

Opioid Settlement Update



By Mary Lyon, LPHA Project Coordinator

Last year (2023) was the first full year of settlement payments in Minnesota. These opioid settlement funds are a once in a generation funding opportunity that we can use to make big upstream changes to diminish the opioid epidemic. Minnesota stands out from other states by naming public health as the chief strategist of the opioid settlement funds. We have encouraged thoughtful spending and emphasized a public health approach to utilizing the funds. A public health approach requires time and planning to understand how counties can help those in need now and make upstream changes to combat the opioid epidemic.

What are counties doing with their funds?

The first full year of funding was a big planning year for counties. Some counties were able to hit the ground running and get grants out through Requests for Proposals (RFPs) to community organizations. Counties awarded funds to organizations that are doing prevention, harm reduction, and treatment work around opioid misuse within the community. In addition to funding community organizations, agencies also funded internal projects.

As indicated in the Opioid Settlement Report for 2023 spending, almost \$1.25 million dollars of local government spending went towards of leadership, planning, and coordination. AMC anticipates the 2025 report will indicate increased programmatic and initiative funding. Notably, 17 local governments enlisted the help of AmeriCorps Public Health Corps members to work on opioid settlement related projects.

Many smaller counties are waiting to accumulate more funds to tackle larger projects that could make a bigger upstream difference. Counties are also waiting for the second round of settlement payments to begin. The second round of settlement payments will nearly double the total opioid settlement payments for local governments.

Local public health has been using the funds to focus on a prevention and upstream approach. Counties and local public health are balancing the need to save lives now and work to make upstream changes to combat the opioid epidemic.

“We most certainly need to save lives and we need to also look to how we use this opportunity to turn the course of the opioid epidemic,” said Sarah Grossheusch, Wright County Public Health Director. “These funds



provide the opportunity to fund programs that have the biggest return on investment, primary prevention programs, especially those focused on our youth, that interrupt the cycle of addiction and overdose in community.”

How are counties gathering community feedback?

Many counties are meeting with their communities through Opioid Advisory Councils. These councils have community members from various backgrounds such as EMS, corrections, and individuals with lived experience. Counties are using these advisory councils to determine what the needs are and to help guide the spending of the funds. Counties are also using community surveys, such as the Colorado Blueprint or Community Assessment Plans, to gather input to prioritize the allocation of funds towards mitigation efforts.

Counties are required to consult annually with their municipalities regarding future use of the settlement funds in the county, including by holding an annual meeting with all municipalities in the county to receive input as to proposed uses of the Opioid Settlement Funds and to encourage collaboration between local governments both within and beyond the county. Counties are using these meetings to gather information from their cities and to encourage transparency on how the funds are being used.

How are counties working together regionally and across the state?

Counties are working together in a multitude of ways to make a larger impact and to learn from one another. The Local Public Health Association hosts monthly Opioid Sharing Sessions for local public health staff to come together to share questions, ideas, and projects related to using the opioid settlement funds.

Counties are also working regionally to partner on projects and oversee funds. Some multi-county public health agencies are keeping the funds separate but coordinating on how to best use the funds together. ●