

Nebraska

UNIFORM APPLICATION

FY 2016 BEHAVIORAL HEALTH REPORT

SUBSTANCE ABUSE PREVENTION AND TREATMENT BLOCK GRANT

OMB - Approved 05/21/2013 - Expires 05/31/2016
(generated on 02/24/2016 3.35.31 PM)

Center for Substance Abuse Prevention
Division of State Programs

Center for Substance Abuse Treatment
Division of State and Community Assistance

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

Mailing Address 301 Centennial Mall South, Third Floor, PO Box 95026

City Lincoln

Zip Code 68509-5026

II. Contact Person for the Block Grant

First Name Sheri

Last Name Dawson

Agency Name Nebraska Department of Health and Human Services

Mailing Address 301 Centennial Mall South, Third Floor, PO Box 95026

City Lincoln

Zip Code 68509-5026

Telephone 402-471-7856

Fax 402-471-7859

Email Address Sheri.Dawson@nebraska.gov

III. Expenditure Period

State Expenditure Period

From 7/1/2014

To 6/30/2015

Block Grant Expenditure Period

From 10/1/2012

To 9/30/2014

IV. Date Submitted

Submission Date 12/1/2015 10:02:20 PM

Revision Date

V. Contact Person Responsible for Report Submission

First Name Karen

Last Name Harker

Telephone 402-471-7796

Fax 402-471-7859

Email Address karen.harker@nebraska.gov

VI. Contact Person Responsible for Substance Abuse Data

First Name Heather

Last Name Wood

Telephone 402-471-1423

Email Address heather.wood@nebraska.gov

Footnotes:

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.

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

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

How second 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?"

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

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

How second 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 to 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.

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

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

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

Status: Per contract with Regional Behavioral Health Authorities, providers completed a reassessment using the COMPASS-EZ in FY15 and made improvements in every area.

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.

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

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

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

Status: Per contract with Regional Behavioral Health Authorities, providers completed a reassessment using the TIC tool in FY15 and made improvements in every area.

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.

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

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

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

Status: A Peer Support Plan was previously approved by the Director-Nebraska DHHS Division of Behavioral Health on the Use of Peer Support to provide Recovery Supports in Nebraska. Implementation for well over 80% of the plan has occurred. Action items still underway or under review include: reassessment of workforce using peer support employment survey (previously conducted in 2012) and cost analysis for peer support services.

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.

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

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

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

Status: Per contract with Regional Behavioral Health Authorities, providers conducted TB screenings for FY15

Footnotes:

III: Expenditure Reports

Table 2 - State Agency Expenditure Report

Expenditure Period Start Date: 7/1/2014 Expenditure Period End Date: 6/30/2015

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	\$5,314,888		\$4,355,795	\$0	\$23,602,330	\$0	\$0
a. Pregnant Women and Women with Dependent Children*	\$465,740		\$0	\$0	\$1,686,618	\$0	\$0
b. All Other	\$4,849,148		\$4,355,795	\$0	\$21,915,712	\$0	\$0
2. Primary Prevention	\$1,717,210	\$0	\$0	\$1,224,723	\$259,841	\$0	\$0
3. Tuberculosis Services	\$0		\$0	\$0	\$0	\$0	\$0
4. HIV Early Intervention Services	\$0		\$0	\$0	\$0	\$0	\$0
5. State Hospital							
6. Other 24 Hour Care							
7. Ambulatory/Community Non-24 Hour Care							
8. Administration (Excluding Program and Provider Level)	\$379,018	\$0	\$0	\$0	\$0	\$0	\$0
9. Subtotal (Row 1, 2, 3, 4 and 8)	\$7,411,116	\$0	\$4,355,795	\$1,224,723	\$23,862,171	\$0	\$0
10. Subtotal (Row 5, 6, 7 and 8)	\$379,018	\$0	\$0	\$0	\$0	\$0	\$0
11. Total	\$7,411,116	\$0	\$4,355,795	\$1,224,723	\$23,862,171	\$0	\$0

* Prevention other than primary prevention

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: 7/1/2014 Expenditure Period End Date: 6/30/2015

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)			\$1,717,210
Screening, Brief Intervention and Referral to Treatment			\$1,717,210
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			\$552,893
Assessment			\$95,077
Specialized Evaluations (Psychological and Neurological)			\$0
Service Planning (including crisis planning)			\$0
Consumer/Family Education			\$0
Outreach			\$457,816
Outpatient Services			\$696,837
Evidenced-based Therapies			\$0
Group Therapy			\$696,837
Family Therapy			\$0
Multi-family Therapy			\$0
Consultation to Caregivers			\$0
Medication Services			\$1,125,651
Medication Management			\$0
Pharmacotherapy (including MAT)			\$1,125,651
Laboratory services			\$0
Community Support (Rehabilitative)			\$235,807
Parent/Caregiver Support			\$0
Skill Building (social, daily living, cognitive)			\$0
Case Management		974.93	\$235,807

Behavior Management			\$0
Supported Employment			\$0
Permanent Supported Housing			\$0
Recovery Housing			\$0
Therapeutic Mentoring			\$0
Traditional Healing Services			\$0
Recovery Supports			\$8,622
Peer Support			\$7,282
Recovery Support Coaching			\$1,340
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			\$225,424
Substance Abuse Intensive Outpatient (IOP)		7923.52	\$225,424
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			\$1,851,726
Children's Mental Health Residential Services			\$0
Crisis Residential/Stabilization			\$0
Clinically Managed 24 Hour Care (SA)			\$0
Clinically Managed Medium Intensity Care (SA)		15964.68	\$1,851,726
Adult Mental Health Residential			\$0
Youth Substance Abuse Residential Services			\$0
Therapeutic Foster Care			\$0
Acute Intensive Services			\$489,655
Mobile Crisis			\$0
Peer-based Crisis Services			\$0
Urgent Care			\$0
23-hour Observation Bed			\$489,655
Medically Monitored Intensive Inpatient (SA)			\$0
24/7 Crisis Hotline Services			\$0
Other (please list)			\$128,273
Provider Education			\$128,273
Total			\$7,032,098

Footnotes:

III: Expenditure Reports

Table 4 - State Agency SABG Expenditure Compliance Report

Expenditure Period Start Date: 10/1/2012 Expenditure Period End Date: 9/30/2014

Category	FY 2013 SAPT Block Grant Award
1. Substance Abuse Prevention* and Treatment	\$5,396,761
2. Primary Prevention	\$1,649,751
3. Tuberculosis Services	\$0
4. HIV Early Intervention Services**	\$0
5. Administration (excluding program/provider level)	\$370,869
6. Total	\$7,417,381

*Prevention other than Primary Prevention

**HIV Designated States

Footnotes:

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" value="72,573"/>	\$ <input type="text"/>	\$ <input type="text" value="41,398"/>	\$ <input type="text"/>	\$ <input type="text"/>
Information Dissemination	Unspecified	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Information Dissemination	Total	\$72,573	\$	\$41,398	\$	\$
Education	Selective	\$ <input type="text" value="68,079"/>	\$ <input type="text"/>	\$ <input type="text" value="720"/>	\$ <input type="text"/>	\$ <input type="text"/>
Education	Indicated	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Education	Universal	\$ <input type="text" value="147,616"/>	\$ <input type="text"/>	\$ <input type="text" value="76,444"/>	\$ <input type="text"/>	\$ <input type="text"/>
Education	Unspecified	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Education	Total	\$215,695	\$	\$77,164	\$	\$
Alternatives	Selective	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Alternatives	Indicated	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Alternatives	Universal	\$ <input type="text" value="30,642"/>	\$ <input type="text"/>	\$ <input type="text" value="24,419"/>	\$ <input type="text"/>	\$ <input type="text"/>
Alternatives	Unspecified	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Alternatives	Total	\$30,642	\$	\$24,419	\$	\$
Problem Identification and Referral	Selective	\$ <input type="text" value="7,330"/>	\$ <input type="text"/>	\$ <input type="text" value="574"/>	\$ <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" value="63,006"/>	\$ <input type="text"/>	\$ <input type="text" value="590"/>	\$ <input type="text"/>	\$ <input type="text"/>
Problem Identification and Referral	Unspecified	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Problem Identification and Referral	Total	\$70,336	\$	\$1,164	\$	\$
Community-Based Process	Selective	\$ <input type="text" value="15,790"/>	\$ <input type="text"/>	\$ <input type="text" value="452"/>	\$ <input type="text"/>	\$ <input type="text"/>

Community-Based Process	Indicated	\$ <input type="text"/>				
Community-Based Process	Universal	\$ 695,682	\$ <input type="text"/>	\$ 121,276	\$ <input type="text"/>	\$ <input type="text"/>
Community-Based Process	Unspecified	\$ <input type="text"/>				
Community-Based Process	Total	\$ 711,472	\$	\$ 121,728	\$	\$
Environmental	Selective	\$ 5,877	\$ <input type="text"/>	\$ 364	\$ <input type="text"/>	\$ <input type="text"/>
Environmental	Indicated	\$ <input type="text"/>				
Environmental	Universal	\$ 477,357	\$ <input type="text"/>	\$ 126,227	\$ <input type="text"/>	\$ <input type="text"/>
Environmental	Unspecified	\$ <input type="text"/>				
Environmental	Total	\$ 483,234	\$	\$ 126,591	\$	\$
Section 1926 Tobacco	Selective	\$ <input type="text"/>				
Section 1926 Tobacco	Indicated	\$ <input type="text"/>				
Section 1926 Tobacco	Universal	\$ 65,799	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Section 1926 Tobacco	Unspecified	\$ <input type="text"/>				
Section 1926 Tobacco	Total	\$ 65,799	\$	\$	\$	\$
Other	Selective	\$ <input type="text"/>				
Other	Indicated	\$ <input type="text"/>				
Other	Universal	\$ <input type="text"/>				
Other	Unspecified	\$ <input type="text"/>				
Other	Total	\$	\$	\$	\$	\$
	Grand Total	\$ 1,649,751	\$	\$ 392,464	\$	\$

Footnotes:

III: Expenditure Reports

Table 5b - Primary Prevention Expenditures by IOM Category

Expenditure Period Start Date: 10/1/2012 Expenditure Period End Date: 9/30/2014

Activity	SAPT Block Grant	Other Federal Funds	State Funds	Local Funds	Other
Universal Direct	\$238,928		\$43,852		
Universal Indirect	\$1,313,747		\$346,502		
Selective	\$97,076		\$2,110		
Indicated	\$		\$		
Column Total	\$1,649,751.00	\$0.00	\$392,464.00	\$0.00	\$0.00

Footnotes:

III: Expenditure Reports

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

Expenditure Period Start Date: 10/1/2012 Expenditure Period End Date: 9/30/2014

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

Footnotes:

III: Expenditure Reports

Table 6 - Resource Development Expenditure Checklist

Expenditure Period Start Date: 10/1/2012 Expenditure Period End Date: 9/30/2014

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		\$35,991.00				\$35,991.00
2. Quality Assurance		\$35,991.00		\$35,991.00		\$71,982.00
3. Training (Post-Employment)				\$77,931.00		\$77,931.00
4. Program Development		\$71,981.00		\$35,991.00		\$107,972.00
5. Research and Evaluation						\$0.00
6. Information Systems		\$26,812.00				\$26,812.00
7. Education (Pre-Employment)				\$51,954.00		\$51,954.00
8. Total	\$0.00	\$170,775.00	\$0.00	\$201,867.00	\$0.00	\$372,642.00

Footnotes:

III: Expenditure Reports

Table 7 - Statewide Entity Inventory

Expenditure Period Start Date: 10/1/2012 Expenditure Period End Date: 9/30/2014

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 Counseling	604 South 37th Street	Omaha	NE	68105	\$73,025	\$73,025	\$0	\$0	\$0
100513	NE100513	✓	Omaha Metro	Alegent Creighton Health Psych Assoc	7101 Newport Avenue	Omaha	NE	68152	\$14,879	\$14,879	\$0	\$0	\$0
100898	NE100898	✓	South Central	Area Substance Abuse	835 South Burlington Suite 114	Hastings	NE	68901	\$64,891	\$0	\$0	\$64,891	\$0
100781	NE100781	✓	Omaha Metro	BAART	1941 South 42nd Street Suite 210	Omaha	NE	68105	\$984,484	\$984,484	\$0	\$0	\$0
100868	NE100868	✓	Northeast	Back to Basics	3806 Howard Boulevard	Columbus	NE	68601	\$32,906	\$0	\$0	\$32,906	\$0
100856	NE100856	✓	Panhandle	Banner County Prevention Coalition	Banner County Public Schools P.O. Box 5	Harrisburg	NE	69345	\$3,586	\$0	\$0	\$3,586	\$0
301302	NE301302	✓	Northeast	Behavioral Health Specialists Inc	900 West Norfolk Avenue Suite 200	Norfolk	NE	68701-5006	\$336,679	\$336,679	\$0	\$0	\$0
750953	NE750953	✓	Southeast	Blue Valley Behavioral Health	1123 North 9th Street	Beatrice	NE	68310	\$119,364	\$119,364	\$0	\$0	\$0
100857	NE100857	✓	Panhandle	Box Butte County Family Focus	P.O. Box 5	Alliance	NE	69301	\$5,040	\$0	\$0	\$5,040	\$0
100603	NE100603	✓	Southeast	Bridge Behavioral Health	721 K Street	Lincoln	NE	68508	\$475,114	\$475,114	\$0	\$0	\$0
900335	NE900335	✓	South Central	Bridge Inc	907 South Kansas Street	Hastings	NE	68901	\$133,225	\$133,225	\$58,571	\$0	\$0
100917	NE100917	✓	99	Buffalo Beach Company	3426 O Street	Lincoln	NE	68503	\$4,000	\$0	\$0	\$4,000	\$0
100126	NE100126	✓	Northeast	Catholic Charities of Greater Nebraska	3020 18th Street 2nd Floor	Columbus	NE	68601	\$95,627	\$95,627	\$0	\$0	\$0
100431	NE100431	✓	Omaha Metro	Catholic Charities/Omaha	1490 North 16th Street	Omaha	NE	68102	\$501,977	\$501,977	\$0	\$0	\$0
301401	NE301401	✓	Southeast	CenterPointe	1000 South 13th Street	Lincoln	NE	68508-3533	\$172,572	\$172,572	\$0	\$0	\$0
750144	NE750144	✓	South Central	Central Nebraska	219 West 2nd Street	Grand Island	NE	68801	\$49,913	\$0	\$0	\$49,913	\$0
NE100885	NE100885	✓	South Central	Community Connections	P.O. Box 852	North Platte	NE	69103	\$105,178	\$0	\$0	\$105,178	\$0
NE100858	NE100858	✓	Panhandle	Dawes/Sioux Family Preservation Team	300 Shelton Street	Chadron	NE	69337	\$11,052	\$0	\$0	\$11,052	\$0
					Volunteers								

