Anyone who has experienced the consequences for a DUI in the State of Colorado knows the offense results in significant treatment mandates that are both time consuming and expensive. DUI offenders are subject to a minimum of 24 hours of education classes (two hours each week for 12 weeks), random drug monitoring at $15 per test with a frequency rate as high as eight times per month, and additional therapy classes dependent upon BAC level and number of offenses.

It is not uncommon for a DUI charge in Colorado to cost the offender as much as $6,000 from start to finish, with an average treatment duration of 355 days for those receiving both education and therapy class mandates. As of Jan. 1, 2009, an additional 20 hours of relapse prevention can be attached to the treatment requirements.

The State of Nebraska, in contrast, responds to DUI offenses very differently. In regard to mandated treatment, if Colorado squashes the mosquito with a hammer, Nebraska spanks the mosquito with an extra soft cotton ball.

A DUI offense in Nebraska results in an eight-hour substance abuse class mandate, which can be completed in one long class, or two shorter classes. No extended drug monitoring, education, therapy or relapse prevention hours.

However, the Nebraska approach is to mandate six months license revocation post conviction, or sixty days with probation. Additionally, the interlock system is attached to the offender's vehicle for one year; a big selling point during blind dates.

As a treatment provider in Colorado, one of the most common expressions heard by the clients is that treatment is only about money; job security for the providers. Well, certainly the requirement of 24 hours of education and 86 hours of therapy supports lengthy employment of substance abuse therapists. The question of value however, rests on whether such treatment results in lower rates of recidivism.

A 2008 study recorded treatment duration, recidivism rates and completion status of 16,194 DUI offenders in Colorado from 2001-2004, was recently published. The results show that first time DUI offenders who completed treatment, from a minimum of 12 hours to a maximum of 76 hours, had recidivism rates of 7.2 percent. For those required to complete both education and therapy hours, recidivism between 2001 and 2004 was 8.4 percent.

At first glance, such statistics imply an increase in treatment duration results in high recidivism rates; however, one must consider that treatment mandates in Colorado are based on blood alcohol level at time of arrest (an indicator of tolerance and dependence) and number of previous DUI convictions (also an indicator of dependence). Thus, those who struggle with alcohol addiction are more likely to re-offend than someone who is not dependent, making sense of the statistical result.

Those who failed to complete the mandated treatment had significantly high rates of recidivism, honoring the providers' feelings that there is some merit and value to the service they are providing.

Nebraska has found the interlock system to be quite effective as well, reducing recidivism to three percent. Both consequences are expensive to the offender; both create jobs in the treatment market.

Drivers in both states can feel confident that DUI offenders are either not re-offending, or have improved in their ability to not get caught.