

# **Determining Best Strategies for Allocating the Pharmaceutical Settlement Dollars to Abate the Opioid Crisis: Part II**

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**Rhode Island Executive Office of Health and Human Services**

**RHODE  
ISLAND**

# EOHHS Statutory Role and Overdose Executive Role

**Alignment:** standardized system to help us achieve the goals dictated by the 2022 Executive Order expanding the Governor's Overdose Task Force, providing guidance to the Opioid Settlement Advisory Committee, the statutory authority of EOHHS in legislation, and both RI 2030 and the Secretariat's strategic goals.

## EOHHS Statutory Authority

[RIGL § 42-7.2-5](#)

Executive Office of Health and Human Services (EOHHS) must ensure the effective oversight and coordination of state-administered health and human services and use objective data for evaluating health and human services policy goals, resource use, and outcome evaluation.

## Overdose Executive Authority

[Executive Order 22-35](#)

Overdose PULSE assists with meeting the Executive Order's directive of aligning strategic planning, identifying gaps, tracking progress in combating the crisis, ensuring community engagement, and sharing data through clear goals and metrics on public dashboards across multiple agencies and partners.

# Overdose Task Force

## Governor's Overdose Task Force

Leadership

Membership

Community

State  
Co-Chairs

Community  
Co-Chair

State and  
Member  
Agencies

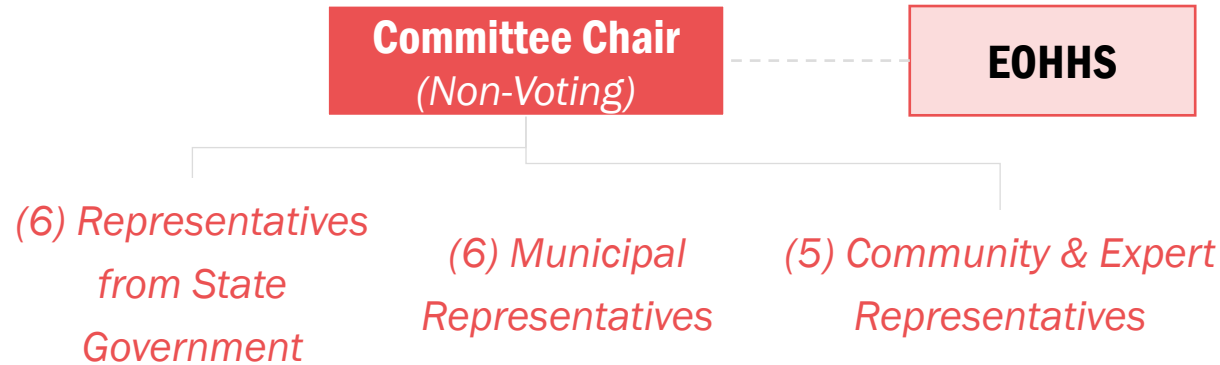
Expert  
Advisors

People with Lived  
Experience

Public  
Attendees

9 Community Co-Chaired Workgroups

# Overview of the Opioid Settlement Advisory Committee



- The Opioid Settlement Agreement’s Memorandum of Understanding between the State of Rhode Island and the Participating Cities and Towns established the Opioid Settlement Advisory Committee that advises the Executive Office of Health and Human Services (EOHHS) on usage of the funds allocated as the State portion (80% of total) over 18 years.
- The Committee reviews priorities established in each settlement (as well as State and community partner priorities) and generates a report for the EOHHS Secretary.
- This report summarizes the Committee’s recommendations for how EOHHS should allocate funds in upcoming fiscal year budgets. The Governor and the State Legislature ultimately approve or amend the final budget.
- The makeup of the Committee ensures that the State and the Participating Cities and Towns have equal input into the recommendations for use of the state allocation of funds. EOHHS provides administrative support.

# Rhode Island's Approach to Overdose Response Alignment

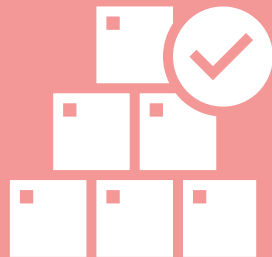
## Strategic Framework Development and Continuous Alignment



