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CITY OF ALBUQUERQUE JOINT OPIOID SETTLEMENT IMPLEMENTATION PLAN

SECTION 1. PURPOSE

A. This document provides high-level policy guidance as recommended by the Local Government Coordinating Commission to develop a phased and focused expenditure plan for approximately \$150 million in Opioid Settlement Funds. It reflects input from community town halls and experiential data, emphasizing strategic allocation to maximize impact.

B. The City recognizes that the Opioid Settlement Funds available now and into future years are the direct result of harm perpetrated on our community by drug manufacturers, distributors, retailers, and other parties.

C. The needs outlined in the Vital Strategies work greatly surpass the funding available through current and anticipated settlement allocations. The City Council approves targeted funding to eight (8) categories within the broad list of recommendations.

SECTION 2. COMMUNITY ADVICE AND GOVERNANCE

A. The Bernalillo County Behavioral Health Oversight and Advisory Board ("Board"), which includes City, County, and APS representation, along with many other relevant community members and subject matter experts shall provide ongoing oversight and advice to the City. The Board shall provide the City with a minimum of quarterly updates on Opioid Settlement projects and allocations beginning in April 2025. The Board should vet and advise the City on initiatives related to Opioid Settlement Funds. The City is grateful for the partnership with Vital Strategies which has agreed to provide, free of charge, a staff member to assist with the Implementation Plan until September 2026.

SECTION 3. COMMUNITY OUTREACH

A. The following opportunities for ongoing public forums and community feedback shall be maintained for Opioid Settlement Funds, including but not limited to:

1. Behavioral Health Oversight and Advisory Board
2. Local Government Coordinating Commission
3. Albuquerque City Council
4. Bernalillo County Board of Commissioners
5. Albuquerque Public Schools Board of Education

SECTION 4. TRIBAL SOVEREIGNTY

The City, County, and APS shall review current practices and as needed design and implement practices into Opioid Settlement Funding processes that actively solicit feedback from and engage tribal communities and urban tribal organizations within Albuquerque.

SECTION 5. INFORMATION AVAILABILITY AND DASHBOARD

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A. The City, County, and APS, shall collaboratively fund, design, and implement a joint public-facing dashboard to report (at a minimum): total Opioid Settlement Funds anticipated and appropriating body, total Opioid Settlement Funds received, total Opioid Settlement Funds expended, detail of all Opioid Settlement Funds expended, and metrics related to oversight, accountability, and efficacy of all expenditures. This dashboard should be featured prominently on each entity's web portal for easy public access.

SECTION 6. CAPACITY AND SUSTAINABILITY

A. Opioid Settlement Funding expenditures shall include provisions to build capacity locally and require funding sustainability beyond limited one-time opioid settlement funding. The City and County shall reserve \$2 million in funding from each entity (total of \$4 million) for the purpose of growing, training, and sustaining existing small and medium size providers. The City and County shall implement a single process to solicit, vet, and rank proposals. Funding may be distributed individually by the City and County following the combined vetting and ranking process over 3 years or in a lump sum to fund proposals in the ranked order until funds are exhausted. Awards from the provider sustainability fund are intended to be one-time non-recurring awards to build provider sustainability and innovation.

SECTION 7. PROVIDER INFRASTRUCTURE GRANT PROGRAM

A. The City and County shall allocate \$10 million each for a one-time Provider Infrastructure Grant Program. This program will use a competitive grant process to support shovel-ready capital requests from nonprofit providers. The City and County can fund projects directly without combining their funds for these grants; either entity can individually finance a project. However, the award process shall be administered jointly to ensure consistency and avoid duplication of funding or efforts.

B. Capital Focus: The program is designed for primarily non-recurring capital projects, with up to 15% of the funds allowable for associated operating expenses.

C. Timeframe: Proposed projects may span up to five years, with any unused funds reverting after this period.

D. Funding Cap: Each project is capped at \$7.5 million in funding.

E. Selection Process: The City Administration, City Council, and County staff will jointly manage the Grant Program and its selection process. A scoring system will be developed by the appropriate City and County staff to prioritize proposals. Projects will be scored and funded in order, based on their ranking, until the available funds are exhausted.

