

FY 2027 Budget Performance Review
45200 Department of Mental Health and Substance Abuse Services

Version Original
Lead Administrator: Interim-Commissioner Admiral Gregory Slavonic

Date submitted
Lead Financial Officer: Benjamin Scott

10/1/2025

Agency Mission

The mission of the Oklahoma Department of Mental Health and Substance Abuse Services is to promote healthy communities and provide the highest quality care to enhance the well-being of all Oklahomans.

Division and Program Descriptions

Note: Please define any acronyms used in program descriptions.

Administration

Central Administration provides essential leadership, oversight, and support across the agency. In addition to offering administration, direction, planning, and technical assistance to both state-operated facilities and contract providers, Central Administration is responsible for setting statewide standards, policies, and goals for mental health and substance use programs, ensuring compliance through continuous monitoring and evaluation. The division also manages critical business functions including Finance, which oversees budgeting, accounting, and funding allocations; Human Resources, which handles recruitment, employee relations, staff development, and compliance with employment laws; Legal Services, which provides guidance on regulatory compliance, contracts, litigation, and policy interpretation; and Property Management, which is responsible for the oversight, maintenance, and strategic planning of ODMHSAS-owned properties and leased facilities statewide. Central Administration also performs data analysis and maintains systems to track service delivery and client outcomes. Through these combined efforts, Central Administration ensures the effective and efficient operation of the agency's programs and supports high-quality care for all Oklahomans.

Treatment Beds

The Treatment Beds program within the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) provides a comprehensive array of intensive treatment services for individuals experiencing acute mental health crises or severe substance use disorders. These services are designed to ensure timely access to care in the most appropriate setting based on clinical need. The program includes the following key components:

- **Inpatient Psychiatric Hospital Services** – This level of care provides 24-hour medically supervised treatment in specialized psychiatric units for individuals experiencing acute psychiatric symptoms. Services focus on evaluation, rapid stabilization, and active treatment for those whose mental illness presents a danger to themselves or others. The structured environment ensures safety and supports recovery through clinical interventions tailored to individual needs.
- **Community-Based Structured Crisis Care** – Crisis stabilization services offer immediate, short-term behavioral health support in designated facilities for individuals experiencing psychiatric or substance use-related crises. These services include protective supervision, basic supportive care, medical assessment and treatment, medication management, and both non-medical and medically supervised detoxification. Often, individuals in this setting are under emergency detention or transported by law enforcement.
- **Residential Substance Abuse Treatment** – This component delivers intensive, 24/7 therapeutic services in a residential (live-in) environment for individuals with severe substance use disorders. Treatment follows ASAM guidelines and includes individualized care plans, clinical and supportive services, recovery-focused programming, life skills development, and access to mutual support groups to promote sustained recovery.

Together, these services provide a critical continuum of care that supports stabilization, recovery, and safe transition to less intensive levels of treatment across Oklahoma.

Community Based Treatment and Recovery Services

The Community-Based Treatment and Recovery Services program within the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) delivers a broad range of behavioral health services designed to support individuals and families in their own communities. These services aim to prevent crises, promote recovery, reduce involvement with the criminal justice system, and improve overall quality of life. The program includes the following core components:

Child Mental Health – A nationally recognized initiative, the Child Mental Health program serves nearly 5,000 youth and their families across Oklahoma. Targeting children ages 6–18 with serious emotional and behavioral issues, the program delivers measurable outcomes including reduced school suspensions, detentions, law enforcement contacts, self-harm, and suicide attempts, along with significant improvements in functioning. Over 70% of youth entering the program with a clinical impairment demonstrate substantial progress within six months. This component also includes Family Drug Treatment Courts, which focus on treatment and reunification for families affected by substance use, showing strong success in achieving sobriety and restoring family stability.

Children and Transition-Age Youth Services – Designed for youth entering adulthood, these services address the heightened risk of psychiatric symptoms during life transitions. Specialized, evidence-based programs support individuals experiencing early onset mental illness—such as first-episode psychosis—and help them develop skills needed for independence, employment, education, and social integration, supporting long-term recovery and wellbeing.

Gambling Addiction Treatment – As legalized gambling has expanded across Oklahoma, so has the need for dedicated services to address gambling-related disorders. This component funds the screening and treatment of individuals affected by problem gambling, ensuring timely access to care that promotes behavioral health and financial stability.

