

UTILIZATION MANAGEMENT FOR YOUTH MEMBERS

Quarters 1 & 2: January-June 2015

Executive Summary & Analysis by Level of Care

*Submitted:
September 1, 2015*





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Areas of Focus

Membership

Total Unique
DCF & Non-DCF
Composition of DCF Membership

Inpatient Facilities

Admits/1,000 & Days/1,000
Average Length of Stay
PAR Hospitals
Percent of Days Delayed
Discharge Delay Reason Code(s)

Inpatient Solnit Center

Average Length of Stay
Number of Days Delayed
Discharge Delay Reason Code(s)

Community & Solnit PRTF

Admissions & Days/1,000
Average Length of Stay
Total Days Delayed
Discharge Delay Reason Code(s)

Autism Spectrum Disorder Services

Admissions & Admits/1,000
Utilization Profile
Provider Volume

Residential Treatment Center

In-State/Out-of-State Percent of Admissions
Average Length of Stay

Table of Contents

Select Microscope to View "Areas of Focus"
And Go Directly to Selected Page



For this report, the following utilization data points have been placed in the Appendix and are not discussed:

PHP, IOP, & EDT
Admits/1,000

IICAPS
Admits/1,000

Outpatient (OTP)
Admits/1,000

Youth Medicaid Membership

Total Membership

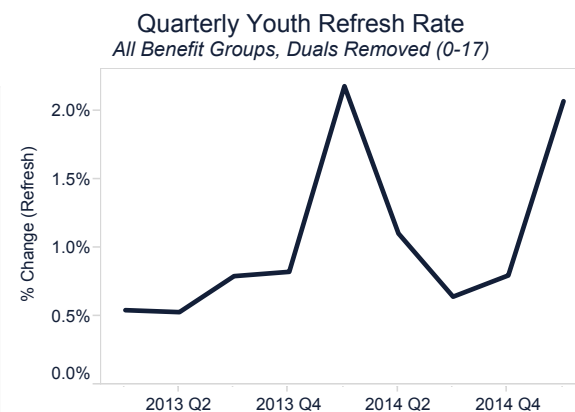
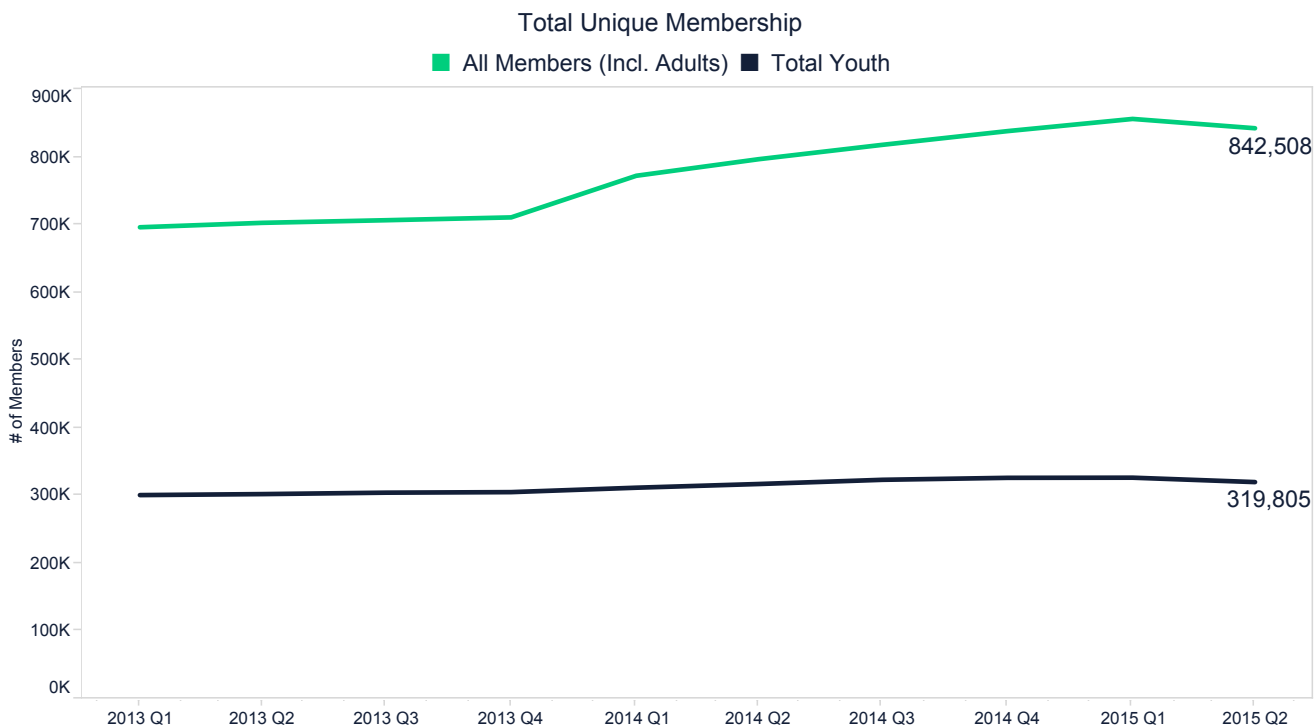


Total Unique Membership

The total population (youth and adult) fluctuated over the last two quarters (Q1 '15 and Q2 '15) increasing by 18,011 members, a 2.15% increase from Q4 '14 (838,273) members to Q1 '15 (856,284 members), then decreasing by 13,776 members from Q1 '15 to Q2 '15. Total membership for Q2 '15 will likely increase once the data refreshes.

All Youth (Ages 17 and Under)

The total youth population also fluctuated increasing slightly by 218 members, from Q4 '14 (326,108 members) to Q1 '15 (326,326 members), then decreasing by 6,521 members from Q1 '15 to Q2 '15 (319,805). Non-DCF members made up 98% of total youth population in Q2 '15.



Youth Medicaid Membership

Membership by DCF & Non-DCF



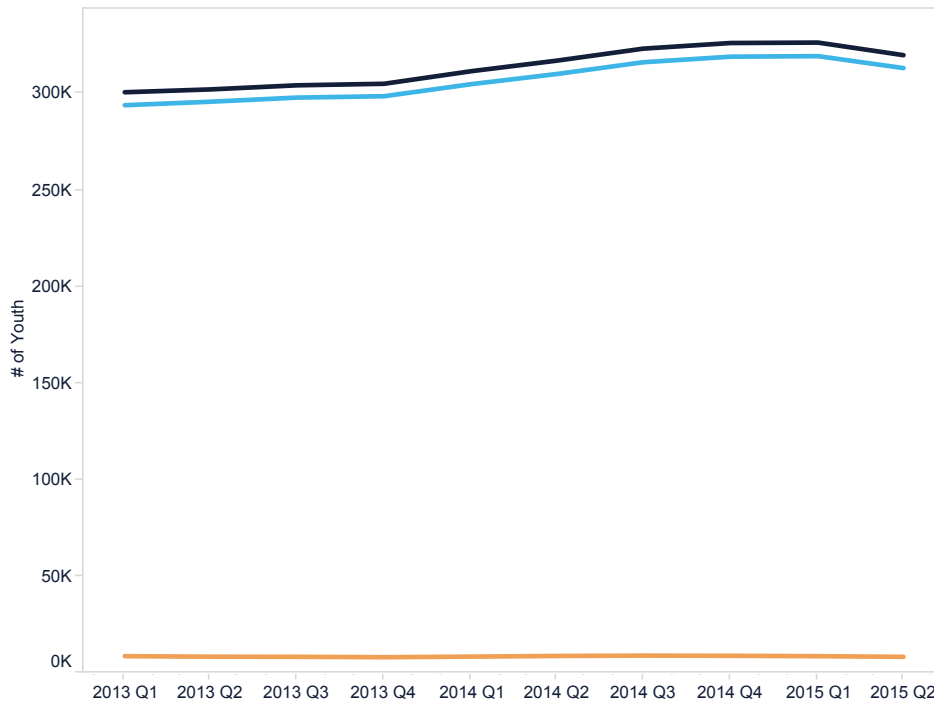
For the third consecutive quarter the total DCF population has decreased. The Dually Committed is the only population which did not decrease. DCF Committed population is the main driver of the total DCF population.

Totals may not match due to member movement between groups.

