



Adult Behavioral Health ED Data Trends 2012-2014

Adult Quality, Access & Policy
Committee

May 20, 2016

Behavioral Health Emergency Department Visits



Methodology

DSS Claims Data

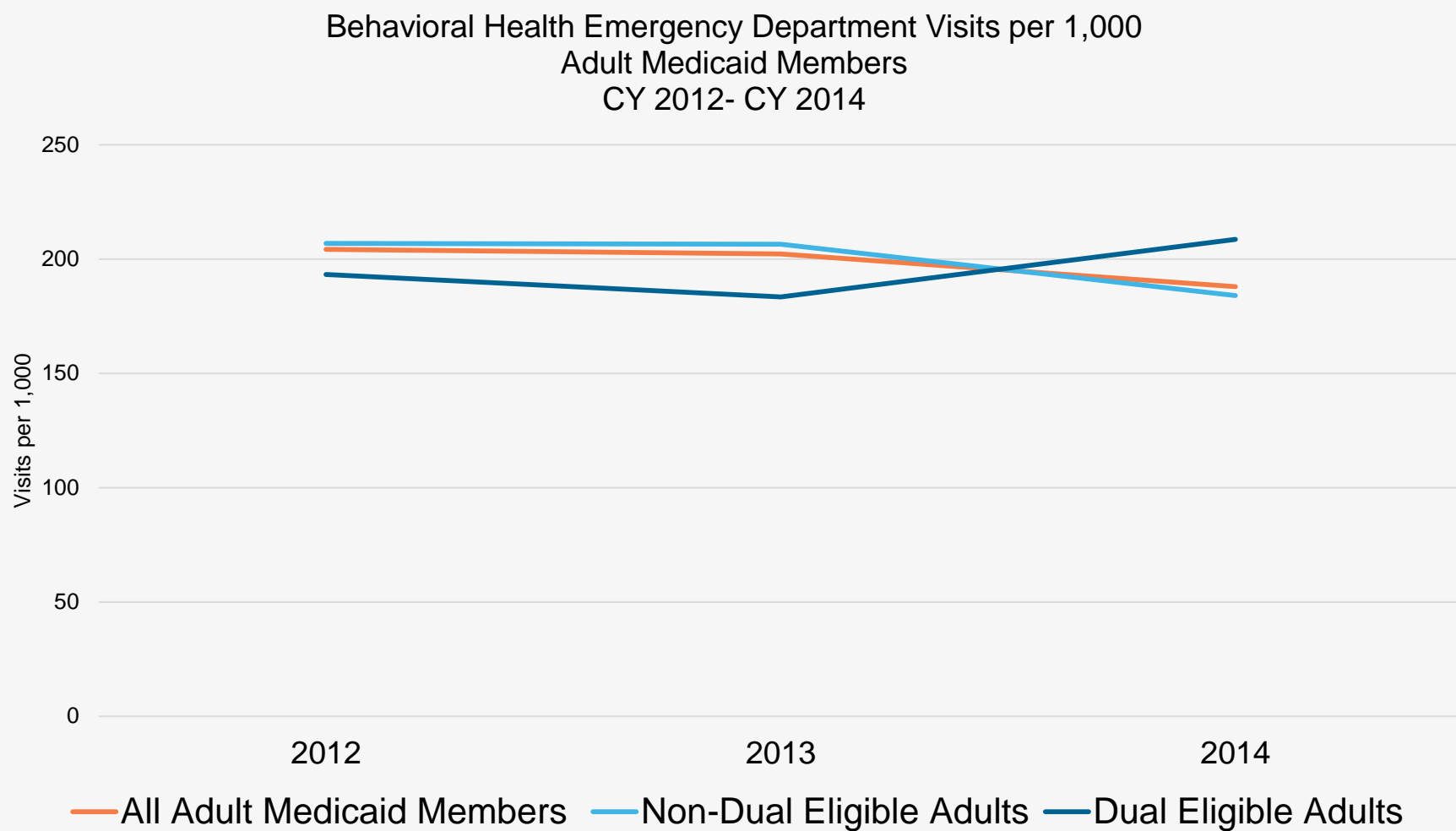
BH ED Visit defined as ED Visit with a BH Diagnosis (Mental Health or Substance Abuse) in any position on the claim, excluding Nicotine/Tobacco Use Diagnoses

Dual Eligibility refers to members with both Medicaid and Medicare coverage Approximately 25% (~169,000) of the Adult Medicaid members are dually eligible. Medicaid covers ED visits.

