

PerformCARE[®]

Provider Profiling Year-End Report

Family Based Mental Health Services (FBMHS)

1/1/2023 - 12/31/2023

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 January, and will provide measures on the first two quarters of the calendar year (Provider Profiling Mid-Year Report). The second report will be distributed in July, and will provide measures on the entire calendar year (Provider Profiling Year-End 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 1/1/2023- 12/31/2023.

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
				2023-Q1	2023-Q2	2023-Q3	2023-Q4	

7-Day Access for FBMHS

Plan-Wide	753	632	121	5.22	87%	87%	85%	77%	84%
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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
					2023-Q1	2023-Q2	2023-Q3	2023-Q4	
7-Day Access for FBMHS									
Diakon FBMH	49	40	9	5.59	88%	83%	86%	73%	82%
PA Counseling Svcs FBMH	291	238	53	5.65	87%	86%	80%	70%	82%
Youth Advocate Prog FBMH	59	43	16	6.36	86%	91%	86%	56%	73%
TEAMCare BH FBMH	63	46	17	5.95	83%	79%	64%	63%	73%
Wellspan Philhaven FBMH	75	64	11	5.20	75%	93%	89%	89%	85%
Merakey Stevens Center FBMH	27	26	1	4.26	100%	100%	100%	86%	96%
Jewish Family Services FBMH	27	26	1	2.52	100%	83%	100%	100%	96%
Laurel Life Services FBMH	52	49	3	4.37	91%	100%	89%	95%	94%
CSG FBMH	60	58	2	3.92	100%	91%	100%	100%	97%
Franklin Family Services FBMH	8	7	1	2.87	80%	-	100%	-	88%
Momentum Services FBMH	34	28	6	5.05	60%	77%	88%	100%	82%

- 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: 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 1/1/23 - 12/31/23, 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 %
2023-Q1	125	18	14%
2023-Q2	119	18	15%
2023-Q3	47	5	11%
2023-Q4	43	8	19%
Total	334	49	15%

Provider Breakdown

MH IP Hospitalization Rates

Provider	Members Discharged from FBMHS	Members Admitted to MHIP (while in FBMHS)	% of Members in MHIP
CSG FBMH	55	8	15%
Diakon FBMH	40	1	3%
Family Care Services FBMH	12	0	0%
Franklin Family Services FBMH	12	1	8%
Jewish Family Services FBMH	18	1	6%
Laurel Life Services FBMH	64	7	11%
Merakey Stevens Center FBMH	21	4	19%
Momentum Services FBMH	35	1	3%
PA Counseling Svcs FBMH	363	55	15%
TEAMCare BH FBMH	63	9	14%
Wellspan Philhaven FBMH	66	11	17%
Youth Advocate Prog FBMH	59	11	19%

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

Providers with less than 5 discharges are not shown on the report.

Measure 3: 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	2023-Q1	2023-Q2	2023-Q3	2023-Q4	CY 2023
Outpatient	66%	59%	64%	62%	63%
No Claims After Discharge***	18%	24%	22%	20%	21%
Other**	11%	8%	3%	12%	9%
IBHS	2%	4%	10%	5%	5%
RTF	3%	4%	1%	1%	2%

Provider Breakdown

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

100+ Discharges	2023-Q1	2023-Q2	2023-Q3	2023-Q4	CY 2023
PA Counseling Svcs FBMH					
Outpatient	65%	58%	60%	56%	60%
No Claims After Discharge***	15%	23%	25%	21%	21%
Other**	13%	9%	5%	11%	10%
IBHS	3%	7%	9%	11%	8%
RTF	3%	2%	0%	0%	2%
Between 30-100 Discharges	2023-Q1	2023-Q2	2023-Q3	2023-Q4	CY 2023
Wellspan Philhaven FBMH					
Outpatient	92%	67%	50%	53%	67%
No Claims After Discharge***	0%	7%	50%	33%	20%
IBHS	0%	20%	0%	0%	6%
Other**	8%	7%	0%	7%	6%
RTF	0%	0%	0%	7%	2%
TEAMCare BH FBMH					
Outpatient	73%	56%	50%	90%	65%
No Claims After Discharge***	18%	44%	25%	10%	24%
IBHS	9%	0%	25%	0%	11%
Laurel Life Services FBMH					
Outpatient	68%	64%	75%	75%	70%
No Claims After Discharge***	21%	18%	12%	12%	17%
Other**	10%	18%	0%	12%	11%
IBHS	0%	0%	12%	0%	2%

	2023-Q1	2023-Q2	2023-Q3	2023-Q4	CY 2023
CSG FBMH					
Outpatient	67%	57%	100%	88%	80%
No Claims After Discharge***	33%	43%	0%	6%	17%
Other**	0%	0%	0%	6%	3%
Diakon FBMH					
Outpatient	78%	90%	60%	100%	81%
No Claims After Discharge***	22%	10%	20%	0%	15%
RTF	0%	0%	20%	0%	4%
Momentum Services FBMH					
Outpatient	64%	43%	75%	33%	55%
No Claims After Discharge***	0%	14%	0%	33%	10%
Other**	21%	43%	25%	33%	29%
RTF	14%	0%	0%	0%	6%
Youth Advocate Prog FBMH					
Outpatient	33%	59%	67%	0%	56%
No Claims After Discharge***	66%	23%	17%	100%	31%
IBHS	0%	0%	17%	0%	6%
RTF	0%	3%	0%	0%	8%

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 IBHS, Outpatient, RTF.*

**** There were no claims from discharge date to report run date. This number may be affected by TPL, Member relocation, Member decision to decline services, or no follow-up service recommended after FBMHS.*

Measure 4: 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	2023-Q1	2023-Q2	2023-Q3	2023-Q4	CY 2023
Outpatient	72%	64%	65%	67%	67%
No Claims After Discharge***	14%	18%	16%	16%	16%
Other**	8%	8%	4%	9%	8%
IBHS	4%	7%	12%	15%	7%
RTF	2%	3%	3%	2%	2%

Provider Breakdown

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

100+ Discharges	2023-Q1	2023-Q2	2023-Q3	2023-Q4	CY 2023
PA Counseling Svcs FBMH					
Outpatient	68%	66%	63%	65%	66%
No Claims After Discharge***	12%	17%	19%	15%	16%
IBHS	5%	8%	8%	10%	8%
Other**	11%	6%	7%	8%	8%
RTF	3%	2%	3%	1%	2%
Between 30-100 Discharges	2023-Q1	2023-Q2	2023-Q3	2023-Q4	CY 2023
CSG FBMH					
Outpatient	63%	53%	80%	76%	68%
No Claims After Discharge***	18%	20%	0%	9%	12%
IBHS	0%	13%	0%	5%	5%
Other**	0%	0%	0%	5%	2%
RTF	18%	13%	20%	5%	12%
Laurel Life Services FBMH					
Outpatient	68%	67%	64%	75%	68%
No Claims After Discharge***	21%	16%	7%	12%	15%
Other**	10%	17%	7%	12%	11%
IBHS	0%	0%	21%	0%	6%
TEAMCare BH FBMH					
Outpatient	77%	69%	60%	83%	71%
No Claims After Discharge***	15%	31%	20%	8%	29%
IBHS	8%	0%	20%	0%	9%
Other**	0%	0%	0%	8%	2%

	2023-Q1	2023-Q2	2023-Q3	2023-Q4	CY 2023
Wellspan Philhaven FBMH					
Outpatient	79%	67%	56%	61%	67%
No Claims After Discharge***	5%	0%	44%	27%	16%
IBHS	11%	28%	0%	0%	11%
Other**	5%	6%	0%	6%	5%
Diakon FBMH					
Outpatient	85%	82%	75%	75%	81%
No Claims After Discharge***	15%	9%	12%	0%	10%
Other**	0%	9%	0%	0%	3%
RTF	0%	0%	12%	25%	6%
Momentum Services FBMH					
Outpatient	60%	56%	75%	43%	57%
No Claims After Discharge***	7%	0%	0%	29%	9%
Other**	20%	33%	25%	29%	26%
RTF	13%	11%	0%	0%	9%
Youth Advocate Prog FBMH					
Outpatient	60%	61%	59%	0%	59%
No Claims After Discharge***	40%	22%	9%	100%	21%
IBHS	0%	0%	27%	0%	12%
RTF	0%	17%	4%	0%	8%

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 IBHS, Outpatient, RTF.

*** There were no claims from discharge date to report run date. This number may be affected by TPL, Member relocation, Member decision to decline services, or no follow-up service recommended after FBMHS.