

## Capacity and Waiting List Management System Overview

### **Weekly Substance Abuse Capacity Report and Weekly Substance Abuse Priority Waiting/Interim Services List**

#### *Reporting Process:*

The Weekly Substance Abuse Capacity Report and Weekly Substance Abuse Priority Waiting/Interim Services List will be completed by the Behavioral Health Network Providers and submitted to the Regional Behavioral Health Authority (RBHA) each week.

The RBHA will collect and analyze the data to reveal trends and/or possible concerns at the regional level. The RBHA will aggregate the data providers submit to them and provide an aggregated regional-level report to Ying Wang at the Division of Behavioral Health (DBH) via email every Tuesday.

The DBH data team will aggregate the regional data to track trends on a state level, including:

- a. total and available substance abuse treatment service capacity (purchased and not purchased);
- b. substance abuse treatment programs that are at or above 90% capacity;
- c. the number of individuals who are waiting for substance abuse treatment by priority population level;
- d. the length of time individuals remain on the waiting list; and
- e. if individuals are receiving interim services.

Please note that all individuals who are documented on the Weekly Substance Abuse Priority Waiting/Interim Services List must receive interim services while waiting.

The DBH data team will share this information with DBH and RBHA staff, and the DBH Field Representatives will briefly discuss with regions any capacity and waiting list issues revealed from the previous week's forms at the end of the weekly Regional Center calls on Tuesday.

#### *Weekly Substance Abuse Capacity Report Notes:*

The RBHAs will use the attached Weekly Substance Abuse Capacity Report spreadsheet to submit substance abuse capacity data to the DBH. The RBHAs can use the same form or some variation of this form to collect data from the Behavioral Health Network Providers if they choose to do so. However, the RBHAs must submit data to the DBH using the attached form in its existing format.

The reporting week runs Monday through Sunday. 'Total agency capacity used today' and 'total region capacity used today' should reflect capacity on Sunday. The "total # on waiting list" and the "# eligible for reimbursement" should also reflect the number of individuals on the waiting list on Sunday.

Medicaid matched services will be captured in the 'total agency capacity' section of the report but should not be included in the 'region capacity' section.

Regional capacity should remain static from week to week. It should reflect the number of units or slots that RBHAs purchase at the beginning of the fiscal year, rather than the number of units or slots RBHAs actually draw down during the reporting period.

The entire labels for each of the priority population level acronyms in the columns at the top of each spreadsheet are included in a text box at the end of each sheet. Please note that "intravenous drug users" should only be used in cases in which the individual is currently 1) injecting drugs intravenously, or 2) seeking treatment for intravenous drug use but not using right now (e.g., temporarily abstaining yet still waiting for services). In other words, past intravenous drug use does not qualify an individual to be placed in either of the intravenous drug user categories unless the person is currently seeking treatment for that use. Also, women with dependent children include women who are trying to regain custody of their children.

Please see other specific instructions and definitions in the attached forms.

*Weekly Substance Abuse Priority Waiting/Interim Services List Notes:*

The RBHAs will use the attached Weekly Substance Abuse Priority Waiting/Interim Services List spreadsheet to submit substance abuse waiting list data to the DBH. The RBHAs can use the same form or some variation of this form to collect data from the Behavioral Health Network Providers if they choose to do so. However, the RBHAs must submit data to the DBH using the attached form in its existing format.

All information provided on the Weekly Substance Abuse Priority Waiting/Interim Services List will be done so in a manner that does not identify the individual. However, the DBH needs to be able to identify individuals who may be on multiple lists in multiple regions. For that reason, the DBH is asking providers and RBHAs to use a unique consumer identifier containing the first four characters of the last name + date of birth (YYYYMMDD) + the last four numbers of the social security number to identify individuals. In cases in which the individual's last name is less than four characters, spaces should be used to fill the remaining characters. In cases in which the individual is not a citizen and

has an “alien number”, the last four digits of that number should be substituted for the last four digits of a valid social security number.

