Virtual Meeting of the Nebraska Opioid Settlement Remediation Advisory Committee
September 23rd, 2026
Nebraska Association of County Officials (NACO) Offices, 1335 H Street, Lincoln, NE
10:00 a.m. – 1:00 p.m.
Meeting Minutes DRAFT

1. Call Meeting to Order:

Chairperson Todd Stull called the meeting to order at 10:04 a.m. and welcomed all attendees to the meeting. In accordance with § 84-1411(2)(b) of the Open Meetings Act, a copy of all documents being considered at the meeting, an electronic copy of this agenda, and a current copy of the Open Meetings Act are available at the Nebraska Opioid Settlement Remediation Advisory Committee's webpage at https://dhhs.ne.gov/Pages/Opioid-Settlement-Workgroup.aspx. The Open Meetings Act is also located at the front of the meeting room.

a) Chairperson Stull reminded Committee members that for virtual meetings, Committee members may attend virtually or be physically present at the meeting site to be counted for quorum, and to vote.
b) Roll call was conducted, and a quorum was determined to exist, with 8 voting members present.

Voting Members

Members in Attendance: Ann Anderson-Berry, Mary Ann Borgeson, Amy Holman, Brandon Kelliher, Riley Slezak, Todd Stull, Jason Scott, and Mike Teft.

Members Absent: Amy Reynoldson, Cory Schmidt, Paul Vrbka, and Christa Yoakum.

Non-Voting Members in Attendance: Kevin Borcher, Sara Howard, and Paul Price.

Non-Voting Members Absent: Jerome Kramer, John Massey, Kevin Spencer, and Bill Tielke.

Others in Attendance: Madisen Bell, Amanda Callaway, Keenan Cotton, Joseph LeDuc, Ingrid Gansebom, Theresa Henning, Thomas Janousek, Patrick Kreifels, Erin Maier, Katie McCarthy, Jessica McDevitt, Diana Meadors, Rob Rayl, Matthew Schroeder, Lee Ann Slaughterbeck, Derek Sonnerfelt, Tad Spencer.

c) Chairperson Stull stated that on September 2nd, 2026, a notice of this meeting with the agenda and other materials were provided to the public and all members of the Committee. Notice of this meeting with the agenda and other materials were available for public inspection at the Nebraska Department of Health and Human Services (DHHS), Division of Behavioral Health (DBH), 301 Centennial Mall South, 4th Floor in Lincoln, Nebraska. An electronic copy of the agenda, all documents being considered at the meeting, and a link to the current version of the Open Meetings Act were posted on the DHHS website at https://dhhs.ne.gov/Pages/Opioid-Settlement-Workgroup.aspx.
d) Chairperson Stull informed attendees about the location of the Open Meetings Act, which is accessible to members of the public in the meeting room, and at https://dhhs.ne.gov/Pages/Opioid-Settlement-Workgroup.aspx, along with a copy of all reproducible written materials to be discussed at this meeting.

e) Public Comment: Pursuant to the Open Meetings Act, the Chair of the Committee reserves the right to limit comments on agenda items. Chairperson Stull stated that public comments will be heard on agenda items 5, 6, 7, and 8. Each commenter will have five minutes to speak. Pursuant to § 84-1412(3), any member of the public desiring to address the body shall identify their name, including an address and the name of any organization represented by such person. Public members may sign up on the list at the front of the room or submit their name via the virtual chat box if attending virtually.

2. Consider a motion to approve the minutes from June 24th, 2026.

Chairperson Stull opened the floor for a motion to approve the minutes from the June 24th, 2026, meeting. Motion was made by Mike Tefft seconded by Mary Ann Borgeson to approve the minutes as written. Chairperson Stull opened the floor for discussion. Hearing none, the motion to approve June 24th, 2026, minutes passed with the following results:
Yay=7: Mary Ann Borgeson, Ann Anderson-Berry, Amy Holman, Jason Scott, Riley Slezak, Todd Stull, and Mike Teft.
Nay=0.
Abstain=1: Brandon Kelliher.
Absent=4: Amy Reynoldson, Cory Schmidt, Paul Vrbka, and Christa Yoakum.

3. Consider a motion for the resignation of Riley Slezak, Senior Advisor to the Mayor of Lincoln.

Chairperson Stull opened the floor for a motion to accept the resignation of Riley Slezak. Motion was made by Mary Ann Borgeson, seconded by Jason Scott to accept the resignation of Riley Slezak. Chairperson Stull opened the floor for discussion. Hearing none, the motion to accept the resignation of Riley Slezak passed with the following results:
Yay=8: Ann Anderson-Berry, Mary Ann Borgeson, Amy Holman, Brandon Kelliher, Jason Scott, Riley Slezak, Todd Stull and Mike Teft.
Nay=0.
Abstain=0.
Absent=4: Amy Reynoldson, Cory Schmidt, Paul Vrbka, and Christa Yoakum.

4. Consider a motion to acknowledge Amanda Callaway to fill vacancy of Riley Slezak.

Chairperson Stull opened the floor for a motion to acknowledge Amanda Callaway to fill vacancy of Riley Slezak. Motion was made by Mary Ann Borgeson, seconded by Jason Scott to acknowledge Amanda Callaway to fill vacancy of Riley Slezak. Chairperson Stull opened the floor for discussion. Hearing none, the motion to acknowledge Amanda Callaway to fill vacancy of Riley Slezak passed with the following results:
Yay=7: Ann Anderson-Berry, Mary Ann Borgeson, Amy Holman, Brandon Kelliher, Jason Scott, Todd Stull and Mike Teft.
Nay=0.
Abstain=0.
Absent=4: Amy Reynoldson, Cory Schmidt, Paul Vrbka, and Christa Yoakum.

5. **Opioid Settlement Financial updates, John Meals, DHHS CFO.**

John Meals, DHHS CFO, presented to the committee on opioid settlement fund activities, expenses, and deposits. Summarizing the contents of the presentation, which is also attached at the end of the minutes, the state has a total of $35,514,370.00 across 5 funds. The fund number, name, and amounts are listed below as of September 22nd, 2026.

- **22501**, Nebraska Opioid Recovery Fund (parent), $28,475,652.00
- **22502**, Opioid Prevention & Treatment Fund (Regions), $19,213.00
- **22503**, Opioid Treatment Infrastructure Fund (DHHS), $4,691,775.00
- **22504**, Opioid Trust – NOAT II Fund, $1,233,821.00
- **22505**, Opioid Trust – ENDO Fund, $1,093,909.00

Fund number 22502 and 22503 are child funds of fund 22501, which acts as a parent and trust fund. Fund 22504 and 22505 are trust funds which contain monies which originate as chapter 11 bankruptcy allocation and must be kept separate due to their requirements and reporting.

The total amount of funds that has been deposited to Nebraska in SFY27, is $8,016,604.00.

