



Ohio Financial Professionals' Guide to Servicing Clients and Families with Substance Use Disorder



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The information and data in this course are current as of April 2023. If you are taking this course after April 2023, please be aware that some information could be outdated. If you need the most up-to-date information, you may contact the Ohio Department of Commerce for assistance. The information provided in this course does not, and is not intended to, constitute legal advice. Information in this course may not constitute the most up-to-date legal or other information. Course participants should contact their attorney to obtain advice with respect to any particular legal matter. The information provided in this course is for educational and informational purposes only and does not constitute providing medical advice or professional services. The information provided should not be used for diagnosing or treating a health problem or disease, and those seeking personal medical advice should consult with a licensed physician.



Introduction

The *Recovery Within Reach* program launched in August 2022 to educate Ohioans about the financial challenges of the addiction crisis and provide resources for them to access treatment and navigate treatment costs. We knew from research on the issue and stories in financial trade media that financial advisers were, and are, key and trusted guides who could help Ohioans successfully find affordable treatment options for family members facing addiction. However, there was a lack of specific training on the subject for financial professionals.

Our 2022 survey of Ohio-based advisers found that:

- Financial advisers underestimated the number of clients who grapple with opioid use disorder, either personally or within their families;
- 81% of financial advisers who took the survey said they had not received training on how best to assist clients suffering from opioid use disorder; and
- 74% of financial advisers said they would consider training, if offered, to identify and better serve client families in need.

Our advisers told us they were most interested in training on: identifying the signs of addiction; knowing where to refer clients for help; and learning more about resources for mental health and addiction counseling services in their communities. The research and response from our advisers led us to develop the *Recovery Within Reach* Continuing Education Course.

This booklet contains materials referenced in the training course and provides additional information to supplement what you learn. A printable version of this booklet and companion handouts can be downloaded for free on the campaign website, RecoveryWithinReach.Ohio.Gov. We encourage you to refer to these materials before client meetings so you're prepared to address substance use disorder in a professional manner.

The *Recovery Within Reach* program and Continuing Education Course are made possible through collaboration with many partners. We are especially grateful to Governor Mike DeWine for his leadership on addressing addiction and mental health issues in Ohio and would also like to thank representatives from RecoveryOhio, the Ohio Department of Mental Health and Addiction Services, the Ohio Department of Insurance, and our agency staff who made this training possible.

As we say in our campaign, "Addiction is never part of the plan, but recovery is within reach." Thank you for taking the course and for helping your client families on their journey to recovery.

Sincerely,



Sherry Maxfield

Director
Ohio Department of Commerce



Andrea Seidt

Commissioner
Division of Securities

SUBSTANCE USE DISORDER: WHAT IT IS AND WHY FINANCIAL PROFESSIONALS SHOULD CARE

What Is Substance Use Disorder or SUD?

Substance use disorder is a chronic but treatable brain disorder. The National Institute of Mental Health, the lead federal agency for research on mental disorders, defines substance use disorder (SUD) as “a mental disorder that affects a person’s brain and behavior, leading to a person’s inability to control their use of substances such as legal or illegal drugs, alcohol, or medications.” SUD symptom can range from moderate to severe, with the most severe form being addiction.

<https://www.nimh.nih.gov/health/topics/substance-use-and-mental-health>

What are Examples of Addictive Substances?

There are many different types of addictive substances that can trigger SUD. Opioids are a common example. Opioids include the entire family of opiates and opioids, chemicals that bind to the body’s pain receptors to reduce pain. Our bodies naturally reduce pain through endorphins, but sometimes, those are not enough to fully alleviate pain. In those cases, medical professionals may prescribe opioids to help.

- Opiates are natural substances derived from opium in a poppy seed. Opium has been used to treat pain for centuries. Examples of other opiates include morphine, codeine, and heroin.
- Opioids are fully synthetic substances, designed in a lab to produce the same pain reduction effect as opiates. Opioids are about 50 to 100 times more powerful than opiates. That strength has contributed to the increase in overdose deaths. Just three tiny grams of some opioids — the rough equivalent of half a teaspoon of salt — can result in a fatal overdose. Examples of opioids include dextromethorphan, dextropropoxyphene, loperamide, hydrocodone, oxycodone, oxymorphone, meperidine, methadone, fentanyl, and carfentanyl.

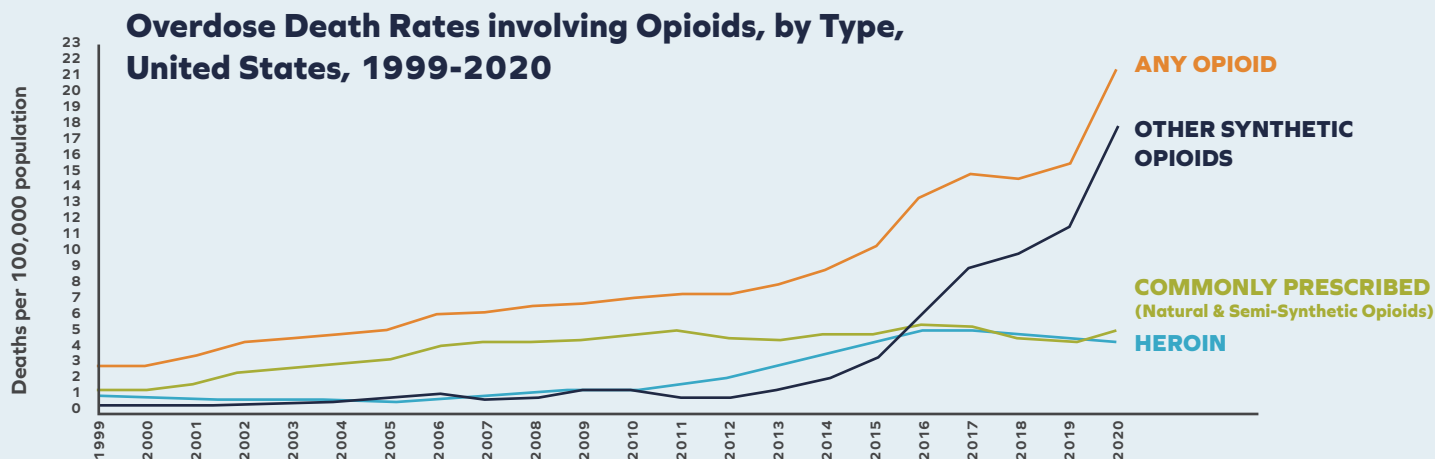
What are the Effects of SUD?

Substance use disorder is a life-threatening disease with numerous adverse effects to people with the disorder, to the people who love them, and to society as a whole. The effects are so severe and have become so pervasive that SUD is now considered a national epidemic.

- 20.4 million people in the United States were diagnosed with SUD in 2019. Only 10.3% of the people diagnosed received treatment for the disorder.
- There were more than 100,000 deaths from substance overdose in 2020. That is more than the number of deaths from car accidents and gun violence combined.
- 75% of people with SUD reported their opioid use started with a legal prescription drug. Forty-four (44) people die every day from overdoses involving prescription opioids.

Why Financial Professionals Should Care

Financial professionals help their clients attain financial security and achieve important life goals including home ownership, higher education, retirement, and the provision of financial support to those they love. SUD can quickly and irreparably derail a client from achieving those goals. A financial professional may be the first or only person outside of the client's family in a position to spot and address SUD. Clients work hard to build wealth and retirement assets, but there is nothing more valuable to them than the lives of their family and loved ones. Becoming educated about SUD is the first step that a financial professional can take to help clients protect the people they love if and when SUD arises.



SOURCE: CDC/NCHS, National Vital Statistics System, Mortality, CDC, WONDER, Atlanta, GA; US Department of Health and Human Services, CDC; 2020. <https://wonder.cdc.gov/>.

