Child and Adolescent Integrated Behavioral Health Financial Map:

Contract Deliverable Summary

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This report was created by Beacon Health Options. However, the opinions, conclusions, and recommendations contained herein are solely those of Beacon Health Options and may not represent those of the DSS or DCF.

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Acknowledgements

- Children's Behavioral Health Plan Implementation Advisory Board
- Department of Children and Families (DCF)
- Department of Social Services (DSS)
- Beacon Health Options
- Child Health and Development Institute (CHDI)
- Connecticut Health Foundation

I. Background

Beacon Health Options

Beacon Health Options is uniquely qualified to lead the financial mapping effort. On a day-to-day basis, Beacon manages the behavioral health needs of youth and adults covered under Connecticut's Medicaid Program. In addition, and more germane to the financial mapping process, Beacon also gathers and reports on the utilization and expenditure information aimed at improving the behavioral health service system. Two major initiatives, both funded by separate grants, have made an integrated financial map possible.

IMPACCT & ASSERT

Beacon was instrumental in the financial mapping for the IMPACCT grant (IMProving Access, Continuing Care, and Treatment). IMPACCT was a grant provided by the Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Treatment (CSAT) under the State Youth Treatment Planning (SYT-P) discretionary funding portfolio to the Department of Children and Families (DCF). DCF used this funding to develop a comprehensive strategic plan to improve access to continuing care and treatment for substance use and/or co-occurring disorders for adolescents (ages 12-17, inclusive). The plan aligns and integrates efforts across state agencies and branches of government related to policy, practice and financing in support of improving access to treatment services, developing infrastructure for implementing continuing care services, and promoting evidence based approaches to treatment for youth. The IMPACCT financial report was one component of the comprehensive strategic plan. The Department of Children and Families contracted with Beacon to conduct the initial IMPACCT financial map.

In 2018, the Connecticut Department of Children and Families (DCF) received further funding from SAMHSA/CSAT to implement a comprehensive statewide strategic treatment and communications plan to improve treatment for adolescents and young adults (age 12-21) with substance use disorders with or without co-occurring mental health disorders. This project is known locally as ASSERT (AccesS, Screening and Engagement, Recovery Support, and Treatment). ASSERT's overall goal is to improve access to evidence-based substance use screening and treatments (EBPs), and recovery supports to increase engagement and retention in high quality care at all levels of need. As part of the ASSERT grant, an expanded and revised children and youth substance use disorder financial maps were a grant requirement. The Department of Children and Families contracted with Beacon to conduct the subsequent ASSERT financial map.

CONNECT II & CONNECT III

In 2014, the Connecticut Department of Children and Families was awarded a SAMHSA grant, CONNECT (Connecticut Network of Care Transformation), to bridge gaps in services and create an integrated behavioral health system of care for youth and families. As part of this integrated effort, Beacon was contracted to develop a multi-agency statewide financial map for behavioral health services as identified in the Children's Behavioral Health Plan prepared pursuant to Public Act 13-178. The results of the previously developed multi-agency financial map were submitted and approved by DCF in 2018.

In 2019, Connecticut was awarded a four-year sustainability grant (CONNECT III), which will continue to fund the expansion of the statewide, regional, and local network of care infrastructure and also partially funded the current integrated financial map.

Overall Purpose

The overall purpose of the integrated financial map for both the CONNECT and ASSERT grants is to:

- Identify current public spending and utilization patterns
- Monitor spend across time
- Inform development of a comprehensive financial plan
- Support financing of appropriate services and supports
- Support operationalizing current policy

In order to work towards a more integrated system, DCF decided to revise the financial map and for it to become an integrated analysis for both youth mental health and substance use disorder services provision.

Project Scope and Need

There were five major activities and several sub-activities that took place in order to develop an integrated financial map. Specifically, the main steps needed to develop an integrated financial map included:

1. **Data Collection & Specification**:
    a. Identify necessary sources, specifications, selected DCF programs, age parameters, demographics, and time periods for data extraction
    b. Revise the coding necessary to identify Medicaid behavioral health claims
    c. Revise the coding to identify levels of care from Medicaid paid claims
    d. Expand the age parameters from 12 – 17 to 3 – 21
    e. Retroactively apply the new coding mechanism to SFY'15 and SFY'16 (i.e., previous financial mapping iteration)
    f. Apply the newly developed coding mechanism to financial expenditures for SFY'17 and SFY'18
    g. Include only paid claims with a primary diagnosis of either mental health or substance use disorder.
    h. Include expenditures on continuously eligible and enrolled Medicaid children, adolescents, and emerging adults.
    i. Include age, gender, race, and Hispanic origin in the financial map to identify trends and utilization patterns by demographic groups.
2. **Data Cleaning**:
    a. Manipulate DCF raw program and financial data into a file structure that would allow for it to be merged with Medicaid data
    b. Merge 11 separate Excel files into 1 file which included expenditure data by program type and PIE[1] data by service
    c. Develop the necessary reference tables of provider names to allow for consistent naming convention and joining of tables.
    d. Develop and maintain a Level of Care claims reference table that allows Beacon to assign a clinically meaningful behavioral health level-of-care based upon a combination of industry standard claims codes, including, but not limited to, Revenue, Current Procedural Terminology (CPT), Healthcare Common Procedure Coding System (HCPCS), Provider Type and Specialty, Place of Service codes, and ICD-9/10 diagnoses.

[1] DCF's Provider Information Exchange

e. Develop the coding system categorization reference tables, utilizing the Children's Behavioral Health Plan framework and the Children's BH Rating Workgroup categorization system (see Figure 1. and Figure 2).
f. Develop the Gross Domestic Product (GDP) reference table that would be used to adjust expenditures for inflation.[2,3,4]

3. **Data Integration**:
   a. Develop SAS code to allow for integration of datasets
   b. Create a data structure which allows for both Medicaid administrative claims data and DCF data integrated into the same dataset (i.e., same variable name, format, & variable order).
4. **Data Analysis:**
   a. Aggregate data by categorization system and demographic variables and levels of care for total expenditure, total adjusted expenditure using GDP, and identify rate of expenditure.
5. **Data Reporting**:
   a. Visualize the data in a user-friendly format using appropriate bar charts, line graphs, and tables.
   b. Create the necessary parameter controls and calculations within Tableau to allow for export of graphs, tables, and figures.

Deliverables

The main deliverables for the integrated financial mapping project were easy to interpret graphs that provided expenditure data (i.e., total, adjusted, and rates) for children and youth behavioral health services by funding source (i.e., Medicaid and DCF), SFY, categorization system (i.e., Children's Behavioral Health Plan, BH Rating Workgroup, and mental health vs. substance use disorder) and selected demographic variables.

Conceptual Framework

The goal of the financial map is to provide a visual display of the expenditures dedicated to the existing behavioral health continuum of services and supports available to children and youth in CT. This integrated financial map allows the state to think strategically about the overall system and roles each agency plays in service provision. It identifies gaps and inefficiencies in the systems, increases coordination among agencies, identifies opportunities for braiding current funding, and leveraging additional funding sources. The current deliverable used two mutually agreed upon conceptual frameworks to guide the categorization of expenditure data

1. "Array of Services and Supports in the Connecticut Behavioral Health System of Care"—page 12 of the Children's Behavioral Health Plan (see Figure 1 below).
2. "Connecticut Children's Behavioral Health System" (see Figure 2 below)[5]

[2] According to a 2018 paper from AHRQ (Agency for Healthcare Research and Quality), Medical Expenditure Panel Survey (MEPS), the authors recommend using the Gross Domestic Product (GDP) as a preferred index to adjust for inflation. "Given the high proportion of health care expenditures that comes from federal, state, and local governments, it is especially important to use a price index, such as the GDP index, that is broadly reflective of the entire U.S. economy. The GDP price index is the broadest index and the best choice when conducting analyses from the societal perspective." https://meps.ahrq.gov/about_meps/Price_Index.shtml
[3] Section 1. Domestic Product and Income; Table 1.1.4 Price Indexes for Gross Domestic Products [Index numbers, 2012=100] Seasonally Adjusted; Last Revised on: August 27, 2020; Line 1 Gross Domestic Product (GDP)
[4] Developed a SFY average (GDP is quarterly). The base SFY was SFY15, with a ratio of 1. We divided the subsequent SFY GDP average from the base to get a ratio. We then multiplied the ratio to actual expenditure to get an inflation adjusted expenditure.
[5] https://www.plan4children.org/wp-content/uploads/2019/02/CBHP-OnePager-Final.pdf

Figure 1. Service Array Conceptual Framework

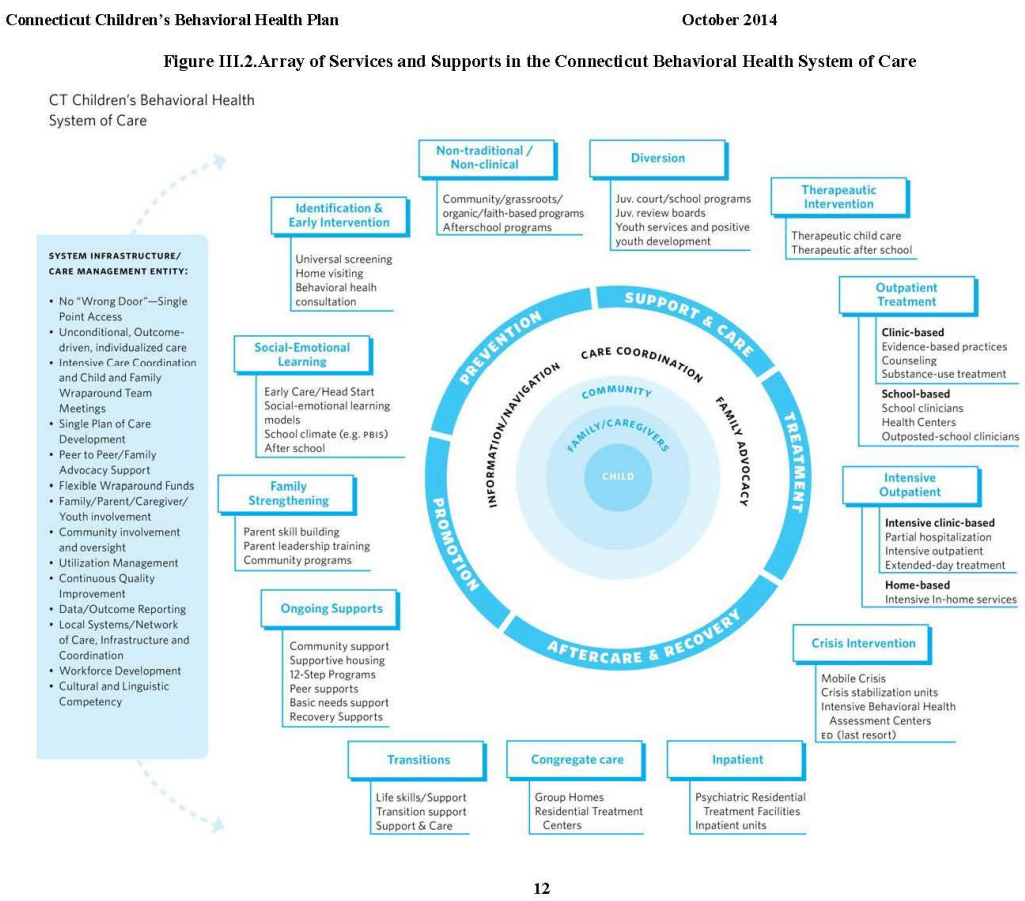
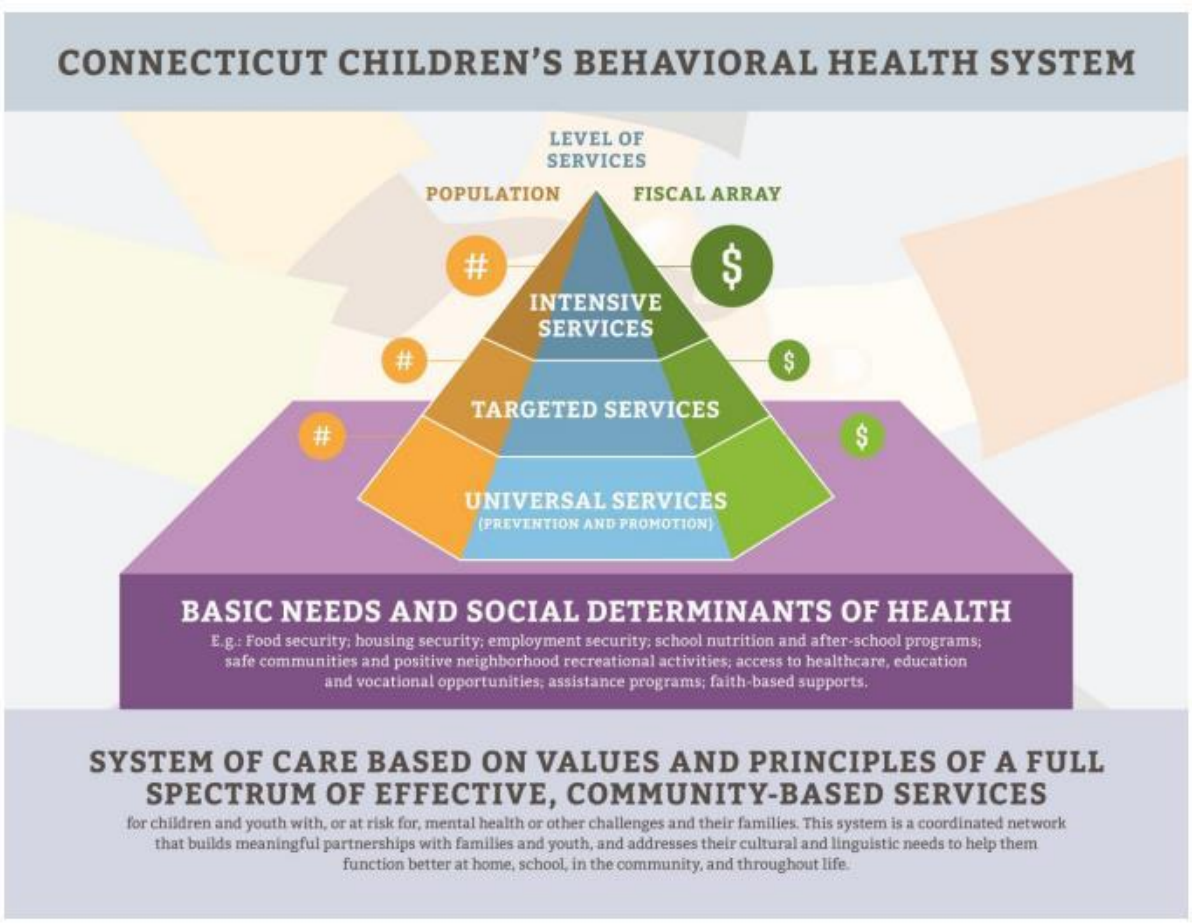


Figure 2. Connecticut Children's Behavioral Health System[6]



[6] https://www.plan4children.org/wp-content/uploads/2019/02/CBHP-OnePager-Final.pdf

II. Methods

Population of Interest

This integrated financial map included an analysis of behavioral health expenditures for CT children and youth age 3-21 years old, inclusive, who received behavioral health and related services and supports during State Fiscal Years (SFY) 2015 through 2018, as outlined in the contract between DCF and Beacon. [7]

Data Collection & Sources

The original financial map delivered and approved in 2018 involved the data collection and integration of expenditure data from 12 different state agencies. Given the data integration, analysis, and interpretation challenges, it was decided for the current integrated financial map to limit the data sources to Medicaid and DCF behavioral health expenditures.[8] Furthermore, due to the complicated nature of integrating both the mental health and substance use disorder financial map, the recoding and revising of the methodology, inclusion of demographic variables, and the detailed activities to clean, integrate, analyze, and report on the data, the data sources included in the current iteration of the financial map were restricted to Medicaid and DCF. As for demographic variables, we included gender, age, race and Hispanic origin for selected DCF program (i.e., Care Coordination, Mobile Crisis, Outpatient Psychiatric Clinics for Children, Adolescent Community Reinforcement Approach, Multisystemic Therapy, Multisystemic Therapy-Family Integration, Multisystemic Therapy-Emerging Adults, Multlisystemic Therapy-Problem Sexual Behavior, Multidimensional Family Therapy), and the same demographic variables for all expenditures within Medicaid paid claims.

Table 1. Integrated Financial Map Funding Source, Data Type, and Parameters

Funding Source	Data Type	Data Parameters
Department of Children and Families	Expenditure	All Programs
Department of Children and Families	Demographics	Selected Services
Medicaid Paid Claims (via Beacon Health Options)	Expenditure	All Paid Claims
Medicaid Paid Claims (via Beacon Health Options)	Demographics	All Paid Claims

Medicaid Claims

Via its role as the Behavioral Health ASO for the CT BHP, Beacon receives a complete file of all Medicaid claims data including medical, behavioral health, pharmacy, dental and non-emergency medical transportation claims on a bi-weekly basis directly from DSS. These files are stored in the CT Beacon Data Warehouse.

With permission of the CTBHP and in support of this initiative, Beacon extracted paid claims for SFY'15 through SFY'18 members that were 3-21 as of the date of service on the claim. The data extracted is the total paid and does not subtract the Federal Medical Assistance Percentage

[7] Note: when summing the number of youth that utilized a behavioral health service across different demographics (i.e., age group, race, Hispanic origin, sex), this is a non-unique count given a youth can utilize more than one type of Medicaid behavioral health service during the course of a state fiscal year. Results indicate where it is a non-unique vs. unique count. Unique counts were only available for Medicaid data.

[8] For more information on the methodology of the first financial map, please see the deliverable accepted and approved by DCF on August 29, 2018.

(FMAP). The data extracted does not include pharmacy expenditures. In order to identify behavioral health claims, Beacon required that a paid claim meet one of the three following criteria:

- A primary behavioral health diagnosis on the claim;
- A prior U authorization number (i.e., CTBHP authorization number)
- Selected behavioral health procedure codes, revenue center codes, place of service codes and provider type and specialty codes that are specifically behavioral health and do not have a medical equivalent

Beacon developed, maintained, and applied a reference table that utilized a combination of provider type and specialty, place of service, Current Procedural Terminology (CPT)/ Healthcare Common Procedure Coding System (HCPCS), modifiers, and Revenue Center codes. There were over 200,000 different code combinations included in this reference table. A clinically meaningful level of care was assigned to each code combination. In order for the claim to be included, a member must have been Medicaid eligible and enrolled on the date of service on the claim.

III. Results & Conclusion

The results below are presented in order from general to more specific. Analysis begins at the highest conceptual level and then drills down further into specific categories, funding sources, and service types.

In total, there were over 65 different visualizations (see below) created as a result of this integrated and revised financial map. This financial map provided significantly more detail than the previous financial map. The results are broken down in the following seven sections:

I. Section 1. Total Expenditure by Source and SFY
II. Section 2.Total Expenditure by Source, SFY, and Categorization System
III. Section 3.Medicaid Behavioral Health Treatment Expenditure by SFY, Level of Care, and Demographics [Non-Unique Youth]
IV. Section 4. Medicaid Behavioral Health Treatment Expenditure by SFY, Race and Hispanic Origin [Non-Unique Youth]
V. Section 5. Medicaid Behavioral Health Treatment Expenditure by SFY, and Demographics per Unique [Unique Youth]
VI. Section 6. Medicaid Behavioral Health Treatment Expenditure by SFY, Race, and Hispanic Origin [Unique Youth]
VII. Section 7. Selected DCF Services Total Expenditure by Service Type and SFY [Non-Unique Youth]

The below key points are broken down by each major Section. These key points and takeaways are meant to be an initial analysis of the financial mapping results; additional analyses are needed in collaboration with DCF and other key stakeholders that have provided input into the financial mapping process (i.e., Children's Behavioral Health Plan Advisory Board).

Key Points

I. Section I. Total Expenditure by Source and SFY
   - Between SFY'15 and SFY'18, there was an overall increase in behavioral health spending for youth and young adults; absolute spending increased from $453.9M to $536.1M, a difference of $82.2M and an increase of $107.0M, when adjusted for inflation.
   - When split out by funding source, there was a greater total adjusted percent increase in expenditure from Medicaid (from SFY'15 – SFY'18, increase of $69.5M, adjusted, 27.3% adjusted increase) compared to DCF (from SFY'15 – SFY'18, increase of $37.5M, adjusted, 18.8% adjusted increase).

II. Section 2.Total Expenditure by Source, SFY, and Categorization System
   - Medicaid accounted for a larger total percent of behavioral health expenditures across all four years, with SFY'18 being the highest (57.8% of total expenditure examined, compared to 42.2% from DCF).
   - Treatment consistently remained the highest total expenditure category across all four years for both DCF and Medicaid.
   - For treatment expenditures by source, Medicaid ranges between 98.7% - 98.9% of all expenditures for SFY'15 – SFY'18 whereas DCF treatment expenditures ranges from 66.2% - 67.4%.

- DCF paid for a more diverse number of services and supports including system infrastructure, prevention, promotion, and support & care.
- In SFY'18, Medicaid & DCF treatment expenditures accounted for 85.6% of all expenditures captured in this analysis.
- Similarly, in using the Connecticut Children's Behavioral Health System categorization system, 93.5% of all expenditures, across both Medicaid and DCF were for Targeted or Intensive services and supports.
- By funding source, DCF and Medicaid roughly spent the same percentage for Targeted services in SFY'18 (58.6% and 59.5%, respectively). Medicaid had a higher percentage paid for Intensive services (38.4%) compared to DCF (28.9%) in SFY'18.
- Future iterations of the financial map may condense the Connecticut Children's Behavioral Health System categorization system as the specificity of the categories makes interpretation more difficult.
- Paid mental health services and supports are significantly higher than exclusive (i.e., excludes co-occur and other) substance use disorder services and support for both DCF (87.2% compared to 12.8%) and Medicaid (88.6% compared to 1.4%) in SFY'18. This finding was consistent in other SFY, too.[9]

III. Section 3.Medicaid Behavioral Health Treatment Expenditure by SFY, Level of Care, and Demographics [Non-Unique Youth]

- For Medicaid treatment expenditures[10], outpatient behavioral health services was the highest absolute and adjusted expenditure across all four years. In SFY'18, outpatient behavioral health accounted for 25.8% of all behavioral health treatment expenditures.
- After outpatient behavioral health, the next three highest levels of care expenditures were inpatient psychiatric acute (11.0%), psychiatric residential treatment facility (PRTF; 10.4%) and inpatient psychiatric state (10.4%) in SFY'18.[11]
- In comparing the number of non-unique youth served, it is important to indicate that close to 80,000 Medicaid youth utilized some type of outpatient behavioral health service in SFY'18; an increase from 72,000 non-unique youth in SFY'17.
- In SFY'18, the 13 – 17 age group had the highest absolute expenditure ($149.7M; $156.6M, adjusted).
- Between SFY'16 and SFY'18, the 13 – 17 age group had a steady increase in utilization, as compared to the 18 – 21 age group which had a relatively flat utilization trend for Medicaid behavioral health treatment expenditures.
- When comparing expenditure by non-unique youth, the 18 – 21 year olds were the only age group that had a steady decrease in Medicaid behavioral health treatment expend rate; the lowest in SFY'18 at $1,834 ($1,919, adjusted) per non-unique youth.

[9] Note that DCF expenditures were categorized by primary program type (MH vs. SUD) and Medicaid expenditures were categorized by diagnosis on the claim. DCF's expenditure representation does not indicate that DCF does not serve co-occurring individuals; it's a matter of a dichotomous categorization based upon primary focus of the program.
[10] This excludes the system infrastructure expenditures and exclusively looks at treatment as defined by the Array of Services and Supports in the Connecticut Behavioral Health System of Care"—page 12 of the Children's Behavioral Health Plan
[11] Due to coding anomalies in SFY'15 and SFY'16 with PRTF State and Inpatient Psychiatric State, caution should be exercised when interpreting the data during these two years.

- In SFY'15, Medicaid Asian youth had the highest total non-unique rate at $2,102 and in SFY'18, Pacific Islander youth had the highest total expend rate per non-unique youth ($2,091). However, small n-sizes should be taken into consideration when making interpretations as outlier expenditures can make a significant impact on rates.
- Black and White youth had a similar treatment Medicaid expenditure rate per non-unique youth in SFY'18 ($1,988 for Black youth compared to $1,974 for White youth, unadjusted).
- In regards to both absolute and adjusted expenditures, male youth have consistently higher total expenditures compared to females (e.g., in SFY'18, male youth had $179.3M in adjusted expenditures compared to $141.2M for females).
- However, when comparing rates by non-unique youth, the rates are similar for both males and females, with females having a slightly higher rate per non-unique youth for Medicaid treatment expenditures in SFY'18 $1,935 (adjusted) compared to males ($1,884, adjusted). And the rate per non-unique youth has been trending upward for females since SFY'16, too.
- Non-Hispanic youth had a higher adjusted rate per non-unique youth for Medicaid behavioral health treatment expenditures ($1,974, adjusted) compared to Hispanic youth ($1,715, adjusted).

IV. Section 4. Medicaid Behavioral Health Treatment Expenditure by SFY, Race and Hispanic Origin [Non-Unique Youth]
- In examining the intersectionality of race and Hispanic origin, in SFY'18 Non-Hispanic Pacific Islanders had the highest adjusted per non-unique youth behavioral health treatment expenditure at $2,544, followed by White, Hispanic ($2,119) and Black, Non-Hispanic ($2,102). Small n-sizes, particularly for non-Hispanic Pacific Islanders should be taken into account when examining rates due to the potential impact of outlier expenditures.

V. Section 5. Medicaid Behavioral Health Treatment Expenditure by SFY, and Demographics per Unique [Unique Youth]
- Similar to the non-unique rate, the 13 – 17 age group had the highest Medicaid behavioral health treatment adjusted expenditure per unique youth in SFY'18 at $6,233; this age group has been trending up since SFY'16 while 18 – 21 year olds have been trending down in utilization ($4,414 in SFY'18).
- Similar to the non-unique rate, White and Black youth had a similar rate of Medicaid behavioral health treatment expenditure, per unique youth, $4,805 and $4,640, respectively. Native American/Alaskan Natives and Asian youth had the lowest rate ($3,102 and $3,682, respectively).
- Male youth had a slightly higher Medicaid behavioral health total adjusted expenditure per unique youth ($4,388) compared to female youth ($4,268) in SFY'18. The difference between male and female rates have been decreasing between SFY'16 and SFY'18.
- Also similar to the non-unique rate, Non-Hispanic youth had a higher Medicaid behavioral health treatment adjusted expenditure rate ($4,522) compared to Non-Hispanic youth ($3,820).

VI. Section 6. Medicaid Behavioral Health Treatment Expenditure by SFY, Race, and Hispanic Origin [Unique Youth]

- When examining the intersectionality of race and Hispanic origin, results show that Non-Hispanic Pacific Islander's had the highest adjusted per unique youth rate in SFY' 18 at $6,024, however, the n-size was only 51 youth. The next top three highest were White, Non-Hispanic, White, Hispanic, and then Black, Non-Hispanic ($4,824, $4,731, and $4,688, respectively)

VII. Section 7. Selected DCF Services Total Expenditure by Service Type and SFY [Unique Youth]

- Of the selected DCF programs, OPCC had the highest expenditures across all years with flat funding [unadjusted] and an increase in the number of non-unique youth served (low of 13,001 youth in SFY'15 and a high in SFY'17 of 13,780 youth).
- Mobile Crisis had an increase in expenditures [unadjusted] between SFY'15 to SFY'17 and then a decrease in SFY'18 and a continuous increase in the number of youth served (SFY'15 n=12,441, SFY'18 n=14,596).
- In SFY'18, all of the DCF selected programs served a higher proportion of male youth compared to female youth.
- In SFY'18, all of the SUD DCF selected programs served a majority of 13 – 17 year olds, compared to OPCC and Care Coordination which both served a majority of 3 – 12 year olds. This trend was consistent across all years examined.
- In SFY'17, Care Coordination had the smallest difference (11.6 percentage points) between the percent of Hispanic and Non-Hispanic youth served among the selected DCF programs.[12]
- Multisystemic Therapy for Family Integrated Transitions served a higher percentage of Black youth for 3 of the 4 years examined; all other DCF selected programs served a higher percentage of White youth.

Limitations & Challenges

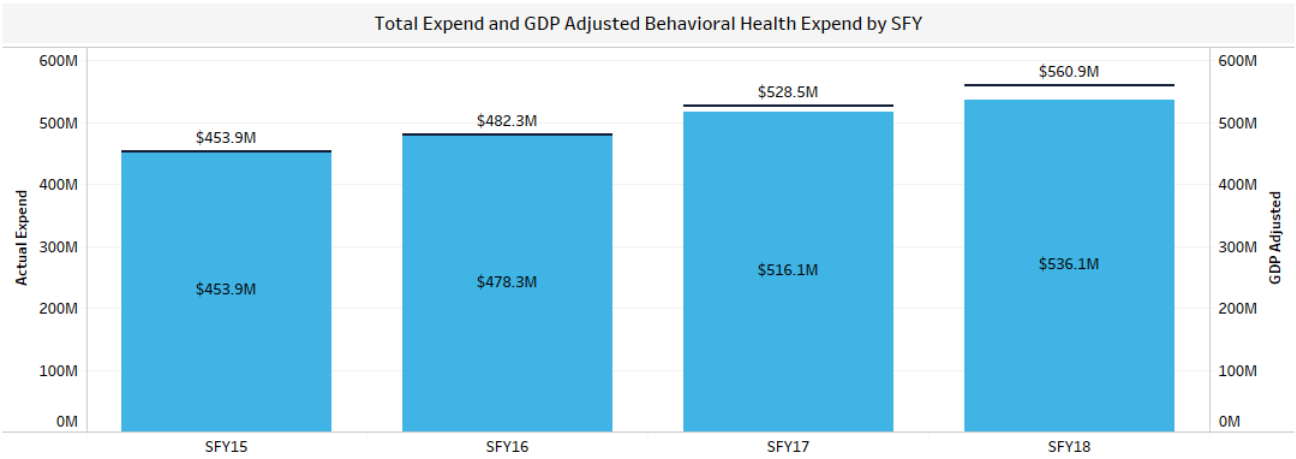
There are several limitations of the current methodology and financial mapping process:

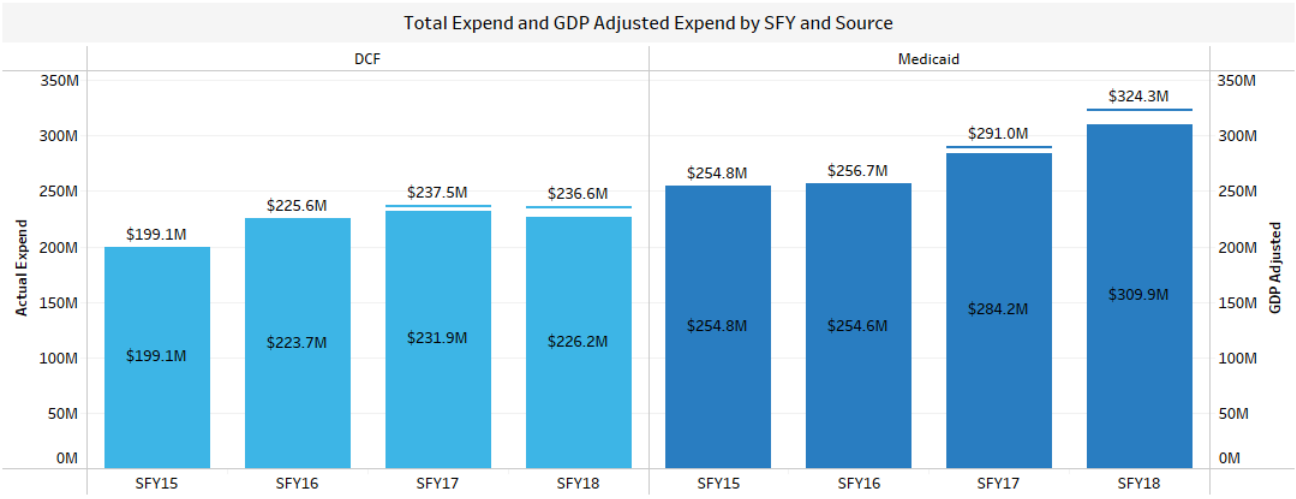
- Beacon's ability to receive medical, behavioral health, dental, and pharmacy claims is a data analytic advantage over most other states with managed care organizations. Rather than trying to synthesize claims data from multiple MCOs, Connecticut is uniquely equipped in having a single data source. The major drawback with having a complete claims file is how to make the distinction between different types of services (e.g., medical vs. behavioral health). For example, medical and behavioral health providers may use the same CPT codes in different settings (e.g., evaluation and management CPT codes). In order to accurately distinguish between claims and to bucket expenditure data into meaningful high-level categories, Beacon had to develop a reference table. The development of this reference table was time consuming and took claims coding technical expertise. This reference table is still currently being refined and therefore changes may occur in future financial mapping iterations.
- Although updated and including a broader time period since the last financial map (i.e., SFY'15 and SFY'16 data only), the data currently reported is still a few years old and does not reflect the current service array.
- The data was a snapshot in time. The absolute dollars presented are likely to shift from year-to-year given budget cuts and/or new programs being implemented. It would be important to keep in mind the percentages by category and not solely the absolute expenditure.

[12] Note: there appears to be a data issue with SFY'18 Hispanic origin data; please use caution when interpreting results with SFY'18 data.

- The current financial map is not exhaustive and does not include all data sources, including expenditures from other State agencies that provide related behavioral health services and supports.
- For the Medicaid claims extraction, the change from ICD-9 to ICD-10 (between 2015 and 2016), which occurred during the measurement period, was a limitation given the cross-walk between the old and new diagnostic coding. Caution should be taken when interpreting changes in expenditures over this period given the change in how providers were required to diagnose and submit Medicaid claims.
- During the 2015 to 2016 time period, there were Medicaid coding anomalies for the State Inpatient and State PRTF levels of care and as such, interpretation of this data is limited.
- The integration of disparate data sets between DCF and Medicaid proved to be challenging. Specifically, when merging DCF financial records to DCF program details, there were differences in spellings, program labels, and variable names resulting in extensive data cleaning and the creation of over 1,600 lines of code to clean and integrate the DCF financial and PIE data.
- Currently, it is extremely difficult, if not impossible, to capture the number of unique members that accessed services across systems given the lack of a unique identifier to track utilization across State departments and providers.
- For many of the metrics, the expenditure per youth is a non-unique count. That is, a youth can utilize more than one program within and across State Fiscal Years. A unique count was only possible using the Medicaid claims data.
- The integration of demographic data from Medicaid and DCF sources proved to be difficult; in order to prevent double counting, the demographics by source were kept separate to aid in interpretability.
- Due to changes in DSS' Medicaid eligibility system (ImpaCT) in 2016 and 2017, the race self-identification category became optional leading to a significant increase in the number of Medicaid members with an 'unknown' racial category. With such a large group of unknown race, it will hinder our ability to identify and reduce health disparities.
- In order to have an integrated mental health and substance use map, we identified a claim based upon the first four diagnostic positions on the claim. However, there are many times when there are no diagnoses on the claim (e.g., school-based services) or there are diagnostic coding differences by provider. Furthermore, the likely under identification of substance use disorders among youth further likely underestimates utilization of substance use services and supports. DCF expenditures were separated by program type and not by diagnosis.

