



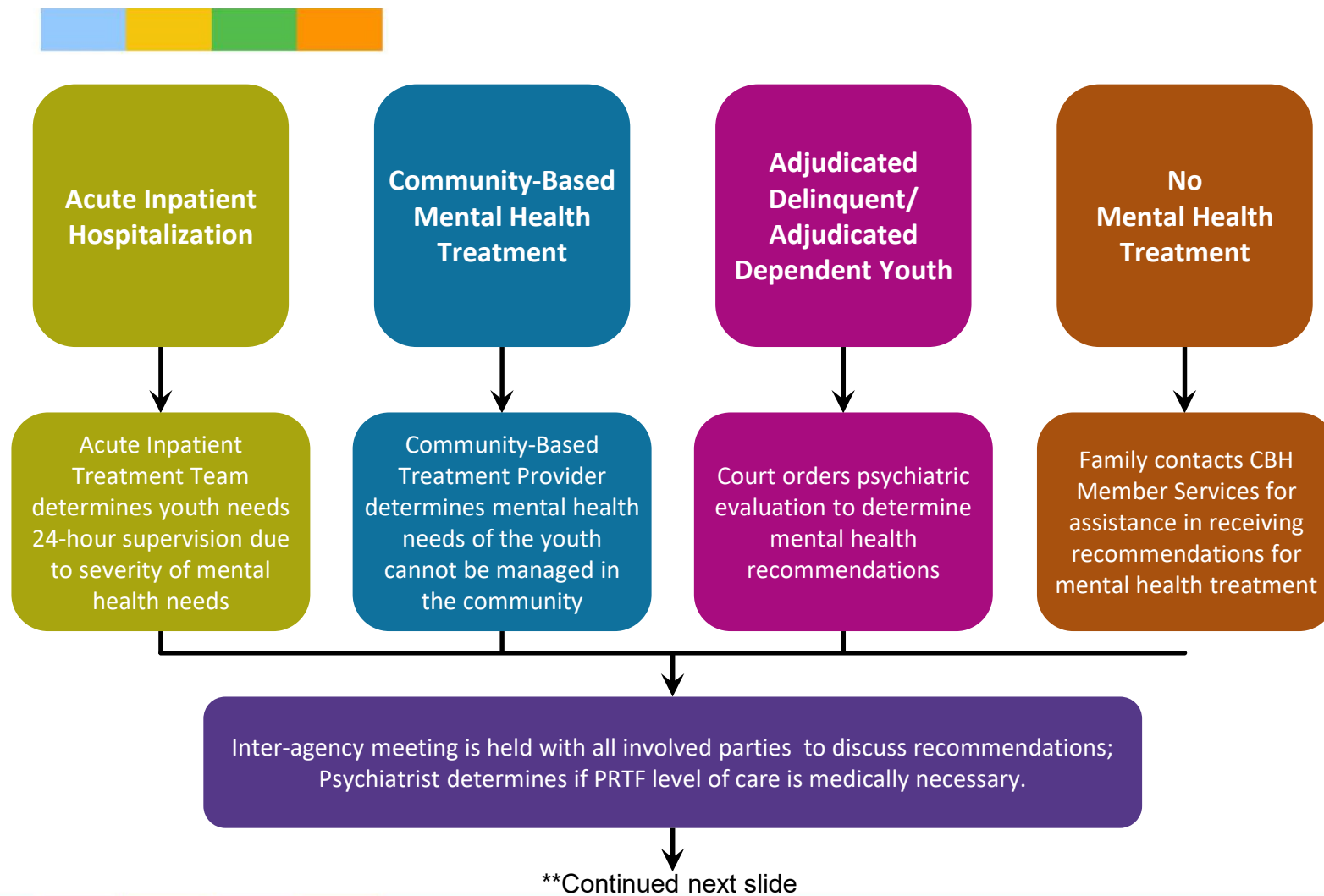
Community Behavioral Health

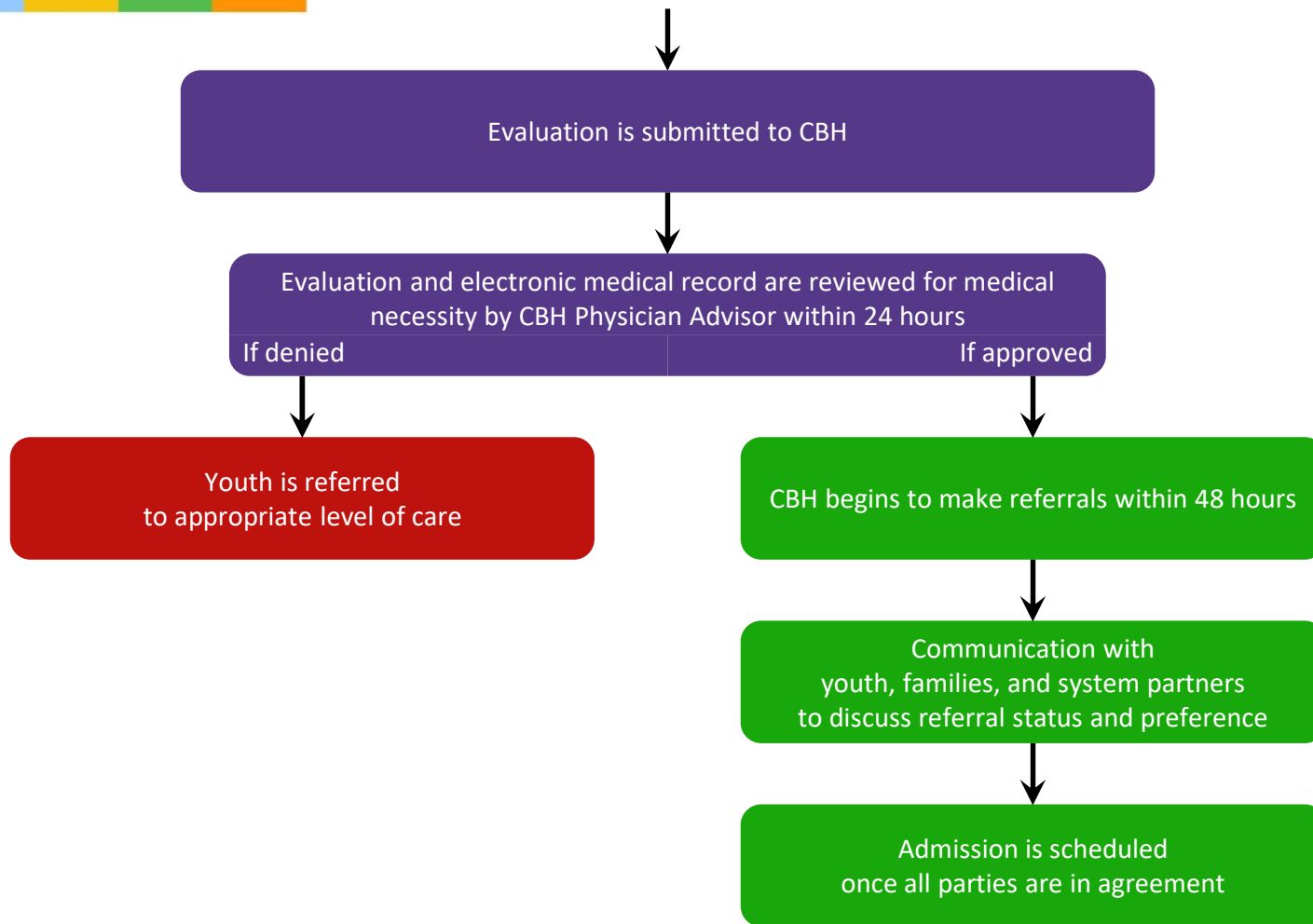


City of
