

NDEWS *National Drug Early Warning System*

Funded at the Center for Substance Abuse Research by the National Institute on Drug Abuse

National Drug Early Warning System (NDEWS) Sentinel Community Site Cross-Site Data Presentation: Treatment Admissions for Substance Use Disorders 2015

May 2017

NDEWS Coordinating Center

NDEWS *National Drug Early Warning System*

Funded at the Center for Substance Abuse Research by the National Institute on Drug Abuse



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Sentinel Community Site Cross-Site Data Presentations

The National Drug Early Warning System (NDEWS) was launched in 2014 with the support of the National Institute on Drug Abuse (NIDA) to collect and disseminate timely information about drug trends in the United States. The Center for Substance Abuse Research (CESAR) at the University of Maryland manages the NDEWS Coordinating Center and has recruited a team of nationally recognized experts to collaborate on building NDEWS. Part of this team includes 12 Sentinel Community Epidemiologists (SCEs), representing 12 Sentinel Community Sites (SCSs). Site-specific data for the 12 NDEWS SCSs are available in the SCS Profile Reports. In addition, the NDEWS Coordinating Center prepares Cross-Site Data Presentations of selected indicators that are available and comparable for each of the 12 SCSs. Cross-Site Data Presentations are created on a rolling basis, as data are made available by their respective reporting agencies.

This publication, as well as detailed information about NDEWS, can be found on the NDEWS website at www.ndews.org.

Domain: Treatment for Substance Use Disorders

Indicator: Primary Substance Mentioned at Admission to Treatment

Data Source: State and Local Agencies

Time Period: 2015

Treatment admissions data provide indicators of the health consequences of drug use and their impact on the treatment system ([NIDA 2014](#)). Eleven of the 12 NDEWS Sentinel Community Epidemiologists (SCEs) were able to provide the NDEWS Coordinating Center with 2015 treatment admissions data from their local sources; Atlanta Metro was the only site with no available data on 2015 treatment admissions. Note that the definition of the populations covered by each local treatment data source varies; however, the majority are based on admissions to programs receiving public funds. (See *Overview & Limitations of Treatment Admissions Data from Local Sources* for site-specific definitions of admissions, catchment areas, drug terms, and data sources.) Primary admissions by drug are compiled as counts and percentages of all admissions.

Highlights

- **Alcohol and heroin** were the two most highly ranked primary drugs of use among treatment clients across the 11 NDEWS Sentinel Community Sites (SCS) with available data for 2015 admissions. **Alcohol** ranked first or second in 10 sites and **heroin** in 8 sites. (Table 3)
 - The proportion of persons entering treatment that mentioned **alcohol** as a primary substance ranged from a high of 37.5% in the Denver Metro area to a low of 17.0% in Los Angeles County in 2015. (Figure 3a)
 - Primary **heroin** admissions ranged from a high of 40.5% in San Francisco to a low of 11.5% in Southeastern Florida (Miami Area). (Figure 3b)
 - In 2015, primary **heroin** admissions ranked first in 6 NDEWS reporting areas [New York City, Chicago Metro, Wayne County (Detroit Area), King County (Seattle Area), Los Angeles County, and San Francisco] and ranked second in 2 areas [Maine and Philadelphia]. (Table 3)
- **Marijuana** was the next most highly ranked primary drug among treatment clients in the 11 NDEWS SCSs with available data for 2015. **Marijuana** ranked second or third in 7 sites. (Table 3)
 - Primary **marijuana** admissions ranged from a high of 23.5% in Chicago Metro to a low of 5.7% in San Francisco. (Figure 3c)
- Primary **methamphetamine** admissions ranked higher in all 4 western NDEWS sites and 1 southern NDEWS site (Texas) than in the Northeast and Midwest NDEWS sites. (Table 3)
 - Among the 4 NDEWS sites where primary methamphetamine admissions ranked among top 4 drugs, the proportion of persons entering treatment that mentioned **methamphetamine** as a primary substance ranged from 10.2% in King County (Seattle Area) to a high of 25.3% in Los Angeles County. (Figure 3d)
 - Among the 6 NDEWS sites where it ranked low, less than 1.0% of treatment admissions in each of the sites mentioned **methamphetamine** as a primary drug. (Figure 3d)

- The proportion of treatment admissions that mentioned **cocaine/crack** as a primary drug of use ranged from a high of 14.1% in Philadelphia to a low of 2.5% in Maine (Figure 3e) and ranked between 3rd and 6th in the 11 NDEWS SCSs with available data for 2015 admissions. (Table 3)
- The proportion of treatment admissions that mentioned **prescription opioids** as a primary drug of use ranged from a high of 24.3% in Maine to a low of 1.0% in Chicago Metro (Figure 3f) and ranked between 3rd and 6th in the 11 NDEWS SCSs with available data for 2015 admissions. (Table 3)
- Primary **benzodiazepine** admissions ranked between 6th and 8th in all 11 NDEWS sites with available data. (Table 3) The proportion of treatment admissions that mentioned **benzodiazepines** as a primary drug of use was 2% or less in the 11 NDEWS SCSs with available data for 2015 admissions (data not shown).
- Data on primary admissions for **MDMA** were reported by 9 NDEWS SCEs and was ranked 8th or higher among all 9 NDEWS sites. (Table 3) The proportion of treatment admissions that mentioned **MDMA** as a primary drug of use was less than 1% in the 9 NDEWS SCSs with available data for 2015 MDMA admissions (data not shown).

