

What Would \$350 Million Annually for Recovery Supports Mean?

A PRIMER ON THE PROPOSED RECOVERY SET-ASIDE IN THE FEDERAL BLOCK GRANT

Agenda

01	Welcome and Background
02	Substance Abuse Block Grant Basics
03	House and Senate Timelines
04	Single State Authority Engagement
05	Recovery Support Funding Domains
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■ Welcome and Background



Greg Williams, MA

Managing Director, Third Horizon Strategies and Filmmaker, The Anonymous People, Generation Found, and Tipping The Pain Scale

Recovery Support Services Defined

Recovery support services (RSS) refer to the collection of community services that can provide emotional and practical support for continuing remission as well as daily structure and rewarding alternatives to substance use. Examples include housing, education, employment, and social resources, as well as supports for better overall health and well-being.











Recovery Housing





Even after a year or 2 of remission is achieved—through treatment or some other route—it can take 4 to 5 more years before the risk of relapse drops below 15 percent, the level of risk that people in the general population have of developing a substance use disorder in their lifetime. As a result, similar to other chronic conditions, a person with a serious substance use disorder often requires ongoing monitoring and management to maintain remission.

Facing Addiction in America, The Surgeon General's Report on Alcohol, Drugs, and Health

→ Presidents FY 2022 Budget Proposal

Key FY 2022 Funding Re	Increase	
SUD Block Grant (SABG)	\$3.5 Billion	+\$1.65 Billion
State-Opioid Response (SOR)	\$2.25 Billion	+\$750 Million
Building Communities of Recovery (BCOR)	\$20 Million	+\$10 Million
Recovery Community Support Program (RCSP)	\$5.1 Million	+\$2.7 Million

SABG Proposal Includes

- \$700 Million to prevention set-aside (20%)
 - An increase \$328 Million over FY 2021 enacted
- \$2.45 Billion treatment eligible dollars
 - Nearly a \$1 Billion increase over FY 2021
- \$350 Million to a new recovery set-aside
 - A 100% compulsory increase, but \$350
 Million less than prevention

SOR State Historical Spending Trends from GAO Report

- 17.2% on prevention
 - If trend continues would be: \$387 Million
- 65.4% on treatment
 - If trend continues would be: \$1.47 Billion
- 13% on Recovery (Not Specifically RCO's)
 - If trend continues would be: \$293 Million



→ Presidents FY 2022 Budget Proposal

"Currently, there is no dedicated source of funding of community recovery resources. As a result, only 140 (150) communities have a recovery community organization. This funding set-aside would provide a sustainable source of funding directly to community organizations to support development of a community-level recovery infrastructure and will be available for a wide variety of recovery support programs." — SAMHSA Budget Summary

150 RCO's Compared With		
# SUD Treatment Programs	15,961	
# Prevention Coalitions	5,000+	
# of Prisons and Jails in America	4,013	
# of U.S. Counties	3,143	
# of U.S. Congressional Districts	435	



→ Presidents FY 2022 Congressional Justification

"It is imperative that our addiction crisis response evolves from an acute short-term individual- focused treatment response to a broader community recovery response. Addiction is a chronic illness, and recovery often is a life-long process where external community and social determinants of health play a vital role in its sustainability. The Budget Request includes a new 10 percent set aside within the SABG for recovery support services in order to significantly expand the continuum of care both upstream and downstream. This new setaside will support the development of local recovery community support institutions (i.e. recovery community centers, recovery homes, recovery schools, recovery industries, recovery ministries); develop strategies and educational campaigns, trainings, and events to reduce addiction/recovery-related stigma and discrimination at the local level; provide addiction treatment and recovery resources and support system navigation; make accessible peer recovery support services that support diverse populations and are inclusive of all pathways to recovery; and collaborate and coordinate with local private and non-profit clinical health care providers, the faith community, city, county, state, and federal public health agencies, and criminal justice response efforts." – SAMHSA Congressional Justification





Substance Abuse Block Grant (SABG) Basics

Tym Rourke, MA

Senior Director, Third Horizon Strategies

■ SABG Intent and Purpose

The Substance Abuse Prevention and Treatment Block Grant (SABG) Program was authorized by Congress to provide funds to States, Territories, and one Tribal Entity for the purpose of planning, implementing, and evaluating activities to prevent and treat substance abuse.

