



Mental Health Expenditure and Service Utilization Report (MHEASURE) July 15, 2014

Overview

The mission of the District of Columbia Department of Behavioral Health (DBH) is to develop, manage and oversee a public mental health system for adults, children and youth and their families that is consumer driven, community based, culturally competent and supports prevention, resiliency and recovery and the overall well-being of the District citizens. The DBH serves children and youth with a diagnosis of severe emotional disturbance (SED) and adults with severe mental illness. District residents who meet the enrollment criteria are eligible to receive the full range of mental health services and supports.

DBH provides an array of mental health services and supports through a Mental Health Rehabilitation Options (MHRS). This includes: (1) Diagnostic and Assessment, (2) Medication/Somatic Treatment, (3) Counseling, (4) Community Support, (5) Crisis/Emergency, (6) Rehabilitation/Day Services, (7) Intensive Day Treatment, (8) Community Based Intervention, (9) Assertive Community Treatment, (10) Transition Support Services. In addition, there are a variety of evidence-based services and promising practices. This includes wraparound support, trauma-informed care, school mental health services, early childhood services, suicide prevention, forensic services and Supported Employment.

The Mental Health Expenditure and Service Utilization (MHEASURE) Report provides a summary of key agency measures related to service cost, utilization and access to the public mental health system. Specifically, the following information is contained within this document:

- Enrollment data is presented in *Figures 1 and 2-Consumers Enrolled and Served*;
- The number of consumers served is shown in *Figure 3 and 4- Consumer Count by Age Group and Funding Source*;
- Service utilization by race and gender is presented in *Figures 5a, 5b, 5c* and;
- Cost and utilization data based upon claims expenditures for Fiscal Year 2008 - Fiscal Year 2014 is presented in *Figures 6-11*; and the



Percent of adult consumers with Serious Mental Illness (SMI) and children and youth with Serious Emotional Disturbance (SED) served within the public mental health system is presented in figures 12 and 13.

Reports are published January 15th and July 15th of each fiscal year.

Limitation of the Report

- 1. Findings are based solely on the public mental health system's claims data.** Individuals receiving care receive a wider array of services than what is reflected through DBH claims data. Many of these services are delivered through other arrangements. For example, approximately seventy percent of all Medicaid recipients are enrolled in a managed care plan, through which they may receive mental health or behavioral health services outside of the public mental health system. Individuals who are not enrolled in managed care may also access other mental health or behavioral health services delivered through non-MHRS providers such as independent psychiatrists which would also not be captured in the public mental health claims data set.
- 2. Only those services that are paid through claims are included in the data set of information summarized for this report.** DBH provides a robust array of contracted services that are supported with local dollars that enhance the quality of care provided to individuals with mental illness and their families. This includes prevention and intervention services provided through school-based mental health, homeless outreach services, early childhood services, wrap-around support, forensic services, housing, and suicide prevention services.



Two of the evidence-based practices offered within the children and youth system of care are included in the counseling utilization count so report does not reflect the utilization of each these specialized services individually. Within this report, the data shown for counseling includes the utilization of Trauma Focused Cognitive Behavior Therapy (TF-CBT), Child Parent Psychotherapy for Family Violence (CPP-FV) and MHRS Counseling.

Summary of Findings

The Department of Behavioral Health continues to develop a robust array of services to meet the mental health service needs of the people receiving care. Findings based upon the current analysis of data shows

- **The Department of Mental Health served a total of 23,099 consumers in Fiscal Year 2013.** This represents a 1% (one) increase in FY 13. This includes 4,181 children/youth and 18,918 adults.
- **The majority of the individuals served within the public mental health system continue to be African American.** As of FY 2014, 90.8% of the population as African American; 5% as White and 2.3% as Hispanic. There is also a small number of American Indian/Alaskan Natives and Asian Americans receiving services, which comprises 3.4% of the total population served.

The system continues to serve approximately the same proportion of males and females. For FY 2014 YTD 10,270 (51.5%) are male and 9,643 (48.4%) are female.

The majority of adults served have a diagnosis of severe mental illness (SMI), and the majority of children and youth served have a diagnosis of severe emotional disturbance (SED). The most prevalent diagnoses of adults receiving services in FY continue to be mood disorders, schizophrenic disorders, and bipolar disorders. The most prevalent diagnoses of children and youth served during the same period are mood disorders, attention deficit disorders, and adjustment disorders.



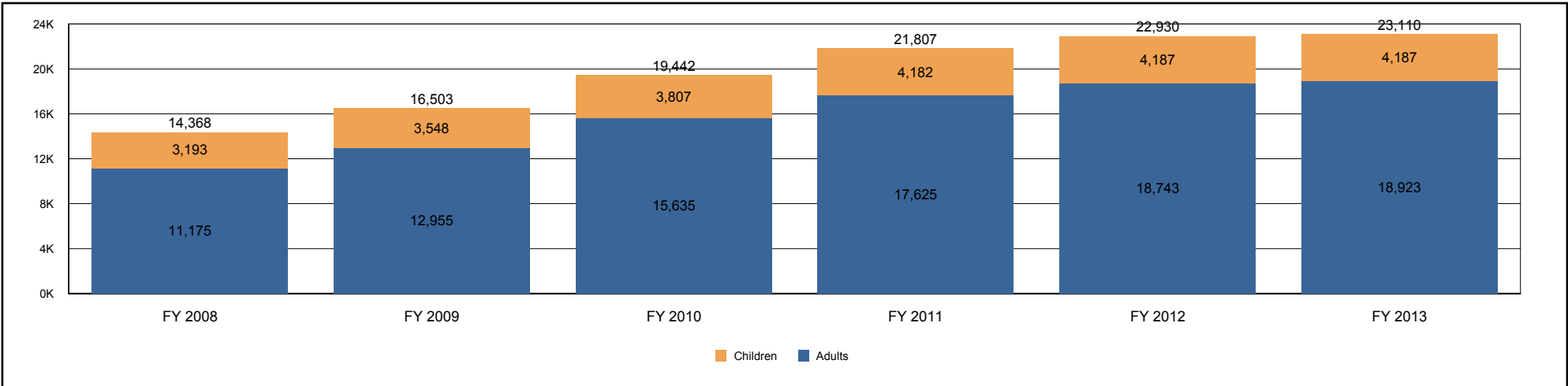
For FY 2014 Mental health services provided to the majority of individuals served within the public mental health system were funded through Medicaid (89%) rather than with local dollars. As of August 1, 2012, DBH implemented the requirements of the Mental Health Services Eligibility Act. This provided Medicaid to children at 300% off the Federal Poverty Level (FPL) and adults at 200% off the FPL.

The total expenditure for mental health services rose in FY 2013 when compared to those in FY 2012. This includes both MHRS services and additional services such as jail diversion, supported employment, crisis beds and integrated care coordination which are funded through State dollar allocation.

- The two highest cost drivers within the system are intensive community based services (Assertive Community Treatment, Community Based Intervention, Multisystemic Therapy and Functional Family Therapy) and crisis emergency services. The annual cost per consumer for those receiving intensive community based services is five times that of those receiving community support, medication management and counseling services.



