

ANDREW M. CUOMO Governor

ARLENE GONZÁLEZ-SÁNCHEZ, M.S., L.M.S.W.
Commissioner

OASAS Formal Budget Hearing

Commissioner Arlene González-Sánchez, MS, LMSW Sean M. Byrne, Executive Deputy Commissioner

November 21, 2019

Who We Are

- OASAS oversees one of the largest addiction treatment services systems in the country, consisting of approximately 1,600 programs that offer prevention, treatment, and recovery services
- Average daily treatment system enrollment of about 100,000 people, and treat approximately 234,000 individuals each year
 - Includes both community-based certified providers and 12 OASAS-operated Addiction Treatment Centers (ATCs)
- Recently changed our name from the Office of Alcoholism and Substance Abuse Services, to the Office of Addiction Services and Supports





Mission and Vision

OASAS Mission

To improve the lives of New Yorkers by leading a comprehensive premier system of addiction services for prevention, treatment, and recovery

OASAS Vision

A future where New York State is alcohol-safe, and free from chemical dependence and compulsive gambling





What We Do





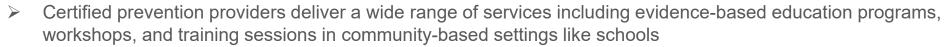
- Primary function is to oversee the system of care in New York State, including the certification and monitoring of providers
 - Single state agency responsible for the coordination of state and federal relations in the area of addiction services
 - Comprehensive education and prevention programs focused on strengthening communities, schools, and families
- Provide workforce training and education for people who work in our certified programs, or who are interested in pursuing a career in the field
 - Administer the credentialing of alcoholism and substance abuse counselors (CASACs) as well as problem gambling counselors, prevention practitioners, and prevention specialists



System of Care: Prevention

Addiction prevention in New York State is based on a risk and protective factor framework

- o Examples of risk factors include
 - Exposure to trauma
 - Availability of alcohol and other drugs in the community
 - Social norms favorable toward substance use
- Examples of protective factors include
 - Open communication with trusted adults
 - Strong sense of family
 - Community opportunities for positive activities



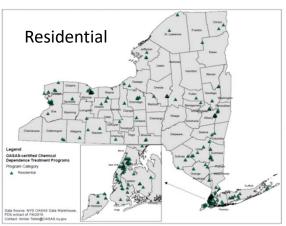
- OASAS also works closely with grassroots community coalitions for prevention
- OASAS prevention division also provides problem gambling prevention services
 - Opened 7 new regional Problem Gambling Resource Centers last year
 - Regional hubs raising public awareness, building provider network, and establishing collaborative relationships with local gambling facilities





System of Care: Treatment





Crisis Services:

Offer immediate care for people who are intoxicated or incapacitated by their use of alcohol or other substances. The primary goal of these services is to manage withdrawals from substances, including medical and psychiatric complications, and facilitate connections to continued care.

Inpatient Rehabilitation:

Provide a safe and supportive setting for the evaluation, treatment, and rehabilitation of people with substance use disorders. Offer 24-hour, 7-day a-week care that is supervised at all times by a medical professional, and is focused on management of symptoms related to addiction.

Inpatient Rehabilitation Legend OAAA-certined Chemical Disparation Chemical Chemica

Residential Services:

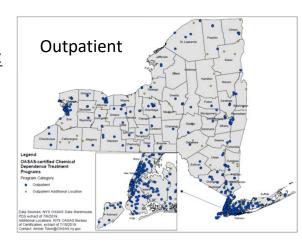
Designed for people in need of support in their recovery and not able to participate in treatment without a 24-hour residential setting. Intended to develop or maintain recovery through a structured, substance-free setting.

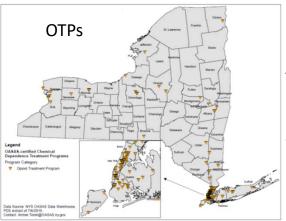


System of Care: Treatment

Outpatient Services:

Include counseling, education, and connections to community services. These clinical services are for people and their families who have been impacted by addiction, and may be delivered at different levels of intensity according to the needs of the patient.





Opioid Treatment Programs (OTPs):

OASAS-certified sites where medication to treat addiction, such as methadone, or buprenorphine is dispensed. In addition to medications, these facilities also offer counseling and educational services.



