

Report Prepared By ValueOptions CT For the Department of Children and Families
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ACCESS Mental Health CT

Quarterly Progress Report

July 1, 2015 – September 30, 2015



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Introduction

ACCESS Mental Health CT is a state funded program created to ensure that all youth under 19 years of age, irrespective of insurance coverage, have access to psychiatric and behavioral health services through contact with their primary care providers (PCP). The program is designed to increase PCPs' behavioral health knowledge base so they can identify and treat behavioral health disorders more effectively and expand their awareness of local resources. ValueOptions CT, a Beacon Health Options company, contracts with three behavioral health organizations to act as Hub teams and provide support across the state: Institute of Living at Hartford Hospital, Wheeler Clinic, and Yale Child Study Center. Each Hub team consists of board-certified child and adolescent psychiatrists, a behavioral health clinician, a program coordinator, and a half-time family peer specialist. The teams are charged with providing real-time psychiatric consultation and individualized, case-based education to PCPs over the phone. Phone conversations may entail diagnostic clarification, psychopharmacology recommendations, counseling recommendations and care coordination supporting youth and their family in connecting to community resources.

This report was prepared by ValueOptions CT for the Department of Children and Families and summarizes the progress made by the ACCESS Mental Health CT program. The primary reporting period for this report is July 1, 2015 through September 30, 2015 (Q1 FY'16) which is the first quarter of the program's second year; in some metrics, totals covering the entire length of the program or "since inception" are also provided.

Data Sources

The information included in this report represents data entered into ValueOptions' Encounter System showcasing ongoing activity provided by the three ACCESS Mental Health CT Hub teams.

The data and analyses in the body of this quarterly report are based on more formal reports that have been developed specifically for ACCESS Mental Health CT and are listed below.

CTAX14002:	Practice and PCP Enrollment
CTAX14003:	Practice Non-Utilization Report
CTAX14004:	Encounter Utilization Report
CTAX14005a:	Monthly Encounter Data Sheet
CTAX14005b:	Weekly Encounter Data Sheet
CTAX14006:	Practice and PCP Enrollment by Hub
CTAX14007:	Episode of Care Report
CTAX14009:	Response Time by Activity
CTAX14011:	PCP Satisfaction Summary
CTAX15001a:	Practice Utilization History Hartford Hospital Hub

CTAX15001b:	Practice Utilization History Wheeler Clinic Hub
CTAX15001c:	Practice Utilization History Yale Child Study Hub
CTAX15005:	Unique Members Served

Methodology

The data for this report is refreshed for each subsequent set of Quarterly and Annual Progress Reports. Due to late submissions of some data reflecting practice and PCP enrollment, consultative activities and satisfaction surveys, the results may differ from the previously reported values. In most instances, the changes do not create significant differences in the reported conclusions. However, on some occasions there is sufficient variation that changes the analysis. Any analysis affected by these variations will be noted in the narrative and implications will be described.

The specific methodology for particular measures can be found in the Definitions section that concludes this report.

Enrollment

By September 30, 2015, 483 pediatric and family care practices statewide were identified as eligible for enrollment by Hub teams. The corresponding table depicts enrollment information both on the statewide and Hub specific levels. Approximately **80%** (386) of pediatric and family care practices enrolled in the program statewide. By the close of the first quarter of the second year, enrollment grew by 6 practice sites. Collectively, the enrolled practices employ 1,442 prescribing primary care providers.

ACCESS Mental Health CT				
Enrolled Practice Sites: Breakout By Provider Type				
June 1, 2014 – September 30, 2015				
	Hartford Hospital	Wheeler Clinic	Yale Child Study Center	Statewide
Enrolled Practice Sites	162	124	100	386
Pediatrics	70	62	81	213
Family Practice	91	23	11	125
Pediatric/Family Practice	1	5	3	9
Not Specified	0	34	5	39

Approximately 55% (213) enrolled practice sites were identified as pediatric, 32% (125) identified as family medicine treating the lifespan, and 2% (9) sites formed practice groups that included a combination of pediatric and family medicine sites.

Outreach efforts to offer enrollment to those that are not yet interested will continue as the program moves forward.

Youth Demographics

Collectively, the Hub teams are available to all youth in Connecticut. From June 16, 2014 through September 30, 2015, enrolled PCPs contacted their respective Hub teams requesting consultation for **1,469** unduplicated youth presenting with mental health concerns.

