Annual Overview :

Patients in Publicly Funded Substance Use Disorder Treatment Programs in Los Angeles County

2021-2022 Fiscal Year

Health Outcomes and Data Analytics

May 2023

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DATA SOURCE

The information presented in this report is based primarily on the California Outcomes Measurement System (CalOMS) /Los Angeles County Participant Reporting System (LACPRS) Data collected by the SAGE system managed by the Los Angeles County Department of Public Health, Substance Abuse Prevention and Control (DPH-SAPC), and data obtained from secondary SAGE users that were missing from the primary Sage data source. CalOMS is a database in Sage, DPH-SAPC's substance use disorder (SUD) information system that secures ongoing annual cross-sectional data obtained at admission and discharge on patients from all publicly funded SUD treatment programs in LAC. CalOMS contains data on federal and state-required standardized measures, as well as additional sociodemographic and life and health outcome measures specific to LAC. Data analyzed for this report were retrieved on 03/16/2023.

MEASURES AND DESCRIPTIONS

Patient: A patient is a unique individual who was formally admitted and received SUD treatment or recovery services in a publicly funded speciality SUD treatment program in LAC. Patients in this report include those unique individuals who were admitted/received services in FY2122, and those who were admitted/received services prior to FY2122 and continued receiving services in FY2122. Statistics of gender identity, race/ethnicity, age, sexual orientation, and education are based on the unique number of patients.

Admission: An admission is the formal acceptance of a patient into a speciality SUD treatment program after completing the screening and intake process. Each admission has defined dates of admission and discharge. A patient may have multiple admissions depending on their treatment needs in a fiscal year. For example, an individual admitted to treatment twice within a fiscal year would be counted as two admissions. Admissions in this report include all new admissions during FY2122, and admissions prior to FY2122 and continued in FY2122. Statistics of some of the patients' characteristics (e.g., mental health issues, physical health issues, criminal justice status), primary substance use, level of care, discharge status, and treatment effectiveness assessment are based on the number of admissions.

Discharge status is defined as follows:

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

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

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

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

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

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

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

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

DATA LIMITATIONS AND GAPS

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

Executive Summary

This annual report is a comprehensive description of patients who received substance use disorder (SUD) treatment in publicly funded treatment programs in Los Angeles County (LAC) during the fiscal year 2021-2022 (FY2122). This report provides information on the sociodemographic and treatment characteristics of patients aged 12 and older, including but not limited to the number of admissions and discharges, discharge status, substance use status, levels of care, geographic distribution, and characteristics for special populations. In addition, trends over the last 10 fiscal years (FY1213-FY2122) are presented for selected variables. The present report is comprised of six chapters, and the key highlights of each chapter are as follows:

Chapter 1 - Who we serve

- 33,800 patients accounting for 53,443 SUD treatment admissions were served in FY2122; 64.1% of patients were males, 53.8% were Latinx, 70.1% were aged 26-54, and 66.6% were unemployed.
- 9.8% primarily spoke a language other than English at home.
- 51.0% reported having mental health issues, 33.9% were homeless, and 24.3% were involved in the criminal justice system.
- 28.6% reported methamphetamine as their primary substance use at admission, followed by alcohol (25.7%), heroin (21.3%), prescription drug (12.7%), marijuana (7.8%), and cocaine (3.2%).
- 28.9% received services in residential programs, followed by outpatient programs (23.0%), opioid treatment programs (21.7%), intensive outpatient programs (12.4%), withdrawal management (10.8%), and recovery support services (3.3%).
- 15.7% were from SPA 2 (San Fernando), followed by SPA 3 (San Gabriel Valley, 13.9%) and SPA 8 (South Bay, 11.2%).
- 37,771 (70.7%) admissions were discharged, of which 53.3% had positive compliance.

Chapter 2 - Primary Substance Use

Patients with Primary Heroin Use:

- 52.0% decrease in admissions from FY1617 to FY2122.
- 71.1% of patients were male.
- 52.5% reported using heroin every day 30 days prior to admission.
- 79.0% had previously received SUD treatment.
- 47.3% were discharged with positive compliance.

Patients with Primary Methamphetamine Use:

- 24.3% increase in admissions from FY1617 to FY2122.
- 35.0% were involved in the criminal justice system.
- 53.1% were homeless at admission.
- 54.6% reported poly-drug use.
- 40.1% initiated methamphetamine use before age 18.
- 49.9% were discharged with positive compliance.

Patients with Primary Marijuana Use:

- 78.4% decrease in admissions from FY1213 to FY2122.
- 23.5% of patients were youth aged 17 and under.
- 8.8% initiated at age 11 or younger; 71.1% initiated marijuana use between ages 12 and 17.
- 56.3% were treated in outpatient programs, followed by residential service programs (20.7%) and intensive outpatient programs (18.0%).
- 43.6% were discharged with positive compliance.

Patients with Primary Alcohol Use:

- 9.2% had their first drink at age 11 or younger, and 59.9% between ages 12 and 17.
- 63.8% reported having mental health issues.
- 30.7% were treated in residential service programs, followed by outpatient programs (28.4%), withdrawal management (22.1%), and intensive outpatient programs (14.8%).
- 64.5% were discharged with positive compliance.

Patients with Primary Prescription Drug Use:

- 63.0% of patients were male, and 46.2% were White.
- 48.5% reported misusing prescription drugs every day 30 days prior to admission.
- 90.6% reported misusing prescription opioids.
- 49.8% were discharged with positive compliance.

Patients with Primary Cocaine Use:

- 67.8% decrease in admissions from FY1213 to FY2122.
- 56.9% of patients were Black/African American.
- 61.1% reported having mental health issues.
- 61.6% reported poly-drug use.
- 47.4% were treated in residential services, followed by outpatient programs (28.7%), intensive outpatient programs (18.7%), and recovery support services (4.1%).
- 53.4% were discharged with positive compliance.

Chapter 3 - Level of Care

Patients Treated in Withdrawal Management:

- 49.3% were homeless.
- 52.0% reported alcohol as their primary substance use, followed by prescription drugs (26.5%) and heroin (17.9%).
- 74.0% were discharged with positive compliance.

Patients Treated in Residential Service Programs:

- 62.7% were homeless at admission, and 3.2% were employed.
- 47.7% reported methamphetamine as their primary substance use, followed by alcohol (27.3%) and heroin (6.8%).
- 56.2% were discharged with positive compliance.

Patients Treated in Intensive Outpatient Programs (IOP):

- 2.2% of patients were aged 17 and under.
- 42.4% reported methamphetamine as their primary substance use, followed by alcohol (30.2%) and marijuana (11.1%).
- 47.2% were discharged with positive compliance.

Patients Treated in Outpatient Programs:

- 35.2% reported methamphetamine as their primary substance use, followed by alcohol (31.7%) and marijuana (19.1%).
- 46.8% were discharged with positive compliance.

Patients Treated in Opioid Treatment Programs (OTP):

- 54.4% of patients were adults ages 45 or older.
- 72.0% reported heroin as their primary substance use, followed by a prescription drug (28.0%)
- 38.6% were discharged with positive compliance.

Chapter 4 - Service Planning Area (SPA)

- Latinx (79.4% for SPA 7) and White (57.4% for SPA 5) accounted for the largest proportion of the race/ethnic groups served in most of the SPAs, but Black was the second largest in SPA 6 (34.1%).
- Heroin was the most common primary substance use at admission for six out of eight SPAs, accounting for 33.2% of admissions in SPA 2 and 30.7% of admissions in SPA 5. Methamphetamine was the most common primary substance use for SPA 6 (30.3%), and prescription drug was the most common for SPA 1 (22.3%).
- Opioid treatment programs and outpatient programs were the most common levels of care across all SPAs except in SPA 5, where opioid treatment programs and residential services were the most common levels of care. Among all SPAs, SPA 5 had the largest proportion of admissions to opioid treatment programs (37.3%), and SPA 6 had the largest proportion of admissions to outpatient programs (34.1%).
- The percent of admissions discharged with positive compliance was highest in SPA 5 (60.4%) and lowest in SPA 6 (45.6%).
- The highlights are summarized in the table (next page):

	Race/Ethnicity		Primary Substance Use		Level of Care		Positive Compliance
SPA 1	Latinx	42.3%	Prescription drug	22.3%	OTP	33.6%	53.2%
	White	33.3%	Heroin	21.8%	Outpatient	31.1%	
SPA 2	White	46.1%	Heroin	33.2%	OTP	32.2%	56.8%
	Latinx	44.5%	Alcohol	26.1%	Outpatient	24.6%	
SPA 3	Latinx	63.8%	Heroin	28.7%	OTP	32.2%	46.7%
	White	26.3%	Methamphetamine	24.1%	Outpatient	27.8%	
SPA 4	Latinx	57.5%	Heroin	25.6%	OTP	28.9%	48.5%
	White	25.2%	Methamphetamine	25.4%	Outpatient	26.8%	
SPA 5	White	57.4%	Heroin	30.7%	OTP	37.3%	60.4%
	Latinx	26.8%	Alcohol	27.9%	Residential	20.4%	
SPA 6	Latinx	52.3%	Methamphetamine	30.3%	Outpatient	34.1%	45.6%
	Black	34.1%	Alcohol	22.7%	OTP	19.8%	
SPA 7	Latinx	79.4%	Heroin	25.9%	OTP	31.2%	49.3%
	White	14.6%	Methamphetamine	25.6%	Outpatient	29.5%	
SPA 8	Latinx	47.7%	Heroin	25.3%	OTP	31.7%	48.2%
	White	27.9%	Alcohol	23.3%	Outpatient	24.2%	
Homeless	Latinx	52.4%	Methamphetamine	39.7%	Residential	49.8%	57.7%
	White	25.7%	Alcohol	29.6%	Outpatient	15.1%	
LAC Overall	Latinx	53.8%	Methamphetamine	28.6%	Residential	28.9%	53.3%
	White	28.0%	Alcohol	25.7%	Outpatient	23.0%	

Chapter 5 – Supervisorial District (SD)

- Latinx (70.3% for SD 1) and White (45.4% for SD 3) accounted for the largest proportion of the race/ethnic groups for all SDs, except for SD 2, where Black was the second largest group (31.1%).
- Methamphetamine was the most common primary substance use in SD 2 (27.2%). Heroin was the most common primary substance use among admissions in all other SDs, accounting for 25.3% (SD 4) to 30.8% (SD 3) of admissions.
- Alcohol was the second most common primary substance use in SD 2, SD 3, and SD 5; methamphetamine was the second most common primary substance use in SD 1 and SD 4.
- The most common level of care was outpatient programs, followed by opioid treatment programs for SD 2; the most common level of care was opioid treatment programs, followed by outpatient programs for SD 1, SD 3, SD 4, and SD 5.
- The percent of admissions discharged with positive compliance was highest in SD 3 (56.9%) and lowest in SD 1 (44.9%).
- The highlights are summarized in the table below:

	Race/Ethnicity		Primary substance use		Level of Care		Positive Compliance
SD 1	Latinx	70.3%	Heroin	29.8%	OTP	33.7%	44.9%
	White	18.6%	Methamphetamine	25.5%	Outpatient	29.3%	
SD 2	Latinx	49.6%	Methamphetamine	27.2%	Outpatient	31.4%	48.0%
	Black	31.1%	Alcohol	23.9%	OTP	22.8%	
SD 3	White	45.4%	Heroin	30.8%	OTP	32.0 %	56.9%
	Latinx	44.2%	Alcohol	26.5%	Outpatient	26.3%	
SD 4	Latinx	63.3%	Heroin	25.3%	OTP	30.9%	48.1%
	White	24.0 %	Methamphetamine	23.4%	Outpatient	25.5%	
SD 5	Latinx	43.3%	Heroin	28.5%	OTP	32.0%	54.5%
	White	42.3%	Alcohol	24.6%	Outpatient	24.0%	
Homeless	Latinx	52.4%	Methamphetamine	39.7%	Residential	49.8%	57.7%
	White	25.7%	Alcohol	29.6%	Outpatient	15.1%	
LAC Overall	Latinx	53.8%	Methamphetamine	28.6%	Residential	28.9%	53.3%
	White	28.0%	Alcohol	25.7%	Outpatient	23.0%	

Chapter 6 - Special Populations

Youth (ages 12–17 years):

- Youth accounted for 2.9% of all LAC patients.
- 84.3% reported marijuana as their primary substance use, followed by prescription drug (6.1%) and alcohol (5.0%).
- 79.0% were treated in outpatient programs, followed by intensive outpatient programs (12.3%) and residential service programs (7.0%).
- 32.1% were discharged with positive compliance.

Transitional Age Youth (ages 16-25 years):

- Transitional age youth accounted for 12.2% of all LAC patients.
- 26.0% were involved with the criminal justice system.
- 27.9% reported methamphetamine as their primary substance use, followed by marijuana (24.6%) and prescription drug (19.9%).
- 34.1% were treated in outpatient programs, followed by residential service programs (30.9%) and intensive outpatient programs (13.9%).
- 45.8% were discharged with positive compliance.

Older Adults (ages 65 and older):

- Older adults accounted for 4.7% of all LAC patients.
- 72.7% of patients were male, 37.4% were White, and 36.1% were Latinx.
- 9.3% were homeless at admission.
- 69.6% reported heroin as their primary substance use, followed by prescription drugs (14.9%) and alcohol (8.7%).
- 81.5% were treated in opioid treatment programs, followed by residential service programs (6.0%) and outpatient programs (4.8%).
- 60.4% were discharged with positive compliance.

Patients Involved in Criminal Justice System:

- Patients involved in the criminal justice system accounted for 24.3% of all LAC patients.
- 75.5% of patients were male.
- 47.6% were homeless at admission.
- 43.3% reported methamphetamine as their primary substance use, followed by alcohol (21.9%) and heroin (14.6%).
- 42.0% were treated in residential service programs, followed by outpatient programs (24.7%) and intensive outpatient programs (15.8%).
- 56.1% were discharged with positive compliance.

Patients Experiencing Homelessness at Admission:

- Patients experiencing homelessness at admission accounted for 33.9% of all LAC patients.
- 64.9% reported having mental health issues.
- 39.7% reported methamphetamine as their primary substance use, followed by alcohol (29.6%) and heroin (11.9%).
- 49.8% were treated in residential service programs, followed by outpatient (15.1%) and withdrawal management programs (14.6%).
- 57.7% were discharged with positive compliance.
- 31.9% of patients who were homeless at admission found stable housing at discharge.

Patients with Disabilities:

- Patients with disabilities accounted for 18.0% of all LAC patients.
- 74.0% reported having mental disabilities, followed by mobility (13.0%), visual (4.6%), hearing (2.0%), developmental (1.7%), and speech (0.8%) disabilities.
- 45.2% were homeless at admission.
- 32.4% reported alcohol as their primary substance use, followed by methamphetamine (26.6%) and heroin (18.3%).
- 33.5% were treated in residential service programs, followed by withdrawal management programs (19.0%) and outpatient programs (19.0%).
- 58.0% were discharged with positive compliance.

LGBTQ Patients:

- LGBTQ patients accounted for 6.3% (2,183) of all LAC patients.
- 91.7% of patients identified as gay, lesbian, or bisexual and 7.7% identified as unsure/questioning.
- 4.9% patients identified as transgender. The majority (70.2%) of them did not report their specific sexual orientation and identified solely as transgender. Additionally, 12.5% identified as heterosexual, and 14.4% identified as lesbian, gay, or bisexual.
- 45.1% were homeless at admission.
- 72.1% reported having mental health issues.
- 45.5% reported methamphetamine as their primary substance use, followed by alcohol (24.6%) and prescription drug (10.1%).
- 39.2% were treated in residential service programs, followed by outpatient programs (23.0%) and intensive outpatient programs (18.2%).
- 54.0% were discharged with positive compliance.

Women of Reproductive Age:

- Women of reproductive age accounted for 27.4% of all LAC patients.
- 56.1% of patients were Latinx, followed by White (24.7%) and Black (16.2%).
- 34.9% were homeless at admission.
- 37.9% reported methamphetamine as their primary substance use, followed by alcohol (25.0%), and prescription drug (12.1%).
- 30.3% were treated in residential service programs, followed by outpatient programs (28.6%) and intensive outpatient programs (15.3%).
- 50.1% were discharged with positive compliance.

Veterans:

- Veterans accounted for 2.1% of all LAC patients.
- 79.5% of patients were male.
- 38.4% were homeless at admission.
- 28.4% reported heroin as their primary substance use, followed by alcohol (26.7%) and methamphetamine (24.0%).
- 32.1% were treated in opioid treatment programs, followed by residential service programs (30.0%) and outpatient programs (17.2%).
- 52.7% were discharged with positive compliance.

Patients Enrolled in My Health LA (MHLA) Program:

- Patients enrolled in MHLA program accounted for 2.1% of all LAC patients.
- 96.4% of patients were Latinx, followed by White (1.5%).
- 53.4% reported methamphetamine as their primary substance use, followed by alcohol (38.6%) and marijuana (4.4%).
- 36.9% were treated in outpatient programs, followed by residential service programs (24.6%) and intensive outpatient programs (20.4%).
- 61.1% were discharged with positive compliance.

Chapter 1

Who We Serve

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

Annual Overview of Patients in Publicly Funded Substance Use Disorder
Treatment Programs in Los Angeles County, FY2021-2022

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TREATMENT ADMISSIONS AND DISCHARGES

In the fiscal year 2021-2022, a total of 33,800 unique patients, who accounted for 53,443 treatment admissions (Table 1.1), were served at substance use disorder (SUD) treatment programs contracted by DPH-SAPC. 23,759 patients (70.3%) and 37,771 admissions (70.7%) were discharged.

Table 1.1. Number of admissions and discharges, FY2122

	ADMISSIONS	PATIENTS
Admitted	53,443	33,800
Discharged	37,771 (70.7%)	23,759 (70.3%)

The number of patients admitted to the speciality SUD treatment programs has shown a consistent decrease from FY1213 to FY2021, with a slight rebound in FY2122. The number of patients decreased by 37% from 59,713 in FY1213 to 37,770 in FY1718. This decline was primarily attributed to the implementation of the Drug Medi-Cal Organized Delivery System (DMC-ODS) in 2017 and pre-DMC-ODS data issues, such as high open admissions. Subsequnetly, there was an additional 16% decrease from 37,770 in FY1718 to 31,848 in FY2021, largely due to the impact of the COVID-19 pandemic. However, in FY2122, there was a modest 6% increase with patients served reaching 33,800 (Figure 1.1).

Figure 1.1. Trends in admissions and patients
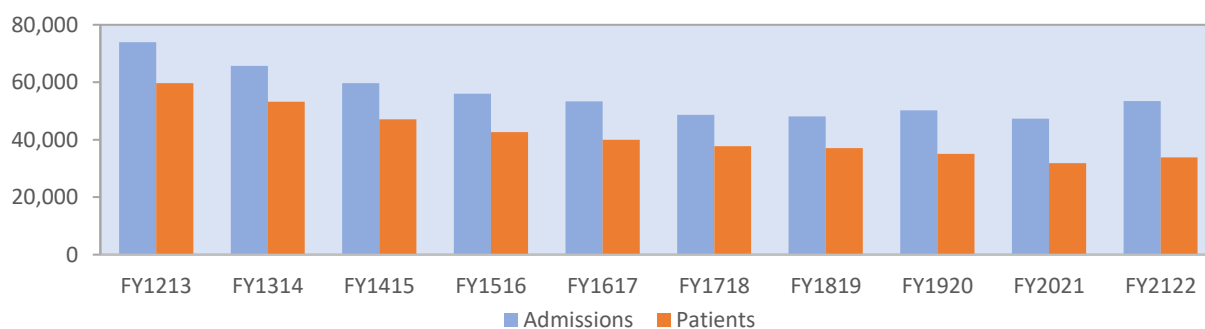
The proportion of patients residing in the five Supervisorial Districts (SDs) ranged between 12.2% (SD 3) and 17.3% (SD 1) (Table 1.2).

Table 1.2. Patients by Supervisorial District (SD), FY2122

	PATIENTS	% OF TOTAL PATIENTS
SD 1	5,856	17.3
SD 2	5,577	16.5
SD 3	4,128	12.2
SD 4	5,060	15.0
SD 5	5,634	16.7
Homeless	11,464	33.9
Outside LAC	408	1.2
Missing	76	0.2
Total	33,800	100.0

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

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The proportion of patients residing in the eight Service Planning Areas (SPAs) ranged between 2.3% (SPA 5) and 15.7% (SPA 2) (Table 1.3).

Table 1.3. Patients by Service Planning Area (SPA), FY2122

	PATIENTS	% OF TOTAL PATIENTS
SPA 1	1,752	5.2
SPA 2	5,300	15.7
SPA 3	4,688	13.9
SPA 4	3,297	9.8
SPA 5	780	2.3
SPA 6	3,497	10.3
SPA 7	3,200	9.5
SPA 8	3,785	11.2
Homeless	11,464	33.9
Outside LAC	408	1.2
Missing	76	0.2
Total	33,800	100.0

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

There were 37,771 discharges in FY2122. Among those that reported a discharge status, 53.3% were discharged with positive compliance, with 41.1% completing the treatment and 12.3% leaving treatment with satisfactory progress (Table 1.4).

Table 1.4. Discharge status of patients, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**18,219**	**53.3**
Completed treatment	14,019	41.1
Left – satisfactory progress	4,200	12.3
Negative compliance (Left – unsatisfactory progress)	**13,603**	**39.8**
Other (Death/incarceration/other)	**2,329**	**6.8**

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

PATIENT CHARACTERISTICS

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

- The majority of patients receiving SUD treatment services were male (64.1%), Latinx (53.8%), ages 26 to 34 (31.9%), unemployed (66.6%), and primary English speakers at home (90.2%).
- At admission, 51.0% of patients reported having mental health issues, 33.9% were homeless, and 24.3% were involved in the criminal justice system.

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WHO WE SERVE

Table 1.5. Characteristics of all patients, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY†	Male	21,634	64.1
	Female	11,993	35.5
	Transgender male	28	0.1
	Transgender female	77	0.2
	Non-conforming or refuse to state	15	0.0
RACE/ETHNICITY†	Latinx	18,016	53.8
	White	9,386	28.0
	Black/African American	5,119	15.3
	Asian	532	1.6
	Pacific Islander	64	0.2
	American Indian/Alaska Native	220	0.7
	Other	172	0.5
AGE†	17 and under	986	2.9
	18-25	3,360	10.1
	26-34	10,658	31.9
	35-44	8,111	24.3
	45-54	4,619	13.8
	55-64	4,060	12.2
	65+	1,578	4.7
SEXUAL ORIENTATION†	Heterosexual	29,256	91.9
	Gay, lesbian, or bisexual	1,892	5.9
	Unsure/questioning	158	0.5
	Prefer not to state	515	1.6
EDUCATION†	Middle school or below	1,102	3.4
	Some high school	7,992	24.7
	High school completed	15,944	49.3
	Some college or beyond	7,321	22.6
EMPLOYMENT	Employed	8,692	16.6
	Unemployed (seeking)	18,740	35.9
	Unemployed (not seeking)	16,063	30.8
	Not in labor force	8,741	16.7
HOMELESS†	Homeless at admission	11,464	33.9
LANGUAGE AT HOME	English	44,666	90.2
	Other Language	4,863	9.8
AGE OF FIRST PRIMARY SUBSTANCE USE	11 and under	2,031	3.9
	12-17	21,001	40.6
	18-25	18,704	36.1
	26 and over	10,048	19.4
MENTAL HEALTH ISSUES	Yes	26,574	51.0
	No	25,572	49.0
PHYSICAL HEALTH ISSUES	Yes	6,946	13.5
	No	44,469	86.5
DISABILITY†	Disabled at admission	6,088	18.0
CRIMINAL JUSTICE†	Criminal justice involved	8,202	24.3
VETERAN†	Veteran	724	2.1
MY HEALTH LA (MHLA)†	MHLA participants	712	2.1

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

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WHO WE SERVE

PRIMARY SUBSTANCE OF USE AT ADMISSION

Methamphetamine was the most common primary substance use reported at admission (28.6%), followed by alcohol, heroin, and prescription drug. The frequency of primary substance use in the past 30 days prior to admission ranged from 10.6% for 10-19 days use to 34.1% for no use (Table 1.6).

Table 1.6. Primary substance use at admission, FY2122

SUBSTANCE USE STATUS		ADMISSIONS	%
PRIMARY SUBSTANCE USE	Methamphetamine	14,853	28.6
	Alcohol	13,310	25.7
	Heroin	11,022	21.3
	Prescription drug	6,561	12.7
	Marijuana	4,040	7.8
	Cocaine	1,638	3.2
	Other drugs	423	0.8
PRIMARY SUBSTANCE USE IN PAST 30 DAYS AT ADMISSION	No use	17,630	34.1
	1-9 days	7,547	14.6
	10-19 days	5,480	10.6
	20-29 days	6,694	12.9
	Every day	14,400	27.8

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

LEVEL OF CARE

Residential service programs (28.9%) were the most common level of care that patients were admitted to, followed by outpatient (23.0%), opioid treatment (21.7%), and intensive outpatient programs (12.4%). Average length of stay ranges from 6.7 days for withdrawal management residential services to 512.7 days for opioid treatment programs (Table 1.7).

Table 1.7. Level of care at admission, FY2122

LEVEL OF CARE	ADMISSIONS	%	Average Length of Stay (days)
Withdrawal Management	**5,700**	**10.8**	**6.7***
ASAM WM 1	15	0.0	
ASAM WM 2	93	0.2	
ASAM WM 3.2	3,565	6.7	
ASAM WM 3.7/4.0	2,027	3.8	
Residential Service	**15,296**	**28.9**	**44.2**
ASAM 3.1	7,206	13.6	
ASAM 3.3	93	0.2	
ASAM 3.5	7,997	15.1	
Intensive Outpatient (ASAM 2.1)	**6,566**	**12.4**	**83.6**
Outpatient (ASAM 1.0)	**12,150**	**23.0**	**122.3**
Opioid Treatment Program (ASAM OTP)	**11,462**	**21.7**	**512.7**
Recovery Support Service	**1,765**	**3.3**	**132.8**

Note: Numbers are based on non-missing values. Percentages may not sum to 100% due to rounding.
*: For residential withdraw management services only (ASAM 3.2 / ASAM 3.7/4.0).

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MEDI-CAL BENEFICIARIES

This section is only for patients whose claim data were matched with the MEDS (Medi-Cal Eligibility Data system) data. Overall, 94.5% were identified as Medi-Cal beneficiaries with a valid Medi-Cal eligibility status, with the highest rate among those aged 21 and above (95.1%) and the lowest rate among youth (81.9%). The proportion of Medi-Cal beneficiaries was also different across levels of care, with the highest among opioid treatment program (98.6%), followed by intensive outpatient program (96.0%), medically monitored inpatient withdrawal management (94.7%), recovery support service (94.3%), outpatient program (94.0%), residential service (92.9%), and clinically managed residential withdrawal management (92.9%) (Figure 1.2).

Figure 1.2. Percentage of Medi-Cal beneficiaries by level of care (LOC)* and age group, FY2122

*OTP: opioid treatment program; IOP: intensive outpatient program; RSS: recovery support service; WM 3.2: residential withdrawal management; RS: residential service; OP: outpatient program; WM 3.7/4.0: inpatient withdrawal management.

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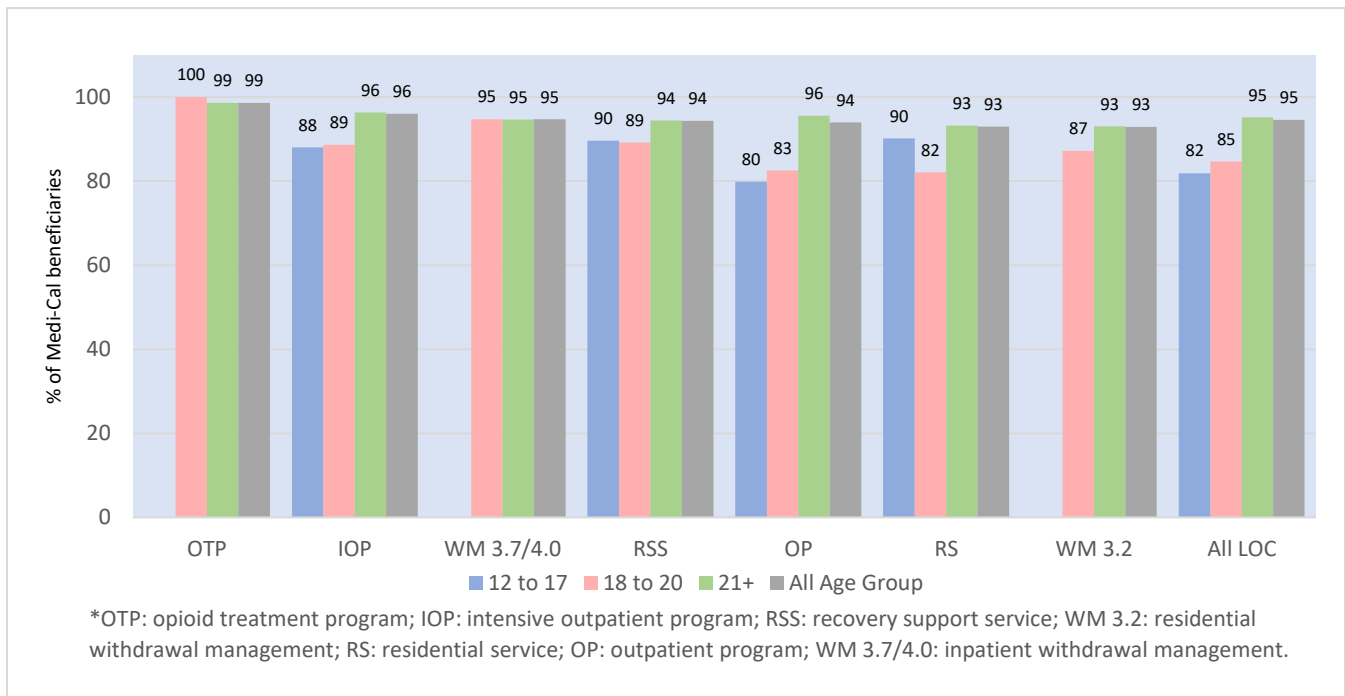
Chapter 2

Patient Characteristics by Primary Substance of Use

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

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Patients with Heroin as Primary Substance of Use

TREATMENT ADMISSIONS AND DISCHARGES

There were 11,022 admissions (8,634 patients) reporting heroin as the primary substance use, accounting for 21.3% of total treatment admissions (Table 2.1.1).

Table 2.1.1. Treatment admissions and discharges among primary heroin patients, FY2122

	ADMISSIONS		PATIENTS	
	N	**% of total admissions**	**N**	**% of total patients**
Admitted	11,022	21.3	8,634	26.3
Discharged	5,457	14.7	3,943	16.9

The number and proportion of primary heroin admissions and patients increased from FY1213 to FY1617 and decreased thereafter. Specifically, the number of primary heroin admissions decreased by 52.0%, from 22,982 in FY1617 to 11,022 in FY2122 (Figure 2.1.1).

Figure 2.1.1. Trends in primary heroin admissions and patients
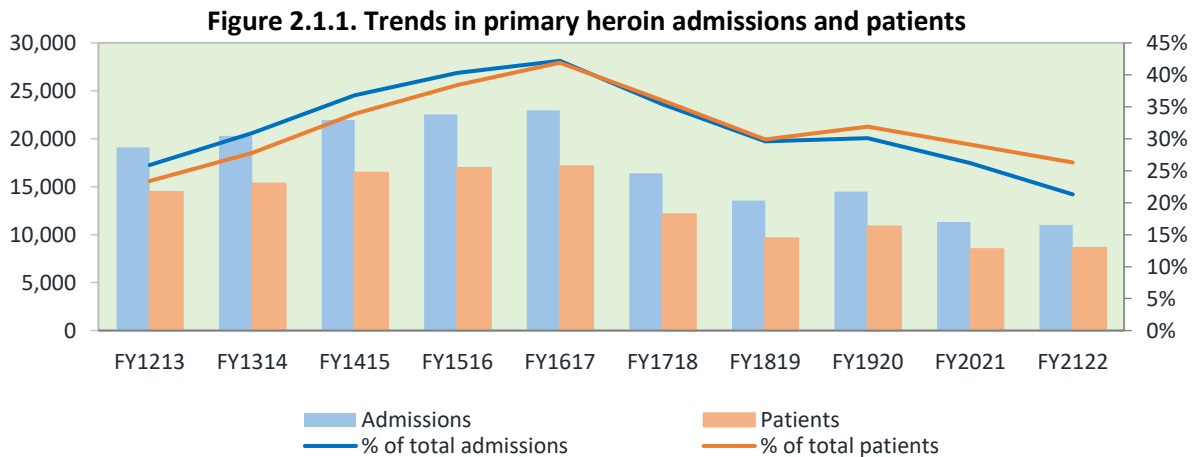
Of the discharges, 47.3% had positive compliance, with 28.7% completing the treatment and 18.6% leaving treatment with satisfactory progress (Table 2.1.2).

Table 2.1.2. Discharge status of primary heroin patients, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**2,367**	**47.3**
Completed treatment	1,437	28.7
Left – satisfactory progress	930	18.6
Negative compliance (Left – unsatisfactory progress)	**2,390**	**47.8**
Other (Death/incarceration/other)	**247**	**4.9**

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

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PATIENT CHARACTERISTICS

The majority of primary heroin patients were male (71.1%), Latinx (46.4%), ages 55-64 (23.4%), and unemployed (63.9%). Among primary heroin admissions, 30.1% reported having mental health issues (Table 2.1.3).

Table 2.1.3. Characteristics of primary heroin patients, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	6,131	71.1
	Female	2,483	28.8
	Transgender male	-	-
	Transgender female	7	0.1
	Non-conforming or refuse to state	-	-
RACE	Latinx	3,984	46.4
	White	3,819	44.5
	Black/African American	583	6.8
	Asian	104	1.2
	Pacific Islander	8	0.1
	American Indian/Alaska Native	52	0.6
	Other	37	0.4
AGE	17 and under	-	-
	18-25	320	3.7
	26-34	2,006	23.2
	35-44	1,741	20.2
	45-54	1,400	16.2
	55-64	2,020	23.4
	65+	1,139	13.2
SEXUAL ORIENTATION	Heterosexual	6,995	95.6
	Gay, lesbian, or bisexual	212	2.9
	Unsure/questioning	21	0.3
	Prefer not to state	91	1.2
EDUCATION	Middle school or below	278	3.3
	Some high school	1,944	22.9
	High school completed	4,708	55.6
	Some college or beyond	1,545	18.2
EMPLOYMENT	Employed	1,909	17.5
	Unemployed (seeking)	3,578	32.7
	Unemployed (not seeking)	3,408	31.2
	Not in labor force	2,040	18.7
HOMELESS	Homeless at Admission	1,559	18.1
AGE OF FIRST PRIMARY SUBSTANCE USE	11 & under	95	0.9
	12-17	2,771	25.1
	18-25	5,449	49.4
	26 and over	2,705	24.5
MENTAL HEALTH ISSUES	Yes	3,296	30.1
	No	7,644	69.9
PHYSICAL HEALTH ISSUES	Yes	1,369	12.6
	No	9,496	87.4
DISABILITY	Yes	1,421	13.8
	No	8,906	86.2
CRIMINAL JUSTICE	Yes	1,742	15.9
	No	9,208	84.1

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

N ≤ 5 not reported to protect confidentiality.

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SUBSTANCE USE STATUS AT ADMISSION

Among primary heroin admissions, 43.1% reported poly-drug use. Over half (52.5%) reported using heroin every day in the 30 days prior to admission. The majority (79.0%) of primary heroin admissions received SUD treatment previously (Table 2.1.4).

Table 2.1.4. Substance use status among primary heroin patients, FY2122

SUBSTANCE USE STATUS		ADMISSIONS	%
POLY-DRUG	Heroin use only	6,275	56.9
	Heroin with other substance use	4,747	43.1
FREQUENCY OF USE IN PAST MONTH	No use	2,774	25.2
	1-9 days	797	7.2
	10-19 days	727	6.6
	20-29 days	937	8.5
	Every day	5,780	52.5
PRIOR SUD TREATMENT ADMISSIONS	None	2,134	21.0
	1-2	4,184	41.2
	3-4	1,909	18.8
	5+	1,926	19.0

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

The proportion of admissions with poly-drug use among primary heroin patients continually increased from 37.3% in FY1213 to 47.8% in FY1819, then decreased to 43.1% in FY2122 (Figure 2.1.2).

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

no. of heroin admissions with polydrug problems
% of heroin admissions with polydrug problems

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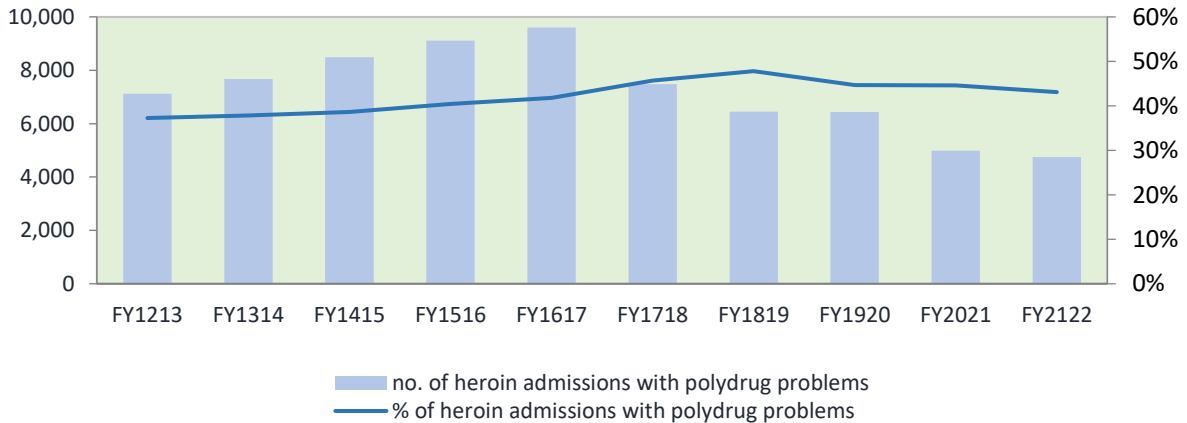
LEVEL OF CARE

As expected, the majority of primary heroin admissions were admitted to opioid treatment programs (72.9%), followed by residential service programs (9.1%) and withdrawal management programs (9.1%) (Table 2.1.5).

Table 2.1.5. Level of care among primary heroin patients, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**1,004**	**9.1**
ASAM WM 2	25	0.2
ASAM WM 3.2	821	7.5
ASAM WM 3.7/4.0	158	1.4
Residential Service	**1,006**	**9.1**
ASAM 3.1	527	4.8
ASAM 3.3	-	-
ASAM 3.5	477	4.3
Intensive Outpatient (ASAM 2.1)	**372**	**3.4**
Outpatient (ASAM 1.0)	**496**	**4.5**
Opioid Treatment Program (ASAM OTP)	**8,023**	**72.9**
Recovery Support Service	**112**	**1.0**

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

Among the primary heroin patients, the proportion of admissions to opioid treatment programs consistently decreased from 85.4% in FY1617 to 68.0% in FY1819 and increased back to 72.9% in FY2122. In comparison, the proportion of admissions to withdrawal management programs increased from 6.5% in FY1617 to 9.1% in FY2122 (Figure 2.1.3).

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

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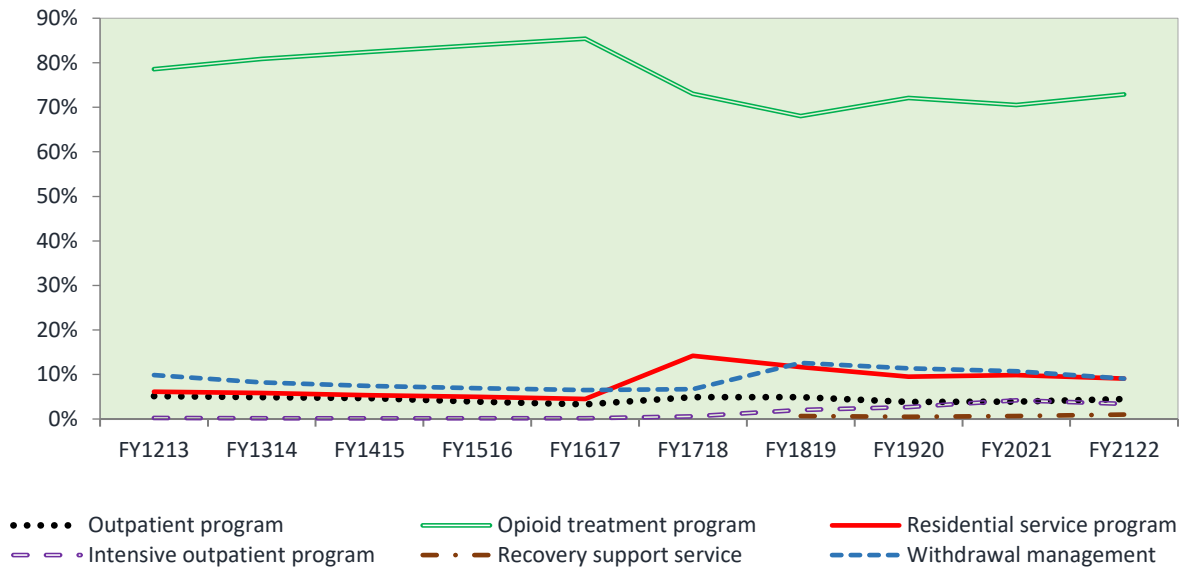
Patients with Methamphetamine as Primary Substance of Use

TREATMENT ADMISSIONS AND DISCHARGES

There were 14,853 admissions (9,467 patients) reporting methamphetamine as the primary substance use, accounting for 28.6% of total treatment admissions (Table 2.2.1).

Table 2.2.1. Treatment admissions and discharges among primary methamphetamine patients, FY2122

	ADMISSIONS		PATIENTS	
	N	**% of total admissions**	**N**	**% of total patients**
Admitted	14,853	28.6	9,467	28.8
Discharged	11,938	32.2	8,006	34.2

The proportion of primary methamphetamine admissions steadily increased from 15.1% in FY1213 to 28.6% in FY2122. There was a 24.3% increase in the number of admissions from 11,945 in FY1617 to 14,853 in FY2122 (Figure 2.2.1).

Figure 2.2.1. Trends in primary methamphetamine admissions and patients
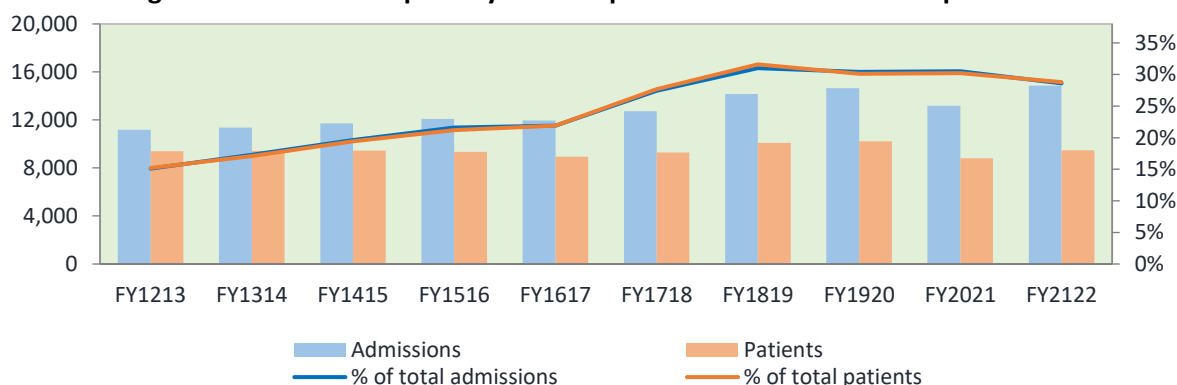
Of the discharges, 49.9% had positive compliance, with 39.1% completing treatment, and 10.9% leaving the program with satisfactory progress (Table 2.2.2).

Table 2.2.2. Discharge status of primary methamphetamine patients, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**5,442**	**49.9**
Completed treatment	4,258	39.1
Left – satisfactory progress	1,184	10.9
Negative compliance (Left – unsatisfactory progress)	**4,492**	**41.2**
Other (Death/incarceration/other)	**969**	**8.9**

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

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PATIENT CHARACTERISTICS

The majority of primary methamphetamine patients were male (60.5%), Latinx (65.0%), ages 26-34 (42.8%), and unemployed (69.4%). Among primary methamphetamine admissions, 53.1% were homeless, 57.9% reported having mental health issues, and 35.0% were involved in the criminal justice system (Table 2.2.3).

Table 2.2.3. Characteristics of primary methamphetamine patients, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	5,719	60.5
	Female	3,675	38.9
	Transgender male	11	0.1
	Transgender female	50	0.5
	Non-conforming or refuse to state	-	-
RACE	Latinx	6,140	65.0
	White	1,643	17.4
	Black/African American	1,315	13.9
	Asian	190	2.0
	Pacific Islander	36	0.4
	American Indian/Alaska Native	69	0.7
	Other	47	0.5
AGE	17 and under	26	0.3
	18-25	1,075	11.4
	26-34	4,047	42.8
	35-44	2,785	29.5
	45-54	1,123	11.9
	55-64	371	3.9
	65+	29	0.3
SEXUAL ORIENTATION	Heterosexual	8,176	88.1
	Gay, lesbian, or bisexual	888	9.6
	Unsure/questioning	48	0.5
	Prefer not to state	168	1.8
EDUCATION	Middle school or below	313	3.4
	Some high school	2,845	30.6
	High school completed	4,352	46.8
	Some college or beyond	1,789	19.2
EMPLOYMENT	Employed	1,931	13.1
	Unemployed (seeking)	5,851	39.6
	Unemployed (not seeking)	4,407	29.8
	Not in labor force	2,598	17.6
HOMELESS	Homeless at admission	5,025	53.1
AGE OF FIRST PRIMARY SUBSTANCE USE	11 & under	270	1.8
	12-17	5,686	38.3
	18-25	5,549	37.4
	26 and over	3,340	22.5
MENTAL HEALTH ISSUES	Yes	8,569	57.9
	No	6,218	42.1
PHYSICAL HEALTH ISSUES	Yes	1,829	12.4
	No	12,898	87.6
DISABILITY	Yes	2,062	15.3
	No	11,459	84.7
CRIMINAL JUSTICE	Yes	5,171	35.0
	No	9,594	65.0

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

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METHAMPHETAMINE

SUBSTANCE USE STATUS AT ADMISSION

Among primary methamphetamine admissions, 54.6% reported poly-drug use, 10.6% of primary methamphetamine admissions used the drug every day in the 30 days prior to admission, and 66.8% had one or more prior treatment admissions (Table 2.2.4).

Table 2.2.4. Substance use status among primary methamphetamine patients, FY2122

SUBSTANCE USE STATUS		ADMISSIONS	%
POLY-DRUG	Methamphetamine use only	6,748	45.4
	Methamphetamine with other substance use	8,105	54.6
FREQUENCY OF USE IN PAST MONTH	No use	7,033	47.4
	1-9 days	2,924	19.7
	10-19 days	1,615	10.9
	20-29 days	1,699	11.4
	Every day	1,569	10.6
PRIOR SUD TREATMENT ADMISSIONS	None	4,423	33.2
	1-2	5,374	40.4
	3-4	1,916	14.4
	5+	1,601	12.0

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

The proportion of primary methamphetamine admissions with poly-drug use slightly decreased from 56.3% in FY1213 to 54.6% in FY2122 (Figure 2.2.2).

Figure 2.2.2. Trends in poly-drug use among primary methamphetamine patients

no. of methamphetamine admissions with polydrug problems
% of methamphetamine admissions with polydrug problems

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LEVEL OF CARE

As shown in Table 2.2.5, the most common level of care among primary methamphetamine admissions was residential service programs (48.1%), followed by outpatient programs (28.1%) and intensive outpatient programs (18.5%).

Table 2.2.5. Level of care among primary methamphetamine patients, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**177**	**1.2**
ASAM WM 1	-	-
ASAM WM 2	-	-
ASAM WM 3.2	156	1.1
ASAM WM 3.7/4.0	19	0.1
Residential Service	**7,110**	**48.1**
ASAM 3.1	3,403	23.0
ASAM 3.3	56	0.4
ASAM 3.5	3,651	24.7
Intensive Outpatient (ASAM 2.1)	**2,742**	**18.5**
Outpatient (ASAM 1.0)	**4,161**	**28.1**
Recovery Support Service	**594**	**4.0**

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

The proportion of primary methamphetamine admissions to residential service programs increased from 29.5% in FY1213 to 48.1% in FY2122, surpassing the proportion in outpatient beginning FY1718 (Figure 2.2.3).

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

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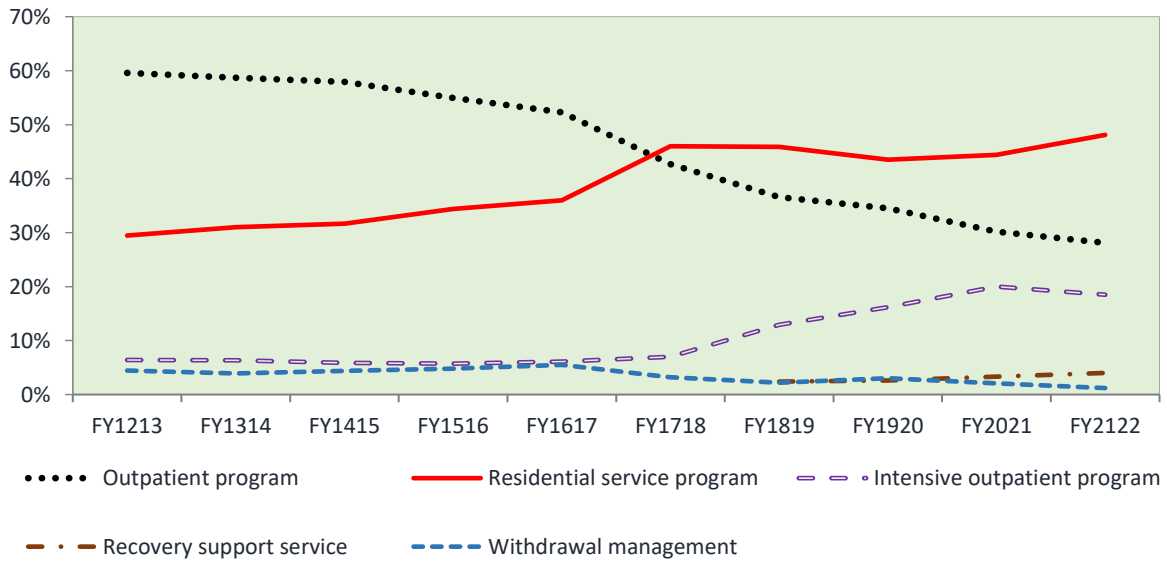
Patients with Marijuana as Primary Substance of Use

TREATMENT ADMISSIONS AND DISCHARGES

There were 4,040 admissions (3,308 patients) reporting marijuana as the primary substance use, accounting for 7.8% of total treatment admissions (Table 2.3.1).

Table 2.3.1. Treatment admissions and discharges among primary marijuana patients, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	4,040	7.8	3,308	10.1
Discharged	3,013	8.1	2,538	10.8

The number and proportion of primary marijuana admissions and patients steadily decreased from FY1213 to FY2122. In FY1213, about one out of four admissions reported primary marijuana use; this dropped to less than one in ten admissions in FY2122 (Figure 2.3.1).

Figure 2.3.1. Trends in primary marijuana admissions and patients
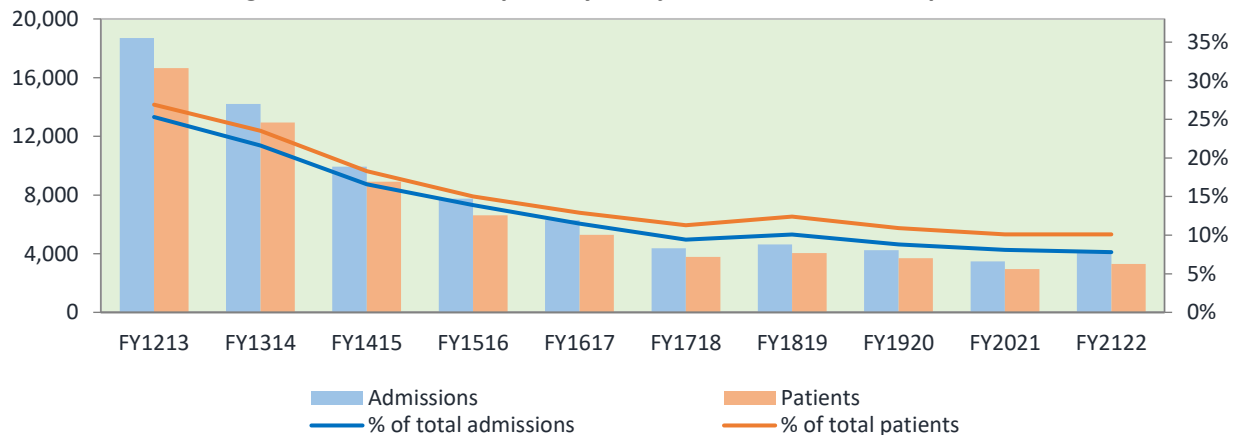
Of the discharges, 43.6% had positive compliance, with 32.4% completing treatment and 11.2% leaving with satisfactory progress (Table 2.3.2).

Table 2.3.2. Discharge status of primary marijuana patients, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**1,182**	**43.6**
Completed treatment	879	32.4
Left – satisfactory progress	303	11.2
Negative compliance		
(Left – unsatisfactory progress)	**1,274**	**47.0**
Other (Death/incarceration/other)	**253**	**9.3**

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

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PATIENT CHARACTERISTICS

The majority of primary marijuana patients were male (59.8%), Latinx (60.0%), ages 26-34 (31.7%), and unemployed (51.5%). About 79.9% of the primary marijuana patients started to use marijuana when they were aged 17 or younger. 27.4% of the admissions were involved in the criminal justice system (Table 2.3.3).

Table 2.3.3. Characteristics of primary marijuana patients, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	1,978	59.8
	Female	1,324	40.0
	Transgender male	-	-
	Transgender female	-	-
	Non-conforming or refuse to state	-	-
RACE	Latinx	1,972	60.0
	White	359	10.9
	Black/African American	867	26.4
	Asian	49	1.5
	Pacific Islander	-	-
	American Indian/Alaska Native	11	0.3
	Other	22	0.7
AGE	17 and under	778	23.5
	18-25	760	23.0
	26-34	1,047	31.7
	35-44	465	14.1
	45-54	173	5.2
	55-64	77	2.3
	65+	8	0.2
SEXUAL ORIENTATION	Heterosexual	2,997	91.6
	Gay, lesbian, or bisexual	197	6.0
	Unsure/questioning	18	0.6
	Prefer not to state	60	1.8
EDUCATION	Middle school or below	120	3.8
	Some high school	1,169	36.8
	High school completed	1,342	42.3
	Some college or beyond	543	17.1
EMPLOYMENT	Employed	881	22.3
	Unemployed (seeking)	1,065	27.0
	Unemployed (not seeking)	969	24.5
	Not in labor force	1,036	26.2
HOMELESS	Homeless at admission	712	21.5
AGE OF FIRST PRIMARY SUBSTANCE USE	11 & under	356	8.8
	12-17	2,868	71.1
	18-25	707	17.5
	26 and over	103	2.6
MENTAL HEALTH ISSUES	Yes	1,869	46.6
	No	2,141	53.4
PHYSICAL HEALTH ISSUES	Yes	345	8.7
	No	3,640	91.3
DISABILITY	Yes	413	11.4
	No	3,207	88.6
CRIMINAL JUSTICE	Yes	1,098	27.4
	No	2,905	72.6

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

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Treatment Programs in Los Angeles County, FY2021-2022**

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COUNTY OF LOS ANGELES
Public Health

SUBSTANCE USE STATUS AT ADMISSION

Among primary marijuana admissions, about 47.1% reported poly-drug use, 20.6% used marijuana every day in the past 30 days prior to admissions, 35.8% did not use at all, and 45.7% had one or more prior treatment admission(s) (Table 2.3.4).

Table 2.3.4. Substance use status among primary marijuana patients, FY2122

SUBSTANCE USE STATUS		ADMISSIONS	%
POLY-DRUG	Marijuana use only	2,137	52.9
	Marijuana with other substance use	1,903	47.1
FREQUENCY OF	No use	1,443	35.8
USE IN PAST	1-9 days	800	19.9
MONTH	10-19 days	497	12.3
	20-29 days	461	11.4
	Every day	829	20.6
PRIOR SUD	None	1,872	54.3
TREATMENT	1-2	1,208	35.0
ADMISSIONS	3-4	245	7.1
	5+	125	3.6

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

The proportion of primary marijuana admissions with poly-drug use increased gradually from 44.1% in FY1213 to 57.0% in FY1617, then dropped to 47.1% in FY2122 (Figure 2.3.2).

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

no. of marijuana admissions with polydrug problems
% of marijuana admissions with polydrug problems

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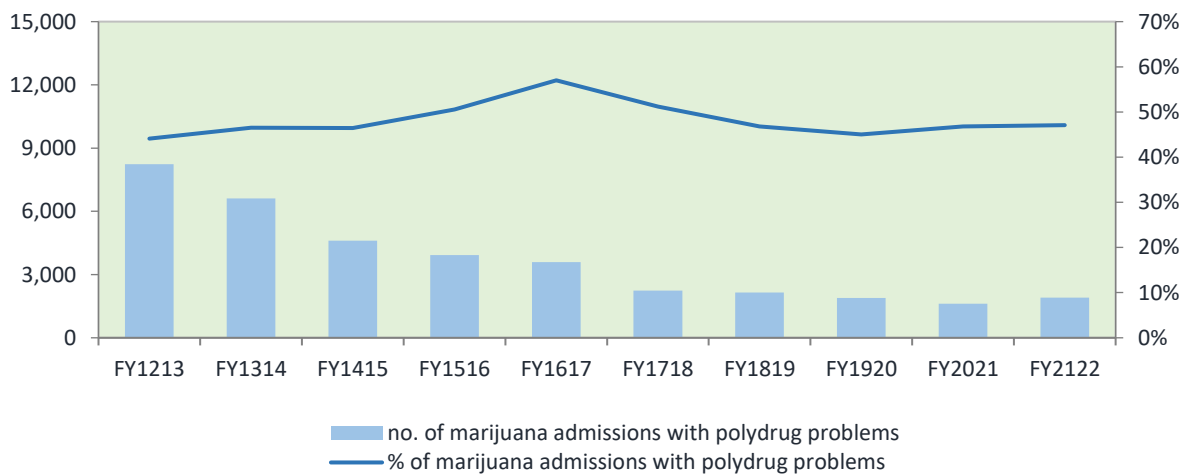
LEVEL OF CARE

As presented in Table 2.3.5, the most common level of care for primary marijuana admissions was outpatient programs (56.3%), followed by residential service programs (20.7%) and intensive outpatient programs (18.0%).

Table 2.3.5. Level of care among primary marijuana patients, FY2122

LEVEL OF CARE	ADMISSIONS	%
Residential Service	**830**	**20.7**
ASAM 3.1	412	10.3
ASAM 3.3	11	0.3
ASAM 3.5	407	10.2
Intensive Outpatient (ASAM 2.1)	**720**	**18.0**
Outpatient (ASAM 1.0)	**2,257**	**56.3**
Recovery Support Service	**199**	**5.0**

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

The proportions of the outpatient level of care increased from 72.3% in FY1213 to 78.6% in FY1516, which then continually decreased to 56.3% in FY2122. However, the outpatient level still remained the highest for the past ten fiscal years. The proportion of primary marijuana admissions to residential service programs increased overall from 4.9% in FY1213 to 20.7% in FY2122 (Figure 2.3.3).

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

Annual Overview of Patients in Publicly Funded Substance Use Disorder Treatment Programs in Los Angeles County, FY2021-2022

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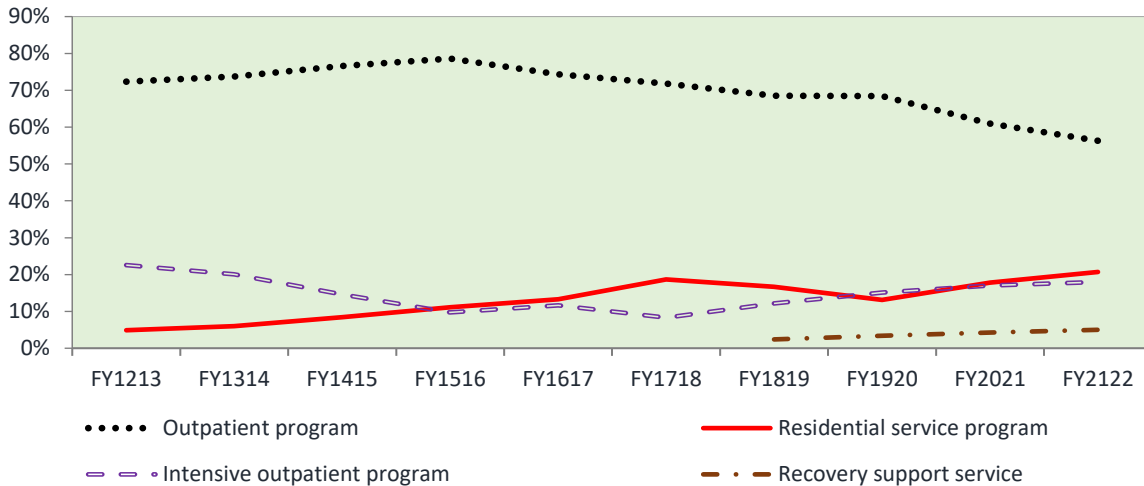
Patients with Alcohol as Primary Substance of Use

TREATMENT ADMISSIONS AND DISCHARGES

There were 13,310 alcohol admissions (8,004 patients) reporting alcohol as the primary substance use, accounting for 25.7% of all treatment admissions (Table 2.4.1).

Table 2.4.1. Treatment admissions and discharges among primary alcohol patients, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	13,310	25.7	8,004	24.3
Discharged	10,824	29.2	6,767	28.9

The number and proportion of primary alcohol admissions and patients increased in the last five fiscal years. Specifically, the proportion of alcohol admissions increased from 13.4% in FY1617 to 25.7% in FY2122 (Figure 2.4.1).

Figure 2.4.1. Trends in primary alcohol admissions and patients
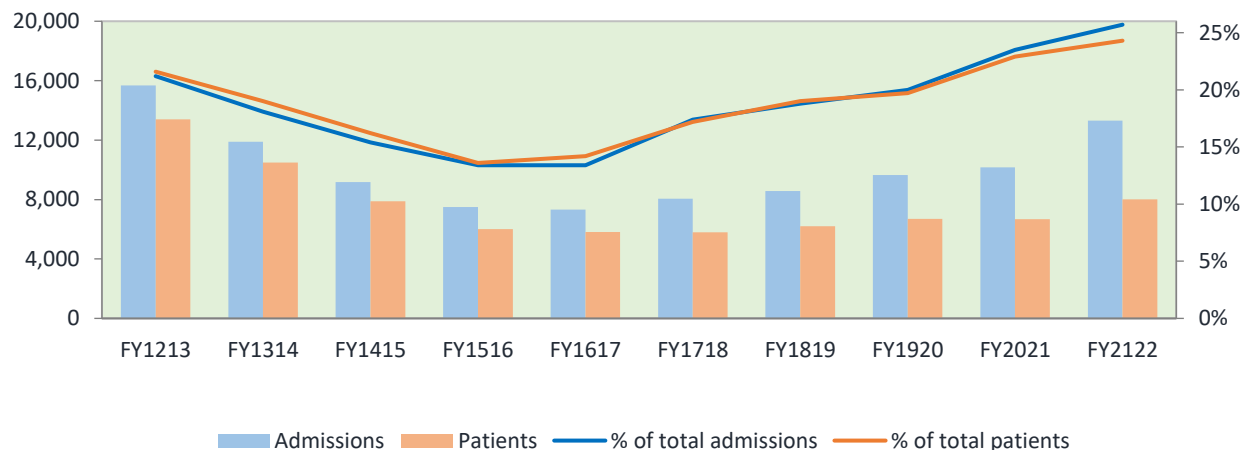
Of the discharges, more than half (64.5%) had positive compliance, with 54.8% completing treatment and 9.7% leaving the program with satisfactory progress (Table 2.4.2).

Table 2.4.2. Discharge status of primary alcohol patients, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**6,363**	**64.5**
Completed treatment	5,410	54.8
Left – satisfactory progress	953	9.7
Negative compliance (Left – unsatisfactory progress)	**2,952**	**29.9**
Other (Death/incarceration/other)	**551**	**5.6**

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

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PATIENT CHARACTERISTICS

The majority of primary alcohol patients were male (64.6%), Latinx (56.7%), ages 26-34 (33.3%), and unemployed (70.8%). Among primary alcohol admissions, 63.8% reported having mental health issues, 41.7% were homeless, and 20.8% reported having a disability (Table 2.4.3).

Table 2.4.3. Characteristics of primary alcohol patients, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	5,167	64.6
	Female	2,798	35.0
	Transgender male	8	0.1
	Transgender female	16	0.2
	Non-conforming or refuse to state	-	-
RACE	Latinx	4,530	56.7
	White	1,814	22.7
	Black/African American	1,387	17.4
	Asian	125	1.6
	Pacific Islander	11	0.1
	American Indian/Alaska Native	77	1.0
	Other	41	0.5
AGE	17 and under	48	0.6
	18-25	649	8.1
	26-34	2,658	33.3
	35-44	2,314	29.0
	45-54	1,316	16.5
	55-64	901	11.3
	65+	107	1.3
SEXUAL ORIENTATION	Heterosexual	7,253	91.9
	Gay, lesbian, or bisexual	477	6.0
	Unsure/questioning	47	0.6
	Prefer not to state	115	1.5
EDUCATION	Middle school or below	323	4.1
	Some high school	1,537	19.5
	High school completed	3,499	44.4
	Some college or beyond	2,524	32.0
EMPLOYMENT	Employed	2,321	17.5
	Unemployed (seeking)	5,027	37.9
	Unemployed (not seeking)	4,355	32.9
	Not in labor force	1,552	11.7
HOMELESS	Homeless at admission	3,335	41.7
AGE OF FIRST PRIMARY SUBSTANCE USE	11 & under	1,222	9.2
	12-17	7,965	59.9
	18-25	3,530	26.5
	26 and over	588	4.4
MENTAL HEALTH ISSUES	Yes	8,466	63.8
	No	4,794	36.2
PHYSICAL HEALTH ISSUES	Yes	2,182	16.5
	No	11,022	83.5
DISABILITY	Yes	2,515	20.8
	No	9,584	79.2
CRIMINAL JUSTICE	Yes	2,616	19.7
	No	10,636	80.3

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

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SUBSTANCE USE STATUS AT ADMISSION

Among primary alcohol admissions, 51.5% reported poly-drug use, 68.4% used alcohol at least one day in the 30 days prior to admission, 31.6% did not use it at all, and 70.7% had one or more prior treatment admission(s) (Table 2.4.4).

Table 2.4.4. Substance use status among primary alcohol patients, FY2122

SUBSTANCE USE STATUS		ADMISSIONS	%
POLY-DRUG	Alcohol use only	6,455	48.5
	Alcohol with other substance use	6,855	51.5
FREQUENCY OF	No use	4,194	31.6
USE IN PAST	1-9 days	2,092	15.7
MONTH	10-19 days	1,826	13.7
	20-29 days	2,342	17.6
	Every day	2,835	21.3
PRIOR SUD	None	3,593	29.3
TREATMENT	1-2	4,525	36.9
ADMISSIONS	3-4	1,754	14.3
	5+	2,378	19.4

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

The percentage of primary alcohol admissions with poly-drug use started increasing in FY1213. The proportion increased continuously from 36.3% in FY1213 to 51.5% in FY2122 (Figure 2.4.2).

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

no. of alcohol admissions with polydrug problems
% of alcohol admissions with polydrug problems

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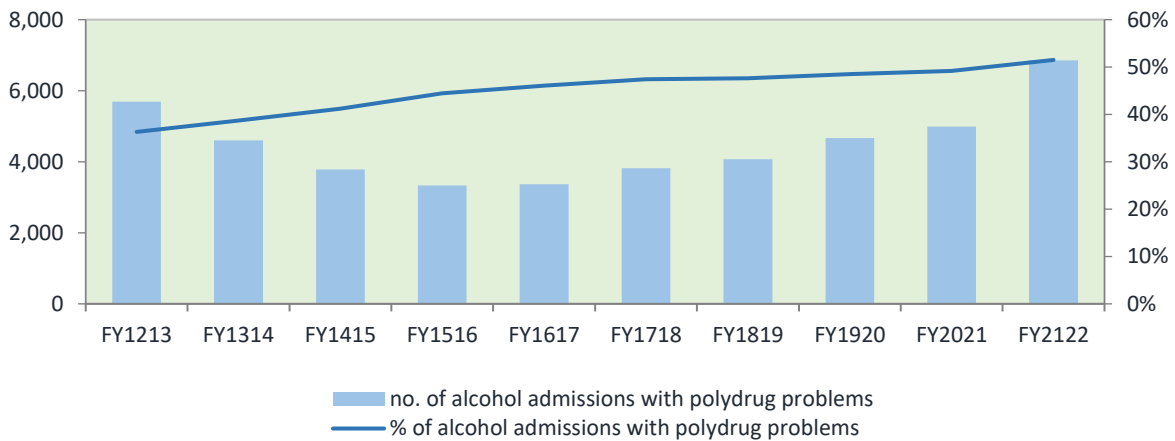
LEVEL OF CARE

The most common level of care for primary alcohol admissions was residential service programs (30.7%), followed by outpatient programs (28.4%) and withdrawal management programs (22.1%) (Table 2.4.5).

Table 2.4.5. Level of care among primary alcohol patients, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**2,920**	**22.1**
ASAM WM 1	-	-
ASAM WM 2	37	0.3
ASAM WM 3.2	1,395	10.6
ASAM WM 3.7/4.0	1,486	11.2
Residential Service	**4,060**	**30.7**
ASAM 3.1	1,819	13.8
ASAM 3.3	14	0.1
ASAM 3.5	2,227	16.8
Intensive Outpatient (ASAM 2.1)	**1,952**	**14.8**
Outpatient (ASAM 1.0)	**3,757**	**28.4**
Recovery Support Service	**530**	**4.0**

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

Over the past decade, there has been a noticeable decline in the proportion of primary alcohol admissions to outpatient programs. Conversely, there has been a significant surge in the proportion of primary alcohol admissions to residential service programs, which rose from 11.8% in FY1213 to 43.4% in FY1718, before decreasing to 30.7% in FY2122. In addition, during the period between FY1718 and FY2122, there has been a consistent increase in the proportion of primary alcohol admissions to both intensive outpatient and withdrawal management services (Figure 2.4.3).

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

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P a g e | 23
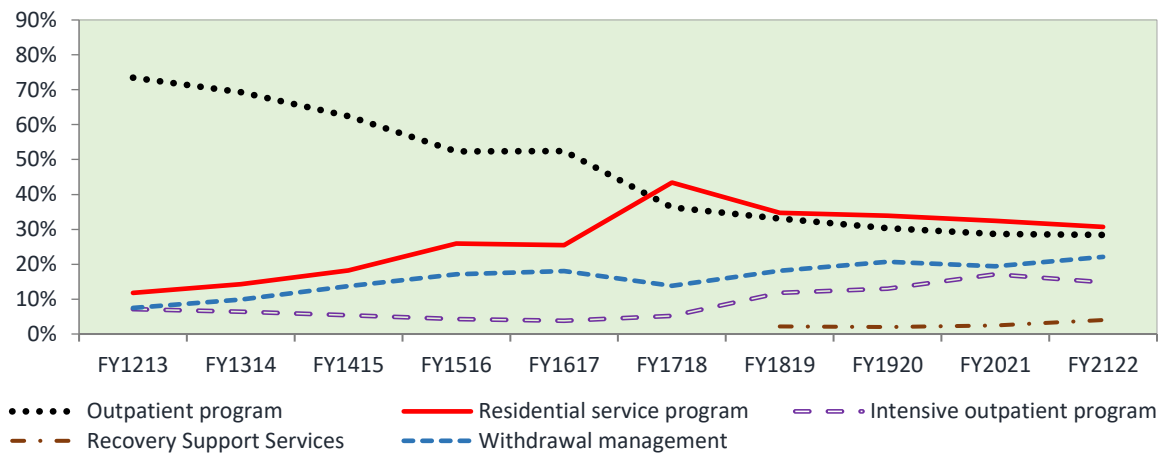
Patients with Prescription Drug as Primary Substance of Use

TREATMENT ADMISSIONS AND DISCHARGES

There were 6,561 admissions (4,657 patients) reporting prescription drugs (Rx) as the primary substance use, accounting for 12.7% of total treatment admissions (Table 2.5.1).

Table 2.5.1 Treatment admissions and discharges among primary Rx misuse patients, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	6,561	12.7	4,657	14.2
Discharged	4,180	11.3	2,877	12.3

Over the course of the past decade, there has been a notable upward trajectory in both the number and proportion of primary Rx admissions and patients. Specifically, the proportion of primary Rx admissions experienced substantial growth, rising from 4.3% in FY1213 to reach 12.7% in FY2122 (Figure 2.5.1).

Figure 2.5.1. Trends in primary Rx admissions and patients
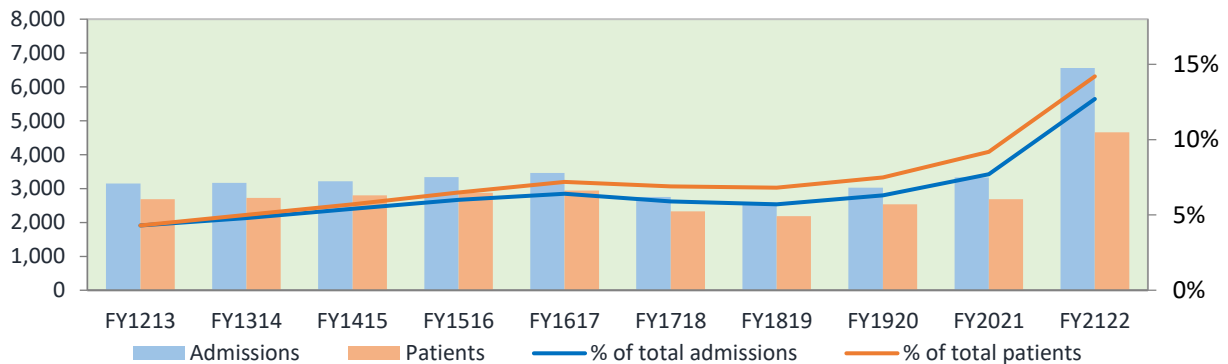
Of the discharges, about half had positive compliance (49.8%), with 34.5% completing treatment, and 15.4% leaving the treatment program with satisfactory progress (Table 2.5.2).

Table 2.5.2. Discharge status of primary Rx misuse patients, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**1,906**	**49.8**
Completed treatment	1,319	34.5
Left – satisfactory progress	587	15.4
Negative compliance		
(Left – unsatisfactory progress)	**1,759**	**46.0**
Other (Death/incarceration/other)	**159**	**4.2**

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

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PATIENT CHARACTERISTICS

The majority of primary Rx patients were male (63.0%), White (46.2%), ages 26-34 (33.9%), and unemployed (66.8%). Among primary Rx admissions, 46.9% reported mental health issues (Table 2.5.3).

Table 2.5.3. Characteristics of primary Rx misuse patients, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	2,928	63.0
	Female	1,711	36.8
	Transgender male	-	-
	Transgender female	-	-
	Non-conforming or refuse to state	-	-
RACE	Latinx	1,855	40.1
	White	2,134	46.2
	Black/African American	498	10.8
	Asian	86	1.9
	Pacific Islander	6	0.1
	American Indian/Alaska Native	20	0.4
	Other	24	0.5
AGE	17 and under	52	1.1
	18-25	730	15.7
	26-34	1,578	33.9
	35-44	1,064	22.9
	45-54	532	11.4
	55-64	445	9.6
	65+	249	5.4
SEXUAL ORIENTATION	Heterosexual	4,082	93.1
	Gay, lesbian, or bisexual	201	4.6
	Unsure/questioning	27	0.6
	Prefer not to state	73	1.7
EDUCATION	Middle school or below	90	2.0
	Some high school	729	15.9
	High school completed	2,537	55.5
	Some college or beyond	1,216	26.6
EMPLOYMENT	Employed	1,250	19.2
	Unemployed (seeking)	2,245	34.4
	Unemployed (not seeking)	2,114	32.4
	Not in labor force	914	14.0
HOMELESS	Homeless at admission	1,163	25.0
AGE OF FIRST PRIMARY SUBSTANCE USE	11 & under	49	0.8
	12-17	1,168	17.9
	18-25	2,518	38.6
	26 and over	2,785	42.7
MENTAL HEALTH ISSUES	Yes	3,063	46.9
	No	3,470	53.1
PHYSICAL HEALTH ISSUES	Yes	906	14.0
	No	5,587	86.0
DISABILITY	Yes	981	16.0
	No	5,168	84.0
CRIMINAL JUSTICE	Yes	737	11.3
	No	5,795	88.7

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

N ≤ 5 not reported to protect confidentiality.

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SUBSTANCE USE STATUS AT ADMISSION

Among the primary Rx admissions, a significant majority (90.6%) reported opioids as their primary substance of use. Furthermore, nearly half (48.5%) of these admissions reported daily usage of prescription drugs in the 30 days leading up to their treatment admission. Additionally, a substantial proportion (58.7%) of these admissions reported engaging in poly-drug use (Table 2.5.4).

Table 2.5.4. Substance use status among primary Rx misuse patients, FY2122

SUBSTANCE USE STATUS		ADMISSIONS	%
POLY-DRUG	Rx use only	2,709	41.3
	Rx with other substance use	3,852	58.7
FREQUENCY OF USE IN PAST MONTH	No use	1,340	20.6
	1-9 days	504	7.7
	10-19 days	582	8.9
	20-29 days	931	14.3
	Every day	3,163	48.5
RX CATEGORIES	**Opioids**	**5,941**	**90.6**
	OxyContin	684	10.4
	Non-Rx methadone	79	1.2
	Other opiates and synthetics	5,178	78.9
	Sedatives	**500**	**7.6**
	Benzodiazepines	240	3.7
	Barbiturates	13	0.2
	Other sedatives	241	3.7
	Other tranquilizers	6	0.1
	Stimulants	**112**	**1.7**
	Amphetamines	26	0.4
	Other stimulants	86	1.3
	Other Rx	**8**	**0.1**
PRIOR SUD TREATMENT ADMISSIONS	None	1,550	25.2
	1-2	2,477	40.2
	3-4	910	14.8
	5+	1,219	19.8

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

The proportion of primary Rx admissions with poly-drug use surged from 41.9% in FY1920 to 58.7% in FY2122 (Figure 2.5.2).

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

no. of Rx admissions with polydrug problems
% of Rx admissions with polydrug problems

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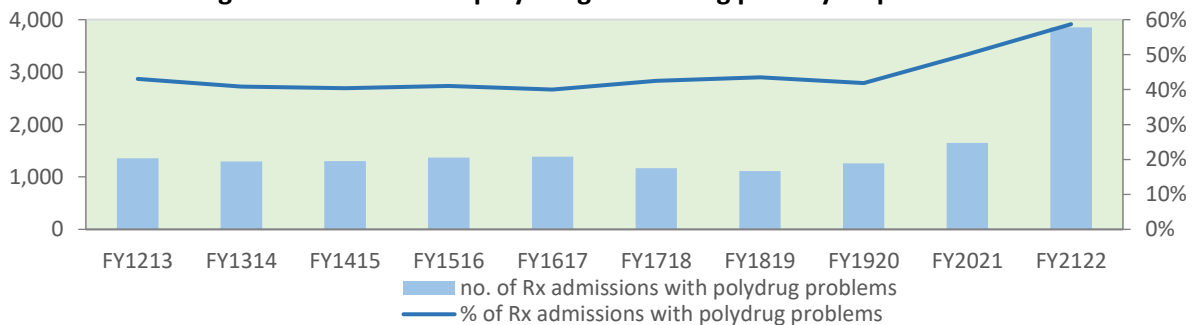
LEVEL OF CARE

The most common level of care among primary Rx admissions was opioid treatment programs (47.8%), followed by withdrawal management (22.8%) and residential service programs (14.2%) (Table 2.5.5).

Table 2.5.5. Level of care among primary Rx misuse patients, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**1490**	**22.8**
ASAM WM 1	11	0.2
ASAM WM 2	30	0.5
ASAM WM 3.2	1,102	16.9
ASAM WM 3.7/4.0	347	5.3
Residential Service	**930**	**14.2**
ASAM 3.1	437	6.7
ASAM 3.3	-	-
ASAM 3.5	492	7.5
Intensive Outpatient (ASAM 2.1)	**304**	**4.7**
Outpatient (ASAM 1.0)	**601**	**9.2**
Opioid Treatment Program (ASAM OTP)	**3,123**	**47.8**
Recovery Support Service	**89**	**1.4**

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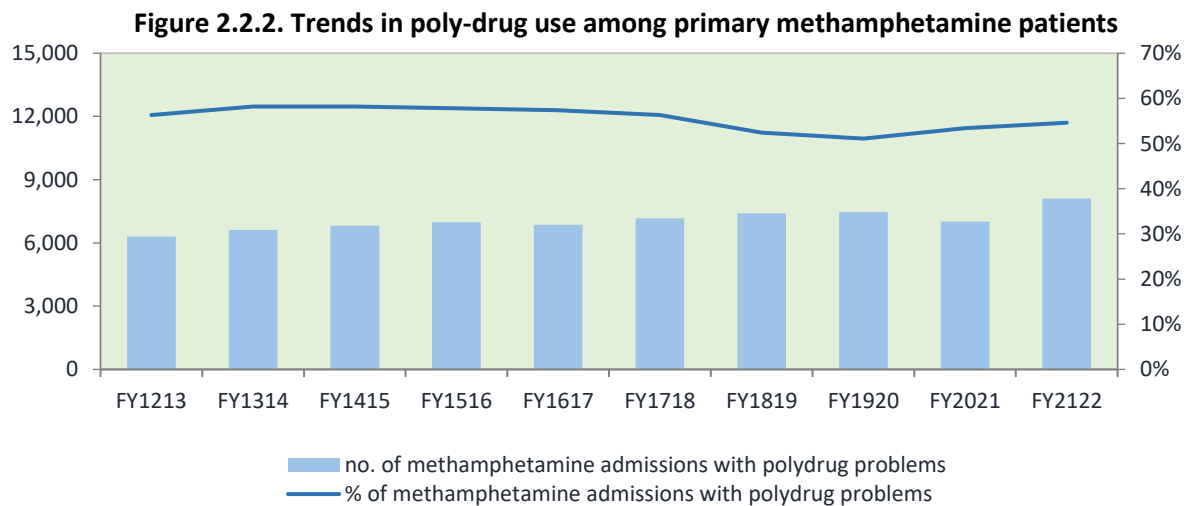N ≤ 5 not reported to protect confidentiality.

Over the years, there have been notable fluctuations in the proportions of opioid treatment programs and residential service programs catering to primary Rx admissions. Specifically, the proportion of opioid treatment programs witnessed an upward trend, rising from 57.0% in FY1213 to 72.5% in FY1617, but subsequently experienced a decline, reaching 47.8% in FY2122. On the other hand, the proportion of residential service programs remained relatively stable from FY1213 to FY1617, followed by an increase in FY1718, and then maintaining a steady level through FY2122 (Figure 2.5.3).

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

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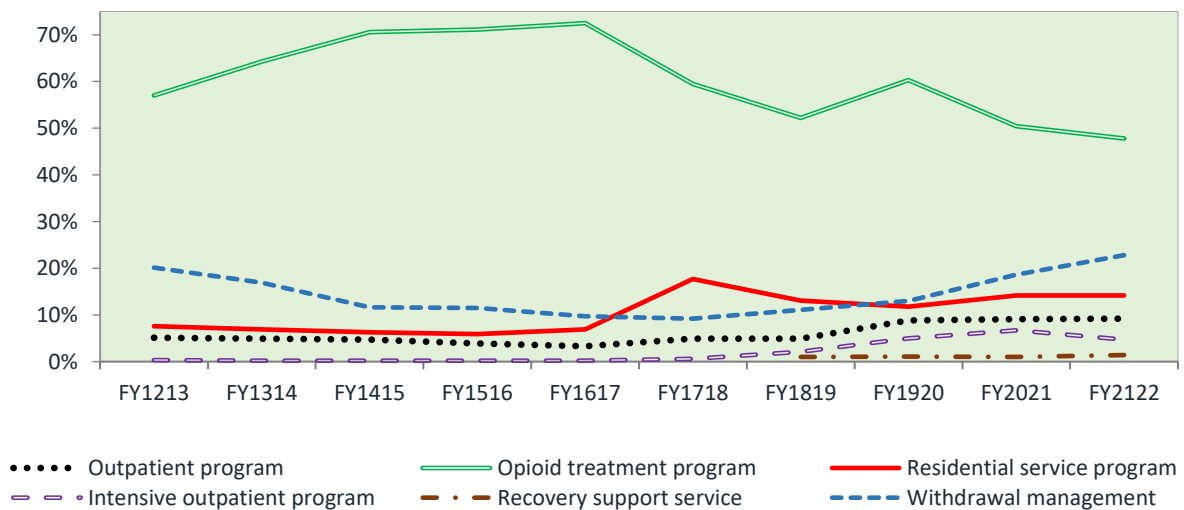
Patients with Cocaine as Primary Substance of Use

TREATMENT ADMISSIONS AND DISCHARGES

There were 1,638 admissions (1,178 patients) reporting cocaine as the primary substance use, accounting for 3.2% of total treatment admissions (Table 2.6.1).

Table 2.6.1. Treatment admissions and discharges among primary cocaine patients, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of patients
Admitted	1,638	3.2	1,178	3.6
Discharged	1,314	3.5	991	4.2

The number and proportion of primary cocaine admissions and patients declined markedly over the past ten fiscal years, with the proportion of admissions decreasing from about 6.9% in FY1213 to 3.2% in FY2122 (Figure 2.6.1).

Figure 2.6.1. Trends in primary cocaine admissions and patients
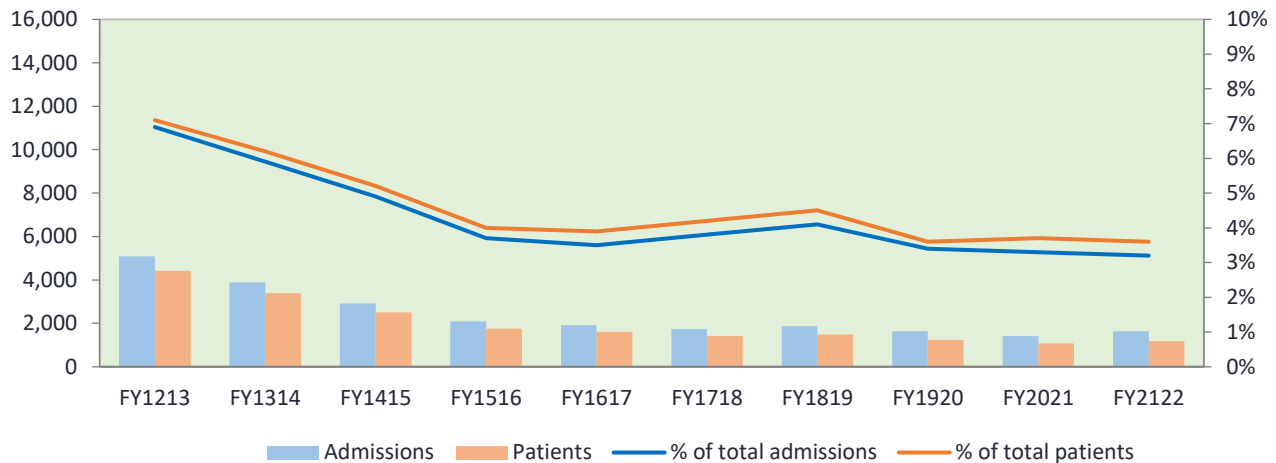
Of the discharges, over half had positive compliance (53.4%), with 40.8% completing treatment and 12.5% leaving the program with satisfactory progress (Table 2.6.2).

Table 2.6.2. Discharge status of primary cocaine patients, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**634**	**53.4**
Completed treatment	485	40.8
Left – satisfactory progress	149	12.5
Negative compliance		
(Left – unsatisfactory progress)	**453**	**38.1**
Other (Death/incarceration/other)	**101**	**8.5**

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

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PATIENT CHARACTERISTICS

The majority of primary cocaine patients were male (64.9%), Black/African American (56.9%), ages 55-64 (26.2%), and unemployed (64.6%). Among primary cocaine admissions, 61.1% had mental health issues, 46.7% were homeless, and 20.2% reported having a disability (Table 2.6.3).

Table 2.6.3. Characteristics of primary cocaine patients, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	763	64.9
	Female	410	34.9
	Transgender male	-	-
	Transgender female	-	-
	Non-conforming or refuse to state	-	-
RACE	Latinx	346	29.4
	White	132	11.2
	Black/African American	669	56.9
	Asian	15	1.3
	Pacific Islander	-	-
	American Indian/Alaska Native	-	-
	Other	9	0.8
AGE	17 and under	-	-
	18-25	88	7.5
	26-34	257	21.9
	35-44	240	20.4
	45-54	233	19.8
	55-64	308	26.2
	65+	46	3.9
SEXUAL ORIENTATION	Heterosexual	1,077	92.8
	Gay, lesbian, or bisexual	63	5.4
	Unsure/questioning	6	0.5
	Prefer not to state	15	1.3
EDUCATION	Middle school or below	36	3.1
	Some high school	284	24.5
	High school completed	541	46.8
	Some college or beyond	296	25.6
EMPLOYMENT	Employed	251	15.4
	Unemployed (seeking)	520	31.9
	Unemployed (not seeking)	533	32.7
	Not in labor force	325	20.0
HOMELESS	Homeless at admission	550	46.7
AGE OF FIRST PRIMARY SUBSTANCE USE	11 & under	24	1.5
	12-17	397	24.3
	18-25	799	48.8
	26 and over	416	25.4
MENTAL HEALTH ISSUES	Yes	999	61.1
	No	636	38.9
PHYSICAL HEALTH ISSUES	Yes	245	15.0
	No	1,383	85.0
DISABILITY	Yes	296	20.2
	No	1,172	79.8
CRIMINAL JUSTICE	Yes	432	26.5
	No	1,200	73.5

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

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Treatment Programs in Los Angeles County, FY2021-2022

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SUBSTANCE USE STATUS AT ADMISSION

Among primary cocaine admissions, 61.6% reported poly-drug use; 10.7% of the admissions used cocaine every day in the 30 days prior to admission; 66.9% had one or more prior SUD treatment admission(s) (Table 2.6.4).

Table 2.6 4. Substance use status among primary cocaine patients, FY2122

SUBSTANCE USE STATUS		ADMISSIONS	%
POLY-DRUG	Cocaine use only	629	38.4
	Cocaine with other substance use	1,009	61.6
FREQUENCY OF	No use	671	41.1
USE IN PAST	1-9 days	329	20.1
MONTH	10-19 days	203	12.4
	20-29 days	256	15.7
	Every day	175	10.7
PRIOR SUD	None	492	33.1
TREATMENT	1-2	598	40.3
ADMISSIONS	3-4	200	13.5
	5+	195	13.1

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

Starting in FY1213, there has been a significant decrease in the number of primary cocaine admissions involving poly-drug use. However, the proportion of admissions remained relatively stable throughout the past ten fiscal years, ranging from 60.5% to 66.3% (Figure 2.6.2).

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

no. of cocaine admissions with polydrug problems — % of cocaine admissions with polydrug problems

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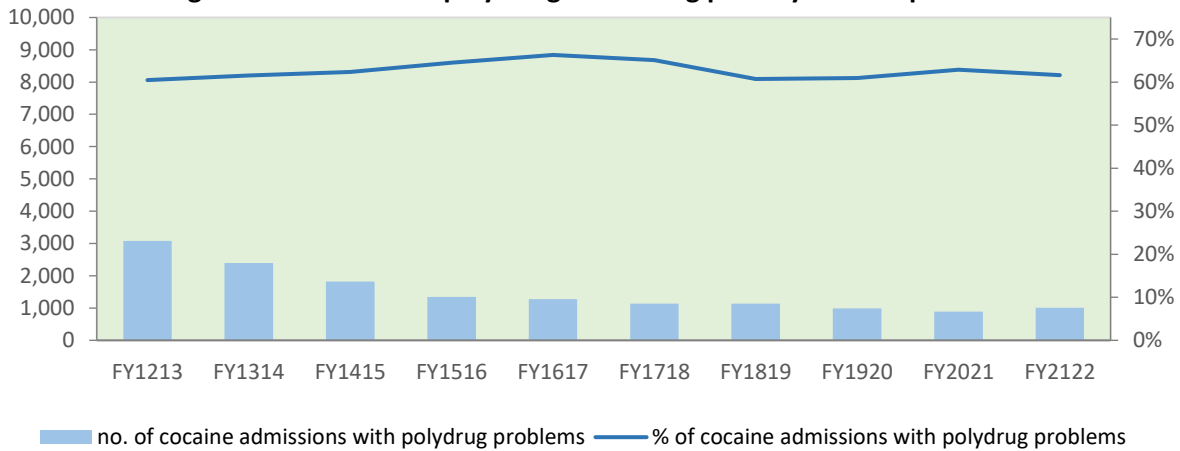
COCAINE

LEVEL OF CARE

The most common level of care among primary cocaine admissions was residential service programs (47.4%), followed by outpatient programs (28.7%) and intensive outpatient programs (18.7%) (Table 2.6.5).

Table 2.6 5. Level of care among primary cocaine patients, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**18**	**1.1**
ASAM WM 3.2	17	1.0
ASAM WM 3.7/4.0	-	-
Residential Service	**771**	**47.4**
ASAM 3.1	361	22.2
ASAM 3.3	7	0.4
ASAM 3.5	403	24.8
Intensive Outpatient (ASAM 2.1)	**304**	**18.7**
Outpatient (ASAM 1.0)	**466**	**28.7**
Recovery Support Service	**67**	**4.1**

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

N ≤ 5 not reported to protect confidentiality

There has been a noticeable decline in the proportion of primary cocaine admissions to outpatient programs. In contrast, the proportion of primary cocaine admissions to residential service programs showed a significant increase, peaking at 52.7% in FY1718 and remaining relatively stable thereafter. The proportion of primary cocaine admissions to residential service programs has exceeded the proportion of admissions to outpatient programs since FY1718 (Figure 2.6.3).

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

Annual Overview of Patients in Publicly Funded Substance Use Disorder Treatment Programs in Los Angeles County, FY2021-2022

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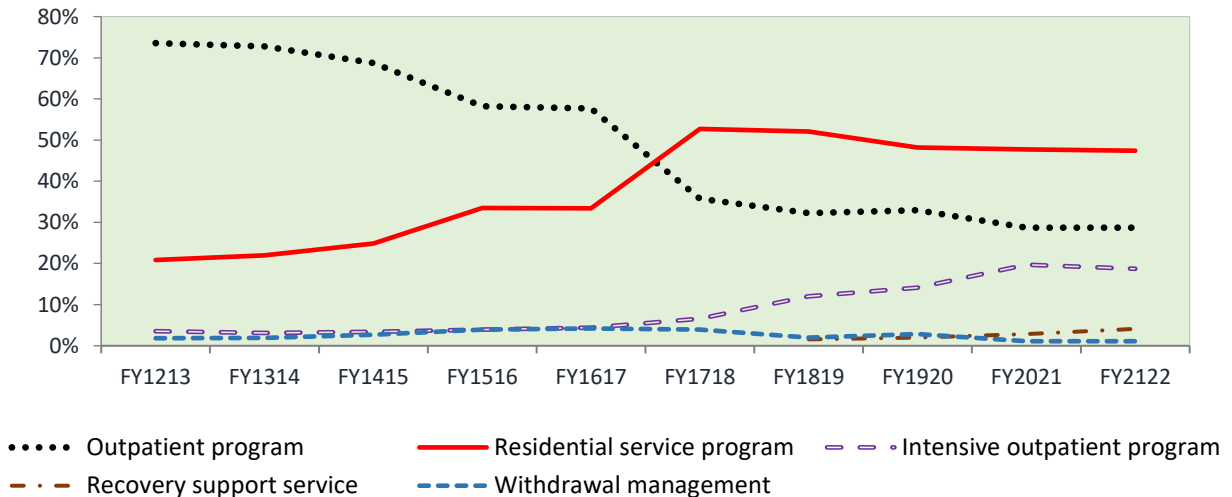
Summary Table 1. Summary statistics of patients with different primary substance of use, FY2122

Categories	Heroin N	Heroin %	Methamphetamine N	Methamphetamine %	Marijuana N	Marijuana %	Alcohol N	Alcohol %	Prescription Drug N	Prescription Drug %	Cocaine N	Cocaine %
ADMITTED												
Patients	8,634	26.3	9,467	28.8	3,308	10.1	8,004	24.3	4,657	14.2	1,178	3.6
Admissions	11,022	21.3	14,853	28.6	4,040	7.8	13,310	25.7	6,561	12.7	1,638	3.2
DISCHARGED												
Patients	3,943	16.9	8,006	34.2	2,538	10.8	6,767	28.9	2,877	12.3	991	4.2
Admissions	5,457	14.7	11,938	32.2	3,013	8.1	10,824	29.2	4,180	11.3	1,314	3.5
DISCHARGE STATUS												
Positive compliance	2,367	47.3	5,442	49.9	1,182	43.6	6,363	64.5	1,906	49.8	634	53.4
Completed Treatment	1,437	28.7	4,258	39.1	879	32.4	5,410	54.8	1,319	34.5	485	40.8
Left – satisfactory progress	930	18.6	1,184	10.9	303	11.2	953	9.7	587	15.4	149	12.5
Negative compliance	2,390	47.8	4,492	41.2	1,274	47.0	2,952	29.9	1,759	46.0	453	38.1
Other (Death/incarceration/other)	247	4.9	969	8.9	253	9.3	551	5.6	159	4.2	101	8.5
GENDER IDENTITY†												
Male	6,131	71.1	5,719	60.5	1,978	59.8	5,167	64.6	2,928	63.0	763	64.9
Female	2,483	28.8	3,675	38.9	1,324	40.0	2,798	35.0	1,711	36.8	410	34.9
Transgender male	-	-	11	0.1	-	-	8	0.1	-	-	-	-
Transgender female	7	0.1	50	0.5	-	-	16	0.2	-	-	-	-
Non-conforming or refuse to state	-	-	-	-	-	-	-	-	-	-	-	-
RACE†												
Latinx	3,984	46.4	6,140	65.0	1,972	60.0	4,530	56.7	1,855	40.1	346	29.4
White	3,819	44.5	1,643	17.4	359	10.9	1,814	22.7	2,134	46.2	132	11.2
Black/African American	583	6.8	1,315	13.9	867	26.4	1,387	17.4	498	10.8	669	56.9
Asian	104	1.2	190	2.0	49	1.5	125	1.6	86	1.9	15	1.3
Pacific Islander	8	0.1	36	0.4	-	-	11	0.1	6	0.1	-	-
American Indian /Alaska Native	52	0.6	69	0.7	11	0.3	77	1.0	20	0.4	-	-
Other	37	0.4	47	0.5	22	0.7	41	0.5	24	0.5	9	0.8
AGE†												
17 and under	-	-	26	0.3	778	23.5	48	0.6	52	1.1	-	-
18-25	320	3.7	1,075	11.4	760	23.0	649	8.1	730	15.7	88	7.5
26-34	2,006	23.2	4,047	42.8	1,047	31.7	2,658	33.3	1,578	33.9	257	21.9
35-44	1,741	20.2	2,785	29.5	465	14.1	2,314	29.0	1,064	22.9	240	20.4
45-54	1,400	16.2	1,123	11.9	173	5.2	1,316	16.5	532	11.4	233	19.8
55-64	2,020	23.4	371	3.9	77	2.3	901	11.3	445	9.6	308	26.2
65+	1,139	13.2	29	0.3	8	0.2	107	1.3	249	5.4	46	3.9

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(Table cont'd) Categories	Heroin N	%	Methamphetamine N	%	Marijuana N	%	Alcohol N	%	Prescription Drug N	%	Cocaine N	%
SEXUAL ORIENTATION†												
Heterosexual	6,995	95.6	8,176	88.1	2,997	91.6	7,253	91.9	4,082	93.1	1,077	92.8
Gay, lesbian, or bisexual	212	2.9	888	9.6	197	6.0	477	6.0	201	4.6	63	5.4
Unsure/questioning	21	0.3	48	0.5	18	0.6	47	0.6	27	0.6	6	0.5
Prefer not to state	91	1.2	168	1.8	60	1.8	115	1.5	73	1.7	15	1.3
EDUCATION†												
Middle school or below	278	3.3	313	3.4	120	3.8	323	4.1	90	2.0	36	3.1
Some high school	1,944	22.9	2,845	30.6	1,169	36.8	1,537	19.5	729	15.9	284	24.5
High school completed	4,708	55.6	4,352	46.8	1,342	42.3	3,499	44.4	2,537	55.5	541	46.8
Some college or beyond	1,545	18.2	1,789	19.2	543	17.1	2,524	32.0	1,216	26.6	296	25.6
EMPLOYMENT												
Employed	1,909	17.5	1,931	13.1	881	22.3	2,321	17.5	1,250	19.2	251	15.4
Unemployed (seeking)	3,578	32.7	5,851	39.6	1,065	27.0	5,027	37.9	2,245	34.4	520	31.9
Unemployed (not seeking)	3,408	31.2	4,407	29.8	969	24.5	4,355	32.9	2,114	32.4	533	32.7
Not in labor force	2,040	18.7	2,598	17.6	1,036	26.2	1,552	11.7	914	14.0	325	20.0
HOMELESS†												
Homeless at admission	1,559	18.1	5,025	53.1	712	21.5	3,335	41.7	1,163	25.0	550	46.7
AGE OF FIRST PRIMARY SUBSTANCE USE												
11 years or under	95	0.9	270	1.8	356	8.8	1,222	9.2	49	0.8	24	1.5
12-17	2,771	25.1	5,686	38.3	2,868	71.1	7,965	59.9	1,168	17.9	397	24.3
18-25	5,449	49.4	5,549	37.4	707	17.5	3,530	26.5	2,518	38.6	799	48.8
26+	2,705	24.5	3,340	22.5	103	2.6	588	4.4	2,785	42.7	416	25.4
MENTAL HEALTH ISSUES												
Yes	3,296	30.1	8,569	57.9	1,869	46.6	8,466	63.8	3,063	46.9	999	61.1
No	7,644	69.9	6,218	42.1	2,141	53.4	4,794	36.2	3,470	53.1	636	38.9
PHYSICAL HEALTH ISSUES												
Yes	1,369	12.6	1,829	12.4	345	8.7	2,182	16.5	906	14.0	245	15.0
No	9,496	87.4	12,898	87.6	3,640	91.3	11,022	83.5	5,587	86.0	1,383	85.0
DISABILITY												
Yes	1,421	13.8	2,062	15.3	413	11.4	2,515	20.8	981	16.0	296	20.2
No	8,906	86.2	11,459	84.7	3,207	88.6	9,584	79.2	5,168	84.0	1,172	79.8
CRIMINAL JUSTICE												
Yes	1,742	15.9	5,171	35.0	1,098	27.4	2,616	19.7	737	11.3	432	26.5
No	9,208	84.1	9,594	65.0	2,905	72.6	10,636	80.3	5,795	88.7	1,200	73.5

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COUNTY OF LOS ANGELES Public Health

(Table cont'd)	Heroin		Methamphetamine		Marijuana		Alcohol		Prescription Drug		Cocaine	
Categories	**N**	**%**	**N**	**%**	**N**	**%**	**N**	**%**	**N**	**%**	**N**	**%**
POLY-DRUG												
Primary substance use only	6,275	56.9	6,748	45.4	2,137	52.9	6,455	48.5	2,709	41.3	629	38.4
With secondary substance use	4,747	43.1	8,105	54.6	1,903	47.1	6,855	51.5	3,852	58.7	1,009	61.6
FREQUENCY OF USE IN PAST MONTH												
No use	2,774	25.2	7,033	47.4	1,443	35.8	4,194	31.6	1,340	20.6	671	41.1
1-9 days	797	7.2	2,924	19.7	800	19.9	2,092	15.7	504	7.7	329	20.1
10-19 days	727	6.6	1,615	10.9	497	12.3	1,826	13.7	582	8.9	203	12.4
20-29 days	937	8.5	1,699	11.4	461	11.4	2,342	17.6	931	14.3	256	15.7
Everyday	5,780	52.5	1,569	10.6	829	20.6	2,835	21.3	3,163	48.5	175	10.7
PRIOR SUD TREATTMENT ADMISSIONS												
None	2,134	21.0	4,423	33.2	1,872	54.3	3,593	29.3	1,550	25.2	492	33.1
1-2	4,184	41.2	5,374	40.4	1,208	35.0	4,525	36.9	2,477	40.2	598	40.3
3-4	1,909	18.8	1,916	14.4	245	7.1	1,754	14.3	910	14.8	200	13.5
5+	1,926	19.0	1,601	12.0	125	3.6	2,378	19.4	1,219	19.8	195	13.1
LEVEL OF CARE												
ASAM 1-Outpatient	496	4.5	4,161	28.1	2,257	56.3	3,757	28.4	601	9.2	466	28.7
ASAM 2.1-Intensive Outpatient	372	3.4	2,742	18.5	720	18.0	1,952	14.8	304	4.7	304	18.7
ASAM OTP-Opioid Treatment Program	8,023	72.9	-	-	-	-	-	-	3,123	47.8	-	-
ASAM 3.1-Residential Service	527	4.8	3,403	23.0	412	10.3	1,819	13.8	437	6.7	361	22.2
ASAM 3.3-Residential Service	-	-	56	0.4	11	0.3	14	0.1	-	-	7	0.4
ASAM 3.5-Residential Service	477	4.3	3,651	24.7	407	10.2	2,227	16.8	492	7.5	403	24.8
ASAM WM 1-Withdrawal Management	-	-	-	-	-	-	-	-	11	0.2	-	-
ASAM WM 2-Withdrawal Management	25	0.2	-	-	-	-	37	0.3	30	0.5	-	-
ASAM WM 3.2-Withdrawal Management	821	7.5	156	1.1	-	-	1,395	10.6	1,102	16.9	17	1.0
ASAM WM 3.7/4.0-Withdrawal Management	158	1.4	19	0.1	-	-	1,486	11.2	347	5.3	-	-
Recovery Support Service	112	1.0	594	4.0	199	5.0	530	4.0	89	1.4	67	4.1

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

† Based on unique patient numbers and percentages.

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Chapter 3

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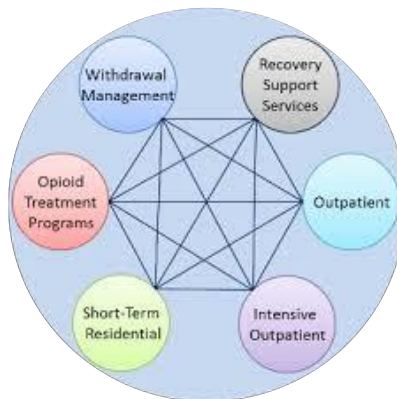
Chapter 3 provides descriptive information for admissions by levels of care (**withdrawal management, residential service, outpatient, intensive outpatient,** and **opioid treatment** program). Numbers of patients, admissions, and discharges are reported, along with trends in admission levels over the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

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Patients in Withdrawal Management

TREATMENT ADMISSIONS AND DISCHARGES

There were 5,700 treatment admissions (4,372 patients) to withdrawal management, accounting for 10.8% of total admissions (Table 3.1.1). The average length of stay for withdrawal management was 6.7 days (Table 1.7).

Table 3.1.1. Treatment admissions and discharges in withdrawal management, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	5,700	10.8	4,372	13.0
Discharged	5,228	13.9	4,001	16.9

During the course of the past ten fiscal years, the number and proportion of admissions to withdrawal management remained relatively stable until FY1617, then exhibited an upward trend and increased to 5,700 (10.8%) in FY2122. The overall trend indicates a notable 31.2% increase in admissions from FY1213 to FY2122 (Figure 3.1.1).

Figure 3.1.1. Trends in admissions and patients in withdrawal management
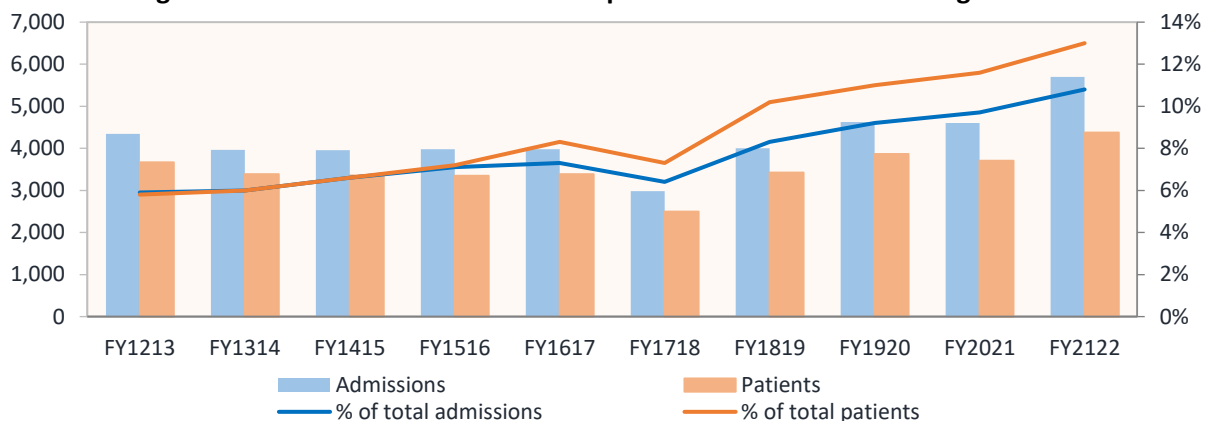
Of the discharges in the withdrawal management programs, 74.0% had positive compliance, with 67.4% completing treatment and 6.6% leaving the program with satisfactory progress (Table 3.1.2).

Table 3.1.2. Discharge status of patients in withdrawal management, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**3,672**	**74.0**
Completed treatment	3,344	67.4
Left – satisfactory progress	328	6.6
Negative compliance (Left – unsatisfactory progress)	**1,227**	**24.7**
Other (Death/incarceration/other)	**63**	**1.3**

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

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PATIENT CHARACTERISTICS

The majority of patients in withdrawal management were male (72.7%), Latinx (49.3%), ages 26-34 (35.8%), and unemployed (90.2%). Among admissions in withdrawal management, 71.1% reported having mental health issues, and 49.3% were homeless (Table 3.1.3).

Table 3.1.3. Characteristics of patients in withdrawal management, FY2122

CHARACTRISTICS		PATIENTS	%
GENDER IDENTITY	Male	3,164	72.7
	Female	1,183	27.2
	Transgender male	-	-
	Transgender female	6	0.1
	Non-conforming or refuse to state	-	-
RACE	Latinx	2,150	49.3
	White	1,578	36.2
	Black/African American	522	12.0
	Asian	57	1.3
	Pacific Islander	7	0.2
	American Indian/Alaska Native	28	0.6
	Other	22	0.5
AGE	17 and under	-	-
	18-25	431	10.0
	26-34	1,540	35.8
	35-44	1,105	25.7
	45-54	706	16.4
	55-64	466	10.8
	65+	47	1.1
SEXUAL ORIENTATION	Heterosexual	3,997	92.7
	Gay, lesbian, or bisexual	251	5.8
	Unsure/questioning	32	0.7
	Prefer not to state	31	0.7
EDUCATION	Middle school or below	93	2.2
	Some high school	761	17.7
	High school completed	2,138	49.7
	Some college or beyond	1,311	30.5
EMPLOYMENT	Employed	390	6.9
	Unemployed (seeking)	2,057	36.5
	Unemployed (not seeking)	3,022	53.7
	Not in labor force	163	2.9
HOMELESS	Homeless at admission	2,155	49.3
MENTAL HEALTH ISSUES	Yes	4,008	71.1
	No	1,628	28.9
PHYSICAL HEALTH ISSUES	Yes	863	15.3
	No	4,771	84.7
DISABILITY	Yes	1,463	28.2
	No	3,728	71.8
CRIMINAL JUSTICE	Yes	867	15.4
	No	4,770	84.6

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

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PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 3.1.4, alcohol (52.0%) was the most commonly reported primary substance use among patients in withdrawal management, followed by prescription drug (26.5%) and heroin (17.9%).

Table 3.1.4. Primary substance use among patients in withdrawal management, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Alcohol	2,920	52.0
Prescription drug	1,490	26.5
Heroin	1,004	17.9
Methamphetamine	177	3.1
Cocaine	18	0.3
Other drugs	11	0.2

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

Heroin had been the most common primary substance use among withdrawal management admissions from FY1213 to FY1617 and again in FY1819; however, it underwent a significant decrease thereafter, reaching 17.9% in FY2122. Conversely, the proportion of primary alcohol admissions steadily increased from 27.0% in FY1213 to 52.0% in FY2122. Furthermore, the proportion of primary prescription drug indicated a rapid surge from 8.7% in FY1920 and reached to 26.5% in FY2122 (Figure 3.1.2).

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

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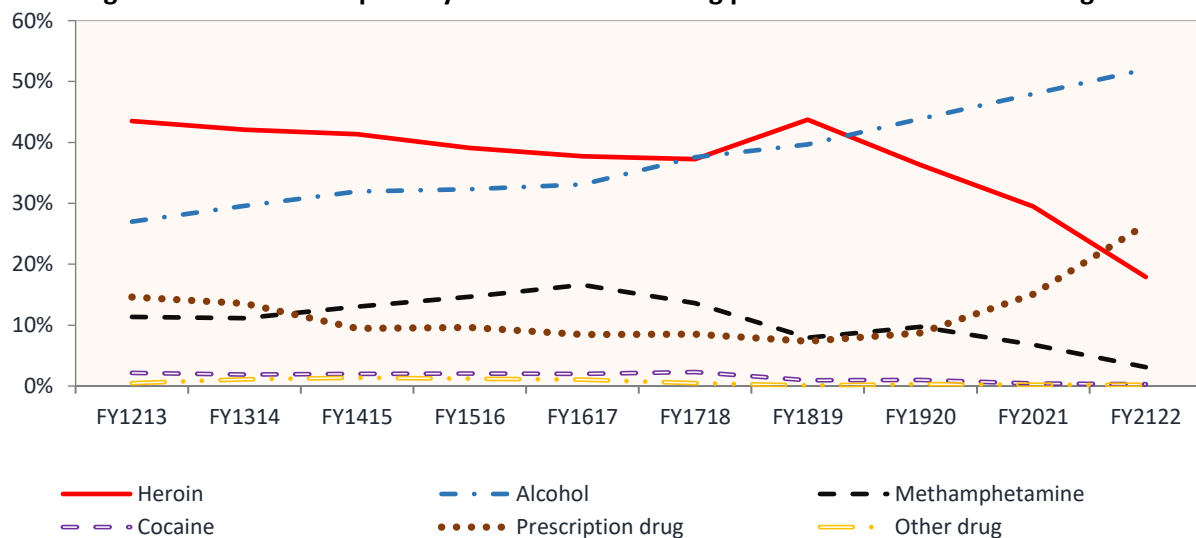
Patients in Residential Service Programs

TREATMENT ADMISSIONS AND DISCHARGES

There was 15,296 treatment admissions (11,600 patients) to residential service programs, accounting for 28.9% of total admissions (Table 3.2.1). The average length of stay for residential service program was 44.2 days (Table 1.7).

Table 3.2.1. Treatment admissions and discharges in residential service programs, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	15,296	28.9	11,600	34.4
Discharged	13,045	34.7	9,998	42.2

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

Figure 3.2.1. Trends in admissions and patients in residential service programs
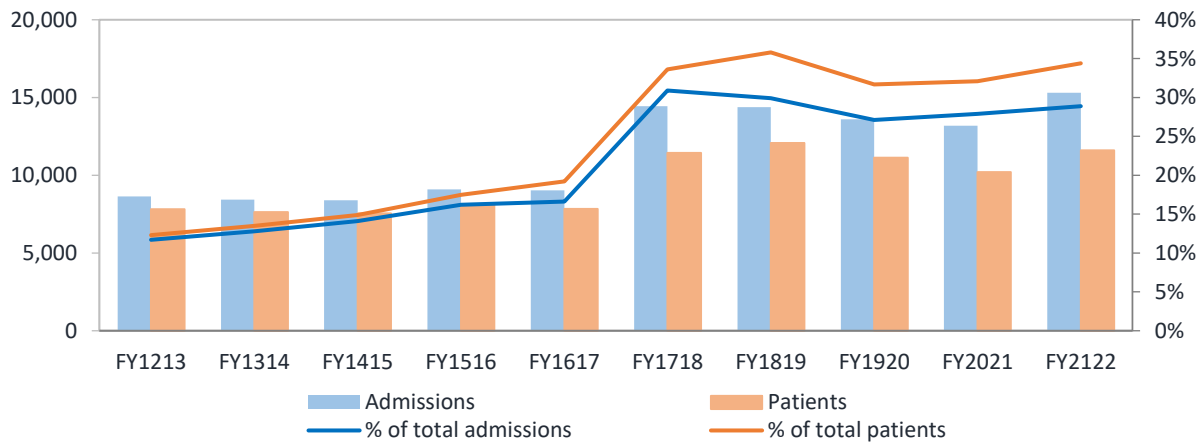
Of the discharges in the residential service programs, more than half (56.2%) had positive compliance, with 45.1% completing treatment and 11.0% leaving the program with satisfactory progress (Table 3.2.2).

Table 3.2.2. Discharge status of patients in residential service programs, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**6,959**	**56.2**
Completed treatment	5,591	45.1
Left – satisfactory progress	1,368	11.0
Negative compliance (Left – unsatisfactory progress)	**4,462**	**36.0**
Other (Death/incarceration/other)	967	7.8

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

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PATIENT CHARACTERISTICS

The majority of patients in residential service programs were male (65.7%), Latinx (53.6%), ages 26-34 (39.2%), and unemployed (76.7%). Among admissions in residential service, 62.7% were homeless, and 64.9% reported having mental health issues (Table 3.2.3).

Table 3.2.3. Characteristics of patients in residential service programs, FY2122

CHARACTRISTICS		PATIENTS	%
GENDER IDENTITY	Male	7,611	65.7
	Female	3,902	33.7
	Transgender male	14	0.1
	Transgender female	47	0.4
	Non-conforming or refuse to state	-	-
RACE	Latinx	6,168	53.6
	White	2,722	23.6
	Black/African American	2,252	19.6
	Asian	179	1.6
	Pacific Islander	37	0.3
	American Indian/Alaska Native	106	0.9
	Other	51	0.4
AGE	17 and under	69	0.6
	18-25	1,388	12.1
	26-34	4,508	39.2
	35-44	3,048	26.5
	45-54	1,506	13.1
	55-64	878	7.6
	65+	101	0.9
SEXUAL ORIENTATION	Heterosexual	10,217	89.6
	Gay, lesbian, or bisexual	946	8.3
	Unsure/questioning	51	0.4
	Prefer not to state	189	1.7
EDUCATION	Middle school or below	279	2.5
	Some high school	2,925	26.0
	High school completed	5,362	47.6
	Some college or beyond	2,689	23.9
EMPLOYMENT	Employed	487	3.2
	Unemployed (seeking)	4,816	32.1
	Unemployed (not seeking)	6,696	44.6
	Not in labor force	3,018	20.1
HOMELESS	Homeless at admission	7,273	62.7
MENTAL HEALTH ISSUES	Yes	9,648	64.9
	No	5,210	35.1
PHYSICAL HEALTH ISSUES	Yes	2,933	19.8
	No	11,855	80.2
DISABILITY	Yes	2,581	18.7
	No	11,206	81.3
CRIMINAL JUSTICE	Yes	5,063	34.0
	No	9,845	66.0

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

N ≤ 5 not reported to protect confidentiality.

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PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 3.2.4, methamphetamine was the most commonly reported primary substance use (47.7%) among patients in residential service programs, followed by alcohol (27.3%) and heroin (6.8%).

Table 3.2.4. Primary substance use among patients in residential service programs, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Methamphetamine	7,110	47.7
Alcohol	4,060	27.3
Heroin	1,006	6.8
Prescription drug	930	6.2
Marijuana	830	5.6
Cocaine	771	5.2
Other drugs	190	1.3

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

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

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

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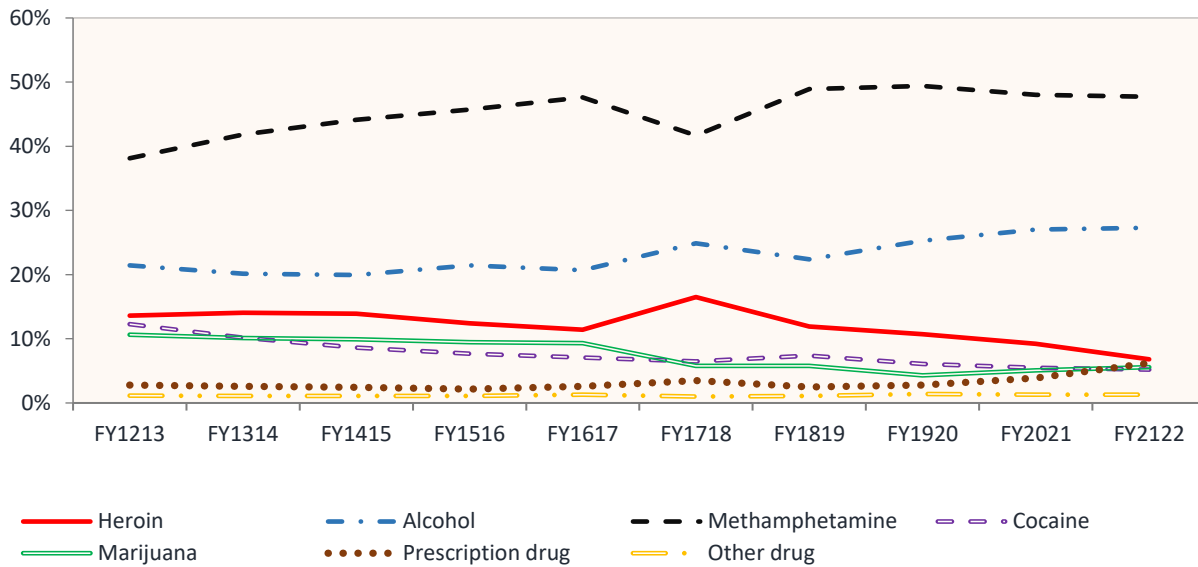
Patients in Intensive Outpatient Programs (IOP)

TREATMENT ADMISSIONS AND DISCHARGES

There were 6,566 treatment admissions (5,919 patients) to intensive outpatient programs, accounting for 12.4% of total admissions (Table 3.3.1). The average length of stay for intensive outpatient program was 83.6 days (Table 1.7).

Table 3.3.1. Treatment admissions and discharges in intensive outpatient programs, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	6,566	12.4	5,919	17.6
Discharged	5,156	13.7	4,695	19.8

Coinciding with the launch of the Drug Medi-Cal-Organized Delivery System (DMC-ODS) in FY1718, a substantial upsurge was observed in the number and proportion of admissions and patients enrolled in intensive outpatient programs. Notably, the proportion of admissions (14.2%) and patients (19.2%) admitted to intensive outpatient programs reached its peak in FY2021, followed by a subsequent decline in FY2122 (Figure 3.3.1).

Figure 3.3.1. Trends in admissions and patients in intensive outpatient programs
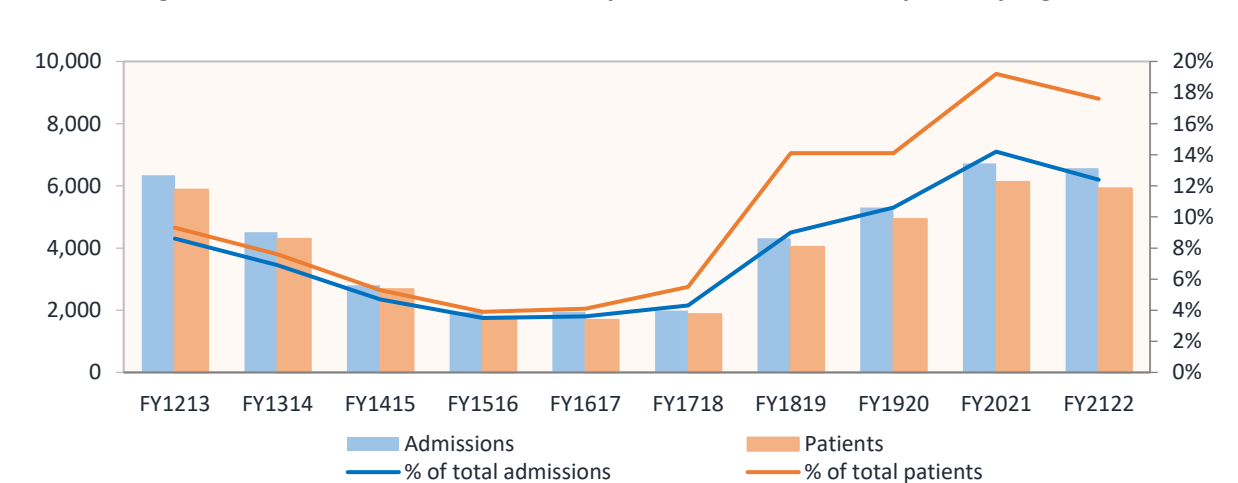
Of the discharges in the intensive outpatient services programs, 47.2% reported positive compliance, with 36.4% completing treatment and 10.8% leaving the program with satisfactory progress (Table 3.3.2).

Table 3.3.2. Discharge status of patients in intensive outpatient programs, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**2,327**	**47.2**
Completed treatment	1,795	36.4
Left – satisfactory progress	532	10.8
Negative compliance (Left – unsatisfactory progress)	**2,055**	**41.7**
Other (Death/incarceration/other)	**550**	**11.2**

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

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PATIENT CHARACTERISTICS

The majority of intensive outpatient program patients were male (59.6%), Latinx (56.7%), ages 26-34 (39.9%), and unemployed (68.9%). More than half of admissions reported having mental health issues (57.7%), and 29.3% were involved in the criminal justice system (Table 3.3.3).

Table 3.3.3. Characteristics of patients in intensive outpatient programs, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	3,525	59.6
	Female	2,353	39.8
	Transgender male	13	0.2
	Transgender female	22	0.4
	Non-conforming or refuse to state	-	-
RACE	Latinx	3,349	56.7
	White	1,261	21.4
	Black/African American	1,072	18.2
	Asian	119	2.0
	Pacific Islander	10	0.2
	American Indian/Alaska Native	53	0.9
	Other	42	0.7
AGE	17 and under	128	2.2
	18-25	706	12.0
	26-34	2,350	39.9
	35-44	1,523	25.8
	45-54	741	12.6
	55-64	386	6.6
	65+	58	1.0
SEXUAL ORIENTATION	Heterosexual	5,121	88.0
	Gay, lesbian, or bisexual	560	9.6
	Unsure/questioning	23	0.4
	Prefer not to state	117	2.0
EDUCATION	Middle school or below	222	3.8
	Some high school	1,390	24.1
	High school completed	2,603	45.1
	Some college or beyond	1,556	27.0
EMPLOYMENT	Employed	1,101	17.0
	Unemployed (seeking)	3,472	53.5
	Unemployed (not seeking)	1,000	15.4
	Not in labor force	916	14.1
HOMELESS	Homeless at admission	2,370	40.0
MENTAL HEALTH ISSUES	Yes	3,755	57.7
	No	2,751	42.3
PHYSICAL HEALTH ISSUES	Yes	676	10.5
	No	5,734	89.5
DISABILITY	Yes	783	12.6
	No	5,453	87.4
CRIMINAL JUSTICE	Yes	1,905	29.3
	No	4,590	70.7

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

Annual Overview of Patients in Publicly Funded Substance Use Disorder Treatment Programs in Los Angeles County, FY2021-2022

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PRIMARY SUBSTANCE USE

As shown in Table 3.3.4, methamphetamine was the most commonly reported primary substance use among patients in intensive outpatient programs (42.4%), followed by alcohol (30.2%) and marijuana (11.1%).

Table 3.3.4. Primary substance use among patients in intensive outpatient programs, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Methamphetamine	2,742	42.4
Alcohol	1,952	30.2
Marijuana	720	11.1
Heroin	372	5.8
Cocaine	304	4.7
Prescription drug	304	4.7
Other drugs	70	1.1

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

Over time, there has been a consistent decline in the proportion of primary marijuana admissions to the intensive outpatient program, coinciding with an upward trend in primary methamphetamine admissions. In FY1718, methamphetamine surpassed other substances and emerged as the most prevalent primary drug admission (Figure 3.3.2).

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

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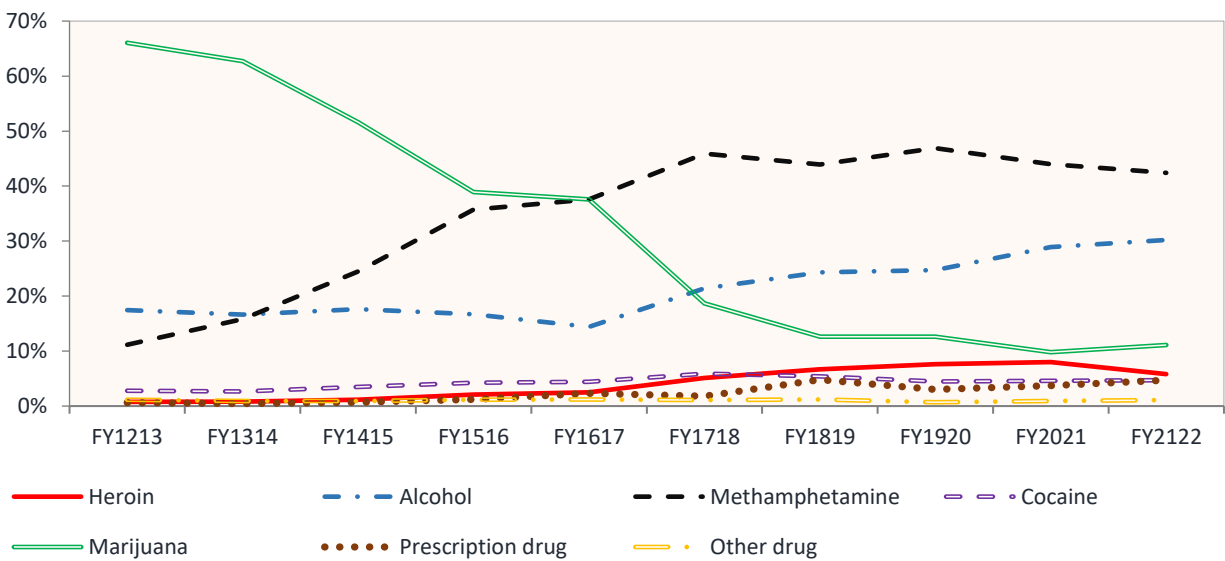
Patients in Outpatient Programs

TREATMENT ADMISSIONS AND DISCHARGES

There were 12,150 treatment admissions (10,904 patients) to outpatient programs, accounting for 23.0% of total admissions (Table 3.4.1). The average length of stay for outpatient program was 122.3 days (Table 1.7).

Table 3.4.1. Treatment admissions and discharges in outpatient programs, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	12,150	23.0	10,904	32.4
Discharged	8,840	23.5	8,090	34.2

The number and proportion of admissions to outpatient programs revealed a decreasing trend over the past ten fiscal years. Between FY1213 and FY2122, the number of admissions decreased by 67.6% from 37,450 to 12,150, and the proportion dropped from 50.7% to 23.0% (Figure 3.4.1).

Figure 3.4.1. Trends in admissions and patients in outpatient programs
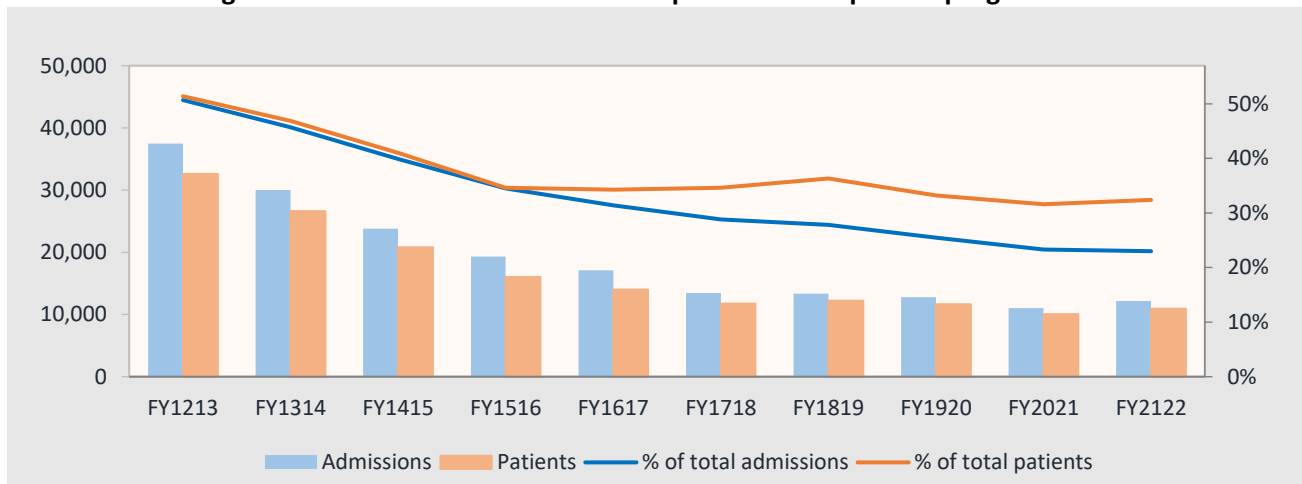
Of the discharges in the outpatient services programs, 46.8% reported positive compliance, with 34.6% completing treatment and 12.2% leaving the program with satisfactory progress (Table 3.4.2).

Table 3.4.2. Discharge status of patients in outpatient programs, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**3,699**	**46.8**
Completed treatment	2,732	34.6
Left – satisfactory progress	967	12.2
Negative compliance (Left – unsatisfactory progress)	**3,553**	**45.0**
Other (Death/incarceration/other)	**651**	**8.2**

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

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Treatment Programs in Los Angeles County, FY2021-2022**

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PATIENT CHARACTERISTICS

The majority of patients in outpatient programs were male (60.3%), Latinx (62.7%), ages 26-34 (35.8%), and unemployed (54.2%). 49.6% of admissions reported having mental health issues, and 25.0% were involved in the criminal justice system (Table 3.4.3).

Table 3.4.3. Characteristics of patients in outpatient programs, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	6,572	60.3
	Female	4,284	39.3
	Transgender male	13	0.1
	Transgender female	19	0.2
	Non-conforming or refuse to state	-	-
RACE	Latinx	6,793	62.7
	White	1,902	17.5
	Black/African American	1,814	16.7
	Asian	203	1.9
	Pacific Islander	21	0.2
	American Indian/Alaska Native	53	0.5
	Other	54	0.5
AGE	17 and under	830	7.7
	18-25	1,383	12.9
	26-34	3,848	35.8
	35-44	2,694	25.0
	45-54	1,226	11.4
	55-64	690	6.4
	65+	84	0.8
SEXUAL ORIENTATION	Heterosexual	9,816	91.5
	Gay, lesbian, or bisexual	712	6.6
	Unsure/questioning	55	0.5
	Prefer not to state	148	1.4
EDUCATION	Middle school or below	432	4.2
	Some high school	2,841	27.3
	High school completed	4,559	43.8
	Some college or beyond	2,566	24.7
EMPLOYMENT	Employed	3,425	29.0
	Unemployed (seeking)	4,485	38.0
	Unemployed (not seeking)	1,918	16.2
	Not in labor force	1,976	16.7
HOMELESS	Homeless at admission	2,666	24.4
MENTAL HEALTH ISSUES	Yes	5,892	49.6
	No	5,987	50.4
PHYSICAL HEALTH ISSUES	Yes	952	8.1
	No	10,801	91.9
DISABILITY	Yes	1,460	12.8
	No	9,938	87.2
CRIMINAL JUSTICE	Yes	2,975	25.0
	No	8,944	75.0

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

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PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 3.4.4, methamphetamine was the most commonly reported primary substance use (35.2%) in outpatient programs, followed by alcohol (31.7%) and marijuana (19.1%).

Table 3.4.4. Primary substance use among patients in outpatient programs, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Methamphetamine	4,161	35.2
Alcohol	3,757	31.7
Marijuana	2,257	19.1
Prescription drug	601	5.1
Heroin	496	4.2
Cocaine	466	3.9
Other drugs	98	0.8

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

There was a consistent downward trajectory in the proportion of primary marijuana admissions to outpatient programs. In contrast, primary methamphetamine admissions exhibited a steady and notable increase, reaching 35.2% in FY2122. In FY1415, methamphetamine surpassed alcohol, and in FY1516, methamphetamine surpassed marijuana as well and became the leading primary substance use at admission among outpatient admissions (Figure 3.4.2).

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

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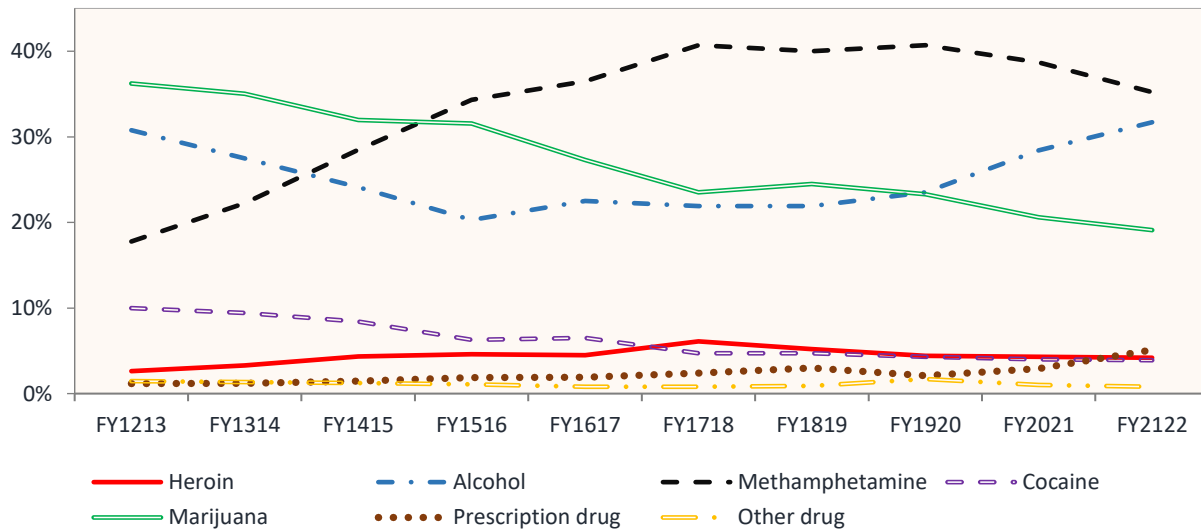
Patients in Opioid Treatment Programs (OTP)

TREATMENT ADMISSIONS AND DISCHARGES

There was 11,462 treatment admissions (9,726 patients) to opioid treatment programs, accounting for 21.7% of total admissions (Table 3.5.1). The average length of stay for opioid treatment program was 512.7 days (Table 1.7).

Table 3.5.1. Treatment admissions and discharges in opioid treatment programs, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	11,462	21.7	9,726	28.9
Discharged	4,263	11.3	3,502	14.8

Following a sustained period of growth, the number and proportion of admissions to opioid treatment programs experienced a notable decline starting from FY1617. This decline resulted in a significant decrease of 49.0%, with admissions dropping from 22,473 in FY1617 to 11,462 in FY2122 (Figure 3.5.1).

Figure 3.5.1. Trends in admissions and patients in opioid treatment programs
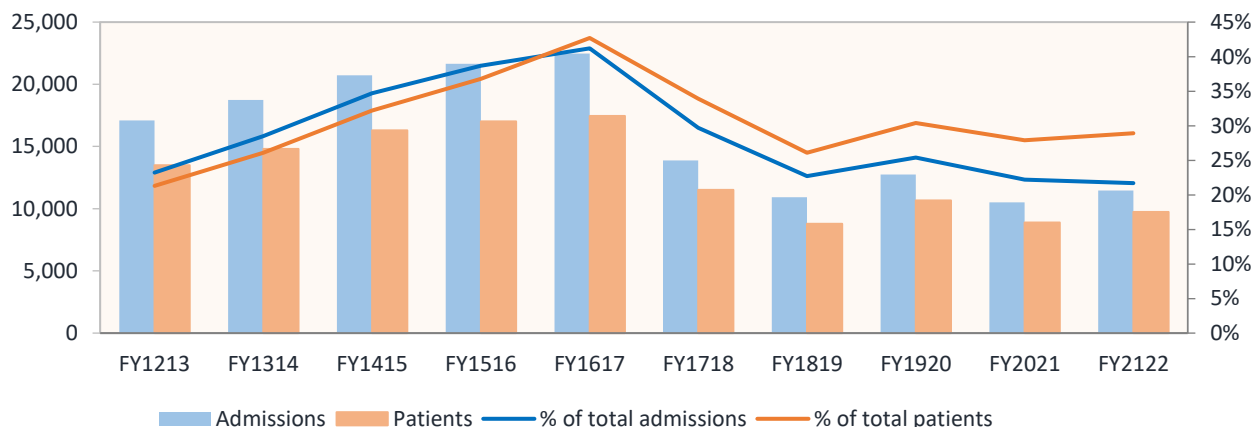
Of the discharges in the opioid treatment programs, 38.6% reported positive compliance, with 12.8% completing treatment and 25.9% leaving the program with satisfactory progress (Table 3.5.2).

Table 3.5.2. Discharge status of patients in opioid treatment programs, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**1,488**	**38.6**
Completed treatment	491	12.8
Left – satisfactory progress	997	25.9
Negative compliance (Left – unsatisfactory progress)	**2,264**	**58.8**
Other (Death/incarceration/other)	**98**	**2.5**

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

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PATIENT CHARACTERISTICS

The majority of patients in opioid treatment programs were male (67.0%), White (45.1%), ages 55-64 (23.8%), and unemployed (56.0%). 21.2% of the admissions reported having mental health issues, and 8.8% were homeless (Table 3.5.3).

Table 3.5.3. Characteristics of patients in opioid treatment programs, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	6,515	67.0
	Female	3,197	32.9
	Transgender male	-	-
	Transgender female	-	-
	Non-conforming or refuse to state	6	0.1
RACE	Latinx	4,208	43.8
	White	4,335	45.1
	Black/African American	838	8.7
	Asian	132	1.4
	Pacific Islander	9	0.1
	American Indian/Alaska Native	50	0.5
	Other	39	0.4
AGE	17 and under	-	-
	18-25	454	4.7
	26-34	1,970	20.4
	35-44	1,977	20.5
	45-54	1,604	16.6
	55-64	2,293	23.8
	65+	1,353	14.0
SEXUAL ORIENTATION	Heterosexual	7,820	95.8
	Gay, lesbian, or bisexual	190	2.3
	Unsure/questioning	27	0.3
	Prefer not to state	130	1.6
EDUCATION	Middle school or below	296	3.1
	Some high school	2,012	21.4
	High school completed	5,401	57.4
	Some college or beyond	1,705	18.1
EMPLOYMENT	Employed	2,571	22.9
	Unemployed (seeking)	3,254	29.0
	Unemployed (not seeking)	3,029	27.0
	Not in labor force	2,385	21.2
HOMELESS	Homeless at admission	858	8.8
MENTAL HEALTH ISSUES	Yes	2,362	21.2
	No	8,791	78.8
PHYSICAL HEALTH ISSUES	Yes	1,400	12.7
	No	9,659	87.3
DISABILITY	Yes	1,326	12.4
	No	9,334	87.6
CRIMINAL JUSTICE	Yes	886	7.9
	No	10,313	92.1

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

N ≤ 5 not reported to protect confidentiality.

Annual Overview of Patients in Publicly Funded Substance Use Disorder Treatment Programs in Los Angeles County, FY2021-2022

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PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 3.5.4, the most common reported primary substance use in opioid treatment programs was heroin (72.0%), followed by prescription drug (28.0%).

Table 3.5.4. Primary substance use among patients in opioid treatment programs, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Heroin	8,023	72.0
Prescription drug	3,123	28.0

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

In the last ten fiscal years, the majority of admissions to opioid treatment programs consistently reported heroin as the primary substance use, slightly decreasing from 87.7% in FY1213 to 72.0% in FY2122. The proportion of primary prescription drug admissions increased slightly during the same period from 10.5% in FY1213 to 28.0% in FY2122 (Figure 3.5.2).

Figure 3.5.2. Trends in primary substance use among patients in opioid treatment programs
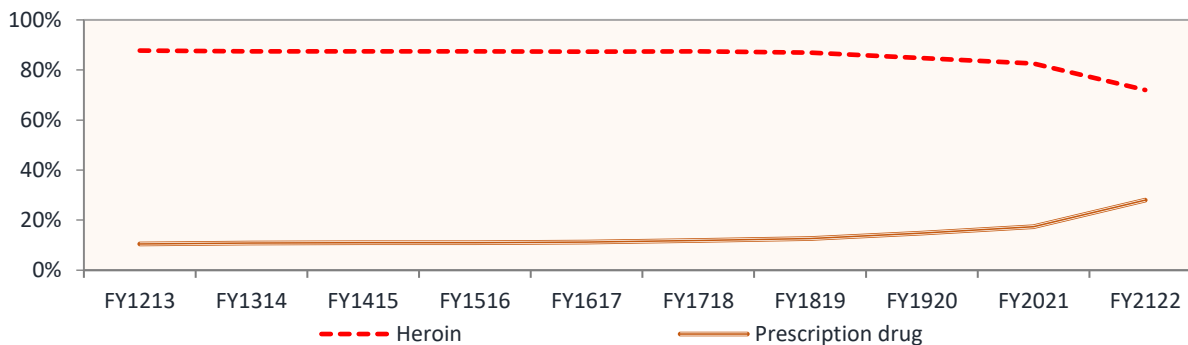
MEDICATIONS UTILIZED IN OTP PROGRAMS

Methadone is the most common medication (94.4%) provided to OTP patients, followed by the Buprenorphine-Naloxone combination (3.1%), Buprenorphine HCL (1.4%), Naltrexone (1.1%), and Naloxone HCL (0.2%) (Figure 3.5.3).

Figure 3.5.3. Medications provided at opioid treatment programs, FY2122

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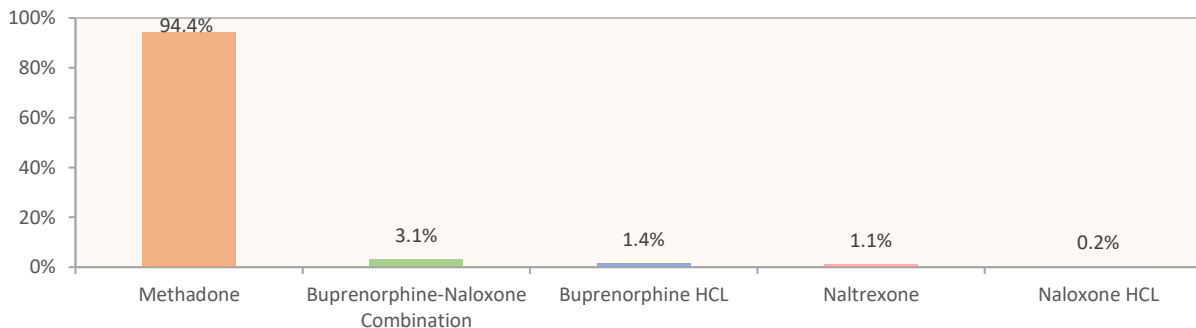
Summary Table 2. Summary statistics of patients in different levels of care, FY2122

Categories	Withdrawal Management Program		Residential Service Program		Intensive Outpatient Program		Outpatient Program		Opioid Treatment Program	
	N	%	N	%	N	%	N	%	N	%
ADMITTED										
Patients	4,372	13.0	11,600	34.4	5,919	17.6	10,904	32.4	9,726	28.9
Admissions	5,700	10.8	15,296	28.9	6,566	12.4	12,150	23.0	11,462	21.7
DISCHARGED										
Patients	4,001	16.9	9,998	42.2	4,695	19.8	8,090	34.2	3,502	14.8
Discharged	5,228	13.9	13,045	34.7	5,156	13.7	8,840	23.5	4,263	11.3
DISCHARGE STATUS										
Positive compliance	3,672	74.0	6,959	56.2	2,327	47.2	3,699	46.8	1,488	38.6
Completed treatment	3,344	67.4	5,591	45.1	1,795	36.4	2,732	34.6	491	12.8
Left – satisfactory progress	328	6.6	1,368	11.0	532	10.8	967	12.2	997	25.9
Negative compliance	1,227	24.7	4,462	36.0	2,055	41.7	3,553	45.0	2,264	58.8
Other (Death/incarceration/other)	63	1.3	967	7.8	550	11.2	651	8.2	98	2.5
GENDER IDENTITY†										
Male	3,164	72.7	7,611	65.7	3,525	59.6	6,572	60.3	6,515	67.0
Female	1,183	27.2	3,902	33.7	2,353	39.8	4,284	39.3	3,197	32.9
Transgender male	-	-	14	0.1	13	0.2	13	0.1	-	-
Transgender female	6	0.1	47	0.4	22	0.4	19	0.2	-	-
Non-conforming or refuse to state	-	-	-	-	-	-	-	-	6	0.1
RACE†										
Latinx	2,150	49.3	6,168	53.6	3,349	56.7	6,793	62.7	4,208	43.8
White	1,578	36.2	2,722	23.6	1,261	21.4	1,902	17.5	4,335	45.1
Black/African American	522	12.0	2,252	19.6	1,072	18.2	1,814	16.7	838	8.7
Asian	57	1.3	179	1.6	119	2.0	203	1.9	132	1.4
Pacific Islander	7	0.2	37	0.3	10	0.2	21	0.2	9	0.1
American Indian/Alaska Native	28	0.6	106	0.9	53	0.9	53	0.5	50	0.5
Other	22	0.5	51	0.4	42	0.7	54	0.5	39	0.4

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(Table Cont'd) Categories	Withdrawal Management Program		Residential Service Program		Intensive Outpatient Program		Outpatient Program		Opioid Treatment Program	
	N	%	N	%	N	%	N	%	N	%
AGE†										
17 and under	-	-	69	0.6	128	2.2	830	7.7	-	-
18-25	431	10.0	1,388	12.1	706	12.0	1,383	12.9	454	4.7
26-34	1,540	35.8	4,508	39.2	2,350	39.9	3,848	35.8	1,970	20.4
35-44	1,105	25.7	3,048	26.5	1,523	25.8	2,694	25.0	1,977	20.5
45-54	706	16.4	1,506	13.1	741	12.6	1,226	11.4	1,604	16.6
55-64	466	10.8	878	7.6	386	6.6	690	6.4	2,293	23.8
65+	47	1.1	101	0.9	58	1.0	84	0.8	1,353	14.0
SEXUAL ORIENTATION†										
Heterosexual	3,997	92.7	10,217	89.6	5,121	88.0	9,816	91.5	7,820	95.8
Gay, lesbian, or bisexual	251	5.8	946	8.3	560	9.6	712	6.6	190	2.3
Unsure/questioning	32	0.7	51	0.4	23	0.4	55	0.5	27	0.3
Prefer not to state	31	0.7	189	1.7	117	2.0	148	1.4	130	1.6
EDUCATION†										
Middle school or below	93	2.2	279	2.5	222	3.8	432	4.2	296	3.1
Some high school	761	17.7	2,925	26.0	1,390	24.1	2,841	27.3	2,012	21.4
High school completed	2,138	49.7	5,362	47.6	2,603	45.1	4,559	43.8	5,401	57.4
Some college or beyond	1,311	30.5	2,689	23.9	1,556	27.0	2,566	24.7	1,705	18.1
EMPLOYMENT										
Employed	390	6.9	487	3.2	1,101	17.0	3,425	29.0	2,571	22.9
Unemployed (seeking)	2,057	36.5	4,816	32.1	3,472	53.5	4,485	38.0	3,254	29.0
Unemployed (not seeking)	3,022	53.7	6,696	44.6	1,000	15.4	1,918	16.2	3,029	27.0
Not in labor force	163	2.9	3,018	20.1	916	14.1	1,976	16.7	2,385	21.2
HOMELESS†										
Homeless at admission	2,155	49.3	7,273	62.7	2,370	40.0	2,666	24.4	858	8.8
PRIMARY SUBSTANCE USE										
Methamphetamine	177	3.1	7,110	47.7	2,742	42.4	4,161	35.2	-	-
Alcohol	2,920	52.0	4,060	27.3	1,952	30.2	3,757	31.7	-	-
Heroin	1,004	17.9	1,006	6.8	372	5.8	496	4.2	8,023	72.0
Marijuana	-	-	830	5.6	720	11.1	2,257	19.1	-	-
Cocaine	18	0.3	771	5.2	304	4.7	466	3.9	-	-
Prescription drug	1,490	26.5	930	6.2	304	4.7	601	5.1	3,123	28.0
Other drugs	11	0.2	190	1.3	70	1.1	98	0.8	-	-

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(Table Cont'd) Categories	Withdrawal Management Program		Residential Service Program		Intensive Outpatient Program		Outpatient Program		Opioid Treatment Program	
	N	%	N	%	N	%	N	%	N	%
MENTAL HEALTH ISSUES										
Yes	4,008	71.1	9,648	64.9	3,755	57.7	5,892	49.6	2,362	21.2
No	1,628	28.9	5,210	35.1	2,751	42.3	5,987	50.4	8,791	78.8
PHYSICAL HEALTH ISSUES										
Yes	863	15.3	2,933	19.8	676	10.5	952	8.1	1,400	12.7
No	4,771	84.7	11,855	80.2	5,734	89.5	10,801	91.9	9,659	87.3
DISABILITY										
Yes	1,463	28.2	2,581	18.7	783	12.6	1,460	12.8	1,326	12.4
No	3,728	71.8	11,206	81.3	5,453	87.4	9,938	87.2	9,334	87.6
CRIMINAL JUSTICE										
Yes	867	15.4	5,063	34.0	1,905	29.3	2,975	25.0	886	7.9
No	4,770	84.6	9,845	66.0	4,590	70.7	8,944	75.0	10,313	92.1

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

† Based on unique patient numbers and percentages.

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Chapter 4

Patient Characteristics by Service Planning Area[1]
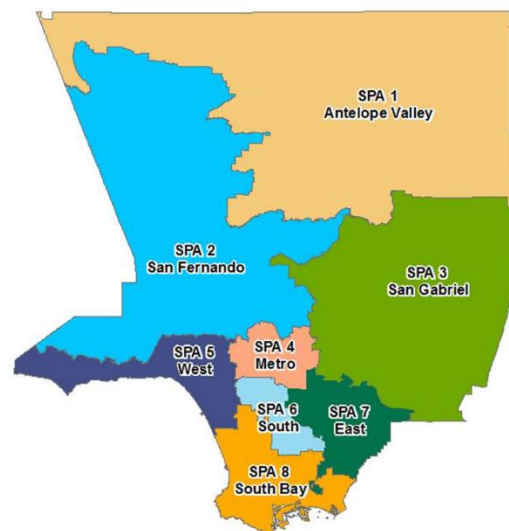
Chapter 4 provides descriptive information for patients from each of the eight **service planning areas (SPAs)**. For each SPA, numbers of patients, admissions and discharges are reported, along with trends in admission levels over the past ten years. Patient discharge status, demographic characteristics, primary substance use, and levels of care by SPA are also described.

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

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Patients from Service Planning Area 1 (SPA 1)

TREATMENT ADMISSIONS AND DISCHARGES

There were 2,332 treatment admissions for 1,752 patients residing in SPA 1, accounting for 4.4% of all admissions (Table 4.1.1).

Table 4.1.1. Treatment admissions and discharges among patients from SPA 1, FY2122

	ADMISSIONS		PATIENTS	
	N	**% of total admissions**	**N**	**% of total patients**
Admitted	2,332	4.4	1,752	5.2
Discharged	1,485	3.9	1,124	4.7

The number and proportion of admissions experienced a steady decline from 2,745 (6.0%) in FY1415 to 1,657 (3.5%) in FY1819, before experiencing an increase to 2,332 (4.4%) in FY2122. The number and proportion of patients showed a similar trend (Figure 4.1.1).

Figure 4.1.1. Trends in admissions and patients from SPA 1

Among SPA 1 patient discharges, 53.2% had positive compliance, with 37.5% completing treatment and 15.7% leaving the program with satisfactory progress (Table 4.1.2).

Table 4.1.2. Discharge status of patients from SPA 1, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**596**	**53.2**
Completed treatment	420	37.5
Left – satisfactory progress	176	15.7
Negative compliance (Left – unsatisfactory progress)	**486**	**43.4**
Other (Death/incarceration/other)	**39**	**3.5**

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

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PATIENT CHARACTERISTICS

The majority of patients residing in SPA 1 were male (56.1%), Latinx (42.3%), ages 26-34 (33.9%), and unemployed (68.4%). Among SPA 1 admissions, 63.0% reported mental health issues, and 21.6% reported criminal justice involvement (Table 4.1.3).

Table 4.1.3. Characteristics of patients from SPA 1, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	983	56.1
	Female	763	43.6
	Transgender male	-	-
	Transgender female	-	-
	Non-conforming or refuse to state	-	-
RACE	Latinx	737	42.3
	White	580	33.3
	Black/African American	400	23.0
	Asian	12	0.7
	Pacific Islander	-	-
	American Indian /Alaska Native	-	-
	Other	9	0.5
AGE	17 and under	45	2.6
	18-25	155	8.9
	26-34	589	33.9
	35-44	458	26.4
	45-54	212	12.2
	55-64	199	11.5
	65+	79	4.5
SEXUAL ORIENTATION	Heterosexual	1,563	94.2
	Gay, lesbian, or bisexual	71	4.3
	Unsure/questioning	6	0.4
	Prefer not to state	19	1.1
EDUCATION	Middle school or below	56	3.3
	Some high school	372	22.2
	High school completed	944	56.4
	Some college or beyond	303	18.1
EMPLOYMENT	Employed	429	19.0
	Unemployed (seeking)	835	36.9
	Unemployed (not seeking)	713	31.5
	Not in labor force	283	12.5
LANGUAGE AT HOME	English	1,906	89.1
	Other Language	234	10.9
MENTAL HEALTH ISSUES	Yes	1,442	63.0
	No	847	37.0
PHYSICAL HEALTH ISSUES	Yes	221	10.0
	No	1,984	90.0
DISABILITY	Disabled at admission	263	12.2
CRIMINAL JUSTICE	Criminal justice involved	495	21.6

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

Annual Overview of Patients in Publicly Funded Substance Use Disorder Treatment Programs in Los Angeles County, FY2021-2022

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PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 4.1.4, the most commonly reported primary substance use was prescription drug (22.3%), followed by heroin (21.8%) and alcohol (21.5%).

Table 4.1.4. Primary substance use among patients from SPA 1, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Prescription drug	495	22.3
Heroin	483	21.8
Alcohol	476	21.5
Methamphetamine	471	21.2
Marijuana	207	9.3
Cocaine	66	3.0
Other drugs	19	0.9

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

From FY1213 to FY1415, marijuana was the primary substance used among admissions. However, starting in FY1516, primary heroin admissions exhibited a continuous increase, making it the most prevalent primary substance used until FY2021. In FY2122, primary prescription drug admissions surpassed heroin, accounting for the highest proportion at 22.3%. Throughout the entire period, methamphetamine consistently ranked as the second most common primary substance, with admissions remaining relatively stable (Figure 4.1.2).

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

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LEVEL OF CARE

As shown in Table 4.1.5, the most common level of care among patients residing in SPA 1 was opioid treatment programs (33.6%), followed by outpatient service programs (31.1%) and residential service programs (14.6%).

Table 4.1.5. Level of care among patients from SPA 1, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**204**	**9.1**
ASAM WM 1	12	0.5
ASAM WM 2	-	-
ASAM WM 3.2	84	3.7
ASAM WM 3.7/4.0	103	4.6
Residential Service	**328**	**14.6**
ASAM 3.1	175	7.8
ASAM 3.3	-	-
ASAM 3.5	152	6.8
Intensive Outpatient (ASAM 2.1)	**219**	**9.7**
Outpatient (ASAM 1.0)	**699**	**31.1**
Opioid Treatment Program (ASAM OTP)	**757**	**33.6**
Recovery Support Service	**43**	**1.9**

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

N ≤ 5 not reported to protect confidentiality.

From FY1213 to FY1718, the outpatient program was the predominant level of care for patients residing in SPA 1. Its proportion varied between 26.4% and 56.6% over the past ten fiscal years, displaying a gradual decline. Notably, admissions to opioid treatment programs witnessed a significant increase from 14.3% in FY1213 to 33.6% in FY2122, surpassing outpatient as the primary level of care starting from FY1819. Meanwhile, the proportion of admissions to residential service programs remained relatively stable throughout the decade, except for a notable spike to 27.6% in FY1718 (Figure 4.1.3).

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

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Patients from Service Planning Area 2 (SPA 2)

TREATMENT ADMISSIONS AND DISCHARGES

There were 7,246 treatment admissions for 5,300 patients residing in SPA 2, accounting for 13.6% of all admissions (Table 4.2.1).

Table 4.2.1. Treatment admissions and discharges among patients from SPA 2, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	7,246	13.6	5,300	15.7
Discharged	4,859	12.9	3,514	14.8

The proportion of admissions decreased from 19.9% in FY1415 to 13.1% in FY1718 then remained relatively stable through FY2122. A similar trend was observed in the proportion of patients. Overall, both the number of admissions and patients exhibited a slight decrease over the past ten fiscal years (Figure 4.2.1).

Figure 4.2.1. Trends in admissions and patients from SPA 2

Among SPA 2 patient discharges, 56.8% had positive compliance, with 42.1% completing treatment and 14.7% leaving the program with satisfactory progress (Table 4.2.2).

Table 4.2.2. Discharge status of patients from SPA 2, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**2,384**	**56.8**
Completed treatment	1,766	42.1
Left – satisfactory progress	618	14.7
Negative compliance (Left – unsatisfactory progress)	**1,614**	**38.5**
Other (Death/incarceration/other)	**198**	**4.7**

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

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PATIENT CHARACTERISTICS

As shown in Table 4.2.3, the majority of patients residing in SPA 2 were male (67.2%), White (46.1%), ages 26-34 (32.9%), and unemployed (65.1%). Among SPA 2 admissions, 48.6% reported mental health issues.

Table 4.2.3. Characteristics of patients from SPA 2, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	3,552	67.2
	Female	1,726	32.6
	Transgender male	-	-
	Transgender female	8	0.2
	Non-conforming or refuse to state	-	-
RACE	Latinx	2,333	44.5
	White	2,420	46.1
	Black/African American	344	6.6
	Asian	91	1.7
	Pacific Islander	-	-
	American Indian /Alaska Native	25	0.5
	Other	30	0.6
AGE	17 and under	184	3.5
	18-25	560	10.7
	26-34	1,719	32.9
	35-44	1,270	24.3
	45-54	689	13.2
	55-64	580	11.1
	65+	215	4.1
SEXUAL ORIENTATION	Heterosexual	4,476	91.7
	Gay, lesbian, or bisexual	278	5.7
	Unsure/questioning	29	0.6
	Prefer not to state	97	2.0
EDUCATION	Middle school or below	137	2.7
	Some high school	965	19.3
	High school completed	2,512	50.2
	Some college or beyond	1,387	27.7
EMPLOYMENT	Employed	1,720	24.7
	Unemployed (seeking)	2,802	40.2
	Unemployed (not seeking)	1,738	24.9
	Not in labor force	709	10.2
LANGUAGE AT HOME	English	5,369	81.9
	Other Language	1,190	18.1
MENTAL HEALTH ISSUES	Yes	3,421	48.6
	No	3,624	51.4
PHYSICAL HEALTH ISSUES	Yes	670	9.8
	No	6,152	90.2
DISABILITY	Disabled at admission	1,047	16.0
CRIMINAL JUSTICE	Criminal justice involved	1,084	15.4

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

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PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 4.2.4, the most common primary substance use was heroin (33.2%), followed by alcohol (26.1%) and methamphetamine (16.5%).

Table 4.2.4. Primary substance use among patients from SPA 2, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Heroin	2,280	33.2
Alcohol	1,797	26.1
Methamphetamine	1,137	16.5
Prescription drug	1,097	16.0
Marijuana	423	6.2
Cocaine	122	1.8
Other drugs	18	0.3

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

Throughout the past ten fiscal years, heroin consistently emerged as the predominant primary substance used among admissions in SPA 2. The proportion of primary heroin admissions displayed a significant increase from 28.5% in FY1213 to 47.2% in FY1617, followed by a decrease to 33.2% in FY2122. The proportion of marijuana admissions exhibited a declining trend during the same period. In recent years, there has been a gradual increase in the proportion of primary alcohol and prescription drug admissions, while the proportion of methamphetamine admissions remained relatively stable (Figure 4.2.2).

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

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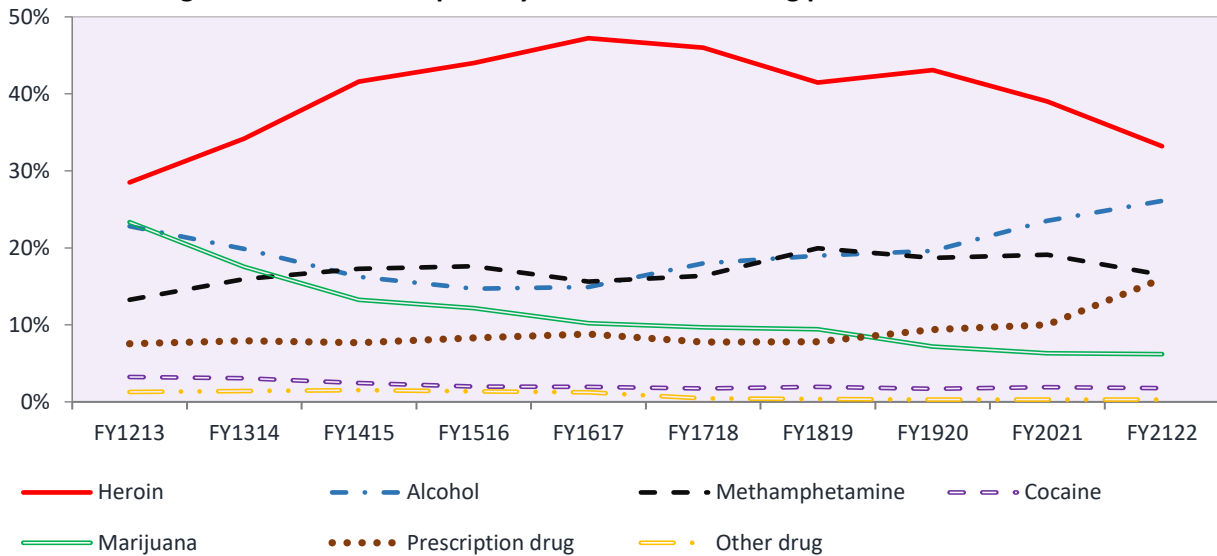
LEVEL OF CARE

As shown in Table 4.2.5, the most common level of care among patients residing in SPA 2 was opioid treatment programs (32.2%), followed by outpatient programs (24.6%) and withdrawal management programs (14.2%).

Table 4.2.5. Level of care among patients from SPA 2, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**1,010**	**14.2**
ASAM WM 1	-	-
ASAM WM 2	27	0.4
ASAM WM 3.2	566	8.0
ASAM WM 3.7/4.0	416	5.8
Residential Service	**965**	**13.6**
ASAM 3.1	401	5.6
ASAM 3.3	-	-
ASAM 3.5	561	7.9
Intensive Outpatient (ASAM 2.1)	**844**	**11.9**
Outpatient (ASAM 1.0)	**1,749**	**24.6**
Opioid Treatment Program (ASAM OTP)	**2,292**	**32.2**
Recovery Support Service	**257**	**3.6**

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

N ≤ 5 not reported to protect confidentiality.

From FY1213 to FY1415, the outpatient program stood as the primary level of care for patients in SPA2. However, a noticeable shift occurred as admissions to opioid treatment programs gradually surpassed outpatient programs from FY1516 to FY2122 (Figure 4.2.3).

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

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Patients from Service Planning Area 3 (SPA 3)

TREATMENT ADMISSIONS AND DISCHARGES

There were 5,972 treatment admissions for 4,688 patients residing in SPA 3, accounting for 11.2% of all admissions (Table 4.3.1).

Table 4.3.1. Treatment admissions and discharges among patients from SPA 3, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	5,972	11.2	4,688	13.9
Discharged	3,831	10.1	2,976	12.5

From FY1213 to FY1617, the number and proportion of admissions in SPA 3 remained stable. However, there was a significant increase in admissions from 5,551 in FY1617 to 8,460 in FY1718, followed by a decrease to 5,444 in FY1819. Subsequently, admissions remained relatively stable through FY2122 (Figure 4.3.1).

Figure 4.3.1. Trends in admissions and patients from SPA 3

Among SPA 3 patient discharges, 46.7% had positive compliance, with 33.3% completing treatment and 13.4% leaving the program with satisfactory progress (Table 4.3.2).

Table 4.3.2. Discharge status of patients from SPA 3, FY2122

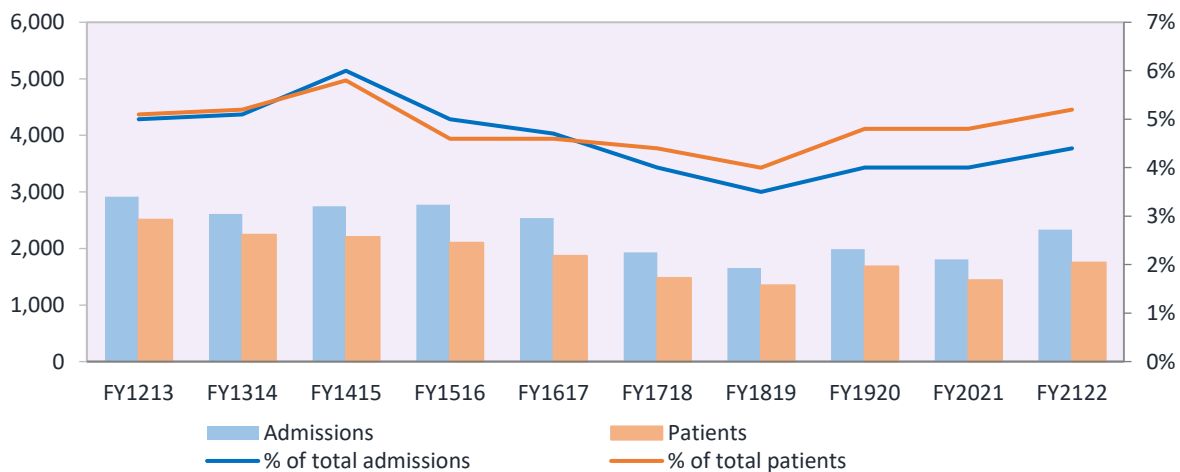| DISCHARGE STATUS	ADMISSIONS	%
Positive Compliance	**1,626**	**46.7**
Completed treatment	1,159	33.3
Left – satisfactory progress	467	13.4
Negative Compliance (Left – unsatisfactory progress)	**1,615**	**46.4**
Other (Death/incarceration/other)	**239**	**6.9**

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

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Treatment Programs in Los Angeles County, FY2021-2022

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PATIENT CHARACTERISTICS

As shown in Table 4.3.3, the majority of patients residing in SPA 3 were male (62.9%), Latinx (63.8%), ages 26-34 (31.4%), and unemployed (59.1%). Among SPA 3 admissions, 34.3% reported mental health issues, and 23.8% were involved in the criminal justice system.

Table 4.3.3. Characteristics of patients from SPA 3, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	2,946	62.9
	Female	1,733	37.0
	Transgender male	-	-
	Transgender female	-	-
	Non-conforming or refuse to state	-	-
RACE	Latinx	2,969	63.8
	White	1,222	26.3
	Black/African American	330	7.1
	Asian	85	1.8
	Pacific Islander	9	0.2
	American Indian /Alaska Native	24	0.5
	Other	12	0.3
AGE	17 and under	178	3.8
	18-25	449	9.7
	26-34	1,454	31.4
	35-44	1,070	23.1
	45-54	654	14.1
	55-64	583	12.6
	65+	240	5.2
SEXUAL ORIENTATION	Heterosexual	4,048	93.6
	Gay, lesbian, or bisexual	217	5.0
	Unsure/questioning	18	0.4
	Prefer not to state	42	1.0
EDUCATION	Middle school or below	132	3.0
	Some high school	1,172	26.3
	High school completed	2,210	49.5
	Some college or beyond	947	21.2
EMPLOYMENT	Employed	1,351	23.3
	Unemployed (seeking)	2,002	34.5
	Unemployed (not seeking)	1,428	24.6
	Not in labor force	1,028	17.7
LANGUAGE AT HOME	English	5,089	94.3
	Other Language	308	5.7
MENTAL HEALTH ISSUES	Yes	1,976	34.3
	No	3,790	65.7
PHYSICAL HEALTH ISSUES	Yes	686	12.0
	No	5,043	88.0
DISABILITY	Disabled at admission	558	10.7
CRIMINAL JUSTICE	Criminal justice involved	1,381	23.8

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

N ≤ 5 not reported to protect confidentiality.

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PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 4.3.4, the most commonly reported primary substance use was heroin (28.7%), followed by methamphetamine (24.1%) and alcohol (22.1%).
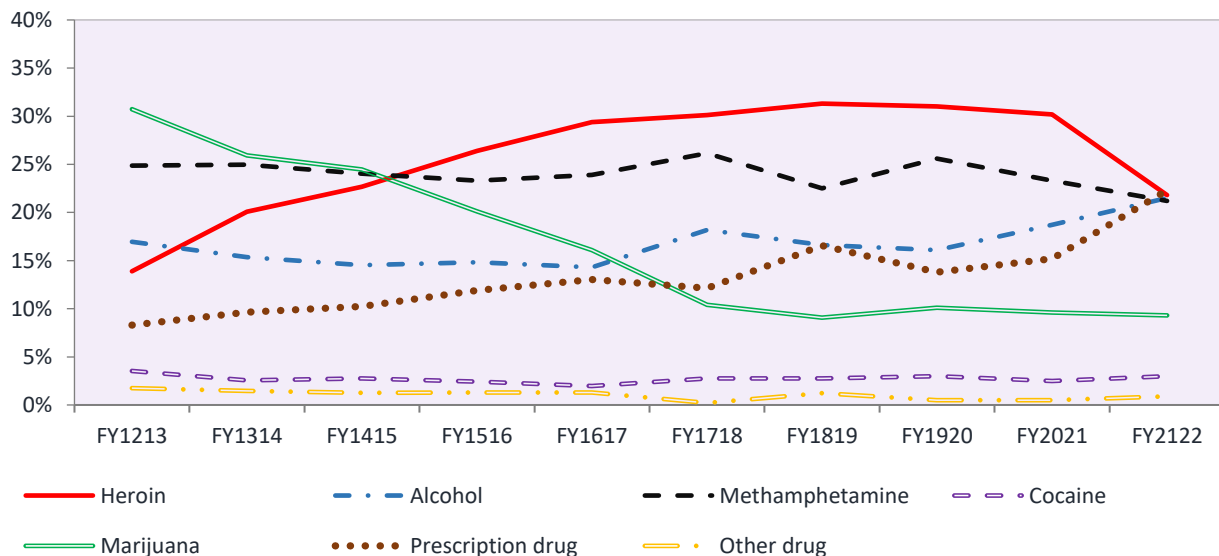
Table 4.3.4. Primary substance use among patients from SPA 3, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Heroin	1,666	28.7
Methamphetamine	1,396	24.1
Alcohol	1,282	22.1
Prescription drug	804	13.9
Marijuana	511	8.8
Cocaine	116	2.0
Other drugs	23	0.4

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

The proportion of primary heroin admissions increased continuously from 31.9% in FY1213 to 43.7% in FY1617, then decreased to 28.7% in FY2122. From FY1213 to FY1718 and again in FY2122, heroin was the most common primary substance use among patients residing in SPA 3. From FY1819 to FY2021, methamphetamine surpassed heroin and became slightly more commonly reported (Figure 4.3.2).

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

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LEVEL OF CARE

As shown in Table 4.3.5, the most common level of care among patients residing in SPA 3 was opioid treatment programs (32.2%), followed by outpatient programs (27.8%) and residential service programs (19.1%).
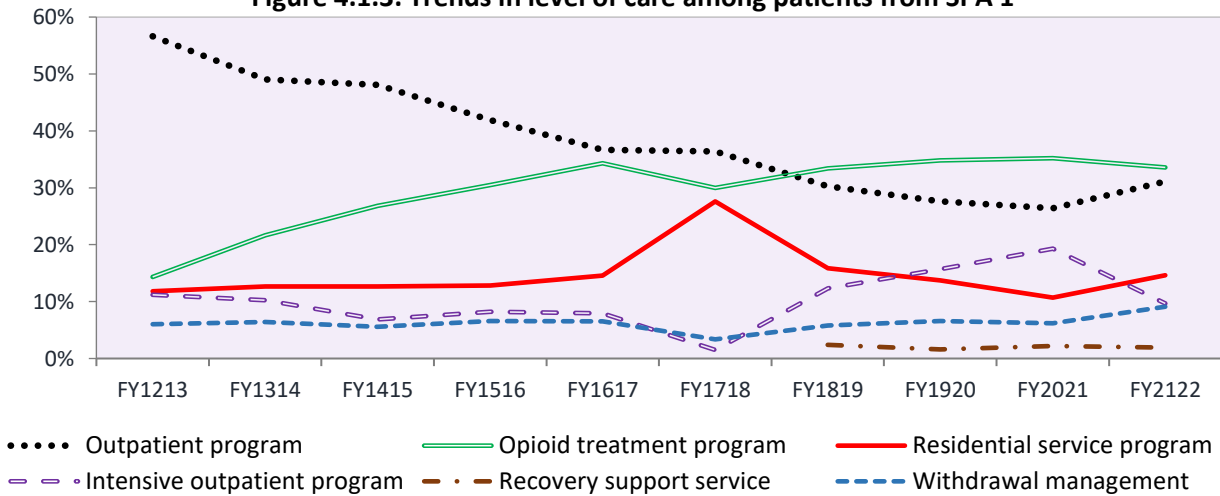
Table 4.3.5. Level of care among patients from SPA 3, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**537**	**9.0**
ASAM WM 2	7	0.1
ASAM WM 3.2	429	7.2
ASAM WM 3.7/4.0	101	1.7
Residential Service	**1,139**	**19.1**
ASAM 3.1	525	8.8
ASAM 3.3	11	0.2
ASAM 3.5	603	10.1
Intensive Outpatient (ASAM 2.1)	**448**	**7.5**
Outpatient (ASAM 1.0)	**1,655**	**27.8**
Opioid Treatment Program (ASAM OTP)	**1,920**	**32.2**
Recovery Support Service	**258**	**4.3**

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

The outpatient program and opioid treatment program have alternated as the most common levels of care over the past ten fiscal years. In FY2122, the majority of admissions (32.2%) were to the opioid treatment programs. However, there has been a consistent decrease in admissions to the outpatient programs over time. The proportion of admission to the residential service programs remained stable from FY1213 to FY1617 then increased slightly from FY1617 to FY2122 (Figure 4.3.3).

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

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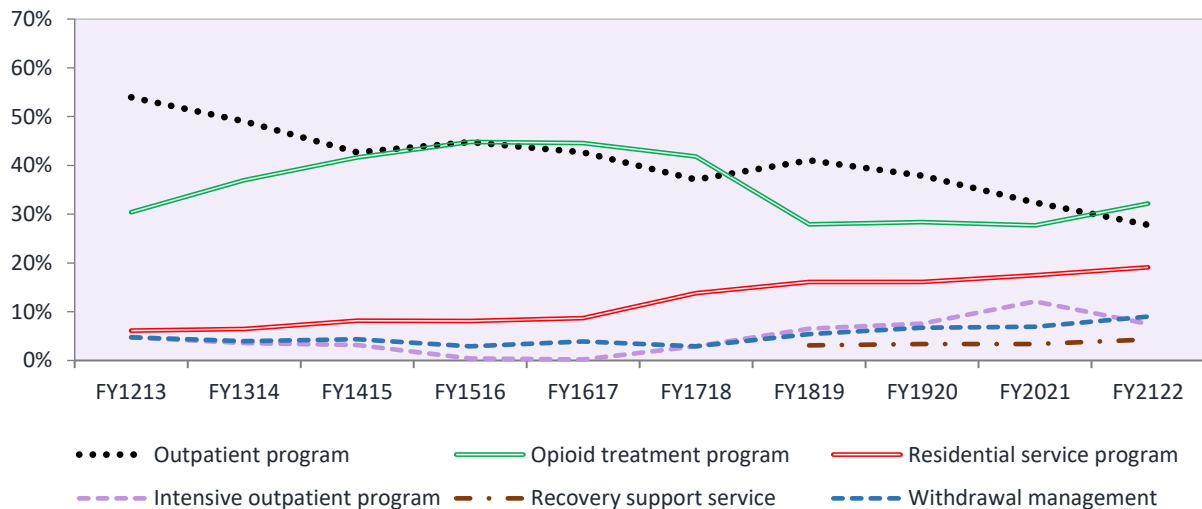
Patients from Service Planning Area 4 (SPA 4)

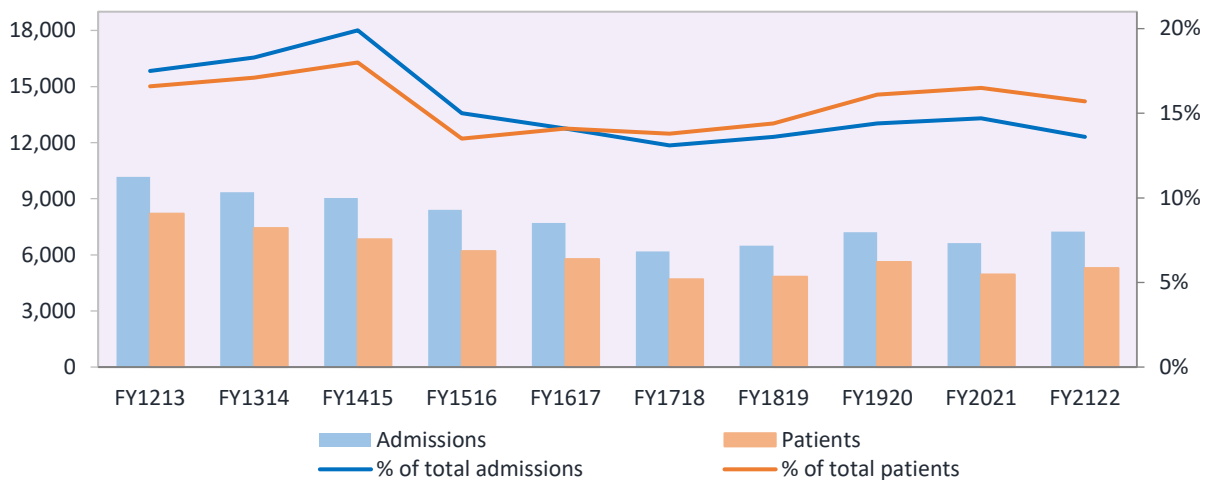## TREATMENT ADMISSIONS AND DISCHARGES

There were 4,137 treatment admissions for 3,297 patients residing in SPA 4, accounting for 7.7% of all admissions (Table 4.4.1).

Table 4.4.1. Treatment admissions and discharges among patients from SPA 4, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	4,137	7.7	3,297	9.8
Discharged	2,659	7.0	2,112	8.9

Both the number and proportion of admissions remained relatively stable from FY1213 to FY1415. The proportion of admissions decreased noticeably from 14.0% in FY1415 to 7.7% in FY2122 (Figure 4.4.1).

Figure 4.4.1. Trends in admissions and patients from SPA 4

Among SPA 4 patient discharges, 48.5% had positive compliance, with 34.8% completing treatment and 13.8% leaving the program with satisfactory progress (Table 4.4.2).

Table 4.4.2. Discharge status of patients from SPA 4, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**1,163**	**48.5**
Completed treatment	833	34.8
Left – satisfactory progress	330	13.8
Negative compliance (Left – unsatisfactory progress)	**978**	**40.8**
Other (Death/incarceration/other)	**256**	**10.7**

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

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PATIENT CHARACTERISTICS

As shown in Table 4.4.3, the majority of patients residing in SPA 4 were male (64.5%), Latinx (57.5%), ages 26-34 (29.2%), and unemployed (59.4%). Among SPA 4 admissions, 44.3% reported mental health issues.

Table 4.4.3. Characteristics of patients from SPA 4, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	2,127	64.5
	Female	1,157	35.1
	Transgender male	-	-
	Transgender female	6	0.2
	Non-conforming or refuse to state	-	-
RACE	Latinx	1,869	57.5
	White	819	25.2
	Black/African American	459	14.1
	Asian	74	2.3
	Pacific Islander	-	-
	American Indian /Alaska Native	15	0.5
	Other	14	0.4
AGE	17 and under	87	2.7
	18-25	293	9.1
	26-34	940	29.2
	35-44	754	23.4
	45-54	479	14.9
	55-64	466	14.5
	65+	198	6.2
SEXUAL ORIENTATION	Heterosexual	2,646	88.5
	Gay, lesbian, or bisexual	277	9.3
	Unsure/questioning	18	0.6
	Prefer not to state	50	1.7
EDUCATION	Middle school or below	185	6.0
	Some high school	786	25.6
	High school completed	1,348	43.9
	Some college or beyond	750	24.4
EMPLOYMENT	Employed	850	21.5
	Unemployed (seeking)	1,213	30.6
	Unemployed (not seeking)	1,140	28.8
	Not in labor force	757	19.1
LANGUAGE AT HOME	English	3,198	87.8
	Other Language	445	12.2
MENTAL HEALTH ISSUES	Yes	1,732	44.3
	No	2,174	55.7
PHYSICAL HEALTH ISSUES	Yes	473	12.2
	No	3,390	87.8
DISABILITY	Disabled at admission	520	14.7
CRIMINAL JUSTICE	Criminal justice involved	667	17.0

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

N ≤ 5 not reported to protect confidentiality.

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PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 4.4.4, the most common primary substance use among patients residing in SPA 4 was heroin (25.6%), followed by methamphetamine (25.4%) and alcohol (24.6%).

Table 4.4.4. Primary substance use among patients from SPA 4, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Heroin	1,003	25.6
Methamphetamine	993	25.4
Alcohol	964	24.6
Prescription drug	465	11.9
Marijuana	333	8.5
Cocaine	132	3.4
Other drugs	27	0.7

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

The proportion of primary heroin admissions increased rapidly from 31.2% in FY1213 to 55.0% in FY1617 and decreased to 25.6% in FY2122. Heroin was the leading primary substance use for nine of the past ten fiscal years, with methamphetamine surpassing it slightly in FY2021. The proportions of methamphetamine and alcohol admissions increased steadily in recent years (Figure 4.4.2).

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

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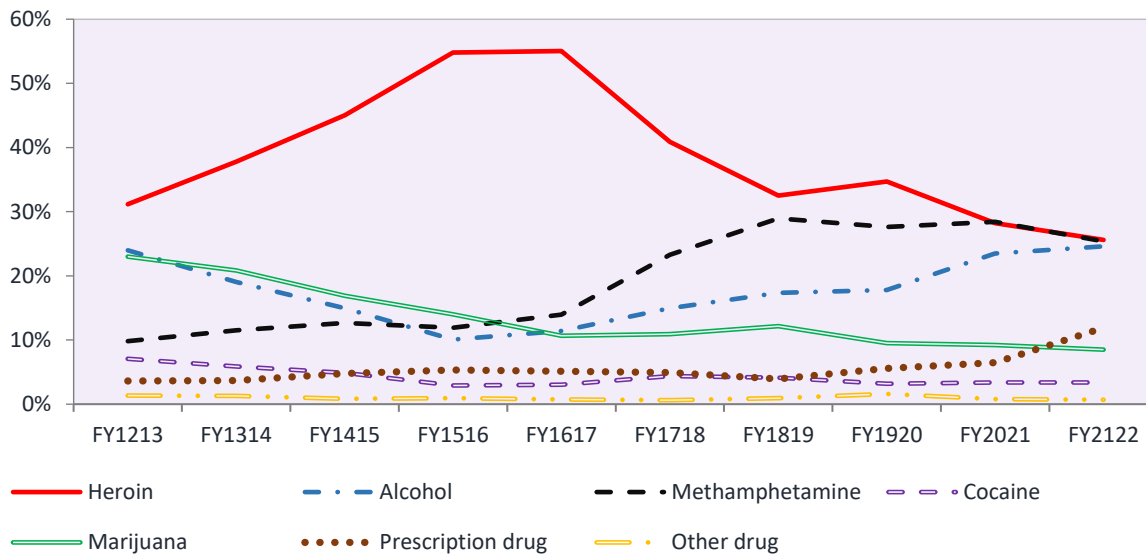
LEVEL OF CARE

As shown in Table 4.4.5, the most common level of care among patients residing in SPA 4 was opioid treatment programs (28.9%), followed by outpatient programs (26.8%) and residential service programs (21.4%).

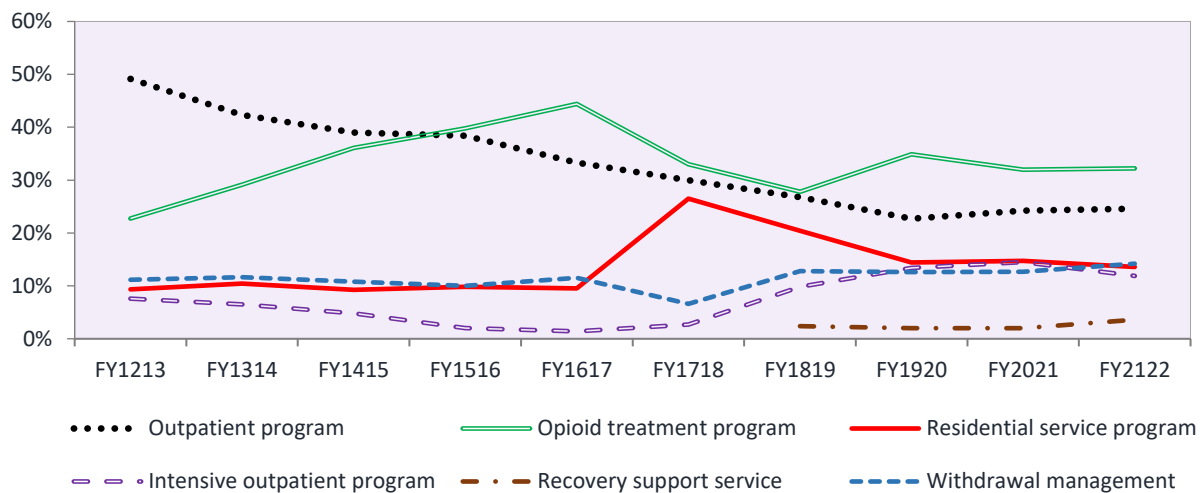**Table 4.4.5. Level of care among patients from SPA 4, FY2122**

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**240**	**5.8**
ASAM WM 2	-	-
ASAM WM 3.2	154	3.7
ASAM WM 3.7/4.0	81	2.0
Residential Service	**884**	**21.4**
ASAM 3.1	387	9.4
ASAM 3.3	6	0.1
ASAM 3.5	491	11.9
Intensive Outpatient (ASAM 2.1)	**536**	**13.0**
Outpatient (ASAM 1.0)	**1,106**	**26.8**
Opioid Treatment Program (ASAM OTP)	**1,191**	**28.9**
Recovery Support Service	**165**	**4.0**

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

N ≤ 5 not reported to protect confidentiality.

The outpatient program and opioid treatment program have alternated as the most common levels of care over the past ten fiscal years. However, there has been a decrease trend in admissions to the outpatient programs over time. The proportion of admission to the residential service programs increased from 7.7% in FY1617 to 21.4% in FY2122 (Figure 4.4.3).

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

Annual Overview of Patients in Publicly Funded Substance Use Disorder Treatment Programs in Los Angeles County, FY2021-2022

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Patients from Service Planning Area 5 (SPA 5)
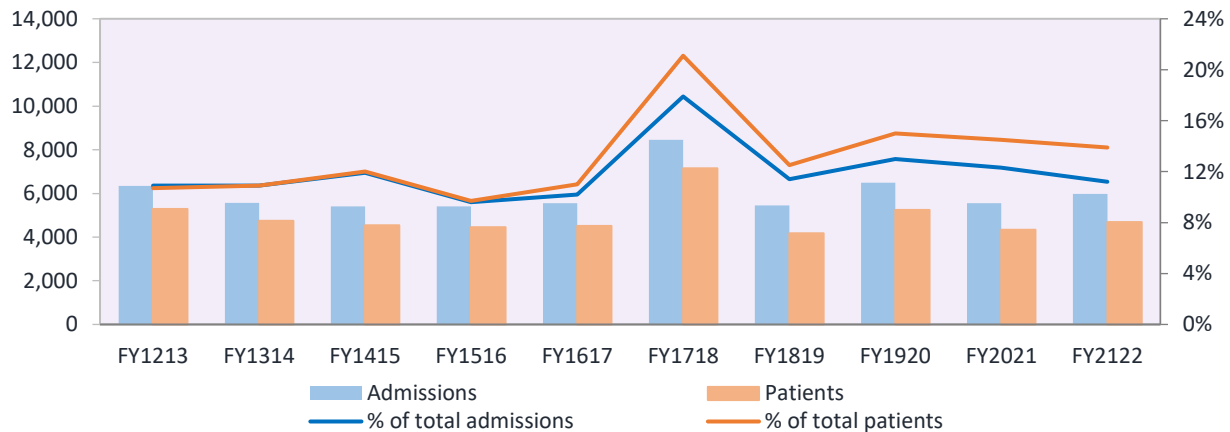
TREATMENT ADMISSIONS AND DISCHARGES

There were 1,013 treatment admissions for 780 patients residing in SPA 5, accounting for 1.9% of all admissions (Table 4.5.1).

Table 4.5.1. Treatment admissions and discharges among patients from SPA 5, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	1,013	1.9	780	2.3
Discharged	645	1.7	472	2.0

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

Figure 4.5.1. Trends in admissions and patients from SPA 5

Among SPA 5 patient discharges, 60.4% had positive compliance, with 46.3% completing treatment and 14.1% leaving the program with satisfactory progress (Table 4.5.2).

Table 4.5.2. Discharge status of patients from SPA 5, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**359**	**60.4**
Completed treatment	275	46.3
Left – satisfactory progress	84	14.1
Negative compliance (Left – unsatisfactory progress)	**199**	**33.5**
Other (Death/incarceration/other)	**36**	**6.1**

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

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PATIENT CHARACTERISTICS

As shown in Table 4.5.3, the majority of patients residing in SPA 5 were male (64.8%), White (57.4%), ages 26-34 (27.2%), and unemployed (57.0%). Among SPA 5 admissions, 48.7% reported mental health issues, and 17.3% reported physical health issues.

Table 4.5.3. Characteristics of patients from SPA 5, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	505	64.8
	Female	273	35.0
	Transgender male	-	-
	Transgender female	-	-
	Non-conforming or refuse to state	-	-
RACE	Latinx	208	26.8
	White	445	57.4
	Black/African American	92	11.9
	Asian	18	2.3
	Pacific Islander	-	-
	American Indian /Alaska Native	-	-
	Other	6	0.8
AGE	17 and under	6	0.8
	18-25	70	9.1
	26-34	209	27.2
	35-44	176	22.9
	45-54	112	14.6
	55-64	122	15.9
	65+	73	9.5
SEXUAL ORIENTATION	Heterosexual	668	91.1
	Gay, lesbian, or bisexual	48	6.5
	Unsure/questioning	-	-
	Prefer not to state	15	2.0
EDUCATION	Middle school or below	15	2.0
	Some high school	89	11.9
	High school completed	327	43.7
	Some college or beyond	318	42.5
EMPLOYMENT	Employed	239	24.1
	Unemployed (seeking)	317	32.0
	Unemployed (not seeking)	248	25.0
	Not in labor force	187	18.9
LANGUAGE AT HOME	English	914	95.4
	Other Language	44	4.6
MENTAL HEALTH ISSUES	Yes	477	48.7
	No	503	51.3
PHYSICAL HEALTH ISSUES	Yes	168	17.3
	No	802	82.7
DISABILITY	Disabled at admission	126	13.9
CRIMINAL JUSTICE	Criminal justice involved	105	10.7

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

N ≤ 5 not reported to protect confidentiality.

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PRIMARY SUBSTANCE USE AT ADMISSION

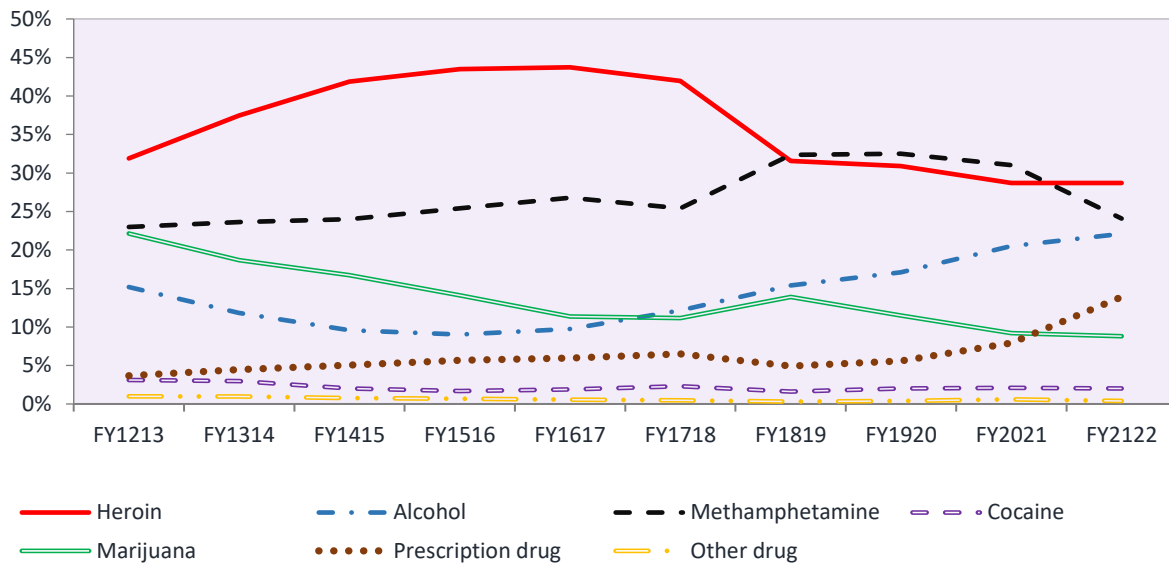As shown in Table 4.5.4, the most commonly reported primary substance use was heroin (30.7%), followed by alcohol (27.9%) and prescription drug (22.5%).

Table 4.5.4. Primary substance use among patients from SPA 5, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Heroin	301	30.7
Alcohol	274	27.9
Prescription drug	221	22.5
Methamphetamine	109	11.1
Marijuana	49	5.0
Cocaine	20	2.0
Other drugs	8	0.8

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

The proportion of primary heroin admissions residing in SPA 5 increased from 43.1% in FY1213 to 62.4% in FY1516, and then decreased to 30.7% in FY2122. Heroin was the leading primary substance use for all ten fiscal years. The proportion of primary alcohol admissions increased markedly since FY1617, and the proportion of primary prescription drug admissions has been rising since FY2021 (Figure 4.5.2).

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

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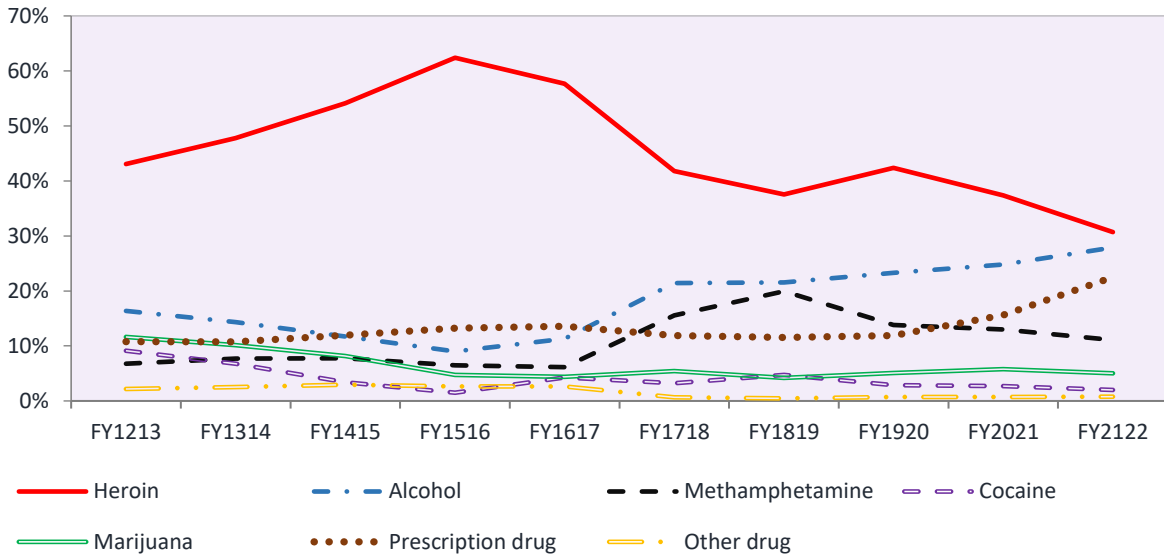
LEVEL OF CARE

As shown in Table 4.5.5, the most common level of care among patients residing in SPA 5 was opioid treatment programs (37.3%), followed by residential service programs (20.4%) and outpatient programs (15.9%).

Table 4.5.5. Level of care for among patients from SPA 5, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**125**	**12.4**
ASAM WM 2	-	-
ASAM WM 3.2	91	9.0
ASAM WM 3.7/4.0	33	3.3
Residential Service	**206**	**20.4**
ASAM 3.1	138	13.7
ASAM 3.3	-	-
ASAM 3.5	67	6.6
Intensive Outpatient (ASAM 2.1)	**110**	**10.9**
Outpatient (ASAM 1.0)	**161**	**15.9**
Opioid Treatment Program (ASAM OTP)	**377**	**37.3**
Recovery Support Service	**31**	**3.1**

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

Over the past ten fiscal years, the opioid treatment program remained the most common level of care for admissions among patients residing in SPA 5. The proportion of admissions to opioid treatment programs increased from 48.4% in FY1213 to 71.1% in FY1516, decreased to 29.8% in FY1819, and went back up to 37.3% in FY2122. The proportion of admissions to outpatient programs showed an overall decreasing trend, while the proportion of admissions to residential service programs increased from 7.3% in FY1617 to 20.4% in FY2122 (Figure 4.5.3).

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

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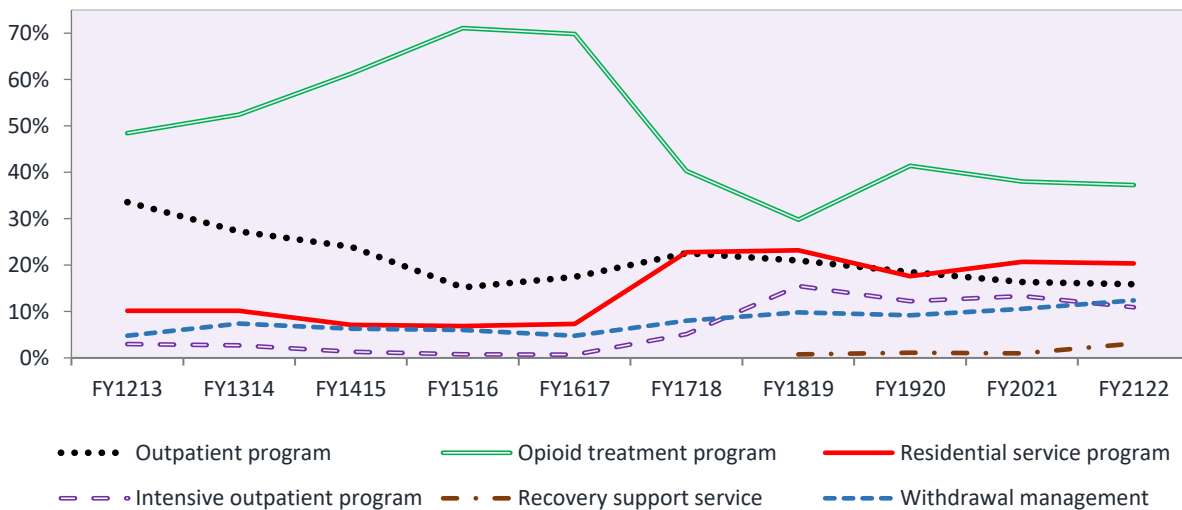
Patients from Service Planning Area 6 (SPA 6)
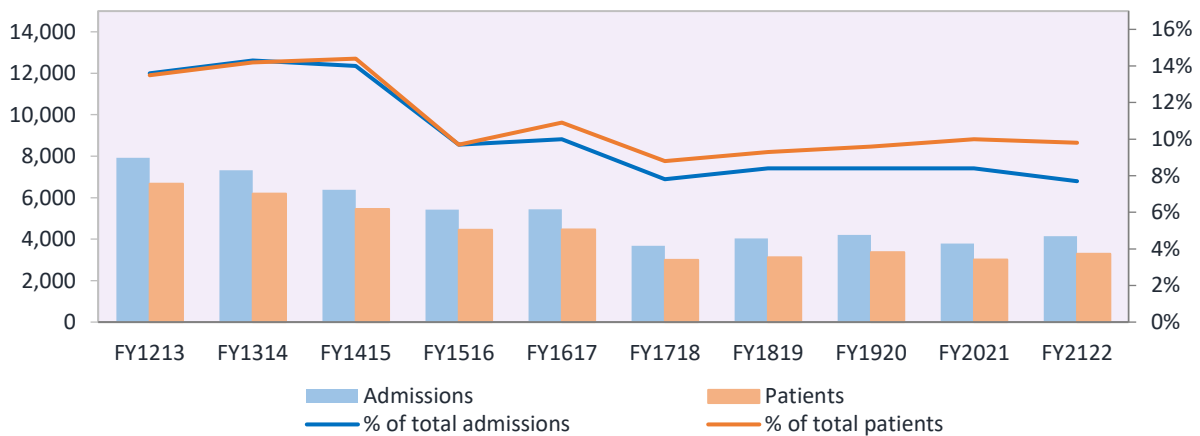
TREATMENT ADMISSIONS AND DISCHARGES

There were 4,419 treatment admissions for 3,497 patients residing in SPA 6, accounting 8.3% of all admissions (Table 4.6.1).

Table 4.6.1. Treatment admissions and discharges among patients from SPA 6, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	4,419	8.3	3,497	10.4
Discharged	2,996	7.9	2,422	10.2

The number and proportion of admissions decreased from 12,909 (22.2%) in FY1213 to 4,419 (8.3%) in FY2122 (Figure 4.6.1).

Figure 4.6.1. Trends in admissions and patients from SPA 6

Among SPA 6 patient discharges, 45.6% had positive compliance, with 33.8% completing treatment and 11.8% leaving the program with satisfactory progress (Table 4.6.2).

Table 4.6.2. Discharge status of patients from SPA 6, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**1,236**	**45.6**
Completed treatment	916	33.8
Left – satisfactory progress	320	11.8
Negative compliance (Left – unsatisfactory progress)	**1,248**	**46.1**
Other (Death/incarceration/other)	**224**	**8.3**

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

Annual Overview of Patients in Publicly Funded Substance Use Disorder Treatment Programs in Los Angeles County, FY2021-2022

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PATIENT CHARACTERISTICS

As shown in Table 4.6.3, the majority of patients residing in SPA 6 were male (57.4%), Latinx (52.3%), ages 26-34 (31.6%), and unemployed (54.2%). Among SPA 6 admissions, 44.9% reported mental health issues, 23.2% reported criminal justice involvement, and 17.7% reported a disability.

Table 4.6.3. Characteristics of patients from SPA 6, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	2,006	57.4
	Female	1,479	42.3
	Transgender male	-	-
	Transgender female	8	0.2
	Non-conforming or refuse to state	-	-
RACE	Latinx	1,814	52.3
	White	387	11.2
	Black/African American	1,184	34.1
	Asian	35	1.0
	Pacific Islander	-	-
	American Indian / Alaska Native	21	0.6
	Other	24	0.7
AGE	17 and under	212	6.1
	18-25	411	11.9
	26-34	1,093	31.6
	35-44	756	21.9
	45-54	408	11.8
	55-64	361	10.4
	65+	216	6.2
SEXUAL ORIENTATION	Heterosexual	3,095	92.8
	Gay, lesbian, or bisexual	171	5.1
	Unsure/questioning	13	0.4
	Prefer not to state	56	1.7
EDUCATION	Middle school or below	147	4.4
	Some high school	999	30.0
	High school completed	1,582	47.5
	Some college or beyond	606	18.2
EMPLOYMENT	Employed	864	20.1
	Unemployed (seeking)	1,196	27.9
	Unemployed (not seeking)	1,130	26.3
	Not in labor force	1,100	25.6
LANGUAGE AT HOME	English	3,586	90.2
	Other Language	388	9.8
MENTAL HEALTH ISSUES	Yes	1,923	44.9
	No	2,361	55.1
PHYSICAL HEALTH ISSUES	Yes	495	11.7
	No	3,744	88.3
DISABILITY	Disabled at admission	677	17.7
CRIMINAL JUSTICE	Criminal justice involved	993	23.2

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

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PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 4.6.4, the most commonly reported primary substance use was methamphetamine (30.3%), followed by alcohol (22.7%) and marijuana (16.3%).

Table 4.6.4. Primary substance use among patients from SPA 6, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Methamphetamine	1,295	30.3
Alcohol	969	22.7
Marijuana	697	16.3
Heroin	662	15.5
Prescription drug	404	9.5
Cocaine	197	4.6
Other drugs	49	1.1

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

From FY1213 to FY1415, marijuana was the predominant primary substance reported, although its proportion steadily declined over the past decade. In FY1516 and FY1617, primary heroin admissions experienced a significant surge, surpassing marijuana as the most prevalent primary substance use. Conversely, primary methamphetamine admissions exhibited an overall increasing trend over the last ten fiscal years. Starting from FY1718, methamphetamine surpassed heroin as the leading primary substance use among patients in SPA 6 (Figure 4.6.2).

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

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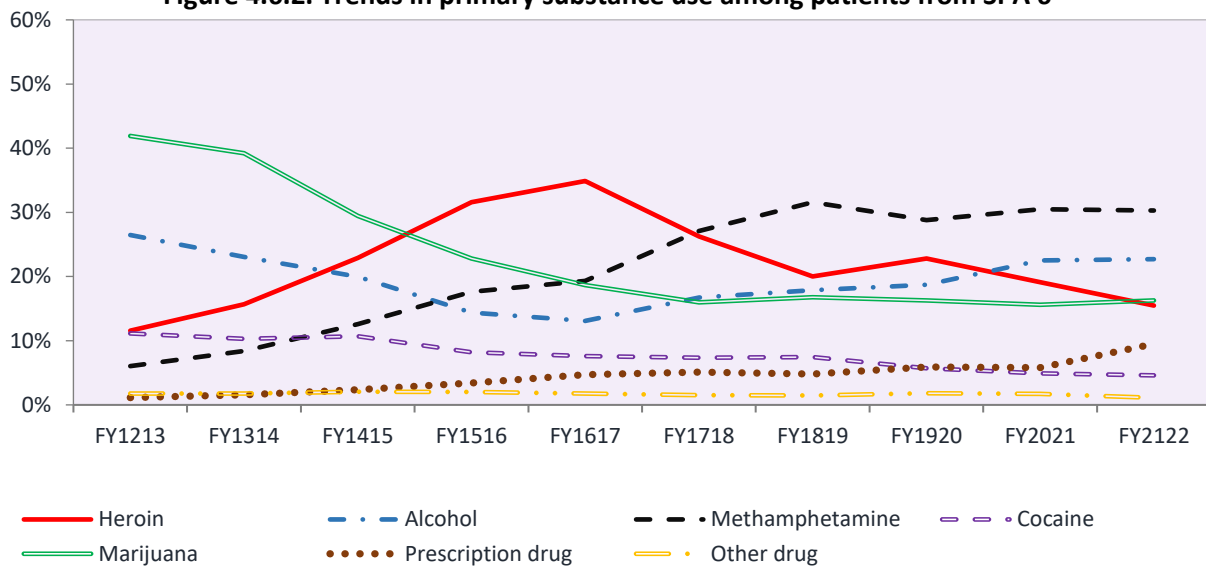
LEVEL OF CARE

As shown in Table 4.6.5, the most common level of care among patients residing in SPA 6 was outpatient programs (34.1%), followed by opioid treatment programs (19.8%) and residential service programs (19.0%).
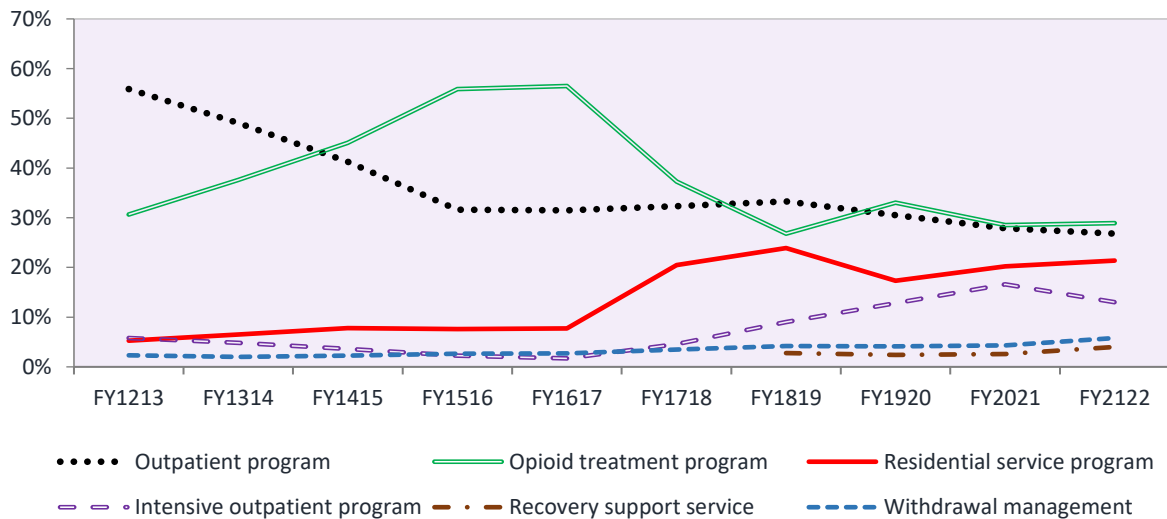
Table 4.6.5. Level of care among patients from SPA 6, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**216**	**4.9**
ASAM WM 2	6	0.1
ASAM WM 3.2	122	2.8
ASAM WM 3.7/4.0	88	2.0
Residential Service	**834**	**19.0**
ASAM 3.1	419	9.6
ASAM 3.3	6	0.1
ASAM 3.5	409	9.3
Intensive Outpatient (ASAM 2.1)	**689**	**15.7**
Outpatient (ASAM 1.0)	**1,495**	**34.1**
Opioid Treatment Program (ASAM OTP)	**868**	**19.8**
Recovery Support Service	**282**	**6.4**

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

Throughout the past ten fiscal years, outpatient program consistently maintained the position as the prevailing level of care for patients in SPA 6. However, the proportion of admissions to outpatient programs displayed a continuous decline, decreasing from 65.3% in FY1213 to 34.1% in FY2122. In contrast, admissions to opioid treatment programs witnessed a rapid increase from 11.3% in FY1213 to 37.8% in FY1617, followed by a subsequent decrease to 19.8% in FY2122 (Figure 4.6.3).

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

Annual Overview of Patients in Publicly Funded Substance Use Disorder Treatment Programs in Los Angeles County, FY2021-2022

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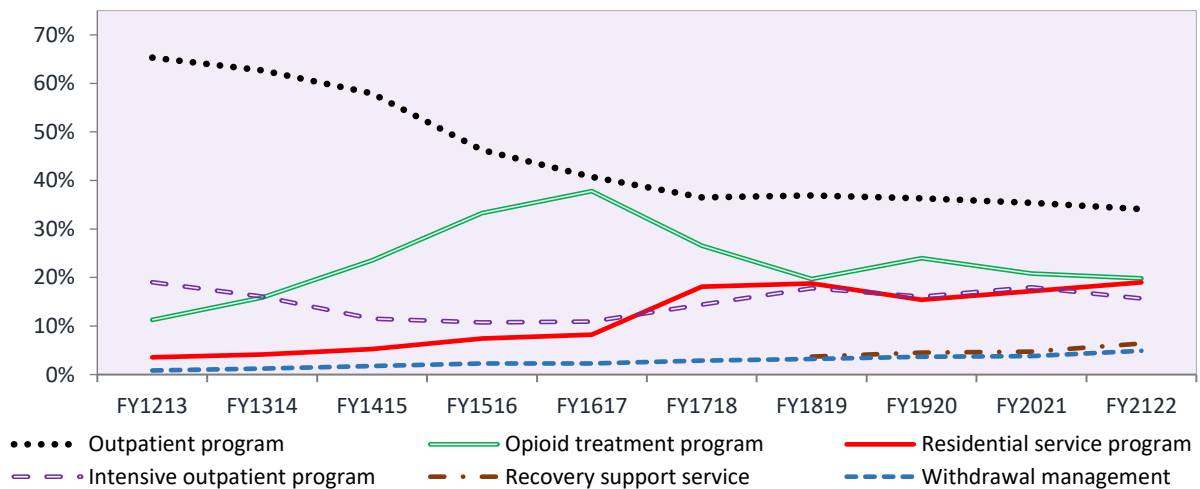
Patients from Service Planning Area 7 (SPA 7)
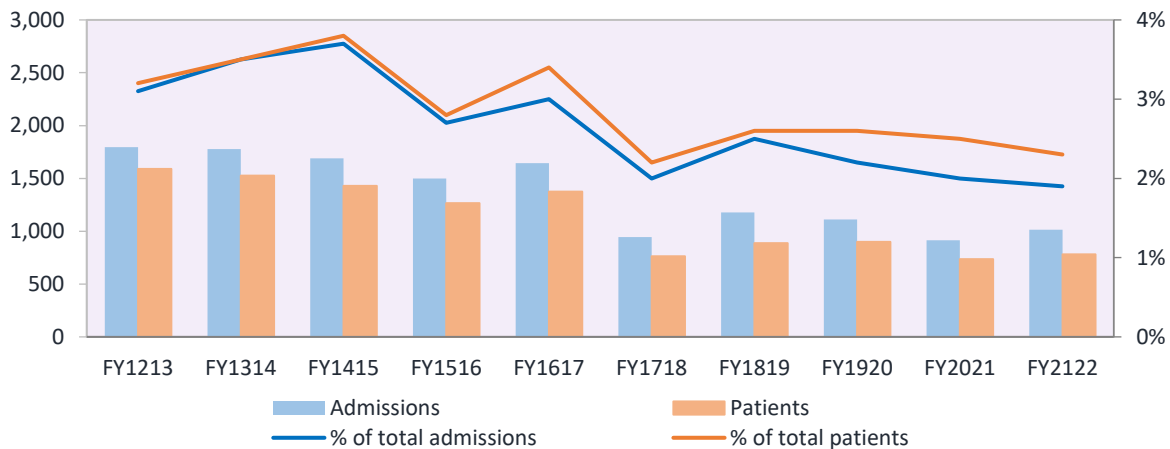
TREATMENT ADMISSIONS AND DISCHARGES

There were 4,126 treatment admissions for 3,200 patients residing in SPA 7, accounting for 7.7% of all admissions (Table 4.7.1).

Table 4.7.1. Treatment admissions and discharges among patients from SPA 7, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	4,126	7.7	3,200	9.5
Discharged	2,697	7.1	2,069	8.7

The number and proportion of admissions revealed an overall decreasing trend over the past ten fiscal years from 7,116 (12.2%) in FY1213 to 4,126 (7.7%) in FY2122, with some fluctuations in between (Figure 4.7.1).

Figure 4.7.1. Trends in admissions and patients from SPA 7
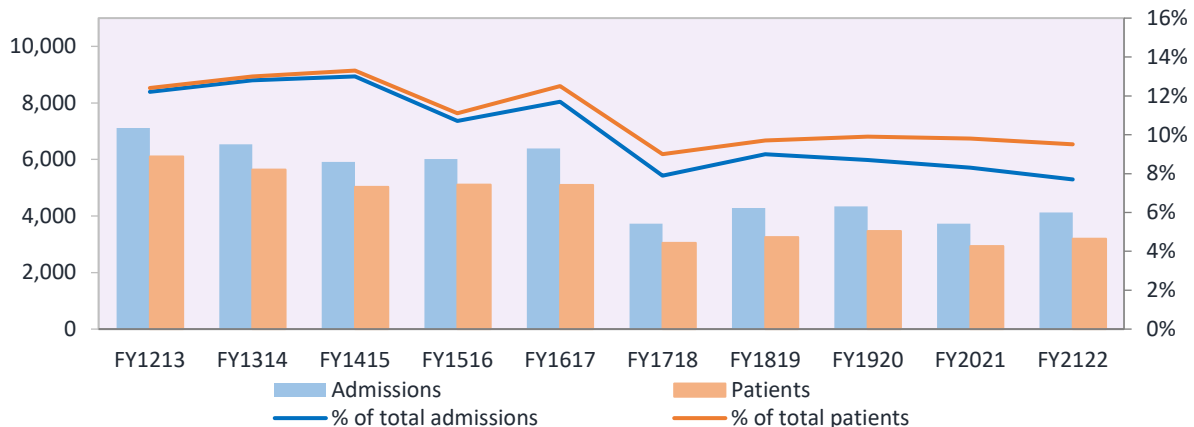
Among SPA 7 patient discharges, 49.3% had positive compliance, with 35.8% completing treatment and 13.5% leaving the program with satisfactory progress (Table 4.7.2).

Table 4.7.2. Discharge status of patients from SPA 7, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**1,164**	**49.3**
Completed treatment	845	35.8
Left – satisfactory progress	319	13.5
Negative compliance (Left – unsatisfactory progress)	**1,030**	**43.6**
Other (Death/incarceration/other)	**166**	**7.0**

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

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PATIENTS CHARACTERISTICS

As shown in Table 4.7.3, the majority of patients residing in SPA 7 were male (62.5%), Latinx (79.4%), ages 26-34 (30.3%), and unemployed (55.6%). Among SPA 7 admissions, 33.9% reported mental health issues, and 22.6% reported criminal justice involvement.

Table 4.7.3. Characteristics of patients from SPA 7, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER	Male	2,000	62.5
	Female	1,183	37.0
	Transgender male	-	-
	Transgender female	9	0.3
	Non-conforming or refuse to state	-	-
RACE	Latinx	2,511	79.4
	White	461	14.6
	Black/African American	128	4.0
	Asian	35	1.1
	Pacific Islander	-	-
	American Indian / Alaska Native	17	0.5
	Other	7	0.2
AGE	17 and under	160	5.1
	18-25	349	11.0
	26-34	959	30.3
	35-44	686	21.7
	45-54	409	12.9
	55-64	409	12.9
	65+	190	6.0
SEXUAL ORIENTATION	Heterosexual	2,840	93.6
	Gay, lesbian, or bisexual	132	4.3
	Unsure/questioning	7	0.2
	Prefer not to state	56	1.8
EDUCATION	Middle school or below	115	3.7
	Some high school	831	27.1
	High school completed	1,572	51.2
	Some college or beyond	550	17.9
EMPLOYMENT	Employed	997	24.9
	Unemployed (seeking)	1,202	30.0
	Unemployed (not seeking)	1,026	25.6
	Not in labor force	784	19.6
LANGUAGE AT HOME	English	3,362	92.1
	Other Language	287	7.9
MENTAL HEALTH ISSUES	Yes	1,337	33.9
	No	2,605	66.1
PHYSICAL HEALTH ISSUES	Yes	484	12.4
	No	3,412	87.6
DISABILITY	Disabled at admission	424	11.9
CRIMINAL JUSTICE	Criminal justice involved	898	22.6

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

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PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 4.7.4, the most common primary substance use among patients residing in SPA 7 was heroin (25.9%), followed by methamphetamine (25.6%) and alcohol (22.4%).

Table 4.7.4. Primary substance use among patients from SPA 7, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Heroin	1,029	25.9
Methamphetamine	1,015	25.6
Alcohol	889	22.4
Prescription drug	488	12.3
Marijuana	440	11.1
Cocaine	84	2.1
Other drugs	21	0.5

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

From FY1213 to FY1617, there was a significant increase in the proportion of primary heroin admissions, followed by a subsequent decrease until FY2122. Throughout FY1314 to FY1920 and again in FY2122, heroin remained the predominant primary substance among patients residing in SPA 7. Conversely, the proportion of primary methamphetamine admissions demonstrated a steady rise over the past ten fiscal years and surpassed heroin as the most common primary substance in FY2021 (Figure 4.7.2).

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

Annual Overview of Patients in Publicly Funded Substance Use Disorder Treatment Programs in Los Angeles County, FY2021-2022

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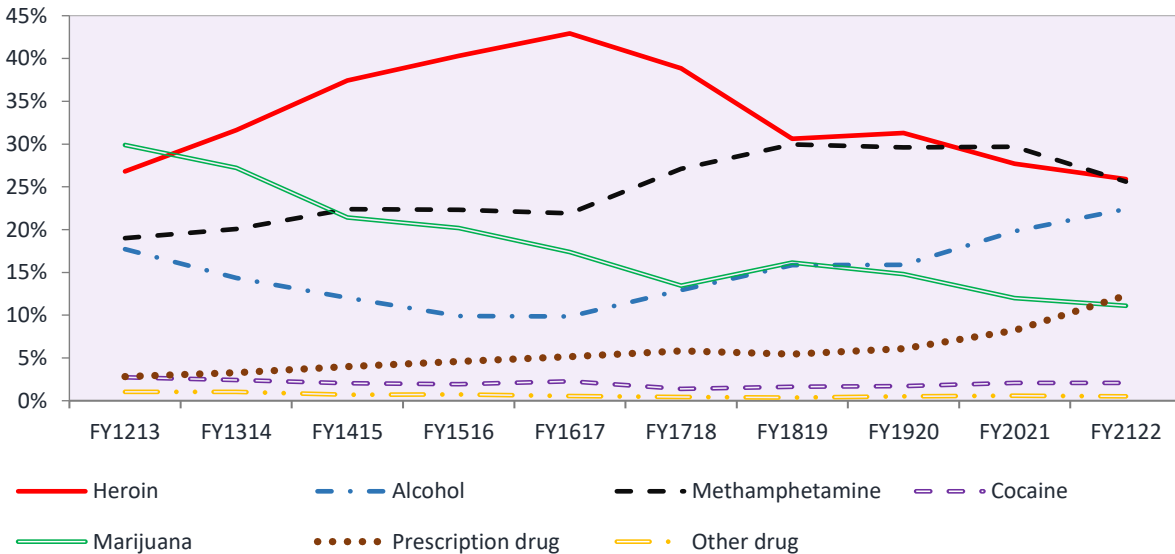
LEVEL OF CARE

As shown in Table 4.7.5, the most common level of care among patients residing in SPA 7 was opioid treatment programs (31.2%), followed by outpatient programs (29.5%) and residential service programs (17.8%).

Table 4.7.5. Level of care among patients from SPA 7, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**279**	**6.8**
ASAM WM 3.2	192	4.7
ASAM WM 3.7/4.0	87	2.1
Residential Service	**731**	**17.8**
ASAM 3.1	408	9.9
ASAM 3.5	323	7.9
Intensive Outpatient (ASAM 2.1)	**375**	**9.1**
Outpatient (ASAM 1.0)	**1,210**	**29.5**
Opioid Treatment Program (ASAM OTP)	**1,280**	**31.2**
Recovery Support Service	**230**	**5.6**

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

For most of the years, the outpatient program was the most common level of care for admissions in SPA 7, with a decreasing trend from 58.3% in FY1213 to 29.5% in FY2122. The proportion of patients admitted to opioid treatment programs showed an overall increasing trend from 26.9% in FY1213 to 44.6% in FY1617 and decreased to 31.2% in FY2122. In FY1617, FY1718, and FY2122, the opioid treatment program surpassed outpatient program as the most common level of care for patients in SPA 7 (Figure 4.7.3).

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

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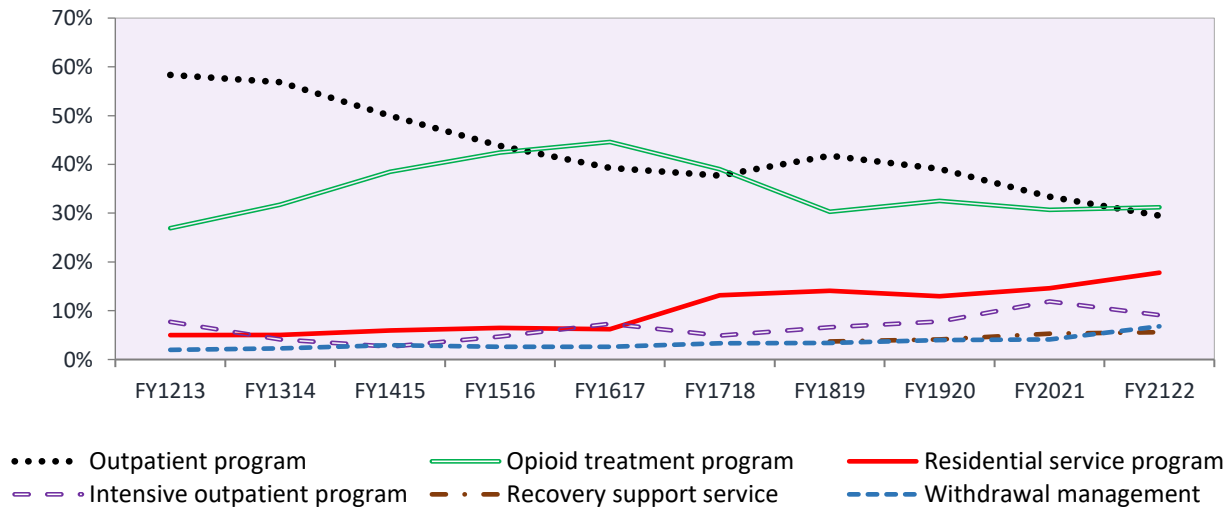
Patients from Service Planning Area 8 (SPA 8)
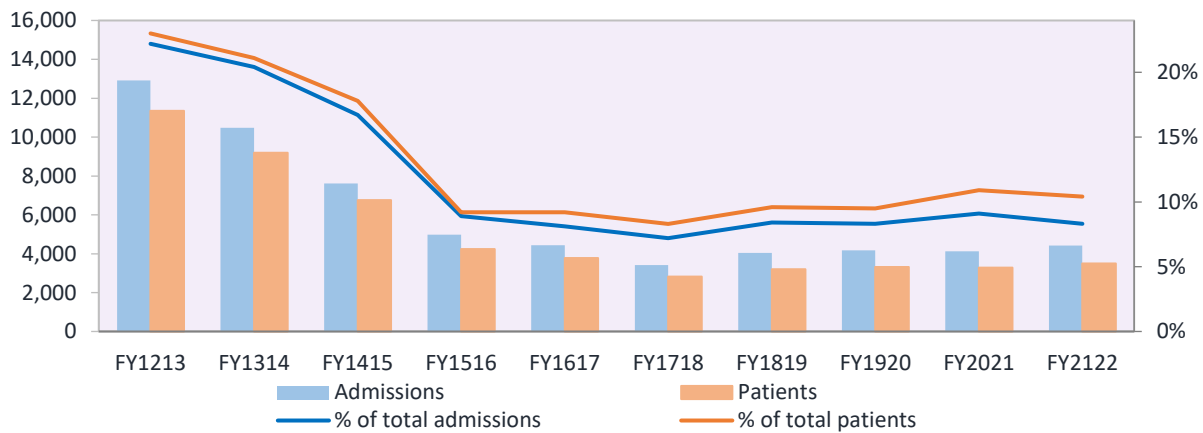
TREATMENT ADMISSIONS AND DISCHARGES

There were 4,884 treatment admissions for 3,785 patients residing in SPA 8, accounting for 9.1% of all admissions (Table 4.8.1).

Table 4.8.1. Treatment admissions and discharges among patients from SPA 8, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	4,884	9.1	3,785	11.2
Discharged	2,984	7.9	2,331	9.8

The number of admissions decreased by 45.7% from 8,991 in FY1213 to 4,884 in FY2122, and the proportion of admissions showed an overall decreasing trend through FY2122 (Figure 4.8.1).

Figure 4.8.1. Trends in admissions and patients from SPA 8
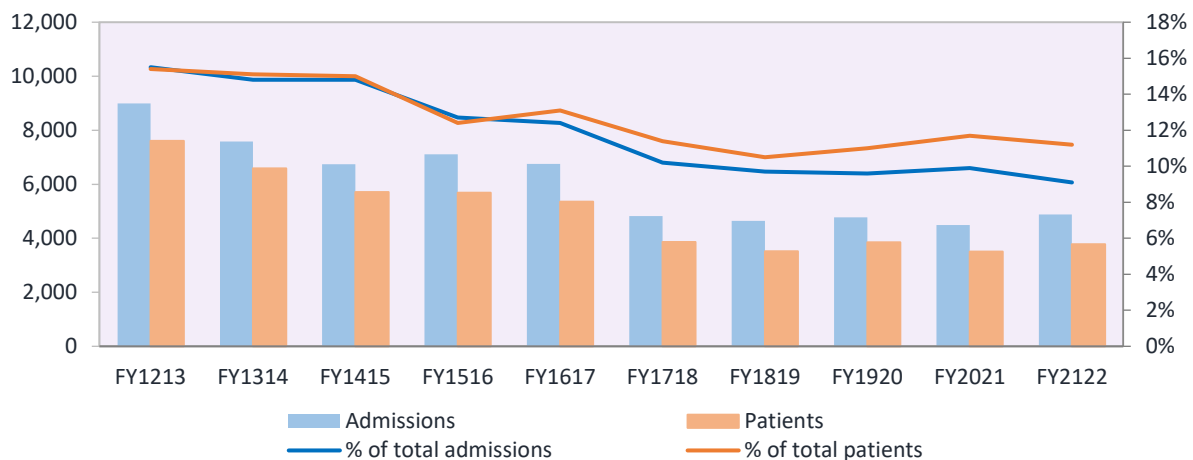
Among SPA 8 patient discharges, 48.2% had positive compliance, with 35.6% completing treatment and 12.7% leaving the program with satisfactory progress (Table 4.8.2).

Table 4.8.2. Discharge status of patients from SPA 8, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**1,326**	**48.2**
Completed treatment	978	35.6
Left – satisfactory progress	348	12.7
Negative compliance (Left – unsatisfactory progress)	**1,259**	**45.8**
Other (Death/incarceration/other)	**164**	**6.0**

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

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PATIENT CHARACTERISTICS

As shown in Table 4.8.3, the majority of patients residing in SPA 8 were male (60.1%), Latinx (47.7%), ages 26-34 (30.6%), and unemployed (58.0%). Among SPA 8 admissions, 41.8% reported having mental health issues.

Table 4.8.3. Characteristics of patients from SPA 8, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER	Male	2,273	60.1
	Female	1,501	39.7
	Transgender male	-	-
	Transgender female	-	-
	Non-conforming or refuse to state	-	-
RACE	Latinx	1,797	47.7
	White	1,051	27.9
	Black/African American	748	19.9
	Asian	94	2.5
	Pacific Islander	23	0.6
	American Indian / Alaska Native	25	0.7
	Other	27	0.7
AGE	17 and under	100	2.7
	18-25	393	10.6
	26-34	1,137	30.6
	35-44	835	22.5
	45-54	479	12.9
	55-64	541	14.6
	65+	231	6.2
SEXUAL ORIENTATION	Heterosexual	3,344	92.4
	Gay, lesbian, or bisexual	194	5.4
	Unsure/questioning	17	0.5
	Prefer not to state	65	1.8
EDUCATION	Middle school or below	108	3.0
	Some high school	814	22.5
	High school completed	1,815	50.1
	Some college or beyond	886	24.5
EMPLOYMENT	Employed	991	20.9
	Unemployed (seeking)	1,364	28.7
	Unemployed (not seeking)	1,392	29.3
	Not in labor force	1,000	21.1
LANGUAGE AT HOME	English	4,228	94.5
	Other Language	247	5.5
MENTAL HEALTH ISSUES	Yes	1,970	41.8
	No	2,743	58.2
PHYSICAL HEALTH ISSUES	Yes	662	14.3
	No	3,972	85.7
DISABILITY	Disabled at admission	587	13.6
CRIMINAL JUSTICE	Criminal justice involved	798	16.9

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

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PRIMARY SUBSTANCE USE AT ADMISSION

As shown in Table 4.8.4, the most common primary substance use among patients residing in SPA 8 was heroin (25.3%), followed by alcohol (23.3%) and methamphetamine (20.7%).

Table 4.8.4. Primary substance use among patients from SPA 8, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Heroin	1,184	25.3
Alcohol	1,090	23.3
Methamphetamine	968	20.7
Prescription drug	742	15.9
Marijuana	492	10.5
Cocaine	157	3.4
Other drugs	39	0.8

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

In SPA 8, heroin was the primary substance most commonly reported by patients for the majority of the years, except FY1213. There was a general upward trend in primary heroin admissions from FY1213 to FY1617, followed by a decrease in subsequent years. Additionally, primary alcohol and prescription drugs admissions showed a noticeable increase in recent years (Figure 4.8.2).

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

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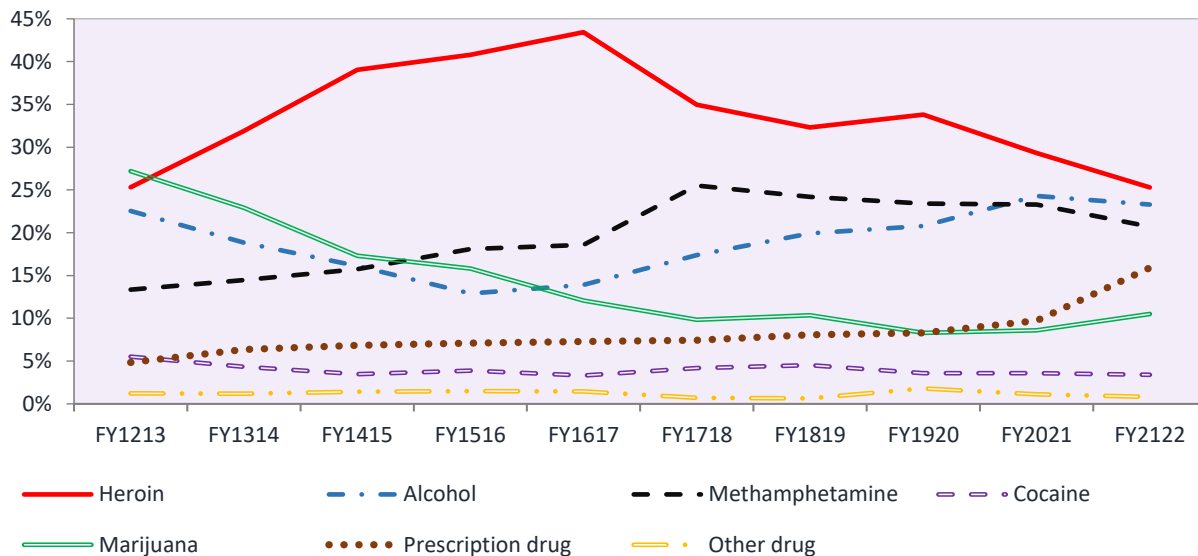
LEVEL OF CARE

SPA 8 patients were most commonly admitted to opioid treatment programs (31.7%), followed by outpatient programs (24.2%) and residential service programs (17.2%) (Table 4.8.5).

Table 4.8.5. Level of care among patients from SPA 8, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**344**	**7.1**
ASAM WM 1	-	-
ASAM WM 2	-	-
ASAM WM 3.2	230	4.8
ASAM WM 3.7/4.0	111	2.3
Residential Service	**827**	**17.2**
ASAM 3.1	433	9.0
ASAM 3.3	-	-
ASAM 3.5	389	8.1
Intensive Outpatient (ASAM 2.1)	**741**	**15.4**
Outpatient (ASAM 1.0)	**1,168**	**24.2**
Opioid Treatment Program (ASAM OTP)	**1,526**	**31.7**
Recovery Support Service	**213**	**4.4**

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

The outpatient program and opioid treatment program have alternated as the most common levels of care over the past ten fiscal years. However, there has been a consistent decline in admissions to the outpatient programs over time. Admissions to the residential programs increased in FY1718 and have remained relatively stable thereafter (Figure 4.8.3).

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

Legend: Outpatient program · Opioid treatment program · Residential service program · Intensive outpatient program · Recovery support service · Withdrawal management

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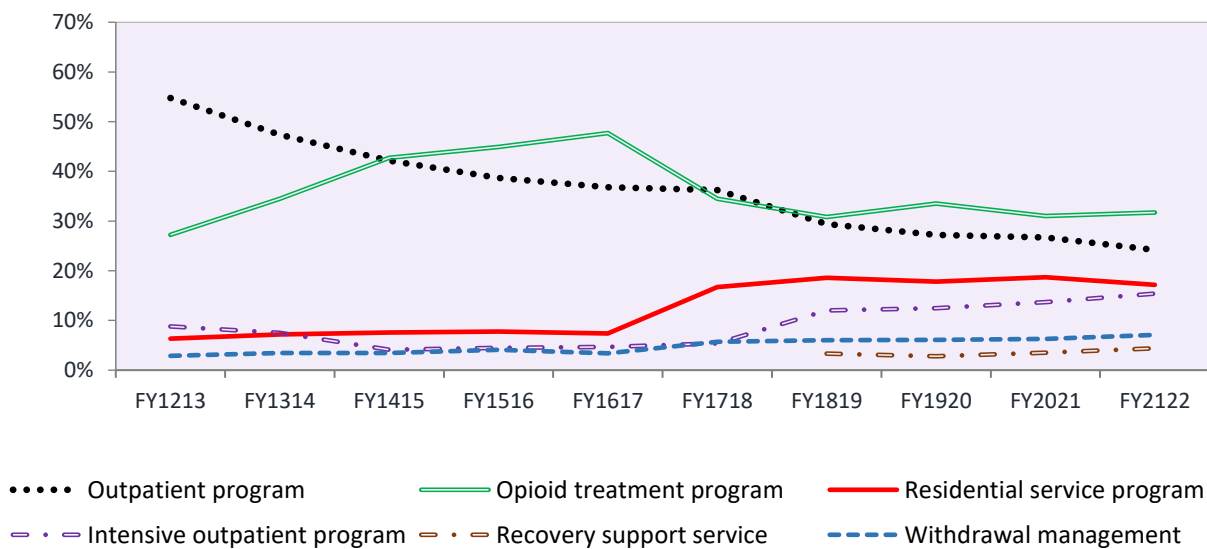
Summary Table 3. Summary statistics of patients from different SPAs, FY2122

Categories	SPA 1 Antelope Valley		SPA 2 San Fernando		SPA 3 San Gabriel		SPA 4 Metro		SPA 5 West		SPA 6 South		SPA 7 East		SPA 8 South Bay	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
ADMITTED																
Patients	1,752	5.2	5,300	15.7	4,688	13.9	3,297	9.8	780	2.3	3,497	10.4	3,200	9.5	3,785	11.2
Admissions	2,332	4.4	7,246	13.6	5,972	11.2	4,137	7.7	1,013	1.9	4,419	8.3	4,126	7.7	4,884	9.1
DISCHARGED																
Patients	1,124	4.7	3,514	14.8	2,976	12.5	2,112	8.9	472	2.0	2,422	10.2	2,069	8.7	2,331	9.8
Admissions	1,485	3.9	4,859	12.9	3,831	10.1	2,659	7.0	645	1.7	2,996	7.9	2,697	7.1	2,984	7.9
DISCHARGE STATUS																
Positive compliance	596	53.2	2,384	56.8	1,626	46.7	1,163	48.5	359	60.4	1,236	45.6	1,164	49.3	1,326	48.2
Completed treatment	420	37.5	1,766	42.1	1,159	33.3	833	34.8	275	46.3	916	33.8	845	35.8	978	35.6
Left – satisfactory progress	176	15.7	618	14.7	467	13.4	330	13.8	84	14.1	320	11.8	319	13.5	348	12.7
Negative compliance	486	43.4	1,614	38.5	1,615	46.4	978	40.8	199	33.5	1,248	46.1	1,030	43.6	1,259	45.8
Other (Death/incarceration/other)	39	3.5	198	4.7	239	6.9	256	10.7	36	6.1	224	8.3	166	7.0	164	6.0
GENDER IDENTITY†																
Male	983	56.1	3,552	67.2	2,946	62.9	2,127	64.5	505	64.8	2,006	57.4	2,000	62.5	2,273	60.1
Female	763	43.6	1,726	32.6	1,733	37.0	1,157	35.1	273	35.0	1,479	42.3	1,183	37.0	1,501	39.7
Transgender male	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Transgender female	-	-	8	0.2	-	-	6	0.2	-	-	8	0.2	9	0.3	-	-
Non-conforming or refuse to state	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
RACE†																
White	580	33.3	2,420	46.1	1,222	26.3	819	25.2	445	57.4	387	11.2	461	14.6	1,051	27.9
Latinx	737	42.3	2,333	44.5	2,969	63.8	1,869	57.5	208	26.8	1,814	52.3	2,511	79.4	1,797	47.7
Black/African American	400	23.0	344	6.6	330	7.1	459	14.1	92	11.9	1,184	34.1	128	4.0	748	19.9
Asian	12	0.7	91	1.7	85	1.8	74	2.3	18	2.3	35	1.0	35	1.1	94	2.5
Pacific Islander	-	-	-	-	9	0.2	-	-	-	-	-	-	-	-	23	0.6
American Indian/Alaska Native	-	-	25	0.5	24	0.5	15	0.5	-	-	21	0.6	17	0.5	25	0.7
Other	9	0.5	30	0.6	12	0.3	14	0.4	6	0.8	24	0.7	7	0.2	27	0.7
AGE†																
17 and under	45	2.6	184	3.5	178	3.8	87	2.7	6	0.8	212	6.1	160	5.1	100	2.7
18-25	155	8.9	560	10.7	449	9.7	293	9.1	70	9.1	411	11.9	349	11.0	393	10.6
26-34	589	33.9	1,719	33.0	1,454	31.4	940	29.2	209	27.2	1,093	31.6	959	30.3	1,137	30.6
35-44	458	26.4	1,270	24.3	1,070	23.1	754	23.4	176	22.9	756	21.9	686	21.7	835	22.5
45-54	212	12.2	689	13.2	654	14.1	479	14.9	112	14.6	408	11.8	409	12.9	479	12.9
55-64	199	11.5	580	11.1	583	12.6	466	14.5	122	15.9	361	10.4	409	12.9	541	14.6
65+	79	4.5	215	4.1	240	5.2	198	6.2	73	9.5	216	6.2	190	6.0	231	6.2

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(Table cont'd)

Categories	SPA 1 Antelope Valley		SPA 2 San Fernando		SPA 3 San Gabriel		SPA 4 Metro		SPA 5 West		SPA 6 South		SPA 7 East		SPA 8 South Bay	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
SEXUAL ORIENTATION†																
Heterosexual	1,563	94.2	4,476	91.7	4,048	93.6	2,646	88.5	668	91.1	3,095	92.8	2,840	93.6	3,344	92.4
Gay, lesbian, or bisexual	71	4.3	278	5.7	217	5.0	277	9.3	48	6.5	171	5.1	132	4.3	194	5.4
Unsure/questioning	6	0.4	29	0.6	18	0.4	18	0.6	-	-	13	0.4	7	0.2	17	0.5
Prefer not to state	19	1.1	97	2.0	42	1.0	50	1.7	15	2.0	56	1.7	56	1.8	65	1.8
EDUCATION†																
Middle school or below	56	3.3	137	2.7	132	3.0	185	6.0	15	2.0	147	4.4	115	3.7	108	3.0
Some high school	372	22.2	965	19.3	1,172	26.3	786	25.6	89	11.9	999	30.0	831	27.1	814	22.5
High school completed	944	56.4	2,512	50.2	2,210	49.5	1,348	43.9	327	43.7	1,582	47.5	1,572	51.2	1,815	50.1
Some college or beyond	303	18.1	1,387	27.7	947	21.2	750	24.4	318	42.5	606	18.2	550	17.9	886	24.5
EMPLOYMENT																
Employed	429	19.0	1,720	24.7	1,351	23.3	850	21.5	239	24.1	864	20.1	997	24.9	991	20.9
Unemployed (seeking)	835	36.9	2,802	40.2	2,002	34.5	1,213	30.6	317	32.0	1,196	27.9	1,202	30.0	1,364	28.7
Unemployed (not seeking)	713	31.5	1,738	24.9	1,428	24.6	1,140	28.8	248	25.0	1,130	26.3	1,026	25.6	1,392	29.3
Not in labor force	283	12.5	709	10.2	1,028	17.7	757	19.1	187	18.9	1,100	25.6	784	19.6	1,000	21.1
LANGUAGE AT HOME																
English	1,906	89.1	5,369	81.9	5,089	94.3	3,198	87.8	914	95.4	3,586	90.2	3,362	92.1	4,228	94.5
Other Language	234	10.9	1,190	18.1	308	5.7	445	12.2	44	4.6	388	9.8	287	7.9	247	5.5
MENTAL HEALTH ISSUES																
Yes	1,442	63.0	3,421	48.6	1,976	34.3	1,732	44.3	477	48.7	1,923	44.9	1,337	33.9	1,970	41.8
No	847	37.0	3,624	51.4	3,790	65.7	2,174	55.7	503	51.3	2,361	55.1	2,605	66.1	2,743	58.2
PHYSICAL HEALTH ISSUES																
Yes	221	10.0	670	9.8	686	12.0	473	12.2	168	17.3	495	11.7	484	12.4	662	14.3
No	1,984	90.0	6,152	90.2	5,043	88.0	3,390	87.8	802	82.7	3,744	88.3	3,412	87.6	3,972	85.7
DISABILITY																
Disabled at admission	263	12.2	1,047	16.0	558	10.7	520	14.7	126	13.9	677	17.7	424	11.9	587	13.6
CRIMINAL JUSTICE																
Criminal justice involved	495	21.6	1,084	15.4	1,381	23.8	667	17.0	105	10.7	993	23.2	898	22.6	798	16.9

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(Table cont'd)

Categories	SPA 1 Antelope Valley		SPA 2 San Fernando		SPA 3 San Gabriel		SPA 4 Metro		SPA 5 West		SPA 6 South		SPA 7 East		SPA 8 South Bay	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
PRIMARY SUBSTANCE USE																
Heroin	483	21.8	2,280	33.2	1,666	28.7	1,003	25.6	301	30.7	662	15.5	1,029	25.9	1,184	25.3
Methamphetamine	471	21.2	1,137	16.5	1,396	24.1	993	25.4	109	11.1	1,295	30.3	1,015	25.6	968	20.7
Marijuana	207	9.3	423	6.2	511	8.8	333	8.5	49	5.0	697	16.3	440	11.1	492	10.5
Alcohol	476	21.5	1,797	26.1	1,282	22.1	964	24.6	274	27.9	969	22.7	889	22.4	1,090	23.3
Prescription drug	495	22.3	1,097	16.0	804	13.9	465	11.9	221	22.5	404	9.5	488	12.3	742	15.9
Cocaine	66	3.0	122	1.8	116	2.0	132	3.4	20	2.0	197	4.6	84	2.1	157	3.4
Other drugs	19	0.9	18	0.3	23	0.4	27	0.7	8	0.8	49	1.1	21	0.5	39	0.8
LEVEL OF CARE																
ASAM 1-Outpatient	699	31.1	1,749	24.6	1,655	27.8	1,106	26.8	161	15.9	1,495	34.1	1,210	29.5	1,168	24.2
ASAM 2.1-Intensive Outpatient	219	9.7	844	11.9	448	7.5	536	13.0	110	10.9	689	15.7	375	9.1	741	15.4
ASAM OTP-Opioid Treatment Program	757	33.6	2,292	32.2	1,920	32.2	1,191	28.9	377	37.3	868	19.8	1,280	31.2	1,526	31.7
ASAM 3.1-Residential Service	175	7.8	401	5.6	525	8.8	387	9.4	138	13.7	419	9.6	408	9.9	433	9.0
ASAM 3.3-Residential Service	-	-	-	-	11	0.2	6	0.1	-	-	6	0.1	-	-	-	-
ASAM 3.5-Residential Service	152	6.8	561	7.9	603	10.1	491	11.9	67	6.6	409	9.3	323	7.9	389	8.1
ASAM WM 1-Withdrawal Management	12	0.5	-	-	-	-	-	-	-	-	-	-	-	-	-	-
ASAM WM 2-Withdrawal Management	-	-	27	0.4	7	0.1	-	-	-	-	6	0.1	-	-	-	-
ASAM WM 3.2-Withdrawal Management	84	3.7	566	8.0	429	7.2	154	3.7	91	9.0	122	2.8	192	4.7	230	4.8
ASAM WM 3.7/4.0-Withdrawal Management	103	4.6	416	5.8	101	1.7	81	2.0	33	3.3	88	2.0	87	2.1	111	2.3
Recovery Support Service	43	1.9	257	3.6	258	4.3	165	4.0	31	3.1	282	6.4	230	5.6	213	4.4

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

† Based on unique patient numbers and percentages.

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Chapter 5

Patient Characteristics by Supervisorial District[2]
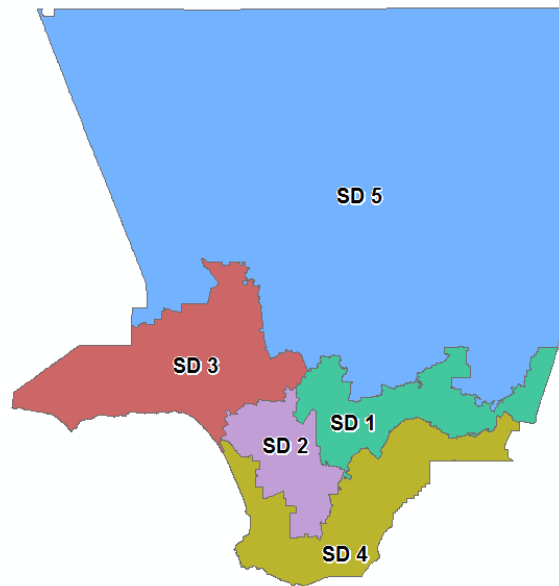
Chapter 5 provides descriptive information for patients from each of the five **supervisorial districts (SDs)**. For each SD, numbers of patients, admissions and discharges are reported, along with trends in admissions over the past ten years. Patient discharge status, demographic characteristics, primary substance use, and levels of care by SD are also described.

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

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Patients from Supervisorial District 1 (SD 1)

TREATMENT ADMISSIONS AND DISCHARGES

There were 7,358 treatment admissions for 5,856 patients residing in SD 1, accounting for 13.8% of all admissions and 17.4% of all patients (Table 5.1.1).

Table 5.1.1. Treatment admissions and discharges among patients from SD 1, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	7,358	13.8	5,856	17.4
Discharged	4,578	12.1	3,595	15.1

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

Figure 5.1.1. Trends in admissions and patients from SD 1
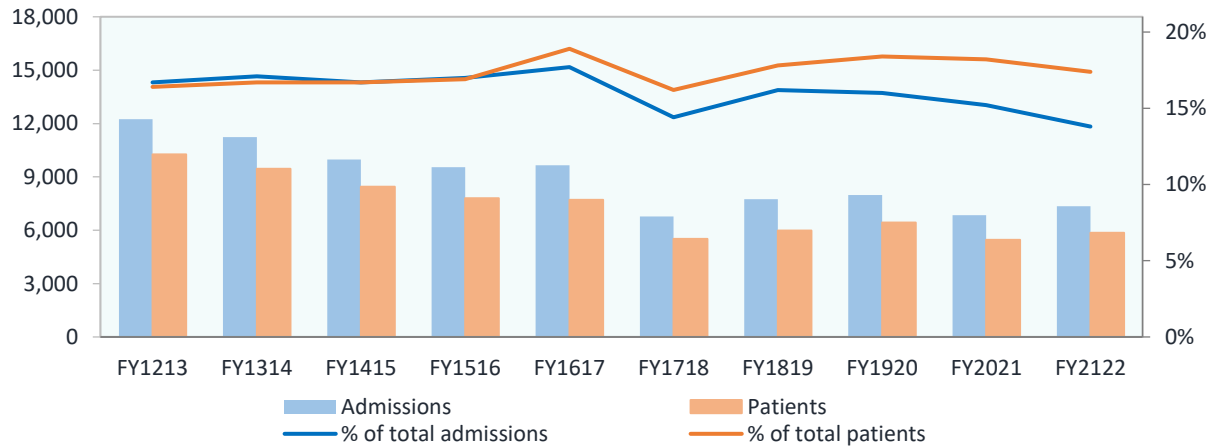
Among the SD1 patient discharges, 44.9% had positive compliance, with 31.4% completing treatment and 13.6% leaving the program with satisfactory progress (Table 5.1.2).

Table 5.1.2. Discharge status of patients from SD 1, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**1,830**	**44.9**
Completed treatment	1,278	31.4
Left – satisfactory progress	552	13.6
Negative compliance (Left – unsatisfactory progress)	**1,911**	**46.9**
Other (Death/incarceration/other)	332	8.2

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

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PATIENT CHARACTERISTICS

The majority of patients residing in SD 1 were male (61.0%), Latinx (70.3%), ages 26-34 (28.4%), and unemployed (58.0%) (Table 5.1.3). Among SD 1 admissions, 35.0% reported mental health issues, and 22.5% were involved in the criminal justice system.

Table 5.1.3. Characteristics of patients from SD 1, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	3,570	61.0
	Female	2,269	38.8
	Transgender male	-	-
	Transgender female	10	0.2
	Non-conforming or refuse to state	-	-
RACE	Latinx	4,058	70.3
	White	1,074	18.6
	Black/African American	508	8.8
	Asian	87	1.5
	Pacific Islander	7	0.1
	American Indian /Alaska Native	26	0.5
	Other	15	0.3
AGE	17 and under	235	4.1
	18-25	540	9.4
	26-34	1,631	28.4
	35-44	1,246	21.7
	45-54	857	14.9
	55-64	872	15.2
	65+	360	6.3
SEXUAL ORIENTATION	Heterosexual	4,917	93.2
	Gay, lesbian, or bisexual	272	5.2
	Unsure/questioning	21	0.4
	Prefer not to state	68	1.3
EDUCATION	Middle school or below	265	4.8
	Some high school	1,595	29.1
	High school completed	2,622	47.9
	Some college or beyond	996	18.2
EMPLOYMENT	Employed	1,561	22.1
	Unemployed (seeking)	2,156	30.5
	Unemployed (not seeking)	1,942	27.5
	Not in labor force	1,401	19.8
LANGUAGE AT HOME	English	5,905	91.6
	Other Language	545	8.4
MENTAL HEALTH ISSUES	Yes	2,434	35.0
	No	4,521	65.0
PHYSICAL HEALTH ISSUES	Yes	777	11.3
	No	6,111	88.7
DISABILITY	Disabled at admission	777	12.4
CRIMINAL JUSTICE	Criminal justice involved	1,579	22.5

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

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PRIMARY SUBSTANCE USE AT ADMISSION

The most commonly reported primary substance use was heroin (29.8%), followed by methamphetamine (25.5%) and alcohol (20.9%) (Table 5.1.4).

Table 5.1.4. Primary substance use among patients from SD 1, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Heroin	2,084	29.8
Methamphetamine	1,785	25.5
Alcohol	1,461	20.9
Prescription drug	765	10.9
Marijuana	685	9.8
Cocaine	184	2.6
Other drugs	34	0.5

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

The proportion of patients reporting heroin as the primary substance use increased from FY1213 to FY1617, then decreased to 29.8% in FY2122. Methamphetamine's use gradually increased from 16.9% in FY1213 to 25.5% in FY2122. The proportion reporting marijuana as the primary substance gradually decreased from FY1213 to FY2122 (Figure 5.1.2).

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

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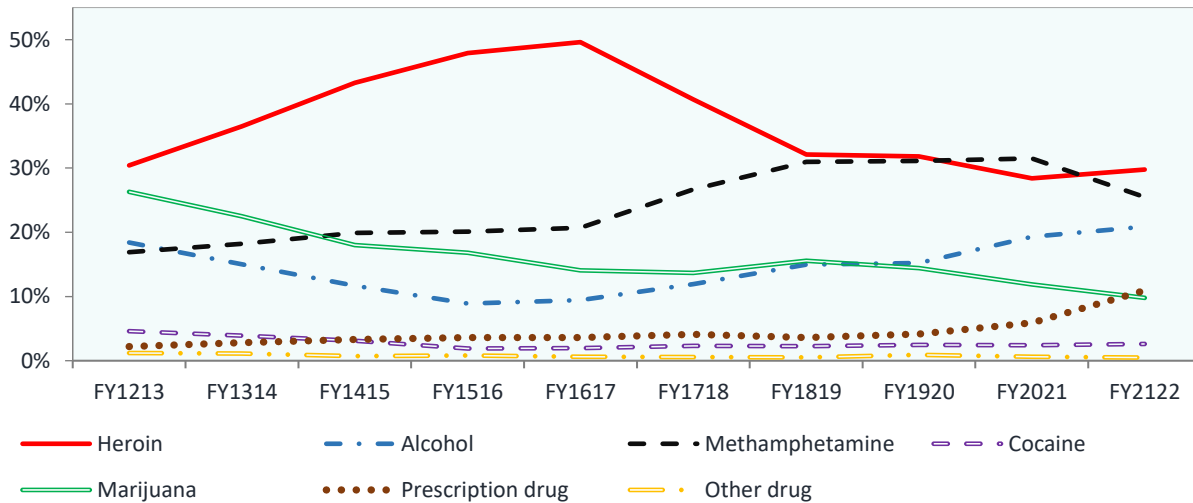
LEVEL OF CARE

Patients residing in SD 1 were most commonly admitted to opioid treatment programs (33.7%), followed by outpatient programs (29.3%) and residential service programs (17.9%) (Table 5.1.5).

Table 5.1.5. Level of care among patients from SD 1, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**462**	**6.3**
ASAM WM 2	-	-
ASAM WM 3.2	346	4.7
ASAM WM 3.7/4.0	111	1.5
Residential Service	**1,316**	**17.9**
ASAM 3.1	599	8.2
ASAM 3.3	15	0.2
ASAM 3.5	702	9.6
Intensive Outpatient (ASAM 2.1)	**610**	**8.3**
Outpatient (ASAM 1.0)	**2,152**	**29.3**
Opioid Treatment Program (ASAM OTP)	**2,475**	**33.7**
Recovery Support Service	**328**	**4.5**

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

Over the past decade, the outpatient and opioid treatment programs have taken turns as the most common levels of care. In FY2122, the majority of admissions (33.7%) were to opioid treatment programs. The proportion of admissions to the outpatient program has consistently decreased, while there has been a significant increase in the proportion of admissions to residential service programs since FY1718 (Figure 5.1.3).

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

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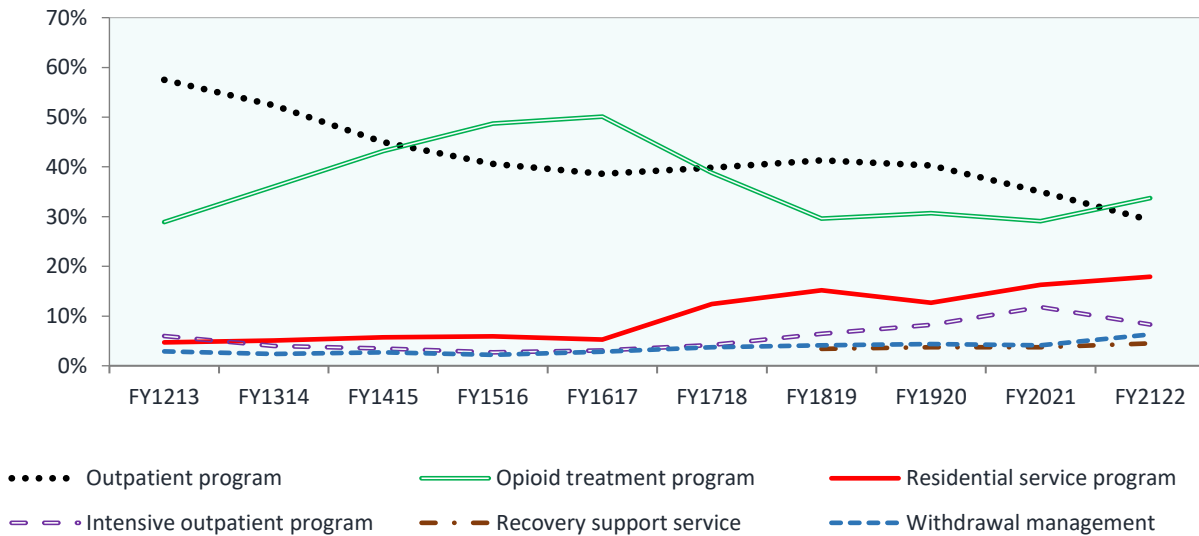
Patients from Supervisorial District 2 (SD 2)

TREATMENT ADMISSIONS AND DISCHARGES

There were 7,174 treatment admissions for 5,577 patients residing in SD 2, accounting for 13.4% of all admissions and 16.5% of all patients (Table 5.2.1).

Table 5.2.1. Treatment admissions and discharges among patients from SD 2, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	7,174	13.4	5,577	16.5
Discharged	4,775	12.6	3,781	15.9

The number and proportion of admissions decreased from 17,206 (23.5%) in FY1213 to 7,174 (13.4%) in FY2122 (Figure 5.2.1).

Figure 5.2.1. Trends in admissions and patients from SD 2
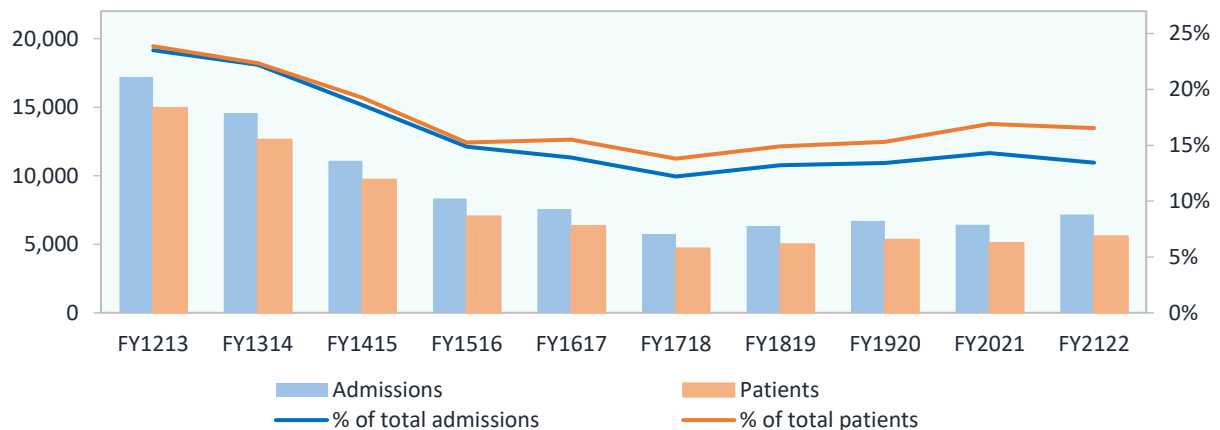
Among the SD2 patient discharges, 48.0% had positive compliance, with 35.1% completing treatment and 12.9% leaving the program with satisfactory progress (Table 5.2.2).

Table 5.2.2. Discharge status of patients from SD 2, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**2,073**	**48.0**
Completed treatment	1,516	35.1
Left – satisfactory progress	557	12.9
Negative compliance (Left – unsatisfactory progress)	**1,878**	**43.5**
Other (Death/incarceration/other)	**364**	**8.4**

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

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PATIENT CHARACTERISTICS

As shown in Table 5.2.3, the majority of patients from SD 2 were male (59.2%), Latinx (49.6%), ages 26-34 (31.3%), and unemployed (54.2%). Among SD 2 admissions, 44.1% reported having mental health issues, and 16.5% reported having a disability.

Table 5.2.3. Characteristics of patients from SD 2, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	3,302	59.2
	Female	2,257	40.5
	Transgender male	-	-
	Transgender female	12	0.2
	Non-conforming or refuse to state	-	-
RACE	Latinx	2,746	49.6
	White	888	16.0
	Black/African American	1,718	31.1
	Asian	101	1.8
	Pacific Islander	13	0.2
	American Indian/Alaska Native	28	0.5
	Other	39	0.7
AGE	17 and under	274	5.0
	18-25	608	11.1
	26-34	1,718	31.3
	35-44	1,227	22.3
	45-54	650	11.8
	55-64	680	12.4
	65+	337	6.1
SEXUAL ORIENTATION	Heterosexual	4,940	92.5
	Gay, lesbian, or bisexual	281	5.3
	Unsure/questioning	22	0.4
	Prefer not to state	100	1.9
EDUCATION	Middle school or below	218	4.1
	Some high school	1,460	27.5
	High school completed	2,520	47.4
	Some college or beyond	1,116	21.0
EMPLOYMENT	Employed	1,474	21.2
	Unemployed (seeking)	1,923	27.6
	Unemployed (not seeking)	1,852	26.6
	Not in labor force	1,712	24.6
LANGUAGE AT HOME	English	5,922	91.3
	Other Language	567	8.7
MENTAL HEALTH ISSUES	Yes	3,057	44.1
	No	3,874	55.9
PHYSICAL HEALTH ISSUES	Yes	878	12.8
	No	5,977	87.2
DISABILITY	Disabled at admission	1,025	16.5
CRIMINAL JUSTICE	Criminal justice involved	1,527	22.0

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

N ≤ 5 not reported to protect confidentiality.

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PRIMARY SUBSTANCE USE AT ADMISSION

The most common primary substance use was methamphetamine (27.2%), followed alcohol (23.9%) and by heroin (18.2%) (Table 5.2.4).

Table 5.2.4. Primary substance use among patients from SD 2, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Methamphetamine	1,882	27.2
Alcohol	1,654	23.9
Heroin	1,260	18.2
Marijuana	979	14.1
Prescription drug	768	11.1
Cocaine	314	4.5
Other drugs	73	1.1

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

In SD 2, there has been a shift in the leading primary drug admissions over the years, with marijuana, heroin, and methamphetamine taking turns. The proportion of primary marijuana admissions showed a decreasing trend, while primary methamphetamine admissions exhibited an increasing trend. The proportion of primary heroin admissions increased until FY1617 and then decreased to 18.2% in FY2122 (Figure 5.2.2).

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

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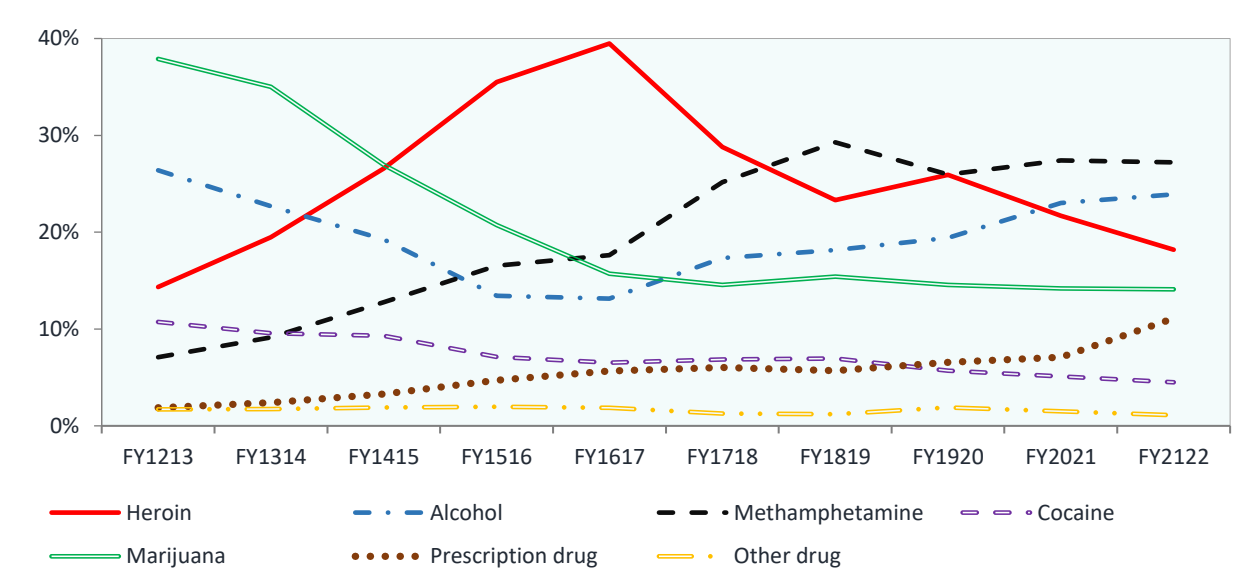
LEVEL OF CARE

The most common level of care that patients residing in SD 2 were admitted to included outpatient programs (31.4%), followed by opioid treatment programs (22.8%) and residential services (19.6%) (Table 5.2.5).

Table 5.2.5. Level of care among patients from SD 2, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**395**	**5.5**
ASAM WM 2	8	0.1
ASAM WM 3.2	243	3.4
ASAM WM 3.7/4.0	144	2.0
Residential Service	**1,397**	**19.6**
ASAM 3.1	631	8.9
ASAM 3.3	9	0.1
ASAM 3.5	757	10.6
Intensive Outpatient (ASAM 2.1)	**1,044**	**14.7**
Outpatient (ASAM 1.0)	**2,241**	**31.4**
Opioid Treatment Program (ASAM OTP)	**1,626**	**22.8**
Recovery Support Service	**423**	**5.9**

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

In the past ten fiscal years, the outpatient program has consistently been the most common level of care. However, in FY1617, there was a notable shift as the proportion of admissions to opioid treatment programs surpassed that of outpatient programs. The proportion of admissions to residential service programs experienced a notable increase in FY1718 and remained stable thereafter (Figure 5.2.3).

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

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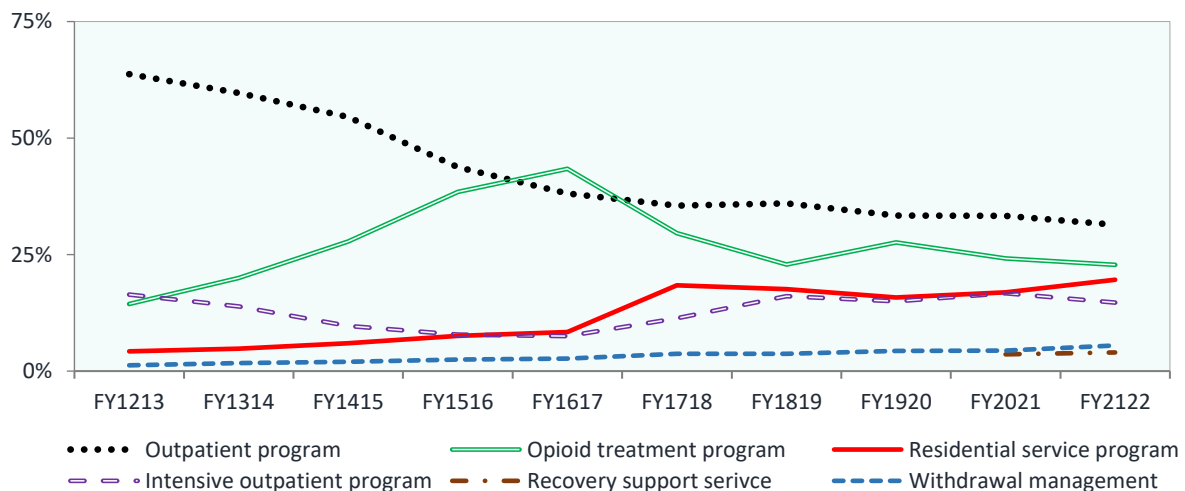
Patients from Supervisorial District 3 (SD 3)

TREATMENT ADMISSIONS AND DISCHARGES

There were 5,472 treatment admissions for 4,128 patients residing in SD 3, accounting for 10.3% of all admissions and 12.2% of all patients (Table 5.3.1).

Table 5.3.1. Treatment admissions and discharges among patients from SD 3, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	5,472	10.3	4,128	12.2
Discharged	3,567	9.4	2,661	11.2

The number of admissions decreased from FY1213 to FY1718 and stabilized through FY2122, while the proportion of all admissions remained relatively stable throughout the entire time period (Figure 5.3.1).

Figure 5.3.1. Trends in admissions and patients from SD 3
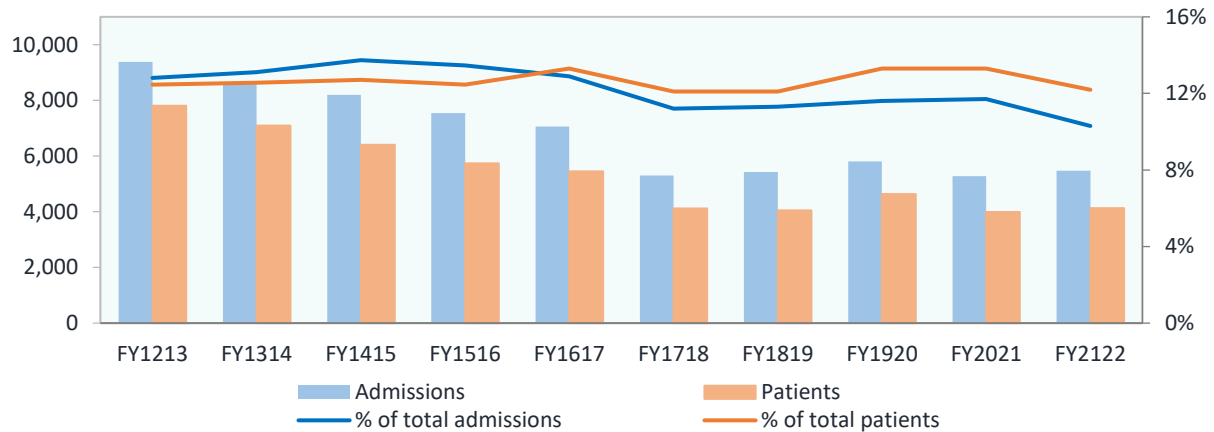
Among the SD3 patient discharges, 56.9% had positive compliance, with 42.1% completing treatment and 14.8% leaving the program with satisfactory progress (Table 5.3.2).

Table 5.3.1. Discharge status of patients from SD 3, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive Compliance	**1,764**	**56.9**
Completed treatment	1,304	42.1
Left – satisfactory progress	460	14.8
Negative Compliance (Left – unsatisfactory progress)	**1,159**	**37.4**
Other (Death/incarceration/other)	**175**	**5.6**

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

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PATIENT CHARACTERISTICS

The majority of patients residing in SPA 3 were male (64.7%), White (45.4%), ages 26-34 (31.8%), and unemployed (62.4%). Among SPA 3 admissions, 50.1% reported having mental health issues (Table 5.3.3).

Table 5.3.2. Characteristics of patients from SD 3, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	2,664	64.7
	Female	1,443	35.0
	Transgender male	-	-
	Transgender female	7	0.2
	Non-conforming or refuse to state	-	-
RACE	Latinx	1,806	44.2
	White	1,854	45.4
	Black/African American	310	7.6
	Asian	77	1.9
	Pacific Islander	-	-
	American Indian /Alaska Native	20	0.5
	Other	18	0.4
AGE	17 and under	133	3.3
	18-25	432	10.6
	26-34	1,294	31.8
	35-44	972	23.9
	45-54	531	13.0
	55-64	493	12.1
	65+	215	5.3
SEXUAL ORIENTATION	Heterosexual	3,385	90.3
	Gay, lesbian, or bisexual	267	7.1
	Unsure/questioning	23	0.6
	Prefer not to state	72	1.9
EDUCATION	Middle school or below	118	3.0
	Some high school	746	19.2
	High school completed	1,798	46.3
	Some college or beyond	1,225	31.5
EMPLOYMENT	Employed	1,363	26.0
	Unemployed (seeking)	1,919	36.6
	Unemployed (not seeking)	1,354	25.8
	Not in labor force	612	11.7
LANGUAGE AT HOME	English	4,158	83.7
	Other Language	812	16.3
MENTAL HEALTH ISSUES	Yes	2,680	50.1
	No	2,665	49.9
PHYSICAL HEALTH ISSUES	Yes	608	11.8
	No	4,549	88.2
DISABILITY	Disabled at admission	836	17.0
CRIMINAL JUSTICE	Criminal justice involved	712	13.3

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

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PRIMARY SUBSTANCE USE AT ADMISSION

The most commonly reported primary substance use was heroin (30.8%), followed by alcohol (26.5%) and prescription drug (17.0%) (Table 5.3.4).

Table 5.3.3. Primary substance use among patients from SD 3, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Heroin	1,602	30.8
Alcohol	1,380	26.5
Prescription drug	886	17.0
Methamphetamine	861	16.6
Marijuana	347	6.7
Cocaine	103	2.0
Other drugs	19	0.4

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

Over the past ten fiscal years, heroin was the most common primary substance use. The proportion of primary heroin admissions increased steadily from FY1213 to FY1617, then decreased through FY2122. The proportion reporting marijuana as the primary substance use declined from FY1213, while the reporting of methamphetamine increased gradually from FY1213 to FY1819 and then decreased slightly through FY2122 (Figure 5.3.2).

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

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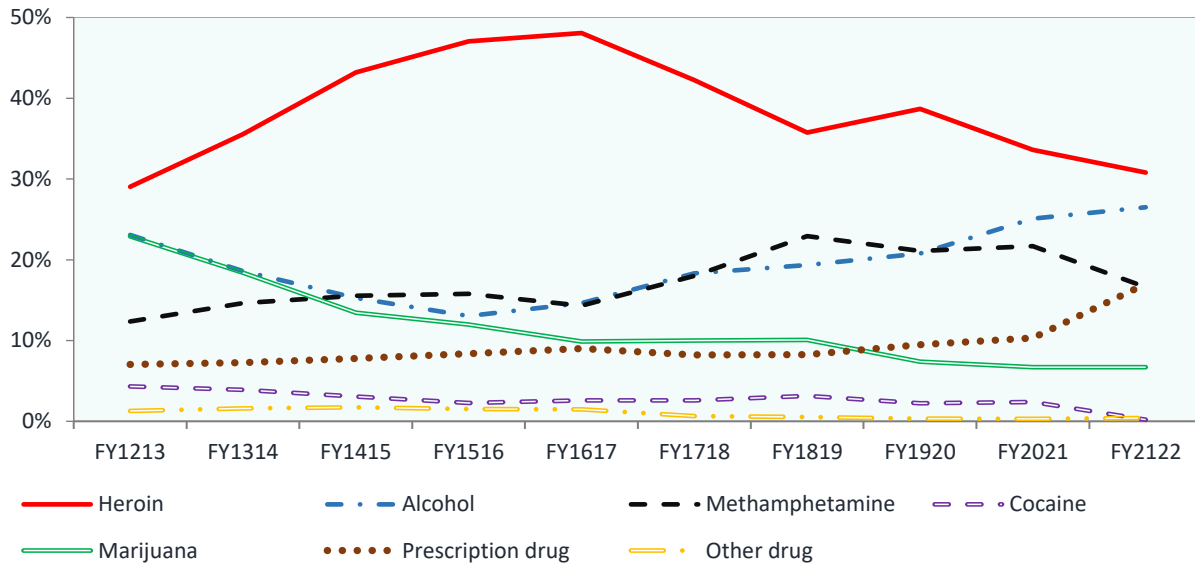
LEVEL OF CARE

The most common level of care that patients residing in SPA 3 was admitted to was opioid treatment programs (32.0%), followed by outpatient programs (26.3%) and residential services (13.3%) (Table 5.3.5).

Table 5.3.4. Level of care among patients from SD 3, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**674**	**12.5**
ASAM WM 2	17	0.3
ASAM WM 3.2	372	6.9
ASAM WM 3.7/4.0	285	5.3
Residential Service	**717**	**13.3**
ASAM 3.1	317	5.9
ASAM 3.3	-	-
ASAM 3.5	396	7.4
Intensive Outpatient (ASAM 2.1)	**662**	**12.3**
Outpatient (ASAM 1.0)	**1,416**	**26.3**
Opioid Treatment Program (ASAM OTP)	**1,723**	**32.0**
Recovery Support Service	**184**	**3.4**

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

N ≤ 5 not reported to protect confidentiality.

The proportion of admissions to opioid treatment programs exhibited an upward trend from FY1213 to FY1617, followed by a decrease until FY1819, and subsequently stabilized through FY2122. Opioid treatment programs consistently surpassed outpatient programs as the most common level of care from FY1415 to FY2122, with the exception of FY1819. On the other hand, admissions to outpatient programs showed a gradual decline over the past decade (Figure 5.3.3).

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

- ..... Outpatient program
- —— Opioid treatment program
- —— Residential service program
- – · – Intensive outpatient program
- – · – Recovery support service
- – – – Withdrawal management

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Patients from Supervisorial District 4 (SD 4)

TREATMENT ADMISSIONS AND DISCHARGES

There were 6,537 treatment admissions for 5,060 patients residing in SD 4, accounting for 12.2% of all admissions and 15.0% of all patients (Table 5.4.1).

Table 5.4.1. Treatment admissions and discharges among patients from SD 4, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	6,537	12.2	5,060	15.0
Discharged	4,141	11.0	3,206	13.5

The proportion of admissions and patients remained relatively stable from FY1213 to FY1415 and began to fluctuate slightly thereafter before stabilizing again from FY1718 to FY2122 (Figure 5.4.1).

Figure 5.4.1. Trends in admissions and patients from SD 4
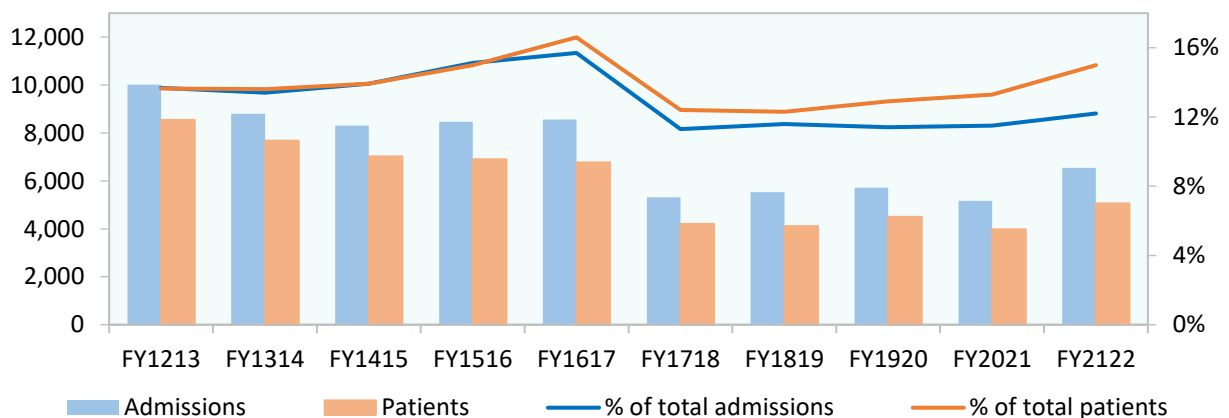
Among the SD 4 patient discharges, 48.1% of admissions had positive compliance, with 35.3% completing treatment and 12.8% leaving the program with satisfactory progress (Table 5.4.2).

Table 5.4.2. Discharge status of patients from SD 4, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**1,802**	**48.1**
Completed treatment	1,322	35.3
Left – satisfactory progress	480	12.8
Negative compliance		
(Left – unsatisfactory progress)	**1,724**	**46.0**
Other (Death/incarceration/other)	**219**	**5.8**

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

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PATIENT CHARACTERISTICS

The majority of patients residing in SD 4 were male (61.5%), Latinx (63.3%), ages 26-34 (30.6%), and unemployed (57.8%) (Table 5.4.3). Among SD 4 admissions, 39.2% reported mental health issues, and 13.7% reported physical health issues.

Table 5.4.3. Characteristics of patients from SD 4, FY2122

CHARACTERISTIC		PATIENTS	%
GENDER IDENTITY	Male	3,112	61.5
	Female	1,927	38.1
	Transgender male	-	-
	Transgender female	9	0.2
	Non-conforming or refuse to state	-	-
RACE	Latinx	3,179	63.3
	White	1,208	24.0
	Black/African American	454	9.0
	Asian	106	2.1
	Pacific Islander	17	0.3
	American Indian /Alaska Native	38	0.8
	Other	23	0.5
AGE	17 and under	193	3.9
	18-25	557	11.2
	26-34	1,529	30.6
	35-44	1,137	22.8
	45-54	666	13.3
	55-64	627	12.6
	65+	284	5.7
SEXUAL ORIENTATION	Heterosexual	4,457	92.8
	Gay, lesbian, or bisexual	247	5.1
	Unsure/questioning	18	0.4
	Prefer not to state	83	1.7
EDUCATION	Middle school or below	159	3.3
	Some high school	1,165	24.0
	High school completed	2,461	50.6
	Some college or beyond	1,079	22.2
EMPLOYMENT	Employed	1,444	22.6
	Unemployed (seeking)	1,900	29.8
	Unemployed (not seeking)	1,787	28.0
	Not in labor force	1,247	19.6
LANGUAGE AT HOME	English	5,512	93.3
	Other Language	396	6.7
MENTAL HEALTH ISSUES	Yes	2,477	39.2
	No	3,843	60.8
PHYSICAL HEALTH ISSUES	Yes	851	13.7
	No	5,381	86.3
DISABILITY	Disabled at admission	730	12.6
CRIMINAL JUSTICE	Criminal justice involved	1,210	19.0

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

N ≤ 5 not reported to protect confidentiality.

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PRIMARY SUBSTANCE USE AT ADMISSION

The most common primary substance use was heroin (25.3%), followed by methamphetamine (23.4%) and alcohol (23.1%) (Table 5.4.4).

Table 5.4.4. Primary substance use among patients from SD 4, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Heroin	1,588	25.3
Methamphetamine	1,472	23.4
Alcohol	1,451	23.1
Prescription drug	934	14.9
Marijuana	656	10.4
Cocaine	140	2.2
Other drugs	45	0.7

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

Heroin was the primary substance use with the highest proportion of admissions over the past ten fiscal years, with a notable increase from FY1213 to FY1617 and a decrease thereafter to 25.3% in FY2122. Marijuana admissions displayed an overall declining trend from FY1213 to FY2122, while methamphetamine admissions remained stable in the last five fiscal years (Figure 5.4.2).

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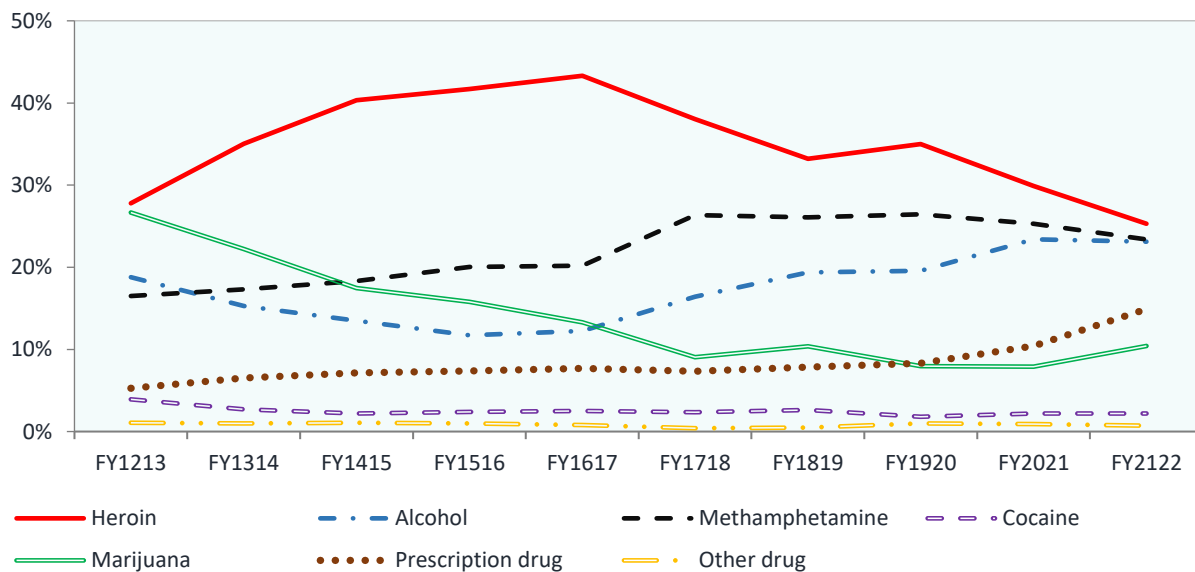
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LEVEL OF CARE

The most common level of care that patients residing in SPA 4 was opioid treatment programs (30.9%), followed by outpatient programs (25.5%) and residential service programs (18.5%) (Table 5.4.5).
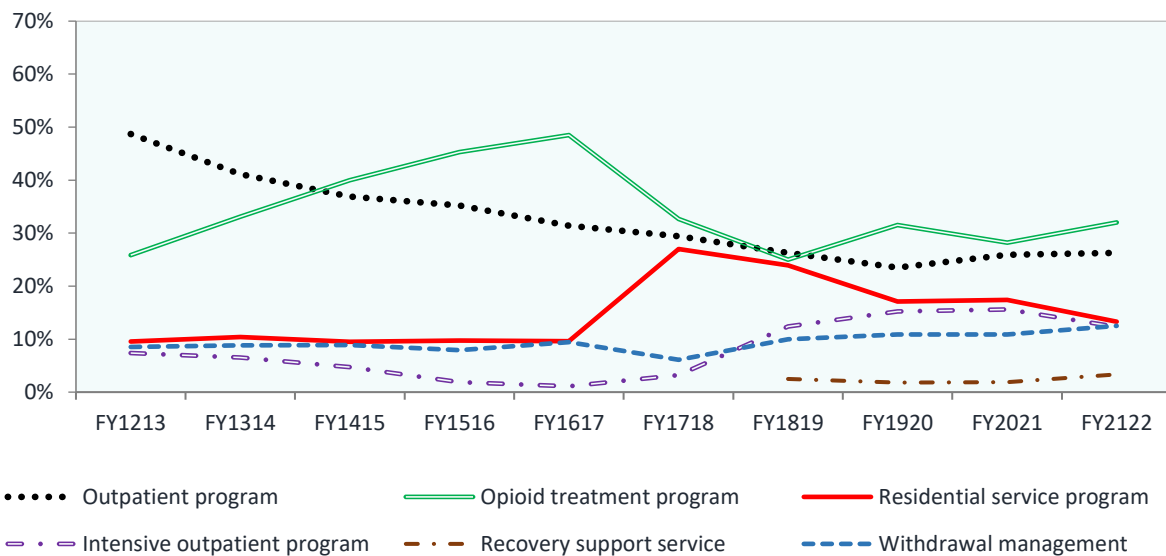
Table 5.4.5. Level of care among patients from SD 4, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**463**	**7.2**
ASAM WM 1	-	-
ASAM WM 2	-	-
ASAM WM 3.2	321	5.0
ASAM WM 3.7/4.0	140	2.2
Residential Service	**1,196**	**18.5**
ASAM 3.1	691	10.7
ASAM 3.3	-	-
ASAM 3.5	502	7.8
Intensive Outpatient (ASAM 2.1)	**840**	**13.0**
Outpatient (ASAM 1.0)	**1,644**	**25.5**
Opioid Treatment Program (ASAM OTP)	**1,997**	**30.9**
Recovery Support Service	**317**	**4.9**

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

The outpatient program and opioid treatment program have alternated as the most common levels of care over the past ten fiscal years. However, there has been a consistent decrease in the proportion of admissions to outpatient programs over time. Conversely, there has been a notable increase in the proportion of admissions to residential service programs since FY1718 (Figure 5.4.3).

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

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Patients from Supervisorial District 5 (SD 5)

TREATMENT ADMISSIONS AND DISCHARGES

There were 7,588 treatment admissions for 5,634 patients residing in SD 5, accounting for 14.2% of all admissions and 16.7% of all patients (Table 5.5.1).

Table 5.5.1. Treatment admissions and discharges among patients from SPA 5, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	7,588	14.2	5,634	16.7
Discharged	5,095	13.5	3,754	15.8

The proportion of admissions and patients remained relatively stable from FY1213 to FY1617, with a noticeable spike in FY1718. Thereafter, the proportion stabilized again from FY1819 to FY212 (Figure 5.5.1).

Figure 5.5.1. Trends in admissions and patients from SD 5
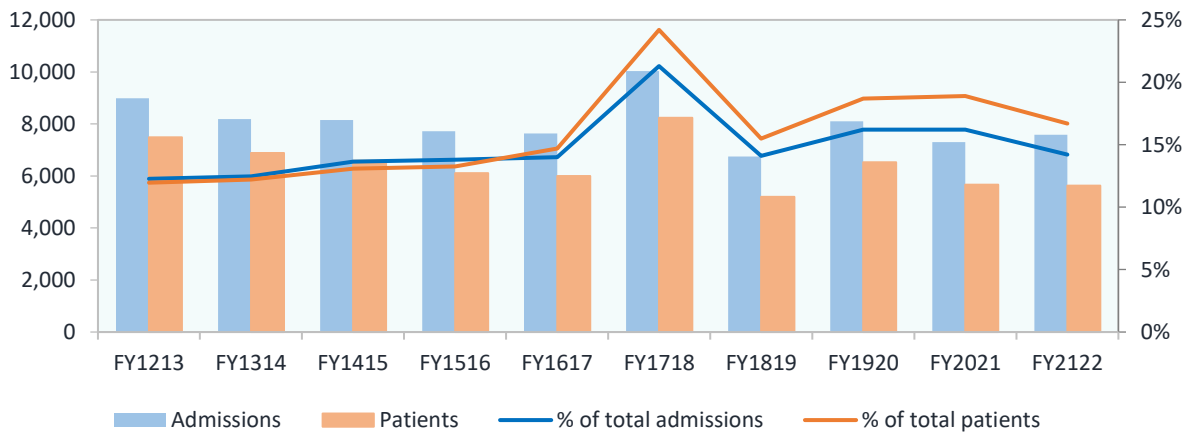
Among the SD 5 patient discharges, 54.5% had positive compliance, with 40.5% completing treatment and 14.0% leaving the program with satisfactory progress (Table 5.5.2).

Table 5.5.2. Discharge status of patients from SD 5, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**2,385**	**54.5**
Completed treatment	1,772	40.5
Left – satisfactory progress	613	14.0
Negative compliance		
(Left – unsatisfactory progress)	**1,757**	**40.2**
Other (Death/incarceration/other)	**232**	**5.3**

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

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PATIENT CHARACTERISTICS

The majority of patients residing in SD 5 were male (66.0%), Latinx (43.3%), ages 26-34 (34.5%), and unemployed (66.5%). Among SD 5 admissions, 49.2% reported having mental health issues (Table 5.5.3).

Table 5.5.3. Characteristics of patients from SD 5, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	3,717	66.0
	Female	1,900	33.8
	Transgender male	-	-
	Transgender female	-	-
	Non-conforming or refuse to state	-	-
RACE	Latinx	2,421	43.3
	White	2,366	42.3
	Black/African American	671	12.0
	Asian	78	1.4
	Pacific Islander	-	-
	American Indian /Alaska Native	24	0.4
	Other	33	0.6
AGE	17 and under	134	2.4
	18-25	534	9.6
	26-34	1,918	34.5
	35-44	1,413	25.4
	45-54	736	13.2
	55-64	582	10.5
	65+	243	4.4
SEXUAL ORIENTATION	Heterosexual	4,943	92.2
	Gay, lesbian, or bisexual	313	5.8
	Unsure/questioning	26	0.5
	Prefer not to state	77	1.4
EDUCATION	Middle school or below	134	2.5
	Some high school	1,038	19.3
	High school completed	2,893	53.7
	Some college or beyond	1,325	24.6
EMPLOYMENT	Employed	1,599	21.6
	Unemployed (seeking)	3,033	41.1
	Unemployed (not seeking)	1,880	25.4
	Not in labor force	876	11.9
LANGUAGE AT HOME	English	6,155	88.2
	Other Language	823	11.8
MENTAL HEALTH ISSUES	Yes	3,630	49.2
	No	3,744	50.8
PHYSICAL HEALTH ISSUES	Yes	745	10.3
	No	6,481	89.7
DISABILITY	Disabled at admission	834	12.1
CRIMINAL JUSTICE	Criminal justice involved	1,393	18.8

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

N ≤ 5 not reported to protect confidentiality.

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PRIMARY SUBSTANCE USE AT ADMISSION

The most commonly reported primary substance use was heroin (28.5%), followed by alcohol (24.6%) and methamphetamine (19.0%) (Table 5.5.4).

Table 5.5.4. Primary substance use among patients from SD 5, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Heroin	2,074	28.5
Alcohol	1,795	24.6
Methamphetamine	1,384	19.0
Prescription drug	1,363	18.7
Marijuana	485	6.7
Cocaine	153	2.1
Other drugs	33	0.5

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

The proportion of primary heroin admissions exhibited a significant increase from FY1213 to FY1718, declining thereafter until FY2122. Heroin consistently ranked as the leading primary substance use since FY1213. Conversely, the proportion of primary marijuana admissions decreased from 22.7% in FY1213 to 6.7% in FY2122. The proportion of alcohol has been on a steady increase since FY1617 (Figure 5.5.2).

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

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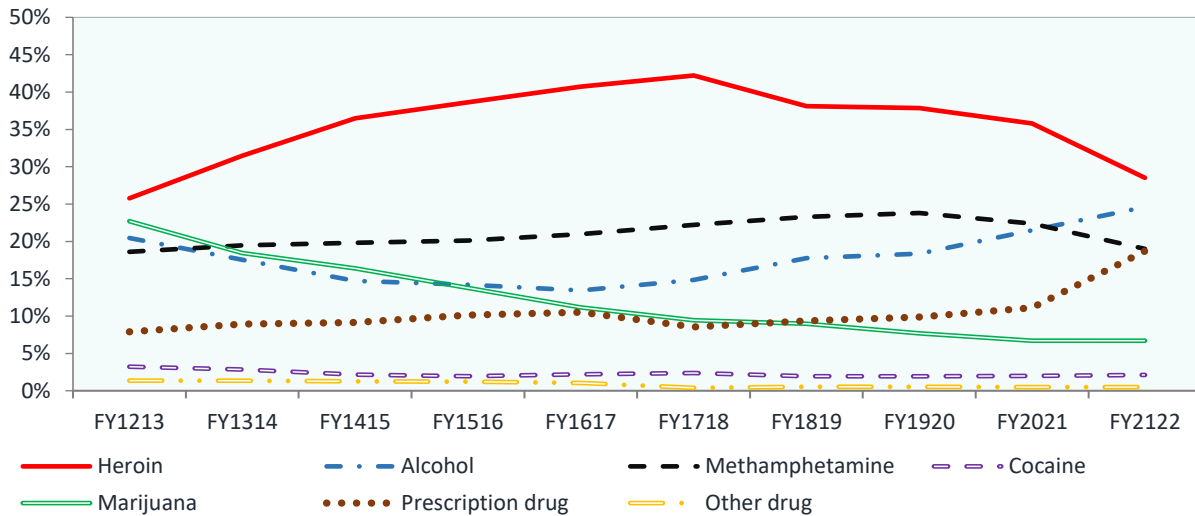
LEVEL OF CARE

The most common level of care that patients residing in SD 5 were admitted to was opioid treatment programs (32.0%), followed by outpatient programs (24.0%) and residential service programs (17.3%) (Table 5.5.5).
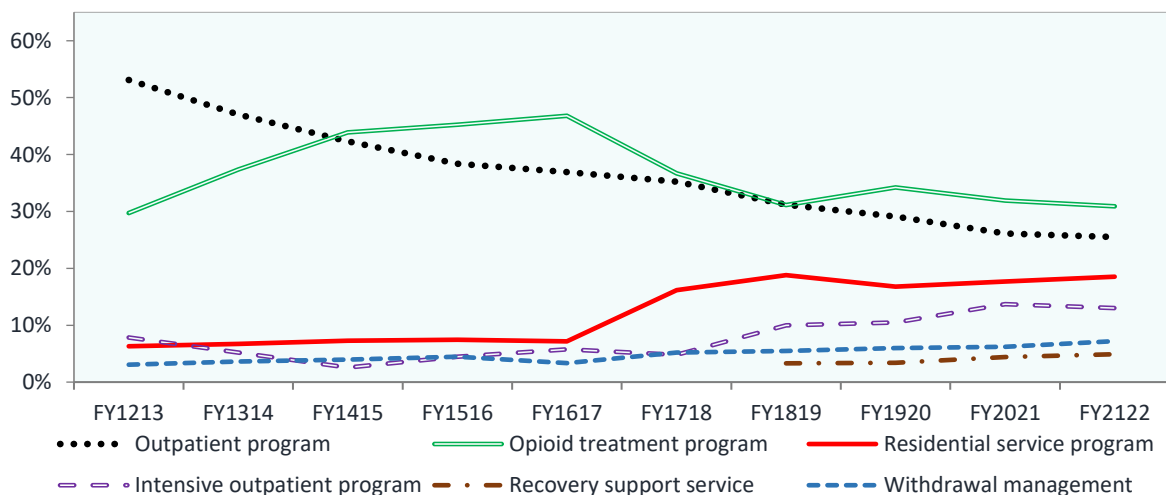
Table 5.5.5. Level of care for among patients from SD 5, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**961**	**12.9**
ASAM WM 1	13	0.2
ASAM WM 2	22	0.3
ASAM WM 3.2	586	7.9
ASAM WM 3.7/4.0	340	4.6
Residential Service	**1,288**	**17.3**
ASAM 3.1	648	8.7
ASAM 3.3	-	-
ASAM 3.5	638	8.5
Intensive Outpatient (ASAM 2.1)	**806**	**10.8**
Outpatient (ASAM 1.0)	**1,790**	**24.0**
Opioid Treatment Program (ASAM OTP)	**2,390**	**32.0**
Recovery Support Service	**227**	**3.0**

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

Over the past decade, the outpatient program and opioid treatment program have alternated as the predominant levels of care. However, there has been a persistent decrease in the proportion of admissions to outpatient programs. Conversely, there has been a notable increase in the proportion of admissions to residential service programs in FY1718 (Figure 5.5.3).

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

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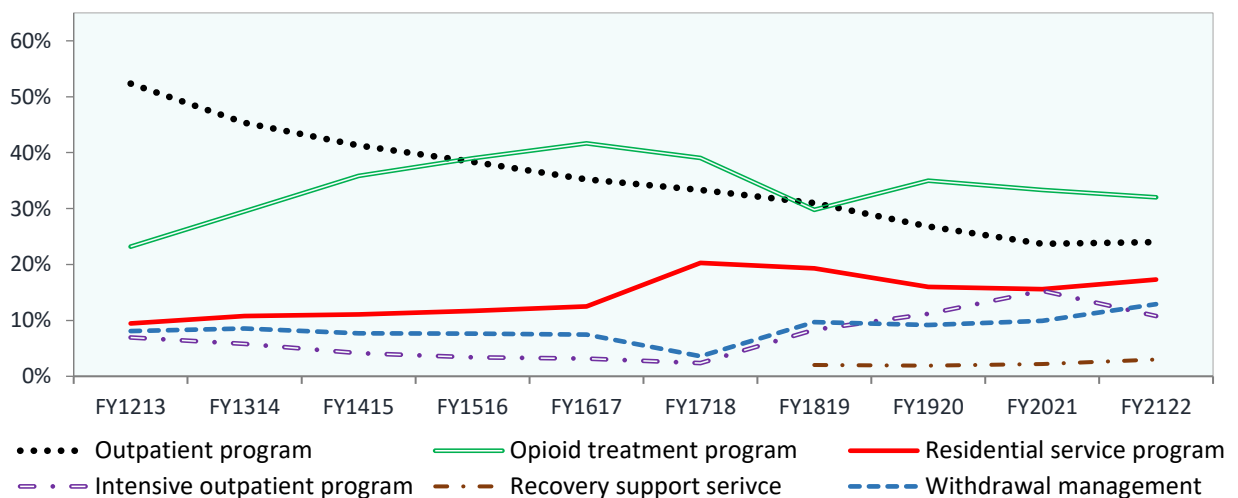
Summary Table 4. Summary statistics of patients from different SDs, FY2122

Categories	SD 1		SD 2		SD 3		SD 4		SD 5	
	N	%	N	%	N	%	N	%	N	%
ADMITTED										
Patients	5,856	17.4	5,577	16.5	4,128	12.2	5,060	15.0	5,634	16.7
Admissions	7,358	13.8	7,174	13.4	5,472	10.3	6,537	12.2	7,588	14.2
DISCHARGED										
Patients	3,595	15.1	3,781	15.9	2,661	11.2	3,206	13.5	3,754	15.8
Admissions	4,578	12.1	4,775	12.6	3,567	9.4	4,141	11.0	5,095	13.5
DISCHARGE STATUS										
Positive compliance	1,830	44.9	2,073	48.0	1,764	56.9	1,802	48.1	2,385	54.5
Completed treatment	1,278	31.4	1,516	35.1	1,304	42.1	1,322	35.3	1,772	40.5
Left – satisfactory progress	552	13.6	557	12.9	460	14.8	480	12.8	613	14.0
Negative compliance	1,911	46.9	1,878	43.5	1,159	37.4	1,724	46.0	1,757	40.2
Other (Death/incarceration/other)	332	8.2	364	8.4	175	5.6	219	5.8	232	5.3
GENDER IDENTITY†										
Male	3,570	61.0	3,302	59.2	2,664	64.7	3,112	61.5	3,717	66.0
Female	2,269	38.8	2,257	40.5	1,443	35.0	1,927	38.1	1,900	33.8
Transgender male	-	-	-	-	-	-	-	-	-	-
Transgender female	10	0.2	12	0.2	7	0.2	9	0.2	-	-
Non-conforming or refuse to state	-	-	-	-	-	-	-	-	-	-
RACE†										
Latinx	4,058	70.3	2,746	49.6	1,806	44.2	3,179	63.3	2,421	43.3
White	1,074	18.6	888	16.0	1,854	45.4	1,208	24.0	2,366	42.3
Black/African American	508	8.8	1,718	31.1	310	7.6	454	9.0	671	12.0
Asian	87	1.5	101	1.8	77	1.9	106	2.1	78	1.4
Pacific Islander	7	0.1	13	0.2	-	-	17	0.3	-	-
American Indian/Alaska Native	26	0.5	28	0.5	20	0.5	38	0.8	24	0.4
Other	15	0.3	39	0.7	18	0.4	23	0.5	33	0.6
AGE†										
17 and under	235	4.1	274	5.0	133	3.3	193	3.9	134	2.4
18-25	540	9.4	608	11.1	432	10.6	557	11.2	534	9.6
26-34	1,631	28.4	1,718	31.3	1,294	31.8	1,529	30.6	1,918	34.5
35-44	1,246	21.7	1,227	22.3	972	23.9	1,137	22.8	1,413	25.4
45-54	857	14.9	650	11.8	531	13.0	666	13.3	736	13.2
55-64	872	15.2	680	12.4	493	12.1	627	12.6	582	10.5
65+	360	6.3	337	6.1	215	5.3	284	5.7	243	4.4

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(Table cont'd)

Categories	SD 1		SD 2		SD 3		SD 4		SD 5	
	N	%	N	%	N	%	N	%	N	%
SEXUAL ORIENTATION†										
Heterosexual	4,917	93.2	4,940	92.5	3,385	90.3	4,457	92.8	4,943	92.2
Gay, lesbian, or bisexual	272	5.2	281	5.3	267	7.1	247	5.1	313	5.8
Unsure/questioning	21	0.4	22	0.4	23	0.6	18	0.4	26	0.5
Prefer not to state	68	1.3	100	1.9	72	1.9	83	1.7	77	1.4
EDUCATION†										
Middle school or below	265	4.8	218	4.1	118	3.0	159	3.3	134	2.5
Some high school	1,595	29.1	1,460	27.5	746	19.2	1,165	24.0	1,038	19.3
High school completed	2,622	47.9	2,520	47.4	1,798	46.3	2,461	50.6	2,893	53.7
Some college or beyond	996	18.2	1,116	21.0	1,225	31.5	1,079	22.2	1,325	24.6
EMPLOYMENT										
Employed	1,561	22.1	1,474	21.2	1,363	26.0	1,444	22.6	1,599	21.6
Unemployed (seeking)	2,156	30.5	1,923	27.6	1,919	36.6	1,900	29.8	3,033	41.1
Unemployed (not seeking)	1,942	27.5	1,852	26.6	1,354	25.8	1,787	28.0	1,880	25.4
Not in labor force	1,401	19.8	1,712	24.6	612	11.7	1,247	19.6	876	11.9
LANGUAGE AT HOME										
English	5,905	91.6	5,922	91.3	4,158	83.7	5,512	93.3	6,155	88.2
Other Language	545	8.4	567	8.7	812	16.3	396	6.7	823	11.8
MENTAL HEALTH ISSUES										
Yes	2,434	35.0	3,057	44.1	2,680	50.1	2,477	39.2	3,630	49.2
No	4,521	65.0	3,874	55.9	2,665	49.9	3,843	60.8	3,744	50.8
PHYSICAL HEALTH ISSUES										
Yes	777	11.3	878	12.8	608	11.8	851	13.7	745	10.3
No	6,111	88.7	5,977	87.2	4,549	88.2	5,381	86.3	6,481	89.7
DISABILITY										
Disabled at admission	777	12.4	1,025	16.5	836	17.0	730	12.6	834	12.1
CRIMINAL JUSTICE										
Criminal justice involved	1,579	22.5	1,527	22.0	712	13.3	1,210	19.0	1,393	18.8

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(Table cont'd)

Categories	SD 1		SD 2		SD 3		SD 4		SD 5	
	N	%	N	%	N	%	N	%	N	%
PRIMARY SUBSTANCE USE										
Heroin	2,084	29.8	1,260	18.2	1,602	30.8	1,588	25.3	2,074	28.5
Methamphetamine	1,785	25.5	1,882	27.2	861	16.6	1,472	23.4	1,384	19.0
Marijuana	685	9.8	979	14.1	347	6.7	656	10.4	485	6.7
Alcohol	1,461	20.9	1,654	23.9	1,380	26.5	1,451	23.1	1,795	24.6
Prescription Drug	765	10.9	768	11.1	886	17.0	934	14.9	1,363	18.7
Cocaine	184	2.6	314	4.5	103	2.0	140	2.2	153	2.1
Other drugs	34	0.5	73	1.1	19	0.4	45	0.7	33	0.5
LEVEL OF CARE										
ASAM 1-Outpatient	2,152	29.3	2,241	31.4	1,416	26.3	1,644	25.5	1,790	24.0
ASAM 2.1-Intensive Outpatient	610	8.3	1,044	14.7	662	12.3	840	13.0	806	10.8
ASAM OTP-Opioid Treatment Program	2,475	33.7	1,626	22.8	1,723	32.0	1,997	30.9	2,390	32.0
ASAM 3.1-Residential Service	599	8.2	631	8.9	317	5.9	691	10.7	648	8.7
ASAM 3.3-Residential Service	15	0.2	9	0.1	-	-	-	-	-	-
ASAM 3.5-Residential Service	702	9.6	757	10.6	396	7.4	502	7.8	638	8.5
ASAM WM 1-Withdrawal Management	-	-	-	-	-	-	-	-	13	0.2
ASAM WM 2-Withdrawal Management	-	-	8	0.1	17	03	-	-	22	0.3
ASAM WM 3.2-Withdrawal Management	346	4.7	243	3.4	372	6.9	321	5.0	586	7.9
ASAM WM 3.7/4.0-Withdrawal Management	111	1.5	144	2.0	285	5.3	140	2.2	340	4.6
Recovery Support Service	328	4.5	423	5.9	184	3.4	317	4.9	227	3.0

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

† Based on unique patient numbers and percentages.

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Chapter 6

Patient Characteristics
by Special Population

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

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Youth

TREATMENT ADMISSIONS AND DISCHARGES

There were 1,153 (2.2%) youth patients, who accounted for 986 (2.9%) treatment admissions (Table 6.1.1).

Table 6.1.1. Treatment admissions and discharges among youth patients, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	1,153	2.2	986	2.9
Discharged	766	2.0	670	2.8

The number and proportion of youth patients and admissions decreased remarkably in the past ten years. The number and proportion of patients decreased from 11,126 (18.6%) in FY1213 to 986 (2.9%) in FY2122 (Figure 6.1.1).

Figure 6.1.1. Trends in youth admissions and patients

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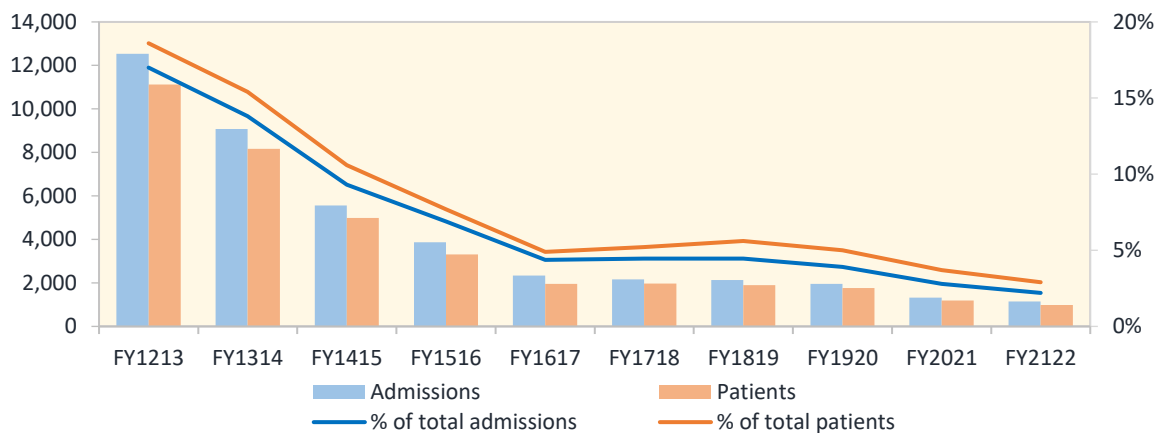
PATIENT CHARACTERISTICS

The majority of youth were male (63.3%), Latinx (74.6%), and age of 17 (36.4%). Among youth admissions, 32.5% had mental health issues, and 23.3% were involved in the criminal justice system (Table 6.1.2).

Table 6.1.2. Characteristics of youth patients, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	624	63.3
	Female	361	36.6
	Transgender male	-	-
	Transgender female	-	-
	Non-conforming or refuse to state	-	-
RACE	Latinx	721	74.6
	White	81	8.4
	Black/African American	153	15.8
	Asian	8	0.8
	Pacific Islander	-	-
	American Indian /Alaska Native	-	-
	Other	-	-
AGE	12	6	0.6
	13	44	4.5
	14	94	9.5
	15	196	19.9
	16	287	29.1
	17	359	36.4
SEXUAL ORIENTATION	Heterosexual	886	90.1
	Gay, lesbian, or bisexual	58	5.9
	Unsure/questioning	15	1.5
	Prefer not to state	24	2.4
HOMELESS	Homeless at admission	-	-
MENTAL HEALTH ISSUES	Yes	362	32.5
	No	752	67.5
PHYSICAL HEALTH ISSUES	Yes	68	6.7
	No	954	93.3
DISABILITY	Yes	73	7.5
	No	894	92.5
CRIMINAL JUSTICE	Yes	261	23.3
	No	860	76.7

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

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PRIMARY SUBSTANCE USE AT ADMISSION

The most commonly reported primary substance use by far was marijuana (84.3%), followed by prescription drug (6.1%) and alcohol (5.0%) (Table 6.1.3).

Table 6.1.3. Primary substance use among youth patients, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Marijuana	882	84.3
Prescription drug	64	6.1
Alcohol	52	5.0
Methamphetamine	35	3.3
Cocaine	-	-
Heroin	-	-
Other drugs	7	0.7

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

Marijuana has consistently been the primary substance of use among youth over the past decade, with its proportion of admissions steadily increasing from 75.1% in FY1213 to 84.3% in FY2122. On the other hand, primary alcohol admissions have declined from 18.6% in FY1213 to 5.0% in FY2122. Primary methamphetamine admissions experienced an initial increase from 4.1% in FY1213 to 10.1% in FY1617, but subsequently decreased to 3.3% in FY2122 (Figure 6.1.2).

Figure 6.1.2. Trends in primary substance use among youth patients

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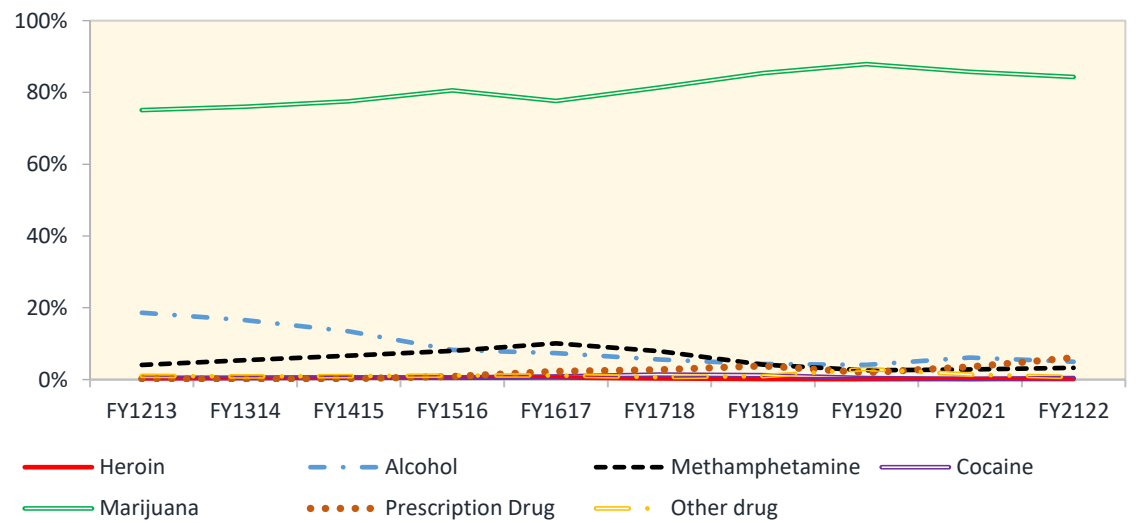
LEVEL OF CARE

The majority of youth were admitted to outpatient programs (79.2%), followed by intensive outpatient programs (12.3%) and residential service programs (7.0%) (Table 6.1.4).

Table 6.1.4. Level of care among youth patients, FY2122

LEVEL OF CARE	ADMISSIONS	%
Residential Service	**79**	**7.0**
ASAM 3.5	79	7.0
Outpatient (ASAM 1.0)	**894**	**79.2**
Intensive Outpatient (ASAM 2.1)	**139**	**12.3**
Recovery Support Service	**17**	**1.5**

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

Outpatient programs have consistently been the primary level of care for youth over the past decade. The proportion of youth admissions to intensive outpatient programs initially decreased from FY1213 to FY1718, but experienced an increase to 12.3% in FY2122. In contrast, the proportion of admissions to residential service programs showed an opposite trend, increasing from FY1213 to FY1718 and subsequently decreasing to 7.0% in FY2122 (Figure 6.1.3).

Figure 6.1.3. Trends in level of care among youth patients

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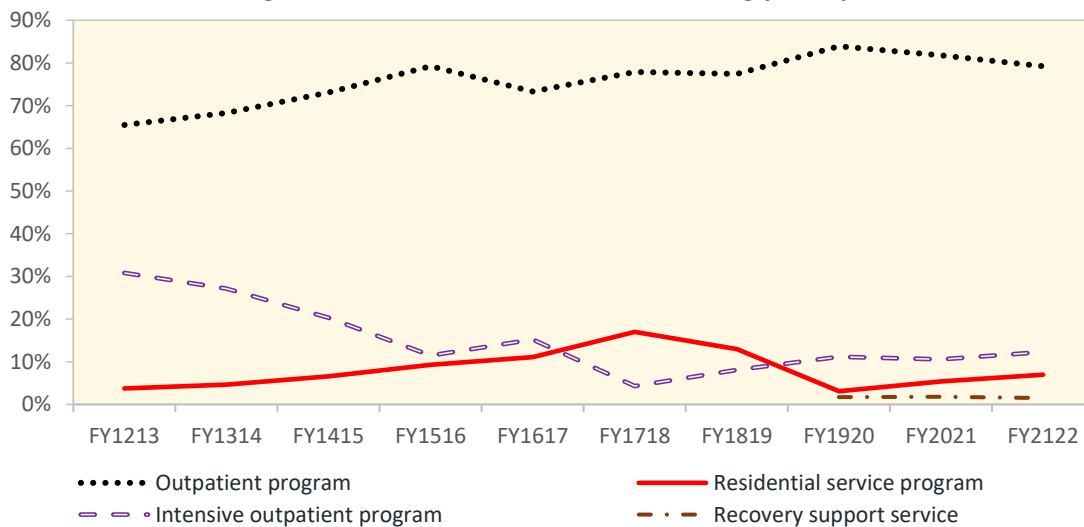
DISCHARGE STATUS AND TREATMENT OUTCOMES AT DISCHARGE

Of the discharges among youth with discharge status, 32.1% had positive compliance, with 20.3% completing treatment and 11.8% leaving with satisfactory progress (Table 6.1.5).

Table 6.1.5. Discharge status of youth patients, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**226**	**32.1**
Completed treatment	143	20.3
Left – satisfactory progress	83	11.8
Negative compliance	**418**	**59.4**
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	**60**	**8.5**

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

According to the Treatment Effectiveness Assessment (TEA) used to gauge recovery progress per the patients' perspective at the time of discharge, 25% of youth reported they were better in taking care of personal responsibilities (e.g., paying bills, following through on personal or professional commitments), 29% reported they were better with handling drug and alcohol use (e.g., the frequency and amount of use, money spent on drugs, amount of drug craving, being sick, etc.), 29% reported they were better in physical health (e.g., eating and sleeping properly, exercising, taking care of health or dental problems), 28% reported they were better in mental health (e.g., feeling good about themselves), and 20% reported they were a better community member (e.g., obeying laws, meeting your responsibilities to society, positive impact on others) compared to at admission (Figure 6.1.4).

Figure 6.1.4. Treatment Effectiveness Assessment (TEA) for youth, FY2122

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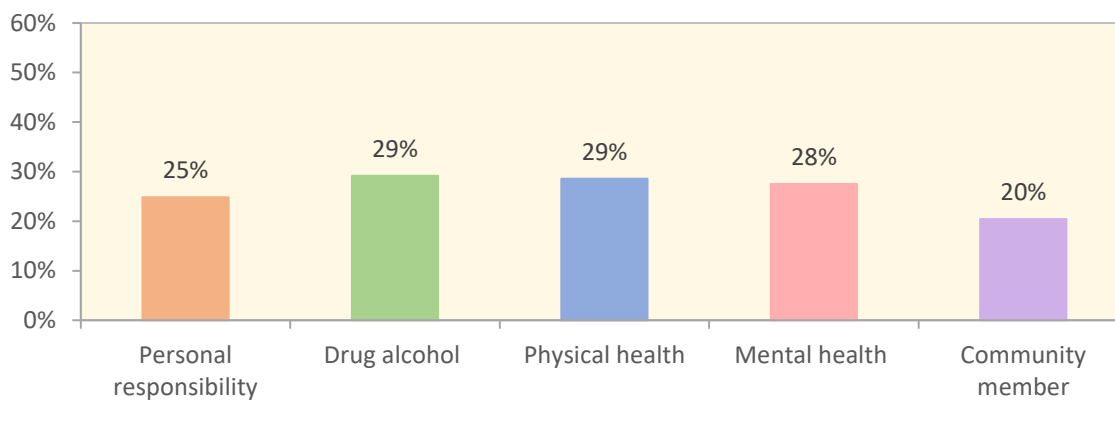
Transitional Age Youth (TAY)

TREATMENT ADMISSIONS AND DISCHARGES

There were 4,123 (12.2%) TAY patients aged 16 to 25, who accounted for 6,379 (11.9%) treatment admissions (Table 6.2.1).

Table 6.2.1. Treatment admissions and discharges among TAY patients, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	6,379	11.9	4,123	12.2
Discharged	5,000	13.2	3,315	14.0

The number and proportion of admissions and patients showed a consistent downward trend over the past ten fiscal years. The number and proportion of TAY admissions decreased from 19,905 (27.2%) in FY1213 to 6,379 (11.9%) in FY2122 (Figure 6.2.1).

Figure 6.2.1. Trends in TAY admissions and patients

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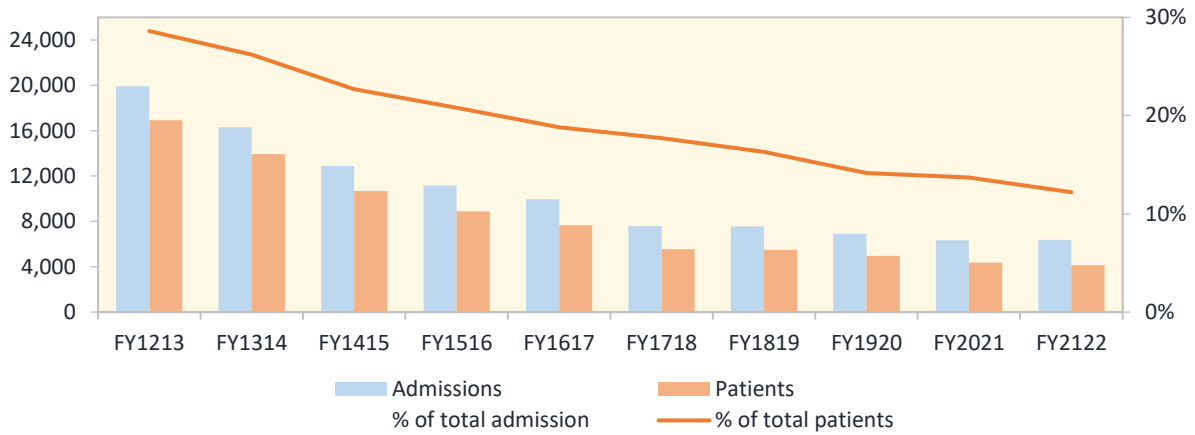
PATIENT CHARACTERISTICS

The majority of TAY patients were male (60.2%), Latinx (68.4%), age 25 (21.6%), and unemployed (64.3%). Among TAY admissions, 51.0% reported having mental health issues, 29.7% were homeless, and 26.0% were involved with the criminal justice system (Table 6.2.2).

Table 6.2.2. Characteristics of TAY patients, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	2,484	60.2
	Female	1,620	39.3
	Transgender male	-	-
	Transgender female	14	0.3
	Non-conforming or refuse to state	-	-
RACE	Latinx	2,800	68.4
	White	649	15.8
	Black/African American	540	13.2
	Asian	54	1.3
	Pacific Islander	7	0.2
	American Indian/Alaska Native	19	0.5
	Other	26	0.6
AGE	16	287	7.0
	17	345	8.4
	18	229	5.6
	19	232	5.6
	20	269	6.5
	21	343	8.3
	22	407	9.9
	23	514	12.5
	24	608	14.8
	25	889	21.6
SEXUAL ORIENTATION	Heterosexual	3,662	89.9
	Gay, lesbian, or bisexual	296	7.3
	Unsure/questioning	28	0.7
	Prefer not to state	89	2.2
EDUCATION	Middle school or below	60	1.5
	Some high school	1,474	37.8
	High school completed	1,912	49.0
	Some college or beyond	455	11.7
EMPLOYMENT	Employed	1,013	16.4
	Unemployed (seeking)	2,316	37.4
	Unemployed (not seeking)	1,664	26.9
	Not in labor force	1,195	19.3
HOMELESS	Homeless at admission	1,225	29.7
MENTAL HEALTH ISSUES	Yes	3,191	51.0
	No	3,062	49.0
PHYSICAL HEALTH ISSUES	Yes	610	10.0
	No	5,518	90.0
DISABILITY	Yes	614	10.8
	No	5,079	89.2
CRIMINAL JUSTICE	Yes	1,629	26.0
	No	4,636	74.0

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

N ≤ 5 not reported to protect confidentiality.

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PRIMARY SUBSTANCE USE AT ADMISSION

Methamphetamine (27.9%) was the most common primary substance use among TAY admissions, followed by marijuana (24.6%) and prescription drug (19.9%) (Table 6.2.3).

Table 6.2.3. Primary substance use among TAY patients, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Methamphetamine	1,727	27.9
Marijuana	1,521	24.6
Prescription drug	1,233	19.9
Alcohol	1,072	17.3
Heroin	468	7.6
Cocaine	124	2.0
Other drugs	50	0.8

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

Marijuana and methamphetamine have alternated as the primary substance use for TAY patients over the past ten years. Marijuana was the most common primary substance use from FY1213 to FY1415 and again in FY1617 but exhibited an overall decreasing trend. Conversely, the proportion of TAY patients reporting methamphetamine as the primary substance use consistently increased from FY1213 to FY1819 and has remained the most common primary substance use for TAY in the past five fiscal years, albeit with a decreasing trend. Additionally, there has been a substantial increase in the proportion of prescription drug admissions in the last three fiscal years, while the proportion of primary heroin admissions has declined from FY1415 to FY2122 (Figure 6.2.2).

Figure 6.2.2. Trends in primary substance use among TAY patients

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P a g e | 122
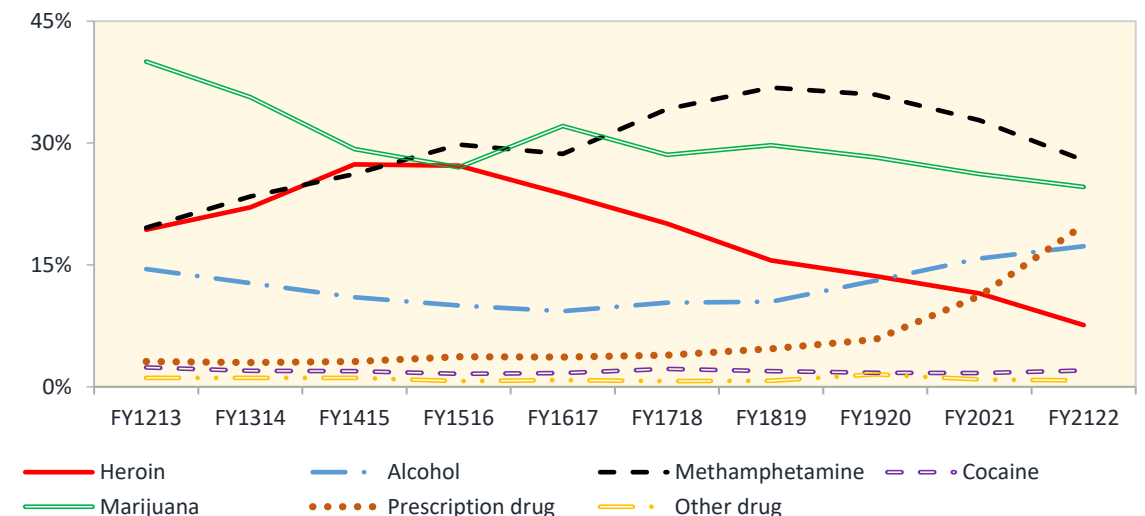
LEVEL OF CARE

TAY patients were most commonly treated in outpatient programs (34.1%), followed by residential service programs (30.9%) and intensive outpatient programs (13.9%) (Table 6.2.4).

Table 6.2.4. Level of care among TAY patients, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**553**	**8.7**
ASAM WM 1	-	-
ASAM WM 2	14	0.2
ASAM WM 3.2	401	6.3
ASAM WM 3.7/4.0	137	2.2
Residential Service	**1,955**	**30.9**
ASAM 3.1	954	15.1
ASAM 3.3	12	0.2
ASAM 3.5	989	15.6
Intensive Outpatient (ASAM 2.1)	**876**	**13.9**
Outpatient (ASAM 1.0)	**2,153**	**34.1**
Opioid Treatment Program (ASAM OTP)	**595**	**9.4**
Recovery Support Service	**189**	**3.0**

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

Over the past ten fiscal years, there has been a gradual decrease in the proportion of TAY admissions to outpatient programs. Conversely, the proportion of TAY admissions to residential service programs increased from FY1213 to FY1718 and has since stabilized (Figure 6.2.3).

