NEWS RELEASE

OAA Awards $11 Million in Funding to Agencies of the Commonwealth

August 21, 2023 – On Friday, August 18, 2023, a committee of the Virginia Opioid Abatement Authority (OAA) voted to award $10,961,013 in funding to sixteen different agencies of the Commonwealth for opioid abatement and remediation efforts.

Under a statute that was passed into law in 2021, a minimum of 15% of opioid settlement funds paid to the Commonwealth is to be spent on abatement efforts managed by state agencies.

Senator Todd Pillion, Chairman of the OAA, described the awards as “far reaching,” noting that “this year’s approved state agency opioid abatement projects will be launched across a diverse range of organizations, including executive branch agencies, judicial offices, universities, and independent state agencies.” Funding for these projects is scheduled to be transferred from the OAA to the recipient organizations as early as October 1.

Dr. Sarah Thomason, a clinical pharmacist who chairs the OAA’s Grants Committee, noted that the funding will support a wide variety of projects. “The full continuum of care was considered within these projects,” she said. “Funding was awarded for prevention and education, clinical research, prescription monitoring, naloxone distribution, treatment programs, recovery supports, and more.”

The approved projects were selected through a competitive process and included a review of proposals submitted by the agencies. The resulting awards will be the first allocation of OAA funds for state agencies since the Commonwealth received its first set of national settlement payments from manufacturers and distributors of prescription opioids in 2022. The payments from the various settling companies are expected to continue for at least 16 more years and will exceed $1.1 billion in total funding.
In June the OAA announced more than $23 million in grant awards to 76 cities and counties in Virginia. Combined with the announcement of funding for state agencies, the total amount of awards by the OAA is nearly $34 million to date. According to a June report published by the National Academy of State Health Policy, only ten states had awarded specific abatement programs, including Virginia.

Recent developments with Purdue Pharma and Mallinckrodt bankruptcy cases will not affect the availability of funds for the OAA’s announced grants, according to Senator Pillion. “The awards announced by the OAA are from finalized settlements, and these funds have been received by the Commonwealth,” he said. “These awards build on the OAA’s commitment to support strategies and initiatives on local, regional, and state levels that will strengthen our communities and improve lives and livelihoods in all regions of the Commonwealth.”

The OAA was established by the General Assembly in 2021 to oversee the distribution of 55% of Virginia’s total settlement funds. Of the remainder, 30% is distributed directly to cities and counties and 15% to the Commonwealth. The use of funds is restricted by court orders and state statute, with the restrictions aiming for the funds to be used for opioid abatement efforts.

For more information contact info@voaa.us
Virginia Indigent Defense Commission (VIDC) $224,745

This project will connect the VDIC and Virginia Recovery Corps (an AmeriCorps program) in collaboration to embed re-entry and recovery specialists within public defender offices in the seven localities with highest overdose death rates combined with the largest public defender caseloads (Chesterfield, Fredericksburg, Lynchburg, Martinsville, Pulaski, Roanoke, and Winchester). These Recovery Corps members are trained as peer specialists or working toward their peer specialist certification and will navigate justice-involved individuals in resource development and recovery. The program includes funding for one full time employee at VDIC for program oversight (with some preference given to candidates that are peer specialists or peer specialist supervisors during recruitment) and seven Recovery Corps members working in the seven public defender offices. This will be a pilot program that could lead to expansion in future years to additional communities.

OAA will require a report be completed by VDIC and Recovery Corp measuring the results of the pilot program and addressing options for long term strategies, including plans to achieve more sustainable funding when OAA support is no longer available. Also, since not all communities in Virginia have a public defender’s office, there may be an interest in creating similar re-entry and recovery specialists in those localities and housing them within a local pre-trial office, or potentially within a Commonwealth’s Attorneys’ office, or other similar criminal justice agency. For this reason, VDIC is expected to offer reasonable assistance, if requested, from such agencies seeking information about this project.

Radford University $160,277

This project will expand the existing Radford Collegiate Recovery Program with enhanced outreach and awareness, overdose prevention, healthcare screening and connections, implementing a “warm hand-off” process, and support for a new living-learning facility. They will also work with the New River Valley Recovery Ecosystem program that is funded through OAA’s cooperative partnership grant led by Montgomery County.

