

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

Quarterly Progress Report

July 1, 2016 – September 30, 2016



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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 July 1, 2016 through September 30, 2016 (Q1 FY'17); in some metrics, totals covering the entire length of the program or "since inception" June 16, 2014 through September 30, 2016 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
CTAX14007:	Episode of Care Report
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 September 30, 2016, 449 pediatric and family care practice sites statewide were identified as eligible for enrollment; this is a slight change from previously reported totals due to the closing of sites (both enrolled and not enrolled) due to retirement or change in type of care the practice provides.

The corresponding table depicts enrollment information both on statewide and Hub specific levels. Approximately **87%** (390) of pediatric and family care practice sites enrolled in the program statewide. By the end of Q1 FY'17, 8 new practice sites enrolled. Collectively, the enrolled practices employ 1,539 prescribing primary care providers. Hartford Hospital enrolled approximately 90% (160 out of 178) of the eligible practice sites within their designated service area. Wheeler Clinic enrolled 81% (129 out of 160) of their eligible practice sites and Yale Child Study Center enrolled approximately 91% (101 out of 111) practice sites within their designated service area.

ACCESS Mental Health CT Enrolled Practice Sites: Breakout By Provider Type June 1, 2014 – September 30, 2016				
	Hartford Hospital	Wheeler Clinic	Yale Child Study Center	Statewide
Total Eligible Practice Sites	178	160	111	449
Enrolled Practice Sites	160	129	101	390
Pediatrics	71	66	80	217
Family Practice	86	25	11	122
Pediatric/Family Practice	2	5	3	10
Not Specified	1	33	7	41

Approximately 56% (217) enrolled practice sites were identified as pediatric, 31% (122) identified as family medicine treating the lifespan, 3% (10) sites formed practice groups that included a combination of pediatric and family medicine sites, and approximately 10% (41) practice sites were entered into the system without a specific provider type identified.

To date, approximately 13% (59) of primary care practices across the state are not interested in the program, however, the Hub teams continue to outreach and offer enrollment.

Youth Demographics

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

Since inception of the program to date, June 16, 2014 through September 30, 2016, enrolled PCPs contacted their respective Hub teams requesting consultation for **2,601** unduplicated youth presenting with mental health concerns. This is an increase of 270 unique youth since last quarter where the program to date (June 16, 2014 – June 30, 2016) total was noted as 2,331 unduplicated youth.

The following table depicts a quarterly comparison of youth served by the program from Q1 FY'16 to Q1 FY'17; counts are unique per quarter but are not unique across fiscal years. Approximately 365 youth were supported by the program in Q1 FY'17 which is an increase of 59 youth as compared to the same quarter in the previous fiscal year (Q1 FY'16, 306). The demographic breakout remains fairly stable across quarters. As for gender, males maintain a higher representation. As for age, the 13 to 18 year old adolescent group maintains the highest volume. It is important to note, however, the volume of young adults (19 years and older) continues to increase with approximately 22 young adults served in Q1 FY'17. As for race, white youth maintain the highest representation. 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. In Q1 FY'17, approximately 4% (14) of youth were entered into the Encounter System with "unknown" race. This is a notable improvement as compared to Q1 FY'16 (29%,90).

ACCESS Mental Health CT Statewide Youth Demographics July 1, 2015 – September 30, 2016										
	Q1 FY'16		Q2 FY'16		Q3 FY'16		Q4 FY'16		Q1 FY'17	
Total Youth Served*	306		276		282		347		365	
Gender	No.	Pct.	No.	Pct.	No.	Pct.	No.	Pct.	No.	Pct.
Male	164	54%	150	54%	174	62%	198	57%	203	56%
Female	142	46%	126	46%	108	38%	149	43%	162	44%
Age										
0-5	25	8%	23	8%	25	9%	46	13%	35	10%
6-12	120	40%	104	38%	106	38%	130	37%	133	36%
13-18	157	51%	138	50%	130	46%	155	45%	175	48%
19+	4	1%	11	4%	21	7%	16	5%	22	6%
Race										
White	142	47%	187	68%	171	61%	205	59%	241	66%
Black	34	11%	31	11%	37	13%	47	14%	45	12%
Hispanic	22	7%	29	10%	37	13%	51	15%	51	14%
Asian	3	1%	2	1%	6	2%	12	3%	7	2%
Other	15	5%	8	3%	5	2%	7	2%	7	2%
Unknown	90	29%	19	7%	26	9%	25	7%	14	4%
DCF Involvement										
	40	13%	32	12%	38	13%	49	14%	41	11%

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

Of the 365 youth served in Q1 FY'17, approximately 35% (128) youth were supported by Hartford Hospital, 36% (131) were supported by Wheeler Clinic and 29% (106) youth were supported by Yale Child Study Center.

