



## Opioid Abuse Advisory Committee

**Meeting #20 Minutes**  
**Thursday, August 29, 2024**

**Virtual Meeting**

The 20<sup>th</sup> meeting of the Opioid Abuse Advisory Committee was called to order by Advisory Committee Chair Lori Martinec at 9:02 am CT. The following members of the Advisory Committee were in attendance: Becky Heisinger, Sara DeCoteau, Tiffany Wolfgang, Jill Franken, Jennifer Ball, Mallie Kludt, Erin Miller, John Rounds, Brian Mueller, Charles McGuigan, Tyler Laetsch, Margaret Hansen, Susan Kornder, Kristen Tate, Jason Jones, and Jason Foote.

State and program staff in attendance included: Melissa Magstadt, Dr. Tim Southern, Beth Dokken, Melanie Boetel, Mariah Pokorny, Kiley Hump, Melissa DeNoon, Amanda Weinzetl, Jennifer Humphrey, Michelle Worden, Randee Peterson, Colleen Hannum, and Rachel Oelmann and Tyler Franzky (contracted project supports from Sage Project Consultants, LLC).

Guests included: Matt Tribble (CDC Foundation); Sandra Melstad (SLM Consulting); Susan Puumala, and Minga Vargas (University of South Dakota); Loretta Bryan (South Dakota Association of Healthcare Organizations, or SDAHO); Matt Hammer and Cassi Severson (Lawrence & Schiller); Amber Overweg (SD Army National Guard); and Makenzie Huber (South Dakota Searchlight).

### **Minutes Approval**

Minutes from the January 2024 committee meeting were approved and published in the same month. Meeting slides, handouts, and other supporting materials presented are available at <https://doh.sd.gov/programs/avoid-opioid-prescription-addiction/prescription-opioid-abuse-prevention-initiative/>.

### **Welcome & Initial Comments**

Lori Martinec, Opioid Program Director, South Dakota Department of Health (DOH) and Committee Chair welcomed the Advisory Committee members and guests. Introductions followed.

### **Funding Updates**

DOH efforts were reported by Lori Martinec. The DOH Opioid Program is funded by the Centers for Disease Control, Overdose Data to Action in States Grant or OD2A-S Grant. The first year of the current five-year grant will end August 31<sup>st</sup> and DOH received the Notice of Award for Year 2 earlier this summer (\$1,865,943 for Year 2).

OD2A-S funds support seven different grant strategies for prevention and response to opioid use and misuse. The grant strategies are a combination of programs and activities that are classified as either being a surveillance type of activity or a prevention activity.

Funds used for surveillance personnel, services and supplies make up about 34% of the overall grant funds awarded or \$621,389. For the coming year, grant funded surveillance activities will continue to

center around enhanced drug toxicology testing through the state health lab and the collection and dissemination of both fatal and non-fatal overdose data through the work of epidemiologist staff.

Funds used for prevention personnel, services and supplies make up the remaining 66% of the overall grant funds awarded or \$1,244,554. Grant funded prevention activities include partnerships with SDAHO to provide healthcare clinician technical assistance, Avera Behavioral Health to provide patient navigation services and community education and the Prescription Drug Monitoring Program that provides tools to support safe prescribing practices. The newest prevention partnership includes six Community Health Worker organizations that provide overdose prevention education, naloxone availability information and linkages to treatment and recovery services in their communities. A large focus of prevention will continue with the statewide media campaign that is administered jointly between the DOH and DSS. We will also continue to partner with the Overdose Response Strategy team that is provided by the CDC Foundation and the High Intensity Drug Trafficking Areas (HIDTA) program to increase collaboration between public health and public safety through various strategies, such as the promotion of the use of the Overdose Detection Mapping Application Program (ODMAP) for local overdose data tracking.

Department of Social Services (DSS) efforts were reported by Tiffany Wolfgang, Chief of Behavioral Health. The State Opioid Response grant funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) remains in place, currently in its third iteration (SOR 3) which began September 2022 and will end September 2024. The next iteration of SOR funding (SOR 4) is anticipated to begin October of this year and will be a three-year grant program. Wolfgang relayed there were no major changes between required or allowable activities between SOR 3 and SOR 4. The funding remains the same - \$4,000,000 annually.

### **Opioid Settlement Fund Overview & Status Update**

Presented by Tiffany Wolfgang, who reviewed the context of the Opioid Settlement Funds to be received in South Dakota over the next 18 years beginning in 2022. Wolfgang referenced information included in the presentation materials (see enclosed slides) as well as information provided to the Committee ahead of the meeting (see attached pre-read documentation). Wolfgang reviewed current funds and proposed utilization of unobligated funds. During conversation around the Program Sustainability Fund, Dr. Erin Miller inquired as to whether the Settlement Funds could be placed in an endowment at any point in time. The DSS team will research the inquiry and report back at the next meeting. Wolfgang clarified the Committee's role in making recommendations for the use of Opioid Settlement Funds, and then asked for their consideration of the five-year proposed obligation plan including one-time funding approval for a comprehensive needs assessment to inform future funding priorities. The Committee agreed with the proposed obligations and use as presented. DSS will seek final approval from the Cabinet Secretary to authorize use of the funds per the Committee's recommendation.

