

I: State Information

State Information

I. State Agency for the Block Grant

Agency Name

Organizational Unit

Mailing Address

City

Zip Code

II. Contact Person for the Block Grant

First Name

Last Name

Agency Name

Mailing Address

City

Zip Code

Telephone

Fax

Email Address

III. Expenditure Period

State Expenditure Period

From

To

Block Grant Expenditure Period

From

To

IV. Date Submitted

Submission Date

Revision Date

V. Contact Person Responsible for Report Submission

First Name

Last Name

Telephone

Fax

Email Address

VI. Contact Person Responsible for Substance Abuse Data

First Name

Last Name

Telephone 208-334-6542

Email Address pappint@dhw.idaho.gov

footnote:

II: Annual Report

Table 2 - State Priorities

Number	Title	Description
1	Priority Area - Mental Health - Adults:	Idaho's Division of Behavioral Health's (DBH) Adult Mental Health (AMH) program will provide a comprehensive, consumer-driven, client-centered, recovery-focused continuum of care for adults with a serious mental illness (SMI) or a SMI and a co-occurring substance use disorder (SUD).
2	Priority Area - Mental Health - Children	Idaho will provide a comprehensive, family-driven, recovery-focused, client-centered continuum of care for families and children and youth with a serious emotional disorder (SED) with or without a co-occurring substance use disorder diagnosis.
3	Priority Area - Substance Abuse Prevention	Idaho will provide evidence-based substance abuse primary prevention services to youth and adults.
4	Priority Area - Substance Abuse Treatment	Idaho will provide evidence-based substance abuse treatment services for youth and adults.
5	Priority Area - Behavioral Health System Issues	In the next two years, the State Mental Health Planning Council will be replaced by the State Behavioral Health Council, and the Regional Mental Health Advisory Boards and Regional Advisory Councils (SUD) will merge to become Regional Behavioral Health Community Development Boards. The Behavioral Health Transformation Work Group's proposed Array of Core Services (see Unmet Needs section) will be adopted and implemented for each region. As transformation progresses, Regions will be responsible to develop and implement approved Regional Transformation Plans that address unique needs and resources in each region.
6	Priority Area -Data and Quality Assurance	The State of Idaho will manage the public behavioral health system with a focus on quality assurance, service outcomes and development of a robust data infrastructure system capable of capturing and extracting data to help guide service system development and implementation
7	Priority Area - Substance Abuse Treatment	Idaho will provide substance abuse assessment and treatment services to eligible adults and children with substance use disorder diagnoses who are also intravenous drug users.
8	Priority Area - Substance Abuse Treatment - Tuberculosis	Idaho will provide substance abuse assessment and treatment to adults and children who are diagnosed with substance use disorders and who are also diagnosed with tuberculosis.

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II: Annual Report

Table 3 - Objectives, Strategies and Performance Indicators

Priority: Priority Area -Mental Health - Adults:

Goal of the priority area:

1. Goal: Increase awareness of mental health issues for children and families; decrease stigma and increase early access to information, education and other prevention activities.

Strategies to attain the goal:

a.Strategy: The DBH Family Supports Contract requirements will include community outreach to youth groups to educate and create awareness of mental health issues.

i.Performance Indicator: The DBH Family Supports Contract requirements will include mental health awareness/anti-stigma activities that are advertised in various venues, including the schools and state agencies, throughout the state by June 30, 2013.

b.Strategy: The DBH Family Supports Contract requirements will include providing Idaho youth with emotional and behavioral disturbances with education and support groups throughout the state.

i.Performance Indicator: The DBH Family Supports Contract requirements will include holding a minimum of one (1) support group per region in the state, every other month, for youth ages 8 through 19 with emotional or behavioral disturbances beginning in SFY 2012 and throughout SFY 2013 by 6/30/13.

ii.Performance Indicator: The DBH Family Supports Contract requirements will include holding a minimum of one (1) education group per region in the state, every other month, for youth ages 8 through 19 with emotional or behavioral disturbances beginning in SFY 2012 and throughout SFY 2013 by 6/30/13.

Annual Performance Indicators to measure goal success

Indicator: See strategy above for performance indicators for outreach, education and support by 6/30/13.

Description of Collecting and Measuring Changes in Performance Indicator:

See CCHH Final Goals in Section IV Dashboard Narrative Goals for specific detail.

The Division of Behavioral Health's Central Office will track the number of trainings, number of participants and locations of the contracted Family Supports providers' education and support groups to eligible Idaho youth through the providers' submitted monthly reports.

Achieved: N/A

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Mental Health - Adults:

Goal of the priority area:

2. Goal: The state will implement the SSI/SSDI Outreach, Access, and Recovery (SOAR) program in three (3) of the seven (7) Department of Health and Welfare regions.

Strategies to attain the goal:

a. Strategy: The State and Community SOAR Leads will educate the regions about SOAR and provide a protocol for the regions to follow as they develop the SOAR process in their communities.

Annual Performance Indicators to measure goal success

Indicator: Performance Indicator: At least one (1) Region will have appointed a Regional SOAR Lead, collaborated with their local Social Security Administration (SSA) office, and trained at least 25 Case managers by June 30, 2012.

Description of Collecting and Measuring Changes in Performance Indicator:

ii. Performance Indicator: At least two (2) additional regions will have appointed a Regional SOAR Lead, collaborated with their local SSA office, and trained at least 25 case managers in their region by June 30, 2013.

As of December 12, 2011, there was an established SOAR lead in Regions 3, 4 and 5 with at least 25 case managers trained in each region. The target date for this performance indicator was June 30, 2013, but this goal has already been achieved.

For detailed report, please see the upload of CCHH Final Goals in Section IV, Dashboard, Narrative Goals.

Achieved: N/A

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Mental Health - Adults:

Goal of the priority area:

Consumers and family members will have input into the behavioral health service system planning and service implementation.

Strategies to attain the goal:

The DBH service centers will use Evidenced-Based Practices that promote consumer choice in all aspects of service delivery.

Annual Performance Indicators to measure goal success

Indicator: DBH will continue to support at least 18 state and/or contract-employed Certified Peer Specialists through state general and federal grant funds through PATH, ID-HOPE, and ACT by June 30, 2013.

Description of Collecting and Measuring Changes in Performance Indicator:

Central Office Division of Behavioral Health will track the number of Certified Peer Specialists employed through regional ACT teams, PATH teams and on the Idaho Home Outreach Program for Empowerment's (ID-HOPE) Critical Time Intervention team through monthly reports from the Office of Consumer and Family Affairs and from the ID-HOPE project.

Achieved: N/A

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Mental Health - Adults:

Goal of the priority area:

Increase linkages for referral and collaboration between primary care providers and behavioral health care providers.

Strategies to attain the goal:

The DBH will meet with the Department of Public Health and primary care providers to identify collaborative opportunities to meet the needs of Idaho adults.

Annual Performance Indicators to measure goal success

Indicator: DBH will meet with the Idaho Primary Care Association at least two (2) times to identify needs of shared behavioral and primary health care adult clients and collaborative opportunities between programs by June 30, 2012.

Description of Collecting and Measuring Changes in Performance Indicator:

The Division of Behavioral Health will track the number of meetings with the Idaho Primary Care Association and also maintain a dated participant sign-in sheet.

Achieved: N/A

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Mental Health - Adults:

Goal of the priority area:

The state will implement the SSI/SSDI Outreach, Access, and Recovery (SOAR) program in three (3) of the seven (7) Department of Health and Welfare regions.

Strategies to attain the goal:

The State and Community SOAR Leads will educate the regions about SOAR and provide a protocol for the regions to follow as they develop the SOAR process in their communities.

Annual Performance Indicators to measure goal success

Indicator: At least one (1) Region will have appointed a Regional SOAR Lead, collaborated with their local Social Security Administration (SSA) office, and trained at least 25 Case managers by June 30, 2012

Description of Collecting and Measuring Changes in Performance Indicator:

The Division of Behavioral Health's Central Office will track and maintain a list of Regional SOAR leads and SOAR trainings. Participants in SOAR trainings will sign a dated sign-in sheet.

Achieved: N/A

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Mental Health - Children

Goal of the priority area:

Increase awareness of mental health issues for children and families; decrease stigma and increase early access to information, education and other prevention activities.

Strategies to attain the goal:

The DBH Family Supports Contract requirements will include providing Idaho youth with emotional and behavioral disturbances with education and support groups throughout the state.

Annual Performance Indicators to measure goal success

Indicator: The DBH Family Supports Contract requirements will include holding a minimum of one (1) support group and (1) education group per region in the state, every other month, for youth ages 8 through 19 with emotional or behavioral disturbances beginning in SF

Description of Collecting and Measuring Changes in Performance Indicator:

The DBH Central Office will track the number of trainings, number of participants and locations of the contracted Family Supports provider's education and support groups to eligible Idaho youth through the provider's submitted monthly reports.

Achieved: N/A

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Mental Health - Children

Goal of the priority area:

Increase linkages between primary care providers and behavioral health care providers

Strategies to attain the goal:

The DBH will meet with the Department of Public Health and primary care providers to identify collaborative opportunities to meet the needs of Idaho children and families.

Annual Performance Indicators to measure goal success

Indicator: DBH will meet with the Idaho Primary Care Association at least two (2) times to identify needs of shared behavioral and primary healthcare child and family clients and collaborative opportunities between programs by June 30, 2012.

Description of Collecting and Measuring Changes in Performance Indicator:

The DBH Central Office will track the number of meetings held with the Idaho Primary Care Association through dated sign in sheets.

Achieved: N/A

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Mental Health - Children

Goal of the priority area:

The Department of Behavioral Health (DBH) will implement parent support services for children with emotional and behavioral disturbances and their parents and families.

Strategies to attain the goal:

Strategy: The DBH Family Supports Contract will help educate and prepare parents of children and adolescents with an emotional or behavioral disorder, including substance use, to become better advocates and representatives for themselves. This also includes educating and supporting children and adolescents with these disorders.

Annual Performance Indicators to measure goal success

Indicator: The DBH Family Supports Contract will require implementation of at least 15 parent education/self-advocacy groups throughout the state by June 30, 2013.

Description of Collecting and Measuring Changes in Performance Indicator:

The DBH Central Office will track the number of trainings, number of participants and locations of the contracted Family Supports provider's parent education and support groups to eligible Idaho parents through the provider's submitted monthly reports.

Achieved: N/A

Proposed Changes:

[Empty text box for proposed changes]

Reason Not Achieved:

[Empty text box for reason not achieved]

Priority: Priority Area - Substance Abuse Prevention

Goal of the priority area:

DBH will contract with a provider manager to recruit, train, and maintain a provider pool in order to reduce the substance abuse rate in Idaho through prevention services.

Strategies to attain the goal:

The DBH will contract with the substance abuse prevention provider who will be expected to fund community-based entities to deliver substance abuse prevention education to youth in general.

Annual Performance Indicators to measure goal success

Indicator: The DBH contract with the provider manager will require at least (1) evidence-based program in each of at least 30 Idaho elementary, middle schools, and high schools by July 30, 2012.

Description of Collecting and Measuring Changes in Performance Indicator:

The DBH Central Office will monitor the programs and substance abuse prevention education opportunity through review of monthly reports submitted by the contractor (Benchmark) responsible to oversee these activities.

Achieved: Yes

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area - Substance Abuse Prevention

Goal of the priority area:

The DBH contract with the prevention services manager will require that they recruit, train and maintain a community-based prevention provider pool to reduce the substance abuse rate in Idaho through the delivery of prevention services.

Strategies to attain the goal:

The DBH prevention services management contractor will be required to fund community-based prevention providers to deliver evidence-based parenting education to adults in Idaho.

Annual Performance Indicators to measure goal success

Indicator: The DBH contract with the prevention services manager will require at least 25 evidence-based parenting education programs be offered to adults throughout Idaho. A minimum of 2 parenting education programs will be offered per region

Description of Collecting and Measuring Changes in Performance Indicator:

All data will be collected on the www.preventionidaho.net website. The prevention services management contractor will be required by June 1, 2012 to submit a draft parenting education Regional Service Plan to DBH for approval prior to initiation of funding agreement and will be required to submit a final Regional Services Plan on programs funded by Sept.1, 2012. All funded parenting education programs will be evidence-based.

Achieved: Yes

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Substance Abuse Treatment

Goal of the priority area:

Assess appropriate substance abuse level of care, length of stay and access to treatment

Strategies to attain the goal:

The Management Services Contractor Business Psychology Associates (BPA)performs initial screenings for SA assessment by SUD providers. Screening and referral includes identifying which SAPT population the client meets (e.g., IVDU, pregnant women, PWWC, etc.); determining financial eligibility for state funded services; determining clinical eligiblity via the GAIN short screener; referring eligible clients to a DHW SUD provider for a full GAIN. GAIN results are submitted to BPA and they review and either voucher SA services at a clinically appropriate level of care or deny further treatment if the individual does not meet ASAM PPC-2R criteria.

Annual Performance Indicators to measure goal success

Indicator: Continue to monitor BPA assessment process via quarterly BPA contract monitoring.

Description of Collecting and Measuring Changes in Performance Indicator:

The Management Services Contractor Business Psychology Associates (BPA)performs initial screenings for SA assessment by SUD providers. Screening and referral includes identifying which SAPT population the client meets (e.g., IVDU, PWWC, etc.); determining financial eligibility for state funded services; determining clinical eligiblity via the GAIN short screener; referring eligible clients to a DHW SUD provider for a full GAIN. GAIN results are submitted to BPA and they review and either voucher SA services at a clinically appropriate level of care or deny further treatment if the individual does not meet ASAM PPC-2R criteria. The Division of Behavioral Health holds the contract with BPA and provides ongoing oversight and quality assurance to the assessment process.

Achieved: Yes

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Substance Abuse Treatment

Goal of the priority area:

Develop a comprehensive plan for Substance Use Disorder (SUD) services to clients whose services are funded through Substance Abuse Prevention and Treatment (SAPT) block grant funds.

Strategies to attain the goal:

Develop treatment criteria for determining Level of Care (LOC), Length of Stay (LOS), and access to treatment.

Annual Performance Indicators to measure goal success

Indicator: SUD will use the developed assessment tools to gather baseline data on the existing SUD provider network and on the existing SUD service population by June 30, 2013

Description of Collecting and Measuring Changes in Performance Indicator:

Once a written tool has been developed to assess level of care, length of stay and access to treatment, this tool will be used with existing SUD providers. Data will be gathered by the service contractor, Business Psychology Associates, and provided to DBH's Central Office.

Achieved: Yes

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Substance Abuse Treatment

Goal of the priority area:

Improve screening and identification of IVDU block grant clients.

Strategies to attain the goal:

Develop an improved process to provide services to priority population (block grant) IVDU clients that present with the most severity and need of services to ensure efficient utilization of block grant funds. The Division of Behavioral Health (DBH) and Business Psychology Associates (BPA) will collaborate to develop an improved screening process for potential IVDU clients. DBH's Substance Use Disorder (SUD) program will draft a more precise definition of IVDU eligibility criteria that BPA will use with clients during the intake process. SUD will train BPA clinical intake staff to use the new IVDU tool to effectively identify IVDU clients with severe need.

Annual Performance Indicators to measure goal success

Indicator: SUD will draft a precise definition of eligibility criteria for IVDU clients by 6/30/12. SUD will train BPA staff to use this by 6/30/12.

Description of Collecting and Measuring Changes in Performance Indicator:

Develop an improved process to provide services to priority population (block grant) IVDU clients that present with the most severity and need of services to ensure efficient utilization of block grant funds. The Division of Behavioral Health (DBH) and Business Psychology Associates (BPA) will collaborate to develop an improved screening process for potential IVDU clients. DBH's Substance Use Disorder (SUD) program will draft a more precise definition of IVDU eligibility criteria that BPA will use with clients during the intake process. SUD will train BPA clinical intake staff to use the new IVDU tool to effectively identify IVDU clients with severe need.

Achieved: Yes

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Substance Abuse Treatment

Goal of the priority area:

Improve screening and identification of tuberculosis (TB) clients with SA.

Strategies to attain the goal:

The Division of Behavioral Health will work with the Web Infrastructure Treatment Services (WITS) vendor, FEI, to develop WITS data system capability to track individuals with tuberculosis receiving services through the SSA.

Annual Performance Indicators to measure goal success

Indicator: All new SA client information, including whether the person had a TB test in the past & results of TB tests, will be data entered into WITS by 7/1/12. WITS will track TB status for clients with SA services by 6/30/13.

Description of Collecting and Measuring Changes in Performance Indicator:

The Division of Behavioral Health's Central Office will be responsible to negotiate WITS system development with the vendor, FEI, to include the capability to track substance use disorder client information that includes information on client TB testing and results. When the WITS system is implemented for this purpose, Central Office staff will be responsible to track TB data on individuals receiving substance use disorder services through the SSA.

Achieved: Yes

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Substance Abuse Treatment

Goal of the priority area:

Increase the PWWC provider network by at least one additional regional provider

Strategies to attain the goal:

The Division of Behavioral Health (DBH) and Business Psychology Associates (BPA) will collaborate in efforts to identify potential Region 2 PWWC providers. DBH and BPA will work with the identified Region 2 provider to develop a new pregnant women, women with children (PWWC) program in Region 2 in order to expand the existing Idaho PWWC provider network.

Annual Performance Indicators to measure goal success

Indicator: Identify a potential PWWC Region 2 provider by 6/30/12. Increase the PWWC provider network by at least one additional regional provider in Region 2 by 6/30/13.

Description of Collecting and Measuring Changes in Performance Indicator:

The Division of Behavioral Health (DBH) and Business Psychology Associates (BPA) will collaborate in efforts to identify potential Region 2 PWWC providers. DBH and BPA will work with the identified Region 2 provider to develop a new pregnant women, women with children (PWWC) program in Region 2 in order to expand the existing Idaho PWWC provider network. DBH and BPA will monitor these efforts; once a

contract has been finalized, BPA will gather data and DBH will monitor and provide oversight to BPA.

