



# Substance Use Disorder Cascade of Care at Denver Health - 2025

## About This Report

*Purpose: To provide context for how the data in this report were generated and how they should be interpreted.*

Reliable measurement is an essential foundation for improving care. This report represents an effort by the Center for Addiction Medicine’s (CAM) Knowledge Management Workgroup to better understand and monitor substance use disorder (SUD) care across the Denver Health system.

To do this, our workgroup developed methods to identify patients with SUD using indicators beyond diagnosis codes, including medications, self-reported questionnaires, and laboratory results. We also developed definitions to measure access to SUD treatment and retention in treatment. Using these methods, we analyzed five years of electronic health record data to describe care for three SUDs at Denver Health in the most recent year and to examine trends over time.

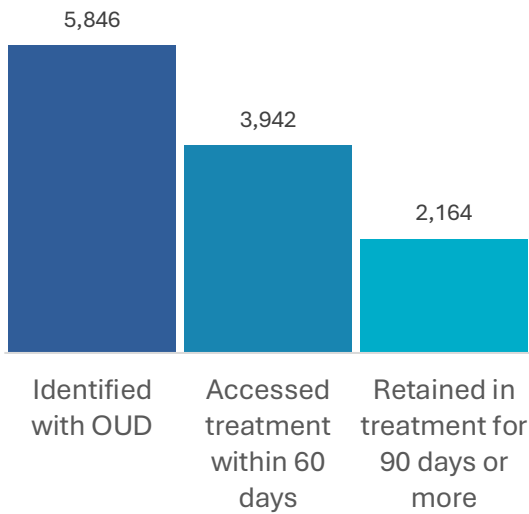
This report is intended to provide insight into the current state of SUD care within Denver Health and to support ongoing quality improvement efforts. When interpreting the findings, readers should consider the following:

- **Health system–specific data:** These findings reflect care delivered within a single health system and may not represent national, state, or local trends.
- **Measurement approach:** The identification methods and treatment definitions used in this report were developed to leverage available electronic health record data and may differ from those used in other reports or studies.
- **Use for improvement:** These data are most valuable for identifying opportunities for quality improvement and monitoring changes in care delivery over time.
- **Trends may reflect system changes:** Clinical practices and operational improvements within Denver Health may influence the trends presented.

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## Opioid Use Disorder (OUD) Cascade of Care at Denver Health 2025 Snapshot

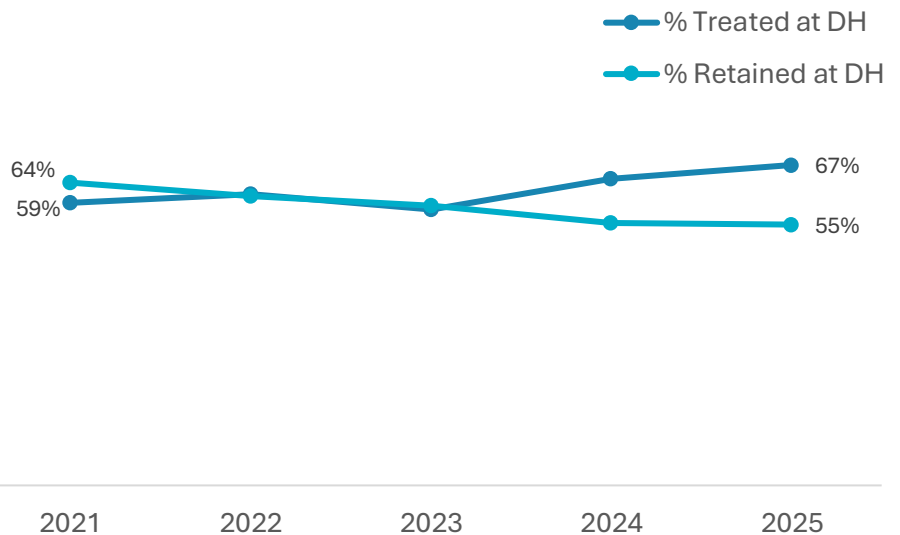


- **5,846** patients were identified with opioid use disorder (OUD) at Denver Health in 2025.
- **67%** of patients with OUD received some form of treatment within 60 days of identification.
  - Among patients identified with OUD at Denver Health, 50% received medications (buprenorphine or methadone) and 54% received behavioral health treatment.
- **55%** of patients receiving any type of OUD treatment at Denver Health were retained in treatment for 90 days or more.