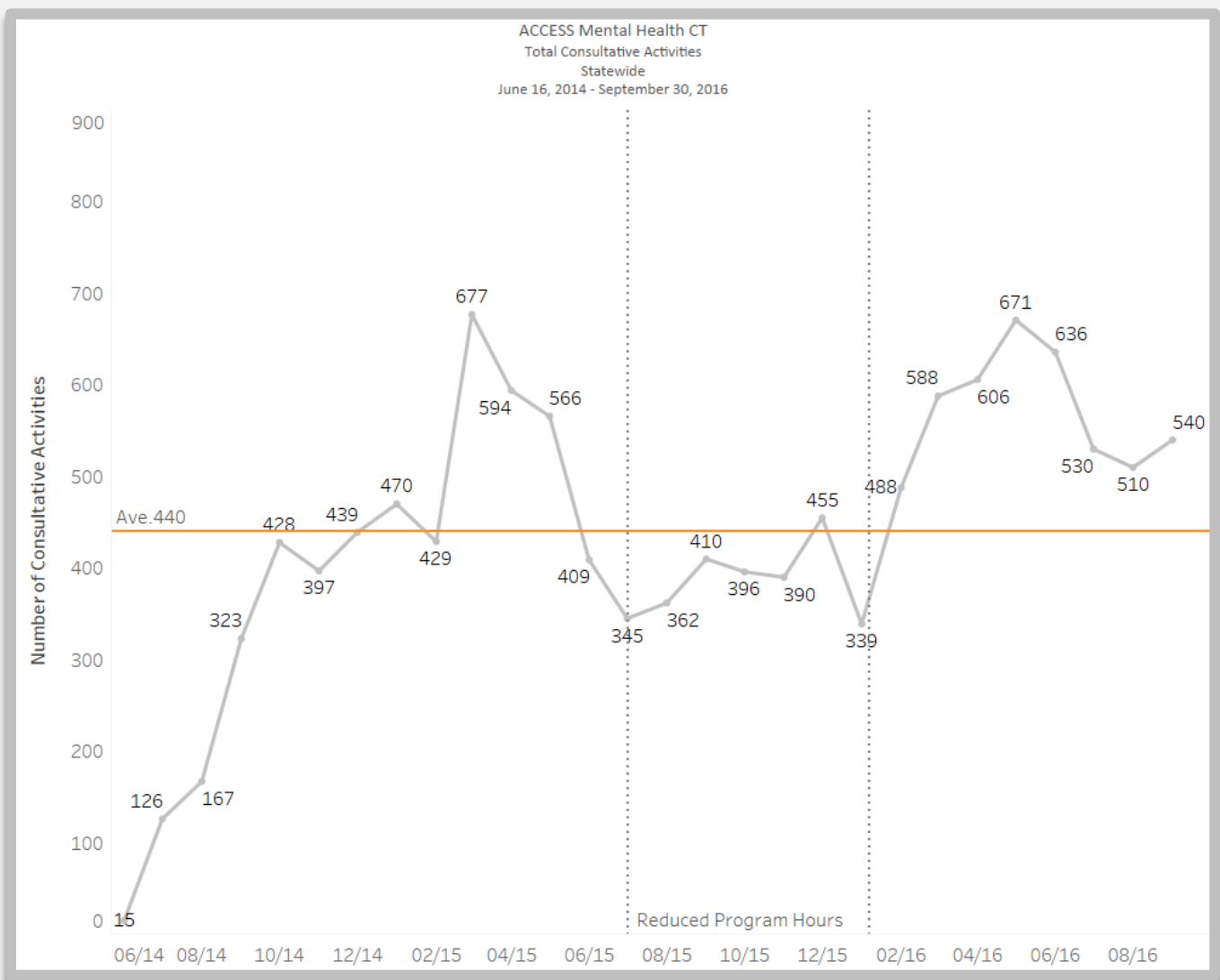
ACCESS Mental Health CT Youth Demographics: Hub Breakout Q1 FY'17								
	Hartford Hospital		Wheeler Clinic		Yale Child Study Center		Statewide	
Total Youth Served	128		131		106		365	
Gender	No.	Pct.	No.	Pct.	No.	Pct.	No.	Pct.
Male	67	52%	75	57%	61	58%	203	56%
Female	61	48%	56	43%	45	42%	162	44%
Age								
0-5	15	12%	16	12%	4	4%	35	10%
6-12	48	37%	49	38%	36	34%	133	36%
13-18	61	48%	62	47%	52	49%	175	48%
19+	4	3%	4	3%	14	13%	22	6%
Race								
White	89	70%	93	71%	59	56%	241	66%
Black	18	14%	5	4%	22	21%	45	12%
Hispanic	13	10%	22	17%	16	15%	51	14%
Asian	2	2%	4	3%	1	1%	7	2%
Other	3	2%	2	1%	2	2%	7	2%
Unknown	3	2%	5	4%	6	5%	14	4%
DCF Involvement								
	9	7%	17	13%	15	14%	41	11%

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.

