# *Substance Abuse Prevention and Treatment Agency*

# *2017 Epidemiologic Profile*

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*Office of Analytics*
*Department of Health and Human Services*

*On behalf of the Division of Public and Behavioral Health*


**Brian Sandoval**
*Governor*
*State of Nevada*

**Julie Kotchevar, Ph.D.**
*Administrator*
*Division of Public and Behavioral Health*

**Richard Whitley, MS**
*Director*
*Department of Health and Human Services*

**Ihsan Azzam Ph.D., M.D.**
*Chief Medical Officer*
*Division of Public and Behavioral Health*

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**Prepared by and Additional Information:**
Nevada Department of Health and Human Services
Office of Analytics
State of Nevada
4126 Technology Way, Suite 201
Carson City, Nevada 89706
(775) 684.5895

**Thank you to following for providing leadership, data and technical support for this report:**

**Henry Agbewali, MS**
Biostatistician II
Nevada Department of Health and Human Services
Office of Analytics
State of Nevada

**Andrea R. Rivers**
Health Program Manager II
Nevada Department of Health and Human Services
Office of Analytics
State of Nevada

**Sandra Atkinson,**
Health Resource Analyst II
Nevada Department of Health and Human Services
Office of Analytics
State of Nevada

**Laurel Brock Kline**
Biostatistician II
Nevada Department of Health and Human Services
Office of Analytics
State of Nevada

**Jen Thompson**
Health Program Specialist II
Nevada Department of Health and Human Services
Office of Analytics
State of Nevada

**Kyra Morgan, MS**
Chief Biostatistician
Nevada Department of Health and Human Services
Office of Analytics
State of Nevada

**Sneha Ravikumar, MSc., M. Phil**
Health Program Specialist
Nevada Department of Health and Human Services
Office of Analytics
State of Nevada

**Multidisciplinary Prevention Advisory Committee**

**Statewide Epidemiologic Workgroup**

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# Data Sources/Limitations

**Age-Adjusted Rates**
A rate is a measure of the frequency of a specific event over a given period of time, divided by the total number of people within the population over the same period of time. An age adjusted rate is a rate that has been adjusted, or weighted, to the same age distribution as a "standard" population. Throughout this report, rates are adjusted to the 11 standard age groups of the U.S. population in the year 2000 (Census table P25-1130). Rates are age-adjusted in order to eliminate any potential confounding effects, or biases, that may be a result of health factors that are associated with specific ages.

**Avatar**
Avatar is a database containing demographic, treatment, billing, and financial information for Nevada mental health facilities throughout the state of Nevada. These data are representative of Nevada state-operated mental health facilities and are not generalizable to the rest of the population.

**Behavioral Risk Factor Surveillance System (BRFSS)**
BRFSS is a state-based system of health surveys that collects information on health risk behaviors, preventive health practices, chronic health conditions, and use of preventive services. More than 350,000 adults are interviewed each year, making the BRFSS the largest telephone health survey in the world. For many states, the BRFSS is the only available source of timely and accurate data on health-related behaviors. The survey consists of a set of federally grant funded core questions and individual states may include and pay for their own questions in the survey. While the survey's focus is chronic disease and injury, topics covered by the survey include car safety, obesity, and exercise among many others. Since state-added questions are not asked nationwide, these questions are not comparable.

**Hospital Emergency Department Billing (HEDB)**
The Hospital Emergency Department Billing data provides health billing data for emergency room patients for Nevada's non-federal hospitals. NRS 449.485 mandates all hospitals in Nevada report information as prescribed by the director of the Department of Health and Human Services. The data are collected using a standard universal billing form. The data are for patients who were seen in the emergency room setting. The data includes demographics such as age, gender, race/ethnicity and uses International Classification of Diseases-9-Clinical Modification (ICD-9-CM) diagnoses codes and International Classification of Diseases-10-Clinical Modification (ICD-10-CM) diagnoses. ICD-10-CM diagnoses codes replaced ICD-9-CM diagnoses codes in the last quarter of 2015. Therefore, data prior to last quarter in 2015 may not be directly comparable to data thereafter. In addition, the data includes billed hospital charges, procedure codes, discharge status, and external cause of injury codes. The billing information is for billed charges and not the actual payment received by the hospital.

**Hospital Inpatient Billing (HIB)**
The Hospital Inpatient Billing data provides health billing data for patients discharged from Nevada's non-federal hospitals. NRS 449.485 mandates all hospitals in Nevada report information as prescribed by the director of the Department of Health and Human Services. The data are collected using a standard universal billing form. The data are for patients who were admitted for at least 24 hours as an inpatient, but do not include patients who were discharged from the emergency room. The data includes demographics such as age, gender, race/ethnicity and uses International Classification of Diseases-9-Clinical Modification (ICD-9-CM) diagnoses codes and International Classification of Diseases-10-Clinical

Modification (ICD-10-CM) diagnoses (up to 33 diagnoses respectively). ICD-10-CM diagnoses codes replaced ICD-9-CM diagnoses codes in the last quarter of 2015. Therefore, data prior to last quarter of 2015 may not be directly comparable to data thereafter. In addition, the data includes billed hospital charges, procedure codes, length of hospital stay, discharge status, and external cause of injury codes. The billing data information is for billed charges and not the actual payment received by the hospital.

**Monitoring the Future Survey**

Since 1975 Monitoring the Future Survey has measured alcohol and drug use, and related attitudes among adolescent students nationwide. Survey participants report their drug use behaviors across three-time periods: lifetime, past year, and past month. Students from both public and private schools participate in the survey. The survey is funded by the National Institute on Drug Abuse (NIDA), a component of the National Institutes of Health (NIH), and conducted by the University of Michigan.

**Nevada Report Card**

The Nevada Report Card is the accountability reporting website of the Nevada Department of Education. In compliance with federal and state law, it assists community members (parents, educators, researchers, lawmakers, etc.) in locating a wealth of detailed information pertaining to K-12 public education in Nevada. The web site has three categories: "school and district information," "assessment and accountability" and "fiscal and technology."

**Nevada State Demographer**

The Nevada State Demographer's office is funded by the Nevada Department of Taxation and is part of the Nevada Small Business Development Center. It is responsible for conducting annual population estimates for Nevada's counties, cities, and towns.

**United States Census Bureau**

The United States Census Bureau is responsible for the United States Census, the official decennial (10-year period) count of people living in the United States of America. Collected data are disseminated through web browser-based tools like the American Community Survey which provides quick facts on frequently requested data collected from population estimates, census counts and surveys of population and housing for the nation, states, counties, and large cities. The Bureau also offers the American Fact Finder, which profiles the American population and economy every five years.

**Web-Enabled Vital Records Registry Systems (WEVRRS)**

Statewide births and deaths are collected by the Office of Vital Records, in the Division of Public and Behavioral Health. WEVRRS is a software utilized by physicians, registered nurses, midwives, informants or funeral directors, and other individuals to collect and consolidate birth and death-related information.

**Youth Risk Behavior Survey (YRBS)**

The purpose of the YRBS is to provide Nevada data to assess trends in priority health-risk behaviors among high school students, measure progress toward achieving national health objectives for Healthy People 2020 and other program and policy indicators and evaluate the impact of broad school and community interventions at the national, state, and local level. The YRBS is a biennial, anonymous, and voluntary survey of students in 9th through 12th grade in traditional, public high schools that monitors the prevalence of health risk behaviors among youth. The survey asks students to self-report their behaviors in six major areas of health that directly lead to morbidity and mortality; these include: (1) Behaviors that contribute to unintentional injuries and violence; (2) Sexual behaviors that contribute to human

immunodeficiency virus (HIV) infection, other sexually transmitted diseases, and unintended pregnancy; (3) Tobacco use; (4) Alcohol and other drug use; (5) Unhealthy dietary behaviors; and (6) Physical inactivity.

# Executive Summary

This report is intended to provide an overview of behavioral health in Nevada. The analysis can be used to identify issues of concern and areas that may need to be addressed.

Key Findings:

- Nevada's population has grown by an estimated 10% since 2010.
- While mental health utilization has decreased from state-funded facilities, hospital visits to both the emergency department and inpatient admissions have increased since 2009, especially for depression and anxiety.
- From 2011 to 2017, the non-Hispanic Black population has had a higher rate of utilization of state-funded mental health clinics than other races/ethnicities.
- The most common method of attempted suicides from 2009 to 2017 is from substance and drug overdose.
- Between 2009 and 2017, Nevada had its highest age-adjusted suicide rate in 2016, which was 20.6 per 100,000 population while the lowest rate was in 2012, with 17.8 per 100,000 population.
- The age-adjusted suicide rates for White non-Hispanics were significantly higher than the state age-adjusted suicide rate for each year from 2009 to 2017, with 27.2 per 100,000 population in 2017.
- Among Nevada high school students, 12% have reported using a tobacco product, and 43% have reported using E-vapor products. Among Nevada middle school students, 19% reported using E-vapor products in 2017.
- In Nevada for 2017, 61% of high school students and 30% of middle school students reported having ever drank alcohol.
- Drug use among high school students is slightly higher in Nevada then the nation. Of Nevada high school students 7.5% have use inhalants, while nationally the percent is lower at 6.2% for 2017.
- In 2014, emergency department visits for drug use (including overdose and dependence use) surpassed visits for alcohol use and has remained higher through 2017.
- Emergency department and inpatient visits for marijuana use (not overdoses) were more prevalent than methamphetamine, opioid and cocaine use in 2017.
- In 2017, 4,909 deaths were related to alcohol and/or drugs use, of which 80% of these deaths were drug-related.
- Among high school students for 2017 in Nevada, 26% have reported that they are currently having sex.
- Self-report marijuana/cannabis use in pregnant women has increased from 3.3 per 1,000 live births in 2010, to 8.5 per 1,000 live births in 2017.
- The Lesbian/Gay/Bisexual and Transgender (LGBT) population have higher responses to health risk behaviors including binge drinking, depressive disorder, and more days of poor mental health for 2015 and 2017.
- The prevalence of health risk behaviors is higher (48%) in those that identify as LGB or unsure of sexual orientation (46%) then those that identify as heterosexual (39%) in both 2015 and 2017.

# Demographic Snapshot

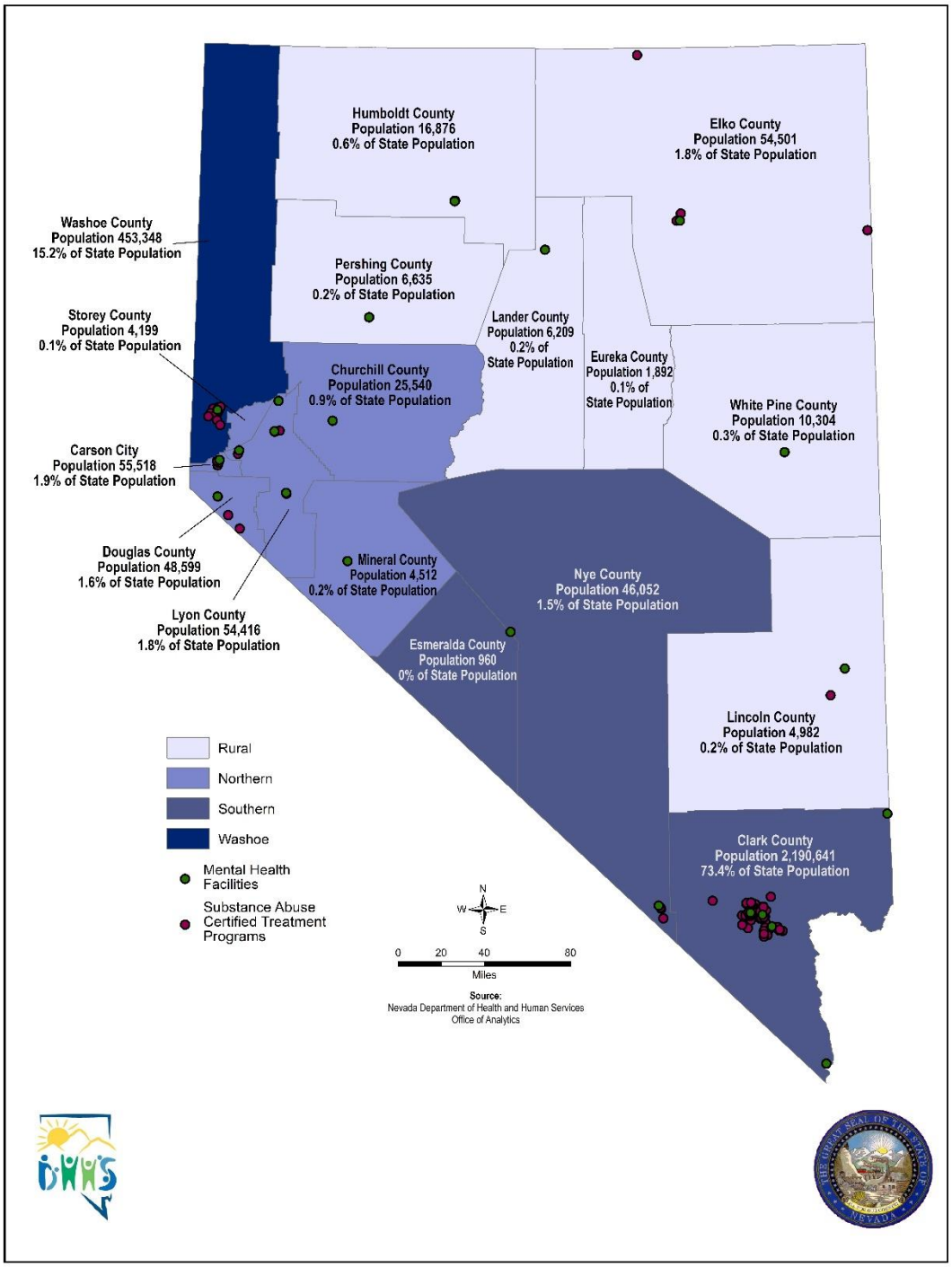
**Figure 1. Selected Demographics for Nevada.**

| | Nevada |
|---|---|
| Population, 2017 estimate* | 2,985,184 |
| Population, 2010 estimate* | 2,705,845 |
| Population, percentage change* | 10.3% |
| Male persons, 2017 estimate* | 1,497,711 (50.2%) |
| Female Persons, 2017 estimate* | 1,487,473 (49.8%) |
| Median household income (in 2016), 2012-2016** | $53,094 |
| Per capita income in the past 12 months (in 2016), 2012-2016** | $27,253 |
| Persons in poverty, percent (2016) ** | 13.8% |
| With a disability, under the age 65 years, percent, 2012-2016** | 9.2% |
| Land area (square miles), 2016** | 109,806 |

*Source: *Nevada State Demographer, Vintage 2017 and **US Census Bureau.*

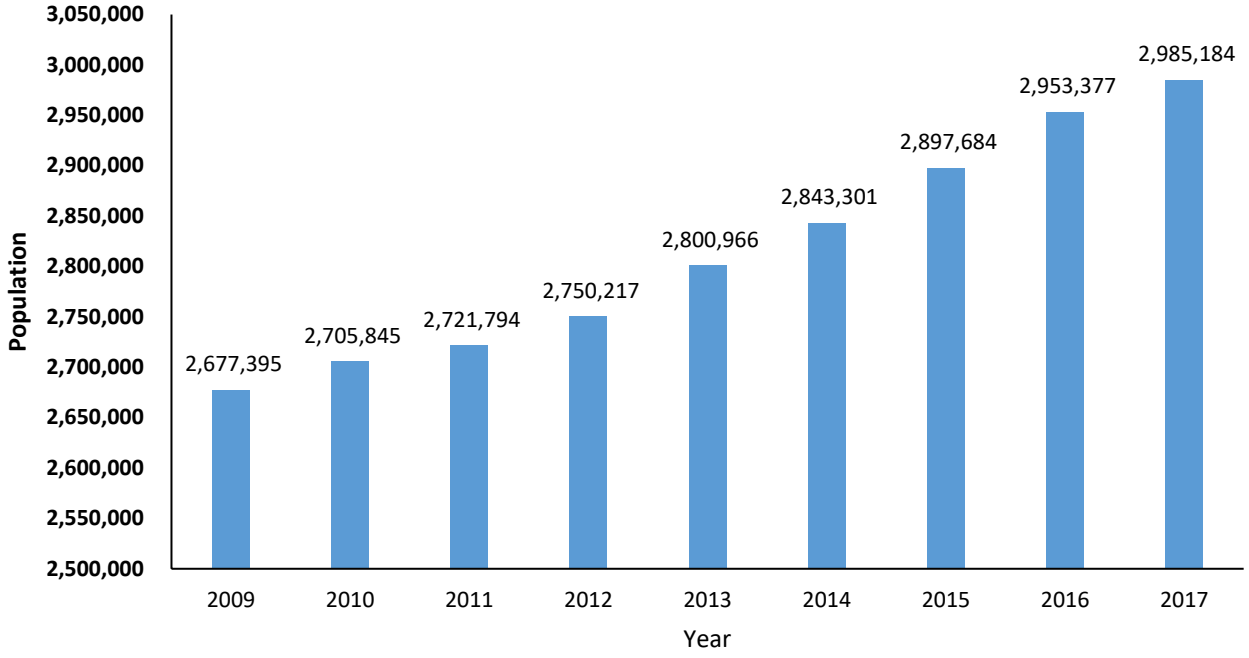
In 2017, the estimated population for Nevada was 2,985,184, a 10.3% increase from the 2010 estimated population. The population is made up of approximately equal percentages of females and males. The median household income is $53,094. Nevada's land area is approximately 109,806 square miles.

**Figure 2. Nevada Population Distribution by County, 2017.**



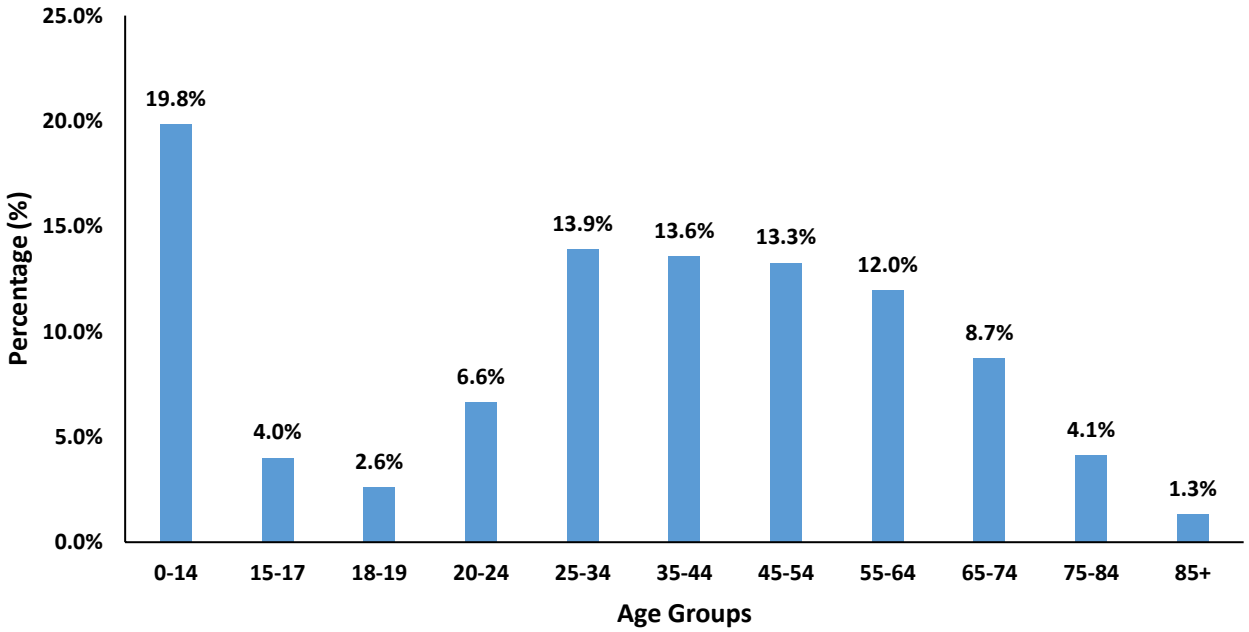

*Source: Nevada State Demographer, Vintage 2017;*
***Northern Nevada Region:*** *Carson City, Churchill, Douglas, Lyon, Mineral and Storey Counties.*
***Rural Nevada Region:*** *Elko, Eureka, Humboldt, Lincoln, Pershing, and White Pine Counties.*
***Southern Nevada Region:*** *Clark, Esmeralda, and Nye Counties.*
***Washoe Region****: Washoe County.*

**Figure 3. Nevada Population, 2009-2017.**



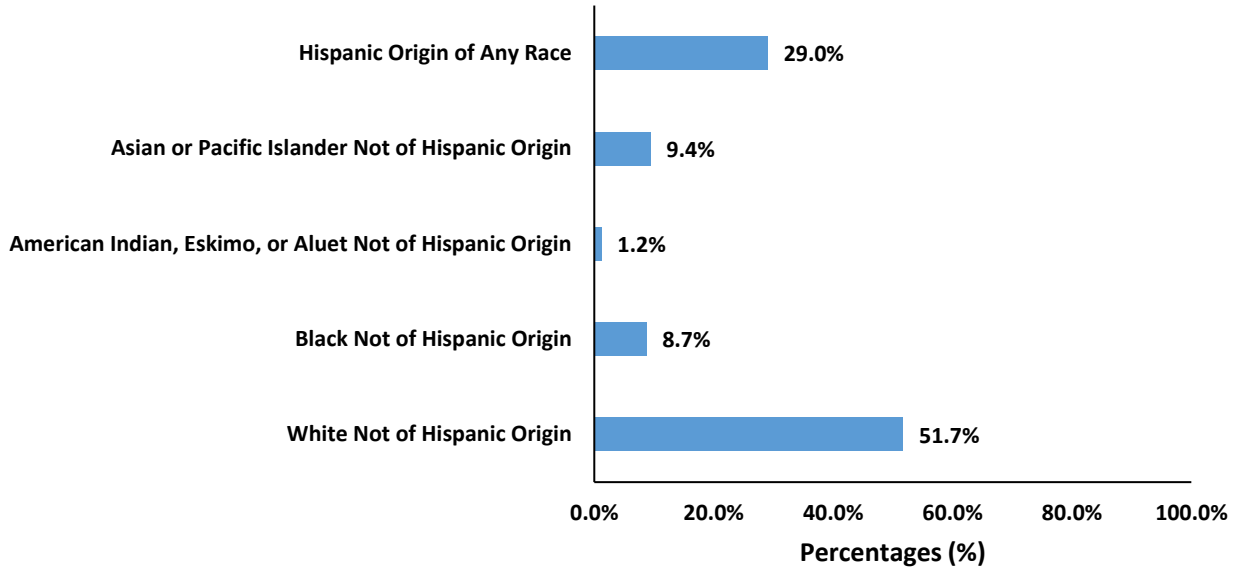

*Source: Nevada State Demographer, Vintage 2017.*
*Chart scaled to display differences among years.*

**Figure 4. Nevada Population by Age Group, 2017.**



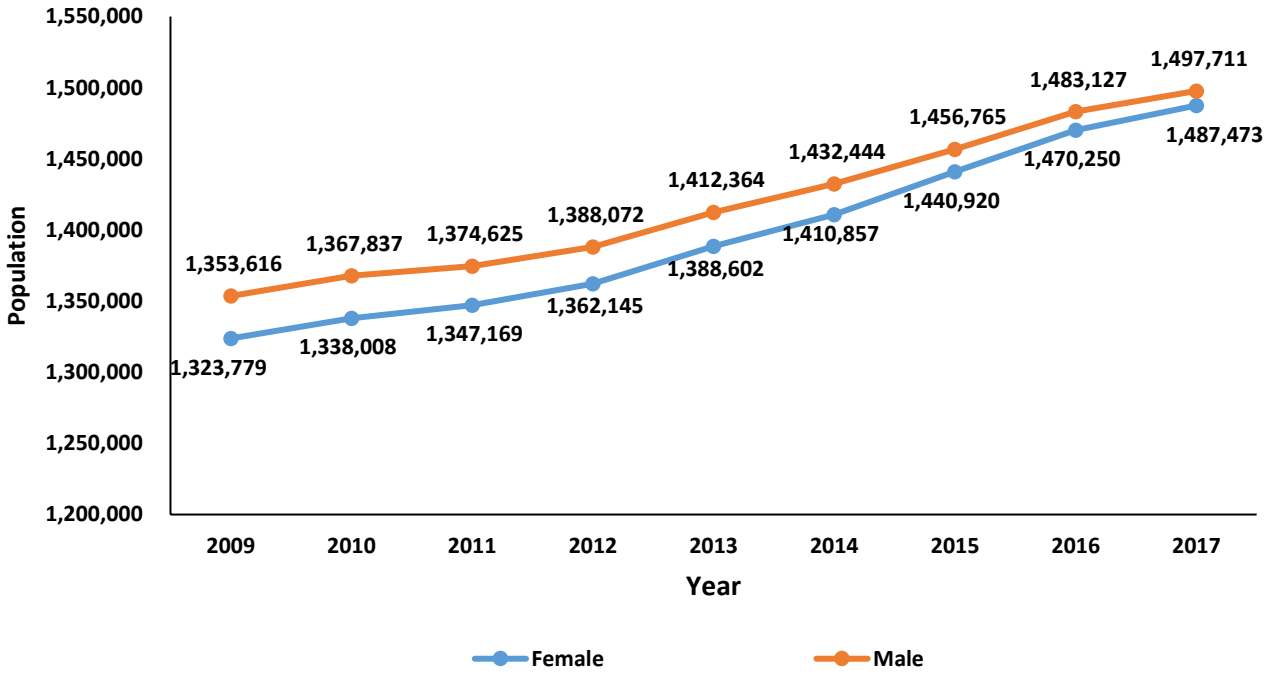

*Source: Nevada State Demographer, Vintage 2017.*
*Chart scaled to 25% to display differences among groups.*

## Figure 5. Nevada Population by Race/Ethnicity, 2017.




*Source: Nevada State Demographer, Vintage 2017.*

## Figure 6. Nevada Population Distribution by Sex, 2009-2017.




*Source: Nevada State Demographer, Vintage 2017.*
*Chart scaled to display differences among years.*

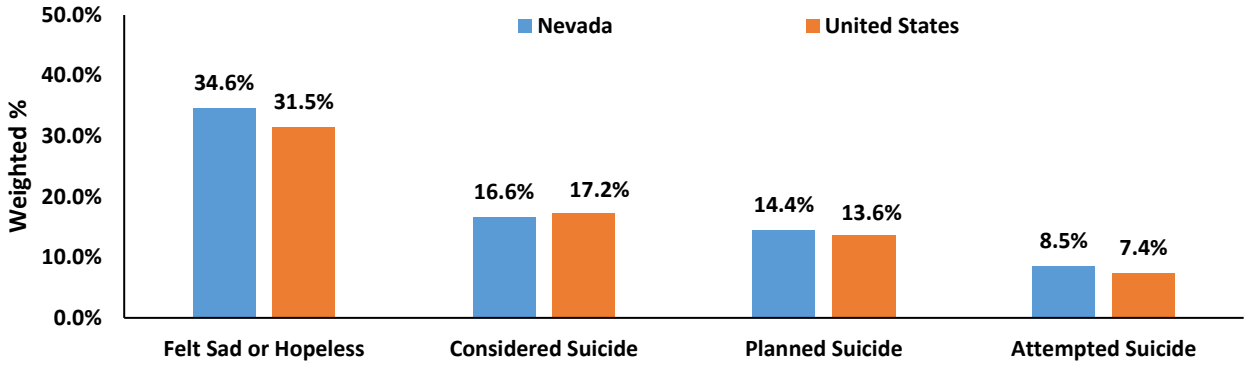
# Mental Health

Mental health data are collected by numerous data sources in Nevada, including YRBS, BRFSS, hospital billing, state-funded mental health facilities, and vital records.

## Youth Risk Behavior Survey (YRBS)

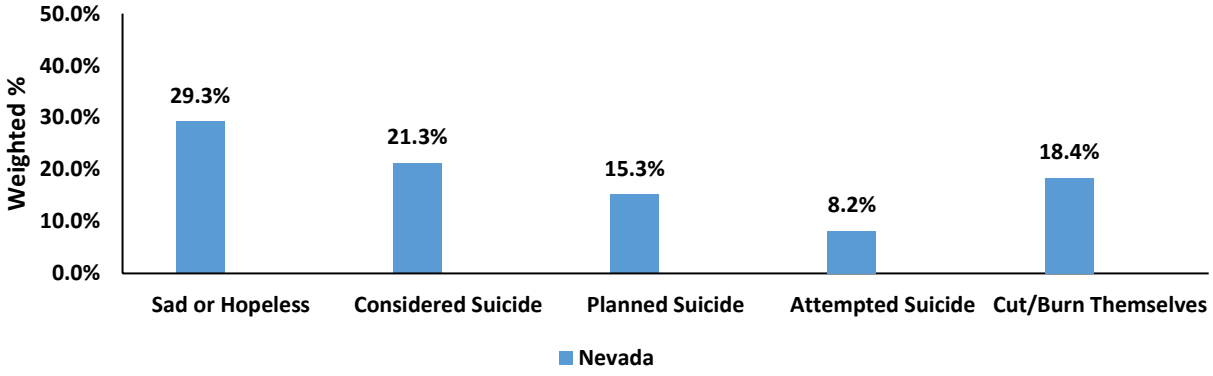
The YRBS monitors six categories of health-related behaviors that contribute to leading causes of death and disabilities among youth and adults. Nevada high school and middle school students are surveyed during the odd years. In 2017, 5,336 high school and 5,464 middle school students participated in the survey.

**Figure 7. Mental Health Risk Behaviors, Nevada High School Students, 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 50% to display differences among groups.*

**Figure 8. Mental Health Risk Behaviors, Nevada Middle School Students, 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 50% to display differences among groups.*

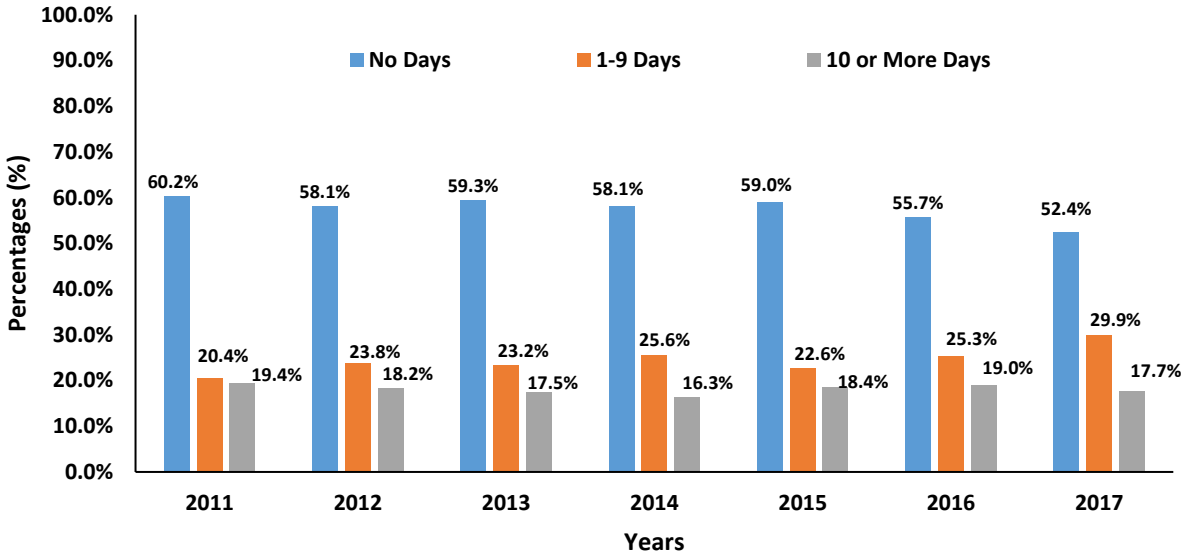
Approximately 34.6% of Nevada high school students and 29.3% of Nevada middle school students have felt sad or hopeless in the last 12 months. About 16.6% of high school students have considered suicide, while 14.4% have planned to commit suicide in the past 12 months. About 8.5% of Nevada students have attempted suicide in the past 12 months.

## Behavioral Risk Factor Surveillance System (BRFSS)

BRFSS collects information on adult health-related risk behaviors. According to the Centers for Disease Control and Prevention, BRFSS is a powerful tool for targeting and building health promotion activities.

Nevada residents were asked how many days, if any, did a mental health condition or emotional problem keep them from doing their work duties or other usual activities.

**Figure 9. Percentages of Adults Who Experienced Poor Mental or Physical Health that Prevented them from Doing Usual Activities by Days Effected, Nevada Residents, 2011-2017.**



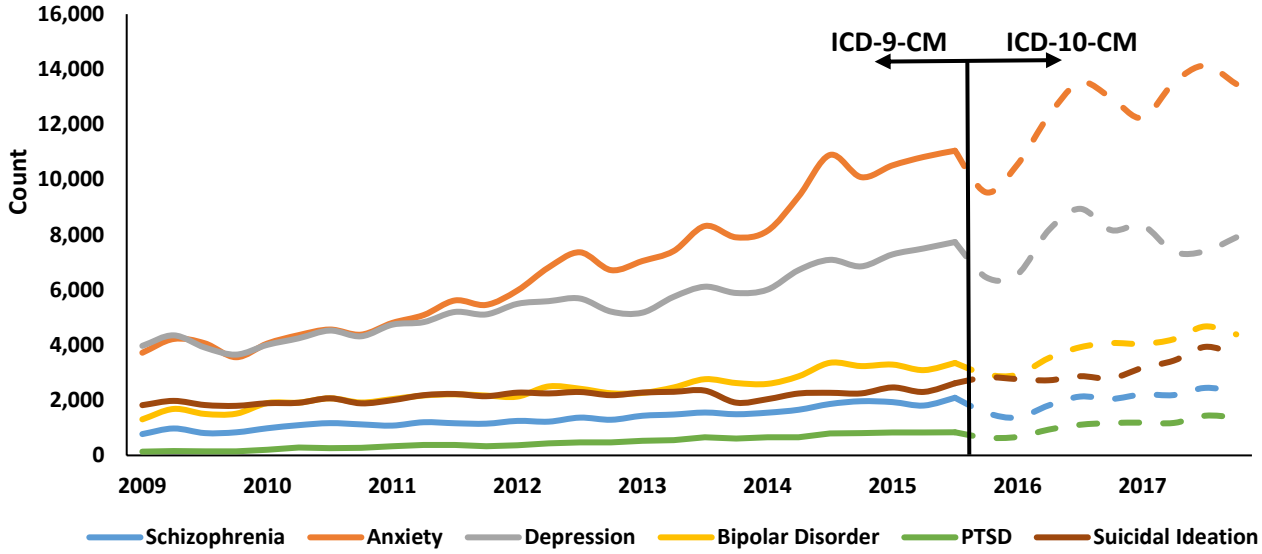

*Source: Behavioral Risk Factor Surveillance System (BRFSS).*

In 2016, 55.7% Nevada residents reported missing no days of work or activities, 25.3% missed 1-9 days, and 19.0% missed 10 or more days of work or usual activities. In 2017, 52.4% reported missing no days of work or activities, 29.9% missed 1-9 days, and 17.7% missed 10 or more days of work or usual activities.

## Hospital Emergency Department Encounters

The hospital emergency department billing data includes data for emergency room patients for Nevada's non-federal hospitals. There were 98,543 visits related to mental health disorders among Nevada residents in 2017. Since an individual can have more than one diagnosis during a single emergency department visit, the following numbers reflect the number of times a diagnosis in each of these categories was given, and therefore the following numbers are not mutually exclusive.

**Figure 10. Mental Health-Related Emergency Department Encounters, by Quarter and Year, 2009-2017.**



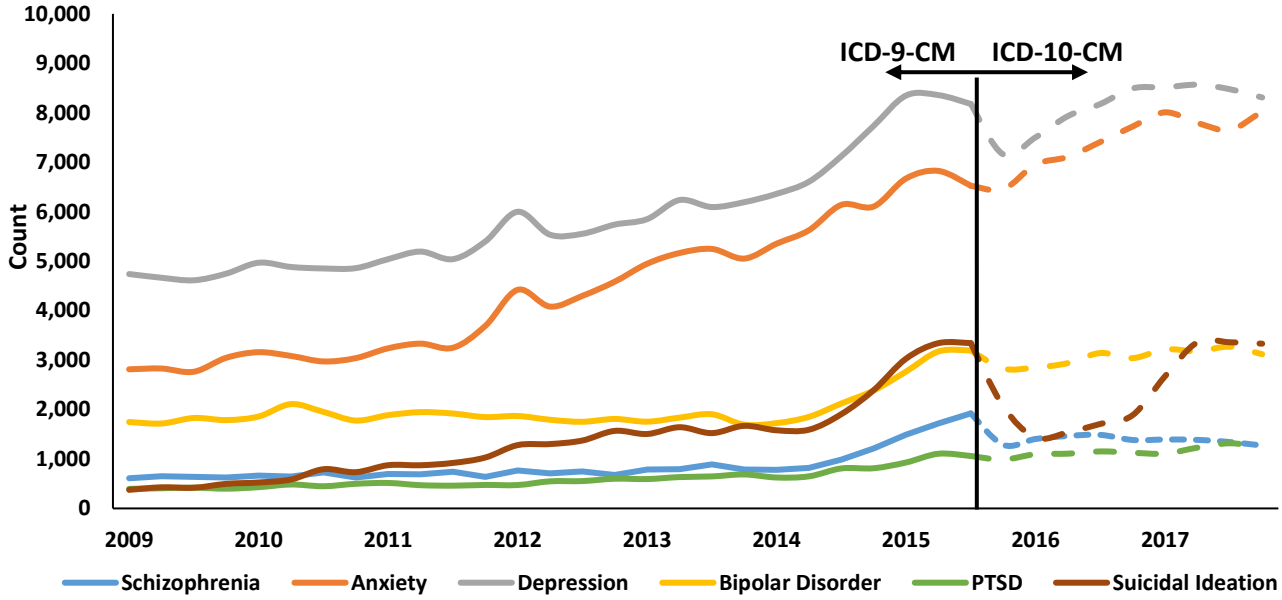

*Source: Hospital Emergency Department Billing.*
*Categories are not mutually exclusive.*
*ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

Anxiety has been the leading mental health-related diagnosis since 2012 in emergency department encounters. Anxiety-related encounters increased significantly from 2009 to 2017 in both counts and rates. When adjusted for population growth, 2009 had 15,567 (581.4 per 100,000 Nevada residents) emergency department encounters and 2017 had 53,380 (1,791.5 per 100,000 Nevada residents) encounters. Emergency department encounters related to depression also increased significantly from 2009 to 2017, from 15,891 (593.5 per 100,000 Nevada residents) to 31,133 (1,042.9 per 100,000 Nevada residents). Schizophrenia, Bipolar Disorder, Post Traumatic Stress Disorder (PTSD) and Suicidal Ideation also have all increased significantly from 2009 to 2017.

## Hospital Inpatient Admissions

Hospital Inpatient Billing data includes data for patients discharged from Nevada's non-federal hospitals. There were 101,892 inpatient admissions related to mental health disorders among Nevada residents in 2017. Since an individual can have more than one diagnosis during a single inpatient admission, the following numbers reflect the number of times a diagnosis was given and therefore the following numbers are not mutually exclusive.

**Figure 11. Mental Health-Related Inpatient Admissions, by Quarter and Year, 2009-2017.**



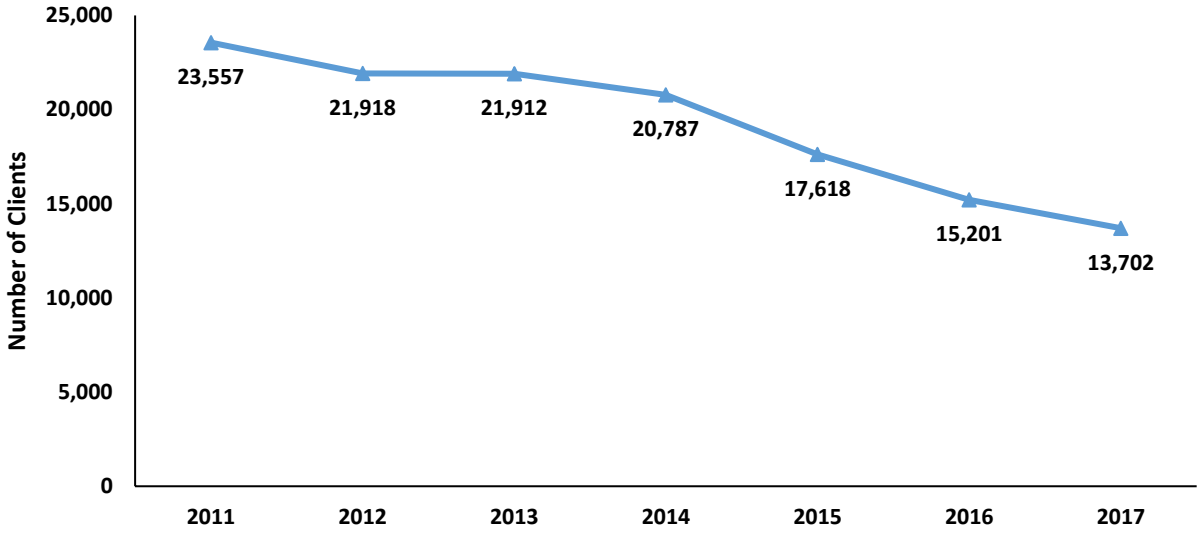

*Source: Hospital Inpatient Billing.*
*Categories are not mutually exclusive.*
*ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

Unlike emergency department encounters, depression is the leading diagnosis for mental health-related inpatient admissions. Depression has increased significantly from 2009 to 2017 both in counts and rates. When adjusted for population growth, 2009 had 18,764 (700.8 per 100,000 Nevada residents) inpatient admissions and 2017 had 34,115 (1,142.8 per 100,000 Nevada residents) admissions. Inpatient admissions related to anxiety significantly increased from 2009 to 2017, from 11,453 (427.8 per 100,000 Nevada residents) to 31,671 (1,060.9 per 100,000 Nevada residents). Schizophrenia, Bipolar Disorder, and Post Traumatic Stress Disorder (PTSD) also have all increased significantly from 2009 to 2017. Suicidal ideation also increased from 2009 to 2017 but should be noted that in 2016 inpatient admissions state wide dropped and then continued increase in 2017. This may be due to ICD-9-CM conversion to ICD-10-CM or another change in medical billing.

