

GUIDELINES FOR TESTIMONY

Issue

The Join Together policy panel on state systems is investigating the role state governments can play in improving the treatment and prevention of substance use disorders, with particular emphasis on state level organization, financing and leadership. The panel is interested in exploring what can be done by senior state leaders, including the governor and other appointed and elected officials. The panel wants to present state government leaders and concerned citizens with practical suggestions for organizational structures that foster leadership, effective policy development and collaboration, best clinical practice, and appropriate levels of funding to actually address the scale of their state's substance use disorder and prevention challenges.

Background

Individuals with substance use disorders drive the expenses and activities of many state agencies including the treatment and prevention agencies themselves and agencies responsible for criminal justice, child welfare, public health, mental health and education. In fact, substance use disorders are responsible for about 13% of all state expenditures, not the 0.5% that is labeled substance use treatment and prevention^[1]. However, substance use disorder policy, treatment and prevention rarely get the attention they deserve at the state level.

State Models

Only three states have substance use treatment and prevention agencies that are free standing and report directly to the governor. A number of organizational models have emerged in recent years. The structure selected by a state has significant implications for the clinical models used to address substance use disorders. This policy panel is interested in testimony about the pros and cons of the alternative models that seem to be in use or emerging, including:

1. A behavioral health model with substance use disorder treatment integrated with a mental/behavioral health agency.
2. A specialty substance use disorder treatment system that has its own, free-standing agency.
3. A medical care model in which organization and financing for substance use disorders are included in other state funded medical care. This is the model advocated by the new IOM report, "Improving the Quality of Health Care and Mental and Substance-Use Conditions."

^[1] The National Center on Addiction and Substance Abuse at Columbia University (CASA). *Shoveling Up: The Impact of Substance Abuse on State Budgets*. Retrieved January 12, 2006. Available at <http://www.casacolumbia.org/Absolutemm/articlefiles/47299a.pdf>.