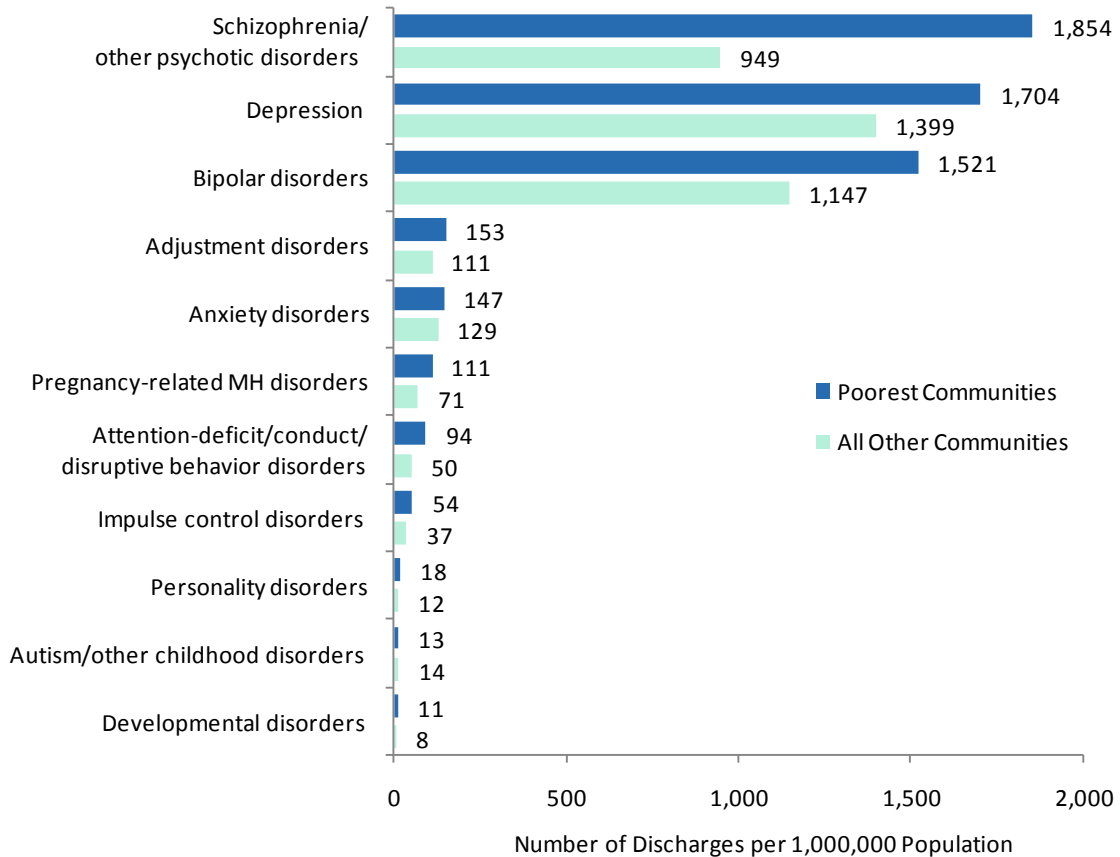


EXHIBIT 5.11 Inpatient Discharges for MH and SA Conditions by Community Income

MH Discharges per 1,000,000 Population in the Poorest Communities,* 2008

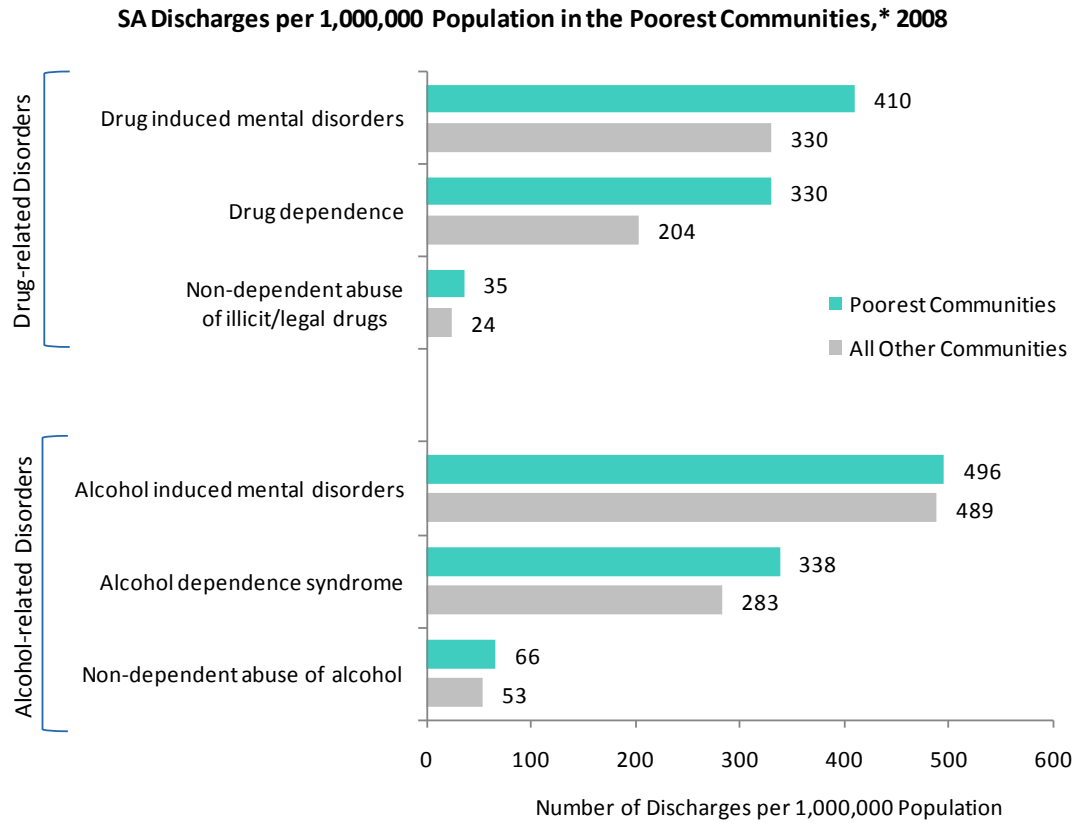


* The poorest communities are defined by ZIP code and have median household income of less than \$39,000.

Source: AHRQ, Center for Delivery, Organization, and Markets, Healthcare Cost and Utilization Project, Nationwide Inpatient Sample, 2008.

- In 2008, persons living in the poorest communities experienced MH hospitalization rates 44 percent higher than those living in higher income communities—5,753 stays per million population, compared to 3,995 stays in higher income communities. In comparison, persons residing in the poorest communities had a 21-percent higher hospitalization rate for all diagnoses.
 - Hospitalizations for schizophrenia/other psychotic disorders for residents in the poorest communities occurred at almost twice the rate of all other communities (1,854 and 949 discharges per million, respectively).
 - Similarly, discharge rates were significantly higher in the poorest communities compared to all other communities for:
 - bipolar disorders (1,521 discharges per million in the poorest communities, 33 percent higher),
 - pregnancy-related MH disorders (111 discharges per million, 57 percent higher),
 - attention-deficit/conduct/disruptive behavior disorders (94 discharges per million, 87 percent higher), and
 - personality disorders (18 discharges per million, 46 percent higher).

- There is no relationship between community income and hospitalization rates for depression, adjustment disorders, anxiety disorders, impulse control disorders, autism and other childhood disorders, and developmental disorders.⁸



