La Crosse County Opioid Settlement Advisory Team

Utilization of Opioid Settlement Funding:



Creating a legacy of impact

Presentation to the La Crosse County Board of Supervisors

September 8th, 2025





OPIOID SETTLEMENT ADVISORY TEAM

(Work Completed: Mar – Aug 2025)

INDIVIDUAL	ROLE
Audra Martine	Health Department Director
John Siegel	Sheriff
Anneliese Skoda	Integrated Support & Recover Services Acting Manager
Jason Witt	Human Services Director



Interests Expressed by

La Crosse County Board of Supervisors

October 4, 2024

Justice System

Families / Prevention

Harm Reduction

Homelessness / Housing

Breaking the
generational crisis

Homelessness &

treatment access

Service connections & warm handoffs

Family early intervention

Jail re-entry Residential Starting treatment services treatment options in the jail for pregnant for pregnant

women

WOITE

NARCAN &

Fentanyl test strips



(mentors, jail ministries)

Jail Services

Level-Set Presentation Purpose



Summarize the Planned Uses of Opioid Settlement

- Approval for \$63,800 spending will be requested later this month via resolution
- \$626,100 in spending (approx.) will be included as part of the Administrator's 2026 Budget Request
- Remaining funding will be appropriated annually for ongoing items (contingent on showing desired outcomes), projects in development and to meet emerging needs (flexibility)

Initiate a 10-year multifaceted plan for opioid abatement

- Will include activities requiring no use of opioid settlement dollars
- Will include project management, timelines, milestones and regular updates





Uses of Opioid Settlement Dollars

Presentation Outline

- Background
- II. Planning Framework
- III. Key Observations
- IV. Planned Use of Funding
- V. Summary & Next Steps



I. BACKGROUND



- A. Available Funds:
- \$7.6 million settlement funds + \$63,800 matching grant

- B. Allowable Uses:
- Approved purposes aimed at addressing the opioid crisis* (funds are intended for opioid epidemic abatement.)

New activities or **expansion** of current efforts (not supplant)

- Wisconsin Act 57
- Settlement Agreement Guidance



^{*}Funds may be used with regards to **methamphetamine** use, since polysubstance use is common among individuals with OUD.



C. Examples of Uses per Settlement Guidance:

Address gaps in services

Expand access to treatment

Fund innovative or evidence-based programs

Special Mentions:

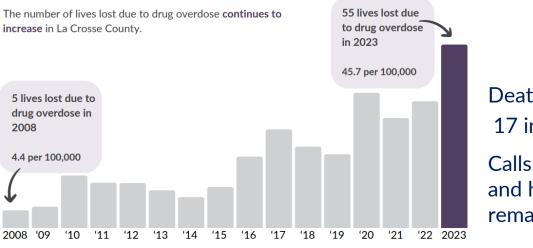
- Criminal-Justice Involved Persons
- Pregnant or Parenting Women
 & Their Families

• Planning & Coordination (i.e., staffing to support cross-system coordination)

D. The Opioid Crisis in Our Community



Overdose Deaths



Deaths dropped to 17 in 2024

Calls, overdoses and hospitalizations remain high

Impact on County Services

- Justice
- Child Protection
- Behavioral Health
- Homeless Response

Higher service demand Higher expenditures





E. Data Points

Justice



Approximately 63% of individuals in county jails have a SUD*, with an estimated 14.5% specifically screening positive for OUD^

Approximate annual cost of housing someone in jail is approximately \$47,000

Child Protective Services

CPS



Approximately 30%-50% of child welfare cases involve parental substance use, with opioids and meth being major drivers.

Annual cost of a single youth residential caring center placement can be as high as \$225,000

HOUSING

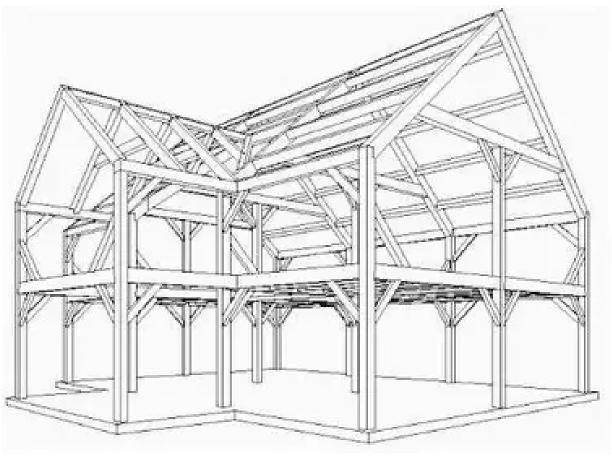


Approximately 20% of La Crosse's unsheltered population has an opioid use issue.