## State-Funded Mental Health Services (Avatar)

State-funded mental health facilities are divided into Northern Nevada Adult Mental Health Services (NNAMHS), Southern Nevada Adult Mental Health Services (SNAMHS) and Rural Clinic and Community Health Services. Different services that mental health facilities provide include inpatient acute psychiatric, mobile crisis, outpatient counseling, service coordination, and case management.

**Figure 12. Unique Clients* Served at State-Funded Mental Health Clinics, 2011-2017.**

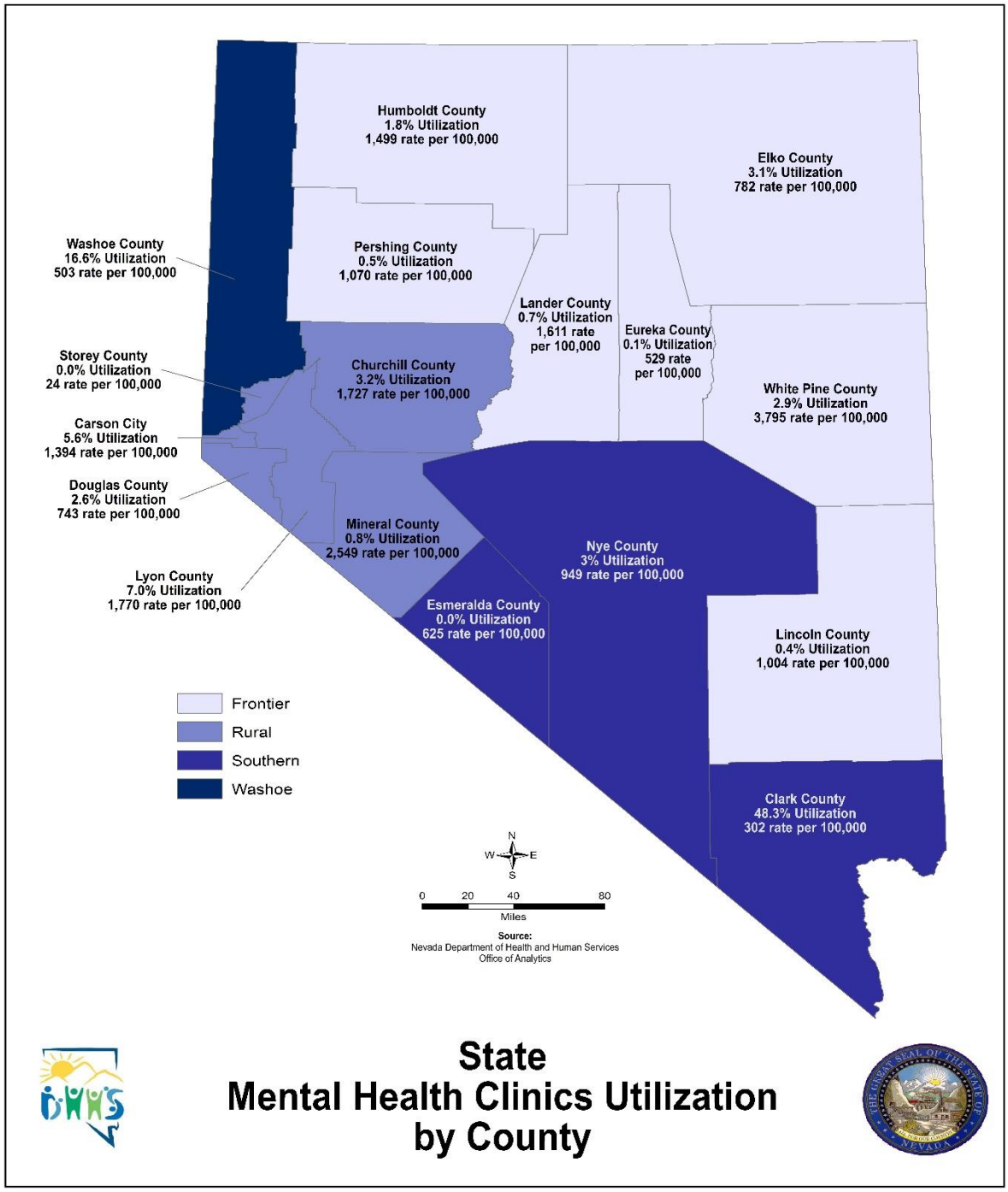



*Source: Avatar.*
**A client is counted only once per year. Clients may be counted more than once across years.*

The number of unique clients served* by State-Funded Mental Health facilities continues to decline. There were 13,702 clients served in 2017, which has decreased significantly from 2011 (23,557). The Affordable Care Act (ACA) went into effect in 2014. Therefore, many Nevada residents are now able to access non-state-funded facliites through the expansion of Medicaid. This likely contributes to the decline of the clients represtented in the above chart.

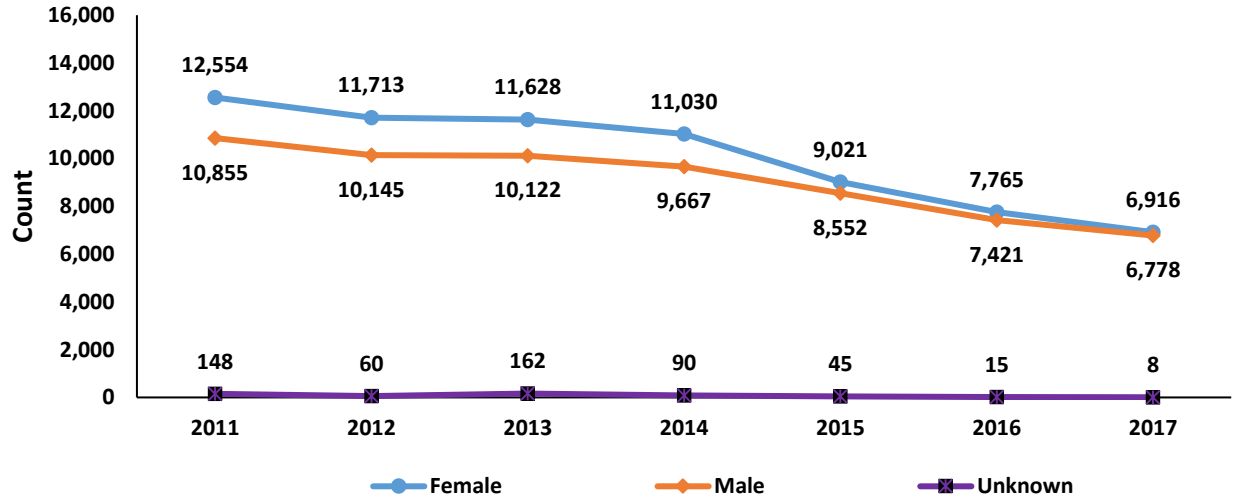
Of the Nevada residents accessing DPBH mental health services in 2017, 48.3% lived in Clark county and 16.6% lived in Washoe county. White Pine county had the highest rate of adults accessing state mental health services, 3,795 per 100,000 population.

**Figure 13. State-Funded Mental Health Clinics Utilization by County, 2017**




*Source: Avatar.*
**A client is counted only once per year. Clients may be counted more than once across years.*
***Percent (%)**: Number of clients who utilize mental health services in that county, divided by total utilization.*
***Rate**: Number of clients who utilize mental health services in that county divided by county population per 100,000 people.*

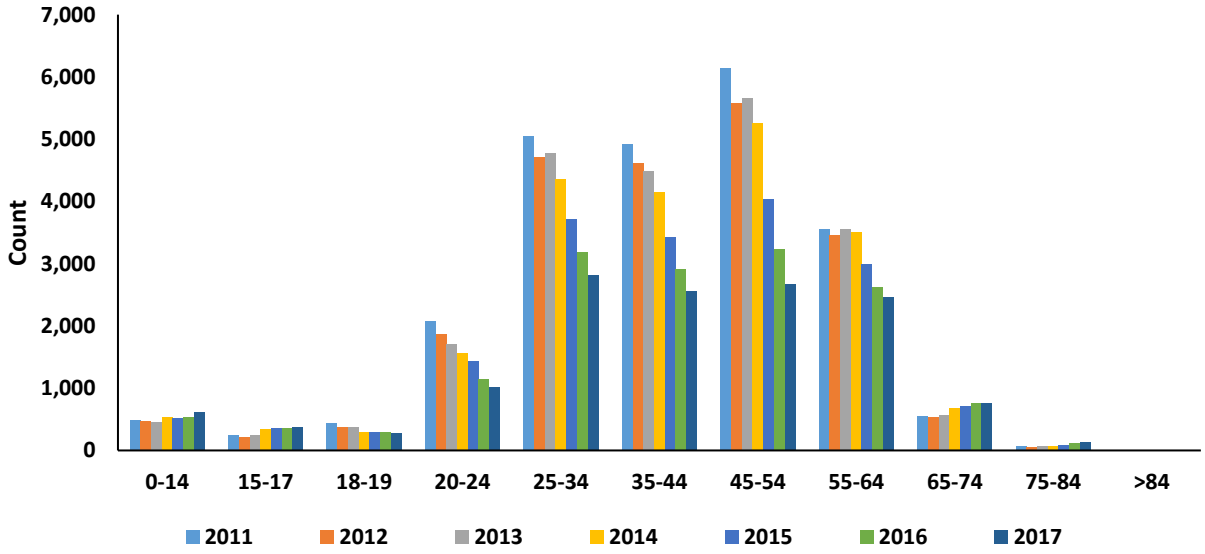
**Figure 14. State-Funded Mental Health Clinics Utilization* by Gender, 2011-2017.**




*Source: Avatar.*
**A client is counted only once per year. Clients may be counted more than once across years.*

From 2011 to 2017, females have significantly utilized the state-funded mental health clinics more than males except in 2017, where the difference between male and female is not significant (95% confidence interval). In 2017, 452.6 per 100,000 male population utilized the state-funded mental health clinics, compared females at 464.9 per 100,000 female population.

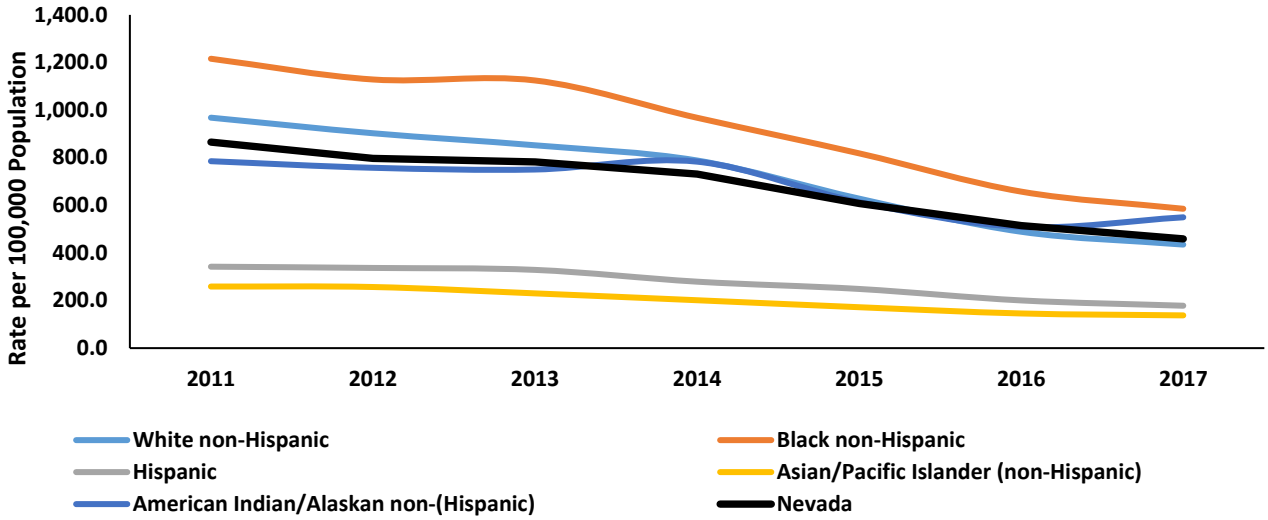
**Figure 15. State-Funded Mental Health Clinics Utilization* by Age-Group, 2011-2017.**




*Source: Avatar.*
*Age "Unknown" not included in analysis.*
**A client is counted only once per year. Clients may be counted more than once across years.*

Of patients that utilized state-funded mental health services, the most common age group was 45-54-year olds, on average accounting for 24% of the patients.

**Figure 16. State-Funded Mental Health Clinics Utilization* by Race/Ethnicity Crude Rates, 2011-2017.**

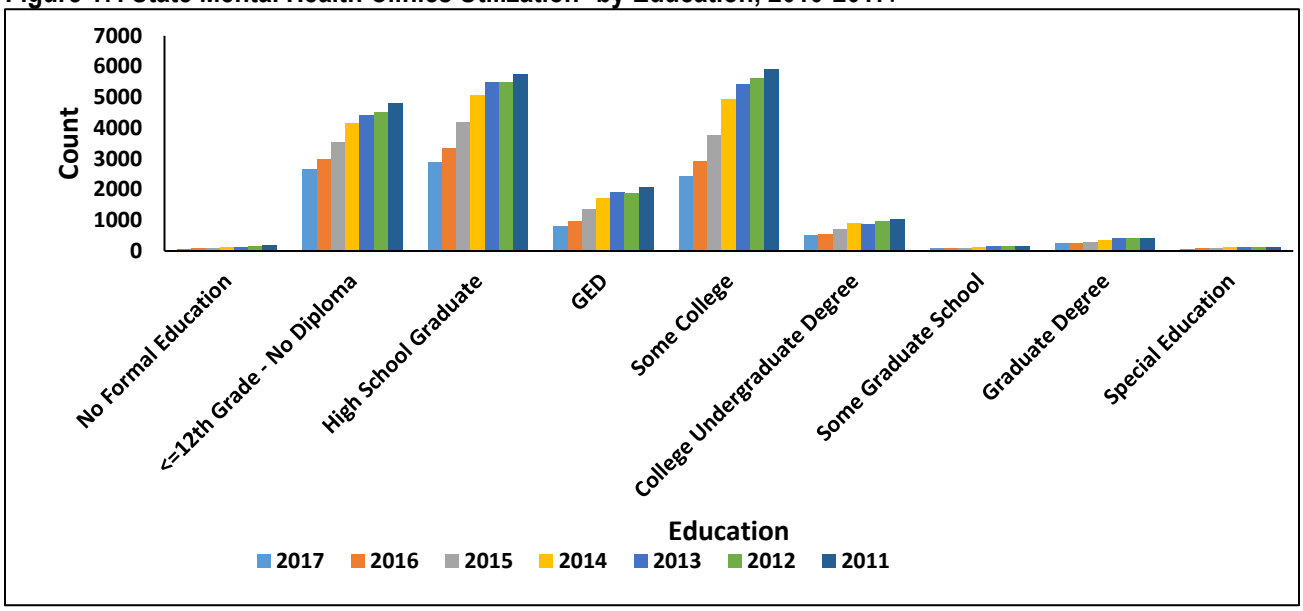



*Source: Avatar and the Nevada State Demographer (vintage 2017)*
*Race "Unknown" not included in analysis.*
**A client is counted only once per year. Clients may be counted more than once across years.*

The Affordable Care Act (ACC) went into effect in 2014. Therefore, many Nevada residents are now able to access non-state-funded facliites through the expansion of Medicaid. This likely contributes to the decline of the clients represtented in the above chart. The patient utilization crude rate has gone down significantly across all races from 2011 to 2017. The Black non-Hispanic population has had the highest rate over the seven-year period.

High school graduates accounted for 29% of the patients, followed by those with some college at 28%, and then those with less than 12$^{th}$ grade, no diploma education at 24% in 2017.

**Figure 17. State Mental Health Clinics Utilization* by Education, 2010-2017**.




*Source: Avatar*
*Education "Unknown" not included in analysis.*
**A client is counted only once per year. Clients may be counted more than once across years.*

**Figure 18. Top Mental Health Clinic Services by Number of Patients Served*, 2012-2017.**

| Program | Year | | | | | | |
|---|---|---|---|---|---|---|---|
| | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |
| SNAMHS Medication Clinic Adult | 8,492 | 8,081 | 8,481 | 8,083 | 5,500 | 4,307 | 3,891 |
| NNAMHS Medication Clinic Adult | 3,790 | 3,678 | 3,838 | 3,508 | 3,149 | 2,310 | 1,920 |
| SNAMHS Inpatient Hospital Adult | 2,106 | 1,537 | 2,359 | 2,593 | 2,685 | 1,960 | 1,881 |
| SNAMHS Ambulatory Service Coordination Adult | 3,331 | 3,137 | 2,711 | 1,520 | 823 | 1,843 | 1,517 |
| SNAMHS Observation Unit Adult~ | 4,458 | 4,736 | 3,106 | ~ | ~ | ~ | ~ |
| NNAMHS Ambulatory Service Adult | 1,369 | 1,537 | 1,822 | 1,560 | 1,326 | 692 | 56 |
| SNAMHS Service Coordination Adult | 698 | 742 | 1,052 | 1,051 | 867 | 644 | 521 |
| SNAMHS Out Patient Counseling Adult | 1,061 | 967 | 673 | 649 | 526 | 575 | 566 |

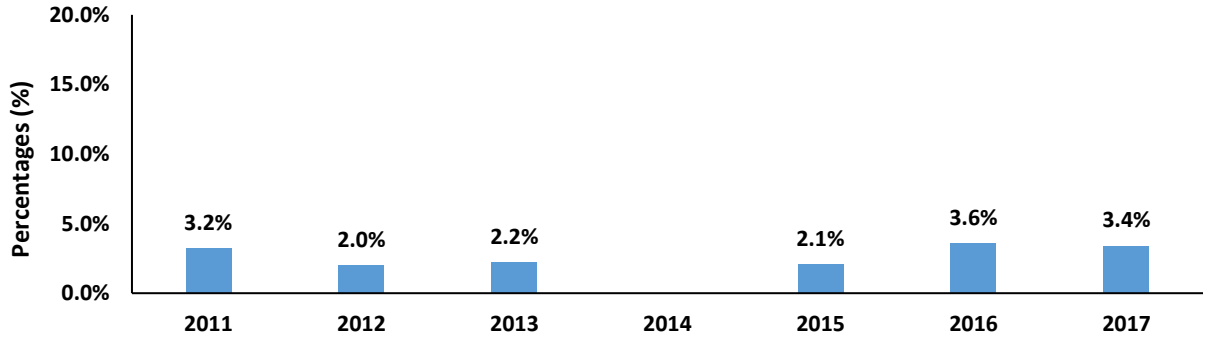
*Source: Avatar.*
*~Program no longer active.*
**A client is counted only once per year. Clients may be counted more than once across years.*

Patients were counted only once per program per year. Since a patient can receive services in more than one program the count above are not mutually exclusive.

## Suicide

While suicide is not a mental illness, one of the most common causes of suicide is mental illness. Risk factors for suicide include depression, bipolar disorder and personality disorders. Of those who attempt or die from suicide, many have a diagnosed mental illness.

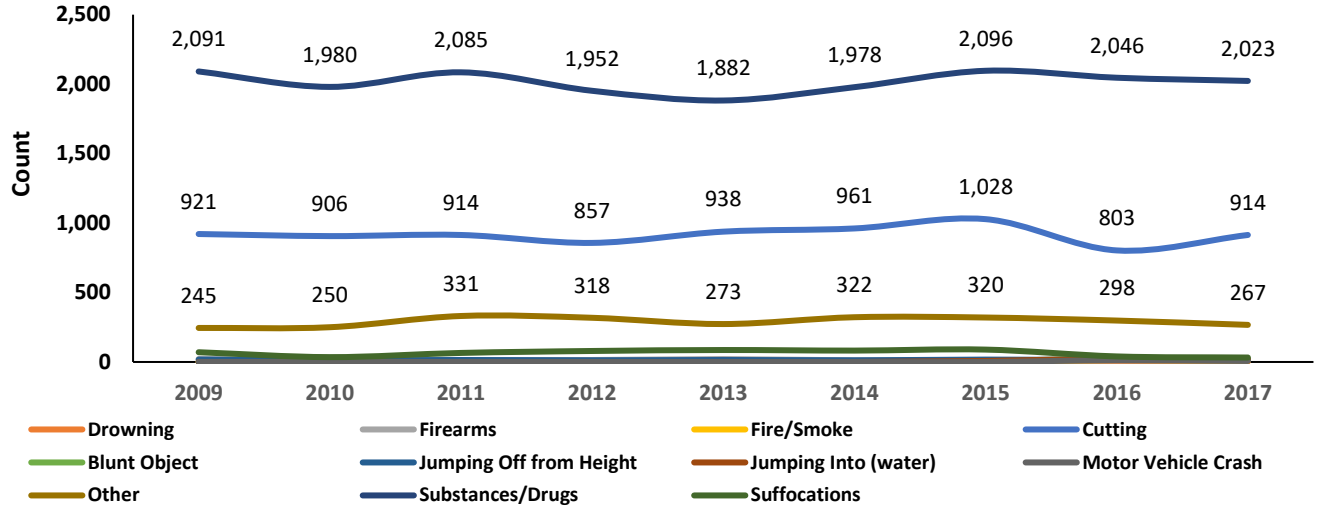
**Figure 19. Percentage of Adult Nevada Residents Who Have Seriously Considered Attempting Suicide, 2011-2017.**




*Source: Behavioral Risk Factor Surveillance System (BRFSS).*
*Charts scaled to 20% to display differences among groups.*
*Indicator was not measured in 2014.*

When asked "have you seriously considered attempting suicide during the past 12 months," 3.6% of Nevada residents said yes in 2016. Between 2011 and 2016, the average prevalence for suicide consideration in the state of Nevada is 2.6%. This indicator was not measured in 2014.

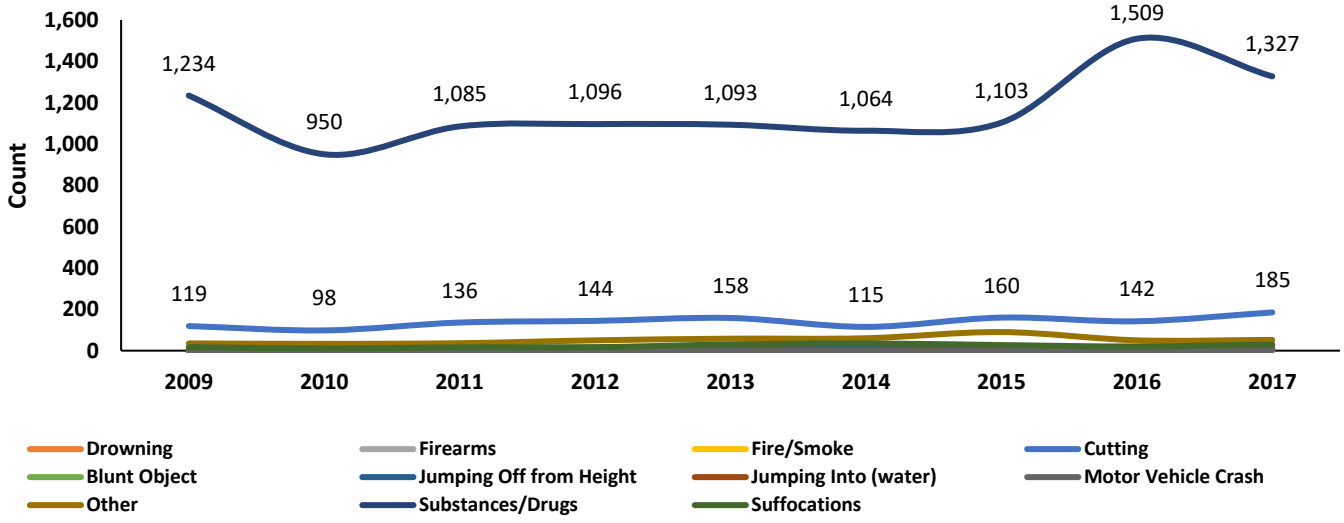
**Figure 20. Suicide Attempt Emergency Department Encounters by Method, Nevada Residents, 2009-2017.**




*Source: Hospital Emergency Department Billing.*
*ICD-10 codes replaced ICD-9 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*
*A person can be included in more than category and therefore the counts above are not mutually exclusive.*

Attempted suicides, where the patient did not expire at the hospital, have remained steady from 2009 to 2017. The most common method for attempted suicides is a substance or drug overdose attempt. During 2017, 3,247 emergency department encounters were for suicide attempts. Of those attempts, 2,023 (62%) were for substance/drug overdose.

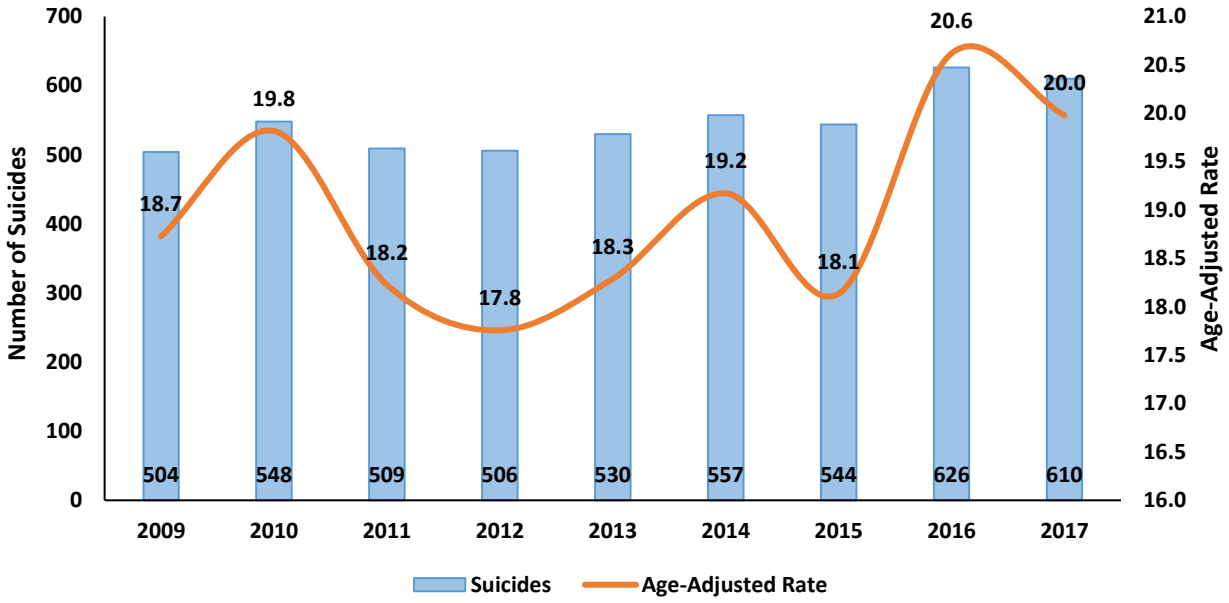
**Figure 21. Suicide Attempt Inpatient Admissions by Method, Nevada Residents, 2009-2017.**




*Source: Hospital Inpatient Billing.*
*ICD-10 codes replaced ICD-9 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

In 2017, there were 1,605 inpatient admissions for attempted suicides where the patient was admitted and did not expire at the hospital. Of those, 1,327 (82%) were for substance and drug overdoses.

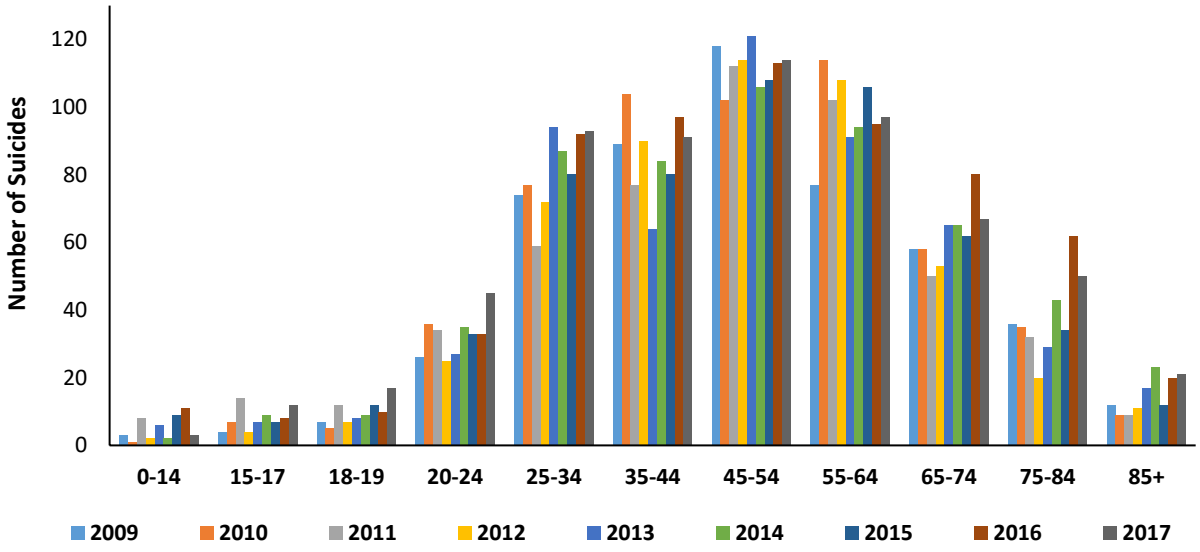
**Figure 22. Number of Suicides and Age-Adjusted Rates, Nevada Residents, 2009-2017.**




*Source: Nevada Electronic Death Registry System.*

The age-adjusted suicide rate for 2017 in Nevada was 20.0 per 100,000 population. Between 2009 and 2017, the highest age-adjusted suicide rate was in 2016 (20.6 per 100,000 population), and lowest rate was in 2012 (17.8 per 100,000 population). From 2009 to 2017 there have been 4,934 suicides in Nevada, on average 548 suicides occur each year.

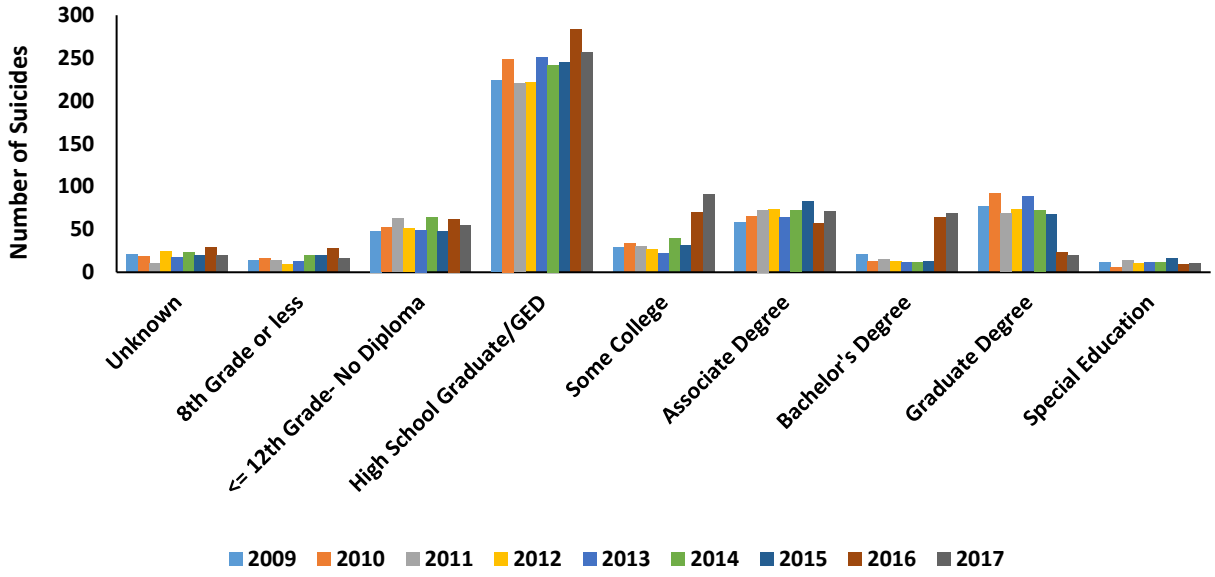
**Figure 23. Suicides by Age Group, Nevada Residents, 2009-2017.**




*Source: Nevada Electronic Death Registry System.*

Suicides in Nevada are most common in the 45-54 age group, with 114 suicides in 2017.

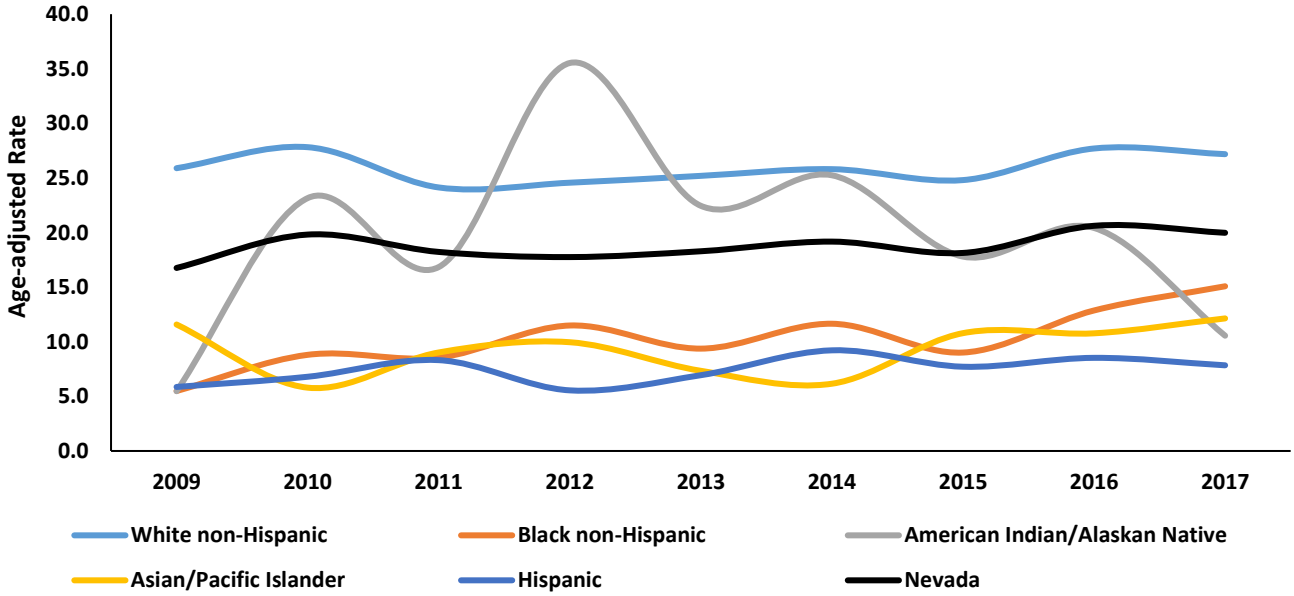
**Figure 24. Suicides by Level of Education, Nevada Residents, 2009-2017.**




*Source: Nevada Electronic Death Registry System.*

Suicides in Nevada are most common among persons with a high school degree, with 257 suicides in 2017.

**Figure 25. Age-Adjusted Suicides Rates by Race/Ethnicity, Nevada Residents, 2009-2017.**




*Source: Nevada Electronic Death Registry System.*

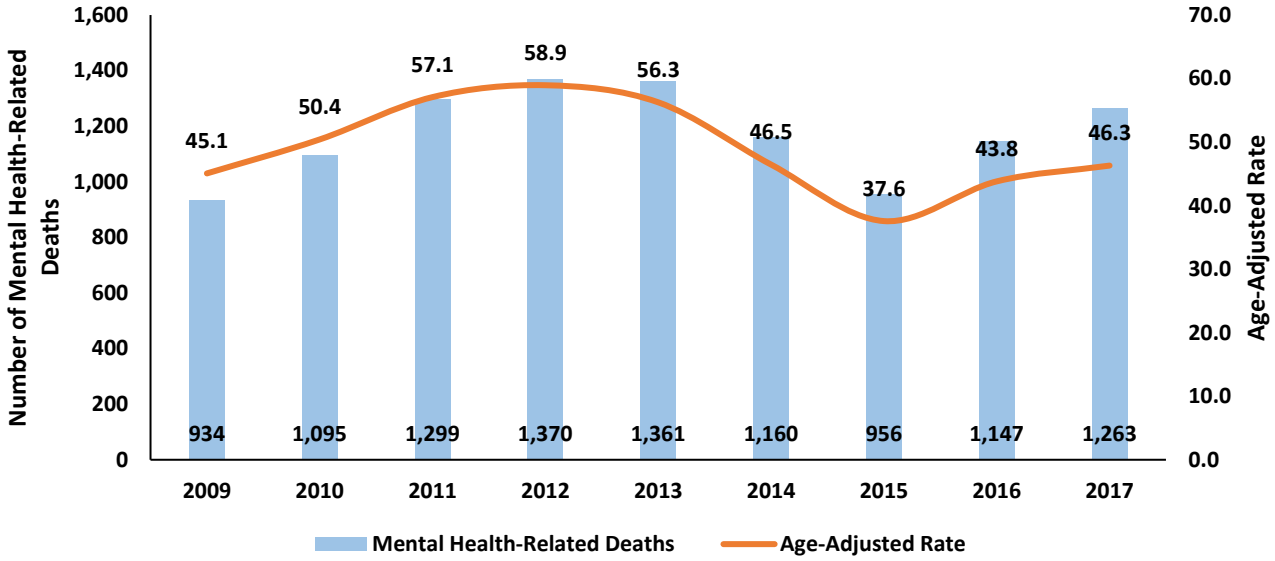
The age-adjusted suicide rates for White non-Hispanics were significantly higher than the Nevada overall rate for each year from 2009 to 2017, with 27.2 per 100,000 population in 2017. The age-adjusted suicide rate for American Indian/Alaskan Native was above the total Nevada rate (2012, 2103, 2014), but was not significantly higher based on 95% confidence intervals. Rates among Hispanics are significantly lower than overall Nevada rates from 2009 to 2017.

## Mental Health-Related Deaths

Mental health-related deaths are deaths with the following ICD-10 codes groups listed as a contributing cause of death (F00-F99 excluding F10-F19): Organic, including symptomatic, mental disorders; Schizophrenia, schizotypal and delusional disorders:

- Mood [affective] disorders
- Neurotic, stress-related and somatoform disorders
- Behavioral syndromes associated with physiological disturbances and physical factors
- Disorders of adult personality and behavior
- Mental retardation
- Disorders of psychological development
- Behavioral and emotional disorders with onset usually occurring in childhood and adolescence; Unspecified mental disorder

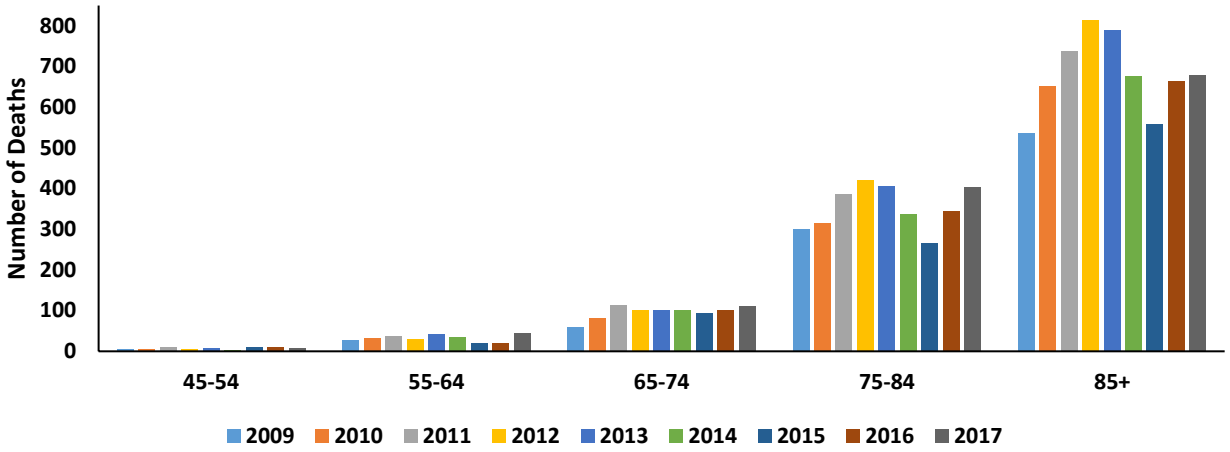
**Figure 26. Mental Health-Related Deaths and Age-Adjusted Rates, Nevada Residents, 2009-2017.**




*Source: Nevada Electronic Death Registry System.*

Mental health-related deaths dropped to 37.6 per 100,000 age-specific rate in 2015, which was a significant decrease (95% confidence interval), from 2014. Additionally, the rate began to increase from 2015 to 2017, but were significantly smaller than previous years (2011 to 2014) still.

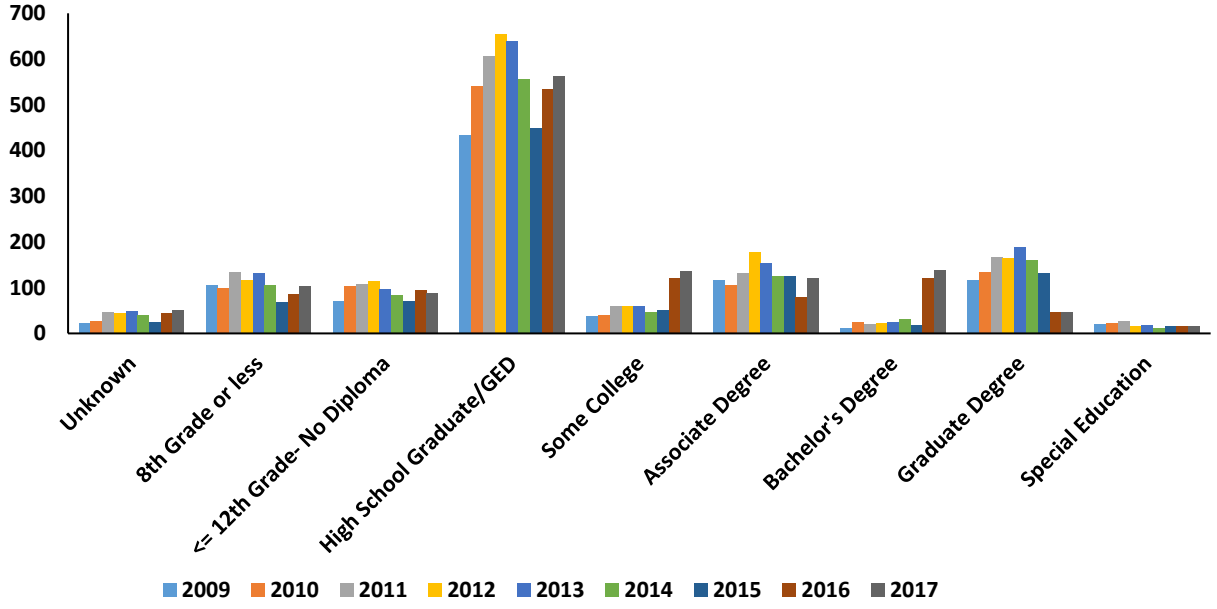
**Figure 27. Mental Health-Related Deaths by Age Group, Nevada Residents, 2009-2017.**




*Source: Nevada Electronic Death Registry System.*
*Limited age groups to display differences among groups.*

There were 40 deaths to those less than 45 years old in the 9-year span (2009-2017), and therefore were not displayed in the figure above. The most common age group for mental health-related deaths were the ages 85 and older with 679 in 2017.

