

PerformCARE[®]

Provider Profiling Year-End Report

Residential Treatment Facility (RTF)

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.

Measure 1: Follow-up Levels of Care 30 Days Post-Discharge from RTF

Follow-up care is important to help Members stay well and continue with their treatment. This measure identifies (by Provider and by Level of Care) Members' follow-up treatment immediately after discharge from RTF. This is meant to be an informational measure. PerformCare uses authorization data to determine RTF stay/discharge and claims data to determine the follow-up level of care within the 30 day timeframe. All levels of care are counted when a Member is discharged to more than one level of care.

Goal

PerformCare is providing this measure for informational purposes.

Network Average

Levels of care 30 days post-discharge from RTF:

Levels of Care Post RTF	Members*
FBMH	19
TCM	15
Other**	12
No Claims After Discharge***	6
RTF	2
Outpatient	2
MH Inpatient	2
CRR	1
Total	59

Discharges with first follow-up level of care after 30 days are not shown on the report.

**A Member may be referred to more than one service and be counted more than once.*

*** Other - levels of care other than the ones listed in the table.*

**** There were no claims within 30 days from discharge date.*

Provider Breakdown

Levels of care 30 days post-discharge from RTF by Provider:

Levels of Care Post RTF	Members*
Hoffman Homes, Inc. RTF	
FBMH	9
Other**	5
TCM	2
Outpatient	1
No Claims After Discharge***	1
Total	18
Bradley Center, Inc RTF	
TCM	6
Other**	3
FBMH	2
CRR	1
MH Inpatient	1
No Claims After Discharge***	1
Total	14
Gemma Services RTF	
TCM	3
FBMH	2
RTF	1
MH Inpatient	1
Other**	1
Total	8

Note: Providers with less than 5 records are excluded from this report.

Discharges with first follow-up level of care after 30 days are not shown on the report.

**A Member may be referred to more than one service and be counted more than once*

*** Other - levels of care other than the ones listed in the table.*

**** There were no claims within 30 days from discharge date.*

Measure 2: Follow-up Levels of Care 90 Days Post-Discharge from RTF

Follow-up care is important to help Members stay well and continue with their treatment. This measure identifies (by Provider and by Level of Care) Members' follow-up treatment immediately after discharge from RTF. This is meant to be an informational measure. PerformCare uses authorization data to determine RTF stay/discharge and claims data to determine the follow-up level of care within the 90 day timeframe. All levels of care are counted when a Member is discharged to more than one level of care.

Goal

PerformCare is providing this measure for informational purposes.

Network Average

Levels of care 90 days post-discharge from RTF:

Levels of Care Post RTF	Members*
FBMH	20
TCM	15
Other**	13
MH Inpatient	3
No Claims After Discharge***	3
RTF	2
Outpatient	2
CRR	1
Total	59

Discharges with first follow-up level of care after 90 days are not shown on the report.

**A Member may be referred to more than one service and be counted more than once.*

*** Other - levels of care other than the ones listed in the table.*

**** There were no claims within 90 days from discharge date.*

Provider Breakdown

Levels of care 90 days post-discharge from RTF by Provider:

Levels of Care Post RTF	Members*
Hoffman Homes, Inc. RTF	
FBMH	9
Other**	6
TCM	2
Outpatient	1
Total	18
Bradley Center, Inc RTF	
TCM	6
Other**	3
FBMH	2
CRR	1
No Claims After Discharge***	1
MH Inpatient	1
Total	14
Gemma Services RTF	
TCM	3
FBMH	2
RTF	1
MH Inpatient	1
Other**	1
Total	8

Note: Providers with less than 5 records are excluded from this report.

Discharges with first follow-up level of care after 90 days are not shown on the report.

**A Member may be referred to more than one service and be counted more than once*

*** Other - levels of care other than the ones listed in the table.*

**** There were no claims within 90 days from discharge date.*

Measure 3: RTF by Diagnosis

This measure shows the diagnoses for Members who discharged from RTF, both plan-wide and by Provider. This information may be useful in identifying trends and in showing different diagnoses treated by RTF Providers. Note that a Member's diagnosis may change during the reporting period, and this measure shows Members' most recent primary diagnosis.

Report is based on PerformCare authorizations data.

Report reflects discharges from 1/1/22 through 12/31/22.

