TEDS

TREATMENT EPISODE DATA SET

Treatment Episode Data Set (TEDS) 2022:

Admissions to and Discharges from Substance Use Treatment Services Reported by Single State Agencies

SAMHSA

Substance Abuse and Mental Health
Services Administration

Treatment Episode Data Set (TEDS) 2022: Admissions to and Discharges from Substance Use Treatment Services Reported by Single State Agencies

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Executive Summary

The Treatment Episode Data Set (TEDS) is collected for and reported by the Substance Abuse and Mental Health Services Administration's (SAMHSA) Center for Behavioral Health Statistics and Quality (CBHSQ). TEDS provides episode-level data on clients aged 12 and older receiving substance use treatment services from facilities that are licensed or certified by their respective Single State Agencies (SSAs). For each treatment episode, TEDS collects data on client's characteristics, substance(s) used, the type and duration of treatment service(s) received, years of education completed, and National Outcome Measures (NOMs). The NOMs presented in this report include stability in housing, employment status, criminal justice involvement, social support, retention in treatment, and abstinence. Data on past month abstinence verse the use of alcohol or drugs are presented in a separate section called morbidity status.

TEDS data are processed and stored as two separate data sets, TEDS-A (admissions) and TEDS-D (discharges). This report presents findings from 1,498,034 admissions to and 1,394,138 discharges from substance use treatment services as reported by SSAs in 2022 and 8,535,625 admissions to and 7,767,942 discharges from substance use treatment services as reported by SSAs in 2018-2022. TEDS represents admissions and discharges, not clients, as a client can have multiple treatment episodes each year. TEDS serves as a repository for treatment data routinely collected by states for the purposes of monitoring their substance use treatment systems. SAMHSA uses TEDS to enhance their understanding of publicly funded substance use treatment services provided and monitor grantee and program performance.

Characteristics of Admissions to Substance Use Treatment Services in 2022

- Among admissions, the top two age categories[1] were 21-34 years old (37.1%, N = 555,972) and 35-44 years old (28.3%, N = 423,281). The two highest rates per 100,000 population[2,3] by age categories were 1,007 for 35-44 years old and 904 for 21-34 years old.
- Among admissions, 65.4% (N = 978,232) were male and 34.6% (N = 518,656) were female. The rates per 100,000 population[2,3] by sex were 717 for male and 370 for female.
- Among admissions, the top two race[1] groups were White (65.0%, N = 905,596) and Black or African American (20.0%, N = 279,151). The two highest rates per 100,000 population[2,3] by race were 1,766 for American Indian or Alaska Native and 1,538 for Other race.
- Among admissions, 15.2% (N = 206,583) were of Hispanic or Latino origin and 84.8% (N = 1,152,438) were Not of Hispanic or Latino origin. The rates per 100,000 population[2,3] by ethnicity were 390 for those of Hispanic or Latino origin and 515 for Not of Hispanic or Latino origin.
- Among admissions, the top two primary substances used[3] were alcohol (35.5%, N = 440,540) and heroin (16.9%, N = 209,466). The two highest rates per 100,000 population[2,3] by primary substance use were 159 for alcohol use and 76 for heroin use.
- Among admissions, the top two years of education completed[1] categories were 12 years or General Educational Development (GED) (50.4%, N = 576,954) and 13 to 15 years (20.1%, N = 229,826).

Characteristics of Discharges from Substance Use Treatment Services in 2022

- Among discharges, the top two age categories[1] were 21-34 years old (37.7%, N = 525,733) and 35-44 and older (28.5%, N = 397,966). The two highest rates per 100,000 population[2,3] by age categories were 918 for 35-44 years old and 829 for 21-34 years old.
- Among discharges, 64.7% (N = 900,816) were male and 35.3% (N = 492,407) were female. The rates per 100,000 population[2,3] by sex were 641 for male and 341 for female.
- Among discharges, the top two race[1] groups were White (67.6%, N = 895,954) and Black or African American (18.1%, N = 239,585). The two highest rates per 100,000 population[2,3] by race were 1,486 for American Indian or Alaska Native and 1,357 for Other race.
- Among discharges, 14.0% (N = 186,354) were of Hispanic or Latino origin and 86.0% (N = 1,140,552) were Not of Hispanic or Latino origin. The rates per 100,000 population[2,3] by ethnicity were 346 for those of Hispanic or Latino origin and 493 for those Not of Hispanic or Latino origin.
- Among discharges, the top two primary substances used[1] were alcohol (34.5%, N = 423,110) and heroin (18.3%, N = 223,858). The two highest rates per 100,000[2,3] by primary substance use were 148 for alcohol use and 79 for heroin use.

National Outcome Measures (NOMs) Among Admissions to Substance Use Treatment Services in 2022

- Among admissions, the top two living arrangements[1] were independent living (65.7%, N = 772,551) and experiencing homelessness (17.7%, N = 208,154).
- Among admissions, the top two employment statuses[1] were unemployed (43.7%, N = 517,362) and not in labor force (29.2%, N = 345,405).
- Among admissions, the top two number of arrests in the past 30 days[1] were no arrests (93.7%, N = 1,081,197) and one arrest (5.4%, N = 62,193).
- Among admissions, the top two detailed criminal justice referrals[1] were probation/parole (38.9%, N = 82,765) and state/federal court (16.0%, N = 34,066).
- Among admissions, the top two frequencies of attendance at self-help groups[1] in the past 30 days were none in the past month (78.4%, N = 858,013) and 8-30 times in the past month (8.6%, N = 94,575).

National Outcome Measures (NOMs) Among Discharges from Substance Use Treatment Services in 2022

- Among discharges, the top two living arrangements[1] were independent living (66.9%, N = 704,104) and dependent living (19.1%, N = 201,101).
- Among discharges, the top two employment statuses[1] were unemployed (39.4%, N = 446,649) and not in labor force (30.6%, N = 346,866).
- Among discharges, the top two number of arrests[1] in the past 30 days were no arrests (94.0%, N = 1,058,108) and one arrest (4.2%, N = 47,141).
- Among discharges, the top two frequencies of attendance at self-help groups[1] in the past 30 days were none in the past month (67.7%, N = 750,411) and 8-30 times in the past month (14.6%, N = 161,707).

Morbidity Status Among Admissions to Substance Use Treatment Services in 2022

- Among admissions, 22.5% (N = 336,621) were abstinent and 59.9% (N = 896,660) reported substance use. The rates per 100,000 population[2,3] by morbidity status[1] were 122 for those who were abstinent and 324 for those who reported substance use.

Morbidity Status Among Discharges from Substance Use Treatment Services in 2022

- Among discharges, 29.1% (N = 406,278) were abstinent and 48.8% (N = 680,670) reported substance use. The rates per 100,000 population[2,3] by morbidity status[1] were 143 for those who were abstinent and 239 for those who reported substance use.

Characteristics and Top 6 Primary Substances Among Admissions to Substance Use Treatment Services in 2018-2022

- Among admissions in 2018, the top two age categories[1] were 21-34 years old (42.5%, N = 864,703) and 35-44 years old (23.4%, N = 475,565). Among admissions in 2022, the top two age categories were 21-34 years old (37.1%, N = 555,972) and 35-44 years old (28.3%, N = 423,281).
- Among admissions in 2018, 64.2% (N = 1,303,680) were male and 35.8% (N = 727,882) were female. Among admissions in 2022, 65.4% (N = 978,232) were male and 34.6% (N = 518,656) were female.
- Among admissions in 2018, the top two race[1] groups were White (67.0%, N = 1,310,194) and Black or African American (19.9%, N = 388,376). Among admissions in 2022, the top two race groups were White (65.0%, N = 905,596) and Black or African American (20.0%, N = 279,151).
- Among admissions in 2018, 14.2% (N = 275,942) were of Hispanic or Latino origin and 85.8% (N = 1,672,136) were Not of Hispanic or Latino origin. Among admissions in 2022, 15.2% (N = 206,583) were of Hispanic or Latino origin and 84.8% (N = 1,152,438) were Not of Hispanic or Latino origin.
- Among admissions in 2018, the top two primary substances used[1] were alcohol (30.9%, N = 607,017) and heroin (26.5%, N = 521,917). Among admissions in 2022, the top two primary substances used were alcohol (35.5%, N = 440,540) and heroin (16.9%, N = 209,466).

Characteristics and Top 6 Primary Substances Among Discharges from Substance Use Treatment Services in 2018-2022

- Among discharges in 2018, the top two age categories[1] were 21-34 years old (43.2%, N = 758,877) and 35-44 years old (23.7%, N = 415,477). Among discharges in 2022, the top two age categories were 21-34 years old (37.7%, N = 525,733) and 35-44 years old (28.5%, N = 397,966).
- Among discharges in 2018, 64.1% (N = 1,125,193) were male and 35.9% (N = 629,502) were female. Among admissions in 2022, 64.7% (N = 900,816) were male and 35.3% (N = 492,407) were female.
- Among discharges in 2018, the top two race[1] groups were White (68.3%, N = 1,160,282) and Black or African American (18.2%, N = 309,464). Among discharges in 2022, the top two race[1] groups were White (67.6%,

N = 895,954) and Black or African American (18.1%, N = 239,585). Among discharges in 2018, 13.5% (N = 229,185) were of Hispanic or Latino origin and 86.5% (N = 1,463,770) were Not of Hispanic or Latino origin. Among discharges in 2022, 14.0% (N = 186,354) were of Hispanic or Latino origin and 86.0% (N = 1,140,552) were Not of Hispanic or Latino origin.

- Among discharges in 2018, the top two primary substances used[1] were alcohol (31.1%, N = 528,373) and heroin (24.7%, N = 419,495). Among discharges in 2022, the top two primary substances used were alcohol (34.5%, N = 423,110) and heroin (18.3%, N = 223,858).

Geographic Distribution of Admissions to Substance Use Treatment Services by State in 2022

- Ten states (New York, Arizona, Maryland, California, New Jersey, Colorado, Michigan, Minnesota, Massachusetts, and Connecticut) accounted for 66.0% (N = 988,749) of admissions to substance use treatment services.
- Eleven states (Arizona, Maryland, South Dakota, Connecticut, Colorado, Minnesota, New York, New Jersey, Vermont, Massachusetts, and Rhode Island) had the highest rates per 100,000 population[2,3] (between 975 – 2,900) of admissions to substance use treatment services. Both Massachusetts and Rhode Island had a rate of 975 per 100,000.

Geographic Distribution of Discharges from Substance Use Treatment Services by State in 2022

- Ten states (New York, Arizona, North Carolina, California, New Jersey, Michigan, Kentucky, Colorado, Minnesota, and Massachusetts) accounted for 66.5% (N = 926,710) of discharges from substance use treatment services.
- Ten states (Arizona, South Dakota, Kentucky, Connecticut, North Carolina, Colorado, Minnesota, Vermont, New York, and New Jersey) had the highest rates per 100,000 population[2,3] (between 990 – 2,750) of discharges from substance use treatment services.

Section 1. Introduction

TEDS Overview

The Treatment Episode Data Set (TEDS) is collected for and reported by the Substance Abuse and Mental Health Services Administration's (SAMHSA) Center for Behavioral Health Statistics and Quality (CBHSQ). TEDS provides episode-level data on clients aged 12 and older receiving substance use treatment services from facilities that are licensed or certified by their respective Single State Agencies (SSAs). For each treatment episode, TEDS collects data on client's characteristics, substance(s) used, the type and duration of treatment service(s) received, years of education completed (ages 18 and over), and National Outcome Measures (NOMs). The NOMs presented in this report include stability in housing (living arrangements), employment status (ages 16 and over), criminal justice involvement (arrests and criminal justice referrals), social support (attendance at self-help groups), retention in treatment (length of stay), and abstinence from alcohol or drug use. Data on past month abstinence verse the use of alcohol or drugs are presented in a separate section called morbidity status.

TEDS data are processed and stored as two separate data sets, admissions data set (TEDS-A) and discharges data set (TEDS-D), that can be linked using a unique record identifier. TEDS represents admissions and discharges, not clients, as a client can have multiple treatment episodes each year.

TEDS serves as a repository for treatment data routinely collected by states for the purposes of monitoring their substance use treatment systems. SAMHSA uses TEDS to enhance their understanding of publicly funded substance use treatment services provided and monitor grantee and program performance.

TEDS Background

The TEDS system is comprised of two major components: the admissions data set (TEDS-A) and the discharges data set (TEDS-D). Data for the TEDS-A (admissions) were first reported in 1992, while data for the TEDS-D (discharges) were first reported in 2000. For more information on TEDS background, components, data elements, and history, please refer to Appendix J.

Section 2. Methodology and Data Notes

2.A   Data Presented in the 2022 TEDS Annual Report

This report presents findings from 1,498,034 admissions to and 1,394,138 discharges from substance use treatment services for individuals ages 12 years and older as reported by the SSAs in 2022 (Sections 3, 4, 5, and 7) and 8,535,625 admissions to and 7,767,942 discharges from substance use treatment services for individuals ages 12 and older as reported by SSAs in 2018–2022 (Section 6). Each section is divided into two sub-sections that present data on admissions to and discharges from substance use treatment services. The data presented in this report are organized as follows:

- Key characteristics: the percentages and rates per 100,000 population by demographics, treatment referral sources, type of treatment services, top 10 primary substances, reason for discharge, and years of education completed in 2022 (Section 3).

- NOMs: the percentages by living arrangements, employment status (ages 16 and over), arrests, criminal justice referrals, attendance at self-help groups, and length of stay in 2022 (Section 4).

- Morbidity status: the percentages and rates per 100,000 population for those abstinent and those reporting using a substance in 2022 (Section 5).

- Changes over time: the percentages by demographics and top 6 primary substances in 2018-2022 (Section 6).

- Geographic distribution: counts and rates per 100,000 population by states for overall admissions and discharges and top 6 primary substances in 2022 (Section 7).

Data limitations, endnotes, key definitions, and appendices follow. Appendices include data tables corresponding to the visualizations presented in each of the sections mentioned above, and additional TEDS background and context.

2.B   Data Reporting and Exclusions

This report includes admissions and discharges data received and processed through October 17, 2023.[1] For both admissions and discharges data sets, states that had counts less than 50% of the prior past 3-year average (e.g., for 2022, the average of 2019, 2020, and 2021 counts) were excluded from this report. As a result, four states (Delaware, Oregon, Washington, and West Virginia) were excluded from admissions data, and two states (Delaware and Oregon) were excluded from discharges data in 2022. To see the 2018-2022 state and jurisdiction exclusions, see Appendix J.

2.C   Data Notes

TEDS records do not represent clients; rather, each record represents a treatment episode. For example, a client admitted to substance use treatment twice within a calendar year will be counted as two admissions. Similarly, a client discharged from substance use treatment twice within a calendar year will be counted as two discharges.

Data on the key characteristics, morbidity status, and geographic distribution of overall and the top 6 primary substances by admissions and discharges are visualized as percentages and rates per 100,000 population (Sections 3, 5, and 7). Data on NOMs and changes over time are visualized as percentages (Sections 4 and 7). For definitions of specific characteristics and substance types, please see Appendix A.

Rates per 100,000 populations were calculated using the 2022 estimates from the Census, the American Community Survey (ACS), and the Bureau of Labor Statistics.[2] These population estimates were adjusted to (a) align with the states that are included in this report, and (b) obtain estimated counts for race and ethnicity by applying the ACS distribution ratios for these subgroups to the Census totals reported.

TEDS-D includes all discharges from a given reporting year, irrespective of when they were admitted. Out of all discharges that took place in 2022, 79.5% were admitted to treatment in 2022, and 20.5% were admitted in prior years. For further details on 2022 discharges that were admitted in prior years, please see Appendix B.

The data presented in Sections 3, 4, 5, 6, and 7 of this report were calculated after excluding the missing values (i.e., values that are missing, unknown, or not collected/applicable). For example, admissions where employment status was not applicable (i.e., under 16 years of age) were excluded from the denominator when calculating percentages. For data tables corresponding to the charts and/or maps presented in the report, including the missing value counts and percentages, please see Appendices D through H.

Section 3. Characteristics of Substance Use Treatment Admissions and Discharges

This section presents the characteristics of substance use treatment admissions and discharges along with the top 10 primary substances involved. Wherever feasible, the data are visualized as percentages and rates per 100,000 population, and narratives describing key findings from the graphs include episode counts for reference. For definitions of key characteristics, please refer to Appendix A. For details on counts, percentages, and rates corresponding to this section, including missing value counts and percentages, please refer to Appendix D.

Key Takeaways – Admissions

- Among admissions, the top two age categories[1] were 21-34 years old (37.1%, N = 555,972) and 35-44 years old (28.3%, N = 423,281). The two highest rates per 100,000 population[2,3] by age categories were 1,007 for 35-44 years old and 904 for 21-34 years old.
- Among admissions, 65.4% (N = 978,232) were male and 34.6% (N = 518,656) were female. The rates per 100,000 population[2,3] by sex were 717 for male and 370 for female.
- Among admissions, the top two race[1] groups were White (65.0%, N = 905,596) and Black or African American (20.0%, N = 279,151). The two highest rates per 100,000 population[2,3] by race were 1,766 for American Indian or Alaska Native and 1,538 for Other race.
- Among admissions, 15.2% (N = 206,583) were of Hispanic or Latino origin and 84.8% (N = 1,152,438) were Not of Hispanic or Latino origin. The rates per 100,000 population[2,3] by ethnicity were 390 for those of Hispanic or Latino origin and 515 for Not of Hispanic or Latino origin.
- Among admissions, the top two primary substances used[1] were alcohol (35.5%, N = 440,540) and heroin (16.9%, N = 209,466). The two highest rates per 100,000 population[2,3] by primary substance use were 159 for alcohol use and 76 for heroin use.
- Among admissions, the top two years of education completed[1] categories were 12 years or General Educational Development (GED) (50.4%, N = 576,954) and 13 to 15 years (20.1%, N = 229,826).

Key Takeaways – Discharges

- Among discharges, the top two age categories[1] were 21-34 years old (37.7%, N = 525,733) and 35-44 and older (28.5%, N = 397,966). The two highest rates per 100,000 population[2,3] by age categories were 918 for 35-44 years old and 829 for 21-34 years old.
- Among discharges, 64.7% (N = 900,816) were male and 35.3% (N = 492,407) were female. The rates per 100,000 population[2,3] by sex were 641 for male and 341 for female.
- Among discharges, the top two race[1] groups were White (67.6%, N = 895,954) and Black or African American (18.1%, N = 239,585). The two highest rates per 100,000 population[2,3] by race were 1,486 for American Indian or Alaska Native and 1,357 for Other race.
- Among discharges, 14.0% (N = 186,354) were of Hispanic or Latino origin and 86.0% (N = 1,140,552) were Not of Hispanic or Latino origin. The rates per 100,000 population[2,3] by ethnicity were 346 for those of Hispanic or Latino origin and 493 for those Not of Hispanic or Latino origin.
- Among discharges, the top two primary substances used[1] were alcohol (34.5%, N = 423,110) and heroin (18.3%, N = 223,858). The two highest rates per 100,000[2,3] by primary substance use were 148 for alcohol use and 79 for heroin use.

3.A   Characteristics of Admissions to Substance Use Treatment Services, 2022

Figure 3.A.1   Percentages and Rates of Admissions to Substance Use Treatment Services by Age in 2022

Among admissions to substance use treatment services in 2022 by age,[1] 4.7% (N = 70,692) were 12-20 years old, 37.1% (N = 555,972) were 21-34 years old, 28.3% (N = 423,281) were 35-44 years old, 16.4% (N = 245,979) were 45-54 years old, 11.3% (N = 168,588) were 55-64 years old, and 2.2% (N = 33,522) were 65 years and older.

The rates per 100,000 population[2,3] of admissions to substance use treatment services by age[1] were 188 for those 12-20 years old, 904 for those 21-34 years old, 1,007 for those 35-44 years old, 630 for those 45-54 years old, 414 for those 55-64 years old, and 60 for those 65 years and older.
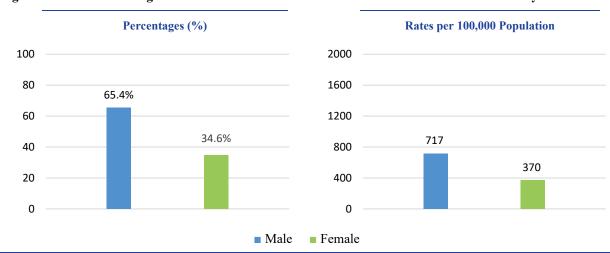
Figure 3.A.2   Percentages and Rates of Admissions to Substance Use Treatment Services by Sex in 2022

Among admissions to substance use treatment services in 2022 by sex,[1] 65.4% (N = 978,232) were male and 34.6% (N = 518,656) were female.

The rates per 100,000 population[2,3] of admissions to substance use treatment services by sex[1] were 717 for male and 370 for female.
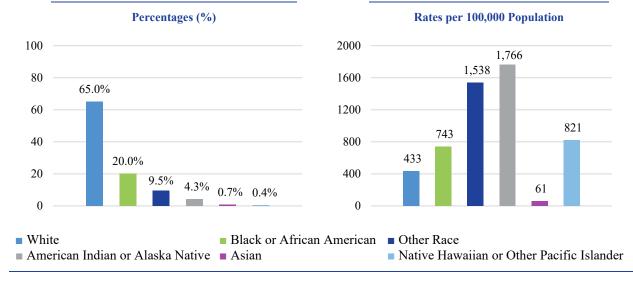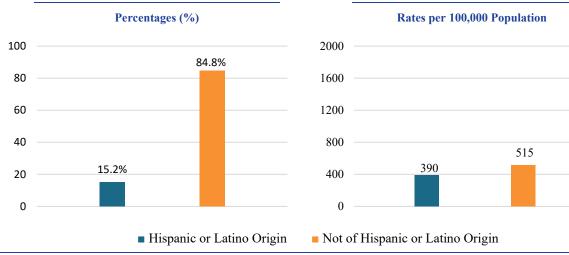
Figure 3.A.3   Percentages and Rates of Admissions to Substance Use Treatment Services by Race in 2022

Among admissions to substance use treatment services in 2022 by race,[1] 65.0% (N = 905,596) were White, 20.0% (N = 279,151) were Black or African American, 9.5% (N = 132,551) were Other race, 4.3% (N = 59,548) were American Indian or Alaska Native, 0.7% (N = 10,437) were Asian, and 0.4% (N = 5,252) were Native Hawaiian or Other Pacific Islander.

The rates per 100,000 population[2,3] of admissions to substance use treatment services by race[1] were 433 for White, 743 for Black or African American, 1,538 for Other race, 1,766 for American Indian or Alaska Native, 61 for Asian, and 821 for Native Hawaiian or Other Pacific Islander.

Figure 3.A.4   Percentages and Rates of Admissions to Substance Use Treatment Services by Ethnicity in 2022

Among admissions to substance use treatment services in 2022 by ethnicity,[1] 15.2% (N = 206,583) were of Hispanic or Latino origin and 84.8% (N = 1,152,438) were Not of Hispanic or Latino origin.

The rates per 100,000 population[2,3] of admissions to substance use treatment services by ethnicity[1] were 390 for those of Hispanic or Latino origin and 515 for those Not of Hispanic or Latino origin.
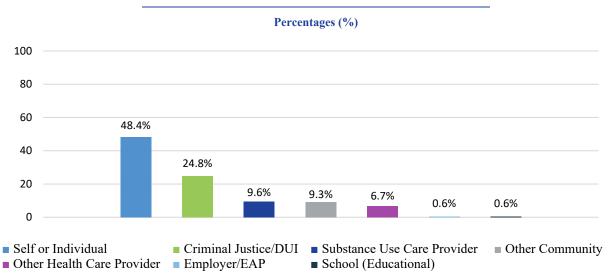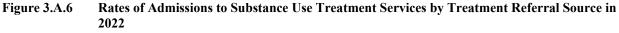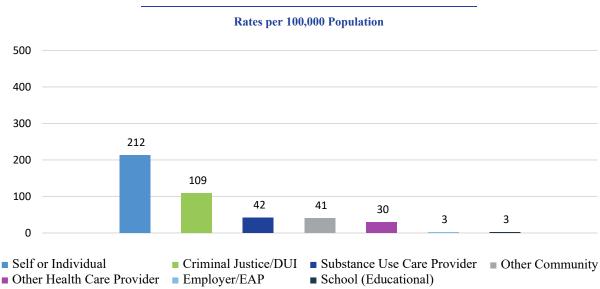
Figure 3.A.5   Percentages of Admissions to Substance Use Treatment Services by Treatment Referral Source in 2022

Percentages (%)

Among admissions to substance use treatment services in 2022 by treatment referral source,[1] 48.4% (N = 588,004) were self or individual, 24.8% (N = 301,082) were criminal justice/DUI, 9.6% (N = 116,550) were substance use care provider, 9.3% (N = 112,853) were other community referrals, 6.7% (N = 81,721) were other health care provider, 0.6% (N = 7,432) were employer/employee assistance program (EAP), and 0.6% (N = 7,381) were school (educational).

Figure 3.A.6   Rates of Admissions to Substance Use Treatment Services by Treatment Referral Source in 2022

Rates per 100,000 Population

The rates per 100,000 population[2,3] of admissions to substance use treatment services by treatment referral source[1] were 212 for self or individual, 109 for criminal justice/DUI, 42 for substance use care provider, 41 for other community, 30 for other health care provider, 3 for employer/EAP, and 3 for school (educational).
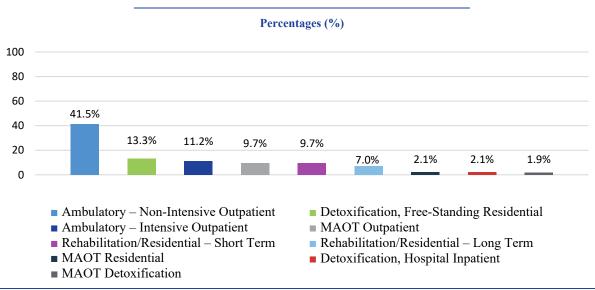
Figure 3.A.7   Percentages of Admissions to Substance Use Treatment Services by Type of Treatment Service in 2022

Percentages (%)

Among admissions to substance use treatment services in 2022 by type of treatment service,[1] 41.5% (N = 621,573) received ambulatory – non-intensive outpatient services, 13.3% (N = 199,621) received free-standing residential detoxification services, 11.2% (N = 168,464) received ambulatory – intensive outpatient services, 9.7% (N = 145,859) received medication-assisted opioid therapy (MAOT) outpatient services, 9.7% (N = 145,615) received short term residential rehabilitation services, 7.0% (N = 104,349) received long term residential rehabilitation services, 2.1% (N = 31,928) received MAOT residential services 2.1% (N = 31,810) received hospital inpatient detoxification services, and 1.9% (N = 29,209) received MAOT detoxification services. For data on other types of treatment services not visualized in this graph, please refer to Appendix D.
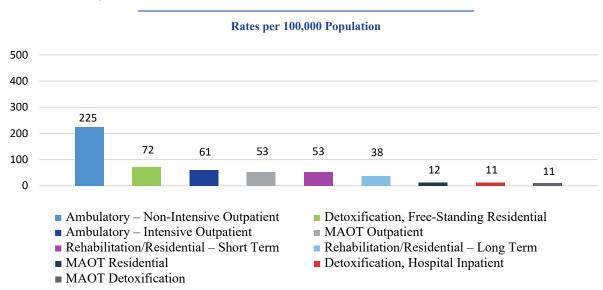
Figure 3.A.8   Rates of Admissions to Substance Use Treatment Services by Type of Treatment Service in 2022

Rates per 100,000 Population

The rates per 100,000 population[2,3] of admissions to substance use treatment services by type of treatment service[1] were 225 for ambulatory – non-intensive outpatient services, 72 for free-standing residential detoxification services, 61 for ambulatory – intensive outpatient services, 53 for MAOT outpatient services, 53 for short term residential rehabilitation services, 38 for long term residential rehabilitation services, 12 for MAOT residential services, 11 for hospital inpatient detoxification services, and 11 for MAOT detoxification services. For data on other types of treatment services not visualized in this graph, please refer to Appendix D.
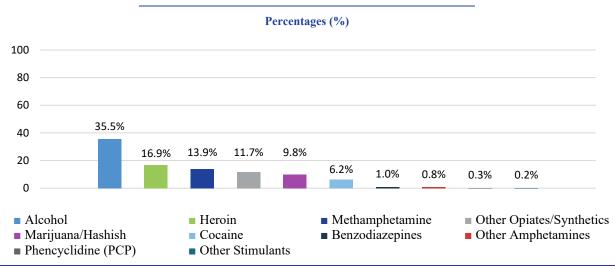
Figure 3.A.9 **Percentages of Admissions to Substance Use Treatment Services by Top 10 Primary Substances in 2022**

Percentages (%)

- Alcohol
- Marijuana/Hashish
- Phencyclidine (PCP)
- Heroin
- Cocaine
- Other Stimulants
- Methamphetamine
- Benzodiazepines
- Other Opiates/Synthetics
- Other Amphetamines

Among admissions to substance use treatment services in 2022 by top 10 primary substances,[1] 35.5% (N = 440,540) were for alcohol use, 16.9% (N = 209,466) were for heroin use, 13.9% (N = 171,882) were for methamphetamine use, 11.7% (N = 145,714) were for other opiates/synthetics use, 9.8% (N = 122,049) were for marijuana/hashish use, 6.2% (N = 77,034) were for cocaine use, 1.0% (N = 11,877) were for benzodiazepines use, 0.8% (N = 9,865) were for other amphetamines use, 0.3% (N = 3,131) were for phencyclidine (PCP) use, and 0.2% (N = 2,543) were for other stimulants use.
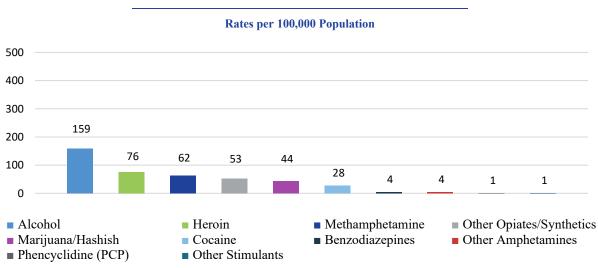
Figure 3.A.10 **Rates of Admissions to Substance Use Treatment Services by Top 10 Primary Substances in 2022**

Rates per 100,000 Population

- Alcohol
- Marijuana/Hashish
- Phencyclidine (PCP)
- Heroin
- Cocaine
- Other Stimulants
- Methamphetamine
- Benzodiazepines
- Other Opiates/Synthetics
- Other Amphetamines

The rates per 100,000 population[2,3] of admissions to substance use treatment services by top 10 primary substances[1] were 159 for alcohol use, 76 for heroin use, 62 for methamphetamine use, 53 for other opiates/synthetics use, 44 for marijuana/hashish use, 28 for cocaine use, 4 for benzodiazepines use, 4 for other amphetamines use, 1 for PCP use, and 1 for other stimulants use.
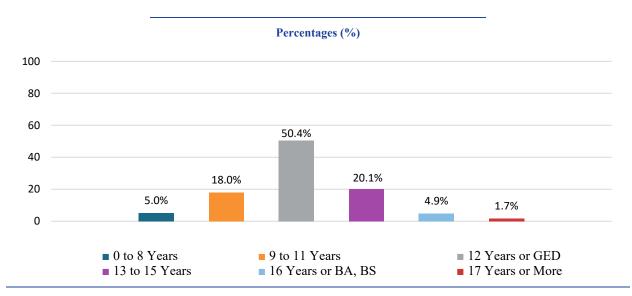
Figure 3.A.11   Percentages of Admissions to Substance Use Treatment Services by Years of Education Completed Among Ages 18 and Over in 2022

Percentages (%)

- 0 to 8 Years
- 9 to 11 Years
- 12 Years or GED
- 13 to 15 Years
- 16 Years or BA, BS
- 17 Years or More

Among admissions to substance use treatment services in ages 18 and over in 2022 by years of education completed,[1] 5.0% (N = 57,493) completed 0 to 8 years of education, 18.0% (N = 205,593) completed 9 to 11 years of education, 50.4% (N = 576,954) completed 12 years of education or a GED, 20.1% (N = 229,826) completed 13 to 15 years of education, 4.9% (N = 55,839) completed 16 years of education or a bachelor's degree, and 1.7% (N = 19,598) completed 17 years or more of education. Please note that TEDS only collects data on years of education completed for admissions among ages 18 and over. TEDS does not collect data on years of education completed for discharges.

3.B   Characteristics of Discharges from Substance Use Treatment Services, 2022
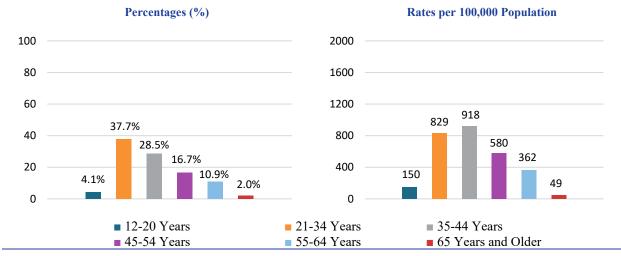
Figure 3.B.1   Percentages and Rates of Discharges from Substance Use Treatment Services by Age in 2022

Among discharges from substance use treatment services in 2022 by age,[1] 4.1% (N = 57,787) were 12-20 years old, 37.7% (N = 525,733) were 21-34 years old, 28.5% (N = 397,966) were 35-44 years old, 16.7% (N = 233,234) were 45-54 years old, 10.9% (N = 151,472) were 55-64 years old, and 2.0% (N = 27,946) were 65 years and older.

The rates per 100,000 population[2,3] of discharges from substance use treatment services by age[1] were 150 for those 12-20 years old, 829 for those 21-34 years old, 918 for those 35-44 years old, 580 for those 45-54 years old, 362 for those 55-64 years old, and 49 for those 65 years and older.
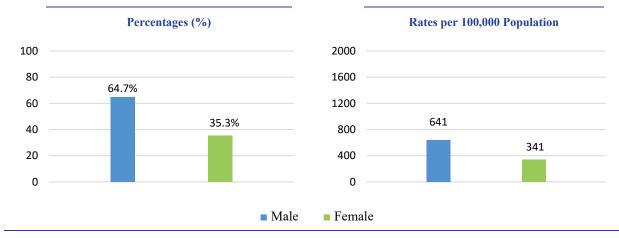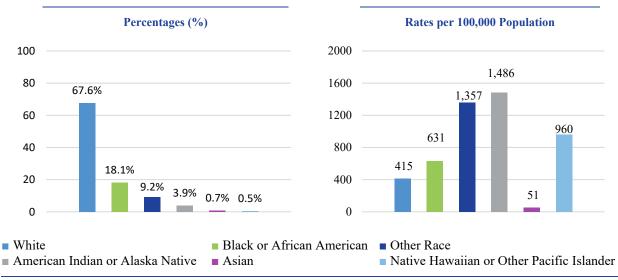
Figure 3.B.2   Percentages and Rates of Discharges from Substance Use Treatment Services by Sex in 2022

Among discharges from substance use treatment services in 2022 by sex,[1] 64.7% (N = 900,816) were male and 35.3% (N = 492,407) were female.
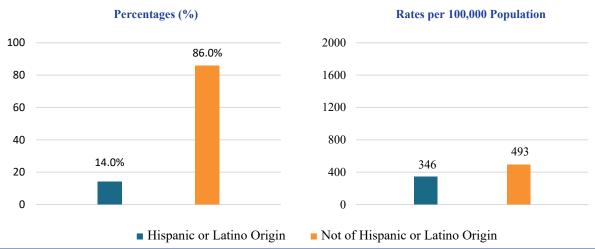
The rates per 100,000 population[2,3] of discharges from substance use treatment services by sex[1] were 641 for male and 341 for female.

Figure 3.B.3   Percentages and Rates of Discharges from Substance Use Treatment Services by Race in 2022

Among discharges from substance use treatment services in 2022 by race,[1] 67.6% (N = 895,954) were White, 18.1% (N = 239,585) were Black or African American, 9.2% (N = 121,229) were Other race, 3.9% (N = 51,929) were American Indian or Alaska Native, 0.7% (N = 9,081) were Asian, and 0.5% (N = 6,664) were Native Hawaiian or Other Pacific Islander.

The rates per 100,000 population[2,3] of discharges from substance use treatment services by race[1] were 415 for White, 631 for Black or African American, 1,357 for Other race, 1,486 for American Indian or Alaska Native, 51 for Asian, and 960 for Native Hawaiian or Other Pacific Islander.

Figure 3.B.4   Percentages and Rates of Discharges from Substance Use Treatment Services by Ethnicity in 2022

Among discharges from substance use treatment services in 2022 by ethnicity,[1] 14.0% (N = 186,354) were of Hispanic or Latino origin and 86.0% (N = 1,140,552) were Not of Hispanic or Latino origin.

The rates per 100,000 population[2,3] of discharges from substance use treatment services by ethnicity[1] were 346 for Hispanic or Latino origin and 493 for Not of Hispanic or Latino origin.
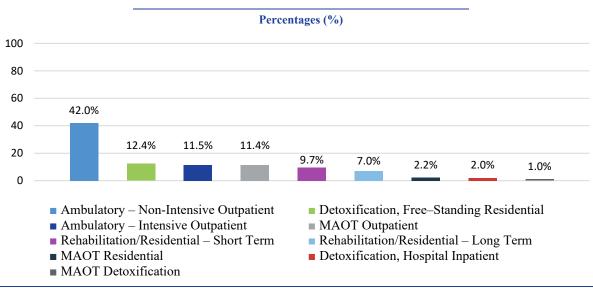
Figure 3.B.5   Percentages of Discharges from Substance Use Treatment Services by Type of Treatment Service in 2022

Percentages (%)

- ■ Ambulatory – Non-Intensive Outpatient
- ■ Ambulatory – Intensive Outpatient
- ■ Rehabilitation/Residential – Short Term
- ■ MAOT Residential
- ■ MAOT Detoxification
- ■ Detoxification, Free–Standing Residential
- ■ MAOT Outpatient
- ■ Rehabilitation/Residential – Long Term
- ■ Detoxification, Hospital Inpatient

Among discharges from substance use treatment services in 2022 by type of treatment service,[1] 42.0% (N = 586,066) received ambulatory – non-intensive outpatient services, 12.4% (N = 172,215) received free-standing residential detoxification services, 11.5% (N = 160,959) received ambulatory – intensive outpatient services, 11.4% (N = 159,026) received MAOT outpatient services, 9.7% (N = 135,099) received short term residential/rehabilitation services, 7.0% (N = 97,887) received long term residential/rehabilitation services, 2.2% (N = 30,768) received MAOT residential services, 2.0% (N = 28,165) received hospital inpatient detoxification services, and 1.0% (N = 13,791) received MAOT detoxification services. For data on other types of treatment services not visualized in this graph, please refer to Appendix D.
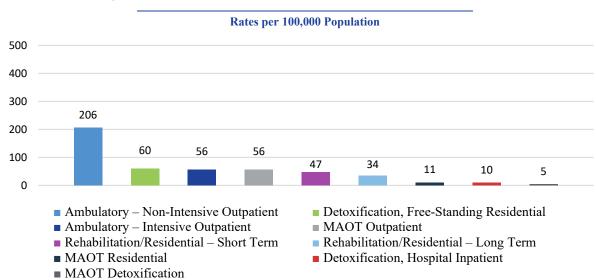
Figure 3.B.6   Rates of Discharges from Substance Use Treatment Services by Type of Treatment Service in 2022

Rates per 100,000 Population

- ■ Ambulatory – Non-Intensive Outpatient
- ■ Ambulatory – Intensive Outpatient
- ■ Rehabilitation/Residential – Short Term
- ■ MAOT Residential
- ■ MAOT Detoxification
- ■ Detoxification, Free-Standing Residential
- ■ MAOT Outpatient
- ■ Rehabilitation/Residential – Long Term
- ■ Detoxification, Hospital Inpatient

The rates per 100,000 population[2,3] of discharges from substance use treatment services by type of treatment service[3] were 206 for ambulatory – non-intensive outpatient services, followed by 60 for free-standing residential detoxification services, 56 for ambulatory – intensive outpatient services, 56 for MAOT outpatient services, 47 for short term residential/rehabilitation services, 34 for long term residential/rehabilitation services, 11 for MAOT residential services, 10 for hospital inpatient detoxification services, 5 for MAOT detoxification services. For data on other types of treatment services not visualized in this graph, please refer to Appendix D.
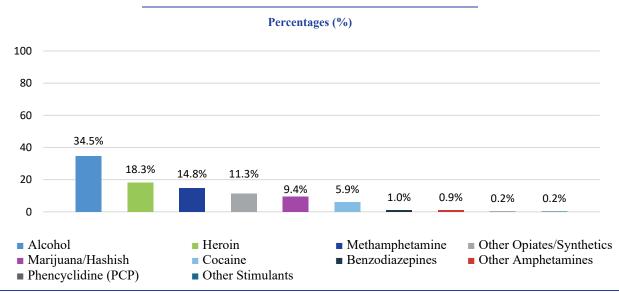
Figure 3.B.7   Percentages of Discharges from Substance Use Treatment Services by Top 10 Primary Substances in 2022

Percentages (%)

Among discharges from substance use treatment services in 2022 by top 10 primary substances,[1] 34.5% (N = 423,110) were for alcohol use, 18.3% (N = 223,858) for heroin use, 14.8% (N = 180,946) were for methamphetamine use, 11.3% (N = 138,746) for other opiates/synthetics use,[1] 9.4% (N = 114,840) were for marijuana/hashish use, 5.9% (N = 72,517) were for cocaine use, 1.0% (N = 12,646) were for benzodiazepines use, 0.9% (N = 11,297) were for other amphetamines use, 0.2% (N = 2,983) were for PCP use, and 0.2% (N = 2,875) were for other stimulants use.
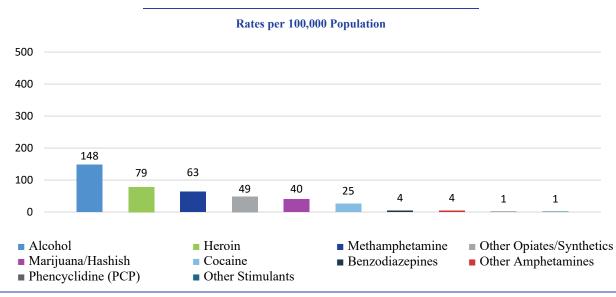
Figure 3.B.8   Rates of Discharges from Substance Use Treatment Services by Top 10 Primary Substances in 2022

Rates per 100,000 Population

The rates per 100,000 population[2,3] of discharges from substance use treatment services by top 10 primary substances[1] were 148 for alcohol use, 79 for heroin use, 63 for methamphetamine use, 49 for other opiates/synthetics use,[1] 40 for marijuana/hashish use, 25 for cocaine use, 4 for benzodiazepines use, 4 for other amphetamines use, 1 for PCP use, and 1 for other stimulants use.
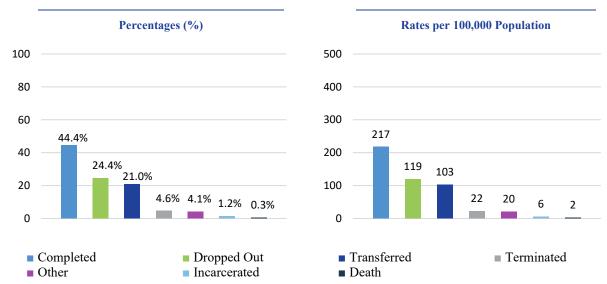
Figure 3.B.9   Percentages and Rates of Discharges from Substance Use Treatment Services by Reason in 2022

Among discharges from substance use treatment services in 2022 by reason,[1] 44.4% (N = 619,292) completed treatment, 24.4% (N = 339,513) dropped out, 21.0% (292,325) were transferred to further treatment, 4.6% (N = 63,558) were terminated, 4.1% (N = 57,683) were discharged for other reasons,[1] 1.2% (N = 17,337) were incarcerated, and 0.3% (N = 4,430) died.

The rates per 100,000 population[2,3] of discharges from substance use treatment services by reason[1] were 217 for those who completed treatment, 119 for those who dropped out, 103 for those who were transferred, 22 for those who were terminated, 20 for those who were discharged for other reasons,[1] 6 for those who were incarcerated, and 2 for those who died.

Section 4. National Outcome Measures (NOMs) Among Substance Use Treatment Admissions and Discharges

This section presents NOMs among substance use treatment admissions and discharges in 2022. The data presented include living arrangements (pertaining to stability in housing), employment status for ages 16 and over (pertaining to employment), arrests and criminal justice referrals (pertaining to criminal justice involvement), attendance at self-help groups (pertaining to social support), and length of stay (pertaining to retention in treatment). Wherever feasible, the data are visualized as percentages and the narratives describing key findings from the graphs include respective admission or discharge counts for reference. For definitions of NOMs presented in this section, please refer to Appendix A. For detailed data on counts, percentages, and rates corresponding to this section, including missing value counts and percentages, please refer to Appendix E.

Key Takeaways – Admissions

- Among admissions, the top two living arrangements[1] were independent living (65.7%, N = 772,551) and experiencing homelessness (17.7%, N = 208,154).
- Among admissions, the top two employment statuses[1] were unemployed (43.7%, N = 517,362) and not in labor force (29.2%, N = 345,405).
- Among admissions, the top two number of arrests in the past 30 days[1] were no arrests (93.7%, N = 1,081,197) and one arrest (5.4%, N = 62,193).
- Among admissions, the top two detailed criminal justice referrals[1] were probation/parole (38.9%, N = 82,765) and state/federal court (16.0%, N = 34,066).
- Among admissions, the top two frequencies of attendance at self-help groups[1] in the past 30 days were none in the past month (78.4%, N = 858,013) and 8-30 times in the past month (8.6%, N = 94,575).

Key Takeaways – Discharges

- Among discharges, the top two living arrangements[1] were independent living (66.9%, N = 704,104) and dependent living (19.1%, N = 201,101).
- Among discharges, the top two employment statuses[1] were unemployed (39.4%, N = 446,649) and not in labor force (30.6%, N = 346,866).
- Among discharges, the top two number of arrests[1] in the past 30 days were no arrests (94.0%, N = 1,058,108) and one arrest (4.2%, N = 47,141).
- Among discharges, the top two frequencies of attendance at self-help groups[1] in the past 30 days were none in the past month (67.7%, N = 750,411) and 8-30 times in the past month (14.6%, N = 161,707).
- Among discharges, the top two mean length of stay[1] by type of treatment services received were MAOT outpatient (301 days) and ambulatory – non-intensive outpatient (120 days).
- Among discharges, the top two median of length of stay[1] by type of treatment service received were MAOT outpatient (80 days) and ambulatory – non-intensive outpatient (52 days).

4.A   National Outcome Measures (NOMs) Among Admissions to Substance Use Treatment Services, 2022
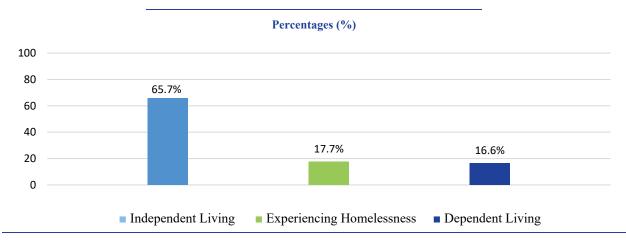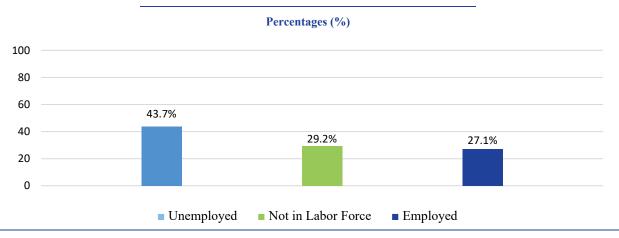
Figure 4.A.1   Percentages of Admissions to Substance Use Treatment Services by Living Arrangements in 2022

Percentages (%)

Among admissions to substance use treatment services in 2022 by living arrangements,[1] 65.7% (N = 772,551) were living independently, 17.7% (N = 208,154) were experiencing homelessness, and 16.6% (N = 195,299) were in dependent living.

Figure 4.A.2   Percentages of Admissions to Substance Use Treatment Services by Employment Status Among Ages 16 and Over in 2022

Percentages (%)

Among admissions to substance use treatment services in ages 16 and over in 2022 by employment status,[1] 43.7% (N = 517,362) were unemployed, 29.2% (N = 345,405) were not in the labor force, and 27.1% (N = 320,217) were employed.[4]
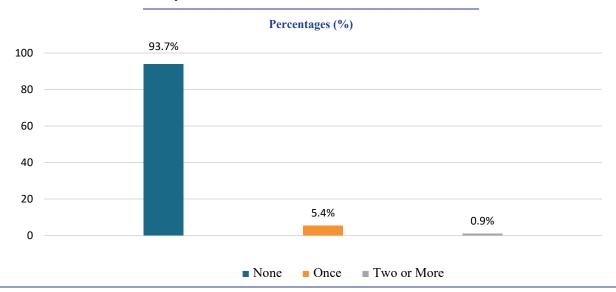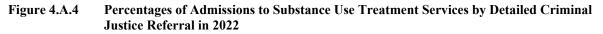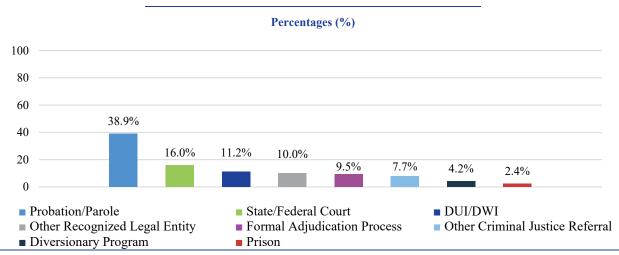
Figure 4.A.3   **Percentages of Admissions to Substance Use Treatment Services by Number of Arrests in the Past 30 days in 2022**

Percentages (%)
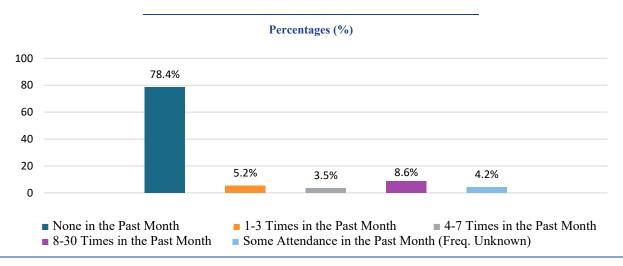
Among admissions to substance use treatment services in 2022 by number of arrests in the past 30 days[1] prior to admission, 93.7% (N = 1,081,197) had no arrests, 5.4% (N = 62,193) had one arrest, and 0.9% (N = 10,261) had two or more arrests.

Figure 4.A.4   **Percentages of Admissions to Substance Use Treatment Services by Detailed Criminal Justice Referral in 2022**

Percentages (%)

Among admissions to substance use treatment services in 2022 by detailed criminal justice referral,[1] 38.9% (N = 82,765) were referred through probation or parole, 16.0% (N = 34,066) were referred through state or federal court, 11.2% (N = 23,785) were referred through DUI/DWI, 10.0% (N = 21,192) were referred through other recognized legal entities[1], 9.5% (N = 20,196) were referred through formal adjudication processes, 7.7% (N = 16,465) were through other criminal justice referrals, 4.2% (N = 8,966) were referred through diversionary programs, and 2.4% (N = 5,161) were referred through prison. Please note that TEDS does not collect data on detailed criminal justice referral at discharge.

Figure 4.A.5   Percentages of Admissions to Substance Use Treatment Services by Attendance at Self-Help Groups in Past 30 Days in 2022

Percentages (%)

- None in the Past Month
- 1-3 Times in the Past Month
- 4-7 Times in the Past Month
- 8-30 Times in the Past Month
- Some Attendance in the Past Month (Freq. Unknown)

Among admissions to substance use treatment services in 2022 by attendance at self-help groups in the past 30 days,[1] 78.4% (N = 858,013) reported no attendance at self-help groups, 5.2% (N = 57,202) reported attending self-help groups 1-3 times, 3.5% (N = 37,991) reported attending self-help groups 4-7 times, 8.6% (N = 94,575) reported attending self-help groups 8-30 times, and 4.2% (N = 46,055) reported some attendance in the past month, however the frequency was unknown.

4.B   National Outcome Measures (NOMs) Among Discharges from Substance Use Treatment Services, 2022
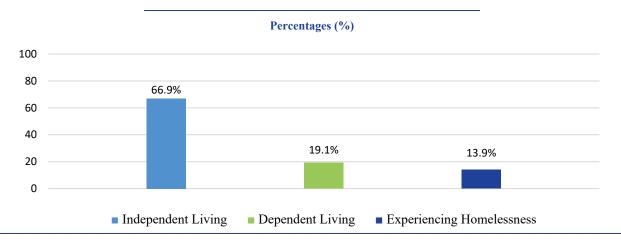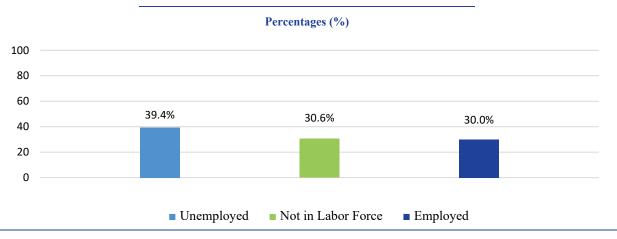
Figure 4.B.1   Percentages of Discharges from Substance Use Treatment Services by Living Arrangements in 2022

Percentages (%)

■ Independent Living   ■ Dependent Living   ■ Experiencing Homelessness

Among discharges from substance use treatment services in 2022 by living arrangements,[1] 66.9% (N = 704,104) were living independently, 19.1% (N = 201,101) were in dependent living, and 13.9% (N = 146,531) were experiencing homelessness.

Figure 4.B.2   Percentages of Discharges from Substance Use Treatment Services by Employment Status Among Ages 16 and Over in 2022

Percentages (%)

■ Unemployed   ■ Not in Labor Force   ■ Employed

Among discharges from substance use treatment services in ages 16 and over in 2022 by employment status,[1] 39.4% (N = 446,649) were unemployed, 30.6% (N = 346,866) were not in the labor force, and 30.0% (N = 340,219) were employed.[4]
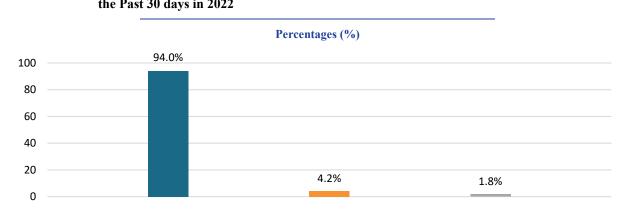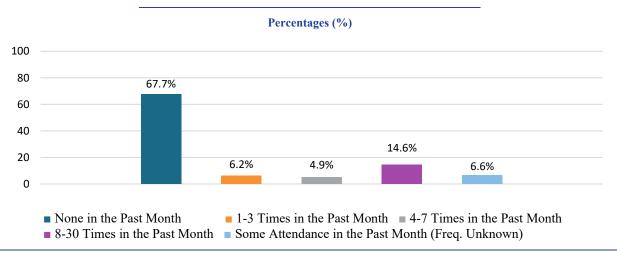
Figure 4.B.3   Percentages of Discharges from Substance Use Treatment Services by Number of Arrests in the Past 30 days in 2022

Percentages (%)

Legend: ■ None ■ Once ■ Two or More

Among discharges from substance use treatment services in 2022 by number of arrests in the past 30 days[1] prior to discharge, 94.0% (N = 1,058,108) had no arrests, 4.2% (N = 47,141) had one arrest, and 1.8% (N = 19,835) had two or more arrests.

Figure 4.B.4   Percentages of Discharges from Substance Use Treatment Services by Attendance at Self-Help Groups in Past 30 Days in 2022

Percentages (%)

Legend: ■ None in the Past Month ■ 1-3 Times in the Past Month ■ 4-7 Times in the Past Month ■ 8-30 Times in the Past Month ■ Some Attendance in the Past Month (Freq. Unknown)

Among discharges from substance use treatment services in 2022 by attendance at self-help groups in the past 30 days,[1] 67.7% (N = 750,411) reported no attendance, 6.2% (N = 68,557) reported attending support groups 1-3 times, 4.9% (N = 54,329) reported attending support groups 4-7 times, 14.6% (N = 161,707) reported attending support groups 8-30 times, and 6.6% (N = 72,941) reported some attendance in the past month, however the frequency was unknown.
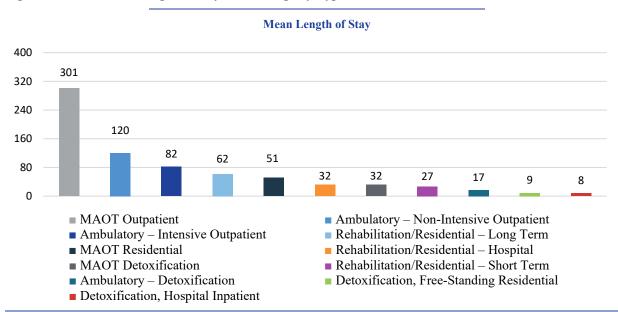
Figure 4.B.5   Mean Length of Stay at Discharge by Type of Treatment Service Received in 2022

Mean Length of Stay

The mean length of stay at discharge[1] for MAOT outpatient services were 301 days, followed by ambulatory – non-intensive outpatient services (mean = 120 days), ambulatory – intensive outpatient services (mean = 82 days), long term rehabilitation/residential services (mean = 62 days), MAOT residential (mean = 51 days), hospital rehabilitation/residential services (mean = 32 days), MAOT detoxification services (mean = 32 days), short term rehabilitation/residential services (mean = 27 days), ambulatory – detoxification services (mean = 17 days), free-standing residential detoxification services (mean = 9 days), and hospital inpatient detoxification services (mean = 8 days).
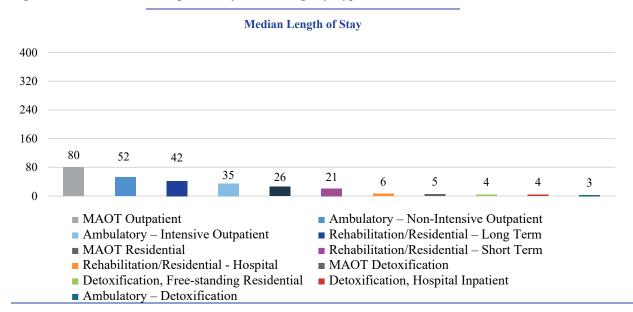
Figure 4.B.6   Median Length of Stay at Discharge by Type of Treatment Service Received in 2022

Median Length of Stay

The median length of stay at discharge[1] for MAOT outpatient services were 80 days, followed by ambulatory – non-intensive outpatient services (median = 52 days), ambulatory – intensive outpatient services (median = 42 days), long term residential/rehabilitation services (median = 35 days), MAOT residential (median = 26 days), short term rehabilitation/residential services (median = 21 days), hospital rehabilitation/residential services (median = 6 days), MAOT detoxification services (median = 5 days), free-standing residential detoxification services (median = 4 days), hospital inpatient detoxification services (median = 4 days), and ambulatory – detoxification services (median = 3 days). For 25th and 75th percentile length of stay for each type of treatment service presented above, please refer to Appendix E.

Section 5. Morbidity Status Among Substance Use Treatment Admissions and Discharges

This section presents the morbidity status among admissions and discharges in 2022. Morbidity status compares past month abstinence and active use of alcohol or drugs at admission and discharge. Abstinence is a NOM and was defined as no alcohol or drug use in the past month, and active use of alcohol or drugs was defined as one of the following frequencies of use: 1-3 days in the past month, 1-2 days in the past week, 3-6 days in the past week, or daily use. Admissions or discharges with missing values for past month substance use or frequency of use were considered missing and therefore excluded from analysis. Wherever feasible, the data are visualized as percentages and rates per 100,000 population and narratives describing key findings from the graphs include individual counts for reference. For detailed data on counts, percentages, and rates corresponding to this section, including missing value counts and percentages, please refer to Appendix F.
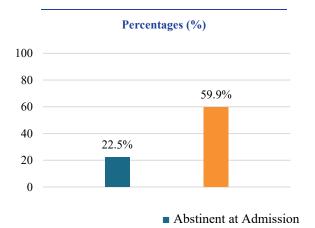
Key Takeaways – Admissions

- Among admissions, 22.5% (N = 336,621) were abstinent and 59.9% (N = 896,660) reported substance use. The rates per 100,000 population[2,3] by morbidity status[1] were 122 for those who were abstinent and 324 for those who reported substance use.

Key Takeaways – Discharges
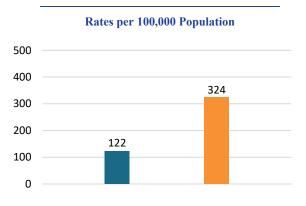
- Among discharges, 29.1% (N = 406,278) were abstinent and 48.8% (N = 680,670) reported substance use. The rates per 100,000 population[2,3] by morbidity status[1] were 143 for those who were abstinent and 239 for those who reported substance use.

5.A   Morbidity Status Among Admissions to Substance Use Treatment Services, 2022

Figure 5.A.1   Percentages and Rates of Morbidity Status of Admissions to Substance Use Treatment Services in 2022

Among admissions to substance use treatment services, 22.5% (N = 336,621) were abstinent and 59.9% (N = 896,660) reported substance use.

Among admissions to substance use treatment services, the rates per 100,000 population[2,3] were 122 for those who were abstinent and 324 for those who reported substance use.

5.B   Morbidity Status Among Discharges from Substance Use Treatment Services, 2022
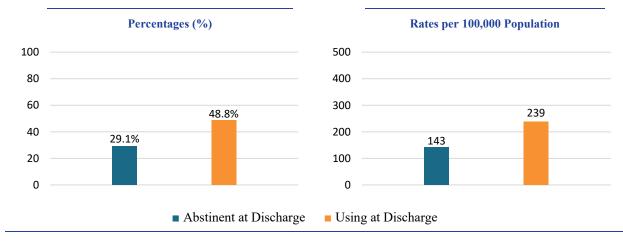
Figure 5.B.1   Percentages and Rates of Morbidity Status of Discharges from Substance Use Treatment Services in 2022

Among discharges from substance use treatment services, 29.1% (N = 406,278) were abstinent and 48.8% (N = 680,670) reported substance use.

Among discharges from substance use treatment services, the rates per 100,000 population[2,3] were 143 for those who were abstinent and 239 for those who reported substance use.

Section 6. Characteristics and Top 6 Primary Substances of Substance Use Treatment Admissions and Discharges in 2018-2022

This section presents the characteristics and the top six primary substances among admissions to and discharges from substance use treatment services through SSAs in 2018-2022. These characteristics include age, sex, race, ethnicity, and the top six primary substances used for all admissions and discharges during their respective reporting year. The data in this section were calculated after excluding the missing values (i.e., values that were missing, unknown, or not collected/applicable). The data are visualized as percentages and the narratives describing the key finding from the graphs include individual counts for reference. For definitions of key characteristics, please refer to Appendix A. For detailed data on counts, percentages, please refer to Appendix G.

Key Takeaways – Admissions

- Among admissions in 2018, the top two age categories[1] were 21-34 years old (42.5%, N = 864,703) and 35-44 years old (23.4%, N = 475,565). Among admissions in 2022, the top two age categories[1] were 21-34 years old (37.1%, N = 555,972) and 35-44 years old (28.3%, N = 423,281).
- Among admissions in 2018, 64.2% (N = 1,303,680) were male and 35.8% (N = 727,882) were female. Among admissions in 2022, 65.4% (N = 978,232) were male and 34.6% (N = 518,656) were female.
- Among admissions in 2018, the top two race[1] groups were White (67.0%, N = 1,310,194) and Black or African American (19.9%, N = 388,376). Among admissions in 2022, the top two race groups[1] were White (65.0%, N = 905,596) and Black or African American (20.0%, N = 279,151).
- Among admissions in 2018, 14.2% (N = 275,942) were of Hispanic or Latino origin and 85.8% (N = 1,672,136) were Not of Hispanic or Latino origin. Among admissions in 2022, 15.2% (N = 206,583) were of Hispanic or Latino and 84.8% (N = 1,152,438) were Not of Hispanic or Latino.
- Among admissions in 2018, the top two primary substances used[1] were alcohol (30.9%, N = 607,017) and heroin (26.5%, N = 521,917). Among admissions in 2022, the top two primary substances[1] used were alcohol (35.5%, N = 440,540) and heroin (16.9%, N = 209,466).

Key Takeaways – Discharges

- Among discharges in 2018, the top two age categories[1] were 21-34 years old (43.2%, N = 758,877) and 35-44 years old (23.7%, N = 415,477). Among discharges in 2022, the top two age categories were 21-34 years old (37.7%, N = 525,733) and 35-44 years old (28.5%, N = 397,966).
- Among discharges in 2018, 64.1% (N = 1,125,193) were male and 35.9% (N = 629,502) were female. Among discharges in 2022, 64.7% (N = 900,816) were male and 35.3% (N = 492,407) were female.
- Among discharges in 2018, the top two race[1] groups were White (68.3%, N = 1,160,282) and Black or African American (18.2%, N = 309,464). Among discharges in 2022, the top two race[1] groups were White (67.6%, N = 895,954) and Black or African American (18.1%, N = 239,585).
- Among discharges in 2018, 13.5% (N = 229,185) were of Hispanic or Latino origin and 86.5% (N = 1,463,770) were Not of Hispanic or Latino origin. Among discharges in 2022, 14.0% (N = 186,354) were of Hispanic or Latino and 86.0% (N = 1,140,552) were Not of Hispanic or Latino.
- Among discharges in 2018, the top two primary substances used[3] were alcohol (31.1%, N = 528,373) and heroin (24.7%, N = 419,495). Among discharges in 2022, the top two primary substances used were alcohol (34.5%, N = 423,110) and heroin (18.3%, N = 223,858).

6.A   Characteristics and Top 6 Primary Substances Among Admissions to Substance Use Treatment Services, 2018-2022
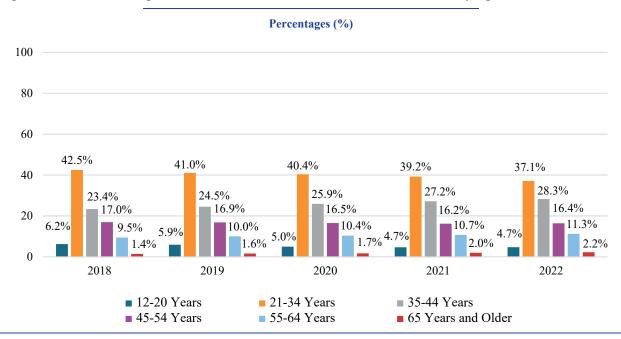
Figure 6.A.1   Percentage of Admissions to Substance Use Treatment Services by Age, 2018-2022

Percentages (%)

■ 12-20 Years   ■ 21-34 Years   ■ 35-44 Years
■ 45-54 Years   ■ 55-64 Years   ■ 65 Years and Older

Among admissions to substance use treatment services in 2018 by age,[1] 6.2% (N = 126,965) were 12-20 years old, 42.5% (N = 864,703) were 21-34 years old, 23.4% (N = 475,565) were 35-44 years old, 17.0% (N = 345,160) were 45-54 years old, 9.5% (N = 192,627) were 55-64 years old, and 1.4% (N = 29,281) were 65 years and older. Among admissions to substance use treatment services in 2022 by age,[1] 4.7% (N = 70,692) were 12-20 years old, 37.1% (N = 555,972) were 21-34 years old, 28.3% (N = 423,281) were 35-44 years old, 16.4% (N = 245,979) were 45-54 years old, 11.3% (N = 168,588) were 55-64 years old, and 2.2% (N = 33,522) were 65 years and older.
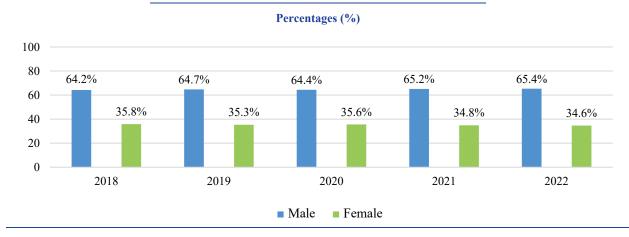
Figure 6.A.2   Percentage of Admissions to Substance Use Treatment Services by Sex, 2018-2022

Percentages (%)

■ Male   ■ Female

Among all admissions to substance use treatment services in 2018, 64.2% (N = 1,303,680) were male and 35.8% (N = 727,882) were female. Among all clients receiving substance use treatment services in 2022, 65.4% (N = 978,232) were male and 34.6% (N = 518,656) were female.
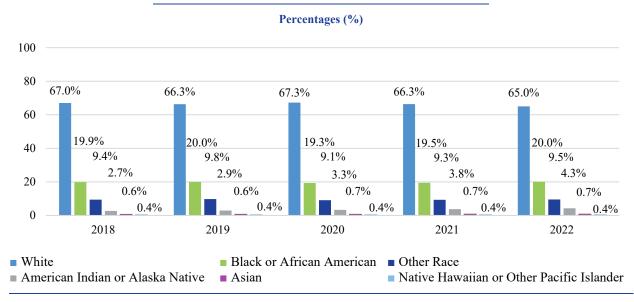
Figure 6.A.3   Percentage of Admissions to Substance Use Treatment Services by Race, 2018-2022

Percentages (%)

- White
- Black or African American
- Other Race
- American Indian or Alaska Native
- Asian
- Native Hawaiian or Other Pacific Islander

Among all admissions to substance use treatment services in 2018 by race[1], 67.0% (N = 1,310,194) were White, 19.9% (N = 388,376) were Black or African American, 9.4% (N = 184,460) were Other race, 2.7% (N = 53,210) were American Indian or Alaska Native, 0.6% (N = 12,028) were Asian, and 0.4% (N = 7,120) were Native Hawaiian or Other Pacific Islander. Among all admissions to substance use treatment services in 2022 by race[1], 65.0% (N = 905,596) were White, 20.0% (N = 279,151) were Black or African American, 9.5% (N = 132,551) were Other race, 4.3% (N = 59,548) were American Indian or Alaska Native, 0.7% (N = 10,437) were Asian, and 0.4% (N = 5,252) were Native Hawaiian or Other Pacific Islander.
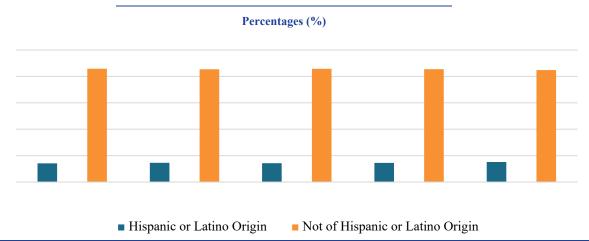
Figure 6.A.4   Percentage of Admissions to Substance Use Treatment Services by Ethnicity, 2018-2022

Percentages (%)

- Hispanic or Latino Origin
- Not of Hispanic or Latino Origin

Among all admissions to substance use treatment services in 2018 by ethnicity, 14.2% (N = 275,942) were of Hispanic or Latino and 85.8% (N = 1,672,136) were Not of Hispanic or Latino. Among all admissions to substance use treatment services in 2022 by ethnicity, 15.2% (N = 206,583) were of Hispanic or Latino and 84.8% (N = 1,152,438) were Not of Hispanic or Latino.
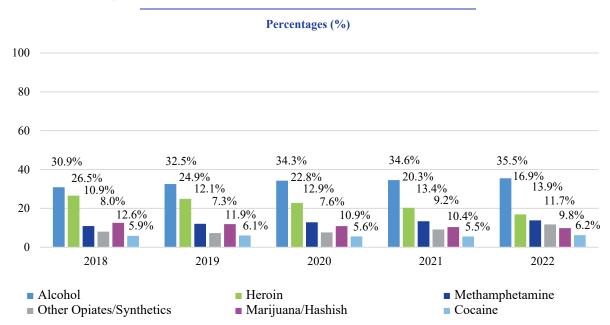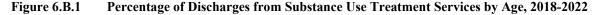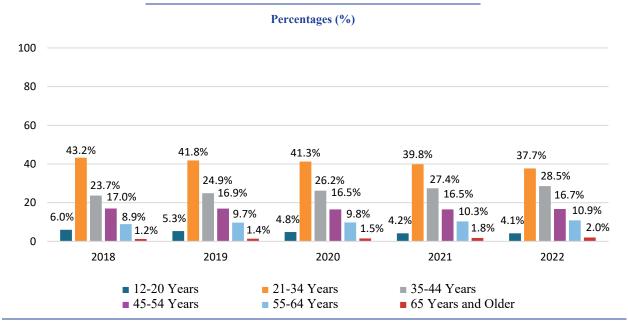
Figure 6.A.5   Percentage of Admissions to Substance Use Treatment Services by Top 6 Primary Substance Use, 2018–2022

Percentages (%)

	2018	2019	2020	2021	2022
Alcohol	30.9%	32.5%	34.3%	34.6%	35.5%
Heroin	26.5%	24.9%	22.8%	20.3%	16.9%
Methamphetamine	10.9%	12.1%	12.9%	13.4%	13.9%
Other Opiates/Synthetics	8.0%	7.3%	7.6%	9.2%	11.7%
Marijuana/Hashish	12.6%	11.9%	10.9%	10.4%	9.8%
Cocaine	5.9%	6.1%	5.6%	5.5%	6.2%

■ Alcohol   ■ Heroin   ■ Methamphetamine
■ Other Opiates/Synthetics   ■ Marijuana/Hashish   ■ Cocaine

Among all admissions to substance use treatment services in 2018 by top 6 primary substances,[1] 30.9% (N = 607,017) were for alcohol use, 26.5% (N = 521,917) were for heroin use, 10.9% (N = 214,393) were for methamphetamine use, 8.0% (N = 157,664) were for other opiates/synthetics use, 12.6% (N = 247,067) were for marijuana/hashish use, and 5.9% (N = 115,152) were for cocaine use. Among all admissions to substance use treatment services in 2022 by top 6 primary substances,[1] 35.5% (N = 440,540) were for alcohol use, 16.9% (N = 209,466) were for heroin use, 13.9% (N = 171,882) were for methamphetamine use, 11.7% (N = 145,714) were for other opiates/synthetics use, 9.8% (N = 122,049) were for marijuana/hashish use, and 6.2% (N = 77,034) were for cocaine use.

6.B   Characteristics and Top 6 Primary Substances Among Discharges from Substance Use Treatment Services, 2018-2022

Figure 6.B.1   Percentage of Discharges from Substance Use Treatment Services by Age, 2018-2022

Percentages (%)

Legend: 12-20 Years | 21-34 Years | 35-44 Years | 45-54 Years | 55-64 Years | 65 Years and Older

Among all discharges from substance use treatment services in 2018 by age,[1] 6.0% (N = 105,121) were 12-20 years old, 43.2% (N = 758,877) were 21-34 years old, 23.7% (N = 415,477) were 35-44 years old, 17.0% (N = 298,168) were 45-54 years old, 8.9% (N = 156,206) were 55-64 years old, and 1.2% (N = 21,538) were 65 years and older. Among all discharges from substance use treatment services in 2022 by age,[1] 4.1% (N = 57,787) were 12-20 years old, 37.7% (N = 525,733) were 21-34 years old, 28.5% (N = 397,966) were 35-44 years old, 16.7% (N = 233,234) were 45-54 years old, 10.9% (N = 151,472) were 55-64 years old, and 2.0% (N = 27,946) were 65 years and older.
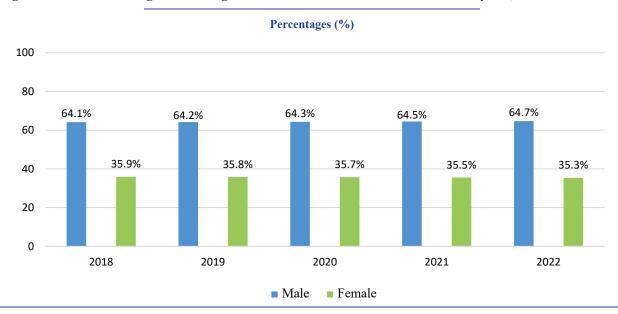
Figure 6.B.2   Percentage of Discharges from Substance Use Treatment Services by Sex, 2018-2022

Percentages (%)

Legend: Male | Female

Among all discharges from substance use treatment services in 2018, 64.1% (N = 1,125,193) were male and 35.9% (N = 629,502) were female. Among all discharges from substance use treatment services in 2022, 64.7% (N = 900,816) were male and 35.3% (N = 492,407) were female.
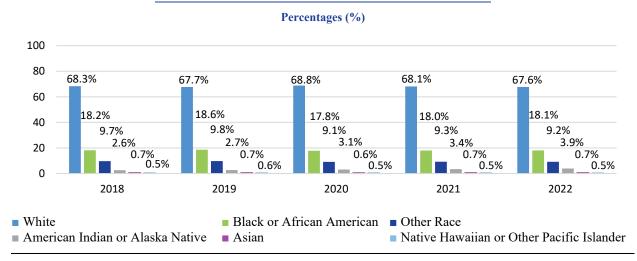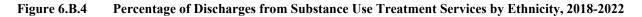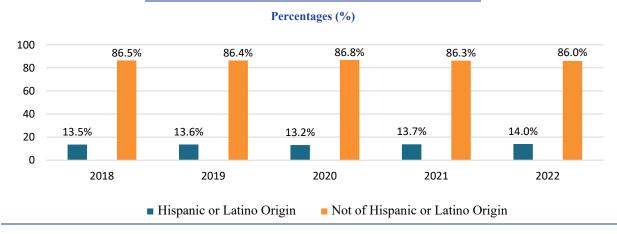
Figure 6.B.3   Percentage of Discharges from Substance Use Treatment Services by Race, 2018-2022

Percentages (%)

- White
- Black or African American
- Other Race
- American Indian or Alaska Native
- Asian
- Native Hawaiian or Other Pacific Islander

Among all discharges from substance use treatment services in 2018 by race[1], 68.3% (N = 1,160,282) were White, 18.2% (N = 309,464) were Black or African American, 9.7% (N = 164,555) were Other race, 2.6% (N = 44,721) were American Indian or Alaska Native, 0.7% (N = 11,133) were Asian, and 0.5% (N = 9,207) were Native Hawaiian or Other Pacific Islander. Among all discharges from substance use treatment services in 2022 by race[1], 67.6% (N = 895,954) were White, 18.1% (N = 239,585) were Black or African American, 9.2% (N = 121,229) were Other race, 3.9% (N = 51,929) were American Indian or Alaska Native, 0.7% (N = 9,081) were Asian, and 0.5% (N = 6,664) were Native Hawaiian or Other Pacific Islander.

Figure 6.B.4   Percentage of Discharges from Substance Use Treatment Services by Ethnicity, 2018-2022

Percentages (%)

- Hispanic or Latino Origin
- Not of Hispanic or Latino Origin

Among discharges from substance use treatment services in 2018 by ethnicity, 13.5% (N = 229,185) were of Hispanic or Latino and 86.5% (N = 1,463,770) were Not of Hispanic or Latino. Among all discharges from substance use treatment services in 2022 by ethnicity, 14.0% (N = 186,354) were of Hispanic or Latino and 86.0% (N = 1,140,552) were Not of Hispanic or Latino.
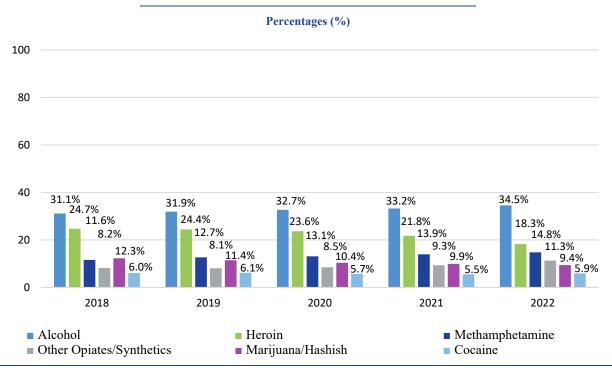
Figure 6.B.5   Percentage of Discharges from Substance Use Treatment Services by Top 6 Primary Substance Use, 2018-2022

Percentages (%)

■ Alcohol   ■ Heroin   ■ Methamphetamine
■ Other Opiates/Synthetics   ■ Marijuana/Hashish   ■ Cocaine

Among all discharges from substance use treatment services in 2018 by the top 6 primary substances used,[1] 31.1% (N = 528,373) were for alcohol use, 24.7% (N = 419,495) were for heroin use, 11.6% (N = 196,352) were for methamphetamine use, 8.2% (N = 138,390) were for other opiates/synthetics use, 12.3% (N = 208,130) were for marijuana/hashish use, and 6.0% (N = 102,551) were for cocaine use. Among all discharges from substance use treatment services in 2022 by the top 6 primary substances used,[1] 34.5% (N = 423,110) were for alcohol use, 18.3% (N = 223,858) were for heroin use, 14.8% (N = 180,946) were for methamphetamine use, 11.3% (N = 138,746) were for other opiates/synthetics use, 9.4% (N = 114,840) were for marijuana/hashish use, and 5.9% (N = 72,517) were for cocaine use.

Section 7. Geographic Distribution of Substance Use Treatment Admissions and Discharges by State

This section presents a geographical distribution of data on all admissions to and discharges from substance use treatment facilities and the top six primary substances used among admissions and discharges. The top six primary substances include: alcohol, heroin, methamphetamine, marijuana/hashish, other opiates/synthetics, and cocaine. This section is divided into the following sub-sections:

- 7.A – Maps of counts and rates per 100,000 population of all admissions to and discharges from substance use treatment facilities.
- 7.B – Maps of counts and rates per 100,000 population of the top six primary substances used among admissions to substance use treatment facilities.
- 7.C – Maps of counts and rates per 100,000 population of the top six primary substances used among discharges from substance use treatment facilities.

A full description of how a primary substance is collected, types of substances, and definitions can be found in Appendix A. The maps presented in sections 7.A, 7.B, and 7.C present data by two class intervals that were selected manually by sorting states from high to low on counts and rates, and selecting a cut-off value that corresponds to the 10th highest count and rate, respectively. The counts and rates were rounded for readability. In other words, sections 7.A, 7.B, and 7.C highlight the top 10 states by their descending counts and rates. For data tables corresponding to figures and maps presented in this section, please refer to Appendix H. To meet map projection and scale accuracies, the counts and rates for Puerto Rico are displayed in a separate table at the bottom of the maps.
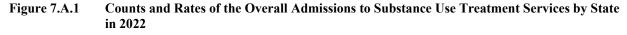
Key Takeaways – Admissions
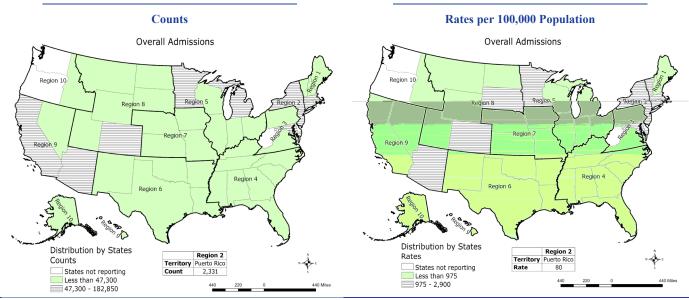
- Ten states (New York, Arizona, Maryland, California, New Jersey, Colorado, Michigan, Minnesota, Massachusetts, and Connecticut) accounted for 66.0% (N = 988,749) of admissions to substance use treatment services.
- Eleven states (Arizona, Maryland, South Dakota, Connecticut, Colorado, Minnesota, New York, New Jersey, Vermont, Massachusetts, and Rhode Island) had the highest rates per 100,000 population[2,3] (between 975 – 2,900) of admissions to substance use treatment services. Both Massachusetts and Rhode Island had a rate of 975 per 100,000.

Key Takeaways – Discharges

- Ten states (New York, Arizona, North Carolina, California, New Jersey, Michigan, Kentucky, Colorado, Minnesota, and Massachusetts) accounted for 66.5% (N = 926,710) of discharges from substance use treatment services.
- Ten states (Arizona, South Dakota, Kentucky, Connecticut, North Carolina, Colorado, Minnesota, Vermont, New York, and New Jersey) had the highest rates per 100,000 population[2,3] (between 990 – 2,750) of discharges from substance use treatment services.

7.A   Overall Substance Use Treatment Admissions and Discharges by State, 2022

Figure 7.A.1   Counts and Rates of the Overall Admissions to Substance Use Treatment Services by State in 2022

Counts

Rates per 100,000 Population

In 2022, 10 states (New York, Arizona, Maryland, California, New Jersey, Colorado, Michigan, Minnesota, Massachusetts, and Connecticut) accounted for 66.0% (N = 988,749) of admissions to substance use treatment services.

In 2022, 11 states (Arizona, Maryland, South Dakota, Connecticut, Colorado, Minnesota, New York, New Jersey, Vermont, Massachusetts, and Rhode Island) had the highest rates per 100,000 population[2,3] (between 975 – 2,900) of admissions to substance use treatment services. Both Massachusetts and Rhode Island had a rate of 975 per 100,000.
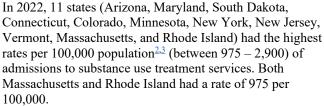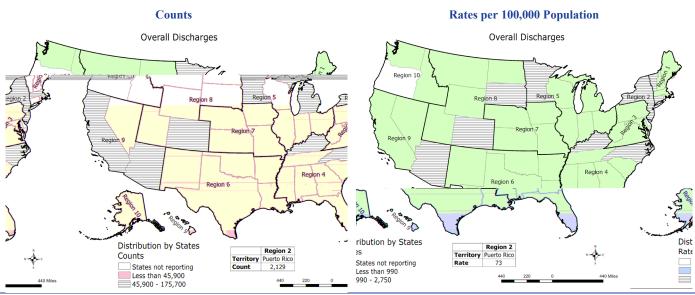
Figure 7.A.2   Counts and Rates of the Overall Discharges from Substance Use Treatment Services by State in 2022
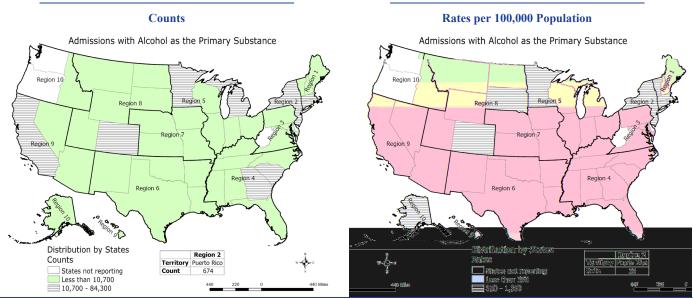
Counts

Rates per 100,000 Population

In 2022, 10 states (New York, Arizona, North Carolina, California, New Jersey, Michigan, Kentucky, Colorado, Minnesota, and Massachusetts) accounted for 66.5% (N = 926,710) of discharges from substance use treatment services.

In 2022, 10 states (Arizona, South Dakota, Kentucky, Connecticut, North Carolina, Colorado, Minnesota, Vermont, New York, and New Jersey) had the highest rates per 100,000 population[2,3] (between 990 – 2,750) of discharges from substance use treatment services.

7.B   Substance Use Treatment Admissions by Top 6 Primary Substances, 2022
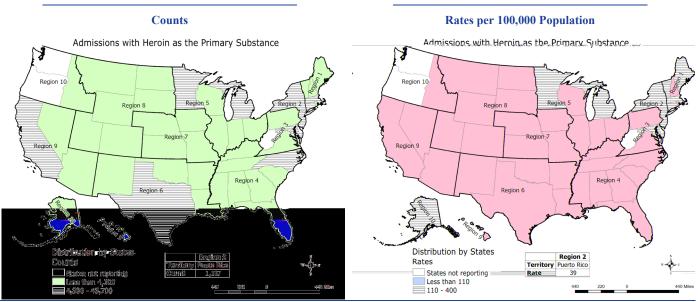
Figure 7.B.1   Counts and Rates of Alcohol Admissions to Substance Use Treatment Services by State in 2022

Counts

Rates per 100,000 Population

In 2022, 10 states (New York, Colorado, New Jersey, California, Michigan, Minnesota, Massachusetts, Connecticut, Georgia, and South Carolina) accounted for 66.7% (N = 293,640) of admissions to substance use treatment services where alcohol was listed as the primary substance.
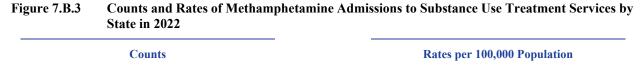
In 2022, 10 states (South Dakota, Colorado, Minnesota, Connecticut, New York, Rhode Island, New Jersey, Vermont, Alaska, and Massachusetts) had the highest rates per 100,000 population[2,3] (between 350 – 1,350) of admissions to substance use treatment services where alcohol was listed as the primary substance.
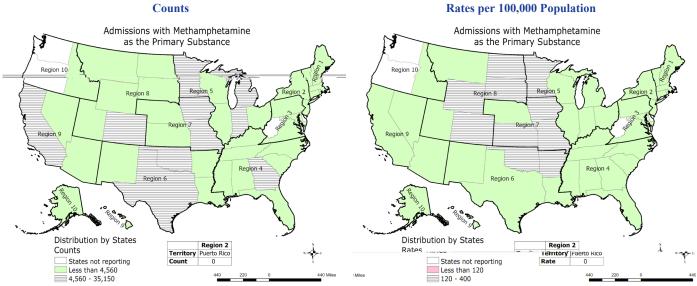
Figure 7.B.2   Counts and Rates of Heroin Admissions to Substance Use Treatment Services by State in 2022

Counts

Rates per 100,000 Population

In 2022, 10 states (New York, New Jersey, Massachusetts, California, Michigan, Maryland, Connecticut, Minnesota, Texas, and North Carolina) accounted for 76.0% (N = 159,124) of admissions to substance use treatment services where heroin was listed as the primary substance.
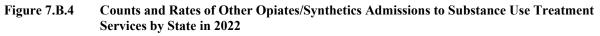
In 2022, 10 states (New Jersey, Connecticut, Massachusetts, Maine, New York, Vermont, Maryland, Michigan, Alaska, and Minnesota) had the highest rates per 100,000 population[2,3] (between 110 – 400) of admissions to substance use treatment services where heroin was listed as the primary substance.

Figure 7.B.3   Counts and Rates of Methamphetamine Admissions to Substance Use Treatment Services by State in 2022

Counts

Admissions with Methamphetamine
as the Primary Substance

Distribution by States
Counts
☐ States not reporting
☐ Less than 4,560
▨ 4,560 - 35,150

	Region 2
Territory	Puerto Rico
Count	0

Rates per 100,000 Population

Admissions with Methamphetamine
as the Primary Substance

Distribution by States
Rates
☐ States not reporting
☐ Less than 120
▨ 120 - 400

	Region 2
Territory	Puerto Rico
Rate	0

In 2022, 10 states (California, Minnesota, Colorado, Missouri, Michigan, Iowa, Texas, Georgia, Indiana, and Oklahoma) accounted for 62.0% (N = 106,623) of admissions to substance use treatment services where methamphetamine was listed as the primary substance.

In 2022, 10 states (South Dakota, Minnesota, Wyoming, Colorado, Iowa, Missouri, Kansas, Arkansas, Oklahoma, and North Dakota) had the highest rates per 100,000 population[2,3] (between 120 – 400) of admissions to substance use treatment services where methamphetamine was listed as the primary substance.

Figure 7.B.4   Counts and Rates of Other Opiates/Synthetics Admissions to Substance Use Treatment Services by State in 2022

Counts

Admissions with Other Opiates/Synthetics
as the Primary Substance

Distribution by States
Counts
☐ States not reporting
☐ Less than 5,675
▨ 5,675 - 19,250

	Region 2
Territory	Puerto Rico
Count	173

Rates per 100,000 Population

Admissions with Other Opiates/Synthetics
as the Primary Substance

Distribution by States
Rates
☐ States not reporting
☐ Less than 75
▨ 75 - 350

	Region 2
Territory	Puerto Rico
Rate	6

In 2022, 10 states (California, Maryland, New York, Massachusetts, Colorado, Minnesota, Missouri, New Jersey, Florida, and North Carolina) accounted for 67.3% (N = 98,110) of admissions to substance use treatment services where other opiates/synthetics was listed as the primary substance.

In 2022, 10 states (Rhode Island, Maryland, Massachusetts, Connecticut, Colorado, Minnesota, Missouri, Vermont, New Jersey, and New Mexico) had the highest rates per 100,000 population[2,3] (between 75 – 350) of admissions to substance use treatment services where other opiates/synthetics was listed as the primary substance.
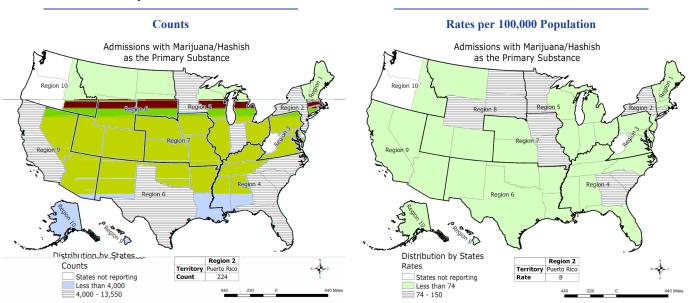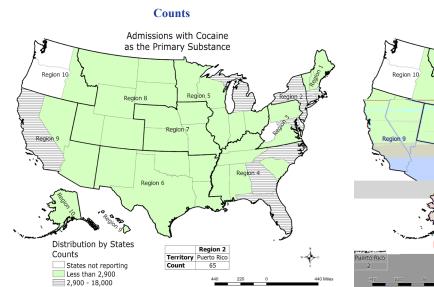
Figure 7.B.5   Counts and Rates of Marijuana/Hashish Admissions to Substance Use Treatment Services by State in 2022

Counts

Admissions with Marijuana/Hashish as the Primary Substance

Distribution by States
Counts
- States not reporting
- Less than 4,000
- 4,000 - 13,550

	Region 2
Territory	Puerto Rico
Count	224
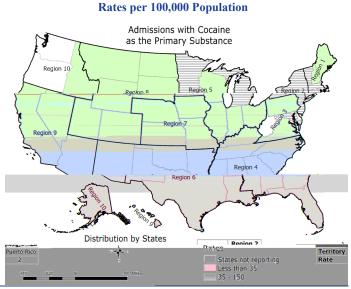
In 2022, 10 states (New York, California, Georgia, North Carolina, Florida, South Carolina, Texas, New Jersey, Minnesota, and Indiana) accounted for 56.9% (N = 69,460) of admissions to substance use treatment services where marijuana/hashish was listed as the primary substance.

Rates per 100,000 Population

Admissions with Marijuana/Hashish as the Primary Substance

Distribution by States
Rates
- States not reporting
- Less than 74
- 74 - 150

	Region 2
Territory	Puerto Rico
Rate	8

In 2022, 10 states (South Dakota, South Carolina, Iowa, Connecticut, Minnesota, North Dakota, Georgia, Wyoming, New York, and Missouri) had the highest rates per 100,000 population[2,3] (between 74 – 150) of admissions to substance use treatment services where marijuana/hashish was listed as the primary substance.

Figure 7.B.6   Counts and Rates of Cocaine Admissions to Substance Use Treatment Services by State in 2022

Counts

Admissions with Cocaine as the Primary Substance

Distribution by States
Counts
- States not reporting
- Less than 2,900
- 2,900 - 18,000

	Region 2
Territory	Puerto Rico
Count	65
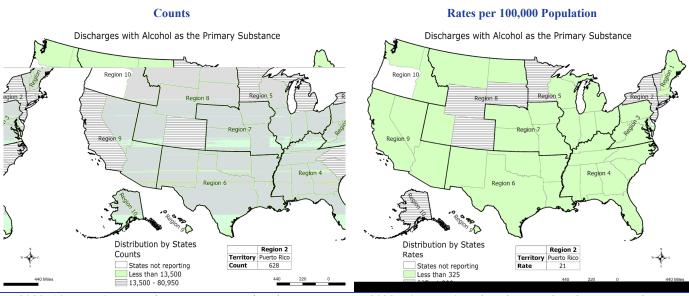
In 2022, 10 states (New York, Michigan, New Jersey, Massachusetts, Maryland, Florida, Connecticut, Georgia, North Carolina, and California) accounted for 69.6% (N = 53,649) of admissions to substance use treatment services where cocaine use was listed as the primary substance.

Rates per 100,000 Population

Admissions with Cocaine as the Primary Substance

Distribution by States
Rates
- States not reporting
- Less than 35
- 35 - 150

	Region 2	Territory
Puerto Rico		Rate

In 2022, 9 states and 1 jurisdiction (Vermont, New York, Connecticut, Massachusetts, Michigan, District of Columbia, Maryland, Rhode Island, New Jersey, and Minnesota) had the highest rates per 100,000 population[2,3] (between 35 – 150) of admissions to substance use treatment services where cocaine was listed as the primary substance.
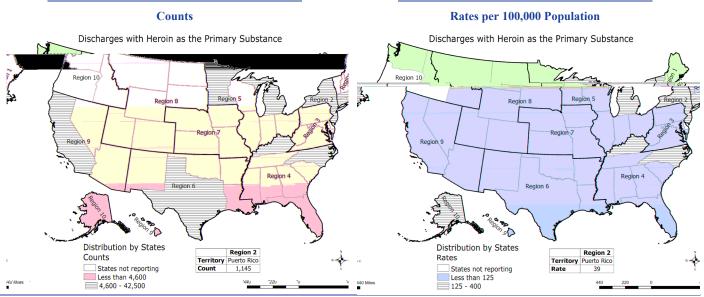
7.C   Substance Use Treatment Discharges by Top 6 Primary Substances, 2022

Figure 7.C.1   Counts and Rates of Alcohol Discharges from Substance Use Treatment Services by State in 2022

Counts

Discharges with Alcohol as the Primary Substance

Distribution by States
Counts

☐ States not reporting
☐ Less than 13,500
▦ 13,500 - 80,950

	Region 2
Territory	Puerto Rico
Count	628

Rates per 100,000 Population

Discharges with Alcohol as the Primary Substance

Distribution by States
Rates

☐ States not reporting
☐ Less than 325

	Region 2
Territory	Puerto Rico
Rate	21

In 2022, 10 states (New York, New Jersey, Colorado, California, Michigan, North Carolina, Minnesota, Massachusetts, Connecticut, and South Carolina) accounted for 67.4% (N = 285,110) of discharges from substance use treatment services where alcohol was listed as the primary substance.

In 2022, 10 states (South Dakota, Colorado, New York, Connecticut, Minnesota, Alaska, Rhode Island, Vermont, New Jersey, and Wyoming) had the highest rates per 100,000 population[2,3] (between 325 – 1,200) of discharges from substance use treatment services where alcohol was listed as the primary substance.
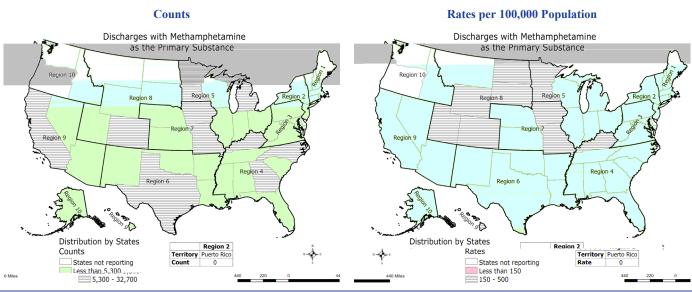
Figure 7.C.2   Counts and Rates of Heroin Discharges from Substance Use Treatment Services by State in 2022

Counts

Discharges with Heroin as the Primary Substance

Distribution by States
Counts

☐ States not reporting
☐ Less than 4,600
▦ 4,600 - 42,500

	Region 2
Territory	Puerto Rico
Count	1,145

Rates per 100,000 Population

Discharges with Heroin as the Primary Substance

Distribution by States
Rates

☐ States not reporting
☐ Less than 125
▦ 125 - 400

	Region 2
Territory	Puerto Rico
Rate	39
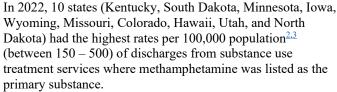
In 2022, 10 states (New York, North Carolina, New Jersey, California, Massachusetts, Michigan, Connecticut, Kentucky, Texas, and Minnesota) accounted for 79.0% (N = 176,879) of discharges from substance use treatment services where heroin was listed as the primary substance.
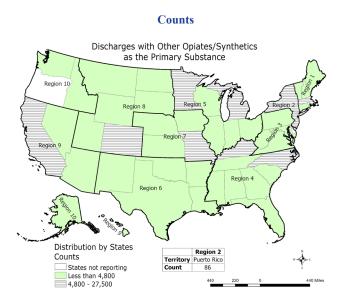
In 2022, 10 states (New Jersey, North Carolina, Connecticut, Vermont, New York, Massachusetts, Kentucky, Michigan, Alaska, and Rhode Island) had the highest rates per 100,000 population[2,3] (between 125 – 400) of discharges from substance use treatment services where heroin was listed as the primary substance.

Figure 7.C.3   Counts and Rates of Methamphetamine Discharges from Substance Use Treatment Services by State in 2022

Counts

Discharges with Methamphetamine as the Primary Substance

Distribution by States
Counts
- States not reporting
- Less than 5,300
- 5,300 - 32,700

	Region 2
Territory	Puerto Rico
Count	0

Rates per 100,000 Population

Discharges with Methamphetamine as the Primary Substance

Distribution by States
Rates
- States not reporting
- Less than 150
- 150 - 500

	Region 2
Territory	Puerto Rico
Rate	0

In 2022, 10 states (California, Kentucky, Minnesota, Missouri, Colorado, North Carolina, Iowa, Michigan, Texas, and Georgia) accounted for 66.2% (N = 119,874) of discharges from substance use treatment services where methamphetamine use was listed as the primary substance.

In 2022, 10 states (Kentucky, South Dakota, Minnesota, Iowa, Wyoming, Missouri, Colorado, Hawaii, Utah, and North Dakota) had the highest rates per 100,000 population[2,3] (between 150 – 500) of discharges from substance use treatment services where methamphetamine was listed as the primary substance.
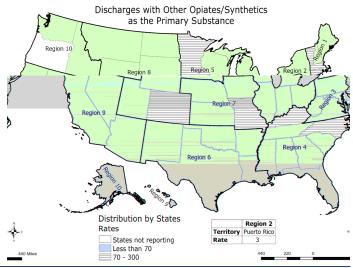
Counts and Rates of Other Opiates/Synthetics Discharges from Substance Use Treatment Services by State in 2022

Counts

Discharges with Other Opiates/Synthetics as the Primary Substance

Distribution by States
Counts
- States not reporting
- Less than 4,800
- 4,800 - 27,500

	Region 2
Territory	Puerto Rico
Count	86

Rates per 100,000 Population

Discharges with Other Opiates/Synthetics as the Primary Substance

Distribution by States
Rates
- States not reporting
- Less than 70
- 70 - 300

	Region 2
Territory	Puerto Rico
Rate	3

In 2022, 10 states (North Carolina, California, New York, Massachusetts, Kentucky, Missouri, Colorado, New Jersey, Minnesota, and Michigan) accounted for 70.5% (N = 97,863) of discharges from substance use treatment services where other opiates/synthetics was listed as the primary substance.

In 2022, 10 states (North Carolina, Rhode Island, Kentucky, Connecticut, Missouri, Massachusetts, Colorado, Vermont, Minnesota, and New Jersey) had the highest rates per 100,000 population[2,3] (between 70 – 300) of discharges from substance use treatment services where other opiates/synthetics was listed as the primary substance.
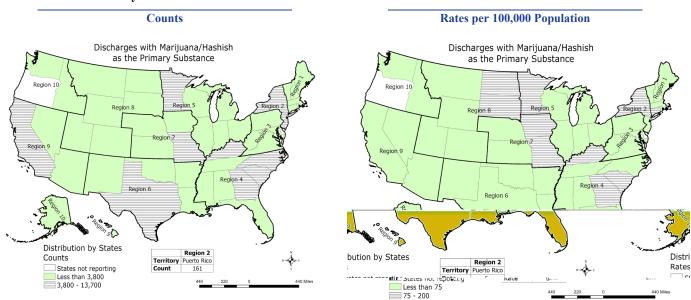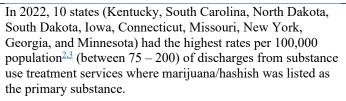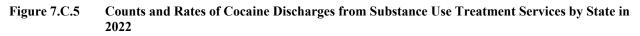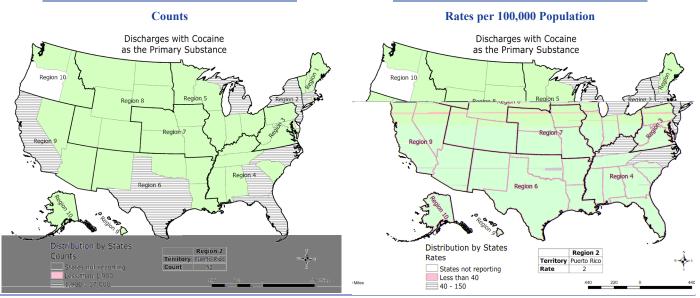
Figure 7.C.4   Counts and Rates of Marijuana/Hashish Discharges from Substance Use Treatment Services by State in 2022

Counts

Discharges with Marijuana/Hashish
as the Primary Substance

	Region 2
Territory	Puerto Rico
Count	161

Distribution by States
Counts
☐ States not reporting
☐ Less than 3,800
☐ 3,800 - 13,700

Rates per 100,000 Population

Discharges with Marijuana/Hashish
as the Primary Substance

	Region 2
Territory	Puerto Rico

Less than 75
75 - 200

In 2022, 10 states (New York, California, Kentucky, Georgia, South Carolina, North Carolina, Texas, New Jersey, Missouri, and Minnesota) accounted for 61.7% (N = 70,836) of discharges from substance use treatment services where marijuana/hashish was listed as the primary substance.

In 2022, 10 states (Kentucky, South Carolina, North Dakota, South Dakota, Iowa, Connecticut, Missouri, New York, Georgia, and Minnesota) had the highest rates per 100,000 population[2,3] (between 75 – 200) of discharges from substance use treatment services where marijuana/hashish was listed as the primary substance.

Figure 7.C.5   Counts and Rates of Cocaine Discharges from Substance Use Treatment Services by State in 2022

Counts

Discharges with Cocaine
as the Primary Substance

Distribution by States
Counts
☐ States not reporting
☐ Less than 1,900
☐ 1,900 - 17,000

	Region 2
Territory	Puerto Rico
Count	52

Rates per 100,000 Population

Discharges with Cocaine
as the Primary Substance

Distribution by States
Rates
☐ States not reporting
☐ Less than 40
☐ 40 - 150

	Region 2
Territory	Puerto Rico
Rate	2

In 2022, 10 states (New York, North Carolina, Michigan, New Jersey, Massachusetts, Georgia, Connecticut, California, Texas, and Florida) accounted for 73.7% (N = 53,458) of discharges from substance use treatment services where cocaine was listed as the primary substance.

In 2022, 9 states and 1 jurisdiction (Vermont, New York, North Carolina, Connecticut, District of Columbia, Michigan, Rhode Island, Massachusetts, New Jersey, and Kentucky) had the highest rates per 100,000 population[2,3] (between 40 – 150) of discharges from substance use treatment services where cocaine was listed as the primary substance.
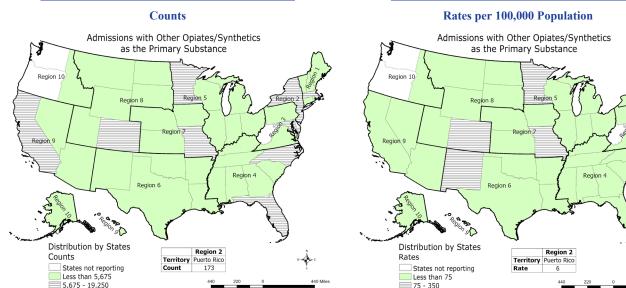
Section 8. Limitations

TEDS data are subject to change as states continually review the quality of their data and may revise the files in case of data quality issues and/or errors. While this process improves the data set over time, reported historical TEDS statistics may change slightly from year to year.

TEDS provides information on specific types of treatment service derived from linked pairs of admissions or discharge records. However, this may not represent complete treatment episodes which may consist of stays in multiple types of services. Identifying complete treatment episodes would require analysis of the series of linked pairs of records.

Most SSAs report a single continuous treatment episode that involves transfer to a different type of service (i.e., from outpatient to residential) as one admission. However, some SSAs do not track transfers, and may report them as new admissions. In such instances, the number of admissions may overestimate the number of treatment episodes.

TEDS allows up to three substances to be listed on the admission record: primary, secondary, and tertiary. These represent the substances that led to the treatment episode. However, it does not necessarily account for all drugs used at the time of admission.

Caution must be used when comparing data over time. The number of states submitting data and/or state exclusions vary between each reporting year. Thus, apparent increases, changes, or other variations across reporting years may be more of a function of state reporting changes than actual changes in data over time.

The scope of facilities included in TEDS is affected by differences in state licensure, certification, and accreditation practices, and disbursement of public funds. Most SSAs require facilities that receive state/public funding (including federal block grant funds) for providing alcohol and/or drug treatment services to report data to the SSA. Some SSAs regulate private facilities, opioid treatment programs, and/or individual practitioners and require them to report TEDS data. Because of differences in individual state data systems, data collection, and methodology, caution should be exercised when comparing state estimates. Additional information outlining individual state data system reporting characteristics is included in Appendix C of this report, and additional information for facilities included in the state data collection system is included in Appendix J of this report.

Section 9. Endnotes

1. For definitions of specific data categories, characteristics and substance types included in TEDS, please see Appendix A.

2. U.S. Census Bureau, Population Division. Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2022 (SC-EST2022-ALLDATA6).

    Annual Estimates of the Resident Population by Single Year of Age and Sex for Puerto Rico Commonwealth: April 1, 2020 to July 1, 2022 (PRC-EST2022-SYASEX).

    Education tables: U.S. Census Bureau, Current Population Survey, 2022 Annual Social and Economic Supplement (CPS ASEC). TEDS data (numerator) excludes Puerto Rico counts to align with denominator. Numerator is restricted to TEDS discharges 18 years and over to align with denominator (U.S. population 18 years and over).

    Employment tables: U.S. Bureau of Labor Statistics, States and selected areas: Employment status of the civilian noninstitutional population, January 1976 to date, not seasonally adjusted. Numerator is restricted to TEDS admissions/discharges 16 years and over to align with denominator (U.S. population 16 years and over). State exclusions have been applied to make denominator comparable to TEDS.

    U.S. Census Bureau, 2022 American Community Survey 1-Year Estimates. Puerto Rico Race and Hispanic or Latino Origin.

3. For more information on the detailed analysis, TEDS public use files are available for download from the Substance Abuse and Mental Health Data Archive, which can be accessed at https://datafiles.samhsa.gov. A summary of data for individual states that have submitted a full year of data are available online through the Quick Statistics webpage at https://www.samhsa.gov/data/quick-statistics.

4. Admissions and discharges younger than 16 years are excluded from the tabulation to align TEDS counts (numerator) with the universe for labor force data (denominator).

Appendix A.   Definitions

Admission – Defined as the formal acceptance of a client into substance use treatment. An admission has occurred if, and only if, the client begins substance use treatment. Events that take place before the client begins the substance use treatment (e.g., initial screening, referral, wait-listing, etc.) are not considered admissions.

Age – The client's age at the time of admission. Age is computed using the client's date of service and their date of birth. The age categories in this report include: 12-20 years, 21-34 years, 35-44 years, 45-54 years, 55-64 years, and 65 years and older. These age categories are aligned with SAMHSA's Treatment Improvement Protocol (TIP) 26, which provides a wide range of guidance in the latest evidence-based screening and assessment approaches, interventions, and services for substance misuse, including substance use disorders (SUDs), in older adults. For more information on TIP 26, please visit https://store.samhsa.gov/sites/default/files/tip-26-pep20-02-01-011.pdf .

Arrest History – Indicates the number of arrests in the 30 days prior to the reference date (the date of admission or date of discharge). The counts represent the number of times the client was arrested (not the number of charges) for any cause during the reference period. Any formal arrest is counted, regardless of whether incarceration or conviction resulted.

Attendance at Substance Use Self-Help Groups – Indicates the frequency of attendance at a substance use self-help group in the 30 days prior to the reference date (the date of admission or date of discharge). It includes attendance at Alcoholics Anonymous (AA), Narcotics Anonymous (NA), and other self-help/mutual support groups focused on recovery from substance use and dependence.

Codependent – A person who has no alcohol or drug use issues, but satisfies all the following conditions:

- Is seeking services because of problems arising from his or her relationship with an alcohol or drug user,
- Has been formally admitted for service to a treatment unit, and
  Has his or her own client record or has a record within a primary client record.

Detailed Criminal Justice Referral – Specifies the jurisdiction or program for substance use clients referred under the criminal justice system. Other recognized legal entities may include local law enforcement agencies, corrections agencies, youth services, review boards/agencies. This information is only collected at admission.

Discharge – Marks the end of a client's treatment episode. Includes completion of planned substance use treatment for the current episode, transfers, and terminations of services.

Education – The number of years of education or the highest school grade completed for clients 18 years and older. This information is only collected at admission.

Employment Status – Describes the employment status for clients 16 years and older. This information is collected both at admission and discharge to assess change.

Hispanic or Latino Origin – Specifies the client's ethnic origin using the single category per Office of Management and Budget (OMB) standards: Hispanic or Latino.

Length of Stay in Treatment – The duration of a client's treatment (in days). Length of stay is computed using the date of admission and the date of last contact.

Living Arrangement – Describes the client's housing situation, whether they are experiencing homelessness, living with parents or in a supervised setting, or living independently. This information is collected both at admission and discharge to assess change.

- **Dependent living** – Clients living in a supervised setting such as a residential institution, halfway house, or group home, and children (under age 18) living with parents, relatives, or guardians or in foster care (substance use clients only).
- **Experiencing Homelessness** – Clients with no fixed address, including homeless shelters.
- **Independent living** – Clients living alone or with others in a private residence and capable of self-care. Includes adult children (age 18 and over) living with parents and adolescents living independently. Also, includes clients who live independently with case management or housing support.

Morbidity Status – Compares abstinence and active use of alcohol or drugs at admission and discharge to assess change. Abstinence means no substance, alcohol, or drug use was reported in the past month prior to the reference date (the date of admission or date of discharge). If there is a missing value in the primary substance use field and the frequency of use field, the tabulation for morbidity is considered missing because the record does not meet the criteria for calculating morbidity and therefore coded as missing.

Primary, Secondary, and Tertiary Substance – Lists the substance(s) that led to client's admission by order of use. TEDS allows up to three substances to be listed on the admission record: primary, secondary, and tertiary. If a client is admitted for more than one substance use, the substances used are reported in order of use. While primary, secondary, and tertiary substances represent substances that led to the treatment episode, they do not necessarily account for all drugs used at the time of admission. TEDS collects primary, secondary, and tertiary use data for the following substances along with the route of administration, frequency of use, age at first use, and detailed drug code:

- Alcohol
- Barbiturates – Amobarbital, pentobarbital, phenobarbital, secobarbital, etc.
- Benzodiazepines – Includes alprazolam, chlordiazepoxide, clonazepam, clorazepate, diazepam, flunitrazepam, flurazepam, halazepam, lorazepam, oxazepam, prazepam, temazepam, triazolam, and other unspecified benzodiazepines
- Cocaine
- Heroin
- Inhalants – Includes chloroform, ether, gasoline, glue, nitrous oxide, paint thinner, etc.
- Marijuana/Hashish – Includes THC and any other cannabis sativa preparations
- Methamphetamine
- Non-Prescription Methadone
- Other Amphetamines – Includes amphetamines, MDMA, phenmetrazine, and other unspecified amines and related drugs
- Other Hallucinogens – Includes LSD, DMT, STP, hallucinogens, mescaline, peyote, psilocybin, etc.
- Other Non-Barbiturate Sedatives or Hypnotics – Includes chloral hydrate, ethchlorvynol, glutethimide, methaqualone, and other non-barbiturate sedatives or hypnotics
- Other Non-Benzodiazepine Tranquilizers – Includes meprobamate and other non-benzodiazepine tranquilizers
- Other Opiates and Synthetics – Includes buprenorphine, codeine, fentanyl; hydrocodone, hydromorphone, meperidine, morphine, opium, oxycodone, pentazocine, propoxyphene, tramadol, and any other drug with morphine-like effects. This includes prescription opiates and synthetics which have been misused.
- Other Stimulants – Includes methylphenidate and any other stimulants
- Over-the-counter medications – Includes aspirin, cough syrup, diphenhydramine and other antihistamines, sleep aids, and any other legally obtained nonprescription medication
- Phencyclidine (PCP)
- Other – Includes diphenylhydantoin/phenytoin, GHB/GBL, ketamine, etc.
- None

Race – Specifies the client's race using the five minimum categories per OMB standards: White, Black or African American, American Indian or Alaska Native, Asian, and Native Hawaiian or Other Pacific Islander. The race group 'Other Race' refers to the racial classifications 'Other Single Race' and 'Two or More Races' when reported by states. For some states, "Asian" includes "Pacific Islanders" and are therefore included in the Asian race category.

Reason for Discharge – Indicates the outcome of the treatment episode or the reason for transfer or discontinuance of treatment. The reason for discharge category "other" includes clients who were discharged because they moved, became ill, were hospitalized, or experienced other changes in life circumstances.

Referral Source – Specifies the person or agency referring a client to substance use treatment.

Sex – Specifies the client's self-reported biological sex at the time of admission, using only binary response options (male or female).

Single State Agency – The Single State Agency (SSA) is the lead agency in each state or jurisdiction responsible for managing federal funds dedicated to addressing substance use prevention, treatment, and recovery.

Transfer – A change in substance use treatment provider or type of treatment service.

Treatment Episode – The cycle from the beginning of a treatment service for a drug or alcohol use (admission) through to the termination of services for the prescribed treatment plan (discharge).

Type of Treatment Service – Describes the type of treatment service or treatment setting in which the client is placed at the time of admission or prior to discharge. Includes outpatient services for treating opioid use disorder.

Table B-1.   Discharges from Substance Use Treatment Services in 2022 by Year of Admission

Admission Year	Number of Discharges	Percent of Discharges
2005	46	0.0
2006	104	0.0
2007	104	0.0
2008	144	0.0
2009	154	0.0
2010	203	0.0
2011	251	0.0
2012	317	0.0
2013	420	0.0
2014	772	0.1
2015	1,026	0.1
2016	2,018	0.1
2017	3,032	0.2
2018	5,908	0.4
2019	12,072	0.9
2020	28,552	2.1
2021	230,952	16.6
2022	1,108,063	79.5
Total	1,394,138	100.0

Table C-1.   State Data System Reporting Characteristics in 2022

State or jurisdiction	Facilities reporting TEDS data to the SSA		Eligible clients	Change of service within episode	Change of provider within episode
	Facilities required to report to the SSA[1]	Facilities reporting voluntarily to the SSA			
Alabama	Facilities that receive state/public funding	None	All clients in facility	Admission	Transfer
Alaska	Facilities that receive state/public funding, excluding: - Mental Health Physician Clinics - Residential Psychiatric Treatment Facilities - Clients only served under Autism Regulations - State psychiatric facility - Independent LCSW/LPC/LMFT - Behavioral Health Associates working under Indian Health Services billing regulation package	None	All behavioral health treatment clients in publicly funded facilities excluding facility types listed in B5; some facilities also provide social supports that are outside the realm of treatment and do not necessarily fall in a standard treatment setting but are necessary social supports for the clients	Admission and Discharge (for most providers) Transfer (for some providers)	Admission
Arizona	Facilities that receive state/public funding	None	State/public-funded clients only	n/a[2]	n/a[2]
Arkansas	Facilities that are licensed by state SSA	Some private facilities	All clients in a licensed facility	n/a[3]	Admission
California	Facilities that receive state/public funding. All licensed narcotic treatment facilities.	None	All clients in facility except DUI	Admission	Admission
Colorado	State-licensed facilities Methadone facilities Community-based juvenile and adult justice treatment programs, except institutionally based	None	All clients receiving substance use treatment services in facility	Admission	Admission
Connecticut	Facilities that receive state/public funding Facilities serving adults that are licensed by state Dept of Public Health Some facilities treating youth (less than 18 years old) General hospitals funded by SSA	None	State/public-funded clients only	Admission	Admission
Delaware	Facilities that receive state/public funding, excluding: - Child/youth services - Most Medicaid-funded services - Most criminal justice system services	None	State/public-funded clients only	Admission	Admission
District of Columbia	Facilities that receive state/public funding	None	State/public-funded clients only	n/a[2]	n/a[2]
Florida	Facilities that receive state/public funding	None	State/public-funded clients only	Transfer	Admission

	Facilities reporting TEDS data to the SSA			Change of service within episode	Change of provider within episode
State or jurisdiction	Facilities required to report to the SSA[1]	Facilities reporting voluntarily to the SSA	Eligible clients		
Georgia	Facilities that receive SAPT/BG, state and Medicaid funding through the state SSA. This includes Medicaid eligible aged, blind, and disabled adults and youth. Medicaid individuals in managed care plans are excluded.	None	SSA funded clients with substance use or co-occurring mental and substance use disorders	n/a[3]	Admission
Hawaii	Facilities that receive state/public funding	None	All clients in facility	Transfer	Admission
Idaho	Facilities that receive state/public funding	None	State/public-funded clients only	Transfer	Admission
Illinois	Facilities that receive funding through the state SSA (this includes Medicaid paid sub-acute addiction treatment services)	None	State/public-funded clients only	Transfer	Admission
Indiana	Facilities that receive state/public funding	None	State/public-funded clients only	Admission	Admission
Iowa	Facilities that receive state/public funding Facilities that are licensed/certified by state SSA	None	All clients in facility receiving substance use disorder treatment	Transfer (as of 7/1/2021)	Admission
Kansas	Facilities that receive state/public funding Medicaid-certified facilities Department of Corrections 4th-time DUI facilities	None	All clients in facility	Admission	Admission
Kentucky	Facilities that receive state/public funding	None	All clients in facility	Transfer	Admission
Louisiana	Facilities that receive SAPT/MH Block Grant funding	None	All clients in facility	Admission	Admission
Maine	Facilities that receive state/federal/public funding Facilities licensed by the state	Some private substance use providers report	All clients in facility	Admission	Admission
Maryland	Facilities that receive federal/state/public funding	None	All clients receiving federal/state funding	Admission	Admission
Massachusetts	Facilities that are licensed/certified and/or hold a contract with the state SSA	Houses of corrections, some department of correction facilities, and some private opioid treatment programs that do not have a contract with the state	All clients in facility	Admission	Admission
Michigan	State licensed facilities that receive state/public funding including, but not limited Medicaid providers of behavioral health services	None	Clients whose services are supported by state/public funds through the Dept. of Health and Human Services, including Medicaid	n/a[3]	Admission
Minnesota	Facilities receive state/public funding and Facilities Licensed by SSA	None	All clients in facility	Admission	Admission

| State or jurisdiction | Facilities reporting TEDS data to the SSA | | Eligible clients | Change of service within episode | Change of provider within episode |
	Facilities required to report to the SSA[1]	Facilities reporting voluntarily to the SSA			
Mississippi	Facilities that receive state/public funding Facilities certified by Mental Health Department	None	All clients in facility	n/a[3]	Admission
Missouri	Facilities that receive state/public funding	None	State/public-funded clients only	Transfer	Admission
Montana	Facilities that receive state/public funding and are State Approved	None	State/public-funded clients only	Transfer	Admission
Nebraska	Facilities that receive SSA-administered state/public funding	None	State/public-funded clients only	Admission	Admission
Nevada	Facilities that receive state/public funding	None	All clients in facility	Transfer	Transfer
New Hampshire	Facilities that receive state/public funding, methadone maintenance facilities	None	State/public-funded clients only	Transfer	Admission
New Jersey	Facilities that receive state/public funding Facilities that are licensed by the DOH Office of Certificate of Need and Licensing (CNL) Facilities in state intoxicated driver program certified by the SSA	Some private facilities and solo practitioners	All clients in facility	Admission	Admission
New Mexico	Facilities that receive SSA substance use funding	None	SSA funded clients with substance use or co-occurring mental and substance use disorders	Transfer	Transfer
New York	Facilities that receive state/public funding Facilities that are licensed/certified by state SSA	None	All clients in facility	Admission	Admission
North Carolina	Facilities that receive state/public funding	None	All clients in facility	Transfer	n/a[2]
North Dakota	Facilities that receive state/public funding	None	All clients in facility	n/a[3]	Admission
Ohio	Facilities that receive state/public funding	None	State/public-funded clients only	Transfer	Admission
Oklahoma	Facilities that receive state/public funding	None	State/public-funded clients only	Transfer	Admission
Oregon	Facilities licensed/certified by the state that receive state/public funding. All DUII and methadone treatment facilities.	None	All clients in DUII and methadone facilities State/public-funded clients for all other facilities	Admission	Admission
Pennsylvania	All facilities that treat single county authority-funded clients (SCAs). SCAs serve uninsured and under insured individuals. SCAs receive funding from federal, state and local sources, including monies from DDAP and other state agencies.	Some, but not all, county prisons, hospitals, and private providers and solo practitioners	TEDS reporting is required for all SCA-funded clients. Facilities may report on other drug and alcohol clients, including those funded by Medicaid, on a voluntary basis.	Transfer	Admission

State or jurisdiction	Facilities reporting TEDS data to the SSA		Eligible clients	Change of service within episode	Change of provider within episode
	Facilities required to report to the SSA[1]	Facilities reporting voluntarily to the SSA			
Puerto Rico	State facilities that receive SAPT/MHBG. Certified opioid treatment programs (Methadone facilities) Facilities that receive state/public funding. State/correctional DUI/DWI providers.	None	State/public and federal funded clients only served in State facilities.	Admission	Admission
Rhode Island	Facilities that are licensed/certified by state SSA	None	All clients in facility	Admission	Admission
South Carolina	Facilities that receive state/public funding	None	All clients in facility	Transfer	Admission
South Dakota	Facilities that receive state/public funding	None	All clients in facility	Transfer	Admission
Tennessee	Facilities that receive state/public funding	None	State/public-funded clients only	Transfer	Admission
Texas	Facilities that receive state/public funding	None	State/public-funded clients only	Admission	Admission
Utah	Facilities that receive state/public funding	None	State/public-funded clients only are required; data on all clients are requested and received from some facilities	Admission	Transfer
Vermont	Facilities that receive state/public funding	None	All clients in facility	Transfer	Admission
Virginia	Facilities that receive state/public funding	None	All clients in facility	n/a[3]	Admission
Washington	Facilities that receive state/public funding	None	State/public-funded clients only	Transfer	Transfer
West Virginia	Facilities that receive state/public funding	None	All clients in facility	Transfer	Admission
Wisconsin	Facilities that receive state/public funding	None	State/county/public-funded clients are required; data on other county-authorized clients such as clients having private payers are requested and received from some facilities	Admission	Admission
Wyoming	Facilities that receive state/public funding	None	All clients in a facility	Admission	Admission

n/a = Not applicable.
n/a[1]   State/public funding generally refers to funding by the Single State Agency but may also include funding by another public agency.
n/a[2]   Neither an admission nor transfer record resulted from a change in service or provider.
n/a[3]   Neither an admission nor transfer record resulted from a change in service within a provider.
SOURCE: Single State Agencies, December 2023.

Table D-1. Characteristics of Admissions to Substance Use Treatment Services in 2022

Admissions*	Counts	Percent of All Records	Percent Without Missing Records	Rates per 100,000**
Year				
2022	1,498,034	100.0	100.0	541
Age Group				
12-20 Years	70,692	4.7	4.7	188
21-34 Years	555,972	37.1	37.1	904
35-44 Years	423,281	28.3	28.3	1,007
45-54 Years	245,979	16.4	16.4	630
55-64 Years	168,588	11.3	11.3	414
65 Years and Older	33,522	2.2	2.2	60
Total	1,498,034	100.0	100.0	541
Sex				
Male	978,232	65.3	65.4	717
Female	518,656	34.6	34.6	370
Unknown	1,055	0.1	--	--
Not Collected	86	0.0	--	--
Invalid Data	5	0.0	--	--
Total	1,498,034	100.0	100.0	541
Race				
White	905,596	60.5	65.0	433
Black or African American	279,151	18.6	20.0	743
Other Race	132,551	8.8	9.5	1,538
American Indian or Alaska Native	59,548	4.0	4.3	1,766
Asian	10,437	0.7	0.7	61
Native Hawaiian or Other Pacific Islander	5,252	0.4	0.4	821
Unknown	104,991	7.0	--	--
Not Collected	314	0.0	--	--
Not Reported	194	0.0	--	--
Total	1,498,034	100.0	100.0	541
Ethnicity				
Hispanic or Latino Origin	206,583	13.8	15.2	390
Not of Hispanic or Latino Origin	1,152,438	76.9	84.8	515
Unknown	138,327	9.2	--	--
Not Collected	348	0.0	--	--
Not Reported	338	0.0	--	--
Total	1,498,034	100.0	100.0	541
Treatment Referral Source				
Self or Individual	588,004	39.3	48.4	212
Criminal Justice/DUI	301,082	20.1	24.8	109
Substance Use Care Provider	116,550	7.8	9.6	42
Other Community	112,853	7.5	9.3	41
Other Health Care Provider	81,721	5.5	6.7	30
Employer/EAP	7,432	0.5	0.6	3
School (educational)	7,381	0.5	0.6	3
Unknown	280,436	18.7	--	--
Not Collected	2,507	0.2	--	--
Not Reported	36	0.0	--	--
Invalid Data	32	0.0	--	--
Total	1,498,034	100.0	100.0	541

*For definitions of specific data categories, characteristics and substance types included in TEDS, please see Appendix A.
**For more information on rates per 100,000 calculations, please see Appendix J.

Table D-2. **Characteristics of Admissions to Substance Use Treatment Services in 2022 (continued)**

Admissions*	Counts	Percent of All Records	Percent Without Missing Records	Rates per 100,000**
Type of Treatment Service				
Ambulatory— Non-Intensive Outpatient	621,573	41.5	41.5	225
Detoxification, Free-Standing Residential	199,621	13.3	13.3	72
Ambulatory—Intensive Outpatient	168,464	11.2	11.2	61
MAOT Outpatient	145,859	9.7	9.7	53
Rehabilitation/Residential—Short Term	145,615	9.7	9.7	53
Rehabilitation/Residential—Long Term	104,349	7.0	7.0	38
MAOT Residential	31,928	2.1	2.1	12
Detoxification, Hospital Inpatient	31,810	2.1	2.1	11
MAOT Detoxification	29,209	1.9	1.9	11
Rehabilitation/Residential—Hospital	10,727	0.7	0.7	4
Ambulatory—Detoxification	8,879	0.6	0.6	3
Total	1,498,034	100.0	100.0	541
Primary Substance Use				
Alcohol	440,540	29.4	35.5	159
Heroin	209,466	14.0	16.9	76
Methamphetamine	171,882	11.5	13.9	62
Other Opiates/Synthetics	145,714	9.7	11.7	53
Marijuana/Hashish	122,049	8.1	9.8	44
Cocaine	77,034	5.1	6.2	28
Benzodiazepines	11,877	0.8	1.0	4
Other Amphetamines	9,865	0.7	0.8	4
Phencyclidine (PCP)	3,131	0.2	0.3	1
Other Stimulants	2,543	0.2	0.2	1
Substance Use Not in the Top 10	46,911	3.1	3.8	17
Unknown	255,645	17.1	--	--
Not Collected	1,344	0.1	--	--
Not Reported	33	0.0	--	--
Total	1,498,034	100.0	100.0	541
Years of education completed (18 and over)*				
0 to 8 Years	57,493	4.1	5.0	693
9 to 11 Years	205,593	14.7	18.0	1,278
12 Years or GED	576,954	41.4	50.4	774
13 to 15 Years	229,826	16.5	20.1	341
16 Years or BA, BS	55,839	4.0	4.9	99
17 Years or More	19,598	1.4	1.7	60
Not Collected	174,078	12.5	--	--
Unknown	38,029	2.7	--	--
Invalid Data	5,594	0.4	--	--
Not Reported	568	0.0	--	--
Not Applicable***	30,566	2.2	--	--
Total	1,394,138	100.0	100.0	489

*For definitions of specific data categories, characteristics and substance types included in TEDS, please see Appendix A.
**For more information on rates per 100,000 calculations, please see Appendix J.
***Discharges younger than 18 years and all discharges from Puerto Rico are excluded from the tabulation to align TEDS counts (numerator) with the universe for educational attainment data (denominator).

Table D-3.   Characteristics of Discharges from Substance Use Treatment Services in 2022

Discharges*	Counts	Percent of All Records	Percent Without Missing Records	Rates per 100,000**
Year				
2022	1,394,138	100.0	100.0	489
Age Group				
12-20 Years	57,787	4.1	4.1	150
21-34 Years	525,733	37.7	37.7	829
35-44 Years	397,966	28.5	28.5	918
45-54 Years	233,234	16.7	16.7	580
55-64 Years	151,472	10.9	10.9	362
65 Years and Older	27,946	2.0	2.0	49
Total	1,394,138	100.0	100.0	489
Sex				
Male	900,816	64.6	64.7	641
Female	492,407	35.3	35.3	341
Unknown	844	0.1	--	--
Not Collected	67	0.0	--	--
Invalid Data	4	0.0	--	--
Total	1,394,138	100.0	100.0	489
Race				
White	895,954	64.3	67.6	415
Black or African American	239,585	17.2	18.1	631
Other Race	121,229	8.7	9.2	1,357
American Indian or Alaska Native	51,929	3.7	3.9	1,486
Asian	9,081	0.7	0.7	51
Native Hawaiian or Other Pacific Islander	6,664	0.5	0.5	960
Unknown	68,145	4.9	--	--
Not Collected	807	0.1	--	--
Not Reported	744	0.1	--	--
Total	1,394,138	100.0	100.0	489
Ethnicity				
Hispanic or Latino Origin	186,354	13.4	14.0	346
Not of Hispanic or Latino Origin	1,140,552	81.8	86.0	493
Unknown	65,974	4.7	--	--
Not Reported	1,007	0.1	--	--
Not Collected	251	0.0	--	--
Total	1,394,138	100.0	100.0	489

*For definitions of specific data categories, characteristics and substance types included in TEDS, please see Appendix A.
**For more information on rates per 100,000 calculations, please see Appendix J.

Table D-4. **Characteristics of Discharges from Substance Use Treatment Services in 2022 (continued)**

Discharges*	Counts	Percent of All Records	Percent Without Missing Records	Rates per 100,000**
Type of Treatment Service				
Ambulatory— Non-Intensive Outpatient	586,066	42.0	42.0	206
Detoxification, Free-Standing Residential	172,215	12.4	12.4	60
Ambulatory—Intensive Outpatient	160,959	11.5	11.5	56
MAOT Outpatient	159,026	11.4	11.4	56
Rehabilitation/Residential—Short Term	135,099	9.7	9.7	47
Rehabilitation/Residential—Long Term	97,887	7.0	7.0	34
MAOT Residential	30,768	2.2	2.2	11
Detoxification, Hospital Inpatient	28,165	2.0	2.0	10
MAOT Detoxification	13,791	1.0	1.0	5
Ambulatory—Detoxification	7,640	0.5	0.5	3
Rehabilitation/Residential—Hospital	2,522	0.2	0.2	1
Total	1,394,138	100.0	100.0	489
Primary Substance Use				
Alcohol	423,110	30.3	34.5	148
Heroin	223,858	16.1	18.3	79
Methamphetamine	180,946	13.0	14.8	63
Other Opiates/Synthetics	138,746	10.0	11.3	49
Marijuana/Hashish	114,840	8.2	9.4	40
Cocaine	72,517	5.2	5.9	25
Benzodiazepines	12,646	0.9	1.0	4
Other Amphetamines	11,297	0.8	0.9	4
Phencyclidine (PCP)	2,983	0.2	0.2	1
Other Stimulants	2,875	0.2	0.2	1
Substance Use Not in the Top 10	41,946	3.0	3.4	15
Unknown	167,777	12.0	--	--
Not Collected	545	0.0	--	--
Not Reported	52	0.0	--	--
Total	1,394,138	100.0	100.0	489
Reason for Discharge				
Completed	619,292	44.4	44.4	217
Dropped out	339,513	24.4	24.4	119
Transferred	292,325	21.0	21.0	103
Terminated	63,558	4.6	4.6	22
Other	57,683	4.1	4.1	20
Incarcerated	17,337	1.2	1.2	6
Death	4,430	0.3	0.3	2
Total	1,394,138	100.0	100.0	489

*For definitions of specific data categories, characteristics and substance types included in TEDS, please see Appendix A.
**For more information on rates per 100,000 calculations, please see Appendix J.

Table E-1   National Outcome Measures Among Substance Use Treatment Admissions in 2022

Admissions*	Counts	Percent of All Records	Percent Without Missing Records	Rates per 100,000**
Living Arrangement*				
Independent Living	772,551	55.4	65.7	--
Experiencing Homelessness	208,154	14.9	17.7	--
Dependent Living	195,299	14.0	16.6	--
Not Collected	175,561	12.6	--	--
Unknown	34,840	2.5	--	--
Invalid Data	7,417	0.5	--	--
Not Reported	316	0.0	--	--
Total	1,394,138	100.0	100.0	489
Employment Status (16 and over)*				
Unemployed	517,362	37.1	43.7	8,231
Not in Labor Force	345,405	24.8	29.2	349
Employed	320,217	23.0	27.1	202
Unknown	196,307	14.1	--	--
Not Collected	2,104	0.2	--	--
Not Reported	149	0.0	--	--
Not Applicable	12,594	0.9	--	--
Total	1,394,138	100.0	100.0	489
Number of Arrests*				
None	1,081,197	77.6	93.7	--
Once	62,193	4.5	5.4	--
Two or more	10,261	0.7	0.9	--
Unknown	188,934	13.6	--	--
Not Collected	51,540	3.7	--	--
Invalid Data	8	0.0	--	--
Not Reported	5	0.0	--	--
Total	1,394,138	100.0	100.0	489

*For definitions of specific data categories, characteristics and substance types included in TEDS, please see Appendix A.
**For more information on rates per 100,000 calculations, please see Appendix J.
***The NOMs variables in TEDS admissions are living arrangements (pertaining to stability in housing), employment status for ages 16 and over (pertaining to employment), number of arrests (pertaining to criminal justice involvement), detailed criminal justice referral (pertaining to criminal justice involvement), and attendance at self-help groups (pertaining to social support).

Table E-2.   National Outcome Measures Among Substance Use Treatment Admissions in 2022 (continued)

Admissions*	Counts	Percent of All Records	Percent Without Missing Records	Rates per 100,000**
Detailed Criminal Justice Referral*				
Probation/Parole	82,765	5.9	38.9	29
State/Federal Court	34,066	2.4	16.0	12
DUI/DWI	23,785	1.7	11.2	8
Other Recognized Legal Entity	21,192	1.5	10.0	7
Formal Adjudication Process	20,196	1.4	9.5	7
Other Criminal Justice Referral	16,465	1.2	7.7	6
Diversionary Program	8,966	0.6	4.2	3
Prison	5,161	0.4	2.4	2
Not Collected	631,138	45.3	--	--
Not Applicable	543,805	39.0	--	--
Unknown	4,548	0.3	--	--
Not Reported	1,572	0.1	--	--
Invalid Data	479	0.0	--	--
Total	1,394,138	100.0	100.0	489
Attendance at Self-Help Groups*				
None in the past month	858,013	61.5	78.4	301
1-3 times in the past month	57,202	4.1	5.2	20
4-7 times in the past month	37,991	2.7	3.5	13
8-30 times in the past month	94,575	6.8	8.6	33
Some attendance in the past month (freq. unknown)	46,055	3.3	4.2	16
Unknown	214,638	15.4	--	--
Not Collected	82,823	5.9	--	--
Not Reported	1,761	0.1	--	--
Invalid Data	1,080	0.1	--	--
Total	1,394,138	100.0	100.0	489

* For definitions of specific data categories, characteristics and substance types included in TEDS, please see Appendix A.
**For more information on rates per 100,000 calculations, please see Appendix J.
***The NOMs variables in TEDS admissions are living arrangements (pertaining to stability in housing), employment status for ages 16 and over (pertaining to employment), number of arrests (pertaining to criminal justice involvement), detailed criminal justice referral (pertaining to criminal justice involvement), and attendance at self-help groups (pertaining to social support).

Table E-3   National Outcome Measures Among Substance Use Treatment Discharges in 2022

Discharges*	Counts	Percent of All Records	Percent Without Missing Records	Rates per 100,000**
Living Arrangement*				
Independent Living	704,104	50.5	66.9	--
Dependent Living	201,101	14.4	19.1	--
Experiencing Homelessness	146,531	10.5	13.9	--
Not Collected	224,242	16.1	--	--
Unknown	115,784	8.3	--	--
Invalid Data	2,040	0.1	--	--
Not Reported	336	0.0	--	--
Total	1,394,138	100.0	100.0	489
Employment Status (16 and over)*				
Unemployed	446,649	32.0	39.4	7,106
Not in Labor Force	346,866	24.9	30.6	351
Employed	340,219	24.4	30.0	215
Unknown	197,955	14.2	--	--
Not Collected	49,539	3.6	--	--
Not Reported	309	0.0	--	--
Invalid Data	7	0.0	--	--
Not Applicable	12,594	0.9	--	--
Total	1,394,138	100.0	100.0	489
Number of Arrests*				
None	1,058,108	75.9	94.0	--
Once	47,141	3.4	4.2	--
Two or more	19,835	1.4	1.8	--
Unknown	217,510	15.6	--	--
Not Collected	51,488	3.7	--	--
Not Reported	48	0.0	--	--
Invalid Data	8	0.0	--	--
Total	1,394,138	100.0	100.0	489
Attendance at Self-Help Groups*				
None in the past month	750,411	53.8	67.7	263
1-3 times in the past month	68,557	4.9	6.2	24
4-7 times in the past month	54,329	3.9	4.9	19
8-30 times in the past month	161,707	11.6	14.6	57
Some attendance in the past month (freq. unknown)	72,941	5.2	6.6	26
Unknown	250,411	18.0	--	--
Not Collected	33,417	2.4	--	--
Not Reported	2,358	0.2	--	--
Invalid Data	7	0.0	--	--
Total	1,394,138	100.0	100.0	489

* For definitions of specific data categories, characteristics and substance types included in TEDS, please see Appendix A.
**For more information on rates per 100,000 calculations, please see Appendix J.
***The NOMs variables in TEDS discharges are living arrangements (pertaining to stability in housing), employment status for ages 16 and over (pertaining to employment), number of arrests (pertaining to criminal justice involvement), attendance at self-help groups (pertaining to social support), and length of stay (pertaining to retention in treatment).

Table E-4. **Length of Stay by Type of Substance Use Treatment Services in 2022**

Type of Treatment Service	Length of Stay* in Treatment (number of days)			
	Mean	P25	Median	P75
MAOT Outpatient	301	15	80	284
Ambulatory— Non-Intensive Outpatient	120	2	52	137
Ambulatory—Intensive Outpatient	82	9	42	99
Rehabilitation/Residential—Long Term	62	12	35	85
MAOT Residential	51	11	26	51
Rehabilitation/Residential—Hospital	32	3	6	24
MAOT Detoxification	32	3	5	9
Rehabilitation/Residential—Short Term	27	8	21	28
Ambulatory—Detoxification	17	2	3	5
Detoxification, Free-Standing Residential	9	2	4	6
Detoxification, Hospital Inpatient	8	3	4	6
Total	104	4	27	93

*Length of stay (pertaining to the retention in treatment NOM) is only available in TEDS discharges.

Table F-1.   Morbidity Status Among Substance Use Treatment Admissions in 2022

Morbidity Status*	Counts	Percent of All Records	Rates per 100,000**
Abstinent at Admission	336,621	22.5	122
Using at Admission	896,660	59.9	324
Missing	264,753	17.7	--
Total	1,498,034	100.0	541

Table F-2.   Morbidity Status Among Substance Use Treatment Discharges in 2022

Morbidity Status*	Counts	Percent of All Records	Rates per 100,000**
Abstinent at Discharge	406,278	29.1	143
Using at Discharge	680,670	48.8	239
Missing	302,760	21.7	--
Death Exclusion	4,430	0.3	--
Total	1,394,138	100.0	489

*Morbidity status compares past month abstinence and active use of alcohol or drugs at admission and discharge. Abstinence is a NOM and was defined as no alcohol or drug use in the past month, and active use of alcohol or drugs was defined as one of the following frequencies of use: 1-3 days in the past month, 1-2 days in the past week, 3-6 days in the past week, or daily use. If there is a missing value in the primary substance use field and the frequency of use field, the tabulation for morbidity is considered not eligible because the record does not meet the criteria for calculating morbidity and therefore coded as missing.
**For more information on rates per 100,000 calculations, please see Appendix J.
"--" – missing/unknown/not collected/not applicable. For notes on data definitions, please see Appendix A.

Table G-1.   Counts of Characteristics and Top 6 Primary Substance Use Among Substance Use Treatment Admissions in 2018-2022

Admissions*	Counts				
Age Group	2018	2019	2020	2021	2022
12-20 Years	126,965	112,327	78,441	71,882	70,692
21-34 Years	864,703	778,592	633,834	603,213	555,972
35-44 Years	475,565	465,498	406,790	417,751	423,281
45-54 Years	345,160	319,920	259,527	249,307	245,979
55-64 Years	192,627	190,381	162,949	165,071	168,588
65 Years and Older	29,281	30,502	26,750	30,555	33,522
Total	2,034,301	1,897,220	1,568,291	1,537,779	1,498,034
Sex					
Male	1,303,680	1,226,502	1,009,607	1,001,103	978,232
Female	727,882	668,898	557,570	535,408	518,656
Unknown	2,714	1,771	956	1,107	1,055
Not Collected	20	44	153	160	86
Invalid Data	5	5	5	1	5
Total	2,034,301	1,897,220	1,568,291	1,537,779	1,498,034
Race					
White	1,310,194	1,204,917	993,013	955,077	905,596
Black or African American	388,376	362,836	285,207	280,463	279,151
Other Race	184,460	177,458	134,068	134,220	132,551
American Indian or Alaska Native	53,210	53,438	48,810	54,042	59,548
Asian	12,028	11,665	9,630	10,412	10,437
Native Hawaiian or Other Pacific Islander	7,120	6,802	5,333	5,552	5,252
Unknown	78,505	79,717	91,530	97,163	104,991
Not Collected	209	142	507	642	314
Not Reported	199	245	193	208	194
Total	2,034,301	1,897,220	1,568,291	1,537,779	1,498,034
Ethnicity					
Hispanic or Latino Origin	275,942	264,720	206,325	205,177	206,583
Not of Hispanic or Latino Origin	1,672,136	1,549,927	1,240,297	1,208,748	1,152,438
Unknown	83,482	79,678	120,711	122,726	138,327
Not Collected	2,474	2,639	693	801	348
Not Reported	267	256	265	327	338
Total	2,034,301	1,897,220	1,568,291	1,537,779	1,498,034
Primary Substance Use					
Alcohol	607,017	580,867	456,905	455,545	440,540
Heroin	521,917	444,758	304,202	267,561	209,466
Methamphetamine	214,393	215,809	171,731	176,669	171,882
Other Opiates/Synthetics	157,664	130,405	101,886	120,708	145,714
Marijuana/Hashish	247,067	212,421	145,115	136,751	122,049
Cocaine	115,152	108,232	74,244	72,651	77,034
Substance Use Not in the Top 6	102,706	93,275	79,906	88,060	74,327
Unknown	67,414	109,959	231,868	217,594	255,645
Not Collected	937	1,449	2,383	2,197	1,344
Not Reported	33	45	46	42	33
Invalid Data	1	--	5	1	--
Total	2,034,301	1,897,220	1,568,291	1,537,779	1,498,034

*For definitions of specific data categories, characteristics and substance types included in TEDS, please see Appendix A.

Table G-2. **Percentages of Characteristics and Top 6 Primary Substance Use Among Substance Use Treatment Admission in 2018-2022**

Admissions*	Percent of All Records					Percent Without Missing				
Age Group	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022
12-20 Years	6.2	5.9	5.0	4.7	4.7	6.2	5.9	5.0	4.7	4.7
21-34 Years	42.5	41.0	40.4	39.2	37.1	42.5	41.0	40.4	39.2	37.1
35-44 Years	23.4	24.5	25.9	27.2	28.3	23.4	24.5	25.9	27.2	28.3
45-54 Years	17.0	16.9	16.5	16.2	16.4	17.0	16.9	16.5	16.2	16.4
55-64 Years	9.5	10.0	10.4	10.7	11.3	9.5	10.0	10.4	10.7	11.3
65 Years and Older	1.4	1.6	1.7	2.0	2.2	1.4	1.6	1.7	2.0	2.2
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Sex										
Male	64.1	64.6	64.4	65.1	65.3	64.2	64.7	64.4	65.2	65.4
Female	35.8	35.3	35.6	34.8	34.6	35.8	35.3	35.6	34.8	34.6
Unknown	0.1	0.1	0.1	0.1	0.1	--	--	--	--	--
Not Collected	0.0	0.0	0.0	0.0	0.0	--	--	--	--	--
Invalid Data	0.0	0.0	0.0	0.0	0.0	--	--	--	--	--
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Race										
White	64.4	63.5	63.3	62.1	60.5	67.0	66.3	67.3	66.3	65.0
Black or African American	19.1	19.1	18.2	18.2	18.6	19.9	20.0	19.3	19.5	20.0
Other Race	9.1	9.4	8.5	8.7	8.8	9.4	9.8	9.1	9.3	9.5
American Indian or Alaska Native	2.6	2.8	3.1	3.5	4.0	2.7	2.9	3.3	3.8	4.3
Asian	0.6	0.6	0.6	0.7	0.7	0.6	0.6	0.7	0.7	0.7
Native Hawaiian or Other Pacific Islander	0.3	0.4	0.3	0.4	0.4	0.4	0.4	0.4	0.4	0.4
Unknown	3.9	4.2	5.8	6.3	7.0	--	--	--	--	--
Not Collected	0.0	0.0	0.0	0.0	0.0	--	--	--	--	--
Not Reported	0.0	0.0	0.0	0.0	0.0	--	--	--	--	--
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Ethnicity										
Hispanic or Latino Origin	13.6	14.0	13.2	13.3	13.8	14.2	14.6	14.3	14.5	15.2
Not of Hispanic or Latino Origin	82.2	81.7	79.1	78.6	76.9	85.8	85.4	85.7	85.5	84.8
Unknown	4.1	4.2	7.7	8.0	9.2	--	--	--	--	--
Not Collected	0.1	0.1	0.0	0.1	0.0	--	--	--	--	--
Not Reported	0.0	0.0	0.0	0.0	0.0	--	--	--	--	--
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Primary Substance Use										
Alcohol	29.8	30.6	29.1	29.6	29.4	30.9	32.5	34.3	34.6	35.5
Heroin	25.7	23.4	19.4	17.4	14.0	26.5	24.9	22.8	20.3	16.9
Methamphetamine	10.5	11.4	11.0	11.5	11.5	10.9	12.1	12.9	13.4	13.9
Other Opiates/Synthetics	7.8	6.9	6.5	7.8	9.7	8.0	7.3	7.6	9.2	11.7
Marijuana/Hashish	12.1	11.2	9.3	8.9	8.1	12.6	11.9	10.9	10.4	9.8
Cocaine	5.7	5.7	4.7	4.7	5.1	5.9	6.1	5.6	5.5	6.2
Substance Use Not in the Top 6	5.0	4.9	5.1	5.7	5.0	5.2	5.2	6.0	6.7	6.0
Unknown	3.3	5.8	14.8	14.1	17.1	--	--	--	--	--
Not Collected	0.0	0.1	0.2	0.1	0.1	--	--	--	--	--
Not Reported	0.0	0.0	0.0	0.0	0.0	--	--	--	--	--
Invalid Data	0.0	--	0.0	0.0	--	--	--	--	--	--
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

*For definitions of specific data categories, characteristics and substance types included in TEDS, please see Appendix A.

Table G-3. **Counts of Characteristics and Top 6 Primary Substance Use Among Substance Use Treatment Discharges in 2018-2022**

Discharges*	Counts				
Age Group	2018	2019	2020	2021	2022
12-20 Years	105,121	92,286	68,940	60,035	57,787
21-34 Years	758,877	725,768	593,708	574,964	525,733
35-44 Years	415,477	431,410	376,786	395,995	397,966
45-54 Years	298,168	293,873	237,503	238,419	233,234
55-64 Years	156,206	168,320	140,379	148,712	151,472
65 Years and Older	21,538	24,058	21,881	25,380	27,946
Total	1,755,387	1,735,715	1,439,197	1,443,505	1,394,138
Sex					
Male	1,125,193	1,113,378	924,960	929,858	900,816
Female	629,502	621,591	513,545	512,668	492,407
Unknown	671	733	589	825	844
Not Collected	17	4	94	153	67
Invalid Data	4	9	9	1	4
Total	1,755,387	1,735,715	1,439,197	1,443,505	1,394,138
Race					
White	1,160,282	1,134,848	946,597	939,967	895,954
Black or African American	309,464	312,473	245,190	248,075	239,585
Other Race	164,555	163,616	125,547	127,809	121,229
American Indian or Alaska Native	44,721	45,445	43,212	47,234	51,929
Asian	11,133	11,142	8,591	9,276	9,081
Native Hawaiian or Other Pacific Islander	9,207	9,390	7,329	7,114	6,664
Unknown	55,258	57,948	60,474	61,888	68,145
Not Collected	628	51	1,554	1,229	807
Not Reported	76	797	702	913	744
Invalid Data	63	5	1	--	--
Total	1,755,387	1,735,715	1,439,197	1,443,505	1,394,138
Ethnicity					
Hispanic or Latino Origin	229,185	227,989	181,430	189,624	186,354
Not of Hispanic or Latino Origin	1,463,770	1,445,650	1,197,559	1,191,929	1,140,552
Unknown	60,472	60,028	59,036	60,759	65,974
Not Collected	1,034	1,118	215	953	1,007
Not Reported	863	926	956	240	251
Invalid Data	63	4	1	--	--
Total	1,755,387	1,735,715	1,439,197	1,443,505	1,394,138
Primary Substance Use					
Alcohol	528,373	522,106	423,558	429,420	423,110
Heroin	419,495	399,962	306,085	281,223	223,858
Methamphetamine	196,352	207,162	169,497	180,187	180,946
Other Opiates/Synthetics	138,390	132,083	109,664	120,241	138,746
Marijuana/Hashish	208,130	187,275	134,509	127,898	114,840
Cocaine	102,551	100,456	73,955	71,190	72,517
Substance Use Not in the Top 6	104,633	88,126	78,068	81,813	71,747
Unknown	56,931	98,081	143,172	150,934	167,777
Not Collected	495	421	632	541	545
Not Reported	36	43	57	57	52
Invalid Data	1	--	--	1	--
Total	1,755,387	1,735,715	1,439,197	1,443,505	1,394,138

*For definitions of specific data categories, characteristics and substance types included in TEDS, please see Appendix A.

Table G-4. **Percentages of Characteristics and Top 6 Primary Substance Use Among Substance Use Treatment Discharges in 2018-2022**

Discharges*	Percent of All Records					Percent Without Missing				
Age Group	2018	2019	2020	2021	2022	2018	2019	2020	2021	2022
12-20 Years	6.0	5.3	4.8	4.2	4.1	6.0	5.3	4.8	4.2	4.1
21-34 Years	43.2	41.8	41.3	39.8	37.7	43.2	41.8	41.3	39.8	37.7
35-44 Years	23.7	24.9	26.2	27.4	28.5	23.7	24.9	26.2	27.4	28.5
45-54 Years	17.0	16.9	16.5	16.5	16.7	17.0	16.9	16.5	16.5	16.7
55-64 Years	8.9	9.7	9.8	10.3	10.9	8.9	9.7	9.8	10.3	10.9
65 Years and Older	1.2	1.4	1.5	1.8	2.0	1.2	1.4	1.5	1.8	2.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Sex										
Male	64.1	64.1	64.3	64.4	64.6	64.1	64.2	64.3	64.5	64.7
Female	35.9	35.8	35.7	35.5	35.3	35.9	35.8	35.7	35.5	35.3
Unknown	0.0	0.0	0.0	0.1	0.1	--	--	--	--	--
Not Collected	0.0	0.0	0.0	0.0	0.0	--	--	--	--	--
Invalid Data	0.0	0.0	0.0	0.0	0.0	--	--	--	--	--
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Race										
White	66.1	65.4	65.8	65.1	64.3	68.3	67.7	68.8	68.1	67.6
Black or African American	17.6	18.0	17.0	17.2	17.2	18.2	18.6	17.8	18.0	18.1
Other Race	9.4	9.4	8.7	8.9	8.7	9.7	9.8	9.1	9.3	9.2
American Indian or Alaska Native	2.5	2.6	3.0	3.3	3.7	2.6	2.7	3.1	3.4	3.9
Asian	0.6	0.6	0.6	0.6	0.7	0.7	0.7	0.6	0.7	0.7
Native Hawaiian or Other Pacific Islander	0.5	0.5	0.5	0.5	0.5	0.5	0.6	0.5	0.5	0.5
Unknown	3.1	3.3	4.2	4.3	4.9	--	--	--	--	--
Not Collected	0.0	0.0	0.1	0.1	0.1	--	--	--	--	--
Not Reported	0.0	0.0	0.0	0.1	0.1	--	--	--	--	--
Invalid Data	0.0	0.0	0.0	--	--	--	--	--	--	--
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Ethnicity										
Hispanic or Latino Origin	13.1	13.1	12.6	13.1	13.4	13.5	13.6	13.2	13.7	14.0
Not of Hispanic or Latino Origin	83.4	83.3	83.2	82.6	81.8	86.5	86.4	86.8	86.3	86.0
Unknown	3.4	3.5	4.1	4.2	4.7	--	--	--	--	--
Not Collected	0.1	0.1	0.0	0.1	0.1	--	--	--	--	--
Not Reported	0.0	0.1	0.1	0.0	0.0	--	--	--	--	--
Invalid Data	0.0	0.0	0.0	--	--	--	--	--	--	--
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Primary Substance Use										
Alcohol	30.1	30.1	29.4	29.7	30.3	31.1	31.9	32.7	33.2	34.5
Heroin	23.9	23.0	21.3	19.5	16.1	24.7	24.4	23.6	21.8	18.3
Methamphetamine	11.2	11.9	11.8	12.5	13.0	11.6	12.7	13.1	13.9	14.8
Other Opiates/Synthetics	7.9	7.6	7.6	8.3	10.0	8.2	8.1	8.5	9.3	11.3
Marijuana/Hashish	11.9	10.8	9.3	8.9	8.2	12.3	11.4	10.4	9.9	9.4
Cocaine	5.8	5.8	5.1	4.9	5.2	6.0	6.1	5.7	5.5	5.9
Substance Use Not in the Top 6	6.0	5.1	5.4	5.7	5.1	6.2	5.4	6.0	6.3	5.9
Unknown	3.2	5.7	9.9	10.5	12.0	--	--	--	--	--
Not Collected	0.0	0.0	0.0	0.0	0.0	--	--	--	--	--
Not Reported	0.0	0.0	0.0	0.0	0.0	--	--	--	--	--
Invalid Data	0.0	--	--	0.0	--	--	--	--	--	--
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

*For definitions of specific data categories, characteristics and substance types included in TEDS, please see Appendix A.

Table H-1.   Characteristics of Admissions and Discharges from Treatment Services by State, 2022

States	Admissions*			Discharges*		
	Counts	Percentages	Rates per 100,000**	Counts	Percentages	Rates per 100,000**
Alabama	14,159	0.9	325	10,244	0.7	235
Alaska	4,295	0.3	697	5,117	0.4	831
Arizona	182,084	12.2	2869	173,168	12.4	2728
Arkansas	10,117	0.7	390	9,307	0.7	358
California	117,152	7.8	349	110,347	7.9	329
Colorado	65,370	4.4	1291	54,402	3.9	1075
Connecticut	47,397	3.2	1497	40,607	2.9	1282
Delaware	--	--	--	--	--	--
District of Columbia	2,329	0.2	400	2,460	0.2	423
Florida	39,092	2.6	201	22,362	1.6	115
Georgia	34,921	2.3	375	37,201	2.7	399
Hawaii	1,288	0.1	104	4,982	0.4	402
Idaho	206	0.0	13	1,768	0.1	107
Illinois	13,746	0.9	127	13,998	1.0	129
Indiana	20,466	1.4	352	18,558	1.3	319
Iowa	19,427	1.3	710	20,263	1.5	741
Kansas	8,832	0.6	354	4,860	0.3	195
Kentucky	14,474	1.0	375	56,189	4.0	1455
Louisiana	14,385	1.0	369	14,736	1.1	378
Maine	8,130	0.5	662	3,015	0.2	245
Maryland	122,261	8.2	2310	1,398	0.1	26
Massachusetts	59,728	4.0	975	45,948	3.3	750
Michigan	64,952	4.3	748	61,950	4.4	714
Minnesota	62,879	4.2	1288	52,234	3.7	1070
Mississippi	5,397	0.4	215	5,724	0.4	228
Missouri	34,824	2.3	657	41,178	3.0	777
Montana	737	0.0	76	1,267	0.1	130
Nebraska	5,759	0.4	347	5,066	0.4	306
Nevada	10,568	0.7	386	5,361	0.4	196
New Hampshire	500	0.0	40	941	0.1	76
New Jersey	84,110	5.6	1054	79,204	5.7	993
New Mexico	4,499	0.3	247	261	0.0	14
New York	182,816	12.2	1071	175,666	12.6	1029
North Carolina	37,392	2.5	405	117,602	8.4	1275
North Dakota	3,419	0.2	521	4,895	0.4	746
Ohio	18,607	1.2	184	10,069	0.7	100
Oklahoma	13,033	0.9	383	12,489	0.9	367
Oregon	--	--	--	--	--	--
Pennsylvania	16,630	1.1	147	16,451	1.2	146
Puerto Rico	2,331	0.2	80	2,129	0.2	73
Rhode Island	9,385	0.6	975	9,477	0.7	984
South Carolina	24,857	1.7	544	31,932	2.3	699
South Dakota	15,363	1.0	2006	13,338	1.0	1741
Tennessee	16,908	1.1	279	12,688	0.9	210
Texas	31,421	2.1	125	34,744	2.5	138
Utah	10,824	0.7	388	14,782	1.1	530
Vermont	5,644	0.4	982	6,102	0.4	1062
Virginia	16,433	1.1	220	14,394	1.0	193
Washington	--	--	--	6,305	0.5	94
West Virginia	--	--	--	322	0.0	21
Wisconsin	15,068	1.0	295	2,868	0.2	56
Wyoming	3,819	0.3	765	3,769	0.3	755
Total	1,498,034	100.0	541	1,394,138	100.0	489

*For definitions of specific data categories, characteristics and substance types included in TEDS, please see Appendix A.
**For more information on rates per 100,000 calculations, please see Appendix J.

Table H-2. **Counts of Top 6 Primary Substances Among Admissions to Treatment Services by State in 2022**

States	Counts						
	Top 6 Primary Substances	Alcohol	Heroin	Methamphetamine	Other Opiates/ Synthetics	Marijuana/ Hashish	Cocaine
Alabama	13,865	3,097	1,681	2,945	2,460	2,998	684
Alaska	4,163	2,214	801	536	222	340	50
Arizona	7,944	2,444	821	2,212	1,441	818	208
Arkansas	9,129	2,396	189	3,608	1,171	1,482	283
California	113,607	29,147	17,182	35,130	19,231	10,014	2,903
Colorado	64,276	34,769	4,266	11,750	8,530	3,465	1,496
Connecticut	38,241	16,085	9,868	70	5,653	3,388	3,177
Delaware	--	--	--	--	--	--	--
District of Columbia	2,064	783	609	23	76	138	435
Florida	31,008	9,712	2,490	2,841	6,327	6,427	3,211
Georgia	31,449	12,070	1,344	5,222	2,342	7,472	2,999
Hawaii	1,266	352	118	606	35	113	42
Idaho	203	66	6	74	12	43	2
Illinois	13,273	5,602	2,763	1,410	490	1,582	1,426
Indiana	20,043	5,793	2,581	5,216	1,587	4,077	789
Iowa	19,133	8,323	660	5,747	635	3,438	330
Kansas	8,483	2,309	215	3,785	566	1,346	262
Kentucky	13,677	3,361	1,738	4,090	1,658	2,107	723
Louisiana	8,071	2,014	908	2,051	729	1,470	899
Maine	7,451	2,294	3,271	439	900	225	322
Maryland	42,481	9,000	10,365	535	15,582	3,103	3,896
Massachusetts	58,303	21,792	18,471	520	11,451	1,264	4,805
Michigan	63,742	28,114	14,334	6,909	4,882	2,699	6,804
Minnesota	61,448	25,271	5,528	17,343	6,780	4,775	1,751
Mississippi	5,167	1,483	239	1,414	646	921	464
Missouri	32,214	9,097	2,594	9,208	6,499	3,956	860
Montana	719	391	40	192	55	36	5
Nebraska	5,084	2,628	61	1,536	217	564	78
Nevada	6,233	2,143	928	2,079	359	556	168
New Hampshire	480	186	168	35	41	19	31
New Jersey	79,752	31,359	30,421	1,329	6,482	5,270	4,891
New Mexico	4,262	1,843	231	625	1,435	33	95
New York	175,537	84,282	43,667	4,551	11,531	13,536	17,970
North Carolina	30,855	6,775	4,323	4,397	5,697	6,670	2,993
North Dakota	2,915	1,221	49	814	249	562	20
Ohio	17,977	5,103	2,937	2,866	2,041	3,521	1,509
Oklahoma	11,927	3,829	705	4,564	1,458	1,129	242
Oregon	--	--	--	--	--	--	--
Pennsylvania	16,235	6,030	3,696	2,142	1,249	2,004	1,114
Puerto Rico	2,273	674	1,137	0	173	224	65
Rhode Island	9,133	4,078	989	96	2,982	358	630
South Carolina	22,924	10,751	1,434	1,880	1,932	5,895	1,032
South Dakota	14,490	10,054	91	3,011	244	1,036	54
Tennessee	16,438	4,099	2,314	3,523	3,270	1,924	1,308
Texas	28,990	8,734	4,965	5,534	2,361	5,324	2,072
Utah	10,589	2,915	2,292	3,309	370	1,538	165
Vermont	5,565	2,243	1,410	104	559	417	832
Virginia	15,090	4,569	2,121	2,644	1,986	2,262	1,508
Washington	--	--	--	--	--	--	--
West Virginia	--	--	--	--	--	--	--
Wisconsin	14,738	7,403	2,238	1,694	881	1,112	1,410
Wyoming	3,778	1,642	207	1,273	237	398	21
Total	1,166,685	440,540	209,466	171,882	145,714	122,049	77,034

Table H-3. **Percentages of Top 6 Primary Substances Among Admissions to Treatment Services by State in 2022**

States	Percentages						
	Top 6 Primary Substances	Alcohol	Heroin	Methamphetamine	Other Opiates/ Synthetics	Marijuana/ Hashish	Cocaine
Alabama	1.2	0.7	0.8	1.7	1.7	2.5	0.9
Alaska	0.4	0.5	0.4	0.3	0.2	0.3	0.1
Arizona	0.7	0.6	0.4	1.3	1.0	0.7	0.3
Arkansas	0.8	0.5	0.1	2.1	0.8	1.2	0.4
California	9.7	6.6	8.2	20.4	13.2	8.2	3.8
Colorado	5.5	7.9	2.0	6.8	5.9	2.8	1.9
Connecticut	3.3	3.7	4.7	0.0	3.9	2.8	4.1
Delaware	--	--	--	--	--	--	--
District of Columbia	0.2	0.2	0.3	0.0	0.1	0.1	0.6
Florida	2.7	2.2	1.2	1.7	4.3	5.3	4.2
Georgia	2.7	2.7	0.6	3.0	1.6	6.1	3.9
Hawaii	0.1	0.1	0.1	0.4	0.0	0.1	0.1
Idaho	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Illinois	1.1	1.3	1.3	0.8	0.3	1.3	1.9
Indiana	1.7	1.3	1.2	3.0	1.1	3.3	1.0
Iowa	1.6	1.9	0.3	3.3	0.4	2.8	0.4
Kansas	0.7	0.5	0.1	2.2	0.4	1.1	0.3
Kentucky	1.2	0.8	0.8	2.4	1.1	1.7	0.9
Louisiana	0.7	0.5	0.4	1.2	0.5	1.2	1.2
Maine	0.6	0.5	1.6	0.3	0.6	0.2	0.4
Maryland	3.6	2.0	4.9	0.3	10.7	2.5	5.1
Massachusetts	5.0	4.9	8.8	0.3	7.9	1.0	6.2
Michigan	5.5	6.4	6.8	4.0	3.4	2.2	8.8
Minnesota	5.3	5.7	2.6	10.1	4.7	3.9	2.3
Mississippi	0.4	0.3	0.1	0.8	0.4	0.8	0.6
Missouri	2.8	2.1	1.2	5.4	4.5	3.2	1.1
Montana	0.1	0.1	0.0	0.1	0.0	0.0	0.0
Nebraska	0.4	0.6	0.0	0.9	0.1	0.5	0.1
Nevada	0.5	0.5	0.4	1.2	0.2	0.5	0.2
New Hampshire	0.0	0.0	0.1	0.0	0.0	0.0	0.0
New Jersey	6.8	7.1	14.5	0.8	4.4	4.3	6.3
New Mexico	0.4	0.4	0.1	0.4	1.0	0.0	0.1
New York	15.0	19.1	20.8	2.6	7.9	11.1	23.3
North Carolina	2.6	1.5	2.1	2.6	3.9	5.5	3.9
North Dakota	0.2	0.3	0.0	0.5	0.2	0.5	0.0
Ohio	1.5	1.2	1.4	1.7	1.4	2.9	2.0
Oklahoma	1.0	0.9	0.3	2.7	1.0	0.9	0.3
Oregon	--	--	--	--	--	--	--
Pennsylvania	1.4	1.4	1.8	1.2	0.9	1.6	1.4
Puerto Rico	0.2	0.2	0.5	0.0	0.1	0.2	0.1
Rhode Island	0.8	0.9	0.5	0.1	2.0	0.3	0.8
South Carolina	2.0	2.4	0.7	1.1	1.3	4.8	1.3
South Dakota	1.2	2.3	0.0	1.8	0.2	0.8	0.1
Tennessee	1.4	0.9	1.1	2.0	2.2	1.6	1.7
Texas	2.5	2.0	2.4	3.2	1.6	4.4	2.7
Utah	0.9	0.7	1.1	1.9	0.3	1.3	0.2
Vermont	0.5	0.5	0.7	0.1	0.4	0.3	1.1
Virginia	1.3	1.0	1.0	1.5	1.4	1.9	2.0
Washington	--	--	--	--	--	--	--
West Virginia	--	--	--	--	--	--	--
Wisconsin	1.3	1.7	1.1	1.0	0.6	0.9	1.8
Wyoming	0.3	0.4	0.1	0.7	0.2	0.3	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Table H-4. **Rates of Top 6 Primary Substances Among Admissions to Treatment Services by State in 2022**

States	Rates per 100,000*						
	Top 6 Primary Substances	Alcohol	Heroin	Methamphetamine	Other Opiates/ Synthetics	Marijuana/ Hashish	Cocaine
Alabama	318	71	39	68	56	69	16
Alaska	676	359	130	87	36	55	8
Arizona	125	39	13	35	23	13	3
Arkansas	352	92	7	139	45	57	11
California	338	87	51	105	57	30	9
Colorado	1,270	687	84	232	168	68	30
Connecticut	1,208	508	312	2	179	107	100
Delaware	--	--	--	--	--	--	--
District of Columbia	355	135	105	4	13	24	75
Florida	159	50	13	15	32	33	16
Georgia	338	130	14	56	25	80	32
Hawaii	102	28	10	49	3	9	3
Idaho	12	4	0	4	1	3	0
Illinois	122	52	25	13	5	15	13
Indiana	344	100	44	90	27	70	14
Iowa	700	304	24	210	23	126	12
Kansas	340	93	9	152	23	54	11
Kentucky	354	87	45	106	43	55	19
Louisiana	207	52	23	53	19	38	23
Maine	606	187	266	36	73	18	26
Maryland	803	170	196	10	294	59	74
Massachusetts	952	356	301	8	187	21	78
Michigan	734	324	165	80	56	31	78
Minnesota	1,259	518	113	355	139	98	36
Mississippi	206	59	10	56	26	37	18
Missouri	608	172	49	174	123	75	16
Montana	74	40	4	20	6	4	1
Nebraska	307	159	4	93	13	34	5
Nevada	228	78	34	76	13	20	6
New Hampshire	39	15	14	3	3	2	3
New Jersey	1,000	393	381	17	81	66	61
New Mexico	234	101	13	34	79	2	5
New York	1,029	494	256	27	68	79	105
North Carolina	334	73	47	48	62	72	32
North Dakota	444	186	7	124	38	86	3
Ohio	178	51	29	28	20	35	15
Oklahoma	351	113	21	134	43	33	7
Oregon	--	--	--	--	--	--	--
Pennsylvania	144	53	33	19	11	18	10
Puerto Rico	78	23	39	0	6	8	2
Rhode Island	949	424	103	10	310	37	65
South Carolina	502	235	31	41	42	129	23
South Dakota	1,892	1,313	12	393	32	135	7
Tennessee	271	68	38	58	54	32	22
Texas	115	35	20	22	9	21	8
Utah	380	105	82	119	13	55	6
Vermont	968	390	245	18	97	73	145
Virginia	202	61	28	35	27	30	20
Washington	--	--	--	--	--	--	--
West Virginia	--	--	--	--	--	--	--
Wisconsin	289	145	44	33	17	22	28
Wyoming	756	329	41	255	47	80	4
Total	422	159	76	62	53	44	28

*For more information on rates per 100,000 calculations, please see Appendix J.