Table 3: Ranking of Primary Drugs Reported at Admission* to Substance Use Disorder Treatment Programs Among Residents of the 12 NDEWS Sentinel Community Sites (SCS), by U.S. Region and SCS Site, 2015
Based on Number of Admissions with Selected Substances Cited as Primary Substance of Use

| SCS and U.S. Region | Primary Substance of Abuse | | | | | | | | | | |
|-------------------------------------|----------------------------|-------------------|---------|-------------------------|----------------------|-----------|----------------------|---------|-------------------------|---------------------------|----------------------------|
| | Alcohol | Cocaine/ Crack | Heroin | Prescription Opioids | Meth- amphetamine | Marijuana | Benzo- diazepines | MDMA | Synthetic Stimulants | Synthetic Cannabinoids | Other Drugs/ Unknown |
| Northeast Region | | | | | | | | | | | |
| Maine | 1 | 6 | 2 | 3 | 8 | 4 | 7 | 10 | 9 | 11 | 5 |
| New York City | 2 | 4 | 1 | 5 | 8 | 3 | 7 | 10 | 11 | 9 | 6 |
| Philadelphia ¹ | 1 | 4 | 2 | 6 | 8 ¹ | 3 | 7 | unavail | unavail | unavail | 5 |
| Midwest Region | | | | | | | | | | | |
| Chicago Metro ^ | 2 | 4 | 1 | 6 | 7 | 3 | 8 | 9 | unavail | unavail | 5 |
| Wayne County (Detroit Area) ^ | 2 | 3 | 1 | 5 | 8 | 4 | 6 | 10 | 9 | 11 | 7 |
| South Region | | | | | | | | | | | |
| Atlanta Metro ^ | unavail | unavail | unavail | unavail | unavail | unavail | unavail | unavail | unavail | unavail | unavail |
| Southeastern Florida (Miami Area) ^ | 1 | 5 | 3 | 4 | 9 | 2 | 7 | 10 | 8 | 11 | 6 |
| Texas ² | 1 | 5 | 4 | 6 | 3 ² | 2 | 7 | 10 | unavail | 9 | 8 |
| West Region | | | | | | | | | | | |
| Denver Metro ^ | 1 | 5 | 3 | 6 | 4 | 2 | 8 | 9 | 10 | unavail | 7 |
| King County (Seattle Area) | 2 | 5 | 1 | 6 | 4 | 3 | 8 | unavail | unavail | unavail | 7 |
| Los Angeles County | 3 | 5 | 1 | 6 | 2 | 4 | 8 | 9 | unavail | unavail | 7 |
| San Francisco | 2 | 4 | 1 | 6 | 3 | 5 | 8 | 8 | 8 | unavail | 7 |

NOTES:

*Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period. Data on treatment admissions were provided to the NDEWS Coordinating Center by the Sentinel Community Epidemiologist (SCE) for each NDEWS SCS. The definitions of the types of treatment programs, admissions, and substance categories may vary across jurisdictions. Most sites report on publicly funded admissions. However, **Denver Metro** includes admissions to all licensed programs; **Los Angeles County** includes all admissions to programs receiving any public funds OR to programs providing narcotic replacement therapy; and **New York City** includes only noncrisis admissions. See *Overview & Limitations* section for site-specific definitions of admissions population, terms, catchment area, and sources of the local treatment data.

unavail: data were unavailable.

¹**Philadelphia's methamphetamine category** includes both amphetamines and methamphetamine.

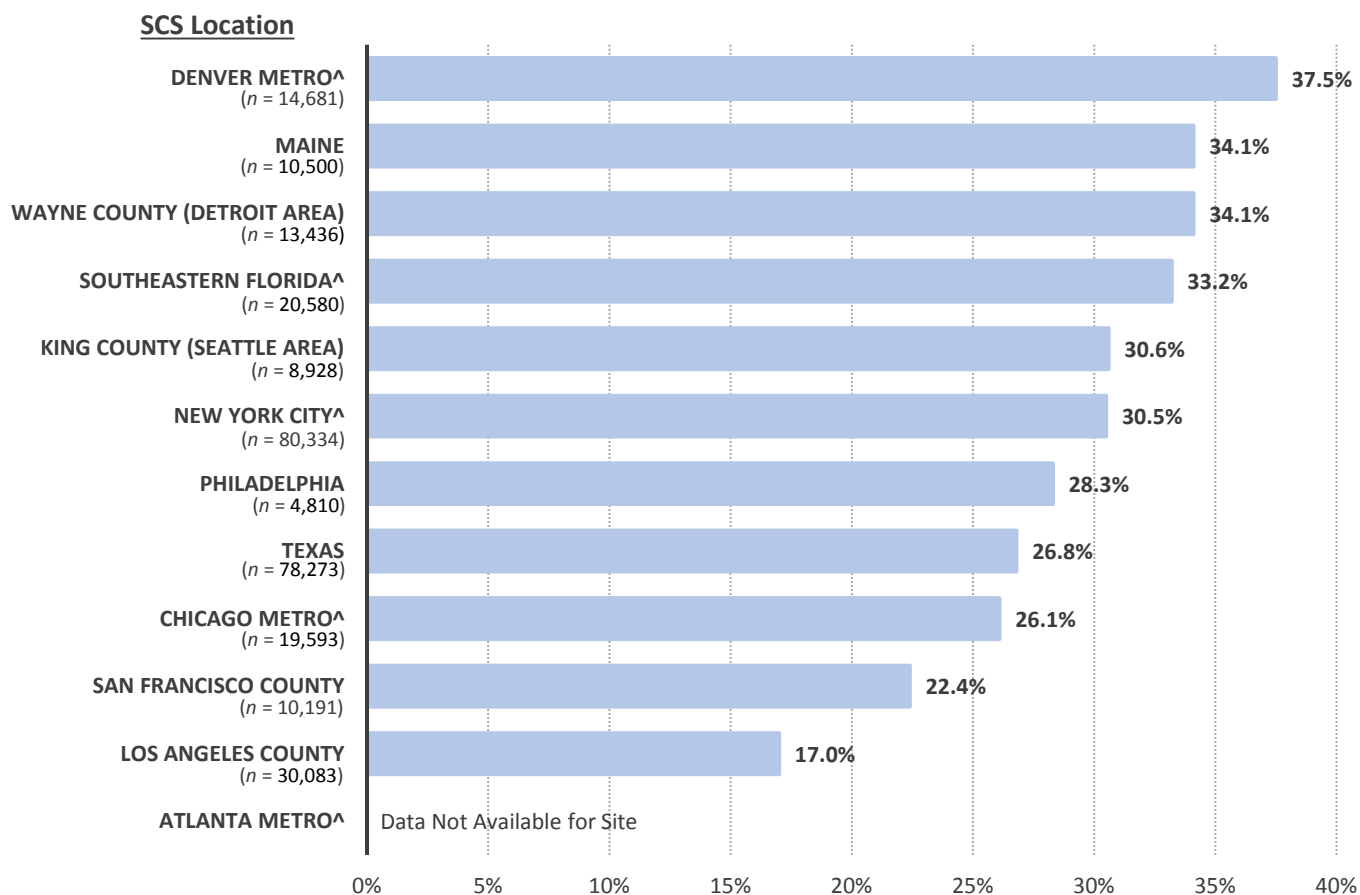
²**Texas' methamphetamine category** includes both amphetamines and methamphetamine.

