

WRITTEN STATEMENT OF

**Derek M. Siegle
Executive Director, Ohio High Intensity Drug Trafficking Area**

Subcommittee on Healthcare, Benefits, and Administrative Rules

**Committee on Oversight and Government Reform
United States House of Representatives**

**EXAMINATION OF THE OFFICE OF NATIONAL DRUG CONTROL POLICY AND ITS EFFORTS TO
COORDINATE DRUG POLICY ACROSS THE FEDERAL GOVERNMENT**

**April 11, 2018
Washington, DC**

Chairman Jordan, Ranking Member Krishnamoorthi, and distinguished members of the Subcommittee, I am honored to appear before you today to offer testimony highlighting the Ohio High Intensity Drug Trafficking Area Program (HIDTA) and how the HIDTA Program assists localities address the opioid problem and other drug crises.

The Ohio HIDTA was established in 1999 when six counties in Northern Ohio were designated as HIDTA counties. The Ohio HIDTA now covers 14 counties in Ohio and three counties in Northern Kentucky.

This growth is due to local towns, cities, and counties to take advantage of all possible resources to address the crippling drug threats that undermine the health of their communities.

Like the Ohio HIDTA, all 32 HIDTAs bring together federal, state, local, and tribal law enforcement resources to increase intelligence sharing and training, incentivize participation in uniquely effective drug enforcement initiatives.

These collaborative efforts support HIDTA's core mission of disrupting and dismantling Drug Trafficking Organizations (DTOs) and Money Laundering Organizations (MLOs). DTOs and MLOs are the bad guys responsible for bringing narcotics into our communities, feeding addictions, and profiting from the misery of individuals with substance abuse disorders, their families, and their communities.

I want to provide you with some background on the situation in Ohio which has been hard hit by the opioid crisis. The abuse of prescription opioids began to escalate in the early to mid-2000s. The prevalence of heroin became apparent in 2011 after the state was successful in

shutting down “pill mills” that were responsible for millions of illegitimate pills flooding the streets. In 2013, Ohio began to see a dramatic increase in fentanyl and related analogs.

Today, fentanyl and fentanyl analogs account for approximately 58 percent of the unintentional drug overdoses in Ohio. Overall, opioids account for 86 percent of unintentional drug overdoses. As this trend developed, other drug threats continued to wreak havoc on our communities. Cocaine, meth, and marijuana don’t take a hiatus while other dangerous and deadly narcotics come onto the scene. In fact, it’s often the same organizations and dealers who take advantage of the latest addictive poison to make a buck.

Overdose deaths have risen in Ohio from 904 in 2004 to 4,050 in 2016. That is a 348% rise in drug poisonings in just 12 years. Unfortunately, we estimate that once the numbers are compiled for 2017 the Ohio death count will exceed 5,000. Our neighbors in Northern Kentucky have seen similar increases. In 2011, St. Elizabeth Healthcare reported 252 fatal heroin overdoses. In 2016, that number was 1,584. The numbers are shocking. Yet over that time period, investment in key drug enforcement programs has remained stagnant or even decreased in some cases.

While the Ohio HIDTA together with our HIDTA colleagues nationwide have been working hard to address the threat, our law enforcement resources have frankly been overwhelmed. We applaud policy initiatives to increase availability of and access to much-needed treatment resources for substance use disorders. But we have not seen new resources pushed into effective prevention programs like the Drug Free Communities (DFC) program to prevent drug initiation. And we certainly have not pushed new resources into effective drug law enforcement programs like HIDTA or multi-jurisdictional drug task forces.

In fact, as addiction and deaths have spiraled upward, funding for drug enforcement initiatives has been stagnant or declined. Drug deaths have skyrocketed, yet there has been no commensurate response to increase enforcement of laws against illegal drug trafficking. If we are going to get real about reversing the trends and truly dealing with this threat, we have to properly resource drug law enforcement including HIDTAs.

HIDTA is an integral part of the bigger drug enforcement picture that includes task forces, criminal intelligence analysis by police departments, sheriffs’ offices, state police and investigative agencies, fusion centers, the Regional Information Sharing Systems (RISS), and federal agencies.

The foundation of the HIDTAs strategy continues to be the co-location of law enforcement personnel in order to foster enhanced information and resource sharing.

