



NEW YORK STATE SENATOR

Pete Harckham

Harckham and Rosenthal Push to Ensure Better Health Emergency Capabilities for Treatment Providers

PETE HARCKHAM May 23, 2020

| ISSUE: **ALCOHOLISM AND SUBSTANCE ABUSE, SUBSTANCE ABUSE TREATMENT AND RECOVERY, DRUG ABUSE**



Albany, NY – New York State Senator Pete Harckham and Assemblymember Linda B. Rosenthal, both Chairs of the Committees on Alcoholism & Substance Abuse respectively in the Senate and Assembly, announced today that they have introduced two new bills to ensure that behavioral health and substance use disorder treatment providers are granted better capabilities during a public health emergency. The necessity for the legislation

became apparent during the current coronavirus pandemic.

As part of a package of legislation advanced in response to the ongoing Covid-19 crisis and resulting economic turmoil, one bill (S.8363) will provide criminal and civil liability protection to treatment providers, both individuals and facilities, for harmful circumstances that may result from caregiving while also meeting emergency rules or directives. Such liability protections would be in line with have been granted to hospitals, nursing homes and other health care providers.

The other bill (S.8391) will guarantee that the state commissioner from the Office of Addiction Services and Supports (OASAS) will be included as a member of the state's disaster and emergency management team and planning commission.

"The entire state has been greatly impacted by the coronavirus pandemic, and for our health care providers and first responders on the frontline, things will never be the same," said Harckham. "Our mental health and substance use treatment providers are on the frontline, too, and they require the same liability protections and planning contingencies that are now extended to medical care providers. Our two bills remedy these oversights and will strengthen the work now being heroically afforded to our residents in need."

"The fact that the New York State Office of Addiction Services and Supports (OASAS) was not included on the State's Disaster Preparedness Commission, a commission which included nearly every other state agency and then some, illustrates the priority level the State applies to addiction and the people who struggle with it," said Rosenthal. "If OASAS doesn't even have a seat at the table, how can we expect thought or care to be given to New Yorkers in recovery or their families, during Covid-19 or otherwise?"

The dire circumstances created by the Covid-19 pandemic—closed facilities, reduced access to supervised care and medication, social isolation—have resulted in an increase of fatal overdoses and behavioral health crises among residents. The emergency care from treatment service providers, many under resourced already, deserves state recognition and support not unlike that afforded to other first responders.

Also, many Substance Use Disorder providers were left out of the initial conversation regarding PPE and testing. The coordination efforts of the NYS Office of Emergency Management (OEM) include various other state agencies and liaisons with municipalities, businesses and not-for-profits—entities that behavioral health and substance use providers are working with as well. OEM should acknowledge the frontline status of these providers from the start, rather than as an afterthought—and while too many residents falls through the cracks. In this regard, making room for OASAS in emergency planning is part of the larger effort to save lives.