



Statewide Council on Opioid Abatement 2023 Annual Report

Publication Date: December 1, 2023

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Executive Summary

As required by section 397.335, Florida Statutes, the Statewide Council on Opioid Abatement's (Council) annual report shall contain information on settlement funds, data collection and improvement, and recommendations of priorities in response to the opioid epidemic. The Council is composed of 10 members, including the Attorney General, who serves as chair, and the Secretary of the Department of Children and Families (Department), who serves as vice chair.

In accordance with Florida Statutes, the Council is responsible for the following:

- Advise state and local governments on resolving or abating the opioid epidemic and review how settlement funds have been expending and the outcomes from use of funds.
- Work with the Statewide Drug Policy Advisory Council to ensure alignment of efforts.
- Review local, state, and national data on a regional and statewide basis, to advise on the stage of the opioid epidemic.
- Review data from local governments, other states, and national agencies pertaining to how funds are spent and the effectiveness of programs and metrics.

The Council will receive two annual reports from any agency receiving settlement funds. By June 30th of each year recipients will submit spending plans and data collection plans. By August 31st of each year recipients will submit progress reports to include review of expenditures and results from said expenditures.

Additionally, in collaboration with the Department's Office of Substance Abuse and Mental Health the Council will develop metrics, measures, and datasets to assess the success of programs and efforts.

As required by statute, the Council held two meetings in 2023. The inaugural meeting of the Council was held on September 27, 2023 and the second meeting occurred on November 6, 2023.

Review of Expenditures - Fiscal Year 2022-2023

Structure of the Opioid Settlement Funding for the first three years.

The table below details the initial three years of funding and reflects the different categories of opioid settlement funds.

Funding Category	Previous FY 22-23	Current FY 23-24	Future FY 24-25
City/County Funds	\$21,340,784	\$47,974,685	\$25,160,680
Regional Funds for Qualified Counties	\$135,559,681	\$64,005,081	\$69,012,661
Regional Funds for Non-Qualified Counties	N/A	\$33,897,266	\$16,220,944
State Funds	N/A	\$205,721,243	\$85,053,320

Utilization of the City/County Funds (Fiscal Year 2022-2023) by each county and municipality.

The City/County Funds represent 15 percent of the total settlement amount. Funds are disbursed directly to 247 cities and counties, and do not flow through the Department. Cities and counties determine how funds are expended in accordance with the permissible uses outlined in the Statewide Response Agreement provided by the Office of the Attorney General. The funds are paid out to subdivisions annually in September by the Opioid Administrator.

In December 2022, approximately \$21,342,364 in Year 1 funding from the City/County Funds was distributed to 247 cities and counties. The Department has provided forms to allow for cities and counties to begin reporting expenditures of city/county funds. The first data reported by cities and counties will be included in the next annual report.

Utilization of the Regional Funds (Fiscal Year 2022-2023) by qualified counties.

The Regional Fund is subdivided into two separate streams: one for qualified counties and one for non-qualified counties. Qualified counties are defined as having a population of at least 300,000 individuals, an opioid task force (or similar entity), and an opioid abatement plan. There are 20 qualified counties. Regional Funds for qualified counties are disbursed from the Department of Financial Services annually in September. The Regional Funds for the qualified counties do not flow through the Department or the Managing Entities.

The 20 qualified counties and the allotted amount of Year 1 Regional Funds are shown below. If comparing amounts to the Attorney General Smartsheet schedule of funding report, you will need to take into consideration that Regional Abetment Funding Projections is 100 percent Regional projections (Qualified Counties 80% - Non-Qualified 20%)

County	Funding Amount
Brevard County	\$6,572,895
Broward County	\$15,349,347
Collier County	\$2,628,842
Escambia County	\$2,273,493
Hillsborough County	\$14,761,368
Duval County	\$9,209,943
Lake County	\$1,930,473
Lee County	\$5,635,074
Manatee County	\$4,611,471
Marion County	\$2,882,761
Miami-Dade County	\$8,866,190
Orange County	\$7,915,382
Osceola County	\$1,819,039
Palm Beach County	\$14,575,999
Pasco County	\$7,951,068
Pinellas County	\$13,446,222
Polk County	\$3,644,143
Seminole County	\$3,628,324
St. Lucie County	\$2,553,086
Volusia County	\$5,304,561

In April 2023, the initial distributions of Regional Fund monies to qualified counties were made. It has approved forms to allow qualified counties to begin reporting expenditures of regional funds. The first reporting from qualified counties over expenditures will shortly begin to be made to the Council and reported in the next annual report.

The State and the non-qualified counties did not receive any settlement funding until SFY 2023-2024. This report includes a high-level overview of how the funding was allocated to the non-qualified counties and the Department of Children and Families (State) below.

Utilization of the Regional Funds by non-qualified counties.

There are 47 non-qualified counties that receive funding through the Managing Entities. A Managing Entity is a corporation, created pursuant to section 394.9082, Florida Statutes, under contract with the Department, to plan and manage the daily operational delivery of behavioral health services through a coordinated system of care. There are seven Managing Entities throughout the state.