Total amount SFY27 expenditures is $13,311,632.00. This would include parent fund/transfers/admin costs, Behavioral Health Region allocation, and Crisis Stabilization Subawards (Opioid Infrastructure Grants).

Annual mandatory transfers from the Opioid Recovery Trust Fund include the following items:

- $3,000,000.00: Opioid Prevention and Treatment Cash Fund –Behavioral Health Region allocation.
- $1,125,000.00: Training Division Cash Fund – Nebraska State Fire Marshall.
- $400,000.00: HHS Cash Fund – Overdose Fatality Review Team.
- $6,500,000.00: Probation Program Cash Fund – Nebraska Supreme Court/Adult Probation.

A question was asked about the interest that these accounts accumulate. John Meals explained that the money in the Opioid Prevention & Treatment Fund (Regions) is a result of the interest accumulated between the date of deposit and the disbursement to the regions. This money cannot be moved back into the parent fund until the legislature allows. These accounts will continue to gain interest and remain in the opioid settlement realm.

A question was asked on the local public health districts allocation of opioid settlement funds. DHHS does not have oversight of this amount of money as it goes straight from the legislature to the local public health districts. John Meals noted he would do some more research on these funds and present them at the next meeting.

6. **DHHS Division of Behavioral Health updates, Dr. Thomas Janousek, Director.**

Director of Behavioral Health, Dr. Thomas Janousek, provided updates to the committee related to opioid mitigation activities and programs.

The grantees who were awarded funds for their infrastructure/construction projects have begun their substance use treatment renovations. Some of these include crisis stabilization centers and residential treatment facilities. These projects are steadily progressing.

These facilities are being created in spaces which have not historically had opioid use disorder (OUD) or substance use disorder (SUD) treatment facility, which will have a big impact on addressing the crisis. Two crisis stabilization centers in Kimball and South Sioux City are on track to be up and running by the first quarter of next year. There were no new updates on the short-term residential project taking place at Centerpointe, but Patrick Kreifels was able to let the committee know they are still on track barring construction delays.

In relation to this development, the Rural Health Transformation Program (RHTP), which was distributed to states via HR.1 (The Big Beautiful Bill), is also being expended to work coinciding with the opioid settlement dollars.

The first round of RHTP grants were awarded to 13 entities totaling around 5.5 million across the state to support crisis stabilization and withdrawal services. These 15 grants are aimed at improving infrastructure and safety at these facilities. The second round of grants will open up in October of 2026.

In relation to opioid settlement dollars, the division is having conversations with the regions looking into mobile treatment programming for communities that do not have facilities to address substance or opioid dependency. The main barrier to this project is pharmacy regulations for dispensing. DBH is working with public health to see what steps need to be taken to tackle this barrier.

Patrick Kriefels from Region 5 Systems commented that they recently solicited technical assistance from the Opioid Response Network in regard to policy and legislative change that other states may have utilized for mobile treatment programming.

Dr. Todd Stull also commented that some other states have had mobile units for multiple years to reach populations that would benefit from opioid treatment therapy. While talking about access to treatment, Dr. Stull commented that the most robust treatment for people who have moderate to severe Opioid Use Disorder (OUD) is either Methadone or Buprenorphine.

7. **Presentation by Stage Cares**

Vice Chairperson Mary Ann Borgeson introduced Lee Ann Slaughterbeck and Rob Rayl from Stage Cares. Region 6 and National Association of Counties has met with Stage Cares

previously on tracking and reporting opioid settlement dollars. Lee Ann Slaughterbeck and Rob Rayl presented on the Stage Cares platform through a presentation and handouts. The summarizing handout is attached to the end of these meeting minutes.

The Stage Cares platform that was presented to the committee contained data from Nebraska opioid funds and elaborated on how their system keeps track of that data. Nebraska has a lot of good opioid settlement work happening across the state but that data lives in multiple different places. The platform allows all this data to live in one place that can easily be pulled for reporting purposes. Counties, regions and state are able to manage, track and monitor the progress of these programs and projects over time.

Stage Cares is a SAS based system that brings county, regional and state opioid abatement efforts together in one integrated solution, supporting consistent data collection, transparent reporting and sustainable results over time. Stage Cares is in alignment with Exhibit E so opioid settlement funds can be used to fund the platform.

Stage Cares helps communities address the opioid epidemic and invest for impact. Through the platform, communities can plan programs, track progress, monitor investments and communicate results. They have also recently partnered with Carahsoft which already has a state agreement with Nebraska that removes a lot of the procurement hurdles.

A question was asked as to whether Stage Cares operates within the opioid space only or if they have expanded. The current initial focus is in the opioid space, but they have goals to expand and become a public health platform. They are currently doing work in Georgia, Missouri and North Carolina.

A question was asked about the ability to exchange data with other platforms and how much it would cost to implement. Connectivity between platforms goes through API connections. Stage Cares would put together a package for the state in which it would allow any counties/regions that receive money to have their own login to the system to enter data and manage their monies. The State of Nebraska could purchase this platform for a little less than $300,000 a year with full care support and customization.

Vice Chairperson, Mary Ann Borgeson, commented that we all should be reporting in a unified manner with access to the same information at any given point in time. Mary also pointed out the many questions that the committee gets on where this money is going, how it's being spent and how we are keeping track of all of it.

A question was asked about how the system is built and how they are able to build in the data to be consistent given the variety of performance measures being tracked. Stage Cares offers measures for all their evidence-based programs in the system, but they also can add customized measures.

Members of DHHS Division of Behavioral Health commented that although this platform would be an upgrade to the current tracking system, it would need buy in from the regions and

entities who would be entering the data to justify the cost. Another barrier would be the amount of training required for all users to access and utilize the platform to its full capacity. Division of Behavioral Health would also need narrative information from all programs for their reporting in addition to the numbers. Stage Cares has an area to put in narrative information for each program/activity that can be customized to what the division is looking for. Stage Cares mentioned a full demo of the system could be beneficial at a later date.

8. **Consider a motion to form a subcommittee to explore the software that has been presented to the committee.**

   Chairperson Stull opened the floor for a motion to form a subcommittee to explore the software that has been presented to the committee. Motion was made by Mike Teft, seconded by Mary Ann Borgeson to form a subcommittee to explore the software that has been presented to the committee. Chairperson Stull opened the floor for discussion. Hearing none, the motion to form a subcommittee to explore the software that has been presented to the committee passed with the following results:
   Yay=7: Ann Anderson-Berry, Mary Ann Borgeson, Amy Holman, Jason Scott, Todd Stull and Mike Teft, Amanda Callaway.
   Nay=0.
   Abstain=0.
   Absent=5: Brandon Kelliher, Amy Reynoldson, Cory Schmidt, Paul Vrbka, and Christa Yoakum.

