

1 BEFORE THE NEW YORK STATE SENATE MAJORITY COALITION  
2 JOINT TASK FORCE ON HEROIN AND OPIOID ADDICTION  
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3 PUBLIC FORUM: PUTNAM COUNTY

4 PANEL DISCUSSION ON CARMEL HAMLET'S HEROIN EPIDEMIC  
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6  
7 Paladin Center Tactical Training Facility  
8 39 Seminary Hill Road  
9 Carmel Hamlet, New York 10512

10 April 24, 2014  
11 6:00 p.m. to 7:30 p.m.

12 PRESENT:

13 Senator Philip M. Boyle, Task Force Chairman  
14 Chairman of the Senate Committee on Alcoholism and  
15 Drug Abuse.

16 Senator Greg Ball, Task Force Forum Moderator  
17 Chairman, Veterans, Homeland Security, and  
18 Military Affairs

19 Senator David Carlucci, Task Force Vice Chairman  
20 Member of Task Force  
21 Chairman, Mental Health and Development Disabilities  
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1           SENATOR BALL: Okay, ready; we'll start.

2           Do you mind if we start with the pledge of  
3 allegiance?

4                       (All present recite, as follows:)

5           "I pledge allegiance to the flag of the  
6 United States of America and to the republic for  
7 which it stands, one nation under God, indivisible,  
8 with liberty and justice for all."

9           SENATOR BALL: Thank you.

10          Okay, well, I want to thank everybody for  
11 coming today.

12          I certainly want to thank Paladin for hosting  
13 us.

14          And, they've asked me to point out the two  
15 exits, over to the left and over to the right.

16          But I want to thank them for hosting us once  
17 again.

18          You know, we did a Homeland Security -- the  
19 second Homeland Security roundtable with a group of  
20 law-enforcement officials.

21          And about a year ago, when we did the first  
22 summit on homeland security, I mean, the issues were  
23 very focused on terrorism, specifically.

24          And it's amazing how, in one year, how the  
25 conversation of that roundtable completely shifted

1 to heroin, opiate abuse, and addiction, and its  
2 impact in our communities; and we're talking about  
3 suburban communities, rural communities, urban  
4 communities.

5 So, I want to thank Senator Boyle who came  
6 all the way from Long Island.

7 And that's a hell of a trip. I hate that  
8 trip.

9 [Laughter.]

10 SENATOR BALL: So, thank you.

11 [Applause.]

12 SENATOR BALL: Welcome to Putnam County.

13 Next time you can wear jeans, I promise.

14 And, Senator Carlucci, also a very good  
15 friend and colleague, who came all the way, I'm  
16 assuming, from Rockland.

17 SENATOR CARLUCCI: That's right.

18 SENATOR BALL: Right?

19 So thank you very much for both of you being  
20 here.

21 [Applause.]

22 SENATOR BALL: I'll just -- I'll be brief,  
23 and be seated, like I learned at the United States  
24 Air Force academy. And then what we're gonna do is,  
25 both of the Senators will speak, and we'll go around

1 the table, have everybody do a very brief  
2 introduction.

3 And then what we want to do is, get into a  
4 detail- and deliverable-oriented conversation about  
5 what we can do as legislators to assist.

6 And I think the three categories are:  
7 Prevention, treatment, and law enforcement.

8 Thank God you're here.

9 So, we'll focus on those three categories.

10 And, Senator Boyle and Senator Carlucci have  
11 a little bit of experience from previous forums, so  
12 we can do that.

13 I think a couple years ago, even, and we've  
14 done a very good job as a state, I believe, at  
15 cracking down on prescription-drug abuse, but, we've  
16 seen the balloon effect. We know how the drug  
17 industry works internationally with the balloon  
18 effect, and now we've seen it locally.

19 We did a good job in one area, and now we've  
20 seen a shift to where, many times, young men, young  
21 women, are needlessly dying in our communities.

22 And I think it was easy for certain  
23 legislators and suburban communities to say: You  
24 know, that drug-addiction thing, that's mostly an  
25 inner-city problem.

1           And these are our kids, and it is an  
2 epidemic. And we have to do everything that we  
3 possibly can to make sure that we come together as a  
4 community.

5           And that's exactly why we're here today.

6           So I know that there's no magic bullet, but  
7 to the extent that we can help, that's why this  
8 Task Force was set up so proactively.

9           So, without further ado, Senator Phil Boyle.

10          SENATOR BOYLE: Thank you, Senator.

11          And I would like to thank Senator Ball for  
12 his leadership on fighting this heroin epidemic, and  
13 it is a statewide epidemic.

14          I've been to Buffalo, out to Suffolk County  
15 where I'm from.

16          And, talk about traveling, I'm leaving here  
17 tonight to drive to Plattsburgh for a forum tomorrow  
18 morning.

19          But I can tell you that, I'm the Chairman of  
20 the Senate Alcohol and Drug Abuse Committee, and in  
21 that regard, the Senate leadership asked me to chair  
22 this Task Force, along with Vice Chair  
23 Senator David Carlucci, who's the Chairman of the  
24 Mental Health Committee in the Senate.

25          And, we're holding 14 forums around the

1 state. This is the fifth one.

2 And, we're getting a lot of good insights.

3 Basically, we have to issue a report by  
4 June 1st, on ideas for combating this heroin  
5 epidemic.

6 We're gonna pass legislation right after  
7 that, based on the report.

8 So, with the distinguished panel in the room,  
9 and from any ideas we can get from anybody in the  
10 room, about what you've experienced -- whether it's  
11 in law enforcement, whether it's treatment, whether  
12 it's prevention -- if you had to say, "There ought  
13 to be a law to help combat this," that's what we're  
14 looking for.

15 We're looking forward to a great conversation  
16 this evening.

17 And thank you again, Senator Ball.

18 SENATOR BALL: Thank you, Senator Boyle.

19 Senator Carlucci.

20 SENATOR CARLUCCI: Well, thank you so much.

21 I want to thank Senator Ball for putting this  
22 together, and thank Senator Boyle for leading the  
23 Task Force.

24 This is an extremely important issue, and I'm  
25 really just gratified to see so many people in the

1 room tonight.

2 It's a beautiful day, but you're here today  
3 to spend some time, to really talk with everyone  
4 here about ways that we can tackle this issue.

5 And like was said by my colleagues, we know  
6 that it's not gonna be a silver bullet.

7 There's not some magic piece of legislation  
8 that we can pass that will drastically change this  
9 issue. We know that it's gonna be a combination of  
10 issues.

11 It's gonna be law enforcement, educators,  
12 leaders in the community, to really come together  
13 and tackle this important problem.

14 So, I want to thank everyone here tonight,  
15 and look forward to listening to you.

16 SENATOR BALL: I do want to thank, as well,  
17 for being here, the Salomone and Christiansen  
18 families who are here, and give them some time to  
19 speak as well.

20 If you guys want to start off.

21 And thank you for all the good work that  
22 you've done in our community.

23 [Applause.]

24 STEVE SALOMONE: Hi, I'm Steve Salomone.

25 Thank you, Senator Boyle, for putting the

1 event on.

2 We founded, with the Christiansens, these  
3 four parents started the Drug Crisis In Our  
4 Backyard.

5 We lost our sons to drug addiction; to an  
6 overdose. And as a result of that, we felt we  
7 wanted to come out and do something about it, rather  
8 than, you know, just retreat.

9 What we heard, when we started to talk to  
10 people, was the crisis was large, and people were  
11 embarrassed to talk about it.

12 And what we wanted, our group is about, is to  
13 provide a forum for people to come forward and say,  
14 "I need help," because people feel that it's a  
15 character flaw, but it's not.

16 Addiction is a disease, and it needs to be  
17 treated like a disease.

18 So that's primarily what our mission is.

19 I'm not gonna steal the show here, but a  
20 couple of comments I would like to make:

21 The drug issue has two components: it's  
22 supply and demand.

23 The supply side of it is where law  
24 enforcement comes in. And we need to address that,  
25 and we need to pass legislation for that.



1           And we need to get insurance industry to  
2           start providing coverage to help people get better.

3           And, that's where we need to go.

4           [Applause.]

5           SENATOR BALL: If I can just follow up on  
6           that, too, what I would like your input on: We have  
7           introduced a bill, 7071, specific on the insurance  
8           industry, and some of the issues where we see that  
9           they're really not providing the safety net that are  
10          necessary to deal with the issues.

11          So, if you can review that, and everybody  
12          else here.

13          I don't know if you have that in the packet,  
14          or not, but if you want a copy, take a look at it,  
15          and let me know.

16          Thank you.

17          SUSAN SALOMONE: Hi, I'm Susan Salomone, and  
18          thanks so much for having this roundtable.

19          It's so necessary.

20          We're -- we're five people that lost our  
21          loved one.

22          The Christiansens lost their son Eric [ph.].

23          We lost our son Justin [ph.].

24          But there are many people that have lost  
25          their children.

1           We're just two couples.

2           I'm sure there are other people in this room  
3 that have lost their children or lost a loved one.

4           And our mission really is to make this  
5 something that people are not afraid to talk about.

6           To destigmatize this problem, this disease,  
7 so that people are not afraid to talk to someone  
8 about it.

9           That I -- I feel that if we can do that, then  
10 more and more people will come out, and then the  
11 legislators have to listen to us, and then the  
12 health companies and the insurance companies have to  
13 listen to them.

14           So I think it's, like, a snowball rolling  
15 downhill, but the first part of it is coming out,  
16 and doing this.

17           And when our sons died, nobody was talking  
18 about it. And now they're starting to talk about  
19 it, two years later.

20           So, I think we're make something headway.

21           Thank you.

22           SENATOR BALL: Thank you.

23                           [Applause.]

24           CAROL CHRISTIANSEN: Hi, I'm  
25 Carol Christiansen.

1 I want to thank the Senators for having this.

2 Thank you very much.

3 I'm co-founder with the Salomones, and my  
4 husband and my daughter Karina, Drug Crisis In Our  
5 Backyard.

6 Besides the awareness, what I would like to  
7 bring out is the focus on the doctors that prescribe  
8 this.

9 You know, my son went for back pain, and a  
10 year and a half later he died; he OD'd from opiates.

11 So, how does that happen?

12 You know, he was a New York City detective,  
13 and this happened to him.

14 So if it could happen to him, it could happen  
15 to anybody.

16 And that's our focus, also, is the doctors,  
17 you know, what's their responsibility in this?

18 Thank you.

19 [Applause.]

20 KARINA CHRISTIANSEN: Hi, my name is  
21 Katrina Christiansen.

22 Eric was my older brother.

23 I am also a doctoral student in public  
24 health, so I'm gonna bring out some public-health  
25 information tonight so we have some context for the

1 discussion.

2           There are 12 billion people in America using  
3 pain killers, non-medically.

4           "12 billion people, non-medically."

5           A hundred people die every day from an  
6 overdose.

7           In 2008, there were 36,000 deaths, and most  
8 of those deaths, those overdose deaths, were from  
9 prescription drugs, the majority of which, of  
10 course, are pain killers.

11           We have an idea of drug dealers or drug use  
12 as a kind of shadowy organization, a shadowy  
13 activity, but less than 5 percent of the pain  
14 killers that people use or abuse come from drug  
15 dealers or strangers.

16           The vast, vast majority of the pain killers  
17 that people are using, abusing, and dying from come  
18 from friends, relatives, and legitimate  
19 prescriptions.

20           It is overwhelmingly an issue of diversion  
21 from legitimate prescriptions, which, to echo my  
22 mother's point and Steve's point, is why we have to  
23 deal with the vast quantities of opioid analgesics  
24 that are being distributed to patients without,  
25 often, their knowing, and certainly without people

1 understanding, the risks associated with taking.

2 The doctors aren't trained on the risks  
3 associated with opioids; and, so, patients certainly  
4 aren't aware of the risks.

5 One last fact: We've had a four-hundredfold  
6 increase in the sale of opioid pain killers in the  
7 last 15 years, and so my question is:

8 Are we in four times more pain?

9 Are we four times better off?

10 Do we have -- are we four times less disabled  
11 now that we have four times the increase in  
12 prescription pain-killer use?

13 Chronic pain is real, and people deserve to  
14 get relief, but the pain killers that people are  
15 taking are, by and large, inappropriate.

16 And, so, I am really excited about tonight,  
17 and about all the people here.

18 And I'm very thankful to the Senators,  
19 because it needs to be culture, it needs to be  
20 policy, it needs to be law enforcement. It's a  
21 multi-pronged effort.

22 So, thank you.

23 [Applause.]

24 SENATOR BALL: We were just joined, I saw:  
25 Superintendent Manko.

1 Councilman Terrence Murphy;

2 As well as, Hugh Fox, who chairs my  
3 Public Safety Advisory Council, and is with  
4 Westchester County, who's gonna be joining us up  
5 here.

6 So, I -- just-- to follow up on the  
7 deliverables, there are two things that came out  
8 just from that:

9 Number one is, the insurance-coverage issue;

10 Number two, docs, you know, prescribing  
11 opiates, and how to deal with that.

12 So we're keeping track, and we'll continue to  
13 follow up.

14 Can we go to the right, and around the room  
15 now, would that be okay, and just introduce  
16 yourself?

17 The Pope of Putnam County, right,  
18 Peter Convery.

19 UNDERSHERIFF PETER CONVERY: Good evening.

20 I'm Undersheriff Peter Convery, representing  
21 Sheriff Don Smith who will be en route.

22 And I just want to thank all of our  
23 law-enforcement partners here.

24 And it is a crisis. Law enforcement  
25 addressed that.

1           And Putnam County Sheriff's Office, this past  
2 week, every deputy sheriff investigator's been  
3 trained in Narcan.

