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Georgia Department of Behavioral Health & Developmental Disabilities

Resource Toolkit

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SECTION 1 PROGRAM VISION AND GOALS

1.1 INTRODUCTION

Georgia opted into the nationwide settlements reached on opioid litigation brought by states and local subdivisions against the three largest pharmaceutical distributors McKesson, Cardinal Health, and AmerisourceBergen, and manufacturer Janssen Pharmaceuticals, Inc. (including its parent company Johnson & Johnson (J&J)) (collectively "National Distributors and Manufacturers Opioid Settlement," alternatively "Settlement"). Georgia is expected to receive approximately \$638 million for addressing the current opioid epidemic and supporting future abatement efforts. The State of Georgia and Participating Local Governments entered into a Memorandum of Understanding (MOU) which established the spending parameters of the Settlement Funds. Accordingly, the Governor appointed the Commissioner of the Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD) as the Trustee of the Georgia Opioid Crisis Abatement Trust ("Trust"). The Trustee and DBHDD are working in tandem with the Georgia Office of Planning and Budget (OPB) and the Office of Health Strategy and Coordination (OHSC) to oversee the implementation of the Settlement, allocate the funds, and ensure compliance with the reporting requirements as stated in the Settlement.

OHSC was established in the 2019 Legislative Session. OHSC is an office within the Office of the Governor and is administratively attached to OPB. OHSC has been monitoring and advising the Governor on the nationwide settlements reached on opioid litigation brought by states and local subdivisions.

The National Distributors and Manufacturers Opioid Settlement to be received is comprised of two primary sources:

- An estimated \$517 million will come from the National Distributors Settlement with distributors making their payments over the course of 18 years.
- An estimated \$121.7 million will come from the Janssen/J&J Settlement, with the manufacturer making its payments over the course of nine years.

Georgia's Memorandum of Understanding (MOU) executed by the Attorney General's office between the state and participating local subdivisions set its own percentages and determined that the amounts received from the Opioid Settlement will be divided as follows:

- State's Share of Funds: 75% (\$479 million) will be put into a state-administered Trust, and 40% (\$191.6 million) of that total state share amount must be spent on a regional basis. This will be referred to as the "State Opioid Funds" and includes the statewide and regional spending from the Trust.
- Participating Local Governments' Share: 25% (\$159 million) will be allocated amongst the Participating-Local Governments that signed on as litigating subdivisions to the Settlement and who are thereby eligible to receive settlement funds directly.



The Opioid Settlement Program has a Governance Structure that is made up of a Governor Appointed Trustee (Trustee), Georgia Opioid Settlement Advisory Commission (GOSAC), the Qualifying Block Grantees (QBGs), and the Regional Advisory Councils (RACs). In summary, the governance structure shows how the disbursement of State Opioid Funds is made by the Trustee or the Trustee's Delegate after consultation with the GOSAC. The GOSAC reviews funding requests submitted directly to the GOSAC and funding requests from the RACs, and then provides a recommendation to the Trustee. The Trustee will then decide on the disbursement of funds. The QBGs receive funds directly from the National Distributors and Manufacturers Opioid Settlement. However, if the QBG Applicant is requesting State Opioid Funds, the funding request goes directly to the GOSAC to make a recommendation to the Trustee for review, decision, and disbursement of funds, if appropriate.

The Trustee is responsible for overseeing the implementation of the Opioid Settlement, ensuring compliance with the reporting requirements set forth in the Georgia MOU and Manufacturers and Distributors Opioid Settlement Agreements, making decisions regarding expenditures of State Opioid Funds after consulting with the GOSAC and shall retain final decision-making authority over expenditures of State Opioid Funds for Core Strategies and approved uses.

The GOSAC makes recommendations to the Trustee regarding how the State's opioid funds are allocated, provides guidance to ensure funds are properly aligned with the goals and objectives, consults with local governments and the RACs for the regional distribution and spending of funds, consults with community stakeholders, state and local public health officials, and public health advocates, in connection with opioid abatement priorities and expenditure decisions for the use of funds, monitors progress toward benefits realization and the achievement of strategic goals and objectives, and oversees the implementation of funded programs to ensure funds are being allocated and spent appropriately.

For each region comprised of multiple Participating Local Governments, a RAC shall be formed. The RAC will be available to consult with the GOSAC and with the Participating Local Governments to best determine how funds will be spent for opioid remediation and/or abatement within the established Regions.

