

Q1 2015 HealthChoices Allegheny County Report

This report summarizes enrollment, claims data and admission data from this quarter, in comparison to the prior quarter. This report is used by the Allegheny HealthChoices Quality Improvement Department to monitor and investigate changes in utilization from quarter to quarter. Tables 1 and 2 provide a summary of enrollment and paid claims; Tables 3 to 8 summarize service use and admissions for youth (0-20 years); and Tables 9 to 15 summarize service use and admissions for adults.

Table 1. Average monthly enrollment by age

	Q1 2015	% Difference from Q4 2014
0-20 years	90,991	1.4%
21+ years	74,142	-3.4%
Total Enrollment	165,133	-0.8%

Table 1 shows that the average monthly enrollment during Q1 2015 was similar to Q4 2014.

Table 2. Paid claims by age for mental health (MH) and substance use disorder (SUD) services

		Q1 2015			% Difference from Q4 2014 - Q1 2015		
		# People	Paid	Avg. Paid per Person	# People	Paid	Avg. Paid per Person
00 - 20 years	SUD	499	\$ 1,962,238	\$ 3,932	9%	-3%	-11%
	MH	11,640	\$ 22,596,383	\$ 1,941	4%	-2%	-6%
	Total	11,934	\$ 24,558,621	\$ 2,058	4%	-2%	-6%
21-54 years	SUD	3,985	\$ 8,391,293	\$ 2,106	1%	-8%	-9%
	MH	12,281	\$ 17,109,438	\$ 1,393	0%	-1%	0%
	Total	14,401	\$ 25,500,732	\$ 1,771	0%	-3%	-3%
55 years and older	SUD	659	\$ 952,616	\$ 1,446	2%	-7%	-9%
	MH	3,950	\$ 4,739,747	\$ 1,200	-2%	-3%	-2%
	Total	4,302	\$ 5,692,363	\$ 1,323	-1%	-4%	-3%
Total	SUD	5,143	\$ 11,306,147	\$ 7,484	2%	-7%	-10%
	MH	27,871	\$ 44,445,568	\$ 4,534	1%	-2%	-3%
	Total	30,637	\$ 55,751,716	\$ 5,152	1%	-3%	-4%

Services can be categorized as either mental health or substance use disorder services. Table 2 shows the breakdown of the number of service users, paid claims, and average cost per service user for substance use disorder services, mental health services, and in total. For the most part, Q1 2015 data was similar to Q4 2014. There was, however, an overall decrease in average SUD service units used per person from Q4 2014, which could be attributed to the 11% decrease in average paid per person for SUD services within the youth population. Detailed differences are explored further in the age-specific tables.

**Table 3. Top 10 mental health services for youth
(ranked by number of service users)**

	Q1 2015			% Difference from Q4 2014 - Q1 2015		
	# People	Paid	Avg. Paid per Person	# People	Paid	Avg. Paid per Person
Outpatient MH	6,561	\$ 2,533,430	\$ 386	8%	8%	0%
Medication Check	4,295	\$ 701,966	\$ 163	4%	5%	1%
BHRS	3,583	\$ 7,574,667	\$ 2,114	-2%	-4%	-2%
Service Coordination	1,392	\$ 1,205,960	\$ 866	1%	0%	-1%
Crisis	555	\$ 305,414	\$ 550	1%	-2%	-2%
Family Based	438	\$ 2,318,594	\$ 5,294	-4%	-5%	-1%
Partial Hospitalization MH	402	\$ 1,238,543	\$ 3,081	0%	-6%	-5%
Inpatient MH	262	\$ 2,623,764	\$ 10,014	5%	-8%	-12%
RTF	164	\$ 3,006,016	\$ 18,329	5%	7%	2%
Family Focused, Solution Based	112	\$ 354,758	\$ 3,167	-2%	-7%	-5%
Subtotal of above*	11,585	\$ 21,863,112	\$ 1,887	4%	-2%	-5%
Total MH Services	11,640	\$ 22,596,383	\$ 1,941	4%	-2%	-6%

This table illustrates the top 10 most frequently used mental health service categories used by youth (under 21 years). For most services, utilization during the first quarter of 2015 was similar to the fourth quarter of 2014. The decrease in average paid claims per person seen in inpatient MH is driven by a decrease in average units used per person.