Data Resources:

- Centers for Disease Control and Prevention: Opioid Data Analysis and Resources (June 1, 2022), <https://www.cdc.gov/opioids/data/analysis-resources.html>
- National Institute on Drug Abuse: NIDA IC Fact Sheet 2022, <https://nida.nih.gov/about-nida/legislative-activities/budget-information/fiscal-year-2022-budget-information-congressional-justification-national-institute-drug-abuse/ic-fact-sheet-2022>
- National Institute on Drug Abuse: Prescription Opioids and Heroin Research Report (January 2018), https://nida.nih.gov/download/19774/prescription-opioids-heroin-research-report.pdf?utm_medium=email&utm_source=transaction
- National Safety Council, Injury Facts based on National Center for Health Statistics – Mortality Data for 2015-2020, <https://injuryfacts.nsc.org/all-injuries/preventable-death-overview/odds-of-dying/data-details/>
- Susan McDonald, In One Year of Pandemic, More Died of Overdose than Gun Violence, Car Accidents (November 18, 2021), <https://healthnewshub.org/in-one-year-of-pandemic-more-died-of-overdose-than-gun-violence-car-accidents/>

Lori's Story

Statistics do not tell the human story behind OUD. For that, it's best to talk to someone with lived experience. Lori Eisel is a financial adviser in Central Ohio whose son developed OUD as a teenager. When Lori's neighbor saw police and medics in her front yard after an incident involving her son, a neighbor was quick to promise secrecy. Lori remembers thinking: "Why would I try to hide this? I wanted other parents to know this is happening everywhere, including our suburb. We don't talk about it, but we need to."

When Lori heard about the Recovery Within Reach campaign, she volunteered to share her story in the hopes it would inspire other advisers to join her as a first line of defense for clients dealing with OUD and other substance use disorders. As Lori explains, advisers are well-positioned to spot the financial signs of substance use disorder. Through this campaign, Lori and other Ohio advisers can act on those signs and help clients access treatment resources.

How Ohio Is Dealing With the Opioid Epidemic

Ohio policymakers have worked diligently to combat the ever-changing nature of this crisis. In 2018, Governor Mike DeWine established the [RecoveryOhio initiative](#) along with the [RecoveryOhio Advisory Council](#), and has invested in the Governor's Cabinet Opiate Action Team to formulate strategies to try and stem opioid misuse across the state.

Governor DeWine's teams have implemented comprehensive, community-centered directives that have:

- increased law enforcement efforts to limit drug trafficking;
- implemented legislation to shut down pill mills;
- established opiate prescribing guidelines for physicians;
- expanded access to naloxone, an overdose reversal medication;
- promoted school and parent communication with youth;
- provided treatment to Ohioans involved with the criminal justice system; and
- provided treatment to low-income families across the state.

These initiatives have already decreased opioid prescriptions in the state by 3 million.

[RecoveryOhio](#) recently launched campaigns to address the problem of counterfeit pills, one of the newer threats in this epidemic. The campaign includes social media posts and downloadable fact sheets, available [here](#). The Ohio Opioid Education Alliance, meanwhile, has developed several campaigns addressing OUD in Ohio. The "[Beat the Stigma](#)" campaign is just one example, reforming negative attitudes and correcting misinformation about OUD.

Through the Recovery Within Reach campaign, the Ohio Department of Commerce joins these state partners, delivering resources as well as a message of hope and empowerment. As Governor DeWine noted in his 2023 State of the State speech:

“ We must not accept that mental illness and addiction are inevitable. Or that some of these illnesses can’t be prevented. Or that we have advanced treatment as far as it will go. Or that recovery is only for the few and the lucky. None of these things are true. To make meaningful change, we must... finally get to the root causes of mental illness and addiction. ”

— Governor Mike DeWine



If you feel your client or the client’s family member is in crisis, the Ohio Department of Mental Health and Addiction Services recommends calling 988, the national Suicide & Crisis Lifeline, which provides free and confidential emotional support to people in suicidal crisis, addiction crisis or emotional distress 24 hours a day, 7 days a week. The Lifeline is comprised of a national network of over 200 local crisis centers, combining custom local care and resources with national standards and best practices.

TOP 10 THINGS ADVISERS SHOULD KNOW

The financial effects of the opioid crisis and substance use disorder are very real for Ohio families. But we know — and we want families to know — that treatment works and recovery is possible. Cost should never stand in the way of treatment. Family finances should not be irreparably damaged by addiction. Research shows that 1 in 13 Ohioans live with substance use disorder, but our [statewide survey](#) suggests that financial advisers believe just 1% of their clients have had their finances impacted by opioid addiction¹. This shows a gap in knowledge, one the Ohio Department of Commerce hopes to address through its new campaign, [Recovery Is Within Reach](#)².

The campaign, led by the Division of Securities, was created to help Ohioans keep their families and their finances healthy, while providing financial advisers with access to critical information and resources.

Here are the Top 10 things you should know as a financial adviser before talking with your clients about opioid addiction.

1. Opioid use disorder is a national epidemic.

Each year, opioid addiction affects some [2.7 million people in the United States](#), with more than half addicted to prescription pills .

2. The opioid epidemic is here in Ohio and is likely affecting your clients.

One in 13 Ohioans has a substance use disorder, affecting all 88 counties in our state. Even if you have not been personally affected by the epidemic, chances are you have a client who has been.

3. Your client's most prized asset isn't the money you manage, it's the people they love.

Your clients might have hired you to help them build wealth, but they did that to support those they love. As a fiduciary and a friend, you will need to think bigger than investments and insurance. Helping them manage the financial effect of opioid use disorder will help them protect what matters most.

1. <https://recoverywithinreach.ohio.gov/for-advisers/resources-for-advisers/2022-statewide-adviser-survey>

2. <https://recoverywithinreach.ohio.gov/>

3. <https://www.cdc.gov/dotw/opioid-use-disorder/>

4. Your clients may be too embarrassed to ask for help, so you need to spot the signs.

Addiction is a tough issue that many people struggle to discuss, even with trusted advisers. Some clients may be good at hiding substance use disorder, too, so pay special attention to the following signs that could indicate your clients or their loved ones are experiencing substance use disorder.

- Missing appointments/not returning calls
- Change in spending habits
- Unexpected withdrawals from accounts
- Unusual account changes/beneficiary/address
- Late or missing payments on bills
- Problems at work/unemployment
- Family structure changes/new custody arrangements
- Reports of theft/stealing/missing money at home
- Strange or recurring accidents or injuries
- Traffic offenses involving driver impairment
- Drug and other criminal charges
- Overall decline in health and/or physical appearance

5. Someone has to open the door to “the conversation.” That someone is you.

If you think your client or their loved one is struggling with opioid use disorder but hasn’t confided that to you yet, create an environment that welcomes the discussion. Don’t forget to use those same emotional intelligence cues and communication skills that you have always used to discuss other sensitive topics.

- **Invite:** Affirmatively mention that you are there to help them overcome financial obstacles, including any unexpected personal and familial expenses like those occasioned by substance use disorders and addiction.
- **Ensure confidentiality:** Ensure confidentiality. Ensure confidentiality. (This bears repeating).
- **Listen:** With empathy and without judgment.
- **Acknowledge:** Thank them for trusting you and offer words of encouragement.
- **Implement:** Add the conversation to onboarding, discovery, and annual review process.

6. There are treatment facilities all across Ohio for every substance use disorder.

Whether your client is personally struggling with addiction or financially responsible for a loved one who is, your client might not know where to go for treatment at a reduced cost. Show them that recovery is within reach by searching RecoveryWithinReach.ohio.gov and find treatment options in your area.

7. Treatment costs vary depending on the stage and severity of the disorder.

As with any illness, treatment costs can vary. Check with your insurance provider. Many of these costs might be covered.

