



## Provider Profiling Year-End Report

### Community Based Mental Health Services

Peer Support Services (PSS)

Psychiatric Rehabilitation Services (Psych Rehab)

Targeted Case Management (TCM) (includes Intensive Case Management,  
Resource Coordination, and Blended Case Management)

1/1/2022 - 12/31/2022

*Provider Profiling is conducted in order to collect and trend data to provide information relating to Provider performance, with the overall intent of improving the quality of care rendered to PerformCare's Members. PerformCare encourages Providers to closely review this information and use this to help inform areas of future development.*

*PerformCare will provide updated Provider Profiling reports twice a year. The first report will be distributed in January, and will provide measures on the first two quarters of the calendar year (Provider Profiling Mid-Year Report). The second report will be distributed in July, and will provide measures on the entire calendar year (Provider Profiling Year-End Report).*

**Measure 1: Utilization of Peer Support Services**

This measure is designed to summarize for the Provider community the annual utilization details by Provider for Peer Support Services. The measure specifically draws attention to average units per Member and the length of stay in days. This measure is based on Members discharged during 1/1/22-12/31/2022.

**Goal**

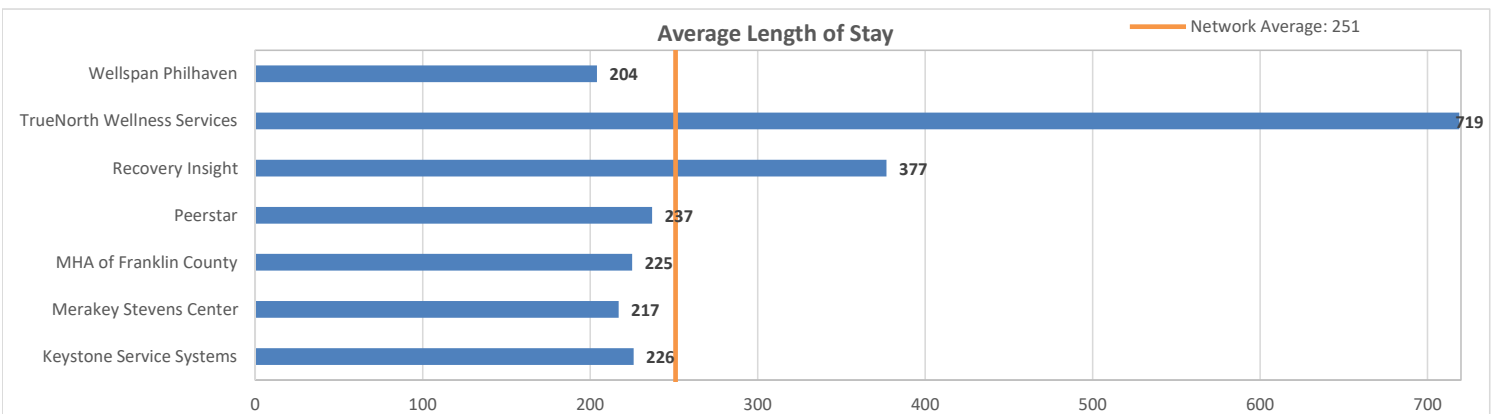
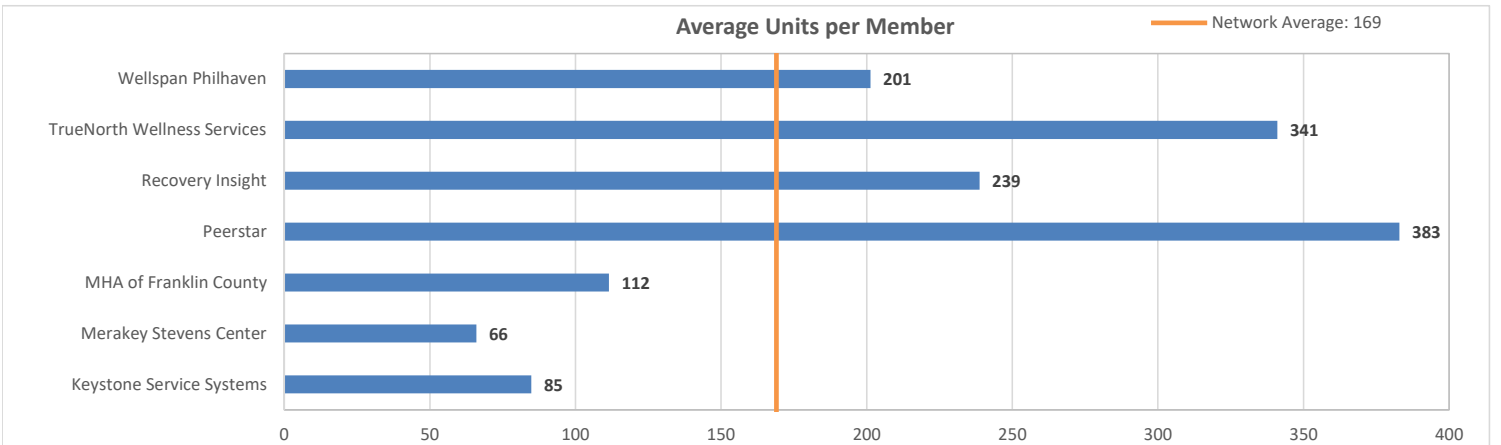
PerformCare provides this measure for informational purposes.

**Network Average**

	Total Paid Units	Members Served	Average Units per Member	Average Length of Stay
<b>Plan-Wide</b>				
Peer Support Utilization	59,694	354	169	251

**Provider Breakdown**

Provider	Total Paid Units	Members Served	Average Units per Member	Average Length of Stay
<b>Peer Support Utilization</b>				
Keystone Service Systems	8,657	102	85	226
Merakey Stevens Center	1,837	28	66	217
MHA of Franklin County	6,691	60	112	225
Peerstar	14,552	38	383	237
Recovery Insight	13,847	58	239	377
TrueNorth Wellness Services	1,023	3	341	719
Wellspan Philhaven	13,087	65	201	204



**Note:**  
 Units and Member calculations are for the reporting period only. Average length of stay is based on episodes and can span outside the reporting time frame.  
 Providers with less than 10 Members were not included due to the smaller sample of data.

**Measure 2: 7-Day Access for Peer Support Services**

PerformCare monitors access to ensure that services are available to Members when they need them. This measure reports the percentage of Member records that are within the standard of 7 days by Provider and quarter. This also shows the average number of days from approval to start date by Provider. This measure examines data for new cases opened during the timeframe of 1/1/22-12/31/2022.

**Goal**

PerformCare expects Providers to be working towards meeting this standard 60% of the time. The overall goal is to ensure that Members receive services in a timely manner.

**Network Average**

Total Records	In Standard	Average Days	2022-Q1	2022-Q2	2022-Q3	2022-Q4	% In Standard
---------------	-------------	--------------	---------	---------	---------	---------	---------------

**Plan Wide**

Peer Support Access	209	125	22	33%	54%	76%	69%	60%
---------------------	-----	-----	----	-----	-----	-----	-----	-----

**Provider Breakdown**

Provider breakdown of Peer Support access within 7-day standard data.

	Total Records	In Standard	Average Days	2022-Q1	2022-Q2	2022-Q3	2022-Q4	% In Standard
Keystone Service Systems PSS	43	25	15	50%	13%	67%	73%	58%
Merakey Stevens Center Peer Support	25	7	14	22%	33%	33%	25%	28%
MHA of Franklin County PSS	59	51	9	1%	94%	89%	67%	86%
Recovery Insight Inc PSS	26	12	37	0%	0%	67%	67%	46%
Wellspring Philhaven PPS	48	26	36	7%	54%	92%	88%	54%

*Note:*

Cells with a dash represent that there were no services delivered to calculate a measure within that quarter and category. Providers with less than 10 records were not included due to the smaller sample of data.

