

Federal Opioid Funding  
State of South Dakota

# Annual Report

2023

*Jointly prepared by the  
Departments of Health and Social Services*



On behalf of the Department of Health (DOH) and Department of Social Services (DSS), please find the enclosed report outlining Opioid Federal Funding for federal fiscal years 2022 through 2024. The report lists accomplishments, planned activities, and key outcomes associated with funds managed by our Departments in support of four shared strategies impacting opioid misuse and abuse in South Dakota:

1. **Prevention and Early Identification**
2. **Treatment and Recovery**
3. **Reducing Illicit Supply**
4. **Response to Opioid Misuse or Abuse**

Together, the Departments:

- ▶ **use data to inform** our decisions, our messaging, our community response, and our program development.
- ▶ build capacity for numerous **evidence-based practices** in medicine, behavioral health, and prevention.
- ▶ **address polysubstance abuse**, particularly stimulant use disorder, where appropriate and applicable.
- ▶ work to **reflect the cultural and geographical diversity of our state** in all materials and messaging.

The systems built and continued through federal opioid funding since 2016 have significantly changed the landscape of opioid treatment and recovery supports available to South Dakotans. The preceding year has brought forth many accomplishments we are excited to share with you.

To date, **1,200 individual lives have been saved** through the availability of naloxone among first responders. Treatment and recovery systems supported through federal opioid funding have benefited more than 4,300 individuals in South Dakota through evidence-based treatments and supports provided to individuals who had limited means to pay for these life-saving measures. A small sampling of their stories of personal impact are featured throughout this report.

As recently as 2019, there were few recovery home options available that were accepting of individuals being treated for opioid use disorder with medications. As of September 2023, there are now 19 homes in five different South Dakota communities, each providing safe, supported housing for more than 750 individuals as they navigate their personal recovery.

Opioid Settlement Funding has provided new opportunities for expansion of these efforts. With the launch of the Opioid Settlement Community Grant Program and developing Overdose Follow-Up Program efforts, our teams continue to seek and support ways for communities across our state to best meet their local prevention, treatment, and recovery support needs.

No two South Dakota communities are the same. Our efforts continue to use methods that empower each community to provide its own unique response, connecting local treatment resources and recovery supports with local residents. Additional supporting efforts with emergency departments, first responders, and others continue through training and education. Expanded access to safe medication storage and disposal options continue, and our team promotes awareness of these free resources to all South Dakotans.

Our future program activities will continue to remain rooted in our shared strategies, and we commit to continued collaboration to ensure services and supports along the full continuum of care are available statewide in support of long-term recovery and lives saved.

Sincerely,

Melissa Magstadt  
Secretary of Health

Matt Althoff  
Secretary of Social Services



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# ACRONYMS AND ABBREVIATIONS



CDC	Centers for Disease Control and Prevention, U.S. Department of Health & Human Services
DATA	Drug Addiction Treatment Act of 2000
DEA	Drug Enforcement Administration
DDPI	Prescription Drug Overdose: Data Driven Prevention Initiative
DOH	South Dakota Department of Health
DOJ	U.S. Department of Justice
DSS	South Dakota Department of Social Services
EMS	Emergency Medical Services
FFY	Federal Fiscal Year
HIE	Health Information Exchange
MOUD	Medications for Opioid Use Disorder
NARCAN	NARCAN® (naloxone HCl)
OD2A	Overdose Data to Action Grant
OEND	Overdose Education and Naloxone Distribution
ODU	Opioid Use Disorder
PDMP	Prescription Drug Monitoring Program
SAMHSA	Substance Abuse and Mental Health Services Administration, U.S. Department of Health & Human Services
SDAHO	South Dakota Association of Healthcare Organizations
SDSMA	South Dakota State Medical Association
SOR	State Opioid Response Grants
STR	State Targeted Response to the Opioid Crisis Grant
SUD	Substance Use Disorder



# BACKGROUND

In 2016, South Dakota Department of Health (DOH) was awarded the Prescription Drug Overdose: Driven Prevention Initiative (DDPI) planning grant from the Centers for Disease Control and Prevention (CDC) to support and build efforts to track and understand the full impact of opioid use and abuse in the state. The purpose of the grant was to: a) conduct a needs assessment; b) complete a strategic plan that responds to those needs and strengthens South Dakota's capacity to prevent misuse or abuse of opioids; and c) develop a strategy to enhance and integrate current surveillance efforts for more accurate and timely data. An Opioid Abuse Advisory Committee was formed to oversee this work. In October 2021, the committee was restructured and expanded from 13 members to 17 members. In July 2022, pursuant to the terms of the National Settlement Agreement, the committee was expanded to 22 members (Appendix A).

When South Dakota Department of Social Services (DSS) had the opportunity to apply for federal funds, the decision was made to combine efforts. In May 2017, DSS was awarded the State Targeted Response to the Opioid Crisis Grant (STR) from the Substance Abuse and Mental Health Services Administration (SAMHSA); additional grant funding continues through the State Opioid Response Grants (SOR), also issued by SAMHSA. Federal funding priorities focus on increasing access to treatment, reducing unmet treatment needs, and reducing opioid overdose-related deaths through the provision of prevention, treatment, and recovery activities for Opioid Use Disorder (OUD) including prescription opioids as well as illicit drugs such as heroin. SOR funding may be used to address stimulant use disorder in addition to OUD.

In 2019, DOH was awarded the Overdose Data to Action (OD2A) grant from CDC. The purpose of the grant is to support the collection of high-quality, complete, and timely data on opioid and all drug overdoses, and to use that data to inform prevention and response efforts to reduce opioid overdose deaths through partnerships with communities and other state partners.

DOH and DSS have each applied for and successfully received additional federal opioid funds since the initiation of these efforts in 2016, allowing for continued service delivery, strategic focus on informed initiatives, and expansion of key programs supported by the work.



# OPIOID SETTLEMENT FUNDS

## OVERVIEW & SUMMARY OF CALENDAR YEAR 2022 DISBURSEMENTS

South Dakota will receive approximately \$54 million over the next 18 years (beginning 2022) from the National Settlement Agreement involving Johnson & Johnson, AmerisourceBergen, Cardinal Health, McKesson, and a Bankruptcy Resolution concerning Purdue Pharma, L.P. During the 2022 Legislative Session, HB 1038 directed the Department of Social Services to distribute these funds to address opioid abuse and misuse within the State. Codified in SDCL 34-20B-116, **70% (Statewide Share)** will be appropriated to the State and **30% (Localized Share)** will be disbursed directly to Participating Local Governments. Eligible Local Governments include all South Dakota counties, and cities and towns with populations over 10,000 (based on the U.S. Census Bureau's Vintage 2019 population totals pursuant to the National Settlement Agreement).

The Memorandum of Agreement (MOA) based on the National Settlement Agreement provisions, was fully executed November 2022 after receiving all Participating Local Governments' signatures. Appendix B features a list of participating and non-participating cities and counties. The first-year payment was received December 2022 by the State and Participating Local Governments. Per the MOA:

- By January 31 of each calendar year, each Participating Local Government shall certify to the Opioid Abuse Advisory Committee that all opioid funds expended during the preceding calendar year were used in accordance with the MOA on projects, programs, and strategies that constitute Approved Uses.
- By December 31 of each calendar year, the State shall publish in a report online detailing for the preceding fiscal year: (1) the amount of the Statewide Share received; (2) the amount of the Statewide Share expended and a description for each program of activity receiving funds; and (3) the amount of any grants awarded—listing the recipients, amounts awarded, amounts disbursed, disbursement terms, and programs, strategies, and projects funded. This expenditure information will be included in the 2024 Annual Opioid Report.

National settlement documents, information, and updates are available at <https://nationalopioidsettlement.com/>.

### Statewide Share

Per the Janssen Settlement Agreement, an advisory committee is required to establish oversight and reporting requirements, and address default provisions and other matters related to the Statewide Share. The State of South Dakota utilizes the existing Opioid Abuse Advisory Committee with the addition of six local representatives. In January 2023, the following was approved by the Committee for opioid funds received December 2022 in the amount of \$1,223,024.

