

Statement to Judiciary Subcommittee on Constitution and Civil Justice
Hearing “Examining Sober Living Homes”
Rep. Judy Chu
September 14, 2018

Chairman King and Ranking Member Cohen, I want to start by thanking you for inviting me to testify on this important issue, which has impacted all of our districts.

I appreciate that this Subcommittee is examining the role of sober living homes in our communities, and how they contribute to the recovery process for those suffering from addiction. Sober living homes, also known as recovery residences, offer a place to stay for those who have completed treatment and are trying to rebuild their lives. However, the lack of regulation around the operation of these homes is of serious concern, which means that these facilities may be unequipped to handle patients at risk of overdose, or do not employ staff with specialty training. In the worst cases, some bad actors do not encourage recovery at all but exploit vulnerable individuals in order to collect insurance payments. This can mean life or death for people like Tyler, from my district of Pasadena, California. Tyler died from an overdose after his sober home didn’t recognize the symptoms of his overdose. Nor did they have Naloxone, the medication that can reverse an overdose, on hand. Tyler was only 23 years old.

Unfortunately, this was not an isolated incident. I have heard from advocates in Arizona, Pennsylvania, Missouri, Florida and Ohio who are concerned for their friends and family members living in unregulated sober living facilities. I would like to submit for the record a New York Times article from 2015 and a recent report from the Department of Justice outlining abuse and fraud at sober homes in New York and Florida. These reports describe sober living facilities that lacked access to Naloxone, ordered unnecessary tests on residents to exhaust their insurance benefits, and required residents to relapse and re-enter treatment so resident directors could claim some of the Medicaid benefits.

Licensing for recovery residences, or sober living facilities, varies substantially from state-to-state, and there are facilities in every state that operate without the necessary licenses. Further, oversight of these facilities is minimal, so patients and their families struggle to distinguish good actors from the bad ones. For some of these individuals, they may not discover that a facility is negligent until it is too late.

That is why, after hearing about Tyler’s death from his friend Ryan Hampton, a recovery advocate in my district, I worked with the National Alliance for Recovery Residences to craft legislation that would help address this problem without further victimizing the people we are trying to help. As a result, I introduced H.R. 4684, the Ensuring Access to Quality Sober Living Act. My bill directs the Department of Health and Human Services to develop a set of best practices for residential recovery facilities so patients, families, and states can distinguish quality sober living facilities from sites that are fraudulent or unequipped to offer appropriate assistance to their residents. H.R. 4684 requires HHS to disseminate these best practices to each state and authorizes the agency to provide technical assistance and support to states that wish to adopt or implement these best practices.

In addition, the bill allows states, who are struggling to address the opioid crisis and all of its consequences, to work with HHS to help set-up criteria to designate *quality* sober living facilities. These benchmarks include common-sense measures like requiring that all fees and charges be explained to residents before they enter a binding agreement, that paid work performed at the facility by the residents be completely voluntary and not impede the recovery process. And to avoid deaths like Tyler's, the bill requires Naloxone to be available and accessible, and that staff and residents are trained to use it in emergencies. H.R. 4684 also ensures that individuals looking for a place to stay will not be turned away because they have been prescribed medication assisted treatment, or MAT, by their physician, to help them recover.

H.R. 4684 provides an alternative to undermining existing civil rights law by creating a new set of standards so that these facilities are abiding by best practices and not presenting a harm to the surrounding communities. And for communities concerned with these facilities within their jurisdiction, these sets of best practices will help ensure that those that do open in the community are operating at the highest standard.

H.R. 4684 is a bipartisan bill, with cosponsors including Congressmembers Mimi Walters, John Lewis, and Greg Walden. It has been endorsed by the National Alliance for Recovery Residences, the American Psychological Association, and the Orange County Board of Supervisors. H.R. 4684 passed the House unanimously, and has been included in the bipartisan, bicameral H.R. 6, the SUPPORT Patients and Communities Act, which will be considered by the House later today.

Thank you again for taking the time to hear from us on ways to address this growing crisis. I ask that as you continue to consider legislation on this issue, you work with recovery advocates and those seeking to help vulnerable individuals re-enter society after their battle with addiction.