9. **Nebraska Regional Behavioral Health Authorities update.**

   It is noted that the six Regional Behavioral Health Authorities provided reports prior to the meeting. The reports will also be added to the meeting minutes below.

   Dr. Todd Stull asked the regions and DBH to provide information in future reports of any activities or decisions made under the suggestion or advice of the committee. Dr. Stull also asked that future reports from regions and DBH include how they are vetting the money they are allocated.

   Jason Scott, Captain of State Patrol Special Operations Division, asked regions to report in the future on what they are specifically doing in public safety sectors. Jason noted that any projects specific to law enforcement and first responders would be good to know to analyze what law enforcement needs to address and where areas need to partner more with law enforcement and first responders. It was noted that this information is not readily available to the committee and asked that the regional administrators meet to discuss how that information can be accessed and to share it with the committee. Mary Ann Borgeson noted how the platform of Stage Cares could be helpful to tackle this issue of information sharing.

   Regional Updates are provided below.

Region 1: The Regional Administrator, Holly Brandt, was not able to attend and therefore no regional update was given at the meeting.

Region 2: The Regional Administrator, Katie McCarthy, provided updates to the committee on Region 2's activities. The Region was appropriated $153,000 in July. The Region is preparing for another round of mini grant proposals. The Region funds a family and system navigator that does outreach and helps run different groups in the community. Recently they have done trainings on Narcan in the community. Separate from the Opioid Settlement Funds, Lutheran Family Services received RHTP funds to establish a crisis stabilization and detox center in their community.

Region 3: The Regional Administrator, Tiffany Gressley, provided updates to the committee on Region 3's activities. The Region received their allocation of $326,946 in July. The Region wrapped up their mini grant cycle at the end of August with 11 applications. They awarded a total of $417,663 to 7 different applicants. Tiffany touched on their vetting process for these applications and noted their rejection of an applicant that they recently pulled their contract with due to issues with the organization.

The Region has been making targeted efforts with the first responder and law enforcement communities from the advice of this committee.

Region 4: Regional Administrator, Ingrid Gansebom, provided updates to the committee. The Region received their allocation of $257,499 in July. They typically conduct their grant cycle in the fall and will start in October. There is a crisis stabilization unit with Heartland Counseling in South Sioux City going up in November with a goal of accepting patients in March. The Region works with their law enforcement and probation quite often and get continuous input from each of their county commissioners.

Region 5: The Regional Administrator, Patrick Kreifels, and Special Project manager, Theresa Henning, provided updates to the committee. The Region explained their steering committee and its efforts to help shape and guide how those funds are spent. The Region also reported on how they perform risk assessments for all individuals asking for funds. Patrick also outlined that the region receives multiple different funds and uses multiple funds to address public safety.

Theresa Henning, Special Project manager, presented the Region 5 Systems chart of Opioid Settlement Funds to the committee. This document can be found added below the meeting minutes and is comprehensive of all the money they have obligated since the start of opioid settlement. Theresa highlighted projects that have expanded treatment in their region. For all of their counties, they have implemented a pool of funds to address funding issues that pose barriers to individuals in accessing treatment or recovery for SUD or OUD that aren't addressed by other funding sources. This last year they were able to partner with DBH to utilize carryover dollars from State Opioid Response to help roughly 100 individuals.

In regard to public safety and law enforcement projects, Region 5 has funded DetectaChem Spectrometers that went to 5 different police departments.

Region 6: The Regional Administrator, Patti Jurjevich, was unable to attend and the opioid settlement manager, Tad Spencer, provided updates to the committee. The region contracts with Goldfinch Health that reported a 4% reduction in surgery-related opioid prescribing and a 3% readmission rate after surgery. Two initiates started July 1st in relation to building more peer support workers. The Region has developed a Housing Assistance Project that launched August 31st. This offers one-time assistance to eligible individuals up to $4,000 to assist in expenses such as application fees and security deposits. The Region was able to purchase around 1,100 boxes of Naloxone for partner organizations and distribute those in the community in July. The region is also exploring and researching post-overdose response teams that should help get individuals connected to support and into recovery.

10. Public Comments.

Joe LeDuc, member of the public, provided their appreciation in seeing the funds utilized for efforts to mitigate the opioid crisis and the committee's continued encouragement of accountability of funds.

11. Discussion of Meeting Dates for Calendar Year 2027.

Discussion of possible upcoming meeting dates in 2027 was held. It was determined that two meetings will occur in calendar year 2027, one virtually and another in-person. Since the funds are dispersed at the end of June, it was determined that one meeting should take place in the spring beforehand and one in the fall afterwords. Secretary Madisen Bell will send out a poll to voting members to establish meeting dates.

12. Consider a motion to adjourn.

It was noted that quorum was lost at 12:18pm. The meeting agenda having been completed Chairperson Dr. Todd Stull adjourned the meeting.

The meeting adjourned at 12:18 p.m.

Region 1 Opioid Settlement Funds Report

6/15/26

Funds appropriated to the agency: $877,399.84

Funds obligated: $810,413.37

Funds Expended: $403,923.32

Describe how the funds were distributed.

Region 1 developed a grant application and scoring metrics. Region 1's grant application went live on March 18, 2024. Applicants could apply for grant funding in the following four priority areas: Crisis Stabilization, Detox, Justice, and Restorative Justice. Region 1 received 8 applications requesting funding. The applications were reviewed by our Opioid Settlement committee, and 5 grant applications were recommended for funding. Grant award notifications were sent on June 27, 2024, to the following agencies: Mediation West $52,000.0 for Restorative Justice, Scotts Bluff County Detention Center $140,500.00 to purchase a drug/contraband scanner, Legal Aide $52,000.00 for Restorative Justice, Lutheran Family Services $20,650.37 for Law Enforcement training, and NJJA $11,083.24 to provide a one day training on opioid effects on mental health. In July of 2025, Region 1 received a grant application from NECPA to place Narcan lock boxes on college campuses in the Region 1 service area. This grant was reviewed by the Opioid Settlement committee and was approved. NECPA was awarded $24,225.00 to place Narcan lock boxes on Chadron State College campus and WNCC campus. The award also includes monies for education on how to administer NARCAN and prevention of opioid use. Region 1 has obligated $10,000.00 for scholarship opportunities for Law Enforcement Officers to apply to attend the RX Illicit Drug Training. This will be awarded annually in February.

Specify the effect of the funding on the organization, program, or activity and the results of the completed or ongoing activities, services, or strategies.

Lutheran Family Services: The purpose of this grant is to host CIT training for Region 1 Law Enforcement agencies. This training was held in FY26, and this grant has been completed.

Mediation West: The purpose of this grant is to expand adult victim-offender conferencing. Mediation West has been working on curriculum development and research of re-entry programs across the country. Protocols, dialog, interview guides, and Matrixes have been finalized. This grant is on-going with funds remaining.