Strategy & 2022 Allocation	Program Purpose
<b>Prescription Drug Monitoring Program</b> \$174,870	Provide critical supports for prescribers in monitoring patient opioid access and provide accountability for prescribing practices
<b>Overdose Follow-Up Program</b> \$305,756	Request for Proposal process was used to solicit direct service providers for a pilot demonstration of innovative approaches; final selection of proposals is pending at the time of this report. Work is anticipated to begin January 2024.
<b>Community Grant Program</b> \$350,472	Make funding available to South Dakota-based organizations for targeted efforts that abate the opioid crisis at the local level. Applications will be accepted and reviewed biannually, and resulting grant contracts will be in alignment with the state fiscal year. The option for continuing budget requests into the next state fiscal year is available. More information is available at <a href="https://dss.sd.gov/behavioralhealth/grantinfo.aspx">https://dss.sd.gov/behavioralhealth/grantinfo.aspx</a> under the Opioid Settlement Fund Community Grant Program.
<b>Program Sustainability Fund</b> \$391,926	Allow for continuation of key strategies in all areas of prevention, recovery, and treatment should federal funding end or lapse.

### Localized Share

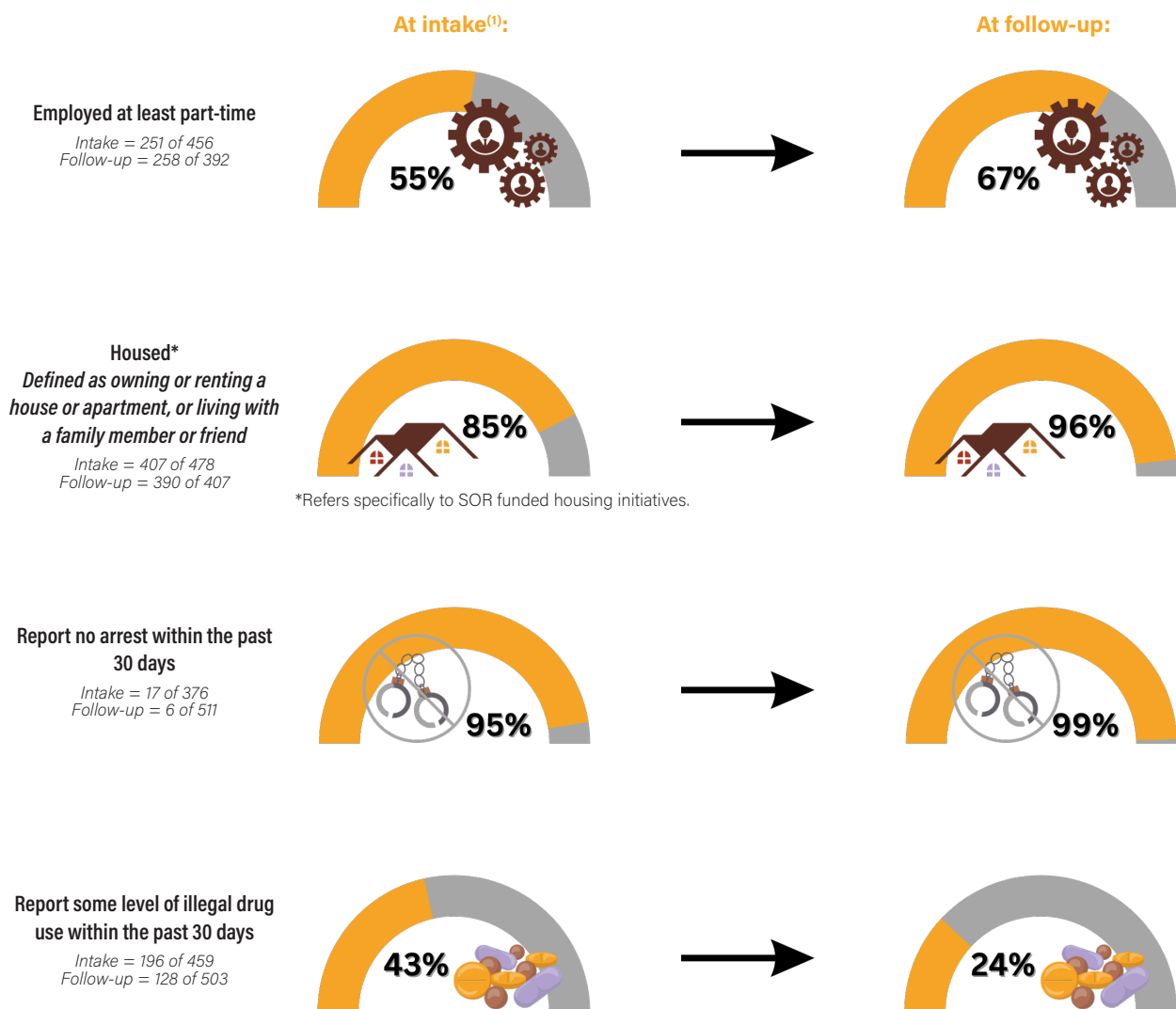
In December 2022, Participating Local Governments received funds collectively in the amount of \$496,902.

Appendix C features the 2022 Report of Participating Local Governments. For more information, you may find the point of contact for each Participating Local Government at <https://dss.sd.gov/behavioralhealth/grantinfo.aspx>.

# IMPACT & OUTCOMES

## WHO ARE WE SERVING?

Federal opioid funding has been utilized to provide cost assistance as a payer of last resort for South Dakotans experiencing opioid or stimulant use disorder-related diagnoses through both treatment and recovery support services. Client outcome data is collected through administration of the Center for Substance Abuse Treatment Government Performance and Results Act (GPRA) Client Outcome Measures for Discretionary Programs Tool. The tool collects information on client's abstinence, employment/education status, criminal justice involvement, social connectedness, health/behavioral/social consequences, and housing stability. The tool is administered through an interview between provider and patient at the point of intake (start of services), at follow-up (six months later), and again at discharge from services.



<sup>(1)</sup> Reflects client level outcome data associated with individuals receiving State Opioid Response-funded treatment cost assistance between the period of October 2021 and February 2023 who responded to the interview questions. Individuals who refused the questionnaire or did not answer the question were not included in this analysis.

## WHAT ARE THE IMPACTS?

### Lives Saved

**1,200 individuals had an improved condition<sup>(2)</sup> following administration of naloxone upon suspected overdose.**

Overdose reversal is assessed through data provided by the Department of Health's electronic medical record system utilized by licensed emergency management service units across South Dakota. Data is entered by the responding service unit, often in partnership with other first-responding agencies who may have administered naloxone prior to EMS arrival.

### Expanded Access

Our rural and frontier geography creates challenges in providing sustainable treatment and recovery services. Prior to State Targeted Response and later State Opioid Response funding, Medications for Opioid Use Disorder (MOUD) was not prevalent across South Dakota. The Division of Behavioral Health within DSS contracts with providers that expand access to MOUD through office-based and telemedicine-based care statewide. Funds were initially utilized to build capacity for this service and now are primarily used to support treatment cost assistance on a fee-for-service basis for individuals without another payer.

**The number of providers prescribing Medications for Opioid Use Disorder in South Dakota has increased by more than 600% since 2017<sup>(3)</sup>.**

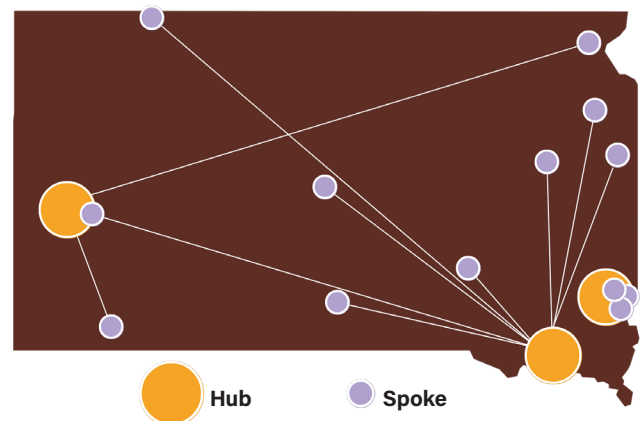
Known prescribers of buprenorphine as of February 2017: 15  
Known prescribers of buprenorphine as of September 2023: 108

The Consolidated Appropriations Act of 2023 extended the ability to prescribe buprenorphine for the treatment of OUD to all practitioners with DEA Schedules II-V on their DEA Registration. This list is not inclusive of all practitioners able to prescribe buprenorphine.

