

OCTOBER, 2005

LAS VEGAS IS THE BACKDROP FOR NAATP MANAGED CARE FOCUS GROUP

During the second week of September, nearly fifty (50) members of the National Association of Addiction Treatment Providers gathered in Las Vegas for a 1 ½ day focus group on managed care. As the session began, the NAATP Managed Care Task Force Chair Phil Eaton welcomed everyone and reminded those attending that this was just one of several initiatives which were being taken by NAATP around the general topic of managed care. Renée Popovits, the former chair of the managed care task force, reviewed the history of the task force and also reviewed the NAATP adopted initiatives.

The Las Vegas meeting was a focus group to begin to test ideas and gather suggestions for the “*managed care tool kit*” which is being prepared by the National Association of Addiction Treatment Providers for its members.



Through the directed leadership of Dr. Robert Atkins from Open Minds, the participants worked to identify the various roadblocks to collegial relationships with managed behavioral health care organizations and identified their experience in terms of payment for services provided. The participants also identified forms, procedures and processes which they would find helpful.

The goal of this first day was to develop a list of items that would be requested from the NAATP membership for inclusion in the tool kit. The request will be framed in such a way as to collect those items which are helping programs and organizations address the roadblocks. The goal of the tool kit is to assemble a list of forms, dos and don'ts, flow charts and templates which will be useful in maximizing the relationship between those providing addiction treatment and those

paying for addiction treatment. The entire focus of the tool kit will be to provide direction and suggested solutions to issues that have arisen between providers of addiction treatment and payers of addiction treatment.

At the conclusion of the first day, there was a consensus that the key to all of this is developing a contractual relationship with those providing payment, establishing a relationship and then aggressively managing the contract at every level of the organization.

The second day was spent working in six (6) subgroups looking at a draft *table of contents* for the tool kit. Each group was developed around a particular skill set they represented within the treatment organization. That perspective was brought to bear on the draft table of contents. Their assignment was to identify areas that needed expansion, areas that could be eliminated and areas (chapters) that needed to be added.



There was a general consensus that this last ½ day of work was very productive and went a long way in solidifying the direc-

tion of the tool kit.

While much work remains, the 1 ½ days in Las Vegas represented a very tangible beginning for NAATP on this project. It is anticipated that a draft of the tool kit will be ready for review by the Managed Care Task Force in early 2006. Persons who attended the Las Vegas meeting will also be asked for their input as the *tool kit* is developed. The next step in the process will be the collection of instruments, forms, flow charts, etc from

the NAATP members for inclusion in the tool kit. Watch for this invitation to participate to come in the near future and continue to read about updates on this effort in coming issues of the NAATP newsletter.

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ISSUE

naatp

national association of addiction treatment providers

Stepping up to the Plate

By now the names of Katrina and Rita are well engraved into the fabric of our individual being and the collective awareness of our country. Images of destruction, long lines of displaced persons, dramatic rescues, reunited families and the absolute angst of persons pondering the arduous task of beginning all over have daily been portrayed on television and in newspapers. This was not simply the disruption of a single city, it was a whole region absolutely paralyzed, with all of the essential services halted. Few of us will soon forget the ill fated attempts to first move people to the New Orleans Convention Center, then to the Super Dome and then to the Astro Dome in Houston. Persons cut off from their support systems, persons cut off from their familiar surroundings and persons wondering where they would be the next day and who they would be with were common experiences.

In the midst of this, we learned just how fragile and tenuous the federal and state systems were that provide essential services to a segment of the population that is largely forgotten and ignored. In the midst of a natural disaster, those persons with little support of their own and with addiction issues were largely cast as part of the "throw away" population.

While organizations mobilized to provide essential health care to the impacted area, little was done to ensure that persons had access to medical detoxification. Prior to Katrina, the state of Louisiana had 32 medical detoxification beds in the entire state that were designed for those persons with no health care or few other resources. We have NAATP members who have nearly that many medical detoxification beds themselves, and yet those 32 beds were for the entire state! Needless to say, the operating and staffing of medical detoxification beds has not been a priority.

