

The New York State Conference of Local Mental Hygiene Directors, Inc.

Joint Senate Task Force on Opioids, Addiction & Overdose Prevention Public Hearing

November 15, 2019

Testimony Presented By:

Kelly A. Hansen, Executive Director Senators Pete Harkham, David Carlucci, and Gustavo Rivera, thank you for this opportunity to testify before you regarding New York's response to drug use and the overdose crisis.

My name is Kelly Hansen and I am the Executive Director of the New York State Conference of Local Mental Hygiene Directors (the Conference).

The Conference represents the Directors of Community Services (DCSs)/County Commissioners of Mental Health) for each of the counties in the State, also referred to as the Local Governmental Unit (LGU). The DCSs are county officials and have specific responsibilities and authority under the Local Services provisions of Article 41 of the Mental Hygiene Law (MHL) for planning, development, implementation, and oversight of services to adults and children in their counties affected by mental illness, substance use disorder, and developmental disabilities.

My testimony outlines the Conference's recommendations on strategies for reducing overdoses, improving individual and community health and addressing the devastating consequences of addiction:

- Continued State Aid Funding to the LGUs to sustain jail-based substance use disorder (SUD) treatment programs and transition services in county correctional facilities (outside of NYC)
- State Aid Funding to the LGUs for the coordination of community-based addiction services upon the implementation of bail reform
- Support for legislation that seeks to increase access for addiction treatment and services

LGU Role in County Correctional Facilities

The LGUs/DCSs are charged with specific responsibilities under Mental Hygiene Law (MHL) to plan for and oversee integrated services in their counties. In order to carry out this role, the DCSs have a bird's-eye view of the mental health, substance use disorder and developmental disabilities services systems, and linkages to the related services in the county.

The people we serve never need just one service. Their needs are complex and extend beyond the scope of behavioral health care and into other distinct areas, such as housing, public benefits, the criminal justice system and the county jail.

The County Mental Health Commissioners have long recognized the need for an appropriate level of resources to initiate SUD treatment program and transition services in jail settings.

Incarceration provides a unique opportunity to offer treatment and supports during periods when people are experiencing abstinence and may be more receptive to begin treatment. It is a critical time to engage an individual in choosing a lifestyle of abstinence and recovery.

The Need for Continued State Aid Funding to the LGUs to sustain Jail-Based SUD Treatment and Transition Services Programs

Over the past two budget cycles, the State has committed to provide \$3.75M in State Aid funding to the LGUs to develop and sustain jail-based SUD treatment programs and transition services in forty-nine (49) county jails. These services include, peer support, CASAC services, group and individual therapy, relapse prevention, medication assisted treatment programs and re-entry planning. This year's enacted budget also included an additional \$1M to support the cost of the medications used in providing medication assisted treatment (MAT) in 24 jails.

The majority of counties are currently receiving \$60K, which includes jails with significantly large census. As you can imagine, this level of funding does not offer enough support in those counties to offer needed programming to all individuals positively screened for SUD. However, all counties have been successful in developing basic level programs or offer an expansion of certain SUD treatments and/or transitions services.

Additionally, seven counties received allocations ranging from \$115K-\$200K and were able to considerably expand programming. To illustrate the impact of a \$200,000 State Aid award, Broome County has been able to now offer a strong set of clinical protocols and interventions, as well as transition services, all forms of MAT and Naloxone at the time of release. It is also important to note that Broome County is uniquely situated to offer Buprenorphine and Methadone, with twenty-four (24) waivered prescribers and an available Opioid Treatment Program (OTP) clinic provider.

The Conference graciously asks for your support for the continuation of \$4.75M in OASAS State Aid to the LGUs for these existing programs in next year's SFY 2020-21 Enacted State Budget.

State Aid Funding to the LGUs for the Coordination of Addiction Services and Supports Needed Under Bail Reform

The Conference recognizes the State's intent with the passage of various bail reform measures in this year's Enacted Budget. The DCSs recognize that inmates who entered the jail and screened positive for a substance use disorder are at high risk of death by overdose upon re-entry. Continuity of care is important for incarcerated individuals who are currently

receiving addiction treatment as part of jail SUD/MAT programs and who will be released on January 1, 2020.

The critical need for individuals to maintain treatment requires that all jails be equipped with the appropriate re-entry services needed to facilitate a smooth transition back into the community. Providing adequate State Aid funding through the LGUs to develop a plan for this transition will be crucial for the intricate levels of service coordination required among the treatment providers, jail administration, the courts, and community-based treatment providers.

Support for Legislation to Increase Access and Expand Addiction Treatment and Services

The Conference fully supports legislation to increase access and expand addiction treatment and services across the State, while taking into account the significant fiscal constraints the counties continue to face. We believe the bills highlighted below offer a variety of positive avenues for the support and expansion of addiction prevention, treatment and recovery services:

- S. 4496 (Martinez) An act to amend the mental hygiene law, in relation to the creation of a recovery living task force. *Inclusion of LGU/DCS representation as part of this task force is an important element to these discussions. CLMHD's Addiction Services and Recovery Committee can serve as an excellent resource for the development of recovery living housing recommendations.*
- S.5935 (Harkham) An act to amend the social services law and the public health law, in relation to medication for the treatment of substance use disorders. The LGUs/DCSs recognize and support an individual's right to receive all appropriate medication assisted treatments available.
- S. 6361 (Carlucci) An act to amend the public health law, in relation to information regarding the use of opioid antagonists for first aid or emergency treatment.
 Requirements to increase awareness and education around the use of opioid antagonists is fully supported by the LGUs/DCSs.

I, again, thank you for the opportunity to address you regarding the Conference's recommendations as part of the Joint Senate Task Force on Opioids, Addiction & Overdose Prevention hearing seeking stakeholder feedback and I am happy to provide you with any further information or answer any questions at this time.