Figure 6.2.3. Trends in level of care among TAY patients

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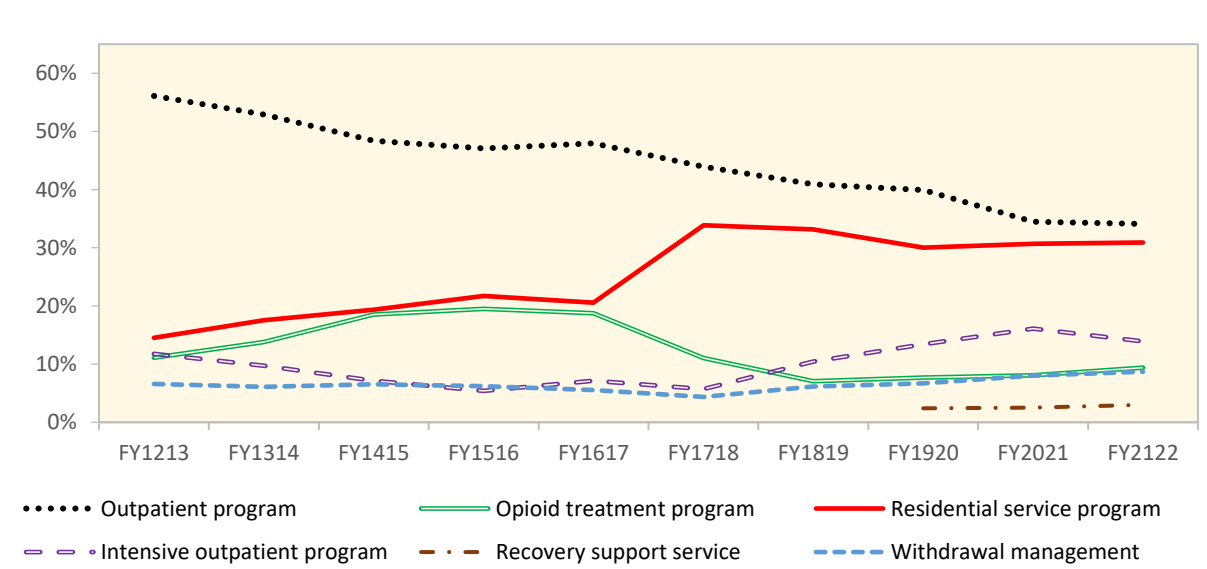
DISCHARGE STATUS AND TREATMENT OUTCOMES AT DISCHARGE

Of the discharges among TAY with discharge status, 45.8% had positive compliance, with 33.1% completing treatment and 12.7% leaving with satisfactory progress (Table 6.2.5).

Table 6.2.5. Discharge status of TAY patients, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**2,062**	**45.8**
Completed treatment	1,491	33.1
Left – satisfactory progress	571	12.7
Negative compliance	**2,084**	**46.3**
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	**354**	**7.9**

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

According to the Treatment Effectiveness Assessment (TEA) used to gauge recovery progress per the patients' perspective at the time of discharge, 31% of Transitional Age Youth (TAY) reported they were better in taking care of personal responsibilities (e.g., paying bills, following through on personal or professional commitments), 38% reported they were better with handling drug and alcohol use (e.g., the frequency and amount of use, money spent on drugs, amount of drug craving, being sick, etc.), 31% reported they were better in physical health (e.g., eating and sleeping properly, exercising, taking care of health or dental problems), 31% reported they were better in mental health (e.g., feeling good about themselves), and 31% reported they were a better community member (e.g., obeying laws, meeting your responsibilities to society, positive impact on others) compared to at admission (Figure 6.2.4).

Figure 6.2.3. Treatment Effectiveness Assessment (TEA) for Transitional Age Youth (TAY), FY2122

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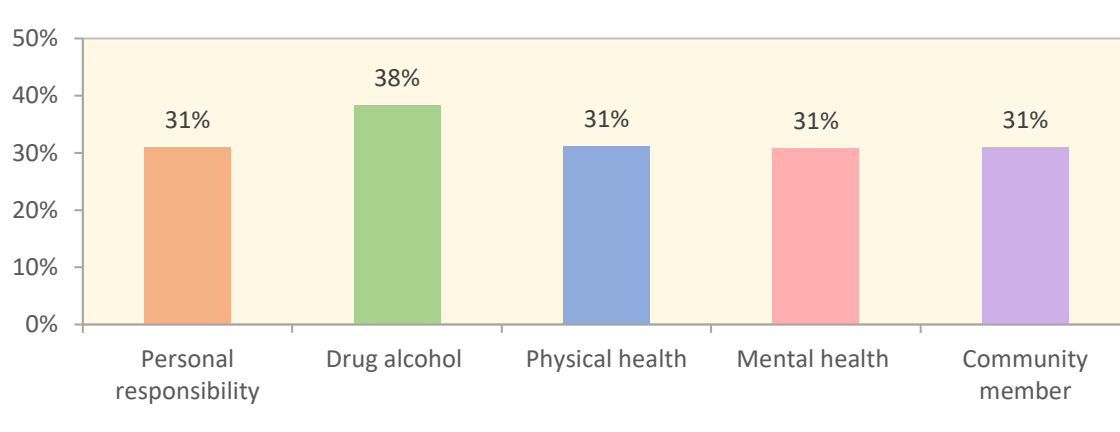
Older Adults

TREATMENT ADMISSIONS AND DISCHARGES

There were 1,857 (3.5%) older adult patients aged 65 and above, who accounted for 1,578 (4.7%) treatment admissions (Table 6.3.1).

Table 6.3.1. Treatment admissions and discharges among older adult patients, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	1,857	3.5	1,578	4.7
Discharged	657	1.7	529	2.2

From FY1213 to FY1617, the proportion of admissions and patients in the older adult category remained stable, while the actual number of older adult admissions and patients decreased. However, starting from FY1718, both the proportion and number of older adult admissions and patients have shown fluctuations, with an overall increasing trend (Figure 6.3.1).

Figure 6.3.1. Trends in older adult admissions and patients

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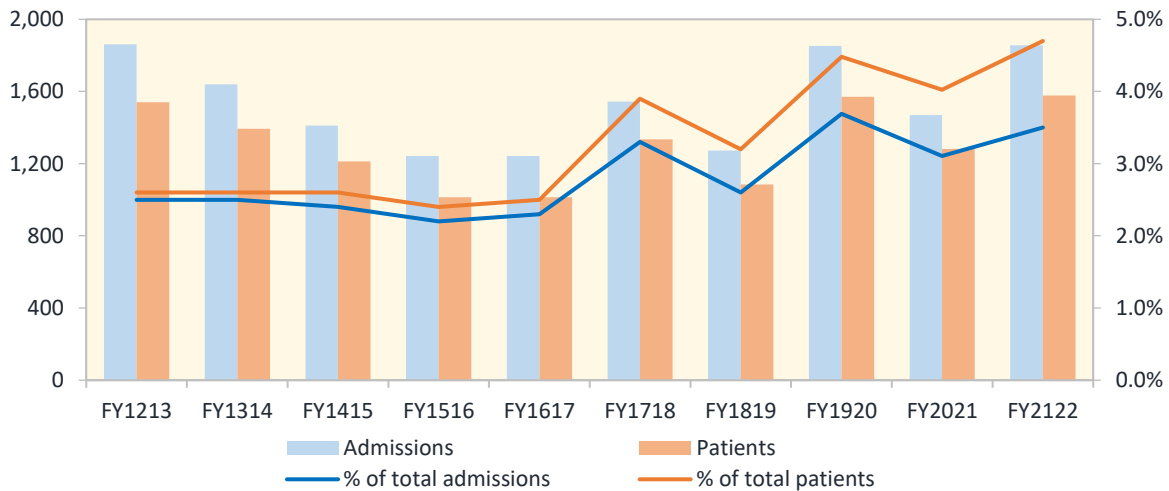
PATIENT CHARACTERISTICS

The majority of older adult patients were male (72.7%), White (37.4%), ages 65-69 (64.7%), and unemployed (51.9%). Among older adult admissions, 22.3% reported mental health issues, 21.9% reported a disability, and 17.6% reported physical health issues (Table 6.3.2).

Table 6.3.2. Characteristics of older adult patients, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	1,147	72.7
	Female	430	27.2
	Transgender male	-	-
	Transgender female	-	-
	Non-conforming or refuse to state	-	-
RACE	Latinx	566	36.1
	White	587	37.4
	Black/African American	387	24.7
	Asian	12	0.8
	Pacific Islander	-	-
	American Indian/Alaska Native	11	0.7
	Other	-	-
AGE	65-69	1,021	64.7
	70-74	416	26.4
	75-79	106	6.7
	80-84	28	1.8
	85+	7	0.4
SEXUAL ORIENTATION	Heterosexual	1,215	97.7
	Gay, lesbian, or bisexual	16	1.3
	Unsure/questioning	-	-
	Prefer not to state	12	1.0
EDUCATION	Middle school or below	76	4.9
	Some high school	357	23.1
	High school completed	807	52.2
	Some college or beyond	306	19.8
EMPLOYMENT	Employed	213	11.6
	Unemployed (seeking)	241	13.1
	Unemployed (not seeking)	714	38.8
	Not in labor force	672	36.5
HOMELESS	Homeless at admission	146	9.3
MENTAL HEALTH ISSUES	Yes	407	22.3
	No	1,415	77.7
PHYSICAL HEALTH ISSUES	Yes	319	17.6
	No	1,498	82.4
DISABILITY	Yes	381	21.9
	No	1,355	78.1
CRIMINAL JUSTICE	Yes	116	6.3
	No	1,720	93.7

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

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PRIMARY SUBSTANCE USE AT ADMISSION

The most commonly reported primary substance use among older adults was heroin (69.6%), followed by prescription drugs (14.9%) and alcohol (8.7%) (Table 6.3.3).

Table 6.3.3. Primary substance use among older adult patients, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Heroin	1,274	69.6
Prescription drug	272	14.9
Alcohol	160	8.7
Cocaine	67	3.7
Methamphetamine	39	2.1
Marijuana	9	0.5
Other drugs	10	0.5

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

The proportion of older patients reporting heroin as the primary substance use increased from FY1213-FY1516 then remained high through FY2122. Heroin was the most common primary substance use among older adults for nine of the past ten fiscal years. The proportion of older adults reporting alcohol as the primary substance use significantly decreased from FY1213 to FY1516, and in FY1819, prescription drug surpassed alcohol (Figure 6.3.2).

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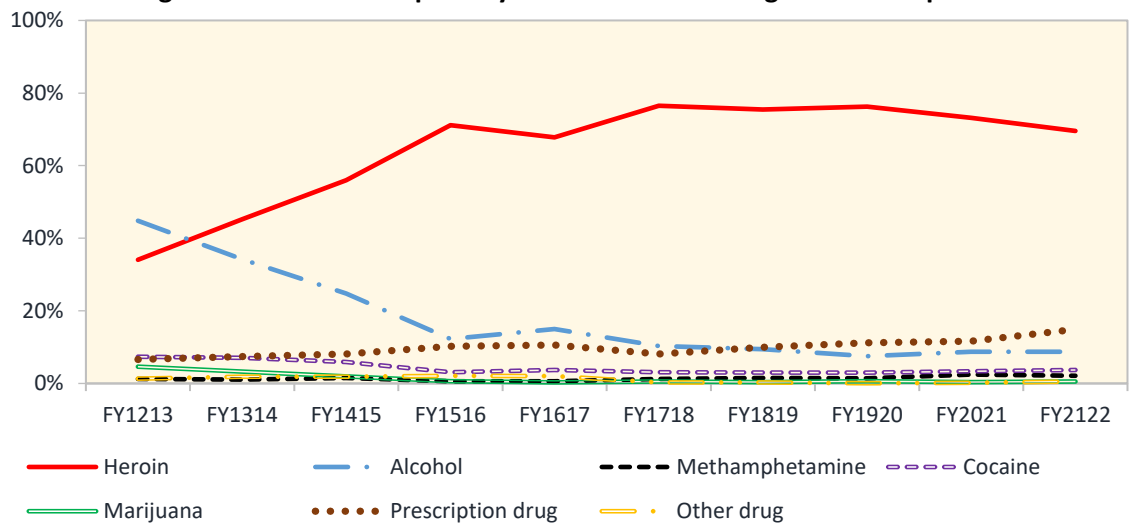
LEVEL OF CARE

The majority (81.5%) of older adult patients were treated in opioid treatment programs. Relatively few were treated in residential service programs (6.0%) and outpatient programs (4.8%) (Table 6.3.4).

Table 6.3.4. Level of care among older adult patients, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**51**	**2.8**
ASAM WM 3.2	33	1.8
ASAM WM 3.7/4.0	18	1.0
Residential Service	**112**	**6.0**
ASAM 3.1	58	3.1
ASAM 3.3	-	-
ASAM 3.5	53	2.9
Intensive Outpatient (ASAM 2.1)	**61**	**3.3**
Outpatient (ASAM 1.0)	**89**	**4.8**
Opioid Treatment Program (ASAM OTP)	**1,510**	**81.5**
Recovery Support Service	**29**	**1.6**

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

Since FY1213, older adult admissions to opioid treatment programs increased sharply, surpassing outpatient programs in FY1314 to become and remain the predominant level of care among older adults. On the contrary, older adult admissions to outpatient programs decreased dramatically from FY1213 to FY1516 and remained relatively low in the recent seven fiscal years (Figure 6.3.3).

Figure 6.3.3. Trends in level of care among older adult patients
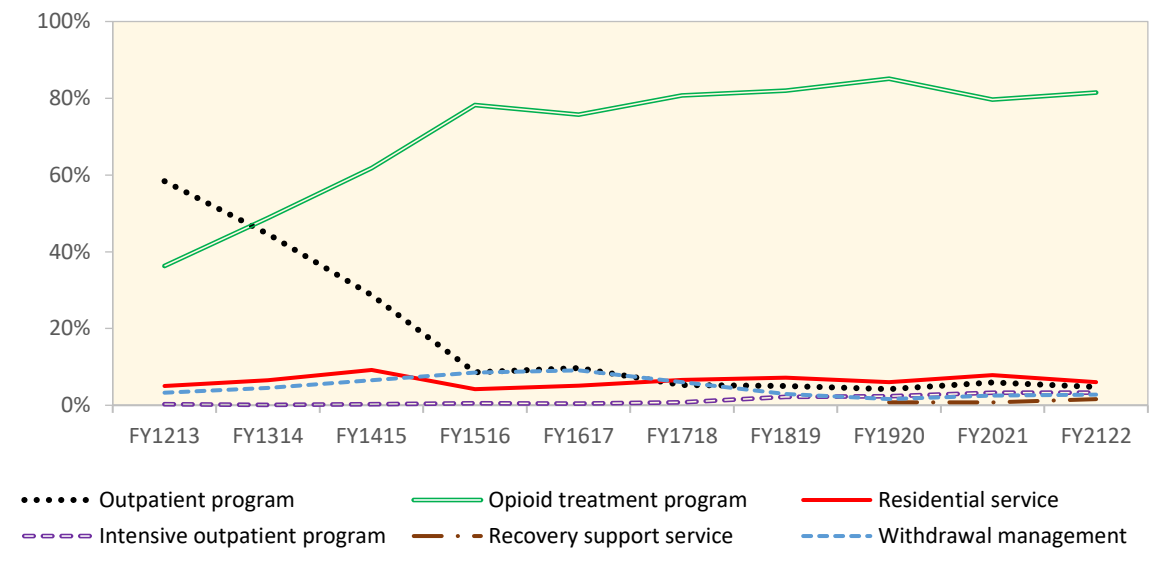
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DISCHARGE STATUS AND TREATMENT OUTCOMES AT DISCHARGE

Of the discharges among older adults with discharge status, 60.4% had positive compliance, with 33.6% completing treatment and 26.8% leaving with satisfactory progress (Table 6.3.5).

Table 6.3.5. Discharge status of older adult patients, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**361**	**60.4**
Completed treatment	201	33.6
Left – satisfactory progress	160	26.8
Negative compliance	**213**	**35.6**
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	**24**	**4.0**

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

According to the Treatment Effectiveness Assessment (TEA) used to gauge recovery progress per the patients' perspective at the time of discharge, 32% of older adults reported they were better in taking care of personal responsibilities (e.g., paying bills, following through on personal or professional commitments), 46% of older adults reported they were better with handling drug and alcohol use (e.g., the frequency and amount of use, money spent on drugs, amount of drug craving, being sick, etc.), 35% reported they were better in physical health (e.g., eating and sleeping properly, exercising, taking care of health or dental problems), 30% reported they were better in mental health (e.g., feeling good about themselves), and 35% reported they were a better community member (e.g., obeying laws, meeting your responsibilities to society, positive impact on others) compared to at admission (Figure 6.3.4).

Figure 6.3.4. Treatment Effectiveness Assessment (TEA) for older adults, FY2122

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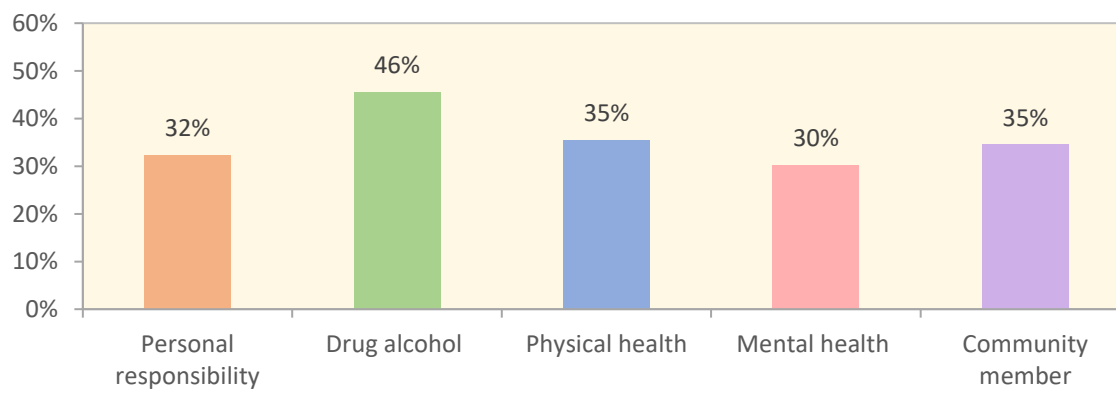
Patients Involved in the Criminal Justice System[3]

TREATMENT ADMISSIONS AND DISCHARGES

There were 8,202 (24.3%) patients involved in the criminal system at admission, who accounted for 12,116 (22.7%) treatment admissions (Table 6.4.1).

Table 6.4.1. Treatment admissions and discharges among patients involved in the criminal justice system, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	12,116	22.7	8,202	24.3
Discharged	9,692	25.7	6,718	28.3

The proportion of patients who were involved in the criminal justice system remained stable from 15.5% in FY1213 to 16.5% in FY1516 then decreased slightly to 12.8% in FY1718, followed by a steady increase to 24.3% in FY2122 (Figure 6.4.1).

Figure 6.4.1. Trends in the criminal justice system-involved admissions and patients
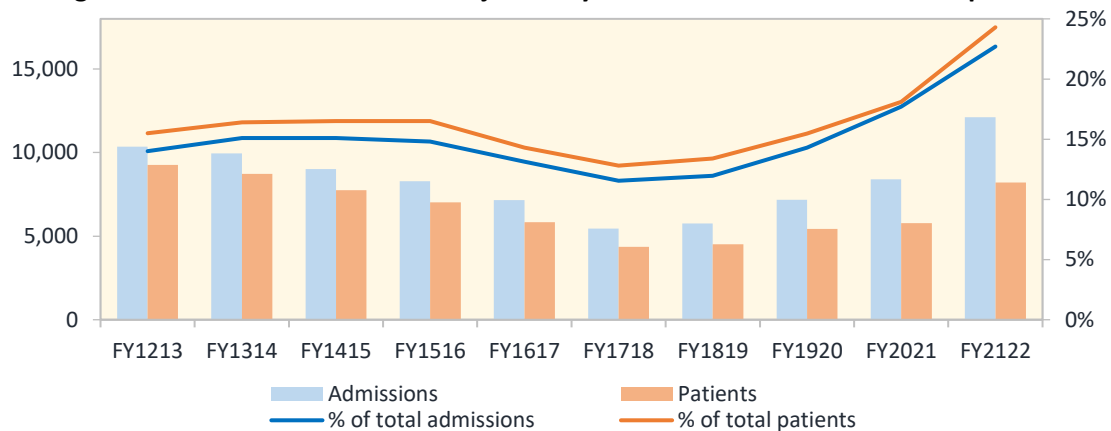
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[3] Patients involved in the criminal justice system, including those who were referred by the criminal justice system (e.g., Proposition 36/ Probation or Parole, Post-release Community Supervision (AB 109), Adult Felon Drug Court, Dependency Drug Court, etc.), who reported their eligibility of criminal justice system programs (e.g., Drug Court, AB109, Proposition 36, Parolee Service Network, Proposition 47), or who were matched with AB109 or other probation source lists.

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PATIENT CHARACTERISTICS

The majority of patients involved in the criminal justice system were male (75.5%), Latinx (61.3%), ages 26-34 (37.0%), and unemployed (70.3%). More than half (53.6%) reported having mental health issues at admission, and 47.6% were homeless at admission (Table 6.4.2).

Table 6.4.2. Characteristics of patients involved in the criminal justice system, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	6,189	75.5
	Female	1,978	24.1
	Transgender male	8	0.1
	Transgender female	25	0.3
	Non-conforming or refuse to state	-	-
RACE	Latinx	5,009	61.3
	White	1,538	18.8
	Black/African American	1,403	17.2
	Asian	115	1.4
	Pacific Islander	20	0.2
	American Indian/Alaska Native	47	0.6
	Other	34	0.4
AGE	17 and under	232	2.8
	18-25	980	12.0
	26-34	3,037	37.0
	35-44	2,144	26.1
	45-54	1,094	13.3
	55-64	626	7.6
	65+	87	1.1
SEXUAL ORIENTATION	Heterosexual	7,424	92.6
	Gay, lesbian, or bisexual	436	5.4
	Unsure/questioning	39	0.5
	Prefer not to state	118	1.5
EDUCATION	Middle school or below	257	3.2
	Some high school	2,445	30.7
	High school completed	3,826	48.0
	Some college or beyond	1,441	18.1
EMPLOYMENT	Employed	1,612	13.5
	Unemployed (seeking)	4,488	37.5
	Unemployed (not seeking)	3,930	32.8
	Not in labor force	1,949	16.3
HOMELESS	Homeless at admission	3,907	47.6
MENTAL HEALTH ISSUES	Yes	6,405	53.6
	No	5,555	46.4
PHYSICAL HEALTH ISSUES	Yes	1,230	10.4
	No	10,617	89.6
DISABILITY	Yes	1,725	15.7
	No	9,241	84.3

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

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PRIMARY SUBSTANCE USE AT ADMISSION

The most common primary substance use among patients involved in the criminal justice system was methamphetamine (43.3%), followed by alcohol (21.9%) and heroin (14.6%) (Table 6.4.3).

Table 6.4.3. Primary substance use among patients involved in the criminal justice system, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Methamphetamine	5,171	43.3
Alcohol	2,616	21.9
Heroin	1,742	14.6
Marijuana	1,098	9.2
Prescription drug	737	6.2
Cocaine	432	3.6
Other drugs	147	1.2

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

Methamphetamine has consistently been the primary substance use among patients involved in the criminal justice system over the past ten fiscal years. Its proportion has shown a continuous increase from FY1213, reaching a peak in FY1819, and subsequently experiencing a slight decrease through FY2122. The proportion of primary cocaine admissions and primary marijuana admissions decreased consistently from FY1213 to FY2122, while primary alcohol admissions and primary heroin admissions increased slightly overall during the same period (Figure 6.4.2).

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

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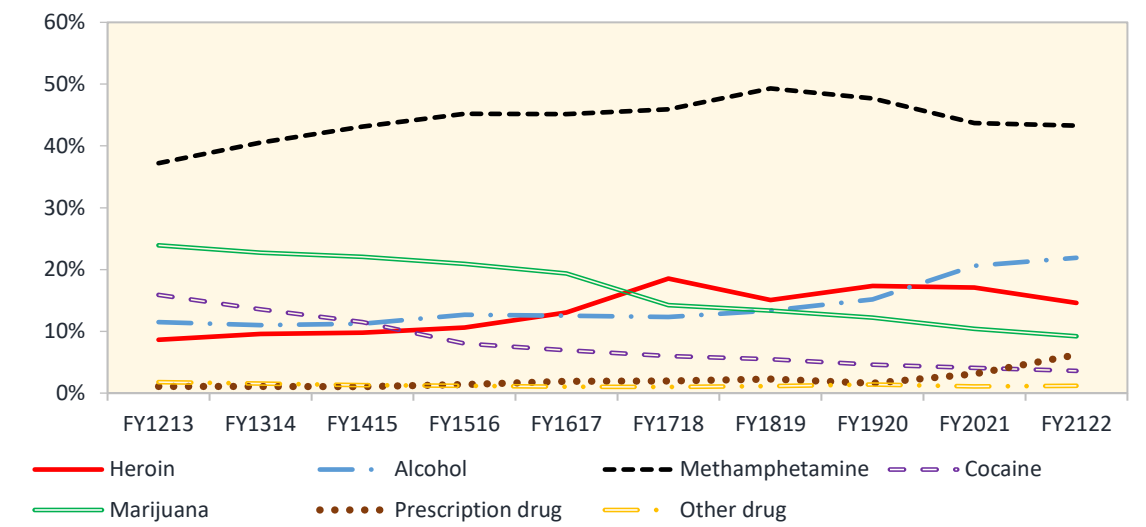
LEVEL OF CARE

Patients involved in the criminal justice system were most commonly admitted to residential service programs (42.0%), followed by outpatient programs (24.7%) and intensive outpatient programs (15.8%) (Table 6.4.4).

Table 6.4.4. Level of care among patients involved in the criminal justice system, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**867**	**7.2**
ASAM WM 1	6	0.0
ASAM WM 2	20	0.2
ASAM WM 3.2	587	4.9
ASAM WM 3.7/4.0	254	2.1
Residential Service	**5,063**	**42.0**
ASAM 3.1	2,619	21.7
ASAM 3.3	53	0.4
ASAM 3.5	2,391	19.8
Intensive Outpatient (ASAM 2.1)	**1,905**	**15.8**
Outpatient (ASAM 1.0)	**2,975**	**24.7**
Opioid Treatment Program (ASAM OTP)	**886**	**7.4**
Recovery Support Service	**350**	**2.9**

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

The proportion of criminal justice-involved admissions to residential service programs exhibited a steady increase, rising from 22.4% in FY1213 to 42.0% in FY2122. In FY2021, residential service programs surpassed outpatient programs as the most common level of care, while the proportion of admissions to outpatient programs showed a consistent decline since FY1415 (Figure 6.4.3).

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

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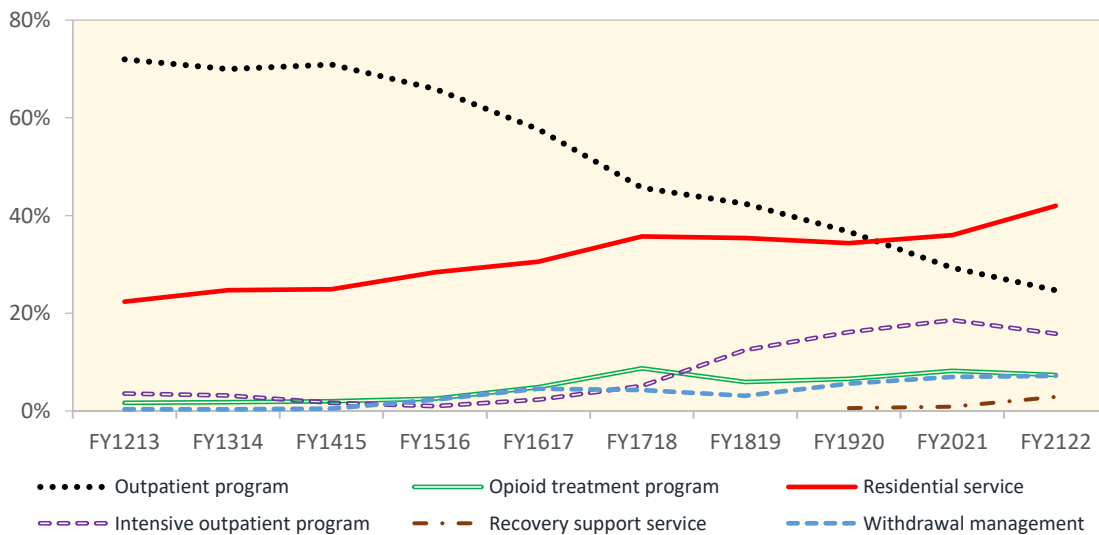
DISCHARGE STATUS AND TREATMENT OUTCOMES AT DISCHARGE

Of the discharges among criminal justice-involved patients with discharge status, 56.1% had positive compliance, with 45.6% completing treatment and 10.4% leaving with satisfactory progress (Table 6.4.5).
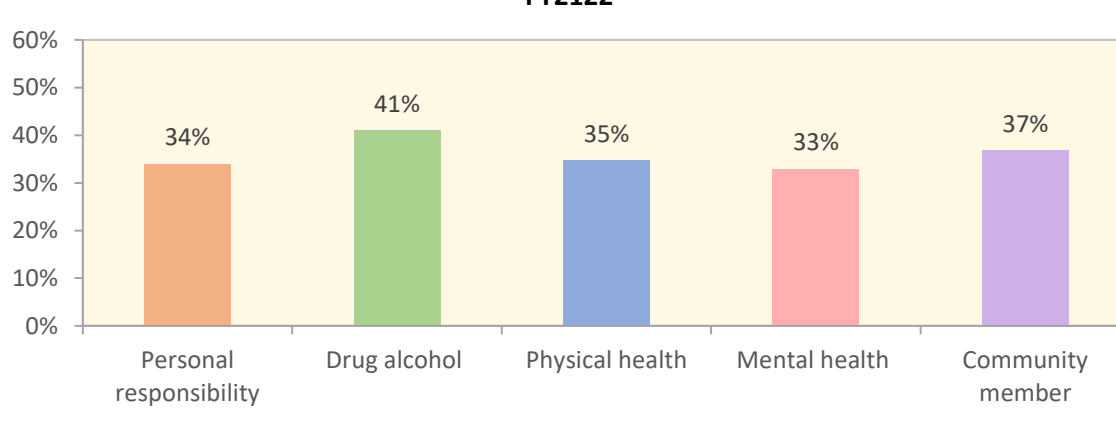
Table 6.4.5. Discharge status of criminal justice system-involved patients, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**4,943**	**56.1**
Completed treatment	4,022	45.6
Left – satisfactory progress	921	10.4
Negative compliance	**3,179**	**36.1**
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	694	7.9

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

According to the Treatment Effectiveness Assessment (TEA) used to gauge recovery progress per the patients' perspective at the time of discharge, 34% of criminal justice system-involved patients reported they were better in taking care of personal responsibilities (e.g., paying bills, following through on personal or professional commitments), 41% reported they were better with handling drug and alcohol use (e.g., the frequency and amount of use, money spent on drugs, amount of drug craving, being sick, etc.), 35% reported they were better in physical health (e.g., eating and sleeping properly, exercising, taking care of health or dental problems), 33% reported they were better in mental health (e.g., feeling good about themselves), and 37% reported they were a better community member (e.g., obeying laws, meeting your responsibilities to society, positive impact on others) compared to at admission (Figure 6.4.4).

Figure 6.4.4. Treatment Effectiveness Assessment for criminal justice system-involved patients, FY2122

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Patients who were Experiencing Homelessness at Admission

TREATMENT ADMISSIONS AND DISCHARGES

There were 11,464 (33.9%) patients experiencing homelessness at admission, who accounted for 18,722 (35.0%) treatment admissions (Table 6.5.1).

Table 6.5.1. Treatment admissions and discharges among patients experiencing homelessness, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	18,722	35.0	11,464	33.9
Discharged	15,311	40.5	9,806	41.3

The number and proportion of patients experiencing homelessness showed overall increasing trends from 8,900 (14.9%) in FY1213 to 11,464 (33.9%) in FY2122. The number and proportion of admissions among patients experiencing homelessness showed similar trends, increasing from 10,237 (13.8%) in FY1213 to 18,722 (35.0%) in FY2122 (Figure 6.5.1).

Figure 6.5.1. Trends in homelessness-experiencing admissions and patients

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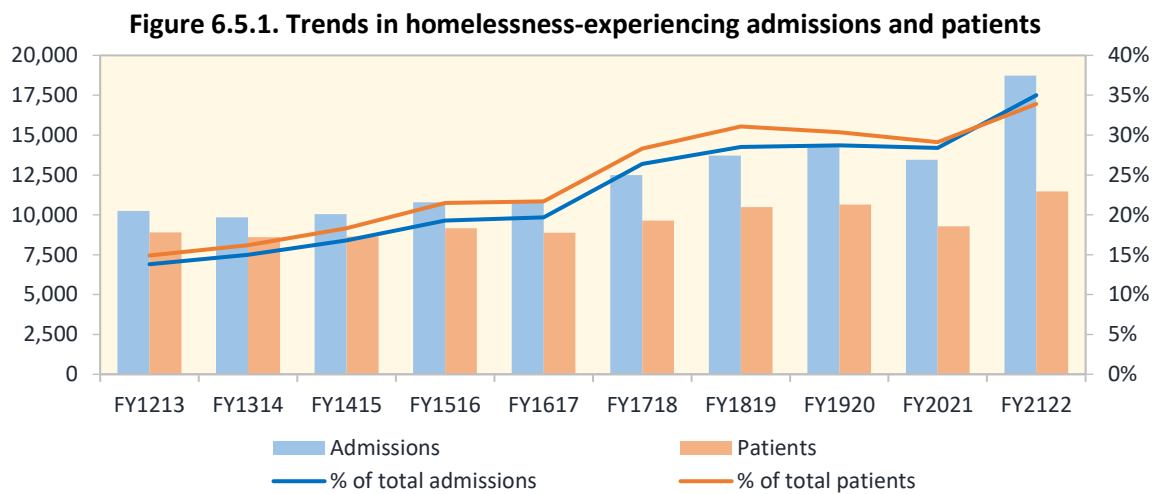
PATIENT CHARACTERISTICS

The majority of patients experiencing homelessness at admission were male (67.1%), Latinx (52.4%), ages 26-34 (37.5%), and unemployed (79.2%). Among homeless admissions, 64.9% reported having mental health issues, and 30.2% reported criminal justice involvement (Table 6.5.2).

Table 6.5.2. Characteristics of patients experiencing homelessness, FY2122

| CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	7,681	67.1
	Female	3,694	32.3
	Transgender male	13	0.1
	Transgender female	51	0.4
	Non-conforming or refuse to state	-	-
RACE	Latinx	5,998	52.4
	White	2,938	25.7
	Black/African American	2,132	18.6
	Asian	163	1.4
	Pacific Islander	33	0.3
	American Indian/Alaska Native	117	1.0
	Other	59	0.5
AGE	17 and under	-	-
	18-25	1,176	10.3
	26-34	4,290	37.5
	35-44	3,123	27.3
	45-54	1,672	14.6
	55-64	1,034	9.0
	65+	146	1.3
SEXUAL ORIENTATION	Heterosexual	10,121	90.4
	Gay, lesbian, or bisexual	851	7.6
	Unsure/questioning	60	0.5
	Prefer not to state	161	1.4
EDUCATION	Middle school or below	313	2.8
	Some high school	2,967	26.3
	High school completed	5,469	48.4
	Some college or beyond	2,551	22.6
EMPLOYMENT	Employed	1,080	5.8
	Unemployed (seeking)	7,648	41.0
	Unemployed (not seeking)	7,126	38.2
	Not in labor force	2,805	15.0
MENTAL HEALTH ISSUES	Yes	12,123	64.9
	No	6,564	35.1
PHYSICAL HEALTH ISSUES	Yes	3,029	16.3
	No	15,506	83.7
DISABILITY	Yes	3,576	20.7
	No	13,737	79.3
CRIMINAL JUSTICE	Yes	5,629	30.2
	No	13,026	69.8

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

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LIVING ARRANGEMENT AT ADMISSION

The most commonly reported living arrangement by patients experiencing homelessness at admission was staying with family or friends ("couch moving") (36.8%), followed by living outside (33.2%), and sleeping in car/van (11.5%) (Figure 6.5.2)

Figure 6.5.2. Living arrangement among patients experiencing homelessness, FY2122
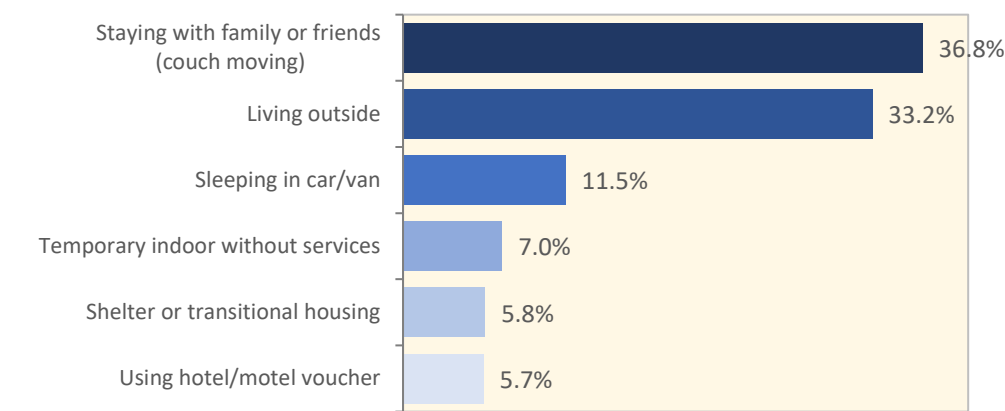
Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.

PRIMARY SUBSTANCE USE AT ADMISSION

The most commonly reported primary substance use was methamphetamine (39.7%), followed by alcohol (29.6%) and heroin (11.9%) (Table 6.5.3).

Table 6.5.3. Primary substance use among patients experiencing homelessness, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Methamphetamine	7,382	39.7
Alcohol	5,504	29.6
Heroin	2,218	11.9
Prescription drug	1,713	9.2
Marijuana	849	4.6
Cocaine	728	3.9
Other drugs	217	1.2

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

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Among patients experiencing homelessness, methamphetamine emerged as the dominant primary substance use since FY1213, with a consistent upward trend. The proportion of patients reporting heroin as the primary substance use increased from FY1213 to FY1617, but declined thereafter through FY2122. Alcohol surpassed heroin as the second most common primary substance use starting from FY1920 onwards (Figure 6.5.3).

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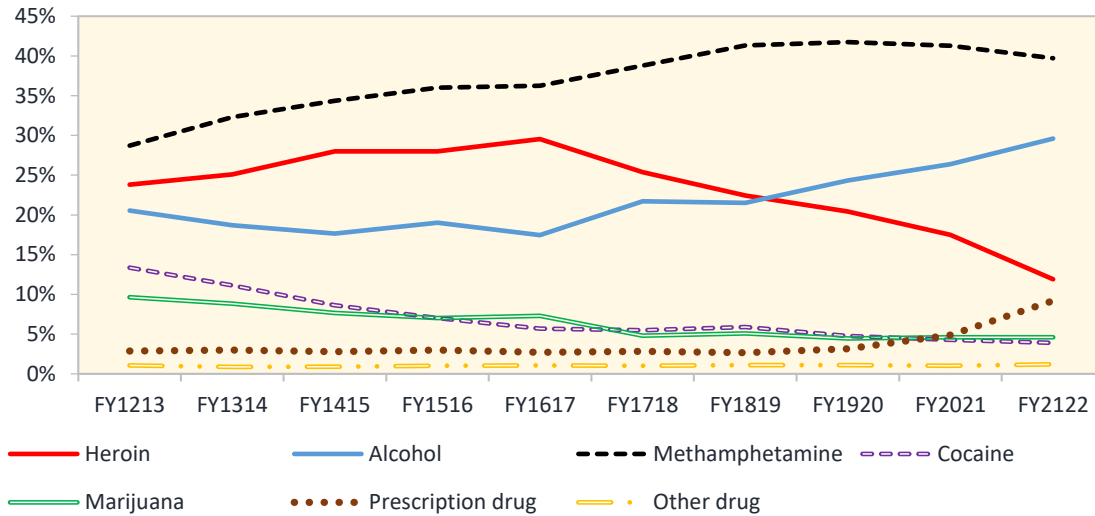
LEVEL OF CARE

The most common level of care that patients were admitted to was residential service programs (49.8%), followed by outpatient programs (15.1%) and withdrawal management programs (14.6%) (Table 6.5.4).

Table 6.5.4. Level of care among patients experiencing homelessness, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**2,709**	**14.6**
ASAM WM 1	-	-
ASAM WM 2	40	0.2
ASAM WM 3.2	1,674	9.0
ASAM WM 3.7/4.0	994	5.3
Residential Service	**9,267**	**49.8**
ASAM 3.1	4,262	22.9
ASAM 3.3	60	0.3
ASAM 3.5	4,945	26.6
Intensive Outpatient (ASAM 2.1)	**2,571**	**13.8**
Outpatient (ASAM 1.0)	**2,810**	**15.1**
Opioid Treatment Program (ASAM OTP)	**961**	**5.2**
Recovery Support Service	**272**	**1.5**

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

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The proportion of patients experiencing homelessness admitted to residential service programs showed an increasing trend from FY1213 to FY1718, followed by a slight decrease in subsequent years. Conversely, the proportion of admissions to outpatient programs exhibited a gradual decline over the past decade. The proportion of admissions to opioid treatment programs reached its highest point in FY1617 and subsequently decreased through FY2122 (Figure 6.5.4).

Figure 6.5.4. Trends in level of care among patients experiencing homelessness
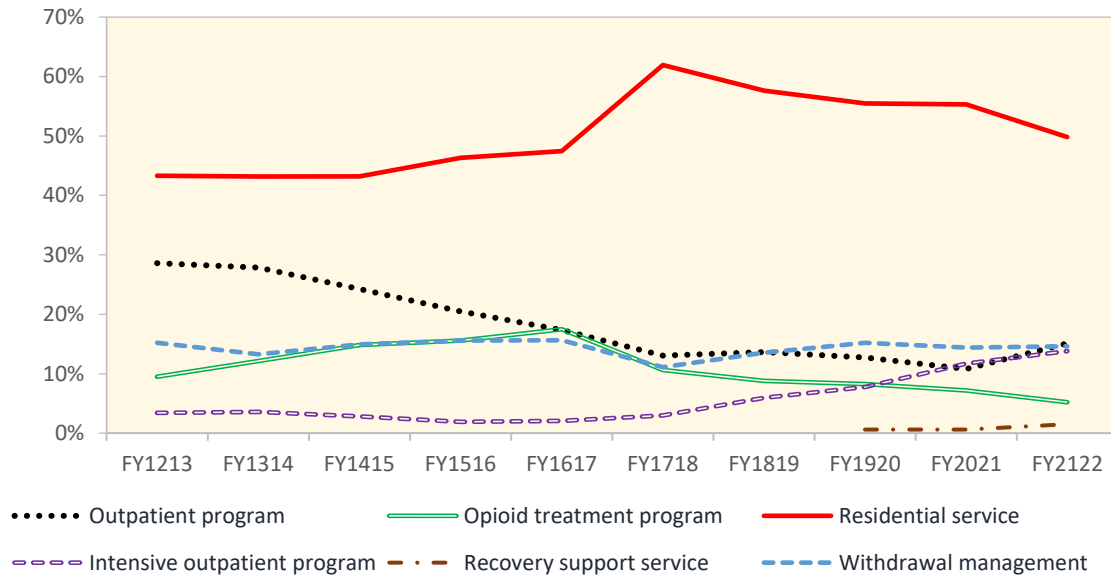
STABLE HOUSING AT DISCHARGE

According to self-reports, the proportion of patients experiencing homelessness at admission who found stable housing at discharge has shown an increasing trend over the past four fiscal years, reaching the highest percent (31.9%) in FY2122 (Figure 6.5.5).

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

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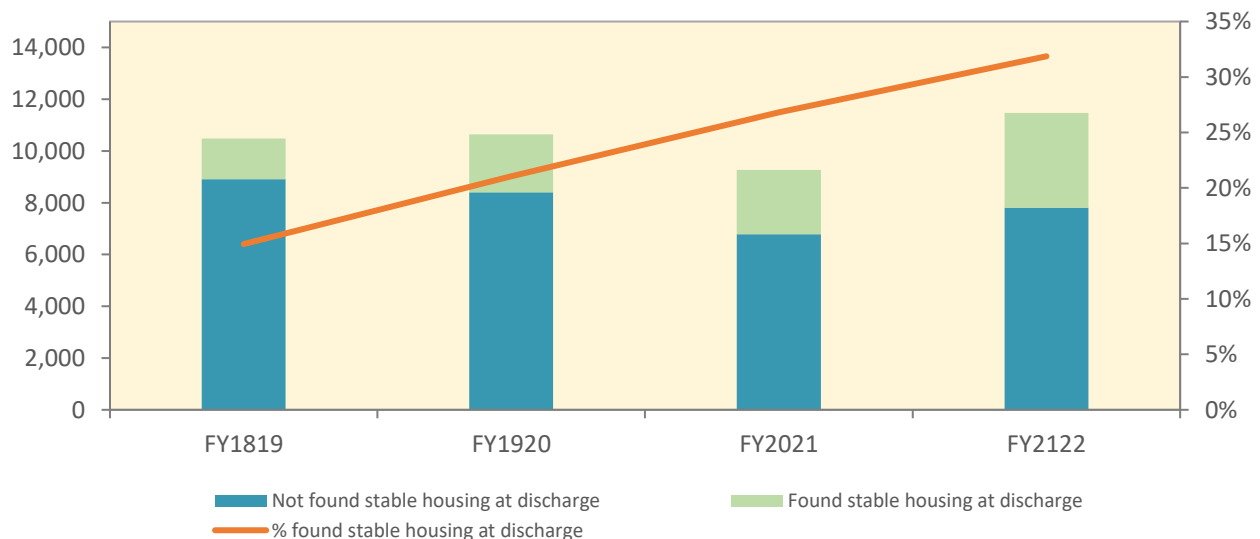
DISCHARGE STATUS AND TREATMENT OUTCOMES AT DISCHARGE

Among patients experiencing homelessness with discharge status, 57.7% had positive compliance, with 47.2% completing treatment, and 10.5% leaving the program with satisfactory progress (Table 6.5.5).

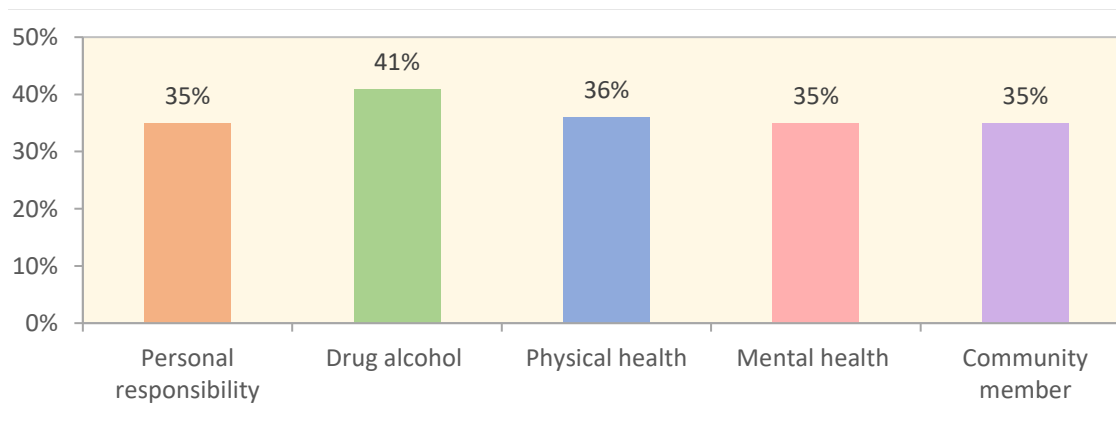**Table 6.5.5. Discharge status of patients experiencing homelessness, FY2122**

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**8,235**	**57.7**
Completed treatment	6,738	47.2
Left – satisfactory progress	1,497	10.5
Negative compliance	**5,043**	**35.3**
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	**995**	**7.0**

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

According to the Treatment Effectiveness Assessment (TEA) used to gauge recovery progress per the patients' perspective at the time of discharge, 35% of patients experiencing homelessness reported they were better in taking care of personal responsibilities (e.g., paying bills, following through on personal or professional commitments), 41% reported they were better with handling drug and alcohol use (e.g., the frequency and amount of use, money spent on drugs, amount of drug craving, being sick, etc.), 36% reported they were better in physical health (e.g., eating and sleeping properly, exercising, taking care of health or dental problems), 35% reported they were better in mental health (e.g., feeling good about themselves), and 35% reported they were a better community member (e.g., obeying laws, meeting your responsibilities to society, positive impact on others) compared to at admission (Figure 6.5.6).

Figure 6.5.6. Treatment Effectiveness Assessment (TEA) for patients experiencing homelessness, FY2122

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Patients with Disabilities

TREATMENT ADMISSIONS AND DISCHARGES

Patients who had disabilities (visual, hearing, speech, mobility, mental, developmental, etc.) accounted for 6,088 (18.0%) patients and 7,821 (14.6%) treatment admissions (Table 6.6.1).

Table 6.6.1. Treatment admissions and discharges among patients with disabilities, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	7,821	14.6	6,088	18.0
Discharged	5,912	15.7	4,638	19.5

The number of patients with disabilities at the time of admission had decreased from 13,367 in FY1213 to 3,901 in FY2021 with an increase to 6,088 in FY2122. The proportion of patients with disabilities followed a similar trend during the same period (Figure 6.6.1).

Figure 6.6.1. Trends in admissions and patients with disabilities

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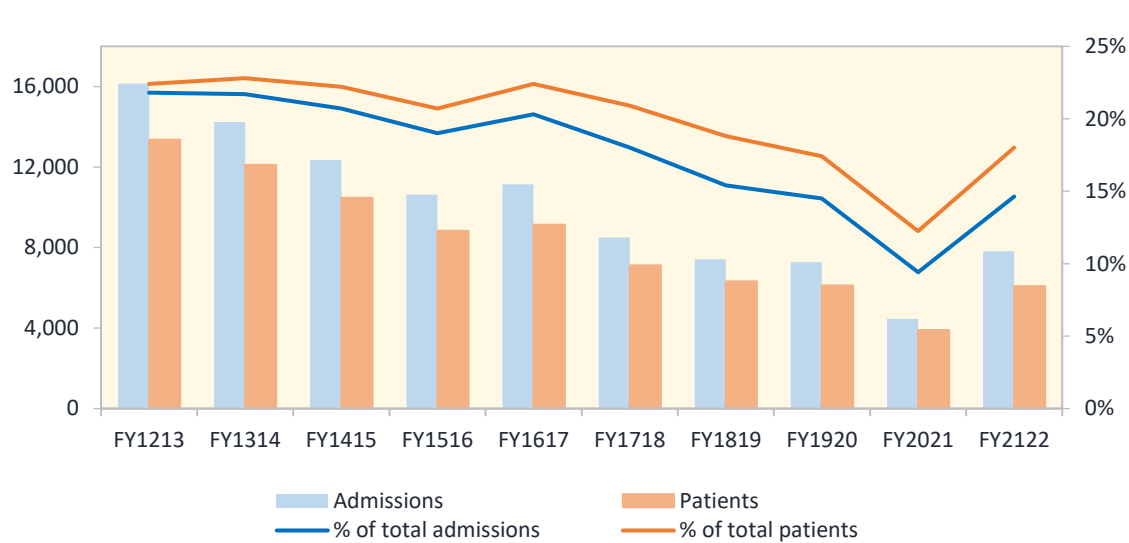
PATIENT CHARACTERISTICS

The majority of patients with disabilities were male (65.2%), Latinx (45.5%), ages 26-34 (28.9%), and unemployed (71.5%). Among admissions with disabilities, 84.4% reported having mental health issues, and 45.2% were homeless (Table 6.6.2).

Table 6.6.2. Characteristics of patients with disabilities, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	3,962	65.2
	Female	2,072	34.1
	Transgender male	6	0.1
	Transgender female	33	0.5
	Non-conforming or refuse to state	-	-
RACE	Latinx	2,767	45.5
	White	1,829	30.1
	Black/African American	1,292	21.3
	Asian	92	1.5
	Pacific Islander	9	0.1
	American Indian/Alaska Native	57	0.9
	Other	33	0.5
AGE	17 and under	63	1.0
	18-25	444	7.3
	26-34	1,758	28.9
	35-44	1,397	23.0
	45-54	1,024	16.9
	55-64	1,035	17.0
	65+	353	5.8
SEXUAL ORIENTATION	Heterosexual	5,160	89.4
	Gay, lesbian, or bisexual	463	8.0
	Unsure/questioning	38	0.7
	Prefer not to state	111	1.9
EDUCATION	Middle school or below	192	3.2
	Some high school	1,404	23.2
	High school completed	2,931	48.5
	Some college or beyond	1,512	25.0
EMPLOYMENT	Employed	509	6.5
	Unemployed (seeking)	2,532	32.4
	Unemployed (not seeking)	3,055	39.1
	Not in labor force	1,711	21.9
HOMELESS	Homeless at admission	2,749	45.2
MENTAL HEALTH ISSUES	Yes	6,582	84.4
	No	1,221	15.6
PHYSICAL HEALTH ISSUES	Yes	1,644	21.2
	No	6,098	78.8
CRIMINAL JUSTICE	Yes	1,725	22.1
	No	6,083	77.9

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

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DISABILITY TYPE

The most common types of disabilities were mental (74.0%), mobility (13.0%), and visual (4.6%) disabilities (Table 6.6.3).

Table 6.6.3. Disability type among patients with disabilities, FY2122

DISABILITY TYPE	ADMISSIONS	%
Mental	5,788	74.0
Mobility	1,016	13.0
Visual	360	4.6
Hearing	158	2.0
Developmental	131	1.7
Speech	62	0.8
Other	563	7.2

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

The proportion of patients reporting mental disability was the most prevalent disability type, exhibiting an overall decreasing trend from 16.2% in FY1213 to 5.0% in FY2021, followed by an increase to 10.8% in FY2122 (Figure 6.6.2).

