

NEW YORK STATE
OFFICE OF ALCOHOLISM AND
SUBSTANCE ABUSE SERVICES

Eliot Spitzer
Governor

Karen M. Carpenter-Palumbo
Commissioner



OASAS

*Improving the lives of all New Yorkers by
leading a premier system of addiction services
for prevention, treatment, recovery.*

Budget Hearing Statement
October 25, 2007

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Introduction

Thank you for the opportunity to participate in this budget hearing with my colleagues. I would like to present to you the strategic plan we've developed at the Office of Alcoholism and Substance Abuse Services.

Since the melding of the Division of Substance Abuse Services and the Division of Alcoholism and Alcohol Abuse 15 years ago, OASAS has become the largest addiction services system in the nation.

Through our network of more than 1,400 providers, we treat 110,000 New Yorkers on any given day. However, we know that the need is far greater. Roughly 2.5 million New Yorkers currently are dealing with an alcohol, drug or gambling addiction. That breaks down to about 1.8 million dealing with alcohol or drugs – or one in every 10 New Yorkers. Almost one million New Yorkers are dealing with problem gambling.

At OASAS we are implementing a "back-to-basics" strategy, grounded in evidence that science-based prevention is the first prescription for a healthy New York; that treatment for addiction does work; and recovery is both abstinence from substance abuse and a lifestyle of health and wellness.

It is our mission to improve the lives of all New Yorkers by leading a premier system of addiction services for prevention, treatment, recovery.

As we begin the public discussion on the 2008-09 State budget, OASAS' priorities are in lock-step with the priorities set by Governor Spitzer: putting people first; reform and reinvestment within our system; and collaboration among state agencies.

Putting People First

Over the past several months, the commissioners of the Governor's Public Health Team (OASAS, DOH, OMH, and OMRDD) conducted first-of-its-kind "People First Coordinated Care Listening Forums" across the state in five locations, from New York City to the North Country.

The goal of these forums was to listen to the health and mental hygiene needs of New Yorkers and to provide recommendations on how to collaboratively improve and coordinate treatment and support services for people who have needs across the four systems.

More than 2,200 consumers, family members, providers, community members, and local government representatives attended one or more of the forums. Three themes for improvement evolved: better access to services; quality and coordinated services; and overcoming service barriers created by the systems. An executive summary with recommendations has been recently transmitted to the Governor for his review.

The OASAS Leadership Team has just completed a three-month project of reaching out to our 1,419 programs to get feedback on what is working and what needs improvement in the addictions field. Information from People First Forums and this initiative, along with personal visits to some 300 providers, is the foundation for developing our 2008-09 Agency Budget Request.

Potential Gaps and Making Difficult Choices

We are very much aware of the significant challenges facing our state and our role in helping the Governor implement his agenda during these fiscally challenging times. We have taken seriously the Governor's call to contain spending and achieve efficiencies in the administration and delivery of addiction services while achieving and maintaining critical services and addressing high- priority program needs.

Accordingly, OASAS' 2008-09 Budget Request complies with the requirements set forth in the Budget Call Letter. While there are greater needs on an appropriation basis for 2008-09 resulting from salary adjustments, non-personal service fixed-cost growth, annualization of current year Aid to Localities initiatives, and other non-discretionary increases, to offset this growth, OASAS is committed to reallocating our existing resources, as well as generating State Medicaid savings in collaboration with the Department of Health and Office of Medicaid Inspector General.

As we move forward in the development of a fiscally sound spending plan for 2008-09 and beyond, we have identified a number of priority and reinvestment proposals for your consideration should additional resources become available in the State's Financial Plan.

Reform and Reinvestment

Given the difficult economic times that New York is facing, it is imperative that we all look at the way we are doing business and see if there is a better way to provide a service without it costing more. In other words, where can we look to reform and reinvest?

