



# INTERIM CHARGE RECOMMENDATIONS

## ONE FUNDING AND CAPACITY FOR SUBSTANCE USE DISORDER SERVICES

**Study the impact of federal funding on substance use disorder (SUD) treatment and recovery services, and evaluate options to strengthen service capacity across the SUD continuum.**

- *Assess Federal Funding Reliance and Risk*
  - Review how federal funding sources support SUD treatment, recovery, and support services in Texas.
  - Identify vulnerabilities associated with time-limited funding, program restrictions, and administrative requirements.
- *Examine State-Level Funding*
  - Evaluate options for developing sustainable state-level funding and its impact on service delivery.
  - Consider approaches that promote continuity of care
- *Review Infrastructure Barriers*
  - Study barriers to building and sustaining the SUD treatment and recovery workforce, including licensure pathways, supervision requirements, and reimbursement policies.
  - Assess challenges related to recovery support infrastructure, including peer support services and recovery housing.

## TWO BEHAVIORAL HEALTH WORKFORCE CAPACITY BUILDING

- Following the implementation of SB 1401 (89R), explore sustainable models for the state to support the behavioral health workforce pipeline with a focus on reducing future financial barriers of entry into the profession by offering tuition waivers, paid practicums, subsidized supervision fees for those seeking a clinical license and paid initial licensing fees.
- Consider incentives to encourage more providers to join Medicaid networks including increasing reimbursement rates in parity with private insurance and enabling associate-level providers to bill for reimbursement.



## THREE ARTIFICIAL INTELLIGENCE AND YOUTH MENTAL HEALTH

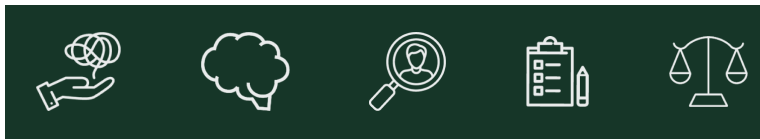
**Study the impact of artificial intelligence (AI) on mental health in Texas and the use of AI-assisted tools in behavioral health care, including their development, deployment, potential benefits and risks, and appropriate safeguards.**

- *Access and Appropriate Use in Mental Health Care*
  - Evaluate the use of AI-assisted therapy and digital mental health tools for prevention, screening, triage, crisis support, treatment, care coordination, and workforce support.
  - Assess potential benefits for expanding access and efficiency, as well as limitations, clinical boundaries, and integration with licensed professionals.
- *Youth Mental Health, Social Media, and AI-Driven Platforms*
  - Study the impact of AI-driven platforms, social media algorithms, generative AI applications, and chatbots on children's and adolescents' mental health and well-being.
  - Identify risks related to social media algorithmic design, content exposure, engagement optimization, consent, and privacy, and examine safeguards to protect minors.
- *Accountability and Guardrails*
  - Examine existing laws and oversight mechanisms of developers, deployers, and providers of AI mental health tools and identify gaps and policy options to ensure accountability.
  - Review privacy, consent, transparency, and safety protections related to AI tools used by or marketed to minors to ensure safe and responsible use.

## FOUR CROSS-SYSTEM COORDINATION FOR YOUTH BEHAVIORAL HEALTH

**Study how Texas responds to mental health and substance use needs among children and adolescents across education, healthcare, and community systems, and evaluate opportunities to improve coordination and continuity of care. Assess youth crisis response capacity across the state.**

- *Identification and Referral*
  - Review current screening, identification, and referral practices for youth mental health and substance use needs.
  - Examine the roles of schools, primary care, emergency departments, juvenile justice, and child-serving agencies in identifying needs and initiating care.
- *Coordination and Care Transitions*
  - Assess coordination of referrals, information sharing, and care transitions across systems and levels of care.
  - Identify barriers to continuity during key transitions, including hospital discharge, school reentry, and movement between treatment settings.
- *Data Sharing and Accountability*
  - Examine data-sharing practices, consent requirements, and privacy protections.
  - Identify interoperability challenges, tracking, and system-level performance measurements.



## **FIVE** ACCESS TO MENTAL HEALTH IN SCHOOLS

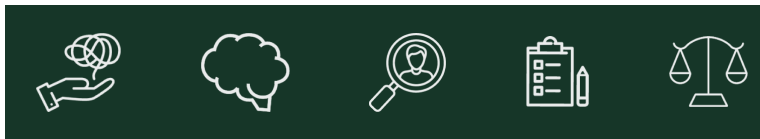
**Study barriers in Texas public schools and charter schools that prevent students from accessing mental health services early enough to avoid crisis, including counseling services, crisis intervention, and referrals to external providers.**

- *Access and Service Delivery*
  - Review existing referral policies, district staffing levels, current workforce capacity, and operational practices that affect the availability and timeliness of mental health supports in a school setting.
  - Examine the role of parental notification, consent, and engagement requirements in shaping students' access to school-based mental health services, including the timing, frequency, and type of supports provided.
- *Funding for Mental Health Services*
  - Review funds used by school districts and open-enrollment charter schools for mental health supports, and the extent to which state funding strategies align with the Children's Behavioral Health Strategic Plan.
- *Effectiveness and Data*
  - Identify data collection methods used to assess the effectiveness of school mental health services and training delivery, and existing gaps in evaluation, reporting, or statewide consistency.
  - Identify opportunities to improve coordination, data collection, and evaluation through partnerships with state agencies, institutions of higher education, or other organizations to strengthen school-based mental health services.

## **SIX** RURAL BEHAVIORAL HEALTH

**Study access to mental health and substance use disorder services in rural and frontier areas of Texas and evaluate strategies to expand service capacity, workforce availability, and continuity of care.**

- *Rural Access Gaps*
  - Examine disparities in access to mental health and substance use disorder services in rural communities.
  - Identify geographic, workforce, infrastructure, and transportation barriers affecting timely access to care.
- *Rural Service Delivery Models*
  - Review service delivery models used in rural areas, including telehealth, mobile services, school-based care, and community partnerships.
  - Assess the role of broadband access, technology capacity, and local provider availability.
- *Sustainability Challenges*
  - Study challenges in recruiting, retaining, and supporting providers in rural areas.
  - Assess roles and benefits of broadband access, and availability of telehealth services.



## SEVEN BEHAVIORAL HEALTH DIGITAL READINESS & INFRASTRUCTURE

**Study the digital readiness of public and private behavioral health providers in Texas, making recommendations to improve statewide interoperability standards, enhance funding strategies, and strengthen coordination to modernize technology infrastructure and data sharing across the behavioral health continuum of care.**

- *Compliance:* Evaluate providers' ability to meet federally mandated information-sharing requirements under the 21st Century Cures Act.
- *Interoperability:* Assess the interoperability of certified and community-based systems with state platforms and recommend strategies to improve data exchange across the behavioral health continuum of care.
- *Medicaid Alignment:* Review provider readiness to meet current and future Medicaid managed care requirements—including interoperability, value-based payment models, quality incentives, and reporting obligations—and identify gaps where targeted technological upgrades or state support may be needed.
- *Cybersecurity & Privacy:* Study the cybersecurity and privacy risks unique to behavioral health records, particularly for children and families, and evaluate options for statewide standards or shared services for small providers.
- *Workforce Support:* Examine how technology (e.g., telehealth platforms, automated documentation tools, AI-supported clinical workflows) can help address workforce shortages while maintaining therapeutic quality and compliance with federal and state standards.