Robust and reliable funding for substance use disorder (SUD) services is essential for closing the treatment gap, supporting long term recovery, and preventing the onset of drug and alcohol use in youth and the likelihood of developing a substance use disorder as an adult. The ripple effects of limited and/or inaccessible SUD care are costly and drive expenditures across the state’s budget including: foster care; public safety; incarceration; homelessness; human trafficking; emergency room visits and hospitalization. Research and advances in neuroscience have helped us understand how drugs affect the brain, leading to the recognition that addiction is a chronic brain disorder that can be effectively prevented and treated. The unprecedented number of deaths associated with substance use disorders is taking a devastating toll on our citizens, families, and communities. We urge legislators to make substance use disorder prevention, treatment and recovery support a priority and support the following policies:

**Preserve The State’s Safety-Net Treatment Infrastructure**
The cost of providing treatment continues to grow especially in light of current workforce shortages. The gap between the cost of providing treatment and the state’s reimbursement rate has risen to unsustainable levels and a meaningful rate increase is necessary to avoid a experiencing a capacity crisis because providers cannot continue to treat state-funded patients at a loss.

- Support a Title II HHSC Appropriations Rider directing HHSC to approve an internal staff proposal to increase SUD treatment rates from existing funds.

**Increase Capacity and Strengthen Treatment Services**
Unfortunately, a majority of Texans with Substance Use Disorder (SUD) do not receive the treatment they need due to a shortage of service providers and workforce. Both publicly and privately funded treatment providers face challenges from managing outdated/inefficient regulation to promoting quality industry standards. In addition to inadequate rates for state-funded providers, violations of state and federal parity law deny access to some individuals despite having commercial health benefit coverage.

- Support **HB 248** by Murr to prevent chemical dependency facilities from engaging in certain prohibited solicitation practices and establish an enforcement mechanism to strengthen compliance.

- Support **HB 233** by Murr to promote safe and efficient chemical dependency facility standards by amending the current statute on training requirements for abuse, neglect, and illegal, unprofessional, and unethical conduct training. The amendment would maintain an initial 8-hour training requirement and reduce the annual requirement to 4 hours.

- Support **HB 5121** by Turner and **HB 3460** by Price to bring Texas into compliance with the Federal parity rules as recommended by the Mental Health Condition and Substance Use Disorder (MHCSUD) Parity Workgroup.

- Support **H.B. 1357** by Holland to remove this sunset date and make Medicaid reimbursement for medication-assisted treatment for opioid or certain substance use disorders permanent in state law.

- Support the **$14M increase** included in the base budget to expand the behavioral health loan repayment program.

**Expand Effective Evidence-Based Prevention Services**
Evidence-based substance use/misuse prevention does more than decrease substance use/misuse. Programs designed to reduce risk factors and promote protective factors have been found to increase school participation and academic achievement as well as reduce substance misuse and other problematic youth behaviors such as bullying, violence, teen pregnancy. Utilizing the existing Texas drug and alcohol prevention infrastructure is an effective and efficient way for schools to support student mental health, implement restorative discipline practices, and promote student wellbeing.
• Support **SB 948** by West to establish a dedicated funding allotment for school mental health. Allocate $400 million (for the biennium) to school districts to implement a comprehensive mental health strategy that aims to intervene early; before a crisis occurs or problem worsens.

**Develop a Quality Continuum of Recovery Support Services to Sustain Long Term Recovery**

Recovery support services are an essential component of the SUD continuum of care. Research shows various community recovery support services help to sustain long term recovery and improve recovery quality by addressing factors beyond abstinence such as employment, family/social relations, peer coaching and housing.

• Support **HB 299** by Murr to establish voluntary recovery housing certification and incentives.

**Reduce Drug Related Overdoses and other Deaths Associated with Substance Misuse and Addiction**

Deaths associated with substance misuse and addiction have risen to alarming levels... largely driven by fatal overdoses from fentanyl. According to the Texas Department of State Health Services (DSHS), fentanyl related overdoses climbed from 883 in 2020 to 1,672 deaths in 2021 — an 89% increase. Substance use disorders are also associated with other concerning mortality trends including maternal mortality and suicide.

• Support **HB 362** by Oliverson which will exclude fentanyl test strips from classification as drug paraphernalia so it is legal to test for the presence of fentanyl and reduce the potential for an accidental overdose to occur.

• Support **SB 1319** by Huffman which addresses participation in overdose mapping to provide near real-time suspected overdose surveillance data to support public safety and public health efforts in mobilizing an immediate response to a sudden increase or spike in overdose events.

• Support **HB 12** by Rose to extend Medicaid eligibility to cover care for 1-year post-partum as an important measure for decreasing maternal mortality in Texas.

• Expand the supply, distribution and use of naloxone and overdose prevention education as an essential strategy to reverse overdoses and save lives (multiple bills filed).