



DATA SHORTS

Behavioral Health Integration: An Analysis of Service Utilization

The June 2014 Data Short (Vol. 3, Issue 6) examined the characteristics of individuals ages 15 and over who received services in FY 2013 from the Public Mental Health System (PMHS) (n=110,790), who received a Substance Use Disorder (SUD) service from a publicly funded Alcohol and Drug Abuse (ADAA) program (n=51,139), and the cohort who received services in both systems (n=12,688). This cohort accounts for 11% of those served in the PMHS and about 25% of those who received an SUD service in FY 2013. The current Data Short examines the types of services used by these groups in the two service systems.

The first graph compares the types of service used by everyone in the PMHS with those in the cohort active in both systems. Those in the cohort were somewhat more likely to have received Case Management, Outpatient, and Residential Rehabilitation services than PMHS participants in general. However, cohort members were much more likely to have received Residential Crisis services and psychiatric inpatient services, two of the most intensive service types in the PMHS.

The second graph shows a comparable analysis for SUD service utilization. The cohort was more likely to have received every type of SUD service except outpatient. As in the PMHS, the cohort was much more likely to receive the most intensive service types, including Intensive Outpatient and Short- and Long-Term Residential services.

The final graph below shows the percentage of the cohort who received more than one type of service within each of the two systems. While 25% of the cohort received multiple PMHS service types, 40% of the cohort received multiple SUD service types. This, in conjunction with the type of service utilization seen in the second graph, suggests that those in the cohort have more serious SUD issues.

An examination of the cohort who received both mental health and SUD services in FY 2013 reveals that they tend to have received the more intensive service types in each of the systems. They were also more likely to be active in multiple types of SUD services than in multiple types of mental health services.

