National Survey of Substance Abuse Treatment Services (N-SSATS), 2016

Codebook

Center for Behavioral Health Statistics and Quality
Substance Abuse and Mental Health Services Administration

Acknowledgements

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Recommended Citation

Substance Abuse and Mental Health Services Administration, *National Survey of Substance Abuse Treatment Services (N-SSATS): 2016. Data on Substance Abuse Treatment Facilities*. BHSIS Series S-93, HHS Publication No. (SMA) 17-5039. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2017.

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Description of the National Survey of Substance Abuse Treatment Services (N-SSATS)

The 2016 National Survey of Substance Abuse Treatment Services (N-SSATS) was conducted between March and November 2016, with a reference date of March 31, 2016. It is the 39th in a series of national surveys that began in the 1970s. The surveys were designed to collect data on the location, characteristics, and use of alcohol and drug abuse treatment facilities and services throughout the 50 states, the District of Columbia, Puerto Rico, U.S. territories, and other jurisdictions.[1] The Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services, plans and directs N-SSATS.

N-SSATS collects information from all facilities in the United States, both public and private, that provide substance abuse treatment.[2]

N-SSATS quantifies the dynamic character and composition of the U.S. substance abuse treatment delivery system. N-SSATS collects multipurpose data that can be used to:

- Assist SAMHSA and state and local governments in assessing the nature and extent of services provided in state-supported and other substance abuse treatment facilities and in forecasting substance abuse treatment resourcerequirements;

- Update SAMHSA's Inventory of Behavioral Health Services (I-BHS), formerly called the Inventory of Substance Abuse Treatment Services (I-SATS), which includes all known drug and alcohol abuse treatment and mental health treatment facilities;

- Analyze substance abuse treatment services trends and conduct comparative analyses for the nation, regions, and states;

- Generate the *National Directory of Drug and Alcohol Abuse Treatment Programs*, a compendium of facilities approved by state substance abuse agencies for the provision of substance abuse treatment; and

- Update the information in SAMHSA's Behavioral Health Treatment Services Locator, a searchable database of facilities that provide substance abuse treatment. The Treatment Services Locator is available on the Internet at: https://findtreatment.samhsa.gov

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[1]   U.S. territories included in the N-SSATS consist of the territory of Guam, the Commonwealth of Puerto Rico, and the Virgin Islands of the United States. Other jurisdictions included in the N-SSATS are the Federated States of Micronesia, the Commonwealth of the Northern Mariana Islands, and the Republic of Palau.

[2]   Entities responding to N-SSATS are referred to as "facilities," which may be a program-level, clinic-level, or multisite respondent.

Data Collection Procedures for the 2016 N-SSATS

Field period and reference date

The survey reference date for the 2016 N-SSATS was March 31, 2016. The field period was from March 31, 2016 through December 15, 2016.

Survey universe

The 2016 N-SSATS facility universe totaled 18,087 facilities, including all 17,017 active treatment facilities on SAMHSA's I-BHS at a point four weeks before the survey reference date, and 1,070 facilities that were added by state substance abuse agencies or otherwise discovered during the first five months of the survey.

Content

The 2016 N-SSATS questionnaire contained 36 numbered questions. Topics included:

- Facility identification information

- Operating entity

- Primary focus

- Type of care provided

  - Outpatient treatment services (regular outpatient treatment, intensive outpatient treatment, day treatment or partial hospitalization, detoxification, methadone/buprenorphine maintenance or extended-release injectable naltrexone [Vivitrol®] treatment)

  - Residential (non-hospital) treatment services (long-term—more than 30 days, short-term—30 days or fewer, detoxification)

  - Hospital inpatient treatment services (inpatient treatment, inpatient detoxification)

- Services offered (assessment and pre-treatment services, counseling, pharmacotherapies, testing, transitional services, ancillary services)

- Clinical/therapeutic approaches

- Special programs or groups provided for specific client types

- Provision of services in sign language and/or in languages other than English

- Detoxification from alcohol, benzodiazepines, opioids, cocaine, methamphetamines, or other drugs, and routine use of medication during detoxification

- Client outreach (outreach to persons in the community who may need treatment, provision of a facility website)

- Licensure, certification, or accreditation agencies or organizations

- Payment options accepted, including use of a sliding fee scale and/or treatment at no charge

- Receipt of government funding

- Smoking policy

- Manner in which opioid dependence is treated, the operation of an opioid treatment program (OTP) certified by SAMHSA, and offering maintenance and/or detoxification with opioid drugs such as methadone or buprenorphine

- Number of clients in treatment on March 31, 2016

- Numbers and hours worked by paid and unpaid staff (analysis of these questions is not included in this report)

The 2016 data collection used an abbreviated questionnaire that collected facility characteristics; client counts were collected only in the form of total numbers for those served in outpatient, residential (non-hospital), hospital inpatient settings, as well as the total number of clients receiving methadone, buprenorphine, and extended-release injectable naltrexone (Vivitrol®)

Data collection

Three data collection modes were employed: a secure web-based questionnaire, a paper questionnaire sent by mail, and a telephone interview. Five weeks before the survey reference date of March 31, 2016, letters were mailed to all facilities to announce the survey. The letters also served to update records with new address information received from the U.S. Postal Service. During the last week of March 2016, a data collection packet (including the SAMHSA cover letter, state-specific letter of endorsement, state profile, information on completing the survey on the web, and a sheet of Frequently Asked Questions) was mailed to each facility. To ease the burden on respondents, many of the data items that typically do not change from year to year were prefilled in the web-based questionnaire for those facilities that had completed the 2015 survey. Respondents could also request a paper questionnaire be sent to them. During the data collection phase, contract personnel were available to answer facilities' questions concerning the survey. Support for facilities completing the questionnaire on the web was also available by email. Three weeks after the initial data collection packet mailing, thank you/reminder letters were sent to all facilities. Approximately eight weeks after the initial packet mailing, non-responding facilities were mailed a second packet. There was no questionnaire in the 2016 second packet. About two weeks after the second packet mailing, non-respondents received a reminder telephone call. A third packet containing a hard copy questionnaire was mailed about eight weeks after the second packet mailing. Those facilities that had not responded within three to four weeks of the reminder call were telephoned and asked to complete the survey by computer-assisted telephone interview (CATI).

Facility Status and Response Rate

Table 1.1 presents a summary of response rate information. There were 18,087 facilities in the survey universe. Of these facilities, 2,080 facilities (11 percent) were found to be ineligible for the survey because they had closed or did not provide substance abuse treatment or detoxification. Of the remaining 16,007 facilities, 14,632 facilities (91 percent) completed the survey and 14,399 (90 percent) were eligible for this report

Table 1.1. N-SSATS facilities, by status and mode of response: 2016

	Number	*Percent*
Total facilities in universe	**18,087**	**100.0**
Closed/ineligible	2,080	11.5
Eligible	16,007	88.5
Total eligible	**16,007**	**100.0**
Non-respondents	1,375	8.6
Respondents	14,632	91.4
Excluded from report[1]	233	1.5
Included in report	14,399	90.0
Mode of response	**14,399**	**100.0**
Internet	12,851	89.2
Telephone	1,336	9.3
Mail	212	1.5

[1] Facilities excluded from the report included 112 non-treatment halfway houses, 94 solo practices not approved by the state agency for inclusion, and 27 facilities that treated incarcerated clients only.