Outpatient Addiction Treatment – Outpatient services form the front line of Oklahoma's substance use treatment system. These programs offer assessment and evaluation, outpatient detoxification, a variety of therapeutic interventions, recovery support services, housing and employment assistance, and benefit coordination. They serve individuals at various stages of readiness for recovery and provide an accessible, community-based alternative to residential care.

Specialty Courts and Criminal Justice Diversion Programs – These cost-effective alternatives to incarceration—including Drug Courts, Mental Health Courts, and Offender Screening—combine judicial oversight with structured treatment and support. With an annual cost of \$5,000 per participant (compared to \$19,000 for incarceration), drug courts demonstrate dramatically improved outcomes, including reduced recidivism, higher employment and income levels, increased insurance coverage, and restored family relationships. Mental Health Court graduates are nearly 8 times less likely to be incarcerated compared to traditional inmates, and have significantly fewer arrests, jail days, and hospitalizations. Offender Screenings, authorized under 43A O.S. 3-704, are conducted in county jails statewide to assess the treatment needs and recidivism risk of felony offenders. This process identifies diversion opportunities, expedites sentencing, and has saved the state an estimated \$29.6 million by reducing jail days. To date, more than 30,000 individuals have been screened, with over 82% identified as eligible for diversion to treatment programs.

Together, these community-based services form the backbone of ODMHSAS's recovery-oriented system of care, ensuring that Oklahomans receive timely, effective treatment and support in the least restrictive and most appropriate setting possible.

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Prevention Services

The Prevention Services program within the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) focuses on reducing the incidence and impact of substance use, suicide, and mental health challenges through evidence-based strategies and community partnerships. These proactive initiatives are implemented statewide to promote wellness, reduce risk factors, and build resilient individuals and communities. Key components of the program include:

Alcohol, Tobacco, and Other Drug Use Prevention – ODMHSAS contracts with a network of local nonprofit, university, and tribal organizations—known as Regional Prevention Coordinators (RPCs)—to provide data-driven prevention services tailored to local community needs. Operating in 17 regions that cover all 77 counties, RPCs support or establish coalitions that identify local substance use priorities, develop prevention plans, and implement targeted strategies. Statewide efforts include AlcoholEdu, an online course to prevent underage drinking among high school students and their parents, and support for youth leadership initiatives. RPCs also provide Responsible Beverage Sales and Service (RBSS) training in partnership with the ABLE Commission at no cost to alcohol retailers and event hosts. Additionally, ODMHSAS contracts with the ABLE Commission to deliver local law enforcement training, mobilization efforts, and enforcement activities in high-need areas to reduce alcohol-related harm.

Opioid Overdose Prevention – In response to Oklahoma’s opioid crisis, ODMHSAS leads a coordinated statewide initiative encompassing prevention, education, and expanded access to treatment. Efforts include public awareness campaigns, physician education, distribution of naloxone (over 8,000 free kits provided to law enforcement), and the training of officers from nearly 300 agencies to administer this life-saving medication. Partnerships with pharmacies, treatment providers, medical schools, and community organizations have improved access to medication-assisted treatment (MAT) and prevention services across the state. These efforts have contributed to a 43% decline in unintentional prescription opioid overdose deaths (2007–2017) and a 29% reduction in opioid prescribing rates (2013–2017), making Oklahoma one of only 10 states to see a decline in drug overdose death rates from 2016 to 2017.

Suicide Prevention and Mental Health Promotion – The ODMHSAS Office of Suicide Prevention provides comprehensive, statewide services to reduce suicide and support mental health across all age groups. Strategies include suicide screening and intervention, school-based programs, community postvention support, anti-stigma campaigns, and 24/7 crisis hotline services. A major component of this work is Mental Health First Aid (MHFA), an evidence-based training program that equips participants to recognize, respond to, and assist individuals experiencing mental health or substance use issues. MHFA is available for adults, youth, and veterans, and has been shown to increase understanding of mental health conditions, improve early intervention, and expand access to needed services.

Together, these prevention initiatives reflect ODMHSAS’s commitment to reducing risk, promoting resilience, and supporting healthier outcomes for individuals, families, and communities across Oklahoma.

