

CMHSP Performance Indicator Trending Report

FY'20 - FY'22

updated December 2022



Indicator 1: ACCESS-TIMELINESS/INPATIENT SCREENING: The percentage of persons during the quarter receiving a pre-admission screening for psychiatric inpatient care for whom the disposition was completed within 3 hours. Standard = 95%

Rationale for Use: People who are experiencing symptoms serious enough to warrant evaluation for inpatient care are potentially at risk of danger to themselves or others. Thus, time is of the essence. This indicator assesses whether CMHSPs and PIHPs are meeting the Department's standard that 95% of the inpatient screenings have a final disposition within 3 hours. This indicator is a standard measure of access to care.

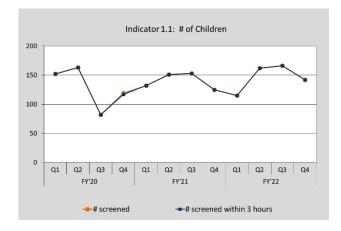
Indicator 1.1: Children

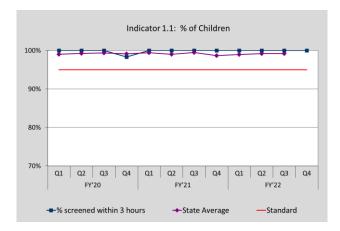
Indicator 1 2: Adulta

State Average

Standard

			FY'20					FY'21					FY'22		
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# screened	152	163	82	119	516	132	151	153	125	561	115	162	166	142	585
#screened within 3 hours	152	163	82	117	514	132	151	153	125	561	115	162	166	142	585
# not screened within 3 hours	0	0	0	2	2	0	0	0	0	0	0	0	0	0	0
% screened within 3 hours	100.00%	100.00%	100.00%			100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%		100.00%
State Average	99.02%	99.24%	99.34%	99 13%		99.43%	98.99%	99.46%	98.68%		98.94%	99.17%	99.18%		
Standard	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%





indicator 1.2: Addits															
			FY'20					FY'21					FY'22		
	Q1						Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# screened	592	639	575	642	2,448	586	521	586	595	2,288	527	545	586	646	2,304
#screened within 3 hours	591	638	574	642	2,445	586	520	586	595	2,287	527	545	585	646	2,303
# not screened within 3 hours	1	1	1	0	3	0	1	0	0	1	0	0	1	0	1
% screened within 3 hours	99.83%	99.84%	99.83%	100.00%	99.88%	100.00%	99.81%	100.00%	100.00%	99.96%	100.00%	100.00%	99.83%	100.00%	99.96%

99.18%

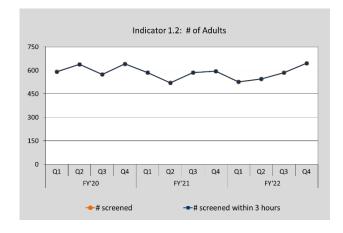
95%

99.01%

98.85%

95%

99.17%



99.00%

95%

98.73%

95%

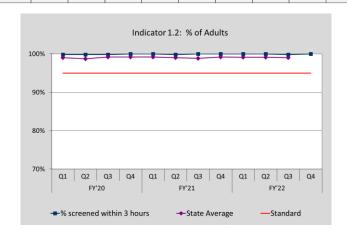
99.16%

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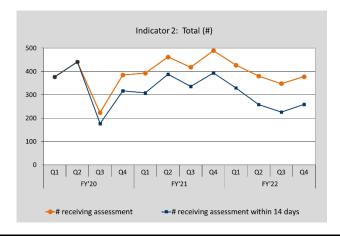
Indicator 2A* (new): ACCESS-TIMELINESS/FIRST REQUEST

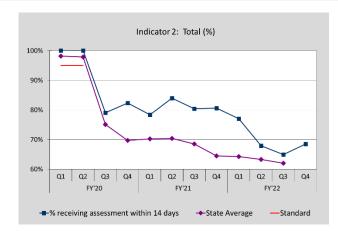
The percentage of new persons during the quarter receiving a face-to-face assessment with a professional within 14 calendar days of a non-emergency request for service. *Effective FY20Q3, MDHHS has removed all exception reasons. Standard = No standard for first year of implementation.

