2025
Annual Report

State of South Dakota
Federal Opioid Funding and National Opioid Settlement



SOUTH DAKOTA,
Let's Be Clear
PREVENTION. TREATMENT. RECOVERY.

Jointly prepared by the Departments of Health and Social Services

South Dakota Department of Social Services

South Dakota Department of Health



On behalf of the Department of Health and Department of Social Services, please find the enclosed report outlining Federal Opioid Funding and National Opioid Settlement Funding for the previous, current, and future federal fiscal years (Oct 1, 2023 – Sept 30, 2026). The report lists accomplishments, planned initiatives, and key outcomes associated with South Dakota's four shared strategies, all of which aim to impact opioid misuse and opioid use disorder:

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

We are grateful to those who have established and maintained an intricate system for delivering financial funding to address opioid concerns, a response that formally began in 2016 with federal funding. This funding has significantly changed the landscape of opioid treatment and recovery supports available to South Dakotans for the better. The 2021 addition of National Opioid Settlement Funding has further enhanced these objectives in alignment with our strategic plan. The preceding year has brought forth many accomplishments we are excited to share with you.

To date, 44 unique initiatives have been supported through the Community Grants Program, funded through disbursements made to the statewide share of the National Opioid Settlement. As of September 2025, South Dakota has received more than $33 million in Opioid Settlement Funding, disbursed directly to more than 60 counties and cities and to the state directly. A full breakdown of how these funds have been distributed is provided in this report. Through these grants we have been able to support state initiatives in developing overdose follow-up programs and prescription drug monitoring initiatives, public-private partnerships such as expanding access to naloxone statewide, and non-profit initiatives in all aspects of prevention, treatment, and recovery. We are very excited about these projects and the sustainability planning suggested by the Opioid Advisory Committee, which will allow us the flexibility to continue supporting the current federally funded initiatives should that funding lapse or change in the future.

Significant amounts of settlement funds were received by the state in the last year, prompting enhancements to the community granting process. These enhancements create multiple avenues by which individuals and organizations looking to address opioid use concerns can access the funds.

Our collective aim of reducing deaths due to opioid overdose in South Dakota remains our core focus. 234 individuals are known to have had an improved condition following administration of naloxone in a suspected opioid overdose in the last year, and more than 7,400 naloxone kits have been distributed to first responders, individuals in treatment, and through anonymous access points in that same timeframe. Our efforts to ensure South Dakotans have access to naloxone in emergency situations expanded in 2025 to now include anonymous distribution through public access boxes placed across 14 South Dakota communities. Naloxone saturation has been achieved in seven counties, with efforts continuing to saturate the remaining counties and maintain adequate supplies statewide.

More than 2,400 South Dakotans accessed SOR-funded evidence-based treatment services or entered recovery support systems this past year. Through a combination of funding sources, our agencies have secured access to these life-saving measures for those with limited or no ability to pay. A small sampling of their stories of personal impact are featured in this report.

No two South Dakota communities are the same. Our departments use methods that empower individual communities to develop their own, unique response by connecting local treatment resources and recovery supports with their residents.

We are excited to oversee these two departments' shared strategic efforts into the coming year, and we commit to ensuring services and supports along the full continuum of care are available statewide so that they might accompany South Dakotans journeying along the path of recovery.

Melissa Magstadt
Secretary of Health

Matt Althoff
Secretary of Social Services



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BACKGROUND

In 2016, South Dakota Department of Health (DOH) was awarded the Prescription Drug Overdose: Data-Driven Prevention Initiative planning grant from the CDC to support and build efforts to track and understand the full impact of opioid use and misuse in the state. The purpose of the grant was: a) to conduct a needs assessment; b) to complete a strategic plan that responds to those needs and strengthens South Dakota's capacity to prevent misuse of opioids; and c) to develop a strategy to enhance and integrate current surveillance efforts for more accurate and timely data. To oversee this work, the first iteration of the South Dakota Opioid Advisory Committee was created.

In 2017, the South Dakota Department of Social Services (DSS) was awarded the State Targeted Response to the Opioid Crisis Grant (STR) from SAMHSA; additional grant funding has continued 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.

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. Work continues through the Overdose Data to Action in States (OD2A-S) grant from CDC. In 2021, the Opioid Advisory Committee was restructured and expanded to 17 members to provide more insight from providers and other key stakeholders.

In 2022, initial disbursements of Opioid Settlement Funds started arriving in the state. These funds are intended to support opioid use abatement in the state. The South Dakota Legislature, at the advisement of the Attorney General's office, assigned the oversight of the Opioid Settlement Funds to the Secretary of the Department of Social Services. With the Opioid Advisory Committee already in place, the Secretary's Office opted to use that group's tenured experience to advise on Opioid Settlement Funds as well, assuring consistent operations across all three phases of funding support (DOH, DSS, and National Opioid Settlement). In 2022, in accordance with the requirements of National Opioid Settlement Agreement, the Opioid Advisory Committee was expanded to 22 total members (Appendix A).

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
MOA	Memorandum of Agreement
MOUD	Medications for Opioid Use Disorder
NARCAN	NARCAN® (naloxone HCl)
NASADAD	National Association of State Alcohol and Drug Agency Directors
OD2A	Overdose Data to Action Grant
OD2A-S	Overdose Data to Action in States Grant
OEND	Overdose Education and Naloxone Distribution
OUD	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
SOR	State Opioid Response Grants
SUD	Substance Use Disorder

FEDERAL OPIOID FUNDS

OVERVIEW

The following federal funding sources have been leveraged to support the South Dakota Opioid Strategic Plan in the previous, current, and future federal fiscal years and are referenced throughout this report.

SAMHSA SOR 3

Substance Abuse and Mental Health Services Administration
State Opioid Response (SOR 3) Grant

Award: $4,000,000 per year
Duration: 2 years
Funding End Date: September 29, 2024
Federal Fiscal Years: FFY23 - FFY24
Lead Agency: DSS

CDC OD2A-S

Centers for Disease Control and Prevention Overdose Data to Action in States

Award: $1,865,943 in Years 1-3
Duration: 5 Years
Funding end date: August 31, 2028
Federal Fiscal Years: FFY24 - FFY28
Lead Agency: DOH

SAMHSA SOR 4

Substance Abuse and Mental Health Services Administration
State Opioid Response (SOR 4) Grant

Award: $4,070,272 per year
Duration: 3 years
Funding End Date: September 29, 2027
Federal Fiscal Years: FFY25 - FFY27
Lead Agency: DSS

SAMHSA SOR 4 Supplement

Substance Abuse and Mental Health Services Administration
State Opioid Response (SOR 4) Grant S1

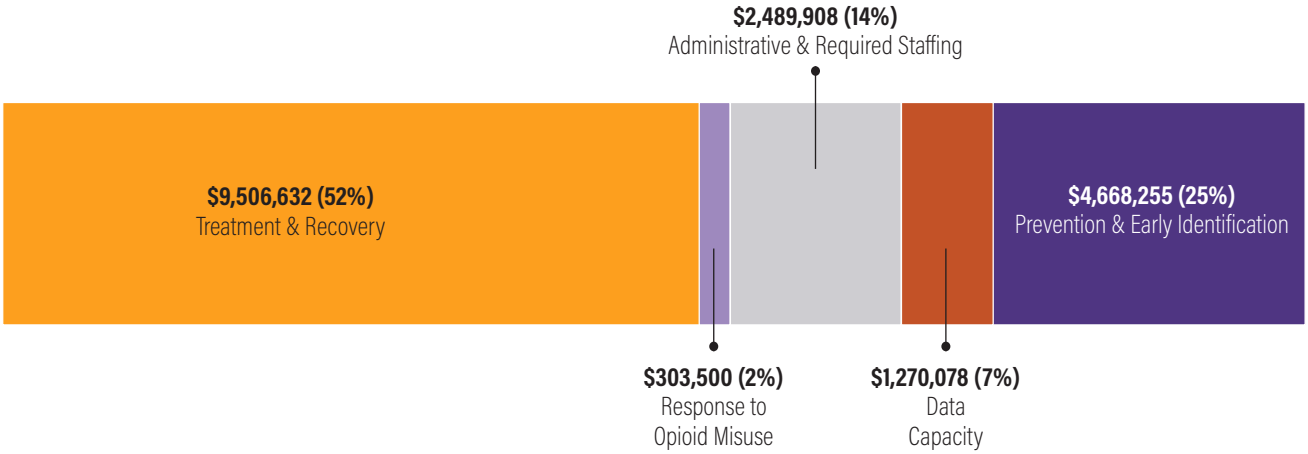
Award: $500,000
Duration: 1 year
Funding End Date: September 29, 2026
Federal Fiscal Years: FFY26
Lead Agency: DSS

PREVIOUS, CURRENT, AND FUTURE FEDERAL FISCAL YEAR ALLOCATIONS

Use of Funds between FFY2024 and FFY2026

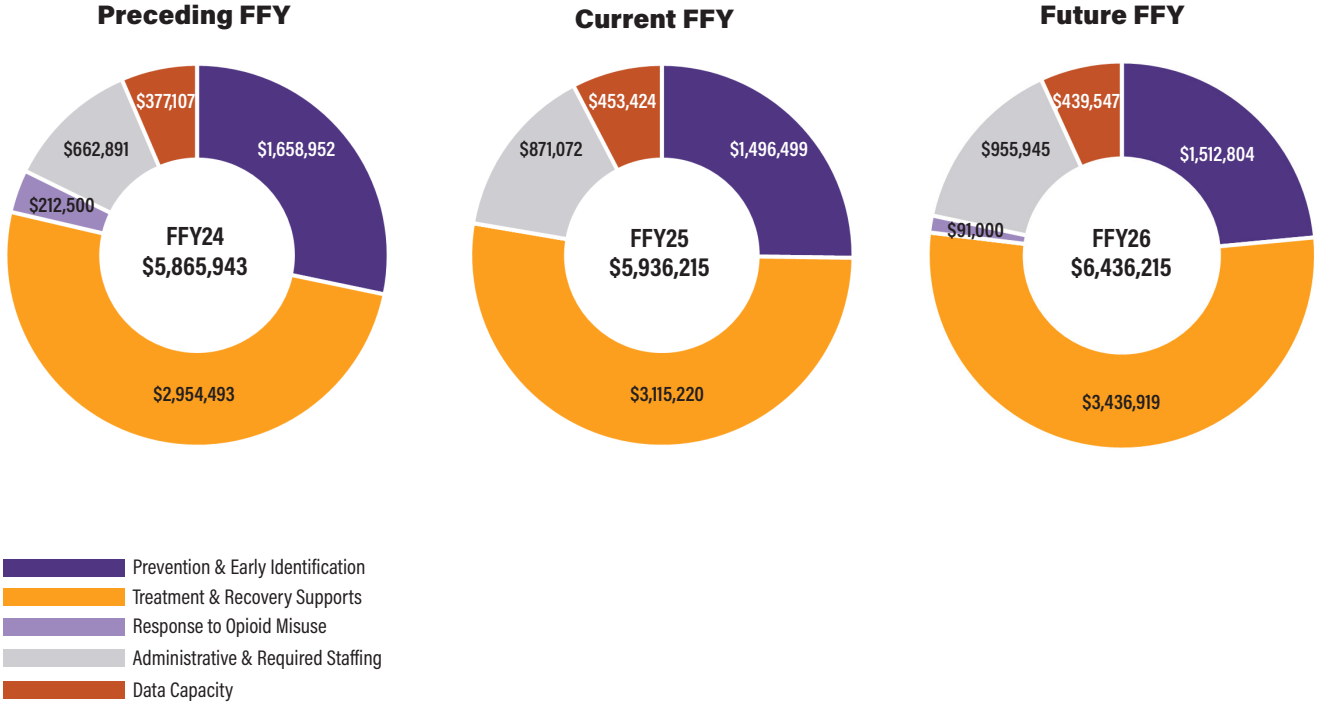
Total Impact: $18,238,373

Total Impact for previous reporting periods
FFY2023-2025: $18,224,761
FFY2022-2024: $18,912,388
FFY2021-2023: $19,962,279



Budget Breakdown By Federal Fiscal Year

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



OPIOID SETTLEMENT FUNDS

Overview

South Dakota began receiving funds from the National Opioid Settlement in 2022. These funds were placed into the Opioid Abatement and Remediation Fund (House Bill 1038) to support efforts related to opioid abuse prevention, treatment, and recovery across the state. Settlement funds were divided proportionally across all participating state and local governments, with 70% allocated to the state (Statewide Share) and 30% allocated and disbursed directly to Participating Local Governments (Localized Share).