In Q1 FY'16, PCPs called requesting support on 306 youth, this is an increase of 104 youth when compared to Q1 of the previous fiscal year. It is important to note that Q1 FY'15 was the first quarter of the program; enrollment and utilization were just beginning.

**ACCESS Mental Health CT
Statewide Youth Demographics
Q1 FY'15 and Q1 FY'16 Comparison**

	Q1 FY'15		Q1 FY'16	
Total Youth Served*	202		306	
Gender	No.	Pct.	No.	Pct.
Male	124	61.4%	165	53.9%
Female	78	38.6%	141	46.1%
Age				
0-5	26	12.9%	25	8.2%
6-12	84	41.6%	120	39.2%
13-18	87	43.1%	157	51.3%
19+	5	2.5%	4	1.3%
Race				
Caucasian	18	8.9%	142	46.4%
African American	73	36.1%	34	11.1%
Hispanic	13	6.4%	21	6.9%
Asian	0	0.0%	2	0.7%
Other/Unknown	98	48.5%	107	35.0%
DCF Involvement				
	26	12.9%	39	12.8%

*Quarterly counts represent unduplicated youth per quarter but are not unique across fiscal years.

As mentioned in previous reports, an area of data collection needing improvement is the identification of race of youth each time the youth is served by the program. In Q1 FY'16, approximately 35% (107) of youth were entered into the encounter system with "other/unknown" race. Data entry errors were addressed during on-site visits with each Hub team during Q1 FY'16. While this is a notable improvement as compared to the previous fiscal year, there is also a remarkable improvement when comparing each month within this quarter. In Q1 FY'16, approximately 58% (73) of youth were

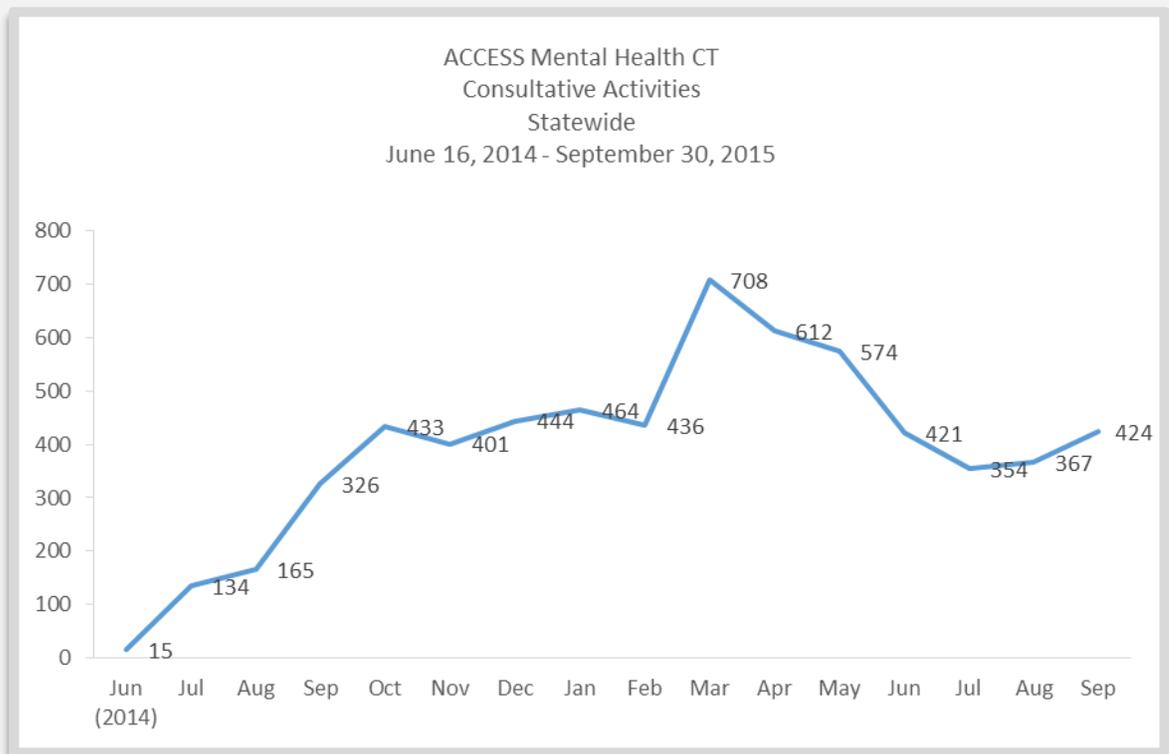
identified as “other/unknown” race in July, 28% (23) in August, and 11% (11) in September. The central administrative team will continue to monitor this; reviewing reports with the Hub teams both in statewide Hub meetings as well as on-site Hub visits.