The City of Atlanta and each county with a population of at least 400,000 constitutes a QBG. This includes Cobb County, DeKalb County, Fulton County, and Gwinnett County. Each QBG is a region and will receive its allocation directly from the Trust so long as it certifies that it has sufficient infrastructure to provide Opioid Abatement services.

1.2 PURPOSE OF THE RESOURCE TOOLKIT

The purpose of the Resource Toolkit is listed below:

 Document the Opioid Settlement structure which will provide clarity to the program's governance structure, vision and goals, roles and responsibilities and mechanisms by which communication between the Trustee, the GOSAC, the QBGs, and the RACs is clear and concise.

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- Provide guidance on establishing the GOSAC and RACs.
- Provide an initial list of Frequently Asked Questions (FAQs).
- Provide guidance on compliance and reporting, including guidance on the future Opioid Program Portal (portal)
- Establish both the strategic approach for ensuring the funds are directed where needed most and the approach to managing the Opioid Settlement funds.

1.3 VISION

The program's vision is to save lives, rejuvenate impacted communities, and recover from the Opioid Crisis.

1.4 GOALS

The program's goals are to implement school-based prevention programs, expand access to medication-assisted treatment, provide access to recovery housing, expand access to naloxone, and conduct research on the causes and consequences of opioid abuse.

Exhibit 1-1: Georgia's Opioid Crisis Plan visualizes Georgia's plan to save lives, rejuvenate impacted communities, and recover from the Opioid Crisis.

GOALS	OUTCOMES	CHANGE
 Implement school-based prevention programs Expand access to 	• Decreased number of new opioid users	INCREASE access to prevention, treatment, recovery, and harm reduction resources
 medication-assisted treatment Provide access to recovery housing 	 Increased access to treatment Increased access to recovery support and resources Increased availability of harm 	DECREASE prevalence of opioid abuse and addiction, as well as opioid-related deaths
 Expand access to naloxone Conduct research on the causes and consequences of 	reduction resourcesImproved understanding of	VISION: reduce opioid deaths and
opioid abuse	opioid abuse and addiction	addiction, improving population health

Exhibit 1-1: Georgia's Opioid Crisis Plan

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SECTION 2 PROGRAM CHARTER

The Program Charter establishes the scope and authority, describes roles and responsibilities of members, and defines the structure of the Trustee, the GOSAC, the Interagency Workgroup, the QBGs, and the RACs. The Program Charter also describes how these entities will interact and report to the Trustee, the decision-making process for each governing entity, the process for the GOSAC to solicit and receive recommended funding, and general governance guiding principles.

Section 2.1 provides an overview of the Governance Structure and Approach. For details refer to **Attachment A: Opioid Settlement Program Charter.**

2.1 GOVERNANCE STRUCTURE AND APPROACH

The Governance Structure is made up of a Trustee, the GOSAC, the QBGs, and the RACs. All disbursements of State Opioid Funds will be made by the Trustee after consultation with the GOSAC. The GOSAC will review funding requests from the RACs and provide a recommendation to the Trustee, who will then decide on the disbursement of funds.

Exhibit 2-1: Opioid Settlement Governance Structure identifies the program governance entities and members within the overall governance structure. Each governing entity within the program governance structure is established with discrete authority to provide decision making and guidance based on their role within the program.



Exhibit 2-1: Opioid Settlement Governance Structure

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SECTION 3 STAKEHOLDER ROLES AND RESPONSIBILITIES

The Stakeholders and Key Roles and Responsibilities section defines who will be impacted and who participates in the Opioid Settlement Program and their associated responsibilities.

Refer to **Attachment A: Opioid Settlement Program Charter** for detailed roles and responsibilities of the Trustee, GOSAC, RACs and QBGs.

3.1 STAKEHOLDERS

A Stakeholder is an individual, group of individuals or an organization that is involved with the program or whose interests may be impacted by the Opioid Settlement Program. Stakeholders that may be directly and/or indirectly impacted by the Opioid Settlement Program include but are not limited to:

- Governor Appointed Trustee
- GOSAC
- Regional Advisory Councils
- Qualifying Block Grantees
- Applicants
- Individuals
- Georgia Department of Behavioral Health and Developmental Disabilities
- Georgia Department of Community Health
- Georgia Department of Corrections
- Georgia Department of Economic Development
- Georgia Department of Education
- Georgia Department of Human Services
- Georgia Office of Insurance and Safety Fire Commissioner
- Georgia Department of Juvenile Justice
- Georgia Department of Public Health
- Georgia Office of Planning and Budget
- Georgia Office of Health Strategy and Coordination
- Certified Peer Specialists
- Community-Based Organizations
- Technical College System of Georgia
- Law Enforcement
- First Responders
- Georgia Legislature
- Health Care Providers
- Impacted Communities
- Family Members
- Advocates / Individuals with Lived Experience
- Addiction Recovery Support Centers
- Faith Leaders / Communities



- University System of Georgia
- Judiciary / Court System (Council of Accountability Court Judges (CACJ) and Criminal Justice Coordinating Council (CJCC))

3.2 ROLES AND RESPONSIBILITIES

The Roles and Responsibilities section defines the key roles involved in the Opioid Settlement Program and their associated responsibilities.

