

I: State Information

State Information

I. State Agency for the Block Grant

Agency Name Nebraska Department of Health and Human Services

Organizational Unit Division of Behavioral Health

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III. Expenditure Period

State Expenditure Period

From 7/1/2013

To 6/30/2014

Block Grant Expenditure Period

From 10/1/2011

To 9/30/2013

IV. Date Submitted

Submission Date 12/1/2014 8:57:07 AM

Revision Date

V. Contact Person Responsible for Report Submission

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footnote:

II: Annual Report

Table 1 Priority Area and Annual Performance Indicators - Progress Report

Priority #: 1
Priority Area: Prevention: Alcohol Use Among Youth
Priority Type: SAP
Population(s): Other (Adolescents w/SA and/or MH, LGBTQ, Rural, Criminal/Juvenile Justice, Children/Youth at Risk for BH Disorder, Homeless, Asian, Native Hawaiian/Other Pacific Islanders, Underserved Racial and Ethnic Minorities, under age youth who drink alcohol)

Goal of the priority area:

Reduce binge drinking among youth up to age 17.

Strategies to attain the goal:

Percentage of students in 9th-12th grade who reported having five or more drinks on at least one occasion in the past 30 days will decrease to 15%.

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Prevention: Alcohol Use Among Youth
Baseline Measurement: Percentage of students in 9th-12th grade who reported having five or more drinks on at least one occasion in the past 30 days was 16.4% in 2011.
First-year target/outcome measurement: percentage of students in 9th-12th grade who reported having five or more drinks on at least one occasion in the past 30 days will report 15% in 2013.
Second-year target/outcome measurement: N/A because the survey is conducted every 2 years (see below).
New Second-year target/outcome measurement (*if needed*):

Data Source:

Centers for Disease Control and Prevention (CDC), Youth Risk Behavior Survey (YRBS), 2001–2011.

New Data Source (*if needed*):

Description of Data:

The Youth Risk Behavior Surveillance System is a national school-based survey conducted by the CDC and state, territorial, tribal, and local education and health agencies and tribal governments. This survey monitors six types of health-risk behaviors that contribute to the leading causes of death and disability among youth and adults, including behaviors that contribute to unintentional injuries and violence, sexual behaviors that contribute to unintended pregnancy and sexually transmitted diseases, including HIV infection, alcohol and other drug use, tobacco use, unhealthy dietary behaviors, inadequate physical activity and the prevalence of obesity and asthma among youth and young adults.

New Description of Data: (*if needed*)

Data issues/caveats that affect outcome measures:

This survey is conducted every 2 years, which means data will not be available in FY15. YRBS is designed to produce information to help assess the effect of broad national, state, territorial, tribal, and local policies and programs and is not designed to evaluate the effectiveness of specific interventions. Many behaviors (e.g., alcohol and other drug use) measured by YRBS are associated with educational and social outcomes, including absenteeism, poor academic achievement, and dropping out of school, therefore, the survey focuses almost exclusively on health-risk behaviors rather than on the determinants of these behaviors (e.g., knowledge, attitudes, beliefs, and skills).

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved *(optional)*:

Status: 13.6% of students indicated that they had five or more drinks of alcohol in a row within the last 30 days as reported in the most recent YRBS data.

Priority #: 2

Priority Area: Youth: Improved Family Functioning

Priority Type: MHS

Population(s): SED

Goal of the priority area:

Families and youth receiving services will experience improved family functioning.

Strategies to attain the goal:

% of youth under the age of 18 / Families admitted to the Professional Partner Program (PPP) will be assessed using the designated tool for family functioning to establish a baseline measure of family functioning.

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Youth: Improved Family Functioning in the Professional Partner Program (PPP)

Baseline Measurement: tool is selected; baseline is 0%.

First-year target/outcome measurement: By June 30, 2014, 25% of the families admitted to the PPP in SFY2014 will receive an assessment of family functioning through the use of the selected tool.

Second-year target/outcome measurement: By June 30, 2015, 95% of the families admitted to the PPP in SFY2015 will receive an assessment of family functioning through the use of the selected tool.

New Second-year target/outcome measurement *(if needed)*:

Data Source:

Data from the selected tool is reported by the six Regional Behavioral Health Authorities to Division of Behavioral Health.

New Data Source *(if needed)*:

Description of Data:

The Division of Behavioral Health intends to establish a designated tool for family functioning to be used by the Professional Partner Program (PPP) by July 2013. Then the PPP providers will need to be trained on using the tool. The data system for collecting and reporting the tool needs to be established. The intent is to be collecting the data by January 2014. The designated tool for family functioning will be used upon admission to the program.

New Description of Data: *(if needed)*

Data issues/caveats that affect outcome measures:

May encounter issues in tool selection, training of staff, data system development issues, reporting the data, and related implementation issues. The Length of Stay for PPP is less than a year, and Prevention PPP is 90 days or less.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Status: Item 4.6 of the Wraparound Fidelity Index (WFI) 4 has been selected to measure Family Functioning. Over 95% of caregivers of youth enrolled in the Professional Partner Program complete the WFI assessment. Caregivers rate their agreement to Item 4.6 which reads "Has the wraparound process helped your family develop or strengthen relationships that will support you when wraparound is finished?"

Priority #: 3
Priority Area: Co-Occurring Disorders
Priority Type: SAT, MHS
Population(s): SMI, SED, PWWDC, IVDUs, HIV EIS, TB

Goal of the priority area:

Providers demonstrate better ability to understand persons with Co-Occurring Disorders (COD) in order to improve the treatment and recovery services.

Strategies to attain the goal:

Use COMPASS-EZ to improve the treatment and recovery services.

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Providers demonstrate better ability to understand persons with Co-Occurring Disorders (COD) in order to improve the treatment and recovery services.
Baseline Measurement: Statewide score on selected sections of the COMPASS-EZ will increase according to the baseline.
First-year target/outcome measurement: Statewide score on selected sections of the COMPASS-EZ will increase according to the baseline.
Second-year target/outcome measurement: Statewide score on selected sections of the COMPASS-EZ will increase according to the baseline and first year target.

New Second-year target/outcome measurement (if needed):

Data Source:

COMPASS-EZ scores reported by providers to Regional Behavioral Health Authorities to the Division of Behavioral Health.

New Data Source (if needed):

Description of Data:

COMPASS-EZ assessment and action planning process from developers Kenneth Minkoff, MD and Christie Cline, MD. The COMPASS-EZ is designed as a survey of a "program". In a large agency each distinct program uses the COMPASS-EZ to perform its own self-survey.

New Description of Data: (if needed)

Data issues/caveats that affect outcome measures:

The increase in the number of behavioral health programs/providers able to deliver effective services to people with Co-Occurring Disorders (COD) should lead to improved prevention and treatment in a Recovery-Oriented System of Care (ROSC).

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Status: Per contract with Regional Behavioral Health Authorities, providers will complete a reassessment using the COMPASS-EZ in FY15.

Priority #: 4
Priority Area: Trauma-Informed Care
Priority Type: SAP, SAT, MHP, MHS
Population(s): SMI, SED, PWWDC, IVDUs, HIV EIS, TB

Goal of the priority area:

Increase the BH workforce education to provide Trauma-Informed Care.

Strategies to attain the goal:

Statewide score on selected sections of the Fallot and Harris Trauma Informed Care (TIC) tool will increase according to the baseline to be developed after June 30, 2013 self-assessment deadline for providers.

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Increase the BH workforce education to provide Trauma-Informed Care.
Baseline Measurement: TIC tool scores will increase according to the baseline to be developed after June 30, 2013 self-assessment deadline for providers.
First-year target/outcome measurement: Statewide score on selected sections of the TIC tool will increase according to the baseline developed after June 30, 2013 self-assessment deadline for providers.
Second-year target/outcome measurement: Statewide score on selected sections of the TIC tool (to be developed after June 30, 2013 self-assessment deadline for providers) will increase according to the baseline and first year target achieved.
New Second-year target/outcome measurement (if needed):

Data Source:

Trauma Informed Care (TIC) tool completed by providers then reported to Regional Behavioral Health Authorities to the Division of Behavioral Health.

