



State of Wisconsin  
Department of Health Services

Tony Evers, Governor  
Kirsten L. Johnson, Secretary

March 29, 2024

The Honorable Howard L. Marklein, Senate Co-Chair  
Joint Committee on Finance  
Room 316 East  
State Capitol  
P.O. Box 7882  
Madison, WI 53707

The Honorable Mark Born, Assembly Co-Chair  
Joint Committee on Finance  
Room 308 East  
State Capitol  
P.O. Box 8952  
Madison, WI 53708

Dear Senator Marklein and Representative Born:

2021 Wisconsin Act 57 requires the Department of Health Services (DHS) to submit to the Joint Committee on Finance (Committee) a proposal to expend settlement proceeds paid to the State of Wisconsin from the National Prescription Opiate Litigation, Case No. MDL 2804 (NPOL). Under Act 57, 30% of the NPOL settlement proceeds will be allocated to DHS for purposes that comply with the settlement agreement or court order.

As part of the original approval, the Committee required DHS to submit a report by December 31, 2022, and on a quarterly basis thereafter regarding revenue expenditures under the plan. I am writing to report on the Fiscal Year 24 Quarter 3 (FY 24 Q3) (January, February, and March) opioid settlement proceedings received through the NPOL.

**A. Settlement Funds Received**

<b>All Settlement Funds Received</b>	
August 2022	\$ 6,000,000.00
October 2022	\$ 7,600,000.00
December 2022	\$ 17,000,000.00
June 2023	\$ 617,290.47
August 2023	\$ 7,371,692.89
March 2024	\$ 2,420,613.09
<b>TOTAL</b>	<b>\$ 41,009,596.45</b>

**B. Funding Amounts Awarded or Allocated**

As of December 31, 2023, DHS has no funding opportunities open for application and \$750,000 in funding opportunities under review. DHS issued \$6,394,201 in awards this quarter and a cumulative total of \$33,244,247 in awards. This represents a total of \$35,994,247.

DHS currently has no grant funding opportunities open for application.

The table below summarizes the grant funding opportunities DHS currently has under review.

<b>Funding Opportunities Under Review</b>	
<b>Category</b>	<b>Available Funding</b>
<b>TOTAL</b>	<b>\$ 750,000</b>
Narcan® Direct Program for Law Enforcement	\$ 750,000

The following table summarizes the amount of funding DHS awarded by category of use during FY 24 Q3 and cumulatively.

<b>Funding Awards by Category</b>			
<b>Category</b>	<b>Previous Awards</b>	<b>FY 24 Q3</b>	<b>Cumulative Awards</b>
<b>TOTAL</b>	<b>\$ 28,850,046</b>	<b>\$ 6,394,201</b>	<b>\$ 35,244,247</b>
Expand Narcan® Direct Program	\$ 4,084,630	\$ -	\$ 4,084,630
Establish Fentanyl Test Strips	\$ 1,043,783	\$ 15,834	\$ 1,059,617
Capital Projects	\$ 10,000,000	\$ -	\$ 10,000,000
Funding for Tribal Nations	\$ 6,000,000	\$ -	\$ 6,000,000
Central Alert System	\$ -	\$ -	\$ -
K-12 Evidence-Based Prevention	\$ 250,000	\$ -	\$ 250,000
Medication Assisted Treatment	\$ 2,000,000	\$ 2,000,000	\$ 4,000,000
Room & Board for Residential Treatment	\$ 2,500,000	\$ 2,500,000	\$ 5,000,000
Law Enforcement Agencies	\$ 1,121,633	\$ 1,878,367	\$ 3,000,000
Statewide Prevention	\$ 750,000	\$ -	\$ 750,000
Hub and Spoke Pilot Program	\$ 500,000	\$ -	\$ 500,000
Substance Use Disorder Treatment Platform	\$ 300,000	\$ -	\$ 300,000
Surgical Collaborative of Wisconsin	\$ 300,000	\$ -	\$ 300,000

**Establish and Fund Program to Distribute Fentanyl Testing Strips**

Law enforcement plays a vital role in combating the opioid epidemic and officers are positioned in the community to distribute fentanyl test strips (FTS) in an effort to prevent overdoses and overdose deaths. Fentanyl is being mixed into the drug supply, often without the person using substances being aware. FTS are a simple, easy-to-use tool to detect the presence of fentanyl in substances. When individuals are equipped with FTS and the knowledge FTS provide, they can take steps to ensure their own safety and reduce the risk of overdose.

Through this opportunity, law enforcement agencies receive FTS and supporting supplies to distribute to community members at risk for an opioid overdose. The first round of applications resulted in an award to 18 law enforcement agencies of 351 cases of fentanyl test strips (100 strips per case) and 1,902 kits of fentanyl test strips and the supportive supplies needed to use the strips. DHS was able to provide all applicants with the full requested number of supplies. The second round of applications resulted in an award to 25 law enforcement agencies of 106 cases of fentanyl test strips (100 strips per case) and 3,167 fentanyl test strips and the supportive supplies needed to use the strips. DHS was able to provide all

second-round applicants with the full requested number of supplies. Please see Appendix A for the details of the second round of awards.

### **FY 24 Medication Assisted Treatment**

DHS was directed to allocate \$2 million in the FY 24 settlement plan for supporting medication assisted treatment (MAT) for individuals with an opioid use disorder. DHS is engaged with the Wisconsin Department of Corrections (DOC) with the intention of securing an Interagency Agreement for this project. The DOC will increase access to MAT to individuals receiving treatment and services at identified Residential Services Programs (RSP) throughout the state. The identified RSPs support the continuation of medications for opioid use disorder for those with an active prescription. Also, at intake, RSP treatment staff will screen clients for opioid treatment needs and refer clients to MAT services, if they are interested in receiving MAT services as part of their treatment plan. DOC will also contract with Opioid Treatment Programs to provide mobile MAT services to clients under the supervision of the Division of Community Corrections in underserved areas of the state. This mobile service removes transportation as a barrier to accessing care. These units will administer and dispense medications for opioid use treatment, collect samples for urine screening, dispense take-home medications, and provide medical and psychosocial assessments and counseling, when possible.

### **FY 24 Room and Board Costs for Residential Substance Use Disorder Treatment**

Wisconsin Medicaid began offering a residential substance use disorder treatment benefit in February 2021. It provides treatment for youth and adults to promote recovery from substance use disorder and reduce the incidence and duration of institutional care Medicaid members might otherwise need. Federal law prohibits Medicaid from reimbursing for the costs of room and board. Covering the costs of room and board has been identified as a barrier to residential substance use disorder treatment for many Medicaid members. To make this benefit more accessible, DHS solicited applications from Tribal nations and counties for funding to cover the room and board costs in 2024 for individuals with an OUD or at risk for an opioid overdose. Applications were due January 29; see Appendix C for the details of the awards.

### **FY 23 Law Enforcement Agencies Opioid Abatement Efforts**

DHS created a funding opportunity to support law enforcement agencies through four strategies: medication-assisted treatment education and awareness training, community drug disposal efforts, treatment for people incarcerated with an opioid use disorder, and pre-arrest or pre-arraignment deflection strategies for people with an opioid use disorder. At least \$1 million of the funds are designated for law enforcement agencies in counties or municipalities with 70,000 or fewer residents.