Legal Aide of Nebraska: The purpose of this grant is to increase awareness among individuals affected by opioid use about their eligibility for pardons, set asides and record sealing. To facilitate clinics and assistance and screen individuals for eligibility for pardons, set asides or record sealing services through pro bono clean slate clinics or individual assistance. Legal Aide has provided 11

events to increase awareness, reaching 163 individuals. Legal Aide has held 4 clinics and screened 36 individuals for assistance. They have worked with 8 individual clients and had court hearings for set asides on 22 different convictions. This grant is on-going.

Nebraska Panhandle Counseling Center: Opioid Settlement Funds have been awarded to Nebraska Panhandle Counseling Center (NPCC) for equipment and furniture for the Crisis Stabilization Center in the amount of $400,000.00. Funding has also been awarded in the amount of $100,000.00 to NPCC to purchase a Mobile Crisis Unit to be used for Medicated Assisted Treatment for Opioid Use Disorder, Medication management, and Crisis Response in the Region 1 service area. The mobile unit has been purchased and is currently operational. Renovation of the Crisis Stabilization center is progressing, and an Executive Director has been hired, the anticipated opening date is January of 2027.

Region 1 provided scholarships to two Law Enforcement officers and two first responders to attend the RX & Illicit Drug Conference in April of 2026. Region 1 plans to offer scholarship opportunities annually for this conference.

Region II Human Services Opioid Settlement Funding Update

Region II Human Services continues to make significant progress in addressing opioid and substance use challenges across West Central Nebraska through strategic use of opioid settlement funds. Guided by a regional planning process initiated in 2023, Region II worked closely with community stakeholders, healthcare providers, local governments, law enforcement, and recovery organizations to identify service gaps and prioritize investments that would have the greatest impact on prevention, treatment, recovery, and community capacity.

One of the most significant outcomes of this effort was the creation of the Family/System Navigator position. This role serves as a key component of Region II's opioid response by providing education, support, and care coordination to individuals and families impacted by substance use disorders. The Navigator assists individuals in understanding treatment options, including Medication Assisted Treatment (MAT), connects them to recovery and crisis resources, and facilitates two on-going recovery support groups, a structured recovery wellness group and an open drop-in contingency management group. The support groups continue to be well attended. A new Family Recovery group is getting ready to begin. Throughout the year, these services have helped increase engagement in treatment and recovery, strengthen family support systems, and address gaps in community-based recovery resources.

In addition to direct support services, Region II continued to invest in regional infrastructure and community partnerships. Activities included participation in regional prevention and recovery events such as the Southwest Nebraska Opioid and Stimulant Summit and ongoing collaboration with healthcare providers, justice partners, and community organizations to improve access to services and strengthen coordination of care.

To further expand local capacity, Region II Human Services released a competitive Request for Proposals (RFP) in 2025 to distribute opioid settlement funds through community-based mini-grants. Following a review process, funding was awarded to five organizations whose projects aligned with nationally recognized opioid settlement abatement strategies.

Deborah's Legacy received funding to expand recovery support services for women in recovery, including housing, transportation, workforce development, and other wraparound supports designed to promote long-term stability and recovery. Their goals were to provide 8-10 women safe-haven housing with programming over the course of the 12-month period of time.

West Central District Health Department implemented the Neighbors Helping Neighbors: Rural Opioid Prevention Initiative, focusing on naloxone distribution, overdose response training, and expanding recovery resources to underserved populations. Progress during the year included increasing naloxone availability and training opportunities for community members and law enforcement agencies. Equipping law enforcement with naloxone ensures that individuals experiencing an overdose have a greater chance of receiving timely, lifesaving intervention.

Lutheran Family Services launched North Platte's first Harm Reduction Vending Machine project. The vending machine provides free access to naloxone, tobacco cessation supplies, hygiene products, first aid supplies, and other harm reduction resources. The machine was installed and introduced to the community through a public open house on May 21st, 20226.

University of Nebraska–Lincoln expanded overdose prevention and education efforts at Mid-Plains Community College and the Nebraska College of Technical Agriculture. Activities included health behavior

assessments, stigma reduction campaigns, educational outreach, and continued efforts to increase access to naloxone on college campuses. The 2026 Nebraska Assessment of Collegiate Health Behaviors (NACHB) was successfully fielded from February 24 to March 13 at the Nebraska College of Technical Agriculture (NCTA). Comparison briefs and full survey reports are anticipated for release in summer 2026. Progress toward expanding naloxone access continued, though several implementation barriers remain.

Digital outreach through lnstagram, TikTok, and Snapchat continued to dispel misconceptions about Narcan and normalize its presence as a standard safety tool. Phase 2-focused on action, engagement, and promoting on-campus resources-is now expected to begin between June and December 2026,

Community Connections continued and expanded substance use prevention programming focused on youth, families, and community awareness. Efforts included educational webinars, podcasts, community events, medication disposal initiatives, and increased distribution of Deterra medication disposal pouches. While staffing challenges limited expansion into some rural communities, prevention efforts within Lincoln County remained active and effective.

Remaining opioid settlement funds supported personnel costs associated with the Family/System Navigator position, consultation services, and a portion of the Clinical Director of Opioid Services role. Funding also supported recovery group activities and participant engagement efforts designed to encourage sustained recovery and community connection.

Region II has started a new Family Recovery Support Group for loved ones impacted by Substance Use. The group focuses on education, connection, and empowerment. We help participants understand substance use, learn healthy ways to support their loved ones, and build resilience in their own lives through emotional support and psychoeducation. Members explore topics like the science of addiction, communication skills, setting boundaries, navigating treatment options, and caring for their own well-being.

As part of Region II's overdose prevention efforts, the Family/System Navigator also provides annual training to community members on recognizing an opioid overdose and safely administering naloxone (Narcan), helping increase the number of individuals in the region who are prepared to respond to an overdose emergency.

Opioid settlement funding has enabled Region II Human Services to build sustainable infrastructure, strengthen partnerships, improve care coordination, and increase access to prevention, treatment, and recovery services throughout the region. Without these resources, many of the services, partnerships, and initiatives currently underway would not have been possible.

Looking ahead, Region II remains committed to addressing one of the Region's most significant identified needs, the development of withdrawal management and detoxification services. Lutheran Family Services continues to explore opportunities to develop a detoxification and/or crisis stabilization center in the region, and Region II Human Services remains an active partner in supporting those efforts. Lutheran Family Services was recently awarded funding from Nebraska's Rural Health Transformation Program for moving forward on this project.

Region II is in the stages preparing for another round of mini grants in our Region.

The following summary outlines the opioid settlement funds received by Region 3 Behavioral Health System ("Region 3"), highlighting our specific obligations and financial disbursements to local community programs.

