

Meadows Mental Health Policy Institute

Michele R. Guzmán, PhD —Testimony on House Bill 3672, April 17, 2019

The Health and Human Services Commission (HHSC) is the state-designated Single State Agency (SSA) for substance use disorder services. In that role, HHSC is the state agency that the Substance Abuse and Mental Health Services Administration (SAMHSA) funds with Substance Abuse Prevention and Treatment Block Grant dollars, based on a federal formula. As the SSA, HHSC is responsible for reporting data to SAMHSA through a federal system called the Treatment Episode Data Set (TEDS). Data reported into this system are sometimes used to determine eligibility for certain funds. As an example, in the spring of 2018, SAMHSA released a funding opportunity for targeted expansion of capacity to increase access to medication-assisted treatment. The eligible applicants for this funding opportunity were limited to states with the highest rates of treatment admissions for heroin and opioids per capita, including those with the most dramatic increases as identified in the 2015 version of the TEDS. In this case, Texas was *not one of the 35 states identified* with the highest rates and otherwise qualified Texas entities were thus not eligible to submit applications.

Texas is one of several states that report data to TEDS only for services paid for with state and federal funds. This means that only services provided through contracts issued by the Behavioral Health Services Section within HHSC are reported. As a result, data reported do not include services paid for by HHSC through Medicaid managed care contracts, nor do they include services provided in state-licensed substance use disorder (SUD) treatment facilities and paid by other sources, including local government funds, private insurance, and private pay.

By contrast, many other states require all state-licensed facilities to report data on the services provided to everyone they treat, which captures the broadest perspective of those receiving SUD services in treatment facilities for those states. Texas lacks the legislative authority and state infrastructure in place to require, collect, and report these data; because Texas reports only partial data, our needs are understated compared to those other states.

House Bill (HB) 3672

HB 3672 would grant HHSC the authority to collect relevant admission, discharge, transfer data from chemical dependency treatment facilities to satisfy applicable data set requirements. HHSC would then report this data through TEDS, resulting in a more accurate rate of treatment admissions for SUD and better positioning Texas for its fair share of federal dollars.