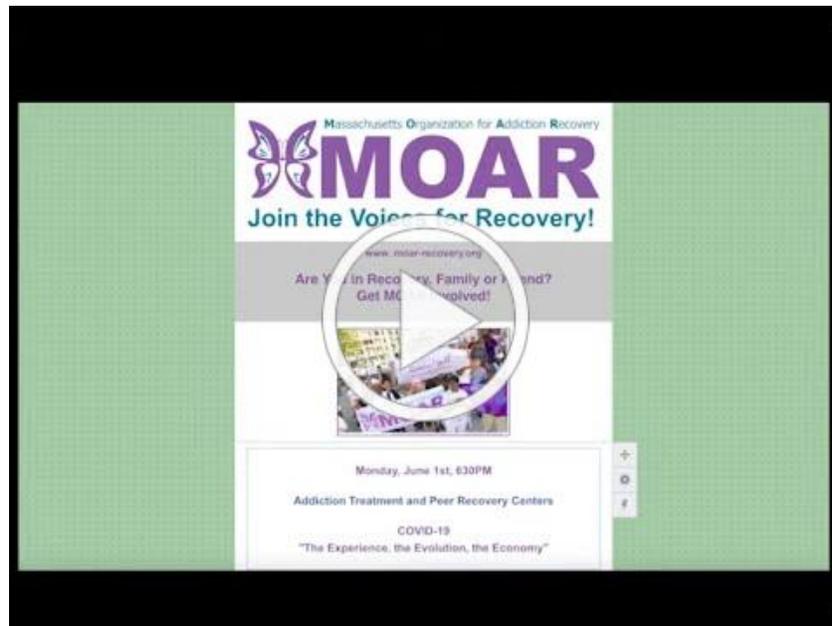




Massachusetts Organization for Addiction Recovery

MOAR

Join the Voices for Recovery!



[Click to stream a recording of MOAR](#)

**Addiction Treatment and
Peer Recovery Support Centers
COVID 19**

“The Experience, The Evolution, The Economy”

**Hear from PAATHS, Bay Cove, Gavin with Devine PRSC,
ATCNE, OBOT- BMC, The Bridge (Partners) , Recovery
Coaches and **MOAR** to come!**

[Click Here For a Full Summary
of the Meeting](#)

**Thank you to all Treatment Providers and Peer Recovery Support Services
who Presented and The Recovery Community Who Participated!**

- **John Mcgahan** Gavin Foundation CEO initiated discussion.
- **Jen Callahan**, Gavin Foundation's Devine Peer Recovery Support Center Director
- **Katie O' Leary**, North Suffolk Mental Health Association's Recovery Support Services Director
- **Loretta Leverett**, Director of STEPRox Peer Recovery Support Center
- **Matt Donlan and Amy Livermore**, of Addiction Treatment Center of New England
- **Colleen LaBelle, MSN, RN-BC, CARN, of Boston Medical Center's (BMC)**
- **Paul Bowman**, Massachusetts Representative, NAMA Recovery
- **Lydie Ultimo-Prophil**, Bay Cove Vice President of Addiction Services.
- **Emily Stewart**, CASA Esperanza. CEO
- **Theresa Young** from PAATHS (Providing Access to Addictions Treatment, Hope and Support)
- **Windia Rodriguez**, CARC, Recovery Coach Team Lead, Population Health Management, Partners HealthCare,
- **Connie Peters** Association for Behavioral Health Addiction Services Vice President, Massachusetts Coalition for Addiction Services Lead

[Click to download MOAR's COVID Policy Action Items document](#)

[Find a MOAR Action For Recovery Meeting in your area](#)

Expanding Access to Addiction Services Through Telehealth:

[An Act Relative to Putting Patients First](#)
Telehealth has passed by MA State House and Senate. The conference committee will reco

What is Telehealth?

Telehealth refers to the remote diagnosis and treatment of patients by means of telecommunications technology, typically through videoconference or phone call. Telehealth has the ability to expand access to care, improve the efficiency of care, and has been an essential tool for enabling patients to continue to receive care at a time when in-person appointments are not advisable for public health reasons. This bill may have the capacity to make telehealth services permanently available for Massachusetts patients after the COVID-19 state of emergency has ended.

Will Telehealth be covered by any insurance provider?