Figure 1 - Consumers Served by the Department of Behavioral Health



Children (Age 0-17)

11% Increase from 2008 to 2009
 7% Increase from 2009 to 2010
 10% Increase from 2010 to 2011
 0% Decrease from 2011 to 2012
 0% Decrease from 2012 to 2013

Adults (Age 18+)

16% Increase from 2008 to 2009
 21% Increase from 2009 to 2010
 13% Increase from 2010 to 2011
 6% Increase from 2011 to 2012
 1% Increase from 2012 to 2013

Children & Adults Combined

15% Increase from 2008 to 2009
 18% Increase from 2009 to 2010
 12% Increase from 2010 to 2011
 5% Increase from 2011 to 2012
 1% Increase from 2012 to 2013

Figure 1. displays the total number of consumers who received mental health services from Fiscal Year 2008 to Fiscal Year 2013. Each number represents an individual consumer who received at least one service within the public mental health system during the specified timeframe



Figure 2 - Consumers Enrolled and Served by the Department of Behavioral Health

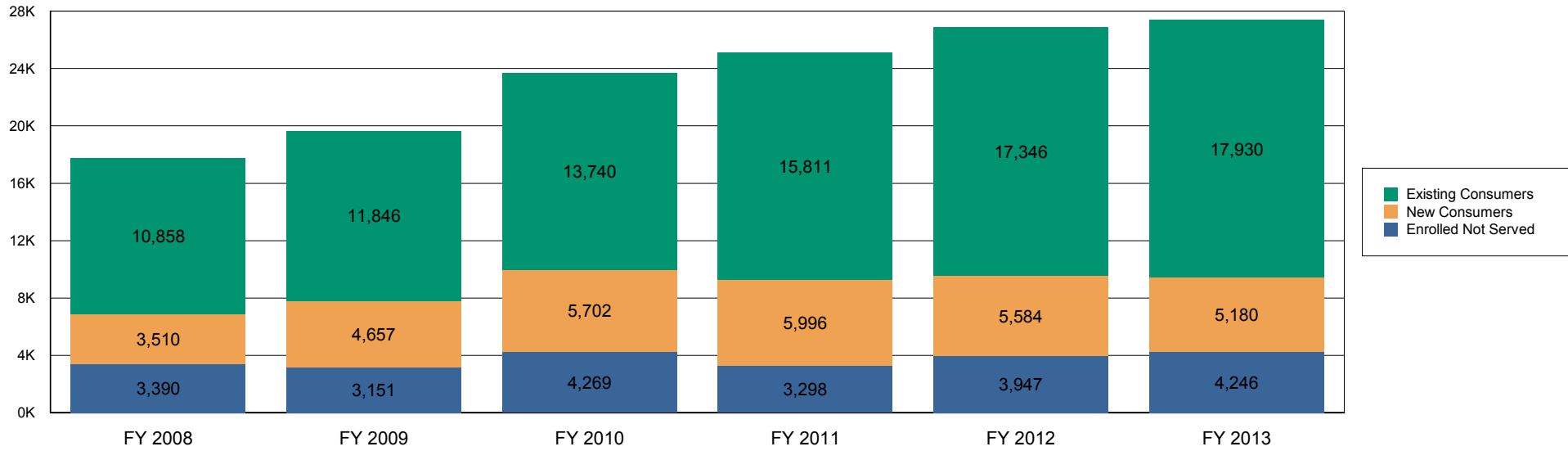


Figure 2. displays the number of consumers which are either 1) consumers that were enrolled prior to this reporting period (Existing Consumers), 2) new to the public mental health system (New Consumers), and 3) consumers that are enrolled but have not received a service during this reporting period (Enrolled Not Served). For the purposes of this report enrollment is defined as linkage to a provider in the public mental health system

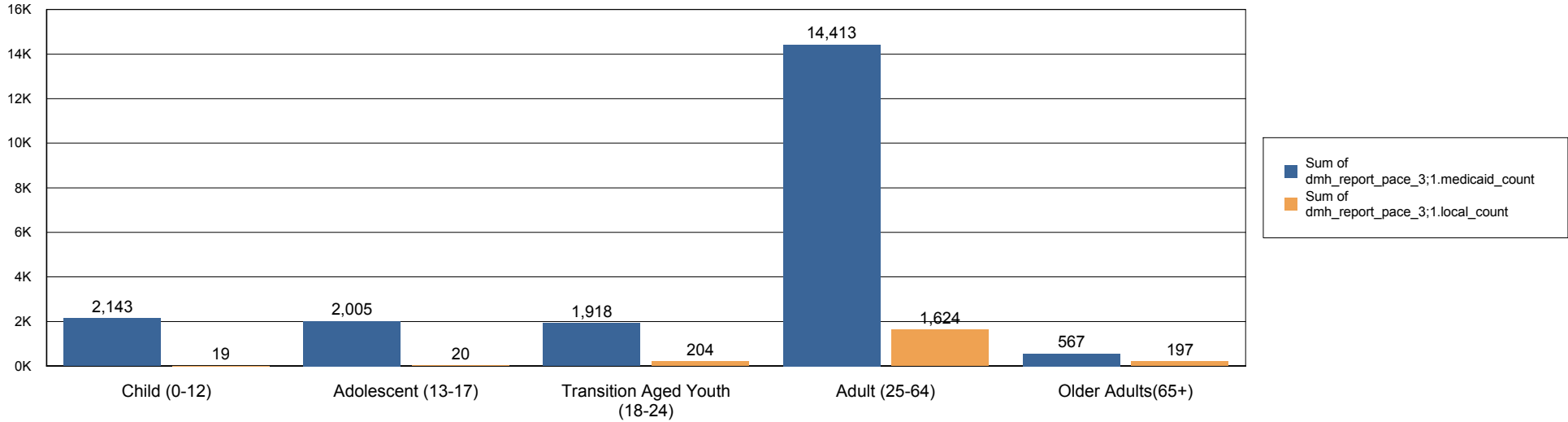


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Figure 3 & 4 - Consumer Count by Age Group and Funding Source - FY 2013

Age Group	Medicaid		Locally Funded	
	Count	Percentage	Count	Percentage
Child (0-12)	2,143	99.1%	19	0.9%
Adolescent (13-17)	2,005	99.0%	20	1.0%
Transition Aged Youth (18-24)	1,918	90.4%	204	9.6%
Adult (25-64)	14,413	89.9%	1,624	10.1%
Older Adults(65+)	567	74.2%	197	25.8%
Total	21,046	91.1%	2,064	8.9%



Figures 3 & 4 display a count of consumers served by age group (see above) and outlines if the services received were funded by Local and or Medicaid Dollars



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Figure 5a - FY 2013 YTD (10/01/2012 - 09/30/2013) Utilization of Mental Health Services by Age

