

September 2022



Substance Use Disorder Treatment Evaluation
Monitoring Report

Quarterly Update:
3rd Quarter FY 2022

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 FY22.

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 8/24/22 for BH TEDS and 9/7/22 for encounters. Any data entered after these dates will be reflected in subsequent reports. For details on data parameters, refer to the corresponding detailed tables provided separately.

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




OUD - 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, 39% of admissions had criminal justice involvement in 3Q w/ the majority 'on probation' which increased to 24% in 3Q. 'On probation' admissions continue to be highest in Allegan (37%) and have been increasing in Kent and Mason counties.	
<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 FY22, with county averages in 3Q ranged from a low of 1 in Muskegon to a high of 14 in Mason. However, rates may be artificially exaggerated due to use of waiting lists.	
<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 region's wait time improved in 3Q to 5.9 days. Lower than in FY21 or previous quarters but not achieving the goal of 3 days or less. TTS in 3Q ranged from lows of 3.7 in Muskegon and 4.3 in Kent, to a high of 28.8 in Allegan. LT Res (14.4) and outpatient (7.1) service categories had the longest delays.	

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 was improving during Q1 and Q2 achieving a high of 15% but worsened in 3Q to 10%. Between 2Q and 3Q this metric worsened for each CMHSP except Ottawa which had the highest rate in the region at 17%	
<u>One Encounter:</u> #11. ↓ % of treatment episodes with no 2nd visit*	pg 9	Episodes w/ only one encounter have been worsening in FY22 reaching a high of 17% in 3Q. However, more recent time periods may be artificially high due to incomplete data entry for encounters. OP and IOP consistently have the highest rates.	

*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> #16. ↓ avg # days between discharge and admission to next LOC following ST Res and #15. ↑ % of clients discharged from ST Res admitted to the next LOC) w/in 7 days	pg 11	During 3Q, 51% of clients were admitted to the next LOC w/in 7 days following ST Res, improving throughout FY22 and substantially better than in FY21 (27%). Admissions w/in 7 days varied by CMHSP; Ottawa had the highest rate at 83%, followed by West MI at 63%. Clients not admitted w/in 7 days averaged a delay of 16.5 days, slightly lower than in Q1 (18.8) and Q2 (18.2).	 
<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 decreased substantially in Q3 to achieve the lowest rates yet for both ST Res (51%) and detox (6%). A corresponding ↑ in discharges for "Transferring to another program/ Completed level of care" is encouraging.	

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 decreased in most CMHSPs while synth/other opioids have been increasing in Allegan and Muskegon.
<u>Methamphetamine (MA) Involved Admissions</u>	pg 16	In FY21, almost 1-in-4 admissions were MA involved, and have remained relatively stable during FY22. MA involved admissions have been increasing in Muskegon, Kent, and West MI Counties. Region-wide the rate of admissions involving both MA and an opioid remained stable between 9 and 10%. However, rates were substantially higher in Muskegon and West MI counties.

TREATMENT ACCESS

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.

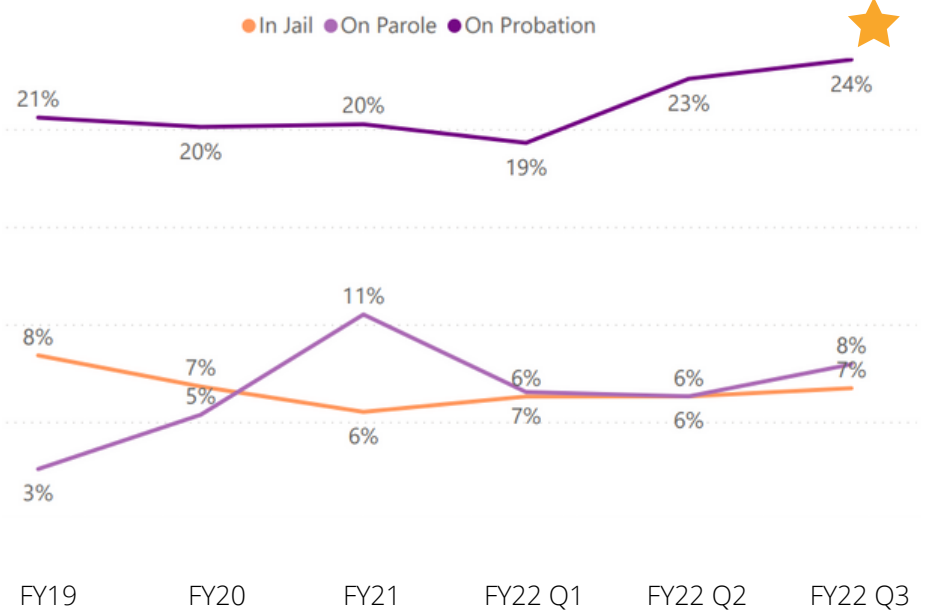
Data Highlights:

Region-wide, 39% 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 identified as 'on parole or probation' continue to be higher in Allegan and have been increasing in Kent, Muskegon, and Mason counties.

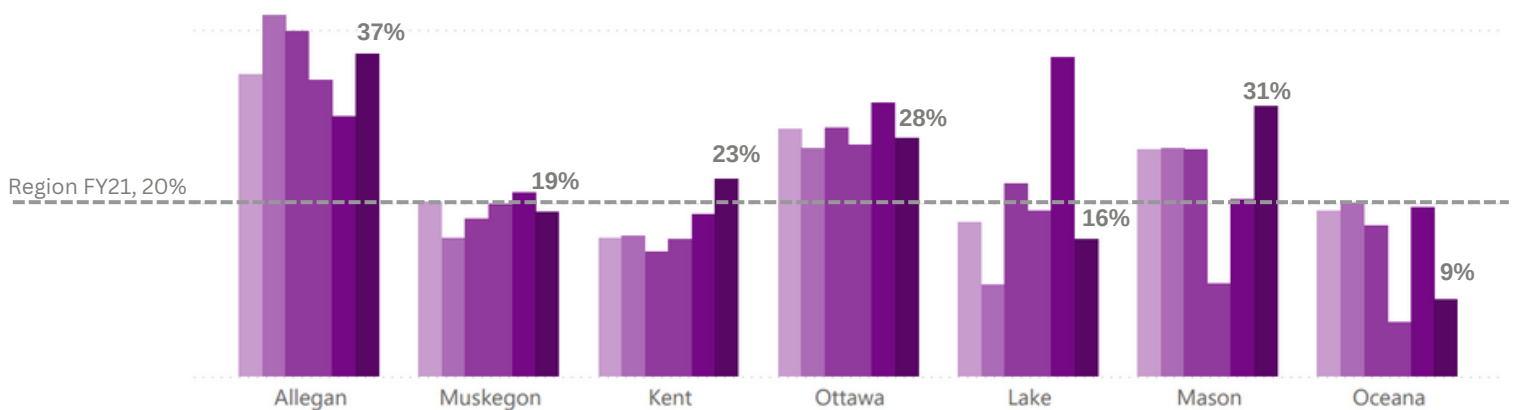
Percent of Admissions by Legal Status at Admission, LRE Region (T.1)



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

FY19 FY20 FY21 FY22 Q1 FY22 Q2 FY22 Q3

NEW



FY19	34.8%	20.1%	16.0%	28.5%	17.7%	26.1%	19.1%
FY20	41.6%	16.0%	16.2%	26.3%	10.6%	26.3%	20.0%
FY21	39.8%	18.1%	14.4%	28.7%	22.2%	26.1%	17.4%
FY22 Q1	34.2%	19.8%	15.8%	26.7%	19.0%	10.7%	6.3%
FY22 Q2	30.0%	21.2%	18.7%	31.5%	36.8%	20.3%	19.5%
FY22 Q3	37.2%	18.9%	22.8%	27.5%	15.8%	31.1%	8.9%

TREATMENT ACCESS

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 5.8 days, increasing slightly from previous quarters.

