



*Non-Profit Addiction Treatment
& Prevention Service Agencies*

**2545 Middle Country Road
Centereach, NY 11720**

2008 -2009 NYS DIVISION OF BUDGET TESTIMONY

The Quality Consortium of Suffolk County (“QC”), represents 23 not for profit programs providing chemical dependence treatment, prevention, and recovery services in communities throughout Suffolk County, and is a member Coalition of the New York Association of Alcoholism and Substance Abuse Providers, Inc. (“ASAP”). Our programs are NYS OASAS licensed programs that are serving the uninsured and under insured adults and adolescents. Within our programs, 51% are self-pay, 20% have Medicaid and 17% have insurance. An April 2007 Newsday article stated that “54% of area residents found it ‘somewhat’ or ‘very difficult’ to meet monthly housing costs last year, up from 35% in 2003”. Health insurance has become a “luxury” people cannot afford. As the number of uninsured people in need of our services continues to expand, we advocate for a NYS budget that includes:

Funding to support existing personnel and program expenses that have increased because of inflation. We urge the Governor to include in his budget the third year of a three-year COLA tied to the Consumer Price Index. To ensure future fiscal solvency, we recommend elimination of budget language that sunsets the COLA.

AND

\$20 million for staff retention of entry level direct service staff. Workforce recruitment and retention issues are at a critical state, and threaten the ability of programs to provide needed services to our client populations. Salaries, especially for Long Island providers, have not kept up with other professions or other service areas.

\$10 million to help programs address dramatic increases in the cost of employee health benefits. Health benefit expenses have risen dramatically. Many programs have faced a 12 % yearly increase in employee insurance benefits, which is passed over to employees in the way of higher co-pays, deductibles and employee contributions. Due to these high costs, many employees are faced with the decision of putting off health insurance or health care. We need funds to assist programs to prevent further erosion of employee health coverage.

\$5 million in local assistance earmarked for Suffolk County.

- Funding is crucial for detoxification services to be provided for residents of Suffolk County! Chemical Dependence Crisis Services on Long Island have been reduced dramatically with the recent closing of Suffolk County's hospital based detoxification services and the State's inability to effectively provide funding for either community based inpatient or outpatient detoxification services.
- Our criminal justice clients are set up to fail before they even start on the road to recovery because of the lack of funded treatment services in Suffolk County. It costs over \$31,000 of taxpayer dollars to keep a person incarcerated in the Suffolk County jail for six months as compared with six months of outpatient drug and alcohol counseling services costing only \$6,000. The number of mandated clients referred from Family Court, Drug Court, State Parole and County Probation is phenomenally high in our QC agencies. We have, in effect, become an extension and a supportive arm of the criminal justice system and receive no additional compensation. Approximately 77% of the individuals served by QC agencies are employed, uninsured, mandated single males.

\$10 million to assist programs with the increases in gas and utilities; \$5 million in local assistance for information technology upgrades.

\$10 million in the OASAS aid to localities budget for underage drinking prevention.

The crisis of underage drinking must be more effectively addressed. Proposed funding would be for implementation of a State-wide comprehensive approach that follows the Institute of Medicine/ National Research Council recommendations from the 2003 "Underage Drinking, A Collective Responsibility" report, and strengthens provider services and community mobilization efforts.

\$5 million to support implementation of treatment for tobacco dependence in treatment programs. With an estimated 80% of treatment consumers smoking, programs need staff specialists and other resources to accomplish the tobacco-free goals articulated by NYS OASAS and DOH.

\$1.875 million for adolescent treatment and \$1.875 million of treatment of persons involved with drug courts and the criminal justice system for uncompensated care to uninsured persons. We ask that the Governor continue support contained in the 2007-2008 budget that addresses the need to compensate programs serving the uninsured and working poor.

\$5 million for specialized treatment and prevention services. New funding is needed to address underserved/high risk groups: \$1 million for geriatric chemical dependence services, \$ 2 million for problem gambling treatment and prevention, \$1 million for veteran's treatment, and \$1 million for specialized services for persons with brain trauma.

Funding for cross-systems collaboration. \$25 million to implement recommendations of the Commission on Sentencing Reform to help close the treatment gap and to provide prevention services to re-entry families; \$5 million for treatment as an alternative to incarceration for youth and their families (AFY); \$10 million for a Youth-At-Risk School/Community Partnership Grants Program; \$2 million for SED to conduct a statewide school survey related to alcohol, drug and gambling by our youth to assist in accessing Federal funding; \$5 million for child welfare/chemical dependence collaboration; \$2 million for treatment of adolescents with co-occurring disorders; and \$3 million for treatment of women with children to address both addiction and child welfare concerns.

The Quality Consortium of Suffolk looks forward to working with you to advance our recommendations in partnership with ASAP. Be assured of our willingness to help you address New York State's fiscal crisis while trying to maintain a high quality of services. We understand that our State faces some difficult fiscal challenges and are certain that chemical dependency treatment and prevention programs can make a valuable contribution to efforts to successfully address those challenges.

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