L.A. Care eManagement Evaluation

Prepared by JSI
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Agenda

1| Evaluation Goals

2| Design & Methods

3| Key Findings

4| Recommendations

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Evaluation Goals

1│ Implementation

- Usage
- Provider experiences
- Provider satisfaction
- Barriers and drivers to usage

2│ Effectiveness

- Access to behavioral health services
- Quality of care
- Health care utilization

Mixed-Methods Evaluation Design

QUANTITATIVE

eManagement Program Data
(n=103 providers)

Encounter Data
(n= 264,602 encounters)

Claims and Eligibility Data
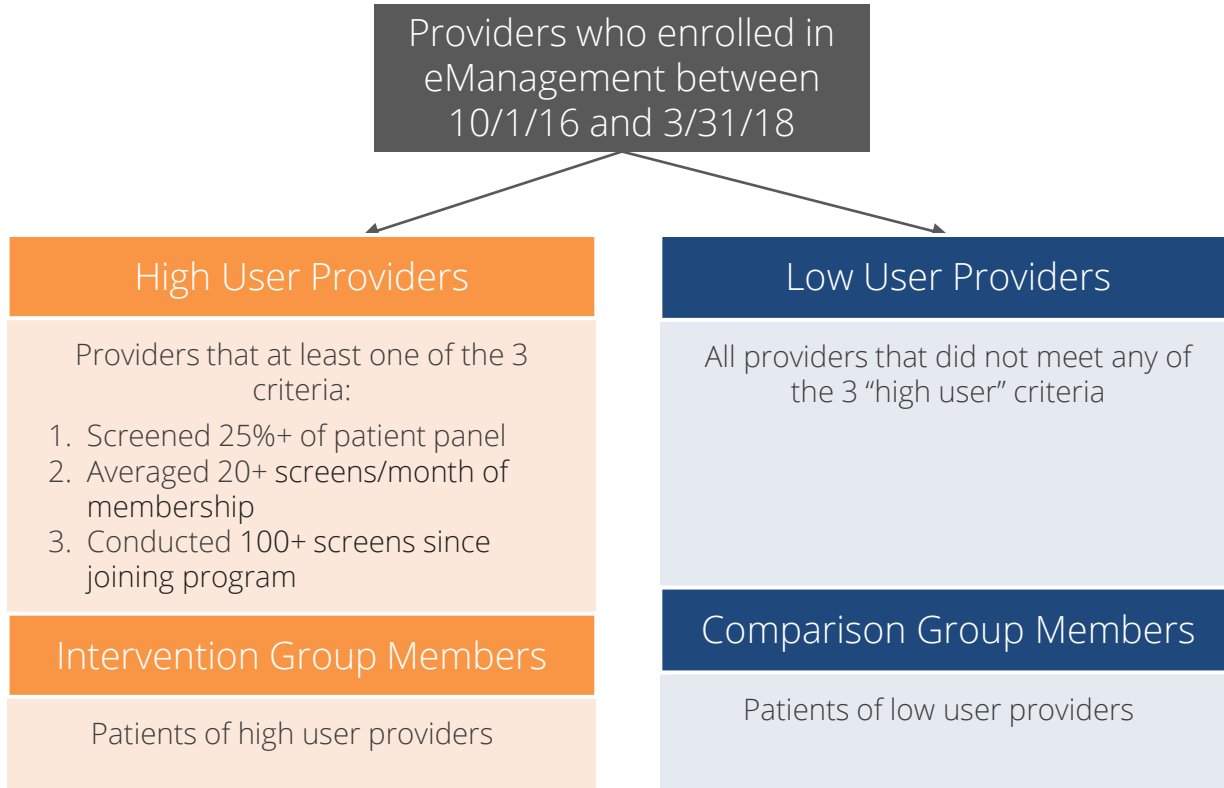(n=75,111 members)

Dual Screening Program Data
(n=3,471 members)

Online Provider Survey
(n=37 providers)

QUALITATIVE

L.A. Care Program Team
Interview (n=1 program team)

Provider Interviews
(n=12 providers)

Quasi-Experimental Strategy

Providers who enrolled in eManagement between 10/1/16 and 3/31/18

High User Providers

Providers that at least one of the 3 criteria:

1. Screened 25%+ of patient panel
2. Averaged 20+ screens/month of membership
3. Conducted 100+ screens since joining program

Intervention Group Members

Patients of high user providers

Low User Providers

All providers that did not meet any of the 3 "high user" criteria

Comparison Group Members

Patients of low user providers

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Key Findings

Finding #1:

eManagement use, although still limited, enabled improved access to behavioral health services for L.A. Care members.

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eManagement enabled access to behavioral health services, especially in the case of members of high users.

eManagement Use among All, High, and Low Users

|	All Users	High Users	Low Users
Number of providers	103	33	70
Total panel size	136,064	56,659	79,405
Total screenings	16,231	13,934	2,297
% of all screenings	–	86%	14%
% of all positive screenings	–	79%	21%
Total dialogues submitted	234	201	33
% of all dialogues submitted	–	86%	14%
Average # of screenings per provider per month	8.5	22.1	2.1

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Among members receiving repeat screenings, eManagement may have facilitated timely detection of behavioral health conditions and improvement of existing conditions.