The initial application resulted in six agencies being awarded \$1,121,633 (including \$556,555 in awards to law enforcement agencies responsible for jurisdictions of less than 70,000 residents). In an effort to distribute remaining available funds, the Request for Applications was reposted. An additional 12 agencies received awards and all available funds have been awarded. Please see Appendix B for the details of the second round of awards.

### ***C. Funding Expenditures***

As of March 13, 2024, a cumulative total of \$5,234,752 in expenditures have been recorded for programs supported with settlement funds; this includes \$3,220,719 in reported previous expenditures (\$345,902 in additional expenditures posted to FY 24 Q2 after the last report was submitted) and \$2,014,033 of expenditures in FY 24 Q3.

Under the state's accounting and contracting systems, in most circumstances, a grantee must report expenditures to the state under its contract. The state then makes payments to the grantee based on those reported expenses within required timeframes. In some circumstances, a grantee will not report

expenditures to the state until the end of the project, requesting a single payment from the state. Once the state makes the payments, expenditures are recorded in the state accounting system for the contract.

The fact that a grant may have been approved or awarded does not necessarily mean funds have been expended. DHS does not pre-pay for services supported by these grants. Recipients first incur costs, then submit qualifying expenses to DHS for reimbursement according to the contracted agreement. The terms and conditions of the release of the funds are provided in the signed and executed contracts between DHS and grant awardees. The short timeframe in which DHS has been able to create, open, and award new funding opportunities for partners impacts the ability for those partners to have begun using their awarded funds and invoicing DHS for reimbursement, as many of them have a pending application, just received a notice of award, or are engaged in contract negotiations.

<b>Expenditures by Category</b>			
<b>Category</b>	<b>Previously Expended</b>	<b>FY 24 Q3 Expenditures</b>	<b>Cumulative Expenditures</b>
<b>TOTAL</b>	<b>\$ 3,220,719</b>	<b>\$ 2,014,033</b>	<b>\$ 5,234,752</b>
Expand Narcan® Direct Program	\$ 1,375,131	\$ 427,958	\$ 1,803,089
Establish Fentanyl Test Strips	\$ 296,725	\$ 159,973	\$ 456,698
Capital Projects	\$ 14,187	\$ 420,155	\$ 434,342
Funding for Tribal Nations	\$ 511,715	\$ 427,513	\$ 939,228
Central Alert System	\$ -	\$ -	\$ -
K-12 Evidence-Based Prevention	\$ -	\$ -	\$ -
Medication Assisted Treatment	\$ -	\$ -	\$ -
Room and Board for Residential Treatment	\$ 1,019,034	\$ 375,906	\$ 1,394,940
Law Enforcement Agencies	\$ 3,927	\$ 15,196	\$ 19,123
Statewide Prevention	\$ -	\$ 147,908	\$ 147,908
Hub and Spoke Pilot Program	\$ -	\$ 39,424	\$ 39,424
Substance Use Disorder Treatment Platform	\$ -	\$ -	\$ -
Surgical Collaborative of Wisconsin	\$ -	\$ -	\$ -

***D. Listing of Individual Recipients of Awarded Funds***

Please see Section B and the Appendices for recipients of awarded funds.

***E. Program Accomplishments or Other Relevant Metrics Resulting from Awarded Funds***

In these quarterly documents, DHS will report on program accomplishments and other relevant metrics as funds are awarded and initiatives implemented. All information provided below reflects the reports received by DHS at the time of writing. DHS continues to work with grantees and any additional information provided will be shared with the Committee in future reports. The following is a summary of program accomplishments and other relevant metrics as of this quarter.

**Expand Narcan® Direct Program**

The Narcan® Direct Program (NDP) provides overdose reversal and life-saving medication to law enforcement agencies, county or municipal health departments, county human services departments, tribal health clinics, syringe access programs, recovery community organizations, and opioid treatment programs.

During the previous three months of reported data, the NDP reports training 2,929 people in overdose prevention and Narcan® administration and distributing 9,353 Narcan® kits (total of 18,706 doses). NDP agencies reported over 812 successful overdose reversals. Due to data collection limitations the number of successful overdose reversals is an underreported amount.

### **Establish and Fund Fentanyl Test Strip Program & Expand Narcan® Direct Program**

Fentanyl test strips and supplies awarded to law enforcement agencies during the last reporting period were delivered to the first round of awardees in January 2024. Since receiving supplies, law enforcement agencies report distributing 64 test strips and 69 test kits to an estimated 54 people.

Other strategies to expand the Narcan® Direct Program and establish a fentanyl test strip program include the Public Health Vending Machines and the EMS Leave Behind Program.

**Public Health Vending Machines** (PHVMs) provide Wisconsin a new, innovative opportunity to protect and promote the health and safety of people who use drugs. Many Wisconsinites do not seek assistance or services for their drug use due to a fear of being recognized, shamed, judged, and arrested. PHVMs, also referred to as harm reduction vending machines, act as a safe haven for people to obtain no-cost, stigma-free preventative health and wellness services. They provide the opportunity for discrete, confidential access to harm reduction tools.

Awarded agencies are planning for the best placement of the machine(s), obtaining vending machine quotes, ordering and waiting on machine production, and engaging the community to build support and combat stigma. Vital Strategies, Wisconsin's partner in the Bloomberg Overdose Prevention Initiative, is providing support to all agencies implementing PHVM in Wisconsin through the convening of a monthly community of practice. This venue provides agencies the ability to share resources, address successes and challenges, and network with other agencies. This program is supporting 15 operational PHVM across Wisconsin. To see the location of these and all the other PHVM operating in Wisconsin, visit <https://www.dhs.wisconsin.gov/opioids/safer-use.htm>. Over 20,000 individual supplies were distributed through PHVMs during this quarter.

Comments from the PHVM implementors include, “[We] cannot keep our machine full. [It] has been a great success” and “Multiple news organizations and social media pages have shared the information about the PHVM. The ... community has been supportive of the new PHVM and even seems to welcome the opportunity to have Narcan® available to those who need it.” One grantee noted a comment made by a librarian who works at the library where a PHVM is placed. “As I was filling up the machine tonight at closing time, I had a gentleman come up to me and say he was glad we had this machine in the library. He wasn't so sure about it when we first put it in but is glad it is here now because he heard that ‘this’ saved someone's life a couple days ago. Not sure if ‘this’ means Narcan® in general or if ‘this’ means Narcan® from the library, but either way, it has changed his thinking about having it available through the vending machine here. He mentioned too, that the next time we have a training, he wants to attend because “you just never know.” It was a good way to end the evening.”

**EMS Leave Behind Programs** increase access to overdose prevention tools, including Narcan® and fentanyl test strip supplies, and is an essential component to reducing overdoses and overdose deaths in Wisconsin. EMS providers across the country and within Wisconsin have instituted public safety-based Leave Behind Programs. Leave Behind Programs allow EMS professionals to distribute, or “leave behind,” overdose prevention tools and resources at the scene of care, or after transport to a hospital, with the patient and/or their social networks (family, friends, roommates, etc.). This model presents an innovative opportunity to expand access to life-saving tools for individuals at high risk for overdose and death.

