

Kentucky Addiction Policy Advocacy Council (KyAPAC) State Legislative Policy Priorities

A coalition of individuals in recovery and organizations who support those in recovery to further the integration of recovery supported spaces across the commonwealth.

Value-based Payment models: Value-based payment (VBP) models pay healthcare providers based on the value rather than the volume of services. Use of these models has been concentrated in physical health services. VBP models have the potential to support the integrated and coordinated care that is necessary for the complex and continuing medical and recovery support needs of individuals with SUDs.

(https://store.samhsa.gov/product/exploring-value-based-payment-substance-use-disord er-services-united-states/pep23-06-07-001)

Peer Support Certification & Supervision: We know that many peer support providers face burnout, challenging paths to advancement, and lack of infrastructure and regulation. A report published by SAMHSA just announced these facts that was produced from a study done by Live & Learn in collaboration with SAMHSA. There should be opportunities for structuring the workforce and creating a stronger and clearly defined path for advancement. (https://www.livelearninc.net/cps)

Clean slate & Expungement: We have identified opportunities that will allow for people who currently qualify for expungement to be able to automatically have this facilitation on their behalf by the justice system. The idea is to remove barriers that have been identified from an archaic system. This will allow for already qualified persons to move forward in a way that will support the advancement of upward mobility for people in recovery. (https://spectrumnews1.com/ky/louisville/news/2024/10/23/the-clean-slate-act)

Prevention in Primary Education: We conducted a needs assessment to community members and the responses were overwhelming. Over half (53%) of respondents indicated that we needed to institute more programming in primary education around prevention for SUD. The Kentucky Attorney General's office has done amazing work to create a prevention program tailored to Kentucky's youth, however, there is no requirement for the Kentucky public school system to use this program.

(source: People Advocating Recovery Legislative Priorities Survey 2023)

(https://kentuckylantern.com/2024/09/10/kentucky-ag-gets-green-light-to-spend-millions-in-opioid-blood-money-on-youth-prevention/)



Kentucky Addiction Policy Advocacy Council (KyAPAC) Federal Legislative Policy Priorities

10% Set Aside for Recovery Support Services for the block grant funding from Substance Use Prevention, Treatment, and Recovery (SuPTR): We would like to see our federal policy appropriate a carve out that will allocate 10% of the total funds from the SuPTR block grant for each individual state. The idea would be that 10% of the total funds would be used to directly or indirectly fund specifically recovery support services outside of clinical spaces, which is detrimentally under or unfunded entirely. This includes programs like, recovery community centers, collegiate recovery programs/communities, peer support in the workplace, and transitional housing (level 1 or 2 - NARR). (https://store.samhsa.gov/product/funding-recovery-support-services-through-suptrs-block-grant/pep24-02-007?utm_source=SAMHSA&utm_campaign=85d6ec293c-EMAIL_CAMPAIGN_2024_10_25_01_36&utm_medium=email&utm_term=0_-85d6ec293c-%5BLIST_EMAIL_LID%5D, and more)

Reauthorize the office of Recovery: In the current budget there is not a specific carve out for the office of recovery to continue their work. The work that the Office of Recovery does to ensure that voices of those with lived experience provide valuable expertise to programs that will help to support individuals in recovery and those who are initiating recovery can not be overstated. (https://www.naco.org/resource/2025-appropriations-tracker)

Naloxone & Harm Reduction available in all public spaces: American Medical Association (AMA) also calls for having naloxone in public spaces next to AED. Many districts and universities are independently adopting such policies that support the expansion of access, however, not all have moved into this direction. It is vital that we continue to make the opioid antagonist as widely available as possible, this will help to ensure people will be able to find and can reverse it, immediately.

(https://www.ama-assn.org/delivering-care/overdose-epidemic/put-naloxone-next-defibrilators-public-places)