

# 2011 Demographic, Utilization and Network Capacity Study

---

Compiled and Produced by the  
Network Operations Department



## **2011 Demographic, Utilization and Network Capacity Study**

### **Executive Summary**

The 2011 Demographic, Utilization and Network Capacity Study is based on 2010 Calendar Year data. The Study includes an analysis of PBH eligible/consumer demographic characteristics by age, gender, race, prevalence of mental illness, developmental disabilities, and substance abuse, Medicaid eligibility, and number of uninsured. This year's study includes a comparison of 2010 Calendar Year data to 2009 Calendar Year data and 2006 Calendar Year data for the racial and ethnic demographics for Cabarrus, Davidson, Rowan, Stanly, and Union Counties. This data looks at the overall racial and ethnic makeup of our catchment area as well as the number and percent of consumers served by PBH through our Provider Network by both race and ethnicity.

The Study analyzes utilization patterns by service, service category (Basic, Augmented, or Enhanced), and disability specific utilization patterns. These patterns are also analyzed by funding source (Medicaid or State Funds). The 2011 Study includes unmet needs for Mental Health, Developmentally Disabled, and Substance Abuse consumers; however, it is believed that the unmet Mental Health and Substance Abuse continue to be significantly underreported.

The Study analyzes Provider capacity in terms of agency availability, individual practitioner availability, and actual utilization. During Calendar Year 2010 PBH had a total of 239 fully contracted providers. This includes 3 Comprehensive Community Providers, 100 Agencies (most of who provide multiple services and serve multiple populations), 34 Licensed Independent Practitioner Groups, 90 stand alone License Independent Practitioners, 8 Hospital Inpatient Psychiatric programs, 3 Hospital Outpatient Psychiatric programs, and 1 LME (Mecklenberg LME for Social Setting Detox). The largest growth in the PBH Network is the Licensed Independent Practitioner Groups and stand alone License Independent Practitioners. During CY 2010 PBH's Provider Network provided 8,197,792 paid units of service to 21,732 consumers.

A total of 13,638 waiver participants from the PBH catchment area were served during CY 2010. The total number of Medicaid eligible consumers for the PBH catchment area during CY 2010 was 109,277. This equates to a Medicaid penetration rate of 12.48%.

The CY 2010 Study analyzes the "Actual Utilization to Capacity" and "Projected Capacity" for Innovations, Medicaid, and State Funds separately. This allows PBH to target areas in need of attention that may not be apparent in an analysis that looks at all funding sources combined.

PBH experienced cuts in State funding in both Fiscal Year 2008-2009 and Fiscal Year 2009-2010. Fortunately PBH did not have additional cuts to its State allocation for FY 2010/2011. The decreases in State funding from the two previous Fiscal Years has continued to have a



negative effect on services for uninsured consumers and on our capacity for service development during the past three (3) years. North Carolina continues to experience budgetary shortfalls and restoration of State funding for mental health, developmental disabilities, and/or substance abuse services is unlikely for Fiscal Year 2011/2012. Most of the new initiatives planned for this fiscal year are limited to consumers that have Medicaid coverage or with funds from future savings from decreased use of state hospitals (based on use of community alternatives identified below).

A review of the 2010 Study as well as PBH's Local Business Plan indicates that PBH has met 4 of the 10 goals/priorities and made significant progress on 1 additional goals/priorities set forth in that document.

The 4 goals from the Local Business Plan/2010 Capacity Study that were met are:

1. Implement changes for the Innovations Waiver.
2. Evaluate the need for/utilization of Substance Abuse Intensive Outpatient Programs.
3. Evaluate the need for an additional Day Program in Davidson County for DD consumers.
4. Maximize the utilization of both the Union and Cabarrus Crisis Recovery Centers.