FY'26 Budgeted Department Funding By Source

Dept. #	Department Name	Appropriations	Federal	Revolving	Local ¹	Other ²	Total
10	Central Administration	\$11,512,993	\$2,725,044	\$104,168			\$14,342,205
20	Treatment Beds	\$134,613,527	\$3,712,808	\$44,247,549			\$182,573,884
30	Community Based Treatment & Recovery Services	\$244,814,093	\$41,296,745	\$83,261,207			\$369,372,045
50	Prevention	\$3,193,038	\$9,250,576	\$1,070,000			\$13,513,614
88	IT	\$9,187,008	\$115,387	\$0			\$9,302,395
90	Capital Improvements	\$0	\$0	\$80,000			\$80,000
Total		\$403,320,659	\$57,100,560	\$128,762,924	\$0	\$0	\$589,184,143

1. Please describe source of Local funding not included in other categories:

2. Please describe source(s) and % of total of "Other" funding if applicable for each department:

Balances of Appropriated Funds from Prior Fiscal Years

3-digit Class Fund #	Class Fund Name	GA Bill # and Section #	Fiscal Year of Original Appropriation	Original Appropriation Amount (\$)	Total Expended Amount as of 8/31/2025 (\$)	Balance as of 8/31/2025 (\$)
19501	FY-25 General Appropriations	SB1125 section 87	FY25	\$325,958,911	\$297,818,690	\$28,140,221
24700	FY-25 GA - Mental Health Transport Fund	SB1125 section 87	FY25	\$4,532,573	\$3,916,129	\$616,444
23700	FY-25 GA - County Community Safety Investment Fund	SB1125 section 87	FY25	\$12,500,000	\$4,128,475	\$8,371,525
19402	FY25 - Supplemental	HB2766 Section 147	FY25	\$27,404,758	\$27,238,700	\$166,058
57602	Medicaid Behavioral Health Match - Outpatient Services	SB1125 section 89	FY25	\$7,025,000	\$7,025,000	\$0
19302	Medicaid Behavioral Health Match - Outpatient Services	SB1125 section 88	FY25	\$22,600,000	\$22,600,000	\$0
16501	Medicaid Behavioral Health Match - Outpatient Services	SB1125 section 90	FY25	\$13,775,000	\$11,906,712	\$1,868,288
16302	Alcoholic Beverage Control Fund FY-22	SB1125 section 91	FY25	\$740,913	\$740,913	\$0
<i>Total remaining prior year appropriation balance:</i>						\$39,162,535

Report appropriations that have existing balances from all prior fiscal years at the 3-digit class fund number (i.e. 194, 195). Do not report carryover class funds separately. Include appropriations located in disbursing funds. Report PREP, but not ARPA/SRF, appropriations.

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What changes did the agency make between FY'25 and FY'26?

1.) Are there any services no longer provided because of budget cuts?

No services have been entirely eliminated due to budget cuts; however, the agency has streamlined core services and, when appropriate, redirected consumers to partner organizations better positioned or mandated to meet specific needs.

2.) What services are provided at a higher cost to the user?

None

3.) What services are still provided but with a slower response rate?

No additional changes were made to ODMHSAS service delivery.

4.) Did the agency provide any pay raises that were not legislatively/statutorily required?

Yes. To maintain required staffing levels at our 24/7 facilities, ODMHSAS has made targeted pay adjustments for nursing and direct care positions to remain competitive and meet accreditation standards. While these adjustments were necessary, salaries for 600+ direct inpatient care positions still lag behind those offered by other state agencies for comparable—and in some cases, less demanding—positions. Some salary increases and new positions were implemented under the previous administration; while most have since been addressed, a few remain in place.

Appropriation Increase Review

Appropriation Increase Purpose	Appropriation Increases (Additional to Agency Base Appropriation)			Expenditures	
	FY 2024	FY 2025	Total Amount Received FY 2024-2025	Total Expenditure of Increase as of 6/30/2025	If funds have not been spent, please explain why.
Consent Decree HB2929 Sec. 3		\$4,100,000	\$4,100,000		Funds exhausted, consent decree reserve removed by HB2766 Sec. 148 Less than \$1,000 remain for retro payroll
FY '25 Supplemental HB2766 Sec. 147		\$27,404,758	\$27,404,758		
Total:	\$0	\$31,504,758	\$31,504,758	\$0	

List appropriation increases that the agency has received in the prior two years. List amounts received in each year. Include PREP, but not ARPA/SRF, appropriations.