Additionally, Wisconsin applied for and was accepted to the National Governors Association's Learning Collaborative on Expanding the Role of EMS to Prevent Overdose. Wisconsin is using this opportunity build a statewide support program for EMS agencies implementing a Leave Behind Program – developing training materials, a data collection process, and an evaluation plan. DHS anticipates that by providing the

backbone support and essential infrastructure components, additional EMS agencies across Wisconsin will implement Leave Behind Programming.

Awarded agencies are planning and writing policies, training staff, ordering supplies, and beginning program implementation. Ten agencies reporting actively distributing supplies and over 10,000 individual supplies distributed through EMS Leave Behind Programs during this quarter.

Comments from EMS agencies on the impact of these funds in their communities include, “We know of at least one case in which a kit was used prior to EMS arrival to an [overdose]” and “We’ve discovered our leave behind kits have been used to save lives!”

### **Capital Projects**

Community-based providers offering prevention, harm reduction, treatment, and recovery services for individuals with an opioid use disorder were invited to apply for funds to support capital projects expanding services in Wisconsin. DHS awarded part of this funding for a capital project that supports the expansion of bed capacity for the treatment of pregnant and post-partum women in a family-centered treatment environment and at least \$3 million of these funds were awarded to support projects in counties with fewer than 500,000 residents.

#### **Arbor Place (Dunn County)**

The building plan in its finalized form was used to obtain informal bids. This was completed to see if the designed project fell within the budget constraints. Unfortunately, the pricing was determined to be \$263.75 per square foot for a building size of 20,873 square feet. This put the project over budget by \$840,651. Therefore, the project team has reconvened to make changes to the building plan, without sacrificing the necessary programming space needs. To date, the project team has been able to reduce the building size along with identify additional items that will help to reduce cost. Revised building plans are currently being worked on.

It is important to recognize and acknowledge the changes in the external health care environment in Western Wisconsin with the closing of two Hospital Sisters Health System (HSBS) hospitals and all Prevea clinics. This already has had a significant impact on the services Arbor Place provides in this region. The region lost the one and only inpatient withdrawal management program (LE Phillips), have a reduction of 16 residential treatment beds for adults (LE Phillips) to serve the region, have a reduction of inpatient adult behavioral health beds (Sacred Heart), have lost the only place for inpatient adolescent behavioral health beds (Sacred Heart), and have a great reduction of outpatient behavioral health services of counseling, therapy, medication management including medication management for opiate use disorders (Prevea). The region has also lost two inpatient labor and delivery units (St. Joseph’s and Sacred Heart) and outpatient OB services (Prevea). This is significant and will impact the project. It has already impacted Arbor Place's operations and the services available in the region.

It is also important to recognize and acknowledge that Arbor Place is at an optimal time with this project to take a slight pause to reflect on the immediate and future needs now pressing in the region. It is rare that an opportunity presents itself where a significant health care service disruption coincides with a construction project that is already in motion.

#### **Lighthouse Recovery Community Center, Inc. (Manitowoc County)**

The project required relocating the current recovery drop-in center to a new location allowing conversion of the current location to a space to provide safe, sober housing for pregnant and postpartum women while they attend treatment. Renovations at the new drop-in center began February 19, 2024, and are anticipated to be completed by late March. Once completed,

renovations for the capital project will begin in early April and completed by late May. Architect, Abacus Architects, Inc., sought state approval on a few code issues regarding fire protection which approval was granted on February 29. All other preliminary activities have been completed prior to November 1, 2023 (schematics/blueprints, contractor/subcontractor walk-throughs, design decisions, etc.).

#### **Meta House (Milwaukee County)**

On October 26, 2023, Meta House signed a purchase agreement for a 4.8-acre property located at 3901 W. Bluemound Road in Milwaukee. Meta House immediately began due diligence, and HGA (the architecture and civil engineering firm) has nearly completed the construction document (CD) phase of their work. Plans to the City of Milwaukee's Board of Zoning Appeals have been submitted. It is anticipated Meta House will receive their special use permit on March 7, 2024. Meta House will submit CDs to DHS and the necessary city departments in the next few weeks which will begin their review process. Meta House anticipates obtaining all necessary approvals and permits to begin construction by late May or early June 2024. With an anticipated 18-month construction-schedule, they hope to have doors open by no later than January 2026.

#### **Funding for Tribal Nations**

DHS is supporting federally recognized Tribal nations in providing a spectrum of strategies across the continuum of care to address their unique conditions. This includes providing programs and activities with minimal demands or barriers for participants, while building upon the strengths of local tribal culture, tradition, and practices. It also includes providing high quality, effective, equitable, understandable, and respectful prevention, harm reduction, treatment, and recovery efforts and services. These services are responsive to diverse cultural health belief and practices, in preferred languages, promotes health literacy, and other communication needs.

#### **Bad River Band of Lake Superior Tribe of Chippewa Indians**

The Bad River Band of Lake Superior Tribe of Chippewa Indians made significant progress in this project during this reporting period, with 98 successful overdose reversals reported. The Tribal nation continued to improve communication and coordination in bimonthly drug task force meetings. The Tribal nation opened a new low barrier warming shelter and provided drop-in harm reduction services and overdose prevention strategies. The warming shelter is staffed 24 hours a day and seven days a week by peer support staff who are trained in overdose reversal. The harm reduction program is open during weekdays and evenings, offering harm reduction supplies, peer support, showers, respite, and more. Several new peer support staff have been hired. This new type of provider offers community-based care, including transportation to appointments, groups, and one-on-one sessions to talk through relapse prevention and treatment options available, support for families who have lost loved ones to overdose, etc. The Tribal nation is finding that peer support is the missing link to bridge new patients to higher threshold services. The Tribal nation served 45 people through their outpatient MAT program, 55 people through their community-based peer support at the harm reduction program, 147 people through community-based peer support at the Ashland County Jail, and 37 people were trained in overdose prevention. Over 400 people received overdose reversal naloxone kits.

Several women from the Tribal nation were released from jail during this reporting period. Research indicates that Tribal nation members leaving jail and prison are at the highest risk for fatal opioid overdose. Thus, outreach and connecting these individuals to support and services is a high-priority intervention. Of the women released in January, all were welcomed home by peer support staff, received naloxone within 24 hours of their return home, and were offered support to begin substance use services through the Tribal nation's (MAT) program. Of the four women released, at least two have begun outpatient treatment services, one has petitioned to participate in

Ashland County's Healing and Wellness Court, and one is successfully residing in the Bad River Recovery House.

### **Forest County Potawatomi Community**

The Forest County Potawatomi Community's Transitional Living Facility is now fully staffed. Having all the positions filled has already been a relief to the team as many of the workers have been unable to take time off. Prolonged work without personal time can lead to burnout which may affect the client care provided. There were three clients in the house during this period. One of those successfully graduated out of the program leaving two for the remainder of the period. One of the two remaining is on track to graduate in early February. There were 141 people who received recovery coach services, five people received transitional living services, and 40 people received (MAT) services.