For FY 2011/2012 PBH will continue the following goals/priorities as permitted by funding;

1. The development of a substance abuse continuum of care for both children and adults.
2. Increased access to psychiatric care through development of a primary care co-location model.
3. Reduce the DD waiting list.
4. Increased access to higher levels of residential care for identified children.
5. Increase penetration into Specialty Medicaid Population Groups, as identified in the Medicaid Waiver.
6. Maximize the utilization of both the Union and Cabarrus Crisis Recovery Centers.
7. Decrease the use of Hospital Emergency Departments for the delivery of behavioral healthcare services.

The Network Development Plan has been incorporated into the PBH budget and Plan of Work for 2011-2012. Responsible PBH Departments or Cross Functional Teams are incorporated into the plan as well as accountability at the Senior and Executive management levels. Progress will be monitored through regular reports at the Executive and Board levels of the agency.



Creating solutions, *One person at a time*

## 2011 Demographic, Utilization and Network Capacity Study

This Capacity Study utilizes 2010 Calendar Year data from multiple sources including PBH’s CI Database, the United States Census Bureau, SAMHSA Office of Applied Studies, NC Division of Mental Health, Developmental Disabilities, and Substance Abuse Services (DMH), NC Division of Medical Assistance (DMA), North Carolina’s 2011 State Medical Facilities Plan, County GIS, and Wikipedia.

The PBH Catchment Area consists of five (5) counties, Cabarrus, Davidson, Rowan, Stanly, and Union, and covers approximately 2,500 square miles. The five counties are primarily rural with some moderate to large urban areas. The following table shows the distance from north to south and east to west for each county at their widest points. Please note the average distance from north to south is 25.82 miles and from east to west is 27.28 miles.

County	Square Miles	Miles North to South	Miles East to West
Cabarrus	365	21.3	26.7
Davidson	567	34.8	23.2
Rowan	524	23.2	32.3
Stanly	404	23.6	24.5
Union	640	26.2	29.7
total	2500		
average	500	25.82	27.28

The total population for the PBH catchment area for calendar year 2010 was estimated to be 736,174 with 204,240 (28%) between the age of 0 and 18 years and 531,934 (72%) 19 years of age or older. The following chart shows the break down of population by county.

July 2010 Estimates Total Population							
County	Child	% of total County Pop	Adult	% of total County Pop	Total	% of total Pop	*Med-Age
CABARRUS	50,581	29%	123,851	71%	174,432	23.69%	37
DAVIDSON	40,672	26%	118,187	74%	158,859	21.58%	40
ROWAN	36,503	26%	104,560	74%	141,063	19.16%	39
STANLY	15,423	26%	44,404	74%	59,827	8.13%	40
UNION	61,061	30%	140,932	70%	201,993	27.44%	35
<b>PBH</b>	204,240	28%	531,934	72%	736,174	100%	38



**Population Make-up by Race and Ethnicity:**

A demographic analysis of the population by race, based on 2010 Census estimates for the counties in the PBH catchment area, indicates that Whites make up 75.95% (562,973), Blacks 12.52% (92806) and Hispanics at 8.22% (60,952) of the population. All other combined races make up less than 3.3% (24,463) of the population. Although each population group increased from CY 2009 to CY 2010, some population groups grew faster representing increases in the percent of population. This can be seen in the slight decreases in the White (1.12%) and Black (.16%) populations over CY 2009. Corresponding to these decreases were slight increases in the Hispanic (.51%), and Other Combined Races (.76%) population over CY 2009. Note that there is less than a two percent (2%) difference between the two dominant minority populations Hispanic/Latino and Black for Union County, and less than three percent (3%) difference in Davidson County