There is growing confusion among the many agencies responding to the devastation left by Katrina in terms of appropriateness for responding to addiction issues. There were reports that in Red Cross shelters and other shelters the initial response was to ban the introduction of 12-step groups and other support services so desperately needed by those whose lives had been ripped away from their security of sobriety just as their homes had been ripped off the foundations on which they once stood.

There were also reports that in Red Cross shelters mental health services were quickly introduced and persons were provided with support and medication, but there were no plans for persons to receive support, evaluations or referrals around their addiction issues. In times of crisis, we saw a response which marginalized persons with addiction and forced them to identify themselves as needing mental health services in order to get any attention. All too often, that attention came in the form of medication!

In the midst of all this, the private sector, your association, the National Association of Addiction Treatment Providers has stepped up to the plate! Through our membership we have collected donations which will be presented to the Red Cross along with our concerns regarding their initial response to persons with addictions. Additionally, NAATP members have pledged treatment beds to be made available to persons who are stable and who need addiction treatment. Nearly 80 beds have been pledged thus far and we are rapidly closing in on the \$5 million dollar number we pledged in terms of treatment and transportation for persons from the impacted areas. The state and federal system of catchment areas has made it very difficult for surrounding areas to take these persons as they also have waiting lists and to take persons from the Katrina impacted area would jeopardize their future funding as they would be serving persons outside of their catchment area with dollars specifically allocated to that area. NAATP has stepped up to the plate big time and is cutting through the bureaucracy, the confusion and the delay which is hampering other agencies from responding.

If you would like to pledge primary treatment beds, transitional living or half way house beds or detoxification beds, you should go to www.hopenetworks.org and then click on the logo for donate treatment beds. A very simple form is available for you to complete and place your donated beds in the inventory. Today we need to do everything we can to respond to the urgent needs of persons suffering from addiction. Tomorrow, we need to make our voices known so that this confusion, this double standard, this ignoring of addiction never happens in either a time of disaster or during the time of normalcy. NAATP will lead that voice just as it is leading this response.

Red Cross - No medical services for addiction treatment- Detox-etc. Despite memo's from D.C. and Posted in BR Shelter 9/8/05 Actual policy of Red Cross for those impacted by addiction related illness:

ANY PERSON
SUSPECTED OF USE OR ABUSE
OF ~~THE~~ "ALCOHOL OR DRUGS"
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FROM THIS
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**CARON FOUNDATION HOLDS
GROUNDBREAKING CEREMONY FOR \$2
MILLION STATE-OF-THE-ART FITNESS CENTER**

Wernersville, PA, September 24, 2005–The Caron Foundation, a national leader in chemical dependency treatment and Berks County’s only residential treatment center, held a groundbreaking ceremony prior to its August 25, 2005 Board of Directors Meeting.

“*The Shaping the Future Campaign*,” a \$3M initiative, has surpassed the \$1.7M mark in support of the 10,000+ square foot fitness center – a \$2M state-of-the-art facility that will include a full size gymnasium, running track, exercise studio and a fully equipped weight training room. This is in addition to the \$17M of capital improvements that have taken place on the Caron campus over the past five years. The new Fitness Center will be a positive addition to Caron’s new and improved campus. According to Michael McGlinn, Campaign Chairman, “This campaign truly offers us the opportunity to take the next step in shaping Caron’s future, as we continue to enhance our treatment programs.” Olsen deTurck, Reading, are the architects for the project.

The fitness center will be available to all patients with a special emphasis on adolescents. It is a critical component that significantly enhances Caron’s treatment programs and compliments the longer lengths of stay that Caron has been able to achieve. The fitness center represents the final piece of Caron’s master campus plan that was set into motion five years ago.

Physical exercise is an essential part of the treatment plan for anyone suffering from a chronic, progressive illness like addiction. It is especially critical for adolescents as they learn the importance of a healthy lifestyle, something that is so vital to their long-term sobriety. The construction of a new fitness center will significantly increase Caron’s capability to integrate health and fitness into the daily lives of adolescents while teaching them skills and healthy alternatives to using alcohol and drugs. Doug Tieman, Caron’s President/CEO states “Recovery is truly a powerful gift...giving our patients every opportunity to begin a new life in an environment that supports every aspect of recovery is a critical component of what we do.”