^**Chicago Metro:** Includes data for Chicago not entire Chicago MSA; Calendar Year 2015 data not available so Fiscal Year 2015 data is presented; **Atlanta Metro:** Data not available from NDEWS Atlanta SCE; **Southeastern Florida (Miami Area):** Miami MSA (3 counties); and **Denver Metro:** Denver Metro Area (9 counties). See *Overview & Limitations* section for complete definition of each site's catchment area.

SOURCE: Adapted by data provided by the NDEWS SCEs and their local data sources. See *Overview & Limitations* section for site-specific sources of the local treatment data.

Figure 3a: Percentage of Treatment* Admissions Citing Alcohol as Primary Substance of Abuse, by NDEWS Sentinel Community Site (SCS)^, 2015**

(n = Number of Treatment Admissions)



^Atlanta Metro: Atlanta MSA (29 counties)—Calendar Year 2015 data not available

^Chicago Metro: Includes data for Chicago not entire Chicago MSA; Calendar Year 2015 data not available so Fiscal Year data is presented

^Denver Metro: Denver Metro Area (9 counties)

^New York City: Includes noncrisis admissions to outpatient, inpatient, residential, and methadone maintenance treatment programs licensed in the State

^Southeastern Florida: Miami MSA (3 counties)

Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.

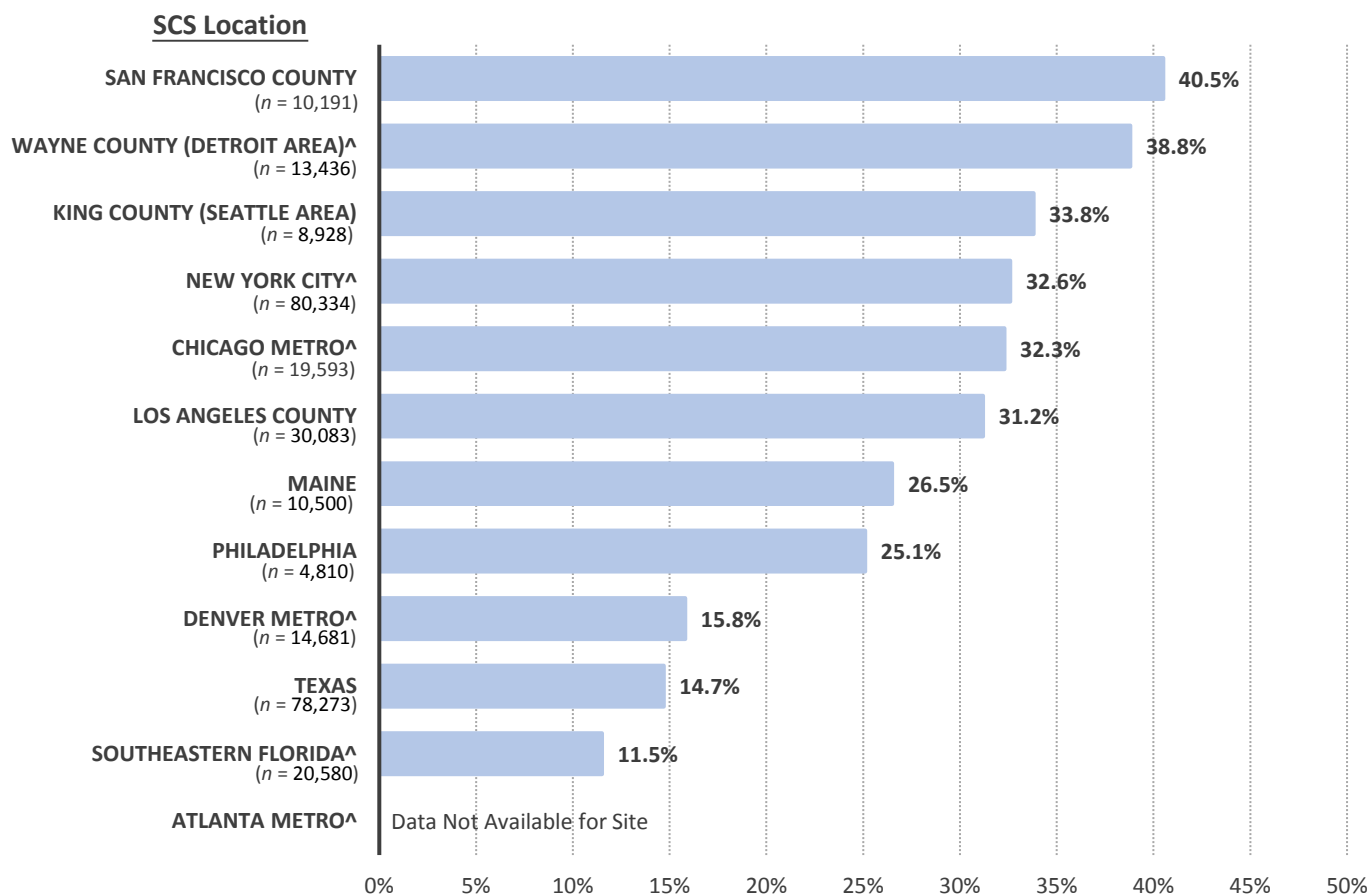
*Treatment Data: Data on treatment admissions were provided to the NDEWS Coordinating Center by the SCE for each NDEWS SCS. The definitions of the types of treatment programs, admissions, and substance categories may vary across jurisdictions. Please see *Overview & Limitations* section for site-specific definition of terms, catchment area, and sources of the local treatment data.

**2015: Calendar Year 2015 data presented for all sites except Chicago, which includes Fiscal Year 2015 data.

SOURCE: Data provided by the NDEWS SCEs and their local data sources. See *Overview & Limitations* section for citation of the source of local treatment admissions data from each NDEWS SCS.