FY'27 Requested Funding By Department and Source

Dept. #	Department Name	Appropriations	Federal	Revolving	Other ¹	Total	% Change
10	Central Administration	\$11,512,993	\$2,725,044	\$104,168	\$0	\$14,342,205	0.00%
20	Treatment Beds	\$159,613,527	\$3,712,808	\$44,247,549	\$0	\$207,573,884	13.69%
30	Community Based Treatment & Recovery Services	\$276,814,093	\$41,296,745	\$83,261,207	\$0	\$401,372,045	8.66%
50	Prevention	\$3,193,038	\$9,250,576	\$1,070,000	\$0	\$13,513,614	0.00%
88	IT	\$31,687,008	\$115,387	\$0	\$0	\$31,802,395	241.87%
90	Capital Improvements	\$0	\$0	\$80,000	\$0	\$80,000	0.00%
Total		\$482,820,659	\$57,100,560	\$128,762,924	\$0	\$668,684,143	13.49%

1. Please describe source(s) and % of total of "Other" funding for each department:

FY'27 Top Five Incremental Appropriated Funding Increase Requests

Request by Priority	Request Description	Is this a Supplemental Request? (Yes/No)	Timeframe (One-Time or Recurring)	Appropriation Request Increase Amount (\$)
Request 1:	FY26 TXIX Supplemental Request	Yes	Recurring	\$20,000,000
Request 2:	Consent Decree	No	Recurring	\$17,000,000
Request 3:	Title XIX	No	Recurring	\$20,000,000
Request 4:	IT Systems	No	One-Time	\$22,500,000
Request 5:				
Top Five Request Subtotal:				\$79,500,000
Total Increase above FY-26 Budget (including all requests)				\$79,500,000
Difference between Top Five requests and total requests:				\$0

* Capital requests in the table above should be listed in the next table.

What are the agency's top 2-3 capital or technology (one-time) requests, if applicable?

Description of requested increase in order of priority		Total Project Cost (\$)	Needed State Funding for Project (\$)	Submitted to LRCPC? (Yes/No)
Priority 1	IT Modernization	22,500,000.00	\$22,500,000	No
Priority 2				
Priority 3				

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Does the agency has any costs associated with the Pathfinder retirement system and federal employees? If so, please describe the impact.

ODMHSAS is impacted by the DHHS Department of Cost Allocation Services decision to disallow the portion of employer contributions for employees on the new defined contribution (Pathfinder) plan that is remitted to the OPERS defined benefit plan. Currently about 150 FTE is impacted.

* Include the total number of federally funded FTE in the Pathfinder system.

How would the agency be affected by receiving the same appropriation for FY '27 as was received in FY '26? (Flat / 0% change)

A flat appropriation would require the agency to further consolidate contracts and prioritize funding toward only the most essential core services, potentially limiting access to non-mandated preventive and community-based programs.

How would the agency handle a 2% appropriation reduction in FY '27?

A 2% reduction would likely result in reduced service capacity, further contract consolidation, and delays in improvement efforts. The agency would prioritize preserving critical inpatient and crisis services but may need to scale back prevention, outpatient, and support programs.

Is the agency seeking any fee increases for FY '27?

Description of requested increase in order of priority				Fee Increase Request (\$)	Statutory change required? (Yes/No)
Increase 1	Not seeking fee increases				
Increase 2					
Increase 3					