Service	Child Utilization			YTD Child Total	Adult Utilization					YTD Adult Total	YTD Child & Adult Total	Avg YTD Cost Per Consumer	YTD Paid Amount	Avg YTD 15 Min Increment
	Age (0-5)	Age (6-13)	Age (14-17)		Age (18-24)	Age (25-44)	Age (45-64)	Age (65-84)	Age (85+)					
ACT	0	0	5	5	88	455	894	83	2	1,522	1,527	\$8,309.75	\$12,688,992.90	358.10
Group	0	0	0	0	10	98	229	8	0	345	345	\$744.86	\$256,975.57	89.29
Individual	0	0	5	5	88	455	894	83	2	1,522	1,527	\$8,141.47	\$12,432,017.33	337.93
CBI	14	431	565	1,010	60	0	0	0	0	60	1,070	\$6,949.39	\$7,435,849.14	246.42
Level I - MST	0	64	66	130	0	0	0	0	0	0	130	\$8,882.87	\$1,154,773.62	219.52
Level II & III - 90/180 Day Auth	14	293	406	713	51	0	0	0	0	51	764	\$6,626.46	\$5,062,611.64	278.45
Level IV - FFT	0	104	141	245	9	0	0	0	0	9	254	\$4,797.10	\$1,218,463.88	88.18
Community Support	135	2,070	1,365	3,570	1,689	5,745	7,971	578	20	16,003	19,573	\$1,840.00	\$36,014,321.72	131.03
Group Home	0	0	0	0	3	17	84	24	4	132	132	\$2,115.26	\$279,214.17	149.17
Group Setting	5	187	66	258	69	435	777	31	3	1,315	1,573	\$467.81	\$735,869.48	67.65
Ind - Collateral Contact	45	866	559	1,470	178	365	658	99	3	1,303	2,773	\$236.40	\$655,538.17	16.20
Ind - Face to Face	110	1,904	1,250	3,264	1,633	5,577	7,841	567	20	15,638	18,902	\$1,735.56	\$32,805,517.84	121.08
Ind - Family/Couple w/Consumer	71	1,176	707	1,954	170	321	273	26	1	791	2,745	\$344.16	\$944,706.57	24.16
Ind - Family/Couple w/o Consumer	36	839	486	1,361	97	79	99	9	1	285	1,646	\$268.68	\$442,242.45	18.80
Physician Team Member	4	33	31	68	57	317	667	68	2	1,111	1,179	\$123.20	\$145,249.11	6.42
Self Help/Peer Support - Group	0	0	0	0	0	1	1	1	0	3	3	\$23.12	\$69.36	2.67
Self Help/Peer Support - Ind	0	0	1	1	2	3	19	2	0	26	27	\$219.06	\$5,914.57	11.67
Counseling	56	571	310	937	208	1,011	1,313	85	0	2,617	3,554	\$747.12	\$2,655,264.14	51.39
Family w/Consumer	12	13	11	36	1	3	1	1	0	6	42	\$239.32	\$10,051.26	17.07
Group	3	41	13	57	12	188	370	32	0	602	659	\$409.19	\$269,656.73	48.49
Individual, Adult	3	78	37	118	131	929	1,117	56	0	2,233	2,351	\$443.48	\$1,042,621.23	29.54
Individual, Child/Adol	36	378	222	636	64	17	12	1	0	94	730	\$586.28	\$427,982.77	38.37
Offsite	15	342	165	522	40	24	95	29	0	188	710	\$1,247.29	\$885,577.34	71.96
Without Consumer	7	30	9	46	0	1	1	0	0	2	48	\$403.64	\$19,374.82	29.31
Crisis Services	8	274	162	444	477	1,190	1,126	139	5	2,937	3,381	\$2,969.41	\$10,039,580.12	85.13



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Figure 5a - FY 2013 YTD (10/01/2012 - 09/30/2013) Utilization of Mental Health Services by Age

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	Age (0-5)	Age (6-13)	Age (14-17)		Age (18-24)	Age (25-44)	Age (45-64)	Age (65-84)	Age (85+)					
Crisis Stabilization	0	0	1	1	13	62	94	5	0	174	175	\$3,355.72	\$587,250.60	10.73
Emergency - CMHF	1	4	16	21	380	954	839	63	2	2,238	2,259	\$3,190.15	\$7,206,541.31	120.53
Emergency - IPF	0	0	0	0	6	11	6	5	0	28	28	\$163.05	\$4,565.52	4.86
Emergency - Mobile Unit	0	0	12	12	134	283	289	82	4	792	804	\$144.73	\$116,366.19	5.26
Emergency - Other/Not Identified	7	273	138	418	13	15	21	2	0	51	469	\$346.86	\$162,676.86	13.67
No Auth Crisis Stabilization	0	0	2	2	13	59	93	5	0	170	172	\$699.94	\$120,389.50	2.24
Psych Bed	0	0	0	0	21	93	119	2	0	235	235	\$7,837.40	\$1,841,790.14	10.77
Day Services	0	19	0	19	24	205	749	95	3	1,076	1,095	\$7,234.00	\$7,921,231.61	69.60
Face to Face, w/Consumer	0	19	0	19	24	205	749	95	3	1,076	1,095	\$7,234.00	\$7,921,231.61	69.60
D&A	41	356	269	666	349	1,135	1,369	73	3	2,929	3,595	\$161.47	\$580,481.19	1.25
Brief	8	89	68	165	161	518	630	27	0	1,336	1,501	\$77.63	\$116,517.96	1.25
Comprehensive	33	272	205	510	190	627	751	46	3	1,617	2,127	\$218.13	\$463,963.23	1.23
ICCP	0	0	0	0	1	4	20	4	0	29	29	\$20,684.03	\$599,836.78	10.10
ICCP	0	0	0	0	1	4	20	4	0	29	29	\$20,684.03	\$599,836.78	10.10
Jail Diversion	0	0	0	0	4	67	75	0	0	146	146	\$390.39	\$56,997.40	18.73
Criminal Justice System	0	0	0	0	4	67	75	0	0	146	146	\$390.39	\$56,997.40	18.73
Medication Somatic	20	477	358	855	845	3,430	5,186	310	8	9,779	10,634	\$286.84	\$3,050,283.04	10.06
Adult	5	113	92	210	618	3,423	5,181	310	8	9,540	9,750	\$291.21	\$2,839,267.73	10.18
Child/Adol	18	414	317	749	274	17	12	0	0	303	1,052	\$174.18	\$183,233.23	5.65
Group	0	0	0	0	0	31	54	3	0	88	88	\$315.71	\$27,782.08	20.20
Supported Employment	0	0	0	0	30	282	422	10	0	744	744	\$1,358.24	\$1,010,533.59	84.72
Therapeutic	0	0	0	0	13	129	190	2	0	334	334	\$348.58	\$116,425.00	21.46
Vocational	0	0	0	0	30	274	407	10	0	721	721	\$1,240.10	\$894,108.59	77.48
Team Meeting	13	376	270	659	47	36	33	5	0	121	780	\$133.17	\$103,873.00	8.96
Team Meeting	13	376	270	659	47	36	33	5	0	121	780	\$133.17	\$103,873.00	8.96



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Figure 5a - FY 2013 YTD (10/01/2012 - 09/30/2013) Utilization of Mental Health Services by Age