8. Treatment is not the only expense to consider.

Opioid use disorder can have collateral consequences that include unanticipated legal fees and court costs (for example, those associated with common traffic offenses and substance use or possession charges); unforeseen child/foster care needs; unemployment or partial employment; other medical and healthcare costs; as well as increased spending to cover the debts and obligations of recovering loved ones. Run through these possibilities with your clients and plan accordingly.

9. Some of your clients may be maxing out credit cards and draining retirement accounts when other assistance is available.

You are trained on financial strategies that can help your clients and their loved ones preserve assets and avoid unnecessary taxes and penalties. Make sure they start by maximizing insurance — visit the Ohio Mental Health Insurance Assistance Office to understand available mental health and addiction treatment benefits. And be sure to have them explore other resources like non-profit, faith-based and government programs. Our interactive map is a tool you can use to find treatment in your area, including non-profit, faith-based and government programs. Don't assume that your clients (or their loved ones) are not eligible for assistance. These programs, sliding scale fees, and payment assistance programs are widely available and apply based on the income of the person receiving the treatment.

10. You are not alone. Build your network and, remember, the State of Ohio is here to help.

Navigating the opioid epidemic can be a confusing, time-consuming, and often lonely process for those affected. Building strategic alliances with CPAs, attorneys, counselors, treatment centers, Medicaid and other insurance specialists, and other trusted professionals in your area will improve your client's chance for success. Visit [Recovery Is Within Reach](#) and [RecoveryOhio](#) to learn how your clients can achieve recovery without compromising their financial security.



If you feel your client or the client's family member is in crisis, the Ohio Department of Mental Health and Addiction Services recommends calling 988, the national Suicide & Crisis Lifeline, which provides free and confidential emotional support to people in suicidal crisis, addiction crisis or emotional distress 24 hours a day, 7 days a week. The Lifeline is comprised of a national network of over 200 local crisis centers, combining custom local care and resources with national standards and best practices.

The information contained is not intended to be a substitute for, or to be relied upon as, medical advice, diagnosis, or treatment. This is for informational purposes only. Seek the advice of your physician or other qualified provider with any questions you may have.

UNFORESEEN COSTS OF SUBSTANCE ABUSE DISORDER

Substance use disorder (SUD) can have significant costs for an individual or the people that love them. But there are indirect costs to businesses as well — costs companies are increasingly recognizing. SUD can increase workplace injuries and absenteeism, leading to a loss in business productivity and competitiveness. The National Safety Council determined in 2019 that [75% of employers](#) have been impacted by opioids in the workplace¹. The Council also estimated that a company with 200 employees can spend as much as \$158,000 each year on costs related to substance misuse, including lost time, health care, turnover and retraining.

The negative effects of SUD are especially important for businesses across Ohio looking to build a thriving workforce. Employees and companies cannot function at their full potential when addiction is a part of their lives.

Employees under the influence of a substance are more susceptible to injuring themselves or others while on the job. There are increased health care costs as well; employers whose workers are living with the disease may end up paying higher insurance rates. Employers can lose valuable, trained employees altogether to the disease. According to a 2016 CDC Study, a vast majority of workers using an addictive substance for more than three months never return to work due to dependence or other side effects.

But there is a positive side, as well: [Each employee who recovers from a substance use disorder can save a company, on average, more than \\$8,500 per year](#)². And, employer-initiated treatment is more successful than treatment initiated by friends or family members, according to a 2020 study from the National Safety Council and the National Opinion Research Council at the University of Chicago.

These figures indicate that business owners may benefit from investing in SUD prevention and treatment efforts.

Loss of productivity costs Ohio businesses billions of dollars. In a report entitled “Taking Measure of Ohio’s Opioid Crisis,” <https://www.cdc.gov/mmwr/volumes/70/wr/mm7015a1.htm>, researchers at The Ohio State University estimated that the lifetime lost productivity of those who died from an opioid overdose in 2015 was around \$3.8 billion, with additional costs of the opioid use disorder falling in the \$6.6 billion to \$8.8 billion range. To put that into perspective, researchers noted that Ohio’s budget for educating all Ohio children in public schools from K-12 was \$8.2 billion in 2015, meaning “the opioid crisis was likely as costly as the state’s spending on K-12 education.”

1. <https://www.nsc.org/newsroom/poll-75-of-employers-say-their-workplace-impacted>

2. <https://www.prnewswire.com/news-releases/new-analysis-employers-stand-to-save-an-average-of-8-500-for-supporting-each-employee-in-recovery-from-a-substance-use-disorder-301183912.html>

The Additional Cost to Families, Healthcare and the Criminal Justice System

Addiction can be an expensive disease, not just for the person with the addiction, but for the community as well. SUD places a burden on our healthcare system and in our communities if not treated. The Health Policy Institute of Ohio reported that the opioid epidemic costs Ohioans between \$6.6 billion to \$8.8 billion a year.

Financial costs stemming from addiction and recovery can be significant. The financial toll of SUD spreads beyond the individual. Families will often give or spend everything they have to help their loved one, regardless of the emotional toll or financial implications.

What You Can Do

Business leaders have an important role to play in helping employees navigate substance use disorder, and it starts with creating a stigma-free workplace. Talking openly about addiction and mental health and providing information that connects employees with services and resources can result in a stronger workforce.

As a financial professional, you can help your clients take action to be sure their loved one suffering from addiction receives the support they need without jeopardizing not only the family's financial future, but their emotional one as well. Turn to page 32 of this booklet for "Resources for Helping Clients" which has links and contact information for several organizations that you can consider while you assist clients impacted by substance use disorder in your community. We suggest you keep this handout on your computer desktop or stashed close by in a desk drawer for quick access if and when a client need arises.

Help spread awareness of our campaign by [visiting our Partnership page](#) on our Recovery Within Reach website and download the toolkit. There are several campaign FAQs, video Public Service Announcements, social media contents, and additional campaign graphics. All are free to use for both your business and personal communications to share with clients, family and friends.



SUBSTANCE USE DISORDER – COSTS OF TREATMENT

This handout provides sample costs of treatment, not averages. Costs may vary depending on treatment type, location and the extent of a client's need. Advisers are encouraged to contact facilities directly for specific costs. Use our [Treatment Map](#) to locate facilities near your client.

Rehabilitation program costs depend on the following factors:

- **Type of facility:** inpatient facilities tend to cost more than outpatient treatment programs because they provide meals and lodging in addition to therapeutic interventions and wellness activities.
- **Location of the facility:** can be near a client's home or not, or in locations including the mountains or beach.
- **Size of the program:** a large program with more participants may cost less than a smaller, more intimate program.
- **Length of the program:** duration can vary from 30 to 90 days depending on a person's needs.
- **Type of insurance:** be sure to check with your insurance provider to know what types of treatments are covered.
- **Type of treatment** provided, for example inpatient vs. outpatient.
- **Amenities offered:** programs may offer lodging and meal plans; recreational activities; facilities including a swimming pool or on-site gym; nutrition counseling, and more.

Drug and Alcohol Detox

Detoxification supports a person through withdrawal symptoms following drug and alcohol misuse. Detox support averages \$ 1,750 to \$5,600 per episode. Check with your insurance provider. Depending on the type of insurance, many of the costs associated with detox may be covered.

Drug and alcohol detox is often the first stage of substance use disorder treatment. This process allows the body to safely rid itself of the addictive substance. The length of detox varies depending on the substance, the length of time a person has misused it, and how much they used. Detox and withdrawal can be uncomfortable and, at times, life-threatening. Due to this, the safest and most effective way to detox is through a medically supervised detox program. Medically supervised detox provides round-the-clock supervision to monitor and treat withdrawal symptoms.

