

September 2023



Substance Use Disorder Treatment Evaluation
Monitoring Report

Quarterly Update:
3rd Quarter FY 2023

This report has been abbreviated from previous fiscal years to include only key data points for issues currently targeted for improvement. Metrics that have been excluded will be reviewed annually.



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INTRODUCTION

Purpose:

This report provides an overview of data indicators targeted for improvement through substance use disorder treatment and recovery services in the LRE region thru 3rd quarter of FY23.

As one of ten Prepaid Inpatient Health Plans (PIHP) in Michigan, the LRE is responsible for managing services provided under contract with the Michigan Department of Health and Human Services (MDHHS) for substance use disorder. Funding to support services includes Block Grants, Medicaid, Public Act 2, and State Opioid Response grants.

Treatment and recovery services are managed by Community Mental Health Services Providers (CMHSP) throughout the region, which includes Allegan, Kent, Lake, Mason, Muskegon, Oceana, and Ottawa Counties.

Using this Report:

Pages 2-3 of this report provide a snapshot for each metric, including a brief description of the findings, whether the trend is improving or worsening, and the header provides a link to the page referenced that provides detailed results for the indicator.

In-depth results for each metric for the region and CMHSPs are provided on pages 4-12. Other data being monitored begins on page 13.



Throughout the report, areas of concern have been identified with this icon.



Areas with substantial improvement have been noted with this icon.

When a benchmark rate is provided, it represents the LRE regional rate for the previous fiscal year.

Data analyzed for this report was refreshed on 08/08/23 for BH TEDS and 08/09/23 for encounters. Any data entered after these dates will be reflected in subsequent reports. For details on data parameters, refer to the appendix, starting on page 18.

Commonly Used Acronyms and Abbreviations:

1Q - 1st quarter

2Q - 2nd quarter

3Q - 3rd quarter

4Q - 4th quarter

avg - average

CJ - Criminal Justice

IOP - Intensive Outpatient

LRE - Lakeshore Regional Entity

LOC - Level of care

LT Res - Long term residential level of care

MA - Methamphetamine

MAT- Medication Assisted Treatment

OP- Outpatient




OD - Opioid Use Disorder

ST Res - Short term residential level of care



TTS - Time to Service

West MI - Lake, Mason, & Oceana Counties

TREATMENT ACCESS




Metrics	Page	Data Summary	Trend
<u>Criminal Justice (CJ):</u> ↑ admissions with CJ involvement (Metrics #1 -3)	pg 4	Region-wide, 38% of admissions had criminal justice involvement in 3Q. The majority of these were individuals 'on probation' which has been continually increasing in West MI and has decreased, but remains high, in Allegan County during 3Q.	
<u>MAT Time to Service:</u> #5. ↓ avg days between request and 1st service for persons with opioid use disorder (OUD)	pg 5	Time to Service (TTS) for individuals seeking MAT services has remained relatively stable throughout FY23. During 3Q, TTS for the region for MAT services was 5.9 days with substantially longer TTS reported for Mason (21 days) and Oceana (15 days) counties.	
<u>Time to Service IVDU:</u> #6. Maintain an average wait time of <3 days for persons with IVDU	pg 6	Among individuals with IVDU, the average time to service was 7.9 days in Q3; almost one full day longer than the prior quarter and slightly higher than in FY22. The state goal of 3 days or less was not achieved. During Q3, TTS for clients with IVDU were longest for LT Res (13.3 days), followed by IOP (8.0 days) and Outpatient (7.0). TTS for clients with IVDU to outpatient services ranged from a high of 21.3 in Allegan to a low of 4.7 in Muskegon.	

ENGAGEMENT AND RETENTION

Metrics	Page	Data Summary	Trend
<u>Integrated Treatment:</u> #9. ↑ % of clients w/ co-occurring diagnosis (COD) receiving integrated services	pg 8	The % of clients with COD that received integrated treatment remains low but has continually improved since FY19 with a high of 20% in 3Q. Every CMHSP has improved since FY19, with Ottawa and West MI achieving ongoing improvement throughout FY23.	
<u>One Encounter:</u> #11. ↓ % of treatment episodes with no 2nd visit*	pg 9	Episodes w/ only 1 encounter decreased during FY23 to 8% in Q3; with the highest rates for IOP (24%) and OP (18%). However, recent data may be artificially inflated due to delayed data entry.	

*Data criteria modified for this indicator. Treatment episodes with only an assessment and a discharge reason reported as something other than having 'dropped out' are now excluded from analysis.

CONTINUITY OF CARE FOLLOWING DETOX & ST RES

Metrics	Page	Data Summary	Trend
<u>ST Res TTS Next LOC:</u> #15. ↑ % of clients discharged from ST Res admitted to the next LOC w/in 7 days #16. ↓ avg # days between discharge and admission to next LOC following ST Res and	pg 11	Since FY 21 the % of clients admitted to the next LOC within 7 days following ST Res has been improving and achieved a high of 50% in Q2, followed by a decrease in Q3 to 37%. Among the 63% of clients discharged from ST Res in Q3 who were not admitted to the next LOC within 7 days, the average time between discharge and readmission was 15.2 days.	 
<u>ST Res Discharge Reason:</u> #17. ↓ discharges from detox and/or residential levels of care with discharge reason identified as 'completed treatment'	pg 12	The discharge reason for detox and ST Res should not be 'completed treatment' since the intention is to continue care at another provider at a lower level of care. Incorrectly coded discharges have continually increased thru FY23 for ST Res to a high of 76% in Q3. For detox the rate worsened in Q1 & Q2, then improved substantially in 3Q to 22%.	

Other Data to Monitor

Metrics	Page	Data Summary
<u>Admissions by Primary Drug</u>	pg 13	In 3Q, primary drugs reported at admission remained relatively stable as a region with a small decrease for heroin (17%). Heroin has decreased during FY23 in every CMHSP.
<u>Methamphetamine (MA) Involved Admissions</u>	pg 16	During FY23 1-in-4 admissions reported MA as a drug of choice, an increase from prior years; rates were highest in Allegan (51%) and West MI (46% -54%) in Q3. In Muskegon, rates have increased throughout FY23 to 31%. Admissions involving both an opioid and MA have remained steady at approximately 1-in-10 admissions region-wide; rates were highest in Muskegon (20%), Mason 18%), and Oceana (17%) during Q3.

TREATMENT ACCESS

FY23 Q3

Priority: CRIMINAL JUSTICE INVOLVED POPULATIONS

Metric #1. Increase admissions w/ legal status, on parole/probation

Metric #2. Increase admissions w/legal status as diversion pre or post booking

Metric #3. Increase admissions with legal status as 'in jail'

Engaging criminal justice-involved populations in services when they return to the community is a priority.

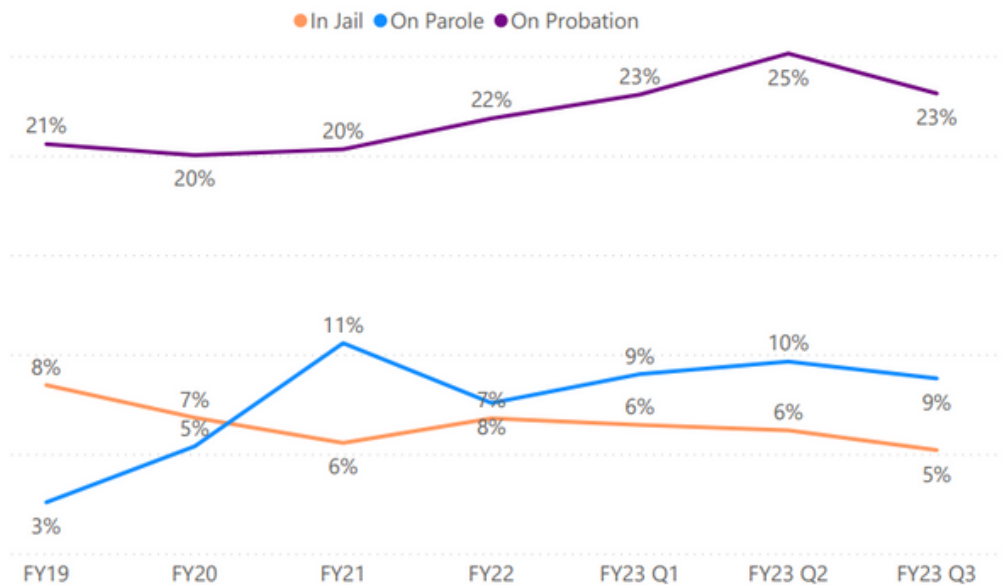
Data Highlights:

Region-wide, 38% of admissions had criminal justice involvement in 3Q. The majority of these were individuals 'on probation'.

The rate for admissions with legal status as pre or post booking diversion remain consistently low (<1%).

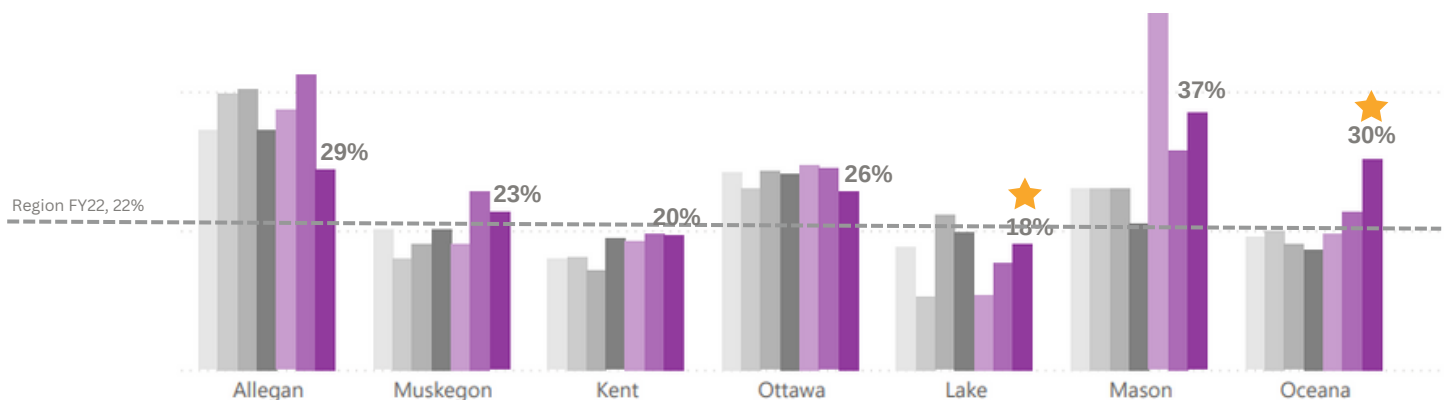
Rates of admissions for individuals on probation have continued to increase in West MI counties, and have decreased, but remain high, in Allegan County during 3Q.