Figure 3b: Percentage of Treatment* Admissions Citing Heroin as Primary Substance of Abuse, by NDEWS Sentinel Community Site (SCS)^, 2015**

(n = Number of Treatment Admissions)



^Atlanta Metro: Atlanta MSA (29 counties)—Calendar Year 2015 data not available

^Chicago Metro: Includes data for Chicago not entire Chicago MSA; Calendar Year 2015 data not available so Fiscal Year data is presented

^Denver Metro: Denver Metro Area (9 counties)

^New York City: Includes noncrisis admissions to outpatient, inpatient, residential, and methadone maintenance treatment programs licensed in the State

^Southeastern Florida: Miami MSA (3 counties)

Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.

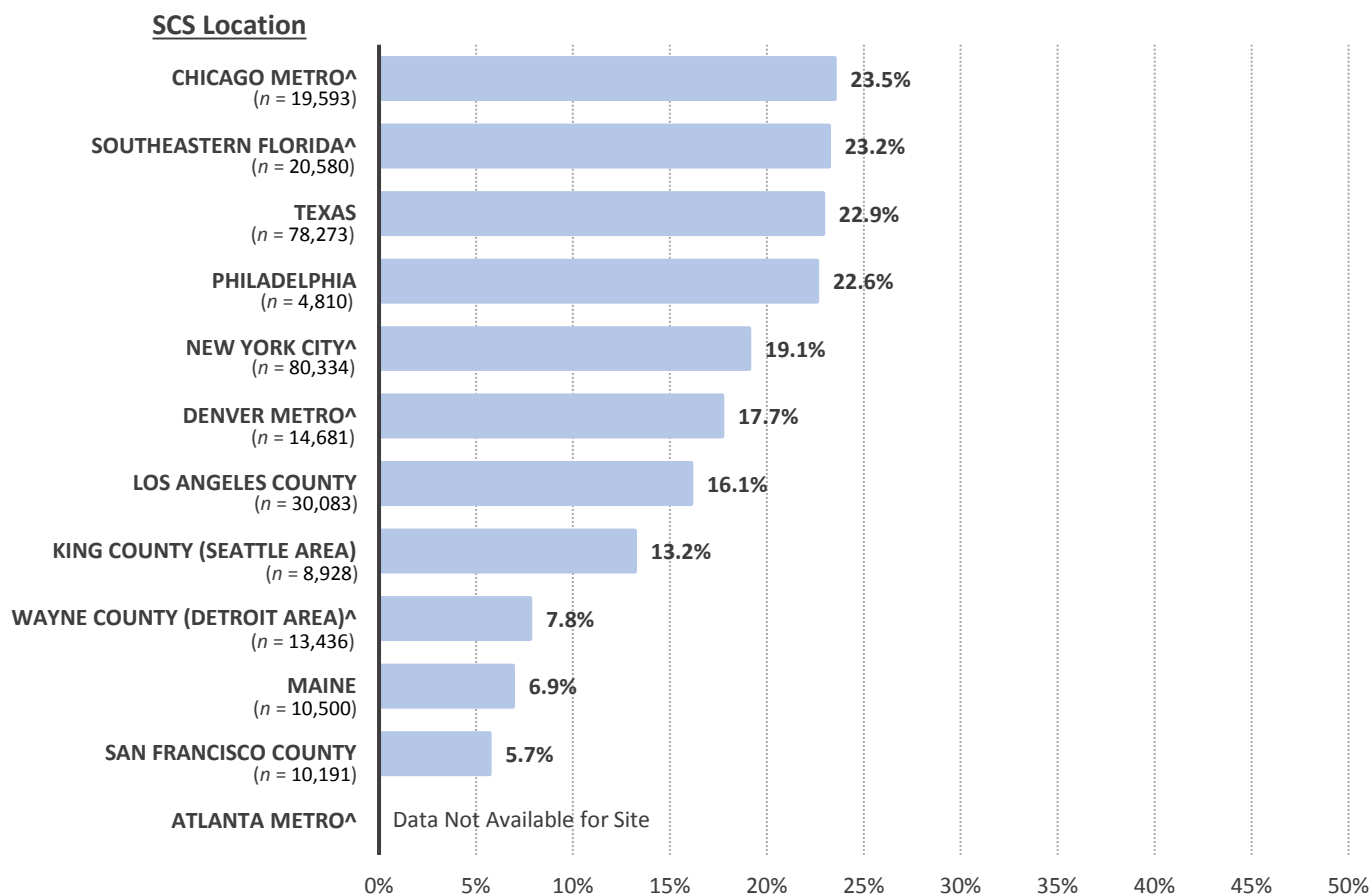
*Treatment Data: data on treatment admissions were provided to the NDEWS Coordinating Center by the SCE for each NDEWS SCS. The definitions of the types of treatment programs, admissions, and substance categories may vary across jurisdictions. Please see *Overview & Limitations* section for site-specific definition of terms, catchment area, and sources of the local treatment data.

**2015: Calendar Year 2015 data presented for all sites except Chicago, which includes Fiscal Year 2015 data.

SOURCE: Data provided by the NDEWS SCEs and their local data sources. See *Overview & Limitations* section for citation of the source of local treatment admissions data from each NDEWS SCS.

Figure 3c: Percentage of Treatment* Admissions Citing Marijuana as Primary Substance of Abuse, by NDEWS Sentinel Community Site (SCS)^, 2015**

(n = Number of Treatment Admissions)



^Atlanta Metro: Atlanta MSA (29 counties)—Calendar Year 2015 data not available

^Chicago Metro: Includes data for Chicago not entire Chicago MSA; Calendar Year 2015 data not available so Fiscal Year data is presented

^Denver Metro: Denver Metro Area (9 counties)

^New York City: Includes noncrisis admissions to outpatient, inpatient, residential, and methadone maintenance treatment programs licensed in the State

^Southeastern Florida: Miami MSA (3 counties)