Achieved: Yes

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Substance Abuse Treatment

Goal of the priority area:

Maintain available safe and sober housing resources for adults

Strategies to attain the goal:

The Division of Behavioral Health's (DBH) contract with Business Psychology Associates (BPA) to manage SA service providers includes oversight of 12 adult safe and sober housing (SSH) providers with 28 sites in Idaho. Region 6 has only one adult SSH program and Region 5 has no adult SSH program. The DBH will collaborate with BPA and regional resources to identify at least 2 potential providers by 6/30/2012 and approve at least 1 adult SSH provider by 6/30/13 in Region 5.

Annual Performance Indicators to measure goal success

Indicator: Identify at least 2 potential adult SSH providers (Region 5 or 6) by 6/30/12. Approve at least one adult SSH provider in R 5 by 6/30/13.

Description of Collecting and Measuring Changes in Performance Indicator:

The Division of Behavioral Health's (DBH) contract with Business Psychology Associates (BPA) to manage SA service providers includes oversight of 12 adult safe and sober housing (SSH) providers with 28 sites in Idaho. Region 6 has only one adult SSH program and Region 5 has no adult SSH program. The DBH will collaborate with BPA and regional resources to identify at least 2 potential providers by 6/30/2012 and approve at least 1 adult SSH provider by 6/30/13 in Region 5.

Achieved: Yes

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Substance Abuse Treatment

Goal of the priority area:

SUD will begin to move the provider network to a more client-driven system of treatment based on the Recovery Oriented Systems of Care model of service delivery.

Strategies to attain the goal:

SUD will develop written tools to evaluate provider service delivery and how well SUD services meet client needs, as measured by client responses to satisfaction surveys.

Annual Performance Indicators to measure goal success

Indicator: SUD will develop a baseline for SUD client satisfaction using responses from the client satisfaction tool by June 30, 2013.

Description of Collecting and Measuring Changes in Performance Indicator:

Once a written SUD client satisfaction tool has been developed, the provider that manages the private provider SUD network (i.e., Business Psychology Associates) will ensure that SUD clients receive an opportunity to respond to the client satisfaction survey. Business Psychology Associates will gather the data and have it available for DBH's Central Office.

Achieved: No

Proposed Changes:

The new contract included a requirement that the SUD Treatment Services Management company conduct an annual customer satisfaction survey. This contract start date was July 1, 2013. So the survey will be initiated during FY 2014. This will be an ongoing contract requirement.

Reason Not Achieved:

The implementation of the survey was delayed one year, because the contract with the SUD Treatment Services Management contract was up for bid. The decision was made to delay the initiation of the survey until the new contract was awarded and include the survey requirement in the management contract. The SUD Treatment Services Management Contract has been awarded and the contract is now in full force.

Priority: Priority Area -Substance Abuse Treatment

Goal of the priority area:

SUD will collaborate with Family and Children's Services (FACS) on the treatment of shared clients (i.e., clients with open child protection cases and SUD diagnoses).

Strategies to attain the goal:

FACS staff (including Child Protection Services (CPS) Liaisons) will work with the DBH SUD program on issues related to clients with open child protection cases and SUD diagnoses through at least quarterly meetings.

Annual Performance Indicators to measure goal success

Indicator: FACS staff, including CPS liaisons and SUD program specialists will participate in at least three quarterly meetings to discuss issues related to collaborative service delivery and care coordination to clients with open child protection cases and SUD diag

Description of Collecting and Measuring Changes in Performance Indicator:

The DBH Central Office will track the number, dates, topics and participants involved in at least quarterly meetings.

Achieved: Yes

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Behavioral Health System Issues

Goal of the priority area:

By June 30, 2013, and as transformation progresses, regions will be responsible to develop and implement approved Regional Transformation Plans that address unique needs and resources in each region.

Strategies to attain the goal:

Develop a Behavioral Health Interagency Cooperative (Cooperative) subcommittee to propose a structure for Regional Behavioral Health Development Boards (Regional Boards), including expectations of Regional Board roles and responsibilities.

Annual Performance Indicators to measure goal success

Indicator: A written report describing the proposed board structure, roles and responsibilities will be presented to the Cooperative by June 30, 2012.

Description of Collecting and Measuring Changes in Performance Indicator:

The assigned trial test regions will keep minutes of meeting dates, participants and topics discussed, including expectations of Regional Board roles and responsibilities to report back to the Cooperative.

Achieved: Yes

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Behavioral Health System Issues

Goal of the priority area:

By June 30, 2013, the Regional Mental Health Advisory Boards and Regional Advisory Councils (SUD) will merge to become Regional Behavioral Health Community Development Boards.

Strategies to attain the goal:

All Regional Advisory Councils and Regional Mental Health Boards will sunset by June 30, 2012. Both of these former types of councils/boards will merge to become Regional Behavioral Health Community Development Boards.

Annual Performance Indicators to measure goal success

Indicator: The Regional Boards will identify regional needs, plans to develop regional capacity, and plans to provide input into regional behavioral health service provision by June 30, 2013.

Description of Collecting and Measuring Changes in Performance Indicator:

Regional Substance Abuse and Mental Health Boards will merge into one Behavioral Health entity by June 30, 2012. Regional Boards will identify written needs and plans by June 30, 2013.

Achieved: No

Proposed Changes:

While the legislation integrating the Council and Boards was not passed in SFY 2013, a foundation was laid to facilitate this change with a two day SAMHSA sponsored technical assistance planning event with the State Mental Health Planning Council in July 2013. Following this a two day meeting of the Council's executive committee members and Substance Use Disorder Treatment and Substance Abuse Prevention consumers and leaders was held in October 2013 to develop a detailed action plan for integration into a Behavioral Health Council.

The Legislation to integrate the boards and establish regional boards has been re-submitted to the FY 2014 Legislature. The State Mental Health Planning Council will continue to add consumers, community and family member representatives from Substance Use Disorder Treatment and Substance Abuse Prevention. At the regional level, the Regional Mental Health Advisory Boards and Regional Substance Abuse Advisory Councils have begun meeting jointly. If the legislation passes, the two groups will merge to become Regional Behavioral Health Community Development Boards. The Behavioral Health Transformation Work Group will work to implement an Array of Core Services in each region.

Reason Not Achieved:

This goal was not achieved because the Idaho Legislature did not to pass the Division of Behavioral Health's proposed legislation to authorize the establishment of a State Behavioral Health Council and Regional Behavioral Health Boards.

Priority: Priority Area -Behavioral Health System Issues

Goal of the priority area:

Evolve the role of the Division of Behavioral Health's (DBH) Quality Assurance unit.

Strategies to attain the goal:

By June 30, 2012, the DBH Quality Assurance unit will collaborate with Regional Mental Health Centers (RMHC) and Private Substance Use Providers (SUD) to develop a written quality improvement plan that defines the following:

- Development of performance indicators that focus on quality of service, appropriateness of services and the pattern of utilization of services.

a. each indicator must be specific with regard to:

? what is being measured

? how data will be collected

? who is responsible for the data collection

? what is the standard by which success will be measured

? how the data will be reported

? to whom the reporting will go.

- Collection of meaningful data

a. how to collect data (e.g. manual tracking forms, computer database, etc)

- Reporting of data

a. determine how often data will be reported (e.g. quarterly, semi-annually, annually)

b. determine types of data to be reported (e.g. chronologically, trends, etc)

- How to use the data for improvement across programs

- Use of national benchmarking

a. how to compare our programs to other programs (e.g. use of Benchmarking study run by the Institute for Behavioral Healthcare)

Annual Performance Indicators to measure goal success

Indicator: The DBH Quality Assurance Unit will complete a written quality improvement plan for DBH services by June 30, 2012.

Description of Collecting and Measuring Changes in Performance Indicator:

The DBH Quality Assurance Unit will have a written DBH quality improvement plan by June 30, 2012.

Achieved: Yes

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Behavioral Health System Issues

Goal of the priority area:

Include Tribal leader representation on the State Mental Health Planning Council and in the DBH collaborative meetings.

Strategies to attain the goal:

The State Mental Health Planning Council and the DBH will engage Tribal leadership and identify Tribal behavioral health needs and proposed solutions.

Annual Performance Indicators to measure goal success

Indicator: The State Mental Health Planning Council and the DBH collaborative meetings will include representation from Tribal leaders from at least two of Idaho's six federally recognized Tribes by June 30, 2013.

Description of Collecting and Measuring Changes in Performance Indicator:

The State Mental Health Planning Council and the Division of Behavioral Health will track efforts to invite and engage Tribal leaders of Tribes and share this information with DBH Central Office.

Achieved: N/A

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Behavioral Health System Issues

Goal of the priority area:

The DBH will provide a training curriculum for DBH service delivery staff on Gay, Lesbian, Transgender, Bisexual and Questioning cultural awareness.

Strategies to attain the goal:

The DBH will develop a cultural awareness training module on GLTBO cultural awareness that will be added to the DHW on-line Knowledge Learning Center site by June 30, 2012.

Annual Performance Indicators to measure goal success

Indicator: Regional DBH service delivery staff will be required to complete this training module on GLTBO cultural awareness, which will include the need for awareness of the high risk of suicide of this population, by June 30, 2013.

Description of Collecting and Measuring Changes in Performance Indicator:

The GLBTO training module will be developed, approved and ready for use on the Department's on-line Knowledge Learning Center (KLC) by June 30, 2012.
The number of Department staff completing the training module will be tracked on the on-line KLC site.

Achieved: N/A

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Behavioral Health System Issues

Goal of the priority area:

The Regional Behavioral Health Councils and the Division of Behavioral Health will make housing and employment resource development a priority for the homeless population

Strategies to attain the goal:

Identify additional sustainable resources for homeless individuals.

Annual Performance Indicators to measure goal success

Indicator: At least two (2) Safe and Sober Housing program beds for adolescents in each of three regions (Regions 1, 4 and 6) will be established and operational by June 30, 2012.

Description of Collecting and Measuring Changes in Performance Indicator:

The DBH Central Office SUD Program Specialist will track and participate in activities related to the development of at least two Safe and Sober housing beds for adolescents in each of three regions.

Achieved: Yes

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Data and Quality Assurance

Goal of the priority area:

Complete the data warehouse for behavioral health data (SUD, CMH, AMH)

Strategies to attain the goal:

DBH will develop a cross division data warehouse that will include the AMH, CMH, and SUD system called WITS, the state hospital system called Vista, and the former CMH and SUD systems.

Annual Performance Indicators to measure goal success

Indicator: The functional data warehouse will allow cross walking, increased tracking, and interlinking capability between WITS and VistaA for DBH by June 30, 2012.

Description of Collecting and Measuring Changes in Performance Indicator:

The DBH Central Office Program Specialist will track progress in the development and implementation of the data warehouse that is tasked with cross walking and interlinking multiple systems.

Achieved: Yes

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Data and Quality Assurance

Goal of the priority area:

DBH will complete the Web Infrastructure Information Technology System (WITS) implementation for Children's Mental Health (CMH) for credible, non-duplicative data collection and report extraction of local, state and federal (e.g., State Outcome Measures S

Strategies to attain the goal:

DBH will direct Focus e-health Innovations Systems, (FEi) the contractor for the WITS data system, to complete modifications and enhancements to the WITS system that is specific to Idaho's needs.

Annual Performance Indicators to measure goal success

Indicator: DBH will test FEi produced enhancements and modules. FEi will migrate the final tested product into production by June 30, 2012.

Description of Collecting and Measuring Changes in Performance Indicator:

The DBH Central Office Program Specialist will monitor FEi activities, assist with testing and implementation of the FEi modifications and enhancements specific to Idaho's Behavioral Health system needs.

Achieved: N/A

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Data and Quality Assurance

Goal of the priority area:

DBH will complete the WITS implementation for SUDS for credible, non-duplicative data collection and report extraction of local, state and federal (e.g., SOMS, TEDS) reporting requirements.

Strategies to attain the goal:

FEi will complete modifications and enhancements to the WITS system that are specific to Idaho's DBH needs.

Annual Performance Indicators to measure goal success

Indicator: DBH will establish timeline for implementation by June 30, 2012.

Description of Collecting and Measuring Changes in Performance Indicator:

The DBH Central Office Program Specialist will track progress, problem solve challenges and monitor implementation efforts for the FEI modifications to the WITS data infrastructure system.

Achieved: Yes

Proposed Changes:

Reason Not Achieved:

Priority: Priority Area -Data and Quality Assurance

Goal of the priority area:

Establish kiosks at regional behavioral health main offices and at both state hospitals to allow adults with serious mental illnesses and children with emotional and behavioral disorders and their parents to directly input responses to the adult Mental He

Strategies to attain the goal:

DBH and Information Technology (IT) will collaborate to develop an implementation plan for installing kiosks (including layout and cost analysis) at

DBH regional program site locations.

Annual Performance Indicators to measure goal success

Indicator: Each of seven (7) DBH regions will have at least one consumer survey kiosk installed and ready to use by June 30, 2012.

Description of Collecting and Measuring Changes in Performance Indicator:

The DBH Central Office Program Specialist will participate in plans and monitor implementation activities related to establishing a kiosk at regional DBH service sites by June 30, 2012 and at both state hospitals by June 30, 2013.

Achieved: N/A

Proposed Changes:

Reason Not Achieved:

Footnotes:

Table 3 - Objectives, Strategies and Performance Indicators

Revision Request Responses:

1. SUD will begin to move the provider network to a more client-driven system of treatment based on the Recovery Oriented Systems of Care model of service delivery.

Response: As reported on the Idaho FY 2014 Table 3, Idaho did not meet this goal. The goal was delayed for one year because the contract with the SUD Treatment Services Manager was up for bid. The decision was made by Division of Behavioral Health Operations Unit staff to delay the survey until a new contract was awarded so that survey content and administration would be consistent. The contract has been awarded and the contractor is now working with the Division staff to implement the survey. In the "Proposed Changes Section," Idaho stated that the new contract included a requirement that the SUD Treatment Services Manager conduct an annual customer satisfaction survey. This contract start date was July 1, 2013. SO the survey will be initiated during FY 2014. This is an ongoing contract requirement and will continue throughout the period of the contract.

2. By June 30, 2013, the Regional Mental Health Advisory Boards and Regional Advisory Councils (SUD) will merge to become Regional Behavioral Health Community Development Boards.

Response: As reported on the Idaho FY 2014 Table 3, Idaho did not meet this goal. This goal was not achieved because the Idaho Legislature did not pass the legislation needed to allow the merger. While the legislation was not passed to legalize combining existing substance abuse/mental health councils and boards, at the regional level as well as the state level, the entities are meeting jointly and initiating plans to establish regional and state level behavioral health workgroups. The Division of Behavioral Health has once again submitted a legislative proposal to formally combine the groups. Idaho's Legislature convenes in January. The final decision is up to the Legislature.

III: Expenditure Reports

Table 4a - State Agency Expenditure Report

Expenditure Period Start Date: 7/1/2012 Expenditure Period End Date: 6/30/2013

Activity	A. SA Block Grant	B. MH Block Grant	C. Medicaid (Federal, State, and Local)	D. Other Federal Funds (e.g., ACF (TANF), CDC, CMS (Medicare) SAMHSA, etc.)	E. State Funds	F. Local Funds (excluding local Medicaid)	G. Other
1. Substance Abuse Prevention and Treatment	\$ 4,471,072	\$	\$ 3,792,791	\$ 3,500,408	\$ 17,628,771	\$ 1,827,203	\$
2. Primary Prevention	\$ 1,960,970	\$			\$ 702,713	\$ 789,791	\$
3. Tuberculosis Services	\$ 10,500	\$			\$ 3,897		\$
4. HIV Early Intervention Services	\$ 0	\$					\$
5. State Hospital	\$	\$					\$
6. Other 24 Hour Care	\$ 0	\$					\$
7. Ambulatory/Community Non-24 Hour Care	\$	\$					\$
8. Administration (Excluding Program and Provider Level)	\$ 187,843	\$		\$ 1,253,165	\$ 297,215	\$ 245,275	\$
9. Subtotal (Rows 1, 2, 3, 4, and 8)	\$6,630,385	\$	\$3,792,791	\$4,753,573	\$18,632,596	\$2,862,269	\$
10. Subtotal (Rows 5, 6, 7, and 8)	\$187,843	\$	\$	\$1,253,165	\$297,215	\$245,275	\$
11. Total	\$6,630,385	\$	\$3,792,791	\$4,753,573	\$18,632,596	\$2,862,269	\$

Please indicate the expenditures are actual or estimated.

Actual Estimated

Footnotes:

III: Expenditure Reports

Table 4b - State Agency SABG Expenditure Compliance Report

Expenditure Period Start Date: 10/1/2010 Expenditure Period End Date: 9/30/2012

Category	FY 2011 SAPT Block Grant Award
1. Substance Abuse Prevention* and Treatment	\$5,379,020
2. Primary Prevention	\$1,418,564
3. Tuberculosis Services	\$
4. HIV Early Intervention Services**	\$
5. Administration (excluding program/provider level)	\$72,266
6. Total	\$6,869,850

*Prevention other than Primary Prevention

**HIV Designated States

footnote:

The amount reported is correct. Idaho used state funds to cover administrative costs in order to use block grant funds for service delivery.