Section 1:	Contents
	A. Total Expend and GDP Adjusted Behavioral Health Expend by SFY
	B. Total Expend and GDP Adjusted Expend by SFY and Source





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Section 2:	**A. Total and Percent by SFY, Source, and <u>BH Plan</u>** **a. Total Expend; Percent Within Sources** **b. Total Expend; Percent Across Sources** **c. Total Adjusted Expend; Percent Within Sources** **d. Total Adjusted Expend; Percent Across Sources**
	B. Total and Percent by SFY, Source, and <u>BH Rating Team</u> **a. Total Expend; Percent Within Sources** **b. Total Expend; Percent Across Sources** **c. Total Adjusted Expend; Percent Within Sources** **d. Total Adjusted Expend; Percent Across Sources**
	C. Total and Percent by SFY, Source, and <u>MH and SUD</u> **a. Total Expend; Percent Within Sources** **b. Total Expend; Percent Across Sources** **c. Total Adjusted Expend; Percent Within Sources** **d. Total Adjusted Expend; Percent Across Sources**

Total and Percent Expend by SFY, Source, and BH Plan
(Total Expend; Percent Within Sources)

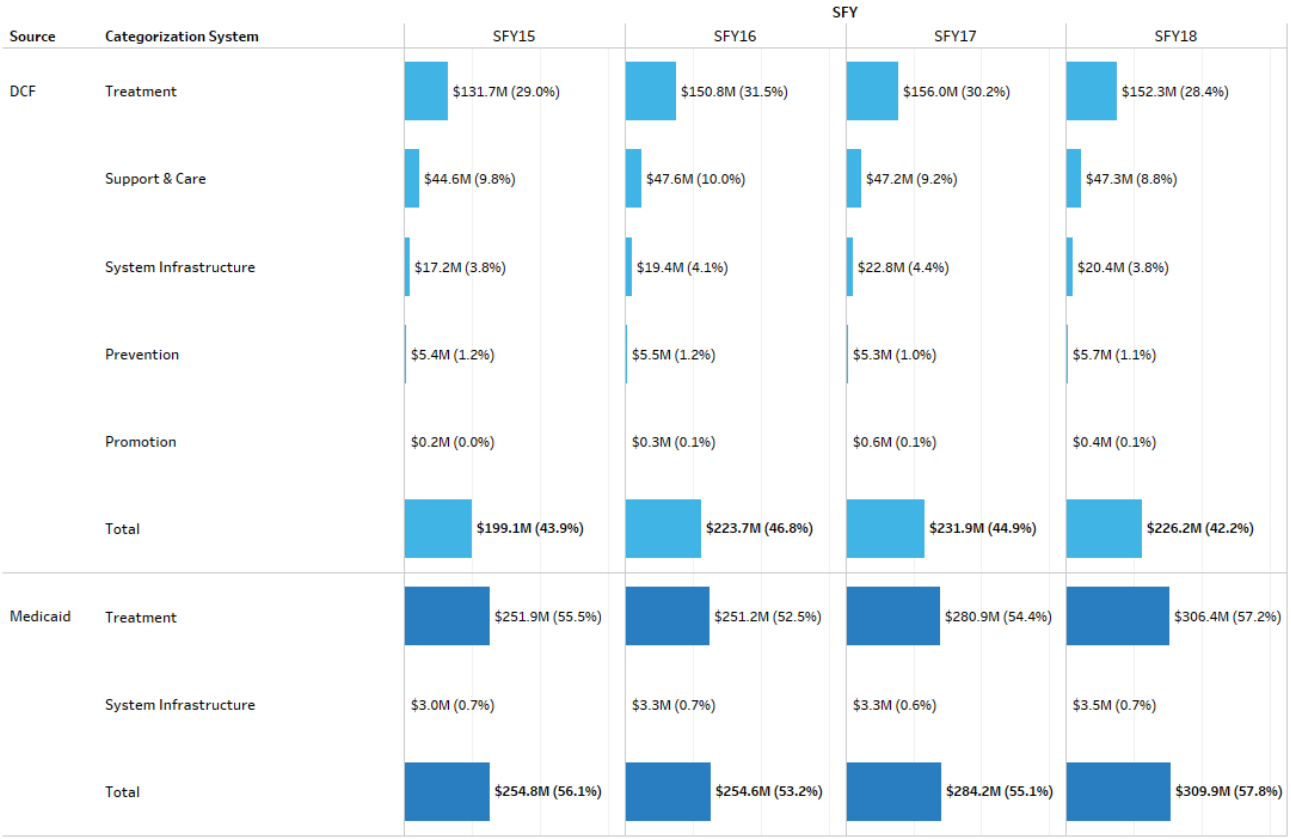
Source	Categorization System	SFY15	SFY16	SFY17	SFY18
DCF	Treatment	$131.7M (66.2%)	$150.8M (67.4%)	$156.0M (67.3%)	$152.3M (67.3%)
	Support & Care	$44.6M (22.4%)	$47.6M (21.3%)	$47.2M (20.4%)	$47.3M (20.9%)
	System Infrastructure	$17.2M (8.6%)	$19.4M (8.7%)	$22.8M (9.8%)	$20.4M (9.0%)
	Prevention	$5.4M (2.7%)	$5.5M (2.5%)	$5.3M (2.3%)	$5.7M (2.5%)
	Promotion	$0.2M (0.1%)	$0.3M (0.1%)	$0.6M (0.2%)	$0.4M (0.2%)
	Total	**$199.1M (100.0%)**	**$223.7M (100.0%)**	**$231.9M (100.0%)**	**$226.2M (100.0%)**
Medicaid	Treatment	$251.9M (98.8%)	$251.2M (98.7%)	$280.9M (98.8%)	$306.4M (98.9%)
	System Infrastructure	$3.0M (1.2%)	$3.3M (1.3%)	$3.3M (1.2%)	$3.5M (1.1%)
	Total	**$254.8M (100.0%)**	**$254.6M (100.0%)**	**$284.2M (100.0%)**	**$309.9M (100.0%)**

Categorization System
BH Plan

Percent Selection Parameter
Percent Within Sources

Expend Selection Parameter
Total Expend

Total and Percent Expend by SFY, Source, and BH Plan
(Total Expend; Percent Across Sources)



Categorization System
BH Plan

Percent Selection Parameter
Percent Across Sources

Expend Selection Parameter
Total Expend

Total and Percent Expend by SFY, Source, and BH Plan
(Total Adjusted Expend; Percent Within Sources)

Source	Categorization System	SFY15	SFY16	SFY17	SFY18
DCF	Treatment	$131.7M (66.2%)	$152.1M (67.4%)	$159.7M (67.3%)	$159.4M (67.3%)
	Support & Care	$44.6M (22.4%)	$48.0M (21.3%)	$48.4M (20.4%)	$49.5M (20.9%)
	System Infrastructure	$17.2M (8.6%)	$19.6M (8.7%)	$23.3M (9.8%)	$21.4M (9.0%)
	Prevention	$5.4M (2.7%)	$5.6M (2.5%)	$5.4M (2.3%)	$6.0M (2.5%)
	Promotion	$0.2M (0.1%)	$0.3M (0.1%)	$0.6M (0.2%)	$0.4M (0.2%)
	Total	**$199.1M (100.0%)**	**$225.6M (100.0%)**	**$237.5M (100.0%)**	**$236.6M (100.0%)**
Medicaid	Treatment	$251.9M (98.8%)	$253.4M (98.7%)	$287.6M (98.8%)	$320.6M (98.9%)
	System Infrastructure	$3.0M (1.2%)	$3.3M (1.3%)	$3.4M (1.2%)	$3.7M (1.1%)
	Total	**$254.8M (100.0%)**	**$256.7M (100.0%)**	**$291.0M (100.0%)**	**$324.3M (100.0%)**

Categorization System
BH Plan

Percent Selection Parameter
Percent Within Sources

Expend Selection Parameter
Total Adjusted Expend

Total and Percent Expend by SFY, Source, and BH Plan
(Total Adjusted Expend; Percent Across Sources)

Source	Categorization System	SFY15	SFY16	SFY17	SFY18
DCF	Treatment	$131.7M (29.0%)	$152.1M (31.5%)	$159.7M (30.2%)	$159.4M (28.4%)
	Support & Care	$44.6M (9.8%)	$48.0M (10.0%)	$48.4M (9.2%)	$49.5M (8.8%)
	System Infrastructure	$17.2M (3.8%)	$19.6M (4.1%)	$23.3M (4.4%)	$21.4M (3.8%)
	Prevention	$5.4M (1.2%)	$5.6M (1.2%)	$5.4M (1.0%)	$6.0M (1.1%)
	Promotion	$0.2M (0.0%)	$0.3M (0.1%)	$0.6M (0.1%)	$0.4M (0.1%)
	Total	**$199.1M (43.9%)**	**$225.6M (46.8%)**	**$237.5M (44.9%)**	**$236.6M (42.2%)**
Medicaid	Treatment	$251.9M (55.5%)	$253.4M (52.5%)	$287.6M (54.4%)	$320.6M (57.2%)
	System Infrastructure	$3.0M (0.7%)	$3.3M (0.7%)	$3.4M (0.6%)	$3.7M (0.7%)
	Total	**$254.8M (56.1%)**	**$256.7M (53.2%)**	**$291.0M (55.1%)**	**$324.3M (57.8%)**

Categorization System
BH Plan

Percent Selection Parameter
Percent Across Sources

Expend Selection Parameter
Total Adjusted Expend

Total and Percent Expend by SFY, Source, and BH Rating Team
(Total Expend; Percent Within Sources)

Source	Categorization System	SFY15	SFY16	SFY17	SFY18
DCF	Targeted	$126.5M (63.5%)	$129.0M (57.6%)	$134.4M (58.0%)	$132.5M (58.6%)
	Intensive	$47.4M (23.8%)	$66.7M (29.8%)	$67.3M (29.0%)	$65.4M (28.9%)
	Targeted, general administrative	$4.7M (2.3%)	$7.6M (3.4%)	$9.2M (4.0%)	$9.0M (4.0%)
	Targeted, infrastructure loosely connected..	$7.8M (3.9%)	$7.6M (3.4%)	$7.7M (3.3%)	$6.9M (3.1%)
	Targeted, infrastructure connected to trea..	$6.5M (3.2%)	$6.2M (2.8%)	$7.2M (3.1%)	$6.7M (3.0%)
	Universal	$2.8M (1.4%)	$3.2M (1.4%)	$2.5M (1.1%)	$2.6M (1.1%)
	Intensive, Targeted, Universal	$1.0M (0.5%)	$1.5M (0.7%)	$1.6M (0.7%)	$1.5M (0.7%)
	Intensive, Targeted, general administrative	$0.7M (0.3%)	$0.6M (0.3%)	$0.6M (0.2%)	$0.4M (0.2%)
	Universal, general administrative	$0.1M (0.1%)	$0.3M (0.1%)	$0.3M (0.1%)	$0.4M (0.2%)
	Targeted, Universal, general administrative	$0.3M (0.2%)	$0.3M (0.1%)	$0.3M (0.1%)	$0.3M (0.1%)
	Intensive, Targeted, Universal, general ad..	$0.4M (0.2%)	$0.1M (0.0%)	$0.4M (0.2%)	$0.3M (0.1%)
	Universal, infrastructure loosely connecte..	$0.1M (0.1%)	$0.2M (0.1%)	$0.2M (0.1%)	$0.1M (0.0%)
	Targeted, Universal, infrastructure loosely..	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)	$0.1M (0.0%)
	Targeted, Universal, infrastructure connec..	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)
	Intensive, infrastructure connected to trea..	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)
	Intensive, general administrative	$0.6M (0.3%)	$0.3M (0.1%)	$0.0M (0.0%)	$0.0M (0.0%)
	Intensive, infrastructure loosely connected..	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)
	Universal, Targeted, infrastructure loosely..	$0.2M (0.1%)	$0.1M (0.0%)	$0.0M (0.0%)	()
	Total	**$199.1M (100.0%)**	**$223.7M (100.0%)**	**$231.9M (100.0%)**	**$226.2M (100.0%)**
Medicaid	Targeted	$153.3M (60.2%)	$166.6M (65.4%)	$171.4M (60.3%)	$184.3M (59.5%)
	Intensive	$94.3M (37.0%)	$80.3M (31.6%)	$106.0M (37.3%)	$118.9M (38.4%)
	Targeted, infrastructure connected to trea..	$5.4M (2.1%)	$5.4M (2.1%)	$4.7M (1.7%)	$4.4M (1.4%)
	Targeted, general administrative	$1.5M (0.6%)	$1.9M (0.8%)	$2.1M (0.7%)	$2.2M (0.7%)
	Intensive, infrastructure connected to trea..	$0.3M (0.1%)	$0.3M (0.1%)	$0.0M (0.0%)	$0.1M (0.0%)
	Total	**$254.8M (100.0%)**	**$254.6M (100.0%)**	**$284.2M (100.0%)**	**$309.9M (100.0%)**

Categorization System
BH Rating Team

Percent Selection Parameter
Percent Within Sources

Expend Selection Parameter
Total Expend

Total and Percent Expend by SFY, Source, and BH Rating Team
(Total Expend; Percent Across Sources)

Source	Categorization System	SFY15	SFY16	SFY17	SFY18
DCF	Targeted	$126.5M (27.9%)	$129.0M (27.0%)	$134.4M (26.0%)	$132.5M (24.7%)
	Intensive	$47.4M (10.4%)	$66.7M (13.9%)	$67.3M (13.0%)	$65.4M (12.2%)
	Targeted, general administrative	$4.7M (1.0%)	$7.6M (1.6%)	$9.2M (1.8%)	$9.0M (1.7%)
	Targeted, infrastructure loosely connected..	$7.8M (1.7%)	$7.6M (1.6%)	$7.7M (1.5%)	$6.9M (1.3%)
	Targeted, infrastructure connected to trea..	$6.5M (1.4%)	$6.2M (1.3%)	$7.2M (1.4%)	$6.7M (1.2%)
	Universal	$2.8M (0.6%)	$3.2M (0.7%)	$2.5M (0.5%)	$2.6M (0.5%)
	Intensive, Targeted, Universal	$1.0M (0.2%)	$1.5M (0.3%)	$1.6M (0.3%)	$1.5M (0.3%)
	Intensive, Targeted, general administrative	$0.7M (0.2%)	$0.6M (0.1%)	$0.6M (0.1%)	$0.4M (0.1%)
	Universal, general administrative	$0.1M (0.0%)	$0.3M (0.1%)	$0.3M (0.1%)	$0.4M (0.1%)
	Targeted, Universal, general administrative	$0.3M (0.1%)	$0.3M (0.1%)	$0.3M (0.1%)	$0.3M (0.1%)
	Intensive, Targeted, Universal, general ad..	$0.4M (0.1%)	$0.1M (0.0%)	$0.4M (0.1%)	$0.3M (0.0%)
	Universal, infrastructure loosely connecte..	$0.1M (0.0%)	$0.2M (0.0%)	$0.2M (0.0%)	$0.1M (0.0%)
	Targeted, Universal, infrastructure loosely..	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)	$0.1M (0.0%)
	Targeted, Universal, infrastructure connec..	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)
	Intensive, infrastructure connected to trea..	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)
	Intensive, general administrative	$0.6M (0.1%)	$0.3M (0.1%)	$0.0M (0.0%)	$0.0M (0.0%)
	Intensive, infrastructure loosely connected..	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)
	Universal, Targeted, infrastructure loosely..	$0.2M (0.0%)	$0.1M (0.0%)	$0.0M (0.0%)	()
	Total	**$199.1M (43.9%)**	**$223.7M (46.8%)**	**$231.9M (44.9%)**	**$226.2M (42.2%)**
Medicaid	Targeted	$153.3M (33.8%)	$166.6M (34.8%)	$171.4M (33.2%)	$184.3M (34.4%)
	Intensive	$94.3M (20.8%)	$80.3M (16.8%)	$106.0M (20.5%)	$118.9M (22.2%)
	Targeted, infrastructure connected to trea..	$5.4M (1.2%)	$5.4M (1.1%)	$4.7M (0.9%)	$4.4M (0.8%)
	Targeted, general administrative	$1.5M (0.3%)	$1.9M (0.4%)	$2.1M (0.4%)	$2.2M (0.4%)
	Intensive, infrastructure connected to trea..	$0.3M (0.1%)	$0.3M (0.1%)	$0.0M (0.0%)	$0.1M (0.0%)
	Total	**$254.8M (56.1%)**	**$254.6M (53.2%)**	**$284.2M (55.1%)**	**$309.9M (57.8%)**

Categorization System
BH Rating Team

Percent Selection Parameter
Percent Across Sources

Expend Selection Parameter
Total Expend

Total and Percent Expend by SFY, Source, and BH Rating Team
(Total Adjusted Expend; Percent Within Sources)

Source	Categorization System	SFY15	SFY16	SFY17	SFY18
DCF	Targeted	$126.5M (63.5%)	$130.1M (57.6%)	$137.6M (58.0%)	$138.6M (58.6%)
	Intensive	$47.4M (23.8%)	$67.3M (29.8%)	$68.9M (29.0%)	$68.4M (28.9%)
	Targeted, general administrative	$4.7M (2.3%)	$7.6M (3.4%)	$9.4M (4.0%)	$9.5M (4.0%)
	Targeted, infrastructure loosely connected..	$7.8M (3.9%)	$7.7M (3.4%)	$7.9M (3.3%)	$7.2M (3.1%)
	Targeted, infrastructure connected to trea..	$6.5M (3.2%)	$6.3M (2.8%)	$7.4M (3.1%)	$7.0M (3.0%)
	Universal	$2.8M (1.4%)	$3.2M (1.4%)	$2.6M (1.1%)	$2.7M (1.1%)
	Intensive, Targeted, Universal	$1.0M (0.5%)	$1.5M (0.7%)	$1.6M (0.7%)	$1.6M (0.7%)
	Intensive, Targeted, general administrative	$0.7M (0.3%)	$0.6M (0.3%)	$0.6M (0.2%)	$0.4M (0.2%)
	Universal, general administrative	$0.1M (0.1%)	$0.3M (0.1%)	$0.3M (0.1%)	$0.4M (0.2%)
	Targeted, Universal, general administrative	$0.3M (0.2%)	$0.3M (0.1%)	$0.3M (0.1%)	$0.3M (0.1%)
	Intensive, Targeted, Universal, general ad..	$0.4M (0.2%)	$0.1M (0.0%)	$0.4M (0.2%)	$0.3M (0.1%)
	Universal, infrastructure loosely connecte..	$0.1M (0.1%)	$0.2M (0.1%)	$0.2M (0.1%)	$0.1M (0.0%)
	Targeted, Universal, infrastructure loosely..	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)	$0.1M (0.0%)
	Targeted, Universal, infrastructure connec..	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)
	Intensive, infrastructure connected to trea..	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)
	Intensive, general administrative	$0.6M (0.3%)	$0.3M (0.1%)	$0.0M (0.0%)	$0.0M (0.0%)
	Intensive, infrastructure loosely connected..	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)
	Universal, Targeted, infrastructure loosely..	$0.2M (0.1%)	$0.1M (0.0%)	$0.0M (0.0%)	()
	Total	**$199.1M (100.0%)**	**$225.6M (100.0%)**	**$237.5M (100.0%)**	**$236.6M (100.0%)**
Medicaid	Targeted	$153.3M (60.2%)	$168.0M (65.4%)	$175.5M (60.3%)	$192.9M (59.5%)
	Intensive	$94.3M (37.0%)	$81.0M (31.6%)	$108.6M (37.3%)	$124.4M (38.4%)
	Targeted, infrastructure connected to trea..	$5.4M (2.1%)	$5.4M (2.1%)	$4.8M (1.7%)	$4.6M (1.4%)
	Targeted, general administrative	$1.5M (0.6%)	$2.0M (0.8%)	$2.1M (0.7%)	$2.3M (0.7%)
	Intensive, infrastructure connected to trea..	$0.3M (0.1%)	$0.3M (0.1%)	$0.0M (0.0%)	$0.1M (0.0%)
	Total	**$254.8M (100.0%)**	**$256.7M (100.0%)**	**$291.0M (100.0%)**	**$324.3M (100.0%)**

Categorization System
BH Rating Team

Percent Selection Parameter
Percent Within Sources

Expend Selection Parameter
Total Adjusted Expend

Total and Percent Expend by SFY, Source, and BH Rating Team
(Total Adjusted Expend; Percent Across Sources)

Source	Categorization System	SFY15	SFY16	SFY17	SFY18
DCF	Targeted	$126.5M (27.9%)	$130.1M (27.0%)	$137.6M (26.0%)	$138.6M (24.7%)
	Intensive	$47.4M (10.4%)	$67.3M (13.9%)	$68.9M (13.0%)	$68.4M (12.2%)
	Targeted, general administrative	$4.7M (1.0%)	$7.6M (1.6%)	$9.4M (1.8%)	$9.5M (1.7%)
	Targeted, infrastructure loosely connected..	$7.8M (1.7%)	$7.7M (1.6%)	$7.9M (1.5%)	$7.2M (1.3%)
	Targeted, infrastructure connected to trea..	$6.5M (1.4%)	$6.3M (1.3%)	$7.4M (1.4%)	$7.0M (1.2%)
	Universal	$2.8M (0.6%)	$3.2M (0.7%)	$2.6M (0.5%)	$2.7M (0.5%)
	Intensive, Targeted, Universal	$1.0M (0.2%)	$1.5M (0.3%)	$1.6M (0.3%)	$1.6M (0.3%)
	Intensive, Targeted, general administrative	$0.7M (0.2%)	$0.6M (0.1%)	$0.6M (0.1%)	$0.4M (0.1%)
	Universal, general administrative	$0.1M (0.0%)	$0.3M (0.1%)	$0.3M (0.1%)	$0.4M (0.1%)
	Targeted, Universal, general administrative	$0.3M (0.1%)	$0.3M (0.1%)	$0.3M (0.1%)	$0.3M (0.1%)
	Intensive, Targeted, Universal, general ad..	$0.4M (0.1%)	$0.1M (0.0%)	$0.4M (0.1%)	$0.3M (0.0%)
	Universal, infrastructure loosely connecte..	$0.1M (0.0%)	$0.2M (0.0%)	$0.2M (0.0%)	$0.1M (0.0%)
	Targeted, Universal, infrastructure loosely..	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)	$0.1M (0.0%)
	Targeted, Universal, infrastructure connec..	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)
	Intensive, infrastructure connected to trea..	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)
	Intensive, general administrative	$0.6M (0.1%)	$0.3M (0.1%)	$0.0M (0.0%)	$0.0M (0.0%)
	Intensive, infrastructure loosely connected..	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)	$0.0M (0.0%)
	Universal, Targeted, infrastructure loosely..	$0.2M (0.0%)	$0.1M (0.0%)	$0.0M (0.0%)	()
	Total	**$199.1M (43.9%)**	**$225.6M (46.8%)**	**$237.5M (44.9%)**	**$236.6M (42.2%)**
Medicaid	Targeted	$153.3M (33.8%)	$168.0M (34.8%)	$175.5M (33.2%)	$192.9M (34.4%)
	Intensive	$94.3M (20.8%)	$81.0M (16.8%)	$108.6M (20.5%)	$124.4M (22.2%)
	Targeted, infrastructure connected to trea..	$5.4M (1.2%)	$5.4M (1.1%)	$4.8M (0.9%)	$4.6M (0.8%)
	Targeted, general administrative	$1.5M (0.3%)	$2.0M (0.4%)	$2.1M (0.4%)	$2.3M (0.4%)
	Intensive, infrastructure connected to trea..	$0.3M (0.1%)	$0.3M (0.1%)	$0.0M (0.0%)	$0.1M (0.0%)
	Total	**$254.8M (56.1%)**	**$256.7M (53.2%)**	**$291.0M (55.1%)**	**$324.3M (57.8%)**

Categorization System
BH Rating Team

Percent Selection Parameter
Percent Across Sources

Expend Selection Parameter
Total Adjusted Expend

Total and Percent Expend by SFY, Source, and MH and SUD
(Total Expend; Percent Within Sources)

Source	Categorization System	SFY15	SFY16	SFY17	SFY18
DCF	MH	$172.6M (86.7%)	$197.4M (88.3%)	$204.5M (88.2%)	$197.3M (87.2%)
	SUD	$26.5M (13.3%)	$26.3M (11.7%)	$27.4M (11.8%)	$28.8M (12.8%)
	Total	**$199.1M (100.0%)**	**$223.7M (100.0%)**	**$231.9M (100.0%)**	**$226.2M (100.0%)**
Medicaid	MH	$225.3M (88.4%)	$218.2M (85.7%)	$250.0M (88.0%)	$274.7M (88.6%)
	OTHER	$16.1M (6.3%)	$20.7M (8.1%)	$18.6M (6.6%)	$20.5M (6.6%)
	COOCCUR	$9.4M (3.7%)	$11.8M (4.6%)	$11.5M (4.1%)	$10.3M (3.3%)
	SUD	$4.0M (1.6%)	$3.9M (1.5%)	$4.0M (1.4%)	$4.4M (1.4%)
	Total	**$254.8M (100.0%)**	**$254.6M (100.0%)**	**$284.2M (100.0%)**	**$309.9M (100.0%)**

Categorization System
MH and SUD

Percent Selection Parameter
Percent Within Sources

Expend Selection Parameter
Total Expend

Total and Percent Expend by SFY, Source, and MH and SUD
(Total Expend; Percent Across Sources)

Source	Categorization System	SFY15	SFY16	SFY17	SFY18
DCF	MH	$172.6M (38.0%)	$197.4M (41.3%)	$204.5M (39.6%)	$197.3M (36.8%)
	SUD	$26.5M (5.8%)	$26.3M (5.5%)	$27.4M (5.3%)	$28.8M (5.4%)
	Total	**$199.1M (43.9%)**	**$223.7M (46.8%)**	**$231.9M (44.9%)**	**$226.2M (42.2%)**
Medicaid	MH	$225.3M (49.6%)	$218.2M (45.6%)	$250.0M (48.4%)	$274.7M (51.2%)
	OTHER	$16.1M (3.6%)	$20.7M (4.3%)	$18.6M (3.6%)	$20.5M (3.8%)
	COOCCUR	$9.4M (2.1%)	$11.8M (2.5%)	$11.5M (2.2%)	$10.3M (1.9%)
	SUD	$4.0M (0.9%)	$3.9M (0.8%)	$4.0M (0.8%)	$4.4M (0.8%)
	Total	**$254.8M (56.1%)**	**$254.6M (53.2%)**	**$284.2M (55.1%)**	**$309.9M (57.8%)**

Categorization System
MH and SUD

Percent Selection Parameter
Percent Across Sources

Expend Selection Parameter
Total Expend

Total and Percent Expend by SFY, Source, and MH and SUD
(Total Adjusted Expend; Percent Within Sources)

Source	Categorization System	SFY15	SFY16	SFY17	SFY18
DCF	MH	$172.6M (86.7%)	$199.1M (88.3%)	$209.4M (88.2%)	$206.5M (87.2%)
	SUD	$26.5M (13.3%)	$26.5M (11.7%)	$28.1M (11.8%)	$30.2M (12.8%)
	Total	**$199.1M (100.0%)**	**$225.6M (100.0%)**	**$237.5M (100.0%)**	**$236.6M (100.0%)**
Medicaid	MH	$225.3M (88.4%)	$220.0M (85.7%)	$256.0M (88.0%)	$287.4M (88.6%)
	OTHER	$16.1M (6.3%)	$20.9M (8.1%)	$19.1M (6.6%)	$21.4M (6.6%)
	COOCCUR	$9.4M (3.7%)	$11.9M (4.6%)	$11.8M (4.1%)	$10.8M (3.3%)
	SUD	$4.0M (1.6%)	$4.0M (1.5%)	$4.1M (1.4%)	$4.6M (1.4%)
	Total	**$254.8M (100.0%)**	**$256.7M (100.0%)**	**$291.0M (100.0%)**	**$324.3M (100.0%)**

Categorization System
MH and SUD

Percent Selection Parameter
Percent Within Sources

Expend Selection Parameter
Total Adjusted Expend

Total and Percent Expend by SFY, Source, and MH and SUD
(Total Adjusted Expend; Percent Across Sources)

Source	Categorization System	SFY15	SFY16	SFY17	SFY18
DCF	MH	$172.6M (38.0%)	$199.1M (41.3%)	$209.4M (39.6%)	$206.5M (36.8%)
	SUD	$26.5M (5.8%)	$26.5M (5.5%)	$28.1M (5.3%)	$30.2M (5.4%)
	Total	**$199.1M (43.9%)**	**$225.6M (46.8%)**	**$237.5M (44.9%)**	**$236.6M (42.2%)**
Medicaid	MH	$225.3M (49.6%)	$220.0M (45.6%)	$256.0M (48.4%)	$287.4M (51.2%)
	OTHER	$16.1M (3.6%)	$20.9M (4.3%)	$19.1M (3.6%)	$21.4M (3.8%)
	COOCCUR	$9.4M (2.1%)	$11.9M (2.5%)	$11.8M (2.2%)	$10.8M (1.9%)
	SUD	$4.0M (0.9%)	$4.0M (0.8%)	$4.1M (0.8%)	$4.6M (0.8%)
	Total	**$254.8M (56.1%)**	**$256.7M (53.2%)**	**$291.0M (55.1%)**	**$324.3M (57.8%)**

Categorization System
MH and SUD

Percent Selection Parameter
Percent Across Sources

Expend Selection Parameter
Total Adjusted Expend

	Contents
Section 3:	**A. Medicaid Behavioral Health Treatment Expend by SFY, Level of Care and Count of Non-Unique Youth** **a. Total Expend** **b. Total Adjusted Expend**
	B. Medicaid Behavioral Health Treatment Expend by SFY, Demographic, and Count of Non-Unique Youth **a. Metrics** **i. Total Expend** **ii. Total Adjusted Expend** **iii. Total Expend Rate** **iv. Total Adjusted Expend Rate** **b. Demographics** **i. Age Group** **ii. Race** **iii. Sex** **iv. Hispanic Origin**

Medicaid Behavioral Health Treatment Total Expend by SFY, Level of Care, and Count of Non-Unique Youth

	SFY15	SFY16	SFY17	SFY18
Outpatient BH Services	$54.7M (21.7%,n=67,156)	$62.1M (24.7%,n=70,173)	$68.6M (24.4%,n=72,298)	$79.1M (25.8%,n=79,128)
Inpatient Psychiatric Acute	$30.0M (11.9%,n=2,638)	$30.1M (12.0%,n=2,486)	$32.8M (11.7%,n=2,580)	$33.6M (11.0%,n=2,638)
PRTF State	$41.0M (16.3%,n=229)	$28.8M (11.5%,n=191)	$28.9M (10.3%,n=148)	$31.9M (10.4%,n=170)
Inpatient Psychiatric State	$3.0M (1.2%,n=17)	$3.1M (1.2%,n=18)	$24.5M (8.7%,n=132)	$31.9M (10.4%,n=189)
Waiver	$39.3M (15.6%,n=2,648)	$44.4M (17.7%,n=2,613)	$35.4M (12.6%,n=2,471)	$29.9M (9.8%,n=2,137)
IICAPS	$22.3M (8.8%,n=3,617)	$21.1M (8.4%,n=3,496)	$22.2M (7.9%,n=3,398)	$21.7M (7.1%,n=3,518)
Autism Services	$0.8M (0.3%,n=177)	$3.0M (1.2%,n=664)	$7.6M (2.7%,n=1,341)	$14.5M (4.7%,n=2,012)
School Based BH Services	$12.4M (4.9%,n=13,785)	$11.9M (4.7%,n=15,127)	$12.0M (4.3%,n=17,659)	$13.9M (4.5%,n=20,287)
Other Services BH Primar..	$6.2M (2.5%,n=29,482)	$7.0M (2.8%,n=30,999)	$8.7M (3.1%,n=31,212)	$9.1M (3.0%,n=33,680)
PRTF Community	$6.7M (2.7%,n=173)	$6.3M (2.5%,n=185)	$6.9M (2.5%,n=167)	$6.9M (2.2%,n=163)
PHP EDT	$6.4M (2.5%,n=2,489)	$5.8M (2.3%,n=2,266)	$6.0M (2.1%,n=2,259)	$6.0M (2.0%,n=2,247)
ED Non-BH Services	$1.8M (0.7%,n=7,510)	$1.9M (0.7%,n=7,949)	$5.0M (1.8%,n=10,085)	$5.9M (1.9%,n=10,755)
IOP	$5.6M (2.2%,n=2,725)	$5.6M (2.2%,n=2,693)	$5.1M (1.8%,n=2,455)	$5.1M (1.7%,n=2,508)
Home Health	$5.4M (2.2%,n=806)	$5.4M (2.1%,n=949)	$4.7M (1.7%,n=811)	$4.4M (1.4%,n=740)
PNMI	$7.3M (2.9%,n=518)	$6.0M (2.4%,n=419)	$3.4M (1.2%,n=248)	$3.9M (1.3%,n=282)
Other Home Based Services	$3.5M (1.4%,n=2,264)	$3.6M (1.4%,n=2,374)	$3.6M (1.3%,n=2,341)	$3.2M (1.0%,n=2,340)
Inpatient Medical Non-BH ..	$0.8M (0.3%,n=1,644)	$1.4M (0.5%,n=2,170)	$1.7M (0.6%,n=2,735)	$2.0M (0.7%,n=2,917)
Inpatient Medical BH Serv..	$2.0M (0.8%,n=841)	$1.5M (0.6%,n=676)	$1.3M (0.4%,n=349)	$1.4M (0.5%,n=378)
Residential Rehab	$0.9M (0.3%,n=139)	$0.7M (0.3%,n=124)	$0.8M (0.3%,n=135)	$0.7M (0.2%,n=119)
Extended Stay Facility	$0.1M (0.1%,n=2)	$0.3M (0.1%,n=3)	$0.6M (0.2%,n=4)	$0.4M (0.1%,n=2)
Methadone Maintenance	$0.4M (0.2%,n=232)	$0.4M (0.2%,n=253)	$0.4M (0.1%,n=239)	$0.3M (0.1%,n=182)
Detoxification Inpatient F..	$0.3M (0.1%,n=200)	$0.3M (0.1%,n=217)	$0.3M (0.1%,n=191)	$0.3M (0.1%,n=147)
Community First Choice			$0.1M (0.0%,n=12)	$0.2M (0.1%,n=24)
ED BH Services	$0.1M (0.0%,n=660)	$0.1M (0.1%,n=738)	$0.0M (0.0%,n=433)	$0.1M (0.0%,n=1,030)
Observation	$0.3M (0.1%,n=320)	$0.3M (0.1%,n=464)	$0.0M (0.0%,n=453)	$0.1M (0.0%,n=551)
Assisted Living Facility	$0.1M (0.0%,n=89)	$0.0M (0.0%,n=42)	$0.0M (0.0%,n=21)	$0.0M (0.0%,n=35)
Birth to Three Services	$0.0M (0.0%,n=2)	$0.0M (0.0%,n=1)	$0.0M (0.0%,n=3)	$0.0M (0.0%,n=3)
Skilled Nursing Facility	$0.1M (0.0%,n=24)	$0.1M (0.1%,n=23)	$0.0M (0.0%,n=24)	$0.0M (0.0%,n=12)
Detoxification Ambulatory	$0.0M (0.0%,n=22)	$0.0M (0.0%,n=10)	$0.0M (0.0%,n=3)	$0.0M (0.0%,n=2)
Detoxification Inpatient ..	$0.0M (0.0%,n=2)	$0.0M (0.0%,n=2)		$0.0M (0.0%,n=1)
Group Home		$0.0M (0.0%,n=2)	$0.0M (0.0%,n=1)	$0.0M (0.0%,n=3)
Intermediate Care Facility	$0.3M (0.1%,n=8)	$0.0M (0.0%,n=2)	$0.1M (0.0%,n=1)	
Detoxification Residential	$0.0M (0.0%,n=38)	$0.0M (0.0%,n=13)		

Medicaid Metric
Level of Care

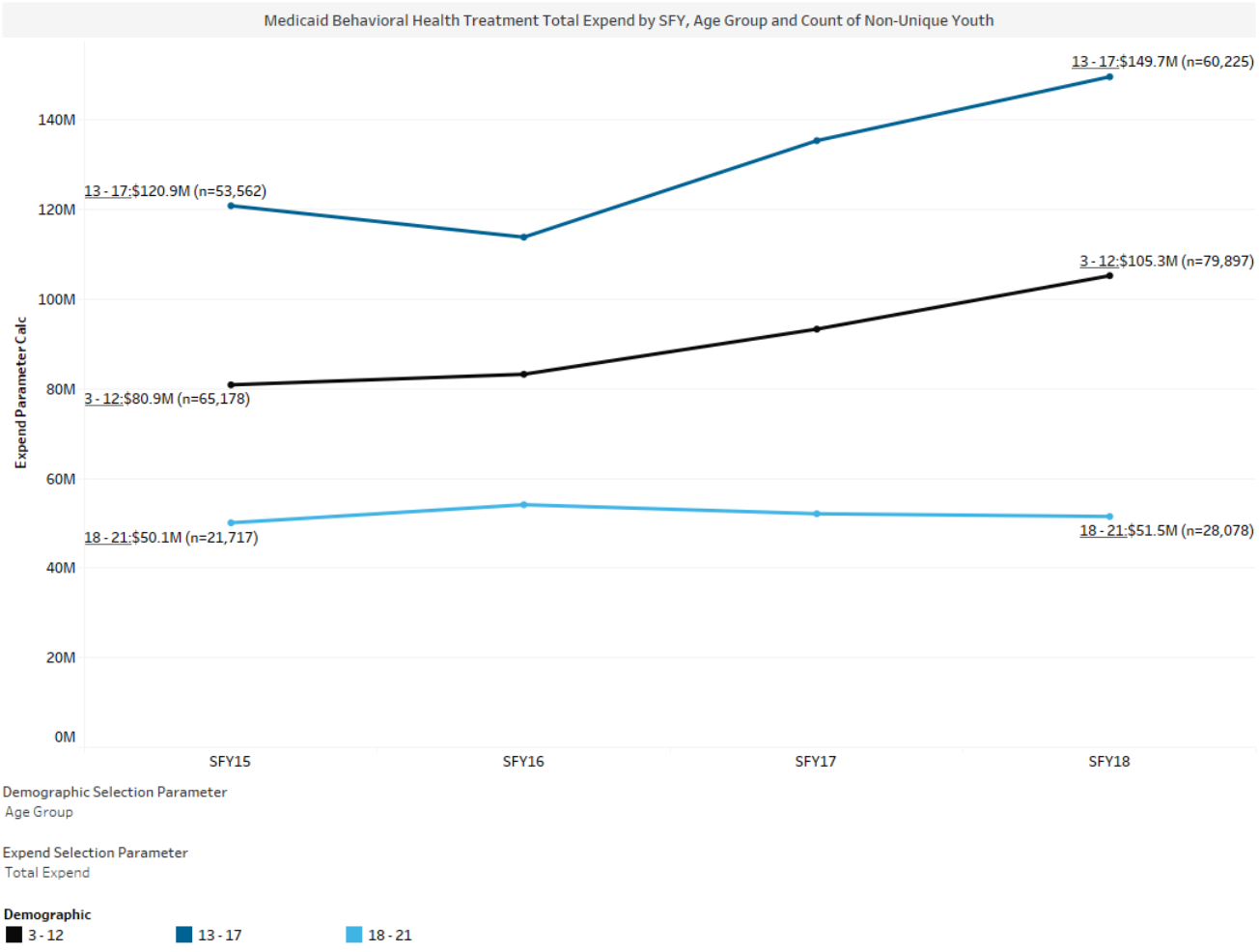
Expend Selection Parameter
Total Expend

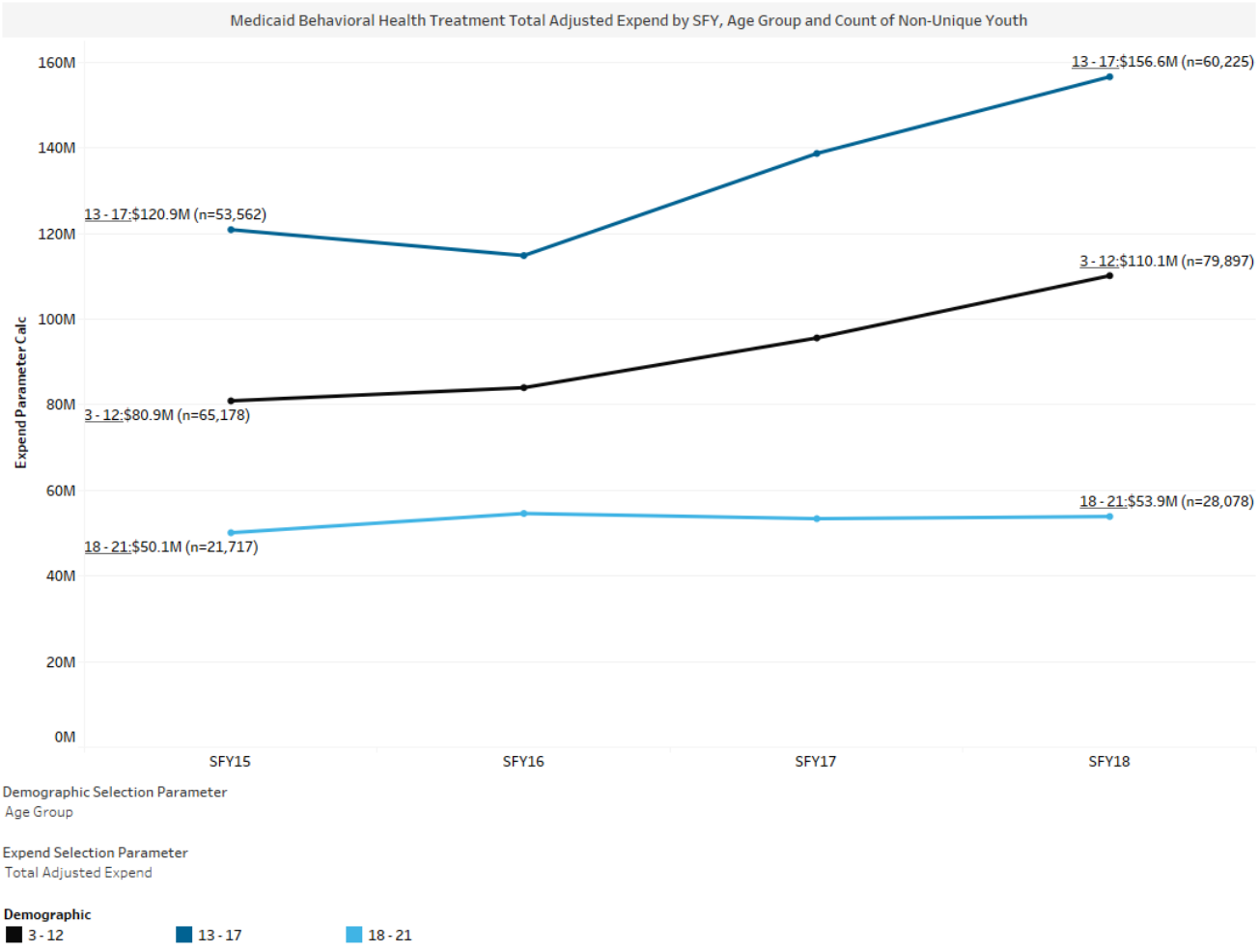
Medicaid Behavioral Health Treatment Total Adjusted Expend by SFY, Level of Care, and Count of Non-Unique Youth