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	Age (0-5)	Age (6-13)	Age (14-17)		Age (18-24)	Age (25-44)	Age (45-64)	Age (65-84)	Age (85+)					
Transition Support Services	0	0	0	0	9	79	153	28	0	269	269	\$328.20	\$88,284.53	14.17
Community Psych Supportive Tx Program	0	0	0	0	0	1	6	0	0	7	7	\$1,116.80	\$7,817.58	7.71
Cont. of Care Tx Planning (Non-ACT/CB)	0	0	0	0	1	10	29	6	0	46	46	\$220.69	\$10,151.51	11.50
Continuity of Care Treatment Planning	0	0	0	0	8	72	118	22	0	220	220	\$223.04	\$49,068.83	11.62
Inpatient Discharge Planning ACT	0	0	0	0	1	20	53	9	0	83	83	\$255.98	\$21,246.61	8.11
Total All Services	166	2,398	1,623	4,187	2,122	6,817	9,220	737	27	18,923	23,110	\$3,558.87	\$82,245,529.15	177.85

Figure 5b - Consumers Served by Race

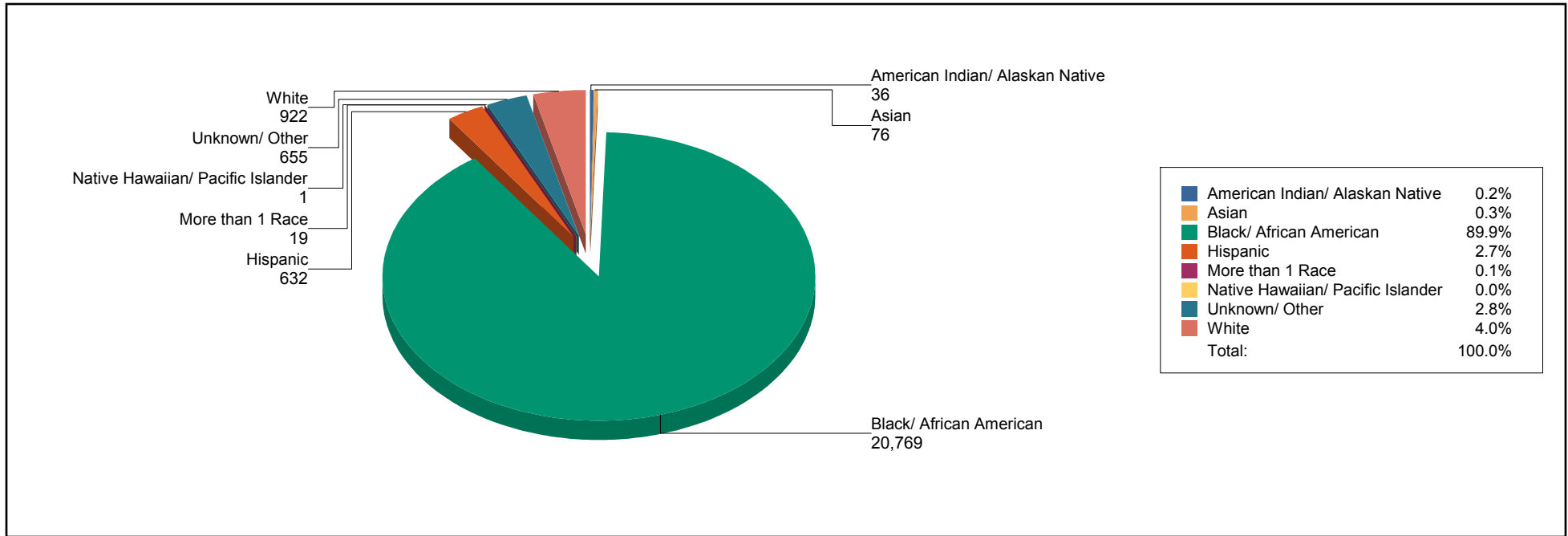




Figure 5c - Consumers Served by Gender

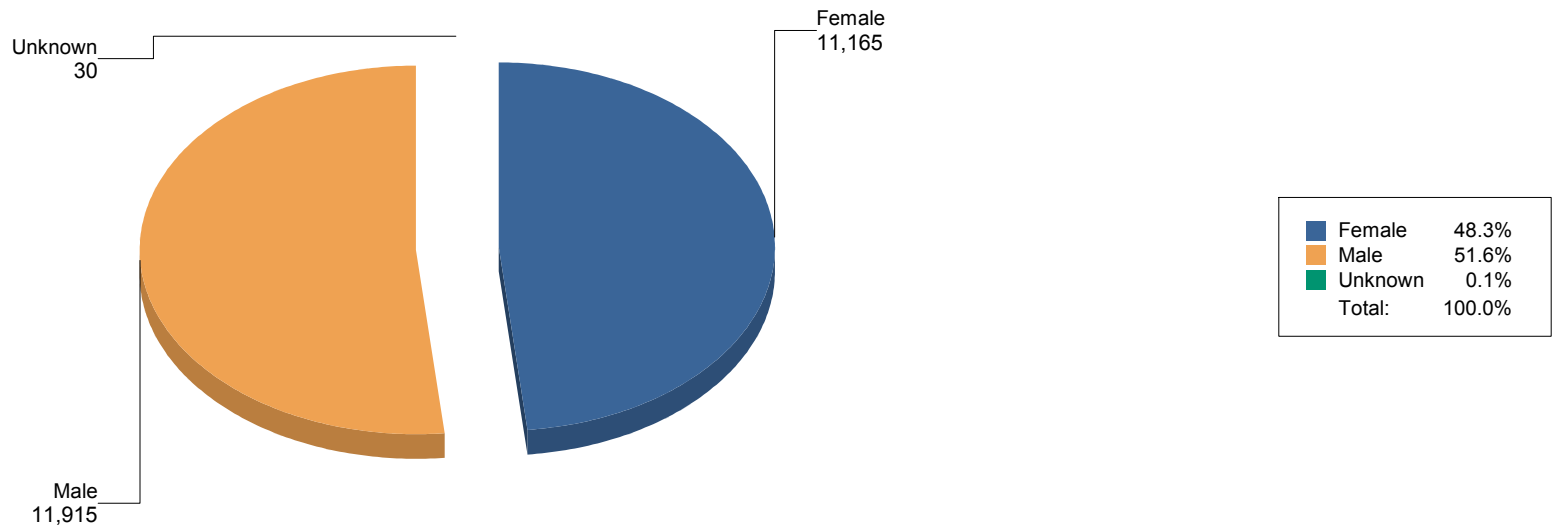
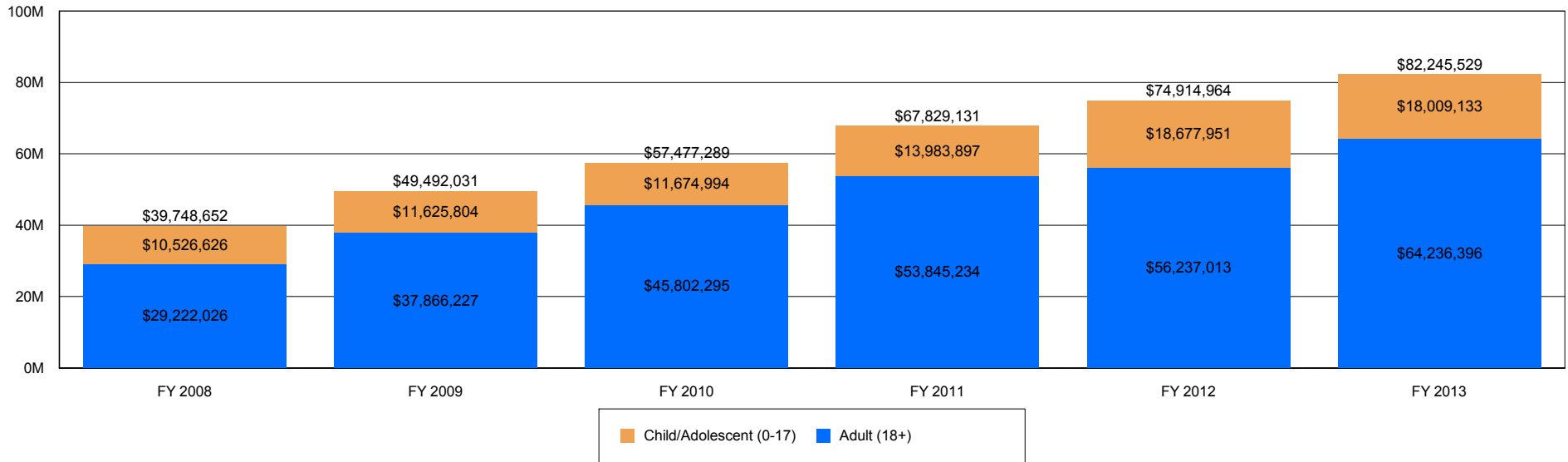