Rationale for Use: Quick, convenient entry into the public mental health system is a critical aspect of accessibility of services. Delays in clinical and psychological assessment may lead to exacerbation of symptoms and distress and poorer role functioning. The amount of time between a request for service and clinical assessment with a professional is one measure of access to care.

Indicator 2: Total

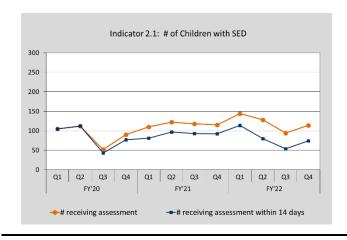
			FY'20					FY'21					FY'22		
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# receiving assessment	377	441	224	385	1,427	393	462	418	489	1,762	427	380	348	378	1,533
# receiving assessment within 14 days	377	441	177	317	1,312	308	388	336	394	1,426	329	258	226	259	1,072
# not receiving assessment within 14 days	0	0	47	68	115	85	74	82	95	336	98	144	122	119	483
% receiving assessment within 14 days	100.00%	100.00%	79.02%	82.34%	91.94%	78.37%	83.98%	80.38%	80.57%	80.93%	77.05%	67.89%	64.94%	68.52%	69.93%
State Average	98.13%	97.85%	75.10%	69.68%		70.22%	70.39%	68.53%	64.45%		64.21%	63.25%	62.02%		
Standard	95%	95%													

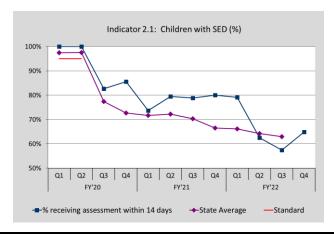




Indicator 2.1: Children with Serious Emotional Disturbances (SED)

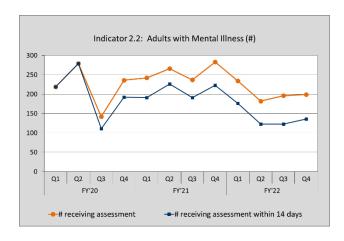
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			FY'20					FY'21					FY'22		
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
#receiving assessment	105	112	52	90	359	110	122	118	115	465	144	128	94	114	480
#receiving assessment within 14 days	105	112	43	77	337	81	97	93	92	363	114	80	54	74	322
# not receiving assessment within 14 days	0	0	9	13	22	29	25	25	23	102	30	48	40	40	158
% receiving assessment within 14 days	100.00%	100.00%	82.69%	85.56%	93.87%	73.64%	79.51%	78.81%	80.00%	78.06%	79.17%	62.50%	57.45%	64.91%	67.08%
State Average	97.48%	97.53%	77.40%	72.70%		71.72%	72.24%	70.36%	66.50%		66.19%	64.24%	62.99%		
Standard	95%	95%													

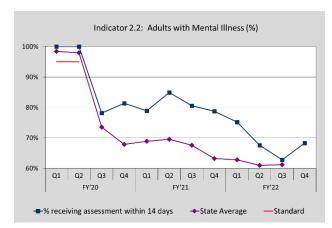




Indicator 2.2: Adults with Mental Illness (MI)

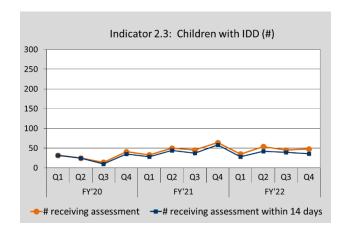
			FY'20					FY'21					FY'22		
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# receiving assessment	219	279	142	236	876	242	266	237	283	1,028	234	182	196	199	811
# receiving assessment within 14 days	219	279	111	192	801	191	226	191	223	831	176	123	123	136	558
# not receiving assessment within 14 days	0	0	31	44	75	51	40	46	60	197	58	59	73	63	253
% receiving assessment within 14 days	100.00%	100.00%	78.17%	81.36%	91.44%	78.93%	84.96%	80.59%	78.80%	80.84%	75.21%	67.58%	62.76%	68.34%	68.80%
State Average	98.47%	97.97%	73.55%				69.51%				62.81%				
Standard	95%	95%													

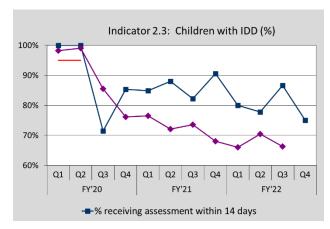




Indicator 2.3: Children with Intellectual and Developmental Disabilities (IDD)