4           So we're prepared right now.

5           We're making arrangements to purchase the  
6 Narcan and have it issued to our deputies.

7           Now, that's one case that we're looking on  
8 the law-enforcement side.

9           But what you're talking about, it's an issue.

10          Putnam County Jail is the mental-health  
11 hospital of Putnam County.

12          If you have a crisis, you're better off if  
13 somebody in your family gets arrested, because if  
14 they come through our jail, they're gonna get help.

15          I think what you're finding out here, you're  
16 not getting that in the hospital because the  
17 insurance companies aren't working with it.

18          And the other aspect, we're product -- the  
19 product that we have with heroin, we have the good  
20 doctor here from Albany Medical who's gonna tell  
21 you, we've been very vigilant on the barbiturates  
22 prosecution.

23          Right now, Oxycontin is very hard to get.  
24 It's very, very expensive.

25          We have Prescription Drug-Back days.

1           We have one this Saturday at Putnam Hospital,  
2           where people cleaning out their medicine cabinets,  
3           they're turning in. People are cognizant of that.

4           But what is done now, heroin is the drug of  
5           choice. It's very inexpensive, and for what reason,  
6           they've turned to heroin. And it's an epidemic.

7           It's in Washington County. It's throughout  
8           the state of New York.

9           So, we really have to come together,  
10          everyone, and put pressure on, and find out why  
11          middle-class people are shooting heroin.

12          And on the law-enforcement side, we're gonna  
13          continue to stay vigilant. We're making arrests,  
14          we're following up every day, but the community has  
15          to help.

16          And I think that's something that's -- I have  
17          to thank you, Senator, tonight, to bring us all  
18          together for this.

19                           [Applause.]

20          DR. MICHAEL DAILY: Senator, thanks for  
21          allowing me to come down and join you here today.

22          My name's Michael Daily. I'm an emergency  
23          physician up in Albany.

24          I have a lot of paper in front of me that  
25          I have put a lot of lines through, and I'm not going

1 read, I promise.

2 But, I think that --

3 [Applause.]

4 [Laughter.]

5 DR. MICHAEL DAILY: I think it's important to  
6 recognize all of these prongs, because this is a  
7 problem that goes across all of society right now,  
8 and hits us in the emergency department, both coming  
9 and going.

10 Very frequently, physicians are the sources  
11 of these original prescriptions, as the  
12 Christiansens said so eloquently.

13 We need to watch our prescribing practices  
14 and consider how that should be done safely,  
15 because, really, these medicines are good medicines  
16 if used well and used prudently.

17 SENATOR BALL: Are there guidelines for the  
18 doctors that they have to abide by?

19 DR. MICHAEL DAILY: There are.

20 The I-STOP program provides some guidelines.

21 But among the things that we're using now,  
22 and training our residents in doing, for example,  
23 is, write for 11 pills, write for 21 pills; write  
24 for something that's a reasonable small amount of  
25 medicine.

1           And if you think someone is going to need a  
2           lot of medicine for a longer period of time, give  
3           them a refill of a smaller amount, and have them go  
4           and get that refill when they make the choice.

5           I was at a law-enforcement conference,  
6           talking about the opioid problem. And a very  
7           high-ranking law-enforcement official stood up and  
8           said:

9           "I'm a cop. I got shoulder surgery. My  
10          doctor knew it was potentially gonna hurt me, and  
11          wrote me for 75 Percocet. I took one. I didn't  
12          like the way made me feel. I left it in my medicine  
13          cabinet.

14          "My wife's a cop. She had knee surgery. She  
15          took one of the 75 Percocet that her doctor  
16          prescribed to her, and left the rest in her medicine  
17          cabinet.

18          "We've got 148 Percocet in our medicine  
19          cabinet right now, and we have teenagers in the  
20          house. We may be cops, but we're not exempt from  
21          this disaster."

22          I'd like to point out, up in our area, there  
23          is only one constant take-back zone, which is the  
24          lobby of the Troop G Headquarters in Colonie,  
25          New York.

1           That's the only place where, every day, you  
2           could drop off your meds.

3           Among the things that we need to do, is come  
4           up with a good way for people to give back the drugs  
5           they don't want before they get diverted into the  
6           hands of our children.

7           The idea of Narcan programs is profoundly  
8           important.

9           Law enforcement is one location.

10          They can be very, very usefully implemented.

11          We need to watch this, and make sure that  
12          these programs are successful as possible.

13          And we need to continue altering our  
14          prescribing practices, to make sure that we are  
15          contributing to good health care without  
16          contributing to additional problems.

17          SENATOR BOYLE: Thank you, Doc.

18          DR. MICHAEL DAILY: Thank you.

19          SENATOR BALL: Thank you.

20                    [Applause.]

21          BILL MATTHEWS: Hello, I'm Bill Matthews.

22          I am a physician assistant with the Harm Reduction  
23          Coalition in New York City.

24          We work with the New York State Department of  
25          Health to promote their opioid overdose-prevention

1 program.

2           What that is, is that it's a way of putting  
3 the same drug that's carried by ambulances, when  
4 they respond to an overdose, that same drug called  
5 "naloxone," or known by its old brand name,  
6 "Narcan," can be given out in a blue bag, like this,  
7 to anyone who might be around when an opioid  
8 overdose occurs.

9           And you can spray this medicine up someone's  
10 nose, and save their life in minutes.

11           Too often, the ambulance doesn't get there  
12 fast enough, and there are many cases in which the  
13 ambulance's never called at all, because of fear of  
14 the police coming, and all the circumstances around  
15 that.

16           I'm gonna be talking to you more later, a  
17 little bit longer, demonstrating some of this.

18           And then, when this event is over, I'm going  
19 to do a short training, though it won't be as short  
20 as I wish because so many of you are here, that, to  
21 hand out these kits, so if anyone who wants to have  
22 a kit can walk out of here with one.

23           We have 100 kits with us today.

24           SENATOR BALL: Thank you.

25           So, guys, this is what we're gonna do, if we

1 can -- because -- limit the applause, unless I'm  
2 speaking, and then feel free to applaud, so we can  
3 we can get around the room.

4 [Laughter.]

5 SENATOR BALL: I wasn't kidding there, it  
6 wasn't a joke. Mr. Piazza can tell you that.

7 No, I was kidding.

8 But, if we can get around the room quick,  
9 just say who you are and where you're from, and then  
10 we'll get into a good conversation; because,  
11 otherwise, we're gonna be here all night. And I'm  
12 not gonna -- you know, we gotta get down to the  
13 dirty details.

14 Okay?

15 Okay, who you are and where you're from.

16 AMY SUCICH: Amy Sucich, and I'm the  
17 assistant clinical director at  
18 St. Christopher's Inn.

19 FRANK PELLIGRINO: How you doing?

20 I'm Frank Pelligrino. I'm a social worker  
21 and substance-abuse counselor at  
22 St. Christopher's Inn.

23 JOE DONAT: Hi, I'm Joe Donat,  
24 Deputy District Director for  
25 Congressman Sean Patrick Maloney.

1                   GINNY NACERINO: Good evening. I'm  
2                   Ginny Nacerino, Putnam County Legislator,  
3                   District 4.

4                   DR. MICHAEL NESHEIWAT: Michael Nesheiwat,  
5                   private-practice physician, Chief Coroner of the  
6                   County, and medical director of the Putnam County  
7                   Correctional Facility.

8                   SENATOR BALL: Also has the crazy  
9                   responsibility of being my personal physician, so...

10                   [Laughter.]

11                   CARL ALBANO: I'm Carl Albano. I'm the  
12                   Chairman of the Putnam County Legislature.

13                   Senators, thank you for this much-needed  
14                   forum.

15                   I just would like to make one comment. I may  
16                   not stay the whole meeting.

17                   To me, if you had to pass legislation,  
18                   I would actually limit or prohibit prescriptions to  
19                   children under a certain age.

20                   They've all survived in the past.

21                   You may pick an age of 21, 22, whatever it  
22                   may be.

23                   The world has survived without this in the  
24                   past.

25                   There's Motrin, there's other things; they'll

1 move on.

2 That would be a clear way to really have a  
3 serious effect on the young, and that's who's --  
4 that's where it starts.

5 Thank you.

6 KEVIN WRIGHT: I'm Kevin Wright, the retired  
7 district attorney of Putnam County and  
8 Mahopac County Legislator.

9 And, I prosecuted my first narcotics case  
10 39 years ago, and we're still losing the battle.

11 ANDREW FALK: I'm Andrew Falk. I'm a local  
12 political candidate; but more importantly, I'm the  
13 father of a 10-year-old and a 6-year-old.

14 And when I left -- when I dropped off my son  
15 this morning, Senator, at the bus stop, and he asked  
16 if he would see me tonight, I said: No. We have a  
17 heroin problem in Putnam County, and I'm gonna go,  
18 Senator Ball's having a roundtable.

19 And I asked him: Do you know what heroin is?

20 And he said: Yes.

21 He takes the D.A.R.E. program.

22 And I hate the fact that my son who's turning  
23 11 next week, I have to ask him if he knows what  
24 heroin is.

25 But, we can't pretend that it's not here, and

1 it is here.

2 And I'm glad everybody -- you know, I would  
3 just ask, if I don't say anything else tonight, we  
4 have to talk about it, because if we pretend that  
5 we're in Putnam County and our kids are good kids,  
6 it's gonna overtake us.

7 And thank you for having this forum tonight.

8 SENATOR BALL: Thank you.

9 SHERRY GOVER: Hi. My name is Sherry Gover.  
10 I'm from the Dutchess County Department of Community  
11 and Family Services.

12 But more importantly, I lost my son to an  
13 opiate overdose. And I -- he had had a rotor cuff  
14 surgery, became addicted to opiates, and died from  
15 an overdose five years ago.

16 GINGER DOULOS: My name is Ginger Doulos.

17 I'm a -- from Dutchess County. I'm a  
18 substance-abuse counselor, New York State-licensed  
19 mental-health counselor.

20 I also facilitate a bereavement group called  
21 "GRASP" (Grief Recovery After A Substance Passing).

22 And I also lost a son as a result of heroin  
23 addiction.

24 ELAINE PAWLOWSKI: My name's  
25 Elaine Pawlowski. I'm from South Salem.

1 I'm here as a parent, and I'm also here as a  
2 volunteer for Shatterproof, which is the first  
3 national organization that's set up like the  
4 American Cancer Society.

5 We are trying to get the information out  
6 there as an organization that large, so that the  
7 stigma is reduced, and that treatment facilities are  
8 held accountable for the treatment that they give to  
9 patients;

10 Laws are changed and advocated throughout the  
11 United States for 911 laws and naloxone laws;

12 And, also, that physicians and insurance  
13 companies do pay for evidence-based treatment.

14 Not old treatment, not AA treatment, that is  
15 dated, but treatment that is research-based.

16 So, I do have some materials out there, and  
17 I can talk a little bit later.

18 JACK MACK: Hi, my name is Jack Mack. I'm  
19 from Croton-On-Hudson.

20 Like Elaine, I lost my son Casey [ph.] to a  
21 heroin overdose a year and a half ago.

22 And, someone talked about jail being a -- an  
23 alternative for treatment.

24 New York State prison system is the largest  
25 drug-treatment provider in the state.

1           I worked at -- in the state prison system for  
2           8 years, and it's not a good place for rehab, so  
3           don't go that route.

4           Thank you.

5           [Applause.]

6           JOANNE BIAGGI: I'm Joanna Biaggi. I'm a  
7           guidance counselor at Brewster Central Schools.

8           SENATOR BALL: Thank you for being here.

9           BOB COHEN: I'm Bob Cohen. I'm a parent from  
10          Ossining, and a youth leader in my church.

11          Also, a recovering heroin addict, 26 years.  
12          AA saved my life.

13          [Applause.]

14          MEGHAN FIALKOFF: My name is Meghan Fialkoff.  
15          I'm the northeast executive director for  
16          Foundation For A Drug-Free World.

17          We're the largest nonprofit drug-education  
18          program in the world, and we provide a free  
19          curriculum to schools and after-school programs.

20          And I'm just gonna show four of the booklets,  
21          because I know I have very limited time.

22          We have prescription-drug abuse booklets,  
23          heroin booklets, pain killers booklets, and drug  
24          booklets. And these are for free.

25          So if any school, you want to have a

1 statewide distribution of any of those booklets or  
2 statewide curriculum, that is for free. The schools  
3 only have to pay for postage.

4 We can provide free materials tonight.

5 And, we have portfolios for anyone who wants  
6 information as well.

7 DAPHNE OLSON: Hi, I'm Daphne Olson. I'm a  
8 local.

9 And, I lost a sister to heroin abuse. And a  
10 brother -- my brother's family was ruined due to  
11 that.

12 And drug-prevention education has been a big  
13 part of my life for about the last 45 years, because  
14 heroin is not new.

15 My sister was a heroin addict in 1955.

16 So, I work with Meghan. I'm the director for  
17 the Hudson Valley.

18 She's my boss.

19 And --

20 [Laughter.]

21 DAPHNE OLSON: And I believe I've found  
22 something that works.

23 DAVID TIDMAN: My name is David Tidman.

24 I work with Meghan Fialkoff, with the  
25 Foundation For A Drug Free-World.

1 I'm the main speaker for the schools,  
2 YMCAs, and police explorer groups in five-boroughs  
3 area, and we give free drug-education presentations  
4 and lectures on a daily basis throughout the  
5 boroughs area.