Percent of Admissions by Legal Status at Admission, LRE Region (T.1)



Percent of Admissions with Legal Status as On Probation at Admission by County

FY19 FY20 FY21 FY22 FY23 Q1 FY23 Q2 FY23 Q3



	Allegan	Muskegon	Kent	Ottawa	Lake	Mason	Oceana
FY19	34.4%	20.1%	15.9%	28.4%	17.7%	26.1%	19.0%
FY20	39.7%	16.0%	16.3%	26.2%	10.6%	26.2%	20.0%
FY21	40.4%	18.1%	14.4%	28.5%	22.2%	26.1%	18.0%
FY22	34.4%	20.2%	18.9%	28.2%	19.7%	21.0%	17.3%
FY23 Q1	37.3%	18.1%	18.5%	29.5%	10.7%	56.0%	19.6%
FY23 Q2	42.4%	25.6%	19.5%	28.9%	15.4%	31.6%	22.8%
FY23 Q3	28.8%	22.6%	19.5%	25.6%	18.2%	36.9%	30.2%

Priority: PERSONS LIVING WITH AN OPIOID USE DISORDER

Metric #5. Decrease average days between request for service and first service for persons living with an opioid use disorder (OUD)

Data Highlights:

TTS for individuals with an OUD is primarily affected by delays in admissions for medication assisted treatment (MAT). During 3Q, TTS for individuals in the region seeking medication assisted treatment (MAT) was 5.9 days, increasing slightly from the previous quarter.

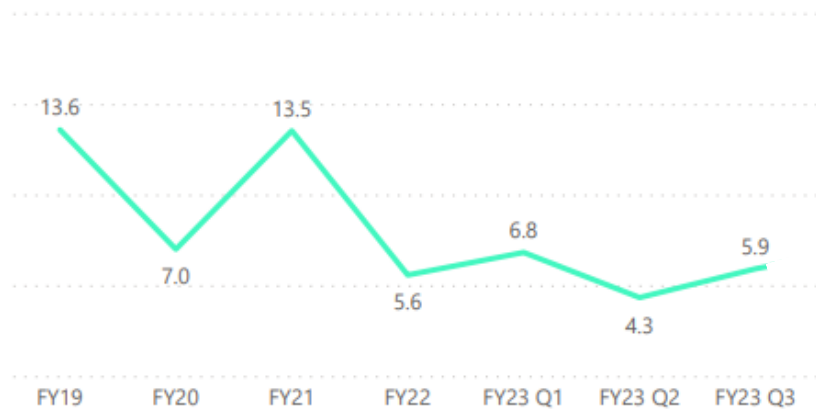
During FY21 TTS for MAT reached a high of 14 days, with county averages ranging from a low of 1 to a high of 31 days. Region-wide, TTS during FY22 was substantially shorter and this decrease has sustained during FY23.

During 3Q TTS for MAT improved slightly in Kent and Ottawa Counties. TTS was high in Mason and Oceana Counties, however this includes only 8 individuals so the impact on the overall region's rates would be minimal.

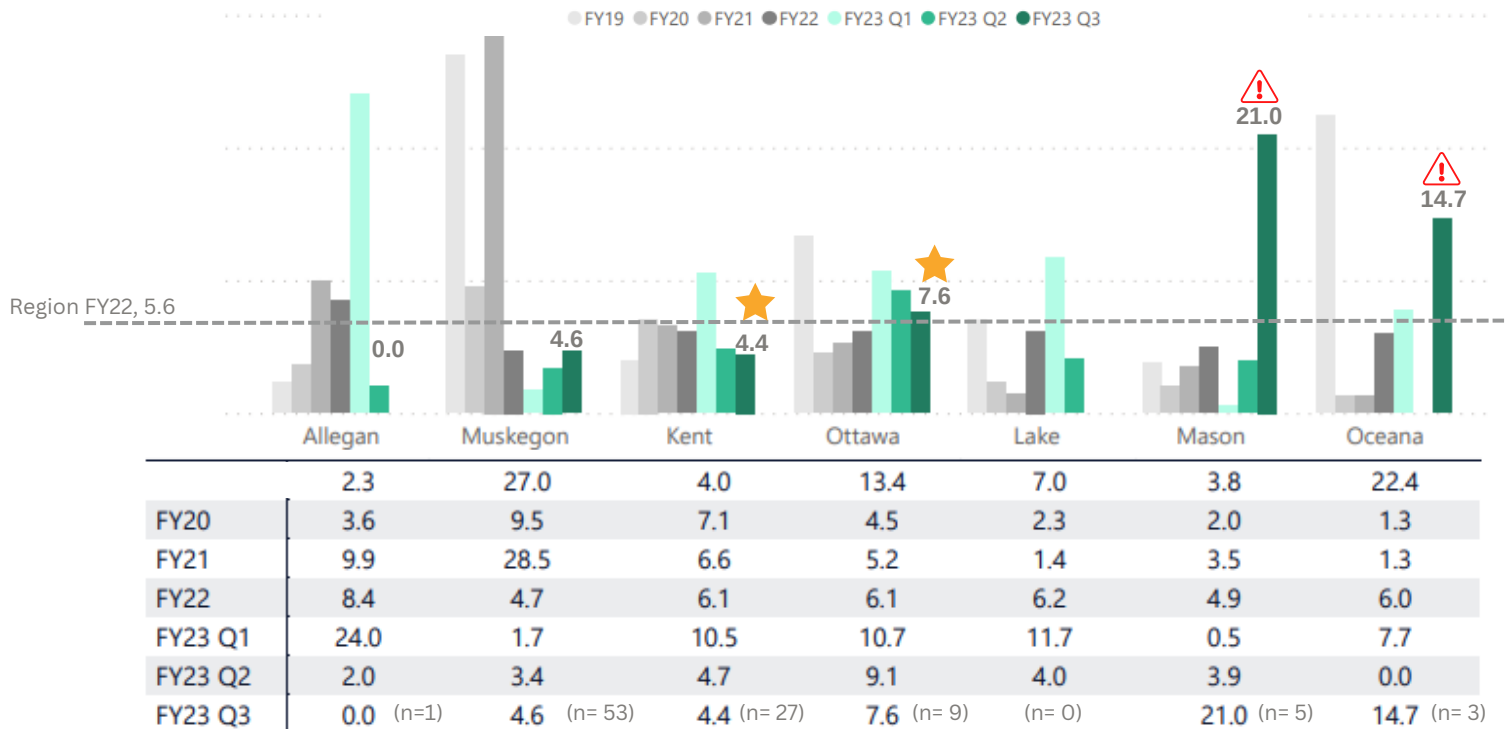
TTS:

Time to Service is the number of days between the request for service and date of first service received.

Average Time to Service (days) for Medication Assisted Treatment (MAT), LRE Region (T.4)



Average Time to Service (days) for Outpatient MAT by County (T.4)



TREATMENT ACCESS

Priority: PERSONS WITH INTRAVENOUS DRUG USE (IVDU)

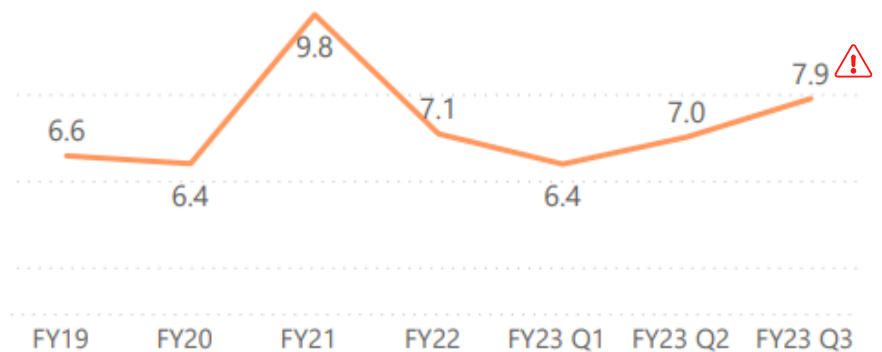
Metric #6. Maintain an average wait time of < 3 days for persons with IVDU to service.

Data Highlights:

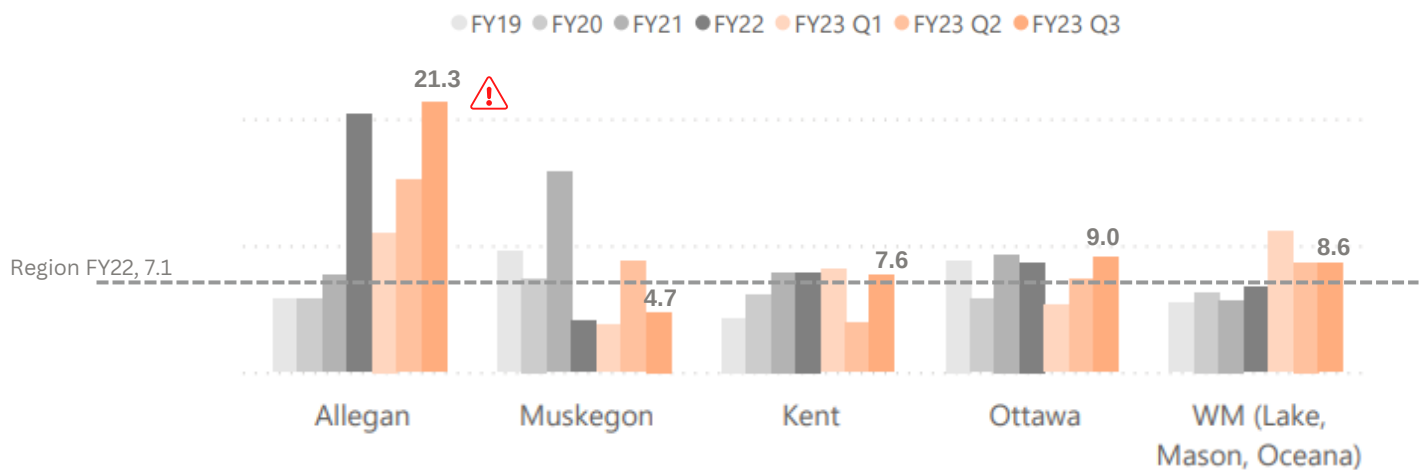
Among individuals with IVDU, the average time to service was 7.9 days in Q3; almost one full day longer than the prior quarter and slightly higher than in FY22. The state goal of 3 days or less was not achieved.

Across the region TTS for clients with IVDU ranged from lows of 4.7 in Muskegon to a high of 21.3 for Allegan County. TTS for clients with IVDU have been increasing in Allegan and Ottawa Counties throughout FY23.