Community cost of a single unsheltered individual is \$36,000

II. Planning Framework

A. Scope



B. Elements





1. Project Scope

County Service Lens

Developing <u>recommendations</u> for the use of La Crosse County's opioid settlement funds that <u>mitigate harms</u> of the opioid crisis in ways that can directly and significantly <u>reduce the demand for and cost of La Crosse County Emergency Services</u> (particularly Justice Services & Child Protective Services)

More Favorable

- Has a clear and positive mitigation impact on future county resource needs
- New or expanded services that addresses a defined gap or need

Less Favorable

- Supplement or sustain existing services
- Generally "good things" where mitigation impact less direct



Why a County Service Lens?

- Consistency with intent of authorizing resolution
- Keeps efforts focused for maximum impact
- Smart fiscal strategy



RESOLUTION # 63-2/18

BOARD ACTION

Adopted:
For:
Against:
Abstain:
Abs/Excd:
Vote Req:

Adopted:
For:
Against:
Abstain:
Abs/Excd:
Abs/Exc

EXECUTIVE

TO: HONORABLE MEMBERS OF THE LA CROSSE COUNTY BOARD OF SUPERVISORS

RE: OPIOID LITIGATION

"millions in unexpected time and resources"

Other Action:

1TEM # 2 - 18

whereas, La Crosse County has spent millions in unexpected and unbudgeted time and resources in its programs and services related to the Opioid Epidemic; and

WHEREAS, La Crosse County is responsible for a multitude of programs and services all of which require County to expend resources generated through state and federal aid, property tax levy, fees and other permissible revenue sources; and

WHEREAS, County's provision of programs and services becomes more and more difficult every year because the costs associated with providing the Opioid Epidemic programs and services continue to rise, yet County's ability to generate revenue is limited by strict levy limit caps and stagnant or declining state and federal aid to County; and

WHEREAS, all sums that the County expends in addressing, combatting and otherwise dealing with the Opioid Epidemic are sums that cannot be used for other critical programs and services that the County provides to County citizens, residents and visitors; and





2. Additional Aims (Advisory Team)

Sustainable: Anything started can be maintained for 10 years

Keep average costs under approximately \$760,000 per year

Measurable: Impact on desired outcomes can be measured

Intent is to have an annual report detailing activities, expenditures, and outcomes

• Objective: Follow the best way to achieve outcomes, not necessarily the most popular programs or providers

Flexible:

Room for re-allocation in future years based on performance, evolving needs, and new opportunities

LA CROSSE COUNTY

B. Process

3. Planning Elements

a. Board Input:

Attend and review input from Oct 4, 2024, Board discussion.

b. System Review:

Reviewing available services and capacity.

c. Researching:

Researching out opioid settlement funds are being used across Wisconsin and the nation. Also, researching best and promising new practices.

d. Stakeholder Check-In:

Check-in with Alliance to Heal participants. Incorporate information from CJMC discussions.

e. Staff
Expertise:

Draw in staff expertise across the Health, Human Services and Sheriff departments.



III. Key Observations (from planning process)







Key Observations

- 1. There's no magic bullet:
- 2. La Crosse is unusually service rich system, with much to build on:

There is no one high-impact program that stands out among other settlement planning efforts.

La Crosse County already has services and initiatives that other jurisdictions are using settlement funds to start. We have the advantage of many things to build on.





