

Massachusetts Coalition for Addiction Services

~ Saving Lives, Saving Dollars ~

MCAS FY2023 State Budget Request for DPH/Bureau of Substance Addiction Services Line-item 4512-0200

The *Massachusetts Coalition for Addiction Services* (MCAS) is a group of advocacy organizations that have come together to speak with one voice to strengthen support for funding for addiction harm reduction, prevention, treatment and recovery support services and increased access to services for people with substance use disorders.

For the Governor's FY23 H2 budget, MCAS respectfully requests:

1. **\$10 Million in New Funding**
2. **\$22 Million in Continued Programmatic Support**
3. **\$4 Million to Support Programs for Individuals in Recovery**
4. **Prior Appropriations Continued for FY22 Services**

1. New Funding Priorities

- **\$7 million for a BSAS Workforce Development Assistance** to provide assistance to staff who work in BSAS licensed programs (addiction treatment safety net) for purposes including, but not limited to, financial support to complete trainings and continuing education curriculum.
- **\$3 million for BSAS to develop and provide technical assistance to communities of color**, including what is required to become a licensed BSAS provider and how to track and respond to procurements.

2. Continued Programmatic Support

MCAS requests that the following priorities be explicitly funded in Line Item 4512-0200 to help ensure programmatic stability.

- **\$10 Million for Family Supportive Housing Programs.** This housing model is designed to address the complex issues involved in family substance use treatment and recovery. This program model stabilizes families by providing a safe haven; a holistic approach to recovery that addresses the inter-relationships between a families' physical and psychological health as well as parenting responsibilities and other supportive services to further develop the skill levels needed for independent living.
- **\$10 Million for Low Threshold Housing for Homeless Individuals with Substance Use and Co-Occurring Disorders at Risk of HIV (Housing First model).** This funding would give BSAS the capacity to procure congregate care or individual housing units through licensed addiction treatment providers. It is a "housing first" model that does not require sobriety for placement, and provides supervised case management services. The procurement could be targeted to communities with high rates of homelessness, opioid overdose/deaths and HIV infection. The goal of this model is to reduce homelessness, improve health outcomes, and advance health equity.
- **\$2 Million for BSAS to Provide Technical Assistance to Addiction Treatment Providers.** This funding allows BSAS to assist providers with medications for addiction treatment, medication management, and serving people with co-occurring mental health and substance use disorders.

3. Programs and Support for Individuals in Recovery

- **\$1 Million for the Massachusetts Rehabilitation Commission for People in Recovery.** BSAS employs an Interagency Service Agreement with MRC to approach workforce development and strategic planning with a wide range of stakeholders, in order to identify educational pathways with local community colleges and universities and train individuals with lived experience to work in the addiction treatment field.
- **\$3 Million for the Massachusetts Access to Recovery (MA-ATR) program.** MA-ATR offers comprehensive care coordination, job readiness, skills training and access to services for individuals who are re-entering the community post-incarceration, pregnant women and veterans. The program saves the state money in healthcare, incarceration and social costs through the empowerment of individuals and has served over 26,000 individuals throughout the state. MA-ATR continues to be funded at \$7 million by SAMHSA through the Federal State Opioid Response (SOR) grant, and \$3 million by the state. While federal funding has been renewed for two more years, the \$3 million in state funding must continue as well.

4. FY22 Prior Appropriations Continued

MCAS requests that FY22 funding appropriated to Line Item 4512-0200 that was not procured and/or expended be continued in the FY23 budget, to allow for additional time and opportunity for important services to be implemented. This may include, but is not limited to:

- **\$1.5 Million for Outpatient and Mobile Services to Deaf/Hard of Hearing (DHOH) and DHOH/Blind Individuals with Substance Use Disorders.** This new model of outpatient service would operate under the umbrella of two existing BSAS-licensed SUD outpatient service providers, one in the east and one in the west. The services would be offered to all DHOH and DHOH/Blind individuals across the state (which is a low incidence but high need population). This specialty outpatient service is designed such as to require that all the program staff and Recovery Coaches providing services are DHOH and/or are proficient in the use of American Sign Language. The range of services to be provided include the following:
 - Conduct Screening and Brief Interventions and Referral to Treatment (SBIRT) in Massachusetts Schools for the Deaf;
 - Accessing space in SUD Outpatient Clinics to gather for planned group treatment, social events, training opportunities, and physical activities;
 - Provide Individual Counseling Services via Telehealth or in-person;
 - Provide Recovery Coach services by and for DHOH individuals, as needed (14 DHOH Recovery Coaches have been trained in the state, to date);
 - Provide Mobile Services to conduct outreach to individuals and/or transport individuals from rural areas of the state to planned events or in-person group counseling sessions; and
 - Provide American Sign Language interpreters for emergency situations.
- **\$2 Million for BSAS to Enhance Capacity to Recruit Individuals into the Addiction Treatment Workforce.** The addiction treatment service system is in workforce crisis and all levels of care struggle to hire and retain trained staff in their programs. With this funding, BSAS would enhance its capacity to do outreach to educational institutions and technological high schools to encourage the provision of training needed and the recruitment of individuals to work in the field of addiction.

If you would like to discuss any of these requests further please contact Abby Kim on behalf of MCAS at akim@abhmass.org.