	NE100859	NE100859	✓	Panhandle	Deuell County Prevention Team	of America 20745 Road 4	Big Springs	NE	69122	\$3,889	\$0	\$0	\$3,889	\$0
	100913	NE100913	✓	Northeast	Elkhorn Logan Valley Public	P.O. Box 779	Wisner	NE	68791	\$26,672	\$0	\$0	\$26,672	\$0
	750151	NE750151	✓	Northeast	Friendship House	406 West Koenig Street	Grand Island	NE	68801	\$319,272	\$319,272	\$0	\$0	\$0
	100861	NE100861	✓	Panhandle	Garden County Coalition	Volunteers of America P.O. Box 128	Lewellen	NE	69147	\$3,604	\$0	\$0	\$3,604	\$0
	100804	NE100804	✓	South Central	Garfield Loop Wheeler Childrens	P.O. Box 638	Burwell	NE	68823	\$39,195	\$0	\$0	\$39,195	\$0
	NE100551	NE100551	✓	South Central	Goodwill Industries of Greater NE	1804 South Eddy P.O. Box 1863	Grand Island	NE	68802	\$8,663	\$8,663	\$0	\$0	\$0
	900491	NE900491	✓	Northeast	Heartland Counseling Services Inc	P.O. Box 355	South Sioux City	NE	68776-0355	\$72,994	\$72,994	\$0	\$0	\$0
	100356	NE100356	✓	Northeast	Heartland Counseling Services Inc	405 West Douglas Street	ONeill	NE	68763	\$4,255	\$4,255	\$0	\$0	\$0
	100103	NE100103	✓	Omaha Metro	Heartland Family Service	2101 South 42nd Street	Omaha	NE	68105	\$61,800	\$61,800	\$40,038	\$0	\$0
	901242	NE901242	✓	Southeast	Houses of Hope of Nebraska Inc	1124 North Cotner Boulevard	Lincoln	NE	68505-1834	\$26,439	\$26,439	\$0	\$0	\$0
	NE100862	NE100862	✓	Panhandle	Human Needs Network of	400 East 10th Street Suite 206	Gordon	NE	69343	\$2,753	\$0	\$0	\$2,753	\$0
	900699	NE900699	✓	Panhandle	Human Services Inc	419 West 25th Street	Alliance	NE	69301	\$166,133	\$166,133	\$81,780	\$0	\$0
	101229	NE101229	✓	Northeast	Juvenile Awareness Group	200 South Lincoln Street Room 51	West Point	NE	68788	\$2,750	\$0	\$0	\$2,750	\$0
	100863	NE100863	✓	Panhandle	Kids Plus Inc	P. O. Box 296	Sidney	NE	69162	\$4,086	\$0	\$0	\$4,086	\$0
	NE100681	NE100681	✓	Northeast	Liberty Centre Services	900 East Norfolk Avenue	Norfolk	NE	68701	\$10,670	\$10,670	\$0	\$0	\$0
	100563	NE100563	✓	Southeast	Lincoln Lancaster County	2444 O Street	Lincoln	NE	68510	\$54,357	\$54,357	\$0	\$0	\$0
	100415	NE100415	✓	99	Lincoln Medical Education Partnership	4600 Valley Road	Lincoln	NE	68510	\$289,060	\$234,354	\$64,458	\$54,706	\$0
	900418	NE900418	✓	Northeast	Link Inc	1001 West Norfolk Avenue	Norfolk	NE	68701	\$107,726	\$107,726	\$0	\$0	\$0
	100616	NE100616	✓	Omaha Metro	Livewise	8545 Park Drive	Ralston	NE	68127	\$218,370	\$0	\$0	\$218,370	\$0
	101793	NE101793	✓	Omaha Metro	Lutheran Family Services	120 South 24th Street Suite 230	Omaha	NE	68102	\$25,425	\$25,425	\$0	\$0	\$0
	900962	NE900962	✓	Southeast	Lutheran Family Services	2900 O Street Suite 200	Lincoln	NE	68510-1454	\$15,537	\$15,537	\$0	\$0	\$0
	301500	NE301500	✓	South Central	Mid Plains Center for	914 Baumann Street	Grand Island	NE	68803-4401	\$593	\$593	\$0	\$0	\$0
	NE100601	NE100601	✓	Panhandle	Monument Prevention Coalition	1601 East 27th Street	Scottsbluff	NE	69361	\$9,714	\$0	\$0	\$9,714	\$0
	100864	NE100864	✓	Panhandle	Morrill County Prevention Coalition	P.O. Box 337	Hemingford	NE	69348	\$4,700	\$0	\$0	\$4,700	\$0
	000005	NE000005	✗	99	Nebraska State Patrol	PO Box 94907	Lincoln	NE	68509	\$38,023	\$0	\$0	\$38,023	\$0