Outpatient detox prices vary but generally costs \$ 1,000 to \$ 1,500 per episode. Most inpatient rehabilitation programs include detox in their costs. Sometimes detox involves medication-assisted treatment (MAT), requiring regular doses of prescribed drugs.

More information available on this website: <https://drugabusestatistics.org/cost-of-rehab/>

Visit the Recovery Within Reach [treatment locator](#) to find facilities near you.

Outpatient Addiction Treatment

The cost of outpatient treatment varies widely and may depend on the type of insurance available and the deductible. Review the treatment map, select several facilities, call to ask about costs and services, and be sure to check with the patient's insurance provider to know what treatments are covered.

Nationally, three-month programs range between \$1,400 to \$10,000. A three-month outpatient treatment program in Ohio generally costs about \$5,000. One treatment example is the use of Methadone, which can be effective for opioid addiction. Methadone treatment typically costs \$250 to \$800 a day and involves a minimum 7-day course of treatment. A three-month course averages \$5,000. Other forms of MAT can be more or less expensive, depending on the medication.

Unlike residential rehabilitation, outpatient treatment does not require patients to live in the facility while attending treatment. While some patients begin at this level of care, outpatient drug rehabilitation is often more appropriate for people who have completed inpatient treatment and are looking for continued care.

More information available on this website: <https://drugabusestatistics.org/cost-of-rehab/>

Inpatient Addiction Treatment

Costs may vary depending on treatment type, location and the extent of a client's need. Advisers are encouraged to contact facilities directly for specific costs. And like other types of treatment, contact the patient's insurance provider to know what treatments are covered.

Nationally, the least-expensive inpatient treatment costs around \$10,000 for a short-term program (one month to six weeks), and around \$42,500 for long-term residential treatment (60 to 90 days). Ohio inpatient treatment programs range between \$6,000 to \$20,000 for short-term and between \$12,000 to \$60,000 for long-term.

Residential drug rehabilitation programs in Ohio offer a compassionate environment where those with substance use disorder can overcome the disease. Inpatient drug rehabilitation programs require patients to live in the facility during treatment. Patients participate in individual therapy, group therapy, and an array of other activities that are all designed to support recovery.

Ohio treatment centers offer a number of quality treatment options, including specialized care such as:

- Dual diagnosis treatment
- Medication-assisted treatment
- Trauma grounding
- Gender-specific treatment groups

More information available on this website: <https://drugabusestatistics.org/cost-of-rehab/>

Aftercare Treatment Therapies

People in recovery may need ongoing support, especially in the early days and months following a treatment program.

Addiction treatment plans are not one-size-fits all, and vary to support each individual's unique needs. Each patient works with their treatment providers to create a comprehensive plan that will work best for them. Some of the most common therapies used to treat substance use disorder are:

- Family and group therapy
- Stress management
- Relapse-prevention techniques
- Cognitive-behavioral therapy
- Dialectical behavior therapy
- Motivational interviewing

As treatment evolves, providers are incorporating more forms of alternative therapy into their curriculum. Known as complementary therapies, these modalities are used alongside traditional therapies to promote spiritual and emotional growth and healing throughout addiction treatment.

More information available on this website: <https://www.onlinetherapy.com/addiction-counseling/>

Some people may qualify for free or low-cost treatment services. Free or reduced-cost treatment options may be found through <https://findtreatment.gov/locator> and using a filter for Medicaid or Medicare.

Free or Reduced Cost Treatment

Where insurance and financing options are unavailable or insufficient, the client can seek assistance from the Ohio Department of Mental Health and Addiction Services (OhioMHAS) to locate services available via County Alcohol, Drug Addiction and Mental Health Services Boards, also known as ADAMH Boards. These county governmental entities receive funding from local, state and federal sources to contract with providers in their area to offer treatment based on a sliding fee scale.

More information on ADAMH Boards can be found at: <https://mha.ohio.gov/community-partners/ad-amh-boards>. A complete directory of all boards, including addresses, phone numbers and websites, and a map are available at: <https://www.oacbha.org/mappage.php>

Many facilities offer free or reduced cost treatment, therefore some people may qualify because of Medicaid and other insurance. Treatment costs vary based on available services.

Use our [Treatment Map](#) to locate facilities near your client. Free or reduced-cost treatment options may be found through <https://findtreatment.gov/locator> and using a filter for Medicaid or Medicare.

THE RIPPLE EFFECT OF SUBSTANCE USE DISORDER ON FAMILIES

When a person is living with substance use disorder (SUD), the disease can have a major impact on the person's family. The effect advisers are most likely to see first is the financial impact. Clients may be asked to extend loans or cover debts for the person living with SUD. In some cases, family members could lose money through theft.

When the person living with SUD is the family breadwinner, job loss and unemployment could be significant financial risks for the family. It is not uncommon for the person living with this disease to have problems performing at work. Negative workplace behaviors could include arriving late, missing shifts, failing to meet project deadlines, or getting into arguments with colleagues. Termination for performance-related issues can make it harder to find another job. Unemployment increases an individual's and the family's overall stress.

In serious cases, families can slip into poverty by selling all their real and personal assets and wiping out all personal savings. Untreated addiction impairs judgment and critical thinking skills, which can cause once financially responsible people to lose decades of accumulated wealth in a short period of time.

Extended families may also end up caring for children of parents with SUD. As the opioid epidemic spread across the United States, many grandparents, aunts, uncles and others shouldered the responsibility of caring for children whose parents were affected. In fact, [more than 2.5 million children](#) are now being raised by grandparents and other relatives¹. That could leave many elderly adults on fixed or planned incomes feeling unanticipated financial pressure.

Researchers have explored how these "grandfamilies" have changed family dynamics, and, in many cases, significantly affected a family's finances. Grandparents who might have saved for retirement may find themselves tapping those resources to pay for the costs associated with caring for a child, effectively becoming parents again.

For more on this phenomenon, visit <https://www.grandfamilies.org/>

Of course, the most devastating impact of SUD is the loss of a loved one to overdose. The threat is a constant, daily strain on families affected by SUD. Getting client families on the path to recovery can help alleviate their stress and help them achieve a more secure financial future.



If you feel your client or the client's family member is in crisis, the Ohio Department of Mental Health and Addiction Services recommends calling 988, the national Suicide & Crisis Lifeline, which provides free and confidential emotional support to people in suicidal crisis, addiction crisis or emotional distress 24 hours a day, 7 days a week. The Lifeline is comprised of a national network of over 200 local crisis centers, combining custom local care and resources with national standards and best practices. Learn more at www.988lifeline.org.

1. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7829093/>

FUNDING SOURCES FOR TREATMENT

Health insurance, government programs, and state and local resources can help pay for treatment, and clients should not automatically assume that they or their loved ones are not eligible for assistance. Sliding-scale fees and payment assistance programs are widely available. Assistance often is based on the income of the person receiving treatment, which may not be your client.

SOURCE 1: PRIVATE HEALTH INSURANCE

Your client should always begin with their existing health insurance. Many people do not realize that treatment for substance use disorder is covered just as treatment for other health conditions is covered. Health insurance may fully cover many treatment services, or may require only a small copay.

To understand mental health and substance use disorder insurance coverage, individuals should check the certificate of coverage document provided by their insurer; contact their human resources department for employer-sponsored plans; or call the insurance company or agent directly using the information provided on their insurance card. To assess direct out-of-pocket costs, individuals should factor in expenses related to copays, deductibles, and co-insurance costs (i.e., the percentage or portion of the cost for which the policyholder is responsible). As with other healthcare expenditures, identifying in-network options available under the plan prior to treatment will help reduce costs.

