

RESOLUTION TITLE: A RESOLUTION BY THE COUNTY OF GASTON TO DIRECT THE EXPENDITURE OF OPIOID SETTLEMENT FUNDS

- WHEREAS, Gaston County has joined national settlement agreements with companies engaged in the manufacturing, distribution, and dispensing of opioids, including settlements with drug distributors Cardinal, McKesson, and AmerisourceBergen, and the drug maker Johnson & Johnson and its subsidiary Janssen Pharmaceuticals; and,
- WHEREAS, the allocation, use, and reporting of funds stemming from these national settlement agreements and certain bankruptcy resolutions ("Opioid Settlement Funds") are governed by the Memorandum of Agreement Between the State of North Carolina and Local Governments on Proceeds Relating to the Settlement of Opioid Litigation ("MOA"); and,
- WHEREAS, Gaston County has received Opioid Settlement Funds pursuant to these national settlement agreements and deposited the Opioid Settlement Funds in a separate special revenue fund as required by section D of the MOA; and,
- WHEREAS, section E.6 of the MOA states:
 - E.6. Process for drawing from special revenue funds.
 - a. <u>Budget item or Resolution required.</u> Opioid Settlement Funds can be used for a purpose when the Governing Body includes in its budget or passes a separate resolution authorizing the expenditure of a stated amount of Opioid Settlement Funds for that purpose or those purposes during a specified period of time.
 - b. <u>Budget item or Resolution details.</u> The budget or resolution should (i) indicate that it is an authorization for expenditure of opioid settlement funds; (ii) state the specific strategy or strategies the county or municipality intends to fund pursuant to Option A or Option B, using the item letter and/or number in Exhibit A or Exhibit B to identify each funded strategy, and (iii) state the amount dedicated to each strategy for a stated period of time.
- NOW, THEREFORE, BE IT RESOLVED in alignment with the NC MOA, <u>Gaston County</u> authorizes the expenditure of Opioid Settlement Funds as follows:
 - 1. First strategy authorized:
 - a. Name of strategy: Evidence Based Addiction Treatment
 - b. Strategy is included in Exhibit A of the NC MOA

DO NOT TYPE BELOW THIS LINE

I, Donna S. Buff, Clerk to the County Commission, do hereby certify that the above is a true and correct copy taken by the Board of Commissioners as follows:									
NO.	DATE	M1	M2	JBailey	CBrown	CCloninger	AFraley	BHovis TKeigher SShehan	Vote
2025-154	05/27/2025	TK	JB	А	А	А	Α	A A A	U

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- c. Item letter and/ or number in Exhibit A or Exhibit B to the NC MOA: <u>Exhibit A</u>, Strategy 2
- d. Amount authorized for this strategy: \$614,829.12
- e. Period of time during which expenditure may take place: Start date <u>July 1, 2025</u>, through End date <u>June 30, 2027</u>.
- f. Description of the program, project, or activity: <u>Expanded MAT for uninsured</u> and underinsured Gatson County residents.

Funds will enable Kintegra Health to continue services through funded staff members and cover costs of medications and required labs to support the growth of their existing Medication Assisted Treatment (MAT) program. Staff funded will include a part-time community resource advocate, full-time behavioral health provider, part-time behavioral health provider, and part-time medical assistant. These staff will provide ongoing medical care and medication services to uninsured and underinsured Gaston County residents. The behavioral health providers will provide substance use counseling services and expansion of telehealth services. This provider will ensure individuals needing mental health or substance use treatment can have same-day, convenient, and affordable access.

g. Provider: Kintegra Health

The total dollar amount of Opioid Settlement Funds appropriated for the above named and authorized strategies is \$614,829.12.

Adopted this the 27th day of May, 2025.

Chad Brown, Chairman

Gaston County Board of Commissioners

ATTEST:

Donna S. Buff, Clerk to the Board

CEAL.

GASTON COUNTY BUDGET CHANGE REQUEST (BCR)

TO: M	atthew Rhoter	n, County Manager					
FROM:	HLT	Hea	alth				
	Dept. Code	Departme	ent Name				
		Brittain Kenney	05/	27/2025			
	Depa	artment Director		Date			
REQUEST TYPE:							
Line-Item Transfer	· Within Depar	tment & Fund	Line-Item Transfer Betwe	Transfer Between Funds*			
Project Transfer W	/ithin Departm	ent & Fund	\checkmark	Additional Appropriation of	al Appropriation of Funds*		
Line-Item Transfer	ard of Commissioners						
ACCOUNT DESCRIPTION		ACCOU	AMOUNT**				
As it appears in Munis Ex. Employee Training	Fund Dept Div SubDiv Prog SubProg Future Func Obj Proj XXXX XXX XXX XXXX XXXXXX XXXXXX XXXXXX XXXX						
Fund Balance Appropriated	2055-NDP-0	000-0000-FBApro-000	(307,414.56)				
Professional Services	2055-HLT-0	00-00000-ExpMAT-S	307,414.56				

JUSTIFICATION FOR REQUEST:

Gaston County joined the State in the National Opioid Settlement. This BCR appropriates Year 1 \$307,414.56 /Project Total \$614,829.12 of our allotment for Evidence-Based Addiction Treatment through expansion Medication Assisted Treatment for uninsured and underinsured Gaston County residents at Kintegra Health. Funds will enable Kintegra Health to continue services and cover the cost of medications and required labs. In addition to medication for the treatment of opioid use disorder, Kintegra Health will ensure individuals needing mental health or substance use treatment can have same-day, convenient, and affordable access (either virtually or face to face) to behavioral health consultation and intervention services. Year 1 \$307,414.56 (July 1, 2025 - June 30, 2026)

^{**} Decreases in expenditures and increases in revenue accounts require brackets. Increases in expenditures and decreases in revenue do not require brackets. Please note that transfers between funds require inter-fund transfer accounts.

