2015 IICAPS Update Value Options – Connecticut Behavioral Health Partnership Yale University Child Study Center

2013 RBA Report 2014 Completer Analysis 2015 Provider Analysis and Reporting Program



2013 RBA Analysis

- Service Utilization Post IICAPS
- ED Utilization Pre & Post IICAPS
- Inpatient Utilization Pre & Post IICAPS
- Summary of Positive Outcomes
- Follow-up Post Discharge
 - Medication
 - Connection to Care
- Completers vs. Noncompleters



Service Utilization Post IICAPS



% of Users of ED & Inpatient 180 Days Post IICAPS



ED Utilization Pre-Post IICAPS

Pre – Post Percentage of Youth with ED Visits

 35.00%
 33.03%

 30.00%
 21.83%

 25.00%
 21.83%

 20.00%
 Pre IICAPS

 15.00%
 Post IICAPS

 5.00%
 IICAPS

 0.00%
 IICAPS



Pre-Post Number of ED Visits

37 % decrease from Pre to Post IICAPS in members who used the ED
40% decrease in the number of Visits

Inpatient Utilization Pre-Post IICAPS

Pre – Post Percentage of Youth with Inpatient Stays



Pre-Post Number of Inpatient Days



48% decrease in members admitted inpatient 31% decrease in inpatient days

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RBA Summary – The Story Behind the Numbers



- IICAPS appears to be effective at reducing subsequent utilization of the ED and hospital inpatient admissions and days post IICAPS treatment
- This is further evidence of the effectiveness of the model regarding the primary goal of keeping kids in the community and out of higher levels of care



RBA Summary – The Story Behind the Numbers



- The most frequently utilized services post IICAPS are outpatient therapy and medication management
- There appears to be room for improvement in how quickly members are connected to care



RBA Summary – The Story Behind the Numbers



- Based on Yale data approximately 65-70% of IICAPS users are completers of treatment and the remaining 30-35 % are "non-completers"
- It is recommended that an analysis be completed examining
 - The characteristics/feature of completers vs. noncompleters
 - Ability to predict treatment completion status



Next Steps

- VO, Providers, Yale, and State Partners work together to:
 - Conduct a comparison of completers vs. noncompleters
 - Update the provider profile to incorporate important measures identified through this analysis.
 - Prepare for a PARS program in 2015.

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Completer and Non-Completer Analysis

- Can we identify the factors associated with who completes and who does not complete IICAPS treatment?
- 4 Years of IICAPS Data 2010-2013
- A logistic regression analysis identified 21 variables that, together, predicted treatment completer status
- This regression model, although statistically significant, was weak, predicting only 9.5% of the overall variance in completion status
- A Principle Components Analysis (PCA) was conducted that identified five factors or clusters; child functioning/severity, juvenile delinquency, child welfare involvement, psychiatric status, and other.
- The PCA improved our understanding of the predictive factors but it did not improve the predictive power
- Conclusion Multiple risk factors influence who completes IICAPS vs. who does not – no single variable or set of variables alone predicts completion status

NEW MEASURES IN PROVIDER PROFILE

- Connect to Care
 - Claims based
 - % of Youth discharged from IICAPS with community-based care within 14 days
- Inpatient Hospitalizations
 - Claims based
 - % of youth discharged from IICAPS without Inpatient BH admission within 60 days
- Medication Follow-up
 - Pharmacy claims based
 - % of youth on a Psychotropic medication during the final 30/45 (?) days of IICAPS treatment who refilled a prescription within 45 days of discharge



New IICAPS Performance Measures

Connect to Care





Inpatient **Hospitalizations**

100% 3-12/31/13 90% 80% 70% **Medication** 60% 50% 40% 30% 20% 1.0% Follow-up



Percent of Youth with a Psychotropic Prescription Filled within 45 Days Post Discharge

youth with a psychotropic prescription filled in the 30 days prior to IICAP Number in parentheses represents the total number discharge in the measurement period.

IICAPS PAR PROGRAM - 2015

- Establish benchmarks and monitor performance on key indicators
- Enhance collaboration among the IICAPS providers
- Identify Best Practice
- Periodically update the provider profile to incorporate important measures identified through this program

Questions

