

LOCAL OPIOID SETTLEMENT LEARNING COLLABORATIVE

March 2026

Comagine
Health





AGENDA



Department of Justice Updates



Washington County's CATT Program



Wrap Up



Break Out Groups



Department of Justice Updates

How does Washington County's Center for Addictions Triage and Treatment fit within Exhibit E?

Success stories and other information

Washington County is in the final stages of development of the Center for Addictions Triage and Treatment (CATT). This center will add new treatment programs to Washington County including 16 sobering beds, 16 withdrawal management (detox) beds and up to 56 residential treatment beds at our Beaverton site. The program integrates medication assisted treatment with an onsite Opioid Treatment Program (OTP). The site is currently under construction but is nearing completion. Washington County has partnered with DODA, Inc. to provide treatment services. CODA is currently developing protocols and are hiring staff for the new treatment program. We anticipate opening this site in November, 2025.

Additionally, the CATT offers outpatient treatment and associated supports at the program's Hillsboro site. This site opened in June and includes culturally specific (Hispanic) outpatient substance use treatment, peer recovery services, crisis services and connection to homeless services. In October we plan to add onsite health services.

EXHIBIT E

List of Opioid Remediation Uses

Schedule A Core Strategies

B. MEDICATION-ASSISTED TREATMENT (“MAT”)
DISTRIBUTION AND OTHER OPIOID-RELATED
TREATMENT

1. Increase distribution of MAT to individuals who are uninsured or whose insurance does not cover the needed service;
2. Provide education to school-based and youth-focused programs that discourage or prevent misuse;
3. Provide MAT education and awareness training to healthcare providers, EMTs, law enforcement, and other first responders; and
4. Provide treatment and recovery support services such as residential and inpatient treatment, intensive outpatient treatment, outpatient therapy or counseling, and recovery housing that allow or integrate medication and with other support services.

E. EXPANSION OF WARM HAND-OFF PROGRAMS AND
RECOVERY SERVICES

1. Expand services such as navigators and on-call teams to begin MAT in hospital emergency departments;
2. Expand warm hand-off services to transition to recovery services;
3. Broaden scope of recovery services to include co-occurring SUD or mental health conditions;
4. Provide comprehensive wrap-around services to individuals in recovery, including housing, transportation, job placement/training, and childcare; and
5. Hire additional social workers or other behavioral health workers to facilitate expansions above.

Schedule B Approved Uses

Support treatment of Opioid Use Disorder (OUD) and any co-occurring Substance Use Disorder or Mental Health (SUD/MH) conditions through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following:

PART ONE: TREATMENT

A. TREAT OPIOID USE DISORDER (OUD)

Support treatment of Opioid Use Disorder (“OUD”) and any co-occurring Substance Use Disorder or Mental Health (“SUD/MH”) conditions through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, those that:¹⁵

1. Expand availability of treatment for OUD and any co-occurring SUD/MH conditions, including all forms of Medication-Assisted Treatment (“MAT”) approved by the U.S. Food and Drug Administration.
2. Support and reimburse evidence-based services that adhere to the American Society of Addiction Medicine (“ASAM”) continuum of care for OUD and any co-occurring SUD/MH conditions.
7. Support evidence-based withdrawal management services for people with OUD and any co-occurring mental health conditions.

B. SUPPORT PEOPLE IN TREATMENT AND RECOVERY

Support people in recovery from OUD and any co-occurring SUD/MH conditions through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the programs or strategies that:

1. Provide comprehensive wrap-around services to individuals with OUD and any co-occurring SUD/MH conditions, including housing, transportation, education, job placement, job training, or childcare.
2. Provide the full continuum of care of treatment and recovery services for OUD and any co-occurring SUD/MH conditions, including supportive housing, peer support services and counseling, community navigators, case management, and connections to community-based services.
3. Provide counseling, peer-support, recovery case management and residential treatment with access to medications for those who need it to persons with OUD and any co-occurring SUD/MH conditions.
6. Support or expand peer-recovery centers, which may include support groups, social events, computer access, or other services for persons with OUD and any co-occurring SUD/MH conditions.



