



## 2017 POLICY PRIORITIES

*The Association of Substance Abuse Programs represents businesses that provide prevention, treatment, and recovery programs across the state. These agencies provide state of the art, evidence-based services to children, adolescents and adults on a daily basis. Substance use disorders create public health issues and, when left untreated create significant costs to the state of Texas and our citizens. However, a robust prevention, treatment, and recovery system within the state would result in a significant return on investment with both monetary and human potential being recognized. As the demand for these services continues to increase, we will advocate for policies that support the priorities below allowing providers to deliver quality services to those in need.*

### INCREASED ACCESS TO COMPREHENSIVE SERVICES

### ROBUST PREVENTION SERVICES

### A STRENGTHENED WORKFORCE INCLUDING PEER SUPPORT

#### Investment in Substance Use disorder services

**We support the Exceptional Item 4.2.4 for substance use prevention and treatment totaling \$24,468,366**

It is estimated that 8.1% (1.6 million) Texans have a substance use disorder, with approximately 42% (679,228) of those eligible for state funded assistance. Currently, we are only meeting 6% of the need for state funded services for adults and 5.2% for youth.

Research demonstrates a return on investment of \$1:\$7. Currently, while 16.4% of the state budget is spent on substance use, only 2 cents of every dollar is spent on prevention and treatment while the remaining 98 cents pays for the consequences of addiction. It is simply more cost efficient to strengthen the infrastructure and capacity, than to continue to pay for the consequences of addiction.

#### Prevention Services

#### Maintain and expand evidence based prevention services

An extensive, effective prevention infrastructure already exists and is built on evidence based interventions. These interventions address a wider range of potential problems beyond substance misuse. Alcohol and drug use among adolescents are typically part of a larger spectrum of behavioral problems, including mental disorders, risky and criminal behaviors, and difficulties in school, making them powerful and cost-effective investments that pay off in reduced health care, law enforcement, and other societal costs.

Maintaining and extending the existing infrastructure will not only save lives and dollars, but will improve the overall health and well-being of individuals, families and communities.

Prevention programs, practices and policies are a cost effective investment in our future.

## Prescription Drugs

### **Expand and improve health responses to addiction to reduce prescription drug abuse and opioid overdose deaths**

Together, the prescription drug abuse and the opioid overdose crisis are taking over 100 American lives per day, and for the first time overdose has exceeded automobile accidents as the leading cause of death.

To help stop and prevent further increases in this epidemic, we support an approach that provides prevention and education tools to communities, makes available life-saving tools such as Naloxone® and improves access to treatment and pre-natal care to reduce instances of neonatal abstinence syndrome.

At the same time, we must improve data collection systems on deaths related to accidental poisonings (specifically for opioid overdose) to obtain accurate information about the prevalence of drug overdoses

## Parity

### **Enforce compliance with the Mental Health Parity and Addiction Equity Act (“Parity” Law)**

If an individual has insurance, but that insurance does not equitably cover substance use disorder treatment, they are often ineligible for state funded services. This makes treatment unavailable for those individuals.

We support creating a more direct and expanded role for Texas Dept. of Insurance to enforce Parity and simplify the consumer complaint process for potential violations.

Strengthen requirements for insurance companies to disclose medical necessity criteria for mental health and substance use disorder services and provide explanations for any denial upon request.

## Workforce Development

### **Recruit and train a diversified workforce to effectively address substance use disorders**

Integration of primary health, mental health, and substance use disorder services and utilization of peer support, create a higher likelihood of sustained recovery. To this end, establishing a Medicaid reimbursement for peer recovery coaches and mental health peer specialists proves to be beneficial.

Provide education assistance for Licensed Chemical Dependency Counselors

Promote substance use disorder continuing education training for health and behavioral health professionals. Medical professionals are the first line of defense for early intervention and referral to treatment, but they must have proper training in substance use disorders.

## Alternatives to Criminal Justice

### **Create, support, expand and promote community alternatives to incarceration, providing individuals with the services they need to participate in society successfully.**

Advance alternatives to incarceration for individuals with non-violent substance related offenses and expand availability and access to re-entry services

Expand utilization of probation and substance use disorder treatment in lieu of prison for drug offenses. Utilize diversion opportunities, such as specialty courts, to provide community alternatives to incarceration.

Expand opportunities for behavioral health, vocational, housing, recovery support services and other support services to promote successful community re-integration and reduce recidivism

For more information, contact Amy Granberry, Legislative Chair 361-826-5364 or [agranberry@cbadrc.org](mailto:agranberry@cbadrc.org) or

Cynthia Humphrey, Executive Director 512-923-1173 or [chumphrey@asaptexas.org](mailto:chumphrey@asaptexas.org)