Governance,  
Community Engagement,  
and Transparency



Programs, Activities,  
and Investments



Data Capacity,  
Surveillance, and  
Evaluation



Equity Focus, Disparity  
Reduction, and  
Emergent Response

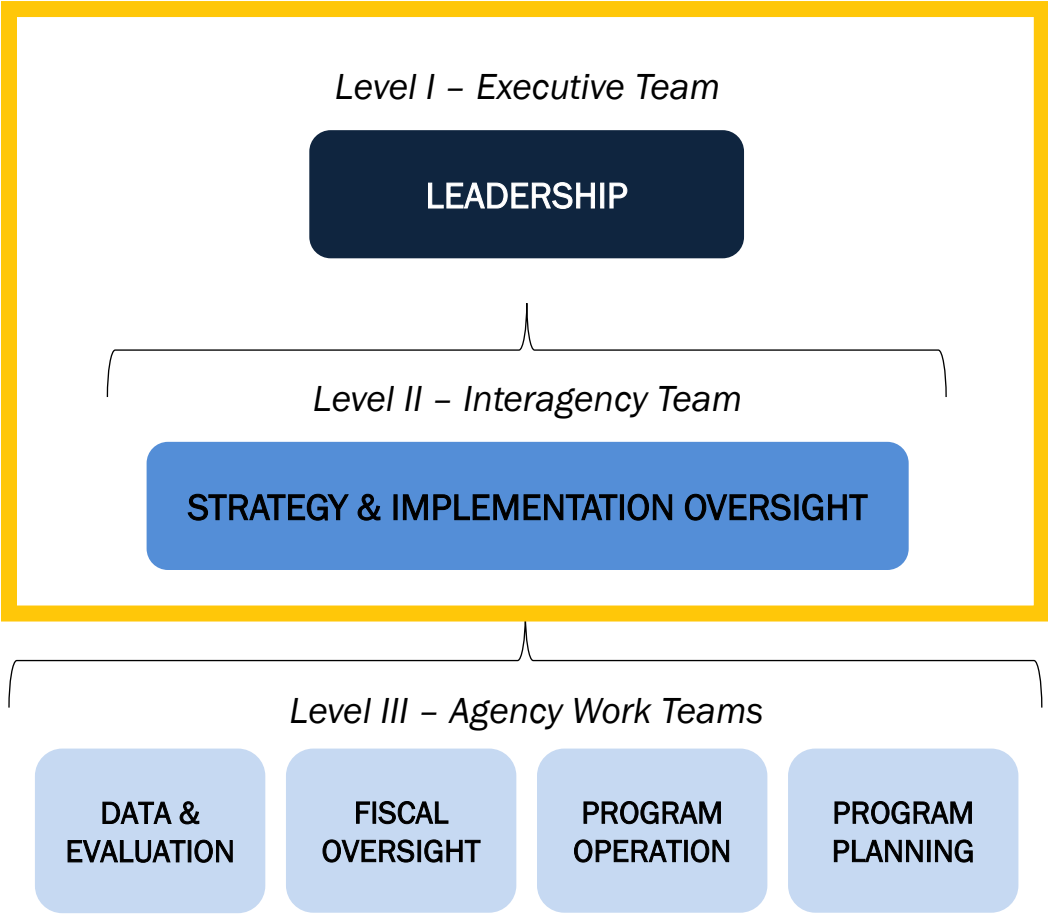


Sustainability,  
Stewardship, and  
Communications

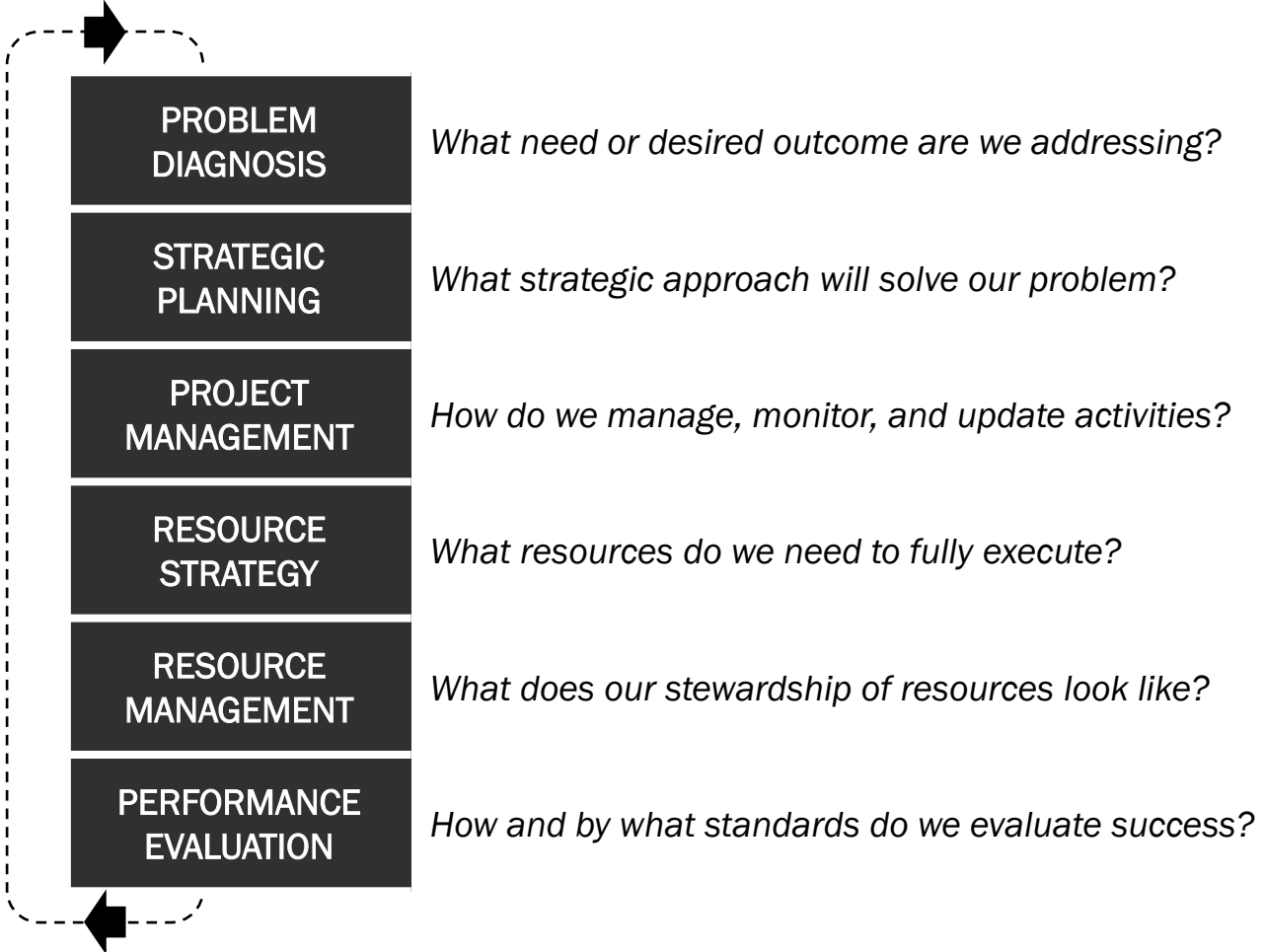


# Leveraging Overdose Governance Structures

## OVERDOSE GOVERNANCE REVIEW



## ACCOUNTABILITY BEST PRACTICES



# Governor's Overdose Task Force Funding Recommendations Process

In February, the Task Force Director facilitated conversations with Work Group Co-Chairs to complete recommendations slides for the next fiscal year

## GOTF Working Group Co-Chairs

- In February, GOTF Work Group co-chairs are provided with template slides and a copy of the Strategic Plan to collect community input for recommendations. They were asked to select 3-5 activities and focus on sustainability, evidence-based strategies, and strategic plan alignment.

## Work Group Recommendation Process

- Each work group used the months of March and April to collect recommendations, either during their meetings and/or through surveys. The Rescue and Harm Reduction work groups coordinated and combined their recommendations.