**2010 Race and Ethnic Demographics**

Race or Ethnicity	Cabarrus County % of Population by Race/Ethnicity	Davidson County % of Population by Race/Ethnicity	Rowan County % of Population by Race/Ethnicity	Stanly County % of Population by Race/Ethnicity	Union County % of Population by Race/Ethnicity	PBH Catchment Area % of Population by Race/Ethnicity
White alone	71.64%	81.95%	73.67%	82.33%	74.57%	75.95%
Black or African American alone	14.98%	8.76%	16.00%	10.88%	11.49%	12.52%
American Indian and Alaska Native alone	0.28%	0.39%	0.27%	0.29%	0.30%	0.31%
Asian alone	1.94%	1.20%	0.98%	1.83%	1.61%	1.50%
Native Hawaiian and Other Pacific Islander alone	0.03%	0.02%	0.03%	0.02%	0.03%	0.03%
Some Other Race alone	0.16%	0.14%	0.11%	0.08%	0.21%	0.15%
Two or More Races:	1.55%	1.15%	1.25%	1.01%	1.38%	1.31%
Hispanic or Latino	9.42%	6.39%	7.69%	3.58%	10.42%	8.22%

The shift in population is even more apparent when compared to CY 2006 Census Estimates. A demographic analysis of the population by race, based on 2006 Census estimates for the counties in the PBH catchment area, indicates that Whites made up 78.37% (535,702), Blacks 12.35% (84,430) and Hispanics at 6.93% (47,352) of the population. All other combined races made up less than 2.35% (16,031) of the population. Although each population group increased from CY 2006 to CY 2010, some population groups grew faster representing increases in the percent of population. This can be seen in the decrease in the White population (2.42%) over CY 2006. Corresponding to these decreases were slight increases in the Black (.17%), Hispanic (1.3%), and Other Combined Races (.8%) population over CY 2008. (see chart on next page)



## 2010 Compared to 2006 Race and Ethnic Demographics

2010 = black

2006 = red

Race or Ethnicity	Cabarrus County % of Population by Race/Ethnicity	Davidson County % of Population by Race/Ethnicity	Rowan County % of Population by Race/Ethnicity	Stanly County % of Population by Race/Ethnicity	Union County % of Population by Race/Ethnicity	PBH Catchment Area % of Population by Race/Ethnicity
White alone	71.64%	81.95%	73.67%	82.33%	74.57%	75.95%
	75.02%	83.21%	76.71%	82.65%	76.90%	78.37%
Black or African American alone	14.98%	8.76%	16.00%	10.88%	11.49%	12.52%
	14.20%	9.15%	15.23%	11.47%	11.62%	12.35%
American Indian and Alaska Native alone	0.28%	0.39%	0.27%	0.29%	0.30%	0.31%
	0.31%	0.34%	0.29%	0.25%	0.32%	0.31%
Asian alone	1.94%	1.20%	0.98%	1.83%	1.61%	1.50%
	1.40%	1.01%	0.91%	1.71%	1.22%	1.19%
Native Hawaiian and Other Pacific Islander alone	0.03%	0.02%	0.03%	0.02%	0.03%	0.03%
	0.02%	0.00%	0.01%	0.02%	0.02%	0.01%
Some Other Race alone	0.16%	0.14%	0.11%	0.08%	0.21%	0.15%
	not reported in 2006	not reported in 2006	not reported in 2006	not reported in 2006	not reported in 2006	not reported in 2006
Two or More Races:	1.55%	1.15%	1.25%	1.01%	1.38%	1.31%
	0.91%	0.79%	0.76%	0.67%	0.89%	0.83%
Hispanic or Latino	9.42%	6.39%	7.69%	3.58%	10.42%	8.22%
	8.13%	5.51%	6.08%	3.23%	9.02%	6.93%

**Population Breakdown of Number of Consumers Served by Race vs. Total Number of Consumers Served:**

When we look at the number of consumers served by race compared to all consumers served, we find that Whites make up 75.25% (15,732), Blacks 19.23% (4,021), Hispanics are at .99% (208) and all other races make up 4.52% (945) served. From CY 2009 to CY 2010 there was a slight decrease in percent of white consumers served through PBH (.11%) although the overall number increased by 665. The percent of Black consumers increase by .44% from CY 2009 with an overall increase in the number served of 263. The percent of Hispanic consumers decreased by .37% from CY 2009 as well as an overall number decrease of 64. All other racial/ethnic groups experienced a total increase in consumers served by .04% and an overall increase of 49.

