PENNSYLVANIA

FEDERAL FISCAL YEAR 1993 SUBSTANCE ABUSE PREVENTION AND TREATMENT

BLOCK GRANT APPLICATION

Robert P. Casey
Governor

Allan S. Noonan, M.D., M.P.H.
Secretary of Health

January, 1993

Form 01 *OMB No.*

APPLICATION FOR FY 1993 BLOCK GRANT FOR PREVENTION AND TREATMENT OF SUBSTANCE ABUSE

State Name: Pennsylvania

I. STATE AGENCY TO BE THE GRANTEE FOR THE BLOCK GRANT

Agency Name: The Pennsylvania Department of Health

Organization Unit: Office of Drug and Alcohol Programs

Street Address: 7TH and Forster Streets

City: Harrisburg | Zip Code: 17120

II. CONTACT PERSON FOR THE GRANTEE OF THE BLOCK GRANT

Name: Jeannine D. Peterson

Agency Name: Office of Drug and Alcohol Programs

Street Address: 7TH and Forster Streets

City: Harrisburg | Zip Code: 17120

Telephone: (717) 787-9857 | FAX: (717) 787-6285

III. STATE EXPENDITURE PERIOD

From: July 1, 1991 | To: June 30, 1992

IV. DATE SUBMITTED

Date: January 6, 1992 | ☒ Original ☐ Revision

V. CONTACT PERSON RESPONSIBLE FOR APPLICATION SUBMISSION

Name: John C. Hair | Telephone: (717) 783-8665

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FY 1993 SUBSTANCE ABUSE BLOCK GRANT APPLICATION FUNDING AGREEMENTS/CERTIFICATIONS AS REQUIRED BY THE PUBLIC HEALTH SERVICE ACT

As part of the annual application for Block Grant funds, it is required under Title XIX, Part B, Subpart II of the Public Health Services Act, as amended, that the chief executive officer (or an authorized designee) of the applicant organization certify that the State will comply with the following specific citations as summarized and set forth below, and with any regulations or guidelines issued in conjunction with this Subpart except as exempt by statute.

We will accept a signature on this form as certification of compliance. If signed by a designee, a copy of the designation must be attached.

I. FORMULA GRANTS TO STATES, SECTION 1921 — Page 131

Grant funds will be expended "only for the purpose of planning, carrying out, and evaluating activities to prevent and treat substance abuse and for related activities" as authorized.

II. CERTAIN ALLOCATIONS, SECTION 1922 — Page 131

- Allocations Regarding Alcohol and Other Drugs, Section 1922(a)
- Allocations Regarding Primary Prevention Programs, Section 1922(b)
- Allocations Regarding Women, Section 1922(c)

III. INTRAVENOUS DRUG ABUSE, SECTION 1923 — Page 146

- Capacity of Treatment Programs, Section 1923(a)
- Outreach Regarding Intravenous Substance Abuse, Section 1923(b)

IV. REQUIREMENTS REGARDING TUBERCULOSIS AND HUMAN IMMUNODEFICIENCY VIRUS, SECTION 1924 — Page 148

V. GROUP HOMES FOR RECOVERING SUBSTANCE ABUSERS, SECTION 1925 — Page 153

Territories as described in Section 1925(c) are exempt.

The State "has established, and is providing for the ongoing operation of a revolving fund" in accordance with Section 1925 of the Public Health Services Act, as amended.

VI. STATE LAW REGARDING SALE OF TOBACCO PRODUCTS TO INDIVIDUALS UNDER AGE OF 18, SECTION 1926 — Page 132

VII. TREATMENT SERVICES FOR PREGNANT WOMEN, SECTION 1927 — Page 150

The State "will ensure that each pregnant woman in the State who seeks or is referred for and would benefit from such services is given preference in admission to treatment facilities receiving funds pursuant to the grant."

VIII.	ADDITIONAL AGREEMENTS, SECTION 1928	Page 142
	• Improvement of Process for Appropriate Referrals for Treatment, Section 1928(a) • Continuing Education, Section 1928(b) • Coordination of Various Activities and Services, Section 1928(c) • Waiver of Requirement, Section 1928(d)	
IX.	MAINTENANCE OF EFFORT REGARDING STATE EXPENDITURES, SECTION 1930	Page 131
	The State "will maintain aggregate State expenditures for authorized activities at a level that is not less than the average level of such expenditures maintained by the State for the 2-year period preceding the fiscal year for which the State is applying for the grant."	
X.	RESTRICTIONS ON EXPENDITURE OF GRANT, SECTION 1931	Page 131
XI.	APPLICATION FOR GRANT; APPROVAL OF STATE PLAN, SECTION 1932	Page 131
XII.	OPPORTUNITY FOR PUBLIC COMMENT ON STATE PLANS, SECTION 1941	
	The plan required under Section 1932 will be made "public in such a manner as to facilitate comment from any person (including any Federal or other public agency) during the development of the plan (including any revisions) and after the submission of the plan to the Secretary.	
XIII.	REQUIREMENT OF REPORTS AND AUDITS BY STATES, SECTION 1942	Page 161
XIV.	ADDITIONAL REQUIREMENTS, SECTION 1943	Page 132
XV.	PROHIBITIONS REGARDING RECEIPT OF FUNDS, SECTION 1946	Page 133
XVI.	NONDISCRIMINATION, SECTION 1947	Page 133
	I hereby certify that the State or Territory will comply with Title XIX, Part B, Subpart II of the Public Health Services Act, as amended, as summarized above, except for those Sections in the Act that do not apply or for which a waiver has been granted or will be granted by the Secretary for the period covered by this agreement.	

State: Pennsylvania

Name of Chief Executive Officer or Designee[1]:

Allan S. Noonan, M.D., M.P.H.

Signature of CEO or Designee:

Allan S. Noonan

Title: Secretary of Health Date Signed: 1/14/93

[1]If signed by a designee, a copy of the designation must be attached

U.S. Department of Health and Human Services

Certification Regarding Drug-Free Workplace Requirements

Grantees Other Than Individuals

By signing and/or submitting this application or grant agreement, the grantee is providing the certification set out below.

This certification is required by regulations implementing the Drug-Free Workplace Act of 1988, 45 CFR Part 76, Subpart F. The regulations, published in the May 25, 1990 Federal Register, require certification by grantees that they will maintain a drug-free workplace. The certification set out below is a material representation of fact upon which reliance will be placed when the Department of Health and Human Services (HHS) determines to award the grant. If it is later determined that the grantee knowingly rendered a false certification, or otherwise violates the requirements of the Drug-Free Workplace Act, HHS, in addition to any other remedies available to the Federal Government, may taken action authorized under the Drug-Free Workplace Act. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or governmentwide suspension or debarment.

Workplaces under grants, for grantees other than individuals, need not be identified on the certification. If known, they may be identified in the grant application. If the grantee does not identify the workplaces at the time of application, or upon award, if there is no application, the grantee must keep the identity of the workplace(s) on file in its office and make the information available for Federal inspection. Failure to identify all known workplaces constitutes a violation of the grantee's drug-free workplace requirements.

Workplace identifications must include the actual address of buildings (or parts of buildings) or other sites where work under the grant takes place. Categorical descriptions may be used (e.g., all vehicles of a mass transit authority or State highway department while in operation, State employees in each local unemployment office, performers in concert halls or radio studios.)

If the workplace identified to HHS changes during the performance of the grant, the grantee shall inform the agency of the change(s), if it previously identified the workplaces in question (see above).

Definitions of terms in the Nonprocurement Suspension and Debarment common rule and Drug-Free Workplace common rule apply to this certification. Grantees' attention is called, in particular, to the following definitions from these rules:

"Controlled substance" means a controlled substance in Schedules I through V of the Controlled Substances Act (21 USC 812) and as further defined by regulation (21 CFR 1308.11 through 1308.15).

"Conviction" means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the Federal or State criminal drug statutes;

"Criminal drug statute" means a Federal or non-Federal criminal statute involving the manufacture, distribution, dispensing, use, or possession of any controlled substance;

"Employee" means the employee of a grantee directly engaged in the performance of work under a grant, including: (i) All "direct charge" employees; (ii) all "indirect charge" employees unless their impact or involvement is insignificant to the performance of the grant; and, (iii) temporary personnel and consultants who are directly engaged in the performance of work under the grant and who are on the grantee's payroll. This definition does not include workers not on the payroll of the grantee (e.g., volunteers, even if used to meet a matching requirement; consultants or independent contractors not on the grantee's payroll; or employees of subrecipients or subcontractors in covered workplaces).

The grantee certifies that it will or will continue to provide a drug-free workplace by:

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

(b) Establishing an ongoing drug-free awareness program to inform employees about:

(1) The dangers of drug abuse in the workplace; (2) The grantee's policy of maintaining a drug-free workplace; (3) Any available drug counseling, rehabilitation, and employee assistance programs; and, (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

(c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);

(d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will:

(1) Abide by the terms of the statement; and, (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

(e) Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

(Continued on reverse side of this sheet)

HHS–Certification Regarding Drug-Free Workplace Requirements–continued from reverse page

(f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted:

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or, (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

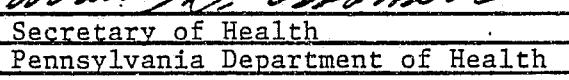
(g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e) and (f).

The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant (use attachments, if needed):

Place of Performance (Street address, City, County, State, ZIP Code)_____

Check ___ if there are workplaces on file that are not identified here.

Sections 76.630(c) and (d)(2) and 76.635(a)(1) and (b) provide that a Federal agency may designate a central receipt point for STATE-WIDE AND STATE AGENCY-WIDE certifications, and for notification of criminal drug convictions. For the Department of Health and Human Services, the central receipt point is: Division of Grants Management and Oversight, Office of Management and Acquisition, Department of Health and Human Services, Room 517-D, 200 Independence Avenue, S.W., Washington, D.C. 20201.

Signature  **Date** 1/14/93

Title Secretary of Health

Organization Pennsylvania Department of Health

DGMO Form#2 Revised May 1990

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

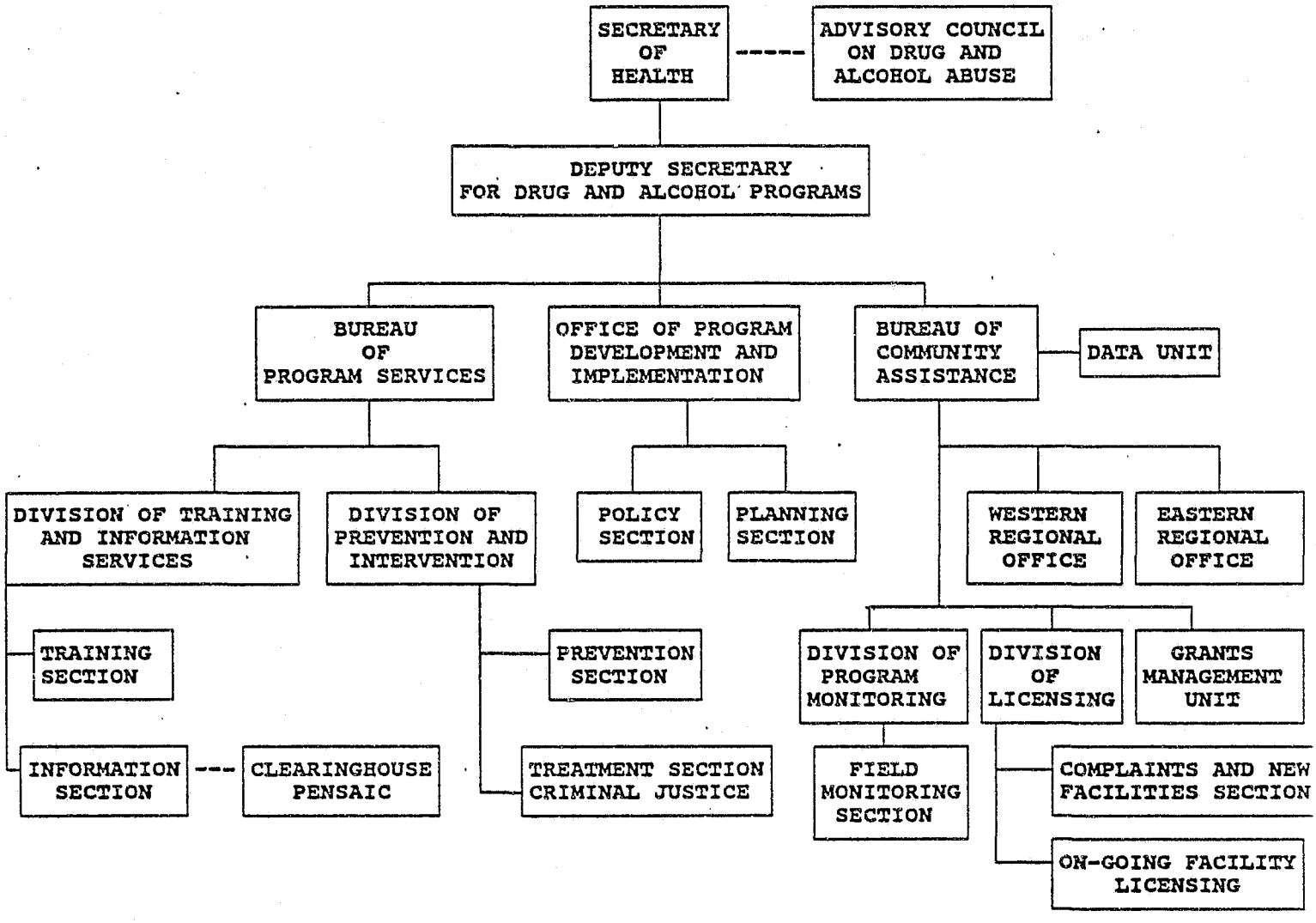
This certification is a material representation of fact upon which reliance was placed when this transaction was made or enter into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less that $10,000 and not more than $100,000 for each such failure.

By _____ Date 1/14/93
(Signature of Official Authorized to Sign Application)

For Pennsylvania Department of Health
(Name of Grantee)

Substance Abuse Prevention and Treatment Block Grant
(Title of Grant Program)

OFFICE OF DRUG AND ALCOHOL PROGRAMS



COMMONWEALTH OF PENNSYLVANIA
OFFICE OF THE GOVERNOR
HARRISBURG

THE GOVERNOR

June 18, 1992

Allan S. Noonan, M.D., M.P.H.
Secretary of Health
Commonwealth of Pennsylvania
Room 802, Health and Welfare Building
Harrisburg, Pennsylvania 17108

Dear Dr. Noonan:

With your appointment as Secretary of Health, I hereby authorize you, on behalf of the Commonwealth, to execute the following documents pertaining to the Health Department's administration of alcohol and other drug abuse treatment and prevention programs:

(a) the federal Alcohol, Drug Abuse and Mental Health Block Grant application and related materials;

(b) the annual report to the federal Alcohol, Drug Abuse and Mental Health Administration;

(c) applications to secure surplus federal properties or federal grant awards for alcohol and/or drug abuse treatment, prevention or intervention.

This authorization should be interpreted to included application and reporting forms and other documents pertaining to the foregoing.

Sincerely,

Robert P. Casey
Governor

SECTION II

ACTUAL USE OF FFY 1990 AND OBLIGATIONS OF FFY 1991

SUBSTANCE ABUSE PREVENTION AND TREATMENT (SAPT) BLOCK GRANT FUNDS

1. How allotments were used

A State could transfer up to 10 percent of its ADMS allotment for substance abuse activities to mental health activities or vice versa. This was authorized by Section 1916(c)(6)(B) of the Public Health Service Act in effect at the time. This part of the application documents any such transfers made with FFY 1990 award funds. Complete the following checklist:

Did the State make any transfers between FFY 1990 allotments?

☐ Yes

☒ No

If yes, indicate the type of transfer and the amount, and briefly explain why the transfer was made.

☐ Substance abuse to mental health $_____

☐ Mental health to substance abuse $_____

2. How substance abuse funds were used.

A. REPORT OF FEDERAL FISCAL YEAR 1990 TREATMENT ACTIVITIES

Pennsylvania continued to treat the state and federal block grant dollars as an integrated resource. In state fiscal year (SFY) 1984-85, a single planning/allocation, program development and fiscal/program reporting system, incorporating all sources of public and private funds, was implemented.

Highlights of Pennsylvania's use of the federal fiscal year 1990 block grant funds are broken into several broad policy areas:

ACCOUNTABILITY

The Office of Drug and Alcohol Programs (ODAP) provides counties with funding to purchase alcohol and other drug abuse (AODA) services. Single County Authorities (SCAs) prepare prevention, intervention and treatment plans tailored to the needs within their respective geographic locale. The Department approves these plans to determine SCA compliance with statewide guidelines and planning initiatives.

The Department used federal fiscal year (FFY) 1990 block grant funds to continue to improve its management, planning and monitoring methods, thus insuring a high return on the federal and state service dollar invested for drug and alcohol services. The use of a performance-based system using a combination of need and productivity indicators was considered in developing an overall strategy to move toward an SCA system that was responsive to local need.

The Department continued to synchronize all contracts, former direct institute grants and state funded activities to the state fiscal year. Fiscal guidelines were issued to SCAs for proposed use of block grant dollars. The SCAs were required to submit three-year plans and federal 1990 funds were expended consistent with the approved plans and off-year plan updates. Special instructions were also issued to SCAs for compliance with the federal ten percent women's service requirements.

COMPREHENSIVE TREATMENT SYSTEM

Treatment services are funded in hospitals, prisons, shelters, residential units, partial hospitalization and outpatient programs. Treatment often consists of short-term detoxification followed by a longer term rehabilitation. Most inpatient services are rendered in a non-hospital setting. Outpatient services (including methadone maintenance) may follow discharge from a residential program; however, many persons are initially treated in the outpatient modality. Typically admissions to treatment were approximately 48 percent drug related and 52 percent alcohol related. Males represent 73 percent of all treatment admissions, and women accounted for the remaining 27 percent. After alcohol, the second most prominent drug abuse problem was cocaine use. Multiple drug use was also a problem.

The AODA service system is designed to be responsive to needs of all residents in Pennsylvania including those groups to be considered to be at highest risk. Within the system, public dollars were used to underwrite the cost of services for those persons without the ability to pay. Funding determinations are based on a client liability process instituted by each SCA.

A Client Information System developed through the use of federal anti-drug funds was planned to be implemented in the facilities and SCAs using personal computers. The data base developed under this system will be used to generate reports on clients served and funding which is used to provide the services. The data will then be transferred electronically from the providers to the SCAs, from the SCAs to ODAP, and from ODAP to the National Institute on Drug Abuse (NIDA) for compliance with their federal reporting system.

NETWORKING

The ability to influence the reduction of drug and alcohol abuse will, in large measure, continue to depend upon our ability to utilize federal and state public drug and alcohol resources in conjunction with government and private sector initiatives. There was a continuing need for all human service agencies to coordinate at the state and local level. Coordinated planning approaches and coordinated delivery of services were a high priority in Pennsylvania. The Department of Health has many activities to reflect this priority. Service coordination activities with the Office of Vocational Rehabilitation, the Office of Mental Retardation, the Department of Education, the Department of Aging, the Department of Corrections, the Office of Mental Health, the Office of Medical Assistance,

and the Interdepartmental Human Services Planning Committee are a few examples of this effort made possible with FFY 1990 block grant and state funds. Private sector initiatives with the Lions, the Masons, and the Elks Clubs of Pennsylvania have been successful and will continue over the next few years. Outreach through the United Way of Pennsylvania and private foundations will also continue.

B. PREVENTION/INTERVENTION STRATEGIES

Prevention activities provided current information on the effects of drugs and alcohol. The prevention program's goal was to assist individuals in developing or improving skills that will enable them to choose a lifestyle free of substance abuse. This was done through educational sessions, workshops, media presentations, and an information clearinghouse through contract with the Department. Primary emphasis had been given to youth, and a special curriculum was used in most school districts to address the drug and alcohol problem.

Intervention services provided support to those individuals affected by drug and alcohol problems. Services included information hotlines, drop-in centers, alcohol highway safety programs, and occupational programs. The Department provides funds for the operation of the State Employe Assistance Program and offered technical assistance to private sector employers interested in providing this type of service. The Student Assistance Programs (SAP) provided school personnel with the knowledge and skills needed to identify students using alcohol or other drugs. Students were referred to professional evaluators and, if needed, received treatment services. Also made available were special services designed to divert certain criminal offenders into rehabilitation programs.

The parameters for prevention/intervention reports were redefined to address information needs. A personal computer reporting mechanism was designed with electronic transfer capabilities. Funding was made available for personal computers, for upgrades of some existing equipment and for modems for electronic data transfer.

SUBSTANCE ABUSE STATE AGENCY SPENDING REPORT

State: Pennsylvania

Dates of State expenditure period: from 91 to 92

SOURCE OF FUNDS

1. ACTIVITY	2. ADMS block grant		3. Medicaid	4. Other Federal funds	5. State funds	6. Local funds	7. Other
	10/1/89-9/30/91	10/1/91-9/30/92					
	A. FFY 1990 Award	B. FFY 1991 Award					
				7/1/91 - 6/30/92			
1. Substance abuse treatment and rehabilitation				1,709	22,784		
2. Alcohol treatment and rehabilitation	13,427	14,511			796		
3. Drug treatment and rehabilitation	21,030	14,673					
4. Prevention and early intervention	9,143	10,787		1,440	6,007		
5. Administration	744	1,043		444	6,322		
6. Total	44,344	41,014	-0-	3,593	35,909	-0-	-0-

Funding Support For Six Strategies

	ADMS Block Grant FFY 1990	ADMS Block Grant FFY 1991	Other Federal	Other State	Local	Other
☐ Information	$ 174	$ 172	$		$	$
☐ Education	$ 3,998	$ 4,986	$ 3,518		$	$
☐ Community & Professional Mobilization	$	$	$ 440		$	$
☐ Alternatives	$	$	$		$	$
☐ Social Policy & Environmental Change	$	$	$		$	$
☐ Early Intervention	$ 4,971	$ 5,629	$1,000	2,489	$	$
TOTAL	$ 9,143	$10,787	$1,440	6,007	$ -0-	$ -0-

Did your State fund resource development activities from the FFY 1990 block grant?

☒ Yes

☐ No

Resource Development Activities

	Treatment	Prevention	Total
☐ Planning, coordination, and needs assessment	$	$	$ 407
☐ Quality assurance	$	$	$ 1,073
☐ Training (post-employment)	$	$	$ 173
☐ Education (pre-employment)	$	$	$ -0-
☐ Program development	$	$	$ 423
☐ Research and evaluation	$	$	$ 400
☐ Information systems	$	$	$ 266
TOTAL	$	$	$ 2,742

3. SUBSTANCE ABUSE FUNDING BY OTHER STATE AGENCIES AND OFFICES

(FORM 05)

SUBSTANCE ABUSE FUNDING BY OTHER STATE AGENCIES AND OFFICES

State: Pennsylvania

Dates of State expenditure period: from July 1, 1990 to June 30, 1991

Information not available ☐

SOURCE OF FUNDS

1. ACTIVITY	2. Medicaid	3. Other Federal funds	4. State funds	5. Local funds	6. Other
1. Substance abuse treatment and rehabilitation	Inpatient 59,480,000 Act 152 6,430,000 Outpatient 11,926,298	P.C.C.D. 18,221,000 G.D.P.C. 21,092,000	33,000,000	6,865,000	
2. Alcohol treatment and rehabilitation	38,918,149	9,110,500	16,500,000	3,432,500	
3. Drug treatment and rehabilitation	38,918,149	9,110,500	16,500,000	3,432,500	
4. Prevention and early intervention		21,092,000			
5. Administration					
6. Total	77,836,298	39,313,000	33,000,000	6,865,000	

4. ENTITY INVENTORY

(FORM 06)

The Form 06 submission includes an extensive survey of the 47 Single County Authorities (SCAs) that are intermediaries in Pennsylvania's drug and alcohol service delivery system. The survey covered the state expenditure period 7/1/90 to 6/30/91 and included both 1990 and 1991 Block Grant funds.

Additionally, we have included a summary of all expenditures from the 1990 Block Grant Award which lists both data for the SCAs and for the providers we contract with directly. This summary can be used to verify that all set-aside requirements were met for the 1990 Block Grant Award.

Form 06

SUBSTANCE ABUSE ENTITY INVENTORY

PROVIDER	90 GRANT	ALCOHOL	DRUG	PREVENTION	IVDU	WOMEN
Abraxas	472,739	103,836	368,903		368,903	84,272
AIDS - MOU	714,970		714,970	714,970	714,970	71,500
Capitol Improvement	1,337,428	347,698	989,730		989,730	361,375
Corrections	1,092,484	187,762	904,722		904,722	109,248
DPW - Homeless	723,100		723,100	723,100	723,100	72,310
DPW - Mental Health	1,916,250	958,125	958,125		958,125	191,625
DPW - OCYF	1,000,000		1,000,000	200,000	1,000,000	100,000
Education	66,645	39,937	26,708	33,372		6,665
ENCORE	173,418	37,500	135,918	173,418		
Episcopal	141,237		141,237	141,237	141,237	141,237
Halfway House Pool	1,060,832	466,065	594,767			260,907
L&I	17,546	13,483	4,063	17,546		1,755
Office of Administration	585,763	283,000	302,763	585,763	302,763	58,576
Oxford	9,960	4,980	4,980	9,960		
* SCA's	34,371,794	13,929,050	19,698,545	6,312,201	3,412,940	5,672,673
Shalom	4,616		4,616	4,616		
Training	168,192	90,855	77,337	52,956	77,337	
Villanova	28,291	14,146	14,145	28,291		
Women with Children Pool	459,035	247,384	211,651	145,426		459,035
TOTAL	44,344,300	16,723,821	26,876,280	9,142,856	9,593,827	7,591,178

* The amount shown is actual expenditures for the 90 Block Grant. The attached Form 06 for the Single County Authorities was based on State Fiscal Year 90/91.

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: STATE

FFY 1990 AWARD

1. SCA	3. Area Serv	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol service	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
Allegheny			4151590	653488	4053115	2319747	2485331	770831	613987	577361
Armstrong/Indiana			384111	60462	474586	230886	213686	46067	0	6248
Beaver			287496	45253	914203	191488	141261	74558	34045	0
Bedford			94485	14873	69826	93248	16110	17933	0	45360
Berks			1001298	158510	1481155	654268	505540	78770	6000	7800
Blair			521752	82127	124367	284514	319365	62339	10934	8000
Bradford/Sullivan			151068	23779	0	100146	74701	24279	7943	22768
Bucks			1139081	179797	1143515	651183	667695	229061	72365	128729
Butler			246535	38806	142157	142671	142670	56756	0	0
Cambria			81786	200309	390616	127170	154925	54315	0	12000
Cameron/Elk/McKean			145468	22898	511272	89765	78601	17204	0	0
Centre			293857	46257	399181	153643	186471	17234	0	19869
Chester			657920	103563	1082552	416432	345051	139584	124809	220693
Clarion			97195	15299	119280	63900	48594	19275	688	0
Clearfield/Jefferso			176002	27704	266752	107858	95848	38993	4311	10098
Carbon/Monroe/Pike			167000	35000	409000	110000	92000	31000	3000	14000
Col/Mont/Sny/Un			209000	34000	377000	110000	134000	43000	37000	0
Crauford			141244	22233	235812	105211	58266	25662	3344	9686
Cumberland/Perry			515373	81121	354991	287255	309239	19953	0	34988
	TOTALS		10462261	1845479	12549388	6239385	6069354	1766814	918426	1117600

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: STATE

FFY 1990 AWARD

1. SCA	3. Area Serv	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol service	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
Dauphin			845822	133139	1128310	523343	455618	214709	24000	225252
Delaware			992902	156292	192430	578199	570995	245640	266450	248079
Erie			196321	1247493	875918	721906	721908	398819	223181	106965
Fayette			193000	30000	500000	120000	103000	49000	0	21000
Forest/Warren			72533	11416	109442	41309	42641	21964	0	0
Franklin/Fulton			119000	19000	227000	73000	65000	41000	0	25000
Hunt/Mifflin/Juniat			111909	17615	209424	83336	46188	33223	0	9624
Lackawanna			434431	68383	292093	279262	223552	90656	12622	0
Lancaster			430597	67748	531830	272423	225722	162648	21943	25045
Lawrence			209557	38465	272816	126388	121634	30032	5135	52209
Lebanon			119812	18859	430700	76204	62467	32078	21319	21319
Lehigh			919000	143000	1463000	436000	626000	91000	52000	10000
Luzerne/Wyoming			475692	74877	613248	292915	257654	96308	59578	0
Lycoming/Clinton			430245	67724	290118	216860	281109	45979	62683	8999
Mercer			322213	50719	241900	205113	167819	46681	0	108139
Montgomery			917660	144448	2173604	467241	594867	266307	283500	90000
Northampton			372000	59000	772000	197000	234000	78000	138000	55000
Northumberland			160647	25288	101878	99440	86495	29249	0	0
	TOTALS		7323141	2373466	10425711	4809939	4886669	1973293	1170411	1006631

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: STATE

1. SCA	3. Area Serv	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	FFY 1990 AWARD 7. ADMS Block Grant Funds for alcohol service	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
Philadelphia			5281937	832560	7117824	1871842	4254426	887180	1329078	1326345
Potter			42555	6699	67642	26279	22975	905	0	1000
Schuylkill			175000	27700	380000	131700	71000	50000	2000	0
Susquehanna/Wayne			146483	23057	300506	91799	77741	27206	5086	0
Tioga			118672	18681	82025	67971	69382	17909	0	0
Venango			74839	11780	114520	52110	34509	25845	0	0
Washington/Greene			323556	50929	532290	199298	175187	0	8527	0
Westmoreland			480000	73000	724000	300000	253000	146000	0	127000
York/Adams			559152	88014	517767	329204	317962	87120	0	0
TOTALS			7202194	1132420	9836574	3070203	5276182	1242165	1344691	1454345
PAGE 2 TOTALS			7323141	2373466	10425711	4809939	4886669	1973293	1170411	1006631
PAGE 1 TOTALS			10462261	1845479	12549388	6239385	6069354	1766814	918426	1117600
SCA TOTALS			24987596	5351365	32811673	14119527	16232205	4982272	3433528	3578576

SUBSTANCE ABUSE ENTITY INVENTORY

State:PENNSYLVANIA

SCA:ALLEGHENY

1. Numb	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	FFY 1990 AWARD 7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
657029	PA102327	02	04	27410	4315	25562	31725	0	31725	0	0
70711	PA304063	02	04	33667	5299	127839	19599	19367	38966	0	0
77014	PA904649	02	01	8640	1360	76704	5000	5000	10000	0	0
74010	PA301424	02	04	4320	680	104430	2500	2500	5000	0	0
		02	04	0	0	10000	0	0	0	0	0
707085	PA304022	02	04	25593	4028	18436	14811	14910	29621	0	0
707083	PA909036	02	04	156363	24613	85153	137612	43364	180976	0	0
257027		02	04	71280	11220	14400	41250	41250	0	0	82500
720184	PA906156	02	03	26525	4175	139942	0	30700	0	0	30700
720104	PA301507	02	02	0	0	106068	0	0	0	0	0
700036	PA900084	02	01	46970	7393	22500	33825	20538	54363	0	0
		02	04	0	0	1000000	0	0	0	0	0
720357	PA302646	02	01	50335	7923	19574	2500	55758	58258	0	0
707135		02	01	19692	3100	80485	14992	7800	22792	0	0
707085	PA304022	02	04	7129	1122	5304	4125	4126	8251	0	0
780179	PA905398	02	02	21076	3318	7915	23860	534	24394	0	0
707085	PA304022	02	06	8640	1360	24222	5000	5000	10000	0	0
707096	PA908350	02	03	204243	32149	12524	116031	120361	236392	0	0
707135		02	04	38528	6065	38700	22667	21926	44593	0	0
770146	PA904649	02	02	0	0	42415	0	0	0	0	0
			TOTALS	750411	118120	1962173	475497	393034	755331	0	113200

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: ALLEGHENY

FFY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
720184	PA906186	02	02	13392	2108	89642	15500	0	15500	0	0
720104	PA301507	02	01	25358	3992	0	14675	14675	0	0	29350
770164	PA903518	02	01	60480	9520	107910	35000	35000	0	0	0
740096	PA301309	02	03	17258	2716	0	0	19974	0	0	0
707144		02	01	21600	3400	25000	12500	12500	0	0	0
		02	01	0	0	59818	0	0	0	0	0
740086	PA301432	02	01	103946	16362	133418	43478	76830	0	0	0
041091	PA900001	02	01	64661	10178	69174	53089	21750	0	0	0
720171		02	01	60480	9520	109416	35000	35000	0	0	0
		02	01	239722	37734	0	138728	138728	0	0	277456
707087	PA908459	02	01	38310	6030	0	22170	22170	0	0	0
740096	PA301309	02	01	89707	14120	127292	31009	72818	0	0	0
631121	PA903344	02	01	13097	2061	117963	0	15158	0	0	0
780179	PA905398	02	01	125926	19822	158835	72874	72874	0	0	0
257027		02	01	213840	33660	0	123750	123750	0	0	24750
770164	PA903518	02	01	100224	15776	0	97000	19000	0	0	0
740096	PA301309	02	03	0	0	17500	0	0	0	0	0
770104	PA100412	02	03	0	0	71580	0	0	0	71580	0
707011		02	01	114571	18034	44640	127629	4976	0	0	132605
707121	PA102384	02	01	21553	3393	23059	17696	7250	0	0	0
			TOTALS	1324125	208426	1155247	840098	692453	15500	71580	464161

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: ALLEGHENY

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	FY 1990 AWARD 7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
7000096	PA904912	02	01	62333	9812	16092	30928	41217	0	0	0
740106	PA301424	02	01	246109	38739	70326	155171	129677	0	0	0
740086	PA301432	02	02	0	0	39609	0	0	0	0	0
770104	PA160412	02	03	468640	73767	65347	0	542407	0	542407	0
707137		02	01	0	0	8304	0	0	0	0	0
700036	PA900084	02	01	38254	6022	16090	19276	25000	0	0	0
720104	PA301507	02	01	331341	52155	54388	237522	145974	0	0	0
707096	PA908350	02	01	89692	14118	54138	46407	57403	0	0	0
720184	PA906156	02	01	163512	25738	60947	96281	92969	0	0	0
780066	PA102475	02	01	102622	16153	42117	99975	18800	0	0	0
707138		02	01	67192	10576	61260	38657	39111	0	0	0
707113	PA303826	02	01	59670	9393	37998	52534	16529	0	0	0
707080	PA303081	02	01	74198	11679	95828	12167	73710	0	0	0
780179	PA905398	02	01	923	145	22715	534	534	0	0	0
700036	PA900084	02	02	136840	21540	154205	158380	0	0	0	0
770146	PA904649	02	02	15519	2443	13777	17962	0	0	0	0
700014		02	03	131331	20672	0	0	152003	0	0	0
707126	PA100958	02	03	21600	3400	32035	0	25000	0	0	0
754076	PA908012	02	01	0	0	33970	0	0	0	0	0
750076	PA900340	02	01	67278	10590	56549	38358	39510	0	0	0
			TOTALS	2077054	326942	935695	1004152	1399844	0	542407	0

