



SENATE BILL 105: 2021 Appropriations Act, Sec. 9F.1: Use of Opioid Settlement Funds

2021-2022 General Assembly

Committee:		Date:	February 25, 2022
Introduced by:		Prepared by:	Jessica Boney Staff Attorney
Analysis of:	Sec. 9F.1 of S.L. 2021-180		

OVERVIEW: *Section 9F.1(a) of S.L. 2021-180 establishes the Opioid Abatement Reserve (Reserve) in the General Fund to maintain funds received by the State as a beneficiary of the final consent judgment resolving the case, State of North Carolina, ex rel. Joshua H. Stein, Plaintiff v. McKinsey and Company, Inc., and any other funds received by the State resulting from a settlement related to claims regarding opioids. Section 9F.1(a) of S.L. 2021-180 directs funds in the Reserve must (i) cover the costs incurred by the State in investigating and pursuing these claims and (ii) abate and remediate the harms caused to North Carolina and its citizens by the opioid epidemic. This section also establishes the Opioid Abatement Fund (Fund) within the Department of Health and Human Services consisting of all interest and investment earnings received on monies in the Fund. It directs the transfer of \$15,735,496 for the 2021-2022 fiscal year and \$812,250 for the 2022-2023 fiscal year from the Reserve to the Fund.*

Section 9F.1(b) of S.L. 2021-180 directs how the funds in Section 9F.1(a) must be used to respond the negative impacts of the opioid epidemic within the State as follows:

- To expand employment and transportation supports through innovative pilot programs in industries in the State that suffered the greatest job losses during the COVID-19 pandemic and are most relied upon by individuals recovering from opioid use disorders to reenter the workforce, such as the food service industry, the hotel and lodging industry, and the entertainment industry.*
- To support individuals with opioid use disorder who are involved in the criminal justice system through programs and initiatives designed to establish or expand the following: existing prearrest and postarrest diversion programs, medication-assisted treatment programs, and reentry programs to connect individuals exiting incarceration with harm reduction, treatment, and recovery supports.*
- To expand evidence-based treatment supports and to improve connections to care, especially for individuals hospitalized for overdose who are uninsured or underinsured, through evidence-based addiction treatment, expanded access to cost-effective, low-cost, or no-cost medication-assisted treatment in community-based settings, and expanded care management services.*
- To develop evidence-based supportive housing services, such as Housing First, that are inclusive of individuals with substance use disorders. Funding may be provided for the following: (i) a move-in deposit, rental, or utility assistance; (ii) community training sessions on tenancy rights and responsibilities; (iii) establishing relationships with landlords; (iv) providing other housing-related supports such as tents, sleeping bags, or other supplies for outdoor living; and (v) funding or otherwise supporting recovery supported housing that accepts individuals who are utilizing any medication approved for the treatment of opioid use disorder.*

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This section became effective July 1, 2021.