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 has been substantially shorter.

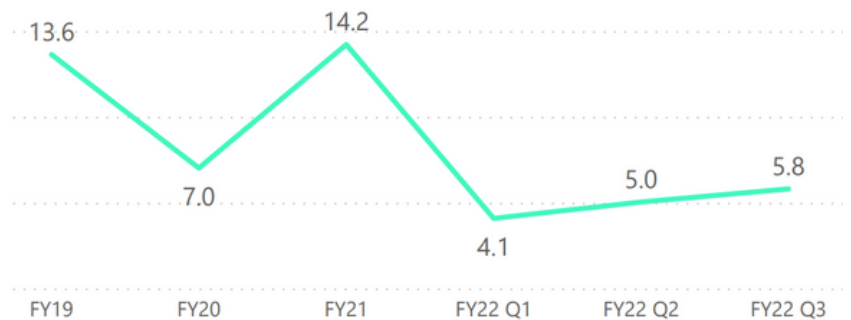
Variation is primarily due to intermittent use of a waitlist in Muskegon County which artificially suppresses TTS while in use. Then, once the provider begins admitting individuals from the waitlist, it results in substantial upswings for TTS as their wait is recorded in the admission record.

During 3Q TTS for MAT worsened in Kent, Mason, and Oceana counties.

TTS:

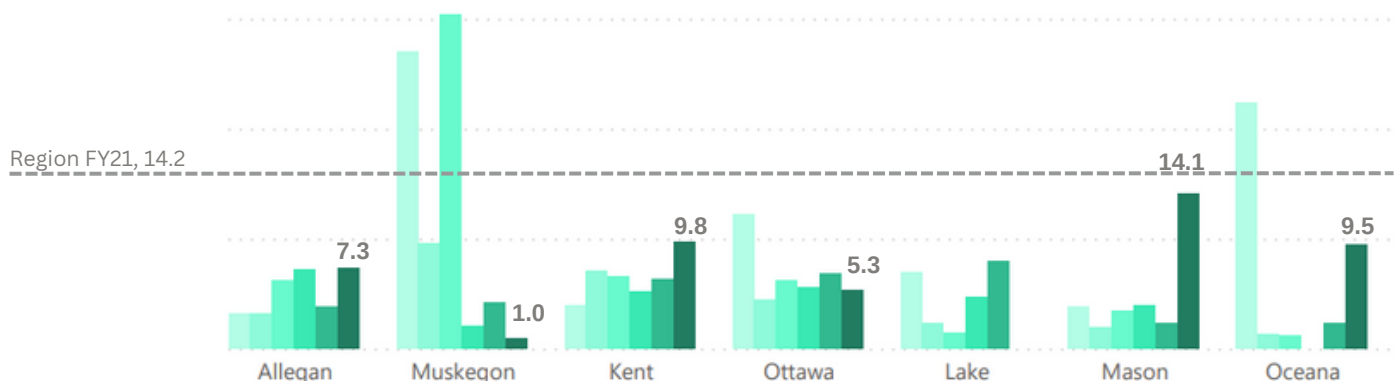
Time to Service is the number of days between the request for service and date of first service received.

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)

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



	FY19	FY20	FY21	FY22 Q1	FY22 Q2	FY22 Q3
Allegan	3.2	3.3	6.2	7.3	3.8	7.3
Muskegon	27.0	9.6	30.4	2.1	4.1	1.0
Kent	4.0	7.1	6.5	5.1	6.3	9.8
Ottawa	12.2	4.4	6.2	5.5	6.9	5.3
Lake	7.0	2.3	1.4	4.7	8.0	0.0
Mason	3.8	2.0	3.5	4.0	2.3	14.1
Oceana	22.4	1.3	1.2	0.0	2.3	9.5

TREATMENT ACCESS

Priority: PERSONS WITH INTRAVENOUS DRUG USE (IVDU)

NEW

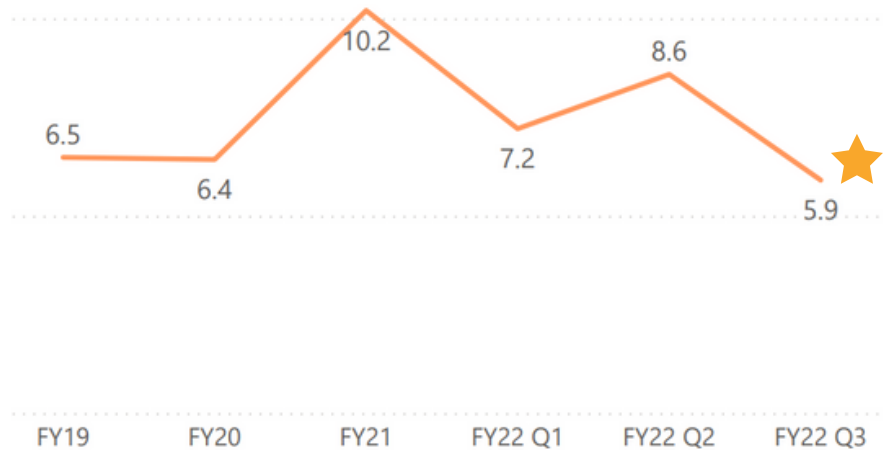
Metric #6. Maintain an average wait time of < 3 days for persons with IVDU to service.

Data Highlights:

Among individuals with IVDU, the average time to service was 5.9 days in Q3; lower than in FY21 or previous quarters but not achieving the goal of 3 days or less.

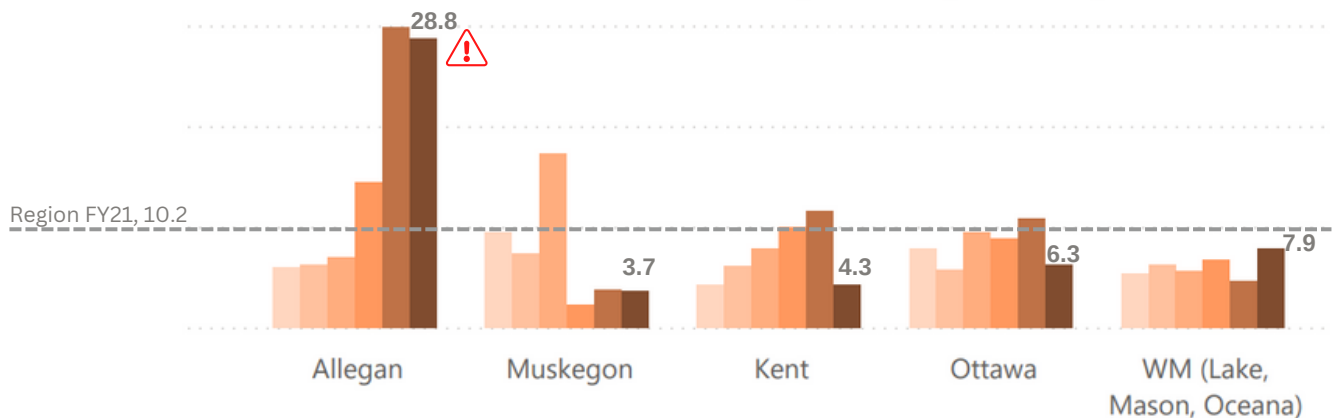
Across the region TTS for clients with IVDU ranged from lows of 3.7 in Muskegon and 4.3 in Kent, to a high of 28.8 in Allegan. However, it should be noted that Allegan only had 8 clients w/ IVDU admitted during this period.