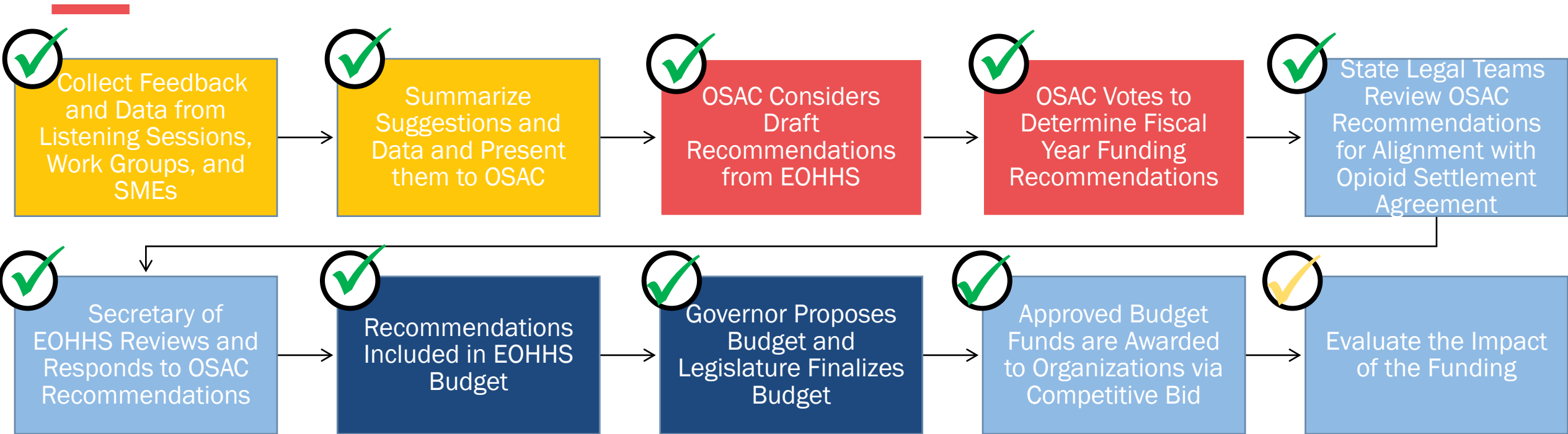
## GOTF Community Conversation Meeting

- The May GOTF meeting is a community conversation with breakout sessions to reflect eight areas of focus: Racial Equity, SDOH (Housing and basic needs); SDOH (family); Emerging Issues, Prevention, Harm Reduction, Treatment and Recovery.

## Report Outs

- In May and June, the Task Force Director reports out the key takeaways from the May Community Conversation breakout sessions with the work group co-chairs and Task Force for final feedback.

# Process for Aligning Investments to Overdose Strategies



State Budgeting Process  
Fully Explained on Next Slide

Responsibility by Color Code	
	EOHHS
	Opioid Settlement Advisory Committee
	Governor's Overdose Task Force
	State Budgeting Process