Our first priority is detoxification services on which the State spends over \$325 million annually. To address the high-cost of acute care hospital-based detoxification services, OASAS and the Department of Health convened the Task Force on the Continuum of Care for Alcoholism and Substance Abuse Services. This task force, which was a public/private partnership, has identified methods to restructure and reform the detoxification system in New York. The Task Force has performed an exemplary service to chemically dependent individuals in New York in identifying the fundamental reforms which will help redefine our detoxification system. A final report will soon be delivered to the Governor and Legislature which will include recommendations and issues agreed upon by the Task Force. We believe that this effort represented a true partnership of state agencies, hospitals, community-based providers and local governments. We intend to move forward with these recommendations and continue to work together with the task force members in developing the best detoxification system of any state.

In addition to these reforms, OASAS is also seeking to open a detoxification "swing bed" unit at the Ward Addiction Treatment Center. OASAS currently operates such a unit at the Kingsboro Addiction Treatment Center.

In collaboration with the Office of Mental Health, a Co-Occurring Disorders Task Force was established to review clinical, regulatory, and fiscal issues that impede an individual's ability to accessing care when she/he suffers from a co-occurring disorder (COD).

OASAS is proposing two initiatives for 2008-09: establishing six new Dual Recovery Coordinators throughout the state; and implementing a two-year pilot program at 10 locations to improve service delivery and increase retention for individuals with a co-occurring disorder.

Prevention is the First Prescription for a Healthy New York

Based on a Risk and Protection Framework, OASAS spends \$75 million on a variety of prevention services to decrease the generations of children that suffer from addiction. In addition to our funded system, OASAS supports community coalitions that can leverage other resources to increase prevention services. Together with our state and local partners, we are working toward a healthier and drug-free New York.

Since July 2005, OASAS has been responsible for funding gambling prevention and treatment services. To expand upon the current system, OASAS has developed a three-year plan for gambling for your consideration.

In 2008-09, OASAS is proposing to expand problem gambling prevention programming to an additional 18 counties (with the remaining 19 counties to be funded in 2009-10). To better understand the true social impact that gambling has on our society, OASAS is also seeking support for a Gambling Social Impact Study. In addition, OASAS also will propose to consolidate the addictions and gambling help lines under one provider for 24-hour-a day coverage, seven days a week.

Treatment, Practice Innovation and the Gold Standard for New York

On any given day, about 110,000 individuals are enrolled in New York's chemical dependence treatment programs. There are 1,116 OASAS certified treatment programs administered by 453 agencies. OASAS also directly operates 13 Addiction Treatment Centers, two community residences and one crisis unit. The overarching goal of any chemical dependency treatment system is to provide the highest quality services that are accessible to all those in need of care.

OASAS has identified a number of priority initiatives in the treatment area, including: increasing nursing staff at our addiction treatment centers to manage a more complex

clientele and to ensure that patient-centered care is at the forefront; developing and delivering training programs to enhance the competencies of professionals in the addictions and problem gambling fields; assisting programs in utilizing evidence-based practices; and expanding residential treatment capacity in areas outside New York City and Long Island.

Building a Foundation for Recovery in New York

In response to the needs of people in recovery, OASAS plans to provide recovery services which are integrated with prevention and treatment services. The goal is to help the individual address their current concern and allow them to continue to move forward in their recovery as they assume greater responsibility.

OASAS is facilitating a grassroots movement to unite people and their families which can assist them in achieving stable housing, employment and access to better health care.

In order to foster this movement, OASAS has identified the following priorities for 2008-09: establish 21 Recovery Community Centers over the next three years (five in 2008-09) to provide persons in recovery and their families informational, recreational, social and emotional support to sustain their ongoing recovery; support case management companion services to providers receiving Shelter Plus Care funding; and establishing 125 scattered site apartments (outside New York City) with case management and vocational services.