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: ALLEGHENY

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
720357	PA302646	02	01	1858	292	70801	1075	1075	0	0	0
707082	PA906891	02	01	18395	2896	103312	1019	20272	0	0	0
730074	PA302646	02	01	0	0	27935	0	0	0	0	0
770164	PA903518	02	02	94555	14884	0	109439	0	0	0	0
707114	PA100974	02	01	88786	13975	15250	51380	51381	0	0	102761
707164		02	02	4679	736	27222	5415	0	0	0	0
401000		02	07	99049	15591	0	57320	57320	0	0	0
			TOTALS	307322	48374	244520	225648	130048	0	0	102761
			PAGE 3 TOTALS	2077054	326942	935695	1004152	1399844	0	0	113200
			PAGE 2 TOTALS	1324125	208426	1155247	840098	692453	15500	71580	464161
			PAGE 1 TOTALS	750411	118120	1962173	475497	393034	755331	542407	0
			SCA TOTALS	4151590	653488	4053115	2319747	2485331	770831	613987	577361

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: ARMSTRONG/INDIANA

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	6. State Funds FFY 91	STATE	7. ADMS Block Grant Funds for alcohol services ALCOHOL	8. ADMS Block Grant Funds for drug abuse services DRUG	9. ADMS Block Grant Funds for Prevention PREVENT	10. ADMS Block Grant Funds for IVDU service IVDU	11. ADMS Block Grant Funds for women service WOMEN
321070	PA304287	03	04	39802	6265	53387	25221	20846	46067	0	0
321050	PA904243	03	02	33357	5251	53860	38608	0	0	0	0
321050	PA904243	03	03	25212	3969	53860	0	29181	0	0	0
031056	PA903914	03	02	54996	8657	72377	63653	0	0	0	4378
031056	PA903914	03	03	52060	8195	72376	0	60255	0	0	1870
707120	PA101428	03	02	69898	11002	0	80900	0	0	0	0
707120	PA101428	03	03	69899	11002	0	0	80900	0	0	0
402000		03	07	38887	6121	0	22504	22504	0	0	0
402000		03	07	0	0	115164	0	0	0	0	0
402000		03	07	0	0	8000	0	0	0	0	0
321050	PA904243	03	07	0	0	9237	0	0	0	0	0
031056	PA903914	03	07	0	0	7890	0	0	0	0	0
561089	PA903419	03	01	0	0	5000	0	0	0	0	0
037007	PA903476	03	01	0	0	3000	0	0	0	0	0
037011		03	01	0	0	20435	0	0	0	0	0
			TOTALS	384111	60462	474586	230886	213686	46067	0	6248

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: BEAVER

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services (FY 1990 AWARD)	8. ADMS Block Grant Funds for drug abuse services (FY 1990 AWARD)	9. ADMS Block Grant Funds for Prevention (FY 1990 AWARD)	10. ADMS Block Grant Funds for IVDU service (FY 1990 AWARD)	11. ADMS Block Grant Funds for women service (FY 1990 AWARD)
041420	PA907196	02	04	64418	10140	157060	43122	31436	74558	0	0
611116	PA905919	02	01			24800		0	0	0	0
041091	PA900001	02	01	28685	4515	58800	33200	0	0	0	0
041091	PA900001	02	01			38000		0	0	0	0
101064	PA905679	02	01	7204	1134	9398	5067	3271	0	1014	0
257027	PA907659	02	01			16190	0	0	0	0	0
271010	PA904276	02	01			4266	0	0	0	0	0
077009	PA906974	02	01			38338	0	0	0	0	0
041544	PA302828	02	01	139673	21985	438156	90321	71337	0	22114	0
041220	PA905430	02	01	25916	4079	52995	7278	22717	0	7042	0
041544	PA302821	02	01	21600	3400	50000	12500	12500	0	3875	0
041091	PA900001	02	01			5000	0	0	0	0	0
041419	PA907386	02	07			21200	0	0	0	0	0
			TOTALS	287496	45253	914203	191488	141261	74558	34045	0

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: BEDFORD

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
057003		02	04	15494	2439	43451	15595	2338	17933	0	0
051089	PA303461	02	02	42074	6623	1819	0	8636	0	0	25000
051089	PA303461	02	03	7462	1175	14720	48696	0	0	0	4600
057005		02	02	25018	3938	1082	0	5136	0	0	13000
057005		02	03	4437	698	8754	28957	0	0	0	2760
			TOTALS	94485	14873	69826	93248	16110	17933	0	45360

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: BERKS

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
061360	PA304121	02	04	68058	10712	341343	45804	32966	78770	0	7800
067023	PA304170	02	07	162978	25654	201299	101580	87052	0	0	0
062121	PA750935	02	01	43584	6861	169817	28434	22011	0	0	0
067032	PA101584	02	01	132192	20808	0	76500	76500	0	0	0
067035	PA102822	02	01	8640	1360	0	10000	0	0	0	0
067031	PA101576	02	01	17280	2720	117000	20000	0	0	0	0
067025	PA908434	02	01	23328	3672	116882	16500	10500	0	0	0
061086	PA300426	02	01	129212	20339	180208	36900	112651	0	0	0
061114		02	01	55805	8784	54110	0	64589	0	6000	0
999999		02	01	7690	1210	20041	8900	0	0	0	0
999999		02	01	9590	1510	17500	11100	0	0	0	0
		02	01	175879	27685	262955	149275	54289	0	0	0
		02	01								
367022		02	01	15764	2566	0	18330	0	0	0	0
227036	PA907774	02	01	2193	357	0	2550	0	0	0	0
062041	PA300434	02	01	49140	8000	0	47240	9900	0	0	0
061586	PA905034	02	01	53439	8699	0	46200	15938	0	0	0
677034		02	01	18217	2965	0	21182	0	0	0	0
152066	PA750398	02	01	6828	1112	0	7940	0	0	0	0
367040		02	01	5016	817	0	5833	0	0	0	0
			TOTALS	984833	155831	1481155	654268	486396	78770	6000	7800

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: BERKS

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
				FY 1990 AWARD							
417008		02	01	5913	962	0	0	6875	0	0	0
467038		02	01	6488	1056	0	0	7544	0	0	0
092104		02	01	4064	661	0	0	4725	0	0	0
			TOTALS	16465	2679	0	0	19144	0	0	0
			PAGE 1 TOTALS	984833	155831	1481155	654268	486396	78770	6000	7800
			SCA TOTALS	1001298	158510	1481155	654268	505540	78770	6000	7800

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: BLAIR

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women servic
071064	PA903260	02	04	4311	679	0	3598	1392	4990	0	0
		02	04	19133	3012	0	14394	7751	22145	0	0
071064	PA903260	02	04	6912	1088	0	4255	3745	8000	0	8000
071064	PA903260	02	04	13553	2133	0	7843	7843	15686	0	0
071064	PA903260	02	04	9952	1566	10000	6911	4607	11518	0	0
077014	PA101493	02	01	19596	3084	65552	6430	16250	0	1247	0
077014	PA101493	02	01	145048	22832	930	83940	83940	0	0	0
077009	PA906974	02	01	19824	3121	47885	10842	12103	0	1262	0
077014	PA101493	02	01	14736	2319	0	8527	8528	0	0	0
071064	PA903260	02	01	50599	7965	0	29046	29518	0	3221	0
071064	PA903260	02	01	19361	3047	0	14565	7843	0	0	0
071064	PA903260	02	01	4320	680	0	2500	2500	0	0	0
077013	PA101485	02	01	81734	12866	0	44698	49902	0	5204	0
077013	PA101485	02	01	55987	8813	0	19440	45360	0	0	0
077014	PA101493	02	01	37325	5875	0	12960	30240	0	0	0
077014	PA101493	02	01	19361	3047	0	14565	7843	0	0	0
			TOTALS	521752	82127	124367	284514	319365	62339	10934	8000

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: BRADFORD/SULLIVAN

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	FY 1990 AWARD 7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
081050	PA905349	03	01	71830	11306	72809	47417	35720	0	5820	4200
081050	PA905349	03	04	20977	3302	50973	14393	9886	24279	0	7200
081050	PA905349	03	07	0	0	14863	0	0	0	0	0
081050	PA905349	03	07	5872	924	7049	4078	2718	0	0	0
087008	PA304337	03	01	20384	3209	20662	13456	10137	0	2123	0
171024	PA904797	03	01	4854	764	4919	3204	2413	0	0	0
457015	PA102194	03	01	10346	1628	11467	6705	5269	0	0	8200
132156	PA751727	03	01	684	108	0	444	348	0	0	0
367045		03	01	76	12	0	49	39	0	0	88
597009	PA101055	03	01	16045	2526	4295	10400	8171	0	0	3080
			TOTALS	151068	23779	0	100146	74701	24279	7943	22768

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: BUCKS

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4.Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women servic
092460	PA304378	02	04	49103	7729	156719	27279	29553	56832	0	1000
092170	PA750257	02	04	12096	1904	42234	7000	7000	14000	0	2000
999999		02	04	6393	1006	8491	3700	3699	7399	0	0
092170	PA750257	02	04	91081	14337	42288	53444	51974	105418	0	0
092460	PA304378	02	06	0	0	35489	0	0	0	0	0
093160	PA903252	02	06	0	0	58325	0	0	0	0	0
093160	PA903252	02	06	0	0	58000	0	0	0	0	0
092170	PA750257	02	04	39236	6176	45411	27247	18165	45412	0	0
092170	PA750257	02	02	16844	2651	12535	19495	0	0	0	4875
092170	PA750257	02	03	30676	4829	12536	0	35505	0	5326	8875
999999		02	02	10540	1659	0	12199	0	0	0	0
999999		02	03	10540	1659	0	0	12199	0	1830	0
092104	PS301606	02	02	67011	10548	0	77559	0	0	0	0
092104	PS301606	02	03	61880	9740	0	0	71620	0	3878	0
093259	PA906461	02	02	18462	2906	6231	21368	0	0	0	0
093259	PA906461	02	03	3668	577	6231	0	4245	0	850	0
093149	PA904763	02	02	31644	4981	0	36625	0	0	0	36625
093149	PA904763	02	03	29312	4614	0	0	33926	0	7000	33926
999999		02	02	12211	1922	0	14133	0	0	0	0
999999		02	03	9791	1541	0	0	11332	0	5666	0
			TOTALS	500488	78779	484490	300049	279218	229061	24550	87301

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: BUCKS

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women servic
				FY 1990 AWARD							
999999		02	02	31539	4964	4788	36503	0	0	0	14500
999999		02	03	58164	9156	4788	0	67320	0	13464	26928
092130	PA900159	02	02	0	0	41890	0	0	0	0	0
092130	PA900159	02	03	0	0	41891	0	0	0	0	0
093160	PA903252	02	02	2928	461	125050	3389	0	0	0	0
093160	PA903252	02	03	2928	461	125049	0	3389	0	0	0
097055	PA100990	02	02	651	102	35818	753	0	0	0	0
097055	PA100990	02	03	651	102	35817	0	793	0	0	0
097037	PA101600	02	02	4773	751	10431	5524	0	0	0	0
097037	PA101600	02	03	2195	345	10431	0	2540	0	0	0
092344	PA906453	02	02	155892	25038	61631	180930	0	0	0	0
092344	PA906453	02	03	151451	23840	61632	0	175291	0	0	0
097029	PA907923	02	02	44556	7013	22131	51569	0	0	0	0
097029	PA907923	02	03	33445	5265	22131	0	38710	0	7742	0
097031	PA900498	02	02	13003	2047	6496	15050	0	0	0	0
097031	PA900498	02	03	5235	824	6496	0	6059	0	910	0
097030	PA303438	02	02	18498	2912	2500	21410	0	0	0	0
097030	PA303438	02	03	18498	2911	2500	0	21409	0	0	0
097049	PA101519	02	02	0	0	8000	0	0	0	0	0
097049	PA101519	02	03	0	0	8000	0	0	0	0	0
			TOTALS	544407	86192	637470	315128	315471	0	22116	41428

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: BUCKS

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women servic
097045	PA101626	02	02	0	0	2278	0	0	0	0	0
097045	PA101626	02	03	0	0	2277	0	0	0	0	0
999999		02	02	0	0	8500	0	0	0	0	0
999999		02	03	0	0	8500	0	0	0	0	0
999999		02	06	18140	2855	0	0	20995	0	10498	0
093121	PA906743	02	06	13828	2177	0	0	16005	0	8000	0
107000		02	02	31109	4897	0	36006	0	0	0	0
107000		02	03	31109	4897	0	0	36006	0	7201	0
			TOTALS	94186	14826	21555	36006	73006	0	25699	0
			PAGE 2 TOTALS	544407	86192	637470	315128	315471	0	22116	41428
			PAGE 1 TOTALS	500488	78779	484490	300049	279218	229061	24550	87301
			SCA TOTALS	1139081	179797	1143515	651183	667695	229061	72365	128729

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: BUTLER

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services (FY 1990 AWARD)	8. ADMS Block Grant Funds for drug abuse services (FY 1990 AWARD)	9. ADMS Block Grant Funds for Prevention (FY 1990 AWARD)	10. ADMS Block Grant Funds for IVDU service (FY 1990 AWARD)	11. ADMS Block Grant Funds for women servic (FY 1990 AWARD)
101103	PA903302	02	04	49037	7719	30609	28378	28378	56756	0	0
101103	PA903302	02	02	77926	12266	111548	45096	45096	0	0	0
041091	PA900001	02	02	29893	4706	0	34599	0	0	0	
041091	PA900001	02	03	29893	4705	0	0	34598	0	0	
657026	PA101301	02	02	29893	4705	0	34598	0	0	0	
657026	PA101301	02	03	29893	4705	0	0	34598	0	0	
			TOTALS	246535	38806	142157	142671	142670	56756	0	

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: CAMBRIA

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women servic
117021	PA907881	02	01	28299	54315	87738	41307	41307	54315	0	0
117021	PA907881	02	02	45624	85994	290656	58000	73618	0	0	6000
117021	PA907881	02	07	7863	60000	12222	27863	40000	0	0	6000
			TOTALS	81786	200309	390616	127170	154925	54315	0	12000

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: CAMERON, ELK, MCKEAN

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women servic
				FY 1990 AWARD							
427033	PA100982	02	02	31206	4912	68647	36118	0	0	0	
427033	PA100982	02	03	26212	4127	57473	0	30339	0	0	
427033	PA100982	02	04	25913	4079	73697	16269	13723	16929	0	
427033	PA100982	02	07	2151	338	16252	1362	1127	0	0	
427033	PA100982	02	07	1190	188	6681	736	642	275	0	
427024	PA904169	02	02	18997	2990	47782	21987	0	0	0	
427024	PA904169	02	03	17536	2760	34462	0	20296	0	0	
427024	PA904169	02	07	2281	359	2337	1267	1373	0	0	
427024	PA904169	02	07	622	98	779	374	346	0	0	
427024	PA904169	02	07	0	0	160926	0	0	0	0	
241094	PA906586	02	02	9697	1526	17868	11223	0	0	0	
241094	PA906586	02	03	8950	1409	19356	0	10359	0	0	
241094	PA906586	02	07	216	34	765	130	120	0	0	
241094	PA906586	02	07	497	78	255	299	276	0	0	
427034	PA101238	02	02	0	0	1556	0	0	0	0	
427034	PA101238	02	03	0	0	1436	0	0	0	0	
537030	PA102269	02	02	0	0	520	0	0	0	0	
537030	PA102269	02	03	0	0	480	0	0	0	0	
				145468	22898	511272	89765	78601	17204	0	0

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: CARBON, MONROE, PIKE

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women servic
131044	PA905752	03	01	28000	4000	112000	16000	17000	0	0	2000
131044	PA905752	03	04	15000	2000	45000	10000	8000	13000	0	1000
451044	PA903161	03	01	35000	6000	140000	20000	21000	0	1000	2000
451044	PA903161	03	04	19000	3000	57000	12000	10000	15000	1000	1000
521034	PA905646	03	01	7000	1000	28000	4000	4000	0	0	1000
521034	PA905646	03	04	4000	1000	11000	2000	2000	3000	0	0
457011	PA102178	03	01	10000	2000	0	7000	5000	0	0	0
547006	PA304295	03	01	3000	0	0	2000	1000	0	0	0
487010	PA907501	03	01	5000	1000	0	4000	2000	0	0	1000
647008		03	01	19000	3000	0	13000	9000	0	0	3000
457018		03	01	6000	1000	0	4000	3000	0	0	0
		03	01	16000	3000	0	11000	7000	0	1000	2000
		03	01	0	8000	16000	5000	3000	0	0	1000
			TOTALS	167000	35000	409000	110000	92000	31000	3000	14000

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: CENTRE

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
141250	PA907006	02	04	14890	2344	33728	9844	7390	17234	0	3448
312000		02	07	0	0	60616	0	0	0	0	0
312000		02	01	7294	1148	46381	4559	3883	0	0	0
141090	PA903039	02	04	13723	2160	45317	9382	6501	0	0	0
147015	PA303230	02	01	133046	20943	30225	54900	99089	0	0	0
171089	PA905471	02	01	16425	2585	15112	7455	11555	0	0	11680
427033	PA100982	02	01	3811	600	5037	2485	1926	0	0	0
147014	PA907410	02	01	23370	3679	34555	14473	12576	0	0	0
147014	PA901561	02	01	57929	9119	75544	36073	30975	0	0	4741
147017	PA101659	02	01	23369	3679	34555	14472	12576	0	0	0
		02	07	0	0	8111	0	0	0	0	0
		02	07	0	0	10000	0	0	0	0	0
			TOTALS	293857	46257	399181	153643	186471	17234	0	19869

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: CHESTER

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
152024	PA908780	02	07	48802	7682	77967	31631	24853	56484	0	25000
152024	PA908780	02	07	45691	7192	80351	30683	22200	52883	25000	14278
152024	PA908780	02	01	26107	4110	7000	18130	12087	30217	0	15000
		02	01	58245	9168	0	57413	10000	0	6741	18201
152066	PA750398	02	01	N/A	N/A	0	0	0	0	7352	0
		02	01	21261	3347	192510	14608	10000	0	2460	6644
062121	PA750935	02	01	8640	1360	26000	10000	0	0	0	2700
		02	01	0	0	20000	0	0	0	0	0
152534	PA908582	02	01	119909	18875	84566	52851	85933	0	20831	37500
152116	PA750513	02	01	31968	5032	54300	27000	10000	0	3700	9990
157028	PA907527	02	01	36288	5712	86900	21000	21000	0	6300	11340
151081	PA902031	02	01	25920	4080	70430	21000	9000	0	2000	8100
151096	PA903823	02	01	0	0	80080	0	0	0	0	0
		02	01	90040	14173	83979	34595	69618	0	10425	28140
		02	01	17280	2720	0	0	20000	0	20000	3000
		02	01	40747	6414	1469	47161	0	0	0	12800
		02	01	0	0	217000	0	0	0	0	0
		02	07	87022	13698	0	50360	50360	0	20000	28000
			TOTALS	657920	103563	1082552	416432	345051	139584	124809	220693

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: CLARION

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women servic
031056	PA903914	02	01	14860	2340	0	10600	6600	2891	0	0
167024	PA903807	02	01	43061	6778	22834	24919	22920	8481	688	0
167025	PA303354	02	06	1210	190	1300	700	700	193	0	0
167026	PA101014	02	07	14062	2213	90514	10137	6138	2698	0	0
611116	PA905919	02	01	24002	3778	4640	17544	12236	5012	0	0
			TOTALS	97195	15299	119288	63900	48594	19275	688	0

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: CLEARFIELD/JEFFERSON

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women servi
177090	PA303479	03	04	33690	5303	84146	21052	17941	38993	0	
171089	PA905471	03	01	43372	6827	85646	24000	26199	0	4311	
171013	PA903328	03	01	92097	14497	96960	58346	48248	0	0	1009
427033	PA100982	03	01	5352	843		3884	2311	0	0	
077009	PA906974	03	01	993	156			1149	0	0	
611116	PA905919	03	01	498	78		576		0	0	
			TOTALS	176002	27704	266752	107858	95848	38993	4311	1009

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA
COLUMBIA/MONTOUR/
SCA: SNYDER/UNION

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	FY 1990 AWARD 7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
477030	PA303404	03	07	0	0	55000					
471100	PA303396	03	07	37000	6000	40000	23000	20000	43000	0	0
557027	PA907998	03	07	0	0	12000	0	0	0	0	0
477030	PA303404	03	07	0	0	6000	0	0	0	0	0
477030	PA303404	03	06	0	0	5000	0	0	0	0	0
477030	PA303404	03	01	0	0	9000	0	0	0	0	0
491154	PA906693	03	01	16000	3000	2000	2000	17000	0	0	0
607025	PA907956	03	01	0	0	45000	0	0	0	0	0
557027	PA907998	03	01	76000	12000	59000	41000	48000	0	19000	0
191013	PA904433	03	01	80000	13000	39000	44000	49000	0	18000	0
601031	PA900001	03	01	0	0	70000	0	0	0	0	0
457017	PA102178	03	01	0	0	7000	0	0	0	0	0
062621	PA751123	03	01	0	0	2000	0	0	0	0	0
361369	PA750620	03	01	0	0	6000	0	0	0	0	0
457013	PA101030	03	01	0	0	11000	0	0	0	0	0
197037	PA100735	03	01	0	0	9000	0	0	0	0	0
			TOTALS	209000	34000	377000	110000	134000	43000	37000	0

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: CRAWFORD

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women servic
201084	PA300301	02	02	83239	13103	143563	96342	0	0	0	2628
201084	PA300301	02	03	32107	5054	53099	0	37161	0	3344	2746
201084	PA300301	02	04	25898	4076	39150	8869	21105	25662	0	4312
			TOTALS	141244	22233	235812	105211	58266	25662	3344	9686

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: CUMBERLAND/PERRY

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women servic
217029	PA303321	03	04	42941	6759	65000	27856	21844	0	0	0
501025	PA908020	03	04	9430	1484	65000	6119	4795	0	0	0
217029	PA303321	03	04	17240	2713	19953	11972	7981	19953		
217029	PA303321	03	04	30240	4760		17500	17500	0	0	0
237042	PA909044	03	01	29417	4631	4292	19170	14878			3780
077009	PA906974	03	01	8312	1308	2340	4810	4810	0	0	0
287017	PA908483	03	01	25618	4032	2300	14825	14825			3540
227029	PA906925	03	01	12165	1915		7040	7040			10780
062041	PA300434	03	01	8839	1391		5115	5115			2750
367022	PA906982	03	01	5841	919		3380	3380	0	0	0
227037	PA907816	03	01	5594	880		3237	3237	0	0	0
361476	PA906933	03	01	1693	267		980	980			1960
227036	PA907774	03	01	25518	4017	32851	15482	14053			2380
2211159	PA301051	03	01	31849	5013	20764	23431	13431			9798
221159	PA301051	03	01	29217	4599	5000	16908	16908	0	0	0
402119	PA904193	03	01	4282	674		2478	2478	0	0	0
097039		03	01			13500			0	0	0
097044	PA101279	03	01	3758	592		2175	2175	0	0	0
501025	PA908020	03	01	56013	8817	24748	22521	42309	0	0	0
212014	PA751974	03	01	47738	7514	34747	22752	32500	0	0	0
			TOTALS	395705	62285	290495	227751	230239	19953	0	34988

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: CUMBERLAND/PERRY

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services (FY 1990 AWARD)	8. ADMS Block Grant Funds for drug abuse services (FY 1990 AWARD)	9. ADMS Block Grant Funds for Prevention (FY 1990 AWARD)	10. ADMS Block Grant Funds for IVDU service (FY 1990 AWARD)	11. ADMS Block Grant Funds for women service (FY 1990 AWARD)
211144	PA303115	03	01	47738	7514	34748	22752	32500	0	0	0
211021	PA901173	03	01	47738	7514	24748	22752	32500	0	0	0
217038		03	01	2592	408	0	1500	1500	0	0	0
217033	PA101725	03	01	21600	3400	5000	12500	12500	0	0	0
			TOTALS	119668	18836	64496	59504	79000	0	0	0
			PAGE 1 TOTALS	395705	62285	290495	227751	230239	19953	0	34988
			SCA TOTALS	515373	81121	354991	287255	309239	19953	0	34988

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: DAUPHIN

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	FY 1990 AWARD 7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
221159	PA301051	02	01	147761	23259	176684	64866	106154			64523
227036	PA907774	02	01	143110	22526	81151	143666	21970			52921
227048	PA100776	02	01	0	0	33333	0	0	0	0	0
227029	PA906925	02	01	18740	2950	0	4140	17550	0	0	3550
227037	PA907816	02	01	112147	17653	72850	129800	0	0	0	44071
361476	PA906933	02	01	0	0	33887	0	0	0	0	0
287017	PA908483	02	01	0	0	3550	0	0	0	0	0
567009	PA102277	02	01	0	0	3770	0	0	0	0	0
457011	PA102178	02	01	3560	560	3770	4120	0	0	0	0
361119	PA903195	02	01	0	0	20302	0	0	0	0	0
601031	PA900019	02	01	3456	544	12375	0	4000	0	0	0
152089	PA301044	02	01	0	0	1974	0	0	0	0	0
227035	PA907782	02	01	59412	9352	146792	11907	56857	0	0	17923
222044	PA302588	02	01	82529	12991	104659	0	95520	0	24000	28200
541024	PA900464	02	01	4666	734	5152	5400	0	0	0	2102
		02	01	48908	7698	0	15323	41283	0	0	10500
227038	PA907790	02	01	0	0	10000	0	0	0	0	0
227051	PA102871	02	01	5184	816	0	0	6000	0	0	962
227045	PA303529	02	01	6912	1088	0	8000	0	0	0	500
317013	PA907865	02	01	3836	604	0	3500	940	0	0	0
			TOTALS	640221	100775	710249	390722	350274	0	24000	225252

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: DAUPHIN

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services (FY 1990 AWARD)	8. ADMS Block Grant Funds for drug abuse services (FY 1990 AWARD)	9. ADMS Block Grant Funds for Prevention (FY 1990 AWARD)	10. ADMS Block Grant Funds for IVDU service (FY 1990 AWARD)	11. ADMS Block Grant Funds for women service (FY 1990 AWARD)
		02	01	3447	543	0	2500	1490	0	0	0
227035	PA907782	02	04	10342	1628	9100	5985	5985	11970	0	0
221255	PA303511	02	04	0	0	4882	0	0	0	0	0
		02	04	0	0	11000	0	0	0	0	0
221190	PA908996	02	04	191812	30193	393079	124136	97869	202739	0	0
			TOTALS	205601	32364	418061	132621	105344	214709	0	0
			PAGE 1 TOTALS	640221	100775	710249	390722	350274	0	24000	225252
			SCA TOTALS	845822	133139	1128310	523343	455618	214709	24000	225252

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: DELAWARE

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	FY 1990 AWARD 7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
232013	PA904466	02	02	167257	26328	0	193585	0	0	0	53922
233154	PA750679	02	02	45796	7209	72456	53005	0	0	0	21049
231104	PA903070	02	03	26501	4172	0	0	30673	0	7668	0
231104	PA903070	02	02	42645	6713	4702	49358	0	0	0	0
234104		02	03	211035	33218	21107	0	244253	0	212867	31386
234096		02	02	132237	20815	34609	153052	0	0	0	141722
234096		02	03	132235	20815	34608	0	153050	0	45915	0
233070	PA303776	02	04	37243	5862	7162	25863	17242	43105	0	0
232076	PA100115	02	03	22963	3615	0	0	26578	0	0	0
237055		02	03	174990	27545	17786	103336	99199	202535	0	0
			TOTALS	992902	156292	192430	578199	570995	245640	266450	248079

MS FORM 06

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: ERIE

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
				FY 1990 AWARD							
251086	PA750307	02	01	70500	447886	380001	259193	259193	0	118710	0
257046	PA103101	02	01	14510	92454	11885	53482	53482	0	0	106965
257028	PA907683	02	01	57072	362573	413862	209822	209823	0	104471	0
257028	PA907683	02	04	54239	344580	70170	199409	199410	398819	0	0
			TOTALS	196321	1247493	875918	721906	721908	398819	223181	106965

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: FAYETTE

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services (FY 1990 AWARD)	8. ADMS Block Grant Funds for drug abuse services (FY 1990 AWARD)	9. ADMS Block Grant Funds for Prevention (FY 1990 AWARD)	10. ADMS Block Grant Funds for IVDU service (FY 1990 AWARD)	11. ADMS Block Grant Funds for women service (FY 1990 AWARD)
261084	PA908681	02	02	42000	7000	36000	49000	0	0	0	21000
261084	PA098681	02	03	42000	7000	36000	0	49000	0	0	0
267002	PA907535	02	02	8000	1000	7000	9000	0	0	0	0
267002	PA907535	02	03	8000	1000	6000	0	9000	0	0	0
267004	PA101402	02	02	6000	1000	6000	7000	0	0	0	0
267004	PA101402	02	03	7000	1000	5000	0	8000	0	0	0
261084	PA908681	02	04	42000	7000	175000	27000	22000	49000	0	0
041091	PA900001	02	02	5000	1000	8000	6000	0	0	0	0
041091	PA900001	02	03	3000	0	7000	0	3000	0	0	0
077009	PA906974	02	02	16000	2000	23000	18000	0	0	0	
077009	PA906974	02	03	9000	1000	23000	0	10000	0	0	0
062621	PA751123	02	02	1000	0	1000	1000	0	0	0	0
062621	PA751123	02	03	1000	0	0	0	1000	0	0	0
561089	PA903419	02	02	2000	1000	3000	3000	0	0	0	0
561089	PA903419	02	03	1000	0	3000	0	1000	0	0	0
261084	PA908681	02	07	0	0	132000	0	0	0	0	0
		02	07	0	0	29000	0	0	0	0	0
			TOTALS	193000	30000	500000	120000	103000	49000	0	21000

ADMS FORM 06

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: FOREST/WARREN

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	FY 1990 AWARD 7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
621013	PA904359	03	01			69908	0	0	0	0	0
621013	PA904359	03	02 *	18389	2893	0	21283	0	10912	0	0
621013	PA904359	03	03	29498	4643	0	0	34141	11052	0	0
611116	PA05919	03	02	17302	2724	0	20026	0	0	0	0
367039	PA101964	03	03	7344	1156	0	0	8500	0	0	0
257027	PA907659	03	01	0	0	7933	0	0	0	0	0
062041	PA300434	03	01	0	0	11575	0	0	0	0	0
			TOTALS	72533	11416	89416	41309	42641	21964	0	0

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: FRANKLIN/FULTON

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	FY 1990 AWARD 7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
281135	PA750174	03	04	0	0	0	0	0	0	0	0
287031	PA101295	03	01	26000	4000	65000	17000	13000	0	0	11000
287033	PA101378	03	01	0	0	8000	0	0	0	0	0
297032	PA101337	03	01	0	0	7000	0	0	0	0	0
287034	PA102905	03	06	0	0	15000	0	0	0	0	0
287018	PA906495	03	04	35000	6000	45000	22000	19000	41000	0	0
281209	PA906610	03	07	0	0	16000	0	0	0	0	0
212014	PA751974	03	01	0	0	9000	0	0	0	0	0
077009	PA906974	03	01	0	0	0	0	0	0	0	0
402119	PA904193	03	01	0	0	25000	0	0	0	0	0
227036	PA907774	03	01	0	0						
221159	PA301051	03	01	0	0	15000	0	0	0	0	0
361476	PA906933	03	01	0	0	2000	0	0	0	0	0
361369	PA750620	03	01	0	0	7000	0	0	0	0	0
561089	PA903419	03	01	58000	9000	13000	34000	33000	0	0	14000
			TOTALS	119000	19000	227000	73000	65000	41000	0	25000

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA
HUNTINGDON/
SCA: MIFFLIN/JUNIATA

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
447019	PA101329	03	01	0	0	71176	0	0	0	0	0
347018	PA101345	03	01	0	0	30504	0	0	0	0	0
317013	PA907865	03	01	0	0	67786	0	0	0	0	0
447019	PA101329	03	02	23419	3686	0	27105	0	0	0	3630
347018	PA101345	03	02	10036	1580	0	11616	0	0	0	1484
317013	PA907865	03	02	38547	6068	0	44615	0	0	0	2178
447019	PA101329	03	03	9939	1564	0	0	11503	0	0	0
347018	PA101345	03	03	4260	670	0	0	4930	0	0	572
317013	PA907865	03	03	25708	4047	0	0	29755	0	0	810
447019	PA101329	03	04	0	0	16783	0	0	14012	0	0
347018	PA101345	03	04	0	0	7192	0	0	6006	0	950
317013	PA907865	03	04	0	0	15983	0	0	13205	0	0
		TOTALS		111909	17615	209424	83336	46188	33223	0	9624

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: LACKAWANNA

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
357020	PA908889	02	04	51636	8128	60236	35621	24143	59764	0	0
357018	PA304212	02	04	18051	2841	5526	10421	10471	20892	0	0
999999		02	04	8640	1360	10000	5000	5000	10000	0	0
401889	PA906966	02	01	12391	1950	0	8774	5567	0	278	0
547006	PA304295	02	01	64800	10200	0	45886	29114	0	6456	0
647008		02	01	30240	4760	0	21414	13586	0	679	0
357025	PA101196	02	01	60480	9520	10000	38500	31500	0	0	0
351024	PA101931	02	01	185861	29256	122236	112296	102821	0	5141	0
357022	PA033313	02	01	2332	368	84095	1350	1350	0	68	0
			TOTALS	434431	68383	292093	279262	223552	90656	12622	0

ADMS FORM 06

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: LANCASTER

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	FY 1990 AWARD 7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
361190	PA101139	02	04	108884	17139	296961	69280	56743	126023	0	0
367030	PA303610	02	04	4019	633	7669	2791	1861	4652	0	0
362013	PA905695	02	04	27625	4348	52716	19184	12789	31973	0	0
361369	PA750620	02	01	6814	1073	3514	4259	3628	0	35	0
367045		02	01	6814	1073	3514	4259	3628	0	88	7887
361476	PA906933	02	01	14825	2333	7645	9265	7893	0	0	17158
367038	PA101956	02	01	22620	3561	36665	14138	12043	0	0	0
461081	PA100594	02	01	30844	4855	15906	19277	16422	0	3262	0
677034	PA101386	02	01	75657	11909	39017	47286	40280	0	6380	0
147015	PA303230	02	01	49056	7722	25298	30660	26118	0	8978	0
287017	PA908483	02	01	71648	11278	36948	44780	38146	0	3200	0
457015	PA102194	02	01	11591	1824	5977	7244	6171	0	0	0
			TOTALS	430397	67748	531830	272423	225722	162648	21943	25045

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: LAWRENCE

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	FY 1990 AWARD 7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
377005	PA904201	02	04	25948	4084	80047	16084	13948	30032	0	6230
377005	PA904201	02	01	172336	27127	94857	99269	100194	0	5010	28910
377006	PA908038	02	01	8640	1360	87912	7500	2500	0	125	10000
611116	PA905919	02	01	0	0	4160	0	0	0	0	0
257046	PA103101	02	01	2633	4436	414	3535	3534	0	0	7069
041091	PA900001	02	01	0	0	700	0	0	0	0	0
047033		02	01	0	1458	162	0	1458	0	0	0
		02	01	0	0	1500	0	0	0	0	0
		02	01	0	0	3064	0	0	0	0	0
			TOTALS	209557	38465	272816	126388	121634	30032	5135	52209