Table H-5. **Counts of Top 6 Primary Substances Among Discharges from Treatment Services by State in 2022**

States	Counts					
	Top 6 Primary Substances	Alcohol	Heroin	Methamphetamine	Other Opiates/ Synthetics	Marijuana/ Hashish	Cocaine
Alabama	10,026	2,301	1,274	2,306	1,602	2,048	495
Alaska	4,959	2,638	931	688	217	447	38
Arizona	8,149	2,446	1,108	2,226	1,327	828	214
Arkansas	8,470	2,114	196	3,423	1,101	1,352	284
California	107,228	27,268	18,962	32,696	16,339	9,252	2,711
Colorado	53,479	28,854	4,224	10,318	5,887	2,906	1,290
Connecticut	34,929	14,679	9,568	66	4,741	3,019	2,856
Delaware	--	--	--	--	--	--	--
District of Columbia	2,171	779	707	22	62	162	439
Florida	19,470	6,133	2,040	1,727	4,575	3,041	1,954
Georgia	33,559	13,232	1,560	5,394	2,678	7,396	3,299
Hawaii	4,892	1,057	308	2,481	109	824	113
Idaho	1,742	576	231	547	85	292	11
Illinois	13,195	5,677	2,695	1,473	475	1,457	1,418
Indiana	18,118	5,135	2,624	4,766	1,343	3,542	708
Iowa	19,975	8,450	707	6,722	607	3,145	344
Kansas	4,749	1,306	124	2,072	281	800	166
Kentucky	52,960	11,208	7,238	17,910	7,289	7,647	1,668
Louisiana	8,007	2,024	939	1,997	727	1,433	887
Maine	2,861	1,080	1,115	150	314	72	130
Maryland	710	153	173	25	224	74	61
Massachusetts	44,979	17,576	15,045	398	7,474	755	3,731
Michigan	60,822	26,543	14,180	6,224	4,852	2,565	6,458
Minnesota	51,067	21,570	4,600	14,445	5,157	3,829	1,466
Mississippi	5,459	1,497	344	1,515	819	715	569
Missouri	39,692	10,852	3,676	12,343	7,188	4,636	997
Montana	1,240	708	88	329	49	64	2
Nebraska	4,486	2,336	65	1,345	162	505	73
Nevada	2,611	984	291	798	127	345	66
New Hampshire	917	293	406	82	58	29	49
New Jersey	75,203	29,362	29,186	1,218	5,752	5,229	4,456
New Mexico	257	135	13	49	47	3	10
New York	168,610	80,902	42,469	4,107	10,473	13,664	16,995
North Carolina	105,094	24,786	29,309	7,862	27,452	6,824	8,861
North Dakota	4,059	1,607	109	1,178	309	833	23
Ohio	9,746	2,481	1,885	1,719	1,055	1,850	756
Oklahoma	11,272	3,619	645	4,314	1,314	1,151	229
Oregon	--	--	--	--	--	--	--
Pennsylvania	16,096	6,030	3,988	2,058	1,248	1,767	1,005
Puerto Rico	2,072	628	1,145	0	86	161	52
Rhode Island	9,234	4,103	1,432	93	2,644	352	610
South Carolina	29,422	13,570	2,120	2,329	2,998	7,103	1,302
South Dakota	12,607	8,814	101	2,554	178	917	43
Tennessee	12,360	3,078	1,714	2,906	2,314	1,457	891
Texas	32,302	9,853	6,322	5,960	2,774	5,256	2,137
Utah	14,472	3,644	3,359	5,042	444	1,770	213
Vermont	6,023	2,429	1,616	115	611	399	853
Virginia	13,284	4,043	1,883	2,389	1,684	2,003	1,282
Washington	4,187	1,316	531	995	1,022	276	47
West Virginia	300	113	74	18	73	20	2
Wisconsin	2,770	1,484	319	350	128	251	238
Wyoming	3,725	1,644	219	1,202	271	374	15
Total	1,154,017	423,110	223,858	180,946	138,746	114,840	72,517

Table H-6.   Percentages of Top 6 Primary Substances Among Discharges from Treatment Services by State in 2022

States	Percentages						
	Top 6 Primary Substances	Alcohol	Heroin	Methamphetamine	Other Opiates/ Synthetics	Marijuana/ Hashish	Cocaine
Alabama	0.9	0.5	0.6	1.3	1.2	1.8	0.7
Alaska	0.4	0.6	0.4	0.4	0.2	0.4	0.1
Arizona	0.7	0.6	0.5	1.2	1.0	0.7	0.3
Arkansas	0.7	0.5	0.1	1.9	0.8	1.2	0.4
California	9.3	6.4	8.5	18.1	11.8	8.1	3.7
Colorado	4.6	6.8	1.9	5.7	4.2	2.5	1.8
Connecticut	3.0	3.5	4.3	0.0	3.4	2.6	3.9
Delaware	--	--	--	--	--	--	--
District of Columbia	0.2	0.2	0.3	0.0	0.0	0.1	0.6
Florida	1.7	1.4	0.9	1.0	3.3	2.6	2.7
Georgia	2.9	3.1	0.7	3.0	1.9	6.4	4.5
Hawaii	0.4	0.2	0.1	1.4	0.1	0.7	0.2
Idaho	0.2	0.1	0.1	0.3	0.1	0.3	0.0
Illinois	1.1	1.3	1.2	0.8	0.3	1.3	2.0
Indiana	1.6	1.2	1.2	2.6	1.0	3.1	1.0
Iowa	1.7	2.0	0.3	3.7	0.4	2.7	0.5
Kansas	0.4	0.3	0.1	1.1	0.2	0.7	0.2
Kentucky	4.6	2.6	3.2	9.9	5.3	6.7	2.3
Louisiana	0.7	0.5	0.4	1.1	0.5	1.2	1.2
Maine	0.2	0.3	0.5	0.1	0.2	0.1	0.2
Maryland	0.1	0.0	0.1	0.0	0.2	0.1	0.1
Massachusetts	3.9	4.2	6.7	0.2	5.4	0.7	5.1
Michigan	5.3	6.3	6.3	3.4	3.5	2.2	8.9
Minnesota	4.4	5.1	2.1	8.0	3.7	3.3	2.0
Mississippi	0.5	0.4	0.2	0.8	0.6	0.6	0.8
Missouri	3.4	2.6	1.6	6.8	5.2	4.0	1.4
Montana	0.1	0.2	0.0	0.2	0.0	0.1	0.0
Nebraska	0.4	0.6	0.0	0.7	0.1	0.4	0.1
Nevada	0.2	0.2	0.1	0.4	0.1	0.3	0.1
New Hampshire	0.1	0.1	0.2	0.0	0.0	0.0	0.1
New Jersey	6.5	6.9	13.0	0.7	4.1	4.6	6.1
New Mexico	0.0	0.0	0.0	0.0	0.0	0.0	0.0
New York	14.6	19.1	19.0	2.3	7.5	11.9	23.4
North Carolina	9.1	5.9	13.1	4.3	19.8	5.9	12.2
North Dakota	0.4	0.4	0.0	0.7	0.2	0.7	0.0
Ohio	0.8	0.6	0.8	1.0	0.8	1.6	1.0
Oklahoma	1.0	0.9	0.3	2.4	0.9	1.0	0.3
Oregon	--	--	--	--	--	--	--
Pennsylvania	1.4	1.4	1.8	1.1	0.9	1.5	1.4
Puerto Rico	0.2	0.1	0.5	0.0	0.1	0.1	0.1
Rhode Island	0.8	1.0	0.6	0.1	1.9	0.3	0.8
South Carolina	2.5	3.2	0.9	1.3	2.2	6.2	1.8
South Dakota	1.1	2.1	0.0	1.4	0.1	0.8	0.1
Tennessee	1.1	0.7	0.8	1.6	1.7	1.3	1.2
Texas	2.8	2.3	2.8	3.3	2.0	4.6	2.9
Utah	1.3	0.9	1.5	2.8	0.3	1.5	0.3
Vermont	0.5	0.6	0.7	0.1	0.4	0.3	1.2
Virginia	1.2	1.0	0.8	1.3	1.2	1.7	1.8
Washington	0.4	0.3	0.2	0.5	0.7	0.2	0.1
West Virginia	0.0	0.0	0.0	0.0	0.1	0.0	0.0
Wisconsin	0.2	0.4	0.1	0.2	0.1	0.2	0.3
Wyoming	0.3	0.4	0.1	0.7	0.2	0.3	0.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Table H-7.   Rates of Top 6 Primary Substances Among Discharges from Treatment Services by State in 2022

States	Rates per 100,000*						
	Top 6 Primary Substances	Alcohol	Heroin	Methamphetamine	Other Opiates/ Synthetics	Marijuana/ Hashish	Cocaine
Alabama	230	53	29	53	37	47	11
Alaska	805	428	151	112	35	73	6
Arizona	128	39	17	35	21	13	3
Arkansas	326	81	8	132	42	52	11
California	319	81	56	97	49	28	8
Colorado	1,056	570	83	204	116	57	25
Connecticut	1,103	464	302	2	150	95	90
Delaware	--	--	--	--	--	--	--
District of Columbia	373	134	121	4	11	28	75
Florida	100	31	10	9	23	16	10
Georgia	360	142	17	58	29	79	35
Hawaii	395	85	25	200	9	66	9
Idaho	106	35	14	33	5	18	1
Illinois	122	52	25	14	4	13	13
Indiana	311	88	45	82	23	61	12
Iowa	730	309	26	246	22	115	13
Kansas	191	52	5	83	11	32	7
Kentucky	1,372	290	187	464	189	198	43
Louisiana	205	52	24	51	19	37	23
Maine	233	88	91	12	26	6	11
Maryland	13	3	3	0	4	1	1
Massachusetts	734	287	246	6	122	12	61
Michigan	701	306	163	72	56	30	74
Minnesota	1,046	442	94	296	106	78	30
Mississippi	218	60	14	60	33	28	23
Missouri	749	205	69	233	136	88	19
Montana	127	73	9	34	5	7	0
Nebraska	271	141	4	81	10	30	4
Nevada	95	36	11	29	5	13	2
New Hampshire	74	24	33	7	5	2	4
New Jersey	943	368	366	15	72	66	56
New Mexico	14	7	1	3	3	0	1
New York	988	474	249	24	61	80	100
North Carolina	1,139	269	318	85	298	74	96
North Dakota	618	245	17	179	47	127	4
Ohio	96	25	19	17	10	18	7
Oklahoma	331	106	19	127	39	34	7
Oregon	--	--	--	--	--	--	--
Pennsylvania	143	53	35	18	11	16	9
Puerto Rico	71	21	39	0	3	6	2
Rhode Island	959	426	149	10	275	37	63
South Carolina	644	297	46	51	66	156	29
South Dakota	1,646	1,151	13	333	23	120	6
Tennessee	204	51	28	48	38	24	15
Texas	128	39	25	24	11	21	8
Utah	519	131	121	181	16	64	8
Vermont	1,048	423	281	20	106	69	148
Virginia	178	54	25	32	23	27	17
Washington	62	20	8	15	15	4	1
West Virginia	19	7	5	1	5	1	0
Wisconsin	54	29	6	7	3	5	5
Wyoming	746	329	44	241	54	75	3
Total	405	148	79	63	49	40	25

*For more information on rates per 100,000 calculations, please see Appendix J.

Table I-1.   **Overall Missing Admissions Counts and Percentages by Key Characteristics in 2022**

Admissions*	Number Reporting	Number Missing**	Percent Reporting	Percent Missing**
Age Group	1,498,034	0	100.0	0.0
Race	1,392,535	105,499	93.0	7.0
Ethnicity	1,359,021	139,013	90.7	9.3
Sex	1,496,888	1,146	99.9	0.1
Referral Source	1,215,023	283,011	81.1	18.9
Type of Treatment Service	1,498,034	0	100.0	0.0
Primary Substance Use	1,241,012	257,022	82.8	17.2
Education at Admission	1,145,303	248,835	82.2	17.8
Living Arrangement at Admission	1,176,004	218,134	84.4	15.6
Employment Status at Admission	1,182,984	211,154	84.9	15.1
Number of Arrests in the Past 30 Days at Admission	1,153,651	240,487	82.8	17.2
Detailed Criminal Justice Referral at Admission	212,596	1,181,542	15.2	84.8
Attendance of Substance Use Self-Help Groups in the Past 30 Days at Admission	1,093,836	300,302	78.5	21.5

Table I-2.   **Overall Missing Discharges Counts and Percentages by Key Characteristics in 2022**

Discharge*	Number Reporting	Number Missing**	Percent Reporting	Percent Missing**
Age Group	1,394,138	0	100.0	0.0
Race	1,324,442	69,696	95.0	5.0
Ethnicity	1,326,906	67,232	95.2	4.8
Sex	1,393,223	915	99.9	0.1
Type of Treatment Service	1,394,138	0	100.0	0.0
Primary Substance Use	1,225,764	168,374	87.9	12.1
Reason for Discharge	1,394,138	0	100.0	0.0
Living Arrangement at Discharge	1,051,736	342,402	75.4	24.6
Employment Status at Discharge	1,133,734	260,404	81.3	18.7
Number of Arrests in Past 30 Days at Discharge	1,125,084	269,054	80.7	19.3
Attendance at Substance Use Self-Help Groups in Past 30 Days at Discharge	1,107,945	286,193	79.5	20.5

*For definitions of specific data categories, characteristics and substance types included in TEDS, please see Appendix A.
**Includes missing, unknown, not collected and not applicable.

Appendix J.   Treatment Episode Data Set (TEDS) Detailed Overview

Introduction and Background

This report presents results from the Treatment Episode Data Set (TEDS) on the demographic and substance use characteristics of admissions to and discharges from substance use treatment services. The Center for Behavioral Health Statistics and Quality (CBHSQ), Substance Abuse and Mental Health Services Administration (SAMHSA), coordinates and manages the collection of TEDS data from the states and jurisdictions.

TEDS is a compilation of client-level data routinely collected by the individual state administrative data systems to monitor their substance use treatment systems. Generally, facilities that are required to report to the Single State Agencies (SSAs) are those that receive public funds and/or are licensed or certified by the SSAs to provide substance use treatment.

The TEDS system comprises two major components: the Admission Data Set and the Linked Discharge Data Set. The TEDS Admission Data Set includes client-level data on substance use treatment admissions from 1992 through the present. The TEDS Linked Discharge Data Set includes discharges that can be linked at a record level to admissions; it includes information from clients discharged in 2000 and later. For both data sets, selected data items from the individual state data files are converted to a standardized format consistent across states. These standardized data constitute TEDS.

The TEDS Admission Data Set consists of a Minimum Data Set of items collected by all states, and a Supplemental Data Set where individual data items are reported at the state's discretion. The Minimum Data Set consists of 19 items that include information on:

- demographic information
- primary, secondary, and tertiary substances and their route of administration, frequency of use, and age at first use
- source of referral to treatment
- number of prior treatment episodes
- type of treatment service, including planned use of medication-assisted opioid therapy

The Supplemental Data Set items include psychiatric, social, and economic measures. Some items from the Supplemental Data Set are included in the Linked Discharge Data Set to explore how the status changes between admission and discharge.

The TEDS Linked Discharge Data Set was designed to enable TEDS to collect information on entire treatment episodes. Discharge data, when linked to admission data, represent treatment episodes that enable analyses of questions that cannot be answered with admission data alone. Examples include the proportion of discharges that completed treatment and the average length of stay (LOS) among those who completed treatment.

History

National-level data collection on admissions to substance use treatment was first mandated in 1972 under the Drug Abuse Office and Treatment Act, P.L. 92-255. This act initiated federal funding for drug treatment and rehabilitation and required reporting on clients entering drug (but not alcohol) use treatment. The Client-Oriented Data Acquisition Process (CODAP) was developed to collect admission and discharge data directly from federally funded drug treatment programs. (Programs for treatment of alcohol use were not included.) Reporting was mandatory for all such programs and data were collected using a standard form. CODAP included all clients in federally funded programs regardless of individual funding source. Reports were issued from 1973 to 1981 based on data from about 1,800 to 2,000 programs, including some 200,000 annual admissions.

In 1981, the collection of national-level data on admissions to substance use treatment was discontinued because of the introduction of the Alcohol, Drug Abuse, and Mental Health Services (ADMS) Block Grant. The block grant transferred federal funding from individual programs to the states for distribution and included no data reporting requirement. Participation in CODAP became voluntary; although several states submitted data through 1984, the data was in no way nationally representative.

In 1988, the Comprehensive Alcohol Abuse, Drug Abuse, and Mental Health Amendments (P.L. 100-690) established a revised Substance Abuse Prevention and Treatment (SAPT) Block Grant and mandated federal data collection on clients receiving treatment for either alcohol or drug use. The TEDS data collection effort represents the federal response to this mandate. TEDS began in 1989 with the issue of three-year development grants to states.

State Data Collection Systems

TEDS is an exceptionally large and powerful data set that covers a significant proportion of all admissions to substance use treatment. TEDS comprises data collected through the individual data collection systems of the SSAs for substance use treatment. States have cooperated with the federal government in the data collection process, and substantial progress has been made toward developing a standardized data set. However, because each state system is unique, and each state has unique powers and mandates, significant differences exist among state data collection systems. States are required to complete a data crosswalk prior to submitting TEDS data, which thereafter is reviewed and approved on an annual basis. A state data crosswalk contains a one-to-one mapping of a state's data fields, codes, and categories to the TEDS data fields, codes, and categories. A sample state crosswalk can found here: combined_su_mh_crosswalk_template_10_2018.pdf (samhsa.gov).

Reporting differences between states are compounded by evolving health care payment systems and state-to-state comparisons should be made with extreme caution. TEDS admissions and/or clients do not represent the total national demand for substance use treatment or the prevalence of substance use in the general population. States differ widely in the amount of public funding available for substance use treatment and the constraints placed on the use of funds. For example, some states may be directed to target special populations such as pregnant women or adolescents. While states with higher funding levels may be able to admit a larger proportion of population in need of treatment, states with limited funds may be compelled to exercise triage in admitting persons to treatment.

States may include or exclude reporting by certain sectors of the treatment population, and these sectors may change over time. For example, treatment programs based in the criminal justice system may or may not be administered through the SSA. Detoxification facilities, which can generate large numbers of admissions, are not uniformly considered treatment facilities and are not uniformly reported by all states.

- *Facilities included.* The scope of facilities included in TEDS is affected by differences in state licensure, certification, and accreditation practices, and disbursement of public funds. Most SSAs require facilities that receive state/public funding (including federal block grant funds) for the provision of alcohol and/or drug treatment services to report data to the SSA. Generally, this funding is distributed by the SSA, but may be distributed by another public agency. Some SSAs regulate private facilities, methadone clinics, and/or individual practitioners and require them to report TEDS data. Others do not because of the difficulty in obtaining data from these facilities, although these facilities may report data voluntarily. Facilities operated by federal agencies (e.g., the Bureau of Prisons, the Department of Defense, and the Department of Veterans Affairs) generally do not report TEDS data to the SSA, although some facilities operated by the Indian Health Service are included. Hospital-based substance use treatment facilities are frequently not licensed through the SSA and do not report TEDS data. Correctional facilities (state prisons and local jails) are monitored by the SSA and report TEDS data in some states but not in others. The primary goal of TEDS is to monitor the characteristics of clients admitted to planned and continuing treatment regimens. Thus, early intervention and crisis intervention programs that do not lead to enrollment in continued treatment are excluded from TEDS.

- *Clients included.* About 62 percent of states who reported data on all admissions to eligible facilities, although some reported only, or largely include admissions financed by public funds. TEDS is an admission-based system; therefore, TEDS admissions do not represent individuals. For example, an individual admitted to treatment twice within a calendar year is counted as two admissions.

- *Ability to track multi-service episodes.* The goal for the TEDS system is to enumerate treatment episodes by distinguishing the initial admission of a client from his/her subsequent transfer to a different type of treatment service (e.g., from residential treatment to outpatient) within a single continuous treatment episode. Thus, TEDS records are ideally coded as admissions if they represent the initial treatment service in a treatment episode and as transfers if they represent a change in the type of treatment service or a change in provider without an interruption in treatment. This requires that clients be assigned unique IDs that can be linked across providers; not all states are legally and/or technologically able to do this. Most states can identify transfers as a change in the type of treatment service within a given provider; however, few can also identify a transfer involving a change of provider. Several states do not track transfers, but instead report transfers as clients who are discharged and readmitted within a specified time period defined by each state. Because some admission records, in fact, may represent transfers, the number of admissions reported probably overestimates the number of treatment episodes. Some states reported a limited data set on codependents of substance users entering treatment.

- *Services offered.* Each state offers a mixture of types of treatment service (e.g., outpatient, detoxification, residential, opioid therapy) which can have a significant effect on its admission rate. There is higher client turnover and therefore more admissions in short-stay services such as detoxification than in long-stay

services such as outpatient or long-term residential treatment. Admission rates for individual substances used may be affected as well (e.g., detoxification is more closely associated with alcohol or heroin use than with the use of other substances).

- *Completeness and timeliness of reporting.* SAMHSA, in reporting national-level TEDS data must balance timeliness of reporting and completeness of the data set. There may be a time lag in the publication of SAMHSA's annual report because preparation cannot begin until states have completed their data submission for that year. States, in turn, rely on individual facilities to report in a timely manner so they can submit TEDS data to SAMHSA at regular intervals. Admissions from facilities that report late to the states will appear in a later data submission to SAMHSA, so the number of annual admissions in a report may be higher in subsequent reports. The number of additional admissions submitted late is generally small. Thus, the percentage distributions may change slightly in subsequent reports, although Census division- and state-level data may change somewhat more for states with reporting delays. States continually review and improve their data collection and processing. When systematic errors are identified, states may revise or replace historical TEDS data files. While this process represents an improvement in the data system, the historical statistics in this report will differ slightly from those in previous years reports. Therefore, public use files differ from year to year, making it difficult to replicate corresponding year reports.

Due to the COVID-19 pandemic, various states have experienced challenges as some substance use treatment providers or facilities temporarily discontinued their substance use treatment services. In addition, some states reported that there has been a decrease in resources and staffing availability at the provider level. Loss of data from these providers may have contributed to the overall decrease of the 2022 admission and discharge data. A few states reported significant decreases in the total number of TEDS admissions due to the impact of Medicaid expansion. States are expected to report all variables in the Minimum Data Set. Variables in the Supplemental Data Set are collected at each state's discretion.

Data Notes and Limitations

TEDS data are subject to change as states continually review the quality of their data and may revise the files in case of data quality issues and/or errors. While this process improves the data set over time, reported historical TEDS statistics may change slightly from year to year. TEDS records do not represent clients; rather, each record represents a treatment episode. For example, a client admitted to substance use treatment twice within a calendar year will be counted as two admissions. Similarly, a client discharged from substance use treatment twice within a calendar year will be counted as two discharges. TEDS also provides information on specific types of treatment service derived from linked pairs of admissions or discharge records. However, this may not represent complete treatment episodes which may consist of stays in multiple types of services. Identifying complete treatment episodes would require analysis of the series of linked pairs of records. Most SSAs report a single continuous treatment episode that involves transfer to a different type of service (i.e., from outpatient to residential) as one admission. However, some SSAs do not track transfers, and may report them as new admissions. In such instances, the number of admissions may overestimate the number of treatment episodes. TEDS allows up to three substances to be listed on the admission record: primary, secondary, and tertiary. These represent the substances that led to the treatment episode; however, it does not necessarily account for all drugs used at the time of admission.

The scope of facilities included in TEDS is affected by differences in state licensure, certification, and accreditation practices, and disbursement of public funds. Most SSAs require facilities that receive state/public funding (including federal block grant funds) for providing alcohol and/or drug treatment services to report data to the SSA. Some SSAs regulate private facilities, opioid treatment programs, and/or individual practitioners and require them to report TEDS data. Because of differences in individual state data systems, data collection, and methodology, caution should be exercised when comparing state estimates. Additional information outlining individual state data system reporting characteristics is included in Appendix C of this report, and additional information for facilities included in the state data collection system is included in Appendix J of this report.

Report-Specific Considerations

Treatment admissions for codependents of substance use clients are excluded. Records for identifiable transfers within a single-treatment episode are excluded for admissions but included in the discharge counts. Records with partially complete data have been retained. Records with missing reason for discharge have been excluded from the count of discharges reported. Methamphetamine/amphetamine admissions include admissions for both substances but are primarily for methamphetamine. In 2022, methamphetamine constituted about 93 percent of combined methamphetamine/amphetamine admissions. The discharge records analyzed go as far back as the year 2005, which puts the maximum value LOS in treatment at 17 years. The duration of treatment for clients receiving outpatient medication-assisted opioid therapy can be much longer, and some admissions may receive this form of treatment

indefinitely. Therefore, the median LOS in this report underestimates duration of treatment for those currently receiving outpatient medication-assisted opioid therapy. Similarly, the characteristics of clients discharged from outpatient medication-assisted opioid therapy within 17 years would differ from those still in treatment.

Rates per 100,000 Calculations

Denominators for calculating the rates per 100,000 populations were derived from the following three sources:

1. U.S. Census Bureau for population estimates by demographic characteristics, states, and education. Citations below:
   - Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin: April 1, 2020 to July 1, 2022 (SC-EST2022-ALLDATA6).
   - Annual Estimates of the Resident Population by Single Year of Age and Sex for Puerto Rico Commonwealth: April 1, 2020 to July 1, 2022 (PRC-EST2022-SYASEX).
   - Education tables: U.S. Census Bureau, Current Population Survey, 2022 Annual Social and Economic Supplement (CPS ASEC). TEDS data (numerator) excludes Puerto Rico counts to align with denominator. Numerator is restricted to TEDS discharges 18 years and over to align with denominator (U.S. population 18 years and over).

2. U.S. Bureau of Labor Statistics for population estimates by employment status. Citation below:
   - Employment tables: U.S. Bureau of Labor Statistics, States and selected areas: Employment status of the civilian noninstitutional population, January 1976 to date, not seasonally adjusted. Numerator is restricted to TEDS admissions/discharges 16 years and over to align with denominator (U.S. population 16 years and over). State exclusions have been applied to make denominator comparable to TEDS.

3. American Community Survey (ACS) for population by Hispanic of Latino Origin for Puerto Rico. Citation below:
   - U.S. Census Bureau, 2022 American Community Survey 1-Year Estimates. Puerto Rico Race and Hispanic or Latino Origin.

These population estimates were adjusted to (a) align with the states that are included in this report, and (b) obtain estimated counts for race and ethnicity by applying the ACS distribution ratios for these subgroups to the totals reported.

Exclusion Criteria

States with admission or discharge record counts that are less than 50 percent compared to the average of counts submitted for the three prior years (i.e., average of 2019, 2020, and 2021 counts) are excluded from this report. Outlined below are states that are excluded from admission and discharge data in 2018-2022.

- In 2022, Delaware, Oregon, Washington, and West Virginia were excluded from admission data and Delaware and Oregon were excluded from discharge data.
- In 2021, Idaho, Oregon, and Washington were excluded from admission data and Oregon was excluded from discharge data.
- In 2020. Idaho, Oregon, and Washington were excluded from admission data and Ohio, Oregon, and West Virginia were excluded from discharge data.
- In 2019, Oregon, and Washington were excluded from admission data and Oregon, Washington, and West Virginia were excluded from discharge data.
- In 2018, Oregon, and Washington were excluded from admission data and Oregon, Washington, West Virginia were excluded from discharge data.

Additional Resources

For additional information on TEDS, including the previous years' reports, instruction manuals, and cross-walks, please refer to https://www.samhsa.gov/data/data-we-collect/teds-treatment-episode-data-set.

SAMHSA

Substance Abuse and Mental Health
Services Administration