

C&RC rter 2 Newsletter tember 2022 Edition **NEWSLETTER**

Hello Stakeholders!

am pleased to announce our Fall Stakeholder Meeting will be held in Dunedin, Fl. on October 17-18.

Elections for the open Caucus seats will be held during this meeting. Please be on the lookout for emails pertaining to the nominating and voting procedures.

would also like to ann unce a new "customer portal" that will be launched soon. This portal will allow member boards to view ent and past invoid which will provide more control ccount payables

As I have previously stated, a strong member board means a strong IC&RC. In support of the boards, I will be participating in four board conferences to market our products and build relationships.

Please reach out to me if you would like discuss how IC&RC can support your board.

As always, I am grateful for your support and hard work! Sincerely.

Mark Attanasi

Brief Biographical Sketch for Lee A. Dal

In addition to serving as IC&RC's Vice-Chair, and the Northeast Caucus Chair, Lee Dalphonse is also Chair of the Rhode Island



phones is also Chair of the Rhode Island Certification Board (RICB), and a Member of the Rhode Island Board for the Licensing of Chemical Dependency Professionals (RIBLCDP). Lee's passion for promoting professional certification and licensing standards began in 1991 when he was first appointed to the RI Certification began in 1991 When he was first appointed to the KI Certification Board. Over the course of his career, Lee has served in a variety of related leadership roles that have included serving as Chair of RIBLCDP, and President of the Rhode Island Mental Health Coun-selors Association early in the formation of those Boards. Lee's long history of volunteersim has earned him several awards, including: Rhode Island College's Psychology Faculty Senior Award in 1990; the Counselor of the Year Award by the Rhode Island Association of Alcohol and Drug Abuse Counselors in 1993; and the Community Champion Award granted by the Northern Rhode Island Community Mental Health Center in 2004.

Lee holds dual licensure and certification in addiction and men tal health treatment, and he has earned a Bachelor of Arts degree in Psychology, a Master of Arts degree in Educational plogy, a Certificate of Advanced Graduate Studies in Mental Psychology, a Certificate of Advanced Graduate Studies in Mental Health Counseling from Rhode Island college; and a Doctorate degree in Health Administration from Central Michigan Universi-ty. Lee's doctoral dissertation was an investigational study of the association between State-level health and economic indicators, and Deaths of Despair (suicide, alcohol, opioid, and other drug related deaths)



Stacey L. Langendoerfer is the Executive Direct tor and the Missouri Credentialing Board (MCB) and the Missouri Association of Treatment Court and the Missouri Association of Treatment Court Professionals (MATCP) since 2012. Prior to these positions, she worked as the administra-tor of the Boone County Mental Health and DWI Courts (or the Document Courts for 10 years

Stacey has served on multiple workgroups on a local, state, and national level to enhance the services provided by her organizations. Stacey graduated from the University of Missouri-Columbia, Summa Cum Laude, with a Bachelor's in Social Work and from Columbia College with a Master of Science in Criminal Justice.



In late June, the House Labor, Health and Hu-man Services Subcommittee for Appropriations released its committee report and bill. While this is only one part of the process, the news was extremely positive for recovery advocacy and for the policy priorities of IC&RC.

Our primary concerns remain the (newly re-named) Substance Use Prevention and Treatment Block Grant, and the State Opioid Response grants. Funded last year at \$1.9 billion, the House recmmended a level of \$2.4B. For the State Opioid Response grants, ere is a proposed increase of \$250 million

Workforce also remains one of our top priorities. The Health Re workforce also remains one of our top priorities. The Health Re-source Services Administration (HRSA) is responsible for administer ing workforce programs that will strengthen the behavioral health workforce. These programs also received considerable increases.

The Committee supports increased funding for BHWET (Behavioral Health Workforce Education & Training) to increase the quality and health workforce could all in a manning to increase the quarty and supply of behavioral health professionals and access to behavioral health services, in particular for children, adolescents, and transi-tional-aged youth at risk for behavioral health disorders

Substance Use Disorder Treatment and Recovery (STAR) Loan Re-payment Program —The Committee includes \$28,000,000 for this program, \$4,000,000 above the fiscal year 2022 enacted level and Jingg and 1, 94,000,000 addred the local year 2022 enatured tever and the same as fiscal year 2023 budget request. An estimated 21 mil-lion Americans needed treatment for SUD in 2017, but only 4 mil-lion received any form of treatment for SUD. The Bureau of Labor Statistics data has cited tremendous workforce shortages in the statistics data has cited tremendous workforce shortages in the statistics and the statistics and

SUD treatment profession. Without strategic investments in the SUD workforce, this gap will not close, and more lives will be lost. This program addresses shortages in the SUD workforce by providing for repayment of education loans for individuals working in a fulltime SUD treatment job that involves direct patient care in eithe a Mental Health Professional Shortage Area or a county where the rdose death rate exceeds the national average

There is also support in the report for peer support specialists, a rapidly growing sector of the workforce. There is no sector of the vorkforce that gets more attention in policy circles than peers, which makes our need for standardizing the profession via creden tialing more important than ever.

Peer Support Specialists in the Opioid Use Disorder Workforce – Within the total for BHWET, the Committee includes \$14,000,000, the same as the fiscal year 2022 enacted level, to fund training, in-ternships, and national certification for mental health and SUD peer upport specialists to create an advanced peer workforce pres ork in clinical settings.

We remain perplexed as to what the language concerning a "nation al certification" means. We continue to hold discussions with SAM-HSA and ONDCP to determine what the goal of such an endeavor is The Biden administration seems committed to creating some sort of national standard, but we at IC&RC are working to make them inderstand that these standards already exist in our exams and dentials