The Ohio Department of Insurance (ODI) has an online Mental Health Benefits Toolkit to assist consumers and advocates operating on their behalf: <https://insurance.ohio.gov/consumers/mental-health/welcome>. Accompanying this handout is a printable PDF from ODI with FAQs on consumer laws, common plan terms, plan costs, and consumer rights regarding mental health benefits. Additionally, ODI provides information about how to understand mental health benefits and questions to ask the health insurance provider about coverage. Call 1-855-438-6442, or via email: getmhia@insurance.ohio.gov. More information can be found at: <https://insurance.ohio.gov/consumers/mental-health/getmhia>.

Did you know?

- Insurers must treat mental health and substance use disorder benefits generally in the same manner as other health benefits.
- Financial limitations such as copays, deductibles, and co-insurance for mental health and substance use disorder benefits cannot be more restrictive than for other health benefits.
- Treatment limitations — such as number of visits, geographic location, or facility type — cannot be more restrictive than for other health benefits.

Clients having difficulty accessing benefits may file a complaint with ODI by calling 1-800-686-1526, by using the online consumer complaint form available at: <https://gateway.insurance.ohio.gov/UI/ODI.CS.Public.UI/Complaint.mvc/DisplayConsumerComplaintForm>, or by emailing their complaint to: Consumer.Complaint@insurance.ohio.gov. ODI also has an established Ombudsman on staff (ombudsman@insurance.ohio.gov) to handle complaints from advocates including family members, treating physicians, and financial advisers. For more information on health insurance benefits for substance use and other mental health disorders, consumers may call ODI's hotline at 1-800-686-1526.

Clients filing a complaint on their own behalf or as advocates for loved ones should provide:

- the name of the health plan,
- the policy number and group number (if applicable),
- a description of the issue and who is involved,
- the person named in the policy, if the complaint involves a dependent covered under the policy, and
- copies of any correspondence related to the complaint.

In some cases, the person seeking treatment may not have existing insurance and may not be eligible for coverage under the client's health insurance policy. In those circumstances, it may be helpful for the client to help the family member or loved one obtain health insurance.

If the person seeking treatment is employed by a company offering insurance, the person should be encouraged to enroll for coverage at the next open enrollment. If workplace coverage is not available, the person may be able to obtain health insurance at a low cost through the Healthcare Marketplace established by the Affordable Healthcare Act of 2010. Policies available through that program can be found at <https://www.healthcare.gov/>. Pre-existing mental and behavioral health conditions are specifically covered under these policies and spending limits are not allowed.

SOURCE 2: GOVERNMENT HEALTH INSURANCE

Where traditional insurance is not an option, the person seeking treatment may be eligible for healthcare insurance that is subsidized by the government. The two main government health insurance programs are Medicare and Medicaid. There are many substance use disorder (SUD) treatment providers in Ohio that accept one or both.

Medicare is generally available only to individuals over the age of 65, or with a chronic disability.

Additionally, individuals with low incomes can receive extra help in paying for Medicare premiums. More information on eligibility for extra help in paying premiums can be found online at [Medicare.gov](https://www.medicare.gov).¹ That population is also at risk for SUD. In 2020, [more than 1 million Medicare beneficiaries](#) were diagnosed with opioid use disorder.² Fewer than 16% received treatment. It is estimated that more than 50,000 Part D beneficiaries overdosed in 2021 (Part D covers prescription drug for Medicare beneficiaries). Medicare has recently developed reimbursement policies that expand access to treatment for OUD via telehealth and mobile units, but those seeking treatment must also know that those reimbursements are available.

[As of Jan. 1, 2020, Medicare may pay for treatment of substance use disorders including opioid treatment programs. Medicare Opioid treatment includes:](#)

- U.S. Food and Drug Administration (FDA)-approved opioid agonist and antagonist medication-assisted treatment (MAT) medications
- Dispensing and administration of MAT medications (if applicable)
- Substance use counseling
- Individual and group therapy
- Toxicology testing
- Intake activities
- Periodic assessments

Your client’s coverage could vary. For more information, visit: <https://www.cms.gov/medicare/medicare-fee-for-service-payment/opioid-treatment-program>.

Medicaid is an insurance plan funded by the federal and state government that provides free healthcare coverage for individuals who meet income and other eligibility requirements. Not all private practices accept Medicaid, but thousands across Ohio do.

For more information, see:

Ohio Department of Medicaid:

<https://medicaid.ohio.gov/families-and-individuals/srvcs>

50 West Town Street, Columbus, Ohio 43215

Consumer Hotline: 800-324-8680

Provider call center: 800-686-1516

Contact by email form: <https://www.ohiomh.com/home/contactus>

Medicaid benefits include a variety of mental, behavioral and substance use disorder services such as:

1. <https://www.medicare.gov/medicare-savings-programs>

2. <https://oig.hhs.gov/oei/reports/OEI-02-20-00390.pdf>

- Diagnostic Assessment and care planning
- Community Psychiatric Supportive Treatment (CPST)
- Comprehensive Addiction Treatment Services
- Individual and Group Counseling
- Crisis Intervention
- Family Counseling
- Intensive Home-based Treatment for Youth
- Primary Medical Care
- Medication-assisted treatment
- Day Treatment / Intensive Outpatient Services

Medicaid enrollees may search for a provider by visiting this link and can filter by provider type, location, category etc.: <https://ohiomh.com/home/findaprovider>

Most Medicaid members receive services through a Medicaid Managed Care Organization (MCO). MCOs may offer services in addition to the traditional Medicaid benefit and some MCOs may have slightly different coverage rules. Members must consult with the MCO to understand the full extent of coverage, just as they would with private health insurance plans. There's a plan comparison guide available that offers a high-level overview of what services/supports all plans are required to provide. It also offers insight into MCO-specific value-added offerings. Visit: [Next Generation Health Plan Comparison.pdf](#). See page 3 to start.

Ohio Medicaid Services for Children and Young Adults

As a part Ohio Medicaid's effort to launch the next generation of Medicaid, the Ohio Department of Medicaid (ODM) has launched OhioRISE (Resilience through Integrated Systems and Excellence), a specialized managed care program for youth with complex behavioral health and multisystem needs.

OhioRISE serves children from birth through age 20 with serious or complex behavioral health needs who are at risk of involvement or are already involved in multiple child-serving systems, such as juvenile justice and corrections, child protection, developmental disabilities, mental health and addiction, and education. A key goal is helping families of children with complex behavioral health needs avoid having to relinquish custody to obtain care for the child.

OhioRISE features multi-agency governance to drive toward improving cross-system outcomes – we all serve many of the same kids and families.

OhioRISE's governance will be shared by Ohio Medicaid and Governor DeWine's Family and Children First Cabinet Council, though ODM will hold the program contract.

OhioRISE supports the Family First requirements and more. The Family First Prevention Services Act (FFPSA) of 2018 is the most significant change in child protection and Title IV-E funding in decades.

OhioRISE will utilize a new 1915c waiver to target the most in need and vulnerable families and children to prevent custody relinquishment.

The following individuals may qualify for Medicaid coverage in Ohio:

- Individuals with low-income;
- Pregnant women, infants, and children;
- Older adults; and individuals with disabilities.

To be eligible for coverage, the individual generally must be a United States citizen or meet Medicaid citizenship requirements; have a Social Security number; be an Ohio resident; and meet financial requirements. To learn more about these requirements, please visit: <https://medicaid.ohio.gov/families-and-individuals/coverage/who-qualifies/who-qualifies>.

Specific financial requirements are set out in the Ohio Medicaid website, which are periodically updated as thresholds are adjusted over time. The financial requirements in 2023 are set forth in the chart below from the Ohio Medicaid website.