Consultative Activities

In the first 16 months of the program, the Hub teams provided **6,278** consultative activities supporting PCPs treating youth with mental health concerns within their medical home; with approximately 1,145 completed in Q1 FY’16. Consultative activities are calls that include: telephone consultation, assistance with finding community behavioral health services, and connect to care follow up. One-time diagnostic assessments are also included.

In a month to month comparison, consultative activities ranged from 15 calls per month at start-up to a peak of 708 calls per month in March 2015. Of note, by October 2014 the program’s enrollment reached 272 which is 70% of the total volume of enrolled practices. These findings suggest that the ramp up of the program was the reason for increased volume after the first several months.

The summer months in FY2016 were somewhat lower with approximately 354 calls in July and 367 in August; with a slight incline in September 2015 with 424 calls. The Hub teams asked participating PCPs about this and they reported that the summer tends to be slower due to families taking summer vacations.



ACCESS Mental Health CT
Consultative Activities: Breakout by Type of Call
 Q1 FY'16: July 1, 2015 – September 30, 2015

Statewide	
Total Consultative Activities	1,145
Direct PCP Consultations	530
Care Coordination & Family Support	597
Face to Face Assessments	8
Other	10

Direct PCP Consultations: Of the 1,145 consultative activities across the state provided in Q1 FY'16, approximately 46% (530) were reported as direct contact with the PCPs. This includes both initial inquiries and follow up phone calls to the PCP.

Per Hub team report, approximately 99% (331 out of 336) initial PCP calls were answered by the Hub consultant within 30-minutes of the PCP's initial inquiry in Q1 FY'16; 78% of which were connected directly at the time of the call. The program benchmark for year two is that 95% of all initial PCP calls requiring a call back will be returned within 30 minutes of initial inquiry unless an alternative time was requested by the PCP. By the close of Q1 FY'16, this annual target is on track.

Care Coordination and Family Support: Approximately 52% (597 out of 1,145) of the total consultative activities were activities related to care coordination and direct family support.

Face to Face Assessments: Approximately 0.7% (8 out of 1,145) of the total consultative activities were one-time diagnostic and psychopharmacological consultations.

Consultative Episodes

A consultative episode captures the time from when a PCP first contacts their respective Hub team either by phone or in person and includes all consultative activities provided by the team necessary to support the PCP, the youth and their family. The end of an episode is determined once 60-days has passed without any Hub team support. At times, additional episodes occur for the youth. In the event a youth is noted to have multiple episodes, it means there was a period of 60 days that passed without needing Hub team support. Consultative episodes are intended to demonstrate average length of time and average number of consultative activities provided to support an individual youth.

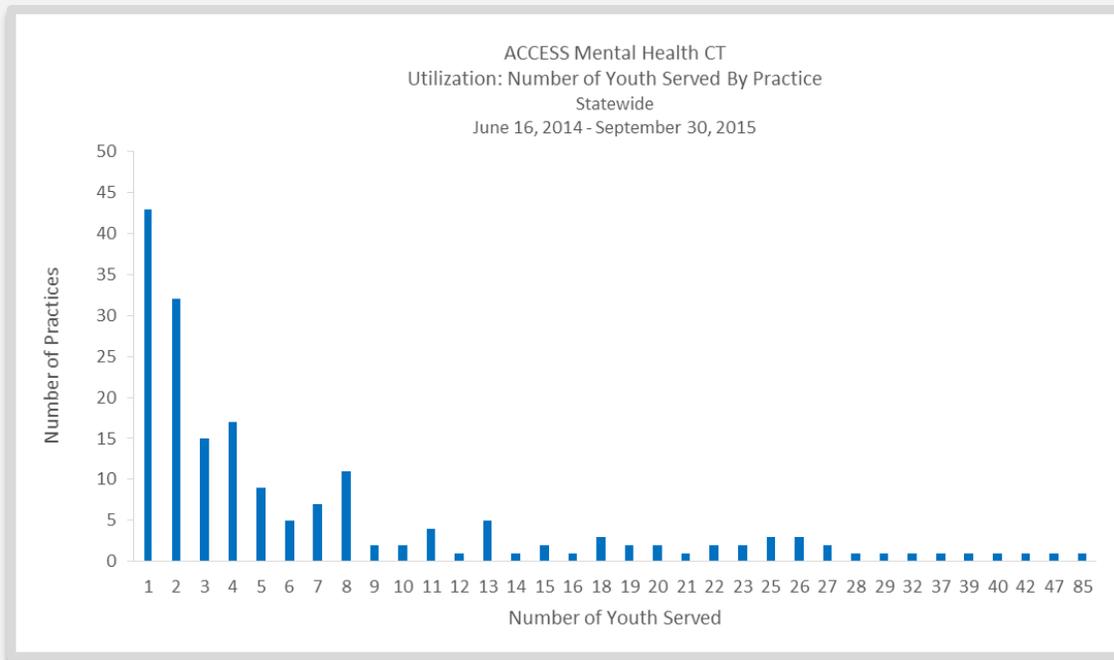
A total of **1,176** consultative episodes occurred between June 16, 2014 and September 30, 2015. While days per episode ranged from 1 day to 172 days; the statewide average number of days per episode is 16 days. Additionally, the number of consultative activities per episode ranged from 1 activity to 30 activities; the statewide average per episode is 4 consultative activities.