Access to MOUD in South Dakota is aided by the expansion of the "Hub and Spoke" model, which provides clients seeking care for OUD with an individualized assessment and initiation of treatment at a "Hub" location specializing in addiction treatment. Referrals are then made to community-based "spokes" for ongoing treatment to meet patient-specific needs including evaluation and treatment of mental disorders and other general medical conditions.

**Each month, an average of 450 individuals are provided treatment or recovery support cost assistance for services related to their opioid or stimulant use disorder.**

These individuals are not covered by commercial or public insurance programs and use this program as a payer of last resort.



### Supported Housing

**19 MOUD-friendly recovery homes are available across five South Dakota communities.**

Just three years ago, there were very few recovery home options available that were accepting of individuals being treated for opioid use disorder with medications. Today, there are 19 homes in five different South Dakota communities, each providing safe, supported housing for more than 750 individuals to date as they navigate their personal recovery.

<sup>(2)</sup> Reported by EMS units statewide between December 2017 through September 2023.

<sup>(3)</sup> Reported by SAMHSA's Buprenorphine Practitioner Locator, reflecting practitioners who previously held a 2000 waiver to prescribe buprenorphine for the treatment of OUD.



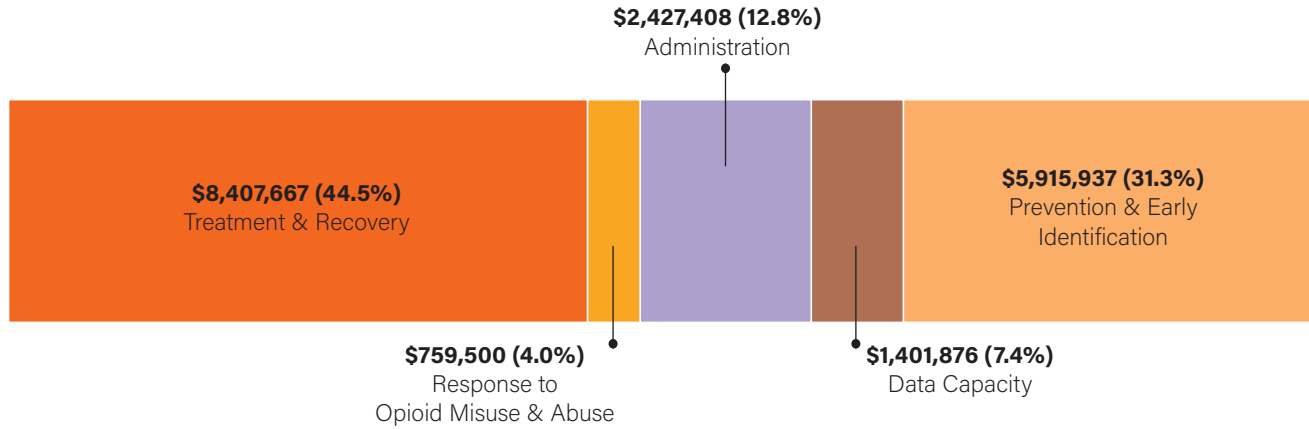
# FEDERAL FUNDING OVERVIEW

The following federal funding sources have been leveraged to support the South Dakota Opioid Abuse Strategic Plan and are referenced throughout this report.

<b>SAMHSA SOR II</b>	<b>Substance Abuse and Mental Health Services Administration State Opioid Response (SOR II) Grant</b>  Award: \$4,001,239 per year Duration: 3 years Funding End Date: September 29, 2023 Federal Fiscal Years: FFY21 - FFY23 Lead Agency: DSS	<b>SAMHSA SOR III</b>	<b>Substance Abuse and Mental Health Services Administration State Opioid Response (SOR III) Grant</b>  Award: \$4,000,000 per year Duration: 2 years Funding End Date: September 29, 2024 Federal Fiscal Years: FFY22 - FFY23 Lead Agency: DSS
<b>CDC OD2A</b>	<b>Centers for Disease Control and Prevention Overdose Data to Action</b>  Award: \$2,622,603 each of Years 1-3; \$2,422,603 in Year 4 Duration: 4 years Funding End Date: August 31, 2023 Federal Fiscal Years: FFY20 - FFY23 Lead Agency: DOH	<b>CDC OD2A-S</b>	<b>Centers for Disease Control and Prevention Overdose Data to Action in States</b>  Award: \$1,865,943 in Year 1 Duration: 5 Years Funding end date: August 31, 2028 Federal Fiscal Years: FFY24 - FFY28 Lead Agency: DOH

# FEDERAL FISCAL YEAR 2022-2024 OPIOID FUNDING

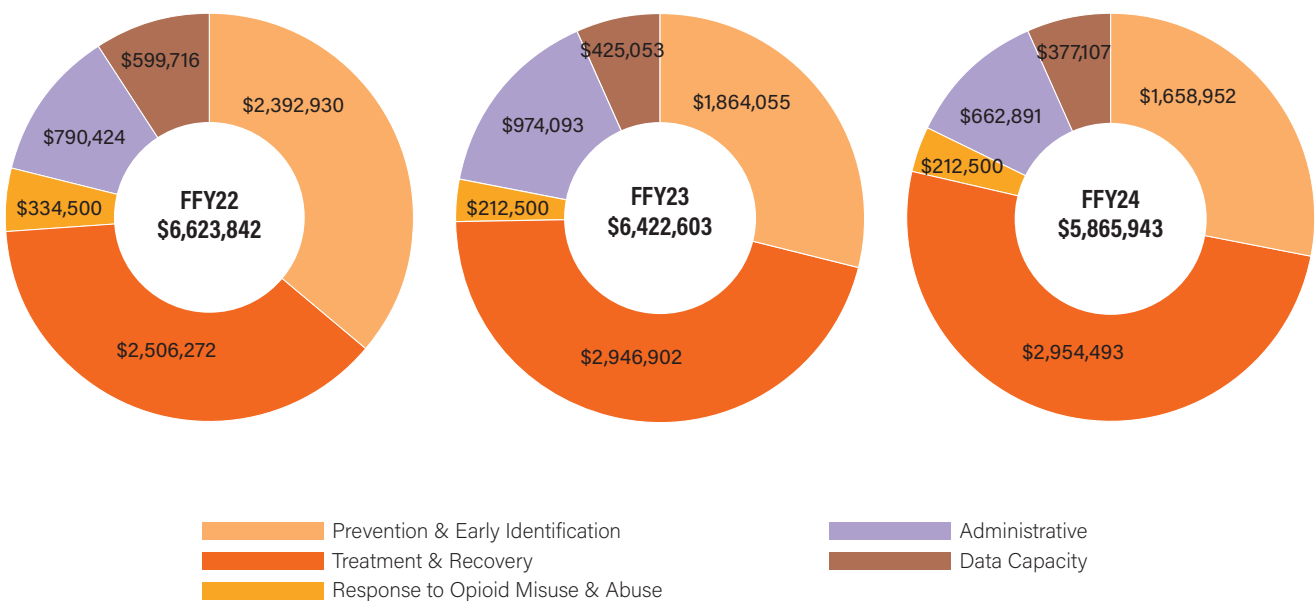
TOTAL IMPACT: \$18,912,388



## BUDGET BREAKDOWN BY FEDERAL FISCAL YEAR

These graphs reflect federal dollars budgeted for each goal area within the South Dakota Opioid Abuse Strategic Plan, as well as funding to support data capacity efforts and grant administration.

