State of Wisconsin
Department of Health Services
Tony Evers, Governor
Kirsten L. Johnson, Secretary

June 30, 2025

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:

Below is the Fiscal Year 25 Quarter 4 (FY 25 Q4) report of expenditures from the opioid settlement dollars received through the National Prescription Opiate Litigation, Case No. MDL 2804 (NPOL).

A. ***Settlement Funds Received***

All Settlement Funds Received		
2022 Total	$	30,704,645.33
2023 Total	$	7,988,983.36
2024 Total	$	36,572,223.37
January 2025	$	88,336.71
April 2025	$	1,383,502.90
TOTAL	**$**	**76,737,691.67**

B. ***Funding Amounts Awarded or Allocated***

As of June 19, 2025, DHS has no funding opportunities open for application, one funding opportunity under review, and a cumulative total of $67,354,771 in awards and allocations.

Funding Opportunities Under Review:
The table below summarizes the grant funding opportunity DHS currently has under review.

Funding Opportunities Under Review		
Category	**Available Funding**	
TOTAL	**$**	**1,000,000**
Community-Based Opioid Prevention	$	1,000,000

FY25 Community-Based Prevention – Competitive Grant Program: Community-Based Opioid Prevention

Community anti-drug coalitions, nonprofit agencies, and faith-based organizations were invited to apply for funds to support prevention programs throughout Wisconsin. Entities can use the awarded funds to support the following activities: drug prevention; evidence-informed prevention; stigma reduction; training in evidence-informed implementation; community-based education or intervention services; programs and curricula to address mental health needs of young people; or other activities permissible under opioid settlement agreements.

The initial application period closed on June 17, 2025. Applications are currently under review. Awards will be shared in future quarterly reports.

Awarded & Allocated Funds:

The following table summarizes the amount of funding DHS allocated and awarded by category of use during FY 25 Q4 and cumulatively.

Funding Awards & Allocations by Category			
Category	**Previous Awards**	**FY 25 Q4**	**Cumulative Awards**
TOTAL	**$ 66,391,191**	**$ 963,580**	**$ 67,354,771**
Expand Naloxone Direct Program & Test Strips	$ 8,541,191	$ 963,580	$ 9,504,771
Capital Projects	$ 17,700,000	$ -	$ 17,700,000
Funding for Tribal Nations	$ 12,000,000	$ -	$ 12,000,000
Central Alert System	$ 500,000	$ -	$ 500,000
K-12 Evidence-Based Prevention	$ 1,250,000	$ -	$ 1,250,000
Medication Assisted Treatment	$ 5,500,000	$ -	$ 5,500,000
Room & Board for Residential Treatment	$ 7,750,000	$ -	$ 7,750,000
Law Enforcement Agencies	$ 6,000,000	$ -	$ 6,000,000
Statewide Prevention	$ 1,750,000	$ -	$ 1,750,000
Hub and Spoke Pilot Program	$ 500,000	$ -	$ 500,000
Substance Use Disorder Treatment Platform	$ 1,500,000	$ -	$ 1,500,000
Surgical Collaborative of Wisconsin	$ 300,000	$ -	$ 300,000
Community Based Prevention - AWY	$ 500,000	$ -	$ 500,000
Medical College of Wisconsin - Periscope Project	$ 600,000	$ -	$ 600,000
Harm Reduction - Electronic Lock Boxes - DOC	$ 500,000	$ -	$ 500,000
Data Collection & Surveillance System	$ 1,500,000	$ -	$ 1,500,000
Community Based Prevention - Opioid Prevention	$ -	$ -	$ -

Expand Narcan ® Direct Program and Test Strips – Law Enforcement & EMS

During this reporting period, the Naloxone Direct Program and Test Strip initiative were allocated $400,000 to prioritize and expand naloxone availability and to distribute test strips to Law Enforcement Agencies.

Also, during this reporting period, DHS supported two separate funding opportunities: Law Enforcement Harm Reduction Program and EMS Leave Behind Program.

Law enforcement and EMS agencies interested in receiving nasal naloxone and fentanyl test strip kits at no cost to distribute to community members in an attempt to prevent drug overdoses and save lives were invited to apply for this opportunity. Leave behind programs allow law enforcement and EMS professionals to distribute (leave behind) drug overdose prevention tools and resources at the scene of care with the person experiencing a drug overdose and/or their social networks (family, friends, roommates, etc.). Leave behind programs also create opportunities to provide the person and/or their social networks connections to local treatment providers, harm reduction organizations, and other

behavioral health supports. Overdose survivors face an increased risk of having a fatal drug overdose in the future. The supplies shared through leave behind programs can reverse an opioid overdose and keep the individual alive if administered in time. Law enforcement agencies may also use this nasal naloxone when responding to a drug overdose in the community. The fentanyl test strips provided through this opportunity are for community distribution only.

DHS awarded $372,483.54 in supplies to all eligible 92 Law Enforcement agencies who applied, for a total of 904 cases of naloxone (345 for community distribution, 524 for law enforcement use, and 35 for public health vending machines) and 2,441 FTS kits (all for community distribution).

DHS awarded $191,096.74 in supplies to all 16 EMS agency applicants who applied for a total of 423 cases of naloxone (413 for EMS distribution and 10 for public health vending machines) and 3,971 FTS kits (3,871 for EMS distribution and 100 for public health vending machines).

Appendix A lists the awards provided as a part of both application processes.

Opioid Abatement Efforts by Law Enforcement Agencies

As noted in the FY 25 Q2 report, DHS was directed to allocate $3 million for distribution to law enforcement agencies, under a competitive grant program, for the following purposes: (a) medication-assisted treatment education and awareness training; (b) community drug disposal programs; (c) treatment of jail inmates with opioid use disorder; and (d) supporting pre-arrest or pre-arraignment diversion and deflection strategies for persons with opioid use disorder or mental health conditions. At least $1 million of this amount was to be reserved for agencies in counties or municipalities with 70,000 or fewer residents. A request for applications for this funding was made public in August 2024 with awards announced in the FY 25 Q2 report. However, as noted in that report, there were insufficient applications to award counties or municipalities with 70,000 or fewer residents and a total of $80,030 remained for distribution to law enforcement agencies. DHS completed a targeted outreach process to identify counties with a population under 70,000 residents. Contact was made with those counties to share information regarding available funding and the grant application opportunity. Six agencies applied and were awarded the remaining $80,030.

Appendix B lists the awards provided as a part of the targeted outreach process.

Room and Board Costs for Medicaid Members with an Opioid Use Disorder or at Risk for an Overdose in Residential Substance Use Disorder Treatment Programs

As noted in FY 25 Q2 reporting, DHS was directed to allocate $2.75 million to fund room and board costs for Medicaid recipients who receive services under Medicaid's residential substance use disorder treatment program. A request for applications for this funding was made public in September 2024. All applicants received awards.

Appendix C provides an updated list of awards as a part of this application process.

C. ***Funding Expenditures***

As of June 10, 2025, a total of $26,624,672 in expenditures have been recorded for programs supported with settlement funds; this includes $22,009,772 in reported previous expenditures ($1,561,298 in additional expenditures posted to FY 25 Q3 after the last report was submitted) and $4,614,900 of expenditures in FY 25 Q4.

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.

Expenditures by Category			
Category	Previously Expended	FY 25 Q3 Expenditures	Cumulative Expenditures
TOTAL	**$ 22,009,772**	**$ 4,614,900**	**$ 26,624,672**
Expand Narcan® Direct Program	$ 4,172,500	$ 397,800	$ 4,570,300
Distribute Fentanyl Test Strips	$ 670,611	$ 1,300	$ 671,911
Capital Projects	$ 5,653,700	$ 1,239,700	$ 6,893,400
Funding for Tribal Nations	$ 2,717,106	$ 1,642,100	$ 4,359,206
K-12 Evidence-Based Prevention	$ 197,615	$ -	$ 197,615
Medication Assisted Treatment	$ 2,427,300	$ -	$ 2,427,300
Room and Board for Residential Treatment	$ 3,157,600	$ 86,700	$ 3,244,300
Law Enforcement Agencies	$ 854,200	$ 770,800	$ 1,625,000
Statewide After-School Prevention	$ 1,190,400	$ 290,500	$ 1,480,900
Hub and Spoke Pilot Program	$ 385,900	$ 37,600	$ 423,500
Substance Use Disorder Treatment Platform	$ 299,340	$ -	$ 299,340
Surgical Collaborative of Wisconsin	$ 227,100	$ 27,700	$ 254,800
Community-Based Prevention	$ 56,400	$ 120,700	$ 177,100

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.

Naloxone (Narcan®) Direct Program

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

funding sources including settlement funds to allow for awards to support statewide naloxone saturation efforts.

During this reporting period, the NDP reports training 5,961 people in overdose prevention and naloxone administration and distributing 16,898 Narcan® kits (total of 33,796 doses). NDP agencies reported over 1,696 successful overdose reversals. Due to data collection limitations, the number of successful overdose reversals is an underreported amount.