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: LEBANON

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
381109	PA905828	02	04	13858	2181	31527	8869	7170	16039	0	0
381109	PA905828	02	06	13858	2181	31527	8869	7170	16039	0	0
381109	PA905828	02	07	0	0	73032	0	0	0	0	0
381109	PA905828	02	01	92096	14497	160475	10877	0	0	21319	21319
387012	PA102004	02	01	0	0	75725	42830	43314	0	0	0
		02	01	0	0	8414	4759	4813	0	0	0
402119	PA904193	02	01	0	0	9000	0	0	0	0	0
077009	PA906974	02	01	0	0	9000	0	0	0	0	0
457015	PA102194	02	01	0	0	9000	0	0	0	0	0
062121	PA750935	02	01	0	0	5000	0	0	0	0	0
361369	PA750620	02	01	0	0	1000	0	0	0	0	0
361476	PA906933	02	01	0	0	1000	0	0	0	0	0
097039		02	01	0	0	5000	0	0	0	0	0
367040	PA101972	02	01	0	0	5000	0	0	0	0	0
367026	PA303628	02	01	0	0	1000	0	0	0	0	0
367022	PA906982	02	01	0	0	5000	0	0	0	0	0
			TOTALS	119812	18859	430700	76204	62467	32078	21319	21319

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: LEHIGH

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
229000		02	07	0	0	207000	0	0	0	0	
482150	PA303222	02	04	6000	1000	126000	2000	5000	7000	0	0
391144	PA920009	02	04	35000	5000	19000	13000	27000	40000	0	0
		02	04	38000	6000	0	14000	30000	44000	0	0
391220	PA303172	02	04	87000	14000	54000	66000	35000	0	0	0
397019	PA303164	02	04	20000	3000	154000	14000	9000	0	0	0
391139	PA751529	02	01	111000	17000	61000	63000	65000	0	0	0
397023	PA101097	02	01	0	0	30000	0	0	0	0	0
391124	PA100024	02	01	40000	6000	80000	20000	26000	0	0	0
487010	PA907501	02	01	0	0	23000	0	0	0	0	0
062121	PA750935	02	01	0	0	7000	0	0	0	0	0
397029		02	01	0	0	374000	0	0	0	0	0
487009	PA907444	02	01	9000	1000	0	3000	7000	0	0	10000
397021	PA102012	02	01	105000	16000	0	61000	60000	0	0	0
391111	PA300111	02	01	92000	15000	20000	43000	64000	0	0	0
391144	PA920009	02	01	110000	17000	63000	54000	73000	0	0	0
397012	PA970345	02	01	59000	9000	39000	0	68000	0	15000	0
			TOTALS	712000	110000	1257000	353000	469000	91000	15000	10000

ADMS FORM 06

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: LEHIGH

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
		02	03	32000	5000	0	0	37000	0	37000	0
397026	PA102970	02	01	0	0	20000	0	0	0	0	0
		02	07	0	0	24000	0	0	0	0	0
		02	01	175000	28000	162000	83000	120000	0	0	0
			TOTALS	207000	33000	206000	83000	157000	0	37000	0
			PAGE 1 TOTALS	712000	110000	1257000	353000	469000	91000	15000	10000
			SCA TOTALS	919000	143000	1463000	436000	626000	91000	52000	10000

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: LUZERNE/WYOMING

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	FY 1990 AWARD 7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
401216	PA905901	03	01	117736	18533	118982	73776	62493	0	18748	0
401110	PA905117	03	01	125095	19691	126449	78737	68049	0	20415	0
667031	PA101048	03	01	44151	6950	42447	27084	24017	0	7205	0
402249	PA102087	03	01	80944	12741	82485	49653	44032	0	13210	0
401216	PA905901	03	04	54919	8644	159284	31781	31782	63563	0	0
402249	PA102087	03	04	22467	3536	64074	13001	13002	26003	0	0
401610	PA906966	03	04	5825	917	19527	3371	3371	6742	0	0
457011	PA102178	03	01	24555	3865	0	17512	10908	0	0	0
			TOTALS	475692	74877	613248	292915	257654	96308	59578	0

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: LYCOMING/CLINTON

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
601031	PA900019	03	01	0	0	66775	0	0	0	0	0
401889	PA906966	03	01	31014	4882	1233	18969	16927	0	0	0
402119	PA904193	03	01	15695	2470	2961	10019	8146	0	0	0
597009	PA101055	03	01	21495	3383	832	12174	12704	0	0	0
152066	PA750398	03	01	62	10	0	36	36	0	0	0
361476	PA906933	03	01	299	47	0	173	173	0	0	346
417011	PA101063	03	01	73164	11517	2982	44163	40518	0	40518	0
187013	PA100818	03	01	31356	4936	1278	18927	17365	0	17365	0
417015	PA102137	03	01	8294	1306	0	4800	4800	0	4800	0
417005	PA908913	03	01	2851	449	0	1650	1650	3300	0	0
411104	PA751636	03	01	36875	5804	214057	23411	19268	42679	0	8653
		03	01	166287	26175	0	57739	134723	0	0	0
		03	04	42853	6745	0	24799	24799	0	0	0
			TOTALS	430245	67724	290118	216860	281109	45979	62683	8999

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: MERCER

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
437003	PA907741	02	01	22080	3476	18690	14056	11500	0	0	7922
431244	PA905802	02	01	56035	8820	44802	35670	29185	0	0	20105
437004	PA102160	02	01	82184	12936	17280	52316	42804	0	0	29487
431031	PA905067	02	01	65547	10318	44292	41726	34139	0	0	23518
431042	PA750414	02	01	56035	8820	39802	35670	29185	0	0	20105
432000		02	04	40332	6349	77034	25675	21006	46681	0	7002
			TOTALS	322213	50719	241900	205113	167819	46681	0	108139

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: MONTGOMERY

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
				FY 1990 AWARD							
062041	PA300434	02	01	3189	502	12724	3691	0	0	0	0
062121	PA750935	02	01	0	0	10000	0	0	0	0	0
062621	PA751123	02	01	0	0	62560	0	0	0	0	0
177119	PA906974	02	01	4428	697	5000	5125	0	0	0	0
0952104	PA301606	02	01	22680	3570	0	13921	12329	0	0	0
093149	PA904763	02	01	0	0	147600	0	0	0	0	0
193259	PA906461	02	01	0	0	25000	0	0	0	0	0
097053	PA101543	02	01	0	0	31000	0	0	0	0	0
152066	PA750398	02	01	0	0	280650	0	0	0	0	0
152089	PA301044	02	01	0	0	1000	0	0	0	0	0
221159	PA301051	02	01	0	0	1000	0	0	0	0	0
227036	PA907774	02	01	0	0	1000	0	0	0	0	0
232156	PA751727	02	01	0	0	16500	0	0	0	0	0
237042	PA909044	02	01	0	0	8000	0	0	0	0	0
287035	PA102913	02	01	0	0	2000	0	0	0	0	0
361476	PA906933	02	01	0	0	2000	0	0	0	0	0
391124	PA100024	02	01	0	0	25000	0	0	0	0	0
391139	PA751529	02	01	0	0	13350	0	0	0	0	0
402119	PA904193	02	01	8856	1394	4200	5125	5125	0	0	0
457015	PA102194	02	01	24088	3792	10000	13940	13940	0	0	0
			TOTALS	63241	9955	658584	41802	31394	0	0	0

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: MONTGOMERY

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
461031	PA100032	02	01	0	0	8550	0	0	0	0	0
461081	PA100534	02	01	287370	45235	9691	242955	89650	0	0	0
461236	PA304097	02	04	0	0	14400	0	0	0	0	0
461246	PA750745	02	04	0	0	17125	0	0	0	0	0
461276	PA908863	02	04	0	0	43450	0	0	0	0	0
463080	PA908798	02	04	0	0	45000	0	0	0	0	0
463286	PA303206	02	04	0	0	56000	0	0	0	0	0
464090	PA908921	02	04	64757	10193	9800	37475	37475	74950	0	0
465077	PA904060	02	03	244944	38556	56886	0	283500	0	283500	0
465121	PA751842	02	01	0	0	81000	0	0	0	0	0
465151	PA904078	02	06	0	0	20630	0	0	0	0	0
465324	PA906099	02	06	30240	4760	0	35000	0	35000	0	0
465340	PA908848	02	04	72020	11337	93063	15845	67512	83357	0	0
466220	PA302554	02	01	0	0	135602	0	0	0	0	0
465324	PA906099	02	01	0	0	10000	0	0	0	0	0
465151	PA904078	02	01	0	0	6700	0	0	0	0	0
467038	PA905653	02	01	0	0	49722	0	0	0	0	0
467041	PA908046	02	01	0	0	289062	0	0	0	0	0
467041	PA908046	02	06	63072	9928	16700	32664	40336	73000	0	0
467050	PA303586	02	01	0	0	164263	0	0	0	0	0
			TOTALS	762403	120009	1127644	363939	518473	266307	283500	0

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: MONTGOMERY

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
467051	PA304105	02	04	0	0	40000	0	0	0	0	0
467051	PA304105	02	01	0	0	137949	0	0	0	0	0
467055	PA303214	02	01	77760	12240	61318	45000	45000	0	0	90000
900821	PA750836	02	01	0	0	85000	0	0	0	0	0
910093	PA301010	02	01	14256	2244	0	16500	0	0	0	0
457011	PA102178	02	01	0	0	63109	0	0	0	0	0
			TOTALS	92016	14484	387376	61500	45000	0	0	90000
			PAGE 2 TOTALS	762403	120009	1127644	363939	518473	266307	283500	0
			PAGE 1 TOTALS	63241	9955	658584	41802	31394	0	0	0
			SCA TOTALS	917660	144448	2173604	467241	594867	266307	283500	90000

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: NORTHAMPTON

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
062121	PA750935	02	01	0	0	10000	0	0	0	0	0
167032	PA101584	02	01	0	0	25000	0	0	0	0	0
097044	PA101279	02	01	20000	2000	32000	12000	10000	0	0	0
152089	PA301044	02	01	4000	1000	11000	3000	2000	0	0	5000
234000		02	01	0	0	171000	0	0	0	0	0
397012	PA907345	02	03	35000	5000	0	0	40000	0	40000	6000
397012	PA907345	02	06	13000	2000	29000	0	15000	0	15000	0
391124	PA100024	02	01	32000	4000	40000	18000	18000	0	0	0
391139	PA751529	02	01	30000	5000	21000	20000	15000	0	0	0
456017		02	01	0	0	2000	0	0	0	0	0
457011	PA102178	02	01	11000	2000	13000	13000	0	0	0	0
457015	PA102194	02	01	0	0	25000	0	0	0	0	0
482334	PA751792	02	01	20000	4000	105000	22000	2000	0	0	0
487014	PA102251	02	01	20000	4000	105000	22000	2000	0	0	0
482070	PA751669	02	01	0	0	18000	0	0	0	0	0
482070	PA751669	02	04	25000	4000	18000	29000	0	37000	0	0
482150	PA303222	02	04	38000	6000	78000	9000	35000	36000	0	0
487009	PA907444	02	01	32000	5000	10000	14000	23000	0	23000	0
487010	PA907501	02	01	0	0	30000	0	0	0	0	7000
487013	PA102244	02	01	45000	7000	8000	22000	30000	0	30000	37000
			TOTALS	325000	51000	751000	184000	192000	73000	108000	55000

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: NORTHAMPTON

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
		02	01	0	0	9000	0	0	0	0	0
		02	06	26000	4000	0	0	30000	0	30000	0
		02	01	11000	2000	9000	6000	7000	1000	0	0
		02	04	1000	1000	0	1000	1000	1000	0	0
		02	01	6000	1000	0	4000	3000	0	0	0
		02	01	0	0	1000	0	0	0	0	0
		02	04	2000	0	0	1000	1000	2000	0	0
		02	04	1000	0	0	1000	0	1000	0	0
		02	01	0	0	1000	0	0	0	0	0
		02	01	0	0	1000	0	0	0	0	0
			TOTALS	47000	8000	21000	13000	42000	5000	30000	0
			PAGE 1 TOTALS	325000	51000	751000	184000	192000	73000	108000	55000
			SCA TOTALS	372000	59000	772000	197000	234000	78000	138000	55000

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: NORTHUMBERLAND

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	FY 1990 AWARD 7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
471100	PA303396	02	04	18037	2839	15350	7824	13052	20876	0	0
335000		02	07	7234	1139	0	8373	0	8373	0	0
171089	PA905471	02	01	3344	526	0	1602	2268	0	0	0
197037	PA100735	02	01	2794	440	0	1339	1895	0	0	0
062041	PA300434	02	01	13375	2105	0	6409	9071	0	0	0
677034	PA101386	02	01	19440	3060	0	9315	13185	0	0	0
671099	PA905885	02	01	7154	1126	0	3428	4852	0	0	0
227037	PA907816	02	01	1944	306	0	932	1318	0	0	0
221159	PA301051	02	01	3048	480	0	1461	2067	0	0	0
361476	PA906933	02	01	1479	233	0	709	1003	0	0	0
361369	PA750620	02	01	1199	189	0	575	813	0	0	0
361369	PA750620	02	01	2363	372	0	1132	1603	0	0	0
357019	PA906834	02	01	6934	1092	9776	3323	4703	0	0	0
607025	PA907956	02	01	2566	404	0	1270	1700	0	0	0
491024	PA903401	02	01	8368	1317	8726	6208	3477	0	0	0
497019	PA102715	02	01	59276	9331	65447	43988	24619	0	0	0
491154	PA906693	02	01	2092	329	2579	1552	869	0	0	0
			TOTALS	160647	25288	101878	99440	86495	29249	0	0

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: PHILADELPHIA

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	FY 1990 AWARD 7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
152089	PA301044	02	01	263656	41501	259613	0	305157	0	0	0
800103	PA301016	02	01	170842	28151	250935	206993	0	0	0	56690
800244	PA906248	02	01	90024	14170	296314	104194	0	0	0	0
800254	PA100511	02	03	252475	39741	211486	0	292216	0	292216	12532
800284	PA100172	02	03	105132	16548	103519	0	121680	0	0	0
800450	PA303933	02	01 *	290253	45688	245976	89965	258477	344942	0	0
800520	PA303941	02	01	233620	36774	97628	67778	202616	270394	0	0
800584	PA302844	02	01	77760	12240	254578	49500	40500	0	0	0
800726	PA906560	02	01	504579	79425	611736	292586	291418	0	0	0
807154	PA908095	02	01	14098	2219	0	8158	8159	0	0	0
807161	PA906669	02	03	57817	9101	48137	0	66918	0	66918	11889
807163	PA909010	02	01	142155	22376	454111	164531	0	0	0	54844
807164	PA908103	02	03	254823	40111	250917	0	294934	0	294934	0
807170	PA100305	02	03	114279	17988	96208	0	132267	0	132267	23064
807191	PA100925	02	01	72924	11479	15597	21157	63246	0	0	84403
807219	PA102632	02	01	129600	20400	250864	75000	75000	0	0	150000
807224	PA103044	02	01	147881	23277	240293	87746	83412	0	0	171158
810194	PA751388	02	01 *	80488	13669	113933	93157	0	0	0	0
820114	PA100370	02	01	406924	64053	364096	0	470977	0	281865	49470
820206	PA904946	02	01	139416	21945	137279	0	161361	0	0	0
			TOTALS	3556746	560856	4303220	1260765	2868338	615336	1068200	614050

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: PHILADELPHIA

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
820354	PA906354	02	03	148469	23370	249192	0	171839	0	171839	171839
830023	PA906792	02	01	271151	43098	53983	157439	156810	0	0	0
830314	PA302604	02	03	65461	10304	251457	0	75765	0	75765	98000
850324	PA302018	02	03	11469	1805	190569	0	13274	0	13274	13274
850454	PA906487	02	03	60126	9464	212767	69590	0	0	0	0
860139	PA301085	02	01	176382	27764	439211	0	204146	0	0	0
890090	PA751412	02	01	237897	37447	100401	68142	207202	271844	0	3500
900134	PA905521	02	01	31088	4893	320509	18027	17954	0	0	0
900304	PA906875	02	01	23537	3705	273197	13621	13621	0	0	27242
910093	PA301010	02	01	222825	35074	228857	0	257899	0	0	0
910194	PA906305	02	01	116168	18286	494461	75228	59226	0	0	59226
881003		02	01	293081	46133	37691	169946	169268	0	0	339214
807234		02	01	67537	10631	0	39084	39084	0	0	0
			TOTALS	1725191	271974	2852295	611077	1396088	271844	260878	712295
			PAGE 1 TOTALS	3556746	560586	4303220	1260765	2868338	615336	1068200	614050
			SCA TOTALS	5281937	832560	7155515	1871842	4254426	887180	1329078	1326345

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: POTTER

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	FY 1990 AWARD 7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
427033	PA100982	02	04	8145	1283	19622	5402	4026	905	0	750
427033	PA100982	02	01	34410	5416	48020	20877	18949	0	0	250
			TOTALS	42555	6699	67642	26279	22975	905	0	1000

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: SCHUYLKILL

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	FY 1990 AWARD 7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
547004	PA304113	02	04	0	0	73000	0	0	50000	0	0
547006	PA304295	02	02	0	0	73000	0	0	0	0	0
547006	PA304295	02	03	0	0	40000	0	0	0	0	0
547008	PA101121	02	02	39800	6300	44200	46100	0	0	500	0
547008	PA101121	02	03	21500	3400	23800	0	24900	0	500	0
541024	PA900464	02	02	73900	11700	81900	85600	0	0	500	0
541024	PA900464	02	03	39800	6300	44100	0	46100	0	500	0
			TOTALS	175000	27700	380000	131700	71000	50000	2000	0

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: SUSQUEHANNA/WAYNE

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant		6. State Funds	FY 1990 AWARD 7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
				FFY 90	FFY 91						
582054	PA903146	03	01								
642044	PA903203	03	01	146483	23057	300506	91799	77741	27206	5086	0
			TOTALS	146483	23057	300506	91799	77741	27206	5086	0

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: TIOGA

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
597010	PA102285	02	01	59999	9445	63706	37971	31473	0	0	0
597010	PA102285	02	04	15473	2436	18319	0	17909	17909	0	0
597009	PA101055	02	01	32714	5149	0	22718	15145	0	0	0
361369	PA70620	02	01	4006	631	0	4637	0	0	0	0
457013	PA906834	02	01	2592	408	0	1800	1200	0	0	0
457015	PA102194	02	01	3629	571	0	545	3655	0	0	0
087009	PA304337	02	01	259	41	0	300	0	0	0	0
			TOTALS	118672	18681	82025	67971	69382	17909	0	0

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: VENANGO

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	FY 1990 AWARD 7. ADMS Block Grant Funds for alcohol service	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
611013	PA904417	02	02	15348	2416	59573	17764	0	0	0	0
611013	PA904417	02	03	10033	1579	25532	0	11612	0	0	0
611013	PA904417	02	04	0	0	20415	0	0	15845	0	0
611116	PA905919	02	04	0	0	0	0	0	10000	0	0
611116	PA905919	02	02	29675	4671	6300	34346	0	0	0	0
611116	PA905919	02	03	19783	3114	2700	0	22897	0	0	0
			TOTALS	74839	11780	114520	52110	34509	25845	0	0

DHS FORM 06

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: WASHINGTON/GREENE

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
*				8640	1360	0	5000	5000	0	50	0
633060	PA204402	03	04	58225	9165	116883	36775	30615	0	306	0
041091	PA900001	03	01	17280	2720	110170	10000	10000	0	2600	0
631074	PA905307	03	01	143876	22647	169101	100681	65842	0	2831	0
302084	PA904268	03	01	40522	6378	59002	19450	27450	0	1180	0
631010	PA303297	03	01	33462	5267	39162	20729	18000	0	774	0
637016		03	01	9213	1450	19108	1663	9000	0	387	0
657023	PA900134	03	01	12338	1942	18864	5000	9280	0	399	0
* mini gr	ants to co	mmunity gr	oups								
			TOTALS	323556	50929	532290	199298	175187	0	8527	0

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: WESTMORELAND

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
651110	PA303685	02	04	64000	10000	249000	40000	34000	74000	0	16000
651110	PA303685	02	06	34000	5000	0	21000	18000	39000	0	0
999999		02	06	28000	4000	17000	16000	16000	33000	0	16000
652404	PA904847	02	01	186000	29000	317000	117000	98000	0	0	13000
657028	PA100859	02	01	62000	9000	78000	39000	32000	0	0	11000
657023	PA900134	02	01	40000	6000	16000	25000	21000	0	0	29000
657027	PA102319	02	01	26000	4000	0	17000	13000	0	0	6000
031056	PA903914	02	01	24000	4000	28000	15000	13000	0	0	22000
101064	PA905679	02	01	2000	0	2000	1000	1000	0	0	1000
257046	PA103101	02	01	6000	1000	8000	4000	3000	0	0	6000
041091	PA900001	02	01	8000	1000	9000	5000	4000	0	0	7000
			TOTALS	480000	73000	724000	300000	253000	146000	0	127000

SUBSTANCE ABUSE ENTITY INVENTORY

State: PENNSYLVANIA

SCA: YORK/ADAMS

FY 1990 AWARD

1. Number	2. NDATUS ID	3. Area Served	4. Use of Funds	5. ADMS Block Grant FFY 90	5. ADMS Block Grant FFY 91	6. State Funds	7. ADMS Block Grant Funds for alcohol services	8. ADMS Block Grant Funds for drug abuse services	9. ADMS Block Grant Funds for Prevention	10. ADMS Block Grant Funds for IVDU service	11. ADMS Block Grant Funds for women service
012044	PA905299	03	01	143243	22547	118041	85209	80581	0	0	0
012044	PA905299	03	04	57283	9017	15566	24280	42020	56300	0	0
671084	PA905612	03	01	210239	33093	141684	128616	114716	0	0	0
671084	PA905612	03	04	0	0	62805	0	0	0	0	0
671120	PA907558	03	01	37749	5942	28309	32316	11375	0	0	0
671120	PA907558	03	04	26628	4192	37395	24280	6540	30820	0	0
677042	PA103010	03	01	47122	7417	10771	34503	20036	0	0	0
217030	PA101709	03	01	36888	5806	49500	0	42694	0	0	0
017027	PA303487	03	04	0	0	28608	0	0	0	0	0
017032	PA100786	03	01	0	0	5460	0	0	0	0	0
671074	PA304485	03	01	0	0	19628	0	0	0	0	0
			TOTALS	559152	88014	517767	329204	317962	87120	0	0

LIST OF ENTITIES
WITH NO NDATUS NUMBERS

SCA: Allegheny

#257027
Community House Inc.
550 West Seventh St.
Erie, PA 16502

#707135
Turtle Creek Valley MH/MR
120 East Ninth St.
Homestead, PA 15120

#707144
Lakin Institute
353 Dixon Ave.
North Versailles, PA 15137

#707137
The Whale's Tale
12013 Frankstown Rd.
Pittsburgh, PA 15235

#707164
Gateway Monroeville
4280 Northern Pike
Monroeville, PA 15146

#707138
Steel Valley High MH/MR Alternatives
3409 Main St.
Munhall, PA 15120

SCA: Armstrong/Indiana

#037011
Ministries of Eden Christian Counseling Ctr.
219 North McKean St.
Kittanning, PA 15201

SCA: Bedford

#057003
Bedford County D&A Program
211 South Julianna St.
Bedford, PA 15522

#057005
The Encouragement Place
540 West Pitt St.
Bedford, PA 15522

SCA: Berks

#061114
Drug Treatment Program of Reading
112 Reed St.
Reading, PA 19601

#367040
Francis Center
53-55 North West End Ave.
Lancaster, PA 17603

#417008
White Deer Detox
Divine Providence Hospital
1100 Grampian Blvd.
Williamsport, PA 17701

#367022
ARC, The Terraces
1170 South State St.
Ephrata, PA 17552

#467038
Family House
901 DeKalb St.
Norristown, PA 19401

#092104
Today Inc.
P.O. Box 908
Woodburn & Ellis Rd.
Newtown, PA 18940

SCA: Bradford/Sullivan

#367045
Gatehouse for Women
P.O. Box 403
465 West Main St.
Mountville, PA 17554

SCA: Carbon/Monroe/Pike

#647008
The White House Ltd.
P.O. Box 70
Lake Ariel, PA 18436

#457018
Woodhaven in the Poconos
P.O. Box 109
Route 611
Swiftwater, PA 18370

SCA: Cumberland/Perry

#097039
Renewal Centers Inc.
121 S. 11th St.
P.O. Box 597
Quakertown, PA 18951

#217038
Centre Psychiatric Associates
220 Wilson St.
Suite 212
Carlisle, PA 17013

SCA: Delaware

#234104
CCMC CHS Methadone Program
733 W. 9th St.
Chester, PA 19013

#234096
CCMC CHS Outpatinet Services
1 East 9th St.
Chester, PA 19013

SCA: Lackawanna

#647008
The White House Ltd.
P.O. Box 70
Lake Ariel, PA 18436

SCA: Lancaster

#367045
Gatehouse for Women
P.O. Box 403
465 West Main St.
Mountville, PA 17554

SCA: Lawrence

#047033
Tom Rutter House
Moffett Run Road
Aliquippa, PA 15001

SCA: Lebanon

#097039
Renewal Centers Inc.
121 S. 11th St.
P.O. Box 597
Quakertown, PA 18951

SCA: Lehigh

#397029
Family House Allentown
112 N. 9th St.
Allentown, PA 18105

SCA: Northampton

#456017
Resources for Recovering Families
HCR #1, Box 25A
Mt. Pocono, PA 18344

SCA: Philadelphia

#807234
Gaudenzia Centro Primavera
2927 N. 5th St.
Philadelphia, PA 19133

SCA: Washington/Greene

#637016
Freedom Monongahela
1290 Chess St.
Monongahela, PA 15063

5. TREATMENT UTILIZATION MATRIX

(FORM 07)

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: ALLEGHENY

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	45	30		27	21		33	24			
2. Free-standing residential	51	44		46	39		49	44			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	1373	276		109	79		187	113			
4. Short-term (up to 30 days)	61	57		62	54		60	54			
5. Long-term (over 30 days)	83	68		252	188		216	165			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	3004	2270		2535	1744		3363	2383			
A. Methadone	0	0		878	521		704	434			
B. Non-methadone	3004	2270		1657	1223		2659	1949			
7. Intensive outpatient	148	107		167	110		220	151			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: ARMSTRONG INDIANA

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
DETOXIFICATION (24 HOUR CARE)											
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short term (up to 30 days)	116	74		41	30		90	58			
5. Long term (over 30 days)	0	0		0	0		0	0			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	483	314		83	51		231	140			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	483	314		83	51		231	140			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: BEAVER

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE | 2. Alcohol Problems | 3. Drug Problems | 4. Substance Abuse Problems | 5. State-validated count

DETOXIFICATION (24-HOUR CARE)	2. A. Number of admissions	2. B. Number of first-time admissions	2. C. Average cost per admission	3. A. Number of admissions	3. B. Number of first-time admissions	3. C. Average cost per admission	4. A. Number of admissions	4. B. Number of first-time admissions	4. C. Average cost per admission	5. Yes	5. No
1. Hospital inpatient	103	68		43	30		48	31			
2. Free-standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short-term (up to 30 days)	130	99		131	99		193	141			
5. Long-term (over 30 days)	12	5		20	10		25	12			

REHABILITATION/AMBULATORY	2. A. Number of people served	2. B. Number of first-time admissions	2. C. Average cost per person	3. A. Number of people served	3. B. Number of first-time admissions	3. C. Average cost per person	4. A. Number of people served	4. B. Number of first-time admissions	4. C. Average cost per person	5. Yes	5. No
6. Outpatient	1051	637		279	126		621	286			
A. Methadone	0	0		0	0		0	0			
B. Non-methadone	1051	637		279	126		621	286			
7. Intensive outpatient	21	6		9	0		26	4			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: BERKS

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24 HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	984	829		280	230		727	610			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	368	288		381	272		484	367			
4. Short term (up to 30 days)	632	431		331	225		519	331			
5. Long term (over 30 days)	23	23		25	25		47	47			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	1350	1152		730	588		1230	1003			
A. Methadone	0	0		116	91		64	57			
B. Non methadone	1350	1152		614	497		1166	946			
7. Intensive outpatient	454	357		286	205		501	374			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: BLAIR

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24 HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	83	55		13	9		33	19			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short term (up to 30 days)	0	0		0	0		0	0			
5. Long term (over 30 days)	196	143		128	88		182	126			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	508	383		102	81		270	193			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	508	383		102	81		270	193			
7. Intensive outpatient	109	95		46	41		61	55			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: BRADFORD SULLIVAN

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short term (up to 30 days)	0	0		0	0		0	0			
5. Long term (over 30 days)	0	0		0	0		0	0			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	169	145		37	31		120	100			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	169	145		37	31		120	100			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: BUCKS

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24 HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	264	97		111	48		115	50			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	24	19		32	29		23	23			
4. Short term (up to 30 days)	385	313		88	70		204	161			
5 Long term (over 30 days)	533	411		472	342		667	492			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	532	430		324	252		566	448			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	532	430		324	252		566	448			
7. Intensive outpatient	75	58		69	55		122	94			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: BUTLER

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24 HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	201	160		116	102		174	147			
2. Free standing residential	4	2		5	2		6	2			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short term (up to 30 days)	0	0		0	0		0	0			
5. Long term (over 30 days)	40	37		41	40		50	48			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	350	235		114	80		203	134			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	350	235		114	80		203	134			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: CAMBRIA

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24 HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	106	64		20	17		32	25			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short term (up to 30 days)	78	54		19	13		41	30			
5. Long term (over 30 days)	13	11		8	6		19	15			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	123	90		16	10		47	30			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	123	90		16	10		47	30			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: CAMERON ELK MCKEAN

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24 HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	23	13		1	1		8	4			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short term (up to 30 days)	88	66		14	12		48	36			
5. Long term (over 30 days)	0	0		0	0		0	0			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	416	281		66	40		192	102			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	416	281		66	40		192	102			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: CARBON, MONROE, PIKE

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free-standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	4	3		1	1		2	1			
4. Short-term (up to 30 days)	292	270		228	206		318	295			
5. Long-term (over 30 days)	188	187		14	14		176	175			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	312	243		125	97		223	168			
A. Methadone	0	0		0	0		0	0			
B. Non-methadone	312	243		125	97		223	168			
7. Intensive outpatient	6	6		1	1		2	2			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: CENTRE

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	32	25		4	4		1	1			
4. Short term (up to 30 days)	102	86		43	37		46	38			
5. Long term (over 30 days)	0	0		0	0		0	0			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	527	376		64	40		286	173			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	527	376		64	40		286	173			
7. Intensive outpatient	76	37		20	11		63	29			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: CHESTER

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24 HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital Inpatient	27	21		0	0		5	4			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital Inpatient	321	298		60	58		207	196			
4. Short term (up to 30 days)	4	4		0	0		3	3			
5 Long term (over 30 days)	65	64		268	236		294	264			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	1928	1580		729	506		1058	771			
A Methadone	0	0		0	0		0	0			
B. Non methadone	1928	1580		729	506		1058	771			
7. Intensive outpatient	99	81		97	71		129	99			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: CLARION

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short term (up to 30 days)	0	0		0	0		0	0			
5. Long term (over 30 days)	0	0		0	0		0	0			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	97	72		19	16		43	32			
A Methadone	0	0		0	0		0	0			
B. Non methadone	97	72		19	16		43	32			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: CLEARFIELD JEFFERSON

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short term (up to 30 days)	0	0		0	0		0	0			
5. Long term (over 30 days)	34	30		23	22		40	37			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	555	372		99	66		227	147			
A Methadone	0	0		0	0		0	0			
B. Non methadone	555	372		99	66		227	147			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: COLUMBIA MONTOUR SNYDER

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24 HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	375	352		412	372		91	87			
4. Short term (up to 30 days)	0	0		0	0		0	0			
5. Long term (over 30 days)	5	4		4	4		7	7			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	290	200		56	45		146	105			
A Methadone	0	0		0	0		0	0			
B. Non methadone	290	200		56	45		146	105			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: CRAWFORD

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24 HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short term (up to 30 days)	0	0		0	0		0	0			
5. Long term (over 30 days)	0	0		0	0		0	0			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	522	333		112	77		251	178			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	522	333		112	77		251	178			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: CUMBERLAND PERRY

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	386	235		118	88		121	91			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short term (up to 30 days)	0	0		0	0		0	0			
5. Long term (over 30 days)	0	0		0	0		0	0			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	500	410		151	127		381	308			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	500	410		151	127		381	308			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: DAUPHIN

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	286	196		121	82		246	166			
4. Short term (up to 30 days)	132	120		136	121		156	143			
5. Long term (over 30 days)	72	41		127	67		176	92			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	265	214		238	171		415	316			
A. Methadone	0	0		25	9		21	7			
B. Non methadone	265	214		213	162		394	309			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area DELAWARE

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short term (up to 30 days)	95	81		107	90		142	119			
5. Long term (over 30 days)	54	48		42	38		87	77			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	1347	1060		936	544		1118	720			
A Methadone	0	0		165	49		86	22			
B. Non methadone	1347	1060		771	495		1032	698			
7. Intensive outpatient	100	41		135	59		153	61			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: ERIE

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	341	156		119	79		212	113			
4. Short term (up to 30 days)	16	11		3	3		7	7			
5. Long term (over 30 days)	70	54		69	57		36	31			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	806	668		294	257		611	513			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	806	668		294	257		611	513			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: FAYETTE

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24 HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short term (up to 30 days)	0	0		0	0		0	0			
5. Long term (over 30 days)	0	0		0	0		0	0			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	246	190		78	58		145	112			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	246	190		78	58		145	112			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: FRANKLIN FULTON

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	2	0		0	0		0	0			
4. Short term (up to 30 days)	26	15		3	3		8	6			
5. Long term (over 30 days)	0	0		0	0		0	0			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	209	170		55	45		152	126			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	209	170		55	45		152	126			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: HUNTINGDON JUNIATA

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short term (up to 30 days)	0	0		0	0		0	0			
5. Long term (over 30 days)	1	1		0	0		1	1			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	303	222		61	52		139	106			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	303	222		61	52		139	106			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: LACKAWANNA

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free-standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short-term (up to 30 days)	0	0		0	0		0	0			
5. Long-term (over 30 days)	2	2		0	0		2	2			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	474	385		223	190		325	269			
A. Methadone	0	0		0	0		0	0			
B. Non-methadone	474	385		223	190		325	269			
7. Intensive outpatient	16	14		2	1		12	9			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: LANCASTER

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free-standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short-term (up to 30 days)	10	10		4	3		13	12			
5. Long-term (over 30 days)	73	67		72	67		120	114			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	354	321		223	196		300	264			
A. Methadone	0	0		0	0		0	0			
B. Non-methadone	354	321		223	196		300	264			
7. Intensive outpatient	4	4		10	9		11	10			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: LAWRENCE

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24 HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short term (up to 30 days)	0	0		0	0		0	0			
5. Long term (over 30 days)	0	0		0	0		0	0			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	316	227		70	51		172	125			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	316	227		70	51		172	125			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: LEBANON

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24 HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short term (up to 30 days)	34	24		12	5		40	25			
5. Long term (over 30 days)	0	0		0	0		0	0			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	246	219		71	54		192	162			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	246	219		71	54		192	162			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: LEHIGH

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	435	222		414	190		474	226			
2. Free-standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short-term (up to 30 days)	0	0		0	0		0	0			
5. Long-term (over 30 days)	193	174		161	121		314	257			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	403	329		672	517		701	555			
A. Methadone	0	0		219	144		90	65			
B. Non-methadone	403	329		453	373		611	490			
7. Intensive outpatient	171	168		54	50		100	96			
8. Detoxification	0	0		9	8		6	6			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: LUZERNE WYOMING

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free-standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	428	346		166	138		250	208			
4. Short-term (up to 30 days)	170	161		67	63		119	111			
5. Long-term (over 30 days)	155	128		110	87		213	173			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	985	804		299	249		582	469			
A. Methadone	0	0		0	0		0	0			
B. Non-methadone	985	804		299	249		582	469			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area LYCOMING CLINTON

