TDMHSAS FAST FACTS							
POPULATION FACTS							
Tennessee population	6,975,218		2021				
Adults ages 18+	5,440,975	78.0%	2021	Census Data			
Children ages 0-17	1,534,243	22.0%	2021				
Number of Tennesseans receiving publicly-funded behavioral health services (mental health and substance abuse)	408,662	5.9% of TN population	FY22	Includes clients served by TennCare, BHSN, Crisis Services, private psychiatric hospitals that contract with TDMHSAS, state psychiatric hospitals, and substance abuse treatment and recovery services. Counts include duplication	Office of Research		
Adults ages 18+	283,916	69.5%	FY22	of services.			
Children ages 0-17	124,746	30.5%	FY22	of services.			
		ESTI	MATED MENTAL	ILLNESS PREVALENCE			
Estimated prevalence of adults ages 18+ with Any Mental Illness (AMI)	1,544,690	28.4% of adult population	2021	Any Mental Illness (AMI) is defined as having a diagnosable mental, behavioral, or emotional disorder (excludes developmental and substance use disorders), currently or within the past year of sufficient duration to meet diagnostic criteria specified within the DSM-V which varies in impact from no impact to severe impact (NIMH).			
Estimated prevalence of adults ages 18+ with Serious Mental Illness (SMI)	386,310	7.1% of adult population	2021	Serious Mental Illness (SMI) is defined as having a diagnosable mental, behavioral, or emotional disorder (excludes developmental and substance use disorders), currently or within the past year of sufficient duration to meet diagnostic criteria specified within the DSM-V that results in functional impairment which substantially interferes with or limits one or more major life activities. (SAMHSA).	Office of Research		
Estimated prevalence of youth ages 9-17 with Serious Emotional Disturbance (SED)	95,870	6.2% of youth population	2021	Serious Emotional Disturbance (SED) is defined as having a diagnosable mental, behavioral, or emotional disorder (excludes developmental and substance use disorders), currently or within the past year of sufficient duration to meet diagnostic criteria specified within the DSM-V that results in functional impairment which substantially interferes with or limits the child's role or functioning in family, school, or community activities (SAMHSA).	2021 NSDUH reports are preliminary single year estimates only. These have replaced the revoked two-year 2019-2020 estimates. It is expected that starting next year NSDUH will return to utilizing two-year estimates.		
Estimated prevalence of youth ages 12-17 having had a Major Depressive Episode	121,520	7.9% of youth population	2021	A Major Depressive Episode is defined in the DSM-V as a period of at least 2 weeks with either i) depressed mood or ii) loss of interest or pleasure with five or more other diagnostic depressive symptoms that causes significant distress or impairment.			
		EST	IMATED SUBSTA	NCE USE PREVALENCE			
Estimated prevalence of adults ages 18+ that have Substance Use Disorder (SUD)	1,139,340	20.9% of adult population	2021	Substance Use Disorder is defined as meeting criteria for illicit drug or alcohol dependence or abuse. Dependence or abuse is based on definitions found in the DSM-V.	Office of Research		
Estimated prevalence of adults ages 18+ that have Opioid Use Disorder (OUD)	212,200	3.9% of adult population	2021	Opioid Use Disorder includes the misuse of prescription pain relievers or the use of heroin. OUD estimates are a new category added to the 2021 preliminary single year NSDUH state reports.	2021 NCDIIII rappyta vys vysiky		
Estimated prevalence of youth ages 12-17 that have Substance Use Disorder (SUD)	61,480	4.0% of youth population	2021	Substance Use Disorder is defined as meeting criteria for illicit drug or alcohol dependence or abuse. Dependence or abuse is based on definitions found in the DSM-V.	2021 NSDUH reports are preliminary single year estimates only. These have replaced the revoked two-year 2019-2020 estimates. It is expected		
Estimated prevalence of youth ages 12-17 that have Opioid Use Disorder (OUD)	7,980	0.5% of youth population	2021	Opioid Use Disorder includes the misuse of prescription pain relievers or the use of heroin. OUD estimates are a new category added to the 2021 preliminary single year NSDUH state reports.	that starting next year NSDUH will return to utilizing two-year estimates.		



