House Committee on Appropriations
Article II
Health and Human Services
Substance Use Services

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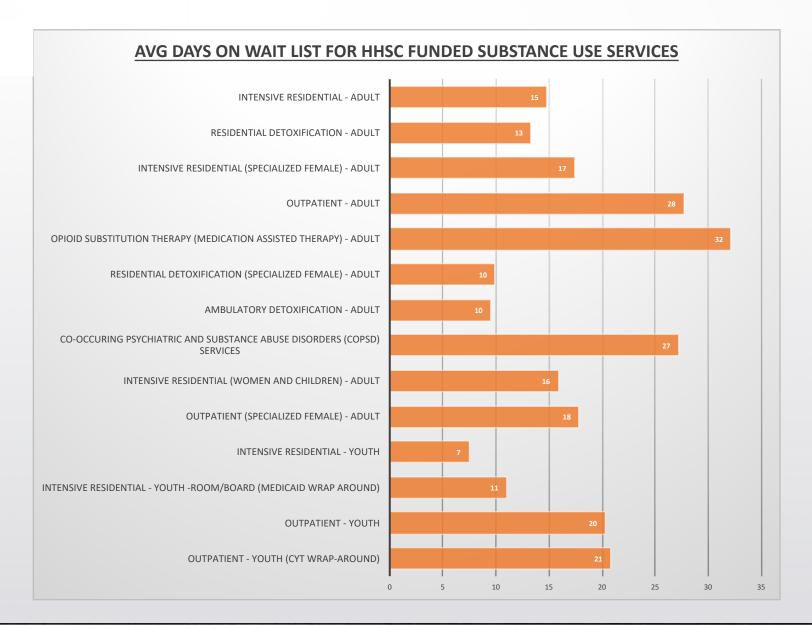
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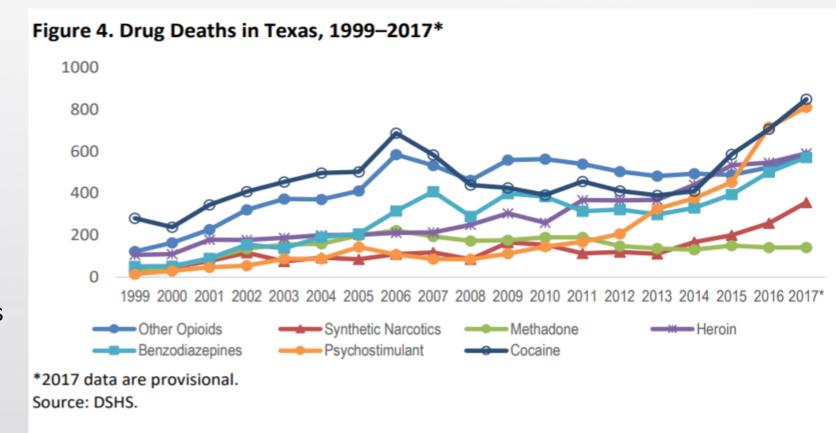
The lack of Substance Use Disorder treatment/recovery capacity results in:

- limited prevention services
- lengthy treatment waiting lists/and declining provider base
- lack of co-occurring SUD/MH services
- lengthy wait lists for medication assisted treatment
- limited peer support/harm reduction
- few options for recovery housing



Downstream Impacts of Under Resourced Substance Use Services: Deaths and Overdoses

- Drug overdose deaths rose by over 7% in 2016, many due to opioids.
- Four Texas cities (Texarkana, Amarillo, Odessa, and Longview) are among the top 25 in the country for prescription opioid abuse rates.
- Health care costs related to opioids reached almost \$2 billion in Texas in 2014.



About 43% of child abuse/neglect investigations and 66% of child removals in Texas stem from concerns about caregiver substance use, including alcohol.