Examples of "Service Rich" Capacity

A. In recent years, La Crosse County has:

- Added over 30 positions to enhance behavioral health services
- Expanded behavioral health service hours to the jail
- Started innovative programs, such as crisis co-response
- Launched major initiatives to increase access to housing Such as Thriving Families, Family Keys and Pathways Home
- Facilitated community stakeholders to reduce prescription opioid overuse and ensure key harm reduction resources are available ("Alliance to Heal")

 Including NARCAN and fentanyl test strips
- Received enhanced funding aimed at serving those with OUD

 Federal State Opioid Response (SOR) grant \$359,000, State Opioid Settlement Dollars (to cover Room & Board for residential treatment)





B. "Service Richness" has resulted in zero denials in recent years for OUD individuals eligible* for County service such as:

- Detoxification (multiple referrals to out-of-county Medicaid providers)
- Residential Treatment (funded **74 stays** in 2024)
- Recovery Housing (funded 45 stays Oct 2024 Aug 2025)
- Outpatient Treatment (multiple referrals to in-county Medicaid providers)



^{*}Services tend to be available locally or elsewhere within Wisconsin with low to moderate waiting times



Key Observations

- 1. There's no magic bullet:
- 2. La Crosse is unusually service rich system, with much to build on:
- 3. We still have some surprising gaps:

There is no one high-impact program that stands out among other settlement planning efforts

La Crosse County already has services and initiatives that other jurisdictions are using settlement funds to start. We have the advantage of many thing to build on.

Despite being service rich, our system continues to have some key gaps.



Service Gaps & Issues

Justice



- Routine substance use assessments in the jail
- Ability to start Medication Assisted Treatment (MAT) in the jail
- Supported service plans & connections upon discharge



Sommunity Treatment



- Access to early intervention services for the most "at-risk families"
- Family-centered treatment options (especially residential treatment and sober living)
- CPS integrated treatment



- Coordination of capacity and service connections
- Knowledge of services and supports across providers
- Data sharing regarding desired outcomes, timely access and service utilization







Key Observations

- 1. There's no magic bullet:
- 2. La Crosse is unusually service rich system, with much to build on:
- 3. We still have some surprising gaps:
- 4. Coordination of local services could be better:

There is no one high-impact program that stands out among other settlement planning efforts

La Crosse County already has services and initiatives that other jurisdictions are using settlement funds to start. We have the advantage of many thing to build on.

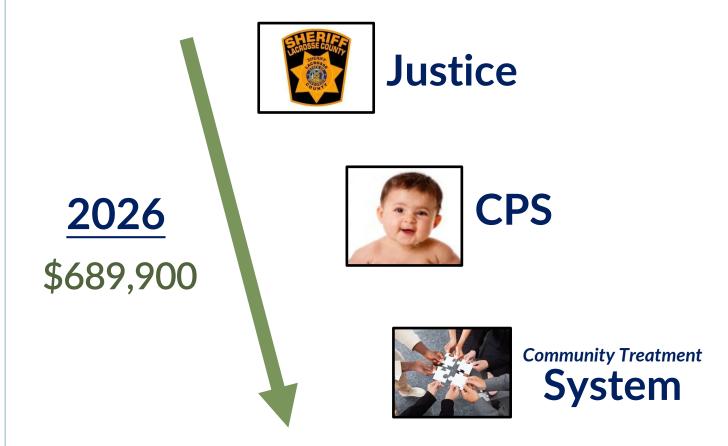
Despite being service rich, our system continues to have some key gaps.

Significant gains in system effectiveness could be attained through better coordination.

IV. Planned Use of Funding



Driving outcome across...







Justice System:

DESIRED OUTCOMES:

Fewer jail admissions & lowering the recidivism rate for individuals with OUD

A. Jail Services (wrapping around services and supports):

1. Substance Abuse

Assessments:

Make substance use assessments regularly available

Treatment:

2. Medication Assisted Add capability for MAT to start in the jail

3. Re-entry

Support:

Make re-entry plans and supports regularly available for inmates with OUD

Funding Use - 2026

\$314,600*

*includes \$63,776 matching grant



B. Treatment Courts & Deflection

(operating with fidelity to best practices):

1. Best Practice Fidelity:

Review and refresh treatment court operations to ensure alignment with best practices and effective application of negative reinforcements [no use of funds].

2. Contingency Management:

Add an evidence-based approach that provides a new tool for positive reinforcement.

