



Provider Profiling Year-End Report

Substance Use Services

Inpatient Detoxification Program (IP Detox)
Non-hospital Detoxification Program (NH Detox)
Inpatient Rehabilitation Program (IP Rehab)
Non-hospital Rehabilitation 3B (NH Rehab 3B)
Non-hospital Rehabilitation 3C (NH Rehab 3C)
NH Halfway House (2B)

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 metrics 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 metrics (Provider Profiling Year-End Final Report).

Measure 1: 60-Day Readmission Rate for Substance Use

Although there may be many reasons that a person readmits to Substance Use services, it has been researched and reported that effective discharge planning and education about aftercare planning can help to prevent readmissions.

This measure reports the 60-day readmission rates for the Substance Use Providers treating PerformCare Members. Readmission is defined as being readmitted to the same or higher level of care within 60 days of discharge (for Substance Use only). Readmissions may be to the same or a different facility. This measure is based on claims data from the time period of 7/1/17 through 6/30/18.

PerformCare calculates these rates using the following:

Denominator: The number of discharges from a Provider in the quarter. Discharges due to death or direct transfer to another facility are excluded.

Numerator: Of the qualifying denominator discharges, the number of admissions to the same or higher level of care within 60 days of discharge.

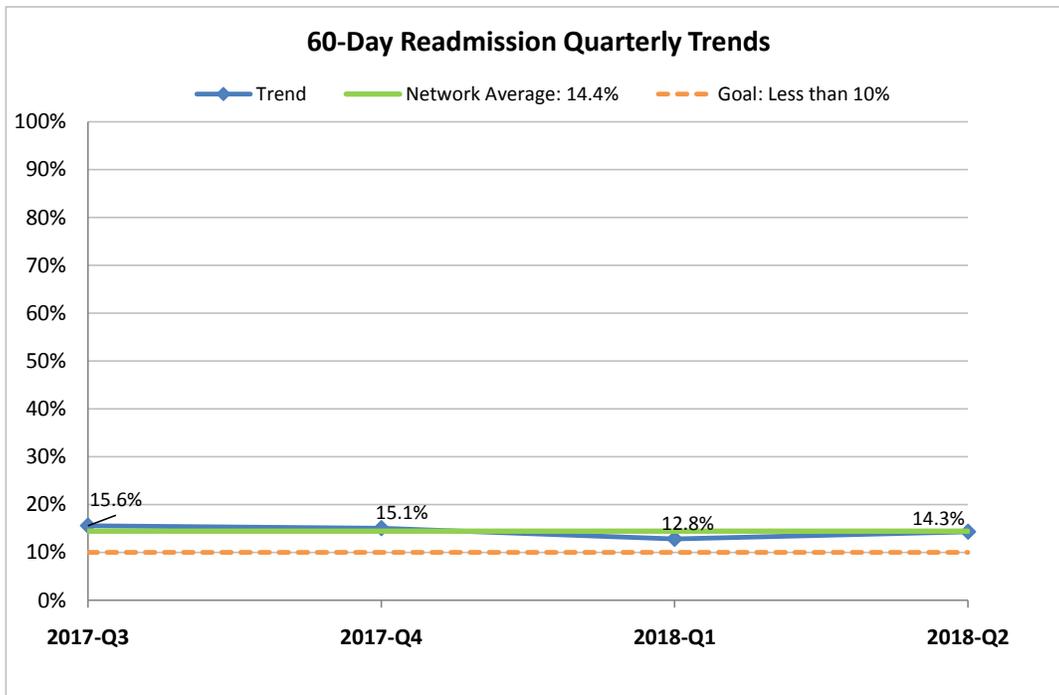
Readmissions are counted through the 60 days following the close of each quarter.

Goal

PerformCare expects Providers to achieve a 60-day readmission rate of less than 10%.

Network Average

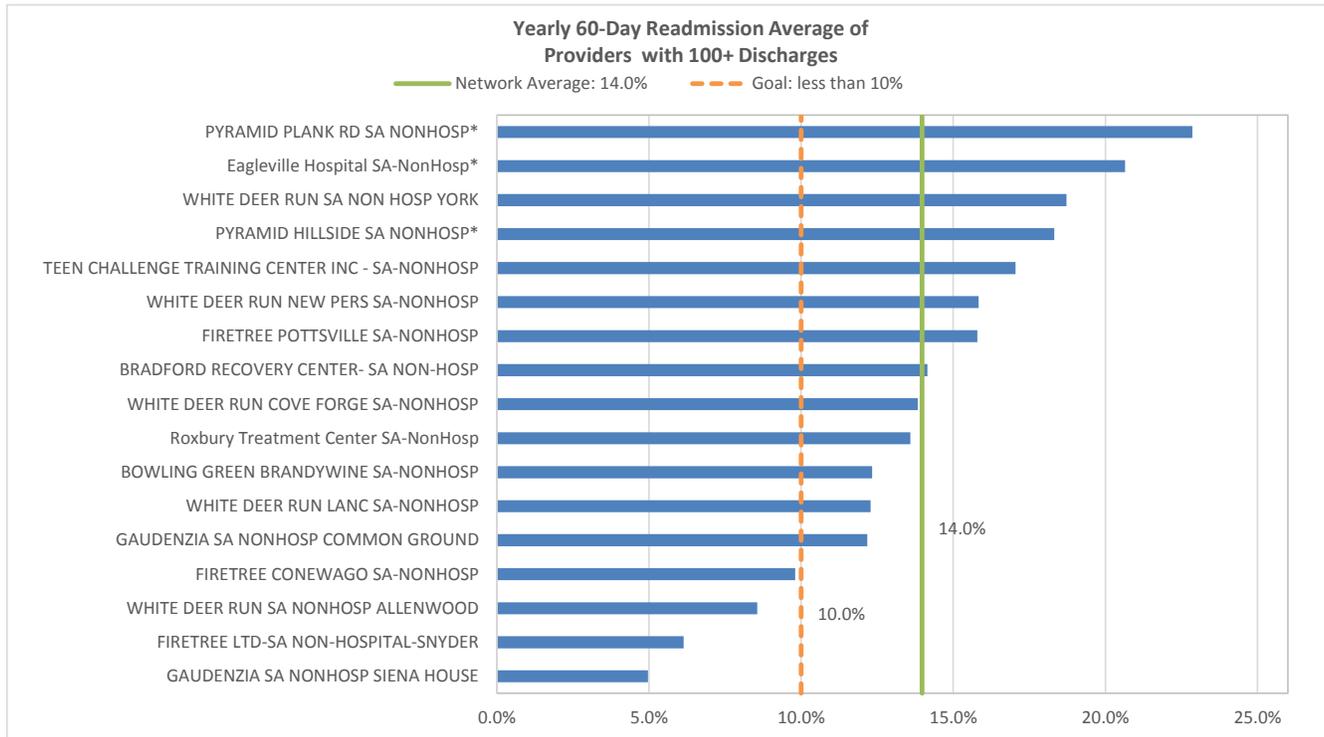
Plan-wide average 60-Day readmission rate across all Providers.



