



PROGRAM EVALUATION DIVISION

NORTH CAROLINA GENERAL ASSEMBLY

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DHHS Should Integrate State Substance Abuse Treatment Facilities into the Community-Based System and Improve Performance Management

Summary

North Carolina's public system for adult substance abuse treatment has two primary components—the community-based system and the state-operated Alcohol and Drug Abuse Treatment Centers (ADATCs). The community-based system is managed by nine Local Management Entities/Managed Care Organizations (LME/MCOs) that contract with providers throughout the State for an array of treatment services. Three state-operated ADATCs also provide inpatient treatment and expended over \$46 million in Fiscal Year 2013–14 to provide services. This report focuses on the provision of adult inpatient substance abuse treatment, examining how the ADATCs fit into the system and whether there is a more efficient or effective way for North Carolina to organize treatment services.

The three ADATCs operate semi-autonomously, resulting in operational and treatment differences among facilities. In addition, the ADATCs operate autonomously of the community-based treatment system. The operational silos that exist between the ADATCs and the community-based system challenge resource utilization, continuity of care, and information management.

Separation of the Alcohol and Drug Abuse Treatment Centers from the community-based system also limits North Carolina's ability to address service gaps, provide a seamless continuum of care, and manage cost. Integrating the ADATCs into the community-based system would allow LME/MCOs to more efficiently manage care at all levels by ensuring that individuals are placed at the most appropriate level of care.

The Division of Mental Health, Developmental Disabilities, and Substance Abuse Services (DMH/DD/SAS), which oversees the community-based treatment system, lacks an adequate performance management system to track long-term outcomes of substance abuse treatment. Indicators exist that DMH/DD/SAS could use to measure the effectiveness of treatment in North Carolina.

The General Assembly should integrate funding for the ADATCs into North Carolina's community-based substance abuse treatment system and require LME/MCOs to pay for and manage the utilization of services provided by the ADATCs. In addition, the General Assembly should direct DMH/DD/SAS to strengthen its performance management system for substance abuse treatment services by creating a plan to improve data collection and track long-term outcomes.