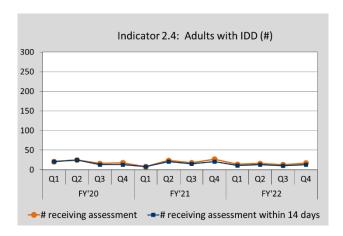
			FY'20					FY'21					FY'22		
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
receiving assessment	32	25	14	41	112	33	50	45	64	192	35	54	45	48	182
receiving assessment within 14 days	32	25	10	35	102	28	44	37	58	167	28	42	39	36	145
not receiving assessment within 14 days	0	0	4	6	10	5	6	8	6	25	7	12	6	12	37
receiving assessment within 14 days	100.00%	100.00%	71.43%	85.37%		84.85%	88.00%	82.22%	90.63%	86.98%	80.00%	77.78%	86.67%		79.67%
tate Average	98.18%	99.01%	85.50%	76.12%		76.47%	72.10%	73.62%	68.05%		66.03%	70.49%	66.34%		
tandard	95%	95%													

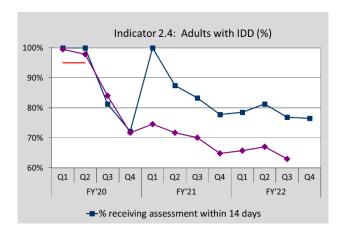




Indicator 2.4: Adults with Intellectual and Developmental Disabilities (IDD)

			FY'20					FY'21					FY'22		
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
receiving assessment	21	25	16	18	80	8	24	18	27	77	14	16	13	17	60
receiving assessment within 14 days	21	25	13	13	72	8	21	15	21	65	11	13	10	13	47
not receiving assessment within 14 days	0	0	3	5	8	0	3	3	6	12	3	3	3	4	13
receiving assessment within 14 days	100.00%	100.00%	81.25%			100.00%	87.50%	83.33%	77.78%	84.42%	78.57%	81.25%	76.92%		78.33%
tate Average	99.55%	97.82%	84.03%	71.75%		74.55%	71.72%	70.11%	64.88%		65.77%	67.05%	63.02%		
tandard	95%	95%													





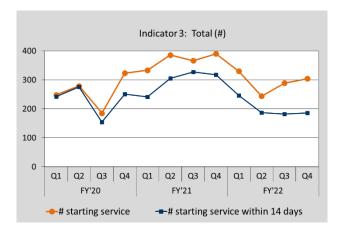
Indicator 3* (new): ACCESS-TIMELINESS/FIRST SERVICE

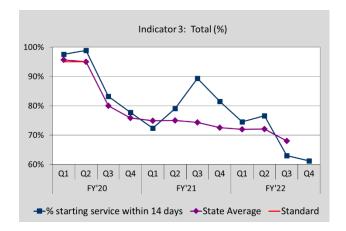
Percentage of new persons during the quarter starting any needed on-going service within 14 days of a non-emergent face-to-face assessment with a professional. *Effective FY20Q3, MDHHS has removed all exception reasons. Standard = No standard for first year of implementation.

Rationale for Use: The amount of time between professional assessment and the delivery of needed treatments and supports addresses a different aspect of access to care than Indicator #2. Delay in the delivery of needed services and supports may lead to exacerbation of symptoms and distress and poorer role functioning.

Indicator 3: Total

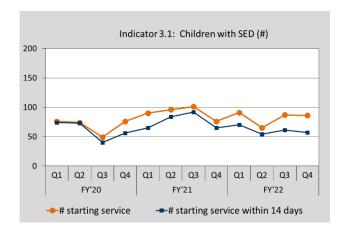
			FY'20					FY'21					FY'22		
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# starting service	248	279	185	323	1,035	333	386	366	390	1,475	330	244	289	304	1,167
# starting service within 14 days	242	276	154	251	923	241	305	327	318	1,191	246	187	182	186	801
# not starting service within 14 days	6	3	31	72	112	92	81	36	72	281	84	57	107	118	366
% starting service within 14 days	97.58%	98.92%	83.24%		89.18%	72.37%	79.02%	89.34%	81.54%	80.75%	74.55%	76.64%	62.98%		68.64%
State Average	95.64%	95.02%	79.97%	75.82%		74.94%	75.02%	74.34%	72.51%		71.97%	72.08%	68.01%		
Standard	95%	95%													