Select Group Left Chart All
Select to Compare DCF Youth Deselect Committed to see smaller changes All

Quarterly Membership Growth

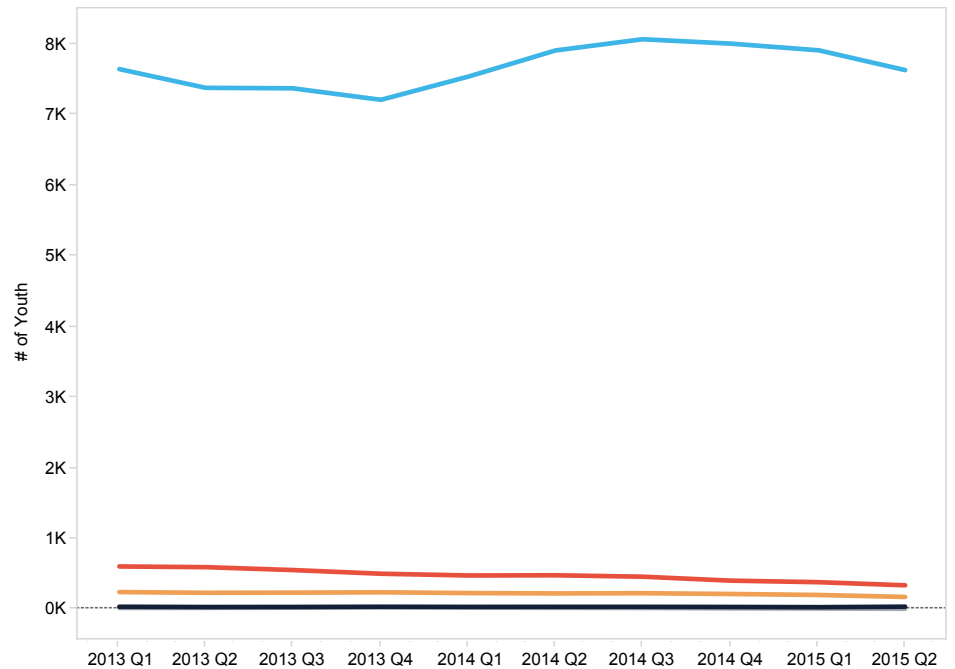
■ Total Youth ■ Non-DCF ■ DCF



Composition of DCF Youth

■ Committed ■ Voluntary ■ Juvenile Justice ■ Dually Committed

■ Family With Service Needs



Inpatient: Excluding Solnit

Admits/1,000 & Days/1,000



DCF admissions are generally decreasing over the last year, down 21.3% from one year ago. (Select folder for more info)

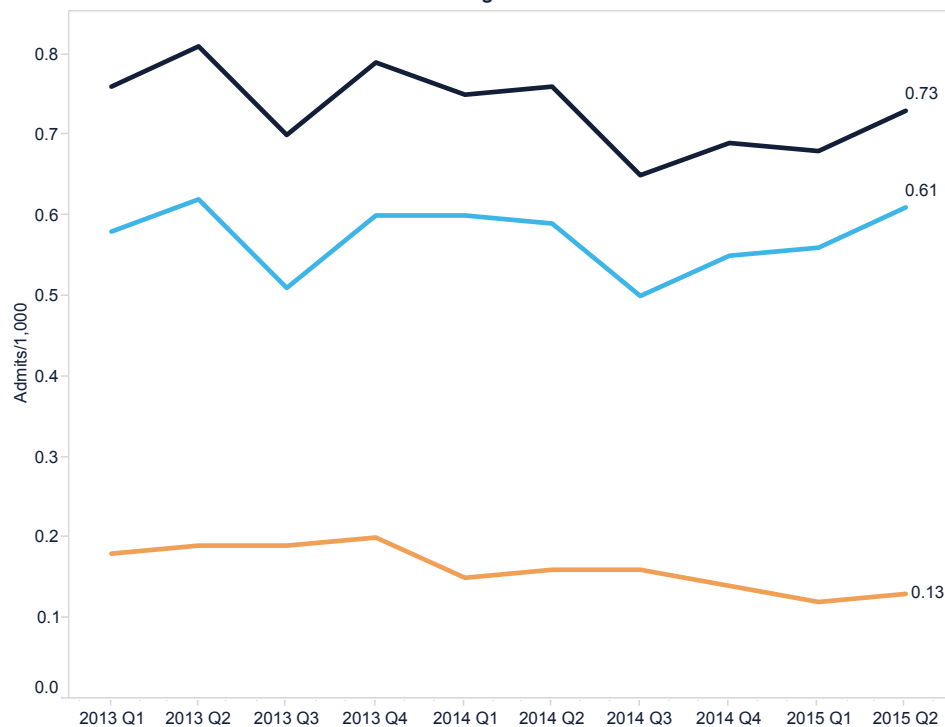
Benefit Group
All

Quarter
2013 Q1 to 2015 Q2

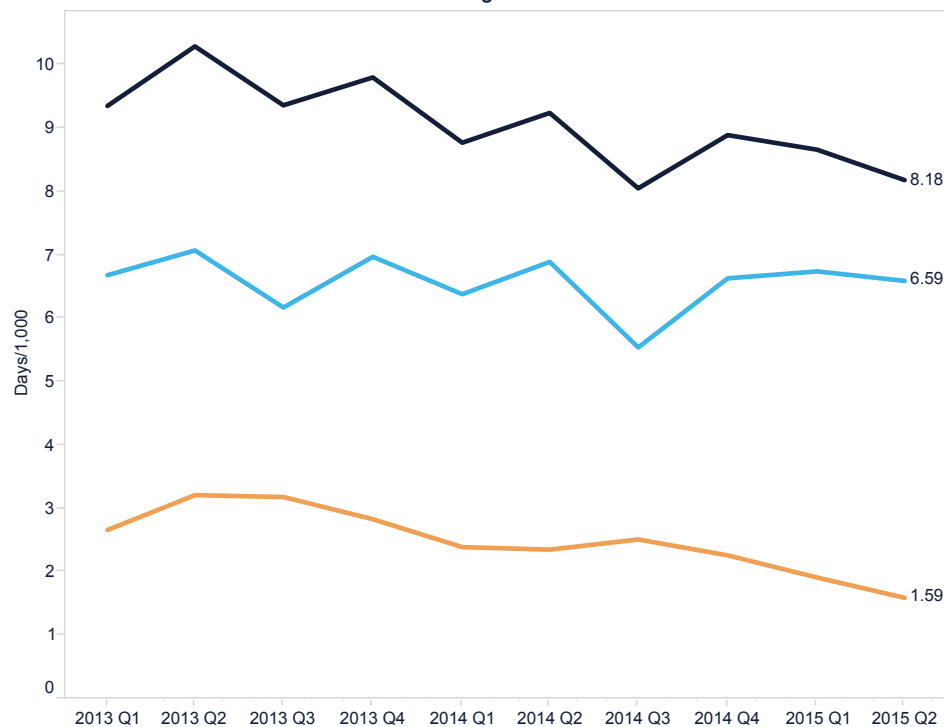
Select to Highlight Group

- DCF
- Non-DCF
- Total Youth

Quarterly Inpatient Admits/1,000: Youth (0-17)
Excluding Solnit



Quarterly Inpatient Days/1,000: Youth (0-17)
Excluding Solnit



Inpatient: Excluding Solnit

Discharges & Average Length of Stay



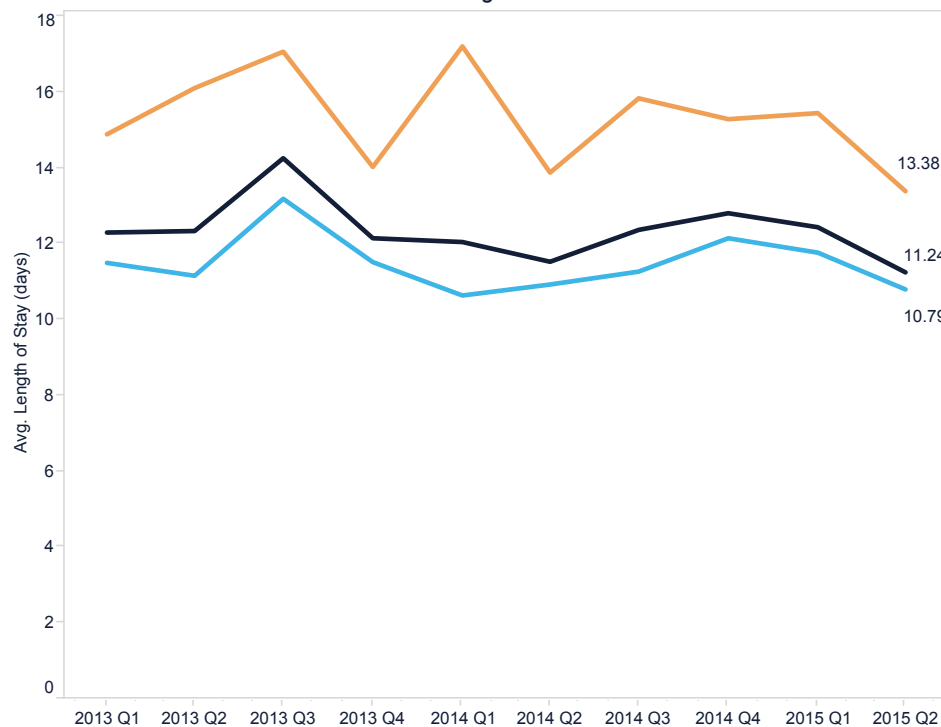
Total ALOS decreased to 11.2 days in Q2 '15, the lowest ALOS in the last 2 years. (Select folder for more info)