As noted in previous reports, 51 agencies are supporting their local first responder (EMS and law enforcement) Leave Behind Programs. The total award to these 51 agencies represents 5,903 cases of naloxone. During this quarter, DHS issued two one-time funding opportunities to support law enforcement (naloxone for agency use and naloxone and fentanyl test strip kits community distribution) and EMS (naloxone and fentanyl test strip kits for community distribution). Updates for these agencies will be provided in future reports.

Test Strip Program - Law Enforcement
During this reporting period, existing partners of the Test Strip Program - Law Enforcement reports zero fentanyl test strips (and zero kits) ordered, distributing 129 strips (and 66 kits), and serving an estimated 99 individuals. Order numbers are low due to all orders having been placed in the previous quarters. As mentioned above, DHS issued a funding opportunity to support law enforcement (naloxone for agency use and naloxone and fentanyl test strip kits community distribution) during this reporting period. Updates for these agencies will be provided in future reports.

Public Health Vending Machines (PHVMs) provide Wisconsin an 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.

A select number of awarded agencies continue to be funded for PHVM programs for a second year. Agencies report current activities involving navigating impacts of federal funding restrictions, replenishing popular materials from existing machines, and adding new public health items to existing vending machines. In this quarter, this program is supporting 20 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. More than 20,000 individual supplies were distributed from PHVMs during this quarter, including more than 5,000 test strips or naloxone items.

Comments from the PHVM implementors reflect direct impact on their communities. Comments this quarter include positive outcomes from leveraging community support. In one case, not only has community support for and familiarity with harm reduction materials grown, but engagement with local elected officials has facilitated cooperative conversations about how to maximize their utility. At least one additional organization reported positive outcomes observed this quarter: “[EMS partners] continue to report decreased frequency of overdose related calls as well as increased reports of bystander administration of [naloxone].”

Harm Reduction Strategies – Electronic Lock Boxes
DHS was directed to fund harm reduction initiatives, including but not limited to programs that DHS currently administers. Of the funding for harm reduction strategies, DHS has allocated $500,000 to purchase electronic lock boxes for storing and tracking narcotics at the Department of Corrections

(DOC). DHS is actively working with DOC on this project with further details to be shared in future reports.

Capital Projects
Community-based providers offering prevention, harm reduction, treatment, and recovery services for individuals with an opioid use disorder were previously invited to apply for funds to support capital projects expanding services in Wisconsin. During the first round of awards, 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. Two of the three awarded agency contracts remain active currently. Contracting activities with Lighthouse Recovery Community Center, Inc. in Manitowoc County successfully concluded. Information regarding this project can be located in previous quarterly reports.

The second round of Capital Project funding recently concluded, allocating $7.7 million for projects that would expand prevention, harm reduction, treatment, and recovery services through the construction of new facilities and renovations of existing facilities. Two applications were awarded, and contracting has completed.

First Round Funding:

Arbor Place (Dunn County)
The construction of Arbor Place's Women and Children's Residential Treatment Unit has continued with the goal of meeting project and funding deadlines. DHS concerns related to design approval and regulatory requirements led to delays. Meetings have been held between Arbor Place and DHS to discuss concerns and workable solutions. As an outcome, Arbor Place has resubmitted application materials to OPRI for consideration. Arbor Place remains committed to the project and looks forward to creating and expanding residential treatment services for pregnant and parenting women.

Meta House (Milwaukee County)
Meta House made steady and meaningful progress on Project Horizon during this reporting period. Following their official groundbreaking in January, the construction site has been highly active. As of April 30, 2025, construction was approximately 27% complete. Key milestones achieved include completion of site excavation, pouring of footings and foundations, installation of earth retention walls, and foundation waterproofing. Structural work is well underway, with stair and elevator shafts completed, steel beams and columns erected in both the inpatient/residential and outpatient/administrative buildings, and installation of steel decking, railings, and framing in progress. Courtyard grading has reached subgrade, and grid lines have been established for all buildings to guide ongoing construction. Preparations for stair fabrication are also advancing, with stair shafts now measured. Coordination with contractors and state agencies continues to ensure the project remains on schedule for phased occupancy beginning in 2026.

Second Round Funding:

United Community Center (Milwaukee County)
The United Community Center (UCC) is making steady progress toward launching construction of its new men's residential facility. Since their last update, the project team expanded the floorplan to 14,000 square feet, ensuring ample space for resident needs. Key enhancements include a dedicated commons area designed to support exercise and mindfulness activities, host meetings and events, and foster social interaction among residents. This flexible space will be central to the facility's mission of promoting wellness, addressing mental health, and substance

use disorders. The project remains on schedule with design and planning milestones achieved as anticipated. The next steps include securing necessary permits and preparing the site for the start of building activities.

Apricity
Apricity continues to work with Gries Architecture for design of the campus and are close to completing the design for the building and parking lot. They have received approval from the Town of Grand Chute Board for an amendment to their current special use permit. The civil engineer completed the drawings to move the current easement and combine their two owned properties; easement has been submitted for approval. Design contractors for HVAC, plumbing and electrical have been approved and Catalyst Construction will have oversight of their work. Meetings with the project team occurs every other week for updates, deadlines, and assignments. The kitchen and dining room detailed design is 95% complete.

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; provide programs and activities with minimal demands or barriers for participants, while building upon the strengths of local tribal culture, tradition, and practices; and provide high quality, effective, equitable, understandable, and respectful prevention, harm reduction, treatment, and recovery efforts and services that are responsive to diverse cultural health belief and practices, preferred languages, health literacy, and other communication needs. While contracting with all 11 federally recognized tribal nations, DHS continues to provide technical assistance and attends the Tribal State Collaboration for Positive Change (TSCPC) monthly meetings.

Bad River Band of Lake Superior Chippewa – All contracting processes were completed this quarter, which enabled progress on all aspects of the proposed work. Several employment positions supported by this funding were posted, with applicants interviewed and positions filled, including youth prevention, harm reduction, and food access. Continued progress was made on providing access to cultural and spiritual support for individuals impacted by the opioid crisis via traditional medicine through the harm reduction program and support engaging in treaty harvesting. To facilitate regular contact with peer support specialists and navigators, phones, phone cards, and bus passes have been purchased and are being distributed to participants of the harm reduction program. Contracted peer support workers distributed thousands of doses of naloxone and connect individuals in the local area with access to sterile injection equipment and other lifesaving supplies. They customized a shed to house a public health vending machine, which is stocked with naloxone and other critical supplies. This shed is located in Odanah outside the Bad River Public Safety Building. They are planning to have a grand opening to publicize the new vending machine later this summer. Services provided during this reporting period include but are not limited to: community-based peer support – 1,372 people served; individuals trained in overdose reversal – 355 people served; received naloxone kit at no cost – 948 people served; traditional medicine sessions (sweat lodge, shake tent, individual consultations) – 89 people served; warming shelter services – 15 people served; youth drug prevention – 12 youth served.

Forest County Potawatomi - The progress during this reporting period has been slow but steady. Throughout the program, they have had a diverse range of clients benefit from their transitional living house. Notably, four graduates have completed the program, demonstrating their growth and readiness to move forward. Forest County Potawatomi are supporting three individuals who are actively engaged in the Transitional Living Program. Each is each working diligently towards their objectives, and each remain hopeful that they will soon reach graduation, stepping confidently into their next chapter.

Ho-Chunk Nation – Contracting delays contributed to a delay in efforts among the Ho-Chunk Nation. In April, Ho-Chunk Nation Behavioral Health met with the executive team to devise an actionable workaround that would allow Behavioral Health to execute purchases. Program implementation efforts are expected to increase now with funding secured.

Lac Courte Oreilles Band of Lake Superior Chippewa - During this reporting period, the Lac Courte Oreilles (LCO) Tribal Nation Opioid Abatement Efforts Program focused on three main priorities that have helped strengthen the community's response to the opioid crisis.

The first priority was continuing to build and support the LCO Men's Sober Living Home, "Endazhi-noojimong." The program provides recovery support services, transitional care, peer support, daily reflections, behavioral health classes, and monthly Ojibwe cultural activities for participants. These services help the sober living program grow and become more established. A major highlight this quarter is most participants have remained sober, moved forward in their programming phases, found employment, and received adult recovery services. Many of the participants are showing long-term commitment to their recovery journey, which is a sign of real progress. The staff have also received naloxone training and White Bison's Warrior Down/Recovery Coach training, both of which had a great impact on how the recovery advocates assist the program participants with their individual needs.

The second priority this quarter was strategic planning for the LCO Emergency Shelter, "Endazhi-wiidookaazod." A planning committee worked to develop updated policies and a new structure to better support harm reduction in the community. The plan includes offering short-term and overnight stays to make better use of the shelter. Renovations will soon begin to support a new kitchen, and new furniture was added to replace old/worn furniture. Harm reduction supplies and community outreach supports were also brought in. These changes help ensure the shelter better meets the community's needs in a more organized and effective way. To help support long-term outcomes, individuals who wish to stay at the shelter are now required to request an extension and show proof that they have enrolled in local housing programs within the reservation and Sawyer County areas.

