

Bureau of Mental Health and Substance Abuse Services



Substance Abuse Treatment Needs, Capacity and Costs

2004 Update

Substance Abuse Treatment Needs, Capacity and Costs 2004 Update

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Substance Abuse Treatment Needs, Capacity and Costs 2004 Update

EXECUTIVE SUMMARY

This report is prepared pursuant to s. 46.973(2m), Wis. Stats and federal Substance Abuse Prevention and Treatment block grant requirements. Key findings from this analysis include:

- The prevalence of substance abuse in Wisconsin is an estimated 456,723 adults and adolescents. In both the public and private sectors, the study estimates that during 2004, substance abuse publicly-supported treatment was provided to 34,739 persons under s. 51.42, Wis. Stats. and 13,164 persons received substance abuse services under the Medicaid program. Adding brief and support services such as substance abuse evaluations, transportation, or housing assistance, a total of 63,300 persons received substance abuse-related services under s. 51.42. with reported expenditures of nearly \$78,400,000.
- 24 of 64 county agencies under s. 51.42 reported that a total of 1,835 persons were placed on a waiting list for at least 2 weeks before receiving publicly supported substance abuse treatment during 2003. Some 900 consumers of publicly supported substance abuse treatment were discharged prematurely because county funds under s. 51.42 were depleted. The total request for additional funds to address unmet needs amounts to \$3.8 million.
- Unit costs for services have risen for hospital detox and inpatient but have remained stable or declined for residential and outpatient services.
- In 2004, 50 percent of consumers of outpatient substance abuse treatment completed the agreed upon care plan with moderate or major improvement. This compares favorably with national statistics which put the rate of outpatient treatment completion between 35 percent and 46 percent. Of those who completed treatment, 87 percent were not using alcohol or other drugs at the time of discharge and 74 percent were employed. Just 10 percent of all admissions to treatment during 2004 had received treatment in the previous two 2 years.
- There continues to be a need to increase funding and capacity for substance abuse services statewide in order to avert the costs of untreated substance abuse and realize economic benefits through successful treatment.

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INTRODUCTION

An estimated 412,446 Wisconsin adults and 44,277 youth age 12-17 suffer from a substance use disorder each year involving the consumption of alcohol or other mood altering drugs such as marijuana, heroin, cocaine, speed, pain killers, tranquilizers, and hallucinogens (Office of Applied Studies July 2004). Many expensive and burdensome social problems can be traced directly to alcohol and drug abuse. Untreated substance abuse results in crime, homicide, unemployment or lowered work productivity, family break-up, child abuse, foster care, excessive health care costs, financial problems, injury, and early death (National Institute on Alcohol Abuse and Alcoholism 1997; National Institute on Alcohol Abuse and Alcoholism 2000).

In addition to reclaiming lives and families, treatment results in crime reduction and savings in other public and private costs. Investing in treatment pays dividends. Numerous studies have shown that investing public funds in treatment is a wise use of taxpayer dollars returning anywhere from \$3 to \$13 (average of \$7) for each dollar spent. These savings and benefits accrue to the public sector in Medicaid and other health care savings, savings in criminal justice system and welfare costs, reduced threats to public safety, and increased productivity (Holder 1992; Langenbucher 1992; Lewin Group 1999; National Opinion Research Center 1994; National Evaluation Data Services 1999).

This is the eighth in a series of substance abuse treatment reports prepared by the Bureau of Mental Health and Substance Abuse Services. Previous studies analyzed substance abuse treatment data for 1996, and 1998 through 2003. This report summarizes data from calendar year 2004 on alcohol and other drug abuse (AODA) treatment services in the state of Wisconsin. Relevant data were taken from the Human Services Reporting System (HSRS) and from a separate county treatment survey of agencies under s. 51.42, Wis. Stats. Substance abuse treatment covered by Medicaid and private insurance sources is estimated but not fully covered in this study.