System of Care: Recovery

- > The OASAS system of care is a recovery-oriented system of care
 - By offering individualized care we are better able to provide the support that people need to live a life in recovery
- Recovery Centers and Youth Clubhouses
 - Substance-free, non-clinical settings that offer education, peer support, and recreational and social activities designed to support recovery
- Family Support Navigators
 - Help individuals and their families understand addiction, identify types of available services, and learn about the recovery process. In some cases, they also provide guidance on how to navigate insurance issues, and access treatment services
- Certified Recovery Peer Advocates (CRPA)
 - Draw from personal experience with substance use, and professional training to provide non-clinical support services as identified in a patient's treatment or recovery plan





Program Oversight

Certification

- All providers offering prevention, treatment, and recovery services must have State certification to provide services
- Application process includes a review of the applicant's proposal including the need for the facility in the area where it is proposed, the applicant's character, competence, and overall financial condition
- Providers must have prior consultation meetings with both the OASAS regional office, and the Local Government Unit

NYS OASAS Regions, Field Offices and ATC Locations | Common | Com

Credentialing

- > Oversees the credentialing of all professional substance use counselors and prevention practitioners
- lssues professional credentials to individuals who meet eligibility requirements, and pass examinations

Regional Office Services

- 6 regional offices across the state
- Regional office representatives:
 - Assist with certification, changes to operating certificates, and implementing prescribed policies
 - o Conduct site visits to ensure programs are following laws and regulations
 - Work with providers in emergency situations
 - Conduct annual performance reviews of providers and develop budgets



Financial Operating Structure



2019-20 Executive Budget

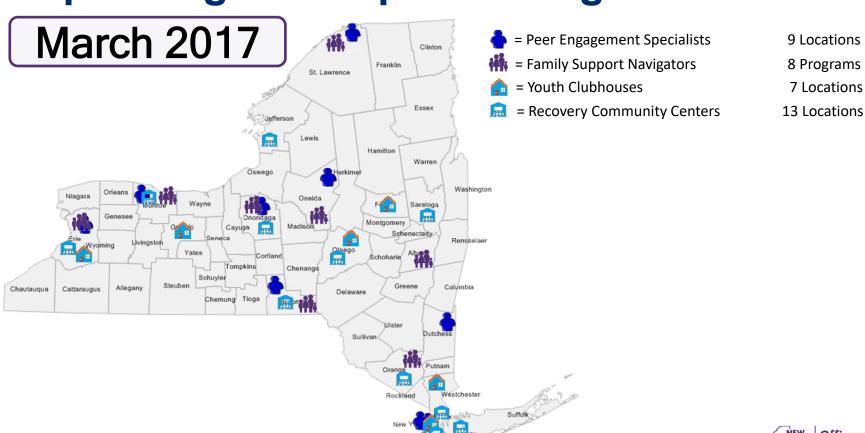
- Approximately \$809 million to support OASAS operations, including
 - \$138.3 million for State Operations
 - \$90 million for capital projects
 - \$580.2 million for Aid to Localities

Additional Federal Grants

- State Opioid Response (SOR) Grant
 - \$36.8 million for year 2 (October 2019-September 2020)
 - o \$19.2 SOR Supplemental
 - Funds used to expand MAT, telepractice, mobile treatment, recovery support services, workforce training, and prevention services

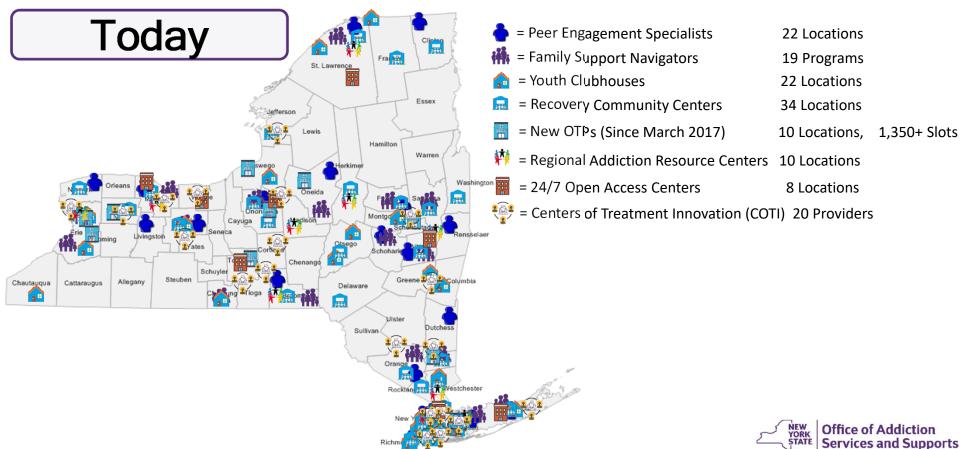


Expanding and Implementing New Services





Expanding and Implementing New Services



Major Initiatives: COTI







Centers of Treatment Innovation (COTI)

- COTIs deliver evidence-based, person-centered, and rapidly accessible care to meet the unique needs of people suffering from opioid use disorder
 - Mobile service delivery
 - 21 mobile treatment vehicles
 - 59 transport vehicles
 - 85 COTI peers
 - 88 COTI clinicians/qualified health professionals
- Over 14,000 persons engaged by COTI clinicians and peers



Major Initiatives: Recovery Centers

Recovery Centers

- Recovery Centers promote long-term recovery through skill building, recreation, wellness education, employment readiness, civic restoration opportunities, and other social activities. Recovery Center services are accessible not only during the daytime hours, but also during evening and weekends.
- Over the past year we have provided nearly \$6 million in funding to open 18 new recovery centers in all 10 regions of the state.
- We now have 32 recovery centers in operation across New York.
- In 2018, nearly 32,000 individuals visited a recovery center in New York.







