

Annual Overview :
**Patients in Publicly Funded
Substance Use Disorder Treatment
Programs in Los Angeles County**
2022-2023 Fiscal Year

Health Outcomes and Data Analytics

March 2024

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Data Source and Notes

DATA SOURCE

The information presented in this report is based primarily on the California Outcomes Measurement System (CalOMS) /Los Angeles County Participant Reporting System (LACPRS) Data collected by the SAGE system managed by the Los Angeles County Department of Public Health, Substance Abuse Prevention and Control (DPH-SAPC), and data obtained from secondary SAGE users that were missing from the primary Sage data source. CalOMS is a database in Sage, DPH-SAPC's substance use disorder (SUD) information system that secures ongoing annual cross-sectional data obtained at admission and discharge on patients from all publicly funded SUD treatment programs in LAC. CalOMS contains data on federal and state-required standardized measures, as well as additional sociodemographic and life and health outcome measures specific to LAC. Data analyzed for this report were retrieved on 12/12/2023.

MEASURES AND DESCRIPTIONS

Patient: A patient is a unique individual who was formally admitted and received SUD treatment or recovery services in a publicly funded specialty SUD treatment program in LAC. Patients in this report include those unique individuals who were admitted/received services in FY2223 and those who were admitted/received services prior to FY2223 and continued receiving services in FY2223. Statistics of gender identity, race/ethnicity, age, sexual orientation, and education are based on the unique number of patients.

Admission: An admission is the formal acceptance of a patient into a specialty SUD treatment program after completing the screening and intake process. Each admission has defined dates of admission and discharge. A patient may have multiple admissions depending on their treatment needs in a fiscal year. For example, an individual admitted to treatment twice within a fiscal year would be counted as two admissions. Admissions in this report include all new admissions during FY2223, and admissions prior to FY2223 and continued in FY2223. Statistics of some of the patients' characteristics (e.g., mental health issues, physical health issues, criminal justice status), primary substance use, level of care, discharge status, and treatment effectiveness assessment are based on the number of admissions.

Discharge status is defined as follows:

Positive compliance – patients either completed treatment/recovery plan/goals or left treatment without completing treatment plan/goals with satisfactory progress.

Negative compliance – patients left without completing treatment plan/goals with unsatisfactory progress.

Other – patients were discharged for other reasons (e.g., death, incarceration, or some other unknown reasons).

Primary substance use at admission: Patients were asked to select the primary substance they used out of 20 available alcohol and drug choices. Their responses were categorized into the following: heroin, methamphetamine, alcohol, marijuana, cocaine, prescription drugs (e.g., OxyContin, stimulants,

tranquilizers/ benzodiazepine), and other drugs (e.g., PCP, hallucinogens, inhalants, ecstasy, other club drugs).

Mental health issues: Patients who have ever been diagnosed with a mental illness or have received outpatient emergency services for mental health needs, have stayed for more than 24 hours in a hospital or psychiatric facility for mental health needs, or have taken prescribed medication for mental health needs in the past 30 days at admission.

Physical health issues: Patients who have visited an emergency room, have stayed overnight in a hospital for physical health problems, or have experienced a physical health problem in the past 30 days at admission.

Criminal justice involvement: Patients involved in the criminal justice system, including those who were referred by the criminal justice system (e.g., Proposition 36/ Probation or Parole, Post-release Community Supervision (AB 109), Adult Felon Drug Court, Dependency Drug Court, etc.), who reported their eligibility of criminal justice system programs (e.g., Drug Court, AB109, Proposition 36, Parolee Service Network, Proposition 47), or who were matched with AB109 or other probation source lists.

DATA LIMITATIONS AND GAPS

- This report includes CalOMS data from the SAGE system, as well as data obtained from the secondary SAGE users that were missing from the primary SAGE data source. By incorporating data from additional sources, we aim to provide a more comprehensive and accurate perspective in this report. However, it is important to exercise caution and consider the potential impact of data source integration on noticeable changes or trends observed, particularly for the fiscal year 2021-2022.
- The majority of the information collected via CalOMS is self-reported by patients. Therefore, results should be interpreted with caution.
- The self-reported primary substance use may differ from the DSM-V diagnosis of alcohol or other drug use disorder.
- The overall number of admissions and discharges may be over or underreported due to some open admissions that were not closed on time by treatment or recovery programs.
- This report does not include any data from private treatment or recovery programs in LAC. All information pertains only to patients and admissions in publicly funded SUD treatment programs.
- When the number of patients is five or less in any rows/columns in a table, they are not reported to protect confidentiality.

Executive Summary

This annual report is a comprehensive description of patients who received substance use disorder (SUD) treatment in publicly funded treatment programs in Los Angeles County (LAC) during the fiscal year 2022-2023 (FY2223). This report provides information on the sociodemographic and treatment characteristics of patients aged 12 and older, including but not limited to the number of admissions and discharges, discharge status, substance use status, levels of care, geographic distribution, and characteristics for special populations. In addition, trends over the last 10 fiscal years (FY1314-FY2223) are presented for selected variables. The present report is comprised of six chapters, and the key highlights of each chapter are as follows:

Chapter 1 - Who we serve

- 33,668 patients accounting for 54,773 SUD treatment admissions were served in FY2223; 64.4% of patients were males, 55.8% were Latinx, 71.2% were aged 26-54, and 67.6% were unemployed.
- 10.8% primarily spoke a language other than English at home.
- 51.6% reported having mental health issues, 39.2% were homeless, and 22.3% were involved in the criminal justice system.
- 30.0% reported methamphetamine as their primary substance use at admission, followed by alcohol (27.0%), heroin (16.2%), prescription drug (14.9%), marijuana (8.1%), and cocaine (3.0%).
- 29.1% received services in residential programs, followed by outpatient programs (22.8%), opioid treatment programs (19.4%), intensive outpatient programs (12.0%), withdrawal management (11.2%), and recovery support services (5.6%).
- 15.1% were from SPA 2 (San Fernando), followed by SPA 3 (San Gabriel Valley, 13.4%) and SPA 8 (South Bay, 11.1%).
- 38,121 (69.6%) admissions were discharged, of which 54.1% had positive compliance.

Chapter 2 - Primary Substance Use

Patients with Primary Heroin Use:

- 62.9% decrease in admissions from FY1617 to FY2223.
- 70.6% of patients were male.
- 49.7% reported using heroin every day 30 days prior to admission.
- 77.7% had previously received SUD treatment.
- 45.2% were discharged with positive compliance.

Patients with Primary Methamphetamine Use:

- 32.2% increase in admissions from FY1617 to FY2223.
- 34.4% were involved in the criminal justice system.
- 56.2% were homeless at admission.
- 53.6% reported poly-drug use.
- 40.3% initiated methamphetamine use before age 18.

- 51.8% were discharged with positive compliance.

Patients with Primary Marijuana Use:

- 70.2% decrease in admissions from FY1314 to FY2223.
- 31.2% of patients were youth aged 17 and under.
- 9.3% initiated at age 11 or younger; 73.6% initiated marijuana use between ages 12 and 17.
- 57.0% were treated in outpatient programs, followed by residential service programs (19.6%) and intensive outpatient programs (16.5%).
- 44.6% were discharged with positive compliance.

Patients with Primary Alcohol Use:

- 8.8% had their first drink at age 11 or younger, and 60.5% between ages 12 and 17.
- 63.7% reported having mental health issues.
- 30.7% were treated in residential service programs, followed by outpatient programs (26.7%), withdrawal management (22.3%), and intensive outpatient programs (13.6%).
- 64.9% were discharged with positive compliance.

Patients with Primary Prescription Drug Use:

- 64.4% of patients were male, and 45.8% were White.
- 45.5% reported misusing prescription drugs every day 30 days prior to admission.
- 91.7% reported misusing prescription opioids.
- 50.7% were discharged with positive compliance.

Patients with Primary Cocaine Use:

- 59.7% decrease in admissions from FY1314 to FY2223.
- 52.9% of patients were Black/African American.
- 56.8% reported having mental health issues.
- 63.4% reported poly-drug use.
- 46.1% were treated in residential services, followed by outpatient programs (29.0%), intensive outpatient programs (17.2%), and recovery support services (5.5%).
- 50.7% were discharged with positive compliance.

Chapter 3 - Level of Care

Patients Treated in Withdrawal Management:

- 50.1% were homeless.
- 53.0% reported alcohol as their primary substance use, followed by prescription drugs (31.5%) and heroin (10.1%).
- 76.0% were discharged with positive compliance.

Patients Treated in Residential Service Programs:

- 65.8% were homeless at admission, and 3.2% were employed.

- 47.9% reported methamphetamine as their primary substance use, followed by alcohol (27.8%) and prescription drugs (8.4%).
- 57.3% were discharged with positive compliance.

Patients Treated in Intensive Outpatient Programs (IOP):

- 3.0% of patients were aged 17 and under.
- 43.3% reported methamphetamine as their primary substance use, followed by alcohol (30.0%) and marijuana (10.9%).
- 50.3% were discharged with positive compliance.

Patients Treated in Outpatient Programs:

- 35.1% reported methamphetamine as their primary substance use, followed by alcohol (31.2%) and marijuana (19.9%).
- 47.2% were discharged with positive compliance.

Patients Treated in Opioid Treatment Programs (OTP):

- 53.9% of patients were adults ages 45 or older.
- 65.7% reported heroin as their primary substance use, followed by prescription drugs (34.3%)
- 35.0% were discharged with positive compliance.

Chapter 4 - Service Planning Area (SPA)

- Latinx (79.1% for SPA 7) and White (51.5% for SPA 5) accounted for the largest proportion of the race/ethnic groups served in most of the SPAs, but Black was the second largest in SPA 6 (31.4%).
- Methamphetamine was the most common primary substance use for SPA 3 (25.2%), SPA 6 (32.9%), and SPA 7 (24.6%), while alcohol was the most common one for SPA 2 (28.1%), SPA 4 (27.2%), SPA 5 (31.4%), and SPA 8 (25.7%). Prescription drug was the most common primary substance use for SPA 1 (22.9%).
- Opioid treatment programs and outpatient programs were the most common levels of care across all SPAs except in SPA 6, where outpatient programs and residential service programs were the most common levels of care. Among all SPAs, SPA 5 had the largest proportion of admissions to opioid treatment programs (35.2%), and SPA 6 had the largest proportion of admissions to outpatient programs (35.5%).
- The percent of admissions discharged with positive compliance was highest in SPA 5 (56.8%) and lowest in SPA 1 (43.4%).
- The highlights are summarized in the table (next page):

	Race/Ethnicity		Primary Substance Use		Level of Care		Positive Compliance
SPA 1	Latinx	45.1%	Prescription drug	22.9%	Outpatient	31.5%	43.4%
	White	31.9%	Methamphetamine	22.4%	OTP	29.3%	
SPA 2	Latinx	47.0%	Alcohol	28.1%	OTP	30.6%	54.3%
	White	43.7%	Heroin	26.5%	Outpatient	23.0%	
SPA 3	Latinx	66.9%	Methamphetamine	25.2%	OTP	30.0%	48.8%
	White	22.5%	Alcohol	23.5%	Outpatient	29.6%	
SPA 4	Latinx	59.7%	Alcohol	27.2%	Outpatient	28.3%	48.6%
	White	23.7%	Methamphetamine	26.3%	OTP	26.6%	
SPA 5	White	51.5%	Alcohol	31.4%	OTP	35.2%	56.8%
	Latinx	31.2%	Prescription drug	25.4%	Outpatient	18.0%	
SPA 6	Latinx	56.9%	Methamphetamine	32.9%	Outpatient	35.5%	48.4%
	Black	31.4%	Alcohol	22.1%	Residential	20.0%	
SPA 7	Latinx	79.1%	Methamphetamine	24.6%	OTP	30.7%	49.53%
	White	13.9%	Heroin	23.4%	Outpatient	29.0%	
SPA 8	Latinx	49.5%	Alcohol	25.7%	OTP	30.6%	50.2%
	White	27.7%	Methamphetamine	20.8%	Outpatient	22.4%	
Homeless	Latinx	54.1%	Methamphetamine	40.5%	Residential	48.5%	59.1%
	White	24.9%	Alcohol	30.3%	Outpatient	15.4%	
LAC Overall	Latinx	55.8%	Methamphetamine	30.0%	Residential	29.1%	54.1%
	White	26.3%	Alcohol	27.0%	Outpatient	22.8%	

Chapter 5 – Supervisorial District (SD)

- Latinx (72.0% for SD 1) and White (42.0% for SD 3) accounted for the largest proportion of the race/ethnic groups for all SDs, except for SD 2, where Black was the second largest group (28.6%).
- Heroin was the most common primary substance use in SD 1 (25.6%), while methamphetamine was the most common primary substance in SD 2 (28.8%). Alcohol was the most common primary substance use among admissions in three SDs, accounting for 24.6% (SD 4), 25.2% (SD 5), and 30.1% (SD 3) of admissions respectively.
- Alcohol was the second most common primary substance use in SD 2. Methamphetamine was the second most common primary substance use in SD 1 and SD 4 and heroin was the second most common primary substance use in SD 3 and SD 5.
- The most common level of care was outpatient programs, followed by opioid treatment programs for SD 2. The most common level of care was opioid treatment programs, followed by outpatient programs for SD 1, SD 3, SD 4, and SD 5.
- The percent of admissions discharged with positive compliance was highest in SD 3 (54.2%) and lowest in SD 1 (46.8%).
- The highlights are summarized in the table (next page):

	Race/Ethnicity		Primary substance use		Level of Care		Positive Compliance
SD 1	Latinx	72.0%	Heroin	25.6%	OTP	32.2%	46.8%
	White	16.9%	Methamphetamine	25.5%	Outpatient	31.0%	
SD 2	Latinx	53.9%	Methamphetamine	28.8%	Outpatient	31.2%	49.7%
	Black	28.6%	Alcohol	24.2%	OTP	21.5%	
SD 3	Latinx	47.4%	Alcohol	30.1%	OTP	29.9 %	54.2%
	White	42.0%	Heroin	23.8%	Outpatient	25.3%	
SD 4	Latinx	63.4%	Alcohol	24.6%	OTP	29.6%	49.3%
	White	23.5 %	Methamphetamine	23.5%	Outpatient	25.2%	
SD 5	Latinx	46.2%	Alcohol	25.2%	OTP	29.7%	50.8%
	White	39.2%	Heroin	22.6%	Outpatient	24.5%	
Homeless	Latinx	54.1%	Methamphetamine	40.5%	Residential	48.5%	59.1%
	White	24.9%	Alcohol	30.3%	Outpatient	15.4%	
LAC Overall	Latinx	55.8%	Methamphetamine	30.0%	Residential	29.1%	54.1%
	White	26.3%	Alcohol	27.0%	Outpatient	22.8%	

Chapter 6 - Special Populations

Youth (ages 12–17 years):

- Youth accounted for 4.0% of all LAC patients.
- 84.4% reported marijuana as their primary substance use, followed by prescription drug (6.6%) and alcohol (5.0%).
- 76.4% were treated in outpatient programs, followed by intensive outpatient programs (11.2%) and residential service programs (7.0%).
- 38.8% were discharged with positive compliance.

Transitional Age Youth (ages 16-25 years):

- Transitional age youth accounted for 11.1% of all LAC patients.
- 24.8% were involved with the criminal justice system.
- 26.6% reported marijuana as their primary substance use, followed by methamphetamine (25.3%) and prescription drug (23.3%).
- 33.8% were treated in outpatient programs, followed by residential service programs (29.5%) and intensive outpatient programs (12.9%).
- 47.4% were discharged with positive compliance.

Older Adults (ages 65 and older):

- Older adults accounted for 4.3% of all LAC patients.
- 71.4% of patients were male, 37.3% were Latinx, and 36.8% were White.
- 10.5% were homeless at admission.
- 70.4% reported heroin as their primary substance use, followed by prescription drug (15.4%) and alcohol (7.2%).
- 82.8% were treated in opioid treatment programs, followed by outpatient programs (6.0%) and residential service programs (5.0%).
- 48.4% were discharged with positive compliance.

Patients Involved in Criminal Justice System:

- Patients involved in the criminal justice system accounted for 23.0% of all LAC patients.
- 75.6% of patients were male.
- 53.1% were homeless at admission.
- 46.1% reported methamphetamine as their primary substance use, followed by alcohol (21.1%) and heroin (11.4%).
- 42.2% were treated in residential service programs, followed by outpatient programs (24.9%) and intensive outpatient programs (16.6%).
- 58.6% were discharged with positive compliance.

Patients Experiencing Homelessness at Admission:

- Patients experiencing homelessness at admission accounted for 36.2% of all LAC patients.
- 62.8% reported having mental health issues.
- 40.5% reported methamphetamine as their primary substance use, followed by alcohol (30.3%) and prescription drug (12.5%).
- 48.5% were treated in residential service programs, followed by outpatient (15.4%) and withdrawal management programs (14.4%).
- 59.1% were discharged with positive compliance.
- 34.8% of patients who were homeless at admission found stable housing at discharge.

Patients with Disabilities:

- Patients with disabilities accounted for 18.4% of all LAC patients.
- 74.2% reported having mental disabilities, followed by mobility (11.2%), visual (4.2%), developmental (1.7%), hearing (1.6%), and speech (0.6%) disabilities.
- 46.6% were homeless at admission.
- 36.1% reported alcohol as their primary substance use, followed by methamphetamine (26.1%) and prescription drug (14.3%).
- 34.9% were treated in residential service programs, followed by withdrawal management programs (20.2%) and outpatient programs (18.7%).
- 58.7% were discharged with positive compliance.

LGBTQ Patients:

- LGBTQ patients accounted for 6.8% (2,305) of all LAC patients.
- 88.9% of patients identified as gay, lesbian, or bisexual and 9.7% identified as unsure/questioning.
- 6.2% of patients identified as transgender. Among patients reporting transgender, 31.2% identified as heterosexual, and 50.7% identified as lesbian, gay, or bisexual.
- 47.7% were homeless at admission.
- 70.5% reported having mental health issues.
- 47.5% reported methamphetamine as their primary substance use, followed by alcohol (24.9%) and prescription drug (9.6%).
- 39.4% were treated in residential service programs, followed by outpatient programs (22.9%) and intensive outpatient programs (16.4%).
- 56.6% were discharged with positive compliance.

Women of Reproductive Age:

- Women of reproductive age accounted for 26.5% of all LAC patients.
- 57.2% of patients were Latinx, followed by White (23.6%) and Black (15.9%).
- 37.7% were homeless at admission.
- 37.8% reported methamphetamine as their primary substance use, followed by alcohol (26.6%), and prescription drug (13.7%).
- 30.4% were treated in residential service programs, followed by outpatient programs (26.9%) and intensive outpatient programs (14.7%).
- 51.4% were discharged with positive compliance.

Veterans:

- Veterans accounted for 2.2% of all LAC patients.
- 78.2% of patients were male.
- 40.1% were homeless at admission.
- 30.5% reported alcohol as their primary substance use, followed by methamphetamine (25.6%) and heroin (22.5%).
- 29.0% were treated in residential service programs, followed by opioid treatment programs (26.5%) and outpatient programs (19.7%).
- 50.5% were discharged with positive compliance.

Patients Enrolled in My Health LA (MHLA) Program:

- Patients enrolled in the MHLA program accounted for 1.9% of all LAC patients.
- 93.2% of patients were Latinx, followed by White (4.3%).
- 52.7% reported methamphetamine as their primary substance use, followed by alcohol (37.2%) and marijuana (3.5%).
- 33.9% were treated in outpatient programs, followed by intensive outpatient programs (18.6%) and residential service programs (30.1%).
- 67.2% were discharged with positive compliance.

Chapter 1

Who We Serve



Chapter 1 describes overall numbers of patients, **admissions** and **discharges**, **trends in admissions** over the past ten years, and the distributions across patient **characteristics**, **primary substance use**, **levels of care**, **geographies**, and **discharge status**.

TREATMENT ADMISSIONS AND DISCHARGES

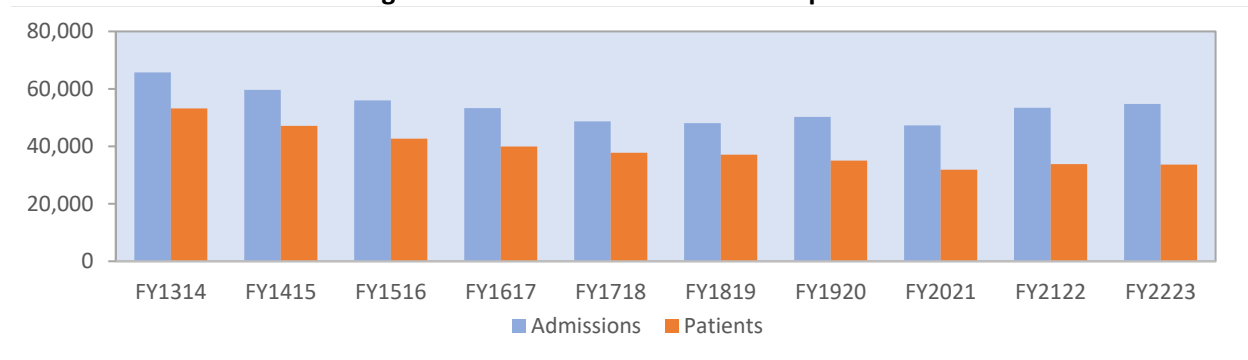
In the fiscal year 2022-2023, a total of 33,668 unique patients, who accounted for 54,773 treatment admissions (Table 1.1), were served at substance use disorder (SUD) treatment programs contracted by DPH-SAPC. 23,627 patients (70.2%) and 38,121 admissions (69.6%) were discharged.

Table 1.1. Number of admissions and discharges, FY2223

	ADMISSIONS	PATIENTS
Admitted	54,773	33,668
Discharged	38,121 (69.6%)	23,627 (70.2%)

The number of patients admitted to the specialty SUD treatment programs has shown a consistent decrease from FY1314 to FY2021, with a slight increase in FY2122 continued into FY2223. The number of patients decreased by 29.0% from 53,189 in FY1314 to 37,770 in FY1718. This decline was primarily attributed to the implementation of the Drug Medi-Cal Organized Delivery System (DMC-ODS) in 2017 and pre-DMC-ODS data issues, such as high open admissions. Subsequently, there was an additional 16% decrease from 37,770 in FY1718 to 31,848 in FY2021, largely due to the impact of the COVID-19 pandemic. However, in FY2223, there was a modest 5.4% increase from FY2021 with patients served reaching 33,668 (Figure 1.1).

Figure 1.1. Trends in admissions and patients



The proportion of patients residing in the five Supervisorial Districts (SDs) ranged between 11.7% (SD 3) and 17.1% (SD 5) (Table 1.2).

Table 1.2. Patients by Supervisorial District (SD), FY2223

	PATIENTS	% OF TOTAL PATIENTS
SD 1	5,528	16.4
SD 2	5,436	16.1
SD 3	3,929	11.7
SD 4	5,002	14.9
SD 5	5,768	17.1
Homeless	12,185	36.2
Outside LAC	387	1.1
Missing	-	-
Total	33,668	100.0

Note: 1. Numbers are based on non-missing values of zip code of the home address. Percentages may not sum to 100% due to rounding.
 2. Patients may report different home addresses during the fiscal year for different treatment admission. Thus, the sum of numbers and percentages may be greater than the total.

The proportion of patients residing in the eight Service Planning Areas (SPAs) ranged between 2.2% (SPA 5) and 15.1% (SPA 2) (Table 1.3).

Table 1.3. Patients by Service Planning Area (SPA), FY2223

	PATIENTS	% OF TOTAL PATIENTS
SPA 1	1,927	5.7
SPA 2	5,095	15.1
SPA 3	4,506	13.4
SPA 4	3,255	9.7
SPA 5	733	2.2
SPA 6	3,424	10.2
SPA 7	3,034	9.0
SPA 8	3,725	11.1
Homeless	12,185	36.2
Outside LAC	387	1.1
Missing	-	-
Total	33,668	100.0

Note: 1. Numbers are based on non-missing values of the zip code of home address. Percentages may not sum to 100% due to rounding.

2. Patients may report different home addresses during the fiscal year for different treatment admissions. Thus, the sum of numbers and percentages may be greater than the total.

There were 38,121 discharges in FY2223. Among those that reported a discharge status, 54.1% were discharged with positive compliance, with 41.7% completing the treatment and 12.4% leaving treatment with satisfactory progress (Table 1.4).

Table 1.4. Discharge status of patients, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	19,581	54.1
Completed treatment	15,095	41.7
Left – satisfactory progress	4,486	12.4
Negative compliance	15,582	43.1
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	1,020	2.8

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

Table 1.5 presents the characteristics of all patients. Key findings include:

- The majority of patients receiving SUD treatment services were male (64.4%), Latinx (55.8%), ages 26 to 34 (32.0%), unemployed (67.6%), and primary English speakers at home (89.2%).
- At admission, 51.6% of patients reported having mental health issues, 36.2% were homeless, and 23.0% were involved in the criminal justice system.

Table 1.5. Characteristics of all patients, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY†	Male	21,483	64.4
	Female	11,729	35.1
	Transgender male	40	0.1
	Transgender female	99	0.3
	Non-conforming or refusing to state	26	0.1
RACE/ETHNICITY†	Latinx	18,317	55.8
	White	8,648	26.3
	Black/African American	4,897	14.9
	Asian	538	1.6
	Pacific Islander	54	0.2
	American Indian/Alaska Native	204	0.6
	Other	190	0.6
AGE†	17 and under	1,350	4.0
	18-25	2,910	9.0
	26-34	10,381	32.0
	35-44	8,379	25.8
	45-54	4,327	13.3
	55-64	3,683	11.4
	65+	1,434	4.3
SEXUAL ORIENTATION†	Heterosexual	29,382	91.4
	Gay, lesbian, or bisexual	1,993	6.2
	Something else	14	0.04
	Unsure/questioning	217	0.7
	Prefer not to state	538	1.7
EDUCATION†	Middle school or below	1,109	3.5
	Some high school	7,731	24.2
	High school completed	15,908	49.8
	Some college or beyond	7,175	22.5
EMPLOYMENT	Employed	8,513	16.0
	Unemployed (seeking)	21,141	39.8
	Unemployed (not seeking)	14,786	27.8
	Not in labor force	8,668	16.3
HOMELESS†	Homeless at admission	12,185	36.2
LANGUAGE AT HOME	English	45,065	89.2
	Other Language	5,429	10.8
AGE OF FIRST PRIMARY SUBSTANCE USE	11 and under	2,080	4.0
	12-17	21,947	41.7
	18-25	18,366	34.9
	26 and over	10,214	19.4
MENTAL HEALTH ISSUES	Yes	27,316	51.6
	No	25,645	48.4
PHYSICAL HEALTH ISSUES	Yes	6,563	12.5
	No	45,999	87.5
DISABILITY†	Disabled at admission	6,192	18.4
CRIMINAL JUSTICE†	Criminal justice involved	7,747	23.0
VETERAN†	Veteran	726	2.2
MY HEALTH LA (MHLA)†	MHLA participants	644	1.9

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality. † Based on unique patient numbers and percentages.



PRIMARY SUBSTANCE OF USE AT ADMISSION

Methamphetamine was the most common primary substance use reported at admission (30.0%), followed by alcohol, heroin, and prescription drug. The frequency of primary substance use in the past 30 days prior to admission ranged from 10.8% for 10-19 days of use to 35.6% for no use (Table 1.6).

Table 1.6. Primary substance use at admission, FY2223

SUBSTANCE USE STATUS		ADMISSIONS	%
PRIMARY SUBSTANCE USE	Methamphetamine	15,791	30.0
	Alcohol	14,215	27.0
	Heroin	8,533	16.2
	Prescription drug	7,816	14.9
	Marijuana	4,239	8.1
	Cocaine	1,570	3.0
	Other drugs	442	0.8
PRIMARY SUBSTANCE USE IN THE PAST 30 DAYS AT ADMISSION	No use	18,709	35.6
	1-9 days	7,537	14.3
	10-19 days	5,657	10.8
	20-29 days	6,943	13.2
	Every day	13,721	26.1

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

LEVEL OF CARE

Residential service programs (29.1%) were the most common level of care that patients were admitted to, followed by outpatient (22.8%), opioid treatment (19.4%), and intensive outpatient programs (12.0%). Average length of stay ranges from 6.8 days for withdrawal management residential services to 556.3 days for opioid treatment programs (Table 1.7).

Table 1.7. Level of care at admission, FY2223

LEVEL OF CARE	ADMISSIONS	%	Average Length of Stay (days)
Withdrawal Management	6,083	11.2	6.8*
ASAM WM 1	12	0.02	
ASAM WM 2	93	0.2	
ASAM WM 3.2	4,294	7.9	
ASAM WM 3.7/4.0	1,684	3.1	
Residential Service	15,859	29.1	50.0
ASAM 3.1	7,763	14.3	
ASAM 3.3	95	0.2	
ASAM 3.5	8,001	14.7	
Intensive Outpatient (ASAM 2.1)	6,521	12.0	80.0
Outpatient	12,432	22.8	116.3
Early Intervention (ASAM 0.5)	99	0.2	
Outpatient (ASAM 1.0)	12,333	22.6	
Opioid Treatment Program (ASAM OTP)	10,540	19.4	556.3
Recovery Support Service	3,030	5.6	135.6

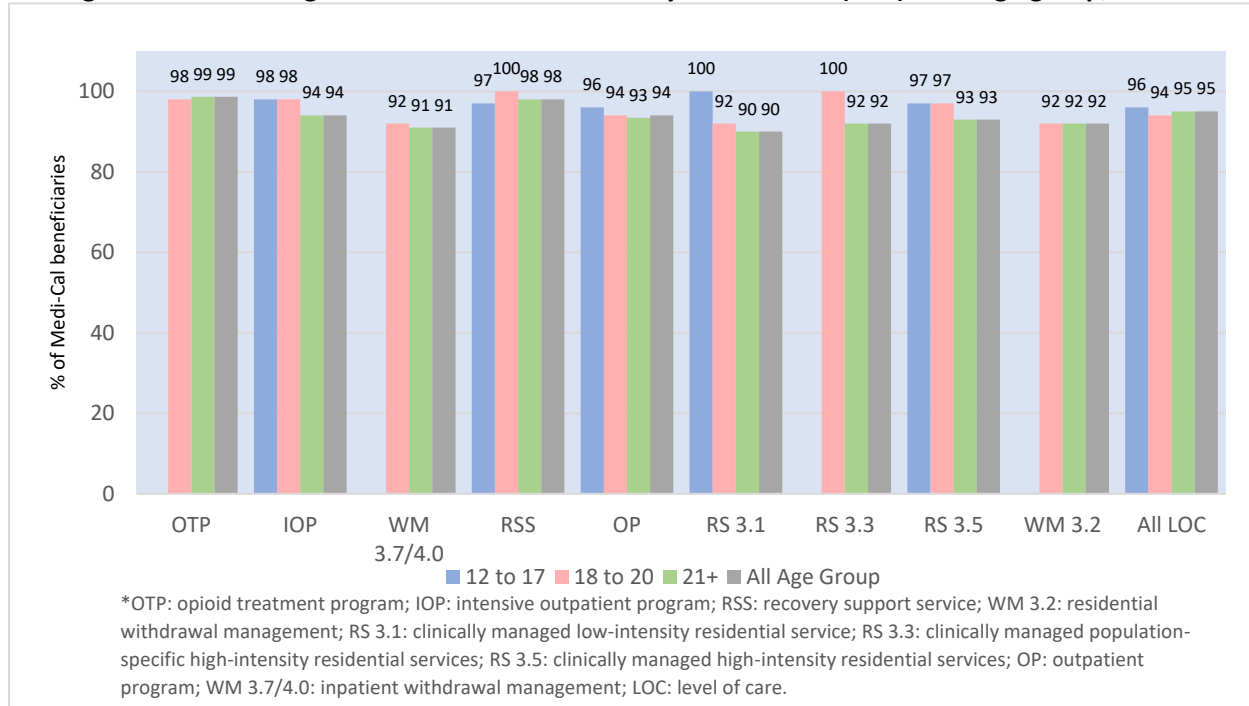
Note: Numbers are based on non-missing values. Percentages may not sum to 100% due to rounding.

*: For residential withdrawal management services only (ASAM 3.2 / ASAM 3.7/4.0).

MEDI-CAL BENEFICIARIES

This section is only for patients whose claim data were matched with the MEDS (Medi-Cal Eligibility Data system) data. Overall, 94.8% of all patients were identified as Medi-Cal beneficiaries with a valid Medi-Cal eligibility status, with the highest rate among those aged 12-17 (96.4%) and the lowest rate among those aged 18-20 (94.3%) for all levels of care (LOC). The proportion of Medi-Cal beneficiaries was also different across levels of care when looking at all age groups, with the highest among opioid treatment program (99.1%), followed by recovery support service (97.9%), intensive outpatient program (94.3%), outpatient program (93.7%), clinically managed high-intensity residential service (93.4%), and clinically managed residential withdrawal management (92.4%) (Figure 1.2).

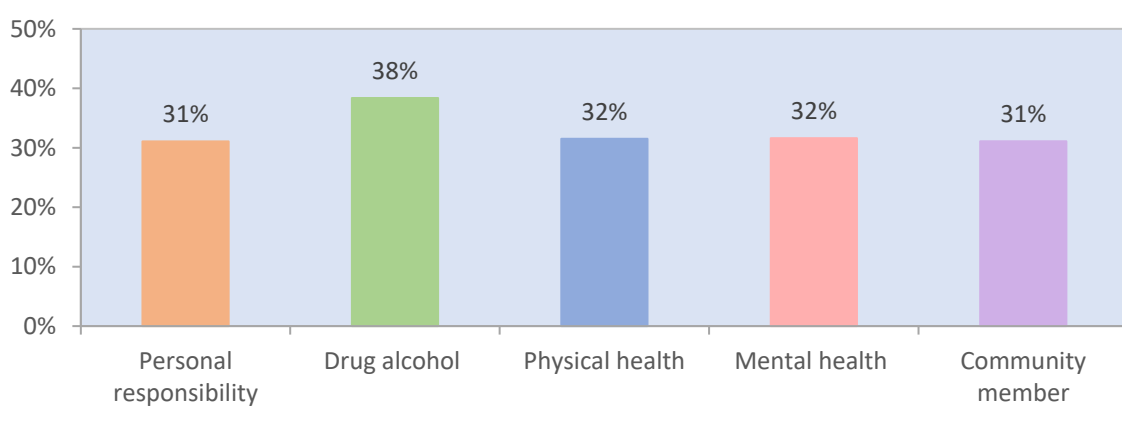
Figure 1.2. Percentage of Medi-Cal beneficiaries by level of care (LOC)* and age group, FY2223



TREATMENT OUTCOMES AT DISCHARGE

According to the Treatment Effectiveness Assessment (TEA) used to gauge recovery progress per the patients' perspective at the time of discharge, 31% of patients reported they were better at taking care of personal responsibilities (e.g., paying bills, following through on personal or professional commitments), 38% reported they were better with handling drug and alcohol use (e.g., the frequency and amount of use, money spent on drugs, amount of drug craving, being sick, etc.), 32% reported they were better in physical health (e.g., eating and sleeping properly, exercising, taking care of health or dental problems), 32% reported they were better in mental health (e.g., feeling good about themselves), and 31% reported they were a better community member (e.g., obeying laws, meeting your responsibilities to society, positive impact on others) compared to at admission (Figure 1.3).

Figure 1.3. Treatment Effectiveness Assessment (TEA), FY2223



Chapter 2

Patient Characteristics by Primary Substance of Use



Chapter 2 provides the number of admissions and discharges, patient characteristics, discharge status, substance use status, and levels of care for the six commonly reported primary substances (**heroin, methamphetamine, marijuana, alcohol, prescription drug, and cocaine**) misused/abused.

Patients with Heroin as Primary Substance of Use

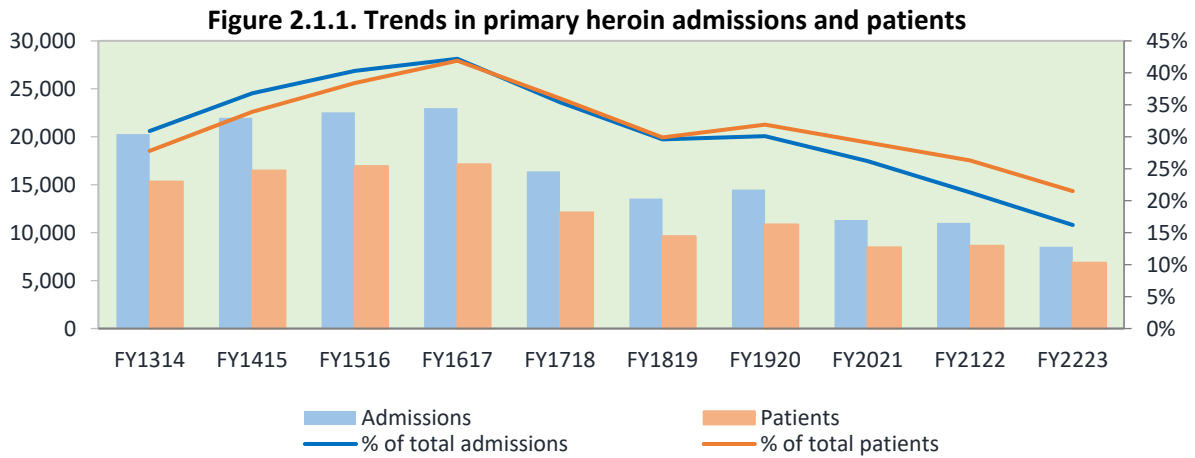
TREATMENT ADMISSIONS AND DISCHARGES

There were 8,533 admissions (6,875 patients) reporting heroin as the primary substance use, accounting for 16.2% of total treatment admissions (Table 2.1.1).

Table 2.1.1. Treatment admissions and discharges among primary heroin patients, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	8,533	16.2	6,875	21.5
Discharged	4,208	11.2	3,268	14.0

The number and proportion of primary heroin admissions and patients increased from FY1314 to FY1617 and decreased thereafter. Specifically, the number of primary heroin admissions decreased by 62.9%, from 22,982 in FY1617 to 8,533 in FY2223 (Figure 2.1.1).



Of the discharges, 45.2% had positive compliance, with 26.1% completing the treatment and 19.1% leaving treatment with satisfactory progress (Table 2.1.2).

Table 2.1.2. Discharge status of primary heroin patients, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	1,777	45.2
Completed treatment	1,026	26.1
Left – satisfactory progress	751	19.1
Negative compliance	2,056	52.3
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	98	2.5

Note: Percentages are based on non-missing values and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

The majority of primary heroin patients were male (70.6%), Latinx (47.5%), ages 55-64 (23.7%), and unemployed (62.4%). Among primary heroin admissions, 26.7% reported having mental health issues (Table 2.1.3).

Table 2.1.3. Characteristics of primary heroin patients, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	4,840	70.6
	Female	2,005	29.2
	Transgender male	-	-
	Transgender female	7	0.1
	Non-conforming or refuse to state	-	-
RACE	Latinx	3,251	47.5
	White	2,953	43.1
	Black/African American	477	7.0
	Asian	78	1.1
	Pacific Islander	7	0.1
	American Indian/Alaska Native	45	0.7
	Other	33	0.5
AGE	17 and under	-	-
	18-25	194	2.8
	26-34	1,477	21.5
	35-44	1,473	21.4
	45-54	1,058	15.4
	55-64	1,631	23.7
	65+	1,042	15.2
SEXUAL ORIENTATION	Heterosexual	5,669	95.6
	Gay, lesbian, or bisexual	160	2.7
	Something else	-	-
	Unsure/questioning	27	0.5
	Prefer not to state	74	1.2
EDUCATION	Middle school or below	213	3.2
	Some high school	1,590	23.6
	High school completed	3,763	55.8
	Some college or beyond	1,182	17.5
EMPLOYMENT	Employed	1,622	19.1
	Unemployed (seeking)	2,881	34.0
	Unemployed (not seeking)	2,405	28.4
	Not in labor force	1,568	18.5
HOMELESS	Homeless at Admission	1,235	18.0
AGE OF FIRST PRIMARY SUBSTANCE USE	11 & under	72	0.8
	12-17	2,236	26.2
	18-25	4,120	48.3
	26 and over	2,100	24.6
MENTAL HEALTH ISSUES	Yes	2,266	26.7
	No	6,219	73.3
PHYSICAL HEALTH ISSUES	Yes	921	10.9
	No	7,535	89.1
DISABILITY	Yes	1,014	12.5
	No	7,072	87.5
CRIMINAL JUSTICE	Yes	1,338	15.8
	No	7,125	84.2

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.

SUBSTANCE USE STATUS AT ADMISSION

Among primary heroin admissions, 42.0% reported poly-drug use. Almost half (49.7%) reported using heroin every day in the 30 days prior to admission. The majority (77.7%) of primary heroin admissions received SUD treatment previously (Table 2.1.4).

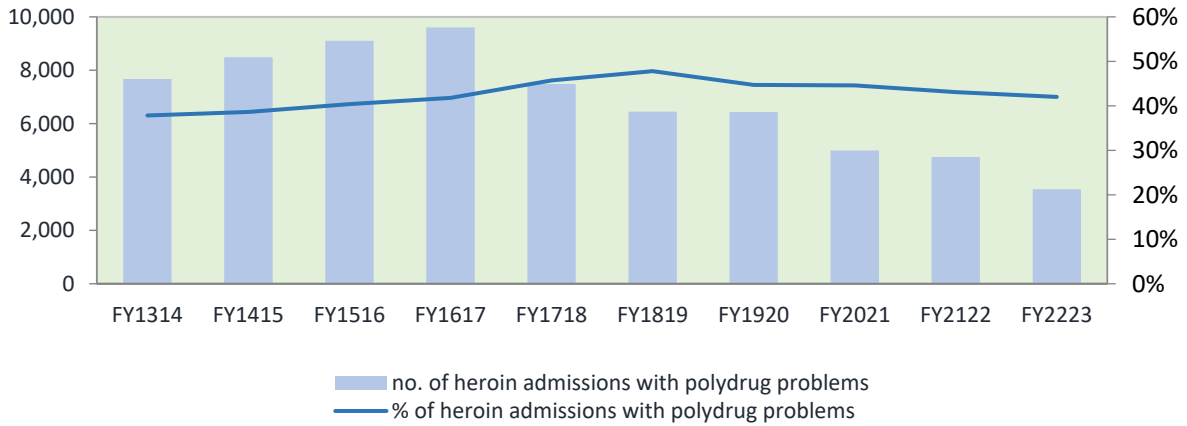
Table 2.1.4. Substance use status among primary heroin patients, FY2223

SUBSTANCE USE STATUS		ADMISSIONS	%
POLY-DRUG	Heroin use only	4,883	58.0
	Heroin with other substance use	3,542	42.0
FREQUENCY OF USE IN PAST MONTH	No use	2,520	29.5
	1-9 days	558	6.5
	10-19 days	521	6.1
	20-29 days	696	8.2
	Every day	4,236	49.7
PRIOR SUD TREATMENT ADMISSIONS	None	1,791	22.4
	1-2	3,528	44.1
	3-4	1,402	17.5
	5+	1,288	16.1

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

The proportion of admissions with poly-drug use among primary heroin patients continually increased from 37.8% in FY1314 to 47.8% in FY1819, then decreased to 42.0% in FY2223 (Figure 2.1.2).

Figure 2.1.2. Trends in poly-drug use among primary heroin patients



LEVEL OF CARE

As expected, the majority of primary heroin admissions were admitted to opioid treatment programs (74.3%), followed by residential service programs (8.6%) and withdrawal management programs (7.0%) (Table 2.1.5).

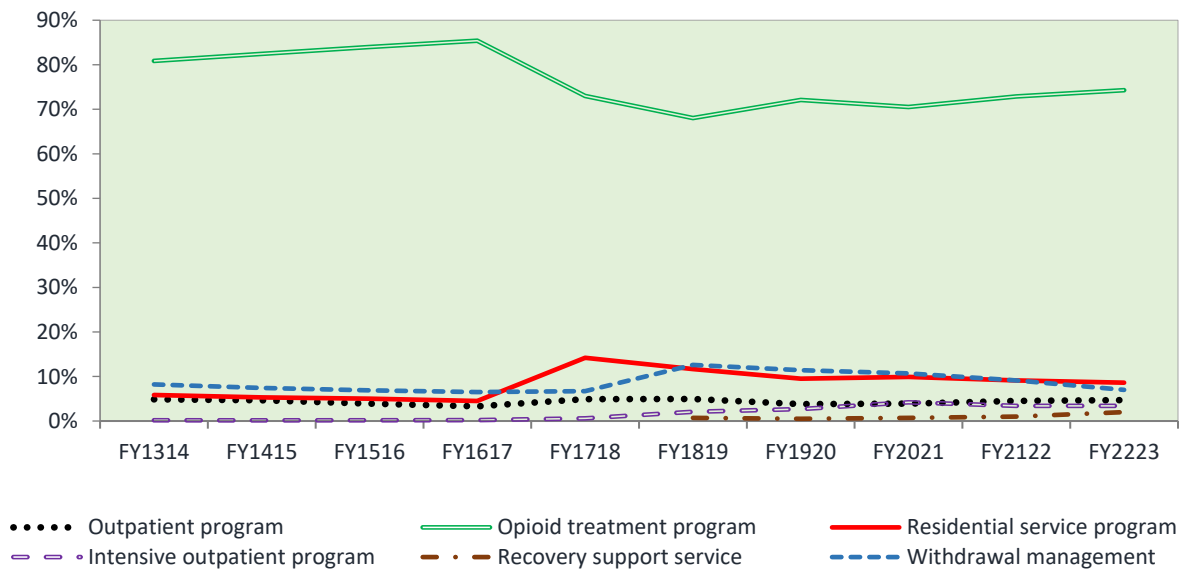
Table 2.1.5. Level of care among primary heroin patients, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	599	7.0
ASAM WM 2	7	0.1
ASAM WM 3.2	526	6.2
ASAM WM 3.7/4.0	66	0.8
Residential Service	733	8.6
ASAM 3.1	424	5.0
ASAM 3.3	-	-
ASAM 3.5	307	3.6
Intensive Outpatient (ASAM 2.1)	289	3.4
Outpatient	402	4.7
Opioid Treatment Program (ASAM OTP)	6,334	74.3
Recovery Support Service	169	2.0

Note: Percentages are based on non-missing values and may not sum to 100% due to rounding.
N ≤ 5 not reported to protect confidentiality.

Among the primary heroin patients, the proportion of admissions to opioid treatment programs consistently decreased from 85.4% in FY1617 to 68.0% in FY1819 and increased back to 74.3% in FY2223. In comparison, the proportion of admissions to withdrawal management programs increased from 6.5% in FY1617 to 9.1% in FY2122 and went back down to 7.0% in FY2223 (Figure 2.1.3).

Figure 2.1.3. Trends in level of care among primary heroin patients



Patients with Methamphetamine as Primary Substance of Use

TREATMENT ADMISSIONS AND DISCHARGES

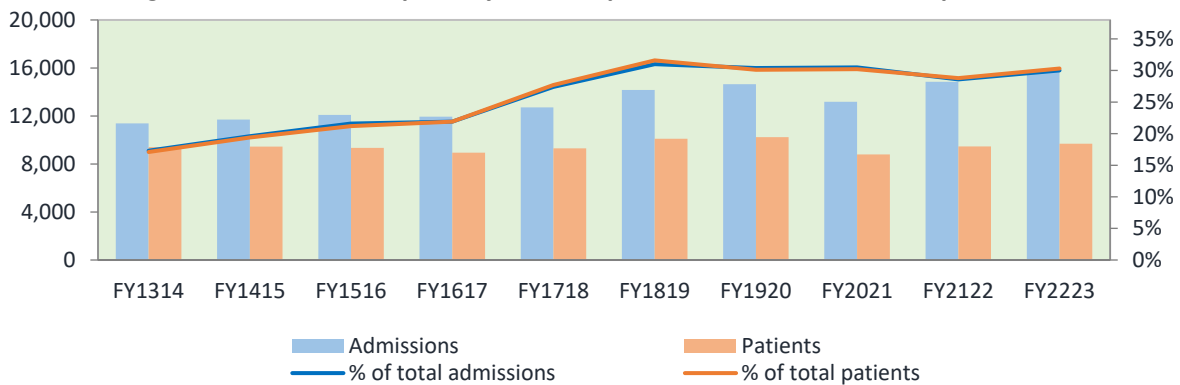
There were 15,791 admissions (9,684 patients) reporting methamphetamine as the primary substance use, accounting for 30.0% of total treatment admissions (Table 2.2.1).

Table 2.2.1. Treatment admissions and discharges among primary methamphetamine patients, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	15,791	30.0	9,684	30.3
Discharged	12,470	33.2	8,114	34.8

The proportion of primary methamphetamine admissions steadily increased from 17.3% in FY1314 to 30.0% in FY2223. There was a 32.2% increase in the number of admissions from 11,945 in FY1617 to 15,791 in FY2223 (Figure 2.2.1).

Figure 2.2.1. Trends in primary methamphetamine admissions and patients



Of the discharges, 51.8% had positive compliance, with 40.7% completing treatment, and 11.1% leaving the program with satisfactory progress (Table 2.2.2).

Table 2.2.2. Discharge status of primary methamphetamine patients, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	6,109	51.8
Completed treatment	4,803	40.7
Left – satisfactory progress	1,306	11.1
Negative compliance	5,243	44.5
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	442	3.7

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

The majority of primary methamphetamine patients were male (61.7%), Latinx (65.2%), ages 26-34 (42.3%), and unemployed (70.8%). In addition, 56.2% were homeless, 56.8% reported having mental health issues, and 34.4% were involved in the criminal justice system (Table 2.2.3).

Table 2.2.3. Characteristics of primary methamphetamine patients, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	5,941	61.7
	Female	3,587	37.8
	Transgender male	14	0.1
	Transgender female	73	0.8
	Non-conforming or refuse to state	8	0.1
RACE	Latinx	6,305	65.2
	White	1,652	17.1
	Black/African American	1,377	14.2
	Asian	194	2.0
	Pacific Islander	28	0.3
	American Indian/Alaska Native	65	0.7
	Other	53	0.5
AGE	17 and under	30	0.3
	18-25	843	8.7
	26-34	4,092	42.3
	35-44	3,110	32.1
	45-54	1,132	11.7
	55-64	441	4.6
	65+	35	0.4
SEXUAL ORIENTATION	Heterosexual	8,383	87.9
	Gay, lesbian, or bisexual	942	9.9
	Something else	-	-
	Unsure/questioning	53	0.6
	Prefer not to state	150	1.6
EDUCATION	Middle school or below	270	2.8
	Some high school	2,728	28.3
	High school completed	4,822	50.0
	Some college or beyond	1,818	18.9
EMPLOYMENT	Employed	2,021	12.8
	Unemployed (seeking)	6,902	43.8
	Unemployed (not seeking)	4,252	27.0
	Not in labor force	2,596	16.5
HOMELESS	Homeless at admission	5,440	56.2
AGE OF FIRST PRIMARY SUBSTANCE USE	11 & under	279	1.8
	12-17	6,072	38.5
	18-25	5,968	37.8
	26 and over	3,471	22.0
MENTAL HEALTH ISSUES	Yes	8,957	56.8
	No	6,802	43.2
PHYSICAL HEALTH ISSUES	Yes	1,783	11.3
	No	13,951	88.7
DISABILITY	Yes	2,157	14.7
	No	12,530	85.3
CRIMINAL JUSTICE	Yes	5,409	34.4
	No	10,328	65.6

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.

SUBSTANCE USE STATUS AT ADMISSION

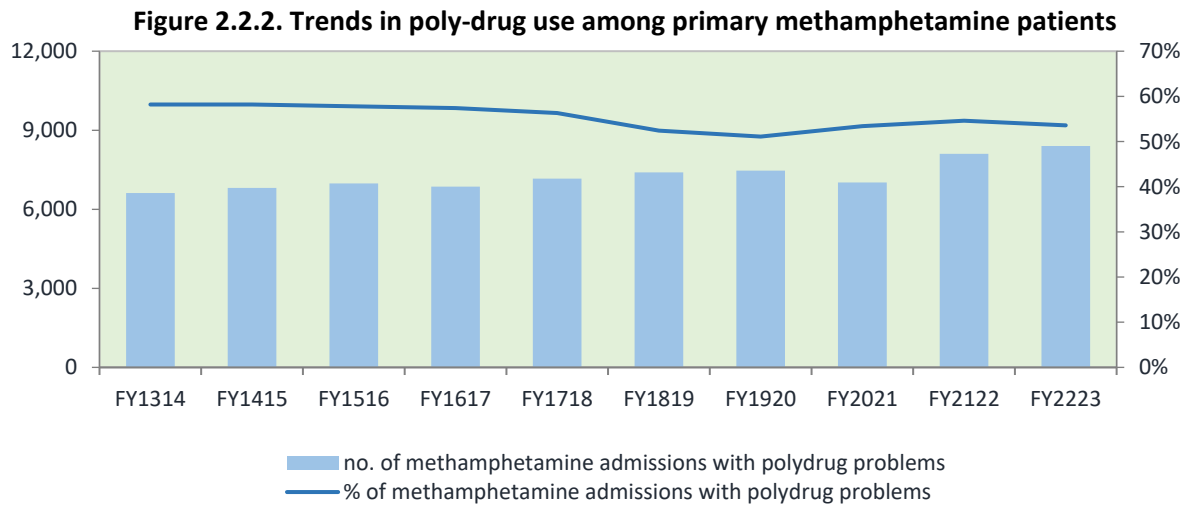
Among primary methamphetamine admissions, 53.6% reported poly-drug use, 11.5% of primary methamphetamine admissions used the drug every day in the 30 days prior to admission, and 66.4% had one or more prior treatment admissions (Table 2.2.4).

Table 2.2.4. Substance use status among primary methamphetamine patients, FY2223

SUBSTANCE USE STATUS		ADMISSIONS	%
POLY-DRUG	Methamphetamine use only	7,287	46.4
	Methamphetamine with other substance use	8,404	53.6
FREQUENCY OF USE IN PAST MONTH	No use	7,591	48.1
	1-9 days	2,823	17.9
	10-19 days	1,737	11.0
	20-29 days	1,814	11.5
	Every day	1,816	11.5
PRIOR SUD TREATMENT ADMISSIONS	None	4,943	33.6
	1-2	5,564	37.8
	3-4	2,260	15.4
	5+	1,949	13.2

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

The proportion of primary methamphetamine admissions with poly-drug use slightly decreased from 58.2% in FY1314 to 53.6% in FY2223 (Figure 2.2.2).



LEVEL OF CARE

As shown in Table 2.2.5, the most common level of care among primary methamphetamine admissions was residential service programs (47.4%), followed by outpatient programs (26.9%) and intensive outpatient programs (17.6%).

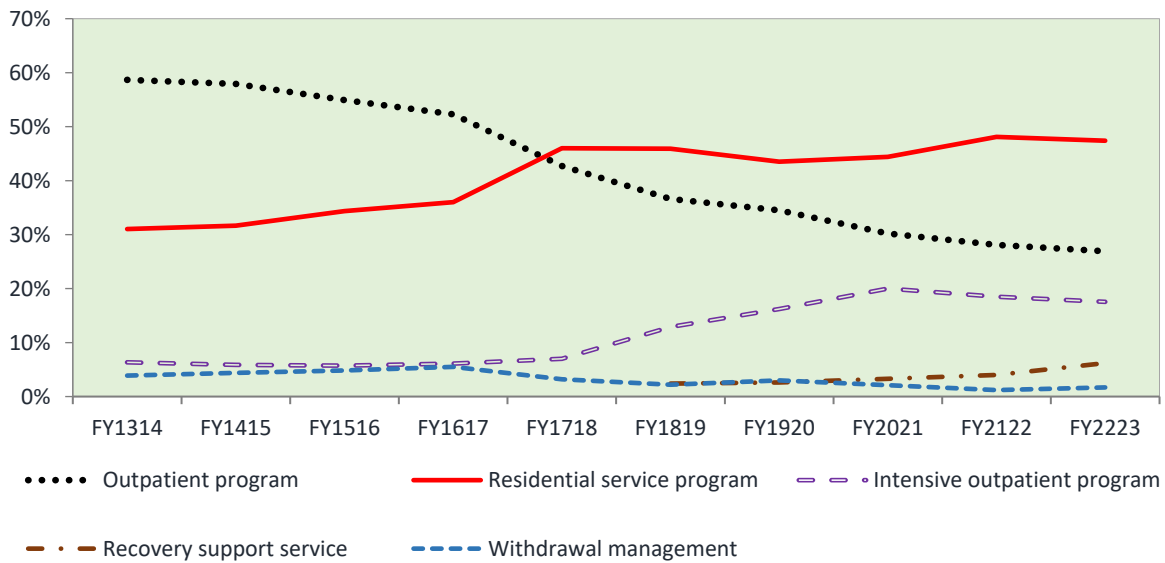
Table 2.2.5. Level of care among primary methamphetamine patients, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	274	1.7
ASAM WM 1	-	-
ASAM WM 2	-	-
ASAM WM 3.2	261	1.6
ASAM WM 3.7/4.0	13	0.1
Residential Service	7,457	47.4
ASAM 3.1	3,715	23.7
ASAM 3.3	58	0.4
ASAM 3.5	3,684	23.4
Intensive Outpatient (ASAM 2.1)	2,761	17.6
Outpatient	4,235	26.9
Recovery Support Service	975	6.2

Note: Percentages are based on non-missing values and may not sum to 100% due to rounding.

The proportion of primary methamphetamine admissions to residential service programs increased from 31.0% in FY1314 to 47.4% in FY2223, surpassing the proportion in outpatient beginning FY1718 (Figure 2.2.3).

