



A L I V I A N E

Easing the Journey to Recovery

Federal Priority Populations for Treatment Programs

Based on the federal priority populations established by SAMHSA Block Grant regulations, federal priority populations (e-CFR, Title 45: Public Welfare, Part 96, 96.131), Texas is required to ensure the following three priority population are given preference:

- a. Pregnant injecting individuals will be admitted within 48 hours;
- b. Pregnant individuals will be admitted within 48 hours; and
- c. Injecting drug users will be admitted within 14 days.

Providers and sub-recipients will publicize the availability of services to such women at the facilities and the fact that pregnant women receive such preference. This may be done by:

- a. street outreach programs;
- b. ongoing public service announcements;
- c. regular advertisements in local/regional print media;
- d. posters placed in targeted areas; and
- e. frequent notification on availability of such treatment distributed to the network of community-based organizations, health care providers, and social service agencies.

Providers will establish a wait list that includes a unique client identifier for each priority population covered individual seeking treatment, including individuals receiving interim services, while awaiting admission to treatment.

State Priority Populations for Treatment Programs

Texas has established priority populations for entering state funded substance use disorder services. State priority populations come after the SAMHSA priority populations and are identified as:

- a. Individuals identified as being at high risk for overdose will be admitted to requested services within 72 hours;
- b. Individuals referred by DFPS will be admitted to requested services within 72 hours; and
- c. All other populations.



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To ensure priority populations are served in accordance to the federal guidelines, Providers will: a.

Establish screening procedures to identify individuals of federal and state priority populations;

a. Ensure successful referral and admittance within the time frame to another HHSC-funded Provider, or HHSC Wait List and Capacity Management Coordinator, and begin interim services;

b. Notify HHSC Program staff if placement cannot be made to priority population; and

c. Accept individuals from every region in the state and from the OSAR, when capacity is available, to accommodate federal and state priority population.

If two individuals are of equal priority status, preference may be given to the individual residing in Provider's service region.

Include a statement in all brochures, and will post a notice in all applicable lobbies, the federal and state priority population admission requirements.