

The Issue

In his 2003 State of the Union Address, President Bush announced a new three-year, \$600 million federal treatment initiative, Access to Recovery (ATR) to help Americans suffering from substance abuse and addiction find treatment by providing vouchers to individuals seeking assistance. Approximately 100,000 people can be treated through this voucher program, which is currently being funded at \$100 million per year.

NAADAC's perspective on Access to Recovery

NAADAC's objectives for this new substance abuse treatment program are based on three principles:

1. consumer choice
2. use of a results-oriented curriculum that will utilize individual treatment by licensed and/or certified professionals and
3. increased capacity.

The process of recovery is a personal one. Achieving recovery can take many pathways: physical, mental, emotional, or spiritual. With a voucher, people in need of addiction treatment and recovery support will have the choice to select the programs and providers that will help them most. Increased choice protects individuals and encourages quality.

Payment to providers will be linked to demonstration of treatment effectiveness and recovery, measured by outcomes such as: abstinence from drugs and alcohol, no involvement with the criminal justice system, attainment of employment or enrollment in school, and stable housing.

The initial phase of ATR will support treatment for approximately 100,000 people per year and expand the array of services available including medical detoxification, inpatient and outpatient treatment modalities, residential services, peer support, relapse prevention, case management, and other recovery-promoting services.

NAADAC is supportive of the president's wishes to increase substance abuse funding. We feel strongly that the only way effective implementation can be achieved is through faith

based providers and professionals adhering to the same set of licensure and certification requirement that secular counselors have had in place for decades, those rooted in evidence based practices.

Congress echoed this opinion in its fiscal year 2005 final budget document, which directed all providers and clinical professionals participating in the new initiative to be accountable in using the same standards of care, licensure, and certification requirements. NAADAC will work vigorously with the Substance Abuse and Mental Health Services Administration (SAMHSA), the Office of National Drug Control Policy (ONDCP), the National Association of State Alcohol and Drug Abuse Directors (NASADAD) and other stakeholders to ensure that licensure and certification requirements are a prominent part of this new initiative.

The Basic Elements of the Access to Recovery Initiative

Essentially ATR will be implemented through the course of a 4-step plan:

Those individuals seeking drug and alcohol treatment and recovery support will be assessed and receive a voucher to pay for a range of appropriate services.

Simultaneously, states will work with a consortium of public and private entities to jointly administer the program, distribute vouchers and deliver alcohol and drug treatment as well as other services such as career counseling. States will also be required to monitor client outcomes and to make adjustments based on the cost effectiveness of the services received.

The central focus on outcomes surrounds the fact that ATR will be effective in the linking of reimbursement for services to demonstrated abstinence from drug and alcohol use by clients following discharge from a treatment program.

States will be required to use the new funds to supplement, not supplant, current funding and build on existing programs, including the Substance Abuse and Mental Health Services Administration's (SAMHSA) Substance Abuse Prevention Treatment Block Grant.

Governors are key to assuring a coordinated approach among various State departments that come into contact with people with addictive disorders: state drug and alcohol authorities; mental health authorities; departments of education, child welfare, Medicaid, and criminal justice agencies. Therefore, SAMHSA is asking Governors' offices to apply for the ATR funds. Funds will be awarded through a competitive grant process.