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



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

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



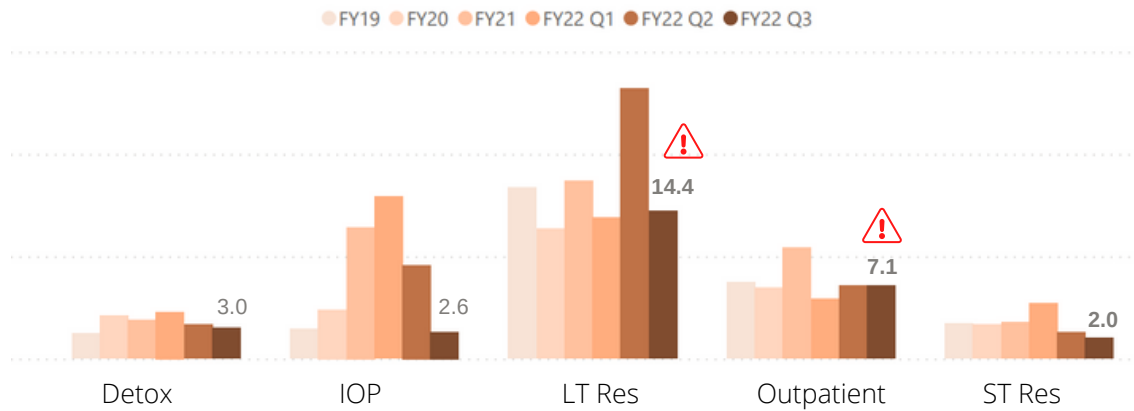
	Allegan	Muskegon	Kent	Ottawa	WM (Lake, Mason, Oceana)
FY19	6.0	9.5	4.2	7.9	5.4
FY20	6.3	7.4	6.2	5.7	6.3
FY21	7.1	17.3	7.8	9.4	5.7
FY22 Q1	14.5	2.3	10.0	8.9	6.8
FY22 Q2	29.9	3.7	11.6	10.9	4.7
FY22 Q3	28.8 (N=8)	3.7 (N=76)	4.3(N=73)	6.3 (N=23)	7.9 (N=40)

TREATMENT ACCESS

NEW

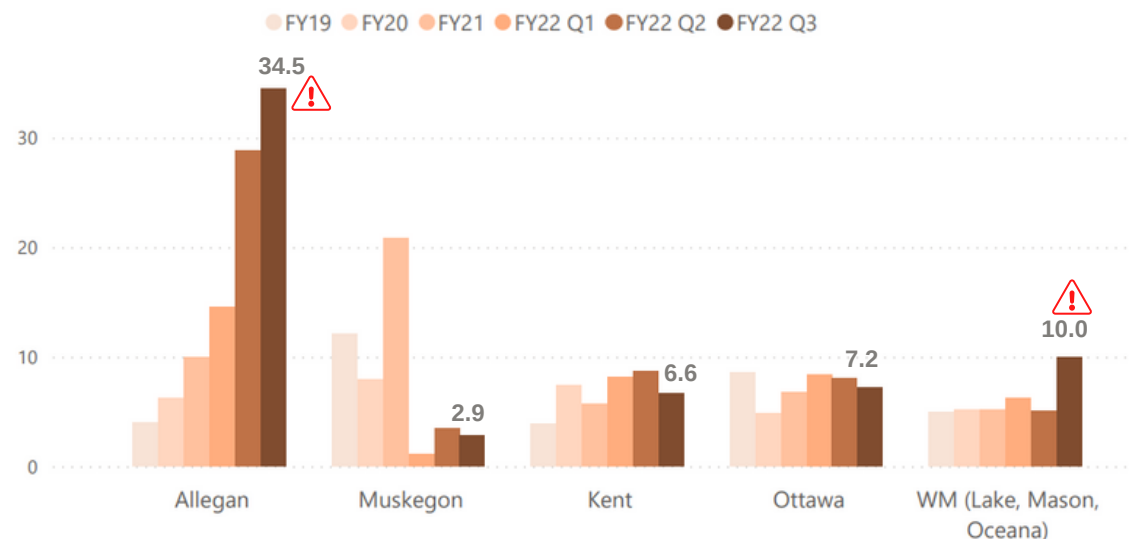
When TTS for clients with IVDU is broken out by service category, LT Res had the longest delay in 3Q at 14 days, followed by outpatient at 7 days. However, it should be noted that the sample size was very small for LT Res (N=12).

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)

TTS for clients with IVDU to outpatient services ranged from a high of 34.5 in Allegan to a low of 2.9 in Muskegon.



FY19	4.0	12.1	3.9	8.6	4.9
FY20	6.2	7.9	7.4	4.9	5.1
FY21	10.0	20.8	5.7	6.8	5.2
FY22 Q1	14.5	1.2	8.1	8.3	6.3
FY22 Q2	28.9	3.5	8.7	8.1	5.1
FY22 Q3	34.5 (N=6)	2.9 (N=55)	6.6 (N=31)	7.2 (N=13)	10.0 (N=25)

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'.

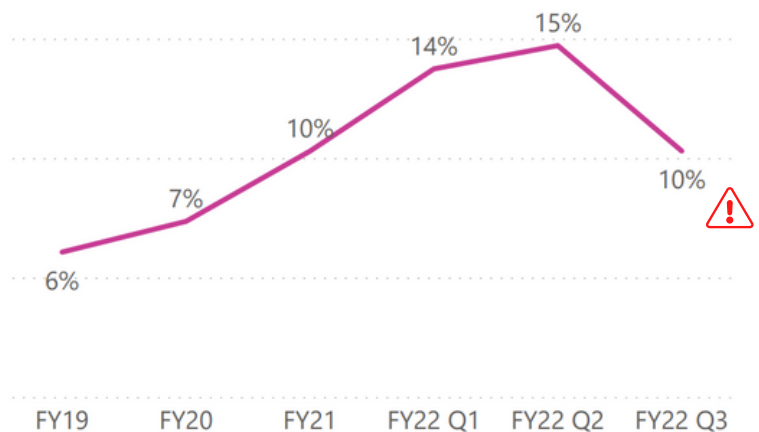
Data Highlights:

The percentage of clients with COD that received integrated treatment has remained relatively low but has been increasing during FY22 with a high of 15% in 2Q but worsened to 10% in 3Q.

Since FY19, all counties have achieved an improved rate of clients with COD receiving integrated treatment.

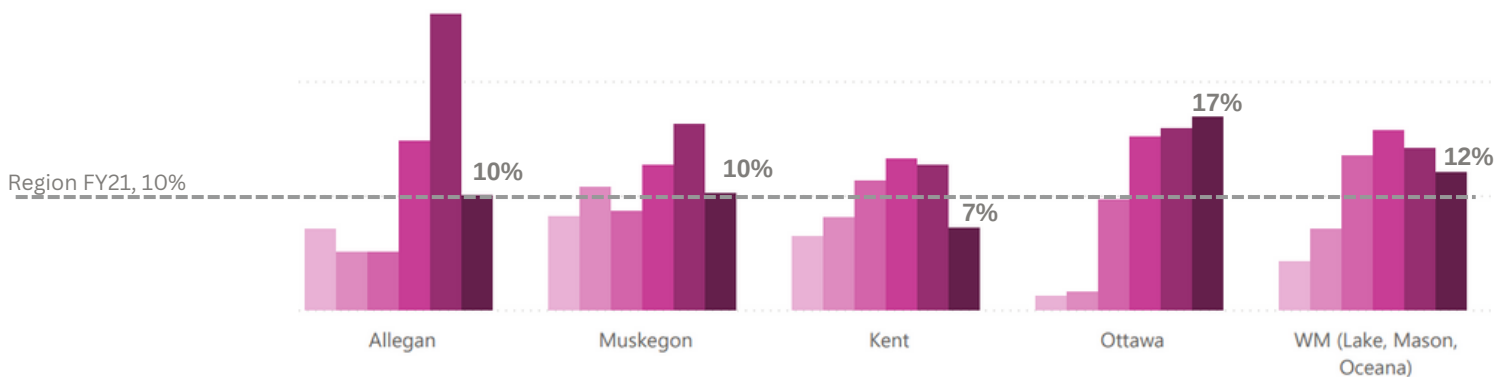
During 3Q, every CMHSP but Ottawa saw a decrease from the previous quarter.