Figure 2.2.3. Trends in level of care among primary methamphetamine patients



Patients with Marijuana as Primary Substance of Use

TREATMENT ADMISSIONS AND DISCHARGES

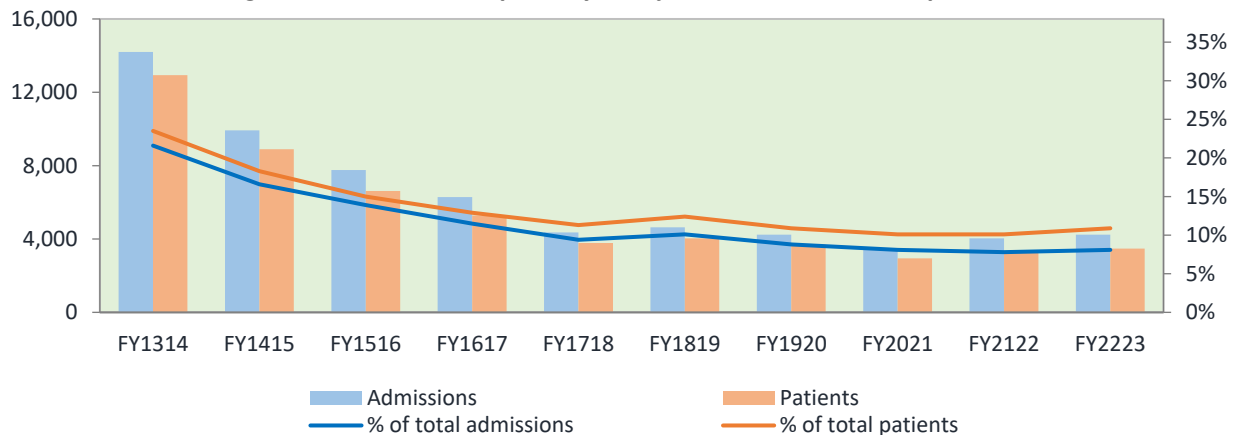
There were 4,239 admissions (3,476 patients) reporting marijuana as the primary substance use, accounting for 8.1% of total treatment admissions (Table 2.3.1).

Table 2.3.1. Treatment admissions and discharges among primary marijuana patients, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	4,239	8.1	3,476	10.9
Discharged	2,972	7.9	2,505	10.8

The number and proportion of primary marijuana admissions and patients steadily decreased from FY1314 to FY2223. In FY1314, about one out of five admissions reported primary marijuana use; this dropped to less than one in ten admissions in FY2223 (Figure 2.3.1).

Figure 2.3.1. Trends in primary marijuana admissions and patients



Of the discharges, 44.6% had positive compliance, with 32.3% completing treatment and 12.3% leaving with satisfactory progress (Table 2.3.2).

Table 2.3.2. Discharge status of primary marijuana patients, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	1,255	44.6
Completed treatment	909	32.3
Left – satisfactory progress	346	12.3
Negative compliance		
(Left – unsatisfactory progress)	1,465	52.0
Other (Death/incarceration/other)	97	3.4

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

The majority of primary marijuana patients were male (60.3%), Latinx (62.7%), ages 17 and under - (31.2%), and unemployed (51.8%). About 82.9% of the primary marijuana patients started to use marijuana when they were aged 17 or younger. 23.7% of the admissions were involved in the criminal justice system (Table 2.3.3).

Table 2.3.3. Characteristics of primary marijuana patients, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	2,062	60.3
	Female	1,337	39.1
	Transgender male	12	0.4
	Transgender female	-	-
	Non-conforming or refuse to state	-	-
RACE	Latinx	2,169	62.7
	White	360	10.4
	Black/African American	839	24.2
	Asian	53	1.5
	Pacific Islander	6	0.2
	American Indian/Alaska Native	13	0.4
	Other	20	0.6
AGE	17 and under	1,084	31.2
	18-25	695	20.0
	26-34	967	27.8
	35-44	491	14.1
	45-54	162	4.7
	55-64	68	2.0
	65+	9	0.3
SEXUAL ORIENTATION	Heterosexual	3,090	89.5
	Gay, lesbian, or bisexual	222	6.4
	Something else	-	-
	Unsure/questioning	44	1.3
	Prefer not to state	93	2.7
EDUCATION	Middle school or below	233	6.8
	Some high school	1,319	38.6
	High school completed	1,343	39.3
	Some college or beyond	523	15.3
EMPLOYMENT	Employed	775	18.5
	Unemployed (seeking)	1,088	25.9
	Unemployed (not seeking)	1,089	25.9
	Not in labor force	1,247	29.7
HOMELESS	Homeless at admission	778	22.4
AGE OF FIRST PRIMARY SUBSTANCE USE	11 & under	396	9.3
	12-17	3,119	73.6
	18-25	615	14.5
	26 and over	109	2.6
MENTAL HEALTH ISSUES	Yes	2,023	47.9
	No	2,206	52.2
PHYSICAL HEALTH ISSUES	Yes	332	7.9
	No	3,886	92.1
DISABILITY	Yes	535	13.7
	No	3,368	86.3
CRIMINAL JUSTICE	Yes	1,001	23.7
	No	3,224	76.3

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.

SUBSTANCE USE STATUS AT ADMISSION

Among primary marijuana admissions, about 45.9% reported poly-drug use, 20.7% used marijuana every day in the past 30 days prior to admissions, 34.6% did not use at all, and 44.6% had one or more prior treatment admissions (Table 2.3.4).

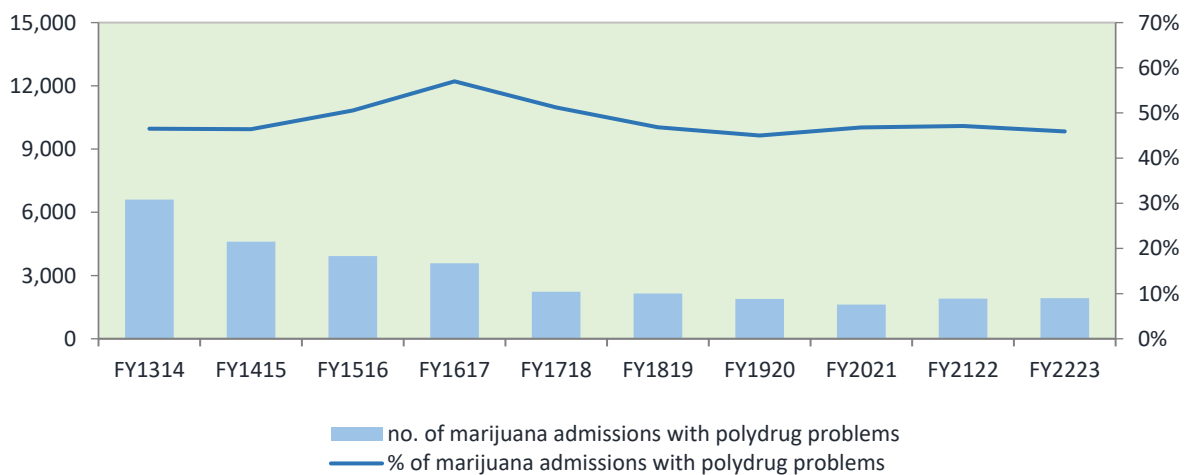
Table 2.3.4. Substance use status among primary marijuana patients, FY2223

SUBSTANCE USE STATUS		ADMISSIONS	%
POLY-DRUG	Marijuana use only	2,272	54.1
	Marijuana with other substance use	1,925	45.9
FREQUENCY OF USE IN PAST MONTH	No use	1,465	34.6
	1-9 days	861	20.3
	10-19 days	528	12.5
	20-29 days	504	11.9
	Every day	877	20.7
PRIOR SUD TREATMENT ADMISSIONS	None	2,157	55.4
	1-2	1,325	34.0
	3-4	264	6.8
	5+	146	3.8

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

The proportion of primary marijuana admissions with poly-drug use increased gradually from 46.5% in FY1314 to 57.0% in FY1617, then dropped to 45.9% in FY2223 (Figure 2.3.2).

Figure 2.3.2. Trends in poly-drug use among primary marijuana patients



LEVEL OF CARE

As presented in Table 2.3.5, the most common level of care for primary marijuana admissions was outpatient programs (57.0%), followed by residential service programs (19.6%) and intensive outpatient programs (16.5%).

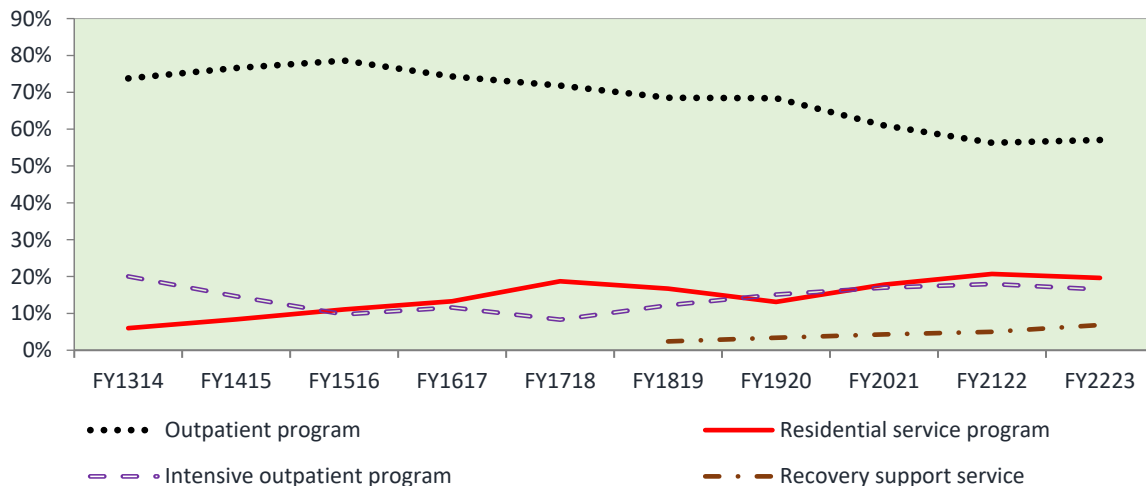
Table 2.3.5. Level of care among primary marijuana patients, FY2223

LEVEL OF CARE	ADMISSIONS	%
Residential Service	825	19.6
ASAM 3.1	389	9.2
ASAM 3.3	8	0.2
ASAM 3.5	428	10.1
Intensive Outpatient (ASAM 2.1)	693	16.5
Outpatient	2,398	57.0
Recovery Support Service	288	6.8

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
N ≤ 5 not reported to protect confidentiality.

The proportions of the outpatient level of care increased from 73.8% in FY1314 to 78.6% in FY1516, which then continually decreased to 57.0% in FY2223. However, the outpatient level still remained the highest for the past ten fiscal years. The proportion of primary marijuana admissions to residential service programs increased overall from 6.0% in FY1314 to 19.6% in FY2223 (Figure 2.3.3).

Figure 2.3.3. Trends in level of care among primary marijuana patients



Patients with Alcohol as Primary Substance of Use

TREATMENT ADMISSIONS AND DISCHARGES

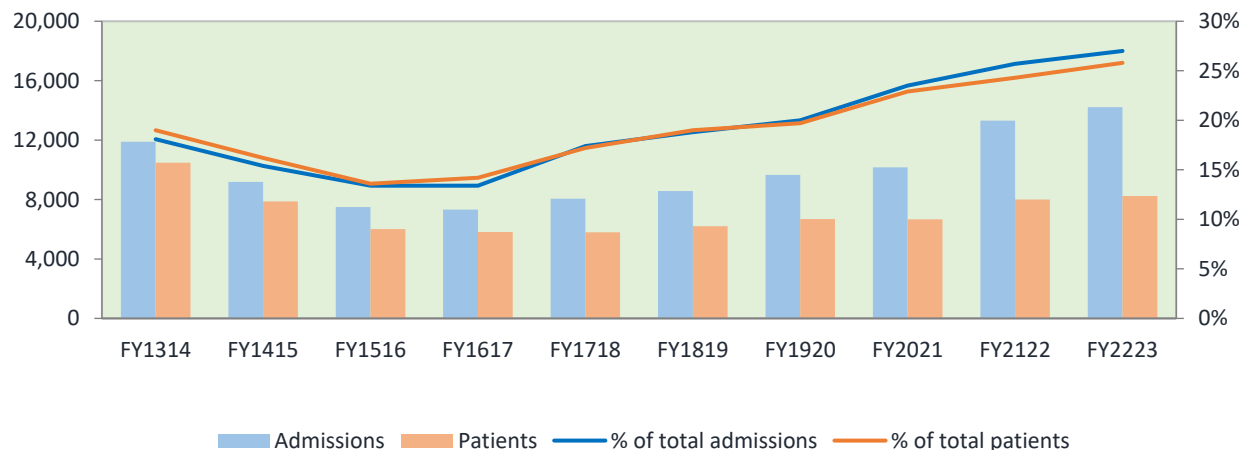
There were 14,215 alcohol admissions (8,234 patients) reporting alcohol as the primary substance use, accounting for 27.0% of all treatment admissions (Table 2.4.1).

Table 2.4.1. Treatment admissions and discharges among primary alcohol patients, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	14,215	27.0	8,234	25.8
Discharged	11,128	29.6	6,855	29.4

The number and proportion of primary alcohol admissions and patients increased in the last five fiscal years. Specifically, the proportion of alcohol admissions increased two-fold from 13.4% in FY1617 to 27.0% in FY2223 (Figure 2.4.1).

Figure 2.4.1. Trends in primary alcohol admissions and patients



Of the discharges, more than half (64.9%) had positive compliance, with 54.5% completing treatment and 10.4% leaving the program with satisfactory progress (Table 2.4.2).

Table 2.4.2. Discharge status of primary alcohol patients, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	6,937	64.9
Completed treatment	5,826	54.5
Left – satisfactory progress	1,111	10.4
Negative compliance	3,522	32.9
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	236	2.2

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

The majority of primary alcohol patients were male (64.9%), Latinx (57.6%), ages 26-34 (33.3%), and unemployed (71.2%). Among primary alcohol admissions, 63.7% reported having mental health issues, 44.2% were homeless, and 22.5% reported having a disability (Table 2.4.3).

Table 2.4.3. Characteristics of primary alcohol patients, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	5,304	64.9
	Female	2,840	34.8
	Transgender male	10	0.1
	Transgender female	14	0.2
	Non-conforming or refuse to state	-	-
RACE	Latinx	4,740	57.6
	White	1,881	22.9
	Black/African American	1,356	16.5
	Asian	118	1.4
	Pacific Islander	15	0.2
	American Indian/Alaska Native	66	0.8
	Other	47	0.6
AGE	17 and under	68	0.8
	18-25	610	7.4
	26-34	2,744	33.3
	35-44	2,440	29.6
	45-54	1,377	16.7
	55-64	904	11.0
	65+	89	1.1
SEXUAL ORIENTATION	Heterosexual	7,443	91.4
	Gay, lesbian, or bisexual	515	6.3
	Something else	6	0.1
	Unsure/questioning	49	0.6
	Prefer not to state	128	1.6
EDUCATION	Middle school or below	308	3.8
	Some high school	1,501	18.3
	High school completed	3,779	46.2
	Some college or beyond	2,592	31.7
EMPLOYMENT	Employed	2,450	17.3
	Unemployed (seeking)	6,012	42.4
	Unemployed (not seeking)	4,093	28.8
	Not in labor force	1,639	11.5
HOMELESS	Homeless at admission	3,641	44.2
AGE OF FIRST PRIMARY SUBSTANCE USE	11 & under	1,251	8.8
	12-17	8,602	60.5
	18-25	3,735	26.3
	26 and over	623	4.4
MENTAL HEALTH ISSUES	Yes	9,038	63.7
	No	5,161	36.3
PHYSICAL HEALTH ISSUES	Yes	2,236	15.8
	No	11,948	84.2
DISABILITY	Yes	2,977	22.5
	No	10,268	77.5
CRIMINAL JUSTICE	Yes	2,472	17.4
	No	11,711	82.6

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.

SUBSTANCE USE STATUS AT ADMISSION

Among primary alcohol admissions, 51.4% reported poly-drug use, 67.6% used alcohol at least one day in the 30 days prior to admission, 32.4% did not use it at all, and 71.2% had one or more prior treatment admissions (Table 2.4.4).

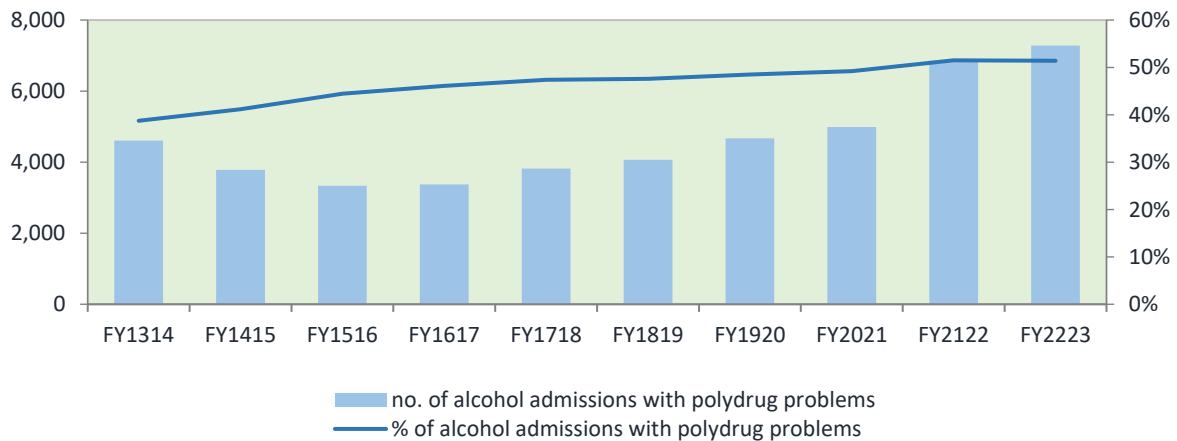
Table 2.4.4. Substance use status among primary alcohol patients, FY2223

SUBSTANCE USE STATUS		ADMISSIONS	%
POLY-DRUG	Alcohol use only	6,893	48.6
	Alcohol with other substance use	7,283	51.4
FREQUENCY OF USE IN PAST MONTH	No use	4,592	32.4
	1-9 days	2,257	15.9
	10-19 days	1,832	12.9
	20-29 days	2,486	17.5
	Every day	3,020	21.3
PRIOR SUD TREATMENT ADMISSIONS	None	3,908	28.8
	1-2	4,922	36.3
	3-4	1,929	14.2
	5+	2,805	20.7

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

The percentage of primary alcohol admissions with poly-drug use started increasing in FY1314. The proportion increased continuously from 38.7% in FY1314 to 51.4% in FY2223 (Figure 2.4.2).

Figure 2.4.2. Trends in poly-drug use among primary alcohol patients



LEVEL OF CARE

The most common level of care for primary alcohol admissions was residential service programs (30.7%), followed by outpatient programs (26.7%) and withdrawal management programs (22.2%) (Table 2.4.5).

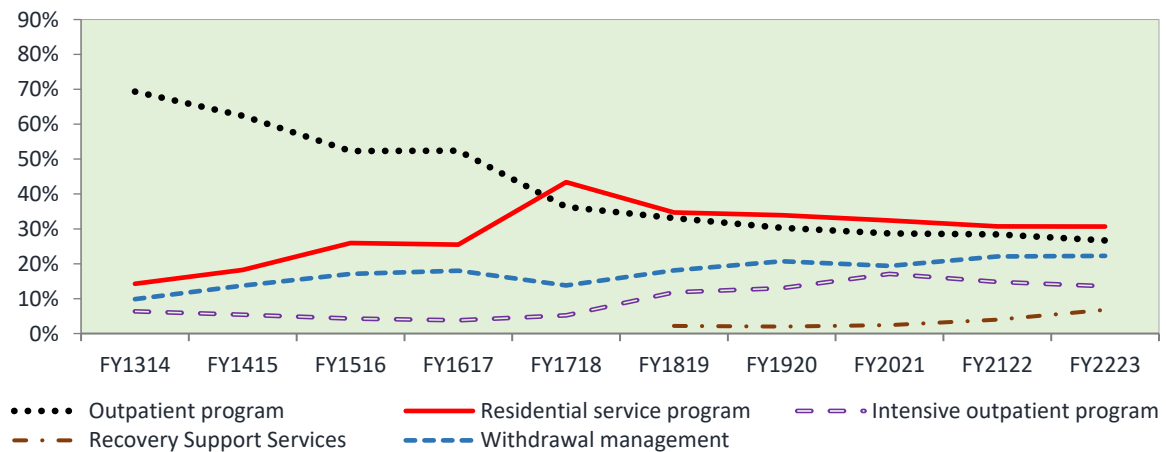
Table 2.4.5. Level of care among primary alcohol patients, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	3,139	22.3
ASAM WM 1	-	-
ASAM WM 2	48	0.3
ASAM WM 3.2	1,860	13.2
ASAM WM 3.7/4.0	1,231	8.7
Residential Service	4,327	30.7
ASAM 3.1	2,046	14.5
ASAM 3.3	15	0.1
ASAM 3.5	2,266	16.0
Intensive Outpatient (ASAM 2.1)	1,915	13.6
Outpatient	3,764	26.7
Recovery Support Service	959	6.8

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

Over the past decade, there has been a noticeable decline in the proportion of primary alcohol admissions to outpatient programs. Conversely, there has been a significant surge in the proportion of primary alcohol admissions to residential service programs, which rose from 14.3% in FY1314 to 43.4% in FY1718, before decreasing to 30.7% in FY2223. In addition, during the period between FY1718 and FY2223, the proportion of primary alcohol admissions to withdrawal management programs has increased (Figure 2.4.3).

Figure 2.4.3. Trends in level of care among primary alcohol patients



Patients with Prescription Drug as Primary Substance of Use

TREATMENT ADMISSIONS AND DISCHARGES

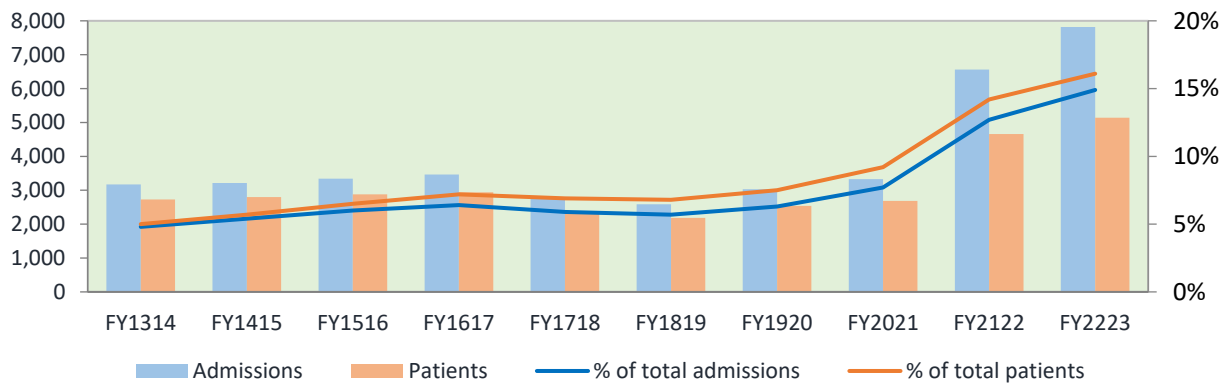
There were 7,816 admissions (5,140 patients) reporting prescription drug (Rx) as the primary substance use, accounting for 14.9% of total treatment admissions (Table 2.5.1).

Table 2.5.1 Treatment admissions and discharges among primary Rx misuse patients, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	7,861	14.9	5,140	16.1
Discharged	5,216	13.9	3,409	14.6

Over the course of the past decade, there has been a notable upward trajectory in both the number and proportion of primary Rx admissions and patients. Specifically, the proportion of primary Rx admissions experienced substantial growth, rising from 4.8% in FY1314 to reach 14.9% in FY2223 (Figure 2.5.1).

Figure 2.5.1. Trends in primary Rx admissions and patients



Of the discharges, about half had positive compliance (50.7%), with 35.7% completing treatment, and 15.0% leaving the treatment program with satisfactory progress (Table 2.5.2).

Table 2.5.2. Discharge status of primary Rx misuse patients, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	2,545	50.7
Completed treatment	1,793	35.7
Left – satisfactory progress	752	15.0
Negative compliance		
(Left – unsatisfactory progress)	2,379	47.4
Other (Death/incarceration/other)	92	1.8

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

The majority of primary Rx patients were male (64.4%), White (45.8%), ages 26-34 (34.9%), and unemployed (69.6%). Among primary Rx admissions, 47.9% reported mental health issues (Table 2.5.3).

Table 2.5.3. Characteristics of primary Rx misuse patients, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	3,281	64.4
	Female	1,798	35.3
	Transgender male	-	-
	Transgender female	6	0.1
	Non-conforming or refuse to state	-	-
RACE	Latinx	2,110	41.2
	White	2,344	45.8
	Black/African American	508	9.9
	Asian	93	1.8
	Pacific Islander	-	-
	American Indian/Alaska Native	30	0.6
	Other	34	0.7
AGE	17 and under	71	1.4
	18-25	727	14.1
	26-34	1,794	34.9
	35-44	1,241	24.1
	45-54	598	11.6
	55-64	471	9.2
	65+	238	4.6
SEXUAL ORIENTATION	Heterosexual	4,586	93.3
	Gay, lesbian, or bisexual	228	4.6
	Something else	-	-
	Unsure/questioning	24	0.5
	Prefer not to state	74	1.5
EDUCATION	Middle school or below	85	1.7
	Some high school	839	16.5
	High school completed	2,811	55.4
	Some college or beyond	1,343	26.4
EMPLOYMENT	Employed	1,276	16.4
	Unemployed (seeking)	3,221	41.3
	Unemployed (not seeking)	2,202	28.3
	Not in labor force	1,095	14.0
HOMELESS	Homeless at admission	1,580	30.7
AGE OF FIRST PRIMARY SUBSTANCE USE	11 & under	53	0.7
	12-17	1,322	16.9
	18-25	3,013	38.6
	26 and over	3,414	43.8
MENTAL HEALTH ISSUES	Yes	3,735	47.9
	No	4,057	52.1
PHYSICAL HEALTH ISSUES	Yes	980	12.6
	No	6,797	87.4
DISABILITY	Yes	1,182	15.9
	No	6,274	84.1
CRIMINAL JUSTICE	Yes	935	12.0
	No	6,843	88.0

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.



SUBSTANCE USE STATUS AT ADMISSION

Among the primary Rx admissions, a significant majority (91.7%) reported opioids as their primary substance of use. In addition, 45.5% of these admissions reported daily usage of prescription drug in the 30 days leading up to their treatment admission. Furthermore, the majority of these admissions reported engaging in poly drug use (93.8%) (Table 2.5.4).

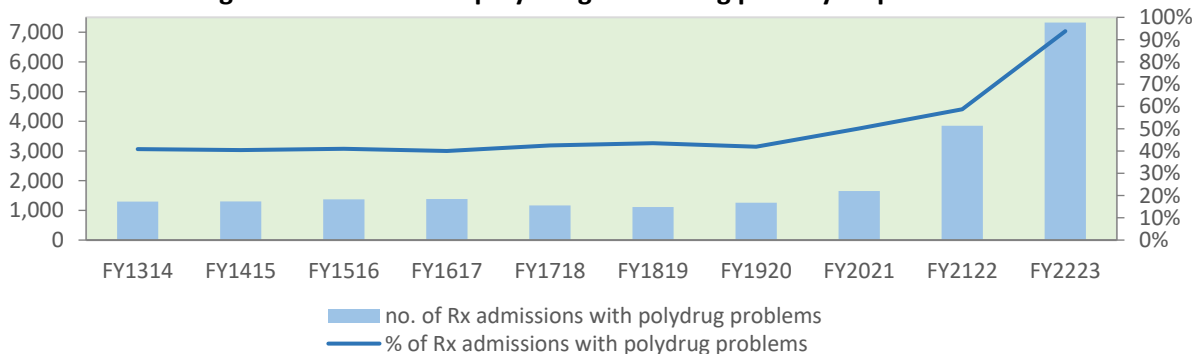
Table 2.5.4. Substance use status among primary Rx misuse patients, FY2223

SUBSTANCE USE STATUS		ADMISSIONS	%
POLY-DRUG	Rx use only	482	6.2
	Rx with other substance use	7,326	93.8
FREQUENCY OF USE IN PAST MONTH	No use	1,675	21.5
	1-9 days	622	8.0
	10-19 days	803	10.3
	20-29 days	1,153	14.8
	Every day	3,545	45.5
RX CATEGORIES	Opioids	7,169	91.7
	OxyContin	535	6.8
	Non-Rx methadone	74	1.0
	Other opiates and synthetics	6,560	83.9
	Sedatives	500	6.4
	Benzodiazepines	212	2.7
	Barbiturates	13	0.2
	Other sedatives	261	3.3
	Other tranquilizers	14	0.2
	Stimulants	142	1.8
	Amphetamines	47	0.6
	Other stimulants	95	1.2
	Other Rx	-	-
PRIOR SUD TREATMENT ADMISSIONS	None	1,688	22.5
	1-2	3,104	41.4
	3-4	1,142	15.2
	5+	1,560	20.8

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

The proportion of primary Rx admissions with poly-drug use surged from 58.7% in FY2122 to 93.8% in FY2223, an increase of 35.1 percentage points (Figure 2.5.2).

Figure 2.5.2. Trends in poly-drug use among primary Rx patients



LEVEL OF CARE

The most common level of care among primary Rx admissions was opioid treatment programs (42.4%), followed by withdrawal management (23.9%) and residential service programs (16.8%) (Table 2.5.5).

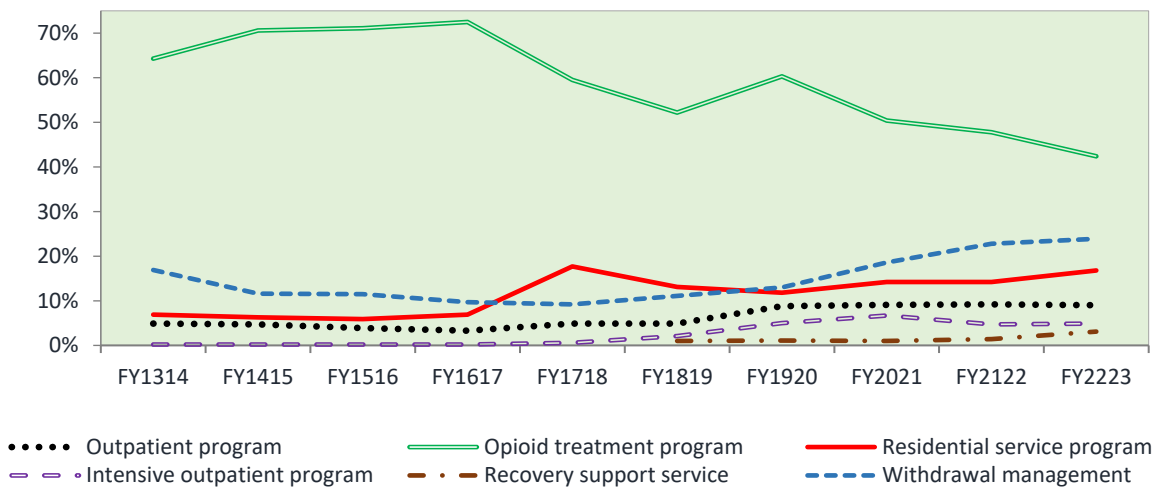
Table 2.5.5. Level of care among primary Rx misuse patients, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	1,863	23.9
ASAM WM 1	12	0.2
ASAM WM 2	38	0.5
ASAM WM 3.2	1,488	19.1
ASAM WM 3.7/4.0	325	4.2
Residential Service	1,311	16.8
ASAM 3.1	672	8.6
ASAM 3.3	-	-
ASAM 3.5	637	8.2
Intensive Outpatient (ASAM 2.1)	379	4.9
Outpatient	699	9.0
Opioid Treatment Program (ASAM OTP)	3,300	42.4
Recovery Support Service	239	3.1

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding. N ≤ 5 not reported to protect confidentiality.

Over the years, there have been notable changes in the proportions of opioid treatment, withdrawal management, and residential service programs catering to primary Rx admissions. Specifically, the proportion of opioid treatment programs witnessed an upward trend, rising from 64.3% in FY1314 to 72.5% in FY1617, but subsequently experienced a decline, reaching 42.4% in FY2223. On the other hand, the proportion of withdrawal management programs has been steadily increasing from 9.2% in FY1718 to 23.9% in FY2223. As for residential service programs, the proportion of primary Rx admissions remained relatively stable from FY1314 to FY1617, followed by an increase in FY1718, and then maintaining a steady level through FY2223 (Figure 2.5.3).

Figure 2.5.3. Trends in level of care among primary Rx misuse patients



Patients with Cocaine as Primary Substance of Use

TREATMENT ADMISSIONS AND DISCHARGES

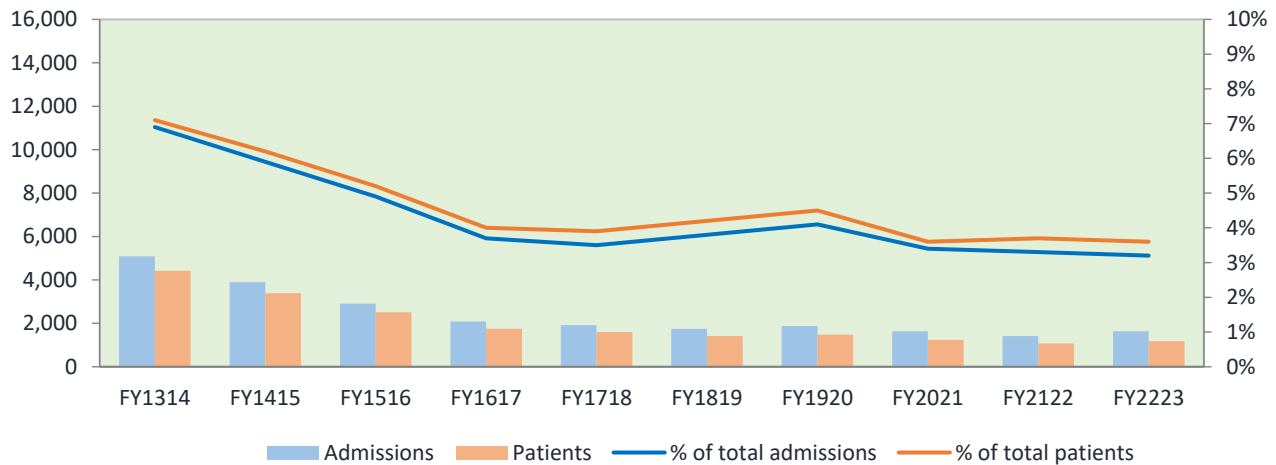
There were 1,570 admissions (1,130 patients) reporting cocaine as the primary substance use, accounting for 3.0% of total treatment admissions (Table 2.6.1).

Table 2.6.1. Treatment admissions and discharges among primary cocaine patients, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of patients
Admitted	1,570	3.0	1,130	3.5
Discharged	1,245	3.3	933	4.0

The number and proportion of primary cocaine admissions and patients declined markedly over the past ten fiscal years, with the proportion of admissions decreasing from about 5.9% in FY1314 to 3.0% in FY2223 (Figure 2.6.1).

Figure 2.6.1. Trends in primary cocaine admissions and patients



Of the discharges, over half had positive compliance (50.7%), with 40.6% completing treatment and 10.0% leaving the program with satisfactory progress (Table 2.6.2).

Table 2.6.2. Discharge status of primary cocaine patients, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	601	50.7
Completed treatment	482	40.6
Left – satisfactory progress	119	10.0
Negative compliance		
(Left – unsatisfactory progress)	545	46.0
Other (Death/incarceration/other)	40	3.4

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

The majority of primary cocaine patients were male (65.3%), Black/African American (52.9%), ages 55-64 (25.1%), and unemployed (68.5%). Among primary cocaine admissions, over half (56.8%) had mental health issues, 45.7% were homeless, and 20.3% reported having a disability (Table 2.6.3).

Table 2.6.3. Characteristics of primary cocaine patients, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	733	65.3
	Female	387	34.5
	Transgender male	-	-
	Transgender female	-	-
	Non-conforming or refuse to state	-	-
RACE	Latinx	364	32.2
	White	127	11.2
	Black/African American	597	52.9
	Asian	27	2.4
	Pacific Islander	-	-
	American Indian/Alaska Native	-	-
	Other	12	1.1
AGE	17 and under	-	-
	18-25	79	7.0
	26-34	278	24.6
	35-44	229	20.3
	45-54	214	18.9
	55-64	284	25.1
	65+	42	3.7
SEXUAL ORIENTATION	Heterosexual	1,020	91.8
	Gay, lesbian, or bisexual	66	5.9
	Something else	-	-
	Unsure/questioning	8	0.7
	Prefer not to state	17	1.5
EDUCATION	Middle school or below	33	2.9
	Some high school	238	21.1
	High school completed	577	51.2
	Some college or beyond	279	24.8
EMPLOYMENT	Employed	223	14.2
	Unemployed (seeking)	581	37.1
	Unemployed (not seeking)	493	31.4
	Not in labor force	271	17.3
HOMELESS	Homeless at admission	516	45.7
AGE OF FIRST PRIMARY SUBSTANCE USE	11 & under	20	1.3
	12-17	432	27.5
	18-25	742	47.3
	26 and over	375	23.9
MENTAL HEALTH ISSUES	Yes	889	56.8
	No	676	43.2
PHYSICAL HEALTH ISSUES	Yes	231	14.8
	No	1,331	85.2
DISABILITY	Yes	297	20.3
	No	1,167	79.7
CRIMINAL JUSTICE	Yes	415	26.5
	No	1,153	73.5

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
 N ≤ 5 not reported to protect confidentiality.



SUBSTANCE USE STATUS AT ADMISSION

Among primary cocaine admissions, 63.4% reported poly-drug use, 10.5% of the admissions used cocaine every day in the 30 days prior to admission, and 66.4% had one or more prior SUD treatment admissions (Table 2.6.4).

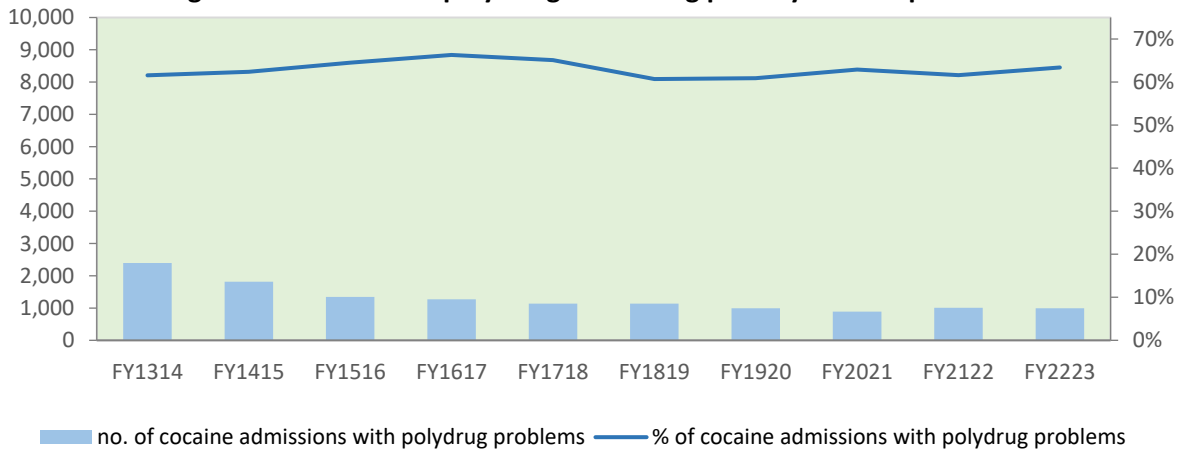
Table 2.6 4. Substance use status among primary cocaine patients, FY2223

SUBSTANCE USE STATUS		ADMISSIONS	%
POLY-DRUG	Cocaine use only	572	36.6
	Cocaine with other substance use	991	63.4
FREQUENCY OF USE IN PAST MONTH	No use	650	41.8
	1-9 days	323	20.6
	10-19 days	195	12.4
	20-29 days	234	14.9
	Every day	165	10.5
PRIOR SUD TREATMENT ADMISSIONS	None	502	33.7
	1-2	586	39.4
	3-4	202	13.6
	5+	199	13.4

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

Starting in FY1314, there has been a significant decrease in the number of primary cocaine admissions involving poly-drug use. However, the proportion of admissions remained relatively stable throughout the past ten fiscal years, ranging from 60.7% to 63.4% (Figure 2.6.2).

Figure 2.6.2. Trends in poly-drug use among primary cocaine patients



LEVEL OF CARE

The most common level of care among primary cocaine admissions was residential service programs (46.1%), followed by outpatient programs (29.0%) and intensive outpatient programs (17.2%) (Table 2.6.5).

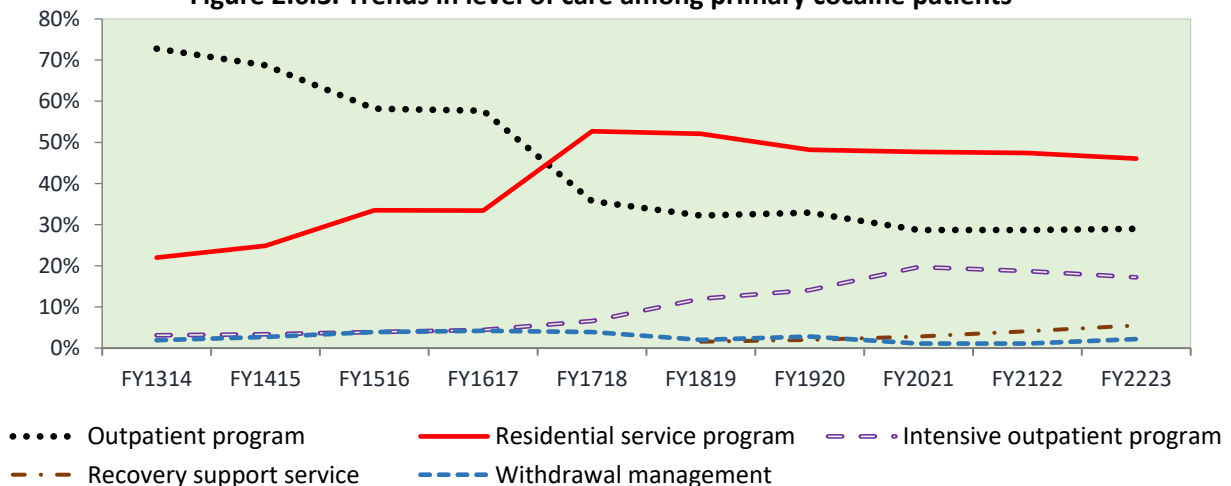
Table 2.6 5. Level of care among primary cocaine patients, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	35	2.2
ASAM WM 3.2	31	2.0
ASAM WM 3.7/4.0	-	-
Residential Service	717	46.1
ASAM 3.1	354	22.7
ASAM 3.3	-	-
ASAM 3.5	358	23.0
Intensive Outpatient (ASAM 2.1)	268	17.2
Outpatient	451	29.0
Recovery Support Service	86	5.5

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
N ≤ 5 not reported to protect confidentiality

There has been a noticeable decline in the proportion of primary cocaine admissions to outpatient programs. In contrast, the proportion of primary cocaine admissions to residential service programs showed a significant increase since FY1314, peaking at 52.7% in FY1718. Although it has steadily decreased to 46.1% in FY2223, the proportion of primary cocaine admissions to residential service programs remains substantially higher than the proportion of admissions to outpatient programs since FY1718 (Figure 2.6.3).

Figure 2.6.3. Trends in level of care among primary cocaine patients



PRIMARY SUBSTANCE USE SUMMARY

Summary Table 1. Summary statistics of patients with different primary substance of use, FY2223

Categories	Heroin		Methamphetamine		Marijuana		Alcohol		Prescription Drug		Cocaine	
	N	%	N	%	N	%	N	%	N	%	N	%
ADMITTED												
Patients	6,875	21.5	9,684	30.3	3,476	10.9	8,234	25.8	5,140	16.1	1,130	3.5
Admissions	8,533	16.2	15,791	30.0	4,239	8.1	14,215	27.0	7,816	14.9	1,570	3.0
DISCHARGED												
Patients	3,268	14.0	8,114	34.8	2,505	10.8	6,855	29.4	3,409	14.6	933	4.0
Admissions	4,208	11.2	12,470	33.2	2,972	7.9	11,128	29.6	5,216	13.9	1,245	3.3
DISCHARGE STATUS												
Positive compliance	1,777	45.2	6,109	51.8	1,255	44.6	6,937	64.9	2,545	50.7	601	50.7
Completed Treatment	1,026	26.1	4,803	40.7	909	32.3	5,826	54.5	1,793	35.7	482	40.6
Left – satisfactory progress	751	19.1	1,306	11.1	346	12.3	1,111	10.4	752	15.0	119	10.0
Negative compliance	2,056	52.3	5,243	44.5	1,465	52.0	3,522	32.9	2,379	47.4	545	46.0
Other (Death/incarceration/other)	98	2.5	442	3.7	97	3.4	236	2.2	92	1.8	40	3.4
GENDER IDENTITY†												
Male	4,840	70.6	5,941	61.7	2,062	60.3	5,304	64.9	3,281	64.4	733	65.3
Female	2,005	29.2	3,587	37.3	1,337	39.1	2,840	34.8	1,798	35.3	387	34.5
Transgender male	-	-	14	0.1	12	0.4	10	0.1	-	-	-	-
Transgender female	7	0.1	73	0.8	-	-	14	0.2	6	0.1	-	-
Non-conforming or refuse to state	-	-	8	0.1	-	-	-	-	-	-	-	-
RACE†												
Latinx	3,251	47.5	6,305	65.2	2,169	62.7	4,740	57.6	2,110	41.2	364	32.2
White	2,953	43.1	1,652	17.1	360	10.4	1,881	22.9	2,344	45.8	127	11.2
Black/African American	477	7.0	1,377	14.2	839	24.2	1,356	16.5	508	9.9	597	52.9
Asian	78	1.1	194	2.0	53	1.5	118	1.4	93	1.8	27	2.4
Pacific Islander	7	0.1	28	0.3	6	0.2	15	0.2	-	-	-	-
American Indian /Alaska Native	45	0.7	65	0.7	13	0.4	66	0.8	30	0.6	-	-
Other	33	0.5	53	0.5	20	0.6	47	0.6	34	0.7	12	1.1
AGE†												
17 and under	-	-	30	0.3	1,084	31.2	68	0.8	71	1.4	-	-
18-25	194	2.8	843	8.7	695	20.0	610	7.4	727	14.1	79	7.0
26-34	1,477	21.5	4,092	42.3	967	27.8	2,744	33.3	1,794	34.9	278	24.6
35-44	1,473	21.4	3,110	32.1	491	14.1	2,440	29.6	1,241	24.1	229	20.3
45-54	1,058	15.4	1,132	11.7	162	4.7	1,377	16.7	598	11.6	214	18.9
55-64	1,631	23.7	441	4.6	68	2.0	904	11.0	471	9.2	284	25.1
65+	1,042	15.2	35	0.4	9	0.3	89	1.1	238	4.6	42	3.7



PRIMARY SUBSTANCE USE SUMMARY

(Table Cont'd)	Heroin		Methamphetamine		Marijuana		Alcohol		Prescription Drug		Cocaine	
Categories	N	%	N	%	N	%	N	%	N	%	N	%
SEXUAL ORIENTATION†												
Heterosexual	5,669	95.6	8,383	87.9	3,090	89.5	7,443	91.4	4,586	93.3	1,020	91.8
Gay, lesbian, or bisexual	160	2.7	942	9.9	222	6.4	515	6.3	228	4.6	66	5.9
Something else	-	-	-	-	-	-	6	0.1	-	-	-	-
Unsure/questioning	27	0.5	53	0.6	44	1.3	49	0.6	24	0.5	8	0.7
Prefer not to state	74	1.2	150	1.6	93	2.7	128	1.6	74	1.5	17	1.5
EDUCATION†												
Middle school or below	213	3.2	270	2.8	233	6.8	308	3.8	85	1.7	33	2.9
Some high school	1,590	23.6	2,728	28.3	1,319	38.6	1,501	18.3	839	16.5	238	21.1
High school completed	3,763	55.8	4,822	50.0	1,343	39.3	3,779	46.2	2,811	55.4	577	51.2
Some college or beyond	1,182	17.5	1,818	18.9	523	15.3	2,592	31.7	1,343	26.4	279	24.8
EMPLOYMENT												
Employed	1,622	19.1	2,021	12.8	775	18.5	2,450	17.3	1,276	16.4	223	14.2
Unemployed (seeking)	2,881	34.0	6,902	43.8	1,088	25.9	6,012	42.4	3,221	41.3	581	37.1
Unemployed (not seeking)	2,405	28.4	4,252	27.0	1,089	25.9	4,093	28.8	2,202	28.3	493	31.4
Not in labor force	1,568	18.5	2,596	16.5	1,247	29.7	1,639	11.5	1,095	14.0	271	17.3
HOMELESS†												
Homeless at admission	1,235	18.0	5,440	56.2	778	22.4	3,641	44.2	1,580	30.7	516	45.7
AGE OF FIRST PRIMARY SUBSTANCE USE												
11 years or under	72	0.8	279	1.8	396	9.3	1,251	8.8	53	0.7	20	1.3
12-17	2,236	26.2	6,072	38.5	3,119	73.6	8,602	60.5	1,322	16.9	432	27.5
18-25	4,120	48.3	5,968	37.8	615	14.5	3,735	26.3	3,013	38.6	742	47.3
26+	2,100	24.6	3,471	22.0	109	2.6	623	4.4	3,414	43.8	375	23.9
MENTAL HEALTH ISSUES												
Yes	2,266	26.7	8,957	56.8	2,023	47.8	9,038	63.7	3,735	47.9	889	56.8
No	6,219	73.3	6,802	43.2	2,206	52.2	5,161	36.3	4,057	52.1	676	43.2
PHYSICAL HEALTH ISSUES												
Yes	921	10.9	1,783	11.3	332	7.9	2,236	15.8	980	12.6	231	14.8
No	7,535	89.1	13,951	88.7	3,886	92.1	11,948	84.2	6,797	87.4	1,331	85.2
DISABILITY												
Yes	1,014	12.5	2,157	14.7	535	13.7	2,977	22.5	1,182	15.9	297	20.3
No	7,072	87.5	12,530	85.3	3,368	86.3	10,268	77.5	6,274	84.1	1,167	79.7
CRIMINAL JUSTICE												
Yes	1,338	15.8	5,409	34.4	1,001	23.7	2,472	17.4	935	12.0	415	26.5
No	7,125	84.2	10,328	65.6	3,224	76.3	11,711	82.6	6,843	88.0	1,153	73.5



PRIMARY SUBSTANCE USE SUMMARY

(Table Cont'd)	Heroin		Methamphetamine		Marijuana		Alcohol		Prescription Drug		Cocaine	
Categories	N	%	N	%	N	%	N	%	N	%	N	%
POLY-DRUG												
Primary substance use only	4,883	58.0	7,287	46.4	2,272	54.1	6,893	48.6	482	6.2	572	36.6
With secondary substance use	3,542	42.0	8,404	53.6	1,925	45.9	7,283	51.4	7,326	93.8	991	63.4
FREQUENCY OF USE IN PAST MONTH												
No use	2,520	29.5	7,591	48.1	1,465	34.6	4,592	32.4	1,675	21.5	650	41.5
1-9 days	558	6.5	2,823	17.9	861	20.3	2,257	15.9	622	8.0	323	20.6
10-19 days	521	6.1	1,737	11.0	528	12.5	1,832	12.9	803	10.3	195	12.4
20-29 days	696	8.2	1,814	11.5	504	11.9	2,486	17.5	1,153	14.8	234	14.9
Everyday	4,236	49.7	1,816	11.5	877	20.7	3,020	21.3	3,545	45.5	165	10.5
PRIOR SUD TREATMENT ADMISSIONS												
None	1,791	22.4	4,943	33.6	2,157	55.4	3,908	28.8	1,688	22.5	502	33.7
1-2	3,528	44.1	5,564	37.8	1,325	34.0	4,922	36.3	3,104	41.4	586	39.4
3-4	1,402	17.5	2,260	15.4	264	6.8	1,929	14.2	1,142	15.2	202	13.6
5+	1,288	16.1	1,949	13.2	146	3.8	2,805	20.7	1,560	20.8	199	13.4
LEVEL OF CARE												
ASAM 0.5 Early Intervention	-	-	-	-	76	1.8	-	-	-	-	-	-
ASAM 1-Outpatient	402	4.7	4,234	26.9	2,322	57.0	3,759	26.7	699	9.0	451	29.0
ASAM 2.1-Intensive Outpatient	289	3.4	2,761	17.6	693	16.4	1,915	13.6	379	4.9	268	17.2
ASAM OTP-Opioid Treatment Program	6,334	74.3	-	-	-	-	-	-	3,300	42.4	-	-
ASAM 3.1-Residential Service	424	5.0	3,715	23.7	389	9.2	2,046	14.5	672	8.6	354	22.7
ASAM 3.3-Residential Service	-	-	58	0.4	8	0.2	15	0.1	-	-	-	-
ASAM 3.5-Residential Service	307	3.6	3,684	23.4	428	10.1	2,266	16.1	637	8.2	358	22.9
ASAM WM 1-Withdrawal Management	-	-	-	-	-	-	-	-	12	0.2	-	-
ASAM WM 2-Withdrawal Management	7	0.1	-	-	-	-	48	0.3	38	0.5	-	-
ASAM WM 3.2-Withdrawal Management	526	6.2	261	1.7	-	-	1,860	13.2	1,488	19.1	31	2.0
ASAM WM 3.7/4.0-Withdrawal Management	66	0.8	13	0.1	-	-	1,231	8.7	325	4.2	-	-
Recovery Support Service	169	2.0	975	6.2	288	6.9	959	6.8	239	3.1	86	5.5

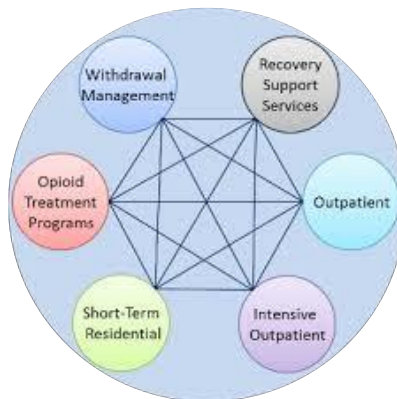
Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding. N ≤ 5 not reported to protect confidentiality

† Based on unique patient numbers and percentages.



Chapter 3

Patient Characteristics by Level of Care



Chapter 3 provides descriptive information for admissions by levels of care (**withdrawal management, residential service, outpatient, intensive outpatient, and opioid treatment** program). Numbers of patients, admissions, and discharges are reported, along with trends in admission levels over the past ten years. Patient discharge status, demographic and background characteristics, and primary substance use by levels of care are also described.

Patients in Withdrawal Management

TREATMENT ADMISSIONS AND DISCHARGES

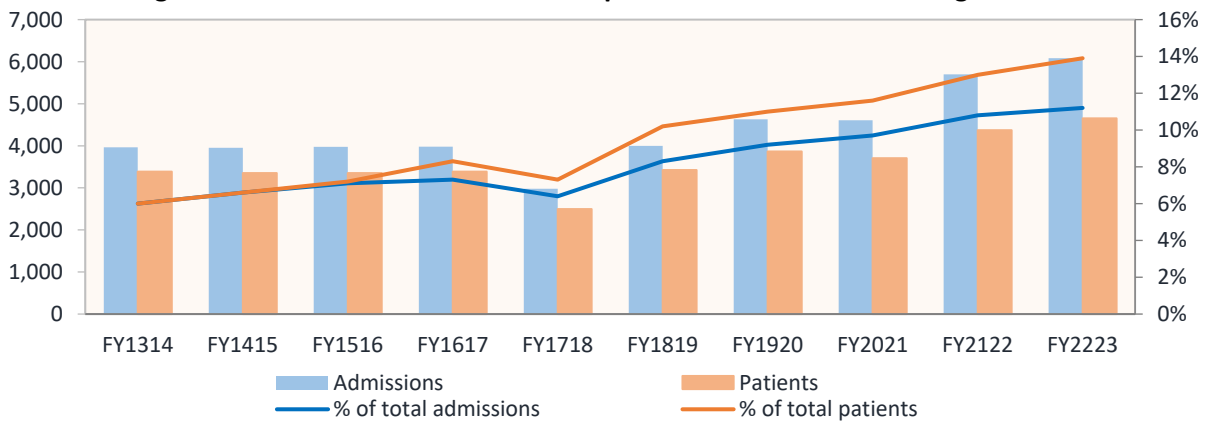
There were 6,083 treatment admissions (4,651 patients) to withdrawal management, accounting for 11.2% of total admissions (Table 3.1.1). The average length of stay for withdrawal management was 6.8 days (Table 1.7).

Table 3.1.1. Treatment admissions and discharges in withdrawal management, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	6,083	11.2	4,651	13.9
Discharged	5,598	14.8	4,282	18.2

During the course of the past ten fiscal years, the number and proportion of admissions to withdrawal management remained relatively stable until FY1617, then exhibited an upward trend and increased to 6,083 (11.2%) in FY2223. The overall trend indicates a notable 53.4% increase in admissions from FY1314 to FY2223 (Figure 3.1.1).

Figure 3.1.1. Trends in admissions and patients in withdrawal management



Of the discharges in the withdrawal management programs, 76.0% had positive compliance, with 69.3% completing treatment and 6.6% leaving the program with satisfactory progress (Table 3.1.2).

Table 3.1.2. Discharge status of patients in withdrawal management, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	4,216	76.0
Completed treatment	3,848	69.3
Left – satisfactory progress	368	6.6
Negative compliance	1,298	23.4
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	37	0.7

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

The majority of patients in withdrawal management were male (71.6%), Latinx (51.4%), ages 26-34 (36.0%), and unemployed (87.5%). Among admissions in withdrawal management, 69.5% reported having mental health issues, and 50.1% were homeless (Table 3.1.3).