	2017-Q3	2017-Q4	2018-Q1	2018-Q2	Average
Plan-Wide					
60-Day Readmission Rate	15.6%	15.1%	12.8%	14.3%	14.4%

Provider Breakdown

Percentage of discharges from Provider that readmitted within 60 days of discharge.

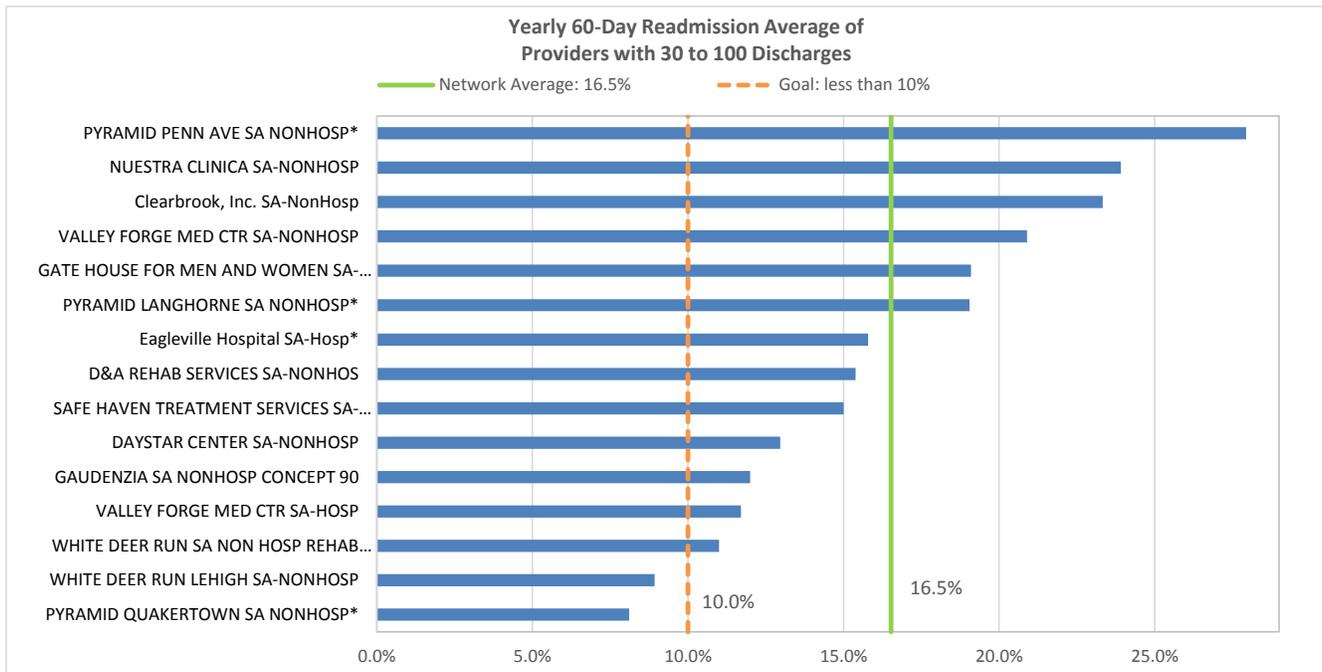


Provider	2017-Q3	2017-Q4	2018-Q1	2018-Q2	Average
Providers with 100+ Discharges	15.0%	14.2%	12.7%	14.1%	14.0%
PYRAMID PLANK RD SA NONHOSP*	27.6%	21.4%	28.2%	15.8%	22.9%
Eagleville Hospital SA-NonHosp*	10.9%	31.4%	19.1%	22.6%	20.7%
WHITE DEER RUN SA NON HOSP YORK	8.3%	12.9%	20.0%	27.8%	18.7%
PYRAMID HILLSIDE SA NONHOSP*	21.3%	14.3%	14.3%	21.4%	18.3%
TEEN CHALLENGE TRAINING CENTER INC - SA-NONHOSP	20.6%	18.3%	12.4%	18.5%	17.0%
WHITE DEER RUN NEW PERS SA-NONHOSP	18.0%	19.8%	10.2%	15.2%	15.8%
FIRETREE POTTSVILLE SA-NONHOSP	25.6%	19.0%	7.1%	9.3%	15.8%
BRADFORD RECOVERY CENTER- SA NON-HOSP	15.4%	9.4%	13.6%	23.1%	14.2%
WHITE DEER RUN COVE FORGE SA-NONHOSP	11.7%	11.9%	21.3%	10.6%	13.8%
Roxbury Treatment Center SA-NonHosp	22.0%	8.5%	10.1%	13.2%	13.6%
BOWLING GREEN BRANDYWINE SA-NONHOSP	10.8%	9.9%	14.9%	13.7%	12.3%
WHITE DEER RUN LANC SA-NONHOSP	9.0%	16.4%	10.3%	13.3%	12.3%
GAUDENZIA SA NONHOSP COMMON GROUND	11.1%	8.2%	11.1%	17.9%	12.2%
FIRETREE CONEWAGO SA-NONHOSP	9.1%	12.5%	11.1%	6.9%	9.8%
WHITE DEER RUN SA NONHOSP ALLENWOOD	9.4%	9.9%	8.2%	7.3%	8.6%
FIRETREE LTD-SA NON-HOSPITAL-SNYDER	9.5%	12.9%	0.0%	2.9%	6.1%
GAUDENZIA SA NONHOSP SIENA HOUSE	0.0%	4.3%	2.8%	10.0%	5.0%

*Providers with Co-Occurring Disorder Competency

Provider Breakdown

Percentage of discharges from Provider that readmitted within 60 days of discharge.