Opioid Funding by Federal Fiscal Year (FFY)



# SOUTH DAKOTA OPIOID ABUSE STRATEGIC PLAN

## GOALS & STRATEGIES

Prevention and Early Identification	Treatment and Recovery	Reducing Illicit Supply	Response to Opioid Misuse and Abuse
<p>1. Promote and provide professional education and training on evidence-based practices for opioid misuse prevention and early intervention.</p> <p>2. Support continued practice improvement through tools that help providers and health systems implement evidence-based care for opioid use disorder such as prescription drug monitoring program utilization.</p> <p>3. Continue to raise awareness around resources and information available through community-based prevention and media strategies that address the risks associated with opioid misuse or abuse.</p> <p>4. Enhance supports for alternative pain management strategies through expanded partnerships and awareness efforts.</p>	<p>5. Support awareness of and access to Medications for Opioid Use Disorder and recovery supports through continued training and education, enhanced referral systems, linkages to care, connection to resources, and treatment cost assistance.</p> <p>6. Improve treatment engagement and retention through care coordination and follow-up services, peer and family support services, recovery housing, case management, and other recovery support services.</p>	<p>7. Increase access to safe medication storage and disposal through drug take-back programs and at-home medication storage and disposal.</p>	<p>8. Enhance overdose education and naloxone distribution across South Dakota through expanded training and continued coordinated distribution.</p>

This strategic plan is shared jointly between DSS and DOH. Evidence-based strategies, a statewide needs assessment, and input from the Opioid Abuse Advisory Committee informed the objectives within the plan. View the entire Strategic Plan document and more information about specific projects at <https://www.AvoidOpioidSD.com/about/strategic-plan/>.

The plan was most recently updated in June 2021. Several strategies were combined into other initiatives at that time, including exploring the potential for a comprehensive opioid management program within South Dakota Medicaid (now part of strategies 4 and 5) and offering training on available treatment options to jails statewide (now part of strategies 1 and 2).

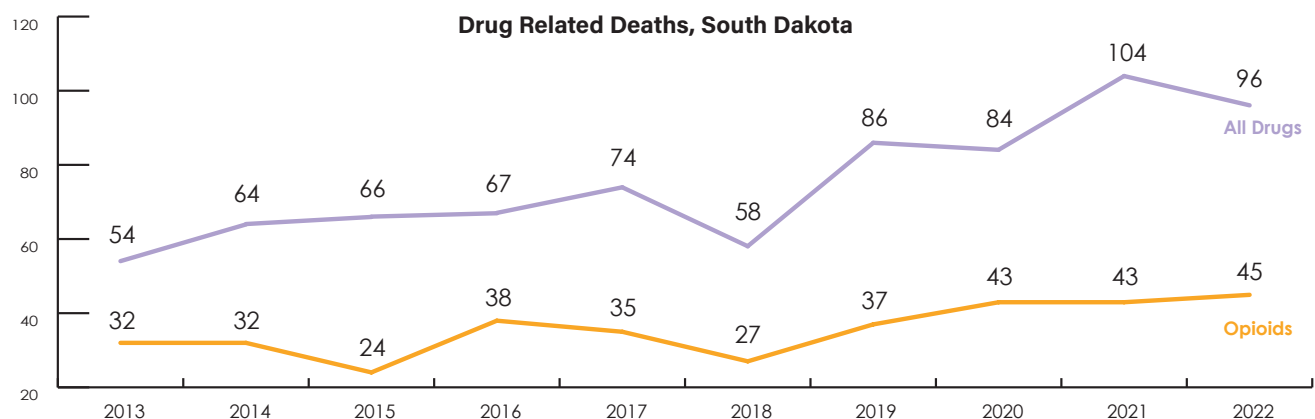
# CAPACITY BUILDING EFFORTS: DATA SURVEILLANCE AND ANALYSIS

Data surveillance and analysis serves as the foundation to the strategic plan. The CDC DDPI Grant built state capacity to collect, analyze, and apply data to develop and support strategies for combating opioid misuse and abuse. These capacity-building efforts have continued through the CDC Overdose Data to Action Grant (OD2A), which supports South Dakota in obtaining high-quality, more comprehensive, and timelier data on overdose morbidity and mortality.

- Accomplishments**
- ▶ Launched data dashboards on the Avoid Opioid SD website to provide stakeholders and the public with credible, regularly updated data, which includes drug related deaths, opioid specific deaths, clients with OUD receiving publicly funded treatment services, and more. The dashboards continue to be updated on a quarterly basis: <https://www.avoidopioidsd.com/key-data/>.
  - ▶ Developed a system to utilize Syndromic Surveillance<sup>(4)</sup> to track suspected opioid overdoses presenting to hospital emergency rooms.
  - ▶ Established quarterly data abstracts from the Prescription Drug Monitoring Program.
  - ▶ Enhanced the amount of relevant clinical data available to clinical end users of the South Dakota Health Link (the state's Health Information Exchange, or HIE), a one-of-a-kind network that allows secure consultations and sharing of test results between providers for better patient outcomes
  - ▶ Created a Data to Action workgroup in November 2021 to examine provisional overdose data on a monthly basis to identify potential trends in fatal and non-fatal overdose. Five counties were identified as being of concern, and local partners were notified and resources shared.

## Current Activities & Future Plans

Collect, submit, and disseminate data on suspected drug overdoses and drug overdose deaths to the Drug Overdose Surveillance and Epidemiology (DOSE) System and the State Unintentional Drug Overdose Reporting System (SUDORS). County specific data reports have been disseminated to local communities to inform them of increases in drug overdoses and to identify ways to assist them with resources.



<sup>(4)</sup> Collection and analysis of chief complaint data from hospital emergency departments for the purpose of identifying and predicting trends as they are occurring. Note that chief complaint data from Indian Health Services, Veterans Affairs, and two hospitals across South Dakota are not included at present. For more information see: <https://www.AvoidOpioidSD.com/key-data/>



# GOAL AREA 1

## Prevention and Early Intervention

### 1. Promote and provide professional education and training on evidence-based practices for opioid misuse prevention and early intervention.

#### Accomplishments

In FFY22, DSS coordinated trainings for prevention professionals statewide to facilitate early intervention programs. These focused on screening and brief interventions for substance use problems identified at an early stage. Facilitator training sessions were held on evidence-based practices, centered on promoting positive behavior change – Prime for Life from the Prevention Research Institute and Interactive Journaling® from The Change Companies®. These trainings educated prevention professionals on how to implement these evidence-based programs with fidelity to members of their community.

In FFY23, the Opioid Abuse Advisory Committee authorized use of a portion of the statewide share of Opioid Settlement Funds to support the Community Grant Program, designed to provide funding to South Dakota organizations seeking to abate local opioid crisis concerns. The approved uses for opioid settlement funds include many opportunities related to professional education and training (e.g., training for health care providers, continuing medical education, educating dispensers on appropriate opioid dispensing). The state intends to primarily utilize the Community Grant Program in accomplishing this strategy. Additional training needs beyond those supported through the Community Grant Program may be considered for use with federal or statewide share funding in the future based on needs identified.

#### Current Activities & Future Plans

Additional training materials were distributed to each of the Prevention Resource Centers to continue their utilization of Prime for Life and support the technical assistance they provide to other prevention professionals throughout South Dakota. Training opportunities remain available for prevention professionals to become trained to facilitate Prime for Life. The Prevention Resource Centers are also offering training in Interactive Journaling in FFY24.

SDAHO continues to engage in provider education, focusing on topics such as reducing stigma around OUD, identifying and diagnosing OUD, referral to treatment, and access and utilization of the Prescription Drug Monitoring Program.

#### Key Outcomes & Metrics

- ▶ In April 2022, 234 individuals attended the Strategies to Reduce the Impact of Substance Use workshop, facilitated in partnership with the Helpline Center.
- ▶ A total of 62 prevention professionals completed early intervention training in FFY22.
- ▶ Launched the South Dakota Opioid Settlement Fund Community Grant Program in FFY23, accepting its first applications for review in October 2023.

## 2. Support continued practice improvements through tools that help providers and health systems implement evidence-based care for opioid use disorder such as prescription drug monitoring program utilization.

### Accomplishments

Continued enhancement of the South Dakota Prescription Drug Monitoring Program (PDMP) by providing quarterly Prescriber Reports and patient Clinical Alerts.

