



**MOAR, Massachusetts Organization for Addiction Recovery**  
30 Winter St., 3<sup>rd</sup> Floor, Boston, MA 02108  
Toll Free – 1-877-MOAR or 617-423-6627 Fax 617-423-6626  
E-Mail: [MOARfran@aol.com](mailto:MOARfran@aol.com)

### **MOAR Hope and MOAR to Do for Addiction Services and Policies**

**MOAR** is a statewide organization whose mission is to organize recovering individuals, families, and friends into a collective voice to educate the public about the value of recovery from alcohol and other addictions. We envision a society where addiction is treated as a significant public health issue and recovery is recognized as valuable to our communities.

#### **MOAR is a MA Coalition for Addiction Services Member Building Collaborative Efforts! From Tragedy to Strategy to Celebration**

##### **The Tragedy:**

- From 2001-2004, MA Bureau of Substance Abuse Services funding was cut by nearly 50%.
- Massachusetts ranks among the top 5% of states for drug and alcohol use among adults and youth.(NSUDH)

##### **Strategy to Celebration:**

MA Bureau of Substance Abuse Services now has a strategic plan to build The Continuum of Care

- The MA state legislature has begun to put the plan into action
- The Massachusetts Bureau of Substance Abuse Services budget now surpasses \$65 million... one third over the 2001 budget.

#### **What's to Celebrate – Thanks to The Leadership of Mental Health and Substance Abuse Committee Chairs Representative Ruth Balsler and Senator Steven Tolman**

- Three Recovery High Schools in Springfield, Boston, and Beverly
- A statewide Adolescent Crisis Stabilization Unit—a 25 bed detox unit with opportunity for mental health assessment
- A new male Section 35 rehabilitation unit for men, who are civilly committed.
- A new female Section 35 rehabilitation unit, Highpoint's Tranquility Inn opened this spring in New Bedford
- Increased focus on criminal justice and recovery
- More alcohol and other drug education availability in public schools
- Six more hospital emergency rooms with alcohol and other drug screening capacity
- Fewer wait lists to enter and move within the continuum of care

#### **We are pleased by the Report from The Oxycontin Commission Chaired By Representative Peter Koutoujian,**

Because Treatment for Oxycontin and Other Prescriptive Drug Addiction Increased 950% in 10 years

Because Opioid Related Deaths Increased 600% from 1990-2003

##### The Report Recommends:

- Improved Prescription Monitoring
- Community, parent and teacher education
- Safer storage of prescription medication
- A statewide disposal program for unused pills
- Increased Access to Treatment

#### **When Legislators Become Educated by Voting Constituents—Good Things can Happen.**

Massachusetts now joins 48 states in the legal distribution of pharmaceutical syringes. The goal is to reduce the impact of Hepatitis C and HIV-AIDS. AIDS Action Committee took the lead on this issue. Congratulations!

#### **What MOAR do We Need to Do in 2007 for 2008? Another Budget Shortfall Could Happen....**

- We need to continue to educate legislators and the public at large about the need for supporting quality prevention and treatment services on demand! No matter what...atill too many drug overdoses!

**And? Let's Move to Educate The Following Initiatives a Reality in 2007 for 2008.**

**Are You Tired of Having Health Insurance that Manages to Tell You that Your loved One – or just maybe You- did not fail at Outpatient yet – so cannot get detoxed.** Are you tired of hearing that your loved one does not meet criteria for the insurance addiction benefit coverage.

**An Act to Provide Equitable Coverage for Substance Abuse did not pass this year**

This bill would provide parity (same standards of coverage used for other diseases) in insurance coverage for alcohol and other drug dependency. If quality insurance coverage is important to you- speak up.

**Are You Tired of Your Insurance Telling You that Your Insurance Won't Pay for You to see a Licensed Alcohol and Drug Counselor I ?**

And you just might be referred to someone, who really does not understand substance use disorder? (H2948 and Senate 620 did not pass). It would require insurers to reimburse for the services of a Licensed Alcohol and Drug Abuse Counselor I. Through insurance reimbursement, it will permit individuals and their families who suffer from, or are affected by alcohol and other drug abuse or addiction, to choose the human services professional most appropriate for their needs. If this issue is important to you- speak up.

***Tired of past felonies or erroneous claims related to past drug use stopping the path to housing , education, & jobs***

**MOAR is a member of MARC - The MA Alliance to Reform CORI – which wants to**

reduce barriers to employment and housing for people who have a favorably ending case (e.g., not guilty), and/or rehabilitated people with criminal records to:

- Implement quasi-automatic sealing of favorably ending cases (e.g., not guilty)
- Allow purging of juvenile records upon approval by a court
- Require that only convictions and open cases be reported to non-law enforcement entities
- Prohibit employers from discriminating against CORI subjects based solely on a CORI *unless* it is related to the position sought or the vulnerable population statute applies
- Create a certificate of commitment to rehabilitation to encourage treatment and subsequent employment
- Allow more people to get treatment behind bars, saves taxpayer dollars, reduces recidivism and makes communities safer by allowing those serving mandatory minimum drug sentences to be eligible for parole and enter addiction treatment, job readiness programs & other services after serving two-thirds of their sentences.

**Are You Tired of Treatment Waiting Lists? Then it is Time for Treatment on Demand**

**One out of every five people seeking addiction treatment is turned away:**

In Massachusetts, 570,343 people in the Commonwealth have substance use disorders, of which:

- ✧ 117,424 are seeking treatment but can not gain access, of whom 39,450 require specialized treatment.

**Treatment Works<sup>1</sup>**

- **Addiction Treatment Works; Recovery is an Investment.** With treatment, even hard-to-reach populations reduce their illegal drug use by 50%.
- **Addiction Treatment** reduces criminal activity by 80%.
- **Addiction Treatment** increases employment and decreases homelessness, results in marked improved physical and mental health, and reduces risky sexual behaviors.
- **Addiction Treatment** is as effective as treatments for other illnesses: diabetes, hypertension, asthma.

**Treatment Saves Lives and Money**

In 2004, MA Division of Health Care Finance & Policy conducted a study of addiction treatment and parity

- The average premium increase due to substance abuse parity would be only 0.27% (under \$10 per member annually).<sup>2</sup> Treatment is less expensive than alternatives, such as not treating or imprisonment. Treatment costs on average \$7,000 annually; the untreated medical costs of substance abuse are \$14,000 annually.
- Massachusetts would save \$6 to \$25 million annually under parity.<sup>3</sup> Treatment is less expensive than alternatives, such as not treating or imprisonment. Treatment costs on average \$7,000 annually; the untreated medical costs of substance abuse are \$14,000 annually. Massachusetts would save \$6 to \$25 million annually under parity.<sup>4</sup>

<sup>1</sup> National Survey on Drug Use and Health and the 2002 Behavioral Risk Factor Survey for Massachusetts.

<sup>2</sup> Information from CSAT ATR – 2004

<sup>3</sup> Division of Health Care Finance and Policy, Commonwealth of Massachusetts Mandated Benefit Review, Review and Evaluation of Proposed Legislation Entitled: *An Act to Provide Equitable Coverage for Substance Abuse*, Senate Bill 872, provided for the Joint Committee on Insurance.

<sup>4</sup> The Lewin Group, Actuarial Assessment of MA Senate Bill. 872: "An Act to Provide Equitable Coverage for Substance Abuse", May 24, 2004.

