



**National Association of  
State Alcohol and Drug Abuse  
Directors, Inc.**

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## KEY RECOMMENDATIONS:

- **Include equitable and full coverage for, and access to, high quality addiction prevention, treatment and recovery services**
- **Partner with State substance abuse agencies in development and implementation**
- **Maintain and enhance public safety net programs for addiction services – including the Substance Abuse Prevention and Treatment (SAPT) Block Grant**

## POLICY BRIEF: HEALTH REFORM

### BACKGROUND

The National Association of State Alcohol and Drug Abuse Directors (NASADAD) applauds President Obama and Congress for working to enact comprehensive health reform legislation. The Association stands ready to partner with stakeholders to help make the promise of health reform a reality. As the process moves forward, NASADAD offers three core priorities to consider:

\*Include equitable and full coverage for, and access to, high quality addiction prevention, treatment and recovery services

\*Partner with State substance abuse agencies on implementation

\*Maintain and enhance public safety net programs for addiction services, including the Substance Abuse Prevention and Treatment (SAPT) Block Grant

### SCOPE OF THE PROBLEM

Addiction is a distinct and prominent health problem and should be included in health reform. According to the National Survey on Drug Use and Health (NSDUH), 23.2 million people aged 12 or older had an illicit drug or alcohol use problem in 2007. During the same year, approximately 2.4 million received treatment for such a problem at a specialty facility. As a result, 20.8 million people needed but did not receive services in 2007 in a specialty facility.

### IMPACT OF ADDICTION ON OTHER DISEASES

Addressing addiction will help address other chronic diseases. In a 2004 study in the Journal of the American Medical Association (JAMA), researchers examined “actual causes of death” defined by the Centers for Disease Control and Prevention (CDC) as factors that contribute to leading killers such as heart disease, cancer and stroke. The study identified nine leading actual causes of death. Tobacco, alcohol and illicit drugs – killing 530,000 Americans in 2000 – were three of the top nine. The others were diet/weight; microbial agents; toxic agents; motor vehicle accidents; firearms and sexual behavior.

### TAXPAYERS SPEND MORE WHEN ADDICTION IS NOT ADDRESSED

In 1998, spending for substance use disorders treatment was \$15.5 billion. Yet the total economic cost – linked to associated medical consequences, crime, lost earnings, motor vehicle crashes and more – was 20 times more: \$184.6 billion for costs pertaining to alcohol abuse and \$143.4 billion for costs pertaining to other drug use (Harwood, 2000).

*“Given both the momentum and the expertise that has developed in the States, national health reform should focus on enacting a broad federal framework with incentives for States to build upon their strengths and accomplishments. With that in place, States can build upon the existing policies and structures to expand coverage, protect consumers, evaluate quality, encourage price transparency, and meet the shared health reform goals of governors and federal policymakers.”*

*Raymond Sheppach, Ph.D., Executive Director,  
National Governors Association (NGA), Testimony before the  
Senate Finance Committee, May 5, 2009*

### FINANCIAL INVESTMENTS IN ADDICTION SERVICES SAVE MONEY

A recent study of Iowa’s prevention programs found that “Investing in addiction prevention programs yields a 10-1 return for society.” In 2006, the National Institute on Drug Abuse (NIDA) noted that for every dollar spent on addiction treatment programs, there is an estimated \$4 to \$7 reduction in the cost of drug related crimes. With savings related to health care added, the savings to cost ratio was 12:1.

### BENEFITS OF PREVENTION, TREATMENT AND RECOVERY SERVICES

Research and experience demonstrates that prevention, treatment and recovery services are effective. The Substance Abuse Prevention and Treatment (SAPT) Block Grant is a vital federal program that should be maintained in any health reform package. According to the Substance Abuse and Mental Health Services Administration (SAMHSA), the SAPT Block Grant program provided treatment services for approximately 2 million client admissions in Calendar Year 2007. During that year, at discharge from treatment, 73% were abstinent from illicit drug use; 80% were abstinent from alcohol use; 89% had no involvement with the criminal justice system; and approximately 50% were employed or in school.

### ABOUT NASADAD

NASADAD represents the Nation’s State substance abuse agencies, also known as Single State Authorities (SSAs). NASADAD’s mission is to promote effective and efficient State substance abuse service systems. The association’s two component organizations are the National Prevention Network (NPN) and the National Treatment Network (NTN).

## EQUITABLE COVERAGE FOR – AND ACCESS TO – HIGH QUALITY ADDICTION PREVENTION, TREATMENT, AND RECOVERY SERVICES

Health reform efforts should recognize substance use disorders as chronic health conditions.

*Coverage:* Any benefit package contained in health reform legislation should include the full range of substance use disorder prevention, early intervention, treatment (including medication assisted treatment) and recovery support services. The bill ought to directly reference the Wellstone/Domenici Mental Health Parity and Addiction Equity Act of 2008 and adhere to the cornerstone requirements of the Act: substance use disorder services should not be subject to arbitrary limits on days, visits and other conditions of coverage.

*Access:* Health reform should promote access to the covered benefit by empowering trained professionals to determine service needs. In addition, health reform should promote transparency in the system to shine a light on limitations and restrictions on coverage; reasons for denial; and methods to engage in a fair and independent review process. Finally, the package should ensure that State laws providing stronger coverage, rights, methods of access to treatment and consumer protections remain in effect and are not preempted.

## PARTNER WITH STATE SUBSTANCE ABUSE AGENCIES ON IMPLEMENTATION

State substance abuse agencies oversee and implement effective, efficient and holistic prevention, treatment and recovery systems. A number of key health reform issues would benefit from partnering with State Directors.

*Outcomes:* States are partnering with the Substance Abuse and Mental Health Services Administration (SAMHSA) to implement the National Outcome Measures (NOMs) initiative. States now measure the impact of services on the use of alcohol and other drugs; criminal justice involvement; housing; employment and other indicators. Health reform should build on the experience of NOMs to improve both performance data reporting and client outcomes.

*Quality:* State substance abuse directors use a number of tools to ensure quality services, including the use of standards of care; licensing/certifying prevention and specialty treatment programs/professionals; sponsorship of provider training; use of data to monitor and incentivize outcomes; blending research on effective services to practice; and more.

*Health Information Technology (HIT):* An important aspect of NOMs in particular, and efficient health systems in general, is the implementation of web-based HIT solutions. A cornerstone of this cutting edge technology is the development of electronic health records (EHRs). Timely access to client-level information helps clinicians make educated practice decisions and helps managers effectively allocate resources.

*Cost-containment:* State substance abuse directors utilize a number of tools to contain costs yet maintain effective, clinically appropriate services. For example, States work with providers to use appropriate assessment tools and patient placement criteria. These tools help ensure patients receive the appropriate level of care for the appropriate duration. States are moving to build recovery oriented systems of care – a web of low-cost yet very effective service supports help people in recovery stay in recovery. Health reform should continue to expand this critical investment in recovery services in order to promote and sustain health lifestyles.

## MAINTAIN AND ENHANCE SAFETY NET PROGRAMS LIKE SAPT BLOCK GRANT

The SAPT Block Grant, the foundation of the publicly funded service system, accounts on average for approximately 40% of expenditures by State substance abuse agencies' across the country. This vital program serves our nation's most vulnerable, low income populations – those with HIV/AIDS, pregnant and parenting women, youth and others – by ensuring access to substance abuse services.

The experience of States that have engaged in substantial health reform initiatives (e.g. Vermont, Maine and Massachusetts) point to an important conclusion: a strong commitment to the SAPT Block Grant is vital in order to continue to address unreimbursed health care for the indigent population. The need to maintain this important funding stream in health reform is heightened given the fact that the rate of un-insurance for those with substance use disorders is twice as high as the general population.

### PREVENTION SHOULD BE A PRIORITY

Substance use disorders are treatable and preventable. Yet substance abuse prevention has been underutilized and under resourced. The SAPT Block Grant's prevention set-aside represents 64% of State-coordinated prevention funding. In 21 States, the prevention set-aside equals 75% or more of the State agency's prevention budget. Stagnant funding for the SAPT Block Grant, coupled with dwindling investments in programs such as the Safe and Drug Free Schools and Communities' State Grants program, place added pressure on underfunded systems. A shining star in the prevention field is SAMHSA's Strategic Prevention Framework State Incentive Grant (SPF SIG). The five-step process includes needs assessment; building capacity; strategic planning; infrastructure & evidence-based services and monitoring and evaluating results). The SPF SIG approach is a holistic, comprehensive and successful public health model to reduce the negative consequences related to alcohol and other drug abuse. Health reform should build on the experience of the SPF SIG in order to leverage this knowledge and infrastructure cross the States. Health reform should also promote innovative ways to support substance abuse prevention services across the lifespan – in as many settings as possible.



NASADAD's mission is to promote effective and efficient State substance abuse service systems.

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