



**APS Healthcare - Maine  
&  
The State of Maine  
Department of Health & Human Services**

**Maine Behavioral Health Data Forum**  
March 19, 2009



**Agenda**

- Introductions
- Purpose of the data forum
- Reasons for collecting and analyzing data
- Today's Focus: Children's services; two reports.
- Children's Home & Community Based Treatment Services (HCT) Outcome Report 2008
  - Overview
  - Detailed Report
- MaineCare-Funded Child Psychiatric Hospital Summary Report 2008
  - Overview
  - Detailed Report
- Upcoming Forums:
  - Thursday, June 18, 2009; 2-4pm
  - Thursday, September 17, 2009; 2-4pm



## Introductions: Data Forum Panel

- Dr. Jay Yoe, Director of Quality Assurance for DHHS
- Dr. Lindsey Tweed, Director of Clinical Practice and Policy for CBHS
- Eric Meyer, LCSW, MBA, Executive Director for APS Healthcare
- Patrick Caporino, RN, MBA, Quality Improvement Manager for APS Healthcare
- Eric Goodwater, Lead Report Writer for APS Healthcare



2

## Housekeeping Items

At the Conclusion of Today's Data Forum we would appreciate a few minutes of your time to send:

- An e-mail to Kathy Scott, our Office Manager at APS Healthcare, identifying the number in your party taking part in this Data Forum and if you are attending on your own behalf or who you are affiliated with.  
**kscott@apshealthcare.com**
- Your Feedback and Topics of Interest can be e-mailed to: Patrick Caporino, **pcaporino@apshealthcare.com**



3

## Purpose of the Data Forum

- Purpose of the Data Forum
  - Provide a forum for stakeholders to be actively involved in understanding and making use of the data collected as part of the Maine Behavioral Health ASO.
  - Promote regular dialogue to identify areas of the service system that can benefit from further analysis.
  - Discuss how data is analyzed and used for service delivery improvements throughout the state.
  - Improve services and inform decision making.
  - Ensure that data and information is effectively shared to do the most good.



4

## Reasons for Collecting and Analyzing Data

- Why we are collecting data:
  - To analyze the behavioral healthcare needs of the MaineCare members throughout the state.
  - To geographically identify where services are available to meet the needs of the people, and to identify areas where services are needed.
  - To evaluate clinical outcomes as a measure of the effectiveness of services authorized and delivered.
  - To provide useful information to DHHS on a regular basis that will quantify and qualify the care delivery decision making process.



5

## Reasons for Collecting and Analyzing Data

- To inform and guide program and system planning and decision making
- To assist with identifying the cost of care
- To monitor the utilization and quality of services, and the outcomes achieved across providers
- To allow for ongoing dialogue/discussion among stakeholders about 'what the data means', 'how the data helps us to understand' and 'how we can utilize the data to support improvements in the system'



6

## HCT Treatment Services Outcome Report 2008

- Data analysis of Home and Community Based Treatment (HCT) services authorized between Jan 1, 2008 and November 30, 2008.
- Only includes members who had both an admission and discharge CAFAS total youth score entered into APS Care Connection® during this time period.
- Population size = 506 children receiving HCT service who completed an admission and discharge CAFAS.



7

## HCT Treatment Services Outcome Report 2008

- Findings of this population (506):
  - Data summary of the population
    - 62% male
    - Average age = 12 (range 3-21 years old)
    - District 3 and 6 are the locations for over 40% of the children represented in this report.
    - ALOS 134 days (range 5 – 310 days)
  - How scores changed individually from admission to discharge.
  - Geographic landscape of participation in various areas of the State of Maine.
  - % improvement overall
  - Reasons HCT services were ended
  - Disposition at discharge
  - % score improvement: agency specific
  - % score improvement: per district
- Discussion/Questions?



## Child Psychiatric Hospital Summary Report 2008

- Analysis of MaineCare-funded Child Psychiatric Hospital services in 2008.
- 95% (1,247) of the MaineCare funded child psychiatric hospital services were provided by three hospitals: Spring Harbor, Acadia, and St. Mary's Hospital.
- Total population size = 1,315 children unduplicated.



## Child Psychiatric Hospital Summary Report 2008

### Report Sections:

- Characteristics of the children who received services
- Statewide distribution of service delivery
- A closer look at the hospitals
- Outcomes of treatment
- Discussion/Questions?



## Upcoming Data Forums

- E-mail attendance to: [kscott@apshealthcare.com](mailto:kscott@apshealthcare.com)
- E-mail feedback and topics of interest to [pcaporino@apshealthcare.com](mailto:pcaporino@apshealthcare.com)
- Upcoming Maine Behavioral Health Data Forums Scheduled:
  - Thursday, June 18, 2009, 2-4pm
  - Thursday, September 17, 2009 2-4pm





## APS Healthcare – Maine and The Department of Health and Human Services

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Thank You for Your  
Participation in Today's Data  
Forum

