



STATE OF MICHIGAN

DEPARTMENT OF HEALTH AND HUMAN SERVICES

LANSING

GRETCHEN WHITMER
GOVERNOR

ELIZABETH HERTEL
DIRECTOR

Michigan Opioids Task Force Meeting

January 24, 2024 | 10:15 a.m. – 12:00 p.m.

S. Grand Building, 333 S. Grand Avenue, Lansing, MI 48933 - Conference Room L

Members Present:

Steve Alsum, Region 3
Dr. Natasha Bagdasarian, Chair
Elizabeth Browne, EGLE
Bradley Casemore, Region 4
Col. James Grady II, MSP
Karen Gyger, DIFS
Heather Hosey, LARA
Kristen Jordan, MDHHS
Helen Klingert, Region 9
Brian Love, DMVA

Darlene Owens, Region 7
Samuel Price, Region 5
Kristie Schmiede, Region 8
Marty Kay Sherry, MDOC
Kimberly Shewmaker, Region 10
Andrew Smith, Michigan Supreme Court
Greg Toutant, Region 1
Kim Trent, LEO
Matthew Walker, AG
Sue Winter, Region 2

*Karen Gyger, DIFS, arrived at 10:28 a.m., after voting on administrative duties took place.

*Amanda Scott, Region 6, arrived at 10:46 a.m., after voting on administrative duties took place.

*Elizabeth Browne left at 11:00 a.m., prior to voting on the strategic framework.

Members Absent:

Elivia Jankowski, MDE

MDHHS Staff Present:

Katie Abraham, Seth Eckel, Brandon Hool, Haley Kehus, Rita Seith, Jared Welehodsky

Reported Guests:

Audrey Harvey, Ben Larson, Sarah Lyon-Callo, Christin Nohner, Olga Shilo, Tommy Stallworth, Cornelius Williams

I. Call to Order & Roll Call

- Chair Bagdasarian called the meeting to order at 10:15 a.m. and asked Jared Welehodsky to take roll call. Jared confirmed a quorum is present.
- **Approval of the November 1, 2023, Meeting Minutes:** Chair Bagdasarian directed attention to the proposed meeting minutes from November 1, 2023, meeting and asked if there were any requests for changes. **Darlene Owens motions to approve, supported by Helen Klingert.** There was no further discussion and the Chair asked for a vote. The motion prevailed with no opposition. The November 1, 2023, Meeting Minutes were approved.
- Chair Bagdasarian reminded everyone that the charges to the Task Force from Executive Order 2022-12 and the established guiding principles are attached to the agenda and will be referred to in future meetings.
- Katie Abraham, MDHHS Staff, referred to the 2024 proposed meeting times for Task Force meetings, indicating that the proposed days and times are subject to change, and an update will be provided if changes are made.

II. Subcommittee Updates

- **Recommendations Subcommittee: Kim Trent** presented a slide (see below) explaining the review process in the first Recommendations Subcommittee meeting on November 20, 2023. The group examined the recommendations presented by the Racial Equity Work Group (REWG) in the previous meeting. Overall, additional information was needed, and some recommendations are already in progress. The Recommendations Subcommittee will continue to remain as an ad hoc subcommittee.
 - **Q:** Steve Alsum asked when will the feedback from the subcommittee be provided to the REWG and how will this be incorporated if the group is dissolved?
 - Chair Bagdasarian indicated that the group is not dissolved and turns the floor over to Tommy Stallworth to discuss the next agenda item, the REWG.
- **REWG Update: Tommy Stallworth** suggested beginning with introductions since new Task Force members were present. Introductions were conducted in round-robin format. Tommy Stallworth provided further explanation about the REWG, stating that the Task Force needed some of the recommendations to be further defined, and that the racial equity work will be embedded in all four pillars of Michigan's Opioids Framework. The

work will continue in the pillar subcommittees comprised of Task Force members, REWG members, and MDHHS staff. Further discussion and deliberation took place regarding the role of the REWG within the Task Force moving forward.

