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**A Colorado Model: Getting to Yes**



# Core Principles for All Colorado Plan



Maximize  
Settlement Funds



Utilize  
Existing  
Infrastructure  
To the Extent  
Possible



Ensure  
Equity for All  
Local Governments



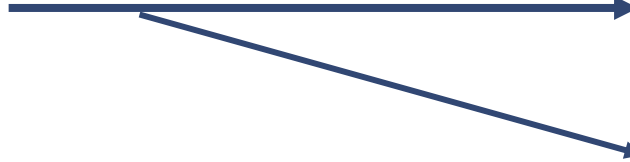


# Colorado Attorney General - Outreach



## Colorado Opioid Settlement Funds Distribution

20%



**Direct Allocation by Formula to  
Participating local Governments**

**\*Requirements – Full Transparency**

60%



**Regional Opioid Abatement Fund  
Formula Allocations to Regions**

**\*Requirement – Full Transparency**

10%



**Infrastructure Fund – State**  
**This fund will support hard hit areas  
in the state with resource needs**

**\*Requirement – Full Transparency**

10%

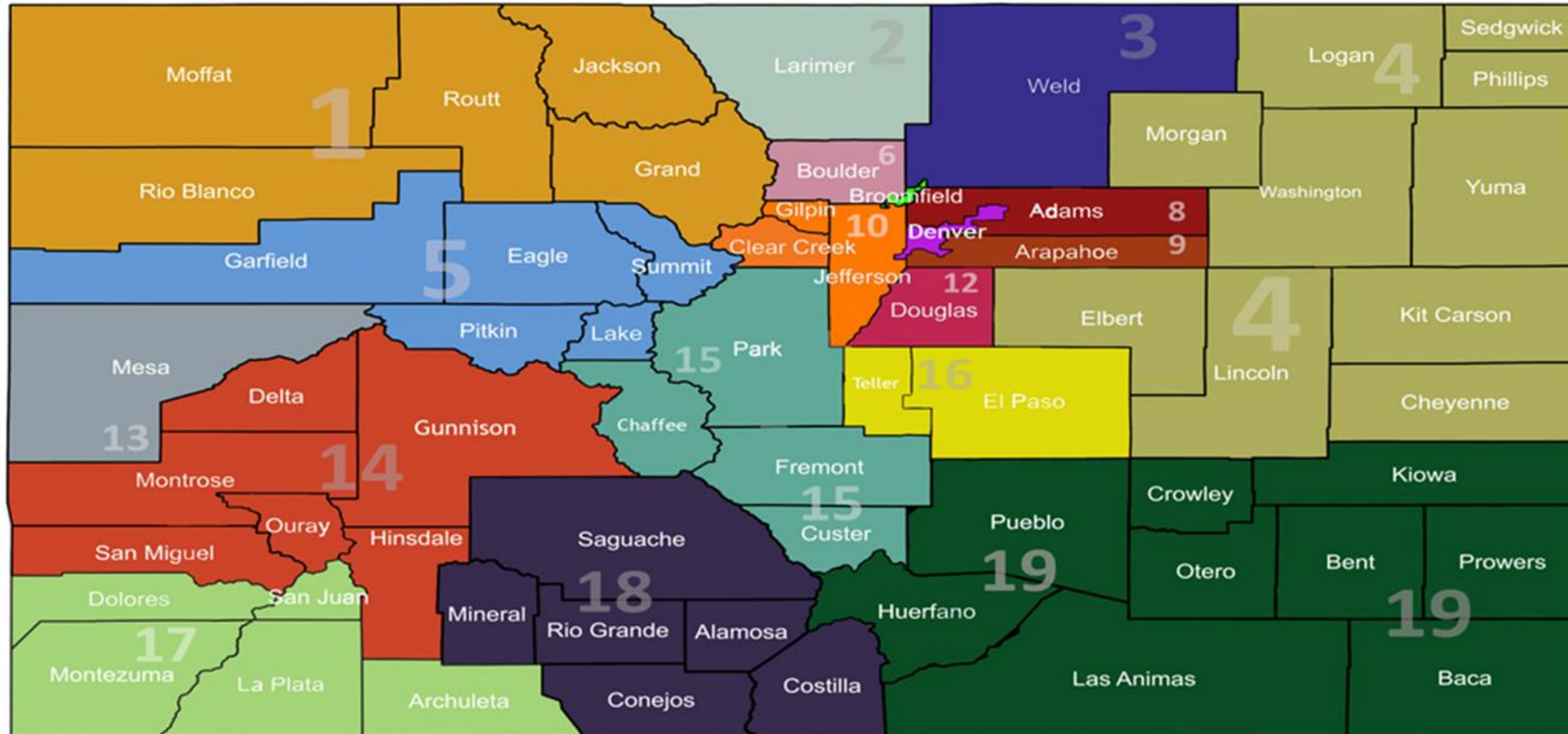


**Direct Allocation to State Government**  
**\*Requirement – Full Transparency**



# Colorado Opioid Regions

Regions for the distribution of opioid settlement funds



Region 1	Region 5	Region 9	Region 13	Region 17
Region 2	Region 6	Region 10	Region 14	Region 18
Region 3	Region 7 (Broomfield)	Region 11 (Denver)	Region 15	Region 19
Region 4	Region 8	Region 12	Region 16	





60% Regional  
&  
10% Infrastructure  
Shares

## Colorado Opioid Abatement Council (COAC)

13 Members  
AG is the non-voting  
Chair

### 6 Local Government Appointees

- 2 Western Slope
- 2 I-25 Corridor
- 2 Eastern Plains

### 6 Attorney General Appointees

- 2 Licensed in SUD
- 3 with Experience  
In SUD
- 1 Affected Person

2-Year Plan  
Administer  
Regional  
Funds

## Regional Opioid Abatement Council (ROAC)

Membership

### Voting Members

- County Rep\*
- Municipal Rep
- Public Health Rep
- Police, Sheriff, DA Rep
- Courts Rep

### Advisory Members

- Treatment Providers
- Recover Providers
- Harm Reduction
- Affected Persons
- Other

10% State  
Share

## Opioid Crisis Recovery Funds Advisory Committee

Membership