### 5-year trends in the percent of patients with OUD treated and retained in care at Denver Health

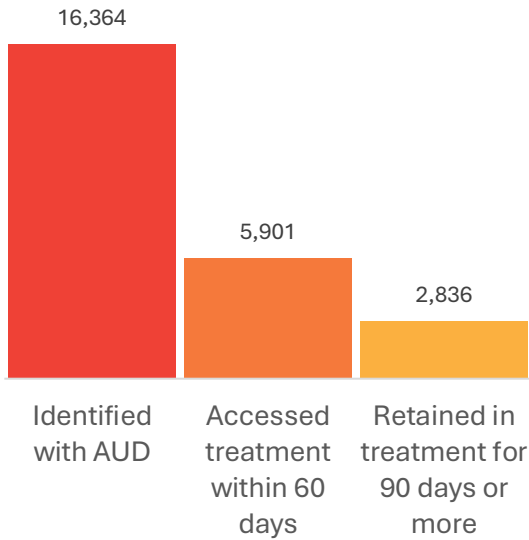
Between 2021 and 2025:

- The number of patients identified with OUD at Denver Health **increased by 18%**, from 4,949 in 2021 to 5,846 in 2025.
- The percentage of patients with OUD accessing treatment at Denver Health **increased by 8%** (from 59% to 67%). This represents a total increase of 1,001 patients accessing treatment.
- The percentage of patients who were retained in treatment **decreased by 9%** (64% to 55%). However, due to the overall increase in patients accessing treatment at DH, the number of patients retained in care increased by 290 patients.



## Alcohol Use Disorder (AUD) Cascade of Care at Denver Health

### 2025 Snapshot

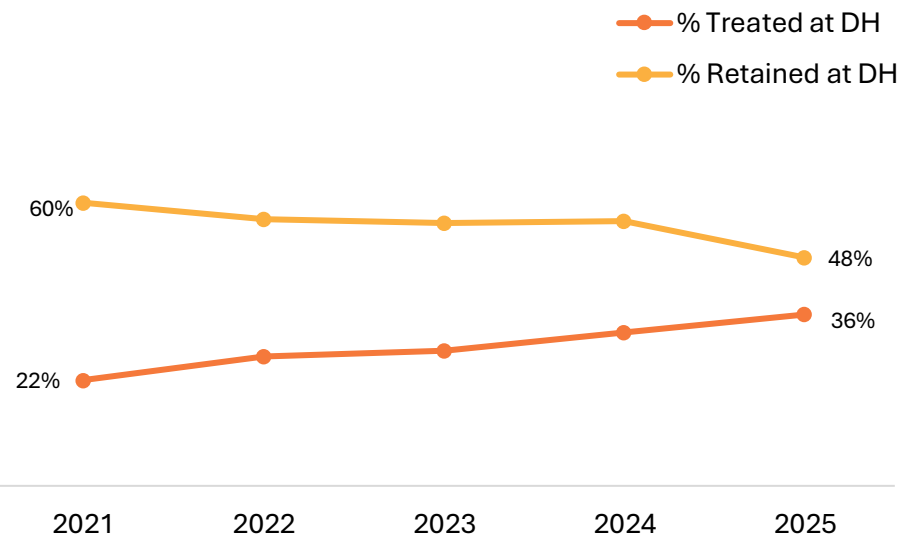


- **16,364** patients were identified with alcohol use disorder (AUD) at Denver Health in 2025.
- **36%** of patients with AUD accessed some form of treatment within 60 days of identification.
  - Among patients identified with AUD at Denver Health, 9% received medications for AUD and 34% received behavioral health treatment.
- **48%** of patients receiving any type of AUD treatment at Denver Health were retained in treatment for 90 days or more.