Average Time to Services for Clients with IVDU (T.5)



Average Time to Service for Clients w/IVDU by CMHSP (T.5)

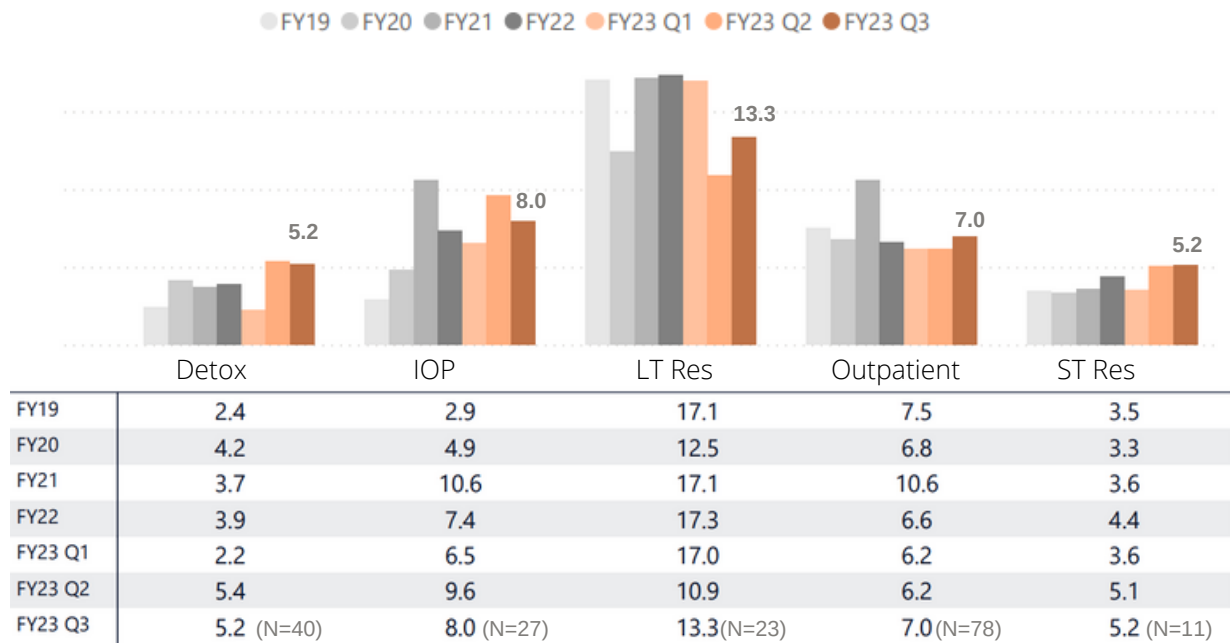


FY19	5.7	9.5	4.3	8.8	5.4
FY20	5.7	7.4	6.2	5.7	6.3
FY21	7.7	15.8	7.9	9.3	5.7
FY22	20.4	4.1	7.8	8.6	6.7
FY23 Q1	11.0	3.7	8.1	5.3	11.1
FY23 Q2	15.1	8.7	3.9	7.3	8.6
FY23 Q3	21.3 (N=11)	4.7 (N=57)	7.6 (N=62)	9.0 (N=30)	8.6 (N=21)

TREATMENT ACCESS

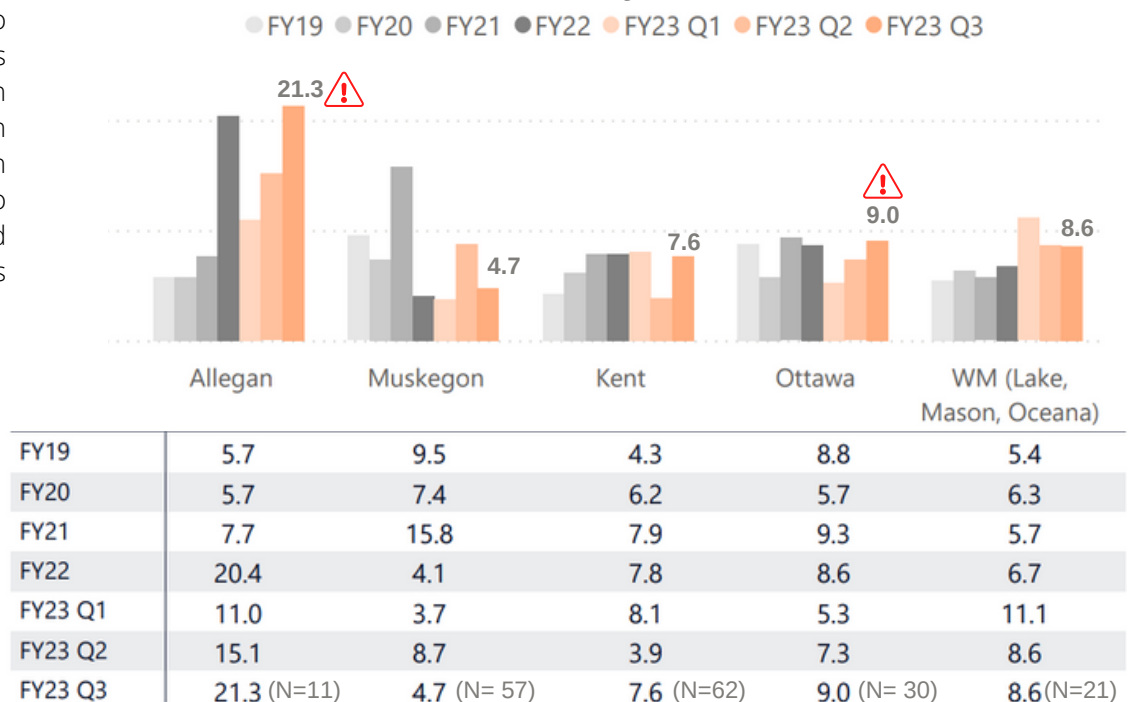
When TTS for clients with IVDU is broken out by service category. Historically, LT Res has the longest TTS, followed by intensive outpatient, and Outpatient. During FY23, TTS for LT Res has improved from prior years, with a TTS of 13.3 days in Q3. TTS for IOP has remained relatively stable in recent years with a TTS of 8.0 days in Q3. TTS for OP has also remained relatively stable in recent years with a TTS of 8.0 days in Q3.

Average Time to Services for Clients with IVDU by Service Category (T.5)



Average Time to Outpatient (non-intensive) Services for Clients with IVDU by CMHSP (T.5)

During Q3, TTS for clients with IVDU to outpatient services ranged from a high of 21.3 in Allegan to a low of 4.7 in Muskegon. No CMHSPs achieved the goal of 3 days or less in Q3.



ENGAGEMENT AND RETENTION

Priority: CLIENTS WITH CO-OCCURRING DISORDERS RECEIVE INTEGRATED TREATMENT.

Metric #9. Increase % of clients w/ co-occurring diagnosis that received integrated services.

The following provides information about treatment episodes for individuals with a co-occurring diagnosis (COD) who were reported as having received integrated treatment at discharge. Integrated treatment is defined as "Client with co-occurring substance use and mental health problems being treated with an integrated treatment plan by an integrated team."

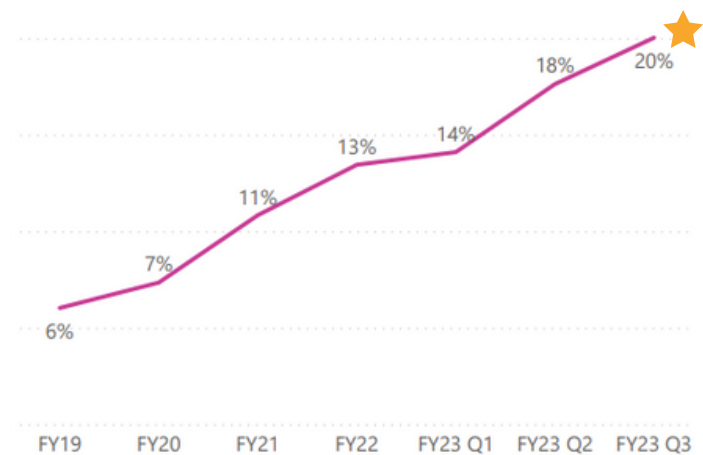
Services can be provided by one provider, or multiple providers if services are coordinated and there is one treatment plan with input from both disciplines. An HH modifier must be used for all encounters recorded as 'receiving integrated treatment'.

Data Highlights:

The percentage of clients with COD that are reported as having received integrated treatment has remained relatively low but has been increasing steadily since FY19 with a high of 20% in Q3.

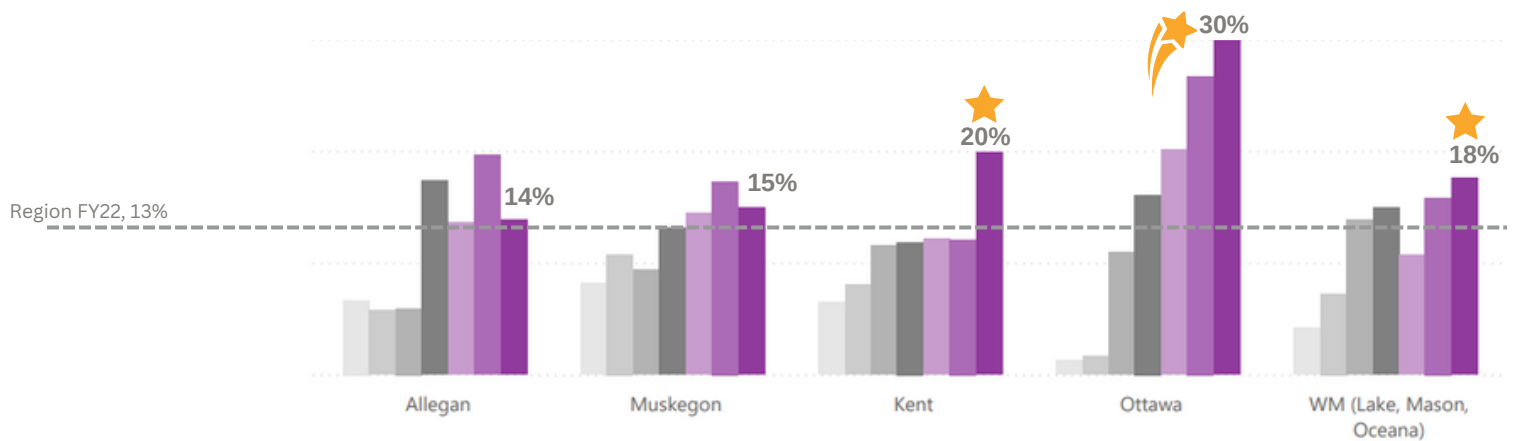
Since FY19, all counties have achieved an improved rates with Ottawa and West MI achieving ongoing improvement throughout FY23.

