

# **Commonwealth of Pennsylvania**

Compulsive and Problem Gambling Annual Report 2017 **Annual Report** 

Dear Members of the General Assembly,

The Department of Drug and Alcohol Programs is pleased to present the 2017 Compulsive and Problem Gambling Annual Report to the Governor and Members of the General Assembly regarding the impact of the programs funded by Compulsive and Problem Gambling Treatment Fund (Act 1 of 2010). This report will also be available electronically by visiting http://www.ddap.pa.gov/.

Please contact me if you have any questions. Thank you.

Sincerely,

Jennifer D. Smith

Jennifer S. Smith Acting Secretary,

Pennsylvania Department of Drug and Alcohol Programs

# **Table of Contents**

Page 4 -	Mission
Page 4 -	Department Overview of Gaming Revenue
Page 4 -	Problem Gambling Helpline
Page 10 -	Status of Outpatient Gambling Addiction Treatment in Pennsylvania
Page 14 -	Compulsive and Problem Gambling Treatment Outcomes
Page 20 -	Prevention of Compulsive and Problem Gambling
Page 21 -	Problem Gambling Funding Initiative
Page 24 -	Problem Gambling Prevention Programs 2016-2017
Page 25 -	Supplemental Program Activity/Expenditure Report
Page 25 -	State Gaming Fund: SCA-Specific Funding
Page 38 -	Conclusion

#### Mission

The mission of the Compulsive and Problem Gambling Program is to increase public awareness of services available for problem and compulsive gambling, ensure the widespread availability of treatment programs for problem and compulsive gamblers, their family members, and significant others, and implement problem gambling prevention programs based upon findings throughout Pennsylvania.

#### **Department Overview of Gaming Revenue**

The Department of Drug and Alcohol Programs (Department) implements a comprehensive, coordinated, and effective compulsive and problem gambling program for the Commonwealth. As stated in Act 1 of 2010 (Act 2010-01), the sum of \$2 million or an amount equal to .002 multiplied by the total gross terminal revenue of all active and operating licensed gaming entities (whichever is greater) shall be transferred annually into the Compulsive and Problem Gambling Treatment Fund for the Compulsive and Problem Gambling Program.

From these funds, the Department annually distributes approximately 66 percent of the monies to its county-level grantees called Single County Authorities (SCAs) to be expended solely for problem gambling needs assessment, prevention programs, outreach programs, educational programs, and other Department-approved services. An additional ten percent is provided to licensed Gambling Treatment Providers to provide outpatient gambling treatment services throughout the Commonwealth of Pennsylvania. The remaining portion covers operating costs associated with the administration and oversight of the program.

Additionally, Act 2010-01 created a requirement to transfer \$3 million annually from the State Gaming Fund for treatment (see page 25 for more details). Specifically, the full amount of these funds is allocated to the SCAs solely for financing drug and alcohol addiction assessments, including drug and alcohol addiction assessments associated or related to compulsive and problem gambling, as well as for the related addiction treatment.

# **Problem Gambling Helpline**

The Department contracts with the Council on Compulsive Gambling of Pennsylvania, Inc. (CCGP) to manage its toll-free Pennsylvania Gambling Helpline, 1-877-565-2112 and a 24-hour internet chatline found at:

http://www.ddap.pa.gov/treatment/Pages/Problem-Gambling.aspx.

The helpline provides confidential crisis counseling and referral services to problem and compulsive gamblers and family members or significant others who may be experiencing difficulty as a result of problem or compulsive gambling. Calls to the helpline are answered 24 hours a day, seven days a week, by professionally-trained operators in a free and confidential manner.

Calls can be answered in English, Spanish and more than 60 other languages utilizing the American Telephone and Telegraph (AT&T) language service. The operators collect as much data from each caller as the context of the call allows, given not all callers answer every question. In addition, callers may provide more than one answer to any given question. Each call is assessed for the most appropriate referral information, and the caller is given names, phone numbers, addresses, etc., for the resources suggested.

Helpline resources include referrals to Pennsylvania gambling treatment providers, Gamblers Anonymous (GA) and Gam-Anon meetings, and informational brochures. Pennsylvania gambling treatment providers are licensed/certified behavioral health care specialists (psychiatrists, psychologists, social workers, professional counselors, etc.). The helpline is able to provide current meeting information for GA and Gam-Anon meetings in Pennsylvania, New Jersey, Ohio, New York, West Virginia and Maryland.

The Problem Gambling Helpline information on the following charts (Figures 1 through 8 below) reflects values over a 12-month, State Fiscal Year (SFY) span, from July 1, 2016 through June 30, 2017.

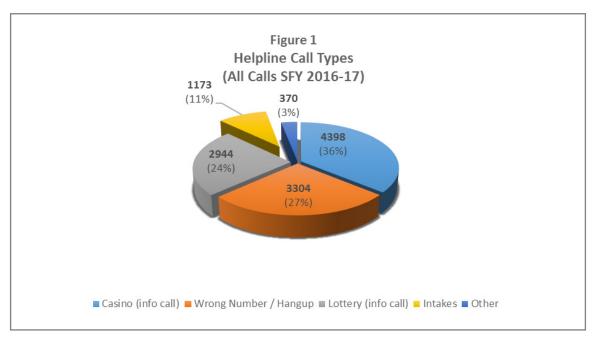


Figure 1, above, identifies the total of all incoming calls. Helpline call types are identified and recorded in one of five categories. Calls pertaining to "Intake" identify callers seeking treatment, or general questions regarding the treatment process totaled 1,173 (11 percent). The remainder of the helpline data presented below (Figures 2 through 8) is reflective of calls from the "Intake" category. In some instances, callers may choose more than one presented option or choice, and that is reflected in the data shown in Figures 2, 5, and 8.

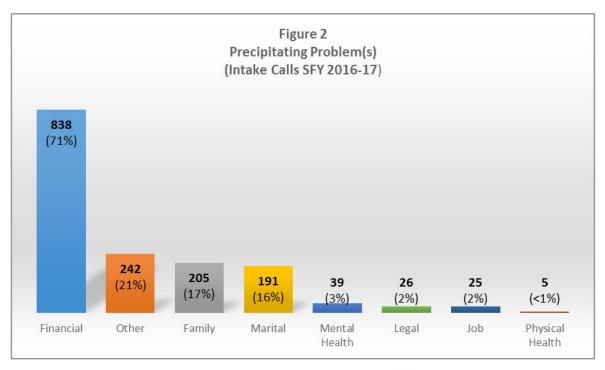


Figure 2, above, displays a breakdown of the precipitating problem(s) that Intake callers reported were a result of gambling. It is important to note that more than one problem can be reported by the caller.

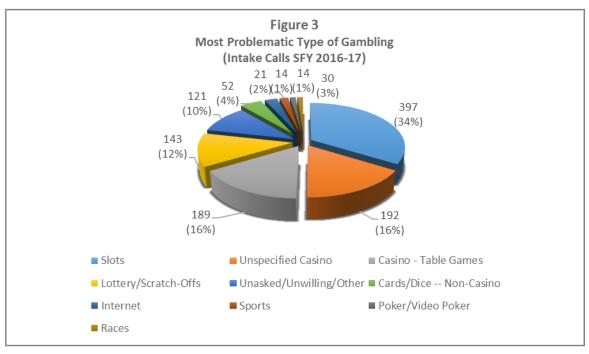


Figure 3, above, displays the most problematic type of gambling reported by the Intake caller. This data is gathered to identify gambling preference. As in past years, the majority of helpline callers identified slot machines as being most problematic.

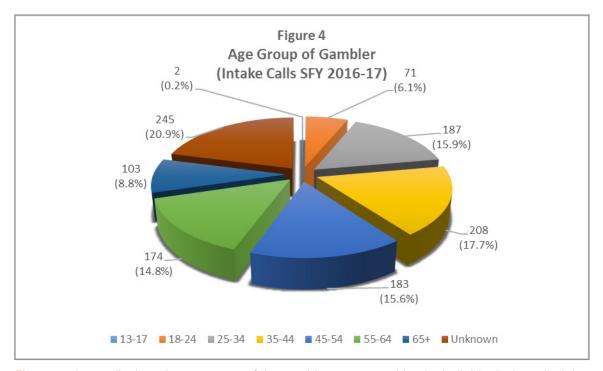


Figure 4, above, displays the age group of the gambler as reported by the individual who called the helpline. The age groups are denoted below, and the number of calls received are noted in the pie chart. Unknown numbers include caller's unwillingness to disclose their age with no reason given.

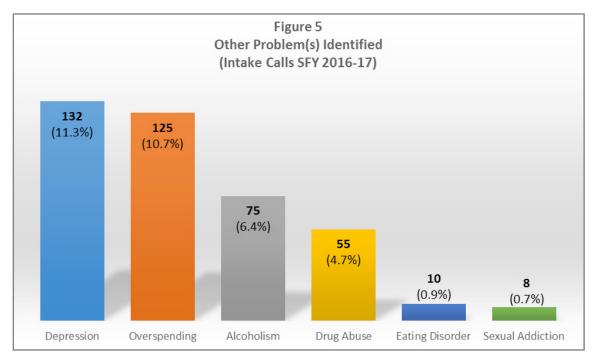


Figure 5, above, breaks down the other problems identified by the caller. It is important to note that a caller can answer "yes" to more than one question. In some cases, the caller may not have presented any additional problems.