ACCESS Mental Health CT Consultative Episodes June 16, 2014 – September 30, 2015				
	Hartford Hospital	Wheeler Clinic	Yale Child Study Center	Statewide
Number of Youth with 1 Episode	419	454	230	1,103
Number of Youth with 2 Episodes	8	15	7	30
Number of Youth with 3 Episodes	0	2	0	2
Total Number of Episodes				
	437	493	246	1,176
Average Number of Days per Episode	18	15	15	16
Average Number of Consultative Activities per Episode	5	4	3	4

Practice Utilization

From June 16, 2014 through September 30, 2015, approximately **57%** (190 out of 333) of the enrolled practice groups utilized the program at least one time.

As noted in the Youth Demographics section, PCPs called the ACCESS Mental Health CT program seeking support on 1,469 unduplicated youth over the past 16 months. The following graph shows the number of youth that each practice called the ACCESS Mental Health CT program seeking support.



Of the 190 practice groups that used the program at least one time over the year, 186 practice groups called requesting support for a specific youth; the other 4 practices called with general mental health

questions. Approximately **77%** (143 out of 186) called back asking for help on another patient in their medical home. It is important to note that the practices seeking support on 20 or more youth are equally distributed across the state. In order to learn more about utilization, one of the FY2016 targets includes on-site visits to a minimum of six utilizing practice groups. A detailed summary will be included in the annual progress report.

Practice Non-Utilization

As noted in the ACCESS Mental Health first annual progress report, approximately 146 of the primary care practice groups enrolled in the program had not yet used the service by June 30, 2015. In May 2015 the Hub teams outreached to these practice groups to learn more about why they had not yet used the program. In response to phone outreach, Hub teams also created reminder materials to help keep practices updated and aware of the ACCESS Mental Health CT program. Program statistics and description of services were also included. As a result of the outreach efforts made by each Hub team, approximately 6% (9 out of 146) accessed support from the program by September 30, 2015.

The Hub teams are expected to repeat this process again in December 2015 and will include reminder materials, program statistics, and a description of services to help keep practices updated and aware of the program.

Program Satisfaction

After every consultative activity, the Hub consultant enters the primary care provider’s response to the question: “rate your satisfaction with the helpfulness of the ACCESS MH program” on a scale of 1-5; 5 being excellent. For Q1 FY’16, the average statewide satisfaction score is **4.96**. While a small number of callers across the state rated single calls low, noted in both Q3 FY’15 and Q4 FY’15, the overwhelming majority found the program support to be “excellent”.

The program benchmark for year two is that 85% of participating PCPs that have used the program will rate their experience with an average score of 4 or greater. Central administration and the Hub teams will continue to monitor this monthly. By the close of Q1 FY’16, this annual target is on track.

ACCESS Mental Health CT Satisfaction Scores: Statewide July 1, 2014 – September 30, 2015					
	Q1 FY’15	Q2 FY’15	Q3 FY’15	Q4 FY’15	Q1 FY’16
Average Satisfaction Score	4.81	4.90	4.90	4.92	4.96
Maximum Satisfaction Score	5	5	5	5	5
Minimum Satisfaction Score	3	3	1	1	3

ACCESS Mental Health CT Satisfaction Scores: Hub Breakout Q1 FY'16: July 1, 2015 – September 30, 2015				
	Hartford Hospital	Wheeler Clinic	Yale Child Study Center	Statewide
Average Satisfaction Score	4.91	4.98	4.99	4.96
Maximum Satisfaction Score	5	5	5	5
Minimum Satisfaction Score	3	3	4	3

PCP Annual Satisfaction Survey: A survey will be distributed to participating PCPs each year. PCPs' perceptions of access to care, ability to meet the needs of patients with mental health concerns, timeliness of access to child psychiatry and willingness to prescribe psychotropic medication are expected to change as the program continues to support them. Questions for the FY2016 survey will be developed in Q2 FY'16 with a targeted distribution in Q3 FY'16.