Insurance carriers, including MassHealth, are required to cover telehealth services for any service that is a covered in-person benefit. As long as a health plan covers "in-person" services, it must cover it

via telehealth.

Will insurance cover behavioral health (mental health and addiction) services?

Yes, as long as the service is covered for in-person services by the health plan.

If the patient prefers an in-person visit, can a provider still schedule telehealth?

There's no specific rule about this – it's a determination left to the patient and their healthcare provider. Essentially if telehealth service is a covered benefit, then the patient can access it through their plan. Whether telehealth or in-person service makes more sense is really a clinical decision left to the patient and their provider. The bill does make it clear that a patient may decline telehealth services in order to see a provider in-person.

Will Telehealth be reimbursed at the same rate as if it were an in-person visit.

Yes, until July of 2022. The Health Policy Commission will assess that provision as part of its telehealth study in the interim.

Will insurance coverage require prior authorization?

Coverage may include utilization review, including prior authorization, but only in the same manner it is used for the in-person service. In short, if it's not used for the in-person service, it cannot be used for the telehealth service. If it is used for the in-person service, it can be used in the same manner for the telehealth service. The "may" is important – some carriers may choose not to use prior authorization in certain instances.

Is Telehealth to be offered by all insurance carriers?

Yes, insurance carriers, including MassHealth, are required to cover telehealth services for any service that is a covered in-person benefit.

How will this address any federal law or regulations such as for Medication Assisted Treatment/Recovery Services

If MAT is a covered benefit under a health plan, then it will also be offered via telehealth as long as it doesn't violate federal law. Because MAT is also federally regulated in certain instances, there might be different case-by-case scenarios.

Will the House of Representatives create its own bill or work from this one?

The House of Representatives is likely to do a bill.

Questions:

Maryanne Frangules, MOAR Executive Director

maryanne@moar-recovery.org

Trevi Hall, MOAR Western MA Regional Coordinator

[Click here for a letter for organizations to support expungement](#)

[Click here to get the contact information for your State Rep so you can ask them to Support Expungement Expansion!](#)

ACTION ALERT

[Please Click for Alert from Lew Finfer](#)

- MCAN – Massachusetts Communities Action Network on Police Reform/ Racial Justice Bill
- You may want to alert your elected legislators on your preferences
- Go to www.wheredolvotema.com to find your local elected legislators

The House-Senate Conference Committee is meeting now to negotiate the differences between the House and Senate passed Policing bills.

Even though the Legislature has extended the session to pass bills beyond the previous deadline of today, negotiations on this bill continue today and it may or may not be finished today.

****It's worth making another round of calls or getting calls in today.....particular for the stronger version of Qualified Immunity that the Senate passed bill.....and also for Justice Reinvestment and Expungement that are in the Senate passed bill.**

THANKS.

State Legislature Considers Police Reform
with "Reform, Shift, & Build Act"

Frequently Asked Questions – Reform, Shift, & Build Act

1. Does this bill mean more money for the police?
 - No. This bill does not appropriate or commit any funds to policing. The civilian-led POSAC will require funding, particularly to build the public-facing complaint database. Notably, the bill reallocates money from the corrections system, and police-overtime fraud, into economic empowerment initiatives in communities impacted by over-policing and mass incarceration, with the grants being controlled by a board of community members, local leaders, and residents.
2. What is the process by which an officer's certification is revoked?
 - The POSAC (Police Officer Standards and Accreditation Committee) that the bill creates can receive a complaint from any person. If the complaint is of a charge that would result in automatic decertification, the POSAC must investigate it. If it is of a lesser charge, the POSAC may investigate or they may request that the officer's employing agency investigate it—or both investigations may go on concurrently if both authorities choose to investigate. The POSAC has the ability to subpoena police records and other documentation necessary for the investigation. When the investigation is complete, a subcommittee of the community-controlled POSAC board votes. The simple majority decision prevails, as is the case with other licensed professions. If revocation takes place, an officer's decertification is maintained within state and national data systems. Adverse actions taken by the POSAC against an officer's certification may not be appealed to the civil service commission. Certification revocations are permanent.
3. How do these reforms keep my community safe?
 - These reforms will both decrease the footprint of policing overall, and decrease the likelihood of misconduct by setting clear standards, requiring de-escalation, and strengthening accountability. Further, by banning racial profiling and collecting comprehensive demographic data on police stops, communities of color will be made safer from the consequences of implicit bias, and bad actors can be identified earlier on by police departments and communities. Finally, the bill increases community safety by redirecting resources to strategies that build neighborhood stability and strength: job creation and economic empowerment, education, and mental and behavioral health services.
4. How was this bill drafted?
 - This bill was drafted by the Senate's Racial Justice Working Group. The policies included were modeled after recommendations from community advocates, elected officials of color from around the state, and from many existing police reform bills that senators submitted to the Working Group after having been vetted through the traditional legislative process, including many individual public bill hearings. The Working Group was comprised of 6 members: 5 Democrats, and 1 Republican; 1 of the Democrats is a former police officer and 1 of the co-chairs is a member of the Black & Latino Legislative Caucus.

