



**DMHAS**  
Division of Mental Health  
and Addiction Services

# Opioid Recovery and Remediation Funds

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DMHAS

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# Nationwide Opioid Settlement

A large blue dollar sign followed by the number '1B' in a bold, dark blue font, all set against a light yellow circular background.

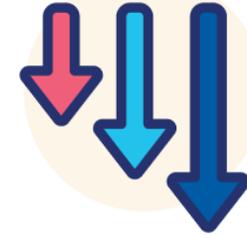
New Jersey will receive **more than \$1 billion** from nationwide opioid settlements.

The numbers '50' over '50' with a diagonal slash through them, all in dark blue, set against a light yellow circular background.

The abatement funds will be divided **50/50** between state and local municipalities.



These funds may be used for programs that focus on **treatment, prevention, and other strategies** to combat the substance use and opioid epidemic.



These funds may also be spent on strategies to reduce the substance use opioid epidemic's **ongoing harms to residents and communities.**



# Allowable Uses: Opioid Abatement Funds

Harm Reduction	Treatment
Long-Term Resiliency	Education, Awareness and Training
Workforce Development	Prevention and Recovery Supports
Leadership, Planning and Coordination	Research and Education
<b>Serving Specialty Populations</b> Pregnant and Postpartum; Justice-Involved; Underserved Persons	

# NALOXONE

CAN REVERSE AN  
OPIOID OVERDOSE.



NO COST  
ASSOCIATED



NO PRESCRIPTION  
NEEDED



NO NAME  
REQUIRED



LEARN HOW TO GET IT FREE AT  
**STOPOVERDOSES.NJ.GOV**

# LA NALOXONA

SALVÓ A MI PADRE DE UNA  
SOBREDOSIS DE OPIOIDES.