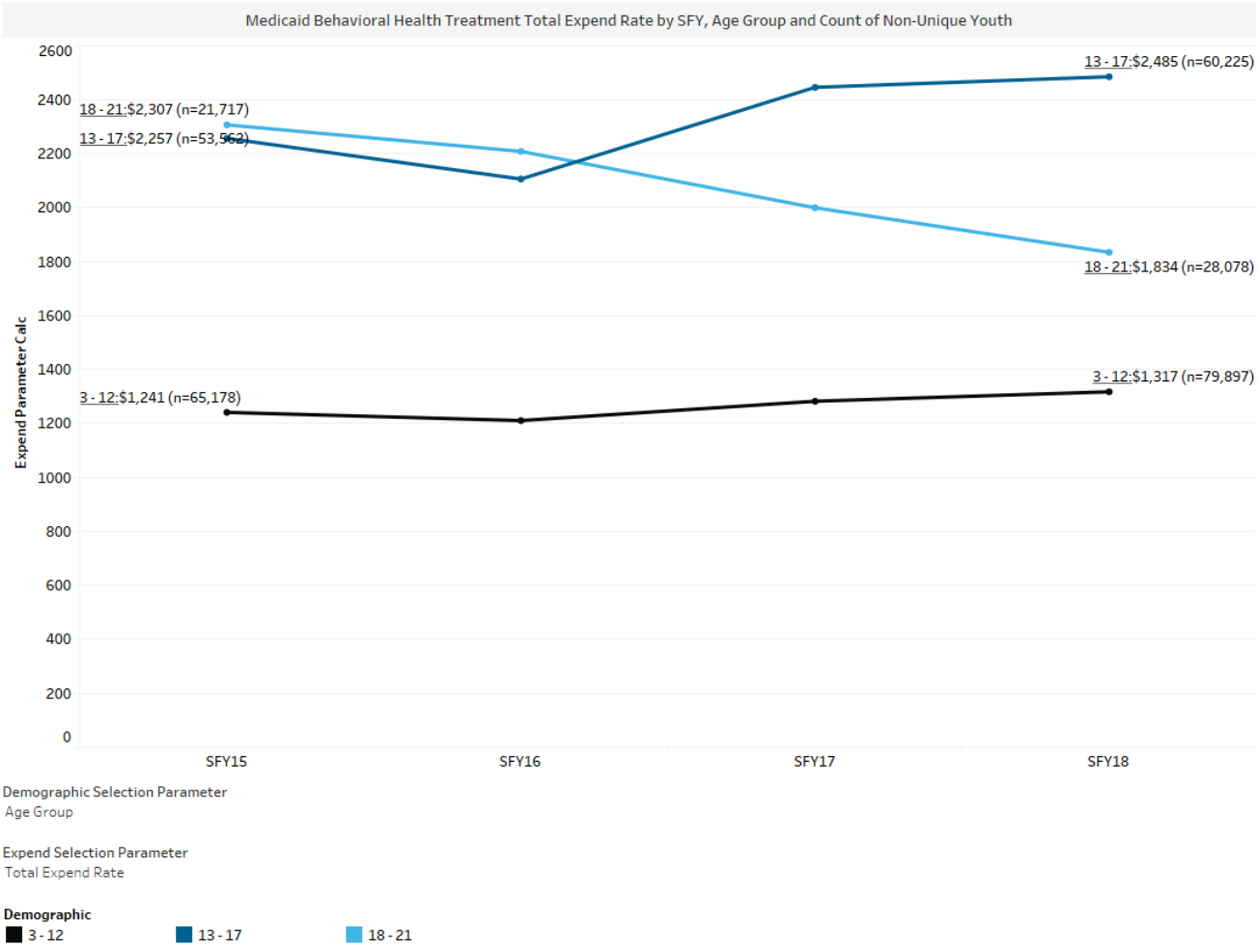
	SFY15	SFY16	SFY17	SFY18
Outpatient BH Services	$54.7M (21.7%,n=67,156)	$62.6M (24.7%,n=70,173)	$70.3M (24.4%,n=72,298)	$82.7M (25.8%,n=79,128)
Inpatient Psychiatric Acute	$30.0M (11.9%,n=2,638)	$30.4M (12.0%,n=2,486)	$33.6M (11.7%,n=2,580)	$35.2M (11.0%,n=2,638)
PRTF State	$41.0M (16.3%,n=229)	$29.1M (11.5%,n=191)	$29.6M (10.3%,n=148)	$33.4M (10.4%,n=170)
Inpatient Psychiatric State	$3.0M (1.2%,n=17)	$3.1M (1.2%,n=18)	$25.1M (8.7%,n=132)	$33.4M (10.4%,n=189)
Waiver	$39.3M (15.6%,n=2,648)	$44.8M (17.7%,n=2,613)	$36.2M (12.6%,n=2,471)	$31.3M (9.8%,n=2,137)
IICAPS	$22.3M (8.8%,n=3,617)	$21.3M (8.4%,n=3,496)	$22.8M (7.9%,n=3,398)	$22.7M (7.1%,n=3,518)
Autism Services	$0.8M (0.3%,n=177)	$3.0M (1.2%,n=664)	$7.8M (2.7%,n=1,341)	$15.2M (4.7%,n=2,012)
School Based BH Services	$12.4M (4.9%,n=13,785)	$12.0M (4.7%,n=15,127)	$12.3M (4.3%,n=17,659)	$14.5M (4.5%,n=20,287)
Other Services BH Primar..	$6.2M (2.5%,n=29,482)	$7.0M (2.8%,n=30,999)	$8.9M (3.1%,n=31,212)	$9.5M (3.0%,n=33,680)
PRTF Community	$6.7M (2.7%,n=173)	$6.4M (2.5%,n=185)	$7.1M (2.5%,n=167)	$7.2M (2.2%,n=163)
PHP EDT	$6.4M (2.5%,n=2,489)	$5.9M (2.3%,n=2,266)	$6.2M (2.1%,n=2,259)	$6.3M (2.0%,n=2,247)
ED Non-BH Services	$1.8M (0.7%,n=7,510)	$1.9M (0.7%,n=7,949)	$5.1M (1.8%,n=10,085)	$6.1M (1.9%,n=10,755)
IOP	$5.6M (2.2%,n=2,725)	$5.6M (2.2%,n=2,693)	$5.3M (1.8%,n=2,455)	$5.3M (1.7%,n=2,508)
Home Health	$5.4M (2.2%,n=806)	$5.4M (2.1%,n=949)	$4.8M (1.7%,n=811)	$4.6M (1.4%,n=740)
PNMI	$7.3M (2.9%,n=518)	$6.1M (2.4%,n=419)	$3.5M (1.2%,n=248)	$4.1M (1.3%,n=282)
Other Home Based Services	$3.5M (1.4%,n=2,264)	$3.6M (1.4%,n=2,374)	$3.7M (1.3%,n=2,341)	$3.3M (1.0%,n=2,340)
Inpatient Medical Non-BH ..	$0.8M (0.3%,n=1,644)	$1.4M (0.5%,n=2,170)	$1.8M (0.6%,n=2,735)	$2.1M (0.7%,n=2,917)
Inpatient Medical BH Serv..	$2.0M (0.8%,n=841)	$1.5M (0.6%,n=676)	$1.3M (0.4%,n=349)	$1.5M (0.5%,n=378)
Residential Rehab	$0.9M (0.3%,n=139)	$0.7M (0.3%,n=124)	$0.8M (0.3%,n=135)	$0.8M (0.2%,n=119)
Extended Stay Facility	$0.1M (0.1%,n=2)	$0.3M (0.1%,n=3)	$0.6M (0.2%,n=4)	$0.4M (0.1%,n=2)
Methadone Maintenance	$0.4M (0.2%,n=232)	$0.4M (0.2%,n=253)	$0.4M (0.1%,n=239)	$0.3M (0.1%,n=182)
Detoxification Inpatient F..	$0.3M (0.1%,n=200)	$0.3M (0.1%,n=217)	$0.4M (0.1%,n=191)	$0.3M (0.1%,n=147)
Community First Choice			$0.1M (0.0%,n=12)	$0.2M (0.1%,n=24)
ED BH Services	$0.1M (0.0%,n=660)	$0.1M (0.1%,n=738)	$0.0M (0.0%,n=433)	$0.1M (0.0%,n=1,030)
Observation	$0.3M (0.1%,n=320)	$0.3M (0.1%,n=464)	$0.0M (0.0%,n=453)	$0.1M (0.0%,n=551)
Assisted Living Facility	$0.1M (0.0%,n=89)	$0.0M (0.0%,n=42)	$0.0M (0.0%,n=21)	$0.0M (0.0%,n=35)
Birth to Three Services	$0.0M (0.0%,n=2)	$0.0M (0.0%,n=1)	$0.0M (0.0%,n=3)	$0.0M (0.0%,n=3)
Skilled Nursing Facility	$0.1M (0.0%,n=24)	$0.1M (0.1%,n=23)	$0.0M (0.0%,n=24)	$0.0M (0.0%,n=12)
Detoxification Ambulatory	$0.0M (0.0%,n=22)	$0.0M (0.0%,n=10)	$0.0M (0.0%,n=3)	$0.0M (0.0%,n=2)
Detoxification Inpatient ..	$0.0M (0.0%,n=2)	$0.0M (0.0%,n=2)		$0.0M (0.0%,n=1)
Group Home		$0.0M (0.0%,n=2)	$0.0M (0.0%,n=1)	$0.0M (0.0%,n=3)
Intermediate Care Facility	$0.3M (0.1%,n=8)	$0.0M (0.0%,n=2)	$0.1M (0.0%,n=1)	
Detoxification Residential	$0.0M (0.0%,n=38)	$0.0M (0.0%,n=13)		

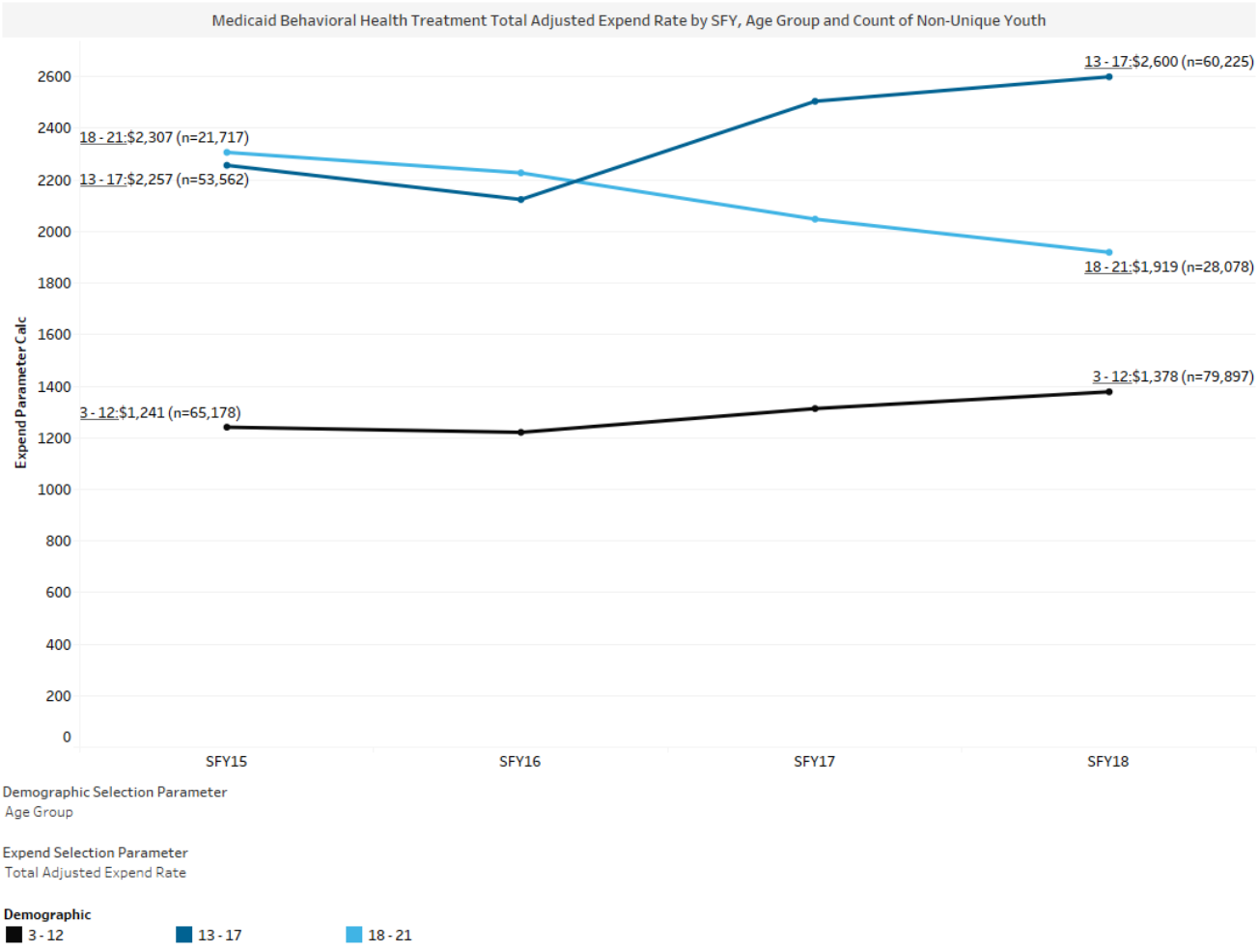
Medicaid Metric
Level of Care

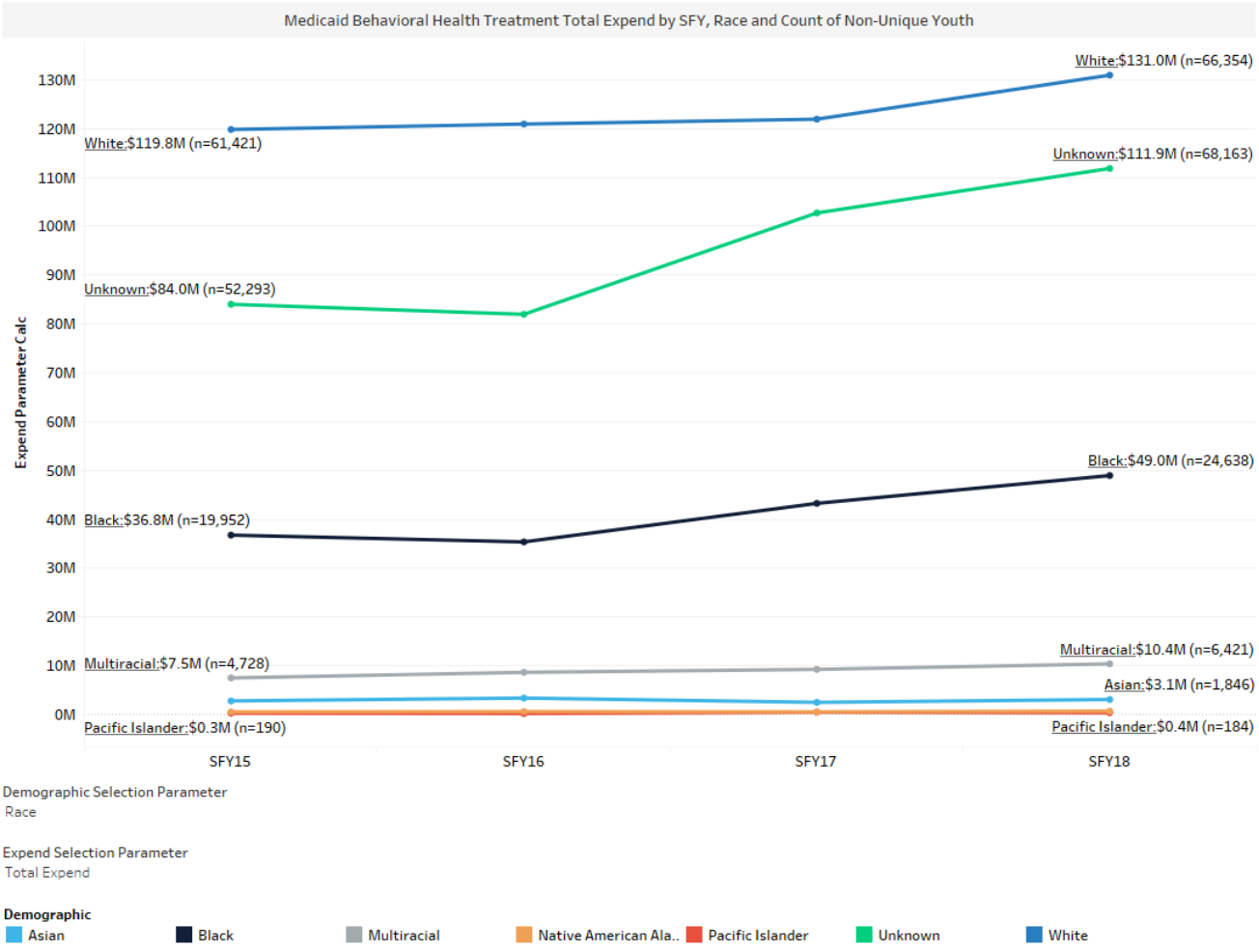
Expend Selection Parameter
Total Adjusted Expend

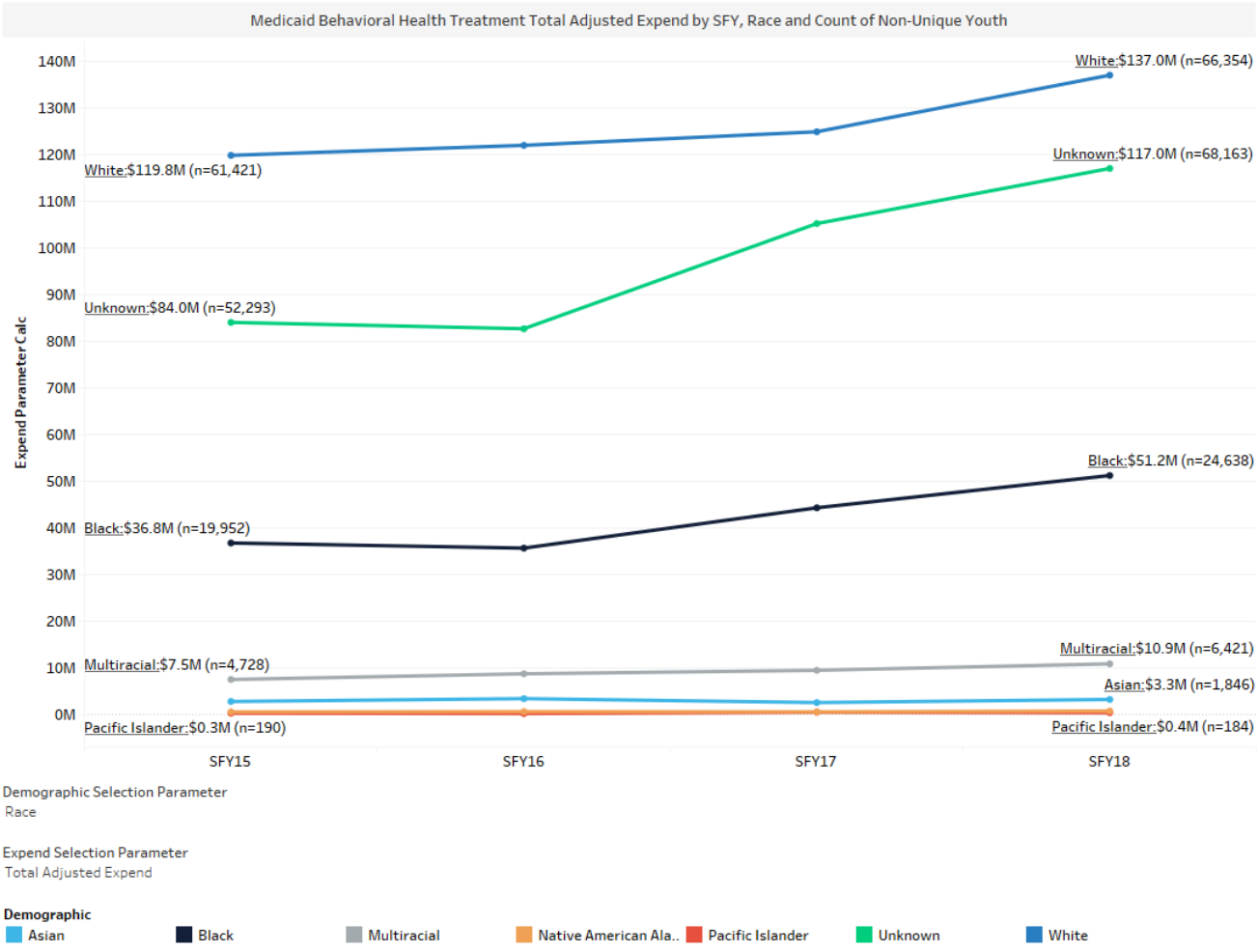

Medicaid Behavioral Health Treatment Total Expend by SFY, Age Group and Count of Non-Unique Youth
13 - 17:$149.7M (n=60,225)
13 - 17:$120.9M (n=53,562)
3 - 12:$105.3M (n=79,897)
3 - 12:$80.9M (n=65,178)
18 - 21:$50.1M (n=21,717)
18 - 21:$51.5M (n=28,078)
Expend Parameter Calc
140M
120M
100M
80M
60M
40M
20M
0M
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Age Group
Expend Selection Parameter
Total Expend
Demographic
3 - 12
13 - 17
18 - 21

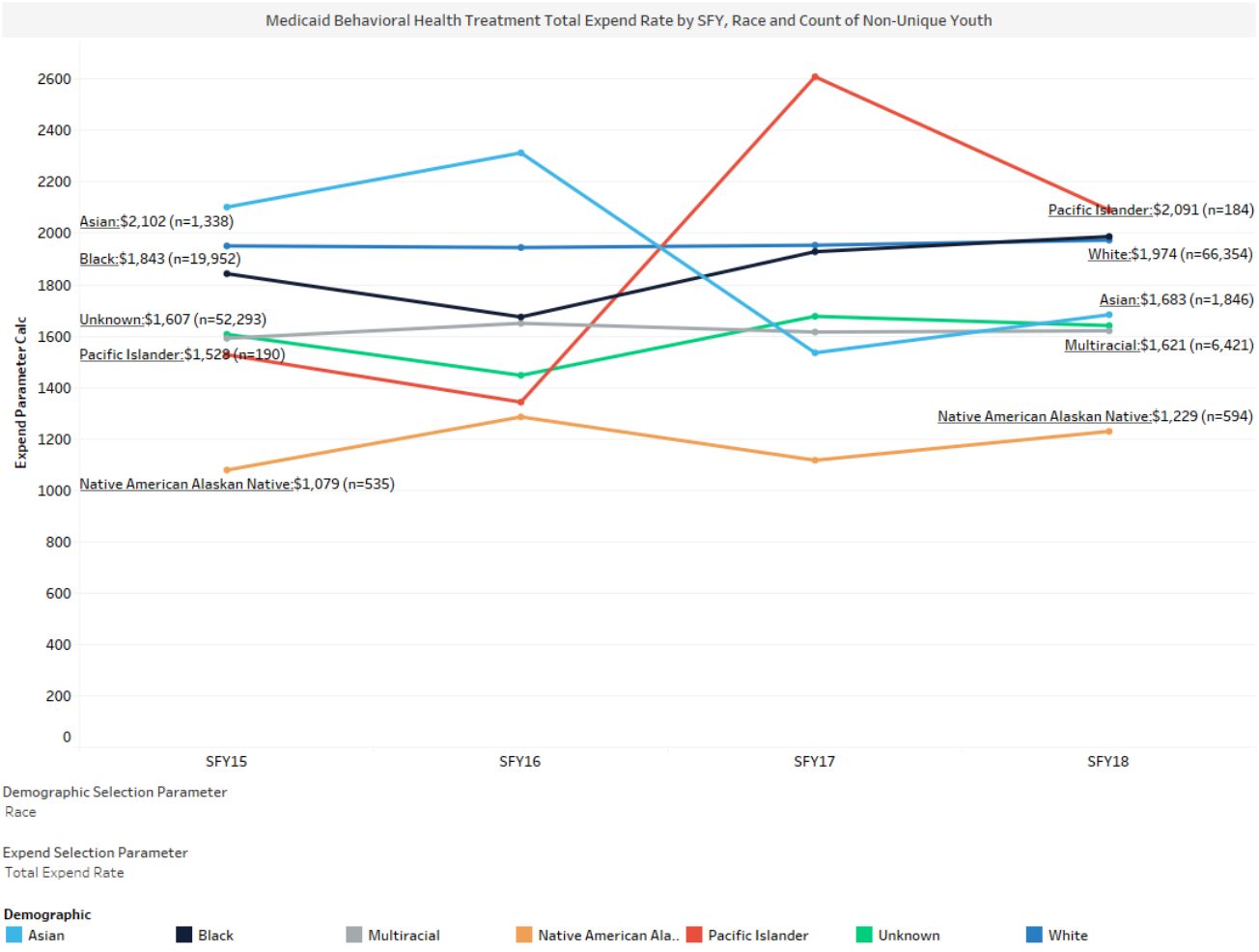

Medicaid Behavioral Health Treatment Total Adjusted Expend by SFY, Age Group and Count of Non-Unique Youth
160M
140M
120M
100M
80M
60M
40M
20M
0M
Expend Parameter Calc
13 - 17;$156.6M (n=60,225)
13 - 17;$120.9M (n=53,562)
3 - 12;$110.1M (n=79,897)
3 - 12;$80.9M (n=65,178)
18 - 21;$53.9M (n=28,078)
18 - 21;$50.1M (n=21,717)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Age Group
Expend Selection Parameter
Total Adjusted Expend
Demographic
3 - 12
13 - 17
18 - 21

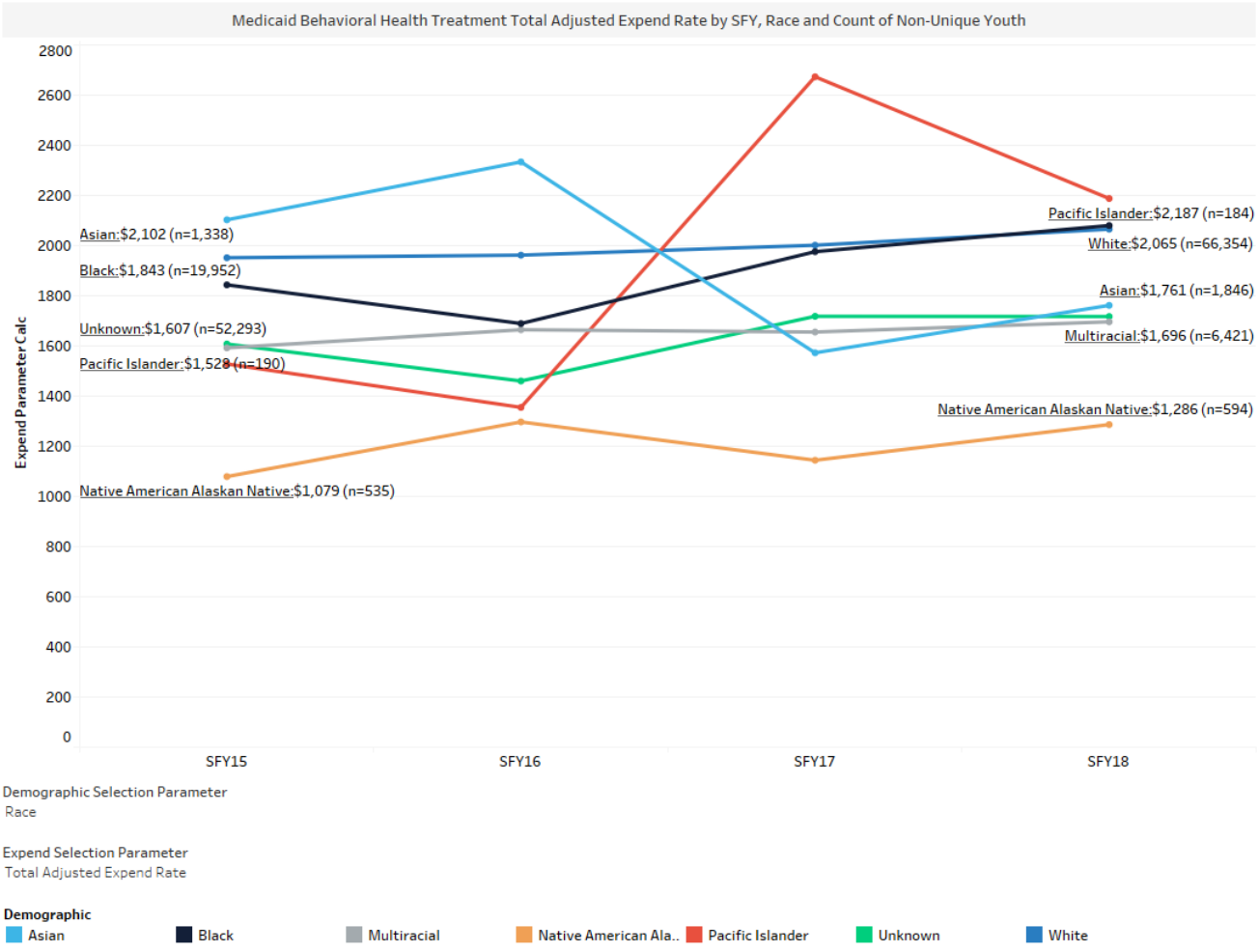

Medicaid Behavioral Health Treatment Total Expend Rate by SFY, Age Group and Count of Non-Unique Youth
Expend Parameter Calc
2600
2400
2200
2000
1800
1600
1400
1200
1000
800
600
400
200
0
13 - 17:$2,485 (n=60,225)
18 - 21:$2,307 (n=21,717)
13 - 17:$2,257 (n=53,562)
18 - 21:$1,834 (n=28,078)
3 - 12:$1,317 (n=79,897)
3 - 12:$1,241 (n=65,178)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Age Group
Expend Selection Parameter
Total Expend Rate
Demographic
3 - 12
13 - 17
18 - 21

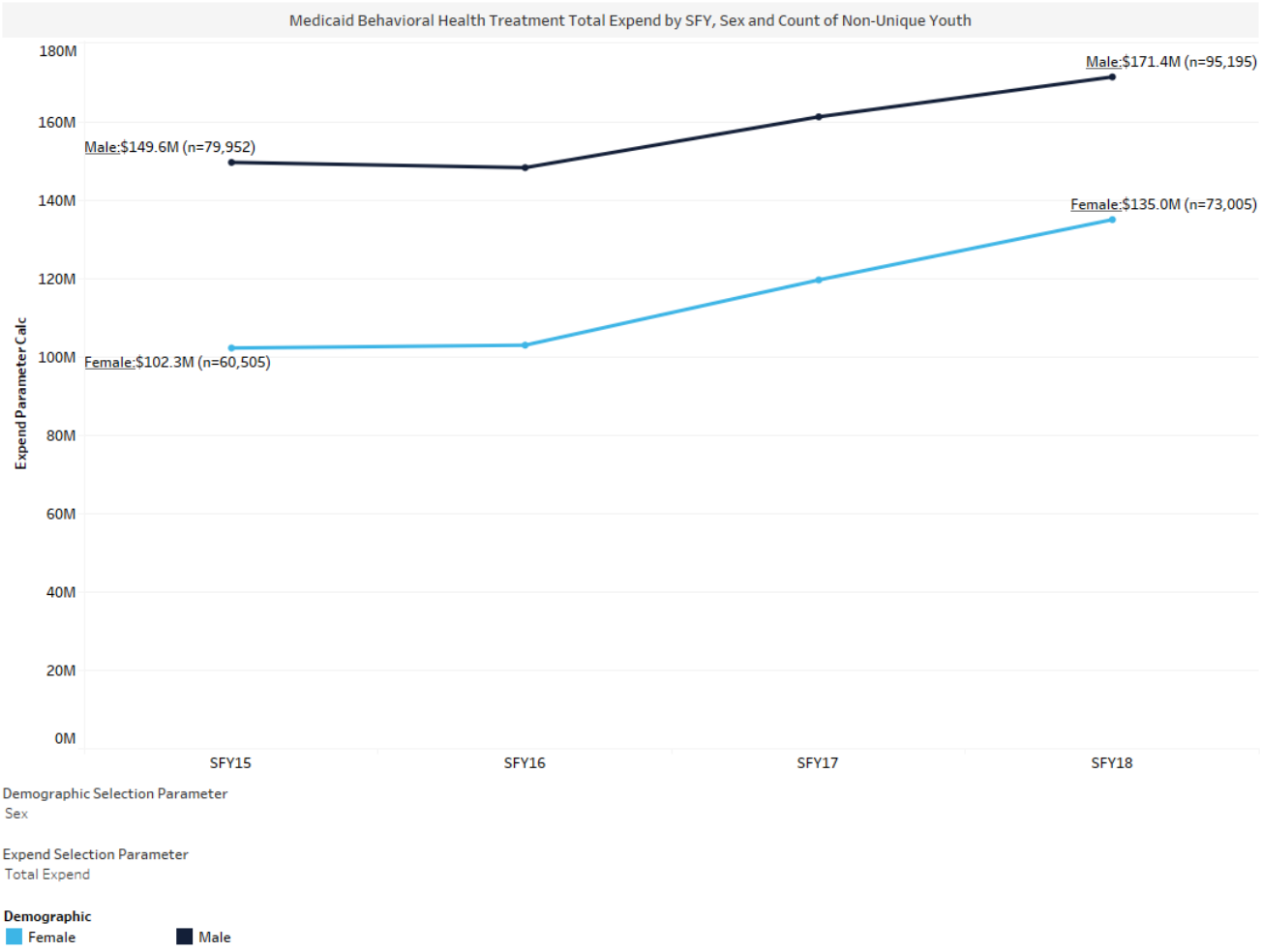

Medicaid Behavioral Health Treatment Total Adjusted Expend Rate by SFY, Age Group and Count of Non-Unique Youth
Expend Parameter Calc
2600
2400
2200
2000
1800
1600
1400
1200
1000
800
600
400
200
0
13 - 17:$2,600 (n=60,225)
18 - 21:$2,307 (n=21,717)
13 - 17:$2,257 (n=53,562)
18 - 21:$1,919 (n=28,078)
3 - 12:$1,378 (n=79,897)
3 - 12:$1,241 (n=65,178)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Age Group
Expend Selection Parameter
Total Adjusted Expend Rate
Demographic
3 - 12
13 - 17
18 - 21

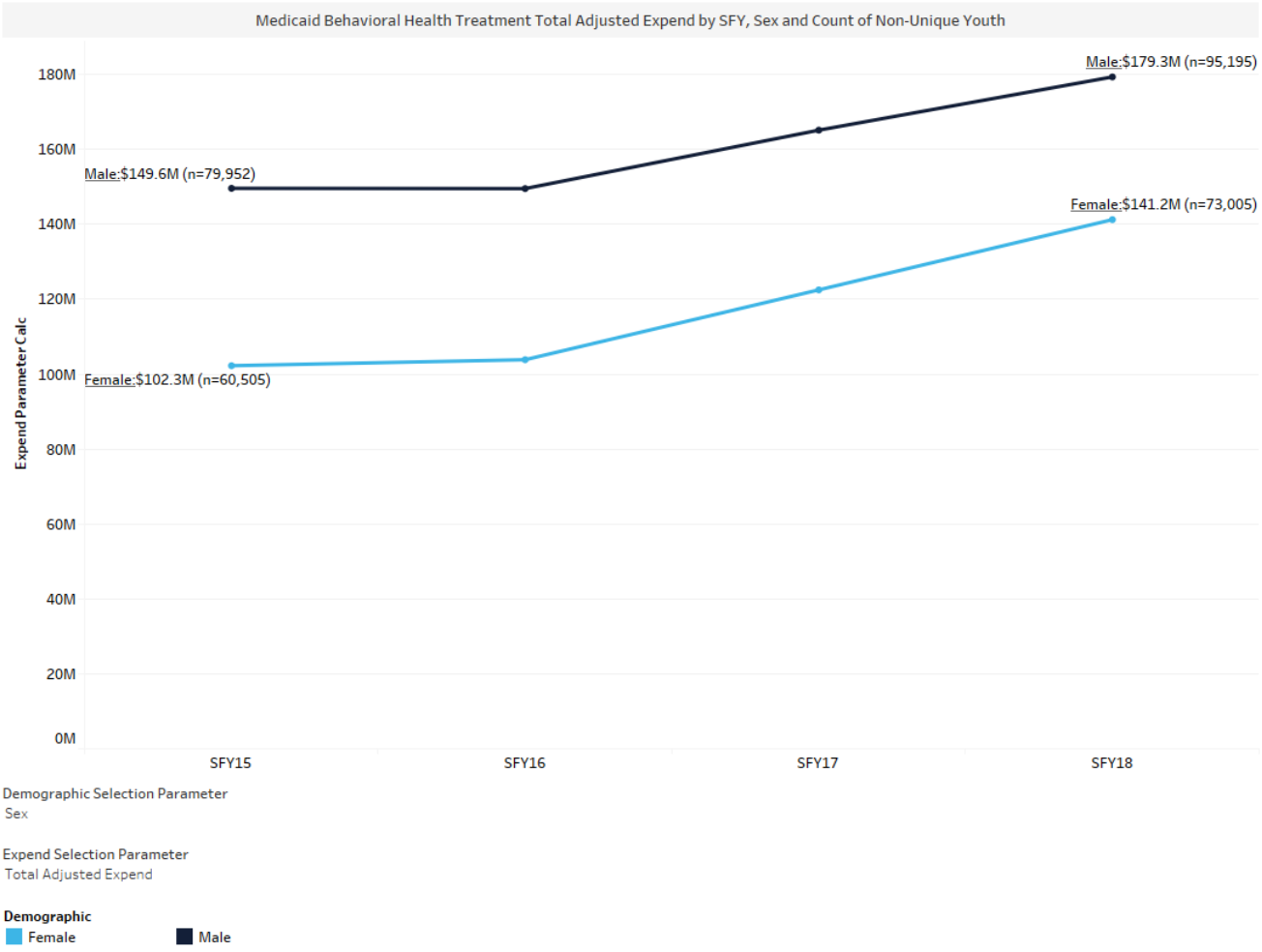

Medicaid Behavioral Health Treatment Total Expend by SFY, Race and Count of Non-Unique Youth
Expend Parameter Calc
130M
120M
110M
100M
90M
80M
70M
60M
50M
40M
30M
20M
10M
0M
White:$131.0M (n=66,354)
White:$119.8M (n=61,421)
Unknown:$111.9M (n=68,163)
Unknown:$84.0M (n=52,293)
Black:$49.0M (n=24,638)
Black:$36.8M (n=19,952)
Multiracial:$10.4M (n=6,421)
Multiracial:$7.5M (n=4,728)
Asian:$3.1M (n=1,846)
Pacific Islander:$0.3M (n=190)
Pacific Islander:$0.4M (n=184)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Race
Expend Selection Parameter
Total Expend
Demographic
Asian
Black
Multiracial
Native American Ala..
Pacific Islander
Unknown
White