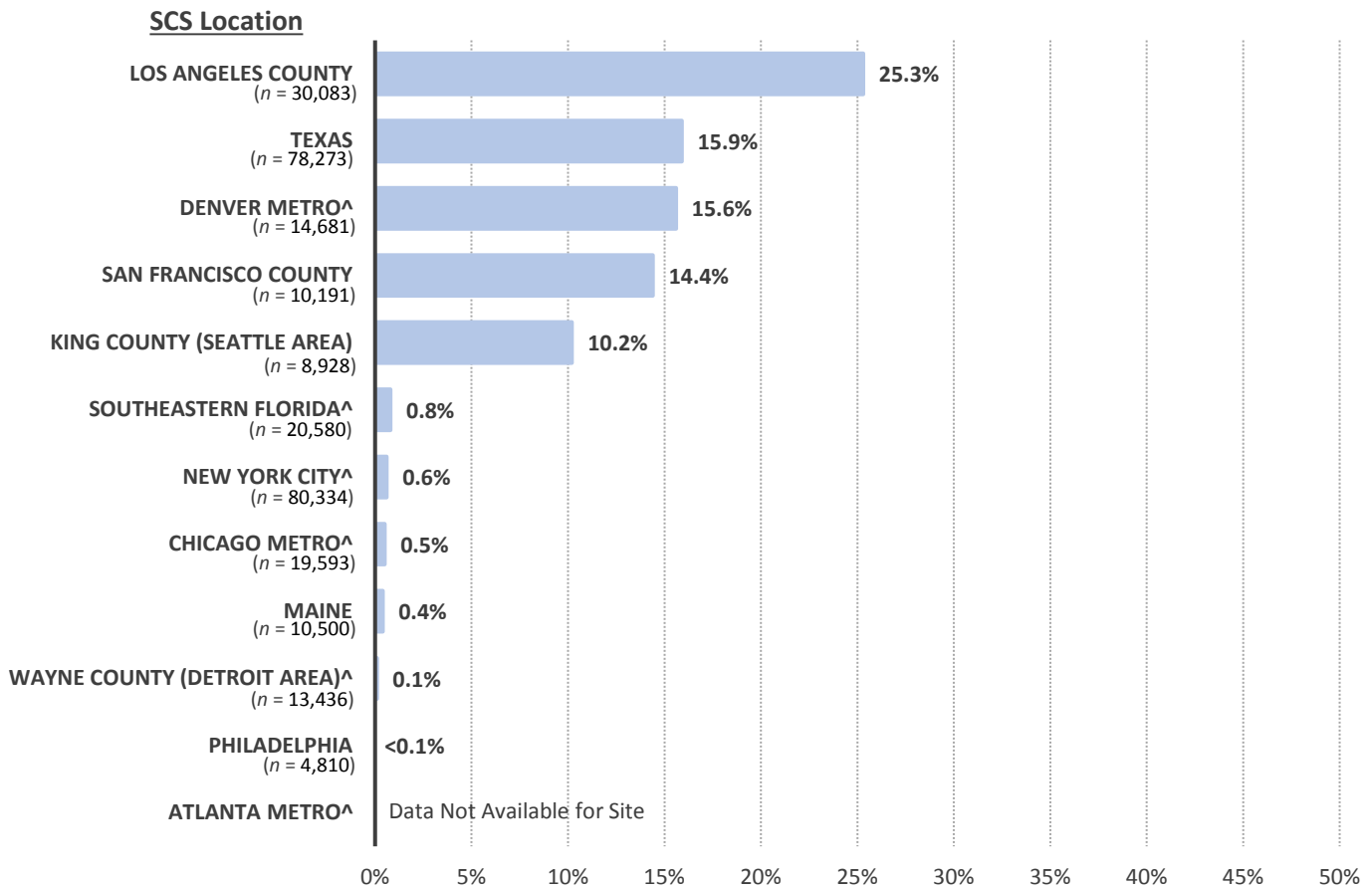
Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.

*Treatment Data: data on treatment admissions were provided to the NDEWS Coordinating Center by the SCE for each NDEWS SCS. The definitions of the types of treatment programs, admissions, and substance categories may vary across jurisdictions. Please see *Overview & Limitations* section for site-specific definition of terms, catchment area, and sources of the local treatment data.

**2015: Calendar Year 2015 data presented for all sites except Chicago, which includes Fiscal Year 2015 data.

Source: Data provided by the NDEWS SCEs and their local data sources. See *Overview & Limitations* section for citation of the source of local treatment admissions data from each NDEWS SCS.

Figure 3d: Percentage of Treatment* Admissions Citing Methamphetamine as Primary Substance of Abuse, by NDEWS Sentinel Community Site (SCS)^, 2015**
 (n = Number of Treatment Admissions)



^Atlanta Metro: Atlanta MSA (29 counties)—Calendar Year 2015 data not available

^Chicago Metro: Includes data for Chicago not entire Chicago MSA; Calendar Year 2015 data not available so Fiscal Year data is presented

^Denver Metro: Denver Metro Area (9 counties)

^New York City: Includes noncrisis admissions to outpatient, inpatient, residential, and methadone maintenance treatment programs licensed in the State

^Southeastern Florida: Miami MSA (3 counties)

Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.