III: Expenditure Reports

Table 5 - SAPT Block Grant Expenditure By Service

Expenditure Period Start Date: 7/1/2012 Expenditure Period End Date: 6/30/2013

Service	Unduplicated Individuals	Units	Expenditures
Healthcare Home/Physical Health			\$
General and specialized outpatient medical services			\$
Acute Primary care			\$
General Health Screens, Tests and Immunizations			\$
Comprehensive Care Management			\$
Care coordination and Health Promotion			\$
Comprehensive Transitional Care			\$
Individual and Family Support			\$
Referral to Community Services Dissemination			\$
Prevention (Including Promotion)			\$
Screening, Brief Intervention and Referral to Treatment			\$
Brief Motivational Interviews			\$
Screening and Brief Intervention for Tobacco Cessation			\$
Parent Training			\$
Facilitated Referrals			\$
Relapse Prevention/Wellness Recovery Support			\$
Warm Line			\$
Engagement Services			\$
Assessment			\$
Specialized Evaluations (Psychological and Neurological)			\$
Service Planning (including crisis planning)			\$
Consumer/Family Education			\$

Outreach			\$
Outpatient Services			\$
Individual evidenced based therapies			\$
Group therapy			\$
Family therapy			\$
Multi-family therapy			\$
Consultation to Caregivers			\$
Community Support (Rehabilitative)			\$
Parent/Caregiver Support			\$
Skill building (social, daily living, cognitive)			\$
Case management			\$
Behavior management			\$
Supported employment			\$
Permanent supported housing			\$
Recovery housing			\$
Therapeutic mentoring			\$
Traditional healing services			\$
Other Supports (Habilitative)			\$
Personal care			\$
Homemaker			\$
Respite			\$
Supported Education			\$
Transportation			\$
Assisted living services			\$
Recreational services			\$
Trained behavioral health interpreters			\$

Interactive communication technology devices			\$
Intensive Support Services			\$
Substance abuse intensive outpatient (IOP)			\$
Partial hospital			\$
Assertive Community Treatment			\$
Intensive home based services			\$
Multi-systemic therapy			\$
Intensive Case Management			\$
Out-of-Home Residential Services			\$
Crisis residential/stabilization			\$
Clinically Managed 24 Hour Care (SA)			\$
Clinically Managed Medium Intensity Care (SA)			\$
Adult Substance Abuse Residential			\$
Adult Mental Health Residential			\$
Youth Substance Abuse Residential Services			\$
Children's Residential Mental Health Services			\$
Therapeutic foster care			\$
Acute Intensive Services			\$
Mobile crisis			\$
Peer based crisis services			\$
Urgent care			\$
23 hr. observation bed			\$
Medically Monitored Intensive Inpatient			\$
24/7 crisis hotline services			\$
Recovery Supports			\$
Peer Support			\$
Recovery Support Coaching			\$

Recovery Support Center Services			\$
Supports for Self Directed Care			\$
Medication Services			\$
Medication management			\$
Pharmacotherapy (including MAT)			\$
Laboratory services			\$
Other (please list)			\$

footnote:

Idaho does not have the capacity to respond to this report. Idaho will not complete this report for the 2014 SAPT BG Report

III: Expenditure Reports

Table 6a - Primary Prevention Expenditures Checklist

Expenditure Period Start Date: Expenditure Period End Date:

Strategy	IOM Target	SAPT Block Grant	Other Federal	State	Local	Other
Information Dissemination	Selective	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Information Dissemination	Indicated	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Information Dissemination	Universal	\$ <input type="text" value="200,000"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Information Dissemination	Unspecified	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Information Dissemination	Total	\$200,000	\$	\$	\$	\$
Education	Selective	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Education	Indicated	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Education	Universal	\$ <input type="text" value="977,175"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Education	Unspecified	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Education	Total	\$977,175	\$	\$	\$	\$
Alternatives	Selective	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Alternatives	Indicated	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Alternatives	Universal	\$ <input type="text" value="13,229"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Alternatives	Unspecified	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Alternatives	Total	\$13,229	\$	\$	\$	\$
Problem Identification and Referral	Selective	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Problem Identification and Referral	Indicated	\$ <input type="text" value="119,748"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Problem Identification and Referral	Universal	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Problem Identification and Referral	Unspecified	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Problem Identification and Referral	Total	\$119,748	\$	\$	\$	\$
Community-Based Process	Selective	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>

Community-Based Process	Indicated	\$ <input type="text"/>				
Community-Based Process	Universal	\$ 17,898	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Community-Based Process	Unspecified	\$ <input type="text"/>				
Community-Based Process	Total	\$17,898	\$	\$	\$	\$
Environmental	Selective	\$ <input type="text"/>				
Environmental	Indicated	\$ <input type="text"/>				
Environmental	Universal	\$ 26,514	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Environmental	Unspecified	\$ <input type="text"/>				
Environmental	Total	\$26,514	\$	\$	\$	\$
Section 1926 Tobacco	Selective	\$ <input type="text"/>				
Section 1926 Tobacco	Indicated	\$ <input type="text"/>				
Section 1926 Tobacco	Universal	\$ <input type="text"/>				
Section 1926 Tobacco	Unspecified	\$ <input type="text"/>				
Section 1926 Tobacco	Total	\$	\$	\$	\$	\$
Other	Selective	\$ <input type="text"/>				
Other	Indicated	\$ <input type="text"/>				
Other	Universal	\$ <input type="text"/>				
Other	Unspecified	\$ 64,000	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Other	Total	\$64,000	\$	\$	\$	\$

Footnotes:

See Table 6a in the Attachments section. I was unable to get the system to save the State expenditures in this table.

III: Expenditure Reports

Table 6b - Primary Prevention Expenditures by IOM Category

Expenditure Period Start Date:

Expenditure Period End Date:

Activity	SAPT Block Grant	Other Federal Funds	State Funds	Local Funds	Other
Universal Direct	\$ <input type="text" value="1,034,816"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Universal Indirect	\$ <input type="text" value="200,000"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Selective	\$ <input type="text" value="119,748"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Indicated	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Column Total	\$1,354,564.00	\$0.00	\$0.00	\$0.00	\$0.00

footnote:

This form does not include the \$64,000 reported as unspecified on Table 6a. That amount will be reports on the Resource Development Table

III: Expenditure Reports

Table 7 - Resource Development Expenditure Checklist

Expenditure Period Start Date: 10/1/2010 Expenditure Period End Date: 9/30/2012

Resource Development Expenditures Checklist						
Activity	A. Prevention-MH	B. Prevention-SA	C. Treatment-MH	D. Treatment-SA	E. Combined	F. Total
1. Planning, Coordination and Needs Assessment		\$4,340.00				\$4,340.00
2. Quality Assurance		\$11,520.00				\$11,520.00
3. Training (Post-Employment)		\$7,680.00				\$7,680.00
4. Program Development		\$16,640.00				\$16,640.00
5. Research and Evaluation		\$15,500.00				\$15,500.00
6. Information Systems		\$8,320.00				\$8,320.00
7. Education (Pre-Employment)						\$0.00
8. Total	\$0.00	\$64,000.00	\$0.00	\$0.00	\$0.00	\$64,000.00

footnote:

III: Expenditure Reports

Table 8 - Statewide Entity Inventory

Expenditure Period Start Date: 10/1/2010 Expenditure Period End Date: 9/30/2012

Entity Number	I-BHS ID (for SABG)		Area Served (Statewide or SubState Planning Area)	Provider / Program Name	Street Address	City	State	Zip	SAPT Block Grant - A. Block Grant Funds	SAPT Block Grant - B. Prevention (other than primary prevention) and Treatment Services	SAPT Block Grant - C. Pregnant Women and Women with Dependent Children	SAPT Block Grant - D. Primary Prevention	SAPT Block Grant - E. Early Intervention Services for HIV	CMHS Block Grant - F. Adults serious mental illness	CMHS Block Grant - G. Children with a serious emotional disturbance
IT0006	ID100364		Statewide	Port of Hope	508 E Florida	Nampa	ID	83686	\$189,176.00	\$189,176.00	\$38,028.00	\$0.00	\$0.00		
IT0007	x		Statewide	Port of Hope	218 North 23rd Street	Coeur D Alene	ID	83814	\$137,130.00	\$137,130.00	\$29,324.00	\$0.00	\$0.00		
IT0020	ID750085		Statewide	Walker Center - SSA	605 11th Avenue East	Gooding	ID	83330	\$447,234.00	\$447,234.00	\$98,966.00	\$0.00	\$0.00		
IT0024	ID100084		Statewide	Road to Recovery Inc.	600 East Oak Street	Pocatello	ID	83205	\$18,407.00	\$18,407.00	\$1,541.00	\$0.00	\$0.00		
IT0042	ID100448		Statewide	Riverside Recovery	1720 18th Avenue	Lewiston	ID	83501	\$78,344.00	\$78,344.00	\$1,527.00	\$0.00	\$0.00		
IT0048	ID900508		Statewide	Addictions Rehabilitation Association	163 East Elva	Idaho Falls	ID	83404	\$68,547.00	\$68,547.00	\$8,947.00	\$0.00	\$0.00		
IT0051	ID101453		Statewide	The Club Inc/Recovery Now	2001 South Woodruff Suite 6	Idaho Falls	ID	83403	\$71,756.00	\$71,756.00	\$10,743.00	\$0.00	\$0.00		
IT0065	ID100102		Statewide	Weeks & Vietri	818 South Washington	Moscow	ID	83843	\$11,051.00	\$11,051.00	\$853.00	\$0.00	\$0.00		
IT0069	ID100943		Statewide	Mountain States Chemical Dependency	1305 2nd St. South Suite 201	Nampa	ID	83651	\$24,393.00	\$24,393.00	\$2,070.00	\$0.00	\$0.00		
IT0470	x		Statewide	Bell Chemical Dependency	1208 East Linden	Caldwell	ID	83605	\$154,457.00	\$154,457.00	\$60,981.00	\$0.00	\$0.00		
IT0476	x		Statewide	Bell Chemical Dependency	4615 S. Locust Grove	Meridian	ID	83642	\$21,440.00	\$21,440.00	\$5,227.00	\$0.00	\$0.00		
IT0705	x		4	Road to Recovery Inc.	1720 Westaget Drive	Boise	ID	83704	\$4,924.00	\$4,924.00	\$1,652.00	\$0.00	\$0.00		
IT0746	x		6	Road to Recovery Inc.	1070 Hilline	Pocatello	ID	83201	\$1,528.00	\$1,528.00	\$191.00	\$0.00	\$0.00		
IT1892	x		3	Road to Recovery Inc.	3402 Franklin Rd.	Caldwell	ID	83605	\$2,037.00	\$2,037.00	\$318.00	\$0.00	\$0.00		
IT1911	ID100370		Statewide	Ascent Behavioral Health Services	366 SW 5th Ave. St. 100	Meridian	ID	83642	\$179,407.00	\$179,407.00	\$28,105.00	\$0.00	\$0.00		
IT2120	x		Statewide	Preston Counseling	159 S. Main	Soda Springs	ID	83276	\$1,091.00	\$1,091.00	\$576.00	\$0.00	\$0.00		
IT2143	ID100610		Statewide	Solutions for Life	239 Idaho St.	American Falls	ID	83211	\$1,521.00	\$1,521.00	\$0.00	\$0.00	\$0.00		
IT2144	ID100373		Statewide	Pacific Rim Consulting LLC	459 S Arthur Ave	Pocatello	ID	83204	\$40,274.00	\$40,274.00	\$4,071.00	\$0.00	\$0.00		
IT2411	ID100791		Statewide	Pro Active Advantage	2223 Overland	Burley	ID	83318	\$13,585.00	\$13,585.00	\$3,770.00	\$0.00	\$0.00		
IT2465	x		Statewide	Walker Center - SSA	762 Falls Ave.	Twin Falls	ID	83301	\$45,945.00	\$45,945.00	\$6,135.00	\$0.00	\$0.00		
IT2559	x		Statewide	Community Services Counseling	974 Corporate Ln. #102	Nampa	ID	83651	\$20,006.00	\$20,006.00	\$1,021.00	\$0.00	\$0.00		
IT2140	x		Statewide	Supportive Housing & Innovative Partnerships	5024 N. Mitchell	Boise	ID	83704	\$2,828.00	\$2,828.00	\$0.00	\$0.00	\$0.00		
2144	x		Statewide	Hope's Door	720 N. 16th Ave.	Caldwell	ID	83605	\$490.00	\$490.00	\$150.00	\$0.00	\$0.00		
2230	x		Statewide	United Drug Testing Lab	1010 N Orchard St Suite B	Boise	ID	83706	\$10,387.00	\$10,387.00	\$1,245.00	\$0.00	\$0.00		

IT2756	ID100463	X	Statewide	Salmon Mental Health Clinic	111 Lillian Suite 101	Salmon	ID	83467	\$5,318.00	\$5,318.00	\$236.00	\$0.00	\$0.00		
IT2813	ID100355	X	Statewide	Lifestyle Changes Counseling	371 Locust St. South	Twin Falls	ID	83301	\$16,050.00	\$16,050.00	\$1,830.00	\$0.00	\$0.00		
IT0047	ID101560	X	Statewide	Bannock Youth Foundation dba MK Place	403 N. Hayes	Pocatello	ID	83204	\$1,442.00	\$1,442.00	\$0.00	\$0.00	\$0.00		
2888	x	X	Statewide	Port of Hope	1120 Ironwood Drive	Coeur d'Alene	ID	83814	\$1,783.00	\$1,783.00	\$508.00	\$0.00	\$0.00		
2353	x	X	Statewide	Susan Call's Case Management Inc.	313 D. St. Suite 203	Lewiston	ID	83501	\$1,583.00	\$1,583.00	\$431.00	\$0.00	\$0.00		
IT3194	ID100773	X	Statewide	Preferred Child & Family Services	284 Martin St.	Twin Falls	ID	83301	\$17,020.00	\$17,020.00	\$1,121.00	\$0.00	\$0.00		
3196	X	X	Statewide	Preferred Child & Family Services	400 S. Main # 304 C	Hailey	ID	83333	\$121.00	\$121.00	\$0.00	\$0.00	\$0.00		
3662	X	X	Statewide	Chrysalis Women's Transitional Living	2501 State St	Boise	ID	83702	\$2,139.00	\$2,139.00	\$529.00	\$0.00	\$0.00		
3663	X	X	Statewide	Chrysalis Women's Transitional Living	3704 N. North	Boise	ID	83703	\$544.00	\$544.00	\$0.00	\$0.00	\$0.00		
3698	X	X	Statewide	Lighthouse for Recovery	147 W Linden	Chubbuck	ID	83202	\$8,417.00	\$8,417.00	\$0.00	\$0.00	\$0.00		
3788	X	X	Statewide	Mental Wellness Centers	2420 E 25th Circle	Idaho Falls	ID	83404	\$22,132.00	\$22,132.00	\$2,251.00	\$0.00	\$0.00		
3834	x	X	Statewide	Pro Active Advantage	1061 Blue Lakes Blvd.	Twin Falls	ID	83301	\$740.00	\$740.00	\$397.00	\$0.00	\$0.00		
IT3926	ID100531	X	Statewide	Alliance Family Services	1200 Ironwood Dr. Suite 101	Coeur d'Alene	ID	83814	\$88,411.00	\$88,411.00	\$15,148.00	\$0.00	\$0.00		
IT2559	ID100772	X	Statewide	Community Services Counseling	963 S Orchard	Boise	ID	83705	\$79,248.00	\$79,248.00	\$0.00	\$0.00	\$0.00		
3177	X	X	Statewide	Bannock Transportation	518 Filmore	Pocatello	ID	83204	\$12,061.00	\$12,061.00	\$1,844.00	\$0.00	\$0.00		
IT3574	ID100631	X	7	D7 Treatment Program	127 E. Main	Rexburg	ID	83440	\$2,924.00	\$2,924.00	\$0.00	\$0.00	\$0.00		
4117	X	X	Statewide	Boyd Group LLC	1001 Walnut Ave.	Coeur d'Alene	ID	83814	\$2,355.00	\$2,355.00	\$0.00	\$0.00	\$0.00		
3234	X	X	Statewide	Boyd Group LLC	2115 E. Lakeside Ave.	Coeur d'Alene	ID	83814	\$2,724.00	\$2,724.00	\$0.00	\$0.00	\$0.00		
4119	X	X	Statewide	Boyd Group LLC	1916 Pennsylvania Ave.	Coeur d'Alene	ID	83814	\$726.00	\$726.00	\$0.00	\$0.00	\$0.00		
IT0055	ID100561	X	4	Ada County Juvenile Court Services	6300 W. Denton	Boise	ID	83704	\$514.00	\$514.00	\$0.00	\$0.00	\$0.00		
IT2119	ID000592	X	Statewide	Preston Counseling	15 E. Oneida	Preston	ID	83263	\$9,686.00	\$9,686.00	\$1,594.00	\$0.00	\$0.00		
3494	X	X	Statewide	Eastern Idaho Community Action Partnership	2480 S Yellowstone	Idaho Falls	ID	83402	\$1,104.00	\$1,104.00	\$97.00	\$0.00	\$0.00		
IT4276	X	X	Statewide	Family Services Center	704 Albany St	Caldwell	ID	83605	\$65,502.00	\$65,502.00	\$11,450.00	\$0.00	\$0.00		
4628	X	X	Statewide	Road to Recovery Inc.	151 N. 3rd Ste 112	Pocatello	ID	83201	\$80,476.00	\$80,476.00	\$7,664.00	\$0.00	\$0.00		
4677	X	X	Statewide	Alliance Family Services	14 Emerson Lane	Kellogg	ID	83837	\$38,774.00	\$38,774.00	\$10,075.00	\$0.00	\$0.00		
4748	X	X	Statewide	Walker Center - SSA	5440 W. Franklin Rd. #101	Boise	ID	83705	\$24,529.00	\$24,529.00	\$2,870.00	\$0.00	\$0.00		
IT0472	ID100164	X	Statewide	Bell Chemical Dependency	811 Main Street	Caldwell	ID	83605	\$191,213.00	\$191,213.00	\$47,694.00	\$0.00	\$0.00		
IT0047	ID01560	X	Statewide	Bannock Youth Foundation	110 S 19th	Pocatello	ID	83201	\$13,227.00	\$13,227.00	\$0.00	\$0.00	\$0.00		

