

Report Prepared By Beacon Health Options For the Department of Children and Families
Submitted February 29, 2016



ACCESS Mental Health CT

Quarterly Progress Report

October 1, 2015 – December 31, 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. Beacon Health Options 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 Beacon Health Options 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 October 1, 2015 through December 31, 2015 (Q2 FY'16); in some metrics, totals covering the entire length of the program or "since inception" June 16, 2014 through December 31, 2015 are also provided. Date ranges are clearly labeled on each graph or table depicting the corresponding timeframes.

Data Sources

The information included in this report represents data entered into Beacon Health Options' 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, number of youth served, consultative activities and satisfaction rates, 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 December 31, 2015, 483 pediatric and family care practice sites statewide were identified as eligible for enrollment. The corresponding table depicts enrollment information both on the statewide and Hub specific levels. Approximately **81%** (389) of pediatric and family care practice sites enrolled in the program statewide. By the end of Q2 FY'16, enrollment grew by 3 practice sites. Collectively, the enrolled practices employ 1,453 prescribing primary care providers.

ACCESS Mental Health CT				
Enrolled Practice Sites: Breakout By Provider Type				
June 1, 2014 – December 31, 2015				
	Hartford Hospital	Wheeler Clinic	Yale Child Study Center	Statewide
Enrolled Practice Sites	162	125	102	389
Pediatrics	70	63	83	216
Family Practice	91	23	11	125
Pediatric/Family Practice	1	5	3	9
Not Specified	0	34	5	39

Approximately 56% (216) enrolled practice sites were identified as pediatric, 32% (125) identified as family medicine treating the lifespan, 2% (9) sites formed practice groups that included a combination of pediatric and family medicine sites, and 10% (39) practice sites were entered into the system without a specific provider type identified.

To date, approximately 19% (94) of primary care practices across the state are not interested in the program, however, outreach continues to offer enrollment. These efforts include outreach to both practices that had previously declined enrollment last year and those that had not yet decided. Marketing strategies include crafted letters to the targeted audience detailing a program description of services and program progress to date. Speaking engagements in the community, trainings, and webinars also include enrollment instruction information.

Youth Demographics

Collectively, the Hub teams are available to all youth in Connecticut. Demographic information is captured the first time the PCP calls requesting support on that respective youth and is then entered into the Encounter System.

The following table outlines the total unique youth served since inception of the program. From June 16, 2014 through December 31, 2015, enrolled PCPs contacted their respective Hub teams requesting consultation for **1,732** unduplicated youth presenting with mental health concerns. This is an increase of 263 unique youth since last quarter where the program to date (June 16, 2014 – September 30, 2015) total was noted as 1,469 unduplicated youth.

ACCESS Mental Health CT Youth Demographics June 16, 2014– December 31, 2015				
	Hartford Hospital	Wheeler Clinic	Yale Child Study Center	Statewide
Total Unique Youth	717	668	347	1,732
Gender				
Male	397	377	175	949
Female	320	291	172	783
Age				
0-5 years	67	52	39	158
6-12 years	260	272	125	657
13-18 years	369	337	171	877
19+ years	21	7	12	40
Race/Ethnicity				
Caucasian	320	150	183	653
African American	168	22	52	242
Hispanic	47	32	28	107
Asian	6	4	4	14
Other/Unknown	176	460	80	716
DCF Involved	77	77	61	215

Of the 1,732 unique youth served statewide, approximately 51% (877) were adolescents between the ages of 13 and 18 years old. Approximately 12% (215) were identified as having DCF involvement.

