

Comments presented to the Democratic Caucus Policy Committee

Presented by:

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Council on Chemical Abuse

December 6, 2021

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Stanley J. Papademetriou Executive Director Thank you for the opportunity to present comments regarding access to substance use disorder treatment. My name is Stanley Papademetriou and I am the Executive Director of the Council on Chemical Abuse. COCA, as we are referred to locally, is a private nonprofit corporation that has served as the Single County Authority (SCA) for Berks County since 1972. In that capacity, we are responsible for the planning, funding and monitoring of drug and alcohol services provided through public monies received from federal, state and local governments.

As the Single County Authority, our role, with regard to substance use treatment, is to serve as the "safety net" for individuals suffering from a substance use disorder, with limited or no means to pay for treatment. The Berks SCA does not provide any direct substance use treatment services, rather we contract for the full continuum of licensed treatment services. The contract establishes terms and conditions including service descriptions, available funding amounts and reimbursement rates.

We are also responsible to provide yearly monitoring of these contracts to assure program and billing compliance. All contracted treatment services purchased through Berks SCA funds must be in accordance with federal and state laws and regulations, as well as requirements set forth in the county's contract with the Department of Drug and Alcohol Programs (DDAP).

The Council on Chemical Abuse is one of 47 SCAs in the Commonwealth. While all SCAs provide the essential functions of planning, funding and monitoring drug and alcohol services, each of us are organized and operate to meet our local needs. In other words, all

SCAs do not operate in the exact same fashion. Some of us are part of county government and others are private organizations. Some provide direct services, while others are strictly administrative. The commonwealth's SCA system is designed to meet the needs of the particular local community.

I offer this explanation of the SCA system to establish a foundation that the comments and observations I am providing here today are as the Single County Authority for Berks County. While I may have similar experiences as other SCA directors across the state, I do not speak on behalf of all SCAs. Nor do I speak on behalf of the other organizations that fund substance use services, whether it be commercial or public insurance. That being said, I have been with the Berks SCA for over 35 years, having the privilege of being the Executive Director for the last four years. During my tenure with the SCA, I have witnessed significant changes to the substance use disorder treatment field. The field in the 1980s and the early 1990s was treatment placement mostly decided by the personal intuitions of evaluators, duration of services was based on past practices and most all treatment services were abstinence only and closely aligned with the principles of certain 12 step programs. The treatment field has significantly evolved over the past two and a half decades to where treatment placement is currently based on proven level of care criteria. The clinical services provided and the duration of services are centered on the client's needs. Treatment is delivered through researched-based practices with the approach that there are many pathways to recovery. It is my belief that overall the substance use treatment system is much more professional, responsive and effective than it ever has been.

It is crucial to note that merely attending substance use treatment, whatever the modality, does not guarantee long term sobriety and recovery. Substance use disorders are not like a broken arm that can be fixed with a cast. These disorders affect the mind, the body and the spirit. What works for one person, may not necessarily work for the next person. The client's socio-economic circumstance, living conditions, past and current trauma, as well as other factors all play a part in how the person may or may not respond to treatment. Treatment and recovery plans must be individualized and meet the needs of the client.

Treatment is the initial and crucial component of addressing a substance use disorder. It is through treatment that the individual's substance use disorder is interrupted and allows the opportunity to initiate healthy lifestyle changes. This is accomplished through clinical and supportive services to build a sturdy foundation of recovery. As the client reintegrates back to their home community, daily functioning and living in recovery requires a concentrated effort, as well a significant amount of support. This support could come from family, friends, peers, support groups, and hopefully from an encouraging and empathetic community.

Recovery support could be secular or religious in nature. It could be abstinence based or with the assistance of medically supervised medications. Whatever the support, it must meet the needs of the individual and promote and encourage maintaining a healthy lifestyle free from the ravages of addiction.

For residents of Berks County in need of Berks SCA funds to attend treatment, there is a licensed central intake unit which assesses the nature and extent of the substance use disorder and determines appropriate treatment based on the individual's particular needs. This could be a withdrawal management or detoxification unit, a residential facility, or an outpatient counseling program. In many cases, it could be a combination of all these modalities. Those individuals who do not wish to go to the central intake unit, can go directly to a local treatment provider to access services. Regardless of how someone accesses treatment, the Berks SCA has a process to authorize its funds. This authorization process includes a thorough examination of each individual situation including the appropriate level of care and the initial duration of treatment. This process is primarily accomplished using the American Society of Addiction Medicine (ASAM) criteria.