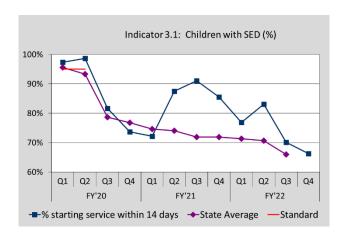




Indicator 3.1: Children with Serious Emotional Disturbances (SED)

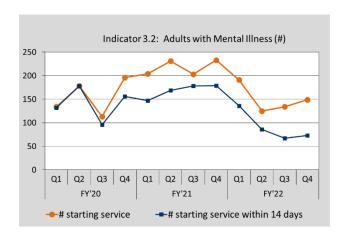
			FY'20					FY'21					FY'22		
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
#starting service	76	74	49	76	275	90	96	101	76	363	91	65	87	86	329
#starting service within 14 days	74	73	40	56	243	65	84	92	65	306	70	54	61	57	242
# not starting service within 14 days	2	1	9	20	32	25	12	9	11	57	21	11	26	29	87
% starting service within 14 days	97.37%	98.65%	81.63%	73.68%	88.36%	72.22%	87.50%	91.09%	85.53%	84.30%	76.92%	83.08%	70.11%	66.28%	73.56%
State Average	95.60%	93.29%	78.66%	76.81%		74.63%	74.11%	71.93%	71.89%		71.37%	70.67%	65.95%		
Standard	95%	95%													

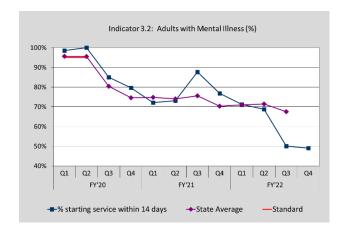




Indicator 3.2: Adults with Mental Illness (MI)

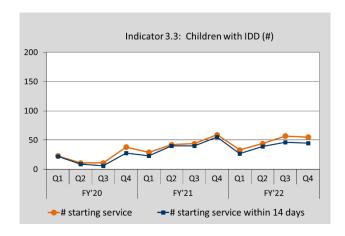
			FY'20					FY'21					FY'22		
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# starting service	134	178	113	196	621	204	231	203	233	871	191	125	134	149	599
# starting service within 14 days	132	178	96	156	562	147	169	178	179	673	136	86	67	73	362
# not starting service within 14 days	2	0	17	40	59	57	62	25	54	198	55	39	67	76	237
% starting service within 14 days	98.51%	100.00%	84.96%	79.59%	90.50%	72.06%	73.16%	87.68%	76.82%	77.27%	71.20%	68.80%	50.00%	48.99%	60.43%
State Average	95.68%	95.50%	80.45%	74.54%		74.85%	73.98%	75.57%	70.35%		71.03%	71.44%	67.53%		
Standard	95%	95%													

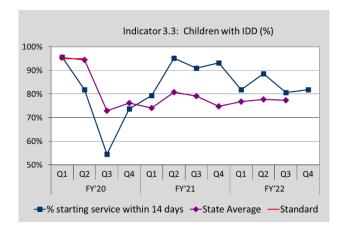




Indicator 3.3: Children with Intellectual and Developmental Disabilities (IDD)

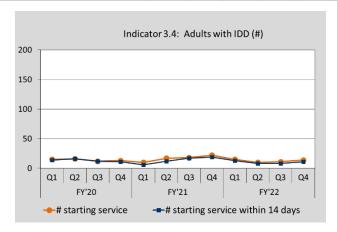
maicator 5.5. Cimarch With mitche	ctuu. u.i.	u DC 1 C.1	Pincinc			-,									
			FY'20					FY'21					FY'22		
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# starting service	23	11	11	38	83	29	42	44	59	174	33	44	57	55	189
#starting service within 14 days	22	9	6	28	65	23	40	40	55	158	27	39	46	45	157
# not starting service within 14 days	1	2	5	10	18	6	2	4	4	16	6	5	11	10	32
% starting service within 14 days	95.65%	81.82%	54.55%	73.68%	78.31%	79.31%	95.24%	90.91%	93.22%	90.80%	81.82%	88.64%	80.70%		83.07%
State Average	95.38%	94.52%	72.90%	76.16%		74.08%	80.82%	79.10%	74.79%		76.75%	77.72%	77.33%		
Standard	95%	95%													