Changes in Behavioral Health Conditions Scores and Diagnosis

	PHQ9	GAD	SHA
Number of members receiving a repeat screening	248	207	65
% of members with a change in score	94%	95%	91%
% of members with a change in diagnosis	87%	89%	91%
% of score changes indicative of new diagnosis	37%	34%	38%
% of score changes indicative of condition improving	55%	57%	56%
% of score changes indicating of condition worsening	45%	43%	44%

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Majority of consults submitted were resolved in the office as 'patient needs addressed (PNA),' suggesting improved access to screening and specialists may have resulted in the reduction of avoidable specialty referrals and may have averted costs.

80% of consults closed as PNA

234
All Consults

188
Consults Closed as PNA
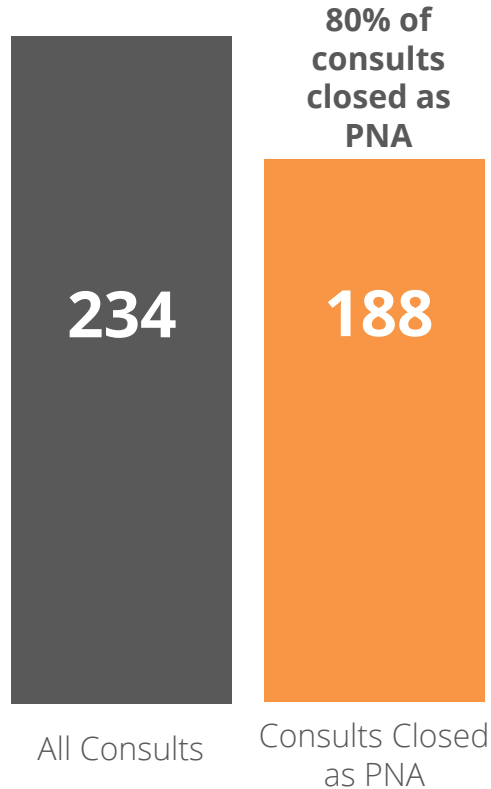
$ **Estimated savings:**

$32,401.80

Data Sources: eManagement data and specialty outpatient visit cost estimate from L.A. Care.
Estimated cost savings calculated as:
Number of consults closed as PNA X average cost per specialty outpatient visit @$172.35.

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"There have been times, I have put in a Consult just for the sheer benefit of having someone to speak to about the issue and I'm glad I did because I got new information and I learned a lot."
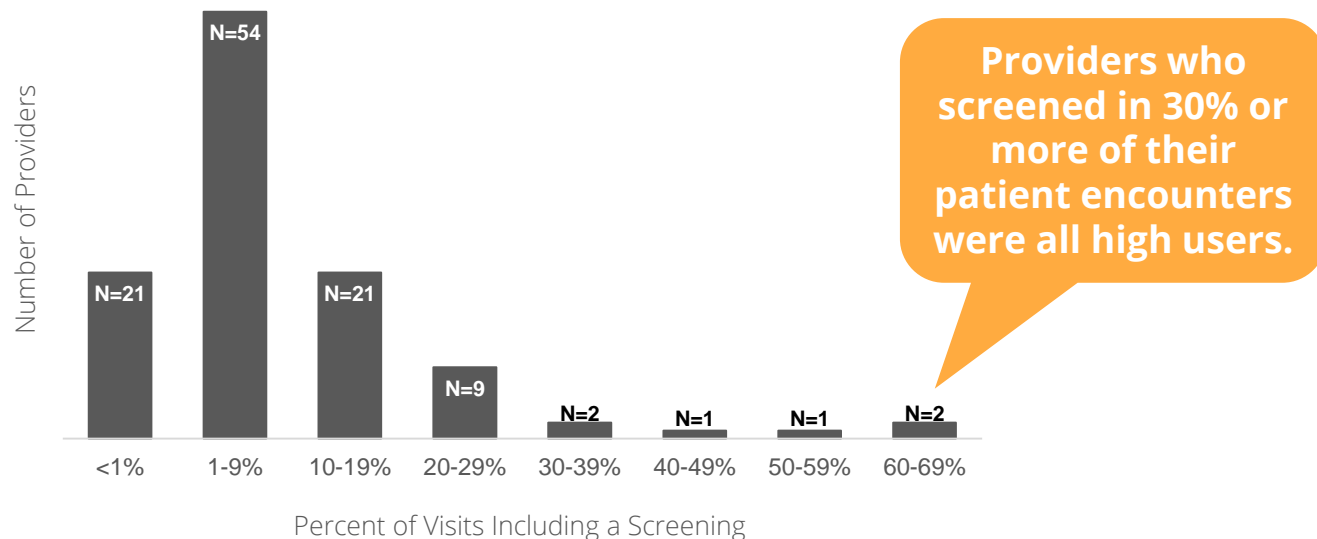
— Provider

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Overall, while eManagement has enabled access to behavioral health services, opportunities for improvement exist, particuarly related to program usage; currently most users are screenings in less than 10% of all patient encounters.