3.2.1 GOVERNOR APPOINTED TRUSTEE (TRUSTEE)

The Trustee shall be appointed by the Governor and shall be the Georgia DBHDD Commissioner. The Trustee, or his or her designee or other designee of the Executive Branch of the State, will make decisions regarding expenditures of State Opioid funds after consulting with the GOSAC. The Trustee is responsible for the ministerial task of releasing State Opioid Funds that are in the Trust and accounting for all payments into or out of the Trust. The Trustee shall retain final decision-making authority over expenditures of State Opioid Funds and for ensuring compliance with the reporting requirements set forth in the Georgia MOU and Opioid Settlement.

3.2.2 GEORGIA OPIOID SETTLEMENT ADVISORY COMMISSION (GOSAC)

The Government Participation Mechanism (GPM) is the mechanism formed to make recommendations regarding the allocation of State Opioid funds and is henceforth called the Georgia Opioid Settlement Advisory Commission or GOSAC. The function of the GOSAC is to review requests and make recommendations regarding the allocation of State Opioid Funds to the Trustee as well as RAC recommendations for regional funding, oversee the implementation of the requests and allocation of the funds, and ensure compliance with reporting requirements. The GOSAC will conduct at least quarterly meetings and review annual reports submitted by the RACs and Trustee.

The GOSAC is comprised of eight members, including four State appointees and four local government appointees, at least one of which will be appointed by the Georgia Association of Community Service Boards. The GOSAC is led by a non-voting State appointed Chairperson.

3.2.3 INTERAGENCY WORKGROUP

The purpose of the Interagency Workgroup is to review funding request submissions, validate the information in the funding request, and provide recommendations to the GOSAC. The Interagency Workgroup is comprised of subject matter experts.



3.2.4 REGIONAL ADVISORY COUNCIL (RAC)

The function of the RAC is to be available to consult with the GOSAC and with Participating Local Governments to best determine how funds will be spent for opioid remediation and/or abatement within the established Regions.

The RAC is comprised by Participating Local Governments for each region with 3-7 members. Each RAC must have one member from the county board of health; one member who is an executive team member of a Community Service Board; and a Sheriff (or representative designated by the sheriff) located in the region.

3.2.5 QUALIFYING BLOCK GRANTEE (QBG)

The QBG's primary function is to approve opportunities in their community for opioid abatement and/or remediation. The QBGs will develop a process for funds to be requested and approved. If a QBG requests State Opioid Funds, the request must be reviewed by the Trustee. QBGs will use the State's portal for annual reporting purposes. However, if State Opioid Funds are being requested then the Applicant will submit the request via the portal.

The City of Atlanta, Cobb County, DeKalb County, Fulton County, and Gwinnett County are QBGs. Each QBG is a region and will receive its allocation directly from the Trust so long as it certifies that it has sufficient infrastructure to provide opioid abatement services.

If the QBG wants State Opioid Funding, the funding request must be reviewed by the GOSAC and approved by the Trustee.

3.2.6 APPLICANT

The function of the Applicant is to identify opportunities in the community for the Opioid Settlement funds. The Applicant is responsible for submitting a funding request, responding to questions or concerns during the application and implementation phases, and managing the implementation of the funding request until completion. The Applicant will adhere to all compliance and reporting requirements. Examples of Applicants are providers, public and private non-profit organizations.

3.2.7 COMPLIANCE TEAM

The function of the Compliance Team is to conduct site visits to ensure implementation of certain provisions of services. In addition, the Compliance Team reviews any funding request that the Trustee, GOSAC or Programmatic Reporting Team identifies to ensure that all Opioid Settlement Funds are allocated and spent in accordance with the contract and Georgia MOU.



3.2.8 PROGRAMMATIC REPORTING TEAM

The function of the Programmatic Reporting Team is to review information, including invoices, received from recipients and coordinate with the Compliance Team as needed.

