STATE OF MINNESOTA

Executive Department



Executive Order 22-07

Establishing the Opioids, Substance Use, and Addiction Subcabinet and the Governor's Advisory Council on Opioids, Substance Use, and Addiction

I, **Tim Walz**, **Governor of the State of Minnesota**, by the authority vested in me by the Constitution and applicable statutes, issue the following Executive Order:

Opioid overdose deaths, along other substance-related deaths, have increased significantly in Minnesota and across the country over the past two decades—and they continue to increase year after year. Although Minnesota has one of the lowest drug overdose mortality rates in the country, we have seen that rate trend upward. Since 2000, nearly 5,400 Minnesotans have lost their lives due to opioids. The Minnesota Department of Health reported 54 overdose deaths in 2000, and 678 in 2020. Increases in Minnesota's overdose mortality rates have been especially dramatic among people of color and Native Americans, leading to some of the worst racial disparities in drug overdose mortality in the nation. In Minnesota, Native Americans are seven times more likely, and African Americans are twice as likely, to die from opioid-related overdoses than white people.

There are many reasons for the tragic rise in opioid-related deaths. To start, opioids can be easy to obtain. Most common prescription opioid painkillers are Schedule II drugs. This means that any physician may prescribe an opioid painkiller in the course of pain treatment. Opioids are also highly addictive. They activate the brain's reward systems that trigger the release of dopamine, leading to feelings of intense pleasure. The early stages of opioid abuse are primarily driven by this stimulation of the brain's reward systems.

Fentanyl—a synthetic opioid—has also fueled the opioid crisis. Fentanyl is 50 times stronger than heroin and 100 times stronger than morphine. Since fentanyl is so potent, even a very small amount can be lethal. It is widely available and often mixed intentionally or unintentionally with other drugs. People who use drugs are often unaware that they are taking fentanyl, leading to deadly results. Synthetic opioids were responsible for more than 80 percent of the opioid-related overdose deaths in 2020.

In addition to increased overdoses from opioids and other drugs, we have also witnessed an increase in alcohol sales and excessive consumption. This increase is concerning, because alcohol is the third-leading preventable cause of death in the United States. Alcohol is the

leading substance driving admission to substance use disorder treatment for adults in Minnesota. In 2020, 992 Minnesotans' deaths were solely attributable to alcohol. Even more Minnesotans died from alcohol in combination with other factors.

Despite the deadly consequences of substance use, only one in ten people with a substance use disorder receives treatment. To prevent more tragic deaths, we must do more to combat substance use and educate and provide treatment to all those who need it.

In 2019, I signed the Opiate Epidemic Response bill into law. Through that bill, Minnesota now raises funds from prescribers, drug manufacturers, and distributors to fight the opioid crisis. The bill also established the Opioid Epidemic Response Advisory Council ("OERAC") to oversee the funding. OERAC is responsible for developing and implementing a comprehensive and effective statewide effort to address the opioid addiction and overdose epidemic in Minnesota.

Minnesota Attorney General Keith Ellison leads key aspects of Minnesota's response to the opioid epidemic, including ensuring Minnesota's participation in national lawsuits against opioid distributors and manufacturers. In the coming years, Minnesota will receive almost \$300 million from settlements in several of those suits. Attorney General Ellison led efforts to reach an agreement between cities, counties, and the State on the allocation and distribution of these funds, which includes distribution of 75 percent of the proceeds to local governments (including all counties and 33 cities). The State's portion of these settlement funds will be overseen and distributed by OERAC. These funds will support programs and strategies to help communities and Tribal Nations address the opioid epidemic, including grants for traditional healing programs and grants to communities for overdose prevention. This important work will help Minnesota address the opioid crisis and will save lives.

As the grim reports of overdose deaths plainly show, more work remains to be done to address opioids, substance use, and addiction issues. Coordination and leadership among state agencies, with input from the public, is vital to ensuring that resources are aligned to meet these challenges most effectively. A subcabinet can assist with coordination and strategy development across our enterprise, and an advisory council can provide much-needed external input from affected communities. An Addiction and Recovery Director in the Office of the Governor and Lieutenant Governor will help lead and facilitate this critical interagency and public engagement.

For these reasons, I order as follows:

- 1. To more effectively coordinate and marshal state resources, the Opioids, Substance Use, and Addiction Subcabinet ("Subcabinet") is established.
- 2. The purpose of the Subcabinet is to:
 - a. Identify challenges that exist within state government that create silos around addiction, treatment, and recovery and that limit access to treatment options or addiction-related services.
 - b. Identify opportunities that exist within state government that support access to treatment options or addiction-related services.