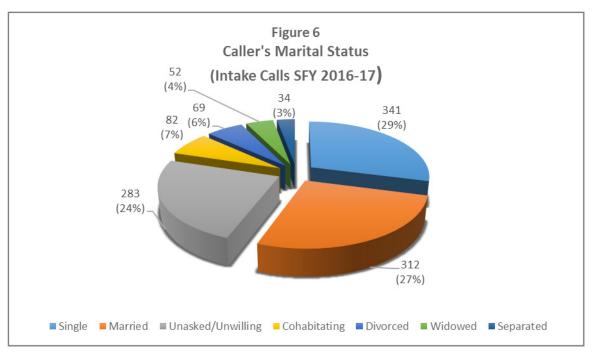


Figure 6, above, displays the marital status of the caller. Seven choices are identified, and the numeric values above each choice indicates the number of helpline callers selecting that option.

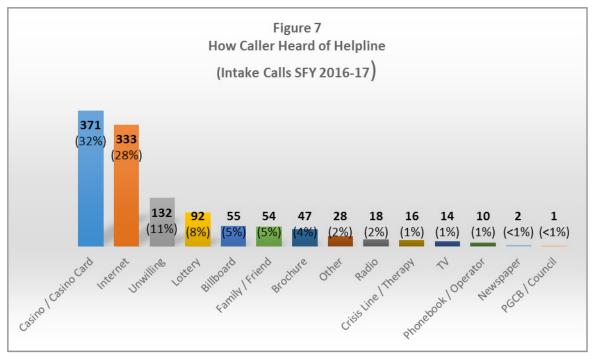


Figure 7, above, reveals how the caller heard of the helpline. Fourteen categories are listed, and the number (and percentages) of responses is listed above the corresponding category name.

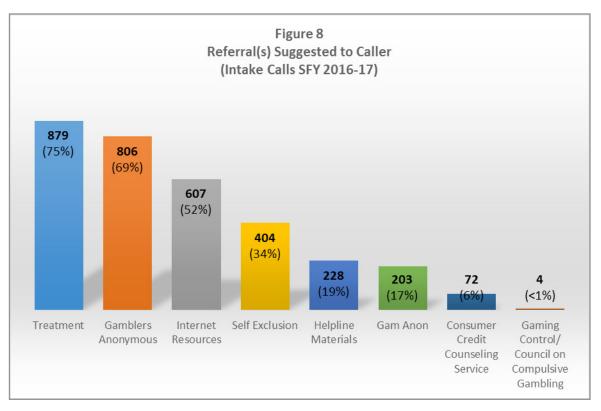


Figure 8, above, breaks down the referrals suggested to the caller. The majority of callers (879) were referred to treatment providers. Callers may be provided more than one referral option, which is reflected in the data shown.

#### Status of Outpatient Gambling Addiction Treatment in Pennsylvania

Outpatient problem gambling treatment services have been available within the Commonwealth since late 2008. The data in this section is based on clients who were admitted to, or discharged from, the Department's gambling treatment system. For SFY 2016-17, 35 providers contracted with and invoiced the Department \$442,921 for payment of treatment services rendered to clients. An admission occurs when a client presents to receive gambling treatment services with a provider who is approved by the Department to be reimbursed for gambling treatment services. A discharge occurs at the conclusion of the client receiving funding by the Department for gambling treatment services, a client changing providers, or upon meeting clinical discharge criteria.

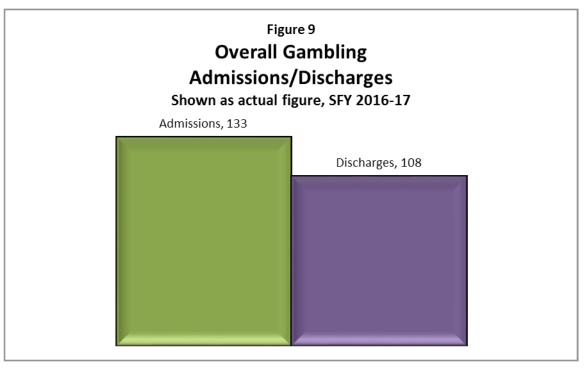


Figure 9, above, denotes the number of client admissions to, and discharges from, Department-funded gambling treatment services in SFY 2016-17. Note: A discharged client may have been admitted to treatment during a previous fiscal year.

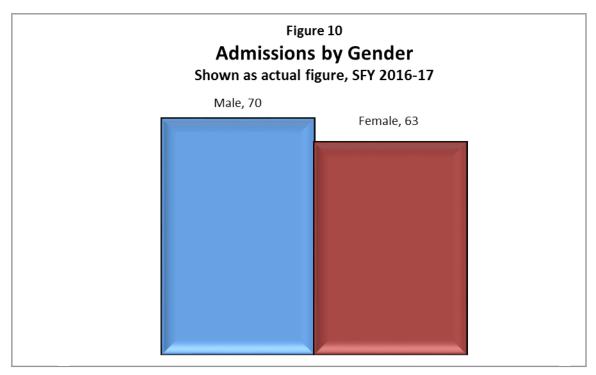


Figure 10, above, displays the number of unique client admissions by gender.

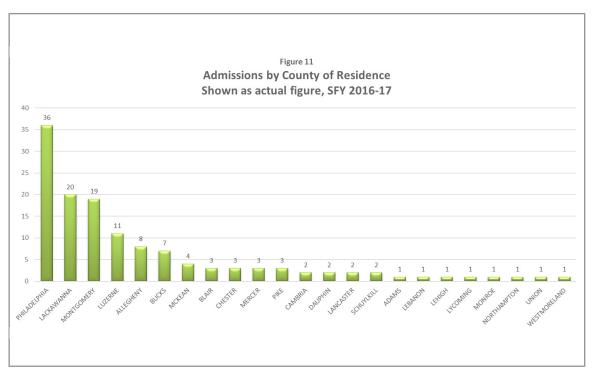
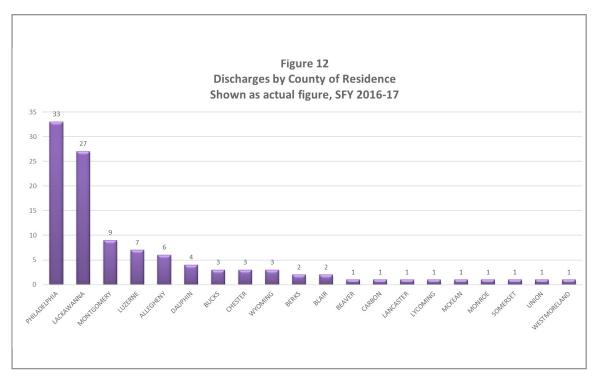


Figure 11, above, admissions by county of residence, displays the problem gambling treatment admissions by county. There were 133 admissions for SFY 2016-17. Philadelphia, Lackawanna, and Montgomery Counties accounted for 75 percent of the admissions.



The number of discharges by county of residence that occurred during the fiscal year is shown in Figure 12, above. There were 108 discharges this fiscal year. Collectively, Philadelphia and Lackawanna Counties accounted for 56 percent of the discharges statewide.

The preferred methods of gambling were reported by those individuals who were admitted and received gambling addiction treatment from providers who contract with the Department.

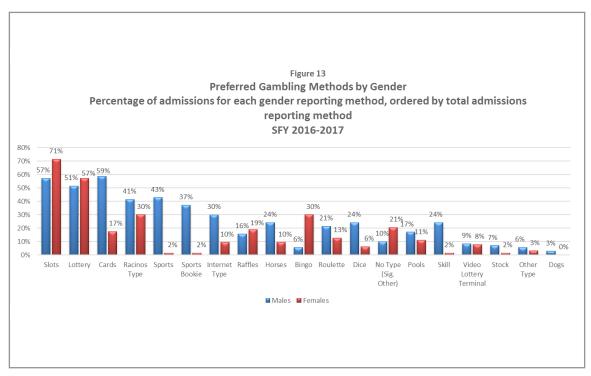


Figure 13, above, presents both female and male preferred gambling methods displayed together.

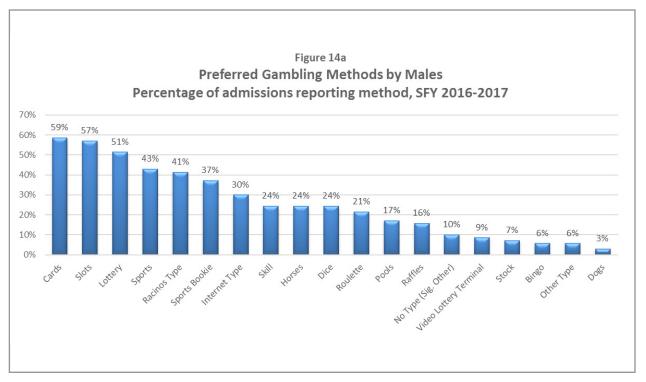


Figure 14a, above, shows a breakdown of preferred gambling methods by males.