- **Steve Alsum called for a motion to invite REWG members to the next Task Force meeting to discuss how they would like to see the Task Force proceed with REWG involvement, supported by Amanda Scott.** Chair Bagdasarian opened for discussion.
 - **Q:** Sue Winter asked the group to clarify the purpose of asking the REWG to come.
 - Chair Bagdasarian seconded this comment and reinstated the goal of the Task Force is to have impact on reducing overdose deaths.
 - Tommy Stallworth clarified that he and Chair Bagdasarian held a separate meeting prior to the Task Force meeting to discuss questions and concerns with REWG members.
 - **Sam Price suggested an amendment to the motion:** To hold a virtual meeting short of quorum with REWG members before the next Task Force meeting to discuss the charter that the REWG will be operating under, and to clarify the group's role. A compromise will then be decided on at the next Task Force meeting. **The amendment is accepted and supported by Steve Alsum.** Chair Bagdasarian asked for a vote. **The motion to schedule a virtual meeting short of quorum with REWG members before the next Task Force meeting prevailed with no opposition.**
- **Work Plan Subcommittee Update: Sam Price** presented slides (see below) updating the Task Force on the goals, framework, and metrics established in the subcommittee meetings on December 6, 2023, and on January 18, 2024.
 - Chair Bagdasarian elaborated on the three iterations of the framework slides and explained that this framework is a starting point to be further reviewed in the pillar subcommittees.
- **Pillar Subcommittees: Chair Bagdasarian** explained that in these subcommittees, members will conduct an analysis of the goals and metrics identified in the strategic framework. These groups are to prioritize the outcome goals at the top of each pillar and review recommendations

as needed. Further discussion took place regarding the tasks of the subcommittees.

- Sam Price suggested having the Work Plan Subcommittee establish a framework to ensure consistency among each pillar subcommittee's evaluation process.
- Chair Bagdasarian invited Task Force members to volunteer to lead each pillar subcommittee along with an MDHHS staff member.

III. MDHHS Data Presentation

- **Chair Bagdasarian** notified the Task Force that there are nine minutes remaining in the meeting and asked for a high-level data overview. Chair Bagdasarian moved the full data presentation with MDHHS epidemiologists to a virtual webinar to be offered prior to the next Task Force meeting.
- **Rita Seith and Haley Kehus**, MDHHS opioids epidemiologists, gave an overview of what to expect in the data webinar. They informed the Task Force that they have gathered data to coordinate with each of the metrics identified in the pillar framework.
 - **Q: Darlene Owens** asked about incorporating data from the PIHPs.
 - Chair Bagdasarian agreed with this point and encouraged the data team to look into this.

IV. Next Steps

- **Chair Bagdasarian called for a motion to develop consensus about the strategic framework presented, and to move forward with this work. Kristie Schmiede motioned to accept, supported by Kim Shewmaker.** Chair Bagdasarian opened the floor for further discussion; there was none. **The motion to move forward with the strategic framework prevailed.**
- Chair Bagdasarian reminded Task Force members to email Katie Abraham with their preferences for joining the pillar subcommittees.

V. Stakeholder and Public Comment

- Chair Bagdasarian asked if there were any comments from the public.

- Cornelius Williams identified as a member of the public and REWG. He shared his concern regarding the conversation that took place between Task Force members about the REWG. He requested Steve Alsum's original motion (see section II) be recorded in the meeting minutes. He expressed interest in joining the Harm Reduction Pillar Subcommittee. He indicated that the REWG will want to remain in these conversations moving forward.
- No additional public comments were made.

VI. Adjourn

- With no further business to discuss before the Task Force, Chair Bagdasarian asked for a motion to adjourn. **The motion to adjourn was made by Amanda Scott and supported by Darlene Owens. The motion to adjourn prevailed with unanimous support.** Chair Bagdasarian adjourned the meeting at 12:01 p.m.



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AGENDA

- I. Call to Order & Welcome – Chair Bagdasarian
 - a. Roll Call
 - b. Approve Meeting Minutes: November 1, 2023
 - c. 2024 Proposed Meeting Schedule – Katie Abraham

- II. Subcommittee Updates
 - a. Recommendations Subcommittee – Kim Trent
 - b. REWG – Tommy Stallworth
 - c. Workplan Subcommittee – Sam Price
 - d. Pillar Subcommittees – Chair Bagdasarian

- III. MDHHS Data Presentation – Rita Seith, Haley Kehus
 - a. Questions & Discussion

- IV. Next Steps – Chair Bagdasarian
 - a. Metrics discussion and consensus
 - b. Volunteers for pillar subcommittees
 - c. Presentation from academic partners