The third focus for LCO was on strengthening the roles of the transitional care coordinator and program coordinator to provide more community support and transitional care services. These efforts mainly supported the men's sober living home participants and individuals staying at the emergency shelter. Staff work to meet individual needs, especially in areas like housing, transportation, and other necessities. The goal is to help participants regain stability in their lives through access to housing, work, Ojibwe culture, and reliable transportation.

Overall, this has been a very productive and busy quarter. LCO is proud of the positive impact being made through their programs. Individuals are moving forward in their sobriety and recovery journeys, and they continue to support healing and wellness in their community.

The Point of Intervention Specialist was on a leave of absence for most of this quarter, which made it difficult to track significant progress in providing intervention services within jails and prisons or assisting individuals in transitioning into treatment and recovery services. However, during the time they were available, the specialist supported a girls' youth prevention class in collaboration with the Indian Child Welfare/Trails Program. This effort focused on small cultural activities aimed at promoting wellness among youth who are at risk due to parental opioid/substance use.

The Transitional Care Coordinator actively works with participants in the sober living home and individuals at the emergency shelter to develop personalized transition plans supporting stability and continuity in each person's recovery journey. A strong emphasis is placed on peer support throughout this process, which has proven to be an important factor in helping individuals maintain long-term recovery. To strengthen the role, the Transitional Care Coordinator completed Parent Peer Support training, Naloxone Train-the-Trainer certification, and Recovery Coach training in addition to the current help peer support certification. These trainings and qualifications allow the Transitional Care Coordinator to provide care planning along with peer and cultural support. They also help lead sweat lodge ceremonies and regularly refers participants to local cultural activities and traditional healing practices. This culturally grounded approach helps individuals reconnect with their identity, traditions, and community as part of their healing and recovery process.

The Program Coordinator continues to supervise both the men's sober living home house manager and the emergency shelter house manager, offering ongoing guidance, training, and support. In addition, the Program Coordinator handles administrative responsibilities for the entire program. This includes strategic planning, managing policies and procedures, overseeing staff, developing programming, organizing training and Ojibwe cultural activities, and performing many other tasks necessary to operate both the shelter and sober living home effectively.

Grant funded staff maintain an active partnership with the LCO Behavioral Health Center/Bizhiki Wellness Center by participating in monthly sobriety feasts, grant meetings, and prevention coalition meetings. These collaborative efforts strengthen community support for program staff and participants in the Tribal Nation Opioid Abatement Efforts program, as well as for the staff and program participants of the LCO Men's Sober Living Home and Emergency Shelter. Together, they continue to promote recovery, harm reduction, and evidence-based practices across all programs.

Services provided during this reporting period include but are not limited to: Tribal Nation Abatement participants – 24 people served; community support outreach assistance for individuals at emergency shelter – 10 people served; LCO emergency shelter temporary stay (harm reduction) – 55 people served; intervention referral to Bizhiki Wellness – 4 people served; traditional Coordinated Care Services – 21 people served; hosted/assisted community events – 8 events attended.

Lac du Flambeau Band of Lake Superior Chippewa – During this project period, Lac du Flambeau Band of Lake Superior Chippewa has three individuals placed in sober living homes. They also held a round dance supported through this funding and other community programs.

Menominee Indian Tribe of Wisconsin – The Menominee Indian Tribe of Wisconsin continues to dispense harm reduction supplies to community members in need. Services provided during this reporting period include but are not limited to harm reduction kits dispensed – 20 people served; hygiene kits – 8 people served; Medication Assisted Treatment services – 7 people served; community events attended – 2 events.

Oneida Nation - Contracting was finalized during this quarter. During this reporting period 25 people received residential services, 99 people engaged with recovery coaches, and 47 people have begun receiving medication assisted treatment (MAT).

Red Cliff Band of Lake Superior Chippewa - The Red Cliff Band of Lake Superior Chippewa Wraparound Care Team is responsible for oversight and implementation of the opioid response efforts. The team consists of Health Administration, Behavioral Health, Wraparound Coordinator, Human/Family Service Administrator, Police Chief, Housing Service Manager and Judge. The team meets bi-weekly to discuss progress and plans.

The funding supported three positions during the report period. The evaluation/data entry position is responsible for data collection/analysis associated with the Tribal Action Plan. The Service Facilitator Trainee position works within the wrap around care program providing case management/coordination services. The Social Emotional Coach position is located at the Bayfield School. The position provides intervention/connection to services for students/families.

Inpatient treatment for opioid use is not a service provided within the Red Cliff service system. Tribal members are referred to outside providers; however, the coordination is conducted at the tribal level. This includes coordination of availability, payment, transportation, etc.

Activities during the reporting period associated with the Tribal Action Plan include a significant increase in clientele resulted in hiring of a second trainee position. Trainees are community members that will be trained in case management within the wrap around model. The data collection process was updated to add data for public health vending machines, to track dispensing of harm reduction and public health supplies. They have also initiated efforts to establish traditional healing practices. Funds were utilized to collaborate with the Tribal Historic Preservation program to contract with a consultant. The goal is to develop evaluation tools using the Indigenous evaluation framework. During the report period, funds were used to support the "Smoke Fish – Not Drugs" youth pow wow. This event is aimed at substance use prevention and community wellness.

Sokaogon Chippewa Community- During this reporting period, the Sokaogon Chippewa Health Clinic (SCHC) continued to advance its mission to address opioid use disorder (OUD) within the Sokaogon Chippewa Community and surrounding rural areas. Key progress includes initiation of supportive services for clients with OUD/substance use disorder (SUD) to assist with maintaining their recovery journey. They are continuing to find that many people in both early and sustained remission struggle with meeting basic daily needs, such as food, shelter, transportation, employment, and childcare. They maintained their Medication Assisted Treatment (MAT) caseload for existing clients and strengthened coordination with regional MAT providers to ensure access for new clients, while continuing recruitment for an in-house MAT provider.

Naloxone distribution remained a priority, with weekly restocking of vending machines and direct distribution of naloxone and harm reduction kits to community members. SCHC participated in the community and tribal health needs assessment, which provided valuable insights into client priorities and gaps in services. These findings are guiding ongoing program adjustments. Community engagement efforts, including presence at schools and events, further strengthened trust and participation in programs.

St. Croix Chippewa Indians of Wisconsin - Unspent funds from the previous iteration of this grant continued to provide wages for St. Croix's Peer Support Specialists. However, as new funds became available, efforts of the Wings of Migizi program also begun to take shape. Clients of the Wings of Migizi program consistently ask for various levels of cultural connection to aid in their recovery efforts. This year a change in efforts evolved to include

Spiritual Advisor Services from outside sources. Contracts have been offered to Spiritual Leaders to help guide not only this program but their clients on the road to recovery while creating in-roads towards cultural reconnection. Through this effort, their contracted Spiritual Advisors created long lasting individual and environmental impacts by creating infrastructure leading into various ceremonial practices.

The Peer Support Specialists continue working with clients of the program, conducting both individual and group interactions, participating collaboratively with other programs, and supporting tribal efforts in harm reduction and opioid abatement. Both Peer Specialists report various levels of turnover in their client files. Towards the end of this reporting period both Peer Specialists reported recovery activity and referrals began to increase. For clients whom a higher level of care is needed, referrals are made to both internal and external agencies. During this reporting period the Peer Support Specialists continued their efforts in creating and supporting cultural events typical with the for the spring and summer seasons. Peer Support Specialists have taken clients out to exercise their treaty rights and engage in one of the most anticipated seasonal activities: spearing. Spearing has always been an integral part of the Ojibwe life. At the end of each winter season, many use this activity as way to reconnect with their heritage and their peers. Peer Support Specialists continue to work with tribal and local Police, tribal and county judges and district attorneys, local behavioral health departments, and alongside clients. The advocacy of the Peer Support Specialists continues to play a vital role with clients and their recovery efforts. Collectively 222 peer specialist visits occurred this reporting period.

The Elder Advisory Board continues to meet and discuss topics related to helping the Opioid Abatement efforts and efforts for the St. Croix Tribal Human Services Department. This board has grown to be a useful tool to the overall Health & Human Services Department. Their contributions to helping create culturally appropriate approaches with the community has been immeasurable. Furthermore, Elders in the Advisory Board committed to being referred to for spiritual guidance. Some of the board members testified to late night calls and referrals to supportive services such as Behavioral Health or Peer Support Specialists.

Stockbridge-Munsee Community Band of Mohican Indians - Contracting with Core Treatment Services to provide SUD focused training to the community has commenced. The training will focus on signs of drug use, the dangers of drug use, how to help a family, friend, or employee with SUD. The training will also incorporate harm reduction strategies including naloxone and fentanyl test kits. The training will be completed by June 30, 2025. Planning for the Tribe's strategic plan related to SUD within the community continues to take place. Discussions continue regarding the proposed use of a building for healing to wellness court and an area for a peer recovery coach and are working to revise medical's policy on long-term controlled medication prescribing. The Tribal nation is purchasing a bubble packer to help make the medication checks easier and more accurate to verify. Naloxone, fentanyl test kits, first aid kits, gun locks, hygiene kits, and drug disposal bags continue to be offered through public health vending machine. Fifty-six individuals received naloxone at no-cost and 500 educational fliers were distributed at community events.