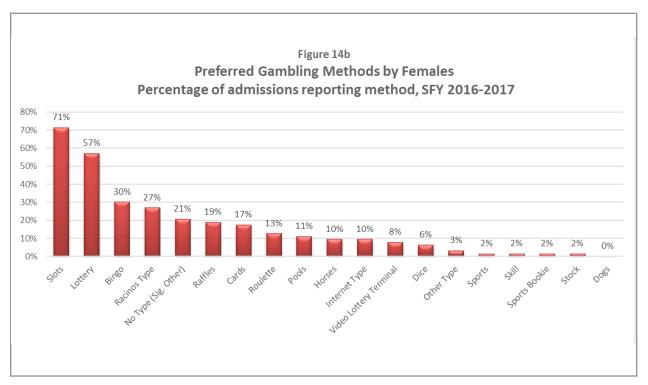


Figure 14b, above, shows a breakdown of preferred gambling methods by females.

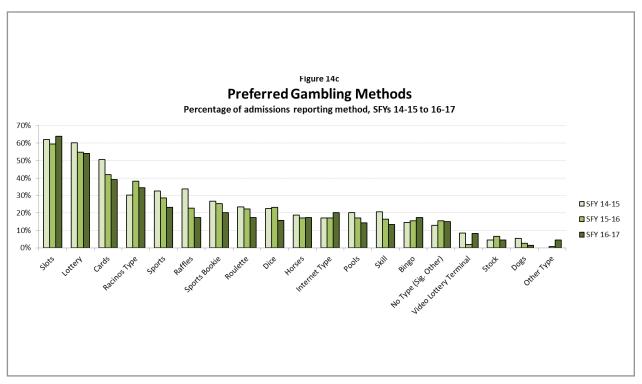


Figure 14c, above, shows the comparison of preferred gambling methods over a three-year period from SFY 14/15 – 16/17.

(Note: Any client can report more than one preferred method.)

#### Compulsive and Problem Gambling Treatment Outcomes

The Department utilizes a number of performance measures to determine the effectiveness of treatment services. The following pages provide information on the outcomes of the following performance measures:

- Employment status at admission and discharge (Figures 15-19)
- Average length of stay (Figure 20)
- Goals met or unmet upon discharge from treatment (Figures 21 & 22)
- Change in gambling frequency from admission to discharge (Figures 23 & 24)

The Department measures a client's employment status on admission and discharge because studies have shown that problem gambling may have negative effects on one's employment. The Department's statistical data regarding average length of an admission for treatment or average length of stay is to determine if there is a correlation between length of stay and recovery from compulsive and problem gambling. In addition, an ultimate goal is to see a decrease in the frequency of gambling as a result of receiving treatment.

For purposes of these performance measures, an admission occurs when a client presents to receive gambling addiction treatment with a provider. A discharge is recorded when a client has completed a particular type of treatment, changes providers, or at the conclusion of receiving Department funds for gambling treatment services.

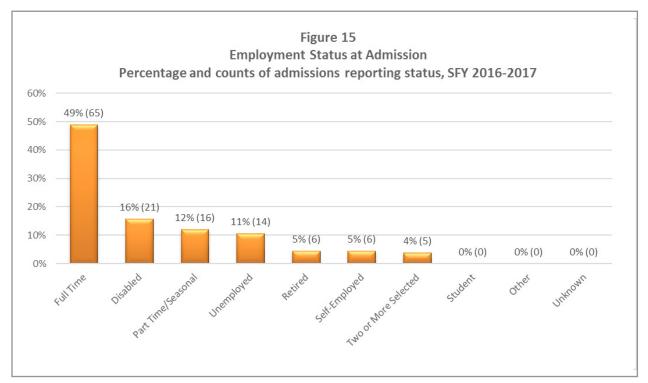


Figure 15, above, displays the employment status at admission to treatment. Of the 133 admissions, the majority (92 clients or 70 percent) reported being employed in some fashion. Of those admitted, 65 (49 percent) were employed full time. Twenty-One (16 percent) were disabled, 16 (12 percent) reported part time/seasonal employment, and six (5 percent) were retired, five (4 percent) reported more than one type of employment, zero (0 percent) were students, other, or unknown, status.

(Note: A client can report more than one employment status type at time of admission.)

Figures 16-19, on the following pages, represents *discharge employment status* only for clients who were discharged during SFY 2016-17.

(Note: Any client can report more than one preferred method.)

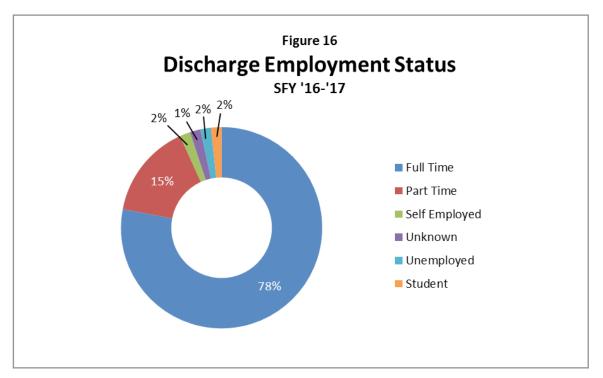


Figure 16, above, shows the discharge employment status of those who reported being employed full-time at admission. Seventy-eight percent reported they remained employed full-time, 15 percent began working part-time, 2 percent became self- employed, while the remaining 5 percent make up all other categories of becoming a student, unemployed, and/or unknown.

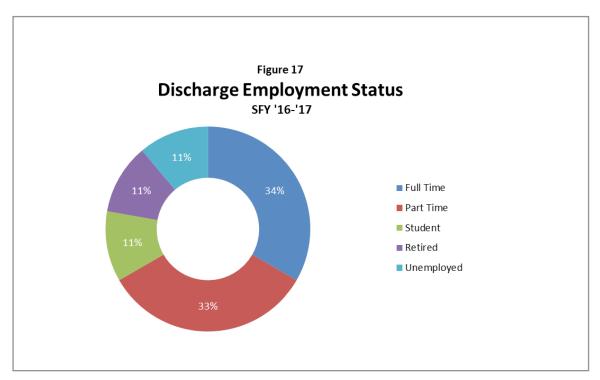


Figure 17, above, shows the discharge employment status of those clients who reported being employed part-time at the time of admission. Thirty-four percent of those part-time employed clients were able to gain full-time employment between the time of admission and discharge from treatment. Thirty-three percent were able to maintain their part-time employment status throughout treatment. Eleven percent, reported being a student at discharge, 11 percent were retired, and the remaining 11 percent were unemployed.

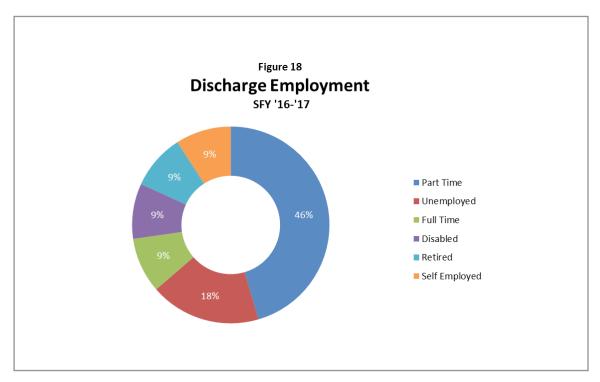
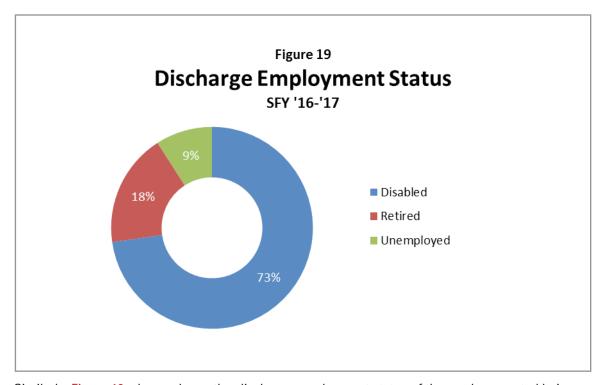


Figure 18, above, represents the discharge employment status of clients who reported being unemployed at that the time of admission. Of clients reporting, 46 percent were gainfully employed part-time and 9 percent were employed full-time or self-employed upon discharge. Eighteen percent remained unemployed, an additional 18 percent reported being retired or disabled.



Similarly, Figure 19, above, shows the discharge employment status of those who reported being disabled at the time of admission. Seventy-three percent of clients reported still being disabled, 18 percent reported retirement, 9 percent reported being unemployed.

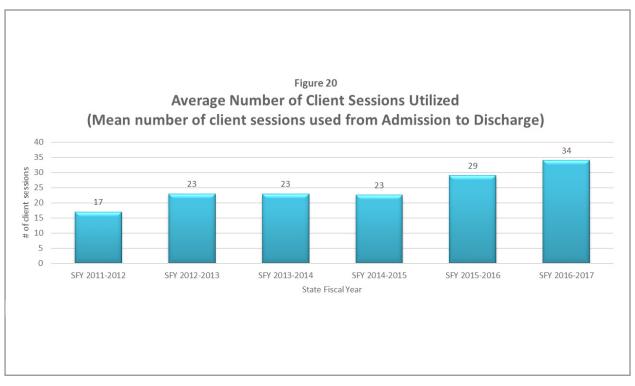


Figure 20, above, displays the average number of sessions utilized by a client. The average number of client sessions utilized increased from 29 to 34 sessions during the last fiscal year.