* This subtotal only includes the items listed in the table and is not inclusive of all possible items.

**Table 4. Top 10 mental health diagnoses for youth
(ranked by number of service users)**

	Q1 2015			% Difference from Q4 2014 - Q1 2015		
	# People	Paid	Avg. Paid per Person	# People	Paid	Avg. Paid per Person
ADHD	4,040	\$ 4,630,341	\$ 1,146	4%	1%	-3%
Adjustment D/O	2,200	\$ 2,166,013	\$ 985	2%	3%	1%
Autism Spectrum	2,123	\$ 4,953,694	\$ 2,333	1%	-2%	-3%
Major Depression	1,248	\$ 3,469,631	\$ 2,780	7%	-9%	-15%
Neurotic D/O	1,058	\$ 873,183	\$ 825	10%	7%	-2%
Conduct D/O	973	\$ 2,206,525	\$ 2,268	0%	0%	1%
Oppositional/Defiant D/O	863	\$ 1,448,390	\$ 1,678	3%	-11%	-14%
Depressive D/O	650	\$ 787,997	\$ 1,212	8%	-14%	-20%
DX Deferred	447	\$ 250,487	\$ 560	-2%	-5%	-3%
Bipolar D/O	353	\$ 1,225,315	\$ 3,471	5%	9%	3%
Subtotal (included)*	11,501	\$ 22,011,575	\$ 1,914	4%	-2%	-6%
Diagnosis	11,640	\$ 22,596,383	\$ 1,941	4%	-2%	-6%

This table displays the top 10 most frequently used mental health diagnostic categories for youth (under 21 years). The decrease in average paid claims per person for people with major depression is attributed to a notable decrease in people utilizing family-based services and a decrease in average inpatient MH service units used per person. The decrease in paid claims for people with oppositional/defiant disorder was driven by fewer people using RTF services. The decrease in paid claims for people with depressive disorder was driven by fewer people using RTF and inpatient MH services.

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Table 5. Utilization and quality measures for IPMH and RTF for youth

	Inpatient MH		RTF	
	Q4 2014	Q1 2015	Q4 2014	Q1 2015
Number of total admissions	292	314	77	68
Number people with at least one admission	263	279	70	66
Admission rate	2.0	2.2	0.5	0.5
Average length of stay	15	11	28	26
% with follow-up in 7 days	70%	73%	79%	62%
% with readmit in 30 days	7%	13%	5%	2%
% with readmit in 31-90 days	13%	10%	8%	8%

This table shows admissions data, rates of follow-up appointments, and readmission rates for inpatient mental health and RTF services. Compared to the fourth quarter of 2014, inpatient mental health experienced an increase in admissions and number of people using this service. Meanwhile, RTF experienced a decrease in admissions and number of people using this service. Inpatient MH experienced an increase in follow-up rates within 7 days. Also, the average length of stay decreased for both RTF and inpatient MH. This information is reported for comparison instead of percent changes because large percent changes often represent small absolute changes when the group size included in the calculation is small.

