Additional Meeting Materials **BOARD OF HEALTH**

King County's Five-Priority Strategy to Prevent Overdoses & **Expand Treatment**



At a Glance, Our Impact One Year Later >>>>>



Isabel Jones, King County Department of Community & Human Services

Brad Finegood, Public Health - Seattle & King County

King County Board of Health, May 15, 2025

PRIORITY 1:

Treatment and Community-Based Recovery

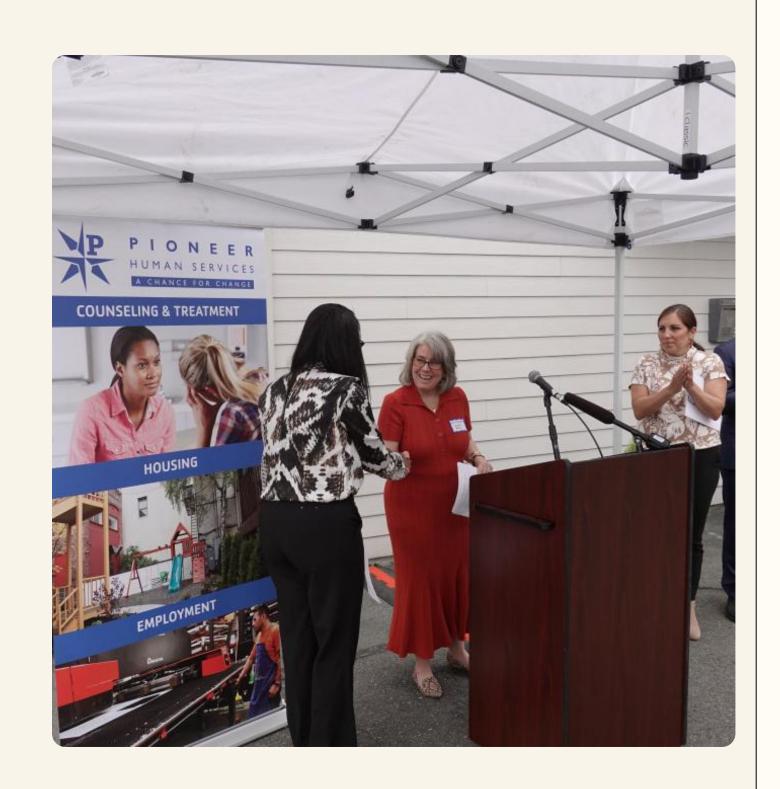
7,235 Medicaid recipients in King County accessed buprenorphine to treat opioid use disorder in 2024.

685 buprenorphine prescriptions were issued through the new **Buprenorphine Prescribing Line** for people ages 13+.

20 new mental health professionals were added to crisis response teams, who made 2,576 contacts.





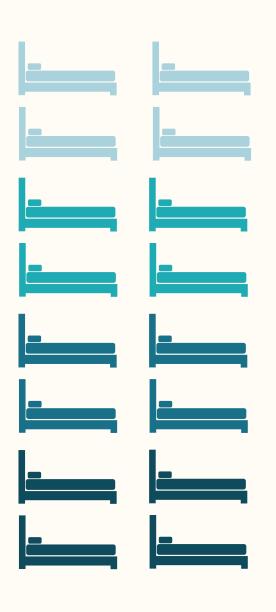


PRIORITY 2: Behavioral Health Beds and Facilities

King County opened a **16-bed** residential treatment program for co-occurring mental health and substance use disorders.

King County announced a **permanent location for the Sobering Center** in SODO, scheduled to open by 2026.

The Sobering Center is currently operating in the Yesler Building and served 1,018 people in 2024.



PRIORITY 3:

Overdose Reversal & Fentanyl Testing

119,960 naloxone kits and 123,858 fentanyl test strips were distributed in 2024 with WA DOH support.

Three new harm reduction vending machines were installed and 2,600 naloxone kits were dispensed from vending machines in 2024.

Naloxone distribution boxes were installed at 16 locations, bringing the total to 21 low-barrier distribution locations.

Partners in the Community-Based Overdose Prevention Program provided overdose prevention services to 14,000 clients and provided 5,650 referrals to health care, services and MOUD (City of Seattle investment).







PRIORITY 4:

Behavioral Health Workforce Growth



\$12 Million

was awarded to support 37 behavioral health providers in retaining and recruiting more employees.

\$4.8 Million

awarded to expand the SEIU Training Fund's apprenticeship program.

PRIORITY 5:



Reducing Disparities in Overdose Impact



\$619,318

allocated from opioid settlement funds to expand medication for opioid use disorder in community settings.



\$2.26 Million

awarded to fund community-driven overdose prevention efforts, focusing on impacted groups.

Looking Ahead in 2025 and Beyond



Lowering barriers to care for people at risk of overdose through Crisis Care Centers, sobering center, and ORCA post- (non-fatal) overdose recovery center (City of Seattle investment).



Expanded mobile methadone access via new Opioid Treatment Program methadone vans with Evergreen Treatment Services (City of Seattle investment).



Expansion of services at Pathways Clinic and REACH Markham building to provide comprehensive drug user health services (City of Seattle investment).



Community-based access to buprenorphine via mobile bupe team to provide rapid access to long acting injectable bupe and increased linkage to MOUD care (City of Seattle investment).

5TH ANNUAL KING COUNTY

Substance Use Recovery Conference

TOGETHER WE CAN



KEYNOTE SPEAKER:

Maia Szalavitz

Award-Winning Neuroscience Author, Journalist and Mental Health Advocate



Wed, June 25 9 am – 3 pm

Green River College 12401 SE 320th St, Auburn, WA 98092



Questions? Contact KCBOHAdmin@kingcounty.gov



SOURCE

Sound Opiate Use Recovery Center

John C. Olson, MD, MHA May 15, 2025

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What do we do?

