



STATE OF MICHIGAN
DEPARTMENT OF HEALTH AND HUMAN SERVICES
LANSING

RICK SNYDER
GOVERNOR

NICK LYON
DIRECTOR

September 6, 2018

Re: Increase in Funding to Support Syringe Service Programs

Dear Local Public Health Officials,

The Michigan Department of Health and Human Services (MDHHS) has been working to identify avenues to increase state-wide harm reduction capacity to help reduce the burden of infectious disease transmission related to the opioid epidemic. Governor Snyder's Prescription Drug and Opioid Abuse Commission has supported these efforts in a memo to the Michigan Association of Local Public Health on July 12, 2018:

Syringe service programs help reduce the spread of infectious disease including Hepatitis A, Hepatitis B, Hepatitis C, and HIV. In addition to providing sterile syringes, syringe service programs provide vaccinations, referrals to treatment, and testing for infectious diseases. We believe that the concerted efforts by your members will help to reduce the impact of infectious disease, increase the number of people in treatment, and will save lives.

As you may know, Michigan law exempts persons from drug paraphernalia crimes if the items are distributed by a person authorized by a state or local government agency to prevent the transmission of infectious agents (Public Health Act 368 of 1978, 333.7457 Applicability of MCL 333.7451 to 333.7455). Indeed, several Syringe Service Programs (SSPs) have operated in Michigan for years. However, the existing programs are not sufficient to cover the entire State.

In June of 2016 MDHHS appealed to the Centers for Disease Control and Prevention (CDC) to obtain authorization to redirect federal funds towards SSPs. CDC approved MDHHS's request:

After careful review of your submission, CDC concurs that Michigan is experiencing an increase in viral hepatitis or HIV infections due to injection drug use. The submitted data provide sufficient evidence to determine a need for SSPs within the jurisdiction... This notice may be used by state, local, territorial, or tribal health departments or eligible HHS-funded recipients to apply to direct federal funds to support SSPs.

MDHHS recently obtained approval from the Substance Abuse and Mental Health Services Administration (SAMHSA) to redirect federal dollars for SSP activities. Because funding was not sufficient to allocate dollars to every local health agency, a data driven approach was used to prioritize the most vulnerable and impacted jurisdictions.

Your local health jurisdiction was identified as particularly at risk of infectious disease transmission associated with the opioid epidemic. Your health department will be receiving \$50,000 on November 1, 2018 to increase harm reduction services in your jurisdiction. These funds may not be used to purchase drug preparation or injecting equipment; however, health departments may otherwise choose how these dollars are utilized for supporting new SSP sites or enhancing capacity at existing SSP locations. MDHHS and our partners are available to provide technical assistance to new programs. We will schedule a state-wide call to discuss further details about this initiative.

Sincerely,

A handwritten signature in black ink, appearing to read "J. R. Coyle". The signature is fluid and cursive, with the first name "Joseph" and last name "Coyle" clearly distinguishable.

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cc Larry Scott (MDHHS)
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