900582	NE900582	✓	Omaha Metro	Nebraska Urban Indian Health Coalition	2240 Landon Court	Omaha	NE	68102	\$74,989	\$5,139	\$0	\$69,850	\$0
100866	NE100866	✓	Northeast	North Central Care Partnership	422 East Douglas Street	Oneill	NE	68763	\$50,315	\$0	\$0	\$50,315	\$0
100705	NE100705	✗	Northeast	North Central District Health	422 E Douglas St	Oneill	NE	68763	\$3,633	\$0	\$0	\$3,633	\$0
101227	NE101227	✓	Northeast	Northeast Community College	801 East Benjamain Avenue	Norfolk	NE	68701	\$714	\$714	\$0	\$0	\$0
100605	NE100605	✓	Panhandle	Northeast Panhandle	P.O. Box 428	Gordon	NE	69343	\$93,373	\$93,373	\$0	\$0	\$0
300072	NE300072	✓	Omaha Metro	NOVA Treatment Community	8502 Morman Bridge Road	Omaha	NE	68152	\$21,007	\$21,007	\$0	\$0	\$0
NE100886	NE100886	✓	Northeast	Oasis Counseling International	333 West Norfolk Avenue Suite 201	Norfolk	NE	68701	\$23,831	\$23,831	\$0	\$0	\$0
NE100884	NE100884	✓	Southwest	Ogallala Youth Committee	1005 Parkhill Drive	Ogallala	NE	69153	\$8,974	\$0	\$0	\$8,974	\$0
NE101226	NE101226	✓	Omaha Metro	One World Community Health Center	4920 South 30th Street Suite 103	Omaha	NE	68107	\$7,144	\$7,144	\$0	\$0	\$0
100955	NE100955	✗	99	Orion Healthcare Technology	1016 Leavenworth Street	Omaha	NE	68102	\$26,812	\$0	\$0	\$26,812	\$0
300205	NE300205	✓	Panhandle	Panhandle Mental Health Center	4110 Avenue D	Scottsbluff	NE	69361	\$424,002	\$339,342	\$27,552	\$84,660	\$0
NE100871	NE100871	✓	South Central	Positive Pressure Community Coalition	P.O. Box 1486	Kearney	NE	68848	\$41,294	\$0	\$0	\$41,294	\$0
100530	NE100530	✓	Southwest	Region II Human Services	110 North Bailey Street P.O. Box 1208	North Platte	NE	69103	\$289,413	\$95,311	\$81,360	\$194,102	\$0
100803	NE100803	✓	South Central	Region III Behavioral Health Services	P.O. Box 2555	Kearney	NE	68848-2555	\$122,729	\$89,783	\$0	\$32,946	\$0
100811	NE100811	✓	Northeast	Region IV MH and SA Service District	206 Monroe Avenue	Norfolk	NE	68701	\$77,722	\$47,073	\$0	\$30,649	\$0
100837	NE100837	✓	Omaha Metro	Region VI Behavioral Health Authority	1941 South 42nd Street Suite 112	Omaha	NE	68105-2982	\$92,572	\$67,611	\$0	\$24,960	\$0
100829	NE100829	✗	Southeast	Regional Prevention Center	1645 N Street Suite A	Lincoln	NE	68508	\$502,595	\$173,422	\$0	\$329,173	\$0
900731	NE900731	✓	South Central	Saint Francis	2116 West Faidley Avenue	Grand Island	NE	68803	\$81,250	\$81,250	\$12,956	\$0	\$0
900038	NE900038	✓	Southeast	Saint Monicas	- - -	Lincoln	NE	68510	\$82,480	\$82,480	\$37,885	\$0	\$0
750540	NE750540	✓	Omaha Metro	Santa Monica Inc	130 North 39th Street	Omaha	NE	68131	\$38,052	\$38,052	\$0	\$0	\$0
100872	NE100872	✓	South Central	Sherman County Prevention	P.O. Box 621	Loup City	NE	68853	\$45,087	\$0	\$0	\$45,087	\$0
301708	NE301708	✓	South Central	South Central Behavioral Services	3810 Central Avenue	Kearney	NE	68848	\$184,143	\$184,143	\$28,172	\$0	\$0
000081	NE000081	✓	Southeast	Touchstone Short Term Residential	2633 P Street First Floor	Lincoln	NE	68503	\$16,084	\$16,084	\$0	\$0	\$0
101232	NE101232	✓	99	University of Nebraska	312 North 14th Street	Lincoln	NE	68588	\$19,225	\$0	\$0	\$19,225	\$0
101224	NE101224	✓	Panhandle	Western Community Health Resources	831 Moorhead Street	Chadron	NE	69337	\$40	\$0	\$0	\$40	\$0

	100221	NE100221	✓	Northeast	Womens Empowering Life Line Inc	910 West Park Avenue	Norfolk	NE	68701	\$15,837	\$15,837	\$15,837	\$0	\$0
	NE100637	NE100637	✓	Northeast	Zone Afterschool Program	105 22nd Drive	Norfolk	NE	68701	\$3,000	\$0	\$0	\$3,000	\$0
Total										\$7,046,512	\$5,396,761	\$448,609	\$1,649,751	\$0

* Indicates the imported record has an error.

Footnotes:

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(2013) + B2(2014)</u> 2 (C)
SFY 2013 (1)	\$25,026,522	
SFY 2014 (2)	\$23,346,022	\$24,186,272
SFY 2015 (3)	\$25,871,936	

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

SFY 2013 Yes No

SFY 2014 Yes No

SFY 2015 Yes No

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

Footnotes:

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 2015 (3)	\$68,576	15.79%	\$10,828

Footnotes:

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 2015	\$0

Footnotes:
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 2013		\$2,146,627
SFY 2014		\$2,047,086
SFY 2015		\$2,152,358
Enter the amount the State plans to expend in 2016 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>2218083.00</u>		

Footnotes:

IV: Populations and Services Reports

Table 9 - Prevention Strategy Report

Expenditure Period Start Date: 10/1/2012 Expenditure Period End Date: 9/30/2014

Column A (Risks)	Column B (Strategies)	Column C (Providers)
All Risk Groups	1. Information Dissemination	
	1. Clearinghouse/information resources centers	0
	2. Resources directories	0
	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
	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
	3. Alternatives	
	1. Drug free dances and parties	0
	2. Youth/adult leadership activities	1
	3. Community drop-in centers	0
	4. Community service activities	1
	5. Outward Bound	0
	6. Recreation activities	1
	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
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. 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	1
4. Product pricing strategies	0

Footnotes:

IV: Populations and Services Reports

Table 10 - Treatment Utilization Matrix

Expenditure Period Start Date: 7/1/2014 Expenditure Period End Date: 6/30/2015

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
REHABILITATION/RESIDENTIAL					
3. Hospital Inpatient	0	0	\$0	\$0	\$0
4. Short-term (up to 30 days)	1274	1219	\$5,293	\$5,631	\$1,351
5. Long-term (over 30 days)	950	886	\$9,961	\$6,769	\$6,419
AMBULATORY (OUTPATIENT)					
6. Outpatient	9352	7311	\$735	\$682	\$4,958
7. Intensive Outpatient	987	924	\$1,023	\$1,043	\$348
8. Detoxification	7732	4648	\$367	\$672	\$2,049
OPIOID REPLACEMENT THERAPY					
9. Opioid Replacement Therapy	519	349	\$3,302	\$0	\$0
10. ORT Outpatient	0	0	\$0	\$0	\$0

