

OSFAB FY 2026 Recommendations as of 9/24/24

Recommendations should strengthen human agency, and funding should go into two (2) categories:

1. Community-based organizations (CBOs) that are to engage people who are disproportionately affected by substance use and
 - a. Member Lavigne suggested being more detailed in what a CBO is.
2. System change including housing, workforce, workforce training, certification, data collection, integration of care, and food.
 - a. Member Lavigne suggested adding in Transportation

Recommendation: Increase the number of bilingual clinicians; and to develop workforce pathways for new Americans and immigrants to go into the addiction field to better service the community and increase accessibility.

Recommendation: Commission the development of a strategy to produce a comprehensive plan regarding rate reform, in collaboration across state agencies to improve reimbursement for services that are both clinical and supportive for people suffering from SUD.

Recommendation: Continue to include language specifically addressing preference for special populations in future RFAs and to create specific RFAs that target these populations including veterans, maternal persons, formerly incarcerated persons, and Native Americans.

Recommendation: Settlement Funds be allocated in support of grassroots providers (re: those organizations whose absence would have a measurable and negative impact on their community). To do this, larger organizations would be granted funds that they would then administrator and sub-award to grassroots organizations.

Recommendation: OSFAB seeks various means to demonstrate impact at various levels. In pursuit of that desire to consider outcome data such as overdose, and overdose death reduction, process data including number of persons participating in program, and structure data.

Recommendation: Repurpose state and private institutions for programmatic and reintegration services in order to be able to offer integrated care, with a focus on areas with limited services.

Recommendation: Fund existing or pilots for overdose prevention centers which are evidence-based models

Recommendation: The Governor declare a public health emergency to address the overdose crisis and encourage governmental entities to act in concert to lower overdose rates.

Recommendation: Fund Medicaid re-entry pilots in at least 3 counties or areas of the state, to be prepared for the 2026 1115 Medicaid Waiver to address those in carceral settings with addiction. Pilots to incorporate both in-reach services (state and local carceral settings) and supports post release, for those without active Medicaid. All three entities to work together to develop reentry pathways.

For further discussion:

- Further the integration of care for co-occurring competencies, including, but not limited to, opportunities for quality improvement, consultation, non-billable services, and certification and that funding be made available for the integration of care. **The Board decided that this recommendation needs to be formulated and will be discussed at the next meeting.**
 - Member Marquesano said that she would refine the recommendation.
- Transform the system to be more person-centric, giving individuals agency over their own care. **No motion or recommendation was voted on.**
- Strategic and thoughtful proposal to ensure adequate funding and support for current and new programs and services. That there is a plan for that funding to keep pace with inflation and current market conditions. (This could be a theme added to all of the buckets). Providers are operating with a deficit.
- Co-Chair Waldman is refining a recommendation re: DSS, Parole, Probation, CPS significantly impact patient population. Appears to be a lack of collection of data of what different agencies are doing and rules by which they are abiding. Example – Long term project to collate data for all counties across New York – Data overtime, provisions for sanctions, why they sanction, how to get to a housing first model. Intersection of these systems and its impact on outcomes.
 - Joyce Rivera suggested to issue a call for papers.