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 Q1 ● FY22 Q2 ● FY22 Q3



	FY19	FY20	FY21	FY22 Q1	FY22 Q2	FY22 Q3
Allegan	7.1%	5.1%	5.1%	14.8%	25.9%	10.0%
Muskegon	8.2%	10.8%	8.7%	12.7%	16.3%	10.2%
Kent	6.5%	8.1%	11.3%	13.2%	12.7%	7.2%
Ottawa	1.3%	1.6%	9.7%	15.2%	15.9%	16.9%
WM (Lake, Mason, Oceana)	4.2%	7.1%	13.5%	15.7%	14.2%	12.0%

ENGAGEMENT AND RETENTION

Priority: INCREASED TREATMENT ENCOUNTERS

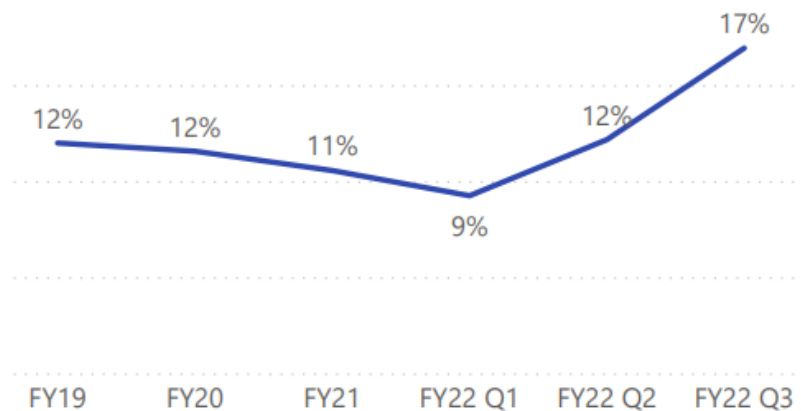
Metric #11. Decrease % of treatment episodes with no 2nd visit.

Data Highlights:

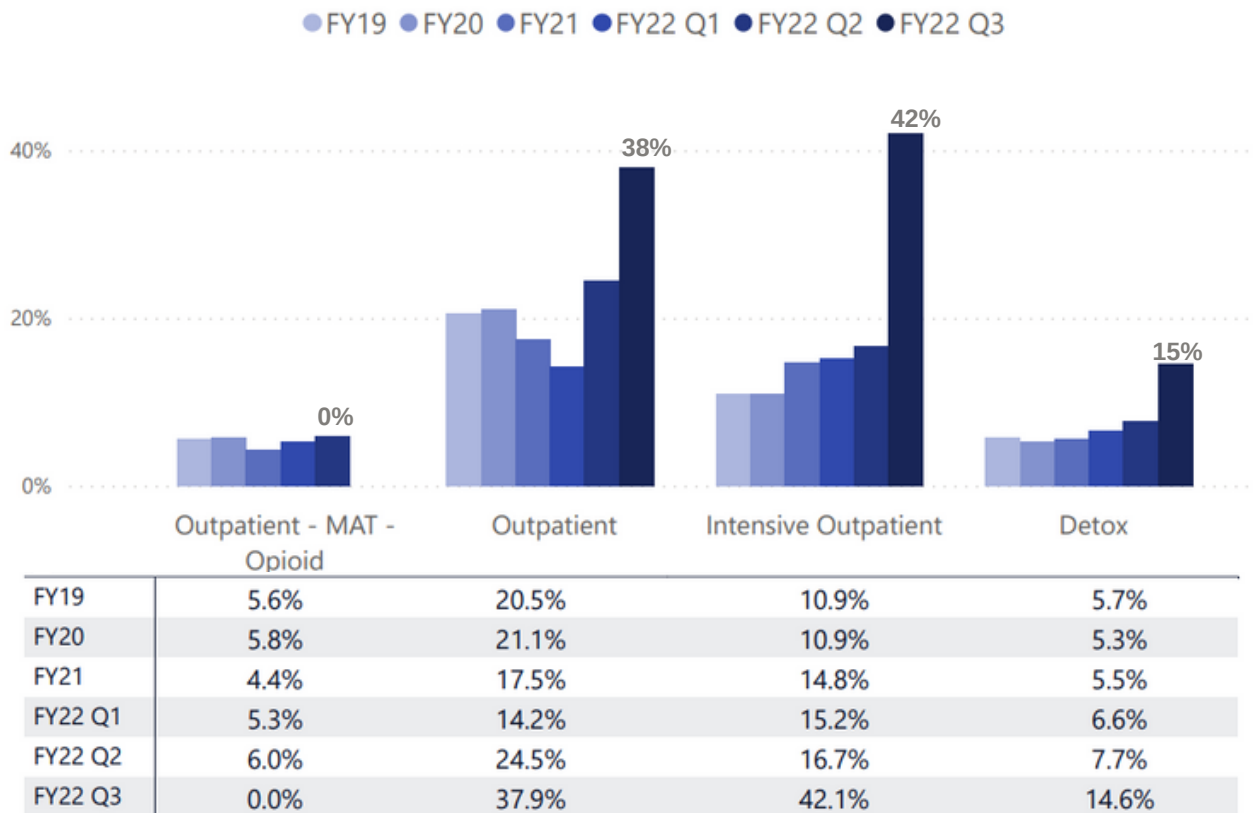
For treatment episodes that warranted more than an assessment, the percent of episodes with only one encounter has been worsening throughout FY22 reaching a high of 17% in 3Q. However, the more recent time periods may be artificially high due to incomplete data entry for encounters.

Outpatient and Intensive Outpatient levels of care had the highest rate of episodes with only one encounter as shown in the chart below. Please note that 3Q rates may be artificially inflated due to incomplete data entry.

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



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

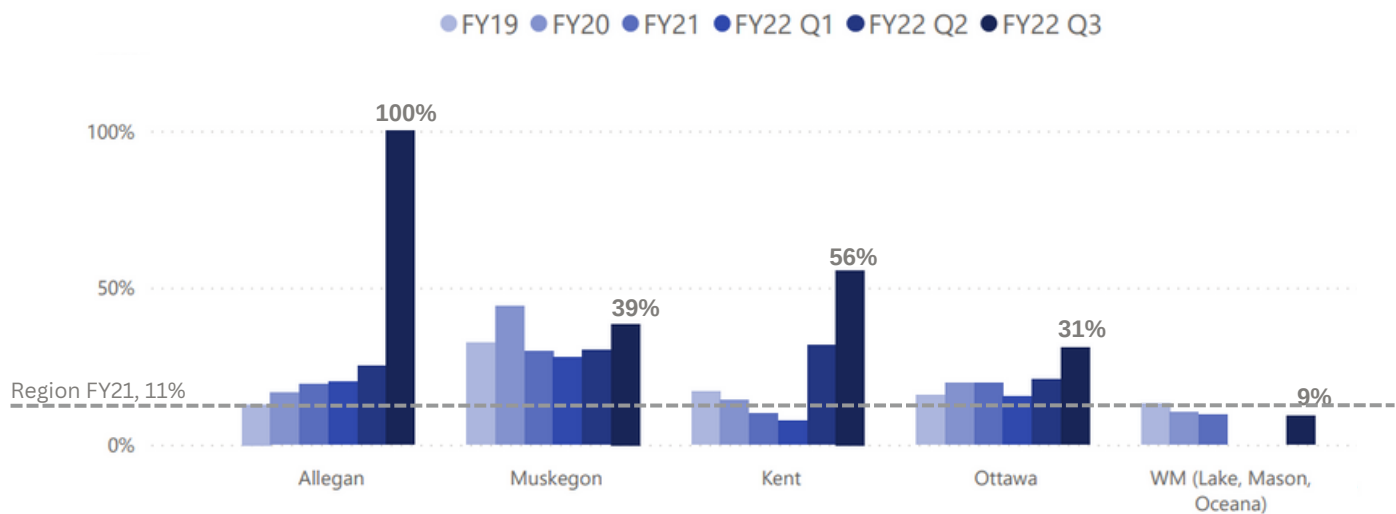


*Treatment episodes with only an assessment that had a discharge reason reported as something other than having 'dropped out' are now excluded from analysis.