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24 HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short term (up to 30 days)	0	0		0	0		0	0			
5. Long term (over 30 days)	0	0		0	0		0	0			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	552	381		615	453		774	559			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	552	381		615	453		774	559			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: MERCER

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	35	26		14	14		25	21			
2. Free-standing residential	158	142		94	85		122	106			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short-term (up to 30 days)	0	0		0	0		0	0			
5. Long-term (over 30 days)	0	0		0	0		0	0			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	632	442		156	108		322	210			
A. Methadone	0	0		0	0		0	0			
B. Non-methadone	632	442		156	108		322	210			
7. Intensive outpatient	72	58		20	16		42	35			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: MONTGOMERY

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24 HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	408	307		406	263		579	387			
2. Free standing residential	315	278		930	765		944	790			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short term (up to 30 days)	0	0		0	0		0	0			
5. Long term (over 30 days)	121	116		186	181		253	244			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	568	473		494	321		551	415			
A. Methadone	0	0		171	79		52	22			
B. Non methadone	568	473		323	242		499	393			
7. Intensive outpatient	1	0		0	0		0	0			
8. Detoxification	0	0		4	3		1	1			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: NORTHAMPTON

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24 HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	71	57		39	36		66	60			
4. Short term (up to 30 days)	1	1		1	1		2	2			
5. Long term (over 30 days)	10	9		81	58		85	64			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	386	311		286	232		505	400			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	386	311		286	232		505	400			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: NORTHUMBERLAND

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short term (up to 30 days)	0	0		0	0		0	0			
5. Long term (over 30 days)	0	0		0	0		0	0			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	597	404		203	150		416	287			
A Methadone	0	0		0	0		0	0			
B. Non methadone	597	404		203	150		416	287			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: PHILADELPHIA

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE | 2. Alcohol Problems | 3. Drug Problems | 4. Substance Abuse Problems | 5. State-validated count

DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	635	424		1634	984		1332	783			
2. Free-standing residential	94	14		412	58		391	61			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	480	284		2785	1753		2460	1515			
4. Short-term (up to 30 days)	195	177		452	413		480	452			
5. Long-term (over 30 days)	190	177		925	857		758	703			

REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	2995	2438		10420	8205		8105	6414			
A. Methadone	0	0		3185	2226		1466	1001			
B. Non methadone	2995	2438		7235	5979		6639	5413			
7. Intensive outpatient	25	16		201	135		121	73			
8. Detoxification	0	0		1	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: SCHUYKILL

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	179	105		48	35		91	57			
4. Short term (up to 30 days)	9	7		4	4		8	7			
5. Long term (over 30 days)	1	1		0	0		1	1			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	754	590		82	58		349	251			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	754	590		82	58		349	251			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: SOMERSET

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24 HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	179	137		76	65		101	82			
4. Short term (up to 30 days)	0	0		0	0		0	0			
5. Long term (over 30 days)	0	0		0	0		0	0			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	186	94		23	8		66	29			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	186	94		23	8		66	29			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: SUSQUEHANNA WAYNE

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24 HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	38	37		17	16		33	32			
4. Short term (up to 30 days)	0	0		0	0		0	0			
5. Long term (over 30 days)	34	33		34	33		54	54			

REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	142	115		43	38		131	108			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	142	115		43	38		131	108			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: WASHINGTON GREENE

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24 HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short term (up to 30 days)	1	1		0	0		1	1			
5. Long term (over 30 days)	0	0		0	0		0	0			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	785	619		212	153		498	371			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	785	619		212	153		498	371			
7. Intensive outpatient	0	0		2	2		2	2			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: MERCER

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	35	26		14	14		25	21			
2. Free-standing residential	158	142		94	85		122	106			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short-term (up to 30 days)	0	0		0	0		0	0			
5. Long-term (over 30 days)	0	0		0	0		0	0			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	632	442		156	108		322	210			
A. Methadone	0	0		0	0		0	0			
B. Non-methadone	632	442		156	108		322	210			
7. Intensive outpatient	72	58		20	16		42	35			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: WESTMORELAND

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free-standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short-term (up to 30 days)	12	9		7	5		11	8			
5. Long-term (over 30 days)	0	0		0	0		0	0			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	705	529		216	158		447	325			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	705	529		216	158		447	325			
7. Intensive outpatient	54	36		29	25		60	46			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: YORK ADAMS

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	184	135		112	82		138	105			
2. Free-standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short-term (up to 30 days)	44	44		35	35		49	49			
5. Long-term (over 30 days)	55	54		65	65		85	85			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	1492	1177		533	386		1051	782			
A. Methadone	0	0		18	13		16	12			
B. Non methadone	1492	1177		515	373		1035	770			
7. Intensive outpatient	119	84		52	42		116	88			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: FOREST WARREN

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24 HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short term (up to 30 days)	0	0		0	0		0	0			
5. Long term (over 30 days)	122	111		125	112		31	28			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	148	110		50	41		126	98			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	148	110		50	41		126	98			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: VENANGO

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24 HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short term (up to 30 days)	163	138		53	45		100	87			
5. Long term (over 30 days)	0	0		0	0		0	0			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	292	217		40	24		124	77			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	292	217		40	24		124	77			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: TIOGA

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24 HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	25	23		4	4		12	12			
4. Short term (up to 30 days)	425	383		98	81		282	244			
5. Long term (over 30 days)	0	0		0	0		0	0			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	105	82		17	12		54	40			
A Methadone	0	0		0	0		0	0			
B. Non methadone	105	82		17	12		54	40			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA

Substate planning area: BEDFORD

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	0	0		0	0		0	0			
2. Free standing residential	0	0		0	0		0	0			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	0	0		0	0		0	0			
4. Short term (up to 30 days)	0	0		0	0		0	0			
5. Long term (over 30 days)	0	0		0	0		0	0			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	197	171		27	23		33	27			
A. Methadone	0	0		0	0		0	0			
B. Non methadone	197	171		27	23		33	27			
7. Intensive outpatient	0	0		0	0		0	0			
8. Detoxification	0	0		0	0		0	0			

TREATMENT UTILIZATION MATRIX

State: PENNSYLVANIA (TOTAL)

Substate planning area:

Dates of State expenditure period: from JULY 1, 1990 to JUNE 30, 1991

UTILIZATION

1. TYPE OF CARE	2. Alcohol Problems			3. Drug Problems			4. Substance Abuse Problems			5. State-validated count	
DETOXIFICATION (24-HOUR CARE)	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	A. Number of admissions	B. Number of first-time admissions	C. Average cost per admission	Yes	No
1. Hospital inpatient	3919	2686		3309	2079		3844	2527			
2. Free-standing residential	622	480		1487	949		1512	1003			
REHABILITATION/RESIDENTIAL											
3. Hospital inpatient	4526	2602		4374	3023		4466	3033			
4. Short-term (up to 30 days)	3221	2636		1939	1618		2940	2420			
5. Long-term (over 30 days)	2345	1999		3252	2718		3939	3314			
REHABILITATION/AMBULATORY	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	A. Number of people served	B. Number of first-time admissions	C. Average cost per person	Yes	No
6. Outpatient	29207	22485		22278	16726		27862	20831			
A. Methadone	0	0		4777	3132		2499	1620			
B. Non methadone	29207	22485		17501	13594		25363	19211			
7. Intensive outpatient	1550	1168		1200	833		1741	1228			
8. Detoxification	0	0		14	11		7	7			

SECTION III
INTENDED USE OF FFY 1993 SAPT SUBSTANCE ABUSE BLOCK GRANT FUNDS

1. How allotments will be used

This is similar to the first item of Section II, except that there are now separate block grants for substance abuse and for mental health. It documents any plans the State might have to transfer funds between these two block grants. Complete the following checklist:

Does the State plan to make any transfers between FFY 1993 substance abuse and mental health block grants?

☐ Yes

☒ No

If yes, indicate the type of transfer and the amount, and briefly explain why the transfer will be made.

☐ Substance abuse to mental health $_____

☐ Mental health to substance abuse $_____

2. GOALS, OBJECTIVES, AND ACTIVITIES

SAPT Requirements

Requirement A: To identify those populations, areas and localities in the state with greatest need for AODA abuse services and to target programs, services and resources in accordance with public input into the proposed use and distribution of block grant alcohol and drug abuse funds.

Overview: The Department of Health, in administering the drug and alcohol portion of the SAPT Block Grant, allocates state and federal funds to 47 SCAs, the county government administrative agencies. The allocation amounts are based on population, competitive awards and other factors. SCAs expend federal and state funds according to approved, locally developed plans which are in turn converted to contracts. The SCAs sub-contract for services with the providers in accordance with both their county service plan and the rules and regulations of the Department.

The Pennsylvania Department of Health is the lead state agency responsible for the overall administration of the Federal Substance Abuse Prevention and Treatment Block Grant.

The Department is also responsible for the delivery of AODA services through ODAP.

Each year, the Commonwealth applies to the Substance Abuse and Mental Health Services Administration (SAMHSA) for block grant funding which is awarded to the states by a formula based primarily on population. The block grant funds are used for AODA programs at the state and local levels and to fund administration at the state level.

The Public Health Services Act (Public Law 102-321 of 1992) places the following minimum requirements on the use of each fiscal years block grant award for AODA programs and activities:

- 35% for alcoholism and alcohol abuse.
- 35% for drug abuse.
- 20% of the amount to be used for alcohol and drug abuse for prevention and early intervention programs that discourage the abuse of alcohol or drugs, or both.
- 5% of the grant to increase (relative to FFY 1992) the availability of treatment services designed for pregnant women and women with dependent children.
- HIV and tuberculosis services.

To assist ODAP in allocating, tracking, reporting, and accounting for the 35% minimums for alcohol and for drugs, the General Assembly makes separate appropriations of the block grant funds for drugs and for alcohol. Appropriation #793 is the appropriation for alcohol and appropriation #794 is the appropriation for drugs. These appropriation numbers appear throughout various budget and expenditure documents used by ODAP and the SCAs.

To assure that block grant funds will be expended "only for the purpose of planning, carrying out and evaluating activities to prevent and treat substance abuse and for related activities" as authorized, ODAP allocates specific amounts of appropriated funds to SCAs for drug and alcohol prevention/intervention and treatment. The allocated amounts are based on population, competitive awards and other factors and are also calculated to meet the block grant requirements. The established amounts for drug, alcohol and prevention services are reflected in the SCA funding agreement and the 34 budget form.

ODAP monitors budget and expenditure reports. The SCAs are surveyed annually by ODAP to assure the targeted amounts such as women's services are being met and that maintenance of effort regarding state expenditures meets federal requirements.

Restrictions on the expenditures of SAPT block grant funds are passed on to the SCA sub-recipients in their contracts and specify that the funds will not be expended, to provide inpatient hospital services, except as provided in subsection(b); to make cash payments to intended recipients of health services; to purchase or improve land, construct or permanently improve (other than minor remodeling) any building or other facility, or purchase major medical equipment; to satisfy any requirement for the expenditure of non-federal funds as a condition for the receipt of federal funds; to provide financial assistance to any entity other than a public or non-profit private entity; to carry out any programs prohibited by section 256(b) of the Health Omnibus Programs Extension of 1988 (42 U.S.C. 300ee-5); will not expend more than five percent of the grant to pay the cost of administering the grant; and will not expend more than an amount equal to the amount expended for penal and correctional institutions from the grant made under section 1912A to the State for fiscal year 1992.

States receiving SAPT block grant funds must have in place a statute providing that it is unlawful for any manufacturer, retailer or distributor of tobacco products to sell or distribute such products to any individual under the age of 18. Since ODAP is not an enforcement agency, we will alert the affected parties such as the State Police and local enforcement authorities of the importance of enforcing these statutes. We will study the feasibility of conducting training sessions with Department of Health staff, state and local police directed towards educating the merchants associations of the dangers of AODA including, tobacco.

The Federal Annual Report requirement has been incorporated into the SAPT block grant application, Reports and Audits are made available to the public in compliance with Chapter 75 of Title 31.

The Office of Drug and Alcohol Programs assures that not fewer than 5 percent of the entities providing services are reviewed to identify quality and appropriateness of care problems and corrective actions or opportunities for improvement. Licensing is required of all drug and alcohol service providers in Pennsylvania. This is done annually by state staff from the Division of Licensing. The Division of Program Monitoring conducts reviews of each of the 47 SCAs on an annual basis. The SCAs in turn, monitor each of their contracted service providers, twice a year.

Prohibitions Regarding Receipt of Funds, Section 1946, (false statements and representations and concealing or failing to disclose certain events), will be incorporated into the SCA sub-recipient contract.

A non-discrimination clause is also incorporated into the SCA sub-recipient contact. This provision is implemented by the Department's Office of Equal Opportunity and the Bureau of Personnel at the State level.

ODAP GOAL: TO ESTABLISH AND MAINTAIN A COST-EFFECTIVE SYSTEM OF DRUG AND ALCOHOL SERVICES TO MEET THE NEEDS OF PENNSYLVANIA'S DIVERSE POPULATION

ODAP Objective: To develop and issue county plan guidelines to incorporate the local planning process with state initiatives.

Action Steps:

- Establish a planning cycle.
- Develop county plan guidelines and instructions for updating them.
- Develop a county plan review procedure.
- Coordinate the county plan reviews among ODAP offices.

Requirement B: To discourage the abuse of alcohol and drugs by providing funding for prevention and early intervention programs.

Overview: Prevention activities provide a comprehensive and coordinated system of education and supportive services which reduce the incidence and affects of drug and alcohol abuse among the state's population. The goal of prevention is to assist individuals in developing and improving skills that will enable them to choose a lifestyle free of substance abuse. This is accomplished through educational awareness activities, workshops, media presentations, and information materials disseminated through a state clearinghouse operation. A 1990 survey of prevention providers conducted by ODAP revealed an unequivocal need for comprehensive

community prevention training that could be targeted to professionals and grass-roots providers statewide. "Celebration of Visions Through Commitment", a two-day community development training workshop, was developed by ODAP in concert with The Circle, Inc., to enhance prevention skills for mobilizing community prevention activities in the Commonwealth. A Training of Trainers (TOT) five-day workshop is being developed to establish a cadre of trainers who will be capable of providing the "Celebration of Visions Through Commitment" training workshops at local levels throughout the Commonwealth.

Pennsylvania youth receive educational and intervention services through age appropriate drug and alcohol curricula education specifically targeted to discourage the use of alcohol, tobacco and controlled substances among youth. Pennsylvania's Act 211 of 1990 mandates that each public school student shall receive mandatory instruction in the prevention of alcohol, chemical and tobacco abuse in every year and in every grade from kindergarten through grade twelve. The Pennsylvania Department of Education, in partnership with the Pennsylvania Department of Health, in-serviced all 501 school districts and providers of drug and alcohol education based on the requirements of the law and its recommendations to expand prevention education into the home and community. In-service training programs shall be provided annually to all public school districts and intermediate units in which non-public schools are located to instruct teachers in providing effective courses of study in which mandated instructions for alcohol, chemical and tobacco abuse are required.

The provisions of Act 211 require the Department of Health to provide information about appropriate curricula materials to school districts upon request. Local school districts must consult with the SCAs designated by the Pennsylvania Department of Health in the selection and development of curricula to be used in the instruction of alcohol, chemical and tobacco abuse.

Curriculum studies are designed to teach students the harmful effects of drugs, the importance of developing and using refusal skills, and to build self esteem to promote healthy drug free life-styles.

Violence has become a major health concern in the United States. Pennsylvania's health system will be addressing this issue through the creation of violence prevention programs. The focus of the program is the prevention of injury resulting from intentional violent acts, such as homicides, assaults, suicides, and abuse of elderly. Young adult males between the ages of 15 and 30 who live in the high risk inner city communities and who are impacted upon as results of individual or group acts of violence will be the targeted recipients of programming. Particular efforts will be toward the development of prevention strategies which address the needs of victims, with emphasis on the minority male, who has the highest homicide mortality rate.

ODAP GOAL: TO ENSURE THAT A FULL RANGE OF QUALITY DRUG AND ALCOHOL PREVENTION, INTERVENTION AND TREATMENT SERVICES ARE AVAILABLE TO ALL PENNSYLVANIA RESIDENTS REGARDLESS OF THE INDIVIDUAL'S ABILITY TO PAY.

Community Prevention

ODAP Objective: Provide leadership, direction and funding to SCAs and local drug and alcohol providers in using SAPT Block Grant funds to support comprehensive prevention services in the community.

Action Steps:

- Develop and disseminate annual directives and guidelines governing the use of SAPT Block Grant funds allocated to SCAs and provider agencies in the Commonwealth.
- Analyze and evaluate bi-annual reporting of prevention activities to ensure compliance with federal and state guidelines.
- Conduct on-site visits of programs funded with SAPT Block Grant funds.

ODAP Objective: To facilitate and support retreat(s) for the Office for Substance Abuse Prevention (OSAP) grantees to come together for workshops and showcasing of their community prevention programs.

Action Steps:

- Solicit input regarding their needs.
- Coordinate logistics.
- Secure OSAP funds for the purpose of retreats.

ODAP Objective: To include violence prevention strategies in all prevention activities statewide.

Action Steps:

- Form a statewide task force to plan violence prevention strategies.
- Survey the Commonwealth for existing strategies.
- Educate, train and empower communities in violence prevention.
- Include violence prevention education in the school curriculum for Grades K through 12.

ODAP Objective: To provide technical assistance to grass roots/community organizations on community mobilization and empowerment based on Visions model.

Action Steps:

- Survey grass roots/community organizations to determine their needs.
- Assist grass roots/community organizations in applying for technical assistance.

ODAP Objective: To expand prevention services by encouraging the participation of new providers at the local level.

Action Step:

- Authorize SCAs to expend state and federal dollars up to a maximum of ten thousand dollars per provider per state fiscal year for prevention activities not currently approved by ODAP's project approval process.
- This arrangement can continue for two years and at the end of this time period the provider shall have obtained ODAP's approval for provision of prevention activities or funding shall cease.
- ODAP will form an ad hoc committee to consider other funding arrangements such as SCA funding discretion for projects under $5,000.

ODAP Objective: To maintain comprehensive prevention training statewide utilizing the "Celebration of Visions Through Commitment" community development model to re-energize and enhance the skills of providers in the Commonwealth.

Action Steps:

- Continue training workshops regionally to involve greater participation of individuals and communities in prevention.
- Conduct five-day Training of Trainers workshops to expand the number of qualified trainers in training community organizations and providers at the local levels.

ODAP Objective: To provide leadership in developing and strengthening community based parent education for the prevention of alcohol and other drug abuse in the Commonwealth.

Action Steps:

- Publish an instructional parenting education idea manual, "Your Guide to Powerful Parenting", that encourages parents to work together in developing successful parenting education programs throughout the Commonwealth.
- Utilize parenting work groups and grass roots organizations throughout the state to implement and support this effort in the community.

School Based Prevention

ODAP Objective: Continue to provide leadership in the interagency workings and refinement of the statewide Pennsylvania Student Assistance Program (SAP).

Action Steps:

- Monitor and provide technical assistance to the SAP system to ensure effective functioning and efficient utilization of drug and alcohol funds.
- Revise SAP data collection forms and develop a database to monitor the system.
- Develop a revised SAP funding formula to reflect the needs of the high risk drug and alcohol population.
- Provide technical assistance and monitor the integration of elementary SAP, with the Instructional Support Teams in elementary schools.
- As part of an Interagency Committee, participate in developing minimum standards for SAP training and technical assistance.

ODAP Objective: To enhance the scope and quality of drug and alcohol education provided to students in Grades K-12 throughout the Commonwealth.

Action Steps:

- Conduct regional forums to solicit input from educators and community drug and alcohol providers in developing annual in-service training mandated by Act 211 for all teachers in grades K-12.
- Provide on-going direction and technical assistance to the Pennsylvania Department of Education (PDE) and local drug and alcohol providers in formulating educational strategies involving parents, law enforcement and community agencies and businesses.

- Provide direction to PDE in monitoring and evaluating educational services to ensure compliance with federal Drug Free Schools and Communities guidelines and with state Act 211 mandates.
- Research and develop information on curricula that is developmentally and culturally appropriate for students in grades K-12 (mandated by state Act 211) for distribution to school districts upon request.
- Maintain positions and provide updated training for staff of local drug and alcohol provider agencies that are responsible to train school districts and educators in curricula for the prevention of alcohol and other drugs.

Requirement C: Assess and improve the quality and appropriateness of treatment and prevention services delivered by providers who receive funds from the Alcohol and Drug Abuse component of the block grant.

ODAP GOAL: TO ESTABLISH AND MAINTAIN A COST-EFFECTIVE SYSTEM OF DRUG AND ALCOHOL SERVICES WHICH MEET THE NEEDS OF PENNSYLVANIA'S DIVERSE POPULATION.

Overview: ODAP has coordinated the development of proposed staffing requirements establishing minimal experiential, educational and training requirements for project directors, clinical supervisors, counselors and counselor assistants working in licensed substance abuse treatment programs.

The proposed regulations have been reviewed extensively by SCAs, drug and alcohol service providers, and other interested parties. The proposed regulations reflect changes made from those reviews.

To insure that publicly funded clients receive the treatment most appropriate to the type and level of severity of their substance abuse problem, ODAP has also developed and implemented a model targeted case management program in pilot counties. This is helping to insure the most efficient use of resources by more precisely assessing the type and level of severity of the client's substance abuse problem and using the results of that assessment to guide the placement of the client into the most appropriate treatment setting.

The correctional system inmate population in Pennsylvania continues to grow, with estimates that up to 88% of the inmates have used drugs and up to 53% were under the influence of drugs and/or alcohol at the time of their current offense. ODAP will continue to provide funding for treatment staff and licensed treatment activities in all state correctional institutions.

Juveniles who have substance abuse problems and are placed in the youth detention centers and private institutions for delinquents in Pennsylvania are being screened and identified and arrangements will be made for re-entry into the community following their release.

Treatment Alternatives to Street Crime (TASC) programs are mandated to provide services to both the state and county offender. TASC is designed to be the catalyst between the Criminal Justice agencies and the treatment agencies. In selected counties, TASC, with the aid of the Criminal Justice agencies, identifies, assesses and refers eligible clients for appropriate treatment and monitors their progress.

ODAP Objective: Develop and implement staffing requirements for treatment personnel working in the substance abuse field.

Action Steps:

- Coordinate the publishing of staffing regulations as proposed for public comments.
- Collect and analyze comments received during a thirty to sixty day comment period.
- Amend regulations based on comments received and publish as final.
- Add staffing requirements to existing licensing regulations and implement in the licensing process.
- Expand the ODAP training system to insure training designed to assist treatment personnel to meet staffing standard requirements.

ODAP Objectives: To provide entry-level counselor training in direct care functions to individuals seeking careers as certified addiction counselors for job placement in licensed treatment facilities. Priority in selection of trainees will be given to persons from minorities and special populations, and to persons within the substance abuse treatment system who do not yet have credentials.

Action Steps:

- Increase skills in practicing entry-level AODA counselors by providing training to help them meet requirements for certification.
- Provide between 70 and 100 internship opportunities to minority and special populations.
- Participate in outreach and provide for local recruitment activities emphasizing outreach to minority and special populations who are not yet certified.
- Develop an enrollee registration system that will match substance abuse counselor training courses with trainee needs and current skill levels.
- Design an evaluation instrument that will assess the level of knowledge and/or skills gained by the trainees.

ODAP Objective: To expand use of the case management model in three new SCAs, plus all of Philadelphia and Allegheny Counties, using standard screening procedures to target high-risk populations for case management services.

Action Steps:

- Assist new SCAs in the implementation of the case management project.
- Evaluate the case management model for effectiveness of coordination of service and client progress.

ODAP Objective: Target programs that have developed an effective treatment model with specific populations. These models will be used for replication in other areas of the State.

Action Steps:

- Review client data statewide to determine which programs have high completion rates.
- Prepare an analysis of areas having highest percentages of minorities and target prevention and treatment efforts related to minorities. Efforts include the formulation of bilingual/bicultural services.
- Target providers with poor treatment completion rates for further review and make technical assistance available.

ODAP Objective: Provide screening, assessment, referral, and treatment services to the adult and juvenile criminal justice clients with substance abuse histories.

Overview: Over the past few years, considerable agreement has developed among clinicians, in general terms, on the client characteristics which should be considered in the choice between levels of treatment of greater or lesser intensity of services, and correspondingly greater or lesser cost. Several assessment instruments have been developed, and to some extent tested for validity and reliability in specific settings. Some correlations have been found between degree and type of impairment at intake, level of service, and probability of favorable outcomes.

Determining the appropriate type, level and length of stay for a client entering treatment is essential to maximize the potential for a successful recovery. Currently this determination is the responsibility of the provider. With the passage of Act 152-88 (Medical Assistance coverage of non-hospital services) and Act 106-89 (Drug and Alcohol coverage by third party insurers), the development of a standardized process of insuring that the appropriate treatment is recommended is required.

The Addiction Severity Index (ASI), a public domain instrument, has been validated in several studies and is in use in more than 10,000 treatment programs in this country. When scored, the ASI produces seven 10-point severity ratings which can be used to develop a treatment assignment decision hierarchy. This research-based model produces a tentative placement decision which has been proven effective in clinical studies in matching a client's overall level of severity to the most appropriate level of treatment.

The Department of Health has authorized the use of the ASI in six test SCAs, to determine if it is possible to use as a standardized instrument, on a statewide basis, to assess uniformly the level and type of impairment of clients presenting for treatment at publicly funded facilities. This will enable the Commonwealth to monitor the placement of drug and alcohol clients having different types of impairment into appropriate levels of treatment.

Action Steps:

- Monitor drug and alcohol treatment positions and services funded by ODAP in the state correctional institutions.
- Provide technical assistance to the Department of Corrections in preparation for the licensure of all treatment activities in the institutions.
- Monitor and review the Special Intensive Supervision Projects in Pittsburgh and Philadelphia that allow inmates with a substance abuse history to be probated to drug and alcohol treatment programs.
- Monitor and evaluate TASC programs located in 13 counties of the Commonwealth.
- Provide inpatient drug and alcohol treatment for selected delinquent juveniles as an alternative to incarceration.
- Monitor and provide technical assistance to sub-recipients of approved grants from the Office for Treatment Improvement that will provide treatment alternatives for incarcerated and non-incarcerated youth.
- In conjunction with the Pennsylvania Commission on Crime and Delinquency, implement and monitor Drug Control Systems Improvement Grants for comprehensive substance abuse programs to reduce jail overcrowding in five counties.

Requirement D: Provide treatment for injection drug users with priority for funding given to programs that treat individuals infected with the etiologic agent for Acquired Immune Deficiency Syndrome (AIDS).

Overview: The Department has allocated more than two million dollars for direct injection drug user (IDU) related initiatives in designated HIV/IDU high-risk areas of the state for services including street outreach, HIV diagnostic and evaluation services, supportive living services and expenses to HIV diagnosed IDU, counseling, testing and partner notification services at drug treatment centers, and HIV training of drug and alcohol treatment staff. In the new year, there will be some change in funding for these services with more emphasis on training and less on outreach.

The amount allocated to the SCAs is suballocated primarily for prevention and treatment services provided by agencies whose client population have significant number of IDUs. The allocation of the drug portion of the block grant is weighted more heavily to the more urban counties who have a higher proportion of IDU clients. This will continue in the new block grant fiscal year.

The main focus of ODAP's activities will be to make AODA services available to IDU clients and also work closely with the Bureau of HIV/AIDS and the Ryan White planning coalitions in making AODA services available and accessible. This priority has been established in all ODAP SCA contracts.

ODAP will work with the SCAs and providers to implement requirements relating to programs that receive block grant funds and treat injection drug abusers. Those programs must have provisions for notification to the State upon reaching 90 percent of their capacity.

Also provisions will be made in the ODAP's SCA contract ensuring that each injection drug abuser who requests and is in need of treatment will be admitted to treatment 14 days after making the request for admission or 120 days after the date of such request. Arrangements will be made to inform programs that if they don't have the capacity to admit the individual on the date of such a request interim services will be made available to the individual no later than 48 hours after such a request.

Also, methadone services are included in ODAP's continuum of care. ODAP will assure the availability of methadone maintenance services to IDU clients as part of our statewide strategy for the delivery of AODA services.

ODAP GOAL: TO WORK WITH OTHER STATE AGENCIES TO IMPROVE AND DEVELOP COORDINATED SYSTEMS OF SERVICE.

ODAP Objective: Assist drug and alcohol treatment providers in complying with the block grant mandate requiring tuberculosis services be made available to service recipients.

Action Steps:

- Inform Pennsylvania's drug and alcohol service providers of the TB service block grant requirements, i.e., counseling testing and treatment.
- Identify resources, public and private, to assist providers in meeting the requirement.
- Require the SCA to include the requirement in their contracts with providers.

ODAP Objective: Assure compliance with federal block grant IDU requirements.

Action Steps:

- All Departmental contracts to the SCAs and to direct providers funded by the block grant include the stipulation of being notified when programs treating IDU reach 90% capacity. The contracts are monitored by the Division of Program Monitoring.
- The Departmental contracts with the SCAs also include the stipulation that IDUs are, to the maximum extent practicable, accepted for treatment within seven days.
- Contract language also prohibits HIV testing without pre and post-test counseling. All HIV testing is co-administered by county and state Health Department officials who receive bi-weekly reports on all tests results and administer the contracts for laboratory services.
- The Departmental contracts with the SCAs further include the stipulation that SCAs and subcontracted providers shall also conduct outreach activities encouraging IDU to seek treatment.
- All Departmental contracts to the SCA and to direct providers that are funded by the block grant include the specific language prohibiting distribution of sterile needles or bleach.

ODAP Objectives: To identify pregnant AODA women, and AODA women with children in the community who are at risk for HIV/AIDS and to enroll them into prenatal care, substance abuse treatment, and primary health care services.

Action Steps:

- Increase the number of pregnant AODA women, and AODA women with children through outreach, case finding and/or referral to a comprehensive service delivery system.
- Increase the number of pregnant AODA who enroll in prenatal care.
- Increase the number of prenatal visits of pregnant AODA women.
- Increase the number of children of pregnant AODA women who are enrolled in and appropriately utilizing primary health care services.
- Increase the number of high risk women and their children who receive HIV/AIDS prevention and Counseling, Testing, Referral, and Partner Notification (CTRPN) services.

ODAP Objectives: ODAP will establish an ad hoc committee consisting of SCAs, methadone providers, and medical professionals to address service delivery issues related to methadone maintenance services.

Action Steps:

- Form a committee comprised of methadone providers, SCA directors, medical professionals, and ODAP staff.
- Select a facilitator to chair the meetings.
- Meet monthly (at least once a month) until April, 1993.
- Submit a report with recommendations to the Deputy Secretary for Drug and Alcohol Programs (April, 1993).
- Amend the SCA contracts to reflect any policy changes resulting from the committee's work.

Requirement E: Improve alcohol and drug abuse programs and services designed for women, especially pregnant women and women with dependent children.

ODAP GOAL: TO ESTABLISH AND MAINTAIN A COST EFFECTIVE SYSTEM OF DRUG AND ALCOHOL SERVICES TO MEET THE NEEDS OF PENNSYLVANIA'S DIVERSE POPULATION.

Overview: In 1987, two of the ten programs that existed nationally to provide residential treatment for women with children were located in Pennsylvania. In a five year period, Pennsylvania has been able to develop the following residential programs:

- Maternal Addictions facilities
- Women Only facilities
- Women with Children facilities
- Shelters for Women and their Children
- Halfway Houses/Transitional Living facilities for women and their children.

These combined facilities render services to over 900 women and their children.

ODAP Objective: Develop a continuum of services for pregnant, addicted women and addicted women with children.

Action Steps:

- Identify areas of the State with the interest, expertise and resources to implement innovative programs.
- Arrange for the provision of technical assistance in the development of outpatient and outreach programs for pregnant, addicted women.
- Replicate the St. Francis Medical Center Outpatient and Outreach Model in four to six sites.

ODAP Objective: To make services for women with children accessible to all areas of the state.

Action Steps:

- ODAP will require, in SCA contracts, that pregnant women will be made a priority for admission to treatment.
- There must be at least one provider (inpatient or outpatient) in each SCA able and willing to provide treatment services to this population.
- Identification of this population should be made as early in the pregnancy as possible and treatment should be available for the duration of the pregnancy and at least three months post partum.
- Collaborative agreements with prenatal clinics, child development specialists, primary caregivers, and children and youth agencies must be developed.
- The Department of Health will develop a model program using this collaborative approach which will be implemented in at least three SCAs during SFY 1992-93.
- Continue to reimburse 90% of costs to counties for residential treatment services in eight sites for women with children programs.
- Continue to develop halfway houses for women with children throughout the Commonwealth.
- Continue special reimbursement funding procedure for halfway houses for women with children.

ODAP Objective: To assist in the development of a "Family Life Enrichment" program for homeless recovering persons and their families through the use of surplus military properties.

Action Steps:

- Provide clients and their families with private residence within a community setting which will support and encourage recovery and self-sufficiency.
- Provide clients and their family members with appropriate levels of AODA services.
- Provide clients and their families intensive case management and linkage to appropriate services.

Requirement F: Continue to provide for and encourage the development of group homes for recovering substance abusers through the operation of a revolving loan fund.

Overview: The Department has initiated Pennsylvania's Self-Help Addiction Recovery Environment (SHARE) Loan Program to provide loans to persons who have completed treatment and who are in need of funds to secure suitable housing. Twelve homes were established under this program.

The Department of Health's ODAP developed and implemented a Statewide SHARE Loan Program. The purpose of the SHARE Loan Program is to provide loans of up to $4,000 for the provision of housing in which six or more individuals recovering from alcoholism or other drug addictions may reside. Loans can be applied toward a self-supported recovery house. Funding can include security deposits, first month's rent and, after other sources have been exhausted, the purchase of used amenities which foster healthy group living. The interest-free loans must be repaid to the Department within two years.

From the inception of the program in January, 1990, a total of 12 houses have been started in the Commonwealth. A sum of $44,310 has been made available to assist these houses with start-up costs.

ODAP GOAL: TO ESTABLISH AND MAINTAIN A COST-EFFECTIVE SYSTEM OF DRUG AND ALCOHOL SERVICES WHICH MEET THE NEEDS OF PENNSYLVANIA'S DIVERSE POPULATION.

ODAP Objective: To continue to administer the share loan program for the provision of housing in which six or more individuals recovering from alcoholism or other drug addiction may reside.

Action Steps:

- To make loans up to $4,000 available in Federal Fiscal Year 1993.
- To provide technical assistance on site location, rent negotiation and the establishment of house rules for SHARE Loan applicants.
- To provide technical assistance in employment readiness counseling, conflict management, and compliance with loan agreement for recipients of SHARE Loans.

ODAP GOAL: TO DEVELOP A DISTRIBUTIVE MANAGEMENT INFORMATION SYSTEM WHICH WILL PROVIDE A LINK BETWEEN THE SINGLE STATE AGENCY AND THE SINGLE COUNTY AUTHORITY. THE AIM OF THE SYSTEM WILL BE TO REDUCE REDUNDANCY, INCREASE TIMELINESS OF DATA GATHERING, AND TO REDUCE COSTS BY ELIMINATING DUPLICATION OF REPORTING.

ODAP Objective: The client information system developed through the use of federal block grant funds will be implemented in the facilities and SCAs on a micro computer. The data base which is developed under this system will be used to generate reports on clients served and funding which is used to provide these services. The information will be transferred through electronic means, from the providers to the SCAs, from the SCAs to ODAP, and from ODAP to NIDA to satisfy federal reporting requirements.