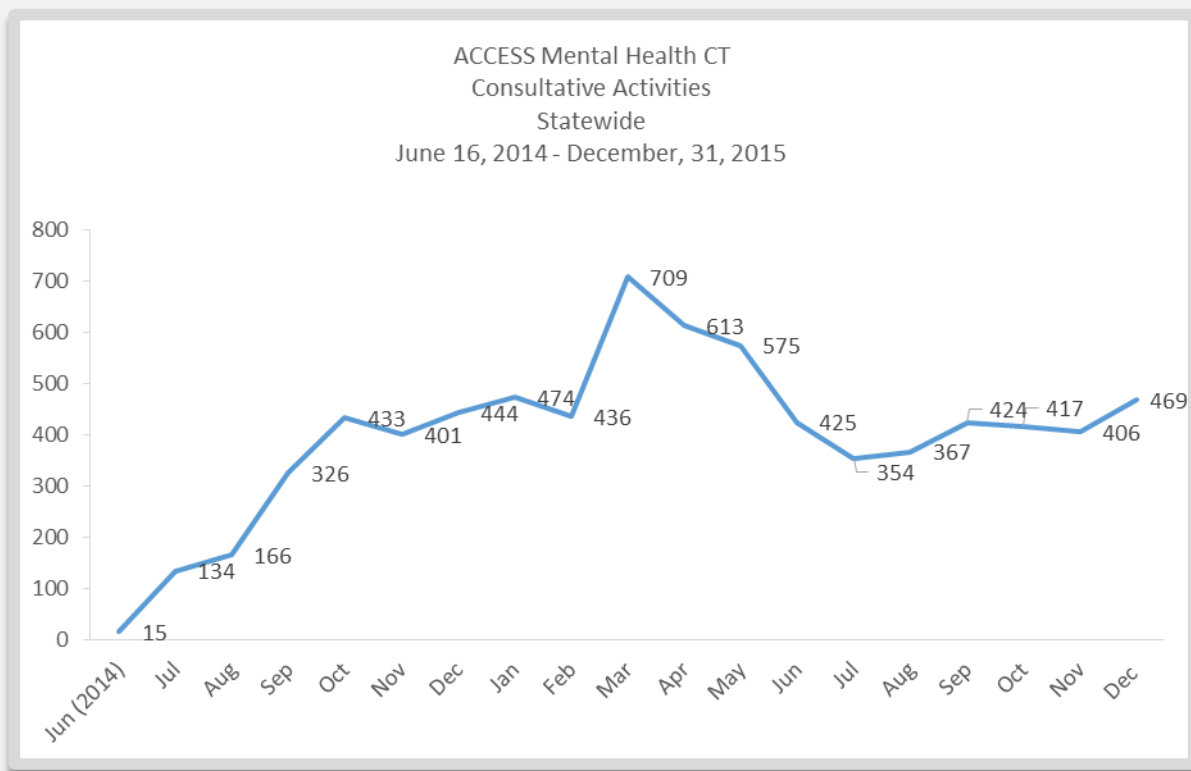
As mentioned in previous reports, an area of data collection needing improvement is the identification of race of youth at the time the youth is first served by the program. Data entry errors were addressed during on-site visits with each Hub team during Q1 FY'16. In Q2 FY'16, approximately 10% (26) of youth were entered into the Encounter System with "other/unknown" race. This is a notable improvement both as compared to Q1 FY'16 (35%) and to Q2 of the previous fiscal year (57%).

Beacon Health Options' central administrative team has instructed the Hub teams to continue to improve data collection both at the point of first entry into the Encounter System, as well as follow up entries for that youth. It is expected that this measure will continue to show improvement, however, changes or updates will not be made on youth unless their PCP calls back for support on their care.

Consultative Activities

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 this measure.

From June 16, 2014 through December 31, 2015, the Hub teams provided **7,588** consultative activities supporting PCPs treating youth within their medical home. Approximately 1,292 consultations were completed in Q2 FY'16. In a month to month comparison, consultative activities ranged from 15 calls per month at start-up to a peak of 709 calls per month in March 2015. As noted in last quarter's report, the summer months in Q1 FY'16 were somewhat lower, however, Q2 FY'16 showed an average of 431 calls which is comparable to the same time last year with an average of 426 calls in Q2 FY'15.