In December, the Tribal nation changed the location that traditional healing services were located. Originally, they were seeing clients in the Tribal Cultural Building. In December it was changed, and clients began to come to the health and wellness clinic for traditional medicine services. Overall, the move went smoothly, however, there were some reductions in the number of kept appointments. It is unclear if this was a result of the move or other factors.

Several in-house groups have been established during this period. These include an all-recovery meeting and life skills. The house also facilitates a weekly 'Wellbriety' meeting which is aimed at providing the clients the opportunity to run meetings themselves.

Three iPads have been ordered to be used with clients when approving consents and developing treatment plans. They will also be used to show clients where to find information to support their recovery.

In early January, the Tribal nation hosted a three-day training on the matrix model; 16 staff attended this training. All involved were very pleased with the delivery and found the information useful and could find ways to incorporate it into the current programming. Out of this training, they realized that there was one area in which it was still lacking and that is in family support. Because of this, they decided to use the information obtained in the matrix training to begin developing a family support meeting.

Traditional medicine is held two days a month. In this period, the healers were utilized at 29 different appointments. The traditional healers usually facilitate a community sweat lodge on the second evening of their visit. These lodges have 15-20 participants each month. In this period, there was not a sweat lodge hosted in November or December due to deaths in the community. Out of respect for the mourners and the need for the facility for funeral services, the lodges were cancelled.

The Tribal nation currently serves 40 individuals in the MAT program. All MAT clients are assigned to a recovery coach who follows up with them between visits and assists with aspects of recovery not addressed in a clinical setting. The recovery coaches made 812 contacts with 141 unique individuals.

### **Ho-Chunk Nation**

The Tribal nation started a weekly matrix model group as well as peer-led Narcotics Anonymous and peer support groups. The Tribal nation continues to develop ways to increase distribution of naloxone and fentanyl strips into the communities which included additional staff attending the DHS Train-the-Trainer sessions. The Tribe has also started an internal Lunch & Learn webinar



series for Health Department staff with various topics regarding substance use disorders, prevention efforts, harm reduction and treatment options. Over 30 people received direct patient services; 250 people attended a community event where 410 educational materials were distributed; 45 people received peer recovery services; five people were induced with MAT; 11 people received naloxone, and 146 people received fentanyl test strip kits.

One major positive outcome related to receiving these funds is the ability of a counselor funded under this grant to go into the jail settings and provide matrix model early recovery programming while clients are still incarcerated. This allows them to get engaged in behavioral health services and potentially (MAT) before they are released, improving the chance they can maintain recovery and know what resources are available to them upon their release.

### **Lac Courte Oreilles Band of Lake Superior Chippewa Indians**

The Tribal nation hired a lead transitional care coordinator in mid-January and a point of intervention specialist in early February. The lead transitional specialist is working to implement a strategic plan with six objectives and nine goals.

### **Lac du Flambeau Band of Lake Superior Chippewa Indians**

The Tribal nation is looking at subcontracting with Kohler Behavior for the child psychologist position. They have two applicants looking at the social worker position and two mental health providers who will be working on getting their dual licensure with substance use services added. One individual will be attending the Midwest Alliance of Sovereign Tribes training in Washington DC to learn information and advocacy skills regarding strategies to address substance use disorders. Multiple agencies are partnering to conduct a community-wide training on drug trends, substance use disorder services, substance use disorder drug identification, and bringing in a guest speaker for the community, professional staff, and Tribal nations government. Three people received out of state residential treatment services and four departments received training for their staff.

### **Menominee Indian Tribe of Wisconsin**

During the reporting period the Tribal nation was able to secure sober living facilities for two individuals. One of these was close to giving birth and the Tribal nation was able to find a location that would assist her with her birth, recovery, and the support she needed. Two people received residential treatment services; 13 people received naloxone, and two community events were held.

### **Oneida Nation**

The Tribal nation has been able to get some of the training scheduled for providers for the Hazelden medications for opioid use disorder training, which is scheduled for June 25-26. This is in collaboration with primary care providers and nurses as well as the staff at behavioral health. The Tribal nation estimates 82 people will receive this training. The Recovery Coach Academy training is scheduled for April 1-4, 2024. The Tribal nation has also been able to create and train the cultural advisors on documenting in the electronic medical records to be able to track how many patients are utilizing those services as well. Five people received residential treatment services, 57 people received recovery coach services, and 21 people received coordination of (MAT) services.

### **Red Cliff Band of Lake Superior Chippewa Indians**

The Red Cliff Wrap Around Care Team is responsible for oversight and implementation of the opioid response efforts. The team consists of Health Administration, Behavioral Health, Wrap Around Coordinator, Human/Family Service Administrator, Police Chief, Housing Service

Manager, and Judge. The team meets biweekly to discuss progress and plans. The team has been working with a consulting firm, Blue Stone Strategies, to update the Tribal Action Plan (TAP). The team focused on goals, objectives, and activities. The TAP is a three-year plan specific to addressing substance use treatment and prevention in the Red Cliff community. During December, interviews were facilitated with key partners and in January a full-day work session was held to develop goals and objectives. During this reporting period, the plan is approximately 75% complete. The TAP is expected to be completed in February 2024 with Tribal Council approval in March. The following overarching goals were identified:

- Improve coordination of existing services, referral system (No Wrong Door) and cohesive response.
- Expand and strengthen services to address gaps in service provision.
- Deepen prevention efforts.
- Strengthen workforce development within the Wrap Around Care Program.

The policies and procedures for the medication for opioid use disorder (MOUD) program were completed in December 2023. MOUD services formally began operation on January 16, 2024. The wrap around care model is embedded in the MOUD program offering behavioral health and peer support.

A family program event was hosted to teach the cultural practice of ribbon skirt making. A total of 16 individuals participated.

The marriage and family licensed therapist completed orientation and onboarding. The services were implemented during this period with a total of 159 visits.

Almost 160 people were provided behavioral health services and 63 people attended a Gathering of Native Americans (GONA) community event.

### **Sokaogon Chippewa Community**

During the last reporting period, the Tribal Opioid Abatement project has made significant strides in enhancing its services and support for individuals facing substance use challenges. The project's investment in new computers, monitors, and scanners bolstered operational efficiency and data management. The acquisition of two public health vending machines for harm reduction purposes, placed in a 24/7 accessible location, underscores the project's commitment to saving lives and promoting community safety.

Moreover, the project's provision of fuel for a new van has expanded outreach capabilities, ensuring that services reach those in need. The distribution of behavioral health supplies such as weighted blankets and light therapy lamps demonstrates a holistic approach to client care, incorporating evidence-based interventions for mental health and substance abuse patients. By supporting over 134 individuals with diverse mental health and substance use challenges, the project has shown a tangible impact on the community's well-being.

In addition, the project's focus on professional development is evident through the training provided to the Information Technology (IT) department and select providers in Occupational Safety and Health Administration (OSHA) regulations. This investment in staff capacity has strengthened the project's internal capabilities and compliance standards. Notably, the project's successful funding of psychiatry 1099 contractual services from Dr. Melinda Roth highlights a commitment to leveraging specialized expertise for comprehensive care delivery. Overall, the project's multifaceted approach and collaborative efforts have positioned it as a vital resource in

addressing the complex needs of individuals grappling with substance abuse and mental health issues in the Sokaogon Chippewa Community.