Goal

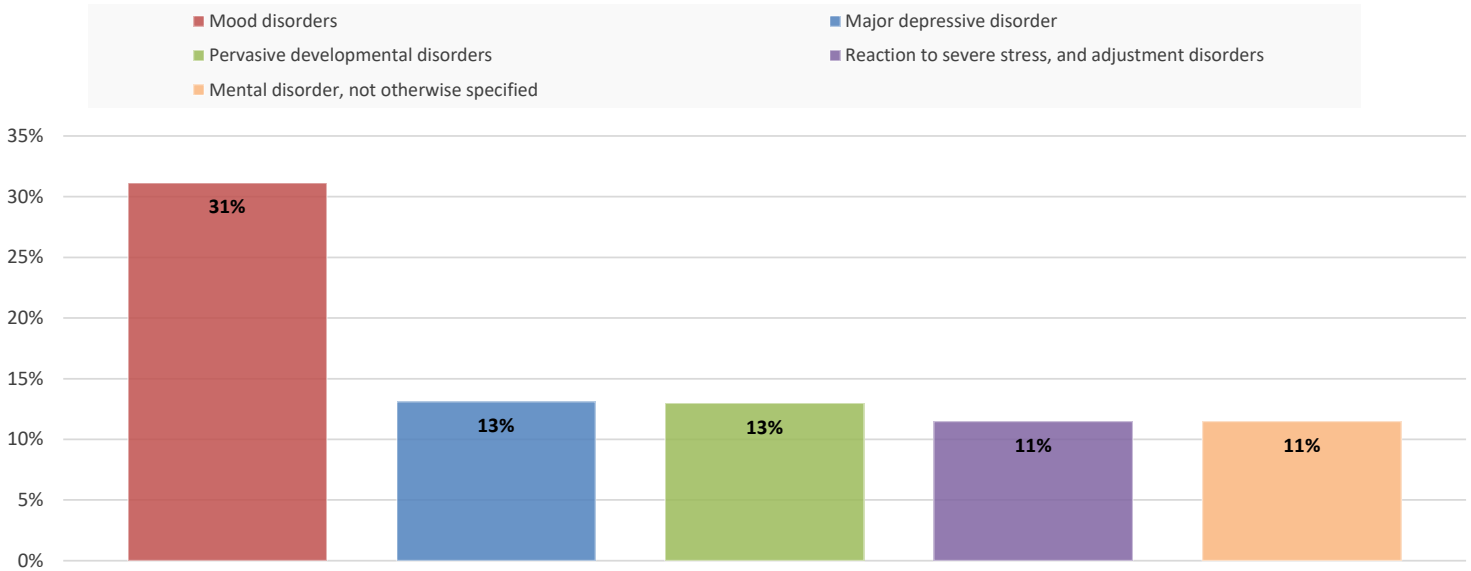
PerformCare is providing this measure for informational purposes.

Network Average

Plan-wide diagnosis breakdown data for Members in RTF with discharges counts and percentage of total in each diagnosis.

Plan-Wide Breakdown of Diagnosis in RTF Members

Top 5 Diagnoses (Members Discharged from RTF)



Diagnosis	Members	% of Total
Mood disorders	17	31%
Major depressive disorder	7	13%
Pervasive developmental disorders	7	13%
Reaction to severe stress, and adjustment disorders	6	11%
Mental disorder, not otherwise specified	6	11%
Conduct disorders	4	7%
Impulse disorders	3	5%
Attention-deficit hyperactivity disorders	3	5%
Schizophrenia/Psychosis	1	2%
Disorders of social functioning with onset specific to childhood and adolescence	1	2%
Total	55	100%

*Pervasive Developmental Disorders include ICD-10 diagnostic codes for Autistic Disorder, Asperger's Disorder, and Pervasive Developmental Disorder NOS (now collectively referred to in the DSM 5 as Autism Spectrum Disorder), as well as Rett's Syndrome, Other Childhood Disintegrative Disorder, and Other Pervasive Developmental Disorders.

Note: Providers with less than 5 records are excluded from this report.