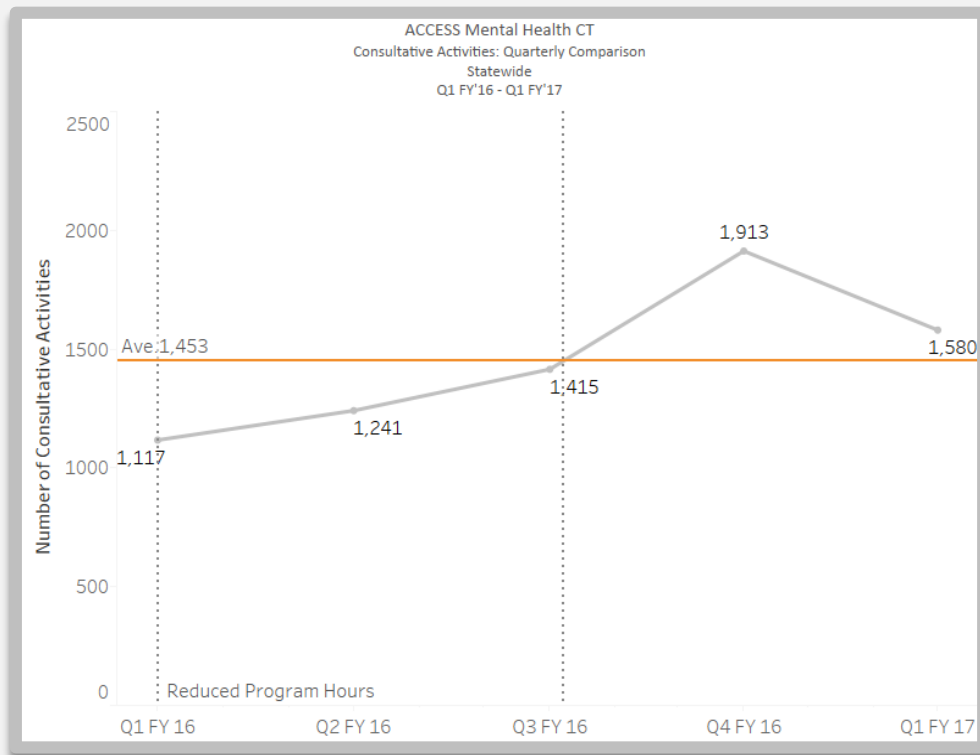
Since inception of the program to date, June 16, 2014 through September 30, 2016, the Hub teams have provided **12,306** consultative activities supporting PCPs treating youth within their medical home with an average of 440 consults per month. This is an increase of 1,225 encounters since last quarter when 11,081 consultative activities was reported.

However, this total was adjusted after an audit of charts found that one Hub team had entered 355 encounters into the system in error. This procedure error was corrected, the 355 encounters were deleted, and monthly totals were adjusted.

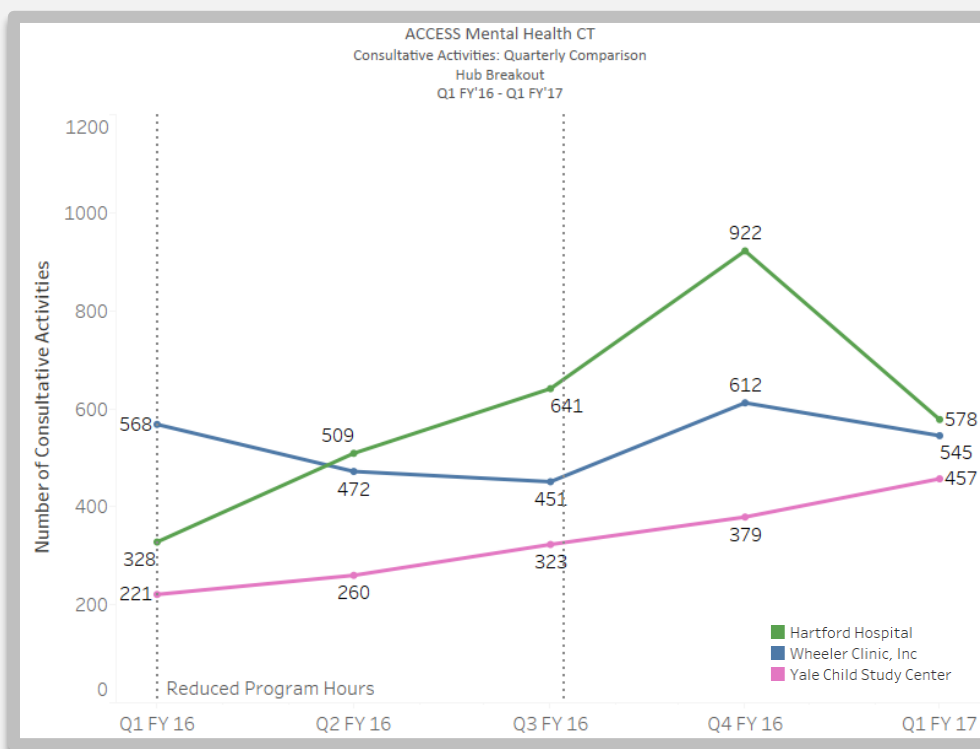


Approximately 1,580 consults were provided in Q1 FY'17, which is an increase of 463 consults when compared to the same quarter in the previous fiscal year (1,117 in Q1 FY'16). A lower volume of consults is expected to occur during the first quarter of each year given that primary care practices see fewer children during the summer. However, Q1 FY'17 is a better representation of volume as compared to Q1 FY'16 when the program hours were reduced.