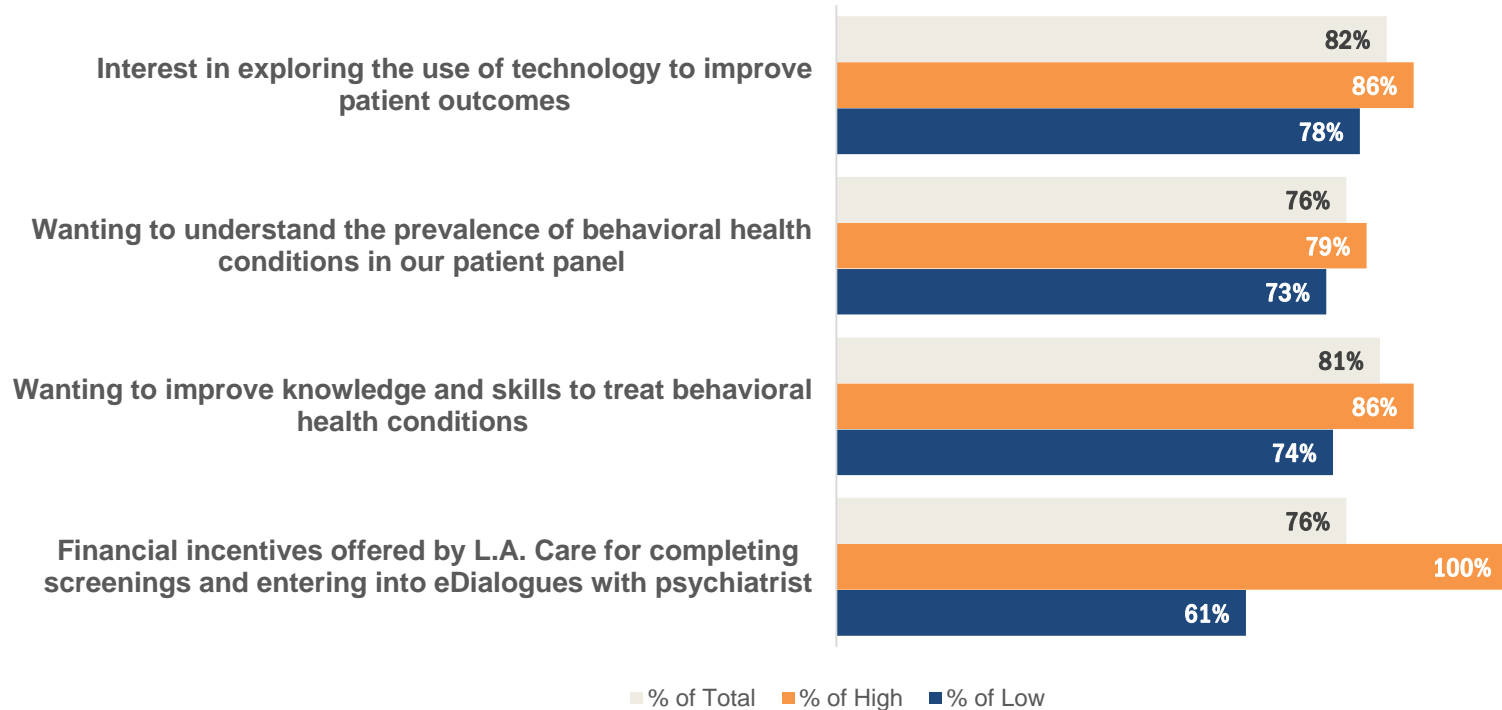**Percent of Patient Visits including an eManagement Screening**

Providers who screened in 30% or more of their patient encounters were all high users.

Data Source: eManagement program data. Data included n=264,602 encounters among n=111 providers

Finding #2:

eManagement use supported improvements in quality of care provided to L.A. Care members.
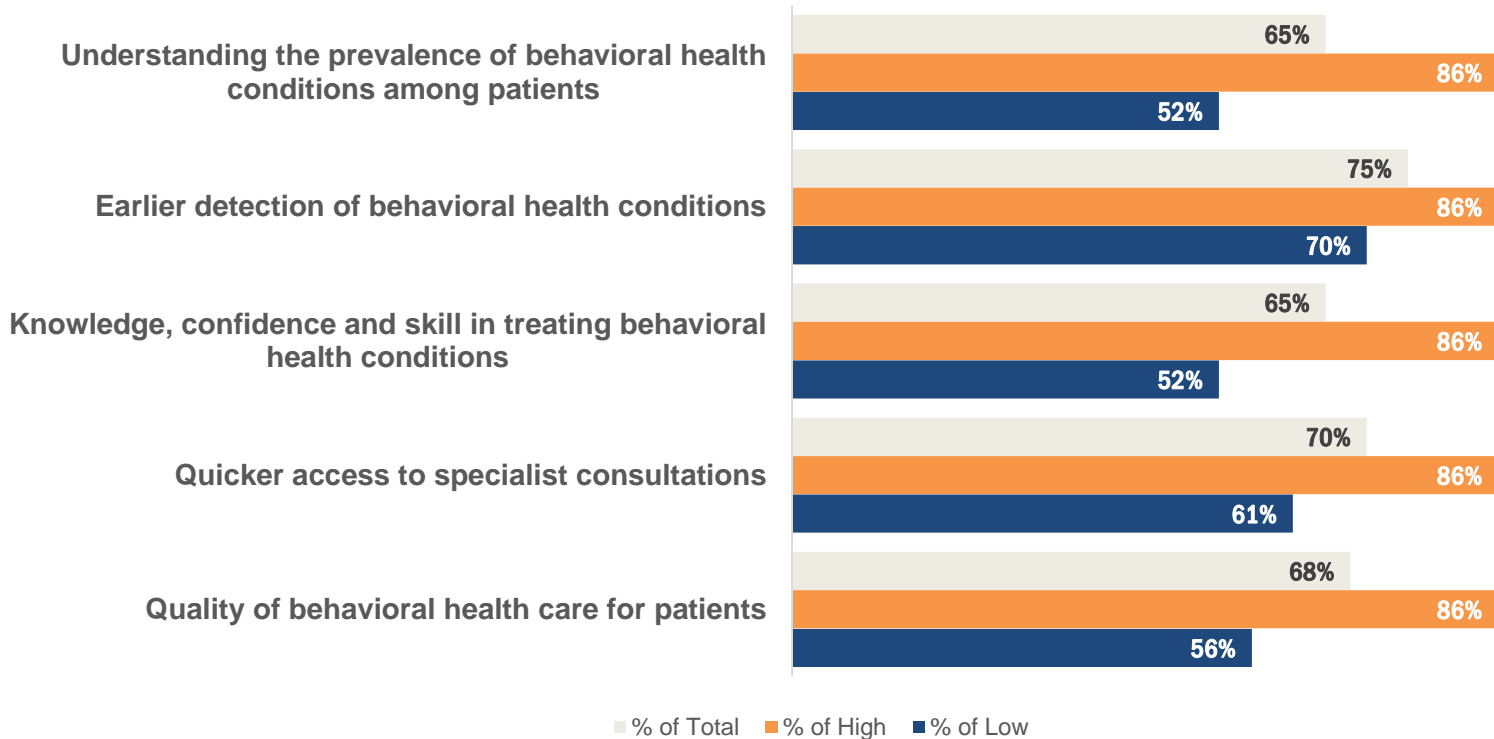
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There is a strong alignment between users' reasons for joining the program and the L.A. Care's team program goals.