Did you know?

***People in Recovery are Protected from Discrimination in
employment by the American's with Disabilities Act***

#ThanksToTheADA

The MOAR you Know!

From our friends at the New England ADA Center:



Americans with Disabilities Act

Share Your #ThanksToTheADA in Celebration of the ADA's 30th Anniversary

Please join us in celebrating the 30th anniversary of the Americans with Disabilities Act by sharing a moment in your life when you were thankful for the ADA. On a social media platform of your choosing, share what the ADA means to you and use #ThanksToTheADA, so we can follow along!

Use any media of your choice (art, video, picture or text) and include #ThanksToTheADA and @NewEnglandADA. This will look different for everyone, so have fun and be creative!

The Institute for Human Centered Design's New England ADA Center is thankful to the ADA for so many reasons. Below are examples:

#ThanksToTheADA we have access to healthcare including prenatal visits. Without access to care our son might not be here today.



#ThanksToTheADA many people with disabilities now live in their communities instead of institutions. The Supreme Court decided in Olmstead v. L.C. that unjustified segregation of people with disabilities constitutes illegal discrimination.



ADA 30th Anniversary



The Changing Reality of Disability in America: 2020

On **August 19th** from **12:00 p.m.** to **2:00 p.m.** the Institute for Human Centered Design (IHCD) will hold a virtual event to tell a compelling story about the experience of disability in America today. This event coincides with the 30th anniversary passage of the Americans with Disabilities Act. A key focus of our research is to go beyond the data to tell stories of people who inform our understanding of what full participation requires today.

This documentary film and research project reexamines the experience of disability in America, and shines a light on the stories of those all too often left behind. This project is funded by Dr. Allan R. Meyers Memorial Project.

[Register for free on Eventbrite.](#)

Read the full press release on **[the IHCD website.](#)**



Take this Survey to help improve emergency department experiences for people with addictions!

NAMI Mass is conducting a survey to learn more about people's experiences in Emergency Departments. The responses to this survey will help inform some of our work moving forward. If you answer yes to any of the questions below, please fill out our survey! It takes less than 10 minutes to complete and your responses are incredibly important.

In the past four years:

- Have you gone to an emergency department due to your mental health symptoms or a substance use crisis?
- Are you a peer specialist or recovery coach and have accompanied someone you support to the ED?
- Have you gone with a friend or family member to the ED because they were experiencing mental health or substance use issues?
- Are you the parent or guardian of someone under 18 who has been taken to the ED due to a behavioral health or substance use crisis?
- Do you have a psychiatric diagnosis or substance use history and feel that you were treated poorly when you went to the ED for an unrelated medical issue?
- Were you taken to the ED as a minor because you were having a mental health or substance use crisis?

If you answered yes to any of these questions, then we need your help. NAMI Mass is developing a training for emergency department staff to help improve the ways they respond to people in mental health and/or substance use crises. Please complete our brief survey below to share your experience. Your input will help inform the curriculum we are developing for this program. Thanks for your help!

[Take the Survey!](#)



INROADS: Intersecting Research on Opioid Misuse, Addiction, and Disability Services

Do you have lived experience with a disability?

Have you had problems with misuse of opioid medications (painkillers, such as oxycodone), heroin or fentanyl?

Have you thought about or received help for opioid problems? Has someone encouraged you to do so?

