Michigan Association of Substance Addiction Providers (MIASAP)
Testimony to the Michigan House Appropriations HHS Subcommittee on Opioid Settlement Funds
October 25, 2023

The **Michigan Association of Substance Addiction Providers** (MIASAP) was formed in 2014 to elevate the voice and capital of agencies providing substance use disorder services throughout Michigan. As an organization of SUD providers, the MIASAP represents organizations that provide prevention, treatment, and recovery services for individuals and families in Michigan.

With the various settlements from the opioid litigation, we are very concerned about transparency and accountability in how the money will be used. Under the settlement, the Attorney General is leaving it up to individual county and local governments to distribute the funds based on specific guidelines, leaving providers to contact 83 counties, 1,240 townships, 275 cities, and 258 villages and try to figure out who is leading the opioid settlement in their community. Many mayors and council members we talked with did not know anything about the settlements, let alone what to do with the funds if they were eligible to receive them.

From an October 20, 2023 story on NPR (Law enforcement eyes opioid settlement cash for squad cars and body scanners, October 20, 2023, Link), we did learn that police and sheriff departments have been lobbying to secure opioid settlement money to buy more cars and body scanners. This includes Kalamazoo County and St. Clair County.

We encourage the legislature to adopt the recommendations outlined in the Opioid Advisory Commissions Report and provide direction to the state and local governments on how to spend the settlement funds in a way that creates systemic change. For example,

Address the workforce shortage.

- Set aside funding for retention bonuses for therapists in qualified SUD treatment/prevention programs.
- Address burnout among the existing workforce through wellness events
- Pay for credential costs for SUD therapists (MCBAP, LARA, supervision sessions, application fees, training, etc.)

Remove barriers to care.

- Change the authorization process to open access to services through technology enhancements.
- Create a fund for transportation to intensive levels of care.
- Expand and enhance recovery support services, including recovery housing and job training. This includes guaranteeing six months of recovering housing with a possible extension to 12 months. In addition to money set aside to help purchase food, clothing, and transportation.
- Develop a marketing campaign to reduce the stigma associated with SUD, including for children.
- Create a fund to support providers if services are not authorized promptly and otherwise fill the care gap.

Build better systems to support an individual's road to recovery.

- Extend the number of days for residential treatment services.
- Develop a program for post-treatment services up to 1 year of support/connection.

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- Create a pathway for integrating primary care into SUD providers, including funding for visiting nurses or nurse practitioners.
- Create a fund for recovery housing.

How the funds are distributed matters. With 3,000 drug overdose deaths reaching an all-time high in 2021 in Michigan (CDC), Substance Addiction Providers are experiencing increased demand for services, severe staffing shortages, and additional barriers standing in the way of people seeking our services.

These individuals often face challenges in receiving appropriate and effective treatments. Some don't want treatment because of the stigma attached to getting it. Others cannot make it to appointments without access to transportation or telehealth, and others call for help but sometimes wait 14 days or more in Wayne County before they get service. They are also more likely to sit in jail and experience homelessness. Additionally, nearly half of those who experience a substance use disorder have mental health challenges and vice versa.

The settlement dollars provide an opportunity to invest in prevention, treatment, and harm reduction programs to help address this crisis and keep people from dying from overdoses. This is a rare opportunity for the state and local communities to create systemic change and do something about addiction and prevention.

If we don't fix the problem, our morgues, jails, and emergency rooms will continue to be at capacity, children will grow up without parents, and our homeless situation will worsen. Michiganders deserve a system that is accessible, innovative, person-centered, and community driven. The funding from the opioid settlement provides the state with a great foundation to create systemic change.

On Behalf of MIASAP

Daniel Cherrin

(313) 300-0932, dcherrin@northcoaststrategies.com
The Michigan Association of Substance Addiction Providers, https://miasap.org