Provider	2017-Q3	2017-Q4	2018-Q1	2018-Q2	Average
Providers with between 30 and 100 Discharges	16.2%	17.8%	14.3%	18.0%	16.5%
PYRAMID PENN AVE SA NONHOSP*	27.3%	33.3%	15.4%	33.3%	27.9%
NUESTRA CLINICA SA-NONHOSP	15.8%	14.3%	27.6%	30.0%	23.9%
Clearbrook, Inc. SA-NonHosp	28.6%	25.0%	12.5%	-	23.3%
VALLEY FORGE MED CTR SA-NONHOSP	20.8%	13.3%	26.7%	23.1%	20.9%
GATE HOUSE FOR MEN AND WOMEN SA-NONHOSP	16.1%	23.8%	19.0%	18.8%	19.1%
PYRAMID LANGHORNE SA NONHOSP*	7.7%	28.6%	6.3%	30.8%	19.0%
Eagleville Hospital SA-Hosp*	18.8%	21.1%	9.1%	9.1%	15.8%
D&A REHAB SERVICES SA-NONHOS	21.4%	20.0%	14.3%	0.0%	15.4%
SAFE HAVEN TREATMENT SERVICES SA-NONHOSP	10.7%	18.2%	20.0%	-	15.0%
DAYSTAR CENTER SA-NONHOSP	12.5%	7.7%	16.7%	15.8%	13.0%
GAUDENZIA SA NONHOSP CONCEPT 90	20.0%	0.0%	6.3%	18.2%	12.0%
VALLEY FORGE MED CTR SA-HOSP	12.8%	14.8%	5.9%	9.1%	11.7%
WHITE DEER RUN SA NON HOSP REHAB YORK	8.7%	22.2%	8.3%	8.7%	11.0%
WHITE DEER RUN LEHIGH SA-NONHOSP	0.0%	5.9%	15.4%	10.0%	8.9%
PYRAMID QUAKERTOWN SA NONHOSP*	18.2%	7.1%	0.0%	0.0%	8.1%

*Providers with Co-Occurring Disorder Competency

Note: Individual Provider rates for Providers with less than 30 discharges were not calculated due to the smaller sample of data.

Measure 2: 30-Day Readmission Rate for Substance Use

This measure reports the 30-day readmission rates for the Substance Use Providers treating PerformCare Members. Readmission is defined as being readmitted to the same or higher level of care within 30 days of discharge (for Substance Use only). Readmissions may be to the same or a different facility. This measure is based on claims data from the time period of 7/1/17 through 6/30/18.

PerformCare calculates these rates using the following:

Denominator: The number of discharges from a Provider in the quarter. Discharges due to death or direct transfer to another facility are excluded.

Numerator: Of the qualifying denominator discharges, the number of admissions to the same or higher level of care within 30 days of discharge.

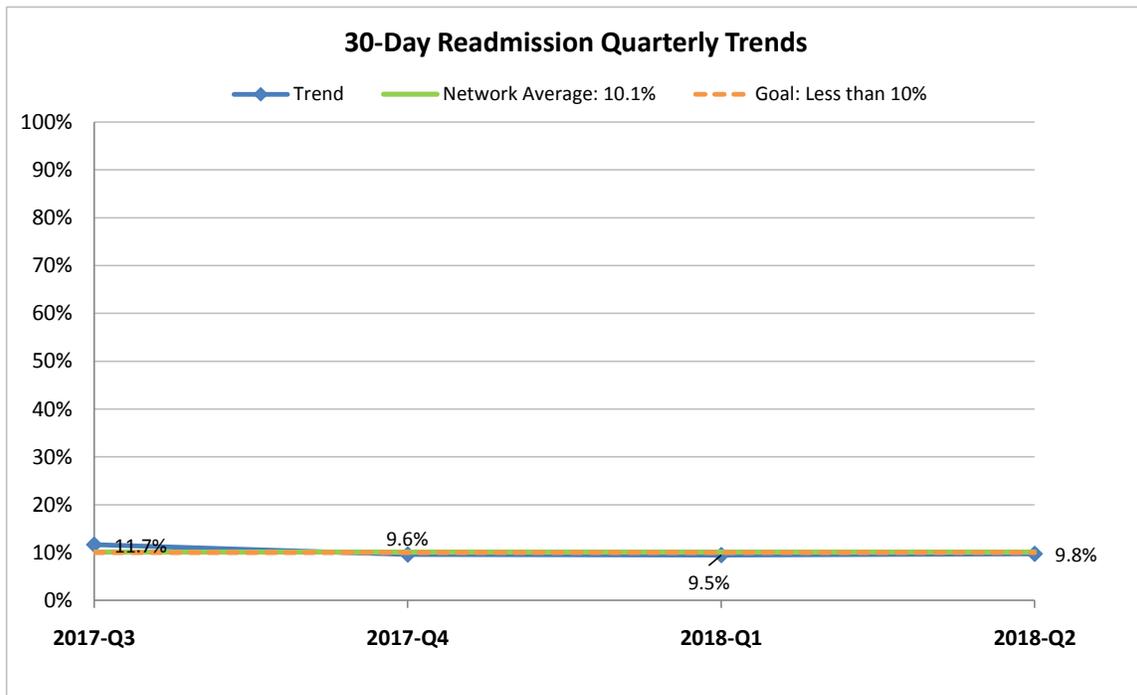
Readmissions are counted through the 30 days following the close of each quarter.

Goal

PerformCare expects Providers to achieve a 30-day readmission rate of less than 10%.