New Data Source (if needed):

Description of Data:

Statewide score on selected sections of the Fallot and Harris Trauma Informed Care (TIC) tool

New Description of Data: (if needed)

Data issues/caveats that affect outcome measures:

Under the SAMHSA Block Grant 2012-2013 the goal of the Trauma Informed Care was to develop a service system that understands the effects of trauma and avoids re-traumatizing those who seek services (trauma-informed). The first round of effort is to be completed by June 30, 2013. After that work is completed, the new baseline can be established. The intent is to continue the work in order to further improve the trauma informed features of the Nebraska Behavioral Health System.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Status: Per contract with Regional Behavioral Health Authorities, providers will complete a reassessment using the Harris Trauma Informed Care (TIC) tool in FY15.

Priority #: 5
Priority Area: Peer Support
Priority Type: SAP, SAT, MHP, MHS
Population(s): SMI, SED, PWWDC, IVDUs, HIV EIS, TB

Goal of the priority area:

Increase the capacity of the system to use Peer Support

Strategies to attain the goal:

Use of Peer Support to provide Recovery Supports in Nebraska (Year One: develop Plan. Year Two: Implement 25% of Plan)

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Peer Support
Baseline Measurement: Increase the capacity of the system to use Peer Support
First-year target/outcome measurement: By June 30, 2014, there is one plan approved by the Director of the Division of Behavioral Health on the Use of Peer Support to provide Recovery Supports in Nebraska.
Second-year target/outcome measurement: By June 30, 2015, the Division of Behavioral Health will implement 25% of Plan.
New Second-year target/outcome measurement (if needed):

Data Source:

Office of Consumer Affairs, Division of Behavioral Health

New Data Source (if needed):

Description of Data:

One plan approved by the Director of the Division of Behavioral Health on the Use of Peer Support to provide Recovery Supports in Nebraska.

New Description of Data: (if needed)

Data issues/caveats that affect outcome measures:

- Peer Support has been implemented in one form or another across the State over the last few years. As of March 31, 2013 there are 124 Certified Peer Support and Wellness Specialists in Nebraska.
- The Office of Consumer Affairs' People Council on February 5, 2013 clearly indicated the full implementation of peer support in Nebraska was needed. A more focused, organized and systematic approach for using peer support was recommended.
- On March 14, 2013 at a joint meeting of the State Advisory Committee on Mental Health Services and the State Advisory Committee on Substance Abuse Services, there was support for the idea of this plan.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Status: A Peer Support Plan has been approved by the Director-Nebraska DHHS Division of Behavioral Health. Implementation planning is underway.

Priority #: 6
Priority Area: Tuberculosis (TB)
Priority Type: SAT
Population(s): TB

Goal of the priority area:

As required through the contracts with the Regional Behavioral Health Authorities, tuberculosis screening is provided to all persons entering a substance abuse treatment service. Additional services and/or referrals for services are made available to those individuals whose screening indicates "high risk" for TB. The Tuberculosis Program in the NE Division of Public Health provides the overall coordination for the State of Nebraska.

Strategies to attain the goal:

Regional Behavioral Health Authorities will comply with contract requirements for tuberculosis screening to be provided to all persons entering a substance abuse treatment service.

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Tuberculosis (TB)
Baseline Measurement: Maintain the contract requirement with the Regional Behavioral Health Authorities for tuberculosis screening provided to all persons entering a substance abuse treatment service.
First-year target/outcome measurement: The contract requirement was maintained with the Regional Behavioral Health Authorities for tuberculosis screening provided to all persons entering a substance abuse treatment service.
Second-year target/outcome measurement: The contract requirement was maintained with the Regional Behavioral Health Authorities for tuberculosis screening provided to all persons entering a substance abuse treatment service.
New Second-year target/outcome measurement (if needed):

Data Source:

NE Department of Health and Human Services - Division of Behavioral Health contracts with the six Regional Behavioral Health Authorities.

New Data Source (if needed):

Description of Data:

Signed contracts between the NE Department of Health and Human Services - Division of Behavioral Health and the six Regional Behavioral Health Authorities.

New Description of Data (if needed)

Data issues/caveats that affect outcome measures:

This contract requirement is connected to the Federal requirements under the Substance Abuse Prevention and Treatment Block Grant.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (*optional*):

Status: Per contract with Regional Behavioral Health Authorities, providers will conduct the TB screenings for FY15.

footnote:

III: Expenditure Reports

Table 2 - State Agency Expenditure Report

Expenditure Period Start Date: 7/1/2013 Expenditure Period End Date: 6/30/2014

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	\$ 4,956,082	\$	\$ 683	\$	\$ 22,978,140	\$	\$
2. Primary Prevention	\$ 1,565,218	\$	\$	\$ 175,557	\$ 367,198	\$	\$
3. Tuberculosis Services	\$	\$	\$	\$	\$	\$	\$
4. HIV Early Intervention Services	\$	\$	\$	\$	\$	\$	\$
5. State Hospital	\$	\$	\$	\$	\$	\$	\$
6. Other 24 Hour Care	\$	\$	\$	\$	\$	\$	\$
7. Ambulatory/Community Non-24 Hour Care	\$	\$	\$	\$	\$	\$	\$
8. Administration (Excluding Program and Provider Level)	\$ 333,171	\$	\$	\$	\$	\$	\$
9. Subtotal (Rows 1, 2, 3, 4, and 8)	\$6,854,471	\$	\$683	\$175,557	\$23,345,338	\$	\$
10. Subtotal (Rows 5, 6, 7, and 8)	\$333,171	\$	\$	\$	\$	\$	\$
11. Total	\$6,854,471	\$	\$683	\$175,557	\$23,345,338	\$	\$

Please indicate the expenditures are actual or estimated.

Actual Estimated

Footnotes:

III: Expenditure Reports

Table 3 - SAPT Block Grant Expenditure By Service

Expenditure Period Start Date: 7/1/2013 Expenditure Period End Date: 6/30/2014

Service	Unduplicated Individuals	Units	Expenditures
Healthcare Home/Physical Health			\$0
Specialized Outpatient Medical Services			\$0
Acute Primary Care			\$0
General Health Screens, Tests and Immunizations			\$0
Comprehensive Care Management			\$0
Care coordination and Health Promotion			\$0
Comprehensive Transitional Care			\$0
Individual and Family Support			\$0
Referral to Community Services Dissemination			\$0
Prevention (Including Promotion)			\$0
Screening, Brief Intervention and Referral to Treatment			\$0
Brief Motivational Interviews			\$0
Screening and Brief Intervention for Tobacco Cessation			\$0
Parent Training			\$0
Facilitated Referrals			\$0
Relapse Prevention/Wellness Recovery Support			\$0
Warm Line			\$0
Substance Abuse (Primary Prevention)			\$0
Classroom and/or small group sessions (Education)			\$0
Media campaigns (Information Dissemination)			\$0
Systematic Planning/Coalition and Community Team Building(Community Based Process)			\$0
Parenting and family management (Education)			\$0

Education programs for youth groups (Education)			\$0
Community Service Activities (Alternatives)			\$0
Student Assistance Programs (Problem Identification and Referral)			\$0
Employee Assistance programs (Problem Identification and Referral)			\$0
Community Team Building (Community Based Process)			\$0
Promoting the establishment or review of alcohol, tobacco, and drug use policies (Environmental)			\$0
Engagement Services			\$0
Assessment			\$0
Specialized Evaluations (Psychological and Neurological)			\$0
Service Planning (including crisis planning)			\$0
Consumer/Family Education			\$0
Outreach			\$0
Outpatient Services			\$0
Evidenced-based Therapies			\$0
Group Therapy			\$0
Family Therapy			\$0
Multi-family Therapy			\$0
Consultation to Caregivers			\$0
Medication Services			\$0
Medication Management			\$0
Pharmacotherapy (including MAT)			\$0
Laboratory services			\$0
Community Support (Rehabilitative)			\$0
Parent/Caregiver Support			\$0
Skill Building (social, daily living, cognitive)			\$0
Case Management			\$0