Table 6. Substance use disorder services for youth (ranked by number of service users)

	Q4 2014			Q1 2015		
	# People	Paid	Avg. Paid per Person	# People	Paid	Avg. Paid per Person
Outpatient SUD	331	\$ 224,311	\$ 678	344	\$ 199,437	\$ 580
Non-Hospital Rehab	126	\$ 1,539,726	\$ 12,220	145	\$ 1,470,730	\$ 10,143
Intensive Outpatient SUD	45	\$ 46,717	\$ 1,038	47	\$ 50,418	\$ 1,073
Halfway House	19	\$ 176,023	\$ 9,264	19	\$ 205,819	\$ 10,833
Non-Hospital Detox	16	\$ 14,139	\$ 884	15	\$ 12,244	\$ 816
Partial Hospitalization SUD	13	\$ 10,320	\$ 794	13	\$ 14,490	\$ 1,115
Methadone Maintenance	11	\$ 6,688	\$ 608	6	\$ 6,365	\$ 1,061
Total D&A Services	459	\$ 2,019,758	\$ 4,400	499	\$ 1,962,238	\$ 3,932

This table illustrates utilization for different substance use disorder services for youth (less than 21 years). Overall, service utilization did not have much fluctuation from the fourth quarter of 2014. Outpatient services continued to be the most used service for the first quarter of 2015; it accounts for about 69% of youth who used SUD services. Non-hospital rehab accounted for about 75% of costs and is the second most utilized service. Outpatient SUD and non-hospital rehab both experienced an increase in the number of people but total claims decreased from Q4 2014 due to less average service units used per person. Note that the percentage changes are not reported because large percent changes often represent small absolute changes when the group size included in the calculation is small.

**Table 7. Substance use disorder diagnoses for youth
(ranked by number of service users)**

	Q4 2014			Q1 2015		
	# People	Paid	Avg. Paid per Person	# People	Paid	Avg. Paid per Person
Cannabis	342	\$ 1,442,793	\$ 4,219	366	\$ 1,410,155	\$ 3,853
Opioid	52	\$ 249,966	\$ 4,807	61	\$ 200,645	\$ 3,289
Alcohol	33	\$ 132,072	\$ 4,002	38	\$ 189,624	\$ 4,990
Polysubstance Dependence	28	\$ 94,999	\$ 3,393	21	\$ 73,179	\$ 3,485
Substance Induced Disorder	6	\$ 1,512	\$ 252	10	\$ 4,013	\$ 401
PCP	2	\$ 864	\$ 432	4	\$ 11,781	\$ 2,945
Cocaine	2	\$ 30,360	\$ 15,180	3	\$ 12,885	\$ 4,295
Sedative, Hypnotic or Anxiolytic Disorder	3	\$ 13,705	\$ 4,568	3	\$ 676	\$ 225
Inhalants	3	\$ 15,939	\$ 5,313	3	\$ 4,674	\$ 1,558
Amphetamine Dependence	1	\$ 2,369	\$ 2,369	3	\$ 20,599	\$ 6,866
Hallucinogen-Related Disorder	1	\$ 22,458	\$ 22,458	2	\$ 19,786	\$ 9,893
Total D&A Diagnosis	459	\$ 2,019,758	\$ 4,400	499	\$ 1,962,238	\$ 3,932

This table shows the most frequently used substance use disorder diagnostic categories. Most diagnostic categories showed typical quarterly fluctuations. Cannabis dependence/abuse continued to be the most common diagnosis, accounting for 73% of people, and highest cost, accounting for 72% of costs. The increase in paid claims for youth diagnosed with an alcohol SUD is due to an increase of halfway house service units used per person and more people using non-hospital rehab services. Note that the percentage changes are not reported because large percent changes often represent small absolute changes when the group size included in the calculation is small.

Table 8. Utilization and quality measures for non-hospital rehabilitation for youth

	Q4 2014	Q1 2015
Number of total admissions	75	96
Number people with at least one admission	70	93
Admission rate	0.5	0.7
Average length of stay	46	16
% with follow-up in 7 days	39%	26%
% with readmission in 30 days	8%	4%
% with readmission in 90 days	13%	5%

This table shows admissions data, rates of follow-up appointments, and readmission rates for non-hospital rehab for youth. The average length of stay decreased in the first quarter of 2015 compared to the fourth quarter of 2014. Total admissions showed an increase from the fourth quarter of 2014. In the first quarter of 2015, there was a 4% and 8% decrease in 30 and 90 day readmissions, respectively. Note that the percentage changes are not reported because large percent changes often represent small absolute changes when the group size included in the calculation is small.