University of Virginia (UVA) $258,171

Provides funding for a Street Medicine Access Reduction and Treatment (SMART) clinic, which will be a clinic connected to the multi-resource day shelter known as The Haven. This clinic will be an office based opioid treatment (OBOT) program to engage individuals with opioid use disorder (OUD) who otherwise may not seek treatment. Will also provide access to long-acting injectable medication for people with opioid use disorder, expand the existing helpline, and deploy harm reduction supplies via a vending machine (in compliance with FDA and Va Dept of Health guidelines).
Department of Medical Assistance Services (DMAS) $150,000

This will be a multi-year, multi-step project. The first year includes $150,000 for DMAS to create and facilitate a program for hospitals to launch bridge programs for patients with opioid use disorders. The emergency department bridge clinic model seeks to address a significant gap in the continuum of care for individuals who present to emergency departments with overdose emergencies. For people with substance use disorders (SUD), the emergency department can likely be one of few linkages to the healthcare system to help address their needs. Emergency department bridge clinic programs consider the emergency department visit associated with an overdose emergency to be a critical intervention point to offer support, services, education, care coordination (often integrating peer support specialists) and significant follow up to link people struggling with SUD with treatment outside of the emergency department.

Funding for this effort in years two through five would then pay for the start-up cost of the selected bridge programs. The year two through five funding requests from DMAS to the OAA are expected to be approximately $950,000 per year. These costs will support the launch of at least two bridge programs each year. Once bridge programs are in operation, they are expected to become self-sustaining with medical reimbursements. DMAS has successfully managed similar programs, using Federal grant funds for program implementation at Virginia Commonwealth University Health System, Richmond, and program expansion at Carilion Clinic in Roanoke.

Virginia Commonwealth University (VCU) $525,711

There are two projects funded approved for VCU.

1. The first is for the VCU Wright Center for Clinical and Translational Research in the amount of $280,711 to create a technical resource “toolkit” for Virginia’s cities and counties. Developed by VCU researchers with support from the Virginia Society of Addiction Medicine (VASAM), this online toolkit will provide examples of opioid abatement best practices and evidence-based programs and efforts that cities and counties can implement using opioid settlement funds. VCU will also offer technical assistance including strategic planning, program implementation, and evaluation services for cities and counties on a fee basis. Publishing of information will occur on a quarterly basis.

2. The second project is for the VCU Massey Cancer Center to research and develop protocols for pain management in palliative care settings. There is an increasing problem of patients surviving their cancer but with an opioid dependence. This project is approved for funding in the amount of $245,000.
Virginia Dept of Education (DOE) $520,250

DOE will use these funds to hire a Health and Safety Plan Coordinator to work with school districts across the state to implement K–12 opioid prevention programs, to create an Opioid Abatement Education Ambassador Program, and to create a student-centered social media campaign.

Virginia Foundation for Health Youth (VFHY) $1,200,000

One-time funding in the amount of $1,200,000 will be used to launch a prevention and education campaign for youth and young adults, with message packages reaching approximately 1,000,000 youth ages 13–24 with a frequency of 2 to 6 times each. Campaign will include initial concept development and testing for the youth/young adult campaign and will include both quantitative and qualitative testing for discovering the most effective messages and branding elements for the audience; production of two unique message packages with each lasting approximately eight weeks in length and will include the creation of at least one flagship video/commercial; and media buys that will include media planning, implementation, mid-campaign optimization, reporting and analysis of the two media flights.

Virginia Cooperative Extension Service (Virginia Tech) $724,856

These funds will be used to continue and expand the Rural Opioid Technical Assistance Project (current Federal funding expires in August 2023), to include funding four full-time regional coordinators and a project coordinator along with part-time regional agents. Among other things, this program trains teachers to implement the evidence-based Botvin Life Skills program and Mental Health First Aid in schools and enables the Extension Service to continue to participate in regional substance use education and prevention coalitions. Major project activities will include supporting local coalitions that focus on substance misuse and addiction, disseminating evidence-based programs for prevention of substance use disorder and support of individuals in recovery from substance use disorder and their families, and facilitating and coordinating connection to Virginia Cooperative Extension and Virginia Tech resources and expertise as appropriate.