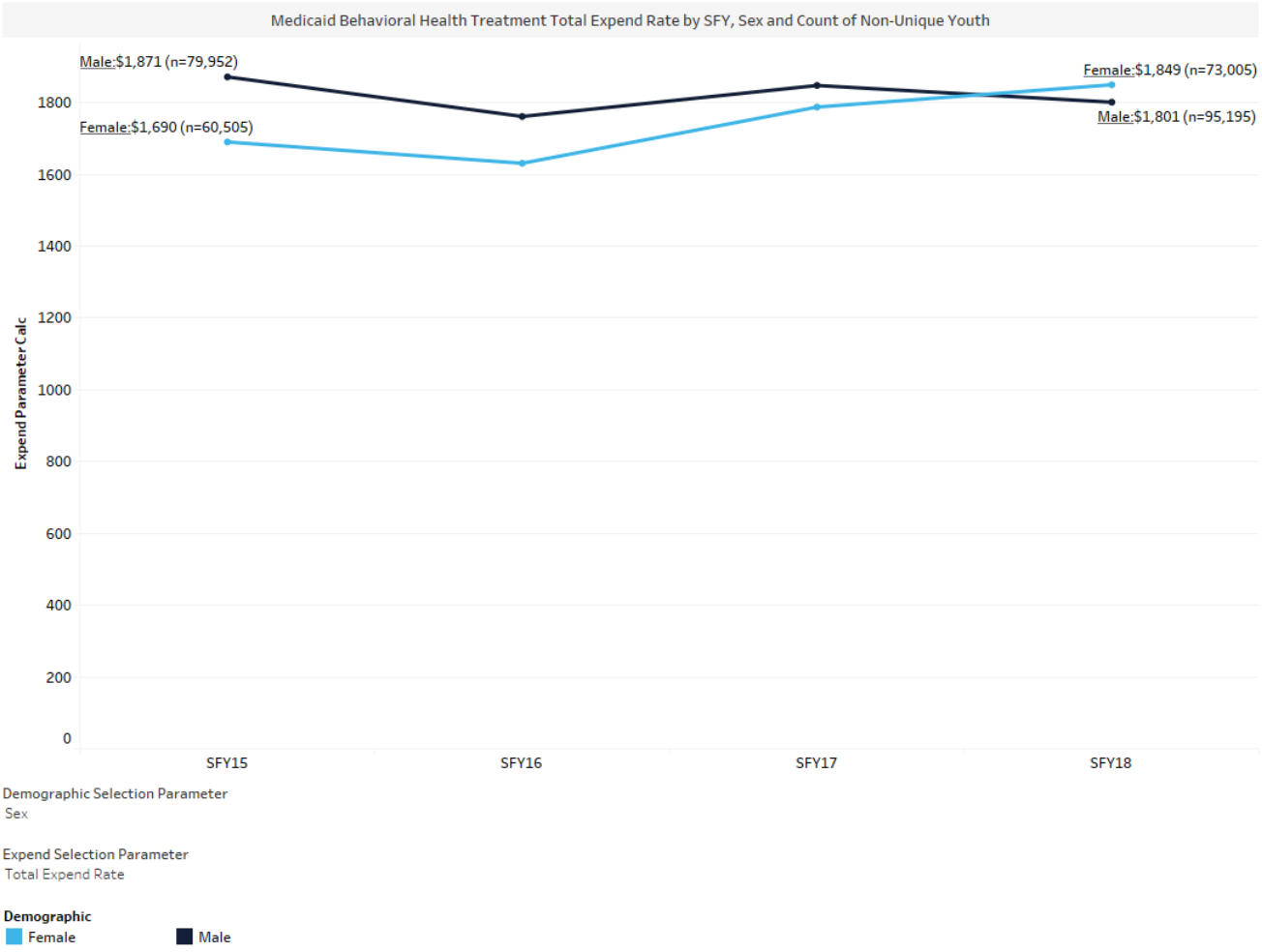

Medicaid Behavioral Health Treatment Total Adjusted Expend by SFY, Race and Count of Non-Unique Youth
Expend Parameter Calc
140M
130M
120M
110M
100M
90M
80M
70M
60M
50M
40M
30M
20M
10M
0M
White:$137.0M (n=66,354)
Unknown:$117.0M (n=68,163)
White:$119.8M (n=61,421)
Unknown:$84.0M (n=52,293)
Black:$51.2M (n=24,638)
Black:$36.8M (n=19,952)
Multiracial:$10.9M (n=6,421)
Multiracial:$7.5M (n=4,728)
Asian:$3.3M (n=1,846)
Pacific Islander:$0.3M (n=190)
Pacific Islander:$0.4M (n=184)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Race
Expend Selection Parameter
Total Adjusted Expend
Demographic
Asian
Black
Multiracial
Native American Ala..
Pacific Islander
Unknown
White

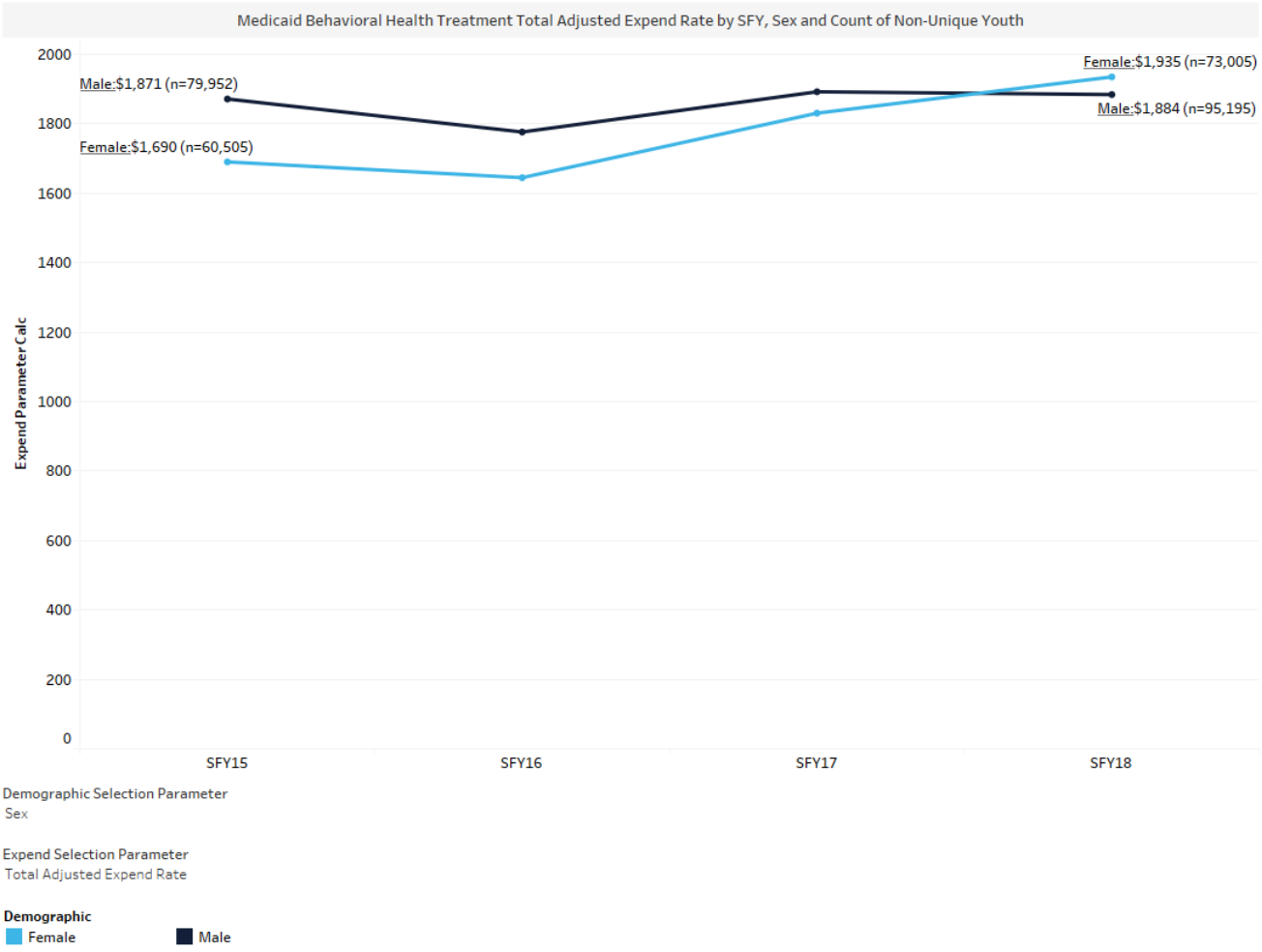

Medicaid Behavioral Health Treatment Total Expend Rate by SFY, Race and Count of Non-Unique Youth
Expend Parameter Calc
2600
2400
2200
2000
1800
1600
1400
1200
1000
800
600
400
200
0
SFY15
SFY16
SFY17
SFY18
Asian:$2,102 (n=1,338)
Black:$1,843 (n=19,952)
Unknown:$1,607 (n=52,293)
Pacific Islander:$1,528 (n=190)
Native American Alaskan Native:$1,079 (n=535)
Pacific Islander:$2,091 (n=184)
White:$1,974 (n=66,354)
Asian:$1,683 (n=1,846)
Multiracial:$1,621 (n=6,421)
Native American Alaskan Native:$1,229 (n=594)
Demographic Selection Parameter
Race
Expend Selection Parameter
Total Expend Rate
Demographic
Asian
Black
Multiracial
Native American Ala..
Pacific Islander
Unknown
White

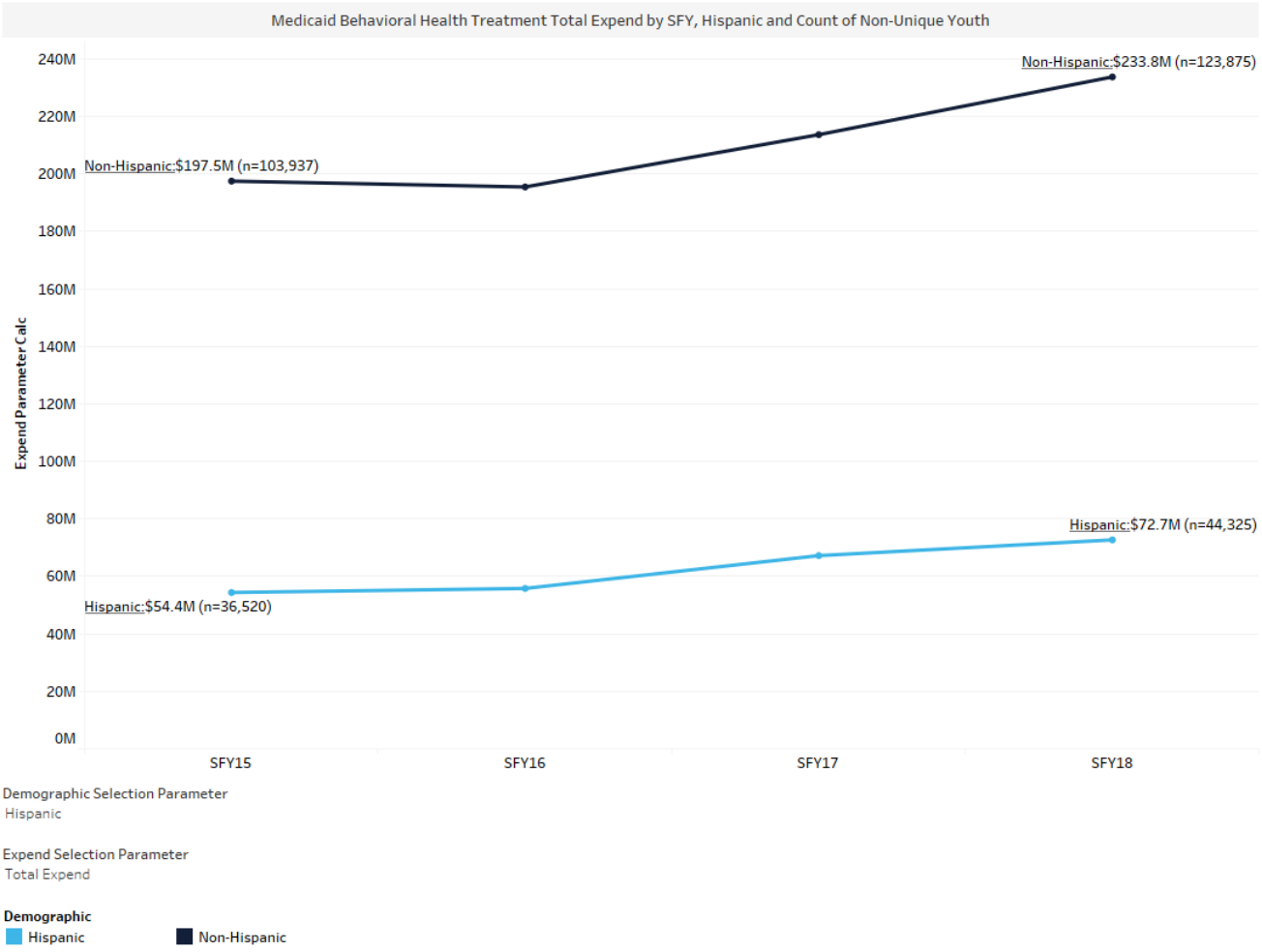

Medicaid Behavioral Health Treatment Total Adjusted Expend Rate by SFY, Race and Count of Non-Unique Youth
Expend Parameter Calc
2800
2600
2400
2200
2000
1800
1600
1400
1200
1000
800
600
400
200
0
SFY15
SFY16
SFY17
SFY18
Asian:$2,102 (n=1,338)
Black:$1,843 (n=19,952)
Unknown:$1,607 (n=52,293)
Pacific Islander:$1,528 (n=190)
Native American Alaskan Native:$1,079 (n=535)
Pacific Islander:$2,187 (n=184)
White:$2,065 (n=66,354)
Asian:$1,761 (n=1,846)
Multiracial:$1,696 (n=6,421)
Native American Alaskan Native:$1,286 (n=594)
Demographic Selection Parameter
Race
Expend Selection Parameter
Total Adjusted Expend Rate
Demographic
Asian
Black
Multiracial
Native American Ala..
Pacific Islander
Unknown
White

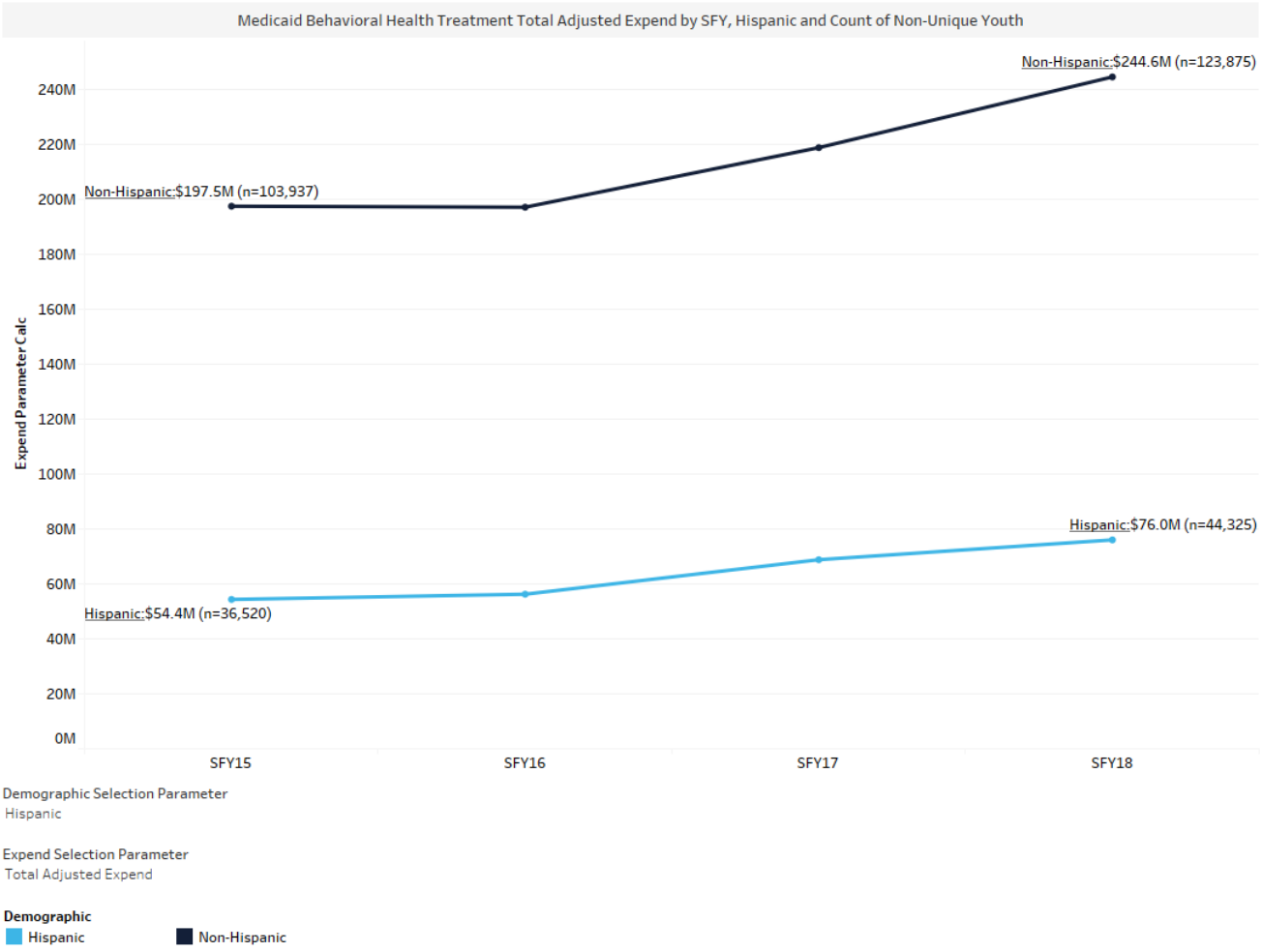

Medicaid Behavioral Health Treatment Total Expend by SFY, Sex and Count of Non-Unique Youth
180M
160M
140M
120M
100M
80M
60M
40M
20M
0M
Expend Parameter Calc
Male:$171.4M (n=95,195)
Male:$149.6M (n=79,952)
Female:$135.0M (n=73,005)
Female:$102.3M (n=60,505)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Sex
Expend Selection Parameter
Total Expend
Demographic
Female
Male

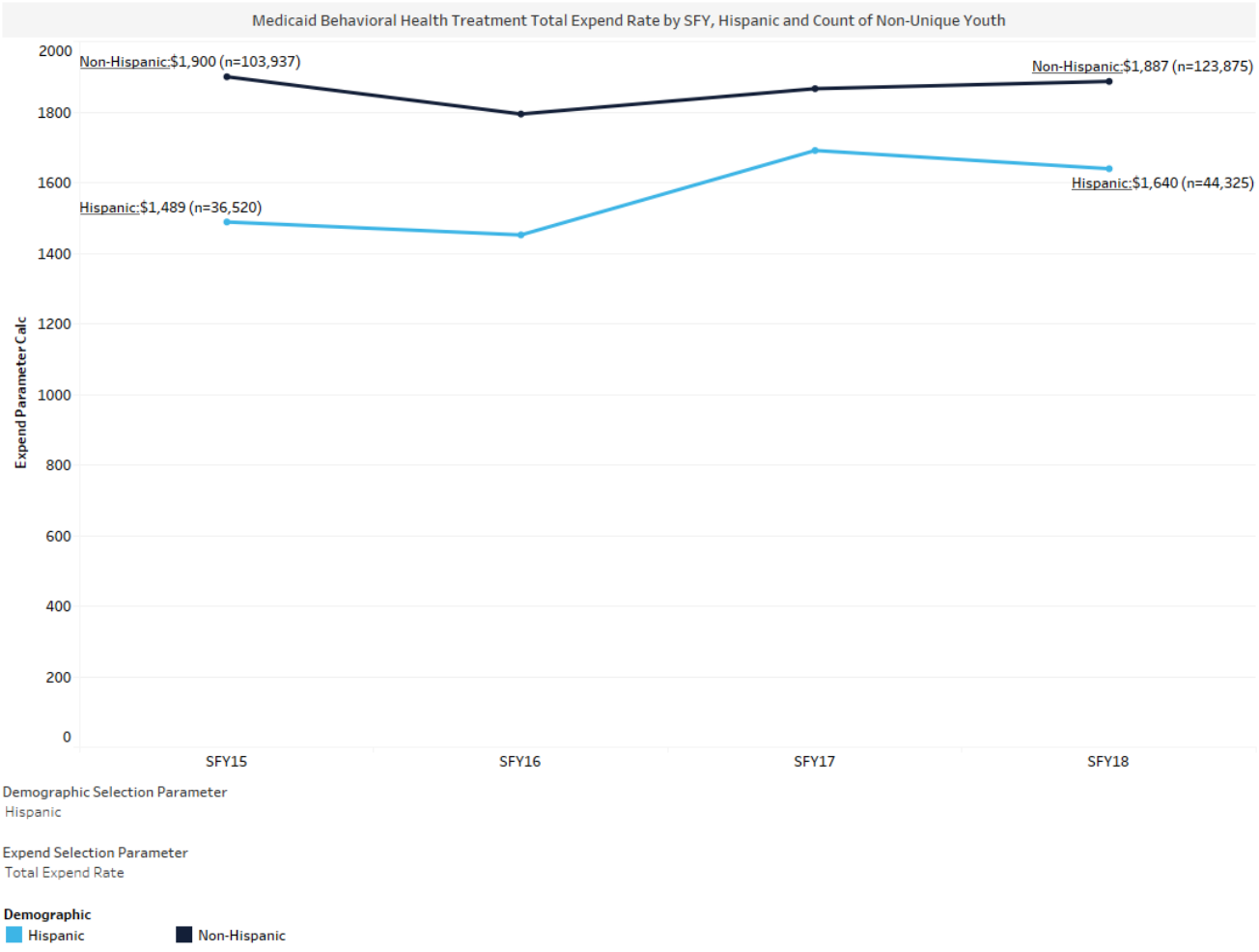

Medicaid Behavioral Health Treatment Total Adjusted Expend by SFY, Sex and Count of Non-Unique Youth
Male:$179.3M (n=95,195)
Male:$149.6M (n=79,952)
Female:$141.2M (n=73,005)
Female:$102.3M (n=60,505)
Expend Parameter Calc
180M
160M
140M
120M
100M
80M
60M
40M
20M
0M
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Sex
Expend Selection Parameter
Total Adjusted Expend
Demographic
Female
Male

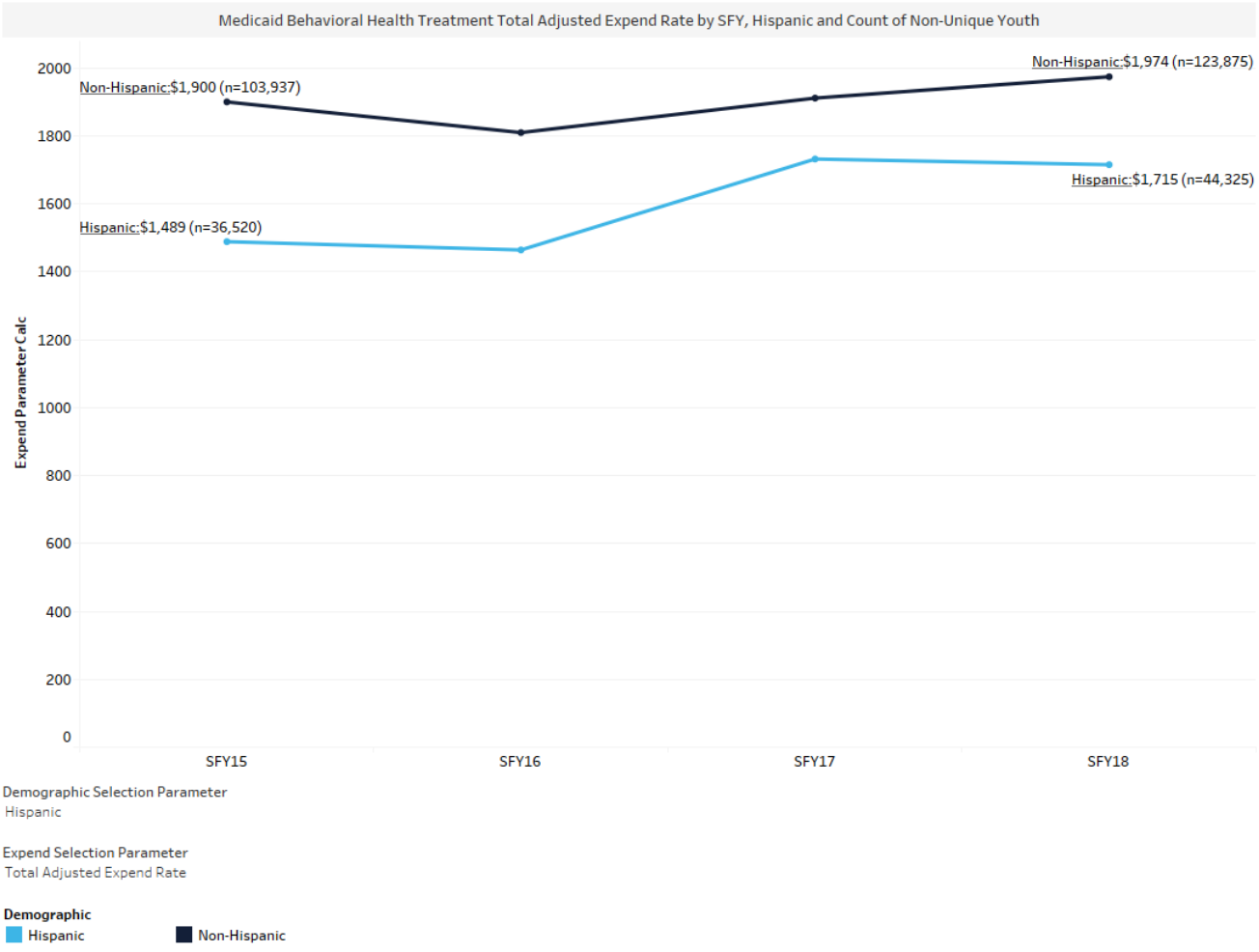

Medicaid Behavioral Health Treatment Total Expend Rate by SFY, Sex and Count of Non-Unique Youth
Male:$1,871 (n=79,952)
Female:$1,690 (n=60,505)
Female:$1,849 (n=73,005)
Male:$1,801 (n=95,195)
Expend Parameter Calc
1800
1600
1400
1200
1000
800
600
400
200
0
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Sex
Expend Selection Parameter
Total Expend Rate
Demographic
Female
Male


Medicaid Behavioral Health Treatment Total Adjusted Expend Rate by SFY, Sex and Count of Non-Unique Youth
Male:$1,871 (n=79,952)
Female:$1,690 (n=60,505)
Female:$1,935 (n=73,005)
Male:$1,884 (n=95,195)
Expend Parameter Calc
2000
1800
1600
1400
1200
1000
800
600
400
200
0
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Sex
Expend Selection Parameter
Total Adjusted Expend Rate
Demographic
Female
Male

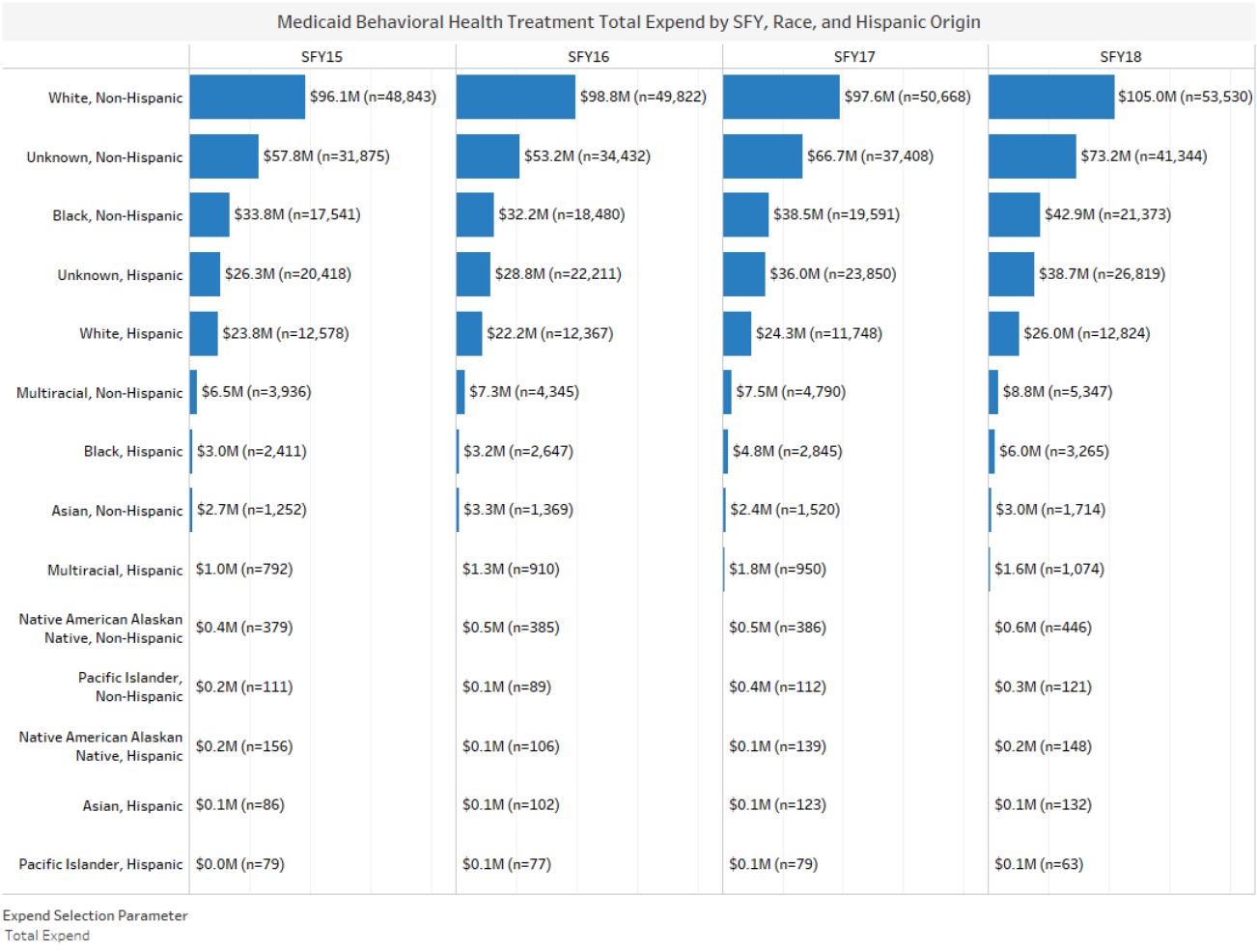

Medicaid Behavioral Health Treatment Total Expend by SFY, Hispanic and Count of Non-Unique Youth
240M
220M
200M
180M
160M
140M
120M
100M
80M
60M
40M
20M
0M
Expend Parameter Calc
Non-Hispanic:$233.8M (n=123,875)
Non-Hispanic:$197.5M (n=103,937)
Hispanic:$72.7M (n=44,325)
Hispanic:$54.4M (n=36,520)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Hispanic
Expend Selection Parameter
Total Expend
Demographic
Hispanic
Non-Hispanic

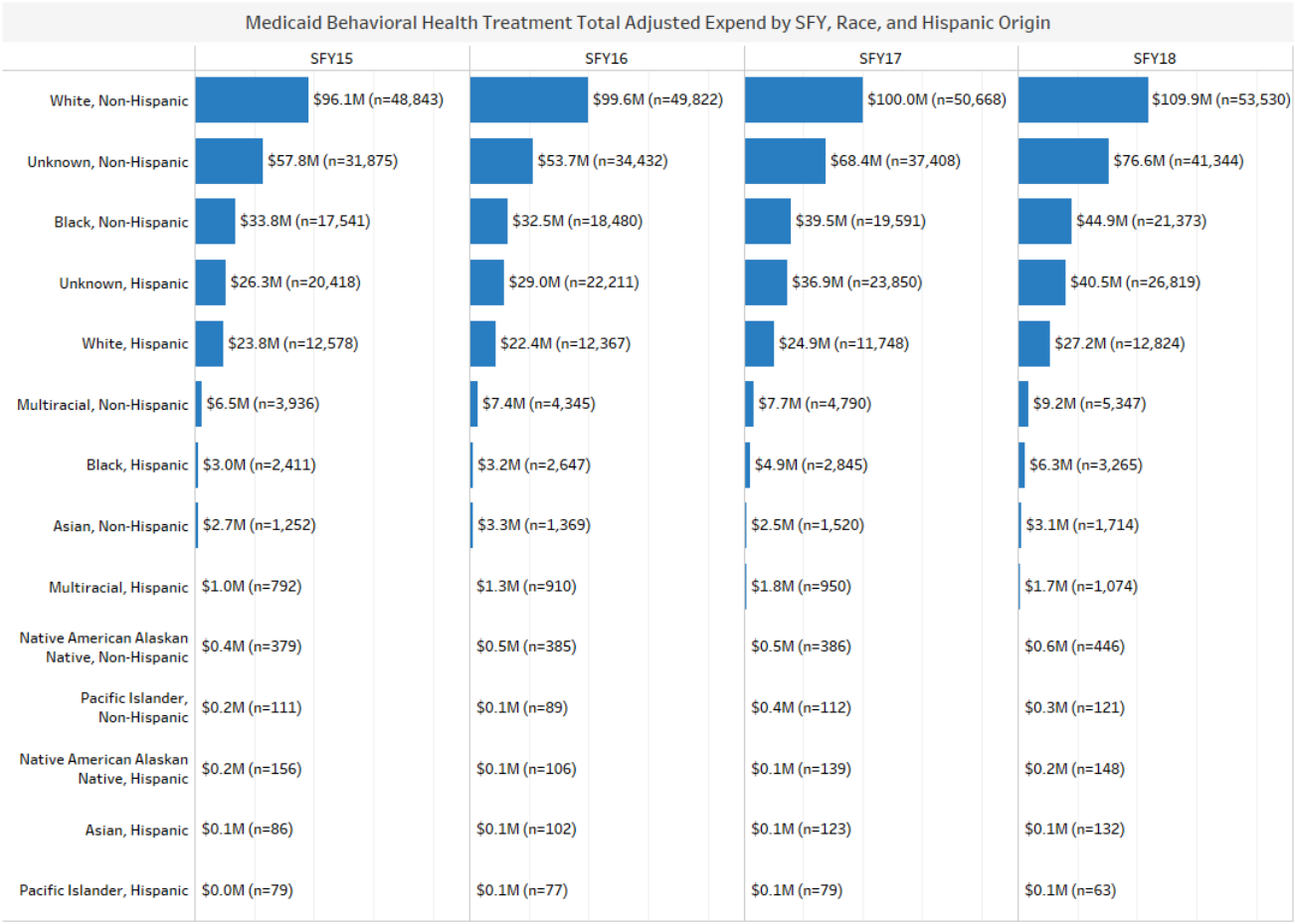

Medicaid Behavioral Health Treatment Total Adjusted Expend by SFY, Hispanic and Count of Non-Unique Youth
Non-Hispanic:$244.6M (n=123,875)
Non-Hispanic:$197.5M (n=103,937)
Hispanic:$76.0M (n=44,325)
Hispanic:$54.4M (n=36,520)
Expend Parameter Calc
240M
220M
200M
180M
160M
140M
120M
100M
80M
60M
40M
20M
0M
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Hispanic
Expend Selection Parameter
Total Adjusted Expend
Demographic
Hispanic
Non-Hispanic

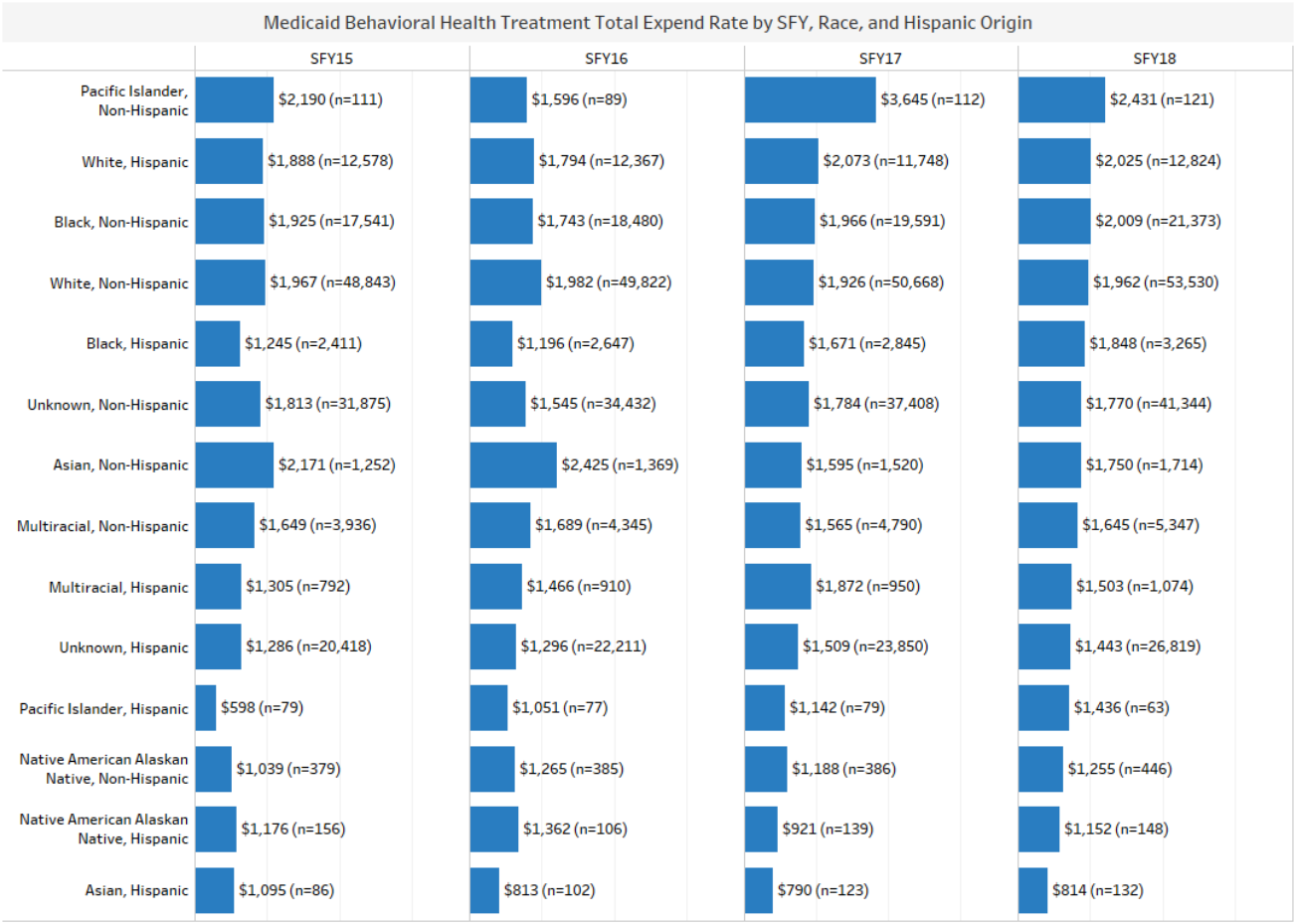

Medicaid Behavioral Health Treatment Total Expend Rate by SFY, Hispanic and Count of Non-Unique Youth
Non-Hispanic:$1,900 (n=103,937)
Non-Hispanic:$1,887 (n=123,875)
Hispanic:$1,489 (n=36,520)
Hispanic:$1,640 (n=44,325)
Expend Parameter Calc
2000
1800
1600
1400
1200
1000
800
600
400
200
0
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Hispanic
Expend Selection Parameter
Total Expend Rate
Demographic
Hispanic
Non-Hispanic