TDMHSAS FAST FACTS							
	TDMHSAS BUDGET, CONTRACTS, AND POSITIONS						
Annual department budget	\$578,048,800						
State	\$380,941,600	66%	FY23		MHSAS Budget		
Federal	\$154,352,900	27%		Per recommended budget			
Other sources	\$42,754,300	7%					
Central Office and major maintenance	\$33,274,400	5.6%					
Community mental health budget	\$197,574,500	34.2%					
Community substance abuse services budget	\$176,493,700	30.5%					
Opioid Abatement Fund	\$540,400						
Tennessee Opioid Abatement Council	\$540,400						
Total number of contracts	1,177		_	(DGAs) and vendor authorizations executed under Delegated Authorities (DAs)			
MH community	498		2/13/2023	under DGAs and vendor authorizations executed under Das			
SAS community	679			executed under DGAs and vendor authorizations executed under Das			
Department positions	1,851			Per recommended budget			
Central Office (FTEs)	187		FY23	FTEs: Full-time-equivalent authorized positions			
RMHI (FTEs)	1,661		1123	FTEs: MTMHI: 580, MMHI: 187, MBMHI: 461, WMHI: 444			
Tennessee Opioid Abatement Council	3			FTEs			
			TDMHSAS	SLICENSURE			
License categories	25						
Licenses	1,965		2/23/2023	Point in time counts	Office of Licensure		
LicensEEs	1,063		2/23/2023	Form in time counts	Office of Licensure		
Licensed sites	1,859						
		BEHAVIO	DRAL HEALTH SA	AFETY NET (BHSN) SERVICES			
Adults ages 18+ receiving Behavioral Safety Net Services	35,460		FY22	BHSN provides core behavioral health services to Tennesseans who lack insurance coverage and meet all eligibility requirements. These services are	Office of Behavioral Health Safety Net		
Children and Youth ages 0-17 receiving Behavioral Health Safety Net Services	1,127		FY22	community-based and inpatient care is not covered.	and Older Adults		
TOP FOUR BHSN SERVICES							
Case management units of service provided	277,733		FY22	Case management is defined as care coordination for the purpose of linking safety net individuals to clinically indicated services or to benefits that would provide an alternative payer source for these services (1 unit = one 15 minute session).			
Psychosocial rehabilitation group units of service provided	94,290		FY22	Services that utilize a comprehensive approach for the purposes of improving an individual's functioning, promoting management of illness, and facilitating recovery (1 unit = one 15 minute session).	Office of Behavioral Health Safety Net and Older Adults		
Individual psychotherapy units of service provided	74,494		FY22	1 unit = 30/45/60 minute session			
Office visit for evaluation and management units	79,416		FY22	Office or other outpatient visit for the evaluation and management of an established patient (1 unit = 5/10/15/25/40 minute session).			



TDMHSAS FAST FACTS							
REGIONAL MENTAL HEALTH INSTITUTES (RMHIS)							
RMHI total budget	\$169,625,400						
State appropriation	\$140,877,700	83%	FY23	Per recommended budget	MHSAS Budget		
Revenue	\$28,747,700	17%					
Total East Tennessee contracted private psychiatric	\$8,291,600						
hospitals budget	\$0,291,000						
Total RMHI positions	1,661						
Total beds	577						
Number of admissions	6,680			Including forensic and non-forensic population			
Number of discharges	6,687			Including forensic and non-forensic population			
30-day readmissions	655	9.2%		Count includes readmission to any RMHI and excludes forensic population			
180-day readmissions	1,615	22.6%	FY22	Count includes readmission to any RMHI and excludes forensic population	Division of Hospital Services		
Average length of stay (ALOS) in days	6.68			Acute average length of stay excluding forensic population			
Median length of stay in days	6			Median length of stay for all discharges			
DMI II a sa a dasita	2,662	28.5% of		Individuals referred to a RMHI by an admitting physician that do not meet			
RMHI non-admits	,	presentation	<u> </u>	involuntary commitment criteria			
MEMPHIS MENTAL HEALTH INSTITUTE (Memphis, TN)							
Total budget	\$21,828,400		FY23	Per recommended budget	MHSAS Budget		
Number of positions	186		FY23		0		
Number of beds	55		2/16/2023	Point in time count	Division of Hospital Services		
Number of admissions	979		FY22				
		WESTER	N MENTAL HEAL	TH INSTITUTE (Bolivar, TN)			