* The poorest communities are defined by ZIP code and have median household income of less than \$39,000.

Source: AHRQ, Center for Delivery, Organization, and Markets, Healthcare Cost and Utilization Project, Nationwide Inpatient Sample, 2008.

For SA conditions, persons residing in the poorest communities experienced similar rates of hospitalizations as persons residing in higher income communities.⁹

- The rate of hospital stays for non-dependent abuse of illicit or legal drugs was higher among residents of the poorest communities (35 discharges per million) than it was among residents of all other communities (24 discharges per million). However, the rate of hospitalizations for this diagnosis was very small.
- Patients residing in the poorest communities experienced a higher rate of non-dependent abuse of alcohol (66 discharges per million compared to 53 discharges per million in all other communities).
- Drug-induced mental disorders and drug dependence were reasons for the largest number of drug-related hospitalizations in 2008. The rates of hospitalization in the poorest and all other communities were similar for both conditions.¹⁰
- Hospital stays for alcohol induced mental disorders and alcohol dependence syndrome were the most frequent alcohol-related reasons for hospitalizations in 2008. Community income was unrelated to hospitalization rates for these conditions.¹¹

⁸ Differences in discharge rates for the poorest and all other communities are not statistically significant at $p < .05$.

⁹ Differences in discharge rates for the poorest and all other communities are not statistically significant at $p < .05$.

¹⁰ Differences in discharge rates for the poorest and all other communities are not statistically significant at $p < .05$.

¹¹ Differences in discharge rates for the poorest and all other communities are not statistically significant at $p < .05$.