2023 Monthly Financial Eligibility Children, Families, and Adults

Family Size	Parents/Caretaker Relatives	Adults (age 19-64)	Children with Insurance	Pregnant Women	Children without Insurance
	90% FPL	133% FPL	156% FPL	200% FPL	206% FPL
1	\$1,094	\$1,616	\$1,896	\$2,430	\$2,503
2	\$1,479	\$2,186	\$2,564	\$3,287	\$3,386
3	\$1,865	\$2,756	\$3,232	\$4,144	\$4,268
4	\$2,250	\$3,325	\$3,900	\$5,000	\$5,150
5	\$2,636	\$3,895	\$4,569	\$5,857	\$6,033
6	\$3,021	\$4,465	\$5,237	\$6,714	\$6,915
7	\$3,407	\$5,035	\$5,905	\$7,570	\$7,798
8	\$3,792	\$5,604	\$6,573	\$8,427	\$8,680
9	\$4,178	\$6,174	\$7,241	\$9,284	\$9,562
10	\$4,563	\$6,744	\$7,910	\$10,140	\$10,445
11	\$4,949	\$7,313	\$8,578	\$10,997	\$11,327
12	\$5,334	\$7,883	\$9,246	\$11,854	\$12,209

<https://medicaid.ohio.gov/static/Families%2C+Individuals/Programs/whoQualifies/Children-Families-Adults.pdf>

FPL = FEDERAL POVERTY LEVEL

It is important to note that all insurance policies — whether through the workplace, Healthcare Marketplace, Medicare, or Medicaid — require applicants to provide truthful and accurate information. Clients should be advised to fully comply with all eligibility and disclosure requirements. Insurance fraud carries serious civil and criminal sanctions.

SOURCE 3: PERSONAL FINANCING

Health Insurance will always be the first and best bet for securing quality treatment for a client or their loved one, but payment assistance is commonly available at many treatment facilities when insurance is not. Facilities may offer sliding scale fees or payment plans, based on the income of the person seeking treatment.

Clients seeking to tap into their retirement savings and investment portfolios should be guided on the best and most cost-effective way to withdraw from or borrow against their funds to reduce adverse penalties. Without guidance, far too many families finance treatment through high-interest rate credit cards, which are seldom the most economical source.

SOURCE 4: FREE AND REDUCED COST TREATMENT

Where insurance and financing options are unavailable or insufficient, the client can seek assistance from Ohio Department of Mental Health and Addiction Services (OhioMHAS) to locate services available via County Alcohol, Drug Addiction and Mental Health Services Boards. These county governmental entities receive funding from local, state and federal sources to contract with providers in their area to offer treatment based on a sliding fee scale. Individuals wishing to learn more about OhioMHAS services can access free, confidential support through the Ohio CareLine at 1-800-720-9616, or by visiting the agency’s website at <https://mha.ohio.gov/>. The CareLine is staffed by behavioral health professionals 24 hours a day, 7 days a week. Individuals with a mental health or substance use crisis can call 988, the national behavioral health crisis line, for immediate assistance and referral to a provider.

There are also many non-profit and faith-based programs, typically referred to as community partners, which provide a wide range of preventive and treatment services for clients dealing with substance use disorder. Refer to the “Resource For Helping Clients” document for contact information of organizations at the national and state level. Call the Ohio CareLine for suggestions on organizations at the local level.



FAQS ON MENTAL HEALTH AND SUBSTANCE USE DISORDER



Department of Insurance

MENTAL HEALTH

and Substance Use Disorder Coverage



WHAT DOES THE LAW SAY?

- Insurers must treat mental health and substance use disorder benefits generally in the same manner as other health benefits.
- Financial limitations such as copays, deductibles, and coinsurance for mental health and substance use disorder benefits cannot be more restrictive than for other health benefits.
- Treatment limitations such as number of visits, geographic location, or facility type cannot be more restrictive than for other health benefits.

KNOW YOUR PLAN

Some plans are required to provide mental health and substance use disorder benefits. Other plans are required to ensure that if they do offer mental health and substance use disorder benefits, they are similar to other health benefits.

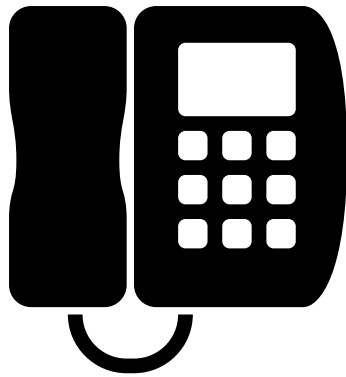
How do I know what my plan is required to cover?

Most plans you buy directly for yourself or your family (not provided through an employer) - including those sold through [healthcare.gov](https://www.healthcare.gov) - are required to provide mental health and substance abuse disorder benefits and ensure that those benefits are similar to other health benefits covered by the plan. Many plans provided through an employer provide mental health and substance use disorder coverage, but not all are required to do so.



CHECK TO SEE IF YOU HAVE

Mental Health/Substance Use Disorder Coverage



- ✓ Check your certificate of coverage issued by your insurer or provided by your employer.
- ✓ Contact your employer's human resources office.
- ✓ Contact your health insurer directly.
- ✓ Contact your insurance agent.
- ✓ Contact the Ohio Department of Insurance at 800-686-1526.

Federal and state mental health laws do not provide a specific definition of what mental health and substance use disorder benefits or services must be covered in a health plan or insurance contract. However, see examples below of benefit categories where coverage provided for physical and mental health and substance use disorder benefits should be similar:

- Inpatient - If a plan covers a medically managed hospital stay for a medical condition such as a seizure disorder, then a medically managed stay for active withdrawal and stabilization of mental health condition should be similarly covered.
- Outpatient - If a plan covers an office visit to the cardiologist, it should also cover an office visit to the psychiatrist.
- Emergency Care - If a plan covers emergency treatment for a broken arm, it should also cover emergency treatment after a suicide threat or for an unintended overdose.
- Prescription Drugs - If a plan covers maintenance medication for diabetes, it should similarly cover maintenance medication for depression and medicated assisted therapies for addiction.

IS MY
**MENTAL
HEALTH
CONDITION**
COVERED?

— **KNOW YOUR COSTS** —

Just like your other health benefits (doctors visits, prescription drugs, physical therapy), your mental health and substance use disorder benefits are subject to copays, coinsurance, deductibles and other out-of-pocket costs.



Understanding the costs associated with your plan:

- Co-payment = the dollar amount the patient is expected to pay at the time of service.
- Deductible = the amount you pay for health care expenses before insurance covers the costs. Often, health insurance plans have an annual deductible amount.
- Co-insurance = usually a % of the total cost you are responsible for after services have been provided.

YOU CAN CHECK THE ESTIMATED COST OF YOUR OUT-OF-POCKET EXPENSES IN THE FOLLOWING WAYS:

- Check your Summary of Benefits and Coverage (SBC) in your insurance paperwork
- Contact your insurer directly



KNOW Your Rights



- It is important that you are familiar with your plan and the type of benefits and coverages that are offered for mental health and substance use disorder conditions. Knowing your plan can help you determine the costs you will pay and help you identify any questions you may need to ask.
- If your insurer denies your claim or takes any other adverse action regarding your benefits, you have the right to ask that your claim be reviewed again.
- If your insurer continues to deny your claim, you have the right to request an independent review through the Ohio Department of Insurance.

If you believe that your plan has violated the law, you need more information about requesting an independent review or help filing a complaint, please call the Ohio Department of Insurance's CONSUMER HOTLINE at 800-686-1526.



Get additional information on [how to file a consumer complaint](#) with the Ohio Department of Insurance Consumer Services Division



Additional resources to help you navigate your mental health benefits:

- [Ohio Mental Health Parity Law](#)
- [The Mental Health Parity and Addiction Equity Act \(MHPAEA\)](#)
- [Your Guide to Health Insurance](#)
- [Ohio Mental Health and Addiction Services](#).