Provider perceptions on reasons for joining eManagement

Interest in exploring the use of technology to improve patient outcomes
- % of Total: 82%
- % of High: 86%
- % of Low: 78%

Wanting to understand the prevalence of behavioral health conditions in our patient panel
- % of Total: 76%
- % of High: 79%
- % of Low: 73%

Wanting to improve knowledge and skills to treat behavioral health conditions
- % of Total: 81%
- % of High: 86%
- % of Low: 74%

Financial incentives offered by L.A. Care for completing screenings and entering into eDialogues with psychiatrist
- % of Total: 76%
- % of High: 100%
- % of Low: 61%

Legend: % of Total | % of High | % of Low

Data Source: Provider survey

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Users report high satisfaction on all aspects of use, from onboarding to user interface to maintenance and ongoing engagement.

*Provider perceptions on satisfaction with eManagement*

Understanding the prevalence of behavioral health conditions among patients
- % of Total: 65%
- % of High: 86%
- % of Low: 52%

Earlier detection of behavioral health conditions
- % of Total: 75%
- % of High: 86%
- % of Low: 70%

Knowledge, confidence and skill in treating behavioral health conditions
- % of Total: 65%
- % of High: 86%
- % of Low: 52%

Quicker access to specialist consultations
- % of Total: 70%
- % of High: 86%
- % of Low: 61%

Quality of behavioral health care for patients
- % of Total: 68%
- % of High: 86%
- % of Low: 56%

Legend: ■ % of Total ■ % of High ■ % of Low

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L.A. Care Users are highly satisfied with the experience and report a high likelihood of recommending eManagement to their colleagues, with high users reporting being more satisfied and more likely to recommend the program.

Satisfaction and likelihood to recommend to a colleague
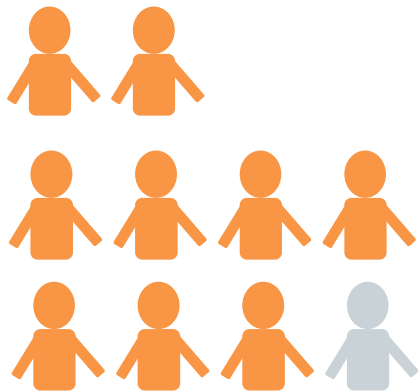
93% of high users said they were satisfied with their eManagement experience

93% of high users said they were likely to recommend eManagement to a colleague
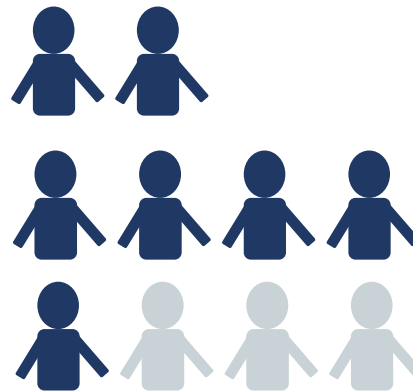
70% of low users said they were satisfied with their eManagement experience

