

HR0296

LRB102 18456 MST 26543 r

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## HOUSE RESOLUTION

2 WHEREAS, There is a documented national opioid crisis in 3 America that has claimed more than half a million lives over 4 the past 20 years; and

5 WHEREAS, The opioid crisis has touched all age, gender, 6 race, and economic groups across the country and here in 7 Illinois; and

8 WHEREAS, Every year, 30,000 Illinoisans use heroin, 74,000 9 have an opioid use disorder, and nearly 400,000 misuse 10 prescription opioids; and

11 WHEREAS, Illinois saw 2,151 opioid related deaths in the 12 first three quarters of 2020, a 36 percent increase from 2019; 13 and

14 WHEREAS, The COVID-19 pandemic has generated a surge in 15 heroin and other opioid-related emergency department visits, 16 with overdose numbers above the average monthly rate for six 17 consecutive months in 2020, increasing the urgency and need 18 for immediate access to care as the opioid crisis has evolved 19 and continues to takes its toll; and

20 WHEREAS, The use of synthetic opioids and fentanyl, along

HR0296 -2- LRB102 18456 MST 26543 r with poly-substance use, continues to rise and exacerbate the already deadly opioid crisis, raising the attention and concern of the CDC; and

WHEREAS, The total economic and social costs of opioid use disorder to the State of Illinois exceed \$41 billion annually, equating to nearly \$600,000 for every Illinoisan with an opioid use disorder; and

8 WHEREAS, Substance use treatment providers provide 9 life-saving health care services every day across all of 10 Illinois; and

11 WHEREAS, Substance use disorders and co-occurring mental 12 health disorders need to be treated as the chronic health 13 conditions that they are; and

14 WHEREAS, Thousands of lawsuits against manufacturers, 15 distributors, and retailers of prescription opioids are 16 ongoing nationwide with settlements likely to be in the 17 billions of dollars; and

18 WHEREAS, The majority of states across the country have 19 passed or introduced legislation and are actively planning for 20 appropriate resource investment of opioid settlement dollars 21 in the abatement and remediation of the impacts of the opioid HR0296 -3- LRB102 18456 MST 26543 r crisis; and

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2 WHEREAS, There is a desire to avoid the outcomes of 3 previous settlements, such as the tobacco settlement from 4 1998, where less than three percent of annual settlement sums 5 are used for abatement and remediation of the impacts of 6 tobacco use; and

7 WHEREAS, Illinois has had other revenue generating 8 legislation, such as an alcohol tax, where no revenue was 9 invested as intended for treatment and recovery supports for 10 alcohol use disorder; and

11 WHEREAS, The impending opioid settlements provide an 12 opportunity to invest in and transform the opioid use disorder 13 treatment system in Illinois, driving equity in treatment 14 access and availability for communities across the State; and

15 WHEREAS, Defining and designating safety net substance use 16 treatment providers is the first step toward an equitable 17 health care system for Illinois residents who have been 18 impacted by the opioid crisis; and

19 WHEREAS, Illinois can take action and join other states in 20 appropriately investing much needed resources in areas with 21 the greatest level of impact for those affected by the opioid HR0296 -4- LRB102 18456 MST 26543 r crisis in Illinois; therefore, be it

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2 RESOLVED, BY THE HOUSE OF REPRESENTATIVES OF THE ONE 3 HUNDRED SECOND GENERAL ASSEMBLY OF THE STATE OF ILLINOIS, that 4 we urge the Illinois General Assembly to create the Opioid 5 Settlement Fund, created as a special fund in the State 6 Treasury to receive opioid-related settlement funds to which 7 the State of Illinois may be entitled under any opioid-related 8 settlement; and be it further

9 RESOLVED, That all funds received by the State from an 10 opioid-related settlement should be deposited into the Opioid 11 Settlement Fund to be used for purposes related to alleviating 12 the opioid crisis; and be it further

13 RESOLVED, That of the moneys allocated to the Fund, a 14 portion should be dedicated as follows: (1) to provide greater access to and availability of quality and effective opioid use 15 disorder treatment, (2) to provide funding to safety net 16 substance use treatment providers, including the allocation of 17 capital funding resources to such providers to expand access 18 19 to and availability of quality and effective opioid use 20 disorder treatment, and (3) to maximize the opportunity to 21 draw federal matching funds for purposes related to 22 alleviation of the opioid crisis; and be it further

-5-LRB102 18456 MST 26543 r RESOLVED, That in addition to the moneys allocated, 1 2 subject to appropriation, at least \$100,000 should, on an annual basis, be granted to the Illinois Alcohol and Other 3 Drug Abuse Professional Certification Association to cover the 4 5 fees associated with the application and testing of human services professionals in the State of Illinois who provide 6 substance use disorder services and mental health services; 7 8 and be it further

RESOLVED, That "opioid-related settlement" means any and 9 10 all current or future settlements reached by the State of 11 Illinois, independently or as part of a global or multi-state 12 opioid manufacturers, distributors, settlement, with 13 retailers, and any associated business entities; and be it 14 further

15 That "safety net substance use treatment RESOLVED, providers" means licensed and nationally accredited substance 16 17 use treatment providers that are open 24 hours per day, are 18 required to admit patients 24 hours per day, are providing medication-assisted treatment to individuals with opioid use 19 20 disorder, and are serving a higher proportion of Medicaid 21 beneficiaries and individuals who are uninsured; and be it 22 further

RESOLVED, That suitable copies of this resolution be 23

HR0296

HR0296 -6- LRB102 18456 MST 26543 r
delivered to the Governor, all Legislative Leaders, the
Attorney General, the Illinois Department of Human
Services-Department of Substance Use, Prevention and Recovery
(SUPR), and the Illinois Department of Healthcare and Family
Services (HFS).