1) Total opioid settlement funds received by Region 3 (to date) from Nebraska Department of Health and Human Services

Region 3 has received a total of $1,776,323.05 in opioid settlement funds to date.

 FY 23: July 2022 through June 2023

o Allocated $1,122,430.49

 FY 24: July 2023 through June 2024

o Allocation $0

 FY 25: July 2024 through June 2025

o Allocation $326,946.56

 FY 26: July 2025 through June 2026

o Allocation $326,946

 FY 27: July 2026 through June 2027

o Allocation $326,946

2) How Region 3 has allocated and used settlement funds

Region 3 has distributed opioid settlement funds through structured, competitive processes designed to ensure funds are allocated transparently, equitably, and in alignment with allowable opioid abatement uses. Region 3 has conducted three competitive grant cycles to date.

Grant Cycle 1

Application window: July 2024 – August 2024

Demand and awards (overview)

Region 3 received 11 applications requesting nearly $1.4 million.

 Following competitive review, Region 3 awarded $600,000 across ten projects:

o **Buffalo County Community Partners** — *Prevention & Recovery*

o **Central District Health Department** — *Prevention & Other*

o **Central Nebraska Council on Alcoholism & Addictions Inc.** — *Prevention*

o **Hastings Fire-Rescue** — *Other*

o **Loup Basin Health Department** — *Prevention*

o **Lutheran Family Services** — *Prevention*

o **Mid Plains Center**— *Prevention, Treatment & Recovery*

o **Physicians Laboratory P.C.** — *Other*

o **Revive Inc.** — *Treatment & Recovery*

o **Two Rivers Public Health Department** — *Prevention*

Grant Cycle 2

Application window: July 2025 – August 2025

Demand and awards (overview) Page **2** of **2**

Region 3 received 6 applications requesting $382,457.62.

 Following competitive review, Region 3 awarded $301,897.92 across five projects:

o **Billion Pill Pledge** — *Prevention & Other*

o **Buffalo County Community Partners** — *Prevention & Recovery*

o **Board of Regents of the University of Nebraska for the Nebraska Collegiate Prevention Alliance (NECPA)** *Prevention & Other*

o **Buffalo County Sheriff's Office** — *Treatment & Recovery*

o **Loup Basin Public Health Department** — *Prevention*

Grant Cycle 3

Application window: July 2026 –August 2026

Demand and awards (overview)

Region 3 received 11 applications requesting $552,223.93

 Following competitive review, Region 3 awarded $417,663.00 across seven projects:

o **Buffalo County Sheriff's Office** –Treatment & Other

o **Garfield County Sheriff's Office** –Prevention & Other

o **Goldfinch Health Billon Pill Pledge** –Prevention

o **Kearney Elks Lodge** –Prevention

o **LiveWell Counseling Center** –Prevention, Treatment, Recovery

o **Loup Basin Public Health Department** –Prevention

o **Nebraska Collegiate Prevention Alliance** –Prevention

Decision framework and fiscal controls

 Predictable annual timeline: Region 3 opens and awards grants on or after July 1 and intends to continue annual application periods. This timing supports compliance with state obligation requirements while allowing Region 3 to account for fiscal-year changes and maintain responsible budgeting practices.

 Targeted funding decisions: Due to limited resources and to maximize impact, Region 3 does not always fully fund proposals. Instead, Region 3 funds specific project components deemed most likely to produce significant and timely community benefit.

 Contract-based reimbursement model: Region 3 distributes funds through executed contracts with defined scopes, budgets, and documentation requirements, and reimbursement is made only after review of allowable expenses and supporting documentation (e.g., invoices, receipts, and proof of payment), as applicable.

Expenditures thru July 2026

 As of July 31, 2026, Region 3 has expended $957,314.64 in opioid settlement funds.

 As of July 31, 2026, the amount of obligated funds include:

o Remaining Amount of Grant Awards Obligated 2025/2026 grant cycle - $184.39

o Amount of Grant Awards Obligated 2026/2027 grant cycle - $417,847.39

Region 4 Opioid Settlement Update

Region 4 Behavioral Health System received its most recent Opioid Settlement funding allotment in July and is currently preparing for the next funding cycle. Historically, Region 4 has opened these funds to community partners through a competitive grant process beginning in October. This timeline allows Region 4 to assess emerging regional needs, review the progress and sustainability of previously funded initiatives, and remain mindful of potential changes to federal and state funding that could affect behavioral health services. By taking this measured approach, Region 4 can strategically direct Opioid Settlement dollars toward programs and services that have the greatest potential to remediate the harms caused by the opioid epidemic and address identified gaps across our 22-county region.

Region 5 Systems
Opioid Settlement Funds Obligated
As of July 2026

Agency	Description of Project	FY Funding Obligated	Start Date	End Date	Number of Years
Nebraska Pharmacists Association	Narcan Grab and Go Sites within all of Region 5 Systems' catchment area and pilot a harm reduction vending machine project in Lancaster county.	FY24	4/1/2024	3/31/2026	2 years
Partners for Insightful Evaluation	Region 5 Systems opioid needs assessment.	FY24	5/10/2024	5/9/2025	1 year
MyLink	Share in the annual cost of MyLink a free phone app providing access to resources from over 400 organizations within Region 5 Systems' catchment area.	FY25	7/1/2024	6/30/2025	1 year
Opioid Flex Funds	To provide flex funds to obtain the resources necessary to meet identified treatment/rehabilitation needs that can not be provided through other funding mechanisms or more	FY25	Ongoing	Ongoing	Ongoing
Lincoln Lancaster County Health Department	To assess, monitor, and evaluate substance exposure trends by analyzing wastewater surveillance samples from the City of Lincoln's wastewater treatment plants.	FY25	10/1/2024	9/30/2025	1 year
DetectaChem Spectrometers	A pilot project to work with five law enforcement agencies (Seward Police Department, Lincoln Police Department, Beatrice Police Department, Richardson County Sheriff's Office, and Nebraska City Police Department) to provide Apex R7	FY25	One-time (purchase)	One-time (purchase)	One-tim
MyLink	Share in the annual cost of MyLink a free phone app providing access to resources from over 400 organizations within Region 5 Systems' catchment area.	FY26	7/1/2025	6/30/2026	1 year