### 5-year trends in the percent of patients with AUD treated and retained in care at Denver Health

Between 2021 and 2025:

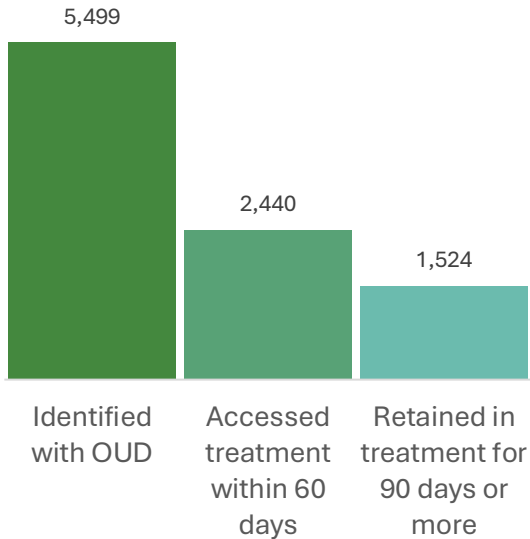
- The number of patients identified with AUD at Denver Health **decreased by 4%**, from 17,009 in 2021 to 16,364 in 2025.
- The percentage of patients with AUD accessing treatment at Denver Health **increased by 14%**



(from 22% to 36%). This represents a total increase of 2,113 patients accessing treatment.

- The percentage of patients who were retained in treatment **decreased by 12%** (60% to 48%). However, due to the overall increase in patients accessing treatment at DH, the number of patients retained in care increased by 579 patients.

## Stimulant Use Disorder (StUD) Cascade of Care at Denver Health 2025 Snapshot

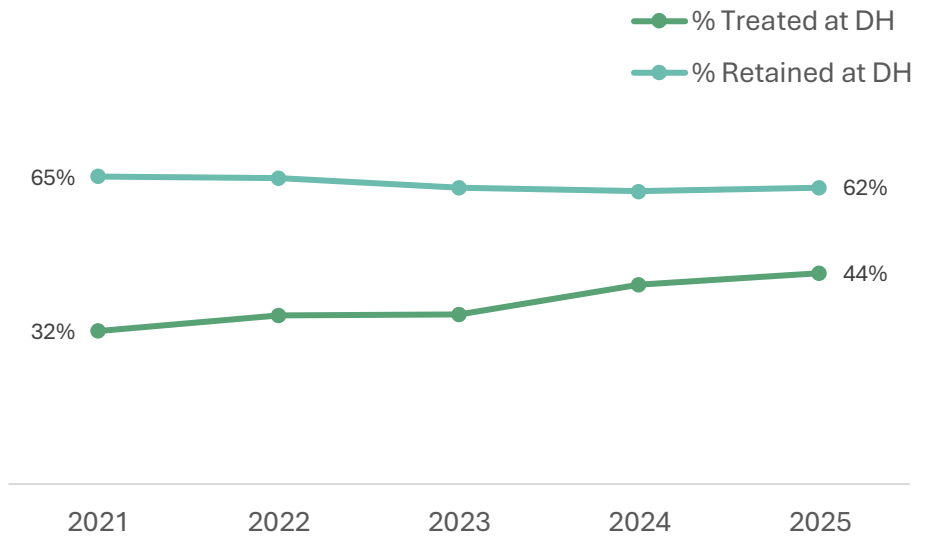


- **5,499** patients were identified with stimulant use disorder (StUD) at Denver Health in 2025.
- **44%** of patients with StUD received behavioral health treatment within 60 days of identification.
- **62%** of patients receiving treatment at Denver Health were retained in treatment for 90 days or more.