Non-Dual Eligibility refers to members with only Medicaid coverage Approximately 75% (~468,000) of Adult Medicaid members

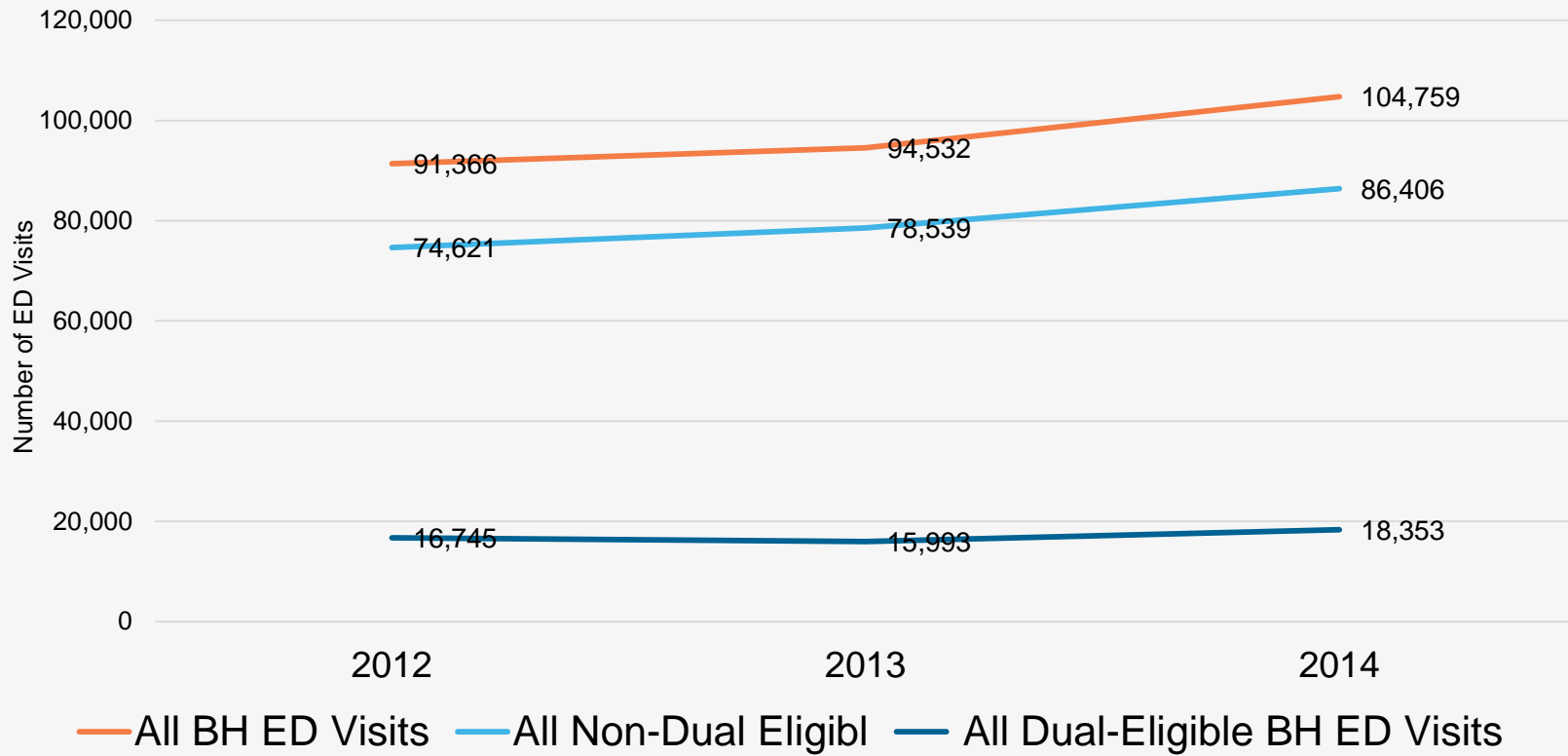
Visits/1000 members: The number of ED visits per 1000 members; measure used to enable comparison of rates across populations of different sizes

