

10 Ways for States to Improve Substance Use Care

Strengthening substance use disorder (SUD) treatment systems requires strategic investments to increase access to evidence-based SUD services and address inequities.



The U.S. Substance Use Crisis

- **Over 46 million** people in the U.S. have an SUD and more than 1 million have died from a drug overdose since 1999, with numbers escalating annually.
- **Roughly 94%** of people with an SUD do not receive any treatment.
- **Only a fraction** of those with an opioid use disorder receive medications that are considered the gold standard of care.
- Native American/Alaskan Native and Black individuals die from opioids at alarmingly high rates — **87% and 46% higher**, respectively, than the national average.

Sustainable Funding for Substance Use Treatment Is Critical

States are using new and existing funding streams to pay for high-quality, equitable SUD prevention and treatment services, and recovery supports.



The Affordable Care Act **expanded Medicaid coverage and mandated SUD benefits**, resulting in increased SUD treatment access for enrollees.



Other **federal funding streams** have become available or enhanced in the past several years to address the SUD crisis.



Opioid-related settlements will result in billions of dollars flowing into states and localities over the next decade to support SUD services.

10 Financing Principles for States

These practical policy actions can aid states and other SUD stakeholders in strategically using resources to maximize the impact of SUD treatment systems:



1. Use Medicaid funds to expand and sustain access to evidence-based SUD prevention, care, and recovery supports.



6. Address SUD treatment disparities for historically marginalized groups and communities.



2. Direct flexible federal funds to strengthen SUD infrastructure, harm reduction, and recovery supports.



7. Advance equitable access to SUD treatment for people with multi-system involvement, such as the criminal legal system.



3. Allocate opioid settlement funds for services and infrastructure not covered by Medicaid and other funding streams.



8. Use data to drive effective, equitable SUD care and outcomes.



4. Incentivize “no wrong door” approaches to SUD care and services.



9. Require SUD specialty providers to offer evidence-based care, including medications for opioid use disorder.



5. Ensure the most appropriate level of care for patients — including non-residential and community-based treatment, among others.



10. Bolster the SUD prevention, care, and services network for children and youth.