 Overall Goal: Fund substance use prevention, treatment, and recovery services that are not otherwise reimbursable from other sources (i.e., health insurance, Medicaid, etc.)



→ SABG Structure

Authorized & Appropriated by Congress Administered by SAMHSA Managed by Single State Authority (SSA)



■ SABG Priorities and "Set-Asides"

Population and service area targets:

- Pregnant women and women with dependent children
- Intravenous drug users
- Tuberculosis services
- Early intervention services for HIV/AIDS

Required set-asides:

- SAMHSA (5%)
- SSA (5%)
- Primary Prevention(20%)
 - Services must include, but are not limited to, the following strategies: Information Dissemination, Education, Alternative Activities, Problem Identification and Referral, Community-based Process, and Environmental Conditions



■ Benefits of SABG and "Set-Aside" Approach

- Permanent, non-competitive funding source
- Flexible
- "Set-asides" can be floor, not ceiling

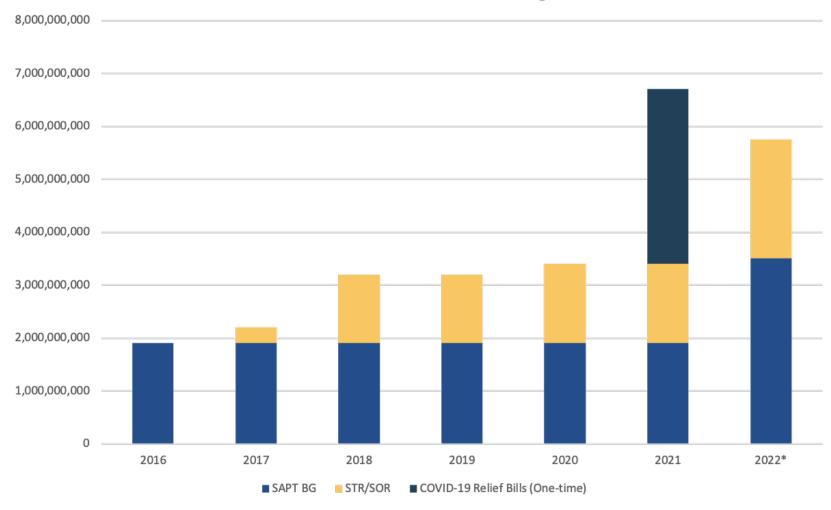


- No supplanting
- Restrictions around use for food, capital (brick and mortar) expenses, lobbying
- SYNAR (Tobacco compliance)
- Maintenance of Effort (MoE)
- Other limitations may be implemented at state level (i.e., eligible orgs, investment priorities, etc.)