Benefit Group
All

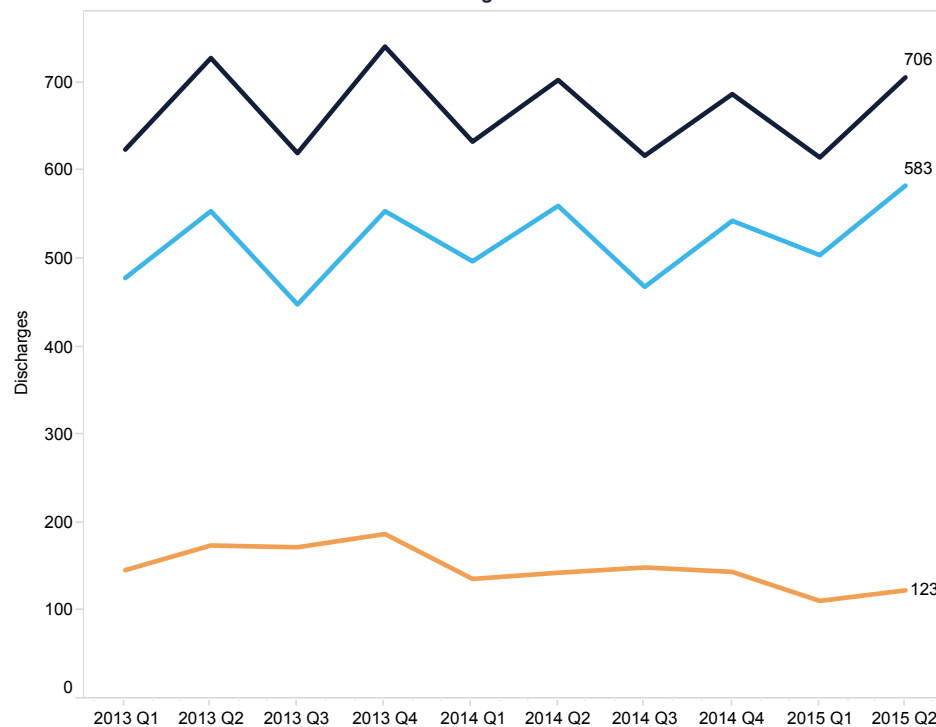
Quarter of Tableau Date
2013 Q1 to 2015 Q2

Benefit Group
DCF
Non-DCF
Total Youth

Quarterly Inpatient Average Length of Stay: Youth (0-17)
Excluding Solnit



Quarterly Inpatient Discharge Volume: Youth (0-17)
Excluding Solnit



Inpatient: PAR Hospitals

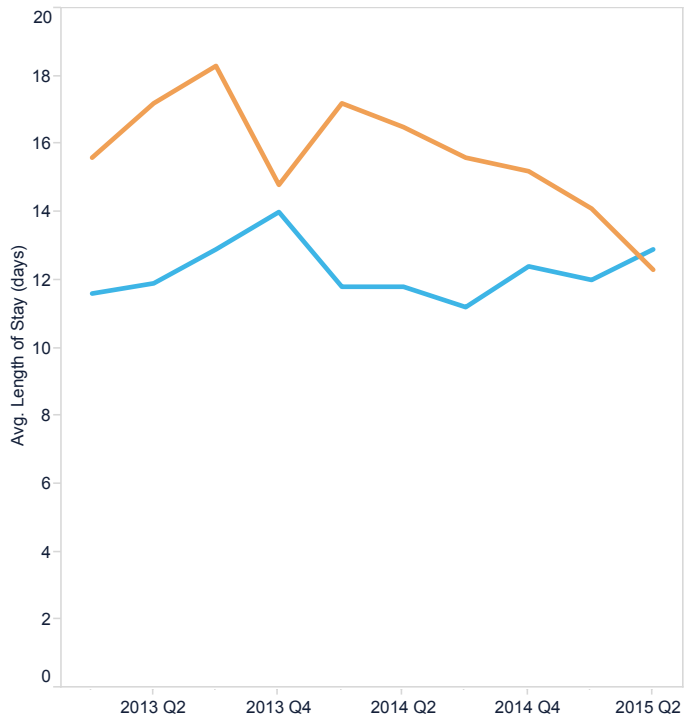
Average Length of Stay

Includes the Seven In-State Pediatric Hospitals (Ages 3-17)

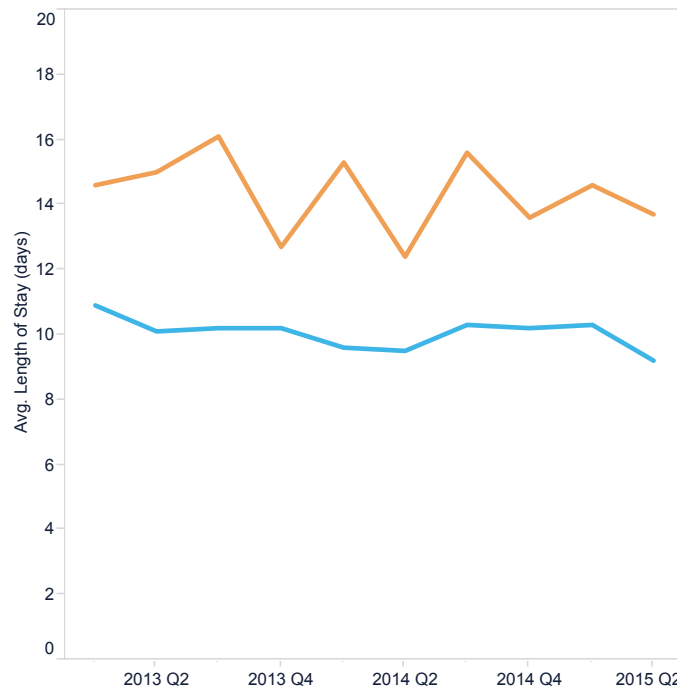


For the first time, the non-DCF involved youth ages 3-12 had a longer average length of stay (12.9) than the DCF 3-12 year-olds (12.3) by 0.6 days. (Select folder for more info)

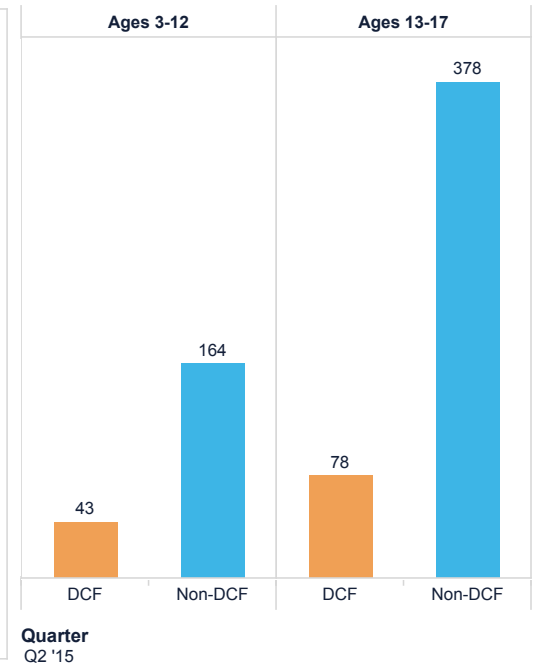
Quarterly Inpatient Average Length of Stay; Child (Ages 3-12)
DCF & Non-DCF Members



Quarterly Inpatient Average Length of Stay; Child (Ages 13-17)
DCF & Non-DCF Members



Quarterly Inpatient Discharges
DCF vs. Non-DCF Members with Age Breakout -
Showing Q2 '15



Inpatient: PAR Hospitals

Average Length of Stay

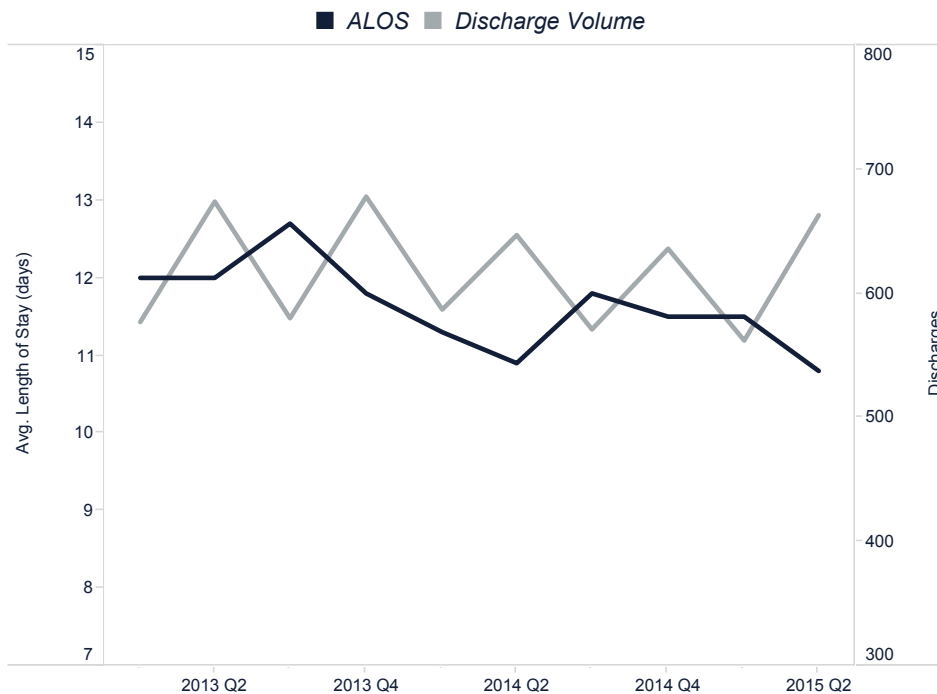
Includes the Seven In-State Pediatric Hospitals (Ages 3-17)



