# STATE OF WISCONSIN Department of Health Services Division of Care and Treatment Services



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To: Subscribers of the DCTS Action Memo Email Distribution List

From: Rose Kleman, Administrator

Request for Applications: Opioid and Stimulant Treatment Unmet Needs Funding

### **Summary**

This memo describes the procedure for counties and tribes to request State Opioid Response grant funding for the purpose of decreasing opioid or stimulant use disorder treatment waitlists, treatment service denials, or other unmet treatment needs through September 29, 2021. The deadline to apply for funding is April 30, 2021. Priority will be given to counties and tribes identified as high-need areas that do not currently receive State Opioid Response funding. Additional consideration will be given to applications that demonstrate full integration of agonist and partial agonist treatments for opioid use disorder (buprenorphine and methadone), rather than a primary focus on antagonist medication (naltrexone).

## **Background**

Wisconsin is in the first year of a new round of State Opioid Response grant funding from the federal Substance Abuse and Mental Health Services Administration that is supporting investments in services for opioid use disorder and stimulant use disorder. The grants awarded through the application process outlined in this memo will expire September 29, 2021. If federal funding is available, second year funding may be available. Second year funding will be based on whether grantees successfully met the contract requirements of the first year. Grant awards will be based on need and number of people expected to be served. The awards may be prorated based on available funding. The awards will be stand-alone contracts for the grant period.

This funding is to be utilized to increase access to Food and Drug Administration-approved forms of medication-assisted treatment for opioid use disorder, increase evidence-based treatment for stimulant use disorder, decrease treatment waitlists, and serve individuals with an opioid or stimulant use disorder who have unmet treatment needs.

In planning for the new State Opioid Response grant, a needs assessment was performed to assist in making decisions regarding resource allocation. This needs assessment identified high-need areas based on county-level data in the following areas: number of people receiving county-authorized services for opioid, amphetamine-related, or cocaine misuse; opioid- or amphetamine-related hospitalizations; opioid- or stimulant-related deaths; diagnosis of opioid use disorder among Medicaid members; and Wisconsin State Crime Laboratory methamphetamine seizure cases. Counties were ranked in high-need order based on the averaging of the data, with a rank of one being highest need.

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County	Rank
Milwaukee	1
Racine	2
Rock	2
Dane	4
Sauk	5
Kenosha	6
Dodge	7
Waukesha	8
La Crosse	9
Columbia	10
Winnebago	11
Fond du Lac	12
Jefferson	13
Sheboygan	14
Forest	15
Brown	16
Menominee	17
Manitowoc	18
Washington	19
Marquette	20
Eau Claire	21
Wood	22
Jackson	23
Monroe	24

County	Rank
Marinette	25
Outagamie	26
Adams	27
Sawyer	28
Vilas	29
Walworth	30
Ashland	31
Portage	32
Ozaukee	33
Juneau	34
Shawano	35
Waupaca	36
Marathon	37
Chippewa	38
Douglas	39
Waushara	40
Green	41
Richland	42
Bayfield	43
Burnett	44
Langlade	45
St. Croix	46
Oneida	47
Trempealeau	47

County	Rank
Iowa	49
Green Lake	50
Barron	51
Iron	51
Lincoln	53
Dunn	54
Grant	55
Polk	56
Crawford	57
Pierce	58
Price	59
Oconto	60
Vernon	61
Florence	62
Rusk	63
Washburn	64
Buffalo	65
Door	66
Taylor	67
Lafayette	68
Clark	69
Calumet	70
Pepin	71
Kewaunee	72

Tribes located in high-need counties are considered high need.

#### Eligibility for funding

All counties and tribes are invited to apply for funding. Priority will be given to counties and tribes identified as high-need areas that do not currently receive State Opioid Response funding. Additional consideration will be given to applications that demonstrate full integration of agonist and partial agonist treatments for opioid use disorder (buprenorphine and methadone), rather than a primary focus on antagonist medication (naltrexone).

## **Application Process**

Applications are due April 30, 2021.