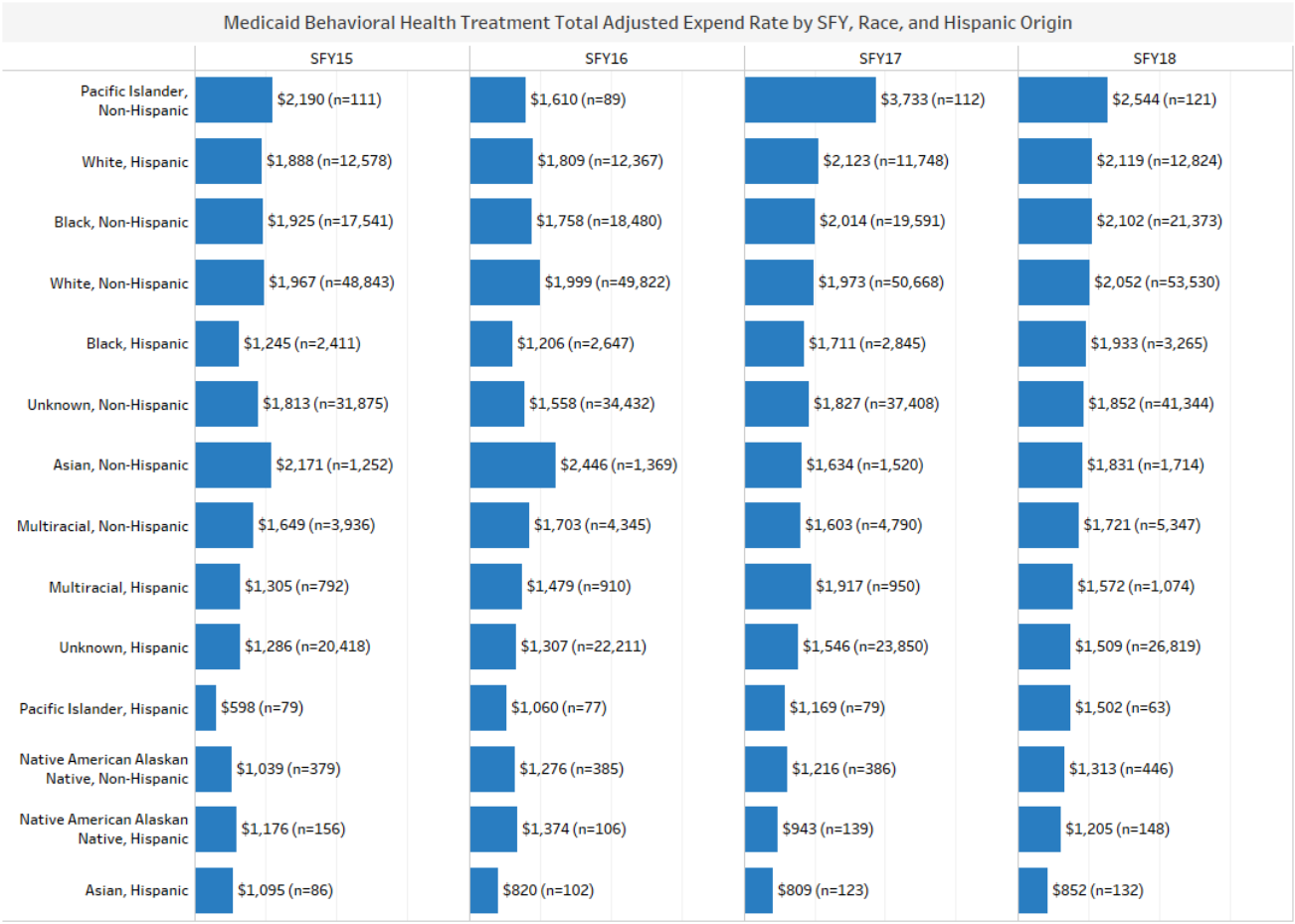

Medicaid Behavioral Health Treatment Total Adjusted Expend Rate by SFY, Hispanic and Count of Non-Unique Youth
Non-Hispanic:$1,974 (n=123,875)
Non-Hispanic:$1,900 (n=103,937)
Hispanic:$1,715 (n=44,325)
Hispanic:$1,489 (n=36,520)
Expend Parameter Calc
2000
1800
1600
1400
1200
1000
800
600
400
200
0
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Hispanic
Expend Selection Parameter
Total Adjusted Expend Rate
Demographic
Hispanic
Non-Hispanic

	Contents
Section 4:	**A. Medicaid Behavioral Health Treatment Expend by SFY, Race, and Hispanic Origin (Non-Unique Youth)** **a. Total Expend** **b. Total Adjusted Expend** **c. Total Expend Rate** **d. Total Adjusted Expend Rate**


Medicaid Behavioral Health Treatment Total Expend by SFY, Race, and Hispanic Origin
SFY15
SFY16
SFY17
SFY18
White, Non-Hispanic
$96.1M (n=48,843)
$98.8M (n=49,822)
$97.6M (n=50,668)
$105.0M (n=53,530)
Unknown, Non-Hispanic
$57.8M (n=31,875)
$53.2M (n=34,432)
$66.7M (n=37,408)
$73.2M (n=41,344)
Black, Non-Hispanic
$33.8M (n=17,541)
$32.2M (n=18,480)
$38.5M (n=19,591)
$42.9M (n=21,373)
Unknown, Hispanic
$26.3M (n=20,418)
$28.8M (n=22,211)
$36.0M (n=23,850)
$38.7M (n=26,819)
White, Hispanic
$23.8M (n=12,578)
$22.2M (n=12,367)
$24.3M (n=11,748)
$26.0M (n=12,824)
Multiracial, Non-Hispanic
$6.5M (n=3,936)
$7.3M (n=4,345)
$7.5M (n=4,790)
$8.8M (n=5,347)
Black, Hispanic
$3.0M (n=2,411)
$3.2M (n=2,647)
$4.8M (n=2,845)
$6.0M (n=3,265)
Asian, Non-Hispanic
$2.7M (n=1,252)
$3.3M (n=1,369)
$2.4M (n=1,520)
$3.0M (n=1,714)
Multiracial, Hispanic
$1.0M (n=792)
$1.3M (n=910)
$1.8M (n=950)
$1.6M (n=1,074)
Native American Alaskan Native, Non-Hispanic
$0.4M (n=379)
$0.5M (n=385)
$0.5M (n=386)
$0.6M (n=446)
Pacific Islander, Non-Hispanic
$0.2M (n=111)
$0.1M (n=89)
$0.4M (n=112)
$0.3M (n=121)
Native American Alaskan Native, Hispanic
$0.2M (n=156)
$0.1M (n=106)
$0.1M (n=139)
$0.2M (n=148)
Asian, Hispanic
$0.1M (n=86)
$0.1M (n=102)
$0.1M (n=123)
$0.1M (n=132)
Pacific Islander, Hispanic
$0.0M (n=79)
$0.1M (n=77)
$0.1M (n=79)
$0.1M (n=63)
Expend Selection Parameter
Total Expend

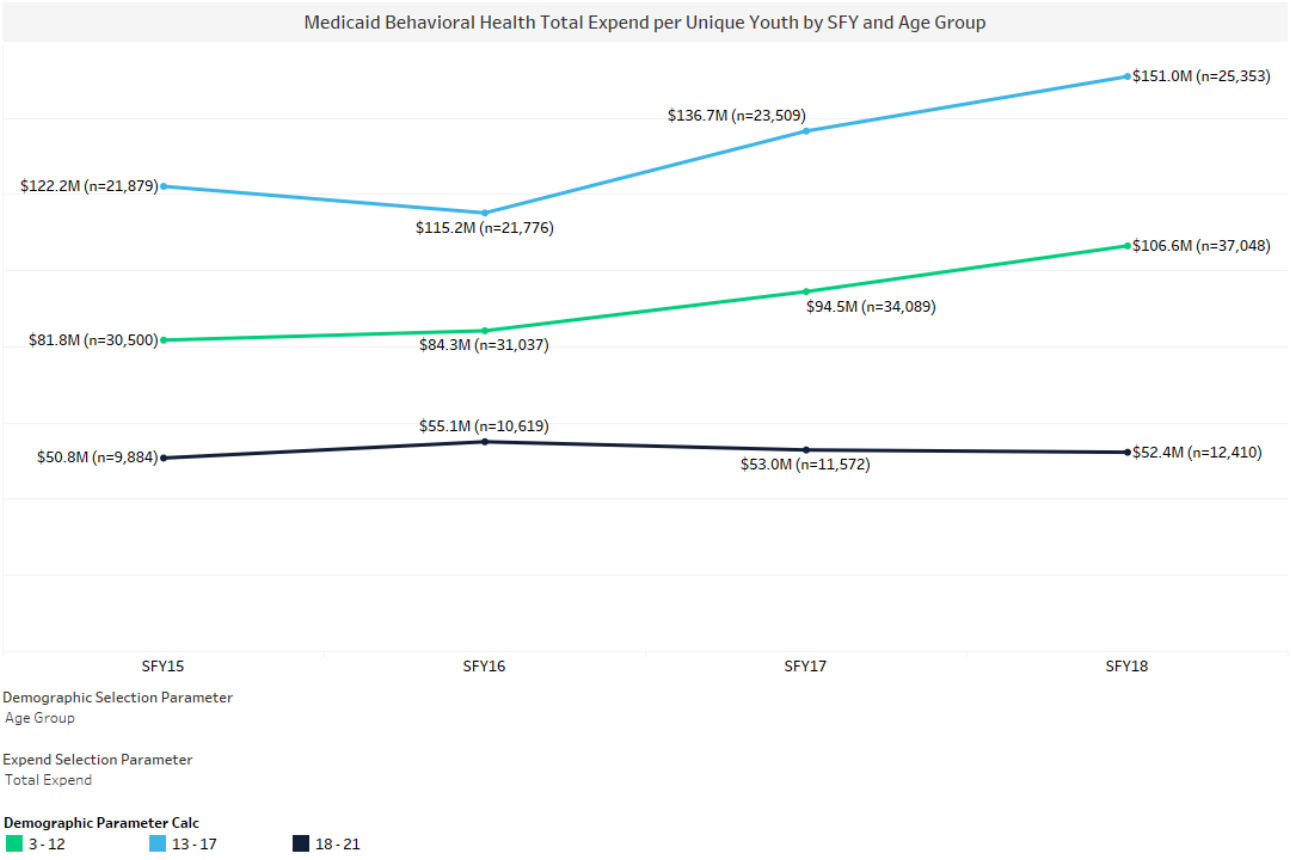

Medicaid Behavioral Health Treatment Total Adjusted Expend by SFY, Race, and Hispanic Origin
SFY15
SFY16
SFY17
SFY18
White, Non-Hispanic
$96.1M (n=48,843)
$99.6M (n=49,822)
$100.0M (n=50,668)
$109.9M (n=53,530)
Unknown, Non-Hispanic
$57.8M (n=31,875)
$53.7M (n=34,432)
$68.4M (n=37,408)
$76.6M (n=41,344)
Black, Non-Hispanic
$33.8M (n=17,541)
$32.5M (n=18,480)
$39.5M (n=19,591)
$44.9M (n=21,373)
Unknown, Hispanic
$26.3M (n=20,418)
$29.0M (n=22,211)
$36.9M (n=23,850)
$40.5M (n=26,819)
White, Hispanic
$23.8M (n=12,578)
$22.4M (n=12,367)
$24.9M (n=11,748)
$27.2M (n=12,824)
Multiracial, Non-Hispanic
$6.5M (n=3,936)
$7.4M (n=4,345)
$7.7M (n=4,790)
$9.2M (n=5,347)
Black, Hispanic
$3.0M (n=2,411)
$3.2M (n=2,647)
$4.9M (n=2,845)
$6.3M (n=3,265)
Asian, Non-Hispanic
$2.7M (n=1,252)
$3.3M (n=1,369)
$2.5M (n=1,520)
$3.1M (n=1,714)
Multiracial, Hispanic
$1.0M (n=792)
$1.3M (n=910)
$1.8M (n=950)
$1.7M (n=1,074)
Native American Alaskan Native, Non-Hispanic
$0.4M (n=379)
$0.5M (n=385)
$0.5M (n=386)
$0.6M (n=446)
Pacific Islander, Non-Hispanic
$0.2M (n=111)
$0.1M (n=89)
$0.4M (n=112)
$0.3M (n=121)
Native American Alaskan Native, Hispanic
$0.2M (n=156)
$0.1M (n=106)
$0.1M (n=139)
$0.2M (n=148)
Asian, Hispanic
$0.1M (n=86)
$0.1M (n=102)
$0.1M (n=123)
$0.1M (n=132)
Pacific Islander, Hispanic
$0.0M (n=79)
$0.1M (n=77)
$0.1M (n=79)
$0.1M (n=63)
Expend Selection Parameter
Total Adjusted Expend

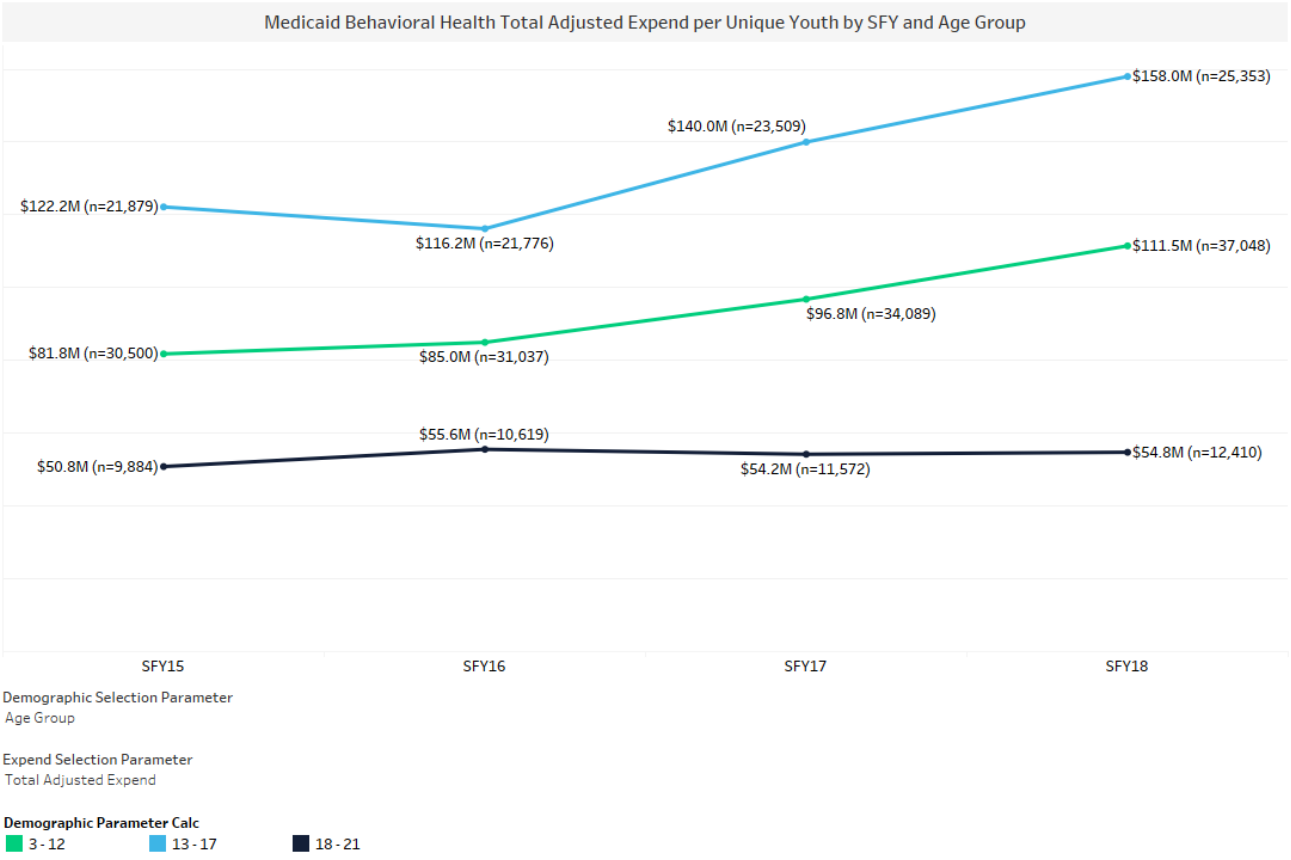

Medicaid Behavioral Health Treatment Total Expend Rate by SFY, Race, and Hispanic Origin
SFY15
SFY16
SFY17
SFY18
Pacific Islander, Non-Hispanic
$2,190 (n=111)
$1,596 (n=89)
$3,645 (n=112)
$2,431 (n=121)
White, Hispanic
$1,888 (n=12,578)
$1,794 (n=12,367)
$2,073 (n=11,748)
$2,025 (n=12,824)
Black, Non-Hispanic
$1,925 (n=17,541)
$1,743 (n=18,480)
$1,966 (n=19,591)
$2,009 (n=21,373)
White, Non-Hispanic
$1,967 (n=48,843)
$1,982 (n=49,822)
$1,926 (n=50,668)
$1,962 (n=53,530)
Black, Hispanic
$1,245 (n=2,411)
$1,196 (n=2,647)
$1,671 (n=2,845)
$1,848 (n=3,265)
Unknown, Non-Hispanic
$1,813 (n=31,875)
$1,545 (n=34,432)
$1,784 (n=37,408)
$1,770 (n=41,344)
Asian, Non-Hispanic
$2,171 (n=1,252)
$2,425 (n=1,369)
$1,595 (n=1,520)
$1,750 (n=1,714)
Multiracial, Non-Hispanic
$1,649 (n=3,936)
$1,689 (n=4,345)
$1,565 (n=4,790)
$1,645 (n=5,347)
Multiracial, Hispanic
$1,305 (n=792)
$1,466 (n=910)
$1,872 (n=950)
$1,503 (n=1,074)
Unknown, Hispanic
$1,286 (n=20,418)
$1,296 (n=22,211)
$1,509 (n=23,850)
$1,443 (n=26,819)
Pacific Islander, Hispanic
$598 (n=79)
$1,051 (n=77)
$1,142 (n=79)
$1,436 (n=63)
Native American Alaskan Native, Non-Hispanic
$1,039 (n=379)
$1,265 (n=385)
$1,188 (n=386)
$1,255 (n=446)
Native American Alaskan Native, Hispanic
$1,176 (n=156)
$1,362 (n=106)
$921 (n=139)
$1,152 (n=148)
Asian, Hispanic
$1,095 (n=86)
$813 (n=102)
$790 (n=123)
$814 (n=132)
Expend Selection Parameter
Total Expend Rate

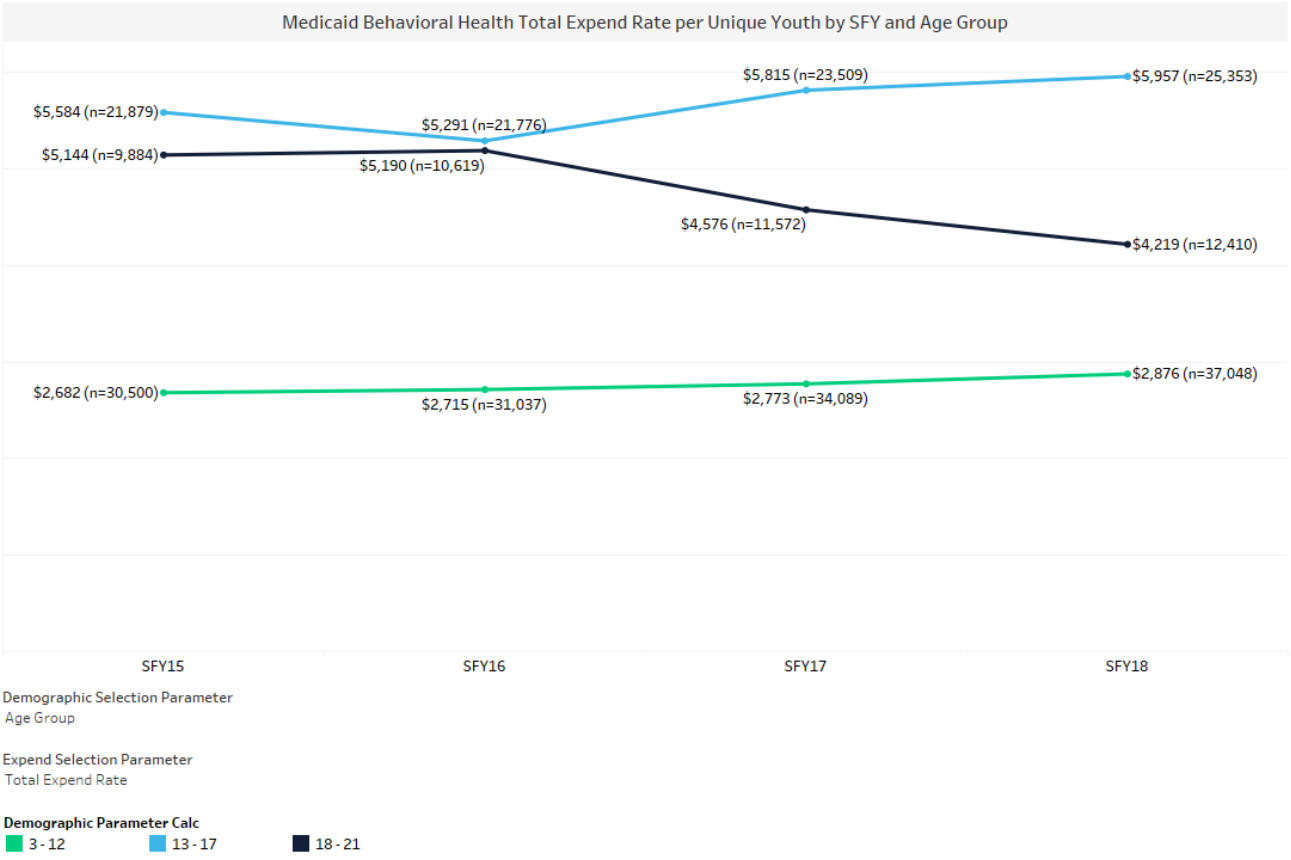


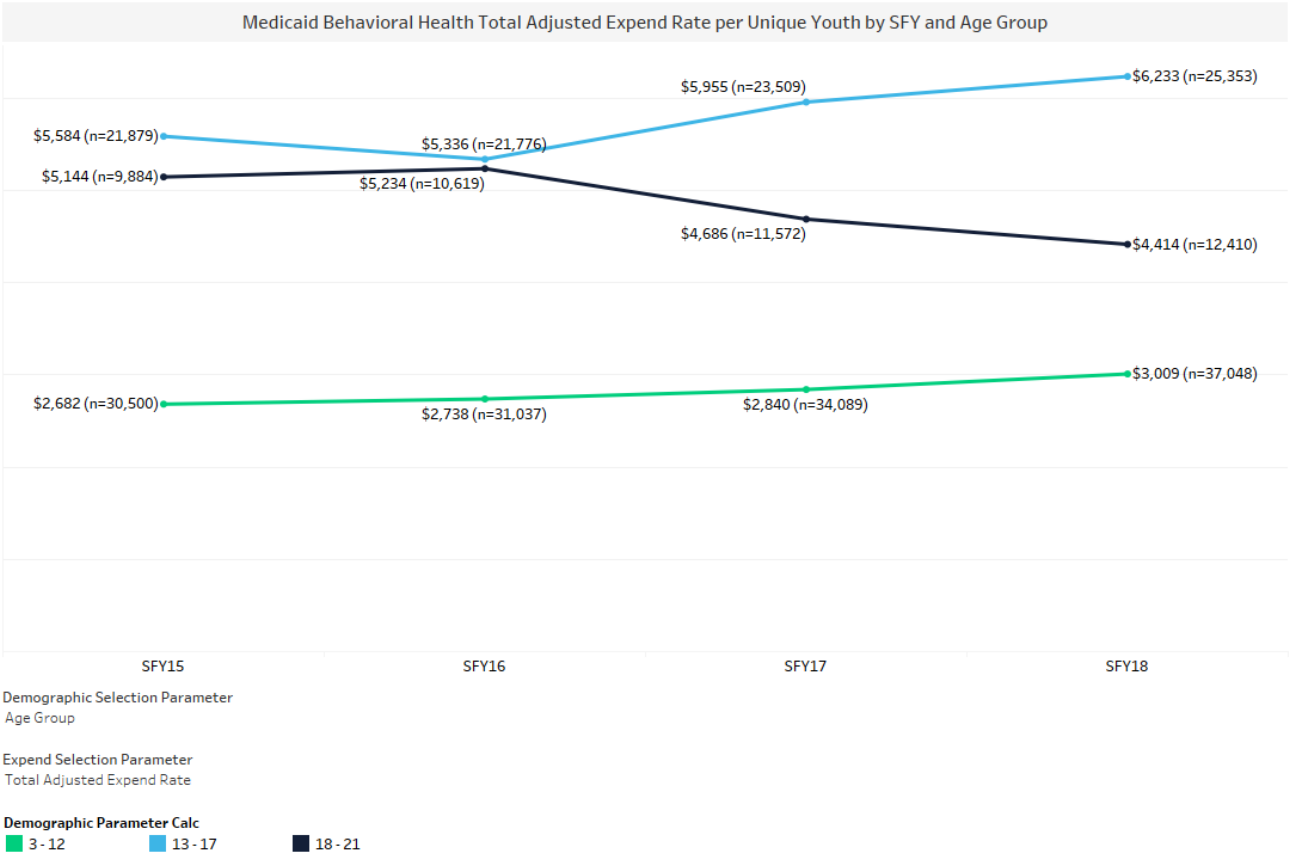
Expend Selection Parameter
Total Adjusted Expend Rate

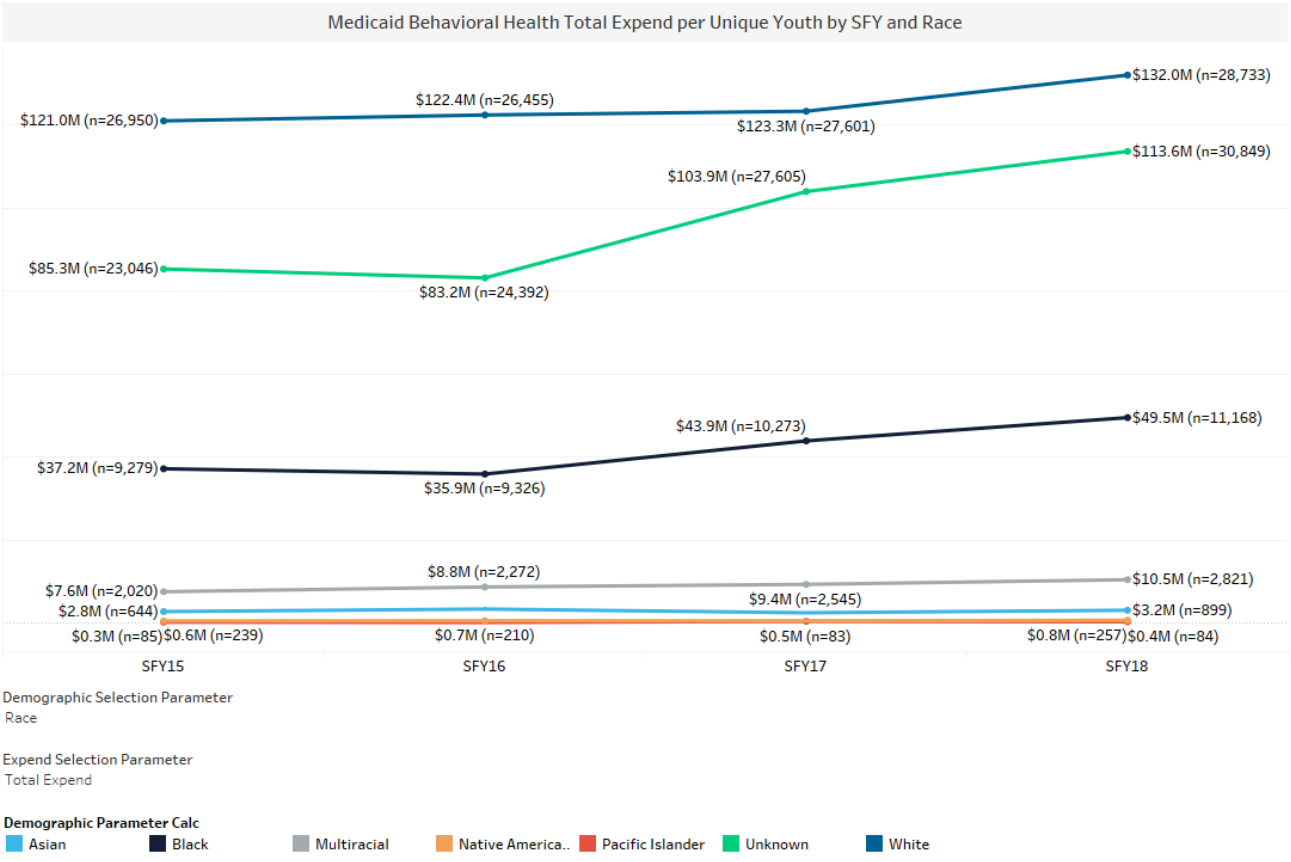
	Contents
Section 5:	**B. Medicaid Behavioral Health Expend per Unique Youth by SFY and Demographic** **a. Metrics** **i. Total Expend** **ii. Total Adjusted Expend** **iii. Total Expend Rate** **iv. Total Adjusted Expend Rate** **b. Demographics** **i. Age Group** **ii. Race** **iii. Sex** **iv. Hispanic Origin**


Medicaid Behavioral Health Total Expend per Unique Youth by SFY and Age Group
$151.0M (n=25,353)
$136.7M (n=23,509)
$122.2M (n=21,879)
$115.2M (n=21,776)
$106.6M (n=37,048)
$94.5M (n=34,089)
$81.8M (n=30,500)
$84.3M (n=31,037)
$55.1M (n=10,619)
$50.8M (n=9,884)
$53.0M (n=11,572)
$52.4M (n=12,410)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Age Group
Expend Selection Parameter
Total Expend
Demographic Parameter Calc
3 - 12
13 - 17
18 - 21


Medicaid Behavioral Health Total Adjusted Expend per Unique Youth by SFY and Age Group
$158.0M (n=25,353)
$140.0M (n=23,509)
$122.2M (n=21,879)
$116.2M (n=21,776)
$111.5M (n=37,048)
$96.8M (n=34,089)
$81.8M (n=30,500)
$85.0M (n=31,037)
$55.6M (n=10,619)
$50.8M (n=9,884)
$54.2M (n=11,572)
$54.8M (n=12,410)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Age Group
Expend Selection Parameter
Total Adjusted Expend
Demographic Parameter Calc
3 - 12
13 - 17
18 - 21


Medicaid Behavioral Health Total Expend Rate per Unique Youth by SFY and Age Group
$5,584 (n=21,879)
$5,291 (n=21,776)
$5,815 (n=23,509)
$5,957 (n=25,353)
$5,144 (n=9,884)
$5,190 (n=10,619)
$4,576 (n=11,572)
$4,219 (n=12,410)
$2,682 (n=30,500)
$2,715 (n=31,037)
$2,773 (n=34,089)
$2,876 (n=37,048)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Age Group
Expend Selection Parameter
Total Expend Rate
Demographic Parameter Calc
3 - 12
13 - 17
18 - 21


Medicaid Behavioral Health Total Adjusted Expend Rate per Unique Youth by SFY and Age Group
$5,584 (n=21,879)
$5,336 (n=21,776)
$5,955 (n=23,509)
$6,233 (n=25,353)
$5,144 (n=9,884)
$5,234 (n=10,619)
$4,686 (n=11,572)
$4,414 (n=12,410)
$2,682 (n=30,500)
$2,738 (n=31,037)
$2,840 (n=34,089)
$3,009 (n=37,048)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Age Group
Expend Selection Parameter
Total Adjusted Expend Rate
Demographic Parameter Calc
3 - 12
13 - 17
18 - 21


Medicaid Behavioral Health Total Expend per Unique Youth by SFY and Race
$121.0M (n=26,950)
$122.4M (n=26,455)
$123.3M (n=27,601)
$132.0M (n=28,733)
$85.3M (n=23,046)
$83.2M (n=24,392)
$103.9M (n=27,605)
$113.6M (n=30,849)
$37.2M (n=9,279)
$35.9M (n=9,326)
$43.9M (n=10,273)
$49.5M (n=11,168)
$7.6M (n=2,020)
$8.8M (n=2,272)
$10.5M (n=2,821)
$2.8M (n=644)
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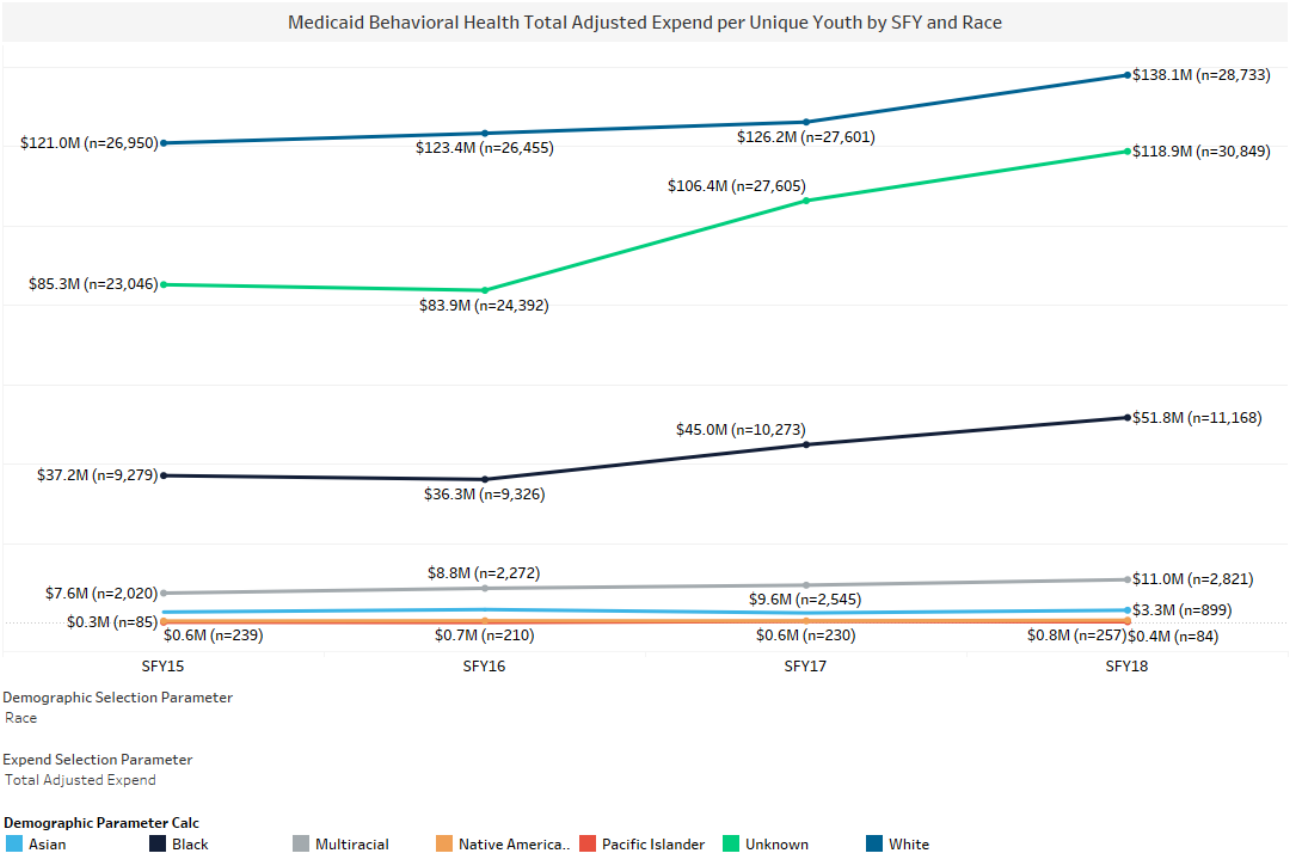
$0.6M (n=239)
$0.7M (n=210)
$0.5M (n=83)
$0.8M (n=257)
$0.4M (n=84)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Race
Expend Selection Parameter
Total Expend
Demographic Parameter Calc
Asian
Black
Multiracial
Native America..
Pacific Islander
Unknown
White