3.2.9 TECHNICAL REPORTING TEAM

The function of the Technical Reporting Team is to develop and maintain the application and reporting management portal(s). In addition, the team will secure and manage the data, and develop and maintain the reports and dashboard(s).

3.2.10 EVALUATION COMPONENT

In the future, the Trustee may propose an Evaluation Component. This group would develop and implement a process to evaluate and report on the benefits and outcomes of the Opioid Settlement Funds.



SECTION 4 GUIDANCE ON FUNDING

This section describes how funding will be allocated and managed in accordance with the Georgia MOU. Refer to **Attachment B: Georgia MOU** for details.

4.1 OVERVIEW

The State shall create a Qualified Settlement Trust for State Opioid Funds titled the "Georgia Opioid Crisis Abatement Trust". The Georgia Opioid Crisis Abatement Trust shall receive (1) the State Opioid Funds set forth in **Attachment B: Georgia MOU**; (2) funds from public or private sources, including gifts, grants, donations, rebates, or other settlements received by the State and designated to the Trust; and (3) any interest earned by these amounts. The Trustee shall be appointed by the Governor and shall be the Georgia DBHDD Commissioner or his or her designee or other designee of the Executive Branch of the State. The Trustee makes decisions regarding expenditures of State Opioid funds after consulting with the GOSAC and retains final authority over allocation of State Opioid Funds.

The Trustee shall provide an up-to-date accounting of payments into or out of the trust and/or its subaccounts upon written request of the State or a Participating Local Government.

4.2 FUNDING ALLOCATION

The State shall receive 75% (\$479 million) of the National Distributors and Manufacturers Opioid Settlements as its full allocation of State Opioid Funds. The 75% share includes \$91 million to be paid by the manufacturers and \$388 million to be paid by the distributors. Of the State's 75% share, the State shall expend at least 40% of those funds (\$191.6 million) on a regional basis. Expenditures should be aligned with the Core Strategies and approved uses.

Participating Local Governments directly receive 25% (\$159.7 million) of the National Distributors and Manufacturers Opioid Settlements. Local Governments must report on and advise their respective RACs on funds received and expended.

Exhibit 4-1: Allocation of National Distributors and Manufacturers Opioid Settlements provides a graphical representation of how Opioid Funding is allocated.





Exhibit 4-1: Allocation of National Distributors and Manufacturers Opioid Settlements

The State shall assign initial regional allocation percentages to the Regions using a national allocation model. Every three years, the Trustee shall recalculate the regional allocation percentages to the Regions based upon the following severity metrics: (1) the number of fatal opioid overdoses within the Region; (2) non-addiction treatment morphine milligram equivalents (MME) shipped into the Region; and (3) addiction treatment MME shipped into the Region.

Each Qualifying Block Grantee shall receive State Regional expenditures via a direct block grant so long as it certifies that it has sufficient infrastructure to provide Opioid Abatement services.

4.3 LEGAL / ADMINISTRATIVE FUNDING REQUIREMENTS

The State and Local Governments shall work cooperatively to ensure the funds are spent within the spirit of the **Attachment B: Georgia MOU** and the Settlements reached with the distributors and manufacturers and shall further work cooperatively to actively defend the funds from federal clawback and/or recoupment. The State shall endeavor to keep such Trustee expenses reasonable in order to maximize the funding available for the Opioid Abatement.

Key financial requirements include the following:

- Expenses of the Trustee shall be deducted first from interest earned on funds held by the Georgia Opioid Crisis Abatement Trust, and then, if necessary, may be deducted from the corpus of State Opioid Funds.
- Funds set aside for attorneys' fees and costs for State of Georgia outside counsel, and funds set aside for attorneys' fees for Local Government outside counsel.



- Funds are to primarily (no less than 70 percent of the amount received) be used for future abatement purposes. Funds used to reimburse the parties for past abatement expenses may not be used to reimburse past Medicaid expenses or any other expense that would be subject to a federal clawback, recoupment, or similar mechanism.
- In the event the federal government initiates and successfully claws back any Opioid Funds related to the Settlements, such amounts shall first be deducted from the total disbursements to be made to both the State and Local Governments in the calendar year the clawback claim is successfully made and shall thereafter be deducted from the total disbursements to be made in any subsequent calendar year if necessary. After such a deduction, the allocation between the State and Local Governments shall be applied to the remaining funds for the current calendar year or any subsequent calendar year if applicable. Deduction of amounts from the total disbursements shall include reimbursement of any amounts paid by the State or withheld from amounts due to the State as the result of a clawback and/or recoupment.
- Funding to support the Trustee's ability to manage and provide oversight of the implementation of the State Opioid Settlement Funds.

