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

TUESDAY, FEBRUARY 11, 2014

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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.

Our membership is committed to working with you to ensure the responsible stewardship of valuable resources and the provision of excellent quality services to those in need. Substance use disorders and problem gambling prevention, treatment, and recovery support services are an invaluable resource to state and local governments looking to address the needs of our communities in a budget environment that requires intelligent investment of scarce resources, along with improved coordination of services and a focus on measurable outcomes. ASAP understands the challenges the Governor, the Senate, and the Assembly must address when developing a fiscally responsible budget and simultaneously working to ensure that important services are available in communities throughout New York State to promote health and a good quality of life. ASAP consistently testifies at these annual hearings that New York's budget goals can be achieved by spending wisely on programs that produce desired outcomes while efficiently and effectively using the resources they are allocated.

New York's Prescription Drug and Heroin Use Crisis Must Be Addressed

According to a recent NYC Department of Health and Mental Hygiene report, overdose deaths related to prescription painkillers increased 233% between 2000 and 2012, while heroin-related overdose deaths also increased 84% between 2010 and 2012 in NYC, after four years on the decline. Communities across New York State are suffering from what the CDC has labeled a national epidemic of addiction and overdoses related to prescription opiates and heroin. The Trust for America's Health reported that New York's drug overdose mortality rate rose 169 percent between 1979 and 2010. The number of overdose deaths in New York State now exceeds motor vehicle related deaths. This staggering loss of life demands bold leadership and action from New York's elected officials.

In 2012, New York took an important first step in addressing our prescription drug crisis by passing the I-STOP legislation. While we recognize and appreciate the importance of I-STOP in stemming improper and illegal prescribing, diversion of medications, and illegal or unhealthy behaviors to access prescription opiates by persons who became addicted to those medications, ASAP continues to assert that I-STOP was just a first step in ending the epidemic that must now be followed by a comprehensive public health initiative that includes: prevention and education targeting the general public and specific high-risk groups, easy access to Naloxone to reverse the symptoms of overdose, treatment on demand, and recovery support services. We ask the Alcohol and Substance Abuse Committee Chairs, Assemblyman Cymbrowitz and Senator Boyle, and members of the Assembly and Senate to build on their I-STOP initiative by initiating a comprehensive public health effort capable of reversing this epidemic.

Our prayers go out to the families across NYS that have lost sons and daughters, mothers and fathers, good neighbors and friends to overdose and other tragic consequences related to an addiction to prescription medications or heroin. This crisis needs action. Please take the steps to save lives and prevent further harm to individuals and families throughout NYS.

ASAP recommends:

- A \$5 million addition to the OASAS budget to fund a new prevention and education initiative targeting physicians, pharmacists and patients, linking them to community prevention experts to prevent the misuse of prescription medications. School and community-based prevention targeted toward those most at risk would be strengthened by this investment.
- A \$5 million addition to the OASAS budget to fund additional treatment personnel in communities hardest hit by the increased demand for treatment for addiction to prescription opiates and heroin and to serve the needs of Veterans needing treatment and recovery support.
- A \$1 million addition to the OASAS budget to establish ten new recovery support centers in regions of the state where they currently do not exist.
- Passage of legislation making Naloxone more readily available to reverse symptoms of overdose and save lives.
- Regulatory relief to allow increased treatment capacity in Opioid Treatment Programs (OTP) and other treatment modalities.
- Increased access to pharmacotherapies for substance use disorders. Development of new OTPs in areas where access is an obstacle, increased access to suboxone where it is connected with OASAS licensed treatment, and increased access to Vivitrol and other vital medications
- Increased use of existing community-based detox services, expansion of community-based detox, and use of such resources as the state run ATCs to provide detox from opiates.
- Community education about the Good Samaritan Law to increase likelihood of 911 calls

Protect Investments Made in Department of Health Budget

ASAP is pleased that the Department of Health budget contains a number of opportunities to strengthen substance use disorders prevention, treatment, and recovery services. The public health policy driving the Department of Health budget incorporates the reality that behavioral health services are vital to the accomplishment of Governor Cuomo, the Senate, and the Assembly's triple aim of better health outcomes, better cross-systems collaboration, and better use of state resources. ASAP supports this public health policy and its accompanying budget provisions.

ASAP recommends that the Senate and Assembly to include in their one house budget bills, as included in the Governor's budget proposal:

- \$20 million to support the behavioral health transition from fee for service to managed care
- \$30 million to support 1915i-like services
- \$5 million for SUD residential treatment redesign
- \$5 million for the criminal justice health home initiative
- \$5 million for inpatient rate adjustments
- \$5 million to support the dual license initiative (OASAS/OMH)
- Reinvestment of dollars saved from closures of inpatient facilities back into the community-based behavioral health services system
- Elimination on April 1, 2014 of the 2% across-the-board Medicaid provider payment cut that has been in effect since April 1, 2011
- Reinvestment of Medicaid savings resulting from the transition to managed care into community based services including OASAS certified residential programs to increase access to behavioral health services
- Implementation of the collaborative care clinical delivery model in article 28 clinics to improve detection of substance use disorders and behavioral health conditions
- Reinvestment of funds where there are closures of hospitals that jeopardize access to services

Readiness for Managed Care and Health Care Reforms

Many substance use disorders prevention, treatment and recovery services providers need technical assistance and other supports to be ready for implementation of managed care. In addition to the items included in the DOH budget, ASAP strongly advocates for:

- Regulatory relief to make cross-systems collaboration more efficient and effective
- Access to funding for substance use disorders programs needing electronic medical records and other IT products, services, and consultation
- Resources for development of a substance use disorders data warehouse to facilitate business and services transformation as the field moves from fee for service to managed care, implements health care reform, and accommodates new health planning infrastructure (ASAP recommends a \$500,000 add to the budget for data warehouse development).

Invest in Problem Gambling Prevention, Treatment, and Recovery Services Before Expanding Gambling

As New York State embarks on the development of casino gaming establishments within the state, the increased risk for problem gambling and its consequences must be addressed. In an environment where problem gambling prevention, treatment, and recovery support services are almost non-existent, significant expansion of gambling is particularly worrisome. 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 recommends that one percent of the revenue generated from all new gambling opportunities should be set aside and dedicated exclusively to the implementation of 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.

Work Force and Program Administration Concerns Threaten Our Service Delivery System The continued lack of a Cost of Living Adjustment (COLA) for substance use disorders and problem gambling services providers and other human services workers has compromised our ability to retain good staff and to ensure continuity of services. With a workforce crisis impacting our programs, elimination of the COLA makes it even harder for programs to attract and retain staff. Compounding the lack of a COLA are the crippling increases in health benefit costs and other fringe benefits. Our employees are paying more and more out of their own pockets for a shrinking menu of healthcare benefits. They deserve a COLA and should receive one.

ASAP recommends that the Senate and Assembly work with the Governor to ensure that a COLA is put into place. We also recommend a public/private collaboration for the purchase of health insurance and other personnel benefits so that, with the resulting economy of scale, the burden on our workforce and agencies could be relieved.

These are times of amazing economic challenge, rapid and profound change, and significant need for health and human services. ASAP member agencies welcome the opportunity to work with you to address these challenges. We thank you for your commitment to community service 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.