There were 25 people who received psychiatric services, one person received residential treatment services, 30 people received recovery coach services, 44 people received naloxone, and 134 people were served through behavioral health services.

### **St. Croix Chippewa Indians of Wisconsin**

The Tribal nation has been able to use the funds for treatment and to work on bringing the culture back. The Tribal nation is continuously moving forward with teaching prevention on opioid use and harm reduction. There were 70 people who scheduled individual visits and 46 individual visits were completed. There were 58 people who attended therapeutic groups, four people attended overdose prevention training, 180 people received naloxone, and six people received transitional living or residential treatment services. A positive outcome from receiving these funds is that the communities are coming together to teach and learn about bringing the culture back. The Rosetta Stone is a great asset for learning the language for the youth and the elders. The cultural events that the Tribal nation is currently holding are getting a great response (23-27 people at each event).

### **Stockbridge-Munsee Community**

The Stockbridge-Munsee Community used the opioid abatement funds primarily through the Stockbridge-Munsee Health and Wellness Center (SMHWC). The funding was used to pay for training a pharmacist and a licensed professional counselor to better monitor for substance use disorders. This included training on pain management contract monitoring, medication-assisted treatment, and the counseling needed for substance use disorders. The SMHWC also used funds to purchase fentanyl test kits.

The Tribe would like to set up a peer recovery coach program that is available after hours. This program is still in the works, but the sustainability of this program seems to be reliant on grant funding.

SMHWC worked with the executive team to create an internal dashboard for measuring drug use in the community. This dashboard focuses on measures such as drug-related incidents through the employment base, police reports, emergency room visits for drug-related health issues, ambulance/EMS response to overdose, and other areas. The dashboard seems to be limited in its capacity, and the Tribal nation is seeking measures to better reflect the drug use concern in our community.

Two people received in-patient services, six people received MAT, 31 people received naloxone, and 96 fentanyl test strip kits were distributed.

### **Central Alert System**

The overdose alert system, or Wisconsin Suspected Overdose Alerts for Rapid Response (WiSOARR), is a secure web-based application currently in development at DHS. The system recently finished the first round of development. The first round of internal testing and review, or the alpha phase, was completed on February 9. System developments based on feedback solicited during the alpha phase is currently underway. The first version of the system leverages two near-real time data sources – ambulance runs and emergency department visits – for suspected overdose surveillance and anomaly detection. To date, three main features have undergone initial testing:

- Mapping and analytics dashboard: Users will be able to visualize approximate locations of suspected overdose events based on filters selected. Basic summary analytics (e.g., overdose counts, demographic information, and time series visualizations) are also available.
- Customized alert configuration module: Users will be able to configure alert profiles, which allow the user to opt in to receive alerts for deviations above a designated threshold based on the number of suspected overdoses captured via a specific data source, time frame, geographical area, and substance type. A user may create, share, and subscribe to any number of alert profiles. Alerts are disseminated via email and visible within the web application.
- User account administration: User access will be provided via discrete user groups. The application facilitates the creation of user groups by DHS administrators, assignment of local administrators to create accounts for staff, and maintenance of users' data use agreements.

Work has also been completed to prepare for integration of data from coroner, medical examiners, and public safety partners. Coroners and medical examiners will be able to submit timely, preliminary information on fatal overdose incidents either by manual form submission in the application, or they may work with DHS staff to set up direct submissions to WiSOARR via an application programming interface. Law enforcement officers may submit overdose incident information via Badger TraCS. Development of the infrastructure necessary to integrate these two new data sources is nearing completion ahead of schedule.

Further progress has also been made on a sustainability and communications plan to ensure the smooth launch and longevity of the application beyond its initial launch, currently planned for late 2024.

DHS uses braiding funding sources to support the development and implementation of WiSOARR. Funds continue to be drawn from American Rescue Plan Act (ARPA) funds and once expended, DHS will begin utilizing settlement funds to complete this project.

### **K-12 Evidence-Based Substance Use Prevention Curriculums or Programs**

DHS allocated \$250,000 to the Wisconsin Department of Public Instruction for grants related to K-12 evidence-based substance use prevention curriculums or programs.

#### **Appleton Area School District**

They continue to work to revise the Student Assistance Program (SAP) for students with known substance use. They have provided educational lessons on the impact of substance use, addressing poor adaptive coping skills, building self-regulation, and providing individual and small group support. Improved SAP programs have resulted in students who are better able to self-regulate and evaluate decisions that promote wellbeing. Various workgroups have been working to identify needs and opportunities to address gaps in prevention education. They have also reviewed resources and collaborated with community agencies in the process of developing and imbedding prevention curriculum and family engagement opportunities. The workgroup efforts have led to the development of local protocols, resource review, and gap analysis.

#### **Dodgeville School District**

Received a presentation on trauma informed care which evaluation data showed an overall positive experience. Since then, the staff have received monthly extended training sessions. Four staff attended the substance use prevention conference. The school resource officer provided DARE education to all fifth-grade students.

### **Eau Claire School District**

Contracted with outside providers to mentor 36 at-risk high school youth on a weekly basis. To make informed decisions on who would benefit from mentoring, they implemented a social-emotional-learning screener to assist in identification. Along with individual mentoring, community-based agencies have partnered with classrooms to hold whole group sessions to benefit all students at some level. They developed a biweekly progress monitoring tool to obtain feedback from students to plan next steps and to gauge the success of the program.

### **Escuela Verde**

Began providing a class on opioid misuse prevention that is aimed at having students create a curriculum on the topic.

### **Gale-Ettrick-Trempealeau School District**

Purchased the Teen Intervene prevention curriculum for middle school, high school, and alternative high school. They sent school counselors and school psychologists to several related trainings at the Cooperative Educational Services Agency (CESA), including a training for Wisconsin Mental Health Framework which helps them align their services and respond well to students who are using, or are at-risk for using, opioids. They also established a partnership with a local counseling service to serve students who have addictions and will also be giving a talk to the high school students about vaping.

### **Holy Redeemer Christian Academy**

The school health teacher started implementing the curriculum Hope and Opioid Prevention Education (HOPE). They worked with Vivent Health and obtained Narcan®; Vivent is also scheduled as a guest speaker at the school. They hired a new provider who has a suboxone certificate and who is board certified as a psychiatric mental health nurse practitioner.

### **Horizon High School**

The Horizon High School counselor provides daily individual and group counseling sessions for all students using materials from the Wisconsin Dose of Reality website and Botvin curriculum. All six staff members received Narcan® training. The school director and counselor registered for the Opioids, Stimulants, and Trauma Summit Training in Wisconsin Dells in May.

### **Johnson Creek School District**

Conducted the first in a series of a three-part knowledge is power informational series on February 11, 2024, called Substance Misuse Education Series. This provided information on tobacco, nicotine, vaping, and alcohol. March's event will address opioids, fentanyl, and illicit substances. April's event will address cannabis.

