions**

1. The Michigan Legislature has appropriated a total of \$3 million dollars for the Marihuana Operation and Oversight Grants. These grants, which are available to Michigan counties, will only be approved by the Department of Licensing and Regulatory Affairs, Cannabis Regulatory Agency for **education and outreach programs** relating to the Michigan medical marihuana program and the adult-use marihuana program, pursuant to section 6(l) of the Michigan Medical Marihuana Act, 2008 IL 1, MCL 333.26426, and section 14 of the Michigan Regulation and Taxation of Marihuana Act, 2018 IL 1, MCL 333.27946. Grants provided under this section must not be used for law enforcement purposes.
2. The completed Marihuana Operation and Oversight grant application must be received by email no later than **January 1, 2024 at 11:59pm** at the following email address: [CRA-MOOG@michigan.gov](mailto:CRA-MOOG@michigan.gov).
3. The amount of funds available to each county are posted on the Cannabis Regulatory Agency website. The potential grant amounts available are calculated based on the proportion of the number of registry identification cards issued or renewed in the county as of **September 30, 2023**.
4. The county must submit **financial status reports** to the Department of Licensing and Regulatory Affairs on or before **July 15, 2024**, and on or before **September 15, 2024**.
5. On or before **September 15, 2024**, in addition to the financial status report that is due on this date, a **final report** must also be submitted detailing how the total grant was expended. The final report should include:
  - A summary of the project implementation plan and any deviations from the original project as proposed.
  - Accomplishments and problems experienced while carrying out the project activities.
  - Coordinated efforts with other organizations to complete the project.
  - Impacts, anticipated and unanticipated, experienced as a result of the project implementation.
  - Financial expenditures of grant money and other contributions to the project, in-kind and/or direct funding.
  - Any experience in applying the project products and anticipated “next steps.”
  - Actual budget expenditures compared to the budget in the agreement and the reason for any discrepancies.
6. Applicants must be EFT compliant and if they have not already, obtain a SIGMA Vendor Customer ID number. SIGMA Vendor information can be obtained at the following website: <https://sigma.michigan.gov/webapp/PRDVSS2X1/AltSelfService>

Questions regarding the Marihuana Operation and Oversight Grants are to be directed to the Department of Licensing and Regulatory Affairs, Cannabis Regulatory Agency at [CRA-MOOG@michigan.gov](mailto:CRA-MOOG@michigan.gov).



**2024 Grant Application**

Authority: Michigan Medical Marihuana Act  
2008 IL 1, Section 6(l), MCL 333.26426

This application must be submitted to the Cannabis Regulatory Agency via email on or before 11:59pm on **January 1, 2024**.

Email completed application to: [CRA-MOOG@michigan.gov](mailto:CRA-MOOG@michigan.gov)

**Section I: Grant Applicant Information**

Applicant (County Name)

SIGMA Vendor Customer ID No.

Mail Code

**Section II: Grant Administrator Information**

Name

Title

Address

Suite/Room

City

Zip Code

Area Code/Telephone Number

Email Address

**Section III: Description of Grant Program**

Funds must be used for education and outreach programs regarding Michigan Medical Marihuana Act, 2008 IL 1, MCL 333.26421 to 333.26430 and the Michigan Regulation and Taxation of Marihuana Act, 2018, IL 1, MCL 333.27951 to 333.27967. On county letterhead, submit your proposal that includes the items listed below:

- Describe the project(s) for which funds are requested with an implementation plan.
- Describe the impact these funds will have on the community and what you hope to accomplish.
- Explain how funds will be used to coordinate efforts with other agencies, and/or how these funds will be combined with other funding to complete the project, if necessary.
- Explain anticipated outcomes that will result from this grant.





**Section III: Description of Grant Program (Cont'd.)**

Submit a detailed budget (template attached) showing how the requested funds will be expended.

- Counties should construct their budget carefully, as budget amendments/adjustments need to be submitted/approved *prior* to spending.
- Counties should continually review their spending to ensure they have enough money within the line item from which they are spending.
- While there is no technical end date to this grant, it is **required** that all spending be stopped with enough time remaining for counties to submit their final reimbursement requests and final reports by September 15, 2024.

**Section IV: Certification**

I certify and agree to report how the grant was expended and to provide a report to the Department of Licensing and Regulatory Affairs, Cannabis Regulatory Agency, no later than September 15, 2024. Due to Legislative requirements, the September 15<sup>th</sup> due date will be **strictly** enforced. By signing below, I also agree to meet and follow the statutory provisions in which this program was established pursuant to Section 901 of 2022 PA 166.

