



Legislative Updates

- **Budget due April 1st**
- **Senator Harckham/Joelle Foskett:** Publicly thanked Joelle Foskett from Senator Harckham’s office for having recovery on the map in Senate 1 House. Senate released one house, recovery transportation is a priority, prevent OMIG office closing offices from audits, billing for telehealth, parity for in person and teleservice insurance reimbursement. Healthy substance-free activities for youth and young adults with federal dollars. Task force and stakeholders. Opioid excise tax, online gambling tax, marijuana tax – can go back into programming and expansion of prevention, treatment, and recovery services.
- **MoA Phil Steck** – budget: all cuts have been restored in Assembly. Key issues: opioid settlement, use Senate language, not going into general funds; block grant, issues with language and usage plans. Both rely on challenging Governor’s plans. Recovery Living Task Force will not be in budget, working on bill for OASAS to do regulations but with guidelines. Steck does not support Task Forces – will work on bill for housing instead. FOR-NY/members of recovery community support single state agency, but Steck does not believe it is ready because there is division and vague language from governor. FOR-NY clarifies that the rollout does not need to be quick and could potentially be in tiers. Steck supports transportation demonstration program – per legislative staff, Steck asked that we reach out to his staff member, Allison
- **Recovery Housing:** Dr. Smith Wilson – housing: essential to recovery, basic right, visibility and awareness. Steck is denying support for all task forces – demands “real” and not “vague.” Allison Weingarten insistence that recovery community is part of the discussion. Steck’s suggestion is asking Rosenthal to reintroduce bill for task force as he will not support.
- **OASAS/OMH Integration:**
 - Stephanie Marquesano – with support in listening sessions for integration, how is there not budget space for co-occurring?
 - Steck: joint organization that can accomplish co-occurring, wants separate legislation and not merger. Addresses need to be “overlapping.”
- **OMH/OASAS Integration**
 - Just ended the 3 week, 10 meetings a week listening forum about OASAS/OMH
- **Senator Gillibrand/Gil Ruiz:** American Rescue Plan (official statement below), \$3 billion coming to prevention and treatment providers, \$30 million for harm reduction. Advocacy on the local level of making sure money ends up where it belongs.
- **Congressman Tonko/Colleen Williams:** Tonko: addressing COVID’s impact on SUD/opioid epidemic. Working on eliminating X waivers, restart Medicaid benefits 30 days prior to release from incarceration, study on mental health effects on people due to pandemic. Virtual community support act – strengthening supports at SAMHSA during and after pandemic. Behavioral Health – interagency coordinator to focus on SUD/MH.
- **Majority Leader Stewart Cousins/Therese Daly:** No additional updates. FOR-NY requests more money and recovery language in the transportation bill, family member



and person with lived experience on advisory board, some feedback against single state agency but overwhelming support for it.

Racial Justice Policy Statement: One year living under COVID restrictions. Adequately and appropriately dealing with racial inequities. Endeavor to become an anti-racist agency. Bold in approach going beyond diversity.

OASAS updates:

Funding Opportunities: Making sure recovery services continue with funding, hopeful about funding, regional approach. Survey and focus groups on where money would be spent: mental health and SUD cross training, childcare, transportation. Two projects: criminal justice and engaging hard to engage folks, more details in the coming months. FOR-NY proposes budget to filling gaps of RCOs in every county and more funding in underfunded RCOs. Speaking with providers on how to spend the money.

Calls about money and getting provider feedback. \$1.65 billion in block grant. \$104.8 million to NYS to be spent over 2 years. SAPT rules apply. 20% go to particular prevention services. No information on American Rescue Act's allocation to OASAS. Can't spend on: hospital inpatient, cash payments, purchase/improve buildings, anything for for-profit, marijuana, 5% cap on administrative. Potentially clearing money for transportation and RCOs. OASAS admits to not successfully implementing integration services on their own, especially for youth. Real people aren't fitting the traditional silos. Staffing issues, not having the medical capacity to treat co-occurring. Goal of keeping people alive. Holding insurance companies more accountable.

Alumni Association: March 25th for Alumni Meeting. Advocating for peer employment and training opportunities. Over 25 positions for peers at Samaritan Village, Montefiori is looking for peers.

CHAMP: Prevalence of co-occurring SUD/MH is acknowledged. Treatment referrals, assistance with insurance – contact CHAMP Hotline 888-614-5400. Working on app for recovery, treatment, and prevention services.

FOR-NY Updates:

- **Stand Up For Recovery Day:** Going over numbers. 2,588 live screens reached. Over 1,000 additional participants through virtual platform. Made 90 legislative touches. Called Schumer on stimulus package, call for opioid settlement fund – getting money sooner.
- **Recovery Conference:** Survey re: virtual or in-person recovery conference, form for folks who want to be presenters. More information to be uncovered about an in-person conference. 75% would like to see it in person
- **Employment and Recovery:** Siena College students assisting with research.
- **YVM has a youth survey,** request for assistance in dissemination, for anyone under 30.



Problem Gambling Awareness Month: look at the website for ways to support, facebook live challenge, screening tools, many ways for the community to participate

What does the American Rescue Plan do to address mental and behavioral health and substance use disorder concerns related to the COVID-19 pandemic?

The American Rescue Plan provides historic investments to address surging mental and behavioral health and substance use disorder concerns related to the COVID-19 pandemic. The bill funds a total of \$3 billion in block grants for prevention and treatment of substance use disorders and community mental healthcare services. Another \$420 million goes toward certified community behavioral health clinics. Relatedly, the bill supports community-based and local substance use disorder and behavioral healthcare, including \$50 million for local behavioral health services, such as telehealth and crisis intervention, and \$30 million for harm reduction services. To support the mental and behavioral health workforce, the American Rescue Plan provides \$100 million to support the recruitment, education and clinical training of mental and behavioral health providers. The bill also provides \$140 million to support the mental health of essential health care workers. This includes \$80 million for mental health and substance use disorder training for health care professionals, paraprofessionals, and public safety officers, \$20 million for a national education and awareness campaign to encourage healthy work conditions, and \$40 million to promote the mental health of the health professional workforce. For children and adolescents, the American Rescue Plan allocates \$80 million for pediatric mental health care grants, \$30 million for Project AWARE, which is a federal program that supports mental and behavioral health among school-aged children, and \$20 million for youth suicide prevention.