



**Testimony Provided for HR590 Public Hearing September 7, 2016  
William Folks, Eagleville Hospital, RCPA Chairperson and  
Member of the Board of Directors**

The Rehabilitation and Community Providers Association (RCPA) represents providers of health and human services committed to effective, efficient, and high quality care. The association advances member commitment to improving the quality of life and community well-being for all Pennsylvanians. RCPA members offer mental health, intellectual and developmental disability, substance use disorder, brain injury, medical and vocational rehabilitation, and other related human services across a full continuum of care for children, adolescents, and adults.

With more than 325 members serving well over 1 million Pennsylvanians annually, RCPA is among the largest and most diverse state health and human services trade associations in the nation. Of the 325 members RCPA represents include nearly 70 drug and alcohol agencies that operate nearly 170 licensed drug and alcohol facilities in every county in the commonwealth. A statewide organization, RCPA advocates for those in need, works to advance effective state and federal public policies, and provides professional support to members. Learn more by visiting [www.paproviders.org](http://www.paproviders.org)

Many testimonies will be provided that include important data outlining the crisis occurring in Pennsylvania regarding opioid(?) use disorder. RCPA will highlight specific problems that need to be addressed and recommendations for the improvement of the drug and alcohol treatment system in the commonwealth.

First and foremost, treatment works. When a person who has problems with substance use and is given the right kind of treatment and provided for the right amount of time - it works.

1. Issue: The chronic under funding of substance use disorder is at the heart of the crisis that exists today. Many years of the lack of appropriate funding have created a broken system in Pennsylvania and in fact across the country.

Recommendation: Work to increase funding immediately and provide appropriate funding to offer high quality, accessible care when needed. Pennsylvania needs treatment on demand. Adequate funding will eliminate waiting lists. Waiting lists lead to lost treatment opportunities, increased pain and suffering and often involvement in the criminal justice system.

2. Issue: Overwhelming stigma prevents many suffering from substance use disorder from seeking treatment.

Recommendation: Implement training and education in schools and colleges aimed at reducing myths about substance use disorder. Health care providers are our front line in disease prevention and treatment. They must understand the risk factors for addiction, screen for risky substance use and intervene when needed, to diagnose, treat and manage addiction just as they do all other diseases. We need to educate the public - substance use is a public health problem and addiction is a complex brain disease that, in most cases, originates in adolescence.

3. Issue: Lack of medication assisted treatment.

Recommendation: Make medication assisted treatment (MAT) available to those who need it at every level and type of treatment. Few treatment modalities have been studied more than MAT. Results are clear that utilizing medication combined with the clinically recommended level of care is critical in retaining patients in treatment and helping them establish and maintain recovery.

4. Issue: A large percentage of people not only have substance use problems, they also have co-occurring mental health problem. Both problems are typically treated separately - leading to siloed treatment systems - leading to potential failures and increased severity.

Recommendation: Standardized Mental health screenings for people receiving substance use disorder treatment. More integrated service providers who can address the disorders simultaneously.

5. Issue: Lack of appropriate treatment being provided which leads to treatment failure and again death. We may only get one chance. We must be sure we are getting the right level of treatment to the person suffering from addiction.

Recommendation: We need to continue to build upon what we know and develop comprehensive strategies based on research and what is known about addiction. We must assure that unbiased, appropriate assessments are made to assure the right level of care. Addictions treatment is not a cookie cutter approach. One size does not fit all.

6. Issue: Not enough use of life saving Narcan

Recommendation: Providing Narcan to address the opioid crisis is a step in the right direction. Many lives have been saved but many that should be using it are not. All first responders and police officers should be trained on the use of Narcan and use it whenever appropriate. It is a simple fact it saves lives.

7. Issue: Not enough treatment provided after the use of Narcan.

Recommendation: Narcan undoubtedly saves lives but follow-up treatment is needed in every save. Emergency rooms, first responders, and police officers need to have close ties with treatment providers and ensure appropriate referrals are made. Addiction is not a moral issue – it is a chronic condition – much like diabetes and hypertension. The initial and early decisions to use substances reflect a person's free or conscious choice. However, once the brain has been changed by addiction, that choice or willpower becomes impaired.

8. Issue: Not enough certified peer services provided and funded.

Recommendation: The power of the peer specialist coupled with needed treatment has been proven time and again. More funding and support must be provided to increase certified peer specialist services in the drug and alcohol system.

9. Issue: Outdated regulations often get in the way of providing much needed services.

Recommendation: Continue the excellent work of the Department of Drug and Alcohol Programs to update outdated, burdensome regulations.

10. Issue: Too many people with substance use disorders are incarcerated when treatment would be a more effective path. Too many people leave the criminal justice system without appropriate benefits and referral to treatment.

Recommendation: Continue the good work of the Department of Corrections, the PA Board of Probation and Parole, and the judicial system to improve diversion, reentry and transition services for persons with substance use disorders.

11. Issue: Pennsylvania's aging population is having increasing problems with prescription drug addiction.

Recommendation: Increased attention, funding and services must be directed to special assessment and treatment programs for our senior citizens.

12. Issue: Many doctors continue to provide too many opioids and many persons with addiction "doctor shop" in an effort to increase their supply of opioids.

Recommendation: Increased efforts must be made to advance the new prescription monitoring program as well as education for physicians on prescribing and pain management best practices.

13. Issue: The current state confidentiality regulations (PA Code 255.5) are a significant barrier for providers sharing the appropriate needed information to ensure a collaborative system of care. This code does not reduce the stigma people with substance use problems face. On the contrary...

Recommendation: Change the confidentiality regulations to allow the client the right to decide to whom and when their information is shared. This right should not belong to the government.

14. Issue: The drug and alcohol system in Pennsylvania is missing a fair and genuine rate setting process. The lack of rates that do not cover costs has also led to many closed programs that were much needed, especially detox beds.

Recommendation: There needs to be a fair and genuine rate setting process for drug and alcohol services that includes the true cost of providing services.

15. Issue: Dramatic shortage of detox beds in the commonwealth. Many persons with drug and alcohol problems end up in the criminal justice system simply due to the lack of detox beds.

Recommendation: Immediate development of needed detox beds. Appropriate funding must be provided to increase access to this lost but critical service.

16. Issue: Laws created to insure parity for mental health and substance use disorders has not been realized.

Recommendation: hold insurance companies and others accountable if they fail to comply with the hard fought laws that has been established.