Network Average

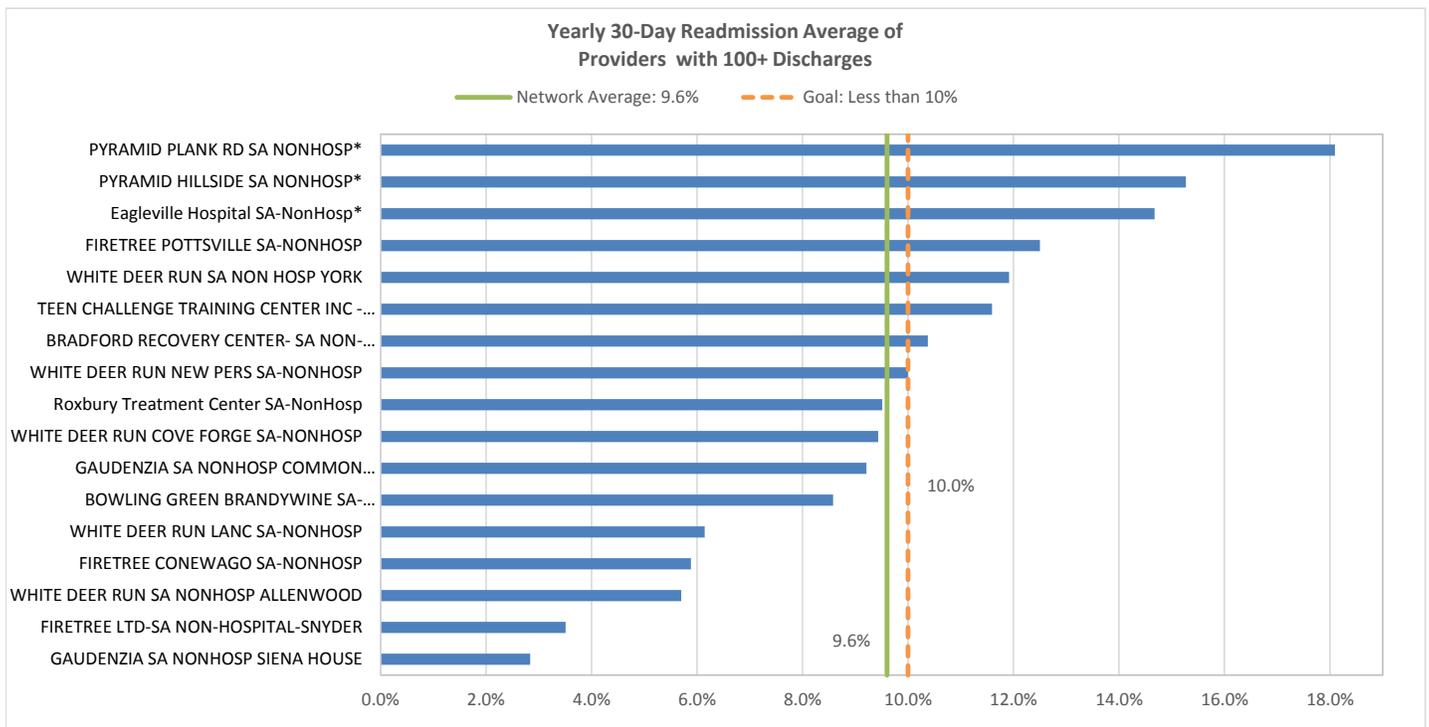
Plan-wide average 30-Day readmission rate across all Providers.



	2017-Q3	2017-Q4	2018-Q1	2018-Q2	Average
Plan-Wide					
30-Day Readmission Rate	11.7%	9.6%	9.5%	9.8%	10.1%

Provider Breakdown

Percentage of discharges from Provider that readmitted within 30 days of discharge.