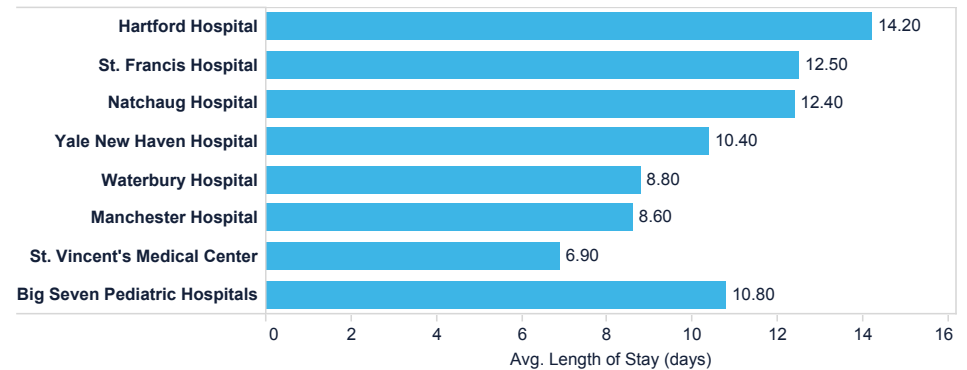
As a group, the Big Seven pediatric hospitals have been demonstrating a slight downward trend in ALOS since Q2 of '13 to Q2 '15 (from 12.0 to 10.8 days). (Select folder for more info)

Quarterly Inpatient Big Seven PAR Hospitals: All Youth (Ages 3-17)
Dual Axis Comparison

Q2 '15



Quarterly Inpatient PAR Hospitals Average Length of Stay Comparison
Showing Q2 '15



Select Quarter to View ALOS Comparison Above and Use Ctrl to Select More than One Hospital Above ..



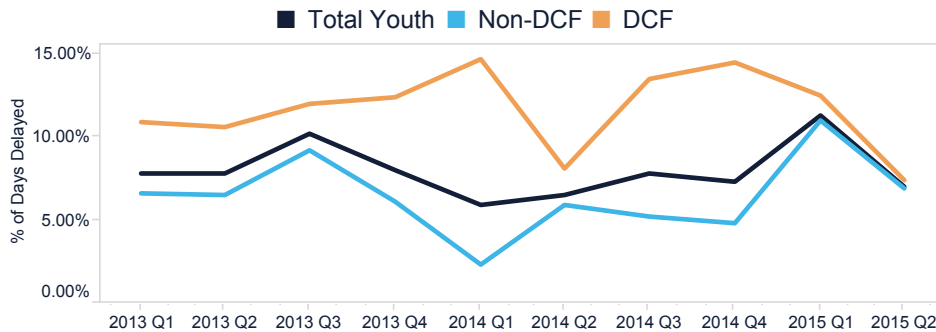
Inpatient Discharge Delay: Excluding Solnit

Percent Delay Days & Delay by Reason

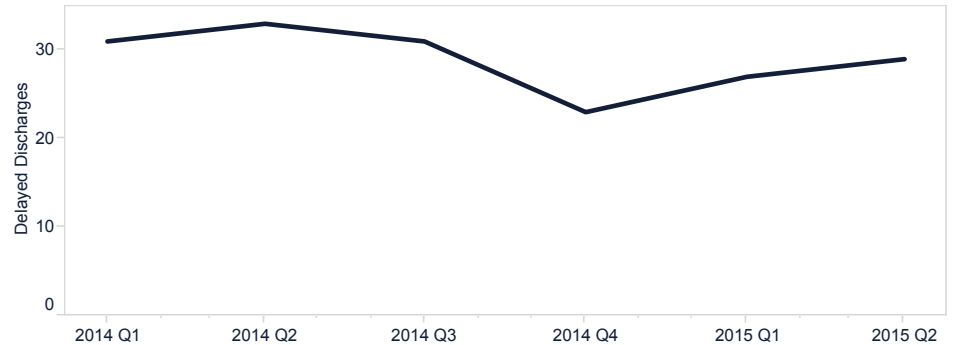


The average number of delay days for discharged individuals awaiting State Hospital and PRTF levels of care have been trending upward since Q1 of 2014. (Select folder for more info)

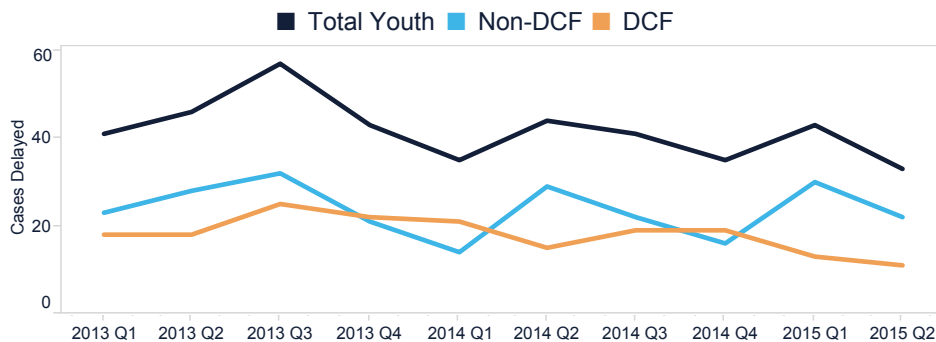
Quarterly Inpatient (Excluding Solnit) Percent of Days Delayed: All Youth



Quarterly Inpatient Discharges with Delayed Days: All Youth
Hover to View Delayed Reason



Quarterly Inpatient (Excluding Solnit) Cases Delayed: All Youth



		2014				2015	
		Q1	Q2	Q3	Q4	Q1	Q2
Awaiting State Hospital	Delayed Discharges	5	7	13	6	12	12
	Total Delay Days for Discharges	68	122	333	174	382	335
	Average Delay Days for Discharges	13.6	17.4	25.6	29.0	31.8	27.9
Awaiting PRTF	Delayed Discharges	17	22	14	13	7	13
	Total Delay Days for Discharges	226	271	224	205	112	355
	Average Delay Days for Discharges	13.3	12.3	16.0	15.8	16.0	27.3
Awaiting Solnit PRTF	Delayed Discharges					3	2
	Total Delay Days for Discharges					27	58
	Average Delay Days for Discharges					9.0	29.0

Note: The Reason Code "Awaiting Solnit PRTF" was not implemented until late 2014.

Inpatient: Solnit Center

Average Length of Stay & Delay Days

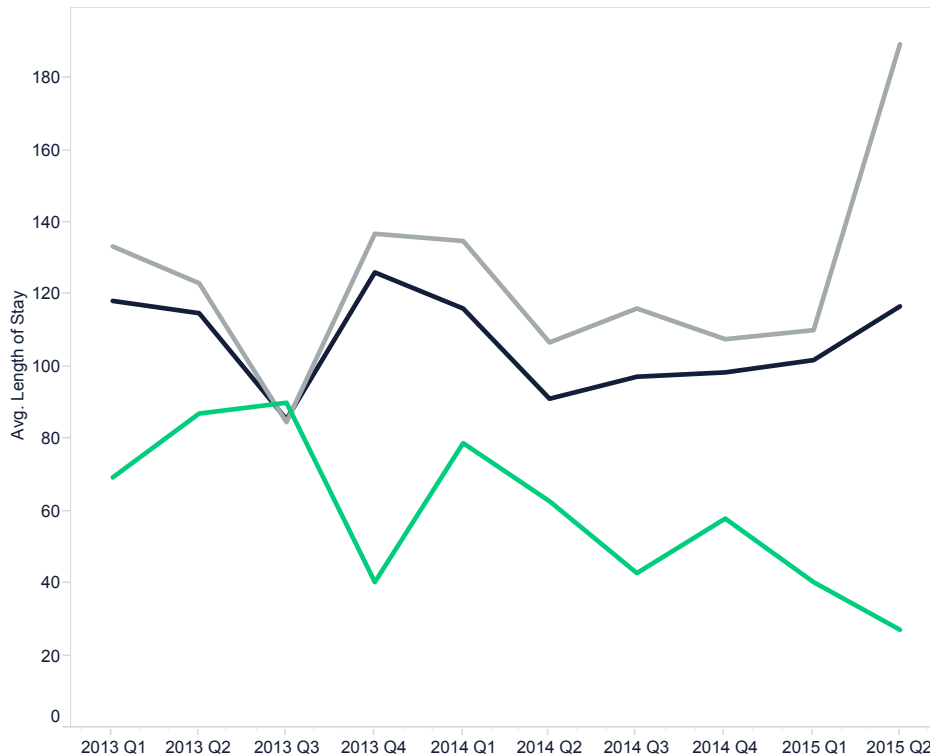


The increase in average length of stay at Solnit Inpatient hinders timely access to this facility for those children on discharge delay in community inpatient units and emergency rooms.