Percent of Clients with Co-Occurring Disorders that Received Integrated Treatment, LRE Region (T.8)



Percent of Clients with COD that Received Integrated Treatment by CMHSP (T.8)

● FY19 ● FY20 ● FY21 ● FY22 ● FY23 Q1 ● FY23 Q2 ● FY23 Q3



FY19	6.6%	8.1%	6.5%	1.2%	4.2%
FY20	5.7%	10.8%	8.0%	1.6%	7.3%
FY21	5.9%	9.3%	11.6%	11.0%	13.9%
FY22	17.3%	13.1%	11.8%	16.1%	14.9%
FY23 Q1	13.6%	14.5%	12.2%	20.1%	10.7%
FY23 Q2	19.6%	17.3%	12.1%	26.7%	15.8%
FY23 Q3	13.8% (4 of 29)	14.9% (34 of 228)	19.9% (65 of 327)	29.9% (49 of 164)	17.6% (13 of 74)

ENGAGEMENT AND RETENTION

Priority: INCREASED TREATMENT ENCOUNTERS

Metric #11. Decrease % of treatment episodes with no 2nd visit.

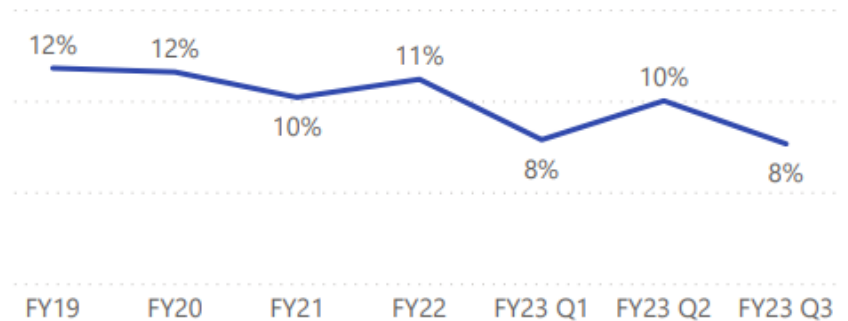
Data Highlights:

For treatment episodes that warranted more than an assessment, the percent of episodes with only one encounter have ranged between 8 and 10% throughout FY23 which is slightly improved from FY22 (11%).

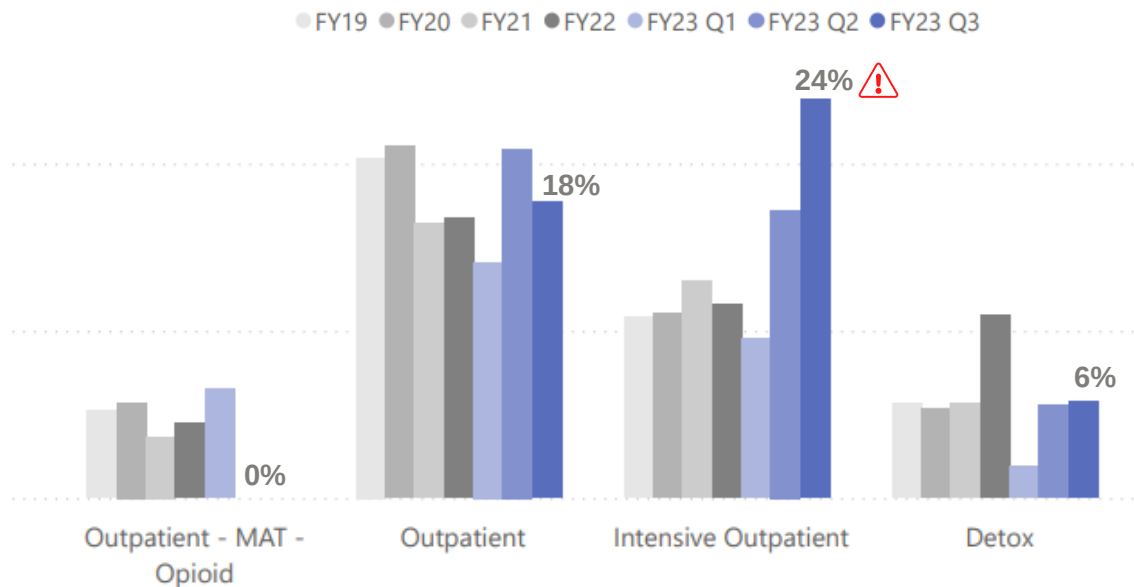
Unfortunately, this rate for IOP has worsened throughout FY23 to a high of 24%. For OP this rate has varied throughout FY23 and exceeded FY22 rates (17%) in Q2 and Q3.

It should be noted that rates for the most recent quarters may be artificially inflated due to delayed data entry for services provided.

Percent of Treatment Episodes with One Encounter*, LRE Region (T.13)



Percent of Treatment Episodes with One Encounter* by Level of Care (T.14)



FY19	5.2%	20.3%	10.8%	5.7%
FY20	5.7%	21.0%	11.0%	5.3%
FY21	3.7%	16.4%	13.0%	5.7%
FY22	4.5%	16.7%	11.6%	10.9%
FY23 Q1	6.5%	14.1%	9.5%	1.9%
FY23 Q2	0.0%	20.9%	17.2%	5.6%
FY23 Q3	0.0%	17.7%	23.8%	5.8%

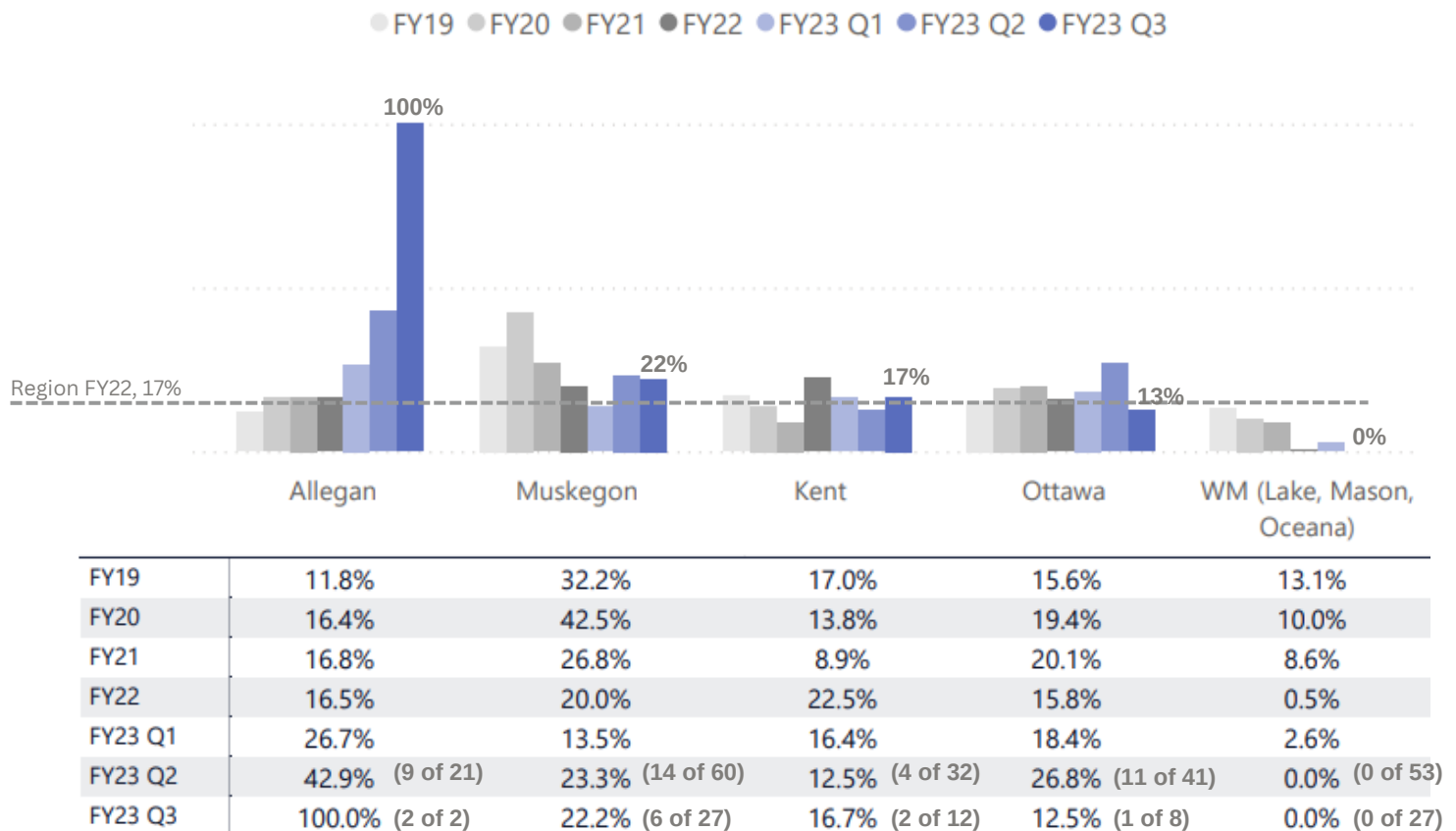
*Treatment episodes with only an assessment that had a discharge reason reported as something other than having 'dropped out' are excluded from analysis.

ENGAGEMENT AND RETENTION

The chart below shows the percentage of outpatient treatment episodes with only one encounter for each CMHSP. Rates vary across CMHSPs and time periods. Those showing substantially higher rates in the most recent quarters may be attributable to incomplete data entry for encounters at the time records were pulled for this review.

Use caution when reviewing the most recent time periods. Delays in entry of service encounters can limit the validity of results.

Percent of Outpatient Treatment Episodes with Only One Encounter* by CMHSP (exc. MAT) (T.14)



Note: the small sample size for Q3 may be due to this analysis only including treatment episodes that warranted more than an assessment, with a discharge date entered, and at least one service encounter entered.

*Treatment episodes with only an assessment that had a discharge reason reported as something other than having 'dropped out' are now excluded from analysis.

CONTINUITY OF CARE AFTER DETOX AND ST RES

Priority: CONTINUATION OF CARE FOLLOWING DETOX/ST RESIDENTIAL, AVG # DAYS

Metric #15. Increase % of discharged detox and ST Res clients successfully transitioned to the next level of care (LOC) within 7 days.

Metric #16. Decrease average # days between discharge and admission to next level of care for detox and for ST residential.