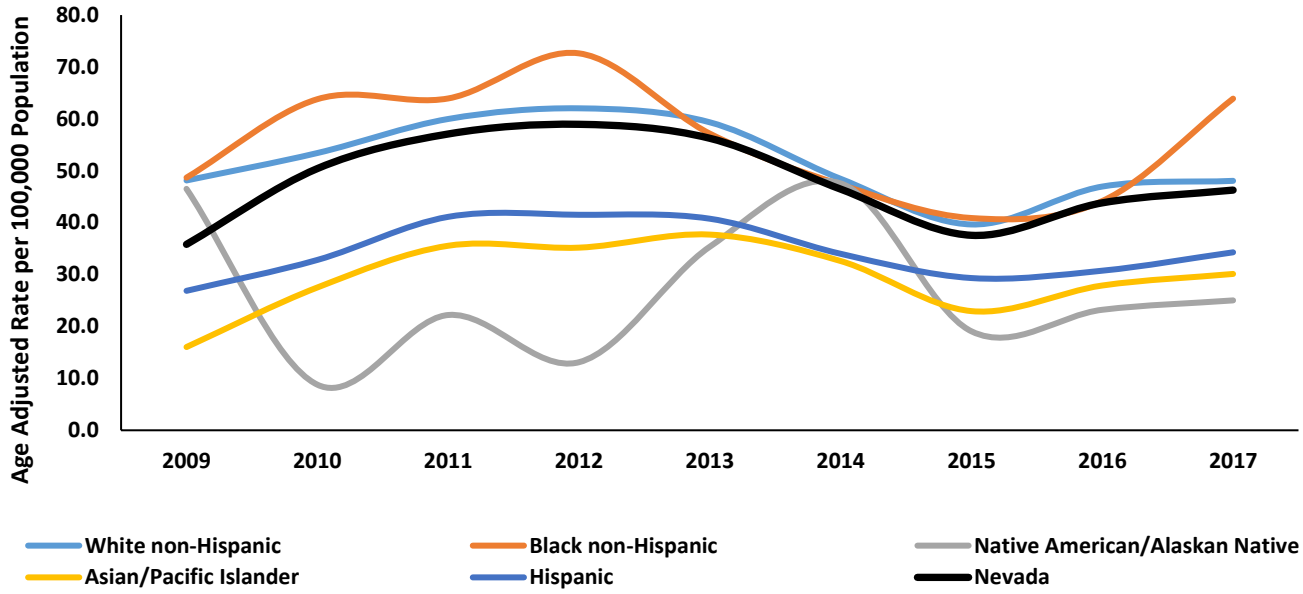
**Figure 28. Mental Health-Related Deaths by Education, Nevada Residents, 2009-2017.**




*Source: Nevada Electronic Death Registry System.*

Mental health-related deaths were highest among individuals who had high school diplomas.

**Figure 29. Mental Health-Related Deaths by Race/Ethnicity, Nevada Residents, 2009-2017.**




*Source: Nevada Electronic Death Registry System.*

There are no significant differences between the age-adjusted mental health-related death rates among the races/ethnicities.

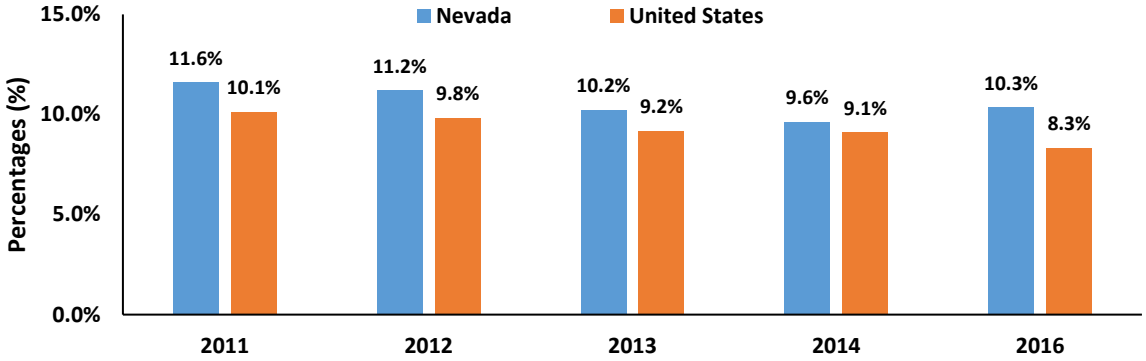
# Substance Abuse

Substance use data are collected from hospital billing data, vital records data, and through national survey data including Substance Abuse and Mental Health Service Administration, BRFSS and YRBS.

## National Survey on Drug Use and Health

The Substance Abuse and Mental Health Services Administration (SAMHSA) sponsors the Nation Survey on Drug Use and Health (NSDUH). The survey tracks trends of illicit drug, alcohol, and tobacco use, as well as mental health issues throughout the United States.

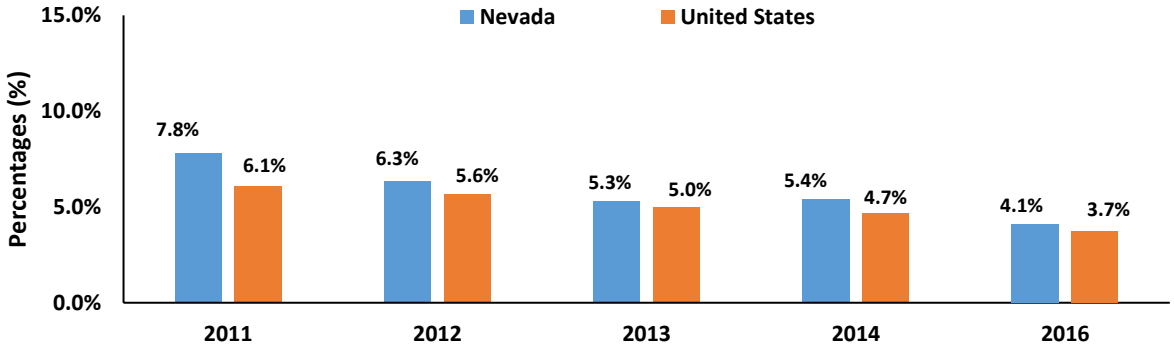
**Figure 30. Past Month Illicit Drug Use Among Adolescents Aged 12-17 in Nevada and the United States, 2011-2016.**




*Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Surveys on Drug Use and Health, 2010-2016.*
*Chart scaled to 15% to display differences among groups.*

According to the International Encyclopedia of Behavioral Sciences, Illicit drugs are "substances that either stimulate or inhibit the central nervous system or cause hallucinogenic effects to the effect that their use has been prohibited globally." In 2016, 10.3% of Nevada adolescents aged 12-17 reported use of illicit drugs in the past month, whereas the nation reported 8.3%.

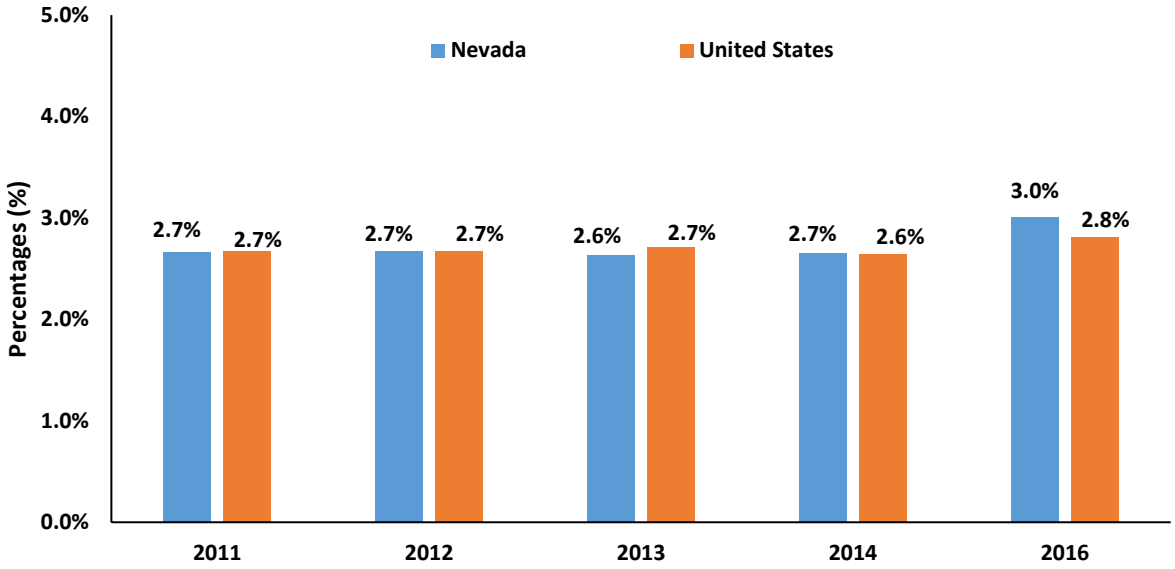
**Figure 31. Past Non-Medical Use of Pain Relievers Among Adolescents Aged 12-17 in Nevada and the United States, 2011-2016.**




*Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Surveys on Drug Use and Health, 2010-2016.*
*Chart scaled to 15% to display differences among groups.*

The use of non-medical pain relievers among adolescents age 12-17 has decreased from 7.8% in 2011 to 4.1% in 2016.

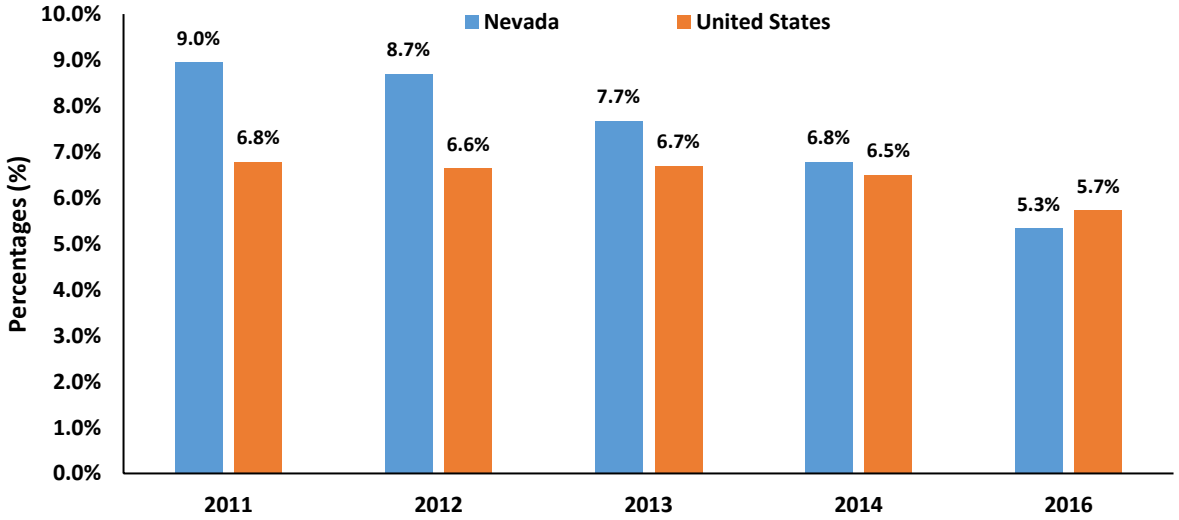
**Figure 32. Illicit Drug Use Disorder in the Past Year in Ages 12 Years and Above, in Nevada and the United States, 2011-2016.**




*Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Surveys on Drug Use and Health, 2010-2016.*
*Chart scaled to 5% to display differences among groups.*

In 2016, 3.0% of Nevadans aged 12 years and above reported having an illicit drug use disorders, which is a slight increase from 2.7% in 2011.

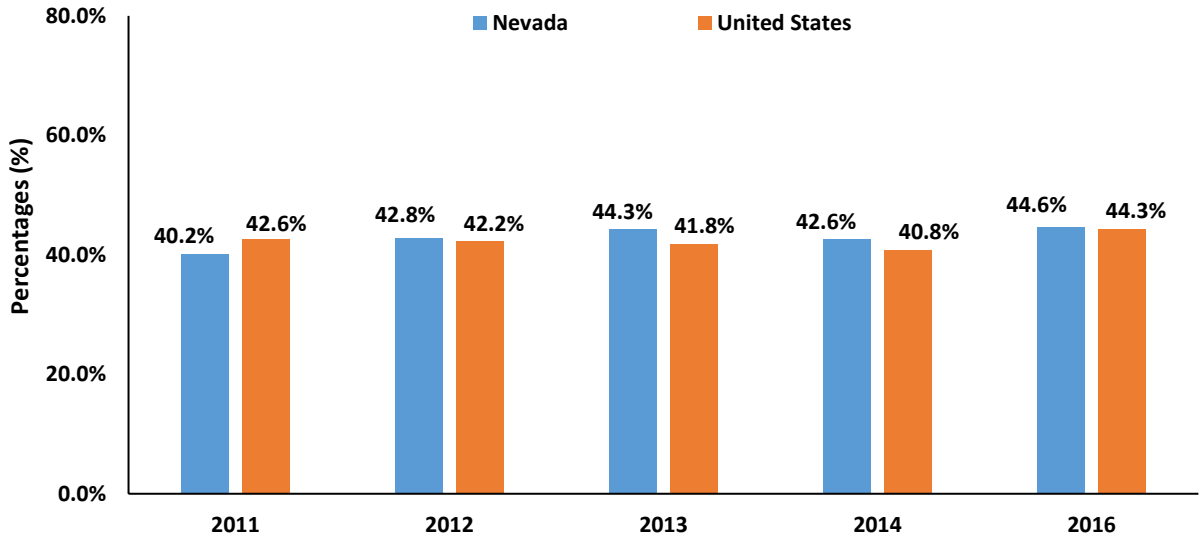
**Figure 33. Alcohol Use Disorder in the Past Year in Ages 12 Years and Above, in Nevada and the United States, 2011-2016.**




*Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Surveys on Drug Use and Health, 2010-2016.*
*Chart scaled to 10% to display differences among groups.*

In 2016, 5.3% of Nevadans aged 12 years and above were surveyed to have an alcohol use disorder, which is down from 9.0% in 2011.

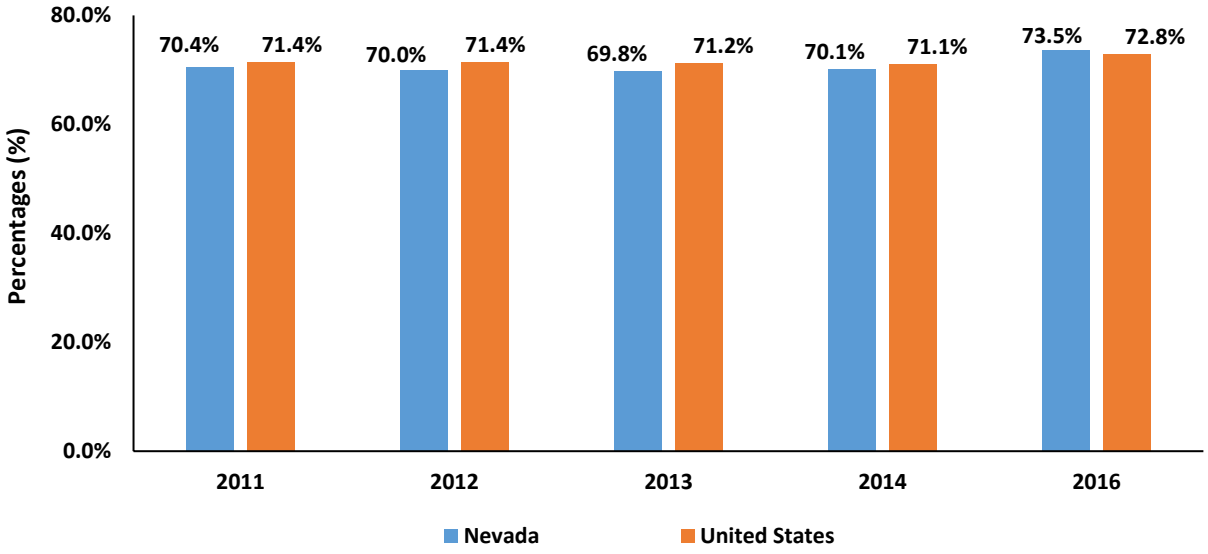
**Figure 34. Perceptions of Great Risk from Having Five or More Drinks of an Alcoholic Beverage Once or Twice a Week in the Past Year in Ages 12 Years and Above, in Nevada and the United States, 2011-2016.**




*Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Surveys on Drug Use and Health, 2010-2016.*
*Chart scaled to 80% to display differences among groups.*

In 2016, 44.6% of Nevadans aged 12 years and above perceived having five or more drinks of an alcoholic beverage once or twice a week in the past year as a great risk, this is up from 2011.

**Figure 35. Perceptions of Great Risk in Smoking 1-2 Packs of Cigarettes/Day in the Past Year Among 12 Years and Above, in Nevada and the United States, 2011-2016.**



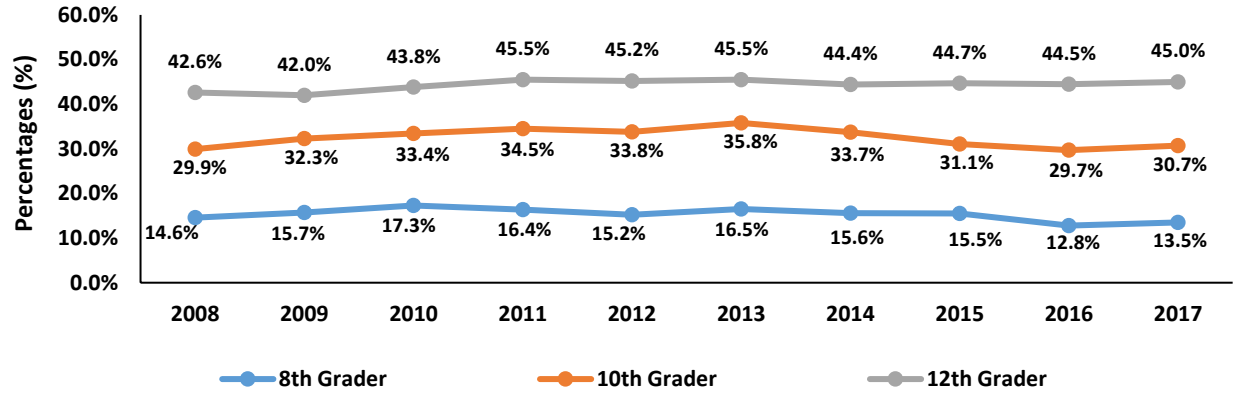

*Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Surveys on Drug Use and Health, 2010-2016.*
*Chart scaled to 80% to display differences among groups.*

In 2016, 73.5% of Nevadans aged 12 years and above perceived smoking 1-2 packs of cigarettes per day as having great risk, which is higher than previous years.

## Monitoring the Future Survey

Monitoring the Future is an ongoing study of the behaviors, attitudes, and values of American secondary school students, and young adults. Each year, a total of approximately 50,000 students in 8th, 10th and 12th grades are surveyed. The Monitoring the Future Study has been funded under a series of investigator-initiated competing research grants from the National Institute on Drug Abuse, a part of the National Institutes of Health. Monitoring the Future Survey is conducted at the Survey Research Center in the Institute for Social Research at the University of Michigan. This data is collected nationality and state level is not provided.

**Figure 36. Annual Prevalence of Marijuana/Hashish Use, United States, 2008-2017.**

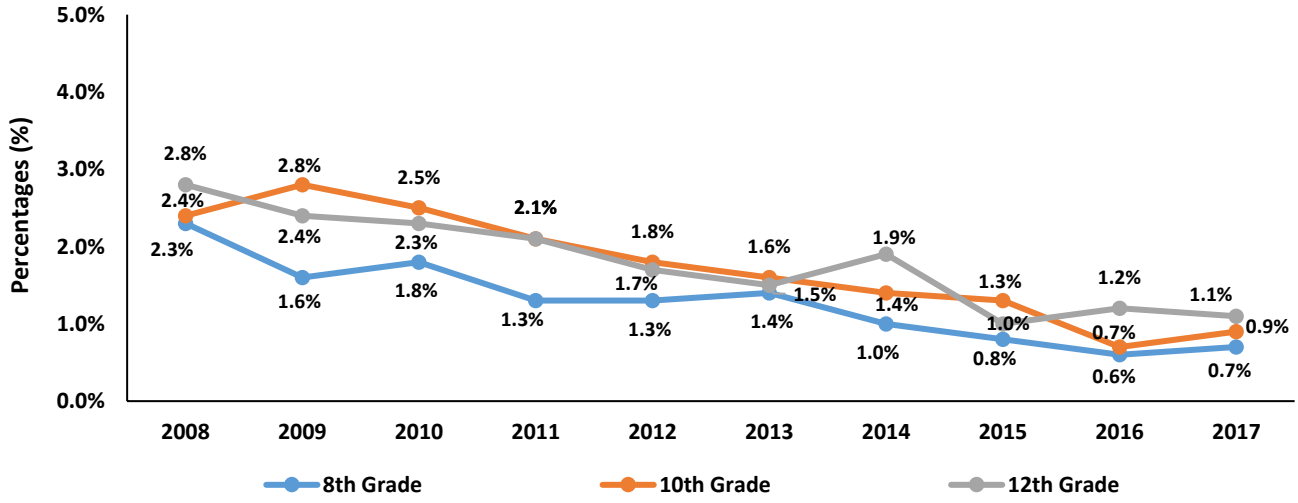



*Source: Monitoring the Future Survey.*

*Chart scaled to 60% to display differences among groups.*

On average, 44% of 12th graders, 32% of 10th graders, and 15% of 8th graders have reported ever using marijuana/hashish in the United States.

**Figure 37. Annual Prevalence of Methamphetamine Use, United States, 2008-2017.**

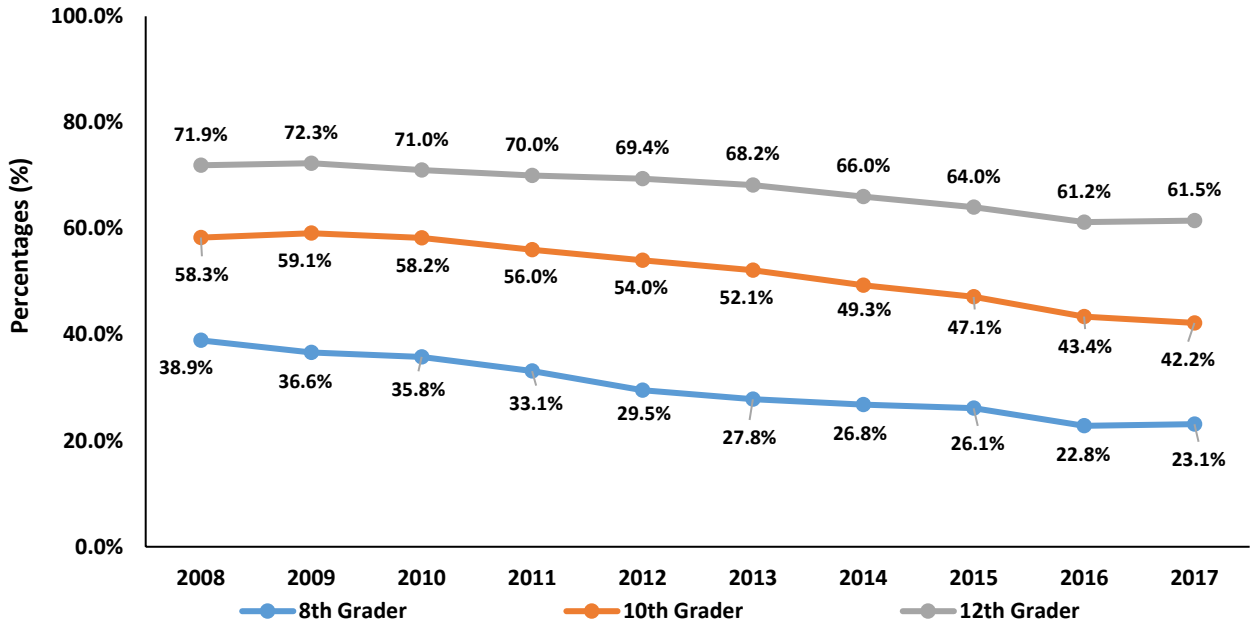



*Source: Monitoring the Future Survey.*

*Chart scaled to 5% to display differences among groups.*

Methamphetamine use has decreased by an average of 63% among all three surveyed grades since 2008 in the United States.

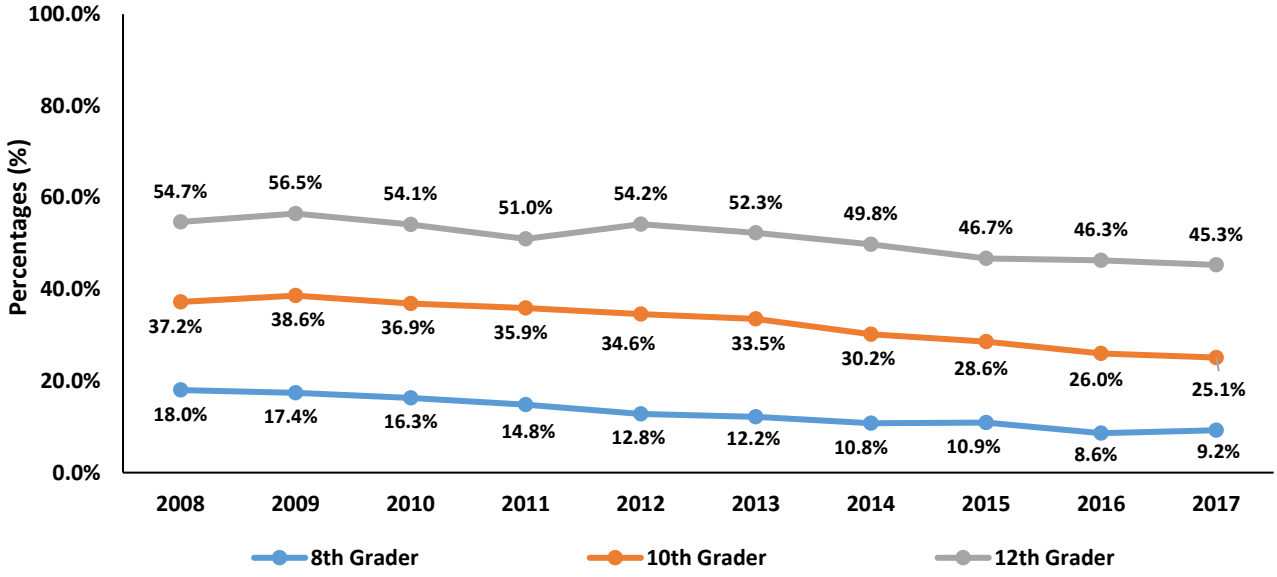
**Figure 38. Annual Prevalence of Alcohol Use, United States, 2008-2017.**




*Source: Monitoring the Future Survey.*

The prevalence of alcohol use including being drunk from alcohol has decreased in all grades since 2008 in the United States.

**Figure 39. Annual Prevalence of Being Drunk from Alcohol, United States, 2008-2017.**

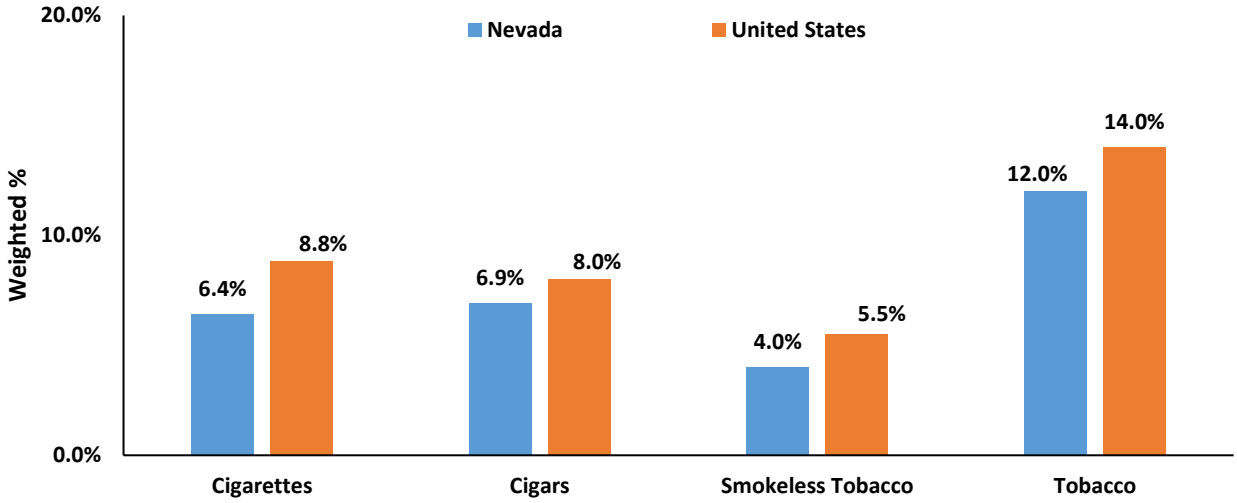



*Source: Monitoring the Future Survey.*

## Youth Risk Behavior Survey (YRBS)

The YRBS monitors six categories of health-related behaviors that contribute to leading causes of death and disabilities among youth and adults. Nevada high school and middle school students are surveyed during the odd years. In 2017, 5,336 high school, and 5,464 middle school students participated in the YRBS.

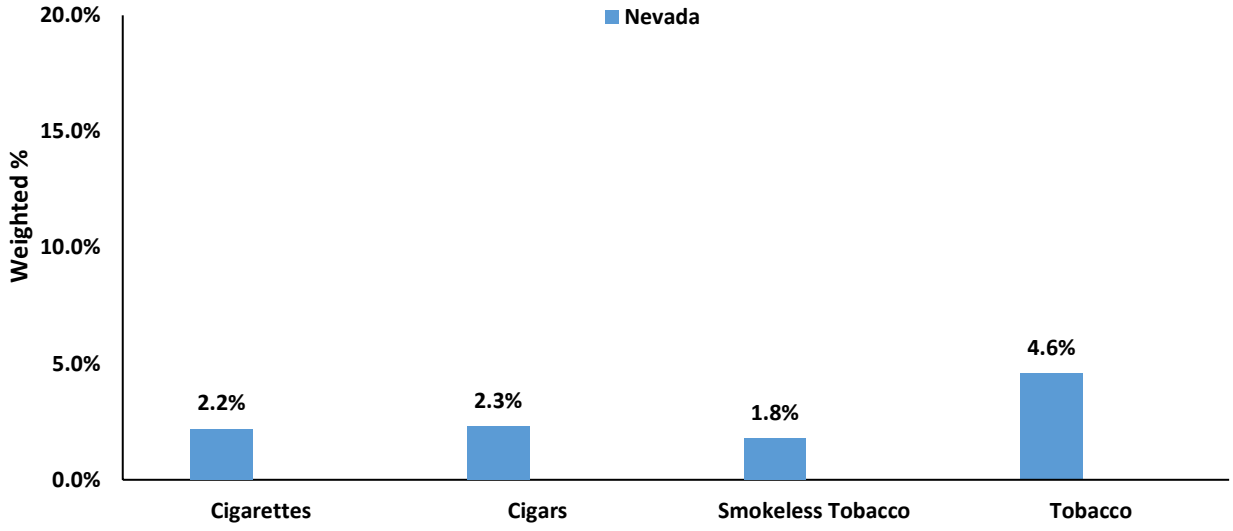
**Figure 40. Current Tobacco Use Summary, Nevada High School Students, 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 20% to display differences among groups.*

Of Nevada high school students, 6.4% reported using cigarettes in the past 30 days and 12% have used tobacco at one time; this is lower than the nation at 14%.

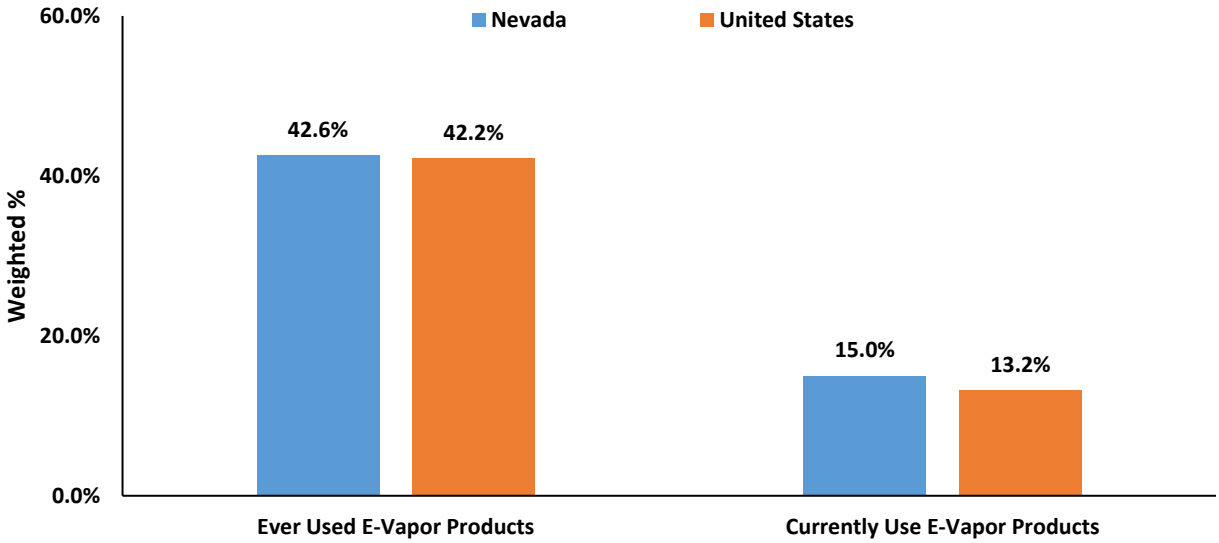
**Figure 41. Current Tobacco Use Summary, Nevada Middle School Students, 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 20% to display differences among groups.*

Of Nevada middle school students, 4.6% reported use of tobacco in the past 30 days; 2.2% reported use of cigarettes in the past 30 days and 2.3% used cigars in the past 30 days.

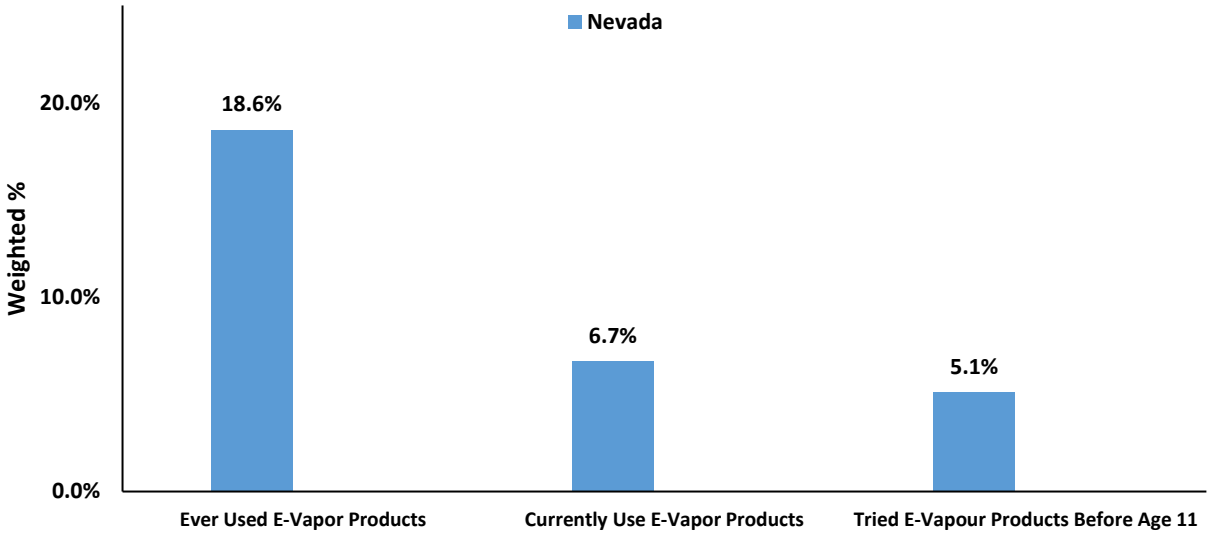
**Figure 42. Electronic Vapor Product Use Summary, Nevada High School Students, 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 60% to display differences among groups.*

Both in Nevada and the nation, about 42% have used electronic vapor (E-vapor) products. In Nevada 15% of high school students reported using E-vapor products, which is higher than the nation (13.2%).

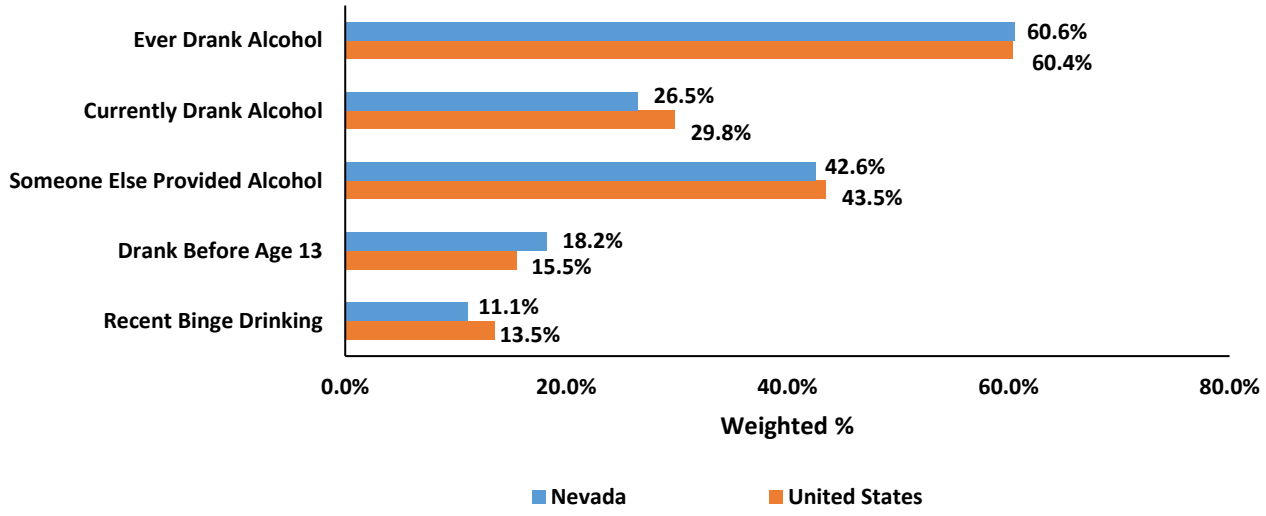
**Figure 43. Electronic Vapor Product Use Summary, Nevada Middle School Students, 2017**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 25% to display differences among groups.*

In Nevada, 18.6% of middle school students have used E-vapor products and 6.7% are currently using E-vapor products.

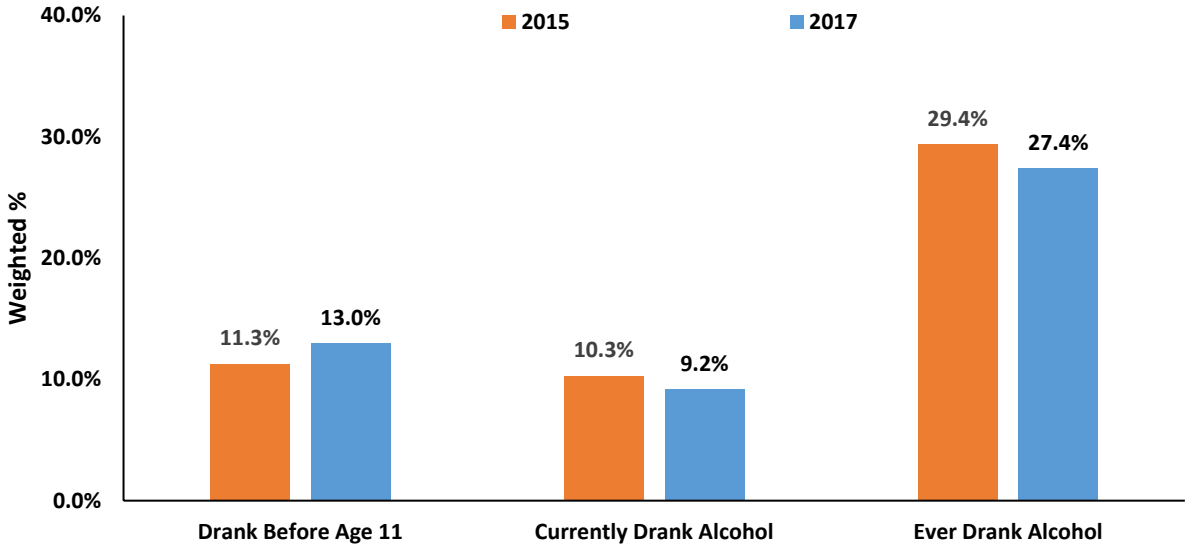
**Figure 44. Alcohol Use Summary, Nevada High School Students, 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Binge Drinking: Had five or more drinks of alcohol in a row for males, four or more for females within a couple of hours.*
*Chart scaled to 80% to display differences among groups.*

Approximately 6 out of 10 high school students have ever drank alcohol (60.6%). About 26.5% currently drink alcohol and 42.6% have had alcohol provided to them by someone else. Of Nevada high school students, 18.2% had alcohol before the age of 13 years and over 11.0% of high school students had a recent binge drinking experience (had at least five or more drinks of alcohol in a row for males and four or more for females within a couple of hours).