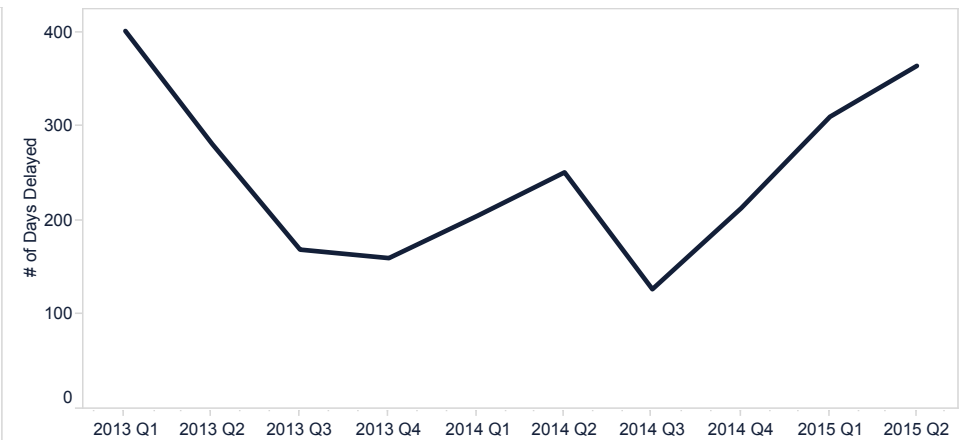
Benefit Group

- Court-Ordered
- Non-Court-Ordered
- Total Youth

Quarterly Solnit Inpatient Average Length of Stay
Court-Ordered, Non-Court-Ordered, and Total

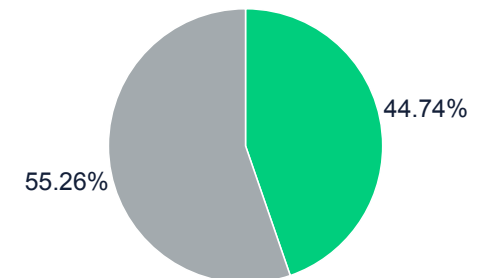


Quarterly Solnit Inpatient Number of Delayed Days
Total Youth



Press Play to View
Quarterly Solnit In-
patient Percent of
Discharges: *Court-
Ordered & Non-
Court-Ordered*

Quarter
2015 Q2
☐ Show History



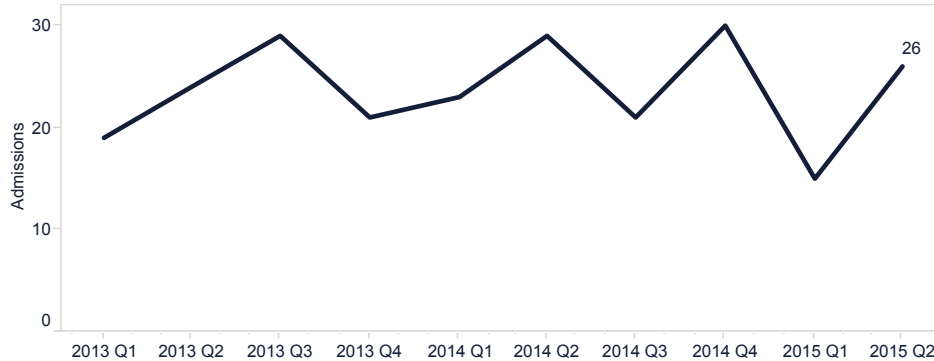
Community PRTF: Excluding Solnit (Youth Ages 5-13)

Admissions, Days/1,000 & Average Length of Stay

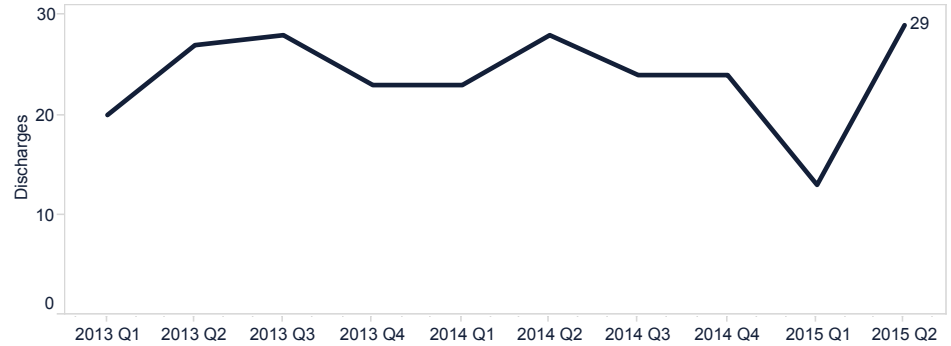


The numbers of admissions, days/1,000 and average length of stay have remained consistent over the reporting period. (Select folder for more info)

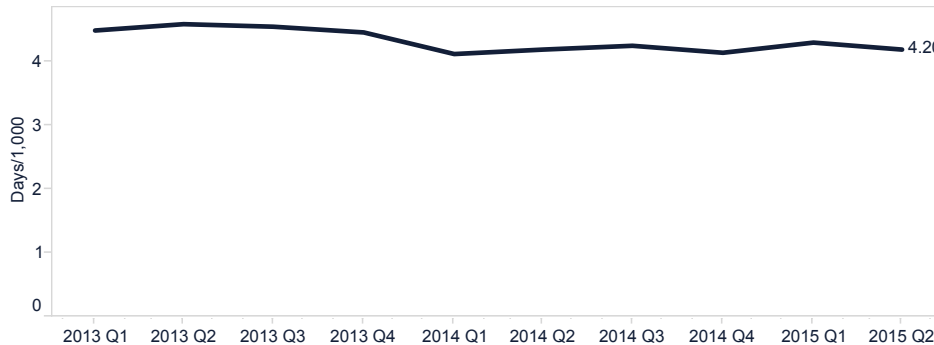
Quarterly PRTF (Excluding Solnit) Admissions: Youth 5-13



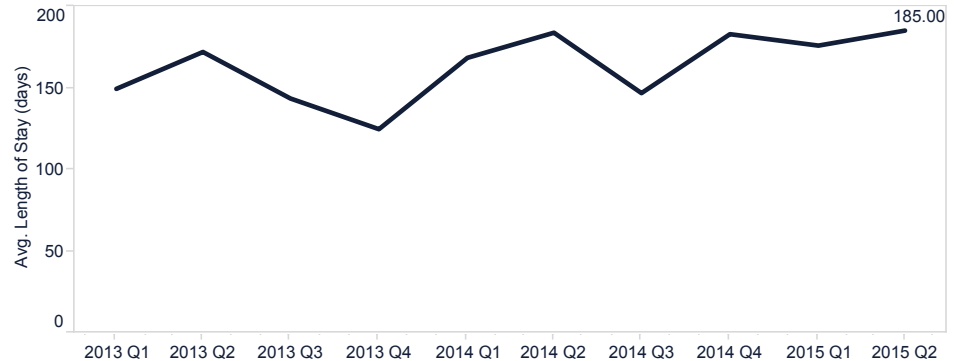
Quarterly PRTF (Excluding Solnit) Discharges: Youth 5-13



Quarterly PRTF (Excluding Solnit) Days/1,000: Youth 5-13



Quarterly PRTF (Excluding Solnit) ALOS: Youth 5-13

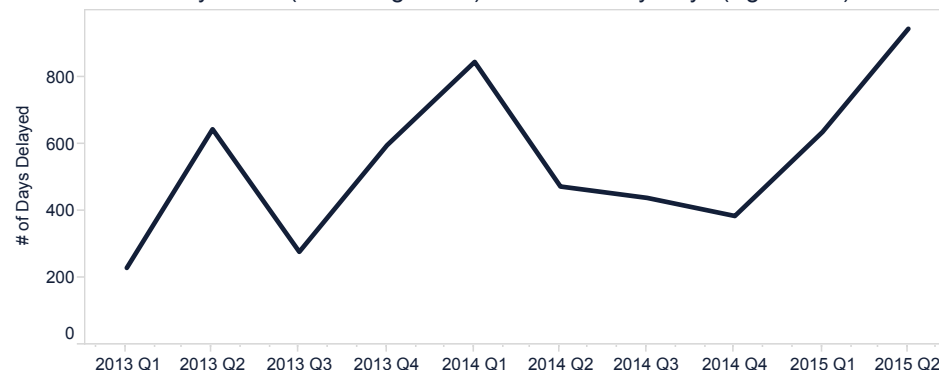


Overstay Days & Overstay Reasons

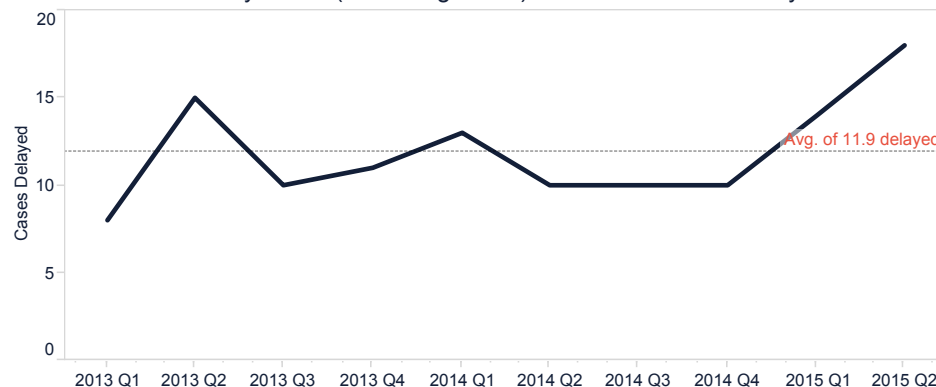


Community PRTF total overstay days increased significantly over the reporting period. (Select folder for more info)