ENGAGEMENT AND RETENTION

The chart below shows the percentage of outpatient treatment episodes with only one encounter for each CMHSP. Rates vary dramatically 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.

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



FY19	12.8%	32.4%	17.0%	15.8%	13.2%
FY20	16.6%	44.0%	14.3%	19.5%	10.4%
FY21	19.2%	29.8%	9.9%	19.6%	9.7%
FY22 Q1	20.0%	27.8%	7.7%	15.5%	0.0%
FY22 Q2	25.0%	30.0%	31.6%	20.7%	0.0%
FY22 Q3	100.0%	38.5%	55.6%	30.8%	9.1%

*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:

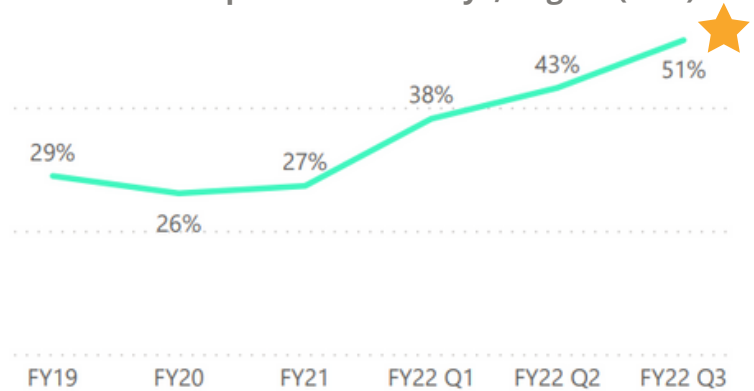
Following detox (24-hour), clients typically transition to ST Res at the same service provider. Following discharge from ST Res, it is ideal for clients to engage in services at a lower level of care as soon as possible, with a goal of no more than 7 days between discharge and the subsequent admission.

Throughout FY22, the % admitted to the next LOC within 7 days following ST Res has been improving and achieved a high of 51% in 3Q.

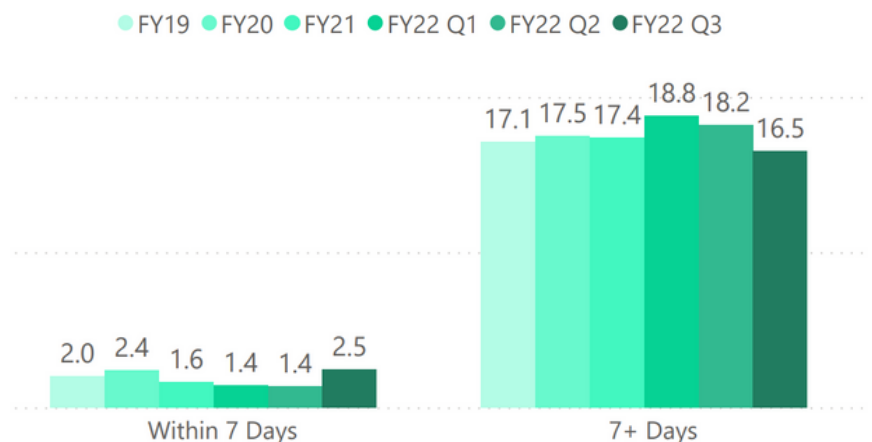
For clients who were not admitted within 7 days, the average time between discharge and subsequent admission consistently exceeds 2 weeks.

The percent of clients admitted to the next LOC w/in 7 days varied by CMHSP with Ottawa having the highest rate (83%) and most CMHSPs showing substantial improvements when compared to FY21.

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)



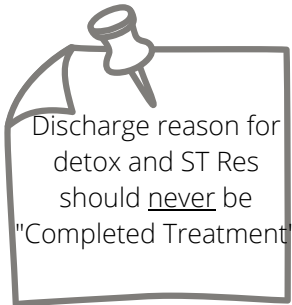
Percent of Discharges from ST Res Admitted to Next Treatment Episode w/in 7 days by CMHSP

County	FY19	FY20	FY21	FY22 Q1	FY22 Q2	FY22 Q3
Allegan	40%	32%	9%		0%	
Muskegon	13%	22%	27%	29%	75%	56% ★
Kent	28%	24%	28%	40%	38%	41%
Ottawa	46%	27%	48%	20%	0%	83% ★
WM (Lake, Mason, Oceana)	33%	31%	26%	45%	20%	63% ★

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'

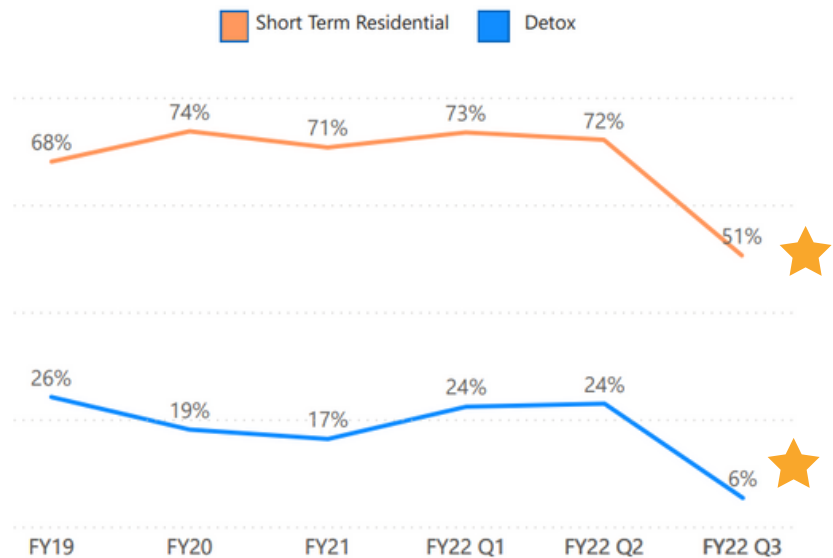


Data Highlights:

The percent of discharges from ST Res and detox with the reason 'completed treatment' improved substantially in 3Q. A corresponding increase in these discharges being reported as 'Transferring to another program/Completed level of care' is very encouraging.

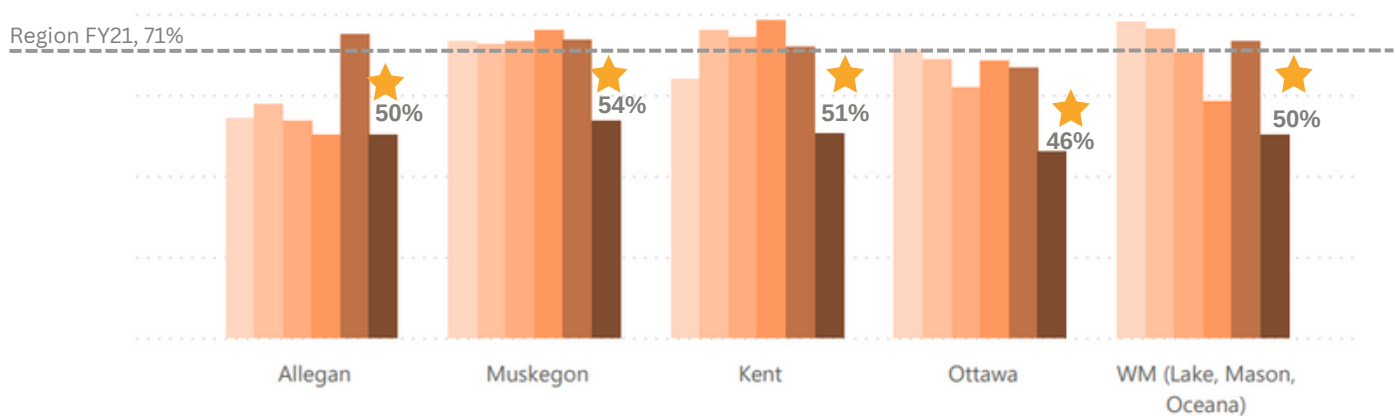
Improvements occurred for each CMHSP.