Table 9. Most frequently used community-based mental health services for adults (ranked by number of service users)

	Q1 2015			% Difference Q4 2014 - Q1 2015		
	# People	Paid	Avg. Paid per Person	# People	Paid	Avg. Paid per Person
Outpatient MH	9,650	\$ 2,859,848	\$ 296	-2%	-7%	-5%
Med Check	9,602	\$ 1,351,888	\$ 141	0%	8%	8%
Service Coordination	3,141	\$ 3,387,272	\$ 1,078	-1%	-2%	-1%
Crisis	1,001	\$ 786,671	\$ 786	8%	24%	15%
CTT	649	\$ 3,196,506	\$ 4,925	2%	0%	-3%
Forensic Support	219	\$ 114,466	\$ 523	-4%	-16%	-12%
Psych Rehab	212	\$ 293,851	\$ 1,386	5%	-9%	-13%
Mobile MH	206	\$ 175,045	\$ 850	13%	-3%	-15%
Peer Support	178	\$ 120,462	\$ 677	7%	11%	4%
Partial Hospitalization MH	151	\$ 214,340	\$ 1,419	6%	-4%	-10%
Subtotal of above*	15,907	\$ 12,500,350	\$ 786	-1%	-1%	0%
Total MH Services	16,177	\$ 21,849,185	\$ 1,351	-1%	-1%	-1%

This table displays the most frequently used community-based mental health service categories used by adults (21 years and older). For most services, utilization during the first quarter of 2015 was similar to the fourth quarter of 2014. The increase in paid claims associated with crisis was driven by a increase in average service units used per person, especially for walk-in services. The decrease in forensic support paid claims is due to a decrease in average service units used per person. The decrease in average cost associated with psych rehab and mobile MH was driven by a decrease in average service units used per person. Peer support experienced an increase in paid claims due to more service utilization. Partial hospitalization average cost per person decreased due to a reduction in average service units used per person.

* This subtotal only includes the items listed in the table and is not inclusive of all possible items.

Table 10. Paid claims for inpatient mental health, extended acute, and RTFA services for adults

	Q4 2014			Q1 2015		
	# People	Paid	Avg. Paid per Person	# People	Paid	Avg. Paid per Person
IPMH	756	\$ 5,267,515	\$ 6,968	788	\$ 5,280,047	\$ 6,701
EAC (CRU)	40	\$ 1,488,267	\$ 37,207	37	\$ 1,226,728	\$ 33,155
IPMH EAC (TRU)	19	\$ 646,713	\$ 34,038	17	\$ 580,181	\$ 34,128
Community-based EAC	28	\$ 558,239	\$ 19,937	33	\$ 555,696	\$ 16,839
RTFA	19	\$ 436,278	\$ 22,962	12	\$ 190,920	\$ 15,910
Subtotal of above*	835	\$ 8,563,753	\$ 10,256	858	\$ 8,011,989	\$ 9,338
Total MH services	16,286	\$ 22,173,423	\$ 1,362	16,177	\$ 21,849,185	\$ 1,351

This table summarizes utilization for four acute levels of care. Changes from the fourth quarter of 2014 to the first quarter of 2015 were not notable.