70% of low users said they were likely to recommend eManagement to a colleague

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"I found it useful in more than one way. Sometimes it helps not only the clinicians but the clinic as a whole to see the importance of mental health....[The program] serves as a reminder to ask about mental health because so many physical problems come from mental health issues."
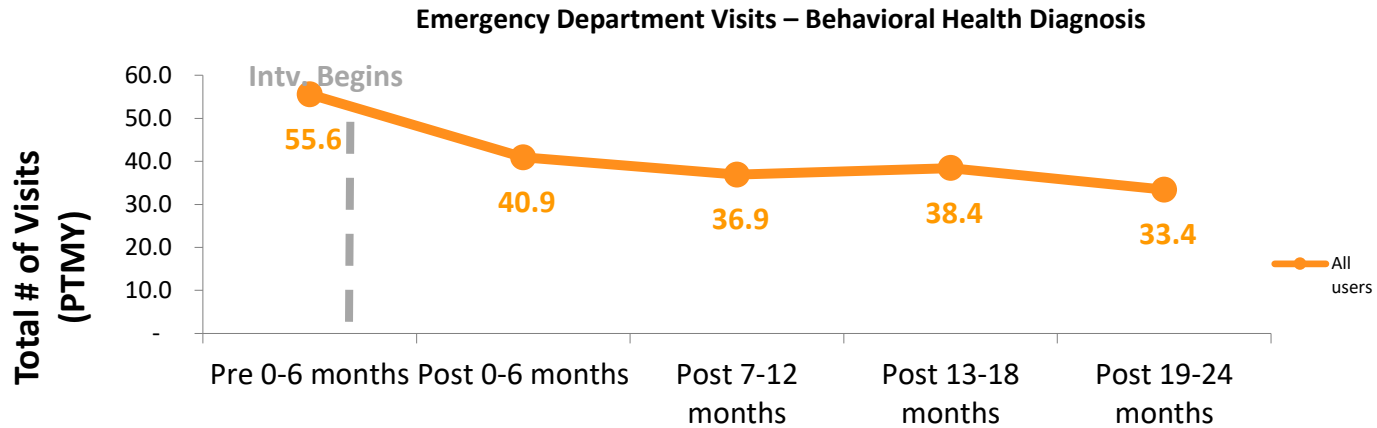
— Provider

"Now that we're screening patients more often patients seem to be opening up, telling us more about their issues, and seeking help. Those who need it are getting help."

— Provider

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Finding #3:

eManagement use redirected members from high-cost service utilization for behavioral bealth conditions to outpatient services over time.

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ED use associated with behavioral health diagnoses among members of eManagement users declined over time, compared to an upward trend in all cause ED use in a similar time period.
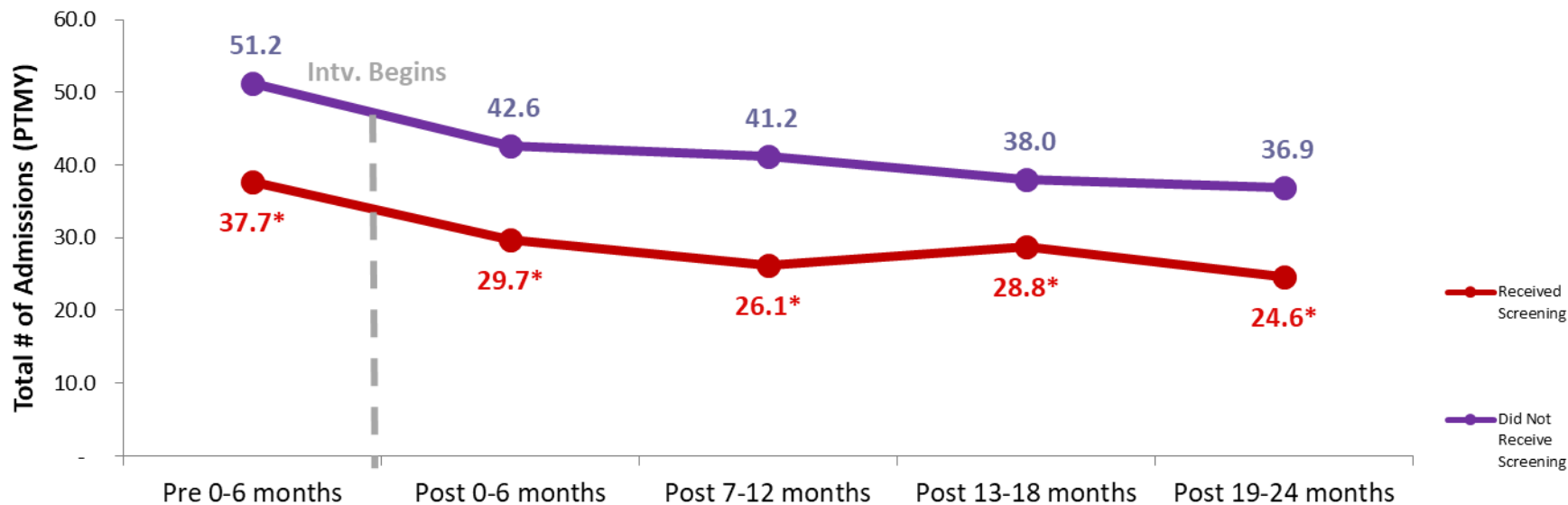
Emergency Department Visits – Behavioral Health Diagnosis