**Measure 3: Utilization of Psychiatric Rehabilitation Services**

This measure is designed to summarize for the Provider community the annual utilization details by Provider for Psychiatric Rehabilitation. The report specifically draws attention to average units per Member and average length of stay in days. This measure is based on Members discharged during 1/1/22-12/31/22.

For the purpose of this measure, average length of stay has been defined as the first date of service for Psychiatric Rehabilitation services, through the date of the last claim, with no subsequent claims paid for a period of 60 days.

**Goal**

PerformCare provides this measure for informational purposes.

**Network Average**

Plan-wide Psych Rehab utilization data.

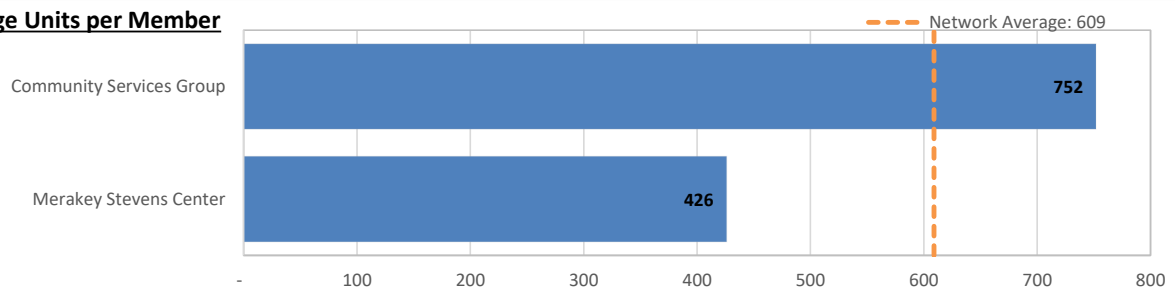
	Total Paid Units	Members Served	Average Units per Member	Average Length of Stay
<b>Plan-Wide</b>				
Psych Rehab Utilization	77,375	127	609	284

**Provider Breakdown**

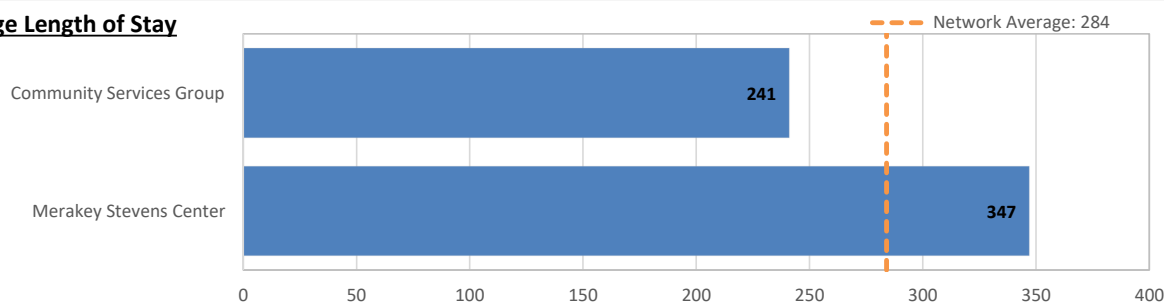
Provider	Total Paid Units	Members Served	Average Units per Member	Average Length of Stay
<b>Psych Rehab Utilization</b>				
Community Services Group	54,193	72	752	241
Merakey Stevens Center	19,598	46	426	347

**Network Average Comparison**

**Average Units per Member**



**Average Length of Stay**



**Note:**

Units and Member calculations are for the reporting period only.

Average length of stay is based on episodes and can span outside the reporting time frame.

Providers with less than 10 Members were not included due to the smaller sample of data.

**Measure 4: Utilization of TCM Services**

This measure is designed to summarize for the Provider community the annual utilization details by Provider for Targeted Case Management Services, which include Intensive Case Management, Resource Coordination, and Blended Case Management Services. This measure specifically draws attention to average units per Member and average length of stay in days. This measure is based on Members discharged during 1/1/22-12/31/22.

