15.291 Kentucky Opioid Abatement Advisory Commission -- Membership -- Meetings -- Criteria for award of moneys from opioid abatement trust fund.

- (1) There is hereby established the Kentucky Opioid Abatement Advisory Commission. The commission shall be attached to the Department of Law for administrative purposes.
- (2) (a) The commission shall consist of the following voting members:
 - 1. The Attorney General or his or her designee, who shall act as chair;
 - 2. The State Treasurer or his or her designee;
 - 3. The secretary of the Cabinet for Health and Family Services or his or her designee;
 - 4. One (1) member appointed by the University of Kentucky from the HEALing Communities Study Team;
 - 5. One (1) member appointed by the Attorney General representing victims of the opioid crisis;
 - 6. One (1) member appointed by the Attorney General representing the drug treatment and prevention community;
 - 7. One (1) member appointed by the Attorney General representing law enforcement; and
 - 8. Two (2) citizens at large appointed by the Attorney General.
 - (b) The commission shall consist of the following nonvoting members who shall serve at the pleasure of their appointing authority:
 - 1. One (1) member appointed by the Speaker of the House of Representatives; and
 - 2. One (1) member appointed by the President of the Senate.
- (3) (a) Members of the commission appointed under subsection (2)(a)1. to 3. of this section shall serve terms concurrent with holding their respective offices or positions.
 - (b) The remaining members of the commission shall serve staggered two (2) year terms as follows:
 - 1. Members of the commission appointed under subsection (2)(a)4. to 6. of this section shall serve an initial term of two (2) years; and
 - 2. Members of the commission appointed under subsection (2)(a)7. to 8. of this section shall serve an initial term of one (1) year.
 - (c) Members of the commission shall not receive compensation for their services but may be reimbursed for necessary travel and lodging expenses incurred in the performance of their duties.
- (4) (a) Meetings of the commission shall be conducted according to KRS 61.800 to 61.850.
 - (b) The commission shall meet at least twice within each calendar year.
 - (c) Five (5) voting members of the commission shall constitute a quorum for the transaction of business.

- (d) Each member of the commission shall have one (1) vote, with all actions being taken by an affirmative vote of the majority of members present.
- (5) The commission shall award moneys from the opioid abatement trust fund established in KRS 15.293 to reimburse prior expenses or to fund projects according to the following criteria related to opioid use disorder (OUD) or any co-occurring substance use disorder or mental health (SUD/MH) issues:
 - (a) Reimbursement for:
 - 1. Any portion of the cost related to outpatient and residential treatment services, including:
 - a. Services provided to incarcerated individuals;
 - b. Medication-assisted treatment;
 - c. Abstinence-based treatment; and
 - d. Treatment, recovery, or other services provided by community health centers or not-for-profit providers;
 - 2. Emergency response services provided by law enforcement or first responders; or
 - 3. Any portion of the cost of administering an opioid antagonist as defined in KRS 217.186; or
 - (b) Provide funding for any project which:
 - 1. Supports intervention, treatment, and recovery services provided to persons:
 - a. With OUD or co-occurring SUD/MH issues; or
 - b. Who have experienced an opioid overdose;
 - 2. Supports detoxification services, including:
 - a. Medical detoxification;
 - b. Referral to treatment; or
 - c. Connections to other services;
 - 3. Provides access to opioid-abatement-related housing, including:
 - a. Supportive housing; or
 - b. Recovery housing;
 - 4. Provides or supports transportation to treatment or recovery programs or services;
 - 5. Provides employment training or educational services for persons in treatment or recovery;
 - 6. Creates or supports centralized call centers that provide information and connections to appropriate services;
 - 7. Supports crisis stabilization centers that serve as an alternative to hospital emergency departments for persons with OUD and any co-occurring SUD/MH issues or persons that have experienced an opioid overdose;

- 8. Improves oversight of opioid treatment programs to ensure evidence-based and evidence-informed practices;
- 9. Provides scholarships and support for certified addiction counselors and other mental and behavioral health providers, including:
 - a. Training scholarships;
 - b. Fellowships;
 - c. Loan repayment programs; or
 - d. Incentives for providers to work in rural or underserved areas of the Commonwealth;
- 10. Provides training on medication-assisted treatment for health care providers, students, or other supporting professionals;
- 11. Supports efforts to prevent over-prescribing and ensures appropriate prescribing and dispensing of opioids;
- 12. Supports enhancements or improvements consistent with state law for prescription drug monitoring programs;
- 13. Supports the education of law enforcement or other first responders regarding appropriate practices and precautions when dealing with opioids or individuals with OUD or co-occurring SUD/MH issues;
- 14. Supports opioid-related emergency response services provided by law enforcement or first responders;
- 15. Treats mental health trauma issues resulting from the traumatic experiences of opioid users or their family members;
- 16. Engages nonprofits, the faith community, and community coalitions to support prevention and treatment, and to support family members in their efforts to care for opioid users in their family;
- 17. Provides recovery services, support, and prevention services for women who are pregnant, may become pregnant, or who are parenting with OUD or co-occurring SUD/MH issues;
- 18. Trains healthcare providers that work with pregnant or parenting women on best practices for compliances with federal requirements that children born with Neonatal Abstinence Syndrome get referred to appropriate services and receive a plan of care;
- 19. Addresses Neonatal Abstinence Syndrome, including prevention, education, and treatment of OUD and any co-occurring SUD/MH issues;
- 20. Offers home-based wrap-around services to persons with OUD and any co-occurring SUD/MH issues, including parent-skills training;
- 21. Supports positions and services, including supportive housing and other residential services relating to children being removed from the home or placed in foster care due to custodial opioid use;
- 22. Provides public education about opioids or opioid disposal;
- 23. Provides drug take-back disposal or destruction programs;

- 24. Covers the cost of administering an opioid antagonist as defined in KRS 217.186:
- 25. Supports pre-trial services that connect individuals with OUD and any co-occurring SUD/MH issues to evidence-informed treatment and related services;
- 26. Supports treatment and recovery courts for persons with OUD and any co-occurring SUD/MH issues, but only if they provide referrals to evidence-informed treatment;
- 27. Provides evidence-informed treatment, recovery support, harm reduction, or other appropriate services to individuals with OUD and any co-occurring SUD/MH issues who are incarcerated, leaving jail or prison, have recently left jail or prison, are on probation or parole, are under community corrections supervision, or are in re-entry programs or facilities;
- 28. Meets the criteria included in any settlement agreement or judgment between the parties listed in KRS 15.293(3)(a); or
- 29. Any other project deemed appropriate for opioid-abatement purposes by the commission.
- (6) The commission may identify additional duties or responsibilities, including:
 - (a) Reporting on projects and programs related to addressing the opioid epidemic;
 - (b) Developing priorities, goals, and recommendations for spending on the projects and programs;
 - (c) Working with state agencies or outside entities to develop measures for projects and programs that address substance use disorders; or
 - (d) Making recommendations for policy changes on a state or local level, including statutory law and administrative regulations.

(7) The commission shall:

- (a) Create and maintain a Web site on which it shall publish its minutes, attendance rolls, funding awards, and reports of funding by recipients; and
- (b) Promulgate administrative regulations to implement this section. The commission may promulgate emergency administrative regulations to take effect immediately so that funds may be distributed more quickly and efficiently to combat the opioid epidemic.

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