L.A. Care Emergency Department Visits – All Cause All Admissions
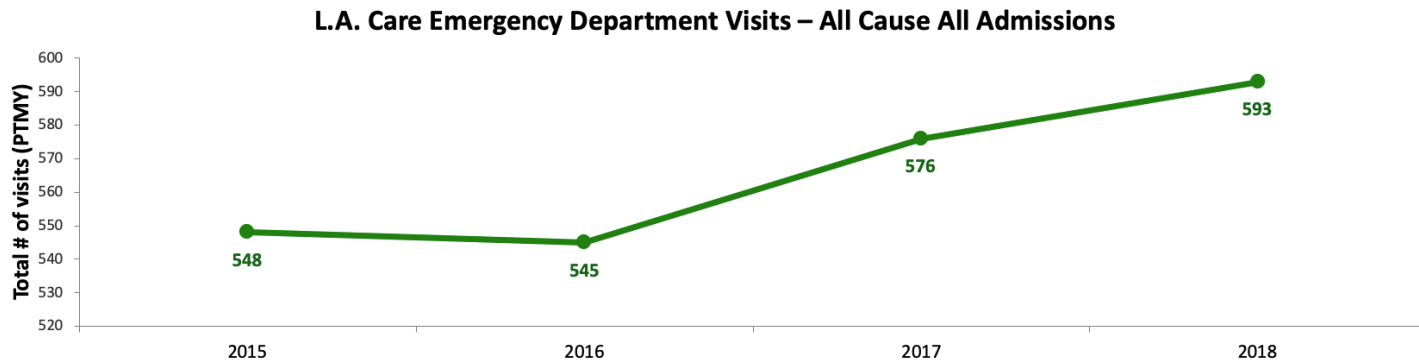
Declining trends in ED use were more pronounced among members who received behavioral health screening versus members who did not receive screening.

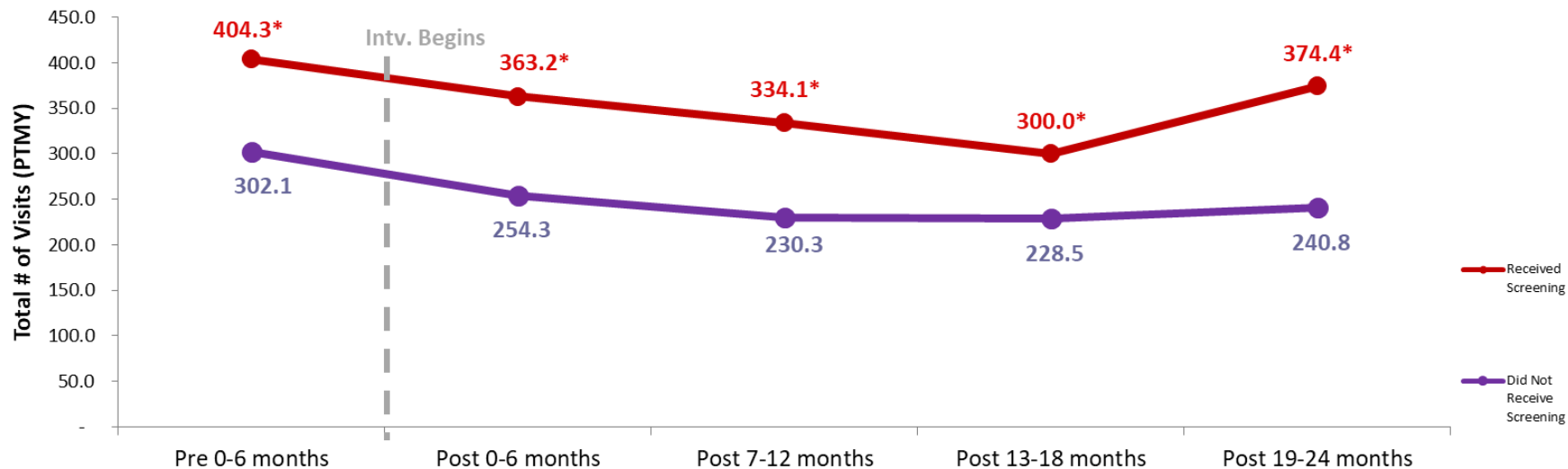**Emergency Department Visits Associated with a Behavioral Health Diagnosis**
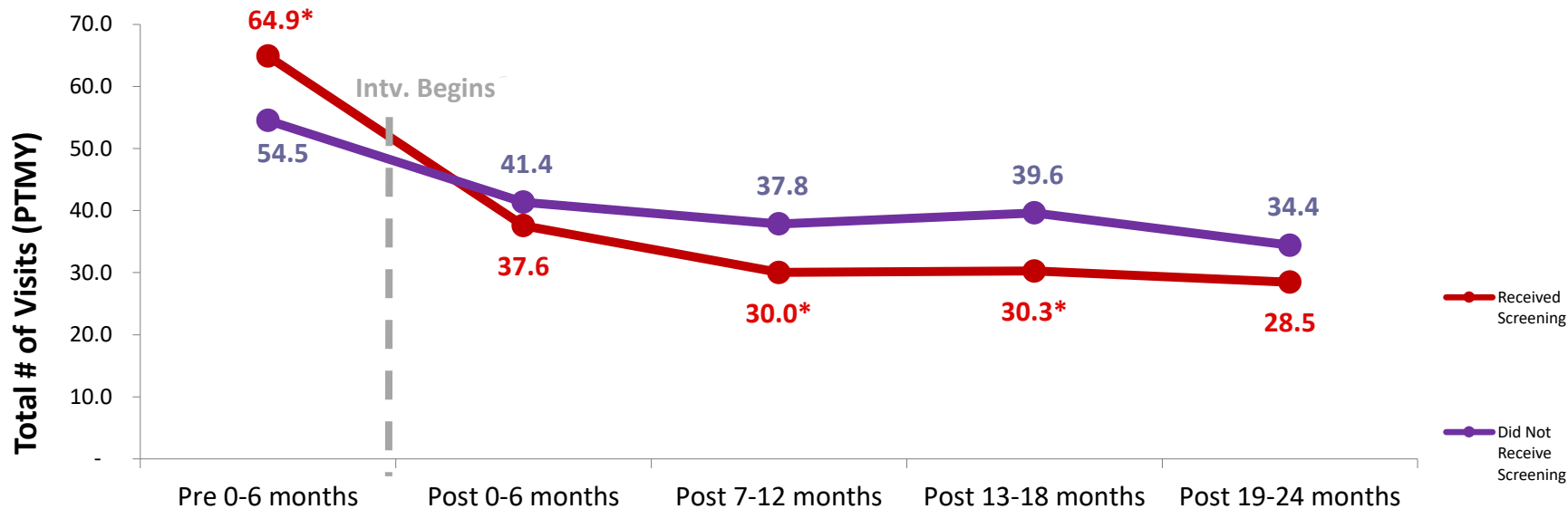
Declining trends in inpatient admission were even more pronounced among members who received behavioral health screening versus members who did not receive screening.