Table 3.1.3. Characteristics of patients in withdrawal management, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	3,308	71.6
	Female	1,297	28.1
	Transgender male	-	-
	Transgender female	8	0.2
	Non-conforming or refuse to state	-	-
RACE	Latinx	2,361	51.4
	White	1,584	34.5
	Black/African American	534	11.6
	Asian	56	1.2
	Pacific Islander	-	-
	American Indian/Alaska Native	37	0.8
	Other	22	0.5
AGE	17 and under	-	-
	18-25	431	9.5
	26-34	1,631	36.0
	35-44	1,280	28.3
	45-54	704	15.5
	55-64	444	9.8
	65+	38	0.8
SEXUAL ORIENTATION	Heterosexual	4,243	91.9
	Gay, lesbian, or bisexual	306	6.6
	Something else	-	-
	Unsure/questioning	23	0.5
	Prefer not to state	43	0.9
EDUCATION	Middle school or below	95	2.1
	Some high school	699	15.5
	High school completed	2,282	50.5
	Some college or beyond	1,445	32.0
EMPLOYMENT	Employed	452	7.6
	Unemployed (seeking)	2,873	48.2
	Unemployed (not seeking)	2,341	39.3
	Not in labor force	291	4.9
HOMELESS	Homeless at admission	2,331	50.1
MENTAL HEALTH ISSUES	Yes	4,137	69.5
	No	1,814	30.5
PHYSICAL HEALTH ISSUES	Yes	952	16.0
	No	4,995	84.0
DISABILITY	Yes	1,670	30.2
	No	3,863	69.8
CRIMINAL JUSTICE	Yes	669	11.2
	No	5,280	88.8

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.

PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 3.1.4, alcohol (53.0%) was the most commonly reported primary substance use among patients in withdrawal management, followed by prescription drug (31.5%) and heroin (10.1%).

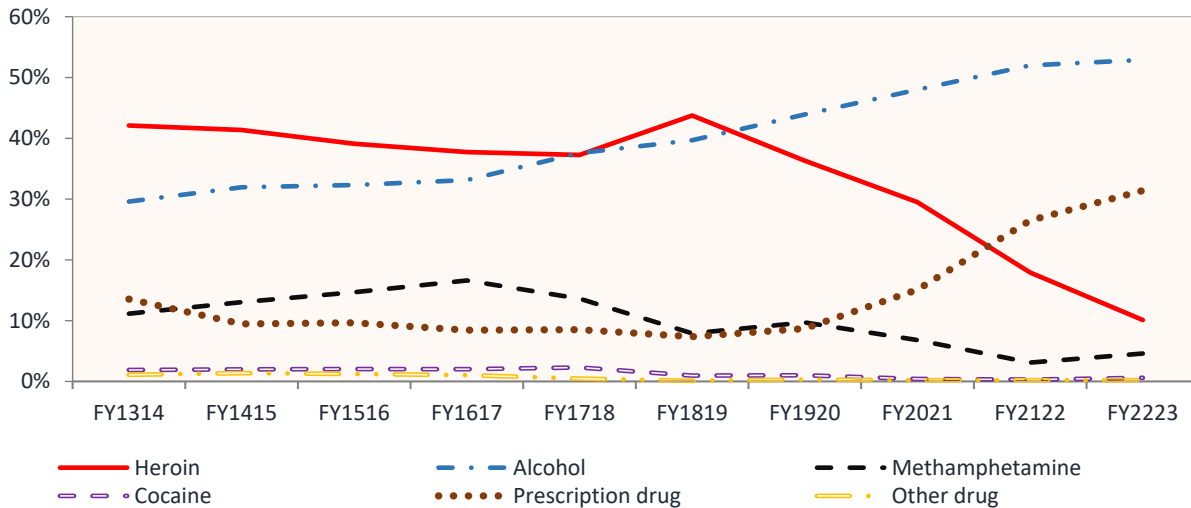
Table 3.1.4. Primary substance use among patients in withdrawal management, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Alcohol	3,139	53.0
Prescription drug	1,863	31.5
Heroin	599	10.1
Methamphetamine	274	4.6
Cocaine	35	0.6
Other drugs	13	0.2

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

Heroin was the most common primary substance use among withdrawal management admissions from FY1314 to FY1617 and again in FY1819; however, it underwent a significant decrease thereafter, reaching 10.1% in FY2223. Conversely, the proportion of primary alcohol admissions steadily increased from 29.6% in FY1314 to 52.9% in FY2223. Furthermore, the proportion of primary prescription drug indicated a rapid surge from 8.7% in FY1920 and reached to 31.4% in FY2223 (Figure 3.1.2).

Figure 3.1.2. Trends in primary substance use among patients in withdrawal management



TREATMENT ADMISSIONS IN WITHDRAWAL MANAGEMENT LEVEL OF CARE

In the past five fiscal years, the number and percent of admissions and patients for withdrawal management varied across different program levels. WM1 and WM2 are for mild to moderate cases, where patients are ambulatory and committed to attend self-help groups or outpatient sessions, whereas WM 3.2 and WM 3.7/4.0 are for more severe cases that require medical monitoring or management. WM 1 and WM 2 had the lowest utilization while WM 3.2 had the highest utilization with numbers fluctuating in both admissions and patients in the past five fiscal years. WM 3.7/4.0 exhibited an overall increasing trend with more than double the number of patients and admissions in FY2223 compared to FY1819 (Figure 3.1.3 and Figure 3.1.4).

Figure 3.1.3. Trends in number of admissions and patients in withdrawal management level of care

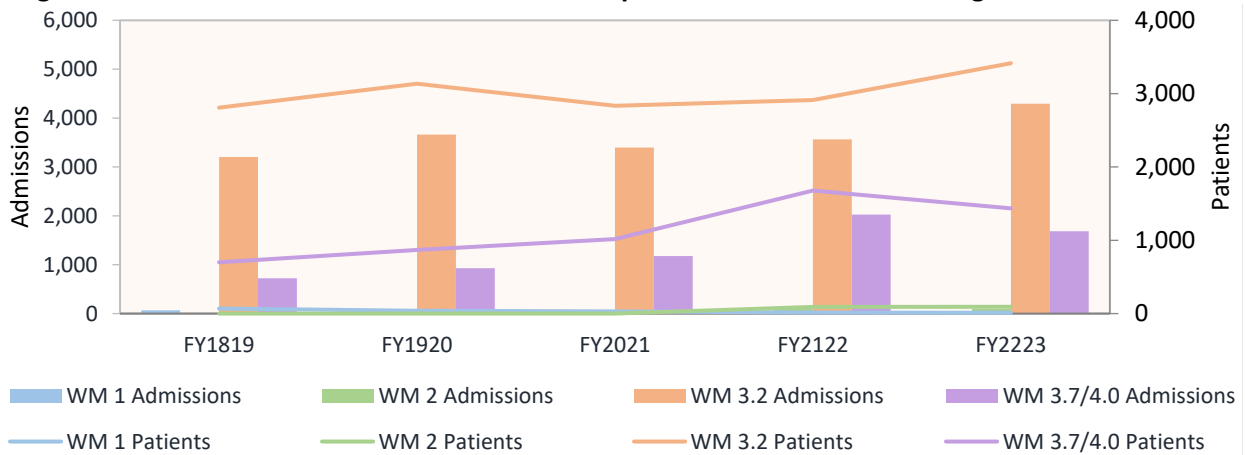
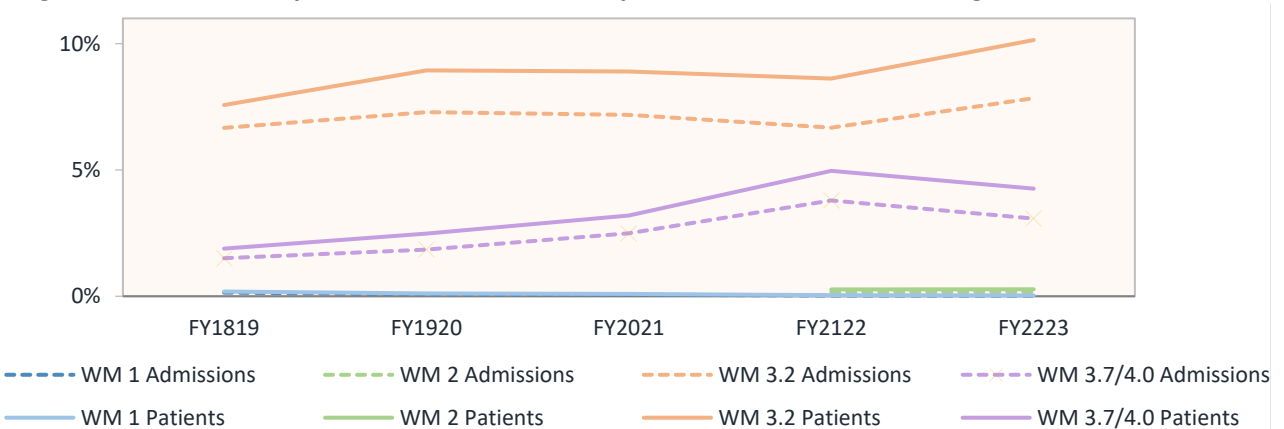


Figure 3.1.4. Trends in percent of admissions and patients in withdrawal management level of care



Patients in Residential Service Programs

TREATMENT ADMISSIONS AND DISCHARGES

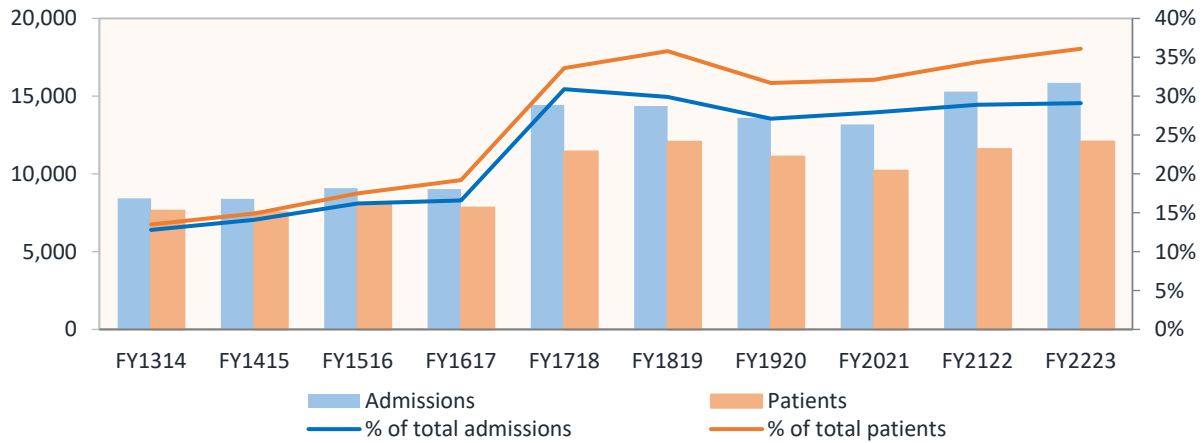
There were 15,859 treatment admissions (12,084 patients) to residential service programs, accounting for 29.1% of total admissions (Table 3.2.1). The average length of stay for residential service program was 50.0 days (Table 1.7).

Table 3.2.1. Treatment admissions and discharges in residential service programs, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	15,859	29.1	12,084	36.1
Discharged	13,062	34.5	10,127	43.1

Following a period of stability, there was a significant increase in both the number and proportion of admissions to residential service programs in FY1718, coinciding with the launch of the Drug Medi-Cal-Organized Delivery System (DMC-ODS). The number of admissions slightly decreased after FY1718 and subsequently rebounded in FY2021 (Figure 3.2.1).

Figure 3.2.1. Trends in admissions and patients in residential service programs



Of the discharges in the residential service programs, more than half (57.3%) had positive compliance, with 46.1% completing treatment and 11.2% leaving the program with satisfactory progress (Table 3.2.2).

Table 3.2.2. Discharge status of patients in residential service programs, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	7,369	57.3
Completed treatment	5,927	46.1
Left – satisfactory progress	1,442	11.2
Negative compliance	5,078	39.5
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	411	3.2

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

The majority of patients in residential service programs were male (66.5%), Latinx (55.4%), ages 26-34 (38.6%), and unemployed (78.0%). Among admissions in residential service, 65.8% were homeless, and 61.3% reported having mental health issues (Table 3.2.3).

Table 3.2.3. Characteristics of patients in residential service programs, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	7,972	66.5
	Female	3,930	32.8
	Transgender male	16	0.1
	Transgender female	67	0.6
	Non-conforming or refuse to state	9	0.1
RACE	Latinx	6,631	55.4
	White	2,751	23.0
	Black/African American	2,179	18.2
	Asian	199	1.7
	Pacific Islander	28	0.2
	American Indian/Alaska Native	92	0.8
	Other	81	0.7
AGE	17 and under	98	0.8
	18-25	1,225	10.3
	26-34	4,600	38.6
	35-44	3,445	28.9
	45-54	1,532	12.9
	55-64	928	7.8
	65+	75	0.6
SEXUAL ORIENTATION	Heterosexual	10,657	89.2
	Gay, lesbian, or bisexual	1,021	8.5
	Something else	10	0.1
	Unsure/questioning	68	0.6
	Prefer not to state	192	1.6
EDUCATION	Middle school or below	261	2.2
	Some high school	2,927	24.7
	High school completed	5,863	49.5
	Some college or beyond	2,784	23.5
EMPLOYMENT	Employed	492	3.2
	Unemployed (seeking)	5,709	36.6
	Unemployed (not seeking)	6,458	41.4
	Not in labor force	2,956	18.9
HOMELESS	Homeless at admission	7,948	65.8
MENTAL HEALTH ISSUES	Yes	9,551	61.3
	No	6,019	38.7
PHYSICAL HEALTH ISSUES	Yes	2,741	17.6
	No	12,822	82.4
DISABILITY	Yes	2,879	19.3
	No	12,042	80.7
CRIMINAL JUSTICE	Yes	4,969	31.9
	No	10,591	68.1

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.

PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 3.2.4, methamphetamine was the most commonly reported primary substance use (47.9%) among patients in residential service programs, followed by alcohol (27.8%) and prescription drug (8.4%) (Table 3.2.4).

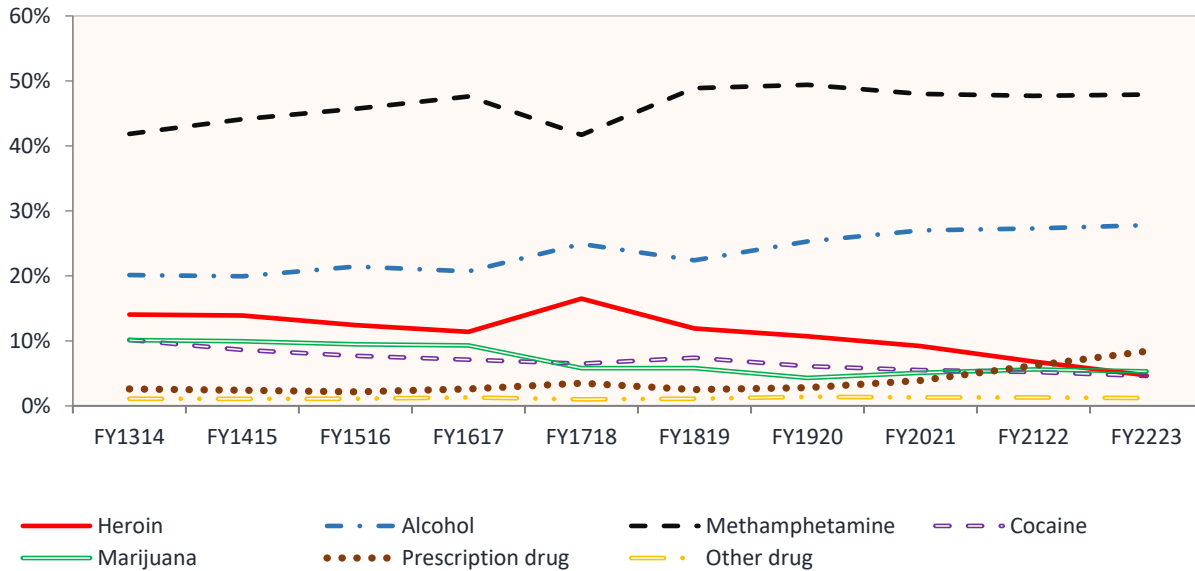
Table 3.2.4. Primary substance use among patients in residential service programs, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Methamphetamine	7,457	47.9
Alcohol	4,327	27.8
Prescription drug	1,311	8.4
Marijuana	825	5.3
Heroin	733	4.7
Cocaine	717	4.6
Other drugs	183	1.2

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

Over the course of the past ten fiscal years, methamphetamine and alcohol consistently emerged as the predominant primary substance of use among admissions to residential service programs (Figure 3.2.2).

Figure 3.2.2. Trends in primary substance use among patients in residential service programs



TREATMENT ADMISSIONS IN RESIDENTIAL LEVEL OF CARE

In the past five fiscal years, the number of admissions and patients for residential service programs varied across different program levels. ASAM 3.1, ASAM 3.3, and ASAM 3.5 are types of SUD treatment in a residential setting in different levels of low-intensity, population-specific high-intensity, and high-intensity respectively. The number of admissions and patients for ASAM 3.3 remained mostly low, while those for ASAM 3.1 witnessed an overall decrease and for RS 3.5 an overall increase. Up to FY2021, ASAM 3.1 utilization dominated despite its downward trend. ASAM 3.5 utilization surpassed it slightly in FY2122, but the two remain within similar range in FY2223 (Figure 3.2.3 and Figure 3.2.4).

Figure 3.2.3. Trends in number of admissions and patients in residential level of care

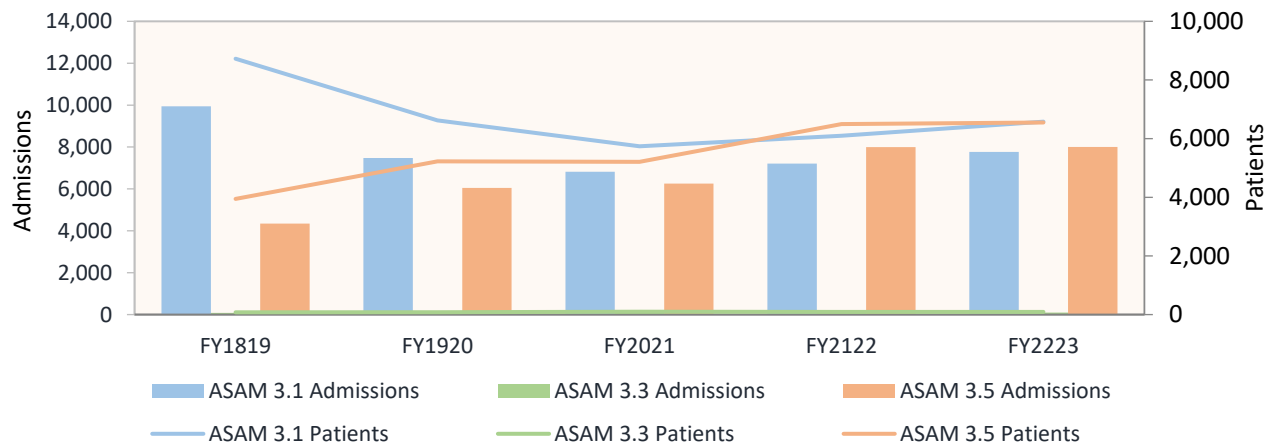
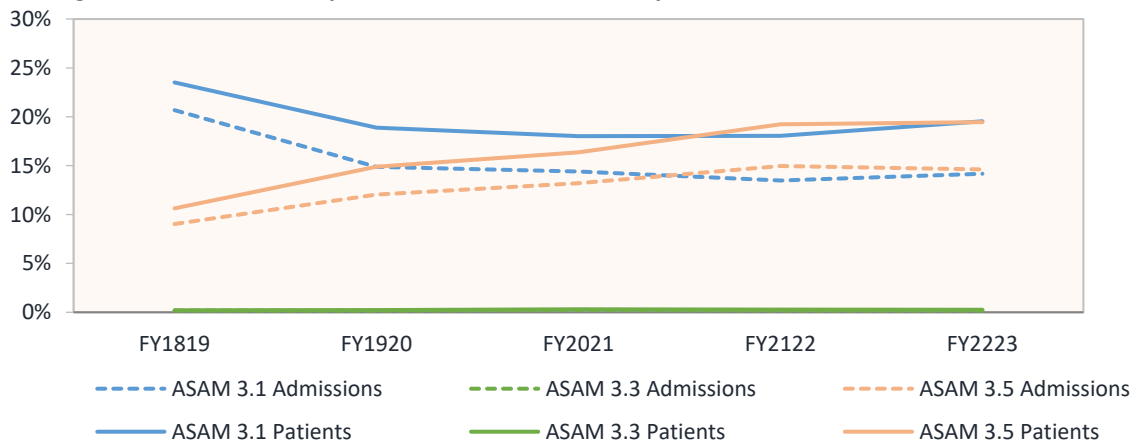


Figure 3.2.4. Trends in percent of admissions and patients in residential level of care



Patients in Intensive Outpatient Programs (IOP)

TREATMENT ADMISSIONS AND DISCHARGES

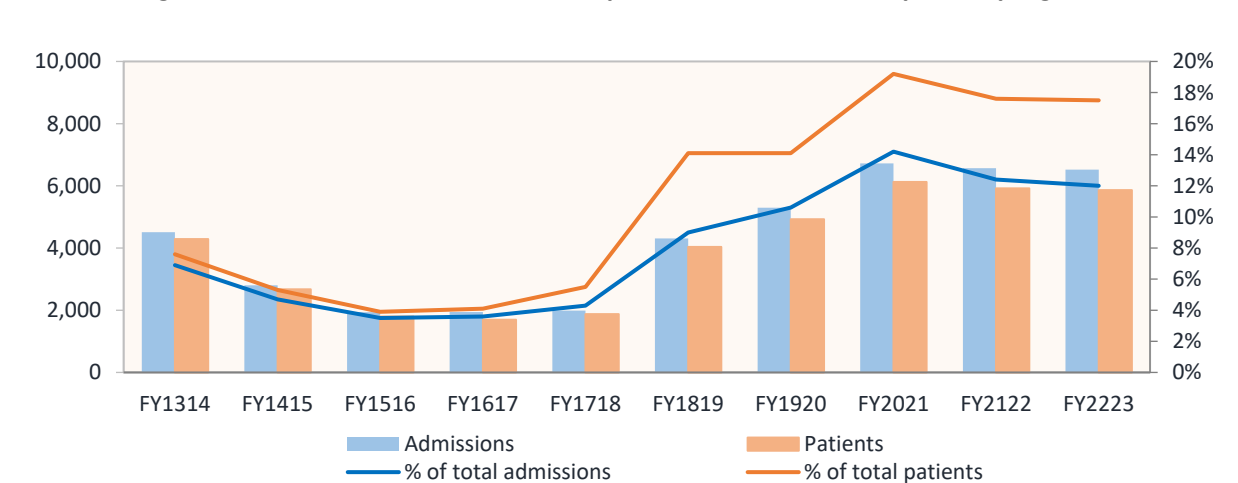
There were 6,521 treatment admissions (5,863 patients) to intensive outpatient programs, accounting for 12.0% of total admissions (Table 3.3.1). The average length of stay for intensive outpatient program was 80.0 days (Table 1.7).

Table 3.3.1. Treatment admissions and discharges in intensive outpatient programs, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	6,521	12.0	5,863	17.5
Discharged	5,096	13.4	4,627	19.7

Following the launch of the Drug Medi-Cal-Organized Delivery System (DMC-ODS) in FY1718, a substantial upsurge was observed in the number and proportion of admissions and patients enrolled in intensive outpatient programs. Notably, the proportion of admissions (14.2%) and patients (19.2%) admitted to intensive outpatient programs reached its peak in FY2021, followed by a subsequent decline in FY2223 (Figure 3.3.1).

Figure 3.3.1. Trends in admissions and patients in intensive outpatient programs



Of the discharges in the intensive outpatient services programs, over half (50.3%) reported positive compliance, with 38.0% completing treatment and 12.3% leaving the program with satisfactory progress (Table 3.3.2).

Table 3.3.2. Discharge status of patients in intensive outpatient programs, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	2,536	50.3
Completed treatment	1,916	38.0
Left – satisfactory progress	620	12.3
Negative compliance	2,307	45.7
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	200	4.0

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

INTENSIVE OUTPATIENT PROGRAM

PATIENT CHARACTERISTICS

The majority of intensive outpatient program patients were male (60.9%), Latinx (58.1%), ages 26-34 (39.4%), and unemployed (70.8%). More than half of admissions reported having mental health issues (56.9%), and 30.3% were involved in the criminal justice system (Table 3.3.3).

Table 3.3.3. Characteristics of patients in intensive outpatient programs, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	3,548	60.9
	Female	2,232	38.3
	Transgender male	12	0.2
	Transgender female	28	0.5
	Non-conforming or refuse to state	6	0.1
RACE	Latinx	3,389	58.1
	White	1,230	21.1
	Black/African American	1,014	17.4
	Asian	111	1.9
	Pacific Islander	12	0.2
	American Indian/Alaska Native	34	0.6
	Other	42	0.7
AGE	17 and under	174	3.0
	18-25	590	10.1
	26-34	2,291	39.4
	35-44	1,624	27.9
	45-54	702	12.1
	55-64	396	6.8
	65+	39	0.7
SEXUAL ORIENTATION	Heterosexual	5,110	88.4
	Gay, lesbian, or bisexual	544	9.4
	Something else	-	-
	Unsure/questioning	36	0.6
	Prefer not to state	88	1.5
EDUCATION	Middle school or below	222	3.8
	Some high school	1,344	23.2
	High school completed	2,678	46.3
	Some college or beyond	1,540	26.6
EMPLOYMENT	Employed	1,015	15.7
	Unemployed (seeking)	3,681	57.0
	Unemployed (not seeking)	891	13.8
	Not in labor force	867	13.4
HOMELESS	Homeless at admission	2,627	44.8
MENTAL HEALTH ISSUES	Yes	3,676	56.9
	No	2,790	43.1
PHYSICAL HEALTH ISSUES	Yes	607	9.5
	No	5,787	90.5
DISABILITY	Yes	671	10.5
	No	5,707	89.5
CRIMINAL JUSTICE	Yes	1,961	30.3
	No	4,504	69.7

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.



INTENSIVE OUTPATIENT PROGRAM

PRIMARY SUBSTANCE USE

As shown in Table 3.3.4, methamphetamine was the most commonly reported primary substance use among patients in intensive outpatient programs (43.3%), followed by alcohol (30.0%) and marijuana (10.9%).

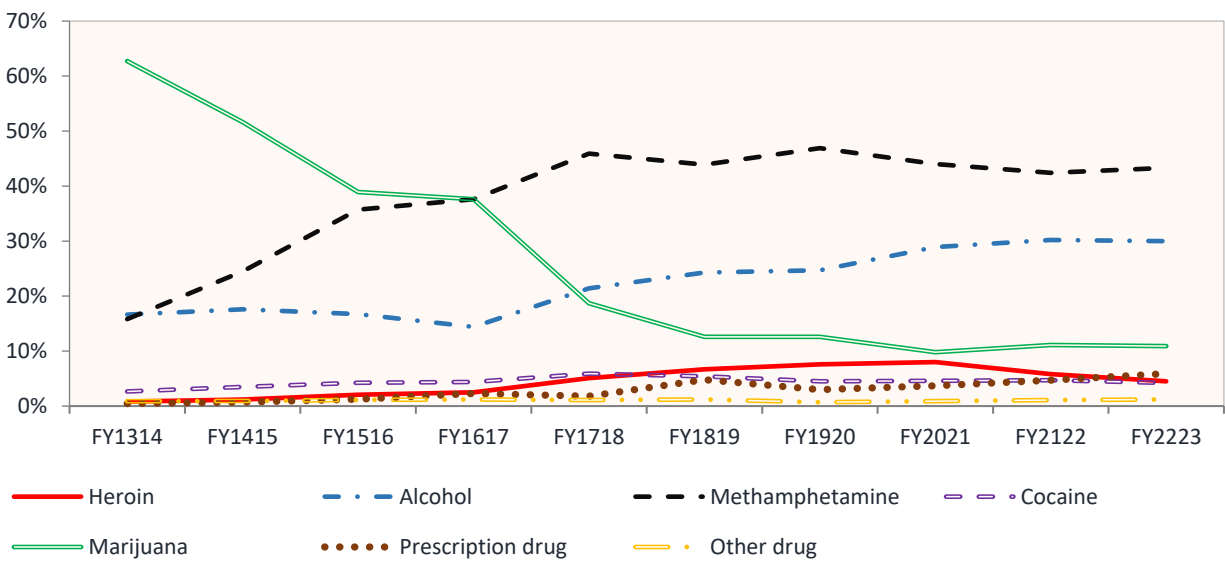
Table 3.3.4. Primary substance use among patients in intensive outpatient programs, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Methamphetamine	2,761	43.3
Alcohol	1,915	30.0
Marijuana	693	10.9
Prescription drug	379	5.9
Heroin	289	4.5
Cocaine	268	4.2
Other drugs	74	1.2

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

Over time, there has been a consistent decline in the proportion of primary marijuana admissions to the intensive outpatient program. The proportion of primary methamphetamine admissions, on the other hand, has been increasing since FY1314 and surpassed all other substances to emerge as the most prevalent primary drug admission in FY1718, after which it began to stabilize (Figure 3.3.2).

Figure 3.3.2. Trends in primary substance use among patients in intensive outpatient programs



Patients in Outpatient Programs

TREATMENT ADMISSIONS AND DISCHARGES

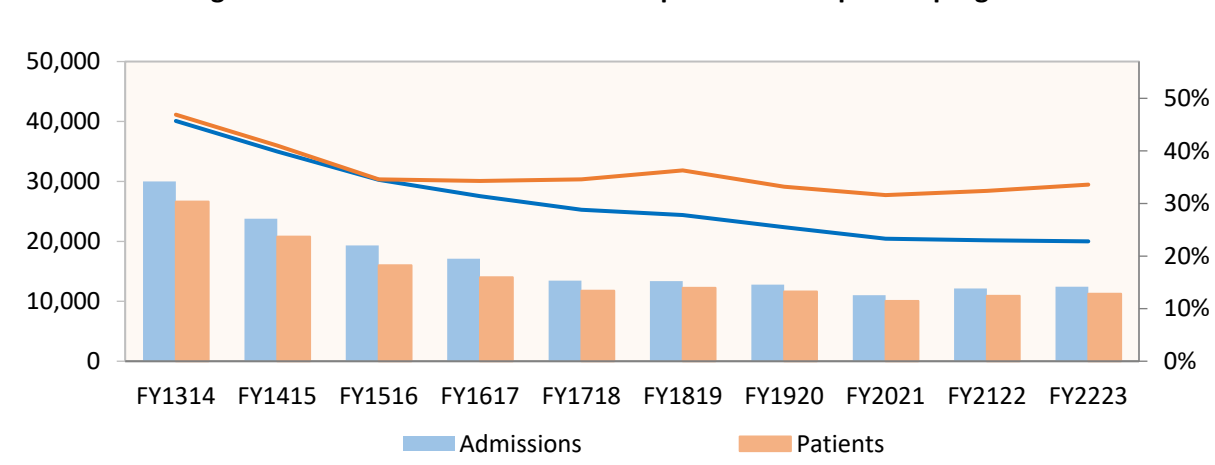
There were 12,432 treatment admissions (11,266 patients) to outpatient programs, accounting for 22.8% of total admissions (Table 3.4.1). The average length of stay for outpatient program was 116.3 days (Table 1.7).

Table 3.4.1. Treatment admissions and discharges in outpatient programs, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	12,432	22.8	11,266	33.6
Discharged	8,327	22.0	7,721	32.8

The number and proportion of admissions to outpatient programs revealed a decreasing trend over the past ten fiscal years. Between FY1314 and FY2122, the number of admissions decreased by 58.6% from 30,008 to 12,432, and the proportion dropped from 45.7% to 22.8% (Figure 3.4.1).

Figure 3.4.1. Trends in admissions and patients in outpatient programs



Of the discharges in the outpatient services programs, 47.2% reported positive compliance, with 34.8% completing treatment and 12.4% leaving the program with satisfactory progress (Table 3.4.2).

Table 3.4.2. Discharge status of patients in outpatient programs, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	3,861	47.2
Completed treatment	2,847	34.8
Left – satisfactory progress	1,014	12.4
Negative compliance	4,012	49.0
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	308	3.8

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

The majority of patients in outpatient programs were male (62.1%), Latinx (64.0%), ages 26-34 (35.0%), and unemployed (55.0%). Among outpatient program admissions 49.8% reported having mental health issues, and 24.2% were involved in the criminal justice system (Table 3.4.3).

Table 3.4.3. Characteristics of patients in outpatient programs, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	6,939	62.1
	Female	4,168	37.3
	Transgender male	26	0.2
	Transgender female	27	0.2
	Non-conforming or refuse to state	6	0.1
RACE	Latinx	7,122	64.0
	White	1,892	17.0
	Black/African American	1,780	16.0
	Asian	203	1.8
	Pacific Islander	22	0.2
	American Indian/Alaska Native	57	0.5
	Other	51	0.5
AGE	17 and under	1,147	10.4
	18-25	1,199	10.9
	26-34	3,853	35.0
	35-44	2,858	25.9
	45-54	1,222	11.1
	55-64	652	5.9
	65+	93	0.8
SEXUAL ORIENTATION	Heterosexual	10,109	90.8
	Gay, lesbian, or bisexual	753	6.8
	Something else	-	-
	Unsure/questioning	92	0.8
	Prefer not to state	180	1.6
EDUCATION	Middle school or below	523	4.8
	Some high school	3,009	27.6
	High school completed	4,878	44.8
	Some college or beyond	2,474	22.7
EMPLOYMENT	Employed	3,322	27.4
	Unemployed (seeking)	4,698	38.8
	Unemployed (not seeking)	1,957	16.2
	Not in labor force	2,136	17.6
HOMELESS	Homeless at admission	2,993	26.6
MENTAL HEALTH ISSUES	Yes	6,059	49.8
	No	6,099	50.2
PHYSICAL HEALTH ISSUES	Yes	941	7.8
	No	11,109	92.2
DISABILITY	Yes	1,547	13.0
	No	10,398	87.0
CRIMINAL JUSTICE	Yes	2,938	24.2
	No	9,221	75.8

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.

PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 3.4.4, methamphetamine was the most commonly reported primary substance use (35.1%) in outpatient programs, followed by alcohol (31.2%) and marijuana (19.9%).

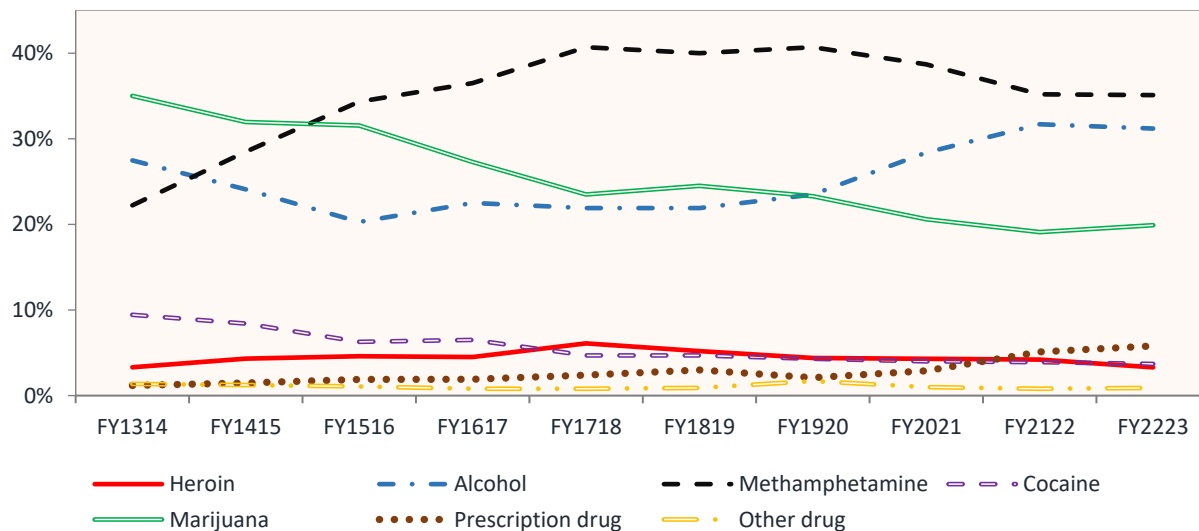
Table 3.4.4. Primary substance use among patients in outpatient programs, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Methamphetamine	4,235	35.1
Alcohol	3,764	31.2
Marijuana	2,398	19.9
Prescription drug	699	5.8
Cocaine	451	3.7
Heroin	402	3.3
Other drugs	108	0.9

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

There was a consistent downward trajectory in the proportion of primary marijuana admissions to outpatient programs since FY1314. In contrast, primary methamphetamine admissions exhibited a steady and notable increase, reaching 35.1% in FY2223. Methamphetamine surpassed alcohol in FY1415 and marijuana in FY1516 to become the leading primary substance use among outpatient admissions (Figure 3.4.2).

Figure 3.4.2. Trends in primary substance use among patients in outpatient programs



Patients in Opioid Treatment Programs (OTP)

TREATMENT ADMISSIONS AND DISCHARGES

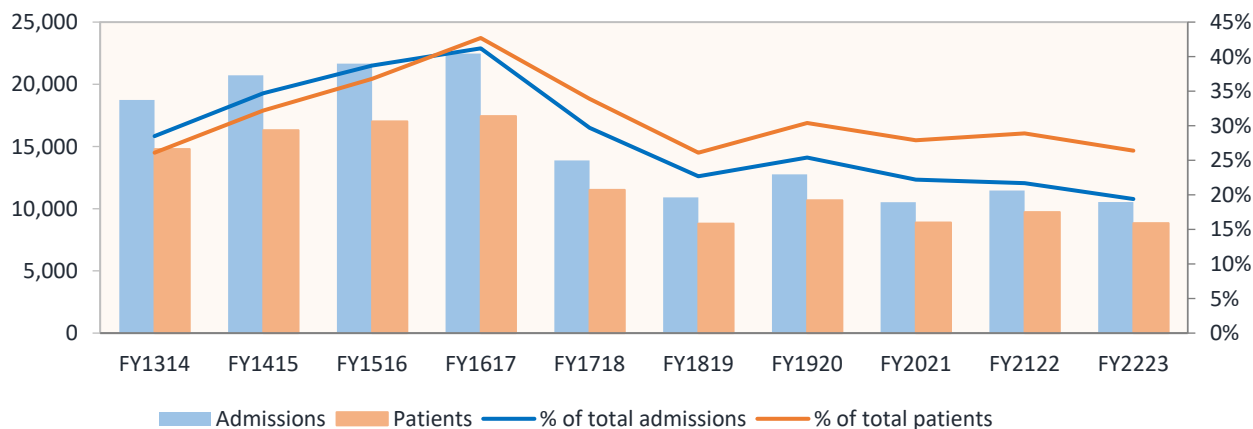
There were 10,540 treatment admissions (8,840 patients) to opioid treatment programs, accounting for 19.4% of total admissions (Table 3.5.1). The average length of stay for opioid treatment program was 556.3 days (Table 1.7).

Table 3.5.1. Treatment admissions and discharges in opioid treatment programs, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	10,540	19.4	8,840	26.4
Discharged	4,086	10.8	3,356	14.3

Following a sustained period of growth, the number and proportion of admissions to opioid treatment programs experienced a notable decline starting from FY1617. This decline resulted in a significant decrease of 53.1%, with admissions dropping from 22,473 in FY1617 to 10,540 in FY2223 (Figure 3.5.1).

Figure 3.5.1. Trends in admissions and patients in opioid treatment programs



Of the discharges in the opioid treatment programs, 35.0% reported positive compliance, with 10.7% completing treatment and 24.3% leaving the program with satisfactory progress (Table 3.5.2).

Table 3.5.2. Discharge status of patients in opioid treatment programs, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	1,315	35.0
Completed treatment	403	10.7
Left – satisfactory progress	912	24.3
Negative compliance	2,390	63.6
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	54	1.4

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

The majority of patients in opioid treatment programs were male (66.4%), Latino (45.5%), ages 55-64 (23.2%), and unemployed (55.9%). Among opioid treatment programs admissions, 20.0% reported having mental health issues, and 8.3% were homeless (Table 3.5.3).

Table 3.5.3. Characteristics of patients in opioid treatment programs, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	5,844	66.4
	Female	2,946	33.5
	Transgender male	-	-
	Transgender female	-	-
	Non-conforming or refuse to state	8	0.1
RACE	Latinx	3,826	45.5
	White	3,641	43.3
	Black/African American	724	8.6
	Asian	120	1.4
	Pacific Islander	-	-
	American Indian/Alaska Native	50	0.6
	Other	38	0.5
AGE	17 and under	-	-
	18-25	374	4.5
	26-34	1,656	20.1
	35-44	1,770	21.4
	45-54	1,301	15.8
	55-64	1,919	23.2
	65+	1,234	14.9
SEXUAL ORIENTATION	Heterosexual	7,295	95.5
	Gay, lesbian, or bisexual	191	2.5
	Something else	-	-
	Unsure/questioning	33	0.4
	Prefer not to state	118	1.5
EDUCATION	Middle school or below	226	2.8
	Some high school	1,665	20.8
	High school completed	4,618	57.6
	Some college or beyond	1,513	18.9
EMPLOYMENT	Employed	2,313	23.6
	Unemployed (seeking)	3,009	30.7
	Unemployed (not seeking)	2,469	25.2
	Not in labor force	2,013	20.5
HOMELESS	Homeless at admission	735	8.3
MENTAL HEALTH ISSUES	Yes	1,934	20.0
	No	7,753	80.0
PHYSICAL HEALTH ISSUES	Yes	1,053	10.9
	No	8,586	89.1
DISABILITY	Yes	1,009	10.7
	No	8,386	89.3
CRIMINAL JUSTICE	Yes	703	7.3
	No	8,980	92.7

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.

PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 3.5.4, the most common reported primary substance use in opioid treatment programs was heroin (65.7%), followed by prescription drug (34.3%).

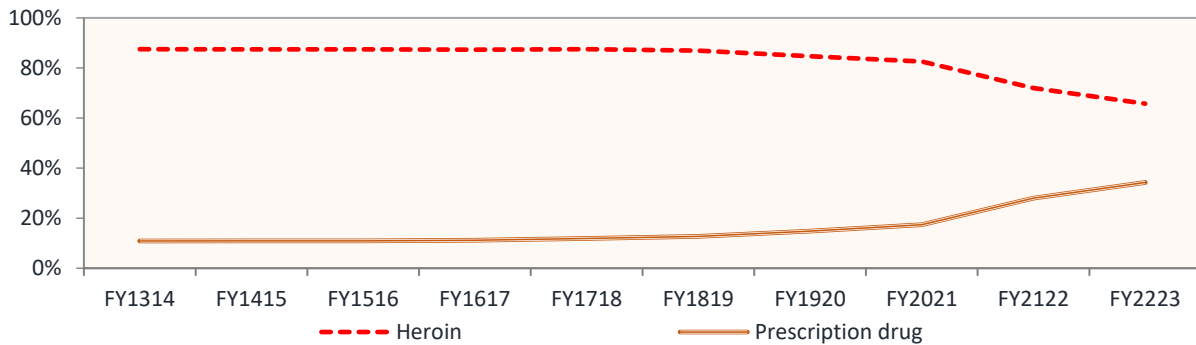
Table 3.5.4. Primary substance use among patients in opioid treatment programs, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Heroin	6,334	65.7
Prescription drug	3,300	34.3

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

In the last ten fiscal years, the majority of admissions to opioid treatment programs consistently reported heroin as the primary substance use, slightly decreasing from 87.54% in FY1314 to 65.7% in FY2223. The proportion of primary prescription drug admissions increased slightly during the same period from 10.9% in FY1314 to 34.3% in FY2223 (Figure 3.5.2).

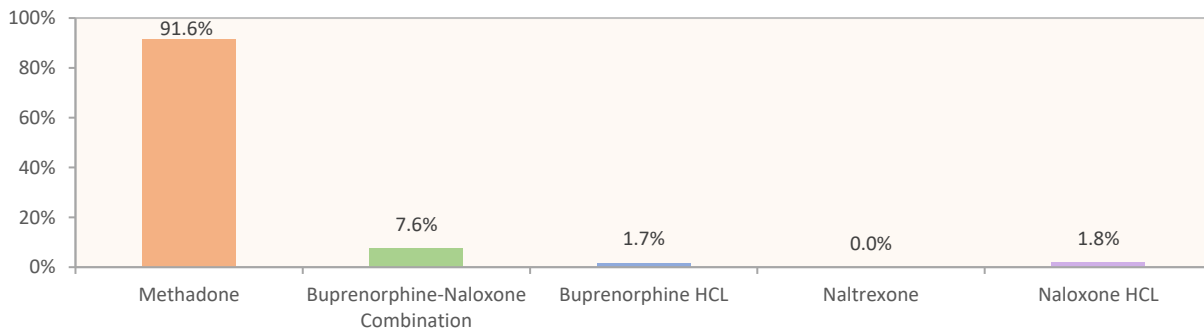
Figure 3.5.2. Trends in primary substance use among patients in opioid treatment programs



MEDICATIONS UTILIZED IN OTP PROGRAMS

Methadone is the most common medication (91.6%) provided to OTP patients, followed by the Buprenorphine-Naloxone combination (7.6%), Buprenorphine HCL (1.7%), and Naloxone HCL (1.8%) (Figure 3.5.3).

Figure 3.5.3. Medications provided at opioid treatment programs, FY2223



Summary Table 2. Summary statistics of patients in different levels of care, FY2223

Categories	Withdrawal Management Program		Residential Service Program		Intensive Outpatient Program		Outpatient Program		Opioid Treatment Program	
	N	%	N	%	N	%	N	%	N	%
ADMITTED										
Patients	4,651	13.9	12,084	36.1	5,863	17.5	11,266	33.6	8,840	26.4
Admissions	6,083	11.2	15,859	29.1	6,521	12.0	12,432	22.8	10,540	19.4
DISCHARGED										
Patients	4,282	18.2	10,127	43.1	4,627	19.7	7,721	32.8	3,356	14.3
Discharged	5,598	14.8	13,062	34.5	5,096	13.4	8,327	22.0	4,086	10.8
DISCHARGE STATUS										
Positive compliance	4,216	76.0	7,369	57.3	2,536	50.3	3,861	47.2	1,315	35.0
Completed treatment	3,848	69.3	5,927	46.1	1,916	38.0	2,847	34.8	403	10.7
Left – satisfactory progress	368	6.6	1,442	11.2	620	12.3	1,014	12.4	912	24.3
Negative compliance	1,298	23.4	5,078	39.5	2,307	45.7	4,012	49.0	2,390	63.6
Other (Death/incarceration/other)	37	0.7	411	3.2	200	4.0	308	3.8	54	1.4
GENDER IDENTITY†										
Male	3,308	71.6	7,972	66.5	3,548	60.9	6,939	62.1	5,844	66.4
Female	1,297	28.1	3,930	32.8	2,232	38.3	4,168	37.3	2,946	33.5
Transgender male	-	-	16	0.1	12	0.2	26	0.2	-	-
Transgender female	8	0.2	67	0.6	28	0.5	27	0.2	-	-
Non-conforming or refuse to state	-	-	9	0.1	6	0.1	6	0.1	8	0.1
RACE†										
Latinx	2,361	51.4	6,631	55.4	3,389	58.1	7,122	64.0	3,826	45.5
White	1,584	34.5	2,751	23.0	1,230	21.1	1,892	17.0	3,641	43.3
Black/African American	534	11.6	2,179	18.2	1,014	17.4	1,780	16.0	724	8.6
Asian	56	1.2	199	1.7	111	1.9	203	1.8	120	1.4
Pacific Islander	-	-	28	0.2	12	0.2	22	0.2	-	-
American Indian/Alaska Native	37	0.8	92	0.8	34	0.6	57	0.5	50	0.6
Other	22	0.5	81	0.7	42	0.7	51	0.5	38	0.5



LEVEL OF CARE SUMMARY

(Table Cont'd) Categories	Withdrawal Management Program		Residential Service Program		Intensive Outpatient Program		Outpatient Program		Opioid Treatment Program	
	N	%	N	%	N	%	N	%	N	%
AGE†										
17 and under	-	-	98	0.8	174	3.0	1,147	10.4	-	-
18-25	431	9.5	1,225	10.3	590	10.1	1,199	10.9	374	4.5
26-34	1,631	36.0	4,600	38.6	2,291	39.4	3,853	35.0	1,656	20.1
35-44	1,280	28.3	3,445	28.9	1,624	27.9	2,858	25.9	1,770	21.4
45-54	704	15.5	1,532	12.9	702	12.1	1,222	11.1	1,301	15.8
55-64	444	9.8	928	7.8	396	6.8	652	5.9	1,919	23.2
65+	38	0.8	75	0.6	39	0.7	93	0.8	1,234	14.9
SEXUAL ORIENTATION†										
Heterosexual	4,243	91.9	10,657	89.2	5,110	88.4	10,109	90.8	7,295	95.5
Gay, lesbian, or bisexual	306	6.6	1,021	8.5	544	9.4	753	6.8	191	2.5
Something else	-	-	10	0.1	-	-	-	-	-	-
Unsure/questioning	23	0.5	68	0.6	36	0.6	92	0.8	33	0.4
Prefer not to state	43	0.9	192	1.6	88	1.5	180	1.6	118	1.5
EDUCATION†										
Middle school or below	95	2.1	261	2.2	222	3.8	523	4.8	226	2.8
Some high school	699	15.5	2,927	24.7	1,344	23.2	3,009	27.6	1,665	20.8
High school completed	2,282	50.5	5,863	49.5	2,678	46.3	4,878	44.8	4,618	57.6
Some college or beyond	1,445	32.0	2,784	23.5	1,540	26.6	2,474	22.7	1,513	18.9
EMPLOYMENT										
Employed	452	7.6	492	3.2	1,105	15.7	3,322	27.4	2,313	23.6
Unemployed (seeking)	2,873	48.2	5,709	36.6	3,681	57.0	4,698	38.8	3,009	30.7
Unemployed (not seeking)	2,341	39.3	6,458	41.4	891	13.8	1,957	16.2	2,469	25.2
Not in labor force	291	4.9	2,956	18.9	867	13.4	2,136	17.6	2,013	20.5
HOMELESS†										
Homeless at admission	2,331	50.1	7,948	65.8	2,627	44.8	2,993	26.6	735	8.3
PRIMARY SUBSTANCE USE										
Methamphetamine	274	4.6	7,457	47.9	2,761	43.3	4,235	35.1	-	-
Alcohol	3,139	52.9	4,327	27.8	1,915	30.0	3,764	31.2	-	-
Heroin	599	10.1	733	4.7	289	4.5	402	3.3	6,334	65.7
Marijuana	12	0.2	825	5.3	693	10.9	2,398	19.9	-	-
Cocaine	35	0.6	717	4.6	268	4.2	451	3.7	-	-
Prescription drug	1,863	31.4	1,311	8.4	379	5.9	699	5.8	3,300	34.3
Other drugs	13	0.2	183	1.2	74	1.2	108	0.9	-	-



LEVEL OF CARE SUMMARY

(Table Cont'd) Categories	Withdrawal Management Program		Residential Service Program		Intensive Outpatient Program		Outpatient Program		Opioid Treatment Program	
	N	%	N	%	N	%	N	%	N	%
MENTAL HEALTH ISSUES										
Yes	4,137	69.5	9,551	61.3	3,676	56.9	6,059	49.8	1,934	20.0
No	1,814	30.5	6,019	38.7	2,790	43.1	6,099	50.2	7,753	80.0
PHYSICAL HEALTH ISSUES										
Yes	952	16.0	2,741	17.6	607	9.5	941	7.8	1,053	10.9
No	4,995	84.0	12,822	82.4	5,787	90.5	11,109	92.2	8,586	89.1
DISABILITY										
Yes	1,670	30.2	2,879	19.3	671	10.5	1,547	13.0	1,009	10.7
No	3,863	69.8	12,042	80.7	5,707	89.5	10,398	87.0	8,386	89.3
CRIMINAL JUSTICE										
Yes	669	11.2	4,969	31.9	1,961	30.3	2,938	24.2	703	7.3
No	5,280	88.8	10,591	68.1	4,504	69.7	9,221	75.8	8,980	92.7

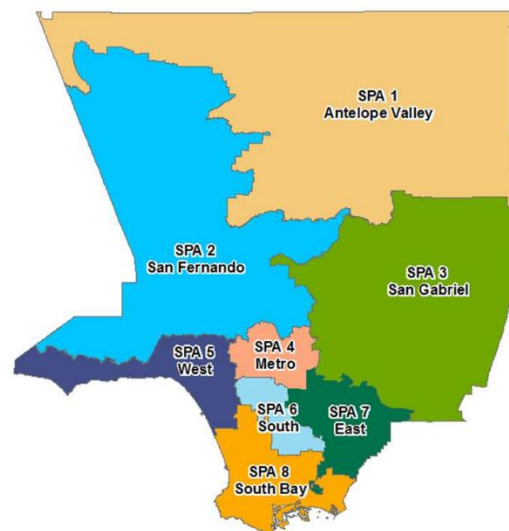
Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding. N ≤ 5 not reported to protect confidentiality

† Based on unique patient numbers and percentages.



Chapter 4

Patient Characteristics by Service Planning Area¹



Chapter 4 provides descriptive information for patients from each of the eight **service planning areas (SPAs)**. For each SPA, numbers of patients, admissions and discharges are reported, along with trends in admission levels over the past ten years. Patient discharge status, demographic characteristics, primary substance use, and levels of care by SPA are also described.

¹ Patient SPA information is based on self-reported home address zip code. Numbers for each SPA may be lower than reality due to missing zip code information.

Patients from Service Planning Area 1 (SPA 1)

TREATMENT ADMISSIONS AND DISCHARGES

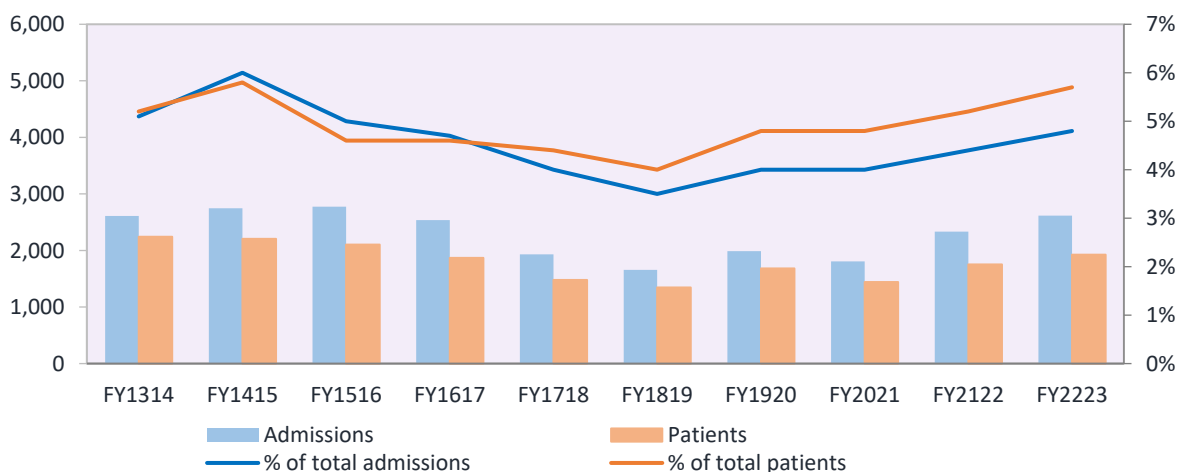
There were 2,617 treatment admissions for 1,927 patients residing in SPA 1, accounting for 4.8% of all admissions (Table 4.1.1).

Table 4.1.1. Treatment admissions and discharges among patients from SPA 1, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	2,617	4.8	1,927	5.7
Discharged	1,533	4.0	1,158	4.9

The number and proportion of admissions experienced a steady decline from 2,745 (6.0%) in FY1415 to 1,657 (3.5%) in FY1819, before experiencing an increase to 2,617 (4.8%) in FY2223. The number and proportion of patients showed a similar trend (Figure 4.1.1).

Figure 4.1.1. Trends in admissions and patients from SPA 1



Among SPA 1 patient discharges, less than half (43.4%) had positive compliance, with 33.1% completing treatment and 10.3% leaving the program with satisfactory progress (Table 4.1.2).

Table 4.1.2. Discharge status of patients from SPA 1, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	641	43.4
Completed treatment	489	33.1
Left – satisfactory progress	152	10.3
Negative compliance	808	54.7
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	29	2.0

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

The majority of patients residing in SPA 1 were male (56.4%), Latinx (45.1%), ages 26-34 (31.5%), and unemployed (71.4%). Among SPA 1 admissions, 67.6% reported mental health issues, and 13.7% reported criminal justice involvement (Table 4.1.3).

Table 4.1.3. Characteristics of patients from SPA 1, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	1064	56.4
	Female	821	43.5
	Transgender male	-	-
	Transgender female	-	-
	Non-conforming or refuse to state	-	-
RACE	Latinx	844	45.1
	White	598	31.9
	Black/African American	398	21.2
	Asian	11	0.6
	Pacific Islander	-	-
	American Indian /Alaska Native	10	0.5
	Other	11	0.6
AGE	17 and under	79	4.3
	18-25	176	9.5
	26-34	585	31.5
	35-44	500	26.9
	45-54	212	11.4
	55-64	212	11.4
	65+	92	5.0
SEXUAL ORIENTATION	Heterosexual	1,702	93.6
	Gay, lesbian, or bisexual	83	4.6
	Something else	-	-
	Unsure/questioning	8	0.4
	Prefer not to state	25	1.4
EDUCATION	Middle school or below	64	3.5
	Some high school	373	20.4
	High school completed	1,115	61.1
	Some college or beyond	273	15.0
EMPLOYMENT	Employed	417	16.5
	Unemployed (seeking)	1,033	41.0
	Unemployed (not seeking)	767	30.4
	Not in labor force	303	12.0
LANGUAGE AT HOME	English	2,138	88.0
	Other Language	292	12.0
MENTAL HEALTH ISSUES	Yes	1,707	67.6
	No	819	32.4
PHYSICAL HEALTH ISSUES	Yes	180	7.2
	No	2,303	92.8
DISABILITY	Disabled at admission	320	13.0
CRIMINAL JUSTICE	Criminal justice involved	347	13.7

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
 N ≤ 5 not reported to protect confidentiality.



PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 4.1.4, the most commonly reported primary substance use was prescription drug (22.9%), followed by methamphetamine (22.4%) and alcohol (21.4%).

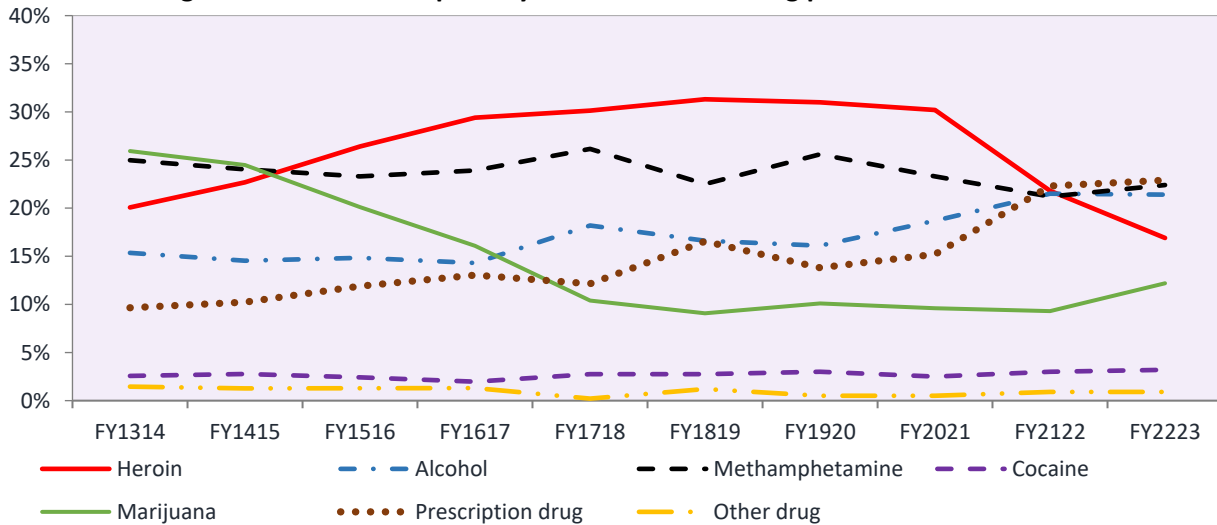
Table 4.1.4. Primary substance use among patients from SPA 1, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Prescription drug	570	22.9
Methamphetamine	558	22.4
Alcohol	532	21.4
Heroin	422	16.9
Marijuana	305	12.2
Cocaine	80	3.2
Other drugs	23	0.9

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

From FY1314 to FY1415, marijuana was the primary substance used among admissions. However, starting in FY1516, primary heroin admissions exhibited a continuous increase, making it the most prevalent primary substance used until FY2021 (30.2%), after which it decreased by about half to 16.9% in FY2223. From FY2122 to FY2223, primary prescription drug admissions surpassed heroin, accounting for the highest proportion at 22.9%. Throughout the entire period, except for FY2122, methamphetamine consistently ranked as the second most common primary substance with admissions remaining relatively stable (Figure 4.1.2).

Figure 4.1.2. Trends in primary substance use among patients from SPA 1



LEVEL OF CARE

As shown in Table 4.1.5, the most common level of care among patients residing in SPA 1 was outpatient service programs (31.5%), followed by opioid treatment programs (29.3%) and residential service programs (14.7%).

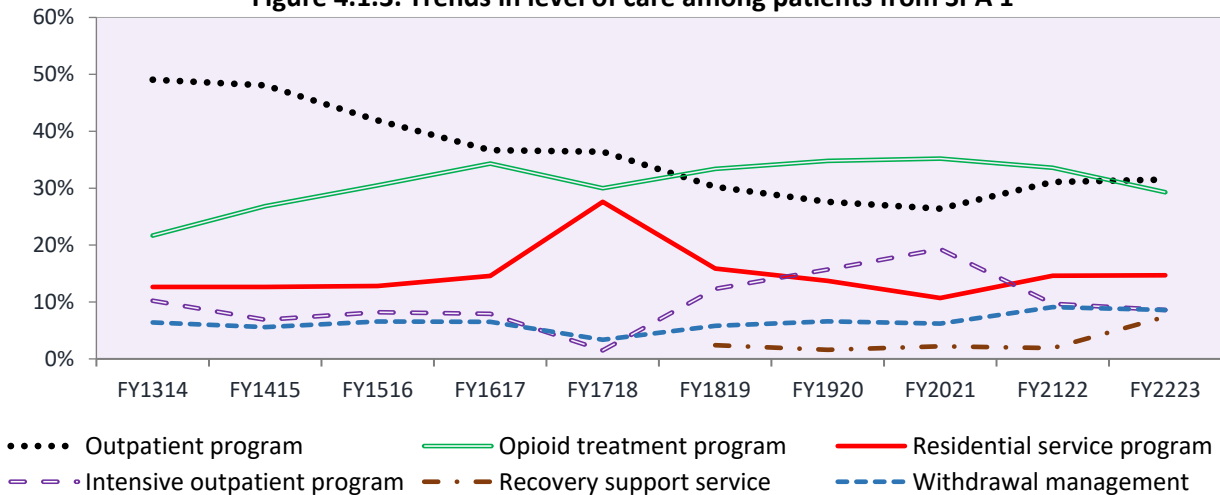
Table 4.1.5. Level of care among patients from SPA 1, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	223	8.6
ASAM WM 1	10	0.4
ASAM WM 2	-	-
ASAM WM 3.2	135	5.2
ASAM WM 3.7/4.0	74	2.9
Residential Service	379	14.7
ASAM 3.1	213	8.2
ASAM 3.3	-	-
ASAM 3.5	165	6.4
Intensive Outpatient (ASAM 2.1)	222	8.6
Outpatient	814	31.5
Opioid Treatment Program (ASAM OTP)	758	29.3
Recovery Support Service	191	7.4

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
N ≤ 5 not reported to protect confidentiality.

From FY1314 to FY1718, the outpatient program was the predominant level of care for patients residing in SPA 1. Its proportion varied between 26.4% and 49.1% over the past ten fiscal years, displaying a gradual decline. Admissions to opioid treatment programs surpassed that of outpatient programs as the primary level of care from FY1819 to FY 2122. Meanwhile, the proportion of admissions to residential service programs remained relatively stable throughout the decade, except for a notable spike to 27.6% in FY1718 (Figure 4.1.3).

Figure 4.1.3. Trends in level of care among patients from SPA 1



Patients from Service Planning Area 2 (SPA 2)

TREATMENT ADMISSIONS AND DISCHARGES

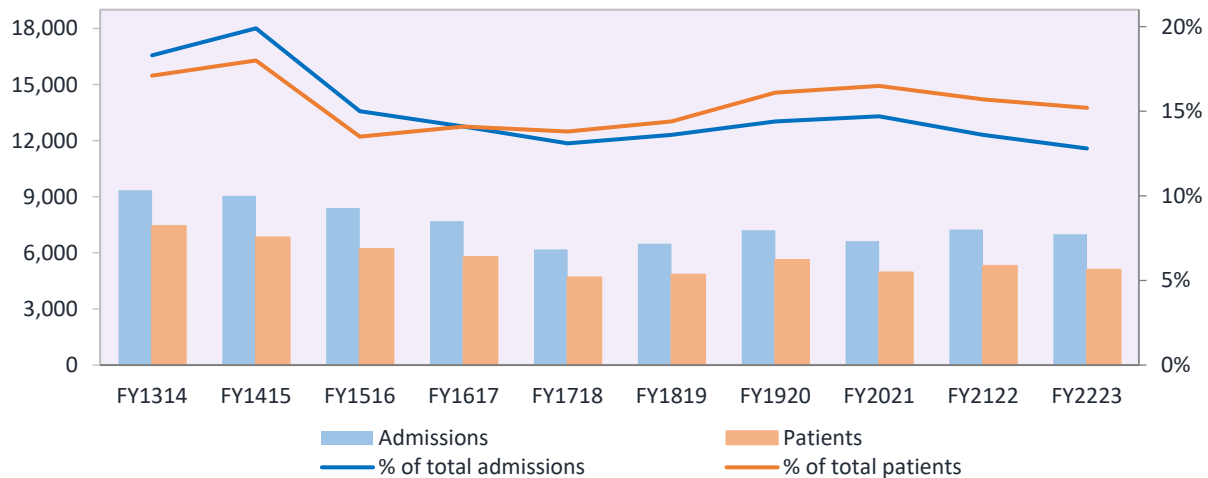
There were 6,999 treatment admissions for 5,095 patients residing in SPA 2, accounting for 12.8% of all admissions (Table 4.2.1).

Table 4.2.1. Treatment admissions and discharges among patients from SPA 2, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	6,999	12.8	5,095	15.2
Discharged	4,535	11.9	3,264	13.8

The proportion of admissions decreased from a peak of 19.9% in FY1415 to 13.1% in FY1718, after which it remained relatively stable through FY2223. A similar trend was observed in the proportion of patients. Overall, both the number of admissions and patients exhibited a slight decrease over the past ten fiscal years (Figure 4.2.1).

Figure 4.2.1. Trends in admissions and patients from SPA 2



Among SPA 2 patient discharges, 54.3% had positive compliance, with 38.6% completing treatment and 15.7% leaving the program with satisfactory progress (Table 4.2.2).

Table 4.2.2. Discharge status of patients from SPA 2, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	2,324	54.3
Completed treatment	1,652	38.6
Left – satisfactory progress	672	15.7
Negative compliance	1,856	43.4
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	97	2.3

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

As shown in Table 4.2.3, the majority of patients residing in SPA 2 were male (67.0%), Latinx (47.0%), ages 26-34 (31.8%), and unemployed (63.3%). Among SPA 2 admissions, 47.8% reported mental health issues.

Table 4.2.3. Characteristics of patients from SPA 2, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	3,388	67.0
	Female	1,655	32.7
	Transgender male	-	-
	Transgender female	9	0.2
	Non-conforming or refuse to state	-	-
RACE	Latinx	2,317	47.0
	White	2,154	43.7
	Black/African American	329	6.7
	Asian	70	1.4
	Pacific Islander	-	-
	American Indian /Alaska Native	25	0.5
	Other	30	0.6
AGE	17 and under	258	5.3
	18-25	439	9.0
	26-34	1,549	31.8
	35-44	1,265	25.9
	45-54	643	13.2
	55-64	534	11.0
	65+	188	3.9
SEXUAL ORIENTATION	Heterosexual	4,383	91.9
	Gay, lesbian, or bisexual	258	5.4
	Something else	-	-
	Unsure/questioning	41	0.9
	Prefer not to state	85	1.8
EDUCATION	Middle school or below	158	3.3
	Some high school	954	19.9
	High school completed	2,378	49.7
	Some college or beyond	1,296	27.1
EMPLOYMENT	Employed	1,717	25.7
	Unemployed (seeking)	2,877	43.0
	Unemployed (not seeking)	1,357	20.3
	Not in labor force	737	11.0
LANGUAGE AT HOME	English	5,096	80.7
	Other Language	1,220	19.3
MENTAL HEALTH ISSUES	Yes	3,206	47.8
	No	3,496	52.2
PHYSICAL HEALTH ISSUES	Yes	622	9.5
	No	5,936	90.5
DISABILITY	Disabled at admission	1,043	16.4
CRIMINAL JUSTICE	Criminal justice involved	917	13.7

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.

PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 4.2.4, the most common primary substance use was alcohol (28.1%), followed by heroin (26.5%) and methamphetamine (17.0%).

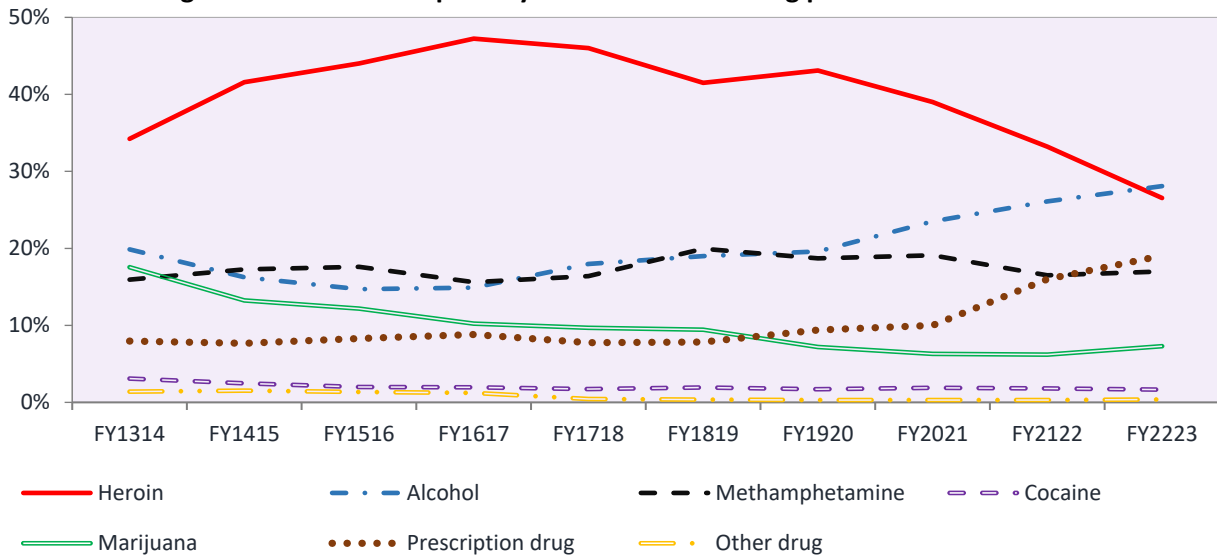
Table 4.2.4. Primary substance use among patients from SPA 2, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Alcohol	1,834	28.1
Heroin	1,733	26.5
Prescription drug	1,244	19.1
Methamphetamine	1,110	17.0
Marijuana	477	7.3
Cocaine	108	1.7
Other drugs	24	0.4

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

Throughout the past ten fiscal years, heroin consistently emerged as the predominant primary substance used among admissions in SPA 2. The proportion of primary heroin admissions displayed a significant increase from 34.2% in FY1314 to 47.2% in FY1617, followed by a decrease to 26.5% in FY2223. The proportion of marijuana admissions exhibited a declining trend during the same period. In recent years, there has been a gradual increase in the proportion of primary alcohol and prescription drug admissions, while the proportion of methamphetamine admissions remained relatively stable (Figure 4.2.2).

Figure 4.2.2. Trends in primary substance use among patients from SPA 2



LEVEL OF CARE

As shown in Table 4.2.5, the most common level of care among patients residing in SPA 2 was opioid treatment programs (30.6%), followed by outpatient programs (23.0%) and withdrawal management programs (14.1%).

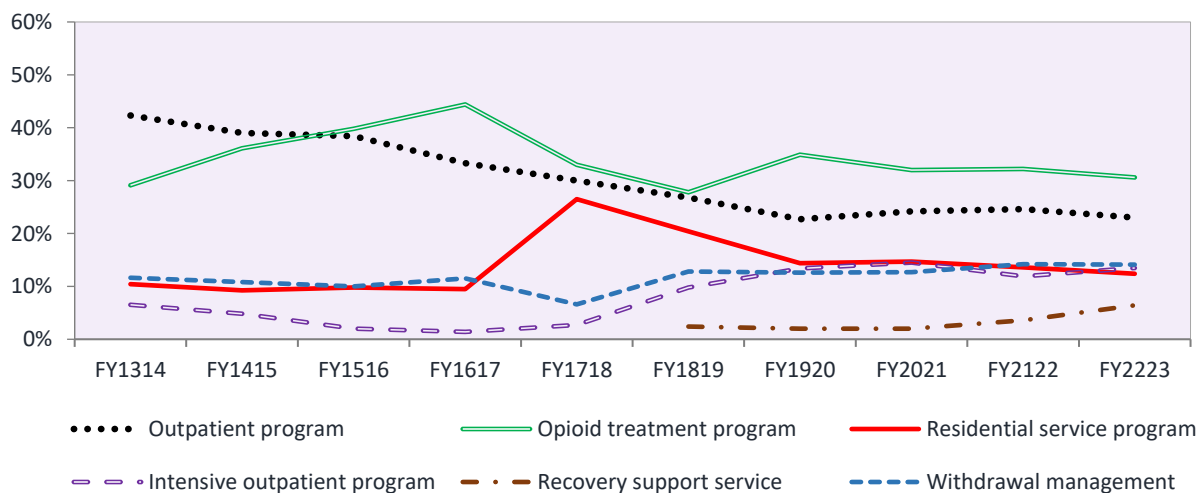
Table 4.2.5. Level of care among patients from SPA 2, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	980	14.1
ASAM WM 1	-	-
ASAM WM 2	20	0.3
ASAM WM 3.2	659	9.5
ASAM WM 3.7/4.0	301	4.3
Residential Service	860	12.4
ASAM 3.1	440	6.3
ASAM 3.3	-	-
ASAM 3.5	418	6.0
Intensive Outpatient (ASAM 2.1)	937	13.5
Outpatient	1,599	23.0
Opioid Treatment Program (ASAM OTP)	2,126	30.6
Recovery Support Service	446	6.4

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
 N ≤ 5 not reported to protect confidentiality.

Despite being the primary level of care among admissions in FY1314 (42.2%), the outpatient program has been surpassed by the opioid treatment program since FY1516 which remained the primary level of care among admissions in FY2223 with a proportion of 30.6% (Figure 4.2.3).

Figure 4.2.3. Trends in level of care among patients from SPA 2



Patients from Service Planning Area 3 (SPA 3)

TREATMENT ADMISSIONS AND DISCHARGES

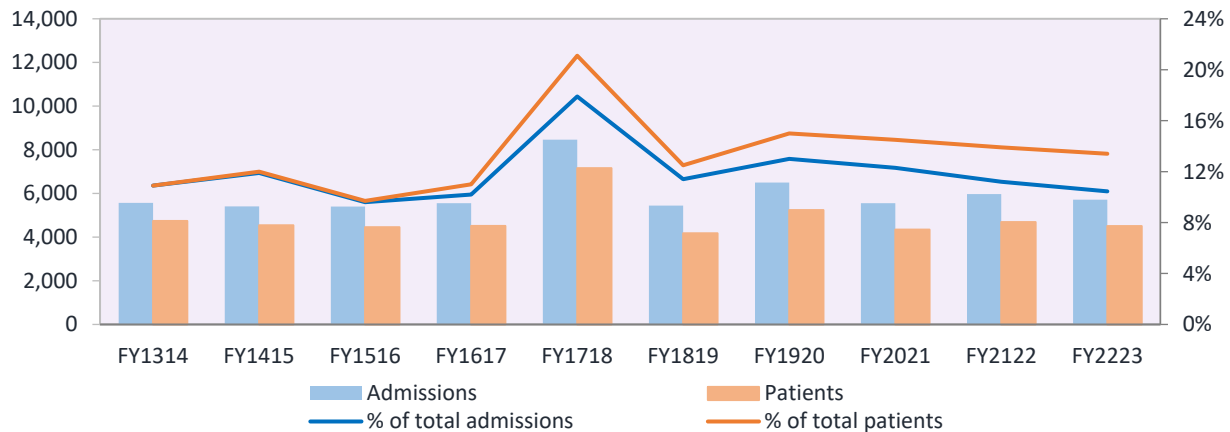
There were 5,716 treatment admissions for 4,506 patients residing in SPA 3, accounting for 10.4% of all admissions (Table 4.3.1).

Table 4.3.1. Treatment admissions and discharges among patients from SPA 3, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	5,716	10.4	4,506	13.4
Discharged	3,637	9.5	2,846	12.1

From FY1314 to FY1617, the number and proportion of admissions in SPA 3 remained stable. However, there was a significant increase in admissions from 5,551 in FY1617 to 8,460 in FY1718, followed by a decrease to 5,444 in FY1819. Subsequently, admissions remained relatively stable through FY2223 (Figure 4.3.1).

Figure 4.3.1. Trends in admissions and patients from SPA 3



Among SPA 3 patient discharges, almost half (48.8%) had positive compliance, with 35.4% completing treatment and 13.4% leaving the program with satisfactory progress (Table 4.3.2).

Table 4.3.2. Discharge status of patients from SPA 3, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive Compliance	1,644	48.8
Completed treatment	1,192	35.4
Left – satisfactory progress	452	13.4
Negative Compliance	1,607	47.7
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	119	3.5

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

As shown in Table 4.3.3, the majority of patients residing in SPA 3 were male (63.6%), Latinx (66.9%), ages 26-34 (29.9%), and unemployed (58.1%). Among SPA 3 admissions, 34.4% reported mental health issues, and 22.0% were involved in the criminal justice system.

Table 4.3.3. Characteristics of patients from SPA 3, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	2,847	63.6
	Female	1,625	36.3
	Transgender male	-	-
	Transgender female	-	-
	Non-conforming or refuse to state	-	-
RACE	Latinx	2,936	66.9
	White	986	22.5
	Black/African American	324	7.4
	Asian	93	2.1
	Pacific Islander	-	-
	American Indian /Alaska Native	29	0.7
	Other	15	0.3
AGE	17 and under	268	6.3
	18-25	404	9.5
	26-34	1,279	29.9
	35-44	1,040	24.3
	45-54	530	12.4
	55-64	531	12.4
	65+	220	5.1
SEXUAL ORIENTATION	Heterosexual	3,980	92.7
	Gay, lesbian, or bisexual	235	5.5
	Something else	-	-
	Unsure/questioning	28	0.7
	Prefer not to state	48	1.1
EDUCATION	Middle school or below	114	2.7
	Some high school	1,048	25.0
	High school completed	2,156	51.5
	Some college or beyond	868	20.7
EMPLOYMENT	Employed	1,320	24.4
	Unemployed (seeking)	1,922	35.5
	Unemployed (not seeking)	1,220	22.6
	Not in labor force	946	17.5
LANGUAGE AT HOME	English	4,732	93.4
	Other Language	333	6.6
MENTAL HEALTH ISSUES	Yes	1,854	34.4
	No	3,543	65.6
PHYSICAL HEALTH ISSUES	Yes	608	11.3
	No	4,772	88.7
DISABILITY	Disabled at admission	541	10.9
CRIMINAL JUSTICE	Criminal justice involved	1,200	22.2

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
 N ≤ 5 not reported to protect confidentiality.



PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 4.3.4, the most commonly reported primary substance use was methamphetamine (25.2%), followed by alcohol (23.5%) and heroin (23.0%).

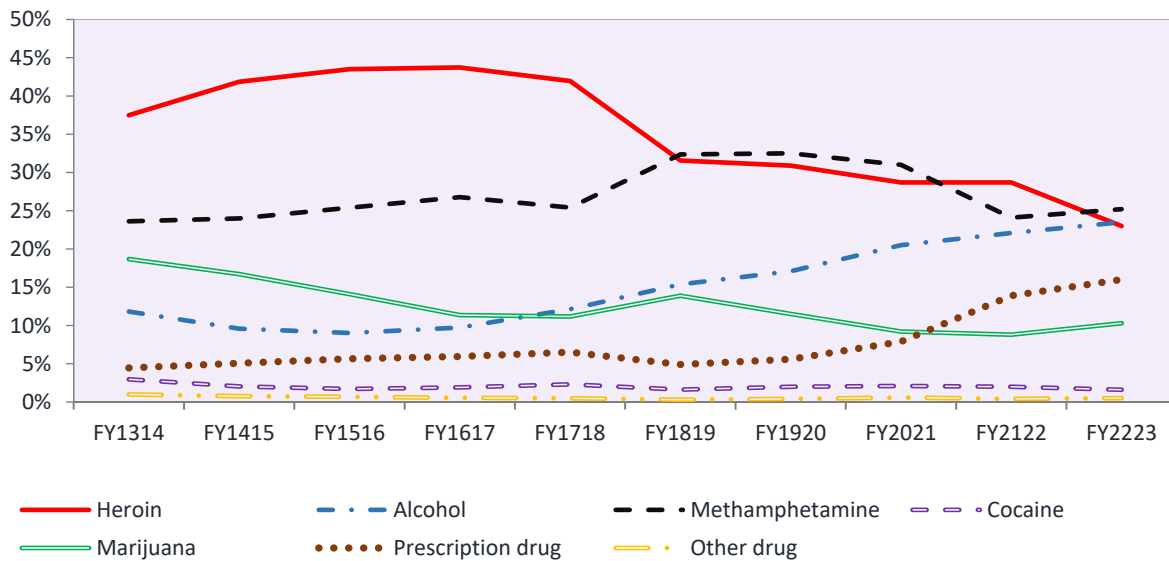
Table 4.3.4. Primary substance use among patients from SPA 3, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Methamphetamine	1,358	25.2
Alcohol	1,267	23.5
Heroin	1,242	23.0
Prescription drug	863	16.0
Marijuana	555	10.3
Cocaine	86	1.6
Other drugs	28	0.5

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

The proportion of primary heroin admissions increased continuously from 37.5% in FY1314 to 43.7% in FY1617, but thereafter decreased to 23.0% in FY2223. From FY1314 to FY1718 and again in FY2122, heroin was the most common primary substance use among patients residing in SPA 3. From FY1819 to FY2021, methamphetamine slightly surpassed heroin to assume this position. Notably, alcohol and prescription drug have been on a steady increase since FY1516 and FY1819, respectively (Figure 4.3.2).

Figure 4.3.2. Trends in primary substance use among patients from SPA 3



LEVEL OF CARE

As shown in Table 4.3.5, the most common level of care among patients residing in SPA 3 was opioid treatment programs (30.0%), followed by outpatient programs (29.6%) and residential service programs (18.9%).

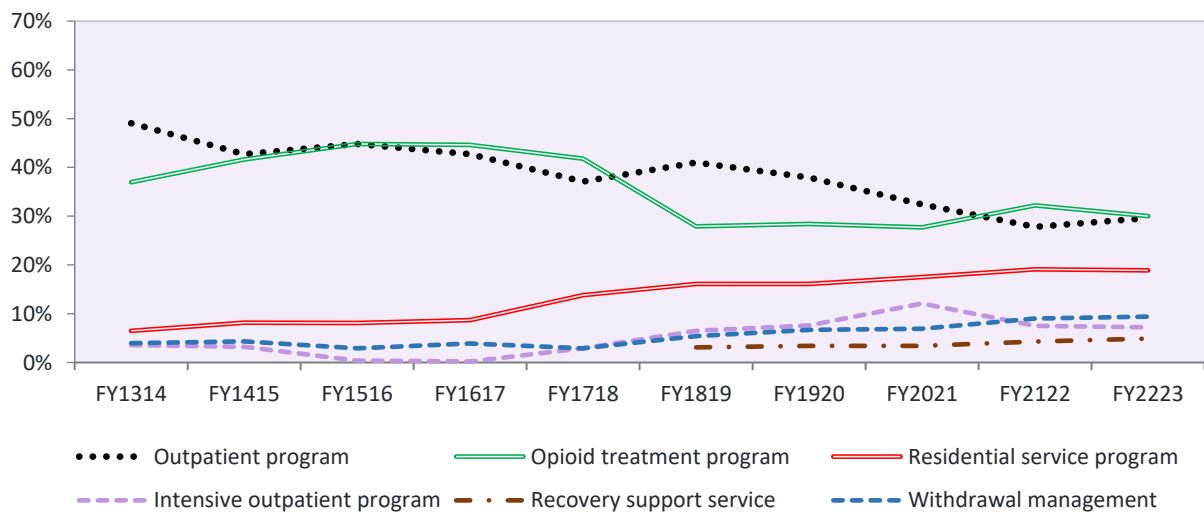
Table 4.3.5. Level of care among patients from SPA 3, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	538	9.4
ASAM WM 2	-	-
ASAM WM 3.2	398	7.0
ASAM WM 3.7/4.0	137	2.4
Residential Service	1,078	18.9
ASAM 3.1	53	9.2
ASAM 3.3	17	0.3
ASAM 3.5	538	9.4
Intensive Outpatient (ASAM 2.1)	410	7.2
Outpatient	1,687	29.6
Opioid Treatment Program (ASAM OTP)	1,712	30.0
Recovery Support Service	282	4.9

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

The outpatient and opioid treatment programs have alternated as the most common levels of care over the past ten fiscal years. In FY2223, the majority of admissions (30.0%) were to the opioid treatment programs, which is slightly above that of outpatient programs (29.6%). However, there has been a consistent decrease in admissions to the outpatient programs over time. The proportion of admission to the residential service programs remained stable from FY1314 to FY1617 then increased slightly from FY1617 to FY2223 (Figure 4.3.3).

Figure 4.3.3. Trends in level of care among patients from SPA 3



Patients from Service Planning Area 4 (SPA 4)

TREATMENT ADMISSIONS AND DISCHARGES

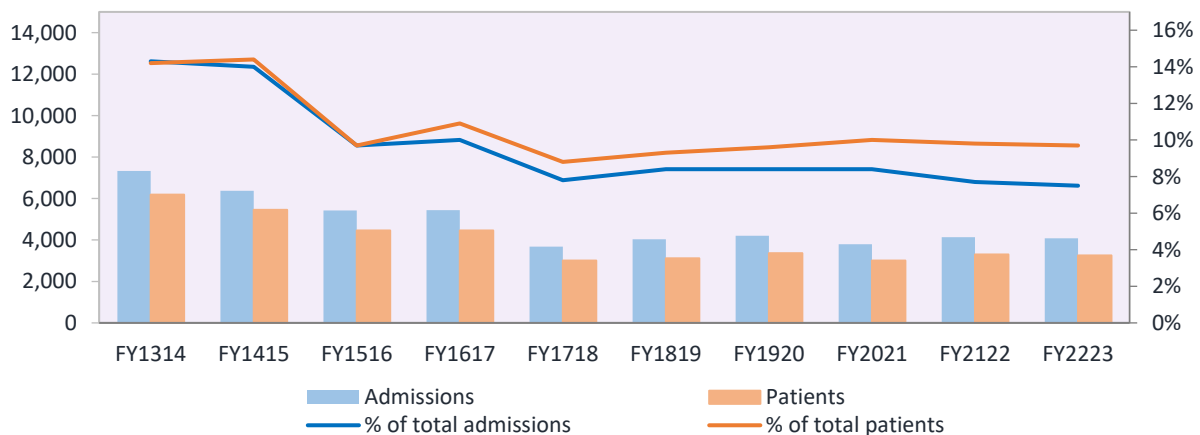
There were 4,079 treatment admissions for 3,255 patients residing in SPA 4, accounting for 7.5% of all admissions (Table 4.4.1).

Table 4.4.1. Treatment admissions and discharges among patients from SPA 4, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	4,079	7.5	3,255	9.7
Discharged	2,610	6.8	2,089	8.8

Both the number and proportion of admissions remained relatively stable from FY1314 to FY1415, but then the proportion of admissions decreased noticeably from 14.0% in FY1415 to 7.5% in FY2223 (Figure 4.4.1).

Figure 4.4.1. Trends in admissions and patients from SPA 4



Among SPA 4 patient discharges, 48.6% had positive compliance, with 36.8% completing treatment and 11.7% leaving the program with satisfactory progress (Table 4.4.2).

Table 4.4.2. Discharge status of patients from SPA 4, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	1,177	48.6
Completed treatment	893	36.8
Left – satisfactory progress	284	11.7
Negative compliance	1,139	47.0
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	108	4.5

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

As shown in Table 4.4.3, the majority of patients residing in SPA 4 were male (63.2%), Latinx (59.7%), ages 26-34 (30.0%), and unemployed (59.9%). Among SPA 4 admissions, 42.4% reported mental health issues.

Table 4.4.3. Characteristics of patients from SPA 4, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	2,041	63.2
	Female	1,160	35.9
	Transgender male	10	0.3
	Transgender female	16	0.5
	Non-conforming or refuse to state	-	-
RACE	Latinx	1,868	59.7
	White	743	23.7
	Black/African American	407	13.0
	Asian	70	2.2
	Pacific Islander	-	-
	American Indian /Alaska Native	14	0.4
	Other	25	0.8
AGE	17 and under	141	4.6
	18-25	258	8.4
	26-34	925	30.0
	35-44	761	24.7
	45-54	417	13.5
	55-64	399	13.0
	65+	180	5.8
SEXUAL ORIENTATION	Heterosexual	2,620	87.3
	Gay, lesbian, or bisexual	289	9.6
	Something else	-	-
	Unsure/questioning	20	0.7
	Prefer not to state	68	2.3
EDUCATION	Middle school or below	175	5.8
	Some high school	790	26.2
	High school completed	1,290	42.8
	Some college or beyond	756	25.1
EMPLOYMENT	Employed	822	21.3
	Unemployed (seeking)	1,348	35.0
	Unemployed (not seeking)	958	24.9
	Not in labor force	727	18.9
LANGUAGE AT HOME	English	3,099	87.2
	Other Language	453	12.8
MENTAL HEALTH ISSUES	Yes	1,615	42.4
	No	2,192	57.6
PHYSICAL HEALTH ISSUES	Yes	441	11.6
	No	3,356	88.4
DISABILITY	Disabled at admission	516	14.6
CRIMINAL JUSTICE	Criminal justice involved	639	16.8

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.

PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 4.4.4, the most common primary substance use among patients residing in SPA 4 was alcohol (27.2%), followed by methamphetamine (26.3%) and heroin (21.8%).

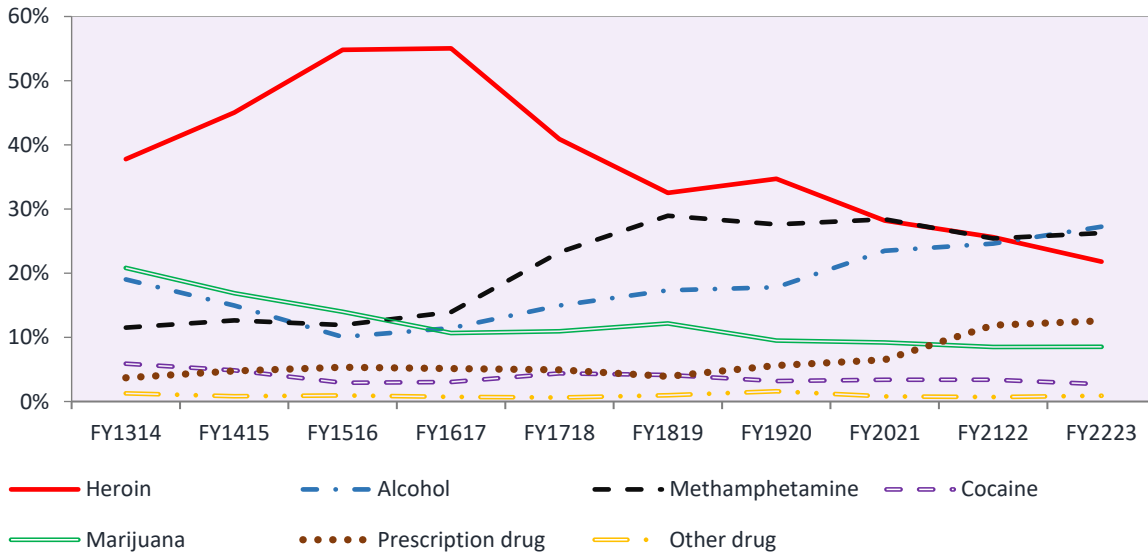
Table 4.4.4. Primary substance use among patients from SPA 4, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Alcohol	1,040	27.2
Methamphetamine	1,002	26.3
Heroin	832	21.8
Prescription drug	480	12.6
Marijuana	326	8.5
Cocaine	103	2.7
Other drugs	34	0.9

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

The proportion of primary heroin admissions increased rapidly from 37.8% in FY1314 to 55.0% in FY1617 and decreased to 21.8% in FY2223. Heroin was the leading primary substance use for eight out of the past ten fiscal years, with methamphetamine surpassing it slightly in FY2021. The proportions of methamphetamine and alcohol admissions have been increasing steadily since FY1516 with alcohol leading as the primary substance for SPA 4 at 27.2% in FY2223 (Figure 4.4.2).

Figure 4.4.2. Trends in primary substance use among patients from SPA 4



LEVEL OF CARE

As shown in Table 4.4.5, the most common level of care among patients residing in SPA 4 was outpatient programs (28.3%), followed by opioid treatment programs (26.6%) and residential service programs (21.0%).

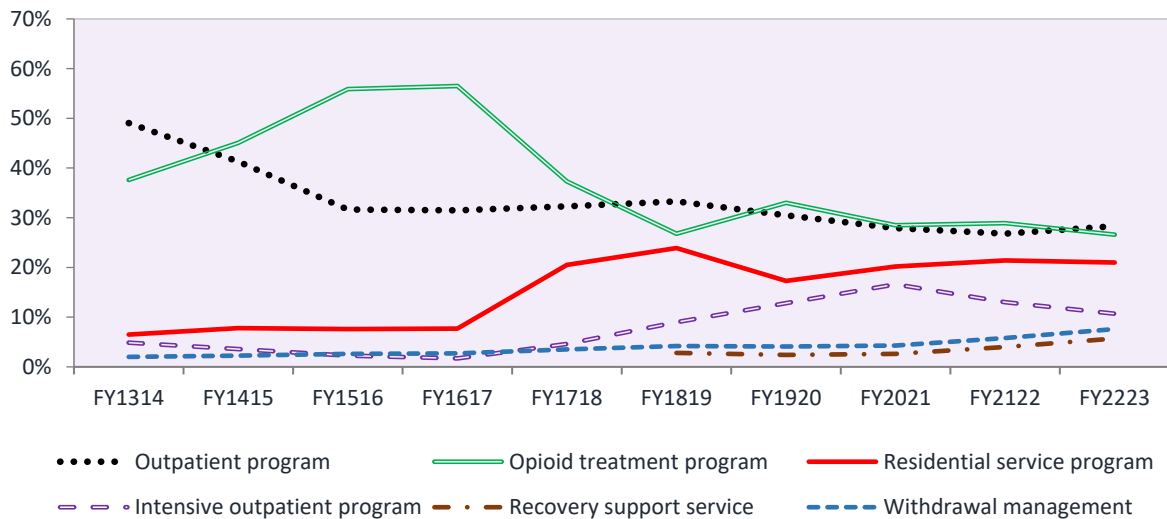
Table 4.4.5. Level of care among patients from SPA 4, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	310	7.6
ASAM WM 2	-	-
ASAM WM 3.2	220	5.4
ASAM WM 3.7/4.0	87	2.1
Residential Service	857	21.0
ASAM 3.1	350	8.6
ASAM 3.3	-	-
ASAM 3.5	504	12.4
Intensive Outpatient (ASAM 2.1)	436	10.7
Outpatient	1,155	28.3
Opioid Treatment Program (ASAM OTP)	1,083	26.6
Recovery Support Service	234	5.7

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
N ≤ 5 not reported to protect confidentiality.

The outpatient and opioid treatment programs have alternated as the most common levels of care over the past ten fiscal years. However, there has been a decreasing trend in admissions to the outpatient programs over time. Notably, the proportion of admissions to the residential service programs increased from 7.7% in FY1617 to 21.0% in FY2223 (Figure 4.4.3).

Figure 4.4.3. Trends in level of care among patients from SPA 4



Patients from Service Planning Area 5 (SPA 5)

TREATMENT ADMISSIONS AND DISCHARGES

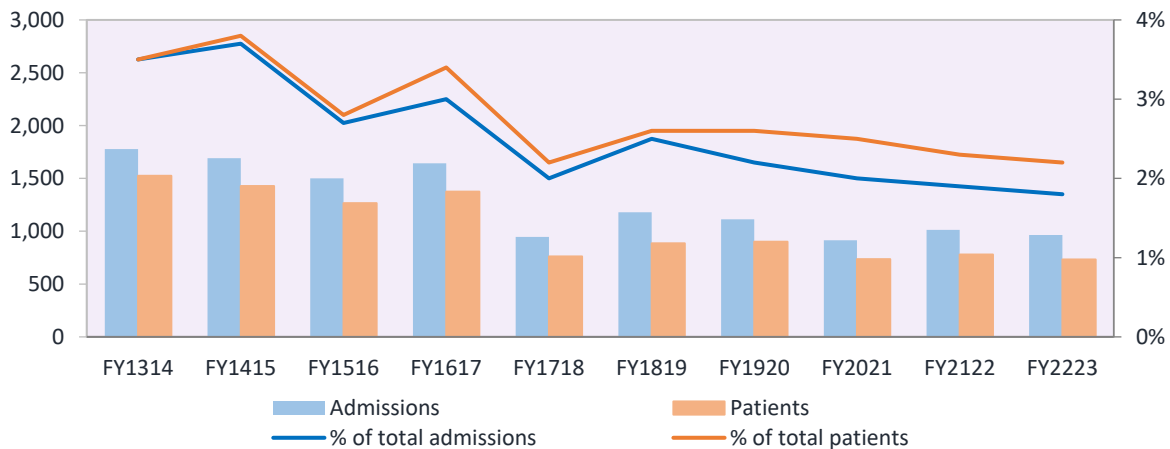
There were 965 treatment admissions for 733 patients residing in SPA 5, accounting for 1.8% of all admissions (Table 4.5.1).

Table 4.5.1. Treatment admissions and discharges among patients from SPA 5, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	965	1.8	733	2.2
Discharged	589	1.5	442	1.9

The number of admissions and patients showed an overall decreasing trend over the past ten fiscal years. The proportion of admissions and patients both fluctuated but also revealed a downward trend (Figure 4.5.1).

Figure 4.5.1. Trends in admissions and patients from SPA 5



Among SPA 5 patient discharges, 56.8% had positive compliance, with 41.6% completing treatment and 15.2% leaving the program with satisfactory progress (Table 4.5.2).

Table 4.5.2. Discharge status of patients from SPA 5, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	318	56.8
Completed treatment	233	41.6
Left – satisfactory progress	85	15.2
Negative compliance	228	40.7
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	14	2.5

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

As shown in Table 4.5.3, the majority of patients residing in SPA 5 were male (64.0%), White (51.5%), ages 26-34 (26.4%), and unemployed (55.9%). Among SPA 5 admissions, 49.7% reported mental health issues, and 15.3% reported physical health issues.

Table 4.5.3. Characteristics of patients from SPA 5, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	469	64.0
	Female	261	35.6
	Transgender male	-	-
	Transgender female	-	-
	Non-conforming or refuse to state	-	-
RACE	Latinx	220	31.2
	White	363	51.5
	Black/African American	91	12.9
	Asian	15	2.1
	Pacific Islander	-	-
	American Indian /Alaska Native	6	0.9
	Other	8	1.1
AGE	17 and under	13	1.9
	18-25	53	7.6
	26-34	185	26.4
	35-44	176	25.1
	45-54	117	16.7
	55-64	102	14.6
SEXUAL ORIENTATION	65+	54	7.7
	Heterosexual	624	89.3
	Gay, lesbian, or bisexual	47	6.7
	Something else	-	-
	Unsure/questioning	8	1.1
EDUCATION	Prefer not to state	20	2.9
	Middle school or below	14	2.0
	Some high school	100	14.5
	High school completed	306	44.2
EMPLOYMENT	Some college or beyond	272	39.3
	Employed	234	25.2
	Unemployed (seeking)	318	34.3
	Unemployed (not seeking)	200	21.6
LANGUAGE AT HOME	Not in labor force	175	18.9
	English	849	95.9
MENTAL HEALTH ISSUES	Other Language	36	4.1
	Yes	457	49.7
PHYSICAL HEALTH ISSUES	No	463	50.3
	Yes	141	15.3
DISABILITY	No	780	84.7
	Disabled at admission	123	14.2
CRIMINAL JUSTICE	Criminal justice involved	79	8.6

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
 N ≤ 5 not reported to protect confidentiality.

PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 4.5.4, the most commonly reported primary substance use was alcohol (31.4%), followed by prescription drug (25.4%) and heroin (23.7%).

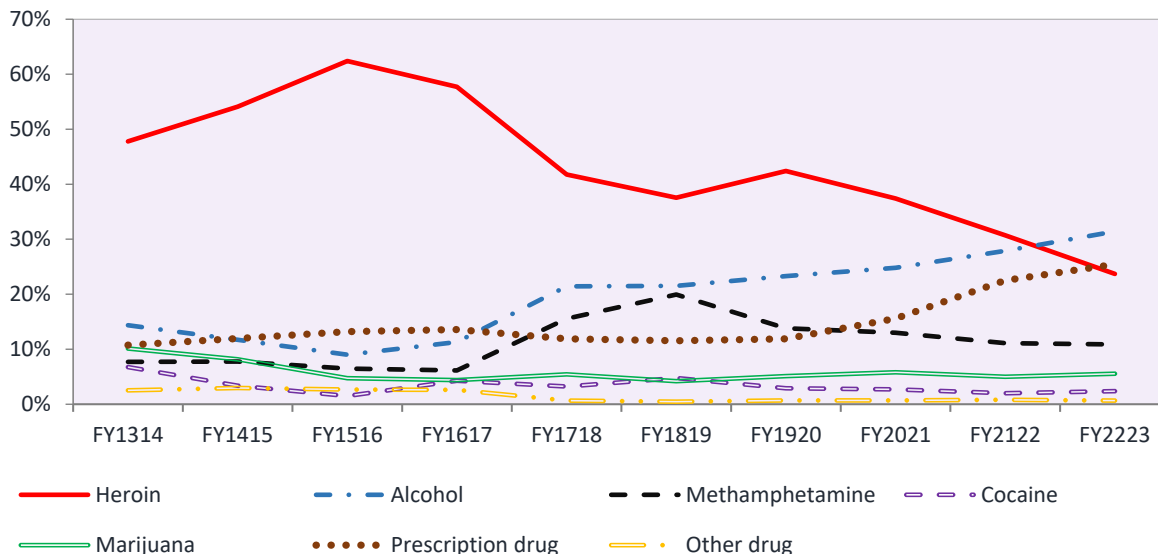
Table 4.5.4. Primary substance use among patients from SPA 5, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Alcohol	289	31.4
Prescription drug	234	25.4
Heroin	218	23.7
Methamphetamine	100	10.9
Marijuana	51	5.5
Cocaine	22	2.4
Other drugs	6	0.7

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

The proportion of primary heroin admissions among patients residing in SPA 5 increased from 48.0% in FY1314 to 62.4% in FY1516, and then decreased to 23.7% in FY2223. Heroin had been the leading primary substance use for the previous nine fiscal years until FY2223 when alcohol stood as the leading primary substance with 31.4%. Notably, the proportion of primary prescription drug admissions has been rising since FY2021, also surpassing heroin in FY2223 to become the second most common primary substance use at admission (Figure 4.5.2).

Figure 4.5.2. Trends in primary substance use among patients from SPA 5



LEVEL OF CARE

As shown in Table 4.5.5, the most common level of care among patients residing in SPA 5 was opioid treatment programs (35.2%), followed by outpatient programs (18.0%) and residential service programs (15.6%).

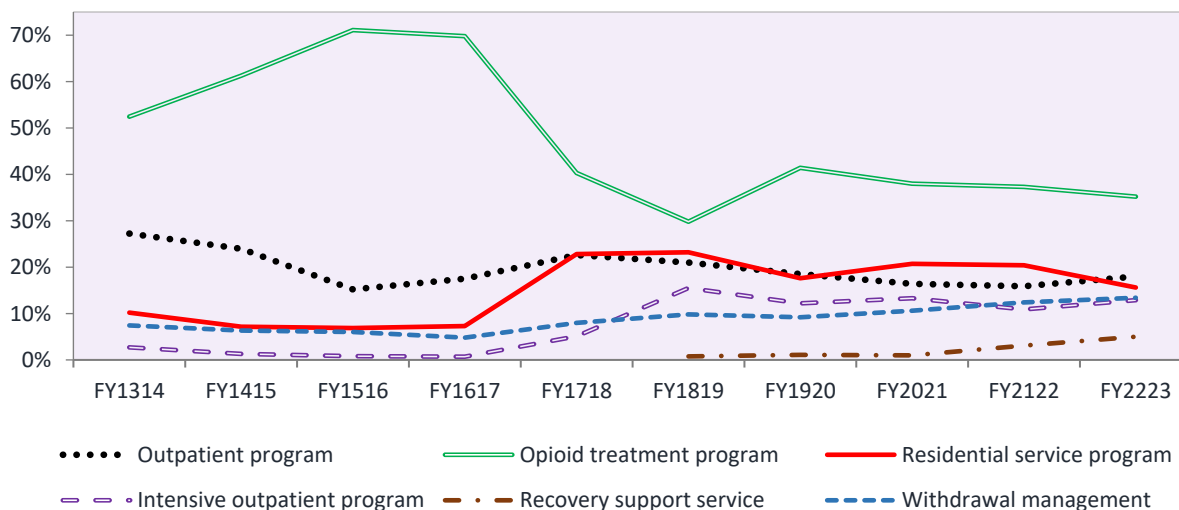
Table 4.5.5. Level of care for among patients from SPA 5, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	129	13.4
ASAM WM 2	-	-
ASAM WM 3.2	95	9.9
ASAM WM 3.7/4.0	33	3.4
Residential Service	150	15.6
ASAM 3.1	89	9.2
ASAM 3.3	-	-
ASAM 3.5	60	6.2
Intensive Outpatient (ASAM 2.1)	124	12.9
Outpatient	174	18.0
Opioid Treatment Program (ASAM OTP)	339	35.2
Recovery Support Service	48	5.0

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
N ≤ 5 not reported to protect confidentiality

Over the past ten fiscal years, the opioid treatment program remained the most common level of care for admissions among patients residing in SPA 5. The proportion of admissions to opioid treatment programs was at an increase, reaching 71.1% in FY1516, but then decreased to 29.8% in FY1819 and went back up to 35.2% in FY2223. The proportion of admissions to outpatient programs showed an overall decreasing trend up to FY2223, where at 18.0%, it was the second most common level of care among admissions residing in SPA 5 (Figure 4.5.3).

Figure 4.5.3. Trends in level of care among patients from SPA 5



Patients from Service Planning Area 6 (SPA 6)

TREATMENT ADMISSIONS AND DISCHARGES

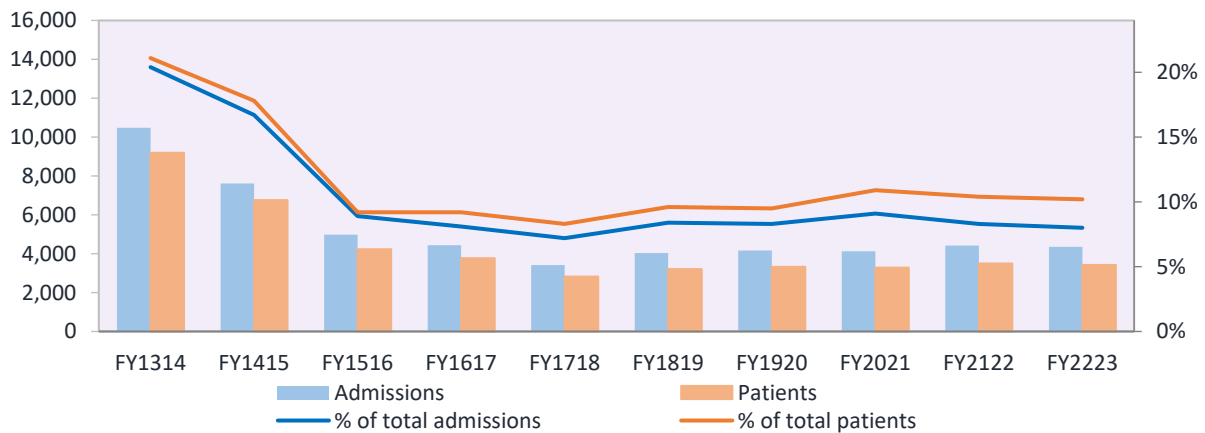
There were 4,356 treatment admissions for 3,424 patients residing in SPA 6, accounting 8.0% of all admissions (Table 4.6.1).

Table 4.6.1. Treatment admissions and discharges among patients from SPA 6, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	4,356	8.0	3,424	10.2
Discharged	2,891	7.6	2,281	9.7

The number and proportion of admissions decreased from 10,475 (20.4%) in FY1314 to 4,356 (8.0%) in FY2223 (Figure 4.6.1).

Figure 4.6.1. Trends in admissions and patients from SPA 6



Among SPA 6 patient discharges, 48.4% had positive compliance, with 34.8% completing treatment and 13.6% leaving the program with satisfactory progress (Table 4.6.2).

Table 4.6.2. Discharge status of patients from SPA 6, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	1,273	48.4
Completed treatment	916	34.8
Left – satisfactory progress	357	13.6
Negative compliance	1,274	48.5
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	82	3.1

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

As shown in Table 4.6.3, the majority of patients residing in SPA 6 were male (60.2%), Latinx (56.9%), ages 26-34 (32.3%), and unemployed (55.5%). Among SPA 6 admissions, 47.4% reported mental health issues, 20.9% reported criminal justice involvement, and 19.3% reported a disability.

Table 4.6.3. Characteristics of patients from SPA 6, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	2,042	60.2
	Female	1,341	39.5
	Transgender male	-	-
	Transgender female	-	-
	Non-conforming or refuse to state	-	-
RACE	Latinx	1,901	56.9
	White	319	9.5
	Black/African American	1,050	31.4
	Asian	37	1.1
	Pacific Islander	-	-
	American Indian / Alaska Native	19	0.6
	Other	11	0.3
AGE	17 and under	223	6.8
	18-25	357	10.8
	26-34	1,065	32.3
	35-44	785	23.8
	45-54	387	11.8
	55-64	295	9.0
	65+	181	5.5
SEXUAL ORIENTATION	Heterosexual	3,049	92.2
	Gay, lesbian, or bisexual	177	5.4
	Something else	-	-
	Unsure/questioning	24	0.7
	Prefer not to state	57	1.7
EDUCATION	Middle school or below	146	4.5
	Some high school	1,023	31.6
	High school completed	1,504	46.5
	Some college or beyond	561	17.3
EMPLOYMENT	Employed	804	19.2
	Unemployed (seeking)	1,234	29.4
	Unemployed (not seeking)	1,094	26.1
	Not in labor force	1,060	25.3
LANGUAGE AT HOME	English	3,438	89.8
	Other Language	390	10.2
MENTAL HEALTH ISSUES	Yes	1,977	47.4
	No	2,193	52.6
PHYSICAL HEALTH ISSUES	Yes	465	11.2
	No	3,688	88.8
DISABILITY	Disabled at admission	731	19.3
CRIMINAL JUSTICE	Criminal justice involved	872	20.9

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.

PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 4.6.4, the most commonly reported primary substance use was methamphetamine (32.9%), followed by alcohol (22.1%) and marijuana (16.3%).

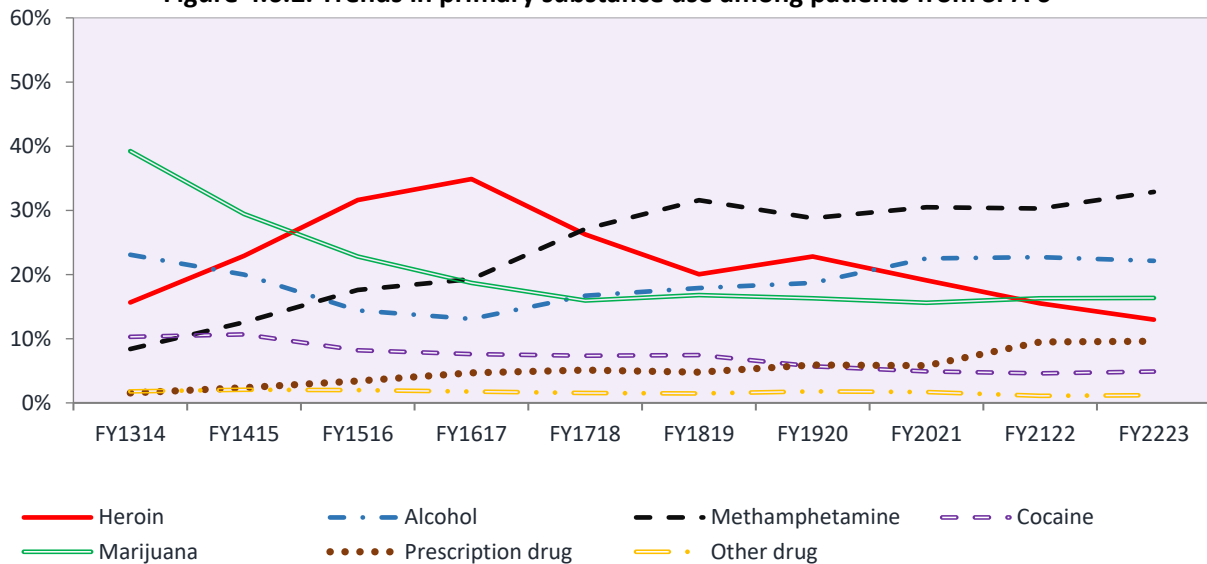
Table 4.6.4. Primary substance use among patients from SPA 6, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Methamphetamine	1,366	32.9
Alcohol	920	22.1
Marijuana	679	16.3
Heroin	539	13.0
Prescription drug	399	9.6
Cocaine	203	4.9
Other drugs	49	1.2

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

From FY1314 to FY1415, marijuana was the predominant primary substance reported, although its proportion has steadily declined over the past decade. In FY1516 and FY1617, primary heroin admissions surpassed marijuana to become the most prevalent primary substance use, though it began to decline thereafter. Primary methamphetamine admissions exhibited an overall increasing trend over the last ten fiscal years and has remained the most common primary substance use among admissions since FY1718 (Figure 4.6.2).

Figure 4.6.2. Trends in primary substance use among patients from SPA 6



LEVEL OF CARE

As shown in Table 4.6.5, the most common level of care among patients residing in SPA 6 was outpatient programs (35.5%), followed by residential service programs (20.0%) and opioid treatment programs (18.4%).