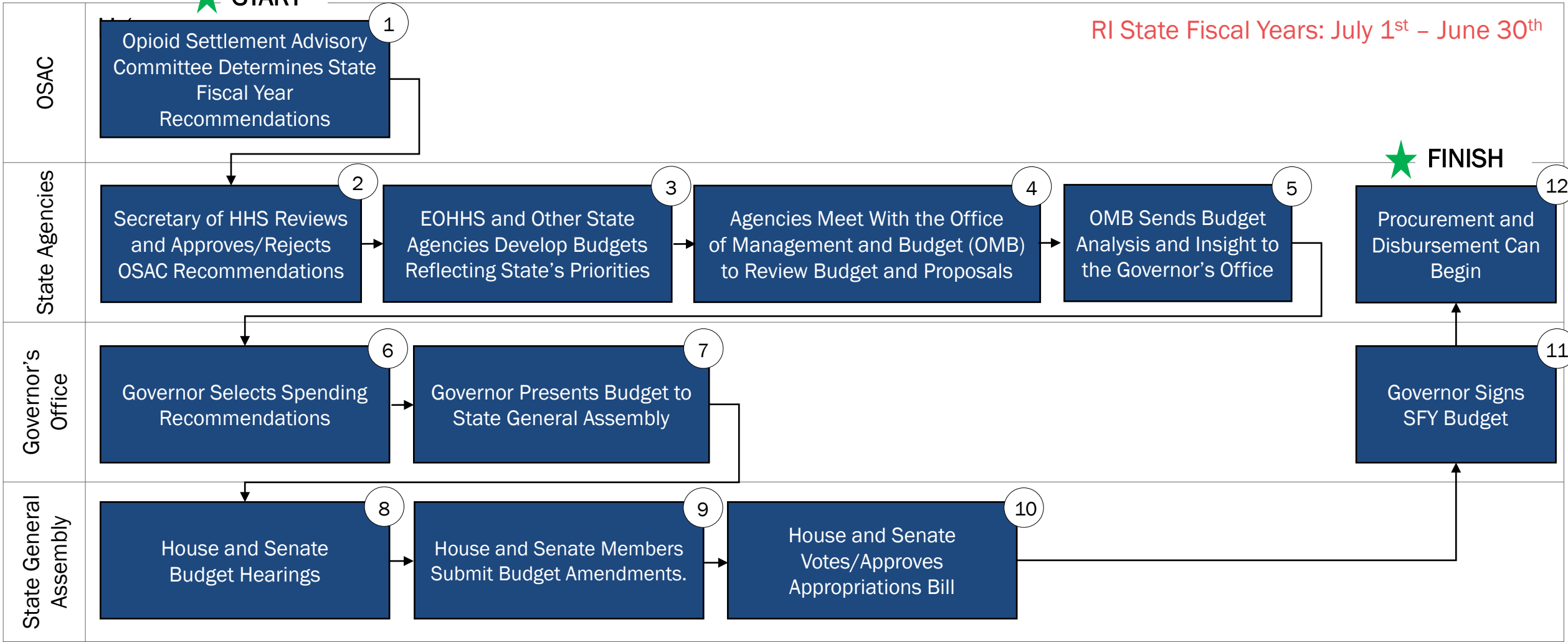


# State Budgeting Process for Task Force Recommendations

RI State Fiscal Years: July 1<sup>st</sup> – June 30<sup>th</sup>

★ START

★ FINISH

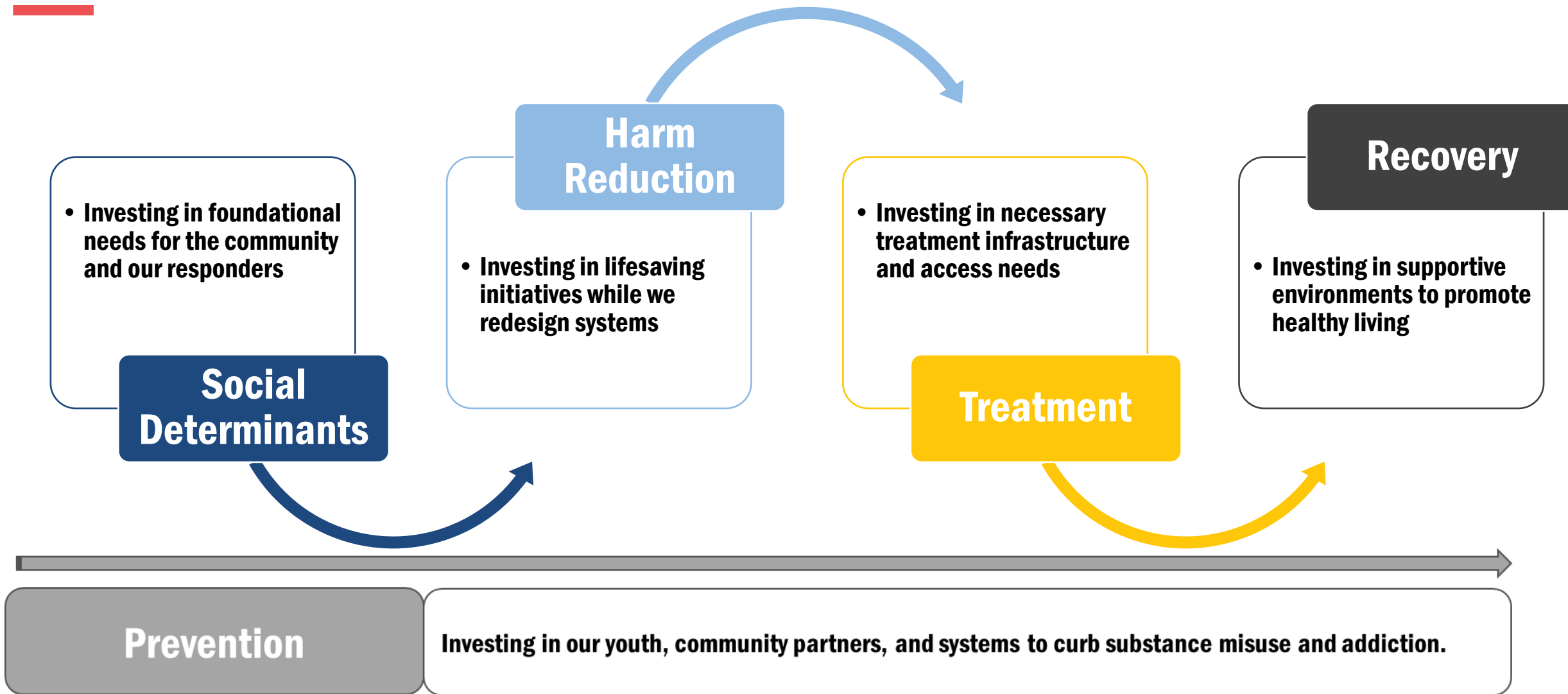


(NOTE: General Assembly may increase, decrease, alter, or strike out any item in the budget.)