				dba MK Place											
5075	x	✘	Statewide	Family Services Treatment	2007 E Quail Run Rd #1	Emmett	ID	83617	\$6,044.00	\$6,044.00	\$1,389.00	\$0.00	\$0.00		
IT5122	X	✘	Statewide	Business Psychology Associates	380 E. Parkcenter Blvd.	Boise	ID	83706	\$323,963.00	\$323,963.00	\$47,015.00	\$0.00	\$0.00		
IT5123	ID1000796	✘	Statewide	Restored Paths	109 E Harrison	Coeur d'Alene	ID	83815	\$104,659.00	\$104,659.00	\$11,720.00	\$0.00	\$0.00		
3952	ID100751	✘	Statewide	Personal Development	8100 W Emerald Suite 150	Boise	ID	83704	\$196,087.00	\$196,087.00	\$25,020.00	\$0.00	\$0.00		
2140	X	✘	Statewide	Supportive Housing & Innovative Partnerships	2720 Reno Way	Boise	ID	83704	\$3,524.00	\$3,524.00	\$0.00	\$0.00	\$0.00		
5415	X	✘	Statewide	Bannock Youth Foundation dba MK Place	620 West Fremont St	Pocatello	ID	83204	\$9,086.00	\$9,086.00	\$0.00	\$0.00	\$0.00		
5486	X	✘	1	Road to Recovery Inc.	4795 W Emerald St Bldg A	Boise	ID	83706	\$89,550.00	\$89,550.00	\$14,204.00	\$0.00	\$0.00		
5495	X	✘	Statewide	A to Z Family Services	150 S Broadway	Blackfoot	ID	83221	\$9,246.00	\$9,246.00	\$1,019.00	\$0.00	\$0.00		
IT4010	ID100574	✘	Statewide	Positive Connections	417 Shoup Ave West	Twin Falls	ID	83301	\$6,359.00	\$6,359.00	\$450.00	\$0.00	\$0.00		
IT4497	ID100813	✘	Statewide	West Marriage & Family Counseling	524 Cleveland Blvd. #230/235	Caldwell	ID	83605	\$5,625.00	\$5,625.00	\$275.00	\$0.00	\$0.00		
5836	X	✘	Statewide	Boyd Group LLC	5362 W Prairie Ave	Post Falls	ID	83854	\$3,193.00	\$3,193.00	\$1,798.00	\$0.00	\$0.00		
5831	ID100811	✘	Statewide	Idaho Youth Ranch	1609 Government Way	Coeur d'Alene	ID	83814	\$4,366.00	\$4,366.00	\$0.00	\$0.00	\$0.00		
4335	ID100952	✘	Statewide	OATS Family Center	911 S Highway 30	Heyburn	ID	83336	\$69,109.00	\$69,109.00	\$14,287.00	\$0.00	\$0.00		
5871	X	✘	Statewide	Road to Recovery Inc.	20 N Main St. #10	Malad City	ID	83252	\$364.00	\$364.00	\$0.00	\$0.00	\$0.00		
5900	X	✘	Statewide	Valley View Recovery	109 S Mill	Grangeville	ID	83530	\$21,912.00	\$21,912.00	\$8,255.00	\$0.00	\$0.00		
5909	X	✘	Statewide	Alliance Family Services	618 S Division Ave	Sandpoint	ID	83864	\$6,570.00	\$6,570.00	\$517.00	\$0.00	\$0.00		
5925	X	✘	7	D7 Treatment Program	254 E Street	Idaho Falls	ID	83402	\$87,447.00	\$87,447.00	\$9,629.00	\$0.00	\$0.00		
5944	X	✘	Statewide	A to Z Family Services	44 N Main	Malad City	ID	83252	\$439.00	\$439.00	\$329.00	\$0.00	\$0.00		
4127	ID100806	✘	Statewide	A to Z Family Services	732 Washington	Pocatello	ID	83201	\$7,394.00	\$7,394.00	\$2,532.00	\$0.00	\$0.00		
IT0043	ID100831	✘	Statewide	Riverside Recovery-Orofino	1275 Ahsahka Rd	Orofino	ID	83544	\$6,943.00	\$6,943.00	\$187.00	\$0.00	\$0.00		
2894	ID100890	✘	Statewide	Lighthouse for Recovery	1135 Yellowstone Ave. Suite D	Pocatello	ID	83201	\$54,078.00	\$54,078.00	\$4,135.00	\$0.00	\$0.00		
4515	X	✘	Statewide	Eleos Recovery Support Services	5483 Kendall St.	Boise	ID	83706	\$12.00	\$12.00	\$0.00	\$0.00	\$0.00		
4520	ID100884	✘	Statewide	Rathdrum Counseling Center	14954 Coeur d'Alene St	Rathdrum	ID	83858	\$43,442.00	\$43,442.00	\$13,004.00	\$0.00	\$0.00		
4521	x	✘	Statewide	Second Chances	1214 Logan	Caldwell	ID	83605	\$1,033.00	\$1,033.00	\$0.00	\$0.00	\$0.00		
6130	x	✘	Statewide	Upper Valley Resource & Counseling	1223 S Railroad Ave	Sugar City	ID	83448	\$28,173.00	\$28,173.00	\$3,769.00	\$0.00	\$0.00		
6162	x	✘	Statewide	Alliance Family Services	89 Homer Drive	Saint Maries	ID	83861	\$14,205.00	\$14,205.00	\$1,943.00	\$0.00	\$0.00		
IT2442	ID100912	✘	Statewide	Mental Wellness Centers	159 N Idaho St Ste# 105	Arco	ID	83213	\$2,948.00	\$2,948.00	\$0.00	\$0.00	\$0.00		
6200	X	✘	Statewide	Family Services Treatment	501 N 16th St #108	Payette	ID	83661	\$33,872.00	\$33,872.00	\$5,862.00	\$0.00	\$0.00		
6205	X	✘	Statewide	Alliance Family Services	317 W 6th St Ste # 210	Moscow	ID	83843	\$9,932.00	\$9,932.00	\$231.00	\$0.00	\$0.00		

6251	X	X	Statewide	Rising Sun Sober Living	7121 San Fernando Dr	Boise	ID	83704	\$6,169.00	\$6,169.00	\$0.00	\$0.00	\$0.00		
6257	X	X	Statewide	A to Z Family Services	2798 Arthur	American Falls	ID	83211	\$2,080.00	\$2,080.00	\$635.00	\$0.00	\$0.00		
6290	X	X	Statewide	Ascent Behavioral Health Services	8620 W Emerald St. Suite 100	Boise	ID	83704	\$1,308.00	\$1,308.00	\$73.00	\$0.00	\$0.00		
6303	X	X	Statewide	Rising Sun Sober Living	7210 San Fernando Dr	Boise	ID	83704	\$3,359.00	\$3,359.00	\$870.00	\$0.00	\$0.00		
6304	X	X	Statewide	Rising Sun Sober Living	7191 Poplar St	Boise	ID	83704	\$6,322.00	\$6,322.00	\$0.00	\$0.00	\$0.00		
6305	X	X	Statewide	Rising Sun Sober Living	5051 N Mountain View	Boise	ID	83704	\$9,285.00	\$9,285.00	\$0.00	\$0.00	\$0.00		
4575	X	X	Statewide	Rising Sun Sober Living	5703 Cassia St	Boise	ID	83704	\$3,907.00	\$3,907.00	\$0.00	\$0.00	\$0.00		
6306	X	X	Statewide	Rising Sun Sober Living	516 S 6th Ave	Caldwell	ID	83605	\$6,404.00	\$6,404.00	\$0.00	\$0.00	\$0.00		
3974	ID100974	X	2	Nez Perce County Court Services	1113 F St.	Lewiston	ID	83501	\$43,794.00	\$43,794.00	\$4,028.00	\$0.00	\$0.00		
6386	X	X	4	Ada County Juvenile Court Services	400 N Benjamin Suite 201	Boise	ID	83704	\$1,653.00	\$1,653.00	\$64.00	\$0.00	\$0.00		
6387	X	X	Statewide	Preferred Child & Family Services	531 E 5th St	Burley	ID	83318	\$13,820.00	\$13,820.00	\$3,335.00	\$0.00	\$0.00		
6398	X	X	Statewide	Bell Chemical Dependency	443 South 18th Street	Payette	ID	83661	\$18,223.00	\$18,223.00	\$1,801.00	\$0.00	\$0.00		
6421	X	X	Statewide	Pro Active Advantage	215 University	Gooding	ID	83330	\$10,868.00	\$10,868.00	\$2,639.00	\$0.00	\$0.00		
6424	X	X	Statewide	Provenance Ministry	1286 N Aster Place	Boise	ID	83704	\$77.00	\$77.00	\$0.00	\$0.00	\$0.00		
6425	X	X	Statewide	Provenance Ministry	9653 W Pima	Boise	ID	83704	\$1,057.00	\$1,057.00	\$0.00	\$0.00	\$0.00		
6543	X	X	Statewide	Recovery 4 Life	1253 N Cole Rd. Suite 100	Boise	ID	83704	\$82,149.00	\$82,149.00	\$3,923.00	\$0.00	\$0.00		
6566	X	X	7	D7 Treatment Program	412 West Pacific	Blackfoot	ID	83221	\$3,597.00	\$3,597.00	\$381.00	\$0.00	\$0.00		
6571	X	X	Statewide	Alliance Family Services	6334 Main St	Bonnars Ferry	ID	83805	\$2,795.00	\$2,795.00	\$776.00	\$0.00	\$0.00		
6633	X	X	Statewide	Abundant Wellness Center	1125 E Polston Ave Ste A	Post Falls	ID	83854	\$26,338.00	\$26,338.00	\$5,688.00	\$0.00	\$0.00		
6658	X	X	Statewide	Ascent Behavioral Health Services	790 North 10th East	Mountain Home	ID	83647	\$1,670.00	\$1,670.00	\$0.00	\$0.00	\$0.00		
6699	X	X	Statewide	ChangePoint	2200 Michigan Ave	Orofino	ID	83544	\$49.00	\$49.00	\$0.00	\$0.00	\$0.00		
6734	X	X	Statewide	Tamarack Treatment and Counseling Center	413 Church St Unit C	Sandpoint	ID	83864	\$20,259.00	\$20,259.00	\$898.00	\$0.00	\$0.00		
3939	ID100909	X	Statewide	Human Dynamics & Diagnostics	2267 Teton Plaza	Idaho Falls	ID	83404	\$37,179.00	\$37,179.00	\$2,584.00	\$0.00	\$0.00		
6748	X	X	Statewide	Global Drug Testing Labs Inc	2201 N Government Way Suite C	Coeur d'Alene	ID	83814	\$6,444.00	\$6,444.00	\$586.00	\$0.00	\$0.00		
6833	X	X	4	Idaho County Rideshare	1522 G Street	Lewiston	ID	83501	\$590.00	\$590.00	\$281.00	\$0.00	\$0.00		
6857	X	X	Statewide	ACES Community Services	1417 N 4th Street	Coeur d'Alene	ID	83814	\$28,422.00	\$28,422.00	\$3,402.00	\$0.00	\$0.00		
6858	X	X	Statewide	ACES Community Services	609 Bank Street	Wallace	ID	83873	\$9,128.00	\$9,128.00	\$2,228.00	\$0.00	\$0.00		
6859	X	X	Statewide	ACES Community Services	1002 W Sanetta Street	Nampa	ID	83651	\$22,134.00	\$22,134.00	\$5,896.00	\$0.00	\$0.00		
6860	X	X	Statewide	ACES Community Services	890 N Cole Road	Boise	ID	83704	\$54,704.00	\$54,704.00	\$7,377.00	\$0.00	\$0.00		

6879	X	✘	Statewide	Global Drug Testing Labs Inc	921 S Orchard St Suite A	Boise	ID	83705	\$54,965.00	\$54,965.00	\$4,791.00	\$0.00	\$0.00		
6880	X	✘	Statewide	Global Drug Testing Labs Inc	623 11th Ave South	Nampa	ID	83651	\$13,423.00	\$13,423.00	\$1,748.00	\$0.00	\$0.00		
6894	X	✘	Statewide	Tueller Counseling Services Inc.	2275 W Broadway Ste G	Idaho Falls	ID	83402	\$1,685.00	\$1,685.00	\$200.00	\$0.00	\$0.00		
6914	X	✘	7	Road to Recovery Inc.	150 Shoup Ave.	Idaho Falls	ID	83402	\$1,868.00	\$1,868.00	\$508.00	\$0.00	\$0.00		
6930	X	✘	Statewide	ChangePoint	830 Michigan Ave	Orofino	ID	83544	\$23,949.00	\$23,949.00	\$4,142.00	\$0.00	\$0.00		
7002	X	✘	Statewide	Insight Consulting Inc	2423 S Georgia Ste A	Caldwell	ID	83605	\$24,919.00	\$24,919.00	\$5,788.00	\$0.00	\$0.00		
7007	x	✘	Statewide	Precious Cargo Transportation	2039 E 3300 S	Wendell	ID	83355	\$16,543.00	\$16,543.00	\$3,234.00	\$0.00	\$0.00		
7008	x	✘	Statewide	All-City Transport	10843 W Halstead Ct	Boise	ID	83713	\$21,814.00	\$21,814.00	\$1,644.00	\$0.00	\$0.00		
7013	X	✘	Statewide	Personal Development	232 2nd Street South	Nampa	ID	83651	\$24,713.00	\$24,713.00	\$3,459.00	\$0.00	\$0.00		
7030	X	✘	Statewide	A to B Services	1001 J Street	Rupert	ID	83350	\$3,107.00	\$3,107.00	\$856.00	\$0.00	\$0.00		
7058	X	✘	Statewide	Rising Sun Sober Living	922 Palace Row	Boise	ID	83704	\$2,125.00	\$2,125.00	\$0.00	\$0.00	\$0.00		
7088	X	✘	Statewide	Alcoholism Intervention Services	8436 Fairview Ave Ste D	Boise	ID	83704	\$47,115.00	\$47,115.00	\$6,493.00	\$0.00	\$0.00		
7094	X	✘	Statewide	Ascent Behavioral Health Services	1993 East 8th North	Mountain Home	ID	83647	\$28,204.00	\$28,204.00	\$5,184.00	\$0.00	\$0.00		
7190	X	✘	Statewide	Global Drug Testing Labs Inc	740 McKinley Ave	Kellogg	ID	83837	\$263.00	\$263.00	\$36.00	\$0.00	\$0.00		
7191	X	✘	Statewide	Global Drug Testing Labs Inc	113 S 7th Ave	Caldwell	ID	83605	\$8,690.00	\$8,690.00	\$2,090.00	\$0.00	\$0.00		
7192	X	✘	Statewide	Global Drug Testing Labs Inc	846 6th St South Ste E	Payette	ID	83661	\$159.00	\$159.00	\$21.00	\$0.00	\$0.00		
7193	X	✘	Statewide	Global Drug Testing Labs Inc	89 Homer St	Saint Maries	ID	83861	\$118.00	\$118.00	\$0.00	\$0.00	\$0.00		
7239	X	✘	Statewide	Happy Days Transportation	25 N 12 W	Rexburg	ID	83440	\$4,554.00	\$4,554.00	\$903.00	\$0.00	\$0.00		
7251	X	✘	Statewide	Eagle Drug & Alcohol Testing	102 S 4th Ave	Sandpoint	ID	83864	\$2,488.00	\$2,488.00	\$290.00	\$0.00	\$0.00		
7255	X	✘	Statewide	Advanced Drug Detection	1290 Addison Ave E	Twin Falls	ID	83301	\$1,130.00	\$1,130.00	\$322.00	\$0.00	\$0.00		
7256	X	✘	Statewide	American Mobile Drug Testing	1200 W Ironwood Dr Ste # 309	Coeur d'Alene	ID	83814	\$12,536.00	\$12,536.00	\$1,457.00	\$0.00	\$0.00		
7261	X	✘	Statewide	Road to Recovery Inc.	343 East Bonneville	Pocatello	ID	83201	\$37,573.00	\$37,573.00	\$7,293.00	\$0.00	\$0.00		
7282	X	✘	Statewide	Twin Falls County Safe House	183 Rose St North	Twin Falls	ID	83301	\$9,316.00	\$9,316.00	\$0.00	\$0.00	\$0.00		
7286	X	✘	Statewide	Pro Active Advantage	808 Eastland Drive Ste D	Twin Falls	ID	83301	\$2,825.00	\$2,825.00	\$227.00	\$0.00	\$0.00		
7297	X	✘	Statewide	Abba Daddy House	976 Haas Rd	Craigmont	ID	83523	\$53.00	\$53.00	\$40.00	\$0.00	\$0.00		
7298	X	✘	Statewide	Rising Sun Sober Living	8705 Goddard Rd	Boise	ID	83704	\$2,107.00	\$2,107.00	\$583.00	\$0.00	\$0.00		
7306	X	✘	Statewide	Mental Wellness Centers	1070 Hilline Rd Ste # 210	Pocatello	ID	83201	\$2,013.00	\$2,013.00	\$363.00	\$0.00	\$0.00		
7318	X	✘	Statewide	Tom Moore Counseling Center	321 N 3rd	McCall	ID	83638	\$751.00	\$751.00	\$132.00	\$0.00	\$0.00		
7325	X	✘	4	Salmon Sue Rose	1720 Westgate Dr Ste D	Boise	ID	83704	\$3,650.00	\$3,650.00	\$1,334.00	\$0.00	\$0.00		

