



# City of Milwaukee

200 E. Wells Street  
Milwaukee, Wisconsin 53202

## Meeting Minutes

### CITY-COUNTY HEROIN, OPIOID, AND COCAINE TASK FORCE

VACANT, CHAIR

*Michael Lappen, Vice-Chair*

*Karen Loebel, James Mathy, Ald. Michael Murphy, Ald. Khalif Rainey, Mayor CoryAnn St. Marie-Carls, Brian Peterson, Christine Westrich, E. Brooke Lerner, Marisol Cervera, and Michael Macias*

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Friday, January 19, 2018

9:00 AM

Room 301-B, Third Floor, City Hall

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**1. Call to order.**

*Meeting called to order at 9:03 a.m.*

**2. Roll call.**

*Present 10 - Lappen, Loebel, Mathy, Murphy, Rainey, St. Marie-Carls, Peterson, Westrich, Lerner, Cervera  
Absent 1 - Macias*

*Ald. Rainey joined the committee at 9:17 a.m. during item 5.*

*Mayor St. Marie-Carls joined the committee at 9:54 a.m. during item 10.*

*One membership position is vacant from the Health Department.*

**3. Election of a chair.**

*Administrator Lappen moved to nominate Ald. Murphy as the chair, seconded by Dr. Peterson. There was no objection.*

*Ald. Murphy elected as chair.*

**4. Review and approval of the meeting minutes from December 1, 2017.**

*Administrator Lappen moved approval of the meeting minutes from December 1, 2017, seconded by Dr. Peterson. There were no objections.*

**5. Discussion on task force outcomes and developments.**

*Several members commented on efforts and collaboration that has taken place over*

*the course of the task force.*

*Administrator Lappen commented with regards to the Behavioral Health Division (BHD). Many efforts coming from BHD are related to the task force work plan. Concerning safe and sober housing and places after people stay at a residential facility, BHD recently issued a RFP for Outpatient Plus, which is an alternative to the ASAM residential level 2 care. Other housing developments include receipt of a \$2.1 million grant for 5 years to expand family drug treatment court and an allocation of federal State Targeted Response (STR) funds of \$505,639 to expand residential AODA beds. There was a successful pilot in partnership with the Milwaukee Secure Detention Facility to facilitate Vivitrol shots for appropriate individuals upon their day of release; however, a challenge is funding with Vivitrol being expensive. Out of 43 offenders who agreed to participate, there was 1 reported overdose and a 12% rate of revocation or absconding. Out of 58 who was offered the program but declined, there were 7 reported overdoses and a 37% rate of revocation or absconding. BHD Community Access to Recovery Services (CARS) has expanded bridge housing capacity for men this month and is looking to add capacity for women this year. There are plans for a proposal with the Oxford House program, which is a national movement of self-governed, sustaining sober houses affiliated and supported by a national organization. A hope is to obtain Mental Health Board (MHB) approval to cover startup costs for 6 homes early in 2018 and to as many as 24 in the next few years. On track is to add a new Medication-Assisted Treatment (MAT) provider to the BHD network this quarter. BHD has purchased and provided nasal naran and training on its deployment to its provider networks utilizing intravenous funds from the State. BHD received a grant late in 2017 and is moving forward with the Opioid Death Investigator Project with actual investigations and identification of gaps. BHD has partnered with Rx mail back program, received 1000 mail back envelopes for people to dispose of medicines, and given some to the Milwaukee Fire Department and West Allis Police Department. Light in Unite Red is a communitywide prevention committee led by BHD, expanding with partner agencies, and targeting youth and families for prevention and education. There will be a phone bank at TMJ4 next week connecting callers to resources and services, a parent and teen resource fair at Southridge mall, a screening of the film "Written Off" and discussion panel at the Oriental Theater about a Wisconsin man struggling with opioid use. The Housing Division is expanding naran to homeless outreach resources.*

*Dr. Peterson commented with regards to the Medical Examiner's Office. Autopsy workload was increased by 10% last year, largely driven by the opioid crisis. The biggest culprits in deaths were fentanyl analogs, which has doubled from the year before. Fentanyl and heroin are the leading cause of opioid-related deaths in the community. The office managed to hire another forensic pathologist starting next month, is in process of hiring another toxicologist and chemist, and is acquiring a Time of Flight (TOF) LC/MS machine to turn out results in a couple of days rather than weeks. A challenge is to determine to where to put the machine.*

*Director Westrich commented with regards to the Office of Emergency Management. OEM has directed since six months ago for paramedics to alert hospitals of incoming patients that have overdosed through radio to provide a warm handoff, a goal of the task force, to hospitals so that proper assistance, accountability, and services can be given to recovering patients in hospital emergency departments. OEM will incorporate an app solution on a mobile device in addition to radio for the warm handoffs. OEM has been working with the Department of Criminal Investigation (DCI), the Department of Justice (DOJ), and the High Intensity Drug Trafficking Area (HIDTA) program on*