The HIDTA program breaks down traditional barriers between law enforcement agencies. It enables local, state and federal agencies to leverage and maximize resources and improve information and intelligence sharing.

The Ohio HIDTA supports traditional drug task forces along with highway interdiction, parcel interdiction, bulk cash smuggling units, and fugitive apprehension teams. Today we support over 40 task forces and law enforcement initiatives in Ohio and Northern Kentucky.

In addition, the Ohio HIDTA is a valued partner with treatment and prevention programs throughout the state.

Deconfliction services are a key contribution by the Ohio HIDTA for all of our local and regional law enforcement partners. In fact, the HIDTA Program has been instrumental in bringing deconfliction services to law enforcement nationwide over the past decade. Deconfliction prevents dangerous “blue on blue” incidents. It also ensures investigative efforts are coordinated across jurisdictional lines and resources are used effectively and efficiently. In 2017, the Ohio HIDTA deconflicted 4,269 law enforcement operational events and more than 72,000 case/subject/target elements for more than 300 law enforcement agencies.

In 2016, the Ohio HIDTA was added to the ONDCP- sponsored Heroin Response Strategy (HRS).

The HRS is an innovative platform designed to enhance public health, public safety, and prevention collaboration across 22 states, including 10 HIDTAs, with the goal of reducing drug overdose deaths.

The foundation of the HRS is a network of Public Health Analysts (PHAs) and Drug Intelligence Officers (DIOs). This network of professionals bridges public health and public safety efforts. The goal is to develop smarter responses to this increasingly widespread and complex issue.

PHAs enhance the timeliness, accuracy, and access to public health drug use indicators, especially drug overdose deaths. They analyze drug trends and develop reports and briefs that are shared with key local, regional, state, and federal public health and public safety agencies, as well as the larger HRS network.

DIOs help implement the Felony Arrest Notification Program which tracks drug felony arrests in Ohio of out-of-state residents and notifies the appropriate law enforcement agencies. They also track and analyze drug overdose incidents within the HIDTA region.

The Ohio HIDTA works closely with and provides funding to support Heroin Involved Death Investigation Teams (HIDITs) in most of our major cities and counties. HIDITs work closely with the county Medical Examiners and the prosecutors. When a heroin/fentanyl death is encountered by the Medical Examiner investigator or the responding emergency personnel, the HIDIT is immediately notified.

The HIDITs responds and begins an investigation into the source of the heroin/fentanyl.

Investigators focus on information gathering first as opposed to immediate arrest of witnesses and participants. They will further recover crucial evidence for immediate review by technicians.

The goal of the HIDITs is to work back to the supplier of the heroin/fentanyl with various investigative techniques that will support technical evidence and interview statements.

Beginning in July 2016, the Ohio HIDTA began to train law enforcement officials throughout the state on how to use the Case Explorer deconfliction system's "Overdose Incident Form."

This form gives investigators the ability to instantly deconflict names, phone numbers and addresses that come up during the course of their overdose investigations.

This information is deconflicted across not only other overdose data, but also ongoing case data from police departments, HIDTA task forces, Office of Criminal Justice Services task forces and numerous other partner agencies at the local, state and federal levels.

Overdose investigators routinely trace common suspect names and phone numbers across jurisdictional lines.

We have seen numerous cases where this capability helped illuminate previously unknown links between data from overdoses and subjects of ongoing task force investigations.

Since June 2016, almost 10,000 overdose investigations have been entered from 42 of the 88 counties in Ohio. My HIDTA continues to train additional counties, cities, and agencies.

The Ohio HIDTA Investigative Support Center (ISC) has also spearheaded efforts to form "Overdose Initiative" groups within each of these counties. The purpose of these shared groups is to more efficiently link overdose data from neighboring jurisdictions and enable intelligence support that otherwise be available to them.

Ohio HIDTA has also introduced the Overdose Detection Mapping Application Program (ODMAP) into our state.

The program uses a web service accessible through a smart phone or computer to allow first responders to report fatal and non-fatal overdose incidents. They can also report whether Narcan was administered and the number of dosages administered.

The location, date, and time of the incidents are transmitted to the Washington/Baltimore HIDTA secure map server and plotted on a map. The map allows participating agencies to visualize overdose incidents in and around their jurisdictions in near real-time.