Of the 1,580 total consults provided in Q1 FY'17, approximately 60% (941) were for youth with an identified commercial insurance plan such as Aetna or Anthem BCBS of CT; 36% (564) were for youth with HUSKY coverage. Approximately 4% (71) were consultative activities captured for youth with an unidentified insurance coverage and less than 1% (4) were identified as having no coverage at all.



Of the 1,580 consults provided in Q1 FY'17, Hartford Hospital provided the highest volume with 578 consults, Wheeler clinic provided 545 consults, and Yale Child Study provided 457 consults in this quarter. Q1 FY'17 is the first quarter since inception that the three Hub teams provided a fairly equal amount of consults with 37% (578) 34% (545), and 29% (457) consults respectively.



Direct PCP Consultations: Of the 1,580 consultative activities provided throughout the state in Q1 FY'17, approximately 37% (584) 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 98% (293 out of 300) of initial PCP calls were answered by the Hub team's consulting psychiatrist within 30-minutes of the PCP's initial inquiry in Q1 FY'17; 47% (142 out of 300) of which were connected directly at the time of the call. The program benchmark for year three 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 Q1 FY'17, this annual target is on track.

Care Coordination and Family Support: Approximately 61% (969 out of 1,580) of the total consultative activities for Q1 FY'17 were activities related to care coordination and direct family support.

Face to Face Assessments: Approximately 1% (23 out of 1,580) of the total consultative activities were one-time diagnostic and psychopharmacological assessments. Hartford Hospital provided one face to face assessment, Wheeler Clinic provided 10, and Yale Child Study Center provided 12 face to face assessments this quarter. Approximately 165 face to face assessments have occurred across the state since inception of the program.

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 **1,866** consultative episodes occurred between June 16, 2014 and September 30, 2016. This is an increase of approximately 5 episodes since last quarter where the program to date (June 16, 2014 – June 30, 2016) total was noted as 1,861 episodes. The statewide average of days per episode remains at 16 days with an average of 4 consultative activities per episode.

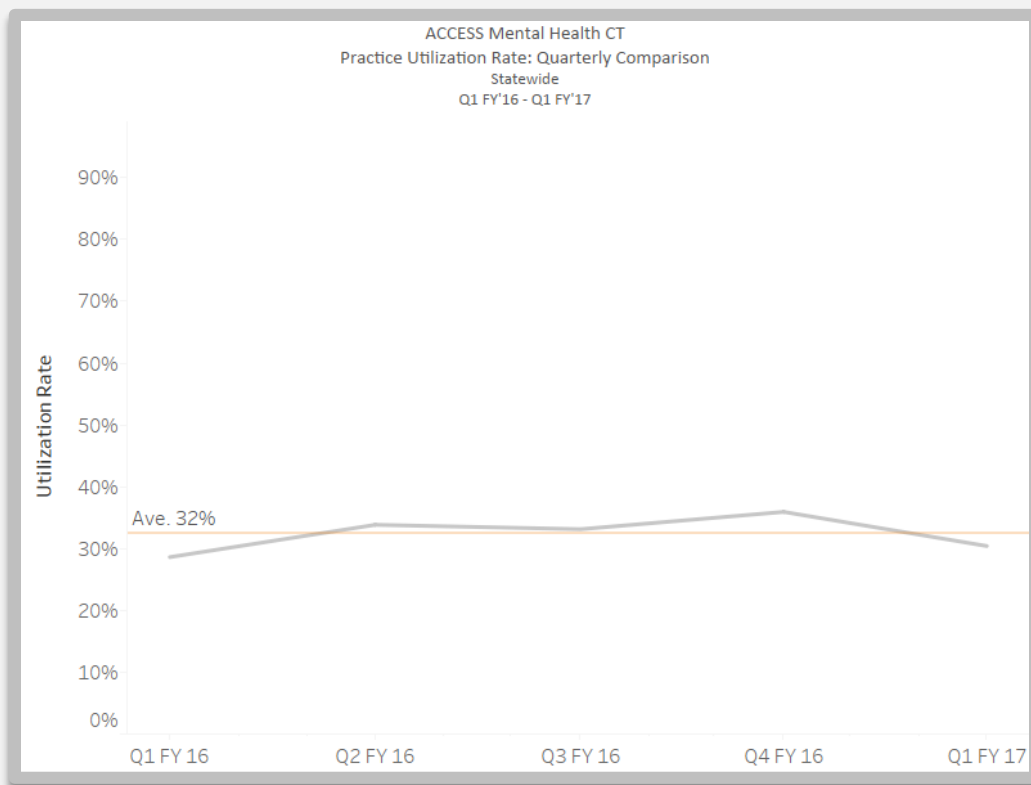
ACCESS Mental Health CT Consultative Episodes June 16, 2014 – September 30, 2016				
	Hartford Hospital	Wheeler Clinic	Yale Child Study Center	Statewide
Number of Youth with 1 Episode	623	697	349	1,669
Number of Youth with 2 Episodes	27	29	15	71
Number of Youth with 3 Episodes	1	2	0	3
Total Number of Episodes	701	773	392	1,866
Average Number of Days per Episode	18	15	15	16
Average Number of Consultative Activities per Episode	5	4	4	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 **342 practice groups** with a total of 390 practice sites were formed.