Va Dept of Behavioral Health & Development Services (DBHDS) $522,289

There are three projects approved for DBHDS.

1. The first is $122,289 to fund a substance use data analyst to collect and aggregate agency-wide data related to substance use efforts by DBHDS and the various community service boards and behavioral health authorities across Virginia. This analyst will be responsible for coordinating the agency’s participation in Virginia’s data warehouse known as the Framework for Addiction Analysis and Community Transformation (FAACT). The Governor’s
Executive Order #26 ("Crushing the Fentanyl Epidemic") calls for increased utilization of FAACT by identified state agencies including DBHDS.

2. The second project is for $200,000 for the agency to work in coordination with the Training Committee of the Office of the Executive Secretary of the Supreme Court to develop a training curriculum and plan to offer training to judges, Commonwealth’s Attorneys, defense attorneys, magistrates, probation officers and other professionals who work in the court system on the topic of substance use disorders. The training will focus on examples of successful and evidence-based alternatives to incarceration for individuals who respond well to treatment and related recovery services. DBHDS will agree to involve various criminal justice stakeholders in this process, including Commonwealths Attorneys and members of the Bar Association. The funding in the first year will be used to hire a contractor to develop the curriculum and delivery plan, which could then be implemented with funding in the second and subsequent years.

3. The third project for DBHDS is $200,000 to develop a plan for Virginia's 2nd recovery high school (one currently exists in Chesterfield County and serves youth with substance use disorders in Central Virginia). The scope of this project will include researching geographic trends related to adolescent substance use, identifying regions with school districts and local elected bodies that are interested in developing partnerships to open a recovery high school, identifying the clinical supports necessary for the recovery components of the school, and identifying the financial and operational requirements for the recovery high school.

Office of the Attorney General (OAG) $745,000

The project will fund the launch of a mass media campaign to educate Virginians about the dangers of opioids, with a focus on fentanyl. Built upon the “One Pill Can Kill” and the “Get Smart About Drugs” public information campaigns from the U.S. Drug Enforcement Administration (DEA), the OAG will purchase advertising spots on billboards, on radio and television stations, and on digital and social media platforms.

These public service announcements will run for six months reaching over 4,500,000 Virginians between November 2023 and May 2024. The effort will raise awareness and drive teens and their parents/caregivers to the drug awareness resources on the https://virginiarules.org/ website and to the DEA website https://www.getsmartaboutdrugs.gov. The OAG will contribute $60,000 in matching funds and partnering media outlets have committed to contributing $450,000 worth of advertising.
Office of the Executive Secretary of the Supreme Court of Virginia (OES) $500,000

OES will use these funds to develop a statewide best practices standard for drug testing within all the alternative dockets and promote awareness about that standard to all localities that provide financial support to alternative dockets. The OES will also use these OAA funds to establish a grant program to offer financial assistance to localities to help pay for specialty dockets drug testing that meets the OES standard.

Department of Health Professions (DHP) $361,219

In recent years DHP has received Federal funding to connect the prescription monitoring program to prescribers’ electronic health records and pharmacists’ pharmacy dispensing systems. This effort has been very successful in promoting the appropriate use of controlled substances. However, the Federal funding of $830,180 has been reduced to $468,961, resulting in a gap of $361,219 to maintain this functionality.

Department of Criminal Justice Services (DCJS) $710,000

This project will provide funding for the Commonwealth’s addiction data warehouse known as the Framework for Addiction Analysis and Community Transformation (FAACT). Operating support for FAACT is necessary to input and integrate data from state agencies as required in the Governor’s Executive Order #26 (“Crushing the Fentanyl Epidemic”), to support implementation of the “Right Help Right Now” behavioral health initiative, and to support cities and counties that submit and analyze data for mapping and reporting. This funding also includes a full-time employee in DCJS dedicated to project management of FAACT.

Virginia Department of Health (VDH) $2,903,843

There are four projects within the VDH.

