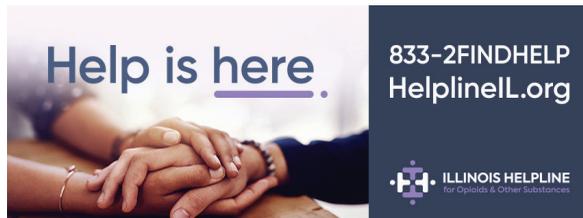


Division of Substance Use Prevention and Recovery

The use and misuse of substances are major health concerns with negative and long-lasting impacts on individuals and families. However, individuals can and do recover from substance use disorders (SUD) with treatment and other support services. In fact, there are multiple paths to recovery including treatment licensed by the Illinois Department of Human Services, Division of Substance Use Prevention and Recovery (IDHS/SUPR).

Affordable treatment and recovery support services are available from more than 163 IDHS/SUPR funded and licensed organizations across Illinois from more than 900 licensed facilities, for individuals including the uninsured and underinsured. The location of these and other related services can be obtained from the Illinois Opioid and Other Substance Use Helpline (1-833-2FINDHELP), text "HELP" to 833234, or visit the website www.helplineil.org.



Programs, activities and employment opportunities in the Illinois Department of Human Services are open and accessible to any individual or group without regard to age, sex, race, sexual orientation, disability, ethnic origin or religion. The department is an equal opportunity employer and practices affirmative action and reasonable accommodation programs.



State of Illinois
Department of Human Services

Division of Substance Use Prevention and Recovery



Overview

The Illinois Department of Human Services Division of Substance Use Prevention and Recovery (IDHS/SUPR) is the state's lead agency for addressing the profound personal, social and economic consequences of substance use disorders. IDHS/SUPR oversees a network of community-based substance use prevention and substance use disorder treatment and recovery programs. Prevention and treatment services are delivered through a network of organizations in communities throughout Illinois. The treatment system provides assessment, diagnosis, treatment, continuing care and recovery services to individuals with substance use disorders.

The disease of addiction as manifest through Substance Use Disorders (SUD's) affect millions of Illinoisans. Substance use disorders occur when the repeated use of alcohol and/or drugs causes significant clinical and functional impairment, such as health problems, disability, and failure to meet major responsibilities at work, school, or home. Specific SUD criteria are defined in the Diagnostic and Statistical Manual Fifth Edition (DSM-5).

A substance use disorder is a brain disease in the same sense that hearts or lungs may become diseased. When alcohol or other drugs are consumed, they activate or imitate the brain chemistry associated with feelings of well-being, pleasure, and euphoria. Although a person does control the initial decision to have a drink or try a drug, once the alcohol or other drugs are in the body, they begin to modify brain neurochemistry. As modification occurs, the brain becomes dependent on the chemical intake of the substances, causing the person to develop a substance use disorder. The changes in the brain may last beyond detoxification and exhibited in repeated relapses, and intense cravings when the person is exposed to substance-related stimuli. Brain dependency makes it extremely difficult for individuals to stop using the substances.

Decades of scientific research and clinical practice have yielded a variety of effective approaches to substance use disorder treatment. Research has shown that treatment can benefit an individual just as treatment for other chronic diseases like hypertension or diabetes.

Treatment and recovery support vary, depending on the type of drug and characteristics of the user. The best services provide a combination or continuum of therapies and recovery support. Treatment goals include helping a person with a substance use disorder to achieve recovery and a return to a healthy and productive life.

Substance Use Disorder Services in Illinois:

1. **Early Intervention:** Pre-treatment services for individuals whose problems or risk factors appear to be related to substance use disorders but who do not meet any diagnostic criteria for such disorders.
2. **Case Management:** The provision, coordination, or arrangement of ancillary services designed to support a specific individual's treatment with the goal of improving clinical outcomes.
3. **Outpatient Treatment:** Diagnostic and clinical services in the least intensive level of care, usually less than 9 hours a week. Activities include individual, group and family counseling, and may include medication assisted recovery support. Outpatient treatment is classified as Level 1 care by the American Society of Addiction Medicine (ASAM).
4. **Intensive Outpatient:** Diagnostic and highly structured clinical services at a more intensive level than outpatient treatment, usually at least 9 hours per week. Activities can include individual counseling, group and family counseling, medication assisted recovery. Intensive Outpatient treatment counseling is classified under ASAM as Level 2.1 care.
5. **Withdrawal management and medical stabilization:** Immediate and short term clinical support for persons to help manage withdrawal symptoms and initiate/stabilize patients on MAR, if appropriate. Withdrawal management is available in any level of care but most often delivered in a residential setting. Withdrawal management is ASAM levels 3.2 or 3.7 care.
6. **Residential Rehabilitation:** Residential services that range in intensity based on individual need, continued assessment, and level of care placement. These levels are ASAM 3.1, 3.5 care.

Medicaid

Many substance use disorder treatment services are covered by the Illinois Medical Assistance Program operated by the Illinois Department of Healthcare and Family Services (HFS). Organizations qualify for Medicaid reimbursement by having their programs certified by IDHS/SUPR and enrolled by HFS. Only covered services delivered to eligible Medicaid individuals qualify for Medicaid reimbursement. To maintain Medicaid certification, a substance use disorder organization in Illinois must comply with all standards set forth in 77 Ill. Adm. Codes 2060 and 2090.