Region 5 Systems
Opioid Settlement Funds Obligated
As of July 2026

Opioid Flex Funds	To provide flex funds to obtain the resources necessary to meet identified	FY26	Ongoing	Ongoing	Ongoing	All 16 Counties	$125,000.00	A:1
DopaGE	To provide substance use and misuse education to undergraduate students at the University of Nebraska-Lincoln (UNL) to address the current opioid overdose crisis and educate on the	FY26	7/1/2025	11/30/2026	1 year	All Students	$84,590.00	F:1
Whispering Acres Trails and Treasures	Infrastructure funds to allow for construction of new indoor group space, mini kitchen, and restrooms. This will allow for private space for therapy sessions, new programing, services during inclement weather, and refreshments during events.	FY26	10/1/2025	9/30/2031	6 year	Gage, Jefferson, Thayer, Saline	$135,000.00	F:1
Nebraska Pharmacists Association	To distribute naloxone and other harm reduction items to unhoused and other low-income individuals who may or may not be utilizing health care services, such as pharmacies or clinics within the Lincoln area through targeted vending machines and provision of free naloxone throughout the catchment area of Region 5 Systems in strategically identified locations.	FY26	4/1/2026	3/31/2029	3 years	All 16 Counties	$208,117.50	C:1
MyLink	Share in the annual cost of MyLink a free phone app providing access to resources from over 400 organizations within Region 5 Systems' catchment area.	FY27	7/1/2026	6/30/2027	1 year	Statewide	$6,000.00	Exhibit E
Opioid Flex Funds	To provide flex funds to obtain the resources necessary to meet identified treatment/rehabilitation needs that can not be provided through other funding mechanisms or more traditional service provision modalities.	FY27	Ongoing	Ongoing	Ongoing	All 16 Counties	$50,000.00	A:1

Region 5 Systems
Opioid Settlement Funds Obligated
As of July 2026

Elevita	Creation of software to provide a public dashboard to show how opioid settlement funds have been spent and report program or strategy outcomes; manage grant submission and review process; manage outcome and invoice submission; and process flex fund applications.	FY27	5/18/2026	10/17/2029	3 years	All 16 Counties	$435,000.00	Exhibit E
GoldFinch	Implement the Billion Pill Pledge, an initiative to address opioid addiction and related harms caused by the overprescribing of opioids in surgical settings.	FY27	8/1/2026	7/31/2027	1 year	All 16 Counties	$198,156.00	F:2
Houses of Hope	To support capacity building to restore access to clinically supervised residential treatment for OUD and SUD for men. Funds will support recruitment and onboarding of clinical and direct care staff, accreditation, licensure requirements, and development of program infrastructure.	FY27	8/1/2026	7/31/2027	1 year	Lancaster	$137,500.00	A:1 E:3
Bonsai Health	Expand MAT/MOUD services, including mobile treatment and interventions, to individuals with OUD, including those who are incarcerated, on parole or probation, or participating in re-entry programs.	FY27	TBD	TBD		All 16 Counties	$700,000.00	A:1 A:3 E:3 G:1

Region 5 Systems
Opioid Settlement Funds Obligated
As of July 2026

Whispering Acres Trails and Treasures	To provide employees for Camp G.R.I.T, a camp designed to break the intergenerational cycle of addiction by providing targeted support and mentorship to youth ages 9-15 who have been affected by a substance use disorder of a family member.	FY25	7/1/2024	6/30/2025	1 year	Gage, Jefferson, Thayer, Saline	$9,559.32	F:1
Nebraska Pharmacists Association	To increase access to and education about Narcan among University of Nebraska-Lincoln students and vulnerable populations at or below the poverty level who participate in Project Connect.	FY25	7/1/2024	6/30/2025	1 year	Lancaster	$31,200.00	C:1
Jefferson Co. Diversion Services	To support youth and their families to prevent further involvement with the justice system and development of a substance use disorder.	FY25	7/1/2024	6/30/2025	1 year	Jefferson	$9,999.00	E:3 F:1
BayMark Health Services/Lincoln Treatment Center/BAART	To address gaps in the current behavioral healthcare systems by enhancing the availability and accessibility of evidence-based treatment options and support services for individuals struggling with Opioid Use Disorder (OUD).	FY25	7/1/2024	6/30/2026	2 years	All 16 Counties	$471,998.05	A:1 B:2
Physicians Laboratory	To increase data regarding overdose deaths within Region 5 Systems' catchment area by providing funding to counties for transportation services for completion of an autopsy on suspected overdose death cases.	FY25	7/1/2024	6/30/2027	3 years	All 16 Counties	$51,000.00	H:1
Jefferson Co. Diversion Services	To support youth and their families to prevent further involvement with the justice system and development of a substance use disorder.	FY26	1/1/2026	12/31/2027	2 years	Jefferson	$27,000.00	B:1 E:3 F:1
CenterPointe	To provide support to the Centered for Life Program, which expands access to a thriving recovery community for people who are seeking support regardless of whether or not they are engaged in formal behavioral health services.	FY26	1/1/2026	12/31/2026	1 year	Lancaster	$67,440.00	B:2 F:3

Region 5 Systems
Opioid Settlement Funds Obligated
As of July 2026

Fillmore County Hospital	Provide funding for national speaker Nathan Harmon to increase awareness regarding the effects of substance use and poor decision making in York and Fillmore counties.	FY26	1/1/2026	12/31/2026	1 year	Fillmore and York	$8,000.00	F:1 F:3
Four Corners Health Department	To improve access to healthcare services, provide coordinated care, and reduce the number of emergency room visits for uninsured and underinsured individuals with Substance Use Disorder (SUD) or Opioid Use Disorder (OUD) in York, Seward, Polk, and Butler counties.	FY26	1/1/2026	12/31/2026	1 year	York, Seward, Polk, and Butler	$181,938.60	A:1 G:1
Fresh Start	To support successful completion of transitional shelter programming, including progress toward individual goals and permanent housing, for individuals who experience a Substance Use Disorder (SUD) or Opioid Use Disorder (OUD).	FY26	1/1/2026	12/31/2026	1 year	Lancaster	$13,214.25	B:1 C:1
Houses of Hope	To enhance and expand outpatient substance use services for individuals involved in the criminal justice system by becoming a certified Matrix Treatment Provider.	FY26	1/1/2026	12/31/2027	2 years	Lancaster	$109,378.74	A:1 A:2 E:2 G:1
Lincoln Lancaster County Health Department	To assess, monitor, and evaluate substance exposure trends by analyzing wastewater surveillance samples from the City of Lincoln's wastewater treatment plants.	FY26	10/1/2025	9/30/2027	2 years	Lancaster	$50,000.00	F:3 H:1 H:4
Southeast Nebraska Community Action (SENCA) *(Richardson County House of Hope)*	To address homelessness for women recovering from Substance Use Disorder (SUD) or Opioid Use Disorder (OUD) by providing intermediate housing and programing to assist women in bridging to permanent housing in Richardson county.	FY26	1/1/2026	12/31/2027	2 years	Richardson	$50,000.00	A:1 B:1

