

Opioid-Related News and the Courts

Weekly Review

May 7, 2021



National

[Big three drug distributors blame doctors, regulators in trial over opioid epidemic](#)

Reuters

The three largest U.S. drug distributors, facing their first trial over claims that they fueled the opioid crisis, said responsibility for ballooning painkiller sales lies with doctors, drugmakers and regulators.

AmerisourceBergen Corp ([ABC.N](#)), McKesson Corp ([MCK.N](#)) and Cardinal Health Inc ([CAH.N](#)) are defending themselves against a lawsuit brought by the city of Huntington and Cabell County in West Virginia.

“We intend to prove the simple truth that the distributor defendants sold a mountain of opioid pills into our community, fueling the opioid epidemic,” Paul Farrell, a lawyer for Cabell County, said in his opening statement in Charleston, West Virginia federal court.

Huntington and Cabell are seeking money to address the toll the opioid crisis has wreaked on their communities - estimated by one of their expert witnesses at \$2.6 billion.

National

[A Real Opportunity in the Fight Against Opioid Use Disorders](#)

Governing Magazine

Here are three guidelines for policymakers setting up dedicated funds:

- **Give priority to evidence-based programs and services proved to work.** Through a public, transparent process, policymakers should identify and fund prevention, harm reduction, treatment and recovery programs that are supported by evidence. Once those programs are set up, officials need to fund and implement a plan to collect detailed data — by geography, race and ethnicity, and other characteristics — to track progress and assess whether the programs are accomplishing their objectives.
- **Develop a multiyear budget.** Although the number, timing, amount and duration of payments from the numerous ongoing lawsuits is difficult to predict, one thing is certain: While the money eventually will run out, the prevention, harm reduction, treatment and recovery programs will need to continue for many years. This means policymakers should take special care to ensure that settlement funds are sustainably allocated. For example, they could use these limited resources for one-time

investments, such as telehealth upgrades that could improve care coordination, rather than ongoing expenses.

- Furthermore, because the money will be a temporary resource, state and local leaders cannot rely on it as the sole source of funding. Nor should the temporary influx of settlement dollars be offset by reductions or reallocations of current opioid-related spending; otherwise, progress on fighting the overdose epidemic will be impeded. A long-term budgeting process can help with all these challenges by distinguishing between one-time and ongoing expenses and by coordinating and tracking multiple funding streams over many years.
- **Publicly track and report spending.** To help ensure that settlement money is being used to enhance rather than replace existing funding, officials should disclose opioid-related spending from all local, state and federal sources. This tracking should begin with coordination among agencies at all levels of government to establish a baseline spending level before the settlement money is distributed. That way, policymakers and the public can determine whether year-over-year spending is or is not increasing. In addition to the expenditure figures, officials should also report key metrics related to progress in reaching specific prevention, harm reduction, treatment and recovery goals. This will provide context and enhance accountability around spending decisions. Online data dashboards and reports are a great way to publicly disseminate this information.

Michigan

[What Michigan's lawmakers want in earmark spending wish lists](#)

Detroit News

Rep. Tim Walberg, R-Tipton, requested \$300,000 toward construction of an 11-unit apartment building for pregnant women recovering from opioid addiction. The building would be the third to provide low-income housing for recovering individuals and families served by the nonprofit Andy's Angels, which works with the drug court programs in Jackson, Ingham and Lenawee counties.

New York

[New Beacon Court Hopes to Prevent Overdoses](#)

Highlands Current

The Beacon Recovery Court is part of an attempt by the state court system to divert defendants who suffer from substance abuse, and especially opioid addiction. While the court can currently only handle defendants from Beacon, [Judge Timothy Pagones who presides over the program] explained that it will become a “hub” that can hear cases from throughout Dutchess County.

Including Beacon, there are now 25 recovery courts in New York, said Susan Sturges, who coordinates them statewide, with more planned. (The first opened in Buffalo in 2017; the Newburgh City Court also has one.) Although they are open to anyone with a life-threatening substance use disorder, the courts focus on opioid addiction — so much so that the model is known as an “opioid court.”

The courts hope to “intercept defendants who are at high risk of overdose at their earliest entry” in the legal system, Sturges said. While the defendant is in the recovery court, the county district attorney suspends prosecution of the case.

New York

[Oswego’s Intervention Court saves lives of those suffering substance use disorder](#)

NNY360

Intervention Court, formerly known as Oswego’s Opioid Court, is a testament to the power of compassion rather than an example of the power of the law. It’s not a court that locks you up. It’s a court that sets you free, free from substance use disorder.

[Originating] in Buffalo in 2017, it arrived, paid for completely through a federal grant, in Oswego in January 2019. Presided over by Oswego County Surrogate Court Judge Spencer J. Ludington with support from numerous community organizations including Farnham Family Services and Case Manager for the court, Samantha Cleveland, the Intervention Court exists to stand against the opioid crisis in this county and to stand for and provide help to those who have been affected by that crisis. Simply put, it exists to save lives.

And it seems it is doing just that. In a lengthy interview with Judge Ludington, Samantha Cleveland, and Mark Raymond of Farnham, the goals, methods, philosophies, and hopes of the remarkable people and agencies that have dedicated themselves to this humanitarian effort were discussed in detail.

Ohio

[Ohio’s first diversion center opens in Cuyahoga County](#)

WKYC

On Tuesday, a cultural shift occurred relating to the future of the justice system, at least that’s the hope.

“Untreated substance use disorder and mental illness is a major driver of crime,” Cuyahoga County Drug Court Judge David Matia said.

Matia sees it daily before his bench, but now there’s another option: [Ohio’s first diversion center](#) that offers help instead of jail.

“This will require a major culture change in Cuyahoga County,” County Executive Armond Budish declared. “Instead of thinking of people who have mental illness and addiction as criminals, we’re thinking of them now going forward as people who need help.”

A county survey found about a third of inmates have some type of addiction or mental health disorder.

“Those inmates stayed in jail 77% longer than the other inmates,” county ADAMHS Board CEO Scott Osiecki said.

Tennessee

[Why recovery courts are the best path for healing from opioid addiction | Opinion](#)

The Tennessean

Recovery courts have a proven record of saving lives, reducing recidivism, and saving taxpayers money. They are a combination of accountability and compassion that save lives while reducing criminal justice costs.

The 21st Judicial District Recovery Court is an example of the success that such programs can have.

Participants are non-violent offenders that are required to pay some of the cost of the program. The program does not receive county or city tax dollars and relies on community support to fill the funding gaps.

National figures show that recovery court graduates remain arrest free in 75% of cases. In contrast, only 30% of non-participants remain arrest free. Recovery courts save the cost of incarceration—approximately \$30,000, future incarcerations, and return productive members to society. It is estimated that treatment returns \$7 for every dollar spent.

While saving money is important, saving lives, keeping families together, and preventing children from growing up without a parent are more important.

The program is intensive and not all are ready to commit. The two-year program requires participants to receive treatment, attend weekly court, obtain and keep a job and pay fees to offset a portion of the cost of the program. Unfortunately, fees don’t pay the entire cost.

Fundraising remains an important part of recovery courts.