ACCESS Mental Health CT
Consultative Activities: Breakout by Type of Call

Q2 FY'16: October 1, 2015 – December 31, 2015

	Hartford Hospital	Wheeler Clinic	Yale Child Study Center	Statewide
Total Consultative Activities	564	472	256	1,292
Direct PCP Consultations	249	252	77	578
Care Coordination & Family Support	312	213	175	700
Face to Face Assessments	2	5	3	10
Other	1	2	1	4

*The Definition section at the end of this report has a complete list of consultative activities that fall within each category.

Direct PCP Consultations: Of the 1,292 consultative activities across the state provided in Q2 FY'16, approximately 45% (578) were reported as direct contact with the PCPs. This includes both initial inquiries and follow up phone calls to the PCP. This is 10 percentage points higher when compared to Q2 of the previous fiscal year (35% or 446). We suspect that the year over year increase in type of consults is a direct result of the reinforcement to the model made by Beacon Health Options' central administrative team in which all initial calls require a direct PCP to Psychiatrist consultation.

Per Hub team report, approximately 96% (384 out of 400) of initial PCP calls were answered by the Hub team's consulting Psychiatrist within 30-minutes of the PCP's initial inquiry in Q2 FY'16; 82% (327 out of 400) 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. As of the close of Q2 FY'16, this annual target is on track.

Care Coordination and Family Support: Approximately 54% (700 out of 1,292) of the total consultative activities for this quarter were activities related to care coordination and direct family support.

Face to Face Assessments: Approximately 0.7% (10 out of 1,292) of the total consultative activities were one-time diagnostic and psychopharmacological assessments.

As shown in the table above, the call volume between Hub teams is notable. As indicated in enrollment numbers, Hartford Hospital's designated area supports more enrolled primary care practices as compared to the other two Hub teams. However, more youth live in Yale Child Study Center's designated area. Continued analysis to better understand the differences in utilization patterns across the state is essential. Preliminary hypotheses include missed data entries by Hub staff resulting in under-reported values, as well as assumptions that pockets of lower Fairfield County contain more PCPs resistant to integrating mental health within their medical home, therefore, not seeking educational support from the ACCESS Mental Health program. Yale Child Study Center Hub team in

collaboration with Beacon Health Options' central administrative team will continue to develop ways to outreach and engage the PCPs in these areas.

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 **1,343** consultative episodes occurred between June 16, 2014 and December 31, 2015. While days per episode ranged from 1 day to 172 days; the statewide average number of days per episode is 17 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.

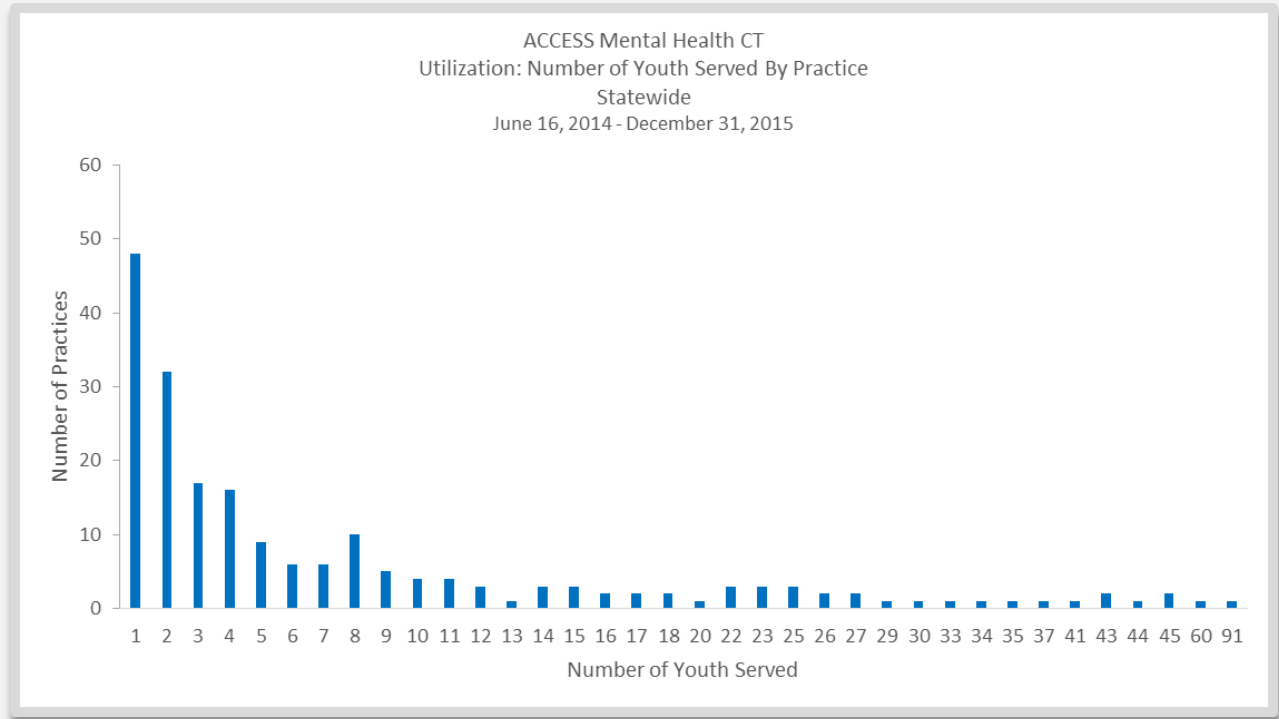
ACCESS Mental Health CT Consultative Episodes June 16, 2014 – December 31, 2015				
	Hartford Hospital	Wheeler Clinic	Yale Child Study Center	Statewide
Number of Youth with 1 Episode	461	522	257	1,240
Number of Youth with 2 Episodes	14	18	10	42
Number of Youth with 3 Episodes	0	2	0	2
Total Number of Episodes				
	496	567	280	1,343
Average Number of Days per Episode	18	16	15	17
Average Number of Consultative Activities per Episode	5	4	3	4