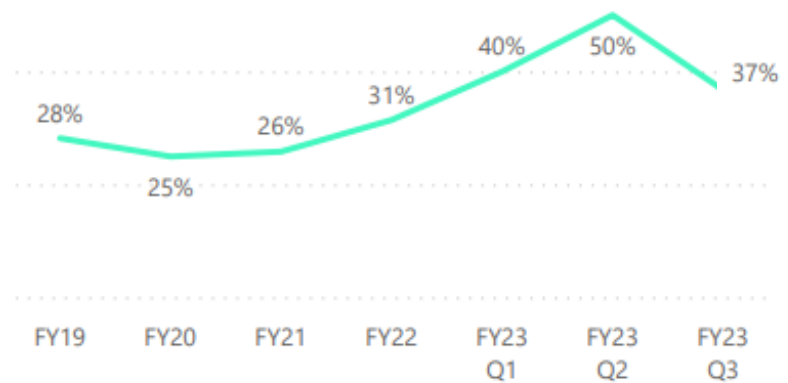
Data Highlights:

Following detox (24-hour), clients typically transition to ST Res at the same service provider. Following discharge from ST Res, it is ideal for clients to engage in services at a lower level of care as soon as possible, with a goal of no more than 7 days between discharge and the subsequent admission.

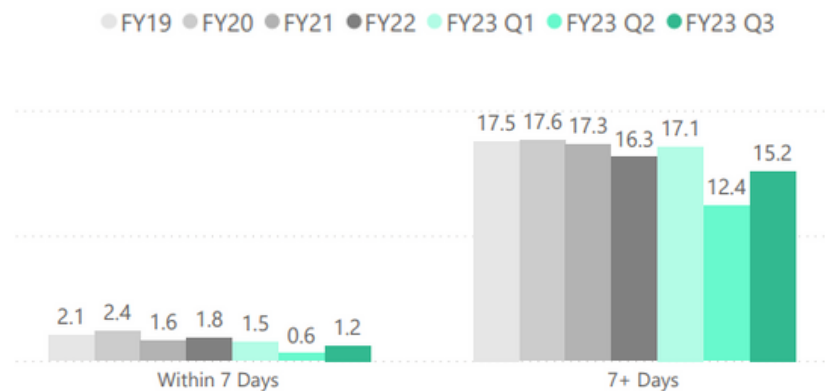
Since FY21 the % of clients admitted to the next LOC within 7 days following ST Res has been improving and achieved a high of 50% in Q2, followed by a decrease in Q3 to 37%.

Among the 63% of clients discharged from ST Res who were not admitted to the next LOC within 7 days, the average time between discharge and readmission to the next LOC improved in recent quarters to a low of 12.4 in Q2 followed by an increase in Q3 to 15.2 days.

Percent of Discharges from ST Res Admitted to Next Treatment Episode w/in 7 days, Region (T.25)



Average # Days between Discharge from ST Res and Admission to Next Level of Care (T.29)



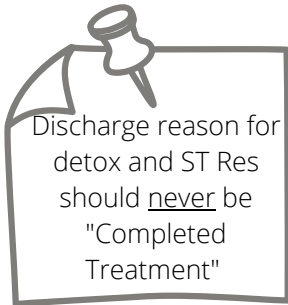
Percent of Discharges from ST Res Admitted to Next Treatment Episode w/in 7 days by CMHSP

County	FY18	FY19	FY20	FY21	FY22	FY23 Q1	FY23 Q2	FY23 Q3
Allegan	44%	43%	32%	10%	33%		50%	0%
Muskegon	37%	12%	21%	25%	36%	13%	20%	33% (2 of 6)
Kent	22%	28%	23%	25%	29%	35%	79%	32% (8 of 25)
Ottawa	28%	41%	24%	46%	36%	50%	44%	36% (4 of 11)
WM (Lake, Mason, Oceana)	27%	33%	30%	26%	33%	57%	33%	67% (4 of 6)

CONTINUITY OF CARE AFTER DETOX AND ST RES

Priority: DISCHARGE REASON FOR DETOX/ST RESIDENTIAL,
(↑ "TRANSFER", ↓ "COMPLETED TREATMENT")

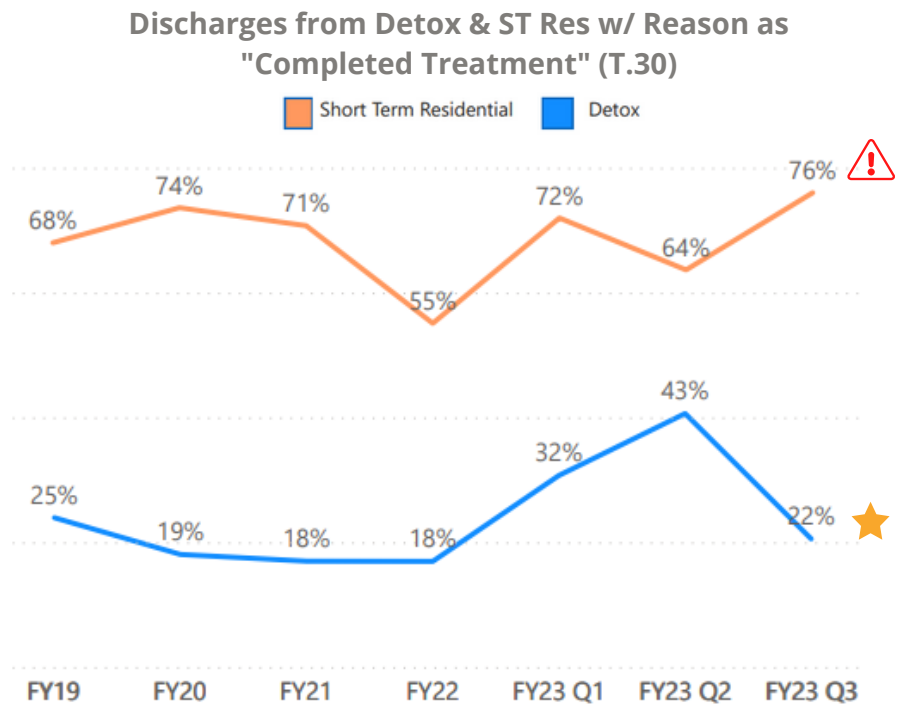
Metric #17. Decrease discharges from detox and/or residential levels of care with discharge reason identified as 'completed treatment'



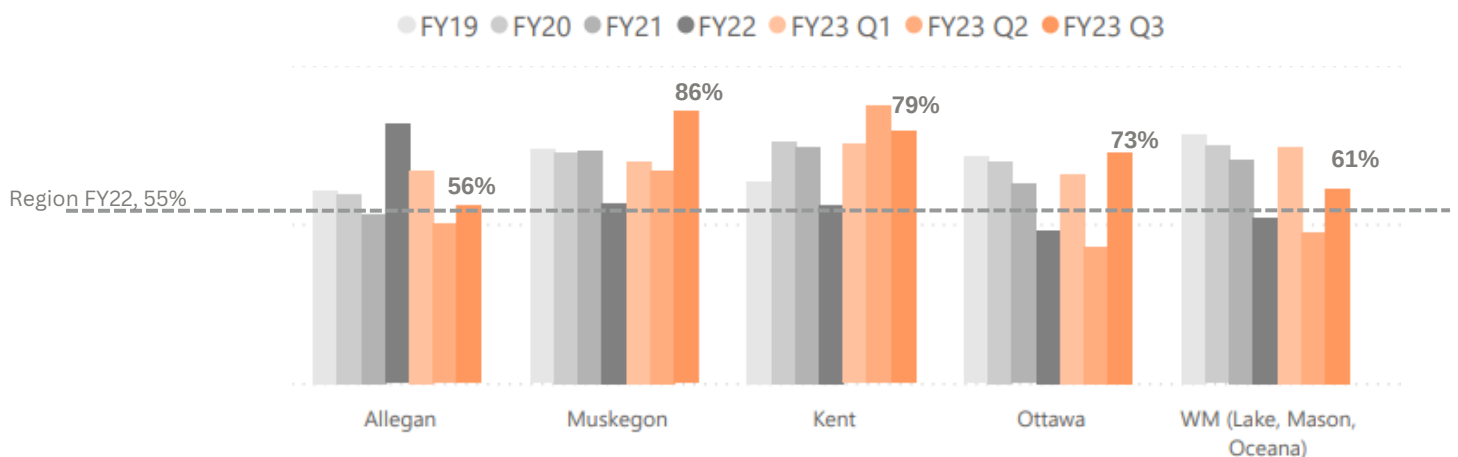
Data Highlights:

The percent of discharges from ST Res with the discharge reason incorrectly reported as 'completed treatment' has worsened throughout FY23 to a high of 76% in Q3.

For detox the % of discharges incorrectly reported as 'completed treatment' worsened during Q1 and Q2 but improved substantially in 3Q to 22%.



Percent of Discharges from ST Res w/ Reason as "Completed Treatment" by CMHSP (T.30)



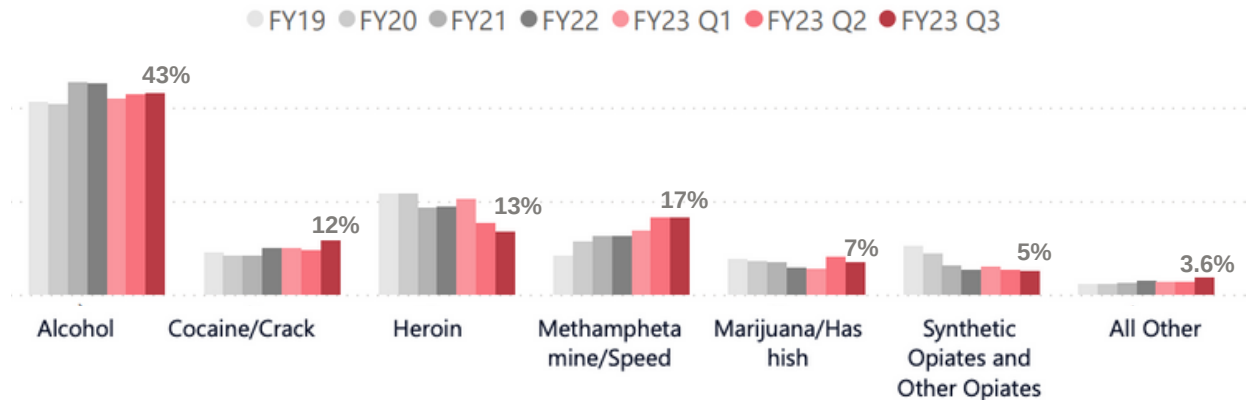
	FY19	FY20	FY21	FY22	FY23 Q1	FY23 Q2	FY23 Q3
Allegan	60.5%	59.5%	53.2%	81.3%	66.7%	50.0%	55.6%
Muskegon	73.2%	72.5%	73.0%	56.6%	69.6%	66.7%	85.4%
Kent	63.3%	75.9%	74.1%	56.1%	75.0%	87.1%	79.1%
Ottawa	70.9%	69.7%	62.6%	47.9%	65.6%	42.9%	72.5%
WM (Lake, Mason, Oceana)	78.0%	74.4%	70.2%	52.0%	74.1%	47.4%	61.1%

Other Data to Monitor: Primary Drug at Admission

LRE Region

Data Highlights: In the LRE region, alcohol remains the most frequently reported primary drug at admission. Throughout FY23, heroin has decreased while methamphetamine increased, replacing heroin as the 2nd most frequently reported primary drug.