- V. Stakeholder and Public Comment – Chair Bagdasarian

- VI. Adjourn

Key Excerpts from Executive Order 2022-12

Charge to the Task Force

- (a) The Task Force shall act as a Government Participation Mechanism for purposes of any opioid-related bankruptcy or settlement in which a government participation mechanism is needed to effectuate Michigan's collection of the claim.
- (b) The Task Force shall provide recommendations to the State of Michigan, Director of the Department, and the heads of other departments or agencies, and coordinate activities among departments and agencies.
- (c) The Task Force shall research, identify, recommend, and implement response actions *to* the opioid epidemic in Michigan, which may include the following:
 - (1) Identify and evaluate the epidemic's root causes and contributing factors in Michigan, and the effectiveness of response actions on all levels that have been undertaken or are currently being undertaken. Develop strategies for supporting or otherwise improving the efficacy of those response actions.
 - (2) Identify and evaluate the nature and scope of the epidemic's impact on various locations and communities throughout the state and what response actions would be most effective in helping each of those impacted areas. Develop strategies for implementing those response actions.
 - (3) Identify and evaluate what financial and other resources are available on all levels to combat the epidemic in Michigan. Develop strategies for securing, coordinating, augmenting, and deploying those resources.
 - (4) Develop strategies for increasing public awareness of the epidemic in Michigan, its causes and effects, the resources available *to* those afflicted by it, and the actions that can be taken to combat it.
 - (5) Develop routine communication and information-sharing protocols between members of the Task Force and stakeholders on all levels.
 - (6) Perform outreach to ensure all stakeholders in impacted areas are informed, educated, and empowered. Stakeholders will include, but are not limited to, residents, community members, other partner organizations, tribal governments, local government officials, and other elected officials representing the impacted areas.

- (7) Perform outreach to the general public regarding the epidemic and the work of the Task Force.
- (8) Create measurable goals and objectives along an established timeline.
- (9) Recommend changes in Michigan law relevant to combating the epidemic.
- (10) Provide other information and advice and perform other duties as requested by the director of the Department or the governor.

(d) The Task Force shall report regularly to the governor on its activities.

***Full Executive Order available at:**

[EO-202212-Opioids-Task-Force-220928-final-signed.pdf \(michigan.gov\)](#)

Opioids Task Force Guiding Principles

What are we trying to do?

Equity at the core

- Prioritize equity in all aspects of programming and operations
- Address racial disparities in overdose deaths and access to services to achieve improved outcomes.

Maximize Impact

- Monitor and track program implementation and development
- Identify over-arching outcome/impact measures to show success

How do we get there?

Data-Informed Decisions

- Utilize available data and leverage data sharing agreements to drive strategic decisions
- Ensure evidence-based practices guide our actions

Communicate to improve trust

- Communicate openly, timely, and consistently to enhance trust
- Ensure spending reports are clear and accessible; show where and how funds are being spent

Over-arching goal: Reduce overdose deaths and reduce racial disparities

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Recommendations Subcommittee 11/20/23 Meeting Recap

12 high-level recommendations analysis

- Will this reduce disparities? Data presented?
- Is this already being done?
- Is it feasible? (Identify barriers)
- How will we implement this?
- Who has the authority to implement this?
- When will this be implemented?
- Action: Advance to Task Force, additional information required, or already in progress.
- Suggested revisions

Michigan Opioids Task Force: Work Plan Subcommittee

Meeting Recap: December 6, 2023 & January 18, 2024



Hopkins/Bloomberg Spending Principles

Principle 1: **Spend money to save lives**

- Establish a dedicated fund
- Supplement rather than supplant existing funding
- Don't spend all the money at once
- Report to the public on where the money is going

Principle 2: **Use evidence to guide spending**

- Direct funds to programs supported by evidence
- Remove policies that may block adoption of programs that work
- Build data collection capacity

Principle 3: **Invest in youth prevention**

- Direct funds to evidence-based interventions

Principle 4: **Focus on racial equity**

- Invest in communities affected by discriminatory policies
- Support diversion from arrest and incarceration
- Fund anti-stigma campaigns
- Involve community members in solutions

Principle 5: **Develop a fair and transparent process for deciding where to spend the funding**

- Determine areas of need
- Receive input from groups that touch different parts of the epidemic to develop a plan
- Ensure that there is representation that reflects the diversity of affected communities when allocating funds