Visits Per 1,000



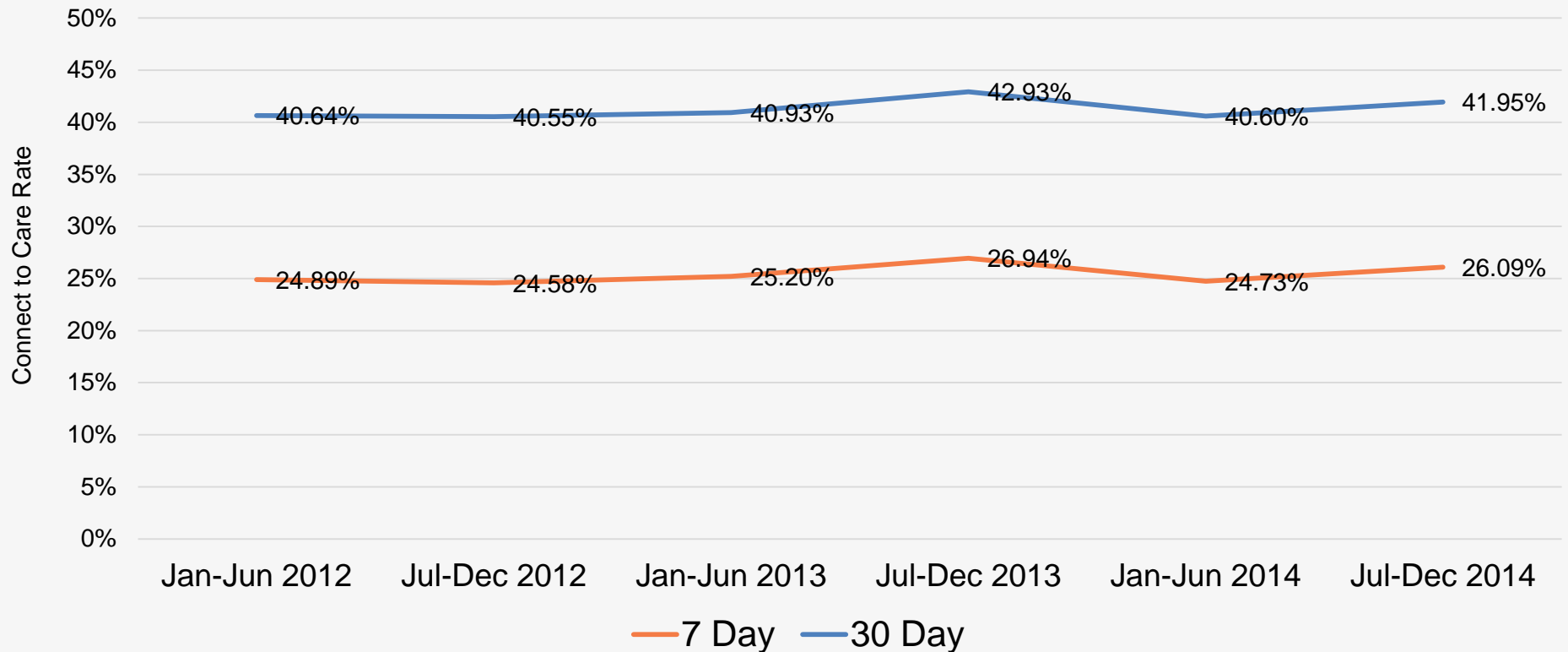
BH ED Volume

Behavioral Health Emergency Department Volume
Adult Medicaid Members
CY 2012- CY 2014



Connect to Care Rate

Connect to Care Post Behavioral Health Emergency Department Visit
7 and 30 Day
CY 2012-CY 2014