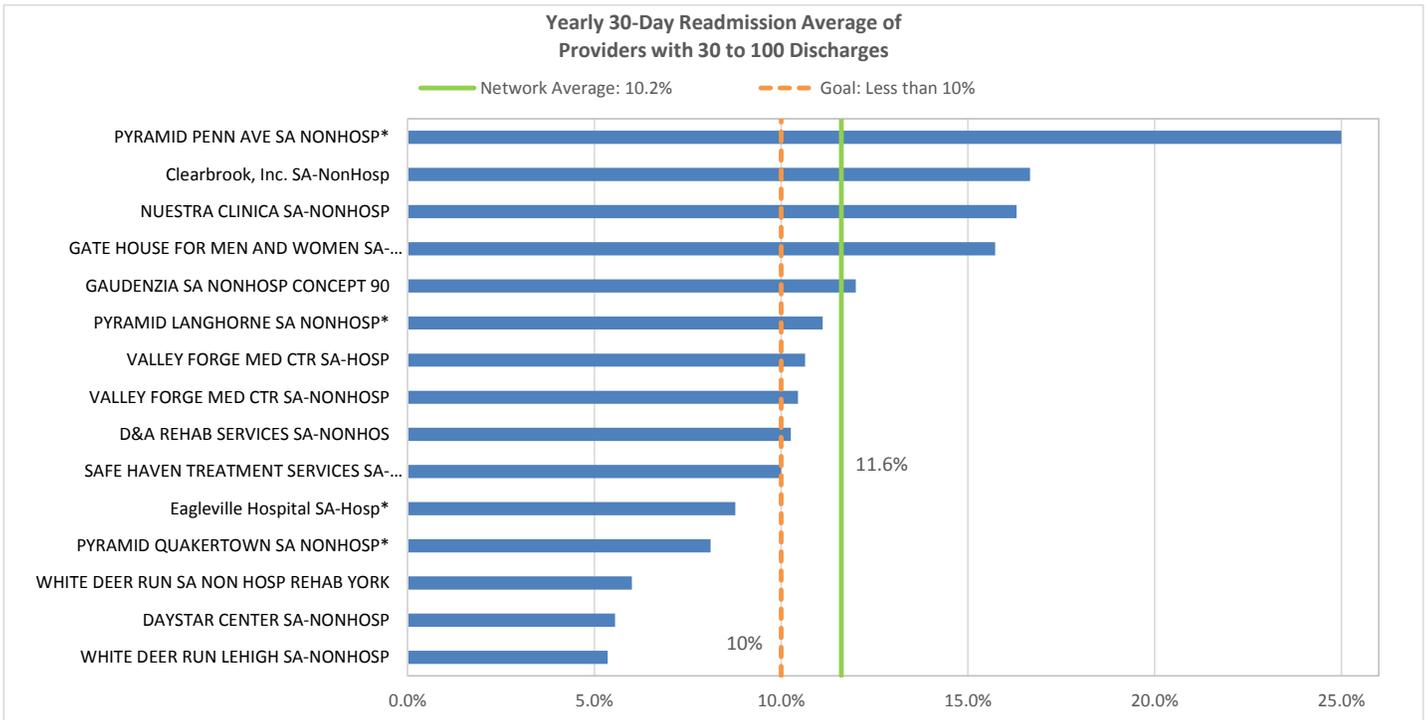


Provider	2017-Q3	2017-Q4	2018-Q1	2018-Q2	Average
Providers with 100+ Discharges	11.4%	8.3%	9.4%	9.3%	9.6%
PYRAMID PLANK RD SA NONHOSP*	24.1%	17.9%	23.1%	8.8%	18.1%
PYRAMID HILLSIDE SA NONHOSP*	19.1%	11.4%	14.3%	14.3%	15.3%
Eagleville Hospital SA-NonHosp*	10.9%	17.6%	14.9%	16.1%	14.7%
FIRETREE POTTSVILLE SA-NONHOSP	20.5%	11.9%	7.1%	9.3%	12.5%
WHITE DEER RUN SA NON HOSP YORK	8.3%	3.2%	15.4%	18.1%	11.9%
TEEN CHALLENGE TRAINING CENTER INC - SA-NONHOSP	17.6%	10.1%	9.5%	9.8%	11.6%
BRADFORD RECOVERY CENTER- SA NON-HOSP	10.3%	3.1%	13.6%	23.1%	10.4%
WHITE DEER RUN NEW PERS SA-NONHOSP	13.5%	12.1%	4.5%	9.8%	10.0%
Roxbury Treatment Center SA-NonHosp	14.3%	4.9%	7.9%	10.4%	9.5%
WHITE DEER RUN COVE FORGE SA-NONHOSP	7.8%	7.5%	15.0%	7.4%	9.4%
GAUDENZIA SA NONHOSP COMMON GROUND	7.4%	8.2%	11.1%	10.3%	9.2%
BOWLING GREEN BRANDYWINE SA-NONHOSP	8.6%	4.4%	10.6%	10.5%	8.6%
WHITE DEER RUN LANC SA-NONHOSP	6.0%	6.8%	3.8%	8.0%	6.1%
FIRETREE CONEWAGO SA-NONHOSP	4.5%	4.2%	11.1%	3.4%	5.9%
WHITE DEER RUN SA NONHOSP ALLENWOOD	5.7%	7.9%	5.2%	4.7%	5.7%
FIRETREE LTD-SA NON-HOSPITAL-SNYDER	4.8%	6.5%	0.0%	2.9%	3.5%
GAUDENZIA SA NONHOSP SIENA HOUSE	0.0%	2.1%	2.8%	5.0%	2.8%

*Providers with Co-Occurring Disorder Competency

Provider Breakdown

Percentage of discharges from Provider that readmitted within 30 days of discharge.



Provider	2017-Q3	2017-Q4	2018-Q1	2018-Q2	Average
Providers between 30 and 100 Discharges	10.7%	13.2%	9.4%	13.5%	11.6%
PYRAMID PENN AVE SA NONHOSP*	22.7%	26.7%	15.4%	33.3%	25.0%
Clearbrook, Inc. SA-NonHosp	21.4%	12.5%	12.5%	-	16.7%
NUESTRA CLINICA SA-NONHOSP	5.3%	14.3%	17.2%	23.3%	16.3%
GATE HOUSE FOR MEN AND WOMEN SA-NONHOSP	12.9%	23.8%	14.3%	12.5%	15.7%
GAUDENZIA SA NONHOSP CONCEPT 90	20.0%	0.0%	6.3%	18.2%	12.0%
PYRAMID LANGHORNE SA NONHOSP*	7.7%	9.5%	6.3%	23.1%	11.1%
VALLEY FORGE MED CTR SA-HOSP	10.3%	14.8%	5.9%	9.1%	10.6%
VALLEY FORGE MED CTR SA-NONHOSP	8.3%	13.3%	6.7%	15.4%	10.4%
D&A REHAB SERVICES SA-NONHOS	7.1%	20.0%	14.3%	0.0%	10.3%
SAFE HAVEN TREATMENT SERVICES SA-NONHOSP	10.7%	13.6%	0.0%	-	10.0%
Eagleville Hospital SA-Hosp*	6.3%	10.5%	9.1%	9.1%	8.8%
PYRAMID QUAKERTOWN SA NONHOSP*	18.2%	7.1%	0.0%	0.0%	8.1%
WHITE DEER RUN SA NON HOSP REHAB YORK	4.3%	11.1%	5.6%	4.3%	6.0%
DAYSTAR CENTER SA-NONHOSP	0.0%	7.7%	16.7%	5.3%	5.6%
WHITE DEER RUN LEHIGH SA-NONHOSP	0.0%	5.9%	7.7%	5.0%	5.4%

*Providers with Co-Occurring Disorder Competency

Note: Individual Provider rates for Providers with less than 30 discharges were not calculated due to the smaller sample of data.

Measure 3: Case Mix by Provider for Substance Use

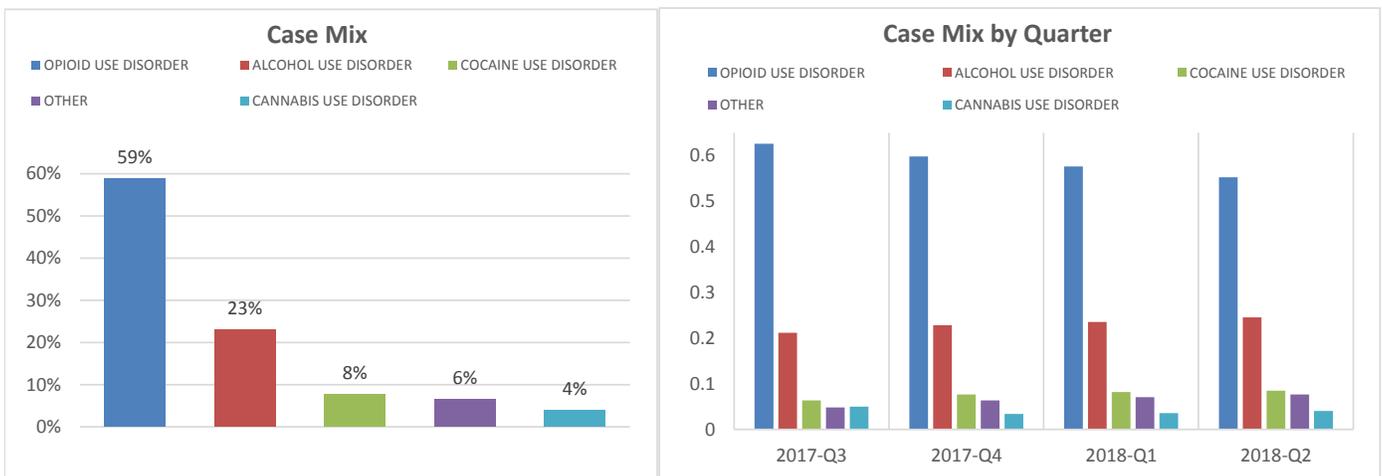
This measure shows the different disorders being treated by Substance Use Providers. The information may become useful in observing trends as PerformCare continues to report this information.

This information is based on claims data from the discharge diagnoses reported for discharges occurring from 7/1/17 through 6/30/18. The calculation is based on the primary diagnosis for the first admission per Provider per quarter; readmissions are excluded so as not to skew the data.