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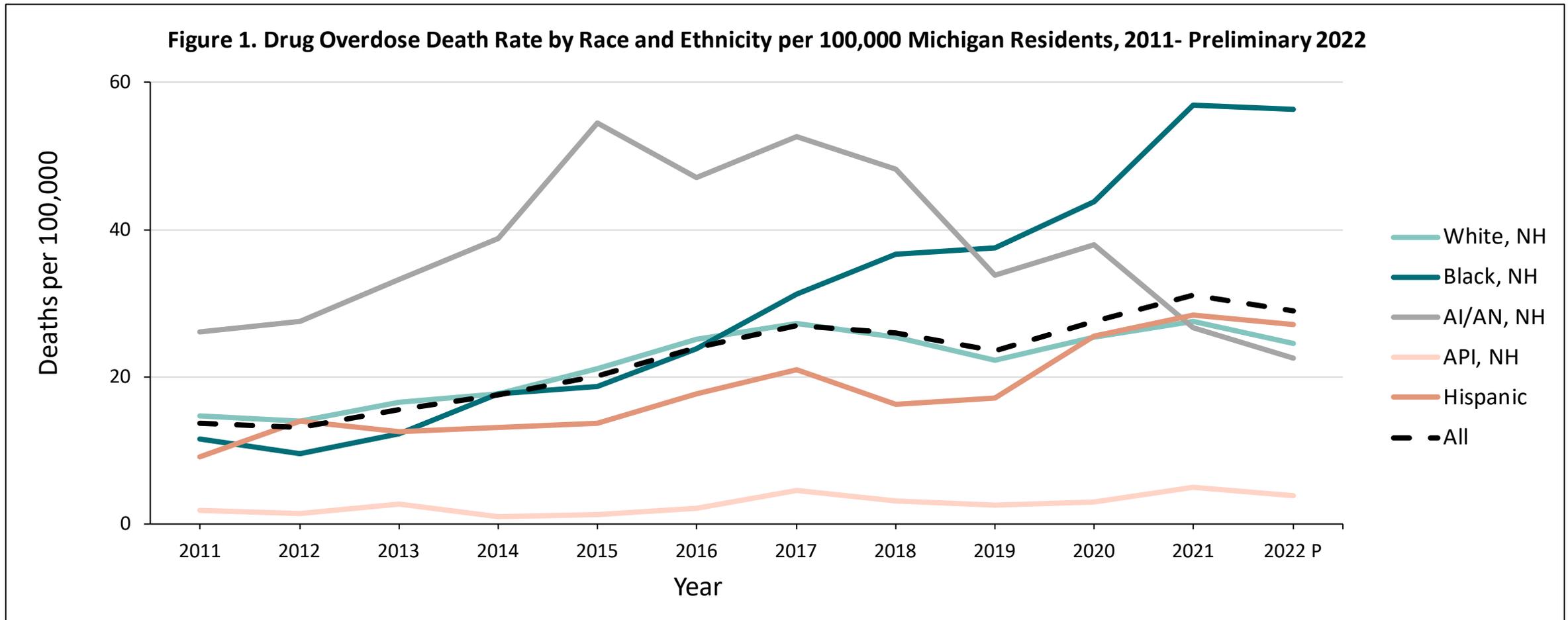
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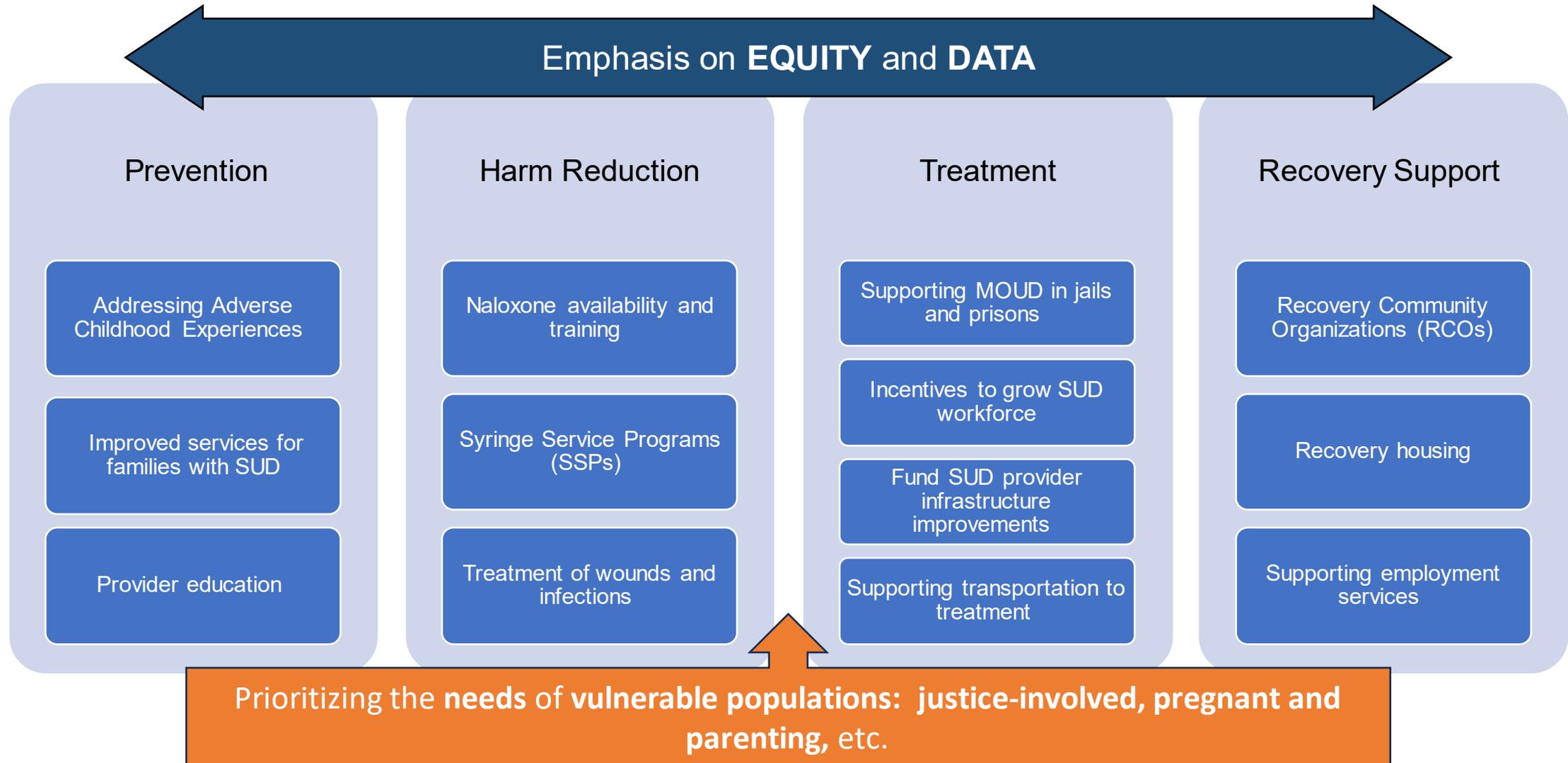
Data Review: Racial Disparities in Overdoses