Central Alert System

The overdose alert system, or Wisconsin Suspected Overdose Alerts for Rapid Response (WiSOARR), is a secure web-based application developed and maintained by DHS staff. WiSOARR 1.0 was recently launched statewide at the end of October 2024. At the time of this report, 150 organizations have requested and received organizational approval for access to the application for their staff. WiSOARR 1.0 leverages two near-real time data sources – ambulance runs and emergency department visits – for

suspected overdose surveillance and anomaly detection. System developments to facilitate user onboarding are currently underway.
To date, three main features were included in WiSOARR 1.0 at launch:

- Mapping and analytics dashboard: Users may visualize approximate locations of 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 may configure "alert profiles", which allow the user to opt in to receive alerts for deviations above a designated threshold based on the number of overdoses captured via a specific data source, time window, and geographical area. 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 is provided via discrete user groups, managed at the organization level. The application facilitates the creation of user groups by DHS administrators, assignment of local administrators to create accounts for staff, and maintenance of data use agreements.

Since the application's launch, the next phase of development has been planned and documented. With the assistance of a temporary business analyst, business requirements for these enhancements have been documented and development of a select number of designated future enhancements are underway. Future enhancements anticipated to-date include:

- Updates and refinements to user interface on map page
- Functionality to improve and streamline workflows for DHS Administrator functionality:
    - Streamlined User Interface (UI) for managing access requests and user group onboarding
    - User event logging
    - Mechanism for content management (i.e., training, tutorials, and resources)
- Addition of non-fatal overdose encounters by law enforcement
- Addition of the option for coroners and medical examiners to report suspected fatal overdose incidents

The WiSOARR project team has also been engaged with several county-level cross-sector teams to provide technical assistance and tailored guidance as teams establish strategic plans for responding to overdose spikes. Lastly, further progress has also been made to define and document DHS staff roles to support the long-term sustainability of WiSOARR.

K-12 Evidence-Based Prevention Program

During this reporting period, the Department of Public Instruction (DPI) team successfully completed two rounds of competitive applications, resulting in 25 districts and schools being recommended for funding. Internal approvals for the 2024-25 grant cycle have been secured, and all grant awards have been issued. Grant implementation is now underway, with a mid-year check-in scheduled for early April and an end-of-year report planned for June. The successful completion of the 2024-25 grant competition and issuance of grant awards marks a significant achievement for DPI. With implementation now underway, these funds are enabling districts and schools to launch critical initiatives aimed at improving student well-being. During this reporting period an end-of-year report was developed and shared with grantees to support performance tracking. The report also aims to identify areas where technical assistance may be needed, ensure compliance with grant requirements, and inform strategic decision-making for future programming.

Medication-Assisted Treatment

Wisconsin Society of Addiction Medicine (WISAM)

This pilot project is intended to develop telemedicine for Wisconsinites to provide access and induction of buprenorphine products with the use of peer support and recovery coaching. They are working 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 is developing processes with the Addiction Recovery Helpline.

WISAM encountered significant delays engaging with their partners who are critical in the projects launch. WISAM has reached out to them since having a signed contract with DHS and have re-initiated planning with them but expect that each of them will need time for start-up to mobilize their resources and capacity to support the work.

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

Agencies are developing mobile Opioid Treatment Program (OTP) units to provide all three forms of FDA (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.

Milwaukee Health Systems (Eau Claire)

The mobile OTP unit was delivered in October 2024. A storage facility has been secured for the mobile OTP. Staff have completed multiple outreach events and public awareness events in Barron County and Chippewa County. A state certification survey was completed in October 2024 and has since been closed because a travel plan and dispensing locations have not been determined; they will have to submit a new certification application once those decisions are reached. They continue to await Drug Enforcement Agency (DEA) Certification. The target service area remains as the Black River Falls and the surrounding communities. All funding allocated for the mobile unit has been expended.

Milwaukee Health Systems (Appleton)

The mobile OTP unit was delivered, and a storage facility has been secured for the mobile OTP. The clinic has continued to struggle to find a dispensing location due to zoning issues, community concern/stigma surrounding MAT, and a mobile unit being in their area. Staff have completed multiple outreach events and public awareness events in the community. State certification was completed in August 2024, and they continue to await DEA certification. The target service area remains Shawano and the surrounding communities. All funding allocated for the mobile unit has been expended.

Quality Addiction Management (QAM) (Beloit)

The physical unit has been completed and delivered. They are looking for a new dispensing location as the location that was secured has been certified as a brick-and-mortar medication unit. Beloit QAM has conducted multiple outreach events and public awareness events in Walworth and Rock County. State certification was completed on October 10, 2024, and they continue to wait on DEA certification. All funding allocated for the mobile unit has been expended.

Addiction Medical Solutions (Oshkosh)

The mobile unit has been delivered. AMS continues to work on getting the unit registered for Oshkosh. AMS has secured agreements with the Wisconsin Department

of Corrections for dispensing locations. The Oshkosh mobile unit is on hold due to staffing challenges at the Oshkosh home clinic. AMS awaits DEA certification. All funding allocated for the mobile unit has been expended.

Wisconsin Department of Corrections

Through this initiative, DOC will increase access to Medication Assisted Treatment (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 medications for opioid use disorder (MOUD) services, if they are interested in receiving MOUD services as part of their treatment plan.

During this period, DOC contracted RSP providers to continue to screen, assess, and make referrals for clients under the supervision of the WI DOC Division of Community Corrections (DCC) residing at their facilities. Additionally, DOC staff met with DOC contracted mobile unit vendor, Addiction Medical Solutions (AMS), and the owner of the office space and parking lot of a Division of Community Corrections unit office to discuss the location as a potential stop on one of the mobile unit routes. This co-location would provide an efficient referral pathway and warm hand-off for clients.

During this period, the number of clients assessed for OUD was 30, the number of clients diagnosed with OUD was 30, and the number of clients maintained on their active MOUD prescriptions or referred to a MOUD provider was 15.

Additionally, DOC has contracted with community OTPs to provide mobile MAT services to clients under the supervision of the Division of Community Corrections in underserved areas of the state. The mobile MAT units remove barriers to treatment such as transportation. The services provided through the mobile MAT units include administering and dispensing medications for opioid use treatment, collecting samples for drug testing or analysis, dispensing take-home medications, and providing medical and psychosocial assessments and counseling, when possible.

Though delayed in implementation of service delivery, AMS, one of the contracted mobile MAT service vendors, projected the number of individuals served per year as 50 – 100. Once the second contracted mobile MAT service vendor's (CMS) certification process is completed these projections will be updated to include those participants.

According to the identified RSPs, the clients who received referrals to community MOUD providers reported lower cravings for substances and had improved health outcomes due to receiving primary care at the same location as the MOUD provider, including treatment for sexually transmitted infections and other health care needs. Justice-involved individuals often have complex health needs, including higher rates of chronic disease, so the ability of patients to receive treatment for their OUD in addition to other health needs is a significant success.

As noted in the previous reporting period, one of the DOC Division of Community Corrections metrics has shown a substantial decline in overdoses and overdose deaths from 2023 to 2024 for individuals on community supervision. While this data is very encouraging, it does not necessarily indicate there are fewer individuals struggling with OUD. Likely, it indicates a greater need for recovery-focused housing and access to MOUD, in addition to greater availability of harm reduction supplies like naloxone and peer support specialist services for those who are living with OUD in their communities. DOC is grateful for this funding that continues to provide access to those at highest risk and support them in their recovery journey.

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 has now solicited three rounds of applications from Tribal Nations and counties for funding to cover the room and board costs for individuals with an opioid use disorder or at risk for an opioid overdose. This contract operates on a calendar year. During this reporting period (January 1, 2025 – March 31, 2025), awarded agencies provided services to 288 people for a total of 7,126 days of service. This quarter's average daily cost was $97.67 which is a significant increase in comparison to $83.91 in 2024.

Law Enforcement Agencies Opioid Abatement Efforts

Law enforcement agencies are provided funds to support community drug disposal, education on medication assisted treatment, diversion, or deflection programs, or providing medication assisted treatment in jail settings. Existing and new program activities from funding opportunities are noted below.

Ashland County Sheriff's Office – Treatment for Incarcerated Persons with OUD

Significant efforts continued within the program during this period, including several successful transitions to residential treatment and Medication-Assisted Treatment (MAT) programs. As the program contract was coming to an end, the Case Manager/Peer Support Specialist worked with people in their care to transition them to other community resources, made referrals, and provided information and assistance. The Case Manager/Peer Support Specialist was able to make great connections with the people in the jail who wanted to participate in the program. They met with everyone at great length and provided referrals, information, and support. Connecting with people in the jail to arrange for follow up services in the community and helped set up appointments for Medicaid services and continued treatment upon discharge. Warm hand-offs were made for those who expressed an interest in the Comprehensive Community Services program (CCS). In addition, group counseling sessions for SUD were provided on a regular basis for people in the care of the Ashland County Sheriff's Office wanting to participate.

Calumet – Community Drug Disposal

Both the Drug Disposal Box and the Drug Deactivation kits have been ordered. 300 drug deactivation kits have been purchased and a distribution plan for community members is pending.

