



THA TAKEAWAYS

Price and Hinojosa Carry Substance Use Workforce Bills With THA Support

Growing the Substance Use Workforce is Key to Addressing Addiction

Texas has long had too few health care professionals to treat the growing number of Texans with substance use disorders. The workforce shortage is becoming more acute as the rate of opioid abuse increases, and users are getting younger.

In 2015, just 2.3 million of the 21.7 million Americans needing substance use treatment actually received it. In Texas, more than 80 percent of counties have too few behavioral health providers to meet residents' needs.

The consequences of untreated substance use manifest in more chronic health conditions, poorer health outcomes, increased encounters with the justice system and reduced employment and economic productivity.

In response to recommendations by the Texas House of Representatives' interim Select Committee on Mental Health, two bills have been filed this session to address Texas' substance use professional workforce shortage. The Texas Hospital Association supports House Bill 3083 by Rep. Four Price (R-Amarillo) and Senate Bill 1509 by Sen. Juan "Chuy" Hinojosa (D-McAllen).

These bills would add licensed chemical dependency counselors to the existing Loan Repayment Program for Mental Health Professionals, thereby incentivizing more individuals to become substance use treatment providers.

Licensed chemical dependency counselors receive in-depth education and training specific to addressing drug and alcohol problems and treating substance use disorders.

As filed, these bills:

1. Add licensed chemical dependency counselors to the existing education loan repayment program for behavioral health professionals.
 - a. Increase the number of substance use treatment providers in Texas.
2. Make eligibility for repayment assistance contingent on serving indigent populations in a mental health professional shortage area.
 - a. Help fill LCDC positions in criminal justice, outpatient and hospital settings, especially rural and underserved areas and increase traditionally underserved populations' access to substance use treatment.
3. Spread loan repayment assistance over the course of five years, as long as the professional is continuing to serve indigent populations in a mental health professional shortage area.
 - a. Improve the state's workforce shortage by incentivizing LCDCs to establish their careers and maintain their practices in shortage areas.
4. Build on the state's 2015 investment of more than \$325 million in substance abuse prevention and treatment services.

- a. Reduce involvement with the criminal justice system and improve community safety, health outcomes and employment opportunity.
5. Help normalize treatment for substance use disorders and improve access to necessary treatment.
- a. Encourage timely treatment and reduce inappropriate use of emergency departments.

For more information, contact:

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