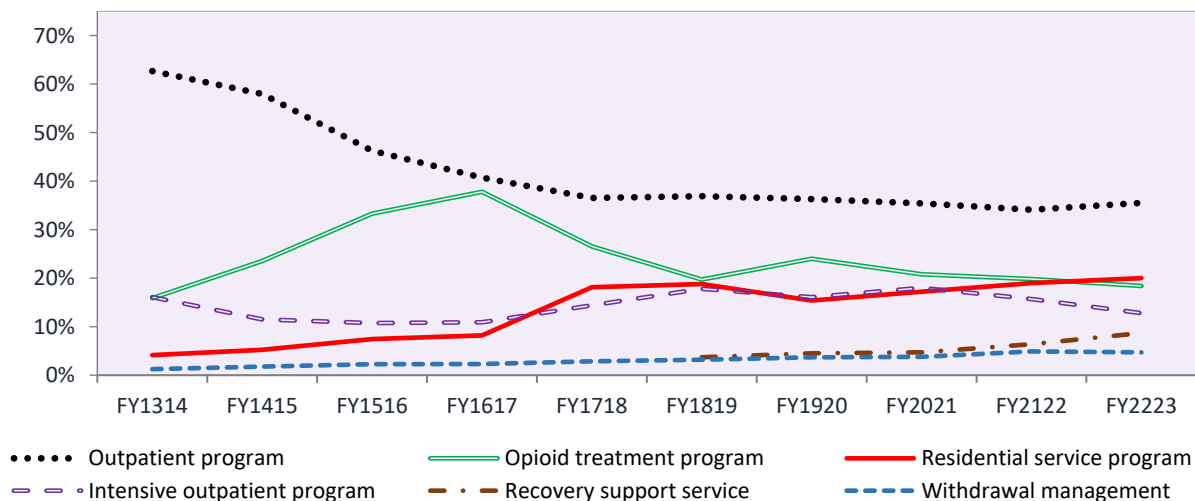
Table 4.6.5. Level of care among patients from SPA 6, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	202	4.7
ASAM WM 2	-	-
ASAM WM 3.2	146	3.4
ASAM WM 3.7/4.0	51	1.2
Residential Service	864	20.0
ASAM 3.1	452	10.4
ASAM 3.3	7	0.2
ASAM 3.5	405	9.4
Intensive Outpatient (ASAM 2.1)	553	12.8
Outpatient	1,537	35.5
Opioid Treatment Program (ASAM OTP)	796	18.4
Recovery Support Service	377	8.7

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

Throughout the past ten fiscal years, outpatient programs consistently maintained the position as the prevailing level of care for patients in SPA 6. However, the proportion of admissions to outpatient programs displayed a continuous decline, decreasing from 62.7% in FY1314 to 35.5% in FY2223. In contrast, admissions to opioid treatment programs witnessed a rapid increase from 15.9% in FY1314 to 37.8% in FY1617, followed by a subsequent decrease to 18.4% in FY2223 and being slightly surpassed by residential service programs at 20.0% (Figure 4.6.3).

Figure 4.6.3. Trends in level of care among patients from SPA 6



Patients from Service Planning Area 7 (SPA 7)

TREATMENT ADMISSIONS AND DISCHARGES

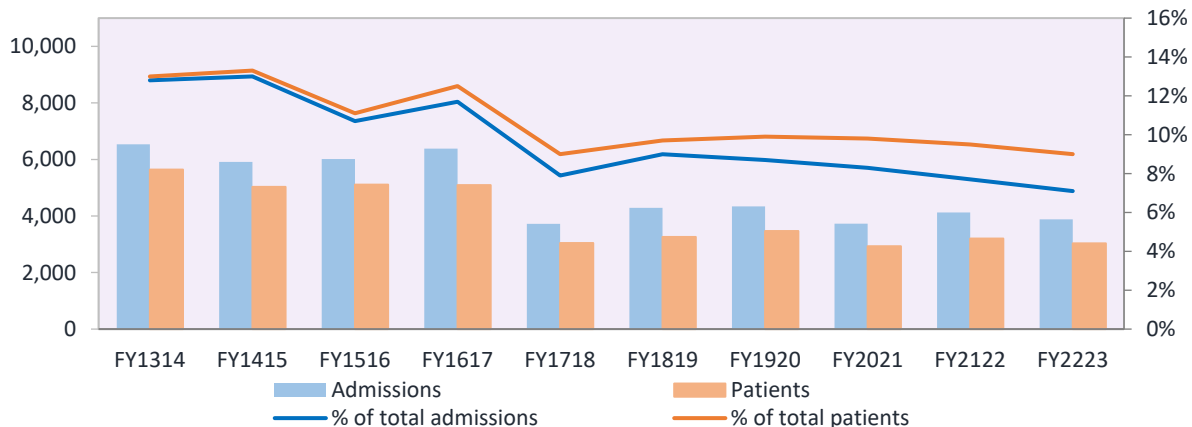
There were 3,879 treatment admissions for 3,034 patients residing in SPA 7, accounting for 7.1% of all admissions (Table 4.7.1).

Table 4.7.1. Treatment admissions and discharges among patients from SPA 7, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	3,879	7.1	3,034	9.0
Discharged	2,460	6.5	1,928	8.2

The number and proportion of admissions revealed an overall decreasing trend over the past ten fiscal years from 6,536 (12.8%) in FY1314 to 3,879 (7.1%) in FY2223, with some fluctuations in between (Figure 4.7.1).

Figure 4.7.1. Trends in admissions and patients from SPA 7



Among SPA 7 patient discharges, 49.5% had positive compliance, with 35.0% completing treatment and 14.5% leaving the program with satisfactory progress (Table 4.7.2).

Table 4.7.2. Discharge status of patients from SPA 7, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	1,106	49.5
Completed treatment	782	35.0
Left – satisfactory progress	324	14.5
Negative compliance	1,076	48.2
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	51	2.3

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENTS CHARACTERISTICS

As shown in Table 4.7.3, the majority of patients residing in SPA 7 were male (63.2%), Latinx (79.1%), ages 26-34 (29.1%), and unemployed (55.6%). Among SPA 7 admissions, 34.5% reported mental health issues, and 21.7% reported criminal justice involvement.

Table 4.7.3. Characteristics of patients from SPA 7, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER	Male	1,902	63.2
	Female	1,088	36.1
	Transgender male	-	-
	Transgender female	11	0.4
	Non-conforming or refuse to state	6	0.2
RACE	Latinx	2,349	79.1
	White	414	13.9
	Black/African American	144	4.9
	Asian	35	1.2
	Pacific Islander	-	-
	American Indian / Alaska Native	13	0.4
	Other	12	0.4
AGE	17 and under	227	7.8
	18-25	292	10.0
	26-34	846	29.1
	35-44	672	23.1
	45-54	351	12.1
	55-64	356	12.2
	65+	168	5.8
SEXUAL ORIENTATION	Heterosexual	2,675	92.5
	Gay, lesbian, or bisexual	142	4.9
	Something else	-	-
	Unsure/questioning	9	0.3
	Prefer not to state	65	2.2
EDUCATION	Middle school or below	123	4.3
	Some high school	791	27.7
	High school completed	1,429	50.1
	Some college or beyond	512	17.9
EMPLOYMENT	Employed	932	25.1
	Unemployed (seeking)	1,195	32.2
	Unemployed (not seeking)	869	23.4
	Not in labor force	714	19.2
LANGUAGE AT HOME	English	3,041	90.6
	Other Language	314	9.4
MENTAL HEALTH ISSUES	Yes	1,265	34.5
	No	2,403	65.5
PHYSICAL HEALTH ISSUES	Yes	446	12.2
	No	3,199	87.8
DISABILITY	Disabled at admission	400	11.9
CRIMINAL JUSTICE	Criminal justice involved	799	21.7

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.

PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 4.7.4, the most common primary substance use among patients residing in SPA 7 was methamphetamine (24.6%), followed by heroin (23.4%) and alcohol (23.0%).

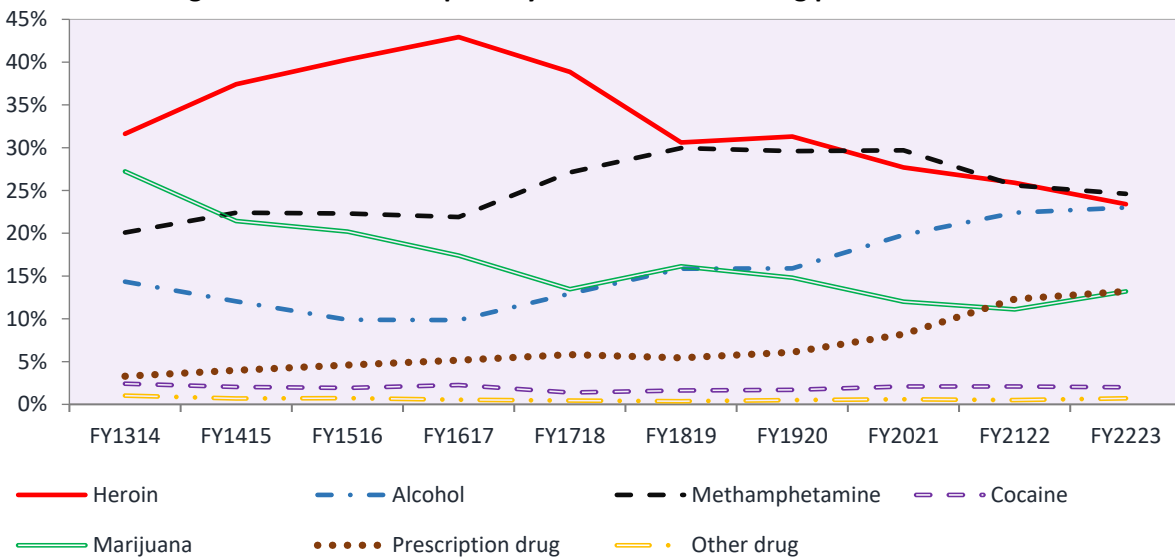
Table 4.7.4. Primary substance use among patients from SPA 7, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Methamphetamine	904	24.6
Heroin	859	23.4
Alcohol	844	23.0
Marijuana	485	13.2
Prescription drug	483	13.2
Cocaine	73	2.0
Other drugs	25	0.7

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

From FY1314 to FY1617, there was a significant increase in the proportion of primary heroin admissions, followed by a subsequent decrease until FY2122. Throughout FY1314 to FY1920 and again in FY2122, heroin remained the predominant primary substance among patients residing in SPA 7. Conversely, the proportion of primary methamphetamine admissions demonstrated a steady rise over the past ten fiscal years and surpassed heroin as the most common primary substance in FY2021 and again in FY2223 (Figure 4.7.2).

Figure 4.7.2. Trends in primary substance use among patients from SPA 7



LEVEL OF CARE

As shown in Table 4.7.5, the most common level of care among patients residing in SPA 7 was opioid treatment programs (30.7%), followed by outpatient programs (29.0%) and residential service programs (18.4%).

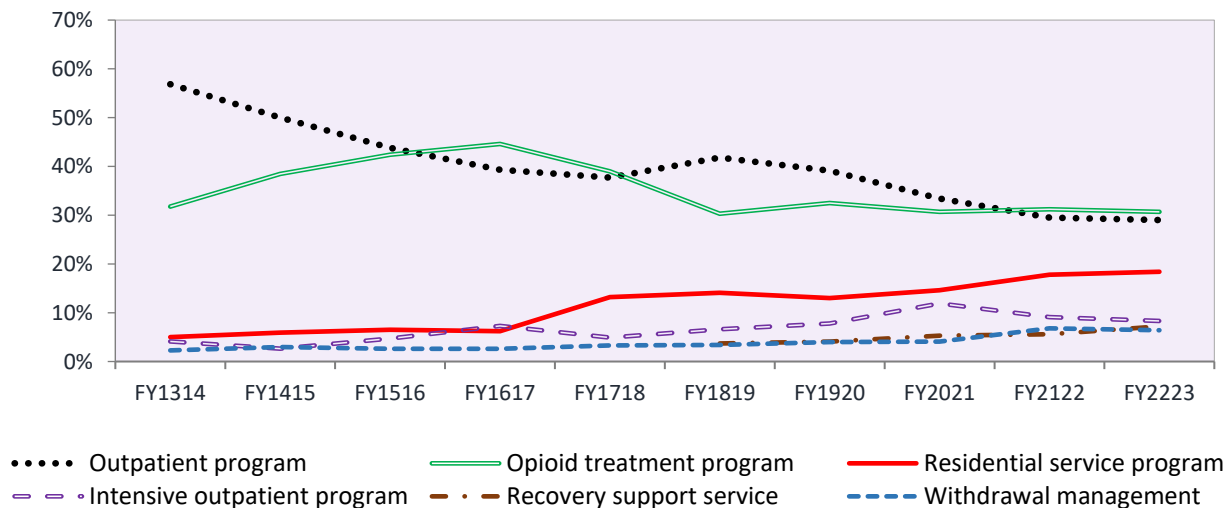
Table 4.7.5. Level of care among patients from SPA 7, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	247	6.4
ASAM WM 3.2	184	4.8
ASAM WM 3.7/4.0	58	1.5
Residential Service	711	18.4
ASAM 3.1	434	11.2
ASAM 3.5	274	7.1
Intensive Outpatient (ASAM 2.1)	322	8.3
Outpatient	1,121	29.0
Opioid Treatment Program (ASAM OTP)	1,188	30.7
Recovery Support Service	277	7.2

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

For most of the years, the outpatient program was the most common level of care for admissions in SPA 7, with a decreasing trend from 56.9% in FY1314 to 29.0% in FY2223. The proportion of patients admitted to opioid treatment programs showed an overall increasing trend from 31.8% in FY1314 to 44.6% in FY1617 but decreased to 30.7% in FY2223. In FY1617, FY1718, FY2122, and FY2223, the opioid treatment program surpassed the outpatient program as the most common level of care for patients in SPA 7 (Figure 4.7.3).

Figure 4.7.3. Trends in level of care among patients from SPA 7



Patients from Service Planning Area 8 (SPA 8)

TREATMENT ADMISSIONS AND DISCHARGES

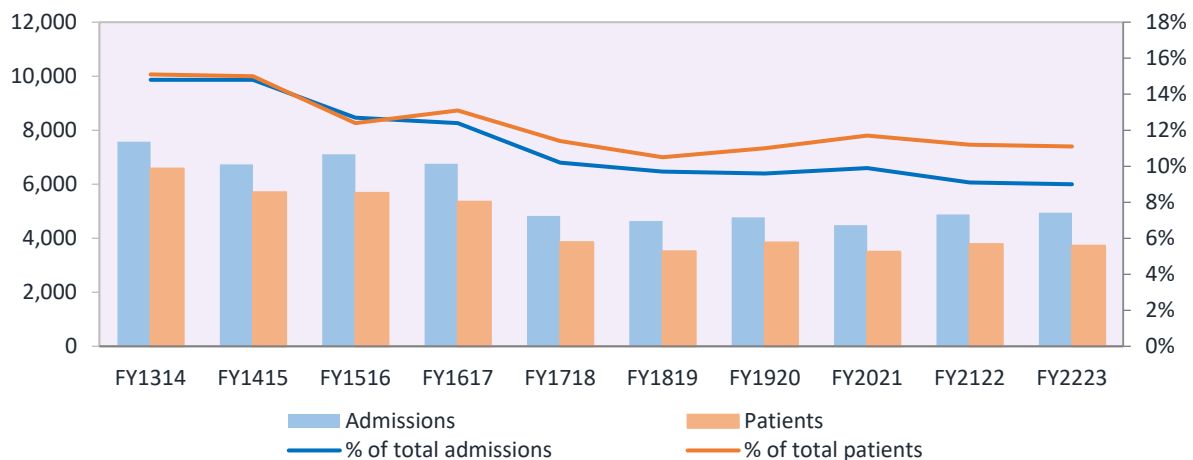
There were 4,948 treatment admissions for 3,725 patients residing in SPA 8, accounting for 9.0% of all admissions (Table 4.8.1).

Table 4.8.1. Treatment admissions and discharges among patients from SPA 8, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	4,948	9.0	3,725	11.1
Discharged	3,149	8.3	2,432	10.3

The number of admissions decreased by 34.7% from 7,579 in FY1314 to 4,948 in FY2223, and the proportion of admissions showed an overall decreasing trend through FY2223 (Figure 4.8.1).

Figure 4.8.1. Trends in admissions and patients from SPA 8



Among SPA 8 patient discharges, about half (50.2%) had positive compliance, with 35.4% completing treatment and 14.9% leaving the program with satisfactory progress (Table 4.8.2).

Table 4.8.2. Discharge status of patients from SPA 8, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	1,474	50.2
Completed treatment	1038	35.4
Left – satisfactory progress	436	14.9
Negative compliance	1,394	47.5
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	67	2.3

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

As shown in Table 4.8.3, the majority of patients residing in SPA 8 were male (59.9%), Latinx (49.5%), ages 26-34 (32.2%), and unemployed (56.6%). Among SPA 8 admissions, 44.7% reported having mental health issues.

Table 4.8.3. Characteristics of patients from SPA 8, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER	Male	2,211	59.9
	Female	1,473	39.9
	Transgender male	-	-
	Transgender female	-	-
	Non-conforming or refuse to state	-	-
RACE	Latinx	1,778	49.5
	White	994	27.7
	Black/African American	666	18.6
	Asian	86	2.4
	Pacific Islander	12	0.3
	American Indian / Alaska Native	24	0.7
	Other	29	0.8
AGE	17 and under	121	3.4
	18-25	303	8.6
	26-34	1,131	32.2
	35-44	825	23.5
	45-54	473	13.5
	55-64	445	12.7
SEXUAL ORIENTATION	65+	218	6.2
	Heterosexual	3,326	92.8
	Gay, lesbian, or bisexual	176	4.9
	Something else	-	-
	Unsure/questioning	19	0.5
EDUCATION	Prefer not to state	64	1.8
	Middle school or below	110	3.2
	Some high school	768	22.3
	High school completed	1,716	49.9
EMPLOYMENT	Some college or beyond	848	24.6
	Employed	1,032	22.1
	Unemployed (seeking)	1,403	30.0
	Unemployed (not seeking)	1,243	26.6
LANGUAGE AT HOME	Not in labor force	998	21.3
	English	4,138	93.8
MENTAL HEALTH ISSUES	Other Language	272	6.2
	Yes	2,068	44.7
PHYSICAL HEALTH ISSUES	No	2,562	55.3
	Yes	647	14.2
DISABILITY	No	3,925	85.8
	Disabled at admission	625	14.5
CRIMINAL JUSTICE	Criminal justice involved	750	16.2

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.



PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 4.8.4, the most common primary substance use among patients residing in SPA 8 was alcohol (25.7%), followed by methamphetamine (20.8%) and heroin (20.7%).

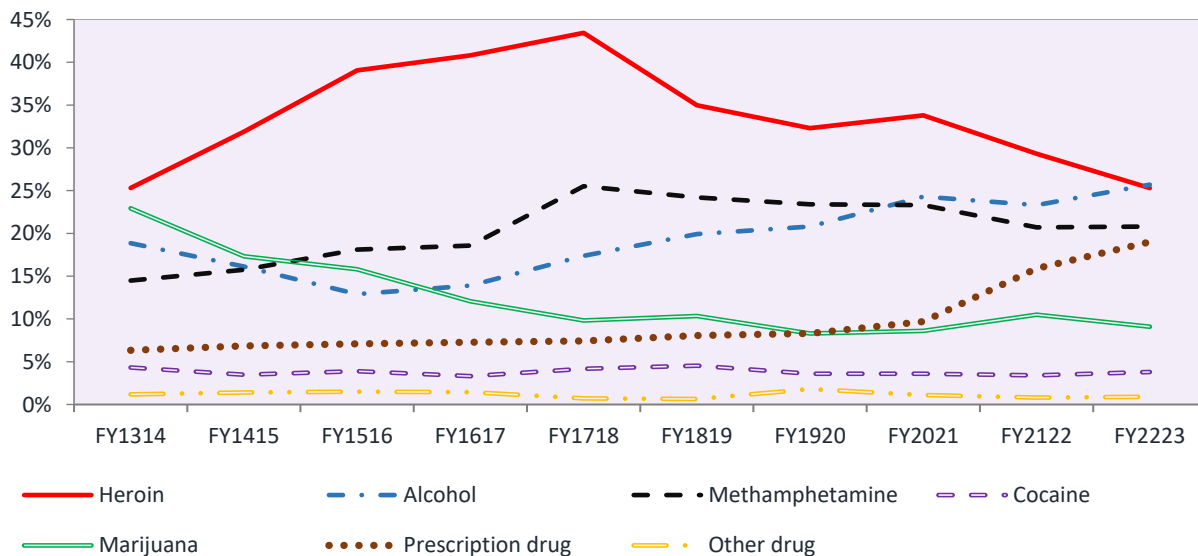
Table 4.8.4. Primary substance use among patients from SPA 8, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Alcohol	1,174	25.7
Methamphetamine	952	20.8
Heroin	946	20.7
Prescription drug	871	19.0
Marijuana	417	9.1
Cocaine	175	3.8
Other drugs	42	0.9

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

In SPA 8, heroin was the primary substance most commonly reported by patients for the majority of the years until FY2223. There was a general upward trend in primary heroin admissions from FY1314 to FY1718, followed by a decrease in subsequent years, resulting in it being surpassed by alcohol as the primary substance at 25.7% in FY2223. Additionally, primary alcohol and prescription drug admissions showed a noticeable increase in recent years (Figure 4.8.2).

Figure 4.8.2. Trends in primary substance use among patients from SPA 8



LEVEL OF CARE

SPA 8 patients were most commonly admitted to opioid treatment programs (30.6%), followed by outpatient programs (22.4%) and residential service programs (17.7%) (Table 4.8.5).

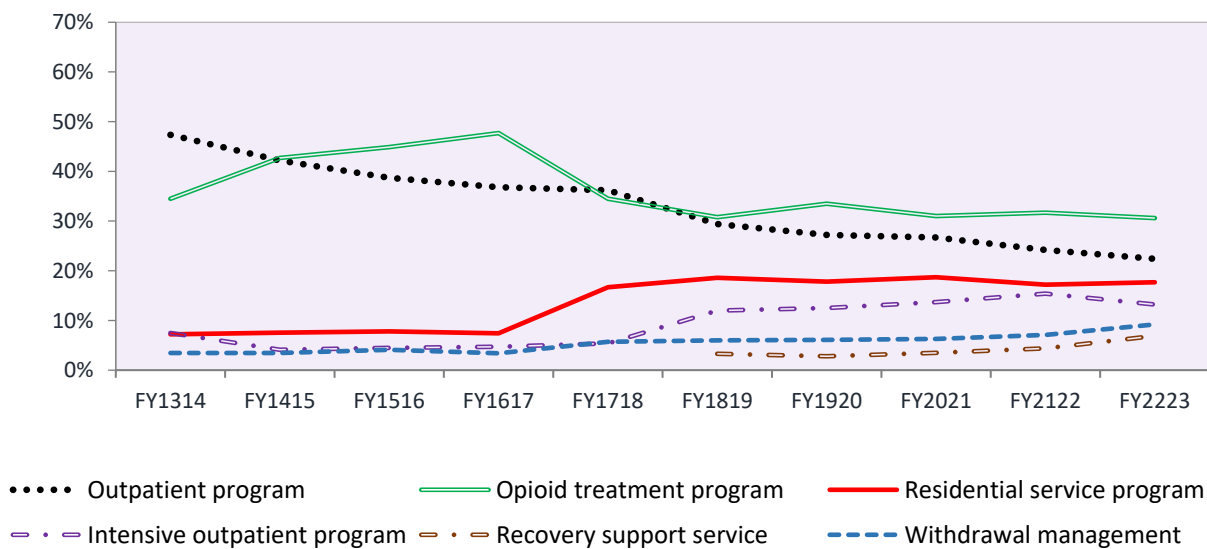
Table 4.8.5. Level of care among patients from SPA 8, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	452	9.2
ASAM WM 1	-	-
ASAM WM 2	6	0.1
ASAM WM 3.2	299	6.1
ASAM WM 3.7/4.0	146	3.0
Residential Service	869	17.7
ASAM 3.1	454	9.3
ASAM 3.3	-	-
ASAM 3.5	413	8.4
Intensive Outpatient (ASAM 2.1)	646	13.2
Outpatient	1,100	22.4
Opioid Treatment Program (ASAM OTP)	1,500	30.6
Recovery Support Service	336	6.9

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
 N ≤ 5 not reported to protect confidentiality.

Outpatient programs and opioid treatment programs have alternated as the most common levels of care up until FY1819, when opioid treatment programs remained in the lead up to FY2223. As for the outpatient programs, there has been a consistent decline in admissions over time. Admissions to the residential programs increased in FY1718 and have remained relatively stable thereafter (Figure 4.8.3).

Figure 4.8.3. Trends in level of care among patients from SPA 8



Summary Table 3. Summary statistics of patients from different SPAs, FY2223

Categories	SPA 1		SPA 2		SPA 3		SPA 4		SPA 5		SPA 6		SPA 7		SPA 8	
	Antelope Valley		San Fernando		San Gabriel		Metro		West		South		East		South Bay	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
ADMITTED																
Patients	1,927	5.7	5,095	15.2	4,506	13.4	3,255	9.7	733	2.2	3,424	10.2	3,034	9.0	3,725	11.1
Admissions	2,617	4.8	6,999	12.8	5,716	10.4	4,079	7.5	965	1.8	4,356	8.0	3,879	7.1	4,948	9.0
DISCHARGED																
Patients	1,158	4.9	3,264	13.8	2,846	12.1	2,089	8.8	442	1.9	2,281	9.7	1,928	8.2	2,432	10.3
Admissions	1,533	4.0	4,535	11.9	3,637	9.5	2,610	6.8	589	1.5	2,891	7.6	2,460	6.5	3,149	8.3
DISCHARGE STATUS																
Positive compliance	641	43.4	2,324	54.3	1,644	48.8	1,177	48.6	318	56.8	1,273	48.4	1,106	49.5	1,474	50.2
Completed treatment	489	33.1	1,652	38.6	1,192	35.4	893	36.8	233	41.6	916	34.8	782	35.0	1,038	35.4
Left – satisfactory progress	152	10.3	672	15.7	452	13.4	284	11.7	85	15.2	357	13.6	324	14.5	436	14.9
Negative compliance	808	54.7	1,856	43.4	1,607	47.7	1,139	47.0	228	40.7	1,274	48.5	1,076	48.2	1,394	47.5
Other (Death/incarceration/other)	29	2.0	97	2.3	119	3.5	108	4.5	14	2.5	82	3.1	51	2.3	67	2.3
GENDER IDENTITY+																
Male	1,064	56.4	3,388	67.0	2,847	63.6	2,041	63.2	469	64.0	2,042	60.2	1,902	63.2	2,211	59.9
Female	821	43.5	1,655	32.7	1,625	36.3	1,160	35.9	261	35.6	1,341	39.5	1,088	36.1	1,473	39.9
Transgender male	-	-	-	-	-	-	10	0.3	-	-	-	-	-	-	-	-
Transgender female	-	-	9	0.2	-	-	16	0.5	-	-	-	-	11	0.4	-	-
Non-conforming or refuse to state	-	-	-	-	-	-	-	-	-	-	-	-	6	0.2	-	-
RACE+																
White	598	31.9	2,154	43.7	986	22.4	743	23.7	363	51.5	319	9.5	414	13.9	994	27.7
Latinx	844	45.1	2,317	47.0	2,936	66.9	1,868	59.7	220	31.2	1,901	56.9	2,349	79.1	1,778	49.5
Black/African American	398	21.2	329	6.7	324	7.4	407	13.0	91	12.9	1,050	31.4	144	4.9	666	18.6
Asian	11	0.6	70	1.4	93	2.1	70	2.2	15	2.1	37	1.1	35	1.2	86	2.4
Pacific Islander	-	-	-	-	-	-	-	-	-	-	-	-	-	-	12	0.3
American Indian/Alaska Native	10	0.5	25	0.5	29	0.7	14	0.4	6	0.9	19	0.6	13	0.4	24	0.7
Other	11	0.6	30	0.6	15	0.3	25	0.8	8	1.1	11	0.3	12	0.4	29	0.8
AGE+																
17 and under	79	4.3	258	5.3	268	6.3	141	4.6	13	1.9	223	6.8	227	7.8	121	3.4
18-25	176	9.5	439	9.0	404	9.5	258	8.4	53	7.6	357	10.8	292	10.0	303	8.6
26-34	585	31.5	1,549	31.8	1,279	29.9	925	30.0	185	26.4	1,065	32.3	846	29.1	1,131	32.2
35-44	500	26.9	1,265	25.9	1,040	24.3	761	24.7	176	25.1	785	23.8	672	23.1	825	23.5
45-54	212	11.42	643	13.2	530	12.4	417	13.5	117	16.7	387	11.8	351	12.1	473	13.5
55-64	212	11.4	534	11.0	531	12.4	399	13.0	102	14.6	295	9.0	356	12.2	445	12.7
65+	92	5.0	188	3.9	220	5.1	180	5.8	54	7.7	181	5.5	168	5.8	218	6.2

(Table Cont'd) Categories	SPA 1 Antelope Valley		SPA 2 San Fernando		SPA 3 San Gabriel		SPA 4 Metro		SPA 5 West		SPA 6 South		SPA 7 East		SPA 8 South Bay	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
	SEXUAL ORIENTATION+															
Heterosexual	1,702	93.6	4,383	91.9	3,980	92.7	2,620	87.3	624	89.3	3,049	92.2	2,675	92.5	3,326	92.8
Gay, lesbian, or bisexual	83	4.6	258	5.4	235	5.5	289	9.6	47	6.7	177	5.4	142	4.9	176	4.9
Something else	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Unsure/questioning	8	0.4	41	0.9	28	0.7	20	0.7	8	1.1	24	0.7	9	0.3	19	0.5
Prefer not to state	25	1.4	85	1.8	48	1.1	68	2.3	20	2.9	57	1.7	65	2.2	64	1.8
EDUCATION+																
Middle school or below	64	3.5	158	3.3	114	2.7	175	5.8	14	2.0	146	4.5	123	4.3	110	3.2
Some high school	373	20.4	954	19.9	1,048	25.0	790	26.2	100	14.5	1,023	31.6	791	27.7	768	22.3
High school completed	1,115	61.1	2,378	50.0	2,156	51.5	1,290	42.8	306	44.2	1,504	46.5	1,429	50.1	1,716	49.9
Some college or beyond	273	15.0	1,296	27.1	868	20.7	756	25.1	272	39.3	561	17.3	512	17.9	848	24.6
EMPLOYMENT																
Employed	417	16.5	1,717	25.7	1,320	24.4	822	21.3	234	25.2	804	19.2	932	25.1	1,032	20.1
Unemployed (seeking)	1,033	41.0	2,877	43.0	1,922	35.5	1,348	35.0	318	34.3	1,234	29.4	1,195	32.2	1,403	30.0
Unemployed (not seeking)	767	30.4	1,357	20.3	1,220	22.6	958	24.9	200	21.6	1,094	26.1	869	23.4	1,243	26.6
Not in labor force	303	12.0	737	11.0	946	17.5	727	18.9	175	18.9	1,060	25.3	714	19.2	998	21.3
LANGUAGE AT HOME																
English	2,138	88.0	5,096	80.7	4,732	93.4	3,099	87.2	849	95.9	3,438	89.8	3,041	90.6	4,138	93.8
Other Language	292	12.0	1,220	19.3	333	6.6	453	12.8	36	4.1	390	10.2	314	9.4	272	6.2
MENTAL HEALTH ISSUES																
Yes	1,707	67.6	3,206	47.8	1,854	34.4	1,615	42.4	457	49.7	1,977	47.4	1,265	34.5	2,068	44.7
No	819	32.4	3,496	52.2	3,543	65.6	2,192	57.6	463	50.3	2,193	52.6	2,403	65.5	2,562	55.3
PHYSICAL HEALTH ISSUES																
Yes	180	7.2	622	9.5	608	11.3	441	11.6	141	15.3	465	11.2	446	12.2	647	14.2
No	2,303	92.8	5,936	90.5	4,772	88.7	3,356	88.4	780	84.7	3,688	88.8	3,199	87.8	3,925	85.8
DISABILITY																
Disabled at admission	320	13.0	1,043	16.4	541	10.9	516	14.6	123	14.2	731	19.3	400	11.9	625	14.5
CRIMINAL JUSTICE																
Criminal justice involved	347	13.7	917	13.7	1,200	22.2	639	16.8	79	8.6	872	20.9	799	21.7	750	16.2



SPA SUMMARY

BOba	SPA 1		SPA 2		SPA 3		SPA 4		SPA 5		SPA 6		SPA 7		SPA 8	
	Antelope Valley		San Fernando		San Gabriel		Metro		West		South		East		South Bay	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
PRIMARY SUBSTANCE USE																
Heroin	422	16.9	1,733	26.5	1,242	23.0	832	21.8	218	23.7	539	13.0	859	23.4	946	20.7
Methamphetamine	558	22.4	1,110	17.0	1,358	25.2	1,002	26.3	100	10.9	1,366	32.9	904	24.6	952	20.8
Marijuana	305	12.2	477	7.3	555	10.3	326	8.5	51	5.5	679	16.3	485	13.2	417	9.1
Alcohol	532	21.4	1,834	28.1	1,267	23.5	1,040	27.2	289	31.4	920	22.1	844	23.0	1,174	25.7
Prescription drug	570	22.9	1,244	19.1	863	16.0	480	12.6	234	25.4	399	9.6	483	13.2	871	19.0
Cocaine	80	3.2	108	1.7	86	1.6	103	2.7	22	2.4	203	4.9	73	2.0	175	3.8
Other drugs	23	0.9	24	0.4	28	0.5	34	0.9	6	0.7	49	1.2	25	0.7	42	0.9
LEVEL OF CARE																
ASAM 0.5-Early Intervention	6	0.2	14	0.2	17	0.3	11	0.3	-	-	17	0.4	23	0.6	10	0.2
ASAM 1-Outpatient	808	31.2	1,585	22.8	1,670	29.3	1,144	28.1	173	17.9	1,520	35.1	1,098	28.4	1,090	22.2
ASAM 2.1-Intensive Outpatient	222	8.6	937	13.5	410	7.2	436	10.7	124	12.9	553	12.8	322	8.3	646	13.2
ASAM OTP-Opioid Treatment Program	758	29.3	2,126	30.6	1,712	30.0	1,083	26.6	339	35.2	796	18.4	1,188	30.7	1,500	30.6
ASAM 3.1-Residential Service	213	8.2	440	6.3	523	9.2	350	8.6	89	9.2	452	10.4	434	11.2	454	9.3
ASAM 3.3-Residential Service	-	-	-	-	17	0.3	-	-	-	-	7	0.2	-	-	-	-
ASAM 3.5-Residential Service	165	6.4	418	6.0	538	9.4	504	12.4	60	6.2	405	9.4	274	7.1	413	8.4
ASAM WM 1-Withdrawal Management	10	0.4	-	-	-	-	-	-	-	-	-	-	-	-	-	-
ASAM WM 2-Withdrawal Management	-	-	20	0.3	-	-	-	-	-	-	-	-	-	-	6	0.1-
ASAM WM 3.2-Withdrawal Management	135	5.2	659	9.5	398	7.0	220	5.4	95	9.9	146	3.4	184	4.8	299	6.1
ASAM WM 3.7/4.0-Withdrawal Management	74	2.9	301	4.3	137	2.4	87	2.1	33	3.4	51	1.2	58	1.5	146	3.0
Recovery Support Service	191	7.4	446	6.4	282	4.9	234	5.7	48	5.0	377	8.7	277	7.2	336	6.9

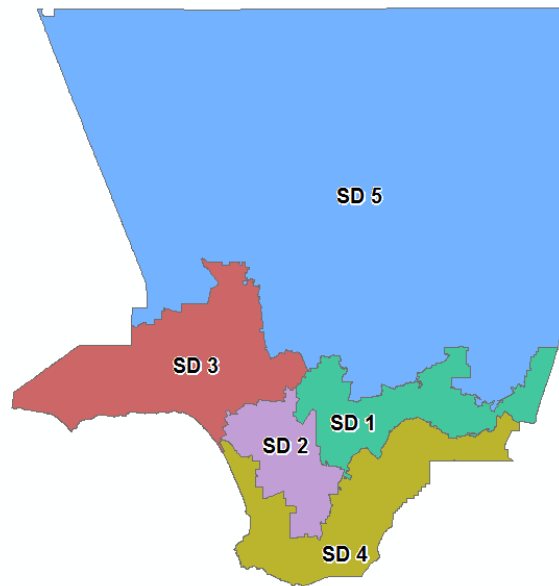
Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding. N ≤ 5 not reported to protect confidentiality.

† Based on unique patient numbers and percentages.



Chapter 5

Patient Characteristics by Supervisorial District²



Chapter 5 provides descriptive information for patients from each of the five **supervisorial districts (SDs)**. For each SD, numbers of patients, admissions and discharges are reported, along with trends in admissions over the past ten years. Patient discharge status, demographic characteristics, primary substance use, and levels of care by SD are also described.

² Patient SD information is based on self-reported home address zip code. Numbers for each SD may be lower than reality due to missing zip code information.

Patients from Supervisorial District 1 (SD 1)

TREATMENT ADMISSIONS AND DISCHARGES

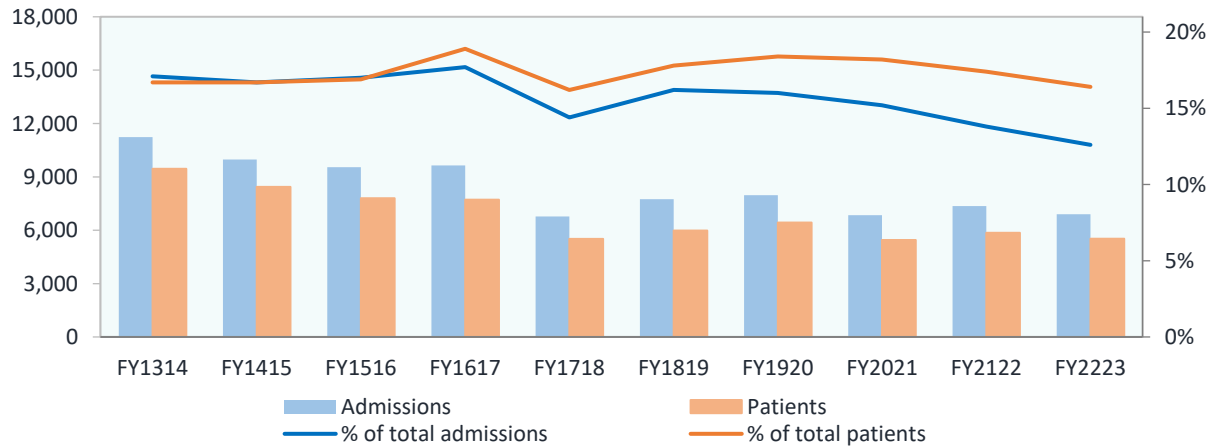
There were 6,897 treatment admissions for 5,528 patients residing in SD 1, accounting for 12.6% of all admissions and 16.4% of all patients (Table 5.1.1).

Table 5.1.1. Treatment admissions and discharges among patients from SD 1, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	6,897	12.6	5,528	16.4
Discharged	4,225	11.1	3,376	14.3

The number of admissions and patients decreased overall during the past ten fiscal years. However, the proportion of all admissions remained stable until FY1617, fluctuated between FY1718 and FY1920, then decreased slightly over the last three fiscal years (Figure 5.1.1).

Figure 5.1.1. Trends in admissions and patients from SD 1



Among the SD 1 patient discharges, 46.8% had positive compliance, with 34.3% completing treatment and 12.5% leaving the program with satisfactory progress (Table 5.1.2).

Table 5.1.2. Discharge status of patients from SD 1, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	1,813	46.8
Completed treatment	1,329	34.3
Left – satisfactory progress	484	12.5
Negative compliance	1,924	49.7
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	138	3.6

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

The majority of patients residing in SD 1 were male (60.8%), Latinx (72.0%), ages 26-34 (28.1%), and unemployed (56.9%) (Table 5.1.3). Among SD 1 admissions, 33.7% reported mental health issues, and 20.4% were involved in the criminal justice system.

Table 5.1.3. Characteristics of patients from SD 1, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	3,342	60.8
	Female	2,131	38.8
	Transgender male	7	0.1
	Transgender female	12	0.2
	Non-conforming or refuse to state	-	-
RACE	Latinx	3,840	72.0
	White	902	16.9
	Black/African American	454	8.5
	Asian	96	1.8
	Pacific Islander	-	-
	American Indian /Alaska Native	22	0.4
	Other	18	0.3
AGE	17 and under	325	6.3
	18-25	476	9.2
	26-34	1,455	28.1
	35-44	1,198	23.1
	45-54	671	12.9
	55-64	738	14.2
	65+	323	6.2
SEXUAL ORIENTATION	Heterosexual	4,718	91.8
	Gay, lesbian, or bisexual	312	6.1
	Something else	-	-
	Unsure/questioning	28	0.5
	Prefer not to state	80	1.6
EDUCATION	Middle school or below	229	4.5
	Some high school	1,408	27.9
	High school completed	2,440	48.3
	Some college or beyond	971	19.2
EMPLOYMENT	Employed	1,502	23.3
	Unemployed (seeking)	2,107	32.7
	Unemployed (not seeking)	1,563	24.2
	Not in labor force	1,279	19.8
LANGUAGE AT HOME	English	5,431	91.1
	Other Language	528	8.9
MENTAL HEALTH ISSUES	Yes	2,153	33.7
	No	4,234	66.3
PHYSICAL HEALTH ISSUES	Yes	698	11.0
	No	5,659	89.0
DISABILITY	Disabled at admission	683	11.7
CRIMINAL JUSTICE	Criminal justice involved	1,302	20.4

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.

PRIMARY SUBSTANCE USE AT ADMISSION

The most commonly reported primary substance use was heroin (25.6%), followed by methamphetamine (25.5%) and alcohol (22.2%) (Table 5.1.4).

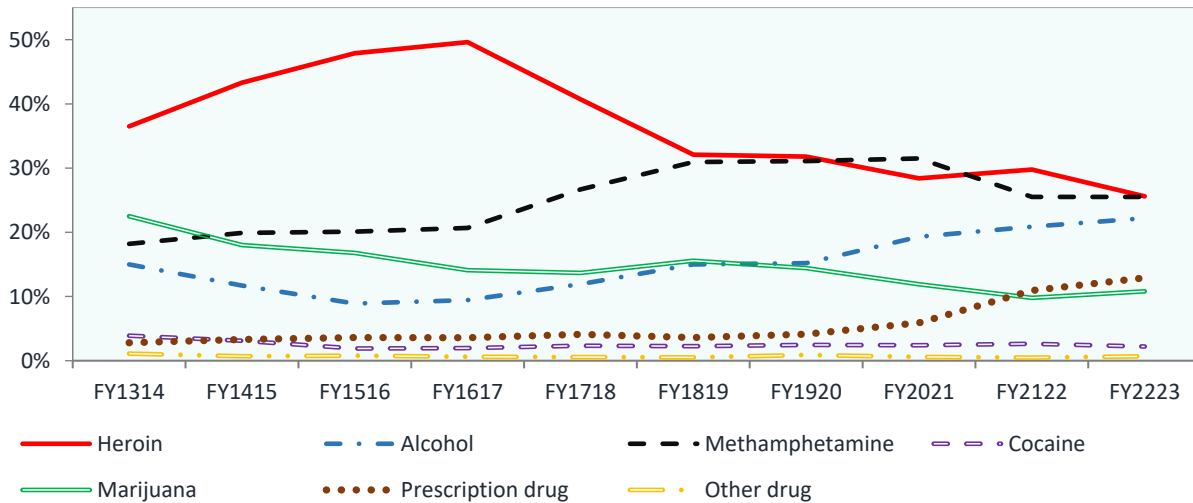
Table 5.1.4. Primary substance use among patients from SD 1, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Heroin	1,639	25.6
Methamphetamine	1,636	25.5
Alcohol	1,424	22.2
Prescription drug	823	12.9
Marijuana	692	10.8
Cocaine	144	2.2
Other drugs	46	0.7

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

The proportion of patients reporting heroin as the primary substance use increased from FY1314 to FY1617, then decreased to 25.6% in FY2223. Methamphetamine’s use gradually increased from 18.2% in FY1314 to 25.5% in FY2223. The proportion reporting marijuana as the primary substance gradually decreased from FY1314 to FY2223 (Figure 5.1.2).

Figure 5.1.2. Trends in primary substance use among patients from SD 1



LEVEL OF CARE

Patients residing in SD 1 were most commonly admitted to opioid treatment programs (32.2%), followed by outpatient programs (31.0%) and residential service programs (17.3%) (Table 5.1.5).

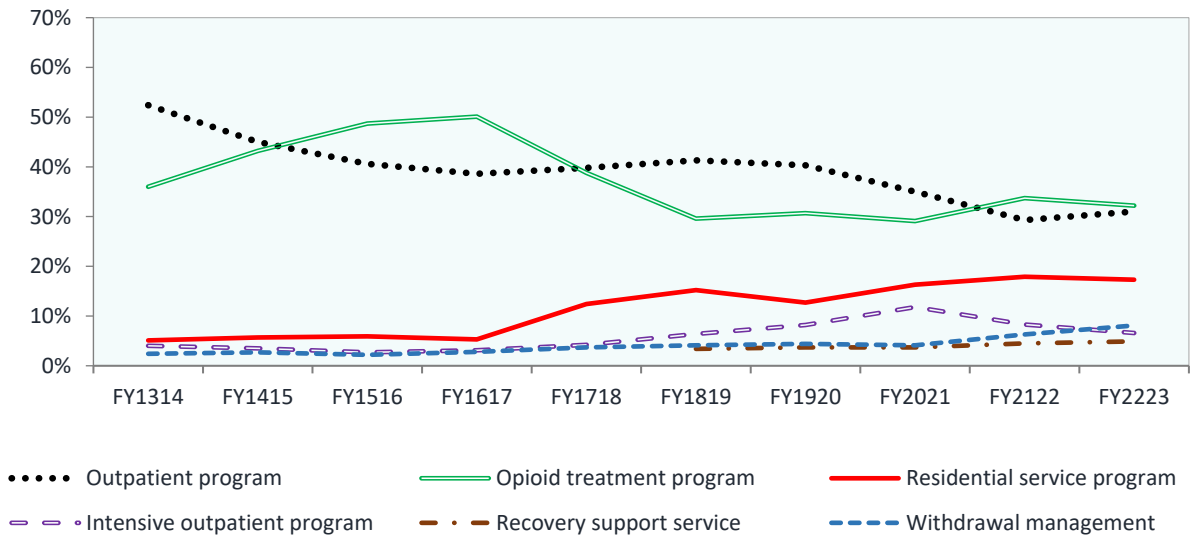
Table 5.1.5. Level of care among patients from SD 1, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	556	8.1
ASAM WM 2	-	-
ASAM WM 3.2	407	5.9
ASAM WM 3.7/4.0	146	2.1
Residential Service	1,192	17.3
ASAM 3.1	487	7.1
ASAM 3.3	20	0.3
ASAM 3.5	685	9.9
Intensive Outpatient (ASAM 2.1)	453	6.6
Outpatient	2,136	31.0
Opioid Treatment Program (ASAM OTP)	2,215	32.2
Recovery Support Service	334	4.9

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding. N ≤ 5 not reported to protect confidentiality.

Over the past decade, the outpatient and opioid treatment programs have taken turns as the most common levels of care. In FY2223, the majority of admissions (32.2%) were to opioid treatment programs. The proportion of admissions to the outpatient program has consistently decreased, while there has been a steady increase in the proportion of admissions to residential service programs since FY1617 (Figure 5.1.3).

Figure 5.1.3. Trends in level of care among patients from SD 1



Patients from Supervisorial District 2 (SD 2)

TREATMENT ADMISSIONS AND DISCHARGES

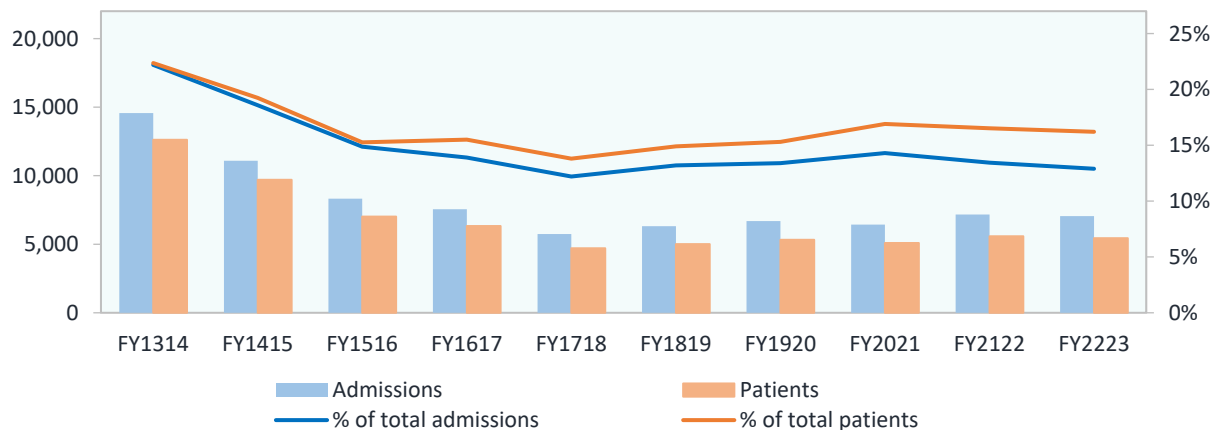
There were 7,051 treatment admissions for 5,436 patients residing in SD 2, accounting for 12.9% of all admissions and 16.2% of all patients (Table 5.2.1).

Table 5.2.1. Treatment admissions and discharges among patients from SD 2, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	7,051	12.9	5,436	16.2
Discharged	4,658	12.2	3,619	15.3

The number and proportion of admissions decreased from 14,573 (22.2%) in FY1314 to 7,051 (12.9%) in FY2223 (Figure 5.2.1).

Figure 5.2.1. Trends in admissions and patients from SD 2



Among the SD 2 patient discharges, 49.7% had positive compliance, with 35.1% completing treatment and 14.6% leaving the program with satisfactory progress (Table 5.2.2).

Table 5.2.2. Discharge status of patients from SD 2, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	2,119	49.7
Completed treatment	1,498	35.1
Left – satisfactory progress	621	14.6
Negative compliance	1,996	46.8
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	149	3.5

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

As shown in Table 5.2.3, the majority of patients from SD 2 were male (60.4%), Latinx (53.9%), ages 26-34 (32.2%), and unemployed (55.4%). Among SD 2 admissions, 46.5% reported having mental health issues, and 18.4% reported having a disability.

Table 5.2.3. Characteristics of patients from SD 2, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	3,259	60.4
	Female	2,113	39.2
	Transgender male	8	0.1
	Transgender female	11	0.2
	Non-conforming or refuse to state	-	-
RACE	Latinx	2,839	53.9
	White	756	14.4
	Black/African American	1,507	28.6
	Asian	89	1.7
	Pacific Islander	11	0.2
	American Indian/Alaska Native	28	0.5
	Other	33	0.6
AGE	17 and under	307	5.9
	18-25	520	10.0
	26-34	1,669	32.2
	35-44	1,240	23.9
	45-54	617	11.9
	55-64	549	10.6
	65+	289	5.6
SEXUAL ORIENTATION	Heterosexual	4,843	92.0
	Gay, lesbian, or bisexual	286	5.4
	Something else	-	-
	Unsure/questioning	36	0.7
	Prefer not to state	99	1.9
EDUCATION	Middle school or below	224	4.4
	Some high school	1,490	29.3
	High school completed	2,352	46.2
	Some college or beyond	1,021	20.1
EMPLOYMENT	Employed	1,381	20.5
	Unemployed (seeking)	2,010	29.8
	Unemployed (not seeking)	1,721	25.5
	Not in labor force	1,625	24.1
LANGUAGE AT HOME	English	5,673	90.9
	Other Language	570	9.1
MENTAL HEALTH ISSUES	Yes	3,109	46.5
	No	3,578	53.5
PHYSICAL HEALTH ISSUES	Yes	791	11.9
	No	5,872	88.1
DISABILITY	Disabled at admission	1,121	18.4
CRIMINAL JUSTICE	Criminal justice involved	1,321	19.7

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.

PRIMARY SUBSTANCE USE AT ADMISSION

The most common primary substance use was methamphetamine (28.8%), followed by alcohol (24.2%) and heroin (14.7%) (Table 5.2.4).

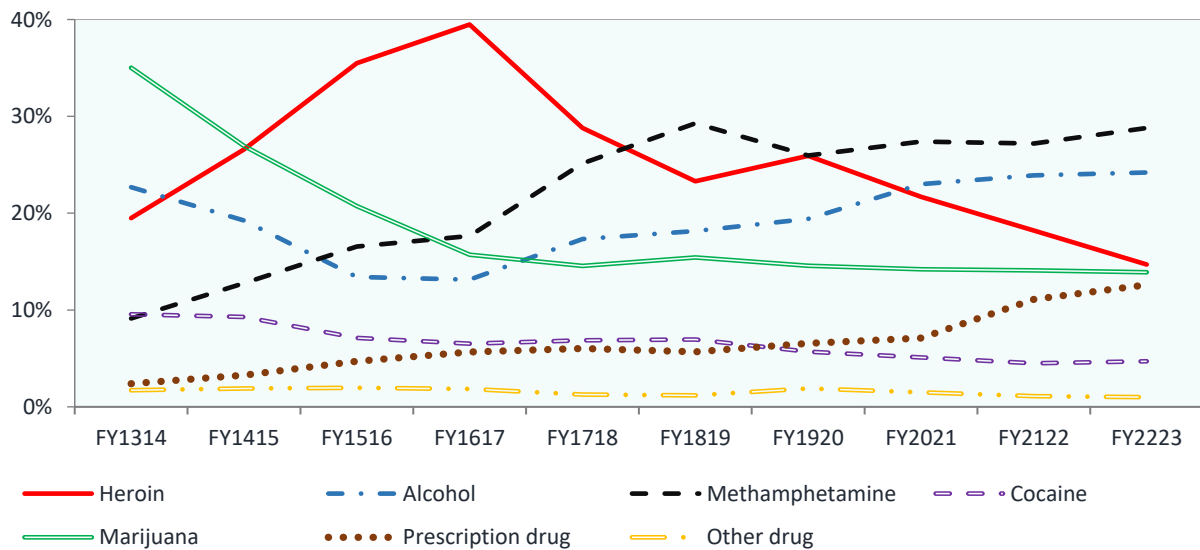
Table 5.2.4. Primary substance use among patients from SD 2, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Methamphetamine	1,920	28.8
Alcohol	1,611	24.2
Heroin	981	14.7
Marijuana	929	13.9
Prescription drug	842	12.6
Cocaine	315	4.7
Other drugs	69	1.0

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

In SD 2, there has been a shift in the leading primary drug admissions over the years, with marijuana, heroin, and methamphetamine taking turns. The proportion of primary marijuana admissions showed a decreasing trend, while primary methamphetamine admissions exhibited an increasing trend. The proportion of primary heroin admissions increased until FY1617 and then decreased to 14.7% in FY2223 (Figure 5.2.2).

Figure 5.2.2. Trends in primary substance use among patients from SD 2



LEVEL OF CARE

The most common level of care that patients residing in SD 2 were admitted to included outpatient programs (31.2%), followed by opioid treatment programs (21.5%) and residential services (20.6%) (Table 5.2.5).

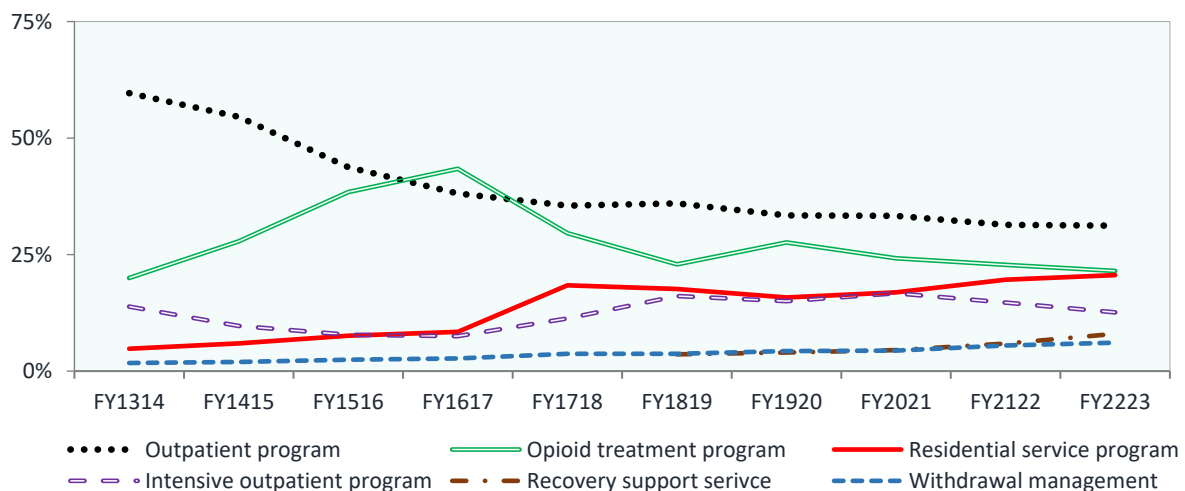
Table 5.2.5. Level of care among patients from SD 2, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	430	6.1
ASAM WM 2	-	-
ASAM WM 3.2	293	4.2
ASAM WM 3.7/4.0	132	1.9
Residential Service	1,447	20.6
ASAM 3.1	678	9.7
ASAM 3.3	10	0.1
ASAM 3.5	759	10.8
Intensive Outpatient (ASAM 2.1)	885	12.6
Outpatient	2,191	31.2
Opioid Treatment Program (ASAM OTP)	1,506	21.5
Recovery Support Service	561	8.0

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

In the past ten fiscal years, the outpatient program has consistently been the most common level of care, except for FY1617, when the proportion of admissions to opioid treatment programs surpassed that of outpatient programs. The proportion of admissions to residential service programs has gradually increased over time with a notable increase in FY1718 (Figure 5.2.3).

