



Provider Profiling Year-End Report

Family Based Mental Health Services (FBMHS)

7/1/2017 - 6/30/2018

Provider Profiling is conducted in order to collect and trend data to provide information relating to Provider performance, with the overall intent of improving the quality of care rendered to PerformCare's Members. PerformCare encourages Providers to closely review this information and use this to help inform areas of future development.

PerformCare will provide updated Provider Profiling reports twice a year. The first report will be distributed in July, and will provide measures on the first two quarters of the fiscal year (Provider Profiling Mid-Year Report). The second report will be distributed in January, and will provide the entire fiscal year measures (Provider Profiling Year-End Final Report).

Measure 1: 7-Day Access for FBMHS

Measuring access rates is important to ensure that PerformCare Members are able to access the services when they need them. This measure reports on the percentage of Members that are able to access FBMHS within 7 days of the referral date. This measure is based on the administrative data entered by PerformCare Clinical Support staff. This report also includes the average number of days from referral to start date. The data included in this measure is for unique Members with authorization date in the timeframe of 7/1/17-6/30/18.

To calculate this number PerformCare uses the following:
 Numerator: Total number of Members accessing FBMHS within 7 days of authorization.
 Denominator: Total number of authorizations for FBMHS in designated timeframe.

Goal

PerformCare expects Providers to be working towards at least 80% of Members gaining access to FBMHS within 7 days. The goal for the average days from authorization to start date is 7 days or less.

Network Average

Total Records	In Standard	Not In Standard	Average Days to Start	Quarterly Percent In Standard				Cumulative Percent In Standard
				2017-Q3	2017-Q4	2018-Q1	2018-Q2	

7-Day Access for FBMHS

Plan-Wide	739	395	344	11.22	60%	50%	51%	52%	53%
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Provider Breakdown

Provider breakdown of FBMHS access within 7-day standard data.

Provider	Total Records	In Standard	Not In Standard	Average Days to Start	Quarterly Percent In Standard				Cumulative Percent In Standard
					2017-Q3	2017-Q4	2018-Q1	2018-Q2	

7-Day Access for FBMHS									
ACRP MH-CLINIC	24	8	16	12.13	43%	60%	25%	0%	33%
BLAIR FAMILY SOLUTIONS MH-CLINIC	8	5	3	13.25	0%	75%	100%	-	63%
CSG MH-CLINIC	35	26	9	8.63	70%	50%	91%	100%	74%
DIAKON MH-CLINIC	30	21	9	7.83	70%	43%	89%	75%	70%
FAMILY CARE SERVICES MH-CLINIC	9	7	2	7.22	0%	50%	100%	100%	78%
FRANKLIN FAMILY SERVICES MH-CLINIC	24	16	8	6.79	100%	38%	100%	25%	67%
Jewish Family Services MH-Clinic	10	3	7	33.50	100%	20%	33%	0%	30%
LAUREL LIFE SERVICES MH-CLINIC	17	14	3	6.82	80%	83%	50%	100%	82%
MERAKEY STEVENS CENTER MH-CLINIC	50	29	21	8.40	86%	62%	18%	58%	58%
Momentum Services, LLC MH-Clinic	12	5	7	11.08	-	75%	40%	0%	42%
NULTON DIAG & TRT CTR MH-CLINIC	29	18	11	9.10	29%	58%	75%	100%	62%
PA COUNSELING SVCS MH-CLINIC	290	145	145	13.10	60%	52%	41%	42%	50%
TEAMCARE BH MH-CLINIC	58	39	19	7.36	67%	79%	63%	63%	67%
WELLSPAN PHILHAVEN MH-CLINIC	129	54	75	10.51	49%	24%	48%	48%	42%
YOUTH ADVOCATE PROG MH-CLINIC	14	5	9	19.86	33%	50%	-	0%	36%

Note:
 - Cells with a dash represent that there were no Members present to calculate a measure within that category.
 - Providers with less than 5 records are not shown on the report.

Measure 2: Utilization of FBMHS

The FBMHS team should be providing 2-10 hours per week of treatment to the Member and family. It is important that both Providers and PerformCare monitor this to ensure Members are receiving an appropriate number of hours of FBMHS. This measure shows the average hours of FBMHS provided per week, by Provider. This measure is based on unique Members that were discharged within the timeframe of 7/1/17 - 6/30/18, and will calculate the average by the total number of hours provided over the entire authorization, divided by the number of weeks in service. An average will be calculated per Provider.