SOURCE: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration, National Survey of Substance Abuse Treatment Services (N-SSATS), 2016.

Quality assurance

The web questionnaire was programmed to be self-editing; that is, respondents were prompted to complete missing responses and to confirm or correct inconsistent responses.

All mail questionnaires were reviewed manually for consistency and for missing data. Calls were made to facilities to resolve unclear responses and to obtain missing data. After data entry, automated quality assurance reviews were conducted. The reviews incorporated the rules used in manual editing, plus consistency checks and checks for data outliers not readily identified by manual review.

Item non-response was minimized through editing and extensive follow-up. The item response rate for the 2016 N-SSATS averaged 98 percent across 219 separate items.

Facility Selection for the 2016 N-SSATS Report

Table 1.1. The N-SSATS questionnaire is deliberately sent to some facilities that are excluded from this report, as explained below. For this cycle, 233 of the 14,632 questionnaire respondents provided information but were deemed out of the scope of this report and excluded from the analyses presented here. The excluded facilities and reasons for exclusion fell into three categories:

● 112 facilities were halfway houses that did not provide substance abuse treatment. These facilities were included in the survey so that they could be listed in the Directory and SAMHSA's Behavioral Health Services Treatment Facility Locator.

● 94 facilities were solo practitioners. I-BHS and N-SSATS are designed to include facilities rather than individuals. Solo practitioners are listed and surveyed only if a state substance abuse agency explicitly requests that they be included in the survey. The excluded solo practitioners had not been identified for inclusion by a state substance abuse agency.
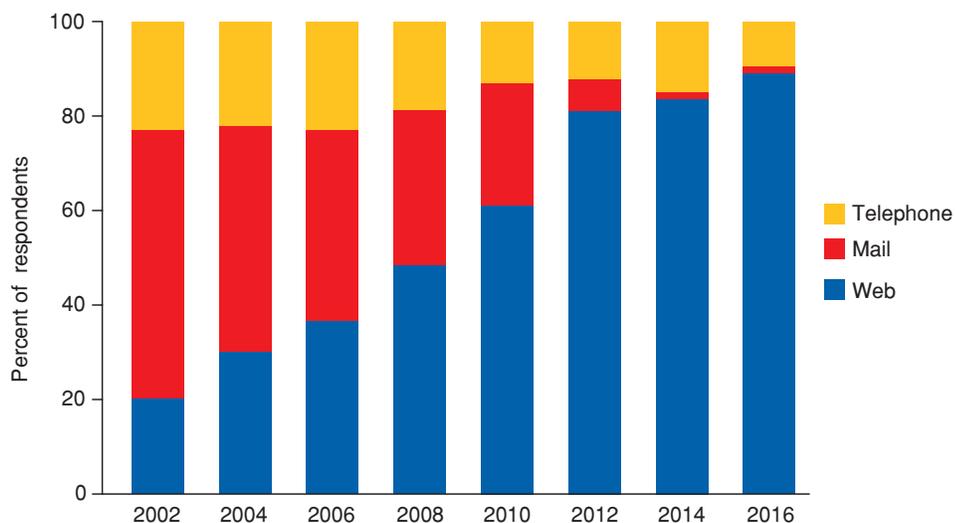
- 27 facilities were jails, prisons, or other organizations that treated incarcerated clients exclusively.

After the exclusion of 233 out-of-scope facilities, 14,399 eligible respondent facilities remained to be included in the 2016 N-SSATS report.

Survey Response Mode

Figure 1. The proportion of facilities using the web survey to respond to N-SSATS has increased steadily since introduction of the option in 2002. The percentage of facilities responding via the web increased from 20 percent in 2002 to 89 percent in 2016. Mail response declined from 57 percent in 2002 to 1 percent in 2016. Telephone response, which represents follow-up of facilities that had not responded by mail or web, also declined, from 23 percent in 2002 to 9 percent in 2016.

Figure 1. Survey Response Mode: 2002-2016

SOURCE: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration, National Survey of Substance Abuse Treatment Services (N-SSATS), 2002-2016.

Data Considerations and Limitations

As with any data collection effort, certain procedural considerations and data limitations must be taken into account when interpreting data from the 2016 N-SSATS.

- N-SSATS attempts to obtain responses from all known treatment facilities, but it is a voluntary survey. There was no adjustment for the 9 percent facility non-response.

- N-SSATS is a point-prevalence survey. It provides information on the substance abuse treatment system and its clients on the reference date. Client counts reported do not represent annual totals. Rather, N-SSATS provides a "snapshot" of substance abuse treatment facilities and clients on an average day.

- Multiple responses were allowed for certain variables (e.g., services provided and specialized programs). Tabulations of these variables include the total number of facilities reporting each response.

Terminology

Facility operation indicates the type of entity responsible for the operation of the facility:

- Private for-profit
- Private non-profit
- Government
  - Local, county, or community
  - State
  - Federal (Dept. of Veterans Affairs, Dept. of Defense, Indian Health Service, among others)
  - Tribal

Clients in treatment were defined as:

- Hospital inpatient and residential (non-hospital) clients receiving substance abuse treatment services at the facility on March 31, 2016; and
- Outpatient clients who were seen at the facility for a substance abuse treatment or detoxification service at least once during the month of March 2016, and who were still enrolled in treatment on March 31, 2016.

Type of care indicates the services the facility offers:

- Outpatient
  - Regular
  - Intensive
  - Outpatient day treatment or partial hospitalization
  - Outpatient detoxification
  - Outpatient methadone/buprenorphine maintenance or extended-release, injectable, naltrexone/Vivitrol® treatment
- Residential (non-hospital)
  - Short-term (30 days or less)
  - Long-term (more than 30 days)
  - Detoxification
- Hospital inpatient
  - Inpatient detoxification
  - Inpatient treatment

For more information about the 2016 N-SSATS, including data tables, see:
http://samhsa.gov/data/substance-abuse-facilities-data-nssats

N-SSATS Background

Survey History

N-SSATS has evolved from national survey efforts begun in the 1970s by the National Institute on Drug Abuse (NIDA) to measure the scope and use of drug abuse treatment services in the United States. The sixth of these surveys, conducted in 1976, introduced the data elements and format that have formed the core of subsequent surveys. These include organizational focus, service orientation, services available, clients in treatment by type of care, and hospital inpatient/residential capacity. The 1976 survey, called the National Drug Abuse Treatment Utilization Survey, was repeated in 1977 and 1978.