### 5-year trends in the percent of patients with StUD treated and retained in care at Denver Health

Between 2021 and 2025:

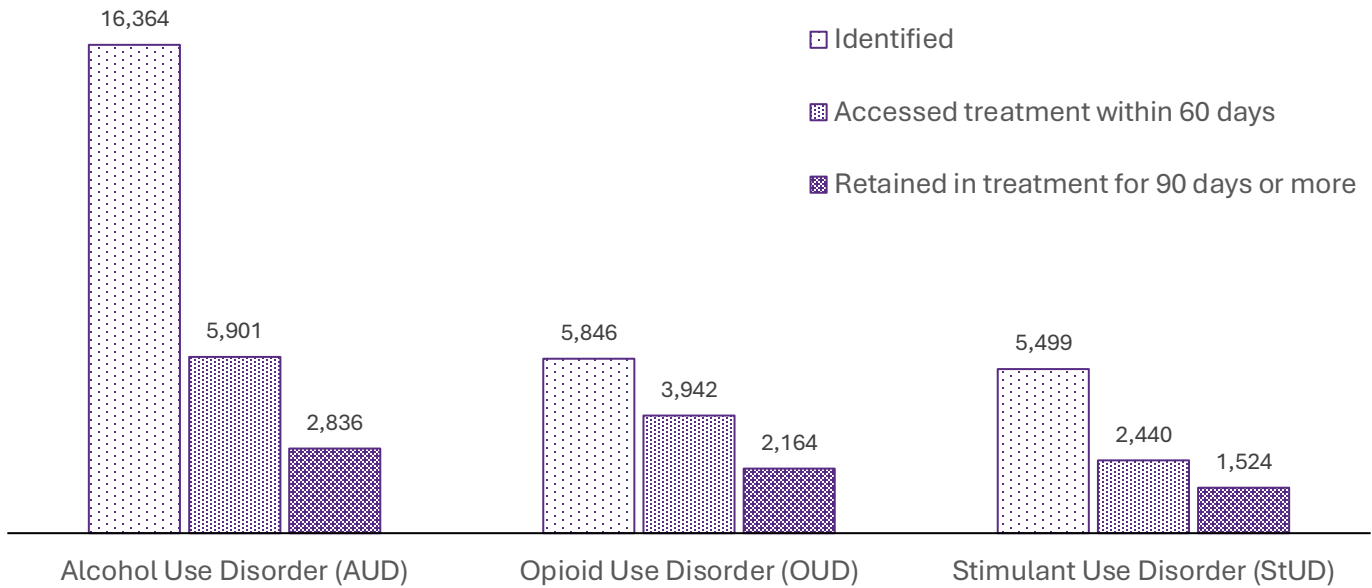
- The number of patients identified with StUD at Denver Health **stayed stable** (5,543 in 2021 to 5,499 in 2025).
- The percentage of patients with StUD accessing treatment at Denver Health **increased by 12%** (from 32% to 44%). This represents a total increase of 655 patients accessing treatment.



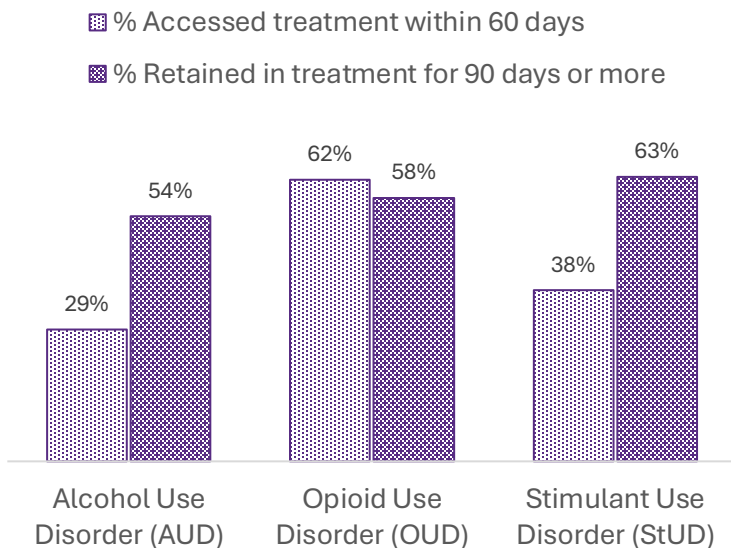
- The percentage of patients who were retained in treatment **decreased by 3%** (65% to 62%). However, due to the overall increase in patients accessing treatment at DH, the number of patients retained in care increased by 369 patients.

