

Budget for One Minnesota



ADDRESSING THE OPIOID EPIDEMIC

Minnesota’s crisis with opioid addiction is devastating families and communities across the state and country. Opioids account for more overdoses than any other drug. American Indians are experiencing the effects of the opioid epidemic far more than other Minnesotans. Most Minnesotans who enter treatment complete it and show considerable improvement. However, it often takes 25 days or more to access substance abuse treatment.

In 2017, 422 Minnesotans died from an opioid overdose and 783 died by suicide. These numbers represent a 640 percent increase in opioid deaths and 79 percent increase in suicide deaths since 1999. Unfortunately, many communities are disproportionately impacted by both overdose and suicide deaths.

Recognizing the harmful impact these preventable deaths have on Minnesotans, the Governor’s budget supports programs within education, health care and community prosperity. For prevention to be most effective, research demonstrates that it needs to be comprehensive, community-based and culturally specific.

TIMELY ACCESS TO APPROPRIATE TREATMENT



Promote Culturally Competent Services

Conventional behavioral health interventions have not yielded the same outcomes within the American Indian population as they have for others. However, traditional healing for American Indians has been very successful. Governor Walz’s proposal focuses on improving access, coordination and referral processes for traditional healing, and includes a multi-generational, multi-disciplinary approach to mental health and substance use disorder treatment.



Connect Patients to Treatment

Effective screening can get people the substance abuse treatment they need sooner. The Walz-Flanagan proposal expands the use of Screening, Brief Intervention, and Referral to Treatment (SBIRT), a screening tool used by health care professionals to allow access to immediate short-term support while connecting individuals with longer-term treatment services.

STRATEGIC RESPONSE TO THE OPIOID CRISIS



Create an Opioid Steward Advisory Council

Addressing the opioid addiction and overdose epidemic requires expert vision and guidance. Governor Walz’s proposal includes the creation of an advisory council to provide strategic oversight on the use of funds collected by the opiate stewardship fee. The council will review local, state and federal initiatives and funding related to prevention, education, treatment and services for individuals and families who are impacted by opioid abuse. With a focus on innovation and capacity building, the council will also help ensure that opioid stewardship funding aligns with existing state and federal funding.



Target Investments to Communities Most Affected

Communities are not equally affected by the opioid epidemic. The Walz-Flanagan proposal directs revenue collected through the opiate stewardship fee to county and tribal social services agencies that need it the most. The proposal also includes grants to counties and tribes to help offset child protection costs associated with opioid addiction.

OPIOID OVERDOSE PREVENTION



Expand Access to Life-Saving Naloxone

Governor Walz’s budget provides funding to increase access to naloxone, a medication used to prevent opioid overdose deaths. It can be administered a variety of ways including a nasal spray or intravenous injection, and, if given in time, naloxone reverses the effects of an opioid overdose. Additional funding provides an increased ability to promote and expand access and training, which will save lives.



Address At-Risk Populations: Collaborating with Minnesota Tribes

Opioids are devastating some tribal communities. Data from MDH show Native Americans in Minnesota were six times more likely to die of a drug overdose – many opioid related – than whites. By providing funds to Tribal Nations, there can be increased outreach, training and resources provided. Tribes can determine how to best use funds to address and prevent substance use disorder.



Engage Local Communities

The Governor’s budget provides funds for grants to local communities to develop and expand the opioid pilot prevention projects best suited to their populations. Similar pilot programs are successful in Greater Minnesota, including one spearheaded in Little Falls and currently reaching eight other portions of the state. Among other successes, the program resulted in a reduction of more than 600,000 opioids prescribed to patients in 2017.



Review Deaths to Prevent Future Fatalities

Fatality review teams allow communities to come together following an opioid overdose death to review factors that may have contributed to a person's death. The goal of this work is to determine where systems level changes may be needed to prevent future deaths from occurring.



Fund What Works

Rigorous evaluation of funded interventions will help the State determine what works and how to fund future interventions. This evaluation process will illuminate the extent to which these programs prevent opioid abuse and emergency room visits, as well as influence other important outcomes such as employment and earnings, housing stability and involvement in the criminal justice system.

TREATMENT IN CORRECTIONAL FACILITIES



Fund Opioid Treatment

The Walz-Flanagan budget calls for \$965,000 in FY2020 and \$965,000 in FY2021 and each subsequent year to expand access to opioid treatment and services to offenders. These funds will be used to provide pre-release planning services and Medication Assisted Treatment (MAT) within the department's existing substance abuse treatment programs.



Staffing Needs

The funding will provide \$365,000 each year for three clinical program therapist and one clinical program director to provide comprehensive pre-release planning services, connect offenders with community-based services upon release, and to follow up with offenders to track success. It will also provide \$600,000 each year to fund MAT to provide medication for offenders with opiate use disorders.

INVESTING IN DRUG CRIME INVESTIGATIONS



The Governor's recommendation provides for onetime costs to support investigations of heroin and other drug crimes, and six forensic scientists to reduce the current drug evidence turnaround time.