Goal

PerformCare is providing this measure for informational purposes.

Network Average

	2017-Q3		2017-Q4		2018-Q1		2018-Q2	
	Average Hours Provided	Unique Members						
Plan-Wide								
FBMHS Utilization	5.3	187	5.1	159	5.1	204.0	5.0	206

Provider Breakdown

Utilization of FBMHS by Provider.

	2017-Q3		2017-Q4		2018-Q1		2018-Q2	
Provider	Average Hours Provided	Unique Members						
ACRP MH-CLINIC	3.3	6	5.2	4	3.7	15	4.2	9
BLAIR FAMILY SOLUTIONS MH-CLINIC	7.2	1	6.7	5	5.6	3	4.5	1
CSG MH-CLINIC	5.2	7	4.9	15	4.6	13	4.7	10
DIAKON MH-CLINIC	4.4	8	4.2	7	4.5	8	4.3	11
FAMILY CARE SERVICES MH-CLINIC	-	-	4.3	4	5.8	1	5.3	3
FRANKLIN FAMILY SERVICES MH-CLINIC	4.6	5	5.3	6	3.9	7	3.8	7
Jewish Family Services MH-Clinic	1.5	2	3.6	5	2.6	2	2.6	1
LAUREL LIFE SERVICES MH-CLINIC	5.3	6	5.4	6	5.7	5	5.7	7
MERAKEY STEVENS CENTER MH-CLINIC	3.6	6	4.2	8	3.7	10	4.3	16
Momentum Services, LLC MH-Clinic	7.4	1	5.8	4	6.6	2	4.0	1
NULTON DIAG & TRT CTR MH-CLINIC	3.6	4	5.0	6	4.6	4	3.7	8
PA COUNSELING SVCS MH-CLINIC	6.2	62	6.2	69	6.1	82	6.2	75
TEAMCARE BH MH-CLINIC	4.8	10	4.7	16	5.1	13	4.6	11
WELLSPAN PHILHAVEN MH-CLINIC	4.3	34	4.6	24	4.6	35	4.3	37
YOUTH ADVOCATE PROG MH-CLINIC	4.5	7	5.4	8	4.2	5	3.5	9

Note: Cells with a dash represent that there were no discharges present to calculate a measure within that category.

Measure 3: Mental Health Inpatient (MH IP) Hospitalization Rates

Family Based Mental Health Services are unique in that they provide 24/7 crisis support to families. Two primary goals of crisis planning are ensuring the safety of the Member and family, and minimizing the need for hospitalization or other out-of-home treatment. While there are many reasons that a Member would need Mental Health Inpatient treatment, it is important to look at this rate for trends or outliers. This measure identifies the number of Members who required MH IP admission while also receiving FBMHS. This measurement looks at Members who were discharged during the timeframe of 7/1/17-6/30/18, and if they also had a MH IP admission during their entire authorization for FBMHS.

Goal

PerformCare is providing this measure for informational purposes.

Network Average

Plan-wide by Discharge Quarter	Members Discharged from FBMHS	Members Admitted to MHIP (while in FBMHS)	MHIP Admission Rate %
2017-Q3	160	15	9%
2017-Q4	187	20	11%
2018-Q1	208	18	9%
2018-Q2	206	22	11%
Total	761	75	10%

Provider Breakdown

MH IP Hospitalization Rates

Provider	Members Discharged from FBMHS	Members Admitted to MHIP (while in FBMHS)	% of Members in MHIP
ACRP MH-CLINIC	35	1	3%
BLAIR FAMILY SOLUTIONS MH-CLINIC	10	0	0%
CSG MH-CLINIC	45	4	9%
DIAKON MH-CLINIC	34	3	9%
FAMILY CARE SERVICES MH-CLINIC	8	0	0%
FRANKLIN FAMILY SERVICES MH-CLINIC	25	4	16%
Jewish Family Services MH-Clinic	10	1	10%
LAUREL LIFE SERVICES MH-CLINIC	24	2	8%
MERAKEY STEVENS CENTER MH-CLINIC	40	5	13%
Momentum Services, LLC MH-Clinic	8	2	25%
NULTON DIAG & TRT CTR MH-CLINIC	22	3	14%
PA COUNSELING SVCS MH-CLINIC	289	26	9%
TEAMCARE BH MH-CLINIC	51	4	8%
WELLSPAN PHILHAVEN MH-CLINIC	131	15	11%
YOUTH ADVOCATE PROG MH-CLINIC	29	5	17%

Measure 4: Follow-up Levels of Care 30 Days Post-Discharge from FBMHS

Discharge planning should begin at the start of treatment, and the discharge level of care recommendations should build on the family's strengths and skills that were learned during FBMHS. This measure identifies (by Provider and by Level of Care) the Member's follow-up treatment immediately after discharge from FBMHS. This is meant to be an informational measure. PerformCare uses claims data to determine the follow-up level of care within the 30 day timeframe.