1. The first is $603,843 in one-time funding for staff and direct operating expense needed to expand the state’s distribution system for intranasal naloxone. VDH will onboard contractors and/or grant-limited staff to expand the number of high-impact organizations eligible to receive free or reduced cost naloxone, and the agency will create an online mail-order system for people who are at risk of overdose to order naloxone for postal delivery. Both of these enhancements to current distribution strategies will be based on nationally accepted best practices and fully compliant with FDA and VDH regulations.

2. The second project will provide $1,000,000 in one-time funding to the agency to purchase doses of intranasal naloxone for distribution by VDH. This amount does not fully fund the agency’s needs but will assist in making up for funding shortfalls caused by the expiration of certain Federal grants.
3. The third project includes $1,000,000 to support the agency’s goal of supporting and extending certified harm reduction program sites around the Commonwealth. These funds will be used to add one outreach worker to each of seven existing program sites, in cooperation with the non-profit organizations that lead those programs. These workers will be charged with identifying people at high risk of overdose and providing them with education, treatment connections, access to primary health care screening, and naloxone. In addition to the seven existing sites, similar positions will be funded at each of three new harm reduction sites to be identified by the agency. All harm reduction efforts will be in full compliance with FDA guidelines, state law, and VDH regulations.

4. The fourth project provides $300,000 for the salaries of three new opioid use specialists. One specialist will be embedded in each of three different local health districts: the Hampton & Peninsula Health District, the Portsmouth Health District, and the Richmond and Henrico Health District. In these districts the OUD specialists will champion the district-wide efforts in collaboration with local governments to maximize the reach and effectiveness of the agency’s various opioid use disorder abatement efforts (prevention, education, treatment, and recovery).

Virginia Department of Social Services (DSS) $205,500

This project provides DSS with funding to expand kinship navigator programs in coordination with local governments and community partners. Parental substance is often one of the reasons for removing children from their home; in many cases extended family members (kin) or friends (fictive kin) assume guardianship of these children. Kinship navigators provide support to kin or fictive who are acting as guardians or care providers for these children. This project provides funding to DSS to fund competitive proposals submitted by local DSS offices seeking to expand existing kinship navigator programs. Local governments, which operate the local DSS, are also able to use their direct opioid settlement and/or OAA grant funds for these purposes. This award will fund the expansion of up to five different kinship care navigator programs beginning in 2024. The funding of $205,500 is a half year as the program is not expected to begin incurring costs until early 2024.

Virginia Department of Corrections (DOC) $1,254,152

There are three projects within the Department of Corrections.

1. The first will provide $586,152 to fund six contracted licensed clinical social workers to support opioid use disorder therapies at the six DOC institutions that operate medication-assisted treatment programs. These programs provide medical care including prescription medication for patients with diagnosed opioid use disorders. The addition of licensed clinical social workers to these programs is expected to significantly increase the therapeutic
component of the programs and contribute to improved patient outcomes, improved success in re-entry to the community, decreased overdoses, and reduced rates of recidivism.

2. The second DOC project is a pilot program to evaluate the effectiveness of long-acting injectable opioid agonists in the continued care of inmates with diagnosed substance use disorders. Under this program, up to thirty state-responsible inmates transferred to DOC by local or regional jails with an existing prescription for OUD medications will be enrolled in the pilot program. These patients will be switched from receiving a daily oral dosage of suboxone (or similar opioid partial agonist) to an injectable buprenorphine extended-release medication (such as Sublocade®).

The pilot project will be overseen by DOC’s medical director and variables to be studied will include systemwide changes in overdoses, emergency room visits, and hospitalizations of patients under DOC’s care. The report will be completed and transmitted to DOC leadership, documenting findings and recommendations. Funding is for one year with this project at $648,000.

3. The third project to be funded is the creation of a video that provides substance use disorder education to all inmates at reception into the Dept of Corrections. This video will focus on addiction as a chronic yet treatable illness and will highlight the program options that are available to inmates within the DOC. Additionally, the video will be shown on DOC’s wellness channel and in District Probation and Parole offices. The intent is for nearly all incarcerated inmates to have a chance to view the video at least once during their incarceration. This portion of the award is $20,000.