\_\_\_\_\_  
Signature of County Grant Administrator (Original Signature Required)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title of County Grant Administrator

\_\_\_\_\_  
Telephone

**Contact Information for Person Submitting Application**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Telephone

**Additional Contacts**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Name

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Telephone

**Department of Licensing and Regulatory Affairs  
Cannabis Regulatory Agency  
2024**

**Marihuana Operation and Oversight Grants for Counties**

The total amount per county is based on the number of MMMP Registry Cards Issued  
New/Renewal pursuant to 2023 PA 119 (Section 901)

<b>County</b>	<b>Application</b>	<b>Renewal</b>	<b>Total</b>	<b>Grant Funds Available</b>
Alcona	20	49	69	\$4,119
Alger	22	157	179	\$10,685
Allegan	240	680	920	\$54,917
Alpena	27	130	157	\$9,372
Antrim	82	227	309	\$18,445
Arenac	49	162	211	\$12,595
Baraga	9	60	69	\$4,119
Barry	74	269	343	\$20,474
Bay	200	806	1006	\$60,050
Benzie	65	225	290	\$17,311
Berrien	148	525	673	\$40,173
Branch	139	149	288	\$17,191
Calhoun	83	284	367	\$21,907
Cass	61	181	242	\$14,445
Charlevoix	25	60	85	\$5,074
Cheboygan	31	91	122	\$7,282
Chippewa	20	119	139	\$8,297
Clare	62	247	309	\$18,445
Clinton	119	404	523	\$31,219
Crawford	49	193	242	\$14,445
Delta	41	98	139	\$8,297
Dickinson	23	54	77	\$4,596
Eaton	111	425	536	\$31,995
Emmet	7	28	35	\$2,089
Genesee	433	1457	1890	\$112,818
Gladwin	1	5	6	\$358
Gogebic	19	65	84	\$5,014
Grand Traverse	111	297	408	\$24,354
Gratiot	21	34	55	\$3,283
Hillsdale	79	78	157	\$9,372
Houghton	11	83	94	\$5,611
Huron	35	101	136	\$8,118
Ingham	82	345	427	\$25,488
Ionia	25	31	56	\$3,343
Iosco	7	28	35	\$2,089
Iron	7	22	29	\$1,731
Isabella	31	80	111	\$6,626
Jackson	236	730	966	\$57,662
Kalamazoo	140	433	573	\$34,204
Kalkaska	26	52	78	\$4,656

County	Application	Renewal	Total	Grant Funds Available
Kent	369	1281	1650	\$98,492
Keweenaw	8	53	61	\$3,641
Lake	10	22	32	\$1,910
Lapeer	206	350	556	\$33,189
Leelanau	62	206	268	\$15,997
Lenawee	194	336	530	\$31,637
Livingston	266	665	931	\$55,573
Luce	4	11	15	\$895
Mackinac	10	40	50	\$2,985
Macomb	1403	3557	4960	\$296,072
Manistee	19	48	67	\$3,999
Marquette	19	47	66	\$3,940
Mason	22	46	68	\$4,059
Mecosta	8	33	41	\$2,447
Menominee	30	54	84	\$5,014
Midland	93	394	487	\$29,070
Missaukee	12	28	40	\$2,388
Monroe	183	612	795	\$47,455
Montcalm	157	236	393	\$23,459
Montmorency	6	13	19	\$1,134
Muskegon	115	355	470	\$28,055
Newaygo	84	216	300	\$17,908
Oakland	2421	6211	8632	\$515,261
Oceana	49	137	186	\$11,103
Ogemaw	25	51	76	\$4,537
Ontonagon	9	12	21	\$1,254
Osceola	25	45	70	\$4,178
Oscoda	16	32	48	\$2,865
Otsego	2	18	20	\$1,194
Ottawa	157	512	669	\$39,934
Presque Isle	11	17	28	\$1,671
Roscommon	32	89	121	\$7,223
Saginaw	133	480	613	\$36,591
Saint Clair	225	562	787	\$46,978
Saint Joseph	35	87	122	\$7,282
Sanilac	44	132	176	\$10,506
Schoolcraft	2	4	6	\$359
Shiawassee	111	306	417	\$24,892
Tuscola	195	466	661	\$39,456
Van Buren	89	210	299	\$17,848
Washtenaw	611	1730	2341	\$139,739
Wayne	2745	7596	10341	\$617,275
Wexford	73	233	306	\$18,266
<b>TOTAL</b>	<b>13,261</b>	<b>36,997</b>	<b>50,258</b>	<b>\$3,000,000</b>