6 We have a bit of a change to the  
7 "Just Say No" motto, where we changed that word  
8 "N-O" to "K-N-O-W."

9 Because we focus on the fact that education,  
10 preemptively, is probably the best cure for the  
11 problems we're trying to deal with.

12 DANIELLE SULLIVAN: Good evening.

13 My name is Danielle Sullivan. I'm an  
14 assistant principal at Brewster High School.

15 LORRAINE BIXLER: I'm Lorraine Bixler, in  
16 recovery as well, and in the process of getting  
17 certified for treatment -- drug treatment.

18 JOHN REGAN: Hi, everyone.

19 My name is John Regan, from Genesis House  
20 Addiction Treatment Center.

21 I work in New Jersey, Pennsylvania, New York,  
22 Connecticut, and Delaware.

23 If anyone here is looking for treatment for a  
24 loved one, because I work in all the states, a lot  
25 of insurance companies are tough, I will find help

1 for one of your loved ones.

2 So, if you do have someone that's in need of  
3 help, please see me after the roundtable, and I'll  
4 make sure, even if they have no money, I'll find a  
5 state-run program somewhere.

6 Thank you.

7 [Applause.]

8 SENATOR BALL: Thank you.

9 When we talk a little bit on the treatment  
10 side, I want you to dig into your experiences with  
11 dealing with the insurance companies.

12 Okay?

13 JOHN REGAN: Okay.

14 DON WILLIAMS: Senator Ball, thank you for  
15 this chance to be here tonight, and distinguished  
16 guests, and everybody else.

17 My name is Don Williams. I'm an addict and  
18 an alcoholic in recovery, in a program written so  
19 simply even I can do it.

20 You know, I spent about 15 years in prison  
21 myself before I found a simple way to -- a simple  
22 way of life that is all about getting the message  
23 out, and I think we talked about it earlier.

24 And I just recently, with Elaine, spoke at my  
25 high school right here in Carmel, to the ninth-grade

1 students, to try to get the message out.

2 What my job to do is, to sponsor people that  
3 come through this program, on their first day and on  
4 their last day.

5 It's a 12-step program that's just the  
6 greatest gift in the world that I've ever received.

7 I had a 45-year drug addiction, and I lost my  
8 only brother in 1977 to opioids.

9 You know, I think prevention starts with our  
10 young.

11 You know, it's in Carmel High School, so it's  
12 probably in the middle schools and grade schools,  
13 too.

14 And I just hope I get another chance to speak  
15 at another school one day, you know.

16 I also speak at the Putnam County Jail once a  
17 month.

18 Since being a prisoner myself, and a convict  
19 for most of my life, and I turned over a new leaf  
20 seven years ago. And the greatest gift in the world  
21 I could give is just to give back what was so freely  
22 given to me.

23 Thank you, Senator.

24 SENATOR BALL: Thank you for being here and  
25 sharing your experience.

1 [Applause.]

2 DOROTHY PETRIE: Hi, my name is  
3 Dorothy Petrie. I'm a nurse. I'm from  
4 Upstate New York.

5 And I work for a company,  
6 Cadence Pharmaceuticals, that makes a product, a  
7 non-opioid pain medication, that allows patients who  
8 are having surgery to significantly reduce how much  
9 opioids they use during surgery. And in some cases,  
10 for recovering addicts.

11 They can go through surgery with no opioids  
12 whatsoever, and manage their pain better.

13 CONNIE HUSSEY: Hi, I'm Connie Hussey.

14 And I have a family member who is recovering  
15 from an opioid addiction, that also started with  
16 back pain.

17 We moved to Putnam County, thinking that this  
18 wouldn't happen.

19 It didn't happen in lower Westchester. It  
20 didn't happen in the city.

21 It happened right here in the sleepy little  
22 town.

23 MIKE PIAZZA: I'm Mike Piazza. I'm  
24 Commissioner of Putnam County departments of Mental  
25 Health, Social Services, and the Youth Bureau.

1           NORA TOVITSKI [ph.]: Hi, everybody.  
2           My name is Nora Tavitski [ph.]. I'm a social  
3 worker --  
4           Can you hear me okay?  
5           Doesn't sound like it's going over.  
6           Okay.  
7           -- the director of community services for  
8 Arms Acres, right up the road, which is inpatient  
9 and outpatient services for adolescents and adults.  
10          I've been in the field for over 25 years.  
11          I have to say, I could talk about any topic  
12 all day and all night with you, but the one that's  
13 on my mind is -- right now is about the insurance  
14 companies.  
15          Day in and day out, we are fighting with  
16 insurance companies, not just to get people in  
17 treatment, but to keep these people alive: our loved  
18 ones and our families and our friends.  
19          And I can't tell you how upsetting it is that  
20 they get refused.  
21          They're going against the parity laws, and  
22 our folks have to sit in waiting rooms for three,  
23 four, or five, six hours, waiting for an answer, and  
24 often that answer is no.  
25          We need your help.

1 I'm here to help.

2 SENATOR BALL: What we're going to do is, if  
3 everybody doesn't mind, is we're gonna jump right  
4 into that conversation first, and then we'll go to  
5 the others.

6 KRISTIN McCONNELL: Good evening.

7 I'm Kristin McConnell. I'm the director of  
8 the National Council on Alcoholism and Drug  
9 Dependence of Putnam County.

10 We're a licensed prevention provider from the  
11 New York State Office of Alcoholism and Substance  
12 Abuse Services.

13 ALONZO WEST: Good evening.

14 I'm Alonzo West, president of Westchester  
15 Corrections Officers' Benevolent Association. And,  
16 also, an executive board member of Lexington Center  
17 For Recovery.

18 KEITH FENNELLY: Chief Keith Fennelly,  
19 retired, Westchester County Career Fire Chiefs  
20 Association.

21 BUCK HELLER: Hi, I'm Buck Heller,  
22 executive vice president of Peers Influence Peers  
23 Partnership.

24 And this year we've produced a documentary,  
25 which we would hope everyone can see.

1                   STEPHEN VELICHKO: Hello, my name is  
2                   Stephen Velichko. I'm the vice president with  
3                   Peers Partnership.

4                   And I had the opportunity to conduct a lot of  
5                   these interviews in our documentary this year, and  
6                   have seen a lot of the destruction that heroin has  
7                   caused, not only to those who are addicted, but to  
8                   their loved ones, as well.

9                   FRANK REALE: Good evening, everybody.

10                  My name is Frank Reale, and I'm the president  
11                  of Peers Influence Peers Partnership.

12                  I would like thank Senator Ball for arranging  
13                  for the opportunity for our sharing our documentary  
14                  film, "Chasing It," with all the school districts in  
15                  the State Senate District 40.

16                  So, appreciate that, Senator Ball.

17                  SENATOR BALL: Thank you.

18                  And we will continue to follow up, using  
19                  funding from the State, to the extent possible, to  
20                  the school districts that are interested, to get  
21                  that documentary out.

22                  For the people that have not seen that  
23                  documentary, and I say that to my colleagues as  
24                  well, you should take a moment to take a look at it.  
25                  It's extremely compelling, and I think it would be

1 extremely effective to get this into our schools.

2 So, if I'm in Senate 40, I'm here to help,  
3 just let me know, to the superintendents and  
4 principals and guidance counselors that are here  
5 today.

6 FRAN McCARTHY: I'm Fran McCarthy. I'm an  
7 EMT volunteer with the Carmel Volunteer Ambulance  
8 Corps, and the Lake Carmel Fire Department. And,  
9 I'm a retired nurse from Putnam Hospital Center.

10 MAUREEN GUIDO: Maureen Guido, and I am a  
11 35-year member of Carmel Volunteer Ambulance Corps.  
12 I'm an EMT.

13 And, this is a great, great opportunity to  
14 get us all together and fight this problem.

15 Thank you.

16 MIKE NATTLE [ph.]: Good evening. I'm  
17 Mike Nattle [ph.], with the Town of [unintelligible]  
18 Police Department. I'm a detective sergeant with  
19 them.

20 CAPTAIN ROBERT WILLIS: I'm Captain  
21 Robert Willis from the New York State Police,  
22 Troop K.

23 Thank you, Senator Ball, for inviting us here  
24 this evening.

25

1           ROBERT TENDY: Robert Tendy. I'm the  
2 supervisor of the Town of Putnam Valley.

3           SAM OLIVERIO: Sam Oliverio, Putnam County  
4 Legislator, District Number 2.

5           Also, the chairman of the health committee in  
6 Putnam County, and an assistant principal at  
7 Putnam Valley High School.

8           TOM MANKO: Tom Manko, Superintendent,  
9 Mahopac Central School.

10           Senator Ball, continue to do the work that  
11 you're doing, 'cause we need this kind of exposure,  
12 and bring all of our resources together.

13           Thank you.

14           SENATOR BALL: Thank you, sir.

15           Once, again, a pleasure to work with you.

16           SENATOR BALL: Just, very quickly, we have  
17 Councilman Terrence Murphy.

18           If you want to [unintelligible], and then  
19 Hugh Fox.

20           TERRENCE MURPHY: Sure.

21           First off, Terrence Murphy,  
22 Dr. Terrace Murphy. I'm a councilman in the town  
23 of Yorktown.

24           Very briefly, I refused to pass our budget in  
25 the town of Yorktown unless we developed a narcotics

1 unit to address this serious issue in northern  
2 Westchester, and Putnam County right here.

3 And it's about time we took our heads out of  
4 sand and address this head-on, and we'll continue to  
5 do it.

6 And thank you, Senator Ball, for holding it.

7 [Applause.]

8 HUGH FOX: Hugh Fox, former firefighter in  
9 the city of Yonkers for 32 years.

10 I chair the Senator's Public Safety and  
11 Fire Safety Advisory Board.

12 We've had a roundtable before on many issues  
13 with the Senator.

14 But, it's amazing to look around this room  
15 and see everybody, that this isn't one segment or  
16 one area of a problem, but it affects all of us; all  
17 of us, and many more.

18 So, Senator, it's a -- it's so damned good  
19 that you put this together, because we need this.

20 SENATOR BALL: Thank you.

21 [Applause.]

22 SENATOR BOYLE: So what we'll do now, and  
23 just for those of you who -- I see many important  
24 officials and family members in the audience.

25 Just because you're in the audience doesn't

1 mean you're off the hook.

2 Please engage in this conversation, and we'll  
3 moderate it to the extent that we possibly can.

4 I don't think I have to say this at this  
5 event, but I always say it: All of our  
6 conversations are based upon mutual respect.

7 That's it.

8 We don't fight, we don't bicker, we don't  
9 overtalk each other. Mutual respect; one person  
10 talks at a time.

11 If you want to yell at anybody, yell at me.  
12 That's what I'm here for.

13 [Laughter.]

14 SENATOR BOYLE: But, I don't think I have to  
15 say it in this crowd, but let me put that out there.

16 We have folks, Amy and Frank, who are going  
17 to speak specifically on the insurance issue.

18 Then we'll bring that up to anybody else  
19 who's interested in talking about that.

20 And they're with St. Christopher's Inn in  
21 Garrison, New York.

22 Amy.

23 AMY SUCICH: Thank you.

24 Yeah, uh, all clinicians are spending a lot  
25 of time, trying to get visits for our young opiate

1       addicts, and, those visits are being denied.

2                If they're granted visits, they're certainly  
3       not at a level that's therapeutically beneficial.

4                So they get a couple of days, three days, and  
5       then they have to reauthorize the visits.

6                Inordinates amounts of time.

7                And, you know, these young people get, maybe,  
8       a total of 12 visits, you know, to deal with this  
9       problem.

10               We're lucky. We have the ability to treat  
11       them five days a week, even though they're only  
12       supposed -- we get, you know, reimbursed for  
13       three days a week, we treat them for five days a  
14       week because of the nature of our program.

15               The men live in our shelter, and they attend  
16       treatment in our day rehab program.

17               So, you know, we have the ability to do that.

18               However, this problem is going to get a lot  
19       worse.

20               Next year, all of Medicaid will be managed  
21       care, and, with the managed care, this is gonna be  
22       the same kind of difficulty.

23               Those visits are gonna be doled out very,  
24       very skimpily.

25               And, you know, we're not sure what we're

1 gonna be able to do with that.

2 Our reimbursement rates are dropping  
3 dramatically. We've lost -- 13 percent, our  
4 reimbursement rates have gone down over the last  
5 4 years. That money continues to drop.

6 If, you know, reimbursement rates go down, it  
7 affects our budget, which affects the programs we  
8 could offer the people who come to us.

9 We have 174 men living with us.

10 We have tried to put together a crisis  
11 respite program, a crisis respite center.

12 We were told to put together this proposal,  
13 and we did that.

14 The proposal, however, was denied by the  
15 Office of Mental Health. They want to use that  
16 money in other ways.

17 We have, you know, parents and family members  
18 calling us daily.

19 I get these phone calls, my boss gets these  
20 phone calls, Nora gets these phone calls: People  
21 crying; they don't know what to do with their  
22 children.

23 And when the insurance is being denied, we  
24 want to provide a short-time safe place for them to  
25 be off the street.

1           We have a space available, we have a  
2           proposal, and we can't get the funding to put, you  
3           know, the proposal intact.