Figure 5.2.3. Trends in level of care among patients from SD 2



Patients from Supervisorial District 3 (SD 3)

TREATMENT ADMISSIONS AND DISCHARGES

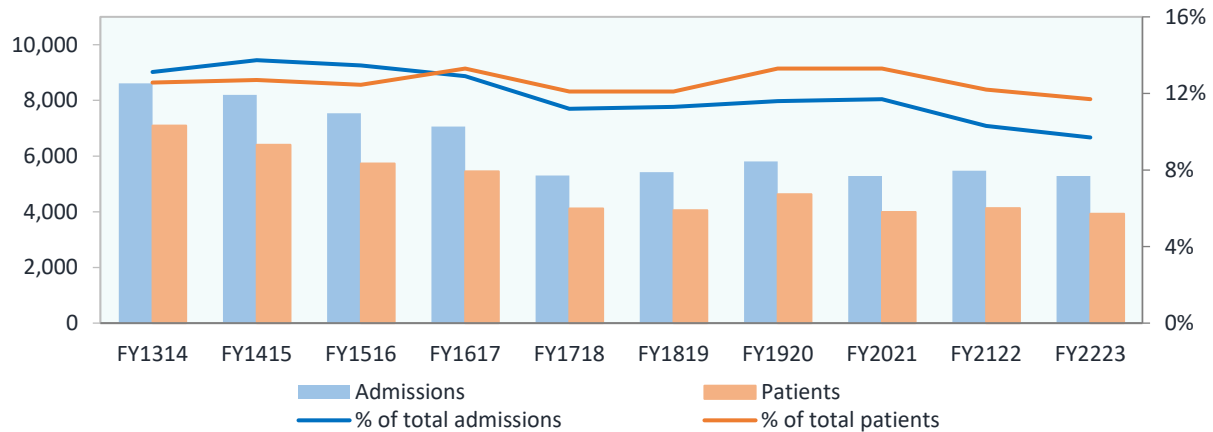
There were 5,284 treatment admissions for 3,929 patients residing in SD 3, accounting for 9.7% of all admissions and 11.7% of all patients (Table 5.3.1).

Table 5.3.1. Treatment admissions and discharges among patients from SD 3, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	5,284	9.7	3,929	11.7
Discharged	3,302	8.7	2,464	10.4

The number of admissions decreased from FY1314 to FY1718 and stabilized through FY2223, and the proportion of all admissions generally decreased over the entire time period (Figure 5.3.1).

Figure 5.3.1. Trends in admissions and patients from SD 3



Among the SD 3 patient discharges, 54.2% had positive compliance, with 38.2% completing treatment and 16.0% leaving the program with satisfactory progress (Table 5.3.2).

Table 5.3.1. Discharge status of patients from SD 3, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive Compliance	1,697	54.2
Completed treatment	1,197	38.2
Left – satisfactory progress	500	16.0
Negative Compliance	1,355	43.3
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	78	2.5

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

The majority of patients residing in SD 3 were male (64.4%), Latinx (47.4%), ages 26-34 (30.5%), and unemployed (61.2%). Among SD 3 admissions, 50.9% reported having mental health issues (Table 5.3.3).

Table 5.3.2. Characteristics of patients from SD 3, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	2,517	64.4
	Female	1,370	35.1
	Transgender male	9	0.2
	Transgender female	9	0.2
	Non-conforming or refuse to state	-	-
RACE	Latinx	1,813	47.4
	White	1,605	42.0
	Black/African American	297	7.8
	Asian	58	1.5
	Pacific Islander	-	-
	American Indian /Alaska Native	20	0.5
	Other	28	0.7
AGE	17 and under	207	5.5
	18-25	330	8.7
	26-34	1,155	30.5
	35-44	979	25.9
	45-54	489	12.9
	55-64	450	11.9
	65+	172	4.5
SEXUAL ORIENTATION	Heterosexual	3,286	89.9
	Gay, lesbian, or bisexual	252	6.9
	Something else	-	-
	Unsure/questioning	30	0.8
	Prefer not to state	84	2.3
EDUCATION	Middle school or below	137	3.7
	Some high school	746	20.1
	High school completed	1,712	46.2
	Some college or beyond	1,113	30.0
EMPLOYMENT	Employed	1,343	26.5
	Unemployed (seeking)	1,987	39.3
	Unemployed (not seeking)	1,110	21.9
	Not in labor force	622	12.3
LANGUAGE AT HOME	English	3,912	81.2
	Other Language	908	18.8
MENTAL HEALTH ISSUES	Yes	2,587	50.9
	No	2,494	49.1
PHYSICAL HEALTH ISSUES	Yes	515	10.4
	No	4,445	89.6
DISABILITY	Disabled at admission	845	17.5
CRIMINAL JUSTICE	Criminal justice involved	590	11.6

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.

PRIMARY SUBSTANCE USE AT ADMISSION

The most commonly reported primary substance use was alcohol (30.1%), followed by heroin (23.8%) and prescription drug (18.9%) (Table 5.3.4).

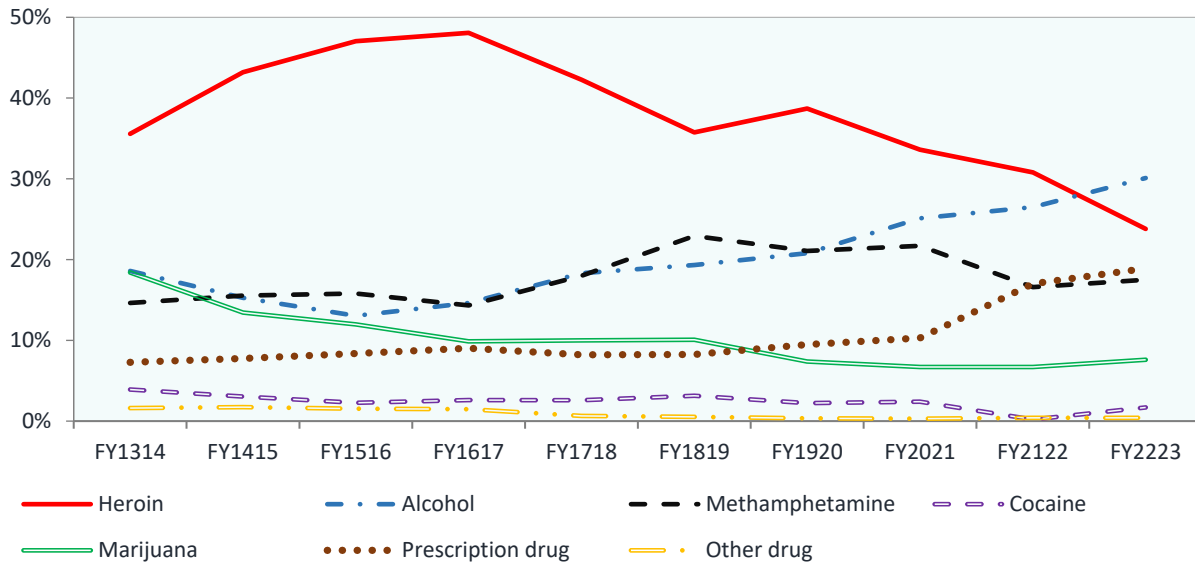
Table 5.3.3. Primary substance use among patients from SD 3, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Alcohol	1,486	30.1
Heroin	1,176	23.8
Prescription drug	935	18.9
Methamphetamine	863	17.5
Marijuana	376	7.6
Cocaine	82	1.7
Other drugs	22	0.4

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

From FY1314 to FY2122, heroin was the most common primary substance use, until it was surpassed by alcohol in FY2223. Overall, the proportion of primary heroin admissions increased steadily from FY1314 to FY1617, then decreased through FY2223. The proportion of primary alcohol admissions has been increasing since FY1516. The proportion reporting marijuana as the primary substance use has been declining since FY1314, while the reporting of methamphetamine has increased gradually from FY1314 to FY1819 and then decreased slightly through FY2223 (Figure 5.3.2).

Figure 5.3.2. Trends in primary substance use among patients from SD 3



LEVEL OF CARE

The most common level of care that patients residing in SD 3 were admitted to was opioid treatment programs (29.9%), followed by outpatient programs (25.3%) and intensive outpatient programs (13.9%) (Table 5.3.5).

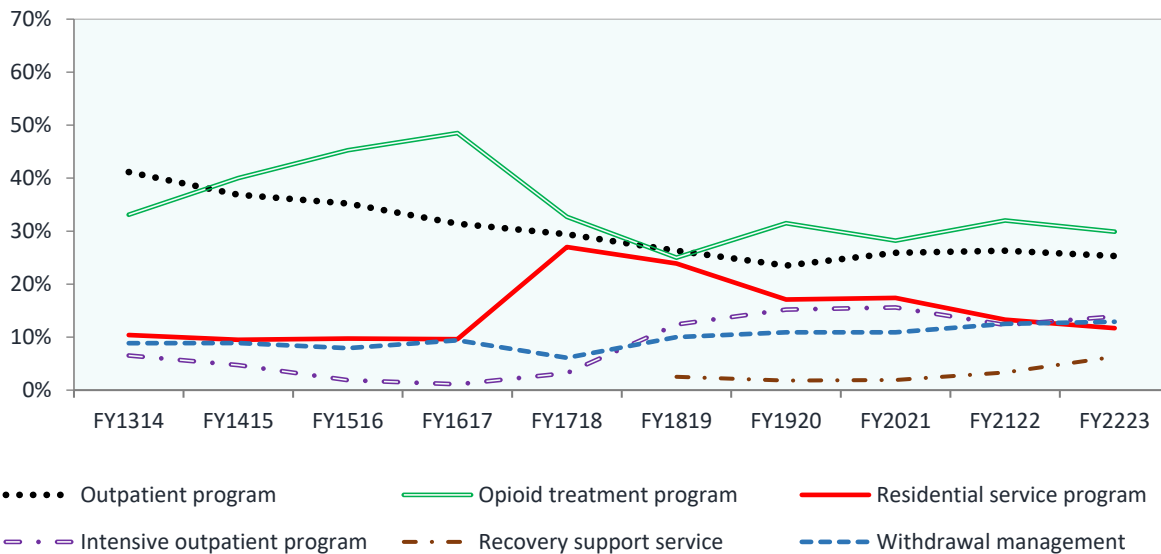
Table 5.3.4. Level of care among patients from SD 3, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	675	12.9
ASAM WM 2	15	0.3
ASAM WM 3.2	432	8.2
ASAM WM 3.7/4.0	228	4.3
Residential Service	615	11.7
ASAM 3.1	295	5.6
ASAM 3.3	-	-
ASAM 3.5	320	6.1
Intensive Outpatient (ASAM 2.1)	732	13.9
Outpatient	1,327	25.3
Opioid Treatment Program (ASAM OTP)	1,568	29.9
Recovery Support Service	332	6.3

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
 N ≤ 5 not reported to protect confidentiality.

The proportion of admissions to opioid treatment programs exhibited an upward trend from FY1314 to FY1617, followed by a decrease until FY1819, and has been fluctuating through FY2223. Opioid treatment programs have consistently remained as the most common level of care from FY1415 to FY2223, with the exception of FY1819. On the other hand, admissions to outpatient programs showed a gradual decline over the past decade (Figure 5.3.3).

Figure 5.3.3. Trends in level of care among patients from SD 3



Patients from Supervisorial District 4 (SD 4)

TREATMENT ADMISSIONS AND DISCHARGES

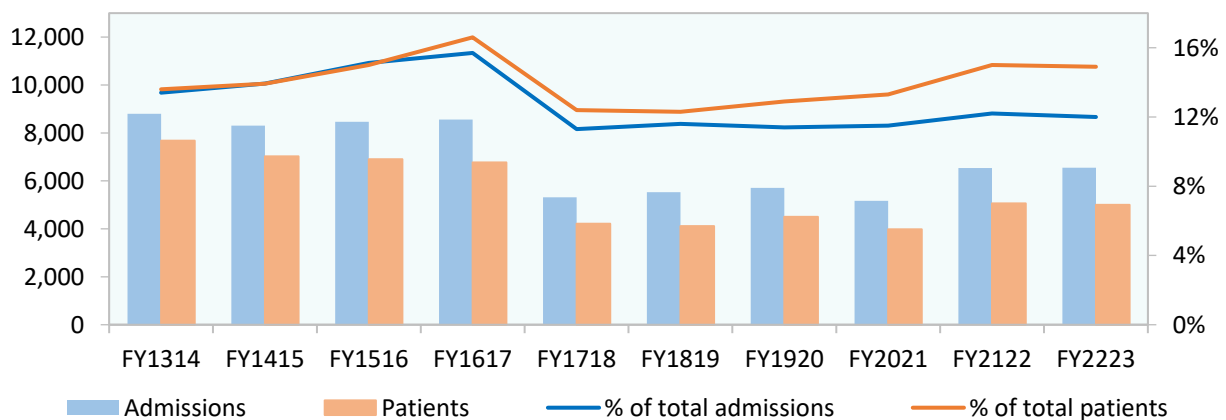
There were 6,550 treatment admissions for 5,002 patients residing in SD 4, accounting for 12.0% of all admissions and 14.9% of all patients (Table 5.4.1).

Table 5.4.1. Treatment admissions and discharges among patients from SD 4, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	6,550	12.0	5,002	14.9
Discharged	4,200	11.0	3,262	13.8

The proportion of admissions and patients remained increased slightly from FY1314 to FY1617 then decreased in FY1718 before stabilizing through FY2223 (Figure 5.4.1).

Figure 5.4.1. Trends in admissions and patients from SD 4



Among the SD 4 patient discharges, 49.3% of admissions had positive compliance, with 35.3% completing treatment and 13.9% leaving the program with satisfactory progress (Table 5.4.2).

Table 5.4.2. Discharge status of patients from SD 4, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	1,919	49.3
Completed treatment	1,376	35.3
Left – satisfactory progress	543	13.9
Negative compliance		
(Left – unsatisfactory progress)	1,902	48.9
Other (Death/incarceration/other)	72	1.8

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

The majority of patients residing in SD 4 were male (62.2%), Latinx (63.4%), ages 26-34 (31.4%), and unemployed (56.5%) (Table 5.4.3). Among SD 4 admissions, 41.2% reported mental health issues, and 13.7% reported physical health issues.

Table 5.4.3. Characteristics of patients from SD 4, FY2223

CHARACTERISTIC		PATIENTS	%
GENDER IDENTITY	Male	3,078	62.2
	Female	1,852	37.4
	Transgender male	-	-
	Transgender female	10	0.2
	Non-conforming or refuse to state	7	0.1
RACE	Latinx	3,086	63.4
	White	1,146	23.5
	Black/African American	467	9.6
	Asian	96	2.0
	Pacific Islander	10	0.2
	American Indian /Alaska Native	33	0.7
	Other	30	0.6
AGE	17 and under	267	5.6
	18-25	449	9.4
	26-34	1,498	31.4
	35-44	1,133	23.7
	45-54	618	12.9
	55-64	545	11.4
	65+	266	5.6
SEXUAL ORIENTATION	Heterosexual	4,408	92.4
	Gay, lesbian, or bisexual	244	5.1
	Something else	-	-
	Unsure/questioning	24	0.5
	Prefer not to state	94	2.0
EDUCATION	Middle school or below	163	3.5
	Some high school	1,128	24.0
	High school completed	2,357	50.2
	Some college or beyond	1,044	22.3
EMPLOYMENT	Employed	1,463	23.4
	Unemployed (seeking)	1,939	31.0
	Unemployed (not seeking)	1,595	25.5
	Not in labor force	1,254	20.1
LANGUAGE AT HOME	English	5,300	92.1
	Other Language	454	7.9
MENTAL HEALTH ISSUES	Yes	2,552	41.2
	No	3,644	58.8
PHYSICAL HEALTH ISSUES	Yes	840	13.7
	No	5,292	86.3
DISABILITY	Disabled at admission	754	13.1
CRIMINAL JUSTICE	Criminal justice involved	1,160	18.7

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
N ≤ 5 not reported to protect confidentiality.

PRIMARY SUBSTANCE USE AT ADMISSION

The most common primary substance use in SD 4 was alcohol (24.6%), followed by methamphetamine (23.5%) and heroin (21.5%) (Table 5.4.4).

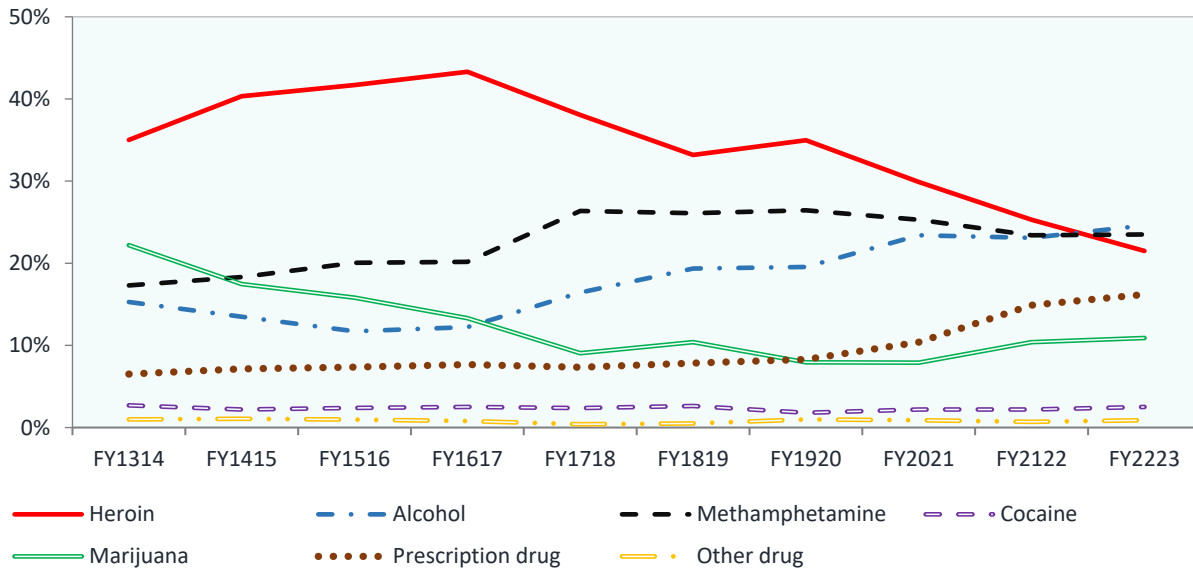
Table 5.4.4. Primary substance use among patients from SD 4, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Alcohol	1,516	24.6
Methamphetamine	1,445	23.5
Heroin	1,320	21.5
Prescription drug	995	16.2
Marijuana	668	10.9
Cocaine	154	2.5
Other drugs	53	0.9

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

Heroin was the primary substance use with the highest proportion of admissions for nine of the past ten fiscal years, but was surpassed by both alcohol and methamphetamine in FY2223. Alcohol admissions displayed an overall increasing trend since FY1516, while methamphetamine admissions have remained stable since FY1718 (Figure 5.4.2).

Figure 5.4.2. Trends in primary substance use among patients from SD 4



LEVEL OF CARE

The most common level of care that patients residing in SD 4 was opioid treatment programs (29.6%), followed by outpatient programs (25.2%) and residential service programs (18.9%) (Table 5.4.5).

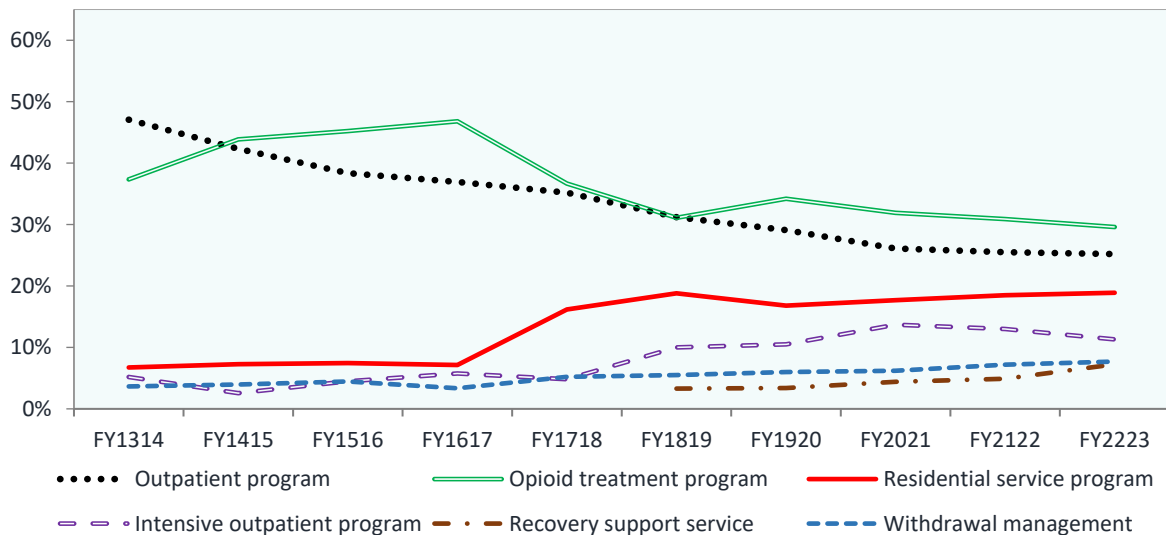
Table 5.4.5. Level of care among patients from SD 4, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	501	7.7
ASAM WM 1	-	-
ASAM WM 2	11	0.2
ASAM WM 3.2	358	5.5
ASAM WM 3.7/4.0	131	2.0
Residential Service	1,229	18.9
ASAM 3.1	752	11.6
ASAM 3.3	-	-
ASAM 3.5	474	7.3
Intensive Outpatient (ASAM 2.1)	737	11.3
Outpatient	1,638	25.2
Opioid Treatment Program (ASAM OTP)	1,920	29.6
Recovery Support Service	471	7.3

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
 N ≤ 5 not reported to protect confidentiality.

Opioid treatment programs had been the most common level of care in eight of the last ten fiscal years, only being surpassed by outpatient programs in FY1314 and FY1819. There has been a consistent decrease in the proportion of admissions to outpatient programs over time. Conversely, there has been a notable increase in the proportion of admissions to residential service programs since FY1617 (Figure 5.4.3).

Figure 5.4.3. Trends in level of care among patients from SD 4



Patients from Supervisorial District 5 (SD 5)

TREATMENT ADMISSIONS AND DISCHARGES

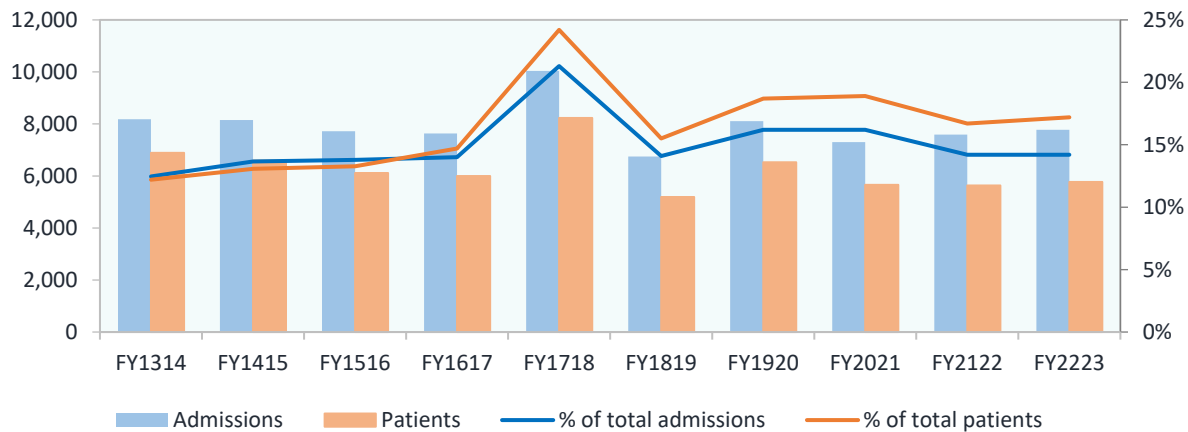
There were 7,777 treatment admissions for 5,768 patients residing in SD 5, accounting for 14.2% of all admissions and 17.2% of all patients (Table 5.5.1).

Table 5.5.1. Treatment admissions and discharges among patients from SD 5, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	7,777	14.2	5,768	17.2
Discharged	5,019	13.2	3,701	15.7

The proportion of admissions and patients remained relatively stable from FY1314 to FY1617, with a noticeable spike in FY1718. Thereafter, the proportion stabilized again from FY1819 to FY2223 (Figure 5.5.1).

Figure 5.5.1. Trends in admissions and patients from SD 5



Among the SD 5 patient discharges, 50.8% had positive compliance, with 37.8% completing treatment and 12.9% leaving the program with satisfactory progress (Table 5.5.2).

Table 5.5.2. Discharge status of patients from SD 5, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	2,409	50.8
Completed treatment	1,795	37.8
Left – satisfactory progress	614	12.9
Negative compliance		
(Left – unsatisfactory progress)	2,205	46.5
Other (Death/incarceration/other)	130	2.7

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PATIENT CHARACTERISTICS

The majority of patients residing in SD 5 were male (65.9%), Latinx (46.2%), ages 26-34 (32.0%), and unemployed (67.0%). Among SD 5 admissions, half (50.2%) reported having mental health issues (Table 5.5.3).

Table 5.5.3. Characteristics of patients from SD 5, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	3,757	65.9
	Female	1,933	33.9
	Transgender male	-	-
	Transgender female	-	-
	Non-conforming or refuse to state	-	-
RACE	Latinx	2,586	46.2
	White	2,191	39.2
	Black/African American	669	12.0
	Asian	78	1.4
	Pacific Islander	-	-
	American Indian /Alaska Native	34	0.6
	Other	34	0.6
AGE	17 and under	222	4.0
	18-25	501	9.1
	26-34	1,770	32.0
	35-44	1,474	26.6
	45-54	721	13.0
	55-64	594	10.7
	65+	253	4.6
SEXUAL ORIENTATION	Heterosexual	5,062	92.1
	Gay, lesbian, or bisexual	323	5.9
	Something else	-	-
	Unsure/questioning	38	0.7
	Prefer not to state	73	1.3
EDUCATION	Middle school or below	151	2.8
	Some high school	1,052	19.3
	High school completed	3,023	55.4
	Some college or beyond	1,233	22.6
EMPLOYMENT	Employed	1,589	21.3
	Unemployed (seeking)	3,287	44.0
	Unemployed (not seeking)	1,719	23.0
	Not in labor force	880	11.8
LANGUAGE AT HOME	English	6,215	88.0
	Other Language	850	12.0
MENTAL HEALTH ISSUES	Yes	3,748	50.2
	No	3,721	49.8
PHYSICAL HEALTH ISSUES	Yes	706	9.5
	No	6,691	90.5
DISABILITY	Disabled at admission	896	12.7
CRIMINAL JUSTICE	Criminal justice involved	1,230	16.5

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.

PRIMARY SUBSTANCE USE AT ADMISSION

The most commonly reported primary substance use was alcohol (25.2%), followed by heroin (22.6%) and methamphetamine (20.9%) (Table 5.5.4).

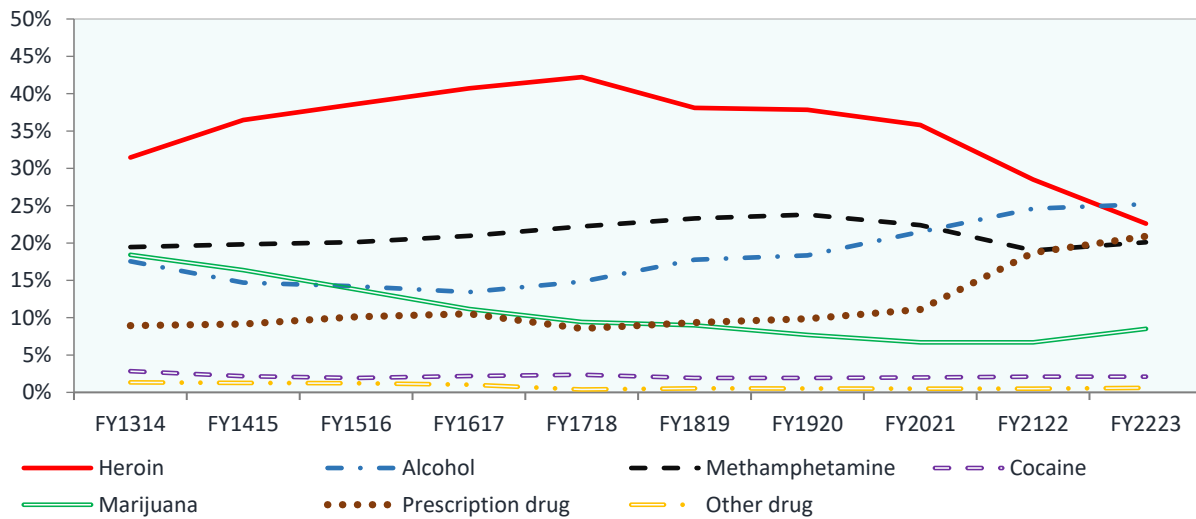
Table 5.5.4. Primary substance use among patients from SD 5, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Alcohol	1,863	25.2
Heroin	1,675	22.6
Prescription drug	1,549	20.9
Methamphetamine	1,486	20.1
Marijuana	630	8.5
Cocaine	155	2.1
Other drugs	41	0.6

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

The proportion of primary heroin admissions exhibited a significant increase from FY1314 to FY1718 but declined thereafter until FY2223. Heroin had consistently ranked as the leading primary substance use in nine of the past ten fiscal years, only being surpassed by alcohol in FY2223. The proportion of primary alcohol admissions has been on a steady increase since FY1617. Conversely, the proportion of primary marijuana admissions decreased steadily from FY1314 to FY2223. (Figure 5.5.2).

Figure 5.5.2. Trends in primary substance use among patients from SD 5



LEVEL OF CARE

The most common level of care that patients residing in SD 5 were admitted to was opioid treatment programs (29.7%), followed by outpatient programs (24.5%) and residential service programs (16.6%) (Table 5.5.5).

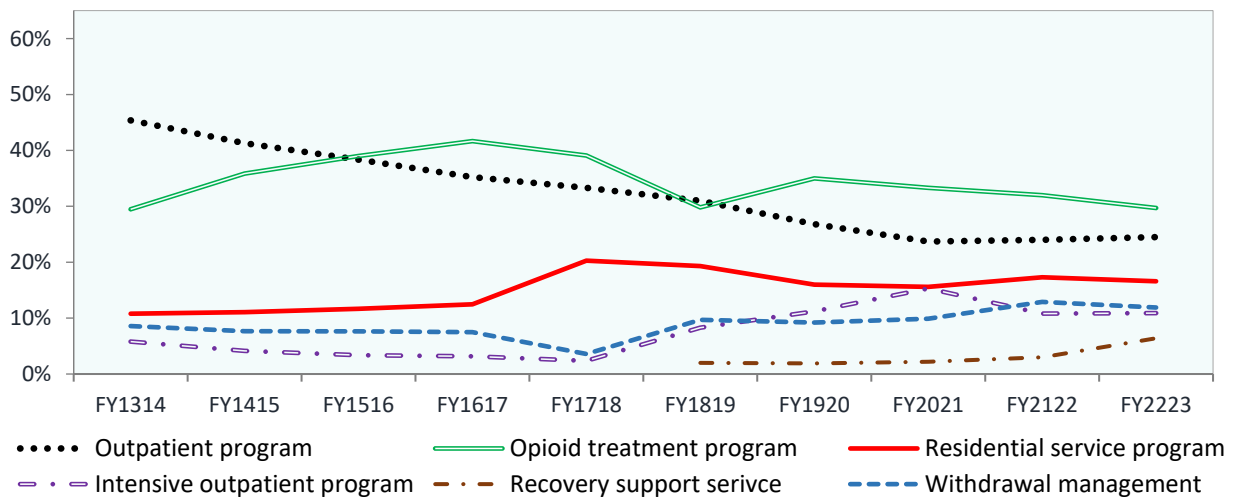
Table 5.5.5. Level of care for among patients from SD 5, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	919	11.9
ASAM WM 1	10	0.1
ASAM WM 2	13	0.2
ASAM WM 3.2	646	8.4
ASAM WM 3.7/4.0	250	3.2
Residential Service	1,285	16.6
ASAM 3.1	743	9.6
ASAM 3.3	-	-
ASAM 3.5	539	7.0
Intensive Outpatient (ASAM 2.1)	843	10.9
Outpatient	1,895	24.5
Opioid Treatment Program (ASAM OTP)	2,293	29.7
Recovery Support Service	493	6.4

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
N ≤ 5 not reported to protect confidentiality.

Over the past decade, the outpatient program and opioid treatment program have alternated as the predominant levels of care, with opioid treatment program being the most common level of care for the past four fiscal years. Overall, there has been a persistent decrease in the proportion of admissions to outpatient programs. Since FY1718, there has been an overall increase in the proportion of admissions to intensive outpatient and withdrawal programs (Figure 5.5.3).

Figure 5.5.3. Trends in level of care among patients from SD 5



Summary Table 4. Summary statistics of patients from different SDs, FY2223

Categories	SD 1		SD 2		SD 3		SD 4		SD 5	
	N	%	N	%	N	%	N	%	N	%
ADMITTED										
Patients	5,528	16.4	5,436	16.2	3,929	11.7	5,002	14.9	5,768	17.2
Admissions	6,897	12.6	7,051	12.9	5,284	9.7	6,550	12.0	7,777	14.2
DISCHARGED										
Patients	3,376	14.3	3,619	15.3	2,464	10.4	3,262	13.8	3,701	15.7
Admissions	4,225	11.1	4,658	12.2	3,302	8.7	4,200	11.0	5,019	13.2
DISCHARGE STATUS										
Positive compliance	1,813	46.8	2,119	49.7	1,697	54.2	1,919	49.3	2,409	50.8
Completed treatment	1,329	34.3	1,498	35.1	1,197	38.2	1,376	35.3	1,795	37.8
Left – satisfactory progress	484	12.5	621	14.6	500	16.0	543	13.9	614	12.9
Negative compliance	1,924	49.7	1,996	46.8	1,355	43.3	1,902	48.9	2,205	46.5
Other (Death/incarceration/other)	138	3.6	149	3.5	78	2.5	72	1.8	130	2.7
GENDER IDENTITY†										
Male	3,342	60.8	3,259	60.4	2,517	64.4	3,078	62.2	3,757	65.9
Female	2,131	38.8	2,113	39.2	1,370	35.1	1,852	37.4	1,933	33.9
Transgender male	7	0.1	8	0.1	9	0.2	-	-	-	-
Transgender female	12	0.2	11	0.2	9	0.2	10	0.2	-	-
Non-conforming or refuse to state	-	-	-	-	-	-	7	0.1	-	-
RACE‡										
Latinx	3,840	72.0	2,839	53.9	1,813	47.4	3,086	63.4	2,586	46.2
White	902	16.9	756	14.4	1,605	42.0	1,146	23.5	2,191	39.2
Black/African American	454	8.5	1,507	28.6	297	7.8	467	9.6	669	12.0
Asian	96	1.8	89	1.7	58	1.5	96	2.0	78	1.4
Pacific Islander	-	-	11	0.2	-	-	10	0.2	-	-
American Indian/Alaska Native	22	0.4	28	0.5	20	0.5	33	0.7	34	0.6
Other	18	0.3	33	0.6	28	0.7	30	0.6	34	0.6
AGE†										
17 and under	325	6.3	307	5.9	207	5.5	267	5.6	222	4.0
18-25	476	9.2	520	10.0	330	8.7	449	9.4	501	9.1
26-34	1,455	28.1	1,669	32.2	1,155	30.5	1,498	31.4	1,770	32.0
35-44	1,198	23.1	1,240	23.9	979	25.9	1,133	23.7	1,474	26.6
45-54	671	12.9	617	11.9	489	12.9	618	12.9	721	13.0
55-64	738	14.2	549	10.6	450	11.9	545	11.4	594	10.7
65+	323	6.2	289	5.6	172	4.5	266	5.6	253	4.6



(Table Cont'd) Categories	SD 1		SD 2		SD 3		SD 4		SD 5	
	N	%	N	%	N	%	N	%	N	%
SEXUAL ORIENTATION+										
Heterosexual	4,718	91.8	4,843	92.0	3,286	89.9	4,408	92.4	5,062	92.1
Gay, lesbian, or bisexual	312	6.1	286	5.4	252	6.9	244	5.1	323	5.9
Something else	-	-	-	-	-	-	-	-	-	-
Unsure/questioning	28	0.5	36	0.7	30	0.8	24	0.5	38	0.7
Prefer not to state	80	1.6	99	1.9	84	2.3	94	2.0	73	1.3
EDUCATION+										
Middle school or below	229	4.5	224	4.4	137	3.7	163	3.5	151	2.8
Some high school	1,408	27.9	1,490	29.3	746	20.1	1,128	24.0	1,052	19.3
High school completed	2,440	48.3	2,352	46.2	1,712	46.2	2,357	50.2	3,023	55.4
Some college or beyond	971	19.2	1,021	20.1	1,113	30.0	1,044	22.3	1,233	22.6
EMPLOYMENT										
Employed	1,502	23.3	1,381	20.5	1,343	26.5	1,463	23.4	1,589	21.3
Unemployed (seeking)	2,107	32.7	2,010	29.8	1,987	39.3	1,939	31.0	3,287	44.0
Unemployed (not seeking)	1,563	24.2	1,721	25.5	1,110	21.9	1,595	25.5	1,719	23.0
Not in labor force	1,279	19.8	1,625	24.1	622	12.3	1,254	20.1	880	11.8
LANGUAGE AT HOME										
English	5,431	91.1	5,673	90.9	3,912	81.2	5,300	92.1	6,215	88.0
Other Language	528	8.9	570	9.1	908	18.8	454	7.9	850	12.0
MENTAL HEALTH ISSUES										
Yes	2,153	33.7	3,109	46.5	2,587	50.9	2,552	41.2	3,748	50.2
No	4,234	66.3	3,578	53.5	2,494	49.1	3,644	58.8	3,721	49.8
PHYSICAL HEALTH ISSUES										
Yes	698	11.0	791	11.9	515	10.4	840	13.7	706	9.5
No	5,659	89.0	5,872	88.1	4,445	89.6	5,292	86.3	6,691	90.5
DISABILITY										
Disabled at admission	683	11.7	1,121	18.4	845	17.5	754	13.1	896	12.7
CRIMINAL JUSTICE										
Criminal justice involved	1,302	20.4	1,321	19.7	590	11.6	1,160	18.7	1,230	16.5

(Table Cont'd) Categories	SD 1		SD 2		SD 3		SD 4		SD 5	
	N	%	N	%	N	%	N	%	N	%
PRIMARY SUBSTANCE USE										
Heroin	1,639	25.6	981	14.7	1,176	23.8	1,320	21.5	1,675	22.6
Methamphetamine	1,636	25.5	1,920	28.8	863	17.5	1,445	23.5	1,486	20.1
Marijuana	692	10.8	929	13.9	376	7.6	668	10.9	630	8.5
Alcohol	1,424	22.2	1,611	24.2	1,486	30.1	1,516	24.6	1,863	25.2
Prescription Drug	823	12.9	842	12.6	935	18.9	995	16.2	1,549	20.9
Cocaine	144	2.2	315	4.7	82	1.7	154	2.5	155	2.1
Other drugs	46	0.7	69	1.0	22	0.4	53	0.9	41	0.6
LEVEL OF CARE										
ASAM 0.5-Early Intervention	16	0.2	29	0.4	6	0.1	25	0.4	23	0.3
ASAM 1-Outpatient	2,120	30.8	2,162	30.8	1,321	25.2	1,613	24.8	1,872	24.2
ASAM 2.1-Intensive Outpatient	453	6.6	885	12.6	732	13.9	737	11.3	843	10.9
ASAM OTP-Opioid Treatment Program	2,215	32.2	1,506	21.5	1,568	29.9	1,920	29.6	2,293	29.7
ASAM 3.1-Residential Service	487	7.1	678	9.7	295	5.6	752	11.6	743	9.6
ASAM 3.3-Residential Service	20	0.3	10	0.1	-	-	-	-	-	-
ASAM 3.5-Residential Service	685	9.9	759	10.8	320	6.1	474	7.3	539	7.0
ASAM WM 1-Withdrawal Management	-	-	-	-	-	-	-	-	10	0.1
ASAM WM 2-Withdrawal Management	-	-	-	-	15	0.3	11	0.2	13	0.2
ASAM WM 3.2-Withdrawal Management	407	5.9	293	4.2	432	8.2	358	5.5	646	8.4
ASAM WM 3.7/4.0-Withdrawal Management	146	2.1	132	1.9	228	4.3	131	2.0	250	3.2
Recovery Support Service	334	4.9	561	8.0	332	6.3	471	7.3	493	6.4

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding. N ≤ 5 not reported to protect confidentiality.

† Based on unique patient numbers and percentages.



Chapter 6

Patient Characteristics by Special Population



Chapter 6 provides the number of admissions and discharges, discharge status, patient characteristics, primary substance use, levels of care at admission, and 10-year trends for youth (12-17 yrs), transitional age youth (16-25 yrs), older adults (65+ yrs), criminal justice involved, patients experiencing homelessness, patients with disabilities, lesbian/gay/bisexual/transgender/questioning patients, women of reproductive age (15-49 years), veterans, and patients enrolled in My Health LA.

Youth

TREATMENT ADMISSIONS AND DISCHARGES

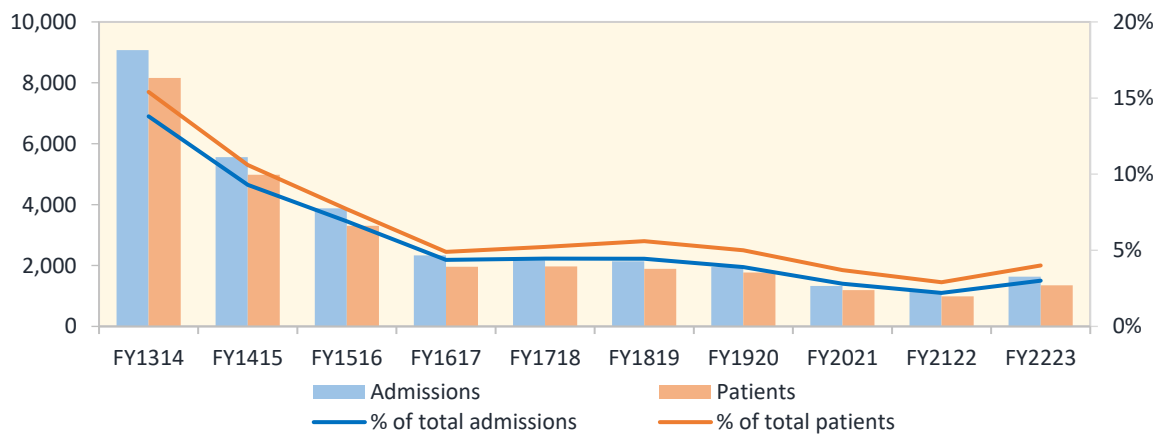
There were 1,350 (4.0%) youth patients, who accounted for 1,635 (3.0%) treatment admissions (Table 6.1.1).

Table 6.1.1. Treatment admissions and discharges among youth patients, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	1,635	3.0	1,350	4.0
Discharged	1,004	2.6	860	3.6

The number and proportion of youth patients and admissions decreased remarkably in the past ten years. The number and proportion of patients decreased from 8,162 (15.4%) in FY1314 to 1,350 (4.0%) in FY2223 (Figure 6.1.1).

Figure 6.1.1. Trends in youth admissions and patients



PATIENT CHARACTERISTICS

The majority of youth were male (61.0%), Latinx (79.6%), and age of 17 (29.5%). Among youth admissions, 36.9% had mental health issues, and 17.1% were involved in the criminal justice system (Table 6.1.2).

Table 6.1.2. Characteristics of youth patients, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	802	61.0
	Female	503	38.3
	Transgender male	8	0.6
	Transgender female	-	-
	Non-conforming or refuse to state	-	-
RACE	Latinx	1,063	79.6
	White	89	6.7
	Black/African American	160	12.0
	Asian	16	1.2
	Pacific Islander	-	-
	American Indian /Alaska Native	-	-
	Other	-	-
AGE	12	22	1.6
	13	95	7.0
	14	204	15.1
	15	291	21.6
	16	340	25.2
	17	398	29.5
SEXUAL ORIENTATION	Heterosexual	1,168	87.0
	Gay, lesbian, or bisexual	77	5.7
	Something else	-	-
	Unsure/questioning	36	2.7
	Prefer not to state	62	4.6
HOMELESS	Homeless at admission	-	-
MENTAL HEALTH ISSUES	Yes	598	36.9
	No	1,023	63.1
PHYSICAL HEALTH ISSUES	Yes	98	6.5
	No	1,421	93.5
DISABILITY	Yes	187	12.2
	No	1,344	87.8
CRIMINAL JUSTICE	Yes	278	17.1
	No	1,343	82.9

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
 N ≤ 5 not reported to protect confidentiality.



PRIMARY SUBSTANCE USE AT ADMISSION

The most commonly reported primary substance use by far was marijuana (84.4%), followed by prescription drug (6.6%) and alcohol (5.0%) (Table 6.1.3).

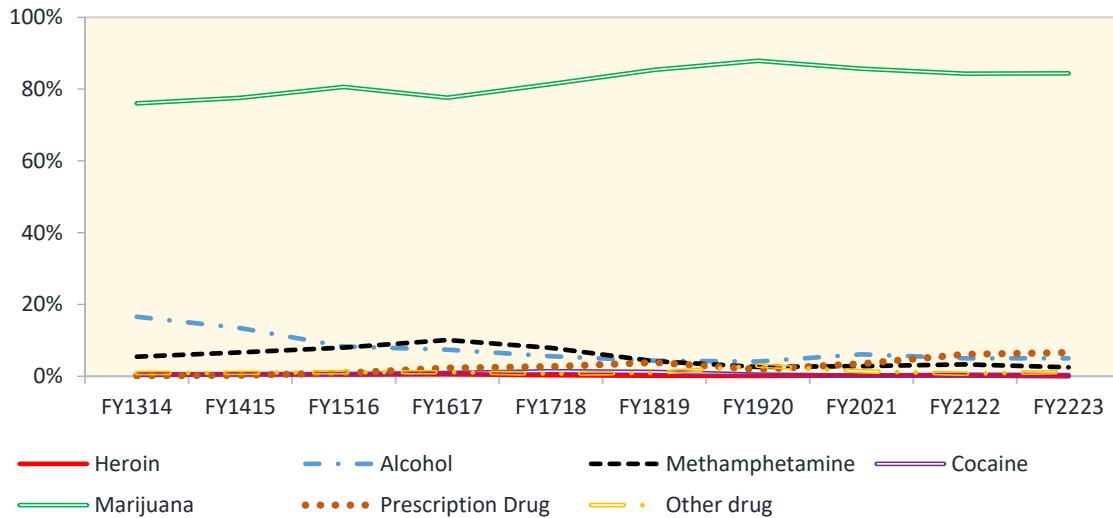
Table 6.1.3. Primary substance use among youth patients, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Marijuana	1,286	84.4
Prescription drug	100	6.6
Alcohol	76	5.0
Methamphetamine	38	2.5
Cocaine	-	-
Heroin	-	-
Other drugs	19	12

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
 N ≤ 5 not reported to protect confidentiality.

Marijuana has consistently been the primary substance of use among youth over the past decade, with its proportion of admissions steadily increasing from 76.0% in FY1314 to 84.4% in FY2223. On the other hand, primary alcohol admissions have declined from 16.6% in FY1314 to 5.0% in FY2223. Primary methamphetamine admissions experienced an initial increase from 5.4% in FY1314 to 10.1% in FY1617, but subsequently decreased to 2.5% in FY2223 (Figure 6.1.2).

Figure 6.1.2. Trends in primary substance use among youth patients



LEVEL OF CARE

The majority of youth were admitted to outpatient programs (76.4%), followed by intensive outpatient programs (11.2%) and residential service programs (7.0%) (Table 6.1.4).

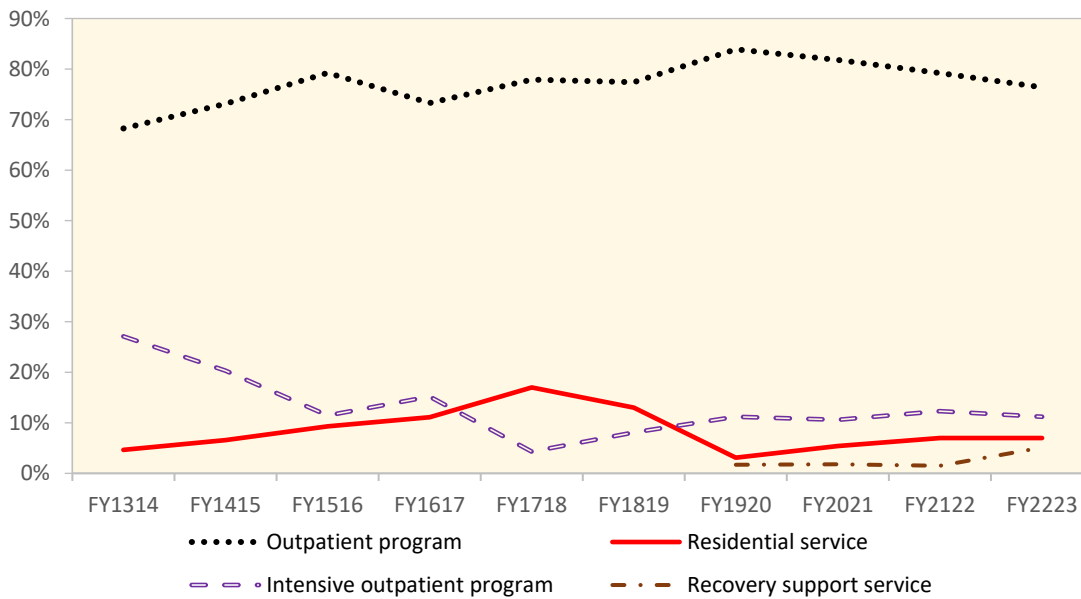
Table 6.1.4. Level of care among youth patients, FY2223

LEVEL OF CARE	ADMISSIONS	%
Residential Service	114	7.0
ASAM 3.5	113	7.0
Outpatient	1,237	76.4
Intensive Outpatient (ASAM 2.1)	182	11.2
Recovery Support Service	83	5.1

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

Outpatient programs have consistently been the primary level of care for youth over the past decade. The proportion of youth admissions to intensive outpatient programs initially decreased from FY1314 to FY1718, but experienced an increase to 11.2% in FY2223. In contrast, the proportion of admissions to residential service programs exhibited an increase from FY1314 to FY1718 but subsequently decreased to 7.0% in FY2223 (Figure 6.1.3).

Figure 6.1.3. Trends in level of care among youth patients



DISCHARGE STATUS AND TREATMENT OUTCOMES AT DISCHARGE

Of the discharges among youth with discharge status, 38.8% had positive compliance, with 24.6% completing treatment and 14.2% leaving with satisfactory progress (Table 6.1.5).

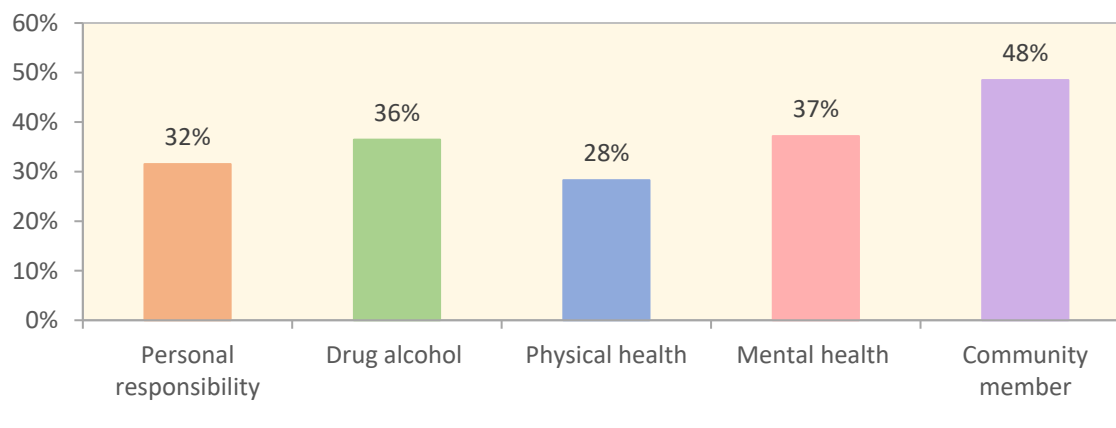
Table 6.1.5. Discharge status of youth patients, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	385	38.8
Completed treatment	244	24.6
Left – satisfactory progress	141	14.2
Negative compliance	572	57.7
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	35	3.5

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

According to the Treatment Effectiveness Assessment (TEA) used to gauge recovery progress per the patients’ perspective at the time of discharge, 32% of youth reported they were better in taking care of personal responsibilities (e.g., paying bills, following through on personal or professional commitments), 36% reported they were better with handling drug and alcohol use (e.g., the frequency and amount of use, money spent on drugs, amount of drug craving, being sick, etc.), 28% reported they were better in physical health (e.g., eating and sleeping properly, exercising, taking care of health or dental problems), 37% reported they were better in mental health (e.g., feeling good about themselves), and 48% reported they were a better community member (e.g., obeying laws, meeting your responsibilities to society, positive impact on others) compared to at admission (Figure 6.1.4).

Figure 6.1.4. Treatment Effectiveness Assessment (TEA) for youth, FY2223



Transitional Age Youth (TAY)

TREATMENT ADMISSIONS AND DISCHARGES

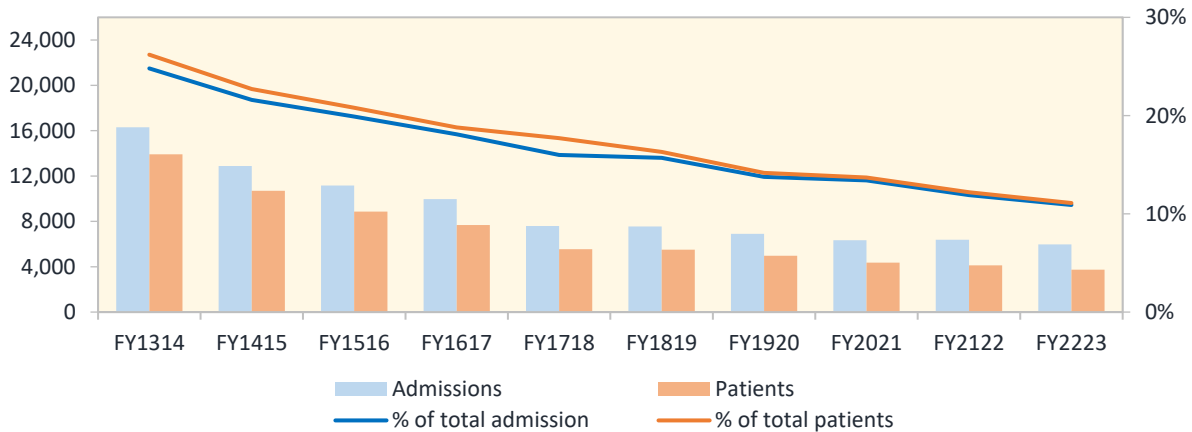
There were 3,745 (11.1%) TAY patients aged 16 to 25, who accounted for 5,964 (10.9%) treatment admissions (Table 6.2.1).

Table 6.2.1. Treatment admissions and discharges among TAY patients, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	5,964	10.9	3,745	11.1
Discharged	4,559	12.0	2,952	12.5

The number and proportion of admissions and patients showed a consistent downward trend over the past ten fiscal years. The number and proportion of TAY admissions decreased from 16,298 (24.8%) in FY1314 to 5,964 (10.9%) in FY2223 (Figure 6.2.1).

Figure 6.2.1. Trends in TAY admissions and patients



PATIENT CHARACTERISTICS

The majority of TAY patients were male (60.8%), Latinx (70.0%), age 25 (19.4%), and unemployed (64.0%). Among TAY admissions, 50.1% reported having mental health issues, 30.1% were homeless, and 24.8% were involved with the criminal justice system (Table 6.2.2).

Table 6.2.2. Characteristics of TAY patients, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	2,247	60.8
	Female	1,414	38.3
	Transgender male	12	0.3
	Transgender female	16	0.4
	Non-conforming or refuse to state	-	-
RACE	Latinx	2,606	70.0
	White	504	13.5
	Black/African American	526	14.1
	Asian	52	1.4
	Pacific Islander	-	-
	American Indian/Alaska Native	10	0.3
	Other	20	0.5
AGE	16	340	9.1
	17	374	10.0
	18	217	5.8
	19	171	4.6
	20	266	7.1
	21	327	8.7
	22	372	9.9
	23	429	11.5
	24	523	14.0
	25	726	19.4
SEXUAL ORIENTATION	Heterosexual	3,293	88.9
	Gay, lesbian, or bisexual	267	7.2
	Something else	-	-
	Unsure/questioning	46	1.2
	Prefer not to state	95	2.6
EDUCATION	Middle school or below	43	1.2
	Some high school	1,420	38.7
	High school completed	1,812	49.4
	Some college or beyond	390	10.6
EMPLOYMENT	Employed	904	15.4
	Unemployed (seeking)	2,251	38.2
	Unemployed (not seeking)	1,517	25.8
	Not in labor force	1,213	20.6
HOMELESS	Homeless at admission	1,126	30.1
MENTAL HEALTH ISSUES	Yes	2,961	50.1
	No	2,945	49.9
PHYSICAL HEALTH ISSUES	Yes	552	9.5
	No	5,281	90.5
DISABILITY	Yes	673	12.1
	No	4,901	87.9
CRIMINAL JUSTICE	Yes	1,467	24.8
	No	4,439	75.2

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.

PRIMARY SUBSTANCE USE AT ADMISSION

Marijuana (26.6%) was the most common primary substance use among TAY admissions, followed by methamphetamine (25.3%) and prescription drug (23.3%) (Table 6.2.3).