In 1979, the National Institute on Alcohol Abuse and Alcoholism (NIAAA) became a cosponsor of the survey, alcoholism treatment facilities were added, and the study was renamed the National Drug and Alcoholism Treatment Utilization Survey. This survey was repeated in 1980 and 1982. In 1984, a one-page version called the National Alcoholism and Drug Abuse Program Inventory was used. In 1987, the full version of the survey was reinstated and renamed the National Drug and Alcoholism Treatment Unit Survey (NDATUS). NDATUS was conducted annually from 1989 to 1993.

In 1992, with the creation of SAMHSA, responsibility for conducting the survey shifted to SAMHSA's Office of Applied Studies (now the Center for Behavioral Health Statistics and Quality). The survey was redesigned, and it was conducted annually as the Uniform Facility Data Set (UFDS) survey from 1995 to 1998. During these years, the survey was conducted by mail with telephone follow-up of non-respondents. The 1999 survey year was a transition year during which the survey was redesigned and an abbreviated telephone survey of treatment facilities was conducted. In 2000, a redesigned full mail survey was reinstated with telephone follow-up; it was renamed the National Survey of Substance Abuse Treatment Services (N-SSATS). The reference date for the annual survey had always been the end of September or beginning of October. After the 2000 survey, the reference date was changed to the end of March, and no survey was conducted during 2001.

In 2000, the use of an Internet-based questionnaire was tested; beginning in 2002, all facilities were offered the opportunity to respond via the Internet.

N-SSATS in the Context of the Behavioral Health Services Information System (BHSIS)

N-SSATS is one of the three components of SAMHSA's Behavioral Health Services Information System, or BHSIS (formerly the Drug and Alcohol Services Information System, or DASIS). The core of BHSIS is the Inventory of Behavioral Health Services, or I-BHS (until recently called the Inventory of Substance Abuse Treatment Services, or I-SATS). I-BHS is a continuously updated, comprehensive listing of all known substance abuse treatment facilities and mental health treatment. The other substance abuse component of BHSIS is the Treatment Episode Data Set (TEDS), a client-level database of admissions to and discharges from substance abuse treatment. Together, the components provide national- and state-level information on the numbers and characteristics of

individuals admitted to alcohol and drug treatment programs and describe the facilities that deliver care to those individuals.

I-BHS is the list frame for N-SSATS. Facilities in I-BHS fall into two general categories and are distinguished by the relationship of the facility to its state substance abuse agency. These categories are described below.

Treatment facilities approved by state substance abuse agencies

The largest group of facilities (11,350 in 2016) includes facilities that are licensed, certified, or otherwise approved by the state substance abuse agency to provide substance abuse treatment. State BHSIS representatives maintain this segment of I-BHS by reporting new facilities, closures, and address changes to SAMHSA. Some facilities are not licensed, certified, or otherwise approved by the state agency. Some private for-profit facilities fall into this category. The approved facility group also includes programs operated by federal agencies—the Department of Veterans Affairs (VA), the Department of Defense, the Indian Health Service—and opioid treatment programs certified by SAMHSA. I-BHS records for federally-operated facilities are updated annually through lists provided by these agencies.

Treatment facilities not approved by state substance abuse agencies

Treatment facilities not approved by state substance abuse agencies (3,049 in 2016) represent SAMHSA's efforts since the mid-1990s to make I-BHS as comprehensive as possible by including treatment facilities that state substance abuse agencies, for a variety of reasons, do not fund, license, or certify. Many of these facilities are private for-profit, small group practices, or hospital-based programs. Most of them are identified through periodic screening of alternative source databases. (See *Special efforts to improve survey coverage* below.) State substance abuse agencies are given the opportunity to review these facilities and to add them to the state agency-approved list, if appropriate.

Survey Coverage

The use of I-BHS as the list frame for N-SSATS imposes certain constraints related to the unit of response and the scope of facilities included. In addition, the expansion of I-BHS in recent years to provide a more complete enumeration of substance abuse treatment facilities means that year-to-year comparisons of the numbers of facilities reporting to N-SSATS must be interpreted with caution.

Unit of response

N-SSATS is designed to collect data from each physical location where treatment services are provided. Accordingly, SAMHSA requests that state substance abuse agencies use the point of delivery of service (i.e., physical location) as the defining factor for a facility. Because of the different state administrative systems, however, there are some inconsistencies in implementation. For example, in some states, multiple treatment programs (e.g., detoxification, residential, and outpatient) at the same address and under the same management have separate state licenses. These are treated as separate by the state substance abuse agency, and are given separate I-BHS ID numbers. In other states, multiple sites are included as a single entity under a parent or administrative unit. In many of these cases, individual sites can report services data in N-SSATS, but client data are available only at a higher administrative level. Beginning in 1995, efforts have been made to identify

facility networks and to eliminate duplicate reporting by networks. For most facilities, reporting level remains consistent from year to year. However, beginning in 1998, an emphasis was placed on collecting minimum information from all physical locations, and this has resulted in an increase in the number of facilities.

Special efforts to improve survey coverage

The great majority of treatment facilities in I-BHS are administratively monitored by state substance abuse agencies. Therefore, the scope of facilities included in I-BHS is affected by differences in state systems of licensure, certification, accreditation, and the disbursement of public funds. For example, some state substance abuse agencies regulate private facilities and individual practitioners while others do not. In some states, hospital-based substance abuse treatment facilities are not licensed through the state substance abuse agency.

To address these differences, SAMHSA conducted a large-scale effort during 1995 and 1996 to identify substance abuse treatment facilities that, for a variety of reasons, were not on the inventory. About 15 source lists were examined, and facilities not on the inventory were contacted to ascertain whether or not they provided substance abuse treatment. As expected, this yielded a number of hospital-based and small private facilities that were not on the inventory. (These facilities were surveyed in 1995 and 1996, but they were not included in the published results of the survey until 1997.) Analysis of the results of this effort led to similar but more targeted updates before subsequent surveys. Potential new facilities are identified using data from the American Business Index, the annual American Hospital Association survey, and SAMHSA's National Mental Health Services Survey, the source lists that yielded the most new facilities in 1995 and 1996. Survey participants, who are asked to report all of the treatment facilities in their administrative networks, also identify additional facilities during the survey itself. All newly identified facilities are initially included as not approved by the state substance abuse agency. State substance abuse agencies are given the opportunity to review these facilities and to add them to the state agency-approved list, if appropriate.

Expansion of survey coverage to include all sites within networks at which treatment was provided yielded a net increase of about 2,600 facilities between 1997 and 1998. These additions were not necessarily new facilities, but were facilities not previously included in the survey as separate sites. Between 2002 and 2016, the number of facilities eligible for inclusion in this report varied between 13,339 and 14,399. The total number of facilities eligible however, does not necessarily reflect their composition. There was significant turnover as facilities closed and others opened.