Worked to enhance South Dakota's PMP AWARe platform by making NarxCare an available upgrade for South Dakota healthcare facilities and pharmacies. NarxCare is a comprehensive platform to identify, prevent, and manage substance use disorder (SUD). Several South Dakota healthcare facilities and pharmacies have transitioned to this new system that empowers prescribers and dispensers to identify patients that may be at risk for addiction, overdose, and death, and equips them with the tools and technology they need to help those patients.

Integrated PDMP within electronic health records and pharmacy management systems, empowering healthcare practitioners at the point of care with information that enhances clinical decision-making. The PDMP has been integrated into the electronic health record platforms at all three of South Dakota's major health systems – Avera Health, Monument Health, and Sanford Health.

Completed two PDMP assessments, one via a survey sent to registered users of the PDMP and the other via PDMP user interviews. Both assessments had results showing prescribers and pharmacists find the PDMP to be useful with a variety of tasks including patient management and communication.

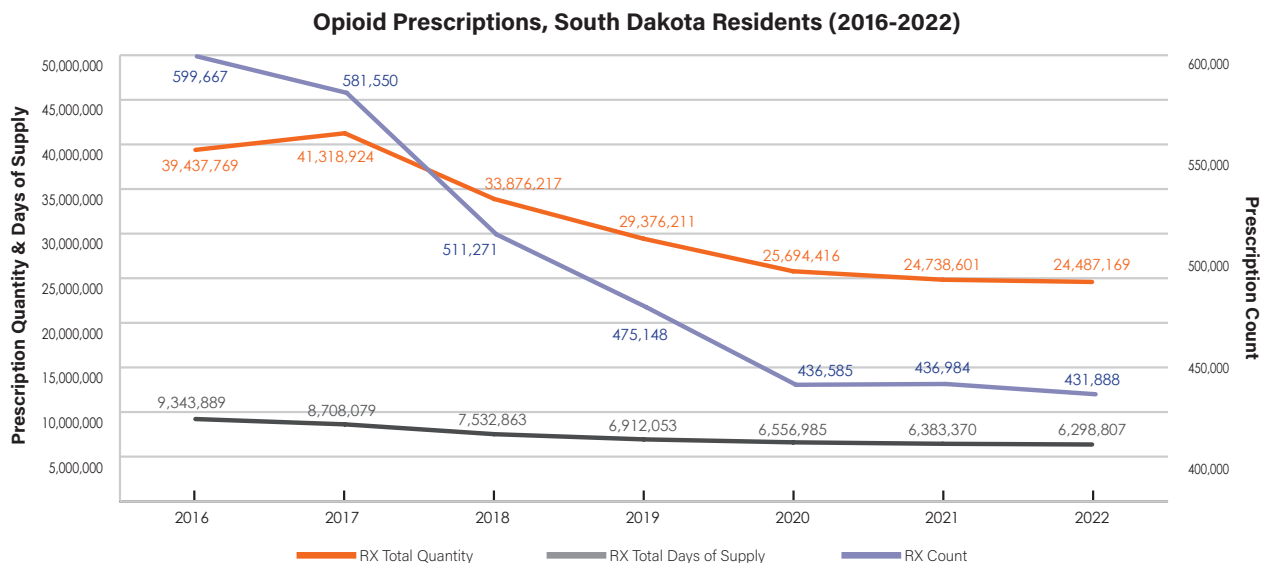
### Current Activities & Future Plans

Continue to establish interstate data sharing through PMP InterConnect with all participating PDMPs; currently connected to 38 other PDMPs including 35 states, along with St. Louis County, MO; Puerto Rico; and the Military Health System. South Dakota's PDMP also shares data with Nebraska via the RxCheck hub.

Continue efforts to have all South Dakota professional licensing boards live with the License Integration Enhancement Project. This enhancement supports automatic reverification processes for current users to maintain program user integrity and auto-approval of new accounts enabling healthcare practitioners immediate access to this clinical decision-making tool.

### Key Outcomes & Metrics

- ▶ Total approved, active users of the PDMP is 7,400.
- ▶ Utilization, measured by the number of patient queries performed, has tripled in five years and two-thirds of queries by South Dakota prescribers and pharmacists are now done in-workflow through one click integration access.
- ▶ In the last five years, both the total number of Clinical Alerts for all prescribers and the total number of prescribers receiving Clinical Alerts have decreased, indicating that there are lower numbers of prescriptions with a clinical risk involved.





### 3. Continue to raise awareness around resources and information available through community-based prevention and media strategies that address the risks associated with opioid misuse or abuse.

#### Avoid Opioid Awareness Campaign

<b>Accomplishments</b>	<p>The Avoid Opioid Campaign shares relevant and educational information focused on saving lives by raising awareness of the risk and signs of overdose, safe ways to respond, best practices for prescribing, treatment, and recovery to those most impacted, such as family members and friends, prescribers, pharmacists, behavioral health professionals, and other professionals. A strategic media mix has been instrumental in driving traffic to the website and increasing calls to the Resource Hotline. Statewide media broadcast overlaps with targeted social media campaigns aimed at specific at-risk populations with emphasis in and around vulnerable counties.</p> <ul style="list-style-type: none"><li>• During FFY22, four naloxone videos and correlating social media ads were developed for statewide broadcast and social media placement. The ads emphasized the importance of having naloxone on hand to reverse an overdose and overdose warning signs.</li><li>• In FFY22, a new campaign was launched to warn of the dangers of counterfeit pills. Corresponding website content was developed to help South Dakotans learn that counterfeit pills are widely available and increasingly deadly, how to keep your family safe and how to help raise awareness. Over the next six months, website visits reached an all-time high with over 187,000 visits.</li><li>• In FFY23, a Drug Overdose Resource Packet of print materials was created to call attention to the dangers of counterfeit pills and polysubstance use to be distributed by law enforcement partners statewide, along with existing educational materials. Radio scripts were also developed in partnership with local law enforcement agencies, featuring officers providing warnings for counterfeit pills, where to obtain naloxone, and how to find help with substance use disorder. Packets are ultimately distributed to people with substance use disorder or their families.</li><li>• In March 2023, Lawrence &amp; Schiller was successfully awarded the State Department of Health's Opioid Abuse &amp; Misuse Prevention Public Education Plan contract.</li><li>• In October 2023, media strategies were implemented to increase the public's awareness around the dangers of xylazine. Messaging also focused on reaching audiences who will see the effects of this drug firsthand such as law enforcement, first responders, educators, veterinarians, and others.</li></ul>
<b>Current Activities &amp; Future Plans</b>	<p>Promotion of the statewide media campaign will continue in FFY24 to increase public awareness of services available.</p> <p>In addition to ongoing mass media efforts designed to raise public awareness related to overdose prevention, safe medication handling practices, treatment and referral services and support, research efforts are taking place to: a) understand the opioid crisis through the perspectives of industry experts and individuals with lived experience, b) test awareness and perceptions of the Avoid Opioid brand, c) examine the effectiveness of opioid prevention messaging and creative executions, and d) identify key factors to be leveraged in future marketing and message development.</p>
<b>Key Outcomes &amp; Metrics</b>	<ul style="list-style-type: none"><li>▶ 135% increase in website visits between FFY22 (84,564 visits) and FFY23 (198,927 visits). The majority of visits occurred in the first six months of 2023 with over 187,000 visits occurring after the launch of the counterfeit pills campaign.</li><li>▶ 1,430 Drug Overdose Resource Packets were distributed to law enforcement officials and emergency medical services staff.</li></ul>

## Prevention

**Accomplishments** Through established key partnerships with local community-based coalitions and the Prevention Resource Centers (PRCs), DSS supports prevention awareness and education across South Dakota. PRCs provide technical assistance and training to promote wellness within the communities of their region. Trained prevention professionals from local community-based coalitions have worked across the state to promote evidence-based opioid prevention programs and deliver educational materials to middle- and high-school youth. In FFY22 and FFY23, PRCs continued to educate, train, and increase public awareness on the dangers and risks associated with opioid misuse. Focus was made on increasing pharmacy participation and community utilization and awareness related to the statewide standing order for naloxone as an opioid overdose reversal agent.

