Sober Houses and Other Problematic Issues in Florida's Drug Overdose Epidemic

Florida has become a medical vacation destination as parents send their adult children there for treatment. Result: a massive recovery industry has been created with little oversight – until now.

NOPE Task Forced asked the State Attorney Office in Palm Beach County to explain what is being done to fight back against those who are taking advantage of mostly young people who are coming to Florida to recover from drug addiction.

In the essay below, attorneys and Investigators from the State Attorney's Office discussed statewide efforts they are leading, and detailed the disturbing statistics on the local overdose rates:

We are in the midst of a national opioid crisis. Its epicenter is Florida, and ground zero is Palm Beach County.

The crackdown on pill mills dispensing opioid drugs, such as OxyContin, has contributed to the rise in heroin addiction. The introduction of synthetic opioids such as Fentanyl, 100 times more potent than heroin, and Carfentanil, 1000 times more potent, have put us on a pace to double the number of overdose deaths in 2016.

The good news: well-intended Federal laws, including the Mental Health Parity and Addiction Equity Act of 2008 and the Affordable Care Act of 2012, have dramatically increased required insurance coverage for behavioral health issues, including drug treatment. At the same time, the Americans With Disabilities Act and the Fair Housing Act have combined to limit government oversight of Sober Homes that house persons receiving drug treatment.

All of this has made Florida a medical vacation destination as desperate parents continue to send their adult children here for treatment. As a result, the flood of out-of-state patients, with insurance covering more lucrative out-of-network programs, has created a billion-dollar industry in Florida, with very little oversight.

Recognizing the issue, the Florida Legislature asked State Attorney Dave Aronberg to form a Task Force to study the issue and recommend changes to Florida law and administrative rules to combat this crisis.

Mr. Aronberg established three groups. First, a Law Enforcement Task Force to go after the rogue players in the treatment and sober homes industries, using current laws. Second, a Proviso Task Force was created to study the issues and make specific recommendations for positive change through legislation, agency funding and oversight. Lastly, a third, more

inclusive group was created including a broad based combination of industry, public and private individuals to further study the problem and make recommendations for solutions.

The Law Enforcement Task Force includes state and local investigators from seven different agencies and has undertaken investigations that have resulted in eight arrests to date. Both the Proviso and Larger Task Force groups have been developing proposed legislation to strengthen state criminal laws to combat patient brokering, insurance and marketing fraud.

As important, the Task Forces have been working to develop licensing and oversight recommendations, including adequate funding of the Department of Children and Families (DCF) to enable this administrative body to take a more proactive role in oversight of both the treatment industry and the sober homes that house patients in active treatment. Lastly, unlike healthcare services in general, there are few requirements that drug treatment personnel be licensed or adhere to minimal educational standards. The Task Force will be recommending licensing including minimal qualifications for both marketing and treatment personnel.

Currently, the legislative proviso establishing the Sober Homes Task Force will sunset on June 30, 2017. The legislature will receive an interim report with recommendations on January 1, 2017. Specifically, the Task Force will be recommending that the legislature adopt enhanced penalties for patient brokering as well as create a fraudulent marketing statute, making it a felony to knowingly and willfully make material misrepresentations to prospective clients and their families. In addition, the Task Force will recommend that a treatment provider may not refer a patient to, or accept a patient referral from, a sober home that is not certified by the Florida Association of Recovery Residences (FARR).

The Task Force will also be recommending that the legislature take steps to adequately fund DCF through increased licensing fees and fees for service, as well as providing enhanced oversight capability for DCF to monitor both providers and sober homes receiving patient housing subsidies from providers, in the same manner as healthcare services licensed by the Agency For Health Care Administration (AHCA).

The Task Force will ask the legislature to adopt language in other healthcare statutes making substance abuse treatment licenses a privilege, rather than a right. This change will give DCF the ability to better scrutinize both the application and ongoing operation of substance abuse treatment providers.

## Statistics:

As of August 31, 2016, DCF provided statistics to the Sober Homes Task Force as follows:

- 1) There were 931 substance abuse treatment providers licensed in Florida
- 2) These 931 providers hold 3,417 separate license components
- 3) The Southeast Region (Palm Beach, Broward and the Treasure Coast) had 321 licensed providers (34%) with 1,307 component licenses (38%)

- 4) Between April-July, 2016, the Southeast Region received 241 provider application packets for licensing of 606 separate component licenses.
- 5) 63 of these packets were from new providers
- 6) The total number of licensing specialists in the State of Florida is 25
- 7) The total number of licensing specialists in the Southeast Region is 9

## Overdose statistics:

- According to the PBC Medical Examiner, there were 377 opiate overdose deaths in Palm Beach County alone in the first 9 months of 2016. (on pace to double the total number (216) recorded in 2015)
- 2) According to Palm Beach County Fire Rescue (PBCFR) along with municipal fire department records, there were 3,012 overdose "runs" through October 24, 2016. The number of overdose victims who may have been dropped off at area hospitals by civilians is unknown, but one hospital reported over 300 in October, 2016.
- 3) Cost estimates for PBCFR are between \$1,000-1,500 per response, resulting in a cost to PBC of between \$4-6 million dollars through October, 2016. PBFR Narcan (overdose antidote) expenditures were \$55,000 in fy 2015, \$180,000 in fy 2016. PBFR recently placed a \$200,000 order for additional doses of Narcan.