The Berks SCA contracts for the full continuum of treatment services, whether the services are provided in-county or regionally across the Commonwealth. All treatment programs must be licensed by the Department of Drug and Alcohol Programs. Currently, the Berks SCA contracts with 27 withdrawal management/detoxification units, 45 residential treatment facilities and 5 local outpatient treatment programs. Most all of these contracts are with providers with whom we have had long standing/decades-long relationships. As part of the contracting process, information is gathered from providers regarding their philosophy of treatment and recovery, the types of evidence-based approaches incorporated into their services, as well as if and how they integrate medication assisted treatment for those in need of such services. Yearly, each contracted provider undergoes a licensing review by DDAP and are monitored by the local SCA in the county in which the provider is located.

This treatment access system is designed for those in need of Publicly-funded treatment services. However, the Berks SCA also makes every effort to help those who contact us seeking treatment services, regardless of insurance coverage. This includes identifying available treatment facilities and assistance in deciding what may be the best services and providers to address their specific needs.

The Berks SCA website – www.cocaberks.org – also provides information on how to access substance use treatment, as well a listing of local providers for various services. A local 24/7 hotline number is available for those in need of assistance

in accessing services. For individuals in crisis, an immediate connection to treatment is offered, while those merely seeking information are directed to various available appropriate resources. From a state-wide perspective, the Department of Drug and Alcohol Programs also provides information regarding treatment facilities on their website, as well as offering a state-wide 24/7 hotline for those seeking help.

While the websites and 24/7 hotlines are extremely helpful in offering guidance to make decisions regarding substance use disorder treatment, individuals need to be aware that such resources are available. Locally, we have made significant efforts to inform the Berks County community of services. We have reached out to our community via various social media platforms (i.e., Facebook, Instagram and Twitter), more traditional media (i.e., newspaper, radio and billboards) and through direct mailings. This outreach is key. Unfortunately, shame and stigma surrounding substance use disorders is still prevalent and can be a significant barrier for someone seeking services. The window of opportunity for someone suffering from a substance use disorder who is willing to attend treatment may only be open for a short time. As is often said, "we must strike while the iron is hot". This is the reason that having readily available information on resources to address substance use issues is not only helpful, but in many instances can be lifesaving.

Currently, Pennsylvania and the nation are experiencing a devastating opioid overdose crisis. Recent reports indicate that in the 12-month period ending April 2021 over 100,000 individuals in the United States died due to an opioid overdose. Here in Berks County our overdose deaths have increased steadily since 2018. In fact, 2021 will be the worst year so far. Through August, Berks County has been averaging almost 3 overdose deaths per week. The devasting effect on families and the community is immeasurable.

The overdose crisis is a community problem that requires community solutions. In my many years in this field, I have never experienced the collaborations that are occurring between the various stakeholders in Berks County. These stakeholders include, but are not limited to government officials, health care, law enforcement and the courts, schools, places of worship and community groups. An example of an effective collaboration in Berks County is the establishment of a Warm Handoff program with Tower Health Reading Hospital. In this program, a Certified Recovery Specialist is present in the emergency department at the hospital 24 hours a day 7 days a week. Once medically cleared, patients who arrived at the emergency room due to an overdose or any opioid or substance use related issue are seen by the recovery specialist. This immediate intervention has resulted in well over 50% of the emergency room patients accepting a recommendation for further drug and alcohol services. Prior to this program, emergency room patients who are high

risk for overdose, were discharged back into the community without a connection to sorely-needed substance use services. This remarkably successful program is possible only with the cooperation of the Reading Hospital's emergency department physicians and administrators, Community Care Behavioral Health (Berks County's Medicaid Managed Care partner) and the Berks SCA.

In considering treatment availability and access, an additional item for the Committee to consider is the substance use disorder treatment workforce. Like other organizations and businesses, many substance use disorder service providers are experiencing challenges maintaining a sufficient qualified staff. This includes therapists, case managers, nurses and recovery support specialists. If this trend continues it could very well create a capacity issue that will directly affect the availability of services for those in need.

Finally, if someone is seeking services for themselves or a loved one and not sure how to begin, I would suggest contacting your local Single County Authority and/or hotline and seek assistance. If the person wants to investigate services on their own, I suggest they take the following factors into account:

- Is the facility licensed and have there been any past or current issues discovered? (The DDAP website has information on licensing survey results.)
- What types of services are provided by the facility?
- Information regarding costs and the insurances accepted. (Attention should be given to high deductibles and co-pays which can be a barrier for care. In those instances, individuals should contact their local SCA to see if there is assistance.)
- Does the facility use research-based approaches in providing treatment?
- What medical services are readily available, if necessary?
- How are family and loved ones involved in the treatment process?
- Are appropriate medications utilized as part of treatment?
- How are connections made for on-going services and support when returning home?
- Does the facility provide transportation to treatment if necessary?

In closing, treatment and resources are available to address substance use disorders. Our mandate is to become even better at helping our local communities be aware that services exist and are accessible, as well as helping to remove obstacles and barriers from attending treatment.

Thank you.