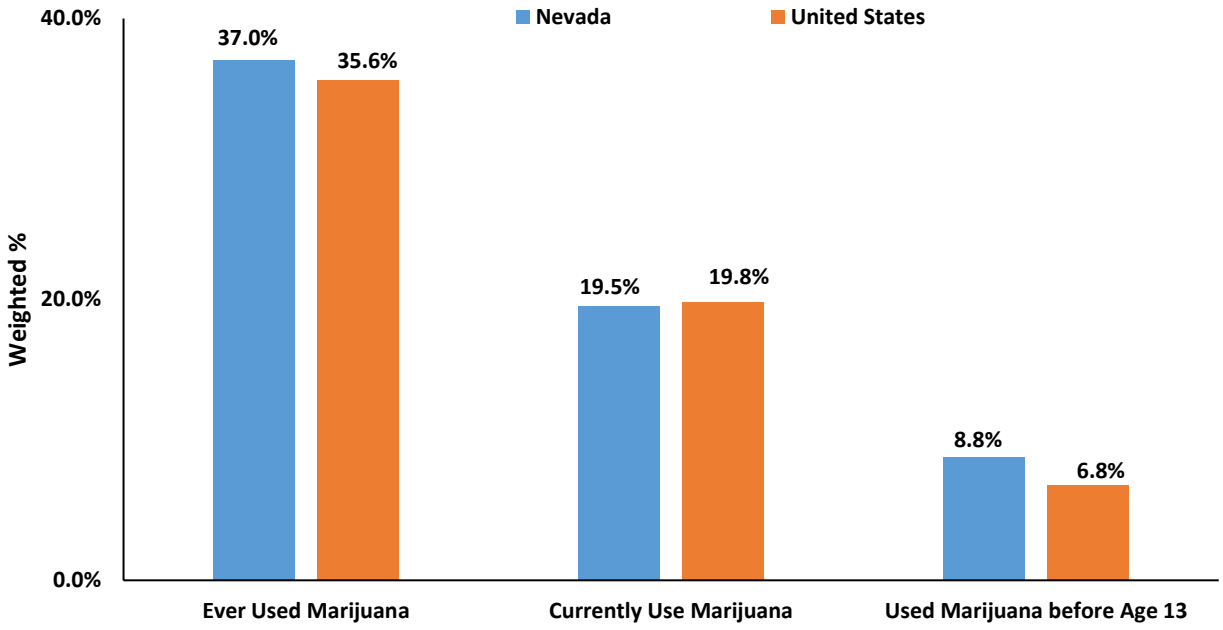
**Figure 45. Alcohol Use Summary, Nevada Middle School Students, 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 40% to display differences among groups.*

One out of ten middle school students drank alcohol before age 11. Also, 9.2% currently drink alcohol and three out of ten had drank alcohol before (27.4%).

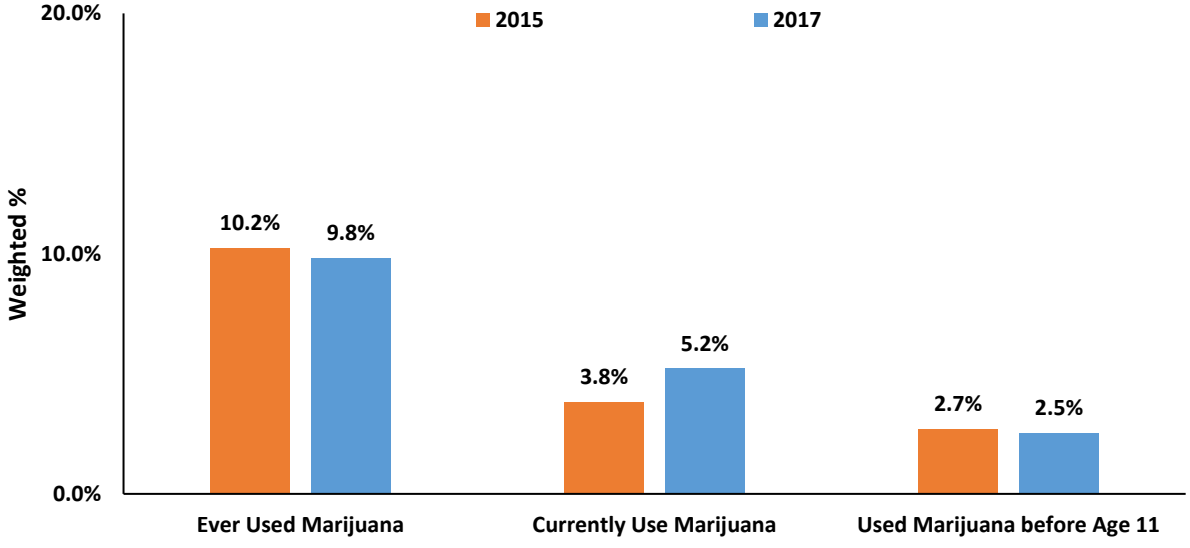
**Figure 46. Marijuana Use Summary, Nevada High School Students, 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 40% to display differences among groups.*

In Nevada, 37% of high school students reported trying marijuana, and 19.5% currently use marijuana. Nevada is comparable the nation (35.6%) for marijuana use.

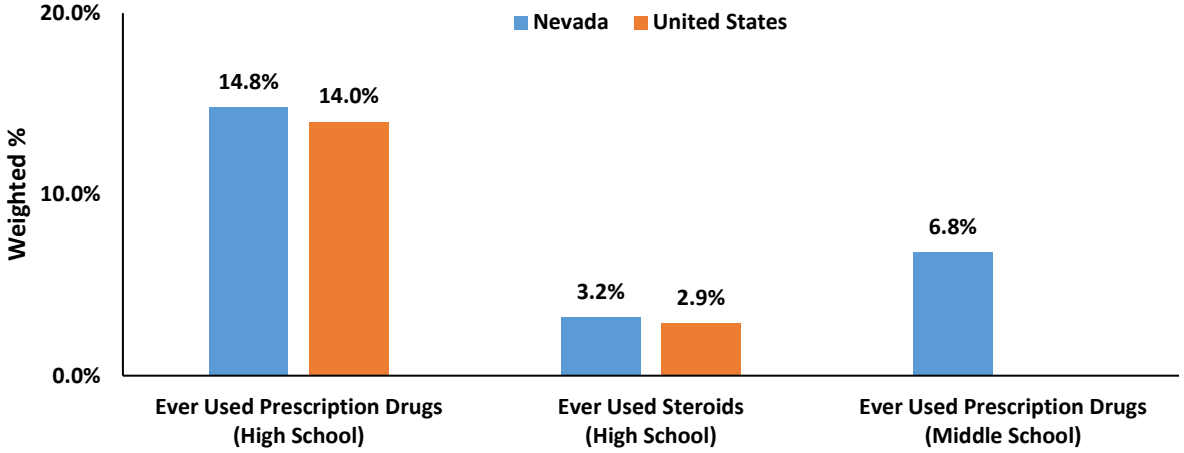
**Figure 47. Marijuana Use Summary, Nevada Middle School Students, 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 20% to display differences among groups.*

About 3% of Nevada middle school students had tried marijuana before they turned 11 years old, 9.8% have ever tried marijuana before, and 5.2% currently use marijuana.

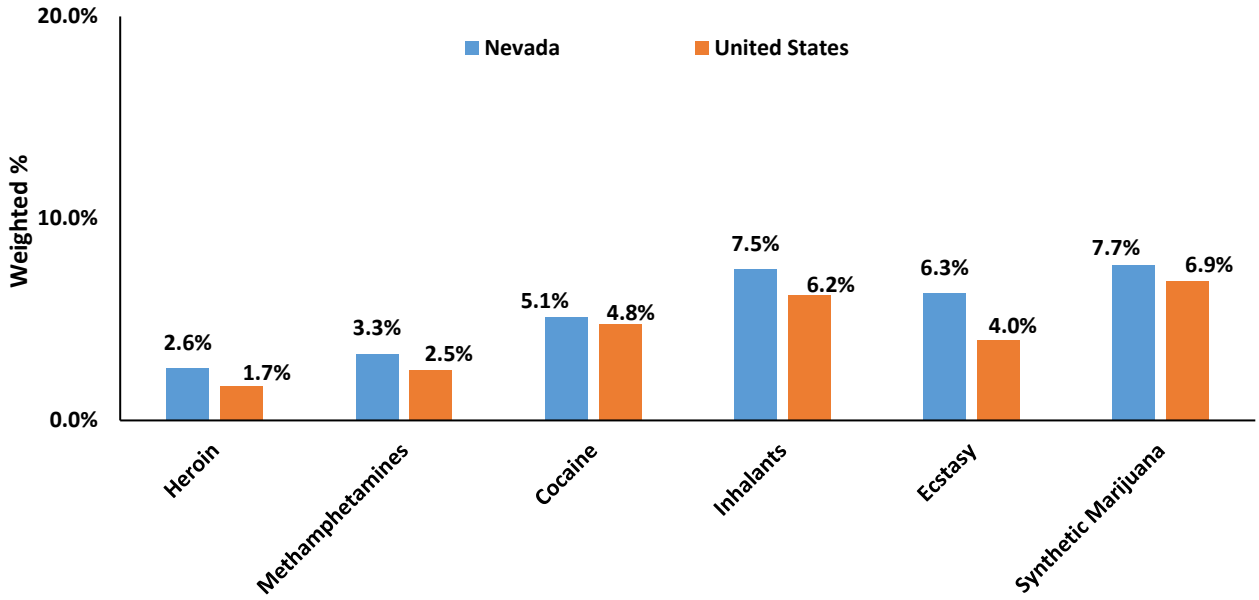
Figure 48. Nonprescription Substance Use Summary, Nevada Middle and High School Students, 2017.




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 20% to display differences among groups.*

Approximately 15% of high school students and 7% of middle school students in Nevada have used prescription drugs that were not prescribed to them. Of Nevada's high school students, 3.2% have tried non-prescribed steroids.

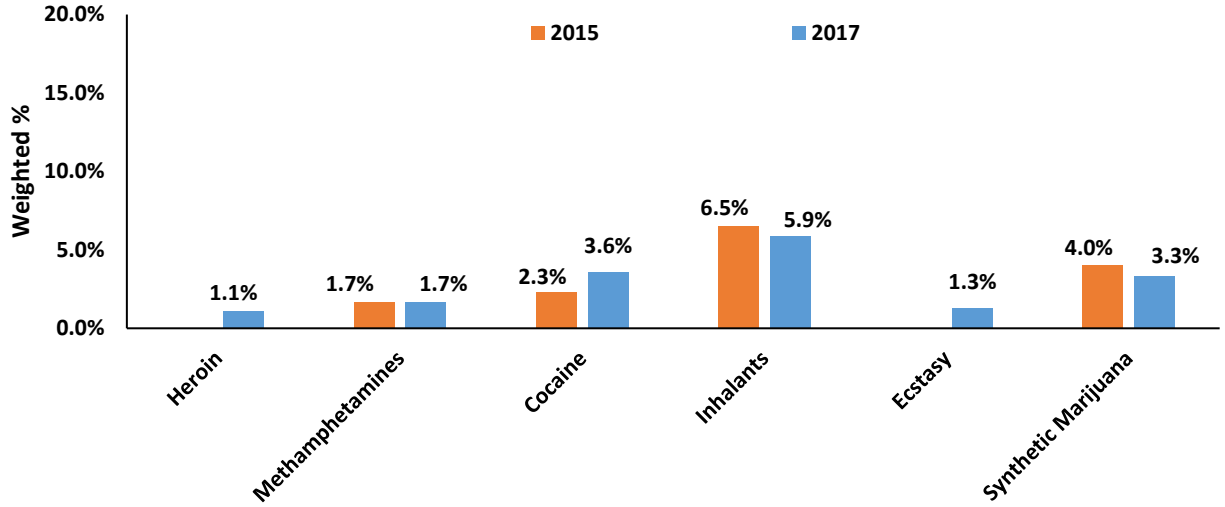
**Figure 49. Lifetime Drug Use Summary, Nevada High School Students, 2017.**




*Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 20% to display differences among groups.*

Drug use among high school students is slightly higher in Nevada than the nation. Of Nevada high school students, 7.5% have use inhalants, while the national percentage is lower at 6.2%.

**Figure 50. Lifetime Drug Use Summary, Nevada Middle School Students, 2017.**



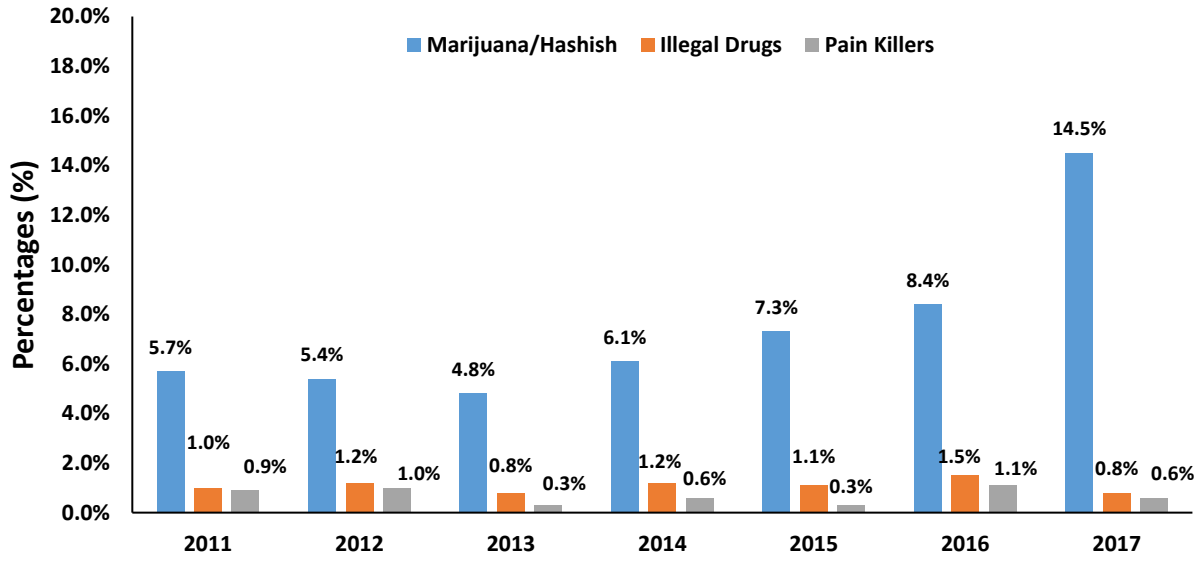

*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 20% to display differences among groups.*

Among Nevada middle school students, 1.7% reported using methamphetamines and 5.9% reported using inhalants in 2017. Drug use for cocaine, has increased from 2015 at 2.3% to 3.6%.

## Behavioral Risk Factor Surveillance System

BRFSS collects information on adult health-related risk behaviors. According to the Centers for Disease Control and Prevention, BRFSS is a powerful tool for targeting and building health promotion activities.

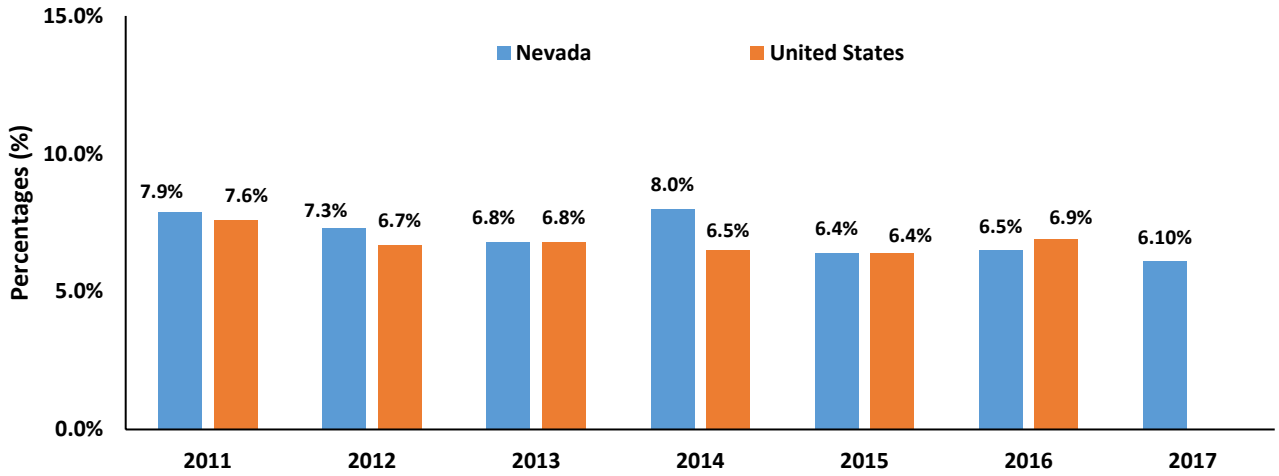
**Figure 51. Adult Nevada Residents Who Used Illegal Substances or Marijuana/Hashish or Painkillers to Get High in the Last 30 days, 2011-2017.**




*Source: Behavioral Risk Factor Surveillance System (BRFSS).*
*Chart scaled to 10% to display differences among groups.*

Between 2011 and 2017, on average, 7.5% of Nevada adults used marijuana or hashish in the last 30 days. Marijuana use has increased consistently since 2014 and is expected to increase as marijuana was legalized in Nevada in 2017. Of Nevadans surveyed, 0.7% (on average) used painkillers to get high in the last 30 days and 1.1% used other illegal drugs to get high in the last 30 days.

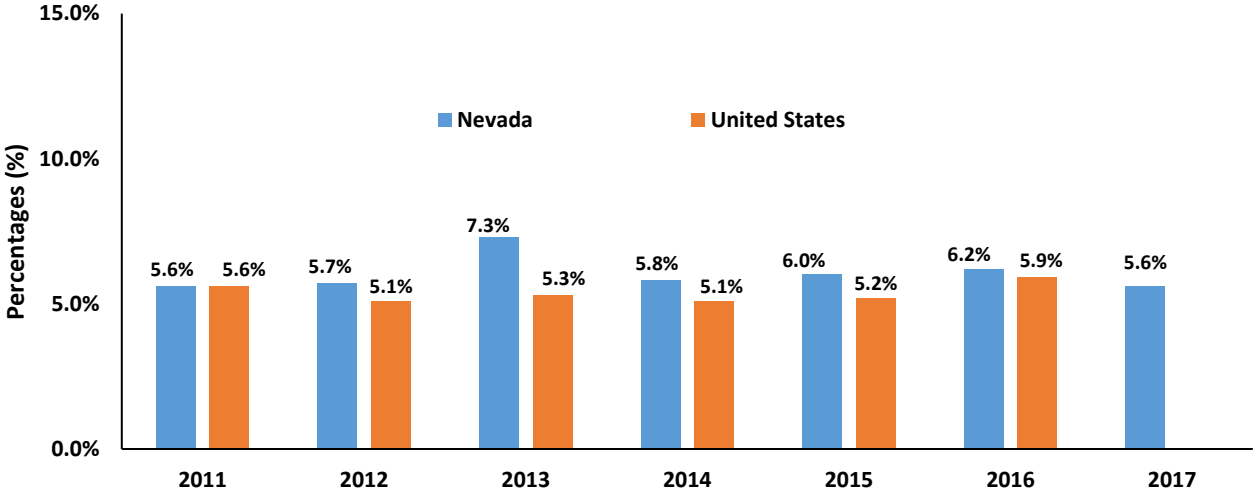
**Figure 52. Percentage of Adult Men Who are Considered Heavy Drinkers, 2011-2017.**




*Source: Behavioral Risk Factor Surveillance System (BRFSS).*
*The national data for 2017 are not available.*
*Chart scaled to 15% to display differences among groups.*

Men who are considered heavy drinkers has significantly decrease from 2011 to 2017, by a percent change of 22%. For men, heavy drinking is defined by consuming more than two alcoholic beverages per day.

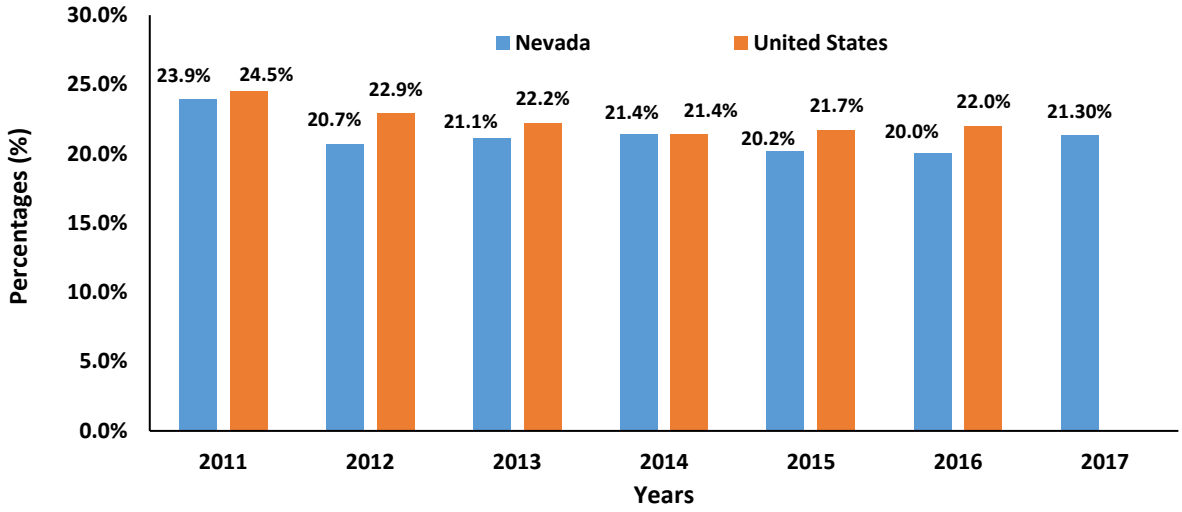
**Figure 53. Percentage of Adult Women Who are Considered Heavy Drinkers, 2011-2017.**




*Source: Behavioral Risk Factor Surveillance System (BRFSS).*
*The national data for 2017 are not available.*
*Chart scaled to 15% to display differences among groups.*

Women who are considered heavy drinkers has remain steady from 2011 to 2017, at 5.6%. For women, heavy drinking is defined by consuming more than one alcoholic beverage per day.

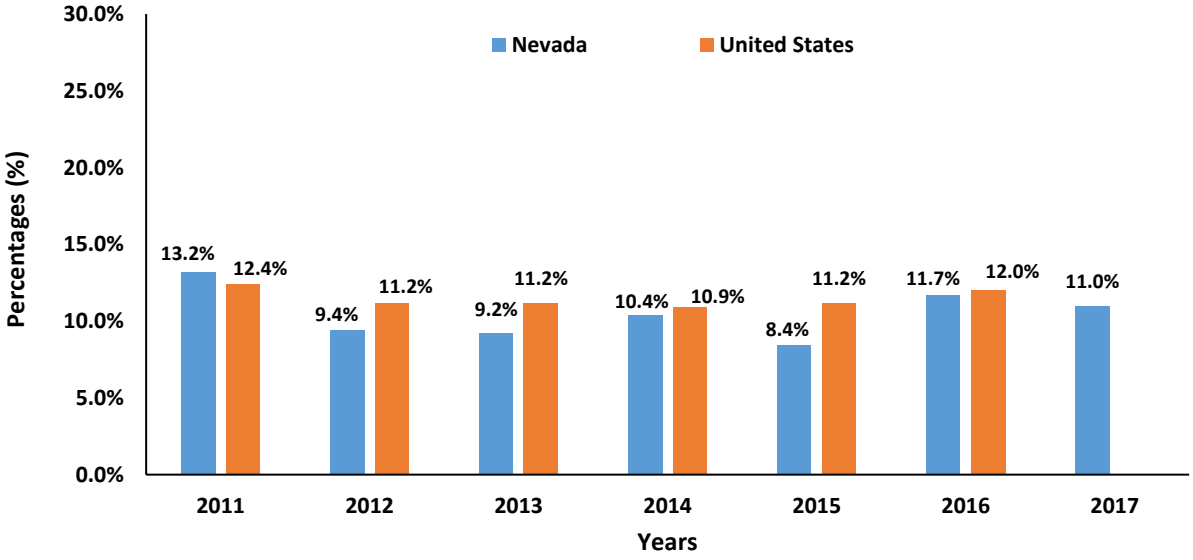
**Figure 54. Percentage of Adult Men Who are Considered Binge Drinkers, 2011-2017.**




*Source: Behavioral Risk Factor Surveillance System (BRFSS).*
*The national data for 2017 are not available.*
*Chart scaled to 30% to display differences among groups.*

Binge drinking is defined in men as having five or more alcoholic beverages on an occasion. Binge drinking has decreased from 2011 to 2017 but is not significant (95% confidence interval). Nevada men reported the lowest binge drinking percentage, 20.0%, in 2016.

**Figure 55. Percentage of Adult Women Who are Considered Binge Drinkers, 2011-2017.**



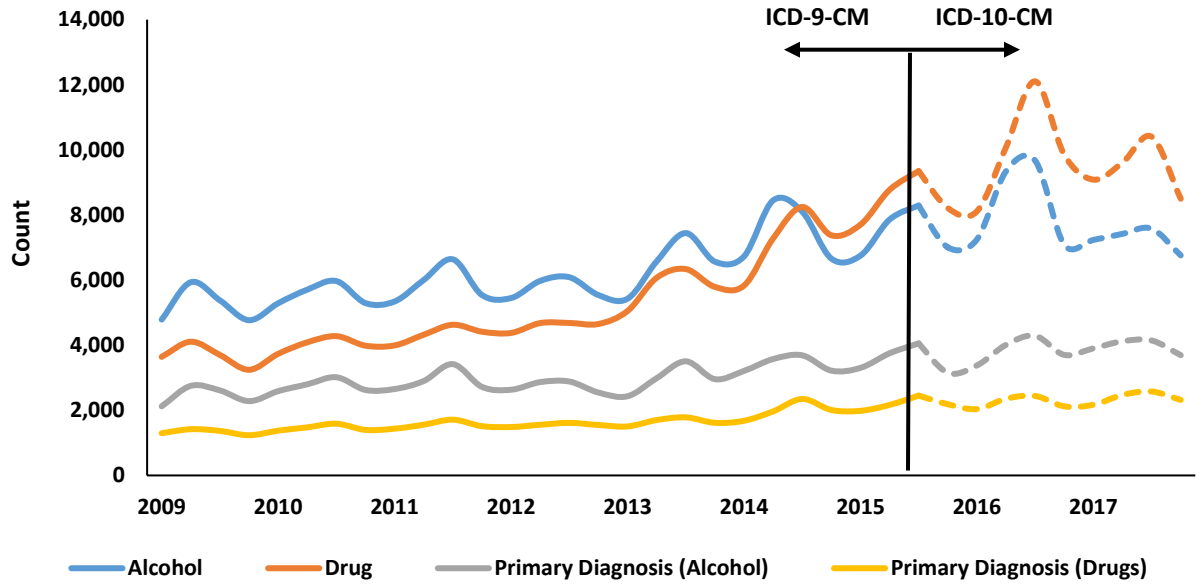

*Source: Behavioral Risk Factor Surveillance System (BRFSS).*
*The national data for 2017 are not available.*
*Chart scaled to 30% to display differences among groups.*

Binge drinking is defined in women as having four or more alcoholic beverages on an occasion. Nevada women reported the highest binge drinking percentage in 2011, at 13.2%. In 2017, 11.0% of Nevada women reported binge drinking, which is not a significant (95% confidence interval) decrease since 2011.

## Hospital Emergency Department Encounters

The hospital emergency department billing data provides health billing data for emergency departments patients for Nevada's non-federal hospitals. Since an individual can have more than one diagnosis during a single emergency department visit, the following numbers are not mutually exclusive.

**Figure 56. Alcohol and Drug-Related Emergency Department Encounters by Quarter and Year, 2009-2017.**

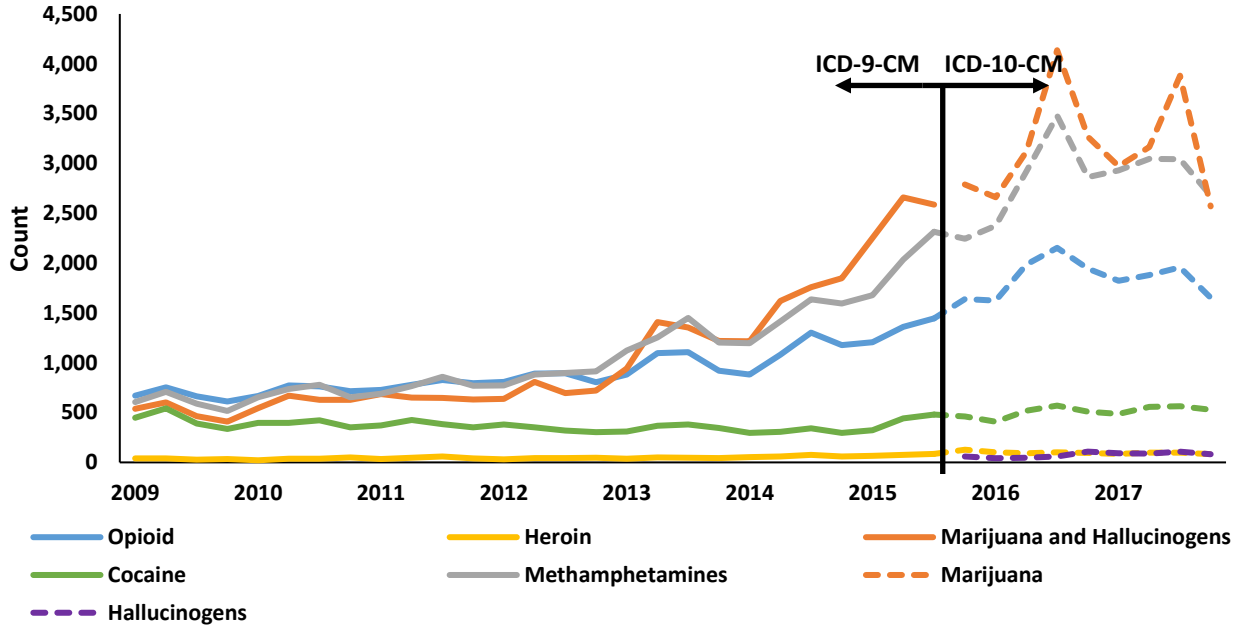



*Source: Hospital Emergency Department Billing.*
*Categories are not mutually exclusive.*
*ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

The "primary diagnosis" is the condition established to be chiefly responsible for the emergency department visit. The "alcohol" and "drug" categories are for any visits where alcohol/drugs were listed in any of the diagnoses.

Alcohol visits were more common than drug visits until 2014 where drugs visits to the emergency department surpassed alcohol and have remained higher through 2017. In 2017, there were a total of 66,589 alcohol and drug-related emergency department encounters. Out of this number, 15,866 were related to alcohol (primary diagnosis) and 9,542 were drug-related (primary diagnosis).

**Figure 57. Drug-Related Emergency Department Encounters by Drug and Quarter and Year, 2009-2017.**



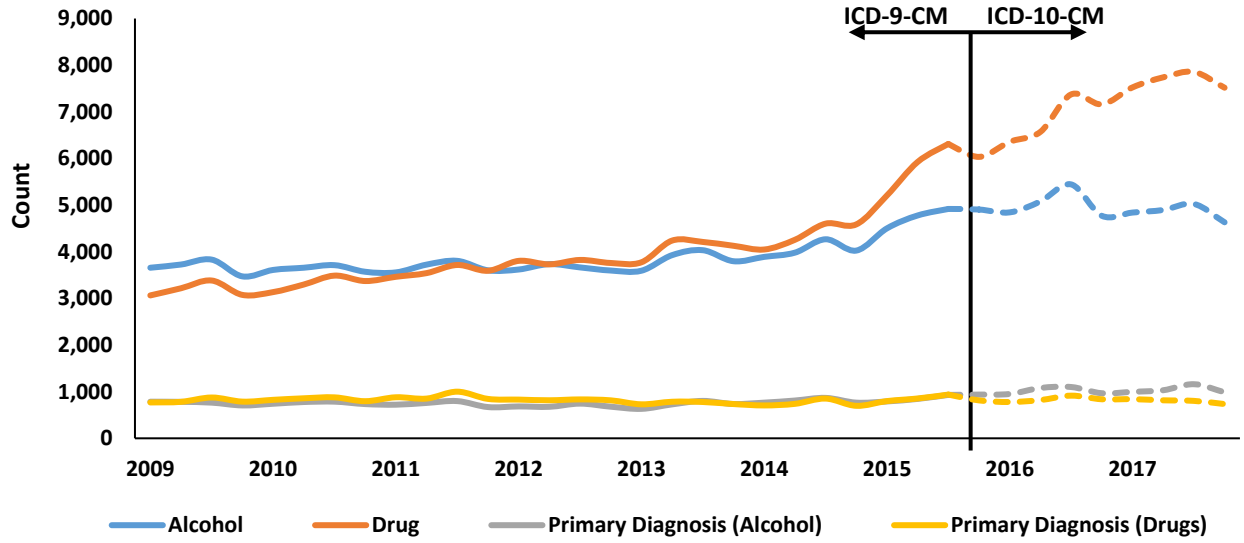

*Source: Hospital Emergency Department Billing.*
*Categories are not mutually exclusive.*
*ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

Hallucinogens and marijuana were grouped together for ICD-9-CM, but in 2015 were separated into their own groups in the ICD-10-CM codes. From October 2015, marijuana/cannabis use alone is more common for emergency department encounters then hallucinogens, opioids, and heroin. This includes all diagnoses, and many of the marijuana visits are for marijuana/cannabis-related disorders and not for overdose or poisonings.

## Hospital Inpatient Admissions

The hospital inpatient admission billing data provides health billing data for patients admitted to hospital for longer than a 24-hour period. In 2017, more people were admitted into Nevada hospitals for drug-related issues than alcohol related issues. Of the 50,022 alcohol and drug related admissions, 19,390 was alcohol-related and 30,632 were drug-related.

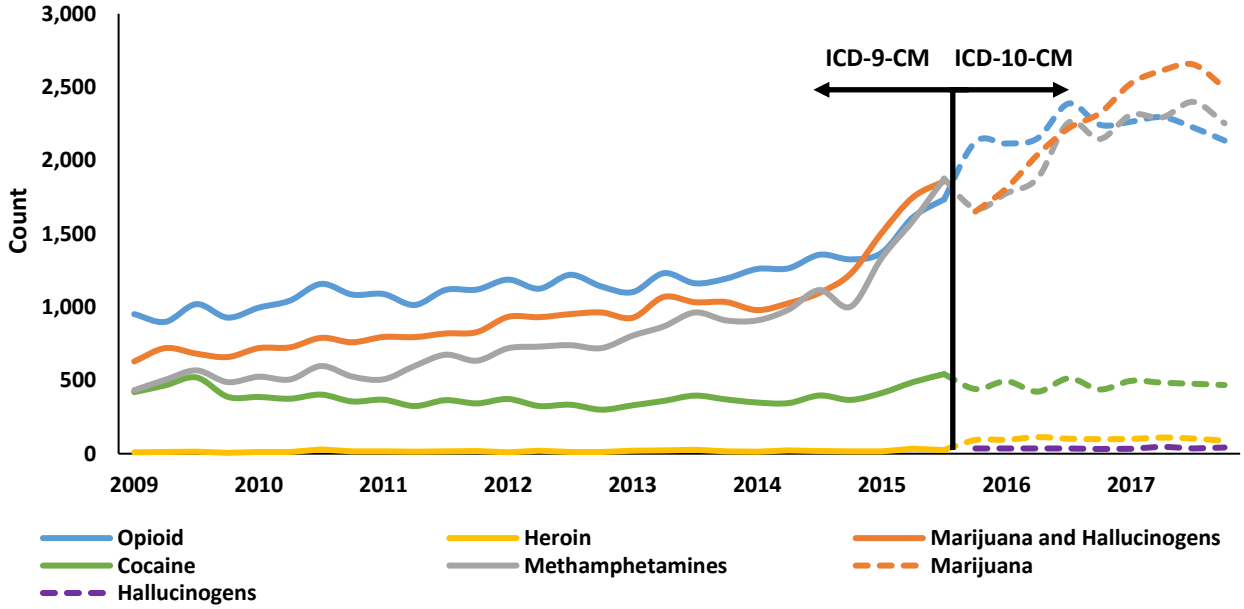
**Figure 58. Alcohol and/or Drug-Related Inpatient Admissions by Quarter and Year, 2009-2017.**




*Source: Hospital Inpatient Billing.*
*Categories are not mutually exclusive.*
*ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

Alcohol-related admissions were more common than drug visits until 2011 where drug-related admissions surpassed alcohol and have remained higher through 2017. In 2017, there was a total of 50,022 alcohol and drug-related inpatient admissions. Out of this number, 4,175 were related to alcohol (primary diagnosis) and 3,192 were drug-related (primary diagnosis).

**Figure 59. Drug-Related Inpatient Admissions by Quarter and Year, 2009-2017.**



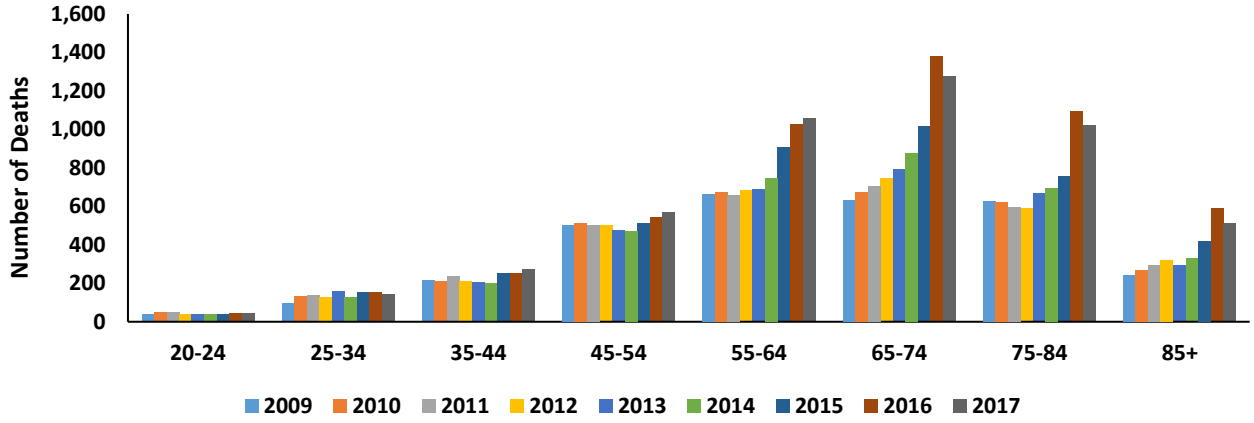

*Source: Hospital Inpatient Billing.*
*Categories are not mutually exclusive.*
*ICD-9 codes were replaced by ICD-10 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

Hallucinogens and marijuana were grouped together for ICD-9-CM, but in 2015 were separated into their own groups in the ICD-10-CM codes. Inpatient admissions for drug use have risen significantly since 2009. In 2017, there was an increase in inpatient admissions where marijuana/cannabis-related disorders and dependence were listed on the diagnosis (n= 10,288).

## Alcohol and/or Drug-Related Deaths

Alcohol and/or drug-related deaths include deaths where alcohol/drugs are listed as either the cause of death or as a contributing cause of death; therefore, the main cause of death may not be due alcohol or drugs but a contributing to the cause of death. In 2017, 4,909 deaths were related to alcohol and drugs.

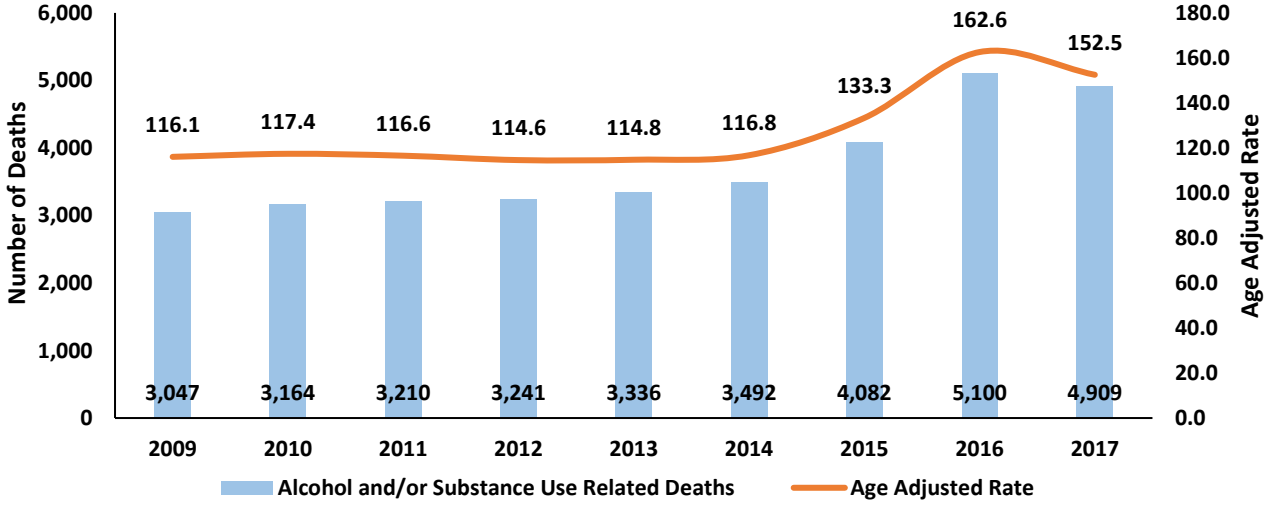
**Figure 60. Alcohol and/or Drug-Related Deaths by Age Group, 2009-2017.**




*Source: Electronic Death Registry System.*

In 2016, the 65-74 age group had a significant increase in deaths from previous years and in 2017, had the most alcohol and/or drug-related deaths of any age group with 1,275 deaths reported. This was followed by 55-64 age group with 1,057 drug and alcohol-related deaths.