Behavior Management			\$0
Supported Employment			\$0
Permanent Supported Housing			\$0
Recovery Housing			\$0
Therapeutic Mentoring			\$0
Traditional Healing Services			\$0
Recovery Supports			\$0
Peer Support			\$0
Recovery Support Coaching			\$0
Recovery Support Center Services			\$0
Supports for Self-directed Care			\$0
Other Supports (Habilitative)			\$0
Personal Care			\$0
Homemaker			\$0
Respite			\$0
Supported Education			\$0
Transportation			\$0
Assisted Living Services			\$0
Recreational Services			\$0
Trained Behavioral Health Interpreters			\$0
Interactive Communication Technology Devices			\$0
Intensive Support Services			\$0
Substance Abuse Intensive Outpatient (IOP)			\$0
Partial Hospital			\$0
Assertive Community Treatment			\$0
Intensive Home-based Services			\$0
Multi-systemic Therapy			\$0

Intensive Case Management			\$0
Out-of-Home Residential Services			\$0
Children's Mental Health Residential Services			\$0
Crisis Residential/Stabilization			\$0
Clinically Managed 24 Hour Care (SA)			\$0
Clinically Managed Medium Intensity Care (SA)			\$0
Adult Mental Health Residential			\$0
Youth Substance Abuse Residential Services			\$0
Therapeutic Foster Care			\$0
Acute Intensive Services			\$0
Mobile Crisis			\$0
Peer-based Crisis Services			\$0
Urgent Care			\$0
23-hour Observation Bed			\$0
Medically Monitored Intensive Inpatient (SA)			\$0
24/7 Crisis Hotline Services			\$0
Other (please list)			\$0
Peer review			\$0
Adult Substance Abuse Residential			\$0

footnote:

Other Category includes service "Adult Substance Abuse Residential" because there is no line item identifying this service in the category "Out of Home Residential Services".

III: Expenditure Reports

Table 4 - State Agency SABG Expenditure Compliance Report

Expenditure Period Start Date: 10/1/2011 Expenditure Period End Date: 9/30/2013

Category	FY 2012 SAPT Block Grant Award
1. Substance Abuse Prevention* and Treatment	\$5,614,942
2. Primary Prevention	\$1,826,464
3. Tuberculosis Services	\$0
4. HIV Early Intervention Services**	\$0
5. Administration (excluding program/provider level)	\$391,653
6. Total	\$7,833,059

*Prevention other than Primary Prevention

**HIV Designated States

footnote:

III: Expenditure Reports

Table 5a - 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"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Information Dissemination	Unspecified	\$ <input type="text" value="158,946"/>	\$ <input type="text" value="0"/>	\$ <input type="text" value="48,289"/>	\$ <input type="text" value="0"/>	\$ <input type="text" value="0"/>
Information Dissemination	Total	\$158,946	\$0	\$48,289	\$0	\$0
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"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Education	Unspecified	\$ <input type="text" value="201,916"/>	\$ <input type="text" value="0"/>	\$ <input type="text" value="89,619"/>	\$ <input type="text" value="0"/>	\$ <input type="text" value="0"/>
Education	Total	\$201,916	\$0	\$89,619	\$0	\$0
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"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Alternatives	Unspecified	\$ <input type="text" value="61,129"/>	\$ <input type="text" value="0"/>	\$ <input type="text" value="26,713"/>	\$ <input type="text" value="0"/>	\$ <input type="text" value="0"/>
Alternatives	Total	\$61,129	\$0	\$26,713	\$0	\$0
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"/>	\$ <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" value="95,366"/>	\$ <input type="text" value="0"/>	\$ <input type="text" value="13,540"/>	\$ <input type="text" value="0"/>	\$ <input type="text" value="0"/>
Problem Identification and Referral	Total	\$95,366	\$0	\$13,540	\$0	\$0
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"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Community-Based Process	Universal	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Community-Based Process	Unspecified	\$ <input type="text" value="606,632"/>	\$ <input type="text" value="0"/>	\$ <input type="text" value="126,761"/>	\$ <input type="text" value="0"/>	\$ <input type="text" value="0"/>
Community-Based Process	Total	\$606,632	\$0	\$126,761	\$0	\$0
Environmental	Selective	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Environmental	Indicated	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Environmental	Universal	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Environmental	Unspecified	\$ <input type="text" value="639,548"/>	\$ <input type="text" value="0"/>	\$ <input type="text" value="176,650"/>	\$ <input type="text" value="0"/>	\$ <input type="text" value="0"/>
Environmental	Total	\$639,548	\$0	\$176,650	\$0	\$0
Section 1926 Tobacco	Selective	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Section 1926 Tobacco	Indicated	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Section 1926 Tobacco	Universal	\$ <input type="text" value="62,927"/>	\$ <input type="text" value="0"/>	\$ <input type="text" value="0"/>	\$ <input type="text" value="0"/>	\$ <input type="text" value="0"/>
Section 1926 Tobacco	Unspecified	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Section 1926 Tobacco	Total	\$62,927	\$0	\$0	\$0	\$0
Other	Selective	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Other	Indicated	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Other	Universal	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Other	Unspecified	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Other	Total	\$	\$	\$	\$	\$
	Grand Total	\$1,826,464	\$0	\$481,574	\$0	\$0

Footnotes:

III: Expenditure Reports

Table 5b - 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					
Universal Indirect					
Selective					
Indicated					
Column Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

footnote:

III: Expenditure Reports

Table 5c - SABG Primary Prevention Priorities and Special Population Categories

Expenditure Period Start Date: Expenditure Period End Date:

Targeted Substances	
Alcohol	Ⓟ
Tobacco	Ⓟ
Marijuana	Ⓟ
Prescription Drugs	Ⓟ
Cocaine	Ⓢ
Heroin	Ⓢ
Inhalants	Ⓢ
Methamphetamine	Ⓢ
Synthetic Drugs (i.e. Bath salts, Spice, K2)	Ⓢ
Targeted Populations	
Students in College	Ⓟ
Military Families	Ⓢ
LGBTQ	Ⓢ
American Indians/Alaska Natives	Ⓟ
African American	Ⓟ
Hispanic	Ⓟ
Homeless	Ⓢ
Native Hawaiian/Other Pacific Islanders	Ⓢ
Asian	Ⓟ
Rural	Ⓟ
Underserved Racial and Ethnic Minorities	Ⓟ

footnote:

III: Expenditure Reports

Table 6 - Resource Development Expenditure Checklist

Expenditure Period Start Date: 10/1/2011 Expenditure Period End Date: 9/30/2013

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		\$29,457.00				\$29,457.00
2. Quality Assurance		\$29,457.00		\$29,457.00		\$58,914.00
3. Training (Post-Employment)				\$87,783.00		\$87,783.00
4. Program Development		\$58,914.00		\$29,457.00		\$88,371.00
5. Research and Evaluation						\$0.00
6. Information Systems		\$24,563.00				\$24,563.00
7. Education (Pre-Employment)				\$58,522.00		\$58,522.00
8. Total	\$0.00	\$142,391.00	\$0.00	\$205,219.00	\$0.00	\$347,610.00

footnote:

III: Expenditure Reports

Table 7 - Statewide Entity Inventory

Expenditure Period Start Date: 10/1/2011 Expenditure Period End Date: 9/30/2013

Entity Number	I-BHS ID		Area Served (Statewide or SubState Planning Area)	Provider / Program Name	Mailing Address	City	State	Zip	SAPT Block Grant - A. Block Grant Funds (B + D + E)	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
750441	NE750441		Omaha Metro	Alcoholics Resocialization Csl Help	604 South 37th Street	Omaha	NE	68105	\$48,067	\$48,067	\$0	\$0	\$0
750904	NE750904		Omaha Metro	Alegent Health Psychiatric Associates	7101 Newport Avenue	Omaha	NE	68152	\$38,666	\$38,666	\$0	\$0	\$0
100898	NE100898		South Central	Area Substance Abuse	835 South Burlington Suite 114	Hastings	NE	68901	\$83,123	\$0	\$0	\$83,123	\$0
100781	NE100781		Omaha Metro	BAART	1941 South 42nd Street Suite 210	Omaha	NE	68105	\$991,097	\$991,097	\$0	\$0	\$0
100868	NE100868		Northeast	Back to Basics	3806 Howard Boulevard	Columbus	NE	68601	\$46,430	\$0	\$0	\$46,430	\$0
100856	NE100856		Panhandle	Banner County Prevention Coalition	Banner County Public Schools P.O. Box 5	Harrisburg	NE	69345	\$7,530	\$0	\$0	\$7,530	\$0
301302	NE301302		Northeast	Behavioral Health Specialists Inc	900 West Norfolk Avenue Suite 200	Norfolk	NE	68701-5006	\$313,870	\$313,870	\$0	\$0	\$0
750953	NE750953		Southeast	Blue Valley Behavioral Health	1123 North 9th Street	Beatrice	NE	68310	\$249,637	\$249,637	\$0	\$0	\$0
100857	NE100857		Panhandle	Box Butte County Family Focus	Hemingford	Hemingford	NE	69348	\$3,684	\$0	\$0	\$3,684	\$0
100917	NE100917		99	Buffalo Beach Company	3426 O Street	Lincoln	NE	68503	\$4,000	\$0	\$0	\$4,000	\$0
100801	NE100801		South Central	Buffalo County Community	P.O. Box 1486	Kearney	NE	68848	\$36,292	\$0	\$0	\$36,292	\$0
100126	NE100126		Northeast	Catholic Charities of Greater Nebraska	3020 18th Street Suite 17	Columbus	NE	68601	\$91,692	\$91,692	\$0	\$0	\$0
100431	NE100431		Omaha Metro	Catholic Charities/Omaha	1490 North 16th Street	Omaha	NE	68102	\$482,067	\$482,067	\$0	\$0	\$0
301401	NE301401		Southeast	CenterPointe	1000 South 13th Street	Lincoln	NE	68508-3533	\$247,775	\$247,775	\$0	\$0	\$0
750144	NE750144		South Central	Central Nebraska	219 West 2nd Street	Grand Island	NE	68801	\$37,878	\$0	\$0	\$37,878	\$0
100563	NE100563		Southeast	Child Guidance Center	2444 O Street	Lincoln	NE	68510	\$63,922	\$63,922	\$0	\$0	\$0
750250	NE750250		Southeast	Cornhusker Place Inc	721 K Street	Lincoln	NE	68508	\$523,351	\$523,351	\$0	\$0	\$0
101088	NE101088		Panhandle	Deuell County Prevention Team	305 North 9th Street	Norfolk	NE	68701	\$4,283	\$0	\$0	\$4,283	\$0
100916	NE100916		Northeast	East Central Health Department	2282 East 32nd Avenue	Columbus	NE	68601	\$0	\$0	\$0	\$0	\$0
100913	NE100913		Northeast	Elkhorn Logan Valley Public	P.O. Box 779	Wisner	NE	68791	\$57,408	\$0	\$0	\$57,408	\$0

	750151	NE750151	✓	Northeast	Friendship House	406 West Koenig Street	Grand Island	NE	68801	\$232,370	\$232,370	\$0	\$0	\$0
	100861	NE100861	✓	Panhandle	Garden County Coalition	Volunteers of America P.O. Box 128	Lewellen	NE	69147	\$4,055	\$0	\$0	\$4,055	\$0
	100804	NE100804	✓	Northeast	Garfield Loop Wheeler Childrens	P.O. Box 638	Burwell	NE	68823	\$41,417	\$0	\$0	\$41,417	\$0
	100877	NE100877	✓	Omaha Metro	Greater Omaha Healthy Communities	P.O. Box 390155	Omaha	NE	68139	\$0	\$0	\$0	\$0	\$0
	100356	NE100356	✓	Northeast	Heartland Counseling Services Inc	405 West Douglas Street	ONeill	NE	68763	\$11,346	\$11,346	\$0	\$0	\$0
	900491	NE900491	✓	Northeast	Heartland Counseling Services Inc	P.O. Box 355	South Sioux City	NE	68776-0355	\$46,677	\$46,677	\$0	\$0	\$0
	100103	NE100103	✓	Omaha Metro	Heartland Family Service	2101 South 42nd Street	Omaha	NE	68105	\$150,659	\$150,659	\$50,341	\$0	\$0
	901242	NE901242	✓	Southeast	Houses of Hope of Nebraska Inc	1124 North Cotner Boulevard	Lincoln	NE	68505-1834	\$76,938	\$76,938	\$0	\$0	\$0
	900699	NE900699	✓	Panhandle	Human Services Inc	419 West 25th Street	Alliance	NE	69301	\$189,725	\$189,725	\$91,296	\$0	\$0
	101229	NE101229	✓	Northeast	Juvenile Awareness Group	200 South Lincoln Street Room 51	West Point	NE	68788	\$0	\$0	\$0	\$0	\$0
	100863	NE100863	✓	Panhandle	Kids Plus Inc	P. O. Box 296	Sidney	NE	69162	\$4,313	\$0	\$0	\$4,313	\$0
	75938	NE75938	✗	Omaha Metro	Lancaster County	2201 South 17th Street	Lincoln	NE	68502	\$0	\$0	\$0	\$0	\$0
	100415	NE100415	✓	99	Lincoln Medical Education Partnership	4600 Valley Road	Lincoln	NE	68510	\$336,800	\$229,246	\$82,941	\$107,554	\$0
	100616	NE100616	✓	Omaha Metro	Livewise	8545 Park Drive	Ralston	NE	68127	\$260,865	\$0	\$0	\$260,865	\$0
	101793	NE101793	✓	Omaha Metro	Lutheran Family Services	120 South 24th Street Suite 230	Omaha	NE	68102	\$134,363	\$134,363	\$0	\$0	\$0
	900962	NE900962	✓	Southeast	Lutheran Family Services	2900 O Street Suite 200	Lincoln	NE	68510-1454	\$24,028	\$24,028	\$0	\$0	\$0
	301500	NE301500	✓	South Central	Mid Plains Center for	914 Baumann Street	Grand Island	NE	68803-4401	\$0	\$0	\$0	\$0	\$0
	100258	NE100258	✓	South Central	Milne Detoxification Center	406 West Koenig Street	Grand Island	NE	68801	\$0	\$0	\$0	\$0	\$0
	100601	NE100601	✗	Panhandle	Monument Prevention Coalition	1601 East 27th Street	Scottsbluff	NE	69361	\$5,175	\$0	\$0	\$5,175	\$0
	100864	NE100864	✓	Panhandle	Morrill County Prevention Coalition	Panhandle Public Health District P.O. Box 1115	Bridgeport	NE	69336	\$1,987	\$0	\$0	\$1,987	\$0
	100805	NE100805	✓	99	Nebraska Association of	1141 H Street	Lincoln	NE	68510	\$17,500	\$17,500	\$0	\$0	\$0
	100922	NE100922	✓	South Central	Nebraska Federation of Families for	345 North Minden Avenue	Minden	NE	68959	\$0	\$0	\$0	\$0	\$0
	000005	NE000005	✗	99	Nebraska State Patrol	PO Box 94907	Lincoln	NE	68509	\$35,084	\$0	\$0	\$35,084	\$0
	101298	NE101298	✓	Omaha Metro	Nebraska Urban Indian Health Coalition	2240 Landon Court	Omaha	NE	68102-2414	\$48,377	\$20,457	\$0	\$27,920	\$0
	000009	NE000009	✗	99	NHHS Division of Public Health	301 Centennial Mall South 3rd Floor	Lincoln	NE	68509	\$0	\$0	\$0	\$0	\$0

