



Budget Office

CITY OF PHILADELPHIA

May 25, 2022

The Honorable Darrell Clarke
City Council President
City Hall, Room 490
Philadelphia, PA 19107

Dear Council President Clarke,

This letter is in response to questions sent by Councilmember Quiñones Sánchez following the FY23 Council Budget Hearing scheduled for DBHIDS. The Councilmember asked the following questions:

1. Do service providers, particularly in drug treatment continue to be held "harmless" in their budgets?

General practice is that substance providers are paid on a fee for service/cost reimbursement basis.

2. The department continues to state that fentanyl is the major challenge with getting people into treatment, what new/different strategies will it be undertaking in the next fiscal year to deal with it? Policy or access changes

Fentanyl is the drug responsible for 80% of overdose deaths in the city. We are employing the following strategies to address the concerns related to fentanyl:

- Increasing the Mobile Outreach and Recovery Services (MORS) from 1 team to 4 teams to connect people with assessments and treatment from the street. We expect full implementation Summer 2022.
- In partnership with the federal and state governments & our local community-based providers, we are developing a mobile methadone initiative.
- A mobile assessment van has been launched by community providers and has been working with individuals in the community and those living on the street to complete an SUD level of care assessment and connection to services.
- Mobile providers are able to administer and more widely distribute NARCAN
- We have removed the barriers that individuals were experiencing related to the tobacco policy and have revised our smoking policies to meet people where they are on their recovery journey. Smoking cessation is encouraged as part of an overall whole health, long term recovery approach.
- Continuing to expand the Warm Hand Off Program in the City's emergency departments and hospitals in order to provide support through peer counselors/substance use professionals to individuals who have survived an overdose and/or have a Substance use-related problem.
- Family Rehousing Program- Individuals and families are supported for at least one year to promote healthy family reunification through counseling, treatment, home visits, and assistance with education/employment to support substance use recovery.



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3. The city is expected to stand up "Drug Court" this July. As we coordinate with the other partners, a treatment provider, with NO access barriers must be engaged so that we can provide a "carrot and stick" to the process. Who will this provider be? Will all access barriers be removed?

Forensic Intensive Recovery (FIR) staff can be reintroduced into the Accelerated Misdemeanor Program (AMP) Court providing staff to support the court, provide assessments and connections to treatment. As we continue to engage to learn more about the long-term planning, we are modifying our engagement and involvement in this process to ensure efficiency in the revised AMP model. We are going to be working with our partners including the Office of Criminal Justice to work to continue to support this initiative.

4. Please provide a detail of all funded agencies, by area and amount are providing services to Kensington.

The Medicaid spend for treatment services in Kensington in CY 2021 was over \$87 million (\$76 million for MH levels of care and \$11 million for SUD levels of care) for 22 providers:

1. A&O TRANSPORT AND RECOVERY SERVICES, INC.
2. ASOCIACION PUERTORRIQUENOS EN MARCHA, INC.
3. BEACON POINT RECOVERY CENTER LLC
4. CHILDREN'S CRISIS TREATMENT CENTER
5. CITYWIDE COMMUNITY COUNSELING SERVICES, INC.
6. CO-MHAR, INC.
7. ESPERANZA HEALTH CENTER, INC.
8. GETWELL BEHAVIORIAL HEALTH INC.
9. GREATER PHILADELPHIA HEALTH ACTION, INC.
10. HISPANIC COMMUNITY COUNSELING SERVICES
11. MERAKEY CHILDREN'S SERVICES
12. MERAKEY PARKSIDE RECOVERY
13. NEW JOURNEYS IN RECOVERY
14. NUEVA VIDA MENTAL HEALTH CENTER
15. OON EMPOWERMENT RESOURCE ASSOCIATE, INC.
16. PMHCC CTT, INC.
17. PREVENTION POINT of PHILADELPHIA
18. PROJECT HOME
19. PUBLIC HEALTH MANAGEMENT CORPORATION
20. TEMPLE FACULTY PRACTICE PLAN, INC.
21. TEMPLE UNIVERSITY HOSPITAL, INC.
22. THE SALVATION ARMY



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5. Trac or horse tranquilizer has become a major treatment challenge, creating serious open wounds, which create barriers to treatment, please detail your plan to address open wounds and eliminate this barrier for providers. Please detail what is your current capacity to treat wounds and what is the goal for next year

Xylazine/Tranq, an animal tranquilizer has become a major challenge and has been found in the drug supply. As wounds have become more prevalent, we have partnered with a provider to offer a mobile wound care program travels to locations in Kensington to engage individuals, treat wounds and offer treatment/assessments for treatment and linkage to treatment facilities. DBHIDS participates in a PDPH OD Stat workgroup to address wound care challenges, alongside PDPH staff and physical health and behavioral health providers. Moreover, DBHIDS is looking to further expanding ASAM 3.7 (Medically Monitored Intensive Inpatient Level of Service) for increased integration of rehab and wound care. Patients' needs at this level ordinary involve enhanced medical and/or psychiatric care.

6. The city is set to begin to receive Opioid settlement resources, who will receive this money? who will oversee its allocation and how are we insuring transparency and effectiveness? Will there be a Board/Workgroup? Who decides? What if any plans have been prepared for the resources?

We are waiting for additional information from the state on the structure of the payment and the allowable uses before we make any determination of how the funding will be allocated. Initial information we have received indicates allowable uses include expanding the use of naloxone and medication assisted treatment; providing support for pregnant and postpartum women and babies affected by OUD; expanding recovery and treatment services; and expanding prevention programs. Community engagement will also be critical to determining the use of funds, and we look to keep City Council updated as we learn more about the settlement process.

Please contact my office for further information.

Thank you,

Jill Bowen, Ph.D.
Commissioner
DBHIDS