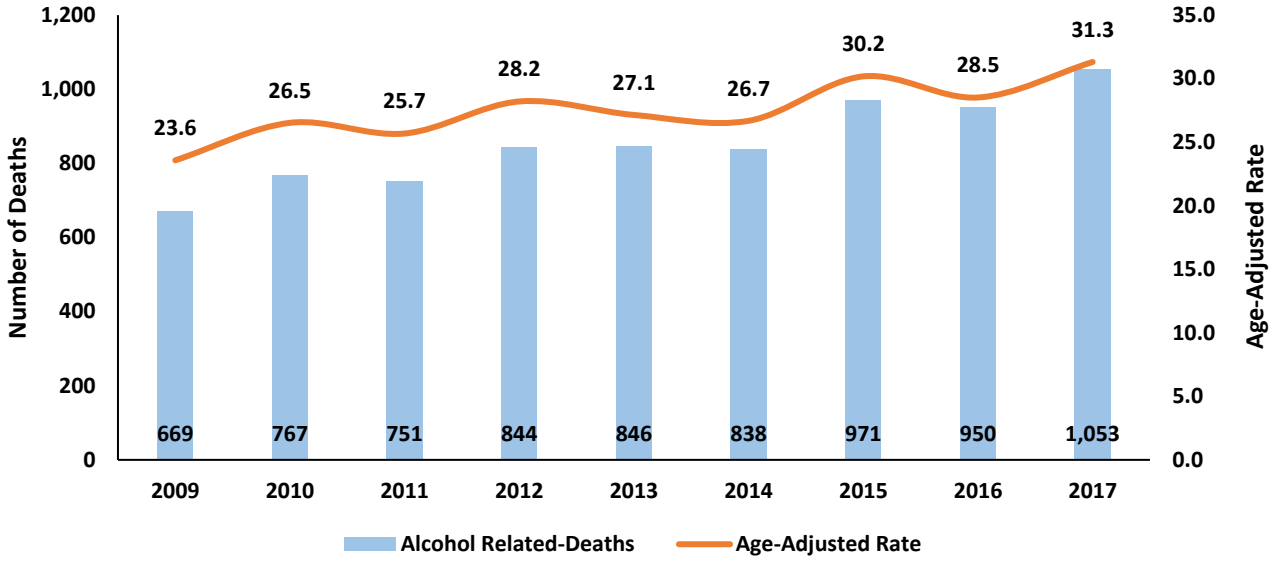
**Figure 61. Alcohol and/or Drug-Related Deaths and Age-Adjusted Rates, 2009-2017.**




*Source: Electronic Death Registry System.*

The alcohol and/or drug-related age-adjusted rate increased significantly in 2015 from previous years (95% confidence interval) and has remained at a higher rate through 2017.

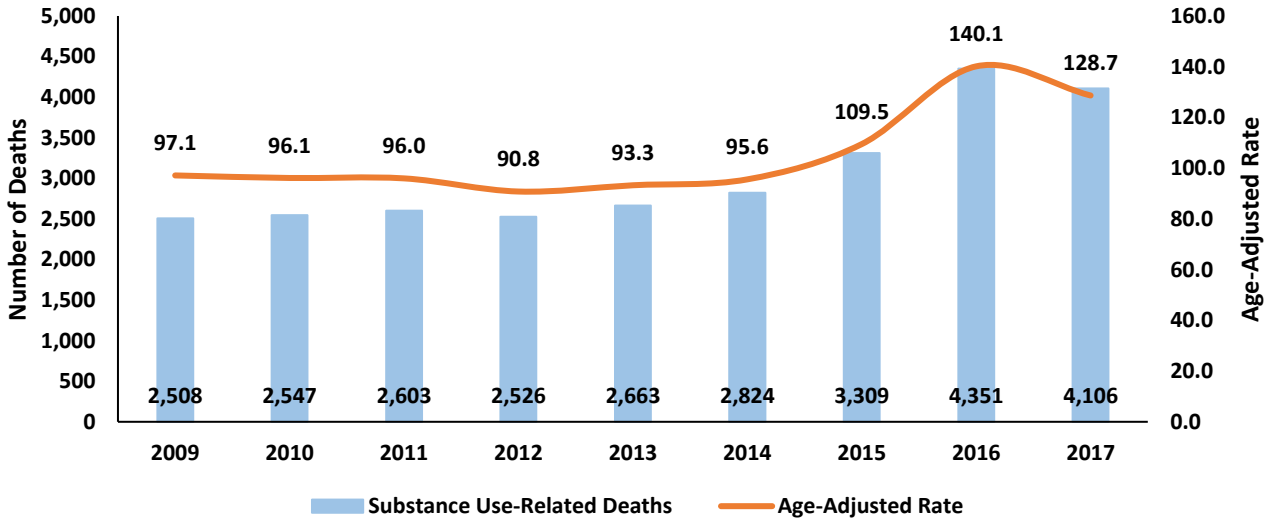
**Figure 62. Alcohol-Related Deaths and Age-Adjusted Rates, 2009-2017.**




*Source: Electronic Death Registry System.*

Alcohol-related deaths have not increased significantly between 2009 to 2017. The alcohol-related deaths constitute 20% of the alcohol and drug-related deaths.

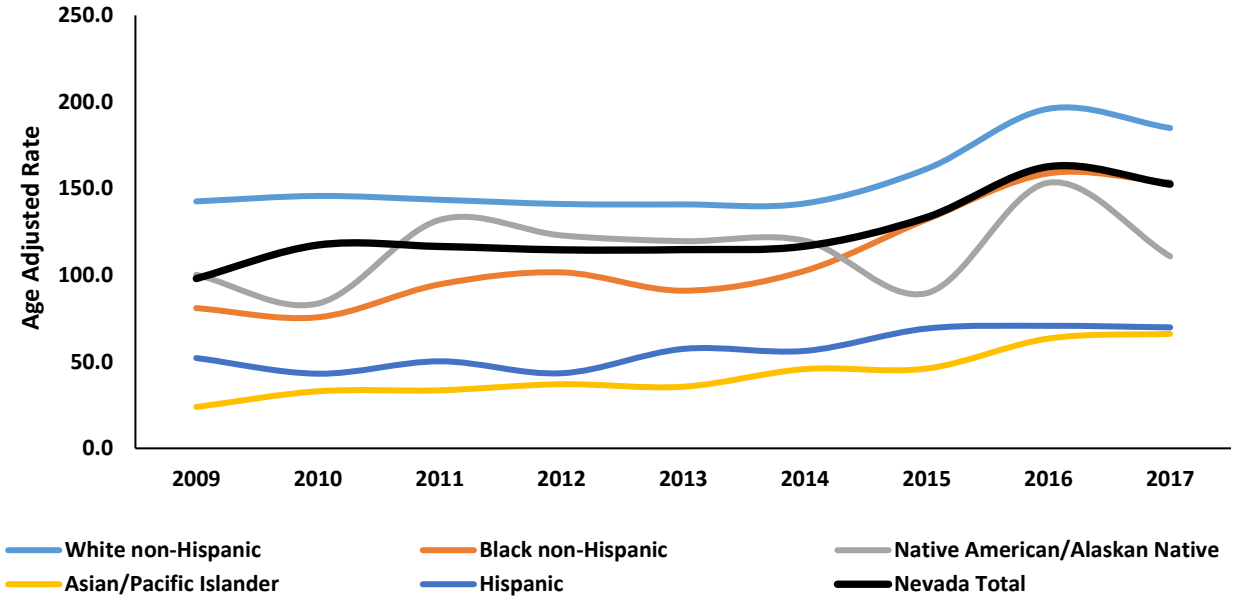
**Figure 63. Drug-Related Deaths and Age-Adjusted Rates, 2009-2017.**




*Source: Electronic Death Registry System.*

Drug-related deaths have increased significantly since 2015 (95% confidence interval). The 2016 age-adjusted rate of 140.1 is significantly higher than the 2015 and 2017 age-adjusted rates.

**Figure 64. Alcohol and/or Drug-Related Deaths by Race, 2009-2017.**




*Source: Electronic Death Registry System.*

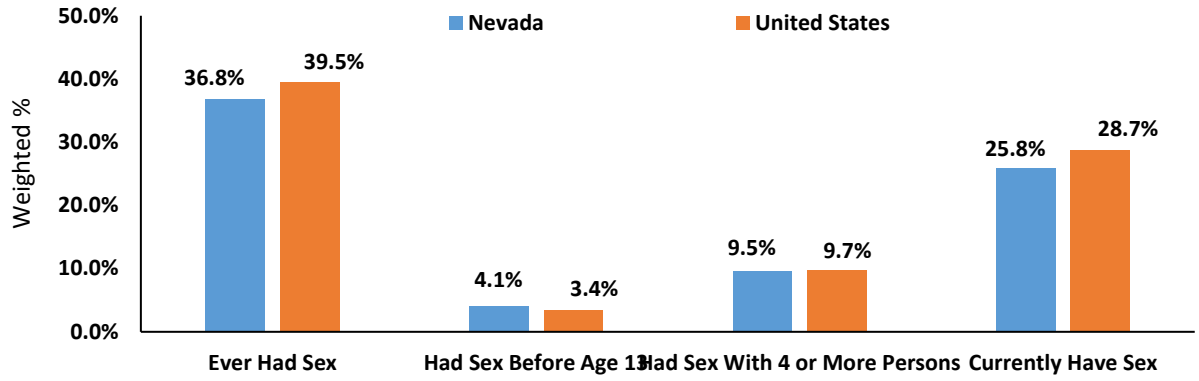
The White non-Hispanic population has had a significantly higher increase in alcohol and drug-related deaths since 2014. While Native American deaths increased in 2011 and 2016, these deaths are not statistically significant (95% confidence interval) due to the relatively small population size.

# Special Population: Youth

## Youth Risk Behavior Survey (YRBS)

The YRBS monitors six categories of health-related behaviors that contribute to leading causes of death and disabilities among youth and adults. Nevada high school and middle school students are surveyed during the odd years. In 2017, 5,336 high school, and 5,464 middle school students participated in the YRBS.

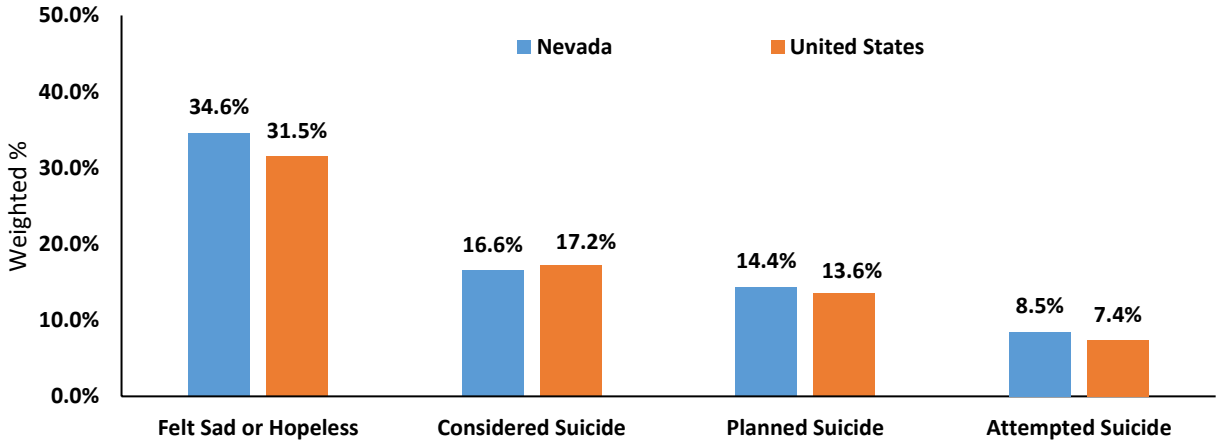
**Figure 65. Sexual Intercourse Among Students, Nevada High School Students, 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 50% to display differences among groups.*

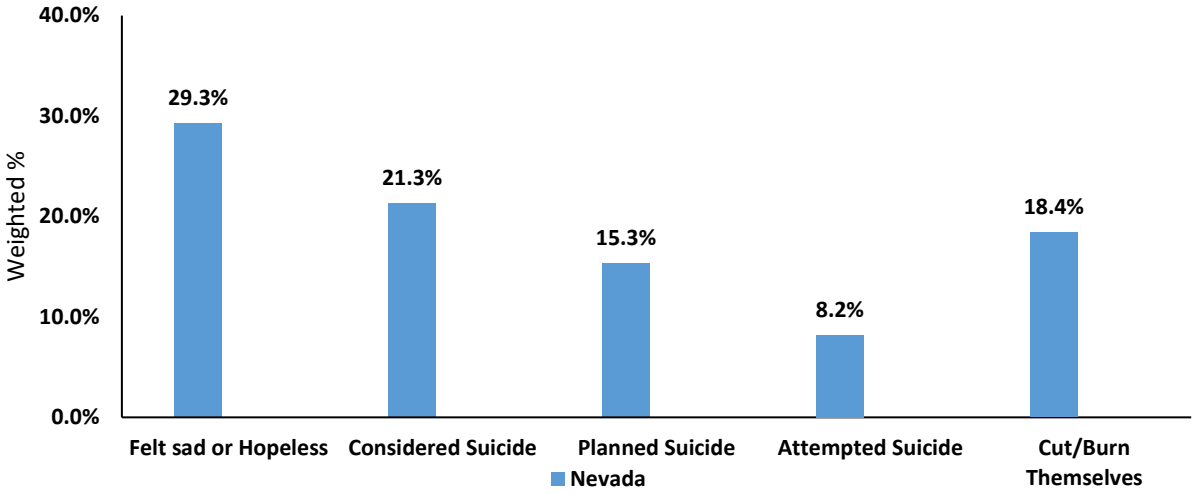
Among Nevada high school students, 40% have reported ever having sex, and 4.1% reported having sex before the age 13. Nearly 10% of high school students have had sex with more than 3 partners and nearly 26% of high school students are currently having sex. These percentages among Nevada high schoolers are comparable to the national percentages.

**Figure 66. Mental Health Summary, Nevada High School Students, 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 50% to display differences among groups.*

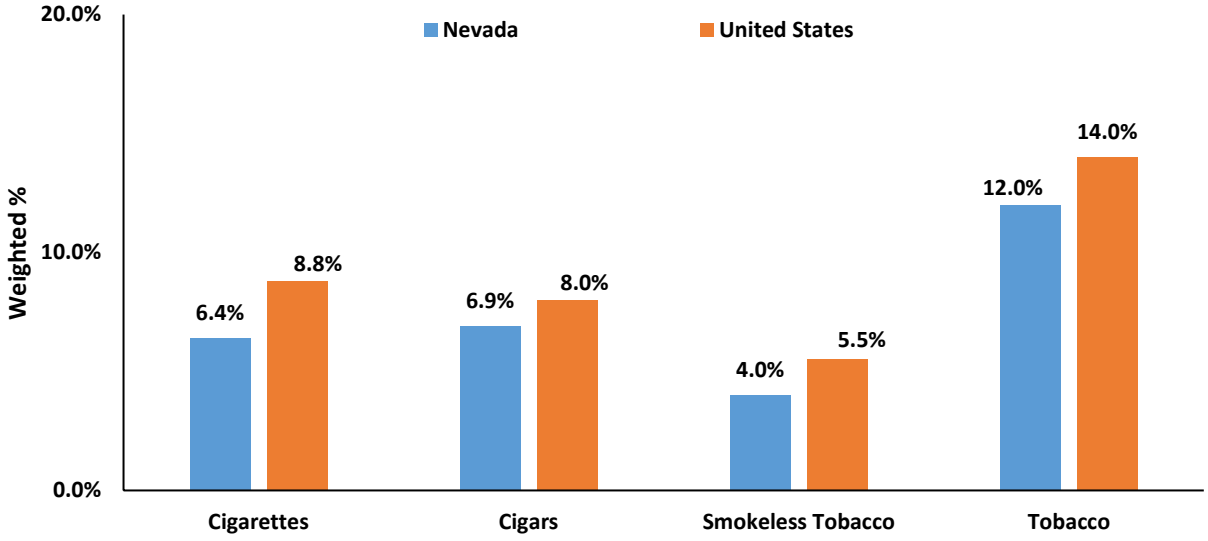
**Figure 67. Mental Health Risk Behaviors, Nevada Middle School Students, 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 40% to display differences among groups.*

Approximately 34.6% of Nevada high school students and 29.3% of Nevada middle school students have felt sad or hopeless in the last 12 months. Additionally, 18.7% of high school students and 18.4% of middle school students intentionally cut or burned themselves without wanting to die in the past 12 months. About 16.6% high school students have considered suicide, while 14.4% have planned to commit suicide in the past 12 months. About 8.5% of Nevada students have attempted suicide in the past 12 months.

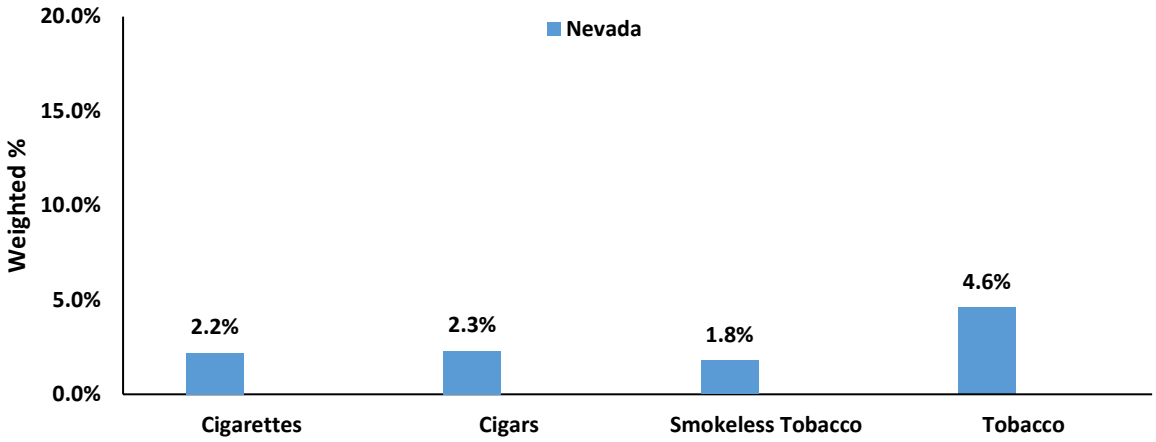
**Figure 68. Current Tobacco Use Summary, Nevada High School Students, 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 20% to display differences among groups.*

Of Nevada high school students surveyed, 6.4% reported using cigarettes in the past 30 days and 12% have used tobacco at one time, which is lower than the nation at 14%.

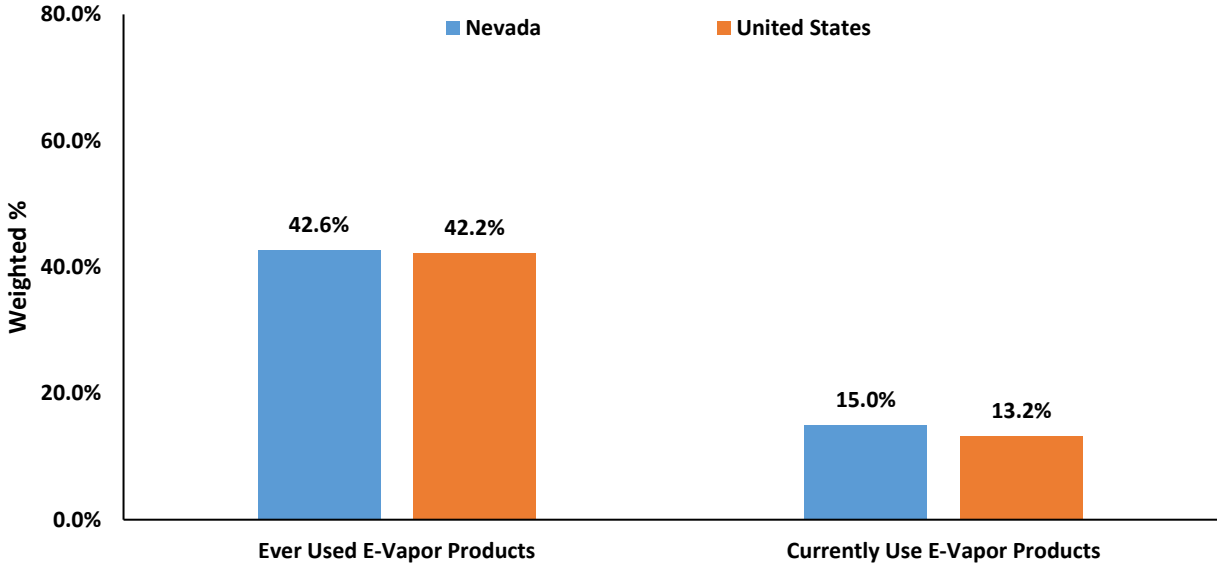
**Figure 69. Current Tobacco Use Summary, Nevada Middle School Students, 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 20% to display differences among groups.*

Of Nevada middle school students, 4.6% reported tobacco use in the past 30 days, 2.2% reported cigarette use in the past 30 days and 2.3% reported cigar use in the past 30 days.

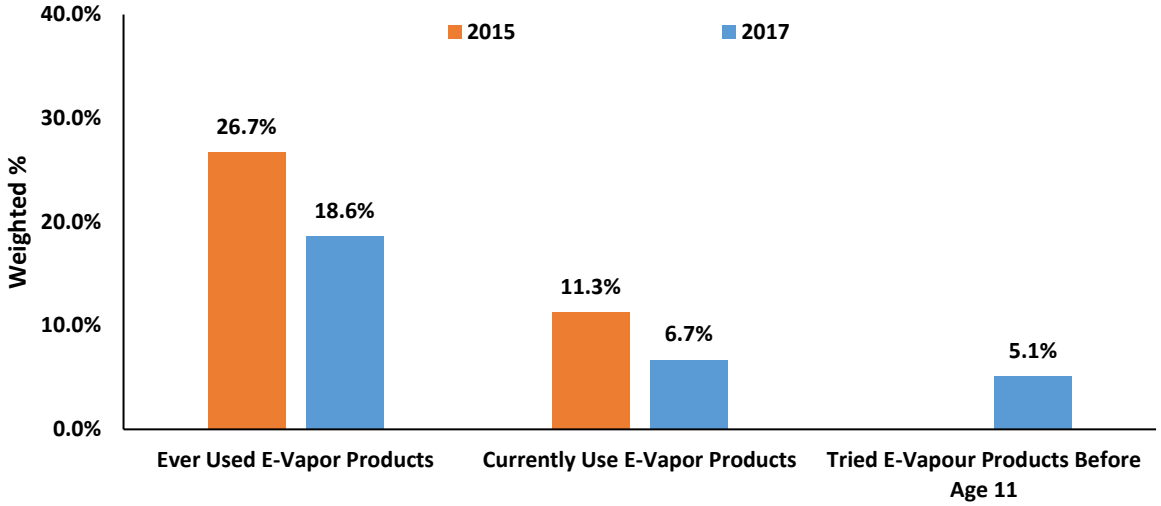
**Figure 70. Electronic Vapor Product Use Summary, Nevada High School Students, 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 80% to display differences among groups.*

Both in Nevada and the nation, about 42% of high school students have used electronic vapor (E-vapor) products. In Nevada, 15% of surveyed high school students are currently using E-vapor products, which is higher than the national percentage of 13.2%.

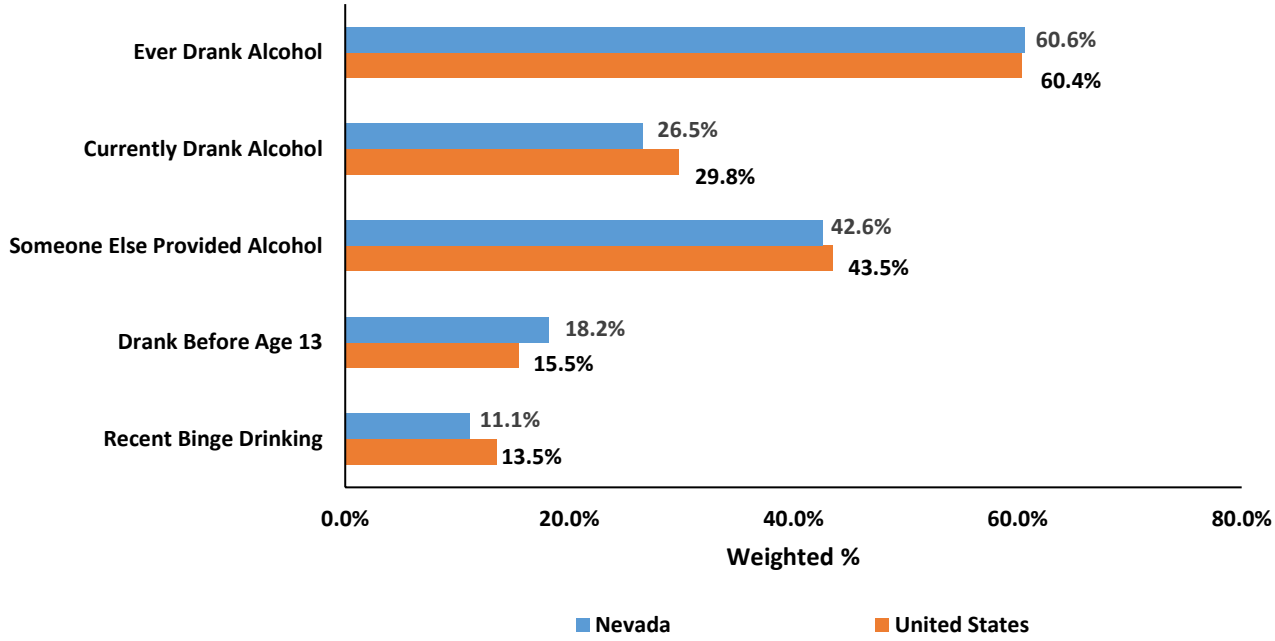
**Figure 71. Electronic Vapor Product Use Summary, Nevada Middle School Students, 2015 and 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 40% to display differences among groups.*
*Indicator "tried e-vapor products before age 11" not measured in 2015.*

Of Nevada middle school students, 18.6% have used E-vapor products in 2017, which is down from 2015 at 26.7%. Middle school student who currently use E-Vapor products has decreased from 2015 to 2017, from 11.3% to 6.7%. In 2017, 5.1% of middle school students have tried E-vapor products before the age of 11.

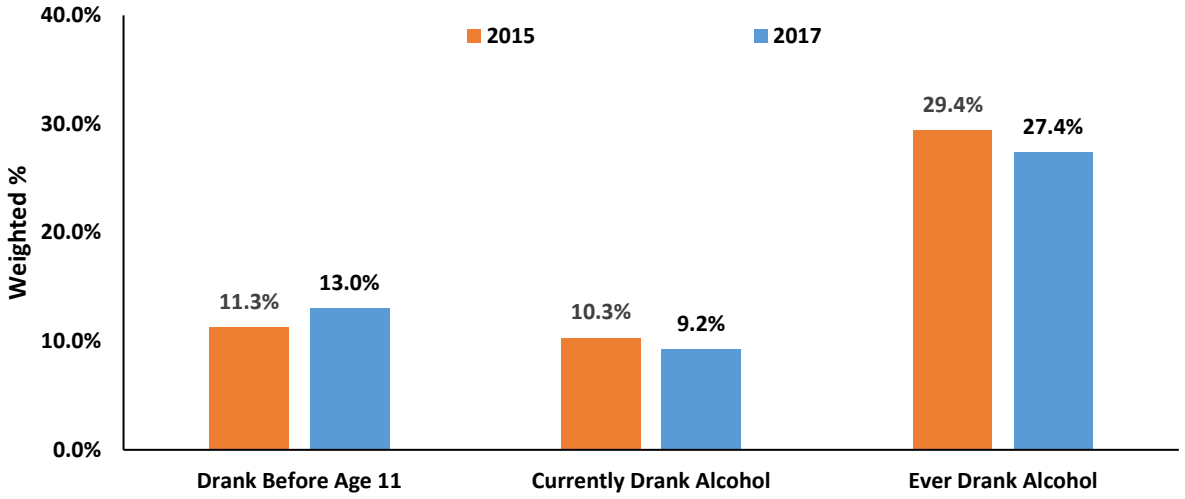
**Figure 72. Alcohol Use Summary, Nevada High School Students, 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Binge Drinking: Had five or more drinks of alcohol in a row for males, four or more for females within a couple of hours.*
*Chart scaled to 40% to display differences among groups.*

Approximately 6 out of 10 high school students in Nevada have ever drank alcohol (60.6%). About 26.5% currently drink alcohol and 42.6% have had alcohol provided to them by someone else. Of Nevada high school students, 18.2% had alcohol before the age of 13 years and over 11.0% of high school students had a recent binge drinking experience (had at least five or more drinks of alcohol in a row for males and four or more for females within a couple of hours).

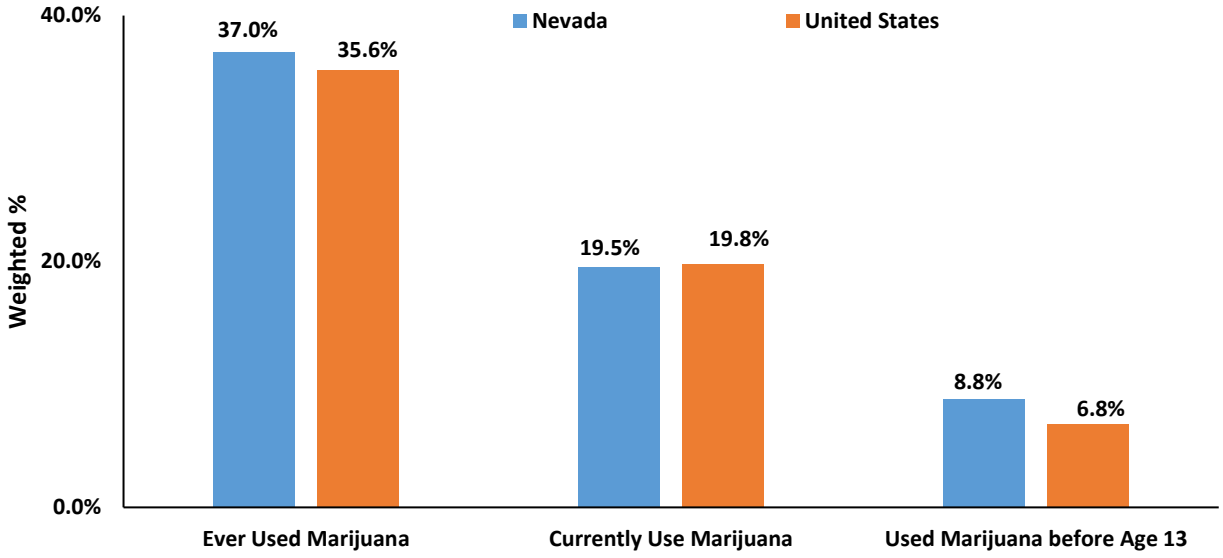
**Figure 73. Alcohol Use Summary, Nevada Middle School Students, 2015 and 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 40% to display differences among groups.*

One out of ten middle school students drank alcohol before age 11 in 2017, which is higher than 2015 at 11.3%. Also, 9.2% currently drink alcohol in 2017 and three out of ten had drank alcohol before (27.4%).

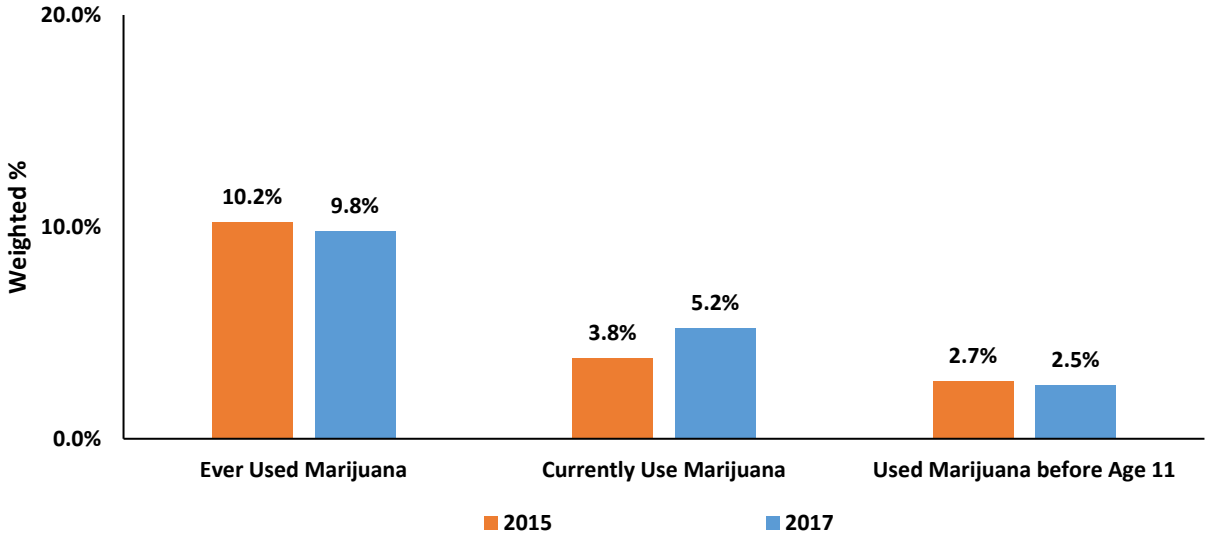
**Figure 74. Marijuana Use Summary, Nevada High School Students, 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 40% to display differences among groups.*

In Nevada, 37% of high school students reported trying marijuana, and 19.5% currently use marijuana. The Nevada percentage is comparable to the national percentage (35.6%) for marijuana use.

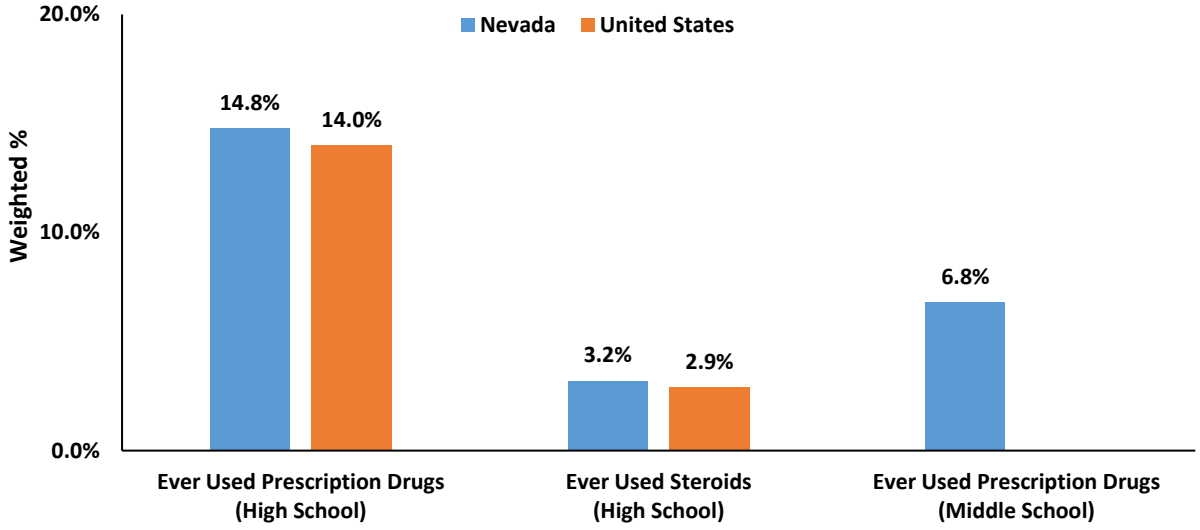
**Figure 75. Marijuana Use Summary, Nevada Middle School Students, 2015 and 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 20% to display differences among groups.*

About 3% of Nevada middle school students had tried marijuana before they turned 11 years old, 9.8% have ever tried marijuana before, and 5.2% currently use marijuana.

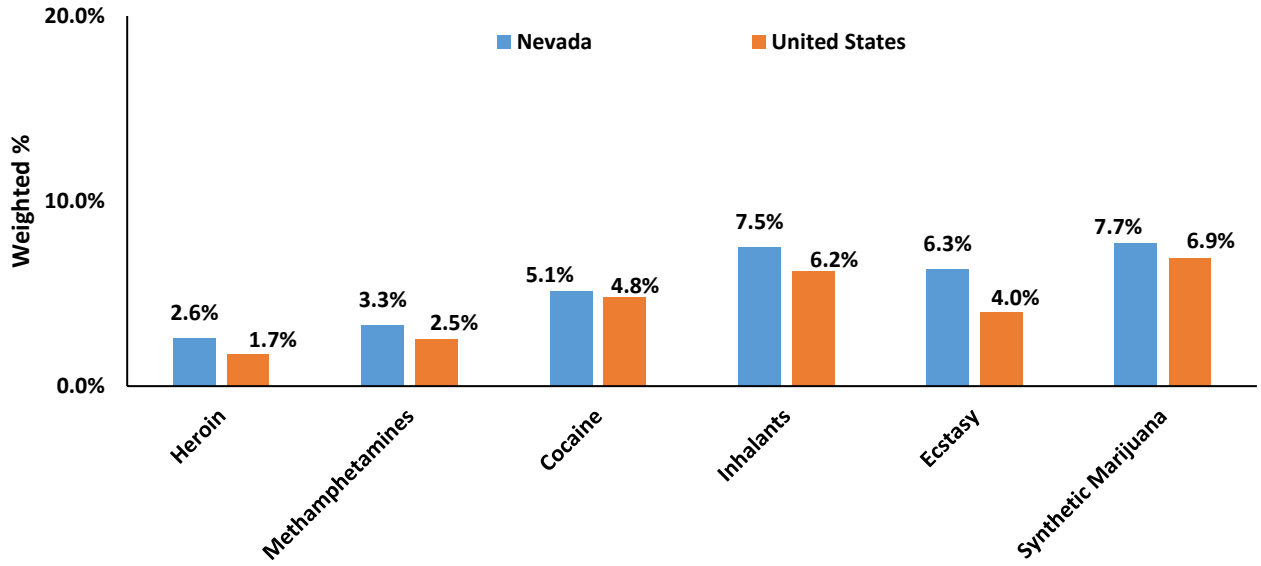
**Figure 76. Nonprescription Substance Use Summary, Nevada Middle and High School Students, 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 40% to display differences among groups.*

Approximately 15% of high school students and 7% of middle school students in Nevada have used prescription drugs that were not prescribed to them in their lifetime. Of Nevada's high school students, 3.2% have tried non-prescribed steroids.

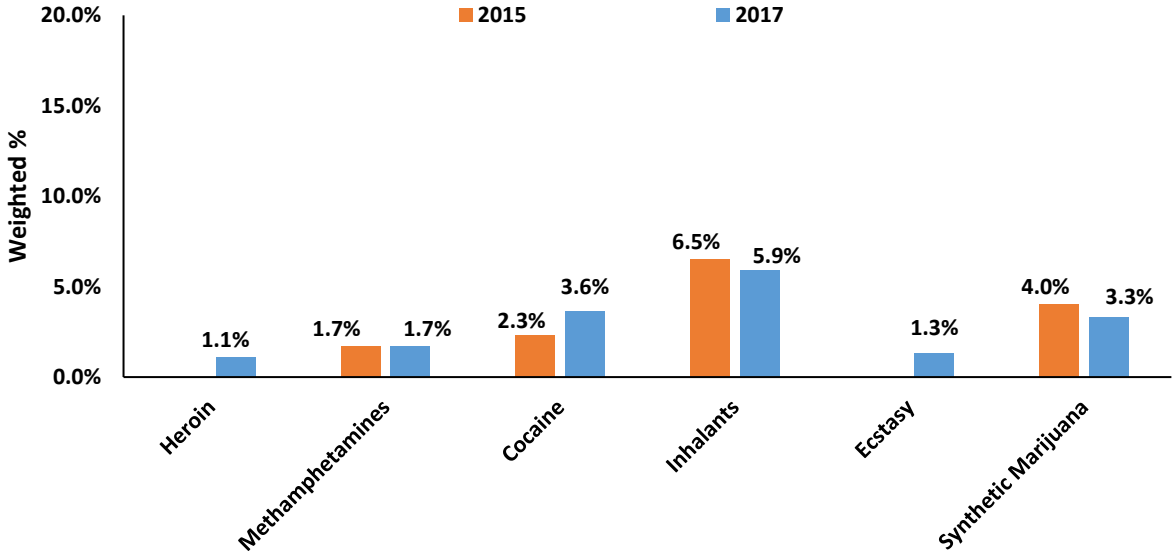
**Figure 77. Lifetime Drug Use Summary, Nevada High School Students, 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 30% to display differences among groups.*

Drug use among high school students is slightly higher in Nevada than the nation. Of Nevada high school students, 7.5% have used inhalants, while the national percentage is lower, at 6.2%. Nevada high schoolers report use of synthetic marijuana at 7.7%, and methamphetamines at 3.3% in 2017.

**Figure 78. Lifetime Drug Use Summary, Nevada Middle School Students, 2015 and 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 20% to display differences among groups.*
*Indicators for "heroin" and "ecstasy" not measured in 2015.*

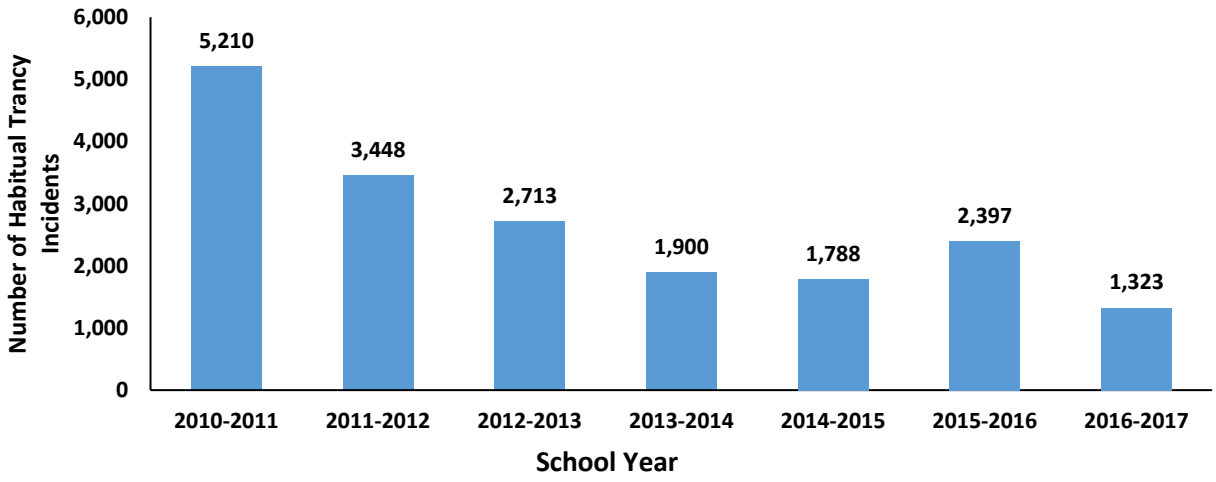
Among Nevada middle school students, 5.9% reported using inhalants in 2017, and 1.7% reported using methamphetamines. Drug use for cocaine, has increased from 2015 at 2.3% to 3.6% in 2017.

