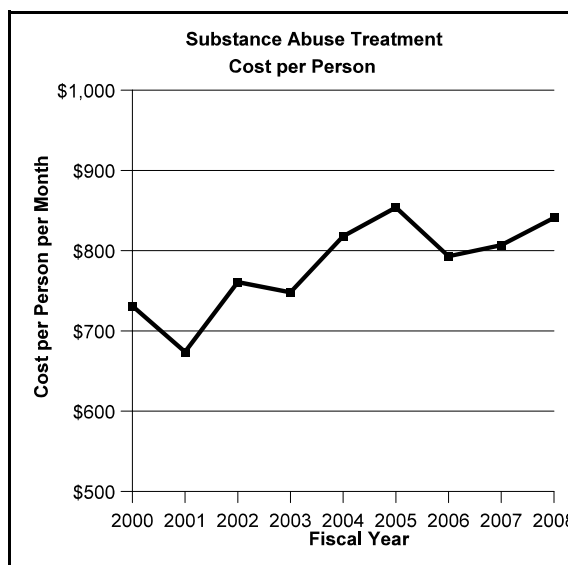
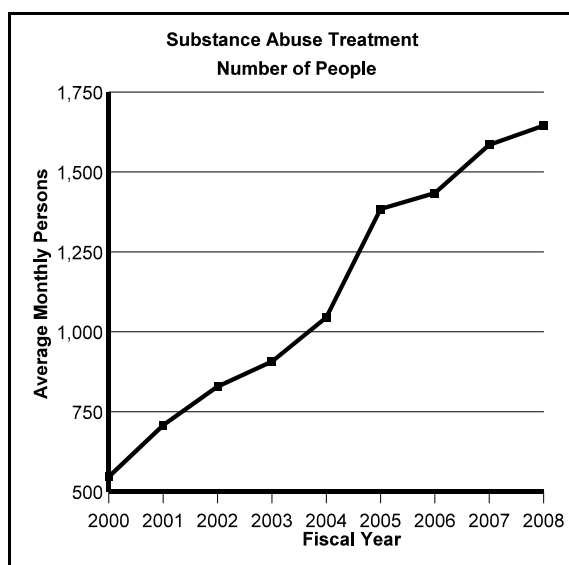


Consensus Substance Abuse Treatment



<u>Fiscal Year</u>	<u>Average Monthly Persons</u>	<u>Percent Change from Prior Year</u>	<u>Average Cost per Person per Month</u>	<u>Percent Change from Prior Year</u>	<u>Expenditures</u>	<u>Percent Change from Prior Year</u>
2000	547	52.4%	\$731	9.0%	\$4,799,086	65.9%
2001	708	29.4%	\$674	-7.9%	\$5,722,628	19.2%
2002	829	17.1%	\$761	12.9%	\$7,568,174	32.3%
2003	908	9.5%	\$748	-1.7%	\$8,147,315	7.7%
2004	1,046	15.2%	\$818	9.4%	\$10,265,226	26.0%
2005 ¹	1,384	32.3%	\$854	4.4%	\$14,178,621	38.1%
2006 ²	1,434	3.6%	\$793	-7.1%	\$13,642,474	-3.8%
2007 GBR ²	1,585	10.5%	\$807	1.7%	\$15,342,410	12.5%
2008 GBR	1,645	3.8%	\$841	4.3%	\$16,600,000	8.2%

Notes:

¹ FY 2005 has 53 pay weeks, one more than most years.

² June 2006 expenditures were paid by Kansas Health Policy Authority (KHPA) and transferred to SRS in FY 2007. These expenditures are being shown in FY 2006. During the transition of moving Regular Medical from SRS to KHPA, all Regular Medical claims are being charged to KHPA and later transferred to SRS until the computer systems can be updated.

Explanation

Substance Abuse Treatment provides funding for alcohol and drug abuse treatment for Medicaid eligible persons, primarily adolescents and women. The cost for the program has grown significantly since FY 2000. Most of the increased cost is due to serving more persons. A small portion of the growth is related to the increase in the number of providers. For FY 2007 and FY 2008, the number of persons served is expected to continue to grow.

These services will be paid through a managed care arrangement starting in FY 2008.