Chippewa – Community drug disposal program, Medication-assisted treatment education and awareness training.
In May 2025 the department ordered $5,000 worth of Deterra drug deactivation kits in different sizes for their deputies to use daily when responding to various incidents including home death scenes. Deputies responding to such calls can utilize smaller drug deactivation kits to assist the grieving families by collecting various prescription medications that are no longer needed by the family member that has passed. This seemingly small act provides families support and guarantees deputies can safely dispose of prescription medications. The department also plans to utilize some of the larger drug deactivation kits during the local Chippewa Valley summer music festivals in Cadott, WI: Force Fields, Hoofbeat [formerly Country Fest] and Rock Fest. Those supplies will be beneficial in providing safe drug disposal benefitting residents and visitors of the community, while helping to protect the environment.

Columbia County Sheriff's Office – Treatment for Incarcerated Persons with OUD; Community Drug Disposal Programs
The agency is continuing to provide Medication-Assisted Treatment (MAT), counseling, and after care. They have screened 721 individuals for opioid use disorder and provided MAT for three participants. Ten doses of naloxone have been distributed and 50 individuals received peer support services. The agency has purchased 5,000 drug deactivation kits and distributed 500 this reporting period to community members throughout Columbia County.

Crawford County Sheriff's Office – Community Drug Disposal Programs
The agency identified their new lead person to take on the responsibility of getting the drug drop box installed. They anticipate having it in place by May 31, 2025.

Dane County Sheriff's Office – Treatment for Incarcerated Persons with OUD
The jail has started having medications to treat opioid use disorder delivered after awaiting county approval for the grant contract, as well as a contract amendment with Wellpath (correctional medical provider) to hire the .5 NP for MAT and add the Deputy for MAT movement. Both contracts were approved in April 2025. The MAT deputy started on April 29th and the .5 Nurse Practitioner started with Wellpath on April 20. Now these services are in place, the jail will no longer have a need to transport individuals outside the facility to receive methadone. During this reporting period, 419 people were screened for an opioid use disorder, 125 have been enrolled in MAT, 58 have received treatment with methadone, and 87 received peer support services.

Dunn County Sheriff's Office – Pre-arrest and Pre-arraignment Deflection Programs
During this reporting period, efforts were made to create a new case worker position embedded with the Behavioral Health Officer (BHO). This position will be filled next quarter. Preparations are underway to outfit an office and vehicle for the Sheriff's Office Case Worker.

Efforts continue with the Sheriff's Office BHO and their counterpart with the Menomonie Police Department. Both BHOs work separately and in tandem to provide law enforcement led deflection and diversion to people throughout Dunn County. The BHOs follow up after non-fatal overdoses to provide treatment connection assistance. They are also taking referrals from other law enforcement officers who are encountering people with substance use treatment needs. This quarter, the online community referral system was launched. This allows community partners to make referrals to the BHOs for law enforcement deflection. Grant funding was used this quarter to help support participant treatment and transportation.

Grant funds were used this quarter to support Kaleidescope Center hours expansion. Funds

allow us to increase the peer drop-in center's hours by 22 per week. Wisconsin Milkweed Alliance was contracted to establish peer support satellite centers in rural areas. One office is set up in the Elk Mound Library and one in the Boyceville Library. Within this start up period, marketing of the satellite offices has taken place to make these services known.

Training occurred this period with a team attending the Police Assisted Addiction and Recovery Initiative (PAARI) annual training conference in Florida in February. This training provided an opportunity for Dunn County Sheriff's Office and Menomonie Police Department leadership and BHOs to learn about the promising practices in the field, hear about innovations, and bring home actionable ideas to improve our program.

Grant meetings continue to be held monthly between the Sheriff's Office and Menomonie Police Department. This is helpful in moving the grant goals ahead and working in collaboration with partners.

Eau Claire County Sheriff's Office – Treatment for Incarcerated Persons with OUD; Pre-arrest or Pre-arraignment Deflection Program; Community Drug Disposal Programs
During this period, the Eau Claire County Sheriff's Office made significant progress on the deflection program media campaign. This public education initiative is designed to raise awareness about alternatives to incarceration and to promote access to opioid recovery services. They have begun developing a script for an informational video and are also working on creating advertisements that will be displayed throughout the county. These efforts aim to ensure community members become more familiar with the program and its benefits.

During this reporting period the Eau Claire County Sheriff's Office continued to process referrals and opened up new pathways for referrals to pre-arrest or pre-arraignment deflection programs for people with an opioid use disorder. They worked closely with ACCESS to open up referrals. They also screen other law enforcement referrals and can be a secondary source to referring people that have had contact with law enforcement. Ninety-one referrals were made this reporting period.

Iowa County Sheriff's Office – Community drug disposal systems; Medication-assisted treatment education and awareness
Five drug deactivation kits have been distributed this reporting period.

Jackson County Sheriff's Office – MAT Education & Awareness Training; Pre-arrest or Pre-arraignment Deflection Programs for Persons with OUD; Treatment for Incarcerated Persons with OUD
During this period, the department has been able to utilize the Overdose Lifeline Train-The-Trainer (TTT) to educate other area groups and community members about the opioid epidemic. The treatment for OUD in the jail continues, with expanded access to evidence-based treatment interventions, including all three forms of MOUD. Deflection efforts continue to expand more slowly, with a focus on improving law enforcement's understanding of the efforts, purpose, and goals of deflection, developing partnerships, and developing infrastructure to support deflection pathways.

While no staff addended a training event for the purpose of gaining new learning, three staff members did provide training to Jackson County EMTs. These staff members were previously trained in the Overdose Lifeline TTT about the brain and the disease of addiction, MAT, and addressing stigma and bias toward individuals living with a substance use disorder. There was a heavy focus on stigma that is often perpetuated by medical providers. Two staff members who

are trained in the Overdose Lifeline TTT and a social work intern also attended a local Coffee with Cops event to provide education in a more informal setting. This event was attended by members of the community who have a general interest in learning about the various initiatives of the Jackson County Sheriff's Department. Approximately four hours of training and education was provided to those attending the previously mentioned trainings. Obtaining the Overdose Lifeline TTT has ensured a more sustainable way to educate not only new department staff but also members of the community.

The program is currently providing the Seeking Safety program two days per week for male participants and two days per week for female participants. Also, a Midday Mindfulness group is offered twice per week for both men and women as well. Both groups are facilitated in an open group format. Program participants have an opportunity to participate in programs offered through partners as well. Most recently, UW-Extension has partnered with them to provide a grief group to both men and women. This group is a closed group and utilizes Cognitive Behavioral Therapy approaches to assist in processing grief and loss. Program participants have access to Project Proven. They are now offering online mutual support groups for interested participants. This has proven very beneficial, as they do not have formal peer support services in place. The Jackson County Jail has been able to offer yoga one night per week for those who sign up in advance. Religious services are also available to all incarcerated individuals upon request. Lastly, the people in their care utilize tablets in the housing pods, which allow them to connect for video visits and message their social support system. These tablets have also allowed their program to begin sending individual positive affirmations each day. These tablets also permit individuals to reach out and request behavioral health and case management services. Individual therapy is available to program participants. For those receiving MOUD through their opioid treatment programming, they are provided individual therapy sessions with a substance use counselor and have access to the onsite dual diagnosis provider in the jail. Those prescribed naltrexone by the jail medical provider have access to individual therapy sessions with the dual diagnosis provider in the jail as well.

Since seeing the efficacy of initiating these medications and the benefits of program participation, jail staff have become more noticeably proactive in communicating with medical and behavioral health staff regarding new arrivals who may be at risk or who would likely be good candidates for the jail-based MAT program. Jail staff have reported fewer problematic and/or unsafe behaviors, and there has been a significant decline in the number of individuals placed in clinical observation status due to self-harm or suicidal ideation. Client’s report feeling more hopeful, supported, and better prepared to reenter the community.

Kenosha County Sheriff’s Office – Community Drug Disposal Systems
The team provided 176 drug deactivation kits this reporting period. Social media posts and attendance at various outreach events contributed to their success. In addition, access to kits is provided in public health vending machines operated by Kenosha County.

LaCrosse Sheriff’s Department– Community drug disposal systems/Education and awareness training regarding medication assisted treatment for opioid use disorder
The La Crosse Sheriff’s Department is in the early stages of this funding opportunity. Progress is being made which includes 194 drug deactivation kits having been purchased, with 100 being distributed to community members.

Madison Police Department – Pre-arrest or Pre-arraignment Deflection Programs for People with OUD; Community Drug Disposal Systems

The Madison Police Department's (MPD) "Madison Area Recovery Initiative" (MARI) is a multi-agency collaboration which seeks to deflect and divert individuals struggling with opioid and other substance use disorder away from the criminal justice system and connect them with treatment, recovery and peer support services. The current DHS Opioid Abatement grant to MPD supports the below listed aspects of the MARI program.

The DHS funded MARI Program Assistant (PA) position made tremendous progress during this reporting period. The MARI PA has been trained on all tasks described in the DHS budget justification and is providing critical support to MPD's MARI program.