## Nevada Report Card

The Nevada Report Card is the accountability reporting website of the Nevada Department of Education. In compliance with federal and state law, it assists community members (parents, educators, researchers, lawmakers, etc.) in locating a wealth of detailed information pertaining to K-12 public education in Nevada. The web site has three categories: "school and district information," "assessment and accountability" and "fiscal and technology."

When student behavioral health needs are not identified or not provided with the necessary attention, they are more likely to experience difficulties in school. These include higher rates of suspensions, expulsions, dropouts, and truancy, as well as lower grades. Nationally, 50% of students age 14 and older who are living with a mental illness drop out of high school. This is the highest dropout rate of any disability group.

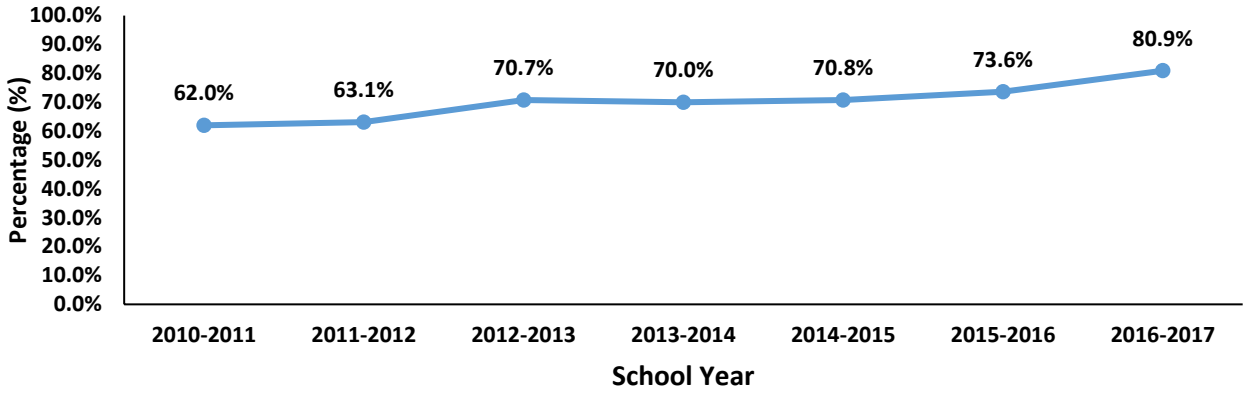
**Figure 79. Number of Habitual Truants, Nevada, Class Cohorts 2010–2017.**




*Source: Nevada Department of Education, Report Card.*

Nevada's numbers of habitual truant students have been decreasing since the peak of 5,210 truant students during the 2010-2011 school year. Nevada recorded the lowest number of 1,323 truant students during the 2016-2017 school year.

**Figure 80. High School Graduation Percentage, Nevada, Class Cohorts 2010–2017.**



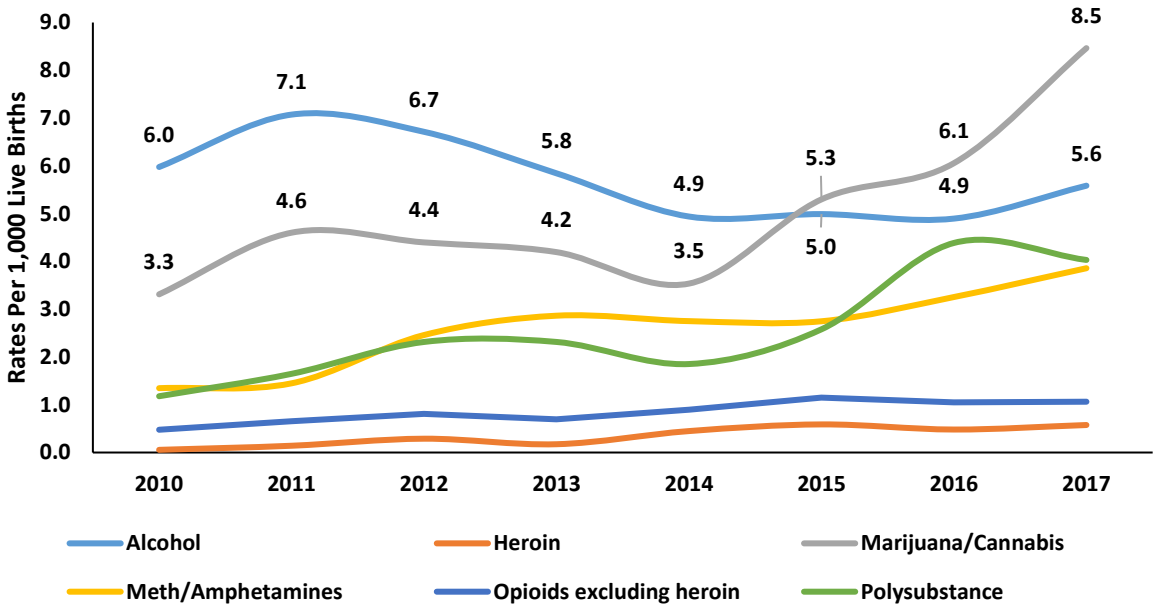

*Source: Nevada Department of Education, Report Card.*

Graduation rate is defined as the rate at which 9th graders graduate by the end of the 12th grade (number of students who graduate in four years with a regular high school diploma divided by the number of students from the adjusted cohort for the graduation class). Nevada high schools posted the highest graduation rate at 80.9% for the class of 2017, an increase of seven percentage points.

# Special Population: Newborns

The data in this section is reflective of self-reported information provided by the mother on the birth record. On average, there are 35,740 live births per year to Nevada residents between 2010 and 2017. From 2015 to 2017, 545 birth certificates indicated alcohol use, 698 birth certificates indicated marijuana use, 356 indicated meth/amphetamine use, 111 indicated opiate use, and 54 indicated heroin use during pregnancy.

**Figure 81. Prenatal Substance Abuse Birth Rates (self-reported) for Select Substances, Nevada 2010-2017*.**



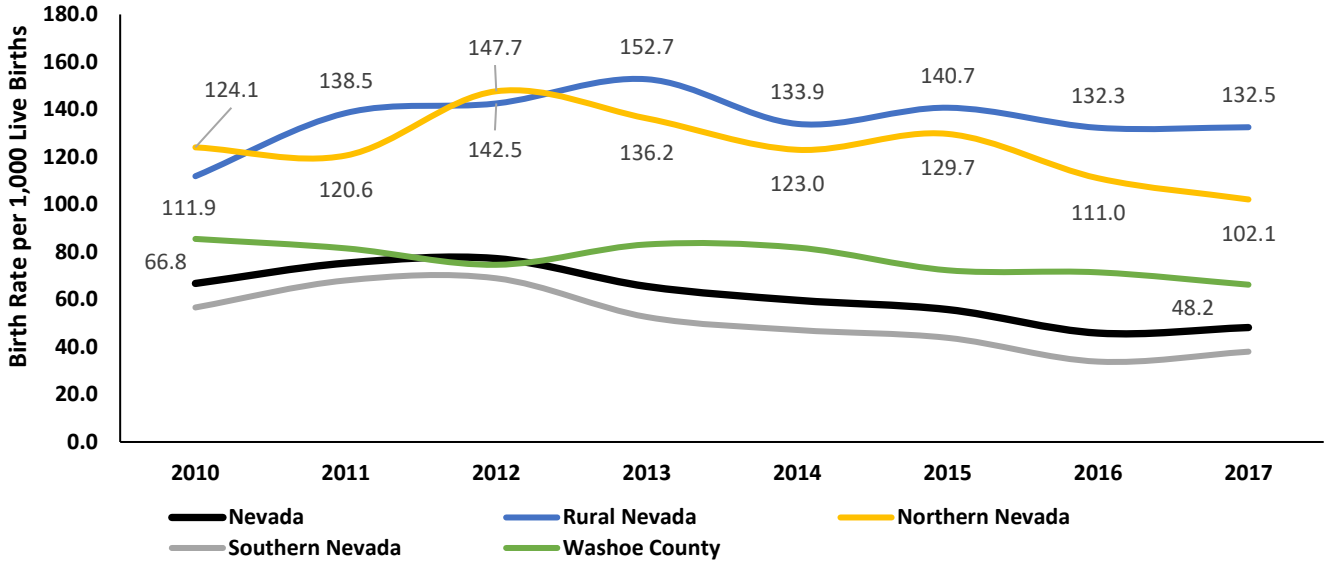

*Source: Nevada Electronic Birth Registry System.*

Of the self-reported substance use during pregnancy among Nevada mothers who gave birth between 2010 and 2017, the highest rate was with marijuana use in 2017, at 8.5 per 1,000 live births.

Since 2015, the marijuana use rate has surpassed the alcohol use rate, which was 5.6 per 1,000 births in 2017. In 2017, a rate of 4.0 per 1,000 live births was reported for meth/amphetamines, which higher than 2010 at 1.3 per 1,000 live births. For polysubstance use, 3.9 per 1,000 live births reported in 2017. There has been an increase in self-reported polysubstance use since 2015, up from 1.1 per 1,000 live births.

Because alcohol and substance use during pregnancy is self-reported by the mothers, rates are likely lower than actual rates due to underreporting, and expectant mothers may be reluctant to be forthcoming on the birth record for a variety of reasons.

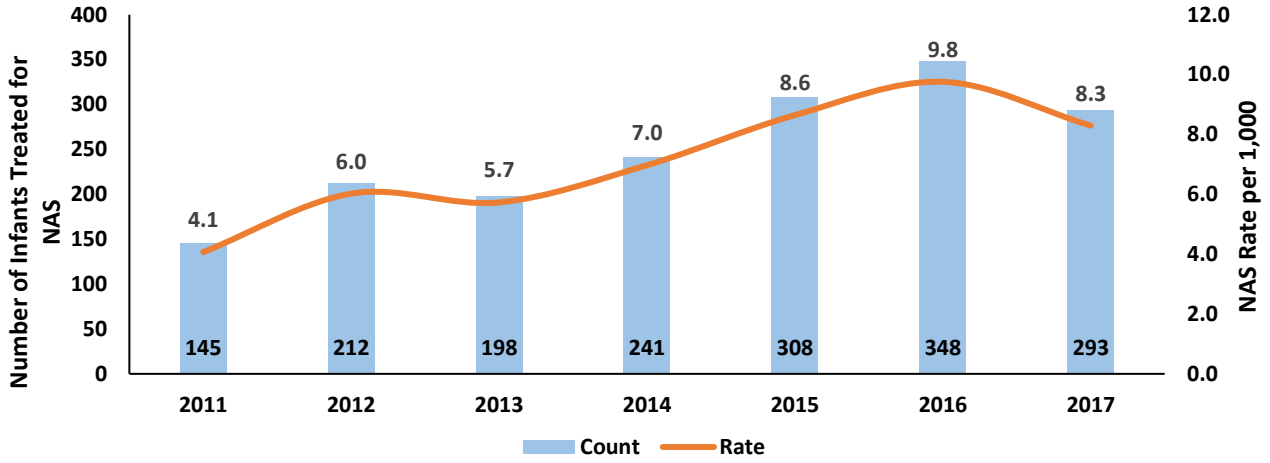
**Figure 82. Prenatal Tobacco Use Birth Rates (self-reported), Nevada 2010-2017.**




*Source: Nevada Electronic Birth Registry System.*

Mothers who self-reported tobacco use, has decreased from 66.8 to 48.2 per 1,000 live births from 2010 to 2017. The frontier region has the highest self-reported tobacco use in 2017 at 132.5 per 1,000 live births.

**Figure 83. Neonatal Abstinence Syndrome, Nevada 2010-2017.**

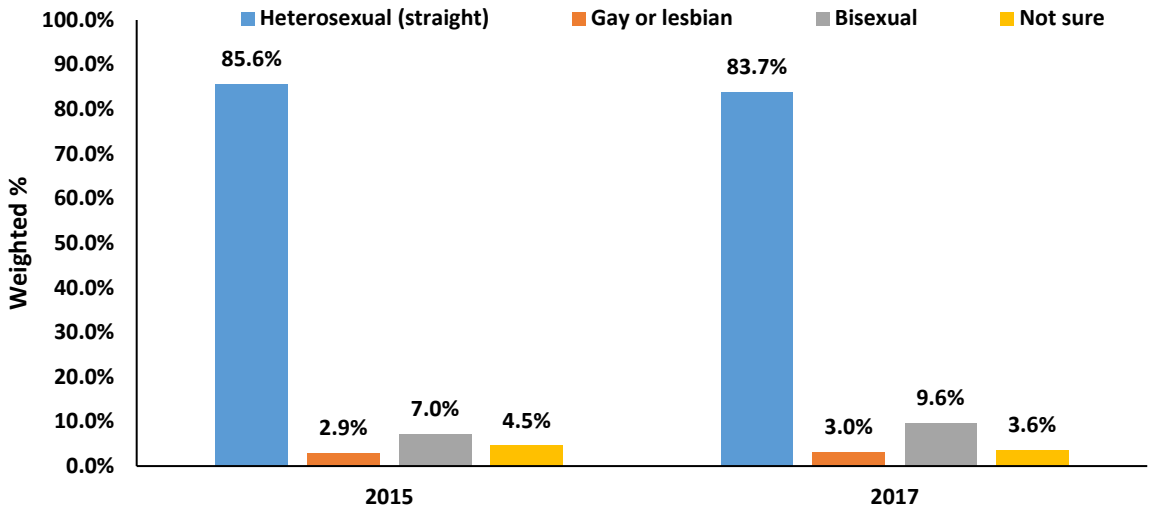



*Source: Hospital Inpatient Department Billing and Nevada Electronic Birth Registry System.*
*ICD-10 codes replaced ICD-9 codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

Neonatal abstinence syndrome (NAS) is a group of problems that occur in a newborn who was exposed to addictive illegal or prescription drugs while in the mother's womb. Withdraw or abstinence symptoms develop shortly after birth. Inpatient admissions for NAS has doubled since 2011, from 145 newborns admitted to 293 newborns admitted in 2017.

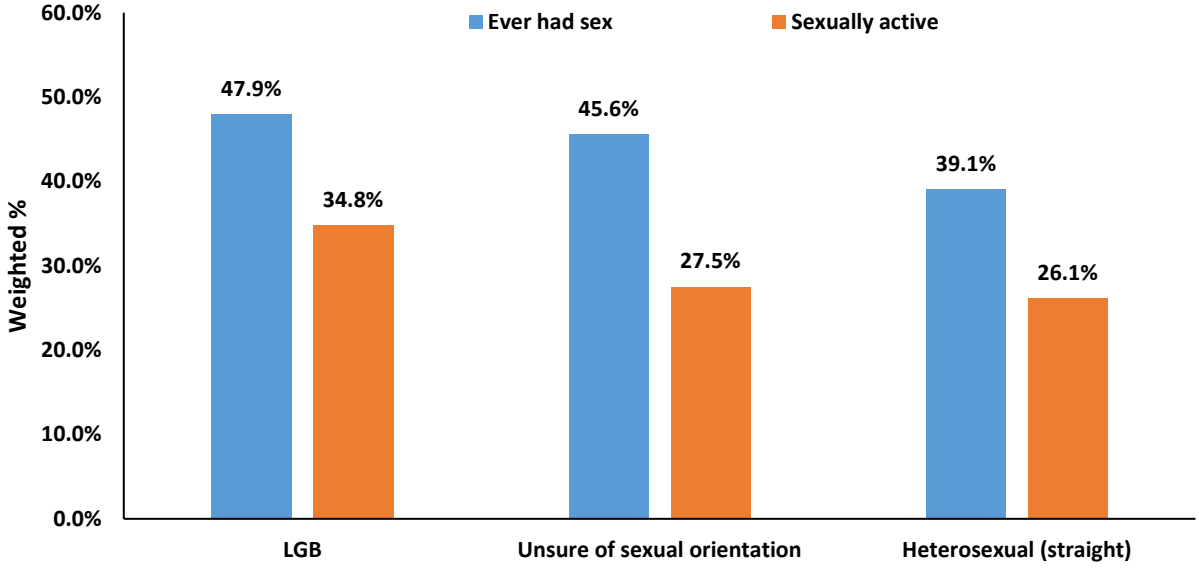
# Special Population: Lesbian, Gay, Bisexual, and Transgender

**Figure 84. Sexual Orientation, Nevada High School Population, 2015 and 2017.**




*Source: Nevada Youth Risk Behavior Survey (YRBS).*

**Figure 85. Prevalence Estimates of Health Risk Behaviors, by LGB – Nevada Youths, 2015.**

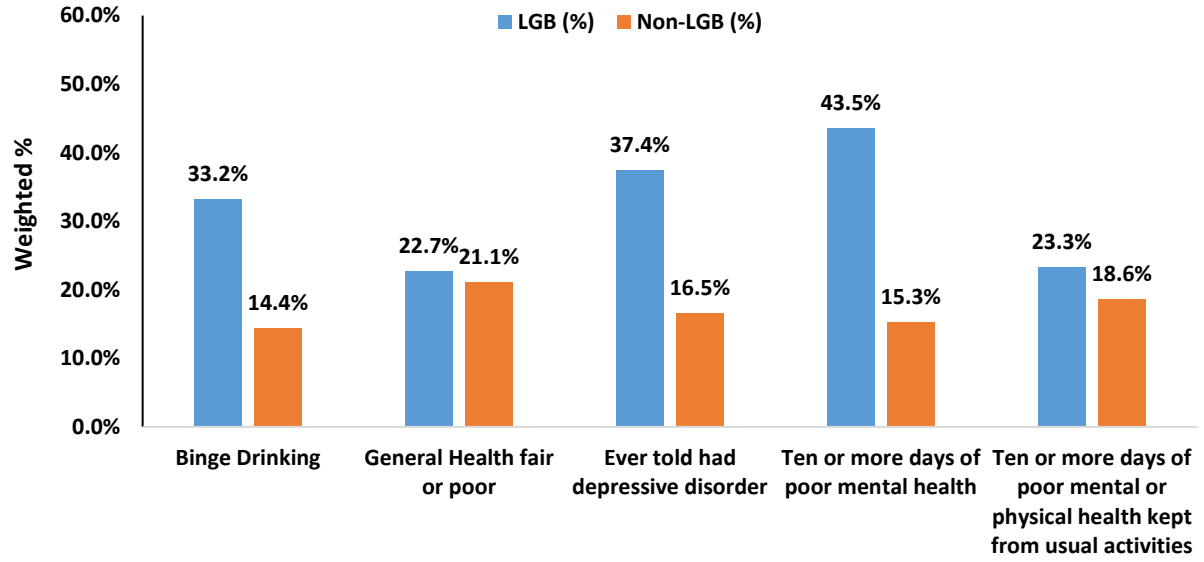



*Source: Nevada Youth Risk Behavior Survey (YRBS).*
*Chart scaled to 60% to display differences among groups.*

Of the Nevada high school students who participated in the Youth Risk Behavior Survey (YRBS) in 2017, 83.4% identified as heterosexual (straight), 3% gay or lesbian, 9.9% bisexual and 3.6% not sure about their

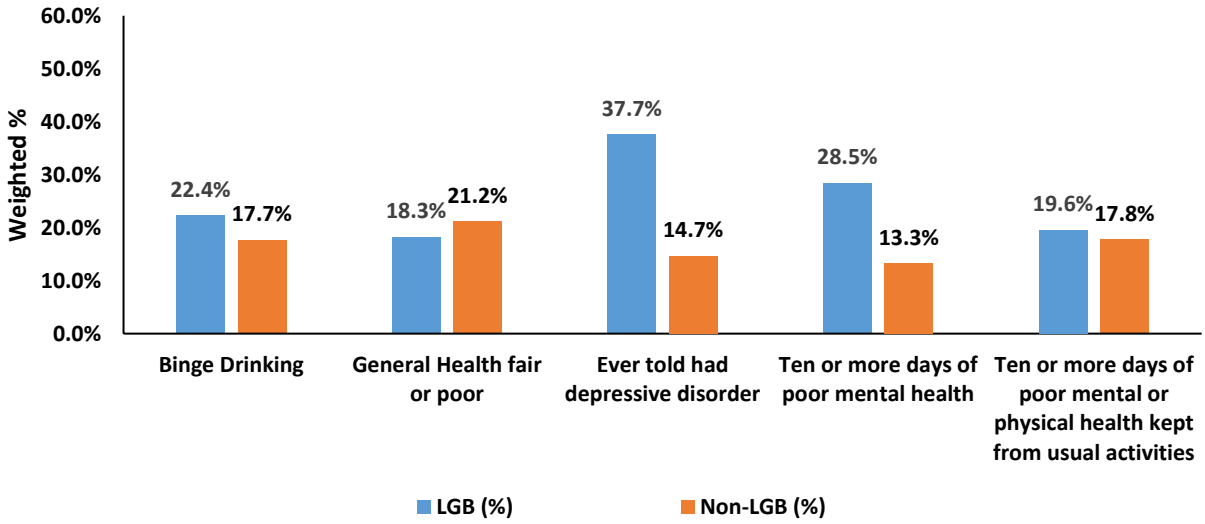
sexual orientation. In 2015, 34.8% of Lesbian/Gay/Bisexual (LGB) high school students were sexually active and 47.9% had previously engaged in sex.

**Figure 86. Prevalence Estimates of Health Risk Behaviors, by LGB – Nevada Adults, 2016.**




*Source: Behavioral Risk Factor Surveillance System (BRFSS).*
*Chart scaled to 60% to display differences among groups.*

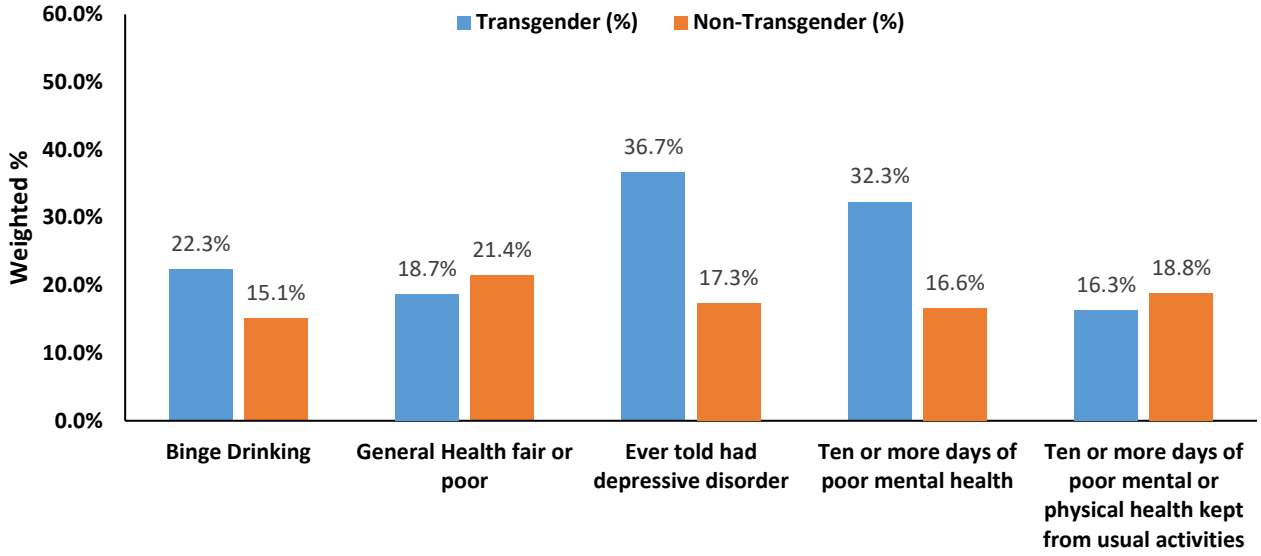
**Figure 87. Prevalence Estimates of Health Risk Behaviors, by LGB – Nevada Adults, 2017.**




*Source: Behavioral Risk Factor Surveillance System (BRFSS).*
*Chart scaled to 60% to display differences among groups.*

Among the LGB population, 22.4% participated in binge drinking in 2017, compared to 17.74% of the non-LGB population. When the LGB population was asked how their general health was, 18.3% said their general health was fair or poor in 2017 as compared to non-LGB at 21.1%. When asked if they were ever told that they had depressive disorder, 37.4% responded yes, compared to non-LGB at 14.7%.

**Table 88. Prevalence Estimates of Health Risk Behaviors, by Transgender – Nevada Adults, 2016.**




*Source: Behavioral Risk Factor Surveillance System (BRFSS).*
*Chart scaled to 60% to display differences among groups.*
*Transgender counts small. Numbers may not be reliable.*

In the transgender population, 18.6% participated in binge drinking in 2016, and 22.2% said their general health is fair or poor. When asked if they have been told before that they have depressive disorder, 36.7% responded yes, and 44% had ten or more days of poor mental health. However, counts for transgender population are very small. Therefore, data may not be reliable.

# Appendix

Hospital billing data (emergency department and Inpatient admissions) and mortality data both utilize International Classification of Diseases codes (ICD). Hospital billing uses ICD-CM which is a 7-digit code verses death where the ICD codes are 4-digit. In hospital billing data, the ICD codes are provided in the diagnosis fields, while death data the ICD codes are coded from the literal causes of death provided on the death certificate.

In October 2015, ICD-10-CM codes were implemented nationwide. Before October 2015, ICD-9-CM codes were used for medical billing. Therefore, 2015 data consists of two distinct coding schemes, ICD-9-CM and ICD-10-CM respectively. Due to this change in coding schemes, hospital billing data from October 2015 forward may not be directly comparable to previous data.

The following ICD-CM codes were used for mental health-related hospital encounters and admissions:

Anxiety: 300.0 (9); F41 (10)
Bi-Polar: 296.40-296.89 (9); F32.89, F31 (10)
Depression: 296.20-296.36 (9); F32.0-F32.5, F33.0-F33.4, F32.9 (10)
Post-Traumatic Stress Disorder: 309.81 (9); F43.10, F43.12 (10)
Schizophrenia: 300.0 (9); F20, Z65.8 (10)
Suicidal Ideation: V62.84 (9); R45.851 (10)
Suicide Attempts: E95.0-E95.9 (9); X71-X83, T36-T50, T71 (10)

The following ICD-10-CM codes where used for substance-related hospital encounters and admissions:

Alcohol: 291, 303, 980, 305.0, 357.5, 425.5, 535.3, 571.0, 571.1, 571.2,571.3, 790.3 (9); F10, K70, G62.1, I42.6, K29.2, R78.0, T51 (10).

Drug: 292, 304, 965, 967, 968, 969, 970, 305.2, 305.3, 305.4, 305.5, 305.6, 305.7, 305.8, 305.9 (9); F11- F16, T39, T40, T43, F18, F19 T410, T41.1, T41.2, T41.3, T41.4, T42.3, T43.4, T42.6, T42.7, T42.8 (10).

The following ICD-10 codes where used for suicide-related deaths:

Suicide: X60-X84

The following ICD-10 codes where used for mental health-related deaths:

Mental and Behavioral Disorders: F00-F09, and F20-F99.

The following ICD-10 codes where used for alcohol and drug-related deaths:

Alcohol: F10, K70, Y90, Y91, X45, X65, Y15, T51, K73, K74, G31.2, G62.1, I42.6, K29.2, K86.0, K85.0, R78.0, E24.4, O35.4, Q86.0, and Z72.1.

Drug: F11-F19, X40-X44, X60-S64, X85, Y10-Y14, Y40-Y59, G72.0', 'K85.3, R78.1, R78.2, R78.3, R78.4, R78.5, R78.6, E24.2, O35.5, P04.4, P96.1, P96.2, K71.1, N14.1, N14.0, N14.2, D52.1, T96, Z72.2, and T36-T50.

## Table 1. Population Distribution, Nevada, 2010-2017.

| Sex | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |
|---|---|---|---|---|---|---|---|---|---|
| Female | 1,323,779 | 1,338,008 | 1,347,169 | 1,362,145 | 1,388,602 | 1,410,857 | 1,440,920 | 1,470,250 | 1,487,473 |
| Male | 1,353,616 | 1,367,837 | 1,374,625 | 1,388,072 | 1,412,364 | 1,432,444 | 1,456,765 | 1,483,127 | 1,497,711 |
| **Race** | | | | | | | | | |
| White | 1,507,373 | 1,508,507 | 1,510,392 | 1,514,399 | 1,523,159 | 1,528,666 | 1,530,902 | 1,539,684 | 1,542,655 |
| Black | 216,432 | 220,374 | 222,186 | 225,778 | 232,837 | 238,788 | 247,229 | 254,921 | 259,276 |
| Native American | 31,132 | 31,417 | 31,707 | 31,941 | 32,250 | 32,424 | 34,075 | 34,353 | 34,569 |
| Asian/Pacific Islander | 222,373 | 227,115 | 228,367 | 232,862 | 242,606 | 250,934 | 265,838 | 276,711 | 282,054 |
| Hispanic | 700,084 | 718,432 | 729,142 | 745,238 | 770,113 | 792,488 | 819,641 | 847,708 | 866,630 |
| **Age** | | | | | | | | | |
| 0-14 | 556,165 | 559,061 | 559,282 | 560,716 | 566,613 | 571,531 | 585,566 | 590,622 | 592,071 |
| 15-17 | 108,244 | 107,659 | 106,834 | 106,704 | 107,716 | 109,022 | 114,751 | 118,355 | 119,542 |
| 18-19 | 73,133 | 73,645 | 73,859 | 74,387 | 74,442 | 73,127 | 74,276 | 76,261 | 78,261 |
| 20-24 | 177,801 | 182,266 | 183,525 | 187,646 | 193,776 | 197,670 | 198,155 | 200,312 | 198,406 |
| 25-34 | 378,852 | 377,553 | 374,494 | 372,983 | 376,947 | 381,591 | 396,649 | 407,260 | 415,461 |
| 35-44 | 387,022 | 387,788 | 387,069 | 389,725 | 395,766 | 399,542 | 398,838 | 403,408 | 405,491 |
| 45-54 | 369,075 | 372,166 | 373,149 | 375,197 | 379,995 | 385,828 | 387,647 | 394,646 | 395,961 |
| 55-64 | 303,733 | 310,919 | 318,128 | 323,370 | 331,756 | 338,075 | 344,172 | 351,960 | 356,964 |
| 65-74 | 200,225 | 207,114 | 212,292 | 223,092 | 233,677 | 241,857 | 248,456 | 254,595 | 260,144 |
| 75-84 | 92,805 | 95,725 | 99,748 | 101,759 | 104,280 | 108,183 | 111,916 | 117,805 | 123,735 |
| 85+ | 30,341 | 31,950 | 33,416 | 34,638 | 35,998 | 36,876 | 37,258 | 38,153 | 39,148 |
| **Total** | **2,677,395** | **2,705,845** | **2,721,794** | **2,750,217** | **2,800,966** | **2,843,301** | **2,897,684** | **2,953,377** | **2,985,184** |

*Source: Nevada State Demographer, Vintage 2017.*

## Table 2. Middle School and High School Indicators, 2017.

| Indicator | Middle School | | High School | |
|---|---|---|---|---|
| | Percent (%) | Confidence Interval (95%) | Percent (%) | Confidence Interval (95%) |
| Felt sad or hopeless | 29.3% | (27.3 - 31.3) | 34.6% | (32.7 - 36.4) |
| Considered committing suicide | 21.3% | (19.6 - 23.1) | 16.6% | (15.1 - 18.0) |
| Planned suicide | 15.3% | (13.8 - 16.8) | 14.4% | (13.0 - 15.8) |
| Attempted suicide | 8.2% | (7.2 - 9.2) | 8.5% | (7.2 - 9.8) |
| Cut or burn themselves** | 18.4% | (16.7 - 20.1) | | |
| Currently smoke cigarettes | 2.2% | (1.7 - 2.6) | 6.4% | (5.5 - 7.4) |
| Currently smoke cigars | 2.3% | (1.6 - 9.0) | 6.9% | (5.7 - 8.0) |
| Currently use smokeless tobacco | 1.8% | (1.3 - 2.3) | 4.0% | (3.1 - 4.9) |
| Currently use tobacco | 4.6% | (3.5 - 5.6) | 12.0% | (10.5 - 13.4) |
| Ever used E-vapor products | 18.6% | (16.5 - 20.6) | 42.6% | (39.8 - 45.5) |
| Currently use E-vapor products | 6.7% | (5.7 - 7.8) | 15.0% | (13.2 - 16.8) |
| Tried E-vapor products before age 11 | 5.1% | (4.3 - 5.8) | 11.1% | (9.8 - 12.4) |
| Drank alcohol before age 11 (MS) / age 13 (HS) | 13.0% | (11.6 - 14.5) | 18.2% | (16.4 - 20.0) |
| Someone else provided alcohol | | | 42.6% | (39.1 - 46.1) |
| Recent binge drinking | | | 11.1% | (9.8 - 12.4) |
| Currently drank alcohol | 9.2% | (7.9 - 10.4) | 26.5% | (24.0 - 28.9) |
| Ever drank alcohol | 27.4% | (25.0 - 29.8) | 60.6% | (57.8 - 63.4) |
| Ever used marijuana | 9.8% | (8.4 - 11.2) | 37.0% | (33.7 - 40.2) |
| Currently use marijuana | 5.2% | (4.1 - 6.2) | 19.5% | (17.2 - 21.8) |
| Used marijuana before age 11 | 2.5% | (2.0 - 3.1) | 8.8% | (7.5 - 10.1) |
| Ever used prescription drugs (in HS)* | | | 14.8% | (13.2 - 16.4) |
| Ever used steroids (in HS)* | | | 3.2% | (2.2 - 4.2) |
| Ever used prescription drugs (in MS)* | | | 6.8% | (5.6 - 8.0) |
| Ever used heroin | 1.1% | (0.7 - 1.4) | 2.6% | (1.8 - 3.3) |
| Ever used methamphetamines | 1.7% | (1.2 - 2.2) | 3.3% | (2.6 - 4.1) |
| Ever used cocaine | 3.6% | (2.9 - 4.3) | 5.1% | (4.1 - 6.0) |
| Ever used inhalants | 5.9% | (5.1 - 6.8) | 7.5% | (6.5 - 8.5) |
| Ever used ecstasy | 1.3% | (0.9 - 1.7) | 6.3% | (5.2 - 7.5) |
| Ever used synthetic marijuana | 3.3% | (2.5 - 4.0) | 7.7% | (6.4 - 8.9) |
| Ever had sex* | | | 36.8% | (33.6 - 40.0) |
| Had sex before age 13* | | | 4.1% | (3.2 - 4.9) |
| Had sex with 4 or more persons* | | | 9.5% | (8.0 - 11.0) |
| Currently have Sex* | | | 25.8% | (23.2 - 28.5) |

*Source: Behavioral Risk Factor Surveillance System (BRFSS).*
**Indicator not measured.*
*~Data currently not available.*

## Table 3. Prevalence Estimates of Health Risk Behaviors, Nevada Adults, 2011-2017.

| Indicator | Percent & Confidence Interval (95%) 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |
|---|---|---|---|---|---|---|---|
| **Currently use marijuana/hashish** | 5.7% (4.6 - 6.9) | 5.4% (4.2 - 6.5) | 4.8% (3.2 - 6.4) | 6.1% (4.7 - 7.5) | 7.3% (5.5 - 9.0) | 8.4% (7.1 - 9.7) | ~ |
| **Use other illegal drugs** | 1.0% (0.4 - 1.6) | 1.2% (0.7 - 1.8) | 0.8% (0.4 - 1.2) | 1.2% (0.5 - 1.8) | 1.1% (0.5 - 1.8) | 1.5% (0.9 - 2.1) | ~ |
| **Currently use pain killer to get high** | 0.9% (0.3 - 1.6) | 1.0% (0.5 - 1.4) | 0.3% (0.1 - 0.5) | 0.6% (0.2 - 1.0) | 0.3% (0.1 - 0.5) | 1.1% (0.4 - 1.9) | ~ |
| **Seriously considering suicide** | 3.2% (2.2 - 4.1) | 2.0% (1.5 - 2.6) | 2.2% (1.2 - 3.1) | * | 2.1% (1.4 - 2.7) | 3.6% (2.6 - 4.5) | ~ |
| **No days of poor mental or physical health that prevented them from doing usual activities** | 60.2% (57.0 - 63.4) | 58.1% (55.2 - 60.9) | 59.3% (55.7 - 62.8) | 58.1% (54.6 - 61.6) | 59.0% (55.2 - 62.9) | 55.7% (52.6 - 58.7) | 52.4% (48.1 - 56.6) |
| **1-9 days of poor mental or physical health that prevented them from doing usual activities** | 20.4% (17.9 - 22.9) | 23.8% (21.2 - 26.3) | 23.2% (20.2 - 26.2) | 25.6% (22.4 - 28.8) | 22.6% (19.5 - 25.7) | 25.3% (22.6 - 28.1) | 29.9% (26.0 - 33.8) |
| **10 or more days of poor mental or physical health that prevented them from doing usual activities** | 19.4% (16.8 - 22.0) | 18.2% (16.0 - 20.3) | 17.5% (14.8 - 20.3) | 16.3% (13.9 - 18.7) | 18.4% (15.3 - 21.5) | 19.0% (16.7 - 21.3) | 17.7% (14.5 - 21.0) |

*Source: Behavioral Risk Factor Surveillance System (BRFSS).*
**Indicator not currently not available.*

## Table 4. Counts and Crude Rates per 100,000 of Selected Behavioral Health-Related Emergency Room Encounters by Gender, Nevada Residents, 2009-2017.

| 2009 | Female | | Male | | Total | |
|---|---|---|---|---|---|---|
| **Condition** | **N.** | **Rate** | **N.** | **Rate** | **N.** | **Rate** |
| Anxiety | 10,129 | 765.2 (750.3-780.1) | 5,437 | 401.7 (391.0-412.3) | 15,567 | 581.4 (572.3-590.6) |
| Depression | 9,424 | 711.9 (697.5-726.3) | 6,467 | 477.8 (466.1-489.4) | 15,891 | 593.5 (584.3-602.8) |
| Bipolar Disorder | 3,489 | 263.6 (254.8-272.3) | 2,517 | 185.9 (178.7-193.2) | 6,006 | 224.3 (218.6-230.0) |
| PTSD | 282 | 21.3 (18.8-23.8) | 306 | 22.6 (20.1-25.1) | 588 | 22.0 (20.2-23.7) |
| Schizophrenia | 1,283 | 96.9 (91.6-102.2) | 2,112 | 156.0 (149.4-162.7) | 3,395 | 126.8 (122.5-131.1) |
| Suicidal Ideation | 3,186 | 240.7 (232.3-249.0) | 4,235 | 312.9 (303.4-322.3) | 7,421 | 277.2 (270.9-283.5) |

| 2010 | Female | | Male | | Total | |
|---|---|---|---|---|---|---|
| **Condition** | **N.** | **Rate** | **N.** | **Rate** | **N.** | **Rate** |
| Anxiety | 11,536 | 862.2 (846.4-877.9) | 5,824 | 425.8 (414.8-436.7) | 17,360 | 641.6 (632.0-651.1) |
| Depression | 10,181 | 760.9 (746.1-775.7) | 6,919 | 505.8 (493.9-517.8) | 17,100 | 632.0 (622.5-641.4) |
| Bipolar Disorder | 4,687 | 350.3 (340.3-360.3) | 3,113 | 227.6 (219.6-235.6) | 7,800 | 288.3 (281.9-294.7) |
| PTSD | 577 | 43.1 (39.6-46.6) | 455 | 33.3 (30.2-36.3) | 1,032 | 38.1 (35.8-40.5) |
| Schizophrenia | 1,532 | 114.5 (108.8-120.2) | 2,842 | 207.8 (200.1-215.4) | 4,374 | 161.7 (156.9-166.4) |
| Suicidal Ideation | 3,423 | 255.8 (247.3-264.4) | 4,333 | 316.8 (307.3-326.2) | 7,756 | 286.6 (280.3-293.0) |

| 2011 | Female | | Male | | Total | |
|---|---|---|---|---|---|---|
| **Condition** | **N.** | **Rate** | **N.** | **Rate** | **N.** | **Rate** |
| Anxiety | 14,115 | 1,047.8 (1,030.5-1,065.0) | 6,852 | 498.5 (486.7-510.3) | 20,968 | 770.4 (759.9-780.8) |
| Depression | 12,121 | 899.7 (883.7-915.8) | 7,765 | 564.9 (552.3-577.4) | 19,886 | 730.6 (720.5-740.8) |
| Bipolar Disorder | 5,135 | 381.2 (370.7-391.6) | 3,463 | 251.9 (243.5-260.3) | 8,598 | 315.9 (309.2-322.6) |
| PTSD | 753 | 55.9 (51.9-59.9) | 671 | 48.8 (45.1-52.5) | 1,424 | 52.3 (49.6-55.0) |
| Schizophrenia | 1,803 | 133.8 (127.7-140.0) | 2,796 | 203.4 (195.9-210.9) | 4,599 | 169.0 (164.1-173.9) |
| Suicidal Ideation | 3,823 | 283.8 (274.8-292.8) | 4,736 | 344.5 (334.7-354.3) | 8,559 | 314.5 (307.8-321.1) |

| 2012 | Female | | Male | | Total | |
|---|---|---|---|---|---|---|
| **Condition** | **N.** | **Rate** | **N.** | **Rate** | **N.** | **Rate** |
| Anxiety | 18,155 | 1,332.8 (1,313.4-1,352.2) | 8,723 | 644.4 (630.9-657.9) | 26,878 | 977.3 (965.6-989.0) |
| Depression | 13,759 | 1,010.1 (993.2-1,027.0) | 8,231 | 608.1 (594.9-621.2) | 21,990 | 799.6 (789.0-810.1) |
| Bipolar Disorder | 5,566 | 408.6 (397.9-419.4) | 3,738 | 276.1 (267.3-285.0) | 9,305 | 338.3 (331.5-345.2) |
| PTSD | 1,032 | 75.8 (71.1-80.4) | 723 | 53.4 (49.5-57.3) | 1,755 | 63.8 (60.8-66.8) |
| Schizophrenia | 2,031 | 149.1 (142.6-155.6) | 3,105 | 229.4 (221.3-237.5) | 5,137 | 186.8 (181.7-191.9) |
| Suicidal Ideation | 4,066 | 298.5 (289.3-307.7) | 4,938 | 364.8 (354.6-375.0) | 9,004 | 327.4 (320.6-334.2) |

| 2013 | Female | | Male | | Total | |
|---|---|---|---|---|---|---|
| **Condition** | **N.** | **Rate** | **N.** | **Rate** | **N.** | **Rate** |
| Anxiety | 20,225 | 1,456.5 (1,436.4-1,476.6) | 10,456 | 740.3 (726.1-754.5) | 30,682 | 1,095.4 (1,083.2-1,107.7) |
| Depression | 14,339 | 1,032.6 (1,015.7-1,049.5) | 8,594 | 608.5 (595.6-621.3) | 22,934 | 818.8 (808.2-829.4) |
| Bipolar Disorder | 5,973 | 430.1 (419.2-441.1) | 4,142 | 293.3 (284.3-302.2) | 10,115 | 361.1 (354.1-368.2) |
| PTSD | 1,344 | 96.8 (91.6-102.0) | 1,005 | 71.2 (66.8-75.6) | 2,349 | 83.9 (80.5-87.3) |
| Schizophrenia | 2,203 | 158.6 (152.0-165.3) | 3,763 | 266.4 (257.9-274.9) | 5,966 | 213.0 (207.6-218.4) |
| Suicidal Ideation | 3,867 | 278.5 (269.7-287.3) | 4,978 | 352.5 (342.7-362.2) | 8,845 | 315.8 (309.2-322.4) |

| 2014 | Female | | Male | | Total | |
|---|---|---|---|---|---|---|
| **Condition** | **N.** | **Rate** | **N.** | **Rate** | **N.** | **Rate** |
| Anxiety | 25,765 | 1,826.2 (1,803.9-1,848.5) | 12,752 | 890.2 (874.8-905.7) | 38,517 | 1,354.7 (1,341.1-1,368.2) |
| Depression | 16,860 | 1,195.0 (1,177.0-1,213.1) | 9,815 | 685.2 (671.6-698.7) | 26,676 | 938.2 (926.9-949.5) |
| Bipolar Disorder | 7,065 | 500.8 (489.1-512.4) | 4,994 | 348.6 (339.0-358.3) | 12,059 | 424.1 (416.5-431.7) |
| PTSD | 1,649 | 116.9 (111.2-122.5) | 1,274 | 88.9 (84.1-93.8) | 2,923 | 102.8 (99.1-106.5) |
| Schizophrenia | 2,648 | 187.7 (180.5-194.8) | 4,384 | 306.1 (297.0-315.1) | 7,032 | 247.3 (241.5-253.1) |
| Suicidal Ideation | 3,910 | 277.1 (268.4-285.8) | 4,893 | 341.6 (332.0-351.2) | 8,803 | 309.6 (303.1-316.1) |