Medicaid Behavioral Health Total Adjusted Expend per Unique Youth by SFY and Race
$121.0M (n=26,950)
$123.4M (n=26,455)
$126.2M (n=27,601)
$138.1M (n=28,733)
$85.3M (n=23,046)
$83.9M (n=24,392)
$106.4M (n=27,605)
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$36.3M (n=9,326)
$45.0M (n=10,273)
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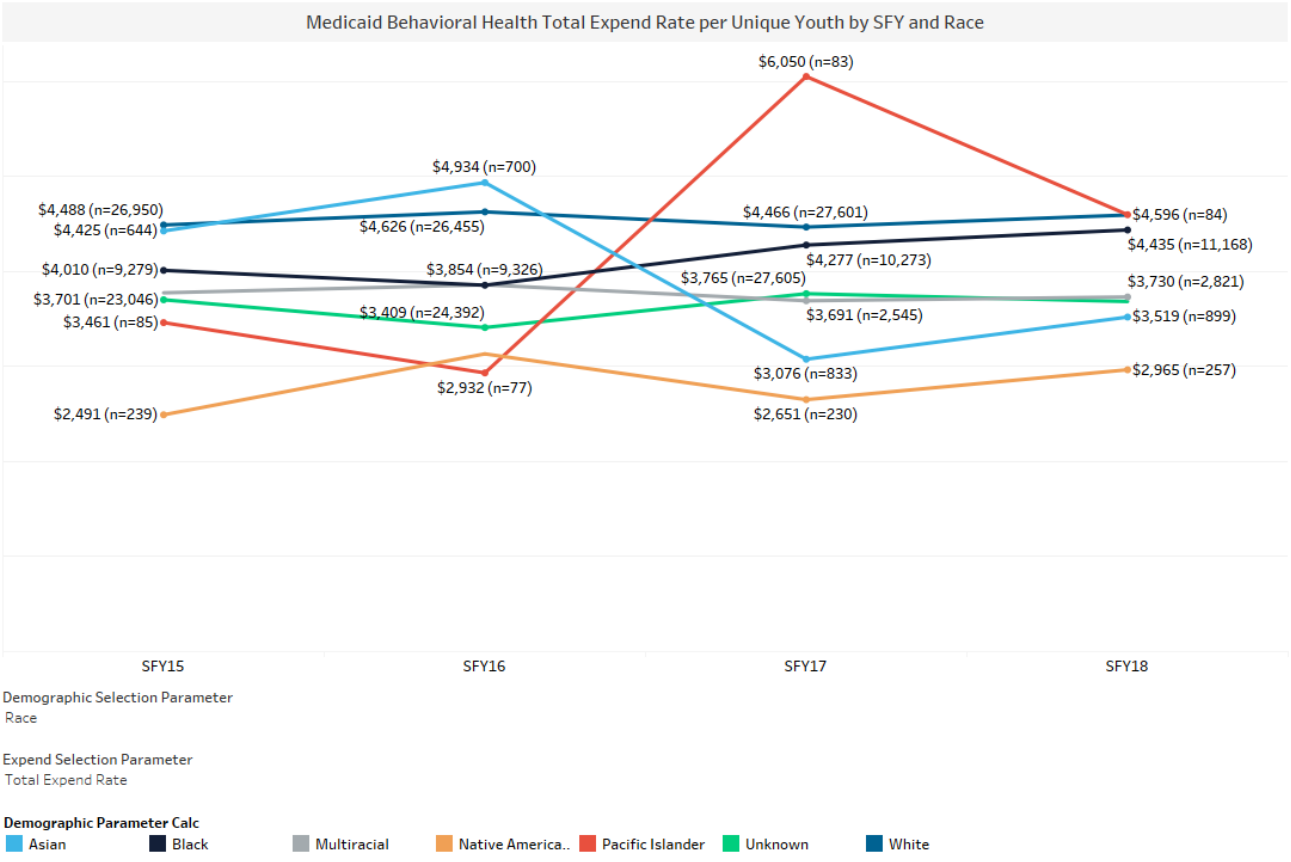
$0.6M (n=239)
$0.7M (n=210)
$0.6M (n=230)
$9.6M (n=2,545)
$0.8M (n=257)
$3.3M (n=899)
$0.4M (n=84)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Race
Expend Selection Parameter
Total Adjusted Expend
Demographic Parameter Calc
Asian
Black
Multiracial
Native America..
Pacific Islander
Unknown
White


Medicaid Behavioral Health Total Expend Rate per Unique Youth by SFY and Race
$6,050 (n=83)
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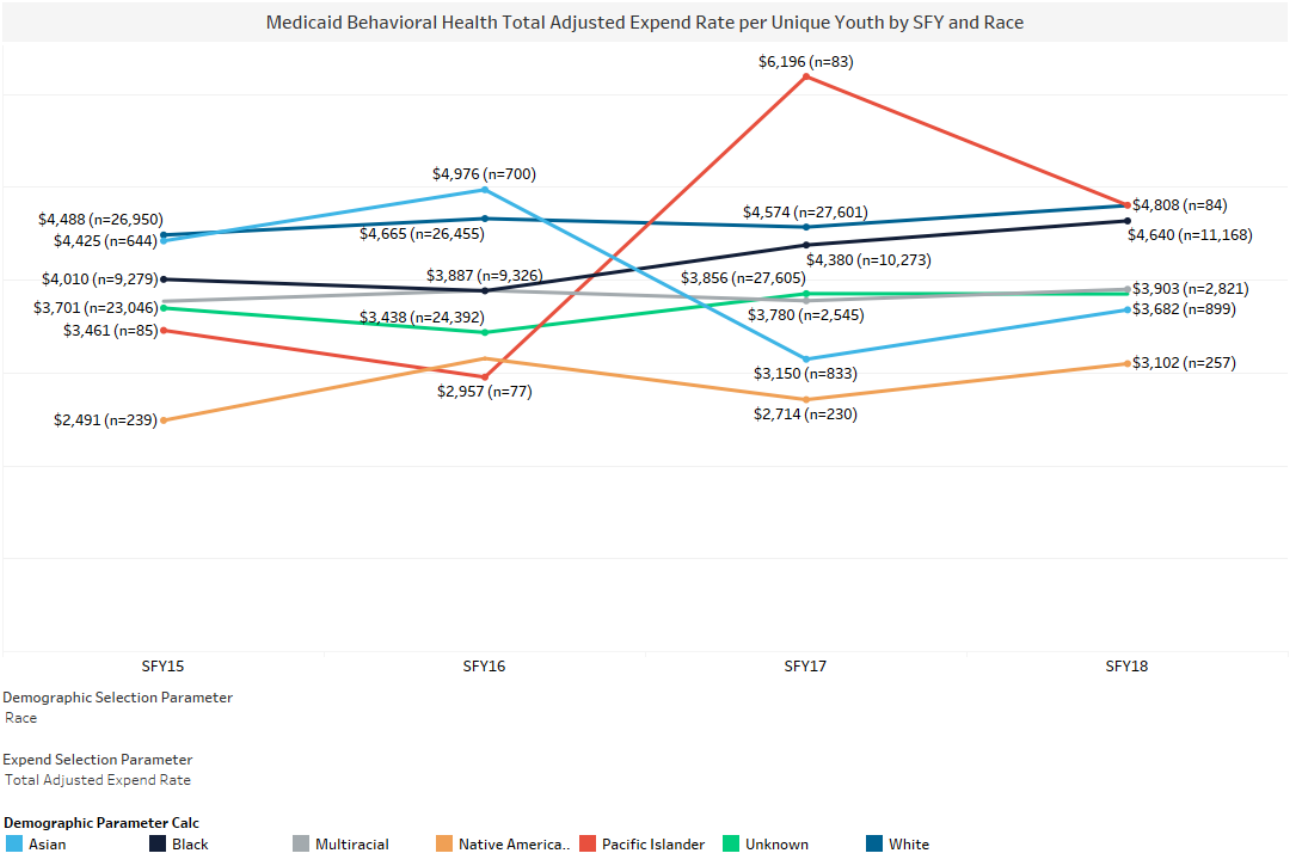
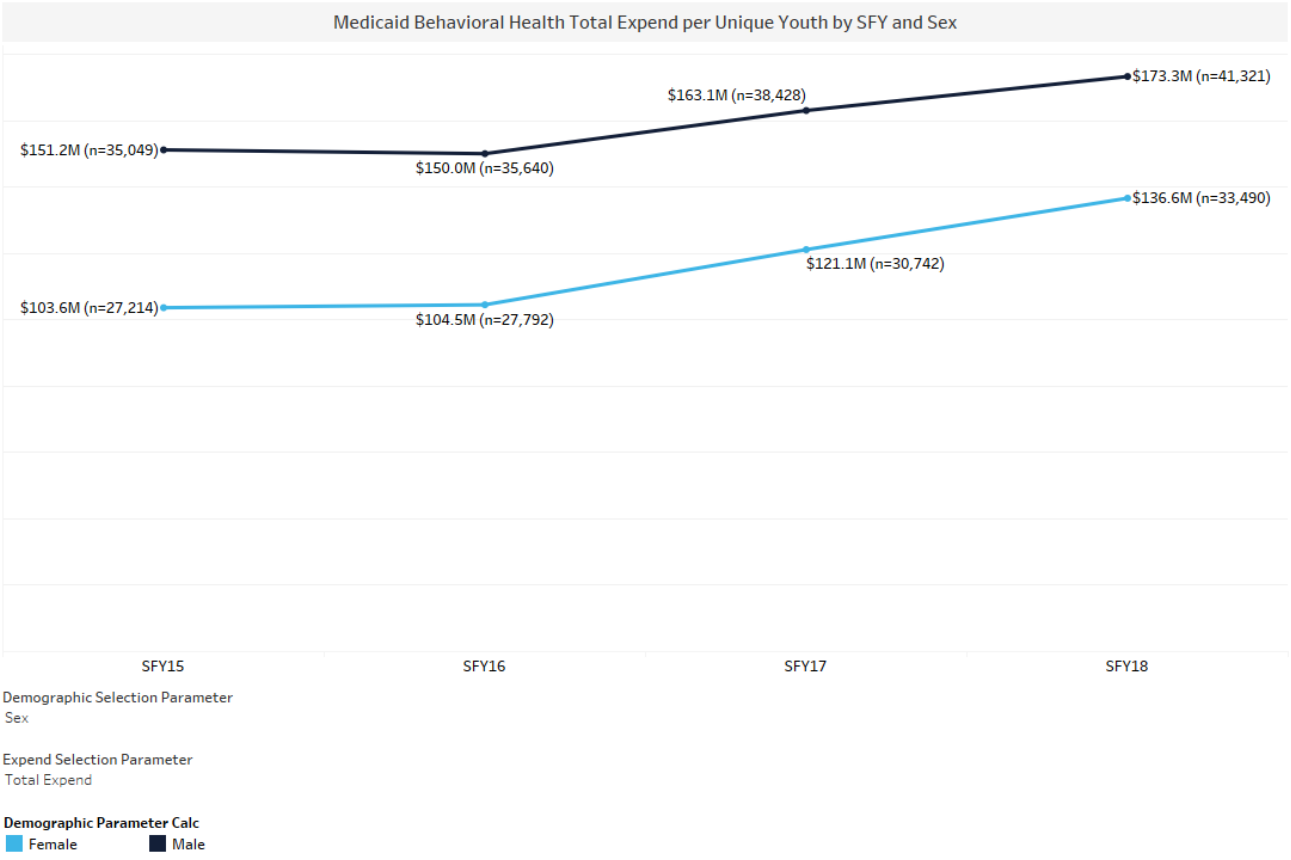
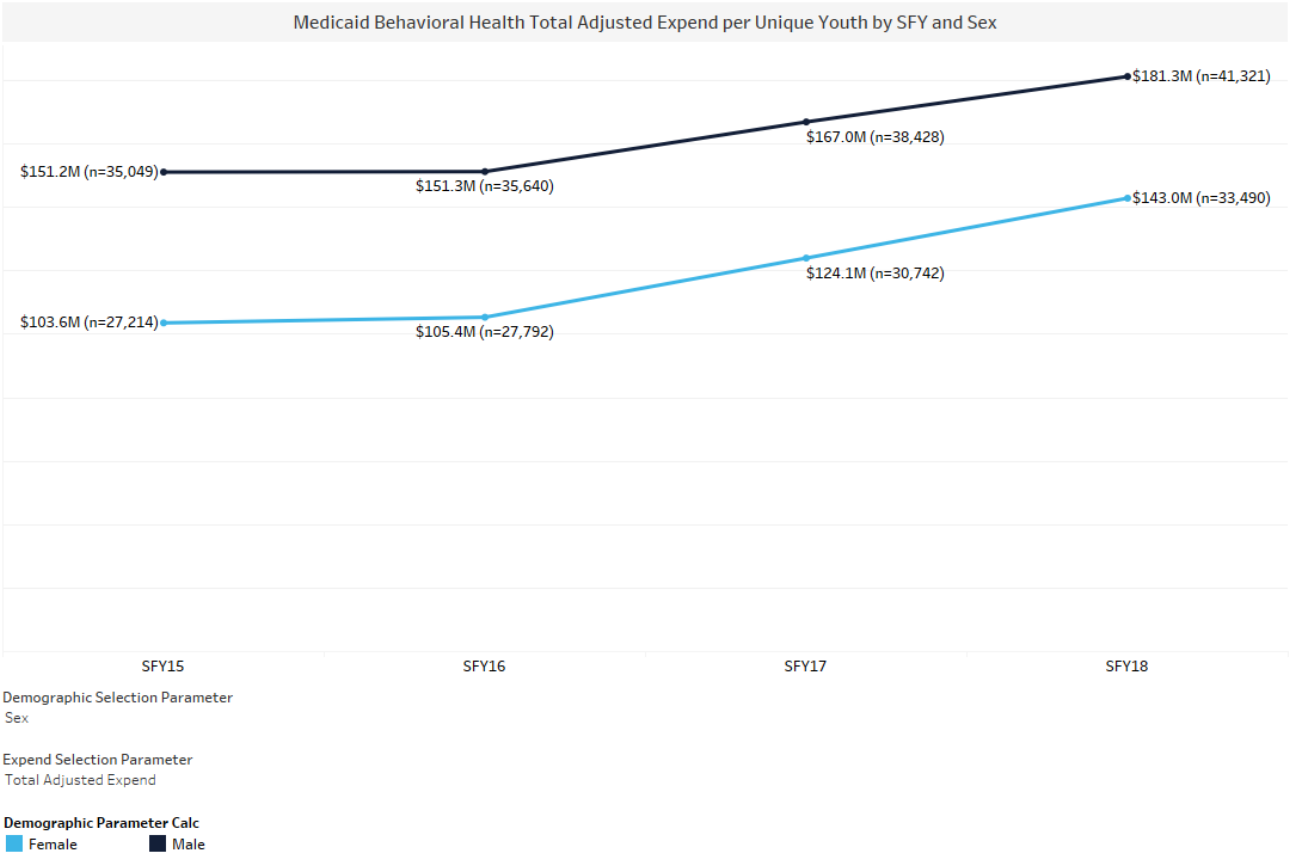
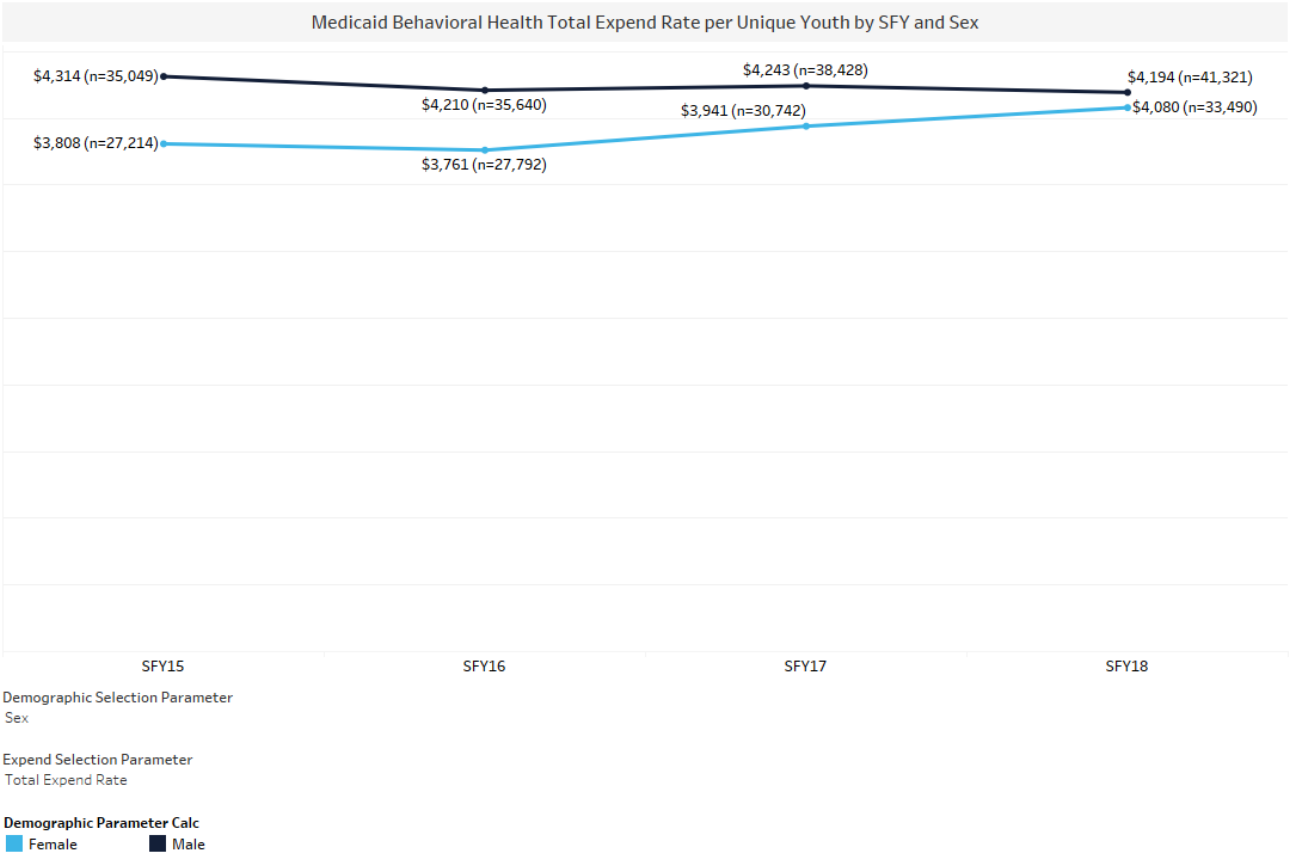
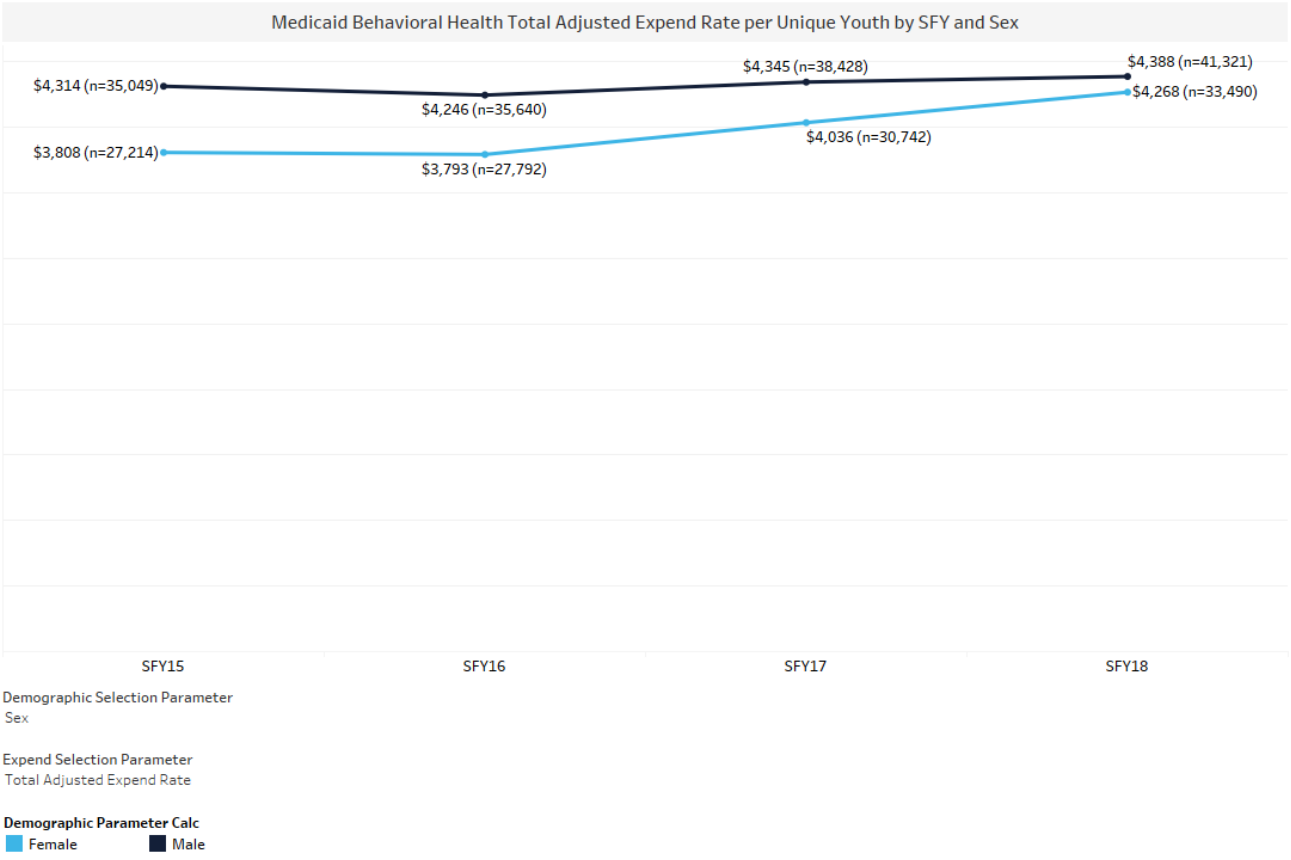
$4,488 (n=26,950)
$4,425 (n=644)
$4,626 (n=26,455)
$4,466 (n=27,601)
$4,596 (n=84)
$4,435 (n=11,168)
$4,277 (n=10,273)
$4,010 (n=9,279)
$3,854 (n=9,326)
$3,765 (n=27,605)
$3,730 (n=2,821)
$3,701 (n=23,046)
$3,409 (n=24,392)
$3,691 (n=2,545)
$3,461 (n=85)
$3,519 (n=899)
$2,932 (n=77)
$3,076 (n=833)
$2,965 (n=257)
$2,491 (n=239)
$2,651 (n=230)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Race
Expend Selection Parameter
Total Expend Rate
Demographic Parameter Calc
Asian
Black
Multiracial
Native America..
Pacific Islander
Unknown
White

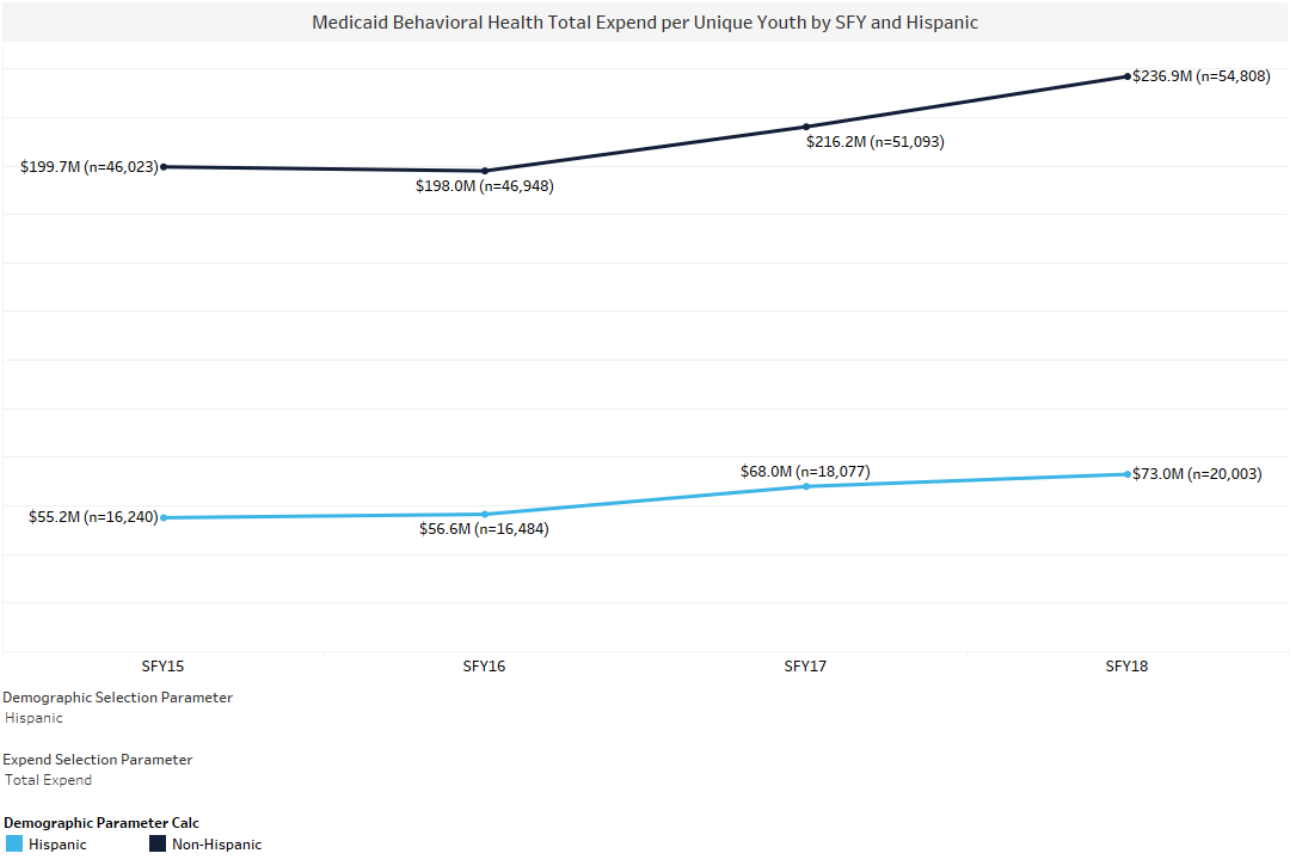

Medicaid Behavioral Health Total Adjusted Expend Rate per Unique Youth by SFY and Race
$6,196 (n=83)
$4,976 (n=700)
$4,488 (n=26,950)
$4,425 (n=644)
$4,665 (n=26,455)
$4,574 (n=27,601)
$4,808 (n=84)
$4,640 (n=11,168)
$4,380 (n=10,273)
$4,010 (n=9,279)
$3,887 (n=9,326)
$3,856 (n=27,605)
$3,903 (n=2,821)
$3,701 (n=23,046)
$3,438 (n=24,392)
$3,780 (n=2,545)
$3,682 (n=899)
$3,461 (n=85)
$2,957 (n=77)
$3,150 (n=833)
$3,102 (n=257)
$2,491 (n=239)
$2,714 (n=230)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Race
Expend Selection Parameter
Total Adjusted Expend Rate
Demographic Parameter Calc
Asian
Black
Multiracial
Native America..
Pacific Islander
Unknown
White

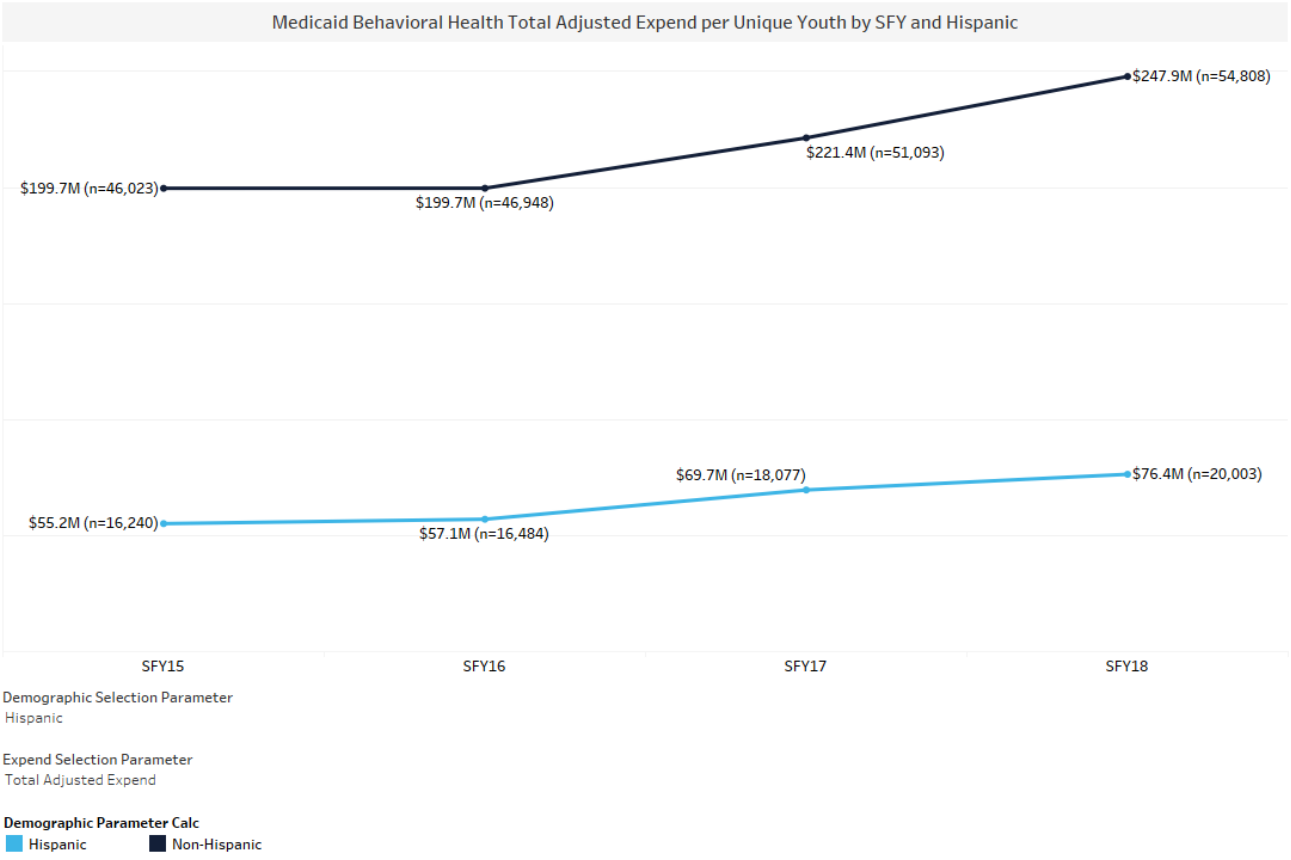

Medicaid Behavioral Health Total Expend per Unique Youth by SFY and Sex
$151.2M (n=35,049)
$150.0M (n=35,640)
$163.1M (n=38,428)
$173.3M (n=41,321)
$103.6M (n=27,214)
$104.5M (n=27,792)
$121.1M (n=30,742)
$136.6M (n=33,490)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Sex
Expend Selection Parameter
Total Expend
Demographic Parameter Calc
Female
Male

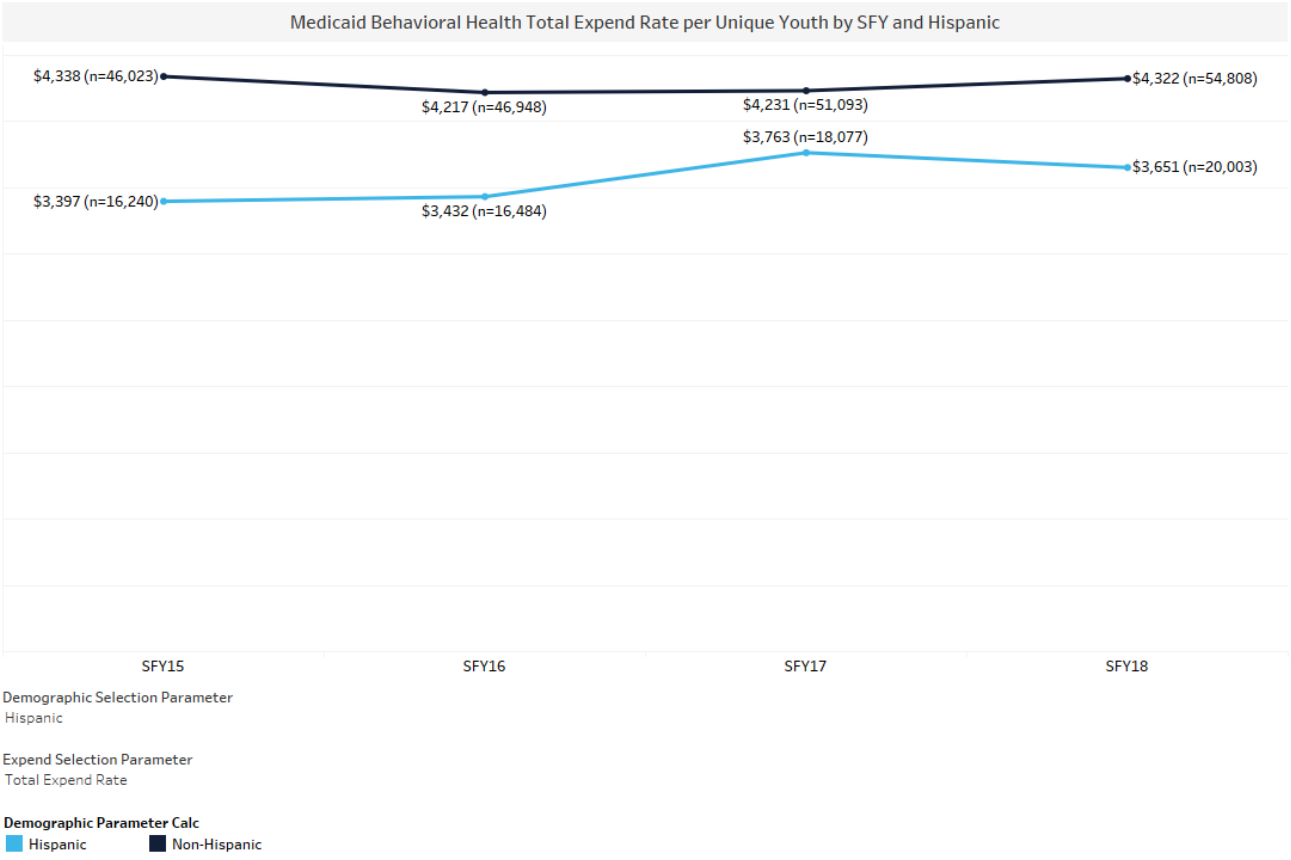

Medicaid Behavioral Health Total Adjusted Expend per Unique Youth by SFY and Sex
$181.3M (n=41,321)
$167.0M (n=38,428)
$151.2M (n=35,049)
$151.3M (n=35,640)
$143.0M (n=33,490)
$124.1M (n=30,742)
$103.6M (n=27,214)
$105.4M (n=27,792)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Sex
Expend Selection Parameter
Total Adjusted Expend
Demographic Parameter Calc
Female
Male

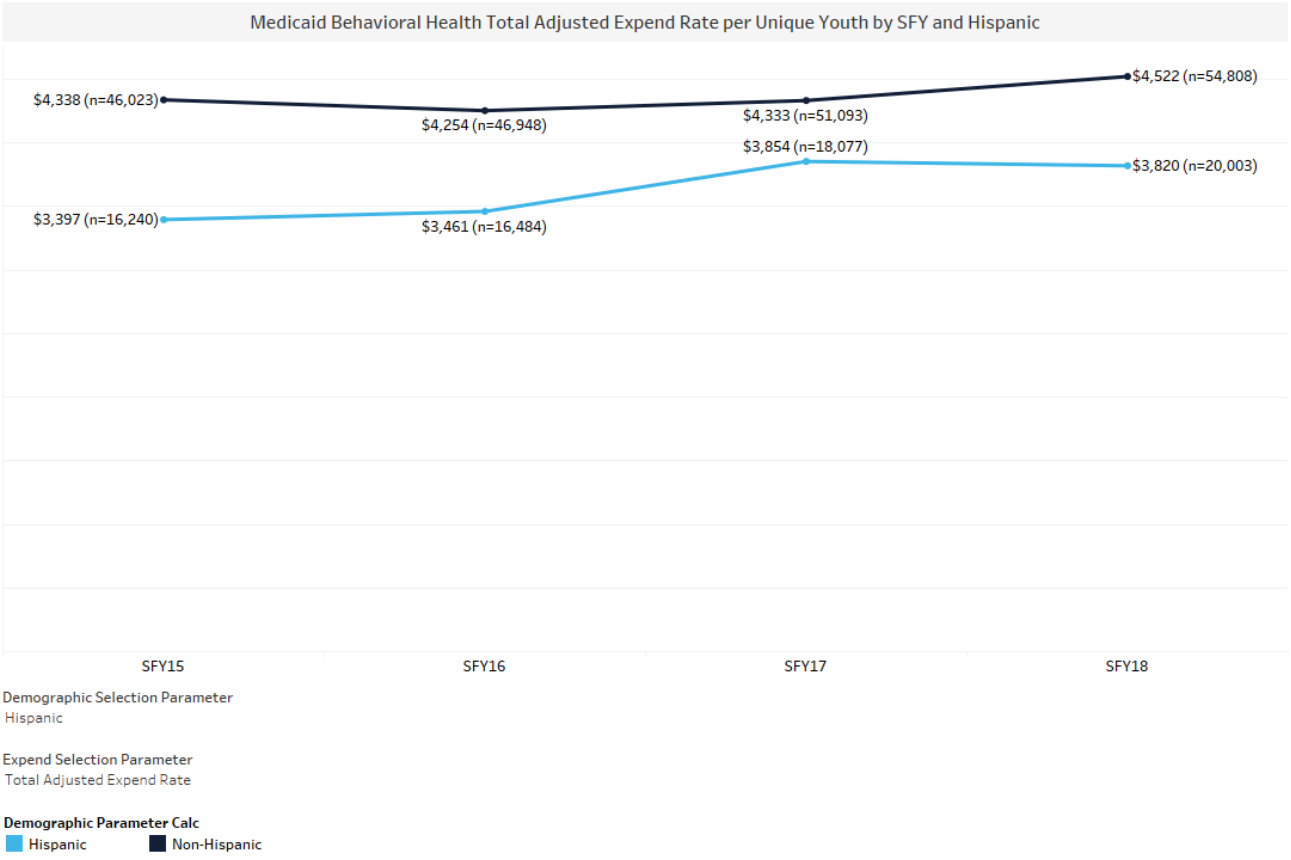

Medicaid Behavioral Health Total Expend Rate per Unique Youth by SFY and Sex
$4,314 (n=35,049)
$4,210 (n=35,640)
$4,243 (n=38,428)
$4,194 (n=41,321)
$3,808 (n=27,214)
$3,761 (n=27,792)
$3,941 (n=30,742)
$4,080 (n=33,490)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Sex
Expend Selection Parameter
Total Expend Rate
Demographic Parameter Calc
Female
Male


Medicaid Behavioral Health Total Adjusted Expend Rate per Unique Youth by SFY and Sex
$4,314 (n=35,049)
$4,246 (n=35,640)
$4,345 (n=38,428)
$4,388 (n=41,321)
$3,808 (n=27,214)
$3,793 (n=27,792)
$4,036 (n=30,742)
$4,268 (n=33,490)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Sex
Expend Selection Parameter
Total Adjusted Expend Rate
Demographic Parameter Calc
Female
Male