Medicaid Managed Care Organizations (MCOs) are in place to assist individuals and families with medical insurance coverage in Illinois. These MCO's are responsible for assisting individuals in locating substance use disorder services which are covered by the MCO.

Special Populations

IDHS/SUPR has identified populations for priority admission to substance use disorder treatment services. These populations are given priority status because of their impact on families and society. Priority is currently given to the following populations in rank order:

1. Pregnant injecting drug users
2. Pregnant woman with substance use disorder
3. Injecting drug users
4. Post-partum women
5. Persons with service in the U.S. Armed Forces
6. Parenting individuals with substance use disorders
7. Illinois Department of Children and Family Services referrals; Persons eligible for Temporary Assistance to Needy Families (TANF) and other women and children, Department of Corrections (DOC) referred individuals who have completed a prison treatment program or who have been referred for treatment for Illinois courts as diversion to a prison sentence.

Criminal Justice

Substance use disorder treatment is an effective means to reduce illegal drug use, crime, and recidivism within the general population and across offender populations. Up to 75 percent of parolees who leave prison without treatment for an identified substance use disorder resume substance use within 3 months of release. IDHS/SUPR contracts with various treatment organizations to assist individuals involved with the Illinois Department of Corrections and Illinois Court Systems.

DCFS

IDHS/SUPR provides funding for substance use disorder treatment services for individuals with active DCFS involvement. Persons receiving these services are screened and referred by DCFS offices and local service organizations. Treatment organizations work collaboratively with DCFS workers to bring individuals into the treatment process and when needed, provide transportation for individuals and/or their children to childcare so they may attend treatment.

The overall goals of the SUPR/DCFS Initiative include:

- Improved health and safety of the child(ren) and mother
- Improved parenting skills
- Improved family functioning
- Recovery from substance use disorders
- Improved life management skills of the mother

Pregnant Women and Women with Children

IDHS/SUPR funds special services for pregnant women or women with children to intervene substance use before any permanent damage is done to the fetus, the mothers lose their rights to keep their children, or the children are harmed. Many of these services provide for child visitation and interaction as well as parenting skills development while the mother is in treatment. The interaction helps to develop a bond between mother and child in a controlled setting while teaching some parenting skills.

Youth

Adolescent substance use is often associated with declining grades, absenteeism from school, and school dropout rates. Research also tells us that there may be a link between youth who use marijuana and the likelihood of carrying a handgun/gang involvement. IDHS/SUPR continues to expand its system of youth treatment services. Youth services are now developed in non-traditional treatment settings more conducive to youth involvement. These services integrate early intervention and treatment, are more family focused, and are promoted in school and community settings.

Temporary Assistance for Needy Families (TANF)

The 1996 federal welfare reform law mandated a five-year maximum benefit limit for all welfare recipients. The recipient's ability to become self-sufficient during that time period is critical, and substance use disorders have been identified as a barrier to self-sufficiency. In a recent Illinois needs assessment study, it was determined that, minimally, 10-12 percent of the TANF population have a serious Substance Use Disorder. Illinois' welfare-to-work strategies encourage treatment to address substance use as a barrier to self-sufficiency for TANF clients. IDHS/DASA funds a joint effort with IDHS local offices to offer early intervention, assessment, and community intervention services. Additionally, treatment services throughout the state are offered to TANF individuals.

Gambling

Illinois residents now have many opportunities to gamble, including casinos, video gaming terminals, sports betting, web-based gaming, and more. Similar to alcohol, tobacco, or other substance use disorders, the American Medical Association and the American Psychiatric Association classify problem gambling as a gambling use disorder. Problem gambling has broad social, economic, and health impacts on individuals, families and communities. IDHS/SUPR supports screening, assessment, treatment, case management, community intervention, community outreach and recovery support for individuals with gambling disorders. IDHS/SUPR continues to expand its system of gambling treatment services including multiple treatment sites throughout the state.

The Facts

Treatment reduces drug use by 40 to 60 percent, which is comparable to success rates of treatments for other chronic diseases, such as asthma and hypertension.*

In an independent evaluation of the SUPR treatment system, the following was found:

- Individuals reporting use of alcohol decreased from 59 percent at admission to 30 percent six months post treatment; marijuana from 30 percent to 6 percent; cocaine from 37 percent to 6 percent; and heroin from 24 percent to 6 percent.**
- The percent of individuals receiving wages for work increased significantly: 44 percent received wages at admission versus 57 percent who received wages six months after treatment.**
- The number of individuals reporting income received from illegal activities decreased from 16 percent at treatment admission to only 2 percent six months after treatment, an 88 percent decrease.**
- Substance Use Disorder treatment is cost effective. Each \$1 invested in treatment equals \$4 to \$7 in savings on crime and criminal justice costs alone.***

*Principles of Drug Addiction, National Institute on Drug Abuse

**DASA-Delta Metrics Study

***National Institute on Drug Abuse (NIDA)

