

Op Ed: Opioid crisis - We have to step up to combat pain pills

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The opioid epidemic has touched every New Yorker either personally or through a friend, relative or community member. With the proliferation of fentanyl, opioid drugs have become more deadly and more addictive. In 2018, more people died from drug overdoses than perished at the height of the AIDS epidemic.

While heroin addiction has been plaguing our urban communities for decades, the suburban and rural crisis has been fueled by unscrupulous pharmaceutical companies and distributors

flooding the state with prescription opioid pain pills.

From 2006 to 2012, New York State was inundated with nearly 3.4 billion pain pills. Westchester County was supplied with 120,521,446 prescription pain pills, enough for 18 pills per person per year; Putnam County received 14,979,750, enough for 21 pills per person per year; and Dutchess County, was flooded with 59,935,295 prescription pain pills, enough for 29 pills per person per year.

These numbers are shocking and unconscionable.

As chair of the New York State Senate's Committee on Alcoholism and Substance Abuse, the Senate listened to patient advocates and is taking action. This session, we doubled the minimum number of days for inpatient substance abuse treatment, from 14 to 28, before insurance companies may conduct their concurrent review. Far too often, people seeking recovery were unable to obtain the proper treatment they needed because their insurance provider had kicked them out of treatment prematurely, often with no follow up plan. That will no longer be the case in New York State.

Further, we reduced the number of co-pays a patient could be charged for outpatient treatment to a single co-pay at the rate of a regular doctor visit. Frequently, patients were hit with multiple co-pays for each specialist they saw, in a single outpatient visit. With most patients needing multiple visits per week, outpatient Substance Use Disorder care became unaffordable.

We also mandated that Medication Assisted Treatment (MAT) be covered by all insurance plans, both public and private. We required that MAT be mandated in all correctional facilities throughout the state. Additionally, we passed legislation requiring physicians to discuss the risks associated with opioid prescriptions and possible alternatives. And, we

passed Stephens Law, requiring that treatment centers, at the consent of the patient, inform their support network should they determine that a patient is in a life endangering situation, such as a failed drug test.

But with all that has been done, we still have a long way to go in our battle against opioids. Beginning this summer, along with state Sen. Gustavo Rivera, chair of the Senate Committee on Health, and state Sen. David Carlucci, chair of the Senate Committee on Mental Health and Developmental Disabilities, I will be co-chairing a new statewide Joint Task Force on Opioids, Addiction & Overdose Prevention. We will travel the state and learn about the issues facing all of our communities as well as gaps that exist in the system. Most important, we will work to uncover best practices and develop solutions to address co-occurring disorders. Our ultimate goal is to prevent overdoses in people who are addicted and to find more avenues to get them into treatment.

If you would like to participate at one of the hearings or roundtables please email nysoverdosetaskforce@nysenate.gov or call my office at 914-241-2600 for more details. Together, we will continue to reverse this terrible crisis.

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https://www.lohud.com/story/opinion/contributors/2019/08/12/opioid-crisis-new-york-we-have-step-up-combat-pain-

pills/1984642001/?fbclid=IwARoiq6xop8PlVdH6sFHQpNS4ReUNUYib7GlwjpbOot2KIEzQiWobs_