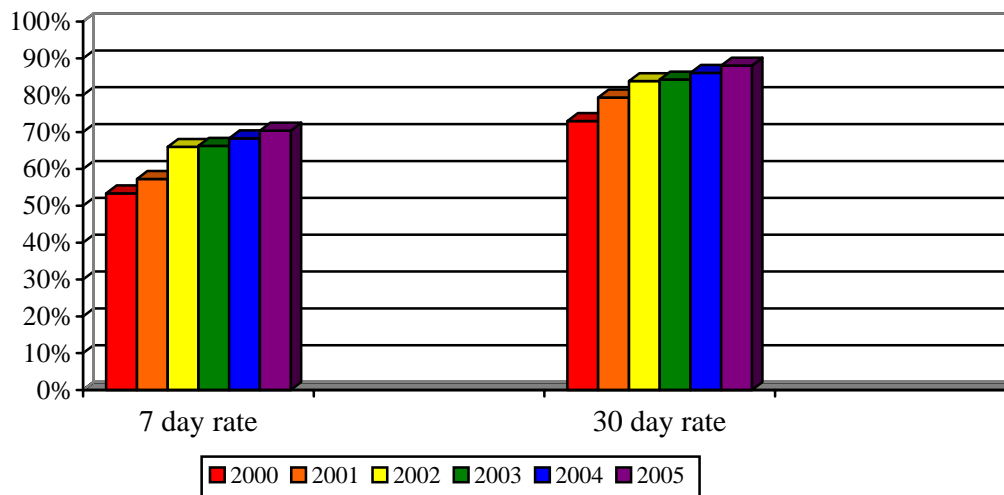


## Monitoring Follow Up After Hospitalization for Mental Illness

Western Behavioral Health (WBH), in conjunction with UPMC Health Plan, monitors rates at which members receive timely follow up outpatient treatment after discharge from psychiatric hospitalizations. For follow up after psychiatric hospitalization, WBH monitors rates for outpatient appointments within seven and 30 days after discharge.

To monitor these rates, WBH uses a standard national methodology contained in the Health Plan Employer Data and Information Set (HEDIS). Rates for these measures have been as follows:

### Commercial



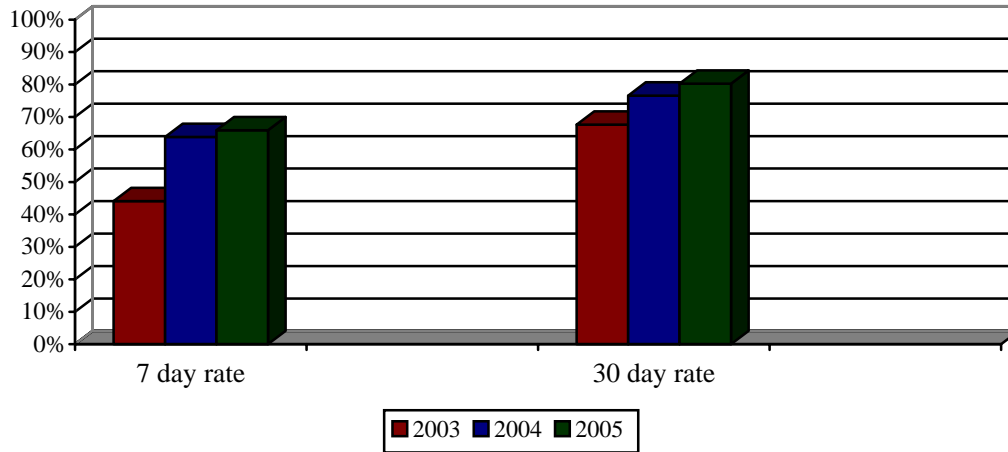
Calendar Year	7 day rate	30 day rate
2000	53.38%	72.97%
2001	57.30%	79.34%
2002	65.98%	83.82%
2003	66.26%	84.24%
2004	68.31%	86.09%
2005	70.37%	88.05%

The Commercial goals for the next remeasurement period are 73% for seven day and 90% for 30 day.

Our Commercial ambulatory 7 day follow up rate for calendar year 2005 surpasses the national HEDIS average of 55.80% and is just below the 90<sup>th</sup> percentile of 70.46%. Similarly, our ambulatory 30 day rate exceeds the national average of 75.89% and also above the 90<sup>th</sup> percentile of 86.42%. Our Commercial 30 day follow up rate is the highest in the state of Pennsylvania.

Additionally, WBH and UPMC Health Plan monitor seven and 30 day follow up for the Medicare population. The Medicare rates for these measures have been as follows:

### Medicare



Calendar Year	7 day rate	30 day rate
2003	44.12%	67.65%
2004	63.83%	76.60%
2005	65.93%	80.22%

The Medicare goals for the next remeasurement period are 67% for seven day and 85% for 30 day.

Barriers to members keeping their follow up appointments include:

- Member specific barriers such as appointment conflicts with work schedule, child care, etc., not taken into consideration by providers scheduling aftercare appointments.
- Members not being aware that compliance with aftercare can improve treatment outcomes.
- Members following up with their primary care physician instead of a behavioral health professional.

Barriers specific to the Medicare population include:

- The cost of behavioral health care.
- Feeling overwhelmed about the number of their appointments; especially if also in need of physical health treatment.

WBH has implemented many interventions to overcome the barriers to members keeping their follow up appointments, which include:

- Outreach to members and their aftercare provider to ensure that the appointment was kept.
- Providers are encouraged to call WBH for assistance when member specific barriers arise during discharge planning.

- Annual distribution of Provider Benchmarking reports to high volume inpatient providers to inform them of their follow up rates as compared to the network average.
- The addition of the “Documented member education on the importance of follow-up care” indicator for inpatient record reviews.
- Publication of articles related to the importance of follow up care on both the member and provider sections of our website.

Representatives of our provider network have shared some additional tips that they have found helpful in ensuring member follow up.

Inpatient providers can:

- Begin discharge planning as soon as possible after admission.
- Involve family or other supports in discharge planning when possible.
- Ensure members have a scheduled aftercare appointment prior to discharge.

Aftercare providers can:

- Be flexible in scheduling options, particularly when a member is following up from an inpatient stay.
- Make reminder phone calls prior to the member appointment.

WBH and UPMC Health Plan will continue to monitor follow up rates and develop additional interventions as needed. If you have found other techniques that are effective in promoting compliance with aftercare, we would appreciate hearing from you. Please call us at 1-888-251-2224 with your ideas and comments.