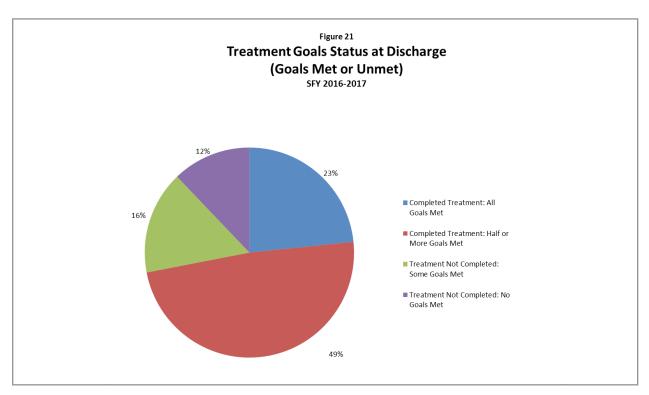


Figure 21, above, shows the *treatment goals status at discharge*, as well as if treatment was completed or not. Eighty-eight percent of clients are meeting at least some of their goals, 72 percent completed treatment. Of that 72 percent, 23 percent met all of their goals and 49 percent met at least half of their goals. Of the 28 percent that did not complete treatment, 16 percent met some of their goals.

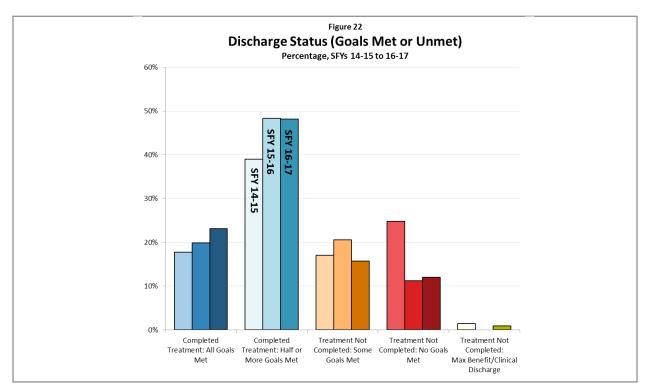


Figure 22, above, shows a three-year comparison of *treatment goals status at discharge* and, if treatment was completed or not. Over the three-year period an average of 83 percent of the clients have met at least some of their goals and, an average of 65 percent completed treatment. Of that 65 percent, an average of 20 percent met all of their goals and an average of 45 percent met at least half of their goals. Of the 35 percent that did not complete treatment, an average of 18 percent met some of their goals.

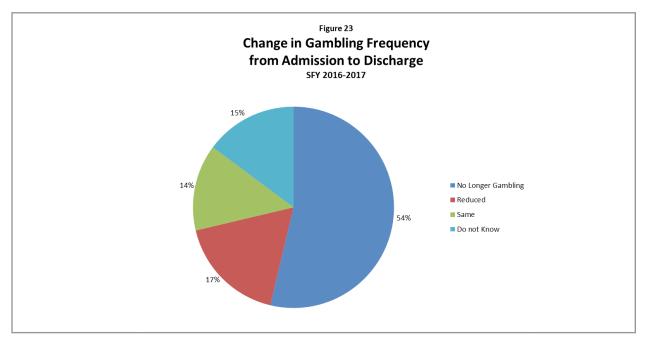


Figure 23, above, displays the *change in gambling frequency* resulting from gambling addiction treatment. For SFY 2016-17, 54 percent of those who were discharged reported that they are no longer gambling, 17 percent reported they have reduced their gambling frequency; and 14 percent have had no change in gambling frequency. Fifteen percent reported that they did not know if their frequency had changed or not as a result of treatment.

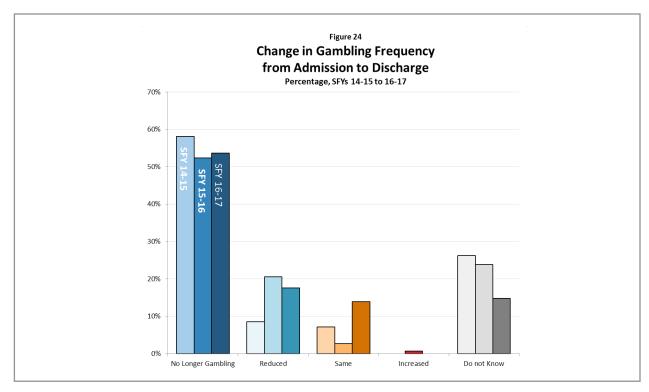


Figure 24, above, displays the *change in gambling frequency* resulting from gambling addiction treatment over a three-year period for comparison. For the three-year period, an average of 54 percent of those who were discharged reported that they are no longer gambling; an average of 16 percent reported that they have reduced their gambling frequency, and an average of 7 percent have had no change in gambling frequency. An average of 22 percent reported that they did not know if their frequency had changed or not as a result of treatment. In SFY 15-16 only 1 percent stated they had seen an increase in gambling.

# Prevention of Compulsive and Problem Gambling

As previously described, Act 2010-01 created the Compulsive and Problem Gambling Program, which is managed by the Department. Act 2010-01 requires public education, awareness and training regarding compulsive and problem gambling and the treatment and prevention of compulsive and problem gambling for which the Department is responsible.

With the increased availability of legalized gambling in Pennsylvania comes increased concern regarding the individual and social costs of problem gambling. The Department is addressing this concern by providing problem gambling prevention, education, and outreach efforts. Problem gambling prevention activities are intended to increase awareness of problem gambling within the general public, inform teachers, policy makers, and other professionals about the impact of problem gambling on the family unit, schools, and communities, and educate at-risk populations such as college students, youth, and older adults about risk and protective factors in an effort to prevent problem gambling.

The Department seeks Problem Gambling Funding Initiative Applications (FIAs) from SCAs to provide a wide array of problem gambling services. The opportunity

to apply for funds under this initiative is available to all SCAs regardless of whether SCAs were and were not funded under prior Problem Gambling Funding Initiative Applications.

Allowable activities that can be provided with these funds include:

- Problem gambling prevention activities that include evidence-based, evidence-informed, and state-approved supplemental problem gambling prevention programs,
- Problem gambling training, including travel to training as well as hosting training,
- Problem gambling prevention media dissemination (with the exception of radio and TV media created for DDAP's media campaign),
- Outreach and referral efforts in the community intended to identify individuals and families struggling with problem or compulsive gambling and refer those individuals to Department funded treatment providers,
- Expanded Student Assistance Program (SAP) services beyond those already provided and funded through other funding sources.

## **Problem Gambling Funding Initiative**

Forty SCAs submitted proposals (funding initiative applications) detailing their plans to provide a wide array of problem gambling prevention services for SFY 2015-16 and SFY 2016-17. The SCAs listed below were awarded a total of \$4,358,916 for SFY 2016-17.

Allegheny	\$339,118	Fayette	\$107,880
Armstrong/Indiana/Clarion	\$81,513	Forest/Warren	\$51,349
Beaver	\$50,226	Greene	\$3,403
Bedford	\$75,000	Lackawanna/Susquehanna	\$80,754
Berks	\$173,233	Lancaster	\$219,097
Blair	\$51,270	Lawrence	\$51,739
Bucks	\$268,408	Lebanon	\$61,013
Butler	\$152,108	Lehigh	\$118,516
Cambria	\$91,961	Luzerne/Wyoming	\$103,420
Cameron/Elk/McKean	\$20,846	Lycoming/Clinton	\$30,553
Carbon/Monroe/Pike	\$31,585	Mercer	\$29,352
Centre	\$61,134	Montgomery	\$17,257
Chester	\$61,897	Northampton	\$44,312
Clearfield/Jefferson	\$87,794	Philadelphia	\$835,078
Columbia/Montour/Snyder/Union	\$19,662	Schuylkill	\$19,147
Crawford	\$80,788	Venango	\$36,402
Cumberland/Perry	\$52,338	Washington	\$84,424
Dauphin	\$98,379	Wayne	\$19,248
Delaware	\$229,236	Westmoreland	\$60,307
Erie	\$309,169	York/Adams	\$50,000

Funds provided to the SCAs were used to assess community needs as well as to develop and/or implement a comprehensive system of problem gambling resources, prevention strategies, and programs. These problem gambling prevention services were provided either directly by the SCAs or their contracted provider(s).

Problem gambling prevention activities were provided in a variety of settings to high-risk populations and, when appropriate, communities affected by risk factors associated with problem gambling. The SCAs utilized the Pennsylvania's Performance Based Prevention System (PBPS) to plan, monitor, evaluate, and analyze all problem gambling prevention services in order to identify effective prevention programs and services and to direct prevention-related policy and funding.

Twenty-eight problem gambling prevention evidence-based programs, evidence-informed programs, and supplemental programs were provided throughout the fiscal year. A few innovative strategies and programs were developed specifically to meet the needs of youth. The following are examples of some of the programs and strategies that were implemented:

#### **Evidence-Based Programs:**

Stacked Deck: A Program To Prevent Problem Gambling is a school-based prevention program that provides information about the myths and realities of gambling and guidance for making good choices with the objective of modifying attitudes, beliefs, and, ultimately, gambling behavior. The program is designed for students in 9th through 12th grades. Lessons cover the history and realities of gambling, risk factors for and signs of problem gambling, fallacies about gambling, calculated risk and the assessment of situations involving risk, and barriers to good decision-making and problem solving. In SFY 2016-17, eleven SCAs (Allegheny, Armstrong/Indiana/Clarion, Butler, Carbon/Monroe/Pike, Clearfield/Jefferson, Crawford, Greene, Lackawanna/Susquehanna, Luzerne/Wyoming, Venango, and Wayne) provided this program, serving a total of 1,456 students.

# **Evidence-Informed Programs:**

*Kids Don't Gamble... Wanna Bet?* is an interdisciplinary curriculum for grades 3rd through 8th, developed by the North American Training Institute. It is designed to discourage underage gambling through improved critical thinking and problem-solving skills. It also includes access to an interactive online magazine designed by teens for teens. In SFY 2016-17, eight SCAs (Cameron/Elk/McKean, Carbon/Monroe/Pike, Erie, Lawrence, Lycoming/Clinton, Philadelphia, Venango and York/Adams) provided this service to a total of 7,432 students.

**We Know BETter** is an interactive problem gambling prevention curriculum targeting youth in 4th through 9th grades. This innovative program, developed by a prevention provider, helps youth learn about addiction as well as decision-making

skills, ways to increase their resiliency, improved coping strategies, and refusal skills. Interest in this program continues to increase since it has a strong focus on addiction and skill-building and is appropriate for school classrooms, after-school programs, and summer groups. Youth learn to identify possible consequences of gambling and draw parallels with substance dependency. The lessons enhance problem solving skills and feelings of self-confidence by improving coping strategies and refusal skills. An updated version of the program has been developed and a formal evaluation is being conducted through the funding initiative. In SFY 2016-17, nine SCAs (Armstrong/Indiana/Clarion, Centre, Crawford, Delaware, Fayette, Forest-Warren, Lancaster, Lebanon and Westmoreland) participated in the program training and were able to provide program services to a total of 2,041 students.

#### **Supplemental Programs**

Gambling Away The Golden Years is an educational kit which explores the possibility of gambling turning from entertainment to addiction, especially in the retirement years. The program targets the older adult population and has been provided in a variety of settings including community senior centers. In SFY 2016-17, twelve SCAs (Allegheny, Butler, Carbon/Monroe/Pike, Clearfield/Jefferson, Crawford, Greene, Luzerne/Wyoming, Mercer, Venango, Washington, Westmoreland, and York/Adams) provided this program, serving a total of 4,222 participants.

#### Student Assistance Program (SAP)

The Student Assistance Program (SAP) is designed to assist school personnel in identifying issues including gambling, use of alcohol, tobacco and other drugs, and mental health issues, all of which pose barriers to a student's health and success. The primary goal of SAP is to help students overcome these barriers. Elements of SAP include:

- The construction of a well-trained SAP core team that meets regularly to discuss students who have been referred to SAP;
- Incorporation of parents and caregivers into the SAP process through meetings with parents to review student needs and to discuss potential referrals and an intervention plan for the student;
- A system of school-based and community-based support services to which students can be referred for assistance in addressing their needs;
- The provision of educational and support group services tailored to the needs of SAP-referred students.

Through the Problem Gambling Funding Initiative, the SCAs had the option to support the expansion of SAP services beyond what they had previously provided through other funding sources.

During SFY 2016-17, a total of twenty-one SCAs (Allegheny, Beaver, Berks, Blair, Bucks, Butler, Cameron/Elk/McKean, Clearfield/Jefferson, Columbia/Montour/Snyder/Union, Cumberland/Perry, Delaware, Fayette, Forest-Warren, Lackawanna/Susquehanna, Lancaster, Lawrence, Lebanon, Philadelphia, Schuylkill, Washington and Westmoreland) utilized their problem gambling prevention funds to support expanded SAP services. These services included SAP consultations, core team meetings, training, parent/teacher meetings, and educational groups. <sup>1</sup>

Student Assistance Program (SAP) SFY 2016-17 Totals <sup>1</sup>			
Type of SAP Service	Number of Services Provided		
SAP Consultation	3,121		
SAP Core Team Meeting	710		
SAP Parent/Teacher Meeting	3,444		
SAP Group	64		
SAP Training	47		
Total	7,328		

<sup>&</sup>lt;sup>1</sup>Through the Problem Gambling Funding Initiative, the SCAs had the option to support the expansion of SAP services beyond what they had previously provided through other funding sources.

# **Problem Gambling Prevention Programs 2016-2017**

Evidence-Based Programs	# of SCAs Utilizing Program	# of Services
Big Brothers – Big Sisters of America	1	26
Life Skills Training	1	109
Stacked Deck: A Program To Prevent Problem Gambling	11	667
Evidence-Informed Programs	# of SCAs Utilizing Program	# of Services
All Bets Are Off	1	36
Clean Break	6	121
Don't Bet On It	1	6
Hooked City	3	392
The Amazing Chateau	3	237
Too Much To Lose (2M2L)	3	297
Kids Don't GambleWanna Bet?	8	6,380
We Know BETter	9	508
Youth Gambling and Prevention Awareness: Level I	1	406
Youth Gambling and Prevention Awareness: Level II	3	806
Supplemental Programs	# of SCAs Utilizing Program	# of Services
Cyber Gambling Awareness Program	3	66
Gambling Alternative Activities	9	424
Gambling Away the Golden Years	12	128
Gambling Away the Golden Years Gambling Community Prevention Partnerships	12 14	128 715
0 1		
Gambling Community Prevention Partnerships	14	715
Gambling Community Prevention Partnerships Gambling Education Services	14 20	715 468
Gambling Community Prevention Partnerships Gambling Education Services Gambling Environmental Prevention Strategies	14 20 5	715 468 99
Gambling Community Prevention Partnerships Gambling Education Services Gambling Environmental Prevention Strategies Gambling Information Dissemination	14 20 5 32	715 468 99 1,264
Gambling Community Prevention Partnerships Gambling Education Services Gambling Environmental Prevention Strategies Gambling Information Dissemination Gambling Intervention Strategies Gambling Materials Development Gambling Prevention Marketing and/or Development	14 20 5 32 2	715 468 99 1,264 44
Gambling Community Prevention Partnerships Gambling Education Services Gambling Environmental Prevention Strategies Gambling Information Dissemination Gambling Intervention Strategies Gambling Materials Development	14 20 5 32 2 13	715 468 99 1,264 44 145
Gambling Community Prevention Partnerships Gambling Education Services Gambling Environmental Prevention Strategies Gambling Information Dissemination Gambling Intervention Strategies Gambling Materials Development Gambling Prevention Marketing and/or Development	14 20 5 32 2 13	715 468 99 1,264 44 145 334
Gambling Community Prevention Partnerships Gambling Education Services Gambling Environmental Prevention Strategies Gambling Information Dissemination Gambling Intervention Strategies Gambling Materials Development Gambling Prevention Marketing and/or Development Gambling Professional and/or Community Development	14 20 5 32 2 13 11 14	715 468 99 1,264 44 145 334 50
Gambling Community Prevention Partnerships Gambling Education Services Gambling Environmental Prevention Strategies Gambling Information Dissemination Gambling Intervention Strategies Gambling Materials Development Gambling Prevention Marketing and/or Development Gambling Professional and/or Community Development In Search of Balance	14 20 5 32 2 13 11 14 14	715 468 99 1,264 44 145 334 50

## Supplemental Program Activity/Expenditure Report

Per Act 2010-01, \$3 million is transferred annually from the State Gaming Fund for drug and alcohol treatment. The information below displays the allocation of expenditures of those funds for this state fiscal year (7/1/16 to 6/30/17). <sup>2</sup>

	<u>Adult</u>	<u>Adolescent</u>	
Activity Name and Number	Clients	<u>Clients</u>	<b>Expenditures</b>
9100 Case Management (Level of Care Assessments only)	3,189	40	\$476,572
823A Medically Monitored Inpatient Detoxification	573	0	\$515,740
823B Medically Monitored Short-Term Residential Treatment	454	30	\$1,438,036
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	105	1	\$300,315
823C Medically Monitored Long-Term Residential Treatment	41	0	\$115,414
852B Halfway House	23	0	\$89,295
Grand Total			\$2,935,739

<sup>&</sup>lt;sup>2</sup>All Single County Authority expenditures information refers to the following program activities: 823A as Inpatient Non-Hospital Detoxification, 823B Short-term Non-Hospital Residential Treatment, 823B Short-term Non-Hospital Residential Treatment (Co-occurring), and 823C Long-term Non-Hospital Residential Treatment.

