

March 11, 2025

Honorable Kathy Hochul, Governor
Honorable Andrea Stewart-Cousins, Senate Majority Leader
Honorable Carl Heastie, Assembly Speaker
NYS Capitol Building Albany, NY 12224

Dear Governor Kathy Hochul, Majority Leader Andrea Stewart-Cousins and Assembly Speaker Carl Heastie,

We write to you with deep concerns about New York's current response to the opioid and overdose crisis. As health care and social service providers, public defenders and legal advocacy organizations, community-based organizations, and people impacted by the war on drugs, we have worked for decades to reduce criminalization of people who use drugs and increase access to health-based community solutions.

For the first time in nearly a decade, overdose deaths statewide markedly declined. In New York, deaths decreased by 17%, from 6,880 to 5,964 between July 2023 to 2024.¹ This decrease is the result of the state's investment in a combination of health approaches – expanded access to medication for opioid-use disorder, naloxone, drug checking, and education on harm reduction.¹

However, this decline fails to capture the full picture: lifesaving services have yet to see equal impact among all communities. Across the country, Black², Latine and Indigenous people continue to experience climbing rates of preventable overdose deaths. In our state, while deaths among white New Yorkers have stabilized in recent years, deaths have tripled for Black New Yorkers and nearly doubled for Latine and Indigenous New Yorkers. The crisis is not abating, but rather being concentrated in our underserved and over-criminalized communities.

From the state to the federal level, we are seeing a lack of investments and implementation in health programs to save lives, and shift toward increased criminalization. Congress passed the Halt All Lethal Trafficking of Fentanyl (HALT) Act, and it is expected to pass the Senate. This bill will permanently schedule all fentanyl-related substances as Schedule I, many of which may be benign or have the potential for therapeutic uses, and block potential research that could uncover new overdose medications. If passed, the HALT Fentanyl Act would enact mandatory minimum sentences that are more severe than current penalties related to fentanyl – allowing for harsh and unjust sentences that do not consider individual circumstances, perpetuate racial disparities in the federal prison population, and divert resources away from health interventions that are desperately needed to curb the overdose crisis.

New York cannot follow this trajectory. The State must reject proposals that will repeat some of the worst harms of the War on Drugs and contribute to more preventable overdose deaths.

¹ <https://oasas.ny.gov/overdose-death-dashboards>

² <https://stateline.org/2024/10/29/overdose-deaths-are-rising-among-black-and-indigenous-americans/>

We urge the legislature to reject current FY26 budget proposals that:

- Significantly expand the state's schedule of controlled substances, including fentanyl-related substances – Part O of the Article VII Health & Mental Hygiene bill
- Use the odor of cannabis as a pretext for allowing law enforcement to restart unconstitutional racial profiling of drivers
- Enhance criminal charges related to driving by expanding the definition of “drug” to mean any substance or combination of substances – cough syrup, allergy medication, prescribed medications, and even caffeine or energy drinks
- Expand involuntary psychiatric hospitalization and forced treatment.

These proposals are certain to increase criminalization, incentivize a more potent and unpredictable drug supply, exacerbate overdose deaths and public suffering, and impose barriers to care disproportionately for Black and brown communities that bear the brunt of the overdose crisis.

New York State must prioritize investments and implement health-based strategies to save lives.

We, the 66 below signed organizations, urge the legislature to take the following steps to immediately address the overdose crisis.

Pass the Drug Checking Services Bill (S56/A808). Drug checking provides information within the context of an unstable supply to inform people to make positive behavior choices on how to consume their substances – which can save lives. This bill provides immunity to all parties involved in drug-checking infrastructure, and would clarify the legal ambiguity in which Drug User Health Hubs currently operate the 11 drug checking programs throughout the state.

Pass the Overdose Prevention and Recovery Act (S55/A69). Despite record-high overdose rates, the Department of Health's Office of Drug User Health is at risk of losing critical life-saving infrastructure through unsustainable funding. The final budget must ensure that 20% of Opioid Stewardship funds are allocated to recovery services and supports, and 20% are allocated to the Department of Health to fund the harm reduction infrastructure; syringe service programs, drug user health hubs, and drug checking services.