Footnotes:

IV: Populations and Services Reports

Table 11 - Unduplicated Count of Persons

Expenditure Period Start Date: 7/1/2014 Expenditure Period End Date: 6/30/2015

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	184	90	63	5	7	2	3	0	2	7	2	0	3	0	0	72	65	32	15
2. 18 - 24	2862	1642	796	122	61	20	10	26	9	112	41	5	9	7	2	1591	816	343	112
3. 25 - 44	6709	3599	1972	455	140	51	20	37	10	230	129	20	30	9	7	3810	2074	591	234
4. 45 - 64	2734	1477	739	246	80	24	2	10	2	83	52	10	5	3	1	1657	808	196	73
5. 65 and Over	114	83	15	12	2	0	0	0	1	0	0	1	0	0	0	93	17	3	1
6. Total	12603	6891	3585	840	290	97	35	73	24	432	224	36	47	19	10	7223	3780	1165	435
7. Pregnant Women	101		80		8		2		0		9		2		0		92		9
Number of persons served who were admitted in a period prior to the 12 month reporting period		3233																	
Number of persons served outside of the levels of care described on Table 10		353																	

Footnotes:

Individuals included in this reporting are those that were served in a substance use disorder or dual service during fiscal year 2015 funded by the Nebraska DHHS Division of Behavioral Health (DBH). This report does not include individuals served through Medicaid funding. In addition to the 12,603 individuals in the DBH substance use disorder and dual service unduplicated counts, a total of 353 unduplicated individuals received substance use disorder or dual services funded through Medicaid.

IV: Populations and Services Reports

Table 12 - HIV Designated States Early Intervention Services

Expenditure Period Start Date: 7/1/2014 Expenditure Period End Date: 6/30/2015

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:		
Footnotes:		

IV: Populations and Services Reports

Table 13 - Charitable Choice

Expenditure Period Start Date: 7/1/2014 Expenditure Period End Date: 6/30/2015

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.

In May, 2015 the Division of Behavioral Health (Division) created a self-study power point about Charitable Choice. This power point was distributed to Regional Behavioral Health Authorities (RBHA) under contract with the Division who are responsible for overseeing services in their respective counties. The RBHAs could either send this power point to each of their contracted providers to review or conduct a presentation of the material at one of their regularly scheduled provider meetings. Each provider was required to sign and submit an attestation to the RBHA that they had reviewed, understood and would abide by the requirements. Training and monitoring of charitable choice occurs in a variety of formal and informal ways across the state including 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 RBHAs and Division of Behavioral Health monitor 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.

Footnotes:

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

Total number of clients with non-missing values on employment/student status [denominator]	1,034	1,034
Percent of clients employed or student (full-time and part-time)	12.2 %	10.3 %
Notes (for this level of care):		
Number of CY 2014 admissions submitted:		
Number of CY 2014 discharges submitted:		1,069
Number of CY 2014 discharges linked to an admission:		1,052
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		1,034
Number of CY 2014 linked discharges eligible for this calculation (non-missing values):		1,034

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file
[Records received through 2/1/2016]

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]	77	255
Total number of clients with non-missing values on employment/student status [denominator]	558	558
Percent of clients employed or student (full-time and part-time)	13.8 %	45.7 %
Notes (for this level of care):		
Number of CY 2014 admissions submitted:		697
Number of CY 2014 discharges submitted:		587
Number of CY 2014 discharges linked to an admission:		583

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	558
Number of CY 2014 linked discharges eligible for this calculation (non-missing values):	558

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file
[Records received through 2/1/2016]

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]	1,320	1,484
Total number of clients with non-missing values on employment/student status [denominator]	2,736	2,736
Percent of clients employed or student (full-time and part-time)	48.2 %	54.2 %
Notes (for this level of care):		
Number of CY 2014 admissions submitted:		5,807
Number of CY 2014 discharges submitted:		3,977
Number of CY 2014 discharges linked to an admission:		2,872
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		2,736
Number of CY 2014 linked discharges eligible for this calculation (non-missing values):		2,736

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file
[Records received through 2/1/2016]

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]	180	215
Total number of clients with non-missing values on employment/student status [denominator]	428	428
Percent of clients employed or student (full-time and part-time)	42.1 %	50.2 %
Notes (for this level of care):		
Number of CY 2014 admissions submitted:		737
Number of CY 2014 discharges submitted:		494
Number of CY 2014 discharges linked to an admission:		455

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	428
Number of CY 2014 linked discharges eligible for this calculation (non-missing values):	428

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file
[Records received through 2/1/2016]

Footnotes:

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

Total number of clients with non-missing values on living arrangements [denominator]	858	858
Percent of clients in stable living situation	73.1 %	83.3 %
Notes (for this level of care):		
Number of CY 2014 admissions submitted:		1,181
Number of CY 2014 discharges submitted:		1,069
Number of CY 2014 discharges linked to an admission:		1,052
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		1,034
Number of CY 2014 linked discharges eligible for this calculation (non-missing values):		858

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file
[Records received through 2/1/2016]

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]	325	344
Total number of clients with non-missing values on living arrangements [denominator]	426	426
Percent of clients in stable living situation	76.3 %	80.8 %
Notes (for this level of care):		
Number of CY 2014 admissions submitted:		697
Number of CY 2014 discharges submitted:		587
Number of CY 2014 discharges linked to an admission:		583

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	558
Number of CY 2014 linked discharges eligible for this calculation (non-missing values):	426

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file
[Records received through 2/1/2016]

Outpatient (OP)

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

Total number of clients with non-missing values on living arrangements [denominator]	2,427	2,427
Percent of clients in stable living situation	92.2 %	93.6 %
Notes (for this level of care):		
Number of CY 2014 admissions submitted:		5,807
Number of CY 2014 discharges submitted:		3,977
Number of CY 2014 discharges linked to an admission:		2,872
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		2,736
Number of CY 2014 linked discharges eligible for this calculation (non-missing values):		2,427

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file
[Records received through 2/1/2016]

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]	375	378
Total number of clients with non-missing values on living arrangements [denominator]	390	390
Percent of clients in stable living situation	96.2 %	96.9 %
Notes (for this level of care):		
Number of CY 2014 admissions submitted:		737
Number of CY 2014 discharges submitted:		494
Number of CY 2014 discharges linked to an admission:		455