Ohio Department of Insurance
50 W Town St, Suite 300, Columbus OH, 43215
insurance.ohio.gov

RECOGNIZING THE SIGNS OF SUBSTANCE USE DISORDER IN FAMILIES

Across the country, millions of people are living with substance use disorder (SUD). Details regarding this disease and its impact can be found in the two handouts entitled *Substance Use Disorder: What it is & Why Financial Professionals Should Care* and *Opioid Use Disorder in Ohio*. In 2020, 2.7 million Americans lived with opioid use disorder, just one form of SUD. Over 5,100 Ohioans died from an accidental drug overdose that same year.

Advisers do not want to see client families lose any loved ones to SUD, but many advisers are not aware that SUD is an issue for a client family until it is too late. While some people experiencing the disorder may show visible signs of intoxication or other impairment as the result of substance misuse, other people function at a very high level with little or no outward signs of the disease. To better spot the signs of SUD in a client family, advisers should be on the lookout for the following physical, behavioral, financial, and other contextual clues:

Physical Clues

People living with substance use disorder typically exhibit physical symptoms, which may be perceptible to an adviser depending on the type and frequency of client interaction. Some clients may be close, personal friends of the adviser while others may be distant and “all business.” Indeed, some advisers have limited, online-only contact with their clients, making physical client encounters rare or non-existent. To the extent there is regular and recurring physical interaction, however, Johns Hopkins Medicine has identified the following physical signs as symptomatic of SUD:

- Inability to control substance use
- Uncontrollable cravings
- Drowsiness
- Weight loss
- Frequent flu-like symptoms
- Sudden change in health or overall appearance
- Lack of hygiene

Behavioral Clues

In addition to physical symptoms, people living with SUD may also undergo behavioral changes. The website DrugAbuse.com offers the following list of behavioral red flags:

- Increased aggression or irritability
- Changes in attitude/personality
- Lethargy
- Depression
- Sudden changes in a social network
- Dramatic changes in habits and/or priorities
- Involvement in criminal activity

Involvement in criminal activity

Other more subtle signs could include a client missing appointments or acting out of sorts during meetings — for example, becoming disoriented, unable to focus, falling asleep, or being distracted. These signs or may not indicate SUD, but they could point toward other health-related issues that should be addressed.

Financial Clues

One of the challenges for families experiencing SUD is managing the financial chaos that often follows. The person living with SUD may hide or steal money from family members, max out credit cards, dip into savings accounts, children's college funds, or even take out loans in the names of their children or family members in order to buy the substance. There may be legal fees, court costs, criminal records, loss of driving privileges, job loss, and other adverse consequences resulting from impairment. Ohio financial advisers estimate that substance user disorder costs their clients an average of \$35,000 a year. With unexpected expenses spiraling out of control, families may be at risk of losing their homes or being forced into bankruptcy.

With direct access to client finances, advisers are in a unique position to spot the signs of distress. Indeed, advisers may be the only people outside the client's family with this information and, therefore, the only resource that the family has for professional advice and support. Below are some of the more common financial clues that could signal substance use disorder in a client's life:

- Payment for detox or rehabilitative treatment
- Suspending investment and retirement saving plan
- Unscheduled requests to liquidate or withdraw retirement savings
- Unusual ownership/beneficiary changes
- Job loss or reduced wages
- Hospital and medical bills
- Costs associated with recurring car replacement
- Legal bills and court costs
- Late bills
- New credit card accounts or lines of credit
- Second mortgage
- Foreclosure or loss of other real or personal assets
- Complaints of theft within the home or family

The information contained is not intended to be a substitute for, or to be relied upon as, medical advice, diagnosis, or treatment. This is for informational purposes only. Seek the advice of your physician or other qualified provider with any questions you may have.

Other Contextual Clues

In many cases, advisers are friendly with client families and become privy to important non-financial information. This information could include the presence of risk factors that increase a person's risk of SUD. According to the Mayo Clinic, a person is at increased risk of the disease if he or she:

- Is a younger age, specifically the teens or early 20s
- Is living in stressful circumstances, including being unemployed or living below the poverty line
- Has a personal or family history of addiction
- Has a history of problems with work, family and friends
- Has had legal problems in the past, including DUIs
- Is in regular contact with high-risk people or high-risk environments where there is substance use
- Has struggled with severe depression or anxiety
- Tends to engage in risk-taking or thrill-seeking behavior
- Uses tobacco heavily

Other contextual clues that an adviser might notice include changes in familial structure or custodial arrangements, such as a grandparent assuming custody over a grandchild, also known as kinship care. Recurring car accidents and strange or unexplained physical injuries can be signs as well.

Where the cause of any of the foregoing physical, behavioral, financial, or contextual red flags is unclear and disruptive to a client's financial plan, advisers should not hesitate to initiate a compassionate conversation with the client for more information. If the cause is SUD, advisers can use the Recovery Within Reach website and training resources to help the client access treatment and adjust financial plans as needed.



HOW TO HOLD DIFFICULT CONVERSATIONS WITH YOUR CLIENT

Addiction, clinically referred to as substance use disorder (SUD), is on the rise in the United States. Over 40 million Americans are addicted to alcohol and drugs¹. Drug overdose is the leading cause of accidental death in the U.S.; nearly 75% of those deaths involve opioids². The disease affects people from all age groups and all racial and socioeconomic backgrounds. No financial professional should assume their client base is immune from this epidemic.

Just like other sensitive topics that affect a person's finances — death, divorce, job loss, and other healthcare conditions — SUD must be confronted head-on and compassionately factored into an adviser's financial advice. Tackling these difficult issues in a proactive but respectful manner helps foster client trust, which is critical to identifying and overcoming the potential challenges that clients may face with SUD.

Unlike other financial challenges, clients and family members living with substance use disorder frequently face the additional stress of stigma, which is common with this disease. Stigma can lead to embarrassment, pain, and judgment, and can cause many people to isolate and suffer in silence. Financial advisers can help clients open up about their experience with SUD by:

- Spotting the signs of SUD;
- Asking the right questions in the right way;
- Listening; and
- Exploring treatment options.

Spotting the signs

Advisers need to read between the lines in client conversations, taking note of changes in living or custodial arrangements as well as abrupt changes in spending habits or deviations from financial plans — anything that seems off or signals distress of a sensitive nature. A red flag may turn out to be inconsequential or unrelated to SUD, but it is better for the client's finances that the adviser know for sure. Most clients will appreciate their adviser's effort to promote not only their financial well-being, but the wellness of their families.

See our guide: [Recognizing the Signs of Substance Use Disorder](#) for tips on how to spot the signs of SUD.

Asking the right questions

If there is any reason to suspect that SUD is adversely impacting a client's finances, the adviser should not hesitate to ask about it, even if it's uncomfortable. Advisers ask difficult questions every day. This is a relationship business. Advisers get to know their clients by asking the right questions.

Advisers can open the door to the conversation by signaling awareness and support through office signage, client mailers, and by directly including the topic in client meeting agendas. Sometimes, advisers may need to probe with compassion, emphasizing that it is the adviser's job to help clients make informed financial decisions. Advisers can only be successful in that role if the costs of SUD and treatment are affirmatively factored into a client's financial plan.

1. https://www.samhsa.gov/data/sites/default/files/2021-10/2020_NSDUH_Highlights.pdf

2. <https://www.cdc.gov/opioids/data/index.html>

TIPS FOR TALKING ABOUT SUD

When addressing the issue directly, use a softer “I,” “we,” and “our” focus rather than a “you” focus to frame the conversation.