# State Gaming Fund: SCA-Specific Funding for Drug and Alcohol Treatment Services

The number of adult and adolescent clients receiving services as a result of the \$3 million transfer from the State Gaming Fund can be found in the Supplemental Program Activity/ Expenditure Report.

Reporting Period: 7/1/16 - 6/30/17

Single County Authority	Expenditures	Single County Authority	Expenditures	Single County Authority	Expenditures
Allegheny	\$351,144	Crawford	\$16,520	Lycoming/Clinton	\$31,960
Armstrong/Indiana/Clarion	\$45,927	Cumberland/Perry	\$47,076	Mercer	\$26,258
Beaver	\$43,565	Dauphin	\$52,497	Montgomery	\$161,467
Bedford	\$9,423	Delaware	\$96,103	Northampton	\$59,171
Berks	\$109,963	Erie	\$104,188	Northumberland *	\$16,119
Blair	\$30,159	Fayette	\$28,806	Philadelphia	\$479,060
Bradford/Sullivan	\$12,020	Forest/Warren	\$9,582	Potter	\$3,601
Bucks	\$107,351	Franklin/Fulton	\$24,815	Schuylkill	\$41,158
Butler	\$46,611	Greene	\$8,154	Somerset	\$17,993
Cambria	\$35,009	Huntingdon/Mifflin/Juniata	\$17,632	Tioga	\$7,531
Cameron/Elk/McKean	\$22,951	Lackawanna/Susquehanna	\$60,415	Venango	\$14,722
Carbon/Monroe/Pike	\$40,117	Lancaster	\$101,717	Washington	\$52,229
Centre	\$23,772	Lawrence	\$30,335	Wayne	\$9,567
Chester	\$130,480	Lebanon	\$25,020	Westmoreland	\$58,455
Clearfield/Jefferson	\$22,411	Lehigh	\$95,956	York/Adams	\$77,408
Columbia/Montour/Snyder/Union	\$24,472	Luzerne/Wyoming	\$104,850		
				TOTAL	\$2,935,739

<sup>\*</sup>Current State Fiscal Year SCA reporting not available at the date of publication, prior year reporting SFY 2015-2016 shown.

Reporting Period: 7/1/16-6/30/17

\$0

\$45,927

Reporting Period: 7/1/16-6/30/17

Reporting Period: 7/1/16-6/30/17

#### **SCA Name: Allegheny County**

**Activity Name and Number** 

852B Halfway House

**Grand Total Expenditures** 

		<u>Adolescent</u>	
Activity Name and Number	<b>Adult Clients</b>	<u>Clients</u>	<b>Expenditures</b>
9100 Case Management (Level of Care Assessments only)	0	0	\$0
823A Medically Monitored Inpatient Detoxification	103	0	\$75,000
823B Medically Monitored Short-Term Residential Treatment	60	25	\$207,944
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	14	0	\$68,200
Grand Total Expenditures			\$351,144

#### SCA Name: Armstrong/Indiana Drug and Alcohol Commission

Adolescent **Adult Clients** Clients Expenditures 9100 Case Management (Level of Care Assessments only) 89 8 \$13,100 9 0 \$12,688 823A Medically Monitored Inpatient Detoxification 823B Medically Monitored Short-Term Residential Treatment 7 0 \$20,139 823B Medically Monitored Short-Term Residential Treatment (Co-occurring) 0 0 \$0 0 \$0 823C Medically Monitored Long-Term Residential Treatment 0

0

#### SCA Name: Beaver County D & A Planning Council

Adult Clients Adolescent Expenditures **Activity Name and Number** 9100 Case Management (Level of Care Assessments only) Ω 0 \$0 823A Medically Monitored Inpatient Detoxification 0 \$15,527 823B Medically Monitored Short-Term Residential Treatment 7 0 \$12,854 8 0 \$15,184 823B Medically Monitored Short-Term Residential Treatment (Co-occurring) 823C Medically Monitored Long-Term Residential Treatment 0 0 \$0 852B Halfway House 0 \$0 **Grand Total Expenditures** \$43,565

#### SCA Name: Bedford (PersonalSolutions Inc.)

		<b>Adolescent</b>	
Activity Name and Number	Adult Clients	<u>Clients</u>	<b>Expenditures</b>
			44
9100 Case Management (Level of Care Assessments only)	23	0	\$9,423
823A Medically Monitored Inpatient Detoxification	0	0	\$0
823B Medically Monitored Short-Term Residential Treatment	0	0	\$0
823B Medically Monitored Short-Term Residential Treatment (Co-occurring	) 0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$9,423

#### SCA Name: Berks County - Council on Chemical Abuse

Reporting Period: 7/1/16-6/30/17

		Adolescent	
Activity Name and Number	Adult Clients	Clients	Expenditures
0100 Care Management (Laurel of Care Assessments and A	0	0	ćo
9100 Case Management (Level of Care Assessments only)	0	0	\$0
823A Medically Monitored Inpatient Detoxification	28	0	\$25,943
823B Medically Monitored Short-Term Residential Treatment	29	1	\$62,990
823B Medically Monitored Short-Term Residential Treatment (Co-occurring	) 2	1	\$21,030
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$109,963

#### SCA Name: Blair County Drug and Alcohol Program

Reporting Period: 7/1/16-6/30/17

		<b>Adolescent</b>	
Activity Name and Number	<b>Adult Clients</b>	<u>Clients</u>	<b>Expenditures</b>
9100 Case Management (Level of Care Assessments only)	0	0	\$0
823A Medically Monitored Inpatient Detoxification	17	0	\$13,915
823B Medically Monitored Short-Term Residential Treatment	6	1	\$16,244
823B Medically Monitored Short-Term Residential Treatment (Co-occurring	) 0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$30,159

#### SCA Name: Bradford/Sullivan Drug & Alcohol

Reporting Period: 7/1/16-6/30/17

onts Clients	
<u> Chents</u>	Expenditures
0	\$0
0	\$5,055
0	\$2,939
0	\$549
0	\$3,477
0	\$0
	\$12,020
	0 0 0 0

#### SCA Name: Bucks County Drug & Alcohol Commission, Inc. Reporting Period: 7/1/16-6/30/17

		<u>Adolescent</u>	
Activity Name and Number	Adult Clients	<u>Clients</u>	<b>Expenditures</b>
9100 Case Management (Level of Care Assessments only)	509	2	\$107,351
823A Medically Monitored Inpatient Detoxification	0	0	\$0
823B Medically Monitored Short-Term Residential Treatment	0	0	\$0
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$107,351

Reporting Period: 7/1/16-6/30/17

Reporting Period: 7/1/16-6/30/17

Reporting Period: 7/1/16-6/30/17

# **SCA Name: Butler County**

		<u>Adolescent</u>	
Activity Name and Number	<b>Adult Clients</b>	<u>Clients</u>	<b>Expenditures</b>
9100 Case Management (Level of Care Assessments only)	15	0	\$5,000
823A Medically Monitored Inpatient Detoxification	6	0	\$3,980
823B Medically Monitored Short-Term Residential Treatment	12	0	\$27,810
823B Medically Monitored Short-Term Residential Treatment (Co-occurring	;) O	0	\$0
823C Medically Monitored Long-Term Residential Treatment	2	0	\$9,821
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$46,611

## **SCA Name: Cambria County**

		<u>Adolescent</u>	
Activity Name and Number	<b>Adult Clients</b>	<u>Clients</u>	<b>Expenditures</b>
9100 Case Management (Level of Care Assessments only)	0	0	\$0
823A Medically Monitored Inpatient Detoxification	16	0	\$10,795
823B Medically Monitored Short-Term Residential Treatment	11	0	\$18,435
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	3	0	\$5,588
823C Medically Monitored Long-Term Residential Treatment	1	0	\$191
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$35,009

#### SCA Name: Cameron/Elk/ McKean

Activity Name and Number	Adult Clients	Adolescent Clients	<u>Expenditures</u>
9100 Case Management (Level of Care Assessments only)	89	0	\$16,831
823A Medically Monitored Inpatient Detoxification	0	0	\$0
823B Medically Monitored Short-Term Residential Treatment	2	0	\$6,120
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$22,951

## SCA Name: Carbon Monroe Pike D&A Commission

Activity Name and Number	Adult Clients	Adolescent Clients	<u>Expenditures</u>
9100 Case Management (Level of Care Assessments only)	0	0	\$0
823A Medically Monitored Inpatient Detoxification	13	0	\$12,686
823B Medically Monitored Short-Term Residential Treatment	9	0	\$24,681
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	1	0	\$2,750
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$40,117

## SCA Name: Centre County Drug and Alcohol

Reporting Period: 7/1/16-6/30/17

Activity Name and Number	Adult Clients	Adolescent Clients	<u>Expenditures</u>
9100 Case Management (Level of Care Assessments only)	0	0	\$0
823A Medically Monitored Inpatient Detoxification	6	0	\$4,577
823B Medically Monitored Short-Term Residential Treatment	3	0	\$4,612
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	4	0	\$14,583
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$23,772