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FIRST CEO SUMMIT HELD IN DELRAY BEACH, FL

The first in a series of four planned CEO summits was held on September 15, 2005 in Delray Beach, FL. Three additional summits are planned for Chicago, New York and Los Angeles. The Summits are sponsored by *Treatment Magazine* and *Sterling and Sterling* an insurance broker based in the New York area. The summits are intended to bring together NAATP CEO's and prospective member CEO's for an evening of networking and a presentation by a recognized CEO in the addiction treatment world. Nearly 50 persons attended this first Summit in Florida.

Dr Barry Karlin, the CEO of CRC Health Group, Inc and board member of the National Association of Addiction Treatment Providers was the presenter for the event in Delray Beach. Dr. Karlin spoke on "Addiction Treatment Centers of the Future". In a thoughtful and provocative presentation, Dr. Karlin examined the delivery of addiction treatment from his perspective and identified the forces which he believes will shape how addition treatment is delivered and thus how it is



reimbursed. His key elements included an even defined look at addiction as a chronic disease and how treatment providers will need to establish themselves as providing ongoing treatment for at least five years and how

addiction treatment providers must begin to use evidence based practices to achieve optimal results. Dr. Karlin also described the value of technology in both accessing records and in transferring persons from one level of care to another.

The evening included the announcement and challenge by NAATP for its members to "donate" treatment beds for persons significantly impacted by Hurricane Katrina. NAATP has set a goal of getting over \$5 million worth of treatment and transportation donated to persons needing addiction treatment and not having those services available in the impacted areas. The group assembled in Delray Beach responded to the challenge by pledging over 35 beds for treatment.

The next CEO Summit will be in Chicago, IL and Ms. Ellen Breyer the President/CEO of the Hazelden Foundation will be the featured speaker.



Dr. Barry Karlin, CEO of CRC Health Group, Inc. was the presenter at the first of four CEO Summits.

GATEWAY REHAB PRESIDENT REAPPOINTED TO THREE-YEAR TERM ON STATE DRUG AND ALCOHOL ADVISORY COUNCIL

PITTSBURGH - Governor Edward Rendell reappointed Kenneth S. Ramsey, Ph.D., president and chief executive officer of Gateway Rehabilitation Center, to a three-year term on the Pennsylvania Advisory Council on Drug and Alcohol Abuse. Ramsey has served on the council since it was established by the Governor in 2004.



The advisory council is charged to develop a statewide plan for drug and alcohol treatment and prevention and regulations to establish funding priorities. The Commonwealth's secretary of health directs the advisory council, which includes Ramsey and other experienced addiction professionals. Ramsey, who has led Gateway to national prominence in drug and alcohol prevention and treatment, is also the current chairman of the National Association of Addiction Treatment Providers, which is the national voice of the addiction treatment field in the areas of public policy, advocacy, and funding.

"Having a voice in policy development is critical to improving access to treatment," Ramsey said. "Adequate funding is crucial to meeting the need and demand for addiction treatment. Alcohol and drug abuse, especially among youth, is a major health and social problem that affects our communities, our schools, and our families. It is imperative that we all speak out about this serious and deadly epidemic affecting our country today."

Research indicates that investing in treatment results in savings in health care costs for insurers and employers. "Beyond these important benefits," Ramsey added, "treatment helps to save lives. In this regard, the savings are incalculable." Gateway opened its adult inpatient facility in 1972 in Center Township (Beaver County), PA. Over the next 33 years, Gateway aggressively expanded and diversified services, created an outpatient treatment network, and initiated treatment programs for youth. The result is a network of locations throughout Pennsylvania and eastern Ohio that annually delivers care to over 8,000 individuals and their families.