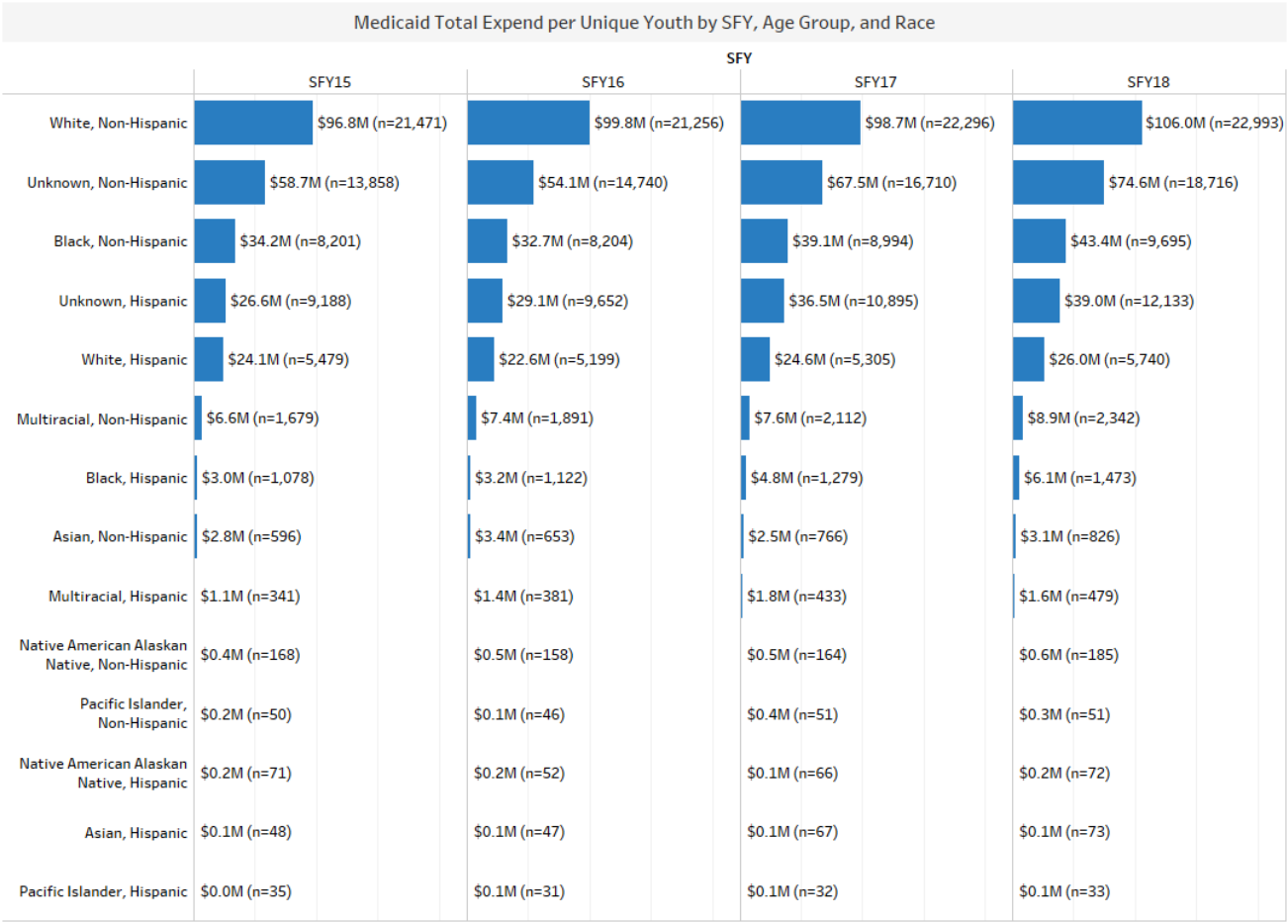

Medicaid Behavioral Health Total Expend per Unique Youth by SFY and Hispanic
$236.9M (n=54,808)
$216.2M (n=51,093)
$199.7M (n=46,023)
$198.0M (n=46,948)
$68.0M (n=18,077)
$73.0M (n=20,003)
$55.2M (n=16,240)
$56.6M (n=16,484)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Hispanic
Expend Selection Parameter
Total Expend
Demographic Parameter Calc
Hispanic
Non-Hispanic

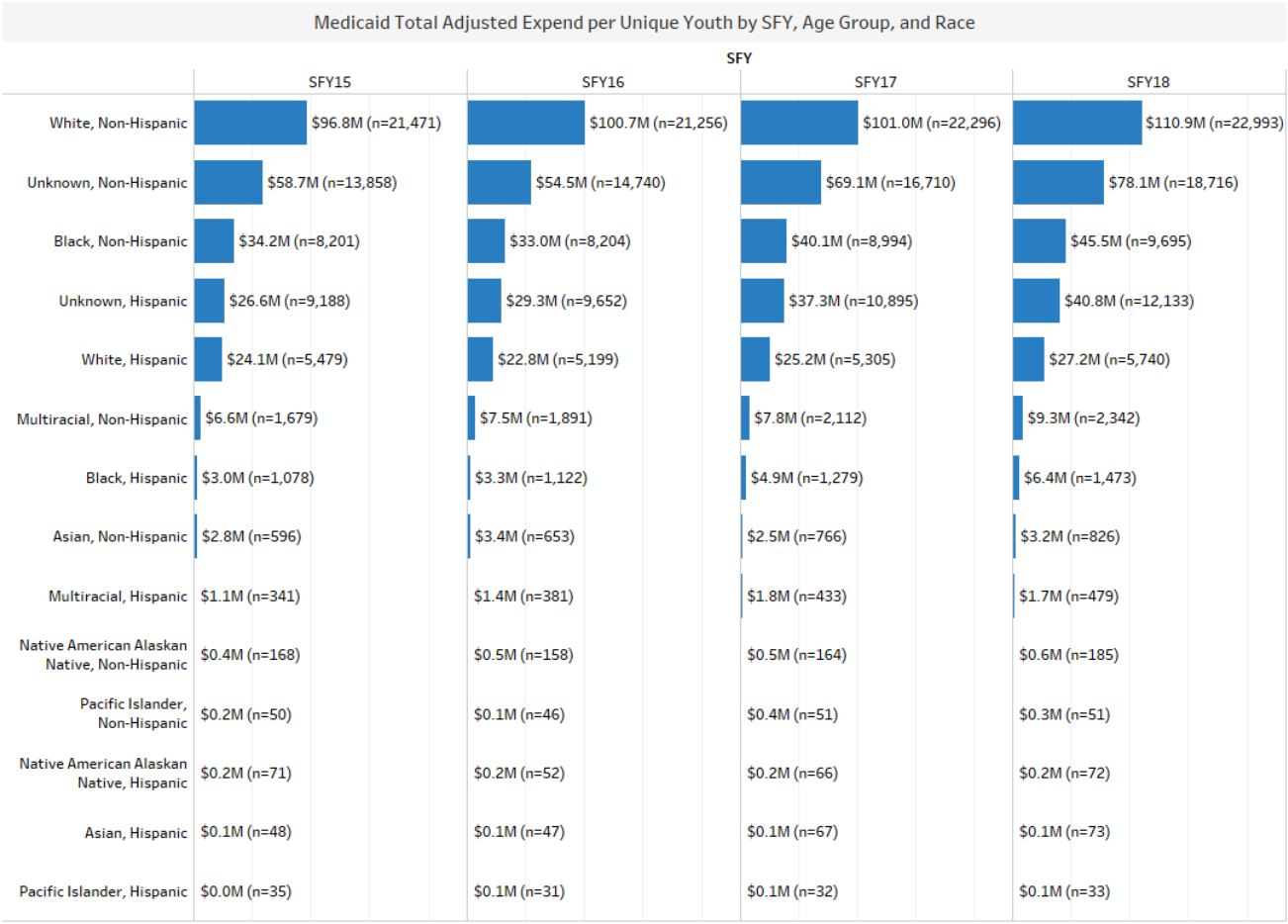

Medicaid Behavioral Health Total Adjusted Expend per Unique Youth by SFY and Hispanic
$247.9M (n=54,808)
$221.4M (n=51,093)
$199.7M (n=46,023)
$199.7M (n=46,948)
$69.7M (n=18,077)
$76.4M (n=20,003)
$55.2M (n=16,240)
$57.1M (n=16,484)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Hispanic
Expend Selection Parameter
Total Adjusted Expend
Demographic Parameter Calc
Hispanic
Non-Hispanic

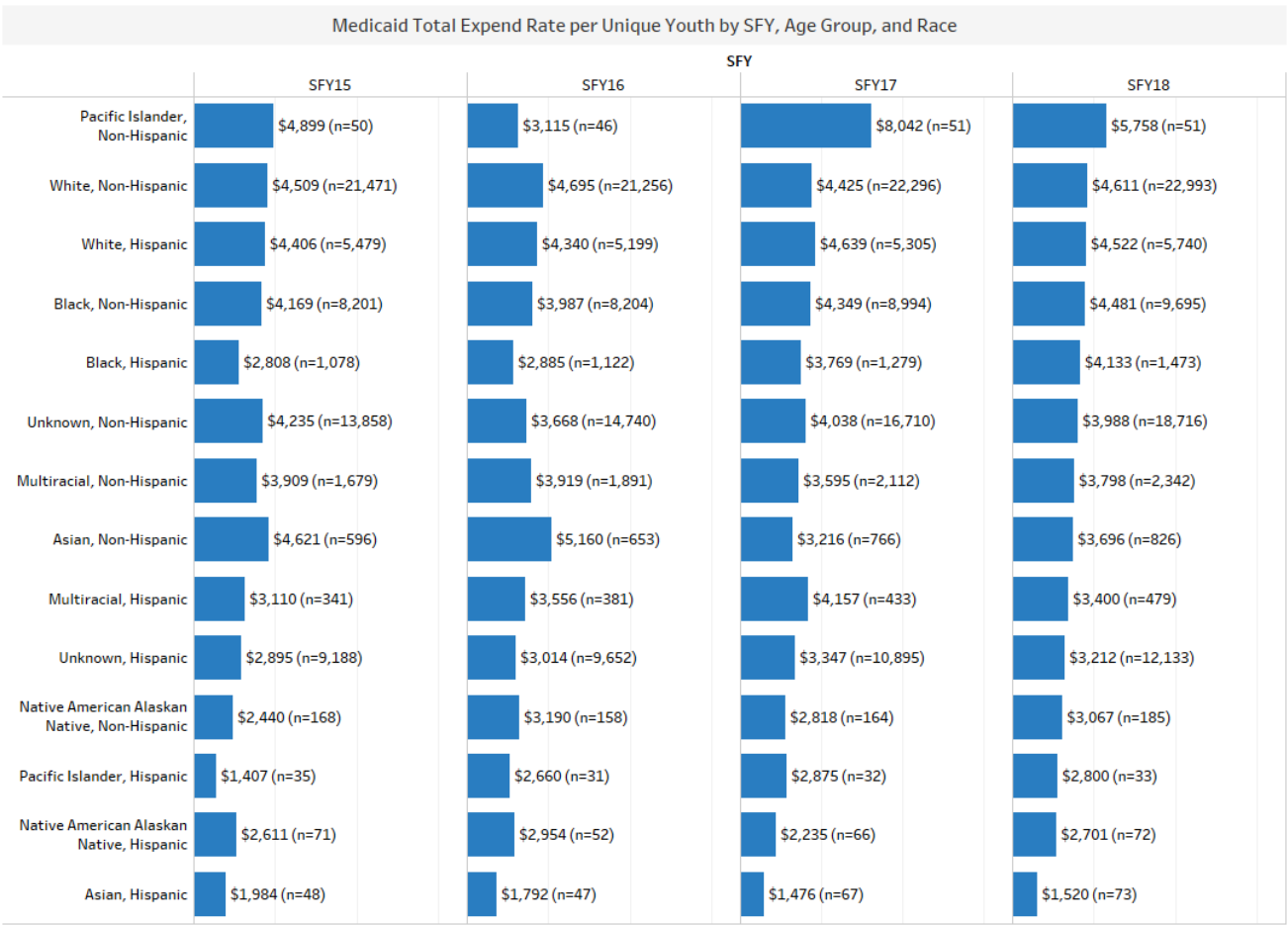

Medicaid Behavioral Health Total Expend Rate per Unique Youth by SFY and Hispanic
$4,338 (n=46,023)
$4,217 (n=46,948)
$4,231 (n=51,093)
$4,322 (n=54,808)
$3,397 (n=16,240)
$3,432 (n=16,484)
$3,763 (n=18,077)
$3,651 (n=20,003)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Hispanic
Expend Selection Parameter
Total Expend Rate
Demographic Parameter Calc
Hispanic
Non-Hispanic

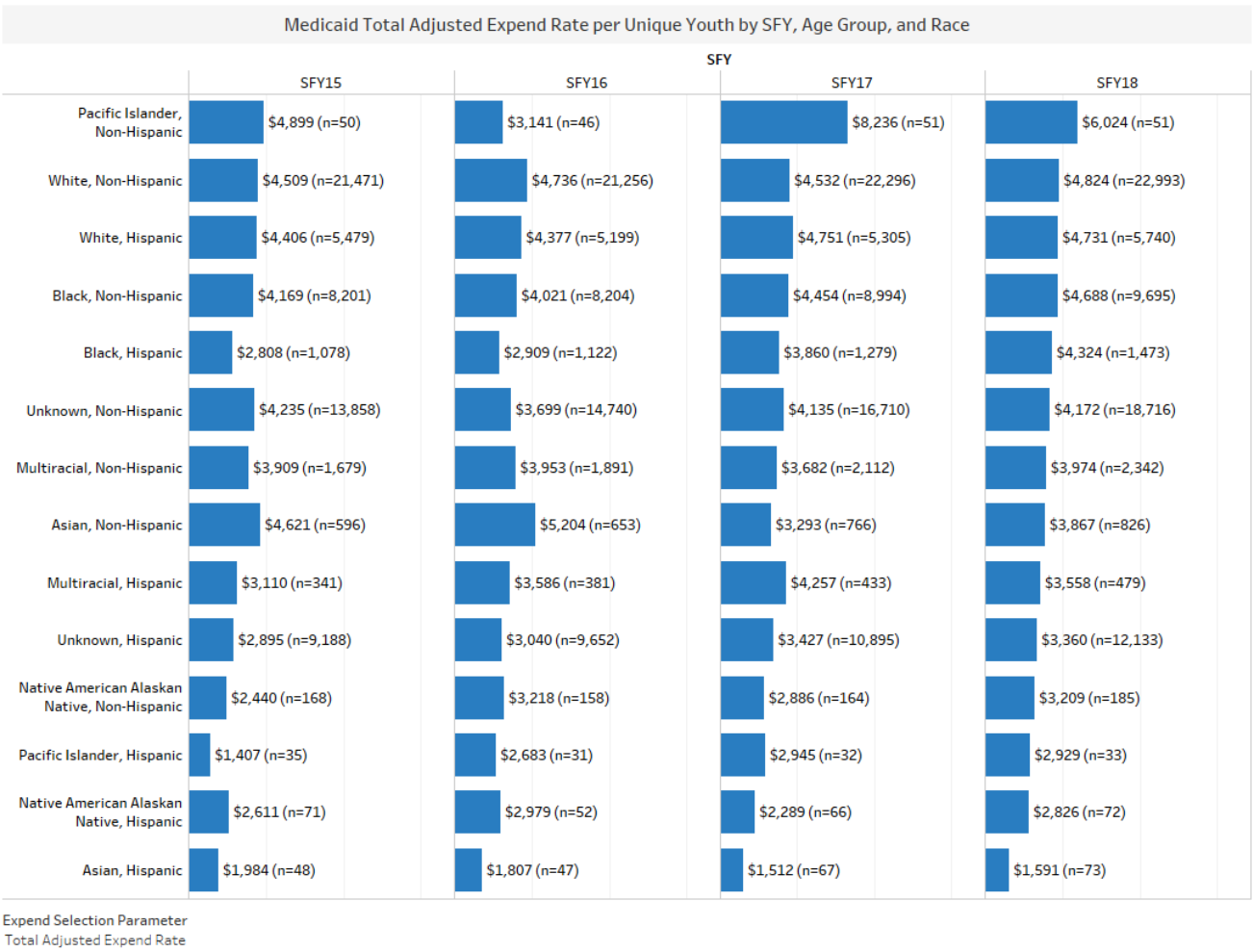

Medicaid Behavioral Health Total Adjusted Expend Rate per Unique Youth by SFY and Hispanic
$4,338 (n=46,023)
$4,254 (n=46,948)
$4,333 (n=51,093)
$4,522 (n=54,808)
$3,397 (n=16,240)
$3,461 (n=16,484)
$3,854 (n=18,077)
$3,820 (n=20,003)
SFY15
SFY16
SFY17
SFY18
Demographic Selection Parameter
Hispanic
Expend Selection Parameter
Total Adjusted Expend Rate
Demographic Parameter Calc
Hispanic
Non-Hispanic

	Contents
Section 6:	**A. Medicaid Behavioral Health Treatment Expend by SFY, Race, and Hispanic Origin (Unique Youth)** **a. Total Expend** **b. Total Adjusted Expend** **c. Total Expend Rate** **d. Total Adjusted Expend Rate**

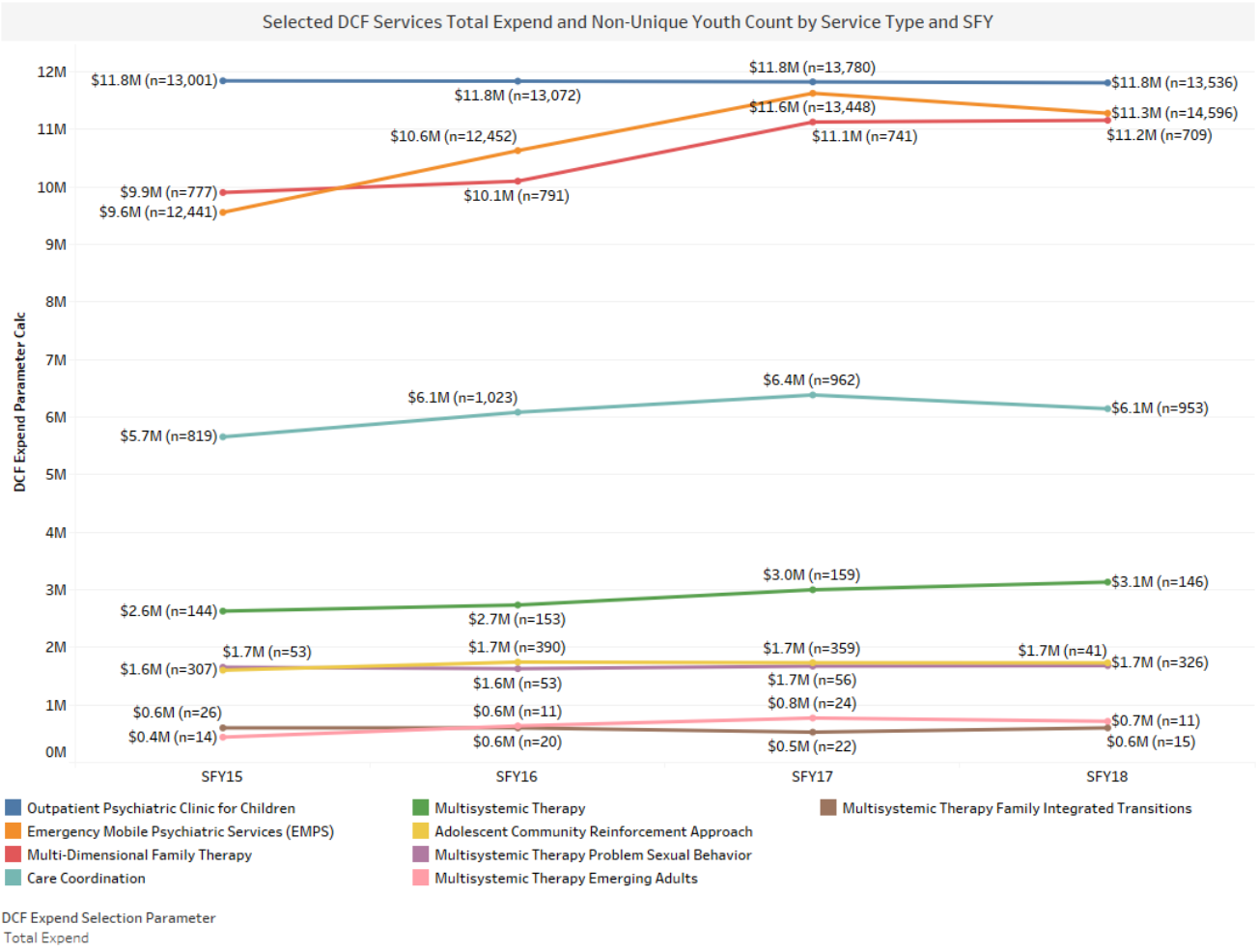

Medicaid Total Expend per Unique Youth by SFY, Age Group, and Race
SFY
SFY15
SFY16
SFY17
SFY18
White, Non-Hispanic
$96.8M (n=21,471)
$99.8M (n=21,256)
$98.7M (n=22,296)
$106.0M (n=22,993)
Unknown, Non-Hispanic
$58.7M (n=13,858)
$54.1M (n=14,740)
$67.5M (n=16,710)
$74.6M (n=18,716)
Black, Non-Hispanic
$34.2M (n=8,201)
$32.7M (n=8,204)
$39.1M (n=8,994)
$43.4M (n=9,695)
Unknown, Hispanic
$26.6M (n=9,188)
$29.1M (n=9,652)
$36.5M (n=10,895)
$39.0M (n=12,133)
White, Hispanic
$24.1M (n=5,479)
$22.6M (n=5,199)
$24.6M (n=5,305)
$26.0M (n=5,740)
Multiracial, Non-Hispanic
$6.6M (n=1,679)
$7.4M (n=1,891)
$7.6M (n=2,112)
$8.9M (n=2,342)
Black, Hispanic
$3.0M (n=1,078)
$3.2M (n=1,122)
$4.8M (n=1,279)
$6.1M (n=1,473)
Asian, Non-Hispanic
$2.8M (n=596)
$3.4M (n=653)
$2.5M (n=766)
$3.1M (n=826)
Multiracial, Hispanic
$1.1M (n=341)
$1.4M (n=381)
$1.8M (n=433)
$1.6M (n=479)
Native American Alaskan Native, Non-Hispanic
$0.4M (n=168)
$0.5M (n=158)
$0.5M (n=164)
$0.6M (n=185)
Pacific Islander, Non-Hispanic
$0.2M (n=50)
$0.1M (n=46)
$0.4M (n=51)
$0.3M (n=51)
Native American Alaskan Native, Hispanic
$0.2M (n=71)
$0.2M (n=52)
$0.1M (n=66)
$0.2M (n=72)
Asian, Hispanic
$0.1M (n=48)
$0.1M (n=47)
$0.1M (n=67)
$0.1M (n=73)
Pacific Islander, Hispanic
$0.0M (n=35)
$0.1M (n=31)
$0.1M (n=32)
$0.1M (n=33)
Expend Selection Parameter
Total Expend

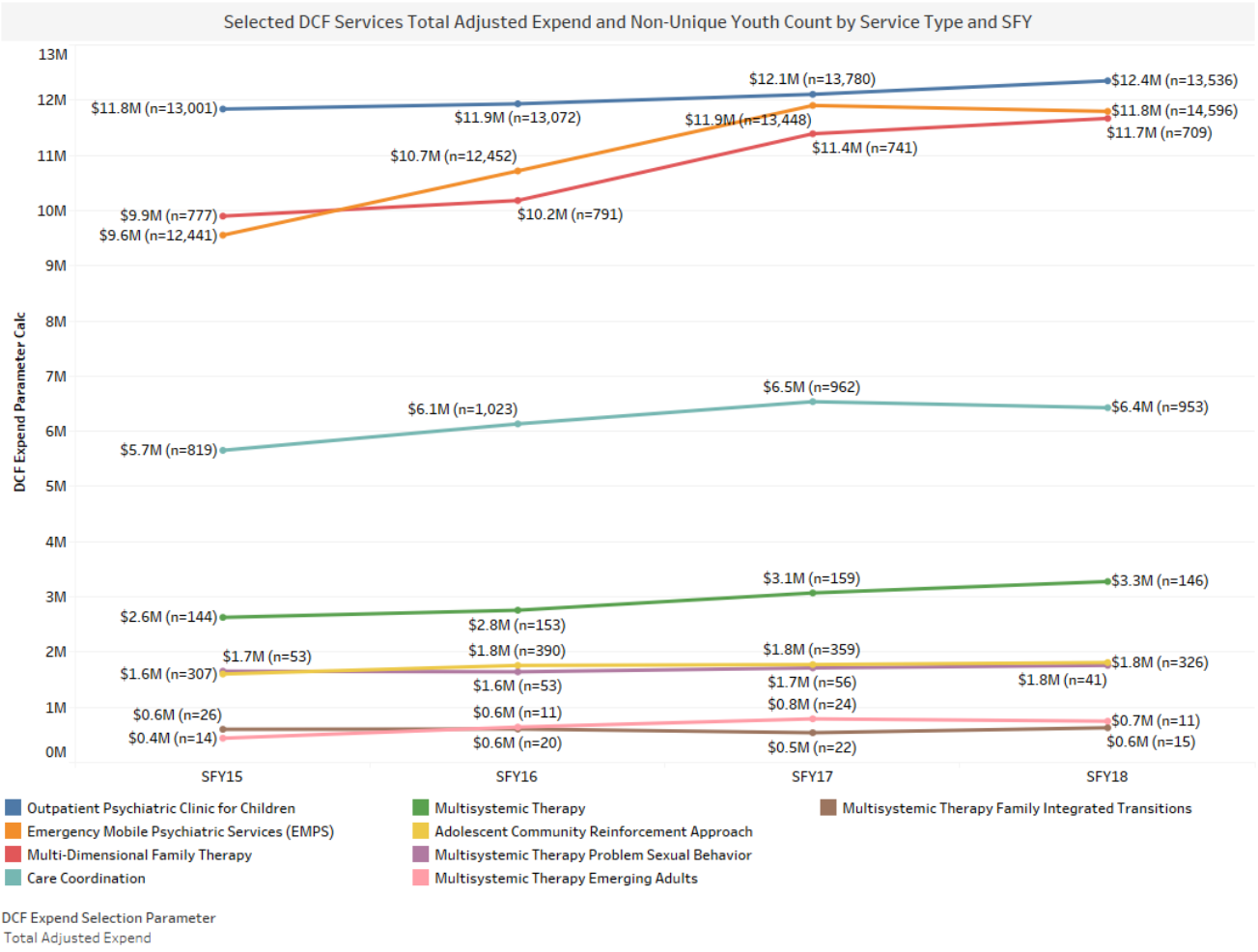

Medicaid Total Adjusted Expend per Unique Youth by SFY, Age Group, and Race
SFY
SFY15
SFY16
SFY17
SFY18
White, Non-Hispanic
$96.8M (n=21,471)
$100.7M (n=21,256)
$101.0M (n=22,296)
$110.9M (n=22,993)
Unknown, Non-Hispanic
$58.7M (n=13,858)
$54.5M (n=14,740)
$69.1M (n=16,710)
$78.1M (n=18,716)
Black, Non-Hispanic
$34.2M (n=8,201)
$33.0M (n=8,204)
$40.1M (n=8,994)
$45.5M (n=9,695)
Unknown, Hispanic
$26.6M (n=9,188)
$29.3M (n=9,652)
$37.3M (n=10,895)
$40.8M (n=12,133)
White, Hispanic
$24.1M (n=5,479)
$22.8M (n=5,199)
$25.2M (n=5,305)
$27.2M (n=5,740)
Multiracial, Non-Hispanic
$6.6M (n=1,679)
$7.5M (n=1,891)
$7.8M (n=2,112)
$9.3M (n=2,342)
Black, Hispanic
$3.0M (n=1,078)
$3.3M (n=1,122)
$4.9M (n=1,279)
$6.4M (n=1,473)
Asian, Non-Hispanic
$2.8M (n=596)
$3.4M (n=653)
$2.5M (n=766)
$3.2M (n=826)
Multiracial, Hispanic
$1.1M (n=341)
$1.4M (n=381)
$1.8M (n=433)
$1.7M (n=479)
Native American Alaskan Native, Non-Hispanic
$0.4M (n=168)
$0.5M (n=158)
$0.5M (n=164)
$0.6M (n=185)
Pacific Islander, Non-Hispanic
$0.2M (n=50)
$0.1M (n=46)
$0.4M (n=51)
$0.3M (n=51)
Native American Alaskan Native, Hispanic
$0.2M (n=71)
$0.2M (n=52)
$0.2M (n=66)
$0.2M (n=72)
Asian, Hispanic
$0.1M (n=48)
$0.1M (n=47)
$0.1M (n=67)
$0.1M (n=73)
Pacific Islander, Hispanic
$0.0M (n=35)
$0.1M (n=31)
$0.1M (n=32)
$0.1M (n=33)
Expend Selection Parameter
Total Adjusted Expend


Medicaid Total Expend Rate per Unique Youth by SFY, Age Group, and Race
SFY
SFY15
SFY16
SFY17
SFY18
Pacific Islander, Non-Hispanic
$4,899 (n=50)
$3,115 (n=46)
$8,042 (n=51)
$5,758 (n=51)
White, Non-Hispanic
$4,509 (n=21,471)
$4,695 (n=21,256)
$4,425 (n=22,296)
$4,611 (n=22,993)
White, Hispanic
$4,406 (n=5,479)
$4,340 (n=5,199)
$4,639 (n=5,305)
$4,522 (n=5,740)
Black, Non-Hispanic
$4,169 (n=8,201)
$3,987 (n=8,204)
$4,349 (n=8,994)
$4,481 (n=9,695)
Black, Hispanic
$2,808 (n=1,078)
$2,885 (n=1,122)
$3,769 (n=1,279)
$4,133 (n=1,473)
Unknown, Non-Hispanic
$4,235 (n=13,858)
$3,668 (n=14,740)
$4,038 (n=16,710)
$3,988 (n=18,716)
Multiracial, Non-Hispanic
$3,909 (n=1,679)
$3,919 (n=1,891)
$3,595 (n=2,112)
$3,798 (n=2,342)
Asian, Non-Hispanic
$4,621 (n=596)
$5,160 (n=653)
$3,216 (n=766)
$3,696 (n=826)
Multiracial, Hispanic
$3,110 (n=341)
$3,556 (n=381)
$4,157 (n=433)
$3,400 (n=479)
Unknown, Hispanic
$2,895 (n=9,188)
$3,014 (n=9,652)
$3,347 (n=10,895)
$3,212 (n=12,133)
Native American Alaskan Native, Non-Hispanic
$2,440 (n=168)
$3,190 (n=158)
$2,818 (n=164)
$3,067 (n=185)
Pacific Islander, Hispanic
$1,407 (n=35)
$2,660 (n=31)
$2,875 (n=32)
$2,800 (n=33)
Native American Alaskan Native, Hispanic
$2,611 (n=71)
$2,954 (n=52)
$2,235 (n=66)
$2,701 (n=72)
Asian, Hispanic
$1,984 (n=48)
$1,792 (n=47)
$1,476 (n=67)
$1,520 (n=73)
Expend Selection Parameter
Total Expend Rate


Medicaid Total Adjusted Expend Rate per Unique Youth by SFY, Age Group, and Race
SFY
SFY15
SFY16
SFY17
SFY18
Pacific Islander, Non-Hispanic
$4,899 (n=50)
$3,141 (n=46)
$8,236 (n=51)
$6,024 (n=51)
White, Non-Hispanic
$4,509 (n=21,471)
$4,736 (n=21,256)
$4,532 (n=22,296)
$4,824 (n=22,993)
White, Hispanic
$4,406 (n=5,479)
$4,377 (n=5,199)
$4,751 (n=5,305)
$4,731 (n=5,740)
Black, Non-Hispanic
$4,169 (n=8,201)
$4,021 (n=8,204)
$4,454 (n=8,994)
$4,688 (n=9,695)
Black, Hispanic
$2,808 (n=1,078)
$2,909 (n=1,122)
$3,860 (n=1,279)
$4,324 (n=1,473)
Unknown, Non-Hispanic
$4,235 (n=13,858)
$3,699 (n=14,740)
$4,135 (n=16,710)
$4,172 (n=18,716)
Multiracial, Non-Hispanic
$3,909 (n=1,679)
$3,953 (n=1,891)
$3,682 (n=2,112)
$3,974 (n=2,342)
Asian, Non-Hispanic
$4,621 (n=596)
$5,204 (n=653)
$3,293 (n=766)
$3,867 (n=826)
Multiracial, Hispanic
$3,110 (n=341)
$3,586 (n=381)
$4,257 (n=433)
$3,558 (n=479)
Unknown, Hispanic
$2,895 (n=9,188)
$3,040 (n=9,652)
$3,427 (n=10,895)
$3,360 (n=12,133)
Native American Alaskan Native, Non-Hispanic
$2,440 (n=168)
$3,218 (n=158)
$2,886 (n=164)
$3,209 (n=185)
Pacific Islander, Hispanic
$1,407 (n=35)
$2,683 (n=31)
$2,945 (n=32)
$2,929 (n=33)
Native American Alaskan Native, Hispanic
$2,611 (n=71)
$2,979 (n=52)
$2,289 (n=66)
$2,826 (n=72)
Asian, Hispanic
$1,984 (n=48)
$1,807 (n=47)
$1,512 (n=67)
$1,591 (n=73)
Expend Selection Parameter
Total Adjusted Expend Rate

	Contents
Section 7:	**A. Selected DCF Services Total Expend and Non-Unique Youth Count by Service Type and SFY** **a. Metrics** **i. Total Expend** **ii. Total Adjusted Expend** **iii. Total Expend Rate** **iv. Total Adjusted Expend Rate**


Selected DCF Services Total Expend and Non-Unique Youth Count by Service Type and SFY
DCF Expend Parameter Calc
12M
11M
10M
9M
8M
7M
6M
5M
4M
3M
2M
1M
0M
$11.8M (n=13,001)
$11.8M (n=13,072)
$11.8M (n=13,780)
$11.8M (n=13,536)
$10.6M (n=12,452)
$11.6M (n=13,448)
$11.3M (n=14,596)
$9.9M (n=777)
$10.1M (n=791)
$11.1M (n=741)
$11.2M (n=709)
$9.6M (n=12,441)
$5.7M (n=819)
$6.1M (n=1,023)
$6.4M (n=962)
$6.1M (n=953)
$2.6M (n=144)
$2.7M (n=153)
$3.0M (n=159)
$3.1M (n=146)
$1.7M (n=53)
$1.7M (n=390)
$1.7M (n=359)
$1.7M (n=41)
$1.7M (n=326)
$1.6M (n=307)
$1.6M (n=53)
$1.7M (n=56)
$0.6M (n=26)
$0.6M (n=11)
$0.8M (n=24)
$0.7M (n=11)
$0.4M (n=14)
$0.6M (n=20)
$0.5M (n=22)
$0.6M (n=15)
SFY15
SFY16
SFY17
SFY18
Outpatient Psychiatric Clinic for Children
Emergency Mobile Psychiatric Services (EMPS)
Multi-Dimensional Family Therapy
Care Coordination
Multisystemic Therapy
Adolescent Community Reinforcement Approach
Multisystemic Therapy Problem Sexual Behavior
Multisystemic Therapy Emerging Adults
Multisystemic Therapy Family Integrated Transitions
DCF Expend Selection Parameter
Total Expend


Selected DCF Services Total Adjusted Expend and Non-Unique Youth Count by Service Type and SFY
DCF Expend Parameter Calc
13M
12M
11M
10M
9M
8M
7M
6M
5M
4M
3M
2M
1M
0M
$11.8M (n=13,001)
$11.9M (n=13,072)
$12.1M (n=13,780)
$12.4M (n=13,536)
$10.7M (n=12,452)
$11.9M (n=13,448)
$11.8M (n=14,596)
$11.7M (n=709)
$11.4M (n=741)
$9.9M (n=777)
$10.2M (n=791)
$9.6M (n=12,441)
$6.5M (n=962)
$6.1M (n=1,023)
$6.4M (n=953)
$5.7M (n=819)
$3.1M (n=159)
$3.3M (n=146)
$2.6M (n=144)
$2.8M (n=153)
$1.8M (n=390)
$1.8M (n=359)
$1.7M (n=53)
$1.8M (n=326)
$1.6M (n=307)
$1.6M (n=53)
$1.7M (n=56)
$1.8M (n=41)
$0.8M (n=24)
$0.6M (n=26)
$0.6M (n=11)
$0.7M (n=11)
$0.4M (n=14)
$0.6M (n=20)
$0.5M (n=22)
$0.6M (n=15)
SFY15
SFY16
SFY17
SFY18
Outpatient Psychiatric Clinic for Children
Emergency Mobile Psychiatric Services (EMPS)
Multi-Dimensional Family Therapy
Care Coordination
Multisystemic Therapy
Adolescent Community Reinforcement Approach
Multisystemic Therapy Problem Sexual Behavior
Multisystemic Therapy Emerging Adults
Multisystemic Therapy Family Integrated Transitions
DCF Expend Selection Parameter
Total Adjusted Expend

Selected DCF Services Count of Non-Unique Youth by Primary Treatment Focus, Service Type, SFY, and Sex (Total Expend)

			SFY15	SFY16	SFY17	SFY18
MH	Care Coordination	Male	66.9% (n=548, $3.8M)	62.1% (n=635, $3.8M)	62.3% (n=599, $3.9M)	62.0% (n=591, $3.8M)
		Female	33.1% (n=271, $1.9M)	37.9% (n=388, $2.3M)	37.7% (n=363, $2.4M)	38.0% (n=362, $2.3M)
	Emergency Mobile Psychiatric Services (EMPS)	Male	50.4% (n=6,275, $4.8M)	51.6% (n=6,428, $5.5M)	51.8% (n=6,964, $6.0M)	52.9% (n=7,721, $6.0M)
		Female	49.6% (n=6,166, $4.7M)	48.4% (n=6,024, $5.1M)	48.2% (n=6,484, $5.6M)	47.1% (n=6,875, $5.3M)
	Outpatient Psychiatric Clinic for Children	Male	54.9% (n=7,138, $6.6M)	56.1% (n=7,329, $6.7M)	54.7% (n=7,536, $6.5M)	54.8% (n=7,423, $6.4M)
		Female	45.1% (n=5,863, $5.3M)	43.9% (n=5,743, $5.2M)	45.3% (n=6,244, $5.3M)	45.2% (n=6,113, $5.4M)
SUD	Adolescent Community Reinforcement Approach	Male	68.4% (n=210, $1.1M)	68.2% (n=266, $1.2M)	68.2% (n=245, $1.2M)	67.2% (n=219, $1.2M)
		Female	31.6% (n=97, $0.5M)	31.8% (n=124, $0.5M)	31.8% (n=114, $0.5M)	32.8% (n=107, $0.5M)
	Multi-Dimensional Family Therapy	Male	64.6% (n=502, $6.3M)	62.8% (n=497, $6.3M)	60.5% (n=448, $6.9M)	62.1% (n=440, $7.0M)
		Female	35.4% (n=275, $3.6M)	37.2% (n=294, $3.8M)	39.5% (n=293, $4.3M)	37.9% (n=269, $4.1M)
	Multisystemic Therapy	Male	61.8% (n=89, $1.6M)	51.6% (n=79, $1.4M)	53.5% (n=85, $1.5M)	57.5% (n=84, $1.8M)
		Female	38.2% (n=55, $1.0M)	48.4% (n=74, $1.3M)	46.5% (n=74, $1.5M)	42.5% (n=62, $1.3M)
	Multisystemic Therapy Emerging Adults	Male	57.1% (n=8, $0.3M)	72.7% (n=8, $0.5M)	62.5% (n=15, $0.5M)	54.5% (n=6, $0.4M)
		Female	42.9% (n=6, $0.2M)	27.3% (n=3, $0.2M)	37.5% (n=9, $0.3M)	45.5% (n=5, $0.3M)
	Multisystemic Therapy Family Integrated Transitions	Male	88.5% (n=23, $0.5M)	75.0% (n=15, $0.5M)	72.7% (n=16, $0.4M)	73.3% (n=11, $0.4M)
		Female	11.5% (n=3, $0.1M)	25.0% (n=5, $0.2M)	27.3% (n=6, $0.1M)	26.7% (n=4, $0.2M)
	Multisystemic Therapy Problem Sexual Behavior	Male	83.0% (n=44, $1.4M)	84.9% (n=45, $1.4M)	89.3% (n=50, $1.5M)	92.7% (n=38, $1.5M)
		Female	17.0% (n=9, $0.2M)	15.1% (n=8, $0.2M)	10.7% (n=6, $0.2M)	7.3% (n=3, $0.2M)

DCF Expend Selection Parameter
Total Expend

Selected DCF Services Count of Non-Unique Youth by Primary Treatment Focus, Service Type, SFY, and Sex (Total Adjusted Expend)