	100866	NE100866	X	Northeast	District Health Dept.	Douglas Street	Oneill	NE	68763	\$77,566	\$0	\$0	\$77,566	\$0
	101227	NE101227	X	Northeast	Northeast Community College Alcohol & Other Drug Coalition	801 East Benjamain Avenue	Norfolk	NE	68701	\$2,537	\$0	\$0	\$2,537	\$0
	100605	NE100605	✓	Panhandle	Northeast Panhandle	P.O. Box 428	Gordon	NE	69343	\$69,218	\$69,218	\$0	\$0	\$0
	300072	NE300072	✓	Omaha Metro	NOVA Treatment Community	8502 Morman Bridge Road	Omaha	NE	68152	\$24,260	\$24,260	\$0	\$0	\$0
	100886	NE100886	✓	Northeast	Oasis Counseling International	333 West Norfolk Avenue Suite 201	Norfolk	NE	68701	\$3,396	\$3,396	\$0	\$0	\$0
	101226	NE101226	X	Omaha Metro	One World Community Health Center	4920 South 30th Street Suite 103	Omaha	NE	68107	\$29,208	\$29,208	\$0	\$0	\$0
	101230	NE101230	X	99	Orion Healthcare Technology Inc.	1016 Leavenworth Street	Omaha	NE	68102	\$24,563	\$0	\$0	\$24,563	\$0
	300205	NE300205	✓	Panhandle	Panhandle Mental Health Center	4110 Avenue D	Scottsbluff	NE	69361	\$319,454	\$241,970	\$7,508	\$77,484	\$0
	900830	NE900830	X	99	Pride Omaha, Inc.	3534 South 108th Street	Omaha	NE	68144	\$0	\$0	\$0	\$0	\$0
	100867	NE100867	✓	Northeast	RainMaker/Omaha Nation Community	312 Main Street	Walthill	NE	68067	\$14,144	\$0	\$0	\$14,144	\$0
	100530	NE100530	X	Southwest	Region 2 Behavioral Health Authority	110 North Bailey Street P.O. Box 1208	North Platte	NE	69103	\$392,434	\$94,906	\$81,360	\$297,528	\$0
	100829	NE100829	X	Southeast	Region 5 Behavioral Health Authority	1645 N Street Suite A	Lincoln	NE	68508	\$485,253	\$137,239	\$0	\$348,014	\$0
	100837	NE100837	X	Omaha Metro	Region 6 Behavioral Health Authority	1941 South 42nd Street Suite 112	Omaha	NE	68105-2982	\$77,410	\$58,318	\$0	\$19,092	\$0
	100803	NE100803	✓	South Central	Region III Behavioral Health Services	P.O. Box 2555	Kearney	NE	68848-2555	\$140,526	\$106,979	\$0	\$33,547	\$0
	100811	NE100811	✓	Northeast	Region IV MH and SA Service District	206 Monroe Avenue	Norfolk	NE	68701	\$104,388	\$57,467	\$0	\$46,921	\$0
	750540	NE750540	✓	Omaha Metro	Santa Monica Inc	130 North 39th Street	Omaha	NE	68131	\$41,130	\$41,130	\$0	\$0	\$0
	100865	NE100865	✓	Panhandle	Scotts Bluff Co Prevention Coalition	3302 17th Avenue	Scottsbluff	NE	69361	\$13,357	\$0	\$0	\$13,357	\$0
	100872	NE100872	✓	South Central	Sherman County Prevention	P.O. Box 621	Loup City	NE	68853	\$48,886	\$0	\$0	\$48,886	\$0
	301708	NE301708	✓	South Central	South Central Behavioral Services	3810 Central Avenue	Kearney	NE	68848	\$150,140	\$150,140	\$33,238	\$0	\$0
	100993	NE100993	X	South Central	South Central Substance Abuse Prevention Coalition	3810 Central Avenue P.O. Box 1715	Kearney	NE	68848	\$0	\$0	\$0	\$0	\$0
	900731	NE900731	X	South Central	St. Francis ADTC	2116 West Faidley Avenue	Grand Island	NE	68803	\$111,196	\$111,196	\$5,420	\$0	\$0
	900038	NE900038	X	Southeast	St. Monica's	- - -	Lincoln	NE	68510	\$63,272	\$63,272	\$30,203	\$0	\$0
	900335	NE900335	X	South Central	The Bridge	907 South Kansas Street	Hastings	NE	68901	\$108,370	\$108,370	\$33,716	\$0	\$0
	900418	NE900418	X	Northeast	The Link	1001 West Norfolk Avenue	Norfolk	NE	68701	\$112,501	\$112,501	\$0	\$0	\$0
	000081	NE000081	X	Southeast	Touchstone	2633 P Street First Floor	Lincoln	NE	68503	\$0	\$0	\$0	\$0	\$0
						WSC								

	101221	NE101221	X	Northeast	TRUST	Counseling Center 1111 Main Street	Wayne	NE	68787	\$0	\$0	\$0	\$0	\$0
	101232	NE101232	X	99	University of NE	312 North 14th Street	Lincoln	NE	68588	\$20,333	\$0	\$0	\$20,333	\$0
	101233	NE101233	X	Northeast	UNL- Madison Cty Extension	601 East Benjamin Avenue Suite 105	Norfolk	NE	68701	\$0	\$0	\$0	\$0	\$0
	101224	NE101224	X	Panhandle	WCHR - Sioux	831 Moorhead Street	Chadron	NE	69337	\$27,361	\$0	\$0	\$27,361	\$0
	101225	NE101225	X	Panhandle	WCHR-Sheridan	106 North Main	Gordon	NE	69343	\$6,133	\$0	\$0	\$6,133	\$0
	101097	NE101097	X	Northeast	WELL	305 North 9th Street	Norfolk	NE	68701	\$21,922	\$21,922	\$20,339	\$0	\$0
Total										\$7,441,406	\$5,614,943	\$436,362	\$1,826,464	\$0

* Indicates the imported record has an error.

footnote:

III: Expenditure Reports

Table 8a - 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(2012) + B2(2013)</u> 2 (C)
SFY 2012 (1)	\$24,562,390	
SFY 2013 (2)	\$25,026,522	\$24,794,456
SFY 2014 (3)	\$23,346,022	

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

SFY 2012 Yes No

SFY 2013 Yes No

SFY 2014 Yes No

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

footnote:
 MOE was not attained due to fact that funds previously contained in the SMHA budget that provided the state portion for select behavioral health services for Medicaid eligible individuals was transferred to the Medicaid budget and no longer under the SMHA control. Medicaid and SMHA are both divisions of the same state agency (Nebraska Department of Health & Human Services) and the funding continued to be used for behavioral health services for Medicaid eligible individuals. It was no longer in the SMHA budget and therefore not included in the expenditures.

III: Expenditure Reports

Table 8b - 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)	\$26,611	1.21%	\$322	
SFY 1992 (2)	\$28,910	1.21%	\$350	\$336

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)
SFY 2014 (3)	\$50,398	19.05%	\$9,601

footnote:

III: Expenditure Reports

Table 8c - 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 2014	\$0

footnote:
Nebraska is not an HIV Designated State.

III: Expenditure Reports

Table 8d - 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	\$753,713	
SFY 2012		\$2,357,202
SFY 2013		\$2,146,627
SFY 2014		\$2,047,086
Enter the amount the State plans to expend in 2015 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>2141892.00</u>		

footnote:

IV: Populations and Services Reports

Table 9 - Prevention Strategy Report

Column A (Risks)	Column B (Strategies)		Column C (Providers)
All Risk Groups	1. Information Dissemination		
	1. Clearinghouse/information resources centers	0	
	2. Resources directories	1	
	3. Media campaigns	1	
	4. Brochures	1	
	5. Radio and TV public service announcements	1	
	6. Speaking engagements	1	
	7. Health fairs and other health promotion, e.g., conferences, meetings, seminars	1	
	8. Information lines/Hot lines	0	
	9.	0	
	2. Education		
	1. Parenting and family management	1	
	2. Ongoing classroom and/or small group sessions	1	
	3. Peer leader/helper programs	1	
	4. Education programs for youth groups	1	
	5. Mentors	1	
	6. Preschool ATOD prevention programs	0	
	7.	0	
	3. Alternatives		
	1. Drug free dances and parties	0	
	2. Youth/adult leadership activities	0	
	3. Community drop-in centers	0	
	4. Community service activities	1	
	5. Outward Bound	0	
	6. Recreation activities	1	
	7.	0	
	4. Problem Identification and Referral		
	1. Employee Assistance Programs	0	
	2. Student Assistance Programs	1	

3. Driving while under the influence/driving while intoxicated education programs	1
4.	0
5. Community-Based Process	
1. Community and volunteer training, e.g., neighborhood action training, impactor-training, staff/officials training	1
2. Systematic planning	1
3. Multi-agency coordination and collaboration/coalition	1
4. Community team-building	1
5. Accessing services and funding	1
6.	0
6. Environmental	
1. Promoting the establishment or review of alcohol, tobacco, and drug use policies in schools	1
2. Guidance and technical assistance on monitoring enforcement governing availability and distribution of alcohol, tobacco, and other drugs	1
3. Modifying alcohol and tobacco advertising practices	0
4. Product pricing strategies	1
5.	0

footnote:

IV: Populations and Services Reports

Table 10 - Treatment Utilization Matrix

Expenditure Period Start Date: 7/1/2013 Expenditure Period End Date: 6/30/2014

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	\$0	\$0	\$0
2. Free-Standing Residential	0	0	\$0	\$0	\$0
REHABILITATION/RESIDENTIAL					
3. Hospital Inpatient	0	0	\$0	\$0	\$0
4. Short-term (up to 30 days)	1372	1311	\$4,840	\$5,144	\$964
5. Long-term (over 30 days)	991	912	\$8,933	\$7,343	\$5,343
AMBULATORY (OUTPATIENT)					
6. Outpatient	9507	7290	\$661	\$540	\$672
7. Intensive Outpatient	1109	1061	\$1,013	\$1,128	\$436
8. Detoxification	8602	4655	\$629	\$1,266	\$2,697
OPIOID REPLACEMENT THERAPY					
9. Opioid Replacement Therapy	1338	443	\$2,303	\$0	\$0
10. ORT Outpatient	0	0	\$0	\$0	\$0

footnote:

IV: Populations and Services Reports

Table 11 - Unduplicated Count of Persons

Expenditure Period Start Date: 7/1/2013 Expenditure Period End Date: 6/30/2014

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	205	97	65	5	5	3	2	1	1	11	3	2	9	1	0	83	64	37	21
2. 18 - 24	3044	1751	843	136	61	28	11	20	6	110	54	10	12	0	2	1785	894	270	95
3. 25 - 44	7173	3667	2234	409	196	82	26	46	10	291	148	27	17	3	17	4038	2450	487	198
4. 45 - 64	2978	1498	832	301	97	35	5	11	3	108	66	6	7	6	3	1838	963	127	50
5. 65 and Over	118	72	22	15	2	0	0	0	1	3	1	1	0	0	1	88	26	3	1
6. Total	13518	7085	3996	866	361	148	44	78	21	523	272	46	45	10	23	7832	4397	924	365
7. Pregnant Women	189		143		25		4		0		14		1		2		164		25
Number of persons served who were admitted in a period prior to the 12 month reporting period		4124																	
Number of persons served outside of the levels of care described on Table 10		0																	

footnote:

IV: Populations and Services Reports

Table 12 - HIV Designated States Early Intervention Services

Expenditure Period Start Date: 7/1/2013 Expenditure Period End Date: 6/30/2014

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:		

footnote:

Nebraska is not an HIV designated state.

IV: Populations and Services Reports

Table 13 - Charitable Choice

Expenditure Period Start Date: 7/1/2013 Expenditure Period End Date: 6/30/2014

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.

The last statewide training on Charitable Choice conducted by the Division of Behavioral Health was conducted in 2008. Since this time education on and training to ensure Charitable Choice is respected for consumers has been a standard practice for the Regional Behavioral Health Authorities overseeing services in their respective counties. Training and monitoring of charitable choice occurs in a variety of formal and informal ways across the state. During the past year, it has been addressed in the following ways: quarterly provider meetings; site visits and review of consumer records to ensure consumers have acknowledged receiving information on their rights and offered alternative services; specific announcements, trainings, policies or procedures, or other forms of technical assistance provided to all or specific Region subcontractors; and program reviews which specifically addresses Charitable Choice and how provider staff are aware of and ensuring compliance. In addition, the Regional Authorities and Division of Behavioral Health monitors the number of individuals who have requested a change in service due to this provision on weekly capacity and waitlist documents submitted by providers across the state.

footnote:

V: Performance Indicators and Accomplishments

Table 14 - 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]	101	89
Total number of clients with non-missing values on employment/student status [denominator]	1,224	1,224
Percent of clients employed or student (full-time and part-time)	8.3 %	7.3 %
Notes (for this level of care):		
Number of CY 2013 admissions submitted:		1,326
Number of CY 2013 discharges submitted:		1,268
Number of CY 2013 discharges linked to an admission:		1,254
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		1,224
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):		1,224

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

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]	51	241
Total number of clients with non-missing values on employment/student status [denominator]	572	572
Percent of clients employed or student (full-time and part-time)	8.9 %	42.1 %
Notes (for this level of care):		
Number of CY 2013 admissions submitted:		688
Number of CY 2013 discharges submitted:		604
Number of CY 2013 discharges linked to an admission:		598

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	572
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):	572

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

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]	1,385	1,576
Total number of clients with non-missing values on employment/student status [denominator]	3,144	3,144
Percent of clients employed or student (full-time and part-time)	44.1 %	50.1 %
Notes (for this level of care):		
Number of CY 2013 admissions submitted:		5,810
Number of CY 2013 discharges submitted:		4,370
Number of CY 2013 discharges linked to an admission:		3,290
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		3,144
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):		3,144

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

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]	207	248
Total number of clients with non-missing values on employment/student status [denominator]	510	510
Percent of clients employed or student (full-time and part-time)	40.6 %	48.6 %
Notes (for this level of care):		
Number of CY 2013 admissions submitted:		789
Number of CY 2013 discharges submitted:		575
Number of CY 2013 discharges linked to an admission:		544

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	510
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):	510

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

footnote:

V: Performance Indicators and Accomplishments

Table 15 - 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]	747	833
Total number of clients with non-missing values on living arrangements [denominator]	1,023	1,023
Percent of clients in stable living situation	73.0 %	81.4 %
Notes (for this level of care):		
Number of CY 2013 admissions submitted:		1,326
Number of CY 2013 discharges submitted:		1,268
Number of CY 2013 discharges linked to an admission:		1,254
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		1,224
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):		1,023

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

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]	357	353
Total number of clients with non-missing values on living arrangements [denominator]	437	437
Percent of clients in stable living situation	81.7 %	80.8 %
Notes (for this level of care):		
Number of CY 2013 admissions submitted:		688
Number of CY 2013 discharges submitted:		604
Number of CY 2013 discharges linked to an admission:		598

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	572
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):	437

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

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]	2,561	2,612
Total number of clients with non-missing values on living arrangements [denominator]	2,756	2,756
Percent of clients in stable living situation	92.9 %	94.8 %
Notes (for this level of care):		
Number of CY 2013 admissions submitted:		5,810
Number of CY 2013 discharges submitted:		4,370
Number of CY 2013 discharges linked to an admission:		3,290
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		3,144
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):		2,756

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

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]	455	456
Total number of clients with non-missing values on living arrangements [denominator]	471	471
Percent of clients in stable living situation	96.6 %	96.8 %
Notes (for this level of care):		
Number of CY 2013 admissions submitted:		789
Number of CY 2013 discharges submitted:		575
Number of CY 2013 discharges linked to an admission:		544

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	510
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):	471

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

footnote:

V: Performance Indicators and Accomplishments

Table 16 - 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]	1,092	1,197
Total number of Admission and Discharge clients with non-missing values on arrests [denominator]	1,225	1,225
Percent of clients without arrests	89.1 %	97.7 %
Notes (for this level of care):		
Number of CY 2013 admissions submitted:		1,326
Number of CY 2013 discharges submitted:		1,268
Number of CY 2013 discharges linked to an admission:		1,254
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		1,225
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):		1,225

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

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]	554	560
Total number of Admission and Discharge clients with non-missing values on arrests [denominator]	583	583
Percent of clients without arrests	95.0 %	96.1 %
Notes (for this level of care):		
Number of CY 2013 admissions submitted:		688
Number of CY 2013 discharges submitted:		604
Number of CY 2013 discharges linked to an admission:		598

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	583
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):	583

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

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]	3,027	3,019
Total number of Admission and Discharge clients with non-missing values on arrests [denominator]	3,240	3,240
Percent of clients without arrests	93.4 %	93.2 %
Notes (for this level of care):		
Number of CY 2013 admissions submitted:		5,810
Number of CY 2013 discharges submitted:		4,370
Number of CY 2013 discharges linked to an admission:		3,290
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		3,249
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):		3,240

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

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]	488	459
Total number of Admission and Discharge clients with non-missing values on arrests [denominator]	536	536
Percent of clients without arrests	91.0 %	85.6 %
Notes (for this level of care):		
Number of CY 2013 admissions submitted:		789
Number of CY 2013 discharges submitted:		575
Number of CY 2013 discharges linked to an admission:		544

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	537
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):	536

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

footnote:

V: Performance Indicators and Accomplishments

Table 17 - 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]	466	883
All clients with non-missing values on at least one substance/frequency of use [denominator]	1,188	1,188
Percent of clients abstinent from alcohol	39.2 %	74.3 %

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]		429
Number of clients using alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	722	
Percent of clients abstinent from alcohol at discharge among clients using alcohol at admission [#T2 / #T1 x 100]		59.4 %