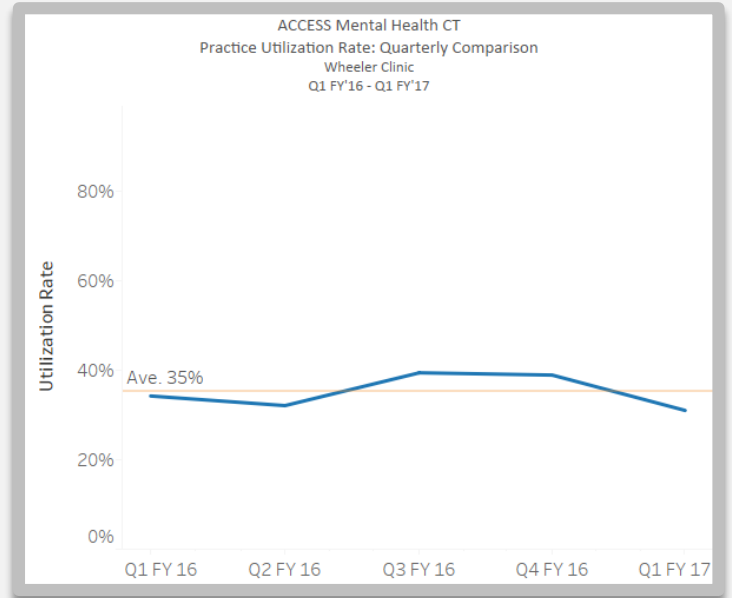
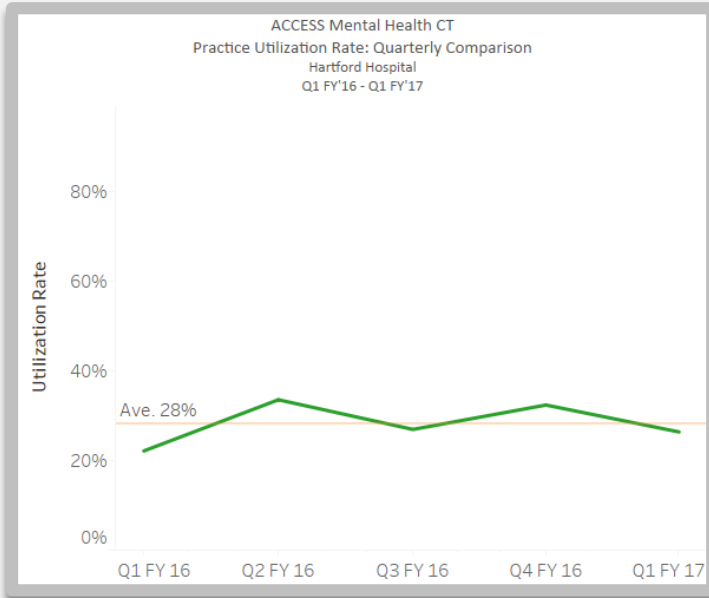
From program inception to date, June 16, 2014 through September 30, 2016, approximately **68%** (234 out of 342) of the enrolled primary care practice groups utilized the program at least one time.

The following graphs compare the rate of practice utilization by quarter. If a practice used the program at any time during the quarter it will be captured for that timeframe. From Q1 FY'16 through Q1 FY'17, the statewide average quarterly utilization rate was 32%. In Q1 FY'17 the quarterly utilization rate was approximately 30% across the state. This is one percentage point higher when compared to the same timeframe in the previous fiscal year (29% in Q1 FY'16). Both volume of consults and volume of providers using the program are important as there are times when a PCP calls requesting a single consultation and times when support is needed for more than one youth. This particular measure demonstrates a consistency of program use across quarters.

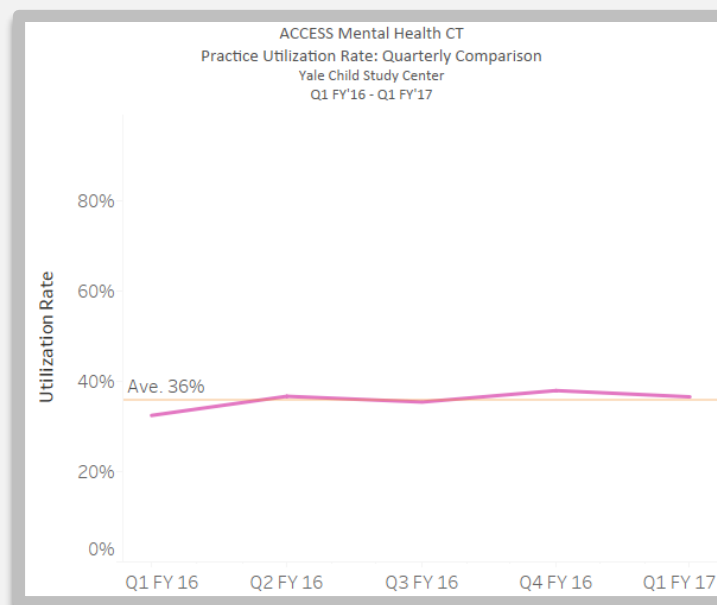


From Q1 FY'16 through Q1 FY'17, Hartford Hospital's average quarterly utilization rate was 28%. In Q1 FY'17 their quarterly utilization rate was approximately 26%. This is four percentage points higher when compared to the same timeframe in the previous fiscal year (22% in Q1 FY'16).