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	428
Number of CY 2014 linked discharges eligible for this calculation (non-missing values):	390

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file
[Records received through 2/1/2016]

Footnotes:

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]	932	1,014
Total number of Admission and Discharge clients with non-missing values on arrests [denominator]	1,038	1,038
Percent of clients without arrests	89.8 %	97.7 %
Notes (for this level of care):		
Number of CY 2014 admissions submitted:		1,181
Number of CY 2014 discharges submitted:		1,069
Number of CY 2014 discharges linked to an admission:		1,052
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		1,038
Number of CY 2014 linked discharges eligible for this calculation (non-missing values):		1,038

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file
[Records received through 2/1/2016]

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]	551	553
Total number of Admission and Discharge clients with non-missing values on arrests [denominator]	580	580
Percent of clients without arrests	95.0 %	95.3 %
Notes (for this level of care):		
Number of CY 2014 admissions submitted:		697
Number of CY 2014 discharges submitted:		587
Number of CY 2014 discharges linked to an admission:		583

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	580
Number of CY 2014 linked discharges eligible for this calculation (non-missing values):	580

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file
[Records received through 2/1/2016]

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]	2,633	2,610
Total number of Admission and Discharge clients with non-missing values on arrests [denominator]	2,822	2,822
Percent of clients without arrests	93.3 %	92.5 %
Notes (for this level of care):		
Number of CY 2014 admissions submitted:		5,807
Number of CY 2014 discharges submitted:		3,977
Number of CY 2014 discharges linked to an admission:		2,872
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		2,822
Number of CY 2014 linked discharges eligible for this calculation (non-missing values):		2,822

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file
[Records received through 2/1/2016]

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]	409	375
Total number of Admission and Discharge clients with non-missing values on arrests [denominator]	445	445
Percent of clients without arrests	91.9 %	84.3 %
Notes (for this level of care):		
Number of CY 2014 admissions submitted:		737
Number of CY 2014 discharges submitted:		494
Number of CY 2014 discharges linked to an admission:		455

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	445
Number of CY 2014 linked discharges eligible for this calculation (non-missing values):	445

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file
[Records received through 2/1/2016]

Footnotes:

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]	374	767
All clients with non-missing values on at least one substance/frequency of use [denominator]	1,003	1,003
Percent of clients abstinent from alcohol	37.3 %	76.5 %

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]		399
Number of clients using alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	629	
Percent of clients abstinent from alcohol at discharge among clients using alcohol at admission [#T2 / #T1 x 100]		63.4 %

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]		368
Number of clients abstinent from alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	374	
Percent of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [#T2 / #T1 x 100]		98.4 %

Notes (for this level of care):

Number of CY 2014 admissions submitted:	1,181
Number of CY 2014 discharges submitted:	1,069
Number of CY 2014 discharges linked to an admission:	1,052
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	1,038
Number of CY 2014 linked discharges eligible for this calculation (non-missing values):	1,003

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file

[Records received through 2/1/2016]

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]	348	423
All clients with non-missing values on at least one substance/frequency of use [denominator]	562	562
Percent of clients abstinent from alcohol	61.9 %	75.3 %

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]		87
Number of clients using alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	214	
Percent of clients abstinent from alcohol at discharge among clients using alcohol at admission [#T2 / #T1 x 100]		40.7 %

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]		336
Number of clients abstinent from alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	348	
Percent of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [#T2 / #T1 x 100]		96.6 %

Notes (for this level of care):

Number of CY 2014 admissions submitted:	697
Number of CY 2014 discharges submitted:	587
Number of CY 2014 discharges linked to an admission:	583
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	580
Number of CY 2014 linked discharges eligible for this calculation (non-missing values):	562

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file [Records received through 2/1/2016]

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]	1,496	1,592
All clients with non-missing values on at least one substance/frequency of use [denominator]	2,090	2,090
Percent of clients abstinent from alcohol	71.6 %	76.2 %

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]		159
Number of clients using alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator])	594	
Percent of clients abstinent from alcohol at discharge among clients using alcohol at admission [#T2 / #T1 x 100]		26.8 %

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]		1,433
Number of clients abstinent from alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator])	1,496	
Percent of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [#T2 / #T1 x 100]		95.8 %

Notes (for this level of care):

Number of CY 2014 admissions submitted:	5,807
Number of CY 2014 discharges submitted:	3,977
Number of CY 2014 discharges linked to an admission:	2,872
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	2,822
Number of CY 2014 linked discharges eligible for this calculation (non-missing values):	2,090

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file
[Records received through 2/1/2016]

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]	238	293

All clients with non-missing values on at least one substance/frequency of use [denominator]	378	378
Percent of clients abstinent from alcohol	63.0 %	77.5 %

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]		67
Number of clients using alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator])	140	
Percent of clients abstinent from alcohol at discharge among clients using alcohol at admission [#T2 / #T1 x 100]		47.9 %

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

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

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [numerator]		226
Number of clients abstinent from alcohol at admission (records with at least one substance/frequency of use at admission and discharge [denominator])	238	
Percent of clients abstinent from alcohol at discharge among clients abstinent from alcohol at admission [#T2 / #T1 x 100]		95.0 %

Notes (for this level of care):

Number of CY 2014 admissions submitted:	737
Number of CY 2014 discharges submitted:	494
Number of CY 2014 discharges linked to an admission:	455
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	445
Number of CY 2014 linked discharges eligible for this calculation (non-missing values):	378

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file
[Records received through 2/1/2016]

Footnotes:

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]	371	726
All clients with non-missing values on at least one substance/frequency of use [denominator]	1,003	1,003
Percent of clients abstinent from drugs	37.0 %	72.4 %

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]		363
Number of clients using drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	632	
Percent of clients abstinent from drugs at discharge among clients using Drug at admission [#T2 / #T1 x 100]		57.4 %

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]		363
Number of clients abstinent from drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	371	
Percent of clients abstinent from drugs at discharge among clients abstinent from Drug at admission [#T2 / #T1 x 100]		97.8 %

Notes (for this level of care):

Number of CY 2014 admissions submitted:	1,181
Number of CY 2014 discharges submitted:	1,069
Number of CY 2014 discharges linked to an admission:	1,052
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	1,038
Number of CY 2014 linked discharges eligible for this calculation (non-missing values):	1,003

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file

Records received through 2/1/2016

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]	374	428
All clients with non-missing values on at least one substance/frequency of use [denominator]	562	562
Percent of clients abstinent from drugs	66.5 %	76.2 %

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]		65
Number of clients using drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	188	
Percent of clients abstinent from drugs at discharge among clients using Drug at admission [#T2 / #T1 x 100]		34.6 %