Goal

PerformCare is providing this measure for informational purposes.

Plan-wide average of discharges based on the following categories of substances for all Providers.



Category	2017-Q3	2017-Q4	2018-Q1	2018-Q2	Average
Plan-wide					
ALCOHOL USE DISORDER	21.2%	22.8%	23.5%	24.5%	23.0%
CANNABIS USE DISORDER	5.0%	3.4%	3.6%	4.1%	4.0%
COCAINE USE DISORDER	6.4%	7.7%	8.2%	8.5%	7.7%
OPIOID USE DISORDER	62.6%	59.8%	57.6%	55.3%	58.8%
OTHER	4.8%	6.3%	7.1%	7.7%	6.5%

Case Mix distribution of category of substances by Provider for dates of service reflected in this report.

Provider	ALCOHOL USE DISORDER	CANNABIS USE DISORDER	COCAINE USE DISORDER	OPIOID USE DISORDER	OTHER (Drug Dependency(NOS) / MH Disorders)**
Providers with 100+ Discharges	24%	2%	7%	60%	7%
BOWLING GREEN BRANDYWINE SA-NONHOSP	15.2%	0.7%	5.7%	66.8%	11.7%
Eagleville Hospital SA-NonHosp*	27.6%	3.1%	8.6%	54.0%	6.7%
FIRETREE LTD-SA NON-HOSPITAL-SNYDER	17.5%	4.4%	13.2%	49.1%	15.8%
FIRETREE POTTSVILLE SA-NONHOSP	13.3%	2.1%	1.4%	79.0%	4.2%
GAUDENZIA SA NONHOSP COMMON GROUND	27.2%	0.8%	9.4%	57.1%	5.5%
GAUDENZIA SA NONHOSP SIENA HOUSE	20.0%	12.9%	15.7%	38.6%	12.9%
PYRAMID HILLSIDE SA NONHOSP*	20.7%	1.8%	4.5%	69.4%	3.6%
PYRAMID PLANK RD SA NONHOSP*	25.5%	2.7%	8.2%	57.6%	6.0%
Roxbury Treatment Center SA-NonHosp	44.0%	2.5%	17.6%	30.5%	5.3%
TEEN CHALLENGE TRAINING CENTER INC - SA-NONHOSP	27.0%	3.4%	9.3%	54.0%	6.2%
WHITE DEER RUN COVE FORGE SA-NONHOSP	15.4%	2.8%	3.1%	69.7%	9.1%
WHITE DEER RUN LANC SA-NONHOSP	20.3%	0.0%	3.4%	72.0%	4.3%
WHITE DEER RUN NEW PERS SA-NONHOSP	19.6%	1.7%	6.6%	67.8%	4.3%
WHITE DEER RUN SA NON HOSP YORK	26.4%	0.0%	0.0%	72.7%	0.9%
WHITE DEER RUN SA NONHOSP ALLENWOOD	25.0%	0.3%	3.8%	64.8%	6.1%
Providers with 30 to 100 Discharges	22%	6%	7%	59%	6%
BRADFORD RECOVERY CENTER- SA NON-HOSP	11.8%	0.0%	4.4%	80.9%	2.9%
FIRETREE CONEWAGO SA-NONHOSP	15.3%	3.1%	10.2%	64.3%	7.1%
NUESTRA CLINICA SA-NONHOSP	22.8%	3.8%	13.9%	57.0%	2.5%
PYRAMID LANGHORNE SA NONHOSP*	5.4%	1.8%	8.9%	76.8%	7.1%
PYRAMID PENN AVE SA NONHOSP*	10.3%	3.4%	13.8%	69.0%	3.4%
PYRAMID QUAKERTOWN SA NONHOSP*	24.3%	8.1%	10.8%	40.5%	16.2%
SAFE HAVEN TREATMENT SERVICES SA-NONHOSP	31.3%	0.0%	8.3%	52.1%	8.3%
VALLEY FORGE MED CTR SA-NONHOSP	26.2%	1.5%	1.5%	66.2%	4.6%
WHITE DEER RUN LEHIGH SA-NONHOSP	32.7%	2.0%	6.1%	51.0%	8.2%
WHITE DEER RUN SA NON HOSP REHAB YORK	26.5%	0.0%	5.1%	67.3%	1.0%
D&A REHAB SERVICES SA-NONHOS	0.0%	100.0%	0.0%	0.0%	0.0%
DAYSTAR CENTER SA-NONHOSP	20.4%	0.0%	7.4%	64.8%	7.4%
Eagleville Hospital SA-Hosp*	46.3%	0.0%	0.0%	48.1%	5.6%
GATE HOUSE FOR MEN AND WOMEN SA-NONHOSP	27.0%	3.4%	5.6%	59.6%	4.5%
GAUDENZIA SA NONHOSP CONCEPT 90	17.0%	8.5%	25.5%	29.8%	19.1%
VALLEY FORGE MED CTR SA-HOSP	31.4%	1.2%	1.2%	64.0%	2.3%

*Providers with Co-Occurring Disorder Competency

**Other: Sedative/Hypnotic/Anxiolytic Use Disorder, Other/Unspecified Stimulant Use Disorder, Other Hallucinogen Use Disorder, Tobacco Use Disorder, Inhalant Use Disorder, Other Substance Use Disorder.

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

Due to the variation in calculating various metrics, the Provider discharge volume groupings may differ slightly from metric to metric.

Measure 4: Co-Occurring Diagnoses

PerformCare wants to ensure that Members with Co-Occurring diagnoses have both their Substance Use and Mental Health treatment needs addressed. This measure is designed to summarize for the Provider community the percentage of Members receiving Substance Use treatment that have a Substance Use disorder and a co-occurring Mental Health disorder. This information can be helpful to Providers for staffing and training purposes. The information may become useful in observing trends as PerformCare continues to report this information.

PerformCare calculates this measure based on claims data. This measure counts only the first admission for Members who have had 1 or more readmission(s). This measure uses data submitted from any diagnosis code from the discharge diagnoses for each Member that was discharged from services between 7/1/17 through 6/30/18.

Goal

PerformCare is providing this measure for informational purposes.

Network Average

Plan-wide average of discharges that have Co-Occurring Diagnoses for all Providers.

	2017-Q3	2017-Q4	2018-Q1	2018-Q2	Average
Plan-Wide					
Co-Occurring Diagnoses	66.3%	66.1%	67.4%	66.2%	66.5%

Provider Breakdown

Yearly average of discharges that have Co-Occurring Diagnoses by Provider.