4.4 PROGRAMMATIC FUNDING REQUIREMENTS

4.4.1 CORE STRATEGIES AND APPROVED USES

To ensure funds are spent in accordance with the Opioid Settlement, the Core Strategies and approved uses listed below should be followed:

- Core Strategies include:
 - > Naloxone or other FDA-Approved Drugs to reverse opioid overdoses
 - > Medication-Assisted Treatment Distribution and other opioid-related treatment
 - > Pregnant & Postpartum Women
 - > Expanding Treatment for Neonatal Abstinence Syndrome
 - > Expansion of warm hand-off programs and recovery services
 - > Treatment for incarcerated population
 - > Prevention programs
 - > Expanding Syringe Service Programs
 - > Evidence-based data collection and research analyzing the effectiveness of the abatement strategies within the state
- Approved uses include:
 - > Prevention
 - Track, encourage, and support the effective utilization of new substance misuse prevention funding and resources in Georgia.



- Implement awareness and education to prevent youth initiation of substance use.
- Increase statewide public awareness of substance misuse, prevention, and the opioid epidemic.
- Implement education and awareness to help prevent drug overdose deaths.
- > Treatment
 - Increase access to treatment services for individuals with Opioid Use Disorder (OUD) with a specific focus on MAT and other evidence-based practices.
 - Increase access to treatment services and strategies for early diversion for individuals with OUD who are incarcerated or have criminal justice involvement.
- > Recovery
 - o Increase access to recovery support services for individuals with OUD.
 - Encourage employer policies and hiring practices that will support individuals in recovery obtaining and maintaining employment.
 - Increase access to safe and stable housing in addition to community-based support.
 - Reduce barriers to accessing and using insurance for individuals in recovery.
- > Harm Reduction
 - Expand the availability of Naloxone or other FDA-Approved Drug to reverse opioid overdoses.
 - Expand Syringe Exchange and Fentanyl test strip distribution programs.
 - Reduce overdose deaths and promote linkages to care.
- > Research and Evaluation
 - Convene policy leaders, and multidisciplinary partners, including law enforcement and researchers, to identify promising practices and to inform a research and program evaluation agenda.

4.4.2 GEORGIA OPIOID USE DISORDER CONTINUUM OF CARE MODEL

The DBHDD puts forth a model developed that encompasses prevention, treatment and recovery components designed to impact the OUD crisis across the continuum of care and provide the services and supports individuals require at the community level to have the opportunity to reach recovery. This model encompasses but is not limited to the Core



Strategies and approved uses described above. Implementation of a minimum of one fully actualized continuum of care for OUD in each region, should yield a reduction in overdose deaths and rejuvenate impacted communities.

Exhibit 4-2: Opioid Continuum of Care Framework provides the DBHDD's recommended framework for requesting and receiving opioid funds. This framework supplements the Core Strategies and approved uses described above and in the Georgia MOU. Refer to **Attachment C: Opioid Continuum of Care** for details.



Exhibit 4-2: Opioid Continuum of Care Framework

Below are the Continuum of Care components:

- 1. Primary Prevention Services The purpose of Primary Prevention is to prevent substance use disorders, including opioid use disorder, from ever occurring. All members of the population share the same general risk for substance misuse, although the risk may vary among individuals.
- Harm Reduction The purpose of Harm Reduction is the development of programs that aim primarily to reduce the adverse health, social and economic consequences of the use of legal and illegal psychoactive drugs, such as opioids, without necessarily reducing drug consumption. Harm reduction also consists of needle exchange and access to Naloxone, test strips, and other items.
- Stand-alone Detoxification The purpose of Stand-alone Detoxification is to care for individuals whose chemical dependence/withdrawal signs and symptoms are sufficiently severe enough to require 24-hour, 7 days per week medical management and supervision by appropriately trained medical and nursing staff in a permanent facility with inpatient beds.

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- 4. Intensive Residential Treatment The purpose of Residential Treatment is to provide a planned regimen of 24-hour observation, monitoring, treatment, and recovery support utilizing a multi-disciplinary staff for individuals who require a supportive and structured environment due to Opioid Use Disorder.
- 5. Medication Assisted Treatment (MAT) Outpatient Program The purpose of MAT is to provide a service during the day and evening hours to allow individuals to maintain residence in their community. This is for adults 18 years or older who require the use of medication to support their recovery from opioid use disorder utilizing a multi-disciplinary team to treat and support sustained recovery, focusing on early recovery skills, including the negative impact of substances, tools for developing support, and relapse prevention skills.
- Transitional Housing Linked to MAT Outpatient The purpose of Transitional Housing is to help individuals begin to strengthen their living skills and focus on creating financial, environmental, and social stability to increase the probability of long-term recovery beyond the artificial environment.
- Addiction Recovery Support Center The purpose of the Addiction Recovery Support Center is to provide non-clinical, peer-led activities that engage, educate and support individuals and families to make life changes necessary to establish, maintain and enhance recovery from substance use disorders.

