

Pima County Board of Health Opioid Settlement Subcommittee Meeting Minutes
October 26, 2022
Virtual MS Team Meeting
3950 S. Country Club Road
Tucson, Arizona 85714

1. **CALL TO ORDER:**

Dr. Horwitz called the meeting to order at 2:00 P.M.

Attendance was as follows:

Board Members:

Dr. Paul Horwitz

Mr. Mike Humphrey

Dr. Kay Kohler

Mr. Miguel Rojas - Absent

Dr. Lisa Soltani – joined after roll call

A quorum was established (3)

Non-Board Members:

Dr. Francisco García, Pima County Deputy Administrator

Dr. Theresa Cullen, Pima County Health Department, Director

Ms. Kimberly VanPelt, Pima County Health Department, Deputy Director

2. **Pledge of Allegiance**

- Due to Teleconference Meeting, the Pledge of Allegiance was not conducted.

3. **Minutes Adoption**

- No Previous Minutes at this time.

4. **Purpose of Opioid Settlement Subcommittee**

- Dr. Horwitz recommended changing the name of the Opioid Settlement Subcommittee to the Substance Misuse Advisory Committee. Dr. Kohler made the motion and Mr. Humphrey seconded; the motion passed unanimously.
- Dr. Horwitz has appointed Mr. Chuck Huckelberry as a member of the subcommittee.
- Dr. Horwitz invited Dr. Francisco García to discuss the purpose of the settlement, the jurisdictions involved, the role of the Pima County Board of Health (BOH) Subcommittee, and the expectations of the Pima County Administration and the Board of Supervisors (BOS).
- Dr. García provided the following information:
 - In 2017, Pima County Health Department (PCHD) engaged with various community stakeholders such as TMC, CODAC, and Cope, and started formally reporting on opioid misuse as part of the Office of Medical Examiners Annual Report.

- Pima County was pivotal in terms of structuring the actual settlement that became the Arizona IGA.
- Pima County and its partner jurisdictions – the City of Tucson, the City of South Tucson, the Town of Oro Valley, the Town of Marana, and the Town of Sahuarita - have an arbitrated settlement of approximately \$48.5 million over the next 18 years. All participating jurisdictions have negotiated with the Attorney General to provide for exactly how those dollars will be distributed, and the dollars are proportioned on a formula based on the population, as well as the burden of death and the number of opioid units.
- The Arizona IGA is structured so that each county health department in Arizona will play the role of administering entity in each of the settlements.
- The IGA stipulates that each of the jurisdictions can voluntarily take their settlement money and expend it as they wish as long as the expenditures fall within the specified guidelines. All voluntary dispersals of the settlement funds have to be structured as an IGA between the administering entity and the partner jurisdiction.
- No funds will be awarded to a jurisdiction without a signed IGA with Pima County. Two versions of IGA11 have been presented, one that allows the jurisdiction to voluntarily take their award settlement, and the other that allows the jurisdiction to pool their award settlement with Pima County for future use, with the option to do something different in subsequent years. If the award settlement is pooled, each jurisdiction will have some level of input and representation to inform the process by which those dollars are then awarded.
- The funds do not have an expiration date, and a process is being put in place to manage the funding over an estimated 18 years period.

5. Structure of Opioid Settlement Subcommittee

- Dr. García noted that it is important that the BOH subcommittee be structured to have representation from each of the participating jurisdictions. The BOH will determine the membership size and criteria for the subcommittee and should consider appointing a variety of community advisory members offering a diversity of voices and experience regarding the needs of the particular community they represent.
- Dr. García advised that the function of this subcommittee is to identify and prioritize the list of possible uses for the funding in addressing the needs of those who are most at risk, to set up a process to use these resources for the length of time that they are available, and to recommend those plans to the BOS.

6. Discuss Community Stakeholder Participation

- Dr. Horwitz asked the subcommittee members to consider for discussion at the next meeting which community stakeholders to involve, and how best to enlarge the subcommittee.
- Ms. VanPelt recommended utilizing a list that the PCHD Community Mental Health and Addiction team has already developed, and overlaying that list with both location and supervisory district. This information could be provided at the next meeting.
- Dr. Soltani recommended first investigating where the greatest needs in the community are before additional members are invited to join the subcommittee to better understand the kinds of programming that would have the most impact.

- Dr. Cullen noted that CDC and DHS data on best practices have been reviewed to develop an implementation model of 10-13 proposed metrics, and asked that the subcommittee help inform and decide on best practices with that data.
- Mr. Humphrey requested that the subcommittee consider if the proposed PCHD Office of Injury and Prevention can be established with some of these funds.
- Dr. García noted that the final arbiter of all funding decisions is the BOS. Dr. García also noted that a signature authority proposal is pending with the BOS to allow the Administration to approve future proposals up to the amount of \$250,000.

7. Discuss Date and Time of Next Meeting

- Dr. Horwitz recommended meeting every two weeks and extending the meeting time to 2 hours to allow time to review and discuss any additional documentation presented. The next virtual meeting will be held on November 9, 2022, at 2 p.m.

8. Summation of Action Items and Proposal of Future Agenda Items

- Dr. Horwitz noted that Mr. Huckelberry would be participating at future meetings.
- Dr. Horwitz advised that the PCHD Community Mental Health and Addiction data would be sent out prior to the next meeting.

9. Adjournment

The meeting adjourned at 2:58 P.M.