

AMENDMENT #6

✓
TARR
KITO
KAWASAKI
GARA
Kreiss-
Tomkins
Tuck
JOSEPHSON

OFFERED IN THE HOUSE
TO: CSHB 266(FIN)

1 Page 16, line 11:

2 Delete "52,846,000"

3 Insert "54,889,000"

4 Delete "11,918,000"

5 Insert "13,961,000"

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7 Page 16, line 16:

8 Delete "5,664,300"

9 Insert "7,707,300"

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11 Page 16, following line 16:

12 Insert "It is the intent of the legislature that the Department of Health and Social
13 Services continue to fund residential substance abuse treatment services at least at the fiscal
14 year 2014 level."

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16 Adjust fund sources and totals accordingly.

Talking Points/Behavioral Health Grants

The House Finance Committee has proposed a \$2,043 million cut from residential substance abuse treatment grants -- \$1,043 is a direct reduction and a \$1 million reallocation to outpatient treatment. The committee has also proposed an additional \$1 million reduction in Behavioral Health Grants targeted at nonperforming or underperforming grants.

Efficacy of Inpatient v. Outpatient

An analysis of inpatient, residential, outpatient detox/methadone, and outpatient drug-free substance use disorder treatment (www.ncbi.nlm.nih.gov/pmc/articles/pmc1360883) in 2003 found that all modalities are relatively equal in effectiveness. The study found that the most cost effective modality is outpatient treatment when looking at abstinence and decreased use of alcohol and other drugs, but only in terms of direct treatment costs. However, the study acknowledges that a previous study of drug abuse treatment effectiveness that considered costs in addition to the cost of treatment – such as crimes committed by outpatient participants, HIV risk, etc. – found that residential treatment was more cost effectiveness. (See Hubbard RL, Marsden ME, Rachal JV, Harwood HJ, Cavanaugh ER, Ginzberg HM. Drug Abuse Treatment: A National Study of Effectiveness. Chapel Hill: University of North Carolina Press; 1989.)

Treatment needs

Illicit Drug Use

In the combined 2011-2012 National Survey on Drug Use and Health (NSDUH), (www.samhsa.gov/data/NSDUH/2k12State/NSDUHsae2012/Index.aspx)

Alaska ranked **third worst** in the nation for rates of illicit drug use by persons aged 12 or older – 14.03% of Alaskans surveyed reported using illicit drugs in the past month. In the combined 2011-2012 NSDUH Alaska ranked **twenty-fifth** for people “Needing But Not Receiving Treatment for Illicit Drug Use in the Past Year among Persons Aged 12 and Older.”

Alcohol

In the combined 2011-2012 NSDUH Alaska ranked **fifth worst** in the nation for rates of alcohol dependence or abuse by persons aged 12 and older, and Alaska ranked **sixth worst** in the nation for people “Needing But Not Receiving Treatment for Alcohol Use in the Past Year among Persons Aged 12 and Older.”

Source: *The National Survey on Drug Use and Health (NSDUH)*

(<https://nsduhweb.rti.org/respweb/homepage.cfm>) is the primary source of statistical information on the use of illicit drugs, alcohol, and tobacco by civilian, non-institutionalized persons age 12 or older in the United States. The survey has been conducted by the federal government since 1971. It survey collects data by administering questionnaires to a representative sample of the population through face-to-face interviews at their place of residence.