BEHAVIORAL HEALTH HOSPITAL DATA COLLECTION PROJECT

November 17, 2016

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CHIA.

Agenda

- 10:00 Welcome
- **10:05 Project Objective**
- 10:10 Project Update
- 10:15 Review Proposal
- **10:45 Discuss Submission File Format**
- **10:50** Next Steps / Answer Questions

PROJECT OBJECTIVE



Project Objective:

Based on feedback received from other state agencies, CHIA plans to begin collection of **inpatient** sociodemographic, clinical, charge data ("Case Mix") from behavioral health hospitals for internal and external research needs.

Examples of Use Cases:

- Information on opioid epidemic (ex. Chapter 55 of the Acts of 2015)
- Behavioral health and substance abuse hospital capacity issues
- Patient migration between acute care hospitals and behavioral health hospitals
- Study of mental health parity
- Readmissions rates
- Utilization studies
- Population studies
- Preventable hospitalizations



Potential Benefits of New Case Mix Data:

- Supplements current Case Mix data
- Sourced directly from the provider ('Provider Perspective')
- Less heterogeneous than All-Payer Claims Data (APCD)
- Lends itself well to grouping software
- Simplified structure of the discharge record is easy to understand and analyze

Massachusetts Behavioral Health Hospitals

- AdCare Hospital of Worcester
- Amesbury Health Center (Anna Jaques)
- Arbour Hospital Boston
- Arbour-Fuller Hospital Brookline
- Austen Riggs Center
- Baldpate Hospital
- BayRidge Hospital (Northeast Hospital)
- Bournewood Hospital
- Cape Cod & Islands Mental Health Center
- Corrigan Mental Health Center
- Franciscan Hospital for Children
- Gosnold on Cape Cod
- High Point Treatment Center
- Kindred Hospital Northeast (Stoughton)
- Lemuel Shattuck Hospital

- McLean Hospital
- Norcap Lodge (Good Samaritan Hospital)
- Pembroke Hospital/ Westwood Lodge
- Providence Behavioral Health (Mercy Medical Center)
- Southcoast Behavioral Health
- Solomon Fuller Mental Health Center
- Taunton State Hospital
- Tewksbury Hospital
- Vibra Hospital of Western MA
- Walden Behavioral Care
- Western Mass Hospital
- Westwood Lodge
- Whittier Pavilion
- Worcester Recovery Center and Hospital

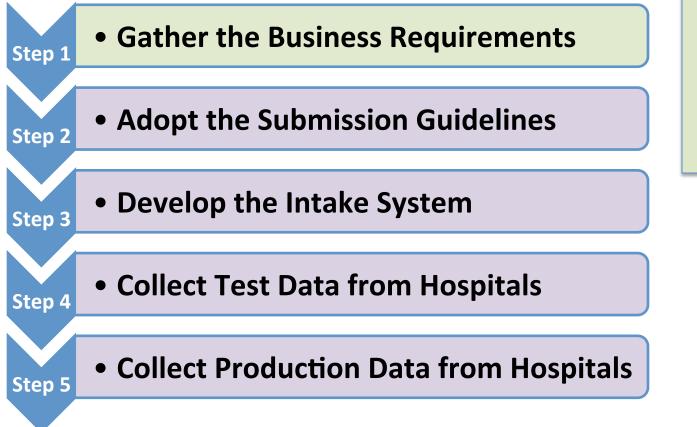
PROJECT UPDATE

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Project Update: What are the steps?



We're currently gathering and finalizing the business requirements

Step 1: Gather Business Requirements

MA Behavioral Health Intake Process	Draft Timeline
Hosted a Webinar to Introduce Project to Hospitals	June 23, 2016
Drafted Proposal Based on Initial Assessment of Data Needs	July - August 2016
Shared Proposal with Internal Stakeholders and State Partners*	September - October 2016
Currently Sharing Proposal with Hospitals and Hosting Webinar to Review Together	November 2016
Finalize Proposal	November - December 2016

*State Partners include HPC, DPH, DMH, MassHealth, and SAO

Step 2: Adopt Submission Guidelines

MA Behavioral Health Intake Process	Draft Timeline
Draft Data Submission Guidelines	December 2016
Review Draft Guidelines with Providers at Technical Advisory Group (TAG) Meeting	January 2017
Provide Comment Period on Draft Submission Guidelines	January 2017
Finalize Guidelines and Adopt Administrative Bulletin	February 2017
Begin Step 3: Develop Intake System	March 2017

Timeline for Building New System and Collecting Data

The timeline for developing and testing the new intake system will be finalized once the submission guidelines are finalized.

CHIA expects to begin collecting data at the end of calendar year 2017 / early 2018. CHIA will provide a test period where hospitals can submit test files prior to submitting production data.



Questions?

REVIEW PROPOSAL



Objectives of Review:

- Collaborate
- Answer questions
- Clarify guidelines
- Determine which data elements are currently available
- Determine which data elements are burdensome to collect and /or submit
- Identify any challenges or barriers to submitting data

Order of Review:

- 1. Provider Data
- 2. Patient Demographic Data
- 3. Clinical Information
- 4. Charges and Revenue Information
- 5. Submitter Data

DISCUSS SUBMISSION FORMAT



File Format:

Question Regarding File Format:

CHIA is currently considering collecting this data in a standard file format called Extensible Markup Language (XML), but would like feedback from the provider community first.

Does your organization currently create extract files in Extensible Markup Language (XML) format? (Yes/No)

Please provide any additional feedback / thoughts on your organization's ability to support a standard XML format.

Questions Regarding Contracting Services:

Does you organization plan to contract with a vendor to submit data If so, what is the name of the vendor?

Thank you.

Next Steps

MA Behavioral Health Intake Process	Draft Timeline
Accept Feedback from Hospitals	November 2016
Draft Data Submission Guidelines	December 2016
Review Draft Guidelines with Providers at Technical Advisory Group (TAG) Meeting	January 2017
Provide Comment Period on Draft Submission Guidelines	January 2017
Finalize Guidelines and Adopt Administrative Bulletin	February 2017
Begin Step 3: Develop Intake System	March 2017



Questions?

Follow-up Contacts

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