*implementing the Overdose Mapping Analysis Program (ODMAP) app, which allows first responders in the field, in 10-20 seconds, to log and track overdose incidents, naran administration, fatal overdoses, and hospital transports. The app program is used nationwide, such as in Baltimore and Washington, but not in Milwaukee. ODMAP can take 1 to 2 years for all local agencies to use, is paid for by federal level, free for first responders, and should be advocated. OEM, in partnership with Dr. Peterson, DOJ, Medical College of Wisconsin, was awarded a \$300,000 grant over 2 years for unscrambling data to track the journey and waypoints of service interactions with patients. OEM has almost 100% in place memorandums of understanding (MoU) with different law enforcement agencies within the County, including those from DCI, UWM police, Marquette polic, State Fair police, and State. The MoUs allows cops, as first responders, to carry and administer naran immediately at OEM's direction.*

*Ald Rainey joined committee at 9:17 a.m.*

*Dr. Lerner commented with regards to Milwaukee Community Opioid Prevention Effort (COPE). COPE has put out every 6 months a comprehensive data report of community resources, community data, overdose deaths, overdose treatment by Emergency Medical Services (EMS), AIDS Resource Center of Wisconsin (ARCW) data on peer reversals from BHD, and other information. COPE has worked with community stakeholders to create an inventory of all the groups providing opioid abuse services, made that inventory available through its website, and had those groups complete a needs assessment about resources needed or lacking. The needs assessment has contributed to the task force work plan. A website was created to provide links to resources. A palm card was also created with phone numbers for services to treatment, the website, and for administering naran.*

*Ald. Murphy commented. The City has allocated \$25,000, with matching funds from the Medical College of Wisconsin and Zilber Family Foundation, to continue the COPE report. An additional \$50,000 was allocated in the City budget to allow for a public education campaign. There is the hope to leverage additional resources. Additional money was made available for the purchase of the mass spectrometer absorption unit for the Milwaukee Medical Examiner's Office to do more toxicology reports in a timely manner with the. The County is doing a great deal of things with a difficult budget and is starting to see some federal money. The task force shows that the City and County are working together for the community.*

**6. Communication relative to the review of practices and polices of contracting clinics, insurance companies, and the limitation of substance abuse treatment and services.**

*Ald. Murphy commented. He received correspondence from Avocaid Health Foundation, Inc. regarding health insurance companies eliminating or reducing substance abuse treatment and services.*

*Individuals appearing:  
Robert Miranda, Avocaid spokesperson  
Amy West, West Grove Clinic  
Jean Moral, West Grove Clinic*

*Mr. Miranda commented. He has been involved with investigating how health insurance companies and their CEOs have been mistreating communities. A substantial concern is the efforts of United HealthCare undermining the intensive outpatient program (IOP).*

*Ms. West commented. UHC last summer notified all the clinics in the area via letter that they would no longer cover IOP services any longer, which caused a panic for patients who still needed help. Some switched insurance companies, and some did not get any more treatment. UHC corrected and reversed their decision 2 months later. Now UHC has recently sent out a letter saying that a patient is restricted to 18 urine drug screens in a year. Clinics need to drug test patients on a regular basis, and UHC is limiting the level of treatment patients are receiving. No explanation was given, and it is assumed the latest restriction was a UHC budget decision. UHC also has much scrutiny on who is allowed access to treatment. UHC is the main culprit and other insurance companies do not make these kinds of restrictions.*

*Ms. Moral commented. Authorization has been an arduous process involving detailed prior authorization for IOP and opioid use. Patients have to go through an hour long questioning. Other substance abuse treatments, such as alcohol abuse, are approved right away.*

*Mr. Miranda further commented. It took much advocacy to make UHC understand their error regarding not covering IOP services. Perhaps the task force can invite UHC to the next task force meeting to address these concerns.*

*Ald. Murphy commented. The task force, at a minimum can write a letter to the head of UHC to question their restrictive decisions. Supporting documentation should be provided to the task force to include in the letter seeking UHC response.*

## **7. Communication relative to child welfare and foster care due to the opioid crisis.**

*Ald. Murphy commented. He was sad to hear that half the children that go to the Sojourner Truth House shelter are from households of addicted parents. A recent New York Times article pointed out a huge child foster care crisis due to opioid abusing households. Task force recommendations should include addressing and advocating for foster care relative to the opioid crisis. There are about 25,000 children in foster care in the City currently. There lacks enough foster care support.*

## **8. Discussion on City-County efforts, programs, initiatives, grants or activities.**

*Ald. Murphy said that HIDTA has been involved with interdiction and made a major drug bust last month of 17 individuals.*

