

DSRIP Data Workbook Series
Part 2: Behavioral Health – Revised 5/14/14

DOH and Salient Management Company have prepared a series of Data Workbooks as a resource to DSRIP applicants in preparing their grant applications. The source of this data is the Salient NYS Medicaid System used by DOH for Medicaid management. Workbooks can be used to assist potential DSRIP performing provider networks with better understanding of who the key Medicaid providers are in each region to assist with network formation and a rough proxy for Medicaid volume for DSRIP valuation purposes. More interactive data in dashboard format will be available in June. The first set of workbooks focused on all Inpatient, Clinic, Emergency Room and Practitioner services. This second set focuses on Behavioral Health services.

Overview:

Behavioral Health Service Claims: Data is provided on total Medicaid utilization of Behavioral Health services by provider. Behavioral Health services include inpatient and outpatient, mental health and substance use disorder claims. Criteria for inclusion include rates, procedures, and DRG's identified by OMH and OASAS specific to mental health and substance use disorders. **Please note: This revision has been updated to include Evaluation and Management codes with mental health diagnoses. Counts, Members and Top 50 providers have changed from the 5/13/14 version.**

Time Frame: All data are for dates of service between July 1, 2012 and June 30, 2013. This year was chosen to ensure that the vast majority of services that were rendered during this time period have been paid for and are therefore reflected in the dataset.

Regional Workbooks: Data workbooks are organized by 11 Population Health Improvement Program (PHIP) regions. Regions are defined by DOH and include: Capital Region, Central NY, Finger Lakes, Long Island, Mid-Hudson, Mohawk Valley, NYC, North Country, Southern Tier, Tug Hill Seaway, and Western NY. Within each region are tabs for the provider service counties that make up the region (see map below). Provider Service County is defined as the service location of the provider.

With the data in these workbooks, the user can identify the major providers who care for Medicaid members in that region – no matter which county in the region their patients come from. Please note, if a provider has lower claim or member counts than expected, they may be serving members from outside the region in view or have locations in multiple regions.

Top 50 Providers: Each of the regional workbooks is built up from a list of the top 50 providers in each county. When creating the regional summary view, any provider who made the top 50 ranking in any of the counties is included along with all of their activity in the region.

Measures: Each workbook includes two measures for all Behavioral Health services:

- Claim counts – A count of the services (fee-for-service claims and managed care encounters) rendered during the measurement year. Claim counts may include a combination of claims that represent visits, services, stays or months, depending on the mix of services rendered by the provider.
- Unduplicated Member count – A count of the individual members who had one or more services from that provider during the year.

Format: All datasets are in Excel workbooks by Region. Each column includes drop-down filtering capability so you can view data by select values or ranges.

PHIP Regions Used for Workbooks:

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|-------------------|--------------------|----------------|
| 1. Long Island | 6. North Country | 11. Western NY |
| 2. NYC | 7. Tug Hill Seaway | |
| 3. Mid-Hudson | 8. Central NY | |
| 4. Capital Region | 9. Southern Tier | |
| 5. Mohawk Valley | 10. Finger Lakes | |