Federal Funds

CFDA	Federal Program Name	Agency Dept. #	FY 26 budget (\$)	FY 25 actuals (\$)	FY 24 actuals (\$)	FY 23 actuals (\$)	FY 25 budgeted FTE (#)
000880000	BHSIS-SMHA	3030166	0	76,456	411,745	0	-
105550001	National School Lunch Program	2002014	0	50,801	50,799	50,801	-
142280000	Comm. Development Block Grants	3030208	0	0	147,645	384,863	-
142380000	Shelter Plus Care	3030152	229,751	307,777	274,559	291,590	-
142670000	Shelter Plus Care	3003027	0	0	46,468	30,720	-
160430000	Veterans Treatment Court Discretionary Grant Prog	3004116	262,201	33,937	21,762	0	-
163200000	Services for Trafficking Victims	3030210	0	72,040	225,212	75,294	1.00
165850000	Drug Court Discretionary Grant Program	multiple	429,509	323,455	565,270	733,457	-
165930000	Residential Substance Abuse Treatment for State Pi	3004080	147,500	136,132	91,741	108,164	-
168120000	CARE Grant	3004066/3004067	388,065	239,372	82,336	3,264	2.00
168270000	Justice Reinvestment Initiative	Grant Ended	0	0	0	71,007	-
206000000	State and Community Highway Safety	Grant Ended	0	0	0	0	-
206160000	National Priority Safety Programs	Grant Ended	0	0	0	32,000	-
210270000	ARPA	9001011/9501022	0	23,966,255	7,551,985	965,029	-
930870000	Enhance Safety of Children Affected by Substance A	3004200/3004201	992,247	1,333,271	1,752,150	1,393,016	2.00
931100000	HRSA	multiple	1,803,863	1,368,395	1,361,899	805,874	-
931500000	Projects for Assistance in Transition from Homeless	3030150	471,336	292,092	288,765	297,718	0.18
931880000	SOS	3004108	0	0	10,751	0	-
932430000	Oklahoma Capacity Grant - SAMSA Projects	multiple	11,113,217	8,627,941	11,633,138	11,013,393	15.93
933230000	Epidemiology and Laboratory Capacity for Infectiou	2003021	0	18,771	50,666	58,692	-
934260000	Improving the health of Americans through Prev an	3004103	0	0	40,499	8,683	-
935570000	Education and Prevention Grants to Reduce Sexual	3030229	0	18,633	0	0	0.75
936230000	OKBCP	3030194	0	0	0	10,688	-
936650000	Emergency Grants to Address Mental and Substanc	multiple	0	0	0	797,758	-
937780000	Medicaid Administrative Claiming	multiple	1,336,235	722,432	766,536	248,254	13.65
937880000	Opioid STR/SOR/SOS	multiple	12,477,818	12,466,037	14,272,318	17,646,830	3.24
938290000	Section 223 Demonstration Programs to Improve C	multiple	0	0	1,009,119	1,025,291	-
939580000	Block Grants for Community Mental Health Service:	multiple	10,796,895	13,686,413	22,133,920	11,971,435	32.52
939590001	Block Grants for Substance Abuse & Prevention Tre	multiple	12,507,235	14,121,389	18,262,492	24,102,405	45.25
939590002	Block Grants for Substance Abuse & Prevention Tre	multiple	3,811,390	1,894,589	2,423,764	286,458	-
939820000	FEMA Crisis Counseling All-OK	3030235	333,299	278,332	185,316	534,698	-
939970000	Assisted Outpatient Treatment	3030196	0	55,576	824,209	629,210	0.12
970320000	Crisis Counseling	3030225	0	0	505	0	-

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Federal Government Impact

1.) How much federal money received by the agency is tied to a mandate by the Federal Government?

None.

2.) Are any of those funds inadequate to pay for the federal mandate?

N/A

3.) What would the consequences be of ending all of the federal funded programs for your agency?

Eliminating block and categorical federal grants would result in a 10% reduction in mental health and substance use treatment and prevention services across the state. Additionally, the loss of Federal Medicaid participation would cost Oklahoma over \$530 million in behavioral health services, severely impacting access to care for thousands of Oklahomans.

4.) How will your agency be affected by federal budget cuts in the coming fiscal year?

We are not aware of any imminent federal budget cuts at this time. However, in general, federal budget reductions could significantly impact the agency's ability to provide prevention, treatment, and recovery services—especially those funded through block grants and discretionary programs. Such cuts could result in fewer community-based services, reduced access to care for uninsured or underinsured individuals, and increased pressure on state-funded crisis and inpatient systems.

5.) Has the agency requested any additional federal earmarks or increases?

No.

FY 2026 Budgeted FTE

Division #	Division Name	Supervisors	Non-Supervisors	\$0 - \$35 K	\$35 K - \$70 K	\$70 K - \$100K	\$100K+
10 Central Administration		30	81	6	60	28	17
20 Treatment Beds		113	1390	791	550	105	57
30 Community Based Treatment & Recovery Services		119	613	179	426	85	42
50 Prevention		14	11		19	5	1
88 IT		1	1		1		1
Total		277	2096	976	1056	223	118

FTE History by Fiscal Year

Division #	Division Name	FY 2026 Budgeted	FY 2026 YTD	FY 2025	FY 2024	FY 2023	FY 2017
10 Central Administration		111	105	108.0	118.0	118.0	111.0
20 Treatment Beds		1503	1173	1114.0	1179.0	1120.0	801.0
30 Community Based Treatment & Recovery Services		732	699	697.0	729.0	694.0	798.0
50 Prevention		25	25	23.0	31.0	29.0	23.0
88 IT		2	4				
Total		2373.0	2006	1942.0	2057.0	1961.0	1733.0

