



Recommendations for 2018-2019 New York State Budget

The pandemic of overdose and addiction related to prescription opioids, heroin, and fentanyl continues to escalate in New York State and across the country. In spite of all that is currently being done, including a number of new pilot initiatives, deaths attributable to heroin and prescription opioids have continued to dramatically increase in NYS during 2017. Resources have not been allocated in a manner that matches the magnitude of this public health emergency.

President Trump recently declared a Public Health Emergency without calling for a much needed increase in funding. New York State can set an example for what should be done across our country by funding prevention, treatment, recovery support, and harm reduction services at a level sufficient to address the magnitude of this pandemic. Experts predict that overdose deaths will continue to increase annually unless something dramatic is done to increase access to prevention, treatment, recovery, and harm reduction services.

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Workforce Crisis

A 2016 Center for Human Service Research survey found that turnover is a significant problem in SUD programs and is related to inadequate pay (60%) and benefits (21%). Treatment program staff vacancies are increasingly the reason individuals needing treatment are not able to access services. Beds are empty because there is no staff person to provide treatment, resulting in persons with addiction having to be placed on waiting lists. Prevention programs across NYS have lost more than a third of their staff because of shrinking funding levels and difficulty recruiting new staff because of inadequate pay. In NYC public schools, for example, there were 500 prevention specialists in 2009 and only 280 in 2017 providing critical prevention services to at-risk youth; a loss of 44% of their prevention workforce.

Incentives available to other professions, such as student loan forgiveness; scholarships for training, education, and certification; and salary/hiring incentives could help to attract and retain staff, are not available to SUD professionals who are needed to address the heroin epidemic.

The New York Association of Alcoholism and Substance Abuse Providers, Inc. (ASAP) recommends a significant increase in the OASAS budget to strengthen our response to this pandemic.

Strengthen Prevention Services by Strengthening the Prevention Workforce

To bring the prevention workforce back to its 2009 level and to address increased demand for prevention services created by the opioid pandemic, 500 prevention professionals to New York's school and community-based prevention programs to address unmet need and increased demand for prevention service. Specifically, add:

- 250 prevention professionals to be deployed in NYC public and parochial schools and 50 in public and parochial schools outside of NYC in high need schools particularly those that currently have NO prevention personnel
- 150 prevention professionals to be deployed to community-based prevention programs outside of NYC with emphasis on services in high-need communities and 50 prevention professionals to be deployed to community-based prevention programs in high-need NYC neighborhoods

Cost for 300 prevention professionals in NYC ($\$75,000 \times 300 = \22.5 million) and 200 prevention professionals outside NYC ($\$60,000 \times 200 = \12 million) is approximately \$34.5 million



Strengthen Treatment by Strengthening the Treatment Workforce

Support the equivalent of adding 600 treatment professionals to New York's continuum of treatment services to address the heroin/prescription opioid pandemic and the demands for treatment for persons addicted to alcohol and other drugs. Specifically:

- 150 treatment professionals to be deployed in NYC outpatient programs and 150 treatment professionals in outpatient programs outside of NYC to provide clinic based services and offsite outreach to homeless shelters, criminal justice facilities, hospitals and other setting where persons with addiction can be screened and referred for treatment
- 150 treatment professionals to be deployed in NYC inpatient and residential treatment programs and 150 treatment professionals to be deployed outside in inpatient and residential treatment programs outside of NYC to reduce the need for overtime and to enable enhance services

Cost for 300 treatment professionals in NYC ($75,000 \times 300 = \$22.5$ million) and 300 treatment professionals outside NYC ($60,000 \times 300 = 18$ million) is \$40.5 million

Strengthen Recovery Services by Supporting the Recovery Services Workforce

Many counties in NYS do not have a recovery center to provide recovery supports to recovering persons and their families. ASAP recommends that start-up funds be added to the budget so that 10 more of these counties can create recovery centers.

Cost for 10 recovery centers: $10 \times \$350,000 = \3.5 million

Certified Recovery Peer Advocates and Certified Addiction Recovery Coaches are increasingly in demand as New York adopts a recovery oriented system of care. ASAP recommends a peer workforce initiative to help train and certify 1000 new peer advocates and create infrastructure to support their entry into the SUD workforce.

Cost for 1250 candidates certification test and fees ($1250 \times \$200 = \$250,000$) and support for the New York Certification Board which certifies addiction recovery peers ($250,000$) is \$500,000

Strengthen the Substance Use Services Workforce

Provide \$21 million to support SUD workforce incentives such as student loan forgiveness; scholarships for training, education, and certification; medical fellowships, and salary/hiring incentives could help to attract and retain staff

To the extent possible, ASAP encourages use of funds from the asset forfeiture Substance Abuse Services Fund to support these incentives.

Strengthen Employee Benefits for the SUD Field

SUD service providers have seen dramatic increases in the cost of their health insurance and other employee benefits. The crippling impact of these increases has increased the burden on employees (high deductibles, increased share of premiums), resulting in staff leaving the field for better compensation opportunities.

ASAP recommends making the state's health benefit package available to SUD service providers so that savings can be created and reinvested to address the heroin/prescription opioid crisis.

Strengthen Core Services to Address the Pandemic of Opioid Overdose and Addiction

- Increase Medicaid rates to reflect the actual cost of services. This would also help to stabilize the workforce needs in programs that do not receive OASAS funding.
- Increase funding for recovery housing
- Ensure that every region of the state has access to treatment on demand

Support for the SUD workforce and the programs that comprise the core prevention and treatment services in all 62 counties of NYS is essential if we are to address the opioid pandemic with the level of effort necessary to reverse its course.