ODMAP enables agencies to see where overdose spikes are occurring. The data can provide value to public health officials to identify areas that may be vulnerable to incidents in the near future and enable them to surge intervention and other resources into those areas.

The HIDTA Program - with the assistance of ONDCP developed the national Domestic Highway Enforcement (DHE) Initiative. The DHE promotes collaborative, intelligence-led, unbiased policing in coordinated and mutually supportive multi-jurisdictional law enforcement efforts on the nation's highways.

The DHE strategy both improves investigative efforts related to DTOs and has a significant impact on traffic safety, homeland security, and other crimes.

The Ohio State Highway Patrol (OSHP) administers the Ohio HIDTA's Ohio Highway Interdiction Initiative (OHII) as part of the DHE. The Colonel of the OSHP is also an Executive Board member of the Ohio HIDTA.

The interdiction of drugs on our highways is critical in combating the current opioid epidemic in Ohio and is often our first line of defense against the DTOs. Many large seizures occur on our highways. In 2017, the OHII seized more than 20 kilograms of fentanyl, 61 kilograms of heroin, 72 kilograms of cocaine, 66 kilograms of methamphetamine, and 2,898 kilograms of marijuana. Each dose of deadly narcotics that is interdicted on our highways is one less dose that could kill one of our citizens.

Across the country HIDTAs are seeing a rise in the seizure of crystal methamphetamine, or "ice," that is being trafficked in large quantities by Mexican DTOs. The most recent instance was the seizure of 140 pounds of methamphetamine near Akron, Ohio.

Although down from 2014 (939 incidents), Ohio was third nationally in "Meth Clandestine Laboratory incidents" with 834 incidents in 2016, according to the Drug Enforcement Administration (DEA). By comparison, Ohio recorded 352 incidents in 2011.

Ohio HIDTA initiatives recorded an all-time high of 151.5 kilograms of methamphetamine and ice seizures in 2016. This number has increased markedly from 8.5 kilograms in 2012. While opioids continue to get the headlines, these other drugs clearly continue to harm our citizens. The people who profit from the misery they create are constantly innovating. It is our job to go after those people and stand between them and their next victims.

There are 32 HIDTAs nationwide. Each HIDTA operates in a region which may include several counties, and some cross state lines. Each HIDTA is managed locally by an Executive Board made up equally of federal and state/local partners who each have equal say in how their HIDTA prioritizes its efforts.

The Executive Boards are a key strength of the HIDTA Program. Although HIDTA funds are appropriated by Congress each year, it is the Executive Boards that provide our state and local members an equal voice in addressing specific threats in our communities and counties that make up the HIDTA Program.

The Executive Board has the ability on a local or regional basis to shift focus and resources in response to evolving threats. This this equal partnership is the basis of success of the HIDTA program. The Ohio HIDTA has 23 heads of local, state, federal law enforcement agencies on our Executive Board. These members are invested in the program because each of them has a significant voice in determining priorities.

The political or enforcement agenda of one agency may not match other agencies, and that is why the neutral ground of HIDTA is so important as a mechanism for facilitating drug enforcement collaboration.

HIDTA is a program, not an agency that is viewed as a neutral partner whose goal is to help all levels of law enforcement attack DTOs. It is this neutrality that has caused all levels of law enforcement to participate in the programs through deconfliction, sharing of information, and participation in HIDTA initiatives.

The ISCs provide analytical help to participating agencies and non-participating agencies. Many of the task forces that are part of HIDTA would not have analytical support and record analysis without the analysts assigned to the ISC.

Each HIDTA has a training program and provides free training to all law enforcement, not just those who participate or are funded by HIDTA. During 2017, the Ohio HIDTA provided 15,580 hours of training to 1,427 students. Many state, county and local agencies would not be able to train their officers if it were not for the training offered by HIDTA.

Because of the reputation that HIDTA has built for bringing individuals together and producing results, HIDTA components are often involved with prevention, treatment, and education initiatives. HIDTAs routinely partner with Drug Free Communities (DFCs) in their areas.

The Ohio HIDTA has helped bring Brain Power, the science-based K-12 substance abuse education curriculum developed by the National Institute on Drug Abuse to several local school districts.

HIDTA funding is rarely used to support prevention and treatment, but the information and knowledge that HIDTA can bring to the table is valuable. We all know it is going to take

enforcement, prevention, treatment, and education working together to successfully confront our opioid epidemic and our other drug threats.