Ramsey is president of the Beaver County Chamber of Commerce and member of the CEO Club of Pittsburgh and the Pittsburgh Rotary. In March, he received the 2005 Health Care Executive Hero Award in recognition of his efforts to improve the quality of health care for residents of the Pittsburgh area. He was named administrator of the year in May by the American College of Addiction Treatment Administrators.

Ramsey is a graduate of Wheeling College (now Wheeling Jesuit University) and Fordham University in New York City. He earned a Ph.D. degree in social work/strategic planning from the University of Pittsburgh. Ramsey resides in Imperial, PA.

NATIONAL ALCOHOL AND DRUG ADDICTION RECOVERY MONTH, 2005

BY THE PRESIDENT OF THE UNITED STATES OF AMERICA

A PROCLAMATION

The devastating effects of alcohol and drug addiction have destroyed the lives and families of countless Americans. During National Alcohol and Drug Addiction Recovery Month, we recognize the dangers of substance abuse and renew the hope of overcoming addiction for individuals across our Nation. This year's theme, "Join the Voices for Recovery: Healing Lives, Families and Communities," encourages those striving to recover from this disease and recognizes the many families, support organizations, faith-based and community groups, and volunteers working to help overcome addiction.

Substance abuse leads to a cycle of addiction and despair that too often causes disease and death among young people. The Helping America's Youth initiative, led by First Lady Laura Bush, is promoting positive youth development and combating alcohol and drug addiction. This initiative is helping our children to make healthy choices and build lives of purpose. To aid citizens seeking treatment and recovery for substance abuse, my Administration also has provided \$200 million over the past 2 years for the Access to Recovery program. My 2006 budget requests an additional \$150 million for this program to further expand treatment choices. Directing resources to individuals allows them to choose a program that suits their needs and increases their chances of success. In addition, we have increased opportunities for communities and faith-based providers to aid those suffering from addiction.

I encourage all Americans to support individuals striving to overcome addiction and the groups that are helping to fight alcohol and drug addiction. By working together, we can continue to build a more compassionate society that transforms lives and provides health, hope, and healing to those who hurt.

NOW, THEREFORE, I, GEORGE W. BUSH, President of the United States of America, by virtue of the authority vested in me by the Constitution and laws of the United States, do hereby proclaim September 2005 as National Alcohol and Drug Addiction Recovery Month. I call upon the people of the United States to observe this month with appropriate programs and activities.

IN WITNESS WHEREOF, I have hereunto set my hand this twenty-ninth day of August, in the year of our Lord two thousand five, and of the Independence of the United States of America the two hundred and thirtieth.

GEORGE W. BUSH

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INSTITUTE OF MEDICINE REPORT RECOMMENDS NIDA RESEARCH AGENDA FOR NEW ADDICTION THERAPIES

By Patrick Zickler, NIDA NOTES Staff Writer

A mother asks a pediatrician to vaccinate her child against nicotine's pleasurable effects, practically eliminating the possibility that the child will become a smoker. A patient in treatment for heroin addiction receives an injection of sustained-release medication that will prevent her from feeling the drug's euphoric effects for a year. As current drug abuse research brings such scenarios closer to realization, NIDA has begun to study the broad implications of these and other new types of preventive treatment. These therapies underscore the need to balance therapeutic benefits and ethical considerations, particularly if the person receiving treatment—a minor child or a person involved in the criminal justice system, for example—is not the person who chooses it.

At NIDA's request, the National Research Council's Institute of Medicine (IOM) identified ethical, legal, and behavioral issues that must be considered in the development and application of active and passive immunotherapies and sustained-release medication. The Institute's 306-page report recommends a set of guiding principles as NIDA-supported research pursues the development of these potentially powerful new preventive interventions.

Immunotherapies destroy drug molecules before they reach the brain. Active immunotherapy involves a vaccine that stimulates the body's immune system to create antibodies against drugs in the same way that an inoculation creates antibodies against polio or measles virus. Passive immunotherapy involves periodic injections of antibodies rather than stimulation of the immune system; an example of this type of therapy is tetanus immune globulin, which contains antibodies to provide short-term protection for someone whose injury may have exposed them to soil-borne tetanus bacteria. Sustained-release therapies involve injection or implantation of long-acting formulations of medications that are released over a period of weeks or months to block the effect of drugs in the brain.