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]		454
Number of clients abstinent from alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	466	
Percent of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [#T2 / #T1 x 100]		97.4 %

Notes (for this level of care):

Number of CY 2013 admissions submitted:	1,326
Number of CY 2013 discharges submitted:	1,268
Number of CY 2013 discharges linked to an admission:	1,254
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	1,225
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):	1,188

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file

(Records received through 5/2/2014)

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]	321	415
All clients with non-missing values on at least one substance/frequency of use [denominator]	556	556
Percent of clients abstinent from alcohol	57.7 %	74.6 %

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]		100
Number of clients using alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	235	
Percent of clients abstinent from alcohol at discharge among clients using alcohol at admission [#T2 / #T1 x 100]		42.6 %

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]		315
Number of clients abstinent from alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	321	
Percent of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [#T2 / #T1 x 100]		98.1 %

Notes (for this level of care):

Number of CY 2013 admissions submitted:	688
Number of CY 2013 discharges submitted:	604
Number of CY 2013 discharges linked to an admission:	598
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	583
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):	556

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

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]	1,608	1,750
All clients with non-missing values on at least one substance/frequency of use [denominator]	2,403	2,403
Percent of clients abstinent from alcohol	66.9 %	72.8 %

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]		237
Number of clients using alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	795	
Percent of clients abstinent from alcohol at discharge among clients using alcohol at admission [#T2 / #T1 x 100]		29.8 %

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]		1,513
Number of clients abstinent from alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	1,608	
Percent of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [#T2 / #T1 x 100]		94.1 %

Notes (for this level of care):

Number of CY 2013 admissions submitted:	5,810
Number of CY 2013 discharges submitted:	4,370
Number of CY 2013 discharges linked to an admission:	3,290
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	3,249
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):	2,403

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

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]	263	357

All clients with non-missing values on at least one substance/frequency of use [denominator]	428	428
Percent of clients abstinent from alcohol	61.4 %	83.4 %

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]		110
Number of clients using alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator])	165	
Percent of clients abstinent from alcohol at discharge among clients using alcohol at admission [#T2 / #T1 x 100]		66.7 %

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]		247
Number of clients abstinent from alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator])	263	
Percent of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [#T2 / #T1 x 100]		93.9 %

Notes (for this level of care):

Number of CY 2013 admissions submitted:	789
Number of CY 2013 discharges submitted:	575
Number of CY 2013 discharges linked to an admission:	544
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	537
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):	428

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

footnote:

V: Performance Indicators and Accomplishments

Table 18 - 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]	452	827
All clients with non-missing values on at least one substance/frequency of use [denominator]	1,188	1,188
Percent of clients abstinent from drugs	38.0 %	69.6 %

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]		381
Number of clients using drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	736	
Percent of clients abstinent from drugs at discharge among clients using Drug at admission [#T2 / #T1 x 100]		51.8 %

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]		446
Number of clients abstinent from drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	452	
Percent of clients abstinent from drugs at discharge among clients abstinent from Drug at admission [#T2 / #T1 x 100]		98.7 %

Notes (for this level of care):

Number of CY 2013 admissions submitted:		1,326
Number of CY 2013 discharges submitted:		1,268
Number of CY 2013 discharges linked to an admission:		1,254
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		1,225
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):		1,188

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file

(Records received through 5/2/2014)

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]	337	428
All clients with non-missing values on at least one substance/frequency of use [denominator]	556	556
Percent of clients abstinent from drugs	60.6 %	77.0 %

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]		98
Number of clients using drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	219	
Percent of clients abstinent from drugs at discharge among clients using Drug at admission [#T2 / #T1 x 100]		44.7 %

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]		330
Number of clients abstinent from drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	337	
Percent of clients abstinent from drugs at discharge among clients abstinent from Drug at admission [#T2 / #T1 x 100]		97.9 %

Notes (for this level of care):

Number of CY 2013 admissions submitted:	688
Number of CY 2013 discharges submitted:	604
Number of CY 2013 discharges linked to an admission:	598
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	583
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):	556

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

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]	1,822	1,886
All clients with non-missing values on at least one substance/frequency of use [denominator]	2,403	2,403
Percent of clients abstinent from drugs	75.8 %	78.5 %

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]		158
Number of clients using drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	581	
Percent of clients abstinent from drugs at discharge among clients using Drug at admission [#T2 / #T1 x 100]		27.2 %

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]		1,728
Number of clients abstinent from drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	1,822	
Percent of clients abstinent from drugs at discharge among clients abstinent from Drug at admission [#T2 / #T1 x 100]		94.8 %

Notes (for this level of care):

Number of CY 2013 admissions submitted:	5,810
Number of CY 2013 discharges submitted:	4,370
Number of CY 2013 discharges linked to an admission:	3,290
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	3,249
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):	2,403

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

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]	295	366

All clients with non-missing values on at least one substance/frequency of use [denominator]	428	428
Percent of clients abstinent from drugs	68.9 %	85.5 %

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]		84
Number of clients using drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator])	133	
Percent of clients abstinent from drugs at discharge among clients using Drug at admission [#T2 / #T1 x 100]		63.2 %

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]		282
Number of clients abstinent from drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator])	295	
Percent of clients abstinent from drugs at discharge among clients abstinent from Drug at admission [#T2 / #T1 x 100]		95.6 %

Notes (for this level of care):

Number of CY 2013 admissions submitted:	789
Number of CY 2013 discharges submitted:	575
Number of CY 2013 discharges linked to an admission:	544
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	537
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):	428

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

footnote:

V: Performance Indicators and Accomplishments

Table 19 - 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]	450	1,091
Total number of clients with non-missing values on self-help attendance [denominator]	1,212	1,212
Percent of clients attending self-help programs	37.1 %	90.0 %
Percent of clients with self-help attendance at discharge minus percent of clients with self-help attendance at admission Absolute Change [%T2-%T1]	52.9 %	
Notes (for this level of care):		
Number of CY 2013 admissions submitted:		1,326
Number of CY 2013 discharges submitted:		1,268
Number of CY 2013 discharges linked to an admission:		1,254
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		1,225
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):		1,212

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

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]	420	550
Total number of clients with non-missing values on self-help attendance [denominator]	573	573
Percent of clients attending self-help programs	73.3 %	96.0 %
Percent of clients with self-help attendance at discharge minus percent of clients with self-help attendance at admission Absolute Change [%T2-%T1]	22.7 %	
Notes (for this level of care):		
Number of CY 2013 admissions submitted:		688
Number of CY 2013 discharges submitted:		604

Number of CY 2013 discharges linked to an admission:	598
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	583
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):	573

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

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]	1,151	1,271
Total number of clients with non-missing values on self-help attendance [denominator]	3,231	3,231
Percent of clients attending self-help programs	35.6 %	39.3 %
Percent of clients with self-help attendance at discharge minus percent of clients with self-help attendance at admission Absolute Change [%T2-%T1]	3.7 %	

Notes (for this level of care):

Number of CY 2013 admissions submitted:	5,810
Number of CY 2013 discharges submitted:	4,370
Number of CY 2013 discharges linked to an admission:	3,290
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	3,249
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):	3,231

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

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]	231	381
Total number of clients with non-missing values on self-help attendance [denominator]	528	528
Percent of clients attending self-help programs	43.8 %	72.2 %
Percent of clients with self-help attendance at discharge minus percent of clients with self-help attendance at admission Absolute Change [%T2-%T1]	28.4 %	

Notes (for this level of care):

Number of CY 2013 admissions submitted:	789
Number of CY 2013 discharges submitted:	575
Number of CY 2013 discharges linked to an admission:	544
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	537
Number of CY 2013 linked discharges eligible for this calculation (non-missing values):	528

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

footnote:

V: Performance Indicators and Accomplishments

Table 20 - 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	2	1	1	2
REHABILITATION/RESIDENTIAL				
3. Hospital Inpatient	0	0	0	0
4. Short-term (up to 30 days)	29	23	29	37
5. Long-term (over 30 days)	101	32	83	156
AMBULATORY (OUTPATIENT)				
6. Outpatient	117	23	78	139
7. Intensive Outpatient	63	30	52	76
8. Detoxification	23	23	23	23
OPIOID REPLACEMENT THERAPY				
9. Opioid Replacement Therapy	119	14	100	187
10. ORT Outpatient	158	15	55	254