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Revolving Funds (200 Series Funds)				
	FY'23-25 Avg. Revenues	FY'23-25 Avg. Expenditures	June 2025 Balance	
Department of Mental Health Revolving Fund Fund 20000 receives collections from Medicare & Medicaid payments, third-party insurance payments, and various other sources.	\$133,426,731	\$134,469,324	\$5,751,432	
Drug Abuse Education and Treatment Fund Fund 22000 receives court fines from various counties in Oklahoma that administer drug court programs.	\$370,485	\$306,182	\$300,907	
Capital Outlay Fund Fund 23000 is the Capital Outlay Fund that collects revenue from the qualifying sale of Real Estate Trust assets.	\$3,341,259	\$2,755,296	\$2,382,376	
Group Housing Loan Revolving Fund Fund 24000 receives interest on a corpus that is held by a third party to provide Housing Loans.	\$1,772	\$1,077	\$2,084	
Community-Based Substance Abuse Rev Fund Fund 24500 receives revenue from Beverage Licenses sales, DUI trainings and ADSAC assessments fees.	\$552,909	\$117,581	\$415,370	
Mental Health Transport Revolving Fund Fund 24700 is a special fund for mental health transport.	\$2,508,049	\$2,052,525	\$1,366,570	
Prevention of Youth Access to Alcohol Fund Fund 25000 receives revenue from juvenile court fines.	\$20,919	\$117,581	\$66,678	
Long-Range Capital Planning Commission Fund 28300 is for Capital Projects funds from the LPCPC.	\$1,235,458	\$466,907	\$1,838,982	

FY 2026 Current Employee Telework Summary

List each agency physical location (not division), then report the number of employees associated with that location in the teleworking categories indicated. Use "No specified location" to account for remote employees not associated with a site. Use actual current employees (headcount), not budgeted or actual FTE.

Full-time and Part-time Employees (#)

Agency Location / Address	City	County	Onsite (5 days onsite, rarely remote)	Hybrid (2-4 days onsite weekly)	Remote (1 day or less weekly onsite)	Total Employees
OFC - 24800 S 4420 Road	Vinita	Craig	303			303
CRC - 320 12th Street	Norman	Cleveland	103			103
GMH - 900 E Main St	Norman	Cleveland	340			340
CACMHC 1101 E Monroe	McAlester	Pittsburg	176			176
CACMHC 511 E 2nd St	Heavener	LeFlore	5			5
CACMHC 271 E Court	Atoka	Atoka	7			7
CACMHC 1407 NE D St, Suite B	Stigler	Haskell	3			3
CACMHC 117 Rogers Dr	Holdenville	Hughes	9			9
CACMHC 601 E Jackson	Hugo	Choctaw	9			9
CACMHC 2000 E Lincoln Rd	Idabel	McCurtain	10			10
CACMHC 1308 Cradduck Rd	Ada	Pontotoc	3			3
Central Administration - 2000 N Classen Blvd	OKC	Oklahoma	278			278
COCMHC - 909 Alameda St	Norman	Cleveland	169			169
JTCMHC - 602 SW 38th Street	Lawton	Comanche	150			150
JTCMHC-1313 W. Ash, Suites 105-110	Duncan	Steens	4			4
JTCMHC - 215 W Commerce Street	Altus	Jackson	6			6
NCBH - 604 Choctaw Street	Alva	Woods	11			11
NCBH - 702 N Grand Street	Enid	Garfield	29			29
NCBH - 1425 N Main Street	Fairview	Major	4			4
NCBH - 1521 NE Highway 54	Guymon	Texas	7			7
NCBH - 1222 10th Street	Woodward	Woodward	45			45
NCBH Lighthouse - 5050 Williams Avenue	Woodward	Woodward	18			18
NCBH - 19346 E 0304 CR	Fort Supply	Woodward	59			59
OCCIC - 2625 Gneral Pershing Boulevard	OKC	Oklahoma	69			69
OCRU - 1200 NE 13th Street	OKC	Oklahoma	39			39
TCBH - 2323 S Harvard Ave	Tulsa	Tulsa	152			152
Total Agency Employees						2008