### **Project Updates**

Lori Martinec introduced Loretta Bryan, SDAHO, to discuss their work on the Emergency Department toolkit. The discussion centered around their work in educating providers on Medication Assisted Treatment (Medications for Opioid Use Disorder) and its effectiveness, as well as breaking the stigma around opioid use disorders. See the enclosed slides for specific content presented.

Martinec then introduced Cassi Severson and Matt Hammer from Lawrence & Schiller to discuss the brand transition from Avoid Opioid to Let's Be Clear. Following the presentation (see enclosed slides), the following questions were posed:

- Was the new marketing strategy tested on persons with lived experience, and how did it resonate with the identified target populations? Lawrence & Schiller indicated that research into the brand proposal was done pre-development. A perception study will take place at campaign launch to establish a baseline measurement with follow-up surveys taking place over time to monitor user perception and successfulness of the campaign.
- Has the brand been tested with the Native American population specifically? Lawrence & Schiller indicated that it had not yet been tested but that the creative and language would be adjusted to best match a community's culture.
- What research contributed to the anti-stigma messaging chosen for Let's Be Clear? Lawrence & Schiller relayed that the research around stigma is evolving and that they were looking into this as new evidence comes to light. Randee Peterson, DSS, followed up and said that the state leverages its federal resources and connections including but not limited to CDC, SAMHSA, the National Association of State Alcohol and Drug Abuse Directors (NASADAD), among others, to inform this subject. State staff regularly attend workshops, training events, and conferences, each of which include content around anti-stigma campaigns, and as those resources are made available, they are shared and discussed with the DSS and DOH teams as well as Lawrence & Schiller to inform appropriate messaging using person-centered language.

#### **Lab Testing Quality Enhancement Project Update**

An overview of the South Dakota Public Health Lab and its role in toxicology and related forensic chemistry efforts in opioid abatement statewide was provided by Secretary of Health Melissa Magstadt and Dr. Tim Southern, Director of the South Dakota Public Health Lab. Following the material presented, Dr. Southern relayed a recent story stemming from an unusual cluster of cases involving suspected substance-related symptoms concurrent to the timing of the Sturgis Motorcycle Rally. While the ultimate cause was not able to be defined through the lab's forensic chemistry efforts, it was a great example of how rapid the State Public Health Lab can respond to and engage with communities in trying to identify root causes among cluster cases including those suspected to involve a substance. It was confirmed through testing that this particular cluster was not opioid-related, but the process and services of the State Public Health Lab would be similar in that event. Of note, the most commonly encountered opioids by South Dakota Public Health Lab staff today include fentanyl, norfentanyl, hydrocodone, and tramadol.

#### **Data & Surveillance – South Dakota's Opioid Road Map**

Opioid overdose data was presented by Amanda Weinzetl, DOH. South Dakota's overdose death rates remain much lower than US rates, and US overdose deaths decreased in 2023 for the first time since 2018 according to provisional data reported by the CDC. In reviewing overdose deaths in South Dakota, it was noted that the SD American Indian overdose death rate is 3.3 times higher than the SD white overdose rate; Weinzetl clarified that this was calculated using a 10-year average (2014-2023). See the slides for specific information shared.

Data related to the Prescription Drug Monitoring Program was shared by Melissa DeNoon, Board of Pharmacy. See the slides for specific information shared. The Committee did not have any questions.

#### **Committee & Partner Updates**

Lori Martinec encouraged partners to share about public awareness efforts ongoing at local communities, as well as any upcoming events or conferences going on for the group's awareness.

- Sara DeCoteau shared that Sisseton Wahpeton Oyate applied for and is anticipating Tribal Opioid Response funding (TOR 4) to begin in October. DeCoteau also discussed the gaps and opportunities she sees for continued anti-stigma messaging and MOUD supports in their area. She indicated that a study is planned to ask providers about MOUD and what they know about medications that are used to better understand their perceptions.
- Dr. Jennifer Ball relayed that Center for Family Medicine is currently working to optimize its treatment plans and posed a question to the group regarding access to injectable medications through Medicaid. Michelle Worden stated that DSS will research that with Medicaid and follow-up on her specific question.

### **Public Input**

Chair Martinec invited any public comment. No comments were received.

### **Closing Remarks**

Chair Martinec relayed that a change in meeting cadence could be expected moving forward; the typical winter meeting held by the Committee will be adjusted to occur after the legislative session but before the need for any Committee-related recommendations for the use of opioid settlement funds in alignment with the state's budgeting and contract process. Hearing no objections to that change, Martinec thanked the committee and guests for their time and attention and invited continued collaboration in all areas presented. The next meeting is planned for March 2025 and will be announced at a later date.