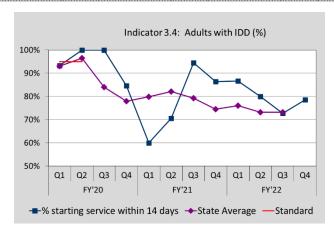




Indicator 3.4: Adults with Intellectual and Developmental Disabilities (IDD)

			FY'20					FY'21			FY'22					
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	
# starting service	15	16	12	13	56	10	17	18	22	67	15	10	11	14	50	
# starting service within 14 days	14	16	12	11	53	6	12	17	19	54	13	8	8	11	40	
# not starting service within 14 days	1	0	0	2	3	4	5	1	3	13	2	2	3	3	10	
% starting service within 14 days	93.33%	100.00%	100.00%	84.62%	94.64%	60.00%	70.59%	94.44%	86.36%	80.60%	86.67%	80.00%	72.73%	78.57%	80.00%	
State Average	93.05%	96.46%	84.04%	78.00%		79.89%	82.08%	79.28%	74.48%		76.03%	73.18%	73.22%			
Standard	95%	95%														





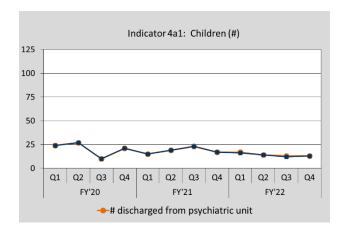
Indicator 4a: ACCESS-CONTINUITY OF CARE

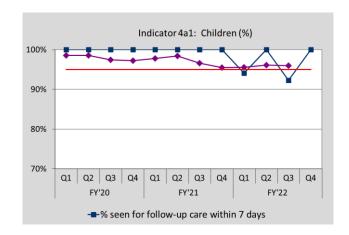
The percentage of discharges from a psychiatric inpatient unit during the quarter that were seen for follow-up care within 7 days. Standard = 95%

Rationale for Use: When responsibility for the care of an individual shifts from one organization to another, it is important that services remain relatively uninterrupted and continuous. Otherwise, the quality of care and consumer outcomes may suffer. This is an indicator required by the federal Substance Abuse and Mental Health Services Administration.

Indicator 4a1: Children

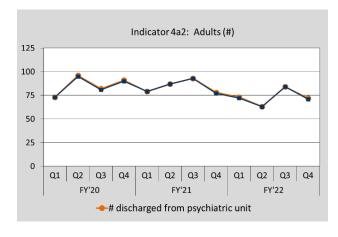
			FY'20					FY'21			FY'22					
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	
# discharged from psychiatric unit	24	27	10	21	82	15	19	23	17	74	17	14	13	13	57	
# seen for follow-up care within 7 days	24	27	10	21	82	15	19	23	17	74	16	14	12	13	55	
# not seen for follow-up care within 7 days	0	0	0	0	0	0	0	0	0	0	1	0	1	0	2	
% seen for follow-up care within 7 days	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	94.12%	100.00%	92.31%	100.00%	96.49%	
State Average	98.55%	98.58%	97.40%	97.23%		97.80%	98.42%	96.60%	95.49%		95.53%	96.11%	95.94%			
Standard	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	

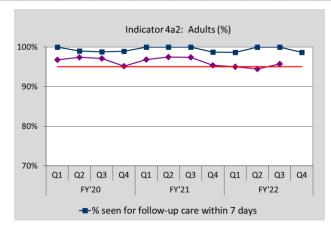




Indicator 4a2: Adults

			FY'20					FY'21			FY'22					
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	
# discharged from psychiatric unit	73	96	82	91	342	79	87	93	78	337	73	63	84	72	292	
# seen for follow-up care within 7 days	73	95	81	90	339	79	87	93	77	336	72	63	84	71	290	
# not seen for follow-up care within 7 days	0	1	1	1	3	0	0	0	1	1	1	0	0	1	2	
% seen for follow-up care within 7 days	100.00%	98.96%	98.78%	98.90%	99.12%	100.00%	100.00%	100.00%			98.63%	100.00%	100.00%		99.32%	
State Average	96.73%	97.39%	97.11%	95.19%		96.82%	97.48%	97.38%	95.33%		95.00%	94.47%	95.69%			
Standard	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	



