## RESOLUTION TO SUPPORT AN ESSENTIAL PART OF RESOLVING OUR OPIOID CRISIS: MAKING HEALTH CARE COVERAGE AVAILABLE FOR LOW INCOME NORTH CAROLINIANS

**WHEREAS,** North Carolina is reeling from an unprecedented and devastating epidemic of prescription and illicit opioid drug abuse, with opioid overdose deaths increasing from 642 in 2005 to 1,384 in 2016; and

**WHEREAS**, over the last 10 years the City of Fayetteville has had a significant increase in the number of opioid related deaths; and,

**WHEREAS**, approximately over 40% of individuals with opioid use disorder have untreated chronic mental and physical health conditions; and,

WHEREAS, approximately 20% of individuals with opioid substance use disorder are uninsured including being ineligible for Medicaid, and therefore cannot pay treatment for chronic mental and physical condition, and approximately 6800 people with no health insurance coverage in the City of Fayetteville; and,

WHEREAS, full recovery from opioid use disorder is unlikely without expensive and lengthy rehabilitation followed by long term treatment of mental as well as physical health conditions; and,

**WHEREAS**, health care coverage for low income individuals with opioid use disorder could greatly reduce the drain on state and county funds to pay for this expensive and lengthy treatment; and,

**WHEREAS**, the opioid epidemic is so dire in North Carolina that we all urgently need a legislative solution as soon as possible, that is, during the upcoming 2018 short session of the North Carolina General Assembly; and,

WHEREAS, health care coverage for low income individuals would also enhance the health, quality of life and employability of thousands of North Carolinians without opioid use disorder; and,

WHEREAS, North Carolina could develop insurance-like health coverage for low income individuals that would fit North Carolina's needs and also receive bipartisan legislative support, featuring 1) insurance-like features such as premiums, co-pays, and comprehensive benefits (including strong mental health coverage), and 2) some limitations on eligibility involving work and personal responsibility requirements if considered necessary; and

**WHEREAS**, there already is a North Carolina legislative model for this type of insurance-like health coverage (HB 662, Carolina Cares, submitted in March 2017;

health coverage available to low income North Carolinians as soon as possible, during the short session of the NCGA in the spring of 2018.											
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ATTEST:											

PAMELA J. MEGILL, CITY CLERK

**NOW, THEREFORE, BE IT RESOLVED THAT** the City of Fayetteville urges the North Carolina General Assembly to develop and approve a North Carolina plan to make insurance-like