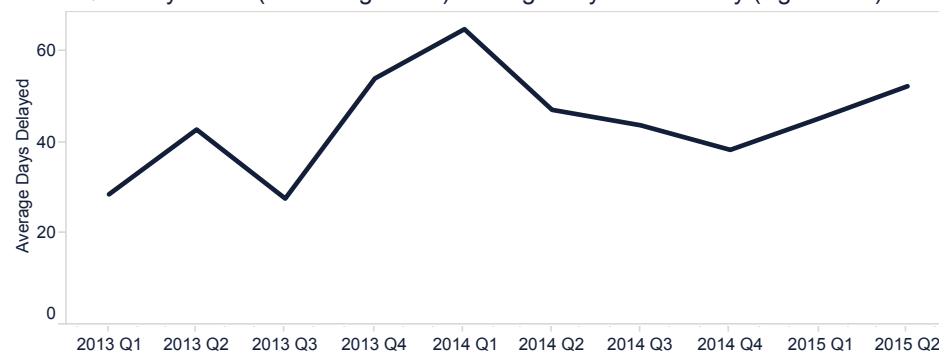
Quarterly PRTF (Excluding Solnit) Total Overstay Days (Ages 5-13)



Quarterly PRTF (Excluding Solnit) Total Cases in Overstay



Quarterly PRTF (Excluding Solnit) Average Days in Overstay (Ages 5-13)



Quarterly PRTF (Excluding Solnit) Percent of Overstay Discharges by Reason Code
(Ages 5-13)

[illegible]

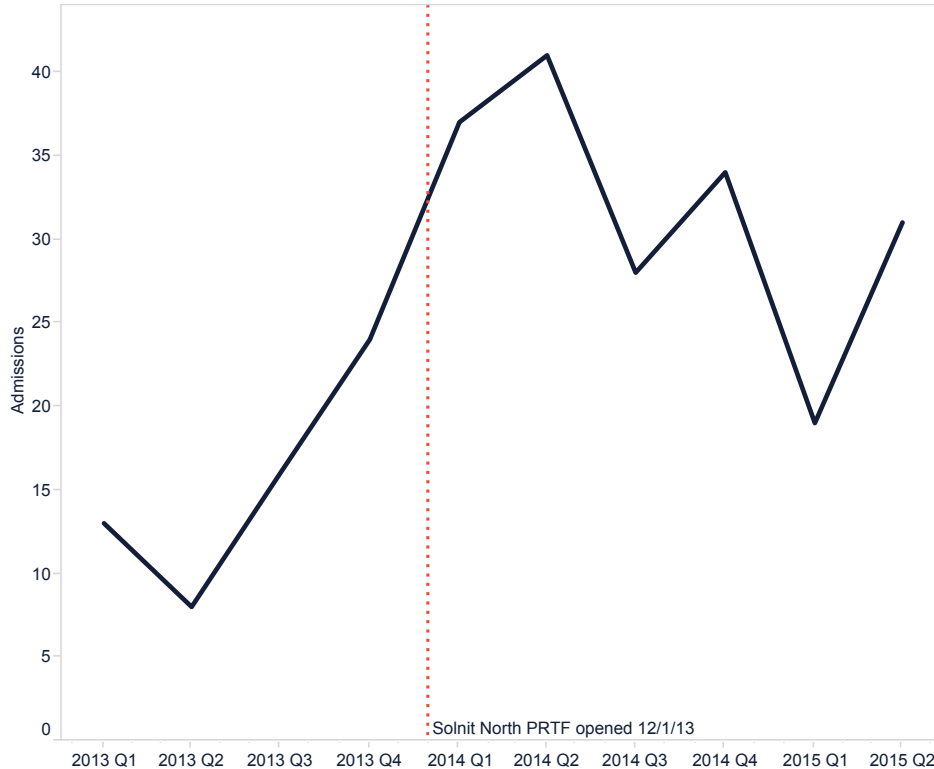
PRTF: Solnit (Youth Ages 13-17)

Admissions, Days/1,000 & ALOS

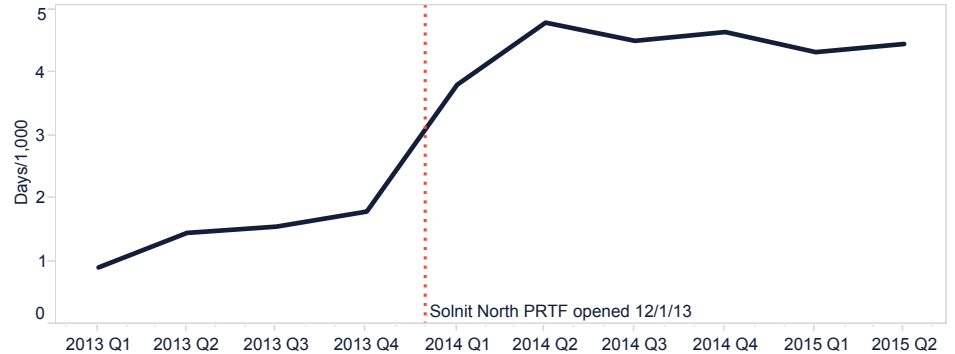


After a period of expected increases following the opening of services in 2013, admissions and days/1,000 at Solnit North PRTF have begun to level off. (Select folder for more info)

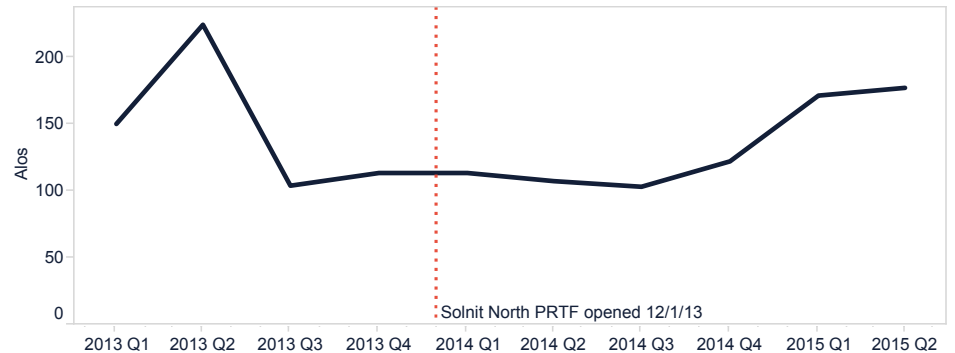
Quarterly Solnit PRTF Admissions (ages 13-17)



Quarterly Solnit PRTF Days/1,000 (ages 13-17)



Quarterly Solnit PRTF ALOS (ages 13-17)



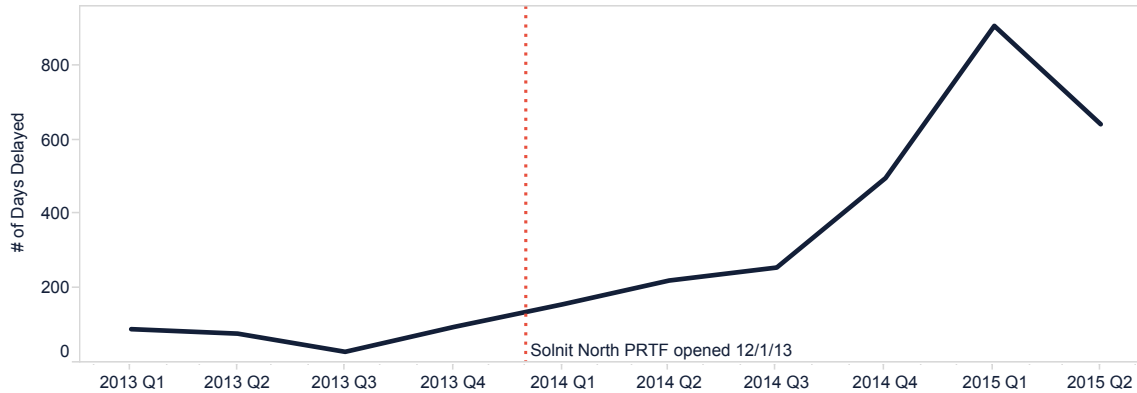
PRTF: Solnit (Youth Ages 13-17)

Overstay Days & Number of Youth in Overstay by Reason Code



The number of overstay days at Solnit PRTF increased by 29.2% (497 to 642) from Q4 '14 to Q2 '15. (Select folder for more info)