The Weekly Substance Abuse Priority Waiting/Interim Services List should only contain those individuals who are:

- a. waiting for admission into an ASAM substance abuse service;
- b. eligible for regional reimbursement and fall into one of the priority population categories; and
- c. waiting for service at least one of the seven days in the reporting period.

The entire labels for each of the priority population level acronyms in the columns at the top of each spreadsheet are included in a text box at the end of each sheet. Please note that “intravenous drug users” should only be used in cases in which the individual is currently 1) injecting drugs intravenously, or 2) seeking treatment for intravenous drug use but not using right now (e.g., temporarily abstaining yet still waiting for services for IV drug use). In other words, past intravenous drug use does not qualify an individual to be placed in either of the intravenous drug user categories unless the person is currently seeking treatment for that use. Also, women with dependent children include women who are trying to regain custody of their children.

For each individual on the priority waiting list (purple interim service page) specify if he/she is a parent/legal guardian of a youth who is currently involved with the Division of Children and Family Services (CFS) or a Lead Agency-contracted with CFS. In the appropriate column, indicate with a check mark if the individual on the waiting list is the parent/legal guardian of a youth who is court involved with CFS/Lead Agency or non-court involved with CFS/Lead Agency. If the parent/legal guardian has no current involvement with the Division of Children and Family Services (court involved or non court involved) leave the field blank.

The form contains a column to identify which individuals are waiting for admission into the ASAM service recommended in their initial face-to-face assessment and which individuals are waiting for a transitional or step-down service (or as part of the discharge plan) from that initial service. This will allow the RBHAs and the DBH to ensure that individuals awaiting admission into the ASAM service recommended in their initial assessment are admitted into that service within the appropriate timeframes and receive interim services while waiting.

A person on the waiting list who is offered admission to treatment but declines should be asked if they want to continue to pursue treatment. Based on their response:

1. The individual who states they are no longer interested in pursuing treatment should be removed from the waiting list. On the ‘reason removed from the waiting list’ field, please note “did not show” or “refused treatment at this time” and write the date they were scheduled to be admitted to treatment.

2. If the individual is still interested in the treatment and needs to continue on the waiting list, they should be placed on the waiting list again and the 'date place on waiting list' should start over.

If the individual was removed from the waiting list by the end of the reporting period, they should still be captured on the waiting list with the 'date removed from waiting list' and 'reason removed from waiting list' fields completed. Individuals who were removed from the waiting list prior to the start of the current reporting period should not be included on the waiting list.

Incarcerated individuals should not be included in the waiting list unless their only condition for being released is admission into a substance abuse treatment program.

Additional Monitoring of Interim Service Provision:

Behavioral Health Network Providers are required to maintain contact with individuals on the waiting list a minimum of every seven days from the initial assessment. Providers must also arrange for the provision of interim services to individuals who are awaiting admission into their appropriate recommended treatment. Because the Weekly Substance Abuse Priority Waiting/Interim Services List form does not capture all of the information needed to track client contact and the provision of interim services, these activities will be monitored via regional audits.

To facilitate these regional audits, providers must maintain documentation of the following:

1. Client unique identifier, date of birth, name, address, phone, and alternate address and phone (if applicable);
2. Date of the initial face-to-face assessment, the treatment type recommended in that assessment, and the date placed on the waiting list;
3. Priority population category for admission;
4. Whether the client was referred to another agency, the provider to which the client was referred, the date the referral was made, and whether the client accepted the referral;
5. Whether the client was placed in interim services and the type of interim services;
6. Any counselor/client follow-up (minimum contact of every seven days from initial assessment) including the date and type of contact and name of staff person;
7. Number of days before the client is placed in the recommended treatment; and
8. Date and reason for removal from the waiting list if the client was not placed into the appropriate recommended treatment.