Discharges from Detox & ST Res w/ Reason as "Completed Treatment" (T.30)



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

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



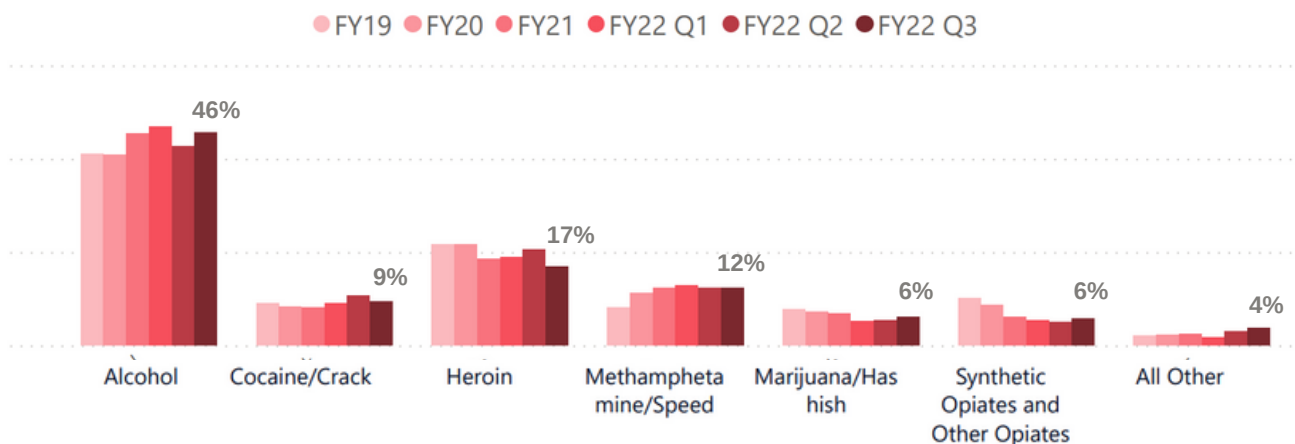
	FY19	FY20	FY21	FY22 Q1	FY22 Q2	FY22 Q3
Allegan	54.3%	57.9%	53.4%	50.0%	75.0%	50.0%
Muskegon	73.1%	72.5%	73.3%	75.9%	73.5%	53.7%
Kent	64.0%	76.1%	74.4%	78.3%	71.9%	50.6%
Ottawa	71.1%	68.8%	62.0%	68.4%	66.7%	46.2%
WM (Lake, Mason, Oceana)	78.0%	76.3%	70.3%	58.3%	73.3%	50.0%

Other Data to Monitor: Primary Drug at Admission

LRE Region

Data Highlights: In the LRE region, admissions for alcohol remain the most frequently reported primary drug at admission.

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

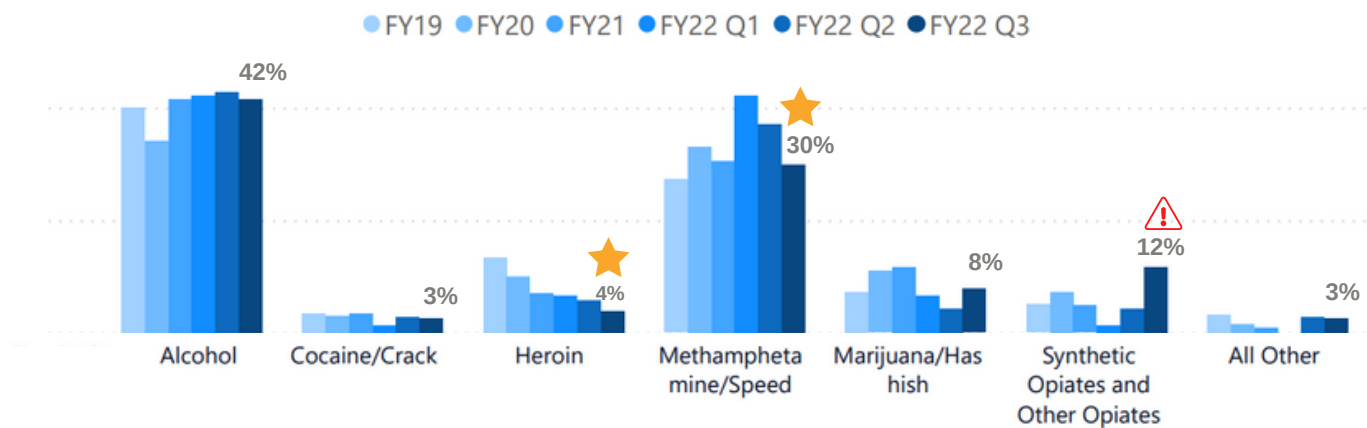


FY19	41.1%	9.0%	21.6%	8.2%	7.7%	10.2%	2.2%
FY20	40.9%	8.3%	21.6%	11.2%	7.2%	8.6%	2.2%
FY21	45.4%	8.2%	18.6%	12.3%	6.8%	6.0%	2.5%
FY22 Q1	46.9%	9.1%	19.0%	12.8%	5.1%	5.4%	1.7%
FY22 Q2	42.8%	10.7%	20.6%	12.3%	5.5%	5.1%	3.1%
FY22 Q3	45.6%	9.3%	17.0%	12.4%	6.1%	5.8%	3.8%

Allegan County

Data Highlights: In Allegan County, admissions have been decreasing for heroin while synthetic and other opioids increased substantially in 3Q. Methamphetamine admissions remain substantially higher than the region.

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

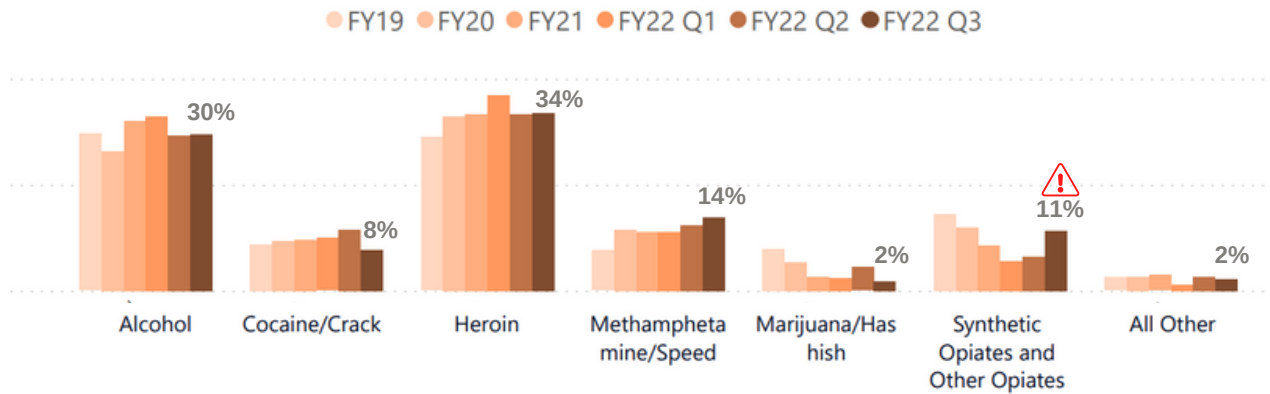


FY19	40.2%	3.5%	13.4%	27.3%	7.3%	5.1%	3.3%
FY20	34.2%	3.0%	10.0%	33.2%	11.0%	7.2%	1.5%
FY21	41.5%	3.4%	7.0%	30.6%	11.7%	4.9%	1.0%
FY22 Q1	42.1%	1.3%	6.6%	42.1%	6.6%	1.3%	
FY22 Q2	42.9%	2.9%	5.7%	37.1%	4.3%	4.3%	2.9%
FY22 Q3	41.6%	2.6%	3.9%	29.9%	7.8%	11.7%	2.6%

Muskegon County

Data Highlights: In Muskegon County, admissions for heroin continue to surpass those for alcohol and are almost double the rate region-wide. Admissions for marijuana have been decreasing while admissions for synthetic and other opioids have increased throughout FY22.