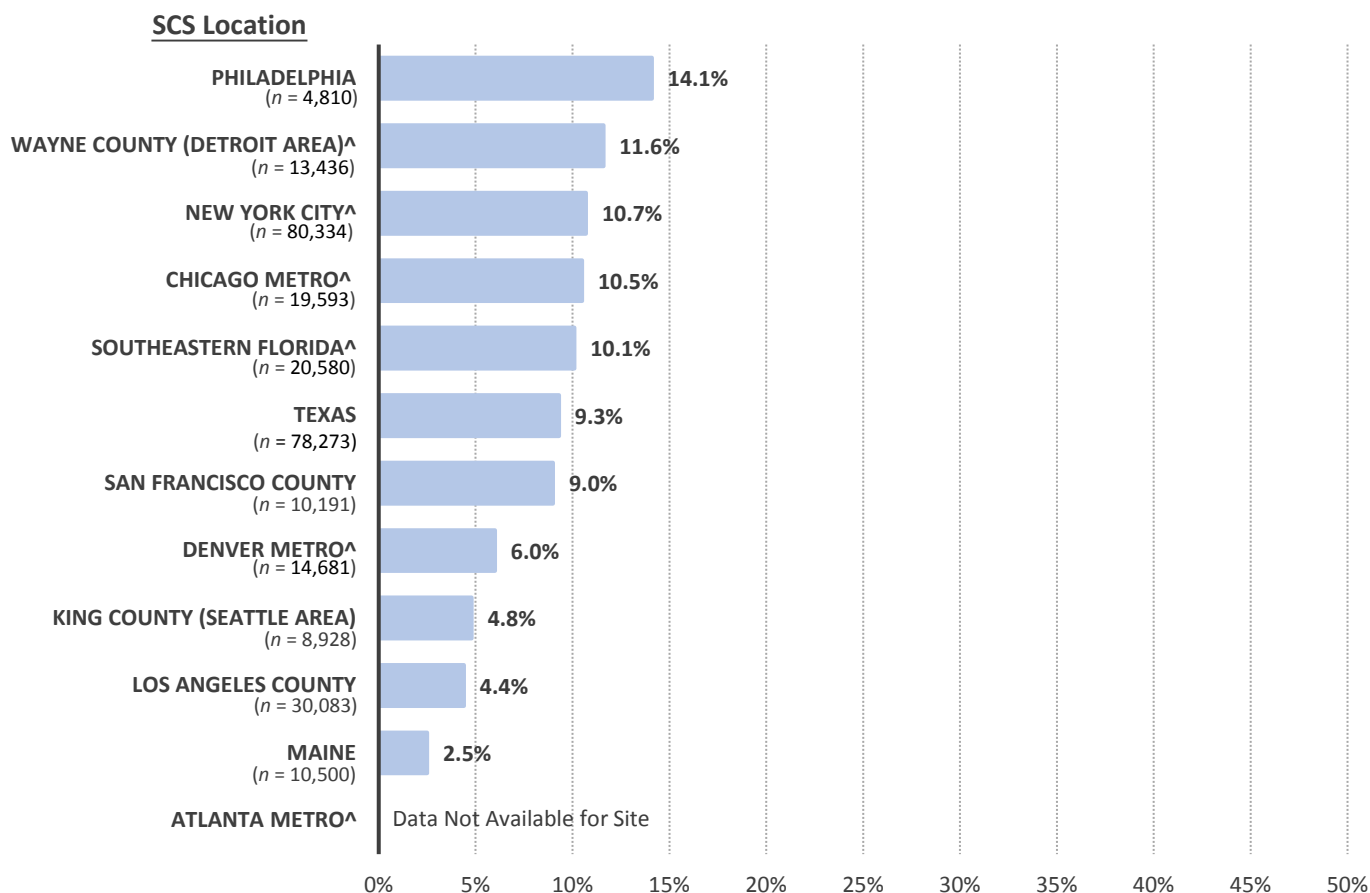
*Treatment Data: data on treatment admissions were provided to the NDEWS Coordinating Center by the SCE for each NDEWS SCS. The definitions of the types of treatment programs, admissions, and substance categories may vary across jurisdictions. Please see *Overview & Limitations* section for site-specific definition of terms, catchment area, and sources of the local treatment data.

**2015: Calendar Year 2015 data presented for all sites except Chicago, which includes Fiscal Year 2015 data.

Source: Data provided by the NDEWS SCEs and their local data sources. See *Overview & Limitations* section for citation of the source of local treatment admissions data from each NDEWS SCS.

Figure 3e: Percentage of Treatment* Admissions Citing Cocaine as Primary Substance of Abuse, by NDEWS Sentinel Community Site (SCS)^, 2015**

(n = Number of Treatment Admissions)



^Atlanta Metro: Atlanta MSA (29 counties)—Calendar Year 2015 data not available

^Chicago Metro: Includes data for Chicago not entire Chicago MSA; Calendar Year 2015 data not available so Fiscal Year data is presented

^Denver Metro: Denver Metro Area (9 counties)

^New York City: Includes noncrisis admissions to outpatient, inpatient, residential, and methadone maintenance treatment programs licensed in the State

^Southeastern Florida: Miami MSA (3 counties)

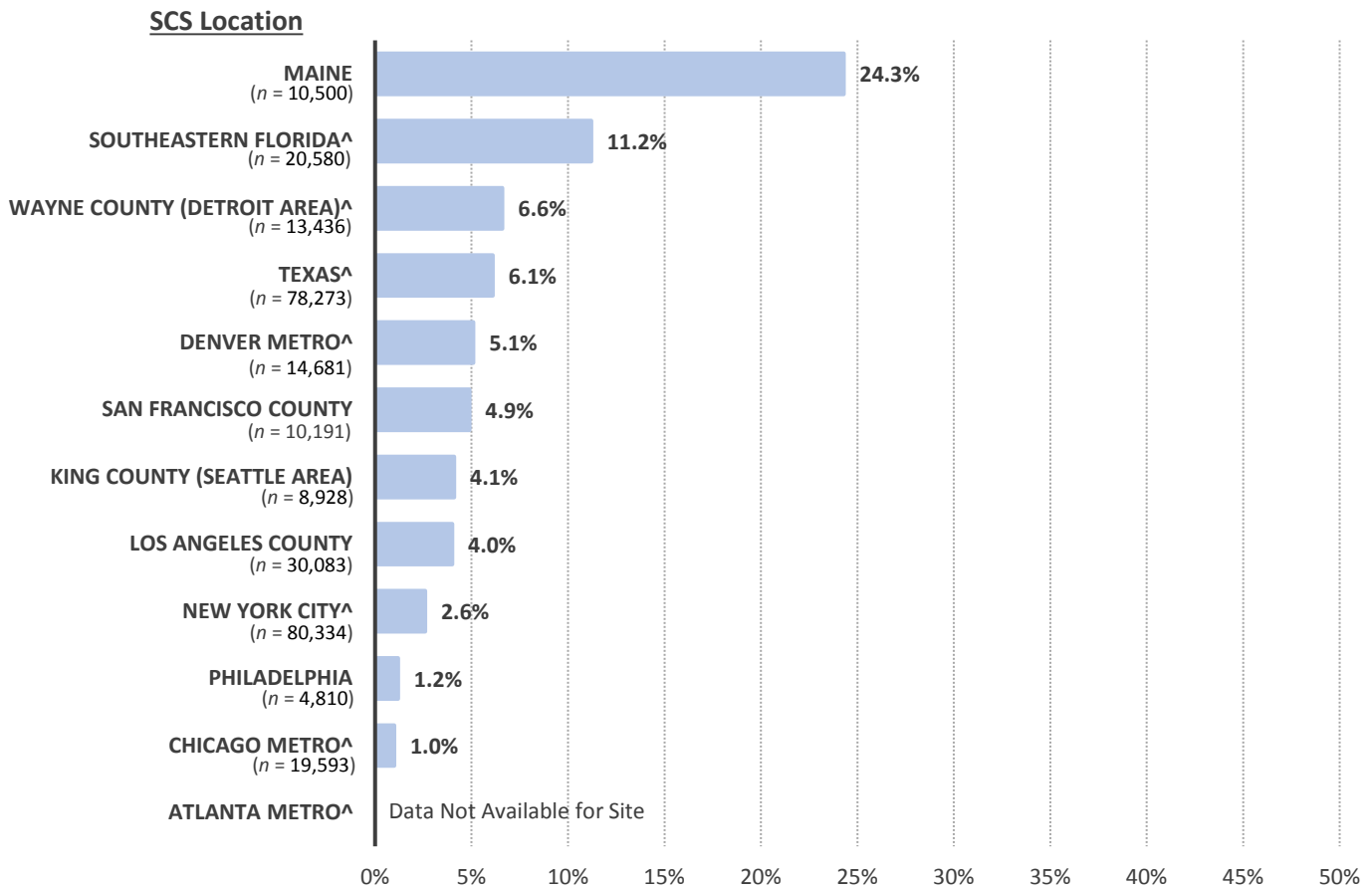
Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.