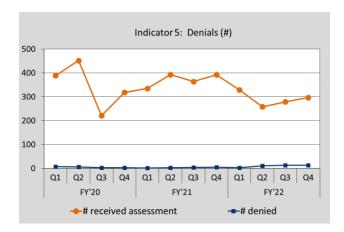


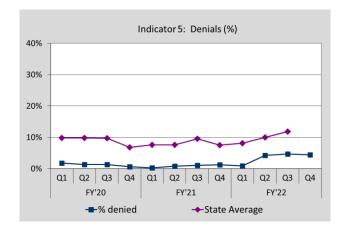
Indicator 5: ACCESS-DENIALS

Percentage of face-to-face assessments with professionals during the quarter that result in denials.

Rationale for Use: As managed care organizations, CMHSPs are responsible for exercising appropriate control of entry into the public mental health system. The professional assessment represents one of the first opportunities for a CMHSP to control access to its non-emergent services and supports.

Indicator 5																
	FY'20							FY'21			FY'22					
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	
# received assessment	389	452	221	318	1,380	335	393	364	392	1,484	329	258	279	297	1,163	
# denied	7	6	3	2	18	1	3	4	5	13	3	11	13	13	40	
% denied	1.80%	1.33%	1.36%	0.63%	1.30%	0.30%	0.76%	1.10%	1.28%	0.88%	0.91%	4.26%	4.66%	4.38%	3.44%	
State Average	9.78%	9.79%	9.75%	6.78%		7.56%	7.61%	9.57%	7.53%		8.11%	10.02%	11.84%			



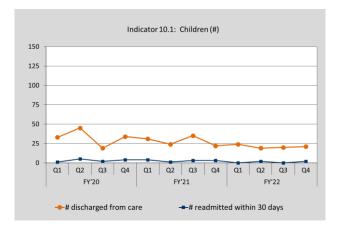


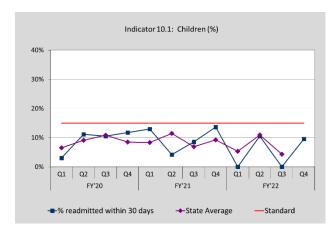
Indicator 10: OUTCOME: INPATIENT RECIDIVISM

The percentage of readmissions of children and adults during the quarter to an inpatient psychiatric unit within 30 days of discharge. Standard = 15% or less

Rationale for Use: For some people with mental illness, the occasional use of psychiatric inpatient care is essential. However, rapid readmission following discharge may suggest that people were prematurely discharged or that the post discharge follow-up was not timely or sufficient. This indicator assessed whether CMHSPs are meeting the Department's standard of no more than 15 percent of people discharged from inpatient units are being readmitted within 30 days.

Indicator 10.1: Children																
	FY'20							FY'21			FY'22					
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	
# discharged from care	33	45	19	34	131	31	24	35	22	112	24	19	20	21	84	
#readmitted within 30 days	1	5	2	4	12	4	1	3	3	11	0	2	0	2	4	
% readmitted within 30 days	3.03%	11.11%	10.53%	11.76%	9.16%	12.90%	4.17%	8.57%	13.64%	9.82%	0.00%	10.53%	0.00%	9.52%	4.76%	
State Average	6.48%	9.08%	10.82%	8.47%		8.30%	11.40%	6.89%	9.21%		5.28%	10.93%	4.33%			
Standard	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	





Indicator 10.2: Adults																
	FY'20							FY'21			FY'22					
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	
# discharged from care	111	151	133	130	525	141	112	133	130	516	114	110	142	131	497	
#readmitted within 30 days	13	15	15	17	60	15	16	15	12	58	6	10	16	14	46	
% readmitted within 30 days	11.71%	9.93%	11.28%	13.08%		10.64%	14.29%	11.28%	9.23%	11.24%	5.26%	9.09%	11.27%	10.69%	9.26%	
State Average	9.99%	11.57%	13.02%	11.43%		13.34%	13.78%	10.84%	12.69%		8.83%	12.15%	10.08%			
Standard	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	