Quarterly Solnit PRTF Total Overstay Days (ages 13-17)



Select Year to Change Chart Below
Multiple Values

Quarterly Solnit PRTF Number of Youth in Overstay by Overstay Reason Code (ages 13-17)

	2014				2015	
	Q1	Q2	Q3	Q4	Q1	Q2
Awaiting RTC				1	1	
Awaiting GH	2	3	3	6	6	4
Awaiting Foster Care	1	2	2	1		3
Awaiting Community Services		2	2	1	5	4
Awaiting Other	1	1		4	4	1
Education Issues					1	

Autism Spectrum Disorder Services

Admissions & Admits/1,000



After the initial rollout, Autism Spectrum Disorder Services saw a significant increase in Behavior Assessment admissions during Q2 '15. (Select folder for more info)

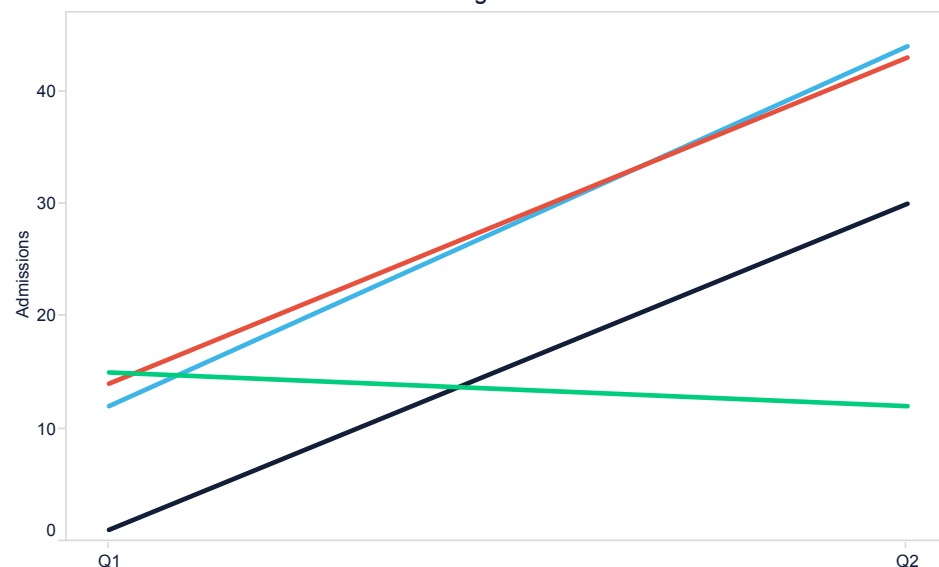
Overview

The Autism Spectrum Disorder Services program began authorizing services on January 2, 2015, subsequent to the Centers for Medicare & Medicaid Services (CMS) announcement that habilitation services would be covered under Medicaid's Early and Periodic Screening, Diagnosis and Treatment (EPSDT) child health option. Previously, individuals with an Autism Spectrum Diagnosis (ASD) were able to receive services from independent behavioral health providers who were compensated through either the Department of Developmental Services (DDS) waiver funds, or the Department of Children and Families (DCF) flex funds, or other sources.

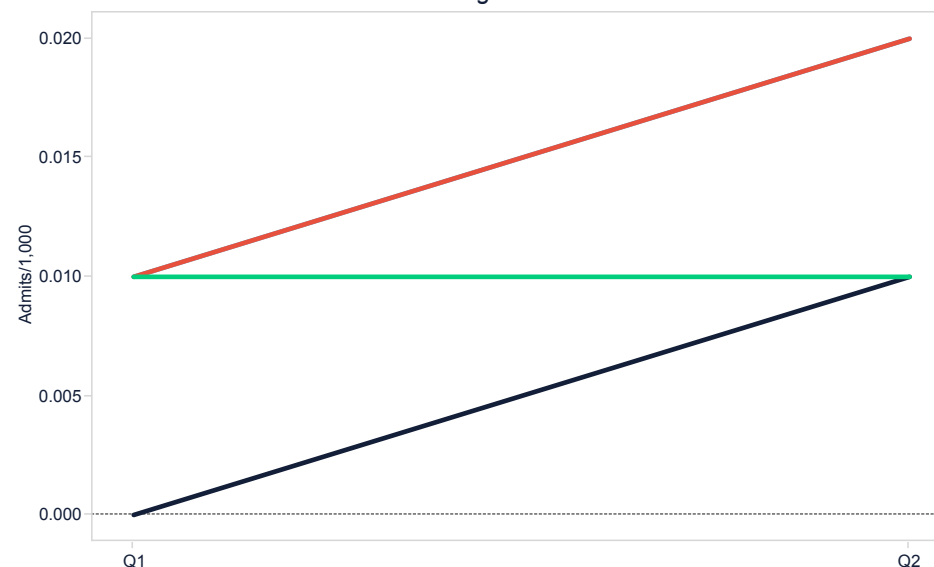
Level of Care

- Diagnostic Evaluation
- Behavior Assessment
- Plan of Care
- Service Delivery

Quarterly Autism Spectrum Disorder Services Admissions
Youth Ages 0-20



Quarterly Autism Spectrum Disorder Services Admits/1,000
Youth Ages 0-20



Autism Spectrum Disorder Services

Utilization Demographics



Eighty-four (84) unique members have accessed Autism Services in Q1 '15 and Q2 '15 through this new Medicaid program implementation.

Utilization Profile

Eighty-four (84) unique members have accessed Autism Services in Q1 '15 and Q2 '15 through this new Medicaid program implementation. Male members more than doubled female members in every level of service (Diagnostic Evaluation, Behavior Assessment, Plan of Care, and Service Delivery) accounting for 77% of admissions/service authorizations. The age group 0-6 years accounted for 44% of admissions/service authorizations while age groups 7-12 years and 13-18 years, accounted for 32% and 24% respectively. Age group 19-20 years had no admissions/service authorizations. Caucasian members accounted for 61% of admissions/service authorizations while Hispanic members made up 23% of admissions/service authorizations. Non-DCF members made up 83% of admissions/service authorizations while DCF Committed and Voluntary Service accounted for 9% and 8% of admissions/service authorizations.

Total Youth (January - June 2015) Receiving Authorized Autism Spectrum Disorder Services by Various Demographic Indicators *Gender, Age, Race, and DCF-Involvement*

Total Youth by Level of Service and Gender

Level of Care	Female	Male
Diagnostic Evaluation	4	23
Behavior Assessment	15	42
Plan of Care	15	41
Service Delivery	5	26

Total Youth by Level of Service and Age Group

Level of Care	0-6 (yrs)	7-12 (yrs)	13-18 (yrs)	19-20 (yrs)
Diagnostic Evaluation	24	3	0	0
Behavior Assessment	21	21	15	0
Plan of Care	21	20	15	0
Service Delivery	9	11	11	0

Total Youth by Level of Service and Race/Ethnicity

Level of Care	Asian	Black	Caucasian	Hispanic	Multi
Diagnostic Evaluation	1	2	12	12	0
Behavior Assessment	4	4	37	11	1
Plan of Care	4	4	36	11	1
Service Delivery	3	3	20	5	0

Total Youth by Level of Service and DCF Involvement

Level of Care	DCF Committed	Non DCF	Voluntary Services
Diagnostic Evaluation	3	24	0
Behavior Assessment	4	48	5
Plan of Care	4	48	4
Service Delivery	5	22	4

These values will not add up to the total unique youth as youth may utilize more than one service. However, each youth is only counted once in each demographic category.

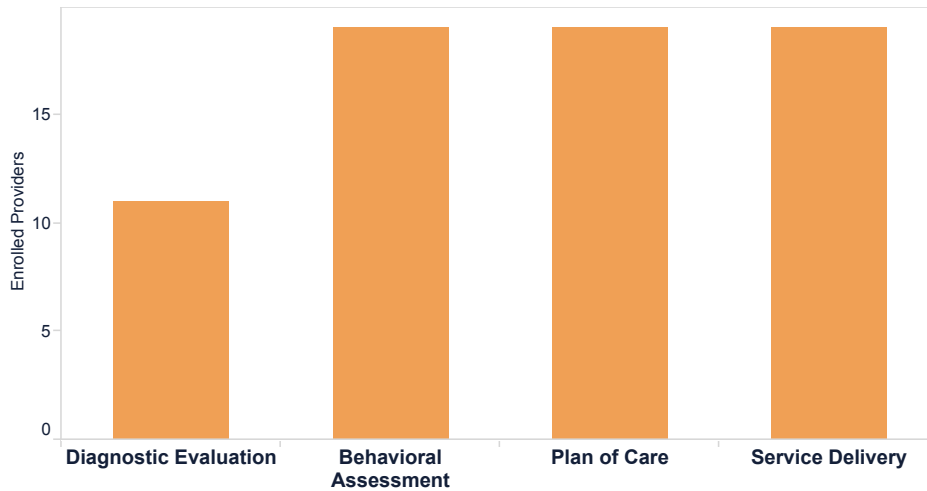
Autism Spectrum Disorder Services

Provider Volume



Autism Spectrum Disorder Services have experienced challenges in finding qualified providers willing to enroll as a Medicaid provider.