Eligible governments included 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). Appendix B features a list of those cities and counties that opted to participate in 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. The first disbursements were received in December 2022 by the State and Participating Local Governments.

Per the MOA:

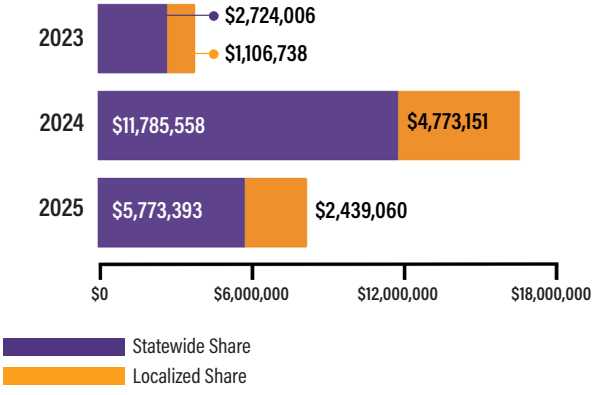
- An advisory committee is required to provide formal recommendations to the Secretary of DSS for use of the Statewide Share. The Opioid Abuse Advisory Committee serves this role and adopted bylaws to reflect that scope in its August 2023 meeting.
- Department of Social Services is tasked with oversight of the funding and assurance that it is used in a manner that in its judgment will best address the opioid crisis within the state. DSS is also tasked with adhering to the state's normal budgeting process.
- By January 31 of each calendar year, Participating Local Governments 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. In addition to the below summary, please reference Appendix C for an accounting of the Localized Share.
- By December 31, 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 or 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. In addition to the below summary information, please reference Appendix D for an accounting of the Statewide Share.

Opioid Settlement Dashboard

Refer to the **South Dakota Opioid Settlement Dashboard** on dss.sd.gov for updates to these figures as funds are received in real time.

Summary of Disbursements through State Fiscal Year 2025

More than $28.6 MILLION in opioid settlement funding has been disbursed to South Dakota participating governments as of June 30, 2025.



Disbursements made to the Statewide Share are kept in an interest-bearing account. Interest accrual through SFY2025 = $897,996.

National settlement information including copies of settlement agreements, FAQs, documents, and other information is available and managed by the Plaintiffs' Executive Committee.
https://nationalopioidsettlement.com/

Statewide Share Allocations

A total of $20,282,957 has been disbursed to the Statewide Share since 2022, with **$5,773,393 of that received in the most recent state fiscal year**.

In January 2023, the Opioid Abuse Advisory Committee recommended more than **$16M in allocations** towards several key programs as identified below. In State Fiscal Years 2023 through 2025, **$6,457,228 of those allocations was obligated and expended**.

Initial settlement fund distributions were directed primarily toward addressing the immediate crisis and stabilizing urgent needs related to opioid use in South Dakota. Since that time, the Advisory Committee has recommended a statewide needs assessment to identify gaps in prevention, treatment, and recovery services. This assessment, expected to be complete by the end of SFY2026, will be used to guide future funding priorities as well as provide baseline information from which to measure impact of funded initiatives.

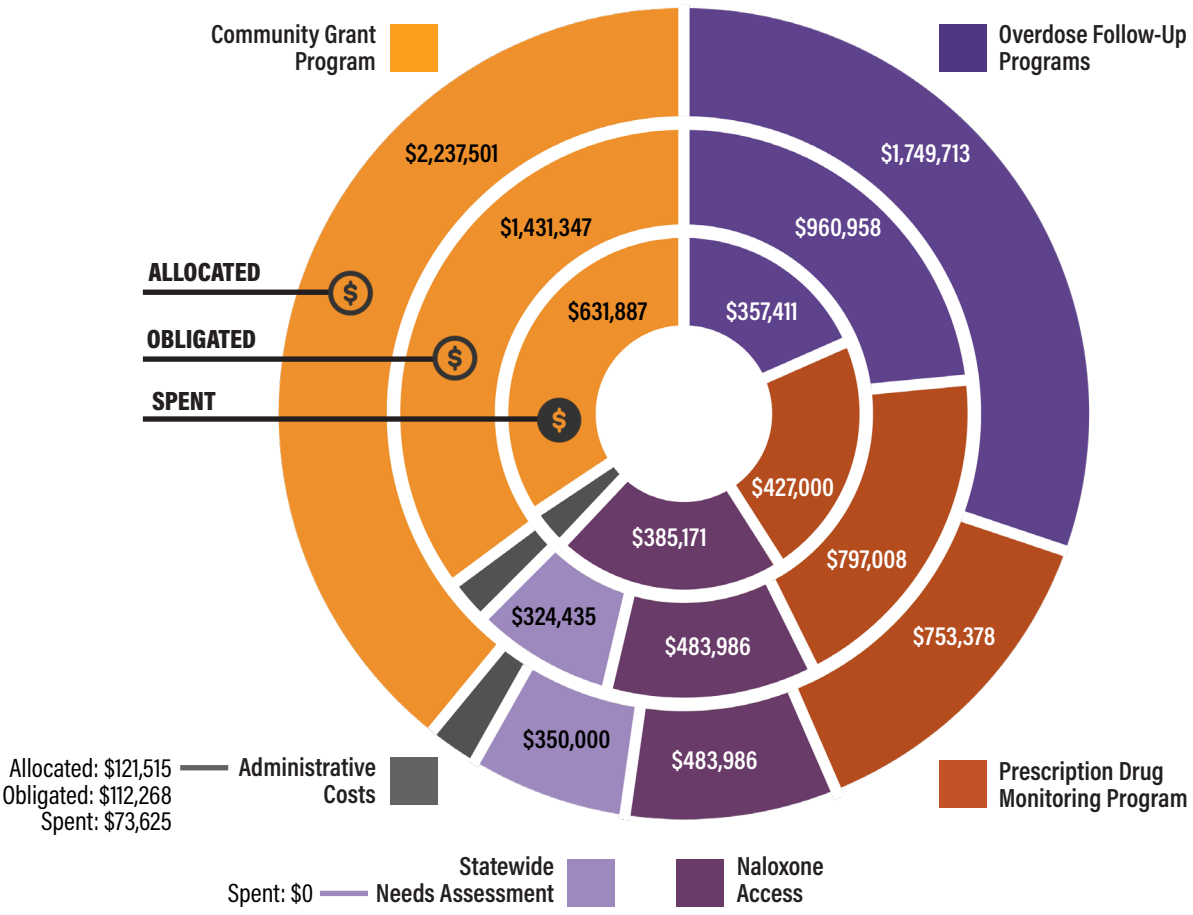
The recommended allocations center on several key interventions:

- Supporting prescribers in monitoring patient opioid access and provide accountability for prescribing practices via the **Prescription Drug Monitoring Program** in partnership with the South Dakota Board of Pharmacy
- **Development of Overdose Follow-Up Programs** that can impact individuals following a nonfatal opioid-related overdose in partnership with two contracted providers - Project Recovery (Rapid City) and Emily's Hope (Sioux Falls)
- The **Community Grant Program**, designed to support projects of all sizes led by South Dakota-based organizations working to prevent, treat, or reduce the impacts associated with opioid misuse across the state
- Increasing **access to overdose reversal medications** in order to reduce deaths or related hospitalizations or harm

Each intervention was designed to contribute to the overall goal of mitigating the impact of opioid use and misuse across South Dakota communities.

STATEWIDE SHARE BREAKDOWN: ALLOCATED, OBLIGATED, AND SPENT

Funds reported through the end of SFY2025 (June 30, 2025)



STATEWIDE SHARE ALLOCATIONS | PURPOSE & PROGRESS MADE

The following provides a breakdown of these efforts, financial allocations, and the progress made throughout the preceding state fiscal year. A detailed accounting of individual awards made using Statewide Share funds, by strategy, is available in Appendix D. Information on allocations, obligations, and expenditures made for these initiatives is also on the **South Dakota Opioid Settlement Dashboard** at dss.sd.gov.

Strategy	Program Purpose	Supported Activities in SFY 2025
Overdose Follow-Up Program	To develop and support programs aimed at impacting individuals following a non-fatal opioid-related overdose, connecting them to resources that best meet their needs to support recovery.	The overdose follow-up program supports individuals recently affected by overdose, aiming to prevent recurrence and strengthen connections to care. Beginning January 1, 2024, DSS contracted with two entities to pilot two overdose follow-up programs (selected through a RFP process): Emily's Hope and Project Recovery. Emily's Hope efforts are expanding beyond Minnehaha & Lincoln Counties in the next fiscal year to Codington, Brookings, Turner, Yankton, and Clay. Project Recovery is serving Pennington, Lawrence, Custer, Butte, Meade, Oglala Lakota and Roberts. Initial work during 2024 centered around building community relationships, onboarding staff, and training medical providers. During 2025, each program continued building relationships in order to increase referrals and build community partnerships.
Prescription Drug Monitoring Program	To support prescribers in monitoring patient opioid access and provide accountability for prescribing practices.	Prescription Drug Monitoring Program supports included on-going payroll expenses for PDMP staff and costs associated with the PMP AWARxE technology that provides real-time information to prescribers to improve accuracy, reduce controlled substance misuse, and identify patients that may be at risk for overdose.
Community Grant Program	To make funding available to South Dakota-based organizations for targeted efforts that abate the opioid crisis at the local level.	Since inception, the Community Grants Program has resulted in 44 awards made to South Dakota-based organizations working to prevent, treat, or reduce the impacts of the opioid crisis within the state. In 2024, a significant increase in settlement funding was received by the state resulting in a significant increase in Community Grant awards in SFY2025 far exceeding previously available funding. More than $1,000,000 in new grant funding was awarded in SFY25 alone, with the most recent awardees initiating their work in June 2025. Additionally, in the summer of 2025, a subcommittee of the Opioid Advisory Committee met to review and develop an updated funding framework by which to guide future Community Grant Program investment priorities with the intent of supporting projects of all sizes, including those with the capacity to make transformative change of regional or statewide impact. This framework along with a supporting application system will launch in November 2025, details of which can be reviewed on dss.sd.gov.
Naloxone Access	To support community-level access to overdose reversal medication across South Dakota with the aim of reducing opioid overdose deaths or related hospitalizations or harm.	Beginning in April 2025, Emily's Hope was contracted to supplement existing distribution efforts led by DSS by focusing on anonymous access points for and distribution of naloxone kits across South Dakota. Public access boxes are being placed in high-traffic areas identified through state overdose data. Additionally, Emily's Hope will distribute kits to businesses and nonprofits for use with high-risk populations and placement near AEDs. The initiative complements existing efforts targeting first responders and vulnerable communities, aiming to expand access and save lives.

FUNDING PRIORITIES FOR THE STATEWIDE SHARE

The following factors are considered for projects that are supported by Statewide Share funds.

Collaborative Development is essential to building comprehensive community response. Key partners may include civic leaders, local law enforcement, mental health providers, public health agencies, schools, peer and recovery networks, housing/social service agencies, and community organizations.

Data and Outcome Measures must be appropriate and relatable to the scale of the project scope of work. Ongoing monitoring ensures project effectiveness and alignment with settlement fund approved uses.

Statewide Impact with broad reach ensures the statewide share of settlement resources are allocated to all populations and in all communities.

Program Evaluations that demonstrate the ability to assess whether or not the goals are achieved, ensure accountability to the settlement fund approved uses, monitor progress towards project goals, and demonstrate impact or change.