Philadelphia



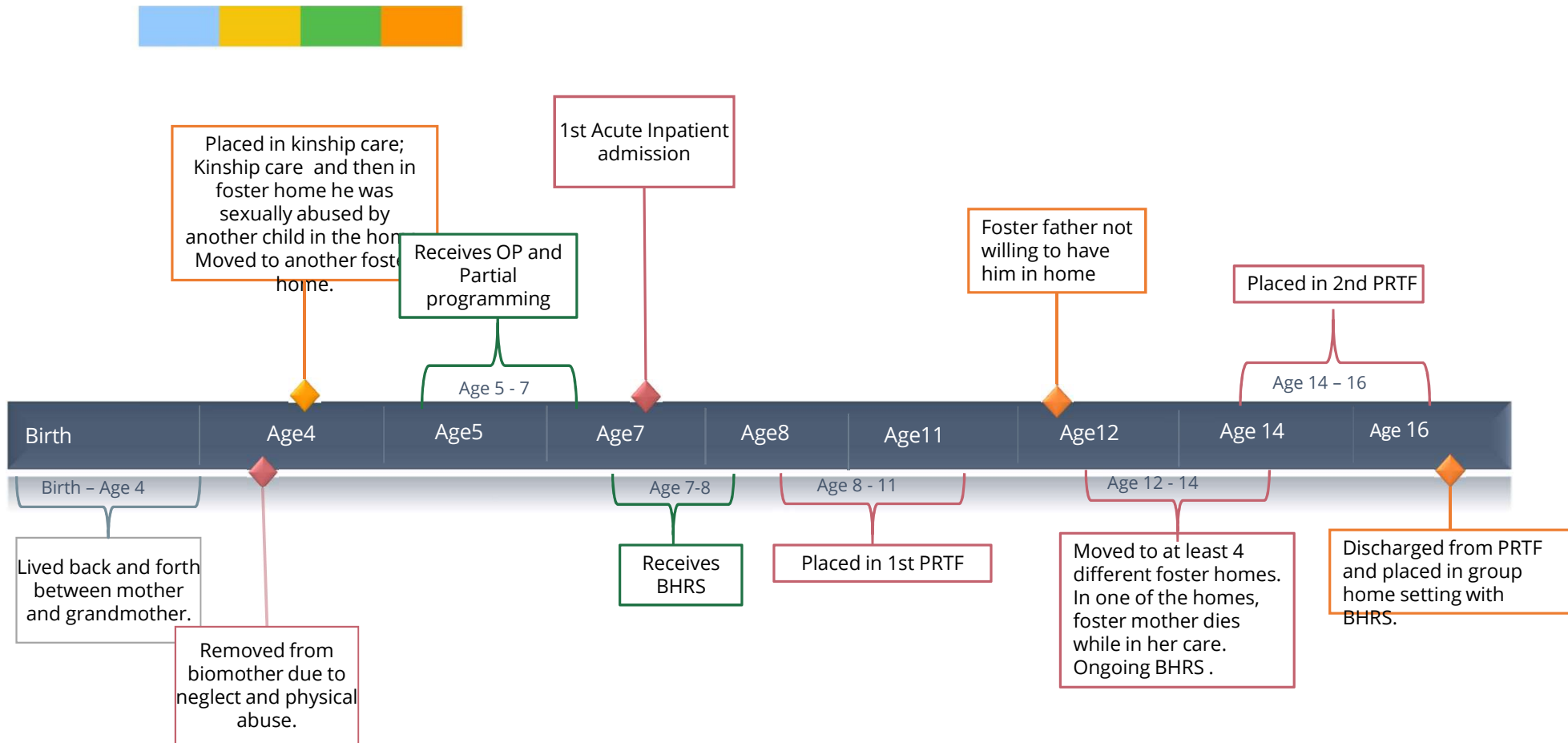
Pathways to Psychiatric Residential Treatment Facilities (PRTF)