F. Bonus points may be awarded to projects proposed by providers with established relationships with the City or County, to help expedite the funding process and ensure swift distribution of funds to the community.

G. This funding is exempt from reoccurring funding limitations outlined in Section 11.

SECTION 8. APS FUNDING

A. Both the County of Bernalillo and the City of Albuquerque shall contribute \$1.8 million each in the first year and \$1.5 million each for the second and third

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years to Albuquerque Public Schools' Crossroads and other related prevention/intervention programs. This funding is exempt from reoccurring funding limitations outlined in Section 11.

SECTION 9. EXPENDITURE PLANNING APPROACHES

A. The following expenditure planning approaches shall be followed:

1. Equity-Driven Allocation: Prioritize funding for historically excluded communities and those most affected by the opioid crisis. This includes opportunities for historically excluded communities to present proposals for consideration that align with the targeted populations identified in the settlement agreement.

2. Data-Informed Decision-Making: Utilize tools to ensure evidence-based funding distribution.

3. Community Engagement: Maintain an ongoing feedback loop with stakeholders to include individuals with lived experience and end users through forums and surveys.

4. Sustainability: Invest in initiatives that promote long-term community resilience and systemic change that includes a plan to sustain the program outside of Opioid Settlement Fund dollars.

5. Flexibility: Allow for adaptive strategies to address emerging needs and refine priorities based on program outcomes.

SECTION 10. POLICY PRIORITIES AND ALLOCATION FRAMEWORK

A. The Opioid Settlement Funds shall be allocated to two primary focus areas, ensuring alignment with community needs and evidence-based strategies and enabling coordinated expenditures and investments in the community.

SECTION 11. RECURRING FUNDING LIMITATION

A. Funding committed to any recurring purpose such as programming, rent, salaries, or services that require ongoing funding to affect an outcome shall be limited to an aggregate amount per year not exceeding the following for each entity:

Bernalillo County: \$1,925,762

City of Albuquerque: \$2,353,710

The amounts recommended are the average of the projected settlement distribution for each entity over the next 5 years from 2025-2029.

SECTION 12. FUNDING CATEGORIES AND PERCENTAGES

A. The following funding categories and percentages shall be adhered to for all funding allocations:

1. PREVENTION AND COMMUNITY REVITALIZATION: 40%

a. **Focus:** Adults, youth and family-centered initiatives aimed at reducing risk factors and enhancing protective factors. The intent for this category is to invest in our communities which have been impacted greatly by the opioid epidemic and to provide opportunities for young adults to find healthy, positive activities to pursue.

b. **Vital Strategies Prevention Recommendation 17: Connecting Disconnected Youth**

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1. Expansion of School-Based Violence Intervention Programs
2. Mentorship, re-engagement and job training
3. Secondary, prevention programs and capital to support youth and addicted parents

c. Vital Strategies Prevention Recommendation 16: Comprehensive Education

1. Restorative Justice Programming and Training
2. Prevention Curricula, Training, and Programming at Community Centers
3. Out-of-School Time Programming for Youth
4. Prevent opioid misuse, addiction, and overdoses related to surgery and other healthcare procedures with nurse navigation.

2. INTERVENTION AND TREATMENT: 60%

a. Focus: Support for communities and demographics with the highest overdose rates, including harm reduction, treatment, and recovery services.

b. Vital Strategies Recommendation 27: Peer Support Expansion

1. BernCo Peer Empowerment Center
2. Expand peer support and case management programs through HHH and ACS
3. Capital projects to expand peer support programs i.e., on-site housing for peer support workers upon graduating a treatment program

c. Vital Strategies Recommendation 25: Recovery Housing

1. Construct additional recovery housing i.e., pallet homes, motel conversions, tiny homes, etc.
2. Eviction Prevention, Intervention, and Recovery Programming
3. Capital projects to support permanent supportive housing for OUD recovery
4. Support programs that support non-pharmaceutical pain management
5. Expand recovery housing options for intensive outpatient programs and provide housing for people with opioid use disorder and any co-occurring substance use disorder and mental health conditions.

d. Vital Strategies Recommendation 23: Community-Based Treatment Access and Quality