Figure 6.6.2. Trends in disability type among patients with disabilities

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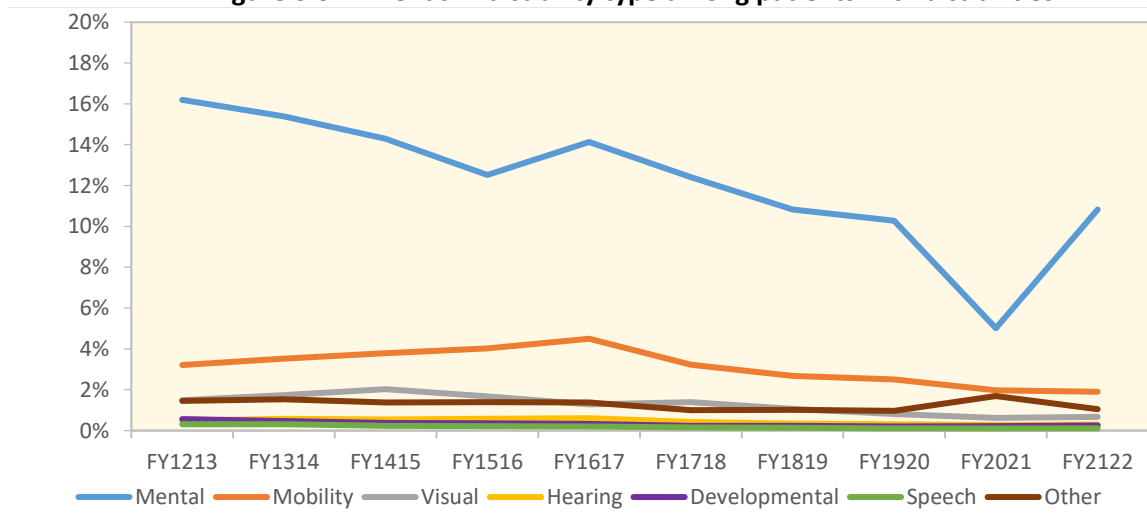
PRIMARY SUBSTANCE USE AT ADMISSION

Alcohol (32.4%) was the most commonly reported primary substance use at admission among patients with disabilities, followed by methamphetamine (26.6%) and heroin (18.3%) (Table 6.6.4).
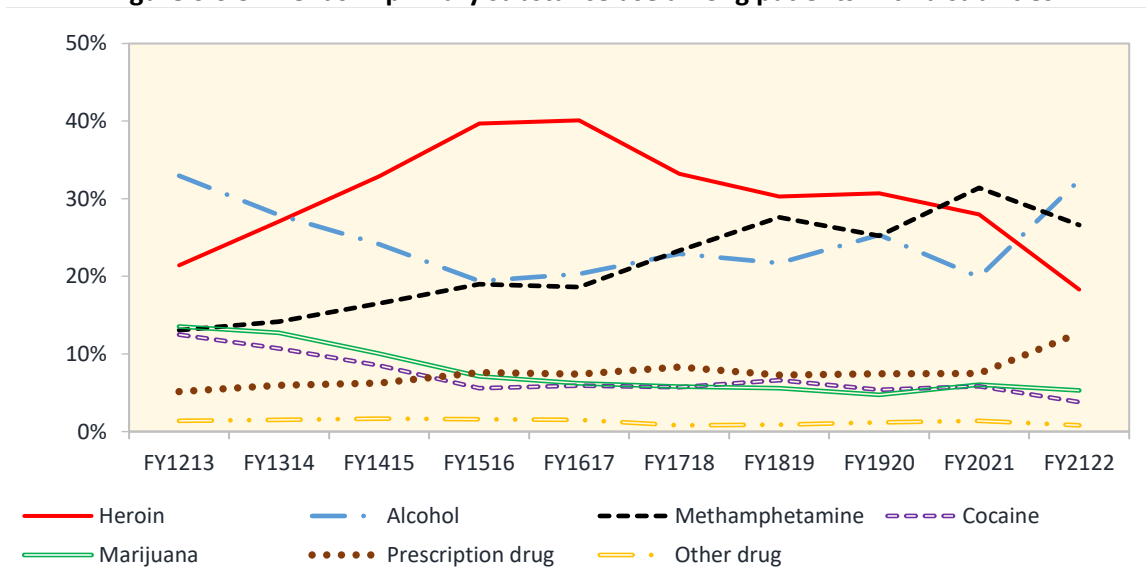
Table 6.6.4. Primary substance use among patients with disabilities, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Alcohol	2,515	32.4
Methamphetamine	2,062	26.6
Heroin	1,421	18.3
Prescription drug	981	12.7
Marijuana	413	5.3
Cocaine	296	3.8
Other drugs	63	0.8

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

Heroin had been the most common primary substance use among patients with disabilities at admission from FY1415 to FY1920 and became the third most common primary substance use in FY2122. The proportion reporting alcohol as the most common primary substance use surpassed heroin in FY1213, FY1314, and FY2122 (Figure 6.6.3).

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

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LEVEL OF CARE

Patients who had disabilities were most commonly admitted to residential service programs (33.5%), followed by withdrawal management programs (19.0%) and outpatient programs (19.0%) (Table 6.6.5).
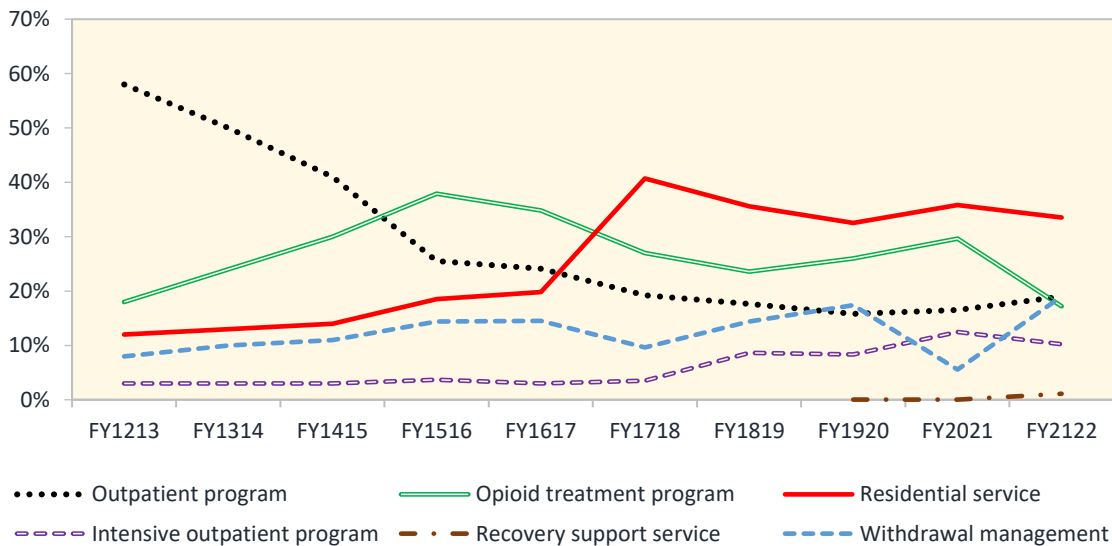
Table 6.6.5. Level of care among patients with disabilities, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**1,463**	**19.0**
ASAM WM 2	33	0.4
ASAM WM 3.2	421	5.5
ASAM WM 3.7/4.0	1,009	13.1
Residential Service	**2,581**	**33.5**
ASAM 3.1	768	10.0
ASAM 3.3	22	0.3
ASAM 3.5	1,791	23.3
Intensive Outpatient (ASAM 2.1)	**783**	**10.2**
Outpatient (ASAM 1.0)	**1,460**	**19.0**
Opioid Treatment Program (ASAM OTP)	**1,326**	**17.2**
Recovery Support Service	**86**	**1.1**

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

The proportion admitted to residential service programs among patients with disabilities increased substantially from FY1617 to FY1718 and remained high thereafter, while that of outpatient programs showed a decreasing trend over the last ten fiscal years with a slight increase in FY2021 and FY2122 (Figure 6.6.4).

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

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DISCHARGE STATUS AND TREATMENT OUTCOMES AT DISCHARGE

Among patients with disabilities with discharge status, 58.0% had positive compliance, with 46.3% completing treatment, and 11.7% leaving the program with satisfactory progress (Table 6.6.6).
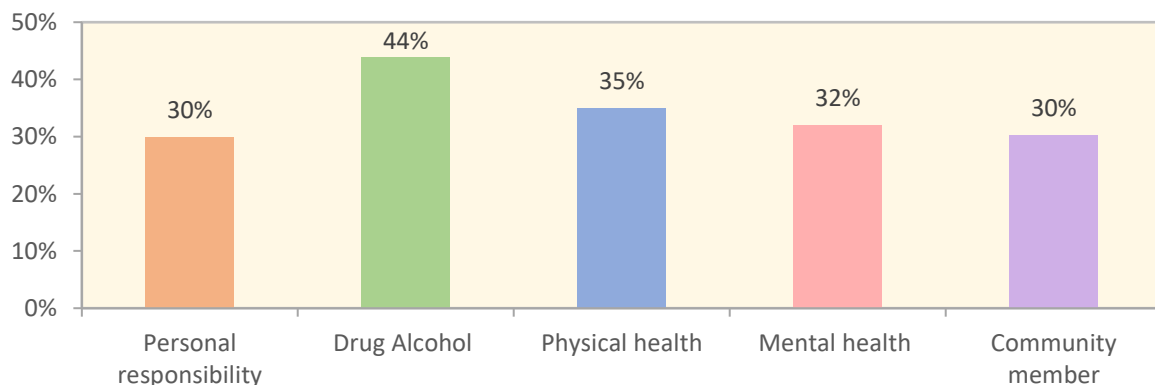
Table 6.6.6. Discharge status of patients with disabilities, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**3,115**	**58.0**
Completed treatment	2,489	46.3
Left – satisfactory progress	626	11.7
Negative compliance	**1,986**	**37.0**
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	**272**	**5.1**

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

According to the Treatment Effectiveness Assessment (TEA) used to gauge recovery progress per the patients' perspective at the time of discharge, 30% of patients with disabilities reported they were better in taking care of personal responsibilities (e.g., paying bills, following through on personal or professional commitments), 44% reported they were better with handling drug and alcohol use (e.g., the frequency and amount of use, money spent on drugs, amount of drug craving, being sick, etc.), 35% reported they were better in physical health (e.g., eating and sleeping properly, exercising, taking care of health or dental problems), 32% reported they were better in mental health (e.g., feeling good about themselves), and 30% reported they were a better community member (e.g., obeying laws, meeting your responsibilities to society, positive impact on others) compared to at admission (Figure 6.6.5).

Figure 6.6.5. Treatment Effectiveness Assessment (TEA) for patients with disabilities, FY2122

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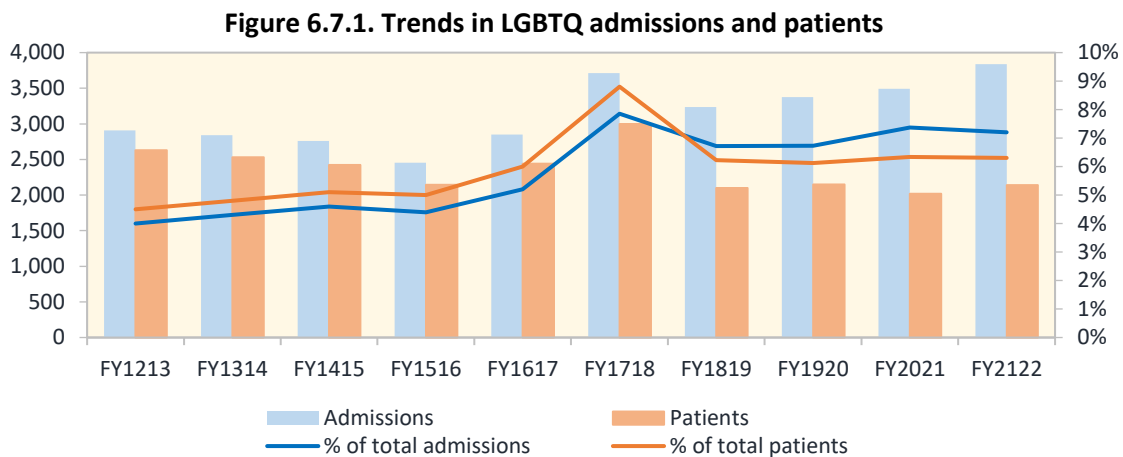# Lesbian, Gay, Bisexual, and Transgender (LGBTQ) Patients[4]

TREATMENT ADMISSIONS AND DISCHARGES

Patients reporting LGBTQ status (i.e., homosexual/gay/lesbian, bisexual, transgender, or unsure/questioning) accounted for 2,138 (6.3%) patients and 3,838 (7.2%) treatment admissions (Table 6.7.1).

Table 6.7.1. Treatment admissions and discharges among LGBTQ patients, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	3,838	7.2	2,138	6.3
Discharged	3,024	8.0	1,725	7.3

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

Figure 6.7.1. Trends in LGBTQ admissions and patients

Note: Transgender people were included in the LGBTQ group in data collected from FY1718 to FY2122 but not in the other fiscal years.

PATIENT CHARACTERISTICS

Of the total of 2,138 LGBTQ patients, 91.7% identified as gay, lesbian, or bisexual and 7.7% identified as unsure/questioning. Among the 4.9% (105) patients identified as transgender, the majority (70.2%) did not report their specific sexual orientation and identified solely as transgender. Additionally, 12.5% of transgender identified as heterosexual, and 14.4% identified as lesbian, gay, or bisexual.

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[4] Patients identified as "Transgender male" or Transgender female" within the "Gender Identity" or "Gay, lesbian, or bisexual" or "Unsure/questioning" within the "Sexual Orientation".

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LGBTQ patients were most com monly Latinx (49.2%) and White (28.0%), ages 26-34 (39.8%), and unemployed (68.8%). 72.1% of LGBTQ admissions reported having mental health issues, and 45.1% were homeless at admission (Table 6.7.2).

Table 6.7.2. Characteristics of LGBTQ patients, FY2122

CHARACTERISTIC		PATIENTS	%
GENDER IDENTITY	Male	1,013	47.4
	Female	1,019	47.7
	Transgender male	28	1.3
	Transgender female	77	3.6
	Non-conforming or refuse to state	-	-
RACE	Latinx	1,049	49.2
	White	597	28.0
	Black/African American	404	19.0
	Asian	48	2.3
	Pacific Islander	-	-
	American Indian/Alaska Native	16	0.8
	Other	14	0.7
AGE	17 and under	72	3.4
	18-25	286	13.5
	26-34	843	39.8
	35-44	526	24.8
	45-54	215	10.2
	55-64	157	7.4
	65+	18	0.9
SEXUAL ORIENTATION	Heterosexual*	13	0.6
	Gay, lesbian, or bisexual	1,892	91.7
	Unsure/questioning	158	7.7
	Prefer not to state	-	-
EDUCATION	Middle school or below	53	2.6
	Some high school	409	19.9
	High school completed	854	41.6
	Some college or beyond	739	36.0
EMPLOYMENT	Employed	545	14.6
	Unemployed (seeking)	1,451	38.7
	Unemployed (not seeking)	1,128	30.1
	Not in labor force	621	16.6
HOMELESS	Homeless at admission	965	45.1
MENTAL HEALTH ISSUES	Yes	2,703	72.1
	No	1,047	27.9
PHYSICAL HEALTH ISSUES	Yes	619	16.7
	No	3,091	83.3
DISABILITY	Yes	723	21.0
	No	2,723	79.0
CRIMINAL JUSTICE	Yes	792	21.1
	No	2,961	78.9

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

   N ≤ 5 not reported to protect confidentiality.

 *Reported by patients who selft identfied as transgender per the "Gender Identity" question

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PRIMARY SUBSTANCE USE AT ADMISSION

The most commonly reported primary substance use among LGBTQ patients was methamphetamine (45.5%), followed by alcohol (24.6%) and prescription drug (10.1%) (Table 6.7.3).
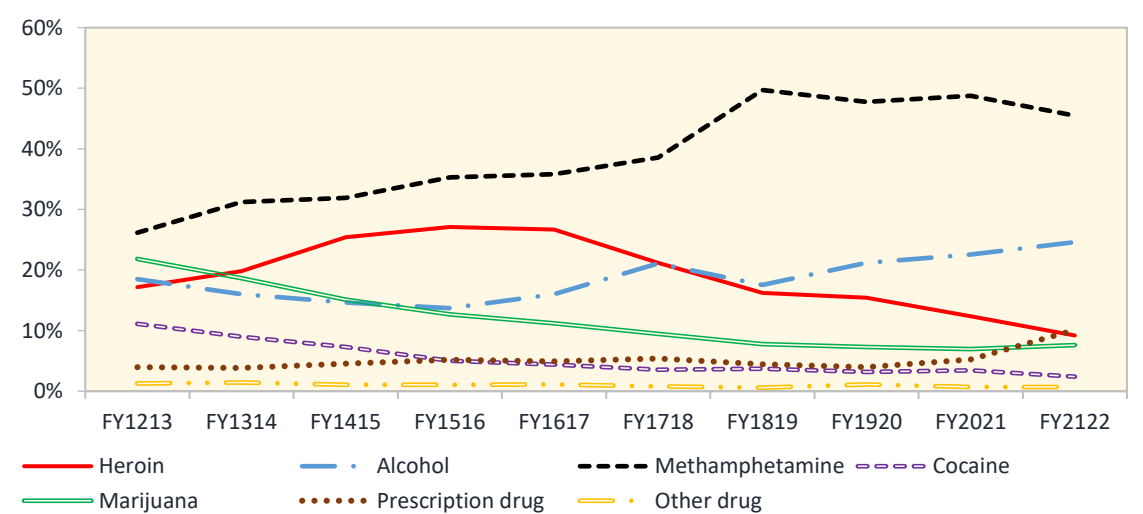
Table 6.7.3. Primary substance use among LGBTQ patients, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Methamphetamine	1,702	45.5
Alcohol	920	24.6
Prescription drug	376	10.1
Heroin	343	9.2
Marijuana	285	7.6
Cocaine	90	2.4
Other drugs	25	0.7

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

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

Figure 6.7.2. Trends in primary substance use among LGBTQ patients

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LEVEL OF CARE

LGBTQ patients were most commonly admitted to residential service programs (39.2%), followed by outpatient programs (23.0%) and intensive outpatient programs (18.2%) (Table 6.7.4).
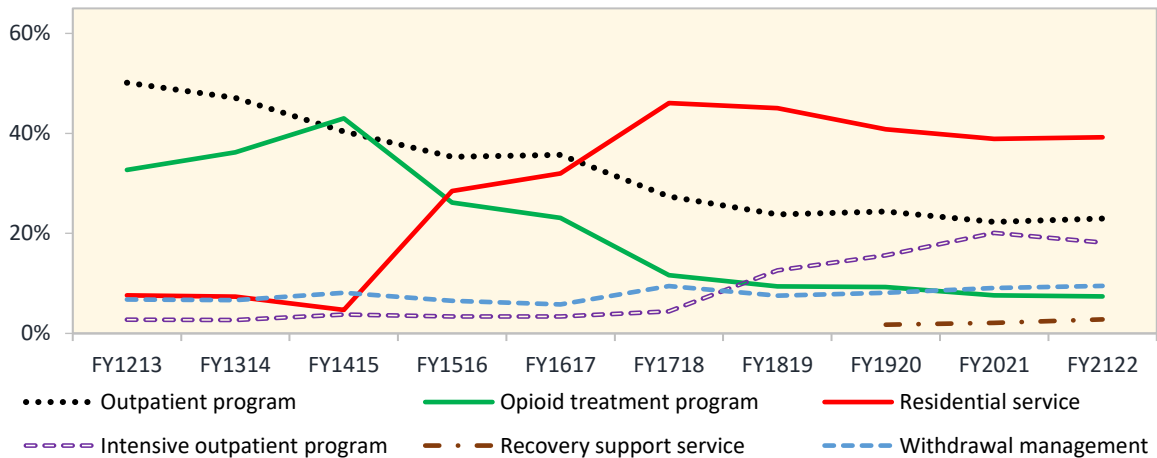
Table 6.7.4. Level of care among LGBTQ patients, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**361**	**9.5**
ASAM WM 1	-	-
ASAM WM 2	6	0.2
ASAM WM 3.2	207	5.4
ASAM WM 3.7/4.0	146	3.8
Residential Service	**1,490**	**39.2**
ASAM 3.1	546	14.4
ASAM 3.3	7	0.2
ASAM 3.5	937	24.6
Intensive Outpatient (ASAM 2.1)	**692**	**18.2**
Outpatient (ASAM 1.0)	**874**	**23.0**
Opioid Treatment Program (ASAM OTP)	**282**	**7.4**
Recovery Support Service	**105**	**2.8**

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

The proportion of LGBTQ patients admitted to outpatient programs showed a decreasing trend overall during the past ten fiscal years. The proportion admitted to residential service programs sharply increased from FY1415 to FY1718 then stabilized through FY2122, while the proportion admitted to opioid treatment programs has decreased steadily since FY1415 (Figure 6.7.3).

Figure 6.7.3. Trends in level of care among LGBTQ patients

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DISCHARGE STATUS AND TREATMENT OUTCOMES AT DISCHARGE

Of the discharges among LGBTQ patients with discharge status, 54.0% had positive compliance, with 41.9% completing treatment and 12.1% leaving with satisfactory progress (Table 6.7.5).
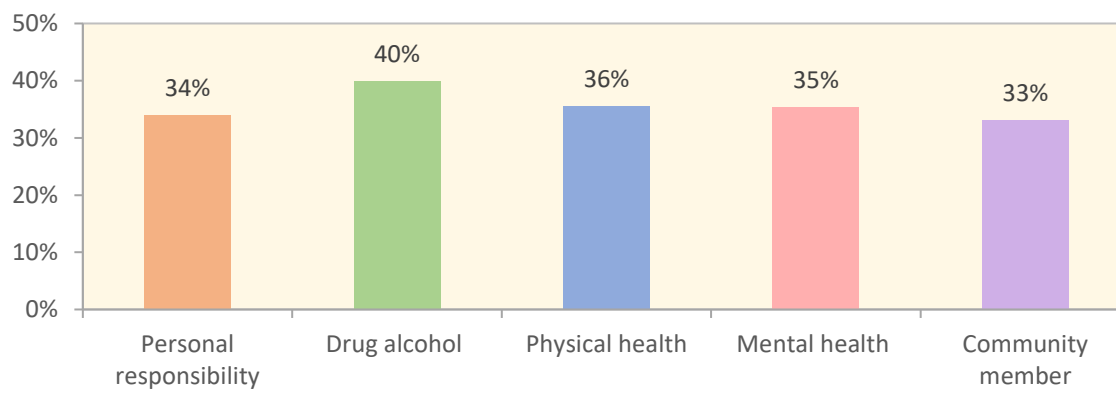
Table 6.7.5. Discharge status of LGBTQ patients, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**1,511**	**54.0**
Completed treatment	1,173	41.9
Left – satisfactory progress	338	12.1
Negative compliance	**1,074**	**38.4**
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	**213**	**7.6**

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

According to the Treatment Effectiveness Assessment (TEA) used to gauge recovery progress per the patients' perspective at the time of discharge, 34% of LGBTQ reported they were better in taking care of personal responsibilities (e.g., paying bills, following through on personal or professional commitments), 40% reported they were better with handling drug and alcohol use (e.g., the frequency and amount of use, money spent on drugs, amount of drug craving, being sick, etc.), 36% reported they were better in physical health (e.g., eating and sleeping properly, exercising, taking care of health or dental problems), 35% reported they were better in mental health (e.g., feeling good about themselves), and 33% reported they were a better community member (e.g., obeying laws, meeting your responsibilities to society, positive impact on others) compared to at admission (Figure 6.7.4).

Figure 6.7.4. Treatment Effectiveness Assessment (TEA) for LGBTQ patients, FY2122

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Women of Reproductive Age

TREATMENT ADMISSIONS AND DISCHARGES

Patients who were women of reproductive age (15-49) accounted for 9,250 (27.4%) patients and 15,465 (28.9%) treatment admissions (Table 6.8.1).

Table 6.8.1. Treatment admissions and discharges among women of reproductive age, FY2122

	ADMISSIONS		PATIENTS	
	N	**% Total**	**N**	**% Total**
Admitted	15,465	28.9	9,250	27.4
Discharged	11,550	30.6	7,136	30.0

PATIENT CHARACTERISTICS

Women of reproductive age were most commonly Latinx (56.1%), ages 26-34 (43.5%), and unemployed (65.2%). Among these women admissions, 57.7% reported having mental health issues, and 34.9% were homeless (Table 6.8.2).

Table 6.8.2. Characteristics of women of reproductive age, FY2122

CHARACTERISTICS		PATIENTS	%
RACE	Latinx	5,148	56.1
	White	2,269	24.7
	Black/African American	1,483	16.2
	Asian	127	1.4
	Pacific Islander	20	0.2
	American Indian/Alaska Native	76	0.8
	Other	58	0.6
AGE	15-17	282	3.0
	18-25	1,347	14.6
	26-34	4,020	43.5
	35-44	2,866	31.0
	45-49	735	7.9
SEXUAL ORIENTATION	Heterosexual	7,858	87.7
	Gay, lesbian, or bisexual	817	9.1
	Unsure/questioning	63	0.7
	Prefer not to state	226	2.5
EDUCATION	Middle school or below	233	2.6
	Some high school	2,277	25.4
	High school completed	4,129	46.1
	Some college or beyond	2,320	25.9
EMPLOYMENT	Employed	2,543	16.7
	Unemployed (seeking)	5,865	38.6
	Unemployed (not seeking)	4,037	26.6
	Not in labor force	2,752	18.1

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Table 6.8.2. Characteristics of women of reproductive age, FY2122 (cont'd)

CHARACTERISTICS		PATIENTS	%
HOMELESS	Homeless at admission	3,228	34.9
MENTAL HEALTH ISSUES	Yes	8,744	57.7
	No	6,405	42.3
PHYSICAL HEALTH ISSUES	Yes	1,995	13.4
	No	12,926	86.6
DISABILITY	Yes	1,822	13.4
	No	11,807	86.6
CRIMINAL JUSTICE	Yes	2,639	17.4
	No	12,513	82.6
PREGNANCY	Pregnant at admission	505	5.5
	Pregnant at discharge	497	5.4
CHILDREN	Having children 17 and under	5,606	60.6

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

PRIMARY SUBSTANCE USE AT ADMISSION

The most commonly reported primary substance use among women of reproductive age was methamphetamine (37.9%), followed by alcohol (25.0%) and prescription drug (12.1%) (Table 6.8.3).

Table 6.8.3. Primary substance use among women of reproductive age, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Methamphetamine	5,683	37.9
Alcohol	3,751	25.0
Prescription drug	1,809	12.1
Heroin	1,677	11.2
Marijuana	1,599	10.7
Cocaine	355	2.4
Other drugs	138	0.9

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

LEVEL OF CARE

Women of reproductive age were most commonly admitted to residential service programs (30.3%), followed by outpatient programs (28.6%) and intensive outpatient programs (15.3%) (Table 6.8.4).

Table 6.8.4. Level of care among women of reproductive age, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**1,201**	**7.9**
ASAM WM 1	-	-
ASAM WM 2	-	-
ASAM WM 3.2	838	5.5
ASAM WM 3.7/4.0	354	2.3
Residential Service	**4,622**	**30.3**
ASAM 3.1	1,802	11.8
ASAM 3.3	39	0.3
ASAM 3.5	2,781	18.2
Intensive Outpatient (ASAM 2.1)	**2,334**	**15.3**
Outpatient (ASAM 1.0)	**4,367**	**28.6**
Opioid Treatment Program (ASAM OTP)	**1,950**	**12.8**
Recovery Support Service	**802**	**5.3**

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

DISCHARGE STATUS AND TREATMENT OUTCOMES AT DISCHARGE

Of the discharges among women of reproductive age with discharge status, 50.1% had positive compliance, with 37.7% completing treatment and 12.4% leaving with satisfactory progress (Table 6.8.5).

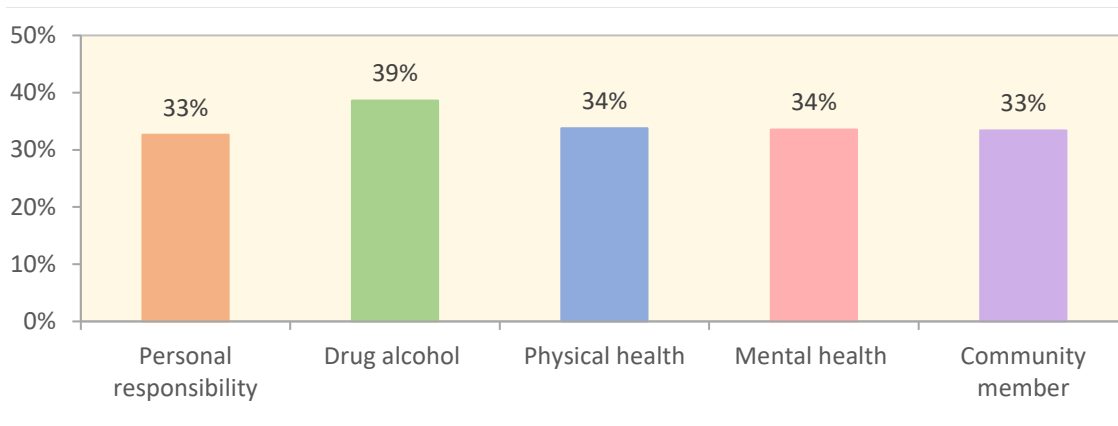**Table 6.8.5. Discharge status of women of reproductive age, FY2122**

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**5,121**	**50.1**
Completed treatment	3,854	37.7
Left – satisfactory progress	1,267	12.4
Negative compliance	**4,480**	**43.8**
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	**625**	**6.1**

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

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According to the Treatment Effectiveness Assessment (TEA) used to gauge recovery progress per the patients' perspective at the time of discharge, 33% of women of reproductive age reported they were better in taking care of personal responsibilities (e.g., paying bills, following through on personal or professional commitments), 39% reported they were better with handling drug and alcohol use (e.g., the frequency and amount of use, money spent on drugs, amount of drug craving, being sick, etc.), 34% reported they were better in physical health (e.g., eating and sleeping properly, exercising, taking care of health or dental problems), 34% reported they were better in mental health (e.g., feeling good about themselves), and 33% reported they were a better community member (e.g., obeying laws, meeting your responsibilities to society, positive impact on others) compared to at admission (Figure 6.8.1).

Figure 6.8.1. Treatment Effectiveness Assessment (TEA) for women of reproductive age, FY2122

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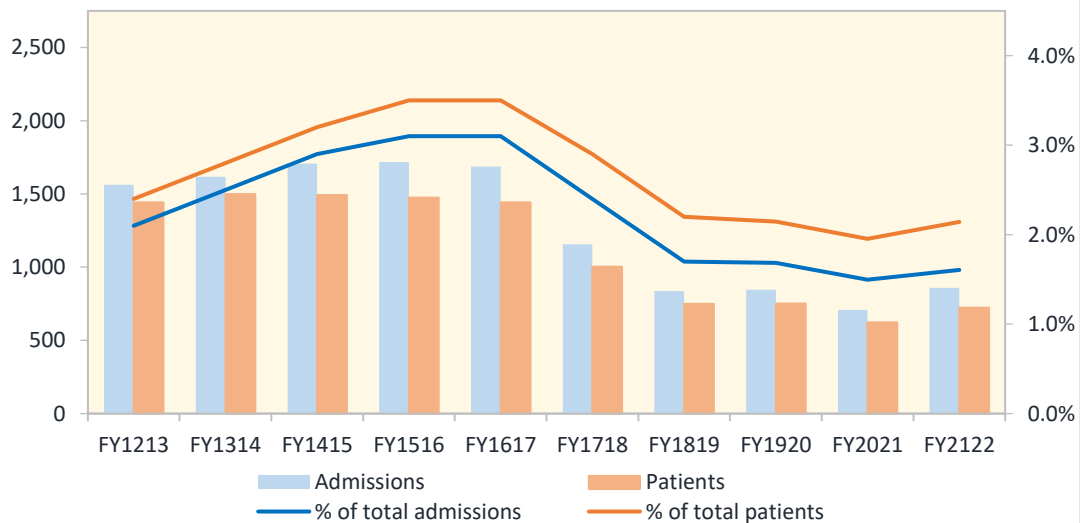# Veterans

TREATMENT ADMISSIONS AND DISCHARGES

Patients who were veterans accounted for 724 (2.1%) patients and 859 (1.6%) treatment admissions (Table 6.9.1).

Table 6.9.1. Treatment admissions and discharges among veteran patients, FY2122

	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	859	1.6	724	2.1
Discharged	587	1.6	493	2.1

The proportion of veteran admissions and patients increased from FY1213 to FY1617, decreased through FY2021, and increased slightly in FY2122 (Figure 6.9.1).

Figure 6.9.1. Trends in admissions and patients among patients who were veterans

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PATIENT CHARACTERISTICS

The majority of patients who were veterans were male (79.5%), Latinx (45.1%), ages 35-44 (24.2%), and unemployed (65.0%). Among veteran admissions, 56.1% had mental health issues, 38.4% were homeless, and 24.5% had a disability (Table 6.9.2).

Table 6.9.2. Characteristics of patients who were veterans, FY2122

CHARACTERISTICS		PATIENTS	%
GENDER IDENTITY	Male	575	79.5
	Female	143	19.8
	Transgender male	-	-
	Transgender female	-	-
	Non-conforming or refuse to state	-	-
RACE	Latinx	325	45.1
	White	238	33.1
	Black/African American	131	18.2
	Asian	7	1.0
	Pacific Islander	-	-
	American Indian/Alaska Native	8	1.1
	Other	7	1.0
AGE	17 and under	-	-
	18-25	41	5.7
	26-34	162	22.4
	35-44	175	24.2
	45-54	113	15.6
	55-64	146	20.2
	65+	85	11.8
SEXUAL ORIENTATION	Heterosexual	609	91.7
	Gay, lesbian, or bisexual	44	6.6
	Unsure/questioning	-	-
	Prefer not to state	11	1.7
EDUCATION	Middle school or below	18	2.5
	Some high school	98	13.7
	High school completed	371	51.9
	Some college or beyond	228	31.9
EMPLOYMENT	Employed	119	13.9
	Unemployed (seeking)	269	31.4
	Unemployed (not seeking)	287	33.5
	Not in labor force	181	21.1
HOMELESS	Homeless at admission	278	38.4
MENTAL HEALTH ISSUES	Yes	480	56.1
	No	375	43.9
PHYSICAL HEALTH ISSUES	Yes	149	17.5
	No	703	82.5
DISABILITY	Yes	202	24.5
	No	621	75.5
CRIMINAL JUSTICE	Yes	170	19.9
	No	685	80.1

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

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PRIMARY SUBSTANCE USE AT ADMISSION

The most common primary substance use reported at admission among veterans was heroin (28.4%), followed by alcohol (26.7%) and methamphetamine (24.0%) (Table 6.9.3).
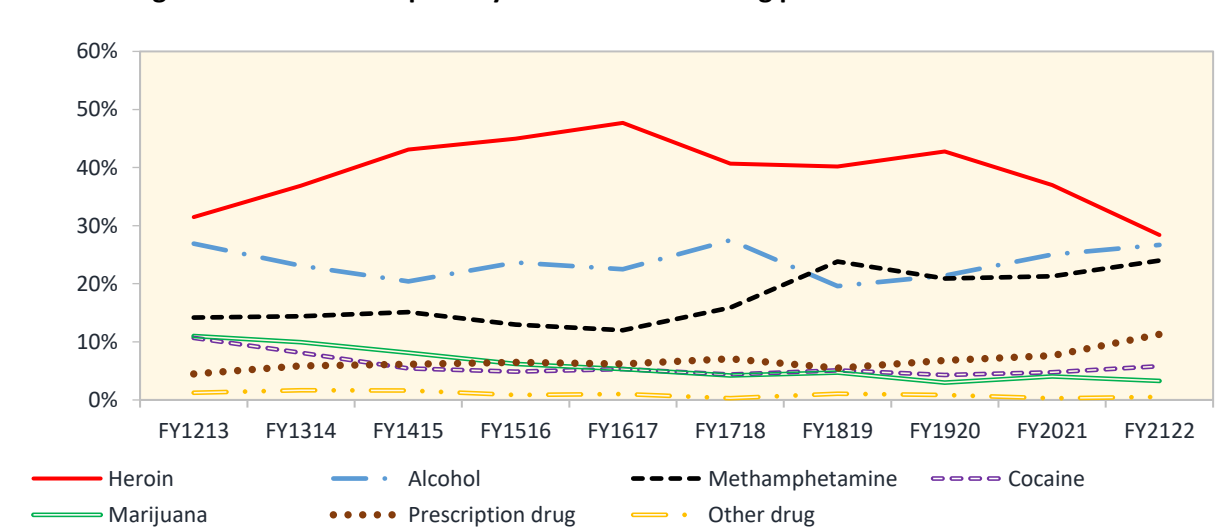
Table 6.9.3. Primary substance use among patients who were veterans, FY2122

PRIMARY SUBSTANCE USE	ADMISSIONS	%
Heroin	243	28.4
Alcohol	229	26.7
Methamphetamine	206	24.0
Prescription drug	97	11.3
Cocaine	50	5.8
Marijuana	28	3.3
Other drugs	-	-

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

The proportion of patients who were veterans that reported heroin as the primary substance use increased from FY1213 to FY1617 then decreased through FY2122, though it remained the most common primary substance use for the past ten fiscal years. The proportion reporting a primary methamphetamine use increased from FY1617 to FY1819 and remained relatively stable through FY2122 (Figure 6.9.2).

Figure 6.9.2. Trends in primary substance use among patients who were veterans

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LEVEL OF CARE

Veteran patients were most commonly treated in opioid treatment programs (32.1%), followed by residential service programs (30.0%) and outpatient programs (17.2%) (Table 6.9.4).
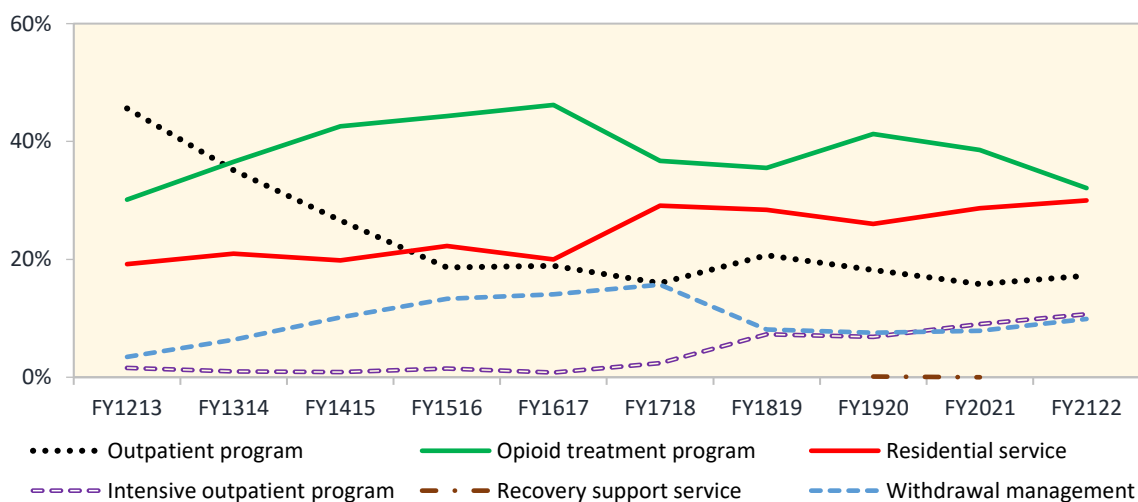
Table 6.9.4. Level of care among patients who were veterans, FY2122

LEVEL OF CARE	ADMISSIONS	%
Withdrawal Management	**85**	**9.9**
ASAM WM 3.2	47	5.5
ASAM WM 3.7/4.0	38	4.4
Residential Service	**257**	**30.0**
ASAM 3.1	137	16.0
ASAM 3.5	120	14.0
Intensive Outpatient (ASAM 2.1)	**92**	**10.7**
Outpatient (ASAM 1.0)	**147**	**17.2**
Opioid Treatment Program (ASAM OTP)	**275**	**32.1**
Recovery Support Service	**-**	**-**

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

The proportion of patients who were veterans and were admitted to opioid treatment programs increased continuously from FY1213 to FY1617, then decreased through FY2122, coupled with a roughly opposite movement in the proportion admitted to residential service program. The proportion admitted to outpatient programs showed a decreasing trend overall over the last ten fiscal years (Figure 6.9.3).

Figure 6.9.3. Trends in level of care among patients who were veterans

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DISCHARGE STATUS AND TREATMENT OUTCOMES AT DISCHARGE

Of the discharges among patients who were veterans and had discharge status, 52.7% had positive compliance, with 37.9% completing treatment and 14.8% leaving with satisfactory progress (Table 6.9.5).
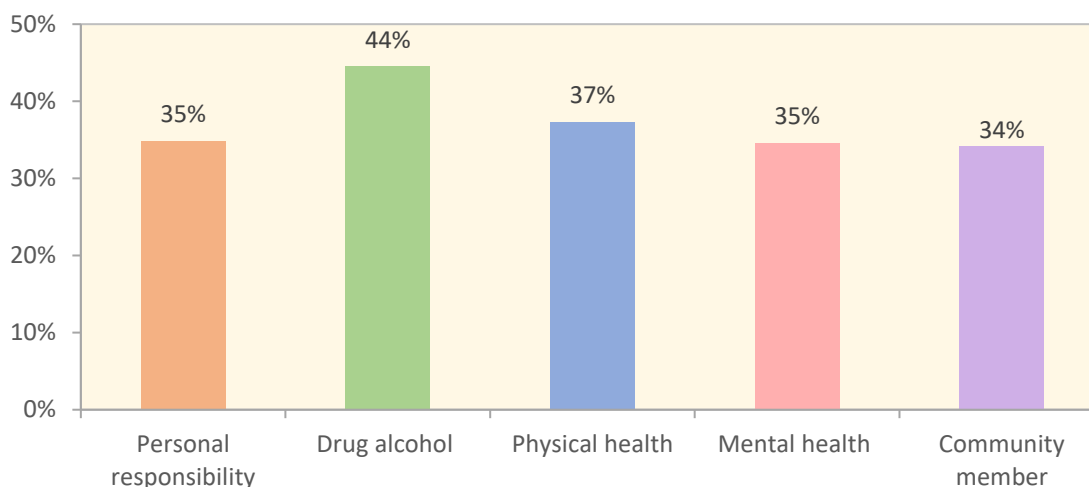
Table 6.9.5. Discharge status of patients who were veterans, FY2122

DISCHARGE STATUS	ADMISSIONS	%
Positive compliance	**296**	**52.7**
Completed treatment	213	37.9
Left – satisfactory progress	83	14.8
Negative compliance	**223**	**39.7**
(Left – unsatisfactory progress)		
Other (Death/incarceration/other)	**43**	**7.7**

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

According to the Treatment Effectiveness Assessment (TEA) used to gauge recovery progress per the patients' perspective at the time of discharge, 35% of veterans reported they were better in taking care of personal responsibilities (e.g., paying bills, following through on personal or professional commitments), 44% reported they were better with handling drug and alcohol use (e.g., the frequency and amount of use, money spent on drugs, amount of drug craving, being sick, etc.), 37% reported they were better in physical health (e.g., eating and sleeping properly, exercising, taking care of health or dental problems), 35% reported they were better in mental health (e.g., feeling good about themselves), and 34% reported they were a better community member (e.g., obeying laws, meeting your responsibilities to society, positive impact on others) compared to at admission (Figure 6.9.4).

Figure 6.9.4. Treatment Effectiveness Assessment (TEA) for Veterans, FY2122

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Patients Enrolled in My Health LA (MHLA) Program

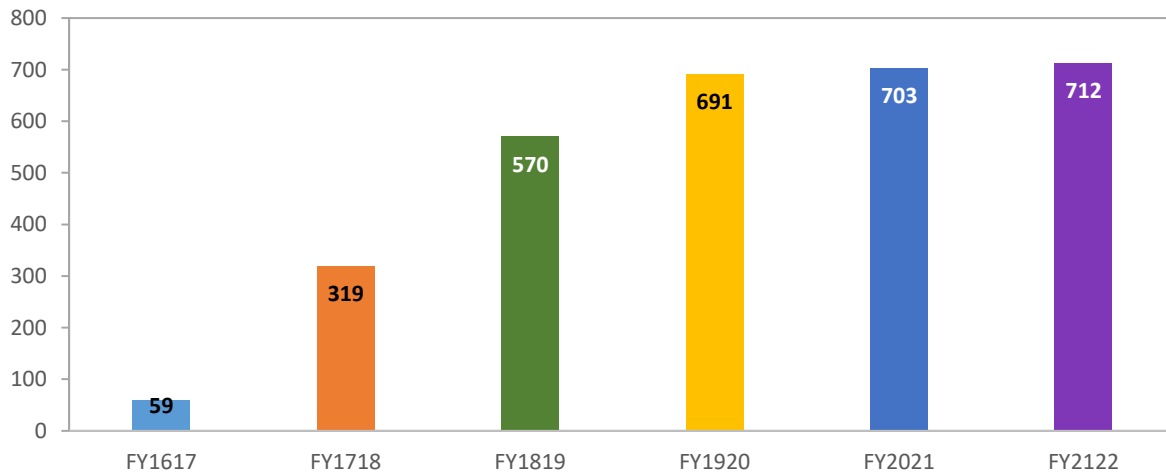## TREATMENT ADMISSIONS AND DISCHARGES

There were 712 (2.1%) patients enrolled in the MHLA program (MHLA patients) at admission, who accounted for 1,093 (2.0%) treatment admissions (Table 6.10.1).

Table 6.10.6. Treatment admissions among MHLA patients, FY2122

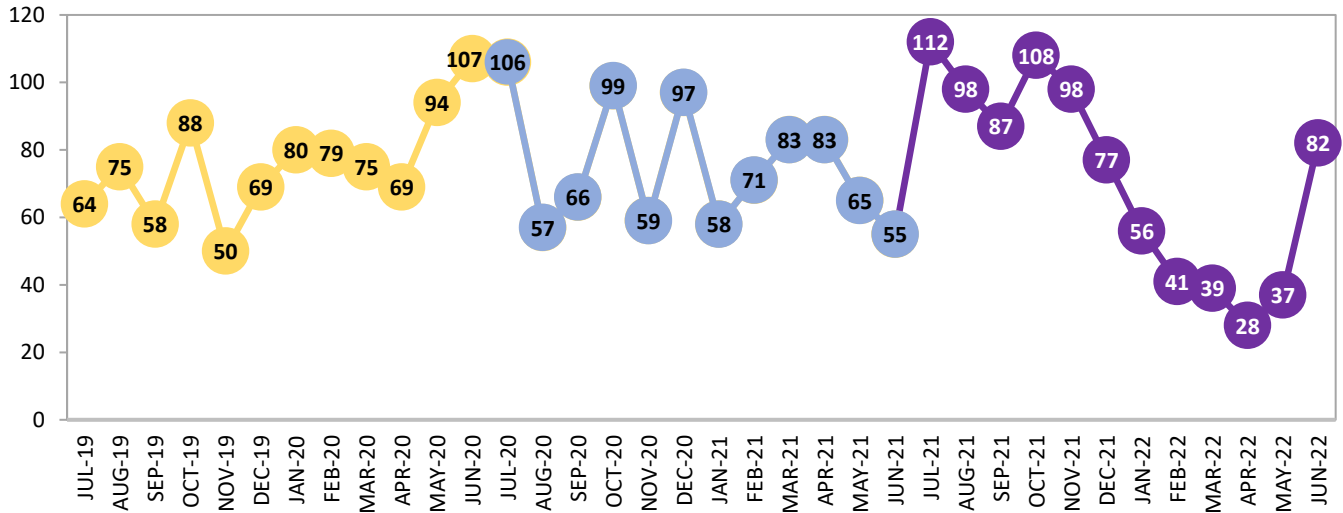|	ADMISSIONS		PATIENTS	
	N	% of total admissions	N	% of total patients
Admitted	1,093	2.0	712	2.1
Discharged	847	2.2	552	2.3

The number of MHLA patients experienced a significant increase of 1,071% from 59 in FY1617 to 691 in FY1920. The upward trend continued, although at a more moderate rate, thereafter (Figure 6.10.1).

Figure 6.10.1. Trend in MHLA patients, FY1617 - FY2122

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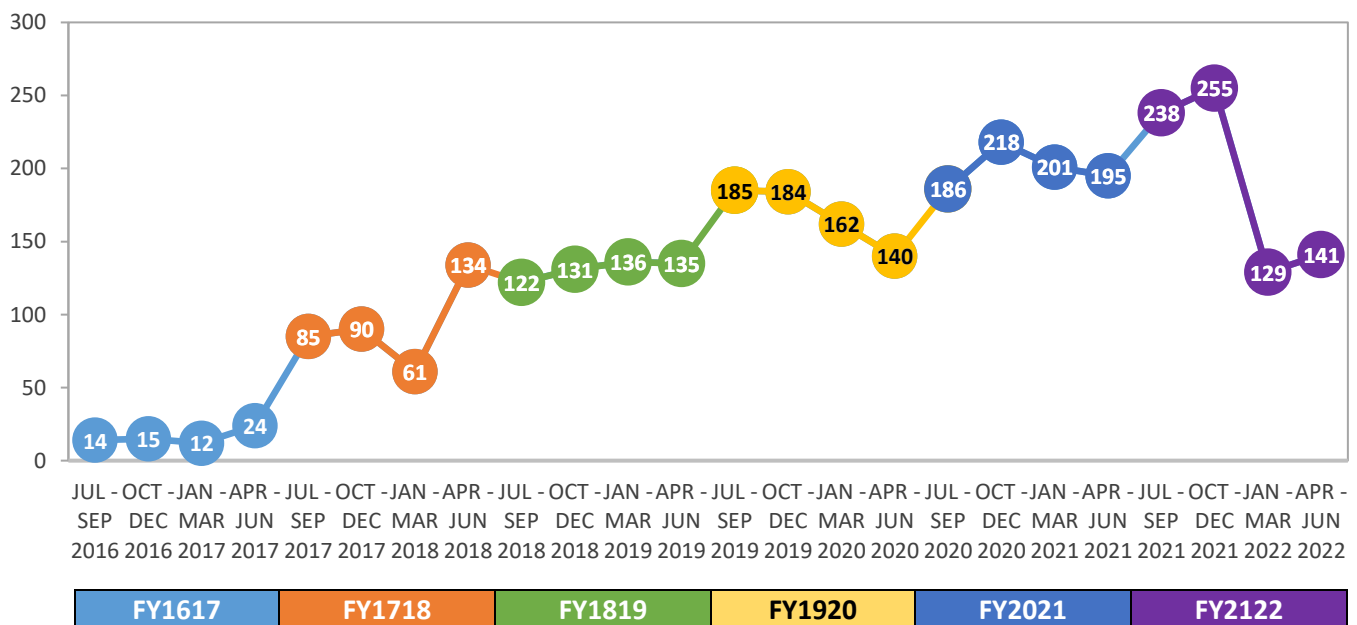
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The monthly number of MHLA patients among new admissions increased from 64 in July 2019 to 82 in June 2022 (Figure 6.10.2).

**Figure 6.10.2. Trend in MHLA patient among new admissions, monthly, FY1920-FY2122**

The quaterly number of MHLA patients among new admissions increased 1,721% from 14 in the first quarter of FY1617 to 255 in the second quarter of FY2122 and dropped about 45% in the subsequent quarters (Figure 6.10.3).

Figure 6.10.3. Trend in MHLA patients among new admissions, quarterly, FY1617– FY2122

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The number of MHLA patients who were referred by MHLA clinics per referral source data increased from 8 in FY1617 to 40 in FY1920, then decreased to 33 in FY2122 (Figure 6.10.4).

Figure 6.10.4. Trend in MHLA clinic referrals among MHLA patients, FY1617- FY2122
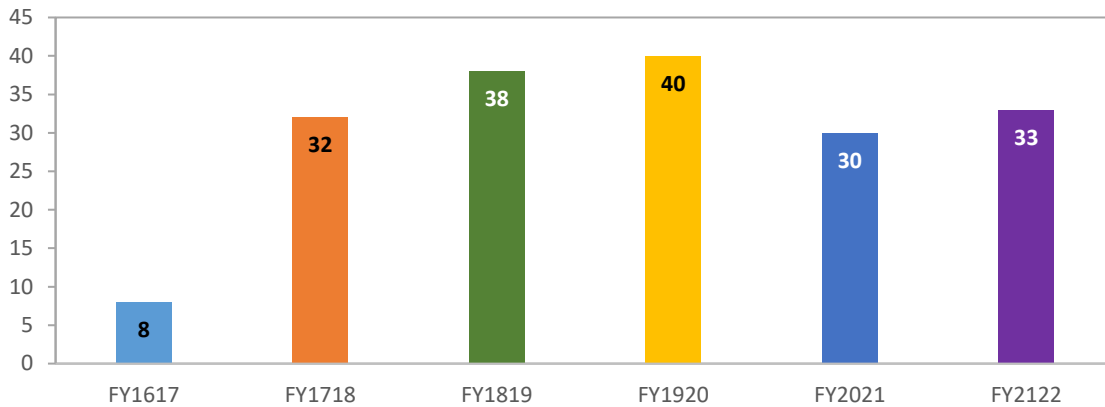
PATIENT CHARACTERISTICS

The majority of the MHLA patients were male (68.0%), Latinx (96.4%), ages 26 to 34 (41.4%), and unemployed (56.3%) (Table 6.10.2).

Table 6.10.2. Characteristics of MHLA patients, FY2122

CHARACTERISTICS		%
GENDER IDENTITY	Male	68.0
	Female	31.9
	Transgender male	-
	Transgender female	-
	Non-conforming or refuse to state	-
RACE	Latinx	96.4
	White	1.5
	Black/African American	-
	Asian	1.1
	Pacific Islander	-
	Other	0.9
AGE	17 and under	-
	18-25	-
	26-34	41.4
	35-44	40.5
	45-54	14.6
	55-64	3.4
	65+	-
EDUCATION	Middle school or below	24.9
	Some high school	34.4
	High school completed	33.8
	Some college or beyond	6.9
EMPLOYMENT	Employed	34.3
	Unemployed (seeking)	39.1
	Unemployed (not seeking)	17.2
	Not in labor force	9.4

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

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PRIMARY SUBSTANCE USE AT ADMISSION

The most common primary substance use reported at admission among MHLA patients was methamphetamine (53.4%), followed by alcohol (38.6%) and marijuana (4.4%) (Table 6.10.3).

Table 6.10.3. Primary substance use among MHLA patients, FY2122

PRIMARY SUBSTANCE USE	%
Methamphetamine	53.4
Alcohol	38.6
Marijuana	4.4
Heroin	1.6
Cocaine	1.4
Prescription drug	-
Other drugs	-

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

LEVEL OF CARE

MHLA patients were most commonly treated in outpatient programs (36.9%), followed by residential service programs (24.6%) and intensive outpatient programs (20.4%) (Table 6.10.4).

Table 6.10.4. Level of care among MHLA patients, FY2122

LEVEL OF CARE	%
Withdrawal Management	**5.6**
ASAM WM 3.2	3.1
ASAM WM 3.7/4.0	2.6
Residential Service	**24.6**
ASAM 3.1	16.0
ASAM 3.5	8.6
Intensive Outpatient (ASAM 2.1)	**20.4**
Outpatient (ASAM1.0)	**36.9**
Opioid Treatment Program (ASAM OTP)	**0.4**
Recovery Support Service	**12.2**

Note: Percentages are based on non-missing values, and may not sum to 100% due to rounding.
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DISCHARGE STATUS AND TREATMENT OUTCOMES AT DISCHARGE

Of the discharges among MHLA patients who had discharge status, 61.1% had positive compliance, with 51.2% completing treatment and 9.9% leaving with satisfactory progress (Table 6.10.5).
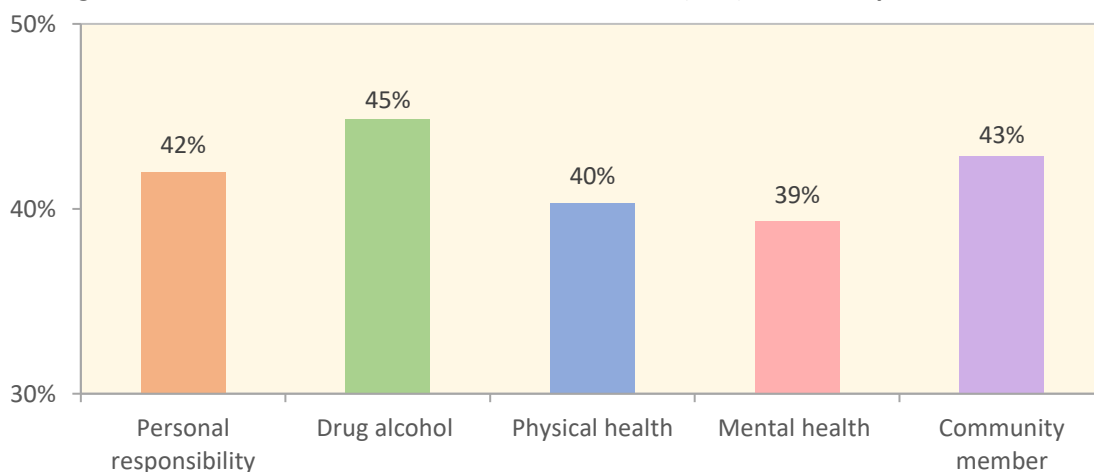
Table 6.10.5. Discharge status of MHLA patients, FY2122

DISCHARGE STATUS	%
Positive compliance	**61.1**
Completed treatment	51.2
Left – satisfactory progress	9.9
Negative compliance (Left – unsatisfactory progress)	**30.2**
Other (Death/incarceration/other)	**8.8**

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

According to the Treatment Effectiveness Assessment (TEA) used to gauge recovery progress per the patients' perspective at the time of discharge, 42% of MHLA patients reported they were better in taking care of personal responsibilities (e.g., paying bills, following through on personal or professional commitments), 45% reported they were better with handling drug and alcohol use (e.g., the frequency and amount of use, money spent on drugs, amount of drug craving, being sick, etc.), 40% reported they were better in physical health (e.g., eating and sleeping properly, exercising, taking care of health or dental problems), 39% reported they were better in mental health (e.g., feeling good about themselves), and 43% reported they were a better community member (e.g., obeying laws, meeting your responsibilities to society, positive impact on others) compared to at admission (Figure 6.10.5).

Figure 6.10.5. Treatment Effectiveness Assessment (TEA) for MHLA patients, FY2122

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