Data collection

Until 1996, state substance abuse agencies distributed and collected the facility survey forms. Beginning in 1996, data collection was centralized; since that time, SAMHSA has mailed survey forms directly to and collected forms directly from the facilities and has conducted follow-up telephone interviews with the facility director or his/her designee. In 2000, SAMHSA introduced an online trial web version of the questionnaire for a few facilities in addition to the hard copy questionnaire. The web version of the questionnaire was fully implemented in 2002. The proportion of facilities using the web survey to respond to N-SSATS has increased steadily since its full inception in 2002.

Non-response

Beginning in 1992, SAMHSA expanded efforts to obtain information from non-responding facilities. A representative sample of non-respondents was contacted and administered an abbreviated version of the survey instrument via telephone. In 1993 and later years, this effort was extended to all non-responding facilities. In 1997, a series of measures was introduced to enhance the survey response rate. These included advance notification and improved methods for updating address and contact information. Between 2004 and 2016, use of these methods and intensive telephone follow-up resulted in an annual follow-up rate (i.e., facilities in the sample either completed the survey or were determined to be closed or otherwise ineligible) of 92 to 96 percent. In 2016, the final response rate, counting eligible facilities, was 91.4 percent.

Exclusions

In 1997, facilities offering only DUI/DWI programs were excluded; these facilities were reinstated in 1998.

Facilities operated by the Bureau of Prisons (BOP) were excluded from the 1997 survey and subsequent surveys because SAMHSA conducted a separate survey of correctional facilities.[3] During that survey, it was discovered that jails, prisons, and other organizations treating incarcerated persons only were poorly enumerated on the inventory. Beginning in 1999, these facilities were identified during the survey and excluded from analyses and public use data files.

I-BHS and N-SSATS are designed to include specialty substance abuse treatment facilities rather than individuals. Solo practitioners are listed on I-BHS and surveyed in N-SSATS only if the state substance abuse agency explicitly requests that they be included.

Beginning in 2000, halfway houses that did not provide substance abuse treatment were included on the inventory and in N-SSATS so that they could be listed in the *National Directory of Drug and Alcohol Abuse Treatment Programs* and on the Locator (http://findtreatment.samhsa.gov). These facilities are excluded from analyses and public use data files.

Changes in Survey Content

Since 1992, SAMHSA has made adjustments each year to the survey design, both to minimize non-response and to include areas of emerging interest. For example, questions on the number of clients in treatment receiving buprenorphine were added in 2004. Questions about clinical/therapeutic methods, standard practices, and Access to Recovery grants were added in 2007. Questions about facility smoking policy were added in 2011; questions about outpatient facility operating capacity were modified in 2012; questions about extended-release injectable naltrexone (Vivitrol®) as a pharmacotherapy were added in 2012; and questions about work activity and means to accomplish them, as well as the question asking for client counts of those prescribed extended-release injectable naltrexone (Vivitrol®), were added in 2013.

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[3]   Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality, formerly Office of Applied Studies. *Substance Abuse Treatment in Adult and Juvenile Correctional Facilities: Findings from the Uniform Facility Data Set 1997 Survey of Correctional Facilities.* Drug and Alcohol Services Information System Series: S-9. DHHS Publication No. (SMA) 00-3380. Rockville, MD, 2000.

There have also been changes within content areas. For example, in response to concerns about over-reporting of programs or groups for specific client types, the survey question was revised in 2003 to distinguish between those facilities that accepted specific client types and those facilities that offered specially designed programs or groups for that client type. As a result, the number and proportion of facilities offering programs or groups for each of the specified client types decreased. Surveys from 2003 and later are believed to more accurately represent the number and proportions of facilities providing programs or groups for the specified client types. In addition, over time more categories have been added to the specific client types (e.g., persons who have experienced trauma, active duty military, and members of military families in 2012 and young adults, persons who have experienced sexual abuse, and persons who have experienced intimate partner violence, domestic violence in 2013). Because of the increase in client types, the question was split in 2013. The portion asking if specific client types were served was limited to adolescents, adult women, and adult men. In addition, programs or groups were described as "specifically tailored." In 2014, the first part of the question was revised again to collect another level of detail (i.e., the age range of males and females served, if any). The client types of adolescents, adult women, and adult men were added back to the second part of the question.

Starting in 2013, the full questionnaire alternates with a different version of the questionnaire. This alternate questionnaire, first introduced in 2014, collects the facility, program, and services information that are needed to update the Behavioral Health Treatment Services Locator. It omits Section B, which includes the client counts. Other changes to the 2014 questionnaire include: the primary focus question, which was dropped from the 2013 questionnaire, was reinstated and the question asking if a facility operates an opioid treatment program (OTP) was revised—the informational bullets describing OTPs were reworded and the response categories were more explicit about whether the facility operates an OTP and whether or not methadone and/or buprenorphine are used. In 2015, the OTP question was again revised to ask facilities how they treat opioid addiction; the responses categories were even more specific about how they used or did not use methadone, buprenorphine, or extended-release injectable naltrexone (Vivitrol®) and whether the facility was a federally-certified OTP.

In the 2016 alternate questionnaire, modified client counts were reinstated. Because of the limited data, client counts could not be unrolled. Questions on paid and unpaid workforce were also added to the 2016 questionnaire, but these data were not included in the report.

FREQUENCIES

Note: The number in parentheses that follows each variable's headline description, e.g. "(Q.7)," denotes the corresponding question and response in the survey instrument from which the variable is drawn.

CASEID: Case identification number

Program generated case (record) identifier.

Variable type: Numeric

STATE: State abbreviations

Value	Label	Frequency	%
AK	Alaska	94	0.7%
AL	Alabama	136	0.9%
AR	Arkansas	113	0.8%
AZ	Arizona	358	2.5%
CA	California	1,430	9.9%
CO	Colorado	399	2.8%
CT	Connecticut	224	1.6%
DC	District of Columbia	34	0.2%
DE	Delaware	47	0.3%
FL	Florida	716	5.0%
FM	Fed States of Micronesia	1	0.0%
GA	Georgia	314	2.2%
GU	Guam	4	0.0%
HI	Hawaii	174	1.2%
IA	Iowa	163	1.1%
ID	Idaho	143	1.0%
IL	Illinois	675	4.7%
IN	Indiana	265	1.8%
KS	Kansas	201	1.4%
KY	Kentucky	363	2.5%
LA	Louisiana	157	1.1%
MA	Massachusetts	355	2.5%
MD	Maryland	402	2.8%
ME	Maine	229	1.6%
MI	Michigan	479	3.3%
MN	Minnesota	370	2.6%
MO	Missouri	286	2.0%
MP	MP	1	0.0%
MS	Mississippi	95	0.7%
MT	Montana	64	0.4%
NC	North Carolina	489	3.4%
ND	North Dakota	60	0.4%
NE	Nebraska	136	0.9%
NH	New Hampshire	64	0.4%
NJ	New Jersey	371	2.6%
NM	New Mexico	154	1.1%
NV	Nevada	80	0.6%
NY	New York	922	6.4%
OH	Ohio	406	2.8%