Pass legislation to permit providers to dispense 72 hours of Medication for Opioid Use Disorder (S3416). In 2023, federal rules were changed to allow practitioners the ability to dispense 72 hours of methadone or buprenorphine to individuals struggling with acute withdrawal symptoms. New York law still only permits dispensing of 24 hours worth of medication, requiring people to come back each day to receive their dose and raising the possibility of overdose while awaiting treatment. 72 hours of medication ensures access to longer term treatment, particularly on weekends when opioid treatment programs may be closed.

Protect Overdose Prevention Centers. The state has the authority to authorize OPCs across New York State. Empirical research and examples from other states have demonstrated that it is not only possible to implement OPC programs, it is imperative for public health. OnPoint NYC operates the only two OPCs in the United States, and since opening in 2021, staff have intervened to prevent over 1,800 overdoses.

OPCs are wellness hubs that not only prevent overdose deaths, but also connect people to wraparound services such as healthcare and housing, clean up syringes and other drug litter to keep their neighborhoods safe, and provide spaces of healing and community. OPCs must be accessible and promoted statewide in lieu of criminalization, and as diligently as any crucial public health program.

Reject high-dose naloxone. Naloxone can and should be utilized to reverse overdose in the standard 4mg dose. High-dose naloxone has been rejected by empirical research, the NYS Department of Health and harm reduction providers on the grounds that it is more costly, risks complex and painful withdrawal symptoms that may require additional health interventions and provides limited evidence of its efficacy.³ Research and practice have demonstrated that even smaller doses of naloxone can be effectively utilized to reverse opioid overdose.

Pass Increased Reporting for Medication for Opioid Use Disorder in Jails and Prisons (A3936). Since 2022, all New York State prisons and jails have been mandated to provide Medication for Opioid Use Disorder (MOUD) for people who are incarcerated with substance use disorders. This bill requires strict reporting about program implementation to assess compliance issues with access and racial disparities.

As New Yorkers who continue to mourn and bury our loved ones at astounding rates, there is an opportunity for the state to improve countless lives by implementing public health solutions. We urge you to take the above steps to address the overdose crisis – the state cannot repeat the harms of the past.

Sincerely,

³<https://harmreductionjournal.biomedcentral.com/articles/10.1186/s12954-024-00994-z>

ACR Health
Actions Communautaires pour le
Développement de la Femme (ACODEFEM)
Alliance for Positive Change
Bedford Stuyvesant Family Health Center
BronxWorks
Capital Area Relief & Liberation
CASES
Catholic Charities Care Coordination Services
Coalition of Medication Assisted Treatment
Providers and Advocates (COMPA)
Community Access
Community Action for Social Justice
Decarcerate Tompkins County
Drug Policy Alliance
EAC Network
Evergreen Health
Families On The Move of NYC, Inc.
Family Services Network of New York
For the Many
Friends of Echo Park
Friends of Recovery- New York
GMHC
Harlem United
Harm Reduction LTD
Housing Works
It Aint DOPE nyc
Justice Committee
Justice Ministries Committee, Presbytery of NYC
Kelly S. Ramsey Consulting, LLC
Lakeview Tenants Association Inc.
Law Office of Peter W. Beadle
Legal Action Center
Legal Aid Society
Long Island Social Justice Action Network
Mount Sinai Health System

NAHT
National Black Harm Reduction Network
National Working Positive Coalition
New Hour
New Hour Li
New York Civil Liberties Union
New York Doctors Coalition
New York State Harm Reduction Association
NYCASH (New York City Against Segregated
Healthcare)
NYCDS
NYS Jails Justice Network
NYU Law Student Advocates for Empowerment
through Harm Reduction
OnPoint NYC
Outreach Recovery Center-Outpatient
Partnership for the Public Good
Peer Network Of New York
Reach Medical
Religious Society of Friends/NYYM
RocUbuntu
Safety Net Project - Urban Justice Center
Southern Tier AIDS Program
St. Ann's Corner of Harm Reduction
Streetwork Project
Surveillance Technology Oversight Project
Treatment Action Group
Truth Pharm
Vassar College Students for Sensible Drug Policy
VOCAL-NY
WESPAC Foundation, Inc.
Western New York Independent Living Family of
Agencies
Youth Represent

cc:

Jennifer Best, NYS Assembly Secretary to The Speaker for Program and Policy,
Jonathan Lang, Secretary of Majority Counsel & Program
Dorothy Powell, Counsel to the Majority at New York State Senate