			SFY15	SFY16	SFY17	SFY18
MH	Care Coordination	Male	66.9% (n=548, $3.8M)	62.1% (n=635, $3.8M)	62.3% (n=599, $4.0M)	62.0% (n=591, $4.0M)
		Female	33.1% (n=271, $1.9M)	37.9% (n=388, $2.3M)	37.7% (n=363, $2.5M)	38.0% (n=362, $2.4M)
	Emergency Mobile Psychiatric Services (EMPS)	Male	50.4% (n=6,275, $4.8M)	51.6% (n=6,428, $5.5M)	51.8% (n=6,964, $6.2M)	52.9% (n=7,721, $6.2M)
		Female	49.6% (n=6,166, $4.7M)	48.4% (n=6,024, $5.2M)	48.2% (n=6,484, $5.7M)	47.1% (n=6,875, $5.6M)
	Outpatient Psychiatric Clinic for Children	Male	54.9% (n=7,138, $6.6M)	56.1% (n=7,329, $6.7M)	54.7% (n=7,536, $6.7M)	54.8% (n=7,423, $6.7M)
		Female	45.1% (n=5,863, $5.3M)	43.9% (n=5,743, $5.2M)	45.3% (n=6,244, $5.4M)	45.2% (n=6,113, $5.6M)
SUD	Adolescent Community Reinforcement Approach	Male	68.4% (n=210, $1.1M)	68.2% (n=266, $1.2M)	68.2% (n=245, $1.2M)	67.2% (n=219, $1.2M)
		Female	31.6% (n=97, $0.5M)	31.8% (n=124, $0.5M)	31.8% (n=114, $0.5M)	32.8% (n=107, $0.6M)
	Multi-Dimensional Family Therapy	Male	64.6% (n=502, $6.3M)	62.8% (n=497, $6.4M)	60.5% (n=448, $7.0M)	62.1% (n=440, $7.4M)
		Female	35.4% (n=275, $3.6M)	37.2% (n=294, $3.8M)	39.5% (n=293, $4.4M)	37.9% (n=269, $4.3M)
	Multisystemic Therapy	Male	61.8% (n=89, $1.6M)	51.6% (n=79, $1.4M)	53.5% (n=85, $1.5M)	57.5% (n=84, $1.9M)
		Female	38.2% (n=55, $1.0M)	48.4% (n=74, $1.3M)	46.5% (n=74, $1.5M)	42.5% (n=62, $1.4M)
	Multisystemic Therapy Emerging Adults	Male	57.1% (n=8, $0.3M)	72.7% (n=8, $0.5M)	62.5% (n=15, $0.5M)	54.5% (n=6, $0.4M)
		Female	42.9% (n=6, $0.2M)	27.3% (n=3, $0.2M)	37.5% (n=9, $0.3M)	45.5% (n=5, $0.3M)
	Multisystemic Therapy Family Integrated Transitions	Male	88.5% (n=23, $0.5M)	75.0% (n=15, $0.5M)	72.7% (n=16, $0.4M)	73.3% (n=11, $0.5M)
		Female	11.5% (n=3, $0.1M)	25.0% (n=5, $0.2M)	27.3% (n=6, $0.1M)	26.7% (n=4, $0.2M)
	Multisystemic Therapy Problem Sexual Behavior	Male	83.0% (n=44, $1.4M)	84.9% (n=45, $1.4M)	89.3% (n=50, $1.5M)	92.7% (n=38, $1.6M)
		Female	17.0% (n=9, $0.2M)	15.1% (n=8, $0.2M)	10.7% (n=6, $0.2M)	7.3% (n=3, $0.2M)

DCF Expend Selection Parameter
Total Adjusted Expend

Selected DCF Services Count of Non-Unique Youth by Primary Treatment Focus, Service Type, SFY, and Age Category (Total Expend)

			SFY15	SFY16	SFY17	SFY18
MH	Outpatient Psychiatric Clinic for Children	3 - 12	62.2% (n=8,091,$7.5M)	62.8% (n=8,211,$7.6M)	63.2% (n=8,711,$7.6M)	62.8% (n=8,504,$7.6M)
		13 - 17	37.3% (n=4,845,$4.2M)	36.7% (n=4,798,$4.2M)	36.2% (n=4,994,$4.2M)	36.5% (n=4,940,$4.1M)
		18 - 21	0.5% (n=65,$0.1M)	0.5% (n=63,$0.1M)	0.5% (n=75,$0.1M)	0.7% (n=92,$0.1M)
	Emergency Mobile Psychiatric Services (EMPS)	3 - 12	39.2% (n=4,882,$3.8M)	41.9% (n=5,217,$4.5M)	43.6% (n=5,865,$5.1M)	45.8% (n=6,678,$5.2M)
		13 - 17	58.2% (n=7,244,$5.5M)	55.5% (n=6,909,$5.9M)	53.9% (n=7,253,$6.2M)	51.7% (n=7,541,$5.8M)
		18 - 21	2.5% (n=315,$0.2M)	2.6% (n=326,$0.3M)	2.5% (n=330,$0.3M)	2.6% (n=377,$0.3M)
	Care Coordination	3 - 12	60.8% (n=498,$3.5M)	57.9% (n=592,$3.4M)	60.4% (n=581,$3.9M)	61.5% (n=586,$3.8M)
		13 - 17	38.3% (n=314,$2.1M)	40.8% (n=417,$2.6M)	38.0% (n=366,$2.3M)	37.0% (n=353,$2.3M)
		18 - 21	0.9% (n=7,$0.1M)	1.4% (n=14,$0.1M)	1.6% (n=15,$0.1M)	1.5% (n=14,$0.1M)
SUD	Adolescent Community Reinforcement Approach	3 - 12	1.0% (n=3,$0.0M)	0.3% (n=1,$0.0M)	1.1% (n=4,$0.0M)	0.9% (n=3,$0.0M)
		13 - 17	95.1% (n=292,$1.5M)	92.1% (n=359,$1.6M)	92.8% (n=333,$1.6M)	94.5% (n=308,$1.6M)
		18 - 21	3.9% (n=12,$0.1M)	7.2% (n=28,$0.1M)	6.1% (n=22,$0.1M)	4.6% (n=15,$0.1M)
		>21		0.5% (n=2,$0.0M)		
	Multi-Dimensional Family Therapy	3 - 12	10.9% (n=85,$1.1M)	14.0% (n=111,$1.4M)	11.7% (n=87,$1.2M)	12.4% (n=88,$1.2M)
		13 - 17	86.2% (n=670,$8.5M)	84.3% (n=667,$8.5M)	87.0% (n=645,$9.8M)	86.6% (n=614,$9.8M)
		18 - 21	2.8% (n=22,$0.3M)	1.5% (n=12,$0.1M)	1.2% (n=9,$0.1M)	1.0% (n=7,$0.1M)
		>21		0.1% (n=1,$0.0M)		
	Multisystemic Therapy	3 - 12	13.9% (n=20,$0.4M)	19.0% (n=29,$0.6M)	8.2% (n=13,$0.2M)	11.6% (n=17,$0.4M)
		13 - 17	86.1% (n=124,$2.3M)	79.7% (n=122,$2.2M)	89.9% (n=143,$2.7M)	88.4% (n=129,$2.7M)
		18 - 21		1.3% (n=2,$0.0M)	1.9% (n=3,$0.1M)	
	Multisystemic Therapy Emerging Adults	13 - 17	64.3% (n=9,$0.3M)	63.6% (n=7,$0.4M)	54.2% (n=13,$0.4M)	63.6% (n=7,$0.5M)
		18 - 21	35.7% (n=5,$0.2M)	36.4% (n=4,$0.2M)	45.8% (n=11,$0.4M)	36.4% (n=4,$0.3M)
	Multisystemic Therapy Family Int..	13 - 17	92.3% (n=24,$0.6M)	100.0% (n=20,$0.6M)	100.0% (n=22,$0.5M)	93.3% (n=14,$0.6M)
		18 - 21	7.7% (n=2,$0.0M)			6.7% (n=1,$0.0M)
	Multisystemic Therapy Problem Sexual Behavior	3 - 12	32.1% (n=17,$0.5M)	43.4% (n=23,$0.7M)	33.9% (n=19,$0.6M)	39.0% (n=16,$0.7M)
		13 - 17	66.0% (n=35,$1.1M)	56.6% (n=30,$0.9M)	60.7% (n=34,$1.0M)	58.5% (n=24,$1.0M)
		18 - 21	1.9% (n=1,$0.0M)		5.4% (n=3,$0.1M)	2.4% (n=1,$0.0M)

DCF Expend Selection Parameter
Total Expend

Selected DCF Services Count of Non-Unique Youth by Primary Treatment Focus, Service Type, SFY, and Age Category (Total Adjusted Expend)

			SFY15	SFY16	SFY17	SFY18
MH	Outpatient Psychiatric Clinic for Children	3 - 12	62.2% (n=8,091,$7.5M)	62.8% (n=8,211,$7.7M)	63.2% (n=8,711,$7.7M)	62.8% (n=8,504,$8.0M)
		13 - 17	37.3% (n=4,845,$4.2M)	36.7% (n=4,798,$4.2M)	36.2% (n=4,994,$4.3M)	36.5% (n=4,940,$4.3M)
		18 - 21	0.5% (n=65,$0.1M)	0.5% (n=63,$0.1M)	0.5% (n=75,$0.1M)	0.7% (n=92,$0.1M)
	Emergency Mobile Psychiatric Services (EMPS)	3 - 12	39.2% (n=4,882,$3.8M)	41.9% (n=5,217,$4.5M)	43.6% (n=5,865,$5.2M)	45.8% (n=6,678,$5.4M)
		13 - 17	58.2% (n=7,244,$5.5M)	55.5% (n=6,909,$5.9M)	53.9% (n=7,253,$6.4M)	51.7% (n=7,541,$6.1M)
		18 - 21	2.5% (n=315,$0.2M)	2.6% (n=326,$0.3M)	2.5% (n=330,$0.3M)	2.6% (n=377,$0.3M)
	Care Coordination	3 - 12	60.8% (n=498,$3.5M)	57.9% (n=592,$3.5M)	60.4% (n=581,$4.0M)	61.5% (n=586,$4.0M)
		13 - 17	38.3% (n=314,$2.1M)	40.8% (n=417,$2.6M)	38.0% (n=366,$2.4M)	37.0% (n=353,$2.4M)
		18 - 21	0.9% (n=7,$0.1M)	1.4% (n=14,$0.1M)	1.6% (n=15,$0.1M)	1.5% (n=14,$0.1M)
SUD	Adolescent Community Reinforcement Approach	3 - 12	1.0% (n=3,$0.0M)	0.3% (n=1,$0.0M)	1.1% (n=4,$0.0M)	0.9% (n=3,$0.0M)
		13 - 17	95.1% (n=292,$1.5M)	92.1% (n=359,$1.6M)	92.8% (n=333,$1.6M)	94.5% (n=308,$1.7M)
		18 - 21	3.9% (n=12,$0.1M)	7.2% (n=28,$0.1M)	6.1% (n=22,$0.1M)	4.6% (n=15,$0.1M)
		>21		0.5% (n=2,$0.0M)		
	Multi-Dimensional Family Therapy	3 - 12	10.9% (n=85,$1.1M)	14.0% (n=111,$1.4M)	11.7% (n=87,$1.3M)	12.4% (n=88,$1.3M)
		13 - 17	86.2% (n=670,$8.5M)	84.3% (n=667,$8.6M)	87.0% (n=645,$10.0M)	86.6% (n=614,$10.3M)
		18 - 21	2.8% (n=22,$0.3M)	1.5% (n=12,$0.1M)	1.2% (n=9,$0.1M)	1.0% (n=7,$0.1M)
		>21		0.1% (n=1,$0.0M)		
	Multisystemic Therapy	3 - 12	13.9% (n=20,$0.4M)	19.0% (n=29,$0.6M)	8.2% (n=13,$0.2M)	11.6% (n=17,$0.4M)
		13 - 17	86.1% (n=124,$2.3M)	79.7% (n=122,$2.2M)	89.9% (n=143,$2.8M)	88.4% (n=129,$2.9M)
		18 - 21		1.3% (n=2,$0.0M)	1.9% (n=3,$0.1M)	
	Multisystemic Therapy Emerging Adults	13 - 17	64.3% (n=9,$0.3M)	63.6% (n=7,$0.4M)	54.2% (n=13,$0.4M)	63.6% (n=7,$0.5M)
		18 - 21	35.7% (n=5,$0.2M)	36.4% (n=4,$0.2M)	45.8% (n=11,$0.4M)	36.4% (n=4,$0.3M)
	Multisystemic Therapy Family Int..	13 - 17	92.3% (n=24,$0.6M)	100.0% (n=20,$0.6M)	100.0% (n=22,$0.5M)	93.3% (n=14,$0.6M)
		18 - 21	7.7% (n=2,$0.0M)			6.7% (n=1,$0.0M)
	Multisystemic Therapy Problem Sexual Behavior	3 - 12	32.1% (n=17,$0.5M)	43.4% (n=23,$0.7M)	33.9% (n=19,$0.6M)	39.0% (n=16,$0.7M)
		13 - 17	66.0% (n=35,$1.1M)	56.6% (n=30,$0.9M)	60.7% (n=34,$1.0M)	58.5% (n=24,$1.0M)
		18 - 21	1.9% (n=1,$0.0M)		5.4% (n=3,$0.1M)	2.4% (n=1,$0.0M)

DCF Expend Selection Parameter
Total Adjusted Expend

Selected DCF Services Count of Non-Unique Youth by Primary Treatment Focus, Service Type, SFY, and Hispanic Origin (Total Expend)

			SFY15	SFY16	SFY17	SFY18
MH	Outpatient Psychiatric Clinic for Children	Non-Hispanic	59.6% (n=7,747, $7.0M)	61.5% (n=8,042, $7.1M)	60.1% (n=8,277, $7.0M)	91.1% (n=12,325, $10.7M)
		Hispanic	40.4% (n=5,254, $4.9M)	38.5% (n=5,030, $4.7M)	39.9% (n=5,503, $4.8M)	8.9% (n=1,211, $1.1M)
	Emergency Mobile Psychiatric Services (EMPS)	Non-Hispanic	71.0% (n=8,837, $6.8M)	70.8% (n=8,819, $7.5M)	69.8% (n=9,393, $8.1M)	92.5% (n=13,500, $10.4M)
		Hispanic	29.0% (n=3,604, $2.8M)	29.2% (n=3,633, $3.1M)	30.2% (n=4,055, $3.5M)	7.5% (n=1,096, $0.8M)
	Care Coordination	Non-Hispanic	58.9% (n=482, $3.5M)	57.5% (n=588, $3.6M)	55.8% (n=537, $3.7M)	90.2% (n=860, $5.6M)
		Hispanic	41.1% (n=337, $2.2M)	42.5% (n=435, $2.5M)	44.2% (n=425, $2.7M)	9.8% (n=93, $0.6M)
SUD	Adolescent Community Reinforcement Approach	Non-Hispanic	70.0% (n=215, $1.1M)	64.6% (n=252, $1.1M)	62.7% (n=225, $1.1M)	92.9% (n=303, $1.6M)
		Hispanic	30.0% (n=92, $0.5M)	35.4% (n=138, $0.6M)	37.3% (n=134, $0.6M)	7.1% (n=23, $0.2M)
	Multi-Dimensional Family Therapy	Non-Hispanic	63.3% (n=492, $6.2M)	66.9% (n=529, $6.7M)	64.0% (n=474, $7.1M)	91.1% (n=646, $10.2M)
		Hispanic	36.7% (n=285, $3.7M)	33.1% (n=262, $3.4M)	36.0% (n=267, $4.1M)	8.9% (n=63, $0.9M)
	Multisystemic Therapy	Non-Hispanic	68.8% (n=99, $1.9M)	56.9% (n=87, $1.7M)	61.6% (n=98, $2.0M)	91.1% (n=133, $2.9M)
		Hispanic	31.3% (n=45, $0.7M)	43.1% (n=66, $1.1M)	38.4% (n=61, $1.0M)	8.9% (n=13, $0.2M)
	Multisystemic Therapy Emerging Adults	Non-Hispanic	78.6% (n=11, $0.3M)	36.4% (n=4, $0.2M)	70.8% (n=17, $0.5M)	72.7% (n=8, $0.5M)
		Hispanic	21.4% (n=3, $0.1M)	63.6% (n=7, $0.4M)	29.2% (n=7, $0.2M)	27.3% (n=3, $0.2M)
	Multisystemic Therapy Family Integrated Transitions	Non-Hispanic	61.5% (n=16, $0.4M)	75.0% (n=15, $0.5M)	59.1% (n=13, $0.3M)	93.3% (n=14, $0.6M)
		Hispanic	38.5% (n=10, $0.2M)	25.0% (n=5, $0.2M)	40.9% (n=9, $0.2M)	6.7% (n=1, $0.0M)
	Multisystemic Therapy Problem Sexual Behavior	Non-Hispanic	54.7% (n=29, $0.9M)	49.1% (n=26, $0.8M)	66.1% (n=37, $1.1M)	97.6% (n=40, $1.6M)
		Hispanic	45.3% (n=24, $0.7M)	50.9% (n=27, $0.8M)	33.9% (n=19, $0.6M)	2.4% (n=1, $0.0M)

DCF Expend Selection Parameter
Total Expend

Selected DCF Services Count of Non-Unique Youth by Primary Treatment Focus, Service Type, SFY, and Hispanic Origin (Total Adjusted Expend)

			SFY15	SFY16	SFY17	SFY18
MH	Outpatient Psychiatric Clinic for Children	Non-Hispanic	59.6% (n=7,747, $7.0M)	61.5% (n=8,042, $7.2M)	60.1% (n=8,277, $7.2M)	91.1% (n=12,325, $11.2M)
		Hispanic	40.4% (n=5,254, $4.9M)	38.5% (n=5,030, $4.8M)	39.9% (n=5,503, $4.9M)	8.9% (n=1,211, $1.2M)
	Emergency Mobile Psychiatric Services (EMPS)	Non-Hispanic	71.0% (n=8,837, $6.8M)	70.8% (n=8,819, $7.6M)	69.8% (n=9,393, $8.3M)	92.5% (n=13,500, $10.9M)
		Hispanic	29.0% (n=3,604, $2.8M)	29.2% (n=3,633, $3.2M)	30.2% (n=4,055, $3.6M)	7.5% (n=1,096, $0.9M)
	Care Coordination	Non-Hispanic	58.9% (n=482, $3.5M)	57.5% (n=588, $3.6M)	55.8% (n=537, $3.8M)	90.2% (n=860, $5.8M)
		Hispanic	41.1% (n=337, $2.2M)	42.5% (n=435, $2.5M)	44.2% (n=425, $2.7M)	9.8% (n=93, $0.6M)
SUD	Adolescent Community Reinforcement Approach	Non-Hispanic	70.0% (n=215, $1.1M)	64.6% (n=252, $1.1M)	62.7% (n=225, $1.1M)	92.9% (n=303, $1.6M)
		Hispanic	30.0% (n=92, $0.5M)	35.4% (n=138, $0.7M)	37.3% (n=134, $0.7M)	7.1% (n=23, $0.2M)
	Multi-Dimensional Family Therapy	Non-Hispanic	63.3% (n=492, $6.2M)	66.9% (n=529, $6.8M)	64.0% (n=474, $7.2M)	91.1% (n=646, $10.7M)
		Hispanic	36.7% (n=285, $3.7M)	33.1% (n=262, $3.4M)	36.0% (n=267, $4.2M)	8.9% (n=63, $1.0M)
	Multisystemic Therapy	Non-Hispanic	68.8% (n=99, $1.9M)	56.9% (n=87, $1.7M)	61.6% (n=98, $2.1M)	91.1% (n=133, $3.0M)
		Hispanic	31.3% (n=45, $0.7M)	43.1% (n=66, $1.1M)	38.4% (n=61, $1.0M)	8.9% (n=13, $0.2M)
	Multisystemic Therapy Emerging Adults	Non-Hispanic	78.6% (n=11, $0.3M)	36.4% (n=4, $0.2M)	70.8% (n=17, $0.6M)	72.7% (n=8, $0.5M)
		Hispanic	21.4% (n=3, $0.1M)	63.6% (n=7, $0.4M)	29.2% (n=7, $0.2M)	27.3% (n=3, $0.2M)
	Multisystemic Therapy Family Integrated Transitions	Non-Hispanic	61.5% (n=16, $0.4M)	75.0% (n=15, $0.5M)	59.1% (n=13, $0.3M)	93.3% (n=14, $0.6M)
		Hispanic	38.5% (n=10, $0.2M)	25.0% (n=5, $0.2M)	40.9% (n=9, $0.2M)	6.7% (n=1, $0.0M)
	Multisystemic Therapy Problem Sexual Behavior	Non-Hispanic	54.7% (n=29, $0.9M)	49.1% (n=26, $0.9M)	66.1% (n=37, $1.1M)	97.6% (n=40, $1.7M)
		Hispanic	45.3% (n=24, $0.7M)	50.9% (n=27, $0.8M)	33.9% (n=19, $0.6M)	2.4% (n=1, $0.0M)

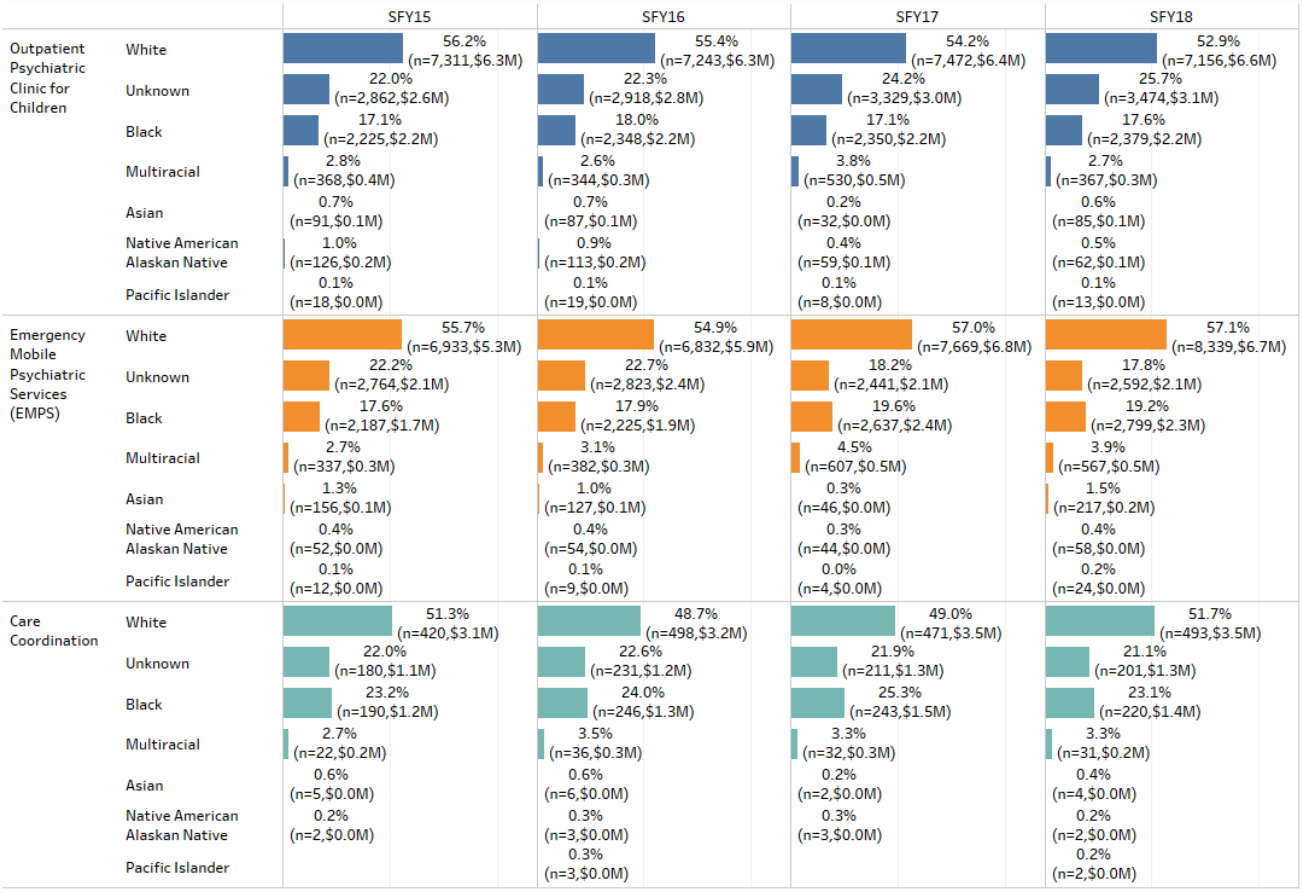
DCF Expend Selection Parameter
Total Adjusted Expend

Selected Mental Health DCF Services Count of Non-Unique Youth by Primary Treatment Focus, Service Type, SFY, and Race (Total Expend)

		SFY15	SFY16	SFY17	SFY18
Outpatient Psychiatric Clinic for Children	White	56.2% (n=7,311,$6.3M)	55.4% (n=7,243,$6.3M)	54.2% (n=7,472,$6.2M)	52.9% (n=7,156,$6.3M)
	Unknown	22.0% (n=2,862,$2.6M)	22.3% (n=2,918,$2.7M)	24.2% (n=3,329,$2.9M)	25.7% (n=3,474,$3.0M)
	Black	17.1% (n=2,225,$2.2M)	18.0% (n=2,348,$2.2M)	17.1% (n=2,350,$2.1M)	17.6% (n=2,379,$2.1M)
	Multiracial	2.8% (n=368,$0.4M)	2.6% (n=344,$0.3M)	3.8% (n=530,$0.5M)	2.7% (n=367,$0.3M)
	Asian	0.7% (n=91,$0.1M)	0.7% (n=87,$0.1M)	0.2% (n=32,$0.0M)	0.6% (n=85,$0.1M)
	Native American Alaskan Native	1.0% (n=126,$0.2M)	0.9% (n=113,$0.2M)	0.4% (n=59,$0.1M)	0.5% (n=62,$0.1M)
	Pacific Islander	0.1% (n=18,$0.0M)	0.1% (n=19,$0.0M)	0.1% (n=8,$0.0M)	0.1% (n=13,$0.0M)
Emergency Mobile Psychiatric Services (EMPS)	White	55.7% (n=6,933,$5.3M)	54.9% (n=6,832,$5.8M)	57.0% (n=7,669,$6.6M)	57.1% (n=8,339,$6.4M)
	Unknown	22.2% (n=2,764,$2.1M)	22.7% (n=2,823,$2.4M)	18.2% (n=2,441,$2.1M)	17.8% (n=2,592,$2.0M)
	Black	17.6% (n=2,187,$1.7M)	17.9% (n=2,225,$1.9M)	19.6% (n=2,637,$2.3M)	19.2% (n=2,799,$2.2M)
	Multiracial	2.7% (n=337,$0.3M)	3.1% (n=382,$0.3M)	4.5% (n=607,$0.5M)	3.9% (n=567,$0.4M)
	Asian	1.3% (n=156,$0.1M)	1.0% (n=127,$0.1M)	0.3% (n=46,$0.0M)	1.5% (n=217,$0.2M)
	Native American Alaskan Native	0.4% (n=52,$0.0M)	0.4% (n=54,$0.0M)	0.3% (n=44,$0.0M)	0.4% (n=58,$0.0M)
	Pacific Islander	0.1% (n=12,$0.0M)	0.1% (n=9,$0.0M)	0.0% (n=4,$0.0M)	0.2% (n=24,$0.0M)
Care Coordination	White	51.3% (n=420,$3.1M)	48.7% (n=498,$3.2M)	49.0% (n=471,$3.4M)	51.7% (n=493,$3.3M)
	Unknown	22.0% (n=180,$1.1M)	22.6% (n=231,$1.2M)	21.9% (n=211,$1.2M)	21.1% (n=201,$1.3M)
	Black	23.2% (n=190,$1.2M)	24.0% (n=246,$1.3M)	25.3% (n=243,$1.4M)	23.1% (n=220,$1.3M)
	Multiracial	2.7% (n=22,$0.2M)	3.5% (n=36,$0.3M)	3.3% (n=32,$0.3M)	3.3% (n=31,$0.2M)
	Asian	0.6% (n=5,$0.0M)	0.6% (n=6,$0.0M)	0.2% (n=2,$0.0M)	0.4% (n=4,$0.0M)
	Native American Alaskan Native	0.2% (n=2,$0.0M)	0.3% (n=3,$0.0M)	0.3% (n=3,$0.0M)	0.2% (n=2,$0.0M)
	Pacific Islander		0.3% (n=3,$0.0M)		0.2% (n=2,$0.0M)

DCF Expend Selection Parameter
Total Expend

Selected Mental Health DCF Services Count of Non-Unique Youth by Primary Treatment Focus, Service Type, SFY, and Race (Total Adjusted Expend)



DCF Expend Selection Parameter
Total Adjusted Expend

Selected SUD DCF Services Count of Non-Unique Youth by Primary Treatment Focus, Service Type, SFY, and Race (Total Expend)

		SFY15	SFY16	SFY17	SFY18
Adolescent Community Reinforcement Approach	White	52.8% (n=162.0,$0.9M)	54.1% (n=211.0,$1.0M)	45.4% (n=163.0,$0.9M)	52.1% (n=170.0,$0.9M)
	Black	28.0% (n=86.0,$0.4M)	26.9% (n=105.0,$0.4M)	26.2% (n=94.0,$0.4M)	25.2% (n=82.0,$0.4M)
	Unknown	16.3% (n=50.0,$0.3M)	16.9% (n=66.0,$0.3M)	25.3% (n=91.0,$0.4M)	19.0% (n=62.0,$0.3M)
	Multiracial	2.9% (n=9.0,$0.1M)	2.1% (n=8.0,$0.0M)	2.8% (n=10.0,$0.1M)	2.8% (n=9.0,$0.1M)
	Native American Alaskan ..			0.3% (n=1.0,$0.0M)	0.9% (n=3.0,$0.0M)
Multi-Dimensional Family Therapy	White	50.5% (n=392.0,$5.0M)	53.0% (n=419.0,$5.3M)	56.0% (n=415.0,$6.2M)	54.7% (n=388.0,$6.3M)
	Black	27.9% (n=217.0,$2.8M)	30.7% (n=243.0,$3.2M)	24.6% (n=182.0,$2.7M)	25.2% (n=179.0,$2.7M)
	Unknown	18.1% (n=141.0,$1.8M)	12.9% (n=102.0,$1.3M)	15.0% (n=111.0,$1.6M)	16.6% (n=118.0,$1.9M)
	Multiracial	3.3% (n=26.0,$0.3M)	3.4% (n=27.0,$0.3M)	4.0% (n=30.0,$0.5M)	3.0% (n=21.0,$0.3M)
	Native American Alaskan ..	0.1% (n=1.0,$0.0M)		0.4% (n=3.0,$0.0M)	0.4% (n=3.0,$0.0M)
Multisystemic Therapy	White	63.2% (n=91.0,$1.7M)	61.4% (n=94.0,$1.9M)	56.0% (n=89.0,$1.7M)	65.1% (n=95.0,$2.2M)
	Black	21.5% (n=31.0,$0.5M)	16.3% (n=25.0,$0.4M)	23.3% (n=37.0,$0.8M)	15.8% (n=23.0,$0.4M)
	Unknown	13.2% (n=19.0,$0.3M)	19.6% (n=30.0,$0.4M)	17.6% (n=28.0,$0.4M)	17.8% (n=26.0,$0.5M)
	Multiracial	2.1% (n=3.0,$0.1M)	2.6% (n=4.0,$0.1M)	1.9% (n=3.0,$0.0M)	1.4% (n=2.0,$0.1M)
	Native American Alaskan ..			1.3% (n=2.0,$0.0M)	
Multisystemic Therapy Emerging Adults	White	28.6% (n=4.0,$0.1M)	90.9% (n=10.0,$0.6M)	50.0% (n=12.0,$0.4M)	54.5% (n=6.0,$0.4M)
	Black	71.4% (n=10.0,$0.3M)	9.1% (n=1.0,$0.1M)	41.7% (n=10.0,$0.3M)	36.4% (n=4.0,$0.3M)
	Unknown			4.2% (n=1.0,$0.0M)	9.1% (n=1.0,$0.1M)
	Multiracial			4.2% (n=1.0,$0.0M)	
Multisystemic Therapy Family Integrated Transitions	White	34.6% (n=9.0,$0.2M)	40.0% (n=8.0,$0.2M)	54.5% (n=12.0,$0.3M)	33.3% (n=5.0,$0.2M)
	Black	46.2% (n=12.0,$0.3M)	50.0% (n=10.0,$0.3M)	31.8% (n=7.0,$0.2M)	40.0% (n=6.0,$0.2M)
	Unknown	15.4% (n=4.0,$0.1M)	5.0% (n=1.0,$0.0M)	9.1% (n=2.0,$0.0M)	20.0% (n=3.0,$0.1M)
	Multiracial	3.8% (n=1.0,$0.0M)	5.0% (n=1.0,$0.0M)	4.5% (n=1.0,$0.0M)	6.7% (n=1.0,$0.0M)
Multisystemic Therapy Problem Sexual Behavior	White	54.7% (n=29.0,$0.9M)	47.2% (n=25.0,$0.8M)	62.5% (n=35.0,$1.1M)	63.4% (n=26.0,$1.0M)
	Black	20.8% (n=11.0,$0.3M)	28.3% (n=15.0,$0.5M)	17.9% (n=10.0,$0.3M)	22.0% (n=9.0,$0.4M)
	Unknown	20.8% (n=11.0,$0.3M)	18.9% (n=10.0,$0.3M)	8.9% (n=5.0,$0.1M)	14.6% (n=6.0,$0.3M)
	Multiracial	3.8% (n=2.0,$0.1M)	1.9% (n=1.0,$0.0M)	8.9% (n=5.0,$0.2M)	
	Native American Alaskan ..		3.8% (n=2.0,$0.1M)	1.8% (n=1.0,$0.0M)	

DCF Expend Selection Parameter
Total Expend

Selected SUD DCF Services Count of Non-Unique Youth by Primary Treatment Focus, Service Type, SFY, and Race (Total Adjusted Expend)

		SFY15	SFY16	SFY17	SFY18
Adolescent Community Reinforcement Approach	White	52.8% (n=162.0,$0.9M)	54.1% (n=211.0,$1.0M)	45.4% (n=163.0,$0.9M)	52.1% (n=170.0,$1.0M)
	Black	28.0% (n=86.0,$0.4M)	26.9% (n=105.0,$0.4M)	26.2% (n=94.0,$0.4M)	25.2% (n=82.0,$0.4M)
	Unknown	16.3% (n=50.0,$0.3M)	16.9% (n=66.0,$0.3M)	25.3% (n=91.0,$0.4M)	19.0% (n=62.0,$0.3M)
	Multiracial	2.9% (n=9.0,$0.1M)	2.1% (n=8.0,$0.0M)	2.8% (n=10.0,$0.1M)	2.8% (n=9.0,$0.1M)
	Native American Alaskan ..			0.3% (n=1.0,$0.0M)	0.9% (n=3.0,$0.0M)
Multi-Dimensional Family Therapy	White	50.5% (n=392.0,$5.0M)	53.0% (n=419.0,$5.3M)	56.0% (n=415.0,$6.4M)	54.7% (n=388.0,$6.6M)
	Black	27.9% (n=217.0,$2.8M)	30.7% (n=243.0,$3.2M)	24.6% (n=182.0,$2.7M)	25.2% (n=179.0,$2.8M)
	Unknown	18.1% (n=141.0,$1.8M)	12.9% (n=102.0,$1.3M)	15.0% (n=111.0,$1.7M)	16.6% (n=118.0,$2.0M)
	Multiracial	3.3% (n=26.0,$0.3M)	3.4% (n=27.0,$0.3M)	4.0% (n=30.0,$0.6M)	3.0% (n=21.0,$0.3M)
	Native American Alaskan ..	0.1% (n=1.0,$0.0M)		0.4% (n=3.0,$0.0M)	0.4% (n=3.0,$0.0M)
Multisystemic Therapy	White	63.2% (n=91.0,$1.7M)	61.4% (n=94.0,$1.9M)	56.0% (n=89.0,$1.8M)	65.1% (n=95.0,$2.3M)
	Black	21.5% (n=31.0,$0.5M)	16.3% (n=25.0,$0.4M)	23.3% (n=37.0,$0.8M)	15.8% (n=23.0,$0.5M)
	Unknown	13.2% (n=19.0,$0.3M)	19.6% (n=30.0,$0.4M)	17.6% (n=28.0,$0.4M)	17.8% (n=26.0,$0.5M)
	Multiracial	2.1% (n=3.0,$0.1M)	2.6% (n=4.0,$0.1M)	1.9% (n=3.0,$0.0M)	1.4% (n=2.0,$0.1M)
	Native American Alaskan ..			1.3% (n=2.0,$0.0M)	
Multisystemic Therapy Emerging Adults	White	28.6% (n=4.0,$0.1M)	90.9% (n=10.0,$0.6M)	50.0% (n=12.0,$0.4M)	54.5% (n=6.0,$0.4M)
	Black	71.4% (n=10.0,$0.3M)	9.1% (n=1.0,$0.1M)	41.7% (n=10.0,$0.3M)	36.4% (n=4.0,$0.3M)
	Unknown			4.2% (n=1.0,$0.0M)	9.1% (n=1.0,$0.1M)
	Multiracial			4.2% (n=1.0,$0.0M)	
Multisystemic Therapy Family Integrated Transitions	White	34.6% (n=9.0,$0.2M)	40.0% (n=8.0,$0.2M)	54.5% (n=12.0,$0.3M)	33.3% (n=5.0,$0.2M)
	Black	46.2% (n=12.0,$0.3M)	50.0% (n=10.0,$0.3M)	31.8% (n=7.0,$0.2M)	40.0% (n=6.0,$0.3M)
	Unknown	15.4% (n=4.0,$0.1M)	5.0% (n=1.0,$0.0M)	9.1% (n=2.0,$0.0M)	20.0% (n=3.0,$0.1M)
	Multiracial	3.8% (n=1.0,$0.0M)	5.0% (n=1.0,$0.0M)	4.5% (n=1.0,$0.0M)	6.7% (n=1.0,$0.0M)
Multisystemic Therapy Problem Sexual Behavior	White	54.7% (n=29.0,$0.9M)	47.2% (n=25.0,$0.8M)	62.5% (n=35.0,$1.1M)	63.4% (n=26.0,$1.0M)
	Black	20.8% (n=11.0,$0.3M)	28.3% (n=15.0,$0.5M)	17.9% (n=10.0,$0.3M)	22.0% (n=9.0,$0.4M)
	Unknown	20.8% (n=11.0,$0.3M)	18.9% (n=10.0,$0.3M)	8.9% (n=5.0,$0.1M)	14.6% (n=6.0,$0.3M)
	Multiracial	3.8% (n=2.0,$0.1M)	1.9% (n=1.0,$0.0M)	8.9% (n=5.0,$0.2M)	
	Native American Alaskan ..		3.8% (n=2.0,$0.1M)	1.8% (n=1.0,$0.0M)	

DCF Expend Selection Parameter
Total Adjusted Expend