Autism Spectrum Disorder Services: Quarterly Cumulative Provider Enrollment by Service Class Year to Date
As of June 30, 2015



Autism Spectrum Disorder Services: Monthly Cumulative Provider Enrollment by Service Class

Note: A provider may perform more than one service.
There were no new providers in May.

	Q1			Q2	
	January	February	March	April	June
Diagnostic Evaluation	5	5	8	11	11
Behavioral Assessment	4	6	12	15	19
Plan of Care	4	6	12	15	19
Service Delivery	4	6	13	15	19

Provider Enrollment:

The provider network has grown from six providers in January to 24 providers as of June 30 with six additional providers in the process of enrolling. The current provider network consists of individual providers and/or organizations who vary regarding the licensure of their staff. Of the 24 providers currently enrolled, 11 providers are enrolled to complete Diagnostic Evaluations, 19 providers are enrolled to offer Behavior Assessments, 19 providers are enrolled to provide Plan of Care and 19 providers are enrolled to proceed to Service Delivery.



Hover over Puzzle Piece for Definition of Each Service Class Corresponding Above



Quarterly Residential Treatment Facility (RTC)

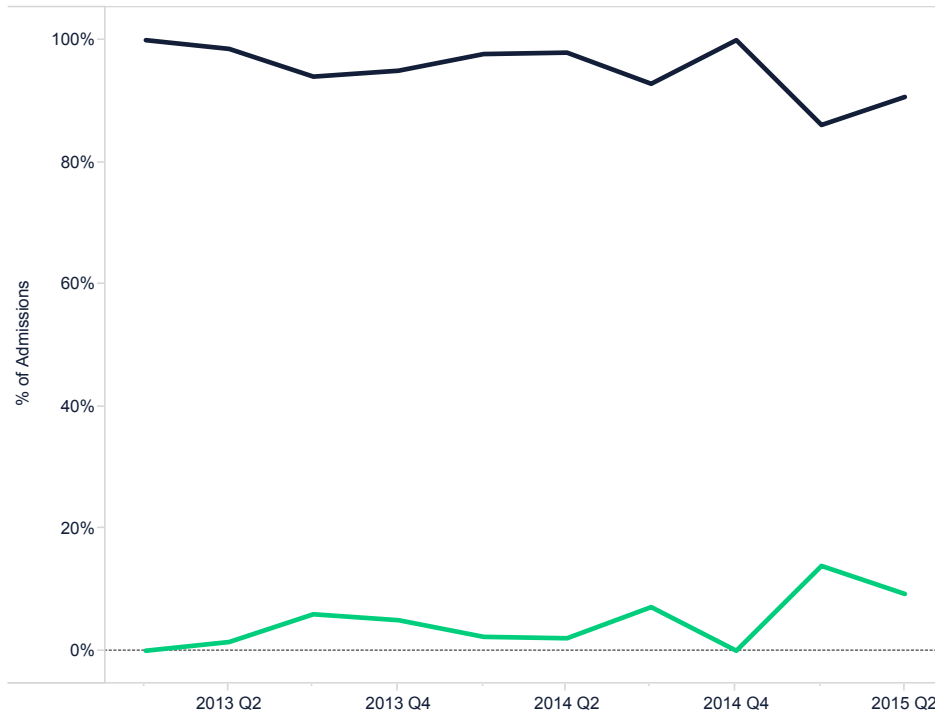
Admissions & Average Length of Stay



Admissions to out-of-state RTC facilities increased markedly in the first two quarters of 2015. (Select folder for more info)

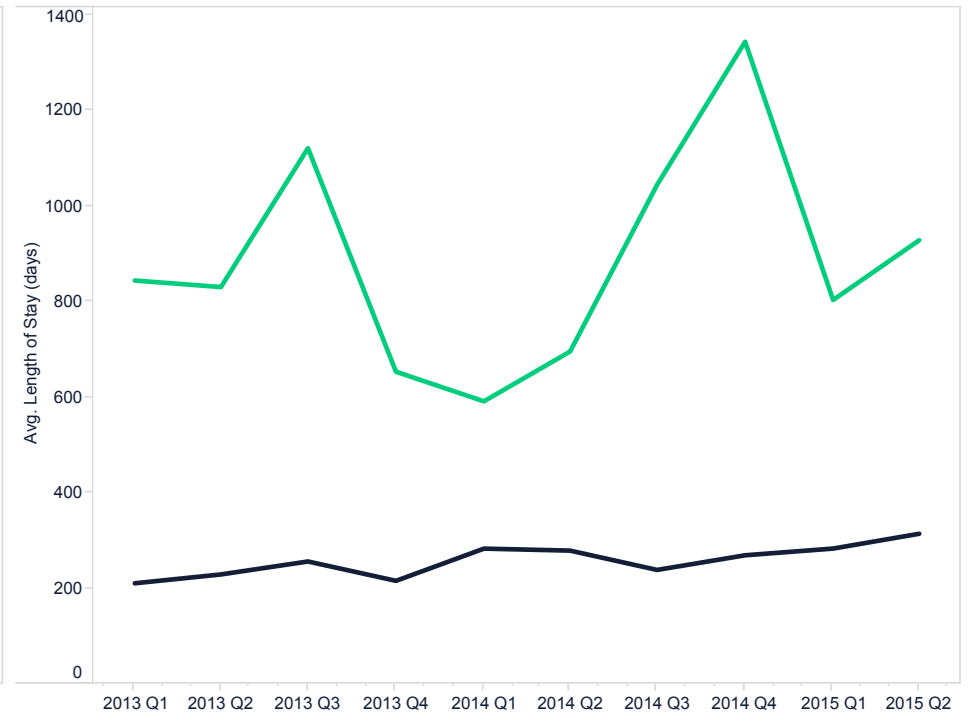
Quarterly Residential Treatment Center Admissions - Percent of Total

■ In-State ■ Out-of-State



Quarterly Residential Treatment Center Average Length of Stay (ALOS)

■ In-State ■ Out-of-State



Quarterly Appendix Graphs

IICAPS, PHP, IOP, EDT, Outpatient



Level of Care

☒ IICAPS
 ☒ PHP
 ☒ IOP
 ☒ EDT
 ☒ Outpatient

Select Various Levels of Care To View in Graphs

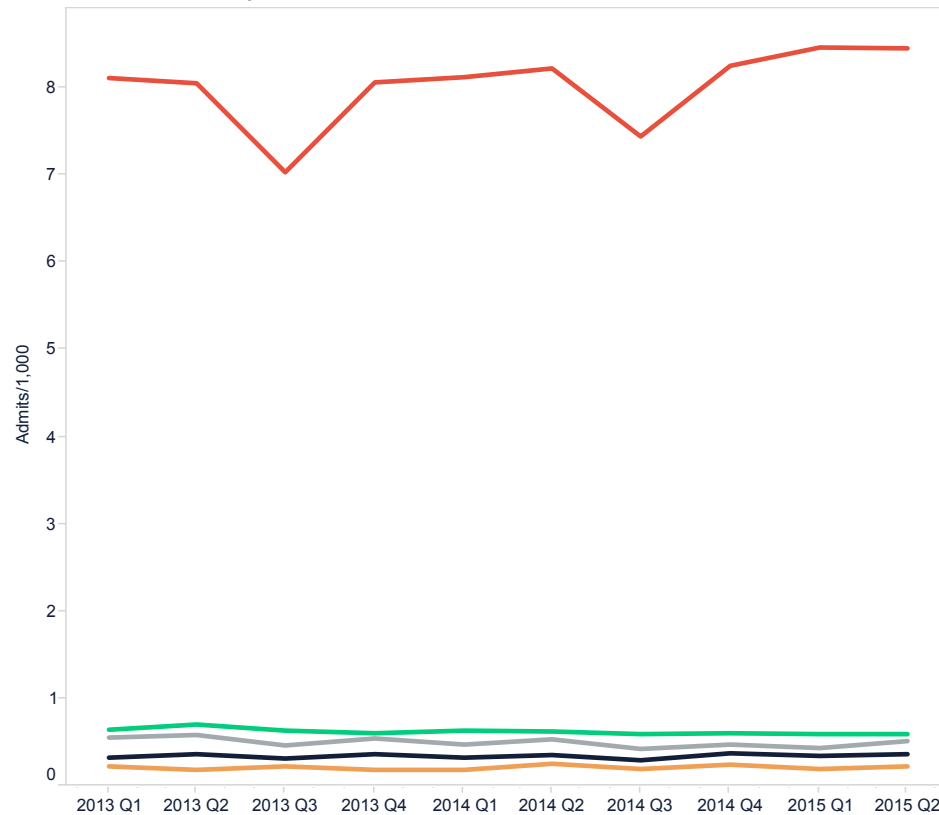
By deselecting Outpatient (OTP) you can view changes in the other levels of care.

All

Level of Care



Quarterly Admits/1,000 for Lower Levels of Care: All Youth



Quarterly Admissions for Lower Levels of Care: All Youth