*Individual appearing:  
Lieutenant Shaun Doyle, Milwaukee Police Department (MPD) & HIDTA*

*Lt. Doyle gave an update. The recent drug bust will impact drug supply for the short term. The void left will eventually be filled and replaced by someone or some other group due to the profitability of selling illegal drugs, especially for fentanyl. Costs to obtain fentanyl are much less at \$3000 to \$10,000 potentially per kilo when compared to heroin at up to \$60,000 per kilo. There are 2 direct sources of fentanyl. One source is from China. Although the State and China are making efforts to ban fentanyl production in China, producers there are changing and producing different fentanyl analogs. Another source is Mexico where precursor chemicals are sent to Mexico to be produced into fentanyl there. Cartels have realized more profitability to produce fentanyl. Generally fentanyl is distributed in the same supply routes in place as those for heroin, cocaine, and marijuana. MPD has changed its policy of carrying more than one narcotic dose.*

*Ald. Murphy comments. An alarming statistic is the saving, through narcan administration, of overdosed persons, the majority of which are first time occurrences in the City. The issue may not have plateaued yet. For those overdosing on fentanyl, more than one dose of narcan may be needed to revive them.*

*Ald. Murphy added that the task force, at its next meeting, will go on record as a recommendation to support Take Back My Meds Milwaukee and their efforts for medicine disposal and raising funds to expand their disposal coverage.*

*Lt. Doyle further commented. ODMAP is a real-time mapping application that maps out fatal and nonfatal overdoses in real-time. Real time logging of narcan administration can occur as well. The application can offer real-time and actionable intelligence data for MPD to provide immediate deployment of resources or enforcement to affected areas or community partners.*

## **9. Review of work plan and recommendations.**

*Individuals appearing:  
Angela Hagy, Health Department  
Tiffinie Cobb, Health Department  
Sarah Zarate, Health Department*

*Ald. Murphy commented. Members are to review the latest work plan and submit their revisions or input to staff to produce report of final recommendations for the task force to review at its next meeting.*

*Ms. Hagy commented. The current work plan draft is very rough. Much feedback is sought from members especially concerning if task force goals align with objectives, if outcome measurables are realistic and achievable, and if strategies align with outcome numbers. Tasks and activities in the work plan need to be assigned to individuals or an agency to commit carrying out those tasks. Another significant concern is a structure moving forward relative to oversight and implementation of the plan the task force dissolves. Key informant interviews are needed from the community. Ms. Cobb is the Substance Abuse Manager that will devote time to the work plan going forward.*

*Ms. Cobb commented. She graduated from the Zilber School of Public Health and has recently done evaluation and research consulting with human service organizations and nonprofits nationwide. Her community engagement experience, evaluation background, program planning, and her interest in substance abuse prevention will serve her well.*

*Ald. Murphy said he will work with the Medical College of Wisconsin, Dr. Lerner, the City, the County, and other funding groups to take on the oversight role of task force final recommendations.*

*Administrator Lappen commented. The next steps should involve lived persons of experience and in recovery from substance abuse. BHD has many community connections, and he can assist in providing a linkage. There is an opportunity to connect with about 50 community organizations involved with Light and Unite Red events.*

**10. Public comments.**

*Elizabeth Collier, Wisconsin Department of Health Services, testified. There will be 2 DHS events: Division of Care and Treatment Services (DCTS) Opioid and Trauma training conference from March 8 to 9, 2018 and an Opioid Forum from April 11 to 12, 2018. A presentation on ODMAP will be given at the forum. More information on the two events will be forwarded to task force staff to disseminate to members. There is a grant funding opportunity for expansion and implementation for opioid users. There are 4 awards, 2 for urban and 2 for rural, totaling \$250,000 altogether. The grant application submittal deadline is February 16, 2018.*

*Ald. Murphy said that Milwaukee County is exploring a potential lawsuit against Big Pharma pharmaceutical company, the City is consulting with its City Attorney's Office, and the task force should support the litigation efforts as an agenda item at its next meeting.*

*Paul Mozina, Milwaukee resident, testified. The task force has been ignoring and not addressing the drug war and drug prohibition. There is a lack of connection between the drug war and overdose deaths. An article "The Harmful Side Effects of Prohibition" has been provided to the task force. The main points of the article are that drug laws punish and criminalize users, drug laws raise the prices of drugs to users, and users are forced into a life of crime to acquire money to buy drugs. Drug laws are causing the invention of new intoxicating drugs like fentanyl. Due to his throat cancer resurfacing, he was prescribed oxycodone and opioids and recommended a fentanyl patch in lieu of other alternatives, such as medicinal cannabis. Cannabis is illegal in Wisconsin. Other places like in Oregon and California allow throat cancer patients to be treated with cannabis. He had contemplated but was unable to move to one of those places. The lack of medicinal cannabis has forced people to use opioids. There has been hypocrisy of the United States importing cocaine, protecting opium fields in Afghanistan, big pharmaceutical companies distributing drugs, and medical establishments prescribing opiates. A significant concern is the lack of prosecuting physicians overprescribing or illegitimately prescribing opioids. The Drug Enforcement Administration (DEA) should be questioned and made accountable for the lack of prosecuting these physicians while stated otherwise.*