### **Great Lakes Community Conservation Corps - CERT School**

School personnel have focused on building teams among students, setting norms and expectations, establishing a safe and supportive space, and providing service beyond oneself to others as a unifying strategy to strengthen bonds and relationships between CERT School faculty and students. The intent is to facilitate student personal growth together as one CERT School community through service to others. To date, more than 3,000 hours have been invested by 57 students to provide direct service to benefit others in their community. United-in-service projects have included the improvement of walking trails on the near south side of Milwaukee, beautifying north side neighborhoods, and restoration work to increase wildlife habitat in rural areas of southeastern Wisconsin. CERT School issued signature uniforms to students to reinforce a sense of loyalty. Although formal pre-post qualitative surveys have yet to be completed, the positive response of current students has manifested in their referral of other family members and

friends to enroll in CERT School and its comprehensive programming that features a sense of surrogate family and strong adult-student bonds. CERT School experienced a 30% increase in enrollment for the Spring 2024 semester following the implementation of its contextualized Strengthening Families Program practices and implementation.

### **Milwaukee Public Schools**

Working on merging the Vector Solutions (VS) platform with their Clever learning platform. Once key staff attain the experience, they can be the school champion around using the VS platform. They will hold professional development sessions at the participating schools in March to highlight the benefits health teachers have experienced using the platform and to share how the rest of the staff can apply the resources. This will give health teachers two months to acquire information and feedback to present to their schools. School social workers, counselors, etc. face student challenges daily, and this resource can support them with addressing student concerns.

### **Oregon School District**

Trained a staff member to offer in person cessation supports for students as requested. Developed an active Positive Social Norms Student Advocacy team who are leading a school year campaign to counter misperceptions around vape, alcohol and cannabis use. Their campaign is focusing on "Joining the Crowd" of the majority of students who do not use. In January, a Heritage Spanish Advocacy team was formed to help to address the high number of Hispanic students who have been found vaping. The group is currently developing presentations in Spanish to educate our Spanish speaking parents about the dangers of vaping and what to do if they think their teen is vaping as well as to talk to students in our Heritage Spanish classes in grades 5-8 to support no use. These youth and youth in our KEYS Club were able to attend a Youth Leadership Summit training in January and will be coming back together with other local school group participants in May to share what they have been working on and to plan forward. Adult leaders in the district have been able to use these funds to continue to learn more about prevention, trauma, and mental health to better support our students and families.

### **Oshkosh Area School District**

Currently working on arranging community partners and getting staff members trained to support students with alcohol or other drug violations.

### **Our Lady of the Lake Catholic School**

Materials from The Courage to Speak Foundation were ordered and received. It was used in grades 4-6 for education about staying away from illegal drugs. There was also a book called Sunny's Story about a young person who got mixed up with drugs and lost their life in an overdose. Students made posters about having the courage to speak out and say no to drugs and alcohol. They wrote essays and presented them in their classes.

### **School District of Beloit**

Their project is delayed due to an unexpected departure of the grant coordinator.

### **School District of Black Hawk**

They completed implementation of the Botvin's Life Skills Training to 3rd, 6th, 8th, and 11th grades. Currently working with 4th and 7th grades. The remainder of the school year we will be completing 5th, 9th, and 10th grades. They completed an initial survey/pre-test of each student participating. The plan will be to also complete survey/post-test of each student during the month of May. This will help them to better gauge the information that was disbursed and how student opinions and/or feelings may have changed regarding material presented to include smoking, alcohol use, stress management, vaping, decision making, self-esteem, advertising, stress

management, communication, social skills, and assertiveness. 3rd – 28 students completed except post survey; 4th – 19 students in process; 5th – 30 students scheduled to start mid-March; 6th – 24 students completed; 7th – 23 students in process; 8th – 21 students completed; 9th – 33 students scheduled to start mid-March; 10th – 29 students scheduled to start mid-March; 11th – 25 students completed. To date, the feedback informally from students is that they have enjoyed the material discussed. It allowed staff to spend time with students in smaller settings (classroom) rather than just seeing them when they have a medical issue in the health office.

### **School District of Black River Falls**

They have gone through an extensive process looking at various factors in the district including mental health and protective factors. Through root cause work they identified a need for a screener to help identify at-risk behaviors early so that they can be preventive in their work with students rather than reactive. They went through an extensive process to select a screener that will work in their district, and they have worked on vision casting with the staff who will be implementing the screener. They have an action plan for professional development and plan to fully implement the screener in January.

### **School District of Lodi**

Their program coordinator attended the Wisconsin prevention conference. There were 85 12th graders in Lodi High School who were trained in the recognition of an opioid overdose and how to use Narcan®. The core medical teams from each school building will also be trained in Narcan®. A Drug Identification Training for Educational Professionals (DITEP) training for staff has been scheduled for May 29. And a summer safety fair is being planned with Narcan® trainings being offered hourly for attendees at the event.

### **Shawano School District**

They have worked with Base Education to identify interventions for students. The lead for this project has been out on leave for the bulk of this project and will resume working on this upon their return.

### **St. Joseph School-Archdiocese of Milwaukee**

Prior to the start of their DARE Program, they surveyed 5th and 6th grader students to learn more about their knowledge of the types of drugs in our community, what the definition of a drug is, and what harm drugs can do to a middle school and high school student. They are halfway through the DARE program and did another survey utilizing the same questions to compare student responses to the questions. At this point, the student responses have shown a 64% increase in their knowledge of the type of drugs in our community, 78% increase in their knowledge of the harm drugs can do to a middle school and high school student, and a 74% increase in their knowledge of the definition of what a drug is. They will complete the same survey at the end of the program to gather more data on the success of the program and to find areas of improvement for the remainder of the year and next year.

### **Superior School District**

They purchased the opiate curriculum lesson from Botvin and have completed lessons in the beginning of January with approximately half (153 of 290) of the 9th grade students. The other half of the students will receive the lessons in March. They had two tabling events at the high school where materials were offered to parents who were present in the building for parent-teacher conferences. On both Feb 27 and March 5, they will be hosting Hidden in Plain Sight events at both the middle and high school (a total of 4 events). These provide an opportunity for parents, teachers and others who work with adolescents to experience and explore the environment of a teenager and learn to spot signs of possible substance use and risky behavior.

The purpose of the exhibit/event is to help parents and other adults see the environment with new eyes, to see the warning signs that may be obvious once they are pointed out, and then help them have a conversation with the teen to stop dangerous behaviors before the worst happens - addiction, legal trouble, injury, or even death. On Thursday, April 4, they are hosting a community event at the high school called, "Ask the Expert: Opioid Awareness in the Spartan Community." This is open to everyone in the district. They have community partners coming in to provide resource tables. They will be there to talk with folks and provide information related to opiate use, opiate use prevention, and harm reduction including where to get access to fentanyl test strips and Narcan® in addition to mental health providers, etc. They have a panel of local experts who will speak about what is happening in the community around opiate use in general and specifically with youth as well as what the community is doing to address the issue. Panelists include an emergency room doctor, law enforcement, the District Attorney, Douglas County Health and Human Services, a treatment provider, and a harm reduction specialist. There will be an opportunity for questions and discussion. They are hoping to record all or most of the panel presentation (based on participant consent) to share on the district website for folks who cannot make it to the event. They are also working with a group of student leaders who want to do something to address opiate use among their peers; this is a work in progress. All staff will be receiving information about opiate use that will be shared throughout the building. The social worker is working one-on-one with more than ten students in the building who are or have been affected by someone's opiate use, their own or someone else's.