The IOM report identifies ways to meet the challenges these interventions are likely to pose for researchers, treatment providers, policymakers, parents, and the public. Because the treatments may have lifelong effects, IOM recommends long-term studies involving animals of different ages, as well as their offspring, before human studies are undertaken.

IOM also recommends studies that can be used to establish clear guidelines for use of the new therapies in circumstances that are inherently coercive or nonconsensual, such as in the criminal justice system, child welfare cases, or the protective immunization of minor children. What, for example, are the possible legal consequences of administering immunotherapy medications to children or adolescents? Competent adults have the right to decline medical treatment, but the legal situation is more complicated when the patient is a minor and decisions made by others on his or her behalf may have a lifelong effect. Immunotherapies will leave long-lasting biological traces

that can be detected in routine blood or urine tests. Such markers could label patients as drug abusers long after they have entered sustained recovery, which could discourage some from utilizing these treatments. In its report, IOM says the development of immunotherapy and sustained-release medications highlights the need to understand addiction as a chronic medical condition that requires long-term management, a partnership between primary medical care and addiction treatment, and integration of psychosocial services into the treatment environment. The IOM report recommends that NIDA support models that integrate the new pharmacotherapies with psychosocial services in addiction treatment and primary care settings that reduce the stigma of substance abuse treatment.

The full report, *New Treatments for Addiction: Behavioral, Ethical, Legal, and Social Questions*, is available online at www.nap.edu/catalog/10876.html.

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Career Opportunities

The **CARON FOUNDATION**, internationally recognized for excellence in chemical dependency treatment, has the following opportunity available:

CLINICAL COORDINATOR

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Please submit resume and salary requirements to: Caron Foundation, Galen Hall Road, PO Box 150, Wernersville, PA 19565 Attn: Recruiter. Fax: 610-678-8583
Email: recruiter@caronfoundation.org

Years ago when I was in graduate school my major professor suggested that I take a road trip and visit a treatment center for alcoholics in Norton, KS. I was told and came to accept that Norton was not the end of the world but that you could see it from there. Nonetheless, I took the trip. What I experienced in Norton amazed me. At that time I had only an intellectual understanding of addiction and treatment methods. In the lecture hall I saw the 12 steps prominently displayed in the front. AA slogans like *EASY DOES IT; LET GO AND LET GOD; ONE DAY AT A TIME* were on the walls and were common in conversations. I attended a lecture given by Doc Leipold, Valley Hope's first clinical director. He spoke with conviction about a guaranteed method for gaining a sense of personal worth and feeling loved...by giving to others unconditionally without expectation of reward. Throughout the day I witnessed people living this paradox and proving the truth of it. I don't know what I expected really as a young psychology student visiting a treatment facility for the addicted—maybe angry people in conflict with the world and themselves—but it wasn't what I found at Valley Hope. What I found was a real world laboratory dedicated to learning about and promoting serenity and love. This was a place where people were at their best not at their worst. The staff were so incredibly earthy and wonderful and wise. I remember wanting to be a part of all of this. The last group I attended ended with a prayer:

God Grant me the serenity
To accept the things I cannot change,
The courage to change the things I can,
And the wisdom to know the difference.

And so I found a place where the most wounded of people found peace and love and could face conflict without being in conflict.

I was hooked and in short order was accepted into a wonderful organization. I remain after 28 years grateful to be part of an organization that works for peace and that teaches love and sobriety every day. I am grateful that I am part of an organization that embraces the simple yet elegant 12 step approach to recovery. I am grateful to have met so many brave people who live the 12 steps and who teach by their example. The work I grew to love was not on the world stage; it was not at a level of political activism; it has been with one alcoholic and one addict at a time.