Action Steps:

- Develop a distributive management information system which will provide a link between the Single State Agency (SSA) and the SCA.
- Evaluate fiscal reporting requirements to develop a personal computer (PC) based accounting system for use in the SCAs which will generate and electronically transfer fiscal reports required by ODAP to manage federal and state funds.
- Redesign the Prevention/Intervention data reports to capture more accurately the comprehensive prevention and intervention services provided at the local level, which will be incorporated into a PC-based reporting mechanism with electronic transfer capabilities.
- Funding for PCs (and for upgrades of some existing equipment) and modems for electronic data transfer.
- Automate the licensing function in the Division of Licensing by developing programs for laptop computers which will be used by drug and alcohol field staff in completing the data requirements of the licensing site visit. The information gathered during these visits will be transferred into a main data base resident on ODAP's personal computer.

3. PLANNING

SAPT Statutory Requirements:

- Section 1916(c)(10) requires the state to identify those populations, areas and localities with a need for substance abuse services.
- Section 1916(c)(19) requires that funding for substance abuse services be targeted to communities with the highest prevalence of substance abuse or the greatest need for substance abuse treatment services.
- Section 1916(b) requires the state to hold public hearings on the intended use and distribution of funds each fiscal year.

Sub-state Planning:

The Pennsylvania Department of Health continues to be the lead agency for SAPT Block Grant, and is directly responsible for delivery of alcohol and drug abuse services through ODAP. The mental health services component of the block grant is assigned to the Department of Public Welfare.

The Department of Health, in administering the drug and alcohol portion of the SAPT Block Grant, allocates state and federal funds to the 47 SCAs, the county government administrative agencies. The allocation amounts are based on population, competitive awards and other factors. Other funds are generated locally via county funds, fees, private sources, insurance, etc. SCAs expend federal and state funds according to approved plans which are in turn converted into contracts. The SCAs subcontract for services with the providers in accordance with both their county service plan and the rules and regulations of the Department.

This partnership with private and public organizations has supported the continued development and implementation of new and innovative strategies for drug and alcohol problems and the implementation of comprehensive treatment services for citizens needing public support for the costs of these services.

ODAP has synchronized the federal block grant process with its planning and allocation system.

Guidelines are issued to SCAs each year relating to ODAP's allocation procedures. SCAs are required to submit fiscal plans for the approved use of block grant dollars. SCAs are also required to submit three year plans.

A State Plan has recently been developed which sets requirements for the administration of SCAs and also contains fiscal requirements. The plan is linked to the SCA contract and is amended annually.

a) Funding Priorities

There are urban centers in the Commonwealth where AODA needs are greatest and hardest hit, but Pennsylvania is primarily a rural state. We have to also focus future funding initiatives toward the rural populations.

ODAP has identified the following populations as having priority for future federal or state funding initiatives:

- African Americans;
- Latinos;
- Adolescents;
- Pregnant and postpartum women;
- Women with children;
- Adult and Juvenile Criminal Justice clients; and
- Mentally ill substance abusers.

b) Data Collection

The Uniform Data Collection System (UDCS) utilizes client admission forms to record demographic and clinical data on all clients who enter treatment. This includes information such as past AODA, treatment history, age, sex, race, martial status, use of public assistance resources, county of residence, and employment history. The data from these forms is used to prepare an annual trend report which is fed back to the SCAs for their use in administrative and clinical planning.

The Commonwealth of Pennsylvania's ODAP has begun the development and implementation of a statewide microcomputer Client Information System (CIS).

The CIS will include management reports which should be of interest to each area; i.e., facilities will be provided with reports of interest to them, while the SCAs will receive reports that will meet their general needs. The system also incorporates a mechanism for client invoicing to reduce the time requirements of both the providers and the SCAs. Of primary importance in the development of the CIS is compliance with the Federal Minimum Data Set requirements and a simple process to transfer these data.

During 1992-93, ODAP will not implement any new statewide initiatives, but will focus on statewide implementation of CIS and enhanced reports.

ODAP is appreciative of the federal funding it has received to assist our initiative of developing and implementing a more aggressive data system. Limited resources have hampered this effort in the Commonwealth for many years. It is especially encouraging to have the federal government recognize the seriousness of the need in this area so that prevention, intervention and treatment services may be more thoroughly evaluated, more effectively managed, and more appropriately used.

c) State, Regional, Local Advisory Councils.

State

In 1972, the General Assembly established a health, education, and rehabilitation program for the prevention and treatment of drug and alcohol abuse through the enactment of the Pennsylvania Drug and Alcohol Abuse Control Act, Act 1972-63, as amended, 71 P.S. §§ 1690.101 et seq. This law established the Governor's Council on Drug and Alcohol Abuse which was to be chaired by the Governor. The Council was subsequently reorganized through Reorganization Plan 1981-4 which transferred its responsibilities and its administrative authorities to the Department of Health and designated it as the advisory body to the Department of Health on issues surrounding drug and alcohol programs. Act 1985-119 reestablished and changed the name of the Council to the Pennsylvania Advisory Council on Drug and Alcohol Abuse and designed the Secretary of Health as the Chairperson.

The Advisory Council is composed as follows:

(1) Four members shall have substantial training or experience in the field of drug or alcohol prevention, intervention, rehabilitation, treatment, or enforcement.
(2) One member shall be an individual with a prior history of drug or alcohol dependency.
(3) One member shall have no connection with or experience in drug or alcohol prevention, intervention, rehabilitation, treatment, or enforcement.
(4) Two members shall be from the public at large. To the extent possible, all geographic areas of this Commonwealth shall be represented.

The Department of Health seeks the written advice and consultation of the Council in the following areas:

(1) The development and implementation of the State Plan for the control, prevention, intervention, treatment, rehabilitation, research, education and training aspects of drug and alcohol abuse and dependency problems.
(2) The promulgation by the Department of Health of any regulations necessary to carry out the purposes of this Act.
(3) The establishment of funding priorities for drug and alcohol programs.
(4) The allocation of funds for the control, prevention, intervention, treatment, rehabilitation, research or training aspects of drug and alcohol abuse and dependency problems.
(5) Policies pertaining to the collection and dissemination of data and statistics pertaining to drug and alcohol abuse and dependency.

In Pennsylvania there are 47 SCAs. ODAP provides state and federal funding to local drug and alcohol programs through contracts with the SCAs. Most SCAs, in turn, contract with independent providers for treatment, prevention, and intervention services, although some SCAs administer their own direct services through licensed or approved units commonly referred to as "functional units".

In order to establish an SCA, the Local Authority; i.e., County Commissioners, must appoint a citizens group consisting of 11 to 15 members to advise in the planning, coordinating and administering of services.

The duties of the SCA Councils/Commissions are as follows:

(1) To review and assess the need for services in relation to the incidence and prevalence of drug and alcohol abuse.
(2) To prepare the SCA Plan in accordance with guidelines issued by the Department and submit it to the Department for approval.
(3) To assist the Executive Director/Specialist in the assessment of drug and alcohol prevention, intervention and treatment services in the SCA.
(4) To adopt, amend and repeal bylaws governing the manner in which business is conducted.
Such bylaws shall be submitted to the Department of approval. Bylaws will be disapproved if they conflict with State laws or regulations.
(5) To monitor compliance/performance of SCA funded service providers in accordance with guidelines issued by the Department.
(6) To implement the Department's reporting requirements.
(7) To prepare an annual report to the Local Authority and the Department which presents accomplishments on all programmatic activities of the SCA and its service delivery system.
(8) To develop a full continuum of services and make them accessible based on the availability of funding.

B. Public Input

The State Legislature is required to conduct public hearings on the proposed use and distribution of block grant funds. The legislative hearings are held on all block grants received by the Commonwealth.

In addition to the legislative hearings and in keeping with the Commonwealth's commitment to citizen involvement, the policy decision was made to continue the public's opportunity for participation. This was accomplished by publishing a notice through the Legislative Reference Bureau to inform the public in general that a description of the intended use of funds of the 1993 Block Grant, pursuant to 42 U.S.C. § 300x-4(d) will be available for public review and comment. (Attachment)

SCAs are also required by ODAP to have public input regarding the development of their annual plans and off year updates.

In January, 1988, the Pennsylvania Advisory Council on Drug and Alcohol Abuse assumed responsibilities as the Block Grant Advisory Task Force. The Advisory Council works with Departmental staff to advise the Secretary of Health on issues relating to health service program priorities. These issues include state plan development and review of public comments. Members of the Advisory Council are appointed directly by the Governor.

C. Criteria for Allocating FFY 1993 Funds

- [x] Population levels (Specify formula: _____)
- [x] Incidence and prevalence levels
- [ ] Problem levels as estimated by alcohol/drug-related crime statistics
- [ ] Problem levels as estimated by alcohol/drug-related health statistics
- [x] Problem levels as estimated by social indicator data
- [x] Problem levels as estimated by expert opinion
- [ ] Resource levels as determined by _____ (specify method)
- [ ] Size of gaps between resources (as measured by _____) and needs (as estimated by _____)
- [ ] Other: _____ (specify)

D. Needs Assessment Summary

States are not held accountable for this section until funded by the Federal needs initiative "State Demand and Needs Assessment Studies: Alcohol and Other Drugs".

The Department of Health's, Office of Drug and Alcohol Programs, submitted a response to Request for Proposal (RFP) No. OTI-92-0005, "State Demand and Needs Assessment Studies: Alcohol and Other Drugs" but was not selected for funding for the first round.

NARRATIVE (Form 10)

Pennsylvania's prevention philosophy, defined in regulation, targets the entire population for prevention services. In accordance with this philosophy, Form 10 should be a tabulation of 1990 census counts. Unfortunately, Pennsylvania does not now have the information which would be needed to convert the race and Hispanic origin data collected in the 1990 census to the mixed racial and ethnic categories used in form 10.

Pennsylvania has a community-based prevention strategy. This is reasonable and cost-effective at the local level where multiple programs can be coordinated for maximum impact on specific target populations. Each SCA is responsible for prevention programming in Pennsylvania.

There is a case to be made for prevention efforts directed toward problems and populations which cross county lines. In June, 1992, Pennsylvania responded to a federal Needs Assessment Request for Proposals (RFP), which would provide funding and technical assistance to states to develop and implement techniques to estimate the need for prevention and treatment services among critical populations. Pennsylvania hopes it is selected for participation in this program and funded at a level which will allow it to address this aspect of needs assessment.

G. Intended Use Plan
   1. Form 11
   2. Form 12

SUBSTANCE ABUSE INTENDED USE PLAN 10/1/92 - 9/30/94

State: Pennsylvania

1. ACTIVITY	SOURCE OF FUNDS					
	2. ADMS FFY 1993 block grant	3. Medicaid	4. Other Federal funds	5. State funds	6. Local funds	7. Othe
1. Substance abuse treatment and rehabilitation			10,116	42,149		
2. Alcohol treatment and rehabilitation	18,400					
3. Drug treatment and rehabilitation	18,401					
4. Prevention and early intervention	9,814		2,187	11,024		
5. Administration	2,453		443	11,672		
6. Total	49,068	- 0 -	12,746	64,845	- 0 -	- 0 -

Planned Expenditures on Substance Resource Development Activities

Does your State plan to fund resource development activities with FFY 1993 funds?

☒ Yes

☐ No

If yes, show the amounts that will be spent:

	Treatment	Prevention	Total
☐ Planning, coordination, and needs assessment	$_____	$_____	$ 423
☐ Quality assurance	$_____	$_____	$ 1,147
☐ Training (post-employment)	$_____	$_____	$ 178
☐ Education (pre-employment)	$_____	$_____	$ -0-
☐ Program development	$_____	$_____	$ 435
☐ Research and evaluation	$_____	$_____	$ 400
☐ Information systems	$_____	$_____	$ 273
TOTAL	$_____	$_____	$ 2,856

Planned Expenditures of Prevention and Early Intervention

	ADMS Block Grant	FFY 1993 Federal	Other State	Local	Other
☐ Information	$ 196	$_____	$_____	$_____	$_____
☐ Education	$ 4,220	$_____	$ 6,394	$_____	$_____
☐ Community & Professional Mobilization	$_____	$ 187	$_____	$_____	$_____
☐ Alternatives	$_____	$_____	$_____	$_____	$_____
☐ Social Policy & Environmental Change	$_____	$_____	$_____	$_____	$_____
☐ Early Intervention	$ 5,398	$ 2,000	$ 4,630	$_____	$_____
TOTAL	$ 9,814	$ 2,187	$ 11,024	$ -0-	$ -0-

Treatment Capacity Matrix (Form 12)

This form does not differ from the Form 07 because it is anticipated that the funding will remain constant and there will be no appreciable charges in the data.

H. Purchasing Services

☒ Competitive grants or contracts

☒ Non-competitive grants or contracts

☐ Statutory or regulatory allocation to governmental agencies serving as umbrella agencies that purchase or directly operate services

☒ According to county or regional priorities

☐ Line item program budget

☐ Price per slot

Rate: _____ Type of slot: _____
Rate: _____ Type of slot: _____
Rate: _____ Type of slot: _____

☒ Price per unit of service

Unit: _____ Rate: _____
Unit: _____ Rate: _____
Unit: _____ Rate: _____

☐ Per capital allocation (Formula: _____)

☐ Price per episode of care:

Rate: _____ Diagnostic group: _____
Rate: _____ Diagnostic group: _____
Rate: _____ Diagnostic group: _____

I. Program performance monitoring

- [x] On-site inspections
  (Frequency for treatment: _____)
  (Frequency for prevention: _____)

- [ ] Activity reports
  (Frequency for treatment: _____)
  (Frequency for prevention: _____)

- [x] Management information system

- [ ] Patient/participant data reporting system
  (Frequency for treatment: _____)
  (Frequency for prevention: _____)

- [ ] Performance contracts

- [x] Cost reports

- [x] Independent peer review

- [ ] Licensure standards - programs and facilities
  (Frequency for treatment: Annually)
  (Frequency for prevention: _____)
  Semi-annually for provisional license.

- [ ] Licensure standards - personnel
  (Frequency for treatment: _____)
  (Frequency for prevention: _____)

- [ ] Other (Specify: _____)

SECTION IV ATTACHMENTS
SPECIAL REQUIREMENTS AND WAIVERS

ATTACHMENT 1: GROUP HOME ENTITIES AND PROGRAMS

In January, 1990, the Pennsylvania Department of Health established a $100,000 revolving loan fund with the Pennsylvania State Employees' Credit Union (PSECU). Federal Fiscal Year 1989 SAPT Block Grant funds were the source of funds used to establish the fund. The PSECU is the non-profit entity that manages the fund. Exhibit A contains our written agreement with the PSECU.

Our office prepares a monthly fund balance sheet which consists of interest income from the PSECU, loan repayments, and loans made (see Exhibit B). A loan repayment history for each loan recipient is also prepared monthly (see Exhibit C). Exhibits B and C also delineate the number of loans made, the number of repayments, and the loan recipients that did not pay.

A list of all entities that received loans from the inception of the revolving loan fund program is contained in Exhibit D. Our loan requirements and application procedures are contained in Exhibits E and F.

Prior to July, 1991, Oxford House, Inc., administered the Group Homes Entities Program for the Department (see Exhibit G). Since July 1, 1991, the Department has administered the program.

ATTACHMENT 2: PREVENTION AND EARLY INTERVENTION

1. Does your State conduct sobriety checkpoints on major and minor thoroughfares on a periodic basis? (HP 4.1)

- [X] Yes
- [ ] No
- [ ] Unknown

2. Does your State conduct or fund prevention/education activities aimed at preschool children? (HP 4.6 and 4.16)

- [X] Yes
- [ ] No
- [ ] Unknown

3. Does your State alcohol and drug agency conduct or fund prevention/education activities in every school district aimed at youth grades K-12? (HP 4.13)

- [X] Yes
- [ ] No
- [ ] Unknown

4. Does your State have laws making it illegal to consume alcoholic beverages on the campuses of State colleges and universities? (HP 4.16)

- [X] Yes
- [ ] No
- [ ] Unknown

5. Does your State conduct prevention/education activities aimed at college students that include: (HP 4.7 and 4.16)

Education bureau?	[X] Yes	[ ] No	[ ] Unknown
Dissemination of materials?	[X] Yes	[ ] No	[ ] Unknown
Media campaigns?	[X] Yes	[ ] No	[ ] Unknown
Product pricing strategies?	[ ] Yes	[X] No	[ ] Unknown
Policy to limit access?	[X] Yes	[ ] No	[ ] Unknown

6. Does your State now have laws that suspend or revoke administrative drivers' licenses for those determined to have been drinking under the influence of intoxicants? (HP 4.15)

- [x] Yes
- [ ] No
- [ ] Unknown

7. Has the State enacted and enforced new policies, beyond those in existence in 1989, to reduce access to alcoholic beverages by minors such as (HP 4.16):

Restrictions at recreational and entertainment events at which youth made up a majority of participants/consumers,

[x] Yes [ ] No [ ] Unknown

New product pricing,

[ ] Yes [ ] No [x] Unknown

New taxes on alcoholic beverages,

[ ] Yes [x] No [ ] Unknown

New laws or enforcement of penalties and license revocation for sale of alcoholic beverages to minors,

[ ] Yes [ ] No [x] Unknown

Parental responsibility laws for a child's possession and use of alcoholic beverages,

[ ] Yes [x] No [ ] Unknown

8. Does your State provide training and assistance activities for parents?

- [x] Yes
- [ ] No
- [ ] Unknown

9. What is the average age of first use for the following? (HP 4.5) (if available)

		Age 0-5	Age 6-11	Age 12-14	Age 15-18
N/A	Cigarettes				
	Alcohol			X	
	Marijuana			X	

10. What is your State's present legal alcohol concentration tolerance level for: (HP 4.18)

Motor vehicle drivers age 21 and older? .10
Motor vehicle drivers under age 21? .10

11. How many communities in your State have comprehensive, community-wide coalitions for alcohol and other drug abuse prevention? 67 Counties

ATTACHMENT 3: PROGRAMS FOR WOMEN

Federal Requirement:

Section 1916(c)(14) requires the State to use at least 10% of every block grant award for alcohol and drug abuse activities designed for women, especially those who are pregnant and/or have dependent children. These activities may include demonstration projects for the provision of residential services to pregnant women.

The following projects (from form 06) serve women of child-bearing age in need of prenatal and perinatal services, with attention to the service needs of their substance exposed infants as well as the child care needs of older dependent children.

ADMS Block Grant Funds
for Women's Services
(Form 06 Extract)

SCA	FACILITY NUMBER	NDATUS ID	AREA SERVED	USE OF FUNDS
Allegheny	257027		02	04
	720184	PA906156	02	03
	720104	PA301507	02	01
	257027		02	01
	707011		02	01
	707114	PA100974	02	01
Armstrong/Indiana	030156	PA903914	03	02
	030156	PA903914	03	03
Bedford	051089	PA303461	02	02
	051089	PA303461	02	03
	057005		02	02
	057005		02	03
Berks	061360	PA903260	02	04
Blair	071064	PA	02	04
Bradford/Sullivan	081050	PA	03	01
	081050	PA	03	04
	457015	PA	03	01
	367045		03	01
	597009	PA	03	01
Bucks	092460	PA304378	02	04
	092170	PA750257	02	04
	092170	PA750257	02	02
	092170	PA750257	02	03
	093149	PA904763	02	02
	093149	PA904763	02	03
	999999		02	02
	999999		02	03
Cambria	117021	PA907881	02	02
	117021	PA907881	02	07
Carbon/Monroe/Pike	131044	PA905752	03	01
	131044	PA905752	03	04
	451044	PA903161	03	01
	451044	PA903161	03	04
	521034	PA905646	03	01
	487010	PA907501	03	01
	647008		03	01
Centre	141250	PA907006	02	04
	171089	PA905471	02	01
	147014	PA901561	02	01

ADMS Block Grant Funds
for Women's Services
(Form 06 Extract)

SCA	FACILITY NUMBER	NDATUS ID	AREA SERVED	USE OF FUNDS
Chester	152024	PA908780	02	07
	152024	PA908780	02	07
	152024	PA908780	02	01
	162121	PA750935	02	01
	152534	PA908582	02	01
	152116	PA750513	02	01
	157028	PA907527	02	01
	151081	PA902031	02	01
Clearfield/Jefferson	171013	PA903328	03	01
Crawford	201084	PA300301	02	02
	201084	PA300301	02	03
	201084	PA300301	02	04
Cumberland/Perry	237042	PA901044	03	01
	287017	PA908483	03	01
	227029	PA906925	03	01
	062041	PA300434	03	01
	361476	PA906933	03	01
	227036	PA907774	03	01
	221159	PA301051	03	01
Dauphin	221159	PA301051	02	01
	227036	PA907774	02	01
	227029	PA906925	02	01
	227037	PA907816	02	01
	227035	PA907782	02	01
	222044	PA302588	02	01
	541024	PA900464	02	01
	227051	PA102871	02	01
	227045	PA303529	02	01
Delaware	232013	PA904466	02	01
	233154	PA750679	02	01
	234104		02	02
	234096		02	02
Erie	257046	PA103101	02	01
Fayette	261084	PA908681	02	02
Franklin/Fulton	287031	PA101295	03	01
	561089	PA903419	03	01
Lancaster	367045		02	01
	361476	PA906933	02	01
Lawrence	377005	PA904201	02	04
	377005	PA904201	02	01
	377006	PA904201	02	01
	257046	PA103101	02	01

ADMS Block Grant Funds
for Women's Services
(Form 06 Extract)

SCA	FACILITY NUMBER	NDATUS ID	AREA SERVED	USE OF FUNDS
Huntingdon/Mifflin/ Juniata	447019	PA101329	03	02
	347018	PA101345	03	02
	317013	PA907865	03	02
	347018	PA101345	03	03
	317013	PA907865	03	03
	347018	PA101345	03	04
Lebanon	381109	PA909128	02	01
Lehigh	487009	PA907444	02	01
Lycoming/Clinton	361476	PA906933	03	01
	411104	PA751636	03	01
Mercer	437003	PA907741	02	01
	431244	PA905802	02	01
	437004	PA102160	02	01
	431031	PA905067	02	01
	431042	PA750414	02	01
	432000		02	04
Montgomery	467055	PA303214	02	01
Northampton	152089	PA301044	02	01
	397012	PA907345	02	03
	487010	PA907501	02	01
	487013	PA102244	02	01
Philadelphia	800103	PA301016	02	01
	800254	PA100511	02	03
	807161	PA906669	02	03
	807163	PA909010	02	01
	807170	PA100305	02	03
	807191	PA100925	02	01
	807219	PA102632	02	01
	807224	PA103044	02	01
	820114	PA100370	02	01
	820354	PA906354	02	03
	830314	PA302604	02	03
	850324	PA302018	02	03
	890090	PA751412	02	01
	900304	PA906875	02	01
	910194	PA906305	02	01
	881003		02	01
Potter	427033	PA100982	02	04
	427033	PA100982	02	01

ADMS Block Grant Funds
for Women's Services
(Form 06 Extract)

SCA	FACILITY NUMBER	NDATUS ID	AREA SERVED	USE OF FUNDS
Westmoreland	651110	PA303685	02	04
	999999		02	06
	652404	PA904847	02	01
	657028	PA100859	02	01
	657023	PA900134	02	01
	657027	PA102319	02	01
	031056	PA903914	02	01
	101064	PA905679	02	01
	257046	PA103101	02	01
	041091	PA900001	02	01

Description of Projects Funded

Maternal Addiction Services: Data indicate that women are less likely to enter treatment than men and when they do, there is a much greater drop-out rate. The primary reason for this is the lack of suitable placement for their children. In order to alleviate this problem, it became necessary to expand treatment capacity for this population by creating new programs statewide where the demand was evident. The Women and Children's program concept was modeled after the Vantage/ Gaudenzia treatment regime, that of long term, inpatient treatment. These programs provide prevention and intervention services for children while providing treatment for the mother, and also provide services to pregnant women. The goal is self-sufficiency of the female and unification of the family. Parenting skills, budgeting, education, and job training are also emphasized. Currently, through funding provided by this office, bed capacity has more than tripled. This statewide initiative encourages our system to address this very critical need. A service funding pool has been established whereby the Office of Drug and Alcohol Programs reimburses the SCA for 90% of the per diem rate. The response to this new funding approach has been very encouraging.

Addicted Women With Children - Halfway House: In order to encourage the continuation of the rehabilitation process of women, ODAP has funded halfway house programs to improve the development of treatment outcome. A halfway house is a licensed treatment facility where the emphasis is on providing counseling to stabilize previous treatment outcomes and to assist the patient in developing life and employment skills once the patient has completed an intensive rehabilitation experience. Stays in a halfway house often range from three months to one year, during which self-sufficiency is stressed. The proposed start-up date for Women and Children Halfway Homes is the fourth quarter of SFY 1990-91 and SFY 1991-92. These will be located in Lawrence, Chester, and Allegheny Counties, and will serve approximately 80 women and their children.

Outpatient/Outreach Model: ODAP, in collaboration with St. Francis Medical Center for Chemical Dependency Treatment in Pittsburgh, will provide technical assistance to five sites across the Commonwealth. The proposed project provides comprehensive and coordinated services to women who use/abuse drugs and alcohol during their pregnancy. The overall goal of this project is to provide services which would bring about improved birth outcomes for infants born to women who enroll in these programs. Techniques are aimed at improving the compliance of women with programmatic goals. The specific activities used to address these aims include a community education program, a physician education program, outreach workers who will monitor clients and advocate for appropriate participation and referrals, and home visits by public health nurses who will educate, monitor, assess and refer clients and prospective clients to a comprehensive drug and alcohol treatment program. To date, Berks, Schuylkill, Delaware, and Philadelphia Counties have received such training. Continuation of this project to include four additional counties will take place in SFY 1991-92.

Women in Need of Services

1. Definition

   ODAP defines women in need of services as addicted women, addicted pregnant women and addicted women with children. This group includes women of child bearing age who are in need of prenatal and perinatal services with attention paid to the service needs of their substance-exposed infants.

2. Compliance With Section 1916(c)(14) in Spending FFY 1990 Block Grant Funds.

Prior to the beginning of each state fiscal year, ODAP computes the 10% women's set aside. The procedure first subtracts the amount of SAPT Block Grant funds used for the above special initiatives, then the specific amount of SAPT funding required by each SCA to meet the 10% set aside for women's programming is computed and becomes a contract requirement for each SCA.

3. Monitoring

ODAP's monitoring system is based on periodic reviews and aimed at measuring the level of program and financial compliance of grants and contracts between ODAP and the SCAs. Subcontracts between the SCAs and the local drug and alcohol service providers are also reviewed to insure that necessary contractual requirements are met and presented completely in the contract document. Client utilization and fiscal data on the SCA and service provider level is also reviewed by the Bureau of Health Data Systems.

4. Estimating Treatment Capacity for and Utilization by Women

ODAP has not been able to determine the methodology or tools necessary to collect data to determine the number and location of persons in need of treatment in this critical population. ODAP is developing a client information system which, when fully implemented, will provide data indicating how long clients wait to enter treatment. These data will identify areas where need is greatest. ODAP has used an estimate of need formula that applies state percentages to any selected population for estimated substance abuse needs. Data is not available to either estimate or quantify the numbers of this population in need.

Capacity

The total number of licensed facilities as of March, 1990, was 691. As of May, 1991, this number increased to 718 licensed facilities providing drug and alcohol prevention/ intervention and/or treatment services in Pennsylvania. These facilities offer a total of 1,157 services; specifically, 398 outpatient, 89 partial hospitalization, 143 non-hospital residential/ rehabilitation, 36 non-hospital detoxification, and 176 prevention/ intervention. The remaining services consist of driving under the influence (85), occupational programs (41), outpatient maintenance (19), shelter (9), central intake and/or records (6), correctional facilities (6), and miscellaneous approaches. In SFY 1989-90, treatment facilities receiving full or partial public funding reported 70,531 admissions.

These services are available to all residents of the Commonwealth based on availability and eligibility. For special women and children substance abuse service capacity, see appendix c.

Utilization

In SFY 1989-90, 20,482 women were admitted to the public substance abuse service system in the Commonwealth.

ODAP considers the development of Women and Children's residential and outpatient treatment programs an on-going priority and, as a result of the PENNFREE program, Pennsylvania has become a leader in providing drug and alcohol treatment services to women and their children. In SFY 1988-89, there were only two residential programs in Pennsylvania that treated addicted women and their children. However, the advent of the PENNFREE

program coupled with the use of federal SAPT Block Grant funds has allowed Pennsylvania to dramatically increase services to these persons. Currently, there are 17 residential programs funded at the state and/or county level, serving 487 women (including pregnant women) and their children.

Their programs provide residential treatment for a six to nine-month period. Services include: counseling, group therapy, living skills, employment training, and other services required to keep the individual drug free. In addition, day care and health care services are provided to children. In short, the emphasis is on comprehensive, coordinated services to assure that the women become and remain drug free.

The philosophy underpinning these programs is to assure that non-hospital, residential treatment services are accessible and available to women (including pregnant women) and their children (see Gaudenzia insert on page 17). However, a six-month stay for a woman and two of her children at this type of facility can cost the referring SCA over $12,000. Counties with limited treatment resources were reluctant to commit funds for this type of long-term specialty care. One of the methods designed to address this problem was a new concept which has changed the way the state pays for services for women and their children, the 90/10 funding pool. Under this method, the Department of Health agrees to pay 90% of treatment costs, with the county paying the 10% balance. By shifting 90% of the service costs to a statewide budget allocation, ODAP freed county program funds for other discretionary drug and alcohol services. Most importantly, this cooperative arrangement helps to assure that needed services will be available to women and children at a reasonable cost, no matter where in Pennsylvania they live.

Major Problems

One of the problems in developing programs for this population is finding providers willing to attempt this type of program and locations for the programs. Community resistance is a problem often encountered in program development. Most drug/alcohol service providers have no experience with infants and children. The linkages to other social services may become a problem since the population is one for which they have no experience.

Technical Assistance

Although Pennsylvania has developed a system of services for this critical population, there have been no methodologies identified or used to determine need. Assistance is needed in identifying need. This state has responded to a request for applications in the area of needs assessment which should address this issue if we are selected for funding.

ATTACHMENT 4: PROGRAMS FOR IDUs

Federal Requirement:

Sections 1912A and 1915(c) of the Public Health Service Act require that at least 50% of the funds expended from any block grant award to combat drug problems be used for specific activities targeted to people whose substance(s) of abuse is/are intravenously administered and their family members, collateral, and sexual partners who are HIV infected or at risk of HIV/AIDS.

Projects Serving IDUs: (Form 06)

ADMS Block Grant Funds
for IDU Services
(Form 06 Extract)

SCA	FACILITY NUMBER	NDATUS ID	AREA SERVED	USE OF FUNDS
Allegheny	770104	PA100412	02	03
	770104	PA160412	02	03
Beaver	101064	PA905679	02	01
	041544	PA302828	02	01
	041220	PA905430	02	01
	041544	PA302821	02	01
Berks	061114		02	01
Blair	077014	PA101493	02	01
	077009	PA906974	02	01
	071064	PA903260	02	01
	077013	PA101485	02	01
Bradford/Sullivan	081050	PA905349	03	01
	087008	PA304337	03	01
Bucks	092170	PA750257	02	03
	999999		02	03
	092104	PA301606	02	03
	093259	PA906461	02	03
	093149	PA904763	02	03
	999999		02	03
	999999		02	02
	097029	PA907923	02	03
	097031	PA900498	02	03
	999999		02	06
	093121	PA906743	02	06
	107000		02	03
Carbon/Monroe/Pike	451044	PA903161	03	01
	451044	PA903161	03	04
Chester	152024	PA908780	02	07
	152066	PA750398	02	01
	152534	PA908582	02	01
	152116	PA750513	02	01
	157028	PA907527	02	01
	151081	PA902031	02	01
Clarion	167024	PA903807	02	01
Clearfield/Jefferson	171089	PA905471	03	01
Columbia/Montour/Snyder/ Union	557027	PA907988	03	01
	191013	PA904433	03	01
Crawford	201084	PA300301	02	03
Dauphin	222044	PA302588	02	01

ADMS Block Grant Funds
for IDU Services
(Form 06 Extract)

SCA	FACILITY NUMBER	NDATUS ID	AREA SERVED	USE OF FUNDS
Delaware	231104	PA903070	02	03
	234104		02	03
	234096		02	03
Erie	251086	PA750307	02	01
	257028	PA907683	02	01
Lackawanna	401889	PA906966	02	01
	547006	PA304295	02	01
	647008		02	01
	351024	PA101931	02	01
	357022	PA033313	02	01
Lancaster	361369	PA750620	02	01
	367045		02	01
	461081	PA100594	02	01
	677034	PA101386	02	01
	147015	PA303230	02	01
	287017	PA908483	02	01
Lawrence	377005	PA904201	02	01
	377006	PA908038	02	01
Lebanon	381109	PA905828	02	01
Lehigh	397012	PA970345	02	01
Luzerne/Wyoming	401216	PA905901	03	01
	401110	PA905117	03	01
	667031	PA101048	03	01
	402249	PA102087	03	01
Lycoming/Clinton	417011	PA101063	03	01
	187013	PA100818	03	01
	417015	PA102137	03	01
Montgomery	465077	PA904060	02	03
Northampton	397012	PA907345	02	03
	397012	PA907345	02	06
	487009	PA907444	02	01
	487013	PA102244	02	01
Philadelphia	800254	PA100511	02	03
	807161	PA906669	02	03
	807164	PA908103	02	03
	807170	PA100305	02	03
	820114	PA100370	02	01
	820354	PA906354	02	03
	830314	PA302604	02	03
	850324	PA302018	02	03

ADMS Block Grant Funds
for IDU Services
(Form 06 Extract)

SCA	FACILITY NUMBER	NDATUS ID	AREA SERVED	USE OF FUNDS
Schuylkill	547008	PA101121	02	02
	547008	PA101121	02	03
	541024	PA900464	02	02
	541024	PA900464	02	03
Susquehanna/Wayne	642044	PA903203	03	01
Washington/Greene	633060	PA204402	03	01
	041091	PA900001	03	01
	631074	PA905307	03	01
	302084	PA904268	03	01
	631010	PA303297	03	01
	637016		03	01
	657023	PA900134	03	01

Description of Projects funded:

1. Definition

   IDUs in need of services are defined as persons whose substance(s) of abuse is/are intravenously administered and their family members, collateral, and sexual partners who are HIV infected or at risk of HIV/AIDS.

2. How state ensured compliance with Sections 1912A and 1915(c) in spending FFY 1990 block grant funds.

   The Commonwealth allocates its block grant funds in two ways: the first is for targeted special initiatives and the second, discretionary grants to local government agencies (Single County Authorities) for suballocation to prevention, intervention, and treatment services according to the priority needs of their area. In both instances, the Commonwealth uses contractual agreements to transmit the funds and all pertinent restrictions of the Block Grant; e.g., not less than 50% of the funds be used for services to IDUs are written into the contract.

   With specific regard to the "50% requirement", the Department has allocated more than two million dollars for direct IDUs related initiatives in designated HIV/IDU high-risk areas of the state for services including street outreach, HIV diagnostic and evaluation services, supportive living services and expenses to HIV diagnosed IDUs, counseling, testing and partner notification services at drug treatment centers, and HIV training of drug and alcohol treatment staff. In the new year, there will be some change in funding for these services with more emphasis on training and less on outreach.

   The amount allocated to SCAs is suballocated primarily for prevention and treatment services provided by agencies whose client populations have significant numbers of IV drug users. The allocation of the drug portion of the block grant is weighted more heavily to the more urban counties which have a higher proportion of IDU clients. This will continue in the new block grant fiscal year.