### 13 Governor Appointees

- Licensed Physician
- Licensed Pharmacist
- Licensed Nurse
- Licensed Dentist
- Licensed Veterinarian
- Licensed Phys Therapist
- Local Public Health
- Affected Person
- Affected Family
- Advocacy Organization
- 16 State Organization  
Appointees

\*Each Regional Council should have a  
representative from each county

# Governance



# Building the Coalition



**THANK YOU to CCI!**

Your counties took the lead on this important step to ensure the municipalities signed the MOU and settlement releases!



Our state framework represents what works in Colorado - local control with state support





## Frequently Asked Questions

- Who is the primary contact for the regional councils?
- How do I get involved?
- How do I apply for funding?
- How do I 'opt-out' of direct payment to my local government and direct to my region?

Ensure our office has your regional council's primary contact.

Put together an FAQ for your region and send to us – we will get that out when it's requested!



## How Can Your County Get Involved in Your Regional Opioid Abatement Council?

- Ensure your county is represented on the regional council
- Ask your ROAC representative to give a report at your BoCC meeting.
- Make sure the ROAC meetings are noticed so your constituents can participate

**Everyone can  
be part of the  
process**



# Best Practices

## Resources – Best Practices:

- PRINCIPLES FOR THE USE OF FUNDS FROM THE OPIOID LITIGATION – BLOOMBERG SCHOOL OF PUBLIC HEALTH
- Evidence Based Strategies for Abatement of Harms from the Opioid Epidemic - Harvard Medical School, Blavatnik Institute for Health Care Policy

## **Funding – look for ways to “braid” funds**

- State Opioid Response (SOR) grants from Office of Behavioral Health  
(can be used for stimulants and opioids)
- ARPA Behavioral Health Funds
- Attorney General office grants
- Infrastructure fund for rural areas