Provider	Average
Providers with 100+ Discharges	65.6%
BOWLING GREEN BRANDYWINE SA-NONHOSP	76.0%
Eagleville Hospital SA-NonHosp*	87.1%
FIRETREE LTD-SA NON-HOSPITAL-SNYDER	43.4%
FIRETREE POTTSVILLE SA-NONHOSP	34.3%
GAUDENZIA SA NONHOSP COMMON GROUND	50.8%
GAUDENZIA SA NONHOSP SIENA HOUSE	27.9%
PYRAMID HILLSIDE SA NONHOSP*	79.3%
PYRAMID PLANK RD SA NONHOSP*	77.2%
Roxbury Treatment Center SA-NonHosp	79.6%
TEEN CHALLENGE TRAINING CENTER INC - SA-NONHOSP	47.2%
WHITE DEER RUN COVE FORGE SA-NONHOSP	88.2%
WHITE DEER RUN LANC SA-NONHOSP	43.5%
WHITE DEER RUN NEW PERS SA-NONHOSP	75.1%
WHITE DEER RUN SA NON HOSP YORK	74.1%
WHITE DEER RUN SA NONHOSP ALLENWOOD	71.5%
Providers with between 30 and 100 Discharges	69.3%
BRADFORD RECOVERY CENTER- SA NON-HOSP	61.8%
FIRETREE CONEWAGO SA-NONHOSP	31.6%
NUUESTRA CLINICA SA-NONHOSP	69.6%
PYRAMID LANGHORNE SA NONHOSP*	53.6%
PYRAMID PENN AVE SA NONHOSP*	60.3%
PYRAMID QUAKERTOWN SA NONHOSP*	86.5%
SAFE HAVEN TREATMENT SERVICES SA-NONHOSP	64.6%
VALLEY FORGE MED CTR SA-NONHOSP	92.3%
WHITE DEER RUN LEHIGH SA-NONHOSP	76.0%
WHITE DEER RUN SA NON HOSP REHAB YORK	88.8%
D&A REHAB SERVICES SA-NONHOS	68.4%
DAYSTAR CENTER SA-NONHOSP	51.9%
Eagleville Hospital SA-Hosp*	92.6%
GATE HOUSE FOR MEN AND WOMEN SA-NONHOSP	65.2%
GAUDENZIA SA NONHOSP CONCEPT 90	57.4%
VALLEY FORGE MED CTR SA-HOSP	93.0%

*Providers with Co-Occurring Disorder Competency

Note: Individual Provider rates for Providers with less than 30 discharges were not calculated due to the smaller sample of data.

Measure 5: Follow-Up Visits within 7 and 30 Days of Discharge

Follow-up visits are important to help Members stay well and continue treatment without needing to return to a higher level of care. This measure shows the percentage of Members that are seen within 7 days and 30 days for a follow-up appointment, following a discharge from Substance Use Rehabilitation services. This measure is based on claims data with dates of discharge 7/1/17 through 6/30/18.

Compliant follow-up visits for this measure include the following:

Visits for Substance Use or Mental Health therapy, counseling or a medication check that meet the national codes for a successful follow-up visit. Entry into a partial hospitalization program, intensive outpatient program, Methadone maintenance program, or Halfway house.

The rates are calculated as follows:

Denominator: Members included in this measure were discharged and were not readmitted within 30 days.

7 Day Numerator: Members discharged resulting in a compliant follow-up visit within 7 days of discharge.

30 Day Numerator: Members discharged resulting in a compliant follow-up visit within 30 days of discharge.

Note: Compliance for a 7 day visit also counts toward the 30 day compliance rate.

Goal

PerformCare is providing this measure for informational purposes.

Network Average

Plan-wide average of follow-up visits within 7 and 30 Days of discharge for all Providers.

	2017-Q3	2017-Q4	2018-Q1	2018-Q2	Average
Plan-Wide					
7 Day Follow-Ups	17.0%	15.0%	17.2%	17.2%	16.7%
30 Day Follow-Ups	30.8%	30.2%	31.5%	32.5%	31.3%

Provider Breakdown

Yearly average of follow-up visits within 7 and 30 days of discharge by Provider.

Provider	Annual Average 7 Day Follow-Ups	Annual Average 30 Day Follow-Ups
Providers with 100+ Discharges	14.66%	29.77%
BOWLING GREEN BRANDYWINE SA-NONHOSP	16.15%	30.43%
Eagleville Hospital SA-NonHosp*	16.97%	32.12%
FIRETREE LTD-SA NON-HOSPITAL-SNYDER	25.23%	41.44%
FIRETREE POTTSVILLE SA-NONHOSP	5.22%	17.91%
GAUDENZIA SA NONHOSP COMMON GROUND	14.23%	30.60%
GAUDENZIA SA NONHOSP SIENA HOUSE	3.55%	14.89%
PYRAMID HILLSIDE SA NONHOSP*	19.05%	31.43%
PYRAMID PLANK RD SA NONHOSP*	19.88%	35.09%
Roxbury Treatment Center SA-NonHosp	20.64%	37.79%
TEEN CHALLENGE TRAINING CENTER INC - SA-NONHOSP	8.29%	17.91%
WHITE DEER RUN COVE FORGE SA-NONHOSP	24.66%	44.18%
WHITE DEER RUN LANC SA-NONHOSP	5.47%	18.36%
WHITE DEER RUN NEW PERS SA-NONHOSP	16.56%	33.12%
WHITE DEER RUN SA NON HOSP YORK	7.66%	20.10%
WHITE DEER RUN SA NONHOSP ALLENWOOD	15.12%	33.86%

Measure 5: Follow-Up Visits within 7 and 30 Days of Discharge

Provider	Annual Average 7 Day Follow-Ups	Annual Average 30 Day Follow-Ups
Providers with between 30 and 100 Discharges	20.57%	34.45%
BRADFORD RECOVERY CENTER- SA NON-HOSP	16.87%	40.96%
D&A REHAB SERVICES SA-NONHOS	10.26%	17.95%
DAYSTAR CENTER SA-NONHOSP	9.43%	15.09%
Eagleville Hospital SA-Hosp*	4.26%	17.02%
FIRETREE CONEWAGO SA-NONHOSP	22.83%	36.96%
GATE HOUSE FOR MEN AND WOMEN SA-NONHOSP	8.75%	22.50%
GAUDENZIA SA NONHOSP CONCEPT 90	35.42%	45.83%
NUUESTRA CLINICA SA-NONHOSP	32.93%	43.90%
PYRAMID LANGHORNE SA NONHOSP*	15.09%	33.96%
PYRAMID PENN AVE SA NONHOSP*	27.27%	36.36%
PYRAMID QUAKERTOWN SA NONHOSP*	36.67%	56.67%
SAFE HAVEN TREATMENT SERVICES SA-NONHOSP	31.91%	44.68%
VALLEY FORGE MED CTR SA-NONHOSP	29.51%	40.98%
VALLEY FORGE MED CTR SA-HOSP	8.45%	29.58%
WHITE DEER RUN LEHIGH SA-NONHOSP	19.23%	26.92%
WHITE DEER RUN SA NON HOSP REHAB YORK	24.47%	39.36%

*Providers with Co-Occurring Disorder Competency

Note: Individual Provider rates for Providers with less than 30 discharges were not calculated due to the smaller sample of data.