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Table 11. Quality and utilization measures for inpatient, extended acute, and RTFA services

	IPMH		IPMH EAC (TRU)		EAC (CRU)		Community-based EAC		RTFA	
	Q1 2015	% change from Q4 2014	Q4 2014	Q1 2015	Q4 2014	Q1 2015	Q4 2014	Q1 2015	Q4 2014	Q1 2015
Number of total admissions	1,050	-5%	27	33	10	10	11	8	16	12
Number people with at least one admission	872	-3%	27	33	10	10	11	8	16	12
Admission rate	7.3	-5%	--	--	--	--	--	--	--	--
Average length of stay	11	-31%	73	113	78	86	163	133	81	72
% with follow-up in 7 days	76%	2%	67%	85%	100%	100%	50%	50%	80%	60%
% with readmission in 30 days	16%	-9%								
% with readmission in 90 days	13%	-4%								

The average length of stay at all levels of care, except for IPMH EAC (TRU) and EAC (CRU), experienced a decrease in days from Q4 2014. Because the number of admissions to most of these services were very small in a given quarter, the numbers from Q4 2014, with the exception of IPMH, were provided as a comparison point instead of calculating a percent change. Admission rates per 1,000 enrollees were so small given the limited capacity at several programs that they were not reported. People are not readmitted directly to extended acute or RTFA programs, as all referrals originate from inpatient units, so readmissions were not reported for these services. Because only HealthChoices services are included as follow-up services, eligibility may affect these rates. Other fluctuations from the fourth quarter of 2014 to the first quarter of 2015 were not notable.

Table 12. Most frequent diagnoses for adult mental health service users

	Q1 2015			% Difference Q4 2014 - Q1 2015		
	# People	Paid	Avg. Paid per Person	# People	Paid	Avg. Paid per Person
Major Depression	4,601	\$ 4,437,447	\$ 964	-2%	-1%	0%
Schizophrenia	3,106	\$ 8,470,299	\$ 2,727	0%	-3%	-2%
Bipolar D/O	2,945	\$ 3,020,406	\$ 1,026	0%	5%	5%
Neurotic D/O	2,031	\$ 848,219	\$ 418	-2%	-1%	1%
Depressive D/O	1,820	\$ 1,482,451	\$ 815	-1%	-13%	-12%
Adjustment D/O	1,149	\$ 634,071	\$ 552	-1%	-3%	-2%
DX Deferred	894	\$ 527,852	\$ 590	11%	24%	11%
Subtotal of above*	14,243	\$ 19,420,744	\$ 1,364	-1%	-2%	0%
Total Diagnoses for MH Services	16,177	\$ 21,849,185	\$ 1,351	-1%	-1%	-1%

This table summarizes the most frequently used mental health diagnostic categories for adults (21 years and older). The decrease in paid claims for people with depressive disorder is related to less people using inpatient mental health services. The increase in paid claims for people with DX Deferred is due to an increase in utilization and in average walk-in crisis service units used per person. Overall, diagnostic categories were very similar to last quarter.

* This subtotal only includes the items listed in the table and is not inclusive of all possible items.

Table 13. Substance use disorder services for adults

	Q1 2015			% Difference Q4 2014 - Q1 2015		
	# People	Paid	Avg. Paid per Person	# People	Paid	Avg. Paid per Person
Outpatient SUD	2,780	\$ 934,146	\$ 336	3%	-6%	-9%
Methadone Maintenance	1,824	\$ 1,822,399	\$ 999	3%	1%	-2%
Non-Hospital Rehab	763	\$ 3,888,651	\$ 5,097	-9%	-15%	-7%
Intensive Outpatient SUD	567	\$ 614,622	\$ 1,084	3%	3%	0%
Non-Hospital Detox	456	\$ 416,724	\$ 914	2%	-2%	-4%
Med Check SUD	402	\$ 226,675	\$ 564	7%	-3%	-10%
Partial Hospitalization SUD	213	\$ 288,855	\$ 1,356	-2%	-14%	-12%
Halfway House	164	\$ 821,647	\$ 5,010	11%	-7%	-16%
Inpatient Detox	102	\$ 296,057	\$ 2,903	40%	28%	-8%
Inpatient Rehab	6	\$ 34,134	\$ 5,689	-33%	-6%	42%
Total D&A Services	4,630	\$ 9,343,910	\$ 2,018	1%	-8%	-9%