Major Initiatives: Youth Clubhouses

Youth Clubhouses

- Youth Clubhouses use evidence-based prevention strategies and help individuals in recovery develop social skills that promote prevention, long-term health, wellness, recovery and an addiction-free lifestyle. A variety of services and activities are available, including tutoring and help with homework, college and job preparation, community service opportunities, peer mentoring, and sports, fitness and group entertainment activities.
- We have provided \$3 million in funding for 12 new youth clubhouses, covering five regions of the state.





Major Initiatives: Opioid Court Peer Support



- OASAS-certified treatment programs work with local Opioid Courts to provide on-site, clinical assessment and peer services for individuals referred to the court based on a positive screen for possible OUD. When appropriate, a referral to treatment is made and peer services are used to encourage and support engagement in treatment. This collaboration allows for immediate access to treatment based on patient choice.
- We have provided \$1.8 million to fund 12 opioid court peer support programs, in 9 regions of the state.



Major Initiatives: MAT Expansions

MAT Expansions

- MAT is the use of medications, in combination with psychosocial treatment and supports, to provide a whole-person approach to the treatment of substance use disorders. MAT is clinically driven with a focus on individualized patient care. MAT for opioid use disorder in particular is the standard of care and considered the best practice in the treatment of most patients including pregnant women.
- ➤ In 2019, we provided \$5 million to support the expansion of medication assisted treatment at 50 programs, covering all 10 regions of the state.
- Last year more than 53,000 individuals were able to access MAT through an opioid treatment program in New York State, an increase of more than 3,000 from 2014.



Major Initiatives: Expansion of Treatment Beds

Expansion of Treatment Beds

We have also made substantial expansions to our residential treatment capacity.



- A couple of years ago, we began working on our residential redesign initiative, which is focused on ensuring that people can access stabilization, or detox services, rehabilitation, and reintegration services all in one place.
- This has allowed us to provide more flexibility in meeting the needs of each resident.
- Because of this shift, we are seeing an increase to the number of people receiving treatment at a residential facility, and in 2018 nearly 31,000 people received services at one of our residential facilities.



Major Initiatives: FQHC Partnerships





Federally Qualified Health Center Partnerships

- FQHCs work in tandem with a SUD treatment provider to expand access to MAT for individuals who receive primary care and physical health services at FQHCs and connect patients to behavioral health services through the outpatient treatment program. This cross-system collaboration allows the two providers to work together to meet both physical and behavioral health needs.
- Over the past year, OASAS has provided \$2.45 million in funding to support partnerships between SUD providers and Federally Qualified Health Centers, or FQHCs, in five regions of the state.



Major Initiatives: MAT in Correctional Facilities

Increasing the Availability of Medication-Assisted Treatment (MAT) in State and Local Correctional Facilities

- Currently, MAT is offered in 45 County Correctional Systems, and we are working to increase MAT options all across the state.
- MAT options are also offered in 7 state facilities with 3 more to come on board in the coming months.
- The most recent facility to establish a program is Elmira Correctional Facility, where more than 100 people have received MAT services since the program started.





Major Initiatives: MAT in EDs

Recent legislative changes to the Public Health Law require that hospitals prepare policies, procedures, and treatment protocols to be utilized by the emergency departments in general hospitals for the appropriate use of MAT, specifically buprenorphine.





Major Initiatives: Parity/CHAMP Program

- ➤ The Community Health Access to Addiction and Mental Healthcare Project (CHAMP) assists people and their families in using their health insurance to access substance use disorder or mental health care, and to identify, investigate, and resolve complaints made by or on behalf of consumers regarding their coverage.
- The program also helps providers resolve their patients' insurance problems.
- People having issues can call a central hotline and receive guidance on how to address any problems.
- ➤ In a little more than a year, we have received nearly 1,400 calls to this hotline.

Do You Need Help Accessing Addiction or Mental Health Care?

Community Health Access to Addiction and Mental Healthcare Project (CHAMP) can help you:

- KNOW your Insurance rights
- FIGHT Insurance denials for mental health and addiction care
- CHALLENGE Insurance barriers & discrimination
- GET the most from your coverage
- RECEIVE fair reimbursement

Services Are Free & Confidential

- LEARN about options for low-cost care for the uninsured
- AND MIICH MORE

So you can access treatment for mental health & substance use disorders, including medication.

Call our Helpline (888) 614-5400

Helpline Hours: Monday-Friday, 9 a.m. - 4 p.m.



Major Initiatives: Overdose Prevention Training





Naloxone Training

- We have also held numerous naloxone training sessions in communities across the state, to teach community members how to recognize, respond to, and reverse an opioid overdose.
- And we continue to work with our criminal justice providers to train people who are being discharged from correctional facilities on how to properly use naloxone and respond to overdoses.



Thank You!

Questions?