For the purpose of this measure, average length of stay has been defined as the first date of service for case management services, through the date of the last claim, with no subsequent claims paid for a period of 60 days.

**Goal**

PerformCare provides this measure for informational purposes.

**Network Average**

	Total Paid Units	Members Served	Average Units per Member	Average Length of Stay
<b>Plan-Wide</b>				
TCM Utilization	198,360	1,559	156	333

**Provider Breakdown**

Provider	Total Paid Units	Members Served	Average Units per Member	Average Length of Stay
<b>TCM Utilization</b>				
CMU	68,997	600	114	251
Community Services Group	17,738	106	167	420
Holy Spirit Hospital	32,932	150	219	237
Keystone Service Systems	9,470	34	278	467
Lancaster Co BH and DS	22,504	205	109	386
Merakey Stevens Center	7,205	68	105	326
Service Access and Management	39,514	396	99	242

*Note:*

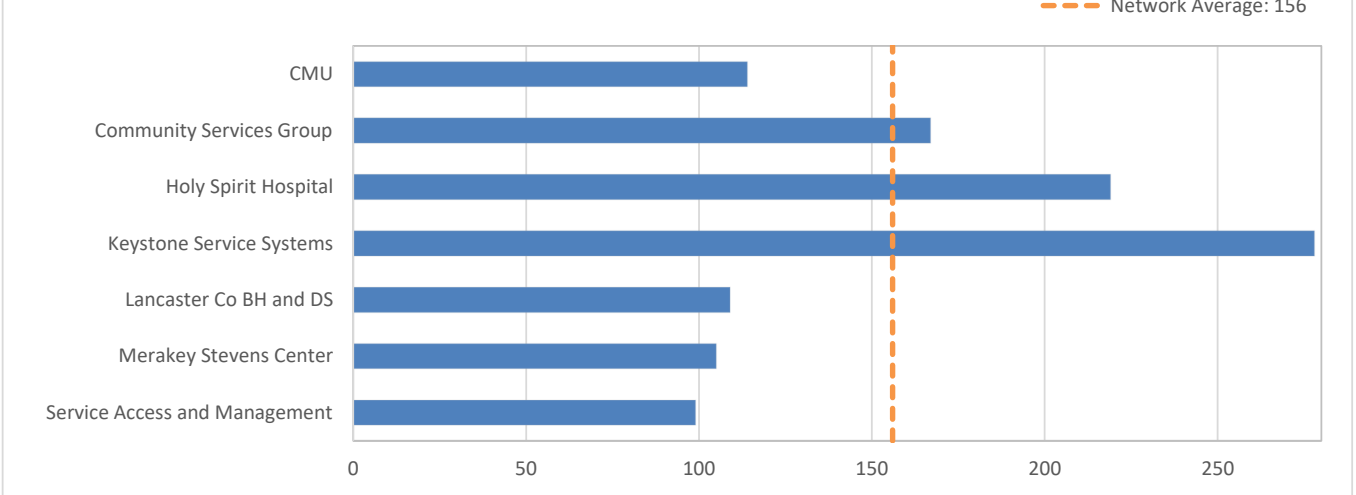
*Units and Member calculations are for the reporting period only.*

*Average length of stay is based on episodes and can span outside the reporting time frame.*