Region 5 Systems
Opioid Settlement Funds Obligated
As of July 2026

Seward Co Detention Center	Reentry support and rehabilitation services for individuals experiencing an Opioid Use Disorder (OUD) in Seward County Detention Center.	FY26	1/1/2026	12/31/2026	1 year	Seward	$8,000.00	A:1 B:1 E:2 G:1 H:4
Whispering Acres Trails and Treasures	To provide employees for Camp G.R.I.T, a camp designed to break the intergenerational cycle of addiction by providing targeted support and mentorship to youth ages 9-15 who have been affected by a substance use disorder of a family member.	FY26	1/1/2026	12/31/2026	1 year	Gage, Jefferson, Thayer, and Saline	$9,775.22	B:1 F:1 F:3
Asian Center	Creation of multimedia opioid abuse prevention campaign for immigrants and refugees in Lincoln, NE.	FY26	1/1/2026	12/31/2026	1 year	Lancaster	$17,215.85	F:3
Blue Valley Behavioral Health	To provide Spanish interpretation services for substance abuse evaluation, treatment, and an online addictions education course and provide access to a online addictions education course for adults and youth who have been charged with their first offense of alcohol or drug related crimes.	FY26	1/1/2026	12/31/2027	2 years	Saline	$57,279.20	A:1 B:3 E:3
TOTAL AMOUNT OBLIGATED							**$3,837,936.73**	

Green= Obvious Expenditure
Blue= Grant Cycle 1
Orange= Grant Cycle 2

Region 5 Systems Priority Opioid Abatement Strategies

March 2025

Direct Care for Substance Use Disorder / Mental Health Conditions

A: TREATMENT
1. Expand availability of and access to treatment and continuum of care for those that are uninsured/ underinsured and experiencing Opioid Use Disorder (OUD) and any other co-occurring Substance Use Disorder (SUD)/Mental Health (MH) conditions. Focus on targeting high impact, low-capacity rural areas and adolescent treatment services.
2. Support workforce development for addiction professionals to include training, scholarships, fellowship, incentives, and support for those providing direct care addressing OUD and other SUD/ MH conditions. Target rural and underserved areas.
3. Expand mobile interventions, treatment, and recovery services for persons with OUD and other SUD/ MH conditions who have experienced an overdose. *Expanding MAT/MOUD and mobile interventions.*

B: RECOVERY
1. Provide full continuum of care (comprehensive wraparound services) for adults and adolescents, to include but not limited to, housing, peer support services, transportation, education, job training/ placement, childcare and connection to culturally appropriate community-based services. *Continuum of Care Support.*
2. Support or Expand Peer Recovery Services which may include but are not limited to: support groups, social events, computer access, yoga, etc.
3. Expand the recovery eco-system while targeting recovery resources to high impact, low-capacity geographical areas (rural).

C: HARM REDUCTION
1. Targeted Naloxone/Narcan distribution - increase availability and distribution.
2. Support Mobile Units that offer or provide referrals to harm reduction services, treatment, recovery supports, healthcare or other appropriate services. *Support mobile units with referrals to care.*
3. Expand social setting detoxification services.

D: CONNECTIONS TO CARE
1. Provide training/support for emergency room and hospital personnel treating overdose patients on post discharge planning, including community referrals to MAT/MOUD, recovery case management or peer support.
2. Provide funding for peer support specialists and warm handoffs in emergency detox facilities, recovery centers or recovery housing.
3. Support crisis stabilization centers that serve as an alternative to hospital emergency departments. *Support Crisis Stabilization and increase Peer Support.*

E: CRIMINAL JUSTICE INVOLVED
1. Implement training and standardized SUD/MH screening, treatment, care coordination, and continuity services into the criminal justice system.
2. Provide treatment, including MAT/MOUD, recovery support, and harm reduction to those who are leaving jail, prison, or are on probation/parole, are under community corrections or are in re-entry programs. *Provide harm reduction, treatment and recovery support to criminal justice involved.*
3. Support pre-arrest diversion, pre-trial services, treatment and recovery court and provide treatment (including MAT/MOUD) for persons with SUD/MH conditions.

Community Outreach and Prevention

F: PREVENTION
1. Support greater access to mental health services and supports for young people, including services and supports provided by school nurses, behavioral health workers or other school staff, to address mental health needs in young people that (when not properly addressed) increase the risk of opioid or other drug misuse. *Increase access to prevention programs for youth.*
2. Prevent over-prescribing and ensure appropriate prescribing and dispensing of opioids by: providing medical provider education and outreach regarding best prescribing practices, dosing and tapering patients off opioids and supporting non-opioid pain management alternatives.
3. Support stigma reduction efforts regarding treatment and support for persons with OUD, including reducing the stigma on effective treatment. *Expand public awareness.*

G: PROVIDERS AND HEALTH SYSTEMS
1. Increase the number of providers treating MAT/MOUD patients; increase access to MOUD treatment through training and education. *Increase number of providers offering MAT/MOUD.*
2. Provide support for Children Services, additional positions and services, including supportive housing and other residential services, relating to children being removed from the home and/or placed in foster care due to custodial substance use.
3. Support the work of Emergency Medical Systems, including peer support specialists to connect individuals to treatment or other appropriate services following an overdose or other SUD adverse event.

H: PUBLIC SAFETY / FIRST RESPONDERS
1. Increase capacity of law enforcement and first responders to effectively respond to individuals with SUD/MH conditions.
2. Provide wellness and support services for first responders and others who experience secondary trauma associated with opioid related emergency events.
3. Expand mental health and drug courts.
4. *Enhance public safety collaborations.*

Region 6 Behavioral Healthcare

Opioid Settlement Updates, September 2026

Contracted Provider Highlights

- **Bonsai Health:** We have successfully transitioned Bonsai off the initial settlement funding into our Network of providers. This helps build sustainability in the provision of MOUD. Though their patient load on opioid settlement funds would vary month-to-month, at the peak, 37 unique patients received 671 daily doses in one month. In addition, over 14 months they initiated 30 inmates on MOUD, and they dispensed 1,123 units of Narcan.
- **Goldfinch Health:** Since starting in April 2025, Goldfinch has seen a 41% reduction in surgery-related opioid prescribing. They also report a 3% readmission rate after surgery, where the national benchmark is 14.6%.
- **NE Collegiate Prevention Alliance:** The program is working on getting Good Samaritan policies implemented and Narcan boxes installed at eight campuses in the region. The first campus (NE Methodist) has been successful with high interest and utilization of the boxes.
- **Three Rivers Public Health Department:** In the past year, the health department's prevention project has distributed 366 boxes of Narcan and engaged 1,159 people in conversations about opioid prevention and use of Narcan. Their social media posts related to opioid prevention have received 12,542 views.
- **UNO Grace Abbott School of Social Work:** The first cohort of students finished condensed LDAC coursework this summer. Twelve students enrolled, and 11 finished. The program also assists students with internship placement. Outcomes for the students are being processed right now.
- **Different Approach Sober Living** and **Behavioral Health Education Center of Nebraska (BHECN):** Both organizations began their projects July 1st.