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]		363
Number of clients abstinent from drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	374	
Percent of clients abstinent from drugs at discharge among clients abstinent from Drug at admission [#T2 / #T1 x 100]		97.1 %

Notes (for this level of care):

Number of CY 2014 admissions submitted:	697
Number of CY 2014 discharges submitted:	587
Number of CY 2014 discharges linked to an admission:	583
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	580
Number of CY 2014 linked discharges eligible for this calculation (non-missing values):	562

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file [Records received through 2/1/2016]

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]	1,627	1,697
All clients with non-missing values on at least one substance/frequency of use [denominator]	2,090	2,090
Percent of clients abstinent from drugs	77.8 %	81.2 %

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]		127
Number of clients using drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	463	
Percent of clients abstinent from drugs at discharge among clients using Drug at admission [#T2 / #T1 x 100]		27.4 %

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]		1,570
Number of clients abstinent from drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator]	1,627	
Percent of clients abstinent from drugs at discharge among clients abstinent from Drug at admission [#T2 / #T1 x 100]		96.5 %

Notes (for this level of care):

Number of CY 2014 admissions submitted:	5,807
Number of CY 2014 discharges submitted:	3,977
Number of CY 2014 discharges linked to an admission:	2,872
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	2,822
Number of CY 2014 linked discharges eligible for this calculation (non-missing values):	2,090

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file
[Records received through 2/1/2016]

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]	279	313

All clients with non-missing values on at least one substance/frequency of use [denominator]	378	378
Percent of clients abstinent from drugs	73.8 %	82.8 %

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

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

	At Admission(T1)	At Discharge(T2)
Number of clients abstinent from drugs at discharge among clients using drugs at admission [numerator]		47
Number of clients using drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator])	99	
Percent of clients abstinent from drugs at discharge among clients using Drug at admission [#T2 / #T1 x 100]		47.5 %

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]		266
Number of clients abstinent from drugs at admission (records with at least one substance/frequency of use at admission and discharge [denominator])	279	
Percent of clients abstinent from drugs at discharge among clients abstinent from Drug at admission [#T2 / #T1 x 100]		95.3 %
Notes (for this level of care):		
Number of CY 2014 admissions submitted:		737
Number of CY 2014 discharges submitted:		494
Number of CY 2014 discharges linked to an admission:		455
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		445
Number of CY 2014 linked discharges eligible for this calculation (non-missing values):		378

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file
[Records received through 2/1/2016]

Footnotes:

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]	366	965
Total number of clients with non-missing values on self-help attendance [denominator]	1,028	1,028
Percent of clients attending self-help programs	35.6 %	93.9 %
Percent of clients with self-help attendance at discharge minus percent of clients with self-help attendance at admission Absolute Change [%T2-%T1]	58.3 %	
Notes (for this level of care):		
Number of CY 2014 admissions submitted:		1,181
Number of CY 2014 discharges submitted:		1,069
Number of CY 2014 discharges linked to an admission:		1,052
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):		1,038
Number of CY 2014 linked discharges eligible for this calculation (non-missing values):		1,028

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file
[Records received through 2/1/2016]

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]	395	548
Total number of clients with non-missing values on self-help attendance [denominator]	568	568
Percent of clients attending self-help programs	69.5 %	96.5 %
Percent of clients with self-help attendance at discharge minus percent of clients with self-help attendance at admission Absolute Change [%T2-%T1]	26.9 %	
Notes (for this level of care):		
Number of CY 2014 admissions submitted:		697
Number of CY 2014 discharges submitted:		587

Number of CY 2014 discharges linked to an admission: 583

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated): 580

Number of CY 2014 linked discharges eligible for this calculation (non-missing values): 568

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file
[Records received through 2/1/2016]

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]	924	1,050
Total number of clients with non-missing values on self-help attendance [denominator]	2,819	2,819
Percent of clients attending self-help programs	32.8 %	37.2 %
Percent of clients with self-help attendance at discharge minus percent of clients with self-help attendance at admission Absolute Change [%T2-%T1]		4.5 %

Notes (for this level of care):

Number of CY 2014 admissions submitted: 5,807

Number of CY 2014 discharges submitted: 3,977

Number of CY 2014 discharges linked to an admission: 2,872

Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated): 2,822

Number of CY 2014 linked discharges eligible for this calculation (non-missing values): 2,819

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file
[Records received through 2/1/2016]

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]	183	264
Total number of clients with non-missing values on self-help attendance [denominator]	440	440
Percent of clients attending self-help programs	41.6 %	60.0 %
Percent of clients with self-help attendance at discharge minus percent of clients with self-help attendance at admission Absolute Change [%T2-%T1]		18.4 %

Notes (for this level of care):

Number of CY 2014 admissions submitted:	737
Number of CY 2014 discharges submitted:	494
Number of CY 2014 discharges linked to an admission:	455
Number of linked discharges after exclusions (excludes: detox, hospital inpatient, opioid replacement clients; deaths; incarcerated):	445
Number of CY 2014 linked discharges eligible for this calculation (non-missing values):	440

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file
[Records received through 2/1/2016]

Footnotes:

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)	28	21	29	36
5. Long-term (over 30 days)	94	28	74	136
AMBULATORY (OUTPATIENT)				
6. Outpatient	114	28	85	144
7. Intensive Outpatient	62	35	51	79
8. Detoxification	331	331	331	331
OPIOID REPLACEMENT THERAPY				
9. Opioid Replacement Therapy	104	5	55	168
10. ORT Outpatient	85	20	56	98

Level of Care	2014 TEDS discharge record count	
	Discharges submitted	Discharges linked to an admission
DETOXIFICATION (24-HOUR CARE)		
1. Hospital Inpatient	0	0
2. Free-Standing Residential	6646	3736
REHABILITATION/RESIDENTIAL		

3. Hospital Inpatient	0	0
4. Short-term (up to 30 days)	1069	1052
5. Long-term (over 30 days)	587	583
AMBULATORY (OUTPATIENT)		
6. Outpatient	3977	2832
7. Intensive Outpatient	494	455
8. Detoxification	69	1
OPIOID REPLACEMENT THERAPY		
9. Opioid Replacement Therapy	0	89
10. ORT Outpatient	0	40

Source: SAMHSA/CBHSQ TEDS CY 2014 admissions file and CY 2014 linked discharge file
[Records received through 2/1/2016]

Footnotes:

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 2012 - 2013	10.2	<input type="text"/>
	Age 18+ - CY 2012 - 2013	62.7	<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 2012 - 2013	7.1	<input type="text"/>
	Age 18+ - CY 2012 - 2013	22.8	<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 2012 - 2013	5.7	<input type="text"/>
	Age 18+ - CY 2012 - 2013	9.5	<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 2012 - 2013	7.7	<input type="text"/>
	Age 18+ - CY 2012 - 2013	5.2	<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 2012 - 2013	2.5	<input type="text"/>
	Age 18+ - CY 2012 - 2013	1.6	<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.

