

**Addiction and Prevention Services
State Quality Committee**

This report shows the average length of stay by provider and modality. In order to protect provider confidentiality, provider names were removed. The report is based upon paid claims. This report cannot be used to determine the quality of a provider's services.

Final

AGGREGATE ANALYSIS REPORT

Reporting Period

FROM: July 1, 2009 **TO:** June 30, 2010
**Includes Annual Summary FY 2010 and YTY
comparisons of 2008 to 2010.**

Unit/Team/Department:

PIHP Quality Improvement

Topic/Project:

Availability of Services

Over and Under Utilization Semi-Annual Report (VO # 15, Grid Row # 11)

LOS, including admissions and readmissions of all providers

Monitoring Standard:

42 CFR 438.240 (a and b) Quality Assessment and Performance Improvement Program

Utilization Management policies and procedures:

42 CFR 438.210 (b-e) Coverage and authorization of services

42 CFR 438.242 Health Information System

Goal:

The PIHP will track and report semi-annually to SRS/AAPS the length of stay (LOS), including both admissions and readmissions of all providers for all levels of care and report it by displaying standard deviations from the mean of LOS data.

Objectives:

To assure the documentation is capturing the LOS by modality and provider to ascertain over and under utilization trends

To evaluate for trends that may require system intervention and education

To allow data to be presented consistently for Committee evaluation and response

Data Collection Activities:

Data was collected from the ValueOptions CareConnect claims. The report is used to assist in managing potential over and under utilization concerns. Report is broken out by provider and reported separately by modality. The report is delivered semi-annually but will contain a rolling 12 months of data of all programs split by adult/adolescent including higher levels of care (hospital detox, social detox, reintegration, intermediate) and lower levels of care including (intensive outpatient, outpatient and other). This data is now pulled by provider location and not member location and all previous versions corrected. Graphs show Mean of length of stay (LOS) and one (1) Standard Deviation (SD) above and below the Mean for each provider over the entire rolling reporting period.

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Regarding Attachment A at the end of the report, each Red line is a separate provider. The three bolded black lines on the chart indicate the Mean and on each side, one (1) Standard Deviation (SD) from the Mean. If a provider's LOS is **more** or **less** than one Standard Deviation from the Mean this may indicate an area of concern or needing further exploration. "Other Services" chart is not displayed as the data contains multiple service types.

Results:

**Raw Difference in ALOS Comparing 2008/2009 /2010
(Each Quarter ALOS added then divided by 4)**

Modality Note: Data includes all ages together	RAW ALOS 2008	RAW ALOS 2009	Raw ALOS 2010	Raw Difference ALOS 2008 to 2009	Raw Difference ALOS 2009 to 2010	Change RAW ALOS 2008 to 2010
AAPS Social Detox	2.40	2.37	2.37	-0.03	0	-0.03
AAPS Intermediate Residential	10.78	11.32	10.84	+0.54	-0.47	+0.06
AAPS Reintegration	17.33	16.47	15.19	-0.86	-1.28	-2.14
Medicaid Hospital Based Services	3.87	3.13	3.50	-0.74	+0.37	-0.74
Medicaid Intermediate Residential	10.87	11.28	10.48	+0.41	-0.80	-0.39
Medicaid Reintegration	18.87	15.30	14.00	-3.57	-1.30	-4.87
AAPS Intensive Outpatient	9.07	8.20	8.50	-0.87	+0.3	-0.57
AAPS Outpatient	51.42	48.27	47.72	-3.15	-0.54	-3.70
Medicaid Intensive Outpatient	12.79	10.51	9.63	-2.28	-0.88	-3.16
Medicaid Outpatient	50.88	50.88	51.86	0	+0.98	+0.98

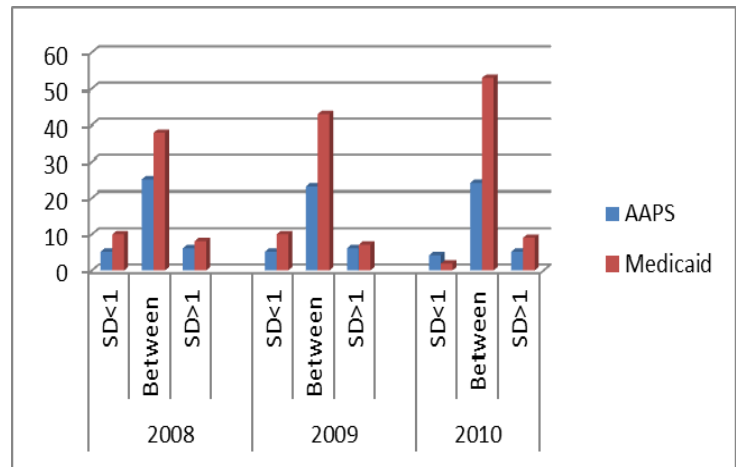
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From 2008 to 2010 the raw ALOS decreased in all modalities except for a less than one day LOS increases in AAPS Intermediate and Medicaid Outpatient.

Higher Levels of Care Standard Deviation (SD) Data

Numbers of Providers

		AAPS	Medicaid
2010	SD<1	4	2
	Between	24	53
	SD>1	5	9
2009	SD<1	5	10
	Between	23	43
	SD>1	6	7
2008	SD<1	5	10
	Between	25	38
	SD>1	6	8

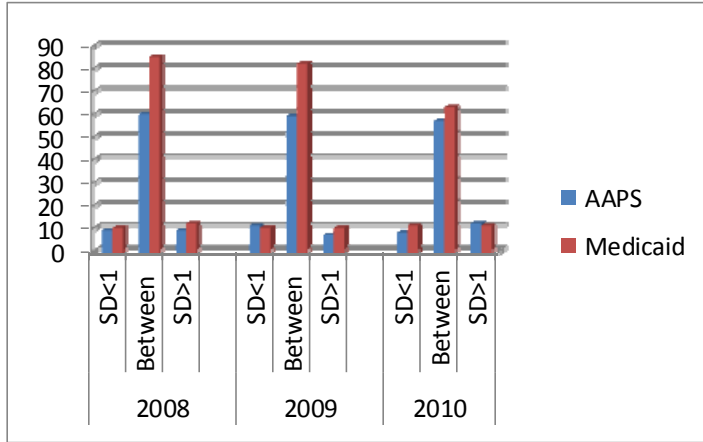


Lower Levels of Care Standard Deviation (SD) Data

Numbers of Providers

		AAPS	Medicaid
2010	SD<1	8	11
	Between	57	63
	SD>1	12	11
2009	SD<1	11	10
	Between	59	82
	SD>1	7	10
2008	SD<1	9	10
	Between	60	85
	SD>1	9	12

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Intermediate LOS Adult Only

Intermediate LOS Adult	FY08	FY08	FY09	FY09	FY10	FY10
REGION	Medicaid Raw Avg.	AAPS Funded Raw Avg.	Medicaid Raw Avg.	AAPS Funded Raw Avg.	Medicaid Raw Avg.	AAPS Funded Raw Avg.
Kansas City	12.12	13.51	11.43	13.33	10.53	11.78
Northeast	7.82	7.72	9.07	8.70	8.79	8.95
South Central	10.53	12.74	11.45	12.99	9.69	13.36
Southeast	11.40	10.41	11.27	11.16	8.60	10.29
West	10.78	11.82	13.16	13.77	14.18	13.06
Wichita	9.49	9.45	9.54	9.66	9.06	9.47
Raw Average LOS-All Regions	10.35	10.94	10.99	11.60	10.14	11.15

Note: Some regions only had one provider

Intermediate LOS Adolescent by Region

Intermediate LOS Adolescent	FY08	FY08	FY09	FY09	FY10	FY10

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REGION	Medicaid Raw Avg.	AAPS Funded Raw Avg.	Medicaid Raw Avg.	AAPS Funded Raw Avg.	Medicaid Raw Avg.	AAPS Funded Raw Avg.
Kansas City	14.85	13.93	15.02	14.86	14.68	14.79
Northeast	NA	NA	NA	NA	3.5	NA
South Central	NA	NA	NA	NA	NA	NA
Southeast	8.82	9.75	NA	NA	NA	NA
West	NA	NA	NA	16.50*	NA	NA
Wichita	13.34	13.34	14.00	NA	7.5	NA
Raw Average LOS-All Regions	12.33	12.34	14.51	15.68	8.56	14.69

*Note: In the case of adolescent intermediate treatment, if the child was under 18, he/she will show up under adolescent intermediate because the data is driven by age first, not facility. Thus, it may appear that we have an adolescent facility in western Kansas but this is only because a 17 year old was treated at an adult facility and this report is driven by facility location. Also the FY10 data low numbers in most regions.

Conclusions: Note: LOS=Length of Stay; ALOS=Average Length of Stay

Higher Levels of Care:

The majority of provider's LOS fall within **middle of 1 Standard Deviation (SD)** range for all three years:

AAPS Funded FY08-69.4% FY09 67.6% FY10 72.7%
 Medicaid FY08 67.9% FY09 71.7% FY10 82.8%

2008

15.2 % of the providers had a LOS greater than 1 SD from the Mean.
 16.3 % of the providers had LOS less than 1 SD from the Mean.

2009

13.8 % of the providers had a LOS greater than 1 SD from the Mean.
 15.9 % of the providers had LOS less than 1 SD from the Mean.

2010

14.4 % of the providers had a LOS greater than 1 SD from the Mean.
 6.2 % of the providers had LOS less than 1 SD from the Mean

**Thus, there is a trend for the LOS to move closer to the Mean.
 Medicaid had the greatest movement toward the Mean.**

Three Year Trends Higher Levels of Care

Of the (14-2008, 13-2009, 14-2010) providers whose LOS is > than 1 SD from the Mean in the higher levels of care for both funding sources, there were two (2) providers that consistently appear to have *longer lengths of stay* and both are in the Kansas City Region.

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Of the (16-2008, 15-2009, 15-2010) providers whose LOS is < than 1 SD from the Mean in the higher levels of care for both funding sources, there were three (3) providers that consistently have *shorter lengths of stay* in varying regions FY08 and FY09 but only one provider FY10 with shorter lengths of stay noted.

From 2009 to 2010 the raw ALOS *decreased* in all modalities except for a less than one day LOS increases in Medicaid Hospital Based services, AAPS Intensive Outpatient and Medicaid Outpatient.

From 2008 to 2010 the raw ALOS *decreased* in all modalities except for a less than one day LOS increase in AAPS Intermediate and Medicaid Outpatient.

In comparing Adult Intermediate services by region the raw ALOS:

- For three years the raw ALOS ranged from 7.72 to 14.18
- The overall raw ALOS *increased slightly* from 2008 to 2009
- The overall raw ALOS *decreased slightly* from 2009 to 2010

In comparing Adolescent Intermediate services by region the raw ALOS:

- For three years the raw ALOS ranged from 3.5 to 15.02
- Due to the low numbers the ALOS comparisons are questionable except for the Kansas City region. For Kansas City Region the raw ALOS *decreased slightly* from 2009 to 2010.

Lower Levels of Care:

The majority of provider's LOS fall within **middle of 1 Standard Deviation (SD)** range for all three years:

AAPS Funded	FY08-76.9 %	FY09 76.6 %	FY10 74.0%
Medicaid	FY08 79.4 %	FY09 80.4 %	FY10 74.1%

2008

11.4 % of the providers had a LOS greater than 1 SD from the Mean.
10.3 % of the provider had LOS less than 1 SD from the Mean.

2009

9.5 % of the providers had a LOS greater than 1 SD from the Mean.
11.7 % of the provider had LOS less than 1 SD from the Mean.

2010

11.7 % of the providers had a LOS greater than 1 SD from the Mean.
14.1 % of the provider had LOS less than 1 SD from the Mean

Thus, there is a slight trend of LOS moving away from the Mean with more providers falling less than or greater than 1 SD from the Mean.

Three Year Trends Lower Levels of Care

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Of the providers whose LOS falls above 1 SD from the Mean in the lower levels of care for both funding sources there was no particular provider trend noted.

Of the providers whose LOS falls below 1 SD from the Mean in the lower levels of care for both funding sources, there was no particular provider trend noted.

Preliminary Recommendations to Committee for this data set:

- It is recommended that data continue to be trended over time.
- It is recommended to see for this report if the *weighted* ALOS could be added to all the charts.
- It is further recommended that this Aggregate Analysis be posted on the ValueOptions website for public access.
- It is **NOT** recommended that the ValueOptions reports from which this data was pulled be shared at the VO Regional QI meeting or posted on the website due to the fact that this report contains provider specific data.
- Again this year it is recommended that for the providers that consistently had LOS > 1 SD or LOS < 1 SD from the Mean be given feedback of how they rank against other providers by ValueOption's provider services and QI representatives. This should be done in a confidential format in person with the possibility of focused chart reviews to ascertain clinical differences (clientele demographics, drug of choice, severity, and geographic location) that may explain the data. These providers may need focused assistance if an operational issue is identified.
- Again, this year is recommended that facilities that are designated women's programs be shown in a separated chart statewide view only. As clarification they should also remain in all other charts as is.
- **It is recommended by the Committee that the frequency of the report submission by VO and aggregate by the State be changed to annual instead of semi-annual to facilitate year to year comparisons using complete annual data.**
- **It is recommended by the Committee that VO provide weighted averages and summary comparison charts electronic and include those in their reports to the State.**
- **It is recommended by the Committee that VO speak with their national statistician regarding options for statistical comparisons of weighted averages going forward for this report and for this data set to explore and explain the move away from the mean on the outpatient side.**
- **It was recommended by the Committee that Attachment A be merged into the end of this aggregate. This recommendation was done and shown below.**

Date Presented to SQC: 11/4/2010

BY: Kim Brown

Recommendations from the Committee for action: Committee approves of the Preliminary Recommendations as shown above. Enhancements made by the SQC to the Preliminary Recommendations are noted above in **bold**.

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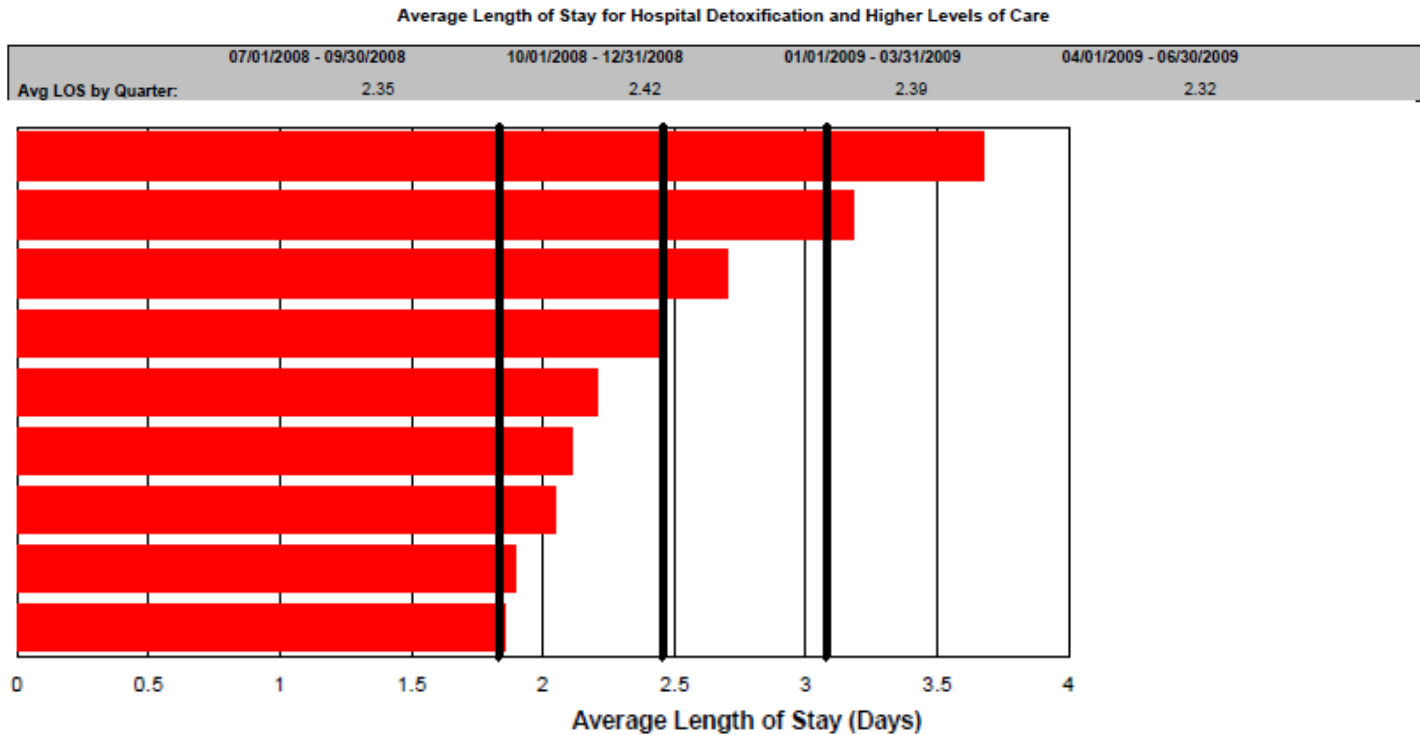
Person Responsible to follow-up and date due: Jean Holthaus Due: 2/10/2011

ATTACHMENT A: DATA

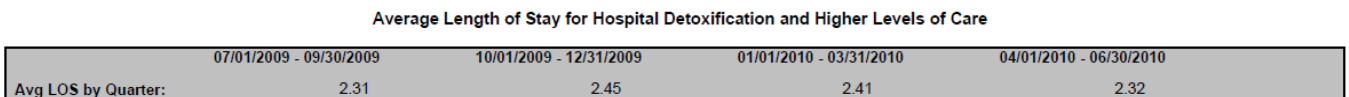
Higher Levels of Care 2009 and 2010 Compared:

AAPS FUNDED

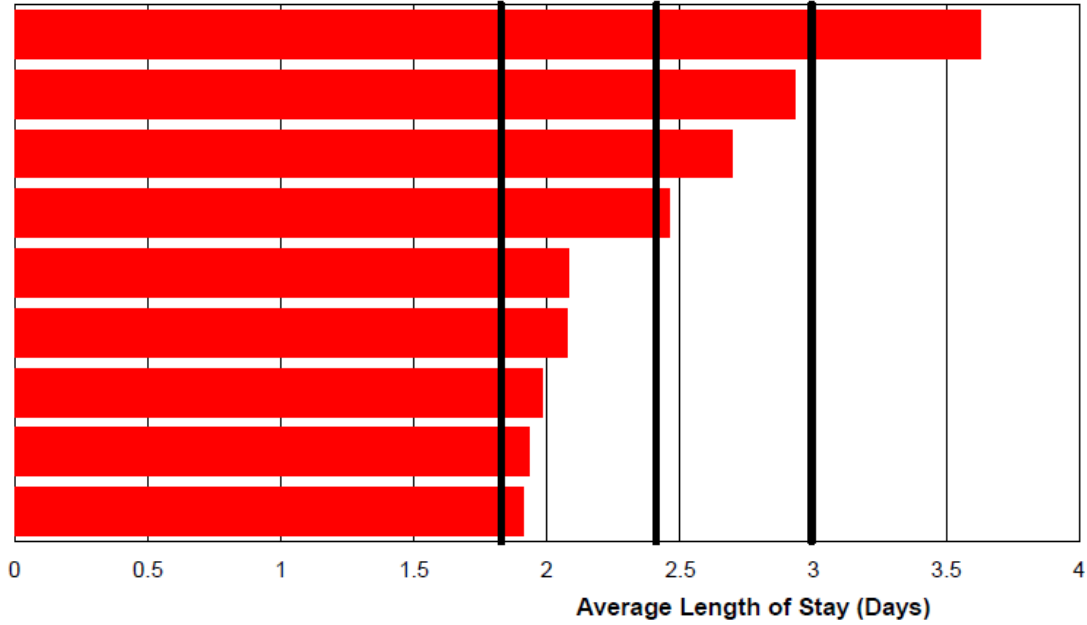
2009 Social Detox AAPS:



2010 Social Detox AAPS:



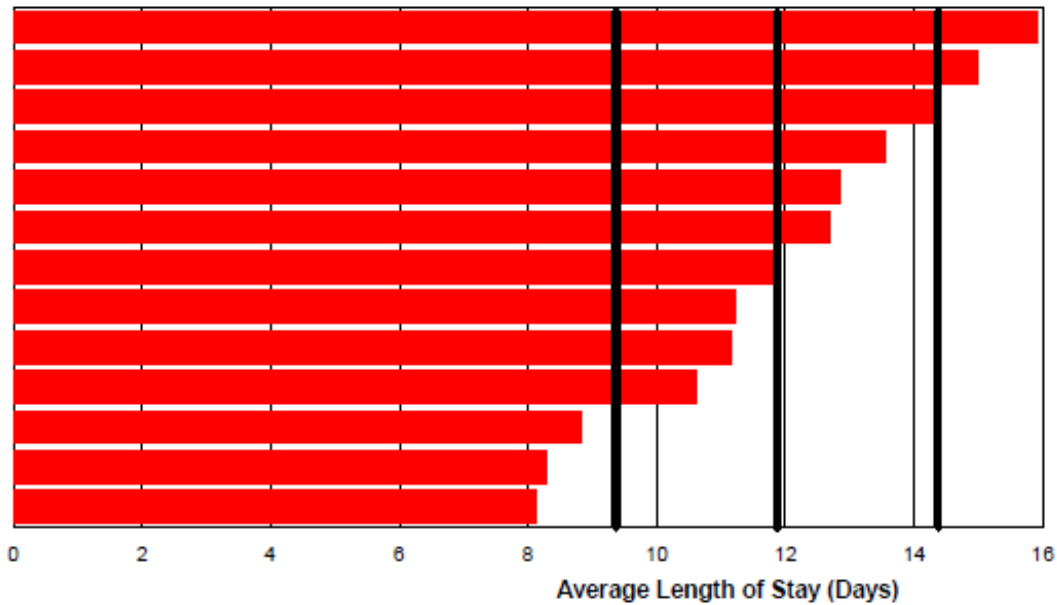
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2009 LOS Intermediate Residential AAPS:

Average Length of Stay for Hospital Detoxification and Higher Levels of Care

	07/01/2008 - 09/30/2008	10/01/2008 - 12/31/2008	01/01/2009 - 03/31/2009	04/01/2009 - 06/30/2009
Avg LOS by Quarter:	11.70	11.73	11.43	10.41

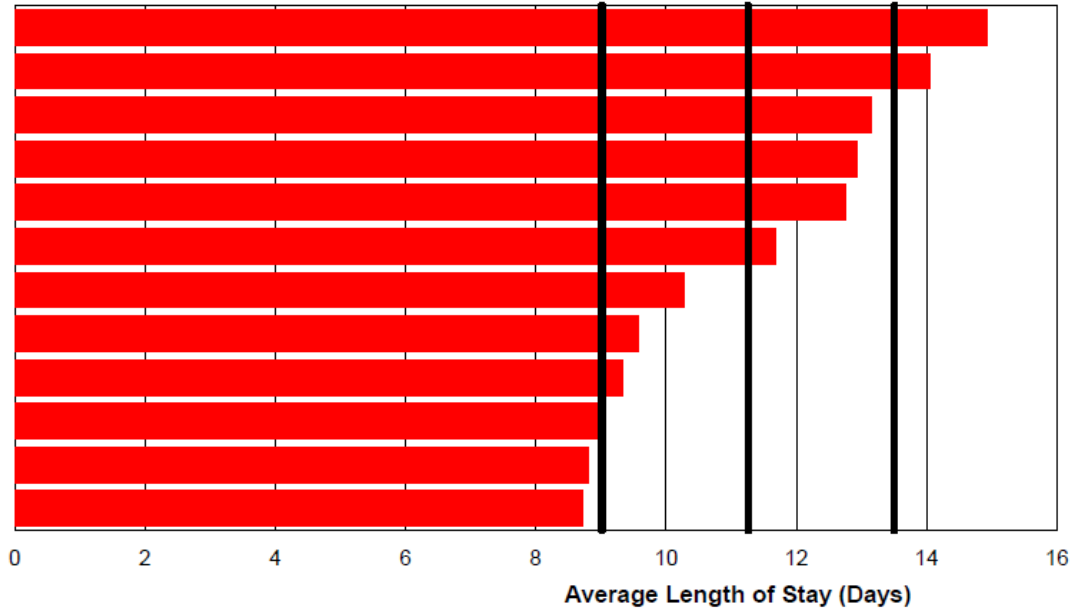


2010 LOS Intermediate Residential AAPS:

Average Length of Stay for Hospital Detoxification and Higher Levels of Care

	07/01/2009 - 09/30/2009	10/01/2009 - 12/31/2009	01/01/2010 - 03/31/2010	04/01/2010 - 06/30/2010
Avg LOS by Quarter:	10.40	11.36	11.29	10.32

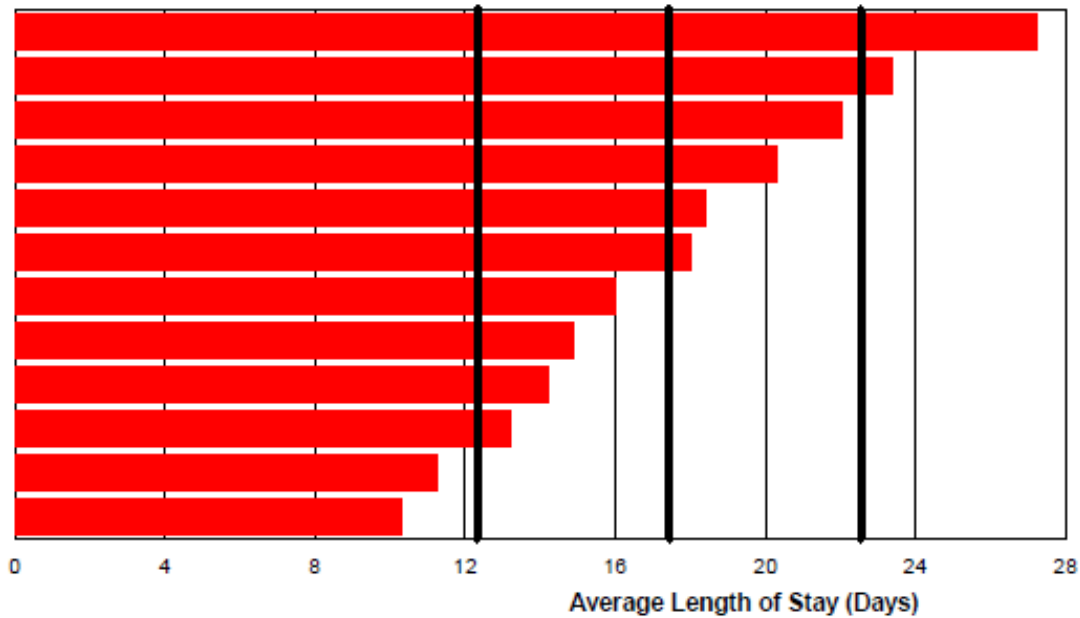
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2009 LOS Reintegration AAPS:

Average Length of Stay for Hospital Detoxification and Higher Levels of Care

	07/01/2008 - 09/30/2008	10/01/2008 - 12/31/2008	01/01/2009 - 03/31/2009	04/01/2009 - 06/30/2009
Avg LOS by Quarter:	17.00	16.26	16.83	15.78

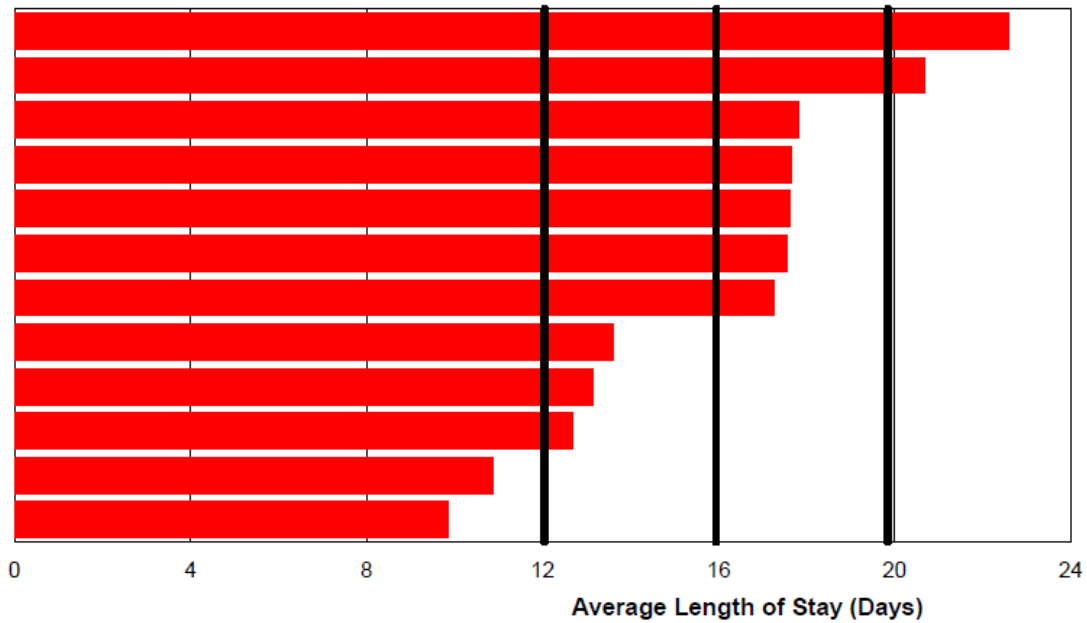


2010 LOS Reintegration AAPS:

Average Length of Stay for Hospital Detoxification and Higher Levels of Care

	07/01/2009 - 09/30/2009	10/01/2009 - 12/31/2009	01/01/2010 - 03/31/2010	04/01/2010 - 06/30/2010
Avg LOS by Quarter:	14.54	14.65	15.88	15.70

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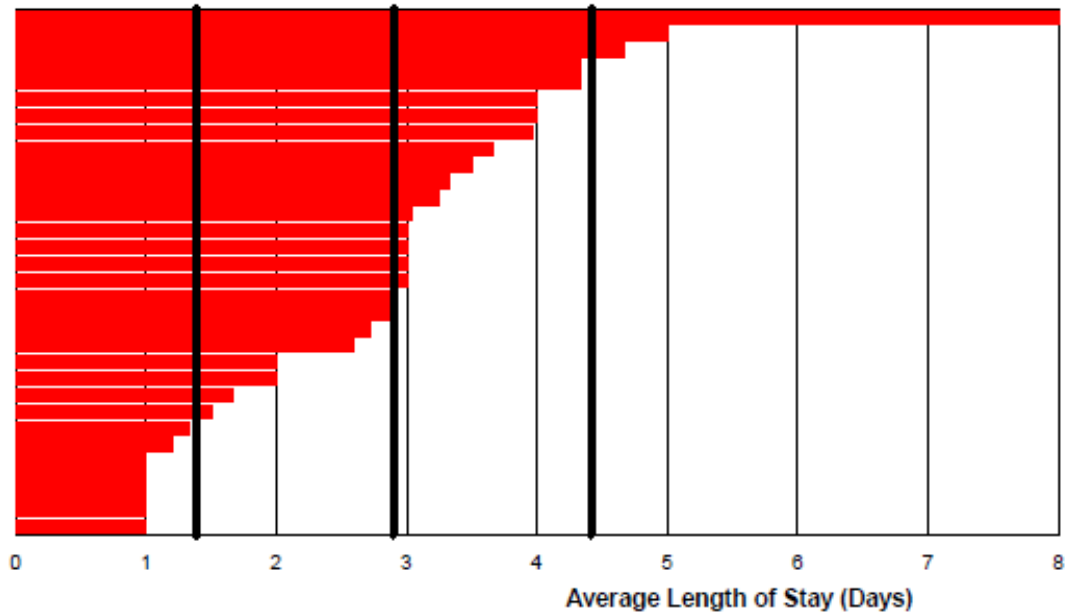


MEDICAID

2009 Hospital Based Services/Residential Services Medicaid:

Average Length of Stay for Hospital Detoxification and Higher Levels of Care

	07/01/2008 - 09/30/2008	10/01/2008 - 12/31/2008	01/01/2009 - 03/31/2009	04/01/2009 - 06/30/2009
Avg LOS by Quarter:	2.89	3.62	2.98	3.02

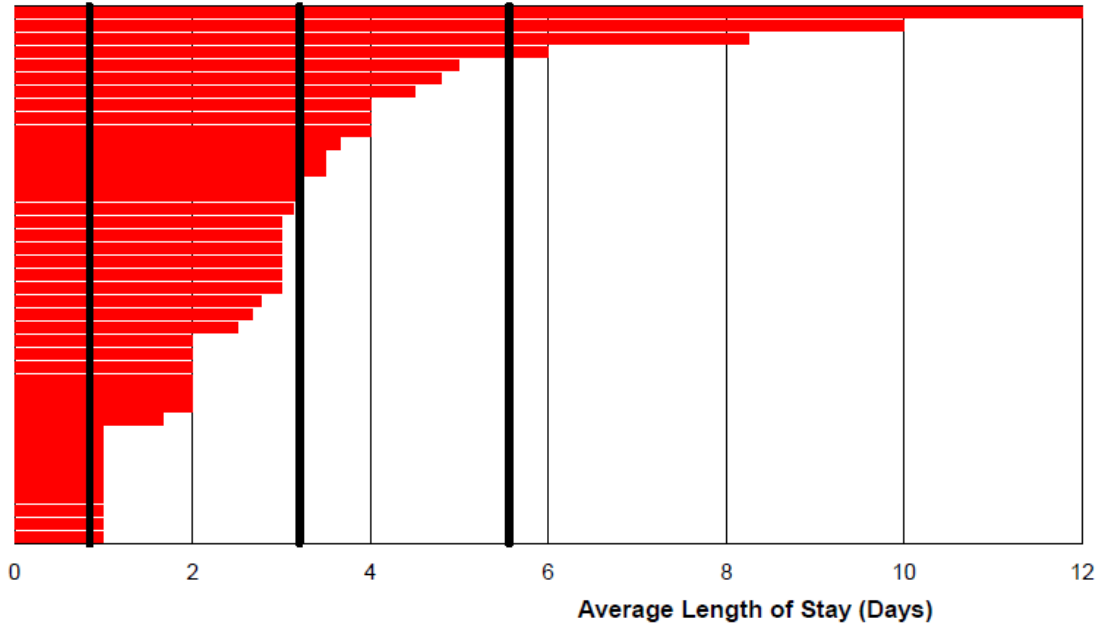


2010 Hospital Based Services/Residential Services Medicaid:

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Average Length of Stay for Hospital Detoxification and Higher Levels of Care

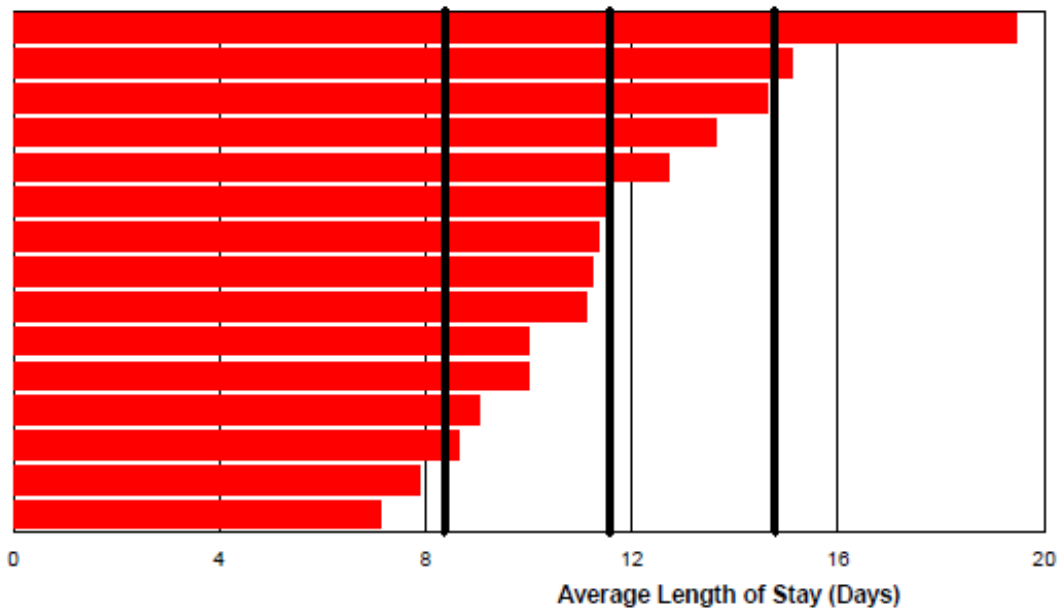
	07/01/2009 - 09/30/2009	10/01/2009 - 12/31/2009	01/01/2010 - 03/31/2010	04/01/2010 - 06/30/2010
Avg LOS by Quarter:	3.21	3.36	3.88	3.53



2009 LOS Intermediate Residential Medicaid:

Average Length of Stay for Hospital Detoxification and Higher Levels of Care

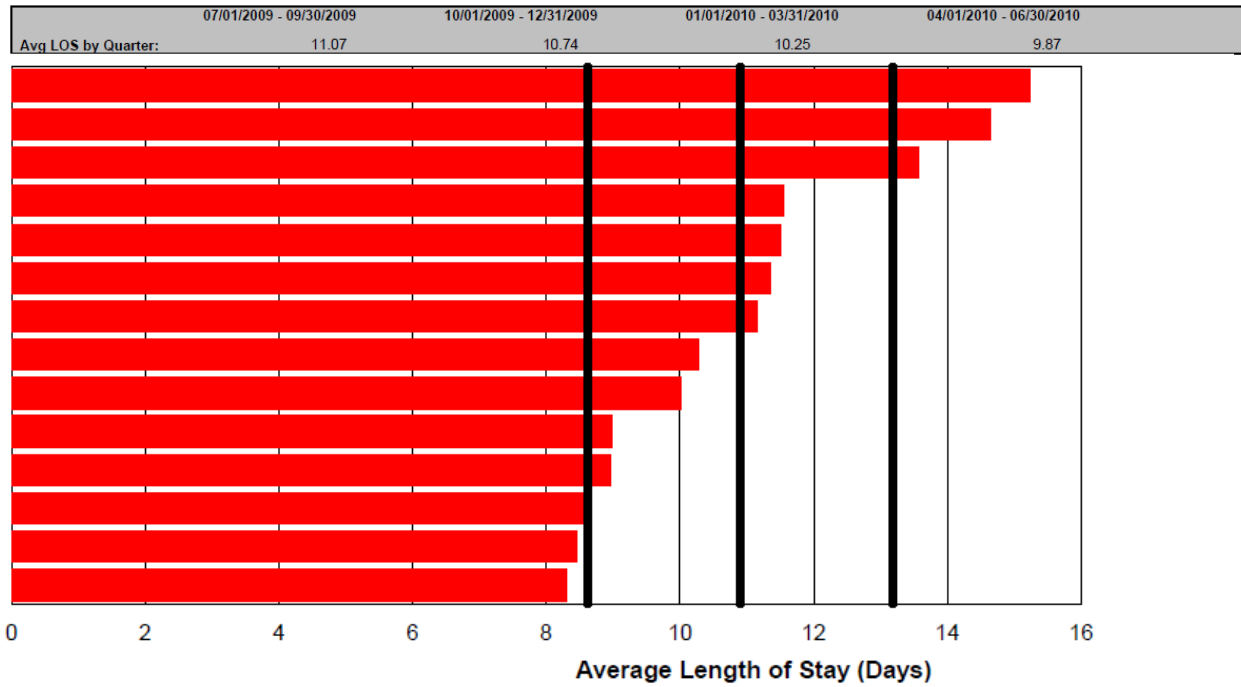
	07/01/2008 - 09/30/2008	10/01/2008 - 12/31/2008	01/01/2009 - 03/31/2009	04/01/2009 - 06/30/2009
Avg LOS by Quarter:	10.98	12.09	11.72	10.34



2010 LOS Intermediate Residential Medicaid:

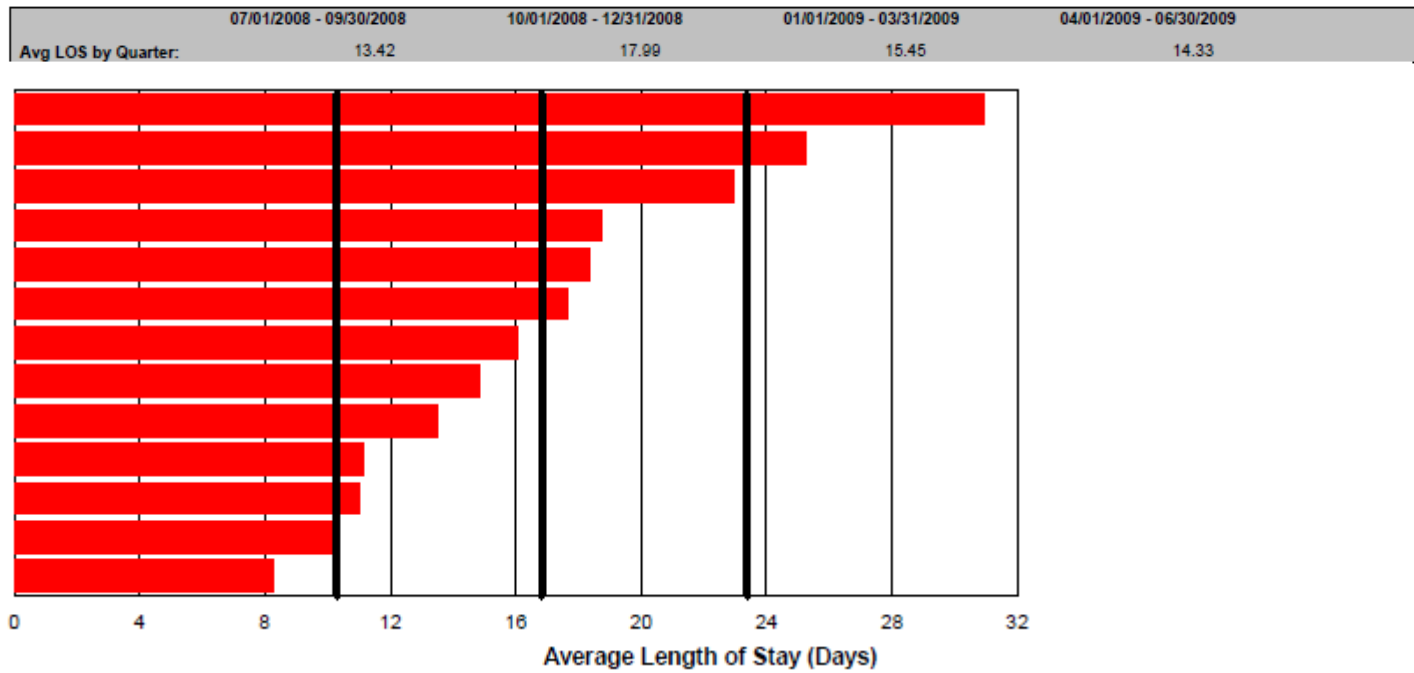
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Average Length of Stay for Hospital Detoxification and Higher Levels of Care



2009 LOS Reintegration Medicaid:

Average Length of Stay for Hospital Detoxification and Higher Levels of Care

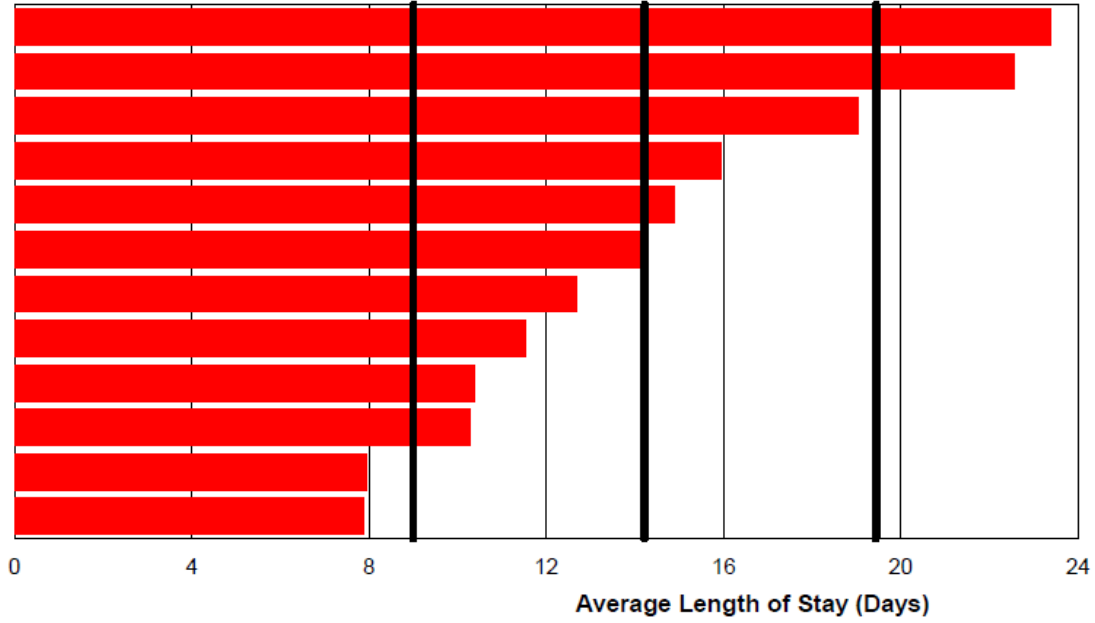


2010 LOS Reintegration Medicaid:

Average Length of Stay for Hospital Detoxification and Higher Levels of Care



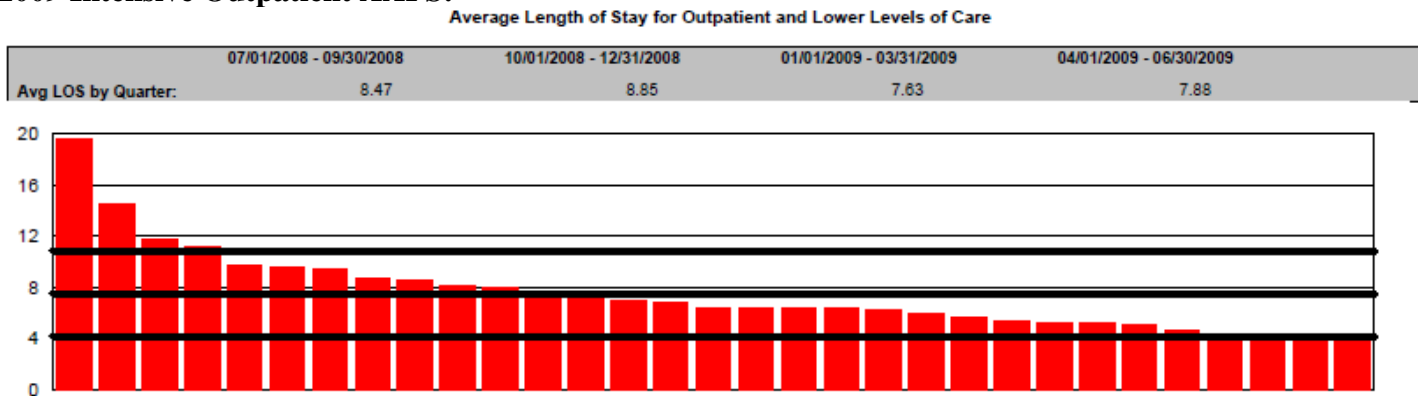
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Lower Levels of Care 2009 and 2010 Compared:

AAPS FUNDED

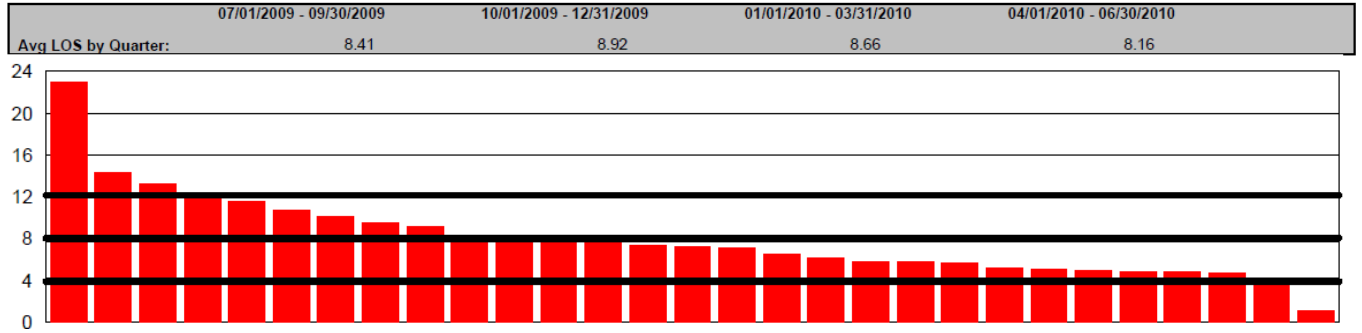
2009 Intensive Outpatient AAPS:



2010 Intensive Outpatient AAPS:

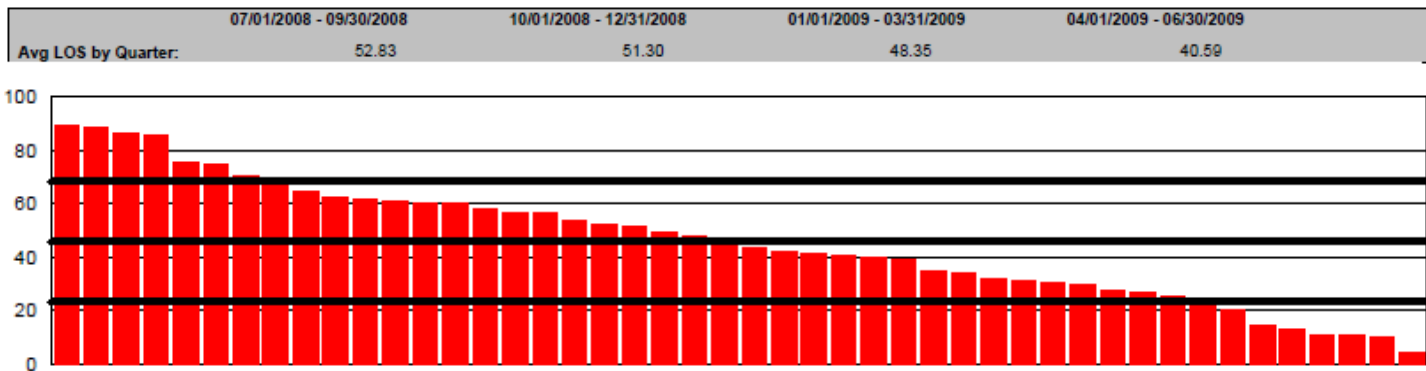
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Average Length of Stay for Outpatient and Lower Levels of Care



2009 Outpatient AAPS:

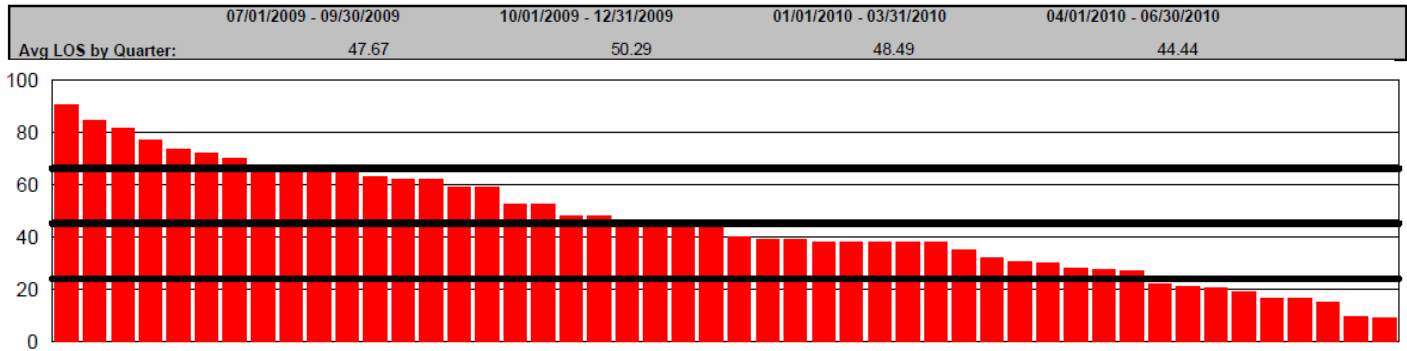
Average Length of Stay for Outpatient and Lower Levels of Care



2010 Outpatient AAPS:

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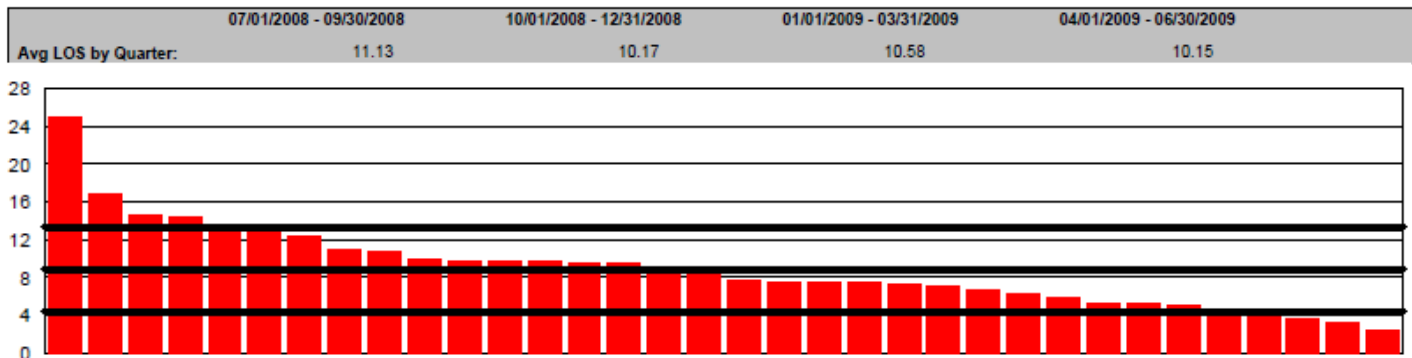
Average Length of Stay for Outpatient and Lower Levels of Care



MEDICAID

2009 Intensive Outpatient Medicaid:

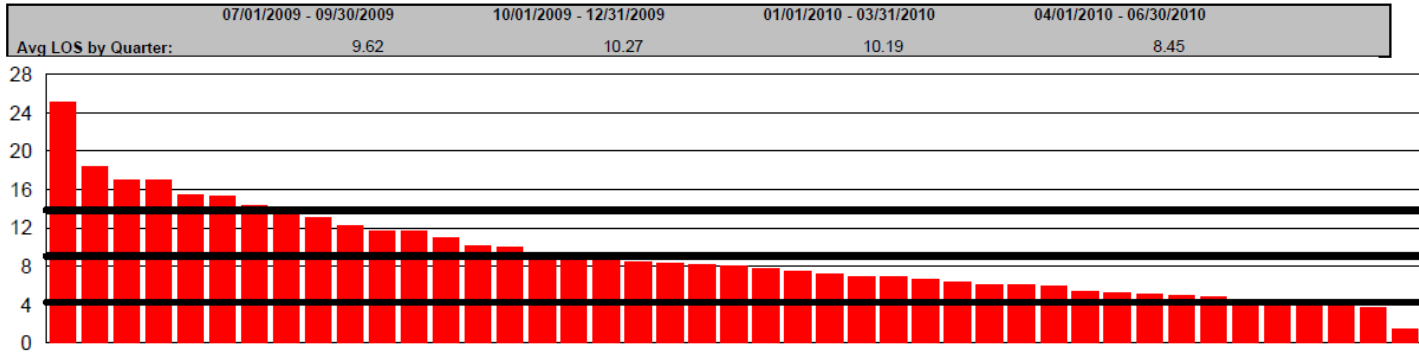
Average Length of Stay for Outpatient and Lower Levels of Care



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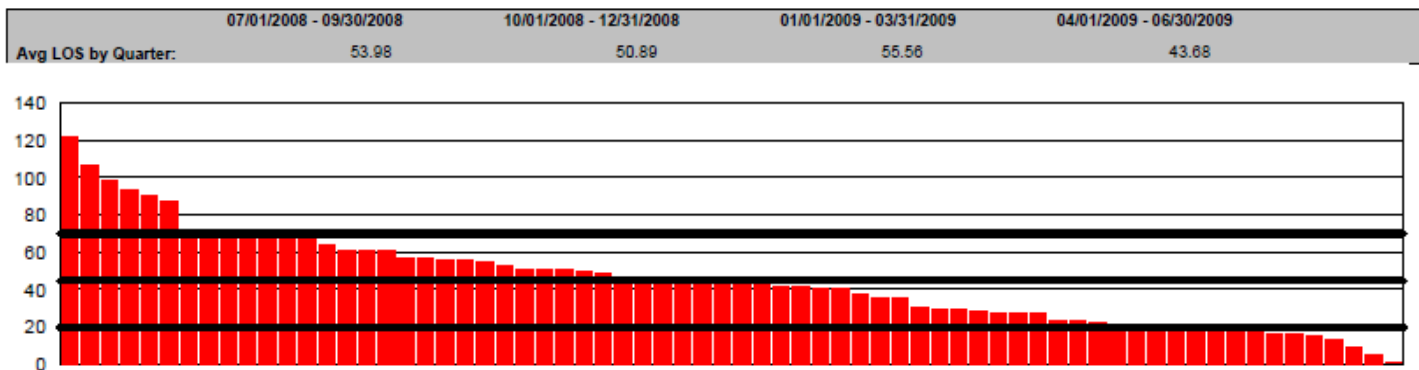
2010 Intensive Outpatient Medicaid:

Average Length of Stay for Outpatient and Lower Levels of Care



2009 Outpatient Medicaid:

Average Length of Stay for Outpatient and Lower Levels of Care



2010 Outpatient Medicaid:

Average Length of Stay for Outpatient and Lower Levels of Care



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