   In summary, Pennsylvania is making a substantial effort to provide services to IV drug users. As demonstrated for SFY 1989-90, of the 70,531 admissions to treatment programs, 10,786 were IV drug users, or 15.3% of all admissions to treatment programs. In addition, a total of 2,607 Latinos and 23,933 African-Americans were admitted to treatment programs during this report period. Since drug use behavior contributes significantly to the spread of HIV; i.e., needle sharing and sexual promiscuity, cocaine abuse is also a target of this initiative. As such, cocaine addiction accounted for 29% of total admissions.

3. Monitoring

   ODAP's Division of Program Monitoring, Office of Program Development and Implementation, and the Bureau of HIV/AIDS are working together to develop a plan to coordinate and monitor statewide HIV/AIDS activities.

4. How the state assures that funds are not used to (1) distribute sterile needles for injection of any illegal drug or distribute bleach to clean needles used for this purpose or (2) carry out AIDS testing without appropriate pre-test and post-test counseling:

(a) Sterile Needles

All Departmental contracts to SCAs and to direct providers that are funded by the block grant include the specific language prohibiting distribution of sterile needles or bleach.

(b) Testing Without Pre-Test/Post-Test Counseling

Contract language also prohibits HIV testing without pre and post-test counseling. All HIV testing is co-administered by county and state Health Department officials who receive bi-weekly reports on all test results and administer the contracts for laboratory services.

The contracts are monitored by the staff of the Division of Program Monitoring and any allegation of violation of these stipulations are immediately investigated. There have been no allegations to date.

5. 90% Capacity Clause

All Departmental contracts to SCAs and to direct providers funded by the block grant include the stipulation of being notified when programs treating IDUs reach 90% capacity. The contracts are monitored by the Division of Program Monitoring. The Department did not receive any specific reports from any programs in the implementation of this clause.

6. Seven Day Acceptance

The Departmental contracts with SCAs also include the stipulation that IV drug abusers are, to the maximum extent practicable, accepted for treatment within seven days.

This stipulation is difficult to monitor and assess precisely. There is a problem with the availability of non-hospital residential, partial hospitalization, and extended care, including halfway house slots, which are gradually being increased.

In general, the methadone maintenance programs have had a level census (2,300-2,400 in Philadelphia; 3,200-3,400 statewide) and have been able to respond to short term fluctuations in demand. Detoxification services and outpatient drug-free providers have also been able to meet demands with minimal waiting periods.

A number of clients are at least given detoxification and outpatient services within the seven day period if needed.

7. Outreach for IDUs

The Departmental contracts with SCAs further include the stipulation that SCAs and subcontractor providers shall also conduct outreach activities encouraging intravenous drug abusers to seek treatment.

This provision is not uniformly enforced across the state, since in most rural areas a formal outreach capability would not be economically feasible to sustain. Philadelphia and Pittsburgh are both recipients of major federal grants for outreach work. In addition, the Department used block grant funds and part of its HIV related grant from the Centers for Disease Control to provide major outreach efforts to the IV drug abusers in the cities of Chester, Allentown, Bethlehem, Lancaster, Reading, and Harrisburg, with specific emphasis in targeting the

Hispanic community. In other urban areas including Erie, York, Norristown, et al, staff from drug and alcohol programs, AIDS support agencies, and other volunteers do evening outreach on a less intensive scale. A large supply of educational and culturally sensitive HIV pamphlet material is made available free by the Department and by many SCAs and local AIDS planning and support agencies. This material is distributed by outreach workers directly as well as being placed in readily accessible areas of the community frequented by the IV drug abusing population.

ATTACHMENT 5: WAIVERS

Pennsylvania is not applying for waiver for any of the following provisions:

- ☐ 10 percent of payments to carry out treatment programs for women [Section 1922(c)]
- ☐ Construction/rehabilitation [Section 1931(c)]
- ☐ Maintenance of average expenditure levels [Section 1930(b)]
- ☐ Improvement of process for referrals [Section 1929(d)]

ATTACHMENT 6
STUDY OF THE ADDICTION SEVERITY INDEX

Overview: In December, 1988, in an attempt to improve the effectiveness of and contain the costs for substance abuse treatment services, the Pennsylvania Legislature passed Act 152. This pioneering legislation made Pennsylvania the first state in the nation to use Medicaid funds to purchase non-hospital treatment services for drug and alcohol abusers. Act 152 further mandated that consistent criteria be developed to determine and monitor the type, level, and length of treatment. Starting with a demonstration effort in January, 1989, the legislation calls for state-wide availability of funding by December, 1993.

The Pennsylvania Department of Public Welfare, through a competitive bid process, contracted with Villanova University to evaluate the implementation, impact, cost-benefit, and cost-effectiveness of the implementation of Act 152 in the pilot sites. This contract, with financial support from the Department of Health, was subsequently amended to address the legislative mandate for the development of consistent placement and monitoring criteria, including exploration of the correlation between assessment and subsequent treatment placement, and the development of an assessment/monitoring tool that would offer both clinical and management utility.

Two meetings, involving several nationally known substance abuse researchers and field survey experts, were convened by Villanova and the Departments of Health and Public Welfare to design an appropriate and targeted research methodology to include the state's proposed uniform measure of client impairment, the Addiction Severity Index (ASI).

The ASI, a measure of client impairment, has been tested under a variety of circumstances and found to be a highly reliable instrument under the conditions in which it has been tested. However, the reliability of the instrument has not been tested under the naturally diverse conditions existing within Pennsylvania, neither has the utility of the instrument been determined for either assisting clinicians in their placement decisions or as a post-fact monitoring tool.

The overall goal of this evaluation is to provide practical guidance to the Department of Health in the development of policies and procedures for managing the appropriate delivery of publicly funded drug and alcohol treatment services.

This study is designed to determine the reliability of the ASI, the state's currently proposed uniform measure of client impairment. It is also designed to determine levels of change in client behavior as a result of exposure of different types of treatment. Using the ASI as both an initial assessment tool (pre-treatment) and an outcome measure (post-treatment), researchers will be able to determine the level of change in a client's level of impairment. By documenting each client's treatment experience, an attempt will be made to determine the influence of treatment upon impairment.

The extent to which the ASI is a reliable instrument within diverse settings can be determined through a number of means, detailed below. It should be noted, however, that reliability may not equal importance. It will not be until the end of the outcome study before researchers can attempt to determine whether the dimensions measured by the ASI are important and sufficiently encompassing indicators of need for treatment or level of treatment needed.

There are three components to this study. Each component seeks to answer distinct evaluation questions. Together, the components will provide a comprehensive understanding of the processes used to determine the placement of clients in drug and alcohol treatment services and the utility of the ASI.

Action Steps

A. PLACEMENT MAPPING

Historically, provider representatives have primarily been responsible for making the decisions regarding treatment placement. With the advent of Act 152, case managers are now involved in certain treatment placement activities. Restrictions, such as funding eligibility and/or treatment resource availability, have obviously influenced these decisions. This phase of the study will examine the decision processes which case managers and other clinicians use when making treatment placement determinations. Individual interviews, using predesigned protocols, will map the interview and decision making processes used by 24 individuals (12 who use the ASI and 12 who do not). Specific attention will be paid to the role of the ASI (or other assessment packages) in the decision-making process.

Further, the ultimate success of the state's attempt to implement a consistent process of client assessment, placement and monitoring is directly related to the field's perception that such a system (and its related tools) has direct utility and benefit to their jobs. Without a clear understanding of how assessment and treatment placement decisions are made, the state is left without clear direction for field education and implementation strategies.

The qualitative gathering of placement information will be supplemented by a comprehensive review of existing literature regarding the dimensions deemed important to the placement of the decision-making process. This literature review will also be of use to the development of the client interview protocols to be used in the client outcome study (described below).

B. FIELD RELIABILITY of the ADDICTION SEVERITY INDEX

By certain standards for applied research instruments, the ASI has already been submitted by its authors to considerable reliability testing. The present plan to broaden the base of reliability evidence begins with the consideration of the following question: "Will the same methods used by different persons produce the same results?" The current design considers "different persons" on two levels. First, the ASI needs to be evaluated with a more representative sample of ASI administrators across a heterogeneous range of professional and personal characteristics within the treatment delivery system. In addition to the individual level interviewer effects, the second level of substantive difference directly concerns field conditions.

It is well established in the evaluation literature that field conditions vary substantially, and well established in the measurement literature that differences in field conditions are associated with interviewer effects. To understand the ASI administration in the natural setting, we will conduct a "field reliability" evaluation. A specially trained set of seven anonymous client-surrogates will submit to ASI assessment in the style used by each individual site. It is expected that approximately 400 surrogate interviews will be completed, with an attempt to fairly represent the volume of clients served in each of the six study areas.

In terms of conventional test theory, this standardizes the stimulus; i.e., the "client surrogate", while permitting the interview settings to maintain their real variability. Comparisons of different interviewer ratings of the same person should furnish a much more reality-grounded measure of ASI reliability as actually implemented in assessment sites.

In addition to the completed ASI, we will collect and analyze consistent information for each of the six study sites concerning basic site information (interview setting, length) and ASI administrator information (demographics, education, professional experience).

C. CLIENT OUTCOME STUDY

The Client Outcome Study plays the critical role in determining the value and utility of using the ASI as a guide for clinicians in making treatment placement decisions and in determining the value of the instrument as a monitoring tool. The Client Outcome Study consists of assessing a client at the beginning of the treatment process, documenting the client's treatment experience, and conducting a longitudinal post-treatment interview to determine changes in behavior (outcomes).

The ASI is used as the pre-treatment measure and the post-treatment measure of client level of functioning. To understand the influence of clients' treatment experience on their level of impairment, each client's treatment experience must be fully documented. The analysis compares the pre-treatment condition with the post-treatment condition (outcome) and seeks to understand the contribution of various treatment types to the changes in condition.

The review of outcomes (changes in behavior) in comparison to the type of treatment received attempts to determine the influence of treatment on outcome. At a minimum, the definition of "treatment" will include the treatment modality categories currently used by the state. Ideally, depending on final numbers of clients involved in the study (and the variability of their experiences) the documentation of treatment will include such factors as treatment facility philosophy, number and content of therapeutic services, number and content of ancillary services, and other supportive interventions.

Analyses will seek to determine if the treatment placement and experience was related to the findings of the initial ASI assessment and related to subsequent changes in client behavior. If adequate correlations between these factors emerge, we can ascertain the predictive utility of the ASI in identifying the need for specific types of treatment interventions.

All contacts with the clients involved in the follow-up study will be made by specially trained interviewers. These interviewers will be provided through a subcontract with an established field-survey research company. The use of consistent, highly trained interviewers lessens the chances of either inter-rater or inter-site reliability problems. Our purpose in the follow-up study is not in proving the reliability of the ASI, but in using the ASI in a reliable manner. Further, specifically trained interviewers have experience in client tracking and follow-up, critical skills in completing the treatment and longitudinal interviews.

The Client Outcome Study will include three different treatment modalities: Outpatient Drug-Free, Partial Hospitalization (Intensive Outpatient), and Non-Hospital Rehabilitation (exclusive of half-way houses). The study seeks to include 300 clients in each of these treatment modalities (900 total subjects). Three points of contact are planned for each client: the initial interview; the treatment interview to be conducted approximately one month following treatment initiation; and one longitudinal post-treatment interview to be conducted approximately six months following the initiation of treatment.

ODAP Objectives:

To receive and review reports on the Placement Mapping and the Field Reliability studies, and to provide technical and financial support for the initiation of the Client Outcome Study.

The Placement Mapping and Field Reliability studies have already been performed and data is being analyzed. A minimal amount of funding will be used for preparation of the final reports for these two components. The bulk of the funding for the next fiscal year will be spent on developing and refining the protocol(s) to be used in the Client Outcome Study, and the hiring and training of interviewers through the subcontractor. It is expected that these interviewers will begin work in the field by September, 1992. The treatment interviews will begin in October with the first six month follow-ups starting in March, 1993. Approximately $426,627 will be spend in SFY 1992-93 for this research effort (see attached summary budget).

Rocco L. Claroni, Project Officer 717-783-8307

Richard J. Trynoski, Alternate 717-783-8307

CONTRACT FOR SERVICES

ME # 89078

This Contract is between the Commonwealth of Pennsylvania, Department of Health, Office of Drug and Alcohol Programs (hereinafter referred to as Department) and the Pennsylvania State Employees Credit Union a nonprofit private entity, located at 136 Kline Village, Harrisburg, Pennsylvania 17104 (hereinafter referred to as Contractor).

WHEREAS, the Anti-Drug Abuse Act of 1988 (Public Law 100-690, approved November 18, 1988) amended Subpart I of Part B of Title XIX of the Public Health Service Act (42 U.S.C. 300x) by adding a new Section 1916A (42 U.S.C. §300x-4a) establishing a program entitled Group Homes for Recovering Substance Abusers; and

WHEREAS, the Department, in order to comply with the federal requirements, shall establish, either directly or through the provision of a grant or contract to a non-profit private entity, a revolving fund to make loans for the costs of establishing programs for the provision of housing in which individuals recovering from alcohol or drug abuse may reside in groups of not less than four individuals; and

WHEREAS, the Department has selected Oxford House Inc., a nonprofit private entity, to collect loan repayments from borrowers and remit such payments to the Contractor on a weekly basis, and to distribute, review and recommend approval of loan applications; and

WHEREAS, the Department has determined that the Contractor is eligible to manage a revolving loan fund and capable to process loan payments and deposit repayments from Oxford House, Inc.; and

WHEREAS, the Department has set aside $100,000.00 from the Alcohol, Drug Abuse and Mental Health Services Block Grant to meet the requirements of Section 1916A of the Anti-Drug Abuse Act of 1988;

THEREFORE, in consideration of the mutual promises contained herein, the parties agree as follows:

I. Performance

1. The Contractor shall establish a Regular Savings Account and a Checking/Daily Dividend Account for the Department to be titled "Pennsylvania Department of Health - Revolving Loan Fund."

2. After this Contract for Service has final Commonwealth approval, the Department will transfer to the Contractor one hundred thousand ($100,000) dollars to be credited to one or both of the aforementioned accounts. The Department and

Contractor shall jointly determine which account(s) shall be credited with all or part of the $100,000 based on the Department's loan projections for the dividend period and the Contractor's method of calculating dividends. In any event, a sound business decision must be made to maximize dividend income to the Department.

3. Upon receipt of funds which are the subject of this Contract the Contractor agrees that it shall perform such services in accordance with the terms set forth in the following attached Appendicies incorporated herein:

Appendix A - Statement of Work
Appendix B - Standard General Terms and Conditions (Rev. 4/85)
Appendix C - Contractor Integrity Provisions

II. Term

The term of this Contract shall begin December 1, 1989, and continue until June 30, 1993.

III. Project Income

All dividend income earned as a result of this Contract shall be credited to the Department's respective accounts on the last day of March, June, September, and December.

IV. Program Information

The Contractor shall be named as a sponsor of this program, along with the Pennsylvania Department of Health, the United States Department of Health and Human Services, and Oxford House, Inc., in any and all publications and press releases related to this program.

V. Modification

No amendment or modification changing the scope, terms of this Contract, services rendered, the special conditions or provisions enumerated, referenced by Appendices or incorporated herein, shall have any force or effect unless it is written and signed by authorized officials of both parties.

ME 87078

APPENDIX A

STATEMENT OF WORK

1. Upon written notification containing the signatures of the Department's Deputy Secretary, Office of Drug and Alcohol Programs or designate and the Department's Comptroller or designate, the Contractor shall remit a check in the amount specified in such notification not to exceed $4,000 to the entity or parties specified in such notification on the same day from receipt of written notification.

2. The Contractor shall provide written notice to Oxford House, Inc., located at 11317 Beach Mill Road, Great Falls, Virginia 22066-0994, as to the date the check was mailed to the approved parties or entity. Such notice shall be mailed or telecopied to Oxford House, Inc. on the same day that the check is mailed.

3. The Contractor shall provide the Department and Comptroller's Office with a financial statement each month at the following addresses or such other addresses for the Department or Comptroller as may be provided in writing by the Department to the Contractor from time to time on the Pennsylvania Department of Health - Revolving Loan Fund Accounts. This statement shall detail all of the activity in the account for the previous month to include: Loan repayments from Oxford House, Inc., dividends paid (if applicable), loan amounts made, beginning balance, and ending balance.

Office of Drug and Alcohol Programs
P.O. Box 90
Room 626 Health and Welfare Building
Harrisburg, PA 17108
ATTN: SHARE Loan Program

Comptroller's Office
Room 1010 Labor and Industry Building
7th and Forster Streets
Harrisburg, PA 17120
ATTN: SHARE Loan Program

4. The Contractor shall deposit loan repayment checks received from Oxford House, Inc. into the account that maximizes dividend income to the Department.

5. During one of the last three working days of each month, the Contractor shall contact the Department to receive the projected loan payments for the subsequent month. From this data, the Contractor shall transfer funds from one account to the other in order to maximize dividend income to the Department.

6. Other than the Department maintaining the account (which is the subject of this contract) with Contractor, the Department shall have no other financial obligation under this contract for services provided hereunder by Contractor other than Contractor having the use of available funds in the accounts in the same manner as Contractor does with any other account in its fiduciary care.

ME 89078

STANDARD GENERAL TERMS AND CONDITIONS

(The following general terms and conditions are standardized contract provisions. They may be varied only with the express permission of the Office of Legal Counsel of the Department of Health. Such permission shall accompany the contract during the process of execution by the Governor's Office, Office of Attorney General and the Department of Health.)

1. **DEFINITIONS**

   (a) **Contract Officer.** The person designated to act for the Department of Health in the processing of this contract. The person so designated is the Director, Division of Contracts.

   (b) **Project Officer.** The person designated to act for the Department of Health in administering this contract.

   (c) **Documentation.** A term used to refer to all materials required to support and convey information about the work and services required by the contract. It includes but is not necessarily restricted to written reports and analyses, diagrams, maps, system designs, computer programs, flow charts, punched card decks and magnetic tapes.

2. **CONTRACT CONSTRUCTION.** The provisions of this contract shall be construed in accordance with the provision of the Laws of the Commonwealth of Pennsylvania. All questions or disputes arising between the parties hereto respecting any matter pertaining to this Agreement or any part thereof or any breach of contract arising thereunder shall be referred by the Contractor to the Board of Claims pursuant to the Act of May 20, 1937, P.L. 728, No. 193, 72 P.S. § 4651-1, as amended. Settlement of disputes under this provision must be prior to the final payment to contractor.

3. **INDEPENDENT CONTRACTOR.** The Contractor shall perform its services under this Agreement as an independent contractor and shall provide public liability, property damage and workers' compensation insurance, insuring as they may appear, the interests of all parties to the Agreement against any and all claims which may arise out of Contractor's operations under the terms of this Agreement. The Contractor shall accept full responsibility for the payment of premiums for workers' compensation and social security as well as all income tax deductions and any other taxes or payroll deductions required by law for its employees who are performing services specified by this Agreement.

4. **DEPARTMENT HELD HARMLESS.** The Contractor agrees to indemnify, defend and save harmless the Commonwealth, its officers, agents and employees: (a) from any and all claims and losses accruing or resulting to any and all contractors, subcontracto materialmen, laborers and any other persons, fir or corporations furnishing or supplying work, se ices, materials or supplies in connection with t performance of this Agreement; and (b) from a and all claims and losses accruing or resulting to a person, firm or corporation who may be injured damaged by the Contractor in the performance this Agreement; and (c) against any liability, inclu ing costs and expenses, for violation of proprieta rights or right of privacy, arising out of the public tion, translation, reproduction, delivery, perfor ance, use or disposition of any data furnished unc this Agreement or based on any libelous or oth unlawful matter contained in such data.

5. **ASSIGNABILITY.** The Contractor shall not assi any interest in this Agreement and shall not transf any interest in the same (whether by assignment novation), without the prior written approval of t Department thereto, which shall be attached to t original Agreement, and subject to such conditio and provisions as the Department may deem nece sary. No such approval by the Department of a assignment shall be deemed in any event or in a manner to provide for the incurrence of any oblig tion of the Department in addition to the tot agreed-upon price. PROVIDED, however, claims f compensation due or to become due the Contract from the Commonwealth under this Agreement m be assigned to a bank, trust company, or other fina cial institution without such approval. Written noti of any such assignment or transfer shall be furnish promptly to the Department. The officials who a authorized to give approval for the Department a the Secretary or the appropriate Deputy Secretary

6. **SUB-CONTRACTS.** Except for those sub-contrac specifically authorized by this contract, Contract shall not enter into sub-contracts for any of the wo contemplated under this Agreement without obta ing prior written approval of the Department, whi shall be attached to the original Agreement, and su ject to such conditions and provisions as the Depa ment may deem necessary. PROVIDED, howeve that notwithstanding the foregoing, unle otherwise provided herein, such prior writte approval shall not be required for the purchase b Contractor of articles, supplies, equipment and ser ices which are both necessary for and merely inc dental to the performance of the work required und this Agreement; and PROVIDED, further, howeve no provision of this clause and no such approval b the Department of any sub-contract shall be deeme in any event in any manner to provide for the incu rence of any obligation of the Department in additio to the total agreed-upon price. The officials who ar authorized to give approval for the Department ar the Secretary, the appropriate Deputy Secretary, o the Project Officer.

APPENDIX C TO AGREEMENT
CONTRACTOR INTEGRITY PROVISIONS

4ME890788

1. **Definitions.**

a. **Confidential information** means information that is not public knowledge, or available to th public on request, disclosure of which would give an unfair, unethical, or illegal advantage to another desiring t contract with the Commonwealth.

b. **Consent** means written permission signed by a duly authorized officer or employe of the Con monwealth, provided that where the material facts have been disclosed, in writing, by prequalification, bi proposal, or contractual terms, the Commonwealth shall be deemed to have consented by virtue of execution of this agreement.

c. **Contractor** means the individual or entity that has entered into this agreement with the Commor wealth, including directors, officers, partners, managers, key employes, and owners of more than a 5% interest.

d. **Financial interest** means:

(1) ownership of more than a 5% interest in any business; or

(2) holding a position as an officer, director, trustee, partner, employe, or the like, or holding any position of management.

e. **Gratuity** means any payment of more than nominal monetary value in the form of cash, travel, entertainment, gifts, meals, lodging, loans, subscriptions, advances, deposits of money, services, employment, or contracts of any kind.

2. The contractor shall maintain the highest standards of integrity in the performance of this agreement and shall take no action in violation of state or federal laws, regulations, or other requirements that govern contracting with the Commonwealth.

3. The contractor shall not disclose to others any confidential information gained by virtue of this agreement.

4. The contractor shall not, in connection with this or any other agreement with the Commonwealth, directly or indirectly, offer, confer, or agree to confer any pecuniary benefit on anyone as consideration for the decision, opinion, recommendation, vote, other exercise of discretion, or violation of a known legal duty by any officer or employe of the Commonwealth.

5. The contractor shall not, in connection with this or any other agreement with the Commonwealth, directly or indirectly, offer, give, or agree or promise to give to anyone any gratuity for the benefit of or at the direction or request of any officer or employe of the Commonwealth.

6. Except with the consent of the Commonwealth, neither the contractor nor anyone in privity with him shall accept or agree to accept from, or give or agree to give to, any person, any gratuity from any person in connection with the performance of work under this agreement except as provided therein.

7. Except with the consent of the Commonwealth, the contractor shall not have a financial interest in any other contractor, subcontractor, or supplier providing services, labor, or material on this project.

8. The contractor, upon being informed that any violation of these provisions has occurred or may occur, shall immediately notify the Commonwealth in writing.

9. The contractor, by execution of this agreement and by the submission of any bills or invoices for payment pursuant thereto, certifies and represents that he has not violated any of these provisions.

10. The contractor shall, upon request of the Office of State Inspector General, reasonably and promptly make available to that office and its representatives, for inspection and copying, all business and financial records of the contractor of, concerning, and referring to this agreement with the Commonwealth or which are otherwise relevant to the enforcement of these provisions.

11. For violation of any of the above provisions, the Commonwealth may terminate this and any other agreement with the contractor, claim liquidated damages in an amount equal to the value of anything received in breach of these provisions, claim damages for all expenses incurred in obtaining another contractor to complete performance hereunder, and debar and suspend the contractor from doing business with the Commonwealth. These rights and remedies are cumulative, and the use or nonuse of any one shall not preclude the use of all or any other. These rights and remedies are in addition to those the Commonwealth may have under law, statute, regulation, or otherwise.

OFFICE OF DRUG & ALCOHOL PROGRAMS

SHARE Loan Balance Sheet and Payment Schedule(6-25-92)

Starting Balance (1/90)	100,000
Subtract Loans to Date	.44,310
Balance	55,690
Add Loan Repayments	26,387
Add Interest Income	11,430
Balance Available to Loan	93,507

Program House Name	Case Number	Approved Loan Amount	Payment Schedule	1991 Planned/Actual Repayments Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	1992 Plan Jan.	Feb.	Mar.	Apr.	May	June
Oxford House-Chew Street	229-001	3,550	150/100	150	180	150	150	150	150	150	150	150	150	150	150	150	100	*	*	*	*
Oxford House-Allentown	229-002	3,550	150/100	150	150	150	150	150	150	150	150	150	150	150	150	150	100	*	*	*	*
Oxford House-Jefferson	136-001	3,500	150/50	150	150	150	150	150	150	150	150	150	150	150	150	0	0	0	0	0	0
York Oxford House	342-001	3,240	135	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
St.Clair Oxford House	401-001	4,000	170/90	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Gordon Oxford House	229-003	3,925	165/130	165	165	165	165	165	165	165	165	165	165	165	165	165	165	165	165	130	*
Oxford House-Allentown II	229-004	4,000	170/90	170	170	170	170	170	170	170	170	170	170	170	170	170	170	170	170	170	90
Oxford House-Queen St.	342-002	2,870	120/110	145	120	120	120	145	145	0	0	0	0	0	0	0	0	0	0	0	0
Oxford House-Turner Street	229-005	3,775	158/141	158	158	158	158	158	158	158	158	158	158	158	158	158	158	158	158	158	158
Oxford House-Dauphin	319-001	3,900	165/105	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Oxford House-Mechanicsburg	318-001	4,000	170/90	170	170	170	170	170	170	170	170	0	0	0	0	0	0	0	0	0	0
Oxford House-Lehigh	229-006	4,000	170/90				170	170	170	170	170	170	195	5	0	0	170	0	0	170	170
12	TOTAL	44,310		1,258	1,263	1,233	1,403	1,428	1,428	1,283	1,283	1,113	1,138	948	943	793	863	493	493	628	416

* REPAID LOAN

EXHIBIT B

EXHIBIT C

NAME OF HOUSE: OXFORD HOUSE-CHEW STREET

ACCOUNT NUMBER: 229-001 APPROVED AMOUNT: $3,550 LATE FEES PAID: $30 TOT.PRINC&FEESOWED

LAST PMT. DUE: 2/15/92 PAID TO DATE: (PRINCIPAL) $3,550 LATE FEESASSESSED: $30 PRINCIPAL OWED:

MONTHLY PAYMENT: 150/100 BALANCE DUE: (PRINCIPAL) $0 TOT.PRINC&FEESPD.: $3,580 LATE FEES OWED:

PAYMENT NUMBER	DATE DUE	DATE RECEIVED	AMOUNT DUE	AMOUNT PAID	LATE FEES ASSESSED	LATE FEES PAID	TOTAL AMOUNT DUE	TOTAL AMOUNT PAID
1	03/15/90	03/20/90	150	150	0	0	150	150
2	04/15/90	04/18/90	150	150	0	0	150	150
3	05/15/90	05/18/90	150	150	0	0	150	150
4	06/15/90	06/14/90	150	150	0	0	150	150
5	07/15/90	07/19/90	150	150	0	0	150	150
6	08/15/90	08/30/90	150	150	0	0	150	150
7	09/15/90	09/19/90	150	150	0	0	150	150
8	10/15/90	10/18/90	150	150	0	0	150	150
9	11/15/90	11/29/90	150	150	0	0	150	150
10	12/15/90	12/24/90	150	150	0	0	150	150
11	01/15/91	01/25/91	150	150	0	0	150	150
12	02/15/91	03/21/91	150	150	30	30	180	180
13	03/15/91	03/21/91	150	150	0	0	150	150
14	04/15/91	04/17/91	150	150	0	0	150	150
15	05/15/91	05/23/91	150	150	0	0	150	150
16	06/15/91	06/24/91	150	150	0	0	150	150
17	07/15/91	07/12/91	150	150	0	0	150	150
18	08/15/91	08/12/91	150	150	0	0	150	150
19	09/15/91	09/13/91	150	150	0	0	150	150
20	10/15/91	10/15/91	150	150	0	0	150	150
21	11/15/91	11/14/91	150	150	0	0	150	150
22	12/15/91	12/09/91	150	150	0	0	150	150
23	01/15/92	01/17/92	150	150	0	0	150	150
24	02/15/92	01/27/92	100	100	0	0	100	100
		TOTAL	3,550	3,550	30	30	3,580	3,580

NAME OF HOUSE: OXFORD HOUSE-ALLENTOWN

ACCOUNT NUMBER: 229-002 APPROVED AMOUNT: $3,550 LATE FEES PAID: $30 TOT.PRINC&FEESOWED

LAST PMT. DUE: 2/15/92 PAID TO DATE: $3,550 LATE FEESASSESSED: $30 PRINCIPAL OWED:
(PRINCIPAL)

MONTHLY PAYMENT: 150/100 BALANCE DUE: $0 TOT.PRINC&FEESPD.: $3,580 LATE FEES OWED:
(PRINCIPAL)

PAYMENT NUMBER	DATE DUE	DATE RECEIVED	AMOUNT DUE	AMOUNT PAID	LATE FEES ASSESSED	LATE FEES PAID	TOTAL AMOUNT DUE	TOTAL AMOUNT PAID
1	03/15/90	03/20/90	150	150	0	0	150	150
2	04/15/90	05/03/90	150	150	30	30	180	180
3	05/15/90	05/16/90	150	150	0	0	150	150
4	06/15/90	06/20/90	150	150	0	0	150	150
5	07/15/90	07/19/90	150	150	0	0	150	150
6	08/15/90	08/30/90	150	150	0	0	150	150
7	09/15/90	09/19/90	150	150	0	0	150	150
8	10/15/90	10/18/90	150	150	0	0	150	150
9	11/15/90	11/27/90	150	150	0	0	150	150
10	12/15/90	12/17/90	150	150	0	0	150	150
11	01/15/91	01/17/91	150	150	0	0	150	150
12	02/15/91	02/08/91	150	150	0	0	150	150
13	03/15/91	03/14/91	150	150	0	0	150	150
14	04/15/91	04/17/91	150	150	0	0	150	150
15	05/15/91	05/23/91	150	150	0	0	150	150
16	06/15/91	06/24/91	150	150	0	0	150	150
17	07/15/91	07/11/91	150	150	0	0	150	150
18	08/15/91	08/15/91	150	150	0	0	150	150
19	09/15/91	09/12/91	150	150	0	0	150	150
20	10/15/91	10/25/91	150	150	0	0	150	150
21	11/15/91	11/25/91	150	150	0	0	150	150
22	12/15/91	12/12/91	150	150	0	0	150	150
23	01/15/92	01/10/92	150	150	0	0	150	150
24	02/15/92	03/12/92	100	100	0	0	100	100
		TOTAL	3,550	3,550	30	30	3,580	3,580

NAME OF HOUSE: OXFORD HOUSE-JEFFERSON

ACCOUNT NUMBER: 136-001 APPROVED AMOUNT: $3,500

LAST PMT. DUE: 3/15/92 PAID TO DATE: (PRINCIPAL) $3,150

MONTHLY PAYMENT: 150/50 BALANCE DUE: (PRINCIPAL) $350

LATE FEES PAID: $90

LATE FEESASSESSED: $190

TOT.PRINC&FEESPD.: $3,240

TOT.PRINC&FEESOWED

PRINCIPAL OWED:

LATE FEES OWED:

PAYMENT NUMBER	DATE DUE	DATE RECEIVED	AMOUNT DUE	AMOUNT PAID	LATE FEES ASSESSED	LATE FEES PAID	TOTAL AMOUNT DUE	TOTAL AMOUNT PAID
1	04/15/90	05/03/90	150	50	30	30	180	80
2	05/15/90	06/20/90	150	250	30	30	180	280
3	06/15/90	06/20/90	150	150	0	0	150	150
4	07/15/90	07/26/90	150	150	0	0	150	150
5	08/15/90	08/30/90	150	150	0	0	150	150
6	09/15/90	09/15/90	150	150	0	0	150	150
7	10/15/90	11/01/90	150	150	30	30	180	190
8	11/15/90	11/27/90	150	150	0	0	150	150
9	12/15/90	12/24/90	150	150	0	0	150	150
10	01/15/91	01/25/91	150	150	0	0	150	150
11	02/15/91	02/28/91	150	150	0	0	150	150
12	03/15/91	03/14/91	150	150	0	0	150	150
13	04/15/91	04/17/91	150	150	0	0	150	150
14	05/15/91	05/23/91	150	150	0	0	150	150
15	06/15/91	06/24/91	150	150	0	0	150	150
16	07/15/91	07/08/91	150	150	0	0	150	150
17	08/15/91	09/03/91	150	150	0	0	150	150
18	09/15/91	09/24/91	150	150	0	0	150	150
19	10/15/91	10/03/91	150	150	0	0	150	150
20	11/15/91	12/17/91	150	150	25	0	175	150
21	12/15/91	12/17/91	150	150	0	0	150	150
22	01/15/92		150	0	25	0	175	0
23	02/15/92		150	0	25	0	175	0
24	03/15/92		50	0	25	0	75	0
	TOTAL		3,500	3,150	190	0	3,690	3,240

NAME OF HOUSE: OXFORD HOUSE-YORK

ACCOUNT NUMBER: 342-001 APPROVED AMOUNT: $3,240 LATE FEES PAID: $0 TOT.PRINC&FEESOW

LAST PMT. DUE: 5/15/92 PAID TO DATE: (PRINCIPAL) $135 LATE FEESASSESSED: $599 PRINCIPAL OWED:

MONTHLY PAYMENT: $135 BALANCE DUE: (PRINCIPAL) $3,105 TOT.PRINC&FEESPD.: $135 LATE FEES OWED:

PAYMENT NUMBER	DATE DUE	DATE RECEIVED	AMOUNT DUE	AMOUNT PAID	LATE FEES ASSESSED	LATE FEES PAID	TOTAL AMOUNT DUE	TOTAL AMOUNT PAID
1	06/15/90	06/29/91	135	135	0	0	135	135
2	07/15/90		135	0	27	0	162	0
3	08/15/90		135	0	27	0	162	0
4	09/15/90		135	0	27	0	162	0
5	10/15/90		135	0	27	0	162	0
6	11/15/90		135	0	27	0	162	0
7	12/15/90		135	0	27	0	162	0
8	01/15/91		135	0	27	0	162	0
9	02/15/91		135	0	27	0	162	0
10	03/15/91		135	0	27	0	162	0
11	04/15/91		135	0	27	0	162	0
12	05/15/91		135	0	27	0	162	0
13	06/15/91		135	0	27	0	162	0
14	07/15/91		135	0	25	0	160	0
15	08/15/91		135	0	25	0	160	0
16	09/15/91		135	0	25	0	160	0
17	10/15/91		135	0	25	0	160	0
18	11/15/91		135	0	25	0	160	0
19	12/15/91		135	0	25	0	160	0
20	01/15/92		135	0	25	0	160	0
21	02/15/92		135	0	25	0	160	0
22	03/15/92		135	0	25	0	160	0
23	04/15/92		135	0	25	0	160	0
24	05/15/92		135	0	25	0	160	0
		TOTAL	3,240	135	599	0	3,839	135

