

Colorado Consortium for Prescription Drug Misuse Prevention

Treatment Work Group Meeting Minutes

July 22, 2026 from 12 to 1 p.m. via Zoom

(The following minutes and discussion are for informational purposes only and do not represent the position of the University of Colorado.)

Present:

Stephanie Stewart, MD, Co-Chair
Teresa Cobleigh, Gold Spark Studio
Beth Gugino, Indivior
MeeMee Lahman, Salud Family Health Centers
Lorraine Hoover, Raymond Rountree, Jr. Foundation
Carl Anderson, Arapahoe County Sheriff's Office
Marie Archambault, Jefferson County Jail
Kacy Behrend, Behavioral Health Administration
Norman McCloud, Opioid Response Network
Consortium: Jen Place, Jessica Eaddy, Hilary Bryant, Shayna Micucci,
Eric Barker, Rosemarie MacDowell

Absent: See attached roster.

Approval of Minutes

A motion was made to approve the March 2026 meeting minutes. Motion approved.

Presentation: Opioid Response Network (ORN) - Norman McCloud, Regional Outreach & Engagement Coordinator for the Indigenous Communities Response Team at ORN:

The ORN is a consultant network established in 2018. Consultants provide evidence-based education and technical assistance training related to all areas of substance use disorder. To facilitate their work, the organization employs specialists in every US state and territory. Norman has been with ORN since 2021. He is a member of the Trail Mountain Band of Chippewa in North Dakota and specializes in Indigenous technical assistance efforts in HHS Region 5 and Region 8 covering tribes in 12 states. A copy of the presentation is attached to the minutes. Presentation overview:

ORN is funded every two years by SAMHSA. They are currently in their fourth funding cycle. The grant is overseen by the American Academy of Addiction Psychiatry. The ORN provides free education and training related to opioid and stimulant prevention, treatment, and recovery. and addresses other co-occurring substance use and psychiatric disorders. They also provide MOUD training for pediatrics (provided by Boston Children's Hospital).

Organizations like the Consortium can submit requests for training. ORN works with government, state agencies, tribes, cities, counties, and municipalities, including community groups, coalitions, organizations, prevention, treatment, colleges and universities, courts, jails, health professionals, advocates, peer support specialists, and anyone else interested in addressing the substance use disorder crisis. Support is available at no cost. Norman explained the process for requesting assistance. He will also provide the training schedule, which will be sent to work group members.

Some examples of training provided include the following: naloxone training for family members and organizations, naloxone saturation mapping for communities (identifies the best locations to have Narcan available), and SBIRT for healthcare organizations. Training is also conducted in schools, including a three-part training curriculum for students, administration, and the community that focuses on how to address substance use disorder or opioid and stimulant issues within school systems, how to recognize student issues, and how best to manage those situations. Awareness and anti-stigma campaigns are also included in work with schools.

Telehealth services are available to expand access to treatment in rural areas. These services provide guidance on medication for addiction treatment in rural areas and tribal communities.

The organization is open to adding additional expert consultants.

For more information: Norman.mccloud@und.edu

Recorded webinars are available on the ORN website: <https://opioidresponsenetwork.org/>

Kratom Update - Stephanie Stewart, MD:

Dr. Stewart has been treating patients who are using kratom and 7-OH. She asked if others had had any experiences with these substances. Kratom is a naturally occurring plant that has a mild stimulant and partial opioid agonist effect. 7-OH is made from 2% of the kratom plant, which then becomes a highly selective opioid receptor more like an agonist than a partial agonist. Semi-synthetic derivatives are also available (one is a pseudo and the other is called MGM), and they are more potent than 7-OH. Kratom is not detectable on most urine drug screens; therefore, monitoring might present a challenge.

The work group discussed the treatment of patients using these substances, including that the use of methadone in this patient population is somewhat controversial due to the fact that SAMHSA has said kratom is not an opioid. Dr. Stewart said buprenorphine is probably the first line of treatment for patients. 2025 Colorado legislation banned the sale of kratom to anyone under the age of 21, prohibiting products containing more than 2% of 7-OH.

SB25-072 Regulation of Kratom: <https://leg.colorado.gov/bills/SB25-072>

The DEA is planning to schedule 7-OH and semi-synthetic derivatives of 7-OH (pseudo, and MGM) to protect public safety. The schedule will be in effect for two years, with a renewal option. Scheduling only applies to 7-OH and semi-synthetic derivatives, not to kratom leaf.

DEA announcement: <https://www.dea.gov/press-releases/2026/07/01/dea-temporarily-schedule-7-oh-and-related-substances-protect-public>

ASAM's annual conference included kratom/7-OH discussions. Dr. Stewart provided a link to an ASAM podcast: <https://elearning.asam.org/products/asam-practice-pearls-kratom-and-7-oh-what-clinicians-need-to-know>

A copy of Dr. Stewart's presentation is attached to the minutes.

Work group members discussed whether or not individuals using kratom or 7-OH are able to access sober living or other recovery centers. Mee Mee Lahman said her organization, Salud Family Health Centers, works with patients and has been primarily utilizing buprenorphine, even

though it is considered off label. Along with behavioral health support, buprenorphine is the preferred method. She mentioned that research has also recommended SSRIs.

Mee Mee provided links to the following kratom treatment options: MAT-ODU (medications containing buprenorphine), tricyclics, and BH (show some promise):

- <https://doi.org/10.1097/adm.0000000000000721>
- <https://doi.org/10.3389/fpsy.2021.640218>
- <https://doi.org/10.3389/fphar.2021.708019>
- <https://doi.org/10.5055/jom.2020.0594>

Lorraine Hoover said she knew of one individual who went to the hospital and was kept on hold for 72 hours because they could not be transferred elsewhere due to high risk.

Marie Archambault said she has had many clients who have used kratom to treat chronic pain, and they have experienced difficult withdrawals. Dr. Stewart suggested these patients would probably benefit from multidisciplinary care, and that some individuals do not want to stop using kratom.

Teresa Cobleigh mentioned the possibility that ASAM could issue provider guidelines. She recently viewed a webinar from Rhode Island that said providers are using buprenorphine for treatment. She said the Drug Policy Alliance is against scheduling kratom because they think it will create another black market, while Shatterproof applauds the scheduling.

Eric Barker commented that 7-OH products sold at gas stations on the western slope are not always the same, but black-market drugs are even less reliable.

Kratom has become an emerging topic for ORN, and they receive a lot of requests for information. SAMHSA now allows them to provide technical assistance regarding the issue.

Upcoming Events:

2026 Drug Information Opportunity Symposium focusing on responding to controlled medication disruptions and associated overdose spikes:

- *In-Person Registration Link:*
<https://www.rmhidta.org/event-details/colorado-drug-information-opportunity-symposium-2026>
- *Virtual Registration Link:*
<https://www.rmhidta.org/event-details/online-colorado-drug-information-opportunity-symposium-2026>

A lunch and learn session about emergency and involuntary commitments for substance use disorders is planned for August 19th through the Consortium Provider Education Work. A flyer will be sent to work group members.

Requests for Future Topics:

Proposed topics: Implementing ASAM Guidelines in Colorado from the BHA; Benzodiazepine prescribing in inpatient and SUD treatment settings; Impacts of HB1 on Medicaid in Colorado from HCPF

Adjournment/Next Meeting:

The meeting was adjourned at 1:00 p.m. The next meeting will be held on Wednesday, September 23, 2026 from 12 to 1 p.m. via Zoom.

Attachments: Work Group roster, presentation copies