

The Future of Health Care Reform: Shaping and Reshaping Treatment

By Gerard J. Schmidt, MA, LPC, MAC, NAADAC President

Senator Shelley Moore Capito, R-WV, and I sat down this summer to discuss health care and health care reform. While we may not agree on all aspects of the best path to a more comprehensive and affordable method of addressing health care coverage, we do agree that the future is uncertain and that health care nationwide is a problem.

Many of the current problems Senator Capito and I see our fellow citizens here in West Virginia facing are the same problems that communities are facing nationwide. Medicaid expansion in West Virginia, and in many states, has opened the door for access to health care, including addiction treatment, for hundreds of thousands of individuals previously excluded from health care coverage of any type. We, on a local level and as a nation, need to come together to identify priorities and work to provide treatment.

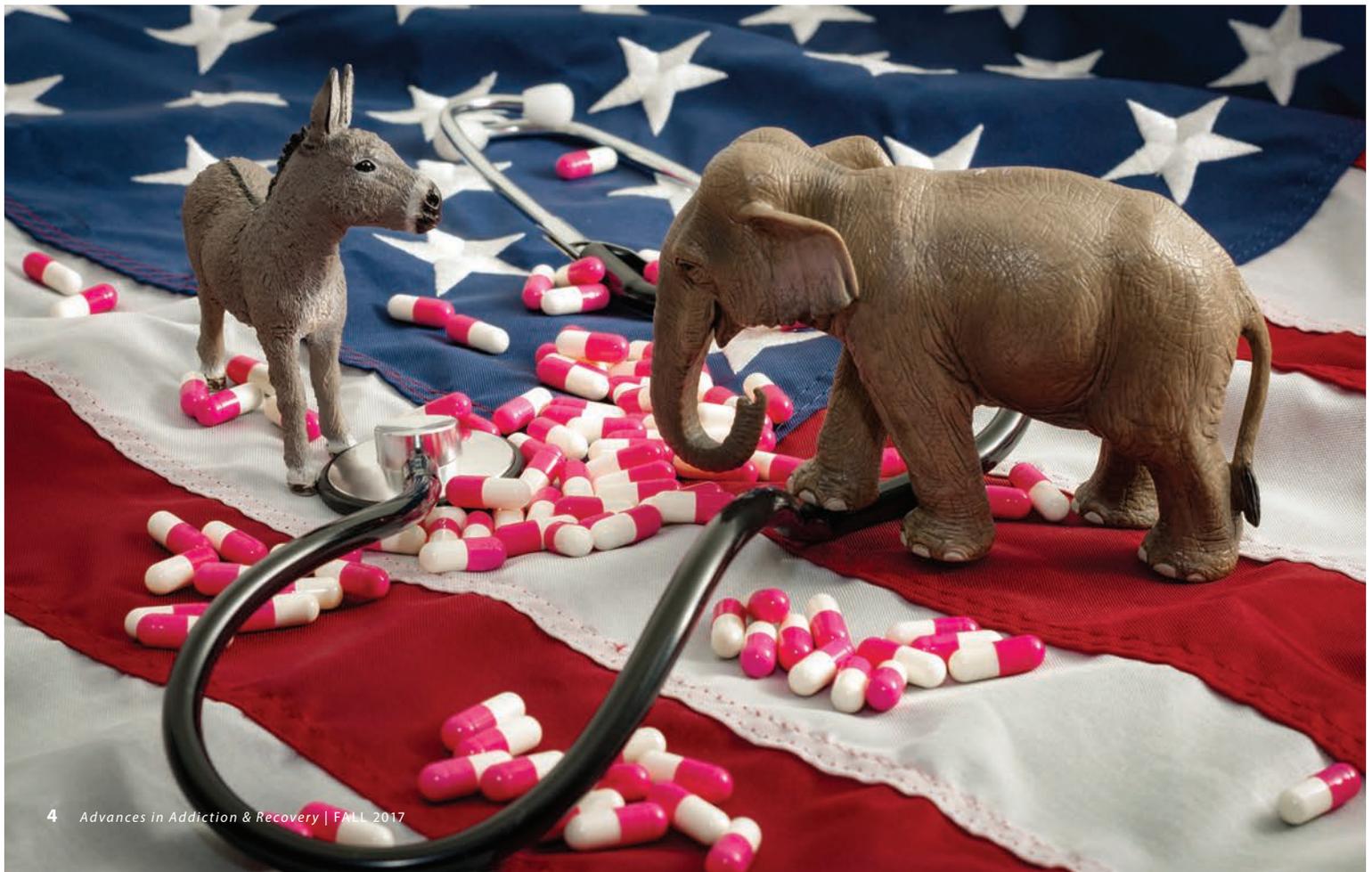
Don't Lose Sight of Other Addictions

One thing Senator Capito and I agree on is that an over-focus on the opioid addiction problem redirects the focus away from other equally critical addiction issues facing us nationally. Seemingly every time you turn on the news or pick up a paper, you hear about the opioid crisis. Without question, there is a huge problem with the rise in opioid addiction, opioid overdoses, and access to pain medications over the past ten years or so, and we need more local, state, and national initiatives and funding to address

the issue. In the past two weeks alone, President Trump has declared the opioid crisis a public health emergency and his Commission on Combating Drug Addiction and the Opioid Crisis released a report making more than 50 recommendations aimed at ameliorating the opioid epidemic. However, for many of us that have been in this profession for the past 30 plus years, this current problem is just that: the current problem. That does not take away from the serious and harmful nature of what is occurring, but it does distract from the larger and more widespread and deadly problem of alcohol addiction.