Figure 6a - Claims Expenditures for the Department of Behavioral Health



- 25% Increase from 2008 to 2009
- 16% Increase from 2009 to 2010
- 18% Increase from 2010 to 2011
- 10% Increase from 2011 to 2012
- 10% Increase from 2012 to 2013

Figure 6a displays the aggregate cost of Medicaid and Non-Medicaid (Locally Funded) services from Fiscal Year 2008 to Fiscal Year 2013. This total includes Mental Health Rehabilitation Services (MHRS) and Non-MHRS Contracted Services (Jail Diversion, Supported Employment (FY2012), Crisis Beds and the Integrated Care Coordination Project).



Figure 6b - Claims Expenditures for the Department of Behavioral Health by Medicaid & Non-Medicaid Funds

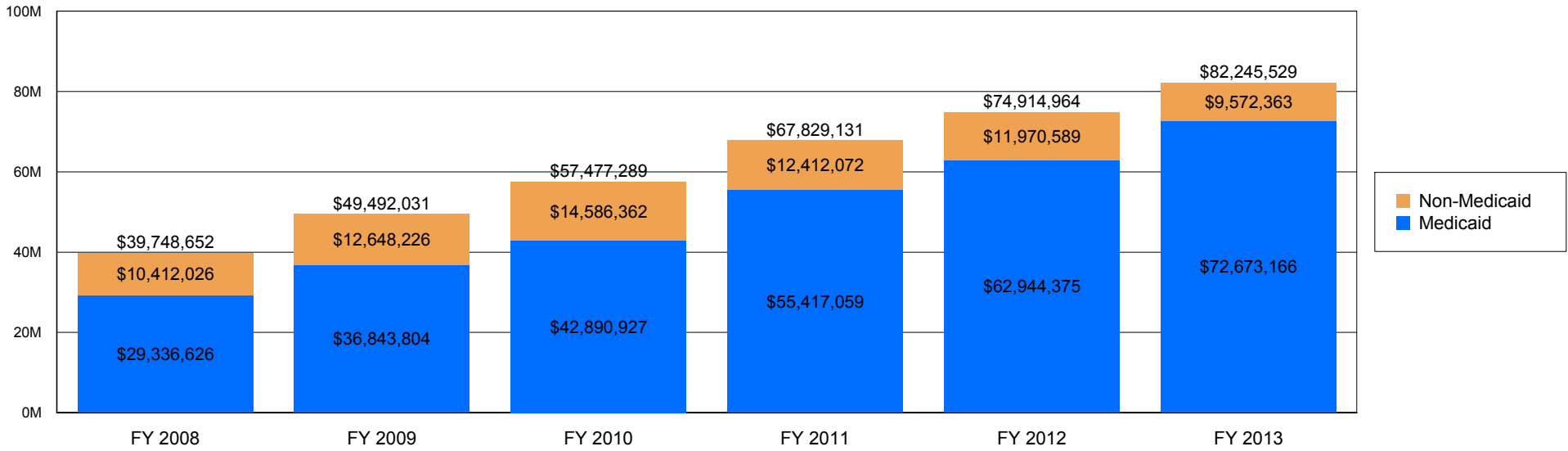
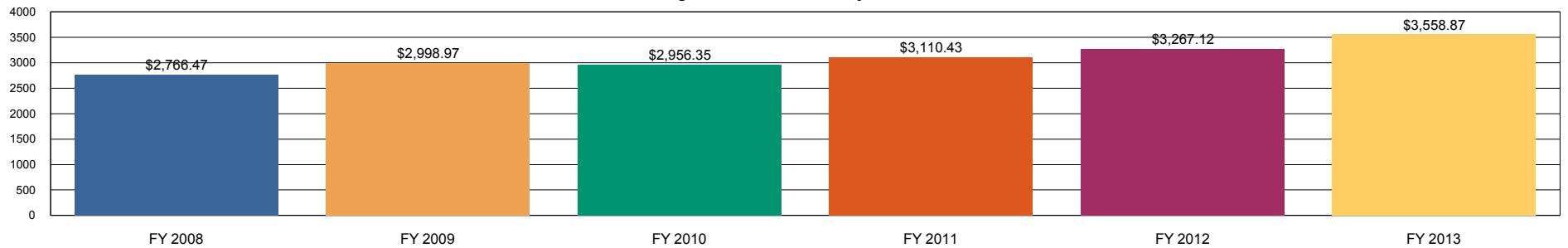


Figure 6b displays the cost of Medicaid and Non-Medicaid (Locally Funded) services from Fiscal Year 2008 to Fiscal Year 2013. This total includes Mental Health Rehabilitation Services (MHRS) and Non-MHRS Contracted Services (Jail Diversion, Supported Employment (FY2012), Crisis Beds and the Integrated Care Coordination Project).

