

**NEW YORK STATE SENATE FINANCE
AND
ASSEMBLY WAYS AND MEANS COMMITTEES
MENTAL HYGIENE BUDGET HEARING**

WEDNESDAY, FEBRUARY 3, 2016



ASAPNYS

**TESTIMONY BY:
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Good Morning. My name is John Coppola. I am the Executive Director of the New York Association of Alcoholism and Substance Abuse Providers, Inc. (ASAP), the statewide association that represents the interests of substance use disorder and problem gambling prevention, treatment, and recovery support services providers from throughout New York State. Included in our membership are close to 200 agencies that provide a comprehensive continuum of services, as well as statewide and regional coalitions of programs, and a number of affiliate and individual members.

Distinguished members of the NYS Senate and Assembly, it is with great concern that I address you today and urge you to significantly increase resources for substance use disorders prevention, treatment, and recovery support services. Families across New York State are devastated by the losses they are experiencing related to the deaths of loved ones caused by a prescription opioid or heroin overdose. In the last decade, the New York Times reported, the number of deaths attributable to heroin overdose has quadrupled. Even more families are being devastated by the impact of addiction to prescription opioids and then heroin. 75% of heroin addicts used prescription opioids first. New York State newspapers, television, radio, and social media have called daily attention to this public health crisis. States surrounding New York are getting national attention for their response to the prescription opioid and heroin epidemic. It is time for a state that is "Built to Lead" to make some bold steps and match the magnitude of this epidemic with a response of even greater magnitude a comprehensive continuum of prevention, treatment, and recovery support services. It is time that we respond in a strong and effective manner to address all dimensions of this current crisis and the ongoing impact of other critical substance use issues.

We must build on the initial steps taken by Governor Cuomo, the NYS Senate, and the NYS Assembly to address the epidemic of death and addiction associated with prescription opioids and heroin, the alarming problems related to synthetic cannabinoids, and ongoing concerns about other public health problems linked to alcohol and other drugs. Media campaigns initiated by the Governor, new medication assisted treatment clinics in several upstate communities, and additional funding from the Senate and Assembly for prevention in NYC schools and to strengthen community awareness efforts are all important steps. They are just a small part of what is necessary to address New York's number one health issue, however. Additional prevention, treatment, and recovery support resources are needed to address not just the prescription opioid and heroin crisis, but also such profound issues as underage drinking; substance use disorders experienced by pregnant women and their newborn children; and the special needs of veterans, young adults, adolescents, the LGBTQ community and others.

Workforce and Business Infrastructure

The increased demand for services created by the prescription opiate and heroin epidemic and the multiple changes related to health care reform, Medicaid re-design, and integration with primary healthcare are putting a substantial strain on under-staffed and under-funded prevention, treatment, and recovery support programs. The substance use disorders services workforce is in peril because of low wages, high rates of employee turnover, and difficulty recruiting qualified people to fill vacancies. Resources are needed to enhance salaries and to support professional development opportunities for employees. Two-tenths of one percent cost of living increase is far

from adequate. A \$70 per year salary increase (before taxes) for someone making \$35,000 per year is unacceptable and sends a message to our dedicated workforce that they are not valued.

To address our workforce concerns, the New York Association of Alcoholism and Substance Abuse Providers, Inc. (ASAP) recommends:

- A meaningful cost of living increase on par with raises received by the public sector workforce
- A workforce retraining initiative (using \$ 5 million from the Department of Health's funds for that purpose transferred to OASAS) that creates a professional development tuition assistance program that can help essential staff to obtain their CASAC credential and their associates, bachelors and masters degrees

Prevention

There are approximately 300 fewer school and community-based prevention professionals in NYS today than there were in 2009. Suburban and rural communities are experiencing the same staffing inadequacies. A substantial investment is needed to meet the demand for more prevention services to target New York's public health crisis related to prescription opioids, heroin, synthetic cannabinoids, underage drinking, and other alcohol and other drug related health issues at all stages of life and in all demographic groups.

In the area of prevention, ASAP recommends that the 2016-17 budget provide resources to:

- Provide school and community prevention programs with resources and regulatory flexibility to address requests from families, schools, and communities looking for information and guidance on how best to address the current crisis
- Strengthen and expand school and community prevention services by providing resources to meet local community needs
- Continue the Combat Heroin/Prescription Drug Misuse Campaign and the Media Campaign Focused on K2 and include new resources to respond to specific local community needs that arise from the increased awareness created by these media campaigns

Add \$20 million to the OASAS budget to add 300 prevention professionals to strengthen school and community prevention.

Treatment

There are waiting lists for medication assisted treatment in every major population center in upstate New York. Adolescents and young adults are hard pressed to find residential treatment when they need it in some areas of the state. The elimination of waiting lists and expanded access to treatment appropriate for specific populations (older adults, adolescents, young adults, veterans, women with children, etc.) must become a priority. It is also critical that we provide regulatory flexibility to residential and medication assisted treatment programs so that waiting lists can be eliminated and treatment made available on-demand.