Percent of Treatment Admissions by Primary Drug, LRE Region (T.46)

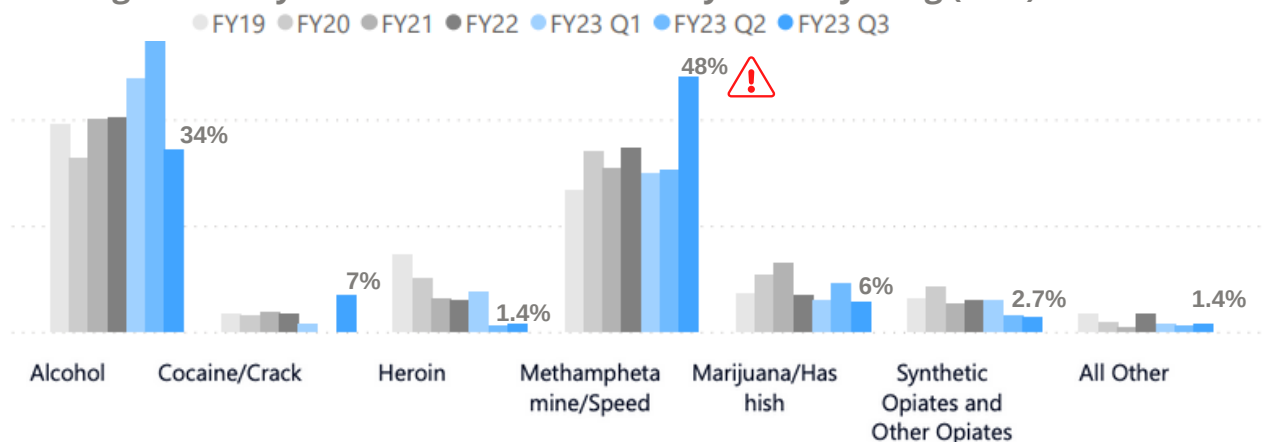


	Alcohol	Cocaine/Crack	Heroin	Methamphetamine/Speed	Marijuana/Hashish	Synthetic Opiates and Other Opiates	All Other
FY19	41.1%	9.0%	21.6%	8.2%	7.6%	10.3%	2.2%
FY20	40.7%	8.3%	21.6%	11.2%	7.2%	8.7%	2.2%
FY21	45.4%	8.2%	18.5%	12.4%	7.0%	6.1%	2.6%
FY22	45.0%	9.8%	18.7%	12.5%	5.7%	5.2%	3.0%
FY23 Q1	41.8%	9.9%	20.5%	13.6%	5.5%	6.0%	2.6%
FY23 Q2	42.8%	9.5%	15.3%	16.4%	8.1%	5.2%	2.7%
FY23 Q3	43.1%	11.6%	13.4%	16.5%	6.8%	5.0%	3.6%

Allegan County

Data Highlights: In Allegan County, alcohol is historically the most frequently reported primary drug of choice at admission, but during 3Q methamphetamine surpassed alcohol with half of all admissions reporting meth as primary. This is substantially higher than region-wide (17%). Admissions have been decreasing for heroin and other opioids and are substantially lower than region-wide rates.

Allegan County - Percent of Admissions by Primary Drug (T.46)



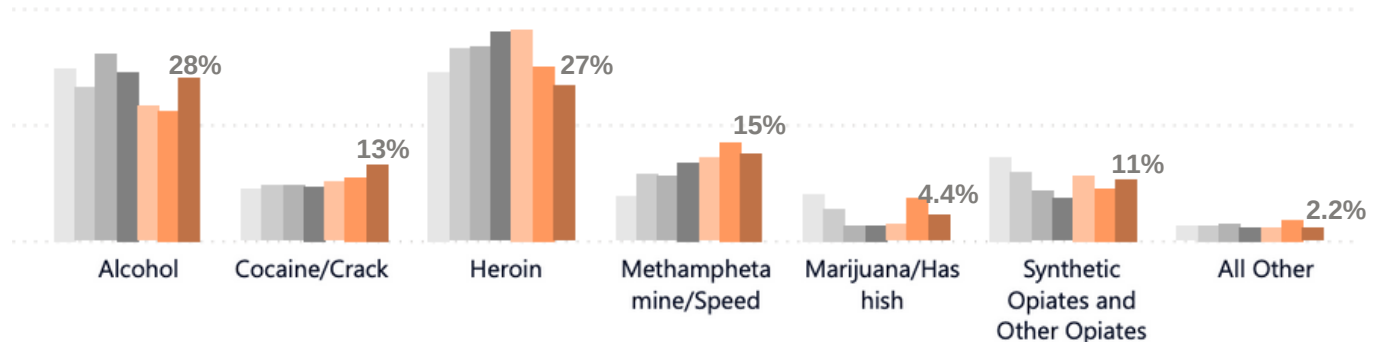
	Alcohol	Cocaine/Crack	Heroin	Methamphetamine/Speed	Marijuana/Hashish	Synthetic Opiates and Other Opiates	All Other
FY19	38.9%	3.3%	14.6%	26.5%	7.2%	6.2%	3.3%
FY20	32.6%	2.9%	10.0%	33.8%	10.5%	8.3%	1.7%
FY21	40.1%	3.6%	6.2%	30.9%	13.1%	5.2%	1.0%
FY22	40.3%	3.3%	5.9%	34.4%	7.0%	5.9%	3.3%
FY23 Q1	47.8%	1.5%	7.5%	29.9%	6.0%	6.0%	1.5%
FY23 Q2	55.6%	1.0%	1.0%	30.3%	9.1%	3.0%	1.0%
FY23 Q3	34.2%	6.8%	1.4%	47.9%	5.5%	2.7%	1.4%

Muskegon County

Data Highlights: In Muskegon County, alcohol and heroin were the most frequently reported drug in Q3. Admissions with heroin as the primary drug of choice have decreased throughout FY23 but remain higher than region-wide (13%).

Muskegon County - Percent of Admissions by Primary Drug (T.46)

● FY19 ● FY20 ● FY21 ● FY22 ● FY23 Q1 ● FY23 Q2 ● FY23 Q3



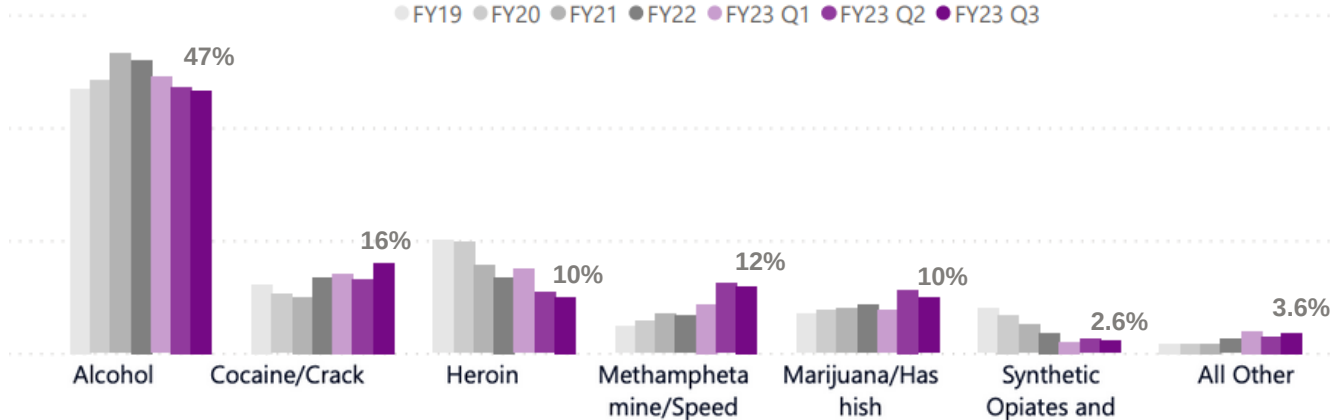
FY19	29.6%	8.8%	29.0%	7.6%	8.0%	14.5%	2.5%
FY20	26.3%	9.5%	33.0%	11.4%	5.4%	11.9%	2.6%
FY21	32.1%	9.5%	33.3%	11.1%	2.6%	8.5%	2.9%
FY22	29.0%	9.3%	36.0%	13.5%	2.7%	7.3%	2.3%
FY23 Q1	23.2%	10.0%	36.3%	14.3%	2.7%	11.2%	2.3%
FY23 Q2	22.4%	10.8%	30.0%	17.0%	7.2%	9.0%	3.6%
FY23 Q3	28.1%	13.1%	26.6%	15.0%	4.4%	10.6%	2.2%

Kent County

Data Highlights: In Kent County, admissions for alcohol continue to surpass those for other substances. Admissions for heroin and other opioids have been decreasing throughout FY23 while admissions for methamphetamine have increased.

Kent County - Percent of Admissions by Primary Drug (T.46)