Average Cost Per Consumer by Fiscal Year



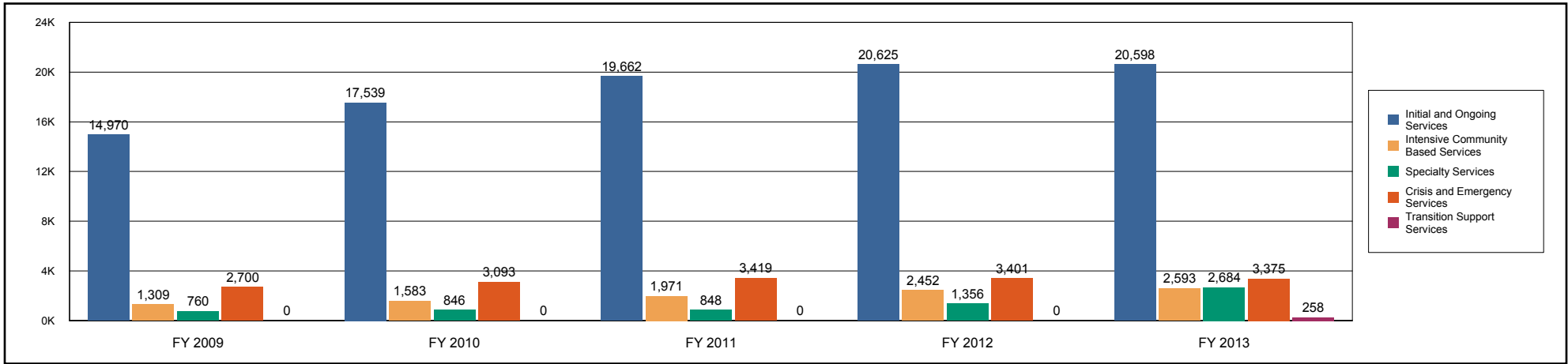


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The DC public mental health system provides a variety of different mental health services to support the needs of the population. These services are categorized as 1) Initial and On-going Services; 2) Intensive Community Based Services; 3) Specialty Services; 4) Crisis and Emergency Services, and 5) Transition Support Services. Figures 7a and 7b describe the different services that fall within each category, the number of consumers served within each cluster from Fiscal Year 2009 to Fiscal Year 2013 and the average cost per consumer. Please note that a consumer can be included in multiple service categories. The category of Transition Support Services was created in Fiscal Year 2013.

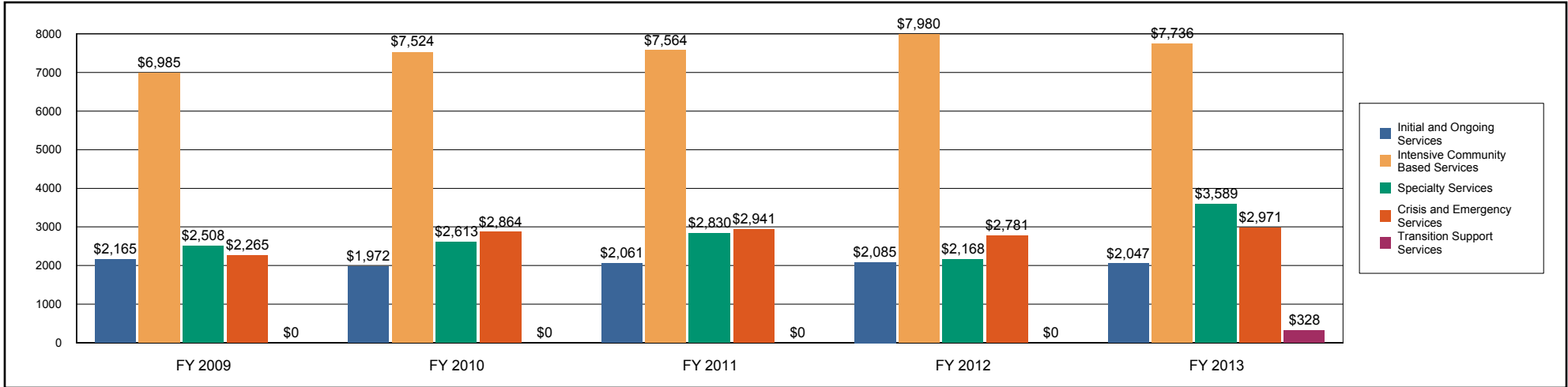
Figure 7a - Adult & Child/Adolescent Consumer Counts by Service Cluster



- Initial and Ongoing Services** include Counseling, Community Support, Diagnostic Assessment and Medication Somatic
- Intensive Community Based Services** include Assertive Community Treatment, Community Based Intervention, Multi Systemic Therapy & Family Functional Therapy
- Specialty Services** include Day, Integrated Care Community Project, Supported Employment, Team Meeting and Jail Diversion
- Crisis Services** include Non-Authorized Crisis Beds, Psych Beds and Emergency Services
- Transition Support Services** include Inpatient Discharge Planning, Continuity of Care Treatment Planning and Community Psych Supportive Treatment Program



Figure 7b - Adult & Child/Adolescent Average Annual Cost per Consumer



Initial and Ongoing Services

-9% Decrease from 2009 to 2010
4% Increase from 2010 to 2011
1% Increase from 2011 to 2012
-2% Decrease from 2012 to 2013

Intensive Community Based Services

8% Increase from 2009 to 2010
1% Increase from 2010 to 2011
5% Increase from 2011 to 2012
-3% Decrease from 2012 to 2013

Specialty Services

4% Increase from 2009 to 2010
8% Increase from 2010 to 2011
-23% Decrease from 2011 to 2012
66% Increase from 2012 to 2013

Crisis and Emergency Services

26% Increase from 2009 to 2010
3% Increase from 2010 to 2011
-5% Decrease from 2011 to 2012
7% Increase from 2012 to 2013

Transition Support Services

0% Decrease from 2009 to 2010
0% Decrease from 2010 to 2011
0% Decrease from 2011 to 2012
0% Decrease from 2012 to 2013

Initial and Ongoing Services include Counseling, Community Support, Diagnostic Assessment and Medication Somatic

Intensive Community Based Services include Assertive Community Treatment, Community Based Intervention, Multi Systemic Therapy & Family Functional Therapy

Specialty Services include Day, Integrated Care Community Project, Supported Employment, Team Meeting and Jail Diversion

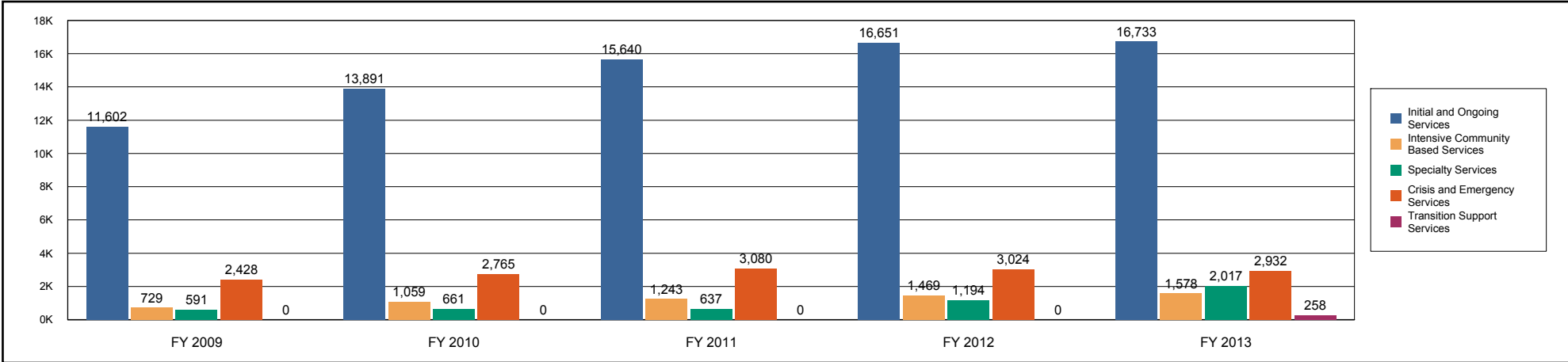
Crisis Services include Non-Authorized Crisis Beds, Psych Beds and Emergency Services

Transition Support Services include Inpatient Discharge Planning, Continuity of Care Treatment Planning and Community Psych Supportive Treatment Program.