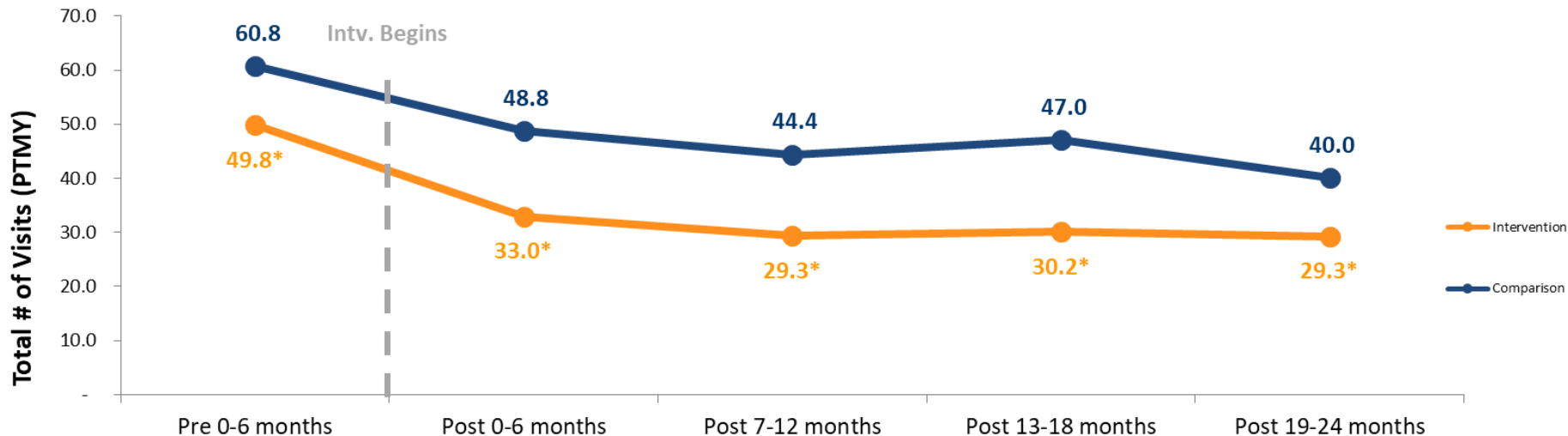**Inpatient Admissions Associated with a Behavioral Health Diagnosis**

Outpatient visits PTMY were higher among members receiving screening versus members who did not receive screening, and appeared to rise more steeply at the post 19-24 month period compared to members not receiving screening.

Outpatient Visits Associated with a Behavioral Health Diagnosis
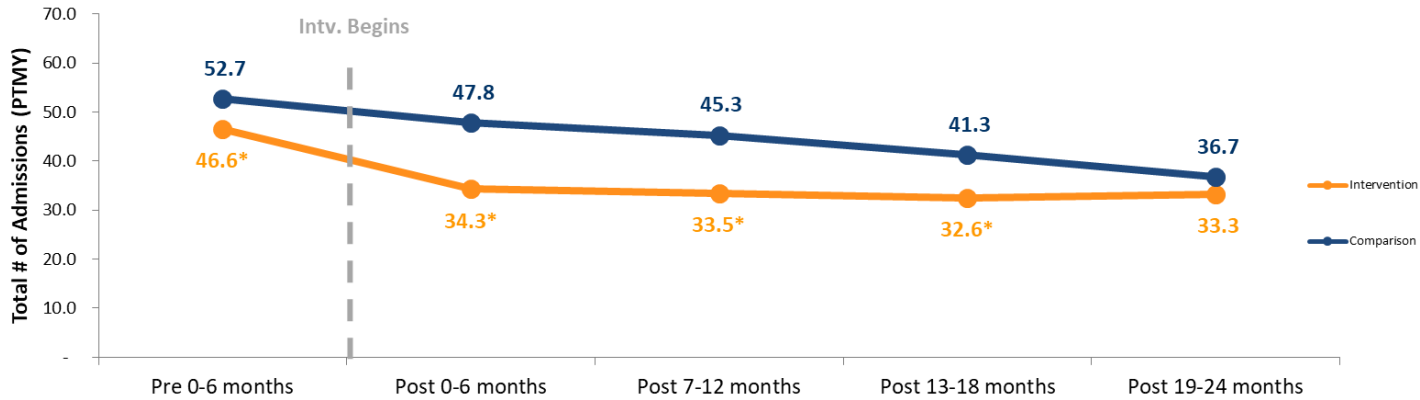
Data Source: L.A. Care claims data
* p<.05