● FY19 ● FY20 ● FY21 ● FY22 ● FY23 Q1 ● FY23 Q2 ● FY23 Q3



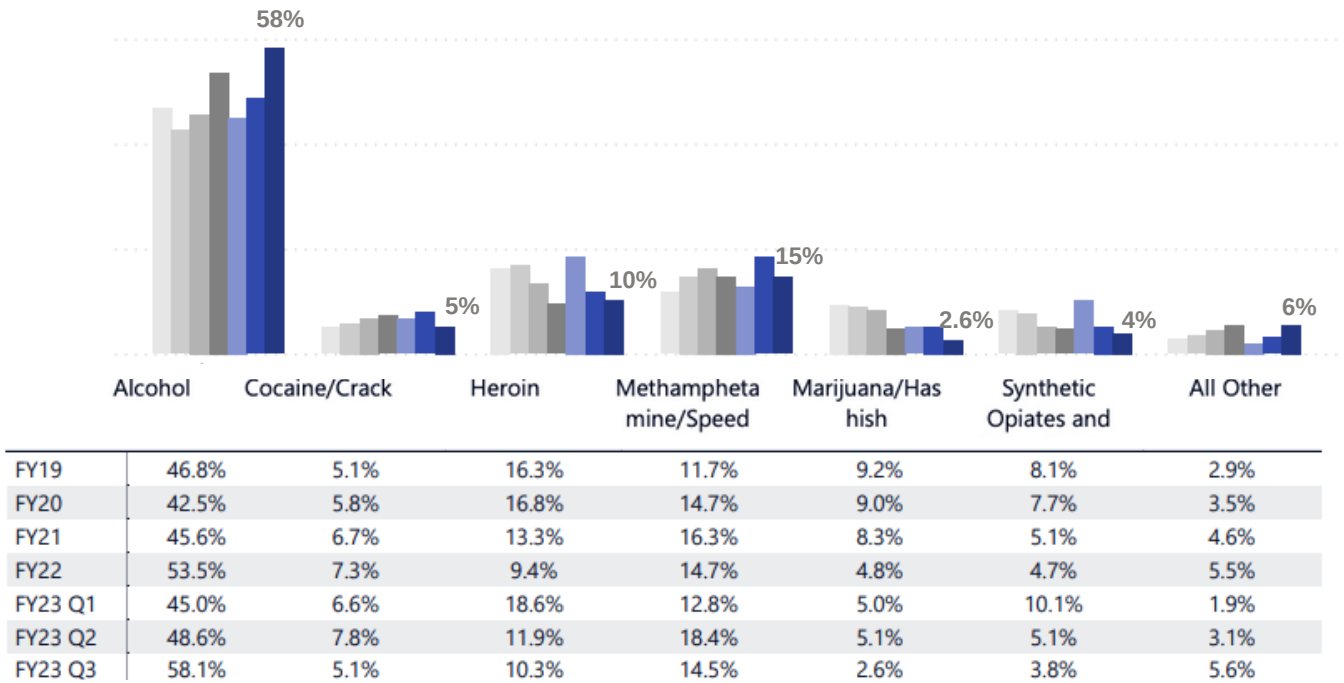
FY20	48.3%	10.4%	19.6%	5.6%	7.6%	6.7%	1.7%
FY21	53.1%	10.0%	15.4%	6.9%	7.9%	5.0%	1.7%
FY22	51.9%	13.5%	13.4%	6.6%	8.4%	3.6%	2.5%
FY23 Q1	49.0%	14.1%	14.9%	8.6%	7.5%	2.0%	3.9%
FY23 Q2	47.1%	13.1%	10.8%	12.4%	11.2%	2.4%	3.0%
FY23 Q3	46.5%	16.0%	10.0%	11.8%	9.8%	2.2%	3.6%

Ottawa County

Data Highlights: Alcohol remains the most frequently reported primary drug at admission followed by methamphetamine. Admissions for heroin and other opioids have decreased throughout FY23.

Ottawa County - Percent of Admissions by Primary Drug (T.46)

● FY19 ● FY20 ● FY21 ● FY22 ● FY23 Q1 ● FY23 Q2 ● FY23 Q3

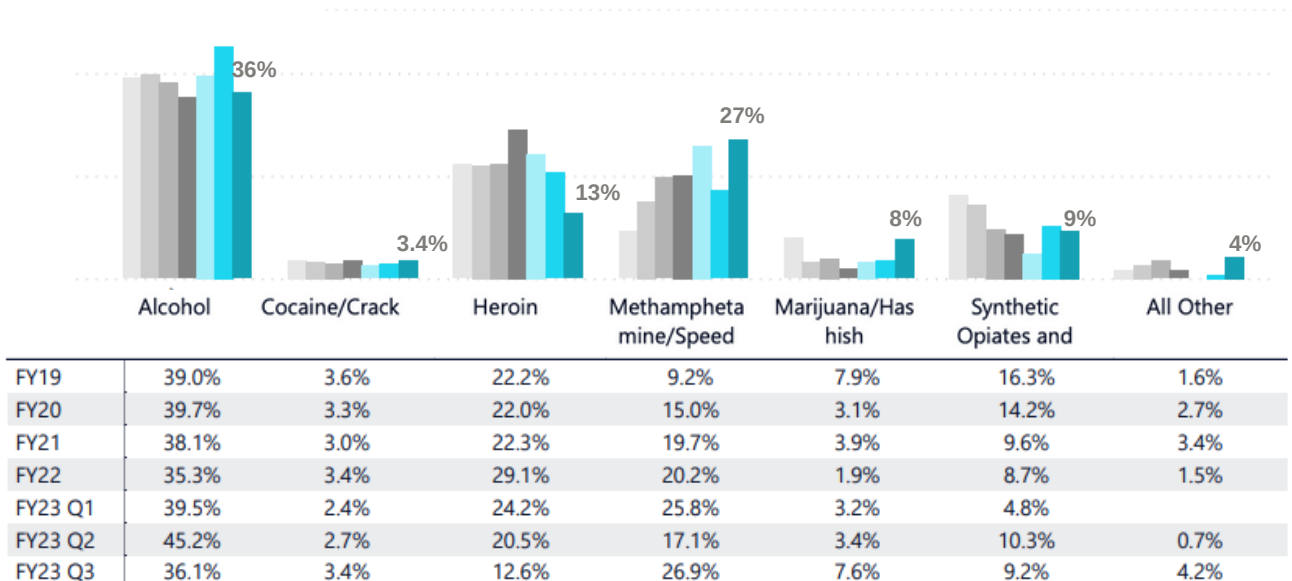


West Michigan Counties

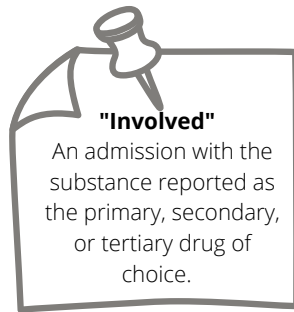
Data Highlights: Alcohol is the most frequently reported primary drug of choice at admission followed by methamphetamine. Admissions for heroin have decreased throughout FY23 to a low of 12.6% in Q3.

West MI - Percent of Admissions by Primary Drug (T.46)

● FY19 ● FY20 ● FY21 ● FY22 ● FY23 Q1 ● FY23 Q2 ● FY23 Q3



Other Data to Monitor : METHAMPHETAMINE-INVOLVED ADMISSIONS



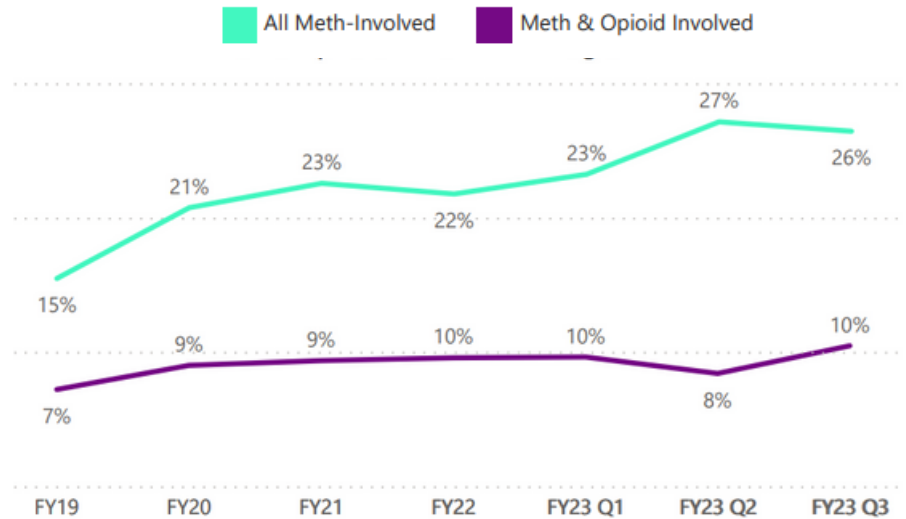
Data Highlights:

MA-involved admissions have increased during FY23, with 1-in-4 admissions reporting MA as a drug of choice. Admissions involving both an opioid and MA have remained relatively steady at approximately 1-in-10 admissions.

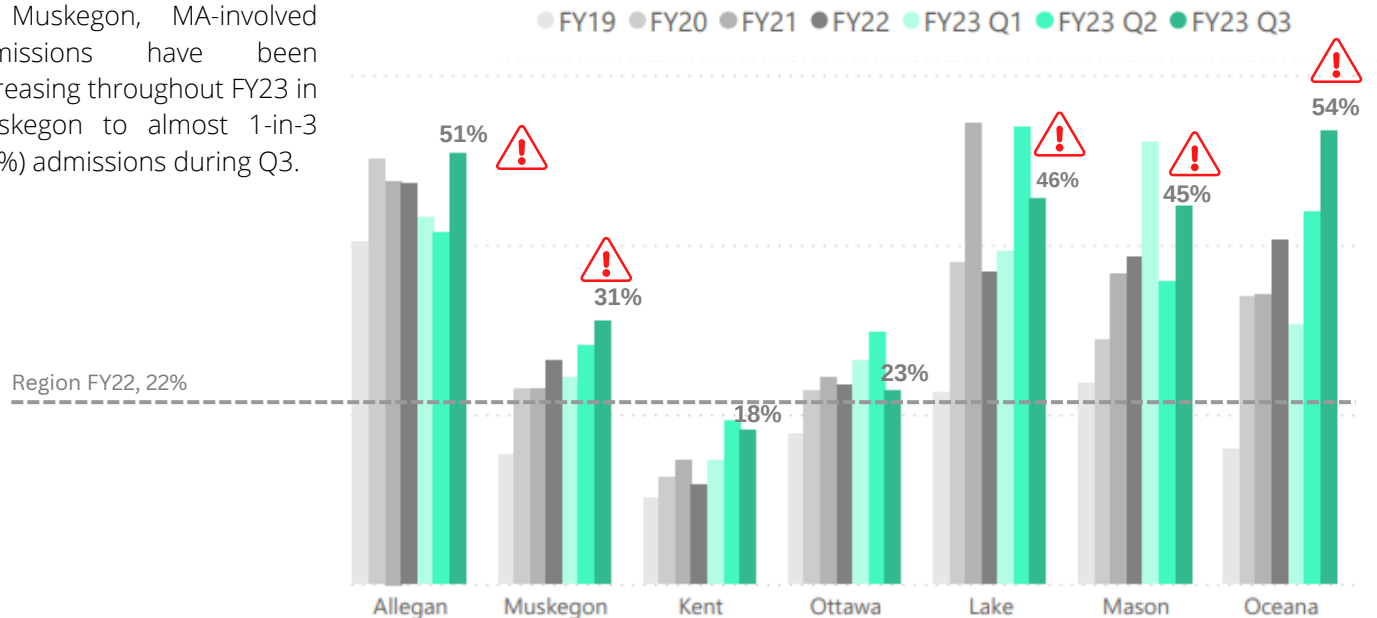
During 3Q, MA-involved admissions were highest in Allegan and West MI.

In Muskegon, MA-involved admissions have been increasing throughout FY23 in Muskegon to almost 1-in-3 (31%) admissions during Q3.