- c. Identify barriers and gaps in service for Native Americans, African Americans, other communities of color, and other communities—including but not limited to the LGBTQ+ community—seeking treatment from opioid or substance use addiction and propose solutions.
- d. Identify how the State can address addiction as a chronic disease, emphasizing that there are multiple ways to enter sobriety.
- e. Identify policies and strategies that address prevention efforts, including addressing underlying causes and public awareness and education around the dangers of issues including, but not limited to, opioid abuse, use of fentanyl and other synthetic opioids, other substance use, excessive alcohol consumption, and addiction.
- 3. The members of the Subcabinet are the Commissioner, Executive Director, or Chair of the following agencies and council:
 - a. Department of Human Services
 - b. Department of Health
 - c. Department of Education
 - d. Department of Public Safety
 - e. Department of Corrections
 - f. Minnesota Management and Budget
 - g. Office of Higher Education
 - h. Interagency Council on Homelessness
- 4. The Governor's Addiction and Recovery Director will serve as Chair of the Subcabinet.
- 5. The duties of the Subcabinet are as follows:

a. Opioids, Substance Use, and Addiction Policy and Strategy Development.

- i. Identify challenges and opportunities that exist with accessing treatment and support services and develop recommendations to overcome these barriers.
- With input from affected communities, develop policies and strategies that will reduce barriers and gaps in service for Native Americans, African Americans, other communities of color, and other communities—including but not limited to the LGBTQ+ community—seeking treatment for opioid or substance use addiction.

- iii. Develop policies and strategies that the State may adopt to expand Minnesota's recovery infrastructure, including detox facilities, treatment facilities, and sober housing.
- iv. Develop policies and strategies to expand services and support for people in Minnesota suffering from opioid or substance use addiction through partnerships with the Office of the Attorney General and OERAC.
- v. Develop policies and strategies for agencies to manage addiction and the relationship it has with co-occurring conditions.
- vi. Identify policies and strategies that the State could adopt to address opioid or substance use addiction among Minnesotans experiencing homelessness.
- vii. Submit legislative recommendations addressing opioids, substance use, and addiction in Minnesota by December 31, 2022. The legislative recommendations must also include the establishment of a permanent Opioid, Substance Use, and Addiction Council, as well as statutory language and goals for that Council.
- b. **Public Engagement.** Successful policy and strategy development requires that those affected by addiction, including members of Native American communities, communities of color, and other Minnesota communities, have a voice and the opportunity to participate in the process. The Subcabinet will develop and implement a public engagement framework to ensure meaningful public engagement is conducted by the Subcabinet's agencies and boards. The purpose of the engagement framework is to:
 - i. Engage with, and seek feedback from, the eleven Tribal Nations within Minnesota.
 - ii. Build partnerships and shared understanding across urban Indian communities, communities of color, local communities, and industries, including but not limited to the health and business sectors.
 - iii. Provide a platform for dialogue about the needs and challenges of those in active addiction or in recovery, and to identify solutions and how those solutions will impact the lives of people in Minnesota, including those who have been underrepresented in policy discussions or are disproportionately impacted by addiction, including opioid addiction.
 - iv. Gather and share ideas for how Minnesotans can get involved with, and stay informed about, addiction issues that matter to them.

- 6. The Governor's Advisory Council on Opioids, Substance Use, and Addiction ("Advisory Council") is established to advise the Subcabinet in its duties.
- 7. The Advisory Council will be comprised of up to 15 members appointed by the Governor. The Governor will seek representation from community leaders, individuals with direct experience with addiction, individuals providing treatment services, and other relevant stakeholders.
- 8. The duties of the Advisory Council are as follows:
 - a. Meet up to four times per year to identify opportunities for, and barriers to, the development and effective implementation of policies and strategies to expand access to services for people in Minnesota suffering from addiction.
 - b. Promote equity by examining what services and supports are needed in communities that are disproportionally impacted by the opioid epidemic, including but not limited to Native American communities, African American communities, and other communities of color.
 - c. Provide opportunities for Minnesotans who have directly experienced addiction to address needs, challenges, and solutions.
- 9. The Department of Human Services, in coordination with other state agencies and boards, will provide staffing and administrative support to the Subcabinet and the Advisory Council.

This Executive Order is effective fifteen days after publication in the State Register and filing with the Secretary of State. It will remain in effect until rescinded by proper authority or until it expires in accordance with Minnesota Statutes 2021, section 4.035, subdivision 3.

A determination that any provision of this Executive Order is invalid will not affect the enforceability of any other provision of this Executive Order. Rather, the invalid provision will be modified to the extent necessary so that it is enforceable.

Signed on April 7, 2022.

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Tim Walz Governor

Filed According to Law:

Steve Simon Secretary of State

Filed on April 7, 2022 Office of the Minnesota Secretary of State, Steve Simon