# Strategic Plan and Targets

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# Supporting People Through the Continuum of Care



# Guiding Principles for Decision-Making

To guide decisions for use of these funds, the Committee agreed to:

<b>Spend money to save lives.</b>	It may be tempting to use the dollars to fill holes in existing budgets rather than expand needed programs, but the Committee should use the funds to add to rather than replace existing spending.
<b>Use evidence to guide spending.</b>	At this point in the overdose epidemic, researchers, clinicians, and community partners have built a substantial body of evidence demonstrating what works and what does not. States and localities should use this information to make funding decisions.
<b>Invest in youth prevention.</b>	Support children, youth, and families by making long-term investments in effective programs and strategies for community change.
<b>Focus on racial equity.</b>	This process should be guided by public health leaders with the active engagement of people and families with lived experience, clinicians, as well as other
<b>Develop a fair and transparent process for funding recommendations.</b>	This process should be guided by public health leaders with the active engagement of people and families with lived experience, clinicians, as well as other key groups.
<b>Consider future sustainability in all recommendations.</b>	Although there may be some on-time funding recommendations, the Committee should consider the financial sustainability of all investments and try to plan for investments that can be sustained long-term.

*\*The first five items are paraphrased and summarized from the Johns Hopkins' "The Principles To Guide Jurisdictions In The Use Of Funds From The Opioid Litigation, We Encourage The Adoption Of Five Guiding Principles".*

# Operationalizing Equity Across All Overdose Response:

- The recent 2023 Fatal Overdose Data and other indicators reveal there are significant disparities within communities related to: (1) overdose outcomes, (2) access services, and (3) the drivers of substance use and substance use disorders. These disparities are driven by structural racism and other historical and structural systems of oppression and oftentimes are place-based.
- *The Equity Expectations noted below* were developed based on feedback from EOHHS and other state agency staff with subject-matter expertise and training in equity initiatives, as well as informed by a cursory literature review and key informant interviews with other grant makers.
- These principles could be leveraged as a starting point to ensure continued progress towards our goals:

**Transparent Approach**

- Public Shared Disparity Data
- Share Evidence Base
- Multiple Pathways for Community Feedback
- Investment Equity Assessment and Quality Improvement

**Equity-Focused Processes**

- OSAC/ODTF Member Equity Training
- Recommendations in Multiple Language
- Equity Impact Statements for Recommendations

**Equitable Procurement**

- Accessible Process
- Equity Statement in Procurements
- CLAS and ADA Compliance and Training
- Lived Experience on Review Committees
- Equity Scoring Criteria

**Capacity Building**

- Indirect Rate Support
- Equity Workplans in Contracts
- Equity Reporting
- Required Equity-Focused Training

**Shared Communication**

- Equity Standards for Meetings
- Value Alignment (Voice, Choice, Equity)
- Plain Language Use
- State/Partner Communications Staff Training