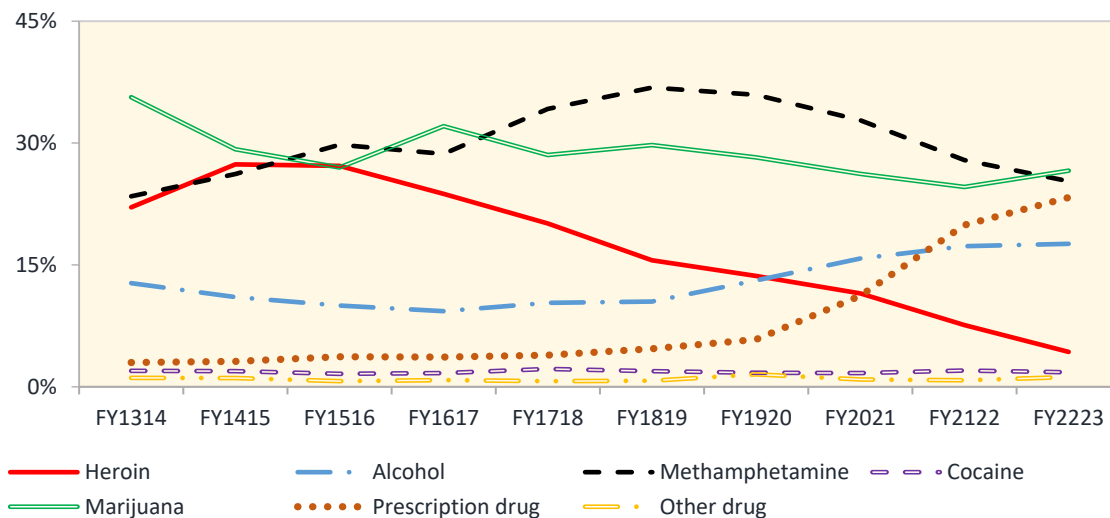
Table 6.2.3. Primary substance use among TAY patients, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Marijuana	1,547	26.6
Methamphetamine	1,471	25.3
Prescription drug	1,356	23.3
Alcohol	1,024	17.6
Heroin	253	4.3
Cocaine	107	1.8
Other drugs	67	1.2

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

Marijuana and methamphetamine have alternated as the primary substance use for TAY patients over the past ten years. Marijuana was the most common primary substance use from FY1314 to FY1415 and again in FY1617 but exhibited an overall decreasing trend in the following five fiscal years. Conversely, the proportion of TAY patients reporting methamphetamine as the primary substance use consistently increased from FY1314 to FY1819 and had remained the most common primary substance use from FY1718 to FY2122, albeit with a decreasing trend since its peak in FY1819. Additionally, there has been a substantial increase in the proportion of prescription drug admissions in the last three fiscal years, while the proportion of primary heroin admissions has declined from FY1415 to FY2223 (Figure 6.2.2).

Figure 6.2.2. Trends in primary substance use among TAY patients



LEVEL OF CARE

TAY patients were most commonly treated in outpatient programs (33.8%), followed by residential service programs (29.5%) and intensive outpatient programs (12.9%) (Table 6.2.4).

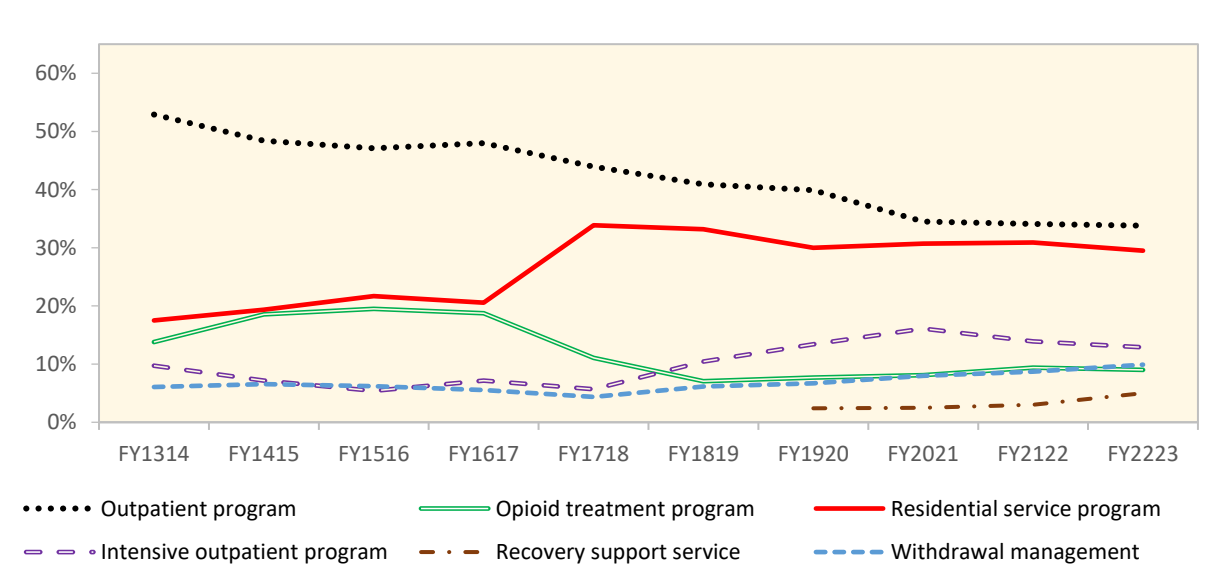
Table 6.2.4. Level of care among TAY patients, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	588	9.9
ASAM WM 1	-	-
ASAM WM 2	20	0.3
ASAM WM 3.2	472	8.0
ASAM WM 3.7/4.0	95	1.6
Residential Service	1,753	29.5
ASAM 3.1	889	15.0
ASAM 3.3	12	0.2
ASAM 3.5	852	14.4
Intensive Outpatient (ASAM 2.1)	763	12.9
Outpatient	2,003	33.8
Opioid Treatment Program (ASAM OTP)	532	9.0
Recovery Support Service	294	5.0

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
N ≤ 5 not reported to protect confidentiality.

Over the past ten fiscal years, there has been a gradual decrease in the proportion of TAY admissions to outpatient programs. Conversely, the proportion of TAY admissions to residential service programs increased from FY1314 to FY1718 and has since stabilized (Figure 6.2.3).

Figure 6.2.3. Trends in level of care among TAY patients



DISCHARGE STATUS AND TREATMENT OUTCOMES AT DISCHARGE

Of the discharges among TAY with discharge status, 47.4% had positive compliance, with 35.3% completing treatment and 12.0% leaving with satisfactory progress (Table 6.2.5).

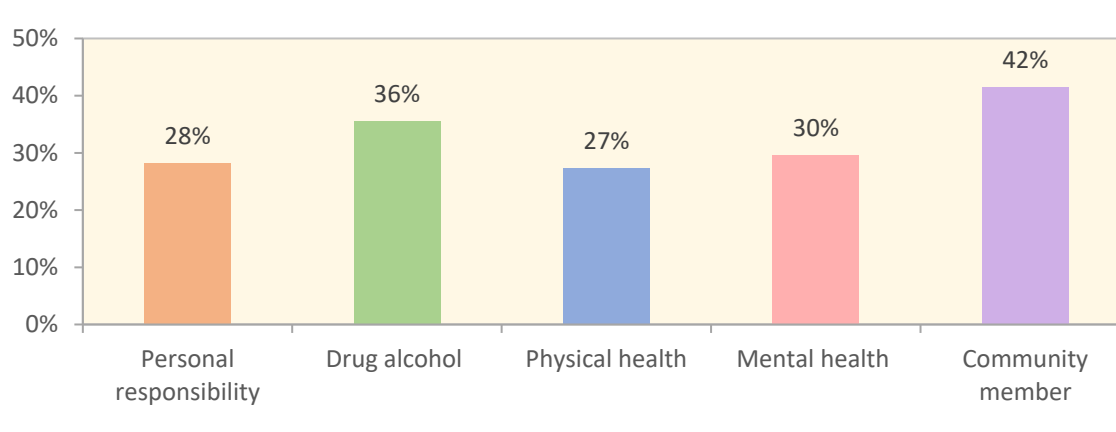
Table 6.2.5. Discharge status of TAY patients, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	2,065	47.4
Completed treatment	1,540	35.3
Left – satisfactory progress	525	12.0
Negative compliance	2,155	49.4
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	139	3.2

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

According to the Treatment Effectiveness Assessment (TEA) used to gauge recovery progress per the patients’ perspective at the time of discharge, 28% of Transitional Age Youth (TAY) reported they were better in taking care of personal responsibilities (e.g., paying bills, following through on personal or professional commitments), 36% reported they were better with handling drug and alcohol use (e.g., the frequency and amount of use, money spent on drugs, amount of drug craving, being sick, etc.), 27% reported they were better in physical health (e.g., eating and sleeping properly, exercising, taking care of health or dental problems), 30% reported they were better in mental health (e.g., feeling good about themselves), and 42% reported they were a better community member (e.g., obeying laws, meeting your responsibilities to society, positive impact on others) compared to at admission (Figure 6.2.4).

Figure 6.2.3. Treatment Effectiveness Assessment (TEA) for Transitional Age Youth (TAY), FY2223



Older Adults

TREATMENT ADMISSIONS AND DISCHARGES

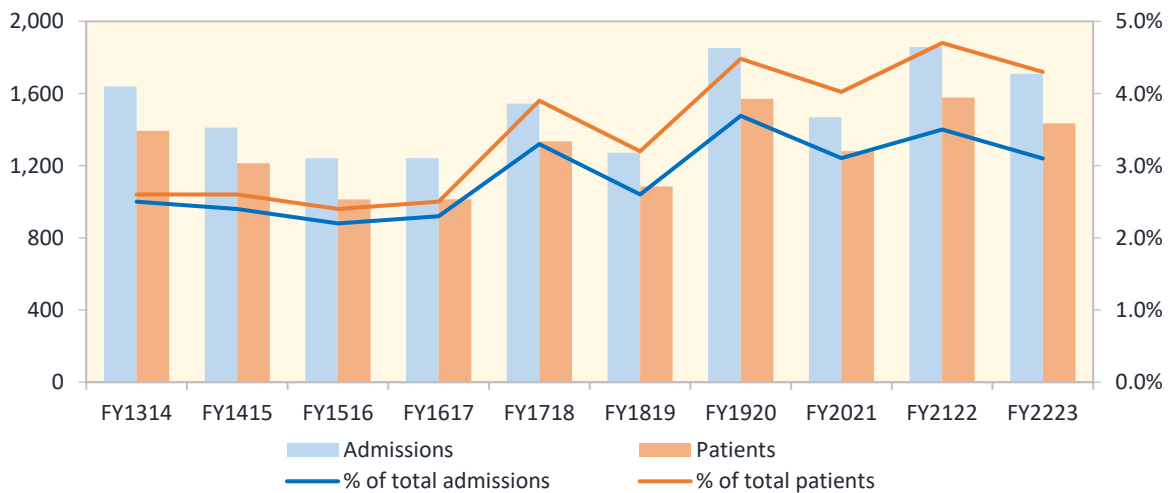
There were 1434 (4.3%) older adult patients aged 65 and above, who accounted for 1,709 (3.1%) treatment admissions (Table 6.3.1).

Table 6.3.1. Treatment admissions and discharges among older adult patients, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	1,709	3.1	1,434	4.3
Discharged	637	1.7	521	2.2

From FY1314 to FY1617, the proportion of admissions and patients in the older adult category remained stable, while the actual number of older adult admissions and patients decreased. However, starting from FY1718, both the proportion and number of older adult admissions and patients have shown fluctuations, with an overall increasing trend (Figure 6.3.1).

Figure 6.3.1. Trends in older adult admissions and patients



PATIENT CHARACTERISTICS

The majority of older adult patients were male (71.4%), Latinx (37.3%), ages 65-69 (61.4%), and unemployed (52.9%). Among older adult admissions, 21.7% reported mental health issues, 22.1% reported a disability, and 16.4% reported physical health issues (Table 6.3.2).

Table 6.3.2. Characteristics of older adult patients, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	1023	71.4
	Female	407	28.4
	Transgender male	-	-
	Transgender female	-	-
	Non-conforming or refuse to state	-	-
RACE	Latinx	529	37.3
	White	523	36.8
	Black/African American	344	24.2
	Asian	12	0.8
	Pacific Islander	-	-
	American Indian/Alaska Native	7	0.5
	Other	-	-
AGE	65-69	880	61.4
	70-74	403	28.1
	75-79	123	8.6
	80-84	21	1.5
	85+	7	0.5
SEXUAL ORIENTATION	Heterosexual	1125	97.3
	Gay, lesbian, or bisexual	17	1.5
	Something else	-	-
	Unsure/questioning	-	-
	Prefer not to state	12	1.0
EDUCATION	Middle school or below	76	5.4
	Some high school	327	23.4
	High school completed	754	53.9
	Some college or beyond	243	17.4
EMPLOYMENT	Employed	201	11.9
	Unemployed (seeking)	237	14.0
	Unemployed (not seeking)	657	38.9
	Not in labor force	596	35.2
HOMELESS	Homeless at admission	150	10.5
MENTAL HEALTH ISSUES	Yes	364	21.7
	No	1,312	78.3
PHYSICAL HEALTH ISSUES	Yes	275	16.4
	No	1,398	83.6
DISABILITY	Yes	359	22.1
	No	1,263	77.9
CRIMINAL JUSTICE	Yes	107	6.4
	No	1,575	93.6

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.

PRIMARY SUBSTANCE USE AT ADMISSION

The most commonly reported primary substance use among older adults was heroin (70.4%), followed by prescription drug (15.4%) and alcohol (7.2%) (Table 6.3.3).

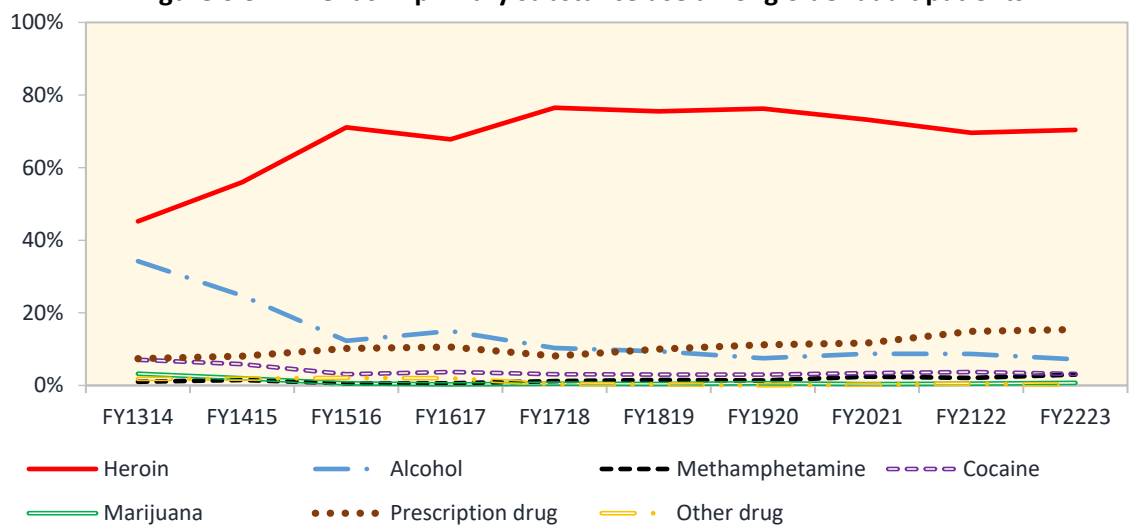
Table 6.3.3. Primary substance use among older adult patients, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Heroin	1,182	70.4
Prescription drug	258	15.4
Alcohol	121	7.2
Cocaine	54	3.2
Methamphetamine	51	3.0
Marijuana	11	0.7
Other drugs	-	-

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

The proportion of older patients reporting heroin as the primary substance use increased from FY1314 to FY1516 then stabilized through FY2223. Heroin has been the most common primary substance use among older adults the past ten fiscal years. The proportion of older adults reporting alcohol as the primary substance use significantly decreased from FY1314 to FY1516, and in FY1819, prescription drug surpassed alcohol (Figure 6.3.2).

Figure 6.3.2. Trends in primary substance use among older adult patients



LEVEL OF CARE

The majority (82.8%) of older adult patients were treated in opioid treatment programs. Relatively few were treated in residential service programs (5.0%) and outpatient programs (6.0%) (Table 6.3.4).

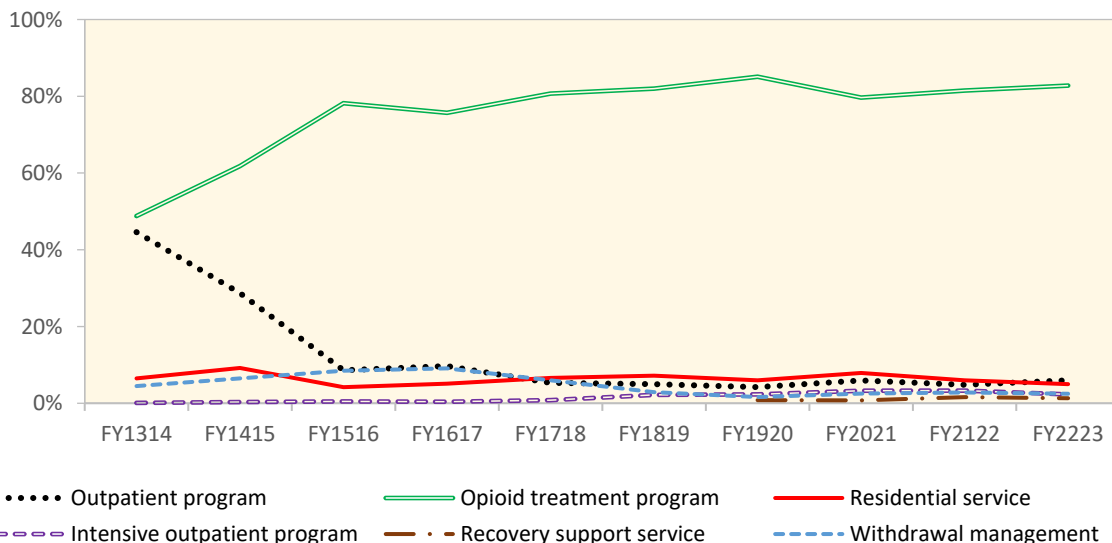
Table 6.3.4. Level of care among older adult patients, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	43	2.5
ASAM WM 3.2	27	1.6
ASAM WM 3.7/4.0	16	0.9
Residential Service	86	5.0
ASAM 3.1	34	2.0
ASAM 3.3	-	-
ASAM 3.5	52	3.0
Intensive Outpatient (ASAM 2.1)	40	2.3
Outpatient	102	6.0
Opioid Treatment Program (ASAM OTP)	1,411	82.8
Recovery Support Service	23	1.3

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
 N ≤ 5 not reported to protect confidentiality.

Since FY1314, older adult admissions to opioid treatment programs increased sharply and has remained the predominant level of care among older adults. On the contrary, older adult admissions to outpatient programs decreased dramatically from FY1314 to FY1516 and remained relatively low in the past seven fiscal years, as are all other levels of care (Figure 6.3.3).

Figure 6.3.3. Trends in level of care among older adult patients



DISCHARGE STATUS AND TREATMENT OUTCOMES AT DISCHARGE

Of the discharges among older adults with discharge status, 48.4% had positive compliance, with 23.3% completing treatment and 25.0% leaving with satisfactory progress (Table 6.3.5).

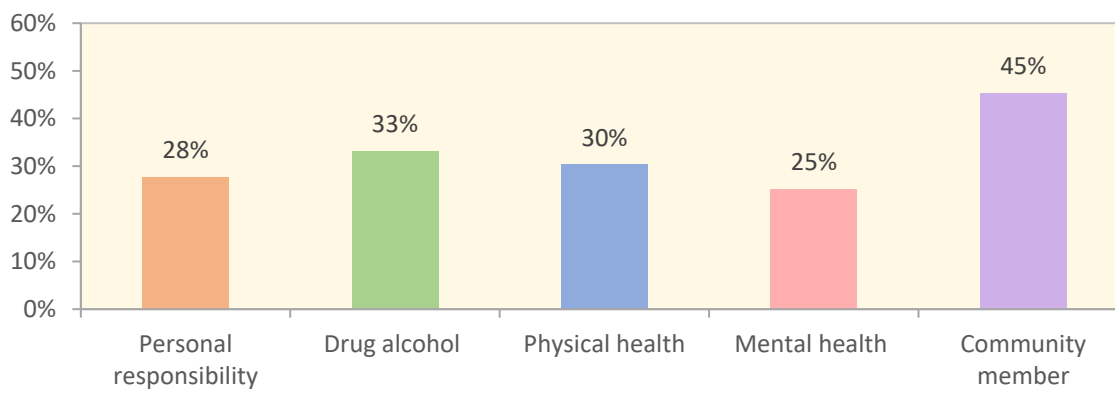
Table 6.3.5. Discharge status of older adult patients, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	282	48.4
Completed treatment	136	23.3
Left – satisfactory progress	146	25.0
Negative compliance	276	47.3
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	25	4.3

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

According to the Treatment Effectiveness Assessment (TEA) used to gauge recovery progress per the patients’ perspective at the time of discharge, 28% of older adults reported they were better at taking care of personal responsibilities (e.g., paying bills, following through on personal or professional commitments), 33% of older adults reported they were better with handling drug and alcohol use (e.g., the frequency and amount of use, money spent on drugs, amount of drug craving, being sick, etc.), 30% reported they were better in physical health (e.g., eating and sleeping properly, exercising, taking care of health or dental problems), 25% reported they were better in mental health (e.g., feeling good about themselves), and 45% reported they were a better community member (e.g., obeying laws, meeting your responsibilities to society, positive impact on others) compared to at admission (Figure 6.3.4).

Figure 6.3.4. Treatment Effectiveness Assessment (TEA) for older adults, FY2223



Patients Involved in the Criminal Justice System³

TREATMENT ADMISSIONS AND DISCHARGES

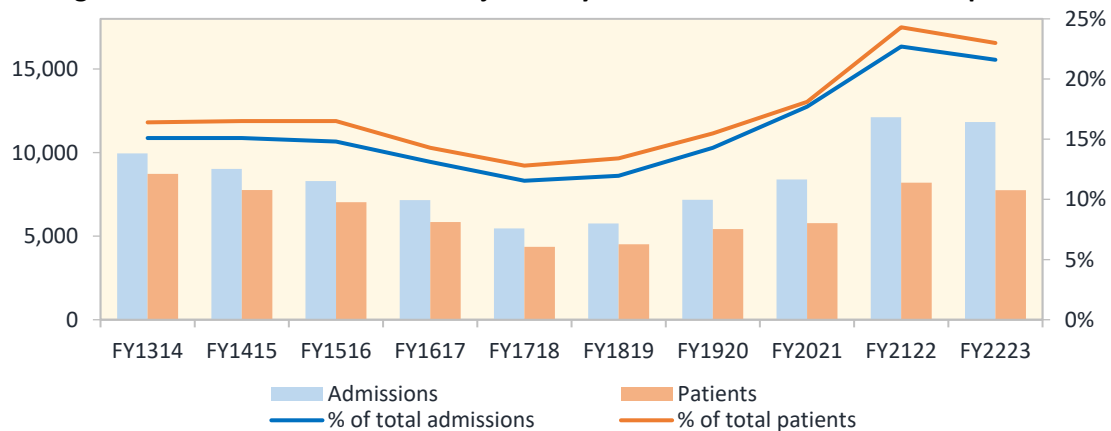
There were 7,747 (23.0%) patients involved in the criminal system at admission, who accounted for 11,828 (21.6%) treatment admissions (Table 6.4.1).

Table 6.4.1. Treatment admissions and discharges among patients involved in the criminal justice system, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	11,828	21.6	7,747	23.0
Discharged	9,444	24.8	6,338	26.8

The proportion of patients who were involved in the criminal justice system remained stable from 16.4% in FY1314 to 16.5% in FY1516 then decreased slightly to 12.8% in FY1718, followed by a steady increase to 23.0% in FY2223 (Figure 6.4.1).

Figure 6.4.1. Trends in the criminal justice system-involved admissions and patients



³ Patients involved in the criminal justice system, including those who were referred by the criminal justice system (e.g., Proposition 36/ Probation or Parole, Post-release Community Supervision (AB 109), Adult Felon Drug Court, Dependency Drug Court, etc.), who reported their eligibility of criminal justice system programs (e.g., Drug Court, AB109, Proposition 36, Parolee Service Network, Proposition 47), or who were matched with AB109 or other probation source lists.

PATIENT CHARACTERISTICS

The majority of patients involved in the criminal justice system were male (75.6%), Latinx (61.3%), ages 26-34 (36.7%), and unemployed (70.0%). More than half (51.8%) reported having mental health issues at admission, and 53.1% were homeless at admission (Table 6.4.2).

Table 6.4.2. Characteristics of patients involved in the criminal justice system, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	5,831	75.6
	Female	1,827	23.7
	Transgender male	13	0.2
	Transgender female	35	0.5
	Non-conforming or refuse to state	8	0.1
RACE	Latinx	4,737	61.3
	White	1,412	18.3
	Black/African American	1,347	17.4
	Asian	137	1.8
	Pacific Islander	12	0.2
	American Indian/Alaska Native	47	0.6
	Other	41	0.5
AGE	17 and under	248	3.2
	18-25	816	10.5
	26-34	2,840	36.7
	35-44	2,170	28.0
	45-54	1,005	13.0
	55-64	575	7.4
	65+	92	1.2
SEXUAL ORIENTATION	Heterosexual	7,015	92.2
	Gay, lesbian, or bisexual	449	5.9
	Something else	-	-
	Unsure/questioning	44	0.6
	Prefer not to state	94	1.2
EDUCATION	Middle school or below	216	2.8
	Some high school	2,243	29.2
	High school completed	3,792	49.4
	Some college or beyond	1,425	18.6
EMPLOYMENT	Employed	1,561	13.3
	Unemployed (seeking)	4,995	42.4
	Unemployed (not seeking)	3,250	27.6
	Not in labor force	1,970	16.7
HOMELESS	Homeless at admission	4,113	53.1
MENTAL HEALTH ISSUES	Yes	6,101	51.8
	No	5,670	48.2
PHYSICAL HEALTH ISSUES	Yes	1,173	10.0
	No	10,528	90.0
DISABILITY	Yes	1,697	15.3
	No	9,375	84.7

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PRIMARY SUBSTANCE USE AT ADMISSION

The most common primary substance use among patients involved in the criminal justice system was methamphetamine (46.1%), followed by alcohol (21.1%) and heroin (11.4%) (Table 6.4.3).

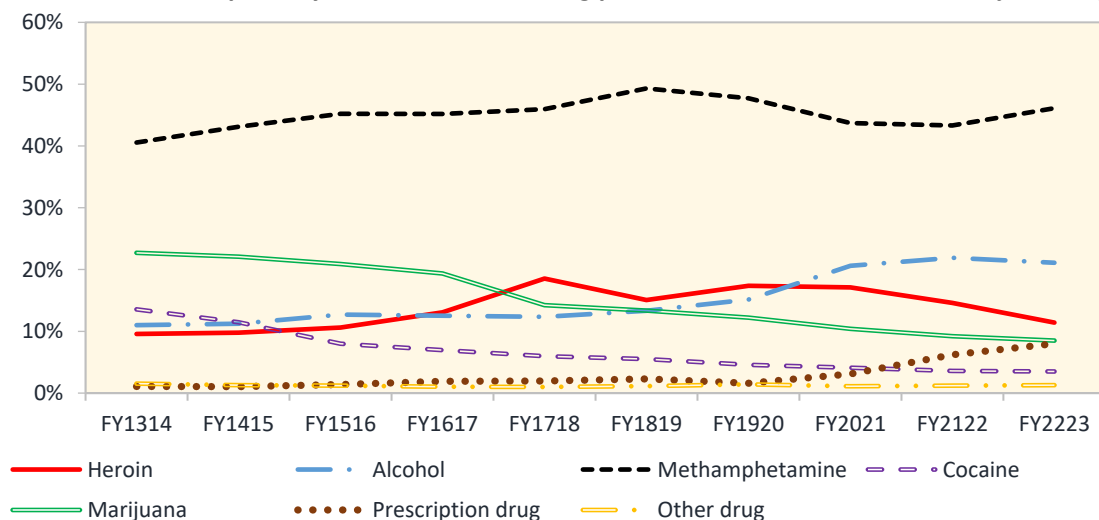
Table 6.4.3. Primary substance use among patients involved in the criminal justice system, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Methamphetamine	5,409	46.1
Alcohol	2,472	21.1
Heroin	1,338	11.4
Marijuana	1,001	8.5
Prescription drug	935	8.0
Cocaine	415	3.5
Other drugs	151	1.3

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

Methamphetamine has consistently been the primary substance use among patients involved in the criminal justice system over the past ten fiscal years. Its proportion has shown a slight fluctuation from FY1314, staying above 40% in the entire period. The proportions of primary cocaine admissions and primary marijuana admissions consistently decreased from FY1314 to FY2223, while the proportions of primary alcohol admissions and primary heroin admissions increased slightly overall during the same period (Figure 6.4.2).

Figure 6.4.2. Trends in primary substance use among patients involved in the criminal justice system



LEVEL OF CARE

Patients involved in the criminal justice system were most commonly admitted to residential service programs (42.2%), followed by outpatient programs (24.9%) and intensive outpatient programs (16.6%) (Table 6.4.4).

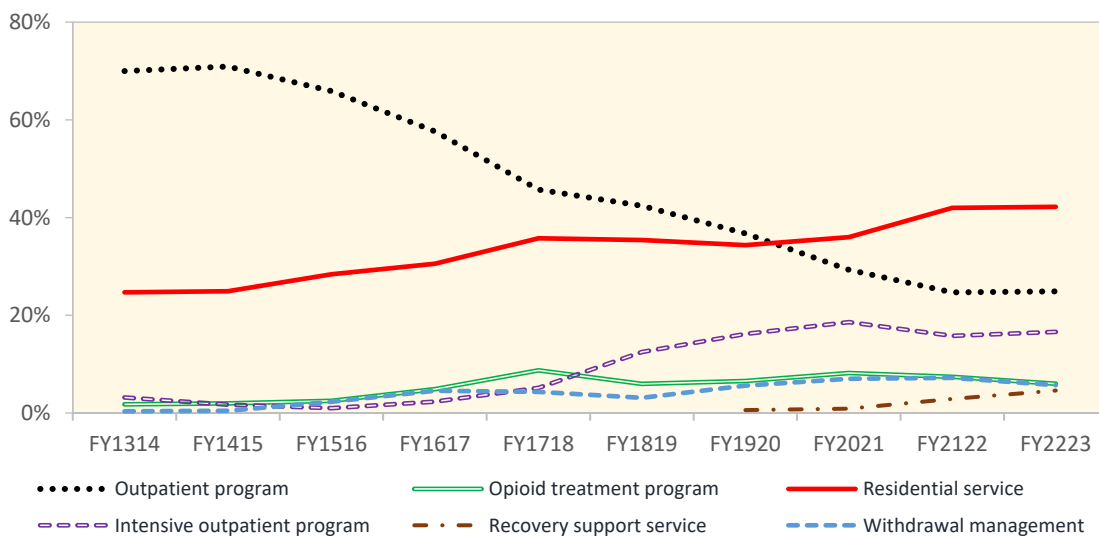
Table 6.4.4. Level of care among patients involved in the criminal justice system, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	669	5.7
ASAM WM 1	-	-
ASAM WM 2	17	0.1
ASAM WM 3.2	490	4.2
ASAM WM 3.7/4.0	157	1.3
Residential Service	4,969	42.2
ASAM 3.1	2,800	23.8
ASAM 3.3	42	0.4
ASAM 3.5	2,127	18.0
Intensive Outpatient (ASAM 2.1)	1,961	16.6
Outpatient	2,938	24.9
Opioid Treatment Program (ASAM OTP)	703	6.0
Recovery Support Service	547	4.6

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

The proportion of criminal justice-involved admissions to residential service programs exhibited a steady increase, rising from 24.7% in FY1314 to 42.2% in FY2223. In FY2021, residential service programs surpassed outpatient programs as the most common level of care, while the proportion of admissions to outpatient programs showed a consistent decline since FY1415 (Figure 6.4.3).

Figure 6.4.3. Trends in levels of care among patients involved in the criminal justice system



DISCHARGE STATUS AND TREATMENT OUTCOMES AT DISCHARGE

Of the discharges among criminal justice-involved patients with discharge status, 58.6% had positive compliance, with 48.1% completing treatment and 10.5% leaving with satisfactory progress (Table 6.4.5).

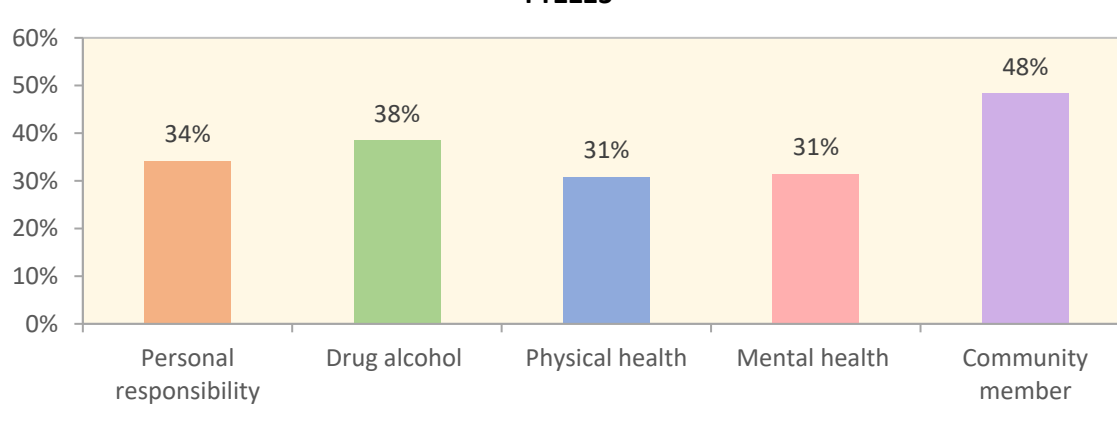
Table 6.4.5. Discharge status of criminal justice system-involved patients, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	5,274	58.6
Completed treatment	4,325	48.1
Left – satisfactory progress	949	10.5
Negative compliance	3,392	37.7
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	332	3.7

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

According to the Treatment Effectiveness Assessment (TEA) used to gauge recovery progress per the patients’ perspective at the time of discharge, 34% of criminal justice system-involved patients reported they were better in taking care of personal responsibilities (e.g., paying bills, following through on personal or professional commitments), 38% reported they were better with handling drug and alcohol use (e.g., the frequency and amount of use, money spent on drugs, amount of drug craving, being sick, etc.), 31% reported they were better in physical health (e.g., eating and sleeping properly, exercising, taking care of health or dental problems), 31% reported they were better in mental health (e.g., feeling good about themselves), and 48% reported they were a better community member (e.g., obeying laws, meeting your responsibilities to society, positive impact on others) compared to at admission (Figure 6.4.4).

Figure 6.4.4. Treatment Effectiveness Assessment for criminal justice system-involved patients, FY2223



Patients who were Experiencing Homelessness at Admission

TREATMENT ADMISSIONS AND DISCHARGES

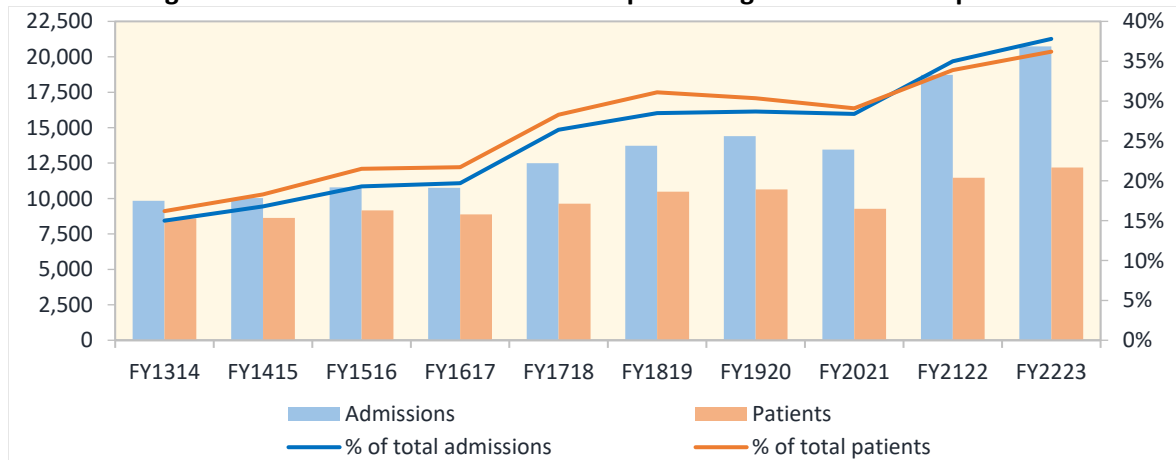
There were 12,185 (36.2%) patients experiencing homelessness at admission, accounting for 20,731 (37.8%) treatment admissions (Table 6.5.1).

Table 6.5.1. Treatment admissions and discharges among patients experiencing homelessness, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	20,731	37.8	12,185	36.2
Discharged	16,469	43.2	10,320	43.7

The number and proportion of patients experiencing homelessness showed overall increasing trends from 8,594 (16.2%) in FY1314 to 12,185 (36.2%) in FY2223. The number and proportion of admissions among patients experiencing homelessness showed similar trends, increasing from 9,843 (15.0%) in FY1314 to 20,731(37.8%) in FY2223 (Figure 6.5.1).

Figure 6.5.1. Trends in homelessness-experiencing admissions and patients



PATIENT CHARACTERISTICS

The majority of patients experiencing homelessness at admission were male (67.6%), Latinx (54.1%), ages 26-34 (37.9%), and unemployed (80.5%). Among homeless admissions, 62.8% reported having mental health issues, and 29.8% reported criminal justice involvement (Table 6.5.2).

Table 6.5.2. Characteristics of patients experiencing homelessness, FY2223

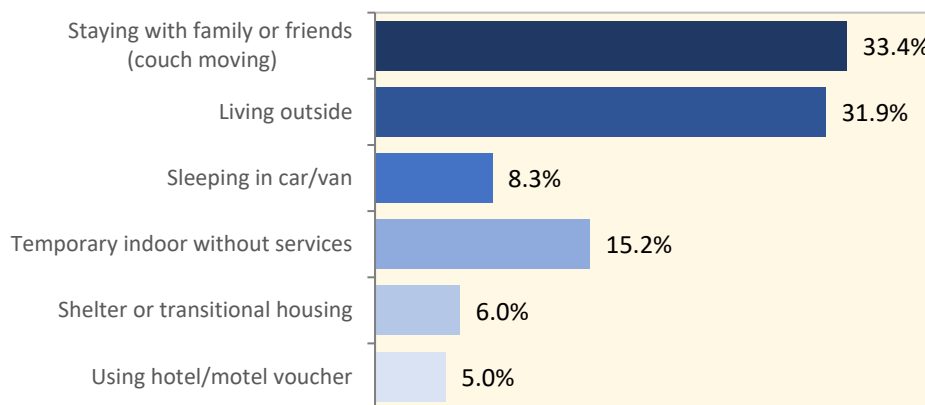
CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	8,182	67.6
	Female	3,833	31.6
	Transgender male	17	0.1
	Transgender female	73	0.6
	Non-conforming or refuse to state	6	0.0
RACE	Latinx	6,582	54.1
	White	3,034	24.9
	Black/African American	2,170	17.8
	Asian	193	1.6
	Pacific Islander	26	0.2
	American Indian/Alaska Native	98	0.8
	Other	71	0.6
AGE	17 and under	-	-
	18-25	1,091	9.0
	26-34	4,617	37.9
	35-44	3,532	29.0
	45-54	1,707	14.0
	55-64	1,082	8.9
	65+	150	1.2
SEXUAL ORIENTATION	Heterosexual	10,796	90.1
	Gay, lesbian, or bisexual	960	8.0
	Something else	10	0.1
	Unsure/questioning	74	0.6
	Prefer not to state	145	1.2
EDUCATION	Middle school or below	311	2.6
	Some high school	2,869	23.7
	High school completed	6,100	50.3
	Some college or beyond	2,840	23.4
EMPLOYMENT	Employed	1,104	5.3
	Unemployed (seeking)	9,673	46.7
	Unemployed (not seeking)	6,995	33.8
	Not in labor force	2,930	14.2
MENTAL HEALTH ISSUES	Yes	13,012	62.8
	No	7,697	37.2
PHYSICAL HEALTH ISSUES	Yes	2,971	14.4
	No	17,656	85.6
DISABILITY	Yes	3,994	20.3
	No	15,647	79.7
CRIMINAL JUSTICE	Yes	6,164	29.8
	No	14,514	70.2

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
N ≤ 5 not reported to protect confidentiality.

LIVING ARRANGEMENT AT ADMISSION

The most commonly reported living arrangement by patients experiencing homelessness at admission was staying with family or friends (“couch moving”) (33.4%), followed by living outside (31.9%), and temporary indoor without services (15.9%) (Figure 6.5.2)

Figure 6.5.2. Living arrangement among patients experiencing homelessness, FY2223



Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PRIMARY SUBSTANCE USE AT ADMISSION

The most commonly reported primary substance use was methamphetamine (40.5%), followed by alcohol (30.3%) and prescription drug (12.5%) (Table 6.5.3).

Table 6.5.3. Primary substance use among patients experiencing homelessness, FY2223

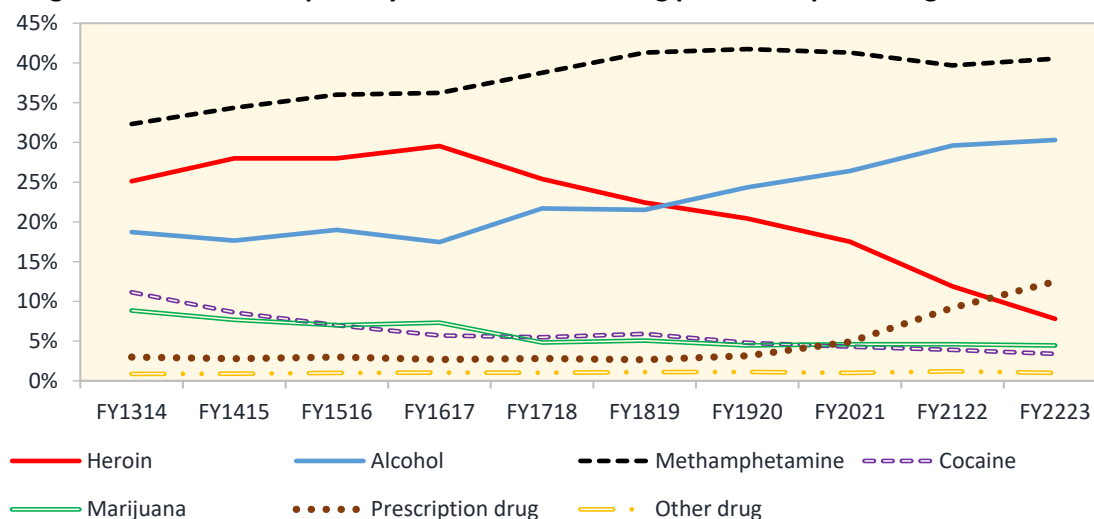
PRIMARY SUBSTANCE USE	ADMISSIONS	%
Methamphetamine	8,356	40.5
Alcohol	6,248	30.3
Prescription drug	2,576	12.5
Heroin	1,609	7.8
Marijuana	918	4.5
Cocaine	700	3.4
Other drugs	207	1.0

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

HOMELESSNESS

Among patients experiencing homelessness, methamphetamine remained as the dominant primary substance use since FY1314, with a consistent upward trend. The proportion of patients reporting heroin as the primary substance use increased from FY1314 to FY1617, but declined significantly thereafter through FY2223. Alcohol surpassed heroin as the second most common primary substance use starting from FY1920 onwards (Figure 6.5.3).

Figure 6.5.3. Trends in primary substance use among patients experiencing homelessness



LEVEL OF CARE

The most common level of care that patients were admitted to was residential service programs (48.5%), followed by outpatient programs (15.4%) and withdrawal management programs (14.4%) (Table 6.5.4).

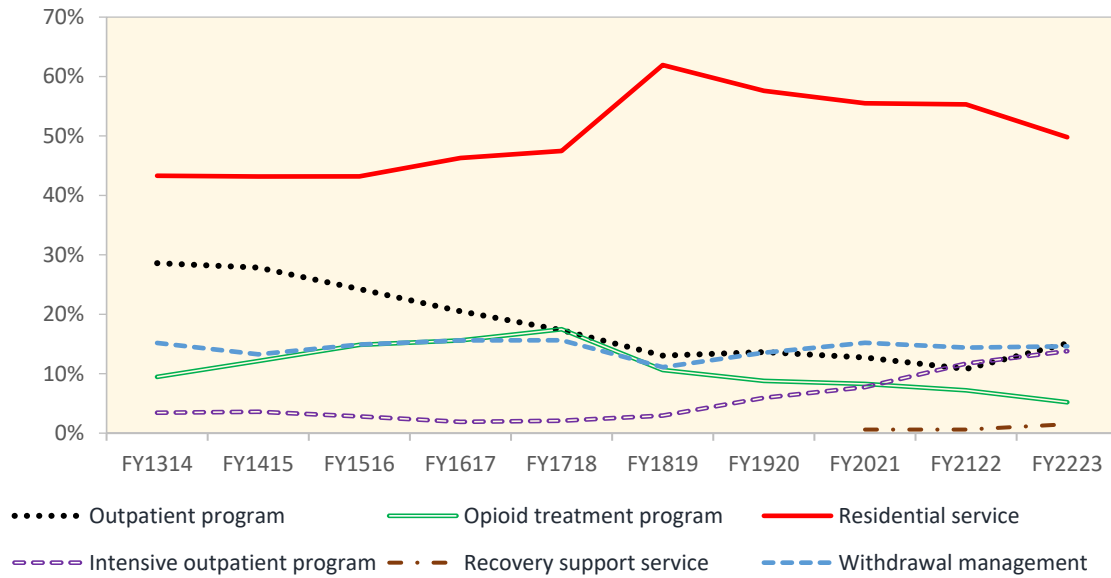
Table 6.5.4. Level of care among patients experiencing homelessness, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	2,972	14.4
ASAM WM 1	-	-
ASAM WM 2	46	0.2
ASAM WM 3.2	2,134	10.4
ASAM WM 3.7/4.0	791	3.8
Residential Service	9,999	48.5
ASAM 3.1	4,747	23.0
ASAM 3.3	59	0.3
ASAM 3.5	5,193	25.2
Intensive Outpatient (ASAM 2.1)	2,839	13.8
Outpatient	3,165	15.4
Opioid Treatment Program (ASAM OTP)	810	3.9
Recovery Support Service	820	4.0

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
N ≤ 5 not reported to protect confidentiality.

The proportion of patients experiencing homelessness admitted to residential service programs showed an increasing trend from FY1314 to FY1819, followed by a slight decrease in subsequent years. Conversely, the proportion of admissions to outpatient programs exhibited a gradual decline over the past decade with a slight uptick in FY2223. The proportion of admissions to opioid treatment programs reached its highest point in FY1718 and subsequently decreased through FY2223 (Figure 6.5.4).

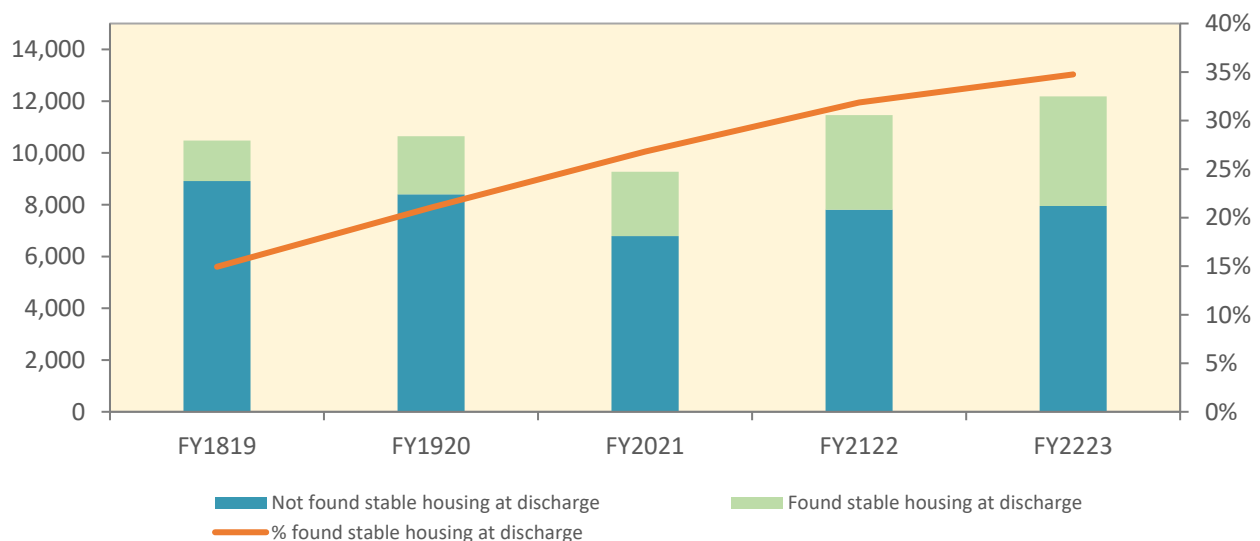
Figure 6.5.4. Trends in level of care among patients experiencing homelessness



STABLE HOUSING AT DISCHARGE

According to self-reports, the proportion of patients experiencing homelessness at admission who found stable housing at discharge has shown an increasing trend over the past four fiscal years, reaching the highest percentage (34.8%) in FY2223 (Figure 6.5.5).

Figure 6.5.5. Trends in patients experiencing homelessness who found stable housing at discharge



DISCHARGE STATUS AND TREATMENT OUTCOMES AT DISCHARGE

Among patients experiencing homelessness with discharge status, 59.1% had positive compliance, with 48.7% completing treatment, and 10.5% leaving the program with satisfactory progress (Table 6.5.5).

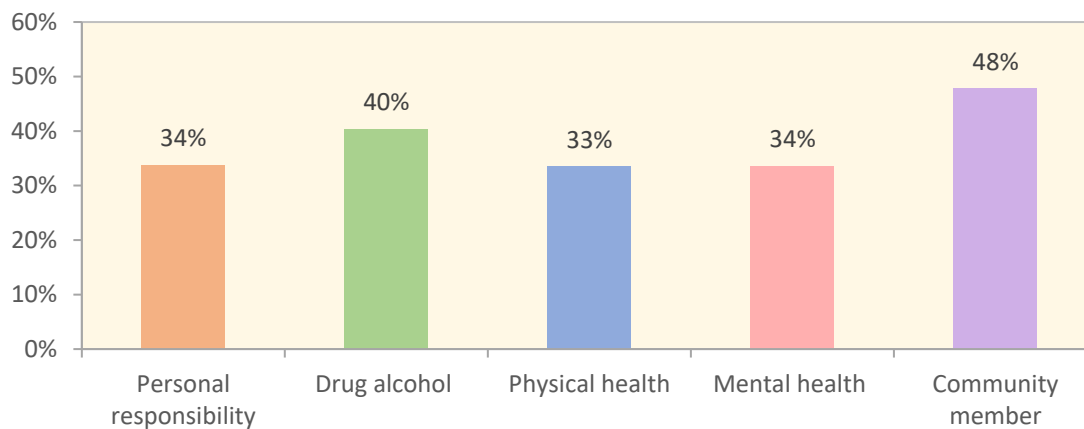
Table 6.5.5. Discharge status of patients experiencing homelessness, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	9,491	59.1
Completed treatment	7,814	48.7
Left – satisfactory progress	1,677	10.5
Negative compliance	6,108	38.1
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	447	2.8

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

According to the Treatment Effectiveness Assessment (TEA) used to gauge recovery progress per the patients’ perspective at the time of discharge, 34% of patients experiencing homelessness reported they were better in taking care of personal responsibilities (e.g., paying bills, following through on personal or professional commitments), 40% reported they were better with handling drug and alcohol use (e.g., the frequency and amount of use, money spent on drugs, amount of drug craving, being sick, etc.), 33% reported they were better in physical health (e.g., eating and sleeping properly, exercising, taking care of health or dental problems), 34% reported they were better in mental health (e.g., feeling good about themselves), and 48% reported they were a better community member (e.g., obeying laws, meeting your responsibilities to society, positive impact on others) compared to at admission (Figure 6.5.6).

Figure 6.5.6. Treatment Effectiveness Assessment (TEA) for patients experiencing homelessness, FY2223



Patients with Disabilities

TREATMENT ADMISSIONS AND DISCHARGES

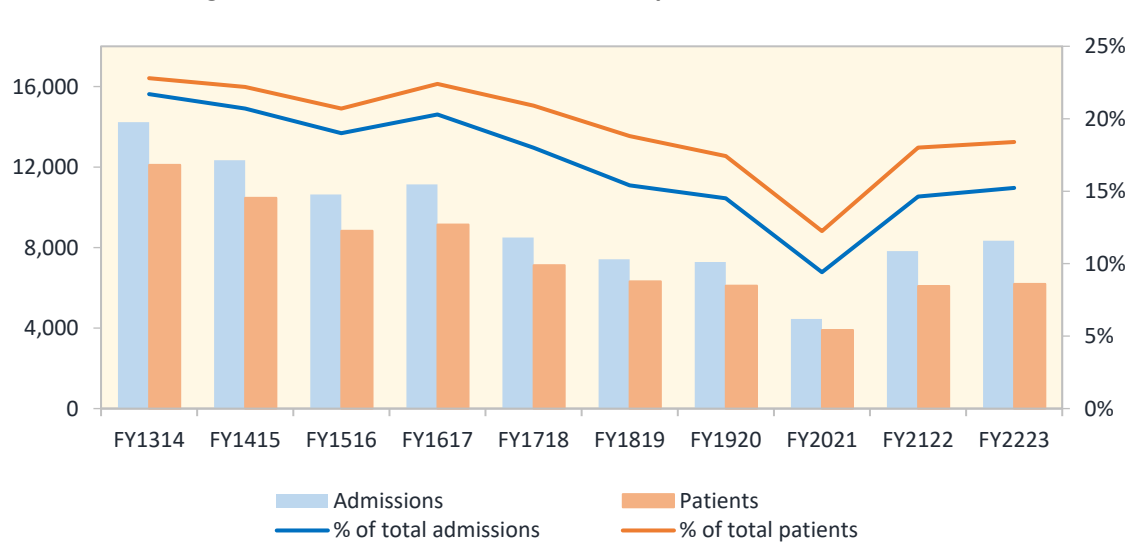
Patients who had disabilities (visual, hearing, speech, mobility, mental, developmental, etc.) accounted for 6,192 (18.4%) patients and 8,338 (15.2%) treatment admissions (Table 6.6.1).

Table 6.6.1. Treatment admissions and discharges among patients with disabilities, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	8,338	15.2	6,192	18.4
Discharged	6,114	16.0	4,722	20.0

The number of patients with disabilities at the time of admission decreased from 12,106 in FY1314 to 3,901 in FY2021 then increased to 6,192 in FY2223. The proportion of patients with disabilities followed a similar trend during the same period (Figure 6.6.1).

Figure 6.6.1. Trends in admissions and patients with disabilities



PATIENT CHARACTERISTICS

The majority of patients with disabilities were male (65.4%), Latinx (45.9%), ages 26-34 (29.6%), and unemployed (73.6%). Among admissions with disabilities, 85.9% reported having mental health issues, and 46.6% were homeless (Table 6.6.2).

Table 6.6.2. Characteristics of patients with disabilities, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	4,023	65.4
	Female	2,081	33.8
	Transgender male	7	0.1
	Transgender female	33	0.5
	Non-conforming or refuse to state	-	-
RACE	Latinx	2,843	45.9
	White	1,871	30.2
	Black/African American	1,275	20.6
	Asian	101	1.6
	Pacific Islander	10	0.2
	American Indian/Alaska Native	46	0.7
	Other	43	0.7
AGE	17 and under	116	1.9
	18-25	436	7.0
	26-34	1,833	29.6
	35-44	1,543	24.9
	45-54	973	15.7
	55-64	964	15.6
	65+	325	5.3
SEXUAL ORIENTATION	Heterosexual	5,316	89.2
	Gay, lesbian, or bisexual	496	8.3
	Something else	6	0.1
	Unsure/questioning	45	0.8
	Prefer not to state	99	1.7
EDUCATION	Middle school or below	190	3.1
	Some high school	1,386	22.4
	High school completed	2,995	48.5
	Some college or beyond	1,605	26.0
EMPLOYMENT	Employed	498	6.0
	Unemployed (seeking)	3,080	37.0
	Unemployed (not seeking)	3,053	36.6
	Not in labor force	1,704	20.4
HOMELESS	Homeless at admission	2,887	46.6
MENTAL HEALTH ISSUES	Yes	7,155	85.9
	No	1,176	14.1
PHYSICAL HEALTH ISSUES	Yes	1,792	21.6
	No	6,494	78.4
CRIMINAL JUSTICE	Yes	1,697	20.4
	No	6,634	79.6

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
N ≤ 5 not reported to protect confidentiality.



DISABILITY TYPE

The most common types of disabilities were mental (74.2%), mobility (11.2%), and visual (4.2%) disabilities (Table 6.6.3).

