

Covid left access to addiction services in shambles: Assembly hearing

Assembly members expressed concerns in a Tuesday hearing that Covid-19 left patients with substance-abuse disorders isolated from treatment programs and a constrained budget would continue to restrict access.

Panelists recounted information of opioid-overdose spikes and increased rates of drug and alcohol relapses during the pandemic, which were exacerbated by clinics operating at reduced capacity.

The Office of Addiction Services and Supports attempted to provide community-based providers and local addiction centers with supplies, including personal protective equipment, recognizing their importance as patients avoided emergency departments for fear of contracting Covid-19, said Arlene Gonzalez-Sanchez, the office's commissioner.

However, lawmakers noted accounts from clinics in their districts that did not have adequate protective supplies and spoke of constituents who couldn't access addiction services during the pandemic.

Sanchez-Gonzalez acknowledged that more could have been done and called on Assembly members to work with her office to develop district-specific plans to improve access.

The waiver of take-home medication privileges helped address some access issues, Sanchez-Gonzales said. Typically a patient would not have been able to have addiction medication mailed to their home until after two years of treatment, but the lifting of those restrictions during Covid-19 allowed patients to remain on their medication while keeping the risk of infection down, she said. When questioned about the reach of the privilege expansion, Sanchez-Gonzales noted that data is delayed due to the pandemic.

Panelists downplayed concerns from some that deliveries of addiction medications, such as methadone and buprenorphine, could be abused.

"Medication-assisted treatment for addiction is being scapegoated," said Allegra Schorr, president of the Coalition of Medication Assisted Treatment Providers and Advocates. "These are scientifically proven effective treatment methods that are misunderstood due to the stigma of using drugs to treat the addiction."

Visitation at inpatient facilities continues to vary across the state. Sanchez-Gonzales was unable to provide the proportion of inpatient treatment centers that have reopened visitation, but she noted that the process is gradual and in line with the reopening of other health care facilities such as nursing homes and long-term-care centers.

Budget constraints also have left the survival of several addiction programs in the city and the state in limbo. Sanchez-Gonzales noted her office would work with local programs to provide support and funding where applicable.