

# QUARTERLY report

**Optum Idaho is committed** *to providing the regional behavioral health boards with relevant and accurate information that will help to improve the behavioral health system to benefit members.*

Earlier this year, the Office of Performance Evaluations published its report on the design of the Idaho Behavioral Health Plan. This report included information regarding the fact that non-evidence-based services such as Community Based Rehabilitative Services (CBRS) had decreased while clinical-based family and individual therapies have increased. Several regional boards requested outcomes data around hospitalization and incarceration as it relates to CBRS reduction.

A high priority for Optum is to prevent members from having to enter hospital facilities unnecessarily. We have collaboratively worked with Inpatient Behavioral Health Facilities and Qualis (Idaho's partner for inpatient utilization management) to obtain outcomes data around hospitalizations. While we were unable to obtain related information from the Idaho Department of Corrections at this time, we will continue to work with them and additional entities for reporting purposes. Through managing outpatient behavioral health services, Optum is committed to ensuring members receive the right care at the right time based on the individual's needs.

The following charts provide insight over the past year as to how Optum is monitoring hospitalizations.



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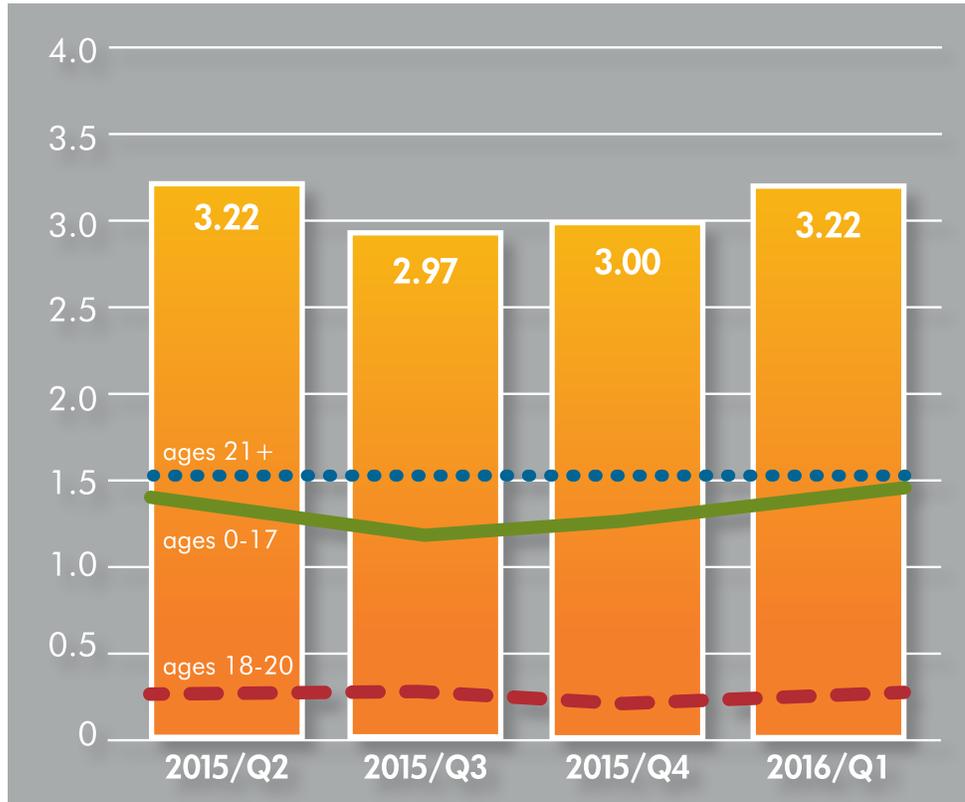
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## Optum Rate of Recorded Hospital Discharges by Age Group

Per Thousand Members



	2015/Q2	2015/Q3	2015/Q4	2016/Q1
Discharge Rate	3.22	2.97	3.00	3.22
ages 0-17	1.41	1.19	1.28	1.46
ages 18-20	0.27	0.26	0.21	0.25
ages 21+	1.53	1.52	1.52	1.51
<b>Total Discharges</b>	<b>921</b>	<b>852</b>	<b>868</b>	<b>933</b>

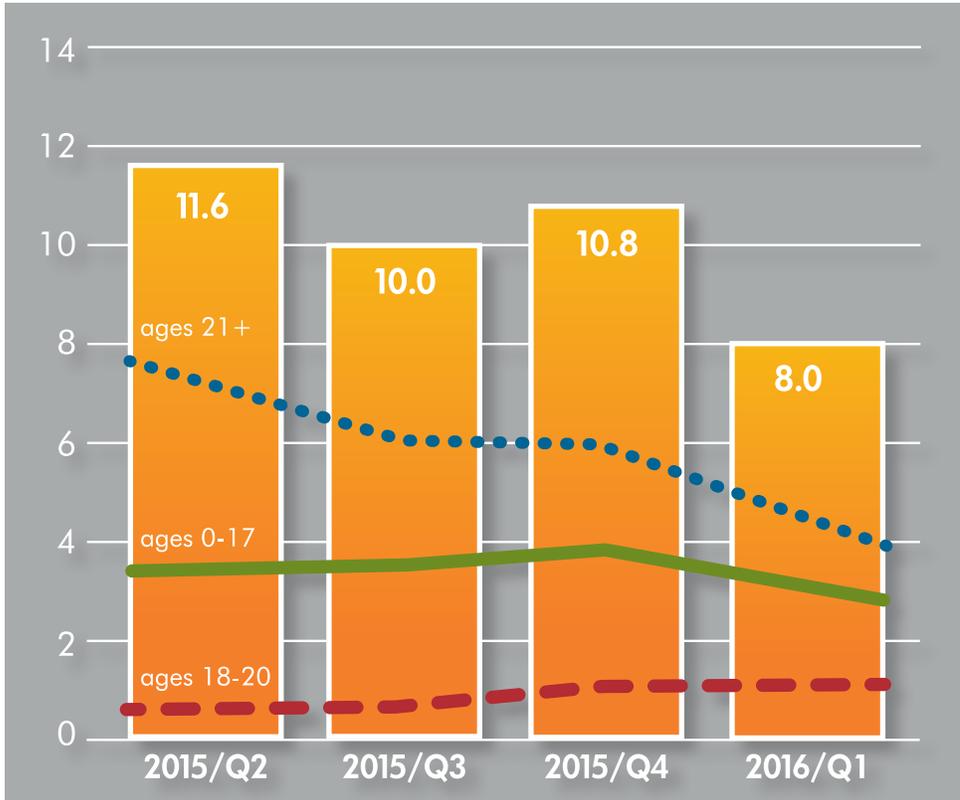
The overall rate of discharges remained stable at 3.22 per 1,000 members. Overall, this represents no change in hospitalizations.

Within age groups, for adults 21+, across the four quarters there was a fluctuation of .02 (1.53 to 1.51 per thousand) discharges. For children and youth 0-17 years there was a similar non-significant variation across the quarters. The Spring of 2015 reflected a very modest diminishment in discharges that returned to the baseline level by Q1 2016. In general, the data reflected in this chart suggests a rather stable rate across quarters with no significant changes noted in any age group.

## Percent of Hospital Discharges by Age Group with a Subsequent Admission Within 30 Days

*Cases Readmitted within 30 days of Discharge*

*(Excluding transfers and ages 0-6) Optum Recorded Admissions*

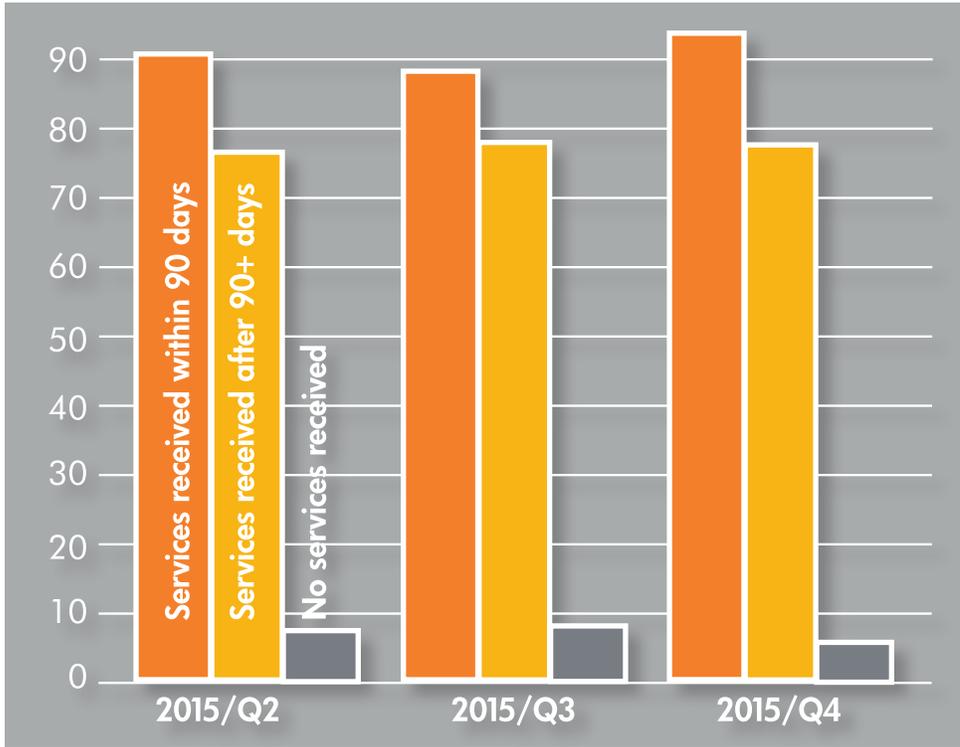


	2015/Q2	2015/Q3	2015/Q4	2016/Q1
% of total	11.6	10.0	10.8	8.0
ages 0-17	3.4	3.5	3.8	2.9
ages 18-20	0.7	0.5	1.0	1.2
ages 21+	7.6	6.0	6.0	4.0
<b>Total Discharges</b>	<b>921</b>	<b>852</b>	<b>868</b>	<b>933</b>

According to the Healthcare Effectiveness Data and Information Set (HEDIS) definition, a readmission to a hospital is counted for all persons aged 6 years and over and excludes transfers between hospitals.

Readmissions within 30 days after a discharge were tracked for each age group, reflecting more variation between the categories. The % of the Total was 11.6% for Q2 2015 and varied between 10.0 and 10.8 through Q4 2015. The first quarter of 2016 reflects a reduction to 8.0.

## Behavioral Health Service Utilizers After ABD for CBRS



	2015/Q2	2015/Q3	2015/Q4
Pct Services within 90 days	90.67%	88.78%	93.92%
Pct Services after 90+ days	76.67%	78.23%	78.04%
Pct No services received	7.67%	8.5%	5.74%
Other services within 90 days	272	261	278
Other services after 90+ days	230	230	231
Received no services	23	25	17
<b>Members Receiving ABD for CBRS</b>	<b>300</b>	<b>294</b>	<b>296</b>

Between Q2 2015 and Q4 2015, the use of Medically Necessary services has increased while non-clinical services such as CBRS have diminished. During Q2 2015, 7.67% of members that received an Adverse Benefit Determination (ABD) for CBRS services did not follow up with any therapeutic service. During Q4 of 2015, 5.74% of members did not have any therapeutic services to replace their CBRS, revealing an approximate 24% reduction in people not using therapeutic services after receiving an ABD for CBRS. During most of this study, in the first 90 days following an ABD for CBRS, 89-94% of members received therapeutic services. Approximately 77-78% of members have continued receiving therapy services after an ABD for CBRS. This trend reveals consistent utilization of evidence based treatment after CBRS has been discontinued.

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In summary, these charts indicate that member hospitalizations have remained stable with marked decreases in some categories and that overall, members are receiving evidence-based services for treating their health conditions so that they are better able to recover. When all this information is reviewed as a whole, it shows hospital discharges have improved during the transition from CBRS to Medically Necessary therapeutic practices.

The Idaho Behavioral Health Plan Quality Management and Utilization Management Quarterly Report is located on [www.optumidaho.com](http://www.optumidaho.com) under Community Partners and Statewide Reporting.

## Community Health Initiatives Grant

### *Improving the Health Status of Idahoans*

Optum Idaho has been working in collaboration with the Idaho Department of Health and Welfare to improve the health status of Idahoans through behavioral health system enhancements. We are excited to let you know that on Monday May 23, 2016, we released the first Community Health Initiatives Grant.

The new Grant focuses on children and adolescents with serious emotional disturbances (“SED”) to extend focused support to this member population and assist providers in treatment services. The Grant will support the critical needs of children and adolescents by funding a total of \$420,000 for provider engagement, training, and support on evidence-based clinical interventions such as Cognitive Behavioral Therapy (CBT), Parent-Child Interaction Therapy, and Functional Family Therapy.

To apply for the grant, applicants will need to register for a free BidSync account at BidSync’s website ([www.bidsync.com](http://www.bidsync.com)) to submit a proposal. BidSync is an electronic bidding notification and procurement system which will also support the Frequently Asked Question (FAQs) process. If additional assistance is needed regarding the BidSync registration and training process, please contact the BidSync support team at 1-800-990-9339. The bid # is: RFP 2016 0523.

To date, over 50 entities have reviewed or downloaded the RFP. The open application period ends August 22, 2016, and the award will be announced in October.

## Mental Health awareness Community Engagement

### *Promoting and Providing Educational Resources*

May was mental health awareness month and Optum was privileged to participate throughout our communities in promoting and providing educational resources about the importance of recognizing and addressing mental health issues. Some examples of these efforts included family fun fairs in North Idaho to a Peer Wellness screening of ‘Silver Linings Playbook’ in Boise. Other activities consisted of awareness walks and panel discussions.



■ May 21, 2016: Awareness Walk at Riverside Park in Burley



■ May 12, 2016: Peer Wellness Movie Screening of ‘Silver Linings Playbook’ in Boise



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