4.5 FUNDING REQUEST AND ADMINISTRATION PORTAL

In the future, a portal will be developed for requesting State Opioid Funds. Any request that is to be reviewed by the GOSAC or a RAC must be submitted via the portal. The Trustee, GOSAC, RAC, Reporting Teams and Compliance Team will use the portal to facilitate the funding request, approval, and reporting processes. The QBG may choose to use the portal or provide their own mechanism for requesting funding and reporting on approved funding. Specific requirements of the portal will be developed at a later date.



SECTION 5 GUIDANCE ON ESTABLISHING THE GEORGIA OPIOID SETTLEMENT ADVISORY COMMISSION (GOSAC)

The primary function of the GOSAC is to review funding requests and make recommendations regarding the allocation of State Opioid Funds, oversee the implementation of the requests and allocation of the funds, and ensure compliance with reporting requirements.

GOSAC is comprised of eight members, including four State appointees and four local government appointees, at least one of which will be appointed by the Georgia Association of Community Service Boards. Each GOSAC member shall have a background in opioid use disorder, addiction treatment or policy, public health policy, mental health treatment or policy, or opioid-related law enforcement. The GOSAC is led by a non-voting State appointed Chairperson. GOSAC members shall serve for three years and shall be paid the per diem of a Member of the General Assembly for their service. Any member who is appointed shall be subject to removal by the appointing authority.

The State and Local Governments shall work cooperatively to ensure the funds are spent within the spirit of **Attachment B: Georgia MOU** and the Settlements reached with the distributors and manufacturers and shall further work cooperatively to actively defend the funds from federal clawback and/or recoupment, including, but not limited to, actively participating in any administrative procedure or other case or process related to defense of the funds from federal clawback and/or recoupment.

Refer to **Attachment A: Opioid Settlement Program Charter** for details on the GOSAC Governing Entity.



SECTION 6 GUIDANCE ON ESTABLISHING A REGIONAL ADVISORY COUNCIL (RAC)

This section provides guidance on establishing and managing a RAC.

The primary function of the RAC is to be available to consult with the GOSAC and with Participating Local Governments to best determine how funds will be spent for opioid remediation and/or abatement within the established Regions.

The RAC requirement for membership is defined below:

- Local Governments will form a RAC for each region with 3-7 members, not all of whom may reside in the same county. Each local government has the final decision on the total number of members.
- Each RAC must have one member from the county board of health; one member who
 is an executive team member of a community service board; and a Sheriff (or
 representative designated by the sheriff) located in the region.

The RAC shall use the Trustee's portal for funding request submission and reporting.

For more information on RAC, refer to Attachment A: Opioid Settlement Program Charter.

6.1.1 DBHDD RECOMMENDATIONS FOR ESTABLISHING A RAC

6.1.1.1 RAC MEMBERSHIP

It is recommended that each RAC have a total of seven members (three of whom are mandatory). An odd number ensures the governing entity can have a deciding vote. All members should be from the region. Below is a list of recommended member types:

- One member from a county board of health (mandatory)
- One executive member of a community service board (mandatory)
- One member that is a sheriff or representative designated by the sheriff (mandatory)
- One academic member (works in a university system)
- One member from a substance use provider that is licensed by the Georgia Department of Community Health (DCH)
- One member that has experienced or has a family member that has experienced an opioid addiction
- One member from a Judiciary (Accountability Court Judges)

In addition to the seven members listed above, the RAC will have a Chairperson and a Liaison(s). The Chairperson may be a voting (one of the members above) or non-voting



member and will be responsible for facilitating the RAC meetings. The Liaison will be a nonvoting member and provide administrative support to the RAC governing entity. Refer to **Attachment A: Opioid Settlement Project Charter** for details on the required roles and responsibilities of the RAC governing entity and its members.

6.1.1.2 RAC GUIDING PRINCIPLES

To ensure RAC related funds are spent in accordance with the Opioid Settlement, each RAC should determine the guiding principles and develop a plan for approving funding requests. The plan should align with the Core Strategies and approved uses set forth in the Settlement. It is recommended that RACs leverage Georgia's Continuum of Care framework to supplement the Core Strategies and approved uses.