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

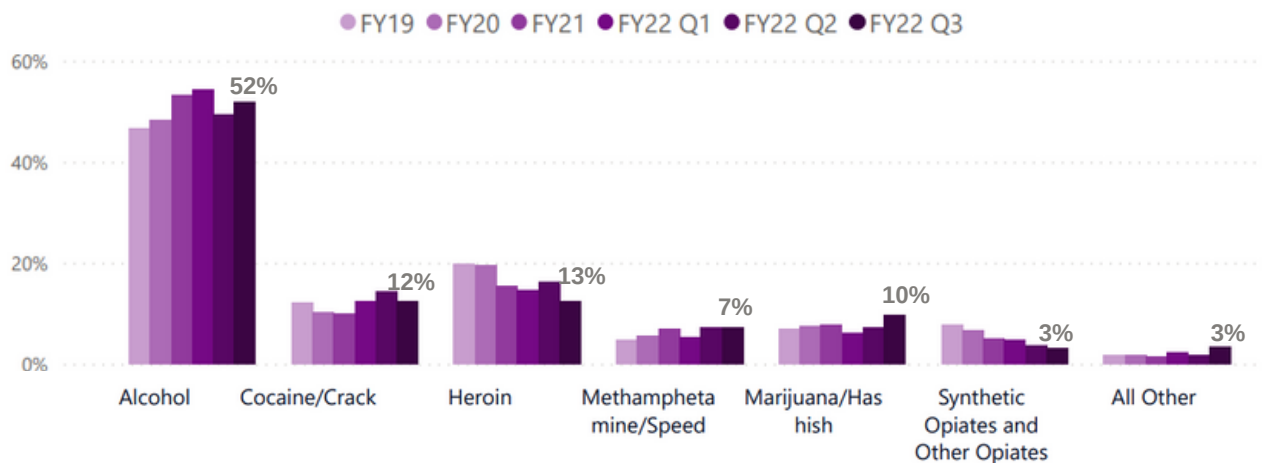


FY19	29.6%	8.8%	29.0%	7.6%	8.0%	14.5%	2.5%
FY20	26.3%	9.5%	32.9%	11.4%	5.4%	11.9%	2.6%
FY21	32.1%	9.6%	33.3%	11.1%	2.6%	8.5%	2.9%
FY22 Q1	32.9%	9.9%	36.9%	11.1%	2.4%	5.6%	1.2%
FY22 Q2	29.2%	11.5%	33.3%	12.4%	4.4%	6.5%	2.7%
FY22 Q3	29.6%	7.7%	33.6%	13.9%	1.8%	11.3%	2.2%

Kent County

Data Highlights: Admissions by primary drug remain relatively stable in Kent County.

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

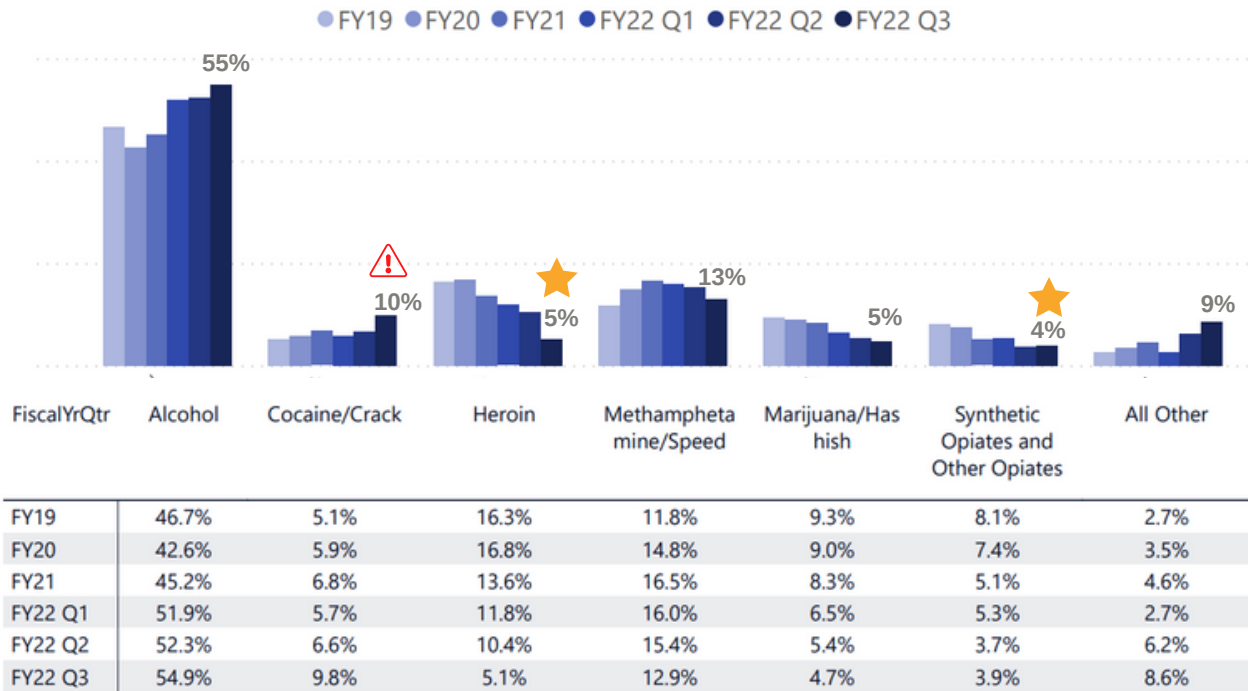


FY19	46.8%	12.2%	19.9%	4.7%	6.9%	7.9%	1.7%
FY20	48.3%	10.4%	19.6%	5.7%	7.6%	6.8%	1.7%
FY21	53.2%	10.0%	15.4%	6.9%	7.9%	5.0%	1.6%
FY22 Q1	54.3%	12.4%	14.8%	5.4%	6.1%	4.8%	2.2%
FY22 Q2	49.4%	14.4%	16.3%	7.3%	7.3%	3.6%	1.7%
FY22 Q3	51.8%	12.3%	12.5%	7.1%	9.7%	3.1%	3.3%

Ottawa County

Data Highlights: Admissions for heroin, synthetic and other opioids, marijuana, and methamphetamine have been decreasing while admissions for alcohol, cocaine, and other drugs have increased slightly.