The INROADS Project wants to learn from people who have lived experience with **BOTH a disability and opioid problems**. We want to know more about issues around treatment for opioid problems, what has worked for you or has not worked in terms of getting help, and similar questions. It is an opportunity to share your experiences.

You are invited to participate in an interview or join a focus group with other people with lived experience with these topics.

If you are interested, are 18 years old or older, and do not have a guardian or legal representative, please contact Pili at DPC at 617-307-7374 or pkamenju@dpcma.org for more information.

We will talk with you about the focus group or interview and the bigger study, ask you a few questions, and answer any questions you may have. If you are the right fit, we will schedule a time to talk with you further.

If you participate in the focus group or interview, **you will get a \$50 gift card.**

The voice of people with lived experience is key. It helps us fill in gaps in what is known, from your perspective. It will help us make recommendations to treatment providers, policymakers and funders regarding how to best help people who have both disability and opioid problems and might help other people like you. Thank you!

Do you have questions about this research in general or the overall project?

Sharon Reif, PhD, a Senior Scientist at Brandeis University, is leading the overall project. She can be reached at 781-736-3924 or reif@brandeis.edu.

More information about the overall project may be found at:
<https://heller.brandeis.edu/ibh/research/inroads/index.html>.

For questions related to participation in human subjects research in general or concerns about this project, please contact the Brandeis University Human Research Protection Program at 781-736-8133 or irb@brandeis.edu.



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INROADS Project:
Intersecting Research on Opioid Misuse, Addiction and Disability Services

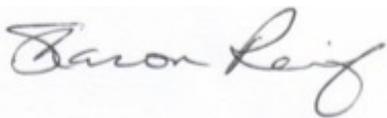
Greetings,

We are excited to be leading the INROADS Project, which brings a much-needed focus on opioid use disorders and treatment among people with disabilities. As part of its efforts, INROADS offers people who have lived experience with both disability and problematic opioid use an opportunity to share their voices to inform policy-making, treatment response initiatives, and funding practices.

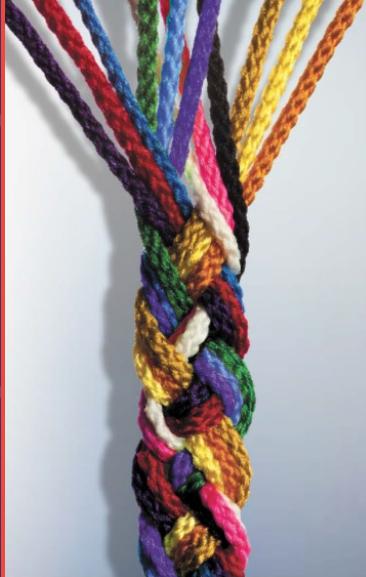
People can contribute by being a member of a focus group or through a phone or in-person interview, which includes an honorarium. We welcome your help in sharing this information with people who might be interested in confidentially sharing their experiences. An information flyer is attached. Dennis Heaphy and his team from the Disability Policy Consortium are leading this effort as our community partner and can be reached by emailing Pili pkamenju@dpcma.org or calling 617-307-7374 for more information or to set up an interview or focus group. Rachel Sayko Adams, PhD, co-lead of INROADS at Brandeis, can also be contacted about these activities (radams@brandeis.edu). As overall project lead, I'm happy to answer any INROADS questions (see contact information below).

We are grateful for your consideration of helping us on this important collaboration to illuminate the voices of individuals in the disability community affected by the opioid epidemic. This is a great opportunity for the disability community to share their voices on the lived-experience with opioid misuse. Thanks in advance for your support for this important initiative.

Best



INROADS is funded by a grant from the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR grant # 90DPGE0007). The INROADS activities and products are those of the authors, do not necessarily represent the policy of NIDILRR, ACL, or HHS, and do not imply endorsement by the Federal Government. INROADS research activities have been approved by the Brandeis University IRB.
Sharon Reif, PhD | Senior Scientist & Deputy Director | Institute for Behavioral Health



Join the Voices for Recovery:
Celebrating Connection

Save the Date!