The new Cognito software platform has now been purchased, installed and currently being used by MPD staff and the UW Population Health Institute research partner. The agency went "live" on December 1, 2024. The Cognito software platform is already improving both the efficiency and effectiveness of the MARI Resource Team's data collection efforts.

The new MARI "HOPE" kits have been deployed for several months now. The MARI "HOPE" kits continue to include naloxone, fentanyl and xylazine test strips, CPR masks, sterile rubber gloves, MARI resource card, personal hygiene items, and more.

As reported previously, the contracts related to this DHS Opioid Abatement grant have been executed with the below MARI partners:

- UW Population Health Institute – contract for evaluation related services has been signed.
- Dane County Department of Human Services – contract for peer support and recovery coaching services has been signed. Safe Communities Madison-Dane County is the sub-contracting agency for this work through DCDHS.
- JB Public Safety Consulting LLC – contract for MARI related project coordination services has been signed.

The agency is currently working with Kwik Trips corporate office on an advertising purchase where a 15 second MARI video will play on Kwik Trip gas pumps in Dane County for a several week period this spring. MPD MARI staff have worked with Madison City Channel staff to produce the video. The video is scheduled to run on in-store monitors and at the gas pumps in May and June 2025. MPD MARI staff recently created a new MARI brochure, and it will be used for outreach efforts.

During this reporting period, 6 pre-arrest diversion referrals were identified or received directly from officers by the MPD MARI referral team. In addition, 3 participants were discharged from the MARI programs as unsuccessful when it was determined they were no longer engaged in treatment or recovery.

Since September 2020, 105 MARI referrals have become program participants by completing OUD/SUD clinical assessment and signing a 6-month MARI pre-arrest diversion treatment plan. Twenty-nine of those were unsuccessfully discharged from the MARI program for failure to remain engaged in their treatment plan and recovery and sixty-one successfully completed their six-month MARI pre-arrest diversion treatment plan.

Marathon County Sheriff's Office – Treatment for Incarcerated Persons with OUD
Supportive programming has been going especially well during this period. Increased interest and attendance led to limits being placed on maximum students per class (for safety) and the exploration of adding in an additional Seeking Safety for both males and females (instead of alternating sessions). Overall, things seem to be running smoothly. The recruitment for an MOUD Coordinator position was posted on April 25, 2025, and anticipate having the position hired before the end of the term.

Marquette County Sheriff's Office – Community drug disposal systems
One of three drug drop boxes have been installed. The two remaining boxes will be placed once they have been received.

Menominee Indian Tribe Police Department – Community Drug Disposal Systems; MAT & Awareness Training
All 1,218 drug deactivation kits have been distributed, with 418 during this reporting period. These kits were made available at several community outreach events. Department staff have participated in on-line training for information about medication-assisted treatment.

Racine County Sheriff's Office – MAT Education & Awareness Training; Treatment for incarcerated persons with OUD
There has been increasing awareness among Racine County correctional and healthcare staff regarding the risks associated with addiction. As a result, there has been enhanced screening and monitoring during the admission process, along with a clear clarification of the protocols in place to ensure effective ongoing monitoring. Staff have implemented a backpack program that provides essential items to individuals upon their release from custody, supporting their transition back into the community. The delivery of MOUD has continued through collaboration with external healthcare providers and by utilizing available resources efficiently. Enhanced screening during the intake process has allowed for early identification of opioid use disorder. The agency's ongoing efforts to train and upskill existing staff regarding both addiction and mental health support have helped bridge service gaps. For example, staff attended 2025 Opioids, Stimulants, and Trauma Summit in Wisconsin Dells.

The agency has seen improvements in engagement in treatment among people who are incarcerated, as many have expressed appreciation for the structured support they receive. The agency believes the biggest success is identifying individuals in need of MAT immediately upon incarceration. This helps with safe and successful treatment and healthier outcomes from the beginning of their time in Racine County's care.

Approximately 1,465 people have been screened for opioid use disorder and approximately 111 persons have been enrolled in medication-assisted treatment for opioid use disorder program. Peer support services have been provided to 19 people and approximately 60 individuals have received case management or care coordination services during this reporting period.

Rhinelander Police Department - Pre-arrest and Pre-arraignment Deflection Programs for people with OUD
Recovery coach services have been acquired with grant funding. The Community Response team is now formed and working well together. The Recovery Coach is currently working with over 25 individuals and the agency is looking for ways to increase capacity. There are currently 25 persons enrolled in pre-arrest or pre-arraignment deflection programming. The agency purchased gas cards to provide to individuals to get to meetings, treatment, appointments, and work.

Rock County Sheriff's Office – MAT Education & Awareness Training; Treatment for incarcerated persons with OUD
The Rock County Sheriff's Office hosted a training for their staff to attend and learn about MOUD. They held an in-person training at their facility that was taught by Dr. Salisbury-Afshar of the University of Wisconsin and two peer supports from Safe Communities in Madison. They had a great turn out for these trainings especially from their command staff (leadership) and received positive feedback regarding the valuable information they were able to learn from the training. The agency placed the first order for Sublocade injections at the beginning of April.

Sawyer County Sheriff's Office – Pre-arrest or Pre-arraignment deflection for people with OUD; MAT Education & Awareness Training
Sawyer County has made significant progress this reporting period. Two Peer Systems Navigators were hired in December 2024. After a training period, they were ready to implement the agency project plan in early February. The Navigators began meeting with community partners and have made over 50 community contacts. Their purpose is to educate the community on what pre-arrest/deflection, what the goals of law enforcement deflection are, and how it can impact the community. In March, they trained Law Enforcement and collaborative partners on deflection. They had 78 participants attend that training over a two-day period. The Navigators "hit the ground running" immediately after training with community-wide implementation. Law enforcement staff have been taking Navigators on ride-a longs to promote pre-arrest programming. They focus on drug overdose "hot spots" and drop off overdose prevention kits purchased with deflection funding. Navigators have been well-received with over 30 contacts having been made.

Shawano County Sheriff's Office – Community Drug Disposal Systems
Approximately 4,800 drug deactivation kits were procured as a part of this grant funding with the agency having distributed 2,500 kits to local municipalities throughout the county.

Sparta Police Department – Pre-arrest or Pre-arraignment Deflection Programs for People with OUD
During this reporting period the Sparta Police Department Community Resource Officer (CRO) met with several software providers for a solution to participant management and data collection with providers. Ultimately Casebook was chosen to host the platform and will be implemented in the first half of April. The agency is collaborating with Next Steps for Change, Monroe County MAT, and other partners to coordinate data and information sharing through the new platform. The CRO met with school district staff and various county staff regarding the potential opportunities offered through his position. Several community education and outreach events were scheduled in Sparta and neighboring communities. The RISE logo was finalized, and advertising materials were ordered including a pop-up tent and tablecloth for community events.

Village of Cottage Grove Police Department – Community Drug Disposal Systems; MAT Education & Awareness Training
The agency is advertising the drug drop box and are active in participating in the Drug Take Back Days where they will be handing out the Deterra Drug Deactivation kits; 1,200 deactivation kits have been purchased and distributed throughout the community.

Wood County Sheriff's Department – Treatment for Incarcerated Persons with OUD
Wood County opened the new jail on March 22, 2025. This was a major achievement and cleared the way for programming and MAT to begin implementation. Multiple funding streams come together to allow a comprehensive addiction treatment program in the Wood County Jail. These funding streams allow for case management, Residential Substance Abuse Treatment (RSAT) pods, programming, and access to an addiction medicine nurse practitioner and medications.

The agency's first MAT participants began services in January. One pregnant person was established on methadone and was transitioned for care in Madison where she entered residential treatment. This smooth transition involved partners at the local and Madison opioid treatment programs, DOC Community Corrections, the residential treatment facility, and jail facility. Inductions of buprenorphine were trialed in February and naltrexone was also added to the available services as well. Work is being done to obtain the most cost-effective medications to make the dollars last. The pharmacy currently under contract with this jail is very helpful in providing information about an opportunity to join a purchasing consortium. This will lower costs for long acting injectables.

By being more visible in the jail, opportunities presented themselves for educating the corrections staff in small groups or individually. The agency is planning to hold in-services for each shift in June. One correctional staff member was able to attend the DHS Opioid, Stimulant and Trauma Summit in May at Wisconsin Dells.

Now that the new jail is in operation, programming has returned. Three Bridges Recovery provided individual peer recovery support. The jail has had several individuals who have been released from care who have been quite successful. They have obtained jobs, licenses, vehicles, continued care in the community and remain in good standing with their probation officers. Jail staff have run into participants in the community and hear "SOBER" being shouted across a store or parking lot. This brings great joy to the challenging work being done at Wood County Jail.

Community-Based Prevention – Competitive Grant Program
DHS was directed to provide grants to anti-drug coalitions, nonprofit agencies, and faith-based organizations to support prevention programs. Agencies can use the funds to support the following activities: drug prevention, evidence-informed prevention, stigma reduction, training in evidence-informed implementation, community-based education or intervention services, programs and curricula to address mental health needs of young people and any other activities permissible under the settlement agreement.

