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Assessing State Regulations of Outpatient Substance-Abuse Treatment Programs in the United States along a Quality Continuum

Research Highlight

POLICY PERSPECTIVE

IT IS CRITICAL FOR STATE

POLICY-MAKERS TO

UNDERSTAND CURRENT LAWS

AND REGULATIONS GOVERNING

SUBSTANCE-USE DISORDER

TREATMENT ACROSS THE 50

STATES. THIS ALLOWS POLICYMAKERS TO IDENTIFY POLICIES

THAT BETTER SUPPORT THE

USE OF EVIDENCE-BASED

TREATMENT IN ADDICTION CARE.

Background

espite a recent focus on improving the quality of addiction treatment, there currently are no national policies for substance-abuse treatment services. Instead, treatment programs are generally governed by individual state policies.

In their report, Assessing State Regulations of Outpatient Substance Abuse Treatment Programs in the U.S. along a Quality Continuum, I Jamie Chriqui, Ph.D., and colleagues examine the quality and performance measurement indicators that the 50 states and the District of Columbia have incorporated into their laws. Quality measures include "structural measures," which relate to program capacity (authorization, staff-client ratio) and "process measures," which relate to program accountability (quality assurance and inspections). Performance measures include recognition of treatment need, treatment provisions and maintenance of treatment effects. The authors also relate states' positions on a quality/performance-measures continuum that they developed based on work by the Institute of Medicine, Avedis Donabedian, M.D., M.P.H., and the Washington Circle Group. One end of the continuum favors the treatment program, while the other favors client outcomes.

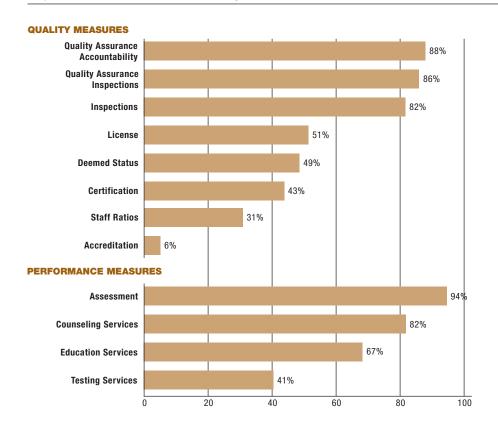
Key Findings

- Although structural and process quality measures are included in state policies, there is considerable variation in policies governing outpatient substance-abuse treatment programs. With respect to structural measures of quality, about half of all states (51%) use licensing while the other half (49%) favor certification or accreditation. The majority of states require authorization (94%) and inspections (82%), but far fewer specify staff-client ratios (31%). In terms of process measures, quality assurance/accountability is required by 88 percent of states, while quality assurance-related inspections are required by 86 percent of states.
- State policies vary in terms of treatment requirements. With respect to standard outpatient treatment programs, 94 percent of states require initial assessment but fewer (47%) address patient placement or diagnostic criteria. Counseling is the treatment provision most often addressed by states (82%) followed by educational services (67%) and testing/screening (41%). In addition, 57 percent of states require aftercare.

¹ Chriqui JF, Eidson SK, McBride DC, Scott W, Capoccia V and Chaloupka FJ. Assessing State Regulation of Outpatient Substance Abuse Treatment Programs in the U.S. along a Quality Continuum, Silver Springs, MD: Center for Health Policy and Legislative Analysis, 2006. http://www.impacteen.org/generalarea_PDFs/ITresearch_34chriqui2006.pdf

¹ RWUF Research Highlight—Assessing State Regulations of Outpatient Substance-Abuse Treatment Programs in the United States along a Quality Continuum

Percentage of States that Address Quality and Performance Measures in their Laws Governing Outpatient Substance-Abuse Treatment Programs



■ Because quality measures are included more often than performance measures, state policies favored treatment quality measures over client outcome measures. On average, states incorporate 63 percent of quality measures in their laws, but only 46 percent of performance measures. State policies are only marginally more likely to include structural quality measures over process measures. With respect to performance measures, state policies are significantly more likely to include components related to providing treatment (such as counseling, testing and linkage to other services) rather than components related to recognition of treatment need (such as assessment or patient placement) or those related to treatment maintenance (such as relapse prevention or continuing care/aftercare services).

Resources

First Comprehensive Report on Illicit Drug Laws in the 50 States, ImpacTeen, MayaTech Corporation, February 2002. http://www.mayatech.com/Services/policy.htm

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