STATE: State abbreviations

Value	Label	Frequency	%
OK	Oklahoma	204	1.4%
OR	Oregon	223	1.5%
PA	Pennsylvania	528	3.7%
PR	Puerto Rico	141	1.0%
PW	Rep of Palau	1	0.0%
RI	Rhode Island	52	0.4%
SC	South Carolina	114	0.8%
SD	South Dakota	62	0.4%
TN	Tennessee	227	1.6%
TX	Texas	488	3.4%
UT	Utah	235	1.6%
VA	Virginia	229	1.6%
VI	Virgin Islands	3	0.0%
VT	Vermont	46	0.3%
WA	Washington	428	3.0%
WI	Wisconsin	280	1.9%
WV	West Virginia	106	0.7%
WY	Wyoming	58	0.4%
	Total	*14,399*	*100%*

Variable type: Character

DETOX: Offer detoxification (Q.1)

Value	Label	Frequency	%
0	No	11,723	81.4%
1	Yes	2,676	18.6%
	Total	14,399	100%

- Minimum: 0
- Maximum: 1

Variable type: Numeric

TREATMT: Offer substance abuse treatment (Q.1)

Value	Label	Frequency	%
0	No	182	1.3%
1	Yes	14,217	98.7%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

OWNERSHP: Ownership (Q.7)

Value	Label	Frequency	%
1	Private-for-profit org	5,101	35.4%
2	Private non-profit org	7,662	53.2%
3	State govt	340	2.4%
4	Local, county, or community govt	706	4.9%
5	Tribal govt	258	1.8%
6	Federal govt	332	2.3%
	Total	*14,399*	*100%*

• Minimum: 1
• Maximum: 6

Variable type: Numeric

FEDOWN: Federal government agency (Q.7a)

Value	Label	Frequency	%
1	Dept of Veterans Affairs	211	1.5%
2	Dept of Defense	87	0.6%
3	Indian Health Service	31	0.2%
4	Other	3	0.0%
.	Logical skip	14,067	97.7%
	Total	*14,399*	*100%*

• Minimum: 1
• Maximum: 4

Variable type: Numeric

HOSPITAL: Located in/operated by hospital (Q.8)

Value	Label	Frequency	%
0	No	13,012	90.4%
1	Yes	1,386	9.6%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

LOCS: Hospital type (Q.8a)

Value	Label	Frequency	%
1	General hospital (including VA)	993	6.9%
2	Psychiatric hospital	333	2.3%
3	Other specialty hospital	55	0.4%
.	Logical skip	13,013	90.4%
.M	Missing	5	0.0%
	Total	*14,399*	*100%*

• Minimum: 1
• Maximum: 3

Variable type: Numeric

ASSESSMENT: Number of assessment services offered (Q.10)

Value	Label	Frequency	%
0	0 assessment services offered	169	1.2%
1	1 assessment service offered	341	2.4%
2	2 assessment services offered	953	6.6%
3	3 assessment services offered	1,619	11.2%
4	4 assessment services offered	2,486	17.3%
5	5 assessment services offered	3,209	22.3%
6	6 assessment services offered	3,186	22.1%
7	7 assessment services offered	2,435	16.9%
.	Logical skip	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 7

Variable type: Numeric

TESTING: Number of testing services offered (Q.10)

Value	Label	Frequency	%
0	0 testing services offered	1,547	10.7%
1	1 testing service offered	2,574	17.9%
2	2 testing services offered	4,540	31.5%
3	3 testing services offered	1,489	10.3%
4	4 testing services offered	759	5.3%
5	5 testing services offered	788	5.5%
6	6 testing services offered	863	6.0%
7	7 testing services offered	1,839	12.8%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 7

Variable type: Numeric

TRANSITION: Number of transition services offered (Q.10)

Value	Label	Frequency	%
0	0 transition services offered	190	1.3%
1	1 transition service offered	2,195	15.2%
2	2 transition services offered	12,012	83.4%
.	Logical skip	2	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 2

Variable type: Numeric

ANCILLARY: Number of ancillary services offered (Q.10)

Value	Label	Frequency	%
0	0 ancillary services offered	50	0.3%
1	1 ancillary service offered	307	2.1%
2	2 ancillary services offered	534	3.7%
3	3 ancillary services offered	692	4.8%
4	4 ancillary services offered	825	5.7%
5	5 ancillary services offered	902	6.3%
6	6 ancillary services offered	1,051	7.3%
7	7 ancillary services offered	1,042	7.2%
8	8 ancillary services offered	1,107	7.7%
9	9 ancillary services offered	1,122	7.8%
10	10 ancillary services offered	1,222	8.5%
11	11 ancillary services offered	1,201	8.3%
12	12 ancillary services offered	1,089	7.6%
13	13 ancillary services offered	994	6.9%
14	14 ancillary services offered	909	6.3%
15	15 ancillary services offered	653	4.5%
16	16 ancillary services offered	434	3.0%
17	17 ancillary services offered	174	1.2%
18	18 ancillary services offered	87	0.6%
19	19 ancillary services offered	3	0.0%
.	Logical skip	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 19

Variable type: Numeric

OTHER_SRVC: Number of other services offered (Q.10)

Value	Label	Frequency	%
0	0 other services offered	9,505	66.0%
1	1 other service offered	2,638	18.3%
2	2 other services offered	807	5.6%
3	3 other services offered	1,442	10.0%
.	Logical skip	7	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 3

Variable type: Numeric

SRVC71: Pharmacotherapies - Naltrexone (Q.10)

Value	Label	Frequency	%
0	No	10,597	73.6%
1	Yes	3,797	26.4%
.M	Missing	5	0.0%
	Total	14,399	100%

- Minimum: 0
- Maximum: 1

Variable type: Numeric

SRVC108: Pharmacotherapies - Vivitrol® (Q.10)

Value	Label	Frequency	%
0	No	11,366	78.9%
1	Yes	3,028	21.0%
.M	Missing	5	0.0%
	Total	14,399	100%

• Minimum: 0
• Maximum: 1

Variable type: Numeric

SRVC85: Pharmacotherapies - Methadone (Q.10)

Value	Label	Frequency	%
0	No	12,613	87.6%
1	Yes	1,781	12.4%
.M	Missing	5	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

SRVC87: Pharmacotherapies - Buprenorphine with naloxone (Suboxone) (Q.10)

Value	Label	Frequency	%
0	No	10,709	74.4%
1	Yes	3,685	25.6%
.M	Missing	5	0.0%
	Total	14,399	100%

• Minimum: 0
• Maximum: 1

Variable type: Numeric

SRVC86: Pharmacotherapies - Buprenorphine without naloxone (Q.10)

Value	Label	Frequency	%
0	No	12,028	83.5%
1	Yes	2,366	16.4%
.M	Missing	5	0.0%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

OTP: Operate an opioid treatment program (Q.11)

Value	Label	Frequency	%
0	No	13,089	90.9%
1	Yes	1,308	9.1%
.D	Don't know	1	0.0%
.R	Refused	1	0.0%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