7329	X	X	Statewide	Family Services Treatment	426 Highway 16	Emmett	ID	83617	\$21,489.00	\$21,489.00	\$2,067.00	\$0.00	\$0.00		
7343	X	X	Statewide	Recovery 4 Life	8950 W Emerald Ste # 178	Boise	ID	83704	\$94,086.00	\$94,086.00	\$9,718.00	\$0.00	\$0.00		
7363	X	X	Statewide	A to Z Family Services	380 N Capital Ave	Idaho Falls	ID	83402	\$13,922.00	\$13,922.00	\$2,508.00	\$0.00	\$0.00		
7371	X	X	Statewide	Rawlings Community Counseling	6658 Comanche St	Bonnars Ferry	ID	83805	\$10,889.00	\$10,889.00	\$758.00	\$0.00	\$0.00		
7399	X	X	Statewide	Tueller Counseling Services Inc.	295 N 3855 E	Rigby	ID	83442	\$1,231.00	\$1,231.00	\$0.00	\$0.00	\$0.00		
7496	X	X	Statewide	Absolute Drug Testing	5433 N Government Way Ste B	Coeur d'Alene	ID	83815	\$180.00	\$180.00	\$36.00	\$0.00	\$0.00		
7503	X	X	Statewide	Family Services Treatment	524 Cleveland Blvd	Caldwell	ID	83605	\$3,960.00	\$3,960.00	\$363.00	\$0.00	\$0.00		
7535	X	X	Statewide	My House	212 Fourth Avenue East	Twin Falls	ID	83301	\$325.00	\$325.00	\$0.00	\$0.00	\$0.00		
7548	X	X	Statewide	Transylvania Express	8879 W Stirrup St	Boise	ID	83709	\$1,207.00	\$1,207.00	\$61.00	\$0.00	\$0.00		
7598	X	X	Statewide	Ascent Behavioral Health Services	169 E 50th Street	Garden City	ID	83714	\$1,952.00	\$1,952.00	\$34.00	\$0.00			
7629	X	X	Statewide	Port of Hope	2115 E Sherman	Coeur d'Alene	ID	83814	\$449.00	\$449.00	\$0.00	\$0.00	\$0.00		
Prev2011-1	X	X	1	AJI Counseling LLC	PO Box 103	Coeur d'Alene	ID	83816	\$55,488.00	\$0.00	\$0.00	\$55,488.00	\$0.00		
Prev2011-2	X	X	1	AJI Counseling LLC TND+	PO Box 5114	Coeur d'Alene	ID	83814	\$34,757.00	\$34,757.00	\$0.00	\$0.00	\$0.00		
Prev2011-3	X	X	6	Alice's House	291 N Shilling Ave	Blackfoot	ID	83221	\$15,376.00	\$0.00	\$0.00	\$15,376.00	\$0.00		
Prev2011-4	X	X	6	Bannock County Jv Diversion	PO Box 4926	Pocatello	ID	83205	\$6,359.00	\$0.00	\$0.00	\$6,359.00	\$0.00		
Prev2011-5	X	X	6	Bannock Youth Foundation	PO Box 246	Pocatello	ID	83204	\$70,120.00	\$0.00	\$0.00	\$70,120.00	\$0.00		
Prev2011-6	X	X	4	Basin School District #72	PO Box 227	Idaho City	ID	83631	\$12,329.00	\$0.00	\$0.00	\$12,329.00	\$0.00		
Prev2011-7	X	X	6	Bear Lake School Dist #33	PO Box 300	Paris	ID	83261	\$8,549.00	\$0.00	\$0.00	\$8,549.00	\$0.00		
Prev2011-8	X	X	5	Blaine County School District #61	520 1st Ave S.	Hailey	ID	83333	\$5,044.00	\$0.00	\$0.00	\$5,044.00	\$0.00		
Prev2011-9	X	X	4	Boise County - SFP	PO Box 486	Idaho City	ID	83631	\$16,128.00	\$0.00	\$0.00	\$16,128.00	\$0.00		
Prev2011-10	X	X	4	Boise County TND+	PO Box 486	Idaho City	ID	83631	\$24,330.00	\$24,330.00	\$0.00	\$0.00	\$0.00		
Prev2011-11	X	X	4	Boise School District #1	8169 W. Victory Road	Boise	ID	83709	\$17,330.00	\$0.00	\$0.00	\$17,330.00	\$0.00		
Prev2011-12	X	X	7	Bonneville County BYDC coalition	245 N Placer Ave	Idaho Falls	ID	83402	\$11,907.00	\$0.00	\$0.00	\$11,907.00	\$0.00		
Prev2011-13	X	X	5	Boys and Girls Club of Magic Valley	999 Frontier Road	Twin Falls	ID	83301	\$11,173.00	\$0.00	\$0.00	\$11,173.00	\$0.00		
Prev2011-14	X	X	3	Bruneau-Grand View Jt. School Dist 365	39678 State HWY 78	Bruneau	ID	83604	\$20,594.00	\$0.00	\$0.00	\$20,594.00	\$0.00		
Prev2011-15	X	X	3	Caldwell SD	1502 Fillmore St	Caldwell	ID	83605	\$19,996.00	\$0.00	\$0.00	\$19,996.00	\$0.00		
Prev2011-16	X	X	4	Cascade School District #422	35 Atkin Lane	Cascade	ID	83611	\$12,684.00	\$0.00	\$0.00	\$12,684.00	\$0.00		
Prev2011-17	X	X	5	Catholic Charities of Jerome	125 1st Avenue East	Jerome	ID	83338	\$18,457.00	\$0.00	\$0.00	\$18,457.00	\$0.00		
Prev2011-18	X	X	6	City of Montpelier Coalition	534 Washington St	Montpelier	ID	83254	\$4,599.00	\$0.00	\$0.00	\$4,599.00	\$0.00		
				Clearwater											

Prev2011-19	X	X	2	Substance Abuse Workgroup Inc.	PO Box 1114	Orofino	ID	83544	\$14,500.00	\$0.00	\$0.00	\$14,500.00	\$0.00		
Prev2011-20	X	X	2	Clearwater Youth Alliance	PO Box 2124	Orofino	ID	83544	\$16,259.00	\$0.00	\$0.00	\$16,259.00	\$0.00		
Prev2011-21	X	X	1	Coeur d' Alene School District #271	311 N. 10th St	Coeur d'Alene	ID	83814	\$66,893.00	\$0.00	\$0.00	\$66,893.00	\$0.00		
Prev2011-22	X	X	3	Council School District #13 DBA WACSAC	PO Box 215	Midvale	ID	83645	\$3,494.00	\$0.00	\$0.00	\$3,494.00	\$0.00		
Prev2011-23	X	X	3	Family Services Center LLC R3	704 Albany	Caldwell	ID	83605	\$10,021.00	\$0.00	\$0.00	\$10,021.00	\$0.00		
Prev2011-24	X	X	7	Family Support Services - R7	630 N. Front Street	Arco	ID	83213	\$17,090.00	\$0.00	\$0.00	\$17,090.00	\$0.00		
Prev2011-25	X	X	4	Garden Valley School District #71	PO Box 710	Garden Valley	ID	83622	\$9,866.00	\$0.00	\$0.00	\$9,866.00	\$0.00		
Prev2011-26	X	X	1	Goodwill Industries of the Inland NW	204 Lark Spur Drive	Sandpoint	ID	83864	\$3,178.00	\$0.00	\$0.00	\$3,178.00	\$0.00		
Prev2011-27	X	X	3	Homedale School District #370	116 Owyhee Ave	Homedale	ID	83628	\$12,007.00	\$0.00	\$0.00	\$12,007.00	\$0.00		
Prev2011-28	X	X	4	Horseshoe Bend School District #73	398 School Drive	Horseshoe Bend	ID	83629	\$12,910.00	\$0.00	\$0.00	\$12,910.00	\$0.00		
Prev2011-29	X	X	7	Juvenile Help Options LLC	2553 St. Charles	Idaho Falls	ID	83404	\$64,258.00	\$0.00	\$0.00	\$64,258.00	\$0.00		
Prev2011-30	X	X	2	Kamiah Community Partners Coalition	PO Box 1397	Kamiah	ID	83536	\$13,302.00	\$0.00	\$0.00	\$13,302.00	\$0.00		
Prev2011-31	X	X	2	Kamiah School District	1102 Hill Street	Kamiah	ID	83536	\$21,242.00	\$0.00	\$0.00	\$21,242.00	\$0.00		
Prev2011-32	X	X	1	Kellogg Joint School District #391 dba Even Start Program	800 Bunker Avenue	Kellogg	ID	83837	\$7,316.00	\$0.00	\$0.00	\$7,316.00	\$0.00		
Prev2011-33	X	X	1	Kellogg Joint School District #391 KEY Program	800 Bunker Avenue	Kellogg	ID	83837	\$36,992.00	\$0.00	\$0.00	\$36,992.00	\$0.00		
Prev2011-34	X	X	4	Kuna SD	1080 North Ten Mile Road	Kuna	ID	83534	\$8,086.00	\$0.00	\$0.00	\$8,086.00	\$0.00		
Prev2011-35	X	X	7	Lemhi After School Promise Inc	PO Box 24	Salmon	ID	83467	\$24,733.00	\$0.00	\$0.00	\$24,733.00	\$0.00		
Prev2011-36	X	X	3	Lutheran Community Services Northwest R3	2920 Cassial Street	Boise	ID	83705	\$51,427.00	\$0.00	\$0.00	\$51,427.00	\$0.00		
Prev2011-37	X	X	4	Lutheran Community Services Northwest R4	2920 Cassial Street	Boise	ID	83705	\$67,389.00	\$0.00	\$0.00	\$67,389.00	\$0.00		
Prev2011-38	X	X	5	Minidoka County - SFP	PO Box 368	Rupert	ID	83350	\$32,689.00	\$0.00	\$0.00	\$32,689.00	\$0.00		
Prev2011-39	X	X	5	Minidoka County TND+	PO Box 368	Rupert	ID	83350	\$28,013.00	\$28,013.00	\$0.00	\$0.00	\$0.00		
Prev2011-40	X	X	2	Moscow Charter School	1723 East F. Street	Moscow	ID	83843	\$8,638.00	\$0.00	\$0.00	\$8,638.00	\$0.00		
Prev2011-41	X	X	2	Mountain View School District #244	714 Jefferson Street	Grangeville	ID	83530	\$40,675.00	\$0.00	\$0.00	\$40,675.00	\$0.00		
Prev2011-42	X	X	3	New Hope/Nueva Esperanza R3	2002 Blossom Place	Meridian	ID	83646	\$13,397.00	\$0.00	\$0.00	\$13,397.00	\$0.00		
Prev2011-43	X	X	4	New Hope-Nueva Esperanza	2002 Blossom Place	Meridian	ID	83646	\$16,201.00	\$0.00	\$0.00	\$16,201.00	\$0.00		
Prev2011-44	X	X	2	Nez Perce Tribe DBA Students for Success	PO Box 365	Lapwai	ID	83540	\$8,897.00	\$0.00	\$0.00	\$8,897.00	\$0.00		
Prev2011-45	X	X	6	Oneida SD	181 Jenkins Avenue	Malad	ID	83252	\$8,436.00	\$0.00	\$0.00	\$8,436.00	\$0.00		

Prev2011-46	X	X	3	Parma SD	805 E. McConnell Ave.	Parma	ID	83660	\$8,213.00	\$0.00	\$0.00	\$8,213.00	\$0.00		
Prev2011-47	X	X	3	Prevention Associates LLC TND+	1909 S. 10th Ave	Caldwell	ID	83605	\$27,810.00	\$27,810.00	\$0.00	\$0.00	\$0.00		
Prev2011-48	X	X	6	Priestley Mental Health Inc.	PO Box 54	Franklin	ID	83237	\$13,257.00	\$0.00	\$0.00	\$13,257.00	\$0.00		
Prev2011-49	X	X	2	REACH Club Inc.	PO Box 294	Elk City	ID	83525	\$6,874.00	\$0.00	\$0.00	\$6,874.00	\$0.00		
Prev2011-50	X	X	7	Salmon School District #291	401 S Warpath	Salmon	ID	83647	\$9,096.00	\$0.00	\$0.00	\$9,096.00	\$0.00		
Prev2011-51	X	X	6	Shoshone-Bannock Tribes	PO Box 306	Fort Hall	ID	83203	\$3,060.00	\$0.00	\$0.00	\$3,060.00	\$0.00		
Prev2011-52	X	X	1	St. Maries School District #41	PO Box 384	St. Maries	ID	83861	\$16,671.00	\$0.00	\$0.00	\$16,671.00	\$0.00		
Prev2011-53	X	X	1	St. Vincent de Paul dba ICARE	1621 N. 3rd St Ste 100	Coeur d'Alene	ID	83814	\$7,091.00	\$0.00	\$0.00	\$7,091.00	\$0.00		
Prev2011-54	X	X	6	Still Waters Out Reach	755 W. Center	Pocatello	ID	83204	\$44,124.00	\$0.00	\$0.00	\$44,124.00	\$0.00		
Prev2011-55	X	X	6	Still Waters Out Reach TND+	755 W. Center	Pocatello	ID	83204	\$34,310.00	\$34,310.00	\$0.00	\$0.00	\$0.00		
Prev2011-56	X	X	4	The Landing Foundation Inc.	PO Box 639	Eagle	ID	83616	\$8,722.00	\$0.00	\$0.00	\$8,722.00	\$0.00		
Prev2011-57	X	X	5	Twin Falls dba 5th Judicial District Adult Drug Court	PO Box 126	Twin Falls	ID	83303	\$9,038.00	\$0.00	\$0.00	\$9,038.00	\$0.00		
Prev2011-58	X	X	5	Twin Falls School District #411	201 Main Avenue West	Twin Falls	ID	83301	\$26,774.00	\$0.00	\$0.00	\$26,774.00	\$0.00		
Prev2011-59	X	X	7	Upper Valley Resource and Counseling LLC	1223 S. Railroad Ave	Sugar City	ID	83448	\$57,518.00	\$0.00	\$0.00	\$57,518.00	\$0.00		
Prev2011-60	X	X	4	Valley County Court Services	550 Deinhard Lane	McCall	ID	83638	\$2,697.00	\$0.00	\$0.00	\$2,697.00	\$0.00		
Prev2011-61	X	X	3	Vallivue School District #139	1407 Homedale Road	Caldwell	ID	83607	\$74,377.00	\$0.00	\$0.00	\$74,377.00	\$0.00		
Prev2011-62	X	X	4	Varner Counseling LLC dba RMBH	4802 West Kootenai	Boise	ID	83705	\$54,549.00	\$0.00	\$0.00	\$54,549.00	\$0.00		
Prev2011-63	X	X	5	Walker Center for Alcoholism and Drug Abuse Inc.	762 Falls Avenue	Twin Falls	ID	83331	\$91,313.00	\$0.00	\$0.00	\$91,313.00	\$0.00		
Prev2011-64	X	X	1	Wallace School District #393	PO Box 2160	Osburn	ID	83849	\$14,114.00	\$0.00	\$0.00	\$14,114.00	\$0.00		
Prev2011-65	X	X	3	Washington County Juvenile Probation	256 East Court Street	Weiser	ID	83672	\$8,295.00	\$0.00	\$0.00	\$8,295.00	\$0.00		
Prev2011-66	X	X	4	Women's and Children's Alliance Inc.	720 W. Washington	Boise	ID	83702	\$15,331.00	\$0.00	\$0.00	\$15,331.00	\$0.00		
BSU	x	X	Statewide	Idaho RADAR Center/Boise State University	1910 University Drive	Boise	ID	83725	\$151,000.00	\$147,309.00	\$0.00	\$3,691.00	\$0.00		
KC1814		X	Statewide	Benchmark Research & Safety, Inc.	POB 9088	Moscow	ID	83843	\$370,102.00	\$322,465.00		\$47,637.00			
DBH	NA	X	Statewide	DBH	450 W. State St	Boise	ID	83720	\$447,693.00	\$447,600.00		\$93.00			
Total									\$6,797,584.00	\$5,379,020.00	\$694,898.00	\$1,418,564.00	\$0.00		

footnote:

Please note \$72,266 s not accounted for in this table, because it includes no column for state indirect costs

III: Expenditure Reports

Table 9a - Maintenance of Effort for State Expenditures for SAPT

Did the State or Jurisdiction have any non-recurring expenditures for a specific purpose which were not included in the MOE calculation?

Yes No

If yes, specify the amount and the State fiscal year: _____

Did the State or Jurisdiction include these funds in previous year MOE calculations?

Yes No

When did the State submit an official request to the SAMHSA Administrator to exclude these funds from the MOE calculations? _____

Total Single State Agency (SSA) Expenditures for Substance Abuse Prevention and Treatment		
Period (A)	Expenditures (B)	<u>B1(2011) + B2(2012)</u> 2 (C)
SFY 2011 (1)	\$19,067,300	
SFY 2012 (2)	\$17,254,832	\$18,161,066
SFY 2013 (3)	\$18,632,596	

Are the expenditure amounts reported in Column B "actual" expenditures for the State fiscal years involved?

SFY 2011 Yes No

SFY 2012 Yes No

SFY 2013 Yes No

If estimated expenditures are provided, please indicate when actual expenditure data will be submitted to SAMHSA: _____

footnote:
Revision response located in attachments under "Table 9a Response."

Table 9a - Maintenance of Effort for State Expenditures for SAPT

Revision Request: Please respond to this revision request per the instruction provided below by 12/30/13: 4. In the footnote to this table, provide the methodology used to arrive at this amount. (Alternatively, the state may upload a document to the Attachment section which explains the methodology for the four MOE tables, Tables 9a, 9b, 9c and 9d.) In either case, provide the methodology whether or not there has been a change in methodology from the previous year.

Response: Idaho used the FY 2013 process to generate the data entered into Table 9a for the FY 2014 Report. The funds previously appropriated to the Department of Health and Welfare for the delivery of substance abuse services in FY 2011 were re-distributed, by the Idaho Legislature, and appropriated to five state agencies and branches of government (Idaho Office of Drug Policy, Supreme Court, Department of Correction, Department of Juvenile Corrections and Department of Health and Welfare) for FY 2012. To account for this change in appropriation, the Division of Behavioral Health, reports the expenditures of these funds by each of the agencies listed above. A chart depicting expenditures for 2013 is pasted below.

