

# Murphy's Senate heroin panel releases findings

TERRENCE MURPHY May 17, 2016

**COMMITTEE: HEROIN TASK FORCE** 

ALBANY, NY - The New York State Senate Joint Task Force on Heroin and Opioid Addiction today released a report summarizing findings and recommendations resulting from forums held across the state to address New York's ongoing heroin epidemic. Senators Terrence Murphy, Robert Ortt and George Amedore, the Co-Chairs of the Task Force, announced the report's findings which include comprehensive legislative recommendations to address shortcomings in the state's existing opioid prevention and treatment-delivery strategies.

In its report, the Task Force identified a four-pronged approach that would stem the growth of the heroin and opioid crisis - prying loose the stranglehold it has on New York's communities - and supports those battling their addiction on the journey to recovery:

Prevention: increasing awareness to better educate the public of the inherent risks involved in using heroin and prescription opioids, and taking advantage of technological advances available to deter the abuse of prescription drugs and prevent addiction;

Treatment: recognizing the critical need for expanded and improved insurance coverage, and enhancing access to all forms of effective treatment - including inpatient, outpatient, and Medication Assisted Treatment - in order to help individuals return to stable and productive lives;

Recovery: providing the proper supports, such as safe environments, stable employment, and

opportunities to participate in diversion programs that avoid incarceration in order to facilitate successful recoveries from addiction; and

Enforcement: implementing criminal justice reforms that give law enforcement the necessary tools to disrupt the supply of heroin and stop the diversion of opiate prescription medications within the state.

"This report is the result of a statewide collaborative effort to offer solutions needed to combat, and ultimately win, New York's ongoing war on heroin and opioid addiction," Senator Murphy said. "The stories we heard were real, the pain we felt significant, and the desire to bring about the necessary changes to ensure our fellow New Yorkers receive the help and care they desperately deserve brought us to the four corners of our great State. It is abundantly clear that more needs to be done to expand treatment options; more needs to be done to educate our kids, fellow parents and prescribers; more needs to be done to improve and increase recovery services; and more needs to be done to support law enforcement's efforts. If there was ever an issue for my colleagues on both sides of the aisle to unite over this would be that very cause."

John Coppola, Executive Director of the New York Association of Alcoholism and Substance Abuse Providers (ASAP), said, "The epidemic of overdose deaths and addiction is New York's number one health problem. To address this epidemic, the Senate Task Force is calling for additional prevention, treatment, and recovery support services so that all New York families and communities have access to a comprehensive continuum of services. It is critical that the magnitude of our response to this public health emergency is sufficient to address the needs of all who need help."

Senator Murphy was recently named to the Governor's statewide Heroin Task Force last week. The full report with detailed findings and recommendations can be found here.

#### LEGISLATIVE RECOMMENDATIONS

The Task Force incorporated the four essential prongs and collaborated with stakeholders in communities across the state as part of its strategy to develop the report's legislative and budgetary recommendations. These recommendations create an effective, multi-faceted, and comprehensive approach to addressing many of the issues raised by the state's opioid crisis.

The Task Force is recommending the following legislative actions for the Senate to consider during the 2016 legislative session and for state agencies to assist in implementing:

### Prevention

Limiting initial prescriptions of controlled substances (S6091B, Hannon)

Creating a Prescription Pain Medication Awareness Program (S4348A, Hannon)

Enhancing patient access to abuse-deterrent technology for opioids (S6962A, Hannon)

Ensuring proper opioid education to prescribed patients (\$7315, Murphy, Amedore, Ortt);

Establishing a Narcan kit registry (S6516A, Amedore);

Providing instruction of mental health, alcohol, drug and tobacco use in junior and senior high schools (S5546A, Funke);

Requiring patient counseling prior to issuing a prescription for a schedule II opioid (S7365, Akshar);

Increasing availability of naloxone (S6346A, Carlucci); and

Requiring the state Department of Health (DOH) and the state Office of Alcoholism and Substance Abuse Services (OASAS) to examine and report on the underreported and at-risk populations, including but not limited to Native American Tribes and the effect the heroin and opioid crisis is having on those populations.

### Treatment

Continuing education for credentialed alcoholism and substance abuse counselors (S7301, Amedore, Murphy, Ortt);

Removing barriers to Medication Assisted Treatment (MAT) (S7317A, Murphy, Amedore, Ortt); Examining insurance coverage for medications approved by the FDA for use in MAT of opioid addiction and examine the accessibility across the state to new treatment modalities; Enhancing emergency intervention procedures (S6248B, Ortt);

Establishing assisted outpatient treatment for substance use disorders (S631, Carlucci); Requiring the DOH and OASAS to examine and report on the most effective treatment modalities, including ideal settings, treatment length, and best practices for heroin and opioid addiction;

Creating and appointing an Ombudsman to assist individuals and families in obtaining appropriate insurance coverage for treatment services;

Requiring all OASAS-certified treatment providers to inform individuals receiving treatment and their families of their right to file an external appeal with the Department of Financial Services (DFS) and provide them with the means necessary to access such appeal; and

Requiring DOH and DFS to rigorously scrutinize the implementation of any conditions placed on accessing treatment.