*Treatment Data: data on treatment admissions were provided to the NDEWS Coordinating Center by the SCE for each NDEWS SCS. The definitions of the types of treatment programs, admissions, and substance categories may vary across jurisdictions. Please see *Overview & Limitations* section for site-specific definition of terms, catchment area, and sources of the local treatment data.

**2015: Calendar Year 2015 data presented for all sites except Chicago, which includes Fiscal Year 2015 data.

SOURCE: Data provided by the NDEWS SCEs and their local data sources. See *Overview & Limitations* section for citation of the source of local treatment admissions data from each NDEWS SCS.

Figure 3f: Percentage of Treatment* Admissions Citing Prescription Opioids as Primary Substance of Abuse, by NDEWS Sentinel Community Site (SCS)^, 2015**
 (n = Number of Treatment Admissions)



^Atlanta Metro: Atlanta MSA (29 counties)—Calendar Year 2015 data not available

^Chicago Metro: Includes data for Chicago not entire Chicago MSA; Calendar Year 2015 data not available so Fiscal Year data is presented

^Denver Metro: Denver Metro Area (9 counties)

^New York City: Includes noncrisis admissions to outpatient, inpatient, residential, and methadone maintenance treatment programs licensed in the State

^Southeastern Florida: Miami MSA (3 counties)

Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.

***Treatment Data:** data on treatment admissions were provided to the NDEWS Coordinating Center by the SCE for each NDEWS SCS. The definitions of the types of treatment programs, admissions, and substance categories may vary across jurisdictions. Please see *Overview & Limitations* section for site-specific definition of terms, catchment area, and sources of the local treatment data.

****2015:** Calendar Year 2015 data presented for all sites except Chicago, which includes Fiscal Year 2015 data.

Source: Data provided by the NDEWS SCEs and their local data sources. See *Overview & Limitations* section for citation of the source of local treatment admissions data from each NDEWS SCS.

Overview and Limitations of Treatment Admissions Data from Local Sources

Treatment admissions data provide indicators of the health consequences of drug use and their impact on the treatment system.^a The data can provide some indication of the types of drugs being used in geographic areas and can show patterns of use over time. However, it is important to note that treatment data only represent use patterns of individuals entering treatment programs and the availability of particular types of treatment in a geographic area will also influence the types of drugs being reported. Also, most sites report only on admissions to publicly funded treatment programs; thus, information on individuals entering private treatment programs may not be represented by the data. It should also be noted that each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.^b

Treatment admissions data are reported to the NDEWS Coordinating Center by the NDEWS Sentinel Community Epidemiologist for each SCS, when available. Data for 11 of 12 NDEWS SCSs are reported in this Cross-Site Data Presentation. Ten SCSs reported calendar year 2015 data; one site only had fiscal year 2015 data available (Chicago) and one site had no data available for 2015 (Atlanta Metro). See below for site-specific information about the data.

Site-Specific Notes about 2015 Treatment Data and Sources of the Data

❖ Atlanta Metro

Data Availability: Calendar year 2015 treatment data are not available for the Atlanta Metro SCS.

Catchment Area: Includes residents of: Barrow, Bartow, Butts, Carroll, Cherokee, Clayton, Cobb, Coweta, Dawson, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Haralson, Heard, Henry, Jasper, Lamar, Meriwether, Morgan, Newton, Paulding, Pickens, Pike, Rockdale, Spalding, and Walton counties.

Notes & Definitions:

Admissions: includes admissions to publicly-funded programs.

Marijuana/Synthetic Cannabinoids: the data do not differentiate between marijuana and synthetic cannabinoids.

Source: Data provided to the Atlanta Metro NDEWS SCE by the Georgia Department of Human Resources.

❖ Chicago Metro

Data Availability: Only fiscal year data are available at this time.

Catchment Area: Data were only available for residents of Chicago, not for the entire Chicago MSA.

Notes & Definitions:

Admissions: Includes admissions to publicly funded programs. Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.

Declines in overall treatment admissions are due to several factors, including budget cuts and changes in providers and payers that affect the reporting of these data (e.g., the expansion of Medicaid under the ACA to cover some forms of drug treatment).

Prescription Opioids: Includes oxycodone/hydrocodone, nonprescription methadone, and other opiates.

Source: Data provided to the NDEWS Chicago SCE by the Illinois Department of Substance Use.

❖ **Denver Metro**

Catchment Area: Includes admissions data for residents of Adams, Arapahoe, Boulder, Broomfield, Clear Creek, Denver, Douglas, Gilpin, and Jefferson counties.

Notes & Definitions:

Admissions: Includes admissions to all Colorado alcohol and drug treatment agencies licensed by the Colorado Department of Human Services, Office of Behavioral Health (OBH). Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.

Prescription Opioids: Includes nonprescription methadone and other opiates and synthetic opiates.

MDMA: Coded as “club drugs,” which are mostly MDMA.

Other Drugs/Unknown: Includes inhalants, over-the-counter, and other drugs not specified.

Source: Data provided to the Denver Metro NDEWS SCE by the Colorado Department of Human Services, Office of Behavioral Health (OBH), Drug/Alcohol Coordinated Data System (DACODS).

❖ **King County (Seattle Area)**

Notes & Definitions:

Admissions: Includes admissions to all modalities of care in publicly funded programs. Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.