Center for Addictions Triage and Treatment (CATT)



Opioid Funding for the Center for Addictions Triage and Treatment (CATT)

Kristin Burke, Project Manager

| March 2026

Department of Health and
Human Services

www.co.washington.or.us

→ Today's Presentation

- CATT Overview
- Project Funding
- Opioid Funds Strategy
- Utilization



CATT Approach:

A center that offers coordinated support across a continuum of services:

- Withdrawal management (detox)
- Sobering
- Residential treatment
- Peer drop-in services
- Culturally specific outpatient
- Crisis services
- Housing
- Health care





→ Who will be served?

- Adults 18 and older who have problem substance use
- People who have:
 - Medicaid/OHP
 - Uninsured individuals
 - Commercial insurance
- People will not be turned away based on coverage/ability to pay
- Services are voluntary

→ Split Campus Approach

Beaverton Recovery Center:
17911 NW Evergreen Place,
Beaverton



Hillsboro Recovery Center:
5250 NE Elam Young Pkwy,
Hillsboro





Beaverton Recovery Center

At this location:

- Withdrawal Management/Detox (16 beds)
- Residential Treatment (48 beds)
- Sobering (16 beds)*
- Transitional Supports (6 beds)*

Building was ~24,000 sq ft, expanded to ~40,000 sq ft

Purchase and renovation: ~\$31.2 million

Services provided by **CODA, Inc.**

**Service not open yet, expected to open in mid-2026*

→ Hillsboro Recovery Center

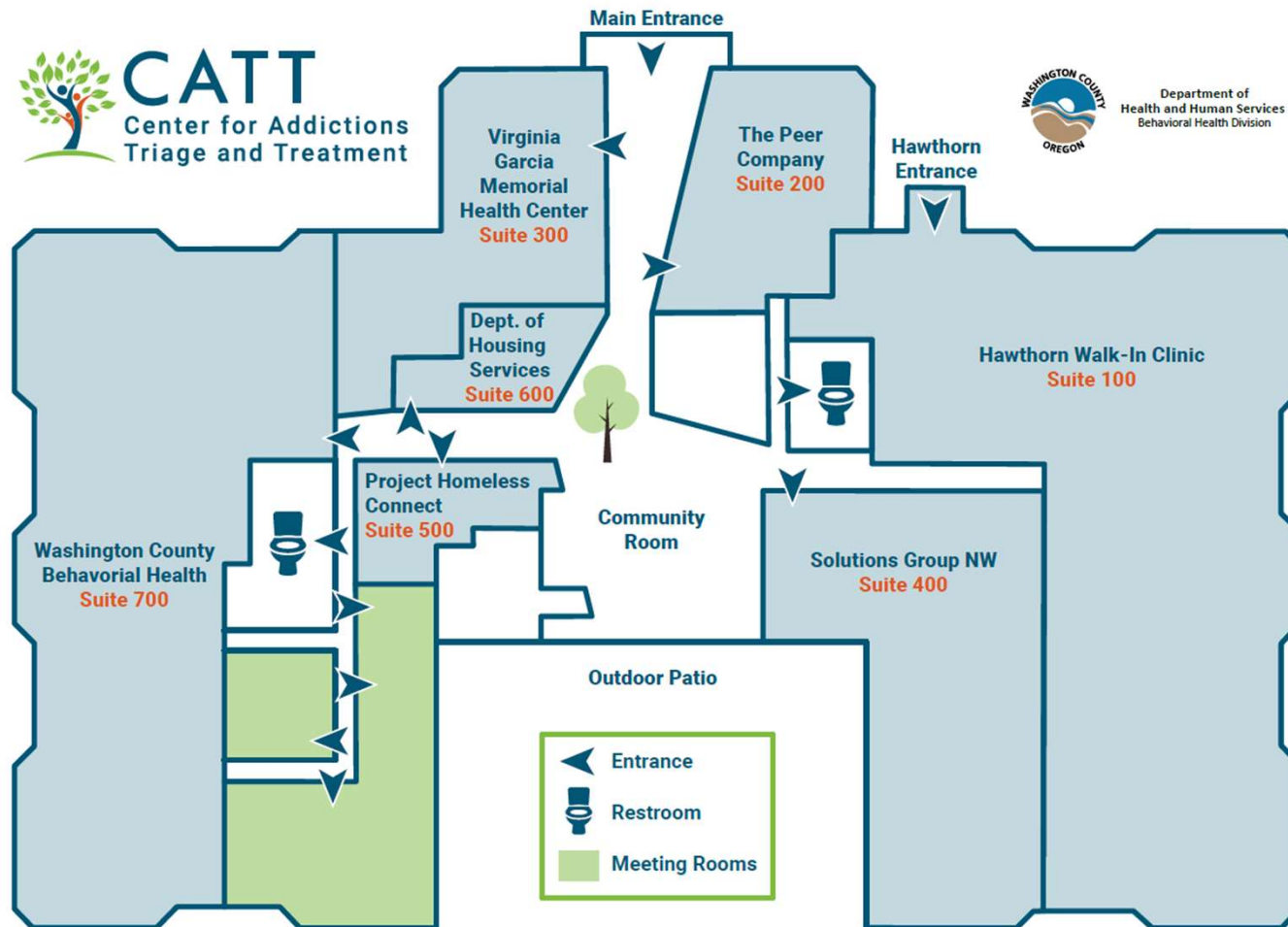
At this location:

- Outpatient treatment: **Solutions Group NW**
- Peer drop-in: **Peer Company**
- Housing access/navigators: **Project Homeless Connect**
- Hawthorn crisis services: **Lifeworks NW**
- County Behavioral Health
- Health services: **Virginia Garcia Memorial Health Center**

Purchase and renovation: ~\$27 million



→ Hillsboro Recovery Ctr. Building Design



→ Capital Project Budget

Item	Budget
Non-facility expenses	\$800,000
Beaverton Recovery Ctr purchase	\$3,725,000
Beaverton Recovery Ctr renovation	\$27,452,817
Hillsboro Recovery Ctr purchase	\$8,275,000
Hillsboro Recovery Ctr renovation	\$18,569,127
Contingency/start-up	\$3,518,346
Total Budget	\$62,340,290



Capital Project Funding

Source	Amount	Percent
Behavioral Health funds	\$23,638,689	37.9%
Measure 110 grant funds	\$5,129,277	8.2%
Residential development grant funds	\$2,300,000	3.7%
Opioid settlement funds	\$9,622,324	15.4%
CareOregon/Health Share capital contribution	\$7,650,000	12.3%
Health care grants (Providence, Trillium Health Plan, Yamhill CCO)	\$1,150,000	1.8%
Legislative allocation/lottery bond funds 2023	\$5,000,000	8.0%
Legislative allocation 2024	\$3,800,000	6.1%
Federal earmark	\$2,500,000	4.0%
Supportive Housing tax	\$1,500,000	2.4%
Marijuana tax	\$50,000	.1%
Total	\$62,340,290	

→ Opioid Funding Strategy

- Apply all opioid settlement funds to the CATT
 - Washington County Board Resolution and Order on 10/17/2023
- Use funds for both capital and operations
- Partner with cities to enhance program stability
 - Tigard
 - Cornelius
 - Hillsboro
 - Forest Grove



→ Opioid Use Strategy

- FY 2022-2025 Opioid Revenue for capital construction (~\$9.6m)
- FY 2025-2027 Opioid Revenue for start-up (\$1.3m)
- FY 2026 and forward revenue (~\$20m) to be used for:
 - Facility subsidy
 - Sobering/engagement services
 - Peer services
 - Transition services

→ Utilization to date *(as of 2/15)*

July 1 opening

- Crisis walk-in: 1,529 episodes
- Outpatient: 210 clients
- Peer Drop-in: 1,126 contacts
- Housing: 145 clients

November 17 opening

- Men's residential: 59 clients
- Women's residential: 39 clients
- Withdrawal management: 32 clients
- Health Services: 106 visits





Questions?

CATT email box:

CATT@washingtoncountyor.gov

Visit our website:

wcor.us/recovery



Wrap Up



Breakout Groups



Breakout Groups

- Not recorded
- Each group will have a pre-identified notetaker
- The meeting will end after these groups (we will not come back together)
- Notes will be aggregated, deidentified, analyzed for themes, and sent to the group
- ~15 minutes for discussion

Group questions:

How are you leveraging opioid settlement funds to make the biggest impact on your community? What have been your barriers? How did you work through barriers?