Other Project Updates

- **Housing Assistance:** On International Overdose Awareness Day (August 31), we launched our Opioid Use Disorder Housing Assistance Program. This offers one-time assistance to eligible individuals in Region 6, up to $4,000 per person (paid directly to services). The funds help with rental application fees, security deposits, rental insurance, up to two months of rental assistance, past-due rent, utility deposits, up to two months of eligible utility assistance, and past-due utility

payments. We can assist up to 200 individuals ($800,000).

- **Naloxone Availability:** At the beginning of July, we ordered 1,092 units of Narcan for providers and partner organizations.
- **Assessment:** In August we released an RFP for a thorough assessment and gap analysis to better identify what remaining needs are present in the Region 6 area. At the time of this writing, three proposals are under review. We anticipate a mid-October start date.
- **Other Projects:** We are currently researching the feasibility of implementing post-overdose response teams, peer support specialists in MOUD facilities, and additional ways to support MOUD for individuals. Updates will be provided if these move forward.

OPIOID SETTLEMENT FUNDS

STATUS & ACTIVITY

Balances, expenditures, regional distribution, and deposits as of September 22, 2026

Nebraska Opioid Recovery Program

Fund Balances

As of September 22, 2026

Fund #	Fund Name	Balance
22501	**Nebraska Opioid Recovery Fund (Parent)**	**$28,475,652**
22502	Opioid Prevention & Treatment Fund (Regions)	$19,213
22503	Opioid Treatment Infrastructure Fund (DHHS)	$4,691,775
22504	Opioid Trust – NOAT II Fund	$1,233,821
22505	Opioid Trust – ENDO Fund	$1,093,909

TOTAL FUNDS

$35,514,370

across 5 funds

Settlement Deposits

FY2027

Deposit Date	Description	Amount
7/27/2026	Nat'l Opioid Settlement (Teva)	$1,102,821
7/27/2026	Nat'l Opioid Settlement (Allergan)	$1,115,290
7/27/2026	Nat'l Opioid Settlement (Cvs)	$1,971,592
7/27/2026	Nat'l Opioid Settlement Fund	$3,826,901

FY2027 Deposits (to date)

$8,016,604

4 deposits

FY 2026 Total Deposits

$13.7M

10 deposits

State Fiscal Year 2027 Expenditures

Fund #	Utilization	Expenditures
22501	Parent Fund / Transfers / Admin	$12,880
22502	Regions	$3,000,000
22503	Crisis Stabilization Subawards	$2,273,752
22504	*NOAT II*	$0
22505	*ENDO*	$0
Various	Annual Mandatory Transfers	$8,025,000
	Total Expenditures	**$13,311,632**

TOTAL SPENT

$13,311,632

Annual Mandatory Transfers

LB1355 (2024) • LB1072 (2026)

Nebraska Opioid Recovery Trust Fund • Effective July 1 each year

$3,000,000

LB1355

Opioid Prevention & Treatment Cash Fund

Annual transfer to 6 Regional Behavioral Health Authorities for opioid prevention and remediation programs statewide.

6 Regions

$1,125,000

LB1355

Training Division Cash Fund

Nebraska State Fire Marshal — connects first responders to behavioral health services; statewide wellness learning plan with anonymous assessments and resiliency development.

State Fire Marshal

$400,000

LB1355

HHS Cash Fund

Staff to carry out the Overdose Fatality Review Teams Act — tracking overdose data to guide evidence-based spending decisions.

DHHS

$6,500,000

LB1072

Probation Program Cash Fund

Nebraska Supreme Court / Adult Probation — problem-solving courts addressing substance abuse, mental health, and domestic violence. FY2026 & FY2027.

Problem-Solving Courts

TOTAL ANNUAL TRANSFERS: **$11,025,000 per year from the Nebraska Opioid Recovery Trust Fund**

Regional Breakdown

Transferred July 16, 2026

$3,000,000

Total Distributed to Regions

Region	Amount Received	Share
Region 1	$164,280	5.5%
Region 2	$153,360	5.1%
Region 3	$326,946	10.9%
Region 4	$257,499	8.6%
Region 5	$772,263	25.7%
Region 6	$1,325,652	44.2%
Total	**$3,000,000**	**100%**

Legislatively determined distribution (LB1355 2024)

Fund 22503 — Opioid Treatment Infrastructure Fund

Subrecipient Payments (Object 594100)

As of September 22, 2026

$5,504,733	$10,571,263	$5,066,530	5
Total Paid to Date	Infrastructure Requested	Remaining to be Paid	# Subrecipients

Subrecipient	Paid to date	Infrastructure Funds Requested	Remaining Balance	% Paid
Arch – Alcoholics Resocialization Center	$228,874	$276,172	$47,298	82.9%
Centerpointe Inc.	$825,593	$2,000,000	$1,174,407	41.3%
Central Wyoming Counseling Center	$1,392,234	$3,475,726	$2,083,492	40%
Heartland Counseling Services	$3,051,587	$4,468,134	$1,416,547	68.3%
Bryan Medical Center	$6,445	$351,231	$344,786	1.8%
TOTAL	**$5,504,733**	**$10,571,263**	**$5,066,530**	**52.1%**

Obj 594100 — Subrecipient SEFA

Summary

Total Fund Balances: $35,514,370 across 5 funds

Year-to-Date Expenditures: $13,311,632 spent fiscal year 2027 to date

Regions Funded: $3,000,000 distributed across 6 regions (July 2026 – Fund 22502)

Crisis Stabilization: $2,273,752 in subawards (Fund 22503)

Administrative: $12,880

Mandatory Transfers: $8,025,000

Total Deposits Received: 10 deposits totaling ~$8M

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Stage CARES brings county, regional, and state opioid abatement efforts together in one integrated solution, supporting consistent data collection, transparent reporting, and sustainable results over time.

STATEWIDE VISIBILITY / ONE INTEGRATED SOLUTION

CONSISTENT

CONNECT COUNTY, REGIONAL, AND STATE INVESTMENTS.

Create a consistent framework for collecting and organizing opioid abatement data across Nebraska, helping counties, regions, and the state work from one connected view.

COMPLIANT

SUPPORT EXHIBIT E ALIGNMENT AND TRANSPARENCY.

Maintain organized information on programs, investments, and outcomes to support Exhibit E requirements and strengthen transparency across Nebraska.

CONTINUOUS

SUSTAIN PROGRESS YEAR OVER YEAR.

People and leadership may change, but plans, program history, measures, and results can remain connected over time, supporting continuity and long-term impact.

CONNECTED DATA. TIMELY STATEWIDE REPORTING.

When county and regional data are collected in different formats, reporting takes time. Stage CARES brings opioid abatement information together in one platform for a more comprehensive, timely view.

Quickly see investments, programs, progress, and outcomes to support annual reporting and informed decisions.

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