# Opioid Settlement Funds – Allowable Uses

## Treatment and Recovery

Evidence-based treatment models

- Medication Assisted Treatment (MAT)
- Supportive Housing and residential treatment – access to MAT
- Mental Health Trauma issues resulting from opioid use
- Expand Telehealth to increase access to treatment, MAT, counseling, psychiatric support and other forms of treatment services
- Addiction Medicine Workforce Development
- Scholarships for Certified Addiction Specialists
- Prescription Drug Monitoring Program
- Continuum of Care (Warm Hand-Offs/Hub and Spoke Models)
- Gender specific Care (Women, Children, families, etc.)

Opioid Crisis Response Plan (Colorado)

# Opioid Settlement Funds – Allowable Uses

## Intervention

Evidence-based treatment models

- Health Care Provider screening for Opioid Use Disorder (OUD) and other risk factors
- Health Care Provider know how to appropriately counsel, treat/refer patient for OUD Treatment
- Screening, Brief Intervention and Referral to Treatment (SBIRT) programs
- Training and long-term implementation of SBIRT in key systems (health, schools, colleges, criminal justice and probation)
- Training for ER personnel – MAT induction, post-discharge planning, warm hand-offs
- School based contacts for parent resources
- Develop best practices on addressing OUD in the workplace
- Engage non-profits and faith community as a system to support outreach for treatment



# Opioid Settlement Funds – Allowable Uses

## Criminal Justice

Innovative treatment, diversion strategies and wrap-around services

- Address the needs of persons involved in the criminal justice system who have OUD and co-occurring SUD or mental health issues
  - Support pre-arrest diversion and deflection strategies
  - Support pre-trial services
  - Support treatment and recovery courts – including referrals to MAT or other evidence based treatment
  - Including those who are incarcerated, on probation or on parole
  - Including those who are leaving jail or prison or have recently left jail or prison
  - Support Continuum of Care/Warm Hand-Offs/Hub and Spoke model

# Opioid Settlement Funds – Allowable Uses

## Prevention & Education

Widespread prevention and education efforts among communities

- Any campaign that implements evidence-informed prevention, such as reduced social and physical access, stigma reduction – including staffing, educational campaigns, or training of coalitions in evidence-informed implementation
- Other prevention activities
  - Prescribing practices (Colorado Consortium for Rx Drug Abuse Prevention)
  - Misuse of opioids
  - Safe disposal
  - Fentanyl awareness (Email Heidi for social media toolkit)
  - School based programs
  - Community coalitions
  - Non-profit and faith community

Opioid Crisis Response Plan (Colorado)

# Opioid Settlement Funds – Allowable Uses

## Harm Reduction

Strategies for reducing or mitigating the negative consequences associated with substance use

- Increase availability and distribution of naloxone
    - First responders
    - Overdose patients
    - Opioid users
    - Family and friends of opioid users
    - Schools
    - Community navigators and outreach workers
    - Drug offenders upon release from jail/prison
    - Other members of the general public
  - Syringe service programs
  - Access to testing and treatment for infectious diseases such as HIV and Hepatitis C resulting from IV opioid use.
- Opioid Crisis Response Plan (Colorado)



# Opioid Settlement Funds – Allowable Uses

## Other

- Regional Planning to identify goals for opioid reduction and support efforts or to identify areas and populations with the greatest needs for treatment intervention services
- Government dashboard to track key opioid-related indicators and supports as identified through collaborative community processes
- Staffing and training
  - Funding for programs and services regarding staff training and networking to improve staff capability to abate the opioid crisis.
- Support infrastructure and staffing for collaborative cross-systems coordination
- Administrative costs for any of the approved purposes in the MOU (Exhibit A) – not to exceed 10%

# Colorado Next Steps

**SAVE THE DATE**  
**August 15 & 16**

**Annual  
Conference**



# Colorado Next Steps

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**3<sup>rd</sup> Quarter 2022**

**Dashboard**

Settlement Details

Regional  
Distributions

Local Distributions

State Distributions

Expenditure  
Information

**\$389.63M**

Total Anticipated Amount of  
Settlement Funding

**\$1.71M**

Year 1  
Funding

**419**

Governments Participating  
in the Settlement





# Colorado Next Steps

SAVE THE DATE  
August 15 & 16

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3<sup>rd</sup> Quarter 2022

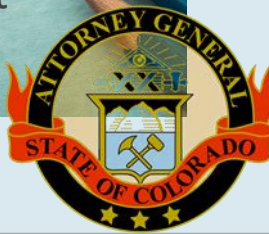
Dashboard

Settlement Details	Regional Distributions	Local Distributions	State Distributions	Expenditure Information
<b>\$389.63M</b>		<b>\$1.71M</b>		<b>419</b>
Total Anticipated Amount of Settlement Funding		Year 1 Funding		Governments Participating in the Settlement

Ongoing

Toolkits

Regional  
Opioid  
Abatement  
Council Toolkit

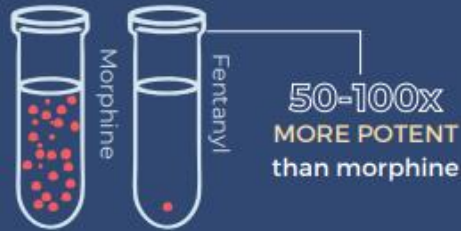


## Timeline:

- Opt-Out: June-July 2022
- Two-Year Plan Due for Regions that received planning grant: June 30, 2022
- Second payment made to national administrator – July 15, 2022
- Colorado Opioid Abatement Council Annual Conference August 15 & 16
  - Where: Ralph L. Carr Building 1300 Broadway Denver, CO 80203
  - Why: Education and Best Practices for Opioid Settlement Funds
  - Save the date – registration opening soon
- Two-Year Plan Due for all other regions: September 2022 (estimated)
- Settlement funds distribution: 4<sup>th</sup> Quarter 2022 (estimated)
- Two-Year Plan or Amended Two-Year Plan: March 2023 (estimated)
- Ongoing technical assistance – Invite me to your ROAC meeting!

# FENTANYL: overdoses & impacts in Colorado

Fentanyl is a synthetic opioid approved for treating severe pain, such as advanced cancer pain. Illicitly manufactured fentanyl is the main driver of recent increases in synthetic opioid deaths.



DEA lab testing reveals that  
**2** out of every **5** pills  
with fentanyl contain a  
potentially lethal dose.



## ILLEGALLY MANUFACTURED FENTANYL

Although opioid prescription rates have fallen, overdoses associated with fentanyl have risen dramatically, contributing to a sharp spike in synthetic opioid deaths.

Often mixed into counterfeit versions of Oxycontin, Xanax, Adderall, and drugs like cocaine and heroin—without knowledge of the user.

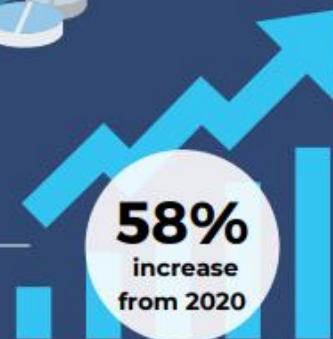


You typically can't see, smell, or taste fentanyl when it's mixed with other drugs.

Fentanyl-related deaths in Colorado drove the increase in opioid overdoses in 2021:



In 2021, there were **854** fentanyl-related overdose deaths compared to 540 deaths in 2020.\*



For more info about what the Colorado Attorney General's Office is doing to combat the fentanyl and opioid crisis, visit our page [here](#) OR scan here.



\* according to preliminary data from Colorado Department of Public Health and Environment (CDPHE).



# Questions?



## Resources

[Opioid Crisis Response Plan \(Colorado\)](#)

[Colorado Memorandum of Understanding](#)

[COAG.GOV/OPIOIDS](https://coag.gov/opioids)



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