■ Substance Use Funding Passed Through To States

SAMHSA's Single State Authority Federal Substance Use Funding







Carol McDaid

Principal, Capitol Decisions, and Co-Founder, The McShin Foundation



Holly Strain

Associate Vice President, Capitol Decisions

May

• President Biden submitted FY22 budget request to Congress

July

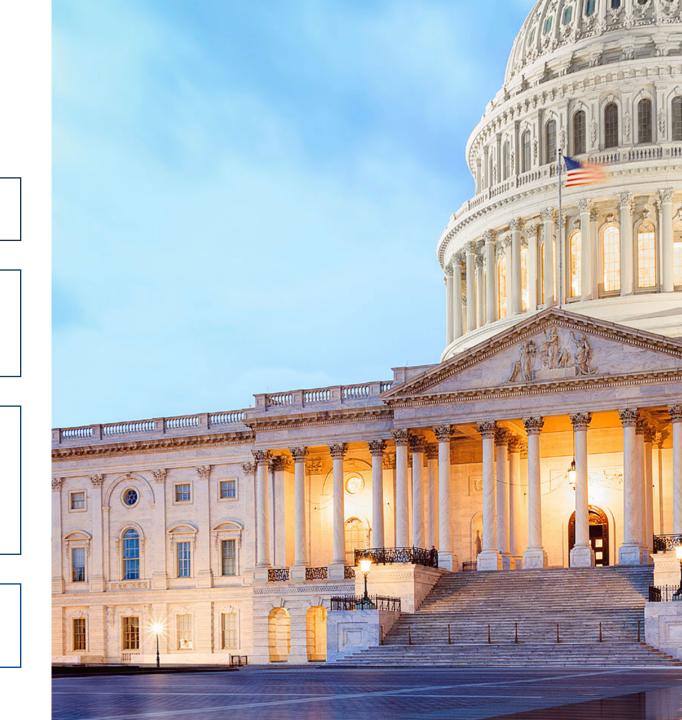
- House Appropriations Committee approved FY 22 Labor-HHS spending bill with 10% set-aside for recovery support services
- Full House scheduled to approve bill before August break

September

- Senate Appropriations Committee expected to consider FY 22 Labor-HHS spending bill
- Fiscal year ends Sept. 30; with final spending bills unlikely to be passed, a Continuing Resolution (CR) will be needed to keep federal government open

Fall

• House and Senate will negotiate (conference) their two bills in the hopes of passing a final bill by the end of 2021



→ How can Individuals & Organizations Support the Set-Aside on Capitol Hill?



If you previously reached out to your Member about the set-aside, thank them its inclusion in the House bill

If your Senator serves on the <u>Senate Appropriations</u> <u>Committee</u>, reach out to us about scheduling a meeting with their staff (contact hstrain@capitoldecisions.com)

Invite your federal delegation members to an event and/or to tour your program

Sign your organization on as an endorser of the setaside (https://facesandvoicesofrecovery.org/endorse-recovery-set-aside)

■ Senate Appropriations Committee

Leadership

- Patrick Lahey, Chair (D-Vermont)
- Richard Shelby, Vice Chair (R Alabama)

Majority

- Patty Murray (D- Washington)
- Dianne Feinstein (D-California)
- Richard Durbin (D Illinois)
- Jack Reed (D- Rhode Island)
- Jon Tester (D Montana)
- Jeanne Shahen (D-New Hampshire)
- Jeff Merkley (D-Oregon)
- Christopher Coons (D- Delaware)
- Brian Schatz (D Hawaii)
- Tammy Baldwin (D- Wisconsin)
- Chris Murphy (D-Connecticut)
- Joe Manchin (D- WV)
- Chris Van Hollen (D Maryland)
- Marin Heinrich (D-New Mexico)

Minority

- Mitch McConnell (R- Kentucky)
- Susan Collins (R-Maine)
- Lisa Murkowski (R- Alaska)
- Lindsey Graham (R-South Carolina)
- Roy Blunt (R-Missouri)
- Jerry Moran (R- Kansas)
- John Hoeven (R- North Dakota)
- John Boozman (R- Arkansas)
- Shelley Moore Capito (R-WV)
- John Kennedy (R-Louisiana)
- Cindy Hyde-Smith (R-Mississippi)
- Mike Braun (R-Indiana)
- Bill Hagerty (R-Tennessee)
- Marco Rubio (R-Florida)





■ Single State Authority Engagement

Aaron Kucharski

Advocacy Trainer, Recovery Advocacy Project

The work we can do on the grassroots and state level can complement the work being done with the US Congress. We are currently focusing on a letter writing campaign and meetings with SSAs.

Take Action to contact your Governor and Single State Agency (SSA)

- Each state has a Single State Agency that manages the publicly funded addiction treatment, prevention, and recovery service system
- Each SSA has a Director
- The role of these SSA's is to implement Governor policy and management initiatives



→ Potential Asks to Single State Agency Directors

- Publicly support the Recovery Set-Aside
- Encourage other SSAs to support the Recovery Set-Aside
- Help message why Recovery Support is so crucial in battling the addiction crisis.
- Encourage the SSA to contact the National Association of State Alcohol and Drug Abuse Directors (NASADAD) to develop a position statement in favor of the Recovery Set-Aside

Tell Your Governor to Support a Dedicated Funding Stream for Recovery! (actionnetwork.org)





Ashley DeGarmo, LSW

Director, Third Horizon Strategies

Recovery Community Centers

Recovery Community Centers (RCC) exist to advocate for and support individuals seeking to initiate or maintain recovery from a substance use disorder.