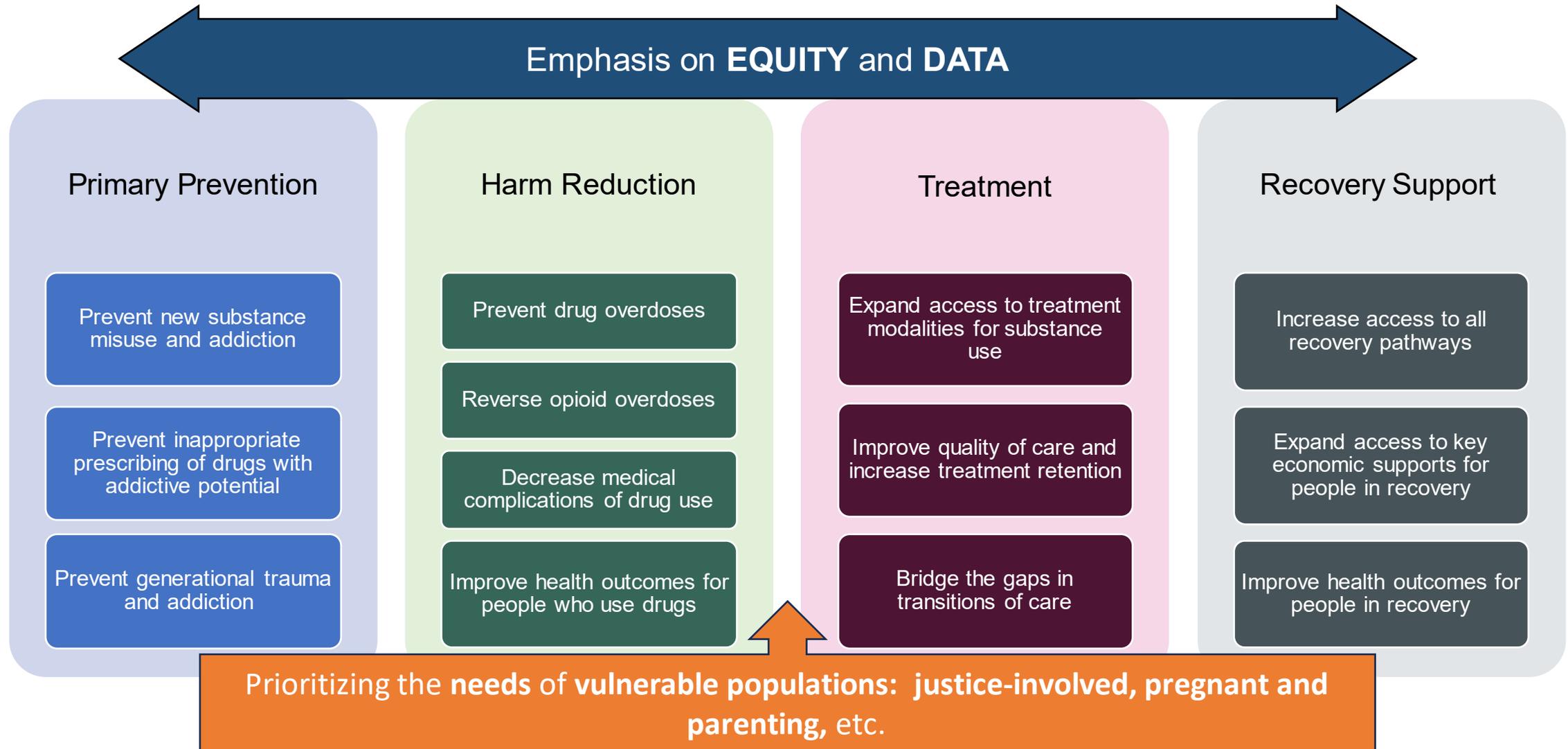
Source: 2011-2021 Mortality: Finalized Michigan Resident Death files, Office of Vital Records and Health Statistics, MDHHS.