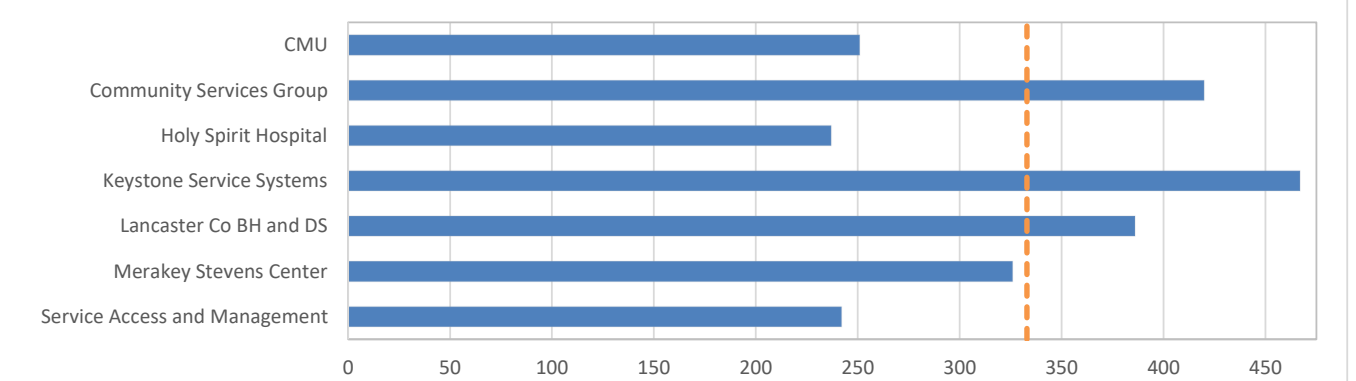
*Providers with less than 10 Members were not included due to the smaller sample of data.*

**Network Average Comparison**

**Average Units per Member**



**Average Length of Stay**



**Note:**

*Units and Member calculations are for the reporting period only.*

*Average length of stay is based on episodes and can span outside the reporting time frame.*

*Providers with less than 10 Members were not included due to the smaller sample of data.*

**Measure 5: 30-Day MH IP Readmission Rates by TCM Provider**

This measure compares the overall plan-wide Mental Health Inpatient (MH IP) readmission rates to the MH IP readmission rates for those Members receiving TCM services. Readmission is defined as being readmitted to an MH IP service within 30 days of discharge. This measure is based on Members discharged from MH IP during 1/1/22-12/31/22, who also had a claim for TCM services in the 30 days prior to their MH IP admission.

The rates are calculated as follows:

Denominator: The count of discharges from MH IP that also had a claim for TCM in the 30 days prior to their MH IP admission. Discharges from MH IP due to death or direct transfer to another facility are excluded.

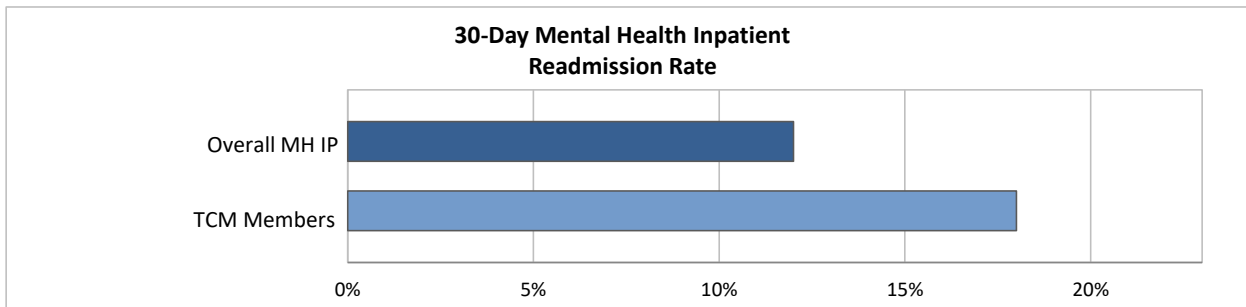
Numerator: Of the qualifying denominator discharges, the count of readmissions within 30 days of a discharge. Numerator events (readmissions) may be to the same or a different facility. Readmissions are counted through the 30 days following the end of the service range defined.

**Goal**

PerformCare provides this measure for informational purposes.

**Network Average**

30-Day Mental Health Inpatient readmission rates.



Rate Comparison		Rate
Overall MH IP Readmission		12%
TCM Members with MH IP Readmission		18%

**Provider Breakdown**

Provider	Discharges from MHIP Facilities (counted by TCM Providers)	Readmissions to MHIP Facilities (counted by TCM Providers)	Readmission Rate
CMU TCM	121	17	14%
Community Services Group, Inc. TCM	51	6	12%
Holy Spirit Hosp-BH services TCM	20	4	20%
Keystone Service Systems, Inc. TCM	20	3	15%
Lancaster Co BH & Dev Serv TCM	74	20	27%
Merakey Stevens Center TCM	43	12	28%
Service Access and Management TCM	112	16	14%

*Note:*

Providers with less than 10 discharges were not included due to the smaller sample of data.