Level of Care	2013 TEDS discharge record count	
	Discharges submitted	Discharges linked to an admission
DETOXIFICATION (24-HOUR CARE)		
1. Hospital Inpatient	0	0
2. Free-Standing Residential	7414	4537
REHABILITATION/RESIDENTIAL		

3. Hospital Inpatient	0	0
4. Short-term (up to 30 days)	1268	1254
5. Long-term (over 30 days)	604	598
AMBULATORY (OUTPATIENT)		
6. Outpatient	4370	3253
7. Intensive Outpatient	575	544
8. Detoxification	91	1
OPIOID REPLACEMENT THERAPY		
9. Opioid Replacement Therapy	0	111
10. ORT Outpatient	0	37

Source: SAMHSA/CBHSQ TEDS CY 2013 admissions file and CY 2013 linked discharge file
[Records received through 5/2/2014]

footnote:

V: Performance Indicators and Accomplishments

Table 21 - 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 2011 - 2012	10.3	<input type="text"/>
	Age 18+ - CY 2011 - 2012	59.3	<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 2011 - 2012	7.0	<input type="text"/>
	Age 18+ - CY 2011 - 2012	22.7	<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 2011 - 2012	5.5	<input type="text"/>
	Age 18+ - CY 2011 - 2012	9.7	<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 2011 - 2012	6.8	<input type="text"/>
	Age 18+ - CY 2011 - 2012	5.7	<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 2011 - 2012	3.1	<input type="text"/>
	Age 18+ - CY 2011 - 2012	1.9	<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 22 - 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 2011 - 2012	78.9	<input type="text"/>
	Age 18+ - CY 2011 - 2012	74.6	<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 2011 - 2012	93.5	<input type="text"/>
	Age 18+ - CY 2011 - 2012	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 2011 - 2012	77.1	<input type="text"/>
	Age 18+ - CY 2011 - 2012	70.0	<input type="text"/>

footnote:

V: Performance Indicators and Accomplishments

Table 23 - 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 2011 - 2012	13.3	<input type="text"/>
	Age 18+ - CY 2011 - 2012	16.7	<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 2011 - 2012	13.0	<input type="text"/>
	Age 18+ - CY 2011 - 2012	15.9	<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 2011 - 2012	14.0	<input type="text"/>
	Age 18+ - CY 2011 - 2012	18.5	<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 2011 - 2012	14.1	<input type="text"/>
	Age 18+ - CY 2011 - 2012	17.8	<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 2011 - 2012	13.1	<input type="text"/>
	Age 18+ - CY 2011 - 2012	20.4	<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 24 - 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 2011 - 2012	91.0	<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 2011 - 2012	90.5	<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 2011 - 2012	82.4	<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 2011 - 2012	84.3	<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 2011 - 2012	88.8	<input type="text"/>

footnote:

V: Performance Indicators and Accomplishments

Table 25 - 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 2011 - 2012	41.3	<input type="text"/>
	Age 12 - 17 - CY 2011 - 2012		<input type="text"/>

footnote:

V: Performance Indicators and Accomplishments

Table 26 - 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.		
	School Year 2012	95.0	<input type="text"/>

footnote:

V: Performance Indicators and Accomplishments

Table 27 - 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 - 2012	42.0	<input type="text"/>

footnote:

V: Performance Indicators and Accomplishments

Table 28 - 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	38.5	<input type="text"/>

footnote:

V: Performance Indicators and Accomplishments

Table 29 - 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 2011 - 2012	62.3	<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 2011 - 2012		<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:

V: Performance Indicators and Accomplishments

Table 30 - 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 2011 - 2012	89.4	<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:

V: Performance Indicators and Accomplishments

Table 31-35 - Reporting Period - Start and End Dates for Information Reported on Tables 31, 32, 33, 34, and 35

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 31 - Prevention Performance Measures - Individual-Based Programs and Strategies; Measure: Number of Persons Served By Age, Gender, Race, And Ethnicity	7/1/2011	6/30/2012
2. Table 32 - Prevention Performance Measures - Population-Based Programs And Strategies; Measure: Number of Persons Served By Age, Gender, Race, And Ethnicity	7/1/2011	6/30/2012
3. Table 33 - Prevention Performance Measures - Number of Persons Served by Type of Intervention	7/1/2011	6/30/2012
4. Table 34 - Prevention Performance Measures - Number of Evidence-Based Programs by Types of Intervention	7/1/2011	6/30/2012
5. Table 35 - Prevention Performance Measures - Total Number of Evidence-Based Programs and Total SAPTBG Dollars Spent on Evidence-Based Programs/Strategies	7/1/2011	6/30/2012

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

The Division of Behavioral Health utilizes an on-line web database called the Nebraska Prevention Information Reporting System (NPIRS). All activities funded through the Division of Behavioral Health (as SSA) must be entered into this reporting system.

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.

NPIRS maintains the race of individuals by single race categories. More than one race can be selected and is reported as "More than one race". These counts are not duplicated among the specific racial categories.

footnote:

V: Performance Indicators and Accomplishments

Table 31 - Prevention Performance Measures - Individual-Based Programs and Strategies; Measure: Number of Persons Served By Age, Gender, Race, And Ethnicity

Category	Total
Age	
0-4	3575
5-11	14904
12-14	12657
15-17	10890
18-20	13049
21-24	10982
25-44	23532
45-64	21783
65 and over	3896
Age Not Known	0
Gender	
Male	18766
Female	23690
Gender Unknown	72812
Race	
White	32344
Black or African American	2735
Native Hawaiian/Other Pacific Islander	87
Asian	214
American Indian/Alaska Native	635
More Than One Race (not OMB required)	311

Race Not Known or Other (not OMB required)	78388
Ethnicity	
Hispanic or Latino	2058
Not Hispanic or Latino	113210

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

The Division of Behavioral Health utilizes an on-line web database called the Nebraska Prevention Information Reporting System (NPIRS). All activities funded through the Division of Behavioral Health (as SSA) must be entered into this reporting system.

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.

NPIRS maintains the race of individuals by single race categories. More than one race can be selected and is reported as "More than one race". These counts are not duplicated among the specific racial categories.

footnote:

V: Performance Indicators and Accomplishments

Table 32 - Prevention Performance Measures - Population-Based Programs And Strategies; Measure: Number of Persons Served By Age, Gender, Race, And Ethnicity

Category	Total
Age	
0-4	4704
5-11	20308
12-14	27796
15-17	43535
18-20	58590
21-24	79123
25-44	158339
45-64	145628
65 and over	86461
Age Not Known	0
Gender	
Male	308602
Female	312462
Gender Unknown	3420
Race	
White	402009
Black or African American	26299
Native Hawaiian/Other Pacific Islander	1651
Asian	4108
American Indian/Alaska Native	11382
More Than One Race (not OMB required)	62133

Race Not Known or Other (not OMB required)	97796
Ethnicity	
Hispanic or Latino	88252
Not Hispanic or Latino	536232

footnote:

V: Performance Indicators and Accomplishments

Table 33 - 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	109403	N/A
2. Universal Indirect	N/A	573018
3. Selective	2108	N/A
4. Indicated	0	N/A
5. Total	111511	573018

footnote:

V: Performance Indicators and Accomplishments

Table 34 - 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.

Programs must be listed in a federal list or registry of evidence-based interventions in order to be counted as EBP in Nebraska Prevention Information Reporting System.

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

The Division of Behavioral Health utilizes an on-line web application referred to as the Nebraska Prevention Information Reporting System (NPIRS).

Table 34 - 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	294	114	408	122	0	530
2. Total number of Programs and Strategies Funded	1389	713	2102	258	0	2360
3. Percent of Evidence-Based Programs and Strategies	21.17 %	15.99 %	19.41 %	47.29 %		22.46 %

footnote:

V: Performance Indicators and Accomplishments

Table 35 - 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 # 3	\$
Universal Indirect	Total # 11	\$
Selective	Total # 2	\$
Indicated	Total # 0	\$
	Total EBPs: 16	Total Dollars Spent: \$0

footnote:

Grant dollars expenditures are documented by strategy, but not by IOM. It is not possible at this time to report SABG dollars for this table.

V: Performance Indicators and Accomplishments

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"/>
--	----------------------	--	---------------------------------------

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