

*THE KANSAS ASSOCIATION OF ADDICTION PROFESSIONALS (KAAP)*

**2008 PUBLIC POLICY PLATFORM (APPROVED 12/6/07)**

**Funding**

■ **Support sustained funding for alcohol and drug prevention and treatment in Department of Social and Rehabilitation Services FY 2009 Budget Request.**

- 2007 Legislature added significant funding increases for increased services and increased reimbursement rates for addiction and prevention grants
- Funding commitment of \$3.4 million state funding must be sustained in FY 2009
- FY 2008 supplemental funding for Addiction and Prevention Services should be distributed in a grant procedure to sustain programs and overcome problematic transition to managed care
- Increase Addiction and Prevention Services provider treatment rates to equal Medicaid rates and increase caps on federal block grants
- Expand provider network to meet client needs

KAAP continues to endorse the SRS request to sustain and expand the services available for Kansans with serious treatment needs that were added during the 2007 legislative session. In part, these funds increase the federal block grant “caps” on funding reimbursements to contracted private substance abuse providers used by the state. Providers currently are billing the state 11 percent more than is reimbursed. In FY 2007, the entire system billed approximately \$1.3 million above the amount paid. These funds increase the rates and service caps paid by SRS for services purchased under both the federal block grant and for the fourth time DUI treatment program. The rates paid by SRS for services are below the market rates, significantly below rates paid by private insurance and below the cost of providing many of the service modalities. Increased state funding will expand the number of individuals who currently receive services and allow for SRS to adjust the rates to more accurately reflect the cost of providing services.

■ **Community Based Alternative Sentencing funding for Substance Abuse Treatment Law (SB 123) and SB 67 (4<sup>th</sup> Time DUI treatment)**

- Support FY 2009 Appropriations request for SB 123 treatment to the Kansas Sentencing Commission
- A strong and integrated community based system of substance abuse treatment programs suggest there may be a limited need for a large-scale correctional residential substance abuse treatment facility

KAAP encourages the state to continue fulfilling the commitment to funding treatment of drug offenders sentenced under SB 123, the 2003 law compelling substance abuse treatment instead of incarceration for offenders with simple drug possession offenses and no prior violent criminal history. The new law took effect on November 1, 2003, and substance abuse treatment programs must be fully funded because they are working. The full year funding in FY 2009 will require over \$6 million for treatment. Treatment is working but continued funding for the Kansas Sentencing Commission is essential to provide services and divert people from more costly prison placements. Rate increases and additional new funding are also critical for the continued operation of the SB 67, 4<sup>th</sup> time DUI treatment program. KAAP encourages the

Kansas Department of Corrections to explore and utilize the strong community-based treatment system as they consider establishing a correctional residential treatment facility.

## **Policy**

### **■ Unmet Needs and Addiction Treatment Implementation**

One national study and one state study have both shown the need for expanded substance abuse treatment. The “Blueprint for the States: Policies to Improve the Ways States Organize and Deliver Alcohol and Drug Prevention and Treatment” states:

- “State governments bear the financial burden of the consequences of drugs and alcohol. They spend over thirteen percent of their budgets on problems related to drug and alcohol use. Less than four percent of this is spent on prevention and treatment, while more than 96 percent pays for the social, health and criminal consequences that result from our failure to apply what we know about how to prevent and treat substance use problems.”

In 2006 SRS funded an external study of the addiction and treatment system in Kansas that resulted in the October 2006 “Kansas Comprehensive Needs Assessment” which resulted in the following:

- Approximately 10 percent of Kansans do not receive the treatment they need
- 150,000 adults and 15,000 adolescents in need of services do not receive them and due to state standards, only one-half of those adults and adolescents in need are even eligible for state-funded services
- Only 12,791 of 225,155 in need of services receive them

Both studies describe a system of needs and insufficient funding. At the same time, the addiction treatment system in Kansas is undergoing profound changes. The implementation of the managed care system has not happened flawlessly and the Legislature should monitor the current contract to ensure client needs and providers concerns are addressed. Without careful control by SRS and oversight by the Legislature, clients may receive fewer services and some providers will be out of business. One potential solution is to remove federal block grant dollars from the managed care contract so that funding will be more timely distributed to providers to pay for services. KAAP pledges to continue to work with SRS and the contractor to see the system utilize best practices to provide better services for clients and expand the network of providers. Client care reductions and the diminution of the provider network, however, would be too high a cost for the State of Kansas.

### **■ Support licensure of substance abuse providers under the State Behavioral Sciences Regulatory Board**

Licensure is necessary to assure that quality standards are met in the delivery of services and is viewed as a positive step in the recognition of the professional nature of the field. KAAP will continue to work to complete the credentialing process at the Department of Health and Environment. Timelines for application completion and parties responsible for document preparation and representing the field in the review process have been established.

### **■ Support and sustain integrity of Problem Gaming and Addiction Fund.**

Passage of Senate Bill 66, the Expanded Lottery Act, established the Problem Gaming and Addiction Fund. The Legislature established this fund as part of expanded gaming to ensure that

gambling addiction issues and the broader range of addiction treatment issues were funded and addressed. This new dedicated funding source will address long-standing funding deficiencies and co-occurring addiction issues as well as broad-based treatment and prevention services in addition to a research-based approach to evaluating effective treatment options. These funds will be sought by many other agencies and entities, but KAAP supports the Legislature's continued adherence to the direct intent for which these funds were placed in Kansas law.

# **Kansas Association of Addiction Professionals**

## **2008 Legislative Session Talking Points**

1. Sustain state funding commitment from 2007 session, including the new SRS--Addiction and Prevention Services requested addition of \$2.9 million in state funds to increase services for clients
2. Support SRS-Addiction and Prevention Services Supplemental budget request for the current budget year and consider requiring distribution of funds in a grant procedure to sustain programs and overcome problematic transition to managed care
3. Protect the integrity of the Problem Gaming and Addictions Fund created in the 2007 Legislation to expand gaming in Kansas. Current and expanding gambling addiction, and all addiction programs in Kansas need these funds
4. Monitor and make changes as necessary to the managed care program for all substance abuse treatment funding implemented during 2007
  - a. The transition to managed care has fundamentally altered the provision of substance abuse treatment, not always in a positive way. Inpatient services have been greatly diminished in the first six months of managed care
  - b. The transition has presented a number of problems for clients and providers

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