



The Commonwealth of Massachusetts  
Executive Office of Health and Human Services  
One Ashburton Place, Room 1109  
Boston, Massachusetts 02108

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Lieutenant Governor

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Secretary

October 1, 2021

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Michael D. Hurley, Clerk  
State House, Room 335  
Boston, MA 02133

Steven T. James, Clerk  
State House, Room 145  
Boston, MA 02133

RE: Opioid Recovery and Remediation Fund Advisory Council

Dear Clerks Hurley and James:

On behalf of the Opioid Recovery and Remediation Fund Advisory Council (Council), I am pleased to provide the following letter summarizing the Council's activities to date, pursuant to Chapter 309 of the Acts of 2020. Please accept this letter as the Council's Annual Report.

Trust Fund: To date, the Opioid Recovery and Remediation Trust Fund has received \$11,529,507 from opioid settlements. Per statute, these funds are administered by the Executive Office of Health and Human Services, in consultation with the Opioid Recovery and Remediation Fund Advisory Council. During the Council's first year, no expenditures were made from the Trust Fund.

Council Activities: In its first year, the Council met four times and focused on reviewing the scope of the opioid crisis in the Commonwealth, the existing landscape of substance use prevention and treatment programming in Massachusetts, and opportunities to address racial and geographic inequities in substance use prevention and treatment. The Council dedicated significant time in developing a set of principles for future expenditures from the Opioid Recovery and Remediation Trust Fund.

Thank you for your collaboration.

Sincerely,

A handwritten signature in black ink that reads "Marylou Sudders".

Marylou Sudders

Cc: Senate President Karen E. Spilka  
House Speaker Ronald Mariano



## Appendix

### Opioid Recovery and Remediation Fund Advisory Council Statute

**Legal Authority:** Chapter 309 of the Acts of 2020

**Statute:**

Section 35000 (a) There shall be an Opioid Recovery and Remediation Fund. Expenditures from the fund shall be made by the executive office of health and human services, without further appropriation and consistent with the terms of settlements made in connection with claims arising from the manufacture, marketing, distribution or dispensing of opioids, as applicable. The secretary of health and human services, in consultation with the Opioid Recovery and Remediation Fund advisory council established in subsection (b), shall administer the fund.

The fund shall be expended to mitigate the impacts of the opioid epidemic in the commonwealth, including, but not limited to, expanding access to opioid use disorder prevention, intervention, treatment and recovery options. Amounts credited to the fund shall not be subject to further appropriation and monies remaining in the fund at the end of a fiscal year shall not revert to the General Fund, but shall instead be available for expenditure during the next fiscal year. Any fiscal year-end balance in the fund shall be excluded from the calculation of the consolidated net surplus pursuant to section 5C of chapter 29.

There shall be credited to the fund: (i) amounts recovered by the commonwealth and credited thereto in connection with claims arising from the manufacture, marketing, distribution or dispensing of opioids; (ii) transfers from other funds authorized by the general court and so designated; (iii) funds from public or private sources, including, but not limited to, gifts, grants, donations, rebates and settlements received by the commonwealth designated to the fund; and (iv) any interest earned on such amounts.

(b) There shall be an Opioid Recovery and Remediation Fund advisory council regarding the expenditures from the fund. The council shall consist of the following members or their designees:

- the secretary of health and human services, who shall serve as a non-voting chair;
- 1 person to be appointed by the senate president;
- 1 person to be appointed by the speaker of the house of representatives;
- 1 person to be appointed by the minority leader of the senate;
- 1 person to be appointed by the minority leader of the house of representatives;
- 3 persons to be appointed by the governor, including not less than 1 person qualified by experience with opioid use disorder, either first-hand or as a family member of an individual with opioid use disorder;
- 3 persons to be appointed by the attorney general, including not less than 1 person qualified by experience with opioid use disorder, either first-hand or as a family member of an individual with opioid use disorder; and
- 10 people to be appointed by the Massachusetts Municipal Association, Inc., who are officials employed by a city or town and who represent the diversity of the commonwealth's cities and towns; provided,

however, that not less than 2 officials appointed under this clause shall be employed by a city or town that is a gateway municipality, as defined in section 3A of chapter 23A; and provided, further, that no 2 officials appointed under this clause shall be employed by a city or town that is in the same county.

In making appointments, the appointing authorities shall ensure that the council includes: (i) members representing racially and socioeconomically diverse communities; (ii) members with public health expertise concerning opioid use disorder; (iii) members with personal experience with opioid use disorder; and (iv) members who will contribute to reducing disparities in health outcomes for underserved communities experiencing opioid use disorder. The appointing authorities shall also consider having racially diverse representation on the council.

The council shall hold no fewer than 4 meetings annually and the council shall make its recommendations upon a majority vote. The council shall be subject to sections 18 to 25, inclusive, of chapter 30A. Council members shall serve without compensation for terms of 2 years. Members shall be reimbursed for actual expenses necessarily incurred in the performance of their duties. Any member shall be eligible for reappointment. In the event of a vacancy, the original appointing authority shall appoint a new member to fulfill the remainder of the unexpired term. Any member who is appointed may be removed by the appointing authority. The secretary of health and human services shall provide administrative support to the council.

(c) Annually, not later than October 1, the secretary of health and human services shall file a report on the activity, revenue and expenditures to and from the fund in the prior fiscal year with the clerks of the senate and the house of representatives, the house and senate committees on ways and means and the joint committee on mental health, substance use and recovery and made available on the executive office of health and human services' public website. The report shall include, but not be limited to: (i) the revenue credited to the fund; (ii) the amount of expenditures attributable to the administrative costs of the executive office; (iii) an itemized list of the funds expended from the fund; and (iv) data and an assessment of how well resources have been directed to vulnerable and under-served communities.

## Opioid Recovery and Remediation Fund Advisory Council Membership

### Council Chair (non-voting)

- Marylou Sudders, Secretary, Executive Office of Health and Human Services

### Appointed Members

- Jennifer Almonte, Public Health Nurse, City of Lynn (*MMA appointment*)
- Charles Anderson MD, MPH, MBA, President/CEO, The Dimock Center (*Attorney General appointment*)
- Gina Armstrong, Director of Public Health, City of Pittsfield (*MMA appointment*)
- Jason Ball, Officer, Framingham Police (*MMA Appointment*)
- Matilde Castiel, MD, Commissioner of Health and Human Services, City of Worcester (*MMA Appointment*)
- Maureen Cavanagh, President, Magnolia New Beginnings (*Appointment of House Minority Leader Bradley Jones, Jr.*)
- Damon Chaplin, Director of Public Health, City of New Bedford (*MMA appointment*)
- Denise Garlick, House Representative, (*Appointment of House Speaker Ronald Mariano*)
- Lindsay Hackett, Deputy Chief Administrative & Financial Officer, City of Springfield (*MMA appointment*)
- Suzie Hauptmann, Director of Human Services, Town of Falmouth (*MMA appointment*)
- Brendan Little, Former Policy Director, Office of Recovery Services, City of Boston, Person in Recovery (*Governor appointment*)
- John McGahan, President/CEO, Gavin Foundation (*Governor appointment*)
- Mary Beth Ogulewicz, Director of Senior Services & Social Services, Town of Amherst (*MMA appointment*)
- Joanne Peterson, Executive Director, Learn 2 Cope (*Attorney General appointment*)
- David Rosenbloom, PhD, Professor, Boston University School of Public Health (*Appointment of Senate President Karen E. Spilka*)
- John Rosenthal, Founder, Police Assisted Addiction and Recovery Initiative (PAARI) (*Appointment of Senate Minority Leader Bruce Tarr*)
- Elsie Taveras, MD, MPH, Chief Community Health Equity Officer, Executive Director of the Kraft Center for Community Health, Mass General Brigham (*Governor Appointment*)
- Jennifer Tracey, Director, Office of Recovery Services, City of Boston (*MMA appointment*)
- LaToya Whiteside, Staff Attorney, Prisoners' Legal Services (*Attorney General appointment*)

### Council Staff

- Gabriel Cohen, Program Planning and Implementation Manager, Executive Office of Health and Human Services

## Summary of Activities of the Opioid Recovery and Remediation Fund Advisory Council for 2021

### May 14, 2021

**Summary:** *Review of the Council's charge, enabling legislation, and the Commonwealth's conflict of interest laws, ethics regulations, and open meeting law.*

In addition to a review of the Council's enabling legislation and charge, Council members discussed the ongoing litigation led by the Office of the Attorney General and the scope of the opioid crisis in the Commonwealth, including health and racial inequities impacting at-risk communities.

### June 21, 2021

**Summary:** *Discussion of Council's potential priorities and framework for developing recommendations*

The Council continued their discussion of the impact that the opioid crisis has had on specific populations, particularly justice-involved communities. Members discussed the key principles and metrics that the Council might consider in developing recommendations for the Trust Fund expenditures.

### July 19, 2021

**Summary:** *Discussion of new and existing opioid prevention and treatment initiatives and framework for guiding Trust Fund expenditures*

Council members discussed the proposed principles and metrics for guiding Trust Fund expenditures and reviewed new and existing opioid prevention and treatment initiatives BSAS is implementing across the Commonwealth. BSAS highlighted new initiatives in development, based on recent changes to federal law, including authorization to purchase fentanyl test strips and reduced barriers to prescribing and increased available pool of eligible providers who prescribe buprenorphine to treat opioid use disorder. Council members also discussed the work of past commissions and working groups convened to develop proposals to mitigate the opioid crisis and guide the Commonwealth's response, including the Governor's Opioid Addiction Working Group, the Harm Reduction Commission, and the recent development of the Behavioral Health Roadmap.

### September 30, 2021

**Summary:** *Discussion of the Council's proposed recommendations and annual report*

The Council discussed draft recommendations for spending Trust Fund dollars, grouped into four distinct themes: expansion of harm reduction services; increased access to methadone; strengthening supportive housing

programs; and case management and support through multi-disciplinary community outreach teams. The Council voted to adopt the proposed recommendations.