#### **Up Christian Academy**

Their focus is on ensuring that scholars are making good choices through the utilization of Get Smart About Drugs curriculum.

#### **Waupun School District**

Due to significant staffing changes, their workplan was updated and implementation will begin in March.

#### **Wolf River Lutheran**

They ordered a program from Prevention Plus Wellness and are completing the training to be able to implement the program. Student programs are scheduled as follows: February 9, February 16, and March 1 during organization time. They scheduled the parent program March 2.

#### **MAT**

DHS completed the contracting process with all grantees during this period.

#### **Wisconsin Society of Addiction Medicine (WISAM)**

Their pilot project is to develop telemedicine for Wisconsinites to provide access and induction of buprenorphine products with the use of peer support and recovery coaching. They plan to develop a warm handoff to the WISAM Hotline from the State Opioid Response (SOR) funded Addiction Recovery Helpline and to community providers within Wisconsin. WISAM has started the development of their process and connection with the Addiction Recovery Helpline.

#### **Milwaukee Health Systems (Eau Claire), Milwaukee Health Systems (Appleton), Quality Addiction Management (Beloit), and Addiction Medical Solutions (Janesville)**

All began work on the development of a mobile opioid treatment program unit to provide all three forms of U.S. Food and Drug Administration approved medications for opioid use disorder, clinical services, and peer support and recovery coach services. These units will also provide overdose prevention and harm reduction supplies including naloxone, fentanyl test strips, and referrals to community services to address the needs of the whole person.



### **Room and Board Costs for Residential Substance Use Disorder Treatment**

Wisconsin Medicaid has offered a residential substance use disorder treatment benefit since February 2021. It provides treatment for youth and adults to promote recovery from substance use disorder and reduce the incidence and duration of institutional care Medicaid members might otherwise need. Federal law prohibits Medicaid from reimbursing for the costs of room and board. Covering the costs of room and board is a barrier to residential substance use disorder treatment for many Medicaid members. To make this benefit more accessible, DHS solicited applications from Tribal nations and counties for funding to cover the room and board costs for individuals with an opioid use disorder in 2023. During 2023, awarded agencies provided services to 937 people for a total of 33,147 days of services.

### **Law Enforcement Agencies Opioid Abatement Efforts**

The first application period for this funding opportunity closed on June 2, 2023. A second posting to allocate the remaining funds was recently awarded, see Appendix B for details. Accomplishments and other relevant metrics from the second-round awardees will be shared in future reports, once implementation begins.

#### **Buffalo County Sheriff's Office**

Purchased 1,111 drug deactivation kits and will begin distribution soon.

#### **Columbia County Sheriff's Office**

Began serving jail residents with an opioid use disorder with a treatment program on November 1, 2023. Two people have been screened for an opioid use disorder, two people have been enrolled in an MAT program, two people began receiving methadone treatment, 10 people received the overdose reversal medication naloxone, and two people received case management or care coordination services. They are currently working on a contract for the provision of peer support services.

#### **Eau Claire County Sheriff's Office**

They have established the county-level partners for this project and an ongoing meeting schedule. They developed position descriptions for the data specialist and the case manager and conducted interviews for the case manager position. They drafted a request for proposals to provide peer support services for their program and established a vendor and design for their drug disposal box. They also began outlining training topics for future education opportunities.

#### **Marathon County Sheriff's Office**

They established contracts and agreements with program partners and enrolled the treatment provider into the jail visitation system to ensure functional technology. Therapeutic groups, SMART and Seeking Safety, began meeting. They added additional questions to their booking and medical screening process and created a new Crystal report to identify people in their care with an opiate use disorder. The first jail resident was entered in the treatment program on December 7, 2023. A total of 815 people were screened for an opioid use disorder, 12 people have been enrolled in the MAT program, one person received methadone treatment, nine people received buprenorphine treatment, 12 people received naloxone, eight people received peer support services, and 12 people received case management or care coordination services. Three people were discharged from the program due to their release from incarceration. One staff member attended 15 hours of training or education. Topics included: MAT services in the Wausau area, treatment of substance use disorders in unhoused individuals, the spike alert communication process, "imagine day" in Marathon County, innovations in the treatment of opioid use disorder in pregnancy, long-acting injectable buprenorphine treatments for opioid use disorder, and supporting older adult populations within the criminal justice system.

**Sawyer County Sheriff’s Office**

Law enforcement use of the Proxy and Pre-Charge Diversion Training for law enforcement was held on December 5-6, 2023, at the Sawyer County Sheriff's Department. The training was conducted by Eau Claire County departmental staff including, Eau Claire County Sheriff, Criminal Justice Services Director, and Program Coordinator, as well as their data analyst. The training included how to use the proxy, data from diversion programs, systems mapping, the importance of collaboration, and there was an opportunity for law enforcement to ask questions about the process. The agency has also been trying to recruit successful diversion candidates to staff positions within the program as peer support providers. They have been working with the Alcoholic Anonymous and Narcotics Anonymous communities to provide program support. There were 63 staff who attended an education or training event for a total of 126 hours.

**Village of Cottage Grove**

They ordered and received a drug disposal box and will install it once the signage arrives.

**Statewide Community-Based Organization for After-School Programming**

Funds were awarded to the Boys and Girls Club Fox Valley, which represents a network of 26 Boys and Girls Clubs that serve more than 70 communities across the state. This funding will support after-school programming for youth focused on providing them information and skills to make healthy decisions through the SMART Moves Program, a program developed by the Boys and Girls Club of America.

There were 21 organizations that began implementation before January 2024; the remaining locations are starting program implementation in January or early spring. The Boys and Girls Club of Sheboygan completed their program and are starting an additional session in spring to reach more youth. A total of 570 program hours had been completed by the end of 2023.

**Hub and Spoke Pilot Program**

During this reporting period, DHS continued regular technical assistance onboarding meetings with Vin Baker Recovery while the site secured state and federal approvals for their new site and started hiring and training staff. Baker Recovery will start serving clients the week of March 11, 2024.

**Substance Use Disorder Treatment Platform**

DHS completed the contracting process with Shatterproof to collect and maintain information regarding substance use disorder treatment providers for the state’s substance use disorder treatment platform. In the month of January, 1,576 people used the Treatment Atlas website, 149 people completed the Treatment Atlas Assessment, and 27 patient experience surveys were submitted. Shatterproof also met with four community groups to provide a demonstration of their site and discuss the site components.

**Surgical Collaborative of Wisconsin**

DHS is engaged in the contracting process with the Surgical Collaborative of Wisconsin to provide training to Wisconsin surgeons on practices to prevent prescription opioid misuse following surgery. Accomplishments and other relevant metrics will be reported when implementation begins.

Please contact me if you have any questions about this report.