4           So, you know, this is of crisis proportion.

5           I know there have been 78 deaths in  
6           Lower Hudson Valley last year.

7           There were six just in Putnam in the past  
8           year, I'm being told.

9           And, you know, rates are dropping, and  
10          insurance are cutting visits.

11          SENATOR BALL: So can you -- can you step me  
12          through -- say I have a son or a daughter, find out  
13          that they're addicted, and -- you know, and they're  
14          in a really tough spot.

15          Can you step me through how they would find  
16          their way towards your -- if I come to your door,  
17          what is our battle gonna be to get that kid  
18          treatment right now?

19          AMY SUCICH: They have to go into our  
20          admissions department, and the first thing that has  
21          to happen -- and like I said, we're lucky, we're a  
22          shelter.

23          SENATOR BALL: First, can a parent actually  
24          force their kid to go?

25          AMY SUCICH: A parent can't force the child

1 to go -- their young adult to go.

2 We're an adult program, so they have to be  
3 18. We need to speak to the adult.

4 SENATOR BALL: If you have a kid that's  
5 addicted, who's doing heroin, and you want to get  
6 him treatment --

7 AMY SUCICH: Yep.

8 SENATOR BALL: -- short of being dead or  
9 going to jail, how do you get him into a facility,  
10 right now?

11 AMY SUCICH: You know, you bring -- you --  
12 there has to be a bed, first of all. And we're  
13 running at a -- you know, there's waits for beds all  
14 the time. And 174 beds, we have waits for beds all  
15 the time. We run it a week or two waitlist.

16 So we have, right now, 174 beds and 4 cots  
17 out.

18 SENATOR BALL: So a week or two.

19 So your kid, near overdose, whatever it is,  
20 you catch them, what do you do in those two weeks?

21 Chain your kid to the --

22 AMY SUCICH: As I'm saying -- well, that's  
23 why we're trying to provide this respite service,  
24 with some beds, so kids who are in crisis can come  
25 in --

1           SENATOR BALL: So, but what's the safety net?  
2           And I'm not badgering to badger.

3           It's important to understand: So what's the  
4           safety net during that two-week period, after you  
5           realize that your kid is chronically addicted to  
6           heroin and is about to kill himself?

7           AMY SUCICH: Right, and that's why you --

8           SENATOR BALL: Where's New York State come  
9           in?

10          AMY SUCICH: If the kid is about to -- if the  
11          kid is about to kill himself, he needs to be in a --  
12          you know, a psych unit.

13          SENATOR BALL: I don't mean kill himself.

14          I don't mean, literally, kill himself by  
15          overdosing --

16          AMY SUCICH: That's exactly why we need  
17          respite. We need safe places, to get kids off the  
18          street, to get kids out of houses, where there is a  
19          safe place where they can be before -- it's not --

20          SENATOR BALL: You still have to volunteer to  
21          do that; right?

22          AMY SUCICH: Excuse -- well, they have to  
23          volunteer.

24          We have a lot of kids who we call are our  
25          "mom-dated" or "dad-dated," so they're not really

1 voluntary. You know, they come in because they have  
2 no place else to go.

3 Mom says you can't live in the house anymore  
4 unless you go into treatment, so they'll come into  
5 treatment.

6 SENATOR BALL: Yeah.

7 ELAINE PAWLOWSKI: Could you interrupt for a  
8 minute?

9 AMY SUCICH: Sure.

10 ELAINE PAWLOWSKI: If you have a good  
11 relationship with your child --

12 SENATOR BALL: Can you speak into the  
13 microphone.

14 ELAINE PAWLOWSKI: If you have developed a  
15 good relationship with your child, the first thing  
16 you should do, is when you go to the hospital, you  
17 can sign a medical-waiver form.

18 So even when they're 18, or 17, as a parent,  
19 and because your son has signed that form in front  
20 of the hospital, or in front of medical staff, or  
21 it's been notarized, or whatever, you can have  
22 access to all their medical records. You can also  
23 work with them through the system.

24 I've done this with my son from day one, when  
25 they turn 14 or 15, just because you never know.

1           They may be somewhere else, they may be --  
2           they may have drank something, you just don't know,  
3           so someone has to step in.

4           So when you still have a good relationship  
5           with your child, get all those papers signed, and  
6           keep them signed.

7           AMY SUCICH: Excellent idea.

8           ELAINE PAWLOWSKI: So that when you go to the  
9           hospital, you can say: I'm their mother.  
10          I understand they're 17, or 18, they don't want to  
11          be here. We've worked together. You know, they may  
12          be heroin -- on heroin right now so that they're not  
13          very livid.

14          And, you have much more power that way.

15          AMY SUCICH: Right.

16          ELAINE PAWLOWSKI: And then they also know --  
17          that the facility knows that the parents and the  
18          child are working together.

19          That's like the number one thing that any  
20          parent can do.

21          Sorry to interrupt.

22          SENATOR BALL: No, that's good. That's what  
23          we need.

24          Nora, you can speak a little bit to the  
25          process to actually get an insurance to cover once

1       they come to your door?

2               What do the parents have to do?

3               NORA TOVITSKI [ph.]: Okay, so, somebody  
4       wants to -- treatment, they come to Arms Acres.  
5       They've -- I've made the phone call.

6               Most insurance companies now --

7               And I'm gonna add -- ask, anybody who wants  
8       to add to this process, who knows this, Amy,  
9       anybody, please feel free to do so.

10              They come into Arms Acres. They're waiting  
11      in the waiting room.

12              Most insurance companies now are asking for,  
13      and require, what's called a "face-to-face."

14              So, Mary or Joe can be sitting in the waiting  
15      room, and now they're required a face-to-face, which  
16      means they have to meet with the nurse. The nurse  
17      does a thorough physical and an interview with the  
18      patient.

19              They call the insurance company, they give  
20      them the information.

21              The insurance company says: I'll get back to  
22      you.

23              So now they have to wait an hour or two or  
24      three. They might call back, and they may approve  
25      or deny.

1           What they're saying now is: Okay, well, you  
2           have -- which is against the law, basically -- you  
3           have failed -- you have not failed outpatient. You  
4           are -- you can do this on an ambulatory detox level.

5           Or, they'll just outright deny.

6           And then it may go to a doc-to-doc review.

7           And people are waiting, potentially, up to  
8           five or six hours, waiting for an answer from the  
9           insurance companies.

10           Only -- so it's very hard to tell a family:  
11           You know what? We want you, and we see the need for  
12           you to be here.

13           But, it's very difficult to tell a parent, or  
14           a husband or a wife, or an aunt or uncle, somebody,  
15           come packed, but we don't know if you're gonna be  
16           able to stay.

17           And I would like to mention that my colleague  
18           and good friend Dr. Roe [ph.] from our outpatient  
19           department is here. And I would like us to turn to  
20           him, for a second.

21           I'm putting him on the spot, but is there  
22           anything you would add to that Dr. Roe?

23           Can you grab a microphone, Doctor?

24           DR. ROE [ph.]: It's a great deal to add,  
25           but, one of problems is: If we do get somebody

1 admitted, we may get just a few days, where we just  
2 begin to scratch the surface, and then the ground is  
3 cut out from underneath the treatment system, so  
4 that we can't continue to treat patients who need  
5 longer-term treatment.

6 And that's one of the things that Arms Acres  
7 and St. Christopher's is capable of doing, is  
8 providing the length of treatment.

9 People are not gonna get over an opiate  
10 addiction in 5 days or 2 weeks, or even 28 days in  
11 many cases.

12 So this is the biggest issue with the  
13 insurance companies.

14 Even if they give us a paltry few days, they  
15 cut the ground out from underneath the treatment  
16 systems, and our patients.

17 NORA TOVITSKI [ph.]: The next step with that  
18 I would add --

19 [Applause.]

20 NORA TOVITSKI [ph.]: The next step I would  
21 add, is when they do refer someone to an outpatient  
22 level, sometimes they have to come two or  
23 three times a week.

24 The co-pays are astronomical. The families  
25 can't afford the co-pays, and I can't blame them.

1 They're like 30, 40, 50 dollars.

2 I'm working with a family today that wanted  
3 to come into treatment, who had a \$4,000 deductible.

4 It's unheard of.

5 MIKE PIAZZA: It's just the beginning.

6 NORA TOVITSKI [ph.]: I'd also like to refer  
7 also to Mike Piazza, because I know he has a lot to  
8 say on this, too.

9 MIKE PIAZZA: Thanks, Nora.

10 Senators, it's very important, too, that you  
11 recall, as Amy mentioned: If you are lucky enough  
12 to have fee-for-service Medicaid right now, you  
13 don't have those kinds of limits and those kinds of  
14 difficulties in getting into treatment, and even  
15 staying in a little longer.

16 But one of the concerns we have, is when we  
17 go through the Medicaid redesign, and go into the  
18 managed-care takeover, for our region it will be  
19 July 1st, next year, of 2015.

20 These issues that you're hearing about on  
21 private and third-party insurance are going to occur  
22 in the Medicaid population, as well.

23 And Amy mentioned the crisis respite.

24 Well, we put together this proposal for OMH,  
25 which really was trying to put a square peg into a

1 round hole, which is why OMH didn't -- rejected it.

2 They were looking more for an OMH -- an RCE  
3 (a Regional Center For Excellence) drawdown of the  
4 state psychiatric hospital beds.

5 But one of the advantages -- what we're  
6 talking about, what we're working on together,  
7 Arms Acres and Putnam Family Community Services, and  
8 St. Christopher's Inn, is a proposal that will take  
9 advantage of beds, that can -- that will be cheaper  
10 than a regular hospital bed, and will still serve  
11 the purposes.

12 As many of the parents are here tonight, when  
13 someone is ready for treatment, they're ready for  
14 treatment.

15 And if you hold them off for a -- five days  
16 or two weeks, they will get high during those  
17 five day or two weeks.

18 So, we want to be able to get them  
19 immediately into a safe place, which is the proposal  
20 that St. Christopher's started, and which was  
21 really picked up and shared with all of the  
22 providers in Putnam County.

23 JAIME McARDLE: My name is Jamie McArdle.

24 I have a 20-year-old addict son.

25 He is currently an addict --

1           SENATOR BALL: Ma'am, do you mind, just, in  
2 the microphone.

3           JAIME McARDLE: I have a 20-year-old son.  
4 He is currently an addict.

5           He was turned away at St. Christopher's.  
6 He was turned away from Lexington. He was turned  
7 away from Arms Acres.

8           Whether he has insurance or doesn't, he's  
9 turned away.

10          He is dually diagnosed, so there are not  
11 treatment centers for mental health and addiction.

12          My son is now on the street, currently on the  
13 street, because I cannot have him in the home with  
14 my twin 16-year-old daughters.

15          I don't know where he's staying, I don't even  
16 know if he's alive today, but he is in  
17 Putnam County, and he's got no place to go.

18          SENATOR BALL: So how do we solve -- I mean,  
19 literally, right now, and I -- you know, I ask for  
20 the professionals in the room, how do you solve that  
21 mom's problem?

22          DR. MICHAEL NESHEIWAT: Senator, if I could  
23 just say a few words?

24          SENATOR BALL: Doc.

25          DR. MICHAEL NESHEIWAT: I feel your pain, and

1 I understand where you're coming from, but I do have  
2 to say something, and it's called "tough love."

3 We are very fortunate people. We may or we  
4 may not be able to take care of our loved ones, and  
5 put them in an Arms Acres or in a facility.

6 But, unfortunately, working at the  
7 correctional facility, there's a lot of young adults  
8 that we love, that don't agree, and will not agree,  
9 with the parent, and the parent's frustrated.

10 I've had parents come to my office, crying to  
11 me, from, attorneys, doctors, plumbers, lawyers, law  
12 enforcement, concerned about their child, and they  
13 can't do a thing, just like you.

14 And let me tell you what happens: They are  
15 incarcerated.

16 They need to get money to pay for the drugs.  
17 They eventually will wind up with law enforcement,  
18 and wind up at the jail.

19 Some parents have had their child turned over  
20 to law enforcement. That's called "tough love."

21 They're incarcerated, and we put them in a  
22 detox program at the Putnam County Correctional  
23 Facility.

24 JAIME McARDLE: My son was in Putnam County  
25 Jail for three months. I had him arrested on

1 burglary charges.

2 DR. MICHAEL NESHEIWAT: And I understand  
3 that, and it's gotta be tough love to do that.

4 And --

5 JAIME McARDLE: The day he got out, he picked  
6 up again.

7 He was put on mental-health medication. And  
8 when he was released, he was not given refills,  
9 nowhere to go from there.

10 There is no referral system.

11 ELAINE PAWLOWSKI: You're absolutely right,  
12 that is a problem.

13 You can check with St. Vincent's. That's a  
14 dual-diagnosed.

15 You can check with Four Winds, that's a  
16 dual-diagnosed.

17 And Silver Hills is dual-diagnosed.

18 Now --

19 JAIME McARDLE: St. Vincent's, he was denied.

20 ELAINE PAWLOWSKI: Yeah.

21 Now, when you're -- this is the key crisis  
22 here: The criminal justice system is not a  
23 hospital.

24 SENATOR BALL: So before we move forward --  
25 ma'am, before we move forward on this:

1           Susie, can you make sure that you get her  
2 information? Maybe we follow up with her today, and  
3 do everything we can to help her.

4           ELAINE PAWLOWSKI: The criminal justice  
5 system -- there is a problem with society. The  
6 criminal justice system has to deal with medical  
7 issues.

8           These are medical issues that have fallen  
9 apart, because the health system in this country  
10 does not take care of their mentally ill, and does  
11 not take care of those with addiction problems or  
12 with substance-use disorder.

