Oral Statement by Samantha Arsenault  
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before the  

Joint Senate Task Force on Opioids, Addiction and Overdose Prevention  
For New York State  

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Van Buren Hearing Room A  
Legislative Office Building  
Albany, New York  

Members of the Task Force, thank you for the opportunity to be here today. My name is Sam Arsenault and I am the Vice President of National Treatment Quality Initiatives at Shatterproof.

Shatterproof is a national nonprofit organization, based in New York City, dedicated to reversing the addiction crisis in America. In 2012, Gary Mendell founded Shatterproof after his son Brian’s death that followed an almost decade-long struggle with substance use disorder.

Today, Shatterproof advocates for changes to federal and state policy, provides public education through family and workplace programs, and engages in payment reform to advance the use of evidence-based practices in treating addiction. We are also leading the development of a web- and app-based system to assess, and advance, the quality of addiction treatment facilities. This system, called ATLAS, is currently being implemented in six states, including New York, and is anticipated to launch in 2020.

As Senator Carlucci shared at a hearing on Staten Island a few months ago, 3,224 individuals lost their lives to opioid overdose in New York State in 2017, a rate of 16.1 deaths per 100,000 persons compared to the average national rate of 14.6 deaths per 100,000 persons. There are a lot of things that need to happen to reduce that number, and none of the organizations in this room can do it alone. But by working together to implement evidence-backed solutions we can change the paradigm and reverse these tragic trends, creating a model for other states to follow.

Despite commendable efforts by many addiction treatment facilities to integrate best practices into their clinical workflows in the wake of this crisis, there is currently no public-facing platform reporting on compliance with basic quality standards for addiction treatment. At present, the process of searching for addiction treatment too often involves navigating misinformation and predatory marketing practices that lead people to seek treatment far from their communities or by bogus facilities. The process of locating care is daunting and confusing at a time when individuals and families are desperate for help, and it’s increasingly difficult to differentiate between high-quality treatment facilities and programs based on folklore or outdated methodologies.
Shatterproof is currently working with the Office of Addiction Services and Supports (OASAS) and has had the pleasure of partnering with a number of the organizations in this room and across New York on the development and implementation of ATLAS. This addiction treatment locator, analysis, and standards tool is designed with the triple aim of empowering patients and their families to navigate this system, to create data-driven feedback loops to inform provider’s quality improvement efforts, and to ensure policy and payment decision makers such as yourselves are able to align technical assistance resources and market forces with the delivery of evidence-based practices.

ATLAS will triangulate compliance with clinical best practices shown to improve outcomes across patient populations using data from three sources: insurance claims, patient experience surveys, and a treatment facility survey. Importantly, in addition to reporting on their processes and structures, addiction treatment facilities will be asked about the biggest systemic barriers they are faced with in delivering high-quality addiction care. Shatterproof has committed to releasing these findings in aggregate to better inform policy and programmatic efforts to support the providers on the front lines of the addiction crisis.

While addiction treatment has historically trailed behind or been slower in the adoption of best practices than other fields of medicine, they have also been stippled by lower reimbursement rates and more stringent regulations than those placed on providers of physical healthcare, in some cases when delivering the exact same medications. The focus on accountable care delivery must go hand in hand with support for providers to empower them to meet these standards by reversing the institutional stigma that has contributed to these discrepancies. We hope that you will consider how future legislation can help address these issues, which range from over burdensome utilization management practices on the part of payers to budget deficiencies that fail to address the workforce and infrastructure needs of the New York treatment community.

We commend the Assembly and Senate for passing legislation in 2019 to prohibit prior authorization for the medications for addiction treatment and are hopeful that the governor will sign these bills into law this year.

Emphasizing continued quality measurement in addiction treatment is a necessary component of any effort to curb the addiction crisis. ATLAS will provide a powerful picture of where and how regulators should be allocating support and financial resources, which is particularly important when determinations are made about how to spend opioid settlement dollars. It will serve as a tool for continual quality improvement spurred by patient and family empowerment. Your support for successful implementation of this project will help people better navigate this system and reverse this crisis. We welcome future discussion of how to ensure this effort is sustained and available for all New Yorkers, and how to utilize the system to ensure state funded programs are delivering care that will put people on the path of recovery, rather than in harms way.

Thank you.