- “I’ve noticed some changes (or recent activity) that I need to factor into my advice for these accounts. Let’s talk through this and see what we need to adjust ... or need do to get things back on track.”
- “Have I told you about the state’s new substance use disorder campaign? It really opened my eyes. Most people don’t think about the financial impact. I’d hate for any of my clients to go through that alone because they were afraid to talk with me about it.”
- “I know this might sound strange, but before we wrap up today, I wanted to share that I just completed a training course on substance use disorder. One of the things I learned is that advisers often do not know when clients are struggling with the financial challenges of this disease. It’s not always easy to detect. I have been trained on treatment options, locations, and costs if it’s ever needed. Please know I’m here to help, no matter what the financial challenge is.”

For a more indirect approach, try open-ended questions.

- “I want to make sure that we have all major expenses covered as we build (or update) your financial plan. How about larger atypical costs, things like medical and legal bills? Anything along those lines that we should be thinking about?”
- “Before we move off the topic of insurance, I want to make sure we have all the bases covered. I was encouraged during a recent training to ask about insurance benefits for mental and behavioral health disorders. The training used an example of a family struggling with rehab costs for an adult child. Are there any significant healthcare costs or insurance needs that we should think about but haven’t gone over yet?”
- “I’m sorry that the plan we set for you doesn’t seem to be working. Why do you think that is? Are you dealing with any unexpected expenses, whether for yourself or for others in your family?”
- “Is there anything you haven’t told me because you think it’s embarrassing? Because I’ve probably seen it before.”

Listening

Financial advisers serve in a fiduciary position of trust and regularly receive sensitive, private details from their clients. Advisers should respond to a client’s communications regarding substance misuse the same as they would responding to news of other serious diseases — carefully, thoughtfully and being sensitive to the client’s situation.

Active listening skills are especially important during client conversations regarding SUD. Advisers can acknowledge the client’s vulnerability by thanking them for trusting them with this sensitive information. Advisers should respond with encouraging, simple and non-threatening messages such as: “That sounds really difficult,” and “I’m here to support you and your family.” The first client conversation regarding SUD may very well be a long and emotional one.

Advisers can show respect by using language that recognizes SUD is a health issue and by avoiding language that induces or reinforces stigma. Here are some recommended do’s and don’ts:

Instead of saying:	Say:
Junkie, addict, druggie,	Person with substance use disorder, alcoholic, abuser, user, person with opioid use disorder, person with alcohol use disorder
Relapsed	Had a setback, resumed use
Stayed clean	Maintained recovery
Ex addict	Person living in recovery
Drug offender	Person arrested for drug violations
Abuse	Use
Addiction	Substance Use Disorder, Opioid Use Disorder



Exploring Treatment Options

Getting the client comfortable discussing SUD will be the hardest part of the conversation for many advisers. The Recovery Within Reach campaign website and training materials should make it easier for advisers to explore solutions. Client needs will vary based on a variety of factors, including the stage of the disorder, whether the person living with SUD is already receiving treatment, and the availability of insurance. To prepare for the different scenarios, advisers should keep the Recovery Within Reach website bookmarked for quick access to the [Treatment Locator](#) map and access to the key [Resources for Helping Clients](#) guide.

The following handouts available on the campaign website might also be useful for some client conversations:

- Top 10 Things Advisers Should Know
- Substance Use Disorder: What it Is & Why Financial Professionals Should Care
- Unforeseen Costs of Substance Use Disorder
- Substance Use Disorder in Ohio
- Cost of Treatment
- Funding Sources for Treatment
- The Ripple Effect of Substance Use Disorder on Families
- Recognizing the Signs of Substance Use Disorder

Coming to terms and addressing SUD may feel overwhelming to clients. Lots of things are outside their control. But advisers can provide stability to their clients by opening the door to the conversation, laying out a cost-effective path for recovery, and taking their clients through that process one step at a time.



If you feel your client or the client's family member is in crisis, the Ohio Department of Mental Health and Addiction Services recommends calling 988, the national Suicide & Crisis Lifeline, which provides free and confidential emotional support to people in suicidal crisis or emotional distress 24 hours a day, 7 days a week. The Lifeline is comprised of a national network of over 200 local crisis centers, combining custom local care and resources with national standards and best practices.

RESOURCES FOR HELPING CLIENTS

Here are some additional resources and reference tools you can use to support clients affected by substance use disorder:

State of Ohio Resources

- Ohio Department of Commerce, Division of Securities website [Recovery Is Within Reach](#)
- RecoveryOhio at <https://recoveryohio.gov/>
- State of Ohio Department of Mental Health and Addiction Services at <https://mha.ohio.gov/>
- OHIOcares (behavioral health for veterans) at <https://ohio.gov/residents/resources/ohio-cares>
- Ohio Opioid Education Alliance at <https://beatthestigma.org/>
- Ohio Department of Insurance Mental Health and Substance Abuse Benefits toolkit, <https://insurance.ohio.gov/strategic-initiatives/mental-health>
- Ohio CareLine, at <https://mha.ohio.gov/Health-Professionals/About-MentalHealth-and-Addiction-Treatment/Emergency-Preparedness/Coronavirus/Ohio-CareLine>
- Harm Reduction Ohio (online orders for overdose treatment - naloxone and NARCAN) at <https://nextdistro.org/hro>
- 988 Lifeline.org at <https://988lifeline.org/>
- School Safety Center at <https://ohioschoolsafetycenter.ohio.gov/>

National Websites

- Findtreatment.gov at <https://findtreatment.gov/> or 1-800-662-HELP (4357)
- Partnership to End Addiction at <https://drugfree.org/>
- Centers for Disease Control and Prevention at <https://www.cdc.gov/drugoverdose/>
- Substance Abuse and Mental Health Service Administration (SAMHSA) a directory of state agencies outside Ohio at <https://www.samhsa.gov/sites/default/files/single-state-agencies-directory-08232019.pdf>

Medicare

Medicare at <https://www.medicare.gov/coverage/opioid-use-disorder-treatment-services>

The information contained is not intended to be a substitute for, or to be relied upon as, medical advice, diagnosis, or treatment. This is for informational purposes only. Seek the advice of your physician or other qualified provider with any questions you may have regarding a medical condition.

Medicaid

- Medicaid at <https://medicaid.ohio.gov/families-and-individuals/srvcs>
- OhioRise for children at <https://managedcare.medicaid.ohio.gov/managed-care/ohiorise/01-Resources-for-Members-and-Families>

Treatment Facilities and Therapists

- Interactive map at Recovery Is Within Reach website
- National Alliance on Mental Illness (NAMI) for therapist locations at nami.org/local
- Health Center Program through Health Resources and Services Administration <https://www.hrsa.gov>
- Opioid Treatment Program Directory by State through Substance Abuse and Mental Health Services Administration <https://dpt2.samhsa.gov/treatment/directory.aspx>
- Behavioral health treatment services locator <https://findtreatment.samhsa.gov/>
- Check with insurance or primary care physician to ensure therapists and treatment facilities are covered in the applicable network

Local Peer Support Groups

- Narcotics Anonymous at na.org
- Nar-Anon at nar-anon.org
- Alcoholics Anonymous at aa.org
- Al-Anon at al-anon.org
- Faces and Voices of Recovery at facesandvoicesofrecovery.org

Hotlines

- Ohio CareLine at 1-800-720-9616
- National Crisis Text Line – text HOME to 741741
- Call, chat or text 988 or visit the 988 web site at <https://988lifeline.org/>
- National Suicide & Crisis Lifeline – dial 988 for people in suicidal crisis or emotional distress 24 hours a day, 7 days a week
- SAMHSA’s National Helpline, 1-800-662-HELP (4357) (Treatment Referral Routing Service)
- Partnership to End Addiction crisis line – text CONNECT to 55753 or call (855) 378-4373
- Veterans Crisis Line: Dial 988 then press 1, text 838255, or use their live Chat option: <https://www.veteranscrisisline.net/get-help-now/chat/>

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