Measure 6: Length of Stay

A length of stay is based on the individual needs of the Member and medical necessity, however it is important for PerformCare and Providers to be aware of averages and look for trends. The average length of stay in number of days for Substance Use services are reported by Provider.

PerformCare calculates these numbers by counting the number of days authorized through PerformCare for each admission from claims data. An average is then calculated from these numbers for each Provider. This measure includes any Members with an admission between 7/1/17 and 6/30/18.

Goal

PerformCare is providing this measure for informational purposes.

Network Average

Plan-wide average of length of stay in days for all Providers.

	2017-Q3	2017-Q4	2018-Q1	2018-Q2	Overall
Plan-Wide					
Average Length of Stay in Days	23	23	22	22	23

Average Length of Stay by Age Category

	Adult (age 18+)		Child (age 0-17)	
	Average LOS	Discharges	Average LOS	Discharges
2017-Q3	21	1,433	101	33
2017-Q4	23	1,413	56	14
2018-Q1	21	1,411	90	10
2018-Q2	21	1,434	120	22
Total	22	5,691	97	79

Provider Breakdown

Yearly average of length of stay in days by Provider.

Provider	2017-Q3	2017-Q4	2018-Q1	2018-Q2	Overall
Providers with 100+ Discharges	15	16	15	15	15
BOWLING GREEN BRANDYWINE SA-NONHOSP	14	15	10	12	13
BRADFORD RECOVERY CENTER- SA NON-HOSP	12	14	15	13	13
Eagleville Hospital SA-NonHosp*	37	33	25	25	31
FIRETREE CONEWAGO SA-NONHOSP	32	36	33	37	35
FIRETREE LTD-SA NON-HOSPITAL-SNYDER	42	36	36	42	39
FIRETREE POTTSVILLE SA-NONHOSP	11	10	12	19	13
GAUDENZIA SA NONHOSP COMMON GROUND	9	11	10	11	10
GAUDENZIA SA NONHOSP SIENA HOUSE	39	30	35	30	32
PYRAMID HILLSIDE SA NONHOSP*	15	16	32	21	19
PYRAMID PLANK RD SA NONHOSP*	20	16	27	20	20
Roxbury Treatment Center SA-NonHosp	14	16	16	18	16
TEEN CHALLENGE TRAINING CENTER INC	9	13	12	13	12
WHITE DEER RUN COVE FORGE SA-NONHOSP	15	15	12	12	13
WHITE DEER RUN LANC SA-NONHOSP	9	10	11	10	10
WHITE DEER RUN NEW PERS SA-NONHOSP	11	11	11	13	11
WHITE DEER RUN SA NON HOSP YORK	5	4	5	4	4
WHITE DEER RUN SA NONHOSP ALLENWOOD	13	13	11	10	12

Provider	2017-Q3	2017-Q4	2018-Q1	2018-Q2	Overall
Providers with between 30 and 100 Discharges	32	35	33	38	34
Clearbrook, Inc. SA-NonHosp	7	9	11		9
D&A REHAB SERVICES SA-NONHOS	112	148	130	150	132
DAYSTAR CENTER SA-NONHOSP	63	72	45	51	59
Eagleville Hospital SA-Hosp*	7	7	7	6	7
GATE HOUSE FOR MEN AND WOMEN SA-NONHOSP	66	74	58	79	68
GAUDENZIA SA NONHOSP CONCEPT 90	58	52	51	60	55
NUESTRA CLINICA SA-NONHOSP	32	44	39	47	41
PYRAMID LANGHORNE SA NONHOSP*	37	28	25	28	29
PYRAMID PENN AVE SA NONHOSP*	17	26	30	20	22
PYRAMID QUAKERTOWN SA NONHOSP*	20	57	63	46	45
SAFE HAVEN TREATMENT SERVICES SA-NONHOSP	17	13	38	-	19
VALLEY FORGE MED CTR SA-HOSP	7	7	7	6	7
VALLEY FORGE MED CTR SA-NONHOSP	19	19	14	13	17
WHITE DEER RUN LEHIGH SA-NONHOSP	16	14	17	17	16
WHITE DEER RUN SA NON HOSP REHAB YORK	22	32	20	19	23

*Providers with Co-Occurring Disorder Competency

Note: Individual Provider rates for Providers with less than 30 discharges were not calculated due to the smaller sample of data.

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 NH Halfway House					
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.
Daystar	14	100%	100%	100%	100%
Gatehouse for Men	15	67%	100%	100%	100%
Gatehouse for Women	12	67%	92%	92%	100%

Capital NH Rehab 3B					
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.
Bowling Green/Brandywine	17	65%	65%	77%	65%
Conewago Place	20	90%	85%	95%	95%
Conewago Pottsville	12	92%	92%	100%	100%
Conewago Snyder	24	92%	96%	100%	96%
DARS Manos	12	33%	50%	67%	50%
Eagleville Hospital *	29	93%	86%	83%	79%
Gaudenzia Common Ground	22	77%	91%	96%	77%
Gaudenzia Concept 90	10	100%	70%	80%	40%
Gaudenzia Vantage	13	69%	69%	92%	54%
Roxbury (Uhs) Of PA	21	100%	71%	86%	71%
SACA	11	100%	100%	100%	91%
Valley Forge Medical Center	12	100%	75%	92%	92%
WDR Allenwood	16	94%	81%	94%	56%
WDR Of Lancaster	10	90%	80%	90%	80%
WDR New Perspectives (Lebanon)	13	85%	100%	85%	69%

*Providers with Co-Occurring Disorder Competency