Percent of Admissions that were Methamphetamine (MA)-involved, LRE Region (T.47)



Percent of Admissions That Were MA-Involved by County (T.47)



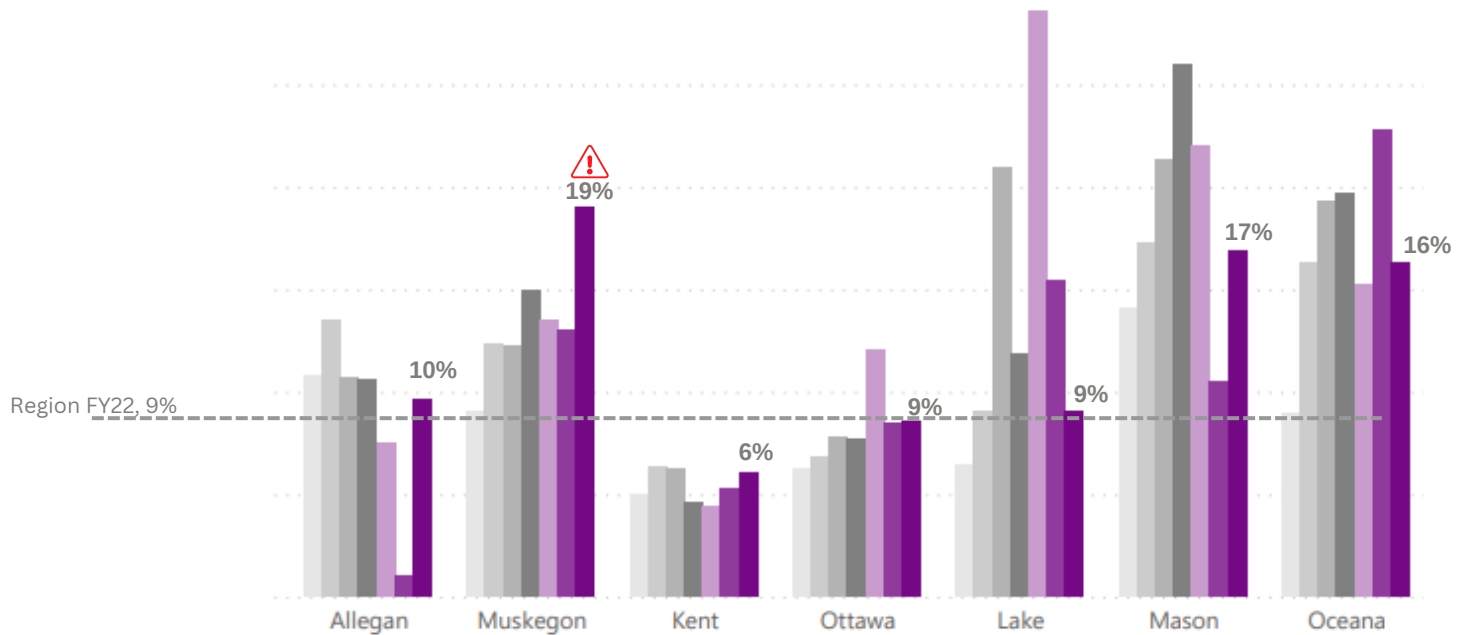
	Allegan	Muskegon	Kent	Ottawa	Lake	Mason	Oceana
FY19	40.3%	15.2%	10.2%	17.7%	22.6%	23.6%	15.9%
FY20	50.0%	22.9%	12.5%	22.8%	37.9%	28.8%	33.8%
FY21	47.5%	22.9%	14.5%	24.4%	54.3%	36.4%	34.2%
FY22	47.3%	26.4%	11.7%	23.4%	36.8%	38.4%	40.5%
FY23 Q1	43.3%	24.3%	14.5%	26.4%	39.3%	52.0%	30.4%
FY23 Q2	41.4%	28.2%	19.2%	29.6%	53.8%	35.5%	43.9%
FY23 Q3	50.7%	31.0%	18.0%	22.6%	45.5%	44.6%	53.5%

Data Highlights:

Admissions involving both an opioid and methamphetamine increased substantially in 3Q for Muskegon.

Percent of Admissions that Involved Both an Opioid & MA by County (T.48)

● FY19 ● FY20 ● FY21 ● FY22 ● FY23 Q1 ● FY23 Q2 ● FY23 Q3



FY19	10.7%	9.1%	4.9%	6.3%	6.5%	14.0%	9.0%
FY20	13.5%	12.3%	6.3%	6.9%	9.1%	17.3%	16.3%
FY21	10.7%	12.2%	6.2%	7.8%	21.0%	21.3%	19.3%
FY22	10.6%	14.9%	4.6%	7.7%	11.8%	26.0%	19.7%
FY23 Q1	7.5%	13.5%	4.4%	12.0%	28.6%	22.0%	15.2%
FY23 Q2	1.0%	13.0%	5.2%	8.5%	15.4%	10.5%	22.8%
FY23 Q3	9.6%	19.0%	6.0%	8.5%	9.1%	16.9%	16.3%

Appendix: Data Parameters

The following provide data parameters used for analysis for all data referenced throughout this report.

Pg. 4 Percent of Admissions by Legal Status at Admission (T.1)

- County = If no data provided in BHTEDS - falls under Out of Region
- BHTEDS Fields Used: Service Start Date, County of Residence, Corrections Related Status

Pg. 5 Average Time to Service (days) for Medication Assisted Treatment (MAT) (T.4)

- County = If no data provided in BHTEDS - falls under Out of Region
- BHTEDS Fields Used: Service Start Date, County of Residence, Time to Treatment, State Provider Identifier, Type of Treatment Service Setting and Medication-assisted Opioid Therapy
- *Time to Service = Days between request for service and date of first service received.
- **MAT is based on Admission Opioid Therapy = Yes and LOC = Outpatient
- Excludes those Admissions where Time to Treatment was not provided

Pg. 6 Average Time to Services for Clients with IVDU by Service Category (T.5)

- County = If no data provided in BHTEDS - falls under Out of Region
- BHTEDS Fields Used: Service Start Date, County of Residence, Time to Treatment, Type of Treatment Service Setting, Primary and Secondary and Tertiary Route of Admission, Substance Use Diagnosis
- *Time to Service = Days between request for service and date of first service received.
- **IVDU = Primary, Secondary or Tertiary Route of Admission = Injection
- Excludes those Admissions where Time to Treatment was not provided.

Pg. 8 Percent of Clients with Co-Occurring Disorders that Received Integrated Treatment (T.8)

- County = If no data provided in BHTEDS - falls under Out of Region
- BHTEDS Fields Used: Service Update/End Date, County of Residence, Co-occurring Disorder/Integrated Substance Use and Mental Health Treatment
- *Integrated services identified in discharge record for clients reports as "Client with co-occurring substance use and mental health problems is being treated with an integrated treatment plan by an integrated team."
- Only includes those episodes with a Discharge Date

Pg. 9 Percent of Treatment Episodes with One Encounter* (T.13)

- Data Source: BHTEDS and LRE Encounters
- Data only includes those episodes with a Discharge Date
- Data only includes those with a Service in the Encounter Database
- Excluded Services Codes: H0020 (Methadone Dosing) and S9976 (Room and Board)
- Excludes episodes where the only service code is H0001 and has a Discharge Reason of Completed Treatment, Death or Transferring to Another
- Program or facility/Completed Level of Care
- *MAT is based on BHTEDS Admission Opioid Therapy= Yes and LOC = Outpatient

Pgs. 9-10 Percent of Treatment Episodes with One Encounter* by Level of Care (T.14)

- Data Source: BHTEDS and LRE Encounters
- Data only includes those episodes with a Discharge Date
- Data only includes those with a Service in the Encounter Database
- Excluded Services Codes: H0020 (Methadone Dosing) and S9976 (Room and Board)
- Excludes episodes where the only service code is H0001 and has a Discharge Reason of Completed Treatment, Death or Transferring to Another Program or facility/Completed Level of Care
- *MAT is based on BHTEDS Admission Opioid Therapy = Yes and LOC = Outpatient

- Pg. 11 Percent of Discharges from ST Res Admitted to Next Treatment Episode w/in 7 days (T.25)**
- County = If no data provided in BHTEDS - falls under Out of Region
 - BHTEDS Fields Used: Service Start Date, Service Update/End Date, County of Residence, and Type of Treatment Service Setting
 - If Admit Setting did not equal Discharge Setting, assumption made that readmit days is 0.
 - Only includes those episodes with a Discharge Date
 - Excludes discharges from ST Res that were admitted to 24-hour detox.
- Pg. 11 Average # Days between Discharge from ST Res and Admission to Next Level of Care (T.29)**
- County = If no data provided in BHTEDS - falls under Out of Region
 - BHTEDS Fields Used: Service Start Date, Service Update/End Date, County of Residence, and Type of Treatment Service Setting
 - Only includes those episodes with a Discharge Date in the Reported FY
 - Only includes those episodes with a Readmit within 30 days of Discharge
 - Excludes those Readmits with a new Admission Date that is prior to the Discharge Date
 - If Admit Setting did not equal Discharge Setting, assumption made that readmit days is 0
- Pg. 12 Discharges from Detox & ST Res w/ Reason as "Completed Treatment" (T.30)**
- County = If no data provided in BHTEDS - falls under Out of Region
 - BHTEDS Fields Used: Service Update/End Date, County of Residence, Reason for Service Update/End and Type of Treatment Service Setting at Discharge
 - *Detox Includes both Ambulatory - Detox and Detox 24-hr free-standing residential
 - Excludes those Discharges where Time to Treatment was not provided.
- Pgs. 13-14 Percent of Treatment Admissions by Primary Drug (T.46)**
- County = If no data provided in BHTEDS - falls under Out of Region
 - BHTEDS Fields Used: County of Residence, Service Start Date, Primary, Secondary and Tertiary Substance Use Problem
- Pg. 16 Percent of Admissions that were Methamphetamine (MA)-involved (T.47)**
- County = If no data provided in BHTEDS - falls under Out of Region
 - BHTEDS Fields Used: County of Residence, Service Start Date,
 - Primary, Secondary and Tertiary Substance Use Problem
 - *Involved includes admission with MA/Speed identified as primary, secondary or tertiary drug of choice.
 - **Primary includes admission with MA/Speed identified as the primary drug of choice.
 - ***Non-Primary includes admission with MA/Speed identified as secondary or tertiary drug of choice.
- Pg. 17 Percent of Admissions that Involved Both an Opioid & MA by County (T.48)**
- County = If no data provided in BHTEDS - falls under Out of Region
 - BHTEDS Fields Used: Service Start Date, County of Residence, Primary, Secondary and Tertiary Substance Use Problem
 - Includes all Admissions with Both Methamphetamine/Speed and an Opioid (Heroin, Methadone, Synthetic Opioid) identified within Primary, Secondary or Tertiary Drug of Choice response.