13           Now, when someone says that that's good, be  
14 tough love, let the criminal justice system deal  
15 with it, that's absolutely the wrong way to go.

16           [Applause.]

17           ELAINE PAWLOWSKI: They are not doctors, they  
18 are not lawyers. They are there for [inaudible].

19           [Applause.]

20           ELAINE PAWLOWSKI: We need to change the  
21 health system, the insurance system, and how people  
22 are treated, so that they are not treated with tough  
23 love. They are treated with compassion, and they  
24 are treated with care, just as if they had a heart  
25 condition or they had cancer.

1           There is no other excuse.

2                   [Applause.]

3           SENATOR BALL:  Let me just get in here for a  
4           second.

5           UNKNOWN SPEAKER:  Can I --

6           SENATOR BALL:  No, look, just let me just get  
7           in here for a second.

8                   I think that this is the -- I've been to, in  
9           8 years, probably 600 forums, debates, and public  
10          events.

11                  And I have watched events, where everybody  
12          gets heated, and has a conversation that should be  
13          on the Phil Donohue Show, but doesn't go anywhere.

14                  Now, we have a mom who has a son, who she  
15          doesn't know where he is.

16                  And whether it be the correctional facility,  
17          or the morgue, I don't know how she sleeps.

18                  Now, we can either have a conversation about  
19          how to solve that.

20                  And if it can't be solved, that's the  
21          problem, and then we have to get involved to figure  
22          out how to solve it.

23                  But to debate back and forth isn't gonna  
24          solve a damned thing.

25                  And I'm not gonna allow it to happen tonight.

1           So, I want people to speak specifically about  
2           how to help moms like that.

3           Does anybody -- okay.

4           CHARLOTTE YOUNG: My name is  
5           Charlotte Young --

6           SENATOR BALL: Please grab the mic.

7           CHARLOTTE YOUNG: Oh, sure.  
8           My name is Charlotte Young.

9           I do want to say that I thank the  
10          Putnam County Facility for saving my son's life. He  
11          even says it.

12          But, they also have to be wanting to get  
13          cured.

14          But, also, when they are let go from that  
15          facility, yes, parents have to be their backup, and  
16          they have to go to meetings, and get a group.

17          My son couldn't get Medicaid, he couldn't get  
18          any kind of medical help, when he was addicted.

19          I've gone through hell.

20          It costs the parents.

21          All these parents, financially, are probably  
22          stressed out.

23          I am one of the lucky ones so far so far.

24          My son has turned his life around. He is a  
25          productive member of society.

1                   And, I just wanted to thank the police force,  
2                   and he even said it, they saved his life.

3                   He would have been dead by Christmas. This  
4                   past Christmas.

5                   And that's all I want to say.

6                   Jail is not the answer.

7                   We do need health insurance for our children.

8                   And my son got addicted because he went  
9                   through cancer treatment, and then he got addicted,  
10                  and didn't tell me. So -- because there's a shame  
11                  to it. Okay?

12                  And I have a good relationship with my son,  
13                  and he never would tell me about it, until it was  
14                  too late.

15                  Okay?

16                  Thank you.

17                  FRANK PELLIGRINO: Excuse me, Senator?

18                  Over here.

19                  SENATOR BALL: Hey, please.

20                  FRANK PELLIGRINO: Again, I'm  
21                  Frank Pelligrino. I'm a counselor at  
22                  St. Christopher's Inn.

23                  And I really do feel for the woman who has a  
24                  sick son.

25                  And part of the frustration is that sometimes

1       there is nothing that anyone can do if the person  
2       themselves doesn't want help.

3               I myself am in recovery. I got sober when  
4       I was 21. I've been sober now 10 years, and I had  
5       the benefit of, at the time, the Medicaid system  
6       would give people access to treatment.

7               And part of the problem is, right now, the  
8       opiate epidemic specific, is the highest it's ever  
9       been, and there's more cutbacks now from insurance  
10      companies, from Medicaid, that are not allowing  
11      people to get the treatment they need.

12              I'm on the front lines, and, you know, I have  
13      to send in insurance reviews.

14              And when these insurance companies hear,  
15      after three days, that, you know, the client needs  
16      more treatment, they say: Well, he should be better  
17      by now.

18              And so they don't get it.

19              I mean, "90 days" seems to be the magic  
20      number.

21              If people can get treatment for 90 days that  
22      would be great, but we're struggling to get  
23      treatment for 5, 10, 15 days.

24              SENATOR BALL: So what I need, and I think  
25      what we need, and I -- is to, specifically, on that,

1 what should we do legislatively?

2 And I -- you know, we just fought a battle on  
3 the out-of-network issue. We had surprise medical  
4 billing. It's been a hell of a fight.

5 I had a constituent in my district that had a  
6 heart attack, and when they went out of network,  
7 which they didn't they think they did, they felt  
8 that they were entirely covered, and they got a  
9 surprise bill for \$100,000 and nearly had another  
10 heart attack.

11 And I know the fight it was to get that  
12 legislation done in this budget.

13 The insurance companies are very powerful.  
14 They have a very strong lobby. And it's going to be  
15 a hell of a fight.

16 But, we can get it done.

17 So, specifically, and you are on the front  
18 lines, and to the other organizations that are here:  
19 What needs to be done to deal with them, to make  
20 sure that that safe -- because three days is BS.

21 I mean, you can't get over an addiction to  
22 Pepsi-Cola in three days, you know.

23 FRANK PELLIGRINO: Yeah, and we have a  
24 shelter part of our program, and clients typically  
25 come in, before they even start treatment, they're

1       there for two weeks. And after two weeks, not much  
2       has changed. I mean, they're still shaking like a  
3       leaf after two weeks.

4                So, it's really -- it blows my mind how  
5       insurance companies can say, "Sorry, he should be  
6       better by now."

7                And just to note: Right now, there are  
8       State-run facilities that will take people with no  
9       coverage.

10               So if you are getting denied by other  
11       facilities, you can get in contact with OASAS. On  
12       their Web site, they have several State-run  
13       facilities that will take you with no coverage.

14               SENATOR BALL: I think, ma'am, you wanted  
15       to --

16               AUDIENCE MEMBER: I want to reiterate what  
17       this mother said: I have also dealt with trying to  
18       get into Arms Acres -- my son trying to get into  
19       Arms Acres, and trying to get into  
20       St. Christopher's.

21               Insurance: Seven years my son has battled  
22       addiction. Our health insurance guarantees 30 days  
23       of inpatient treatment every year.

24               In seven years, he's been granted six days of  
25       treatment. Okay?

1                   We have gone the route of him being so  
2                   desperate to get in, and not being able to go into  
3                   an emergency room, not being able to get into a  
4                   facility, that he has said: Well, I'm not suicidal,  
5                   I'm not gonna jump off a bridge, but if I go back  
6                   out on to the street today, there's a very good  
7                   chance that I'm gonna overdose, so let me go on to  
8                   the psychiatric ward.

9                   Again, the psychiatric ward will only be  
10                  approved for two days, and then he's sent to a  
11                  homeless shelter without the medication that he's  
12                  now been on for two days.

13                 Then the homeless shelter, he's on a list for  
14                 St. Christopher's, which is a three-week list.

15                 But, then, he gets denied by  
16                 St. Christopher's.

17                 And I'm not bashing St. Christopher's.  
18                 I mean, I know that they're doing everything that  
19                 they can do.

20                 But it gets denied by St. Christopher's  
21                 because of his psychiatric evaluation.

22                 The only reason he went on to the psychiatric  
23                 ward was because there was no place else to go.

24                 This is a disease.

25                 No family member would be expected to sit

1       there and tell their asthmatic loved one to just  
2       breathe more easily.

3               They would not be told to tell their loved  
4       one, you know, don't let those cancer cells divide,  
5       until there's time.

6               This is a disease, and we have to get the  
7       insurance companies to be responsible.

8               If somebody has benefits, they have to be  
9       allowed to use those benefits.

10              I was once crying in the Arms Acres office.

11              My son was homeless, transportationless, and  
12       insurance says: If he doesn't do outpatient first,  
13       then he can't go into inpatient.

14              The end of the story, is that this is what  
15       I have left of my son. These are his ashes. He  
16       died six weeks ago today from a drug overdose.

17              And this ravaged -- this disease ravaged his  
18       brain, and maybe he never would have beat it.

19              Just like, some people, no matter what  
20       facility they go to, can't beat cancer.

21              But I will always wonder: What if he could  
22       have gotten the treatment he needed?

23              So, there can't be lip service.

24              You have to keep asking those questions, and  
25       keep interrupting, and keep saying "What can we do?"

1           Because her son, my -- my son's battle's  
2           lost, but her son's isn't.

3           We have to keep fighting this.

4           [Applause.]

5           JACK MACK: With all due respect, we are the  
6           little people, and we're not gonna be able to craft  
7           legislation.

8           You're very clearly hearing -- you're very  
9           clearly hearing some of the heartbreaking stories.

10          I have a question for Amy.

11          I had heard that, with the implementation of  
12          the Affordable Care Act, there might be more parity  
13          for these mental-health and addiction issues, and  
14          that might be hopeful.

15          Is there anything to that?

16          AMY SUCICH: Supposed to be, but we haven't  
17          seen that actually being realized.

18          I mean, we just don't have -- we don't see  
19          that being realized with the insurance companies;  
20          not at all.

21          Somebody said that --

22          SENATOR BOYLE: If I could?

23          One of the issues that we've heard about:

24          And, obviously, Senator Ball's taken a  
25          leadership role on this, in terms of legislation,

1 mandating insurance coverage.

2 And Senator Kemp Hannon from Long Island has  
3 a similar legislation that we're working on.

4 Mandates are a little tough, especially on  
5 this level.

6 But one of things we've heard from other  
7 forums, and, please, let me know what you think, is  
8 that, when people are trying to get treatment for  
9 their loved ones, the insurance companies are  
10 saying: We're not gonna cover it because it's not  
11 medically necessary.

12 UNKNOWN SPEAKER: Right, right.

13 SENATOR BOYLE: And so what we're trying to  
14 do is have -- sit down, and I've talked to the  
15 insurance-company executives and health-care  
16 providers and treatment providers about getting on  
17 the same page.

18 Because I've talked to 11 different insurance  
19 companies, and they all have different definitions  
20 of "medically necessary."

21 UNKNOWN SPEAKER: Exactly.

22 SENATOR BOYLE: And the vast majority of  
23 them, no one can possibly make every one of the  
24 criteria.

25 So we want one uniform definition of

1 "medical necessity" for opiate addiction and  
2 treatment.

3 And I think that might be a big way to go in  
4 this in the coming weeks.

5 UNKNOWN SPEAKER: Yeah.

6 UNKNOWN SPEAKER: Sounds good.

7 [Applause.]

8 SENATOR CARLUCCI: If I can just jump in,  
9 again, I'm Senator David Carlucci. I chair the  
10 Mental Health Committee in the Senate.

11 Commissioner Piazza, you mentioned about  
12 Medicaid fee-for-service, and we are moving to  
13 managed care. And it's something that we've had  
14 tremendous issues, with the mental-health  
15 population, with people with developmental  
16 disabilities.

17 What are some of the concerns that you have,  
18 that you're saying it's working now, people are  
19 getting coverage?

20 What are some of the ways we can safeguard  
21 that as we move to managed care?

22 MIKE PIAZZA: Under Medicaid fee-for-service,  
23 at this point, there is much less restrictions on a  
24 person who is being covered with Medicaid  
25 fee-for-services.

1           If they meet the criteria for entry into  
2 Arms Acres or to St. Christopher's, or an outpatient  
3 program, or a mental-health unit, there's no one  
4 really looking over their shoulder. You're not  
5 getting the, three days and out, show me what the --  
6 you know, show me the progress.

7           When we go to managed care, in the  
8 managed-care plans now, the managed-care mental  
9 health -- the managed-care Medicaid plans now,  
10 you're treated the same way as, basically, the  
11 insurance that we have, or the Empire plan that we  
12 have; that they're gonna be checking every few days,  
13 you know, Is it medical necessary -- Is it medically  
14 necessary for you to go in?

15           So our concern is, that, you know, for many  
16 young people who need long-term treatment, we  
17 encourage not having managed care for Medicaid, but  
18 going into a fee-for-service, because it allows them  
19 to get into long-term programs, treatment --  
20 residential treatment centers (RTCs).

21           And so the concern is, that when everyone's  
22 under managed care, the insurance companies will be  
23 responsible for clamping down.

24           So that's a concern.

25           SENATOR CARLUCCI: So it's even more

1 important, like Senator Boyle just talked about,  
2 that definition is so important to transcend, not  
3 just to private insurance, but also to managed care,  
4 and it probably would solve some of the concerns  
5 that you're talking about.

6 MIKE PIAZZA: Right.

7 And I'll -- but on the other side now, I'll  
8 have to say, because Dr. Roe is here, and he --  
9 I was reminded: Vistaril is a drug that's given for  
10 alcohol. And under Fidelis managed-care plan, they  
11 have no problem providing it for Medicaid recipients  
12 who are covered by it.

13 Under Medicaid fee-for-service, it's a much  
14 more difficult process to provide Vistaril.

15 So on that level, you know, it turns the  
16 other way.

17 DR. ROE [ph.]: May I say, the problem is, we  
18 have the wrong people deciding what's medically  
19 necessary. It's not doctors and treatment --

20 [Applause.]

21 DR. ROE [ph.]: We've got the fox guarding  
22 the hen house. And what has been managed care has  
23 become "damaged care."