#### **Application forms**

Use the <u>State Opioid Response Grant Program Funding Request</u>, F-02122, to describe unmet opioid or stimulant treatment and recovery needs in the county or tribe, a description of planned services, the cost

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to provide these services, and the number of people expected to be served during the grant period. Take extra care when estimating how many people may be served during the grant period. Provide detailed responses to questions 1-9 on the funding request form, F-02122.

Use the <u>DCTS Summary Line Item Budget: Condensed, F-01601C</u>, to provide the estimated cost to provide services covered by this grant.

Use the <u>DCTS Annual Grant/Contract Application: Condensed, F-21276C</u>, to provide a detailed justification for the costs in each category listed on the budget form, F-01601C. The entire application form, F-2127C, must also be completed.

There will be no carryover funding as part of this grant opportunity.

#### **Application narrative**

There are conditions to this funding. Counties and tribes must agree to meet these conditions in order to receive a grant. Applicants should address the criteria below in a narrative submitted with their grant application.

- The applicant is expected to increase the number of people with substance use disorder served during the grant period over the number served in calendar year 2020. The applicant is expected to increase the amount of annual substance use disorder expenditures during the grant period over the amount expended in calendar year 2020.
- Evidence-based practices for opioid and stimulant addiction treatment must be used, including medication-assisted treatment for opioid use disorder. Applicant must agree that it will not deny or limit people the opportunity to receive pharmacotherapy (buprenorphine and naltrexone formulations) for an opioid use disorder. Applicants proposing to serve a population with a practice that has not been formally evaluated with that population are required to provide evidence that the practice(s) they propose is appropriate for the population(s) of focus. Evidence for these practices may include unpublished studies, preliminary evaluation results, clinical (or other professional association) guidelines, findings from focus groups with community members, etc. Applicant may describe experience either with the population(s) of focus or in managing similar programs. Information in support of the proposed practice needs to be sufficient to demonstrate the appropriateness of the applicant's practice.
- Applicants must permit access to opioid and stimulant use disorder services for people reentering communities from criminal justice settings or other rehabilitation settings.
- Counties must report client level data and expenditures through the Program Participation System. DCTS will negotiate with tribes on a client and expenditure reporting method having adequate integrity, such as an extract from the Indian Health Service Resource and Patient Management System or other in-house database or accounting system.
- Applicants must report on a series of data elements for the Substance Abuse and Mental Health Services Administration to meet its obligations under the Government Performance and Results Modernization Act (GPRA) of 2010. This includes elements such as diagnosis, demographic characteristics, substance use, services received, and types of medication-assisted treatment received, length of stay, criminal justice involvement, and housing. Each client will have three time points of data collection: intake to services, six months post intake, and discharge.

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- Applicants must develop a system within their programming to register clients into the Program Participation System to generate a unique ID number for use in collecting the data elements needed under GPRA. GPRA training and technical assistance will be provided.
- Counties must comply with all local and state requirements for licensing, accreditation, and certification. Tribes must comply with all applicable tribal requirements for licensing, accreditation, and certification or explain that licensing, accreditation, and certification requirements do not exist.

Successful applicants must begin delivering services prior to June 1, 2021. If subcontractors will be used to provide services funded by this grant, successful applicants must provide the Division of Care and Treatment Services with a list of these subcontractors and DUNS numbers for the subcontractors.

#### **Application steps**

- 1. County and tribes must email completed applications to <u>Michelle Lund</u> by April 30, 2021. A completed application includes the following forms:
  - State Opioid Response Grant Program Funding Request, F-02122
  - DCTS Summary Line Item Budget: Condensed, F-01601C
  - DCTS Annual Grant/Contract Application: Condensed, F-21276C
- 2. Staff in the Division of Care and Treatment Services will review the applications and forward recommendations for funding to the Division of Care and Treatment Services Administrator's Office for final approval.
- 3. Staff in the Division of Care and Treatment Services will contact successful applicants regarding their grant award and the contracting process.

#### **CENTRAL OFFICE CONTACT**

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