As noted in FY 25 Q1 reporting, DHS allocated $500,000 to regional centers of the Alliance for Wisconsin Youth (AWY) for the prevention activities. Contracts with the three AWY Regional Prevention Centers have been fully executed. Each Regional Prevention Center released funding opportunities to provide prevention services as noted above. A list of awarded agencies will be released in the FY26 Q1 report as some of those opportunities concluded outside of this reporting period.

Northeastern Wisconsin Area Health Education Center (NEWAHEC)
Funded coalition projects included Fostering Healthy Youth Project, Youth Mental Health First Aid Training and Safe Zone Training

Fostering Health Youth Project (FHYP) – Fifteen coalitions (approximately 24-30 members) are participating in FHYP. All 15 coalitions (26 members) participated in the first virtual FHYP

session in February. After coalitions gathered qualitative and quantitative data to use for the next two-day strategic planning session. All 15 coalitions (25 members) participated in a two day in person training on April 10th and 11th. Coalitions left with a logic model for mental health which included identifying a local issue related to mental health, risk factor or local condition to address. The coalitions left with ways to do crosstab analysis regarding mental health and substance use.

Youth Mental Health First Aid training (YMHFA) – Sixteen coalitions (approximately 24-30 members) will be participating in YMHFA training. An instructor was completed their training in February to be able to provide the YMHFA Training to coalitions.

Safe Zone Training – 18 coalitions are planning to participate in the Safe Zone training.

Marshfield Clinic
Received 17 applications for funds from coalitions. Seven coalitions are participating in stigma reduction strategies, and 15 are participating in harm reduction strategies. Additionally, a SchoolPulse opportunity was released to coalitions and applications were due May 2, 2025.

Stigma reduction campaigns include Harm Reduction Saves Lives and Dose of Reality The estimated number of people reach to date is 535,790. Harm reduction activities include distributing 39 kits of naloxone (two doses per kit), having 2,092 people attend 12 sharps disposal events, and two permanent sharps disposal units installed.

Community Advocates
Application for funds opened for coalitions and closed on May 15th, allowing each coalition to apply for up to $5,252. Community Advocates is building an evaluation tool for coalitions to report activities on. Coalitions can apply for activities such as: Youth Mental Health First Aid instructor training, Botvin Lifeskills provider training, NAMI Hearts and Minds training, SchoolPulse, and more.

Statewide Community-Based Organization for After-School Programming
DHS was directed to complete a second round of funding to Statewide community-based organizations for after-school programming. As noted in the FY 25 Q1 report, contracting was completed earlier this year with the Boys and Girls Club Fox Valley, which represents a network of Boys and Girls Clubs serving more than 70 communities across the state of Wisconsin. Twenty-two locations opted in for programming. This funding supports after-school programming for youth, focused on providing them with information and skills to make healthy decisions through the SMART Moves Program, a program developed by the Boys and Girls Club of America.

As of April 30, 2025, there are 641 participant completers, 543 youth completed 11 or more sessions, and 570 youth maintained or improved their healthy decision-making, resilience, and refusal skills as evidenced by the pre and post-test. All clubs will be concluding their school year programs in early June 2025.

Substance Use Disorder Treatment Platform
DHS was directed to allocate $1.2 million for DHS to provide $300,000 per year for four years, to pay a vendor for collecting and maintaining information regarding substance use disorder treatment providers for the state's substance use disorder treatment platform. A request for applications for this funding was made public in August 2024 with 7 applications received and an award made to RehabPath. The contracting process for this initiative has completed and data collection has begun during this reporting

period**.** RehabPath reports 672 Substance Use Providers registered with the platform with close to 4,000 searches having been completed and 449 service connections being made. RehabPath will continue to work on enhancing vendor collection and service enhancement as the initiative continues.

Hub and Spoke Pilot Program

DHS pilots a hub and spoke program approach aimed at treating Wisconsin Medicaid members with substance use disorders and physical and behavioral health issues. The approach is intended to provide ongoing support and care for people in recovery. The Vin Baker Recovery of Milwaukee is one of four sites participating in the pilot program and the only hub site funded by opioid settlement funds. Vin Baker is the first opioid treatment program facility approved by the city's board of zoning appeals in 30 years.

During this reporting period, Vin Baker Recovery enrolled five individuals within Milwaukee County and served a total of 23 members. Vin Baker received their mobile unit which will extend care and improve accessibility to underserved areas. They continue to operate their public health vending machine in the lobby of their facility.

Surgical Collaborative of Wisconsin

The Surgical Collaborative of Wisconsin (SCW) utilizes a comprehensive approach to opioid stewardship that maximizes both safe opioid prescribing and pain management for potentially vulnerable surgical patients. During this reporting period SCW has worked towards planning the 2025 Annual SCW Summer Meeting at Heidel House Hotel (Green Lake, WI), and made a partial payment for their annual Wisconsin Health Information Organization (WHIO) database, which they use to track prescribing and improvements for this initiative.

SCW's interventions for surgical prescribers aim to address the supply of prescription opioids available for misuse. To this end, during the reporting period SCW completed the development of a quick reference guide outlining Medications for Opioid Use Disorder (MOUD). This guide provides specific information for perioperative management and at discharge and has been distributed to SCW members.

SCW continues to grow its evidence-based education program to prevent the misuse of opioids through patient at-home destruction and disposal: "Eliminating Excess: Safe Medication Disposal". SCW is partnering with Deterra Systems to provide their Drug Deactivation and Disposal Pouch to patients receiving a post-operative opioid prescription for free; 5,000 pouches were purchased and labeled with a custom QR code that directs the user to opioid education, information about the program, and a brief user survey. SCW is continuing to enroll member surgeons and facilities for this program. To date they have distributed 3,000 disposal pouches to 12 facilities. Three additional facilities pending sign up. The 12 participating facilities are located in 8 counties (Barron, Dane, Door, La Crosse, Marathon, Milwaukee, Sauk, and Wood).

SCW has refined the benchmark performance reports on post-operative opioid stewardship in two ways, specifically adding a broader set of surgical procedures for breast cancer and improving the estimation of eligible patients by incorporating more accurate data on patient insurance coverage. The improved performance reports will be released soon. By comparing the opioid prescribing for their patients to guidelines and statewide prescribing, SCW surgeons are encouraged to prescribe fewer opioids, leaving less unused medications in the community for misuse and diversion. In addition, they have created descriptive charts showing the amount of opioids prescribed after six very common orthopedic surgeries, including knee replacement, shoulder replacement, ACL reconstruction and hip arthroscopy. These charts show significant overprescribing for all the procedures analyzed and will be use in outreach for the new SCW initiative aiming to reduce opioid prescribing after orthopedic surgery.

They continue to leverage the SCW infrastructure to improve opioid stewardship for orthopedic procedures by utilizing statewide all-payer claims data to analyze perioperative opioid prescriptions for common orthopedic procedures across the state. The goal is to evaluate current practice patterns and compare them with national standards to provide surgeon education to reduce over-prescribing.

Medical College of Wisconsin – Periscope Project

DHS was directed to allocate $600,000 to support the Medical College of Wisconsin's Periscope Project to provide support and education to medical professionals statewide regarding how to provide evidence-based care for pregnant people who struggle with an opioid use disorder. The Periscope Project focuses on maternal health in three areas (1) real-time perinatal mental health consultations, (2) education and training on screening, diagnosis, and first-line treatment of mental health and substance use disorders in perinatal people, (3) connections to resources supporting perinatal mental health in the community. This funding supports and enhances the Periscope Project, a perinatal specialty program providing education, resources, and perinatal psychiatric teleconsultation for medical professionals. This project will work to reduce stigma, inform best practices, and improve the quality of maternal healthcare provided to pregnant and postpartum women who struggle with opioid use disorder.

Periscope responded to 209 perinatal mental health inquiries from health care providers across the state. This included 162 provider-to-provider case consultations and 47 resource connection requests. Of those provider-to-provider consultations, 19% of perinatal mental health cases had a known history of substance use disorder; of those, 9% accounted for opioid use disorder. Forty-eight new health care providers contacted Periscope for the first time. Periscope continues to reach new health care providers. The program is meeting its intention to increase access to mental health and substance use care through a perinatal patient's existing health care provider network.

The Periscope psychiatry team taught 11 perinatal mental health educational sessions to a total of 312 Wisconsin health care providers caring for women of reproductive age practicing in family medicine, OBGYN, and psychiatry. Eighty-two percent (nine out of 11) of the educational presentations had content specific to perinatal opioid use disorder.

Periscope hosted two free continuing medical education webinars with a target audience of Wisconsin health care providers and professionals caring for women of reproductive age. There was a total of 55 attendees across the two sessions. After attending the webinar, 88% of respondents stated they felt more comfortable caring for perinatal patients with opioid use disorder than before attending the webinar. Through educational sessions, Periscope continues to build capacity in the Wisconsin health care workforce to better address mental health and substance use conditions in perinatal patients.

The Periscope team finalized content for a stigma reduction magnet for health care providers and a harm reduction handout for new mothers. These materials will be distributed across the state beginning in May.