Total budget	\$42,757,000		FY23	S	MHSAS Budget		
Number of positions	439		FY23	Per recommended budget	WITISAS Buuget		
Number of beds	150		2/16/2023	Point in time count	Division of Hospital Services		
Number of admissions	591		FY22		Division of Hospital Services		
MIDDLE TENNESSEE MENTAL HEALTH INSTITUTE (Nashville, TN)							
Total budget	\$59,212,800		FY23	2	MHSAS Budget		
Number of positions	577		FY23	Per recommended budget			
Number of beds	207		2/16/2023	Point in time count, 30 are devoted to the Forensic Services Program (FSP)	Division of Hoovital Constant		
Number of admissions	2,737		FY22		Division of Hospital Services		
MOCCASIN BEND MENTAL HEALTH INSTITUTE (Chattanooga, TN)							
Total budget	\$45,827,200		FY23	Per recommended budget	MHSAS Budget		
Number of positions	459		FY23				
Number of beds	165		2/16/2023	Point in time count	Division of Hospital Services		
Number of admissions	2,372		FY22		Division of Flospital Scrvices		



TDMHSAS FAST FACTS							
CRISIS SERVICES							
Total calls received to the TN Statewide Crisis Line, provider agencies' local crisis lines, and to 988	146,088		FY22	Includes adults and children & youth			
TN Statewide Crisis Line & agency local lines	126,645		FY22				
TN's 988 System	19,443		FY22	988 / National Suicide Prevention Lifeline			
Individuals receiving face-to-face crisis assessments	70,453		FY22	Number includes mobile crisis services resulting in an assessment and walk-in assessments.			
Walk-In Center	17,565		FY22				
Mobile	52,888				Office of Crisis Services and Suicide Prevention		
Children and youth	12,507		FY22				
Adults	40,381		FY22				
Individuals served in the 8 crisis stabilization units (CSUs)	6,464		FY22				
Individuals served in walk-in centers (attached to the CSUs) who received at least one enhanced service at	_		FY22	An individual may receive more than one enhancement service at a crisis walk- in center such as 23-hour observation, assessment by a psychiatric medication			
a WIC	assessments)		F1ZZ	prescriber, nursing assessment, transportation, and discharge planning services.			
Individuals receiving respite services	3,953		FY22				
Individuals receiving medically monitored crisis detoxification services (MMCDs)	10,324		FY22	Detox services are delivered by medical and nursing professionals. They provide 24-hour medically supervised evaluation and withdrawal management in a facility with inpatient/residential beds.	Division of Substance Abuse Services		
			HOUSING & HO	OMELESS SERVICES			
Number of individuals who were outreached through the PATH (Projects for Assistance in Transition from Homelessness) program	4,110		FY22	PATH funds community-based outreach services to connect individuals experiencing homelessness to mental health, substance abuse, case management, housing services, and other support services.			
Number of adults experiencing mental illness or co- occurring disorders who receive short term-financial support for services	5,431		FY22	Services include rental assistance, utilities, medical support, and other costs associated with living independently and maintaining stable housing provided by the Community Targeted Transitional Support and Inpatient Targeted Transitional Support programs.	Office of Housing and Homeless Services		
Number of safe, affordable mental health and/or recovery housing opportunities that are created, improved, or preserved for people with a history of mental illness and/or substance use disorder	4,051		FY22	Information provided by reporting from each of Regional Housing Facilitators supporting the Creating Homes Initiative. Number reported indicates the total number of new housing opportunities created in the fiscal year through leveraging of a wide range of funding sources (including but well beyond TDMHSAS funding).			
Number of adults experiencing mental illness or co- occurring disorders who reside in community-based TDMHSAS provider housing facilities (independent living, group homes, supportive housing) and/or receive services and supports to maintain long-term supportive housing.	1,620		FY22	Data provided by statewide providers of the Community Supportive Housing, Intensive Long-term Support, Emerging Adult Services, and Supportive Living programs.			