## **SCA Name: Chester County**

Reporting Period: 7/1/16-6/30/17

		<u>Adolescent</u>	
Activity Name and Number	Adult	Clients	<b>Expenditures</b>
	<u>Clients</u>		
9100 Case Management (Level of Care Assessments only)	0	0	\$0
823A Medically Monitored Inpatient Detoxification	24	0	\$23,395
823B Medically Monitored Short-Term Residential Treatment	14	1	\$36,346
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	10	0	\$31,431
823C Medically Monitored Long-Term Residential Treatment	12	0	\$39,308
852B Halfway House	2	0	\$3,838
Grand Total Expenditures			\$130,480

## SCA Name: Clearfield - Jefferson Drug and Alcohol Commission Reporting Period: 7/1/16-6/30/17

		Adolescent	
Activity Name and Number	<u>Adult</u>	<u>Clients</u>	<b>Expenditures</b>
	Clients		
9100 Case Management (Level of Care Assessments only)	0	0	\$0
823A Medically Monitored Inpatient Detoxification	3	0	\$2,145
823B Medically Monitored Short-Term Residential Treatment	1	0	\$2,226
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	5	0	\$18,040
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$22,411

#### SCA Name: Columbia/Montour/Snyder/Union D&A Program

		Adolescent	
Activity Name and Number	Adult Clients	Clients	<u>Expenditures</u>
9100 Case Management (Level of Care Assessments only)	0	0	\$0
823A Medically Monitored Inpatient Detoxification	1	0	\$216
823B Medically Monitored Short-Term Residential Treatment	4	0	\$13,642
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	2	0	\$4,439
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	1	0	\$6,175
Grand Total Expenditures			\$24,472

Reporting Period: 7/1/16-6/30/17

Reporting Period: 7/1/16-6/30/17

Reporting Period: 7/1/16-6/30/17

		<u>Adolescent</u>	
Activity Name and Number	<u>Adult</u>	<u>Clients</u>	<b>Expenditures</b>
	<u>Clients</u>		
9100 Case Management (Level of Care Assessments only)	0	0	\$0
823A Medically Monitored Inpatient Detoxification	9	0	\$7,452
823B Medically Monitored Short-Term Residential Treatment	9	0	\$9,068
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$16,520

#### **SCA Name: Cumberland-Perry**

		<u>Adolescent</u>	
Activity Name and Number	<u>Adult</u>	<u>Clients</u>	<b>Expenditures</b>
	<u>Clients</u>		
9100 Case Management (Level of Care Assessments only)	0	0	\$0
823A Medically Monitored Inpatient Detoxification	43	0	\$47,076
823B Medically Monitored Short-Term Residential Treatment	0	0	\$0
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$47,076

#### **SCA Name: Dauphin County**

Activity Name and Number	Adult Clients	<u>Clients</u>	Expenditures
9100 Case Management (Level of Care Assessments only)	0	0	\$0
823A Medically Monitored Inpatient Detoxification	22	0	\$20,474
823B Medically Monitored Short-Term Residential Treatment	13	0	\$20,373
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	3	0	\$11,650
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$52,497

#### **SCA Name: Delaware County**

Activity Name and Number	Adult Clients	Adolescent Clients	<u>Expenditures</u>
9100 Case Management (Level of Care Assessments only)	286	0	\$96,103
823A Medically Monitored Inpatient Detoxification	0	0	\$0
823B Medically Monitored Short-Term Residential Treatment	0	0	\$0
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$96,103

## SCA Name: Erie County Office of Drug & Alcohol Abuse Reporting Period: 7/1/16-6/30/17

			<u>Adolescent</u>			
	Activity Name and Number	Adult Clients	Clients	<u>Expenditures</u>		
	9100 Case Management (Level of Care Assessments only)	22	0	\$1,885		
	823A Medically Monitored Inpatient Detoxification	2	0	\$2,544		
	823B Medically Monitored Short-Term Residential Treatment	22	2	\$89,957		
	823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	2	0	\$2,610		
	823C Medically Monitored Long-Term Residential Treatment	2	0	\$7,192		
	852B Halfway House	0	0	\$0		
	Grand Total Expenditures			\$104,188		

#### SCA Name: Fayette County Drug & Alcohol Commission, Inc. Reporting Period: 7/1/16-6/30/17

		Adolescent	
Activity Name and Number	Adult Clients	<u>Clients</u>	<u>Expenditures</u>
9100 Case Management (Level of Care Assessments only)	123	0	\$12,261
823A Medically Monitored Inpatient Detoxification	4	0	\$2,761
823B Medically Monitored Short-Term Residential Treatment	4	0	\$6,582
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	3	0	\$7,112
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	1	0	\$90
Grand Total Expenditures			\$28,806

#### **SCA Name: Forest/Warren Human Services**

Reporting Period: 7/1/16-6/30/17

		Adolescent	
Activity Name and Number	<b>Adult Clients</b>	Clients	<b>Expenditures</b>
9100 Case Management (Level of Care Assessments only)	0	0	\$0
823A Medically Monitored Inpatient Detoxification	0	0	\$0
823B Medically Monitored Short-Term Residential Treatment	3	0	\$9,582
823B Medically Monitored Short-Term Residential Treatment (Co-occurring	) 0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$9,582

#### **SCA Name: Franklin/Fulton County**

Activity Name and Number	Adult Clients	Adolescent Clients	Expenditures
9100 Case Management (Level of Care Assessments only)	805	30	\$23,255
823A Medically Monitored Inpatient Detoxification	0	0	\$0
823B Medically Monitored Short-Term Residential Treatment	1	0	\$1,560
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$24,815

# **SCA Name: Greene County**

		Adolescent	
Activity Name and Number	<b>Adult Clients</b>	<u>Clients</u>	<b>Expenditures</b>
9100 Case Management (Level of Care Assessments only)	2	0	\$246
823A Medically Monitored Inpatient Detoxification	2	0	\$971
823B Medically Monitored Short-Term Residential Treatment	6	0	\$6,937
823B Medically Monitored Short-Term Residential Treatment (Co-occurring	g) 0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$8,154

## SCA Name: Juniata Valley Tri-County Drug and Alcohol Abuse Commission Reporting Period: 7/1/16-6/30/17

		<u>Adolescent</u>	
Activity Name and Number	<b>Adult Clients</b>	<u>Clients</u>	<b>Expenditures</b>
9100 Case Management (Level of Care Assessments only)	2	0	\$246
823A Medically Monitored Inpatient Detoxification	2	0	\$971
823B Medically Monitored Short-Term Residential Treatment	6	0	\$6,937
823B Medically Monitored Short-Term Residential Treatment (Co-occurring	g) 0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$8,154

## SCA Name: Lackawana/Susquehanna County

Reporting Period: 7/1/16-6/30/17

		Adolescent	
Activity Name and Number	Adult Clients	Clients	<b>Expenditures</b>
9100 Case Management (Level of Care Assessments only)	0	0	\$0
823A Medically Monitored Inpatient Detoxification	7	0	\$9,334
823B Medically Monitored Short-Term Residential Treatment	11	0	\$48,274
823B Medically Monitored Short-Term Residential Treatment (Co-occurring	g) 1	0	\$2,807
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$60,415

## SCA Name: Lancaster County Drug & Alcohol Commission

		<u>Adolescent</u>	
Activity Name and Number	Adult Clients	Clients	<b>Expenditures</b>
9100 Case Management (Level of Care Assessments only)	12	0	\$1,134
823A Medically Monitored Inpatient Detoxification	21	0	\$18,194
823B Medically Monitored Short-Term Residential Treatment	23	0	\$57,958
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	6	0	\$24,431
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$101,717

## SCA Name: Lawrence County Drug and Alcohol Commission, Inc. Reporting Period: 7/1/16-6/30/17

		Adolescent	
Activity Name and Number	<b>Adult Clients</b>	Clients	<b>Expenditures</b>
9100 Case Management (Level of Care Assessments only)	0	0	\$0
823A Medically Monitored Inpatient Detoxification	0	0	\$0
823B Medically Monitored Short-Term Residential Treatment	0	0	\$0
823B Medically Monitored Short-Term Residential Treatment (Co-occurring	g) 11	0	\$30,335
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$30,335

#### **SCA Name: Lebanon**

Reporting Period: 7/1/16-6/30/17

		<u>Adolescent</u>	
Activity Name and Number	Adult Clients	<u>Clients</u>	<b>Expenditures</b>
9100 Case Management (Level of Care Assessments only)	0	0	\$0
823A Medically Monitored Inpatient Detoxification	42	0	\$25,020
823B Medically Monitored Short-Term Residential Treatment	0	0	\$0
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$25,020

## **SCA Name: Lehigh County**

Reporting Period: 7/1/16-6/30/17

Activity Name and Number	Adult Clients	Adolescent Clients	Expenditures
9100 Case Management (Level of Care Assessments only)	240	0	\$23,989
823A Medically Monitored Inpatient Detoxification	2	0	\$3,989
823B Medically Monitored Short-Term Residential Treatment	7	0	\$53,283
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	1	0	\$2,399
852B Halfway House	3	0	\$12,296
Grand Total Expenditures			\$95,956