**2010 Consumers Served by Race/Ethnicity**

Race or Ethnicity	Cabarrus County, % of Population Served by Race/Ethnicity	Davidson County, % of Population Served by Race/Ethnicity	Rowan County, % of Population Served by Race/Ethnicity	Stanly County, % of Population Served by Race/Ethnicity	Union County, % of Population Served by Race/Ethnicity	PBH Catchment Area, % of Population Served by Race/Ethnicity
White alone	72.49%	82.54%	73.30%	80.35%	68.44%	75.25%
Black or African American alone	21.51%	12.31%	21.52%	16.04%	24.47%	19.23%
American Indian and Alaska Native alone	0.44%	0.37%	0.20%	0.21%	0.55%	0.34%
Asian, Pacific Islander	0.46%	0.46%	0.44%	0.49%	0.40%	0.41%
Hispanic or Latino	1.32%	0.88%	0.92%	0.53%	1.59%	0.99%
Other	3.78%	3.44%	3.62%	2.38%	4.56%	3.77%

In an analysis of the number of consumers served by race compared to all consumers served in CY 2006 we find that Whites made up 75.42% (14,079), Blacks 19.83% (3,702), Hispanics were at 1.1% (206) and all other races make up 3.65% (681) served. From CY 2006 to CY 2010 there was a .17% percent decrease in the number of white consumer served through PBH, however, the overall number increased by 1,653. The percent of Black consumers decreased by .6% from CY 2006 although the overall number increased by 319. The percent of Hispanic consumers decreased by .11% from CY 2006 and the overall number increased by 2. All other racial/ethnic groups experienced a total increase in consumers served by .87% with an overall number increase of 264. (see charts on next page)



## 2010 Compared to 2006 Number of Consumers Served by Race/Ethnicity

2010 = black

2006 = red

Race or Ethnicity	Cabarrus County, North Carolina - Number Served	Davidson County, North Carolina - Number Served	Rowan County, North Carolina - Number Served	Stanly County, North Carolina - Number Served	Union County, North Carolina - Number Served	PBH Catchment Area - Number Served
Total:	5,448 4,443	4,559 4,412	4,581 4,347	2,855 2,521	3,466 2,949	20,906 18,668
White alone	3,949 3,227	3,763 3,656	3,358 3,143	2,294 2,052	2,372 2,005	15,732 14,079
Black or African American alone	1,172 959	561 563	986 1,017	458 394	848 773	4,021 3,702
American Indian and Alaska Native alone	24 14	17 14	9 7	6 6	19 22	71 59
Asian, Pacific Islander	25 32	21 14	20 14	14 11	14 3	86 70
Hispanic or Latino	72 61	40 46	42 47	15 15	55 53	208 206
Other	206 150	157 119	166 119	68 43	158 93	788 552

## 2010 Compared to 2006 Percent of Consumers Served by Race/Ethnicity

2010 = black

2006 = red

Race or Ethnicity	Cabarrus County, % of Population Served by Race/Ethnicity	Davidson County, % of Population Served by Race/Ethnicity	Rowan County, % of Population Served by Race/Ethnicity	Stanly County, % of Population Served by Race/Ethnicity	Union County, % of Population Served by Race/Ethnicity	PBH Catchment Area, % of Population Served by Race/Ethnicity
White alone	72.49% 72.63%	82.54% 82.86%	73.30% 72.30%	80.35% 81.40%	68.44% 67.99%	75.25% 75.42%
Black or African American alone	21.51% 21.58%	12.31% 12.76%	21.52% 23.40%	16.04% 15.63%	24.47% 26.21%	19.23% 19.83%
American Indian and Alaska Native alone	0.44% 0.32%	0.37% 0.32%	0.20% 0.16%	0.21% 0.24%	0.55% 0.75%	0.34% 0.32%
Asian, Pacific Islander	0.46% 0.72%	0.46% 0.32%	0.44% 0.32%	0.49% 0.44%	0.40% 0.10%	0.41% 0.37%
Hispanic or Latino	1.32% 1.37%	0.88% 1.04%	0.92% 1.08%	0.53% 0.60%	1.59% 1.80%	0.99% 1.10%
Other	3.78% 3.38%	3.44% 2.70%	3.62% 2.74%	2.38% 1.71%	4.56% 3.15%	3.77% 2.96%