The HIDTA Program embraces performance measurements and accountability. The efforts of each HIDTA are recorded in the Performance Management Process or PMP.

This program enables individual HDTAs, and the HIDTA program overall to account for accomplishments, including the number of DTOs/MLOs under investigation, the number of DTOs/MLOs that were disrupted and/or dismantled, the quantity and value of drugs removed from our communities, return on investment (ROI), clandestine labs disruptions, training assessment, case and event deconfliction, analytical support, and other areas of performance.

Each HIDTA produces an Annual Threat Assessment and a Strategic Plan to address its priority threats, as well as an Annual Report to highlight its accomplishments.

HDTAs undergo regular financial audits with their fiduciaries and performance audits. Both of these are coordinated through and overseen by ONDCP.

HIDTA provides a national ROI of approximately \$75.00 for every \$1.00 of HIDTA funding invested in 2017.

ONDCP provides policy direction and guidance to the HIDTA program. ONDCP provides leadership from a neutral, unbiased, noncompeting point of view. The office looks at the drug crisis from all aspects and utilizes the HIDTA program to provide complete data and perspectives from all levels of law enforcement.

HIDTA is best served under ONDCP. If HIDTA were to be placed under any federal enforcement agency there would be too many barriers for HIDTA to remain neutral, effective, and efficient. State and local law enforcement would likely eventually lose their voices and voting power.

Moving the HIDTA from ONDCP to a federal enforcement agency - as the administration has proposed in its FY 2019 budget - or another operational program would threaten critical relationships among state and local law enforcement and federal agencies.

To maintain the success of the HIDTA and the Drug Free Communities programs, it is imperative that ONDCP be re-authorized and properly funded to maintain proper staffing levels and oversight of the HIDTA and DFCs.

ONDCP is the only office in the federal government with the expertise and authority to look at the drug problem holistically and set direction action across the board. Addressing our national

drug problem is complicated and requires a well-resourced team of experts who focus solely on these issues full-time.

I have provided the Committee with several documents relating to HIDTA to include the 2017 Ohio HIDTA Summary and the 2017 HIDTA Program Effectiveness Summary.

Thank you for allowing me this opportunity to testify before you today. I look forward to answering your questions.

Derek M. Siegle

Mr. Siegle is the Executive Director of the Ohio HIDTA (High Intensity Drug Trafficking Area) Program. He has held this position since August 2009 when he retired from the Federal Bureau of Investigation (FBI) after 23 years. Prior to joining the FBI, Mr. Siegle served as a police officer in the City of Twinsburg, Ohio and worked for two regional public accounting firms in Canton and Cleveland, Ohio. Mr. Siegle has a Bachelor of Arts Degree in Accounting from Walsh University in Canton, Ohio.

Mr. Siegle began his career with the FBI in Albuquerque, New Mexico where he was assigned White Collar Crime matters and also spent time investigating drugs. In March 1991, Mr. Siegle was transferred to the Marquette Resident Agency of the Detroit Field Office where he continued to investigate White Collar Crime matters as well as drugs and Indian Country Crimes.

In January 1995, Mr. Siegle was promoted to Supervisory Special Agent in the FBI's Financial Institution Fraud Unit, FBI Headquarters, where he oversaw bank fraud and embezzlement investigations. Mr. Siegle was named as the White Collar Crime Supervisor in the Louisville Division in January 1997 and remained in Kentucky until being promoted to Unit Chief of the Public Safety Wireless Network Program in Washington, D.C. in November 1999.

Mr. Siegle served in the Billings, Montana Resident Agency from July 2001 until October 2003 when he returned to Washington, D.C. as a Supervisory Special Agent in the Internal Investigations Section, Office of Professional Responsibility. After one year, Mr. Siegle was promoted to Assistant Section Chief, Financial Crimes Section, Criminal Investigative Division where he was responsible for the Financial Institution Fraud, Health Care Fraud, Economic Crimes and Asset Forfeiture/Money Laundering Units.

In March 2006, Mr. Siegle was named Assistant Special Agent in Charge (ASAC) of the Cleveland Division where he was responsible for management of the division's Criminal and Administrative Divisions. He served as ASAC until his retirement.