VISITE **STOPOVERDOSES.NJ.GOV**  
PARA APRENDER CÓMO OBTENERLO GRATIS





# Annual Opioid Settlement Report

Published October 2025

# New Jersey Opioid Settlement: State Funding

State Funding

Program Spending

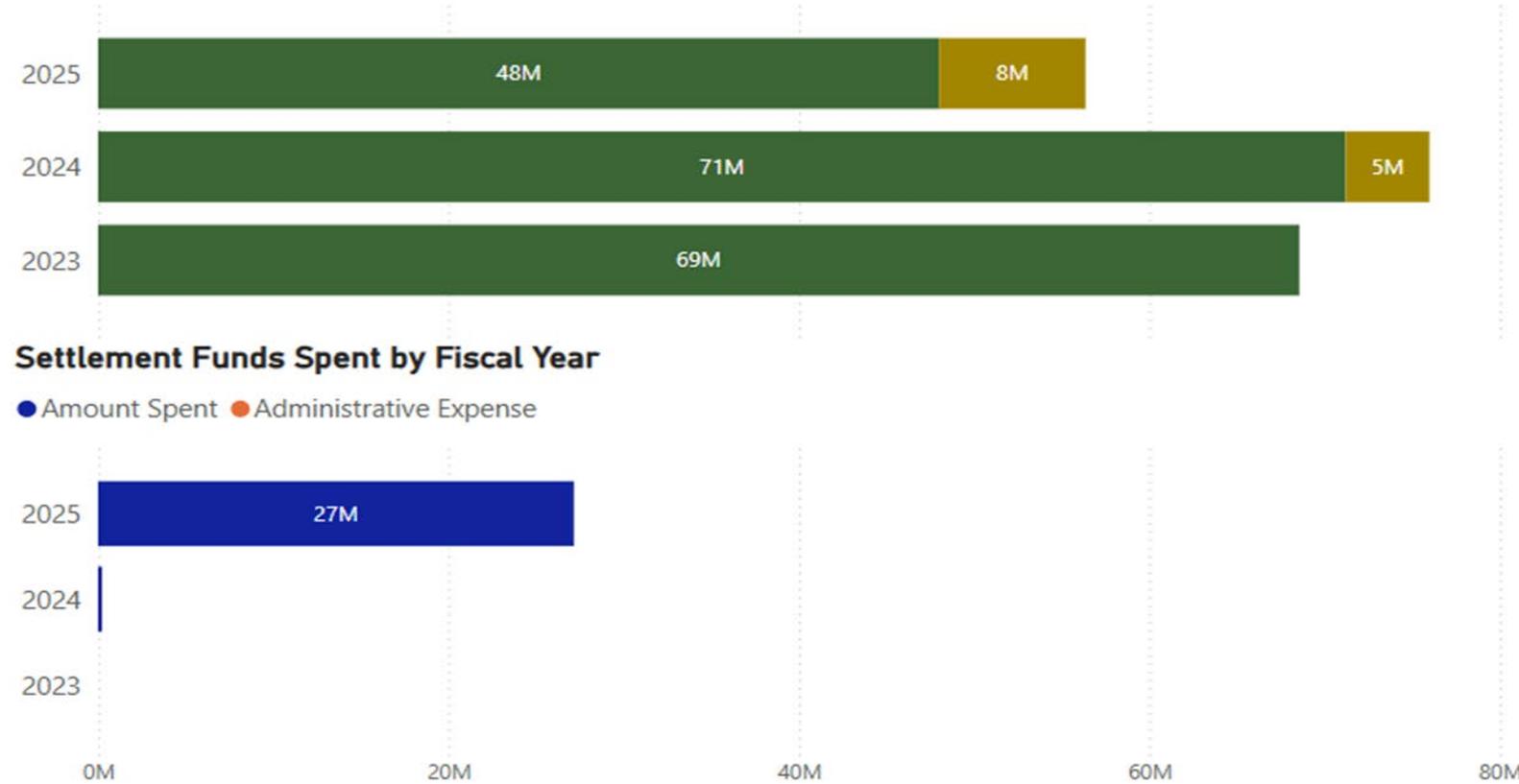
Program Strategy

Program Details



## Settlement Funds Received by State by Fiscal Year

● Amount Received ● Interest Accrued



## Settlement Funds Spent by Fiscal Year

● Amount Spent ● Administrative Expense



Fiscal Year	Funding Received	Interest Accrued
2023	\$68,556,461	
2024	\$71,199,222	\$4,777,043
2025	\$47,995,078	\$8,360,880
<b>Total</b>	<b>\$187,750,762</b>	<b>\$13,137,922</b>

Fiscal Year	Amount Spent	Administrative Expense
2023		\$0
2024	\$223,495	\$0
2025	\$27,155,844	\$0
<b>Total</b>	<b>\$27,379,339</b>	<b>\$0</b>



# Community Peer Recovery Centers Expansion

- Number of participants served: 14,589
  - Number of naloxone kits distributed: 550
  - Number of group recovery support meetings held (virtual and in person): 1,955
  - Number of individual meetings held (virtual and in person): 4,240
  - Number of referrals to treatment: 180
- 
- Funding for this program is braided - both SAMHSA (\$100,000 per center) and Opioid Settlement Funds (\$275,000 per center).

# Housing Options for Individuals with Substance Use Disorder (SUD)



- Oxford House
  - Recruited and trained five new staff
  - Opened 12 new Oxford Houses
  - Added 91 beds
  - Served 99 individuals
- Temporary Shelter
  - Number of individuals served: 13
  - Number of individuals linked to case management: 13
  - Number of naloxone kits distributed: 7



# Housing Options for Individuals with Substance Use Disorder (SUD)

- Case Management
  - Number of individuals served: 11
  - Number of individuals who were referred to SUD or co-occurring services: 2
  - Number of individuals linked to entitlements or benefits
    - SNAP – 2
    - SSI - 2
  - Providers have distributed flyers, sent E-blasts, have held open houses and stakeholder meetings.