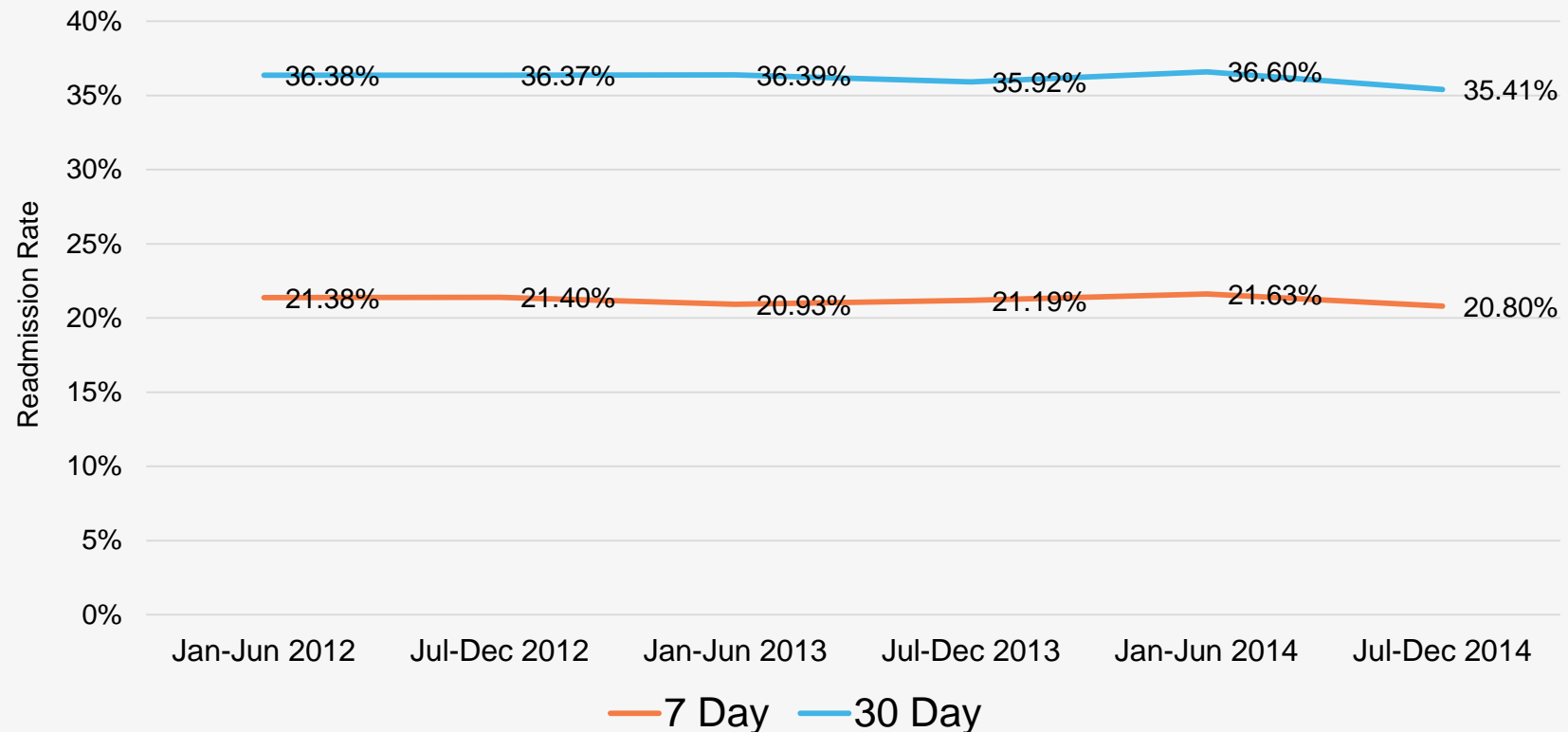


Exclusions from the measure:

- Members who lose Medicaid eligibility within 30 days of ED visit
- BH ED visits that result in an inpatient admission
- BH ED visits with an inpatient admission within 30 days

Readmission Rate

Behavioral Health Emergency Department Readmission Rate
CY 2012-CY 2014



Exclusions from this measure:

- Members who lose Medicaid eligibility within 30 days of ED visit
- BH ED visits that result in an inpatient admission count as a readmission but are not assessed for a readmission within 7 or 30 days
- Medical ED Visits count as a readmission but are not assessed for a readmission within 7 or 30 days

Thank you