The General Appropriations Act (GAA) for Fiscal Year 2023-2024 allocated \$33,897,266 to the Department for five Managing Entities to fund services in the 47 non-qualified counties. These funds were amended into five Managing Entity contracts as of September 2023.

Utilization of the State Fund by the Department.

The Legislature appropriates the State Funds to the Department through the GAA. A summary of each of the planned initiatives supported with State Funds follows.

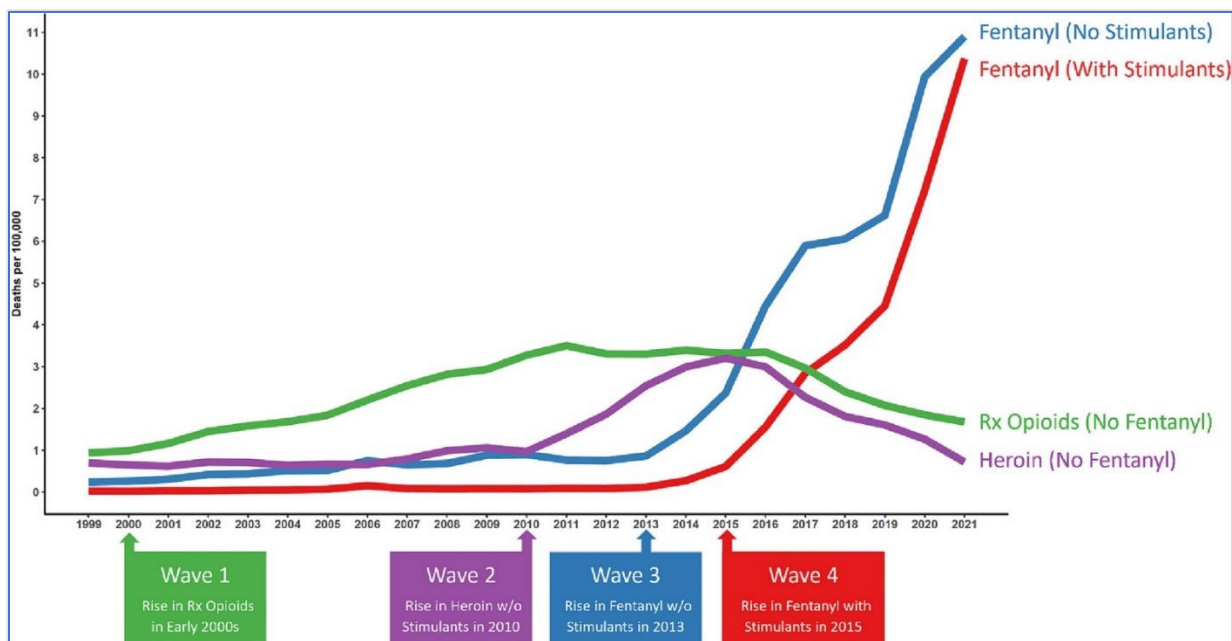
State Funds: Recurring vs. Non-Recurring

Department Initiative from State Fund	FY 2023-2024	Recurring	Non-Recurring
Primary Prevention and Media Campaigns	\$25,400,000	\$0	\$25,400,000
Overdose Prevention Through Naloxone Saturation	\$10,000,000	\$250,000	\$9,750,000
Treatment and Recovery Support Services	\$20,000,000	\$15,000,000	\$5,000,000
Court Diversion	\$4,000,000	\$2,000,000	\$2,000,000
On-Demand, Mobile MAT	\$6,000,000	\$1,500,000	\$4,500,000
Jail-Based MAT	\$2,000,000	\$2,000,000	\$0
Hospital Bridge Programs	\$4,000,000	\$2,000,000	\$2,000,000
CORE	\$26,804,964	\$26,804,964	\$0
Peer Supports and Recovery Community Organizations	\$13,000,000	\$2,000,000	\$11,000,000
Recovery Housing	\$8,720,560	\$8,720,560	\$0
Office of Opioid Recovery	\$4,274,476	\$4,274,476	\$0
Specialized Training in Graduate Medical Education	\$4,000,000	\$4,000,000	\$0
Applied Research	\$2,000,000	\$1,000,000	\$1,000,000
Statewide Integrated Data System	\$5,000,000	\$5,000,000	\$0
Online Bed Availability System	\$4,400,000	\$1,000,000	\$3,400,000
Local Projects	\$13,868,891	\$0	\$13,868,891

Data

According to the *2021 Drugs Identified in Deceased Persons by Florida Medical Examiners Annual Report* (published in December of 2022), there were 6,442 opioid-caused deaths in 2021. The drugs that caused the most deaths in Florida in 2021 were fentanyl (5,791 fatalities), followed by cocaine (2,677 fatalities), and methamphetamine (2,101 fatalities). Notably, 5,481 out of the 5,791 deaths caused by fentanyl (approximately 95 percent) involved fentanyl in combination with other drugs. Similarly, 1,146 out of the 1,152 deaths caused by fentanyl analogs (approximately 99 percent) involved fentanyl analogs in combination with other drugs. This polydrug pattern applies to deaths caused by stimulants as well. In 2014, the most common co-involved drugs were prescription opioids, but from 2015 through 2021, cocaine was the drug most commonly co-involved in fentanyl deaths. The increase in deaths due to fentanyl in combination with stimulants indicates that Florida is now in the fourth wave of overdose mortality.