NAME OF HOUSE: OXFORD HOUSE-ST.CLAIR

ACCOUNT NUMBER: 401-001 APPROVED AMOUNT: $4,000 LATE FEES PAID: $0 TOT.PRINC&FEESOWED --

LAST PMT. DUE: 5/15/92 PAID TO DATE: (PRINCIPAL) $0 LATE FEESASSESSED: $717 PRINCIPAL OWED: --

MONTHLY PAYMENT: 170/90 BALANCE DUE: (PRINCIPAL) $4,000 TOT.PRINC&FEESPD.: $0 LATE FEES OWED: --

PAYMENT NUMBER	DATE DUE	DATE RECEIVED	AMOUNT DUE	AMOUNT PAID	LATE FEES ASSESSED	LATE FEES PAID	TOTAL AMOUNT DUE	TOTAL AMOUNT PAID
1	06/15/90		170	0	34	0	204	0
2	07/15/90		170	0	34	0	204	0
3	08/15/90		170	0	34	0	204	0
4	09/15/90		170	0	34	0	204	0
5	10/15/90		170	0	34	0	204	0
6	11/15/90		170	0	34	0	204	0
7	12/15/90		170	0	34	0	204	0
8	01/15/91		170	0	34	0	204	0
9	02/15/91		170	0	34	0	204	0
10	03/15/91		170	0	34	0	204	0
11	04/15/91		170	0	34	0	204	0
12	05/15/91		170	0	34	0	204	0
13	06/15/91		170	0	34	0	204	0
14	07/15/91		170	0	25	0	195	0
15	08/15/91		170	0	25	0	195	0
16	09/15/91		170	0	25	0	195	0
17	10/15/91		170	0	25	0	195	0
18	11/15/91		170	0	25	0	195	0
19	12/15/91		170	0	25	0	195	0
20	01/15/92		170	0	25	0	195	0
21	02/15/92		170	0	25	0	195	0
22	03/15/92		170	0	25	0	195	0
23	04/15/92		170	0	25	0	195	0
24	05/15/92		90	0	25	0	115	0
	TOTAL		4,000	0	717	0	4,717	0

NAME OF HOUSE: OXFORD HOUSE-GORDON

ACCOUNT NUMBER: 229-003 APPROVED AMOUNT: $3,925 LATE FEES PAID: $0 TOT.PRINC&FEESOWED

LAST PMT. DUE: 5/15/92 PAID TO DATE: (PRINCIPAL) $3,925 LATE FEESASSESSED: $0 PRINCIPAL OWED:

MONTHLY PAYMENT: 165/130 BALANCE DUE: (PRINCIPAL) $0 TOT.PRINC&FEESPD.: $3,925 LATE FEES OWED:

PAYMENT NUMBER	DATE DUE	DATE RECEIVED	AMOUNT DUE	AMOUNT PAID	LATE FEES ASSESSED	LATE FEES PAID	TOTAL AMOUNT DUE	TOTAL AMOUNT PAID
1	06/15/90	06/29/90	165	165	0	0	165	165
2	07/15/90	07/19/90	165	165	0	0	165	165
3	08/15/90	08/14/90	165	165	0	0	165	165
4	09/15/90	09/19/90	165	165	0	0	165	165
5	10/15/90	10/18/90	165	165	0	0	165	165
6	11/15/90	11/27/90	165	165	0	0	165	165
7	12/15/90	12/24/90	165	165	0	0	165	165
8	01/15/91	01/25/91	165	165	0	0	165	165
9	02/15/91	02/21/91	165	165	0	0	165	165
10	03/15/91	03/21/91	165	165	0	0	165	165
11	04/15/91	04/17/91	165	165	0	0	165	165
12	05/15/91	05/20/91	165	165	0	0	165	165
13	06/15/91	06/28/91	165	165	0	0	165	165
14	07/15/91	07/18/91	165	165	0	0	165	165
15	08/15/91	08/19/91	165	165	0	0	165	165
16	09/15/91	09/11/91	165	165	0	0	165	165
17	10/15/91	10/24/91	165	165	0	0	165	165
18	11/15/91	11/15/91	165	165	0	0	165	165
19	12/15/91	12/17/91	165	165	0	0	165	165
20	01/15/92	01/13/92	165	165	0	0	165	165
21	02/15/92	02/05/92	165	165	0	0	165	165
22	03/15/92	03/11/92	165	165	0	0	165	165
23	04/15/92	03/31/92	165	165	0	0	165	165
24	05/15/92	04/15/92	130	130	0	0	130	130
		TOTAL	3,925	3,925	0	0	3,925	3,925

NAME OF HOUSE: OXFORD HOUSE-ALLENTOWN 2

ACCOUNT NUMBER: 229-004 APPROVED AMOUNT: $4,000 LATE FEES PAID: $34 TOT.PRINC&FEESOWED $(illegible)

LAST PMT. DUE: 06/15/92 PAID TO DATE: (PRINCIPAL) $4,000 LATE FEESASSESSED: $34 PRINCIPAL OWED: $0

MONTHLY PAYMENT: 170/90 BALANCE DUE: (PRINCIPAL) $0 TOT.PRINC&FEESPD.: $4,034 LATE FEES OWED: $0

PAYMENT NUMBER	DATE DUE	DATE RECEIVED	AMOUNT DUE	AMOUNT PAID	LATE FEES ASSESSED	LATE FEES PAID	TOTAL AMOUNT DUE	TOTAL AMOUNT PAID
1	07/15/90	07/26/90	170	170	0	0	170	170
2	08/15/90	08/30/90	170	170	0	0	170	170
3	09/15/90	09/15/90	170	170	0	0	170	170
4	10/15/90	10/15/90	170	170	0	0	170	170
5	11/15/90	11/27/90	170	170	0	0	170	170
6	12/15/90	12/24/90	170	170	34	34	204	204
7	01/15/91	01/25/91	170	170	0	0	170	170
8	02/15/91	02/21/91	170	170	0	0	170	170
9	03/15/91	03/21/91	170	170	0	0	170	170
10	04/15/91	04/17/91	170	170	0	0	170	170
11	05/15/91	05/23/91	170	170	0	0	170	170
12	06/15/91	06/24/91	170	170	0	0	170	170
13	07/15/91	07/11/91	170	170	0	0	170	170
14	08/15/91	08/08/91	170	170	0	0	170	170
15	09/15/91	09/17/91	170	170	0	0	170	170
16	10/15/91	10/10/91	170	170	0	0	170	170
17	11/15/91	11/19/91	170	170	0	0	170	170
18	12/15/91	12/13/91	170	170	0	0	170	170
19	01/15/92	01/17/92	170	170	0	0	170	170
20	02/15/92	02/14/92	170	170	0	0	170	170
21	03/15/92	03/13/92	170	170	0	0	170	170
22	04/15/92	04/13/92	170	170	0	0	170	170
23	05/15/92	06/17/92	170	170	0	0	170	170
24	06/15/92	06/17/92	90	90	0	0	90	90
	TOTAL		4,000	4,000	34	34	4,034	4,034

NAME OF HOUSE: OXFORD HOUSE-QUEEN STREET

ACCOUNT NUMBER: 342-002 APPROVED AMOUNT: $2,870 LATE FEES PAID: $75 TOT.PRINC&FEESOWED

LAST PMT. DUE: 9-15-92 PAID TO DATE: (PRINCIPAL) $1,080 LATE FEESASSESSED: $350 PRINCIPAL OWED:

MONTHLY PAYMENT: 120/110 BALANCE DUE: (PRINCIPAL) $1,790 TOT.PRINC&FEESPD.: $1,155 LATE FEES OWED:

PAYMENT NUMBER	DATE DUE	DATE RECEIVED	AMOUNT DUE	AMOUNT PAID	LATE FEES ASSESSED	LATE FEES PAID	TOTAL AMOUNT DUE	TOTAL AMOUNT PAID
1	10/15/90	10/30/91	120	120	0	0	120	120
2	11/15/90	11/30/91	120	120	0	0	120	120
3	12/15/90	12/19/90	120	120	0	0	120	120
4	01/15/91	02/19/91	120	120	25	25	145	145
5	02/15/91	03/08/91	120	120	0	0	120	120
6	03/15/91	03/29/91	120	120	0	0	120	120
7	04/15/91	05/03/91	120	120	0	0	120	120
8	05/15/91	06/28/91	120	120	25	25	145	145
9	06/15/91	08/29/91	120	120	25	25	145	145
10	07/15/91		120	0	25	0	145	0
11	08/15/91		120	0	25	0	145	0
12	09/15/91		120	0	25	0	145	0
13	10/15/91		120	0	25	0	145	0
14	11/15/91		120	0	25	0	145	0
15	12/15/91		120	0	25	0	145	0
16	01/15/92		120	0	25	0	145	0
17	02/15/92		120	0	25	0	145	0
18	03/15/92		120	0	25	0	145	0
19	04/15/92		120	0	25	0	145	0
20	05/15/92		120	0	25	0	145	0
21	06/15/92							
22	07/15/92							
23	08/15/92							
24	09/15/92							
	TOTAL		2,400	1,080	350	[illegible]	[illegible]	1,155

NAME OF HOUSE: OXFORD HOUSE-TURNER

ACCOUNT NUMBER: 229-005 APPROVED AMOUNT: $3,775 LATE FEES PAID: $0 TOT.PRINC&FEESOWED $

LAST PMT. DUE: 9/15/92 PAID TO DATE: (PRINCIPAL) $3,318 LATE FEESASSESSED: $0 PRINCIPAL OWED: $

MONTHLY PAYMENT: 158/141 BALANCE DUE: (PRINCIPAL) $457 TOT.PRINC&FEESPD.: $3,318 LATE FEES OWED: $

PAYMENT NUMBER	DATE DUE	DATE RECEIVED	AMOUNT DUE	AMOUNT PAID	LATE FEES ASSESSED	LATE FEES PAID	TOTAL AMOUNT DUE	TOTAL AMOUNT PAID
1	10/15/90	10/22/90	158	158	0	0	158	158
2	11/15/90	11/27/90	158	158	0	0	158	158
3	12/15/90	12/28/90	158	158	0	0	158	158
4	01/15/91	01/25/91	158	158	0	0	158	158
5	02/15/91	02/21/91	158	158	0	0	158	158
6	03/15/91	03/14/91	158	158	0	0	158	158
7	04/15/91	04/22/91	158	158	0	0	158	158
8	05/15/91	05/23/91	158	158	0	0	158	158
9	06/15/91	06/24/91	158	158	0	0	158	158
10	07/15/91	07/12/91	158	158	0	0	158	158
11	08/15/91	08/08/91	158	158	0	0	158	158
12	09/15/91	09/13/91	158	158	0	0	158	158
13	10/15/91	10/25/91	158	158	0	0	158	158
14	11/15/91	11/14/91	158	158	0	0	158	158
15	12/15/91	12/04/91	158	158	0	0	158	158
16	01/15/92	01/15/92	158	158	0	0	158	158
17	02/15/92	02/05/92	158	158	0	0	158	158
18	03/15/92	03/12/92	158	158	0	0	158	158
19	04/15/92	04/15/92	158	158	0	0	158	158
20	05/15/92	05/06/92	158	158	0	0	158	158
21	06/15/92	06/11/92	158	158	0	0	158	158
22	07/15/92							
23	08/15/92							
24	09/15/92							
	TOTAL		3,318	3,318	0	0	3,318	3,318

NAME OF HOUSE: OXFORD HOUSE-DAUPHIN

ACCOUNT NUMBER: 319-001 APPROVED AMOUNT: $3,900 LATE FEES PAID: $0 TOT.PRINC&FEESOWED:

LAST PMT. DUE: 9/15/92 PAID TO DATE: (PRINCIPAL) $330 LATE FEESASSESSED: $506 PRINCIPAL OWED:

MONTHLY PAYMENT: 165/105 BALANCE DUE: (PRINCIPAL) $3,570 TOT.PRINC&FEESPD.: $330 LATE FEES OWED:

PAYMENT NUMBER	DATE DUE	DATE RECEIVED	AMOUNT DUE	AMOUNT PAID	LATE FEES ASSESSED	LATE FEES PAID	TOTAL AMOUNT DUE	TOTAL AMOUNT PAID
1	10/15/90	11/01/90	165	165	0	0	165	165
2	11/15/90	11/15/90	165	165	0	0	165	165
3	12/15/90		165	0	33	0	198	0
4	01/15/91		165	0	33	0	198	0
5	02/15/91		165	0	33	0	198	0
6	03/15/91		165	0	33	0	198	0
7	04/15/91		165	0	33	0	198	0
8	05/15/91		165	0	33	0	198	0
9	06/15/91		165	0	33	0	198	0
10	07/15/91		165	0	25	0	190	0
11	08/15/91		165	0	25	0	190	0
12	09/15/91		165	0	25	0	190	0
13	10/15/91		165	0	25	0	190	0
14	11/15/91		165	0	25	0	190	0
15	12/15/91		165	0	25	0	190	0
16	01/15/92		165	0	25	0	190	0
17	02/15/92		165	0	25	0	190	0
18	03/15/92		165	0	25	0	190	0
19	04/15/92		165	0	25	0	190	0
20	05/15/92		165	0	25	0	190	0
21	06/15/92							
22	07/15/92							
23	08/15/92							
24	09/15/92							
		TOTAL	3,300	330	506	0	3,806	330

NAME OF HOUSE: OXFORD HOUSE-MECHANICSBURG

ACCOUNT NUMBER: 318-001 APPROVED AMOUNT: $4,000 LATE FEES PAID: $0 TOT.PRINC&FEESOWED --

LAST PMT. DUE: 12/15/92 PAID TO DATE: (PRINCIPAL) $1,360 LATE FEESASSESSED: $225 PRINCIPAL OWED: --

MONTHLY PAYMENT: 17[illegible] BALANCE DUE: (PRINCIPAL) $2,640 TOT.PRINC&FEESPD.: $1,360 LATE FEES OWED: --

PAYMENT NUMBER	DATE DUE	DATE RECEIVED	AMOUNT DUE	AMOUNT PAID	LATE FEES ASSESSED	LATE FEES PAID	TOTAL AMOUNT DUE	TOTAL AMOUNT PAID
1	01/15/91	01/25/91	170	170	0	0	170	170
2	02/15/91	02/28/91	170	170	0	0	170	170
3	03/15/91	03/28/91	170	170	0	0	170	170
4	04/15/91	04/22/91	170	170	0	0	170	170
5	05/15/91	05/20/91	170	170	0	0	170	170
6	06/15/91	06/24/91	170	170	0	0	170	170
7	07/15/91	07/16/91	170	170	0	0	170	170
8	08/15/91	08/19/91	170	170	0	0	170	170
9	09/15/91		170	0	25	0	195	0
10	10/15/91		170	0	25	0	195	0
11	11/15/91		170	0	25	0	195	0
12	12/15/91		170	0	25	0	195	0
13	01/15/92		170	0	25	0	195	0
14	02/15/92		170	0	25	0	195	0
15	03/15/92		170	0	25	0	195	0
16	04/15/92		170	0	25	0	195	0
17	05/15/92		170	0	25	0	195	0
18	06/15/92							
19	07/15/92							
20	08/15/92							
21	09/15/92							
22	10/15/92							
23	11/15/92							
24	12/15/92							
	TOTAL		2,990	1,360	[illegible]		[illegible]	1,360

NAME OF HOUSE: OXFORD HOUSE-LEHIGH

ACCOUNT NUMBER: 229-006 APPROVED AMOUNT: $4,000 LATE FEES PAID: $25 TOT.PRINC&FEESOWED 995

LAST PMT. DUE: 3/15/93 PAID TO DATE: (PRINCIPAL) $1,705 LATE FEESASSESSED: $175 PRINCIPAL OWED: $845

MONTHLY PAYMENT: 170/90 BALANCE DUE: (PRINCIPAL) $2,295 TOT.PRINC&FEESPD.: $1,730 LATE FEES OWED: 50

PAYMENT NUMBER	DATE DUE	DATE RECEIVED	AMOUNT DUE	AMOUNT PAID	LATE FEES ASSESSED	LATE FEES PAID	TOTAL AMOUNT DUE	TOTAL AMOUNT PAID
1	04/15/91	04/22/91	170	170	0	0	170	170
2	05/15/91	05/22/91	170	170	0	0	170	170
3	06/15/91	06/24/91	170	170	0	0	170	170
4	07/15/91	07/22/91	170	170	0	0	170	170
5	08/15/91	08/14/91	170	170	0	0	170	170
6	09/15/91	09/16/91	170	170	0	0	170	170
7	10/15/91	11/21/91	170	170	25	25	195	195
8	11/15/91		170	5	25	0	195	5
9	12/15/91		170	0	50	0	220	0
10	01/15/92		170	0	25	0	195	0
11	02/15/92	02/19/92	170	170	0	0	170	170
12	03/15/92		170	0	25	0	195	0
13	04/15/92		170	0	25	0	195	0
14	05/15/92	05/21/92	170	170	0	0	170	170
15	06/15/92	06/24/92	170	170	0	0	170	170
16	07/15/92							
17	08/15/92							
18	09/15/92							
19	10/15/92							
20	11/15/92							
21	12/15/92							
22	01/15/93							
23	02/15/93							
24	03/15/93							
	TOTAL		2,550	1,705	175	25	2,725	1,730

EXHIBIT D

EXISTING SHARE LOAN PROGRAM RECIPIENTS

NAME OF HOUSE	ADDRESS	PHONE#	# of BEDS	TYP
Oxford House-Chew Street	1736 Chew Street Allentown, PA 18105	215-433-1431	8	Men
Oxford House-Allentown	515 1/2 N. Eighth Street Allentown, PA 18105	215-437-6645	8	Wom
Oxford House-Gordon	1224 Gordon Street Allentown, PA 18102	215-435-8404	9	Men
Oxford House-Allentown II	1544 Chew Street Allentown, PA 18102	215-434-4474	8	Wom
Oxford House-Turner Street	1319 Turner Street Allentown, PA 18102	215-433-1985	8	Men
Oxford House-York	1000 E. Princess Street York, PA 17403	717-854-1319	8	Men
Oxford House-York II	634 S. Queen Street York, PA 17403	717-843-4698	8	Men
Oxford House-Jefferson	209 W. Jefferson Street Philadelphia, PA 19122	215-634-9088	9	Men
Oxford House-St. Clair	220 S. St. Clair Avenue Pittsburgh, PA 15208	412-361-2030	10	Men
Oxford House-Dauphin	1872 Route 22/322 Dauphin, PA 17108	717-921-8485	7	Men
Oxford House-Mechanicsburg	14 Greenway Drive Mechanicsburg, PA 17055	717-790-9066	8	Men
Oxford House-Lehigh	227 N. Seventh Street Allentown, PA 18102	215-439-8015	8	Men

8/91

EXHIBIT E

Commonwealth of Pennsylvania

DEPARTMENT OF HEALTH

DEPUTY SECRETARY
Office of Drug and Alcohol Programs

Dear

The Pennsylvania Department of Health, Office of Drug and Alcohol Programs (ODAP), is pleased to inform you that the application you submitted under the SHARE Loan Program has been approved in the amount of $_____. A check in the amount of $_____ will be mailed to your house within the next five days. This amount is only to be used to pay for the following: _____. A second check in the amount of $_____ will be mailed directly to the Landlord within five days.

I have enclosed the monthly SHARE Loan Coupon and Operations Report Form. Please submit your monthly payment with the corresponding monthly SHARE Loan Coupon and Operations Report Form in the enclosed, self-addressed envelopes. The information at the bottom of this form must be completed each month. Your first monthly payment in the amount of $_____ is due to ODAP on _____. Checks MUST be made payable to the "PSECU/SHARE Loan Program".

If you have any questions, please contact the SHARE Loan Officer at (717) 787-2712.

Sincerely,

[illegible]ne D. Peterson
[illegible], Secretary for Drug and
[illegible]hol Programs

CC: Bob Williams

MONTHLY SHARE LOAN COUPON AND OPERATIONS REPORT

PENNSYLVANIA DEPARTMENT OF HEALTH

OFFICE OF DRUG AND ALCOHOL PROGRAMS

Borrower's Name: _____ Account Number: _____

Payment Number: _____ of 24 Total Payments

	Date	Amount
Payment Due On Or Before:		
Late Payment If Received After:		

MAKE CHECK PAYABLE TO: PSECU/SHARE Loan Program (Include Account # on Check)

PLEASE COMPLETE THE FOLLOWING INFORMATION:

(a) How many applications did you receive last month for admission into the house?_____

(b) How many admissions were made into the house last month?_____

(c) How many residents left the house last month for the following reasons?
Voluntary_____ + Relapse_____ + Other_____ = Total_____

(d) Number of residents in the house at the end of last month?_____

_____ _____
Signature: House President Date

INSTRUCTIONS ON NEW RESIDENTS:

New residents admitted into the house last month must complete SHARE Loan Application Forms A and B, page 3. Also, if a new resident(s) is replacing a former resident(s), include the name(s) of the former resident(s) on the bottom of the new resident's SHARE Loan Application Form A. Please send these forms with this report.

MAIL CHECK, THIS COUPON AND REPORT AND, IF APPLICABLE, SHARE LOAN APPLICATION FORMS A AND B, PAGE 3 TO:

Pennsylvania Department of Health
Office of Drug and Alcohol Programs
Grants Management Section
P.O. Box 90
Room 626, HLW Bldg.
Harrisburg, PA 17108

SHARE LOAN AUTHORIZATION FORM (PA)

NAME OF SHARE HOUSE:
CASE NUMBER:
RECOMMENDATION: ☐ APPROVE ☐ DISAPPROVE
APPROVED LOAN AMOUNT:
(a) MAKE CHECK(S) PAYABLE TO: (NAME, ADDRESS, AND AMOUNT) (b)
MONTHLY PAYMENT: DURATION OF LOAN: MONTHS PAYMENT TO BEGIN ON:

APPROVED BY:

PA DEPARTMENT OF HEALTH, (DATE)
OFFICE OF DRUG AND ALCOHOL PROGRAMS
Richard J. Trynoski or Rocco L. Claroni

PA DEPARTMENT OF HEALTH, (DATE)
OFFICE OF DRUG AND ALCOHOL PROGRAMS
Jeannine D. Peterson or Harriet A. Lindsay

COMPTROLLER, (DATE)
PENNSYLVANIA DEPARTMENT OF HEALTH

I hereby certify that the Pennsylvania State Employees Credit Union has remitted a check(s) in the above amount(s) to the above individual(s) or entity(s) on the date listed below.

PENNSYLVANIA STATE EMPLOYEES CREDIT UNION (DATE)

(Revised 6/18/90)

REJECTION OR ADDITIONAL INFORMATION LETTER

We have received your application to obtain a loan under the Self-Help Addiction Recovery Environment (SHARE) Loan Program. At this time, we are unable to approve your loan request for the following reasons:

By addressing each of our above concerns in writing, we will be able to reconsider your loan request. However, a written response must be received in this office within (30) days of the date of this letter in order to be reconsidered for a loan. Please contact the SHARE Loan Officer at (717) 787-2712 if you have any questions.

Sincerely,

Pete Pennington
Program Services

STD-501, 9-66

DATE:

COMMONWEALTH OF PENNSYLVANIA
(717) 787-9564

SUBJECT: SHARE Loan Program. Loan Repayment

TO: Bob Williams, Accountant
PHES Comptroller's Office

FROM: Rocco Claroni, Budget Analyst
Office of Drug and Alcohol Programs

Attached is a loan repayment check(s) in the amount of $_____ from _____.

Please deposit this check(s) in our PSECU account. Please contact me at 787-9564 if you have any questions.

Commonwealth of Pennsylvania

Department of Health

HARRISBURG

(717) 787-9564

Dear

The Pennsylvania Department of Health, Office of Drug and Alcohol Programs (ODAP), approved a loan in the amount of $_____ for your house under the Self-Help Addiction Recovery Environment (SHARE) Loan Program. In receiving the loan, your house agreed to repay the approved amount in equal monthly installments over a period of two years. Your _____ payment in the amount of $_____ has not been received by this office. Therefore, a $25 late fee has been added which increases the amount due to the Department to $_____. Please remit a check in this amount to our office within ten days from the date of this letter to avoid further penalties.

Please contact me at (717) 787-9564 if you have any questions.

Sincerely,

[illegible] Claroni
[illegible]t Analyst
[illegible]ion of Grants Management
[illegible] of Community Assistance

Rocco L. Claroni, Project Officer 717-783-8307

Harriet Lindsay, Alternate 717-783-8307

CONTRACT FOR SERVICES

ME #90083

This Contract is between the Commonwealth of Pennsylvania, Department of Health, Office of Drug and Alcohol Programs (hereinafter referred to as Department) and Oxford House, Inc. (OHI) located at 11317 Beach Mill Road, Great Falls, Virginia 22066-0994 (hereinafter referred to as Contractor).

WHEREAS, the Anti-Drug Abuse Act of 1988 (Public Law 100-690, approved November 18, 1988) amended Subpart I of Part B of Title XIX of the Public Health Service Act (42 U.S.C. § 300x) by adding a new Section 1916A, 42 U.S.C. §300x-4a, establishing a program entitled Group Homes for Recovering Substance Abusers; and

WHEREAS, the Department has established a $100,000 revolving loan fund through the Pennsylvania State Employees Credit Union (PSECU) to disburse loans to nonprofit private entities for the costs of establishing programs for the provision of housing in which individuals recovering from alcohol or drug abuse may reside in groups of not less than four individuals and for PSECU to receive and deposit loan repayments; and

WHEREAS, the purpose of this contract is for OHI to receive and screen loan applications and make recommendations to the Department as to whether to approve loan applications and for OHI to collect loan repayments for deposit in the Department's PSECU revolving account; and

WHEREAS, the immediately prior contract between the parties contained a renewal option for two additional years, and the parties by this contract desire to renew for one additional year with a further option to renew for one additional year.

THEREFORE, in consideration of the mutual promises contained herein, the parties agree as follows:

I. Performance

In return for the funds which are the subject of this Contract the Contractor agrees that it shall perform such services in accordance with the terms set forth in the following attached Appendices, incorporated herein:

Appendix A - Statement of Work

Appendix B - Budget

Appendix C - Standard General Terms and Conditions (Rev. 4/85)

Appendix D - Contractor Integrity Provisions

Appendix E - SHARE Loan Program Guidelines

II. Term

The term of this Contract shall be from July 1, 1990 to June 30, 1991. This Contract may be renewed for a one-year period subject to written agreement by the Department and the Contractor. Any such renewal shall only be evidenced by further written agreement executed by authorized officials of both parties and approved in writing by the Secretary of the Budget.

III. Contract Cost and Payment

The Department shall pay the Contractor in accordance with the budget, attached hereto as Appendix B and made a part of this Contract and in accordance with payment provisions herein. The maximum dollar amount of this Contract shall be nine thousand nine hundred sixty ($9,960) dollars.

IV. Modification

No amendment or modification changing the scope, terms of this Contract, services rendered, budget items, the special conditions or provisions enumerated, referenced by Appendices or incorporated herein, shall have any force or effect unless it is written and signed by both parties.

APPENDIX A

STATEMENT OF WORK

SELF-HELP ADDICTION RECOVERY ENVIRONMENTS (SHARE) LOAN PROGRAM

1. The Contractor shall receive all inquiries from potential loan applicants concerning this program.

2. The Contractor shall forward loan applications, program guidelines, and an Oxford House Manual to all prospective applicants.

3. If requested by applicants, the contractor shall assist applicants in completing loan applications.

4. The Contractor shall conduct telephone interviews with all applicants to verify their understanding of the program.

5. The Contractor shall verify the validity of the loan request by contacting the landlord to verify the lease terms and address of the proposed property. The Contractor shall also contact the local AA/NA community to verify the existence, location and suitability of the proposed house.

6. The Contractor shall forward completed loan applications to the Department with a recommendation. If the Department and its

Comptroller's Office concur with the contractor's recommendation for approval, the Pennsylvania State Employes Credit Union (PSECU) will be notified by the Department to remit a check to the party or entity specified in the application. The contractor shall be notified in writing by the PSECU as to the date the check was mailed.

7. The Contractor shall collect all loan repayments and late fees, if applicable, from approved applicants. The contractor shall remit a check payable to the "Pennsylvania Department of Health - Revolving Loan Fund" each Friday to the PSECU for all loan repayments and late fees received during that week. Applicants shall make checks payable to "Oxford House, Inc." The Department shall receive two copies of the check and a narrative indicating which loan accounts should be credited from the Contractor.

8. On the first day of each month, the contractor shall forward to the Department a detailed financial report for the previous month which includes the following:

   a. Total new starts for the month

   b. Cumulative results of the program

   c. Loan payments due for the month

   d. Remittance due to PSECU.

e. Detailed cumulative results by county and loan recipient broken down by men's and women's houses. This report shall include:

(1) Cumulative results:

- total bed capacity
- original loan amount
- payments to date
- loan balance
- total fees assessed

(2) Current period results:

- beginning balance
- coupon amount due
- fees assessed
- payments received
- ending balance

9. The Contractor shall forward monthly to the Department an operations report for the previous month which includes the following:

a. Total number of beds.

b. Current month:

(1) Beginning number of residents.

(2) Number of applications.

(3) Number of admissions.

(4) Total number leaving house:

- voluntary departures
- relapse
- other cause

(5) End of month number of residents.

c. Number of vacancies.

d. Cumulative from inception:

(1) Number of applications.

(2) Number of admissions.

(3) Number leaving house:

- voluntary departures
- relapse
- other cause

10. The Contractor shall provide the Department and any interested treatment provider in the Commonwealth with access to the Contractor's computer-generated on-line vacancy report.

11. The Contractor shall notify the loan recipient and the Department of any missed payment. A missed payment is one which is more than thirty (30) days past due.

12. The Contractor shall consider a loan delinquent when a payment is more than forty-five (45) days past due.

13. The Contractor shall send four notices to the loan recipient of a delinquent account. The first notice shall specify that payment is due immediately. Subsequent notices, the first, second, and third past due notices are to be sent at thirty day intervals. Two copies of each notice shall also be submitted to the Department.

14. The Contractor shall notify the Department of any account in which no payment has been made in a 135-day period. The Department will submit a delinquent claim for collection or write-off or compromise to the Collections Unit of the Office of Attorney General.

15. In the event a house defaults on a loan because it dissolves or ignores its obligation to pay, the Contractor shall use its best efforts to assist the house to reorganize and get payments resumed.

16. The Contractor shall be responsible to verify that the Program Guidelines under the Share Loan Program, attached hereto as Appendix E, are adhered to by all approved loan applicants.

17. The Contractor shall notify the Department during any of the last three days of each month as to the number of new loans and the estimated dollar amounts required for the following month.

APPENDIX B

BUDGET

The Contractor shall be paid $830.00 each month for services rendered in accordance with Appendix A of this Agreement. This amount is a fixed rate derived from the Contractor's projected line item budget listed below for the period July 1, 1990 to June 30, 1991 divided by twelve months. As described in Appendix A of this Agreement, the Contractor shall submit detailed financial and operations reports to the Department on the first day of each month. Upon receipt of these reports and a monthly invoice, the Department will begin to process a check in the amount of $830.00 to be paid to the Contractor.

LINE ITEM	APPROVED AMOUNT
Direct Labor	$4,781
Labor Overhead	598
General and Administrative	1,195
Other Direct Costs	3,386
TOTAL:	$9,960

7601

STANDARD GENERAL TERMS AND CONDITIONS

(The following general terms and conditions are standardized contract provisions. They may be varied only with the express permission of the Office of Legal Counsel of the Department of Health. Such permission shall accompany the contract during the process of execution by the Governor's Office, Office of Attorney General and the Department of Health.)

1. **DEFINITIONS**

   (a) **Contract Officer.** The person designated to act for the Department of Health in the processing of this contract. The person so designated is the Director, Division of Contracts.

   (b) **Project Officer.** The person designated to act for the Department of Health in administering this contract.

   (c) **Documentation.** A term used to refer to all materials required to support and convey information about the work and services required by the contract. It includes but is not necessarily restricted to written reports and analyses, diagrams, maps, system designs, computer programs, flow charts, punched card decks and magnetic tapes.

2. **CONTRACT CONSTRUCTION.** The provisions of this contract shall be construed in accordance with the provision of the Laws of the Commonwealth of Pennsylvania. All questions or disputes arising between the parties hereto respecting any matter pertaining to this Agreement or any part thereof or any breach of contract arising thereunder shall be referred by the Contractor to the Board of Claims pursuant to the Act of May 20, 1937, P.L. 728, No. 193, 72 P.S. § 4651-1, as amended. Settlement of disputes under this provision must be prior to the final payment to contractor.

3. **INDEPENDENT CONTRACTOR.** The Contractor shall perform its services under this Agreement as an independent contractor and shall provide public liability, property damage and workers' compensation insurance, insuring as they may appear, the interests of all parties to the Agreement against any and all claims which may arise out of Contractor's operations under the terms of this Agreement. The Contractor shall accept full responsibility for the payment of premiums for workers' compensation and social security as well as all income tax deductions and any other taxes or payroll deductions required by law for its employees who are performing services specified by this Agreement.

4. **DEPARTMENT HELD HARMLESS.** The Contractor agrees to indemnify, defend and save harmless the Commonwealth, its officers, agents and employees: (a) from any and all claims and losses accruing or resulting to any and all contractors, subcontractors, materialmen, laborers and any other persons, firms or corporations furnishing or supplying work, services, materials or supplies in connection with the performance of this Agreement; and (b) from any and all claims and losses accruing or resulting to any person, firm or corporation who may be injured or damaged by the Contractor in the performance of this Agreement; and (c) against any liability, including costs and expenses, for violation of proprietary rights or right of privacy, arising out of the publication, translation, reproduction, delivery, performance, use or disposition of any data furnished under this Agreement or based on any libelous or other unlawful matter contained in such data.

5. **ASSIGNABILITY.** The Contractor shall not assign any interest in this Agreement and shall not transfer any interest in the same (whether by assignment or novation), without the prior written approval of the Department thereto, which shall be attached to the original Agreement, and subject to such conditions and provisions as the Department may deem necessary. No such approval by the Department of any assignment shall be deemed in any event or in any manner to provide for the incurrence of any obligation of the Department in addition to the total agreed-upon price. PROVIDED, however, claims for compensation due or to become due the Contractor from the Commonwealth under this Agreement may be assigned to a bank, trust company, or other financial institution without such approval. Written notice of any such assignment or transfer shall be furnished promptly to the Department. The officials who are authorized to give approval for the Department are the Secretary or the appropriate Deputy Secretary.

6. **SUB-CONTRACTS.** Except for those sub-contracts specifically authorized by this contract, Contractor shall not enter into sub-contracts for any of the work contemplated under this Agreement without obtaining prior written approval of the Department, which shall be attached to the original Agreement, and subject to such conditions and provisions as the Department may deem necessary. PROVIDED, however, that notwithstanding the foregoing, unless otherwise provided herein, such prior written approval shall not be required for the purchase by Contractor of articles, supplies, equipment and services which are both necessary for and merely incidental to the performance of the work required under this Agreement; and PROVIDED, further, however, no provision of this clause and no such approval by the Department of any sub-contract shall be deemed in any event in any manner to provide for the incurrence of any obligation of the Department in addition to the total agreed-upon price. The officials who are authorized to give approval for the Department are the Secretary, the appropriate Deputy Secretary or the Project Officer.