Goal

PerformCare is providing this measure for informational purposes.

Network Average

% of total Members discharged to each level of care 30 days post-discharge from FBMHS*:

Levels of Care	2017-Q3	2017-Q4	2018-Q1	2018-Q2	Year Total
Outpatient	37%	47%	37%	36%	39%
Other **	21%	23%	30%	31%	27%
No Claims After Discharge ***	19%	16%	15%	22%	18%
BHRS	19%	11%	13%	8%	12%
RTF	3%	3%	5%	3%	4%

Provider Breakdown

% of total Members discharged to each level of care 30 days post-discharge from FBMHS by Provider*:

100+ Discharges	2017-Q3	2017-Q4	2018-Q1	2018-Q2	Year Total
Pennsylvania Counseling Services, Inc.					
Outpatient	34%	58%	33%	40%	41%
Other **	22%	16%	27%	22%	22%
No Claims After Discharge ***	20%	16%	16%	25%	20%
BHRS	24%	9%	20%	10%	16%
RTF	0%	0%	4%	3%	2%
WELLSPAN PHILHAVEN MH-CLINIC					
Outpatient	29%	54%	40%	30%	36%
Other **	24%	38%	32%	30%	30%
No Claims After Discharge ***	24%	0%	16%	20%	17%
BHRS	19%	0%	4%	13%	10%
RTF	5%	8%	8%	7%	7%
Between 30-100 Discharges					
ACRP MH-CLINIC					
Other **	0%	33%	27%	50%	32%
BHRS	100%	33%	36%	0%	32%
Outpatient	0%	0%	27%	17%	18%
No Claims After Discharge ***	0%	33%	9%	33%	18%
CSG MH-CLINIC					
Outpatient	60%	40%	57%	60%	52%
Other **	20%	20%	29%	40%	26%
BHRS	0%	20%	14%	0%	11%
No Claims After Discharge ***	20%	20%	0%	0%	11%
DIAKON MH-CLINIC					
Outpatient	25%	50%	29%	38%	35%
Other **	25%	0%	43%	38%	30%
No Claims After Discharge ***	25%	50%	14%	25%	26%
RTF	25%	0%	0%	0%	4%
BHRS	0%	0%	14%	0%	4%

MERAKEY STEVENS CENTER MH-CLINIC					
Outpatient	-	50%	17%	44%	37%
Other **	-	25%	17%	33%	26%
No Claims After Discharge ***	-	0%	50%	22%	26%
BHRS	-	25%	17%	0%	11%
TEAMCARE BH MH-CLINIC					
Other **	0%	38%	45%	29%	36%
Outpatient	50%	13%	36%	43%	32%
No Claims After Discharge ***	50%	38%	9%	29%	25%
RTF	0%	0%	9%	0%	4%
BHRS	0%	13%	0%	0%	4%

Note: Cells with a dash represent that there were no discharges present to calculate a measure within that category.

* Discharges with first follow-up level of care after 30 days are not shown on the report.

** Other - levels of care other than BHRS, Outpatient, RTF.

*** There were no claims from discharge date to report run date.

Measure 5: Follow-up Levels of Care 90 Days Post-Discharge from FBMHS

Discharge planning should begin at the start of treatment, and the discharge level of care recommendations should build on the family’s strengths and skills that were learned during FBMHS. This measure identifies (by Provider and by Level of Care) the Member’s follow-up treatment after discharge from FBMHS. This is meant to be an informational measure and not for any other purpose. PerformCare uses claims data to determine the follow up level of care within the 90 day timeframe.

Goal

PerformCare is providing this measure for informational purposes.