# Emergency Opioid Settlement Funding for Harm Reduction Supplies: Xylazine Test Strip Program



- Number of harm reduction supplies distributed
  - Xylazine test strips: 7,295
  - Basic hygiene kits: 7,975
  - Wound care kits: 4,859



# Harm Reduction Expansion Activities

- Number of participants served: 10,246
- Reduction in opioid-related incidents: 1,740
- Number of harm reduction supplies distributed: 361,378
  - Wound Care kits – 18,069
  - Naloxone – 25,296
  - Safer use supplies – 104,800
  - Test trips – 140,937
  - Syringes – 2,647,320
  - Other (weather-related, food, socks, etc.) – 72,276
- Number of training/education sessions: 101,649
- Number of services provided/encounters: 35,113
- Number of referrals to treatment: 510



# Opioid Recovery and Remediation Advisory Council – Strategic Plan

# Key highlights of the Strategic Plan include:

- A vision of substance use disorder as a health condition that should be met with equitable access to services.
- Four key investment areas: housing, harm reduction, treatment, and coordinated wraparound services.
- Twelve core strategies designed to reduce overdose deaths, improve treatment access, and address the social determinants of health.
- A robust monitoring and evaluation framework to track the impact of investments and ensure accountability.





# Opioid Settlement Funds

## Spending Decisions – December 2025



# Harm Reduction Center (HRC) Continuation and Service Expansion

- **\$118,681,215 over 5.5 years**
- Funds will support core harm reduction services in a three-pronged approach:
  - (1) authorized brick-and-mortar Harm Reduction Centers across New Jersey;
  - (2) expansion of mobile or community outreach for high risk or vulnerable populations; and
  - (3) integration of harm reduction into existing health care infrastructure.
- These resources would support a combination of opening additional authorized sites, expanding the services offered at existing sites, and continuing funding to existing sites over time.



# Capital Investments in Substance Use Treatment Providers

- **\$8 million one-time funding**
- Substance use treatment providers consistently report a need for routine repairs to vehicles and facilities as well as to expand footprints to serve more patients, to implement care quality modernizations, and to meet evolving regulatory standards.
- This funding would support repairs, improvements, and purchases to brick-and-mortar facilities as well as mobile units and transportation vehicles that enable connections of patients to treatment.
- Capital infrastructure is usually not included in federal and other State funding opportunities.



# Perinatal Center of Excellence

- **\$6,229,140 over two years**
- This funding would support a pilot Perinatal Center of Excellence (PCOE) within an acute care maternity hospital.
- PCOE will include five core components:
  - (1) fully integrated ambulatory care that includes substance use and mental health disorder treatment;
  - (2) social drivers of health screening and services;
  - (3) specialized acute care;
  - (4) harm reduction; and
  - (5) academic training, workforce development, and dissemination of best practices.



# Bridge Access to Community-Based Substance Use Treatment

- **\$19.3 million over one year**
- Due to increased costs and longer stays for individuals in substance use disorder treatment, federal substance use block grant funding and existing dedicated state funding cannot meet all needs.
- Supplementing limited federal funds, this investment will help prevent waiting lists and delays in treatment access for uninsured individuals.
- The fee-for-service (FFS) treatment initiative enables State and federal SAMHSA resources to pay for treatment and other ancillary services that are not part of the Medicaid benefit for individuals 18 years of age and older who are uninsured and have an income below 350% of the federal poverty level.
- The FFS initiative funds ambulatory and residential treatment, including outpatient, intensive outpatient, methadone outpatient, inpatient withdrawal management, short-term residential, halfway house, and long-term residential services.

# Family and Community Support Group Capacity Grants



- **\$12 million over three years**
- Capacity grants will entail small (e.g. \$100k-\$150k) awards for small, nonprofit community-based, and community-focused small businesses focused on families and loved ones of individuals living with, in recovery from, or who have passed away as a result of substance use disorder including opioid use and opioid overdose.
- Awards will support a wide array of recovery and prevention supports across the connected care continuum, including support groups, harm reduction supports, activities that strengthen and support relationships among family members, bereavement and remembrance efforts, and more.
- In addition, funding will be available for recognized groups for opportunities to create memorials and remembrances for those who were lost due to the epidemic.
- This funding opportunity is intentionally open-ended, allowing community organizations to receive funding for their specific needs.
- This proposal is largely the result of a July 2024 roundtable discussion with key support groups that was led by the Advisory Council.