Rev. 1-...

CONTRACTOR INTEGRITY PROVISIONS

1. Definitions.

a. Confidential information means information that is not public knowledge, or available to the public on request, disclosure of which would give an unfair, unethical, or illegal advantage to another desiring to contract with the Commonwealth.

b. Consent means written permission signed by a duly authorized officer or employe of the Commonwealth, provided that where the material facts have been disclosed, in writing, by prequalification, bid, proposal, or contractual terms, the Commonwealth shall be deemed to have consented by virtue of execution of this agreement.

c. Contractor means the individual or entity that has entered into this agreement with the Commonwealth, including directors, officers, partners, managers, key employes, and owners of more than a 5% interest.

d. Financial interest means:

(1) ownership of more than a 5% interest in any business; or

(2) holding a position as an officer, director, trustee, partner, employe, or the like, or holding any position of management.

e. Gratuity means any payment of more than nominal monetary value in the form of cash, travel, entertainment, gifts, meals, lodging, loans, subscriptions, advances, deposits of money, services, employment, or contracts of any kind.

2. The contractor shall maintain the highest standards of integrity in the performance of this agreement and shall take no action in violation of state or federal laws, regulations, or other requirements that govern contracting with the Commonwealth.

3. The contractor shall not disclose to others any confidential information gained by virtue of this agreement.

4. The contractor shall not, in connection with this or any other agreement with the Commonwealth, directly or indirectly, offer, confer, or agree to confer any pecuniary benefit on anyone as consideration for the decision, opinion, recommendation, vote, other exercise of discretion, or violation of a known legal duty by any officer or employe of the Commonwealth.

5. The contractor shall not, in connection with this or any other agreement with the Commonwealth, directly or indirectly, offer, give, or agree or promise to give to anyone any gratuity for the benefit of or at the direction or request of any officer or employe of the Commonwealth.

6. Except with the consent of the Commonwealth, neither the contractor nor anyone in privity with him shall accept or agree to accept from, or give or agree to give to, any person, any gratuity from any person in connection with the performance of work under this agreement except as provided therein.

7. Except with the consent of the Commonwealth, the contractor shall not have a financial interest in any other contractor, subcontractor, or supplier providing services, labor, or material on this project.

8. The contractor, upon being informed that any violation of these provisions has occurred or may occur, shall immediately notify the Commonwealth in writing.

9. The contractor, by execution of this agreement and by the submission of any bills or invoices for payment pursuant thereto, certifies and represents that he has not violated any of these provisions.

10. The contractor shall, upon request of the Office of State Inspector General, reasonably and promptly make available to that office and its representatives, for inspection and copying, all business and financial records of the contractor of, concerning, and referring to this agreement with the Commonwealth or which are otherwise relevant to the enforcement of these provisions.

11. For violation of any of the above provisions, the Commonwealth may terminate this and any other agreement with the contractor, claim liquidated damages in an amount equal to the value of anything received in breach of these provisions, claim damages for all expenses incurred in obtaining another contractor to complete performance hereunder, and debar and suspend the contractor from doing business with the Commonwealth. These rights and remedies are cumulative, and the use or nonuse of any one shall not preclude the use of all or any other. These rights and remedies are in addition to those the Commonwealth may have under law, statute, regulation, or otherwise.

APPENDIX E

PENNSYLVANIA DEPARTMENT OF HEALTH

OFFICE OF DRUG AND ALCOHOL PROGRAMS (ODAP)

P.O. BOX 90, ROOM 626 HEALTH AND WELFARE BUILDING

HARRISBURG, PA 17108

SELF-HELP ADDICTION RECOVERY ENVIRONMENTS (SHARE)

LOAN PROGRAM GUIDELINES

1. The applicant may be a non-profit private entity, such as a group of at least four recovering individuals, who are not organized as a legal corporation, association, partnership or firm. Or, the applicant may be a non-profit legal entity, such as a legal corporation, association, partnership, or firm, that sponsors at least four recovering individuals.

2. Loans shall not exceed $4,000.

3. Each loan shall be repaid in monthly installments within two years. Loan recipients shall have the option of choosing a repayment schedule of 6 months, 12 months, 18 months, or 24 months. Prepayment of the loan is permitted. Loan repayments shall be due on the 15th day of each month. A late fee of $25.00 or 20% of the amount due, whichever is greater, shall be assessed to each payment received after the thirtieth day of each month.

4. Loan funds can be applied for any legitimate cost associated with the establishment of a recovery house, to include:

   a. security deposits;

   b. first month's rent; and

   c. after all other sources have been exhausted, the purchase of used amenities which foster healthy group living.

5. The borrower must maintain the house as an alcohol and drug free environment.

6. The residents of the house must remain alcohol and drug free.

7. Any resident of the house who uses alcohol or drugs will be expelled from the house.

8. The costs of the house including rent, utilities, and other expenses will be paid by the residents.

9. The house will be operated as a self-managed democracy.

10. A $25.00 penalty shall be assessed against any house that remits a loan repayment check with insufficient funds to cover the repayment amount.

11. The proposed house must be located in the Commonwealth of Pennsylvania.

12. Loans under the SHARE program are available to establish new houses only. Once the residents of the house have been approved for a loan, they cannot apply for additional loans for the same house.

13. If payment of the loan is not made within 135 days of the due date, the loan will be considered in default and referred to the Collections Unit of the Attorney General's Office.

14. The location of the Home must be in a good area of the community and not in areas conducive to relapse.

15. There shall be at least four bedrooms in the proposed house that can accommodate up to six individuals. There shall be one bathroom or shower for every four individuals. Each house shall accommodate only persons of the same gender.

16. The residents in the house at any given time will be responsible to repay the loan.

17. Loans shall not be made to individuals that reside in "rooming houses." Loans shall only be made to individuals that reside in a typical family home.

Commonwealth of Pennsylvania

Department of Health

HARRISBURG

Dear Applicant:

We urge you contact our office prior to consumating any agreement with a landlord, so that we can inspect the property to determine its appropriatness as a Share Loan house.

Our telephone number is 717-787-2712

Sincerely,

Peter Pennington
Share loan officer

"SHARE LOAN" HOUSE RULES

Recovery from substance is a difficult undertaking. It has been said, "success breeds success." Your desire to obtain and share living quarters with other recovering persons is a major step toward sustaining a sucessful recovery. The Office of Drug and Alcohol Programs applauds your courage in taking this positive step and offers the following guidelines to help you to succeed in your venture. These rules are meant to cover the basic issues.

You will probably need to develop additional rules to apply to your particular house.

1. Organize a **DEMOCRATIC** house.

Each member of the house should have one vote. The majority, one more than half the voting membership, shall rule. A vote should be taken on any issue affecting the house members. The members will need to first develop some rules, in addition to these, for the operation of the house. These added rules should be kept to a mimimum, addressing issues such as pets, guests, responsibility for cleaning and upkeep, etc.

Remember, in a Democratic house, the majority will determine which rules will apply in the house.

2. Elect **OFFICERS.**

Officers will be responsible for the operation of the house. There should be three or five officers. Two officers shall be responsible for handling the finances of the house. There should be a checking account requiring at least two signatures to write a check. At the weekly meeting, an accounting of the weeks receipts from rents and payment of bills shall be given. The house meeting shall be run by one of the elected officers.

3. House members should be involved with a **SUPPORT SYSTEM.**

Every house members should belong to a support system. This may be Alcoholics Anonymous, an outpatient treatment program, church, etc. It is important, during recovery, to associate with one or more positive groups.

4. **NO USE OF ALCOHOL OR DRUGS BY HOUSE MEMBERS.**

There shall be no exceptions to this rule. When a house member is suspected of drug or alcohol use, a special house meeting should be called. The house members, following a review of the case, take a vote. The majority rules. Members should attempt to get the offender into detox immediately, if possible; nonetheless, it is important that the offender be removed from the house as soon as possible, within a 24 hour period. The house should establish rules concerning readmission.

5. **Become INVOLVED IN THE NEIGHBORHOOD.**

Become involved in local organizations, keep the area around the house attractive and be generally considerate and helpful to your neighbors.

6. ?????

It's your house; you must take it from here. Plan your rules carefully.....YOU HAVE TO LIVE BY THEM.

Commonwealth of Pennsylvania

DEPARTMENT OF HEALTH
717-787-9857

DEPUTY SECRETARY
Office of Drug and Alcohol Programs

Dear Applicant:

I have enclosed the information you requested on the Commonwealth of Pennsylvania's Self-Help Addiction Recovery Environment (SHARE) loan program. This program provides loans up to $4,000 for the provision of housing in which four or more individuals recovering from alcoholism or other drug addiction may reside. The money may be used to pay the first month's rent and/or security deposit for the home, purchase used furniture and appliances, such as a washer and dryer or beds, or to pay utility deposits.

Applications will be reviewed in the order received by this office. To expedite our review of your application, please address all of the requested information and include all supporting documentation along with your application. If your loan is approved, one check will be made payable and mailed directly to the landlord and another check will be made payable and mailed directly to the house. Therefore, it is imperative to open up a bank account in the name of the house.

If you have any questions about the program, please contact the SHARE loan officer at 717-787-2712.

Sincerely,

Jeannine D. Peterson

Jeannine D. Peterson
Deputy Secretary for
Drug and Alcohol Programs

Commonwealth of Pennsylvania

Department of Health

HARRISBURG

SHARE LOAN PROGRAM APPLICATION INSTRUCTIONS

Attached are Form A and Form B, pages 1-3. These [illegible] must be completed in full and signed by ALL the individuals that will reside in the proposed recovery house. Before you proceed and complete the application forms, be sure to have all the co-applicants read and understand the attached SHARE Loan Program Guidelines.

Form A of the application MUST be completed by EACH individual that will reside in the proposed recovery house. Thus, if six individuals comprise a group that applies for a loan, all six individuals must complete Form A. All of the information requested on Form A is self-explanatory. Please remember to submit evidence of each co-applicant's income, i.e. copy of checkstub or public assistance check, with the application in order for us to verify income. Also, be sure to provide us with a letter from the post detox treatment facility each co-applicant last attended in order for us to verify that each co-applicant has completed a licensed treatment program.

Form B, p. 1, must include the names of all the individuals that will reside in the proposed recovery house. Please remember to submit a copy of the lease and house operating rules and regulations. At a minimum, the house operating rules and regulations should contain the following: the house will be alcohol and drug free; any resident that resumes the use of alcohol or drugs will be immediately expelled; the house will be managed democratically, meaning each house member has an equal vote in all house decisions; and that all expenses associated with residing in the house will be paid by the residents. A copy of the bank's signature card must be included with the application in order for us to verify that your group has established a house bank account. Also, be sure to contact your local Internal Revenue Service (IRS) office to obtain the proper forms necessary to file for a federal tax identification number for the house's bank account.

Form B, p. 3, must be signed and dated by <u>all</u> the individuals that will reside in the proposed recovery house. additional individuals move into the house after the loan is

approved, be sure to have each new individual sign and date Form B, p. 3 and complete Form A. Both forms must be submitted to this office immediately along with a narrative indicating the name(s) of the individual(s) that left the house and the reason(s) for their leaving. In the event the house dissolves and loan repayments are no longer being made, the individuals that are registered with the Commonwealth (Completed Form A and signed Form B, p. 3) at the time the house dissolves will be liable for full repayment of the loan and any late fees.

Also enclosed is the SHARE Loan Application Checklist. Please review this prior to submitting your application in order to be sure that you have included all of the requested information.

OFFICE OF DRUG AND ALCOHOL PROGRAMS (ODAP)

SELF-HELP ADDICTION RECOVERY ENVIRONMENTS (SHARE)

LOAN PROGRAM GUIDELINES

A. Applicant Guidelines

1. The applicant must be a non-profit, private entity of at least four recovering individuals (six are recommended). Applicants may not be non-profit private treatment providers. However, non-profit private treatment providers may assist a group of at least four recovering individuals in locating a suitable house, opening a house bank account, completing the loan application, etc.

2. The borrower must maintain the house as an alcohol and drug free environment.

3. The residents of the house must remain alcohol and drug free and be of the same gender.

4. Any resident of the house who uses alcohol or drugs will be expelled from the house.

5. The costs of the house including rent, utilities, and other expenses will be paid by the self-supporting residents.

6. The house will be operated as a self-managed democracy.

7. The house must be fully operational with at least four residents within 45 days of the release of funds.

B. Loan Guidelines

1. Loans shall not exceed $4,000.

2. Each loan shall be repaid in equal monthly installments within two years from the date the loan was made. Prepayment of the loan is permitted. Loan repayments shall be due on the 15th day of each month. The first monthly payment is due on the 15th day of the month following the month in which the loan is approved. A late fee of $25.00 shall be assessed to each payment received after the thirtieth day of each month. There will be no interest charged on the loan.

3. Applicants shall only apply for loan funds to pay for the following:

   a. security deposit and first month's rent for the house;
   b. security deposits for utilities; and
   c. used furniture and appliances, such as beds, dressers, couches, stoves, refrigerators, dishwashers, and microwave ovens. The portion of the loan which may be applied to purchase the aforementioned appliances and furniture shall not exceed a total of $1,500. Loan requests for furniture and appliances shall contain a narrative justifying the purchase and

documentation supporting the amount requested for the purchase. Purchase of the above items may be subject to verification.

4. The following costs are ineligible under the SHARE loan program:

   a. major or minor renovations to the rental property;
   b. the purchase of a building or new furniture and appliances;
   c. operating costs associated with residing in the house that include utilities, food, supplies, taxes, rent, etc.
   d. the purchase or rental of an automobile or recreational equipment such as a television, stereo, camera, camcorder, pool table, etc.
   e. any other item not included in section B-3 of these guidelines.

5. A $25.00 penalty shall be assessed against any house that remits a loan repayment check with insufficient funds to cover the repayment amount.

6. If payment of the loan is not made within 135 days of the due date, the loan will be considered in default and referred to the Collections Unit of the Attorney General's Office.

7. The signers of the loan will be responsible to repay the loan. In the event any resident(s) who originally signed the loan application relapses or moves out of the house, the new resident(s) will be responsible to pay his or her share of the loan balance due. Therefore, it is imperative to have new residents complete Form A and Form B, page 3 of the SHARE Loan Application, and submit both forms immediately to this office along with a brief letter indicating the name(s) of the individual(s) that left the house and the reason(s) for their leaving. In the event the house dissolves and loan repayments are no longer being made, the individuals that completed the most recent Form A and a signed Form B - page 3 are liable for full repayment of the loan and any late fees. Any proceeds from the sale of furnishings purchased with the loan shall be remitted to ODAP up to the remaining balance of the loan and fees. The landlord of the house shall remit any balance of the house security deposit to ODAP up to the remaining balance of the loan and fees.

C. House Guidelines

1. The proposed house must be located in the Commonwealth of Pennsylvania.

2. Loans under the SHARE program are available to establish new houses only. Once the residents of the house have been approved for a loan, they cannot apply for additional loans for the same house. Individuals who are in default on a loan under this program may not apply for a loan to start a new house.

3. The proposed house must not be in an area of the community which is conducive to relapse.

4. There must be at least one bedroom for every two members of the house.

5. There shall be one full bathroom for the first four individuals. For five to eight individuals, a minimum of one and one-half bathrooms are required. For nine individuals or more, a minimum of two full bathrooms are required.

6. Loans shall not be made to individuals that reside in or wish to establish a "rooming house." A rooming house is defined as a house with a manager who oversees operations and collects the rent. Loans shall only be made to individuals that reside in a typical family home.

7. The Department of Health, Office of Drug and Alcohol Programs (ODAP), will inspect the proposed house to determine if guidelines C-3, C-4, C-5, and C-6 have been met. This inspection shall be conducted as part of the loan application review process.

8. If the above guidelines are not followed, the outstanding balance of the loan will become due immediately.

FORM A

SHARE LOAN PROGRAM

(Please Print)

Name: Last First Middle

Present Address (Street, City, Zip Code)

Social Security No. Drivers License No.

Birthdate Phone (home) (work)

EMPLOYMENT, INCOME AND TREATMENT INFORMATION

Name of Present Employer

Employer's Address

Job Title How Long? Yrs. Mos.

Supervisor's Name Phone

Monthly Gross Income and Source (PROVIDE EVIDENCE OF INCOME, I.E.,CHECK STUBS, COPY OF PUBLIC ASSISTANCE CHECK, ETC.)

Monthly Expenses Excluding Housing Costs

Are you currently in or have you completed a certified treatment program?

Yes ☐ No ☐ Dates in Program: From: To:

PROVIDE PROOF OF TREATMENT POST-DETOX. ATTACH A LETTER FROM THE FACILITY.

Name, address, and type of program (residential, halfway house, outpatient):

Length of Sobriety? #of AA/NA Meetings attended weekly?

Primary Addiction?

THIS FORM MUST BE COMPLETED BY ALL INDIVIDUALS THAT WILL RESIDE IN THE HOUSE.

OFFICE OF DRUG AND ALCOHOL PROGRAMS — LOAN APPLICATION
SHARE LOAN PROGRAM — FORM A

(Please Print)

Name: Last First Middle

Present Address (Street, City, Zip Code)

Social Security No. Drivers License No.

Birthdate Phone (home) (work)

EMPLOYMENT, INCOME AND TREATMENT INFORMATION

Name of Present Employer

Employer's Address

Job Title How Long? Yrs. Mos.

Supervisor's Name Phone

Monthly Gross Income and Source (PROVIDE EVIDENCE OF INCOME, I.E.,CHECK STUBS, COPY OF PUBLIC ASSISTANCE CHECK, ETC.)

Monthly Expenses Excluding Housing Costs

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Yes [ ] No [ ] Dates in Program: From: To:

PROVIDE PROOF OF TREATMENT POST-DETOX. ATTACH A LETTER FROM THE FACILITY.

Name, address, and type of program (residential, halfway house, outpatient):

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FORM A

SHARE LOAN PROGRAM

(Please Print)

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Social Security No. Drivers License No.

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Name of Present Employer

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Monthly Expenses Excluding Housing Costs

Are you currently in or have you completed a certified treatment program?

Yes ☐ No ☐ Dates in Program: From: To:

PROVIDE PROOF OF TREATMENT POST-DETOX. ATTACH A LETTER FROM THE FACILITY.

Name, address, and type of program (residential, halfway house, outpatient):

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PROVIDE PROOF OF TREATMENT POST-DETOX. ATTACH A LETTER FROM THE FACILITY.

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Length of Sobriety? #of AA/NA Meetings attended weekly?

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SHARE LOAN APPLICATION
FORM A

OFFICE OF DRUG AND ALCOHOL PROGRAMS
SHARE LOAN PROGRAM

(Please Print)

Name: Last First Middle

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Monthly Expenses Excluding Housing Costs

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Yes ☐ No ☐

Dates in Program: From: To:

PROVIDE PROOF OF TREATMENT POST-DETOX. ATTACH A LETTER FROM THE FACILITY.

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OFFICE OF DRUG AND ALCOHOL PROGRAMS
SHARE LOAN PROGRAM

SHARE LOAN APPLICATION
FORM A

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PROGRAMS FORM A

SHARE LOAN PROGRAM

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OFFICE OF DRUG AND ALCOHOL PROGRAMS
SHARE LOAN PROGRAM

FORM A

(Please Print)

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Social Security No. Drivers License No.

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Monthly Expenses Excluding Housing Costs

Are you currently in or have you completed a certified treatment program?

Dates in Program: From: To:

Yes ☐ No ☐

PROVIDE PROOF OF TREATMENT POST-DETOX. ATTACH A LETTER FROM THE FACILITY.

Name, address, and type of program (residential, halfway house, outpatient):

Length of Sobriety? #of AA/NA Meetings attended weekly?

Primary Addiction?

THIS FORM MUST BE COMPLETED BY ALL INDIVIDUALS THAT WILL RESIDE IN THE HOUSE.

Co-Applicants Name (Please Print)

1. _____ 5. _____

2. _____ 6. _____

3. _____ 7. _____

4. _____ 8. _____

Loan amount requested (See form B, p. 2):

Proposed name of house:
(ATTACH A COPY OF THE HOUSE OPERATING RULES AND REGULATIONS)

Address:

City, state, zip code:

Name and phone number of contact person:

Maximum no. of residents: No. of bedrooms: No. of beds:

No. of full bathrooms: No. of half bathrooms:

Name and phone number of landlord:

Address of landlord:

Is the landlord the owner, property manager or both?

Owner |_| Property Manager |_| Both |_|

Term of lease: (INCLUDE A COPY OF THE LEASE WITH THIS APPLICATION.)

Total monthly rent:

Estimated monthly utility costs:

Estimated monthly housing costs per resident:

Has a bank account been established in the House's name? Yes |_| No |_|
(PROVIDE COPY OF THE SIGNATURE CARD. AT A MINIMUM, THE SIGNATURE CARD MUST INCLUDE THE BANK'S NAME, YOUR ACCOUNT NUMBER, THE BANK'S PHONE NUMBER, AND THE NAMES OF THE INDIVIDUALS AUTHORIZED TO SIGN CHECKS.)

LOAN AMOUNT JUSTIFICATION
(Cannot exceed $4,000)

HOUSE RENTAL:

First month's rent $_____

Security Deposit $_____

TOTAL AMOUNT TO LANDLORD $_____

UTILITY DEPOSITS:

Name_____ $_____

Name_____ $_____

Name_____ $_____

TOTAL UTILITY DEPOSITS $_____

USED FURNITURE AND APPLIANCES: (Include a narrative justifying the purchase and documentation supporting the amount requested for the purchase. This amount cannot exceed $1,500).

Item_____ $_____

Item_____ $_____

Item_____ $_____

TOTAL FURNITURE AND APPLIANCES $_____

TOTAL TO APPLICANT $_____

TOTAL LOAN AMOUNT REQUESTED $_____

The undersigned hereby certify that they are recovering from addiction to alcohol and/or other drugs and that the proposed recovery house will be alcohol and drug free. The undersigned further certify to the following: (1) all residents of the house will be alcohol and drug free; (2) any resident of the house who resumes the use of drugs or alcohol will be expelled immediately; (3) the cost of the housing, including rent and utilities, will be paid by the residents of the house; (4) the house will be operated as a self-managed democracy; (5) the approved loan amount wi be repaid to the Commonwealth within two years from the month following the month i which the loan is approved; (6) a late fee of $25.00 shall be paid to the Commonwealth on all loan repayment checks received after the thirtieth day of each month; (7) a $25.00 penalty fee shall be paid to the Commonwealth for loan repaymen checks with insufficient funds to cover the repayment amount; and (8) the attached SHARE Loan Program Guidelines, which are incorporated into this certification by reference and made a part hereof, shall be adhered to. We hereby certify that all the information in this application is true and complete to the best of our knowled and we authorize the Office of Drug and Alcohol Programs to verify the information contained herein in order to evaluate this application.

Signature	Date	Signature	Date
Signature	Date	Signature	Date
Signature	Date	Signature	Date
Signature	Date	Signature	Date

The following information must be submitted to the Office of Drug and Alcohol Programs in order to be considered for a loan under the SHARE Loan Program.

(1) Forms A and B - SHARE Loan Application
(2) Evidence of Income (i.e., copy of check stubs or public assistance checks) for each co-applicant
(3) A copy of the proposed lease or a signed lease with the landlor
(4) A copy of the House Operating Rules and Regulations
(5) Evidence of Post-Detox Treatment (letter from treatment facilit for each co-applicant.
(6) A narrative justifying the purchase of used furniture and appliances and documentation supporting the amount requested for the purchase of such items.
(7) Copy of the Bank Signature Card that includes at a minimum, the Bank's name, Applicant's account number, the Bank's phone number, an the names of the individuals authorized to sign checks.

MAIL THE ABOVE INFORMATION TO:

Pennsylvania Department of Health
Office of Drug and Alcohol Programs
SHARE Loan Program
P.O. Box 90
Room 626 Health and Welfare Building
Harrisburg, PA 17108

EXHIBIT G

SHARE Loan Program
Operating Procedures

I. Loan Application Requests Procedures

A. Telephone and written inquiries shall be referred to the Bureau of Program Services (BPS).

B. BPS shall request the following: caller's name, address, phone number, agency affiliated with, date of call, and reason for call.

C. BPS shall type this information on the "SHARE Loan Program - Information Request Log" (see attachment C) and send the requested information to the individual within two days from the date of the request. The date that the information is sent to the individual shall also be entered on the "Information Request Log" by BPS.

II. Loan Application Processing Procedures

A. BPS receives application and logs in date received on the "Applications Received Log Form" (see attachment A).

B. BPS makes two (2) copies of application and distributes (1) to Grants Management (GM), and (1) to BPS. Original gets inserted in Applicant's file which BPS will now start. BPS shall make copies of application and distribute to appropriate individuals on same day as application is received.

C. GM assigns an account number and performs a review in accordance with the Application Review Checklist (see attachment B). This review should be conducted within five working days from the receipt date of the application.

D. BPS reviews application in accordance with the Application Review Checklist (see attachment B) within five working days from the receipt date of the application. GM requests field representative from Division of Licensing or Monitoring to visit and perform a site review of the house in accordance with the site review checklist (see attachment D) within five working days from the receipt date of the application.

E. BPS and GM review Field Representative's report and meet to make a recommendation if the application should be approved. This meeting should be held within 6-10

working days from the receipt date of the application. Application is sent to BCA Bureau Director and Deputy Secretary with a recommendation of approval.

F. If approved, GM sends the applicant an approval letter (see attachment E) along with the monthly repayment coupons and operations report forms (see attachment F) and self-addressed envelopes. GM shall also complete a Loan Authorization Form (see attachment G) and submit it to the Comptroller's Office.

G. If disapproved, the BPS shall send a rejection letter (see attachment H) to the applicant informing them of the reason(s) the application was not approved and what additional information, if applicable, is needed for approval.

III. Loan Repayment Processing Procedures

A. GM (CT-3) receives all Loan Repayment checks.

B. GM (CT-3) enters date received and amount on applicant's loan repayment computer file.

C. GM (CT-3) makes 1 copy of check. GM (CT-3) completes "SHARE Loan Program Loan Repayment" memo (see attachment I), makes one copy of it and handcarries the check and original memo to Bob Williams or Karen Hare in Room 1018, L&I Building. This must be done on the same day that the check is received.

D. GM (CT-3) shall create a fiscal sub-file in the applicant's master file that includes the coupon, copy of check, copy of memo, and the applicant's envelope, which must be stamp dated, that contained the check.

E. In the event the CT-3 is not at work, checks shall be given to the BA-3. The BA-3 shall then perform the functions of the CT-3. In the event the BA-3 and CT-3 are not at work, the Budget Analyst II shall perform the above functions.

F. BPS shall prepare a monthly occupancy report for each house from the information submitted on the monthly SHARE Loan Coupon and Operations Report form.

G. CT-3 will monitor monthly loan repayments and prepare a "Late Fee" letter for the BA-3's signature (see attachment J) to be sent to the borrower for each month that the amount is not paid. If repayment is not made within 135 days of the due date, the CT-3 shall

notify the BA-3 and the loan will be considered in default and referred to the Collections Unit of the Attorney General's Office.

H. CT-3 shall prepare a monthly SHARE Loan Program Balance Sheet and individual loan updates for each house. This shall be completed and submitted to the BA-3 by the 5th day of each month.

ATTACHMENT A

ICATIONS RECEIVED LOG FORM

COMMENTS FISCAL	COMMENTS PROGRAM	DATE OF ADDTL. INFORMAT. LETTER	DATE ADDTL. INFORMAT. RECEIVED	DATE APPROVAL LTR&COUPON SENT TO APPLICANT	DATE CHECKS MAILED TO APPLICANT& LANDLORD

I. APPLICATION REVIEW CHECKLIST

SHARE LOAN APPLICATION
A. FISCAL REVIEW CHECKLIST

Name of Applicant:_____
Name of Reviewer:_____
Date of Review:_____

1) Does the loan exceed $4,000?

( ) yes ( ) no

2) How much is being requested for the following:

a. security deposit.....$_____
b. first month's rent.....$_____
c. utility security deposit.....$_____
d. used furniture and appliances.....$_____
(cannot exceed $1,500)

3) Does the amount requested for the security deposit and/or first month's rent agree with the amount in the proposed lease?

( ) yes ( ) no

If no, please explain.

4) Is there an invoice or proposed amount on the utility company's letterhead that justifies the utility security deposit(s)?

( ) yes ( ) no

5) Is there a request for used furniture or appliances?

( ) yes ( ) no

If yes, describe proposed purchase(s).

Does the request for used furniture and/or appliances exceed $1,500?

( ) yes ( ) no

Is there a narrative justifying the proposed purchase(s) and documentation supporting the amount requested for the purchase?

( ) yes ( ) no

Describe the documentation.

6) Has the applicant requested items that are ineligible under the SHARE Loan Program?

( ) yes ( ) no

If yes, describe.

7) Has the applicant submitted a copy of the Bank Signature Card that includes: bank name, applicant's name, applicant's account number, bank's phone number, and the names of the individuals authorized to sign checks?

( ) yes ( ) no

If no, describe.

8) Contact the bank and verify that the account exists and that the name of the account is the same as the Applicant so that the check is made out to the proper party.

Comments:

9) Are the individuals authorized to sign checks also listed as co-applicants in the application?

( ) yes ( ) no

10) Contact the house to verify if they filed the necessary IRS forms to obtain a Federal Identification number. Have them send us proof that this was done.

Date of phone call:_____

Did applicant obtain ID#?

( ) yes ( ) no Comments:

11) Has the applicant submitted evidence of income for each resident that will reside in the proposed house?

( ) yes ( ) no

12) List the names of each co-applicant, their monthly gross income, and the source of income:

NAME OF CO-APPLICANT MONTHLY GROSS INCOME SOURCE OF INCOME

1.
2.
3.
4.
5.
6.
7.
8.
9.
10.

13) Have the co-applicants' supervisors been contacted to verify employment?

( ) yes ( ) no

Comments:

14) Has the applicant submitted a copy of the proposed lease or a signed lease with landlord?

( ) yes ( ) no

15) What is the term of the lease?

1 yr.____ 2 yr.____ 3 yr.____ If more than 3 yrs. list the number of years ____

16) If the lease term is 1 year, is it renewable?

( ) yes ( ) no

17) Has the landlord been contacted to verify the lease terms?

( ) yes ( ) no

Date of telephone conversation:_____
Name of person you talked with:_____
Comments:

18) Monthly housing cost analysis:

a. maximum number of beds:_____
b. monthly rent:_____
c. monthly utilities cost:_____
d. monthly SHARE Loan Repayment:_____
e. total monthly housing cost:_____
f. e divided by a = monthly housing cost per resident

_____

(19) MONTHLY INCOME ANALYSIS

(A) CO-APPLICANT'S NAME	(B) MONTHLY GROSS INCOME	(C) INCOME NEEDED FOR MONTHLY EXPENSES (.4 x (b))	(D) MONTHLY HOUSING EXPENSES	(E) MONTHLY NON-HOUSING EXPENSES	(F) STATU (c - (d

*If the computation yields a number greater than or equal to zero, the co-applicant is approved.

Describe location:

7) If the house is to be made up of four individuals, are there at least two bedrooms?

( ) yes ( ) no

How many bedrooms are there actually in the house? _____

How many residents can comfortably be accommodated in these bedrooms? _____

8) How many full/half bathrooms are there in the house?

full bathrooms _____ half bathrooms _____

Are there enough bathrooms to accommodate the proposed number of residents in accordance with the Guidelines?

( ) yes ( ) no

If no, please explain.

9) Do the residents understand Guideline B-7?

( ) yes ( ) no

10) Has the applicant requested funds to establish a rooming house? A rooming house is defined as a house with a manager who oversees operations and collects the rent.

( ) yes ( ) no

11) Has the applicant submitted evidence that each resident who will reside in the proposed house has completed a post-detox treatment program (letters from treatment facilities)?

( ) yes ( ) no

If no, please explain.

*ATTACH COPY OF SITE REVIEW CHECKLIST

SHARE LOAN APPLICATION
B. PROGRAM REVIEW CHECKLIST

Name of Applicant:_____
Date of Review:_____
Name of Reviewer:_____

1) Describe the applicant.

( ) a. non-profit private entity, such as a group of at least four recovering individuals

( ) b. non-profit private treatment provider

( ) c. for-profit private treatment provider

2) Are the residents of the proposed house of the same gender?

( ) yes ( ) no

3) Did the applicant include a copy of the House Operating Rules and Regulations?

( ) yes ( ) no

If yes, does this document contain, at a minimum, the following: the house will be alcohol and drug free; any resident that resumes the use of alcohol or drugs will be immediately expelled; the house will be managed democratically, meaning each house member has an equal vote in all house decisions; and that all expenses associated with residing in the house will be paid by the residents.

( ) yes ( ) no

4) Is the house located in the Commonwealth of Pennsylvania?

( ) yes ( ) no

5) Has this house been approved for any prior loans?

( ) yes ( ) no

If yes, list approval date._____

6) Is the proposed house located in an area of the community which is conducive to relapse?

( ) yes ( ) no

SHARE LOAN PROGRAM INFORMATION REQUESTS LOG

DATE	NAME OF CALLER	AGENCY & ADDRESS	REASON FOR CALL	DATE INFO SENT

ATTACHMENT C

ATTACHMENT D

SHARE LOAN PROGRAM
SITE REVIEW CHECKLIST

Date:

Applicant's Name:

Address:

Phone:

Contact (s):

Representative Conducting Visit:

FACILITY DESCRIPTION:

Exterior Condition (brick, stucco, frame, yard, fenced, repairs)

_____
_____
_____
_____
_____
_____

Interior Condition (first, second, third floor, # of full and half bathrooms, # of beds & bedrooms, dining facilities, living/ socialization areas)

_____
_____
_____
_____
_____
_____
_____
_____
_____

Capacity: **Actual:** Male ( ) Female ( )

How many residents can comfortably be accommodated in the house? _____

Income generated enterprises within the house (Dances, Bingo)

Condition and location of the neighborhood. (Specify) Is the house located in an area of the community which is conducive to relapse?

Do the residents require assistance with regard to the Share-Loan (budgets, public relations, etc.)?

Is there an external agent or agency who provides supervision or places requirements on the residents, i.e., a treatment facility/landlord?

What are the stipulations?

Are funds to be used to establish a Rooming House? A rooming house is defined as a house with a manager who oversees operations and collects the rent.

Are the applicants committed to living in the house in accordance with the operating rules and regulations they submitted?

Do they understand that each house must be democratically run and must elect officers?

Do they understand that each home must hold weekly meetings?

Do they understand that anyone who returns to drinking or substances must be expelled?

Do they understand that individuals residing at the house must have a source of income to pay their fair share of the home expenses?

Do they understand that the loan must be repaid in equal monthly installments and a fee of $25.00 will be charged for late payments?

Are the residents of the house of the same gender?

Do they understand that the residents in the house <u>at any given time</u> will be responsible to repay the loan? In the event any resident(s) who originally signed the loan application relapses or moves out of the house, the new resident(s) will be responsible to pay his or her share of the loan balance due. Therefore, it is imperative to have <u>new</u> residents complete Form A and Form B, page 3 of the SHARE Loan Application, and submit both

forms immediately to this office along with a brief letter indicating the name(s) of the individual(s) that left the house and the reason(s) for their leaving. In the event the house dissolves and loan repayments are no longer being made, the individuals that are registered with the Commonwealth (completed Form A and a signed Form B - page 3) at the time the house dissolves will be liable for full repayment of the loan and any late fees.

ADDITIONAL COMMENTS/OBSERVATIONS:

_____

_____

_____

_____