Provider Breakdown

Diagnoses breakdown data for Members discharged from RTF by Provider

	Members	% of Total
Hoffman Homes, Inc. RTF		
Mood disorders	4	25%
Reaction to severe stress, and adjustment disorders	4	25%
Mental disorder, not otherwise specified	4	25%
Major depressive disorder	2	13%
Impulse disorders	1	6%
Pervasive developmental disorders	1	6%
Total	16	
Bradley Center, Inc RTF		
Mood disorders	5	36%
Major depressive disorder	2	14%
Disorders of social functioning with onset specific to childhood and adolescence	1	7%
Reaction to severe stress, and adjustment disorders	1	7%
Pervasive developmental disorders	1	7%
Impulse disorders	1	7%
Schizophrenia/Psychosis	1	7%
Attention-deficit hyperactivity disorders	1	7%
Conduct disorders	1	7%
Total	14	
Gemma Services RTF		
Attention-deficit hyperactivity disorders	2	33%
Mood disorders	1	17%
Pervasive developmental disorders	1	17%
Conduct disorders	1	17%
Mental disorder, not otherwise specified	1	17%
Total	6	

**Pervasive Developmental Disorders include ICD-10 diagnostic codes for Autistic Disorder, Asperger's Disorder, and Pervasive Developmental Disorder NOS (now collectively referred to in the DSM 5 as Autism Spectrum Disorder), as well as Rett's Syndrome, Other Childhood Disintegrative Disorder, and Other Pervasive Developmental Disorders.*

Note: Providers with less than 5 records are excluded from this report.

Measure 4: RTF by Age

This measure shows the distribution of age groups discharged from RTF Providers. The information is reported Plan-wide for overall RTF as well as by individual Provider. This information may be useful in identifying trends and in showing the distribution of age groups treated by RTF Providers.

Report is based on PerformCare authorizations data.

Report reflects Member age at end of reporting period, and all discharges from 1/1/22 through 12/31/22.

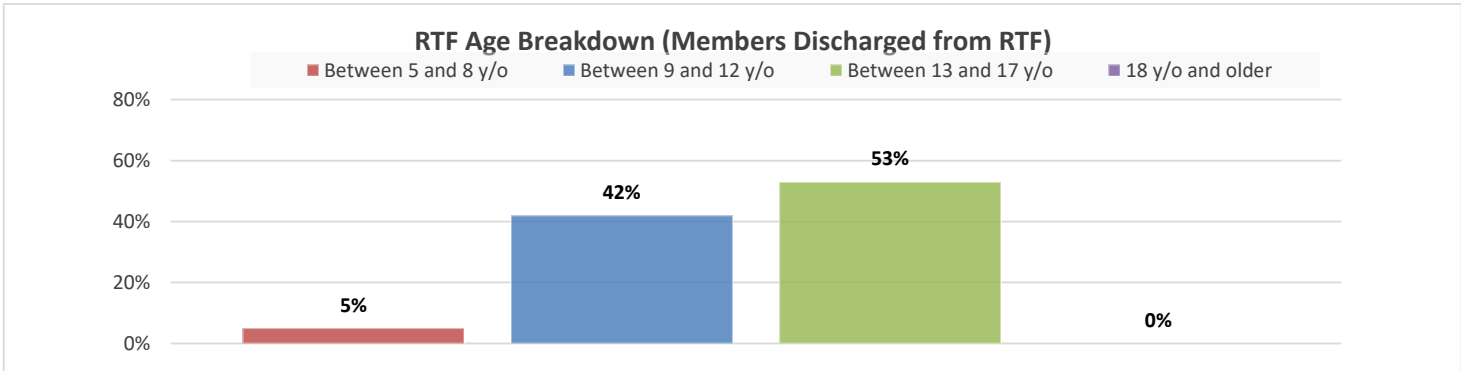
Goal

PerformCare is providing this measure for informational purposes.

Network Average

Plan-wide age breakdown data for Members discharged from RTF

Plan-Wide Breakdown of Age



	Members	% of Total
Between 5 and 8 y/o	3	5%
Between 9 and 12 y/o	23	42%
Between 13 and 17 y/o	29	53%
18 y/o and older	0	0%
Total	55	100%

Provider Breakdown

Age category breakdown data for Members discharged from RTF by Provider

	Members	% of Total
Hoffman Homes, Inc. RTF		
Between 9 and 12 y/o	6	38%
Between 13 and 17 y/o	9	56%
Between 5 and 8 y/o	1	6%
Total	16	
Bradley Center, Inc RTF		
Between 9 and 12 y/o	4	29%
Between 13 and 17 y/o	10	71%
Total	14	
Gemma Services RTF		
Between 9 and 12 y/o	5	83%
Between 5 and 8 y/o	1	17%
Total	6	

Note: Providers with less than 5 records are excluded from this report.