PBH continuously seeks racially and ethnically diverse providers to serve its consumers. PBH Contracts require providers to implement cultural competency plans and become culturally competent providers.

**Analysis of Male vs. Female Population by County:**

An analysis of the same census data indicates that males make up 49.36 % and females make up 51.64% of the general population.

<b>Sex and Age</b>	<b>Cabarrus County % of Population by Sex</b>	<b>Davidson County % of Population by Sex</b>	<b>Rowan County % of Population by Sex</b>	<b>Stanly County % of Population by Sex</b>	<b>Union County % of Population by Sex</b>	<b>PBH Catchment Area, % of Population by Sex</b>
Male:	49.19%	49.01%	49.26%	49.51%	49.80%	49.36%
Female:	50.81%	50.99%	50.74%	50.49%	50.20%	50.64%



The most recent published Medicaid Eligibility data from NC DMA at the time of this study was for 2009. The following table shows the break down for Medicaid Eligibility by county and age group for the PBH catchment area. Approximately 106,172 or 14.36% of the population of our catchment area are or were eligible for Medicaid between 2009 and 2010.

2009 Medicaid Eligibles for PBH Catchment Area								
County	0 to 5	6 to 11	12 to 20	21+ (non-ABD)	21+ ABD	Total Medicaid Eligibles	Total Pop July 2009	Medicaid Eligibles as % of Population
CABARRUS	7,304	4,185	3,895	4,079	4,002	23,465	176,923	13.26%
DAVIDSON	7,003	4,246	4,868	5,625	5,293	27,035	160,917	16.80%
ROWAN	6,562	3,859	4,215	5,183	5,224	25,043	140,825	17.78%
STANLY	2,400	1,495	1,788	2,014	2,257	9,954	60,245	16.52%
UNION	6,745	3,750	3,619	3,400	3,161	20,675	200,538	10.31%
<b>PBH</b>	<b>30,014</b>	<b>17,535</b>	<b>18,385</b>	<b>20,301</b>	<b>19,937</b>	<b>106,172</b>	<b>739,448</b>	<b>14.36%</b>

The 2010 estimates by the Federal Center for Mental Health Services for the prevalence of Mental Health (MH), Developmental Disabilities (DD), and Substance Abuse in North Carolina are as follows:

Populations		SFY 2010 Prevalence Estimates for NC	2010 Estimated Total Population for PBH Counties	Estimated # of Consumers by Age & Disability Group	2009 Number of Medicaid Eligibles for PBH Catchment Area	Estimated # of Medicaid (Waiver) Consumers by Age & Disability Group
Adult	MH	5.50%	548,777	30,183	40,238	2,213
	DD	0.79%	548,777	4,335	40,238	318
	SA	8.18%	548,777	44,911	40,238	3,293
	SA (18-25)	18.87%	61,301	11,567	4,495	368
	SA (26+)	6.84%	487,477	33,343	35,743	2,925
Child	MH	12.00%	187,397	22,488	65,934	7,912
	DD	3.21%	187,397	6,015	65,934	2,116
	SA	7.83%	187,397	14,673	65,934	5,163
<b>Totals</b>		n/a	736,174	122,605	106,172	21,015



The prevalence estimates have been applied to both the Adult and Child general population of our catchment area as well as the Adult and Child Medicaid population of our catchment area. It is estimated that 122,605 persons or 16.65% of the population within the PBH catchment area have an MH, DD, or SA problem. Of the 122,605 persons with a MH, DD, or SA problem, approximately 21,015 or 7.14% have Medicaid (NC MH/DD/SA Waiver). Of the 122,605 persons with a MH, DD, or SA problem, approximately 101,590 or 82.85% are covered by private insurance or qualify for State Funded services.

