Defining a Cohort of Public Mental Health System (PMHS) Adult Consumers at Risk for Challenges to Continuity of Care

In medicine, high emergency room utilization and high inpatient utilization are two measures used as indicators of challenges in the coordination of care. This Data Short examines these measures for FY 2012 among adults in Maryland’s Public Mental Health System (PMHS). Data for this analysis is limited to those whose Medical Assistance (MA) eligibility includes inpatient and emergency room benefits. Consequently, Medicare beneficiaries and individuals who are eligible for MA through the Primary Care for Adults waiver are excluded.

The table and first graph analyze adult PMHS emergency room utilization by numbers of visits during FY 2012. The overwhelming majority (7,656, or 71.2%) of consumers using emergency room services did so only once during the year. Conversely, 413 (3.8%) consumers used six or more emergency room visits during the year. As a group, these consumers used 4,448 emergency room visits, almost 25% of all adult emergency room PMHS visits. For purposes of this analysis, the 413 consumers using six or more visits were selected as a group likely to be at risk for challenges in continuity of care.

As noted above, expenditure for inpatient services is another very good measure for identifying individuals at risk. The second graph shows inpatient expenditures by categories of amount spent. The group in the lowest 20% of all inpatient expenditures incurred $9,179 or less in inpatient expenditures during the year. This group includes 3,942 individuals or 57.5% of all consumers who used inpatient services in FY 2012. The group with the highest 20% of all inpatient expenditures in the PMHS includes everyone whose annual PMHS inpatient expenditures exceed $69,900 during the year. There were 175 individuals (2.6% of all consumers using inpatient services during the year) included in this category. The 175 people in the highest expenditure category were identified as those most likely to be at risk for challenges in care continuity.

Of the 588 (413 + 175) adults identified through these two analyses as being at high risk for challenges in care continuity, 85 individuals appear on both lists. Removing these duplicates reduces the number of individuals at risk to 503, less than 1% of the more than 80,000 adults with MA eligibility served in the PMHS. By defining a group of individuals at risk for challenges to continuity of care, characteristics of these individuals can be analyzed, their needs identified, and targeted strategies to improve care can be developed.

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