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Drug and Alcohol Services

Each year, the demand for drug and alcohol services far exceeds the funding for these services. The costs of untreated addiction are seen in hospital emergency rooms and in placements in children and youth programs and prisons. Treatment for addiction is highly effective and cost beneficial when provided in a timely fashion, at the appropriate level of care and for an adequate length of time.

Medicaid patients who received addiction treatment experienced a 30 percent decrease in their overall medical costs, according to a new study from researchers at Kaiser Permanente. The study found that patients who received treatment saw their Medicaid costs fall from an average of \$5,402 per year to an average of \$3,627 per year.

Underage alcohol use costs \$58 billion per year, including violent crime and fatal crashes (Pacific Institute for Research and Evaluation, 1999).

The National Council on Alcoholism and Drug Dependence estimates that up to 17 percent of adults older than 60 abuse alcohol and or prescription drugs.

Public funding for addiction services has not kept pace with demand, and waiting lists and rationing of services have become commonplace.

The impact of the impending funding crisis can be reduced by increasing base allocation dollars by at least \$10 million dollars and by funding the gap (\$6.3 million) that will exist as the Intergovernmental Transfer is phased out.

The Pennsylvania Association of County Drug and Alcohol Administrators also supports the three percent cost of living increase for drug and alcohol programs contained in the governor's proposed Commonwealth budget.

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