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

Sincerely,

Kirsten L. Johnson
Secretary-designee

Appendix A: Expand Naloxone Direct Program and Test Strip Program – Law Enforcement & EMS Application Awards

Law Enforcement: Awards for Harm Reduction Supplies			
Agency	**Tribal nation/County**	**Naloxone Cases**	**FTS Kits**
Barron Police Department	Barron County	4	0
Bayfield County Sheriff's Office	Bayfield County	3	0
Bloomfield Police Department	Walworth County	3	24
Caledonia Police Department	Racine County	18	0
Cashton Police Department	Monroe County	4	0
Cedarburg Police Department	Ozaukee County	4	24
City of Burlington Police Department	Racine County	1	0
City of Delavan Police Department	Walworth County	4	0
City of Mequon Police Department	Ozaukee County	4	0
City of Neenah Police	Winnebago County	9	50
City of Oshkosh Police Department	Winnebago County	10	0
Cottage Grove Police Department	Dane County	26	300
Cudahy Police Department	Milwaukee County	4	25
De Pere Police Department	Brown County	10	0
Door County Sheriff's Office	Door County	4	48
Douglas County Sheriff's Office	Douglas County	11	0
Dunn County Sheriff's Office	Dunn County	2	0
Eagle Police Department	Waukesha County	1	5
Eagle River Police Department	Vilas County	4	0
Fond du Lac County Sheriff's Office	Fond du Lac County	24	0
Fontana Police Department	Walworth County	2	0
Fox Point Police Department	Milwaukee County	2	0
Fox Valley Metro Police Department	Outagamie County	4	40
Franklin Police Department	Milwaukee County	1	0
Galesville Police Department	Trempealeau County	3	0
Grand Chute Police Department	Outagamie County	15	0
Green Bay Police Department	Brown County	35	0
Jackson County Sheriff's Office	Jackson County	25	100

Kewaskum Police Department	Washington County	2	12
Kewaunee County Sheriff's Department	Kewaunee County	2	15
La Crosse County Sheriff's Office	La Crosse County	4	0
La Pointe Police Department	Ashland County	3	0
Luxemburg Police Department	Kewaunee County	1	0
Madison Police Department	Dane County	74	600
Marion Police Department	Waupaca County	2	0
Marshall Police Department	Dane County	1	0
Marshfield Police Department	Wood County	4	0
Mayville Police Department	Dodge County	1	0
Menominee County Sheriff's Office	Menominee County	10	100
Milwaukee County Community Reintegration Center	Milwaukee County	17	0
Milwaukee County Sheriff's Office	Milwaukee County	50	200
Milwaukee County Sheriff's Office - Jail Division	Milwaukee County	10	0
Minocqua Police Department	Oneida County	2	0
Mondovi Police Department	Buffalo County	7	30
New Holstein Police Department	Calumet County	2	0
North Prairie Police Department	Waukesha County	2	0
Oneida County Sheriff	Oneida County	3	0
Osceola Police Department	Polk County	2	0
Ozaukee County Sheriff's Office	Ozaukee County	8	0
Pierce County Sheriff's Office	Pierce County	1	0
Polk County Sheriff's Office	Polk County	4	0
Prescott Police Department	Pierce County	2	0
Racine County Sheriff's Office - Jail Division	Racine County	19	0
Racine Police Department	Racine County	2	0
Rhinelander Police Department	Oneida County	4	0
Roberts Police Department	St. Croix County	2	0
Rusk County Sheriff's Office	Rusk County	2	0
Saint Nazianz Police Department	Manitowoc County	1	24
Saukville Police Department	Ozaukee County	4	0

Sawyer County Sheriff Department	Sawyer County	30	20
Seymour Police Department	Outagamie County	2	0
Shawano County Sheriff Office	Shawano County	170	100
Shell Lake Police Department	Washburn County	2	0
Shorewood Hills Police Department	Dane County	2	0
Somerset Police Department	St. Croix County	1	0
Sparta Police Department	Monroe County	4	0
St. Croix County Sheriff's Office	St. Croix County	7	0
Superior Police Department	Douglas County	32	12
Town of Delavan Police Department	Walworth County	1	0
Town of East Troy Police	Walworth County	2	0
Town of Fulton Police	Rock County	2	12
Town of Milton Police	Rock County	2	25
Town of Osceola Police Department	Fond du Lac County	2	0
Turtle Lake Police Department	Barron County	1	0
University of Wisconsin-Green Bay Police Department	Brown County	2	0
University of Wisconsin-Platteville Police Department	Grant County	2	0
University of Wisconsin-Milwaukee Police Department	Milwaukee County	20	360
Village of Bayside Police Department	Milwaukee County	4	24
Village of East Troy Police Department	Walworth County	2	0
Village of Siren Police Department	Burnett County	2	0
Village of Trempealeau Police Department	Trempealeau County	2	0
Village of Walworth Police Department	Walworth County	2	12
Viroqua Police Department	Vernon County	6	25
Walworth County Sheriff's Office	Walworth County	20	100
Washburn County Sheriff's Office	Washburn County	2	24
Watertown Police Department	Jefferson County	7	120
Waupaca County Sheriff's Office	Waupaca County	5	0
Waupun Police Department	Fond du Lac County	8	10
Wauwatosa Police Department	Milwaukee County	10	0

Whitefish Bay Police	Milwaukee County	1	0
Williams Bay Police Department	Walworth County	1	0
Wisconsin Department of Natural Resources	Dane County	25	0
Wisconsin State Patrol	Monroe County	38	0

Appendix A (continued): Expand Naloxone Direct Program and Test Strip Program – Law Enforcement & EMS Application Awards

Agency	Tribal nation/County	Naloxone for Leave Behind Program	FTS Kits for Community Distribution	Naloxone for Vending Machine	FTS for Vending Machine
Plum Lake Ambulance Service	Vilas County	1	0	0	0
Fall Creek Area Fire District	Eau Claire County	1	12	0	0
Dunn County Emergency Medical Responders	Dunn County	3	45	0	0
Town of Russell First Responders	Lincoln County	6	10	0	0
North Shore Fire Rescue	Milwaukee County	10	100	10	100
Greenwood Area Ambulance Service	Clark County	2	48	0	0
Goodman-Armstrong Creek Rescue Squad	Marinette County	5	48	0	0
Biron Fire Department	Wood County	1	12	0	0
Kronenwetter Fire Department First Responders	Marathon County	2	48	0	0
Oak Creek Fire Department	Milwaukee County	3	108	0	0
Milwaukee Fire Department	Milwaukee County	185	2200	0	0
Gold Cross Ambulance	Winnebago County	15	360	0	0
Town of Delavan Fire Department	Walworth County	2	10	0	0
Allina Health EMS	Pierce County	3	0	0	0
Dane County Emergency Management- EMS Division	Dane County	173	858	0	0
Norway Fire Department	Racine County	1	12	0	0

Appendix B: Opioid Abatement Efforts by Law Enforcement Agencies (Targeted Outreach)

Applicant	Amount of Award	Activities
Calumet County Sheriff's Office	$15,000	MAT Education and Awareness Training; Community Drug Disposal System
Chippewa County Sheriff's Office	$10,015	MAT Education and Awareness Training; Community Drug Disposal System
Iowa County Sheriff's Office	$10,015	MAT Education and Awareness Training; Community Drug Disposal System
La Crosse County Sheriff's Office	$15,000	MAT Education and Awareness Training; Community Drug Disposal System
Marquette County Sheriff's Office	$15,000	MAT Education and Awareness Training; Community Drug Disposal System
Menominee County Sheriff's Office	$15,000	MAT Education and Awareness Training; Community Drug Disposal System

Appendix C: Room and Board Costs for Medicaid Members with an Opioid Use Disorder or at Risk for an Overdose in Residential Substance Use Disorder Treatment Programs

Applicant	Amount of Award
Ashland County	$19,212
Bayfield County	$11,335

Brown County	$51,177
Calumet County	$16,832
Clark County	$16,027
Columbia County	$33,111
Crawford County	$9,793
Dane County	$131,322
Door County	$26,904
Dunn County	$76,930
Fond du Lac County	$18,535
Forest County	$32,133
Green County	$15,469
Green Lake County	$20,232
Jackson County	$10,308
Jefferson County	$26,013
Juneau County	$5,917
Kenosha County	$96,910
Kewaunee County	$7,651
La Crosse County	$77,049
Manitowoc County	$68,757
Marinette County	$15,710
Marquette County	$13,942
Menominee County	$33,783
Milwaukee County	$726,596
Monroe County	$12,695
Oneida County	$4,761
Outagamie County	$46,489
Ozaukee County	$42,865
Pierce County	$12,020
Racine County	$24,483
Richland County	$28,563
Rock County	$135,438
Rusk County	$7,141
Sauk County	$13,431
Shawano County	$14,282
Sheboygan County	$51,941
St Croix County	$7,654
Taylor County	$19,756
Unified Community Services	$39,713
Walworth County	$10,675
Washington County	$58,647
Waukesha County	$59,521

Waupaca County	$28,203
Waushara County	$8,996
Winnebago County	$85,009
Wood County	$59,506
Bad River Band of Lake Superior Tribe of Chippewa Indians	$138,848
Lac Courte Oreilles Band	$127,514
Lac du Flambeau Band	$110,512
St. Croix Chippewa Indians of Wisconsin	$39,685