# Overdose Strategic Plan (Roadmap)

Color Code Key:	
Cross-Cutting Components	■
Core Pillars	■

**I. Ensuring Racial Equity and Eliminating Disparities**

**II. Building Strong Governance and Community Engagement**

**III. Expanding Data Capacity and Surveillance**

**IV. Addressing the Social Determinants of Health**

**1. Reinforcing Comprehensive Prevention**

**2. Strengthening Harm Reduction and Rescue**

**3. Increasing Investment in Treatment**

**4. Supporting Recovery**

Cross-Cutting Components

Core Pillars

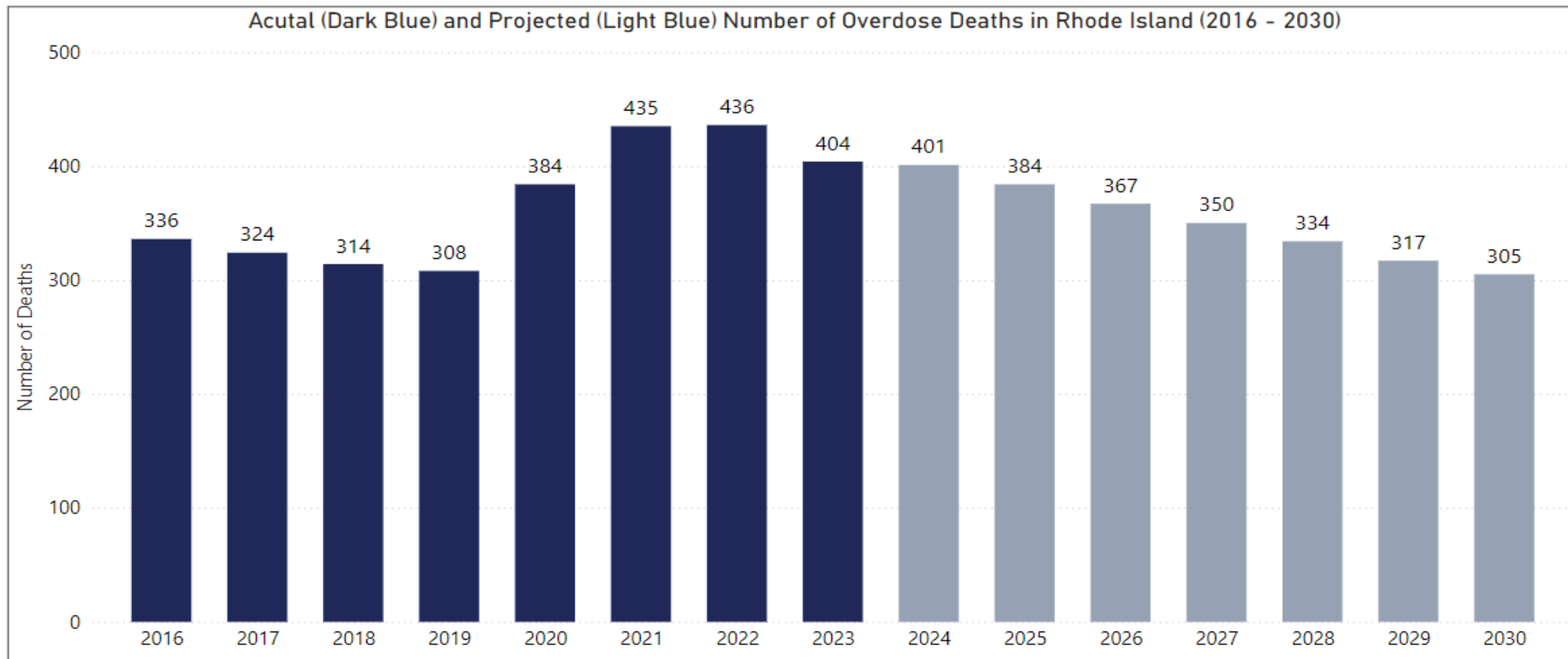
# Overarching Overdose Targets



# Overdose Deaths in Rhode Island (2016 – 2030)

**National Healthy People 2030 Goal: By 2030, return fatal overdose rates to 2019 levels. The RI Healthy People 2030 goal below would be slightly more rigorous (305 deaths) and aim for a 30% reduction (slightly below 2019 levels).**

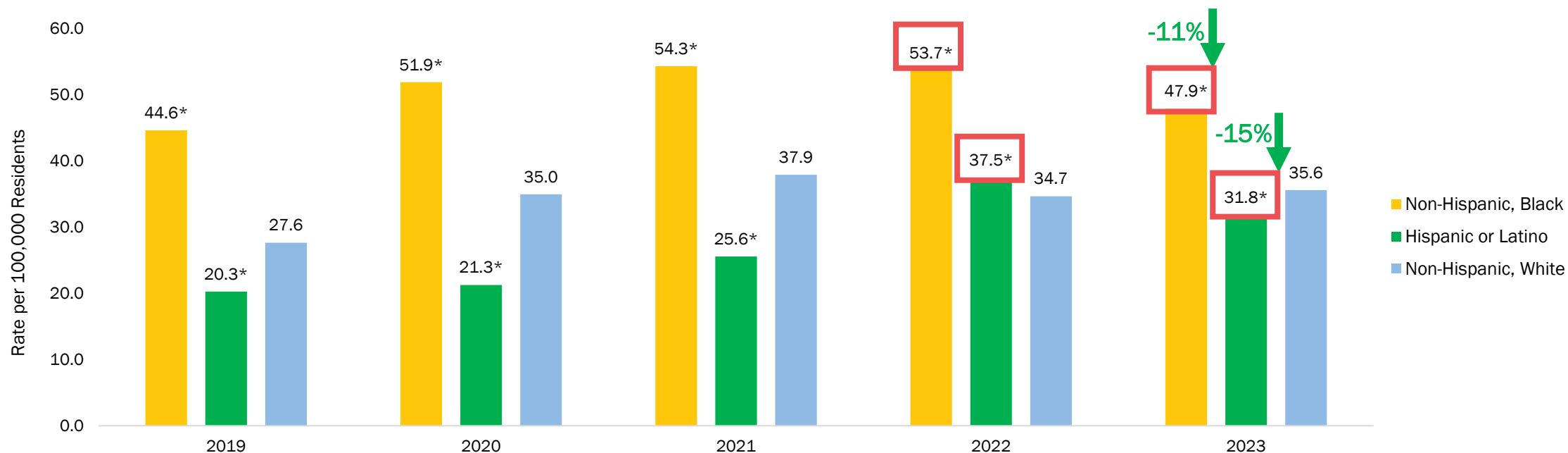
**Total deaths fell significantly below Projection for 2023 (417 fatalities) with 404 fatalities a 7.3% reduction compared to 2022.**