OTPALL: All clients in OTP (Q.11a)

Value	Label	Frequency	%
0	No	2,676	18.6%
1	Yes	1,062	7.4%
.	Logical skip	10,661	74.0%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

OPIOIDMAINT: Maintenance services with methadone or buprenorphine (Q.11b)

Value	Label	Frequency	%
0	No	1,120	7.8%
1	Yes	2,617	18.2%
.	Logical skip	10,661	74.0%
.R	Refused	1	0.0%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

OPIOIDWDRAW: Maintenance services with medically supervised withdrawal after pre-determined time (Q.11b)

Value	Label	Frequency	%
0	No	2,528	17.6%
1	Yes	1,209	8.4%
.	Logical skip	10,661	74.0%
.R	Refused	1	0.0%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

OPIOIDDETOX: Detoxification services with methadone or burprenorphine (Q.11b)

Value	Label	Frequency	%
0	No	2,141	14.9%
1	Yes	1,596	11.1%
.	Logical skip	10,661	74.0%
.R	Refused	1	0.0%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

OPIOIDNAL: Relapse prevention with naltrexone (Vivitrol®) (Q.11b)

Value	Label	Frequency	%
0	No	1,867	13.0%
1	Yes	1,870	13.0%
.	Logical skip	10,661	74.0%
.R	Refused	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

COMPSAT: Use frequency of computerized substance abuse treatment (Q.13)

Value	Label	Frequency	%
1	Never	9,211	64.0%
2	Rarely	1,884	13.1%
3	Sometimes	1,340	9.3%
4	Always/often	760	5.3%
5	Approach unfamiliar	492	3.4%
.M	Missing	712	4.9%
	Total	*14,399*	*100%*

• Minimum: 1
• Maximum: 5

Variable type: Numeric

DUI_DWI: Program for DUI/DWI/other offenders (Q.14)

Value	Label	Frequency	%
0	No	10,521	73.1%
1	Yes	3,868	26.9%
.M	Missing	10	0.1%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

ONLYDUI: All substance abuse treatment clients identifying as DUI/DWI offenders (Q.14a)

Value	Label	Frequency	%
0	No	3,780	26.3%
1	Yes	86	0.6%
.	Logical skip	10,531	73.1%
.M	Missing	2	0.0%
	Total	14,399	100%

• Minimum: 0
• Maximum: 1

Variable type: Numeric

SIGNLANG: Treatment in sign language - Y/N (Q.15)

Value	Label	Frequency	%
0	No	9,871	68.6%
1	Yes	4,521	31.4%
.M	Missing	7	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG: Treatment in language other than English - Y/N (Q.16)

Value	Label	Frequency	%
0	No	7,472	51.9%
1	Yes	6,926	48.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

LANG16: Do staff counselors provide substance abuse treatment in Spanish (Q.16a1)

Value	Label	Frequency	%
0	No	276	1.9%
1	Yes	3,515	24.4%
.	Logical skip	10,607	73.7%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG1: Treatment in Hopi (Q.16b)

Value	Label	Frequency	%
0	No	844	5.9%
1	Yes	10	0.1%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG2: Treatment in Lakota (Q.16b)

Value	Label	Frequency	%
0	No	836	5.8%
1	Yes	18	0.1%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG3: Treatment in Navajo (Q.16b)

Value	Label	Frequency	%
0	No	809	5.6%
1	Yes	45	0.3%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG21: Treatment in Ojibwa (Q.16b)

Value	Label	Frequency	%
0	No	842	5.8%
1	Yes	12	0.1%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG4: Treatment in Yupik (Q.16b)

Value	Label	Frequency	%
0	No	841	5.8%
1	Yes	13	0.1%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

LANG5: Treatment in other American Indian/Alaska Native language (Q.16b)

Value	Label	Frequency	%
0	No	818	5.7%
1	Yes	37	0.3%
.	Logical skip	13,544	94.1%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

LANG6: Treatment in Arabic (Q.16b)

Value	Label	Frequency	%
0	No	779	5.4%
1	Yes	75	0.5%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG7: Treatment in Chinese (Q.16b)

Value	Label	Frequency	%
0	No	780	5.4%
1	Yes	74	0.5%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG8: Treatment in Creole (Q.16b)

Value	Label	Frequency	%
0	No	737	5.1%
1	Yes	117	0.8%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG24: Treatment in Farsi (Q.16b)

Value	Label	Frequency	%
0	No	794	5.5%
1	Yes	60	0.4%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG9: Treatment in French (Q.16b)

Value	Label	Frequency	%
0	No	723	5.0%
1	Yes	131	0.9%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG10: Treatment in German (Q.16b)

Value	Label	Frequency	%
0	No	790	5.5%
1	Yes	64	0.4%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG22: Treatment in Greek (Q.16b)

Value	Label	Frequency	%
0	No	835	5.8%
1	Yes	19	0.1%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG25: Treatment in Hebrew (Q.16b)

Value	Label	Frequency	%
0	No	824	5.7%
1	Yes	30	0.2%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG26: Treatment in Hindi (Q.16b)

Value	Label	Frequency	%
0	No	806	5.6%
1	Yes	48	0.3%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG11: Treatment in Hmong (Q.16b)

Value	Label	Frequency	%
0	No	811	5.6%
1	Yes	43	0.3%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG19: Treatment in Italian (Q.16b)

Value	Label	Frequency	%
0	No	798	5.5%
1	Yes	56	0.4%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG23: Treatment in Japanese (Q.16b)

Value	Label	Frequency	%
0	No	814	5.7%
1	Yes	40	0.3%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG12: Treatment in Korean (Q.16b)

Value	Label	Frequency	%
0	No	805	5.6%
1	Yes	49	0.3%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG13: Treatment in Polish (Q.16b)

Value	Label	Frequency	%
0	No	743	5.2%
1	Yes	111	0.8%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG14: Treatment in Portuguese (Q.16b)

Value	Label	Frequency	%
0	No	740	5.1%
1	Yes	114	0.8%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG15: Treatment in Russian (Q.16b)

Value	Label	Frequency	%
0	No	683	4.7%
1	Yes	171	1.2%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG20: Treatment in Tagalog (Q.16b)

Value	Label	Frequency	%
0	No	799	5.5%
1	Yes	55	0.4%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG17: Treatment in Vietnamese (Q.16b)

Value	Label	Frequency	%
0	No	797	5.5%
1	Yes	57	0.4%
.	Logical skip	13,544	94.1%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

LANG18: Treatment in other language (Q.16b)

Value	Label	Frequency	%
0	No	713	5.0%
1	Yes	142	1.0%
.	Logical skip	13,544	94.1%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

SRVC30: Specific program/group for adolescents (Q.17a)

Value	Label	Frequency	%
0	No	10,518	73.0%
1	Yes	3,858	26.8%
.M	Missing	23	0.2%
	Total	14,399	100%