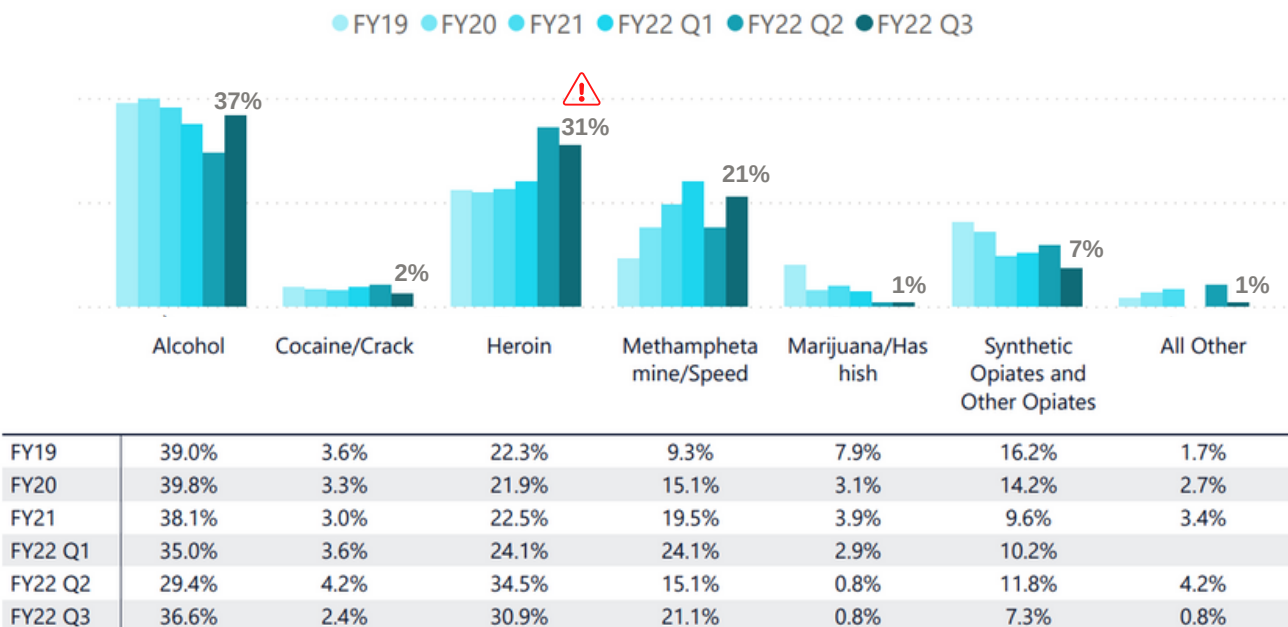
Ottawa County - Percent of Admissions by Primary Drug (T.46)



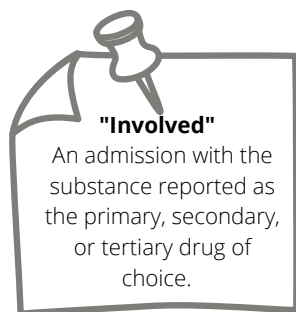
West Michigan Counties

Data Highlights: Admissions for heroin remain high but decreased slightly in 3Q after a substantial increase in the previous quarter.

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



Other Data to Monitor : METHAMPHETAMINE-INVOLVED ADMISSIONS

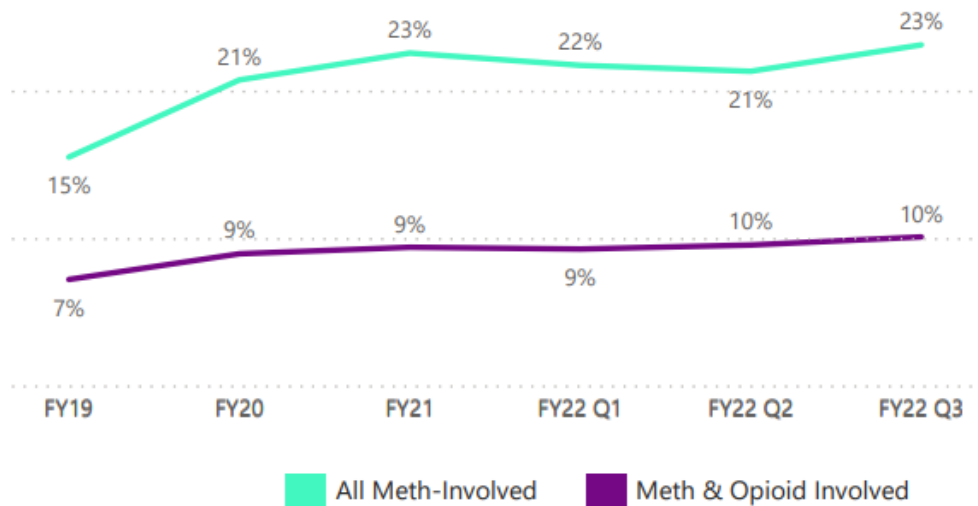


Data Highlights:

MA-involved admissions continued to increase thru FY21 and have remained relatively stable throughout FY22.

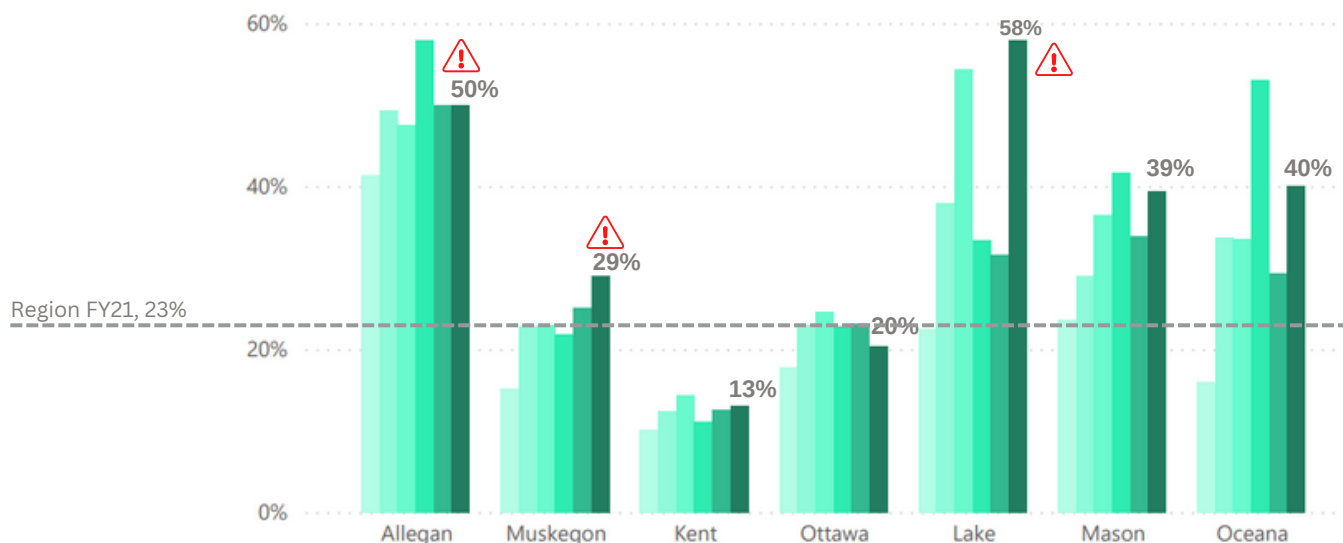
During 3Q, MA-involved admissions were highest in Lake (58%), followed by Allegan County (50%).

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



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

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



	FY19	FY20	FY21	FY22 Q1	FY22 Q2	FY22 Q3
Allegan	41.4%	49.4%	47.6%	57.9%	50.0%	50.0%
Muskegon	15.2%	22.9%	22.9%	21.8%	25.1%	29.1%
Kent	10.2%	12.5%	14.4%	11.2%	12.7%	13.1%
Ottawa	17.8%	23.0%	24.6%	22.9%	23.2%	20.4%
Lake	22.6%	37.9%	54.3%	33.3%	31.6%	57.9%
Mason	23.6%	29.0%	36.4%	41.7%	33.9%	39.3%
Oceana	16.0%	33.8%	33.5%	53.1%	29.3%	40.0%

Data Highlights:

Admissions involving both an opioid and methamphetamine increased substantially in 3Q for Lake and Oceana counties while decreasing in Ottawa. Mason county continues to have substantially higher rates of admissions involving both MA and an opioid compared to the rest of the region.

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