Now, inexplicably, after years of doing what I could to help that one alcoholic and addict at a time I am suddenly entrusted with the leadership of a very old and noble treatment organization. There is one thing I can say for sure. Thank God for NAATP. NAATP is exactly what I need and what our treatment organization needs to not only adapt to the rapid changes in our field but to help us see into the misty future of healthcare in our country so that we can better plan strategically. I am a newcomer to the Board and hope that I can continue the good work and service provided by Dennis Gilhousen, Valley Hope's retired leader of many years. Though a newbie, I have already witnessed in action the collaboration and comradeship that Doug Tieman wrote about in his May BOARD ROOM article. In September I participated in a discussion group (at the NAATP sponsored focus group on Managed Care) with NAATP board members Carl Kester and Phil Eaton and found the experience invaluable. The willingness of folks in our field to share their strength and knowledge in the service of the greater good, helping the addicted, continually inspires me. I have been impressed with the smooth transition of leadership on the Board from one dedicated and talented professional to another, most recently from Dennis Gilhousen, to Doug Tieman and now Ken Ramsey. I am amazed at the work of Ron Hunsicker. He is the super glue that holds together a fairly unruly and independent group. I am honored to serve on the NAATP Board and only hope that in time I will be able to give as much as I am now getting. I encourage all of our members to become actively involved. From this small corner of Kansas the clouds of significant change are on the horizon. Unfortunately, we in Kansas are best known for our tornadoes. More than ever, the addicted will need us to speak loud and clear and with one voice.

KEN GREGOIRE, PH.D.
CHIEF EXECUTIVE OFFICER
VALLEY HOPE ASSOCIATION
MEMBER BOARD OF DIRECTORS, NAATP

UPCOMING EVENTS FOR YOUR CALENDER

The Ben Franklin Institute will hold its Summit for Clinical Excellence Conferences in **Marco Island, Florida October 6-9; and in Scottsdale, Arizona November 2 - 5**. For more information call 800 643 0797 or visit www.BFIsummit.com.

Haymarket Center will present the 2005 Autumn Workshop Series from **Sept 10-Nov 5 at Haymarket Center, Chicago**. Topics include: "Cannabis Dependence, Withdrawal and Recovery"; "Advanced Training in Clinical Supervision;" and "Substance Abuse and the Lesbian, Gay, Bisexual and Transgender Population." For more information, contact Carol Blyskal at (312) 226-7984 x 314, or visit www.hcenter.org.

UCLA Integrated Substance Abuse Programs hosts the Western Conference on Addictions (WCA): Improving Treatment with Scientific Knowledge on **Nov. 11 - 13 in Universal City, CA**. For more information, visit www.uclaisap.org.

The National Association of Addiction Treatment Providers will hold its Board Meeting **November 8-9, 2005 in West Palm Beach FL**. The site will be the PGA National Resort which will host the NAATP Annual Leadership Conference May 19-23, 2006.

The Department of Criminal Justice Sciences will collaborate with the Department of Agriculture, the Mennonite School of Nursing, and Project X at Illinois State University to sponsor a conference titled "The impact of Methamphetamine on Agriculture, Health Care and Child Welfare," on **Nov 10 in Bloomington, IL**. For more information, call Ms. Linda Henderson at 217-522-1129.

The National Association of Addiction Treatment Providers presents the **South East Conference on Addictive Diseases (SECAD) in Atlanta, GA, November 30 - December 2, 2005**. This will be the 30th SECAD! For more information, visit www.naatp.org/secad.

The National Association of Addiction Treatment Providers will present their annual **Leadership Conference, May 19-23, 2006 in West Palm Beach, FL**. For more information, visit www.naatp.org.

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The editorial office is located at:
313 West Liberty Street, Suite 129
Lancaster, PA 17603-2748

Editor

Ronald J. Hunsicker

Phone: 717-392-8480

Fax: 717-392-8481

E-Mail: RHunsicker@naatp.org

Web Site: www.naatp.org

NAATP Board Chair

Kenneth S. Ramsey, President/CEO

Gateway Rehabilitation Centers

Phone: 412-766-8700 X101

Fax: 724-378-6289

kenramsey@gatewayrehab.org

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The National Association of Addiction Treatment Providers
313 West Liberty Street, Suite 129
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