- Current MOUD census 141, Current SUD treatment census: 211
- Medications for Opioid Use Disorder (MOUD)
 - Suboxone (buprenorphine), Vivitrol, Sublocade, Brixadi
 - Treats cravings, prevents overdose
 - Stabilizes patients so they can participate more meaningfully in recovery.
- Inpatient detox and rehab referral
- SUD Treatment structured counseling, classes, and group
- Peer support
- Case management housing, forensics/legal, financial
- MH treatment

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Other things we do

- We promote health care for people using drugs
- We promote Narcan and overdose prevention
- We promote self care
- We educate
- We provide connection and support
- We prepare

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Challenges

- 1. Medicaid does not pay the full cost of treating our patients. We **depend** on supplemental funding as well as Medicaid funding
- 2. Regulatory framework re: "long-acting injectable buprenorphine" (LAI Bupe) and methadone
- 3. Newer buprenorphine induction options
- 4. Outreach and getting people in the door
- 5. Uncertainty about upcoming federal action preserving what works

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King County Budget and Federal Funding Update

May 15, 2025 King County Board of Health Dwight Dively

Director, Office of Performance, Strategy and Budget

King County Budget Update

- King County is resuming biennial budgeting for 2026-2027.
- Most funds are in good financial condition.
- The General Fund faces a \$150 million deficit. However, HB 2015 would authorize counties and cities to levy a new 0.1% sales tax. Assuming the Governor signs this legislation (supposedly on May 19), this would generate \$90-95 million per year in King County. This would solve the General Fund deficit, even if the region experiences a mild recession.
- The Governor has not yet signed the State 2025-2027 operating budget. The version passed by the Legislature includes some reductions that affect County programs, especially in Public Health and Community and Human Services, but these appear to be manageable.

Federal Funding: Overview and Approach

Overall Federal Revenue

- 2025 operating budget has over \$200 million of federal revenue.
- Capital budgets often include expected federal revenue several years into the future.
- The County receives additional federal funding indirectly through the state.

Coordination

- An interdepartmental County team is evaluating risks to federal revenue, monitoring developments, and coordinating communications and responses.
- The current guidance to department staff is to:
 - Continue best-practice grant management, including prompt billing and reporting.
 - Alert leadership of any changes to access to billing or reporting systems.
 - All applications for new or renewed federal funds are being reviewed by the Executive Office legal team, with support from the Prosecutor's Office as needed.
- Communication with external partners and community groups includes:
 - For now, the work partners have been doing and continue to do under federally-backed contracts will be paid.
 - The situation is changing rapidly, and County leadership is continuing to monitor and analyze emerging federal activities as well as the court actions occurring in response.
 - If the County becomes aware of a potential impact to a specific funding stream, County staff will contact affected partners as soon as possible.

Four Types of Risk

- Some federal agencies have been directed to stop payments on existing grants or to impose new conditions on the funding. There are multiple lawsuits against these actions and injunctions are in place that require agencies to continue to provide funds. These injunctions are being appealed. Agency compliance with the injunctions varies.
- New grants or renewals of existing grants sometimes have conditions that violate the original appropriations, State law, or County policy. It is likely that the County will lose funds in such situations unless litigation is successful.
- The President's budget outline includes dramatic reductions in many programs.
 The House budget resolution for fiscal year 2026 also implies major reductions to domestic federal programs, such as Medicaid and SNAP, and specific proposals are currently being debated in committees. Medicaid and other reductions could reduce funding for Public Health and DCHS in October. The Senate version implies smaller reductions through the use of "magic accounting."
- Elimination of federal staff can affect the ability of County agencies to provide services and deliver projects.

First the Good News...

- Courts continue to issue temporary restraining orders (TROs) and injunctions requiring the federal government to continue to provide funds for existing contracts funded from existing appropriations.
- King County, along with other jurisdictions, initiated litigation to protect human services and transportation funds that the administration is trying to condition in ways that violate appropriations acts. A TRO was issued last week that prevents such conditions.
- King County joined litigation initiated by the American Federation of Government Employees, AFL-CIO, which challenges the arbitrary elimination of many federal jobs that are essential to delivery of County services. A TRO was issued last Friday.

But the Bad News...

- Two weeks ago, County agencies were notified that AmeriCorps members were being terminated nationwide. This affects staffing in Emergency Management, the Climate Office, Public Health, Water and Land Resources, and other agencies.
- Several County departments are facing situations where critical federal staff
 have been eliminated. This covers a wide range of federal agencies, including
 the Army Corps of Engineers, NOAA, EPA, the Centers for Disease Control and
 Prevention, and FEMA.
- The absence of these federal staff likely will produce delays and cost increases for many projects and programs, including the Lower Duwamish cleanup, fish passage projects, rental assistance for veterans, and airport safety.
- Many of the staff reductions and program changes are incoherent. Public Health recently received a response to an email saying: "Your message couldn't be delivered to the recipient because you don't have permission to send it."

Federal Fiscal 2026 Budget

- If Congress can pass appropriations bills (hardly a sure thing), cuts in domestic discretionary funds and Medicaid could have substantial effects on funding for County departments.
- The administration has announced plans to eliminate many programs and agencies, especially those that provide services for lower-income people.
 There are also public comments about substantially reducing or eliminating agencies that provide national coordination and support, including FEMA and many public health agencies.
- Other potential federal actions, such as reducing Medicaid, SNAP, or housing support, would hurt lower-income County residents and put more pressure on programs funded by the State and local governments and non-profits.