*Ana Veloz, Ravenswood Clinic, testified. The clinic that she owns is one of a few still in the City that has survived and grandfathered into Allstate and private insurance companies. She is concerned over County preferences over clinics. Despite her clinic, in its 20 years, showing no noncompliance treatment issues from the County, it has been denied being listed as a County provider or given wiser choice application approval. Her clinic can service the community and help reduce long waiting lists of weeks and maybe months. Due to limited services, it is time to stop favoring clinics. She has family members and friends who have suffered from substance.*

*Administrator Mathy moved to enter into record, seconded by Dr. Peterson, the article submitted by Mr. Mozina. There was no objection.*

*Mayor St. Marie-Carls joined the committee at 9:54 a.m.*

*Rafael Mercado, Team HAVOC and Milwaukee Heroin Diaries, testified. There has been no conversation made and he has not seen much effort to address residents in the inner city and students in Milwaukee Public Schools. There needs to be*

*interaction with the communities in the City like the interaction that is occurring for other cities. West Allis/West Milwaukee has already gone into its schools to talk to 3700 high school students. There should be utilization of existing community groups and resources, like his organization, to interact with the community and go into schools. The task force and its efforts should not dissolve. There needs to programs created to monitor sober living houses in the inner city where heroin overdoses have been occurring. Rather than look for national treatment facilities, there are more than enough local treatment facilities that are more than willing to be utilized. Treatment facilities that are receiving funding should be held accountable on adequately providing services. Long-term solutions are appreciated, but there need to be results and solutions today. A solution to break the stigma between the community and the police is to hold events outside police stations or in the community with officers not dressed in uniform. His incarceration in federal prison due to his criminal past was the blessing that he needed to turn his life around and get mental health counseling. The mental health counseling helped him to understand his underlying issues and addictions. Of importance is to counsel youths and tackle underlying issues that causes them to use drugs and engage in bad behavior. Drug dealing is an addiction and causes a high for the dealers. Marijuana is addicting. Local media outlets should be utilized for awareness. There should be an in-your-face awareness approach, with everyone involved.*

*Greg Kafton, Clean Slate, testified. He has been trying to do research on patient follow-ups and treatment after overdosing occurs, but there has not been much information found. One article from 2015 showed that subjects who received medicinal drug treatment in the emergency room had a 75% chance of following up to get further treatment as opposed to a 20% chance of getting further treatment when only being given written information about treatment resources. Perhaps there should be some response by Emergency Response System and emergency rooms.*

*Ald. Murphy commented. Further discussion can be had with medical professionals on the topic of medicinal treatment in emergency rooms locally. There have been measures taken. Administrator Lappen has been a leader to make Vivitrol available to individuals coming out of correctional facilities both in Ozaukee and Milwaukee County.*

*Dr. Lerner added that the Medical College of Wisconsin did not receive a grant to look into Mr. Kafton's issue but will try again.*

*Mr. Kafton further commented. Naloxone is stocked in emergency rooms, but the average family practitioner cannot prescribe it. His concern is with people who have overdosed and not those who are already in withdrawal, such as those coming out of correctional facilities.*

*Ald. Murphy further remarked. Mr. Mozina's concern over drug prohibition is appreciated but perhaps should be addressed to a different and more appropriate forum, possibly at the State legislature. In the past he had led legislation to bring equity and the decriminalization of people who were using marijuana in the City by changing it from a felony to a misdemeanor charge to equate with other local municipalities. He would advocate medicinal marijuana to be used in Mr. Mozina's case; however, he is currently politically uncertain about legalizing marijuana overall and would want further investigation.*

**11. Set next meeting date and time.**

*Friday, February 9, 2018 at 9 a.m. (final meeting)*

**12. Agenda items for the next meeting.**

*Review of final work plan and recommendations.*

**13. Adjournment.**

*Meeting adjourned at 10:17 a.m.*

*Chris Lee, Staff Assistant  
Council Record's Section  
City Clerk's Office*

**This meeting can be viewed in its entirety through the City's Legislative Research Center at <http://milwaukee.legistar.com/calendar>.**

**Matters to be considered for this meeting and materials related to activities of the task force can be found within the file:**

**161554**            Communication relating to the activities of the City-County Heroin, Opioid and Cocaine Task Force.

**Sponsors:**     THE CHAIR