# Housing Continuum Expansion

- **\$10.5 million over three years**
- Funds will support implementing a pilot housing program that consists of eight core components:
  - (1) intensive case management and care coordination;
  - (2) harm reduction and recovery housing;
  - (3) medical services including medication assisted treatment/medications for opioid use disorder, chronic disease management, PEP/PrEP, hepatitis C treatment, and wound and injection site care;
  - (4) certification for up to 10 providers, including specific provider training;
  - (5) establishment of a Community Advisory Board that oversees program development and implementation;
  - (6) targeted participant and staff incentives;
  - (7) a low-barrier engagement center; and
  - (8) program evaluation.

# NJ Keeping Families Together (KFT) Expansion



- **\$4.86 million over three years**
- Funding would expand the existing KFT program, which provides direct support services to families, as well as vouchers and rental subsidies for housing costs.
- The NJ KFT intervention leverages the Housing First approach to provide comprehensive support to parents with OUD that includes access to housing, case management, linkage to community services, and therapeutic services.
- Aftercare and “move on services” to ensure stability 12 months post-discharge would be included as a new addition to the program.
- These additional resources will support the replenishment of housing vouchers, as well as maintain both model and Motivational Interviewing training.



# Monitoring and Evaluation of State-level Settlement-Funded Programs

- **\$3 million over three years**
- As part of its Strategic Plan, the Advisory Council proposed a monitoring and evaluation framework.
- Building upon program-specific process and outcomes metrics and program oversight, funding this framework would help the State holistically consider the overall impact of settlement funded projects in addressing the opioid crisis.
- The multi-component monitoring and evaluation framework aims to assess the scope and reach of the investments made using opioid settlement funds and to track progress on a set of statewide indicators linked to the goals of the Strategic Plan.
- This will also offer information to the Advisory Council and state agencies that may inform out-year continuation, expansion, or elimination of programs.



# Study about State-level Administrative Barriers to Care

- **\$250,000 one-time funding**
- As the State continues to prioritize a public health approach to stemming the opioid crisis and implementing a harm reduction framework, this study would focus on identifying potential administrative policy changes that could better facilitate access to care for residents who use drugs or who are living with substance use disorder.



# Peers in SUD Residential Settings

- **\$2 million one-time funding**
- Funds support hiring and deploying of Peer Recovery Specialists at Human Services-contracted residential treatment agencies.
- Peers provide non-clinical assistance and recovery supports services to individuals receiving substance use treatment in residential settings, including inpatient withdrawal management, short-term and long-term residential, and halfway houses.



# Maternal Wraparound Program (M-WRAP)

- **\$1.05 million one-time funding**
- MWRAP is a statewide initiative that provides intensive case management and recovery support services for pregnant women with substance use disorder during pregnancy and up to one year after the end of the pregnancy.
- Intensive case management focuses on developing a single, coordinated care plan for pregnant/postpartum women, their infants, and families.



# Recovery Management Check-Up (RMC)

- **\$3.5 million over 2.5 years**
- RMC facilitates a seamless and coordinated transition from treatment to community-based support services, with peer recovery specialists providing check-up services for discharged clients to support their independent living and success with recovery.
- Upon discharge from substance use disorder (SUD) treatment, participants are connected with a peer recovery specialist who conducts a check-up via phone, virtual meeting, face-to-face meeting, or text messaging/chat—consistent with the participants' preference—on a monthly basis (or more frequently at the participant's request).
- During the check-up, the peer assists the participant in identifying areas in which they need support, including wraparound supports like housing, food, and transportation; behavioral health supports, such as a recovery community center, harm reduction center, or counseling; and primary care access.
- The peer identifies local resources and facilitates a warm connection between the participant and the provider.



# Reports and Recommendations

- Reports and spending recommendations have been published on the website – [www.nj.gov/opioidfunds](http://www.nj.gov/opioidfunds)
- To access the procurements for future programs, please visit [www.nj.gov/opioidfunds/funding-opportunities/](http://www.nj.gov/opioidfunds/funding-opportunities/).
- Questions? Email us at [opioidsettlement@dhs.nj.gov](mailto:opioidsettlement@dhs.nj.gov)