Network Average

% of total Members discharged to each level of care 90 days post-discharge from FBMHS*:

Levels of Care	2017-Q3	2017-Q4	2018-Q1	2018-Q2	Year Total
Outpatient	46%	48%	43%	39%	44%
Other **	19%	21%	26%	30%	25%
BHRS	16%	16%	16%	12%	15%
No Claims After Discharge ***	13%	11%	11%	17%	13%
RTF	5%	3%	4%	3%	4%

Provider Breakdown

% of total Members discharged to each level of care 90 days post-discharge from FBMHS by Provider*:

100+ Discharges	2017-Q3	2017-Q4	2018-Q1	2018-Q2	Year Total
Pennsylvania Counseling Services, Inc.					
Outpatient	45%	57%	43%	41%	46%
Other **	17%	17%	21%	22%	20%
BHRS	23%	13%	21%	15%	18%
No Claims After Discharge ***	15%	11%	12%	20%	15%
RTF	0%	2%	3%	3%	2%
WELLSPAN PHILHAVEN MH-CLINIC					
Outpatient	47%	55%	41%	33%	43%
Other **	22%	32%	32%	28%	28%
BHRS	13%	9%	9%	17%	12%
No Claims After Discharge ***	16%	0%	12%	17%	12%
RTF	3%	5%	6%	6%	5%
Between 30-100 Discharges					
ACRP MH-CLINIC					
BHRS	67%	20%	33%	25%	32%
Outpatient	0%	40%	40%	13%	29%
Other **	33%	20%	20%	38%	26%
No Claims After Discharge ***	0%	20%	7%	25%	13%
CSG MH-CLINIC					
Outpatient	57%	38%	75%	33%	51%
Other **	14%	15%	17%	44%	22%
BHRS	0%	23%	8%	22%	15%
No Claims After Discharge ***	14%	15%	0%	0%	7%
RTF	14%	8%	0%	0%	5%
DIAKON MH-CLINIC					
Outpatient	33%	60%	30%	50%	42%
Other **	33%	0%	40%	30%	29%
No Claims After Discharge ***	17%	40%	10%	20%	19%
BHRS	0%	0%	20%	0%	6%
RTF	17%	0%	0%	0%	3%

MERAKEY STEVENS CENTER MH-CLINIC					
Outpatient	100%	56%	14%	47%	44%
Other **	0%	11%	14%	40%	25%
BHRS	0%	33%	29%	0%	16%
No Claims After Discharge ***	0%	0%	43%	13%	16%
TEAMCARE BH MH-CLINIC					
Outpatient	43%	25%	31%	45%	35%
Other **	14%	33%	46%	27%	33%
No Claims After Discharge ***	14%	25%	8%	18%	16%
BHRS	14%	17%	0%	9%	9%
RTF	14%	0%	15%	0%	7%

Note: Cells with a dash represent that there were no discharges present to calculate a measure within that category.

* Discharges with first follow-up level of care after 90 days are not shown on the report.

** Other - levels of care other than BHRS, Outpatient, RTF.

*** There were no claims from discharge date to report run date.

C/FST Survey

The purpose of the Consumer and Family Satisfaction Team (also referred to as Individual and Family Satisfaction Team) survey is to gather feedback from adult, children, and families that have used Mental Health and/or Substance Use services funded by PerformCare. They are conducted by external agencies in each region and are mainly done through face-to-face interviews. These surveys focus on Members' satisfaction with services and ask questions related to many aspects of treatment.

While the survey tools used in each region are similar, not all questions are the same. The results noted below show results for similar questions that fall into the categories noted. The results are sorted by contract: Capital (which includes Cumberland, Dauphin, Lancaster, Lebanon, and Perry counties), Franklin & Fulton counties, and Bedford & Somerset counties. Providers that are not listed had less than 10 surveys completed for the level(s) of care. Additionally, if a contract is not listed, it indicates that there were no surveys completed for the level(s) of care during this reporting timeframe. It is important to note that while the number of surveys is listed, a Member may not have answered all questions included in the survey.

The agencies who conduct these surveys collect this information on a quarterly basis. The data below is based on information collected during the Fiscal Year 2017-2018 (July 1, 2017 through June 30, 2018).

Capital Family Based Mental Health Services (FBMHS)					
Provider	Number of Surveys	Member is able to get an appointment quickly.	The services provided meet the Member's needs.	Staff are respectful/sensitive to the Member's culture and background.	Member is satisfied with Provider.
CSG	22	82%	59%	100%	82%
Diakon	12	25%	42%	92%	50%
PA Counseling	101	72%	65%	94%	88%
Philhaven	40	70%	58%	98%	93%
Team Care	11	70%	64%	91%	100%
Merakey Stevens	21	65%	71%	86%	95%