Agency/Branch	13 SUD Expenditure
Department of Health & Welfare	\$ 2,862,269
Idaho Office of Drug Policy	\$ 1,076,400
Department of Correction	\$ 6,956,073
Department of Juvenile Corrections	\$ 3,444,237
Supreme Court	\$ 4,293,617
Total	\$ 18,632,596

III: Expenditure Reports

Table 9b - Base and Maintenance of Effort for State Expenditures for TB

State Expenditures for Tuberculosis Services to Individuals in Substance Use Disorder Treatment BASE				
Period	Total of All State Funds Spent on TB Services (A)	% of TB Expenditures Spent on Individuals in Substance Use Disorder Treatment (B)	Total State Funds Spent on Individuals in Substance Use Disorders Treatment (A x B) (C)	Average of Column C1 and C2 $\frac{C1+C2}{2}$ (MOE BASE) (D)
SFY 1991 (1)	\$26,773	3.51%	\$940	
SFY 1992 (2)	\$23,012	4.09%	\$941	\$940

State Expenditures for Tuberculosis Services to Individuals in Substance Use Disorder Treatment MAINTENANCE				
Period	Total of All State Funds Spent on TB Services (A)	% of TB Expenditures Spent on Individuals in Substance Use Disorder Treatment (B)	Total State Funds Spent on Individuals in Substance Use Disorders Treatment (A x B) (C)	Average of Column C1 and C2 $\frac{C1+C2}{2}$ (MOE BASE) (D)
SFY 2013 (3)	\$152,776	6.89%	\$10,526	

footnote:

2. The amount entered is actual.
3. Expenditures were actual.
4. Idaho used the same methodology to respond to the FY 13 report. The recorded amount was established by multiplying the number of individuals, whose response to TB questions within the intake process were recorded in the WITS data system, by the cost for the amount of time it takes to ask and respond to the questions. All individuals who responded positively to the TB questions were referred to medical care.

III: Expenditure Reports

Table 9c - Base and Maintenance of Effort for Expenditures for HIV Early Intervention Services

Enter the year in which your State last became a designated State, Federal Fiscal Year __. Enter the 2 prior years' expenditure data in A1 and A2. Compute the average of the amounts in boxes A1 and A2. Enter the resulting average (MOE Base) in box B2.

State Expenditures for HIV Early Intervention Services to Individuals in Substance Use Disorder Treatment BASE		
Period	Total of All State Funds Spent on Early Intervention Services for HIV (A)	Average of Columns A1 and A2 $\frac{A1+A2}{2}$ (MOE Base) (B)
(1) SFY <u>1991</u>	\$0	
(2) SFY <u>1992</u>	\$0	\$0

Statewide Non-Federal Expenditures for HIV Early Intervention Services to Individuals in Substance Use Disorder Treatment MAINTENANCE	
Period	Total of All State Funds Spent on Early Intervention Services for HIV (A)
(3) SFY 2013	\$0

footnote:
Idaho is not a designated state.

III: Expenditure Reports

Table 9d - Expenditures for Services to Pregnant Women and Women with Dependent Children

Expenditures for Services to Pregnant Women and Women with Dependent Children		
Period	Total Women's Base (A)	Total Expenditures (B)
SFY 1994	\$634,045	
SFY 2011		\$2,786,886
SFY 2012		\$742,665
SFY 2013		\$713,106
Enter the amount the State plans to expend in 2014 for services for pregnant women and women with dependent children (amount entered must be not less than amount entered in Table IV Maintenance - Box A (1994)): \$ <u>650000.00</u>		

footnote:

Response: Per the submitted Table 9d, the amount expenditure on pregnant women and women with dependent children services was \$713,106.00. This is the actual expenditure. The methodology to calculate this amount is the same as it was in the previous SAPT block grant report. The amount was calculated by summing the expenditures on services delivered to women and dependent children in the PWWDC program.

IV: Populations and Services Reports

Table 10 - Prevention Strategy Report

Column A (Risks)	Column B (Strategies)	Column C (Providers)
Underage Drinking Prevention, Marijuana use Prevention, Prescription Medicine abuse Prevention	1. Information Dissemination	
	1. Clearinghouse/information resources centers	0
	3. Media campaigns	0
	4. Brochures	0
	5. Radio and TV public service announcements	0
	6. Speaking engagements	0
	7. Health fairs and other health promotion, e.g., conferences, meetings, seminars	0
	2. Education	
	1. Parenting and family management	0
	2. Ongoing classroom and/or small group sessions	0
	3. Peer leader/helper programs	0
	4. Education programs for youth groups	0
	5. Mentors	0
	3. Alternatives	
	2. Youth/adult leadership activities	0
	4. Problem Identification and Referral	
	2. Student Assistance Programs	0
	5. Community-Based Process	
	1. Community and volunteer training, e.g., neighborhood action training, impactor-training, staff/officials training	0
	2. Systematic planning	0
	3. Multi-agency coordination and collaboration/coalition	0
	4. Community team-building	0
	6. Environmental	
	2. Guidance and technical assistance on monitoring enforcement governing availability and distribution of alcohol, tobacco, and other drugs	0
	3. Modifying alcohol and tobacco advertising practices	0

footnote:

IV: Populations and Services Reports

Table 11 - Treatment Utilization Matrix

Expenditure Period Start Date: 7/1/2012 Expenditure Period End Date: 6/30/2013

Level of Care	Number of Admissions \geq Number of Persons Served		Costs per Person		
	Number of Admissions (A)	Number of Persons Served (B)	Mean Cost of Services (C)	Median Cost of Services (D)	Standard Deviation of Cost (E)
DETOXIFICATION (24-HOUR CARE)					
1. Hospital Inpatient	0	0	\$	\$	\$
2. Free-Standing Residential	112	112	\$656	\$672	\$295
REHABILITATION/RESIDENTIAL					
3. Hospital Inpatient	0	0	\$	\$	\$
4. Short-term (up to 30 days)	0	0	\$	\$	\$
5. Long-term (over 30 days)	313	313	\$3,906	\$4,704	\$2,307
AMBULATORY (OUTPATIENT)					
6. Outpatient	2720	2720	\$1,096	\$857	\$1,051
7. Intensive Outpatient	1816	1816	\$1,177	\$674	\$1,403
8. Detoxification	0	0	\$	\$	\$
OPIOID REPLACEMENT THERAPY					
9. Opioid Replacement Therapy	0	0	\$	\$	\$
10. ORT Outpatient	0	0	\$	\$	\$

footnote:

The reported data and instructions have been reviewed. The data reported in Idaho's FY 15 SAPT block grant report was generated in compliance with table instructions and is accurate.

IV: Populations and Services Reports

Table 12 - Unduplicated Count of Persons

Expenditure Period Start Date: 7/1/2012 Expenditure Period End Date: 6/30/2013

Age	A. Total	B. WHITE		C. BLACK OR AFRICAN AMERICAN		D. NATIVE HAWAIIAN / OTHER PACIFIC ISLANDER		E. ASIAN		F. AMERICAN INDIAN / ALASKA NATIVE		G. MORE THAN ONE RACE REPORTED		H. Unknown		I. NOT HISPANIC OR LATINO		J. HISPANIC OR LATINO	
		Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
1. 17 and Under	700	400	145	7	3	0	0	0	0	14	11	89	31			384	149	126	41
2. 18 - 24	1964	1099	472	32	6	0	0	7	1	43	30	219	55			1158	497	242	67
3. 25 - 44	4138	2001	1392	42	19	0	0	17	13	94	74	333	153			2157	1474	330	177
4. 45 - 64	1255	728	349	14	2	0	0	2	3	29	14	95	19			783	373	85	14
5. 65 and Over	43	27	11	0	0	0	0	0	0	0	0	4	1			28	11	3	1
6. Total	8100	4255	2369	95	30	0	0	26	17	180	129	740	259	0	0	4510	2504	786	300
7. Pregnant Women	77		60		0		0				5		12				62		15
Number of persons served who were admitted in a period prior to the 12 month reporting period		0																	
Number of persons served outside of the levels of care described on Table 11		0																	

footnote:

The correct response is zero. Idaho's CIS files, the files that contain the data on things like ethnicity, drug use, etc., have only one date associated with any given client. That date is application date, not treatment date. So, for the people listed in Table 12, those are people who applied in SFY 2013 and there is no overlap.

IV: Populations and Services Reports

Table 14 - HIV Designated States Early Intervention Services

Expenditure Period Start Date: 7/1/2012 Expenditure Period End Date: 6/30/2013

Early Intervention Services for Human Immunodeficiency Virus (HIV)		
1. Number of SAPT HIV EIS programs funded in the State	Statewide: _____	Rural: _____
2. Total number of individuals tested through SAPT HIV EIS funded programs		
3. Total number of HIV tests conducted with SAPT HIV EIS funds		
4. Total number of tests that were positive for HIV		
5. Total number of individuals who prior to the 12-month reporting period were unaware of their HIV infection		
6. Total number of HIV-infected individuals who were diagnosed and referred into treatment and care during the 12-month reporting period		
Identify barriers, including State laws and regulations, that exist in carrying out HIV testing services: Idaho is not a Designate State		
footnote:		

IV: Populations and Services Reports

Table 15 - Charitable Choice

Expenditure Period Start Date: 7/1/2012 Expenditure Period End Date: 6/30/2013

Notice to Program Beneficiaries - Check all that apply:

- Used model notice provided in final regulation.
- Used notice developed by State (please attach a copy to the Report).
- State has disseminated notice to religious organizations that are providers.
- State requires these religious organizations to give notice to all potential beneficiaries.

Referrals to Alternative Services - Check all that apply:

- State has developed specific referral system for this requirement.
- State has incorporated this requirement into existing referral system(s).
- SAMHSA's Treatment Facility Locator is used to help identify providers.
- Other networks and information systems are used to help identify providers.
- State maintains record of referrals made by religious organizations that are providers.
- 0 Enter total number of referrals necessitated by religious objection to other substance abuse providers ("alternative providers"), as defined above, made in previous fiscal year. Provide total only; no information on specific referrals required.

Brief description (one paragraph) of any training for local governments and faith-based and community organizations on these requirements.

Client Choice Transfer Policy Per a division mandate established in 2009, and continued in the new contract, the SUD Treatment Management Contractor was required to notify individuals that they were being referred to a faith-based organization for services, offer the client an alternative provider if requested Upon receipt of such request the SUD Treatment Management Contractor's clinical staff partners with the client to identify a provider acceptable to him/her. At any time during the treatment episode, the client may request a change of provider. As with an initial change request, the SUD Treatment Management Contractor staff will work with them to identify an acceptable non-faith-based provider and facilitate the transfer. In each case all precautions are taken to ensure the client feels respected and their privacy is maintained. All faith-based providers are notified of these requirements when they apply to become a part of the SUD Treatment Management Contractor network.

footnote:

V: Performance Indicators and Accomplishments

Table 16 - Treatment Performance Measure Employment/Education Status (From Admission to Discharge)

Short-term Residential(SR)

Employment/Education Status – Clients employed or student (full-time and part-time) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients employed or student (full-time and part-time) [numerator]	12	9
Total number of clients with non-missing values on employment/student status [denominator]	90	90
Percent of clients employed or student (full-time and part-time)	13.3 %	10.0 %
Notes (for this level of care):		
Number of CY 2012 admissions submitted:		147
Number of CY 2012 discharges submitted:		96
Number of CY 2012 discharges linked to an admission:		94
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		90
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):		90

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file
[Records received through 12/2/2013]

Long-term Residential(LR)

Employment/Education Status – Clients employed or student (full-time and part-time) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients employed or student (full-time and part-time) [numerator]	0	1
Total number of clients with non-missing values on employment/student status [denominator]	3	3
Percent of clients employed or student (full-time and part-time)	0.0 %	33.3 %
Notes (for this level of care):		
Number of CY 2012 admissions submitted:		7
Number of CY 2012 discharges submitted:		3
Number of CY 2012 discharges linked to an admission:		3

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	3
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):	3

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file
[Records received through 12/2/2013]

Outpatient (OP)

Employment/Education Status – Clients employed or student (full-time and part-time) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients employed or student (full-time and part-time) [numerator]	1,229	1,899
Total number of clients with non-missing values on employment/student status [denominator]	3,128	3,128
Percent of clients employed or student (full-time and part-time)	39.3 %	60.7 %
Notes (for this level of care):		
Number of CY 2012 admissions submitted:		3,673
Number of CY 2012 discharges submitted:		3,645
Number of CY 2012 discharges linked to an admission:		3,572
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		3,189
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):		3,128

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file
[Records received through 12/2/2013]

Intensive Outpatient (IO)

Employment/Education Status – Clients employed or student (full-time and part-time) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients employed or student (full-time and part-time) [numerator]	302	421
Total number of clients with non-missing values on employment/student status [denominator]	1,060	1,060
Percent of clients employed or student (full-time and part-time)	28.5 %	39.7 %
Notes (for this level of care):		
Number of CY 2012 admissions submitted:		2,239
Number of CY 2012 discharges submitted:		1,362
Number of CY 2012 discharges linked to an admission:		1,294

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	1,068
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):	1,060

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file
[Records received through 12/2/2013]

footnote:

V: Performance Indicators and Accomplishments

Table 17 - Treatment Performance Measure Stability of Housing (From Admission to Discharge)

Short-term Residential(SR)

Stability of Housing – Clients reporting being in a stable living situation (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients in a stable living situation [numerator]	56	57
Total number of clients with non-missing values on living arrangements [denominator]	89	89
Percent of clients in stable living situation	62.9 %	64.0 %
Notes (for this level of care):		
Number of CY 2012 admissions submitted:		147
Number of CY 2012 discharges submitted:		96
Number of CY 2012 discharges linked to an admission:		94
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		90
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):		89

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file
[Records received through 12/2/2013]

Long-term Residential(LR)

Stability of Housing – Clients reporting being in a stable living situation (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients in a stable living situation [numerator]	1	3
Total number of clients with non-missing values on living arrangements [denominator]	3	3
Percent of clients in stable living situation	33.3 %	100.0 %
Notes (for this level of care):		
Number of CY 2012 admissions submitted:		7
Number of CY 2012 discharges submitted:		3
Number of CY 2012 discharges linked to an admission:		3

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	3
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):	3

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file
[Records received through 12/2/2013]

Outpatient (OP)

Stability of Housing – Clients reporting being in a stable living situation (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients in a stable living situation [numerator]	2,928	3,013
Total number of clients with non-missing values on living arrangements [denominator]	3,104	3,104
Percent of clients in stable living situation	94.3 %	97.1 %
Notes (for this level of care):		
Number of CY 2012 admissions submitted:		3,673
Number of CY 2012 discharges submitted:		3,645
Number of CY 2012 discharges linked to an admission:		3,572
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		3,189
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):		3,104

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file
[Records received through 12/2/2013]

Intensive Outpatient (IO)

Stability of Housing – Clients reporting being in a stable living situation (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients in a stable living situation [numerator]	908	972
Total number of clients with non-missing values on living arrangements [denominator]	1,042	1,042
Percent of clients in stable living situation	87.1 %	93.3 %
Notes (for this level of care):		
Number of CY 2012 admissions submitted:		2,239
Number of CY 2012 discharges submitted:		1,362
Number of CY 2012 discharges linked to an admission:		1,294

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	1,068
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):	1,042

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file
[Records received through 12/2/2013]

footnote:

V: Performance Indicators and Accomplishments

Table 18 - Treatment Performance Measure Criminal Justice Involvement (From Admission to Discharge)

Short-term Residential(SR)

Clients without arrests (any charge) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of Clients without arrests [numerator]	78	81
Total number of Admission and Discharge clients with non-missing values on arrests [denominator]	90	90
Percent of clients without arrests	86.7 %	90.0 %
Notes (for this level of care):		
Number of CY 2012 admissions submitted:		147
Number of CY 2012 discharges submitted:		96
Number of CY 2012 discharges linked to an admission:		94
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		90
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):		90

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file
[Records received through 12/2/2013]

Long-term Residential(LR)

Clients without arrests (any charge) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of Clients without arrests [numerator]	3	3
Total number of Admission and Discharge clients with non-missing values on arrests [denominator]	3	3
Percent of clients without arrests	100.0 %	100.0 %
Notes (for this level of care):		
Number of CY 2012 admissions submitted:		7
Number of CY 2012 discharges submitted:		3
Number of CY 2012 discharges linked to an admission:		3

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	3
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):	3

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file
[Records received through 12/2/2013]

Outpatient (OP)

Clients without arrests (any charge) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of Clients without arrests [numerator]	3,378	3,145
Total number of Admission and Discharge clients with non-missing values on arrests [denominator]	3,500	3,500
Percent of clients without arrests	96.5 %	89.9 %
Notes (for this level of care):		
Number of CY 2012 admissions submitted:		3,673
Number of CY 2012 discharges submitted:		3,645
Number of CY 2012 discharges linked to an admission:		3,572
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		3,501
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):		3,500

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file
[Records received through 12/2/2013]

Intensive Outpatient (IO)

Clients without arrests (any charge) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of Clients without arrests [numerator]	1,155	1,063
Total number of Admission and Discharge clients with non-missing values on arrests [denominator]	1,249	1,249
Percent of clients without arrests	92.5 %	85.1 %
Notes (for this level of care):		
Number of CY 2012 admissions submitted:		2,239
Number of CY 2012 discharges submitted:		1,362
Number of CY 2012 discharges linked to an admission:		1,294

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	1,249
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):	1,249

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file
[Records received through 12/2/2013]

footnote:

V: Performance Indicators and Accomplishments

Table 19 - Treatment Performance Measure Change in Abstinence - Alcohol Use (From Admission to Discharge)

Short-term Residential(SR)

A. ALCOHOL ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)

Alcohol Abstinence – Clients with no alcohol use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol [numerator]	56	68
All clients with non-missing values on at least one substance/frequency of use [denominator]	90	90
Percent of clients abstinent from alcohol	62.2 %	75.6 %

B. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL USERS AT ADMISSION

Clients abstinent from alcohol at discharge among clients using alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients using alcohol at admission [numerator]		18
Number of clients using alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	34	
Percent of clients abstinent from alcohol at discharge among clients using alcohol at admission [#T2 / #T1 x 100]		52.9 %

C. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL ABSTINENT AT ADMISSION

Clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [numerator]		50
Number of clients abstinent from alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	56	
Percent of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [#T2 / #T1 x 100]		89.3 %

