# Friends of Recovery – New York 2018 Addiction Recovery Policy Statement



Friends of Recovery – New York (FOR-NY) is a state-wide Recovery Community Organization (RCO) working on behalf of millions of individuals and families in New York to educate decision makers and the general public about recovery from addiction. We are dedicated to eliminating negative public perception, ending discrimination and removing barriers to recovery including those that exist in treatment, housing, and employment. We support the expansion of recovery support services for individuals and families. We call on the Governor and the NYS Legislature to take the following immediate actions to address the urgent addiction crisis in New York State:

### **CONTINUUM, QUALITY AND ACCESSIBILITY OF CARE**

**Recovery community resources** - Fund at least one Recovery Community Organization, Recovery Community Outreach Center and Youth Clubhouse in each county; Ensure that at least two Certified Recovery Peer Advocates; two Certified Addiction Recovery Coaches and two Certified Family Support Navigators exist in every county in NYS.

**Support/Establish Recovery High Schools** - and Collegiate Recovery Programs throughout New York State. Recovery High schools are effective and the accompanying Alternative Peer Groups (APG's), utilized in Texas have been shown to reduce recidivism and <u>dramatically</u> improve recovery outcomes for young people. Support <u>S5537/A8380</u>.

Eliminate patient brokering and related unscrupulous practices- Many families and individuals have been taken advantage of by roving, independent "interventionists", who are in fact "brokers" receiving kickbacks. We support legislative action making it illegal to refer ("broker") clients to treatment centers for a per head fee or contracted amount or to hold oneself out to be a recovery coach or interventionist qualified to make level of care determinations without the appropriate training, certification and or license. Support A7689 to combat brokering.

**Treatment on demand -** It is unconscionable that individuals must wait days and even weeks on average before they can access sorely needed treatment. Insurers, providers, state and county government units must all work together with recovery community organizations to ensure that immediate access to treatment becomes the norm rather than the exception. Anyone in need, must have 24/7 access to treatment on par with access for all other medical conditions. We also support A05082 implementing a permanent heroin/opioid addiction wraparound services demonstration program.

**Expand the role of peers for individuals and families** - We support increased education and training to help peers access needed certifications and the expansion of employment opportunities for recovery coaches, peer advocates and family navigators in all phases of the addiction to recovery continuum including: crisis centers, detox units, inpatient rehabilitation, outpatient treatment, community residences, recovery centers, supportive housing, hospitals/emergency rooms; probation, parole; emergency housing (shelters); diversion courts and attached to recovery community organizations and at other recovery access points. Peers should be in sustained recovery in order to become certified.

**Evaluation, assessment and referral after overdose reversal** - We support the creation of proactive interventions to assist those in crisis after receiving emergency Naloxone to reverse an opiate overdose. In most instances, no treatment intervention occurs (or any referral) and there are numerous reports of additional overdoses and even death. Evaluation, in depth assessment, treatment referrals and *warm handoffs* to recovery coaches or peer advocates with access to supports must be offered, implemented and made immediately available to help save lives. Critical intervention points must include (but not limited to) emergency rooms, emergency medical response points and law enforcement contacts.

Medication Assisted Treatment (MAT) and Harm Reduction (HR) as chosen pathways to recovery - We support multiple pathways to recovery including MAT where therapeutic support is recommended but not mandated. Expand access for individuals seeking MAT or Recovery without penalty for "non-compliance with treatment protocols." While supportive counseling is recommended as an adjunct, research does not indicate a requirement should be mandated. Evidence suggests individuals can be successful with and without additional therapeutic interventions. Rapid MAT access and

<sup>&</sup>lt;sup>1</sup> [Recent evidence suggests that when individuals are treated as a resource in their recovery choices they connect with supports that yield sustainable recovery. (see https://www.ncbi.nlm.nih.gov/m/pubmed/16870915/)]

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linkage to peers should be the goal. FOR-NY believes that each individual has the right to choose their own pathway to recovery. There is overwhelming evidence that abstinence based recovery is not effective for a significant percentage of those affected and in light of the lethality in our current addiction crises, efforts to reduce harm should be supported.

Improve outcomes for those in treatment and recovery with a history of criminal justice involvement - We support the removal of barriers that make it difficult for individuals with criminal records to access treatment, sustain recovery and have the same opportunity for housing, employment, healthcare, and education as other New Yorkers. Additionally, provide those leaving the criminal justice system or mandatory rehabilitation with MAT whenever needed in order to maximize sustained recovery outcomes and prevent overdose upon re-entry in the community.

**Trauma informed recovery services and evidence based treatment** - Recovery studies and programs should continue to look at trauma as an addiction risk indicator. Related care for those in treatment and recovery should be trauma informed. We must insist that treatment is Evidence Based to ensure that all those seeking and accessing treatment are able to maximize their chances of effecting positive change and finding long term recovery.

**Certification of recovery homes -** We support a standardized certification of recovery homes. Individuals in early recovery must be protected and afforded a safe and supportive living environment. Regulations and supervision must be adopted within the parameters of the Federal Fair Housing Act in a manner that encompasses those using medication to support their treatment and recovery. Such housing must promote integrity, ensure quality improvement, uphold residents' rights, be recovery-oriented, and conducive to optimum well-being. We support the expansion of recovery residences statewide which embrace those receiving MAT to support their recovery to meet a rapidly increasing demand.

#### INSURANCE PARITY ENFORCED WITH EXPANDED ACCESS TO ADDICTION TREATMENT

We urge the Governor and the NYS Legislature to work together to enforce insurance and parity laws in New York, and hold insurance companies accountable- (Support Legislation S1156/A.3694 requiring insurers and health plans to submit data and key metrics on compliance with parity laws). Insurers must allow unfettered access to a minimum 14 days of inpatient treatment. In addition, we call for increased funding for addiction treatment and recovery support services so that individuals receive care that is accessible, accountable, efficient, equitable, sustained, and of the highest quality.

### **JUSTICE FOR LOST LOVED ONES**

**Support lawsuits holding opioid companies accountable -** Demand that revenue generated by lawsuits and other compensation considerations is earmarked specifically to support prevention, treatment and recovery.

**Family harm/Loss register** - Family members nationwide are working to find a way for people to list any legal action they are taking against insurance companies. A coordinated "register" would facilitate communication between plaintiffs, help identify common ground and perhaps similar grievances against insurers, who continue to dodge, deny, and delay. This initiative may very well encourage other affected families to come forward as well.

**Asset forfeiture funds** - We recommend that all asset forfeiture money in the Chemical Dependence Service Fund (Section 97-W/State Finance Law) be allocated to OASAS and invested in the expansion of prevention, treatment, and recovery services. These funds should be dedicated solely for their intended purposes as described.

#### EDUCATIONAL CAMPAIGNS/ENDING NEGATIVE PUBLIC PERCEPTION

**Hope in recovery campaign -** Invest money in an awareness campaign to educate the public about the promise of recovery. Education is the key to ending negative public perception. Highlight lived experience and long-term recovery.

**Parity education campaign -** The sad reality is only a small fraction of the population understands what parity is. Education is needed so the public knows they have been unfairly treated in their coverages under the current system.