6.1.1.3 RAC DATA TRANSPARENCY AND COMMUNICATION

For data transparency and communication, each RAC should develop and maintain the status and results of the opioid funding to provide stakeholders insight into how the funding is impacting the communities.



SECTION 7 FREQUENTLY ASKED QUESTIONS

The purpose of Frequently Asked Questions (FAQs) is to provide information on questions or concerns in an accessible location that is user friendly. FAQs are organized by topic or theme and may provide links to additional information.

Refer to **Attachment D: Frequently Asked Questions** for a list of questions and answers which will be revised, as necessary. In the future, FAQs will be placed on the Settlement website and portal for easy access. **Exhibit 7-3: Frequently Asked Questions** is a sample of the FAQs:

Question	Answer
What is the National Distributors and Manufacturers Settlement?	The National Distributors and Manufacturers Settlement is the \$26 billion offer to settle various lawsuits by pharmaceutical opioid distributors McKesson, AmerisourceBergen, and Cardinal Health, and the manufacturer Johnson & Johnson (J&J). Georgia opted into the National Distributors and Manufacturers Settlement reached on opioid litigation brought by states and local subdivisions against the three largest pharmaceutical distributors McKesson, Cardinal Health, and AmerisourceBergen, and manufacturer Janssen Pharmaceuticals, Inc. (including its parent company J&J).
What does the National Distributors and Manufacturers Settlement mean to Georgia?	Georgia opted into the National Distributors and Manufacturers Opioid Settlement reached on opioid litigation and, as a result, is expected to receive a combined total of approximately \$638 million from the National Distributors and Manufacturers Opioid Settlement.
How much of the National Distributors and Manufacturers Settlement did Georgia receive?	Georgia opted into the settlements and, as a result, is expected to receive a combined total of approximately \$638 million from the National Distributors and Manufacturers Opioid Settlement.
	An estimated \$517 million will come from the distributors making their payments over the course of 18 years.
	An estimated \$121.7 million will come from the Janssen/J&J Settlement, with the manufacturer making its payments over the course of nine years.
How is the National Distributors and Manufacturers Settlement allocated across the State?	The National Distributors and Manufacturers Opioid Settlement agreement allocates the awarded 25% of the funds to Participating Local Governments and 75% of the funds to a statewide abatement fund.
Will the National Distributors and Manufacturers Settlement require any change to how the distributors and manufacturers operate?	Yes, the proposed settlements provide robust injunctive relief that require the distributors and manufacturers to make significant changes in the way they conduct their business in order to address the Opioid epidemic on the supply side as well.

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How do I apply for funding?	If requesting State Opioid Funds, submit your request to the GOSAC. There will be a portal with instructions on how to submit your application.
	If requesting regional funds, submit your request to your local RAC. There will be a portal with instructions on how to submit your application.
	If you are located in Cobb County, DeKalb County, Fulton County, Gwinnett County, or the City of Atlanta, submit your request to the corresponding QBG.
What happens if funds are not used in accordance with the Core Strategies and/or approved uses?	If the Trustee believes that any funds are used for a non-approved purpose, it may request, in writing, the documentation underlying such alleged improper use of funds.
Do you have a Settlement website with more information?	A Settlement website is under development.
Will there be reporting requirements?	The Trustee and each RAC are required to report annually.
	The grantee / provider / contractor is required to report as directed by the Trustee, RAC and/or QBG.
Can I submit a paper application?	If state or regional funds are being requested, the funding request application is to be submitted through the Georgia Opioid Settlement Portal.
	If submitting a funding application for Cobb County, DeKalb County, Fulton County, Gwinnett County, or the City of Atlanta, contact the corresponding QBG for information on the application process.

Exhibit 7-3: Frequently Asked Questions



SECTION 8 GUIDANCE ON COMPLIANCE AND REPORTING

This section provides guidance on Compliance and Reporting for the Opioid Settlement.

8.1 COMPLIANCE

The Compliance Team is responsible for ensuring that all Opioid Settlement Funds are allocated and spent in accordance with the Georgia Memorandum of Understanding.

8.1.1 COMPLIANCE PROCESS FLOW

Exhibit 8-1: Compliance Process Flow describes the process the Compliance Team follows to monitor the status of the funding requests and the allocated funding. This process includes escalating a funding request to the Trustee when funding is not aligned with the Opioid Settlement guidelines.