*Source: Hospital Emergency Department Billing.*
*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*
*Categories are not mutually exclusive.*

| 2015 | Female | | Male | | Total | |
|---|---|---|---|---|---|---|
| **Condition** | **N.** | **Rate** | **N.** | **Rate** | **N.** | **Rate** |
| Anxiety | 28,027 | 1,945.1 (1,922.3-1,967.8) | 13,897 | 954.0 (938.1-969.8) | 41,924 | 1,446.8 (1,433.0-1,460.7) |
| Depression | 17,828 | 1,237.3 (1,219.1-1,255.4) | 11,155 | 765.7 (751.5-779.9) | 28,983 | 1,000.2 (988.7-1,011.7) |
| Bipolar Disorder | 7,298 | 506.5 (494.9-518.1) | 5,375 | 369.0 (359.1-378.8) | 12,673 | 437.3 (429.7-445.0) |
| PTSD | 1,775 | 123.2 (117.5-128.9) | 1,371 | 94.1 (89.1-99.1) | 3,146 | 108.6 (104.8-112.4) |
| Schizophrenia | 2,634 | 182.8 (175.8-189.8) | 4,741 | 325.4 (316.2-334.7) | 7,375 | 254.5 (248.7-260.3) |
| Suicidal Ideation | 4,084 | 283.4 (274.7-292.1) | 6,125 | 420.5 (409.9-431.0) | 10,209 | 352.3 (345.5-359.2) |

| 2016 | Female | | Male | | Total | |
|---|---|---|---|---|---|---|
| **Condition** | **N.** | **Rate** | **N.** | **Rate** | **N.** | **Rate** |
| Anxiety | 32,599 | 2,217.2 (2,193.2-2,241.3) | 16,725 | 1,127.7 (1,110.6-1,144.8) | 49,342 | 1,670.7 (1,656.0-1,685.4) |
| Depression | 19,827 | 1,348.5 (1,329.8-1,367.3) | 11,999 | 809.0 (794.6-823.5) | 31,845 | 1,078.3 (1,066.4-1,090.1) |
| Bipolar Disorder | 8,325 | 566.2 (554.1-578.4) | 6,114 | 412.2 (401.9-422.6) | 14,446 | 489.1 (481.2-497.1) |
| PTSD | 2,223 | 151.2 (144.9-157.5) | 1,664 | 112.2 (106.8-117.6) | 3,892 | 131.8 (127.6-135.9) |
| Schizophrenia | 2,792 | 189.9 (182.9-196.9) | 4,573 | 308.3 (299.4-317.3) | 7,367 | 249.4 (243.7-255.1) |
| Suicidal Ideation | 4,550 | 309.5 (300.5-318.5) | 6,598 | 444.9 (434.1-455.6) | 11,155 | 377.7 (370.7-384.7) |

| 2017 | Female | | Male | | Total | |
|---|---|---|---|---|---|---|
| **Condition** | **N.** | **Rate** | **N.** | **Rate** | **N.** | **Rate** |
| Anxiety | 35,039 | 2,355.6 (2,330.9-2,380.3) | 18,437 | 1,231.0 (1,213.2-1,248.8) | 53,480 | 1,791.5 (1,776.3-1,806.7) |
| Depression | 19,120 | 1,285.4 (1,267.2-1,303.6) | 12,010 | 801.9 (787.5-816.2) | 31,133 | 1,042.9 (1,031.3-1,054.5) |
| Bipolar Disorder | 9,624 | 647.0 (634.1-659.9) | 7,790 | 520.1 (508.6-531.7) | 17,418 | 583.5 (574.8-592.1) |
| PTSD | 2,889 | 194.2 (187.1-201.3) | 2,308 | 154.1 (147.8-160.4) | 5,197 | 174.1 (169.4-178.8) |
| Schizophrenia | 3,240 | 217.8 (210.3-225.3) | 5,989 | 399.9 (389.7-410.0) | 9,230 | 309.2 (302.9-315.5) |
| Suicidal Ideation | 5,527 | 371.6 (361.8-381.4) | 8,825 | 589.2 (576.9-601.5) | 14,357 | 480.9 (473.1-488.8) |

*Source: Hospital Emergency Department Billing.*
*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*
*Categories are not mutually exclusive.*

**Table 5. Counts and Crude Rates per 100,000 of Selected Behavioral Health-Related Inpatient Admissions by Gender, Nevada Residents, 2009-2017.**

| 2009 | Female | | Male | | Total | |
|---|---|---|---|---|---|---|
| **Condition** | **N.** | **Rate** | **N.** | **Rate** | **N.** | **Rate** |
| Anxiety | 7,748 | 585.3 (572.3-598.3) | 3,704 | 273.6 (264.8-282.4) | 11,453 | 427.8 (419.9-435.6) |
| Depression | 12,018 | 907.9 (891.6-924.1) | 6,745 | 498.3 (486.4-510.2) | 18,764 | 700.8 (690.8-710.9) |
| Bipolar Disorder | 4,313 | 325.8 (316.1-335.5) | 2,766 | 204.3 (196.7-212.0) | 7,079 | 264.4 (258.2-270.6) |
| PTSD | 891 | 67.3 (62.9-71.7) | 734 | 54.2 (50.3-58.1) | 1,625 | 60.7 (57.7-63.6) |
| Schizophrenia | 1,124 | 84.9 (79.9-89.9) | 1,402 | 103.6 (98.2-109.0) | 2,526 | 94.3 (90.7-98.0) |
| Suicidal Ideation | 860 | 65.0 (60.6-69.3) | 858 | 63.4 (59.1-67.6) | 1,718 | 64.2 (61.1-67.2) |

| 2010 | Female | | Male | | Total | |
|---|---|---|---|---|---|---|
| **Condition** | **N.** | **Rate** | **N.** | **Rate** | **N.** | **Rate** |
| Anxiety | 8,201 | 612.9 (599.7-626.2) | 4,052 | 296.2 (287.1-305.4) | 12,253 | 452.8 (444.8-460.9) |
| Depression | 12,385 | 925.6 (909.3-941.9) | 7,175 | 524.6 (512.4-536.7) | 19,560 | 722.9 (712.7-733.0) |
| Bipolar Disorder | 4,733 | 353.7 (343.7-363.8) | 2,963 | 216.6 (208.8-224.4) | 7,696 | 284.4 (278.1-290.8) |
| PTSD | 1,090 | 81.5 (76.6-86.3) | 771 | 56.4 (52.4-60.3) | 1,861 | 68.8 (65.7-71.9) |
| Schizophrenia | 1,163 | 86.9 (81.9-91.9) | 1,492 | 109.1 (103.5-114.6) | 2,655 | 98.1 (94.4-101.9) |
| Suicidal Ideation | 1,358 | 101.5 (96.1-106.9) | 1,278 | 93.4 (88.3-98.6) | 2,636 | 97.4 (93.7-101.1) |

| 2011 | Female | | Male | | Total | |
|---|---|---|---|---|---|---|
| **Condition** | **N.** | **Rate** | **N.** | **Rate** | **N.** | **Rate** |
| Anxiety | 9,035 | 670.7 (656.8-684.5) | 4,472 | 325.3 (315.8-334.9) | 13,507 | 496.3 (487.9-504.6) |
| Depression | 13,153 | 976.3 (959.7-993.0) | 7,517 | 546.8 (534.5-559.2) | 20,671 | 759.5 (749.1-769.8) |
| Bipolar Disorder | 4,627 | 343.5 (333.6-353.4) | 2,972 | 216.2 (208.4-224.0) | 7,599 | 279.2 (272.9-285.5) |
| PTSD | 1,055 | 78.3 (73.6-83.0) | 865 | 62.9 (58.7-67.1) | 1,920 | 70.5 (67.4-73.7) |
| Schizophrenia | 1,203 | 89.3 (84.3-94.3) | 1,559 | 113.4 (107.8-119.0) | 2,762 | 101.5 (97.7-105.3) |
| Suicidal Ideation | 1,924 | 142.8 (136.4-149.2) | 1,772 | 128.9 (122.9-134.9) | 3,696 | 135.8 (131.4-140.2) |

| 2012 | Female | | Male | | Total | |
|---|---|---|---|---|---|---|
| **Condition** | **N.** | **Rate** | **N.** | **Rate** | **N.** | **Rate** |
| Anxiety | 11,824 | 868.0 (852.4-883.7) | 5,560 | 410.8 (400.0-421.5) | 17,389 | 632.3 (622.9-641.7) |
| Depression | 14,672 | 1077.1 (1059.7-1094.6) | 8,153 | 602.3 (589.2-615.4) | 22,826 | 830.0 (819.2-840.7) |
| Bipolar Disorder | 4,395 | 322.7 (313.1-332.2) | 2,828 | 208.9 (201.2-216.6) | 7,223 | 262.6 (256.6-268.7) |
| PTSD | 1,207 | 88.6 (83.6-93.6) | 968 | 71.5 (67.0-76.0) | 2,176 | 79.1 (75.8-82.4) |
| Schizophrenia | 1,289 | 94.6 (89.5-99.8) | 1,614 | 119.2 (113.4-125.1) | 2,903 | 105.6 (101.7-109.4) |
| Suicidal Ideation | 2,945 | 216.2 (208.4-224.0) | 2,577 | 190.4 (183.0-197.7) | 5,522 | 200.8 (195.5-206.1) |

| 2013 | Female | | Male | | Total | |
|---|---|---|---|---|---|---|
| **Condition** | **N.** | **Rate** | **N.** | **Rate** | **N.** | **Rate** |
| Anxiety | 13,666 | 984.2 (967.7-1000.7) | 6,744 | 477.5 (466.1-488.9) | 20,411 | 728.7 (718.7-738.7) |
| Depression | 15,744 | 1133.8 (1116.1-1151.5) | 8,626 | 610.7 (597.9-623.6) | 24,372 | 870.1 (859.2-881.1) |
| Bipolar Disorder | 4,249 | 306.0 (296.8-315.2) | 2,938 | 208.0 (200.5-215.5) | 7,190 | 256.7 (250.8-262.6) |
| PTSD | 1,393 | 100.3 (95.0-105.6) | 1,169 | 82.8 (78.0-87.5) | 2,563 | 91.5 (88.0-95.0) |
| Schizophrenia | 1,370 | 98.7 (93.4-103.9) | 1,885 | 133.5 (127.4-139.5) | 3,255 | 116.2 (112.2-120.2) |
| Suicidal Ideation | 3,260 | 234.8 (226.7-242.8) | 3,080 | 218.1 (210.4-225.8) | 6,340 | 226.4 (220.8-231.9) |

*Source: Hospital Inpatient Billing.*
*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*
*Categories are not mutually exclusive.*

| 2014 | Female | | Male | | Total | |
|---|---|---|---|---|---|---|
| **Condition** | **N.** | **Rate** | **N.** | **Rate** | **N.** | **Rate** |
| Anxiety | 15,376 | 1,089.8 (1,072.6-1,107.1) | 7,844 | 547.6 (535.5-559.7) | 23,221 | 816.7 (806.2-827.2) |
| Depression | 17,806 | 1,262.1 (1,243.5-1,280.6) | 10,018 | 699.4 (685.7-713.1) | 27,825 | 978.6 (967.1-990.1) |
| Bipolar Disorder | 4,681 | 331.8 (322.3-341.3) | 3,403 | 237.6 (229.6-245.5) | 8,084 | 284.3 (278.1-290.5) |
| PTSD | 1,566 | 111.0 (105.5-116.5) | 1,330 | 92.8 (87.9-97.8) | 2,896 | 101.9 (98.1-105.6) |
| Schizophrenia | 1,556 | 110.3 (104.8-115.8) | 2,248 | 156.9 (150.4-163.4) | 3,804 | 133.8 (129.5-138.0) |
| Suicidal Ideation | 3,785 | 268.3 (259.7-276.8) | 3,685 | 257.3 (248.9-265.6) | 7,470 | 262.7 (256.8-268.7) |

| 2015 | Female | | Male | | Total | |
|---|---|---|---|---|---|---|
| **Condition** | **N.** | **Rate** | **N.** | **Rate** | **N.** | **Rate** |
| Anxiety | 17,565 | 1,219.0 (1,201.0-1,237.0) | 8,909 | 611.6 (598.9-624.3) | 26,474 | 913.6 (902.6-924.6) |
| Depression | 19,929 | 1,383.1 (1,363.9-1,402.3) | 12,112 | 831.4 (816.6-846.2) | 32,042 | 1,105.8 (1,093.7-1,117.9) |
| Bipolar Disorder | 6,518 | 452.3 (441.4-463.3) | 5,447 | 373.9 (364.0-383.8) | 11,965 | 412.9 (405.5-420.3) |
| PTSD | 2,232 | 154.9 (148.5-161.3) | 1,852 | 127.1 (121.3-132.9) | 4,084 | 140.9 (136.6-145.3) |
| Schizophrenia | 2,397 | 166.4 (159.7-173.0) | 4,022 | 276.1 (267.6-284.6) | 6,419 | 221.5 (216.1-226.9) |
| Suicidal Ideation | 5,512 | 382.5 (372.4-392.6) | 6,265 | 430.1 (419.4-440.7) | 11,777 | 406.4 (399.1-413.8) |

| 2016 | Female | | Male | | Total | |
|---|---|---|---|---|---|---|
| **Condition** | **N.** | **Rate** | **N.** | **Rate** | **N.** | **Rate** |
| Anxiety | 19,113 | 1,300.0 (1,281.6-1,318.4) | 10,078 | 679.5 (666.2-692.8) | 29,196 | 988.6 (977.2-999.9) |
| Depression | 19,716 | 1,341.0 (1,322.3-1,359.7) | 12,389 | 835.3 (820.6-850.0) | 32,106 | 1,087.1 (1,075.2-1,099.0) |
| Bipolar Disorder | 6,483 | 440.9 (430.2-451.7) | 5,486 | 369.9 (360.1-379.7) | 11,969 | 405.3 (398.0-412.5) |
| PTSD | 2,485 | 169.0 (162.4-175.7) | 1,997 | 134.6 (128.7-140.6) | 4,483 | 151.8 (147.3-156.2) |
| Schizophrenia | 2,089 | 142.1 (136.0-148.2) | 3,652 | 246.2 (238.3-254.2) | 5,741 | 194.4 (189.4-199.4) |
| Suicidal Ideation | 3,137 | 213.4 (205.9-220.8) | 3,431 | 231.3 (223.6-239.1) | 6,568 | 222.4 (217.0-227.8) |

| 2017 | Female | | Male | | Total | |
|---|---|---|---|---|---|---|
| **Condition** | **N.** | **Rate** | **N.** | **Rate** | **N.** | **Rate** |
| Anxiety | 20,601 | 1,385.0 (1,366.1-1,403.9) | 11,069 | 739.1 (725.3-752.8) | 31,671 | 1,060.9 (1,049.3-1,072.6) |
| Depression | 20,653 | 1,388.5 (1,369.5-1,407.4) | 13,460 | 898.7 (883.5-913.9) | 34,115 | 1,142.8 (1,130.7-1,154.9) |
| Bipolar Disorder | 6,839 | 459.8 (448.9-470.7) | 6,033 | 402.8 (392.6-413.0) | 12,875 | 431.3 (423.8-438.7) |
| PTSD | 2,660 | 178.8 (172.0-185.6) | 2,267 | 151.4 (145.1-157.6) | 4,928 | 165.1 (160.5-169.7) |
| Schizophrenia | 2,033 | 136.7 (130.7-142.6) | 3,416 | 228.1 (220.4-235.7) | 5,449 | 182.5 (177.7-187.4) |
| Suicidal Ideation | 5,619 | 377.8 (367.9-387.6) | 7,257 | 484.5 (473.4-495.7) | 12,876 | 431.3 (423.9-438.8) |

*Source: Hospital Inpatient Billing.*
*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable. Categories are not mutually exclusive.*

**Table 6. Demographics of State-Funded Mental Health Clinics Utilization*, 2011-2017.**

| Sex | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |
|---|---|---|---|---|---|---|---|
| Female | 12,554 | 11,713 | 11,628 | 11,030 | 9,021 | 7,765 | 6,916 |
| Male | 10,855 | 10,145 | 10,122 | 9,667 | 8,552 | 7,421 | 6,778 |
| Unknown | 148 | 60 | 162 | 90 | 45 | 15 | 8 |
| **Race/Ethnicity** | | | | | | | |
| White | 14,622 | 13,670 | 12,978 | 12,050 | 9,615 | 7,528 | 6,711 |
| Black | 2,701 | 2,548 | 2,618 | 2,311 | 2,023 | 1,676 | 1,518 |
| Hispanic | 2,495 | 2,511 | 2,531 | 2,213 | 2,038 | 1,699 | 1,544 |
| Asian | 484 | 498 | 465 | 414 | 375 | 344 | 324 |
| American Indian/Alaskan | 249 | 242 | 242 | 254 | 209 | 175 | 190 |
| Native Hawaiian/Pacific Islander | 107 | 100 | 93 | 91 | 82 | 59 | 64 |
| More than 1 race reported | 329 | 313 | 323 | 357 | 283 | 210 | 190 |
| Other/Unknown | 2,570 | 2,036 | 2,662 | 3,097 | 2,993 | 3,510 | 3,161 |
| **Age** | | | | | | | |
| 0-14 | 493 | 472 | 452 | 544 | 526 | 531 | 611 |
| 15-17 | 245 | 217 | 243 | 341 | 356 | 362 | 381 |
| 18-19 | 445 | 382 | 375 | 302 | 295 | 297 | 289 |
| 20-24 | 2,072 | 1,871 | 1,709 | 1,557 | 1,443 | 1,150 | 1,013 |
| 25-34 | 5,047 | 4,709 | 4,786 | 4,352 | 3,723 | 3,179 | 2,814 |
| 35-44 | 4,920 | 4,612 | 4,487 | 4,147 | 3,431 | 2,920 | 2,566 |
| 45-54 | 6,145 | 5,576 | 5,651 | 5,261 | 4,037 | 3,244 | 2,666 |
| 55-64 | 3,555 | 3,466 | 3,561 | 3,508 | 2,992 | 2,627 | 2,458 |
| 65-74 | 547 | 534 | 568 | 678 | 708 | 764 | 761 |
| 75-84 | 64 | 60 | 64 | 75 | 82 | 111 | 129 |
| >84 | 10 | 10 | 8 | 5 | 14 | 10 | 7 |
| Unknown | 14 | 9 | 8 | 17 | 11 | 6 | 7 |
| **Education** | | | | | | | |
| No Formal Education | 171 | 145 | 120 | 117 | 84 | 85 | 62 |
| <=12th Grade - No Diploma | 4,787 | 4,514 | 4,424 | 4,134 | 3,543 | 2,986 | 2,666 |
| High School Graduate | 5,751 | 5,495 | 5,476 | 5,074 | 4,173 | 3,338 | 2,878 |
| GED | 2,059 | 1,889 | 1,914 | 1,694 | 1,347 | 955 | 795 |
| Some College | 5,892 | 5,619 | 5,422 | 4,924 | 3,765 | 2,926 | 2,424 |
| College undergraduate degree | 1,037 | 967 | 869 | 901 | 701 | 540 | 487 |
| Some Graduate School | 155 | 151 | 140 | 119 | 90 | 86 | 77 |
| Graduate Degree | 408 | 403 | 392 | 356 | 296 | 234 | 225 |
| Special Education | 124 | 117 | 111 | 122 | 98 | 81 | 64 |
| Other/Unknown | 3,173 | 2,618 | 3,044 | 3,346 | 3,521 | 3,970 | 4,024 |
| Total | 23,557 | 21,918 | 21,912 | 20,787 | 17,618 | 15,201 | 13,702 |

*Source: Avatar.*
**A client is counted only once per year. Clients may be counted more than once across years.*

## Table 7a. Alcohol and Drug-Related Emergency Department Encounters by Year, 2009.

| 2009 | Alcohol | | | Drug Use | | |
|---|---|---|---|---|---|---|
| **Sex** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| Female | 6,316 | 30% | 477.1 (465.4-488.9) | 6,808 | 46% | 514.3 (502.1-526.5) |
| Male | 14,548 | 70% | 1,074.8 (1,057.3-1,092.2) | 7,886 | 54% | 582.6 (569.7-595.4) |
| Unknown | 2 | 0% | - | 0 | 0% | - |
| **Race** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| White | 13,664 | 65% | 906.5 (891.3-921.7) | 9,737 | 66% | 646.0 (633.1-658.8) |
| Black | 2,109 | 10% | 974.4 (932.9-1,016.0) | 2,155 | 15% | 995.7 (953.7-1,037.7) |
| Native American | 525 | 3% | 1,686.3 (1,542.1-1,830.6) | 133 | 1% | 427.2 (354.6-499.8) |
| Asian/Pacific | 442 | 2% | 198.8 (180.2-217.3) | 293 | 2% | 131.8 (116.7-146.8) |
| Hispanic | 2,565 | 12% | 366.4 (352.2-380.6) | 1,470 | 10% | 210.0 (199.2-220.7) |
| Other/Unknown | 1,561 | 7% | - | 906 | 6% | - |
| **Age** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| 0-14 | 91 | 0% | 16.4 (13.0-19.7) | 664 | 5% | 119.4 (110.3-128.5) |
| 15-17 | 480 | 2% | 443.4 (403.8-483.1) | 647 | 4% | 597.7 (551.7-643.8) |
| 18-19 | 386 | 2% | 527.8 (475.2-580.5) | 623 | 4% | 851.9 (785.0-918.8) |
| 20-24 | 1,558 | 7% | 876.3 (832.7-919.8) | 1,800 | 12% | 1,012.4 (965.6-1,059.1) |
| 25-34 | 3,463 | 17% | 914.1 (883.6-944.5) | 3,408 | 23% | 899.6 (869.4-929.8) |
| 35-44 | 4,742 | 23% | 1,225.3 (1,190.4-1,260.1) | 3,015 | 21% | 779.0 (751.2-806.8) |
| 45-54 | 6,172 | 30% | 1,672.3 (1,630.6-1,714.0) | 2,942 | 20% | 797.1 (768.3-825.9) |
| 55-64 | 2,769 | 13% | 911.7 (877.7-945.6) | 1,149 | 8% | 378.3 (356.4-400.2) |
| 65-74 | 889 | 4% | 444.0 (414.8-473.2) | 272 | 2% | 135.8 (119.7-152.0) |
| 75-84 | 219 | 1% | 236.0 (204.7-267.2) | 124 | 1% | 133.6 (110.1-157.1) |
| 85+ | 94 | 0% | 309.8 (247.2-372.4) | 50 | 0% | 164.8 (119.1-210.5) |
| **Total** | **20,866** | | **779.3 (768.8-789.9)** | **14,694** | | **548.8 (539.9-557.7)** |

*Source: Hospital Emergency Department Billing.*

*Categories are not mutually exclusive.*

*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

## Table 7b. Alcohol and Drug-Related Emergency Department Encounters by Year, 2010.

| 2010 | Alcohol | | | Drug Use | | |
|---|---|---|---|---|---|---|
| **Sex** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| Female | 6,310 | 28% | 471.6 (460.0-483.2) | 7,594 | 47% | 567.6 (554.8-580.3) |
| Male | 15,948 | 72% | 1,165.9 (1,147.8-1,184.0) | 8,493 | 53% | 620.9 (607.7-634.1) |
| Unknown | 1 | 0% | - | 1 | 0% | - |
| **Race** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| White | 15,309 | 69% | 1,014.8 (998.8-1,030.9) | 10,713 | 67% | 710.2 (696.7-723.6) |
| Black | 2,040 | 9% | 925.7 (885.5-965.9) | 2,354 | 15% | 1,068.2 (1,025.0-1,111.3) |
| Native American | 597 | 3% | 1,900.3 (1,747.8-2,052.7) | 131 | 1% | 417.0 (345.6-488.4) |
| Asian/Pacific | 323 | 1% | 142.2 (126.7-157.7) | 248 | 2% | 109.2 (95.6-122.8) |
| Hispanic | 2,876 | 13% | 400.3 (385.7-414.9) | 1,954 | 12% | 272.0 (259.9-284.0) |
| Other/Unknown | 1,114 | 5% | - | 688 | 4% | - |
| **Age** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| 0-14 | 89 | 0% | 15.9 (12.6-19.2) | 675 | 4% | 120.7 (111.6-129.8) |
| 15-17 | 479 | 2% | 444.9 (405.1-484.8) | 728 | 5% | 676.2 (627.1-725.3) |
| 18-19 | 432 | 2% | 586.6 (531.3-641.9) | 650 | 4% | 882.6 (814.8-950.5) |
| 20-24 | 1,526 | 7% | 837.2 (795.2-879.2) | 2,020 | 13% | 1,108.3 (1,059.9-1,156.6) |
| 25-34 | 3,476 | 16% | 920.7 (890.1-951.3) | 3,939 | 24% | 1,043.3 (1,010.7-1,075.9) |
| 35-44 | 4,736 | 21% | 1,221.3 (1,186.5-1,256.1) | 3,249 | 20% | 837.8 (809.0-866.6) |
| 45-54 | 6,871 | 31% | 1,846.2 (1,802.6-1,889.9) | 3,059 | 19% | 821.9 (792.8-851.1) |
| 55-64 | 3,455 | 16% | 1,111.2 (1,074.2-1,148.3) | 1,252 | 8% | 402.7 (380.4-425.0) |
| 65-74 | 862 | 4% | 416.2 (388.4-444.0) | 357 | 2% | 172.4 (154.5-190.2) |
| 75-84 | 219 | 1% | 228.8 (198.5-259.1) | 112 | 1% | 117.0 (95.3-138.7) |
| 85+ | 109 | 0% | 341.2 (277.1-405.2) | 46 | 0% | 144.0 (102.4-185.6) |
| **Total** | **22,259** | | **822.6 (811.8-833.4)** | **16,088** | | **594.6 (585.4-603.8)** |

*Source: Hospital Emergency Department Billing.*

*Categories are not mutually exclusive.*

*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

## Table 7c. Alcohol and Drug-Related Emergency Department Encounters by Year, 2011.

| 2011 | Alcohol | | | Drug Use | | |
|---|---|---|---|---|---|---|
| **Sex** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| Female | 7,234 | 31% | 537.0 (524.6-549.4) | 8,167 | 47% | 606.2 (593.1-619.4) |
| Male | 16,292 | 69% | 1,185.2 (1,167.0-1,203.4) | 9,192 | 53% | 668.7 (655.0-682.4) |
| Unknown | 1 | 0% | - | 0 | 0% | - |
| **Race** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| White | 16,319 | 69% | 1,080.4 (1,063.9-1,097.0) | 11,669 | 67% | 772.6 (758.6-786.6) |
| Black | 2,191 | 9% | 986.1 (944.8-1,027.4) | 2,513 | 14% | 1,131.0 (1,086.8-1,175.3) |
| Native American | 599 | 3% | 1,889.2 (1,737.9-2,040.5) | 166 | 1% | 523.5 (443.9-603.2) |
| Asian/Pacific | 341 | 1% | 149.3 (133.5-165.2) | 268 | 2% | 117.4 (103.3-131.4) |
| Hispanic | 2,983 | 13% | 409.1 (394.4-423.8) | 2,079 | 12% | 285.1 (272.9-297.4) |
| Other/Unknown | 1,094 | 5% | - | 664 | 4% | - |
| **Age** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| 0-14 | 96 | 0% | 17.2 (13.7-20.6) | 682 | 4% | 121.9 (112.8-131.1) |
| 15-17 | 468 | 2% | 438.1 (398.4-477.8) | 737 | 4% | 689.9 (640.0-739.7) |
| 18-19 | 426 | 2% | 576.8 (522.0-631.5) | 741 | 4% | 1,003.3 (931.0-1,075.5) |
| 20-24 | 1,547 | 7% | 842.9 (800.9-884.9) | 2,217 | 13% | 1,208.0 (1,157.7-1,258.3) |
| 25-34 | 3,761 | 16% | 1,004.3 (972.2-1,036.4) | 4,285 | 25% | 1,144.2 (1,110.0-1,178.5) |
| 35-44 | 4,647 | 20% | 1,200.6 (1,166.0-1,235.1) | 3,311 | 19% | 855.4 (826.3-884.5) |
| 45-54 | 6,987 | 30% | 1,872.4 (1,828.5-1,916.3) | 3,192 | 18% | 855.4 (825.7-885.1) |
| 55-64 | 4,078 | 17% | 1,281.9 (1,242.5-1,321.2) | 1,509 | 9% | 474.3 (450.4-498.3) |
| 65-74 | 1154 | 5% | 543.6 (512.2-575.0) | 463 | 3% | 218.1 (198.2-238.0) |
| 75-84 | 295 | 1% | 295.7 (262.0-329.5) | 162 | 1% | 162.4 (137.4-187.4) |
| 85+ | 67 | 0% | 200.5 (152.5-248.5) | 60 | 0% | 179.6 (134.1-225.0) |
| **Total** | **23,527** | | **864.4 (853.3-875.4)** | **17,359** | | **637.8 (628.3-647.3)** |

*Source: Hospital Emergency Department Billing.*

*Categories are not mutually exclusive.*

*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

## Table 7d. Alcohol and Drug-Related Emergency Department Encounters by Year, 2012.

| 2012 | Alcohol | | | Drug Use | | |
|---|---|---|---|---|---|---|
| **Sex** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| Female | 7,374 | 32% | 541.4 (529.0-553.7) | 8,624 | 47% | 633.1 (619.8-646.5) |
| Male | 15,679 | 68% | 1,129.6 (1,111.9-1,147.2) | 9,768 | 53% | 703.7 (689.8-717.7) |
| Unknown | 0 | 0% | - | 1 | 0% | - |
| **Race** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| White | 15,803 | 69% | 1,043.5 (1,027.2-1,059.8) | 12,075 | 66% | 797.3 (783.1-811.6) |
| Black | 2,135 | 9% | 945.6 (905.5-985.7) | 2,843 | 15% | 1,259.2 (1,212.9-1,305.5) |
| Native American | 654 | 3% | 2,047.5 (1,890.6-2,204.4) | 149 | 1% | 466.5 (391.6-541.4) |
| Asian/Pacific | 359 | 2% | 154.2 (138.2-170.1) | 298 | 2% | 128.0 (113.4-142.5) |
| Hispanic | 2,990 | 13% | 401.2 (386.8-415.6) | 2,301 | 13% | 308.8 (296.1-321.4) |
| Other/Unknown | 1,111 | 5% | - | 726 | 4% | - |
| **Age** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| 0-14 | 76 | 0% | 13.6 (10.5-16.6) | 666 | 4% | 118.8 (109.8-127.8) |
| 15-17 | 428 | 2% | 401.1 (363.1-439.1) | 666 | 4% | 624.2 (576.8-671.6) |
| 18-19 | 377 | 2% | 506.8 (455.6-558.0) | 731 | 4% | 982.7 (911.5-1,053.9) |
| 20-24 | 1,715 | 7% | 914.0 (870.7-957.2) | 2,413 | 13% | 1,285.9 (1,234.6-1,337.2) |
| 25-34 | 3,992 | 17% | 1,070.3 (1,037.1-1,103.5) | 4,566 | 25% | 1,224.2 (1,188.7-1,259.7) |
| 35-44 | 4,505 | 20% | 1,155.9 (1,122.2-1,189.7) | 3,512 | 19% | 901.1 (871.3-931.0) |
| 45-54 | 6,516 | 28% | 1,736.7 (1,694.5-1,778.9) | 3,267 | 18% | 870.7 (840.9-900.6) |
| 55-64 | 3,806 | 17% | 1,177.0 (1,139.6-1,214.4) | 1,849 | 10% | 571.8 (545.7-597.9) |
| 65-74 | 1265 | 5% | 567.0 (535.8-598.3) | 509 | 3% | 228.2 (208.3-248.0) |
| 75-84 | 321 | 1% | 315.5 (280.9-350.0) | 166 | 1% | 163.1 (138.3-187.9) |
| 85+ | 48 | 0% | 138.6 (99.4-177.8) | 48 | 0% | 138.6 (99.4-177.8) |
| **Total** | **23,052** | | **838.2 (827.4-849.0)** | **18,392** | | **668.7 (659.1-678.4)** |

*Source: Hospital Emergency Department Billing.*

*Categories are not mutually exclusive.*

*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

## Table 7e. Alcohol and Drug-Related Emergency Department Encounters by Year, 2013.

| 2013 | Alcohol | | | Drug Use | | |
|---|---|---|---|---|---|---|
| **Sex** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| Female | 8,076 | 31% | 581.6 (568.9-594.3) | 10,426 | 45% | 750.8 (736.4-765.2) |
| Male | 17,935 | 69% | 1,269.9 (1,251.3-1,288.4) | 12,823 | 55% | 907.9 (892.2-923.6) |
| Unknown | 1 | 0% | - | 1 | 0% | - |
| **Race** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| White | 16,872 | 65% | 1,107.7 (1,091.0-1,124.4) | 14,712 | 63% | 965.9 (950.3-981.5) |
| Black | 3,030 | 12% | 1,301.3 (1,255.0-1,347.7) | 3,886 | 17% | 1,669.0 (1,616.5-1,721.5) |
| Native American | 951 | 4% | 2,948.9 (2,761.5-3,136.3) | 505 | 2% | 1,565.9 (1,429.3-1,702.5) |
| Asian/Pacific | 357 | 1% | 147.2 (131.9-162.4) | 317 | 1% | 130.7 (116.3-145.0) |
| Hispanic | 2,971 | 11% | 385.8 (371.9-399.7) | 2,443 | 11% | 317.2 (304.6-329.8) |
| Other/Unknown | 1,821 | 7% | - | 1386 | 6% | - |
| **Age** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| 0-14 | 83 | 0% | 14.6 (11.5-17.8) | 637 | 3% | 112.4 (103.7-121.2) |
| 15-17 | 439 | 2% | 407.6 (369.4-445.7) | 798 | 3% | 740.8 (689.4-792.2) |
| 18-19 | 363 | 1% | 487.6 (437.5-537.8) | 868 | 4% | 1,166.0 (1,088.4-1,243.6) |
| 20-24 | 1,873 | 7% | 966.6 (922.8-1,010.4) | 2,894 | 12% | 1,493.5 (1,439.1-1,547.9) |
| 25-34 | 4,539 | 17% | 1,204.1 (1,169.1-1,239.2) | 6,286 | 27% | 1,667.6 (1,626.4-1,708.8) |
| 35-44 | 4,721 | 18% | 1,192.9 (1,158.8-1,226.9) | 4,479 | 19% | 1,131.7 (1,098.6-1,164.9) |
| 45-54 | 7,396 | 28% | 1,946.3 (1,902.0-1,990.7) | 4,114 | 18% | 1,082.6 (1,049.6-1,115.7) |
| 55-64 | 4,535 | 17% | 1,367.0 (1,327.2-1,406.8) | 2,199 | 9% | 662.8 (635.1-690.5) |
| 65-74 | 1602 | 6% | 685.6 (652.0-719.1) | 719 | 3% | 307.7 (285.2-330.2) |
| 75-84 | 379 | 1% | 363.4 (326.9-400.0) | 184 | 1% | 176.4 (151.0-201.9) |
| 85+ | 81 | 0% | 225.0 (176.0-274.0) | 72 | 0% | 200.0 (153.8-246.2) |
| **Total** | **26,002** | | **928.3 (917.0-939.6)** | **23,249** | | **830.0 (819.4-840.7)** |

*Source: Hospital Emergency Department Billing.*

*Categories are not mutually exclusive.*

*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

## Table 7f. Alcohol and Drug-Related Emergency Department Encounters by Year, 2014.

| 2014 | Alcohol | | | Drug Use | | |
|---|---|---|---|---|---|---|
| **Sex** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| Female | 9,551 | 32% | 677.0 (663.4-690.5) | 12,679 | 44% | 898.7 (883.0-914.3) |
| Male | 20,385 | 68% | 1,423.1 (1,403.6-1,442.6) | 16,050 | 56% | 1,113.9 (1,096.6-1,131.1) |
| Unknown | 0 | 0% | - | 1 | 0% | - |
| **Race** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| White | 19,542 | 65% | 1,278.4 (1,260.4-1,296.3) | 18,369 | 64% | 1,201.6 (1,184.3-1,219.0) |
| Black | 3,117 | 10% | 1,305.3 (1,259.5-1,351.2) | 4,425 | 15% | 1,853.1 (1,798.5-1,907.7) |
| Native American | 958 | 3% | 2,954.6 (2,767.5-3,141.7) | 692 | 2% | 2,134.2 (1,975.2-2,293.2) |
| Asian/Pacific | 395 | 1% | 157.4 (141.9-172.9) | 425 | 1% | 169.4 (153.3-185.5) |
| Hispanic | 3,403 | 11% | 429.4 (415.0-443.8) | 2,906 | 10% | 366.7 (353.4-380.0) |
| Other/Unknown | 2,521 | 8% | - | 1913 | 7% | - |
| **Age** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| 0-14 | 78 | 0% | 13.6 (10.6-16.7) | 716 | 2% | 125.3 (116.1-134.5) |
| 15-17 | 373 | 1% | 342.1 (307.4-376.9) | 817 | 3% | 749.4 (698.0-800.8) |
| 18-19 | 387 | 1% | 529.2 (476.5-581.9) | 869 | 3% | 1,188.3 (1,109.3-1,267.4) |
| 20-24 | 2,065 | 7% | 1,044.7 (999.6-1,089.7) | 3,447 | 12% | 1,743.8 (1,685.6-1,802.0) |
| 25-34 | 5,669 | 19% | 1,485.6 (1,447.0-1,524.3) | 7,789 | 27% | 2,041.2 (1,995.9-2,086.5) |
| 35-44 | 5,584 | 19% | 1,397.6 (1,360.9-1,434.3) | 5,765 | 20% | 1,442.9 (1,405.7-1,480.1) |
| 45-54 | 7,917 | 26% | 2,051.9 (2,006.7-2,097.1) | 5,133 | 18% | 1,330.4 (1,294.0-1,366.8) |
| 55-64 | 5,288 | 18% | 1,564.2 (1,522.0-1,606.3) | 2,936 | 10% | 868.4 (837.0-899.9) |
| 65-74 | 2004 | 7% | 828.6 (792.3-864.9) | 886 | 3% | 366.3 (342.2-390.5) |
| 75-84 | 473 | 2% | 437.2 (397.8-476.6) | 256 | 1% | 236.6 (207.6-265.6) |
| 85+ | 98 | 0% | 265.8 (213.1-318.4) | 116 | 0% | 314.6 (257.3-371.8) |
| **Total** | **29,936** | | **1,052.9 (1,040.9-1,064.8)** | **28,730** | | **1,010.4 (998.8-1,022.1)** |