Footnotes:

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 2012 - 2013	76.1	<input type="text"/>
	Age 18+ - CY 2012 - 2013	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 2012 - 2013	93.0	<input type="text"/>
	Age 18+ - CY 2012 - 2013	93.2	<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 2012 - 2013	73.1	<input type="text"/>
	Age 18+ - CY 2012 - 2013	65.5	<input type="text"/>

Footnotes:

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 2012 - 2013	13.2	<input type="text"/>
	Age 18+ - CY 2012 - 2013	16.6	<input type="text"/>
2. Age at First Use of Cigarettes	Source Survey Item: NSDUH Questionnaire: "How old were you the first time you smoked part or all of a cigarette?[Response option: Write in age at first use.] Outcome Reported: Average age at first use of cigarettes.		
	Age 12 - 17 - CY 2012 - 2013	13.1	<input type="text"/>
	Age 18+ - CY 2012 - 2013	15.8	<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 2012 - 2013	13.8	<input type="text"/>
	Age 18+ - CY 2012 - 2013	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 2012 - 2013	14.0	<input type="text"/>
	Age 18+ - CY 2012 - 2013	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 2012 - 2013	13.1	<input type="text"/>
	Age 18+ - CY 2012 - 2013	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.

Footnotes:

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 2012 - 2013	92.3	<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 2012 - 2013	90.8	<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 2012 - 2013	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 2012 - 2013	82.1	<input type="text"/>
5. Disapproval of Alcohol	Source Survey Item: NSDUH Questionnaire: "How do you feel about someone your age having one or two drinks of an alcoholic beverage nearly every day?[Response options: Neither approve nor disapprove, somewhat disapprove, strongly disapprove] Outcome Reported: Percent somewhat or strongly disapproving.		
	Age 12 - 17 - CY 2012 - 2013	90.1	<input type="text"/>

Footnotes:

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 2012 - 2013	39.7	<input type="text"/>
	Age 12 - 17 - CY 2012 - 2013		<input type="text"/>

Footnotes:

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	90.2	<input type="text"/>

Footnotes:

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 2013 - 2014	28.4	<input type="text"/>

Footnotes:

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 2014	38.2	<input type="text"/>

Footnotes:

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 2012 - 2013	57.9	<input type="text"/>
2. Family Communications Around Drug and Alcohol Use (Parents of children aged 12-17)	Source Survey Item: NSDUH Questionnaire: "During the past 12 months, how many times have you talked with your child about the dangers or problems associated with the use of tobacco, alcohol, or other drugs?^[1][Response options: 0 times, 1 to 2 times, a few times, many times] Outcome Reported: Percent of parents reporting that they have talked to their child.		
	Age 18+ - CY 2012 - 2013		<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.

Footnotes:

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 2012 - 2013	88.7	<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.

Footnotes:

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	1/1/2013	12/31/2013
2. Table 32 - Prevention Performance Measures - Population-Based Programs And Strategies; Measure: Number of Persons Served By Age, Gender, Race, And Ethnicity	1/1/2013	12/31/2013
3. Table 33 - Prevention Performance Measures - Number of Persons Served by Type of Intervention	1/1/2013	12/31/2013
4. Table 34 - Prevention Performance Measures - Number of Evidence-Based Programs by Types of Intervention	1/1/2013	12/31/2013
5. Table 35 - Prevention Performance Measures - Total Number of Evidence-Based Programs and Total SAPTBG Dollars Spent on Evidence-Based Programs/Strategies	10/1/2012	9/30/2013

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.

Footnotes:

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	3169
5-11	17876
12-14	27150
15-17	61712
18-20	24109
21-24	22353
25-44	49116
45-64	43107
65 and over	8821
Age Not Known	0
Gender	
Male	64618
Female	67619
Gender Unknown	125176
Race	
White	86102
Black or African American	7283
Native Hawaiian/Other Pacific Islander	23
Asian	1750
American Indian/Alaska Native	911
More Than One Race (not OMB required)	1322

Race Not Known or Other (not OMB required)	160022
Ethnicity	
Hispanic or Latino	7251
Not Hispanic or Latino	250162

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.

Footnotes:

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	36359
5-11	22486
12-14	55623
15-17	110885
18-20	84454
21-24	104885
25-44	178688
45-64	203603
65 and over	117389
Age Not Known	0
Gender	
Male	295991
Female	299320
Gender Unknown	319061
Race	
White	489076
Black or African American	8982
Native Hawaiian/Other Pacific Islander	711
Asian	1350
American Indian/Alaska Native	2744
More Than One Race (not OMB required)	2762

Race Not Known or Other (not OMB required)	408747
Ethnicity	
Hispanic or Latino	70538
Not Hispanic or Latino	843834

Footnotes:

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	252835	N/A
2. Universal Indirect	N/A	914372
3. Selective	4232	N/A
4. Indicated	346	N/A
5. Total	257413	914372

Footnotes:

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	341	90	431	94	3	528
2. Total number of Programs and Strategies Funded	1640	516	2156	233	8	2397
3. Percent of Evidence-Based Programs and Strategies	20.79 %	17.44 %	19.99 %	40.34 %	37.50 %	22.03 %

Footnotes:

For line 1 (Number of Evidence-Based Programs and Strategies Funded) A-F reports an unduplicated count of the total number of EBP programs implemented (as explained in the instructions for completing table 34). For previous years it has been calculated as a count of unduplicated EBP programs offered and was not multiplied by the number of times it was implemented.

For line 2 (Total number of Programs and Strategies Funded) A-F reports the total number of programs offered by the implemented (as explained in the instructions for completing table 34). For previous years it has been calculated as the number of unduplicated EBP programs offered and was not multiplied by the number of times it was implemented.

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 # 341	\$ 45917.32
Universal Indirect	Total # 90	\$ 64845.19
Selective	Total # 94	\$ 19833.89
Indicated	Total # 3	\$ 831.26
	Total EBPs: 528	Total Dollars Spent: \$131427.66

Footnotes:

Expenditures reflected in this table are not an actual amount and are based on estimates only. Estimations were made by applying the percentage of EBP in each IOM from the total dollars expended in each IOM category.

V: Performance Indicators and Accomplishments

Prevention Attachments

Submission Uploads

FFY 2014 Prevention Attachment Category A:

File	Version	Date Added
------	---------	------------

FFY 2014 Prevention Attachment Category B:

File	Version	Date Added
------	---------	------------

FFY 2014 Prevention Attachment Category C:

File	Version	Date Added
------	---------	------------

FFY 2014 Prevention Attachment Category D:

File	Version	Date Added
------	---------	------------

Footnotes: