

New York Association of Alcoholism and Substance Abuse Providers, Inc.

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Budgetary Recommendations for 2017-2018 New York State Legislature

The prescription opioid/heroin crisis continues to escalate in New York State, in spite of all that has been done. Deaths attributable to heroin and prescription opioids were greater in 2016 than they were in 2015. If resources are not allocated in a manner that matches the magnitude of this public health emergency, deaths will continue to mount and our families and communities will continue to pay the price with grief and anger that more could have been done.

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 epidemic and addiction related to alcohol and other drugs as follows:

Address Prevention and Treatment 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%). As vacancies occur, treatment and prevention programs are having significant difficulty filling positions resulting in waiting lists for treatment and a lack of prevention staff to respond to community needs for prevention presentations in schools and communities.

- ➤ ASAP recommends adding \$5.25 million to the DOH budget to adjust APG reimbursement rates for treatment. Revenue from a 5% rate increase would provide the additional reimbursement necessary to cover the cost of salary and personnel adjustments to help retain staff needed to combat the heroin/prescription opioid epidemic.
- ➤ ASAP recommends adding \$20 million to the SUD prevention workforce to ensure full staffing of all prevention programs by filling vacancies, adequately supporting retention efforts for existing staff, and adding new positions where demand for prevention exceeds local resources.
- ➤ ASAP recommends using \$30 million from the Substance Abuse Services Fund (Asset Forfeiture funding) to support a workforce initiative offering student loan forgiveness; scholarships/tuition reimbursement for training, education, and certification; and salary/hiring incentives to help attract and retain staff to address the heroin epidemic. (Because these funds already reside in the Substance Abuse Services Fund, this would require no new revenue)

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 Recovery Support Services

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.

- ightharpoonup Cost for 1000 candidates for NY Certification Board certification test and fees: 1000 x \$200 = \$200,000.
- > \$250,000 to establish a New York Certification Board Peer Employment Service.



ASAP also recommends creation of two Family Resource Center pilot projects using parent and family run organizations to provide information, referral, and support services to families impacted by overdose and addiction. The total cost for pilots proposed for Buffalo and Long Island would be \$750,000.

Health Care Facility Transformation Program

The proposed 2017-18 budget includes \$500 million for this program, an increase of \$300 million. None of the increase is proposed for community-based organizations, which would receive the same allocation as last year, \$30 million.

➤ ASAP recommends that \$125M of the proposed funds should be designated for community-based organizations.

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