Measure 5: Utilization of RTF

This measure shows the average length of stay in RTF, and is based on unique Members that were discharged from RTF within the This measure shows the average length of stay in RTF, as well as the shortest and longest lengths of stay (length of stay range). This measure is based on unique Members who were discharged from RTF within the time frame of 1/1/22 -12/31/22. Plan-wide length of stay averages and length of stay ranges are shown by overall numbers, as well as by age group, diagnosis, and individual Provider. It is important to note that many factors—including the type of RTF and the needs of individuals served—may affect an RTF Provider’s average length of stay and length of stay range. This measure is provided for informational purposes only.

Goal

PerformCare is providing this measure for informational purposes.

Network Average

Plan-Wide	Members	Average LOS (Days)	LOS Range
RTF Overall Average LOS	55	330	35-721

By Age	Members	Average LOS (Days)	LOS Range
Between 13 and 17 y/o	29	289	35-480
Between 9 and 12 y/o	23	373	98-721
Between 5 and 8 y/o	3	390	274-549
18 y/o and older	0	0	0
Total	55	330	35-721

By Diagnosis*	Members	Average LOS (Days)	LOS Range
Pervasive developmental disorders	7	367	135-721
Mental disorder, not otherwise specified	6	389	275-533
Mood disorders	17	325	121-621
Major depressive disorder	7	291	83-396
Reaction to severe stress, and adjustment disorders	6	205	63-289

*Diagnoses with less than 5 records are not shown on the report.

Provider Breakdown

LOS breakdown data for Members discharged from RTF by Provider

By Provider	Members	Average LOS (Days)	LOS Range
Hoffman Homes, Inc. RTF	16	303	35-479
Bradley Center, Inc RTF	14	316	120-436
Gemma Services RTF	6	339	291-419

Note:

Providers with less than 5 records are excluded from this report.

Measure 6: Mental Health Inpatient Admission while in RTF

Goals of RTF services include addressing intensive treatment needs, ensuring the safety of the Member and others, increasing adaptive skills, and reducing unsafe behaviors which could lead to inpatient hospitalization. While there are many reasons that a Member may need mental health inpatient treatment, it is important to look at this rate for trends or outliers. This measure identifies the number of Members who required mental health inpatient admission while receiving services in an RTF level of care. Data for this measure identifies the number of Members who were discharged during the time frame of 1/1/22-12/31/22 and also had a mental health inpatient admission during their entire authorization for RTF.

Goal

PerformCare is providing this measure for informational purposes.

Network Average

Plan-Wide	Total Discharged Members	Members Admitted to MHIP	% Admitted to MHIP
MHIP admissions while in RTF	55	5	9%

Provider Breakdown

MHIP admissions while in RTF

	Discharged Members	Members Admitted to MHIP	% Admitted to MHIP
Gemma Services RTF	6	1	17%

Five RTF providers each had one Member admitted to MHIP; however, four of those providers had less than 5 discharged Members and were therefore excluded from this measure.

Note: Providers with less than 5 records are excluded from this report.

Third-Party Liability (TPL) may affect data in this measure. Data for MHIP funded by another source is not available to PerformCare, and would therefore be omitted in this measure.

Measure 7: Mental Health Inpatient Admission within 30 and 90 Days of RTF Discharge

RTF services address intensive treatment needs, with the ultimate goal of a safe discharge to a community setting and a less restrictive level of care. RTF services seek to stabilize unsafe behaviors and symptoms which could lead to an inpatient admission. While there are many reasons why a Member may need mental health inpatient treatment after discharging from an RTF, it is important to look at this rate for trends or outliers.

This measure reports on the percentage of Members who had an admission to a mental health inpatient facility within 30 days and within 90 days of discharge from RTF services. This measure is based on claims data for Members discharged from RTF between 1/1/22 and 12/31/22.

To calculate this rate, PerformCare uses the following:

- Numerator: Total number of Members admitted to mental health inpatient within 30 or 90 days of discharge from RTF.
- Denominator: Total number of Members discharged from RTF.

Goal

PerformCare is providing this measure for informational purposes.

Network Average

Plan-Wide	Total Discharged Members	MHIP Admission Within 30 Days	% MHIP Admission Within 30 Days
MHIP admissions within 30 days after RTF discharge	55	1	2%

Plan-Wide	Total Discharged Members	MHIP Admission Within 90 Days	% MHIP Admission Within 90 Days
MHIP admissions within 90 days after RTF discharge	55	3	5%

Provider Breakdown

MHIP admissions within 30 days after RTF discharge

	Discharged Members	Members Admitted to MHIP	% Admitted to MHIP
Bradley Center, Inc RTF	14	1	7%

MHIP admissions within 90 days after RTF discharge*

	Discharged Members	Members Admitted to MHIP	% Admitted to MHIP
Hoffman Homes RTF	16	1	6%
Bradley Center, Inc RTF**	14	1	7%

*Three RTF providers each had one Member admitted to MHIP within 90 days of discharge; however, one of those providers had less than 5 discharged Members and was therefore excluded from this measure.

**During the reporting period, Bradley Center had one Member who had an MHIP admission within 30 days after an RTF discharge. The same Member was counted in the 90-day data.

Note: Providers with less than 5 records are excluded from this report.

Third-Party Liability (TPL) may affect data in this measure. Data for MHIP funded by another source is not available to PerformCare, and would therefore be omitted in this measure.

Measure 8: Family Engagement

After a child is admitted to RTF services, the family’s participation, commitment, and involvement in their child’s care and treatment (family engagement) is vital in helping to support wellness and increase the likelihood of successful outcomes. In 2023, PerformCare sent a survey to all PerformCare Network RTF Providers to assess individual Provider efforts in supporting family engagement. The tables below contain Providers’ responses to survey questions regarding their family engagement practices. Please note that many factors—including the type of RTF and the needs of individuals served—may affect a Provider’s policies, practices, and answers to these survey questions. Network RTF Providers who did not respond to the survey are not included in the tables below.

Goal

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Family Engagement: Plan-Wide RTF Provider Survey Results

Total Number of Network Providers Responding to Survey: 16 (94%)

Survey Question:	Total Yes Responses	% Yes Responses
1. Prior to admission, families sign participation agreement which provides clear expectations of family/guardian involvement	11	68.8%
2. Provider offers family therapy on average:		
More than once a week	2	12.5%
Once a week	13	81.3%
Every 2 weeks	1	6.3%
Every month	1	6%
Every 2 months or less	0	0%
3. Provider offers family/guardian:		
In-person support groups	2	12.5%
Virtual support groups	2	12.5%
Both in-person and virtual support groups	0	0%
4. Provider offers family/guardian training for skills transfer	7	43.8%
5. Provider has process to strengthen family engagement/address obstacles	16	100%
6. Provider uses family members as specialists or advocates	6	37.5%
7. Average length of stay after admission before therapeutic leave ¹ occurs:		
Less than 1 month	0	0%
1 month	5	31.3%
2 months	4	25%
3 months or longer	7	43.8%
8. Provider creates goals for therapeutic leaves ¹	16	100%
9. Facility provides transportation assistance for:		
Family visits	11	68.6%
Family therapy	6	37.5%
Therapeutic leaves	15	93.8%
10. Provider has place for families to stay overnight when visiting their child	5	31.3%
11. Methods of communication offered for family therapy:		
In-person	16	100%
Telephone	16	100%
Video	16	100%
12. Methods of communication offered for family contact:		
In-person	16	100%
Telephone	16	100%
Video	15	94%

¹Therapeutic leave as defined in MA Bulletins 01-95-13 and 01-95-12

Family Engagement: Individual RTF Provider Survey Results (Abraxas through Foundations)								
Provider:	Abraxas I	Bradley Center	CHOR Youth & Family Reading	CHOR Youth & Family Edison Court	DTAC Coal Township	DTAC Danville	DTAC Lewisburg	Foundations
1. Prior to admission, families sign participation agreement which provides clear expectations of family/guardian involvement	X		X	X	X	X	X	X
2. Provider offers family therapy on average:								
More than once a week								X
Once a week	X	X	X		X	X	X	X
Every 2 weeks								
Every month				X				
Every 2 months or less								
3. Provider offers family/guardian:								
In-person support groups	X			X				
Virtual support groups								
Both in-person and virtual support groups								
4. Provider offers family/guardian training for skills transfer	X				X	X	X	X
5. Provider has a process to strengthen family engagement and address obstacles	X	X	X	X	X	X	X	X
6. Provider uses family members as specialists or advocates	X		X					
7. Average length of stay after admission before therapeutic leave occurs:								
Less than 1 month								
1 month			X					X
2 months		X						
3 months or longer	X			X	X	X	X	
8. Provider creates goals for therapeutic leaves	X	X	X	X	X	X	X	X
9. Facility provides transportation assistance for:								
Family visits	X		X	X	X	X	X	X
Family therapy					X	X	X	X
Therapeutic leaves	X	X	X	X	X	X	X	X
10. Provider has a place for families to stay overnight when visiting their child		X						X
11. Methods of communication offered for family therapy:								
In-person	X	X	X	X	X	X	X	X
Telephone	X	X	X	X	X	X	X	X
Video	X	X	X	X	X	X	X	X
12. Methods of communication offered for family contact:								
In-person	X	X	X	X	X	X	X	X
Telephone	X	X	X	X	X	X	X	X
Video	X	X		X	X	X	X	X

Provider Comments:

Abraxas:

Item 3: Abraxas did offer in-person support groups prior to the pandemic, and will begin again in 2023.

Foundations:

Item 2: For residents who cannot tolerate a 40-60 minute session, we do two family sessions per week.

Item 10: We provide one night at a local hotel, per month, per family to support in-person visits.

Family Engagement: Individual RTF Provider Survey Results (Gemma through Southwood)								
Provider:	Gemma Services	George Junior Republic (all PA locations)	Harborcreek Youth Services	Hoffman Homes for Youth	Perseus House (all locations)	Sarah A. Reed	Southwood Hospital Choices	Southwood Hospital-IDD/ASD
1. Prior to admission, families sign participation agreement which provides clear expectations of family/guardian involvement	X				X		X	X
2. Provider offers family therapy on average:								
More than once a week								X
Once a week	X		X	X	X	X	X	
Every 2 weeks		X						
Every month								
Every 2 months or less								
3. Provider offers family/guardian:								
In-person support groups								
Virtual support groups	X				X			
Both in-person and virtual support groups								
4. Provider offers family/guardian training for skills transfer	X				X			
5. Provider has a process to strengthen family engagement and address obstacles	X	X	X	X	X	X	X	X
6. Provider uses family members as specialists or advocates	X			X			X	X
7. Average length of stay after admission before therapeutic leave occurs:								
Less than 1 month								
1 month	X			X		X		
2 months					X		X	X
3 months or longer		X	X					
8. Provider creates goals for therapeutic leaves	X	X	X	X	X	X	X	X
9. Facility provides transportation assistance for:								
Family visits	X	X			X	X		
Family therapy	X	X						
Therapeutic leaves	X	X		X	X	X	X	X
10. Provider has a place for families to stay overnight when visiting their child		X		X		X		
11. Methods of communication offered for family therapy:								
In-person	X	X	X	X	X	X	X	X
Telephone	X	X	X	X	X	X	X	X
Video	X	X	X	X	X	X	X	X
12. Methods of communication offered for family contact:								
In-person	X	X	X	X	X	X	X	X
Telephone	X	X	X	X	X	X	X	X
Video	X	X	X	X	X	X	X	X

***Provider Comments:**

Gemma Services:

- Item 1: We use DBT contracts in our specialized unit.
- Item 4: We offer weekly DBT skills groups on our specialized unit.
- Item 6: We are in the process of hiring a Family Advocate Partner for the specialized unit.

George Junior Republic:

- Item 2: Treatment is individualized, family therapy can be offered more if needed.
- Item 10: We would connect with a local hotel.

Sarah A. Reed:

- Item 1: No- this is discussed with families prior to admission. Other managed care providers have the parent/guardian sign a Family Roles and Responsibilities form during the ISPT meeting.
- Item 4: No- during family sessions skills are practiced.
- Item 9: Yes- we provide transportation, for the Member, monthly with a designated location in Clearfield County to meet families.
- Item 10: Yes- we have local hotel that provides accommodations. Sarah Reed Children's Center will cover the cost once a month for the hotel stay.