**Current Activities & Future Plans** DSS and DOH will continue to actively work with prevention professionals across the state to provide opioid prevention awareness and education. Supported activities are evidence-based and in alignment with SAMHSA's Opioid Overdose Prevention Toolkit.

The Communities That Care® (CTC) Prevention Framework is currently implemented in five communities identified as being high risk for opioid overdose. This framework is intended to build prevention capacity while promoting healthy youth development, improving youth outcomes, and reducing problem behaviors. Two South Dakota-based CTC coaches (one East River and one West River) are currently working towards certification with the goal to deliver technical assistance to the selected communities as well as build capacity and sustainability for the CTC process in state.

- Key Outcomes & Metrics**
- ▶ As of September 30, 2023, more than 10,800 youth have been impacted by evidence-based prevention programming in schools or after school settings, and more than 5,100 individuals across dozens of towns in South Dakota participated in locally delivered training or town hall meetings regarding opioid education and awareness.
  - ▶ More than 2,600 individuals - youth and adults - engaged with a PRC through opioid and stimulant universal prevention strategies in the last academic year (August 2022-May 2023).

## 4. Enhance supports for alternative pain management strategies through expanded partnerships and awareness efforts.

**Accomplishments** Supported leader training and workshops for the Better Choices, Better Health Chronic Pain Management program as an alternative to pain management.

Added alternative delivery options, such as virtual evidence-based program delivery for Better Choices, Better Health Chronic Pain Management, Fit & Strong, and Walk with Ease programs.

**Current Activities & Future Plans** Continued support of the Better Choices, Better Health Chronic Pain workshops, as well as the Fit & Strong and Walk With Ease programs, will be accomplished with other DOH funds outside of the Opioid Federal Funds in the future.

- Key Outcomes & Metrics**
- ▶ Through FFY23, 198 individuals have participated in a Chronic Pain Workshop, 1,215 individuals have participated in the Walk With Ease programs, and 521 in the Fit & Strong program.



## GOAL AREA 2

### Treatment and Recovery

5. **Support awareness of and access to Medications for Opioid Use Disorder and recovery supports through continued training and education, enhanced referral systems, linkages to care, connection to resources and treatment cost assistance.**

#### Accomplishments

Increasing access to Medications for Opioid Use Disorder (MOUD) is a key strategy of the SOR grant program. MOUD is the use of medications in combination with counseling and behavioral therapies to provide a “whole patient” approach to the treatment of opioid use disorder. Medications used are approved by the Food and Drug Administration and MOUD programs are clinically driven and tailored to meet each patient’s needs. DSS currently contracts with four organizations that offer and increase access to MOUD statewide through office-based and telemedicine-based care. Providers are able to leverage SOR funding to provide treatment cost assistance for their patients as a payer of last resort. One of these partners is the Minnehaha County Jail, where supports are in place to provide MOUD and case management for incarcerated individuals as they prepare to re-enter the Sioux Falls area, primarily, and work to connect those individuals to services outside of jail once released.

MOUD is an eligible service covered by Medicaid. With the expanded Medicaid eligibility criteria implemented in July 2023, providers have been working with their clients to evaluate their Medicaid eligibility and helping them enroll for coverage as applicable. The Indigent Medication Program provides temporary financial support for medication for the treatment of substance use disorders, maintenance treatment, and related lab costs to eligible individuals while other funding options are identified. This can be used to cover the costs associated with MOUD for individuals with no other funding source.

Through a partnership with the Helpline Center, DSS supports the Treatment Resource Hotline and searchable online database housed on [AvoidOpioidSD.com](https://www.avoidopioidsd.com). Individuals struggling with opioid misuse and other substances, or those affected by someone else’s suspected misuse, are encouraged to connect with the Care Coordination Program for support.

#### IMPACT MOMENT

“It helps when the people helping you have been in your shoes and understand the battle you’re fighting. Judgment is not a problem; this is the most sincere and accommodating place I’ve been through. If you’re in this fight, Project Recovery is the place to be. Hats off to all the peers and doctors for being who they are, don’t change. You helped me continue paving a new road thank you all so much!”

- Patient of Project Recovery

In FFY22, DOH partnered with South Dakota Health Link and Avera Behavioral Health System to launch the Navigator program that provides coordination of services by being a point of contact for patients in the behavioral health system as well as providers across the system who may need assistance in directing their patients to behavioral health services. The Navigator program has hosted multiple community education sessions on mental health, substance use, and how to navigate the behavioral health system. The enhanced referral system receives referrals from hospitals, emergency departments, and individuals to help link patients to the appropriate level of care. The Navigator program has hosted trainings to teach professionals to utilize the South Dakota Health Link to connect providers to electronic health information from other providers to improve continuity of care among providers.

Since FFY22, DOH has partnered with SDAHO to implement the Emergency Department Provider Toolkit, an interactive guide for providers and hospital administrators providing strategies to incorporate best practices for screening and diagnosis, referral to treatment, safe prescribing, and community resources in an Emergency Department setting.

In FFY22, DSS partnered with University of South Dakota to implement training and education related to OUD and reducing stigma associated with naloxone and MOUD on the college campus and in the community, including enhancements to the Physician Assistant (PA) curriculum through evidence-based practices.

## IMPACT MOMENT

"One of our MOUD clients started with us in inpatient treatment - pregnant, homeless, abused, and addicted to drugs. She began MOUD, decided to stay in Yankton, and has been sober from alcohol and opiates since the day she started with us. She now lives independently with her little girl and runs her own business in town. We are very happy for her recovery success!"

- Staff from Lewis & Clark Behavioral Health Services, Inc.

## Current Activities & Future Plans

Access to MOUD services is a key strategy supported by SOR funding through DSS. Care is available via telemedicine as well as through traditional office visits. Funds are primarily used to support temporary financial assistance for cost of treatment and medications for opioid use disorder using a fee-for-service reimbursement model that aligns with established Medicaid and Division of Behavioral Health rate structures. The majority of individuals receiving treatment cost assistance through SOR funding are being treated with buprenorphine products. Other FDA-approved medications used to a lesser extent include naltrexone and methadone.

The Treatment Resource Hotline & texting service is staffed 24 hours a day, 365 days a year offering free, confidential support. The Treatment Resource Hotline continues to receive phone calls since it was launched in October 2018.

DOH will continue its work with South Dakota Health Link and Avera Behavioral Health by further developing identified needs and agreements to put the framework into use. The Navigator program will enhance the Avera website to increase self-referrals and partner with the inpatient mental health programs at Avera to distribute pill reminders to increase medication compliance.

SDAHO will implement the Emergency Department Provider Toolkit and provide technical assistance to hospitals across the state. This technical assistance work has expanded to include clinics and other healthcare settings in recognition of the need for education across the healthcare industry regarding screening, treatment, and referral for patients with substance use disorder.

## Key Outcomes & Metrics

- ▶ More than 1,250 unduplicated individuals received treatment cost assistance over the past two federal fiscal years (October 2021-September 2023). All of these individuals were engaged in treatment services with a DSS-contracted MOUD provider.
- ▶ Since launching the service in October 2018, the Treatment Resource Hotline has received more than 1,900 contacts.
- ▶ In the last federal fiscal year, the Navigator program was used by over 7,585 people to identify if additional referrals would be needed after discharge from behavioral health urgent care or inpatient programs.

## 6. Improve treatment engagement and retention through care coordination and follow-up services, peer and family support services, recovery housing, case management, and other recovery support services.

### Accomplishments

Recovery support services are available statewide and focused on improving the health and wellness of individuals through treatment engagement and retention in care. Peer recovery support services are available to provide effective, science-based peer coaching for people living with addiction, including their loved ones. South Dakota's peer support models that of SAMHSA, utilizing peer support workers, or individuals who have been successful in the recovery process. Peer support services are available via office-based and virtual coaching sessions. In February 2020, one of the contracted MOUD providers, Project Recovery, integrated peer recovery support services within their clinic.

Beginning in FFY22, SOR funding was used to establish MOUD-friendly recovery homes in partnership with Oxford House, Inc. across South Dakota. By the end of FFY22, nine Oxford Homes were available in three communities - Aberdeen, Sioux Falls, and Rapid City. This capacity grew to 19 Oxford Homes available statewide by the end of FFY23, with homes now also in Mitchell and Brookings, representing a total of 150 beds available.

Beginning December 2020, Bethany Christian Services was contracted to support expectant and new mothers impacted by substance use through evidence-based specialized case management services. Bethany's ReNew (Recovering Mothers with Newborns) Program - a signature prevention program managed by Bethany that supports mothers through the integration of evidence-based specialized case management and practices - is available out of the Sioux Falls and Rapid City areas, providing services to women not just in those communities but also to those in the surrounding area. Bethany accepts referrals from maternal and prenatal programs, substance use disorder treatment agencies, MOUD providers, Child Protection Services, probation/parole agents, among others.

Referrals to the Helpline Center's Care Coordination program have increased in FFY23 due primarily to the increase in contacts made through 988. If an individual contacts 988 and expresses concern with substance use, they are directly connected to Care Coordinators, who are more specialized in their training in navigating substance use-related cases.

As part of the State Opioid Response III Grant Program, DSS has also developed a contingency management plan which outlines strategies used to improve retention in care for individuals receiving treatment cost assistance among its contracted partners.

### Current Activities & Future Plans

Recovery support services are supported in partnership with several key providers:

- Helpline Center provides continued availability of care coordination and follow-up services.
- Oxford House, Inc. provides expanded access to MOUD-friendly recovery housing, focusing next on the communities of Pierre and Yankton.
- Face It TOGETHER and Project Recovery provide continued access to recovery cost assistance for peer coaching via office-based and virtual pathways.
- Bethany Christian Services provide continuation of the ReNew Program.

## IMPACT MOMENT

### From rock bottom to sobriety

At the initiation of services this client faced jail time, separation from her unborn child and older son, continued homelessness and probable continued use of illegal substances. After engaging in services and working with her specialists, this client is now parenting both her children, completed a treatment program, gained housing and employment, and has several months of sobriety under her belt. We are so proud to be able to watch this client live a healthy, independent life.



## Key Outcomes & Metrics

- ▶ Face It TOGETHER engaged with more than 300 individuals impacted by opioid or stimulant use between FFY22 and FFY23 (October 2021-September 2023).
- ▶ Project Recovery integrated peer recovery support coaching services into its continuum of care beginning February 2020. In a typical month, 95% of Project Recovery's clients receive at least 15 minutes of peer coaching as part of their treatment plan.
- ▶ As of September 30, 2023, Oxford House has implemented and manages, through a peer-led model, 19 houses with a total capacity of 150 beds across South Dakota.
- ▶ The ReNew Program engages with a pregnant women as soon as possible in her pregnancy, and supports that woman and her child through one year postpartum. On average, program graduates received services for between 14 and 15 months.  
110 unduplicated individuals have been provided services since December 2020.  
A total of 33 women have successfully completed the ReNew Program through FFY23.

## IMPACT MOMENT

### Case management aids in recovery, parenting, and self-care

ReNew has been providing services to a client who was referred by her Court Services Officer. This client was eight months pregnant at the time of the referral and had been abusing methamphetamines and many other illegal drugs for the past 15 years. She was facing a revocation of probation hearing due to multiple drug charges. At intake, the client was experiencing homelessness. Staff helped this client find safe housing, while her 13-year-old son lived with family members in the area. This client delivered a healthy baby boy after just three weeks of participating in ReNew. Her birth experience was positive, and baby did not test positive for any substances at birth. ReNew assisted the client to identify weekly recovery support groups in her community and initiated family counseling to start reunifying with her 13-year-old son. ReNew staff attended court with this client and was able to give an outstanding update to the judge and her public defender. The Judge confirmed her hard work and motivation. Several weeks later, ReNew staff assisted the client to receive a housing voucher and she was able to find safe housing that would accept her multiple felony offense record. This client was soon able to move into her new apartment with her newborn and 13-year-old son! This client obtained part time employment and purchased her first vehicle while her ReNew team ensured she was able to afford and secure insurance. This client is half-way through MRT classes and is continuing to attend support meetings twice a week, church on Sundays with her family and additional counseling services for herself and her son. This client consistently meets for our weekly appointments on time and has exceeded the expectations of the ReNew Program thus far.





## GOAL AREA 3

### Reducing Illicit Supply

#### 7. Increase access to safe medication storage and disposal through drug-take programs, and at-home medication storage and disposal.

##### Accomplishments

Since 2017, the South Dakota Board of Pharmacy has placed 88 permanent drug take-back receptacles in retail pharmacies and hospitals across South Dakota and enrolled an additional five locations that already had their own receptacles to the South Dakota PharmaDrop Program. This brings the total number of locations managed through the program to 93. A comprehensive list of permanent drug take-back sites can be found on [AvoidOpioidSD.com](https://www.avoidopioid.com).

Expanded access to safe medication storage and disposal by adding the option to order free DisposeRx packets for at-home disposal and free medication lock boxes to [AvoidOpioidSD.com](https://www.avoidopioid.com). Marketing and promotion in partnership with the Avoid Opioid SD campaign significantly increased public awareness of this resource and distribution upon request.

##### Current Activities & Future Plans

In partnership with DSS, the South Dakota Board of Pharmacy will continue to maintain the drug-take back receptacles placed through the program by supporting the costs of disposal and reloads.

DSS will continue to offer free DisposeRx packets and medication lock boxes, as well as supporting take-back events throughout the state.

##### Key Outcomes & Metrics

- ▶ Since program inception in 2017 through September 2023, the PharmaDrop Program has returned a total of 45,629 pounds of drugs for destruction.
- ▶ Since launching the DisposeRx service in January 2020, more than 3,400 packets have been mailed out upon request or distributed to individuals at no cost for safe medication disposal. More than half of those (2,037) were distributed in the most recent year (FFY23) through request to the Treatment Resource Hotline or by Prevention Resource Center staff.
- ▶ Since launching the lock box service in July 2020, more than 4,400 boxes have been mailed out at no cost for individuals to safely secure their medications.
- ▶ Promotional activities through the Avoid Opioid campaign and community partners supported a successful DEA National Take-Back Day on April 22, 2023, where 396 pounds of medication were collected for destruction through participating law enforcement locations. This was in addition to the 1,123 pounds collected through the PharmaDrop Program that same month.



## GOAL AREA 4

### Response to Opioid Misuse and Abuse

#### 8. Enhance overdose education and naloxone distribution across South Dakota through expanded training and continued, coordinated distribution.

##### Accomplishments

Extended the statewide standing order for naloxone for another two-year period, effective through September 2024, allowing all pharmacies to dispense naloxone to anyone at risk of an opioid-related overdose or those in a position to assist someone at risk including family members, friends, or close third party. Individuals can access naloxone at participating pharmacies statewide with funding assistance available. The goal of the statewide standing order is to prevent overdose deaths from opioids.

Expanded the OEND program to provide free NARCAN® to South Dakota organizations that serve clients who may be at risk of an opioid-related overdose.

Developed a preliminary naloxone saturation plan in FFY23, using surveillance and prevalence data associated with opioid overdose in alignment with national best practices in determining ideal level of saturation of communities statewide. Participated in numerous Learning Communities hosted by SAMHSA and the National Association of State Alcohol and Drug Abuse Directors (NASADAD) to support states in their efforts in creating naloxone saturation plans applicable to their areas.

Efforts continue in updating the naloxone saturation plan to include the most recent year's data. Expansion of that dataset in recent months has included looking at distribution, by county, of pharmacy-based naloxone paid for through SOR funds. Additionally, the team is looking at the training logs to ascertain saturation of OEND as a whole statewide by sector, and then will calculate a rate at which remains to educate, train, and equip previously untrained officers or responders in OEND.

Based on national best practice models referenced by SAMHSA, South Dakota has exceeded naloxone saturation levels with its current distribution approach.

### Current Activities & Future Plans

Continue to provide training in overdose education and naloxone distribution for targeted audiences as well as the general public. OEND for emergency responders continues in partnership with DOH.

Continue access to a free, online, interactive training for overdose education and naloxone distribution that anyone in South Dakota can access on demand.

Current efforts for the statewide standing order are focused on increasing awareness, both to pharmacies to encourage enrollment and to the public to educate them on this available option.

Develop an overdose follow-up program to provide non-clinical assistance, recovery supports, and appropriate referrals for additional care as needed to individuals who have been reversed from an opioid overdose.

Refine and implement the naloxone saturation plan developed as part of the State Opioid Response program, aimed at equipping counties most vulnerable for opioid overdose with life-saving overdose reversal medication.

Implement policies and staff training to support a Naloxone for Business program where all DSS and DOH state offices are equipped with naloxone to use in case of an overdose.

### Key Outcomes & Metrics

- ▶ Since December 2017, a total of 1,200 individuals at risk of an opioid-overdose related death have had an improved response in their condition following administration of NARCAN® by EMS personnel.
- ▶ 80 pharmacies have enrolled to participate in the statewide standing order. A comprehensive map of participating pharmacies can be found at <https://www.avoidopioidsd.com/take-action/reverse-overdose/find-a-naloxone-pharmacy/>.
- ▶ 332 individuals have completed the online training for overdose education and naloxone distribution through September 2023.
- ▶ More than 1,000 individuals were impacted through targeted training, survey education, and video showing through multiple events in partnership with University of South Dakota Addiction Counseling & Prevention Department in FFY22.



# APPENDIX A: OPIOID ABUSE ADVISORY COMMITTEE MEMBERS



Lori Martinec, South Dakota Department of Health, Chair  
Becky Heisinger, South Dakota Association of Healthcare Organizations  
Sara DeCoteau, Sisseton Wahpeton Oyate of the Lake Traverse Reservation  
Margaret Hansen, South Dakota Board of Medical & Osteopathic Examiners  
Amy Hartman, Behavior Management Systems  
Tiffany Wolfgang, South Dakota Department of Social Services  
Charles McGuigan, Attorney General's Office Representative  
Kristen Carter, South Dakota Pharmacists Association  
Dayle Knutson, Great Plains Indian Health Services  
Kari Shanard-Koenders, South Dakota Board of Pharmacy  
Representative Taylor Rehfeldt, Sioux Falls  
Dr. Erin Miller, South Dakota State University, College of Pharmacy & Allied Health Professions  
Tosa Two Heart, Great Plains Tribal Leaders Health Board  
Dr. Jennifer Ball, PharmD, BCACP, BCGP, South Dakota State University, Center for Family Medicine  
Brian Mueller, Pennington County Sheriff's Office  
Jill Franken, Sioux Falls  
Susan Kornder, Northeastern Mental Health Center  
Mary Beth Fishback, Brookings Behavioral Health and Wellness  
Jason Jones, Pierre Police Department  
Jason Foote, Yankton Police Department  
Dr. John Rounds, PT, Pierre Physical Therapy & Rehabilitation  
Dr. Melanie Weiss, OD, Weiss Eyecare Clinic

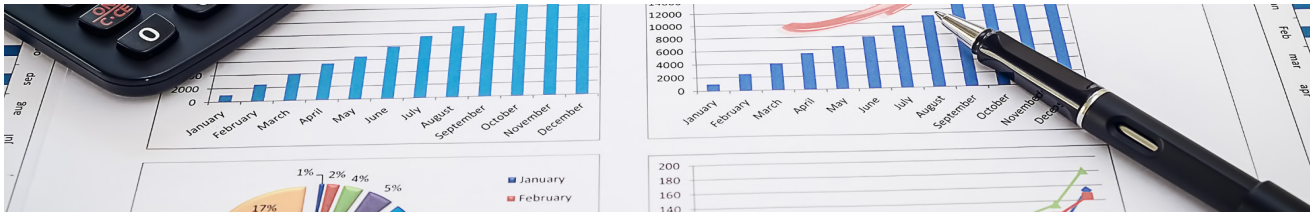


## APPENDIX B: OPIOID SETTLEMENT PARTICIPATING LOCAL GOVERNMENTS



Participating Local Governments (66)		Non-Participating Local Governments (13)
Aberdeen City	Lake County	Bennett County
Aurora County	Lawrence County	Buffalo County
Beadle County	Lincoln County	Day County
Bon Homme County	McCook County	Douglas County
Box Elder City	McPherson County	Haakon County
Brandon City	Meade County	Hamlin County
Brookings City	Mellette County	Hyde County
Brookings County	Minnehaha County	Kingsbury County
Brown County	Mitchell City	Lyman County
Brule County	Oglala Lakota County	Marshall County
Butte County	Pennington County	Miner County
Campbell County	Perkins County	Moody County
Charles Mix County	Pierre City	Stanley County
Clark County	Potter County	
Clay County	Rapid City	
Codington County	Roberts County	
Corson County	Sanborn County	
Custer County	Sioux Falls City	
Davison County	Spearfish City	
Deuel County	Spink County	
Dewey County	Sully County	
Edmunds County	Todd County	
Fall River County	Tripp County	
Faulk County	Turner County	
Grant County	Union County	
Gregory County	Vermillion City	
Hand County	Walworth County	
Hanson County	Watertown City	
Harding County	Yankton City	
Hughes County	Yankton County	
Huron City	Ziebach County	
Hutchinson County		
Jackson County		
Jerauld County		
Jones County		





# APPENDIX C: 2022 REPORT OF PARTICIPATING LOCAL GOVERNMENTS



Report Timeline: January 1 - December 31, 2022

The trustees of the settlements distributed the Local Share directly to participating local governments. The first distribution was received 12/30/2022.

Participating local governments' awards were made in Calendar Year 2023 due to the original disbursement occurring at the very end of 2022. Programs, strategies, and projects funded by participating local governments will be included in the 2024 Annual Opioid Report.

Participating City	Amount Distributed
Aberdeen	\$9,187.91
Box Elder	\$1,161.51
Brandon	\$2,070.57
Brookings	\$12,517.43
Huron	\$4,287.24
Mitchell	\$7,756.04
Pierre	\$3,207.67
Rapid City	\$35,856.72
Sioux Falls	\$111,829.31
Spearfish	\$4,235.48
Vermillion	\$3,050.87
Watertown	\$8,748.39
Yankton	\$6,305.20



Participating County	Amount Distributed
Aurora	\$662.13
Beadle	-
Bon Homme	\$3,120.20
Brookings	\$2,965.00
Brown	\$9,166.13
Brule	\$4,151.41
Butte	\$4,605.90
Campbell	\$352.11
Charles Mix	-
Clark	\$1,315.88
Clay	\$2,278.14
Codington	\$4,499.98
Corson	\$1,769.46
Custer	\$5,607.89
Davison	\$3,516.63
Deuel	\$2,081.98
Dewey	\$1,909.12
Edmunds	\$1,305.09
Fall River	\$11,335.47
Faulk	\$1,430.54
Grant	\$3,572.24
Gregory	\$2,866.32
Hand	-
Hanson	\$765.85
Harding	\$320.32
Hughes	\$4,198.55
Hutchinson	\$2,920.04
Jackson	\$ 741.68
Jerauld	\$3,448.03
Jones	-
Lake	\$4,269.17
Lawrence	\$25,226.72
Lincoln	\$6,507.37
McCook	\$1,572.58
McPherson	\$832.37
Meade	\$16,871.62

Participating County	Amount Distributed
Mellette	\$1,955.91
Minnehaha	\$63,074.98
Oglala Lakota	\$7,182.26
Pennington	\$41,593.91
Perkins	\$1,937.69
Potter	\$2,175.99
Roberts	\$5,130.77
Sanborn	\$589.17
Spink	\$3,779.42
Sully	\$326.21
Todd	\$11,299.80
Tripp	\$6,616.76
Turner	\$3,372.93
Union	\$15,377.42
Walworth	-
Yankton	\$7,344.14
Ziebach	\$1,591.85