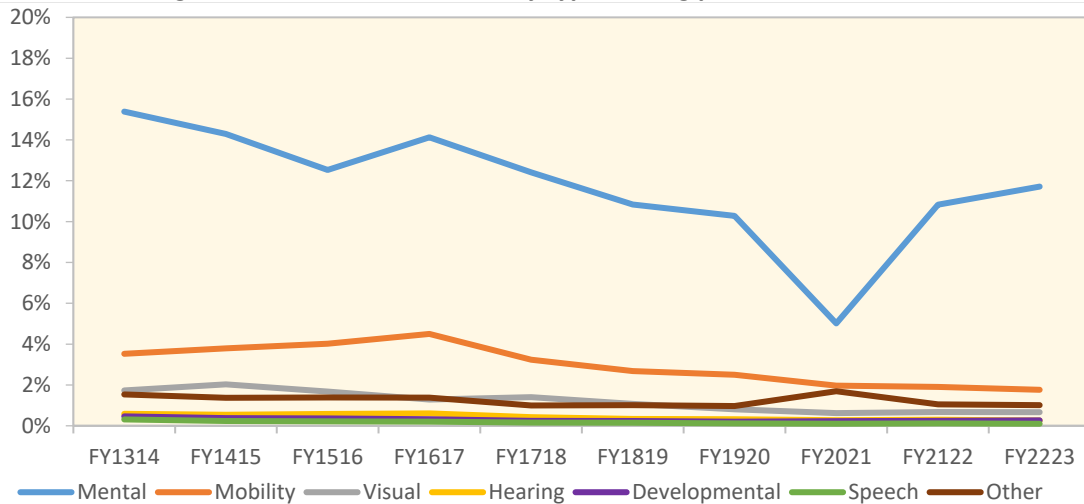
Table 6.6.3. Disability type among patients with disabilities, FY2223

DISABILITY TYPE	ADMISSIONS	%
Mental	6,417	74.2
Mobility	966	11.2
Visual	365	4.2
Hearing	142	1.6
Developmental	147	1.7
Speech	55	0.6
Other	552	6.4

Note: Percentages are based on non-missing values, and may not sum to 100% due to co-occurring disabilities.

Mental disability was the most commonly reported disability type, exhibiting an overall decreasing trend from 15.4% in FY1314 to 5.0% in FY2021, followed by an increase to 11.7% in FY2223 (Figure 6.6.2).

Figure 6.6.2. Trends in disability type among patients with disabilities



PRIMARY SUBSTANCE USE AT ADMISSION

Alcohol (36.1%) was the most commonly reported primary substance use at admission among patients with disabilities, followed by methamphetamine (26.1%) and prescription drug (14.3%) (Table 6.6.4).

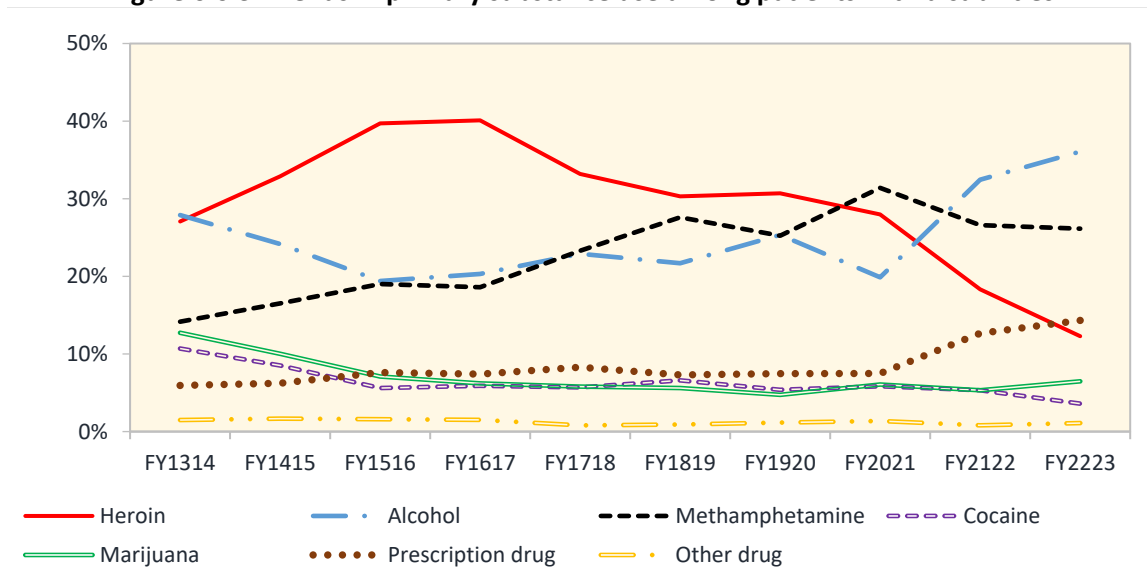
Table 6.6.4. Primary substance use among patients with disabilities, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Alcohol	2,977	36.1
Methamphetamine	2,157	26.1
Prescription drug	1,182	14.3
Heroin	1,014	12.3
Marijuana	535	6.5
Cocaine	297	3.6
Other drugs	91	1.1

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

Heroin had been the most common primary substance use among patients with disabilities at admission from FY1415 to FY1920 and its proportion declined by more than half in FY2223 since FY1920. The proportion reporting alcohol as the most common primary substance use surpassed heroin in FY1314, FY2122, and FY2223 (Figure 6.6.3).

Figure 6.6.3. Trends in primary substance use among patients with disabilities



LEVEL OF CARE

Patients who had disabilities were most commonly admitted to residential service programs (34.9%), followed by withdrawal management programs (20.2%) and outpatient programs (18.7%) (Table 6.6.5).

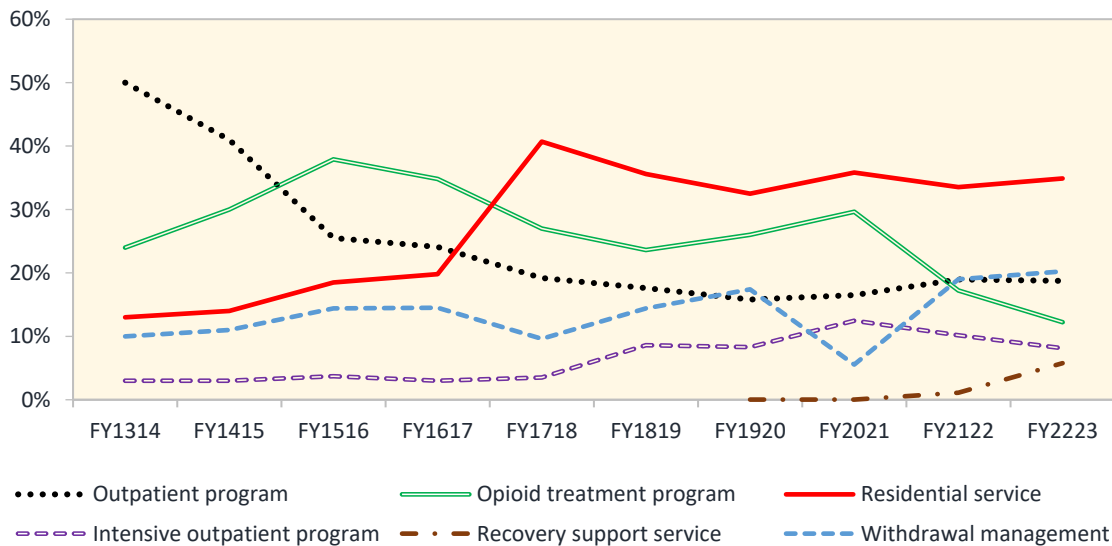
Table 6.6.5. Level of care among patients with disabilities, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	1,670	20.2
ASAM WM 2	27	0.3
ASAM WM 3.2	726	9.17
ASAM WM 3.7/4.0		11.1
Residential Service	2,879	34.9
ASAM 3.1	875	10.6
ASAM 3.3	20	0.2
ASAM 3.5	1,984	24.0
Intensive Outpatient (ASAM 2.1)	671	8.1
Outpatient	1,547	18.7
Opioid Treatment Program (ASAM OTP)	1,009	12.2
Recovery Support Service	476	5.8

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

The proportion admitted to residential service programs among patients with disabilities increased substantially from FY1617 to FY1718 and remained high thereafter as the most common level of care, while that of outpatient programs showed a decreasing trend over the last ten fiscal years with a slight overall increase from FY2021 to FY2223 (Figure 6.6.4).

Figure 6.6.4. Trends in level of care among patients with disabilities



DISCHARGE STATUS AND TREATMENT OUTCOMES AT DISCHARGE

Among patients with disabilities with discharge status, 58.7% had positive compliance, with 48.2% completing treatment, and 10.5% leaving the program with satisfactory progress (Table 6.6.6).

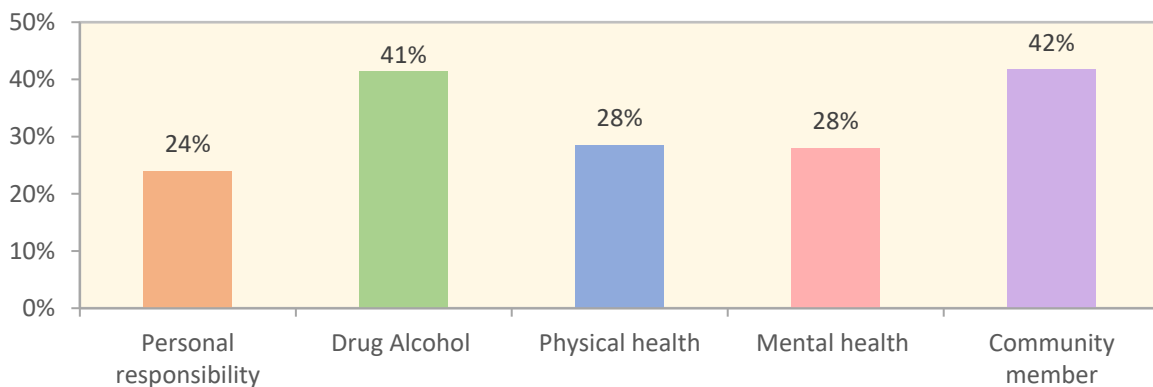
Table 6.6.6. Discharge status of patients with disabilities, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	3,520	58.7
Completed treatment	2,890	48.2
Left – satisfactory progress	630	10.5
Negative compliance	2,354	39.3
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	120	2.0

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

According to the Treatment Effectiveness Assessment (TEA) used to gauge recovery progress per the patients’ perspective at the time of discharge, 24% of patients with disabilities reported they were better at taking care of personal responsibilities (e.g., paying bills, following through on personal or professional commitments), 41% reported they were better with handling drug and alcohol use (e.g., the frequency and amount of use, money spent on drugs, amount of drug craving, being sick, etc.), 28% reported they were better in physical health (e.g., eating and sleeping properly, exercising, taking care of health or dental problems), 28% reported they were better in mental health (e.g., feeling good about themselves), and 42% reported they were a better community member (e.g., obeying laws, meeting your responsibilities to society, positive impact on others) compared to at admission (Figure 6.6.5).

Figure 6.6.5. Treatment Effectiveness Assessment (TEA) for patients with disabilities, FY2223



Lesbian, Gay, Bisexual, and Transgender (LGBTQ) Patients⁴

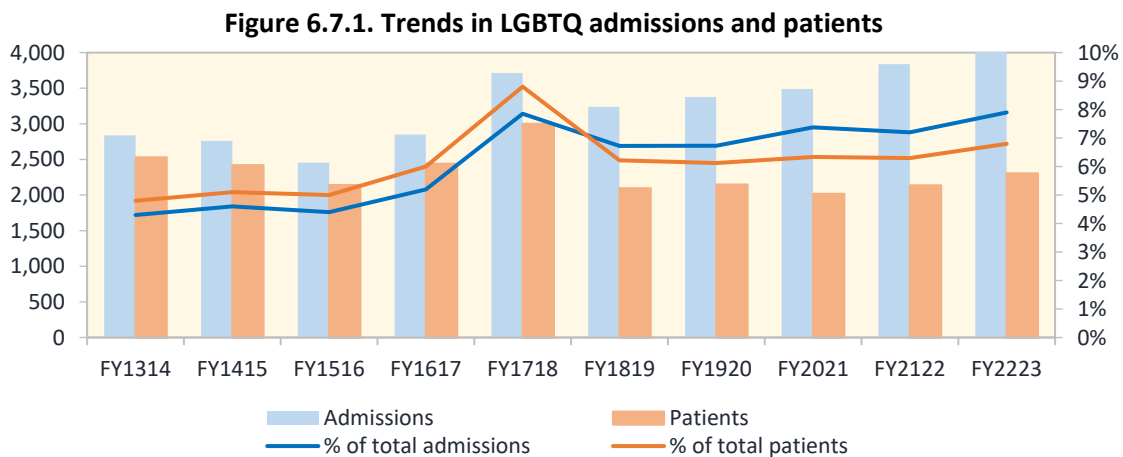
TREATMENT ADMISSIONS AND DISCHARGES

Patients reporting LGBTQ status (i.e., homosexual/gay/lesbian, bisexual, transgender, or unsure/questioning) accounted for 2,305 (6.8%) patients and 4,344 (7.9%) treatment admissions (Table 6.7.1).

Table 6.7.1. Treatment admissions and discharges among LGBTQ patients, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	4,344	7.9	2,305	6.8
Discharged	3,302	8.7	1,783	7.5

The proportion of LGBTQ patients reached its peak in FY1718 and has been steady in the last five fiscal years (Figure 6.7.1).



Note: Transgender people were included in the LGBTQ group in data collected from FY1718 to FY2223 but not in the other fiscal years.

PATIENT CHARACTERISTICS

Of the total of 2,305 LGBTQ patients, 88.9% identified as gay, lesbian, or bisexual and 9.7% identified as unsure/questioning. Additionally, 31.2% of transgender patients identified as heterosexual, and 50.7% identified as gay, lesbian, or bisexual.

LGBTQ patients were most commonly Latinx (50.6%) and White (27.0%), ages 26-34 (40.1%), and unemployed (71.9%). Among LGBTQ admissions, 70.5% reported having mental health issues, and among patients, 47.7% were homeless (Table 6.7.2).

⁴ Patients identified as “Transgender male” or Transgender female” in the gender identity question.

Table 6.7.2. Characteristics of LGBTQ patients, FY2223

CHARACTERISTIC		PATIENTS	%
GENDER IDENTITY	Male	1,087	47.9
	Female	1,036	45.6
	Transgender male	40	1.8
	Transgender female	99	4.4
	Non-conforming or refuse to state	9	0.4
RACE	Latinx	1,144	50.6
	White	611	27.0
	Black/African American	418	18.5
	Asian	42	1.9
	Pacific Islander	-	-
	American Indian/Alaska Native	17	0.8
	Other	23	1.0
AGE	17 and under	115	5.1
	18-25	253	11.3
	26-34	897	40.1
	35-44	589	26.3
	45-54	211	9.4
	55-64	152	6.8
	65+	20	0.9
SEXUAL ORIENTATION	Heterosexual	24	1.1
	Gay, lesbian, or bisexual	1,993	88.9
	Something else	-	-
	Unsure/questioning	217	9.7
	Prefer not to state	6	0.3
EDUCATION	Middle school or below	48	2.2
	Some high school	455	20.5
	High school completed	938	42.3
	Some college or beyond	777	35.0
EMPLOYMENT	Employed	523	12.3
	Unemployed (seeking)	1,861	43.7
	Unemployed (not seeking)	1,197	28.1
	Not in labor force	673	15.8
HOMELESS	Homeless at admission	1,099	47.7
MENTAL HEALTH ISSUES	Yes	2,991	70.5
	No	1,252	29.5
PHYSICAL HEALTH ISSUES	Yes	635	15.0
	No	3,588	85.0
DISABILITY	Yes	808	20.2
	No	3,190	79.8
CRIMINAL JUSTICE	Yes	923	21.7
	No	3,325	78.3

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
 N ≤ 5 not reported to protect confidentiality.



PRIMARY SUBSTANCE USE AT ADMISSION

The most commonly reported primary substance use among LGBTQ patients was methamphetamine (47.5%), followed by alcohol (24.9%) and prescription drug (9.6%) (Table 6.7.3).

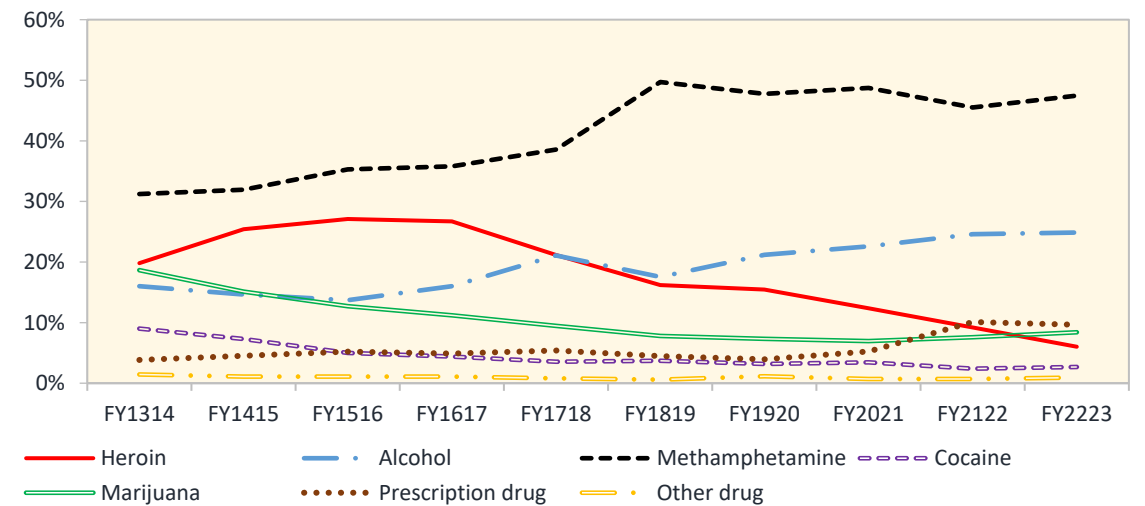
Table 6.7.3. Primary substance use among LGBTQ patients, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Methamphetamine	2,002	47.5
Alcohol	1,049	24.9
Prescription drug	407	9.6
Marijuana	355	8.4
Heroin	254	6.0
Cocaine	113	2.7
Other drugs	39	0.9

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

LGBTQ patients reported methamphetamine as the most common primary substance use over the last ten fiscal years. The proportion of LGBTQ patients reporting heroin as the primary substance use has decreased since FY1516, and the proportion reporting alcohol as the primary substance use has increased in contrast (Figure 6.7.2).

Figure 6.7.2. Trends in primary substance use among LGBTQ patients



LEVEL OF CARE

LGBTQ patients were most commonly admitted to residential service programs (39.4%), followed by outpatient programs (22.9%) and intensive outpatient programs (16.4%) (Table 6.7.4).

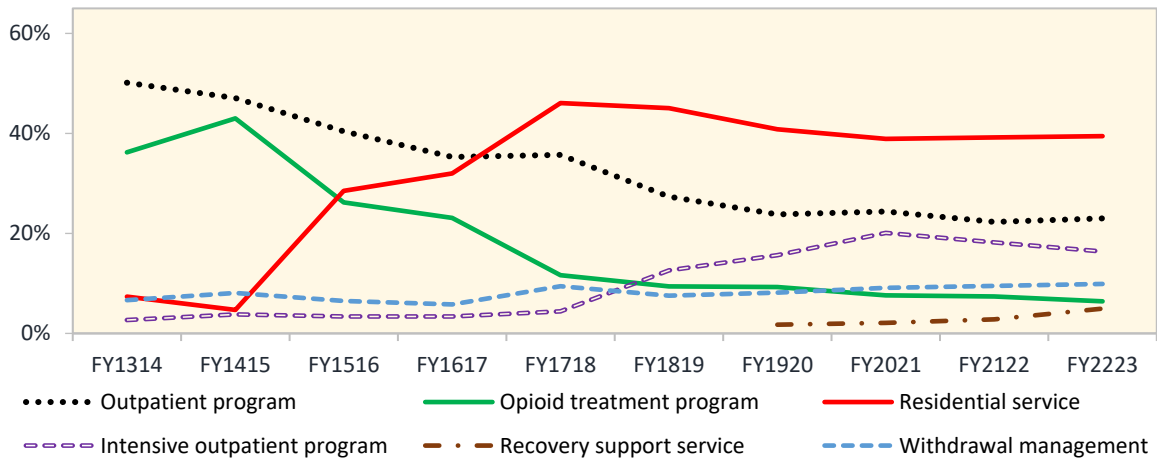
Table 6.7.4. Level of care among LGBTQ patients, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	427-	9.9
ASAM WM 1	-	-
ASAM WM 2	-	-
ASAM WM 3.2	300121	7.0
ASAM WM 3.7/4.0		2.8
Residential Service	1,702	39.4
ASAM 3.1	668	15.5
ASAM 3.3	6	0.1
ASAM 3.5	1,028	23.8
Intensive Outpatient (ASAM 2.1)	707	16.4
Outpatient	989	22.9
Opioid Treatment Program (ASAM OTP)	277	6.4
Recovery Support Service	214	5.0

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
N ≤ 5 not reported to protect confidentiality.

The proportion of LGBTQ patients admitted to outpatient programs showed a decreasing trend overall during the past ten fiscal years. The proportion admitted to residential service programs sharply increased from FY1415 to FY1718 then stabilized through FY2223, while the proportion admitted to opioid treatment programs has decreased steadily since FY1314 (Figure 6.7.3).

Figure 6.7.3. Trends in level of care among LGBTQ patients



DISCHARGE STATUS AND TREATMENT OUTCOMES AT DISCHARGE

Of the discharges among LGBTQ patients with discharge status, 56.6% had positive compliance, with 43.6% completing treatment and 13.0% leaving with satisfactory progress (Table 6.7.5).

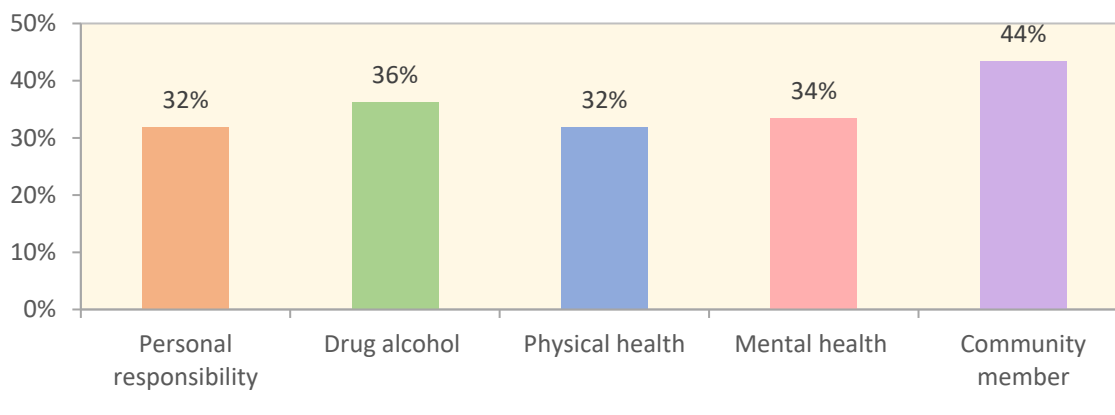
Table 6.7.5. Discharge status of LGBTQ patients, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	1,798	56.6
Completed treatment	1,384	43.6
Left – satisfactory progress	414	13.0
Negative compliance	1,288	40.6
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	90	2.8

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

According to the Treatment Effectiveness Assessment (TEA) used to gauge recovery progress per the patients’ perspective at the time of discharge, 32% of LGBTQ reported they were better at taking care of personal responsibilities (e.g., paying bills, following through on personal or professional commitments), 36% reported they were better with handling drug and alcohol use (e.g., the frequency and amount of use, money spent on drugs, amount of drug craving, being sick, etc.), 32% reported they were better in physical health (e.g., eating and sleeping properly, exercising, taking care of health or dental problems), 34% reported they were better in mental health (e.g., feeling good about themselves), and 44% reported they were a better community member (e.g., obeying laws, meeting your responsibilities to society, positive impact on others) compared to at admission (Figure 6.7.4).

Figure 6.7.4. Treatment Effectiveness Assessment (TEA) for LGBTQ patients, FY2223



Women of Reproductive Age

TREATMENT ADMISSIONS AND DISCHARGES

Patients who were women of reproductive age (15-49) accounted for 8,938 (26.5%) patients and 15,278 (27.9%) treatment admissions (Table 6.8.1).

Table 6.8.1. Treatment admissions and discharges among women of reproductive age, FY2223

	ADMISSIONS		PATIENTS	
	N	% Total	N	% Total
Admitted	15,278	27.9	8,938	26.5
Discharged	11,350	29.8	6,977	29.5

PATIENT CHARACTERISTICS

Patients who were women of reproductive age were most commonly Latinx (57.2%), ages 26-34 (42.3%), and unemployed (66.0%). Among admissions, 58.0% reported having mental health issues, and among patients, 37.7% were homeless (Table 6.8.2).

Table 6.8.2. Characteristics of women of reproductive age, FY2223

CHARACTERISTICS		PATIENTS	%
RACE	Latinx	5,094	57.2
	White	2,106	23.6
	Black/African American	1,420	15.9
	Asian	128	1.4
	Pacific Islander	16	0.2
	American Indian/Alaska Native	73	0.8
	Other	68	0.8
AGE	15-17	351	3.9
	18-25	1,116	12.5
	26-34	3,781	42.3v
	35-44	2,961	33.1
	45-49	729	8.2
SEXUAL ORIENTATION	Heterosexual	7,614	87.3
	Gay, lesbian, or bisexual	830	9.5
	Something else	-	-
	Unsure/questioning	67	0.8
	Prefer not to state	209	2.4
EDUCATION	Middle school or below	227	2.6
	Some high school	2,196	24.9
	High school completed	4,101	46.4
	Some college or beyond	2,306	26.1
EMPLOYMENT	Employed	2,527	16.6
	Unemployed (seeking)	6,231	41.0
	Unemployed (not seeking)	3,796	25.0
	Not in labor force	2,629	17.3

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.

REPRODUCTIVE WOMEN

Table 6.8.2. Characteristics of women of reproductive age, FY2223 (cont'd)

CHARACTERISTICS		PATIENTS	%
HOMELESS	Homeless at admission	3,374	37.7
MENTAL HEALTH ISSUES	Yes	8,792	58.0
	No	6,362	42.0
PHYSICAL HEALTH ISSUES	Yes	2,015	13.4
	No	12,998	86.6
DISABILITY	Yes	1,990	14.3
	No	11,951	85.7
CRIMINAL JUSTICE	Yes	2,534	16.7
	No	12,608	83.3
PREGNANCY	Pregnant at admission	457	5.1
	Pregnant at discharge	420	4.7
CHILDREN	Having children 17 and under	5,293	59.2

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PRIMARY SUBSTANCE USE AT ADMISSION

The most commonly reported primary substance use among women of reproductive age was methamphetamine (37.8%), followed by alcohol (26.6%) and prescription drug (13.7%) (Table 6.8.3).

Table 6.8.3. Primary substance use among women of reproductive age, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Methamphetamine	5,678	37.8
Alcohol	3,990	26.6
Prescription drug	2,060	13.7
Heroin	1,269	8.4
Marijuana	1,516	10.1
Cocaine	345	2.3
Other drugs	160	1.1

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

LEVEL OF CARE

Women of reproductive age were most commonly admitted to residential service programs (30.4%), followed by outpatient programs (6.9%) and intensive outpatient programs (14.7%) (Table 6.8.4).

Table 6.8.4. Level of care among women of reproductive age, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	1,360	9.0
ASAM WM 1	-	-
ASAM WM 2	-	-
ASAM WM 3.2	993363	6.5
ASAM WM 3.7/4.0		2.4
Residential Service	4,619	30.4
ASAM 3.1	1,802	11.9
ASAM 3.3	39	0.3
ASAM 3.5	2,778	18.3
Intensive Outpatient (ASAM 2.1)	2,229	14.7
Outpatient	4,077	26.9
Opioid Treatment Program (ASAM OTP)	1,731	11.4
Recovery Support Service	1,155	7.6

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

N ≤ 5 not reported to protect confidentiality.

DISCHARGE STATUS AND TREATMENT OUTCOMES AT DISCHARGE

Of the discharges among women of reproductive age with discharge status, 51.4% had positive compliance, with 38.9% completing treatment and 12.5% leaving with satisfactory progress (Table 6.8.5).

Table 6.8.5. Discharge status of women of reproductive age, FY2223

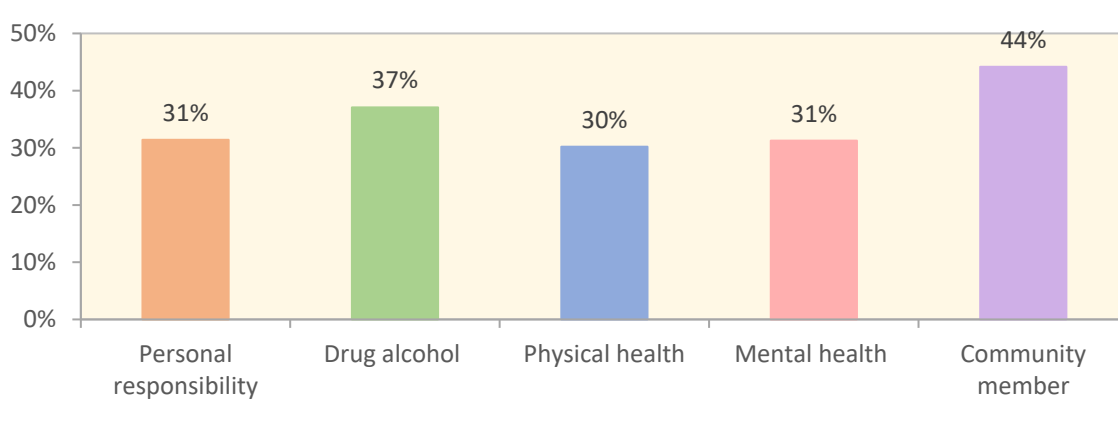
DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	5,452	51.4
Completed treatment	4,123	38.9
Left – satisfactory progress	1,329	12.5
Negative compliance	4,900	46.2
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	252	2.4

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

REPRODUCTIVE WOMEN

According to the Treatment Effectiveness Assessment (TEA) used to gauge recovery progress per the patients' perspective at the time of discharge, 31% of women of reproductive age reported they were better in taking care of personal responsibilities (e.g., paying bills, following through on personal or professional commitments), 37% reported they were better with handling drug and alcohol use (e.g., the frequency and amount of use, money spent on drugs, amount of drug craving, being sick, etc.), 30% reported they were better in physical health (e.g., eating and sleeping properly, exercising, taking care of health or dental problems), 31% reported they were better in mental health (e.g., feeling good about themselves), and 44% reported they were a better community member (e.g., obeying laws, meeting your responsibilities to society, positive impact on others) compared to at admission (Figure 6.8.1).

Figure 6.8.1. Treatment Effectiveness Assessment (TEA) for women of reproductive age, FY2223



Veterans

TREATMENT ADMISSIONS AND DISCHARGES

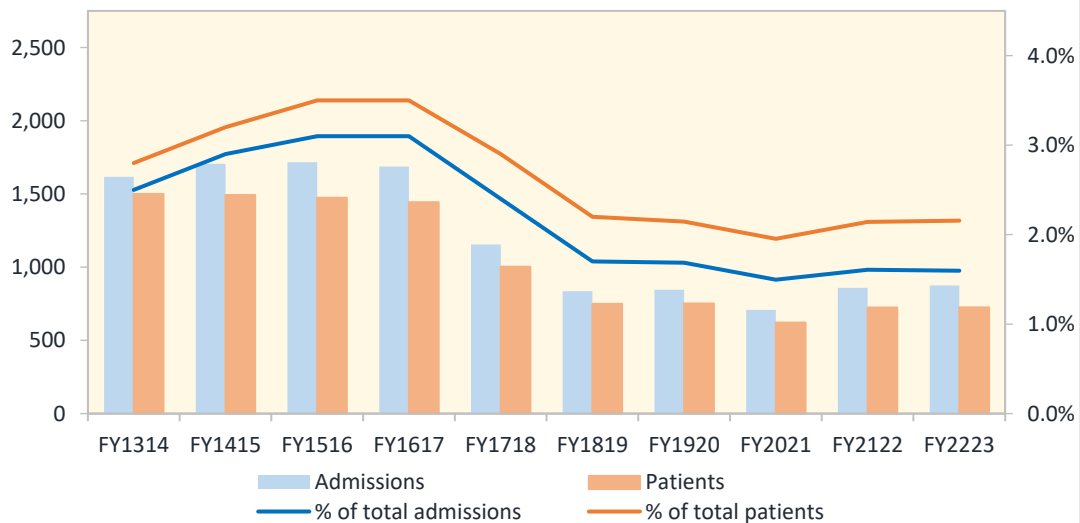
Patients who were veterans accounted for 726 (2.2%) patients and 875 (1.6%) treatment admissions (Table 6.9.1).

Table 6.9.1. Treatment admissions and discharges among veteran patients, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	875	1.6	726	2.2
Discharged	604	1.6	509	2.2

The proportion of veteran admissions and patients increased from FY1314 to FY1617, decreased through FY2021, and increased slightly since FY2122 (Figure 6.9.1).

Figure 6.9.1. Trends in admissions and patients among patients who were veterans



PATIENT CHARACTERISTICS

The majority of patients who were veterans were male (78.2%), Latinx (46.2%), ages 35-44 (25.9%), and unemployed (67.7%). Among veteran admissions, 55.6% had mental health issues, 24.1% had a disability and 40.1% were homeless (Table 6.9.2).

Table 6.9.2. Characteristics of patients who were veterans, FY2223

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	567	78.2
	Female	151	20.8
	Transgender male	-	-
	Transgender female	-	-
	Non-conforming or refuse to state	-	-
RACE	Latinx	335	46.2
	White	255	35.2
	Black/African American	107	14.8
	Asian	13	1.8
	Pacific Islander	-	-
	American Indian/Alaska Native	7	1.0
	Other	6	0.8
AGE	17 and under	-	-
	18-25	38	5.2
	26-34	183	25.2
	35-44	188	25.9
	45-54	122	16.8
	55-64	119	16.4
	65+	74	10.2
SEXUAL ORIENTATION	Heterosexual	605	88.6
	Gay, lesbian, or bisexual	57	8.3
	Something else	-	-
	Unsure/questioning	-	-
	Prefer not to state	15	2.2
EDUCATION	Middle school or below	14	1.9
	Some high school	76	10.6
	High school completed	354	49.2
	Some college or beyond	275	38.2
EMPLOYMENT	Employed	129	14.8
	Unemployed (seeking)	328	37.6
	Unemployed (not seeking)	263	30.1
	Not in labor force	153	17.5
HOMELESS	Homeless at admission	291	40.1
MENTAL HEALTH ISSUES	Yes	485	55.6
	No	388	44.4
PHYSICAL HEALTH ISSUES	Yes	148	17.0
	No	725	83.0
DISABILITY	Yes	203	24.1
	No	641	75.9
CRIMINAL JUSTICE	Yes	160	18.4
	No	711	81.6

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
N ≤ 5 not reported to protect confidentiality.

PRIMARY SUBSTANCE USE AT ADMISSION

The most common primary substance use reported at admission among veterans was alcohol (30.5%), followed by methamphetamine (25.6%) and heroin (22.5%) (Table 6.9.3).

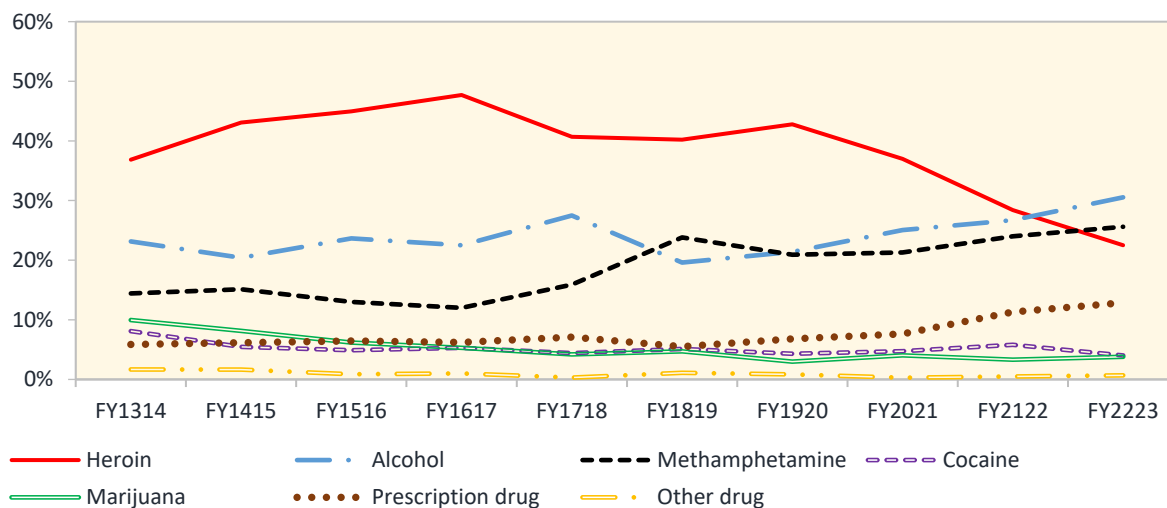
Table 6.9.3. Primary substance use among patients who were veterans, FY2223

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Alcohol	266	30.5
Methamphetamine	223	25.6
Heroin	196	22.5
Prescription drug	112	12.9
Cocaine	35	4.0
Marijuana	33	3.8
Other drugs	6	0.7

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
 N ≤ 5 not reported to protect confidentiality.

The proportion of patients who were veterans that reported heroin as the primary substance use increased from FY1314 to FY1617 then decreased through FY2223, though it remained the most common primary substance use for nine out of the past ten fiscal years. The proportion reporting primary methamphetamine use increased from FY1617 to FY1819 and remained relatively stable through FY2223 (Figure 6.9.2).

Figure 6.9.2. Trends in primary substance use among patients who were veterans



LEVEL OF CARE

Veteran patients were most commonly treated in residential service programs (29.0%), followed by opioid treatment programs (26.5%) and outpatient programs (19.7%) (Table 6.9.4).

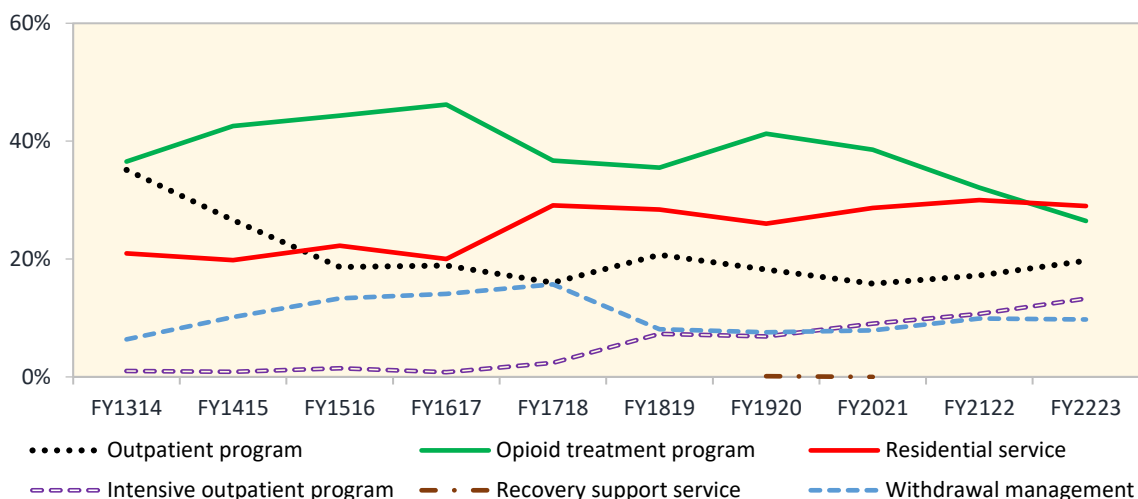
Table 6.9.4. Level of care among patients who were veterans, FY2223

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	85	9.7
ASAM WM 3.2	5629	6.43.3
ASAM WM 3.7/4.0		
Residential Service	253	29.0
ASAM 3.1	131	15.0
ASAM 3.5	121	13.9
Intensive Outpatient (ASAM 2.1)	116	13.3
Outpatient	172	19.7
Opioid Treatment Program (ASAM OTP)	231	26.5
Recovery Support Service	16	1.8

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
N ≤ 5 not reported to protect confidentiality.

The proportion of patients who were veterans and were admitted to opioid treatment programs increased continuously from FY1314 to FY1617, then decreased through FY2223, coupled with a roughly opposite movement in the proportion admitted to residential service program. The proportion admitted to outpatient programs exhibited an overall decreasing trend over the last nine fiscal years until FY2223, when it experienced a slight increase (Figure 6.9.3).

Figure 6.9.3. Trends in level of care among patients who were veterans



DISCHARGE STATUS AND TREATMENT OUTCOMES AT DISCHARGE

Of the discharges among patients who were veterans and had discharge status, 50.5% had positive compliance, with 38.9% completing treatment and 11.6% leaving with satisfactory progress (Table 6.9.5).

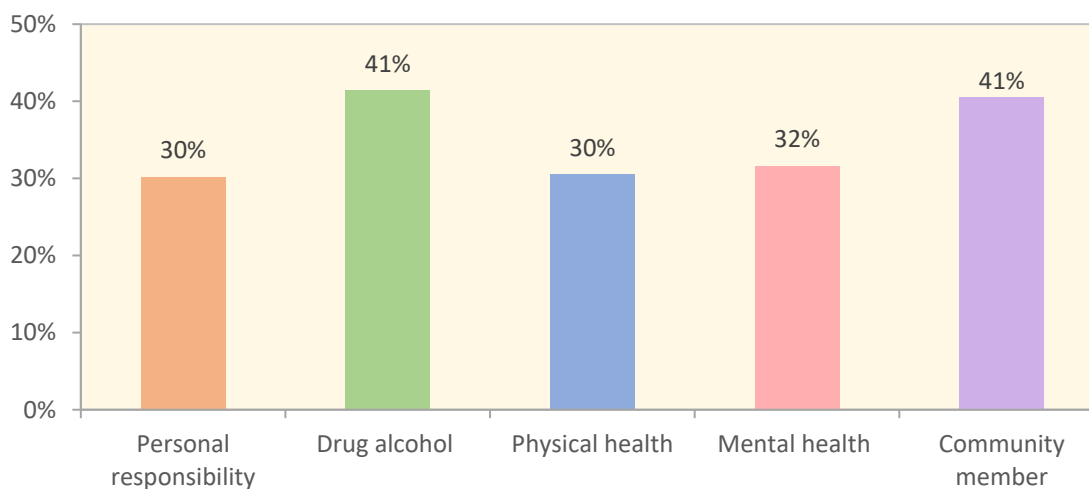
Table 6.9.5. Discharge status of patients who were veterans, FY2223

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	296	50.5
Completed treatment	228	38.9
Left – satisfactory progress	68	11.6
Negative compliance	274	46.8
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	16	2.7

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

According to the Treatment Effectiveness Assessment (TEA) used to gauge recovery progress per the patients’ perspective at the time of discharge, 30% of veterans reported they were better at taking care of personal responsibilities (e.g., paying bills, following through on personal or professional commitments), 41% reported they were better with handling drug and alcohol use (e.g., the frequency and amount of use, money spent on drugs, amount of drug craving, being sick, etc.), 30% reported they were better in physical health (e.g., eating and sleeping properly, exercising, taking care of health or dental problems), 32% reported they were better in mental health (e.g., feeling good about themselves), and 41% reported they were a better community member (e.g., obeying laws, meeting your responsibilities to society, positive impact on others) compared to at admission (Figure 6.9.4).

Figure 6.9.4. Treatment Effectiveness Assessment (TEA) for Veterans, FY2223



Patients Enrolled in My Health LA (MHLA) Program

TREATMENT ADMISSIONS AND DISCHARGES

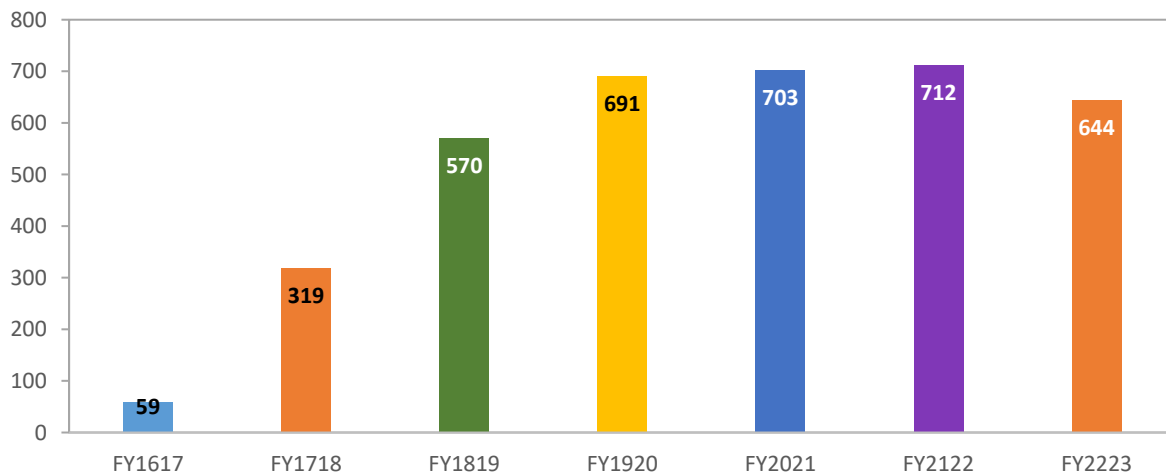
There were 644 (1.9%) patients enrolled in the MHLA program (MHLA patients) at admission, who accounted for 987 (1.8%) treatment admissions (Table 6.10.1).

Table 6.10.1. Treatment admissions among MHLA patients, FY2223

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	987	1.8	644	1.9
Discharged	886	2.3	539	2.3

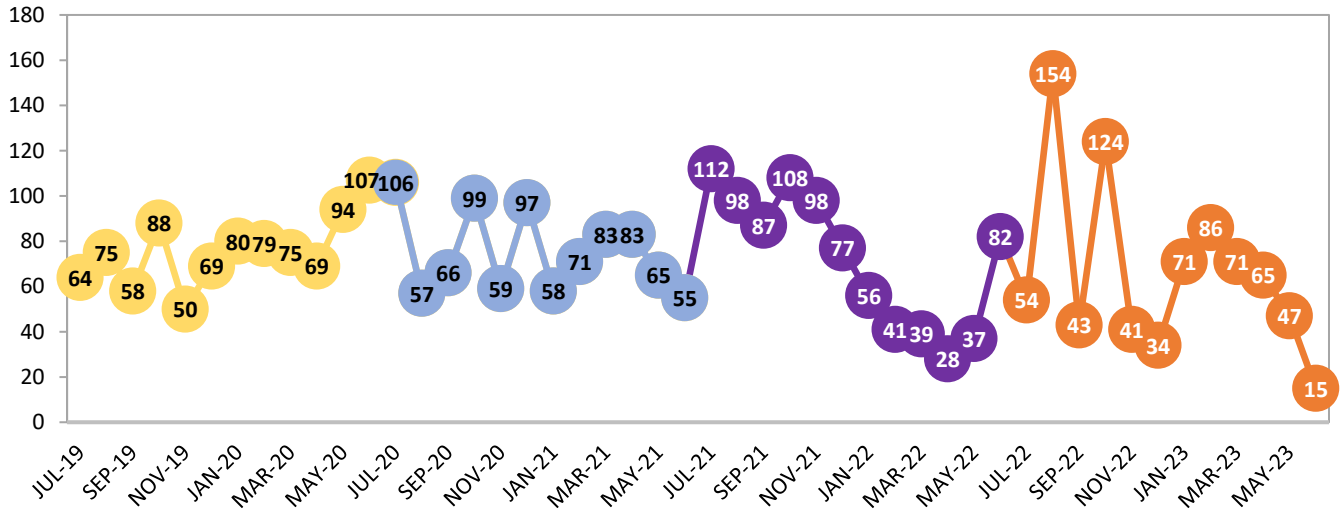
The number of MHLA patients experienced a significant increase of 1,071% from 59 in FY1617 to 691 in FY1920. The upward trend continued, although at a more moderate rate, thereafter. There was a 9.5% decrease from 712 in FY2122 to 644 in FY2223 (Figure 6.10.1).

Figure 6.10.1. Trend in MHLA patients, FY1617 - FY2223



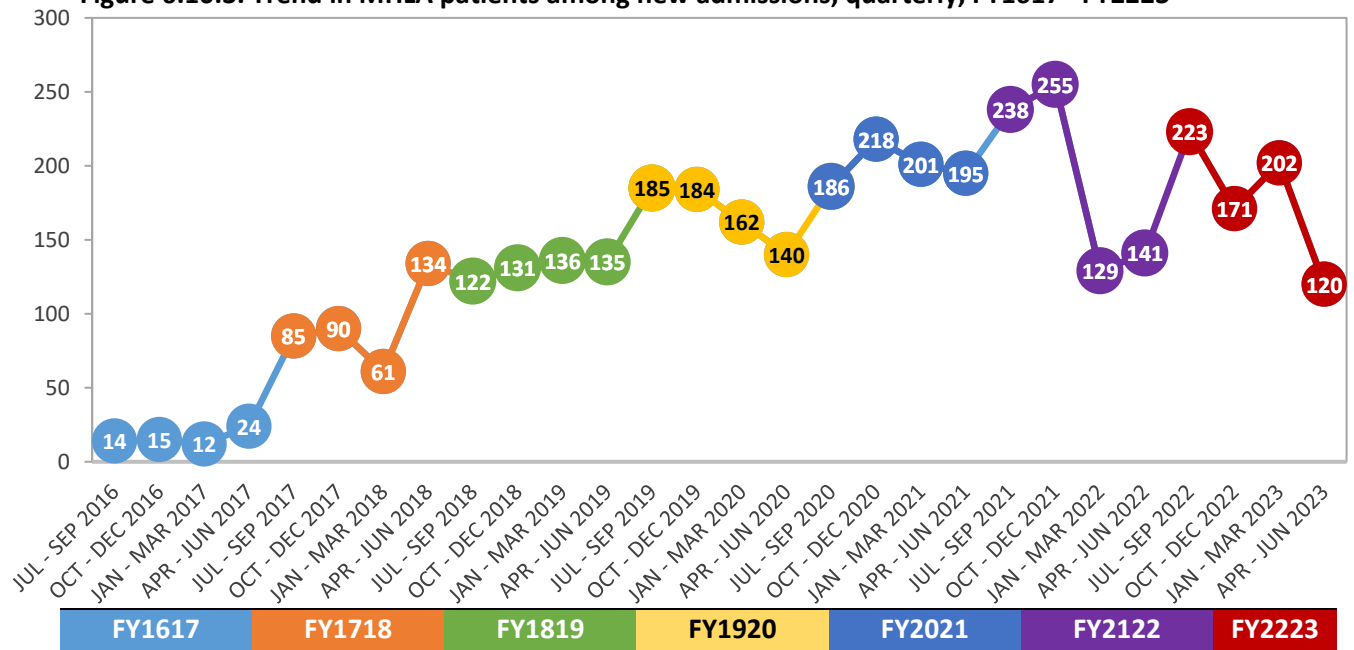
The monthly number of MHLA patients among new admissions decreased from 64 in July 2019 to 15 in June 2023 (Figure 6.10.2).

Figure 6.10.2. Trend in MHLA patient among new admissions, monthly, FY1920-FY2223



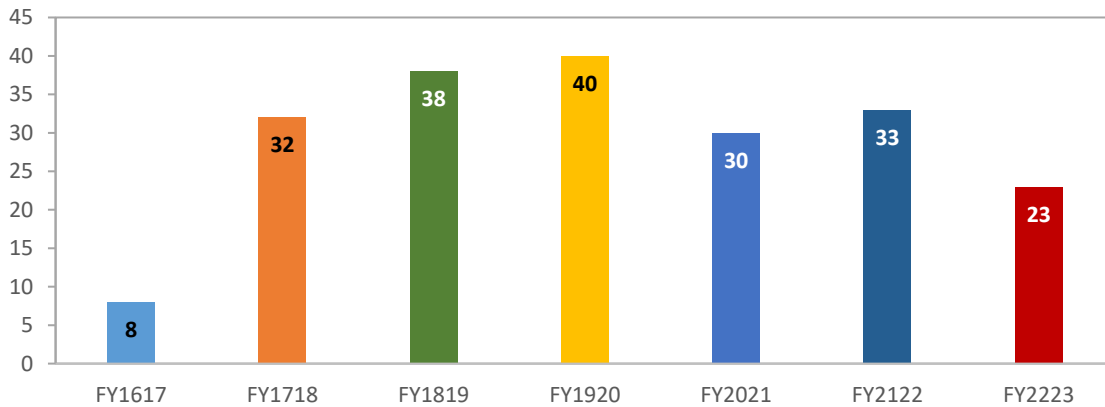
The quarterly number of MHLA patients among new admissions increased 1,721% from 14 in the first quarter of FY1617 to 255 in the second quarter of FY2122, then dropped 53% to 120 in the fourth quarter of FY2223 (Figure 6.10.3).

Figure 6.10.3. Trend in MHLA patients among new admissions, quarterly, FY1617– FY2223



The number of MHLA patients who were referred by MHLA clinics per referral source data increased from 8 in FY1617 to 40 in FY1920, then decreased to 23 in FY2223 (Figure 6.10.4).

Figure 6.10.4. Trend in MHLA clinic referrals among MHLA patients, FY1617- FY2223



PATIENT CHARACTERISTICS

The majority of the MHLA patients were male (70.3%), Latinx (93.2%), 35 to 44 (45.3%), and unemployed (62.0%) (Table 6.10.2).

Table 6.10.2. Characteristics of MHLA patients, FY2223

CHARACTERISTICS		%
GENDER IDENTITY	Male	70.3
	Female	29.5
	Transgender male	-
	Transgender female	-
	Non-conforming or refuse to state	-
RACE	Latinx	93.2
	White	4.3
	Black/African American	2.1
	Asian	-
	Pacific Islander	-
	Other	-
AGE	17 and under	-
	18-25	-
	26-34	42.9
	35-44	45.3
	45-54	11.8
	55-64	-
	65+	-
EDUCATION	Middle school or below	21.2
	Some high school	31.0
	High school completed	41.3
	Some college or beyond	6.6
EMPLOYMENT	Employed	29.6
	Unemployed (seeking)	45.7
	Unemployed (not seeking)	16.3
	Not in labor force	8.4

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
N ≤ 5 not reported to protect confidentiality.

PRIMARY SUBSTANCE USE AT ADMISSION

The most common primary substance use reported at admission among MHLA patients was methamphetamine (52.7%), followed by alcohol (37.3%) and marijuana (3.5%) (Table 6.10.3).

Table 6.10.3. Primary substance use among MHLA patients, FY2223

PRIMARY SUBSTANCE USE	%
Methamphetamine	52.7
Alcohol	37.2
Marijuana	3.5
Heroin	2.6
Prescription drug	2.5
Cocaine	1.4
Other drugs	-

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
N ≤ 5 not reported to protect confidentiality.

LEVEL OF CARE

MHLA patients were most commonly treated in outpatient programs (33.9%), followed by residential service programs (30.1%) and intensive outpatient programs (18.6%) (Table 6.10.4).

Table 6.10.4. Level of care among MHLA patients, FY2223

LEVEL OF CARE	%
Withdrawal Management	5.1
ASAM WM 3.2	3.9
ASAM WM 3.7/4.0	1.2
Residential Service	30.1
ASAM 3.1	17.8
ASAM 3.5	12.3
Intensive Outpatient (ASAM 2.1)	18.6
Outpatient	33.9
Opioid Treatment Program (ASAM OTP)	1.5
Recovery Support Service	10.8

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
N ≤ 5 not reported to protect confidentiality.

DISCHARGE STATUS AND TREATMENT OUTCOMES AT DISCHARGE

Of the discharges among MHLA patients who had discharge status, 67.2% had positive compliance, with 58.8% completing treatment and 8.5% leaving with satisfactory progress (Table 6.10.5).

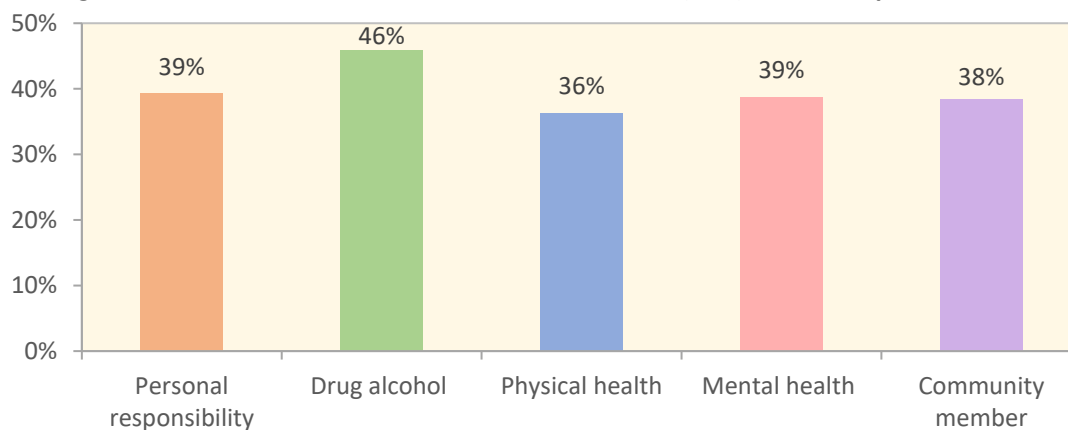
Table 6.10.5. Discharge status of MHLA patients, FY2223

DISCHARGE STATUS	%
Positive compliance	67.2
Completed treatment	58.8
Left – satisfactory progress	8.5
Negative compliance	29.6
(Left – unsatisfactory progress)	
Other (Death/incarceration/other)	3.2

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

According to the Treatment Effectiveness Assessment (TEA) used to gauge recovery progress per the patients’ perspective at the time of discharge, 39% of MHLA patients reported they were better in taking care of personal responsibilities (e.g., paying bills, following through on personal or professional commitments), 46% reported they were better with handling drug and alcohol use (e.g., the frequency and amount of use, money spent on drugs, amount of drug craving, being sick, etc.), 36% reported they were better in physical health (e.g., eating and sleeping properly, exercising, taking care of health or dental problems), 39% reported they were better in mental health (e.g., feeling good about themselves), and 38% reported they were a better community member (e.g., obeying laws, meeting your responsibilities to society, positive impact on others) compared to at admission (Figure 6.10.5).

Figure 6.10.5. Treatment Effectiveness Assessment (TEA) for MHLA patients, FY2223





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