



Adoption
 Asian American Family Services
 Avondale House
 Bering Omega Community Services
 Care for Elders
 Career and Recovery Resources, Inc.
 Catholic Charities of the
 Archdiocese of Galveston-Houston
 ChildBuilders
 CHILDREN AT RISK
 Christ the Good Shepherd Catholic Church
 Coalition of Behavioral Health Services
 Collaborative for Children
 Council on Alcohol & Drugs Houston
 Communities In Schools
 Cypress Creek Hospital
 DePelchin Children's Center
 Family Services of Greater Houston
 Fort Bend Regional Council on
 Substance Abuse, Inc.
 Gateway to Care
 Good Neighbor Healthcare Center
 Gulf Coast CHIP Coalition
 Harris County Healthcare Alliance
 Healthcare for the Homeless-Houston
 Houston Area Association for the
 Education of Young Children
 Houston Area Women's Center
 Houston Endowment
 Houston Food Bank
 IntraCare Hospitals
 Jewish Family Service
 Justice for Children
 Legacy Community Health Services, Inc.
 MHMRA of Harris County
 Memorial Hermann Healthcare System
 Mental Health Association of
 Greater Houston
 Montrose Counseling Center
 NAMI Metropolitan Houston
 Neighborhood Centers Inc.
 Northwest Assistance Ministries
 Rockwell Fund
 San Jose Clinic
 SEARCH
 South County Community Clinic,
 DBA The Community Clinic
 Spaulding for Children
 Target Hunger
 Texas Children's Hospital
 The Arc of Greater Houston
 The Arrow Project
 The Center for Success and Independence
 The Menninger Clinic
 The Women's Home
 United Way of Greater Houston
 Wesley Community Center
 West Oaks Hospital
 YMCA of Greater Houston

Behavioral Health: Expansion of Community-Based Substance Abuse Treatment

Position Statement approved by One Voice on September 8, 2006

Issue/Concern: State funding for substance abuse services does not keep pace with need. Additionally, the state's failure to cover outpatient treatment for substance abuse disorders under the Medicaid program hinders individuals from accessing this needed care and prevents a more efficient use of federal funds.

Specific Policy Recommendation(s):

- ★ Double the state's general revenue investment in community-based substance abuse treatment and prevention services by appropriating an additional \$27 million annually.
- ★ Revise the state's Medicaid plan to include outpatient substance abuse treatment and case management for both juveniles and adults.

How does this issue/recommendation relate to prevention and early intervention or maximizing federal funds for health and human services? It is estimated that 1.6 million Texans have substance use disorders and millions more live in households affected by alcohol or drug problems. Not only is drug and alcohol misuse and addiction a hardship on individuals and families, it is a significant economic burden for Texas government, businesses and taxpayers. The total economic costs of substance abuse in Texas were estimated at close to \$26 billion in 2000. Prevention and treatment services are effective in deterring abuse and alleviating addiction. Increased expenditures on substance abuse service provision will save the state money through multiple cost offsets such as reduced truancy, crime, foster care, incarceration, court costs, domestic violence, homelessness and health care utilization. The rate of return on substance abuse services is estimated at 7:1 for treatment and 5:1 for prevention. The Treatment Alternatives to Incarceration Program, which uses community-based treatment services, returned \$2.86 in reduced recidivism costs for every \$1 invested.

The current state Medicaid program does not cover adult outpatient treatment or case management services, which is a missed savings opportunity because of the medical cost offsets associated with treatment and the ability to leverage state funds with federal funds. In fiscal year 2005, Texas' average monthly ER costs were almost 35% lower for Medicaid clients receiving needed DSHS substance abuse treatment, representing an average monthly ER cost offset of \$47.00. Including a substance abuse benefit in Medicaid would lower medical costs by reducing low birth weight, Fetal Alcohol Spectrum Disorders and use of neonatal ICU.

Texas spends only .27 cents per capita on drug and alcohol services to address a problem that costs \$1,244 per man, woman and child in our state. It is time to fully reap the lucrative savings available from the provision of community-based substance abuse prevention and treatment services by appropriating an additional \$27 million annually to expand service capacity and revising the state's Medicaid plan to include outpatient substance abuse treatment and case management for both juveniles and adults.

Supporting Facts/Research/Resources:

- ★ In March 2005 the Texas Criminal Justice Coalition conducted a survey that showed 75% of Texans agreed that drug offenders should go through treatment as opposed to incarceration. (Texas Criminal Justice Coalition, "Solutions for Sentencing & Incarceration", June 2006)
- ★ 25% of emergency room admissions were alcohol related. (NY Newsday, "Sobering Facts", 2002)

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Position Statement approved by One Voice on September 8, 2006 (cont.)

Supporting Facts/Research/Resources:

- ★ Treatment reduces drug use by 40-60% and significantly decreases criminal activity during and after treatment. (ONDCP website, www.ondcp.com, Treatment Effectiveness)
- ★ The Life Skills Training Prevention Program produces 59-60% lower levels of tobacco, alcohol and marijuana use. (Prevention Drug Use Among Children and Adolescents-NIDA 1997)
- ★ Approximately 84% of all Texas prisoners are involved with alcohol or drugs. (The Center on Juvenile and Criminal Justice, “Texas Tough: An Analysis of Incarceration and Crime Trends in the Lone Star State”, 2006)

Legislative Outcome: Funding for substance abuse at DSHS decreased by \$20.9 million, according to the Governor’s report. Other reports offered differing numbers, but despite increases in the TDCJ budget, community-based treatment funds were cut.

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