24 SENATOR CARLUCCI: Dr. Roe, do you have  
25 experience where you have prescribed to a patient

1 for inpatient facilities, or -- and you have found  
2 them being denied?

3 DR. ROE [ph.]: I had it happen, every week,  
4 I get on the telephone with what they call a  
5 "doc-to-doc."

6 I talk to a doctor who's working for an  
7 insurance company, whose salary is being paid by the  
8 insurance company to find reasons to save money for  
9 the insurance company.

10 What we need is an independent panel of  
11 treatment experts to define what is necessary, and  
12 that should be what manages care; not the insurance  
13 companies deciding what's medically necessary.

14 UNKNOWN SPEAKER: That's right.

15 SENATOR BALL: Ma'am?

16 UNKNOWN SPEAKER: Can I speak?

17 SENATOR BALL: Yes, sir. [Indicating.]

18 CHANEL FARASELI [ph.]: Good evening,  
19 everyone.

20 First, I want to apologize, because I'm a bit  
21 emotional right now, so I wouldn't be thinking as  
22 clear and elaborate and eloquent as I normally  
23 would.

24 I also want to thank the Panel, every single  
25 member that's here today.

1           And I want everyone, parent or, you know,  
2           just neighbor, this is extremely --

3           Okay.

4           -- this is an extremely important meeting.

5           I am so grateful that these forums are being  
6           held.

7           I looked online previously, and I can tell  
8           you, I was elated to know, and I have put on my  
9           calendar, every day that I can possibly make it,  
10          that's up in Albany, that's here in Hudson County.

11          I'm a lobbyist for every -- for the  
12          2,000 students in my school district, with  
13          Mr. Manko in Mahopac.

14          I'm there, and they know me right away.

15          My name is Chanel Faraseli [ph.].

16          And they -- when I walk through, they say:  
17          Hi, Mrs. Faraseli. Who are you here to help today?

18          So this is critical.

19          And I'm going to do everything that I can, so  
20          these loopholes and challenges don't happen, or at  
21          least we can reduce them.

22          There's still gonna be challenges.

23          Let's be honest and frank: There are going  
24          to be challenges.

25          But I challenge everyone here --

1           And side note, I did work for Senate and  
2           legislation.

3           -- but, I challenge everyone here that's just  
4           on the panel, we've gotta make this a little bit  
5           more streamline.

6           We've -- what it is, in plain simple  
7           language, is a catch 22:

8           "You can't do this," as some of the other  
9           individuals have expressed.

10          You can't do this more than three days,  
11          because you don't have a bed.

12          You can't have a bed because insurance is  
13          making you wait there in the audience -- or, not the  
14          audience, the waiting room forever and a day.

15          It's -- in the last month, in March, I saw a  
16          series on the Sunday paper. It was in three  
17          installments.

18          And I was -- I read it word for word,  
19          backward and forward. And I knew then that I wanted  
20          to do whatever I can, because I have volunteered in  
21          the community for two decades.

22          And I hope -- I wanted to speak, because  
23          I hope you can put a face with a scenario, with a  
24          real life story.

25          I'm sorry to say, that I buried my son

1 Paul Jonathan Faraseli, only 24 years old, loved by  
2 everyone, two weeks ago.

3 "Two."

4 "Two weeks ago."

5 And everyone has said: How are you standing?  
6 How are you doing? How am I laughing?

7 I feel for this individual's pain right here,  
8 because I know her pain.

9 I think the -- the only thing that got me  
10 through, first and foremost, was my faith.

11 But barring that, because not everyone  
12 believes in a higher power, but barring that, there  
13 was so many signs, and I didn't -- did not have the  
14 support -- not financially -- I didn't have the  
15 emotional, logistics support from family, friends;  
16 the students, the clique, if you will.

17 And trust me, Mr. Manko, I'm getting the  
18 names. I'm getting the names; who, what, where, and  
19 how.

20 As a Senate person, I'm very thorough.

21 So, whatever I can do, I'm gonna do.

22 And if that means I go to Washington, I'll  
23 bring a magazine on the train. Okay?

24 So, my heart may be heavy, but I am not gonna  
25 let my son's passing be in vain. His is gonna be an

1       inspiration.

2               And at that wake, we needed, not one, but  
3       two entire rooms. About 100 people, including the  
4       principal, Dr. Peace [ph.]; counselors.

5               I mean, what love that I have, and that's my  
6       comfort.

7               But, the pain, I don't want anybody to have.  
8       This shouldn't be.

9               What, we've got to get three days, when they  
10       need that magic number, "90."

11              This is appalling.

12              Frankly, it's unacceptable.

13              And, this is a non-discriminatory situation.

14              So just because you're sitting here and you  
15       don't know if a loved one is using, they very well  
16       could be, and we don't know that.

17              They very well could be -- your child, your  
18       son, your brother -- and there's nothing that's  
19       going to be done by us reading a newspaper, and  
20       talking about it to our neighbor.

21              That will not change anything.

22              It's going to take solidarity, and it's gonna  
23       take action.

24              So I leave myself open to any individual who  
25       would like to speak to me, who would like me to do

1 something. A task force that I can join.

2 That's why I wanted to make sure, when I knew  
3 this from Judge Reitz [ph.] in our town, that he  
4 needed a liaison.

5 This was prior to my son passing.

6 Anybody can stand up: Oh, because it's your  
7 personal fight.

8 Anybody can do that.

9 Well, as I said earlier, those 2,000 kids in  
10 the Mahopac School District, I treat them as my own.  
11 I'm there for them.

12 So, we have to get it together, and people  
13 need to be able to have somewhere to go, and talk.

14 So, if we do that.

15 Thank you.

16 Thank you very much.

17 [Applause.]

18 SENATOR BALL: I think -- unless anybody has  
19 anything to add on the insurance issue, I think what  
20 we'll go to, is we'll talk a little bit, because --  
21 on the prevention side.

22 And what I would like to do, as well, and we  
23 can get sign-up sheets, we will follow up, just  
24 locally, with a task force.

25 If we can get everybody's e-mail and cell

1 phone who wants to be on it. Make sure that your  
2 e-mail is clear.

3 And that, as we legislatively work through  
4 these things or find funding for these things, or,  
5 administratively, we'll keep you in the loop, and --  
6 because we need your input on this stuff.

7 Okay.

8 BOBBY: Can I have three minutes?

9 Can I have three minutes to talk in the mic?

10 SENATOR BALL: Can you -- God bless, sir.  
11 Speak into the mic.

12 BOBBY: Thank you.

13 My name is Bobby. I'm a long-time resident  
14 of [unintelligible] Mahopac for 27 years. I love  
15 this community. I love the kids.

16 What I see happen to these kids, these kids  
17 feel like there's no future. That's why they go to  
18 drugs.

19 There's no jobs for these kids.

20 They go to college, they major in something,  
21 they get out on the street and go work at McDonald's  
22 or A&P.

23 You go engineering school, you're at A&P.

24 There's 60,000 engineers. These people  
25 aren't dodos. They work hard for what they got, and

1 they're on the street.

2 That's the kind of country, that's what we  
3 dictate to these kids.

4 My generation, nothing personal, we dictate  
5 to these kids.

6 These kids are despairful. They feel like  
7 there's no hope; that's why they go to drugs.

8 I have an article here. I have this.

9 Anybody wants to read it, I'll put it out  
10 front.

11 It's true grit, it's true grit. It's about  
12 your kids. It's about your kids and psychology.

13 Read it, read it, it's true grit.

14 It's better than a newspaper.

15 "The New York Times," or "Daily Post," better  
16 than any newspaper we ever read.

17 This is true grit. Read it, read it, read  
18 it.

19 Read it, and don't weep, don't weep.

20 Just read it.

21 SENATOR BALL: Okay, thank you, sir.

22 [Applause.]

23 BRIANNA [ph.]: Hi. My name is  
24 Brianna [ph.], and I am a drug addict. I have  
25 ten years clean.

1 UNKNOWN SPEAKER: Hi, Brianna.

2 BRIANNA [ph.]: Hi.

3 [Applause.]

4 BRIANNA [ph.]: Thank you.

5 I grew up in Mahopac, and I got addicted to  
6 drugs in Mahopac.

7 I come from a good family. And, actually, my  
8 father was a president of Guiding Eyes for the Blind  
9 in Yorktown.

10 And that's one of the things I wanted to  
11 mention.

12 Sorry.

13 I am hearing that we're having a huge problem  
14 with opening up a halfway house in Yorktown.

15 I don't think that that should even be a  
16 debate.

17 A halfway house is how I ultimately got cheap  
18 after six month of treatment in Florida. I couldn't  
19 not stay here to get clean. I needed to leave.

20 I did go to Arms Acres for 28 days, but it  
21 wasn't enough. I knew I needed more, and I ended  
22 up -- I ended up -- I just wanted to mention about  
23 the law enforcement and the tough love.

24 Everybody's different, and it may work for  
25 some people.

1           I got arrested by a police officer that's in  
2           this room right now, and I had a heart attack  
3           two days later.

4           It didn't work for me.

5           But, in Florida, they have something that's  
6           called the "Baker Act." And, anybody, a parent, can  
7           call the police and say, "My son is in danger to  
8           himself or another." He can be arrested and brought  
9           to a psychiatric unit for three days. And then that  
10          doctor will decide if he needs treatment or  
11          psychiatric help.

12          Now, again, that goes into the insurance  
13          issue, we need to clean all that up, but I feel like  
14          that's something that could really help us here,  
15          because, as soon as the kid turns 18, there's  
16          nothing anyone can do.

17          In Florida we had an option.

18          I had to do it with a boyfriend of mine, and  
19          it worked. And they arrested him and brought him to  
20          a doctor, and he got the help that he needed.

21          Had the police officer that arrested me that  
22          day brought me to a detox, I probably would have  
23          stayed. I didn't want to get high anymore.  
24          I wanted the help.

25          But jail didn't scare me. It was just a

1 hiccup in my day of getting high.

2 And you're not gonna talk someone into  
3 treatment when they're high, or when they're coming  
4 down, and all they can think about is more drugs.

5 So, if we can get something together like  
6 that, that law enforcement works hand in hand with  
7 the mental field, I feel like that could be a huge  
8 solution to, you know, people who don't know where  
9 their sons are right now.

10 SENATOR BALL: Is anybody else in the room  
11 familiar with that Baker Act?

12 Okay.

13 UNKNOWN SPEAKER: There's also a Jennifer Act  
14 that has been initiated, and there's also a federal  
15 legislation, the SOS Act, as well, so that a parent,  
16 again with your signing the waivers, that you have  
17 more rights to work along --

18 SENATOR BALL: The federal level it is just  
19 legislation, though? It hasn't --

20 UNKNOWN SPEAKER: Nothing's been approved.

21 SENATOR CARLUCCI: And in New York, we have  
22 Kendra's Law. And this is something that I think we  
23 could work on, expanding Kendra's Law to include  
24 exactly what this young lady just spoke about.

25 So, thank you.

1           AUDIENCE MEMBER:  What she's speaking about  
2           is the Baker Act.  And the Baker Act is more for a  
3           mental case.

4           So, if you're saying that you're gonna commit  
5           suicide, and they have to take you in.

6           And we kind of have that already going on in  
7           New York.  If you say you're gonna commit suicide,  
8           then you're able to go ahead and get into a  
9           psychiatric unit.

10          What she really needs to refer to is called  
11          the "Marchman Act."

12          The Marchman Act is a law, under the Florida  
13          statute, that enables a family member to obtain help  
14          for a loved one who is unwilling to seek  
15          substance-abuse services voluntarily.

16          SENATOR BALL:  What is that called again?

17          AUDIENCE MEMBER:  It's called the  
18          "Marchman Act."

19          So that is something you can do as  
20          legislation, to be able to really help us.

21          Because you opened up, asking:  How can  
22          someone get into a program if they don't want to go?

23          SENATOR BALL:  Right, exactly.

24          AUDIENCE MEMBER:  So that's what you can do  
25          on your side to be able to help that out.

1 I work at the Walter Hoving Home, which is a  
2 Christian women's facility that helps women come off  
3 drugs and alcohol, and I oversee the intake office.

4 And the biggest dilemma I have, is people's  
5 family members calling, going: How do we help  
6 someone?

7 And I have to tell them they have to call us.  
8 That's all I can do. And tell them to give  
9 information in hopes that they would call us.

10 But sometimes they need that little push to  
11 be able to get the right place.

12 But the Marchman Act would be something that  
13 the state of New York could be able to kind of  
14 follow.

15 SENATOR BALL: Okay, can we use that as a  
16 segue on the law-enforcement side?

17 And if the law-enforcement officials who are  
18 here, who are willing to speak out, could speak up a  
19 little bit to what more can be done on the  
20 law-enforcement side?

21 And then we do need to keep it moving,  
22 because we have the training that's coming up, and  
23 we need to keep it on the clock. Okay?

24 State Police you want to go first?

25 CAPTAIN ROBERT WILLIS: I'll just state that,

1 as the doctor from Albany mentioned: Locally here  
2 in Troop K, at SP Poughkeepsie, we do have the  
3 mailbox drop for drugs that are in people's homes.  
4 They can bring, it's anonymous. They drop it in the  
5 box, they can get them out of their home.

6 That's one of the most dangerous things, is  
7 the leftover medication. There's no reason to keep  
8 it at home.

9 It is just something that, especially if  
10 someone may be an addict in the house, it's -- you  
11 know, it's a liability.

12 You can bring it there, drop it off. We  
13 don't take any names, it's totally anonymous. It  
14 gets destroyed.

15 Next week we're starting with Train The  
16 Trainer for troopers throughout the state of  
17 New York, in the Narcan.

18 After they get trained, they'll come out to  
19 field throughout the whole state, train the  
20 troopers. And, hopefully, within the next few  
21 months, we'll have the Narcan on patrol, where we're  
22 responding to the overdoses.

23 As you know, the police, we're in a unique  
24 situation.

25 We enforce the law.

1           Whether it's a trooper stopping someone on  
2           the side of the road, and they have narcotics on  
3           them; undercover drug operations; or responding to  
4           domestic disputes at residences, because parents  
5           have children in their house, that are under the  
6           influence of narcotics, and we have to take control  
7           of the situation.

8           So we see it on every angle.

9           And it's, just, the more, I think, with  
10          education, and the treatment facility for people, is  
11          the better that it can be for the whole community.

12          AUDIENCE MEMBER: Uhm, excuse me, can I say  
13          something, please?

14          SENATOR BALL: Sure.

15          AUDIENCE MEMBER: It's kind of just a little  
16          bit of what we've talked about the whole night.

17          There's education and prevention, and that's  
18          a great thing if you can save children that way.

19          We went into the physicians, where they have  
20          to be accountable with medication they give out.  
21          Maybe lower doses.

22          I know the pharmacies are now changing the  
23          medications that, maybe they can't be dissolved as  
24          easy. They might be long-acting.

25          Okay, the next thing is, treatment and

1 programs.

2 And I have to say I think St. Christopher's  
3 is a good program, but, we have our insurances. And  
4 it's gonna get worse with Medicare and Medicaid.

5 So why can't, as taxpayers, everybody in this  
6 room pays tax, there's a place that, at the time of  
7 crisis, that child can go?

8 Because, like they said, if you don't get  
9 them there when they're in crisis, they can go out  
10 and use.

11 The drugs now are mixed with fentanyl and  
12 things that are killing them like flies.

13 So if we pay taxes, instead of playing with  
14 the insurance company, we should have a place to  
15 bring the children, because we are taxpayers, and  
16 there should be an open door, and a bed at that  
17 immediate second.

18 [Applause.]

19 AUDIENCE MEMBER: And then the next thing is,  
20 since the Oxycontin and the Vicodins and Percocets  
21 are more hard to obtain from physicians, or the  
22 pharmacy companies are changing their composition,  
23 we now need our law enforcers to get out there and  
24 bust the heroin dealers, because it's so damned  
25 cheap, it's all over.

1           So I feel we need a place to get them  
2           instantaneously. And we need our cops out there,  
3           truly getting drug dealers, truly getting --

4           SENATOR BALL: Well, they're actually gonna  
5           be starting the training in a little bit.

6           We went through, and I'll go through all the  
7           deliverable items that we've had, legislatively, and  
8           otherwise.

9           Is there anybody else in the law-enforcement  
10          community -- from the law-enforcement community who  
11          would like to speak?

12          Okay.

13          AUDIENCE MEMBER: Senator, the biggest  
14          problem we have with law enforcement is, we have  
15          weak mental-health laws, or, public-health laws that  
16          give us the position to actually enforce the law.

17          Heroin, it takes a huge amount of heroin to  
18          make any kind of dent in a person.

19          I mean, you take a half a gram of cocaine,  
20          you got a D felony.

21          It doesn't work the same way with heroin.  
22          The laws against heroin are very weak. And  
23          prescription drugs.

24          CPCS 7 is a misdemeanor, and it's the biggest  
25          charge that we charge with, and we get nowhere with

1 it.

2 SENATOR BALL: Are there anymore specifics  
3 anybody can give on that, the fact that the laws are  
4 extremely weak on the -- specific on the heroin  
5 side, with law enforcement and the laws?

6 JOE YASINSKI: My name is Joe Yaskinski. I'm  
7 the deputy commissioner for the County Department of  
8 Public Safety.

9 And, we realized this was a major problem  
10 years ago.

11 In 2011, the Putnam General Task Force for --  
12 which is called the "diversion unit," we have locked  
13 up doctors, pharmacists, people, selling narcotics  
14 to opiates and heroin to these individuals over the  
15 years.

16 And if you just read the newspaper a couple  
17 days ago, ago, we had the first sentencing of an  
18 individual who was responsible for two deaths of  
19 two young men in Pearl River, and he's sentenced to  
20 a minimum of 10 years in prison for that.

21 There's a 20-year minimum, but he took a  
22 plea, but he got 10 years for this.

23 And I think that the state laws need to be  
24 enhanced.

25 The federal law is the only law we can use to

1 actually combat this in a great way.

2 So, there are many issues.

3 And, also, couple of things were mentioned  
4 before.

5 One of the gentleman here who lost a loved  
6 one, mentioned how parents are embarrassed to come  
7 to law enforcement, or anyone, to tell about this  
8 problem, because they feel embarrassed that their  
9 loved one has died.

10 That information, we need that information.

11 We need to get information of a loved one:  
12 Where they were hanging out. Who they were dealing.  
13 With who their friends were. Who -- with  
14 pharmacists they went to.

15 These are the things that we need to do our  
16 job.

17 So, if I had to just push one point across,  
18 it would be that: we need help from the public  
19 itself.

20 And we also need some stronger state laws to  
21 assist.

22 [Applause.]

23 SENATOR BALL: Okay.

24 And I ask that everybody follow up with  
25 suggestions on that.

1 I think Bob Tandy wants to speak.

2 I don't know if our former district attorney  
3 wants to speak as well.

4 Bob.

5 ROBERT TENDY: Everybody's solution is  
6 different. There are many solutions, and we've all  
7 discussed a lot of them.

8 But the gentleman to my left over here just  
9 made a point that I think is very valid.

10 We have DWI laws, where if you have two DWI  
11 arrests, it's a felony.

12 But I have clients who have 30 CPCS 7  
13 arrests, and they're all misdemeanors.

14 And, it seems -- I'm a defense attorney, I'm  
15 saying this -- but it seems to me that that's kind  
16 of silly.

17 I really think that if you have two or three,  
18 it should be -- it should rise to the level of a  
19 felony.

20 [Applause.]

21 JOE: Can I say something, Senator?

22 Joe, from Westchester County.

23 I know you guys have been doing a great job  
24 with regards to trying to work with the local  
25 municipalities, and with your drug-enforcement

1 units.

2 Because, each municipality, to do it  
3 individually, is just not gonna happen.

4 So, I know we've teamed up with you  
5 previously, you know, with our narcotics guy, and  
6 works -- has worked unbelievable with you guys.

7 And I've talked to Undersheriff Peter over  
8 here, and he's willing to come on board.

9 And, between Putnam and Westchester county,  
10 we've just got to get this done.

11 JOE YASINSKI: And I agree, and we have  
12 worked well with Putnam County for many, many years.

13 I started out in 1974. I was in a narcotics  
14 unit in 1975, and we had been working with the  
15 Putnam County Sheriff's Office from that time.  
16 I started 40 years ago.

17 And, you're right, it's unfortunate that we  
18 have a lot of small departments that can't afford to  
19 handle these problems. They need to get us  
20 involved. They need the federal government to be  
21 involved.

22 And that's what we do.

23 JOE: We've had a great relationship with  
24 you, and it's been working.

25 JOE YASINSKI: And just another -- another

1 point, too: I know money is tight, but when we  
2 seize -- we seize properties and monies from these  
3 bums, and we use that to enhance our programs.

4 So we take the money from them as well, and  
5 we use that for enforcement.

6 So, again, it's --

7 JOE: We'll be working with you again real  
8 soon.

9 JOE YASINSKI: Okay.

10 Thank you.

11 KEVIN WRIGHT: Senator, I -- I started a year  
12 after Joe, in Westchester County, and I think we  
13 worked a few cases over the years.

14 But I remind everybody that, in 1972,  
15 New York State enacted what was heralded across the  
16 country as the most draconian drug laws in the  
17 history of mankind.

18 And, it was society -- the  
19 intelligencia (ph.), the cool people, whatever --  
20 I don't quite know what it was, but, it was the  
21 society in which we lived that walked back and  
22 watered down those laws.

23 I -- I don't understand how it came about,  
24 but I know that we had among the most horrific  
25 sentencing laws anywhere in the world. And we still

1       incarcerate probably more people for drug offenses,  
2       on a per capita basis, than anyone in the world.

3               We just don't seem to be getting our hands  
4       around the problem. We've had the tough laws, and  
5       we've walked them back.

6               UNKNOWN SPEAKER: Can I make a comment on  
7       that?

8               KEVIN WRIGHT: I have a feeling that part of  
9       it -- gentleman just stood up and talked about our  
10       mental-health laws -- it seems to me that when the  
11       rights of those in the asylum became paramount, and  
12       they were just turned loose on streets, in what was  
13       thought to be a helpful, Christian act, I think we  
14       started down a path where we're afraid to say to  
15       someone: You're a danger to yourself, you're a  
16       danger to society. We're going to put you where, if  
17       you can't help yourself, at least you can't hurt  
18       others.

19               But that needs to be more than four concrete  
20       walls. It's gotta be coupled with good medical  
21       care.

22               And this country is about to embark upon the  
23       decriminalization of almost anything that you can  
24       imagine.

25               And if politicians don't demand, instead of

1 using the tax revenues that come from that, and the  
2 freed-up prison space, and the reduced criminal  
3 justice budgets, because they don't have to arrest  
4 these individuals anymore; if the taxpayers don't  
5 demand that the revenues that are saved from all of  
6 this decriminalization go into treatment and health  
7 care for the addicted, we're never going to get our  
8 hands on the problem.

9 SENATOR BALL: Thank you, Kevin.

10 Before we follow up the third category on,  
11 actually, with the kids, if the -- I know Tom is  
12 here, other superintendents, principals, if you can  
13 tell us what's working in your schools, what's  
14 working in other schools, what's not working, and  
15 how we can help to make sure that we get to these  
16 kids at a young age.

17 And, then, what is "age appropriate"?

18 And what programs are working?

19 Do you want to --

20 DANIELLE SULLIVAN: Hello. I'm actually new  
21 to Brewster, Brewster High School, but one of the  
22 things that I can tell you that's worked  
23 universally, in any educational setting, I think the  
24 doctoral candidate -- I'm sorry, I forgot your  
25 name -- pointed it out, was the culture change; the

1 culture change piece.

2 Educational outreach that involves both the  
3 students and their families, that they can attend  
4 and experience together, which creates dialogues.

5 And I think middle-school aged is even  
6 appropriate, because the reality is, it's occurring  
7 in that age group.

8 I see 14- to 18-year-olds all day, every day.  
9 And, at least once a day, there is some type of  
10 topic or mention, or even an incident, that is  
11 affecting a child in that age group that I hear  
12 about on a daily basis.

13 And one of the key points that they always  
14 make is that, they would like the support. They  
15 would like the family to be involved, as well. And  
16 they don't always ask for it, but it is evident in  
17 the discussion with them.

18 So I really do feel that the educational  
19 outreach, in terms of the prevention, with that age  
20 group, is extremely appropriate.

21 And to do that we do need to change the  
22 culture in the school.

23 SENATOR BALL: Can peers influence -- can you  
24 guys just -- when is the showing -- the first  
25 showing that you guys are doing, so people can know

1 about that?

2 UNKNOWN SPEAKER: [Unintelligible.]

3 SENATOR BALL: And where is it?

4 UNKNOWN SPEAKER: [Unintelligible].

5 SENATOR BALL: And this is for the  
6 documentary.

7 FRANK REALE: We have the one-hour  
8 documentary, "Chasing It." The first showing is  
9 scheduled for Friday night in Putnam Valley, at the  
10 Performing Arts Center in Putnam Valley.

11 And we are now working with, I believe,  
12 three other schools that are going to be submitting  
13 the requests to you.

14 And, we'll be -- we've contacted a couple of  
15 them already. And, I think we have four now.

16 And it's open to any school district in  
17 District 40. And the program includes the  
18 documentary film, as well as three of our speakers.

19 And one of the things we're going to ask the  
20 schools to do, and this is the most important part,  
21 I believe, we're going to open the door to the  
22 conversation, but we need the schools to provide the  
23 resources to continue the conversation.

24 And those resources would be the guidance  
25 counselors and other folks that are in the health

1 industry.

2 SENATOR BALL: Do any -- anybody from the  
3 schools: Superintendents? Tom? Sam? Tom?

4 TOM MANKO: The issue that we have in  
5 schools, is having sustainable resources.

6 You can come in and show a movie, and you can  
7 ask me to dedicate guidance counselors, but I have  
8 to tell you, in 13 years of education, we have to  
9 get children ready to graduate and be  
10 college-and-career ready, and there are only so many  
11 hours in a day.

12 We have a 9-period day, and it's not long  
13 enough.

14 And school districts are often charged with  
15 being the keepers of the door for citizenship, and  
16 character education.

17 And you can ask us for resources, but we  
18 don't have enough to go around.

19 So, our guidance counselors, our social  
20 workers, our school psychologists, have a plate  
21 that's overflowing right now with everything we have  
22 to do.

23 I can't think of a more important topic than  
24 this, but at the same time, we have to get kids  
25 ready to graduate.

1           So, we need, and Senator Ball has been  
2           excellent at this, in providing school districts  
3           with long-term, sustainable resources so that we can  
4           hire people that can do this.

5           Because I'm convinced, that you can show a  
6           movie, and you can say we're gonna bring parents in  
7           to watch this movie, and that's gonna change the  
8           world.

9           But if the parents don't take the message  
10          home with them and sustain it, then it's not gonna  
11          happen.

12          What we have to do, is build the systems in  
13          our school, with drug counselors, with prevention  
14          counselors, and somewhere along the line, I would  
15          like to be able to mandate moms and dads at every  
16          grade level, K through 12, to have to mandatorily  
17          attend drug-and-alcohol awareness counseling, and do  
18          it every year for 13 years.

19                           [Applause.]

20          SAM OLIVERIO: We have an expert here,  
21          Elaine Santos, who comes to our of district  
22          periodically, once a month, with the Putnam County  
23          Communities That Care Coalition.

24          What it is, it's a joint effort of school  
25          members, parents, students, representatives from the

1 County, the Mental Health Department, the Youth  
2 Bureau. That's what it takes; and it's constant.  
3 It's not a one-shot deal.

4 Elaine brings her advisers and her associates  
5 with her. And our superintendent of schools sits  
6 there, I sit there, our SRO (our school resource  
7 officer) sits there, along with parents, and other  
8 people from the community, pastors, our Park and  
9 Recs people, our Town officials. We have a  
10 representative from the town of Putnam Valley.

11 That's what it takes; it's got to be a  
12 community effort.

13 And I agree with Dr. Manko, it has to be  
14 constant. It can't be a one-shot deal. That  
15 doesn't work.

16 And most importantly, Elaine makes it a  
17 point, and the Youth Bureau in this county makes it  
18 a point, to bring forward speakers to our building  
19 at least two, three, four, five, six times a year,  
20 talking about this problem, so that the parents  
21 continually hear the message: Watch your children.  
22 Watch your children and know what's going on.

23 And I have to applaud Elaine and  
24 Joe DeMarzo [ph.] and Mike Piazza for providing this  
25 service, not only to our school, but to so many

1 schools in the county; because it's second to none.

2 SENATOR BALL: Yes, sir.

3 DAVID: Hi, my name is David  
4 [unintelligible.] I'm a member of this community,  
5 and I also have 24 years clean in  
6 Narcotics Anonymous.

7 I'm a recipient of the tough love.

8 My mom had me arrested twice. I went to  
9 New York State Department of Corrections, where  
10 I heard the message of recovery.

11 I hear all of this going on in the community.

12 I've lost two siblings myself, I buried,  
13 since I came into recovery.

14 I'm a homeowner. I'm a taxpayer. I have a  
15 13-year-old boy that I need to protect.

16 My question to you here is:

17 You've asked us -- you asked us, what can  
18 we -- you know, "Give me ideas."

19 How many people from the insurance industry  
20 are here tonight?

21 [Laughter.]

22 UNKNOWN SPEAKER: Good question.

23 DAVID: I mean, this -- if we're gonna have  
24 an open dialogue, we need to know what we're  
25 fighting.

1           In 1992, I worked for New York State  
2 Department of OASAS down on 125th Street, under  
3 the L.

4           The same problem I faced then, with the women  
5 that were walking the streets of New York, was  
6 getting them into a facility.

7           We would put them on the train, and,  
8 hopefully, there would be a place in Turning Point,  
9 if there was a bed available.

10          Same thing.

11          I've done H&I work (hospitals and  
12 institutions) in my own time. Into  
13 St. Christopher's, into Arms Acre, into  
14 St. Vincent's, I've done all the volunteer work  
15 there.

16          It is the same question from 1992: How do we  
17 get treatment for them?

18          The legislation needs to change and close the  
19 loopholes in the insurance companies' pit.

20          When you go to them and you ask them for  
21 help, and they tell you, "Your disease does not fit  
22 the medical criteria," that's the hole that I hear  
23 all the time.

24          And I'm not even in the profession anymore.  
25 I'm just a member in the community.

1           That's where I'd like to see the action start  
2 taking place.

3           Thank you.

4           [Applause.]

5           SENATOR BALL:  Guys, what we're going to do  
6 is --

7           ELAINE PAWLOWSKI:  Excuse me, if I can just  
8 address the school issue here?

9           One thing that you seem to forget -- I've  
10 been in teaching for over 30 years -- is when you  
11 are in the school district, the Board of Ed controls  
12 much of what goes on in the schools.

13           And they really need to be educated, that  
14 they can't cut the guidance counselors, they can't  
15 cut the psychologists, they can't cut the addiction  
16 services and the drug services, in the middle  
17 schools and the high schools.

18           The other thing that they seem to cut, as  
19 well, is there's a 504 classification, that children  
20 can use when they have medical problems, and that  
21 includes addiction, that includes substance-use  
22 disorders.

23           Parents don't like to use it, the school does  
24 not like to use it, but it is federal law.

25           They don't use it, and you should be able to

1 use it, and it should be encouraged to use it, so  
2 that you get more of those programs.

3 And there are grant programs available for  
4 that.

5 And many of the school boards' committees do  
6 not recognize that as a priority.

7 They may look for academic scholars and grant  
8 programs that way, but there's many other  
9 opportunities to get that into the school, as well.

10 TOM MANKO: While I hear what you've said,  
11 I have to disagree with you right on down the line.

12 Our board of education is extremely  
13 knowledgeable about the Part 200 regulations, the  
14 federal 504, and the Part 300 in federal regs.

15 We spend, probably, the largest portion of  
16 our academic budget on ELL, special-ed students, and  
17 those students who are in need.

18 Our board gets it.

19 We have a 2 percent property-levy tax cap,  
20 and we have a 3.5 percent cap on increases in State  
21 aid.

22 Although, this year, under the Senators'  
23 guidance, we were able to bust that open.

24 It comes a matter of, we have to balance the  
25 budget when we present it to our voters the third

1 Tuesday in May, or we can't present it, number one.

2 Number two, it's got to be approved.

3 And, number three: Please believe me when  
4 I tell you, it's not just counselors and  
5 psychologists that get the hit. We're taking a look  
6 at AP classes, honors' classes. We're taking a look  
7 at higher student-teacher ratios in the elementary.

8 It's not as simple as you portray it.

9 ELAINE PAWLOWSKI: No, I understand it's not  
10 simple, but what I'm saying is, there is a  
11 504 classification. And if parents recognize, and  
12 get over that this is a shameful situation that  
13 they're in, there is help for them along that route,  
14 as well.

15 And there's not enough people that take that.

16 SENATOR BALL: Ladies and gentlemen, so this  
17 is what we're gonna do:

18 We have a -- there are about 100 --  
19 approximately 100 Narcan kits.

20 Everybody who wants to stay for that  
21 training, I know we have about 100 people that  
22 signed up for the training, please do that.

23 I would like Senator Carlucci and  
24 Senator Boyle to get some closing remarks.

25 If I -- I'm gonna run through these very

1 quickly so they're on the record, and then we'll  
2 follow up.

3 But, on deliverables, and if I forgot  
4 anything, you guys need to let me know.

5 You can't hear me?

6 KARINA CHRISTIANSEN: Can I just say one  
7 thing?

8 SENATOR BALL: Yes, ma'am.

9 KARINA CHRISTIANSEN: I'm sorry.  
10 I'm gonna give a perspective of somebody in  
11 their 20s, still, thank God.

12 People in this room are talking from the  
13 perspective of parents, and they're looking at their  
14 children.

15 But we have to remember that these are men in  
16 their 20s. These are adults.

17 My brother started using at 26 years old. He  
18 was an adult man. He was a police detective in  
19 New York City.

20 And, so, you're all coming from the very  
21 reasonable and important perspective of protecting  
22 your children, but we have to also remember, these  
23 are adult autonomous members of our society.

24 SENATOR BALL: Thank you.

25 [Applause.]

1           SENATOR BALL: Okay, so on the  
2 law-enforcement side:

3           We're gonna follow up with the Marchman Act,  
4 using Florida as an example, to give parents and  
5 relatives more input.

6           We talked a little bit about, the laws  
7 against heroin in comparison to other narcotics,  
8 they're extremely weak and need to be strengthened.

9           There's a suggestion from Bob Tendy,  
10 Supervisor Tendy, about two or three violations  
11 should be a felony.

12           Treatment, the insurance companies right now  
13 are covering three days, when, really, for most  
14 folks, it should be 90.

15           We need to dig into that.

16           And, Senator Carlucci agreed, and  
17 Senator Boyle, of course, that we will, and we will  
18 do that as a team.

19           The reimbursement rate, I know Amy from  
20 St. Christopher's talked about that.

21           The insurance companies, Nora talked about  
22 that, requiring a face-to-face, and the  
23 complications there, as well as saying that,  
24 "not medically necessary."

25           Senator Boyle talked about the need to

1 actually, properly, define "medically necessary,"  
2 and, not allow some guy with a pencil-neck, sitting  
3 behind a phone, talking about "medical necessity,"  
4 when we have people that are about to die.

5 And, somebody else -- a parent also talked  
6 about the process needing to be much more  
7 streamlined.

8 On the prevention end, this may not be the  
9 prevention, but, anyways, as a deliverable: Docs  
10 are prescribing opiates, and Carol talked about  
11 this, in large quantities.

12 We need to follow up on that: Actually  
13 holding doctors and the medical community  
14 accountable, including the number of pills.

15 It was brought up by Carl Albano, who I think  
16 has since left, about prescription to children under  
17 a certain age.

18 And then, when we were talking about, I think  
19 it was Brewster --

20 Principal from Brewster?

21 DANIELLE SULLIVAN: I'm an assistant  
22 principal.

23 SENATOR BALL: Okay.

24 Well, next year, next year.

25 -- a cultural shift, that we actually have to

1 involve the parents.

2 And my -- are there any other superintendents  
3 in the room?

4 My favorite superintendent, Tom Manko --

5 [Laughter.]

6 SENATOR BALL: No, it's true.

7 -- brought up the fact that the schools are  
8 extremely strapped, so we need to do these things in  
9 the community, involve the parents, and move on.

10 Guys, we will follow up.

11 Susie -- if my staff can announce themselves?

12 Susie is my chief of staff.

13 Raise your hand, Susie McDonough.

14 And then, [unintelligible].

15 [Applause.]

16 SENATOR BALL: If you have any easy  
17 questions, send them to me.

18 If you have any really tough questions, give  
19 them to Senator Carlucci, or Susie McDonough.

20 And then, [unintelligible] who's here, she's  
21 my legislative director. So on the legislative  
22 side, if you're interested in being involved in the  
23 process, you know, please contact her.

24 Senator Carlucci.

25 SENATOR CARLUCCI: Well, again, Senator Ball,

1 I want to thank you for putting this together.

2 And I just really want to say, thank you, to  
3 everyone that's here tonight.

4 Thank you to the parents who have lost so  
5 much, for sharing your story; for having the courage  
6 to stand up and share your experience.

7 Because that's what it's gonna take.

8 You know, we talked about some of obstacles,  
9 when we talk about an entrenched industry -- an  
10 insurance industry that doesn't like to change.

11 I think, with all of the obstacles that we've  
12 talked about, I also see a lot of opportunities,  
13 because, we are in a changing time.

14 Whether it's the Affordable Care Act, the  
15 move to managed care; locally, our Regional Centers  
16 of Excellence, with completely changing our  
17 psychiatric centers in the state of New York; what's  
18 important, as we transition, is that we have to take  
19 these ideas and these suggestions and make them a  
20 reality.

21 And, I heard so many different, important  
22 ideas and problems, that I think that we can  
23 address.

24 Whether it's dealing with Medicaid managed  
25 care, or dealing with private insurance companies,

1 making sure that there is respite for people that  
2 need it, these are really exciting ideas, if you  
3 will, that you've shared with us.

4 And I really just want to thank you for that.  
5 We're continuing these hearings around the  
6 state.

7 Locally, across the river, in  
8 Rockland County, we're gonna have a hearing, or,  
9 another, roundtable, Tuesday, May 27th, and that  
10 will be in the middle of the day.

11 And, you know what? We brought up a good  
12 and -- a good point was risen by someone in the  
13 crowd, about having the insurance industry here.

14 So we'll make sure to invite them, to make it  
15 a point, particularly, to have them there on  
16 May 27th if we can't get them at a sooner meeting,  
17 to make sure that they're part of the dialogue, and  
18 they hear these stories; hear the stories of when  
19 they weren't there.

20 So, I want to thank you all again.

21 I thank Senator Ball, and thank  
22 Senator Boyle, and the staff here, for putting  
23 together this wonderful forum.

24 So, thank you, and look forward to working  
25 with you all.

1 [Applause.]

2 SENATOR BOYLE: I, too, want to thank  
3 Senator Ball and his great staff for putting this  
4 together.

5 And, Senator Carlucci, thank you for -- so  
6 much for coming.

7 I urge all of you, whoever -- if your  
8 schedule allows, to stick around for the Narcan  
9 training. It truly is a miracle drug, and we will  
10 save lives tonight as a result of it.

11 UNKNOWN SPEAKER: Senator Ball?

12 Senator Ball?

13 SENATOR BOYLE: Thank you to the panelists,  
14 and to the audience.

15 We had -- we have great ideas coming out of  
16 tonight.

17 And I promise you, that when we introduce  
18 legislation and pass it this Senate session, it's  
19 gonna be from the ideas we got tonight.

20 Thank you so much.

21 SENATOR BALL: Thank you, everybody.

22 (Whereupon, at approximately 7:46 p.m.,  
23 the forum held before the New York State Joint  
24 Task Force on Heroin and Opioid Addiction  
25 concluded, and adjourned.)