Notes (for this level of care):

Number of CY 2012 admissions submitted:	147
Number of CY 2012 discharges submitted:	96
Number of CY 2012 discharges linked to an admission:	94
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	90
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):	90

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file

[Records received through 12/27/2013]

Long-term Residential(LR)

A. ALCOHOL ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)

Alcohol Abstinence – Clients with no alcohol use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol [numerator]	1	3
All clients with non-missing values on at least one substance/frequency of use [denominator]	3	3
Percent of clients abstinent from alcohol	33.3 %	100.0 %

B. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL USERS AT ADMISSION

Clients abstinent from alcohol at discharge among clients using alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients using alcohol at admission [numerator]		2
Number of clients using alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	2	
Percent of clients abstinent from alcohol at discharge among clients using alcohol at admission [#T2 / #T1 x 100]		100.0 %

C. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL ABSTINENT AT ADMISSION

Clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [numerator]		1
Number of clients abstinent from alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	1	
Percent of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [#T2 / #T1 x 100]		100.0 %

Notes (for this level of care):

Number of CY 2012 admissions submitted:	7
Number of CY 2012 discharges submitted:	3
Number of CY 2012 discharges linked to an admission:	3
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	3
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):	3

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file
 [Records received through 12/2/2013]

Outpatient (OP)

A. ALCOHOL ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)

Alcohol Abstinence – Clients with no alcohol use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol [numerator]	2,496	3,203
All clients with non-missing values on at least one substance/frequency of use [denominator]	3,442	3,442
Percent of clients abstinent from alcohol	72.5 %	93.1 %

B. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL USERS AT ADMISSION

Clients abstinent from alcohol at discharge among clients using alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients using alcohol at admission [numerator]		844
Number of clients using alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	946	
Percent of clients abstinent from alcohol at discharge among clients using alcohol at admission [#T2 / #T1 x 100]		89.2 %

C. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL ABSTINENT AT ADMISSION

Clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [numerator]		2,359
Number of clients abstinent from alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	2,496	
Percent of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [#T2 / #T1 x 100]		94.5 %

Notes (for this level of care):

Number of CY 2012 admissions submitted:		3,673
Number of CY 2012 discharges submitted:		3,645
Number of CY 2012 discharges linked to an admission:		3,572
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		3,501
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):		3,442

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file
[Records received through 12/2/2013]

Intensive Outpatient (IO)

A. ALCOHOL ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)

Alcohol Abstinence – Clients with no alcohol use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol [numerator]	913	1,064

All clients with non-missing values on at least one substance/frequency of use [denominator]	1,241	1,241
Percent of clients abstinent from alcohol	73.6 %	85.7 %

B. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL USERS AT ADMISSION

Clients abstinent from alcohol at discharge among clients using alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients using alcohol at admission [numerator]		230
Number of clients using alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator])	328	
Percent of clients abstinent from alcohol at discharge among clients using alcohol at admission [#T2 / #T1 x 100]		70.1 %

C. ALCOHOL ABSTINENCE AT DISCHARGE, AMONG ALCOHOL ABSTINENT AT ADMISSION

Clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [numerator]		834
Number of clients abstinent from alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator])	913	
Percent of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [#T2 / #T1 x 100]		91.3 %

Notes (for this level of care):

Number of CY 2012 admissions submitted:	2,239
Number of CY 2012 discharges submitted:	1,362
Number of CY 2012 discharges linked to an admission:	1,294
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	1,249
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):	1,241

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file
[Records received through 12/2/2013]

footnote:

V: Performance Indicators and Accomplishments

Table 20 - Treatment Performance Measure Change in Abstinence - Other Drug Use (From Admission to Discharge)

Short-term Residential(SR)

A. DRUG ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)

Drug Abstinence – Clients with no Drug use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs [numerator]	7	33
All clients with non-missing values on at least one substance/frequency of use [denominator]	90	90
Percent of clients abstinent from drugs	7.8 %	36.7 %

B. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG USERS AT ADMISSION

Clients abstinent from Drug at discharge among clients using Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients using drugs at admission [numerator]		29
Number of clients using drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	83	
Percent of clients abstinent from drugs at discharge among clients using Drug at admission [#T2 / #T1 x 100]		34.9 %

C. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG ABSTINENT AT ADMISSION

Clients abstinent from Drug at discharge among clients abstinent from Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients abstinent from drugs at admission [numerator]		4
Number of clients abstinent from drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	7	
Percent of clients abstinent from drugs at discharge among clients abstinent from Drug at admission [#T2 / #T1 x 100]		57.1 %

Notes (for this level of care):

Number of CY 2012 admissions submitted:	147
Number of CY 2012 discharges submitted:	96
Number of CY 2012 discharges linked to an admission:	94
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	90
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):	90

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file

[Records received through 12/2/2013]

Long-term Residential(LR)

A. DRUG ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)

Drug Abstinence – Clients with no Drug use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs [numerator]	1	3
All clients with non-missing values on at least one substance/frequency of use [denominator]	3	3
Percent of clients abstinent from drugs	33.3 %	100.0 %

B. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG USERS AT ADMISSION

Clients abstinent from Drug at discharge among clients using Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients using drugs at admission [numerator]		2
Number of clients using drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	2	
Percent of clients abstinent from drugs at discharge among clients using Drug at admission [#T2 / #T1 x 100]		100.0 %

C. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG ABSTINENT AT ADMISSION

Clients abstinent from Drug at discharge among clients abstinent from Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients abstinent from drugs at admission [numerator]		1
Number of clients abstinent from drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	1	
Percent of clients abstinent from drugs at discharge among clients abstinent from Drug at admission [#T2 / #T1 x 100]		100.0 %

Notes (for this level of care):

Number of CY 2012 admissions submitted:	7
Number of CY 2012 discharges submitted:	3
Number of CY 2012 discharges linked to an admission:	3
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	3
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):	3

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file
[Records received through 12/2/2013]

Outpatient (OP)

A. DRUG ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)

Drug Abstinence – Clients with no Drug use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs [numerator]	2,146	3,075
All clients with non-missing values on at least one substance/frequency of use [denominator]	3,442	3,442
Percent of clients abstinent from drugs	62.3 %	89.3 %

B. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG USERS AT ADMISSION

Clients abstinent from Drug at discharge among clients using Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients using drugs at admission [numerator]		1,086
Number of clients using drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	1,296	
Percent of clients abstinent from drugs at discharge among clients using Drug at admission [#T2 / #T1 x 100]		83.8 %

C. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG ABSTINENT AT ADMISSION

Clients abstinent from Drug at discharge among clients abstinent from Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients abstinent from drugs at admission [numerator]		1,989
Number of clients abstinent from drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	2,146	
Percent of clients abstinent from drugs at discharge among clients abstinent from Drug at admission [#T2 / #T1 x 100]		92.7 %

Notes (for this level of care):

Number of CY 2012 admissions submitted:	3,673
Number of CY 2012 discharges submitted:	3,645
Number of CY 2012 discharges linked to an admission:	3,572
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	3,501
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):	3,442

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file
[Records received through 12/2/2013]

Intensive Outpatient (IO)

A. DRUG ABSTINENCE AMONG ALL CLIENTS – CHANGE IN ABSTINENCE (From Admission to Discharge)

Drug Abstinence – Clients with no Drug use at admission vs. discharge, as a percent of all clients (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs [numerator]	540	891

All clients with non-missing values on at least one substance/frequency of use [denominator]	1,241	1,241
Percent of clients abstinent from drugs	43.5 %	71.8 %

B. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG USERS AT ADMISSION

Clients abstinent from Drug at discharge among clients using Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients using drugs at admission [numerator]		426
Number of clients using drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator])	701	
Percent of clients abstinent from drugs at discharge among clients using Drug at admission [#T2 / #T1 x 100]		60.8 %

C. DRUG ABSTINENCE AT DISCHARGE, AMONG DRUG ABSTINENT AT ADMISSION

Clients abstinent from Drug at discharge among clients abstinent from Drug at admission (regardless of primary problem)

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients abstinent from drugs at admission [numerator]		465
Number of clients abstinent from drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator])	540	
Percent of clients abstinent from drugs at discharge among clients abstinent from Drug at admission [#T2 / #T1 x 100]		86.1 %

Notes (for this level of care):

Number of CY 2012 admissions submitted:	2,239
Number of CY 2012 discharges submitted:	1,362
Number of CY 2012 discharges linked to an admission:	1,294
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	1,249
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):	1,241

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file
[Records received through 12/2/2013]

footnote:

V: Performance Indicators and Accomplishments

Table 21 - Treatment Performance Measure Change in Social Support Of Recovery (From Admission to Discharge)

Short-term Residential(SR)

Social Support of Recovery – Clients attending Self-help Programs (e.g., AA, NA, etc.) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients attending self-help programs [numerator]	0	0
Total number of clients with non-missing values on self-help attendance [denominator]	0	0
Percent of clients attending self-help programs	0.0 %	0.0 %
Percent of clients with self-help attendance at discharge minus percent of clients with self-help attendance at admission Absolute Change [%T2-%T1]	0.0 %	
Notes (for this level of care):		
Number of CY 2012 admissions submitted:		147
Number of CY 2012 discharges submitted:		96
Number of CY 2012 discharges linked to an admission:		94
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		90
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):		0

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file
[Records received through 12/2/2013]

Long-term Residential(LR)

Social Support of Recovery – Clients attending Self-help Programs (e.g., AA, NA, etc.) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients attending self-help programs [numerator]	0	0
Total number of clients with non-missing values on self-help attendance [denominator]	0	0
Percent of clients attending self-help programs	0.0 %	0.0 %
Percent of clients with self-help attendance at discharge minus percent of clients with self-help attendance at admission Absolute Change [%T2-%T1]	0.0 %	
Notes (for this level of care):		
Number of CY 2012 admissions submitted:		7
Number of CY 2012 discharges submitted:		3

Number of CY 2012 discharges linked to an admission:	3
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	3
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):	0

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file
[Records received through 12/2/2013]

Outpatient (OP)

Social Support of Recovery – Clients attending Self-help Programs (e.g., AA, NA, etc.) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients attending self-help programs [numerator]	0	0
Total number of clients with non-missing values on self-help attendance [denominator]	0	0
Percent of clients attending self-help programs	0.0 %	0.0 %
Percent of clients with self-help attendance at discharge minus percent of clients with self-help attendance at admission Absolute Change [%T2-%T1]	0.0 %	

Notes (for this level of care):

Number of CY 2012 admissions submitted:	3,673
Number of CY 2012 discharges submitted:	3,645
Number of CY 2012 discharges linked to an admission:	3,572
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	3,501
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):	0

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file
[Records received through 12/2/2013]

Intensive Outpatient (IO)

Social Support of Recovery – Clients attending Self-help Programs (e.g., AA, NA, etc.) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of clients attending self-help programs [numerator]	0	0
Total number of clients with non-missing values on self-help attendance [denominator]	0	0
Percent of clients attending self-help programs	0.0 %	0.0 %
Percent of clients with self-help attendance at discharge minus percent of clients with self-help attendance at admission Absolute Change [%T2-%T1]	0.0 %	

Notes (for this level of care):

Number of CY 2012 admissions submitted:	2,239
Number of CY 2012 discharges submitted:	1,362
Number of CY 2012 discharges linked to an admission:	1,294
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	1,249
Number of CY 2012 linked discharges eligible for this calculation (non-missing values):	0

Source: SAMHSA/CBHSQ TEDS CY 2012 admissions file and CY 2012 linked discharge file
[Records received through 12/2/2013]

footnote:

V: Performance Indicators and Accomplishments

Table 22 - Retention - Length of Stay (in Days) of Clients Completing Treatment

Manually Enter Data				
Level of Care	Average (Mean)	25 th Percentile	50 th Percentile (Median)	75 th Percentile
DETOXIFICATION (24-HOUR CARE)				
1. Hospital Inpatient	0	0	0	0
2. Free-Standing Residential	22	1	2	4
REHABILITATION/RESIDENTIAL				
3. Hospital Inpatient	0	0	0	0
4. Short-term (up to 30 days)	47	16	31	54
5. Long-term (over 30 days)	105	50	83	183
AMBULATORY (OUTPATIENT)				
6. Outpatient	181	78	142	231
7. Intensive Outpatient	100	29	65	133
8. Detoxification	0	0	0	0
OPIOID REPLACEMENT THERAPY				
9. Opioid Replacement Therapy	0	0	0	0
10. ORT Outpatient	197	62	142	245

Level of Care	2012 TEDS discharge record count	
	Discharges submitted	Discharges linked to an admission
DETOXIFICATION (24-HOUR CARE)		
1. Hospital Inpatient	0	0
2. Free-Standing Residential	27	24
REHABILITATION/RESIDENTIAL		

3. Hospital Inpatient	0	0
4. Short-term (up to 30 days)	96	94
5. Long-term (over 30 days)	3	3
AMBULATORY (OUTPATIENT)		
6. Outpatient	3645	3504
7. Intensive Outpatient	1362	1294
8. Detoxification	0	0
OPIOID REPLACEMENT THERAPY		
9. Opioid Replacement Therapy	0	0
10. ORT Outpatient	0	68

Source: SAMHSA/CBHSQ TEDS CY 2012 linked discharge file
[Records received through 12/2/2013]

footnote:

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Table 23 - Prevention Performance Measures - Reduced Morbidity-Abstinence from Drug Use/Alcohol Use; Measure: 30 Day Use

A. Measure	B. Question/Response	C. Pre- populated Data	D. Approved Substitute Data
1. 30-day Alcohol Use	Source Survey Item: NSDUH Questionnaire. "Think specifically about the past 30 days, that is, from [DATEFILL] through today. During the past 30 days, on how many days did you drink one or more drinks of an alcoholic beverage?[Response option: Write in a number between 0 and 30.] Outcome Reported: Percent who reported having used alcohol during the past 30 days.		
	Age 12 - 17 - CY 2010 - 2011	12.0	<input type="text"/>
	Age 18+ - CY 2010 - 2011	55.2	<input type="text"/>
2. 30-day Cigarette Use	Source Survey Item: NSDUH Questionnaire: "During the past 30 days, that is, since [DATEFILL], on how many days did you smoke part or all of a cigarette?[Response option: Write in a number between 0 and 30.] Outcome Reported: Percent who reported having smoked a cigarette during the past 30 days.		
	Age 12 - 17 - CY 2010 - 2011	8.7	<input type="text"/>
	Age 18+ - CY 2010 - 2011	25.2	<input type="text"/>
3. 30-day Use of Other Tobacco Products	Survey Item: NSDUH Questionnaire: "During the past 30 days, that is, since [DATEFILL], on how many days did you use [other tobacco products] ^[1] ?[Response option: Write in a number between 0 and 30.] Outcome Reported: Percent who reported having used a tobacco product other than cigarettes during the past 30 days, calculated by combining responses to questions about individual tobacco products (snuff, chewing tobacco, pipe tobacco).		
	Age 12 - 17 - CY 2010 - 2011	6.0	<input type="text"/>
	Age 18+ - CY 2010 - 2011	9.2	<input type="text"/>
4. 30-day Use of Marijuana	Source Survey Item: NSDUH Questionnaire: "Think specifically about the past 30 days, from [DATEFILL] up to and including today. During the past 30 days, on how many days did you use marijuana or hashish?[Response option: Write in a number between 0 and 30.] Outcome Reported: Percent who reported having used marijuana or hashish during the past 30 days.		
	Age 12 - 17 - CY 2010 - 2011	7.8	<input type="text"/>
	Age 18+ - CY 2010 - 2011	7.8	<input type="text"/>
5. 30-day Use of Illegal Drugs Other Than Marijuana	Source Survey Item: NSDUH Questionnaire: "Think specifically about the past 30 days, from [DATEFILL] up to and including today. During the past 30 days, on how many days did you use [any other illegal drug] ^[2] ? Outcome Reported: Percent who reported having used illegal drugs other than marijuana or hashish during the past 30 days, calculated by combining responses to questions about individual drugs (heroin, cocaine, stimulants, hallucinogens, inhalants, prescription drugs used without doctors'orders).		
	Age 12 - 17 - CY 2010 - 2011	5.0	<input type="text"/>
	Age 18+ - CY 2010 - 2011	3.8	<input type="text"/>

[1]NSDUH asks separate questions for each tobacco product. The number provided combines responses to all questions about tobacco products other than cigarettes.
[2]NSDUH asks separate questions for each illegal drug. The number provided combines responses to all questions about illegal drugs other than marijuana or hashish.

footnote:

V: Performance Indicators and Accomplishments

Table 24 - Prevention Performance Measures - Reduced Morbidity-Abstinence from Drug Use/Alcohol Use; Measure: Perception Of Risk/Harm of Use

A. Measure	B. Question/Response	C. Pre- populated Data	D. Approved Substitute Data
1. Perception of Risk From Alcohol	Source Survey Item: NSDUH Questionnaire: "How much do people risk harming themselves physically and in other ways when they have five or more drinks of an alcoholic beverage once or twice a week?[Response options: No risk, slight risk, moderate risk, great risk] Outcome Reported: Percent reporting moderate or great risk.		
	Age 12 - 17 - CY 2010 - 2011	75.4	<input type="text"/>
	Age 18+ - CY 2010 - 2011	79.2	<input type="text"/>
2. Perception of Risk From Cigarettes	Source Survey Item: NSDUH Questionnaire: "How much do people risk harming themselves physically and in other ways when they smoke one or more packs of cigarettes per day?[Response options: No risk, slight risk, moderate risk, great risk] Outcome Reported: Percent reporting moderate or great risk.		
	Age 12 - 17 - CY 2010 - 2011	91.9	<input type="text"/>
	Age 18+ - CY 2010 - 2011	93.8	<input type="text"/>
3. Perception of Risk From Marijuana	Source Survey Item: NSDUH Questionnaire: "How much do people risk harming themselves physically and in other ways when they smoke marijuana once or twice a week?[Response options: No risk, slight risk, moderate risk, great risk] Outcome Reported: Percent reporting moderate or great risk.		
	Age 12 - 17 - CY 2010 - 2011	75.8	<input type="text"/>
	Age 18+ - CY 2010 - 2011	69.2	<input type="text"/>

footnote:

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Table 25 - Prevention Performance Measures - Reduced Morbidity-Abstinence from Drug Use/Alcohol Use; Measure: Age of First Use

A. Measure	B. Question/Response	C. Pre- populated Data	D. Approved Substitute Data
1. Age at First Use of Alcohol	Source Survey Item: NSDUH Questionnaire: "Think about the first time you had a drink of an alcoholic beverage. How old were you the first time you had a drink of an alcoholic beverage? Please do not include any time when you only had a sip or two from a drink.?[Response option: Write in age at first use.] Outcome Reported: Average age at first use of alcohol.risk.		
	Age 12 - 17 - CY 2010 - 2011	12.9	<input type="text"/>
	Age 18+ - CY 2010 - 2011	16.6	<input type="text"/>
2. Age at First Use of Cigarettes	Source Survey Item: NSDUH Questionnaire: "How old were you the first time you smoked part or all of a cigarette?[Response option: Write in age at first use.] Outcome Reported: Average age at first use of cigarettes.		
	Age 12 - 17 - CY 2010 - 2011	12.6	<input type="text"/>
	Age 18+ - CY 2010 - 2011	15.7	<input type="text"/>
3. Age at First Use of Tobacco Products Other Than Cigarettes	Source Survey Item: NSDUH Questionnaire: "How old were you the first time you used [any other tobacco product] ^[1] ?[Response option: Write in age at first use.] Outcome Reported: Average age at first use of tobacco products other than cigarettes.		
	Age 12 - 17 - CY 2010 - 2011	13.5	<input type="text"/>
	Age 18+ - CY 2010 - 2011	18.9	<input type="text"/>
4. Age at First Use of Marijuana or Hashish	Source Survey Item: NSDUH Questionnaire: "How old were you the first time you used marijuana or hashish?[Response option: Write in age at first use.] Outcome Reported: Average age at first use of marijuana or hashish.		
	Age 12 - 17 - CY 2010 - 2011	13.6	<input type="text"/>
	Age 18+ - CY 2010 - 2011	18.3	<input type="text"/>
5. Age at First Use of Illegal Drugs Other Than Marijuana or Hashish	Source Survey Item: NSDUH Questionnaire: "How old were you the first time you used [other illegal drugs] ^[2] ?[Response option: Write in age at first use.] Outcome Reported: Average age at first use of other illegal drugs.		
	Age 12 - 17 - CY 2010 - 2011	13.1	<input type="text"/>
	Age 18+ - CY 2010 - 2011	19.9	<input type="text"/>

[1]The question was asked about each tobacco product separately, and the youngest age at first use was taken as the measure.

[2]The question was asked about each drug in this category separately, and the youngest age at first use was taken as the measure.

footnote:

V: Performance Indicators and Accomplishments

Table 26 - Prevention Performance Measures - Reduced Morbidity-Abstinence from Drug Use/Alcohol Use; Measure: Perception of Disapproval/Attitudes

A. Measure	B. Question/Response	C. Pre- populated Data	D. Approved Substitute Data
1. Disapproval of Cigarettes	Source Survey Item: NSDUH Questionnaire: "How do you feel about someone your age smoking one or more packs of cigarettes a day?[Response options: Neither approve nor disapprove, somewhat disapprove, strongly disapprove] Outcome Reported: Percent somewhat or strongly disapproving.		
	Age 12 - 17 - CY 2010 - 2011	89.2	<input type="text"/>
2. Perception of Peer Disapproval of Cigarettes	Source Survey Item: NSDUH Questionnaire: "How do you think your close friends would feel about you smoking one or more packs of cigarettes a day?[Response options: Neither approve nor disapprove, somewhat disapprove, strongly disapprove] Outcome Reported: Percent reporting that their friends would somewhat or strongly disapprove.		
	Age 12 - 17 - CY 2010 - 2011	88.5	<input type="text"/>
3. Disapproval of Using Marijuana Experimentally	Source Survey Item: NSDUH Questionnaire: "How do you feel about someone your age trying marijuana or hashish once or twice?[Response options: Neither approve nor disapprove, somewhat disapprove, strongly disapprove] Outcome Reported: Percent somewhat or strongly disapproving.		
	Age 12 - 17 - CY 2010 - 2011	80.5	<input type="text"/>
4. Disapproval of Using Marijuana Regularly	Source Survey Item: NSDUH Questionnaire: "How do you feel about someone your age using marijuana once a month or more?[Response options: Neither approve nor disapprove, somewhat disapprove, strongly disapprove] Outcome Reported: Percent somewhat or strongly disapproving.		
	Age 12 - 17 - CY 2010 - 2011	81.1	<input type="text"/>
5. Disapproval of Alcohol	Source Survey Item: NSDUH Questionnaire: "How do you feel about someone your age having one or two drinks of an alcoholic beverage nearly every day?[Response options: Neither approve nor disapprove, somewhat disapprove, strongly disapprove] Outcome Reported: Percent somewhat or strongly disapproving.		
	Age 12 - 17 - CY 2010 - 2011	85.4	<input type="text"/>

footnote:

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Table 27 - Prevention Performance Measures - Employment/Education; Measure: Perception of Workplace Policy

A. Measure	B. Question/Response	C. Pre- populated Data	D. Approved Substitute Data
Perception of Workplace Policy	Source Survey Item: NSDUH Questionnaire: "Would you be more or less likely to want to work for an employer that tests its employees for drug or alcohol use on a random basis? Would you say more likely, less likely, or would it make no difference to you?[Response options: More likely, less likely, would make no difference] Outcome Reported: Percent reporting that they would be more likely to work for an employer conducting random drug and alcohol tests.		
	Age 18+ - CY 2010 - 2011	46.1	<input type="text"/>
	Age 12 - 17 - CY 2010 - 2011		<input type="text"/>

footnote:

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Table 28 - Prevention Performance Measures - Employment/Education; Measure: Average Daily School Attendance Rate

A. Measure	B. Question/Response	C. Pre- populated Data	D. Approved Substitute Data
Average Daily School Attendance Rate	Source: National Center for Education Statistics, Common Core of Data: <i>The National Public Education Finance Survey</i> available for download at http://nces.ed.gov/ccd/stfis.asp . Measure calculation: Average daily attendance (NCES defined) divided by total enrollment and multiplied by 100.		
	CY 2010	94.9	<input type="text"/>

footnote:

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Table 29 - Prevention Performance Measures - Crime and Criminal Justice; Measure: Alcohol-Related Traffic Fatalities

A. Measure	B. Question/Response	C. Pre- populated Data	D. Approved Substitute Data
Alcohol-Related Traffic Fatalities	Source: National Highway Traffic Safety Administration Fatality Analysis Reporting System Measure calculation: The number of alcohol-related traffic fatalities divided by the total number of traffic fatalities and multiplied by 100.		
	CY 2011	32.9	<input type="text"/>

footnote:

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Table 30 - Prevention Performance Measures - Crime and Criminal Justice; Measure: Alcohol and Drug Related Arrests

A. Measure	B. Question/Response	C. Pre- populated Data	D. Approved Substitute Data
Alcohol- and Drug- Related Arrests	Source: Federal Bureau of Investigation Uniform Crime Reports Measure calculation: The number of alcohol- and drug-related arrests divided by the total number of arrests and multiplied by 100.		
	CY 2011	33.4	<input type="text"/>

footnote:

V: Performance Indicators and Accomplishments

Table 31 - Prevention Performance Measures - Social Connectedness; Measure: Family Communications Around Drug and Alcohol Use

A. Measure	B. Question/Response	C. Pre- populated Data	D. Approved Substitute Data
1. Family Communications Around Drug and Alcohol Use (Youth)	Source Survey Item: NSDUH Questionnaire: "Now think about the past 12 months, that is, from [DATEFILL] through today. During the past 12 months, have you talked with at least one of your parents about the dangers of tobacco, alcohol, or drug use? By parents, we mean either your biological parents, adoptive parents, stepparents, or adult guardians, whether or not they live with you.?[Response options: Yes, No] Outcome Reported: Percent reporting having talked with a parent.		
	Age 12 - 17 - CY 2010 - 2011	61.9	<input type="text"/>
2. Family Communications Around Drug and Alcohol Use (Parents of children aged 12-17)	Source Survey Item: NSDUH Questionnaire: "During the past 12 months, how many times have you talked with your child about the dangers or problems associated with the use of tobacco, alcohol, or other drugs?^[1][Response options: 0 times, 1 to 2 times, a few times, many times] Outcome Reported: Percent of parents reporting that they have talked to their child.		
	Age 18+ - CY 2010 - 2011	91.5	<input type="text"/>

[1]NSDUH does not ask this question of all sampled parents. It is a validation question posed to parents of 12- to 17-year-old survey respondents. Therefore, the responses are not representative of the population of parents in a State. The sample sizes are often too small for valid reporting.

footnote:

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Table 32 - Prevention Performance Measures - Retention; Measure: Percentage of Youth Seeing, Reading, Watching, or Listening to a Prevention Message

A. Measure	B. Question/Response	C. Pre- populated Data	D. Approved Substitute Data
Exposure to Prevention Messages	Source Survey Item: NSDUH Questionnaire: "During the past 12 months, do you recall [hearing, reading, or watching an advertisement about the prevention of substance use] ^[1] ? Outcome Reported: Percent reporting having been exposed to prevention message.		
	Age 12 - 17 - CY 2010 - 2011	93.4	<input type="text"/>

[1]This is a summary of four separate NSDUH questions each asking about a specific type of prevention message delivered within a specific context having been exposed to prevention message.

footnote:

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Table 33-37 - Reporting Period - Start and End Dates for Information Reported on Tables 33, 34, 35, 36, and 37

Reporting Period Start and End Dates for Information Reported on Tables 33, 34, 35, 36 and 37

Please indicate the reporting period (start date and end date totaling 12 months by the State) for each of the following forms:

Tables	A. Reporting Period Start Date	B. Reporting Period End Date
1. Table 33 - Prevention Performance Measures - Individual-Based Programs and Strategies; Measure: Number of Persons Served By Age, Gender, Race, And Ethnicity	7/1/2010	6/30/2011
2. Table 34 - Prevention Performance Measures - Population-Based Programs And Strategies; Measure: Number of Persons Served By Age, Gender, Race, And Ethnicity	7/1/2010	6/30/2011
3. Table 35 - Prevention Performance Measures - Number of Persons Served by Type of Intervention	7/1/2010	6/30/2011
4. Table 36 - Prevention Performance Measures - Number of Evidence-Based Programs by Types of Intervention	7/1/2010	6/30/2011
5. Table 37 - Prevention Performance Measures - Total Number of Evidence-Based Programs and Total SAPTBG Dollars Spent on Evidence-Based Programs/Strategies	7/1/2010	6/30/2011

Question 1: Describe the data collection system you used to collect the NOMs data (e.g., MDS, DbB, KIT Solutions, manual process).

Response: Idaho's prevention data collection system, www.PreventionIdaho.Net, was designed to the CSAP/ORC Macro MDS 3.4b specification. Following that specification, each participant indicates their primary racial category using US Census Bureau racial definitions. In accordance with the MDS 3.4b spec, Idaho's Multi-Racial category and Other category are distinct groups and are not duplicated in the other racial categories. Idaho's Hispanic Ethnicity data were captured independently of Race.

Question 2: Describe how your State's data collection and reporting processes record a participant's race, specifically for participants who are more than one race.

Indicate whether the State added those participants to the number for each applicable racial category or whether the State added all those participants to the More Than One Race subcategory.

Response: Participants with more than one race are indicated in the Multi-Racial category (More than one Race). Per MDS 3.4b spec, the participant's "primary race" is Multi and is not duplicated in the counts for other races. Idaho's Hispanic Ethnicity data were captured independently of Race.

footnote:

Data report on Tables 33 - 37 cover Idaho State Fiscal Year 2011 which started 7/1/2010 and ended 6/30/2011

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Table 33 - Prevention Performance Measures - Individual-Based Programs and Strategies; Measure: Number of Persons Served By Age, Gender, Race, And Ethnicity

Category	Total
Age	
0-4	166
5-11	10607
12-14	7849
15-17	2425
18-20	365
21-24	38
25-44	542
45-64	182
65 and over	15
Age Not Known	1
Gender	
Male	11673
Female	10517
Gender Unknown	0
Race	
White	17303
Black or African American	200
Native Hawaiian/Other Pacific Islander	75
Asian	182
American Indian/Alaska Native	401
More Than One Race (not OMB required)	302

Race Not Known or Other (not OMB required)	3727
Ethnicity	
Hispanic or Latino	3594
Not Hispanic or Latino	18596

Question 1: Describe the data collection system you used to collect the NOMs data (e.g., MDS, DbB, KIT Solutions, manual process).

Idaho's prevention data collection system, www.PreventionIdaho.Net, was designed to the CSAP/ORC Macro MDS 3.4b specification. Following that specification, each participant indicates their primary racial category using US Census Bureau racial definitions. In accordance with the MDS 3.4b spec, Idaho's Multi-Racial category and Other category are distinct groups and are not duplicated in the other racial categories. Idaho's Hispanic Ethnicity data were captured independently of Race.

Question 2: Describe how your State's data collection and reporting processes record a participant's race, specifically for participants who are more than one race.

Indicate whether the State added those participants to the number for each applicable racial category or whether the State added all those participants to the More Than One Race subcategory.

Participants with more than one race are indicated in the Multi-Racial category (More than one Race). Per MDS 3.4b spec, the participant's "primary race" is Multi and is not duplicated in the counts for other races. Idaho's Hispanic Ethnicity data were captured independently of Race.

footnote:

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Table 34 - Prevention Performance Measures - Population-Based Programs And Strategies; Measure: Number of Persons Served By Age, Gender, Race, And Ethnicity

Category	Total
Age	
0-4	1175237
5-11	1395418
12-14	902998
15-17	668007
18-20	654206
21-24	835471
25-44	3865991
45-64	3752841
65 and over	1878766
Age Not Known	0
Gender	
Male	7579262
Female	7549673
Gender Unknown	
Race	
White	13477674
Black or African American	94678
Native Hawaiian/Other Pacific Islander	22362
Asian	184037
American Indian/Alaska Native	206930
More Than One Race (not OMB required)	375767

Race Not Known or Other (not OMB required)	767487
Ethnicity	
Hispanic or Latino	1694441
Not Hispanic or Latino	13434494

footnote:

V: Performance Indicators and Accomplishments

Table 35 - Prevention Performance Measures - Number of Persons Served by Type of Intervention

Number of Persons Served by Individual- or Population-Based Program or Strategy

Intervention Type	A. Individual-Based Programs and Strategies	B. Population-Based Programs and Strategies
1. Universal Direct	200339	N/A
2. Universal Indirect	N/A	15128935
3. Selective	2151	N/A
4. Indicated		N/A
5. Total	202490	15128935

footnote:

V: Performance Indicators and Accomplishments

Table 36 - Prevention Performance Measures - Number of Evidence-Based Programs by Types of Intervention

1. Describe the process the State will use to implement the guidelines included in the above definition.

Idaho has established an Evidence-based Program Evaluation Workdgroup which is part of the SEOW workgroups. this workgroup, composed of individuals with program delivery, state agency and research and evaluation experience will review all new programs proposed to deliver prevention services. Currently funded programs will also be reviewed by evaluating Idaho outcome data.

2. Describe how the State collected data on the number of programs and strategies. What is the source of the data?

The state will use the NREPP model as a basis for reviewing program effectiveness. Pre and post-data, collected on all services delivered, will be evaluated for initial outcome evaluateion. This data will be augmented by using the state's newly developed Youth Behavioral Health survey which will enable the Workgroup to evaluate long-term program impacts.

Table 36 - SUBSTANCE ABUSE PREVENTION Number of Evidence-Based Programs and Strategies by Type of Intervention

	A. Universal Direct	B. Universal Indirect	C. Universal Total	D. Selective	E. Indicated	F. Total
1. Number of Evidence-Based Programs and Strategies Funded	1216	490	1706	279	0	1985
2. Total number of Programs and Strategies Funded	1216	490	1706	279	0	1985
3. Percent of Evidence-Based Programs and Strategies	100.00 %	100.00 %	100.00 %	100.00 %		100.00 %

footnote:

V: Performance Indicators and Accomplishments

Table 37 - Prevention Performance Measures - Total Number of Evidence-Based Programs and Total SAPTBG Dollars Spent on Evidence-Based Programs/Strategies

	Total Number of Evidence-Based Programs/Strategies for IOM Category Below	Total SAPT Block Grant Dollars Spent on evidence-based Programs/Strategies
Universal Direct	Total # <input type="text" value="1216"/>	\$ <input type="text" value="936366.00"/>
Universal Indirect	Total # <input type="text" value="490"/>	\$ <input type="text" value="50369.00"/>
Selective	Total # <input type="text" value="279"/>	\$ <input type="text" value="351220.00"/>
Indicated	Total # <input type="text" value="0"/>	\$ <input type="text" value="0.00"/>
	Total EBPs: 1985	Total Dollars Spent: \$1337955.00

footnote:

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Prevention Attachments

Submission Uploads

FFY 2013 Prevention Attachment Category A:	<input type="text"/>	<input type="button" value="Browse..."/>	<input type="button" value="Upload"/>
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FFY 2013 Prevention Attachment Category B:	<input type="text"/>	<input type="button" value="Browse..."/>	<input type="button" value="Upload"/>
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FFY 2013 Prevention Attachment Category C:	<input type="text"/>	<input type="button" value="Browse..."/>	<input type="button" value="Upload"/>
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FFY 2013 Prevention Attachment Category D:	<input type="text"/>	<input type="button" value="Browse..."/>	<input type="button" value="Upload"/>
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