Of these 122,605 people, the U.S. Census Bureau estimates 20,990 or 17.12% are uninsured. Please note that this is the estimated total number of uninsured persons with a MH, DD, or SA problem.

Populations		SFY 2010 Prevalence Estimates for NC	Estimated # of Consumers by Age & Disability Group	Estimated # of Medicaid (Waiver) Consumers by Age & Disability Group	Estimated # of Non-Medicaid (Third party or Stated funded) Consumers by Age & Disability Group	Estimated # of Uninsured Consumers by Age & Disability Group
Adult	MH	5.50%	30,183	2,213	27,970	5,769
	DD	0.79%	4,335	318	4,017	829
	SA	8.18%	44,911	3,293	41,618	8,584
	SA (18-25)	18.87%	11,567	368	4,649	959
	SA (26+)	6.84%	33,343	2,925	36,969	7,625
Child	MH	12.00%	22,488	7,912	14,576	3,025
	DD	3.21%	6,015	2,116	3,899	809
	SA	7.83%	14,673	5,163	9,511	1,974
<b>Totals</b>		n/a	122,605	21,015	101,590	20,990

DMH sets the performance standard for LMEs annually. The performance standards for PBH during State Fiscal Year (SFY) 11 (these did not change from SFY 10) were as follows:

Populations		SFY 2010 Prevalence Estimates for NC	DHHS SFY 2010 Performance Standard (target % of Prevalence to be served)	DHHS SFY 2010 Performance Standard (number of total population to have been served)
Adult	MH	5.50%	42.00%	12,677
	DD	0.79%	38.00%	1,647
	SA	8.18%	8.00%	3,593
	SA (18-25)	18.87%	8.00%	925
	SA (26+)	6.84%	8.00%	2,667
Child	MH	12.00%	47.00%	10,569
	DD	3.21%	20.00%	1,203
	SA	7.83%	7.00%	1,027
<b>Totals</b>		n/a	n/a	30,716

The following chart shows PBH performance against the target. For Adult SA Services, PBH exceeded the State’s target. For Adult MH and DD Services PBH did not meet the target. For Child MH, DD, and SA Services PBH did not meet the State’s target. For the Child DD population this may in part be due to the prevalence criteria including the age range 0 to 3 and a more inclusive diagnostic range (Except for Innovations Waiver Services, children ages 0 to 3 are not covered by State Plan Medicaid, under the PBH Managed Care Waiver, or state funded services). The only service available from PBH for children with development disabilities (other than Innovations Waiver Services) is state funded Respite Care; the number of people that can receive respite care is limited by the availability of funding. The amount of state funds per capita varies widely across LMEs and significantly impacts PBH ability to extend care to people with no insurance and no Medicaid. This variance in available funds is not factored into the penetration targets for each LME by DMH. The last per capita ranking available (published September 30, 2005) ranged from \$21.80 per capita to \$48.18 per capita by LME. At that time, PBH had a per capita allocation of \$41.20, and was 15 out of 30 in per capita funding. There is no entitlement to state funded services. Additionally, the target established by DMH is based on the total population of the PBH catchment area which includes insured and under-insured consumers who would not be enrolled with PBH due to not meeting the eligibility criteria for Medicaid and/or State Funded Services.