Comparing utilization trends among members of high versus low users, both groups experienced declines in ED visits and inpatient admissions and increases in outpatient visits – indicative of a shift away from high-cost services to outpatient services.
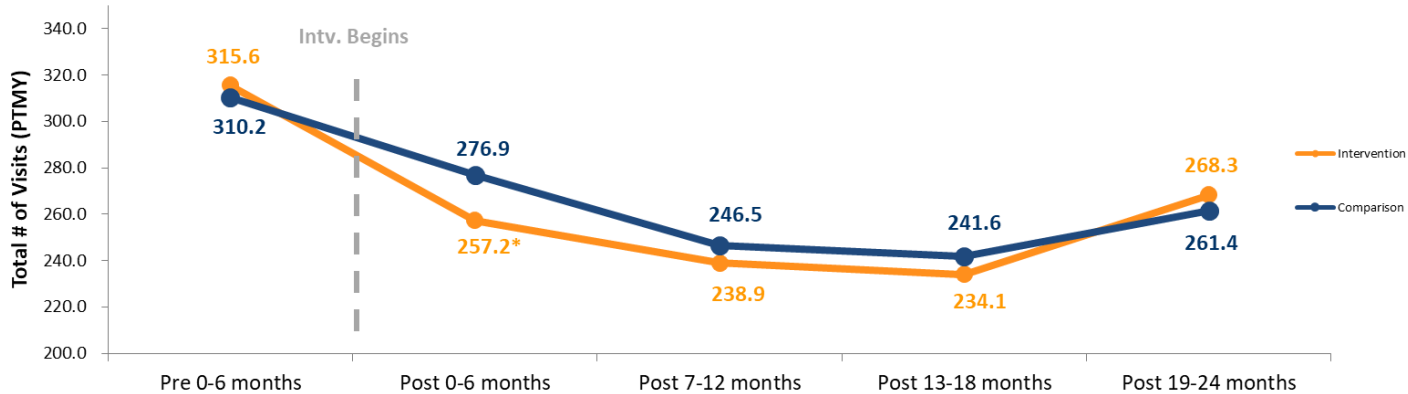
Emergency Department Visits Associated with a Behavioral Health Diagnosis

Inpatient Admissions Associated with a Behavioral Health Diagnosis

Intv. Begins

Pre 0-6 months | Post 0-6 months | Post 7-12 months | Post 13-18 months | Post 19-24 months

Comparison: 52.7, 47.8, 45.3, 41.3, 36.7
Intervention: 46.6*, 34.3*, 33.5*, 32.6*, 33.3

Total # of Admissions (PTMY)

Outpatient Visits Associated with a Behavioral Health Diagnosis

Intv. Begins

Pre 0-6 months | Post 0-6 months | Post 7-12 months | Post 13-18 months | Post 19-24 months

Intervention: 315.6, 257.2*, 238.9, 234.1, 268.3
Comparison: 310.2, 276.9, 246.5, 241.6, 261.4

Total # of Visits (PTMY)

Data Source: L.A. Care claims data
* p<.05
Note: Inpatient admissions includes medical and/or surgical admissions.

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Sample Size by Time Period

Time Period	All members with active member months (N=75,111)	Members who received eManagement screening with active member months (n=8,361)	Members who did not receive eManagement screening with active member months n=66,750	Intervention Group members with active member months (n=37,624)	Comparison Group members with active member months (n=37,487)
0-6 pre intervention	61,072 (81%)	7,203 (86%)	53,869 (81%)	30,258 (80%)	30,814 (82%)
0-6 post intervention	68,566 (91%)	7,965 (95%)	60,601 (91%)	34,192 (91%)	34,374 (92%)
7-12 post intervention	73,153 (97%)	8,282 (99%)	64,871 (97%)	36,559 (97%)	36,594 (98%)
13-18 post intervention	59,409 (79%)	7,359 (88%)	52,050 (78%)	29,963 (80%)	29,446 (79%)
19-24 post intervention	24,629 (33%)	4,092 (49%)	20,537 (31%)	15,000 (40%)	9,629 (26%)

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Reductions in high-cost utilization may result in cost savings over time.

Estimated savings among members receiving eManagement screening in the 24 months post eMangement period:

$591,065
by averting
130 inpatient admissions

$180,548
by averting
419 ED visits

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Recommendations

1. Focus on high user practices with customized approach to improve services.

2. Expand to additional practices with high user characteristics.

3. Work with Beacon as the specialty network.

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Next 90 Days Work

1. Create customized plan with high user practices to improve services.

2. Do market assessment to include additional practices with high user characteristics.

3. Continue to look into Beacon as the specialty network and towards contracting.

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Thank You