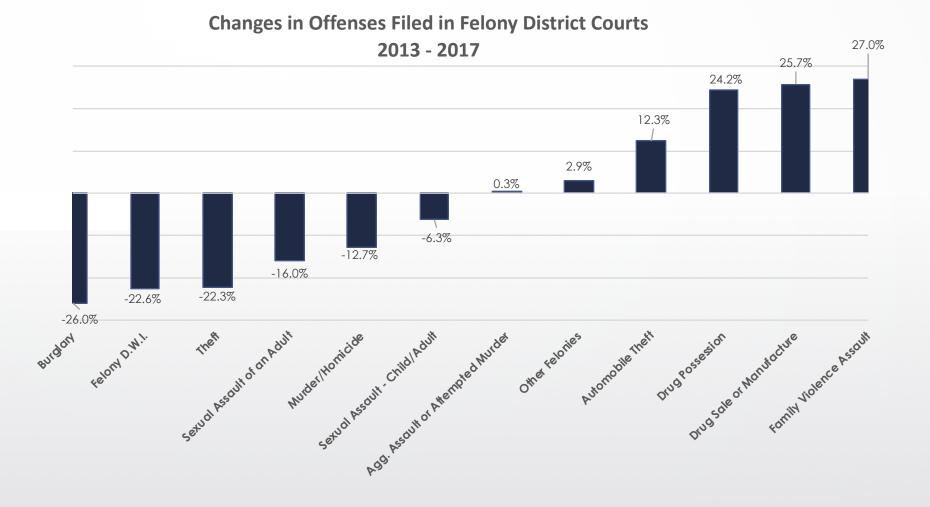
Downstream
Impacts:
Maternal Mortality
and
Children at Risk

In fiscal year 2017, 52% of child fatalities caused by abuse or neglect included a caregiver actively using and/or under the influence of a substance that affected his or her ability to care for the child.

Texas still faces a high rate of maternal mortality, with drug overdose as the top cause of maternal death during pregnancy and up to one year postpartum.



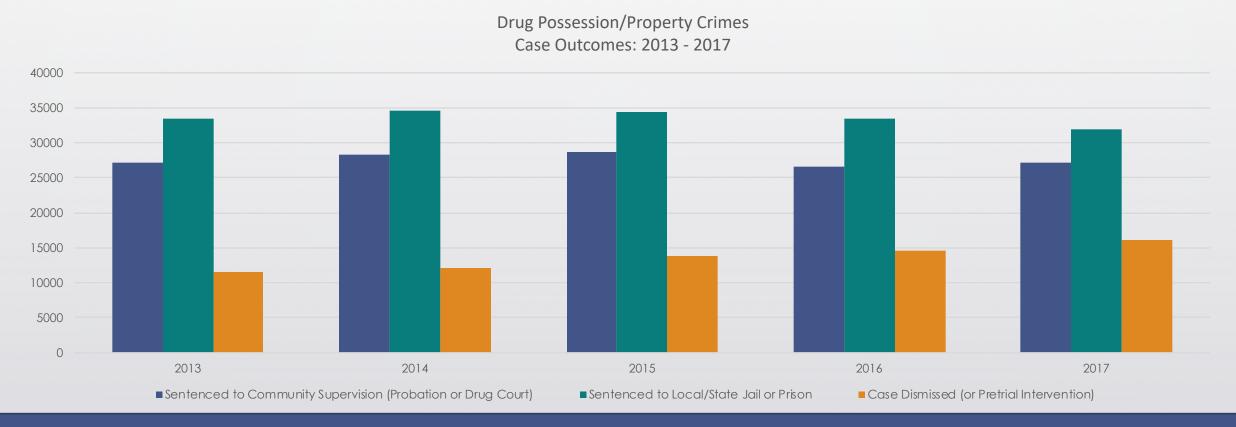
Downstream
Impacts:
Major Crime Down,
But Drug-Related
Charges Up



Low-income people with substance use disorder in Texas are more likely to be arrested than to access recovery services.

Lack of Community Capacity Drives Up Arrests, and Strains the Ability of the Criminal Justice System to Divert People into Treatment

[MOST PEOPLE ARRESTED FOR LOW-LEVEL DRUG/PROPERTY CRIMES ARE NOT DIVERTED]



Most defendants incarcerated for drug possession will be re-arrested within three years, while diverting people into community services lowers recidivism rates by 30-50%.

Recommendations

1. Expand Substance Use Treatment Capacity.

Fund the \$45 million requested by HHSC to increase Substance Use treatment provider rates.

- 2. Expand Allowable Use of Mental Health Grant Funds to Include Projects to Improve the Continuum of Care for Substance Use Disorder.
- Increase the allocation for mental health grants above 2018/19 levels (recommend \$30 million per year) to expand both MH and SUD services.
- Decrease the match requirement for substance use-related grants.