Alcohol addiction is still the third most serious health problem in the United States and more people die each year from this addiction and related illnesses than any other addiction. Alcohol misuse accounts for about 88,000 deaths in the United States each year and alcohol is involved in about 20 percent of the overdose related to opioids. Alcohol misuse and alcohol use disorders alone cost the United States approximately \$249 billion in lost productivity, healthcare expense, law enforcement, and other criminal justice costs.¹ We cannot lose sight of the serious nature of this, and in our efforts to deal with the current epidemic with opioids, pull or redirect funding away from research, prevention and treatment of alcohol addiction.

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Promote Comprehensive Systems of Care and Continuum of Care

It is clear that our nation is in crisis with respect to health care from a variety of fronts. Politics aside, we as a profession need to make certain that our voices are constant and in concert with the message that treatment works and recovery is possible. We need to continue to promote systems of care that address both immediate and emergent care issues of substance use disorders like detoxification, naloxone intervention, prevention, treatment and long term recovery. It is only through this continuum of care that we can effectively deal with the staggering epidemic of alcohol and drug use disorders in the country.

In my travels across the country as President of NAADAC, I have had the opportunity to talk with a variety of providers, treatment program administrators, and the public in general about what a devastating shortage of treatment professionals we have. While the demand and access for treatment continues to grow, the ever-increasing demand for qualified addiction treatment professionals continues to greatly exceed their availability. Comprehensive systems of care from intervention to treatment to long term recovery support using Peer Recovery Specialists are effective and evidence-based methods of practice that have had a profound impact on addressing the ever growing problems of substance use disorders across the United States. As a profession, we need to embrace these methods and work with systems of care in making certain that we are both open to this delivery system and supportive of education and certification and reimbursement efforts for this type of care.

Stay Abreast of Current Trends of Use

As the conversation continues about health care reform and coverage for all aspects of treatment, we, as addiction treatment professionals need to stay focused on current trends of use. A prime example of this is the fallout that is occurring across the United States as a result of states legalizing medicinal and/or recreational marijuana use, and/or decriminalizing marijuana use/possession. As a result, I believe we are already seeing both an increase in diverted use and an increase in “tainted” or “doctored” marijuana coming across the border to compete with local product. While our job is to focus on treatment, we need to be keenly aware of the current trends and the impact these trends have on those we are treating or who may need to seek treatment. Furthermore, as we advocate for treatment dollars, our message needs to be uniform and consistent about the issues facing each locale.

Get Involved with Local, State, and National Advocacy

As most of you know, advocacy is near and dear to me and has been over the course of my career. We treat a population of individuals who are less represented than any other health group in the United States. We, as treatment professionals, have a responsibility to be the voice for recovery and to promote legislation and encourage funding at all levels for substance use disorders treatment.

While NAADAC can take the lead, we cannot do it without you! We need your help at the local, state, and national levels to advocate for prevention, treatment and recovery resources and funding. Visit NAADAC’s “Take Action” webpage at www.naadac.org/takeaction and learn about current federal legislation that you can support. Call, email, or text your local, state, and federal representatives and use your voice.

The current state of health care is up in the air as politicians debate and

the opioid epidemic dominates the headlines. However, our task is clear: we must work to provide access to evidence-based and quality substance use disorder treatment for everyone and keep our message in front of those who can make meaningful changes in both policy and practice. We are the leaders in addiction treatment nationwide and we need to join our voices and advocate for those who cannot speak for themselves but are so desperately in need of care. As the debate continues over health care coverage, and no matter how it gets reshaped, we need to make certain our message is loud and clear: Treatment works and needs to be funded because recovery is possible.



Gerard J. Schmidt, MA, LPC, MAC, is President of NAADAC, the Association for Addiction Professionals and the Chief Operations Officer at Valley HealthCare System in Morgantown, WV. He has served in the mental health and addictions treatment profession for the past 45 years. Publications to Schmidt’s credit include several articles on the development of Employee Assistance Programs in rural areas and wellness in the workplace, addictions practice in the residential settings and an overview of addictions practice in the United States. He has edited Treatment Improvement Protocols for CSAT for several years and has been active with the Mid-Atlantic ATTC. Schmidt had served as Chair of the National Certification Commission for Addiction Professionals (NCC AP) and NAADAC’s Public Policy Committee, and as NAADAC’s Clinical Affairs Consultant. Awards include the Distinguished Service Award in 2003 and the Senator Harold Hughes Advocate of the Year in 2010. In addition to his national and international work, Schmidt has been active within West Virginia in advocating for and supporting State legislative issues related to addictions and addiction treatment.

(Endnote)

¹ U.S. Department of Health and Human Services (HHS), Office of the Surgeon General, Facing Addiction in America: The Surgeon General’s Report on Alcohol, Drugs, and Health. Washington, DC: HHS, November 2016.

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