A Sample of Funded Projects

$66,300 *to provide integrated care coordination services and supporting recovery services within a hospital*

to provide immediate street-level support for homeless individuals impacted by opioid use and other substance use in Sioux Falls **$35,000**

$10,000 *to support overdose education and to host a health fair educational event at the local level*

to develop and deliver evidence-based prevention curriculum in K-12 settings **$125,250**

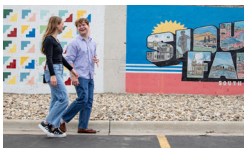
STATEWIDE SHARE ALLOCATIONS | PURPOSE & PROGRESS MADE (CONTINUED)

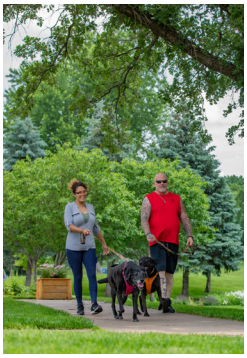
The following provides a breakdown of these efforts, financial allocations, and the progress made throughout the preceding state fiscal year. A detailed accounting of individual awards made using Statewide Share funds, by strategy, is available in Appendix D. Information on allocations, obligations, and expenditures made for these initiatives is also on the **South Dakota Opioid Settlement Dashboard** at dss.sd.gov.

Strategy	Program Purpose	Progress Made - SFY 2025
Statewide Needs Assessment	To support a statewide assessment to identify gaps in opioid treatment, prevention, and recovery services, the findings of which will be used to determine future funding priorities for statewide share allocations.	Following the Advisory Committee's recommendation to allocate up to $350,000 for this effort, DSS issued a Request for Proposal in January 2025 to solicit vendor(s) with relevant expertise and skills to conduct a comprehensive needs assessment and gap analysis across each of the approved use areas associated with the National Opioid Settlement MOA. After reviewing 11 submitted proposals, contracts were awarded in April 2025 to two organizations: Steadman Group, to assess all aspects of Treatment and Recovery, and the University of South Dakota, to assess Prevention related programming and initiatives available statewide. Contracts began in June 2025 for both scopes of work. Final reports will be made in the spring of 2026.
Program Sustainability	To ensure State Opioid Strategic Plan strategies continue should federal funding end, the Committee aims to reserve $12M (two years of programming) by setting aside 25% of each disbursement received.	As of the end of SFY2025 a total of $4,587,836 has been set aside for this purpose, or 38% of the target balance. The funds are held in an interest-bearing account and accounted for by DSS in their biannual reporting to the Opioid Abuse Advisory Committee.
Administrative Costs	To support accounting, coordination, and reporting of funded initiatives and local government activities as required by the MOA.	In its January 2024 meeting, the Opioid Abuse Advisory Committee authorized the use of up to 5% of received disbursements from the statewide share to be used for administrative costs. The initial allocation was calculated by taking 5% of the first two disbursements from the Mallinckrodt settlement received April and November 2023. Subsequent allocations have been based off all settlement funds received thereafter.

PROGRAM SUSTAINABILITY

Program sustainability is a hallmark to assuring the ongoing structure of the South Dakota's opioid treatment, recovery, response, and prevention efforts. This report has identified several very valuable programs that have been funded by DOH and DSS primarily through federal discretionary grant programs, the outcomes of which have provided treatment and recovery support cost assistance to thousands of patients over the years. Through expanded access to and capacity building for MOUD treatment, stand-alone and integrated peer recovery support services, statewide Naloxone distribution through first responders and new partnerships with entities like Emily's Hope, school- and community-based prevention programming and other similar efforts, the state has created a safety net of resources by which to treat, support, and engage individuals impacted by or at risk for opioid misuse. To assure at least two years of continued support for projects like these, the Opioid Advisory Committee elected to set aside a portion of the Statewide Share of National Opioid Settlement funds as they are disbursed, with the goal of reaching $12 million. To meet this crucial goal the committee has recommended that 25% of all statewide share of Settlement Funds be designated for program sustainability until the goal balance has been retained. Electing to retain only 25% until the target is met assures that the remaining 75% can be directed to expanding opioid abatement efforts across the state through Community Grants, Overdose Follow-up Programs, and expanded Naloxone Access programs, all while providing some assurance that the treatment, recovery, and prevention systems established and supported through federal funding could continue in the event in the event of funding lapse or change.







Localized Share Allocations

This funding represents 30% of South Dakota's total settlement allocation and was distributed directly to participating local governments. The state's approach, rooted in the principle that "no two South Dakota communities are the same," empowered local entities to tailor their responses to their unique needs while adhering to approved uses outlined in the MOA.

This report reflects an accounting of all disbursements made in both State Fiscal Year 2023 and State Fiscal Year 2024. Per the terms of the MOA, Participating Local Governments are required to report expenditure and award data to the Department of Social Services annually by January 31 for the preceding calendar year. Expenditures are categorized into three main areas - Treatment, Prevention, and Other Strategies - in alignment with the MOA Approved Uses.

Disbursement Total

LOCALIZED SHARE DISBURSED THROUGH THE 2025 STATE FISCAL YEAR (6/30/2024): **$2,439,060**

Expended and Awarded Total

LOCALIZED SHARE EXPENDED OR AWARDED THROUGH THE PRECEDING CALENDAR YEAR (12/31/2024): **$1,455,293**

As of the end of calendar year 2024, 40 of the 66 Participating Local Governments reported expenditures or allocations for their opioid settlement funds received.

These local initiatives, supported by the settlement funds, will continue to play a crucial role in South Dakota's comprehensive strategy to address opioid use and misuse. The ongoing reporting and oversight mechanisms, including annual certification to the Opioid Advisory Committee, ensure transparency and accountability in the use of these resources.

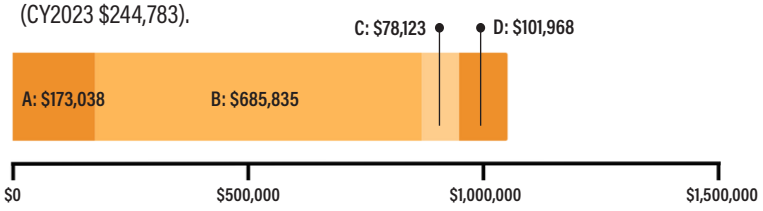
Appendix C features additional information on the Localized Share, the amounts disbursed to each Participating Local Government, and their reported expenditures and awards.

For more information, you may find the point of contact for each Participating Local Government at https://dss.sd.gov/behavioralhealth/grantinfo.aspx.

Breakdown of Expended And Awarded Funds in CY2024

TREATMENT [1]

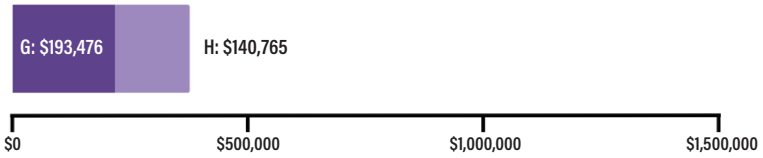
The largest portion of funds was directed towards expanding the availability of treatment for Opioid Use Disorder (OUD), similar to the preceding calendar year. Local governments invested a total of $1,038,964 in this area (CY2023 $244,783).



A: Treat Opioid Use Disorder
B: Connect people who need help to the help they need
C: Support people in treatment and recovery, and reduce stigma
D: Address the needs of criminal justice-involved persons

PREVENTION [1]

Local governments also allocated resources to prevention strategies, with $334,241 invested in evidence-based prevention programs in schools and community education initiatives (CY2023 $126,992).



G: Prevent misuse of opioids
H: Prevent overdose deaths and other harms

OTHER STRATEGIES BREAKDOWN [1]

An investment of $82,088 was made in other strategies per the approved uses identified in the MOA (CY2023 $27,665).



I: First Responders
J: Leadership Planning & Coordination
K: Training

[1] No awards or allocations were reported for the following Approved Use categories per the MOA: Treatment-E, Address the needs of women who are or may become pregnant; Prevention-F, Prevent over-prescribing and ensure proper prescribing of opioids; or Other Strategies-L, Research.

SOUTH DAKOTA OPIOID STRATEGIC PLAN

GOALS & STRATEGIES

Prevention and Early Intervention	Treatment and Recovery	Reducing Illicit Supply	Response to Opioid Misuse
1. Promote and provide professional education and training on evidence-based practices for opioid misuse prevention and early intervention. 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. 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. 4. Enhance supports for alternative pain management strategies through expanded partnerships and awareness efforts.	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. 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.	7. Increase access to safe medication storage and disposal through drug take-back programs and at-home medication storage and disposal.	8. Enhance overdose education and naloxone distribution across South Dakota through expanded training and continued coordinated distribution.

This strategic plan is shared between DSS and DOH. Evidence-based strategies, a statewide needs assessment, and input from the Opioid Advisory Committee informed the objectives within the plan.

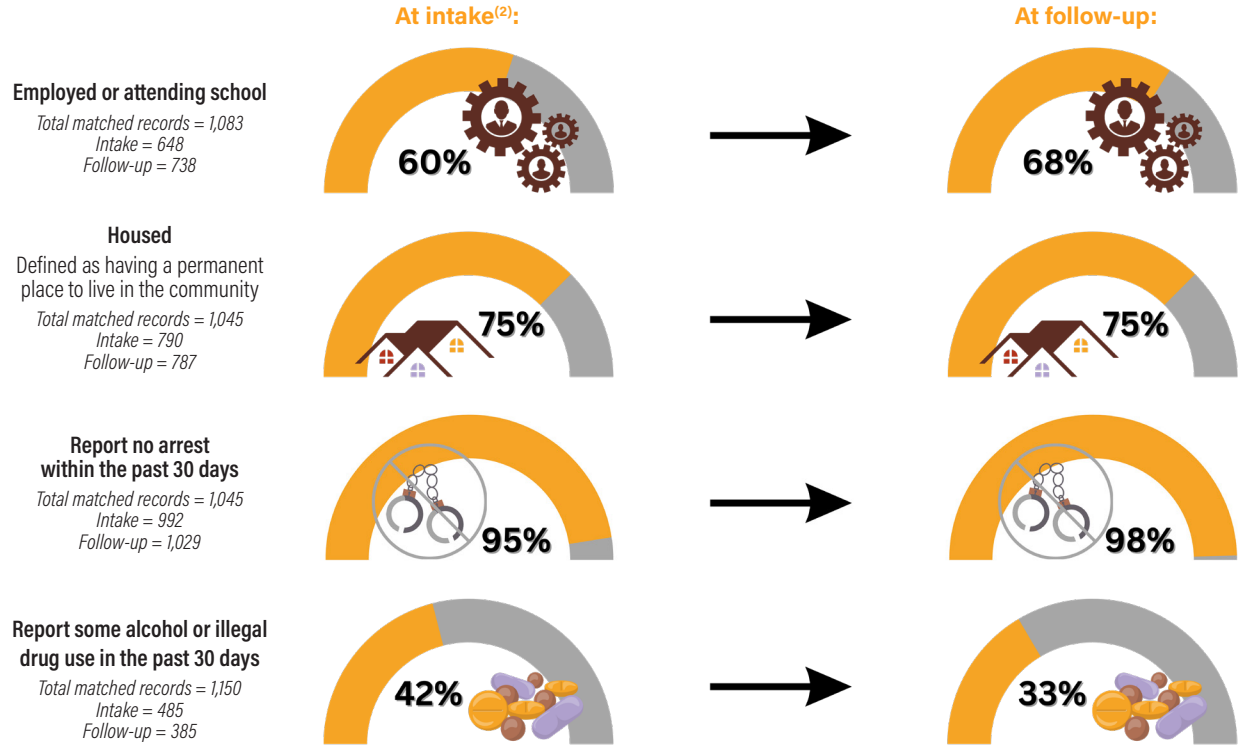
The plan was last updated in June 2021. Several strategies were combined into other initiatives at that time, including exploring the potential for a comprehensive opioid management program within South Dakota Medicaid (now part of strategies 4 and 5) and offering training on available treatment options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

View the entire Strategic Plan document and more information about specific projects at https://letsbeclearsd.com/about.

CLIENT-LEVEL IMPACTS: SOR-FUNDED TREATMENT AND RECOVERY SERVICES

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 was collected through administration of the Center for Substance Abuse Treatment Government Performance and Results Act (GPRA) Client Outcome Measures for Discretionary Programs Tool during this reporting period. The client-level tool collects information on substance use history, 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.