Exhibit 8-1: Compliance Process Flow

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8.1.2 COMPLIANCE NARRATIVE

Exhibit 8-2: Compliance Narrative is the narrative that supports the process flow above. This narrative includes the process activities and associated stakeholders. The actors for this process include the Compliance Team, Reporting Team, Trustee, Trustee Liaison, and the Applicant.

#	Activity	Activity Description	Actor
1	Send notification for review	The Reporting Team (Programmatic) discovers an issue with the reported data and requests a review and response by the Compliance Team.	Reporting Team (Programmatic)
2	Review the data	Review the data and determine a response. Based on the findings the Compliance Team may monitor or escalate the concern to the Trustee.	Compliance Team
3	Monitor or escalate	If the response is to monitor for compliance, proceed to Step 4. If the response is to escalate to the Trustee, proceed to Step 6.	Compliance Team
4	Monitor	 Monitoring may include actions such as conducting a site visit or collaborating with the Applicant on a Corrective Action Plan (CAP). The Compliance Team will determine the actions taken on a case-by-case basis. If the issue is resolved, proceed to Step 10. If the issue is not resolved through monitoring, the Compliance Team shall escalate to the Trustee, proceed to Step 5. 	Compliance Team
5	Issue not resolved	Document a recommended course of action for review by the Trustee. The recommendation should include the steps that were taken to resolve the issue, the current status and a recommended resolution.	Compliance Team
6	Escalate	Notify the Trustee's Liaison that a recommendation needs to be reviewed and a decision made on the course of action. Refer to Attachment A: Opioid Settlement Program Charter Trustee Meeting Process Flow for details on adding an item to the Trustee's meeting agenda.	Compliance Team

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#	Activity	Activity Description	Actor
7	Review recommendation	Review the Compliance Team's recommendation and determine the course of action. The course of action may include canceling the funding. The Trustee is required to provide a reason category for canceling the funding.	Trustee
8	Notify the Compliance Team	Notify the Compliance Team of the Trustee's decision. If the decision is to monitor the funding, go back to Step 4. If the decision is to cancel the funding, then notify the Applicant that the funding will be canceled and provide the reason for the cancelation, proceed to Step 9.	Trustee Liaison
9	Cancel	Notify the Applicant that the funding is being canceled. The Trustee is required to provide a reason category for canceling. No further action is required. Note: The Compliance Team will change the Status of the funding to <i>Canceled</i> in the portal and an automated notification will be sent to the Applicant.	Compliance Team
10	Continue monthly reporting	Applicant continues monthly reporting, and no further action is required.	Applicant

Exhibit 8-2: Compliance Narrative

8.2 **REPORTING**

Reporting is valuable and necessary in order to look at past performance and improve future decision-making, ensure funds are spent appropriately, give information to the community to assist with future funding requests and project future community needs. The Applicant, RAC, GOSAC and Trustee all play a part in reporting and reviewing data. Through reporting, the community is able to see how the Opioid Settlement is assisting with the opioid epidemic. For details on the Reporting Process, refer to **Attachment A: Opioid Settlement Program Charter**.

The annual reports for the Trustee and RACs will be published on a website for access by the community.

The Trustee is responsible for reporting the following:

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- An up-to-date accounting of payments into or out of the trust and/or its subaccounts upon written request of the State or a Participating Local Government.
- An annual report detailing: (1) the amounts received by the Trust; (2) the allocation of any awards approved, listing the recipient, amount awarded, programs funded, and disbursement terms; and (3) the amounts actually disbursed.
- An assessment of how well resources have been used by the State, the Local Governments and Regions to abate opioid addiction, overdose deaths, and the other consequences of the Opioid Crisis in the annual report.

Each RAC is responsible for reporting annually to the Trustee and GOSAC detailing: (1) the amount received by each local government within the Region; (2) the allocation of any awards approved, listing the recipient, amount awarded, programs funded, and disbursement terms; and (3) the amounts actually disbursed and approved allocations. Each Participating Local Government within the region is responsible for providing information to the RAC for inclusion in the RAC's annual report.

The Applicant is required to expend and account for funds, assure they abide by the State Laws/procedures, and terms and conditions, and report the status of the funds to assure the spending is within the approved use of funds and within budget.

If the State believes that any Participating Local Government has used funds for a nonapproved purpose, it may request, in writing, the documentation underlying such alleged improper use of funds. If any ten Participating Local Governments believe the State has used funds for a non-approved purpose, they may request jointly, in writing, the documentation underlying such alleged improper use of funds. Refer **to Attachment B: Georgia MOU** for details.