CHILDREN AND YOUTH RECEIVING MENTAL HEALTH SERVICES							
Children and youth ages 0-17 receiving classroom education and prevention training	70,447		FY22	Count consists of numbers served through the School-Based Behavioral Health Liaison Program (SBBHL) Tiers II & III, Erase the Stigma, Better Attitudes and Skills In Children (BASIC), Violence and Bullying Prevention, Mental Health 101, and Youth Screen/Schools & Communities Youth Screen.	Office of Children, Young Adults, & Families		
Children and youth ages 0-17 receiving early intervention services	20,961		FY22	Count consists of numbers served through Early Intervention & Prevention Program, Regional Intervention Program, System of Care Programs (SOCAT), and the School Based Behavioral Health Liaison Program (SBBHL) Tiers II & III.			
Transitional youth and young adults ages 12-30 receiving intervention services	299		FY22	Count consists of First Episode Psychosis Initiative, Healthy Transitions, and Clinical High Risk for Psychosis FY client totals.			

			TDMHSAS	FAST FACTS				
ADULT SUBSTANCE USE								
Adult admissions ages 18+ to TDMHSAS-funded substance abuse treatment and recovery services	23,785		FY22	Number represents duplicated admissions to substance abuse treatment and recovery services.				
Adults served	20,131		FY22	Unduplicated number served.	Division of Substance Abuse Services			
Reported opioid use	10,058	50.0%	FY22					
Reported methamphetamine use	7,588	37.7%	FY22	Adults in treatment reporting any use of these substance alone or in				
Reported marijuana use	6,980	34.7%	FY22	combination.				
Reported alcohol use	6,819	33.9%	FY22					
TOP THREE ADULT SUBSTANCE ABUSE SERVICES								
Residential rehabilitation services: number of bed days	134,077		FY22	Intense group treatment provided in a residential treatment facility. Clients stay overnight (from 5 to 21 days), participate in group/other treatment activities during the day, and must have 5 counseling contacts and 5 lectures/seminars a week. Family members can participate in treatment.				
Halfway house services: number of bed days	41,612		FY22	Group and individual treatment provided in therapeutic, licensed living environments which include expectation that client will seek/maintain employment or job training in community, participate in at least one counseling contact and one educational lecture per week, work 12-step program with sponsor, and regularly attend 12-step meetings. Clients must agree to participate in random drug screens. Halfway houses are all male or all female.	Division of Substance Abuse Services			
Adult intensive outpatient services: hours of services	65,422		FY22	Intense group treatment provided 9 - 19 hours/week, with sessions on 3-4 days/week. Education about addiction and recovery counseling is provided. Clients are introduced to the 12-step recovery program and are encouraged to work steps of the program. Family members can participate in treatment. Group size: min. 6 and max. 12 clients. All clients expected to attend 12-step meetings and to have random drug screenings while in treatment.				
			YOUTH SU	BSTANCE USE				
Youth admissions ages 12-17 to TDMHSAS-funded substance abuse treatment and recovery services	436		FY22	Number represents duplicated admissions to substance abuse treatment and recovery services.				
Youth served	399		FY22	Unduplicated number served.				
Reported marijuana use	348	87.2%	FY22		Division of Substance Abuse Services			
Reported alcohol use	147	36.8%	FY22	Youth in treatment reporting any use of these substances alone or in				
Reported methamphetamine use	26	6.5%	FY22	combination.				
Reported opioid use	22	5.5%	FY22]				
TOP THREE YOUTH SUBSTANCE ABUSE SERVICES								
Adolescent residential rehabilitation services: number of bed days	3,822		FY22	Adolescent residential services are provided in a residential setting and include treatment sessions as well as education.	Division of Substance Abuse Services			
Adolescent intensive day treatment: hours of services	2,161		FY22	Adolescent day and evening treatment services operates three or more hours per day (exclusive of school activities) and a minimum of four days a week.				
Adolescent individual intervention/therapy: hours of services	106		FY22	Adolescent outpatient treatment services are provided in regularly-scheduled sessions of usually fewer than nine hours each week.				