## Comparison of Alcohol, Opioid, and Stimulant Cascades of Care at Denver Health 2025 Snapshot

In 2025, there were nearly three times as many patients with alcohol use disorder (AUD) than opioid use disorder (OUD) or stimulant use disorder (StUD).



### Average Treatment & Retention Percentage by Substance, 2021-2025



- Patients with AUD and StUD had lower rates of accessing treatment within 60 days of being identified compared with OUD (**29%** and **38%**, respectively).
- Patients with OUD had the highest treatment engagement (**62%**).
- Treatment retention was comparable across substance use disorders, with the highest treatment retention among patients with StUD (**63%**).

## Definitions

Concept	Opioid Use Disorder (OUD) Definition	Alcohol Use Disorder (AUD) Definition	Stimulant Use Disorder (StUD) Definition
<b>Identification</b>	<p>Patients were identified to have OUD if their electronic health record included any of the following:</p> <ul style="list-style-type: none"> <li>- an encounter, billing, or problem list diagnosis mapping to ICD-10-CM codes beginning with F11 (excluding remission codes) or T40;</li> <li>- a recorded Clinical Opioid Withdrawal Scale (COWS) score;</li> <li>- an order, administration, prescription fill, or opioid treatment program (OTP) dispense of non-pain formulations of buprenorphine or methadone.</li> </ul>	<p>Patients were identified to have AUD if their electronic health record included any of the following:</p> <ul style="list-style-type: none"> <li>- an encounter, billing, or problem list diagnosis mapping to ICD-10-CM codes beginning with F10 (excluding remission codes);</li> <li>- a recorded Severity of Ethanol Withdrawal Scale (SEWS) score;</li> <li>- a positive screen on the Alcohol, Smoking and Substance Involvement Screening Test (ASSIST) section for alcohol or Alcohol Use Disorders Identification Test – Consumption (AUDIT-C);</li> <li>- a medication order associated with an F10 diagnosis code for naltrexone, disulfiram, acamprosate, topiramate, or gabapentin.</li> </ul>	<p>Patients were identified to have StUD if their electronic health record included any of the following:</p> <ul style="list-style-type: none"> <li>- an encounter, billing, or problem list diagnosis mapping to ICD-10-CM codes beginning with F15 (excluding remission codes) or otherwise known to involve amphetamine;</li> <li>- a positive confirmatory laboratory test for methamphetamine;</li> <li>- a positive screen on the Alcohol, Smoking and Substance Involvement Screening Test (ASSIST) methamphetamine section;</li> <li>- other recent and frequent self-reported use of methamphetamine.</li> </ul>
<b>Access to Medication Treatment</b>	<p>Patients identified as having OUD were considered to have accessed medication treatment if, within 60 days of the identifying event, they had an administration, prescription fill, or OTP dispense of non-pain formulations of buprenorphine or methadone.</p>	<p>Patients identified as having AUD were considered to have accessed medication treatment if, within 60 days of the identifying event, they had an administration or prescription fill of naltrexone, disulfiram, acamprosate, topiramate, or gabapentin with an F10 diagnosis code on the order or visit.</p>	
<b>Access to Behavioral Health Treatment</b>	<p>Patients identified as having a SUD were considered to have accessed behavioral health treatment if, within 60 days of the identifying event, they had a visit with a billing code, reason for visit, appointment code, or other indicator of behavioral health services.</p>		
<b>Retention in Medication Treatment</b>	<p>Patients who accessed medication treatment were considered retained if they had 90 days of continuous medication coverage without gaps of 30 days or more.</p>		
<b>Retention in Behavioral Health Treatment</b>	<p>Patients who accessed behavioral health treatment were considered retained if they had at least one additional behavioral health visit within 90 days of the initial treatment visit.</p>		