\$1,179,454.90 dollars are not included in the above service clusters these funds were used to fund time specific programs and initiatives



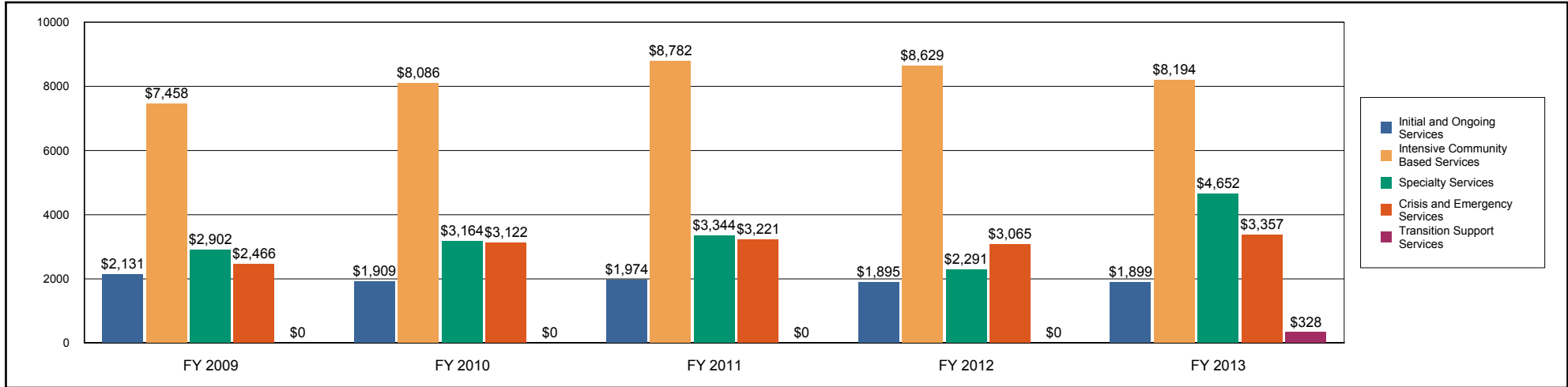
Figure 8 - Adult Consumer Counts by Service Cluster



Initial and Ongoing Services include Counseling, Community Support, Diagnostic Assessment and Medication Somatic
Intensive Community Based Services include Assertive Community Treatment, Community Based Intervention, Multi Systemic Therapy & Family Functional Therapy
Specialty Services include Day, Integrated Care Community Project, Supported Employment, Team Meeting and Jail Diversion
Crisis Services include Non-Authorized Crisis Beds, Psych Beds and Emergency Services
Transition Support Services include Inpatient Discharge Planning, Continuity of Care Treatment Planning and Community Psych Supportive Treatment Program



Figure 9 - Adult Average Annual Cost per Consumer

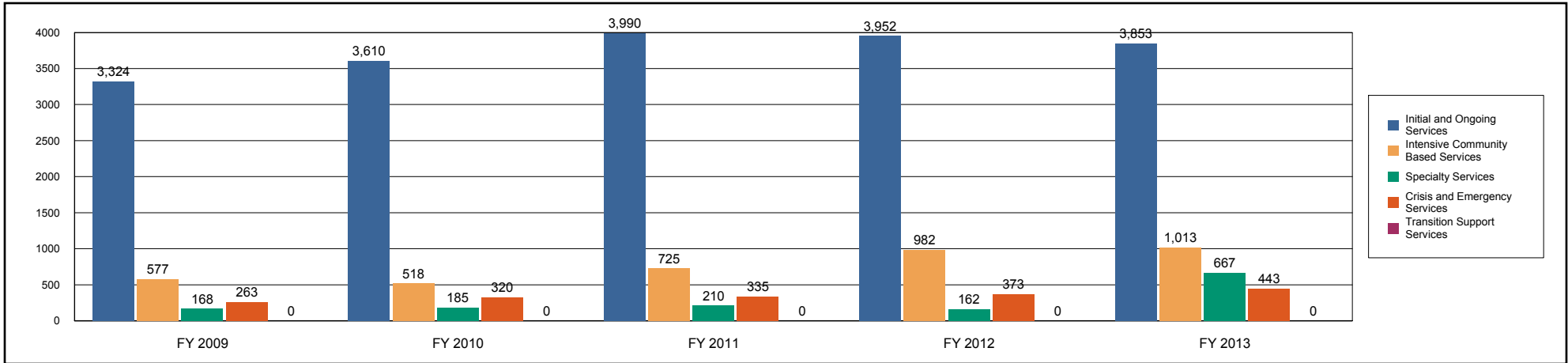


<u>Initial and Ongoing Services</u>	<u>Intensive Community Based Services</u>	<u>Specialty Services</u>	<u>Crisis and Emergency Services</u>	<u>Transition Support Services</u>
-10% Decrease from 2009 to 2010	8% Increase from 2009 to 2010	8% Increase from 2009 to 2010	27% Increase from 2009 to 2010	0% Decrease from 2009 to 2010
3% Increase from 2010 to 2011	9% Increase from 2010 to 2011	9% Increase from 2010 to 2011	3% Increase from 2010 to 2011	0% Decrease from 2010 to 2011
-4% Decrease from 2011 to 2012	-2% Decrease from 2011 to 2012	-2% Decrease from 2011 to 2012	-5% Decrease from 2011 to 2012	0% Decrease from 2011 to 2012
0% Decrease from 2012 to 2013	-5% Decrease from 2012 to 2013	-5% Decrease from 2012 to 2013	10% Increase from 2012 to 2013	0% Decrease from 2012 to 2013

Initial and Ongoing Services include Counseling, Community Support, Diagnostic Assessment and Medication Somatic
Intensive Community Based Services include Assertive Community Treatment, Community Based Intervention, Multi Systemic Therapy & Family Functional Therapy
Specialty Services include Day, Integrated Care Community Project, Supported Employment, Team Meeting and Jail Diversion
Crisis Services include Non-Authorized Crisis Beds, Psych Beds and Emergency Services
Transition Support Services include Inpatient Discharge Planning, Continuity of Care Treatment Planning and Community Psych Supportive Treatment Program



Figure 10 - Child/Adolescent Consumer Counts by Service Cluster



Initial and Ongoing Services include Counseling, Community Support, Diagnostic Assessment and Medication Somatic

Intensive Community Based Services include Assertive Community Treatment, Community Based Intervention, Multi Systemic Therapy & Family Functional Therapy