PCP Advisory Group: Additionally, a PCP Advisory Group comprised of primary care physicians was established in August 2014. The physicians selected for this group are not only utilizers of the program, but also have leadership roles within the pediatric primary care community. The group gathers routinely and has been helpful at providing individual experience as well as a system perspective.

Education

All ACCESS Mental Health CT consultations strive to provide individualized, case-based education. The program also creates educational opportunities through traditional regionally based didactic learning sessions. In year two of the program, the Hub teams are each charged with providing a minimum of five (5) behavioral health trainings throughout the contract year. Trainings may be in the form of on-site practice based learnings, conference based lectures, or webinars. A detailed summary will be included in the annual progress report.

Definitions

- **Consultative Activities:** any activity provided by Hub team staff entered into the Encounter system including incoming/outgoing calls to PCPs, BH providers, and Family, as well as face to face assessments provided by Hub staff.

Consultative Activities/Type of Call are grouped by:

- **Direct PCP Consultations** (PCP Phone Office, Phone PCP Follow up, and Hallway PCP Office): direct phone contact with the primary care provider
- **Care Coordination & Family Support** (Care Coordination, Care Coordination Follow Up, Case Conference, Phone Member Family, and Peer Specialist Follow Up): direct phone contact with

the youth and their family or providers involved in the behavioral health care provided to the youth

- **Face to Face Assessments** (Face to Face visit and Tele-Psychiatry): a face-to-face diagnostic evaluation or psychopharmacological consultation provided by the Hub psychiatrist or clinician.
- **Other** (Phone Other, Materials Request, BH Network Management, Hallway Other, Office Education)

- **Encounter System**: a secure, HIPAA compliant online data system that houses structured electronic forms. Hub staff enter information provided by the PCP for every encounter/consultative activity into this online database. The encounter data fields include: the date, the primary care practice/provider from which the call originates, demographics of the youth subject of the call, encounter type, response time, reason for contact, presenting mental health concerns, diagnosis, medication, and outcome of the call.
- **Enrollment**: a formal relationship between the primary care practice and Hub team formed after the Hub psychiatrist meets with the primary care practice's medical director and any PCPs available for an on-site visit. At that time the Hub team psychiatrist explains what the program does/does not provide and an enrollment agreement form is signed.
- **Consultative Episode**: methodology includes a "starter activity": Phone PCP Office or Hallway PCP Office. These two activities are entered into the Encounter system by the Hub staff. They are defined as starters because they are the only two activities that are selected when the PCP initiates support from the Hub – either by phone or hallway (in person). This starter activity can stand alone to equal an episode or can be paired with one or more additional activities to equal an episode. An episode is closed once 60-days has passed without any Hub team support.
- **Hub Team**: the behavioral health personnel contracted to provide ACCESS Mental Health CT services. Each Hub team consists of board certified child and adolescent psychiatrists, licensed masters' level behavioral health clinician, program coordinator, and a half-time family peer specialist.
- **PCP**: an individual primary care clinician employed by a primary care practice. A PCP may be a pediatrician, family physician, nurse practitioner, or physician assistant.
- **Primary Care Practice Group**: a primary care practice that identifies itself as a group by listing a primary site and additional satellite practice sites; sharing physicians, patients, and policies and procedures. In this measure a group is captured as a count of one regardless of how many sites are listed in the group.
- **Primary Care Practice Groups Utilized**: any practice group noted having at least one consultative activity during the reporting period.
- **Primary Care Practice Site**: an individual primary care office; uniquely identified by address.

- Youth Served: an unduplicated count of all youth served by the ACCESS Mental Health CT program captured on a member specific encounter form entered by the Hub staff into the Encounter System during the reporting period.

ACRONYMS

ACCESS	Access to all of C onnecticut's C hildren of E very S ocioeconomic S tatus
BH	Behavioral Health
CT	Connecticut
DCF	Department of Children and Families
DX	Diagnosis
MH	Mental Health
PCP	Primary Care Provider
VO	ValueOptions
SA	Substance Abuse
TX	Treatment