Wheeler Clinic's average quarterly utilization rate was 35% (Q1 FY'16 through Q1 FY'17). In Q1 FY'17 their quarterly utilization rate was approximately 31%. This is three percentage points lower when compared to the same timeframe in the previous fiscal year (34% in Q1 FY'16).

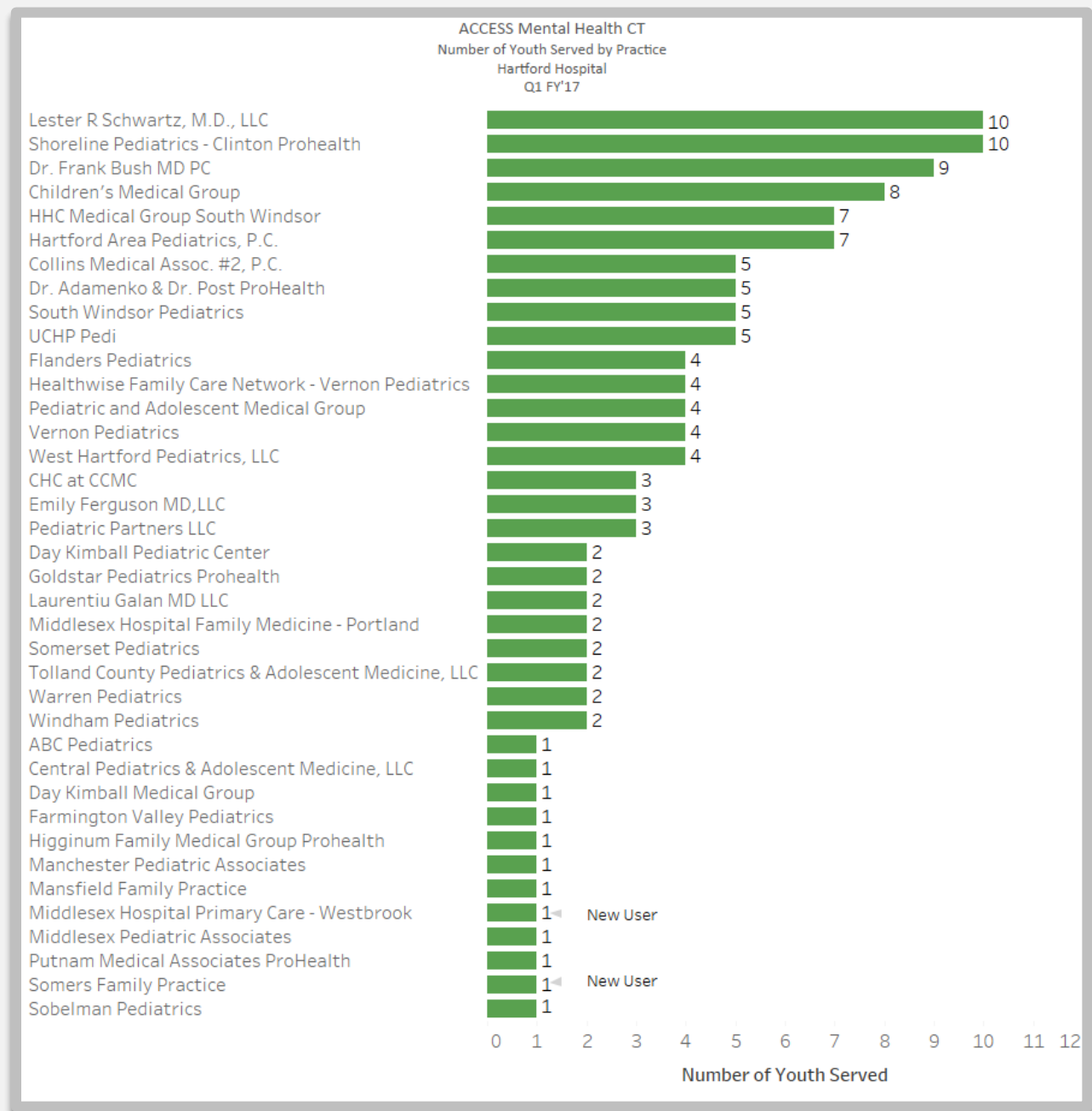


From Q1 FY'16 through Q1 FY'17, Yale Child Study Center's quarterly average rate was 36%. In Q1 FY'17 their quarterly utilization rate was approximately 37%. This is five percentage points higher when compared to the same timeframe in the previous fiscal year (32% in Q1 FY'16).