In the area of treatment ASAP recommends that the 2016-17 budget provide resources to:

- Create treatment pilots to increase access to treatment for veterans, adolescents/young adults, LGBTQ community, seniors, women/children, rural communities, persons involved with the justice system and other communities needing specialized services
- Expedite completion of projects that will expand treatment capacity
- Provide 24 hour crisis services and hospital-based intervention and referral to community-based treatment for persons with substance use disorders. Such efforts would ensure connectedness to community-based treatment for persons with substance use disorders who do not need hospitalization
- Expedite and simplify a joint licensing process to better address the needs of persons with co-occurring substance use and mental health disorders
- Increase the availability of detox services in community settings
- Ensure local and regional access to a full continuum of outpatient, inpatient rehabilitation, short and long-term residential, medication assisted and other treatment modalities as needed
- Strengthen and expand housing programs for people in recovery and their families (OASAS Shelter Plus Care Case Management/Supportive Services, Homelessness Prevention/Eviction Prevention. permanent supportive housing)
- Provide needed technical assistance to treatment programs as they transition to managed care and implement other reforms

Add \$30 million to the OASAS budget to eliminate waiting lists, fund pilot projects, strengthen housing services, increase access to a full continuum of treatment services, and fund needed technical assistance

Recovery

Support services for persons at all stages of recovery from addiction are hard to find in New York State. Recovery support resources and services should be available in every New York State county.

In the area of recovery support services, ASAP recommends that the 2016-17 budget provide resources to:

- Provide initial start-up funding for every county in New York State that currently does not have a Recovery Center
- Provide support for family and alumni groups associated with treatment programs to promote positive health for family members and reduce relapse
- Support implementation of peer services and strengthen the peer services workforce through support for the training, testing, and certification of Recovery Peer Advocates and Recovery Coaches in each region of New York State and creation of an online resource for placement of certified Recovery Peer Advocates in OASAS licensed outpatient programs
- Create a continuing education curriculum to re-certify Recovery Peer Advocates and a Recovery Peer Advocate and Recovery Coach Supervisor credential

Add \$20 million to the OASAS budget to provide recovery centers in every county, support family and alumni groups associated with treatment programs, and strengthen recovery peer certification and services

Managed Care

The success of the transition to managed care will depend on the financial, organizational and technological adjustments programs are able to make as they move away from a fee-for-service environment. This transition will be a significant challenge for all substance use disorders programs that provide services that will be reimbursed by Medicaid and/or commercial insurance. To facilitate the transition, ASAP recommends:

- Extending the APG rates through 2020 to provide some financial stability
- Requiring standardization, to the extent possible, of contracts, billing, authorizations, claims, documentation and appeals processes to minimize administrative burden
- Funding for OASAS to support the MIS infrastructure needs, personnel and licensing fees, and other expenses related to support and maintenance of electronic health records. Community-based organizations should have access to the same resources made available to hospitals for personnel and infrastructure support
- Funding to support business and services delivery transformation such as development of management services organizations, independent practice associations

Problem Gambling Prevention, Treatment, and Recovery Services

As New York moves forward with the development of new casino gambling venues, a statewide continuum of problem gambling services that includes a public awareness campaign, primary prevention, early intervention and treatment, recovery support, and other needed services must be put in place in every county.

Approximately one million New Yorkers currently have a gambling problem, a problem that will only grow as casinos are established. Projected funding from newly installed video gaming portals is not a significant enough investment to combat this serious problem.

ASAP Recommendation

Funding adequate to create a comprehensive continuum of problem gambling prevention, community education, treatment, and recovery support services available in every county. This comprehensive continuum should be designed in the context of a problem gambling comprehensive plan developed by OASAS in consultation with services providers.

Additional Recommendations

- Ensure that the \$195M Health Care Facility Transformation capital funding is available to all types of service providers and allocate a minimum distribution to community healthcare providers including substance use disorders service providers.
- Create an “Essential Provider Pool” specifically for community healthcare providers that mirrors the \$355M Essential Provider Pool open to hospitals in last year’s budget. This pool would be for working capital to support transformation initiatives in an array of service settings including substance use disorders services.

- Pass a 2016-17 budget that includes the Governor's proposal to extend the exemption from social work scope of practice restrictions in OASAS licensed programs for an additional five years. ASAP supports a permanent exemption from these restrictive scope of service provisions or statutory changes that spare substance use disorders service providers from the workforce crisis that would ensue if the exemptions were to sunset.
- The state budget should include a subsidy for all service providers that would be impacted by a minimum wage increase so that the cost of the increase could be covered.

When ASAP testified before the Senate Finance and Assembly Ways and Means Committees each of the past two years last year, we urged the Senate and the Assembly to take action to address New York's prescription drug and heroin addiction and overdose epidemic. We were concerned that the Governor's proposed budget did not adequately respond to the crisis. We are back this year with the same request.

Thank you to the Senate for the work of your Joint Senate Task Force on Heroin and Opioid Addiction, the many public forums you conducted, and the bold proposal you have made to add \$100 million to the 2016-17 budget to address the prescription opioid/heroin crisis including significant resources for prevention, treatment, and recovery supports. Thank you to the Assembly for the hearings you conducted and for the strong legislation you worked on particularly to make treatment more accessible for persons with health insurance. It is our hope that you will work together to supplement the Governor's proposal with resources that are on par with the magnitude of this serious public health crisis.

Thank you for your commitment to community service and to the work you do on the proposed budget and other important legislative matters. We are committed to working with you and pledge our continued effort to ensure that your communities receive the best possible substance use disorder and problem gambling prevention, treatment, and recovery services. Thank you.