This measure reports the number of discharges/readmissions and not unique Members. A single Member can have more than one discharge/readmission counted in this measure.

**Measure 6: TCM Follow-Up Visits within 7 Days of Discharge from MH IP**

Follow-up visits are important to help Members stay well and continue with treatment, without needing to return to the hospital. This measure shows the percentage of Members who were seen within 7 days by their TCM Provider after discharge from MH IP. This measure includes only Members discharged from MH IP between 1/1/22-12/31/2022, who had a prior authorization for TCM and had a claim for TCM within the 30 days prior to their MH IP admission.

The rates are calculated as follows:

Denominator: Discharges from MH IP and had a TCM authorization (with at least one claim for TCM in the 30 days prior to MH IP admission) and were not readmitted within 30 days.

Numerator: Discharges resulting in a compliant follow-up visit with TCM within 7 days of discharge from MH IP.

**Goal**

PerformCare provides this measure for informational purposes.

**Network Average**

Plan-wide average of follow-up visits within 7 Days of discharge for all TCM Providers.

	Discharges	Follow-Ups	% Follow-Ups
<b>Follow-Up within 7 Days</b>	441	332	75%

**Provider Breakdown**

Percentage of follow-up visits within 7 days of discharge by TCM Provider.

TCM/BCM Provider	Discharges	Follow-Ups	% Follow-Ups
CMU TCM	121	85	70%
Community Services Group, Inc. TCM	51	38	75%
Holy Spirit Hosp-BH services TCM	20	12	60%
Keystone Service Systems, Inc. TCM	20	18	90%
Lancaster Co BH & Dev Serv TCM	74	53	72%
Merakey Stevens Center TCM	43	38	88%
Service Access and Management TCM	112	88	79%

*Note:*

*Providers with less than 10 discharges were not included due to the smaller sample of data.*



C/FST Survey

The purpose of the Consumer and Family Satisfaction Team (also referred to as Individual and Family Satisfaction Team) survey is to gather feedback from adults, children, and families that have used Mental Health and/or Substance Use services funded by PerformCare. They are conducted by external agencies in each region and are mainly done through face-to-face interviews. These surveys focus on Members' satisfaction with services and ask questions related to many aspects of treatment.

While the survey tools used in each region are similar, not all questions are the same. The results noted below show results for similar questions that fall into the categories noted. The results are sorted by contract: Capital (which includes Cumberland, Dauphin, Lancaster, Lebanon, and Perry counties), and Franklin & Fulton counties. Providers that are not listed had less than 10 surveys completed for the level(s) of care. Additionally, if a contract is not listed, it indicates that there were no surveys completed for the level(s) of care during this reporting timeframe. It is important to note that while the number of surveys is listed, a Member may not have answered all questions included in the survey.

The agencies who conduct these surveys collect this information on a quarterly basis. The data below is based on information collected during the Calendar Year 2022 (January 1, 2022 through December 31, 2022).

Capital Peer Support Services					
Provider	Number of Surveys	Member is able to get an appointment quickly.	The services provided meet the Member's needs.	Staff are respectful/sensitive to the Member's culture and background.	Member is satisfied with Provider.
Keystone	20	100%	60%	90%	90%
Recovery Insight	24	100%	83%	88%	96%
Wellspan Philhaven	20	70%	95%	95%	85%

Franklin/Fulton Blended Case Management					
Provider	Number of Surveys	Member is able to get an appointment quickly.	The services provided meet the Member's needs.	Staff are respectful/sensitive to the Member's culture and background.	Member is satisfied with Provider.
Service Access & Management	46*	65%	93%	98%	91%

\*46 surveys for question 1; 45 surveys for questions 2 & 3; 43 surveys for question 4