*Source: Hospital Emergency Department Billing.*

*Categories are not mutually exclusive.*

*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

## Table 7g. Alcohol and Drug-Related Emergency Department Encounters by Year, 2015.

| 2015 | Alcohol | | | Drug Use | | |
|---|---|---|---|---|---|---|
| **Sex** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| Female | 9,369 | 31% | 650.2 (637.0-663.4) | 14,404 | 42% | 999.6 (983.3-1,016.0) |
| Male | 20,539 | 69% | 1,409.9 (1,390.6-1,429.2) | 19,632 | 58% | 1,347.6 (1,328.8-1,366.5) |
| Unknown | 1 | 0% | - | 0 | 0% | - |
| **Race** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| White | 19,024 | 64% | 1,242.7 (1,225.0-1,260.3) | 21,304 | 63% | 1,391.6 (1,372.9-1,410.3) |
| Black | 3,602 | 12% | 1,456.9 (1,409.4-1,504.5) | 5,989 | 18% | 2,422.5 (2,361.1-2,483.8) |
| Native American | 1101 | 4% | 3,231.1 (3,040.3-3,422.0) | 843 | 2% | 2,474.0 (2,307.0-2,641.0) |
| Asian/Pacific | 416 | 1% | 156.5 (141.4-171.5) | 464 | 1% | 174.5 (158.7-190.4) |
| Hispanic | 3,673 | 12% | 448.1 (433.6-462.6) | 3,707 | 11% | 452.3 (437.7-466.8) |
| Other/Unknown | 2,093 | 7% | - | 1729 | 5% | - |
| **Age** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| 0-14 | 70 | 0% | 12.0 (9.2-14.8) | 696 | 2% | 118.9 (110.0-127.7) |
| 15-17 | 347 | 1% | 302.4 (270.6-334.2) | 882 | 3% | 768.6 (717.9-819.3) |
| 18-19 | 394 | 1% | 530.5 (478.1-582.8) | 1016 | 3% | 1,367.9 (1,283.8-1,452.0) |
| 20-24 | 2,134 | 7% | 1,076.9 (1,031.2-1,122.6) | 4,213 | 12% | 2,126.1 (2,061.9-2,190.3) |
| 25-34 | 5,208 | 17% | 1,313.0 (1,277.3-1,348.7) | 9,572 | 28% | 2,413.2 (2,364.9-2,461.6) |
| 35-44 | 5,505 | 18% | 1,380.3 (1,343.8-1,416.7) | 6,770 | 20% | 1,697.4 (1,657.0-1,737.9) |
| 45-54 | 7,559 | 25% | 1,950.0 (1,906.0-1,993.9) | 5,815 | 17% | 1,500.1 (1,461.5-1,538.6) |
| 55-64 | 5,906 | 20% | 1,716.0 (1,672.2-1,759.8) | 3,551 | 10% | 1,031.8 (997.8-1,065.7) |
| 65-74 | 2073 | 7% | 834.4 (798.4-870.3) | 1097 | 3% | 441.5 (415.4-467.7) |
| 75-84 | 579 | 2% | 517.4 (475.2-559.5) | 310 | 1% | 277.0 (246.2-307.8) |
| 85+ | 134 | 0% | 359.7 (298.8-420.5) | 114 | 0% | 306.0 (249.8-362.1) |
| **Total** | **29,909** | | **1,032.2 (1,020.5-1,043.9)** | **34,036** | | **1,174.6 (1,162.1-1,187.1)** |

*Source: Hospital Emergency Department Billing.*

*Categories are not mutually exclusive.*

*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

## Table 7h. Alcohol and Drug-Related Emergency Department Encounters by Year, 2016.

| 2016 | Alcohol | | | Drug Use | | |
|---|---|---|---|---|---|---|
| **Sex** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| Female | 11,123 | 33% | 756.5 (742.5-770.6) | 17,643 | 44% | 1,200.0 (1,182.3-1,217.7) |
| Male | 22,216 | 67% | 1,497.9 (1,478.2-1,517.6) | 22,495 | 56% | 1,516.7 (1,496.9-1,536.5) |
| Unknown | 3 | 0% | - | 12 | 0% | - |
| **Race** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| White | 20,378 | 61% | 1,323.5 (1,305.3-1,341.7) | 25,613 | 64% | 1,663.5 (1,643.2-1,683.9) |
| Black | 5,021 | 15% | 1,969.6 (1,915.1-2,024.1) | 6,972 | 17% | 2,735.0 (2,670.8-2,799.2) |
| Native American | 746 | 2% | 2,171.6 (2,015.7-2,327.4) | 416 | 1% | 1,211.0 (1,094.6-1,327.3) |
| Asian/Pacific | 430 | 1% | 155.4 (140.7-170.1) | 618 | 2% | 223.3 (205.7-240.9) |
| Hispanic | 4,051 | 12% | 477.9 (463.2-492.6) | 4,537 | 11% | 535.2 (519.6-550.8) |
| Other/Unknown | 2,716 | 8% | - | 1994 | 5% | - |
| **Age** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| 0-14 | 111 | 0% | 18.8 (15.3-22.3) | 532 | 1% | 90.1 (82.4-97.7) |
| 15-17 | 377 | 1% | 318.5 (286.4-350.7) | 941 | 2% | 795.1 (744.3-845.9) |
| 18-19 | 403 | 1% | 528.4 (476.9-580.0) | 1260 | 3% | 1,652.2 (1,561.0-1,743.5) |
| 20-24 | 2,499 | 7% | 1,247.6 (1,198.6-1,296.5) | 4,792 | 12% | 2,392.3 (2,324.5-2,460.0) |
| 25-34 | 6,395 | 19% | 1,570.2 (1,531.8-1,608.7) | 11,106 | 28% | 2,727.0 (2,676.3-2,777.7) |
| 35-44 | 6,360 | 19% | 1,576.6 (1,537.8-1,615.3) | 7,915 | 20% | 1,962.0 (1,918.8-2,005.3) |
| 45-54 | 8,076 | 24% | 2,046.4 (2,001.8-2,091.0) | 6,946 | 17% | 1,760.1 (1,718.7-1,801.5) |
| 55-64 | 6,399 | 19% | 1,818.1 (1,773.6-1,862.7) | 4,414 | 11% | 1,254.1 (1,217.1-1,291.1) |
| 65-74 | 2060 | 6% | 809.1 (774.2-844.1) | 1533 | 4% | 602.1 (572.0-632.3) |
| 75-84 | 518 | 2% | 439.7 (401.8-477.6) | 502 | 1% | 426.1 (388.9-463.4) |
| 85+ | 144 | 0% | 377.4 (315.8-439.1) | 209 | 1% | 547.8 (473.5-622.1) |
| **Total** | **33,342** | | **1,128.9 (1,116.8-1,141.1)** | **40,150** | | **1,359.5 (1,346.2-1,372.8)** |

*Source: Hospital Emergency Department Billing.*

*Categories are not mutually exclusive.*

*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

## Table 7i. Alcohol and Drug-Related Emergency Department Encounters by Year, 2017.

| 2017 | Alcohol | | | Drug Use | | |
|---|---|---|---|---|---|---|
| **Sex** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| Female | 9,316 | 32% | 626.3 (613.6-639.0) | 16,191 | 43% | 1,088.5 (1,071.7-1,105.3) |
| Male | 19,676 | 68% | 1,313.7 (1,295.4-1,332.1) | 21,401 | 57% | 1,428.9 (1,409.8-1,448.1) |
| Unknown | 0 | 0% | - | 5 | 0% | - |
| **Race** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| White | 18,698 | 64% | 1,212.1 (1,194.7-1,229.4) | 22,859 | 61% | 1,481.8 (1,462.6-1,501.0) |
| Black | 3,382 | 12% | 1,304.4 (1,260.4-1,348.4) | 7,150 | 19% | 2,757.7 (2,693.8-2,821.6) |
| Native American | 708 | 2% | 2,048.1 (1,897.2-2,198.9) | 369 | 1% | 1,067.4 (958.5-1,176.3) |
| Asian/Pacific | 368 | 1% | 130.5 (117.1-143.8) | 628 | 2% | 222.7 (205.2-240.1) |
| Hispanic | 3,450 | 12% | 398.1 (384.8-411.4) | 4,262 | 11% | 491.8 (477.0-506.6) |
| Other/Unknown | 2,386 | 8% | - | 2329 | 6% | - |
| **Age** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| 0-14 | 107 | 0% | 18.1 (14.6-21.5) | 577 | 2% | 97.5 (89.5-105.4) |
| 15-17 | 350 | 1% | 292.8 (262.1-323.5) | 903 | 2% | 755.4 (706.1-804.7) |
| 18-19 | 337 | 1% | 430.6 (384.6-476.6) | 1131 | 3% | 1,445.2 (1,360.9-1,529.4) |
| 20-24 | 2,035 | 7% | 1,025.7 (981.1-1,070.2) | 4,429 | 12% | 2,232.3 (2,166.5-2,298.0) |
| 25-34 | 5,136 | 18% | 1,236.2 (1,202.4-1,270.0) | 10,872 | 29% | 2,616.9 (2,567.7-2,666.0) |
| 35-44 | 5,820 | 20% | 1,435.3 (1,398.4-1,472.2) | 7,730 | 21% | 1,906.3 (1,863.8-1,948.8) |
| 45-54 | 6,937 | 24% | 1,751.9 (1,710.7-1,793.2) | 6,148 | 16% | 1,552.7 (1,513.9-1,591.5) |
| 55-64 | 5,882 | 20% | 1,647.8 (1,605.7-1,689.9) | 3,948 | 11% | 1,106.0 (1,071.5-1,140.5) |
| 65-74 | 1824 | 6% | 701.2 (669.0-733.3) | 1340 | 4% | 515.1 (487.5-542.7) |
| 75-84 | 436 | 2% | 352.4 (319.3-385.4) | 392 | 1% | 316.8 (285.4-348.2) |
| 85+ | 126 | 0% | 321.9 (265.7-378.1) | 126 | 0% | 321.9 (265.7-378.1) |
| **Total** | **28,992** | | **971.2 (960.0-982.4)** | **37,597** | | **1,259.5 (1,246.7-1,272.2)** |

*Source: Hospital Emergency Department Billing.*

*Categories are not mutually exclusive.*

*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

## Table 8a. Alcohol and Drug-Related Inpatient Admissions by Year, 2009.

| 2009 | Alcohol | | | Drug Use | | |
|---|---|---|---|---|---|---|
| **Sex** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| Female | 4,309 | 29% | 325.5 (315.8-335.2) | 5,931 | 47% | 448.0 (436.6-436.6) |
| Male | 10,376 | 71% | 766.5 (751.8-781.3) | 6,808 | 53% | 502.9 (491.0-514.9) |
| Unknown | 1 | 0% | - | 0 | 0% | - |
| **Race** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| White | 10,155 | 69% | 673.7 (660.6-686.8) | 8,395 | 66% | 556.9 (545.0-568.8) |
| Black | 1,438 | 10% | 664.4 (630.1-698.8) | 2,037 | 16% | 941.2 (900.3-982.0) |
| Native American | 180 | 1% | 578.2 (493.7-662.6) | 87 | 1% | 279.5 (220.7-338.2) |
| Asian/Pacific | 156 | 1% | 70.2 (59.1-81.2) | 177 | 1% | 79.6 (67.9-91.3) |
| Hispanic | 1,430 | 10% | 204.3 (193.7-214.8) | 993 | 8% | 141.8 (133.0-150.7) |
| Other/Unknown | 1,327 | 9% | - | 1050 | 8% | - |
| **Age** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| 0-14 | 44 | 0% | 7.9 (5.6-10.2) | 208 | 2% | 37.4 (32.3-42.5) |
| 15-17 | 157 | 1% | 145.0 (122.4-167.7) | 533 | 4% | 492.4 (450.6-534.2) |
| 18-19 | 114 | 1% | 155.9 (127.3-184.5) | 387 | 3% | 529.2 (476.5-581.9) |
| 20-24 | 373 | 3% | 209.8 (188.5-231.1) | 898 | 7% | 505.1 (472.0-538.1) |
| 25-34 | 1,322 | 9% | 348.9 (330.1-367.8) | 2,111 | 17% | 557.2 (533.4-581.0) |
| 35-44 | 2,501 | 17% | 646.2 (620.9-671.5) | 2,524 | 20% | 652.2 (626.7-677.6) |
| 45-54 | 4,284 | 29% | 1,160.7 (1,126.0-1,195.5) | 3,134 | 25% | 849.2 (819.4-878.9) |
| 55-64 | 3,294 | 22% | 1,084.5 (1,047.5-1,121.5) | 1,794 | 14% | 590.7 (563.3-618.0) |
| 65-74 | 1861 | 13% | 929.5 (887.2-971.7) | 658 | 5% | 328.6 (303.5-353.7) |
| 75-84 | 616 | 4% | 663.8 (611.3-716.2) | 338 | 3% | 364.2 (325.4-403.0) |
| 85+ | 120 | 1% | 395.5 (324.7-466.3) | 154 | 1% | 507.6 (427.4-587.7) |
| **Total** | **14,686** | | **548.5 (539.6-557.4)** | **12,739** | | **475.8 (467.5-484.1)** |

*Source: Hospital Inpatient Billing.*
*Categories are not mutually exclusive.*
*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

## Table 8b. Alcohol and Drug-Related Inpatient Admissions by Year, 2010.

| 2010 | Alcohol | | | Drug Use | | |
|---|---|---|---|---|---|---|
| **Sex** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| Female | 4,477 | 31% | 334.6 (324.8-344.4) | 6,317 | 48% | 472.1 (460.5-483.8) |
| Male | 10,073 | 69% | 736.4 (722.0-750.8) | 6,975 | 52% | 509.9 (498.0-498.0) |
| Unknown | 0 | 0% | - | 0 | 0% | - |
| **Race** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| White | 9,856 | 68% | 653.4 (640.5-666.3) | 8,412 | 63% | 557.6 (545.7-569.6) |
| Black | 1,477 | 10% | 670.2 (636.0-704.4) | 2,209 | 17% | 1,002.4 (960.6-1,044.2) |
| Native American | 197 | 1% | 627.1 (539.5-714.6) | 97 | 1% | 308.8 (247.3-370.2) |
| Asian/Pacific | 172 | 1% | 75.7 (64.4-87.1) | 195 | 1% | 85.9 (73.8-97.9) |
| Hispanic | 1,341 | 9% | 186.7 (176.7-196.6) | 1,077 | 8% | 149.9 (141.0-158.9) |
| Other/Unknown | 1,507 | 10% | - | 1302 | 10% | - |
| **Age** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| 0-14 | 27 | 0% | 4.8 (3.0-6.7) | 177 | 1% | 31.7 (27.0-36.3) |
| 15-17 | 214 | 1% | 198.8 (172.1-225.4) | 623 | 5% | 578.7 (533.2-624.1) |
| 18-19 | 140 | 1% | 190.1 (158.6-221.6) | 441 | 3% | 598.8 (542.9-654.7) |
| 20-24 | 324 | 2% | 177.8 (158.4-197.1) | 1,085 | 8% | 595.3 (559.9-630.7) |
| 25-34 | 1,285 | 9% | 340.3 (321.7-359.0) | 2,278 | 17% | 603.4 (578.6-628.1) |
| 35-44 | 2,310 | 16% | 595.7 (571.4-620.0) | 2,349 | 18% | 605.7 (581.2-630.2) |
| 45-54 | 4,075 | 28% | 1,094.9 (1,061.3-1,128.6) | 3,047 | 23% | 818.7 (789.6-847.8) |
| 55-64 | 3,457 | 24% | 1,111.9 (1,074.8-1,148.9) | 1,967 | 15% | 632.6 (604.7-660.6) |
| 65-74 | 1910 | 13% | 922.2 (880.8-963.6) | 814 | 6% | 393.0 (366.0-420.0) |
| 75-84 | 685 | 5% | 715.6 (662.0-769.2) | 372 | 3% | 388.6 (349.1-428.1) |
| 85+ | 123 | 1% | 385.0 (316.9-453.0) | 139 | 1% | 435.1 (362.7-507.4) |
| **Total** | **14,550** | | **537.7 (529.0-546.5)** | **13,292** | | **491.2 (482.9-499.6)** |

*Source: Hospital Inpatient Billing.*
*Categories are not mutually exclusive.*
*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

## Table 8c. Alcohol and Drug-Related Inpatient Admissions by Year, 2011.

| 2011 | Alcohol | | | Drug Use | | |
|---|---|---|---|---|---|---|
| **Sex** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| Female | 4,721 | 32% | 350.4 (340.4-360.4) | 6,867 | 48% | 509.7 (497.7-497.7) |
| Male | 9,967 | 68% | 725.1 (710.8-739.3) | 7,446 | 52% | 541.7 (529.4-554.0) |
| Unknown | 0 | 0% | - | 0 | 0% | - |
| **Race** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| White | 10,335 | 70% | 684.3 (671.1-697.5) | 9,387 | 66% | 621.5 (608.9-634.1) |
| Black | 1,272 | 9% | 572.5 (541.0-604.0) | 2,056 | 14% | 925.4 (885.4-965.4) |
| Native American | 221 | 2% | 697.0 (605.1-788.9) | 96 | 1% | 302.8 (242.2-363.3) |
| Asian/Pacific | 174 | 1% | 76.2 (64.9-87.5) | 246 | 2% | 107.7 (94.3-121.2) |
| Hispanic | 1,310 | 9% | 179.7 (169.9-189.4) | 1,125 | 8% | 154.3 (145.3-163.3) |
| Other/Unknown | 1,376 | 9% | - | 1403 | 10% | - |
| **Age** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| 0-14 | 38 | 0% | 6.8 (4.6-9.0) | 210 | 1% | 37.5 (32.5-42.6) |
| 15-17 | 178 | 1% | 166.6 (142.1-191.1) | 528 | 4% | 494.2 (452.1-536.4) |
| 18-19 | 141 | 1% | 190.9 (159.4-222.4) | 542 | 4% | 733.8 (672.1-795.6) |
| 20-24 | 392 | 3% | 213.6 (192.5-234.7) | 1,442 | 10% | 785.7 (745.2-826.3) |
| 25-34 | 1,208 | 8% | 322.6 (304.4-340.8) | 2,499 | 17% | 667.3 (641.1-693.5) |
| 35-44 | 2,258 | 15% | 583.4 (559.3-607.4) | 2,348 | 16% | 606.6 (582.1-631.1) |
| 45-54 | 4,026 | 27% | 1,078.9 (1,045.6-1,112.3) | 3,101 | 22% | 831.0 (801.8-860.3) |
| 55-64 | 3,510 | 24% | 1,103.3 (1,066.8-1,139.8) | 2,206 | 15% | 693.4 (664.5-722.4) |
| 65-74 | 2083 | 14% | 981.2 (939.1-1,023.3) | 909 | 6% | 428.2 (400.3-456.0) |
| 75-84 | 716 | 5% | 717.8 (665.2-770.4) | 397 | 3% | 398.0 (358.9-437.2) |
| 85+ | 138 | 1% | 413.0 (344.1-481.9) | 131 | 1% | 392.0 (324.9-459.2) |
| **Total** | **14,688** | | **539.6 (530.9-548.4)** | **14,313** | | **525.9 (517.3-534.5)** |

*Source: Hospital Inpatient Billing.*
*Categories are not mutually exclusive.*
*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

## Table 8d. Alcohol and Drug-Related Inpatient Admissions by Year, 2012.

| 2012 | Alcohol | | | Drug Use | | |
|---|---|---|---|---|---|---|
| **Sex** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| Female | 4,617 | 32% | 339.0 (329.2-348.7) | 7,274 | 48% | 534.0 (521.7-546.3) |
| Male | 9,998 | 68% | 720.3 (706.2-734.4) | 7,843 | 52% | 565.0 (552.5-552.5) |
| Unknown | 0 | 0% | - | 0 | 0% | - |
| **Race** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| White | 10,128 | 69% | 668.8 (655.8-681.8) | 9,823 | 65% | 648.6 (635.8-661.5) |
| Black | 1,320 | 9% | 584.6 (553.1-616.2) | 2,203 | 15% | 975.7 (935.0-1,016.5) |
| Native American | 243 | 2% | 760.8 (665.1-856.4) | 127 | 1% | 397.6 (328.5-466.8) |
| Asian/Pacific | 202 | 1% | 86.7 (74.8-98.7) | 233 | 2% | 100.1 (87.2-112.9) |
| Hispanic | 1,270 | 9% | 170.4 (161.0-179.8) | 1,077 | 7% | 144.5 (135.9-153.1) |
| Other/Unknown | 1,443 | 10% | - | 1638 | 11% | - |
| **Age** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| 0-14 | 37 | 0% | 6.6 (4.5-8.7) | 176 | 1% | 31.4 (26.8-36.0) |
| 15-17 | 191 | 1% | 179.0 (153.6-204.4) | 575 | 4% | 538.9 (494.8-582.9) |
| 18-19 | 118 | 1% | 158.6 (130.0-187.3) | 479 | 3% | 643.9 (586.3-701.6) |
| 20-24 | 435 | 3% | 231.8 (210.0-253.6) | 1,400 | 9% | 746.1 (707.0-785.2) |
| 25-34 | 1,317 | 9% | 353.1 (334.0-372.2) | 2,537 | 17% | 680.2 (653.7-706.7) |
| 35-44 | 2,054 | 14% | 527.0 (504.2-549.8) | 2,436 | 16% | 625.1 (600.2-649.9) |
| 45-54 | 3,914 | 27% | 1,043.2 (1,010.5-1,075.9) | 3,305 | 22% | 880.9 (850.8-910.9) |
| 55-64 | 3,593 | 25% | 1,111.1 (1,074.8-1,147.4) | 2,628 | 17% | 812.7 (781.6-843.8) |
| 65-74 | 2093 | 14% | 938.2 (898.0-978.4) | 1042 | 7% | 467.1 (438.7-495.4) |
| 75-84 | 723 | 5% | 710.5 (658.7-762.3) | 388 | 3% | 381.3 (343.4-419.2) |
| 85+ | 140 | 1% | 404.2 (337.2-471.1) | 150 | 1% | 433.0 (363.7-502.4) |
| **Total** | **14,606** | | **531.1 (522.5-539.7)** | **15,101** | | **549.1 (540.3-557.8)** |

*Source: Hospital Inpatient Billing.*
*Categories are not mutually exclusive.*
*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

## Table 8e. Alcohol and Drug-Related Inpatient Admissions by Year, 2013.

| 2013 | Alcohol | | | Drug Use | | |
|---|---|---|---|---|---|---|
| **Sex** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| Female | 4,801 | 31% | 345.7 (336.0-355.5) | 7,754 | 47% | 558.4 (546.0-546.0) |
| Male | 10,548 | 69% | 746.8 (732.6-761.1) | 8,596 | 53% | 608.6 (595.8-621.5) |
| Unknown | 1 | 0% | - | 1 | 0% | - |
| **Race** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| White | 10,311 | 67% | 676.9 (663.9-690.0) | 10,294 | 63% | 675.8 (662.8-688.9) |
| Black | 1,449 | 9% | 622.3 (590.3-654.4) | 2,457 | 15% | 1,055.2 (1,013.5-1,097.0) |
| Native American | 347 | 2% | 1,076.0 (962.8-1,189.2) | 291 | 2% | 902.3 (798.7-1,006.0) |
| Asian/Pacific | 171 | 1% | 70.5 (59.9-81.0) | 244 | 1% | 100.6 (88.0-113.2) |
| Hispanic | 1,285 | 8% | 166.9 (157.7-176.0) | 1,127 | 7% | 146.3 (137.8-154.9) |
| Other/Unknown | 1,785 | 12% | - | 1932 | 12% | - |
| **Age** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| 0-14 | 59 | 0% | 10.4 (7.8-13.1) | 237 | 1% | 41.8 (36.5-47.2) |
| 15-17 | 230 | 1% | 213.5 (185.9-241.1) | 567 | 3% | 526.4 (483.1-569.7) |
| 18-19 | 132 | 1% | 177.3 (147.1-207.6) | 407 | 2% | 546.7 (493.6-599.9) |
| 20-24 | 440 | 3% | 227.1 (205.8-248.3) | 1,445 | 9% | 745.7 (707.3-784.2) |
| 25-34 | 1,388 | 9% | 368.2 (348.8-387.6) | 2,890 | 18% | 766.7 (738.7-794.6) |
| 35-44 | 2,035 | 13% | 514.2 (491.9-536.5) | 2,648 | 16% | 669.1 (643.6-694.6) |
| 45-54 | 4,004 | 26% | 1,053.7 (1,021.1-1,086.3) | 3,443 | 21% | 906.1 (875.8-936.3) |
| 55-64 | 3,815 | 25% | 1,149.9 (1,113.5-1,186.4) | 2,864 | 18% | 863.3 (831.7-894.9) |
| 65-74 | 2331 | 15% | 997.5 (957.0-1,038.0) | 1236 | 8% | 528.9 (499.4-558.4) |
| 75-84 | 752 | 5% | 721.1 (669.6-772.7) | 447 | 3% | 428.7 (388.9-468.4) |
| 85+ | 164 | 1% | 455.6 (385.8-525.3) | 167 | 1% | 463.9 (393.5-534.3) |
| **Total** | **15,348** | | **548.0 (539.3-556.6)** | **16,345** | | **583.5 (574.6-592.5)** |

*Source: Hospital Inpatient Billing.*
*Categories are not mutually exclusive.*
*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

## Table 8f. Alcohol and Drug-Related Inpatient Admissions by Year, 2014.

| 2014 | Alcohol | | | Drug Use | | |
|---|---|---|---|---|---|---|
| **Sex** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| Female | 5,151 | 32% | 365.1 (355.1-375.1) | 8,292 | 47% | 587.7 (575.1-600.4) |
| Male | 11,011 | 68% | 768.7 (754.3-783.0) | 9,200 | 53% | 638.5 (625.4-625.4) |
| Unknown | 0 | 0% | - | 0 | 0% | - |
| **Race** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| White | 11,363 | 70% | 743.3 (729.7-757.0) | 11,525 | 66% | 753.9 (740.2-767.7) |
| Black | 1,428 | 9% | 598.0 (567.0-629.0) | 2,673 | 15% | 1,119.4 (1,077.0-1,161.8) |
| Native American | 410 | 3% | 1,264.5 (1,142.1-1,386.9) | 410 | 2% | 1,264.5 (1,142.1-1,386.9) |
| Asian/Pacific | 229 | 1% | 91.3 (79.4-103.1) | 226 | 1% | 90.1 (78.3-101.8) |
| Hispanic | 1,430 | 9% | 180.4 (171.1-189.8) | 1,258 | 7% | 158.7 (150.0-167.5) |
| Other/Unknown | 1,302 | 8% | - | 1400 | 8% | - |
| **Age** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| 0-14 | 34 | 0% | 5.9 (3.9-7.9) | 181 | 1% | 31.7 (27.1-36.3) |
| 15-17 | 197 | 1% | 180.7 (155.5-205.9) | 482 | 3% | 442.1 (402.6-481.6) |
| 18-19 | 128 | 1% | 175.0 (144.7-205.4) | 427 | 2% | 583.9 (528.5-639.3) |
| 20-24 | 425 | 3% | 215.0 (194.6-235.4) | 1,528 | 9% | 773.0 (734.2-811.8) |
| 25-34 | 1,486 | 9% | 389.4 (369.6-409.2) | 3,085 | 18% | 808.5 (779.9-837.0) |
| 35-44 | 2,274 | 14% | 569.2 (545.8-592.5) | 2,815 | 16% | 704.6 (678.5-730.6) |
| 45-54 | 4,084 | 25% | 1,058.5 (1,026.0-1,091.0) | 3,554 | 20% | 921.1 (890.9-951.4) |
| 55-64 | 4,171 | 26% | 1,233.8 (1,196.3-1,271.2) | 3,185 | 18% | 942.1 (909.4-974.8) |
| 65-74 | 2432 | 15% | 1,005.6 (965.6-1,045.5) | 1577 | 9% | 652.0 (619.9-684.2) |
| 75-84 | 768 | 5% | 709.9 (659.7-760.1) | 482 | 3% | 445.5 (405.8-485.3) |
| 85+ | 163 | 1% | 442.0 (374.2-509.9) | 176 | 1% | 477.3 (406.8-547.8) |
| **Total** | **16,162** | | **568.4 (559.7-577.2)** | **17,492** | | **615.2 (606.1-624.3)** |

*Source: Hospital Inpatient Billing.*
*Categories are not mutually exclusive.*
*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

## Table 8g. Alcohol and Drug-Related Inpatient Admissions by Year, 2015.

| 2015 | Alcohol | | | Drug Use | | |
|---|---|---|---|---|---|---|
| **Sex** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| Female | 6,044 | 32% | 419.5 (408.9-430.0) | 10,518 | 45% | 730.0 (716.0-716.0) |
| Male | 13,056 | 68% | 896.2 (880.9-911.6) | 12,958 | 55% | 889.5 (874.2-904.8) |
| Unknown | 1 | 0% | - | 1 | 0% | - |
| **Race** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| White | 13,298 | 70% | 868.6 (853.9-883.4) | 14,893 | 63% | 972.8 (957.2-988.4) |
| Black | 1,958 | 10% | 792.0 (756.9-827.1) | 3,897 | 17% | 1,576.3 (1,526.8-1,625.8) |
| Native American | 600 | 3% | 1,760.8 (1,619.9-1,901.7) | 705 | 3% | 2,069.0 (1,916.3-2,221.7) |
| Asian/Pacific | 240 | 1% | 90.3 (78.9-101.7) | 342 | 1% | 128.6 (115.0-142.3) |
| Hispanic | 1,654 | 9% | 201.8 (192.1-211.5) | 1,782 | 8% | 217.4 (207.3-227.5) |
| Other/Unknown | 1,351 | 7% | - | 1858 | 8% | - |
| **Age** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| 0-14 | 40 | 0% | 6.8 (4.7-8.9) | 255 | 1% | 43.5 (38.2-48.9) |
| 15-17 | 154 | 1% | 134.2 (113.0-155.4) | 511 | 2% | 445.3 (406.7-483.9) |
| 18-19 | 105 | 1% | 141.4 (114.3-168.4) | 453 | 2% | 609.9 (553.7-666.1) |
| 20-24 | 561 | 3% | 283.1 (259.7-306.5) | 2,030 | 9% | 1,024.5 (979.9-1,069.0) |
| 25-34 | 2,090 | 11% | 526.9 (504.3-549.5) | 4,870 | 21% | 1,227.8 (1,193.3-1,262.3) |
| 35-44 | 2,765 | 14% | 693.3 (667.4-719.1) | 4,119 | 18% | 1,032.7 (1,001.2-1,064.3) |
| 45-54 | 4,808 | 25% | 1,240.3 (1,205.2-1,275.4) | 4,694 | 20% | 1,210.9 (1,176.3-1,245.5) |
| 55-64 | 4,871 | 26% | 1,415.3 (1,375.5-1,455.0) | 3,919 | 17% | 1,138.7 (1,103.0-1,174.3) |
| 65-74 | 2719 | 14% | 1,094.4 (1,053.2-1,135.5) | 1814 | 8% | 730.1 (696.5-763.7) |
| 75-84 | 823 | 4% | 735.4 (685.1-785.6) | 614 | 3% | 548.6 (505.2-592.0) |
| 85+ | 165 | 1% | 442.9 (375.3-510.4) | 198 | 1% | 531.4 (457.4-605.5) |
| **Total** | **19,101** | | **659.2 (649.8-668.5)** | **23,477** | | **810.2 (799.8-820.6)** |

*Source: Hospital Inpatient Billing.*
*Categories are not mutually exclusive.*
*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

## Table 8h. Alcohol and Drug-Related Inpatient Admissions by Year, 2016.

| 2016 | Alcohol | | | Drug Use | | |
|---|---|---|---|---|---|---|
| **Sex** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| Female | 6,388 | 32% | 434.5 (423.8-445.1) | 12,399 | 45% | 843.3 (828.5-858.2) |
| Male | 13,749 | 68% | 927.0 (911.5-942.5) | 15,061 | 55% | 1,015.5 (999.3-999.3) |
| Unknown | 1 | 0% | - | 0 | 0% | - |
| **Race** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| White | 14,028 | 70% | 911.1 (896.0-926.2) | 17,354 | 63% | 1,127.1 (1,110.3-1,143.9) |
| Black | 2,103 | 10% | 825.0 (789.7-860.2) | 4,609 | 17% | 1,808.0 (1,755.8-1,860.2) |
| Native American | 333 | 2% | 969.3 (865.2-1,073.5) | 295 | 1% | 858.7 (760.7-956.7) |
| Asian/Pacific | 267 | 1% | 96.5 (84.9-108.1) | 432 | 2% | 156.1 (141.4-170.8) |
| Hispanic | 1,869 | 9% | 220.5 (210.5-230.5) | 2,279 | 8% | 268.8 (257.8-279.9) |
| Other/Unknown | 1,538 | 8% | - | 2491 | 9% | - |
| **Age** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| 0-14 | 50 | 0% | 8.5 (6.1-10.8) | 259 | 1% | 43.9 (38.5-49.2) |
| 15-17 | 152 | 1% | 128.4 (108.0-148.8) | 593 | 2% | 501.0 (460.7-541.4) |
| 18-19 | 91 | 0% | 119.3 (94.8-143.8) | 499 | 2% | 654.3 (596.9-711.7) |
| 20-24 | 621 | 3% | 310.0 (285.6-334.4) | 2,312 | 8% | 1,154.2 (1,107.2-1,201.2) |
| 25-34 | 2,320 | 12% | 569.7 (546.5-592.8) | 5,690 | 21% | 1,397.1 (1,360.8-1,433.4) |
| 35-44 | 3,024 | 15% | 749.6 (722.9-776.3) | 4,746 | 17% | 1,176.5 (1,143.0-1,209.9) |
| 45-54 | 4,901 | 24% | 1,241.9 (1,207.1-1,276.6) | 5,314 | 19% | 1,346.5 (1,310.3-1,382.7) |
| 55-64 | 4,930 | 24% | 1,400.7 (1,361.6-1,439.8) | 4,643 | 17% | 1,319.2 (1,281.2-1,357.1) |
| 65-74 | 2957 | 15% | 1,161.5 (1,119.6-1,203.3) | 2300 | 8% | 903.4 (866.5-940.3) |
| 75-84 | 912 | 5% | 774.2 (723.9-824.4) | 840 | 3% | 713.0 (664.8-761.3) |
| 85+ | 180 | 1% | 471.8 (402.9-540.7) | 264 | 1% | 692.0 (608.5-775.4) |
| **Total** | **20,138** | | **681.9 (672.4-691.3)** | **27,460** | | **929.8 (918.8-940.8)** |

*Source: Hospital Inpatient Billing.*
*Categories are not mutually exclusive.*
*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

## Table 8i. Alcohol and Drug-Related Inpatient Admissions by Year, 2017.

| 2017 | Alcohol | | | Drug Use | | |
|---|---|---|---|---|---|---|
| **Sex** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| Female | 6,106 | 31% | 410.5 (400.2-420.8) | 13,631 | 44% | 916.4 (901.0-901.0) |
| Male | 13,283 | 69% | 886.9 (871.8-902.0) | 16,998 | 55% | 1,134.9 (1,117.9-1,152.0) |
| Unknown | 1 | 0% | - | 3 | 0% | - |
| **Race** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| White | 13,430 | 69% | 870.6 (855.9-885.3) | 19,257 | 63% | 1,248.3 (1,230.7-1,265.9) |
| Black | 1,914 | 10% | 738.2 (705.1-771.3) | 5,205 | 17% | 2,007.5 (1,953.0-2,062.1) |
| Native American | 318 | 2% | 919.9 (818.8-1,021.0) | 333 | 1% | 963.3 (859.8-1,066.8) |
| Asian/Pacific | 259 | 1% | 91.8 (80.6-103.0) | 476 | 2% | 168.8 (153.6-183.9) |
| Hispanic | 1,688 | 9% | 194.8 (185.5-204.1) | 2,398 | 8% | 276.7 (265.6-287.8) |
| Other/Unknown | 1,781 | 9% | - | 2963 | 10% | - |
| **Age** | **N** | **%** | **Crude Rate (CI)** | **N** | **%** | **Crude Rate (CI)** |
| 0-14 | 50 | 0% | 8.4 (6.1-10.8) | 285 | 1% | 48.1 (42.5-53.7) |
| 15-17 | 139 | 1% | 116.3 (96.9-135.6) | 627 | 2% | 524.5 (483.4-565.6) |
| 18-19 | 103 | 1% | 131.6 (106.2-157.0) | 525 | 2% | 670.8 (613.4-728.2) |
| 20-24 | 470 | 2% | 236.9 (215.5-258.3) | 2,320 | 8% | 1,169.3 (1,121.7-1,216.9) |
| 25-34 | 2,112 | 11% | 508.4 (486.7-530.0) | 6,382 | 21% | 1,536.1 (1,498.4-1,573.8) |
| 35-44 | 3,036 | 16% | 748.7 (722.1-775.4) | 5,337 | 17% | 1,316.2 (1,280.9-1,351.5) |
| 45-54 | 4,541 | 23% | 1,146.8 (1,113.5-1,180.2) | 5,790 | 19% | 1,462.3 (1,424.6-1,499.9) |
| 55-64 | 5,053 | 26% | 1,415.5 (1,376.5-1,454.6) | 5,311 | 17% | 1,487.8 (1,447.8-1,527.8) |
| 65-74 | 2810 | 14% | 1,080.2 (1,040.2-1,120.1) | 2754 | 9% | 1,058.6 (1,019.1-1,098.2) |
| 75-84 | 903 | 5% | 729.8 (682.2-777.4) | 1007 | 3% | 813.8 (763.6-864.1) |
| 85+ | 173 | 1% | 441.9 (376.1-507.8) | 294 | 1% | 751.0 (665.2-836.8) |
| **Total** | **19,390** | | **649.5 (640.4-658.7)** | **30,632** | | **1,026.1 (1,014.6-1,037.6)** |

*Source: Hospital Inpatient Billing.*
*Categories are not mutually exclusive.*
*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable.*

## Table 9. Specific Drug-Related Emergency Department Encounters, Nevada Residents, 2009-2017.

| | Opioid | | Heroin | | Methamphetamines and Marijuana | | Cocaine | |
|---|---|---|---|---|---|---|---|---|
| Year | N. | % of Drug Visits | N. | % of Drug Visits | N. | % of Drug Visits | N. | % of Drug Visits |
| 2009 | 3,799 | 30% | 41 | 0% | 2,117 | 17% | 1,794 | 14% |
| 2010 | 4,283 | 32% | 70 | 1% | 2,331 | 18% | 1,521 | 11% |
| 2011 | 4,339 | 30% | 63 | 0% | 2,596 | 18% | 1,401 | 10% |
| 2012 | 4,672 | 31% | 53 | 0% | 3,076 | 20% | 1,332 | 9% |
| 2013 | 4,689 | 29% | 86 | 1% | 3,688 | 23% | 1,456 | 9% |
| 2014 | 5,206 | 30% | 69 | 0% | 4,159 | 24% | 1,458 | 8% |
| 2015 | 6,844 | 29% | 167 | 1% | 6,917 | 29% | 1,886 | 8% |
| 2016 | 8,897 | 32% | 409 | 1% | 8,109 | 30% | 1,869 | 7% |
| 2017 | 8,918 | 29% | 402 | 1% | 9,331 | 30% | 1,926 | 6% |

*Source: Hospital Emergency Room Discharge.*

*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable. Categories are not mutually exclusive.*

**Table 10. Specific Drug-Related Inpatient Admissions, Nevada Residents, 2009-2017.**

| Year | Opioid | | Heroin | | Methamphetamines and Marijuana | | Cocaine | |
|---|---|---|---|---|---|---|---|---|
| | N. | % of Drug Visits | N. | % of Drug Visits | N. | % of Drug Visits | N. | % of Drug Visits |
| 2009 | 2,696 | 18% | 142 | 1% | 2,478 | 17% | 1,714 | 12% |
| 2010 | 2,912 | 18% | 144 | 1% | 2,793 | 17% | 1,563 | 10% |
| 2011 | 3,130 | 18% | 178 | 1% | 3,084 | 18% | 1,528 | 9% |
| 2012 | 3,397 | 18% | 166 | 1% | 3,439 | 19% | 1,353 | 7% |
| 2013 | 4,003 | 17% | 176 | 1% | 5,113 | 22% | 1,403 | 6% |
| 2014 | 4,440 | 15% | 247 | 1% | 5,848 | 20% | 1,240 | 4% |
| 2015 | 5,653 | 17% | 353 | 1% | 8,265 | 24% | 1,703 | 5% |
| 2016 | 7,703 | 19% | 387 | 1% | 11,727 | 29% | 2,003 | 5% |
| 2017 | 7,310 | 19% | 366 | 1% | 11,831 | 31% | 2,138 | 6% |

*Source: Hospital Inpatient Billing.*

*ICD-9-CM codes were replaced by ICD-10-CM codes in last quarter of 2015, therefore data prior to that may not be directly comparable. Categories are not mutually exclusive.*

## Table 11. Prevalence Estimates of Health Risk Behaviors, by Sexual Orientation, Nevada Adults, 2015-2016.

| 2015 | LGB (%) | Non-LGB (%) | Difference |
|---|---|---|---|
| Binge Drinking | 19.70% | 14.20% | Not significantly different |
| General Health fair or poor | 33.90% | 17.40% | Not significantly different |
| Ever told had depressive disorder | 37.60% | 17.10% | Significantly higher |
| Ten or more days of poor mental health | 31.80% | 14.10% | Significantly higher |
| Ten or more days of poor mental or physical health kept you from usual activities | 21.70% | 16.20% | Not significantly different |

| 2016 | LGB (%) | Non-LGB (%) | Difference |
|---|---|---|---|
| Binge Drinking | 33.20% | 14.40% | Significantly higher |
| General Health fair or poor | 22.70% | 21.10% | Not significantly different |
| Ever told had depressive disorder | 37.40% | 16.50% | Significantly higher |
| Ten or more days of poor mental health | 43.50% | 15.30% | Significantly higher |
| Ten or more days of poor mental or physical health kept you from usual activities | 23.30% | 18.60% | Not significantly different |

*Source: Behavioral Risk Factor Surveillance System (BRFSS).*

## Table 13. Prevalence Estimates of Health Risk Behaviors, by Transgender, Nevada Adults, 2016.

| 2016 | *Transgender (%) | Non-Transgender (%) | Difference |
|---|---|---|---|
| Binge Drinking | *22.3% | 15.10% | Not Significantly different |
| General Health fair or poor | *18.7% | 21.40% | Not significantly different |
| Ever told had depressive disorder | *36.7% | 17.30% | Not Significantly different |
| Ten or more days of poor mental health | *32.3% | 16.60% | Not significantly different |
| Ten or more days of poor mental or physical health kept you from usual activities | *16.3% | 18.80% | Not significantly different |

*Source: Behavioral Risk Factor Surveillance System (BRFSS).*
**Count are small and may not be reliable.*