TREATMENT NEEDS AND GAPS

Waiting Lists

Table 1 summarizes the data reported by county agencies under s. 51.42 on service denials and waiting lists for substance abuse treatment in 2004. Taken from the annual county treatment survey, the table breaks out the number of consumers denied treatment due to lack of funding [s. 51.42(b)(3)ar4 Wis. Stats] as well as the number of consumers placed on a two-week or longer waiting list for lack of capacity. The number of persons placed on waiting lists or denied treatment increased 60 percent from 2003

to 2004. Twenty-four (24) of 64 county agencies reported waiting lists during 2004 (see Appendix A for list).

Table 1: County Agency-Reported Service Denials and Waiting Lists

| | 2001 | 2002 | 2003 | 2004 |
|--|------|-------|-------|-------|
| Consumers Denied Services Due to Funding Limitations | 30 | 54 | 25 | 107 |
| Consumers Placed on a Waiting List for at Least 2 weeks | 770 | 1,196 | 1,189 | 1,835 |
| Total | 800 | 1,250 | 1,214 | 1,942 |

Note: Milwaukee, Oconto, and Sawyer County data are not included in 2004.

The modality of service for which consumers wait has changed over the years. In 1998, the principal service waited for was residential. In 2004, it was outpatient. This demonstrates that even routine services are experiencing barriers. Human Services Reporting System data indicated during 2004 that 899 persons were prematurely discharged from treatment because County funds under s. 51.42 were depleted.

County Identified Unmet Service Needs

From narrative descriptions solicited in the county treatment survey, 31 county agencies identified unmet service needs in the survey. The most prevalent unmet need was in the area of residential services. Outpatient services, methamphetamine treatment, and adolescent services were also mentioned often as unmet needs. In all instances, either funds were insufficient for an existing service or funds were not available to add the needed service in the county. The total request for additional funds to meet these needs as reported in the survey amounts to \$3.8 million.

SCOPE OF TREATMENT

Treatment Facilities

There were 618 certified substance abuse treatment service facilities in 2004 (see Table 2). This is up slightly from 2003 when there were 606 certified treatment programs. Due to funding limitations and least restrictive treatment policies and practices, inpatient facilities are decreasing.

Table 2: Certified Substance Abuse Service Facilities

| Service | 2001 | 2002 | 2003 | 2004 |
|---------------------------|-------------|-------------|-------------|-------------|
| Hospital Detox | 61 | 48 | 46 | 49 |
| Residential Detox | 4 | 4 | 8 | 10 |
| Inpatient | 34 | 22 | 18 | 17 |
| Residential | 74 | 96 | 89 | 93 |
| Day Treatment | 73 | 81 | 77 | 77 |
| Outpatient | 333 | 326 | 358 | 362 |
| Narcotic Treatment | 5 | 8 | 10 | 10 |
| Total | 584 | 585 | 606 | 618 |

TREATMENT UNDER s. 51.42

Trends

For the purposes of this report, “treatment” includes detox, inpatient, residential, day treatment and outpatient. It excludes brief evaluations, assessments, and other supportive, ancillary, and prevention services that are not treatment. In the 2003 report, the full scope of treatment for substance use disorders in Wisconsin was estimated to be estimated 58,320 persons annually with expenditures of \$98,079,000. Since data is not readily available on private insurance-supported substance abuse treatment, information will be reported on County-authorized services under s. 51.42 and Medicaid-reimbursed services.

Table 3 below presents treatment admissions (duplicated count) as reported by County agencies under s. 51.42 from 2001-2004 and using data from the HSRs AODA Module. Most of the increases noted in 2004 reflect changes in reporting in Milwaukee County. If all substance abuse services are counted, including brief evaluations and assessments, and other supportive and ancillary services, the number of persons served annually exceeds 63,300 with reported expenditures of nearly \$78,400,000.

Table 3: Reported Treatment Admissions Under s. 51.42

| Service | 2001 | 2002 | 2003 | 2004 |
|-----------------------------|-------------|-------------|-------------|-------------|
| Hospital Detox | 5,382 | 5,104 | 5,514 | 5,157 |
| Residential Detox | 2,397 | 2,178 | 1,245 | 3,664 |
| Inpatient | 293 | 271 | 258 | 343 |
| Residential | 668 | 733 | 1,173 | 4,333 |
| Day Treatment | 903 | 999 | 1,015 | 1,078 |
| Intensive Outpatient | 750 | 879 | 939 | 786 |
| Regular Outpatient | 16,757 | 15,723 | 17,310 | 19,378 |
| Total | 27,150 | 25,887 | 27,454 | 34,739 |

Another prominent source of funding for substance abuse treatment is Wisconsin's Medicaid program. Table 4 below tracks the annual number of Medicaid recipients receiving services and having a substance use disorder.

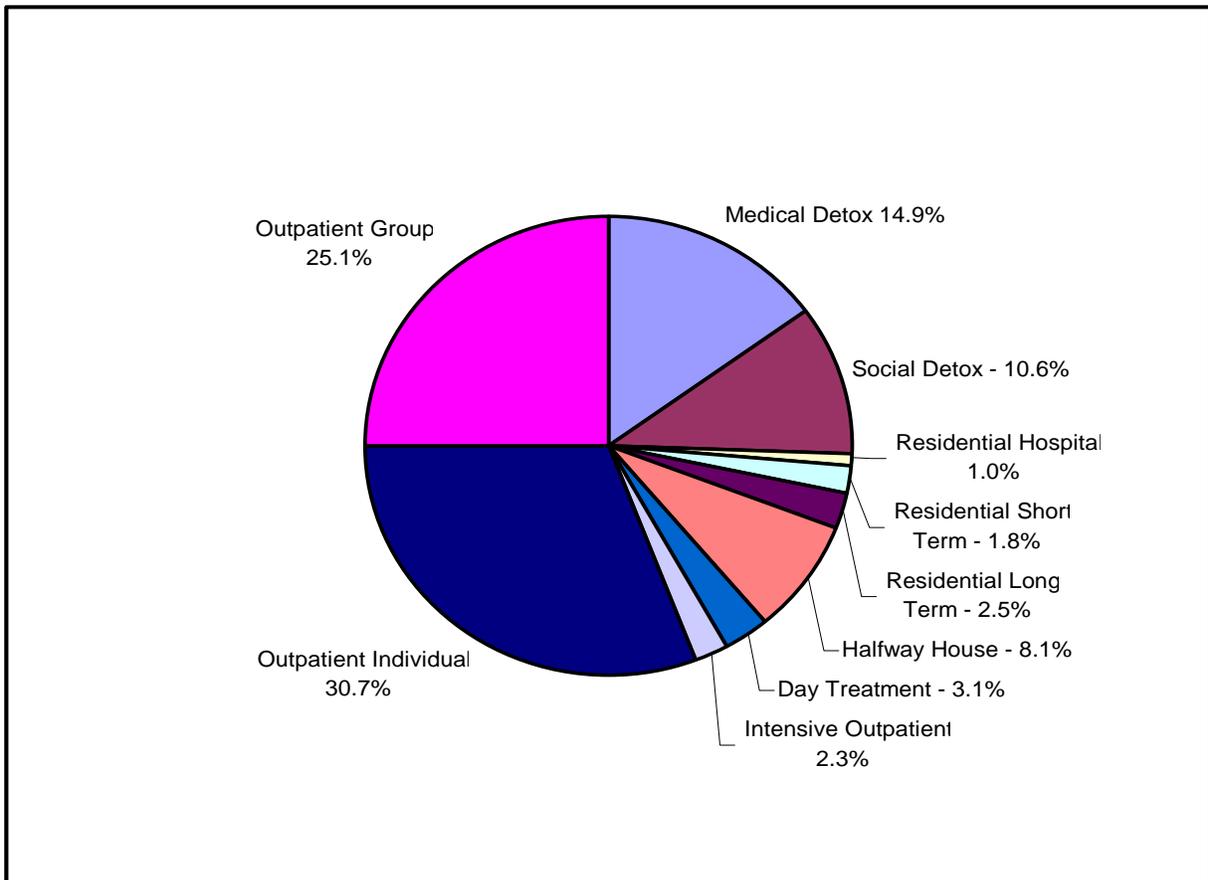
Table 4: Unduplicated Recipients Receiving Any Substance Use Disorder Services Under Medicaid

| 2001 | 2002 | 2003 | 2004 |
|-------|--------|--------|--------|
| 9,553 | 10,747 | 12,270 | 13,164 |

Service Distribution

Treatment services reported by County agencies under s. 51.42 are arrayed in Figure 1 below. This information is useful for strategic planning purposes such as developing a proposal to expand treatment capacity. For every 100 persons with substance use disorders projected to be served, the distribution would be as depicted in the chart. About 15 persons would need medical detox, 11 residential detox, 1 inpatient, 2 residential short-term, and so on.

Figure 1: Substance Abuse Treatment Service Distribution



CONSUMER CHARACTERISTICS

- Seventy-four percent (74%) of consumers receiving services under s. 51.42 are male; 26 percent are female.
- Eighty-four percent (84%) are White; 8 percent are Black; 5 percent are Hispanic; 2 percent are American Indian; and 0.5 percent are Asian.
- Eleven percent (11%) of consumers are under the age of 21; 12 percent are age 50 and over.
- Seventy-nine percent (79%) have at least a high school diploma; 24 percent have an education beyond high school; and 21 percent have less than a high school education.
- Fifty-four percent (54%) are employed at admission.
- The principal drug of abuse is alcohol (71%) followed by marijuana (12%), cocaine (9%), and opiates (5%).
- The criminal justice system, including OWI offenders, is the most frequent source of referral to treatment at 74 percent; health care agencies make up 5 percent; social services 3 percent; schools 1 percent; and employers 0.5 percent.

AMOUNT AND COSTS OF TREATMENT

Treatment service amounts and costs under s. 51.42 are presented in Table 5 below. These data are useful for contract negotiations, developing new program initiatives, strategic planning and budgeting, cost accounting, and developing actuarial cost data.

Service lengths have increased for residential and day treatment services but have declined for detox, inpatient, and regular outpatient. Service rates have risen for hospital detox and inpatient but have remained stable or declined for residential and outpatient services.

Wisconsin costs compare favorably with national benchmarks (Office of Applied Studies 6/18/2004). The average length of stay nationally for detox admissions is 4 days. National residential costs range from \$3,132 to \$3,840 per stay and national outpatient treatment episodes cost from \$1,169 to \$1,433.

Table 5: Amount and Costs of Treatment Under s. 51.42

| | Avg. Units of Service | | | Avg. Unit Rate | | | Avg. Service Cost | | |
|--------------------------------------|-----------------------|-----------|-----------|----------------|------------|------------|-------------------|---------|---------|
| | 2002 | 2003 | 2004 | 2002 | 2003 | 2004 | 2002 | 2003 | 2004 |
| Hospital Detox | 3.0 days | 3.1 days | 2.4 days | \$582 /day | \$581 /day | \$609 /day | \$1,746 | \$1,801 | \$1,462 |
| Residential Detox | 3.7 days | 4.1 days | 2.7 days | 223 /day | 273 /day | 239 /day | 825 | 1,119 | 645 |
| Inpatient | 9.8 days | 12.2 days | 10.3 days | 434 /day | 443 /day | 475 /day | 4,253 | 5,405 | 4,893 |
| Residential Short-term | 24.3 days | 17.1 days | 19.6 days | 118 /day | 139 /day | 135 /day | 2,867 | 2,377 | 2,646 |
| Residential Long-term | 38.9 days | 38.0 days | 45.5 days | 86 /day | 112 /day | 93 /day | 3,345 | 4,256 | 4,232 |
| Halfway House | 57.7 days | 56.0 days | 41 days | 70 /day | 77 /day | 75 /day | 4,039 | 4,312 | 3,075 |
| Day Treatment | 60.5 hrs | 67.0 hrs | 70.6 hrs | 27 /day | 27 /hr | 27 /hr | 1,633 | 1,809 | 1,906 |
| Intensive Outpatient | 37.7 hrs | 29.5 hrs | 30.1 hrs | 28 /hr | 38 /hr | 31 /hr | 1,056 | 1,121 | 933 |
| Regular Outpatient Individual | 9.0 hrs | 8.1 hrs | 6.4 hrs | 87 /hr | 88 /hr | 89 /hr | 783 | 713 | 570 |
| Regular Outpatient Group | 23.9 hrs | 22.2 hrs | 17.9 hrs | 26 /hr | 33 /hr | 29 /hr | 621 | 732 | 519 |

TREATMENT OUTCOMES

Successful treatment and sustained recovery is strongly associated with the duration of treatment and completion of the treatment plan. In 2004, persons receiving outpatient services averaged 166 to 194 days between admission and discharge, exceeding the national benchmark of 120 days of care. The table below compares treatment completion rates among Wisconsin programs and state and national study samples. It should be noted that Table 6 excludes Milwaukee County data pending the completion of a state-county data improvement initiative. In 2004, the rate of treatment completion among Wisconsin publicly-supported programs compares favorably with other available state and national studies.

Table 6: Treatment Completion Rates Compared

| Data Source | Outpatient Completion Rate | Residential Completion Rate |
|---|-----------------------------------|------------------------------------|
| Wisconsin HSRS AODA Module (2004; n=20,895) | 49.8% | 63.4% |
| National Alcohol and Drug Services Study (1997-1998; n=5005) | 45.7% | 66.6% |
| National Treatment Episode Data Set (2000; n=153,104) | 34.7% | 61.3% |

Of those who completed treatment, 87 percent were not using alcohol or other drugs at the time of discharge and 74 percent were employed. Just 10 percent of all admissions to Wisconsin treatment programs had received treatment in the previous two years.

CONCLUSIONS AND RECOMMENDATIONS

- The overall lack of substantial increases in public funding under s. 51.42 has resulted in very little change in the overall service capacity for one of Wisconsin's top health concerns. Untreated substance abuse continues to result in societal problems, public safety threats, and costs.
- Not treating persons with substance use disorders costs the state money and treating them saves the state money. The economic cost of substance abuse problems in Wisconsin has been estimated at over \$4.6 billion annually including health care costs, productivity losses, crime, public assistance, and injury. That's \$10,070 for each person with a substance use disorder. Each time a person is successfully treated, \$10,070 in economic costs is averted. For each dollar we invest in treatment there is a return of an average of \$7 to Wisconsin's economy.
- Wisconsin's substance abuse treatment providers are performing at or above national benchmarks in terms of outcomes of treatment.
- The County agency-identified unmet needs described in this report represent real needs that, if funded, would benefit consumers and meet critical treatment system shortages. The cost for these needs approaches \$3.8 million.
- The waiting list data identifies some 1,835 consumers who sought treatment but were unable to receive it in a timely fashion. Outcomes of persons entering treatment from a waiting are poorer than those starting treatment immediately.

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APPENDICES

Appendix A

County Agencies Reporting Waiting Lists or Denying Services Due to Insufficient Funds

(24 of 64 reporting counties)

| County | Number on Waiting List | Denied Services Due to Insufficient Funds |
|---------------------|-------------------------------|--|
| Ashland | 12 | |
| Brown | 408 | |
| Buffalo | | 2 |
| Dane | 435 | |
| Dodge | | 2 |
| Door | 222 | |
| Douglas | 58 | |
| Eau Claire | | 34 |
| Forest/Oneida/Vilas | 91 | |
| Grant/Iowa | 58 | |
| Green | 84 | |
| Kewaunee | 20 | |
| Menominee | 9 | |
| Outagamie | 16 | |
| Pepin | 1 | |
| Polk | 78 | 50 |
| Portage | 12 | |
| Racine | 114 | |
| Richland | 14 | 8 |
| Rock | 152 | |
| Taylor | 49 | |
| Trempealeau | 2 | 2 |
| Vernon | | 7 |
| Waushara | | 2 |
| Total | 1,835 | 107 |