Practice Utilization

At enrollment, practice sites were asked to identify if they were a stand-alone practice or a practice with a primary site and additional satellite sites that shared physicians, patients, and policies and procedures. To eliminate the possibility of inflation, practice utilization is measured by practice groups; a stand-alone practice is counted once and a practice with multiple sites is also counted once. As sites indicated their practice group status, approximately **336 practice groups** with a total of 389 practice sites were formed.

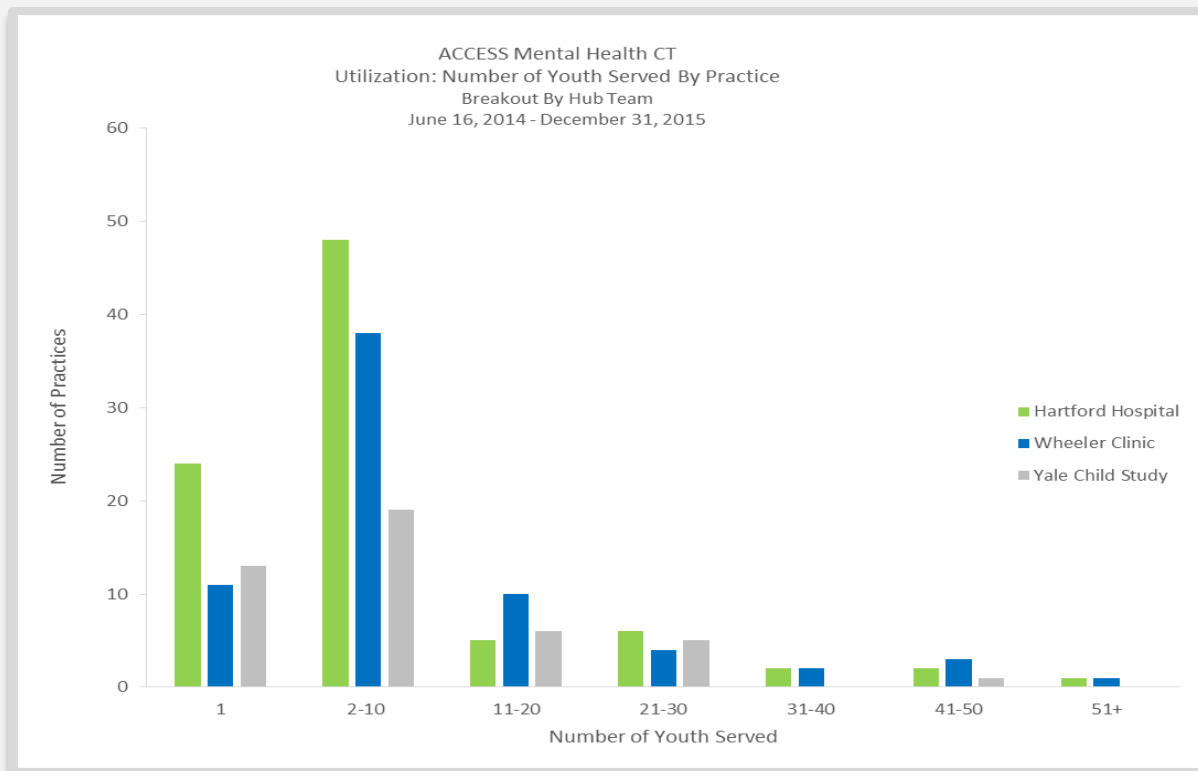
From June 16, 2014 through December 31, 2015, approximately **61%** (204 out of 336) of the enrolled primary care practice groups utilized the program at least one time. This is a 4 percentage point increase in the utilization rate compared to last quarter's rate of 57% (190 out of 333).