1. Care Coordination and Provider Capacity Expansions
2. Expand Medical Assisted Treatment Access
3. Capital projects to expand inpatient and outpatient treatment capacity
4. Expand training for fire and rescue personnel for Medication for Opioid Use Disorder (MOUD)
5. Community-oriented recovery program

e. Vital Strategies Recommendation 15: Leveraging the Sobering Center

1. Support crisis stabilization and associated wrap around services

f. Vital Strategies Recommendation 19: Naloxone Access Expansion

1. Expanded street medicine program

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2. Enhanced training for employees: community center staff, parks maintenance, solid waste, and all public safety professionals etc.
3. Equip first responder vehicles with Naloxone and maintain backstock of Naloxone

g. Vital Strategies Recommendation 13: Expand Mobile Crisis Response Services

1. Implement one Mobile Response and Stabilization Service (MRSS)
2. Expand to a total of 4.3 MRSS Teams for 24/7/365 coverage

SECTION 13. RESTRICTED USES

A. In addition to all restrictions contained in the New Mexico Opioid Allocation Agreement, the following uses shall be removed from eligibility for Opioid Settlement Funding.

1. Law enforcement vehicles and equipment
2. Law enforcement salaries and contractual services
3. Supplanting or replacement of funding already budgeted, encumbered, or under contract
4. Safe use sites
5. Naloxone Vending Machines

SECTION 14. PHASED IMPLEMENTATION APPROACH

A. The funding strategy shall be implemented via a phased approach:

1. Phase 1: Immediate Action (0-6 months)

Allocate initial Opioid Settlement Funds to address urgent community needs identified through town halls with the eight (8) prioritized strategies. Begin shovel-ready bricks-and-mortar projects.

2. Phase 2: Intermediate Development (6-18 months)

Expand mid-term programming, such as school-based mental health services and harm reduction initiatives. Begin advance planning for larger infrastructure projects.

3. Phase 3: Long-term Sustainability (18-36 months)

Launch long-term projects, including new treatment centers and community hubs. Establish evaluation metrics to ensure ongoing accountability and effectiveness.

SECTION 15. REVISIONS AND REALLOCATIONS

A. Allocations in this Implementation Plan shall apply through all years of Opioid Settlement Funding availability.

B. Major revisions to the Implementation Plan shall not be contemplated until after year 3.

SECTION 16. COMPLIANCE REPORTING AND ACCOUNTABILITY (pg. 3 2022.03.08 - NEW MEXICO OPIOID ALLOCATION AGREEMENT).

1. Every Participating Local Government shall create a separate fund or project on its financial books and records that is designated for the receipt and expenditure of each entity's portion of the LG Share of the Opioid Settlement

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Funds, called the “LG Abatement Fund.” Funds in an LG Abatement Fund shall not be commingled with any other money or funds of the Local Government. A Local Government may invest LG Abatement Fund funds consistent with the investment of other funds of a Local Government.

2. Funds in a LG Abatement Fund may be expended by a Local Government only for Opioid Related Expenditures. For avoidance of doubt, funds in a LG Abatement Fund may not be expended for costs, disbursements, or payments made or incurred prior to the Settlement.

3. As part of the State or a Participating Local Government’s annual audit pursuant to the State Audit Act, NMSA 1978, Chapter 12, Article 6, both the State fund and each LG Abatement Fund shall be audited to provide reasonable assurances that the LG Abatement Fund disbursements are consistent with the terms of this NMOAA. If any such audit reveals an expenditure inconsistent with the terms of this NMOAA, the State or the Local Government shall immediately redirect an amount equal to the funds associated with the inconsistent expenditure from another revenue source that may permissibly be expended for such purposes to an Opioid Related Expenditure. Either the State or the Participating Local Government who has been found to have expended funds inconsistently with this NMOAA will be ineligible to receive further distributions of the LG Share unless and until such a redirection is accomplished and confirmed by the State Auditor. The Settlement Administrator shall be instructed to hold either the State or that Local Government’s future portion of the LG Share in escrow until instructed to release those funds by the State Auditor. 8

4. Local Governments may combine their respective portion of the LG Share with other Local Governments or the State.