OASAS Collaborations with Providers and Other State Agencies

A majority of initiatives now under way at OASAS involve collaboration with the provider field and/or other agencies. It is a core value at the agency to foster joint projects to ensure utilization of resources in a coordinated, more effective way. There are a number of collaboration task forces and workgroups in which OASAS is involved with other state agencies or providers, including:

- An OASAS/OMH Co-Occurring Task Force.
- An OASAS/ Provider/Recovery Community Gold Standard Initiative.
- An OASAS/Alcoholism and Substance Abuse Providers Paperwork Reduction Initiative.
- An OASAS/Committee of Methadone Program Administrators (COMPA), National Alliance of Methadone Advocates (NAMA) and providers on Methadone Services.

- Talent Management/Workforce Development.

Priorities and Recent Accomplishments

Tobacco-Free Prevention and Treatment Initiatives - The OASAS system of prevention and treatment providers is embarking on an era of leadership in the field of public health. In July 2007, OASAS issued a draft regulation that would make New York the first state in the nation to ban tobacco use from its prevention and treatment programs.

Research has shown that more people will die from tobacco-related illness than all other abused substances combined. Though the New York smoking rate is 18.2 percent, the chemically addicted population smoking rate is between 85 and 92 percent. Smoking is clearly a deadly addiction but it is also a documented trigger that can compromise recovery.

People in the OASAS system will be able to obtain treatment for nicotine addiction through trained counselors, free over-the-counter Nicotine Replacement Therapy and the support of smoke-free facilities. This public health initiative is the first in our focus on the overall health and wellness at OASAS and of those we serve.

Underage Drinking: Not a Minor Problem – Lieutenant Governor David Patterson helped launch the "I Decide – Underage Drinking: Not a Minor Problem – College Edition" public service announcement which has been disseminated statewide. Our awareness posters were placed in the Metro New York issue of *U.S. News and World Report's Best Colleges* issue.

Nobody Wins with Underage Gambling – Working collaboratively with the Division of the Lottery, OASAS launched several underage gambling initiatives, including public service announcements and a new underage gambling awareness radio tagline, "Nobody wins with underage gaming." The Lottery is also distributing OASAS underage gambling materials at all of their street fairs, community events, and press kits.

Gambling Credentials – In an effort to increase credentialed professionals to assist our gambling efforts, OASAS established a grandparenting process for Credentialed Alcoholism and Substance Abuse Counselors and Credentialed Prevention Professionals, with more than 610 certificates being issued.

OASAS Strategic Investments

OASAS has made significant and strategic investments in high-priority programs and initiatives to strengthen the OASAS system and to ensure better patient outcomes and cost-effectiveness in our programs. Some of these major initiatives include:

- Awarded the second year of a three-year Cost of Living Adjustment (COLA) which enables state-funded local providers to strengthen their efforts to recruit and retain staff and to respond to critical non-personal services costs.
- Awarded funding to 14 adolescent outpatient demonstration programs to serve children and their families to avoid costly chemical dependence, child welfare and/or juvenile justice institutional placements, and preserve family units.
- Opened a medically-supervised outpatient detoxification program in a New York City shelter.
- Partnered with Parole and the Department of Correctional Services to establish a community reentry initiative for parolees returning to Erie County.
- Developed a Request for Proposal (RFP) that will establish up to 375 scatter-site and congregate care units under the New York/New York III initiative.
- Developed a Request for Information to gather additional information needed to conduct a competitive bid to expand intensive residential/community residential treatment capacity by 100 beds for veterans returning from Iraq and Afghanistan.
- Developed a Local Planning Supplement to expand community residential service capacity by 100 beds to meet the needs of individuals on Long Island.

Clearly, the challenge is great in addressing the drug, alcohol and gambling addiction of 2.5 million New Yorkers and the millions of children, family and others who are also impacted by these addictions. By focusing on reform and reinvestment, pursuing collaboration and always putting the people we serve at the forefront of our efforts, OASAS is prepared to meet that challenge.

The OASAS back-to-basics strategy begins with the knowledge that prevention is the first prescription for a healthy New York, that treatment works, and sustained recovery is attainable. OASAS is committed to producing successful outcomes, setting gold standards of service, leadership, managing the professional talent that is central to our services, and fiscal responsibility in all areas.