# SCA Name: Luzerne/Wyoming

		<u>Adolescent</u>	
Activity Name and Number	<b>Adult Clients</b>	Clients	<b>Expenditures</b>
9100 Case Management (Level of Care Assessments only)	37	0	\$12,305
823A Medically Monitored Inpatient Detoxification	17	0	\$18,455
823B Medically Monitored Short-Term Residential Treatment	16	0	\$40,527
823B Medically Monitored Short-Term Residential Treatment (Co-occurring	) 8	0	\$27,620
823C Medically Monitored Long-Term Residential Treatment	2	0	\$5,943
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$104,850

# SCA Name: West Branch Drug and Alcohol Commission (Lycoming & Clinton Counties)

Reporting Period: 7/1/16-6/30/17

Activity Name and Number	Adult Clients	Adolescent Clients	Expenditures
9100 Case Management (Level of Care Assessments only)	9	0	\$4,312
823A Medically Monitored Inpatient Detoxification	7	0	\$7,992
823B Medically Monitored Short-Term Residential Treatment	4	0	\$19,656
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$31,960

#### SCA Name: Mercer County Behavioral Health Commission, Inc.

Reporting Period: 7/1/16-6/30/17

		<b>Adolescent</b>	
Activity Name and Number	Adult Clients	<u>Clients</u>	<b>Expenditures</b>
		_	
9100 Case Management (Level of Care Assessments only)	120	0	\$11,003
823A Medically Monitored Inpatient Detoxification	3	0	\$2,856
823B Medically Monitored Short-Term Residential Treatment	9	0	\$12,399
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$26,258

## **SCA Name: Montgomery County**

Reporting Period: 7/1/16-6/30/17

	<u>Adolescent</u>		
Activity Name and Number	Adult Clients	<u>Clients</u>	<b>Expenditures</b>
9100 Case Management (Level of Care Assessments only)	48	0	¢1E 020
		-	\$15,920
823A Medically Monitored Inpatient Detoxification	19	0	\$22,875
823B Medically Monitored Short-Term Residential Treatment	24	0	\$61,282
823B Medically Monitored Short-Term Residential Treatment (Co-occurring	g) 13	0	\$49,075
823C Medically Monitored Long-Term Residential Treatment	4	0	\$12,315
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$161,467

## **SCA Name: Northampton County**

Activity Name and Number	Adult Clients	Adolescent Clients	Expenditures
9100 Case Management (Level of Care Assessments only)	445	0	\$59,171
823A Medically Monitored Inpatient Detoxification	0	0	\$0
823B Medically Monitored Short-Term Residential Treatment	0	0	\$0
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$59,171

Activity Name and Number	Adult Clients	Adolescent Clients	Expenditures
9100 Case Management (Level of Care Assessments only)	1	0	\$96
823A Medically Monitored Inpatient Detoxification	7	0	\$4,656
823B Medically Monitored Short-Term Residential Treatment	10	0	\$11,367
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$16,119

<sup>\*</sup>Current State Fiscal Year SCA reporting not available at the date of publication, prior year reporting SFY 2015-2016 shown.

#### SCA Name: Philadelphia

Reporting Period: 7/1/16-6/30/17

Activity Name and Number	Adult Clients	Adolescent Clients	Expenditures
9100 Case Management (Level of Care Assessments only)	1	0	\$75
823A Medically Monitored Inpatient Detoxification	38	0	\$49,410
823B Medically Monitored Short-Term Residential Treatment	81	0	\$429,575
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$479,060

#### **SCA Name: Potter**

Reporting Period: 7/1/16-6/30/17

Activity Name and Number	Adult Clients	Adolescent Clients	Expenditures
9100 Case Management (Level of Care Assessments only)	184	0	\$3,601
823A Medically Monitored Inpatient Detoxification	0	0	\$0
823B Medically Monitored Short-Term Residential Treatment	0	0	\$0
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$3,601

## SCA Name: Schuylkill County Drug & Alcohol

		<u>Adolescent</u>	
Activity Name and Number	<b>Adult Clients</b>	Clients	<b>Expenditures</b>
9100 Case Management (Level of Care Assessments only)	34	0	\$5,770
823A Medically Monitored Inpatient Detoxification	6	0	\$4,895
823B Medically Monitored Short-Term Residential Treatment	3	0	\$13,306
823B Medically Monitored Short-Term Residential Treatment (Co-occurring	g) 6	0	\$9,726
823C Medically Monitored Long-Term Residential Treatment	6	0	\$7,461
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$41,158

		<u>Adolescent</u>	
Activity Name and Number	<b>Adult Clients</b>	<u>Clients</u>	<b>Expenditures</b>
9100 Case Management (Level of Care Assessments only)	0	0	\$0
823A Medically Monitored Inpatient Detoxification	2	0	\$1,290
823B Medically Monitored Short-Term Residential Treatment	11	0	\$15,687
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	3	0	\$1,016
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$17,993

SCA Name: Tioga Reporting Period: 7/1/16-6/30/17

		Adolescent	
Activity Name and Number	<b>Adult Clients</b>	<u>Clients</u>	<b>Expenditures</b>
9100 Case Management (Level of Care Assessments only)	0	0	\$0
823A Medically Monitored Inpatient Detoxification	0	0	\$0
823B Medically Monitored Short-Term Residential Treatment	0	0	\$0
823B Medically Monitored Short-Term Residential Treatment (Co-occurring)	0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	2	0	\$7,531
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$7,531

## SCA Name: Venango County Substance Abuse Program

Reporting Period: 7/1/16-6/30/17

		<u>Adolescent</u>	
Activity Name and Number	Adult Clients	<u>Clients</u>	<b>Expenditures</b>
	•	•	40
9100 Case Management (Level of Care Assessments only)	0	0	\$0
823A Medically Monitored Inpatient Detoxification	2	0	\$1,354
823B Medically Monitored Short-Term Residential Treatment	6	0	\$12,098
823B Medically Monitored Short-Term Residential Treatment (Co-occurring	) 1	0	\$1,270
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$14,722

#### **SCA Name: Washington**

		<b>Adolescent</b>	
Activity Name and Number	Adult Clients	<u>Clients</u>	<b>Expenditures</b>
		_	
9100 Case Management (Level of Care Assessments only)	26	0	\$52,229
823A Medically Monitored Inpatient Detoxification	0	0	\$0
823B Medically Monitored Short-Term Residential Treatment	0	0	\$0
823B Medically Monitored Short-Term Residential Treatment (Co-occurring	;) 0	0	\$0
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$52,229

## SCA Name: Wayne County Drug & Alcohol Commission

Reporting Period: 7/1/16-6/30/17

	<u>Adolescent</u>		
Activity Name and Number	<b>Adult Clients</b>	<u>Clients</u>	<b>Expenditures</b>
9100 Case Management (Level of Care Assessments only)	0	0	\$0
823A Medically Monitored Inpatient Detoxification	5	0	\$4,931
823B Medically Monitored Short-Term Residential Treatment	0	0	\$0
823B Medically Monitored Short-Term Residential Treatment (Co-occurring	2	0	\$4,636
823C Medically Monitored Long-Term Residential Treatment	0	0	\$0
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$9,567

# SCA Name: Westmoreland Drug & Alcohol Commission, Inc.

Reporting Period: 7/1/16-6/30/17

	<u>Adolescent</u>		
Activity Name and Number	<b>Adult Clients</b>	<u>Clients</u>	<b>Expenditures</b>
9100 Case Management (Level of Care Assessments only)	0	0	\$0
823A Medically Monitored Inpatient Detoxification	18	0	\$13,890
823B Medically Monitored Short-Term Residential Treatment	7	0	\$10,917
823B Medically Monitored Short-Term Residential Treatment (Co-occurring	) 7	0	\$21,344
823C Medically Monitored Long-Term Residential Treatment	2	0	\$12,305
852B Halfway House	0	0	\$0
Grand Total Expenditures			\$58,455

#### SCA Name: York/Adams

	<u>Adolescent</u>		
Activity Name and Number	Adult Clients	Clients	<b>Expenditures</b>
			*
9100 Case Management (Level of Care Assessments only)	69	0	\$1,512
823A Medically Monitored Inpatient Detoxification	42	0	\$37,591
823B Medically Monitored Short-Term Residential Treatment	3	0	\$8,799
823B Medically Monitored Short-Term Residential Treatment (Co-occurring	g) 12	0	\$22,250
823C Medically Monitored Long-Term Residential Treatment	4	0	\$4,722
852B Halfway House	4	0	\$2,534
Grand Total Expenditures			\$77,408

#### **CONCLUSION**

Problem gambling is, and will continue to be, a compelling public health concern affecting Pennsylvanians of all ages, genders, races, and ethnic backgrounds in communities across the Commonwealth. The societal and economic costs can be significant, but they can be countered by targeted treatment and prevention aimed at minimizing harm to both the individual and society as a whole. The Department has worked to develop and implement a comprehensive, coordinated, and effective Compulsive and Problem Gambling Program. In continuing to serve the Commonwealth, the Department will continue to work with the Pennsylvania Gaming Control Board, the Council on Compulsive Gambling of Pennsylvania, the National Council on Problem Gambling, relevant stakeholders, and others who are committed to helping those with a gambling problem.