Sincerely,



Kirsten L. Johnson  
Secretary-designee

**Appendix A: Awards for Law Enforcement Agencies – Fentanyl Test Strip (FTS) Supplies**

<b>Awards for Law Enforcement Agencies - Fentanyl Test Strip Supplies</b>				
<b>Agency</b>	<b>County/Tribe of Agency</b>	<b># FTS Strips</b>	<b># FTS Kits</b>	<b>Awarded Amount</b>
<b>TOTAL</b>		<b>10,600</b>	<b>3,167</b>	<b>\$ 15,834</b>
Kenosha County Sheriff's Department	Kenosha	500	500	\$ 1,385
Dane County Sheriff's Office	Dane	2,400	600	\$ 3,372
Amery Police Department	Polk	100	100	\$ 277
Department of Veterans Affairs Tomah VA Police	Monroe	400	0	\$ 380
Westby Police Department	Vernon	200	0	\$ 190
City of Hayward Police Department	Sawyer	800	8	\$ 775
Wood County Sheriff's Department	Wood	1,500	500	\$ 2,335
City of Dodgeville Police Department	Iowa	400	10	\$ 398
Menomonie Police Department	Dunn	400	180	\$ 708
Frederic Police Department	Polk	100	25	\$ 141
Edgerton Police Department	Rock	300	30	\$ 340
University of Wisconsin-Milwaukee Police Department	Milwaukee	1,000	50	\$ 1,041
City of Madison Police Department	Dane	0	300	\$ 546
Ridgeway Marshal's Office	Iowa	200	4	\$ 197
Iron County Sheriff	Iron	200	25	\$ 236
Dodge County Sheriff's Office	Dodge	300	0	\$ 285
WI State Fair Park Police Department	Milwaukee	100	25	\$ 141
Marinette County Sheriff's Office	Marinette	200	5	\$ 199
Black Creek Police	Outagamie	100	50	\$ 186
Door County Sheriff's Office	Door	200	25	\$ 236
Village of Eagle Police Department	Waukesha	200	20	\$ 226
Pepin County Sheriff's Office	Pepin	500	50	\$ 566
Blanchardville Police Department	Lafayette	100	10	\$ 113
Tomahawk Police Department	Lincoln	400	400	\$ 1,108
Superior Police Department	Douglas	0	250	\$ 455

## Appendix B: Awards for Law Enforcement Opioid Abatement Efforts

<b>Awards for Law Enforcement Opioid Abatement Efforts</b>		
<b>Agency</b>	<b>Program Description</b>	<b>Awarded Amount</b>
<b>TOTAL</b>		<b>\$ 1,878,367</b>
Ashland County Sheriff's Office*	Medications for Opioid Use Disorder in Jails	\$ 228,152
Crawford County Sheriff's Office*	Drug Disposal	\$ 1,000
Jackson County Sheriff's Department*	Medication Assisted Treatment Education; Medications for Opioid Use Disorder in Jails; Deflection Programming	\$ 425,352
Kenosha County Sheriff's Department	Drug Disposal	\$ 5,000
Madison Police Department	Deflection Programming	\$ 183,511
Menominee Indian Tribe*	Medication Assisted Treatment Education; Drug Disposal	\$ 14,000
Milwaukee County Sheriff's Office	Medication Assisted Treatment Education; Drug Disposal	\$ 15,000
Racine County Sheriff's Office	Medications for Opioid Use Disorder in Jails	\$ 400,000
Rhineland Police Department*	Deflection Programming	\$ 22,676
Rock County Sheriff's Department	Medication Assisted Treatment Education; Medications for Opioid Use Disorder in Jails	\$ 328,676
Shawano County Sheriff's Office*	Drug Disposal	\$ 5,000
Sparta Police Department*	Deflection Programming	\$ 250,000

\*Agencies representing jurisdictions of less than 70,000 people

**Appendix C: Awards for Room and Board Costs for Residential Substance Use Disorder Treatment**

<b>Awards for Room and Board Costs for Residential Substance Use Disorder Treatment</b>		
<b>Agency</b>	<b>County or Tribe Served</b>	<b>Awarded Amount</b>
<b>TOTAL</b>		<b>\$ 2,500,000</b>
Adams County HHSD	Adams County	\$ 3,004
Ashland County HHS	Ashland County	\$ 19,561
Barron County DHHS	Barron County	\$ 13,625
Bayfield County DHS	Bayfield County	\$ 10,254
Brown County HHSD	Brown County	\$ 37,366
Chippewa County DHS	Chippewa County	\$ 13,165
Clark County CS	Clark County	\$ 17,553
Columbia County DHHS	Columbia County	\$ 32,731
Crawford County HSD	Crawford County	\$ 10,726
Dane County DHS	Dane County	\$ 86,901
Dodge County HSHD	Dodge County	\$ 26,395
Door County DHS	Door County	\$ 8,751
Douglas County DHHS	Douglas County	\$ 11,932
Dunn County DHS	Dunn County	\$ 84,256
Eau Claire County DHS	Eau Claire County	\$ 62,320
Fond Du Lac County DCP	Fond Du Lac County	\$ 11,899
Green County HSD	Green County	\$ 12,104
Green Lake County DHHS	Green Lake County	\$ 26,591
Ho-Chunk Nation	Ho-Chunk Nation	\$ 109,863
Human Service Center	Forest, Oneida, and Vilas Counties	\$ 6,704
Jackson County DHHS	Jackson County	\$ 8,781
Jefferson County HSD	Jefferson County	\$ 20,545
Kenosha County DHS	Kenosha County	\$ 50,276
Kewaunee County DHS	Kewaunee County	\$ 8,379
La Crosse County HSD	La Crosse County	\$ 73,674
Lac Courte Oreilles Band	Lac Courte Oreilles Band	\$ 139,656
Lac du Flambeau Band	Lac du Flambeau Band	\$ 121,035
Manitowoc County HSD	Manitowoc County	\$ 101,018
Menominee County HSD	Menominee County	\$ 53,777
Milwaukee County DHHS	Milwaukee County	\$ 493,413
Monroe County DHS	Monroe County	\$ 10,949
North Central Health Care	Langlade, Lincoln, and Marathon Counties	\$ 97,759
Outagamie County DHHS	Outagamie County	\$ 48,785
Ozaukee County DHS	Ozaukee County	\$ 29,143
Pepin County DHS	Pepin County	\$ 8,777
Racine County HSD	Racine County	\$ 26,814
Richland County HHS	Richland County	\$ 31,283

Rock County HSD	Rock County	\$ 98,821
Rusk County HHSD	Rusk County	\$ 6,517
Saint Croix Chippewa	Saint Croix Chippewa	\$ 57,005
Sauk County DHS	Sauk County	\$ 15,900
Shawano County HSD	Shawano County	\$ 16,386
Sheboygan County HHSD	Sheboygan County	\$ 56,607
St Croix County DHHS	St Croix County	\$ 18,248
Taylor County HSD	Taylor County	\$ 11,731
Unified Community Service	Grant and Iowa Counties	\$ 44,690
Washington County HSD	Washington County	\$ 39,762
Waupaca County DHHS	Waupaca County	\$ 20,781
Waushara County DHS	Waushara County	\$ 18,993
Winnebago County DHS	Winnebago County	\$ 93,104
Wood County DHS	Wood County	\$ 71,690