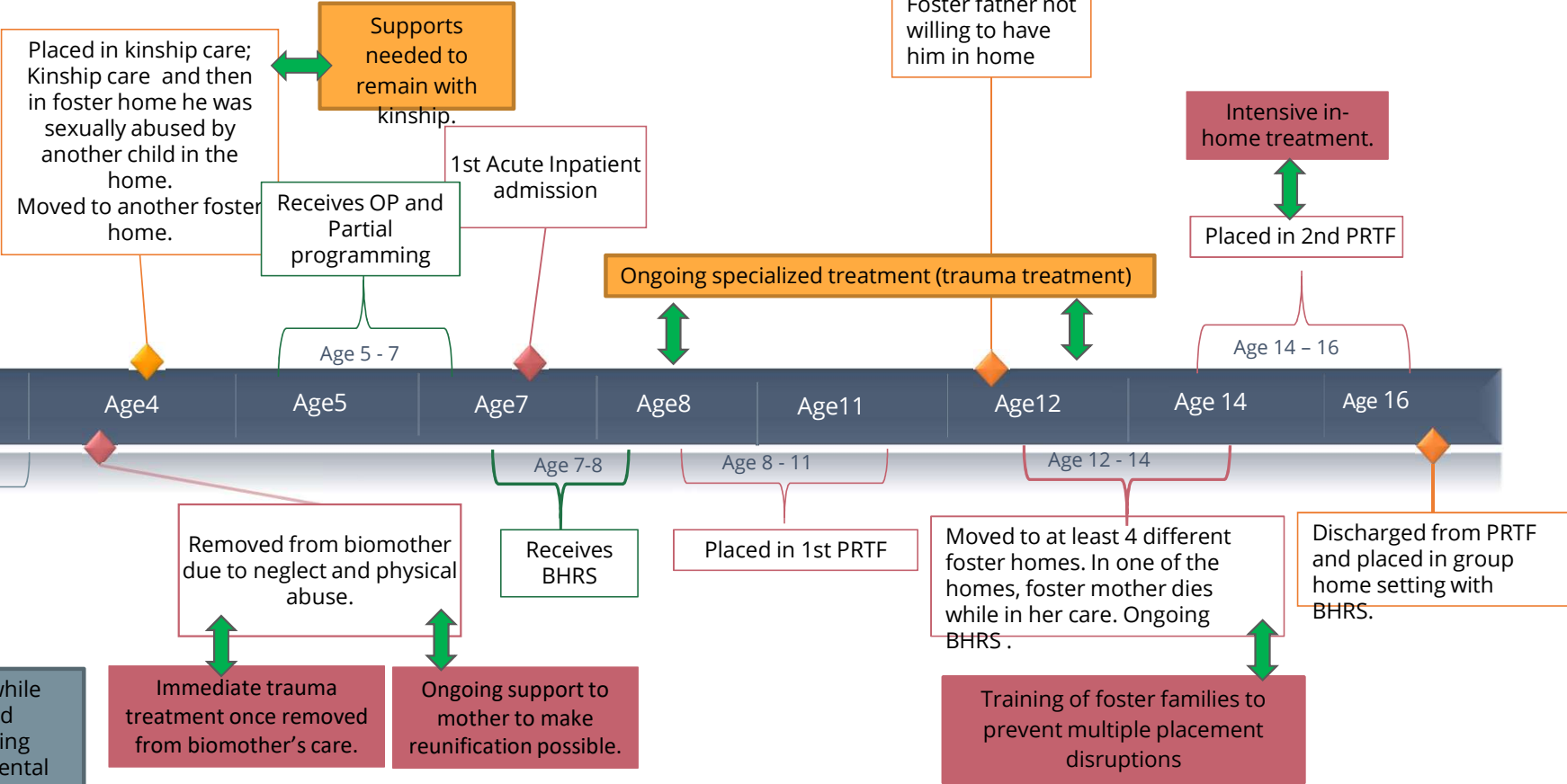


Case Study





Opportunities for intervention



Possible interventions while living with mother and grandmother. Supporting mother with receiving mental health treatment and assistance with daily living skills.

Immediate trauma treatment once removed from biomother's care.

Ongoing support to mother to make reunification possible.

Training of foster families to prevent multiple placement disruptions



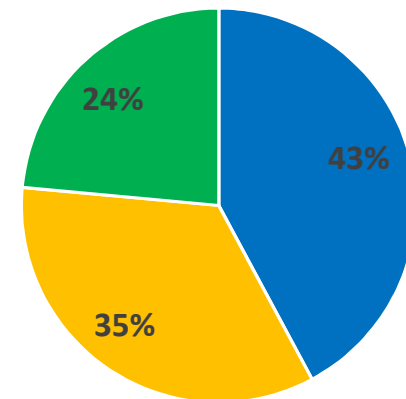
Cohort



Cohort: Dependent, Delinquent, and CBH RTF Only

- 2,183 youth entered at least one residential placement in Fiscal Year 2018. Of those youth:
 - Just over 2 of 5 youth (43%) entered a dependent, non-RTF facility
 - Just over a third (35%) entered a delinquent, non-RTF facility
 - Nearly a quarter (24%) entered an RTF

■ Dependent ■ Delinquent ■ RTF





CBH Approach

- In order to understand CBH utilization trends we have recategorized these into the following cohorts

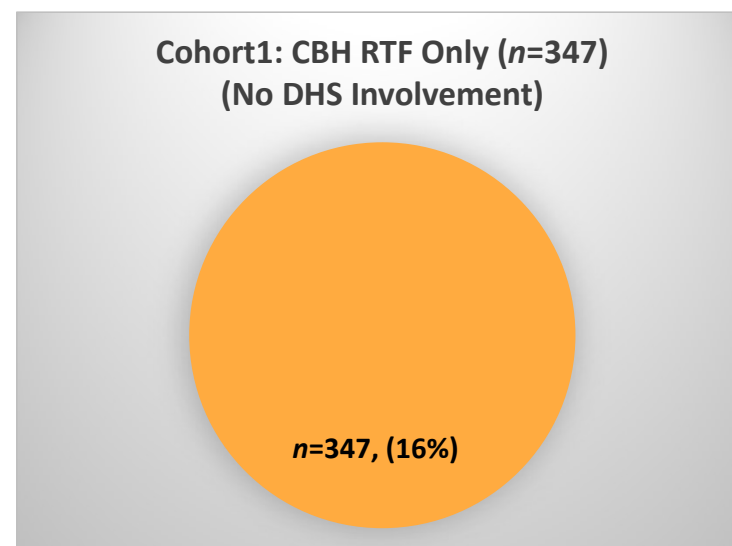
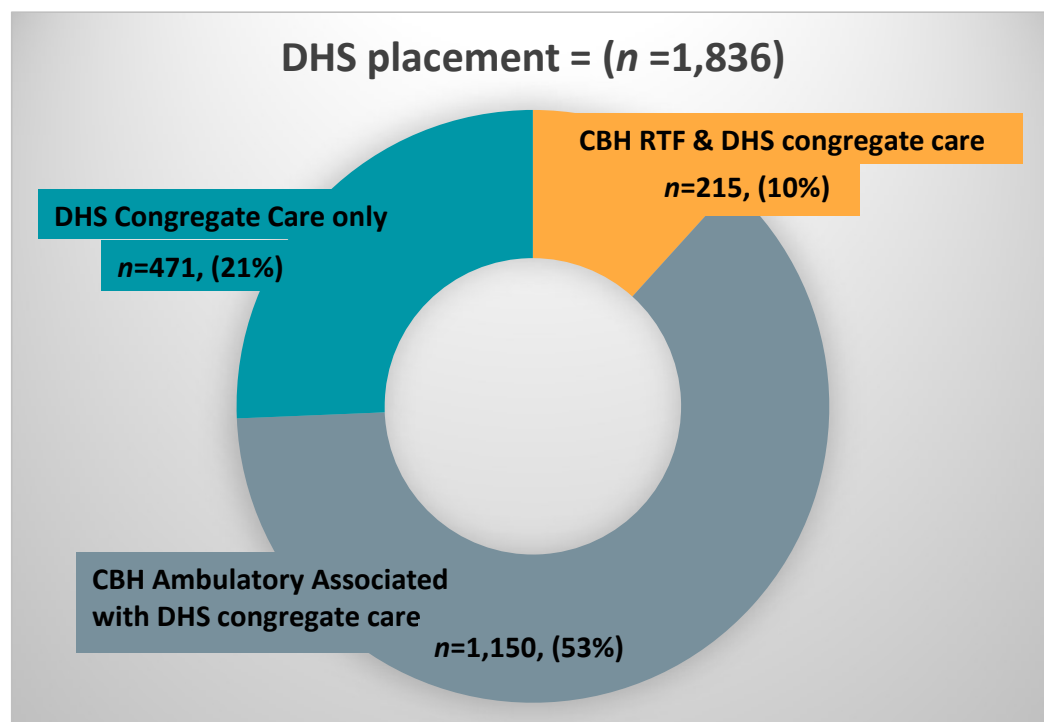
Cohort #	Cohort Description	Unique number of Children and Youth	
		n	%
Cohort 1	Children and youth using CBH RTF only (no DHS involvement)	347	16%
Cohort 2	Children and youth in CBH RTF and DHS congregate care	215	10%
	CBH RTF Total Cohort	562 **	
Cohort 3	Children and youth in CBH Ambulatory and Other Residential services associated with DHS congregate care	1,150	53%
Cohort 4	Children and youth in DHS congregate care only	471	21%
	Cohort Total	2,183	

(Note: ** 562 children and youth were in a CBH-funded RTF at **any point during FY18**. 484 is number of children and youth who entered RTF in FY 2018. CBH slides will present on Cohort 1, 2 and 3.)



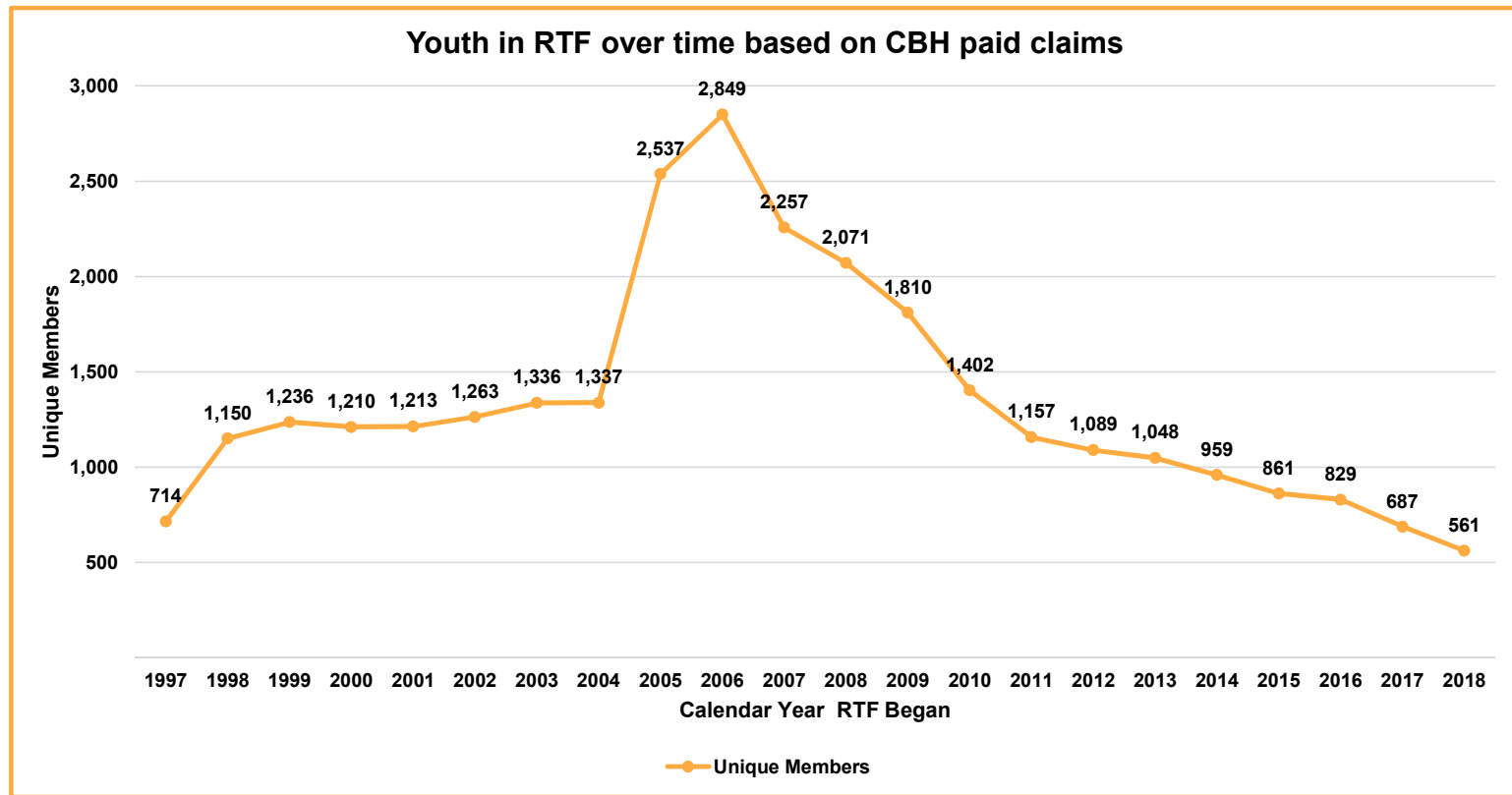
CBH Approach

Overall Cohort (N= 2,183)



Note. CBH cohort (n=1,712), irrespective of service or DHS involvement, includes children and youth up to age 21 years.

Historic CBH RTF Admissions data





Demographics



Key Findings:

- Majority of the children and youth who used CBH RTFs or used any CBH services after DHS congregate care are male and Black/African American, non-Hispanic.
- As compared to the demographic profile of all Medicaid-eligible children and youth who used any CBH services in FY 2018, we see a greater proportion of Black/African American, non-Hispanic and lesser proportion of Hispanic population across all 3 cohorts
- We also see lesser White/Caucasian, non-Hispanic children and youth who used any CBH services after DHS congregate care
- Age – Most children and youth are from 13- 17 years.



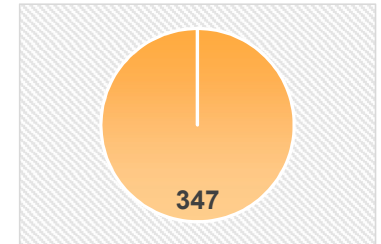
Demographics		All Medicaid Children and Youth using CBH services in FY 2018 (n = 40,442)	Cohort1: CBH RTF only (no DHS involvement) (n = 347)	Cohort 2: CBH RTF and DHS congregate care (n = 215)	Cohort 3: CBH Ambulatory and Other Residential services associated with DHS congregate care (n = 1,150)
Gender	Female	40%	39%	40%	35%
	Male	60%	61%	60%	65%
Race Ethnicity	Asian	2%	1%	0%	1%
	Black/African American	57%	72%	76%	74%
	Hispanic	27%	12%	15%	19%
	Other	3%	3%	2%	1%
	White/Caucasian	12%	12%	7%	6%
Age	0-5 years	11%	0	0	0.2%
	6 – 12 years	49%	24%	13%	6%
	13 – 17 years	33%	63%	83%	82%
	18 – 21 years	17%	13%	4%	12%



A look at Services utilized 3 years before entering cohort in FY 2018



Cohort 1: Children and youth using CBH RTF only (no
DHS involvement, $n = 347$)

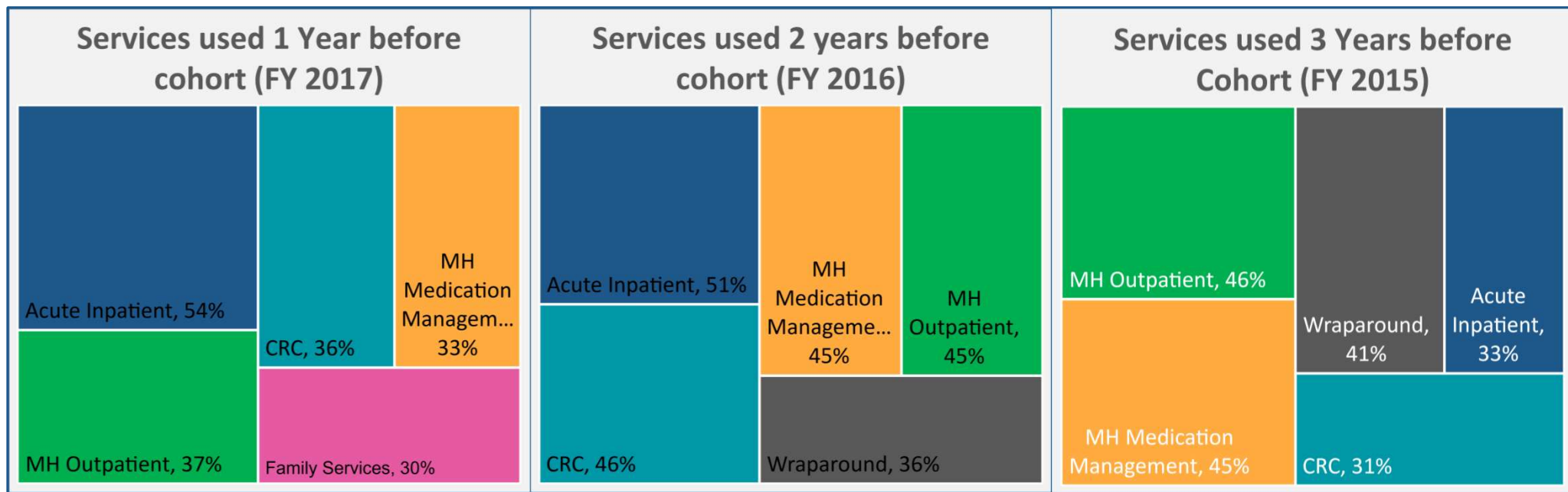
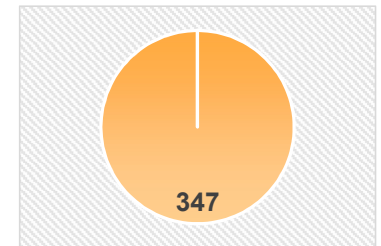


Key Findings: Top five services used in the last 3 years before entering into an CBH RTF facility

- Acute Inpatient
- Crisis Response Center (CRC)
- Mental Health Outpatient
- Medication Management
- Wraparound (BHRS)

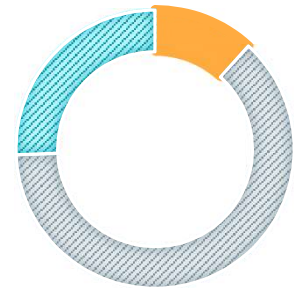


Cohort 1: Children and youth using CBH RTF only
(no DHS involvement, $n = 347$)





Cohort 2: Children and youth in CBH RTF and
DHS congregate care ($n = 215$)

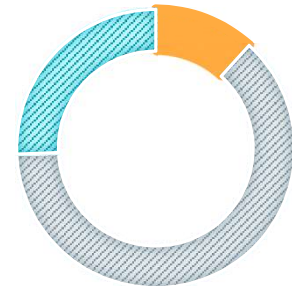


Key Findings:

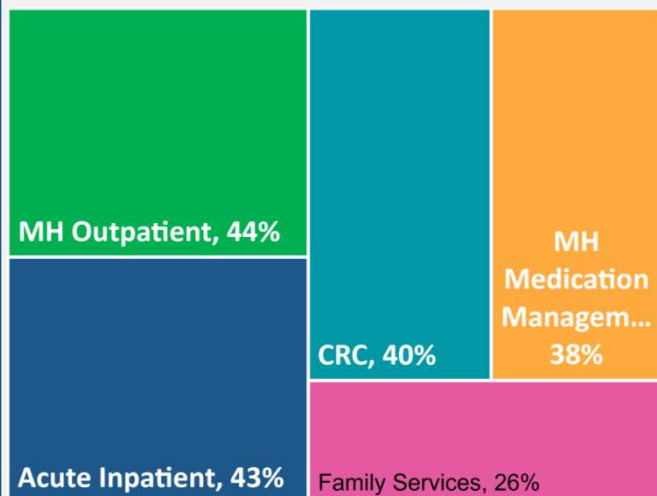
- The top services used remain similar
- Use of Acute Inpatient decreases across all 3 years
- Use of Acute Partial is seen 3 years before



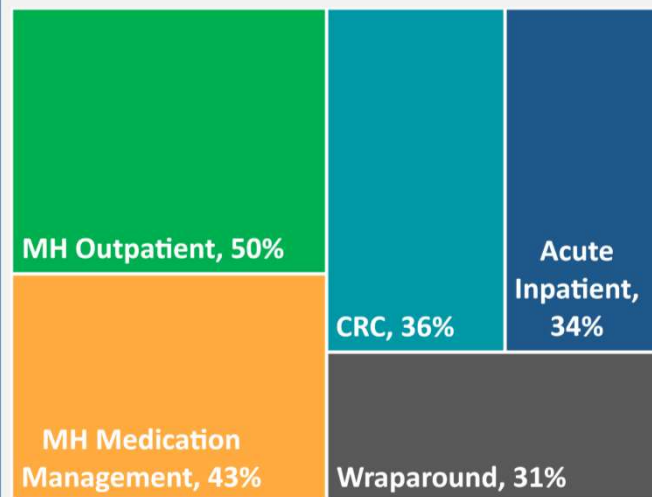
Cohort 2: Children and youth in CBH RTF and DHS
congregate care ($n = 215$)



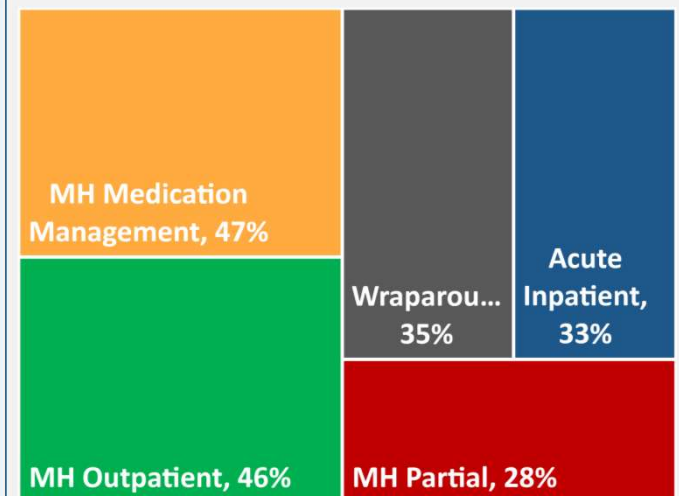
Services used 1 Year before
cohort (FY 2017)



Services used 2 Years before
cohort (FY 2016)



Services used 3 Years before
cohort (FY 2015)





Cohort 3: Children and youth in CBH Ambulatory and Other Residential services associated with DHS congregate care ($n = 1,150$)

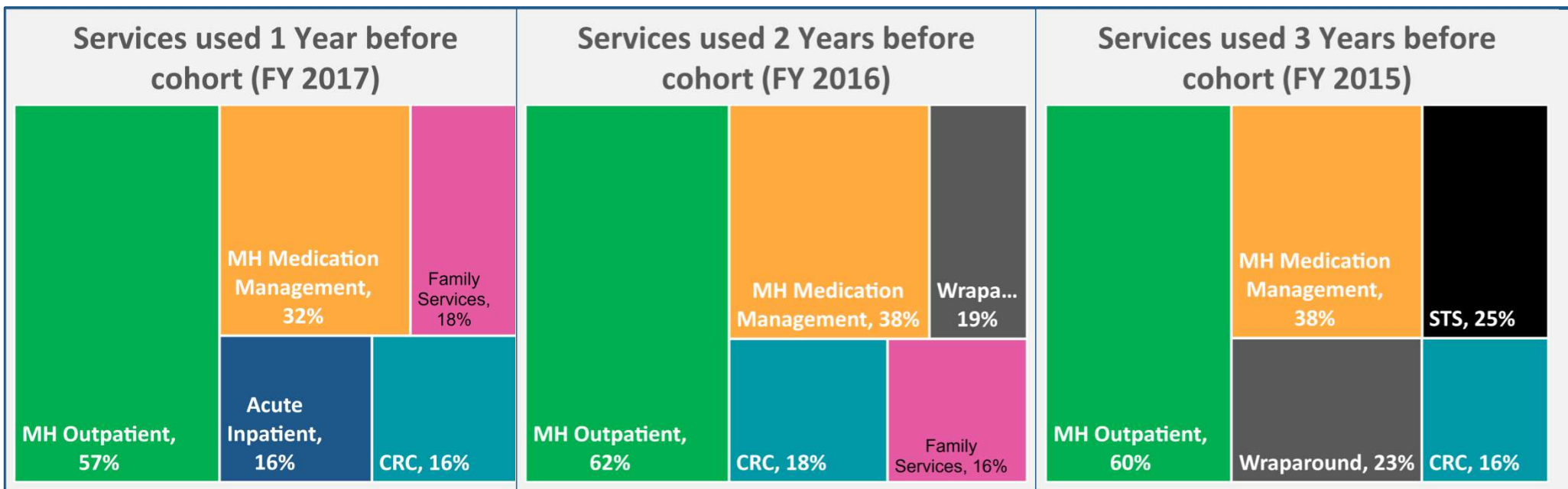
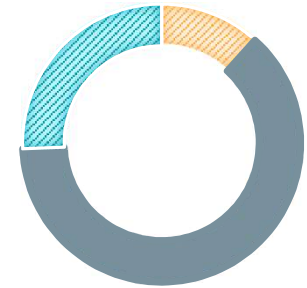


Key Findings:

- Use of Mental health Outpatient becomes the primary service used by these kids (at least 60% across all the 3 prior years)
- Use of Acute Inpatient decrease significantly
- Use of Crisis (CRC) also decreases
- STS use seen in 3 years prior



Cohort 3: Children and youth in CBH Ambulatory and Other Residential services associated with DHS congregare care ($n = 1,150$)





Diagnosis FY 2018

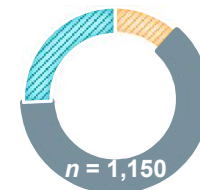
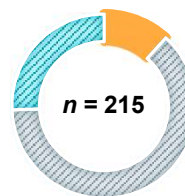
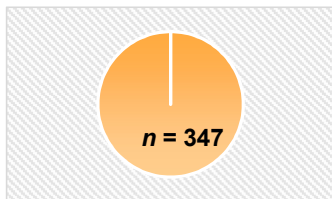


Key Findings:

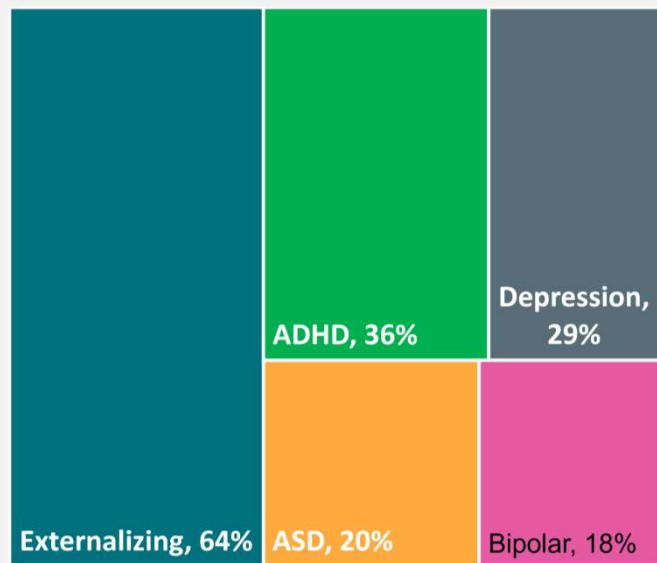
- Top 2 diagnosis across all the three cohorts are
 - Externalizing disorders (Conduct Disorder, Oppositional Defiant Disorder, Disruptive mood dysregulation disorder, etc.),
 - ADHD
- For children and youth in RTF cohorts the next frequent diagnosis are
 - Depression,
 - Bipolar
- CBH RTF only cohort has ASD diagnosis to as it has specialized RTF for ASD
- For children and youth using CBH ambulatory services the next frequent diagnosis are
 - Addiction,
 - Adjustment disorders



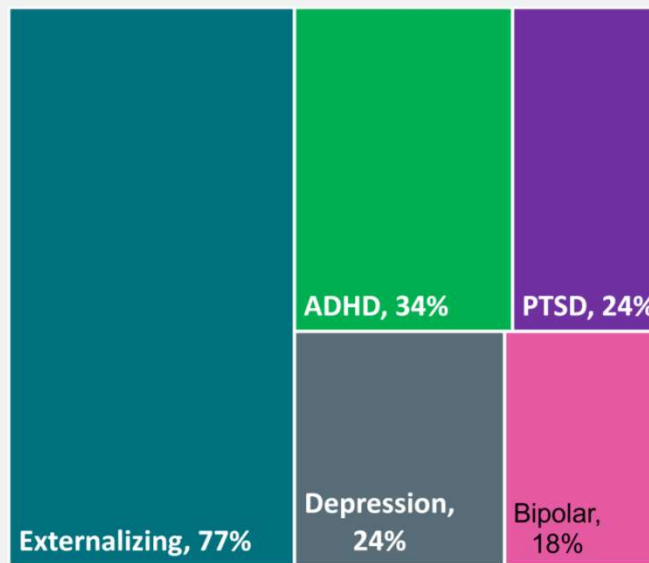
Diagnosis FY 2018



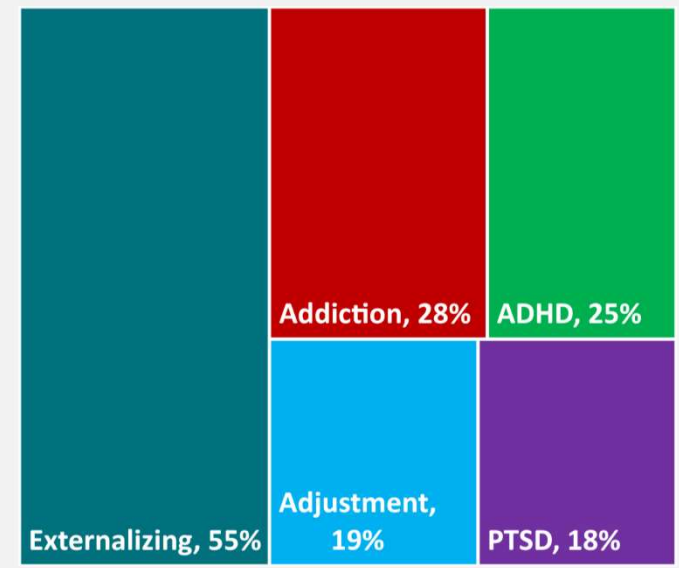
Cohort1: CBH RTF only



Cohort2: CBH RTF & DHS congregate care



Cohort3: CBH Ambulatory





Length of Stay

Since the RTF cohort includes children and youth who have even 1 RTF claim in FY 2018; hence LOS calculations represents the average time spent by children and youth in an RTF level of care in FY18, regardless of RTF episode.

On an average, children and youth spent 155 days in RTF in FY 2018.

Cohort	Average Length of Stay (LOS)
Cohort 1: CBH RTF only (no DHS involvement)	161 days
Cohort 2: CBH RTF and DHS congregate care	147 days
Total	155 days

****Note:** Average LOS excludes providers who primarily serve ASD/ID populations.
Average LOS incorporating ASD/ID populations is 184 days.



Appendix1:

List of services included in Children and youth in DHS congregate care and use CBH Ambulatory and Other Residential services ($n = 1,150$)

CBH CLINICAL CATEGORIES	
Evaluation	Crisis Residence
MH Outpatient	Crisis Visit/Crisis Intervention
MH Medication Management	D&A Medication Management
Family Services	Children's Mobile Intervention Service (CMIS)
D&A Outpatient	Wraparound ASD
Acute Inpatient	23-Hour Bed
Wraparound (BHRS)	D&A Case Management
CCBHC	Halfway House
Intensive Outpatient (IOP)	BHID NonFidelity ACT
Crisis Response Centers (CRC)	D&A Case Management Forensic
Residential Rehab	Detox
Case Management	Family Peer
MH Partial	Host Homes
FQHC	MH Outpatient ASD
EBP	MMT
Consultation	NonFidelity Act
Children's Mobile Crisis Team (CMCT)	PEACE
RTFA/CRR	STS