Funding Use - 2026

\$6,000



Child Welfare:

DESIRED OUTCOMES:

Fewer CPS admissions & Out-of-Home Care placements

A. Prevention:

HomeVisiting:

Make available Healthy Families
America (HFA) home visiting services to
both at-risk and CPS-involved families

Funding Use - 2026

\$100,000



Child Welfare

B. Treatment:

Family-Centered Treatment & Recovery Support:

Expand family-centered treatment options for at-risk and CPS-involved families by expanding access to parent-child residential treatment and recovery housing options & support through the following strategies:

- a. Network expansion [no funding used]
- b. Transportation support
- c. Add Family Treatment Specialization within La Crosse County Outpatient Clinic*

 Integrated with CPS

Funding Use - 2026

\$5,000



Child Welfare

C. Housing:

Sober Living:

Join partnership to add 4 local sober living beds for pregnant and new moms.

Housing Supports: Rent assistance and flexible supports[^] for CPS-involved families to prevent family separation and to promote reunification. Includes support for "Thriving Families" housing.

Funding Use - 2026

\$100,000



Treatment System:

DESIRED OUTCOME:

Timely access to treatment and support needed. Maximization of system services and supports.

A. Coordination & Implementation:

1. A Renewed Community Alliance:

Support the evolution of the "Alliance to Heal" to a collaborative that promotes coordinated access, data sharing and outcome tracking across our communities AODA treatment network.

2. Project Management:

Ensure timely and effective implementation of opioid settlement plan initiative.

Funding Use - 2026

\$48,000



B. Harm Reduction:

In the context of a community collaboration, work to maintain the availability of important harm reduction resources, such as NARCAN and fentanyl test strips.

C. Artificial Intelligence (AI):

Explore integration of Al-driven treatment tools and interventions into county AODA services for OUD and STUD. An example would be reSET-O, developed by Pear Therapeutics, an FDA-approved digital therapeutic for OUD that combines Al-driven conversational elements with cognitive behavioral therapy (CBT) and contingency mgt.

Funding Use - 2026

\$10,000

V. Summary & Next Steps





Abatement Strategies & Desired Outcomes

Driving

STRATEGIES

1. Improving System Coordination

2. Enhancing Treatment & Supports



5. Service Preservation & Flexibility

3. Increasing Housing Access

4. New Evidence Based Practices

OUTCOMES

Fewer jail admissions & lowering the recidivism rate for individuals with OUD

Fewer CPS admissions & Out-of-Home Care placements

Timely access to treatment and support needed. Maximization of system services and supports.

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2026 Budget Summary

A. Justice

1. Juli Sci vices	\$314,000		
2. Treatment Courts & Deflection	\$	6,000	
3. Housing	\$	80,000	

¢211 600

B. Child Welfare

Iail Services

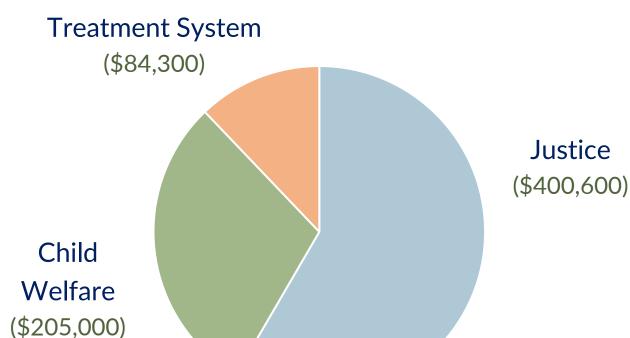
1. Prevention – Home Visiting	\$100,000
2. Treatment	\$ 5,000
3. Housing	\$100,000

C. Treatment System

1. System Coordination	\$ 48,300
2. Harm Reduction	\$ 6,000
3. Artificial Intelligence	\$ 10,000
4. Housing	\$ 20,000

Year#1 Allocation

\$689,900*







Next Steps



1. Approval of funding as part of September resolution and 2026 Administrator's Budget Request

2. Project Set Up

- Onboard project mgrs (i.e., timelines, responsibilities)
- Develop implementation plan (i.e., timelines, responsibilities)
- Release published plan
- 3. Create annual reporting structure





Introducing Our Project Managers



Laura Runchey
Health Educator
La Crosse County
Health Department



Jenna Sickels
Outpatient Clinic Supervisor
La Crosse County
Human Services Department





Thank You!

Follow our efforts at:

La Crosse County newsletter:



