

**KDADS**  
**Behavioral Health / Substance Use Disorders**  
**Quality Committee**

**Final**

**AGGREGATE ANALYSIS REPORT**

**Reporting Period**

**FROM:** July 1, 2013

**TO:** December 31, 2013

**Unit/Team/Department:**

Quality Committee

**Topic/Project:**

Over and Under Utilization

**6 Higher Levels of Care Utilization by claims**

**Monitoring Standard:**

42 CFR 438.240 (a and b) Quality Assessment and Performance Improvement Program

Utilization Management policies and procedures:

42 CFR 438.210 (b-e) Coverage and authorization of services

42 CFR 438.242 Health Information System

**Goal:**

The Quality Committee will track and report quarterly to KDADS/BHS higher levels of care by claims data for a given quarter.

Block Grant Application Goal: 1

**Objectives:**

To assure the documentation is capturing this utilization data

To evaluate for trends that may require system intervention and education

To allow data to be presented consistently for Committee evaluation and response

**Timeline:**

- July 2012: SRS DBHS moved to the Kansas Department of Aging and Disability Services. Mental Health Services and Addiction and Prevention Services merged to become Behavioral Health Services (BHS)
- January 2013: Kansas KanCare was implemented. The State of Kansas contracted with three separate managed care organizations for the management of all Medicaid dollars to include Behavioral Health Services. ValueOptions of Kansas will be the Administrative Services Organization (ASO) of the Substance Abuse and Prevention Treatment Block Grant funds.

**Data Collection Activities:**

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Data was collected from the ValueOptions CareConnect claims. Utilization report including Hospital Detox, Reintegration, Intermediate split by adult/adolescent, and Social Detox services. The report details include KDADS/BHS funded members. The report will be based on the service date begin and service date end and will provide the count of actual units. The report will be claim based as a rolling quarter to show a full year by 4th quarter. This report will be provided as an aggregate, as well as by BHS/SUD region. The summary table included in this report contains admissions and average length of stay by Region. Social Detox for KDADS/BHS has been separated from all other modalities. This report contains 90 days of claims run out.

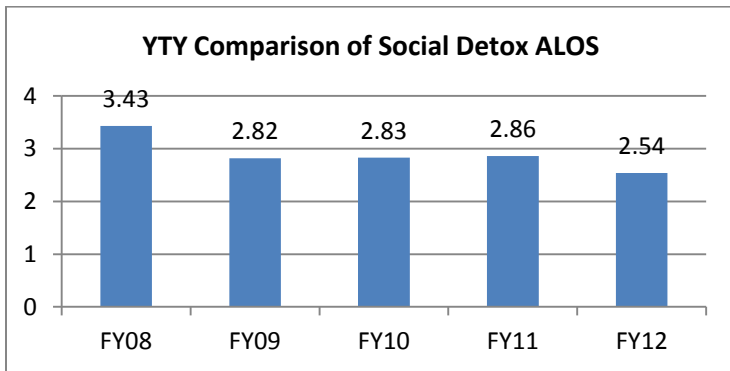
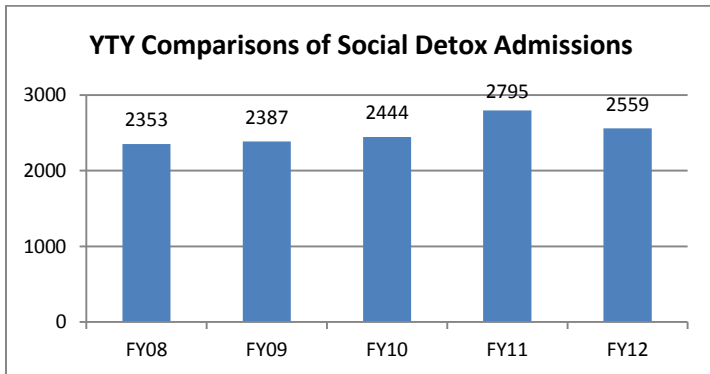
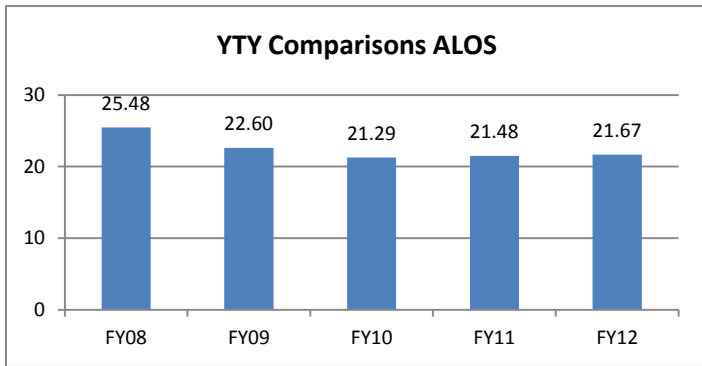
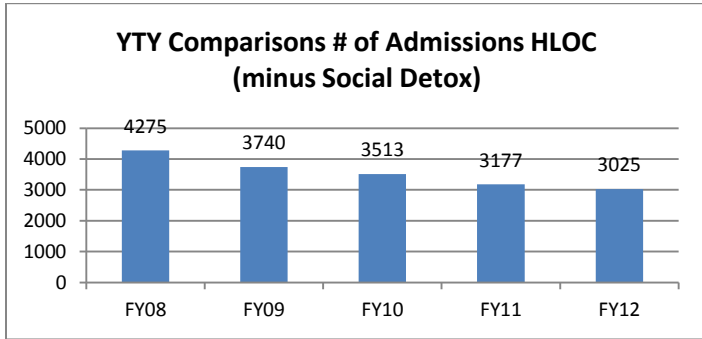
**Results:**

**All Regions KDADS/BHS Funded:**

**Higher Levels of Care Utilization**

	Q1	Q2	Q3	Q4	YTD
<b><u>TOTAL FOR: LEVEL III.1 - RESIDENTIAL REINTEGRATION</u></b>					
Admissions	138	144			282
Days Claimed	3,620	4,065			7,685
Average Length of Stay	26.23	28.23			27.25
<b><u>TOTAL FOR: LEVEL III.2D - RESIDENTIAL SOCIAL DETOX</u></b>					
Admissions	555	488			1,043
Days Claimed	1,315	1,153			2,468
Average Length of Stay	2.37	2.36			2.37
<b><u>TOTAL FOR: LEVEL III.3 - RESIDENTIAL ADULT INTERMEDIATE</u></b>					
Admissions	530	515			1,045
Days Claimed	10,841	9,911			20,752
Average Length of Stay	20.45	19.24			19.86
<b><u>TOTAL FOR: LEVEL III.5 - RESIDENTIAL ADOLESCENT INTERMEDIATE</u></b>					
Admissions	5	15			20
Days Claimed	108	391			499
Average Length of Stay	21.60	26.07			24.95
<b><u>Region Total - AAPS - All Regions</u></b>					
Admissions	1,228	1,162			2,390
Days Claimed	15,884	15,520			31,404
Average Length of Stay	12.93	13.36			13.14

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**Conclusions for FY14 refer to the data on pages 2... Q1 & Q2**

- Residential Reintegration admissions were up slightly in Q2 with the average length of stay was up by 2 days
- Residential Social Detox admissions were down by more than 10% while the average stay remained the same
- Residential Adult Intermediate admissions were down slightly along with the average length of stay
- Residential Adolescent Intermediate admissions in Q 2 were 3 times more than in Q1 while the average length of stay was more than 5 days longer
- The “Region Total –AAPS-All Regions” includes social detox admissions which skew the ALOS due to the short timeframe a person stays in that level of care. A more accurate account is located in each specific level on this report

**Conclusions comparing graphs covering FY 08-FY 12**

- These conclusions do not include any data from FY 13
- There was a slight decrease in admissions of all higher levels of care
- Over the past four (4) years the rate of detox admissions has remained steady
- Over the past three (3) years including FY 10 the ALOS has risen slightly each year for all higher levels of care with the exception of social detox admissions

**Preliminary Recommendations to Committee:**

- It is recommended to the Committee that data trending continue and reporting on all objectives be included in this report. Trending should continue to contain year to year (YTY) comparisons.
- It is further recommended that this aggregate analysis and the ValueOptions report be posted on the ValueOptions website.

**Date Presented to QC:** 04/11/14

**BY:** Tom Lohff