Prescription Opioids: Includes oxycodone/hydrocodone, nonprescription methadone, and other opiates.

Source: Data provided to the King County (Seattle Area) NDEWS SCE by the Washington State Department of Social and Health Services (DSHS), Division Behavioral Health and Recovery, Treatment Report and Generation Tool (TARGET).

❖ **Los Angeles County**

Notes & Definitions:

Admissions: Includes all admissions to programs receiving any public funds or to programs providing narcotic replacement therapy, as reported to the California Outcomes Monitoring System (CalOMS). An admission is counted only after all screening, intake, and assessment processes have been completed, and all of the following have occurred: 1) the provider has determined that the client meets the program admission criteria; 2) if applicable, the client has given consent for treatment/recovery services; 3) an individual recovery or treatment plan has been started; 4) a client file has been opened; 5) the client has received his/her first direct recovery service in the facility and is expected to continue participating in program activities; and 6) in methadone programs, the client has received his/her first dose. Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.

Prescription Opioids: Includes drug categories labeled “oxycodone/OxyContin” and “other opiates or synthetics.”

Source: Data provided to the Los Angeles NDEWS SCE by the California Department of Health Care Services, Mental Health Services Division, Office of Applied Research and Analysis, CalOMS (2013 and 2014 data) and the California Department of Drug and Alcohol Programs (2011 and 2012 data).

❖ **Maine**

Notes & Definitions:

Admissions: includes all admissions to programs receiving state funding.

Source: Data provided to the Maine NDEWS SCE by the Maine Office of Substance Abuse.

❖ **New York City**

Notes & Definitions:

Non-Crisis Admissions: Includes non-crisis admissions to outpatient, inpatient, residential, and methadone maintenance treatment programs licensed in the state.

Crisis Admissions: Includes detox admissions to all licensed treatment programs in the state. Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.

Prescription Opioids: Includes nonprescription methadone, buprenorphine, other synthetic opiates, and OxyContin.

Benzodiazepines: Includes benzodiazepines, alprazolam, and rohypnol.

Synthetic Stimulants: Includes other stimulants and a newly created category, synthetic stimulants (created in 2014).

Source: Data provided to the New York City NDEWS SCE by the New York State Office of Alcoholism and Substance Abuse Services (OASAS), Client Data System accessed May 2016 from Local Governmental Unit (LGU) Inquiry Reports.

❖ **Philadelphia**

Notes & Definitions:

Admissions: Includes admissions for uninsured and underinsured individuals admitted to any licensed treatment programs funded through the Philadelphia Department of Behavioral Health and Intellectual disAbility Services (DBHIDS). Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.

2015 Data: Pennsylvania expanded Medicaid coverage under the Affordable Care Act and more than 100,000 additional individuals became eligible in 2015. As individuals who historically have been uninsured become insured, the number of individuals served through the BHSI (Behavioral Health Special Initiative) program has declined; thus treatment admissions reported by BHSI declined from 8,363 in 2014 to 4,810 in 2015. However, similar patterns of substance use were observed among those seeking treatment in 2014 and in 2015.

Methamphetamine: Includes both amphetamines and methamphetamine.

Other Drugs: May include synthetics, barbiturates, and over-the-counter drugs. Synthetic Stimulants and Synthetic Cannabinoids are not distinguishable from "Other Drugs" in the reporting source.

Source: Data provided to the Philadelphia NDEWS SCE by the Philadelphia Department of Behavioral Health and Intellectual disAbility Services (DBHIDS), Office of Addiction Services, Behavioral Health Special Initiative.

❖ **San Francisco County**

Notes & Definitions

Admissions: Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.

Source: Data provided to the San Francisco NDEWS SCE by the San Francisco Department of Public Health, Community Behavioral Health Services Division.

❖ **Southeastern Florida (Miami Area)**

Catchment Area: Includes the three counties of the Miami MSA—Broward, Miami-Dade, and Palm Beach counties.

Notes & Definitions:

Admissions: Includes all admissions to programs receiving any public funds. Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.

2011–2013: Data for Palm Beach County is not available for 2011–2013, therefore, data for 2011–2013 only includes data for Broward and Miami-Dade counties.

Source: Data provided to the Southeastern Florida NDEWS SCE by the Florida Department of Children and Families and the Broward Behavioral Health Coalition.

❖ **Texas**

Notes & Definitions:

Admissions: Includes all admissions reported to the Clinical Management for Behavioral Health Services (CMBHS) of the Department of State Health Services (DSHS). Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.

Methamphetamine: Includes amphetamines and methamphetamine.

Synthetic Cannabinoids: DSHS collects data on “other Cannabinoids,” which may not include all the synthetic cannabinoids.

Females: Calculated using formula “1 minus Male %.”

Source: Data provided to the Texas NDEWS SCE by the Texas Department of State Health Services (DSHS).

❖ **Wayne County (Detroit Area)**

Notes & Definitions:

Admissions: Admissions whose treatment was covered by Medicaid or Block Grant funds; excludes admissions covered by private insurance, treatment paid for in cash, and admissions funded by the Michigan Department of Corrections. Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.

Synthetic Stimulants: Includes amphetamines and synthetic stimulants; data suppressed to protect confidentiality.

Source: Data provided to the Wayne County (Detroit Area) NDEWS SCE by the Michigan Department of Health and Human Services, Bureau of Behavioral Health and Developmental Disabilities, Division of Quality Management and Planning, Performance Measurement and Evaluation Section.

Sources

Data Sources: Adapted by the NDEWS Coordinating Center from data provided by NDEWS SCEs listed above.

Overview/Methods/Limitations Sources: Adapted by the NDEWS Coordinating Center from:

^aNational Institute on Drug Abuse; National Institutes of Health; U.S. Department of Health and Human Services, *Assessing Drug Abuse Within and Across Communities, 2nd Edition*. 2006. Available at:

<https://www.drugabuse.gov/publications/assessing-drug-abuse-within-across-communities>

^bNational Institute on Drug Abuse; National Institutes of Health; U.S. Department of Health and Human Services, *Epidemiologic Trends in Drug Abuse, Proceedings of the Community Epidemiology Work Group, Highlights and Executive Summary, June 2014*. Available at: <https://www.drugabuse.gov/sites/default/files/cewgjune2014.pdf>