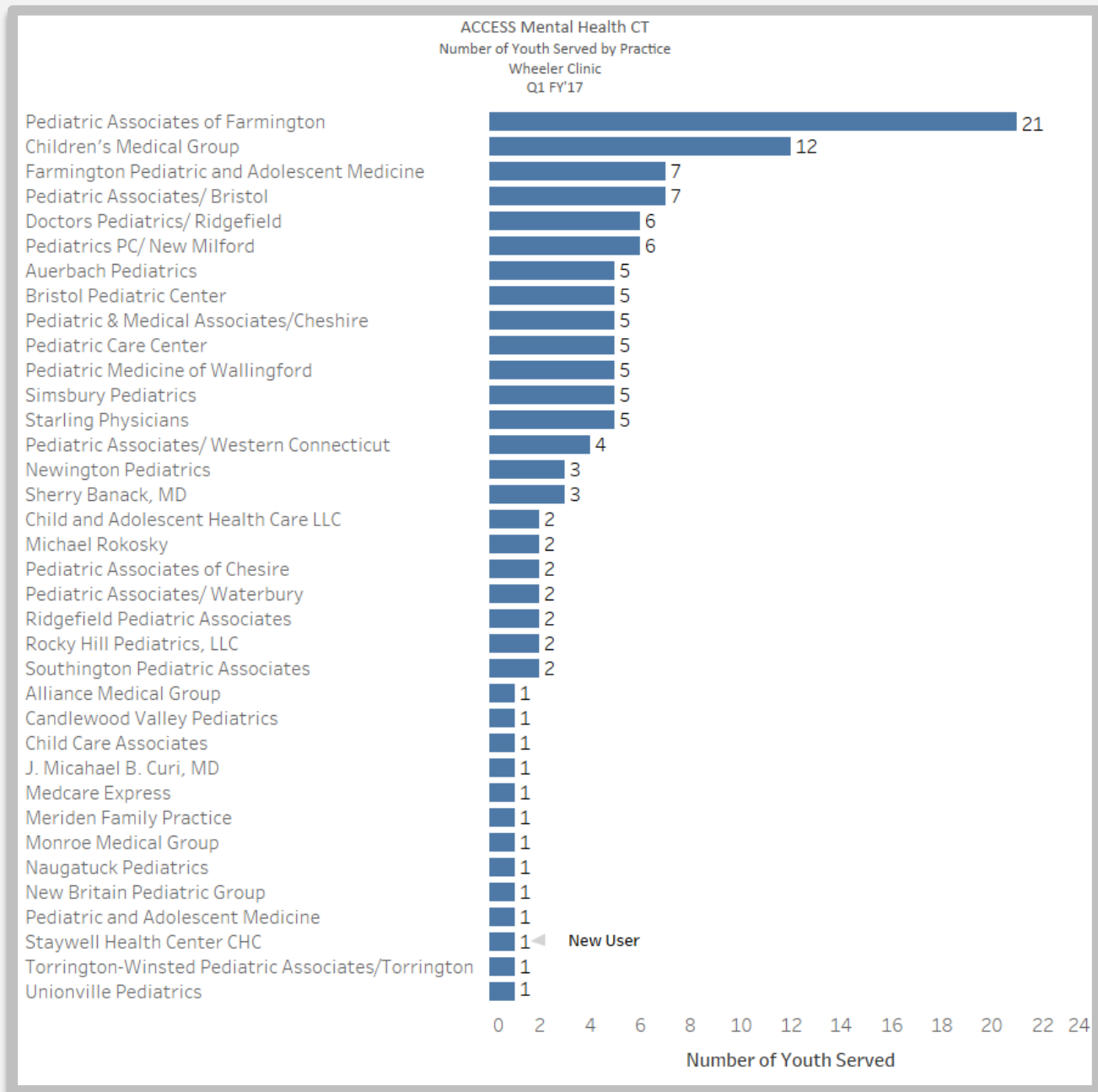


The following graphs demonstrate both practices that continue to utilize the program during Q1 FY'17 as well as practices that utilized the program for the first time during this quarter.

