



College of Engineering
UNIVERSITY OF WISCONSIN-MADISON

People suffer from injury and disease. They also suffer from poorly designed care delivery systems. We want to eliminate that second type of suffering.
No one should have to suffer twice!

- David H. Gustafson, Ph.D., Center Director

NIATx 200 was a five-year, randomized trial funded by the National Institute on Drug Abuse (NIDA) and administrated by the Center for Health Enhancement Systems Studies (CHESS) on the campus of the University of Wisconsin-Madison. This project selected five states—Massachusetts, Michigan, New York, Oregon, Washington, and 201 addiction treatment providers—to participate in the largest quality improvement study conducted in health care. NIATx 200 research focused on implementing changes to business processes that improved efficiency and cost-effectiveness while increasing access to and retention in substance abuse treatment.

Process improvement experts believe that 85 percent of service problems are process related. The NIATx model is founded on the conviction that improving processes results in better service.

NIATx 200 employs four interventions—website, interest circle calls (teleconferences and webinars that focus on specific project-related goals), coaching, and learning sessions—to help agencies improve their processes. NIATx 200 research aims to examine the relative cost and effectiveness of each intervention in helping providers to implement and sustain process improvements within NIATx aims: decrease wait times and no-show rates, and increase admissions and continuation rates.

During the NIATx 200 project, **TK** Oregon treatment provider sites representing **TK** unique organizations participated in one of four research arms. Participating Oregon treatment agencies made impressive changes. What follows are a few examples of their stories.

[LifeWorks NorthWest—Hillsboro's](#) changes created an increase in client retention, almost doubled their revenue for contract services, and increased their fee-for-service from the previous year.

[Emergence Addiction and Behavioral Therapies](#) in Eugene improved their intake questionnaire to help assessments move smoothly. As a result, the average wait-time for intake appointments decreased from 12.25 days to 6.4 days, and no-show rates for first appointments decreased by 10 percent.

[BestCare Treatment Services](#) in Oregon City increased admissions and expects a 60 percent increase in revenue.

[Click here for more stories from Oregon participants.](#)