Wednesday, September 23rd 2020

**MOAR's 30th Annual
Recovery Day Celebration
is Going Virtual**

**Hope and Action to Overcome
Racism, COVID, and Addiction!**

**Featuring Artists and Comedians
in Recovery**

Much, Much MOAR to Come

www.MOAR-Recovery.org

Maryanne@MOAR-Recovery.org | 617-423-6627 | @MOARRecovery

#RecoveryDayMA

Join the Voices
for Recovery:
**Celebrating
Connections**

FOLLOW RECOVERY MONTH
ON SOCIAL MEDIA

FACEBOOK

www.facebook.com/MOARRecovery/

TWITTER

twitter.com/MoarRecovery

YOUTUBE

www.youtube.com/watch?v=GCNGP269avY

National Recovery Month
(Recovery Month) increases awareness and understanding of substance use disorders and co-occurring disorders and encourages individuals in need of treatment and recovery services to seek help. *Recovery Month* celebrates individuals living their lives in recovery and recognizes the dedicated workers who make it possible. For more information visit



MOAR to Come!

CALL FOR ARTISTS IN RECOVERY



The Massachusetts Bureau of Substance Addiction Services, along with **MOAR** (MA Organization for Addiction Recovery) and the City of Boston's Mayor's Office of Recovery Services are looking for **Artists in Recovery** to participate in this year's **30th Annual Recovery Day Celebration**. This event commemorates the strength of those affected by addiction and supports those in recovery. Due to COVID this celebration will take place virtually.

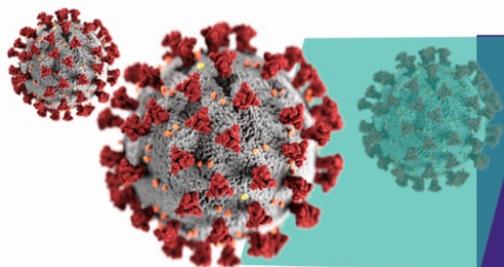
We are looking for artists in recovery who would like to perform and/or have their art displayed during our virtual program at the Recovery Day celebration. If you are interested in performing your artistic talents (music, dance, spoken word, comedy) or displaying your art (painting, sculpture, graphics) please fill out the following form and submit a sample of your art/talent to Athena@moar-recovery.org by **Friday, September 4th, 2020**. Final decisions will be made and selected artists will be contacted by **Friday, September 11th, 2020**.



www.moar-recovery.org | 508.981.4091 | Athena@moar-recovery.org

@MOARRecovery | #RecoveryDayMA

[**Click for MOAR COVID-19 Resources for Recovery**](#)



CORONAVIRUS

(COVID - 19 INFORMATION)

Resources for the Recovery Community

Massachusetts Organization for Addiction Recovery

MOAR

~ August 2020 ~

Our mission is to organize recovering individuals, families and friends into a collective voice to educate the public about the value of recovery from alcohol and other addictions.

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	Join the Voices for Recovery: Celebrating Connections			recoverymonth.gov		1
2	3	4	5	6	7	8
9	10 MOAR Boston 6:30 PM Meeting ID: 821 3962 8743	11 MOAR Marlborough 2:00 PM Meeting ID: 284 362 7884 Password: MOAR	12 MOAR Brockton 12:00 PM Meeting ID: 284 362 7884 Password: MOAR	13 MOAR Springfield 5:30 PM Meeting ID: 284 362 7884 Password: MOAR	14	15
16	17 MOAR Worcester County 6:00 PM Meeting ID: 284 362 7884 Password: MOAR	18 MOAR North Worcester County 6:00 PM Meeting ID: 284 362 7884 Password: MOAR	19 MOAR Northampton 3:00 PM Meeting ID: 284 362 7884 Password: MOAR	20 MOAR Middlesex East 6:30 PM Meeting ID: 836 3991 5933	21	22
23	24	25 MOAR North Shore 6:00 PM Meeting ID: 823 4997 6280	26 MOAR Holyoke 2:00 PM Meeting ID: 284 362 7884 Password: MOAR	27	28	29
30	31 International Overdose Awareness Day 	September is Recovery Month!		Save the Date! Wednesday, September 23rd 2020 9AM-2PM MOAR's 30th Annual Recovery Day Celebration is Going Virtual		

www.moar-recovery.org

Call: (617) 423-6627 Email: Maryanne@moar-recovery.org Facebook: @MOARRecovery

MOAR

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www.moar-recovery.org

See what's happening on our social sites:

