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To Chair Hoffman,

As an LPCC in Minnesota, with my private practice, Insight Counseling MN, LLC, I am writing to express my dedicated support for SF 3973. This legislation addresses critical issues surrounding the provision of care for individuals seeking recovery in sober homes. I have had the privilege of working as a mental health professional with the individuals who have been part of the substance or as I call it, the allergy to opioids, impacted individuals, who are part of the treatment seekers and sober house recovery community, who need to have actual solutions and support from SF 3973. The proposed changes ensure that required opioid antagonists are kept in a conspicuous location and prohibit the denial of medications prescribed and dispensed or administered by a licensed prescriber.

We as professionals are constantly supporting medication management, in combination with mental health management, and judgment reduction for opioid use disorder, and mediations have been proven to significantly reduce mortality, prevent relapse, and enhance the overall quality of life for individuals with opioid use disorder. The impact of these medications on the overdose crisis cannot be overstated. Studies demonstrate their superiority over traditional methods like abstinence, therapy, and substance use disorder treatment in recovery-related outcomes. Considering the presence of fentanyl in street opioids, it is crucial not to limit access to evidence-based treatments such as methadone and buprenorphine. By reducing problematic opioid use, these medications also help lower the risk of infectious disease transmission. So please support and promote legislation that actually will impact the lives of those with these struggles.

It is imperative to ensure that individuals receive the necessary medications as prescribed by the licensed professionals, and not be over-ridden by what has been the view or judgement of how someone "has to" do their recovery, based more on "moral view" instead of actual evidence-based updated knowledge, and then have put this personal view into "policies" at sober houses and promoted that the individual should go against what their professional team has recommended to address their complex healthcare needs effectively. People with substance use disorders often experience co-occurring mental health conditions, such as depression, anxiety, or post-traumatic stress disorder. Access to evidence-based medications plays a crucial role in their recovery, and decisions about medication should be made collaboratively between individuals and their licensed medical providers. Let us create an individual treatment plan or formula that actually works with options, instead of constantly blaming the individual for their lack of success according to societal opinion.

I would like to remind the legislatures how we encourage people to seek medication management for many problems an individual may experience and then we deny them those recommended medications. As a mental health professional who has worked at a treatment center, found it amazing that we had them evaluated by a psychiatrist for medication management, and if the client rejected any of the recommendations, they were judged by the court system, their therapists, the medical profession, and their families, as not really wanting to stop their opioid use or mental health concerns. So, in denying medications to individuals with substance use disorders not only constitutes a violation of the Americans with Disabilities Act (ADA), which prohibits discrimination against individuals in recovery who are not engaging in illegal drug use, but limiting the individual to put together that formula that may actually benefit their recovery. This brings about the question that if sober homes receive federal funding, such discrimination may also infringe upon Section 504 of the Rehabilitation Act. The Department of Justice Civil Rights Division released guidance in 2022 on "Combating Discrimination Against People in Treatment or Recovery," clarifying these protections. Additionally, the Legal Action

Center (LAC), in partnership with Vital Strategies, offers free legal services through a resource hub for "Legal Help for People Who Use(d) Drugs and Alcohol" to combat discrimination. The guidance provided by LAC for sober homes states that signs of discrimination may include: having policies that prevent individuals from being admitted based on their use of medications for opioid use disorder, having a restricted number of beds for individuals on these medications, requiring residents to taper off these medications, setting limits on allowed dosage of medications for admission, or implementing other policies and procedures that restrict access to medications. This also shows that we allow "non-medical professionals" to control what an individual must choose, having safety, food, water, shelter and a community, or their prescribed medications, which would you want your loved one to choose?

I am hoping you all see this bill as one that seeks to safeguard the lives of sober home residents by requiring them to maintain a supply of an opioid antagonist, such as naloxone, in a conspicuous location. Current Minnesota law allows these vital medications to be stored in inaccessible areas within sober homes, presenting a potential hazard. Similar to a fire extinguisher or an AED, these life-saving interventions are only effective when easily accessible. Every second matters in an emergency and ensuring the availability of naloxone will save lives.

I, as someone working to find solutions so people who struggle with this allergy and their families, can be hopeful that legislation will support their beliefs there are some actions within range, to make a difference, like what is outlined in SF 3973, so I urge you to take action and give your full support to SF 3973 and advocate for its swift passage. Together, we can make meaningful progress in combating stigma in substance use and recovery communities, bringing about lasting change to Minnesota families.

Thank you for your attention to this critical issue and to show everyone in Minnesota has value,

Jo Ellen Diers, MA LPCC LMHC
Insight Counseling MN, LLC

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