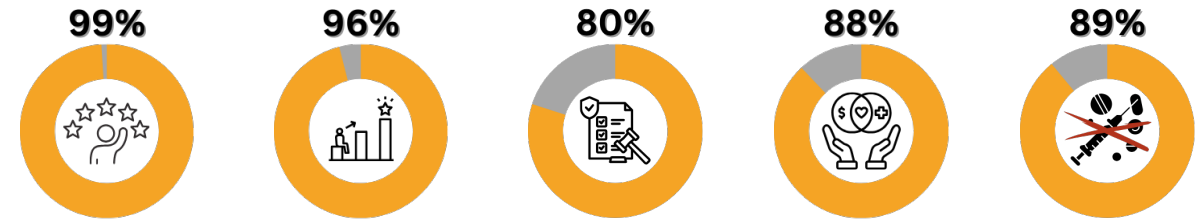
MATCHED INTAKES BETWEEN OCTOBER 2022 - SEPTEMBER 2025



PERCEPTIONS OF CARE AND PERSONAL IMPACT

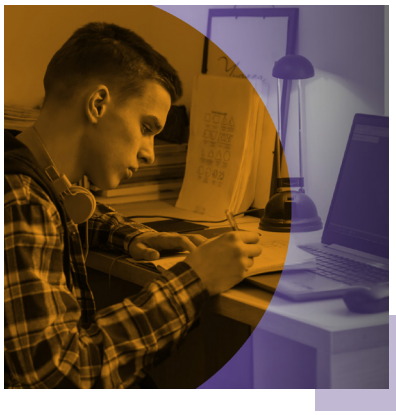
A second client-level outcome tool, developed in FFY24 by the SD State Opioid Response team, is utilized among SOR-contracted providers in treatment and recovery support services to gain additional insight into the impact of services provided. The short, confidential, de-identified survey asks individuals about their perceptions of care and the impact the program(s) they are participating in are having on their personal recovery. The tool is offered to individuals on a quarterly basis.

PERCEPTIONS BETWEEN APRIL 2024 - SEPTEMBER 2025



[2] Reflects client level outcome data as reported through SAMHSA's Performance Accountability and Reporting System (SPARS) associated with individuals receiving State Opioid Response-funded treatment cost assistance between the period of October 2022 and September 2025 who responded to the interview questions at both intake and follow-up. Individuals who refused the questionnaire or did not answer the question, and those that participated in just the intake tool, were not included in this analysis.

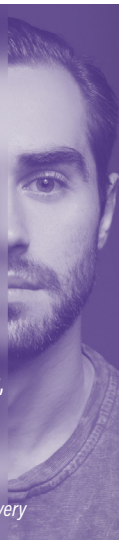
WHAT ARE THEIR STORIES?



"This mom connected with ReNew's Women's Advocates three and a half years ago while in jail, beginning a transformative journey through addiction recovery and parenthood. After losing custody of her first son due to her struggles with substance use, she committed to change and began building a support system through ReNew's programs while living at One Heart Campus. She regained custody of her first son just before giving birth to her second and later reunited with her partner when he was released from prison, with both committing to recovery and parenting goals together. The couple now has three children, including a daughter born in July 2024, and has maintained their recovery while being gainfully employed, attending church, and actively engaging in parenting education. Their dedication to forming strong bonds with all their children, including those they reunited with, demonstrates their commitment to breaking generational cycles and providing a stable, loving home."

Client story from Bethany Christian Services

"Six months before his initial review, this individual was in a dark place expecting death or prison as his only future. The MAT/MAR program at Project Recovery gave him a completely new outlook, allowing him to become drug-free and an asset to his community. By his update, he maintained one continuous year of sobriety, reconnected with family, and reported feeling and looking "SO MUCH better."



Client story from Project Recovery

"This member began coaching in December 2024 after completing outpatient treatment, facing the death of both parents, a 7/10 ACE score, psychostimulant misuse, and legal troubles. Through consistent coaching, he made difficult employment changes, improved sleep and spiritual practices, and dramatically strengthened his relationships - the most rewarding aspect of his journey. Now preparing for a critical court date, he's exploring starting a construction company and feeling confident about navigating life's challenges substance-free."

Client story from Face It Together

"A woman entered recovery housing struggling with years of heroin addiction that had cost her custody of her two sons and led to criminal activity with her husband. Through Drug Court and ReNew support, she completed treatment, established MAT, reunited with her sons, moved into her own apartment, finalized a self-represented divorce, and gave birth to a healthy third son while maintaining low-dose MAT. Now working as a legal aid trainee, she has reestablished family relationships, maintains strong recovery boundaries, and actively participates in her children's lives. Her graduation speech from Drug Court honored ReNew's role in her astounding transformation from desperation to thriving independence."

Client story from Bethany Christian Services



"This client started MOUD while in the inpatient program, and has achieved nearly seven months of recovery, his most voluntary sober time ever. Previously a heavy polysubstance user who nearly died from withdrawal complications, he now supports his wife in her recovery journey (she started MOUD in July) and has set a goal to become an addiction counselor, exploring peer support as a pathway. His transformation from life-threatening addiction to supporting others represents the powerful cycle of recovery, giving back to the community."

Client story from Lewis & Clark Behavioral Health Services

"Since April 2022, this individual has worked with Project Recovery's caring staff who prioritize his best outcome. As a disabled man suffering from chronic pain and morphine addiction, he found an understanding group committed to his best life. His multi-year engagement demonstrates the program's ability to help clients with complex needs, managing both addiction and chronic pain, while providing compassionate, judgment-free care that keeps participants engaged long-term."

Client story from Project Recovery





"Previously incarcerated and initially declining MOUD, this client reconsidered after experiencing persistent cravings and has made remarkable progress. After a year in the Homeless Shelter, he secured stable housing and now works at that same shelter, supporting individuals facing challenges he once overcame. His active involvement in AA, NA, and community service, combined with his deep gratitude for MAT services, demonstrates how peer experience can create powerful recovery support when those who've "been there" help others navigate similar struggles."

Client story from Lewis & Clark Behavioral Health Services





CAPACITY BUILDING EFFORTS: DATA SURVEILLANCE & 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. These capacity-building efforts have continued through the CDC Overdose Data to Action in States (OD2A-S), which supports South Dakota in obtaining high-quality, more comprehensive, and timelier data on overdose morbidity and mortality.

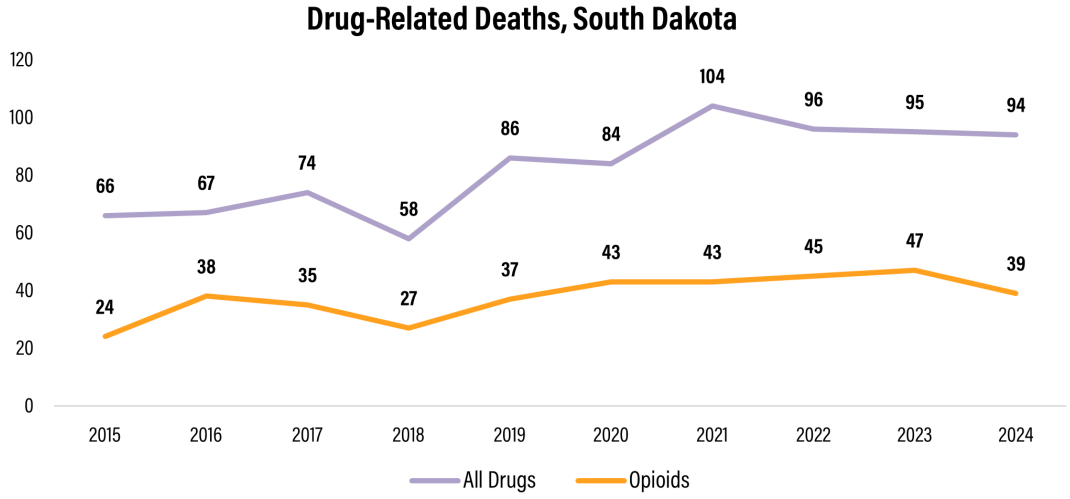
Accomplishments

- Maintain data dashboards on the Let's Be Clear SD website to provide stakeholders and the public with credible, regularly updated data, which includes Emergency Department visits for suspected overdoses, PDMP data, 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.
- Developed a system to utilize Syndromic Surveillance[3] 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 work group in November 2021 to examine provisional overdose data on a monthly basis to identify potential trends in fatal and non-fatal overdose. Since the beginning of the work group, eight counties have been identified as being of concern, and local partners were notified and resources shared.

To stop unintentional opioid and other substance-related deaths, you have to start with data. The dashboard pulls in data regarding overdose deaths, intervention metrics, substance misuse across South Dakota and more.
https://letsbeclearsd.com/key-data

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. Regional data reports have been created, in partnership with the Department of Public Safety Fusion Center, and disseminated to all local law enforcement agencies across the state.



[3] 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://letsbeclearsd.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 in early intervention programs, focusing 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®. 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 offered training in Interactive Journaling in FFY25. In FFY24, 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. 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	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, and prescribing guidelines for acute and chronic pain from subject matter experts for patients with OUD.
Key Outcomes & Metrics	► In FFY25, expansion of SBIRT in Avera Behavioral Health Emergency Departments has resulted in over 92,790 screenings with over 850 individuals requesting follow-up from the Navigation Program for linkages to care. ► In FFY25, a total of 337 healthcare professionals received training through SDAHO sponsored sessions addressing prevention, OUD diagnosis and treatment options, stigma reduction and chronic pain management. Additionally, SDAHO facilitated subject matter expert led education on the use of medications for opioid use disorder (MOUD) in clinical settings. ► A total of 66 prevention professionals completed early intervention training between FFY22-FFY24.

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.
- making NarxCare an available upgrade to the PMP AWARxE platform for South Dakota healthcare facilities and pharmacies. NarxCare is a comprehensive platform that helps prescribers and dispensers identify patients that may be at risk for SUD, overdose, and death, and equips them with the tools and technology they need to help those patients.
- integrating the PDMP within electronic health records and pharmacy management systems, giving information at the point of care 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.
- supporting connection of South Dakota's PDMP to 42 other PDMPs including 40 states, Puerto Rico, and the Military Health System.

Completed a PDMP assessment survey that was sent to approved prescriber and pharmacist users of the PDMP. The assessment had results showing prescribers and pharmacists are utilizing the PDMP to improve patient outcomes and care. It also provided practitioner insight of enhancements to further its utilization.

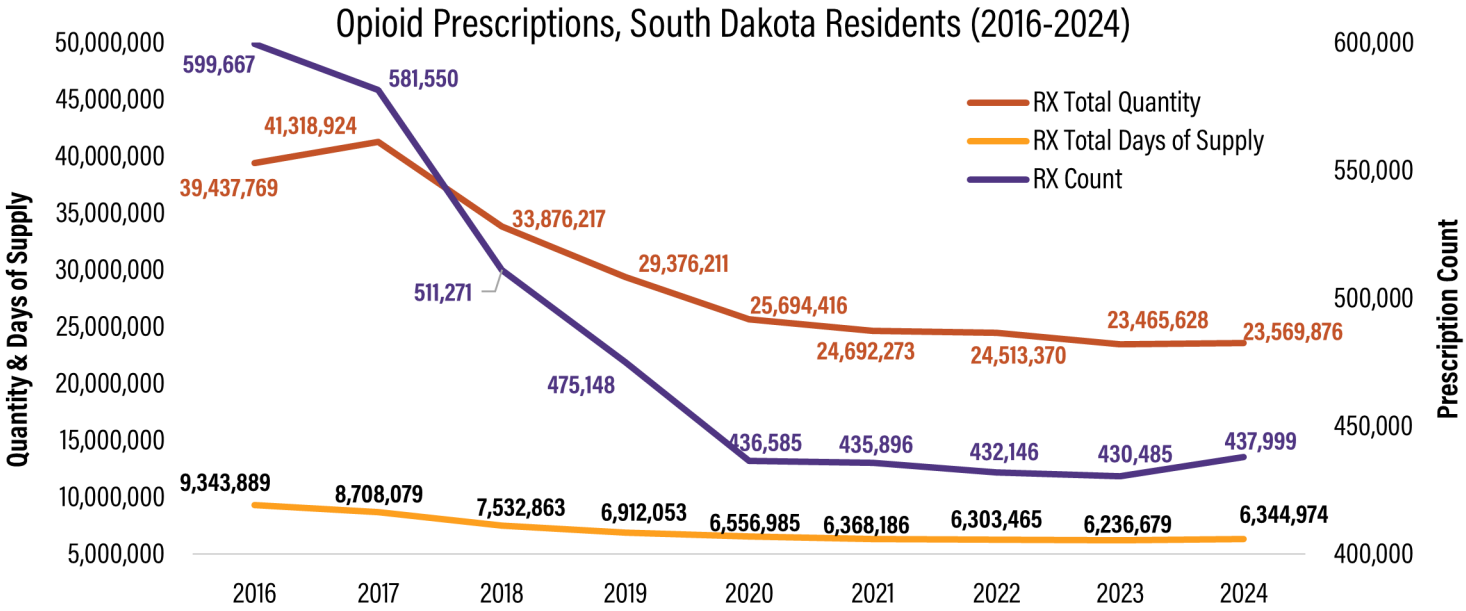
Current Activities & Future Plans

Continue to expand interstate data sharing through PMP InterConnect with additional participating PDMPs.

Continue efforts to have all South Dakota professional licensing boards live with the License Integration Enhancement Project, which 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 7,231 (+231 over previous year).
- Utilization, measured by the number of patient queries performed, has tripled in five years. Three-fourths of queries by South Dakota prescribers and pharmacists are now done in-workflow through one-click integration access.
- Since the inception of Clinical Alerts in 2018, there has been an overall decrease of 28% in the total number of alerts for all prescribers. This decrease indicates 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.**

Avoid Opioid Awareness Campaign

Accomplishments

Media and public awareness efforts transitioned from Avoid Opioid to Let's Be Clear during FFY25.
In FFY24, public awareness research efforts were taken 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. In result, a new brand and transition plan was adopted in FFY24, taking the public awareness efforts from the Avoid Opioid platform to a new Let's Be Clear brand - clear about safety, support, and getting help; clear about myths and misinformation; and working together to spark moments of clarity, start open conversations, and be free of stigmas around substance use.

The Let's Be Clear transition officially launched in November 2024. The 2024-25 media strategy encompassed four primary goals:

1. Education: Provide education and understanding behind opioid misuse and opioid use disorder.
2. Stigma Reduction: Create awareness of substance misuse by changing the narrative.
3. Share Resources: Show the full array of resources available.
4. Provide Direct Support: Connect our audiences with what to do to get help.

The campaign efforts were measured through awareness metrics (reach and impressions made of messaging), engagements (comments, shares, and reactions to content), growth in social followers, and website referrals. Target audiences for social messaging include individuals in need, support systems (e.g., loved ones of those living with substance use disorders or those in recovery looking for resources), providers, and the general public. The primary aim of the updated campaign efforts is to reduce the effects of personal opinions and biases on the way South Dakotans think about and address substance misuse and substance use disorders, based on direct, open, and clear messaging that is informative and inspiring.

In FFY25:

- Partnerships with South Dakotans with lived experience resulted in the creation of the Moments of Clarity page (https://letsbeclearsd.com/moments-of-clarity) as well as a stigma-reduction focused video and related social media posts. These assets help to drive home the fact that substance use disorders can happen to anyone and to help reduce stigma by providing testimonies from individuals that are very relatable.
- A media campaign addressing Native American communities was launched. Placement of media assets was based on data reflecting areas experiencing increased rates of overdose. Media assets included digital video, newspaper, connected TV and radio placements, social media, GoodHealth TV (in schools and healthcare facilities). A partnership with South Dakota tribal members resulted in photos, videos and audio assets from individuals with lived experience that were used throughout the campaign. Messaging focused on the power of community for prevention and building resiliency and support for people on the journey to recovery from substance use.
- Updated print materials were created to continue education around MOUD, how to access and use Naloxone, safe medication storage and disposal and the dangers of fentanyl. New materials were created to provide information specifically to caregivers, parents and youth. A refreshed Overdose Resource Packet was created to be distributed by providers, first responders and others to prevent substance misuse and overdose in their communities.
- Media efforts were expanded to include placement of prevention assets on pharmacy bags throughout the state, digital video on GoodHealth TV within healthcare facilities, and youth targeted video on platforms such as Twitch. Treatment and recovery assets were placed through Google search ads and other display ads statewide. Awareness efforts were expanded through placement on a variety of platforms including Facebook, Instagram, Snapchat, Pinterest, and Reddit to target adults and general audiences.







Current Activities & Future Plans

- A collaboration with the South Dakota High School Activities Association (SDHSAA), South Dakota State University and University of South Dakota will provide highly visible sponsorship opportunities at all major SDHSAA sports championship events and other highly attended sporting events throughout the year. This is an effort to reach youth and families with the message of prevention and recovery from substance use.
- Overdose data reflects that a significant number of fatal and non-fatal overdoses occur within our state's blue collar workforce population. Efforts to promote prevention and linkages to care with employers and their employees will be a focus in the coming year. Assets will include an employer toolkit with prevention, treatment and recovery resources as well as videos featuring local treatment providers for the promotion of stigma reduction.
- The creation of assets that target youth, parents and other caregivers will feature messaging on how parents can start conversations with their children and teens about substance use issues. Assets will include social media posts, youth and parent focused videos and a new youth focused page on the Let's Be Clear SD website.

Key Outcomes & Metrics

- In November 2024 - May 2025, newly created video ads drove an engagement rate of 70%, with 28,757,037 impressions, 3,334,455 interactions and 10,789 conversions. Total website users totaled 40,006 with 51,789 page views and 451 conversions during this same timeframe.
- In July-September 2025, the Native American media campaign resulted in 6,996,281 impressions, 1,815,032 interactions and 3,600 website conversions. Markets included Sioux Falls, Rapid City, Jackson County, Oglala Lakota County, Bennett County, Todd County, Ziebach County, Dewey County, Corson County, Roberts County, Lyman County, Buffalo County.

Prevention

Accomplishments

DSS supports prevention awareness and education across South Dakota in partnership with local community-based coalitions and the Prevention Resource Centers (PRCs). PRCs provide technical assistance and training to promote wellness within the communities of their region. Trained prevention professionals from local community-based coalitions work 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.

In FFY25 and FFY26, DOH established partnerships with seven Community Health Worker organizations to provide overdose prevention education, naloxone availability information and linkages to treatment and recovery resources in their communities to individuals with OUD and their families. This project includes organizations that serve people who are experiencing homelessness, justice involved youth and adults and people who present in a healthcare setting.

DSS is partnering with Emily's Hope in the development and distribution of evidence-based prevention curriculum targeted to school-aged youth.

Key Outcomes & Metrics

- The PRCs focused primarily on material distribution in FFY25, with expanded focus on educating communities around safe medication disposal and storage options as well as overdose response. Their community-level engagement provided for the education of and naloxone distribution to 120 businesses and in equipping more than 500 individuals with safe medication storage or disposal resources.
- DSS expanded its Prevention Network through the addition of a fourth Prevention Resource Center housed in Pierre in partnership with Capital Area Counseling Service. This Prevention Resource Center has been contracted with SOR funding for FFY26 to support community outreach and school-based education.

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

There are no updates or planned activities for the previous, current, or future FFY supporting this goal area. Future efforts supporting this goal area may be supported through Participating Local Governments of the National Opioid Settlement using Localized Share funding, or may be considered for the Opioid Settlement Community Grant Program funded by the Statewide Share.





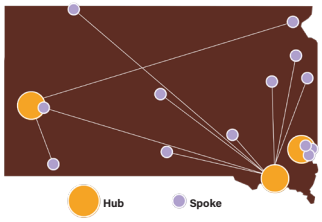
GOAL AREA 2
Treatment and Recovery

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

Continued the provision of Medications for Opioid Use Disorder (MOUD) through enhanced referral systems, care coordination, and hub and spoke care delivery systems. This continues to be the primary strategy funded by federal opioid funding (SOR).

- **In FFY24 and FFY25, MOUD services were delivered by four partners contracted with SOR funds**, including three community-based providers (Lewis & Clark Behavioral Health Services based in Yankton, Project Recovery in Rapid City and Sioux Falls, and Center for Family Medicine in Sioux Falls), providing office-based and telemedicine services for their clients, and one jail setting (Minnehaha County) offering MOUD and case management to individuals while incarcerated.
- **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 individual's needs. Providers also offer integrated supports including but not limited to case management and peer support services.



- **Efforts have increased access to care through an expanded MOUD provider network and hub and spoke model.** Prior to 2018, MOUD was not prevalent across South Dakota; only 15 providers had attained their DATA waiver at the time, indicating they would treat individuals with buprenorphine in office based settings for opioid use disorder. The central priority of initial SOR funding aimed to change that, however the problem at hand was more complicated than simply training providers. South Dakota's rural and frontier geography created challenges in providing sustainable treatment and recovery services across both the medical and behavioral health continuum. A hub and spoke model was implemented to alleviate some of these barriers, creating an infrastructure to support individuals in treatment closer to their home communities. Lewis & Clark Behavioral Health Services (Yankton, SD) built capacity in FFY18-19 to support its hub services and has since formed partnership with several spoke sites whose combined service areas span nearly all of South Dakota's 75,000 plus square miles. Project Recovery (Rapid City) has worked to build similar partnerships in tribal areas including Pine Ridge and Sisseton. The Division of Behavioral Health also assures that all Community Mental Health Centers offer MOUD as an available treatment option for patients.
- **DSS has worked to ensure MOUD is financially accessible through several strategies.** Contracted entities can leverage SOR funding to provide treatment cost assistance for their patients as a payer of last resort. MOUD is also an eligible service covered by Medicaid. With the expanded Medicaid eligibility criteria implemented in July 2023, providers continue to work with existing clients to evaluate their Medicaid eligibility and assist with enrollment for coverage as applicable.

Since 2018, the Treatment Resource Hotline & texting service in partnership with the Helpline Center has provided free, confidential supports, information, and referral to services for individual contacts, 24 hours a day, 365 days a year. This service started prior to 211 being available statewide, and prior to the launch of 988. Beginning in FFY25, promotion of this service is transitioning to 988 so as to streamline messaging and supports available to individuals upon contact.

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.

Current Activities & Future Plans

Continued access to MOUD services remains a key strategy supported by SOR funding through DSS. 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.

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 continues to implement the Emergency Department Provider Toolkit and offers technical assistance to hospitals across the state. This work expanded in FFY25 to include clinics and other healthcare settings in recognition of the need for education across the healthcare industry regarding screening, MOUD treatment, motivational interviewing, stigma reduction, and referral for patients with substance use disorder.

Key Outcomes & Metrics

- Each month in the past fiscal year, an average of 849 individuals were provided SOR-funded treatment or recovery support services related to their opioid or stimulant use disorder. This represents a very consistent level of service delivery month over month as compared to the prior fiscal year.
- A total of 1,133 individuals received SOR-funded treatment cost assistance in FFY25, marking the highest number of unduplicated clients served in a single fiscal year between FFY2019-FFY2025.
- Of the more than 30,600 individual contacts to 988 in the last two federal fiscal years, 8.5% of individuals (2,128) have identified substance use as their primary reason for contacting 988. These contacts are connected to Care Coordination services at the Helpline Center for additional supports and follow-up.
- In FFY25, the Navigator program was used by over 4,763 people to identify if additional referrals would be needed after discharge from behavioral health urgent care or inpatient programs.
- In FFY25, Avera Behavioral Health distributed 800 pill minders and over 500 medication lock boxes to patients.
- In FFY25, a total of 136 healthcare professionals from six hospitals received individualized technical assistance from SDAHO regarding Opioid Use Disorder screening, diagnosis and treatment.

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, evidence-based peer coaching for people living with substance use disorder, 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.

Beginning in FFY22, SOR funding was used to establish self-run, self-supporting and drug-free 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 added in Mitchell and Brookings, and to a total of 28 homes the following year inclusive of Yankton and Sturgis. As of this report, there are 30 homes available statewide, adding Huron to the list.

Bethany Christian Services (BCS) continues to support expectant and new mothers impacted by substance use through evidence-based specialized case management services. The ReNew (Recovering Mothers with Newborns) Program is available out of the Sioux Falls and Rapid City areas, providing services to women there and in the surrounding areas. BCS accepts referrals from maternal and prenatal programs, substance use disorder treatment agencies, MOUD providers, Child Protection Services, probation/parole agents, among others.

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 access to MOUD-friendly recovery housing.
- 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 provides continuation of intensive case management to pregnant and postpartum women via the ReNew Program. The ReNew Program engages with a pregnant woman 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 15 months.

Key Outcomes & Metrics

- Face It TOGETHER provided peer coaching services to 264 individuals impacted by opioid or stimulant use in FFY25.
- Project Recovery offers integrated peer support services to its clients as part of their treatment plan, with nearly all of their MOUD patients (97%) in the past year receiving at least one coaching session.
- Oxford House has implemented and now supports 30 houses with a total capacity of 238 beds (+26 new beds added in the last year) across South Dakota. A total of 941 individuals (+38% over the previous year) became a resident in one of the South Dakota Oxford Homes during FFY25.
- 84 unduplicated individuals have been provided services by BCS in the last fiscal year.





GOAL AREA 3
Reducing Illicit Supply

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

Accomplishments

Unused or expired medications that are left sitting in your medicine cabinet are easy targets for misuse. Best practices for safe medication disposal have been developed and continue through federal fund support. Key initiatives include permanent drug take-back locations, support and promotion of the DEA National Drug Take-Back Day, safe at-home disposal options, and safe at-home medication storage.

In partnership with DSS, the South Dakota Board of Pharmacy supports 90 permanent drug take-back receptacles in retail pharmacies and hospitals across South Dakota. Locations and contact information for permanent drug take-back sites can be found online at https://letsbeclearsd.com/prevention/safe-disposal#map.

Free DisposeRx packets for at-home disposal and free medication lock boxes can be requested through the Helpline Center via 988, 211, or online at https://letsbeclearsd.com/prevention/safe-disposal.

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 2025, the PharmaDrop Program has returned a total of 76,409 pounds of drugs for destruction.
- Promotional activities through the Avoid Opioid campaign and community partners supported two successful DEA National Take-Back Days on October 26, 2024, and April 26, 2025, where a total of 1,421 pounds of medication were collected for destruction through participating law enforcement locations. This was in addition to the 2,675 pounds collected through the PharmaDrop Program those same months.

GOAL AREA 4
Response to Opioid Misuse



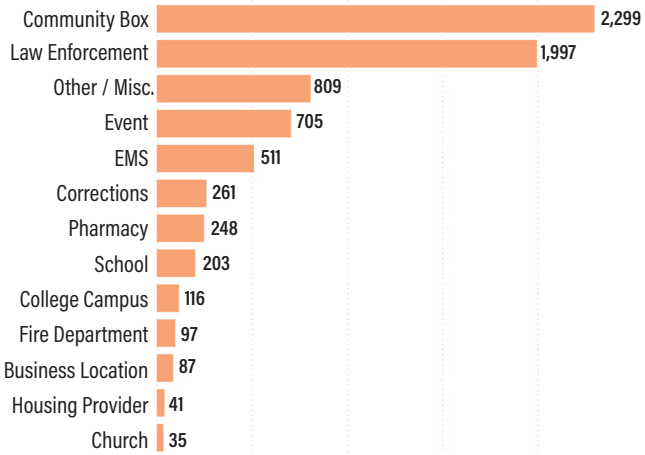
8. **Enhance overdose education and naloxone distribution across South Dakota through expanded training and continued, coordinated distribution.**

Accomplishments

During FFY25, South Dakota's naloxone distribution program achieved significant statewide reach. Through coordinated partnerships and targeted community outreach, 7,409 naloxone kits were distributed.

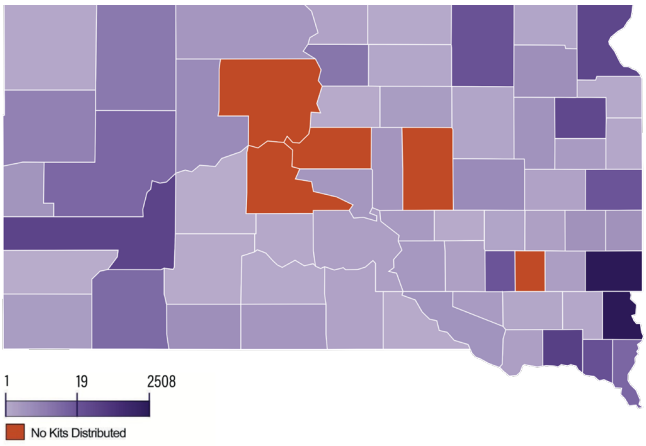
- ***Geographic Reach:*** The Sioux Falls metropolitan area (comprising Minnehaha, Lincoln, McCook, and Turner counties) received 2,530 kits, representing 34% of total statewide distribution. This concentration aligns with population density and identified community needs. Rapid City (Pennington County) received 684 kits, supporting regional access to naloxone.
- ***First Responder Access:*** Law enforcement agencies received 1,997 naloxone kits, enhancing officer capacity to respond to overdose emergencies. Combined with more than 500 kits distributed to EMS units, first responder networks maintain more than 2,500 doses for immediate deployment, strengthening emergency response infrastructure across the state.
- ***Community Distribution:*** Across all distribution channels, public access distribution boxes accounted for the largest share with 2,299 kits (31% of total), expanding 24/7 community access to naloxone statewide. Emily's Hope distributed 3,159 kits, representing 43% of the total distribution in the past year. This community-based organization plays a critical role in reaching populations through peer-driven outreach and anonymous access to naloxone within South Dakota communities.

NALOXONE KITS DISTRIBUTION CHANNELS IN FFY25



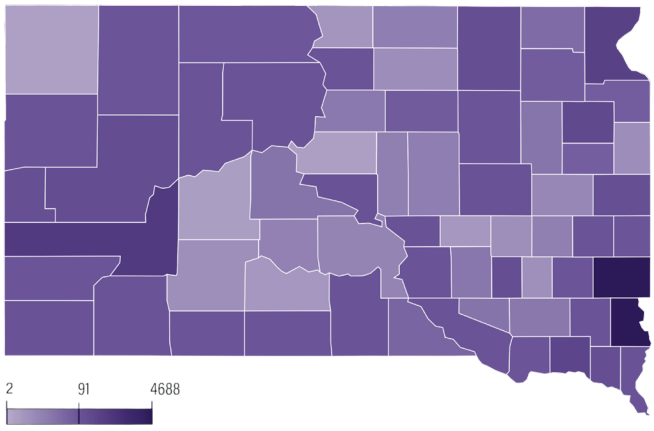


NALOXONE DISTRIBUTION ACROSS SOUTH DAKOTA - FFY25 ONLY



NALOXONE DISTRIBUTION ACROSS SOUTH DAKOTA

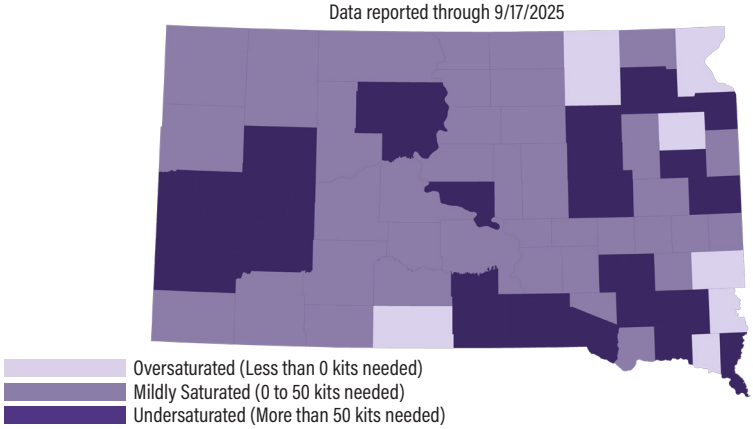
Data represents distribution since 2017 through 2025



Developed and updated a naloxone saturation plan between FFY24-FFY25. This plan uses surveillance and prevalence data associated with opioid overdose in alignment with national best practices in determining ideal level of saturation of communities statewide. The plan also considers distribution by county of pharmacy-based naloxone paid through SOR funds. DSS participated in numerous Learning Communities hosted by SAMHSA and the National Association of State Alcohol and Drug Agency Directors (NASADAD) to support states in their efforts in creating naloxone saturation plans applicable to their areas. The SD SOR team meets monthly to target county specific naloxone saturation based on overdose rates.

FFY25 NALOXONE SATURATION BY COUNTY

Data reported through 9/17/2025



Continued to support the statewide standing order for naloxone (effective through September 2025), allowing 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. Partnering pharmacies can be reimbursed for the cost of medication in these instances. The goal of the statewide standing order is to prevent overdose deaths from opioids.

Expanded the OEND program in September 2025 to include all other FDA-approved opioid antagonists in addition to NARCAN.

Implemented policies and developed staff training to support a Naloxone for Business program. All DOH offices are equipped with naloxone to use in case of an overdose.

Current Activities & Future Plans

Increase access to all FDA-approved overdose reversal agents through expanded distribution of nasal spray naloxone (NARCAN) statewide, efforts guided by the state's naloxone saturation plan, targeted to high need areas, and procurement and installation of publicly accessible storage solutions for naloxone and opioid overdose response tools to improve capacity of bystanders to a suspected overdose.

Continue to provide training in overdose education and naloxone distribution for targeted audiences as well as the general public.

Increase public awareness of how and where to access both over-the-counter and prescription-based opioid overdose reversal medications, and how to recognize signs of an opioid overdose and respond in emergency situations. Continue to engage with pharmacies to encourage enrollment as a partnering pharmacy on the standing order.

Continue piloting two overdose follow-up programs 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.

Update and refine the naloxone saturation plan on a regular basis using data from DOH, DSS, and ODMap, aimed at equipping counties most vulnerable for opioid overdose with life-saving overdose reversal medication.

Key Outcomes & Metrics

- Since December 2017, a total of 1,747 individuals at risk of an opioid-overdose related death have had an improved response in their condition following administration of NARCAN® by EMS personnel.
- 116 pharmacies (+15 over FFY24) have enrolled to participate in the statewide standing order. A comprehensive map of participating pharmacies can be found at https://letsbeclearsd.com/prevention/find-pharmacy.
- In FFY24, all DOH staff received training on recognizing the signs of an opioid overdose and how to administer Naloxone. Naloxone is available in each DOH office in the state for emergency purposes. DSS equipped two of its offices in FFY24 with efforts continuing to date to expand in other locations.



APPENDIX A: OPIOID ABUSE ADVISORY COMMITTEE MEMBERS

Lori Martinec, DOH, Committee Chair
Becky Heisinger, SDAHO
Sara DeCoteau, Sisseton Wahpeton Oyate of the Lake Traverse Reservation
Margaret Hansen, South Dakota Board of Medical & Osteopathic Examiners
Mallie Kludt, Volunteers of America-Dakotas
Brenna Koedam, DSS
Amanda Miiller, Attorney General's Office Representative
Kristen Carter, South Dakota Pharmacists Association
William Ryman, Great Plains Indian Health Services
Tyler Laetsch, South Dakota Board of Pharmacy
Representative Taylor Rehfeldt, South Dakota Legislature
Erin Miller, PhD, South Dakota State University, College of Pharmacy & Allied Health Professions
Ronald Goodsell, Dakota Plains Transitional Living
Shannon Emry, MD, Midwest Street Medicine
Brian Mueller, Pennington County Sheriff's Office
Joe Kippley, Sioux Falls Health Department
Susan Kornder, Northeastern Mental Health Center
Mary Beth Fishback, Brookings Behavioral Health and Wellness
Dusty Pelle, Pierre Police Department
Jason Foote, Yankton Police Department
John Rounds, PT, Pierre Physical Therapy & Rehabilitation
Melanie Weiss, OD, Weiss Eyecare Clinic



APPENDIX B: OPIOID SETTLEMENT PARTICIPATING LOCAL GOVERNMENTS

Participating Counties (53)		Participating Cities (13)
Aurora	Jackson	Aberdeen
Beadle	Jerauld	Box Elder
Bon Homme	Jones	Brandon
Brookings	Lake	Brookings
Brown	Lawrence	Huron
Brule	Lincoln	Mitchell
Butte	McCook	Pierre
Campbell	McPherson	Rapid City
Charles Mix	Meade	Sioux Falls
Clark	Mellette	Spearfish
Clay	Minnehaha	Vermillion
Codington	Oglala Lakota	Watertown
Corson	Pennington	Yankton
Custer	Perkins	
Davison	Potter	
Deuel	Roberts	
Dewey	Sanborn	
Edmunds	Spink	
Fall River	Sully	
Faulk	Todd	
Grant	Tripp	
Gregory	Turner	
Hand	Union	
Hanson	Walworth	
Harding	Yankton	
Hughes	Ziebach	
Hutchinson		



APPENDIX C: OPIOID SETTLEMENT LOCALIZED SHARE FUNDS DETAIL

Report Timeline: State Fiscal Year 2025 (ending 6/30/2025)

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

	DISBURSEMENTS			
Participating City	Total Disbursements *through SFY2024 (6/30/2024)*	Disbursements Received in SFY2025	Total Disbursements *through SFY2025 (6/30/2025)*	Funds Expended or Awarded *Total through CY2024*
Aberdeen	$109,131.40	$45,231.31	$154,362.71	$0.00
Box Elder	$13,796.03	$5,717.99	$19,514.02	$16,901.97
Brandon	$24,593.59	$10,193.23	$34,786.82	$0.00
Brookings	$148,678.43	$61,622.25	$210,300.68	$30,476.26
Huron	$50,922.62	$21,105.73	$72,028.35	$2,011.44
Mitchell	$92,124.06	$38,182.35	$130,306.41	$2,654.80
Pierre	$38,099.77	$15,791.09	$53,890.86	$27,411.83
Rapid City	$425,895.91	$176,519.63	$602,415.54	$53,460.00
Sioux Falls	$1,328,276.51	$550,526.25	$1,878,802.76	$357,000.00
Spearfish	$50,307.78	$20,850.89	$71,158.67	$65,162.25
Vermillion	$36,237.35	$15,019.15	$51,256.50	$35,036.75
Watertown	$98,873.15	$40,979.62	$139,852.77	$91,041.85
Yankton	$74,891.35	$31,039.96	$105,931.31	$96,813.35

*** Totals are included at the end of this section for distributions and awards for all participating local governments.***

Per the terms of the MOA, expenditure and award data was reported on the calendar year, and disbursement data is reported on the fiscal year.

Participating Counties	DISBURSEMENTS			Funds Expended or Awarded *Total through CY2024*
	Total Disbursements *through SFY2024 (6/30/2024)*	Disbursements Received in SFY2025	Total Disbursements *through SFY2025 (6/30/2025)*	
Aurora	$7,864.62	$3,259.62	$11,124.24	$0.00
Beadle	$53,582.91	$22,208.32	$75,791.23	$20,000.00
Bon Homme	$37,060.86	$15,360.49	$52,421.35	$47,467.45
Brookings	$17,175.03	$7,118.47	$24,293.50	$21,085.07
Brown	$108,872.63	$45,124.06	$153,996.69	$57,925.00
Brule	$49,309.28	$20,437.03	$69,746.31	$2,278.00
Butte	$54,707.60	$22,674.48	$77,382.08	$68,976.28
Campbell	$4,182.29	$1,733.42	$5,915.71	$0.00
Charles Mix	$49,546.60	$20,535.40	$70,082.00	$28,655.00
Clark	$9,169.51	$4,791.00	$13,960.51	$0.00
Clay	$27,059.14	$11,215.10	$38,274.24	$28,516.85
Codington	$53,449.48	$22,153.03	$75,602.51	$0.00
Corson	$21,017.06	$8,710.88	$29,727.94	$24,295.96
Custer	$66,608.93	$27,607.17	$94,216.10	$0.00
Davison	$41,769.48	$17,312.06	$59,081.54	$0.00
Deuel	$24,729.13	$10,249.40	$34,978.53	$0.00
Dewey	$22,675.95	$9,398.44	$32,074.39	$0.00
Edmunds	$15,501.46	$6,424.84	$21,926.30	$18,990.64
Fall River	$134,639.50	$55,803.59	$190,443.09	$125.85
Faulk	$16,991.50	$7,042.42	$24,033.92	$0.00
Grant	$42,430.02	$17,585.82	$60,015.84	$51,982.39
Gregory	$34,045.39	$14,110.68	$48,156.07	$44,011.07
Hand	$14,716.76	$6,099.60	$20,816.36	$0.00
Hanson	$9,096.54	$3,770.23	$12,866.77	$0.00
Harding	$3,804.68	$1,576.94	$5,381.62	$3,114.42
Hughes	$49,869.17	$20,669.10	$70,538.27	$298.65
Hutchinson	$34,683.43	$14,375.13	$49,058.56	$37,228.50
Jackson	$8,809.44	$3,651.21	$12,460.65	$0.00
Jerauld	$19,968.65	$8,276.34	$28,244.99	$0.00
Jones	$2,768.50	$1,147.45	$3,915.95	$0.00
Lake	$50,707.96	$21,016.74	$71,724.70	$0.00
Lawrence	$146,095.99	$60,551.92	$206,647.91	$25,360.38
Lincoln	$77,292.72	$32,035.25	$109,327.97	$30,000.00
McCook	$18,678.72	$7,741.70	$26,420.42	$6,161.07
McPherson	$9,886.63	$4,097.67	$13,984.30	$12,349.10

*** Table continued on next page.***

Participating Counties	DISBURSEMENTS			Funds Expended or Awarded *Total through CY2024*
	Total Disbursements *through SFY2024 (6/30/2024)*	Disbursements Received in SFY2025	Total Disbursements *through SFY2025 (6/30/2025)*	
Meade	$200,396.26	$83,057.57	$283,453.83	$7,500.00
Mellette	$11,327.27	$4,694.77	$16,022.04	$5,000.00
Minnehaha	$749,186.58	$310,512.81	$1,059,699.39	$453,569.02
Oglala Lakota	$85,308.78	$35,357.66	$120,666.44	$0.00
Pennington	$494,040.53	$204,763.29	$698,803.82	$43,662.99
Perkins	$13,502.52	$7,054.96	$20,557.48	$0.00
Potter	$11,261.38	$4,466.48	$15,727.86	$0.00
Roberts	$60,941.84	$25,258.36	$86,200.20	$0.00
Sanborn	$6,998.02	$2,900.46	$9,898.48	$5,299.00
Spink	$44,890.89	$18,605.79	$63,496.68	$0.00
Sully	$3,874.64	$1,605.90	$5,480.54	$1,545.00
Todd	$65,440.74	$27,123.00	$92,563.74	$0.00
Tripp	$32,452.63	$13,245.62	$45,698.25	$0.00
Turner	$40,062.73	$16,604.67	$56,667.40	$0.00
Union	$89,055.53	$36,910.53	$125,966.06	$11,322.00
Walworth	$34,412.99	$14,263.03	$48,676.02	$0.00
Yankton	$87,231.60	$36,154.60	$123,386.20	$72,049.78
Ziebach	$18,907.48	$7,836.53	$26,744.01	$884.76
TOTAL Localized Share	$3,388,059.97	**$1,406,281.03**	**$4,794,341.00**	**$1,129,654.23**

Breakdown of Localized Share Expenditures or Awards

A total of 40 participating local governments reported expenditures or awards through 12/31/2024. Expenditures (money paid directly) made by the government are noted below, along with any awards (money allocated to a third party) they made, including the amount awarded and the strategy funded. The amount disbursed and terms of disbursements for awards allocated to a third party are available upon request to DSS or by contacting the Participating Local Government directly. Amounts may vary from the previous year due to updated reporting. Local governments audited and reported expenses dating back to 2022, resulting in several minor changes included in the 2024 reporting period.

MOA Approved Use categories reported as having expenditures or awards during the reporting period included the following (note that not all Approved Use categories had documented expenditures or awards):

Part One: Treatment
- (A) Treat Opioid Use Disorder
- (B) Connect People who Need Help to the Help They Need (Intervention)
- (C) Support People in Treatment and Recovery and Reduce Stigma
- (D) Address the Needs of Criminal-Justice-Involved Persons
- (E) Address the Needs of Women who are or may become Pregnant

Part Two: Prevention
- (G) Prevent Misuse of Opioids
- (H) Prevent Overdose Deaths and Other Harms (Harm Reduction)

Part Three: Other
- (I) First Responders
- (J) Leadership, Planning and Coordination
- (K) Training

			CY2024 Expenditures & Awards Breakdown		
Participating Local Government	**Funds Expended or Awarded** *Total through CY2024*	**Funds Expended or Awarded** *CY2024 only*	**Part One: Treatment**	**Part Two: Prevention**	**Part Three: Other**
Beadle County	$20,000.00	$20,000.00	(D) $20,000 expended		
Bon Homme County	$47,467.45	$40,312.45	(A) $40,312.45 awarded to Lewis & Clark Behavioral Health		
Box Elder	$16,901.97	$14,074.03			(I) $14,074.03 awarded to City of Box Elder
Brookings	$30,476.26	$0.00			
Brookings County	$21,085.07	$20,069.84	(A) $20,069.84 awarded to Brookings County		
Brown County	$57,925.00	$57,925.00	(D) $25,000 awarded to Brown County Treatment Court Association	(H) $23,291.85 awarded to Brown County Sheriff's Dept. (H) $9,633.15 awarded to Brown County Sheriff's Office	
Brule County	$2,278.00	$2,278.00		(G) $2,278 awarded to Act on Drugs Inc	
Butte County	$68,976.28	$58,717.69	(C) $17,029.68 awarded to New Dawn Center (D) $17,029.68 awarded to Teen Court (D) $7,628.67 awarded to Northern Hills Drug Court"	(G) $17,029.68 awarded to Action for the Betterment of the Community (ABC)	
Charles Mix County	$14,327.50	$0.00			
Clay County	$28,516.85	$22,970.24	(A) $22,970.24 awarded to Lewis & Clark Behavioral Health Services		
Corson County	$24,295.96	$24,295.96			(I) $24,295.96 awarded to DetectaChem
Edmunds County	$18,990.64	$15,813.84			(K) $15,813.84 awarded to Edmunds County Auditor
Fall River County	$125.85	$0.00			
Grant County	$51,982.39	$43,285.02		(G) $43,285.02 awarded to Milbank School District	
Gregory County	$44,011.07	$37,032.41	(C) $37,032.41 awarded to Southern Plain Behavioral Health Services		

*** Table continued on next page.***

Participating Local Government	Funds Expended or Awarded *Total through CY2024*	Funds Expended or Awarded *CY2024 only*	CY2024 Expenditures & Awards Breakdown		
			Part One: Treatment	Part Two: Prevention	Part Three: Other
Harding County	$3,114.42	$1,666.42	(B) $284.00 awarded to Harding County Ambulance	(H) $182.42 awarded to Harding County Auditor	(I) $1,200 awarded to Harding County EMT
Hughes County	$298.65	$298.65	(D) $298.65 awarded to Hughes County Jail		
Huron	$2,011.44	$0.00			
Hutchinson County	$37,228.50	$30,149.06	(A) $30,149.06 awarded to Lewis & Clark Behavioral Health Services		
Lawrence County	$25,360.38				
Lincoln County	$30,000	$15,000	(A) $15,000 awarded to Sioux Empire Triage Center dba The Link		
McCook County	$6,161.07	$2,332.29		(G) $1,721.79 awarded to Creative Product Sourcing Inc	(K) $360.50 awarded to I Love U Guys Foundation (K) $125 awarded to Kristin Nogelmeier (K) $125 awarded to Kristin Norris"
McPherson County	$12,349.10	$8,849.10		(H) $2,051.10 awarded to McPherson County Sheriff's Office	(H) $1,890 awarded to McPherson County Sheriff's Office (I) $908 awarded to West McPherson EMS and Leola Ambulance (K) $4,000 awarded to Northeastern Mental Health Center"
Meade County	$7,500	$7,500		(G) $7,500 awarded to Northern Hills Drug Court	
Mellette County	$5,000.00	$4,722.18		(G) $4,722.18 awarded to Michael Glynn Memorial Coalition	
Minnehaha County	$453,569.02	$300,000.00	(B) $300,000 awarded to Sioux Empire Triage Center dba The Link		
Mitchell	$2,654.80	$1,349.70		(H) $1,349.70 awarded to Mitchell City	
Pennington County	$43,662.99	$39,166.22	(A) $39,166.22 awarded to Pennington County		
Pierre	$27,411.83	$20,833.06	(B) $20,833.06 awarded to Capital Area Counseling Service		
Rapid City	$53,460.00	$2,016.14		(H) $2,016.14 awarded to FarrWest	
Sanborn County	$5,299.00	$4,650.00	(C) $2,500 awarded to Contributions to Safe House		(I) $2,000 awarded to Drug Task Force (I) $150 awarded to First Responder Training
Sioux Falls	$357,000.00	$357,000.00	(B) $357,000 awarded to Sioux Empire Triage Center dba The Link		
Spearfish	$65,162.25	$54,721.59	(D) $2,687.64 awarded to Race Wheels LLC	(G) $32,998.26 awarded to Race Wheels LLC	(I) $3,000 awarded to Gracie University Store (I) $15,204.57 awarded to Race Wheels LLC (I) $699 awarded to Relentless LLC (I) $132.12 awarded to Saferestraints"

*** Table continued on next page.***

Participating Local Government	Funds Expended or Awarded *Total through CY2024*	Funds Expended or Awarded *CY2024 only*	CY2024 Expenditures & Awards Breakdown		
			Part One: Treatment	Part Two: Prevention	Part Three: Other
Sully County	$1,545.00	$1,545.00	(A) $1,545 awarded to Capital Area Counseling Services		
Union County	$11,322.00	$11,322.00		(G) $11,322 awarded to Alluvit Media	
Vermillion	$35,036.75	$29,323.80	(D) $29,323.80 awarded to City of Vermillion		
Watertown	$91,041.85	$70,774.73		(G) $70,774.73 awarded to Watertown Police Dept	
Yankton	$96,813.35	$81,462.04	(C) $13,842.90 awarded to Lewis & Clark Behavioral Health Services	(G) $1,844.14 awarded to Creative Products (H) $65,775 awarded to DetectaChem, Inc."	
Yankton County	$72,049.78	$56,987.31	(A) $7,344.14, (B) and (C) $7,718.33 each awarded to Lewis and Clark Behavioral Health Services	(H) $32,925 awarded to DetectaChem (H) $1,281.51 awarded to Nartec, Inc"	
Ziebach County	$884.76	$369.00		(H) $369.00 awarded to Ziebach County	
TOTAL	**$1,892,282.00**	**$1,455,292.86**	**$1,038,964.17**	**$332,350.67**	**$83,978.02**



APPENDIX D: OPIOID SETTLEMENT STATEWIDE SHARE FUNDS DETAIL

Report Timeline: Preceding Fiscal Year (SFY 2025)

The trustees of the settlements distribute the Statewide Share directly to DSS. In accordance with the MOA, this report includes an accounting of opioid funds distributed from the national settlement trustees to South Dakota via the statewide share for the preceding fiscal year. Refer to the South Dakota Opioid Settlement Dashboard for real-time accounting of all awards and expenditures.

Breakdown of Community Grant Awards

A total of 32 community grant awards were made during this reporting period. See pages 35-36 for a detailed breakdown of these awards.

Number of Awards Granted	Amount Awarded	Amount Expended
Spring 2024 - 11	$362,242	$316,608
Spring 2025 - 21	$693,846	$0
TOTALS	**$1,056,088**	**$316,608**

Breakdown of Overdose Follow-Up Program Awards

Two (2) contracts were continued into SFY25 to support pilot strategies at the community level for overdose follow-up programs. Both contracts began June 1, 2024, and are continuing their efforts into the current state fiscal year.

Organization	Amount Awarded	Amount Expended
Emily's Hope	$176,488	$125,273
Project Recovery	$169,957	$68,326
TOTALS	**$346,445**	**$193,599**

Breakdown of Naloxone Access Awards

One (1) contract was extended SFY25 to support pilot strategies at the community level for overdose follow-up programs. This contract and scope are continuing into the current state fiscal year.

Organization	Amount Awarded	Amount Expended
Emily's Hope	$49,440	$49,440
TOTALS	**$49,440**	**$49,440**

Breakdown of Community Grant Program Awards

A total of 32 community grant awards were made during this reporting period.

*Project start date in SFY26

Organization	Amount Awarded	Amount Expended	Project Description	Approved Use Area of the Settlement Agreement
Addiction Recovery Centers of the Black Hills*	$66,300	$0	Enhance outpatient services through implementation of the TRUST Program, developed by Betty Ford Clinics, along with evidence-based opioid use treatments.	Treatment - Treat Opioid Use Disorder
Alliance for Substance Abuse Prevention	$34,067	$30,237	Enhance the prevention efforts of ASAP's Coalition Community Prevention Partnership Network through a media campaign and health promotion activities. Media efforts are localized to ASAP's service area (Rapid City) and will complement the state's public awareness efforts.	Prevention - Prevent Misuse of Opioids
B S Behind Bars*	$34,985	$0	Hire a dedicated peer support professional and provide specialized training to develop knowledge- based approaches for supporting residents receiving treatment for opioid use disorder.	Treatment- Support People in Treatment and Recovery and Reduce Stigma
Black Hills Special Services Cooperative*	$35,000	$0	Implement an innovative escape room simulation program to increase empathy and understanding around addiction, capturing participant feedback to identify systemic barriers.	Other - Training
Body Spa	$35,000	$19,400	Provide whole body cryotherapy services as an alternative pain management strategy to prescreened at risk Veteran clients and will collect data on outcomes among clients served with this therapy versus alternate therapies.	Prevention - Prevent Over-Prescribing and Ensure Proper Prescribing of Opioids
Boys & Girls Club of Moody County*	$27,533	$0	Implement "Keeping it REAL" training and professional counseling services in partnership with Brookings Behavioral Health.	Prevention - Prevent Misuse of Opioids
Boys & Girls Club of Yankton*	$27,533	$0	Implement "Keeping it REAL" training and professional counseling services in partnership with Brookings Behavioral Health.	Prevention - Prevent Misuse of Opioids
Boys & Girls Club of Brookings*	$27,533	$0	Implement "Keeping it REAL" training and professional counseling services in partnership with Brookings Behavioral Health.	Prevention - Prevent Misuse of Opioids
Boys & Girls Club of Vermillion*	$27,533	$0	Implement "Keeping it REAL" training and professional counseling services in partnership with Brookings Behavioral Health.	Prevention - Prevent Misuse of Opioids
Brookings Area United Way	$33,956	$33,945	Funds will primarily support staff time in planning and implementing stigma reduction activities and increasing awareness of local resources to individuals in Brookings (direct staff as well as contracted subject matter expertise from a local CSW-PIP). Funds will also support community education events and local public awareness efforts through radio and Every Door Direct Mail USPS postcard campaign.	Treatment - Support People in Treatment and Recovery and Reduce Stigma
Charles Mix County Sheriff	$13,904	$13,904	Purchase of medical equipment for monitoring of inmates in withdrawal, allowing them to provide more timely identification and intervention in the event of a crisis. Maintenance fees would occur in future years and be submitted to the county auditor.	Treatment - Address the Needs of Criminal-Justice Involved Persons
Community Counseling Services*	$34,969	$0	Facilitate warm hand-off connections for emergency room transitions and stigma reduction efforts through community engagement.	Treatment - Support People in Treatment and Recovery and Reduce Stigma
Coteau des Prairies Health*	$30,574	$0	Provide care coordination services and naloxone distribution while incorporating evidence-based contingency management strategies to improve individual recovery.	Treatment - Treat Opioid Use Disorder
Emily's Hope, Inc.*	$49,546	$0	Distribution of naloxone statewide targeting areas of highest need and provide training on overdose prevention and response.	Prevention - Prevent Overdose Deaths and Other Harms
Emily's Hope, Inc.*	$47,146	$0	Funding evidence-based prevention programs in schools or evidence-informed school and community education programs for students, families, school employees, school athletic programs, parent-teacher and student associations, and others.	Prevention - Prevent Misuse of Opioids
Face It Together*	$35,000	$0	Offer one-on-one coaching services and support groups to help loved ones improve their wellness, communication skills, and ability to support persons at risk.	Treatment - Support People in Treatment and Recovery and Reduce Stigma
Fall River County, SD Communities That Care	$14,625	$13,501	Work with local key leaders and service providers to provide naloxone to those who need it or will benefit from having it available. This service will provide naloxone for free and train for its use. Funds will support staff time and media to promote overdose education, and purchase of medication.	Prevention - Prevent Overdose Deaths and Other Harms

*** Table continued on next page.***

Breakdown of Community Grant Program Awards

*Project start date in SFY26

Organization	Amount Awarded	Amount Expended	Project Description	Approved Use Area of the Settlement Agreement
Friends of the Children – He Sapa	$35,000	$35,000	Funds will support delivery of evidence-informed programming for youth at risk for overdose connected to opioid use. The prevention strategy is grounded in Lakota traditions and values and designed to increase protective factors for youth and their families in Rapid City and Pine Ridge Reservation. Most of the budget supports direct mentoring services to youth/families, with other staff supporting connections to partners and resources in the community.	Prevention - Prevent Misuse of Opioids
Hope House Inc*	$35,412	$0	Enhance sober living services available in Huron, SD.	Treatment - Support People in Treatment and Recovery and Reduce Stigma
Kingdom Boundaries Prison Ministry Aftercare	$34,690	$33,863	Funds to support case management staff time to increase access to supportive services for residents. Services would be targeted to those impacted by opioid use disorder, but available to all residents.	Treatment - Support People in Treatment and Recovery and Reduce Stigma
Michael Glynn Memorial Coalition*	$13,534	$0	Host multiple targeted events with information and presentations related to opioid prevention.	Prevention - Prevent Misuse of Opioids
Midwest Street Medicine	$35,000	$35,000	Pilot of a mobile treatment model for opioid use disorder, targeting unhoused or housing insecure individuals in Sioux Falls as well as those recently released from prison or jail. Mobile induction will be managed and monitored one-hour post induction by a prescriber and aligns with TIP 40. Funds will support physician outreach time, cost assistance towards FDA-approved OUD medications, and harm reduction supplies.	Treatment - Treat Opioid Use Disorder
Midwest Street Medicine*	$35,000	$0	Provide immediate street-level support for homeless individuals with opioid use disorder in Sioux Falls.	Treatment - Treat Opioid Use Disorder
Passages Women's Transitional Living*	$35,000	$0	Develop individualized recovery plans tailored to women with opioid use disorder, and strengthen peer-to-peer supports and mentor support systems.	Treatment- Support People in Treatment and Recovery and Reduce Stigma
SD High School Coaches Association	$56,000	$56,000	Coaches vs Overdoses program addressing need for education and prevention for student athletes, their families and coaches. Statewide reach with targeted efforts on tribal lands. Submitted two applications; scoring team combined into one to support both areas.	Prevention - Prevent Misuse of Opioids
South Dakota Law Enforcement Training Center*	$33,512	$0	Purchase commercial-grade fitness equipment to improve the physical and mental health of law enforcement officers statewide.	Other - Leadership, Planning and Coordination
South Dakota School of Mines & Technology*	$16,707	$0	Address opioid and substance use among students on its campus and neighboring institutions: Western Dakota Tech and Black Hills State University-Rapid City.	Prevention - Prevent Misuse of Opioids
Straight Up Care	$35,000	$10,758	Expanding access to free, virtual peer support services for individuals impacted by opioid-related concerns, and raising awareness of the resources across the state. Funds primarily support peer coaching vouchers ($25,000) and staff time/ indirect costs to support outreach and awareness.	Treatment - Support People in Treatment and Recovery and Reduce Stigma
University of South Dakota*	$35,000	$0	Evaluate a scalable, evidence-based intervention that integrates physiological and behavioral approaches to improve recovery outcomes.	Treatment - Treat Opioid Use Disorder
Wagner Communities That Care*	$35,000	$0	Expand prevention programming through initiatives such as Project SUCCESS and develop a Youth Development Board / Peer Leadership Group to address perceived risk of opioid misuse.	Prevention - Prevent Misuse of Opioids
Wagner Communities That Care Coalition	$35,000	$35,000	Funds to support staff time in delivery of prevention curriculum: Too Good For Drugs, Youth Mental First Aid and Peer Mental First Aid, in Wagner Schools grades 6-12. Work coordinated by the Wagner Community Memorial Hospital.	Prevention - Prevent Misuse of Opioids
Youth & Family Services, Inc.*	$11,029	$0	Incorporate trauma-informed care practices for individuals with family members who have opioid use disorder and co-occurring conditions.	Treatment - Support People in Treatment and Recovery and Reduce Stigma
TOTALS	**$1,056,088**	**$316,608**		