• Minimum: 0
• Maximum: 1

Variable type: Numeric

SRVC34: Specific program/group for adult women (Q.17a)

Value	Label	Frequency	%
0	No	7,694	53.4%
1	Yes	6,682	46.4%
.M	Missing	23	0.2%
	Total	14,399	100%

• Minimum: 0
• Maximum: 1

Variable type: Numeric

SRVC33: Specific program/group for pregnant/postpartum women (Q.17a)

Value	Label	Frequency	%
0	No	11,390	79.1%
1	Yes	2,986	20.7%
.M	Missing	23	0.2%
	Total	14,399	100%

- Minimum: 0
- Maximum: 1

Variable type: Numeric

SRVC64: Specific program/group for adult men (Q.17a)

Value	Label	Frequency	%
0	No	8,023	55.7%
1	Yes	6,353	44.1%
.M	Missing	23	0.2%
	Total	14,399	100%

- Minimum: 0
- Maximum: 1

Variable type: Numeric

SRVC63: Specific program/group for seniors (Q.17a)

Value	Label	Frequency	%
0	No	11,601	80.6%
1	Yes	2,775	19.3%
.M	Missing	23	0.2%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

SRVC62: Specific program/group for clients who identified as lesbian/gay/bisexual/trans (LGBT) (Q.17a)

Value	Label	Frequency	%
0	No	11,801	82.0%
1	Yes	2,575	17.9%
.M	Missing	23	0.2%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

SRVC113: Specific program/group for veterans (Q.17a)

Value	Label	Frequency	%
0	No	11,730	81.5%
1	Yes	2,646	18.4%
.M	Missing	23	0.2%
	Total	14,399	100%

• Minimum: 0
• Maximum: 1

Variable type: Numeric

SRVC114: Specific program/group for active duty military (Q.17a)

Value	Label	Frequency	%
0	No	12,945	89.9%
1	Yes	1,431	9.9%
.M	Missing	23	0.2%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

SRVC115: Specific program/group for military families (Q.17a)

Value	Label	Frequency	%
0	No	12,766	88.7%
1	Yes	1,610	11.2%
.M	Missing	23	0.2%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

SRVC61: Specific program/group for criminal justice clients (Q.17a)

Value	Label	Frequency	%
0	No	9,522	66.1%
1	Yes	4,854	33.7%
.M	Missing	23	0.2%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

SRVC31: Specific program/group for co-occurring substance abuse and mental health disorder (Q.17a)

Value	Label	Frequency	%
0	No	7,627	53.0%
1	Yes	6,749	46.9%
.M	Missing	23	0.2%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

SRVC32: Specific program/group for persons with HIV/AIDS (Q.17a)

Value	Label	Frequency	%
0	No	11,922	82.8%
1	Yes	2,454	17.0%
.M	Missing	23	0.2%
	Total	14,399	100%

• Minimum: 0
• Maximum: 1

Variable type: Numeric

SRVC116: Specific program/group for persons who have experienced trauma (Q.17a)

Value	Label	Frequency	%
0	No	9,207	63.9%
1	Yes	5,169	35.9%
.M	Missing	23	0.2%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

CTYPE4: Hospital inpatient substance abuse care offered (Q.18)

Value	Label	Frequency	%
0	No	13,648	94.8%
1	Yes	751	5.2%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

CTYPEHI1: Hospital inpatient detoxification care offered (Q.18a)

Value	Label	Frequency	%
0	No	90	0.6%
1	Yes	661	4.6%
.	Logical skip	13,648	94.8%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

CTYPEHI2: Hospital inpatient treatment care offered (Q.18a)

Value	Label	Frequency	%
0	No	201	1.4%
1	Yes	550	3.8%
.	Logical skip	13,648	94.8%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

CTYPE7: Non-hospital residential substance abuse care offered (Q.19)

Value	Label	Frequency	%
0	No	10,930	75.9%
1	Yes	3,469	24.1%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

CTYPERC1: Non-hospital residential detoxification care offered (Q.19a)

Value	Label	Frequency	%
0	No	2,515	17.5%
1	Yes	954	6.6%
.	Logical skip	10,930	75.9%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

CTYPERC3: Non-hospital residential short-term treatment offered (Q.19a)

Value	Label	Frequency	%
0	No	1,653	11.5%
1	Yes	1,816	12.6%
.	Logical skip	10,930	75.9%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

CTYPERC4: Non-hospital residential long-term treatment offered (Q.19a)

Value	Label	Frequency	%
0	No	655	4.5%
1	Yes	2,814	19.5%
.	Logical skip	10,930	75.9%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

CTYPE1: Any outpatient substance abuse care offered (Q.20)

Value	Label	Frequency	%
0	No	2,563	17.8%
1	Yes	11,836	82.2%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

CTYPE6: Outpatient detoxification care offered (Q.20a)

Value	Label	Frequency	%
0	No	10,475	72.7%
1	Yes	1,361	9.5%
.	Logical skip	2,563	17.8%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

CTYPEML: Outpatient methadone maintenance care offered (Q.20a)

Value	Label	Frequency	%
0	No	8,756	60.8%
1	Yes	3,079	21.4%
.	Logical skip	2,563	17.8%
.D	Don't know	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

CTYPEOP: Day treatment/partial hospital offered (Q.20a)

Value	Label	Frequency	%
0	No	9,946	69.1%
1	Yes	1,890	13.1%
.	Logical skip	2,563	17.8%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

CTYPE2: Intensive outpatient treatment offered (Q.20a)

Value	Label	Frequency	%
0	No	5,283	36.7%
1	Yes	6,553	45.5%
.	Logical skip	2,563	17.8%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

CTYPE3: Regular outpatient treatment offered (Q.20a)

Value	Label	Frequency	%
0	No	800	5.6%
1	Yes	11,036	76.6%
.	Logical skip	2,563	17.8%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

FEESCALE: Uses sliding fee scale (Q.24)

Value	Label	Frequency	%
0	No	5,852	40.6%
1	Yes	8,438	58.6%
.M	Missing	109	0.8%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

PAYASST: Offers no charge or free treatment (Q.25)

Value	Label	Frequency	%
0	No	7,744	53.8%
1	Yes	6,539	45.4%
.M	Missing	116	0.8%
	Total	14,399	100%

• Minimum: 0
• Maximum: 1

Variable type: Numeric

EARMARK: Receive any federal, state, county, or local funds (Q.25)

Value	Label	Frequency	%
0	No	6,315	43.9%
1	Yes	7,445	51.7%
.D	Don't know	533	3.7%
.M	Missing	106	0.7%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

REVCHK3: Free treatment to all clients (Q.27)

Value	Label	Frequency	%
0	No	13,689	95.1%
1	Yes	498	3.5%
.D	Don't know	212	1.5%
	Total	14,399	100%

- Minimum: 0
- Maximum: 1

Variable type: Numeric

REVCHK1: Accepts cash or self-payment (Q.26)

Value	Label	Frequency	%
0	No	1,423	9.9%
1	Yes	12,763	88.6%
.D	Don't know	213	1.5%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

