

# ADDRESSING THE NATION'S SUBSTANCE USE CRISIS



Solving our nation's substance use and overdose crises requires removing barriers to accessing treatment and care, particularly for individuals disproportionately at risk.



Cosponsor and support the passage of the Due Process Continuity of Care Act (<u>H.R.3074/S.971</u>), Reentry Act of 2023 (<u>H.R.2400/S.1165</u>) and SUPPORT for Patients and Communities Reauthorization Act (<u>H.R.4531/S.3393</u>).

Passing these bills will strengthen access to critical prevention, treatment and recovery services for individuals with substance use and mental health challenges. These challenges disproportionately impact people involved in the criminal legal system, making improving access to care for individuals who are incarcerated and facing mental health and substance use challenges critical.

# WHY WE NEED THIS LEGISLATION

#### **Due Process Continuity of Care Act**

Individuals held in custody at a correctional institution lose Medicaid benefits. This legislation would permit Medicaid payment for medical services furnished to individuals held in custody prior to adjudication (i.e., having not been tried or convicted of a crime).

- The current Medicaid Inmate Exclusion Policy prohibits states from billing Medicaid for services furnished to incarcerated individuals, including those who have been detained but have not been tried or convicted of a crime. This exclusion creates a barrier to accessing vital care and supports.
- People with serious mental illness (SMI) have been found to be likely to spend more time in jail prior to adjudication than people without SMI.<sup>1</sup> According to the Bureau of Justice Statistics, approximately 58% of people in state prisons and 63% of people in jails met criteria for having a substance use disorder (SUD) related to drug use.<sup>2</sup>

## **Reentry Act of 2023**

After incarceration, it can take months for individuals to reenroll in Medicaid and start receiving medically necessary benefits. The Reentry Act of 2023 would allow Medicaid payment for medical services furnished to an incarcerated individual during the 30-day period preceding the individual's release.

- A person is at the highest risk for an overdose during the first two weeks following release from incarceration. In fact, recently released individuals are roughly 12.7 times more likely than the general population to die of a drug overdose during this time.<sup>3</sup>
- Equipping individuals with timely access to substance use, mental health and other health-related services before release will facilitate the transition to care necessary to mitigate risk of recidivism and to prevent death and other avoidable harms.

## **SUPPORT for Patients and Communities Reauthorization Act**

Federal authorization of critical SUD services across the continuum of care has expired. This legislation would reauthorize key programs that support the SUD workforce and strengthen access to treatment and recovery services across a continuum of support. Key workforce program reauthorizations include:

- The Substance Use Disorder Treatment and Recovery (STAR) Loan Repayment Program, which provides loan repayment opportunities for SUD treatment and recovery providers.
- The Building Communities of Recovery (BCOR) grant program and Comprehensive Opioid Recovery Centers (CORC). BCOR grants mobilize and connect community-based resources to increase the availability and quality of long-term recovery support, while CORCs provide a full spectrum of treatment, harm reduction and recovery support services to address the opioid epidemic and ensure access to all three FDA-approved medications for opioid use disorder (MOUD).

The SUPPORT for Patients and Communities Reauthorization Act would also permit states to bill Medicaid for outpatient care for youth in foster care who are in qualified residential treatment programs (QRTPs) that would otherwise fall under the IMD exclusion, disrupting access to a continuum of care.

This legislation contains several provisions relating to providing support for youth and continuing data collection in support of understanding the impact of adverse childhood experiences and prenatal and postnatal conditions and outcomes.



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<sup>1</sup> <u>https://store.samhsa.gov/sites/default/files/pep23-06-06-001.pdf</u> <u>https://ps.psychiatryonline.org/doi/10.1176/appi.ps.201700420</u>

- <sup>2</sup> https://www.samhsa.gov/criminal-juvenile-justice/about https://bjs.ojp.gov/content/pub/pdf/dudaspji0709.pdf
- <sup>3</sup> <u>https://doi.org/10.1186/s40352-020-00113-7</u>