# Overdose Rate by Race and Ethnicity Among Rhode Island Residents, January 2019 – December 2023

From 2019 to 2023, **non-Hispanic, Black** Rhode Islanders continued to have the highest rate of fatal overdose compared to other race and ethnicity groups. From 2021 to 2022, the rate of fatal overdose among **Hispanic or Latino** Rhode Islanders increased by about 50%. In 2023, the rate of overdose **decreased** among **non-Hispanic, Black** and **Hispanic or Latino** Rhode Islanders.



Source: Office of State Medical Examiners (OSME), Rhode Island Department of Health (RIDOH). Data updated as of June 21, 2024. Prepared by Heidi Weidele.

Note: Data reflect accidental drug overdose deaths and do not include suicides, homicides, or undetermined deaths. Population denominator based on CDC WONDER single-race population estimates for each year accessed April 16, 2024; 2022 estimate applied for 2023 rates. Data limited to accidental drug overdose deaths occurring in Rhode Island among Rhode Island residents. Due to RIDOH's Small Numbers Reporting Policy, fatal overdoses among decedents of unknown or additional race and ethnicity are not shown. All other racial and ethnic groups include people who identify as non-Hispanic ethnicity or have unknown ethnicity. Counts less than five are suppressed. \*Please use caution when interpreting rates marked by an asterisk.



# Ensuring Transparency

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# Public Dashboard

Learn About Rhode Island's Opioid Settlement



Get Help

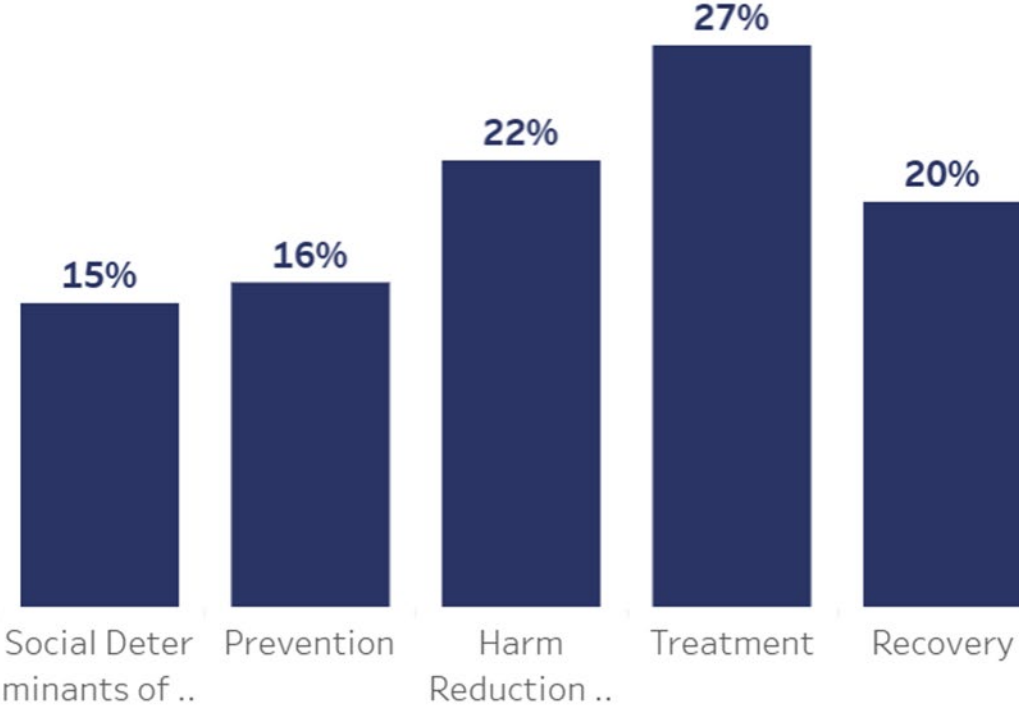
About Learn More Prevent An Overdose See The Data Find Resources

### Languages

- + Social Determinants of Health & Prevention
- + Rescue & Harm Reduction
- + Treatment
- + Recovery

## Opioid Settlement Investments by Effort Area and Year, FY2025

Hover over or select an effort area to learn more about the investment. All efforts include cross-cutting investments in Governance, Data, and Racial Equity.



# Thank you!

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For more information on Overdose Prevention  
Work, please visit: [Prevent Overdose RI](#)

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