REVCHK8: Accepts Medicare payments (Q.26)

Value	Label	Frequency	%
0	No	9,056	62.9%
1	Yes	4,917	34.1%
.D	Don't know	426	3.0%
	Total	14,399	100%

• Minimum: 0
• Maximum: 1

Variable type: Numeric

REVCHK5: Accepts Medicaid payments (Q.26)

Value	Label	Frequency	%
0	No	5,200	36.1%
1	Yes	8,873	61.6%
.D	Don't know	326	2.3%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

REVCHK10: Accepts state financed health insurance (Q.26)

Value	Label	Frequency	%
0	No	6,931	48.1%
1	Yes	6,567	45.6%
.D	Don't know	901	6.3%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

REVCHK15: Accepts federal military insurance (Q.26)

Value	Label	Frequency	%
0	No	8,457	58.7%
1	Yes	4,784	33.2%
.D	Don't know	1,158	8.0%
	Total	14,399	100%

- Minimum: 0
- Maximum: 1

Variable type: Numeric

REVCHK2: Accepts private health insurance (Q.26)

Value	Label	Frequency	%
0	No	4,268	29.6%
1	Yes	9,830	68.3%
.D	Don't know	301	2.1%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

REVCHK17: Accepts IHS/638 contract care funds (Q.26)

Value	Label	Frequency	%
0	No	9,812	68.1%
1	Yes	1,004	7.0%
.D	Don't know	3,583	24.9%
	Total	*14,399*	*100%*

- Minimum: 0
- Maximum: 1

Variable type: Numeric

HINUM: Total number of hospital inpatients - for OTP facilities (Q.18b)

Value	Label	Frequency	%
1	0-7	20	1.5%
2	8-15	10	0.8%
3	16-24	16	1.2%
4	25-44	18	1.4%
5	45+	17	1.3%
.	Logical skip	1,227	93.8%
	Total	*1,308*	*100%*

• Minimum: 1
• Maximum: 5

Variable type: Numeric

HINUM: Total number of hospital inpatients - for DUI_DWI facilities (Q.18b)

Value	Label	Frequency	%
1	0-4	5	0.1%
2	5-8	6	0.2%
3	9-15	7	0.2%
4	16-26	2	0.1%
5	27+	8	0.2%
.	Logical skip	3,709	99.3%
	Total	*3,737*	*100%*

• Minimum: 1
• Maximum: 5

Variable type: Numeric

HINUM: Total number of hospital inpatients - for non-OTP and non-DUI_DWI facilities (Q.18b)

Value	Label	Frequency	%
1	0-4	110	1.2%
2	5-8	58	0.6%
3	9-14	87	0.9%
4	15-26	99	1.1%
5	27+	82	0.9%
.	Logical skip	8,918	95.3%
	Total	*9,354*	*100%*

• Minimum: 1
• Maximum: 5

Variable type: Numeric

RCNUM: Total number of residential clients - for OTP facilities (Q.19b)

Value	Label	Frequency	%
1	0-16	19	1.5%
2	17-25	11	0.8%
3	26-40	19	1.5%
4	41-79	17	1.3%
5	80+	13	1.0%
.	Logical skip	1,229	94.0%
	Total	*1,308*	*100%*

• Minimum: 1
• Maximum: 5

Variable type: Numeric

RCNUM: Total number of residential clients - for DUI_DWI facilities (Q.19b)

Value	Label	Frequency	%
1	0-11	64	1.7%
2	12-18	57	1.5%
3	19-29	36	1.0%
4	30-50	45	1.2%
5	51+	43	1.2%
.	Logical skip	3,492	93.4%
	Total	*3,737*	*100%*

• Minimum: 1
• Maximum: 5

Variable type: Numeric

RCNUM: Total number of residential clients - for non-OTP and non-DUI_DWI facilities (Q.19b)

Value	Label	Frequency	%
1	0-10	700	7.5%
2	11-16	627	6.7%
3	17-24	476	5.1%
4	25-40	469	5.0%
5	41+	478	5.1%
.	Logical skip	6,603	70.6%
.D	Don't know	1	0.0%
	Total	*9,354*	*100%*

• Minimum: 1
• Maximum: 5

Variable type: Numeric

OPNUM: Total number of outpatient clients - for OTP facilities (Q.20b)

Value	Label	Frequency	%
1	0-126	189	14.4%
2	127-213	204	15.6%
3	214-315	215	16.4%
4	316-468	226	17.3%
5	469+	279	21.3%
.	Logical skip	195	14.9%
	Total	*1,308*	*100%*

• Minimum: 1
• Maximum: 5

Variable type: Numeric

OPNUM: Total number of outpatient clients - for DUI_DWI facilities (Q.20b)

Value	Label	Frequency	%
1	0-20	827	22.1%
2	21-40	631	16.9%
3	41-70	555	14.9%
4	71-134	538	14.4%
5	135+	557	14.9%
.	Logical skip	629	16.8%
	Total	*3,737*	*100%*

• Minimum: 1
• Maximum: 5

Variable type: Numeric

OPNUM: Total number of outpatient clients - for non-OTP and non-DUI_DWI facilities (Q.20b)

Value	Label	Frequency	%
1	0-13	1,422	15.2%
2	14-27	1,121	12.0%
3	28-51	1,052	11.2%
4	52-102	921	9.8%
5	103+	997	10.7%
.	Logical skip	3,839	41.0%
.D	Don't know	1	0.0%
.M	Missing	1	0.0%
	Total	*9,354*	*100%*

• Minimum: 1
• Maximum: 5

Variable type: Numeric

LOC5: Setting, halfway house (Q.28)

Value	Label	Frequency	%
0	No	13,065	90.7%
1	Yes	1,332	9.3%
.M	Missing	2	0.0%
	Total	14,399	100%

- Minimum: 0
- Maximum: 1

Variable type: Numeric

LICEN: Licensed/certified/accredited by hospital or state authority (Q.30)

Value	Label	Frequency	%
0	Not licensed, certified, or accredited by any of these organizations	1,069	7.4%
1	Licensed, certified, or accredited by any of these organizations	12,791	88.8%
.M	Missing	539	3.7%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric

ACCRED: Licensed/certified/accredited by JCAHO/CARF/NCQA/COA/HFAP (Q.30)

Value	Label	Frequency	%
0	Not licensed, certified, or accredited by any of these organizations	4,394	30.5%
1	Licensed, certified, or accredited by any of these organizations	7,115	49.4%
.M	Missing	2,890	20.1%
	Total	14,399	100%

• Minimum: 0
• Maximum: 1

Variable type: Numeric

SRVC75: Ancillary residential beds for children (Q.10)

Value	Label	Frequency	%
0	No	14,027	97.4%
1	Yes	371	2.6%
.M	Missing	1	0.0%
	Total	*14,399*	*100%*

• Minimum: 0
• Maximum: 1

Variable type: Numeric