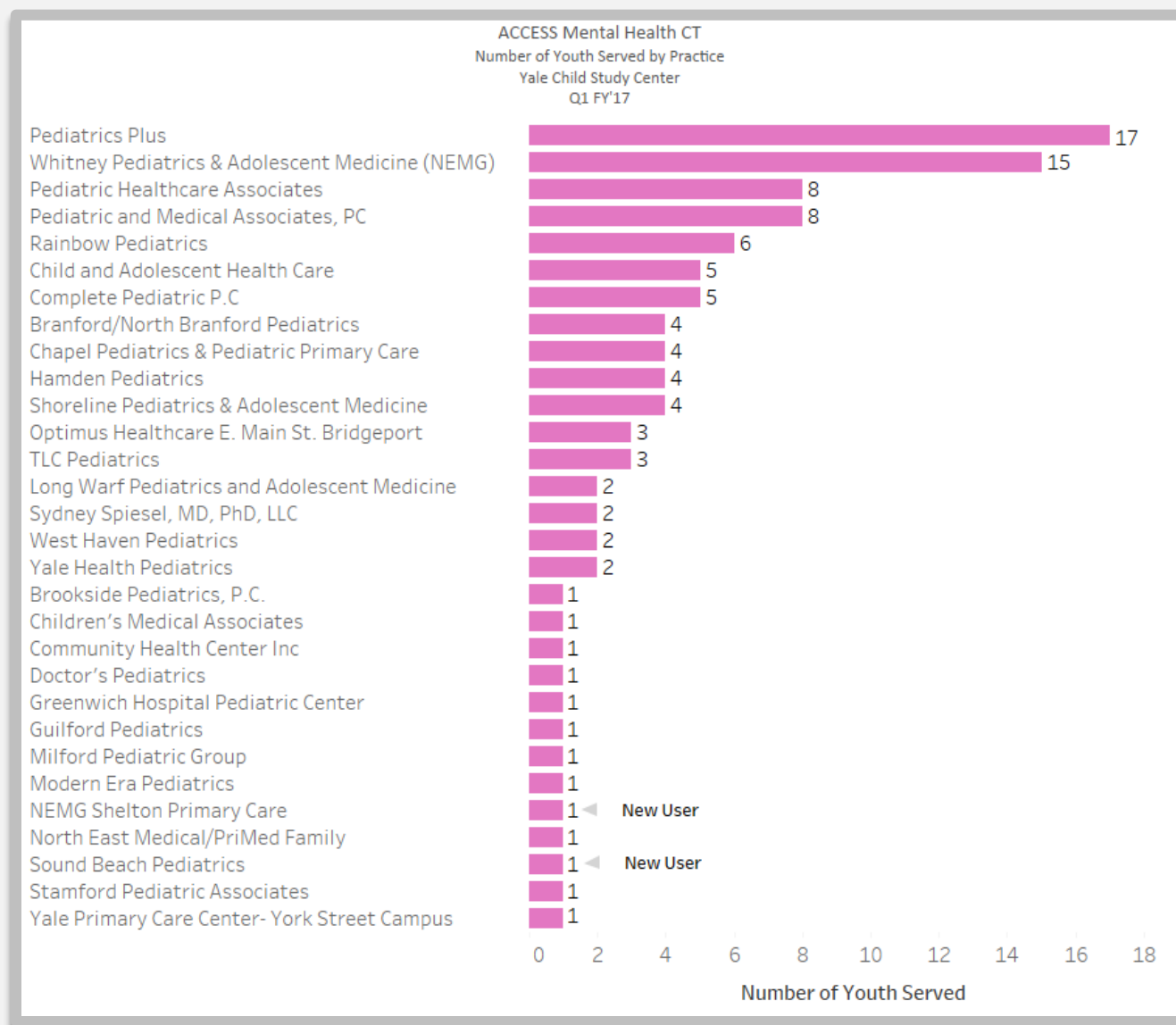
In Q1 FY'17, a total of 38 practice groups utilized Hartford Hospital's Hub team requesting support for 128 youth; two practice groups were identified as first time utilizers of the program. After being enrolled in the program for 16 months, Somers Family Practice called for the first time in August 2016 requesting support on one youth. Middlesex Hospital Primary Care, Westbrook called the program for the first time in September 2016 after having been enrolled for 21 months.



In Q1 FY'17, a total of 36 practice groups utilized Wheeler Clinic's Hub team requesting support for 131 youth; one practice group was identified as a first time utilizer of the program. After being enrolled in the program for 12 months, Staywell Health Center CHC called for the first time in July 2016 requesting support on one youth.



In Q1 FY'17, a total of 30 practice groups utilized Yale Child Study Center's Hub team requesting support for 106 youth; two practice groups were identified as first time utilizers of the program. After being enrolled in the program for one month, Sound Beach Pediatrics called for the first time in July 2016 requesting support on one youth. Northeast Medical Group (NEMG) Shelton Primary Care called the program for the first time in August 2016 after having been enrolled for 15 months.



Practice Non-Utilization

During the second quarter of this year, the Hub teams will be provided a list of their respective enrolled non-using practice groups and will be asked to outreach to them 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 Q1 FY'17, the average statewide satisfaction score is **4.99**. 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 three 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 Q1 FY'17, this annual target is on track.

ACCESS Mental Health CT Satisfaction Scores: Statewide Quarterly Comparison Q1 FY'16 – Q1 FY'17					
	Q1 FY'16	Q2 FY'16	Q3 FY'16	Q4 FY'16	Q1 FY'17
Average Satisfaction Score	4.96	4.96	4.97	4.97	4.99
Maximum Satisfaction Score	5	5	5	5	5
Minimum Satisfaction Score	3	1	3	3	3

ACCESS Mental Health CT Satisfaction Scores: Hub Breakout Q1 FY'17			
	Hartford Hospital	Wheeler Clinic	Yale Child Study Center
Average Satisfaction Score	4.99	4.99	4.99
Maximum Satisfaction Score	5	5	5
Minimum Satisfaction Score	4	4	3

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 trainings. In year three of the program, the Hub teams are each charged with providing a minimum of six (6) behavioral health trainings throughout the contract year. Trainings may be in the form of on-site practice based education, 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

Hub Service Areas