This table illustrates utilization for different substance use disorder services for adults (21 years and older). Overall, utilization this quarter was similar to last quarter. The decrease in paid claims for people using non-hospital rehab is due to a decrease in both the service intensity and the average service units used per person. The decrease in average cost of services for med check is due to a decrease in average service units used per person. The decrease in paid claims for people using partial hospitalization and halfway house was driven by a decrease in average service units used per person. Note that the number of service users for certain services during a quarter were low, so percent changes may be large while the changes in absolute numbers were small (i.e. inpatient rehab).

Table 14. Substance use disorder diagnoses for adults

	Q1 2015			% Difference Q4 2014 - Q1 2015		
	# People	Paid	Avg. Paid per Person	# People	Paid	Avg. Paid per Person
Opioid	3,219	\$ 5,766,922	\$ 1,792	3%	-10%	-12%
Alcohol Abuse/Dependence	699	\$ 1,496,805	\$ 2,141	1%	6%	5%
Poly-substance dependence	460	\$ 1,052,778	\$ 2,289	-3%	-7%	-4%
Cocaine	282	\$ 449,257	\$ 1,593	-2%	-26%	-25%
Cannabis	188	\$ 142,834	\$ 760	-2%	-12%	-11%
Substance-Induced Disorders ^o	53	\$ 68,964	\$ 1,301	29%	10%	-15%
Subtotal of above*	4,550	\$ 8,977,560	\$ 1,973	1%	-8%	-9%
All D&A diagnosis	4,582	\$ 9,281,111	\$ 2,026	1%	-8%	-9%

This table summarizes the most frequently used substance use disorder diagnoses for adults (21 years and older). Overall, patterns were similar to the previous quarter. The decrease in paid claims for opioid and cocaine dependence/abuse were driven by fewer people using non-hospital rehab service and a decrease in average non-hospital rehab service units used per person. The decrease in paid claims per person for people with substance-induced disorders was driven by a decrease in outpatient SUD average service units used per person; however, the increase in total costs was due to an increase in the total amount of people utilizing the service. The decrease in paid claims associated with cannabis dependence/abuse experienced a decrease in outpatient SUD average service units used per person in addition to a decrease in service intensity.

^o Fifty-one of the people were diagnosed with sedative, hypnotic, or anxiolytic withdrawal and two people were diagnosed with substance-induced mood disorder.

*This subtotal only includes the items listed in the table and is not inclusive of all possible items.

Table 15. Quality and utilization measures for inpatient and residential substance use disorder services

	NH Rehab		Inpatient Detox		NH Detox		Halfway House	
	Q1 2015	% change from Q4 2014	Q1 2015	% change from Q4 2014	Q1 2015	% change from Q4 2014	Q1 2015	% change from Q4 2014
Number of total admissions	731	-4%	121	-10%	516	3%	85	8%
Number people with at least one admission	645	-1%	109	-9%	462	5%	84	12%
Admission rate	5.05	-4%	0.84	-10%	3.57	3%	0.59	8%
Average length of stay	26.2	-10%	4.6	4%	3.6	-3%	93.4	-8%
% with follow-up in 7 days	50%	0%	78%	13%	74%	0%	32%	-2%
% with readmit in 30 days	7%	-17%	5%	-64%	6%	-13%	1%	-86%
% with readmit in 90 days	10%	-6%	10%	-28%	16%	-17%	3%	108%

This table shows utilization for different substance use disorder services for adults (21 years and older). Some of the services with low utilization have large percent changes from quarter to quarter because of the small numbers. Non-hospital rehab and inpatient detox experienced a decrease in total admissions for the first quarter of 2015. Also, the average length of stay decreased for non-hospital rehab, non-hospital detox and halfway house. Inpatient detox experienced an increase in follow-ups for the first quarter of 2015.