2022 P: Provisional Michigan Resident Death files, Office of Vital Records and Health Statistics, MDHHS, provided for the MiVDRS and SUDORS projects.

Previous Opioid Response Framework (programs)



Substance Use Response Framework (goals)



Substance Use Response Framework (Measuring Progress)

Emphasis on **EQUITY** and **DATA**

All metrics - overall improvement and reduction in racial disparities and health outcomes

Primary Prevention
Decreased rates of addiction (survey)

Prevent new substance misuse and addiction – increase participants in prevention programs

Prevent inappropriate prescribing of drugs with addictive potential – all prescribers using MAPS

Prevent generational trauma and addiction – Fewer unmet needs among pregnant persons

Harm Reduction
Reduction in overdose fatalities (and repeat overdoses)

Prevent drug overdoses – increase distribution of fentanyl / xylazine test strips

Reverse opioid overdoses – increase naloxone distribution

Decrease medical complications of drug use – increase utilization of SSP

Improve health outcomes for people who use drugs – prevalence of co-occurring conditions (survey)*

Treatment
Reduction in those needing but not receiving Treatment (survey)

Expand access to treatment modalities for substance use – increase proportion of 24-hr Tx

Improve quality of care and increase treatment retention – increase quality of care metrics (survey)

Bridge the gaps in transitions of care – increase SUD programs offering transitional services

Recovery Support
Reduction in those needing but not receiving recovery supports (survey)

Increase access to all recovery pathways – Increase access to harm reduction & treatment services

Expand access to key economic supports for people in recovery – expand social services, housing, employment training

Improve health outcomes for people in recovery – prevalence of co-occurring conditions (survey)*

Prioritizing the needs of vulnerable populations: justice-involved, pregnant and parenting, etc.

Defining Success & Next Steps

- Success (outcome measures)
 - Move MI to the top-performing quartile in terms of state rankings of overdose deaths by 2026
 - Eliminate racial disparities in overdoses by 2030
- Measuring Progress (process and outcome measures)
 - Annual improvement in process measures – (overall and reduction in racial disparities)
 - Improvement in outcome measures by 2026 – (overall and reduction in racial disparities)
- Subcommittee for each pillar
 - Focus on outcome measure
 - Prioritize & further define process measures (adjust if necessary)
 - Set measurable targets
 - Provide timeline