Many recovery community centers are typically operated by recovery community organizations (RCOs). These centers may host mutual aid group meetings and offer recovery coaching; recovery-focused educational and social events; access to resources, including housing, education, and employment; telephone-based recovery services; and additional recovery community education, advocacy, and service events. Some recovery community centers are sites in which community members can engage in advocacy to combat negative public attitudes, educate the community, and improve supports for recovery in the community.



■ Recovery Community Centers



Idaho Association Of Recovery Community Centers Operating Principles And Standards

A 2021 study concluded that peer-based recovery support services, delivered in communities via recovery community organizations, are an important part of the continuum of care for individuals with substance use disorders and those seeking to initiate or maintain their recovery:

- Average engagement of 130 days totaling 4290 engagement sessions and 8,931 brief check-ins
- Engaged individuals had a significant increase in recovery capital of 1.33 point from intake
- Helped to facilitate involvement with an array of recovery support services that may contribute to other functional social determinant domain improvements and lower negative health events.

Peer-based Recovery Support Services Delivered at Recovery Community Organizations, April 2021



→ Peer Recovery Coaching

Peer Recovery Coaching is an important quickly developing paraprofessional role in the addiction field.

Coaches often help individuals discharging from emergency rooms, addiction treatment programs, and criminal justice settings to connect to community services while addressing numerous social detriments of health or other issues that may hinder the recovery process.

A recovery coach's responsibilities may include providing strategies to maintain abstinence or reduce use, connect people to recovery housing and social services, and help people develop personal skills that maintain recovery.

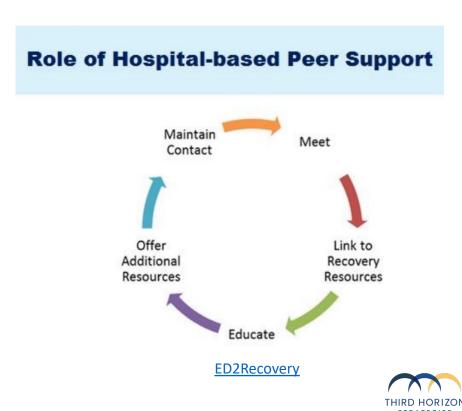


■ Recovery Coaching In Emergency Departments

ED Recovery Coaches are skilled professionals who meet with patients admitted to an Emergency Department as a result of an opioid overdose or other drug or alcohol related crisis. They support patients, family members, and hospital personnel by providing assistance to begin recovery or stabilize recovery when needed. — Connecticut

Community for Addiction Recovery (CCAR)

- Launched in 2017, CCAR's Emergency Department Recovery Coach (EDRC) program currently operates in the majority of Connecticut hospital Emergency Departments.
- In the first year, more than 97 percent of the emergency room patients they met with were connected to a formal treatment program or recovery support service.



Recovery Housing

"Recovery residences provide a spectrum of living environments that are free from alcohol and illicit drug use with a focus on peer support and connection to other recovery services and supports." – National Alliance for Recovery Residences

"Recognizing housing as a platform for recovery is not simply about putting a roof over someone's head to meet basic needs but about providing individuals with a strong foundation for moving beyond stability, regaining hope and achieving long-term wellness and recovery goals." — Substance Use and Housing National Forum, The National Council on Mental Well-Being

Substance Use and Housing National Leadership Forum



■ Recovery Residences



- In the past three years, MCRSP has accredited over 140 recovery homes in the state representing more than 1,200 recovery beds for men, women, and families
- Through targeted State Opioid Response (SOR) Funding MO has seen:
 - An increase in the number of recovery houses
 - An increase in recovery houses that accept and support MAT
 - An increase in the number of Certified Peer Specialists

Nine Hallmarks of Recovery-Focused Housing Environments:

- 1) Housing is a choice, not a clinical placement.
- 2) Housing provides a physically and emotionally safe, secure and respectful environment.
- Housing is low-barrier and accepts applicants with poor credit, eviction histories or criminal backgrounds. For Recovery Housing, sobriety requirements are not a barrier but are a feature that people in recovery are looking for to support their wellness.
- 4) Housing is located in the community, and residents are expected to connect with services, supports, employment and social activities.
- 5) Providers and residents value the voice and experience of peers. Recovery Housing relies on the Social Model of Recovery.
- 6) Residents have a lease or occupancy agreement that outlines their rights and responsibilities.
- 7) Residents are accountable for how their behaviors impact their residential stability and the wellness of others in the housing.
- 8) Residents have personalized recovery plans.
- P) Residential stability is a priority. If a resident is moving out by choice or force, every effort is made to connect them to safe housing and recovery supports.

Options, not Opponents: Housing First and Recovery Housing
Lori Criss, Director, Ohio Department of Mental Health and Addiction Services



■ Recovery High Schools

Recovery high schools (RHS) are secondary schools designed specifically for students in recovery from substance use disorder or co-occurring disorders. The primary purpose of a RHS is to educate students in recovery from substance use or co-occurring disorders – Association of Recovery High Schools



WHERE OUR MISSION IS RECOVERY, RELATIONSHIPS, AND RIGOR

Mission High School in Las Vegas opened in 2017 and is the first RHS covered completely by **public funding**

A 2017 study demonstrated effectiveness of RHS:

- The high school graduation rate for recovery high school (RHS) students is at least 20 percentage points higher than the graduation rate for similar students who have had SUD treatment but did not participate in a RHS for at least 30 days.
- Students who attended RHSs had **significantly lower odds of dropping out** of high school
- RHSs reported significantly less overall absenteeism
- Recovery high school students were significantly more likely to report being completely abstinent from alcohol, marijuana, and other drugs
- Adolescents who attended RHSs had significantly greater declines in alcohol, marijuana, and other drug use



A collegiate recovery program (CRP) or collegiate recovery community (CRC) is a supportive environment within an institution of higher education that reinforces the decision to engage in a lifestyle of recovery from substance use disorder (SUD) and values peer-recovery support services – Association of Recovery In Higher Education

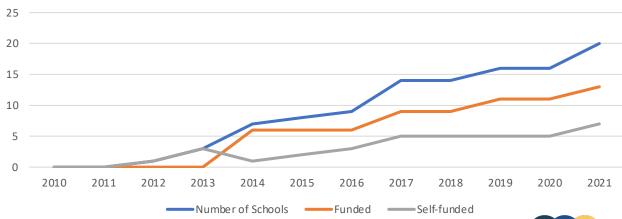
The North Carolina Experience:

- Secured funding for CRCs in an Executive Order, which provided the assurances for ongoing efforts for these programs.
- Because of this funding, NC has been able to launch other initiatives driven by collegiate recovery students, including a Health Policy Leadership Academy that is for ALL students and impacts campus programs and policies for health and wellbeing, and HBCU/MSI network initiative across campuses focusing on access and equity among these schools.

APNC: Collegiate Recovery



Growth of Collegiate Recovery in NC



Via Technology

- Peer-To-Peer Recovery
 Management via Mobile
 Applications
- Recovery Support and Contingency Management Programs
- Zoom-style Recovery Support Group Meetings Facilitated by Trained Recovery Coaches
- Recovery Asset Mapping and System Navigation Tools
- Secure Asynchronous Recovery Support

By Statewide Networks

The purpose of statewide recovery networks is to further strengthen Recovery Community Organizations as key partners in the delivery of state and local treatment and recovery support services, as well as allied health systems through collaboration, systems improvement, public health messaging, and training conducted for (or with) key recovery stakeholder organizations.

SAMHSA RCSP-SN

To Target Specific Populations

- Justice Involved
- Black and Other People of Color
- Latinx
- Indigenous People
- LGBTQ+
- Faith-Based



Questions & Answers



THANK YOU

Have Any Questions?

Contact Us:

