

# York-Adams HealthChoices Program



Annual Report  
2014 - 2015

## Contents

Introduction	3
Enrollment	4
Service Descriptions	5
Utilization - All Ages	5-10
Youth Served	11-16
Reinvestment	17
Terminology	18-19



### Adams County Commissioners

Randy L. Phiel, Chairman  
James E. Martin, Vice-Chairman  
Marty Karsteter Qually, Commissioner

### York County Commissioners

Susan P. Byrnes, President  
Doug Hoke, Vice President  
Christopher B. Reilly, Commissioner

## York-Adams HealthChoices Management Staff

Michelle Hovis  
Executive Director  
York County Human Services

Maria Landry  
Chief Fiscal Officer

Mark Durgin  
Director Program Development

Jennifer Barmore  
Director Quality Assurance

Amy Hampson  
Housing Specialist

Connie Livingston  
Administrative Assistant



# HealthChoices

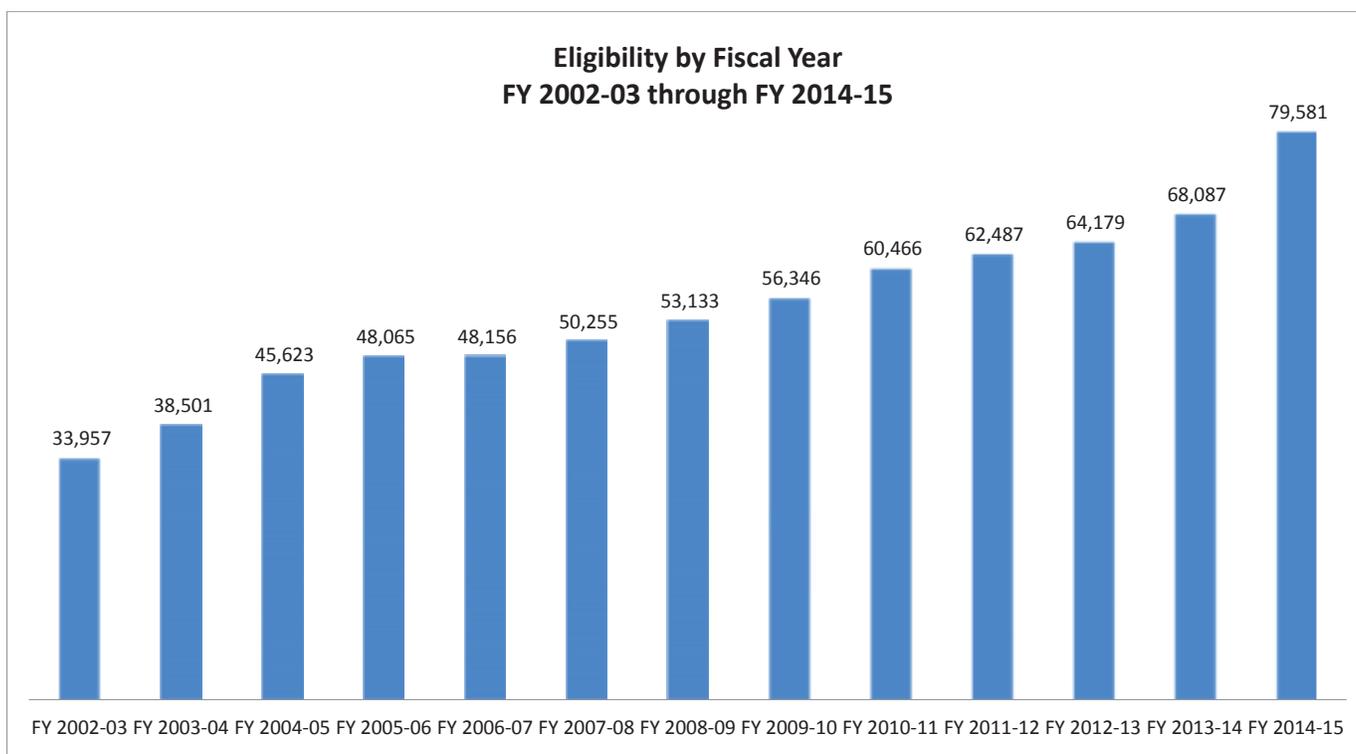
HealthChoices is the Commonwealth of Pennsylvania’s mandatory Medicaid managed care program administered by the Department of Human Services (DHS). This integrated and coordinated health care delivery system was introduced by the Commonwealth to provide medical, psychiatric, and substance abuse services to Medical Assistance (Medicaid) recipients.

The three components of the HealthChoices Program are:

- Physical Health
- HealthChoices Enrollment Assistance Program
- Behavioral HealthChoices

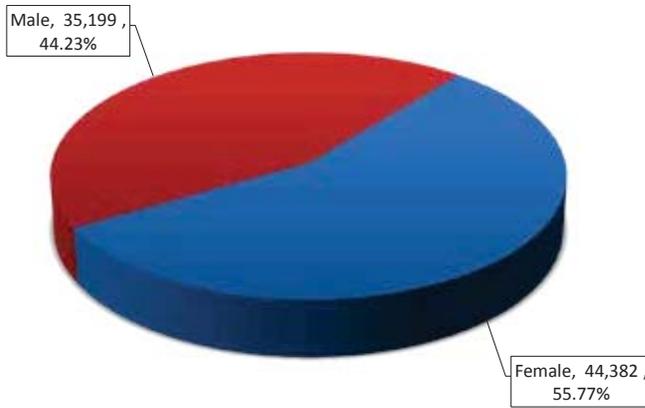
The Office of Medical Assistance Programs (OMAP) administers the first two components, while the Office of Mental Health and Substance Abuse Services (OMHSAS) oversees the third component, the behavioral health program, that provides mental health and substance abuse treatment services.

DHS introduced the HealthChoices program incrementally, starting in southeastern Pennsylvania and eventually expanding the program throughout the state over a period of ten years. York and Adams Counties jointly accepted the right-of-first-opportunity to manage the local program and entered into a full-risk capitation contract with the Commonwealth on October 1, 2001. The Counties, in turn, sub-contract with a behavioral health managed care organization, Community Care Behavioral Health Organization, to provide care management, provider network development, quality assurance, member services, claims management, and fraud, waste, and abuse monitoring. The York-Adams HealthChoices Management Unit provides oversight of the local HealthChoices Program and monitoring of all of Community Care’s activities to ensure full compliance with its contract with DHS.

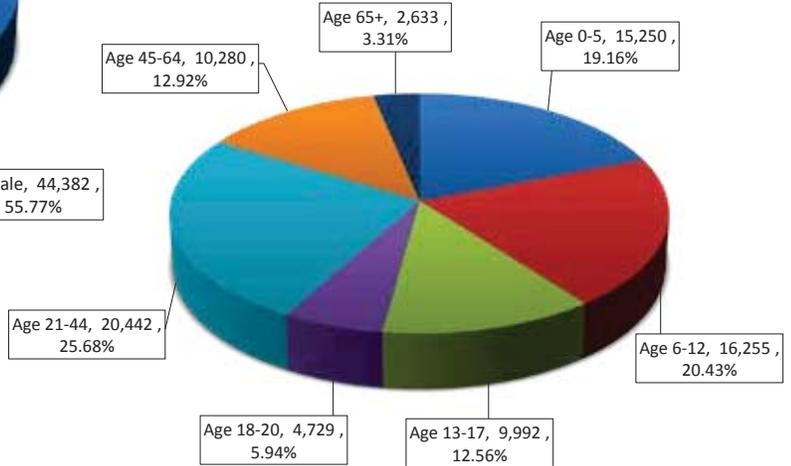


# Enrollment

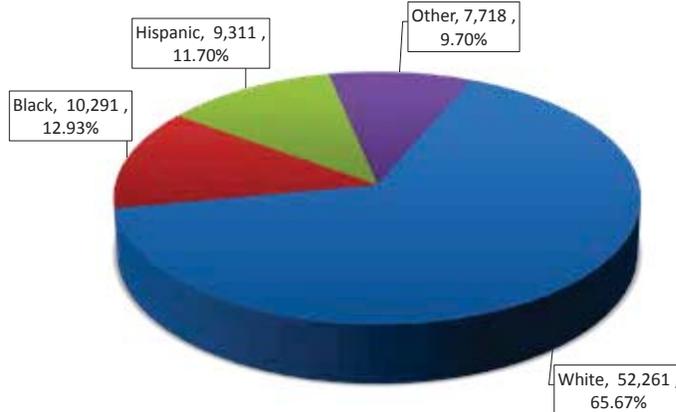
## Gender



## Age Groups



## Race/Ethnicity



"Other" Race includes members who report mixed race.

## Categories of Aid

### Temporary Assistance to Needy Families (TANF)

Assistance to families with dependent children who are deprived of the care or support of one or both parents.

### Healthy Beginnings (HB)

Assistance for women during pregnancy and the postpartum period.

### State Only General Assistance

State funded program for individuals and families whose income and resources are below established standards and who do not qualify for the TANF program. This includes the Categorically Needy (CNO) and Medically Needy Only (MNO) groups.

### Modified Adjusted Gross Income (MAGI)

The Affordable Care Act made the tax concept of Modified Adjusted Gross Income (MAGI) the basis for determining Medicaid and CHIP eligibility for nondisabled, nonelderly individuals, effective January 1, 2014.

### Supplemental Security Income without Medicare

Assistance for people who are aged, blind, or determined disabled for less than two years.

### Supplemental Security Income with Medicare

Assistance for people who are aged, blind or determined disabled for over two years.

# Services

HealthChoices members are eligible to receive in-plan services usually offered by their choice of at least two service providers, as well as additional services that have been approved for use by the York-Adams HealthChoices Program.

## In-Plan Services:

- Inpatient Psychiatric Hospitalization
- Inpatient Drug & Alcohol Detoxification, Treatment, Non-Hospital Rehabilitation, and Halfway House
- Psychiatric Partial Hospitalization Services
- Outpatient Mental Health and Drug & Alcohol Counseling
- Laboratory and Diagnostic Services
- Medication Management and Clozapine Support
- Psychiatric Evaluation and Psychological Testing
- Residential Treatment Facilities for Adolescents (RTF)
- Behavioral Health Rehabilitative Services for Children and Adolescents (BHRS)
- Methadone Maintenance
- Intensive Case Management
- Resource Coordination
- Crisis Intervention
- Family Based Mental Health Services
- Peer Support

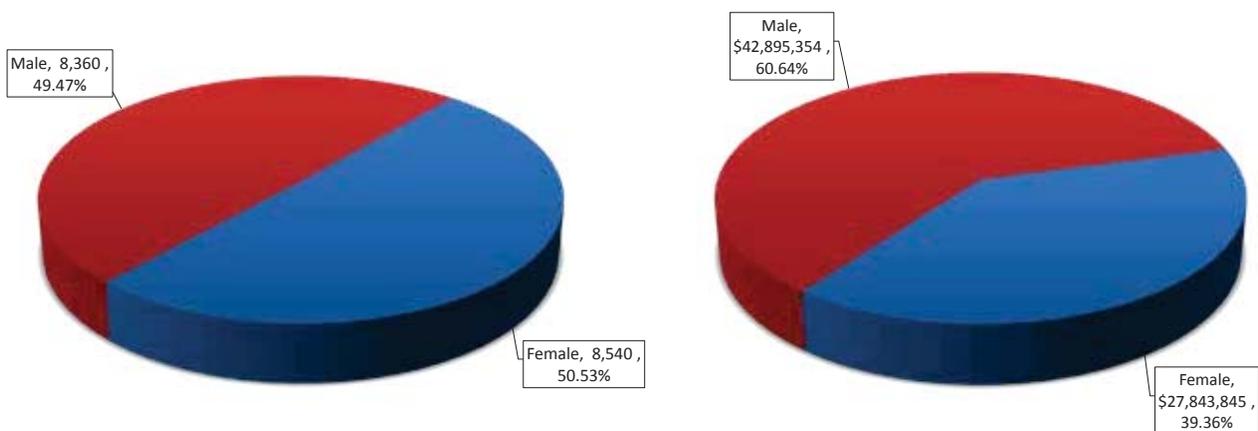
## Supplemental Services:

- Children's Services Enrolled as Program Exceptions
- Community Treatment Team
- Crisis Diversion
- Drug & Alcohol Intensive Outpatient
- Psychiatric Rehabilitation

# Utilization

## Gender

16,900 Served  
\$70,739,199 Spent\*

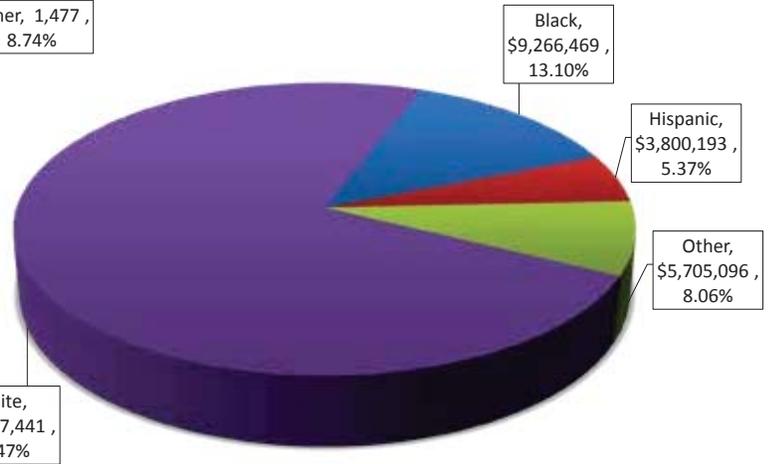
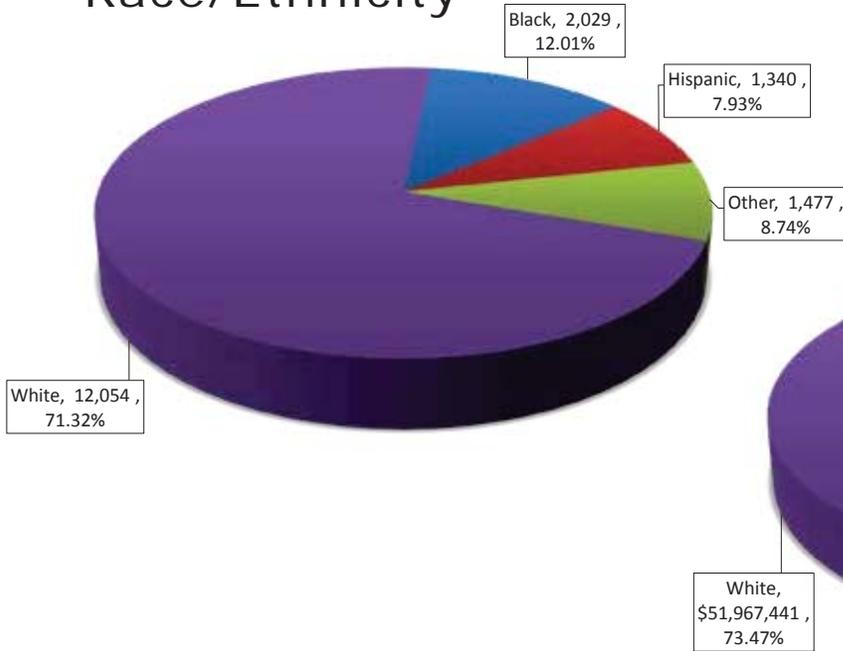


\* Does not include alternative payment arrangements (APA) - see page 7 for APA detail.

Note: The charts in this report represent enrollment and utilization data that occurred during the 2014-2015 operating year. Utilization is derived from paid claims for services provided between July 1, 2014 and June 30, 2015

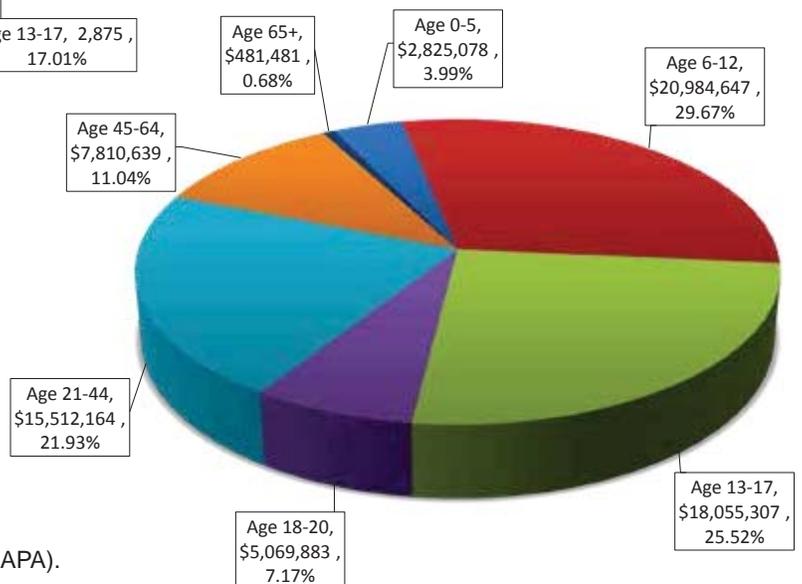
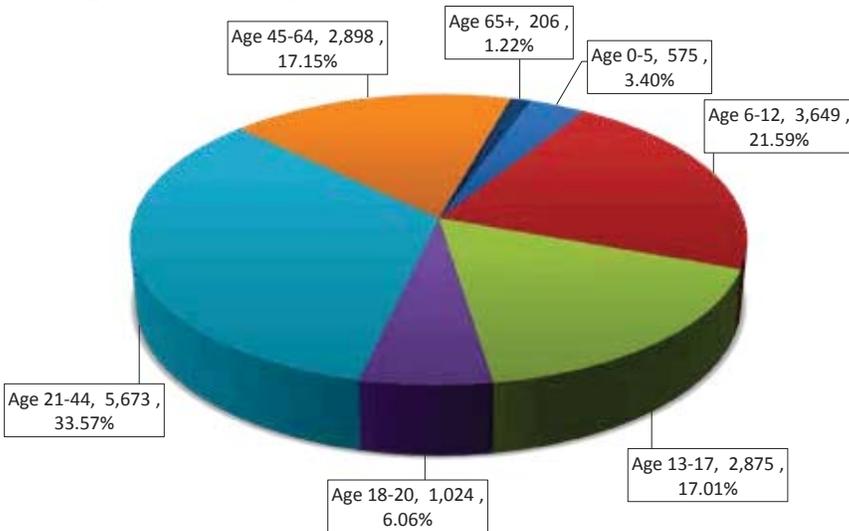
# Utilization

## Race/Ethnicity



\*"Other" Race includes members who report mixed race.

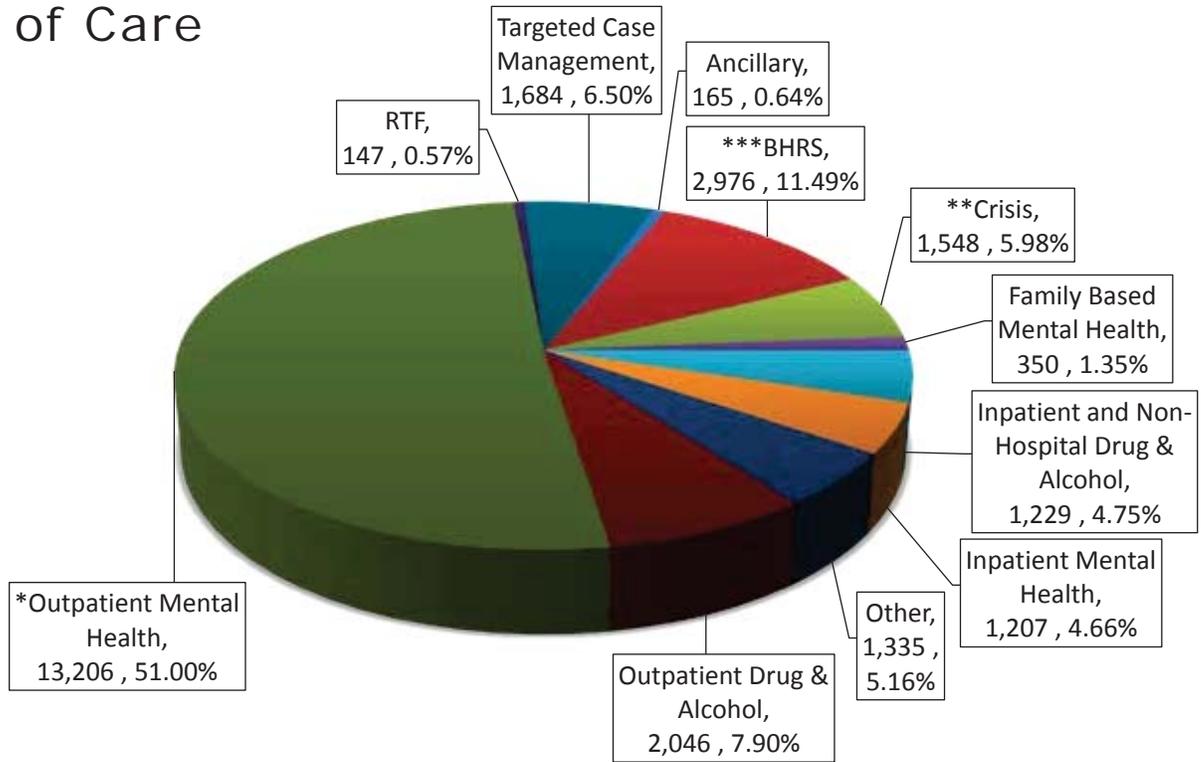
## Age Groups



\* Does not include alternative payment arrangements (APA).  
See page 7 for APA detail.

# Utilization

## Level of Care



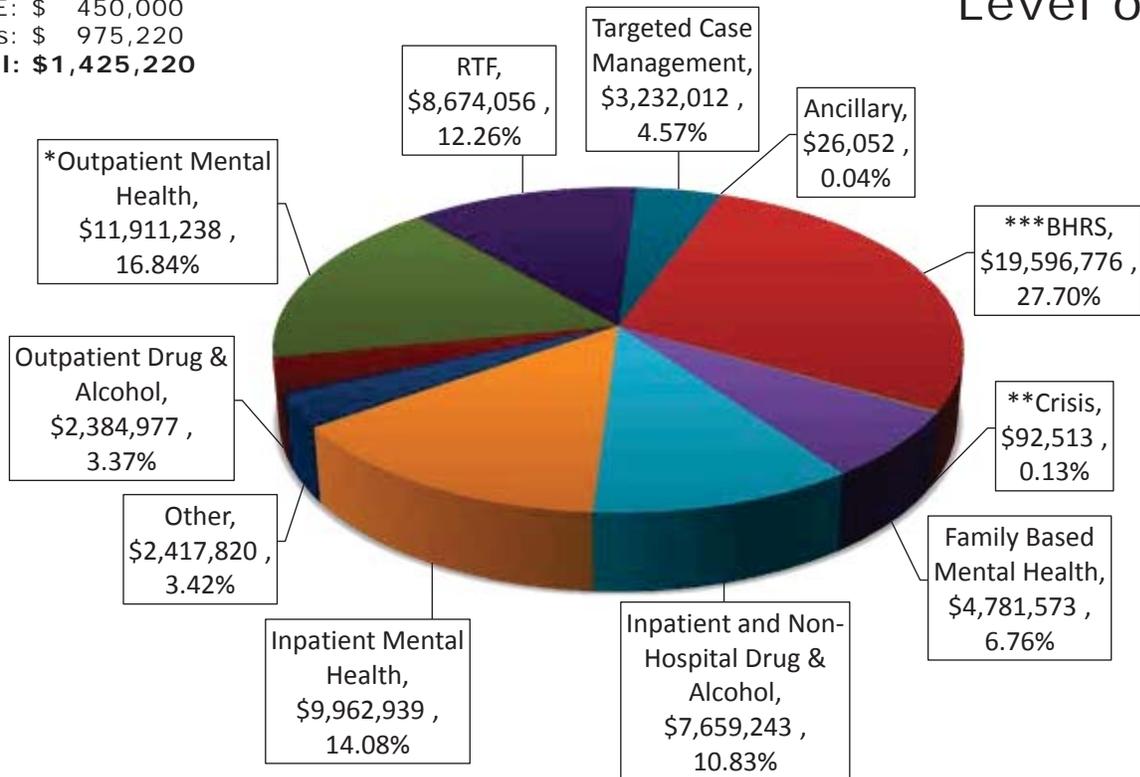
16,900 Served  
 \$70,739,199 Spent  
 (excluding APA)

### APA Expenditures

CORE: \$ 450,000  
 Crisis: \$ 975,220  
**Total: \$1,425,220**

# Expenditures

## Level of Care



\* Does not include CORE alternative payment arrangement

\*\* Does not include Crisis alternative payment arrangement

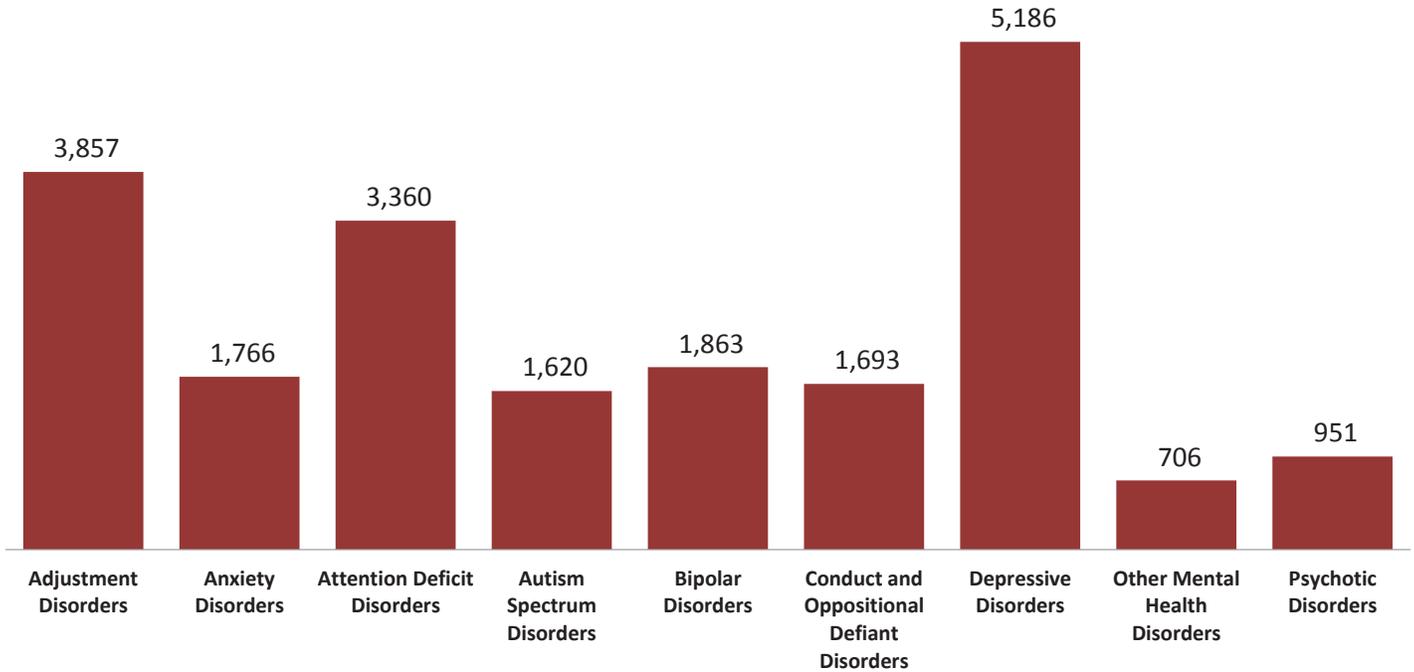
\*\*\* See page 15 for BHRS detail

# Primary Diagnosis

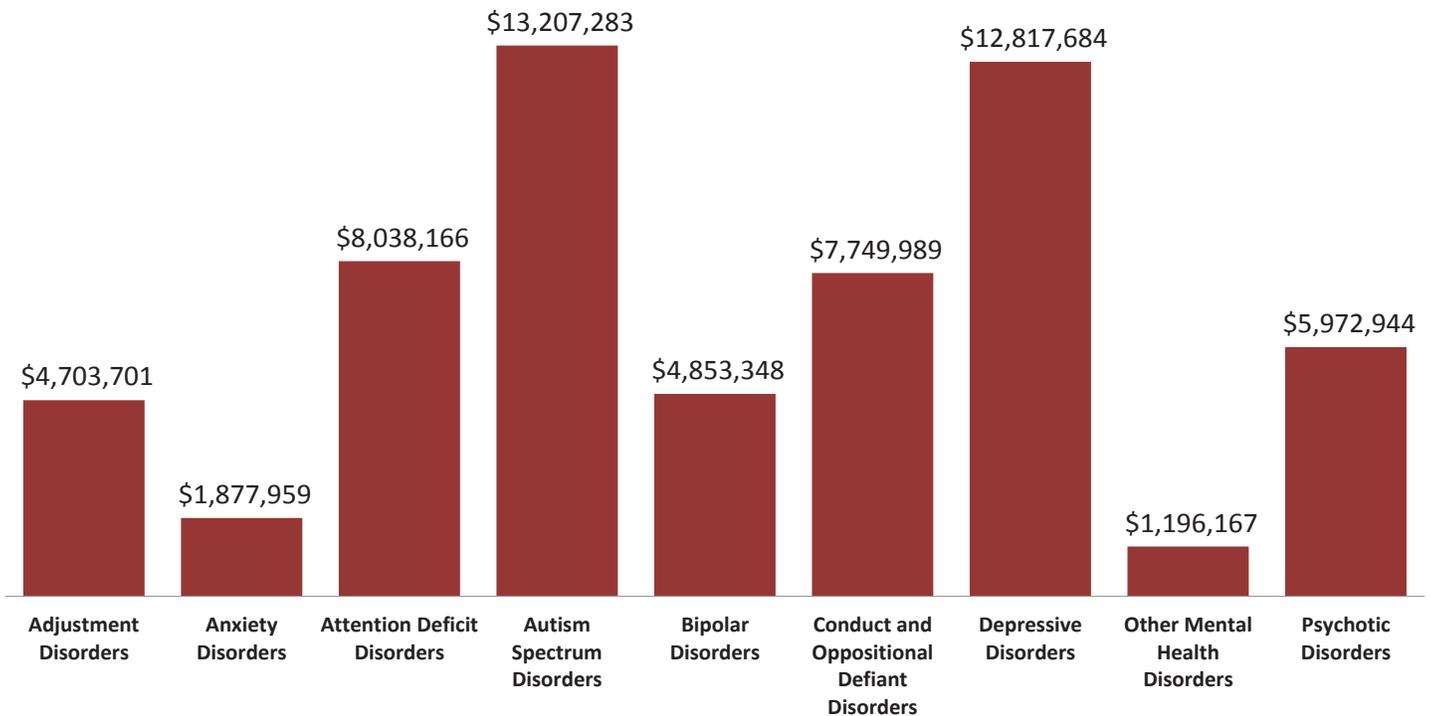
## Mental Health

15,094 Served  
\$60,417,241 Spent

### Members Served with a Primary Mental Health Diagnosis



### Expenditures for Members with Primary Mental Health Diagnosis

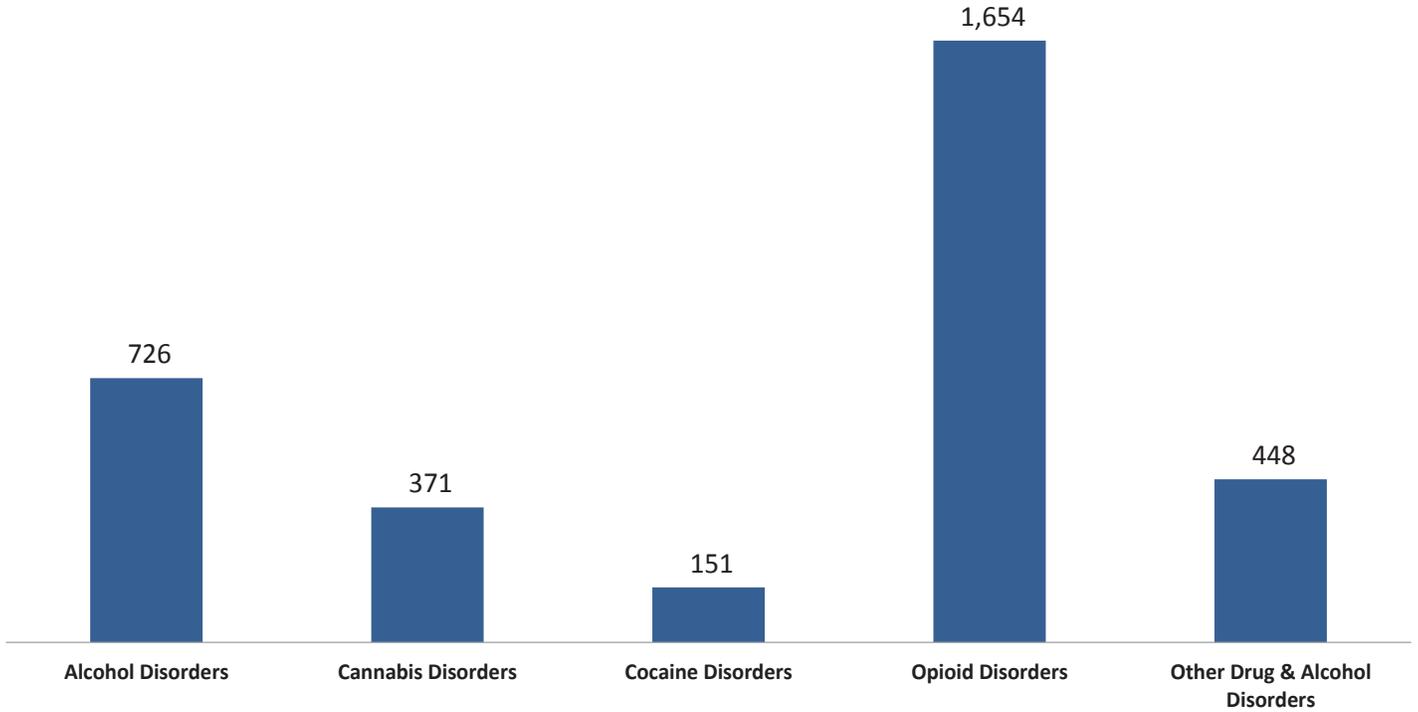


# Primary Diagnosis

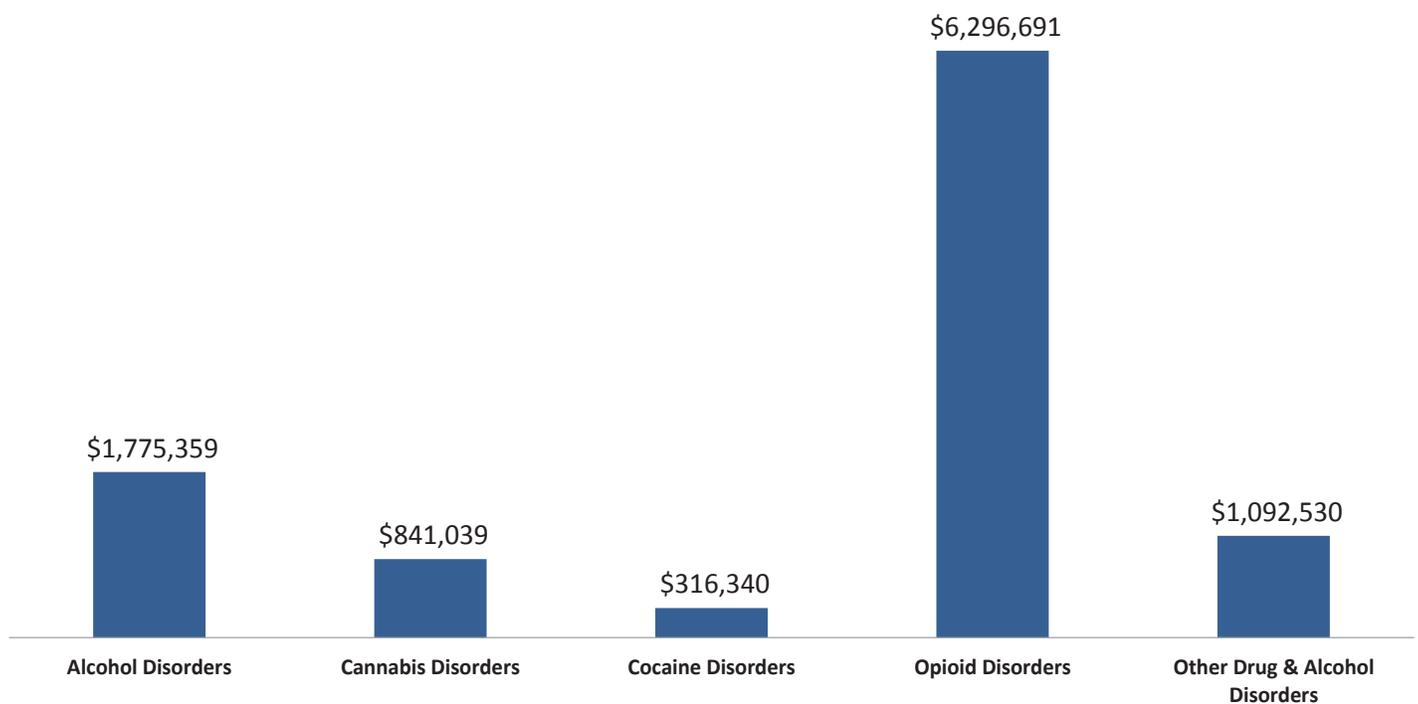
## Drug & Alcohol

2,847 Served  
\$10,321,959 Spent

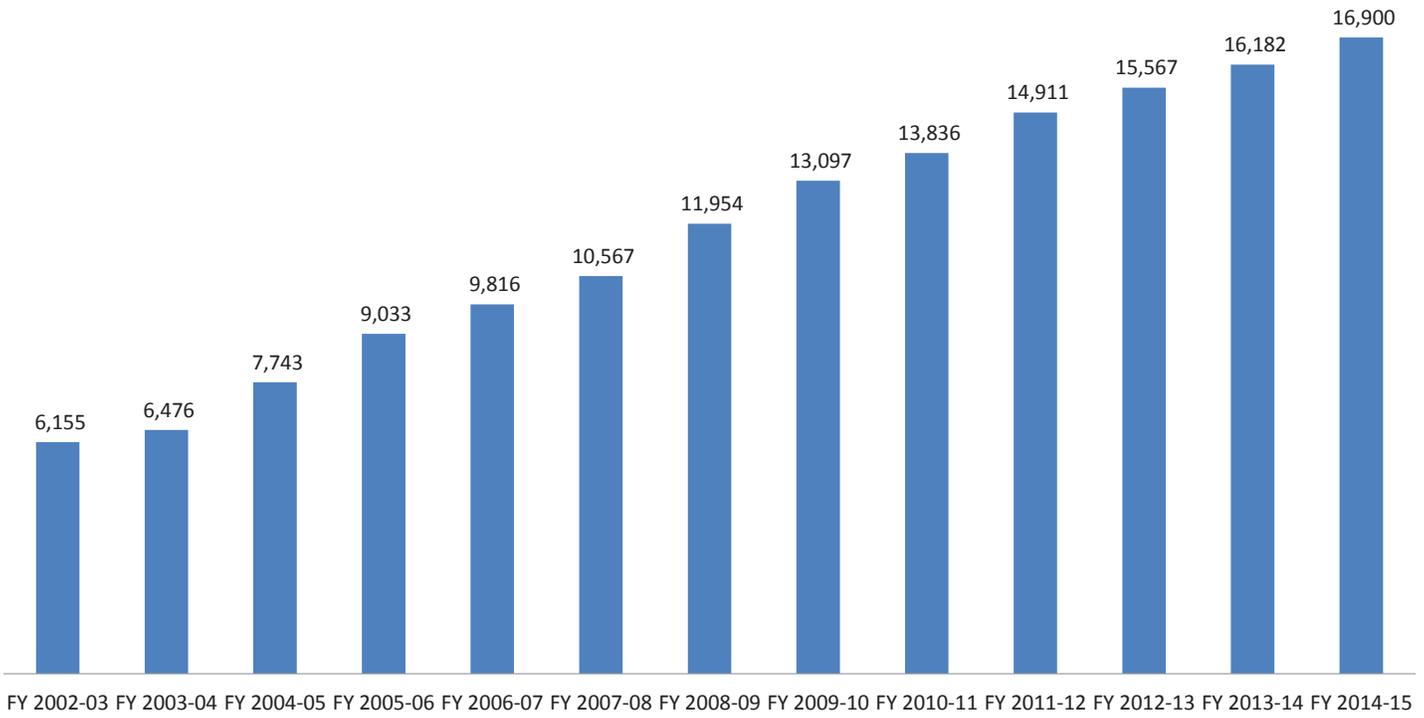
Members Served with a Primary Drug & Alcohol Diagnosis



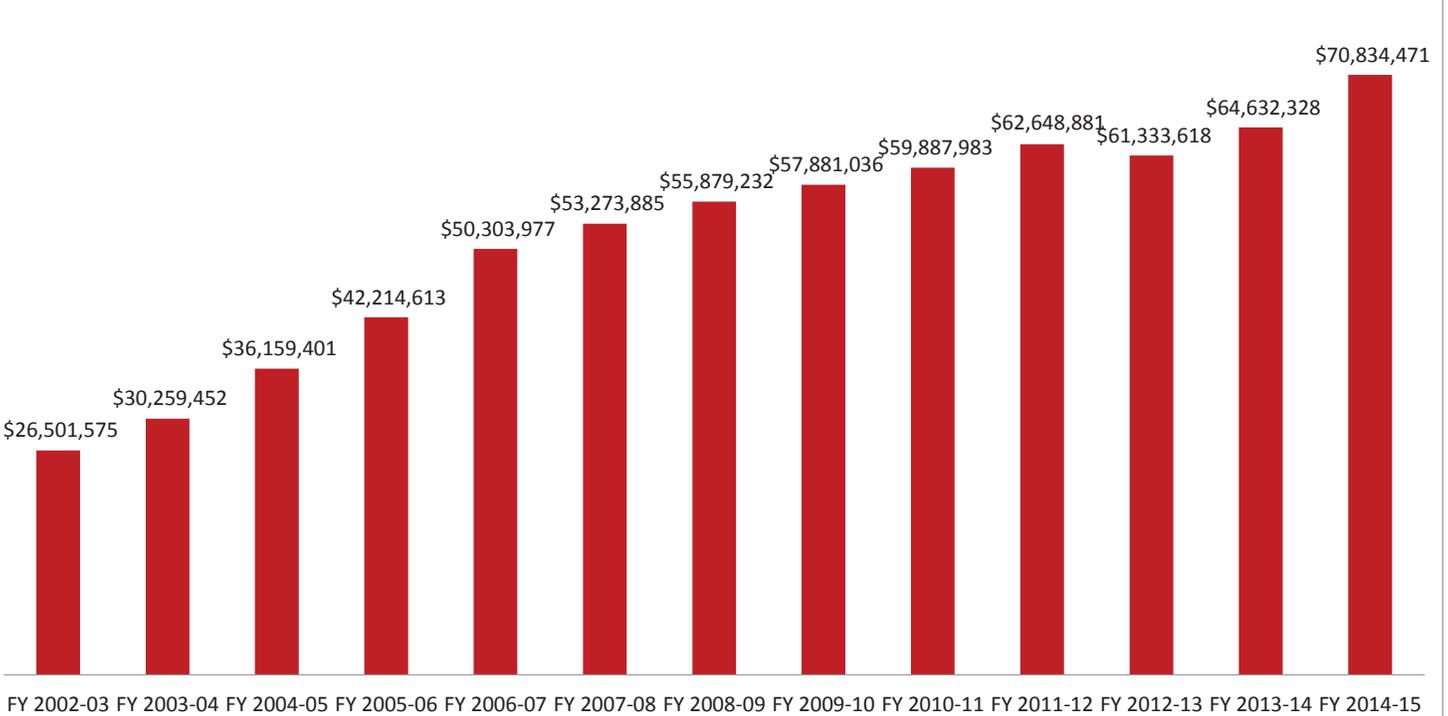
Expenditures for Members with a Primary Drug & Alcohol Diagnosis



**Members Served by Year 2002 - 2015**



**Expenditures by Year 2002 - 2015**



# Services for Youth

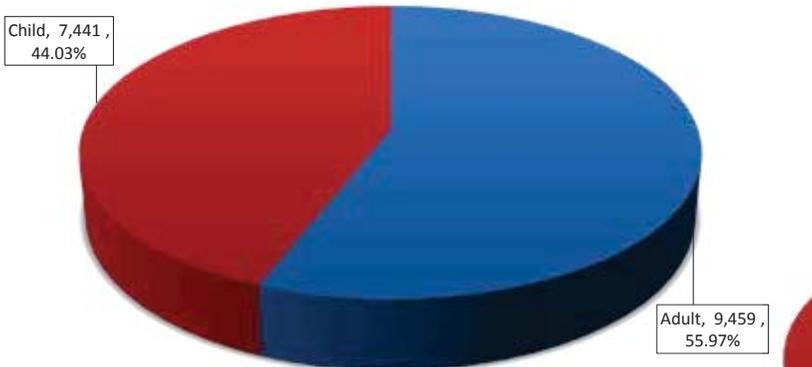
## Youth-Focused Services

**Behavioral Health Rehabilitation Services (BHRS)**, the behavioral health component for Early Periodic Screening, Diagnosis and Treatment, are services to children through the age of 21 years old designed to develop individual specific plans to care for social and emotional disturbances.

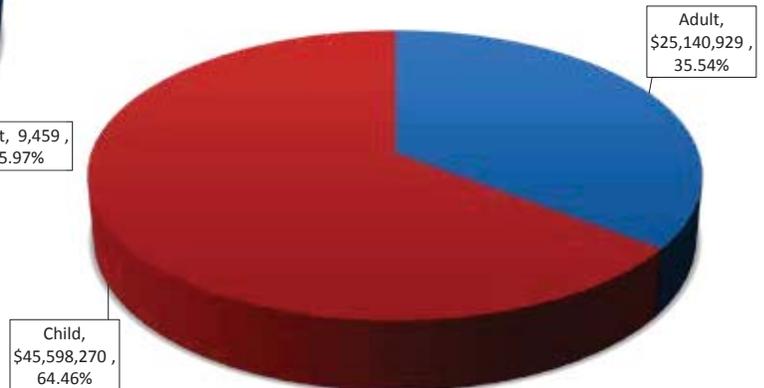
**Family Based Mental Health Services (FBMHS)** are 24-hour, 7-days-a-week services designed to assist families in caring for their children or adolescents with emotional disturbance at home. As a licensed program, Family Based Mental Health Services offers mental health treatment, case work services, and family support for up to 32 weeks, and longer if medically necessary. Family Based services are delivered by a team of mental health professionals and mental health workers, primarily in the family home.

**Residential Treatment Facilities (RTF)** are medical assistance approved, mental health treatment facilities for medical assistance eligible children and adolescents (up to age 21) who cannot be maintained in the home.

Percentage of Adults vs. Children Served



Percentage of Expenditures for Adults vs. Children



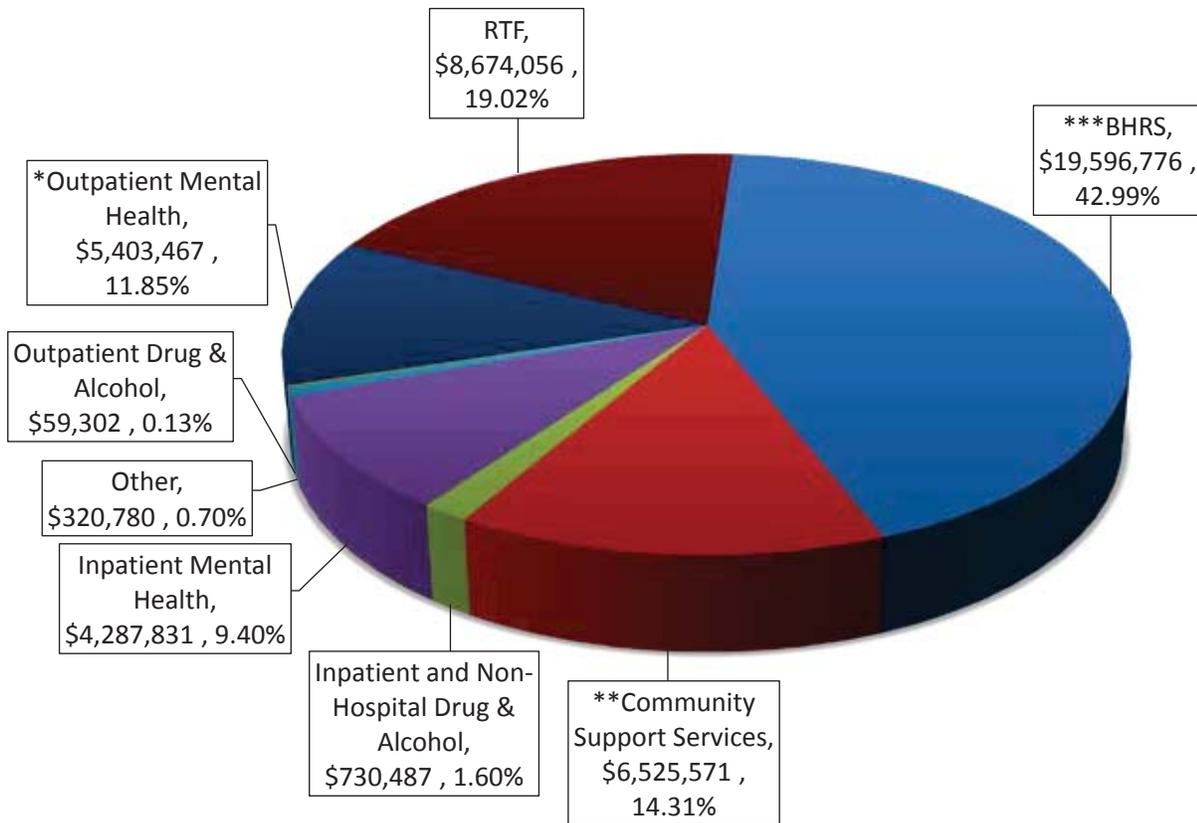
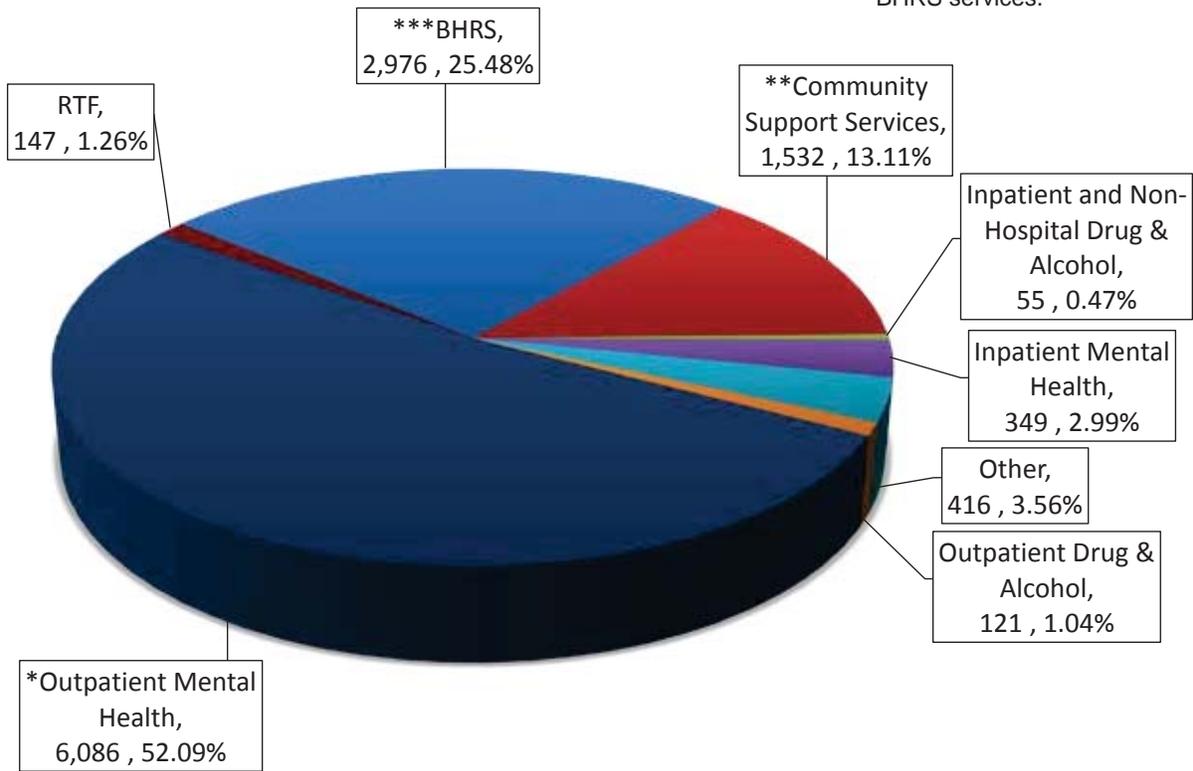
**Approximately 64% of HealthChoices funds were used to provide services to youth during the 2014-2015 fiscal year.**



# All Levels of Care -Youth

7,441 Youth Served  
\$45,598,270 Spent

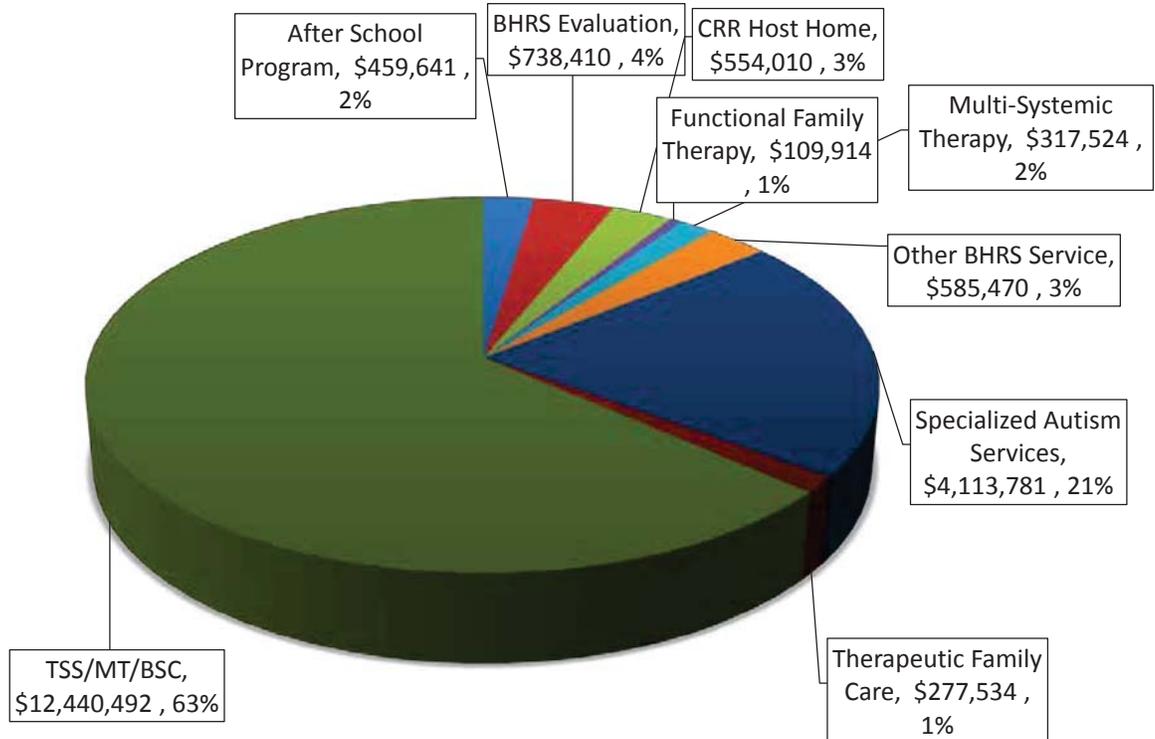
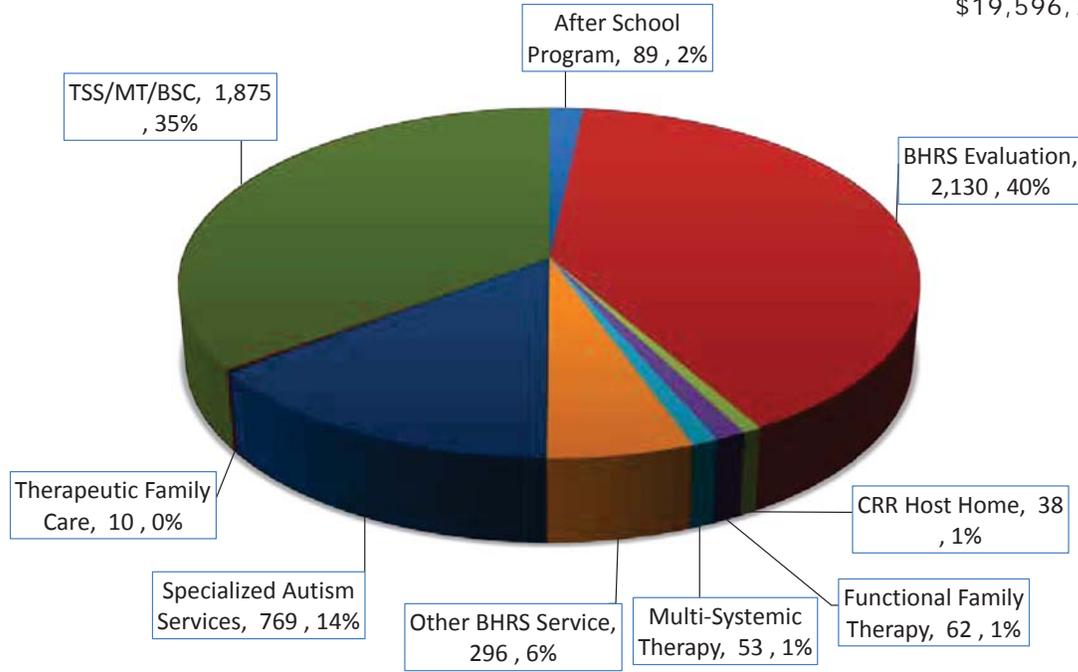
Youth are members under the age of 18 years and individuals who received RTF or BHRS services.



\* Does not include CORE alternative payment arrangement  
 \*\* Does not include Crisis alternative payment arrangement  
 \*\*\* See page 15 for BHRS detail

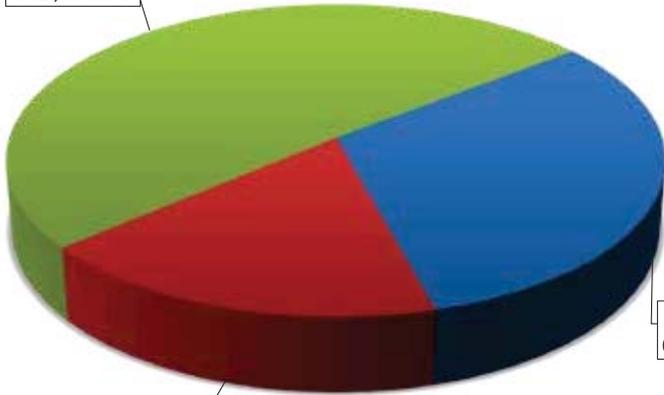
# BHRS Services

2,976 Youth Served  
\$19,596,776 Spent



# Community Support Services

Targeted Case Management, 981 , 50.75%



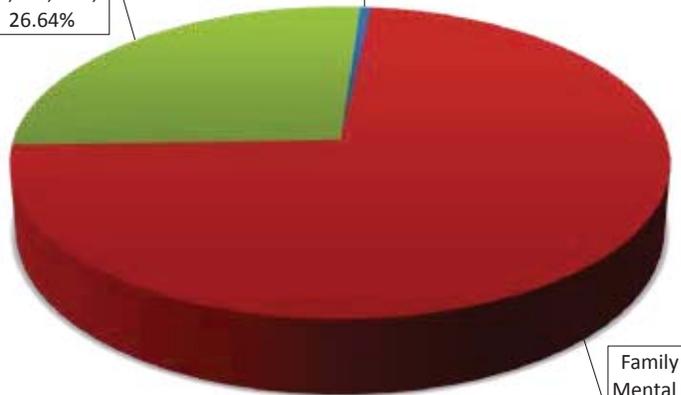
1,521 Youth Served  
\$6,517,172 Spent

\*\*Crisis, 606 , 31.35%

Family Based Mental Health, 346 , 17.90%

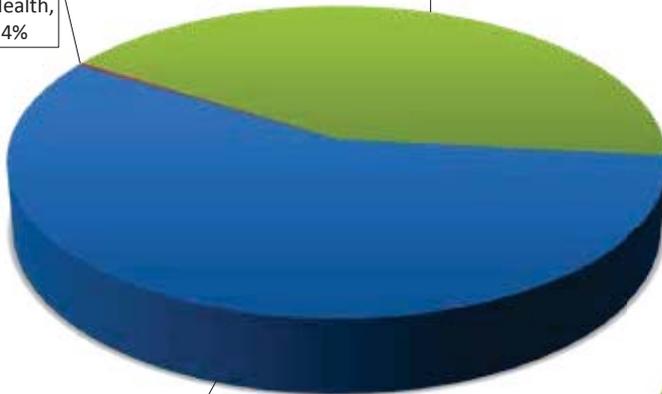
Targeted Case Management, \$1,736,198 , 26.64%

\*\*Crisis, \$36,998 , 0.57%



Family Based Mental Health, \$4,743,976 , 72.79%

Family Based Mental Health, 4 , 0.24%



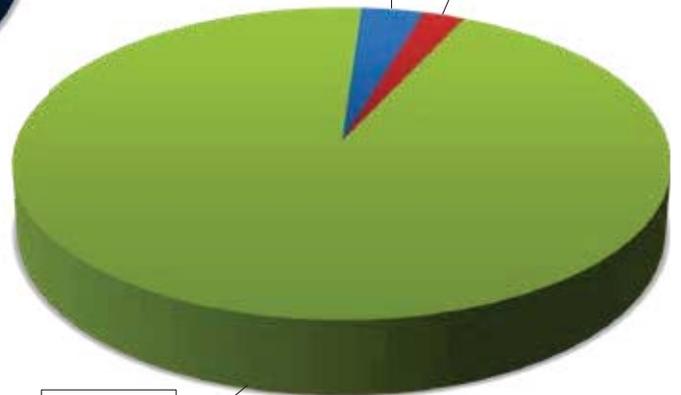
1,519 Adults Served  
\$1,588,926 Spent

Targeted Case Management, 703 , 42.63%

\*\*Crisis, 942 , 57.13%

\*\*Crisis, \$55,515 , 3.49%

Family Based Mental Health, \$37,597 , 2.37%



Targeted Case Management, \$1,495,814 , 94.14%

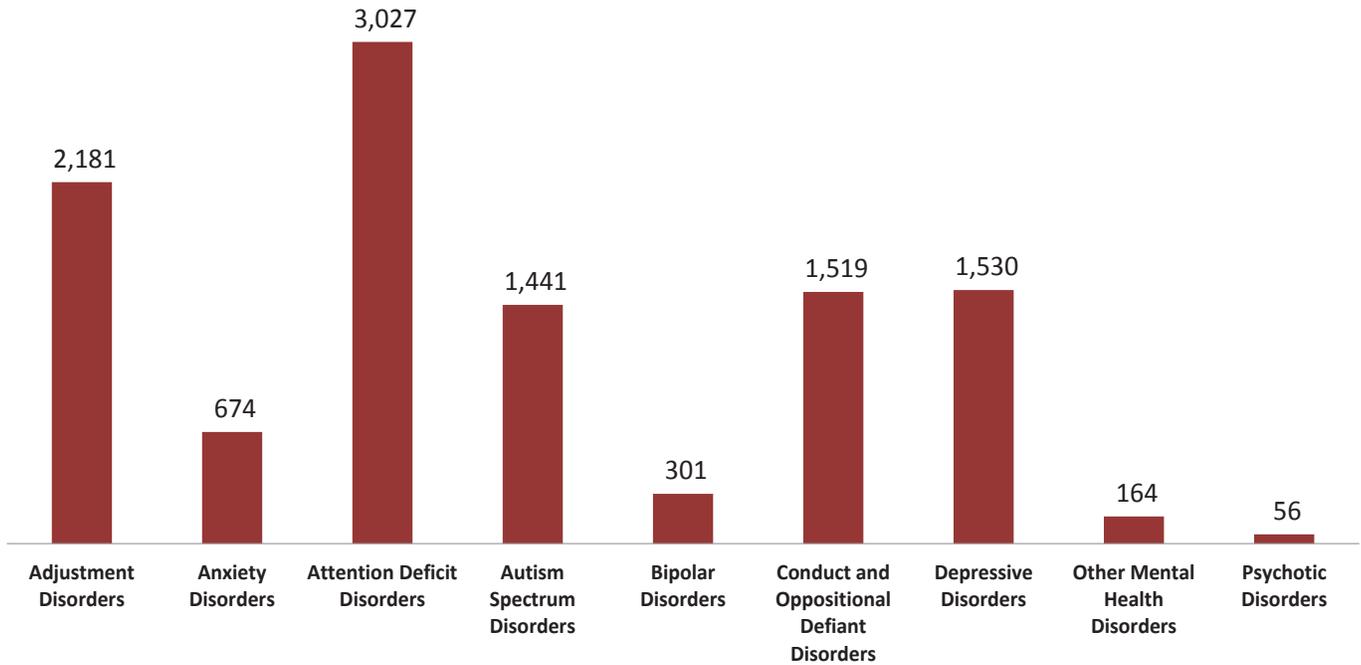
\*\* Does not include Crisis alternative payment arrangement

# Youth Served

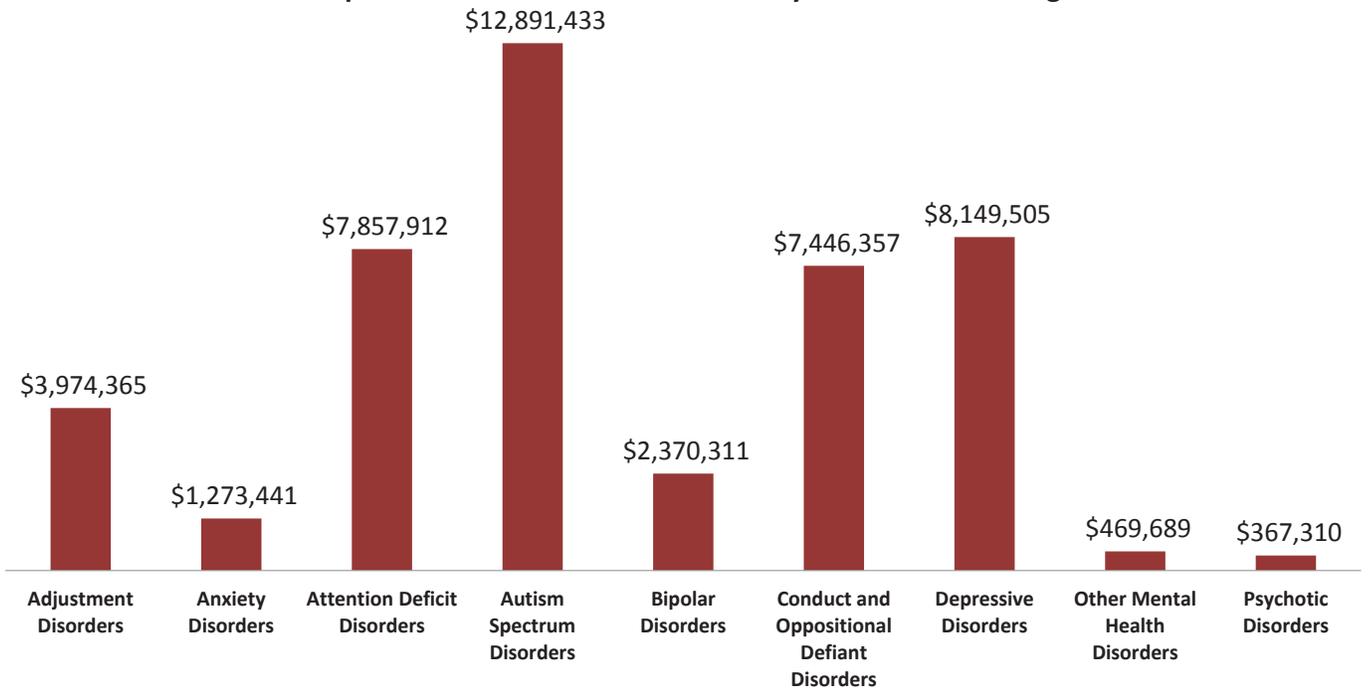
## Primary Mental Health Diagnosis

7,402 Youth Served  
\$44,800,323 Spent

Number of Youth Served with a Primary Mental Health Diagnosis



Expenditures for Youth with a Primary Mental Health Diagnosis

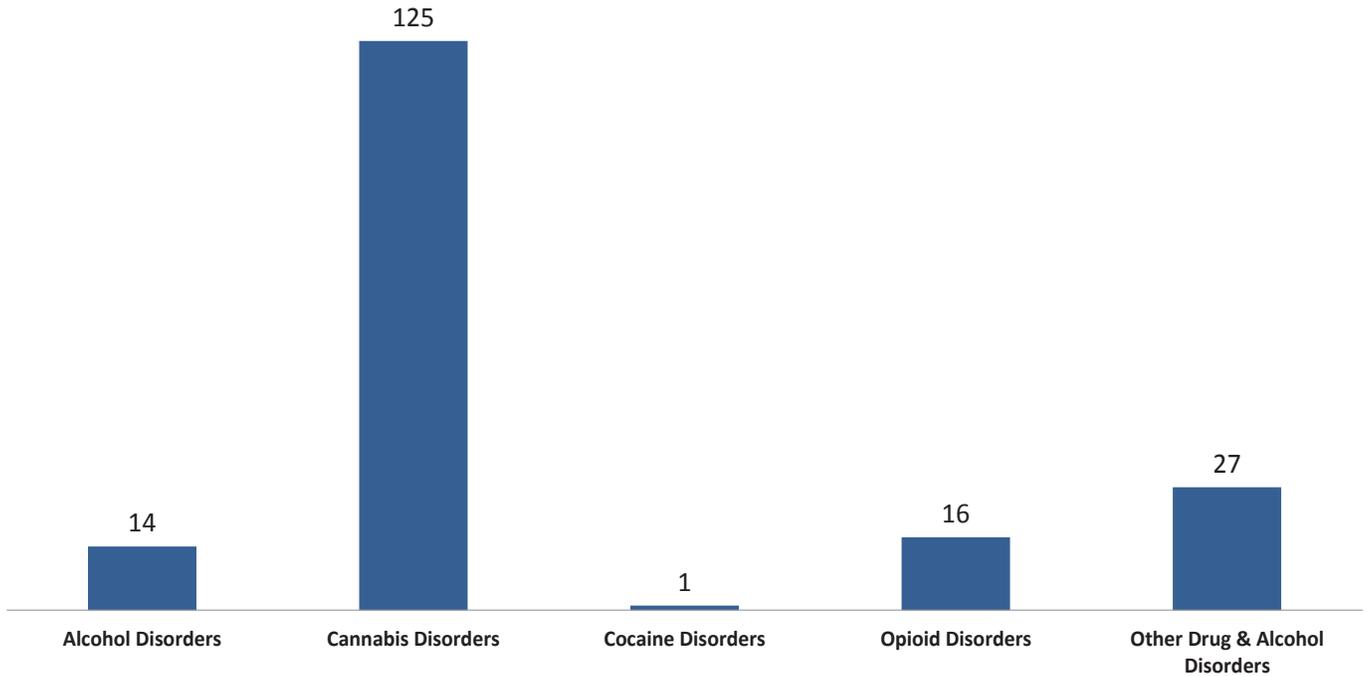


# Youth Served

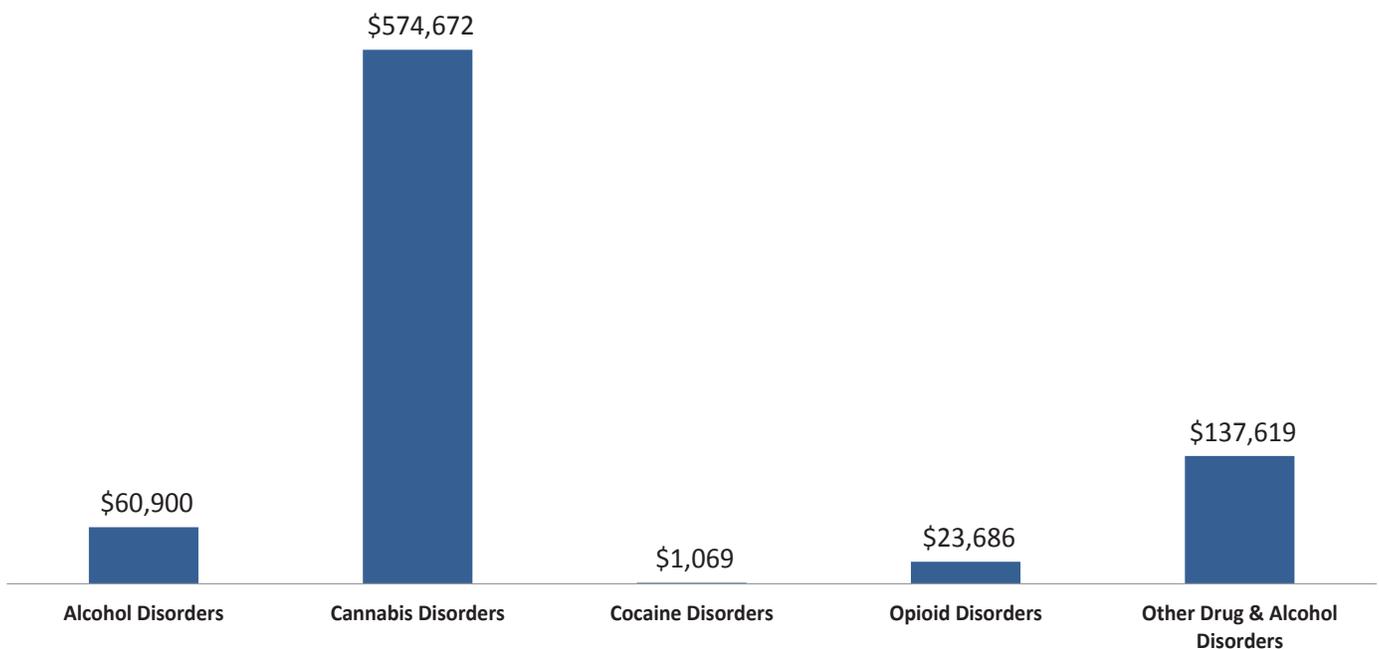
## Primary Drug & Alcohol Diagnosis

163 Youth Served  
\$797,946 Spent

Number of Youth Served with a Primary Drug & Alcohol Diagnosis



Expenditures for Youth with a Primary Drug & Alcohol Diagnosis



# What are Reinvestment Funds?

At the close of each fiscal year, York and Adams Counties are permitted to retain capitation revenues and investment income, which was not expended during the contract year, to reinvest in programs and services in each County. These funds, called *reinvestment funds*, must be spent in accordance with Office of Mental Health and Substance Abuse Services (OMHSAS) approved reinvestment plans.

Reinvestment funds are financial incentives used to reward sound financial management practices and allow counties to creatively use funds to fill identified gaps in their treatment systems, test new innovative treatment approaches, and develop cost-effective alternatives to traditional services. Reinvestment funds are just one strategy the Commonwealth uses to achieve continuous quality improvement within its comprehensive treatment system that supports recovery for persons and families with mental health, drug and/or alcohol treatment needs.

## Reinvestment History

### 2001-2002

Mental Health Outpatient Bilingual/Bicultural Services  
Drug and Alcohol Services for MA Eligible Consumers  
Community Treatment Team  
Drop-In Center Renovations (YC)  
Site-Based Treatment for Children with Autism

### 2002-2003

Community Treatment Team (CTT)  
Supported Housing Program  
Crisis Diversionary Program  
Non-Hospital Detoxification/Rehabilitation Methadone Program  
Psychiatric Rehab/Clubhouse (YC)  
MISA Outpatient Services  
Autism Case Management  
Mental Health Court (YC)  
Respite/Temporary Housing Program  
Transition Apartment Program (YC)  
Dual Diagnosis MH/MR Outpatient Program  
Consumer Work Program  
Targeted Case Management  
Flexible Funds Program  
Consumer Run Business (YC)  
Children's Advocacy Center  
Drop-In Center Renovations (YC)  
School-Based Partial Hospital Program  
Site-Based Autism Program for Children  
Drug and Alcohol Outpatient Treatment (AC)  
Family-Based Dual Diagnosis Program (AC)

### 2003-2004

Non-Hospital Detoxification/Rehabilitation/ Methadone Program  
Extended Acute Care  
Children's Advocacy Center  
Children and Adolescent Support Services (Both)  
Housing/Employment Support Services  
Psychiatric Rehab/Clubhouse (YC)  
Minority Behavioral Health Outreach Program (YC)  
Mental Health Association and Supportive Services (AC)  
Multi-System Facilitator (YC)

### 2004-2005

Non-Hospital Detoxification/Rehabilitation/ Methadone Program  
Mentoring Older Youth (AC)  
Children's Advocacy Center (AC)  
Flexible Funds Program (Both)  
Mental Health Association and Supportive Services (YC)  
Minority-Based Behavioral Health Drop-In Center (YC)  
Consumer Work Program

### 2005-2006

Family Group Decision Making (AC)  
Enhanced Screening Methods (AC)  
Autism Treatment Program (YC)  
Multi-System Facilitator (YC)  
Integrated Health Program (YC)  
Drug and Alcohol Outpatient (YC)  
CTT Renovations (YC)

### 2006-2007

Affordable Housing (Both)  
Child Advocacy Center Expansion (AC)  
2007-2008  
Affordable Housing  
Drug & Alcohol Treatment Services (Both)  
Long-Term Structured Residence (YC)

### 2008-2009

Enhancement to the Crisis Intervention System  
Specialized Community Residence  
Mental Health Outpatient Common Ground Approach  
Sanctuary Model for Residential Treatment Facilities  
Room and Board for CRR Host Home  
Treatment Courts Community Relations and Development

### 2009-2010

Joint Planning Team Continuation (YC)  
Community Residential Rehabilitation (CRR) Host Home Room and Board (AC)

### 2010-2011

Specialized Community Residence Construction (YC)  
Supportive Positive Environment for Children  
Emergency Rental Assistance Program  
Drug & Alcohol Halway House

### 2011-2012

Joint Planning Team  
Telepsychiatry  
PCIT  
Behavioral Health Navigator  
Community Residential Rehabilitation Funds

### 2012-2013

Recovery Support Services: Bridge Subsidy  
Community Residential Rehabilitation Funds



# Terminology

## **ADMISSION RATE**

The number of admissions into services per 1000 HealthChoices enrollees.

## **AUTHORIZATION**

A process that is related to the payment of claims by which a provider receives approval from Community Care to provide a particular service. Authorizations typically limit the number of units and the time in which the service can be provided. If a service requires authorization for payment, the lack of authorization will result in an unpaid claim.

## **CAPITATION**

A set amount of money received or paid out; it is based on membership rather than on services delivered and is usually expressed in units of PMPM (per member per month) or PMPD (per member per day). Under the HealthChoices program, capitation rates vary by categories of assistance.

## **CLAIMS**

A request for reimbursement for a behavioral health service.

## **COMMUNITY RESIDENTIAL REHABILITATION (CRR)**

CRRs are residential programs designed and operated to assist persons with chronic psychiatric disability to live as independently as possible in the least restrictive setting.

## **COMPLAINT**

A process by which a consumer or provider can address a problem experienced in the HealthChoices program.

## **CONSUMER**

HealthChoices enrollees on whose behalf a claim has been adjudicated for behavioral health care services during the reporting period.

## **DENIAL**

A denial is defined as “a determination made by a managed care organization in response to a provider’s request for approval to provide in-plan services of a specific duration and scope which (1) disapproves the request completely; (2) approves provision of the requested service(s), but for a lesser scope or duration than requested by the provider; (an approval of a requested service which includes a requirement for a concurrent review by the managed care organization during the authorized period does not constitute a denial); or (3) disapproves provision of the requested service(s), but approves provision of an alternative service( s).”

## **DIAGNOSIS**

A behavioral health disorder based on DSM criteria.

## **DIAGNOSTIC CATEGORIES**

Subgroups of behavioral health disorders. This report contains the following groupings:

Autism Spectrum Disorders, sometimes called Pervasive Developmental Disorders (PDD), are a range of neurological disorders that most markedly involve some degree of difficulty with communication and interpersonal relationships, as well as obsessions and repetitive behaviors.

Bipolar Disorders – a group of mood disorders that characteristically involve mood swings. This group includes: Bipolar I Disorder, Bipolar II Disorder, Bipolar Disorder Not Otherwise Specified, Mood Disorder, and Mood Disorder Not Otherwise Specified. Depressive Disorders – a group of mood disorders that includes Major Depressive Disorder, Dysthymia, and Depressive Disorder Not Otherwise Specified.

Schizophrenia and Psychotic Disorders – a collection of thought disorders such as Schizophrenia, Schizoaffective Disorder, Schizophreniform Disorder, and Psychotic Disorder Not Otherwise Specified.

Anxiety Disorders – a group of disorders that includes: Panic Disorder, Social Phobia, Posttraumatic Stress Disorder, Obsessive Compulsive Disorder, Generalized Anxiety Disorder, and Anxiety Disorder Not Otherwise Specified.

Adjustment Disorder – the development of clinically significant emotional or behavioral symptoms in response to an identifiable psychosocial stressor or stressors.



Impulse Control Disorders – includes Intermittent Explosive Disorder, Trichotillomania, and Impulse Control Disorder Not Otherwise Specified.

ADHD and Disorders in Children – includes Attention Deficit Hyperactivity Disorder, Conduct Disorder, Oppositional Defiant Disorder, and Disruptive Behavior Disorder Not Otherwise Specified.

Other Mental Health Disorders – includes Tic Disorders, Learning Disorders, Communications Disorders, and Motor Skills Disorders.

Substance Abuse/Dependence Disorders – a group of disorders related to taking a drug of abuse. The DSM refers to 11 classes of substances: alcohol, amphetamines, caffeine, cannabis (marijuana or hashish), cocaine, hallucinogens, inhalants, nicotine, opiates (heroin or other narcotics), PCP, and sedatives/hypnotic/anxiolytics.

#### **DSM**

The Diagnostic and Statistical Manual of Mental Disorders is published by the American Psychiatric Association. This manual provides a diagnostic coding system for mental and substance abuse disorders.

#### **ENROLLMENT**

The number of Medicaid recipients who are active in the Medical Assistance program at any given point in time.

#### **FAIR HEARING APPEAL**

A grievance process through which a HealthChoices member can file a written appeal, to the Department of Human Services, regarding a behavioral health care service decision.

#### **GRIEVANCE**

The process by which a consumer addresses a problem with a decision made about his/her behavioral health care service. This may include denial of a service, approving less service than what was requested, or approving a level of care different from that requested.



#### **HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996 (HIPAA)**

This is a Federal law that allows persons to qualify immediately for comparable health insurance coverage when they change their employment relationships. Title II, Subtitle F, of HIPAA gives the Health and Human Services Department of the federal government the authority to mandate the use of standards for the electronic exchange of health care data; to specify what medical and administrative code sets should be used within those standards; to require the use of national identification systems for health care patients, providers, payers (or plans), and employers (or sponsors); and to specify the types of measures required to protect the security and privacy of personally identifiable health care information. Also known as the Kennedy-Kassebaum Bill, K2, or Public Law 104-191.

#### **MEMBER**

Eligible Medical Assistance recipients enrolled in the HealthChoices program during the reporting period.

#### **MENTAL HEALTH COMMITMENT**

An involuntary admission into a psychiatric hospital as per the Pennsylvania Mental Health Procedures Act. Also referred to as a '302 commitment'.

#### **OUTPATIENT REGISTRATION (OPR)**

The process by which HealthChoices members are registered with Community Care to receive specific outpatient services. This process eliminates the need for pre-authorization of services and allows the member to access mental health or drug and alcohol services with the provider for up to one year.

#### **RESIDENTIAL TREATMENT FACILITY (RTF)**

A self-contained, secure, 24-hour psychiatric residence for children and adolescents who require intensive clinical, recreational, educational services and supervision.

#### **UTILIZATION**

The amount of behavioral health care services used by Medicaid recipients. Utilization is based on encounter (paid claims) information.

# York-Adams HealthChoices Program

100 West Market Street  
York, PA 17401  
717-771-9900  
<http://www.ychcmu.org>