Four Waves of Overdose Mortality in the United States (1999-2021)¹



The spread of illicitly manufactured synthetic opioids, such as fentanyl and fentanyl analogs has amplified the harms of using illegal drugs. According to the Florida Department of Law Enforcement, the prevalence of counterfeit pills/tablets increased from approximately five percent in 2018 up to approximately 44 percent in 2021, many of which are adulterated with synthetic opioids.

The costly contours of the opioid epidemic are discernable through data from Emergency Medical Services (EMS), emergency departments, jails, and drug treatment programs. EMS responses to suspected opioid-involved overdoses increased from 14,884 in 2019 to 40,544 in 2022. Visits to emergency departments for opioid-involved non-fatal overdoses increased from 16,802 in 2019 to 19,782 in 2022.²

¹ Friedman, J. & Shover, C. L. (2023). Charting the Fourth Wave: Geographic, Temporal, Race/Ethnicity and Demographic Trends in Polysubstance Fentanyl Overdose Deaths in the United States, 2010-2021. *Addiction*. <https://doi.org/10.1111/add.16318>.

² Florida Department of Health. (2023). *FLHealthCHARTS: Substance Use Dashboard*.

Baseline and tracking progress through the State Opioid Dashboard.

In 2023, the Department launched the State Opioid Dashboard – Florida Statistics featuring state and county-level statistics related to the opioid epidemic. The dashboard is intended for use by policymakers to inform the selection of strategies to combat opioid misuse and overdoses, as well as for public viewing. Dashboard users are able to select a specific county or a specific year (currently ranging from 2018 to 2021). Examples of variables include, but are not limited to, drug arrests, hospitalizations, EMS transports, emergency department visits, neonatal abstinence syndrome, opioid prescriptions dispensed, overdose deaths, housing instability, health insurance, employment, and education.

A Vulnerability Index Score is computed for each county based on two factors: (1) the rate of opioid-caused deaths, and (2) the opioid overdose healthcare response rate. The opioid overdose healthcare response rate is comprised of naloxone administration by EMS, EMS opioid overdose transports, opioid overdose emergency department visits, and opioid overdose hospitalizations. The two factors are weighted equally and combined into a composite score that is normalized from zero to 100, with 100 representing the highest assessed vulnerability.

Data was collected from various sources and is continually updated as additional datasets become available. In total, 118 factors were aggregated from existing sources, by county and by year. Fiscal Year 2021-2022 is designated as the baseline year against which progress will be measured. This year precedes the first year that Opioid Settlement Funds were allocated directly to cities and counties in Fiscal Year 2022-2023.

Transparency and Accountability

The Office of the Attorney General and Department are committed to transparency and accountability. The recently launched Florida Opioid Settlement website provides insight regarding Opioid Settlement Funds, the Council, and can be accessed to connect with relevant resources: <https://floridaopioidsettlement.com/>. The Office of the Attorney General provides information about the settlement funds through the Florida Opioid Settlements Portal which can be accessed at <https://www.myfloridalegal.com/opioid-settlement>.

On December 1, 2023, the Department launched the Florida Opioid Implementation and Financial Reporting System (OIFRS), which cities, counties, and providers will use for reporting plans, services, and expenditures.

More specifically, the OIFRS addresses the following elements:

- The OIFRS will serve as a platform for counties and municipalities to submit annual progress reports, plans, and quarterly financial expenditures. Counties and municipalities are required to use the system to outline strategies for combatting the opioid epidemic, including the Statewide Response Agreement-approved remediation uses. Counties and municipalities will report financial expenditures related to plans, ensuring an organized way to track funding allocations and each corresponding implementation strategy.
- The Department developed an Annual Financial Report template within the OIFRS for recipients of settlement funding. The template is designed to collect the balance at the beginning of the Fiscal Year, funds received in the Fiscal Year, balance at the end of the Fiscal Year, total revenues, budgeted amount, and amount expended (with core strategy, approved use, and description of use). Core strategies and approved uses are detailed

within the [Florida Opioid Allocation and Statewide Response Agreement](#), which are posted on the Attorney General's Florida Opioid Settlements Portal.

- The OIFRS will offer a secure platform for healthcare providers to review data uploaded into the system, for data validation capability on data submitted, and is crucial for ensuring data accuracy. Providers will be able to review and validate submissions and identify any submissions that may need to be rectified, which supports the quality and reliability of the data within the system.

Recommendations

There are no formal recommendations presented by the Council at this time.

Collaboration with the Statewide Drug Policy Advisory Council (DPAC)

Per section 397.333(b)(3), Florida Statutes, the DPAC meets quarterly and shall develop an annual report which includes an analysis of the problem of substance abuse in the state and recommendations for improvement.

The DPAC annual report will be published on December 1, 2023, and will be disseminated to Council Members.