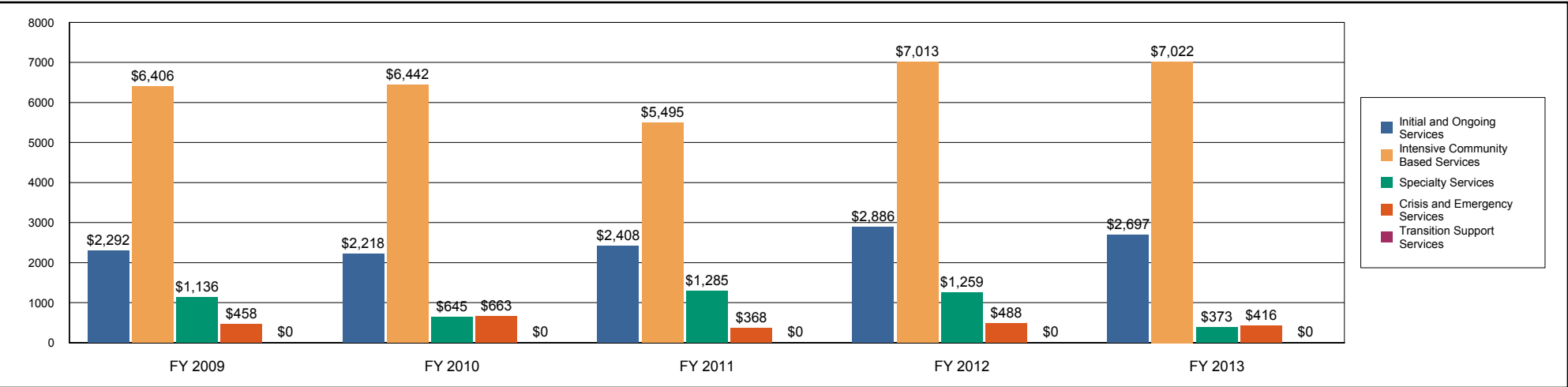
Specialty Services include Day, Integrated Care Community Project, Supported Employment, Team Meeting and Jail Diversion

Crisis Services include Non-Authorized Crisis Beds, Psych Beds and Emergency Services

Transition Support Services include Inpatient Discharge Planning, Continuity of Care Treatment Planning and Community Psych Supportive Treatment Program



Figure 11 - Child/Adolescent Average Annual Cost per Consumer



<u>Initial and Ongoing Services</u>	<u>Intensive Community Based Services</u>	<u>Specialty Services</u>	<u>Crisis and Emergency Services</u>	<u>Transition Support Services</u>
-3% Decrease from 2009 to 2010	1% Increase from 2009 to 2010	-43% Decrease from 2009 to 2010	45% Increase from 2009 to 2010	0% Decrease from 2009 to 2010
9% Increase from 2010 to 2011	-15% Decrease from 2010 to 2011	99% Increase from 2010 to 2011	-45% Decrease from 2010 to 2011	0% Decrease from 2010 to 2011
20% Increase from 2011 to 2012	28% Increase from 2011 to 2012	-2% Decrease from 2011 to 2012	33% Increase from 2011 to 2012	0% Decrease from 2011 to 2012
-7% Decrease from 2012 to 2013	0% Decrease from 2012 to 2013	-70% Decrease from 2012 to 2013	-15% Decrease from 2012 to 2013	0% Decrease from 2012 to 2013

Initial and Ongoing Services include Counseling, Community Support, Diagnostic Assessment and Medication Somatic
Intensive Community Based Services include Assertive Community Treatment, Community Based Intervention, Multi Systemic Therapy & Family Functional Therapy
Specialty Services include Day, Integrated Care Community Project, Supported Employment, Team Meeting and Jail Diversion
Crisis Services include Non-Authorized Crisis Beds, Psych Beds and Emergency Services
Transition Support Services include Inpatient Discharge Planning, Continuity of Care Treatment Planning and Community Psych Supportive Treatment Program

* This report is based on Claims Submitted for dates of service within the specified timeframe; the numbers will increase based on additional Claims and Encounters submitted.



Figure 12 - Adult Consumers Served with Serious & Persistent Mental Illness (SPMI) Diagnosis

Period	Adults with SPMI Diagnosis		Adults without SPMI Diagnosis		Total Adults Served
		%		%	
FY 2008	10,630	95%	545	5%	11,175
FY 2009	12,506	97%	449	3%	12,955
FY 2010	15,107	97%	528	3%	15,635
FY 2011	16,946	96%	679	4%	17,625
FY 2012	17,890	95%	853	5%	18,743
FY 2013	18,039	95%	884	5%	18,923

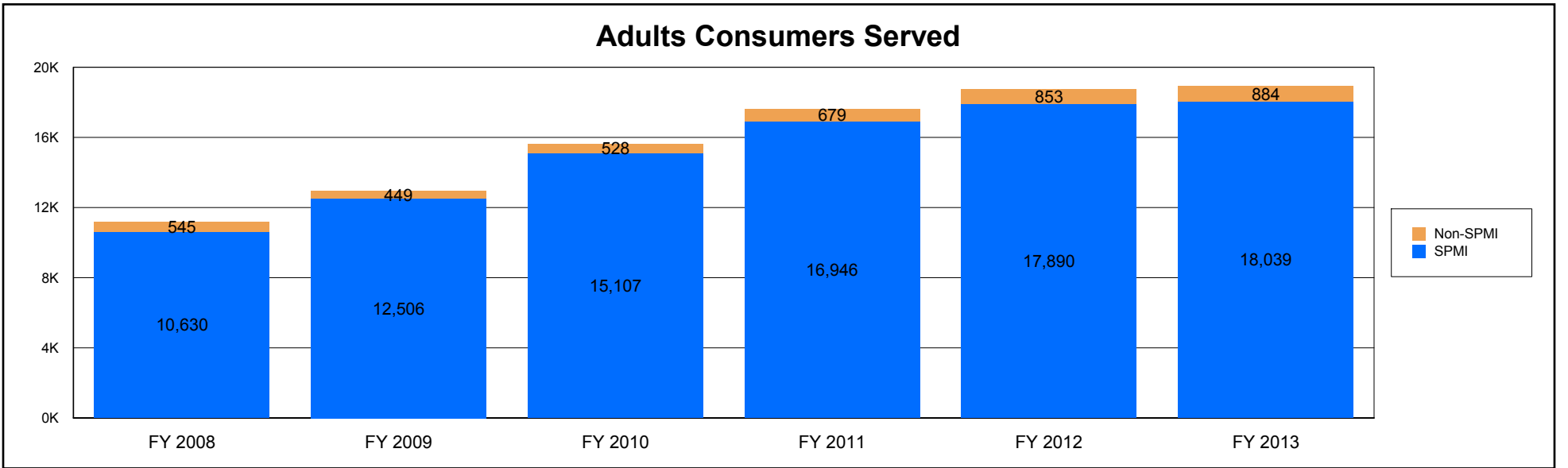




Figure 13 - Child & Adolescent Consumers Served with Serious Emotional Disturbance (SED) Diagnosis

Period	Children/Adolescent with SED Diagnosis		Children/Adolescent without SED		Total Child/Adolescent Served
		%		%	
FY 2008	2,571	81%	622	19%	3,193
FY 2009	2,925	82%	623	18%	3,548
FY 2010	3,104	82%	703	18%	3,807
FY 2011	3,431	82%	751	18%	4,182
FY 2012	3,475	83%	712	17%	4,187
FY 2013	3,586	86%	601	14%	4,187