GASTON COUNTY BUDGET CHANGE REQUEST (BCR)

TO: N	√latthew Rhoter	n, County Manager				
FROM:	HLT	HLT Health				
	Dept. Code	Department	Name			
		Brittain Kenney	05/27/2025			
	Depa	artment Director	Date			
REQUEST TYPE:						
Line-Item Transfe	ər Within Depar	tment & Fund	Transfer Betwee	ransfer Between Funds*		
Project Transfer \	Within Departm	ent & Fund	✓ Additional	Appropriation of	Funds*	
Line-Item Transfe	er Between Dep	artments	* Requires re	esolution by the Boar	rd of Commissioners	
ACCOUNT DESCRIPTION		ACCOUNT		AMOUNT**		
As it appears in Munis Ex. Employee Training	Fund Dept Div SubDiv Prog SubProg Future Func Obj Proj XXXX XXX XXXX XXXXXX XXXXXX XXXXX XXXXX XXXX					
Fund Balance Appropriated	2055-NDP-0	000-0000-FBApro-000000		(307,414.56)		
Professional Services	2055-HLT-00	00-00000-ExpMAT-Stratç	g2-0000-05-530010-		307,414.56	

JUSTIFICATION FOR REQUEST:

Gaston County joined the State in the National Opioid Settlement. This BCR appropriates Year 2 \$307,414.56 /Project Total \$614,829.12 of our allotment for Evidence-Based Addiction Treatment through expansion Medication Assisted Treatment for uninsured and underinsured Gaston County residents at Kintegra Health. Funds will enable Kintegra Health to continue services and cover the cost of medications and required labs. In addition to medication for the treatment of opioid use disorder, Kintegra Health will ensure individuals needing mental health or substance use treatment can have same-day, convenient, and affordable access (either virtually or face to face) to behavioral health consultation and intervention services. Year 2 \$307,414.56 (July 1, 2026 - June 30, 2027)

^{**} Decreases in expenditures and increases in revenue accounts require brackets. Increases in expenditures and decreases in revenue do not require brackets. Please note that transfers between funds require inter-fund transfer accounts.



Gaston County

Gaston County
Board of Commissioners
www.gastongov.com

DHHS - Public Health Division Board Action

File #: 25-288

Commissioner Keigher - DHHS - Health Division - To Approve a Resolution to Direct the Expenditure of Opioid Settlement Funds and Appropriate \$614,829.12 (*Year 1: \$307,414.56, Year 2: \$307,414.56, Total: \$614,829.12*)

STAFF CONTACT

Abigail Newton - Assistant Public Health Director - DHHS - Public Health Division - 704-853-5103

BUDGET IMPACT

Increase revenue and expenses in the Opioid Settlement Funds by \$614,829.12. No additional County funds.

BACKGROUND

The State of NC joined in the national litigation against pharmaceutical supply chain participants who engaged in the manufacture, marketing, promotion, distribution, or dispensing of opioid medications that have harmed the public. On June 8, 2021, the Board of Commissioners approved the Memorandum of Agreement Between the State of North Carolina and Local Governments on Proceeds Relating to the Settlement of Opioid Litigation (Res. 2021-172) joining in the national litigation. Gaston County was awarded \$40,520,354.00 in settlement funds to be received over a period of 18 years. To date the County has received \$11,845,106.51 in settlement funds.

This Board Action, if approved, appropriates \$614,829.12 in Opioid Settlement Funds for continuation of the existing Medication Assisted Treatment (MAT) program implemented by Kintegra Health. Funds will cover costs of staff members, medications and required labs to support the growth of the existing Medication Assisted Treatment (MAT) program. Staff funded will include a part-time community resource advocate, full-time behavioral health provider, part-time behavioral health provider, and part-time medical assistant. These staff will provide ongoing medical care and medication services to uninsured and underinsured Gaston County residents. The behavioral health providers will provide substance use counseling services and expansion of telehealth services. This provider will ensure individuals needing mental health or substance use treatment can have same-day, convenient, and affordable access.

Year 1 (July 1, 2025 - June 30, 2026): \$307,414.56

Year 2 (July 1, 2026 - June 30, 2027): \$307,414.56

POLICY IMPACT

N/A

ATTACHMENTS

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Spending Authorization Resolution and Budget Change Request (BCR)

DO NOT TYPE BELOW THIS LINE

I, Donna S. Buff, Clerk to the County Commission, do hereby certify that the above is a true and correct copy of actio taken by the Board of Commissioners as follows:										
NO.	DATE	M1	M2	JBailey	CBrown	CCloninger	AFraley	BHovis	TKeigher SShehan	Vote
2025-154	05/27/2025	TK	JB	А	А	Α	Α	Α	А А	U
DISTRIBU	ITION:									