## Recovery

Including for-profit providers in the Request for Proposals Process for substance use disorder and gambling programs (S7446, Amedore);

Creating a Sober Living Task Force (S3989A, Croci);

Expanding treatment options for judicial diversion participants (S6874, Murphy);

Expanding access to judicial diversion programs (S6322A, Ranzenhofer);

Encouraging employment of recovering users (S2346, Seward);

Enacting the Wraparound Services Demonstration Program (S7748A, Carlucci); and Requiring DOH and OASAS to examine and report on vital statistics related to heroin and opioid addiction, including relapse rate, length of treatment, and what, if any, follow up care supports are in place upon discharge.

### Enforcement

Enhancing penalties for the sale of controlled substances on park grounds and playgrounds (S994, Golden) - this bill passed the Senate on March 1, 2016;

Facilitating the conviction of drug dealers (S100, Boyle);

Expanding the crime of operating as a major trafficker (S4177, Murphy);

Creating Drug-Free Zones around drug or alcohol treatment centers and methadone clinics (S7200, Akshar);

Establishing appropriate penalties as it relates to heroin sales (S7012, Ortt);

Enhancing judicial access to juvenile records for determining judicial diversion program eligibility (S6317, DeFrancisco);

Adding fentanyl to the controlled substance schedule (S6632A, Croci);

Establishing Xylazine as a controlled substance (S7397, Murphy);

Creating the crime of homicide by sale of an opioid controlled substance (S4163, Amedore); and

Developing a formula to dispense funds acquired from the seizure of assets used in the commission of drug crimes.

### BUDGETARY RECOMMENDATIONS

The report highlighted this year's state budget commitment of \$166 million for heroin and opioid crisis, treatment, outpatient, and residential services. Due to advocacy by the Senate's Task Force members, the budget included an increase of \$25 million above the Executive

Budget's original proposal.

The report recommends that this additional \$25 million would support: Family Support
Navigator and Navigator training programs; On-Call Peer programs; Adolescent Clubhouses
to provide safe and welcoming spaces for teens; Recovery Community and Outreach Centers;
Recovery Coach peer mentoring programs; a "Combat Heroin" Public Service Campaign;
Opioid Overdose Prevention program; Opioid Medication Treatment program; Transitional
Housing Opportunities; Local Government Unit Block Grants; School Resource Officer
Training programs; and a Wraparound Services Demonstration Program.

### SENATE'S LEADERSHIP IN ADDRESSING THE OPIOID EPIDEMIC

The report is just the latest step taken by the Senate Majority Coalition to meet the heroin crisis head on — seeking legislative solutions and securing necessary funding. Since 2011, laws have been adopted to establish Good Samaritan protections, further expand access to naloxone, create I-STOP, and enhance insurance coverage among others.

In March 2014, the bipartisan New York State Senate Joint Task Force on Heroin and Opioid Addiction was created to examine the alarming rise in use of heroin and opioids that has claimed lives and hurt families across New York State. Following forums held throughout New York State, Task Force members, led by Chair Senator Phil Boyle and Co-Chairs Senator Mike Nozzolio and Senator David Carlucci, secured the enactment of 11 bills signed into law by Governor Cuomo and \$2.25 million in substance abuse funding.

Building on this success, Senators Ortt, Amedore, and Murphy were named as the Task Force Co-Chairs early last year and joined with Task Force members to hold forums in Westchester, Monroe, Niagara, Albany, Otsego, Yates, Kings, Suffolk, and Broome counties. They brought together medical experts, treatment providers, law enforcement, and affected

New Yorkers who provided invaluable insights and anecdotal evidence, affording the members the opportunity to understand how legislation could better address this public health crisis.

Members of the bipartisan task force include Senators Fred Akshar (R-C-I, Colesville), John Bonacic (R-C-I, Mount Hope), Phil Boyle (R-C-I, Suffolk County), David Carlucci (D, Rockland), Thomas Croci (R, Sayville), Hugh Farley (R-C, Schenectady), John Flanagan (R-C-I, East Northport), Rich Funke (R-C-I, Fairport), Pat Gallivan (R-C-I, Elma), Martin J. Golden (R-C-I, Brooklyn), Joseph A. Griffo (R, Rome), Kemp Hannon (R, Nassau), Andrew Lanza (R-C-I, Staten Island), William Larkin (R-C, Cornwall-on Hudson), Kenneth LaValle (R-C-I, Port Jefferson), Carl L. Marcellino (R, Syosset), Kathleen A. Marchione (R-C, Halfmoon), Jack Martins (R-C-I, Mineola), Michael Nozzolio (R-C, Fayette), Tom O'Mara (R-C, Big Flats), Michael Ranzenhofer (R-C-I, Amherst), Patty Ritchie (R-C, Heuvelton), Joseph Robach (R-C-I, Rochester), Diane Savino (D, Staten Island/Brooklyn), Susan Serino (R, Hyde Park), James L. Seward (R-C-I, Oneonta), David J. Valesky (D-Oneida), Michael Venditto (R-C-I, Massapequa), and Catharine Young (R-I-C, Olean).