As noted in the Youth Demographics section of this report, PCPs called the ACCESS Mental Health CT program seeking support on 1,732 unduplicated youth over the past year and a half. The following graph shows the number of youth that each practice group called the ACCESS Mental Health CT program seeking support.



Of the 204 practice groups that used the program at least one time since inception, 201 practice groups called requesting support for a specific youth; the other 3 practice groups called with general mental health questions.

Statewide approximately **76%** (153 out of 201) of the practice groups that engaged in youth-specific consultation called back asking for help on another patient within their medical home. There are three practice groups that are notable for having the highest volume of youth supported by the program. One practice called requesting help with approximately 91 unique youth, one with approximately 60 unique youth, and one with approximately 45 unique youth. Of note, these practices are distributed across the three Hub teams. While call volume is noted to be higher for Hartford Hospital and Wheeler Clinic as compared to Yale Child Study Center, this measure shows that there are practice groups that are finding the program useful and helpful and are calling back for additional support from all three Hub teams.



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

Despite being enrolled in the program, approximately 136 practice groups have not yet used the program as of December 7, 2015. The Hub teams were provided the list of their respective enrolled non-using practice groups and are expected to outreach to them within the next quarter to identify reasons for not using the program. Included in the outreach, the teams will also distribute reminder materials that contain program statistics and a description of services to help keep practices updated and aware of the program. A summary of their findings will be included in the annual report.

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 Q2 FY’16, the average statewide satisfaction score is **4.96**. While a small number of callers across the state rated single calls low, the overwhelming majority continue to find 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. Beacon Health Options’ central administrative team and the Hub teams will continue to monitor this monthly. As of the close of Q2 FY’16, this annual target is on track.

ACCESS Mental Health CT Satisfaction Scores: Statewide Quarterly Comparison July 1, 2014 – December 31, 2015						
	Q1 FY'15	Q2 FY'15	Q3 FY'15	Q4 FY'15	Q1 FY'16	Q2 FY'16
Average Satisfaction Score	4.81	4.90	4.90	4.92	4.96	4.96
Maximum Satisfaction Score	5	5	5	5	5	5
Minimum Satisfaction Score	3	3	1	1	3	1

ACCESS Mental Health CT Satisfaction Scores: Hub Breakout Q2 FY'16: October 1, 2015 – December 31, 2015				
	Hartford Hospital	Wheeler Clinic	Yale Child Study Center	Statewide
Average Satisfaction Score	4.93	5.00	4.97	4.96
Maximum Satisfaction Score	5	5	5	5
Minimum Satisfaction Score	4	3	1	1

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	Beacon Health Options
SA	Substance Abuse
TX	Treatment