The details of the regional audits are to be discussed, revised, and finalized with the Statewide Audit Workgroup. The general process however, will be as follows:

1. RBHA audit staff will review the interim service documentation maintained by the provider and noted above at the time of the provider's program fidelity review using a Substance Abuse Prevention and Treatment Block Grant tool.
2. The results of this review will be included in a report to the RBHA. A copy will be shared with the provider and the assigned DBH Field Representative, and technical assistance will be offered to the provider if needed.
3. DBH data team members will aggregate and analyze audit data and present it to the DBH program staff assigned to manage the treatment capacity and waiting lists.

4. DBH will share aggregate data with RBHA staff and providers through the quality improvement structure to ensure ongoing improvement and compliance with federal block grant requirements.

## Monthly Mental Health Capacity Report

### *Reporting Process:*

The Monthly Mental Health Capacity Report will be completed by the Behavioral Health Network Providers and submitted to the Regional Behavioral Health Authority (RBHA) each month on the second Monday of the month.

The RBHA will collect and analyze the data to reveal trends and/or possible concerns at the regional level. The RBHA will aggregate the data providers submit to them and provide an aggregated regional-level report to Ying Wang at the DBH via email each month on the Tuesday immediately following the second Monday of the month.

The DBH data team will aggregate the regional data to track trends on a state level, including:

- a. total and available mental health treatment service capacity (purchased and not purchased);
- b. mental health treatment programs that are at or above 90% capacity; and
- c. the number of individuals who are waiting for mental treatment by priority population level.

The DBH data team will share this information with DBH and RBHA staff.

### *Report Notes:*

The RBHAs will use the attached Monthly Mental Health Capacity Report spreadsheet to submit mental health capacity data to the DBH. The RBHAs can use the same form or some variation of this form to collect data from the Behavioral Health Network Providers if they choose to do so. However, the RBHAs must submit data to the DBH using the attached form in its existing format.

The same instructions for completing the Weekly Substance Abuse Capacity Report can be used to complete the Monthly Mental Health Capacity Report. However, the 'total agency capacity used today' and 'total region capacity used today' should reflect capacity on the second Sunday of the month. The "total # on waiting list" and the "# eligible for reimbursement" should also reflect the number of individuals on the waiting list on the second Sunday of the month.

To avoid duplicated counts, clients who are receiving or waiting to receive dual diagnosis services should be added to the Weekly Substance Abuse Capacity Report (and the Weekly Substance Abuse Priority Waiting/Interim Services List if applicable) and omitted from the Monthly Mental Health Capacity Report.

Medicaid matched services will be captured in the 'total agency capacity' section of the report but should not be included in the 'region capacity' section.

Regional capacity should remain static from week to week. It should reflect the number of units or slots that RBHAs purchase at the beginning of the fiscal year, rather than the number of units or slots RBHAs actually draw down during the reporting period.

Please note that as of March 2010, the priority population levels for the Monthly Mental Health Capacity Report have changed. The categories now include 1) persons in a Regional Center on discharge ready implementation lists (including Mental Health Board commitments and other legal statuses), 2) persons in a community inpatient setting (acute or sub-acute) or crisis center and who are awaiting discharge, and 3) persons committed to outpatient care by a Mental Health Board.

Please see other specific instructions and definitions in the attached forms.

## **Capacity and Waiting List Management Data Reports**

The following information may be presented in monthly data reports to Behavioral Health Network Providers, RBHAs, and the DBH, and/or discussed on the weekly calls and through the quality improvement structure:

- Number of individuals on the waiting list by service and by priority population for the region and state;
- Average wait time by service and by priority population for the regions and the state;
- Total capacity by service for the regions and the state;
- Regional purchased capacity by service and by provider for the region and the state (not to include any Medicaid services that RBHAs provide match funding);
- Number of individuals receiving interim services within 48 hours (per regional audit findings);
- Average length of interim services (per regional audit findings);
- Number of priority population served within 14 days or 120 days;
- Number of Magellan authorized or registered interim services for individuals on the waiting list by service for the region and the state; and
- Reason for removal from waiting list by service and by provider for the region and the state.