



COST EFFECTIVENESS

The status quo for healthcare delivery for people who use drugs is costly. Overdose prevention centers (OPCs) can save millions of dollars and better address their needs.

The costs of overdose

Ambulance runs cost roughly \$466 per each visit and inpatient hospital visits cost roughly \$7,897 per visit.³

An average visit to the emergency department comes in at around \$3,450.³

With an increasingly toxic drug supply, and scarcity of harm reduction resources, the negative impacts of drug use, like overdose and illness, can be financially costly. **The United States is spending millions of dollars treating non-fatal overdoses each year.**

Overdoses requiring emergency medical services (EMS) are increasingly common and also expensive. In March 2022, overdoses made up almost 200 out of every 10,000 emergency department admissions.¹

Additionally, if people who use drugs cannot access harm reduction supplies like syringes, pipes, and other works, they face higher risk of infectious disease transmission. These illnesses can result in very high healthcare costs. For example, it was estimated that treating a single HIV infection over a person's lifetime can cost up to a million dollars.⁴ Medications used to treat Hepatitis C (HCV) can cost \$84,000 per patient.⁵ If the US were to treat every person with HCV, it would cost \$310 billion dollars.⁵

How overdose prevention centers save money



0.79% of overdoses in an OPC require an ambulance or ED visit.

OPCs have been found to drastically reduce costs for responding to overdoses and are linked to reductions in transmission of HIV, HCV and other illnesses.⁶



43% of overdoses outside an OPC require an ambulance or ED visit.

For example, **only 0.79%** of overdoses in OPC result in an ambulance run or ED visit, but **43%** of overdoses not occurring in an OPC result in ambulance use.³

There is no single number that captures how much an OPC can save compared to the status quo. The cost effectiveness of the sites depends on:



The location of the site



The services offered



How many people use the site



References can be found by scanning the QR code or by visiting opcinfo.org/factsheetref



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Estimates from a study in Rhode Island that looked at potential savings from an overdose prevention center³

The study found:



an OPC would cost **\$1.6 million** to run.

Depending on how many people used it, it would save the state between **\$176,462** and **\$8.9 million** a year.

The more clients who use it each month, the more cost effective the site would be.

Assuming the OPC would serve 400 people a month, which is in line with data from existing harm reduction services, the OPC would save the state **\$1.1 million** a year.



261 fewer ambulance uses



**244 fewer ED visits
17 fewer inpatient hospitalizations**

This analysis did include money saved in averting new HIV and HCV cases.

Costs saved at OPCs in Canada

Insite in Vancouver, Canada cost \$1.5 million to run in 2007.² In that year alone, Insite prevented enough HIV infections to effectively save the province of British Columbia **\$892,000**.²

In addition, money saved in responding to non-fatal ODs and non-fatal HIV infections ranged from **\$2.85 million to \$8.55 million** from this one OPC.²

Estimates for other US cities



Baltimore: \$7.8 million⁷



**San Francisco: \$3.5 million⁷
\$3.8 million⁸**



Atlanta: \$3.6 million⁸



Boston: \$4 million⁸



Philadelphia: \$3.9 million⁸



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