**Percent of Target Served – CY 2010**

Populations		Actual Served	Target	+/- Actual to Target	% to Actual Target
Adult	AO	353	0	353	
	MH	11,745	12,677	(932)	92.65%
	DD	1,268	1,647	(379)	76.97%
	SA	4,690	3,593	1,097	130.54%
Child	AO	145	0	145	
	MH	5,372	10,569	(5,197)	50.83%
	DD	506	1,203	(697)	42.06%
	SA	244	1,027	(783)	23.76%
<b>Total</b>		<b>21,707</b>	<b>30,716</b>	<b>(6,393)</b>	<b>70.67%</b>

\*AO = Consumer who received “Assessment and/or Outreach”



Compared to CY 2009 PBH has increased penetration in all Adult disability areas and has increased penetration in Child SA, however, has experienced a slight decreases in the penetration of Child MH and DD. Both the number of consumers seen and PBH's percentage of consumers seen to actual target decreased. It should be noted that the target was increased per the State Performance Contract.

### Percent of Target Served – CY 2009

Populations		Actual Served	Target	+/- Actual to Target	% to Actual Target
Adult	*AO	407	0	407	
	MH	11,416	12,573	(1,157)	90.79%
	DD	1,223	1,634	(411)	74.85%
	SA	4,386	3,563	823	123.09%
Child	*AO	194	0	194	
	MH	5,200	10,475	(5,275)	49.64%
	DD	449	1,192	(743)	37.65%
	SA	333	1,018	(685)	32.71%
<b>Total</b>		<b>23,608.00</b>	<b>30,456.75</b>	<b>(6,848.75)</b>	<b>77.51%</b>

The NCDMHDDSAS Performance Contract for Fiscal Year 2006 did not include specified targets for the percent of person to be seen by disability group. Since this target was not available for comparison, the following analysis compares the percent of the estimated prevalence served during CY 2010 with that of CY 2006 (see CY 2010 and CY 2006 charts below).

### Percent of Estimated Prevalence Served – CY 2010

Populations		Actual Served	Estimated Prevalence	+/- Actual to Estimated Prevalence	% Persons seen based on Estimated Prevalence
Adult	AO	353	0	353	0.00%
	MH	11,745	30,183	(18,438)	38.91%
	DD	1,268	4,335	(3,067)	29.25%
	SA	4,690	44,911	(40,221)	10.44%
sub-total		15,956	79,429	(61,373)	20.09%
Child	AO	145	0	145	0.00%
	MH	5,372	22,488	(17,116)	23.89%
	DD	506	6,015	(5,509)	8.41%
	SA	244	14,673	(14,429)	1.66%
sub-total		5,921	43,176	(36,909)	13.71%
<b>Total</b>		<b>21,707</b>	<b>122,605</b>	<b>(98,282)</b>	<b>17.70%</b>



**Percent of Estimated Prevalence Served – CY 2006**

Populations		Actual Served	Estimated Prevalence	+/- Actual to Estimated Prevalence	% Persons seen based on Estimated Prevalence
Adult	AO	1,803	0	1,803	0.00%
	MH	10,120	27,657	(17,537)	36.59%
	DD	1,088	4,046	(2,958)	26.89%
	SA	3,909	41,859	(37,950)	9.34%
sub-total		14,512	73,562	(56,642)	19.73%
Child	AO	801	0	801	0.00%
	MH	4,886	20,562	(15,676)	23.76%
	DD	384	5,500	(5,116)	6.98%
	SA	626	12,406	(11,780)	5.05%
sub-total		5,840	38,469	(31,772)	15.18%
<b>Total</b>		20,230	112,031	(88,414)	18.06%

From CY 2006 to CY 2010 the percent of estimated prevalence served increased by 2.32% for Adults with Mental Health diagnosis. During the same time frame the estimated prevalence of Adults with Developmental Disorder served increased by 2.36%. The estimated prevalence of Adults with Substance Abuse Disorders served increased by 1.1%.

From CY 2006 to CY 2010 the percent of estimated prevalence served increased by .13% for Children with Mental Health diagnosis. During the same time frame the estimated prevalence of Children with Developmental Disorder served increased by 2.43%. The estimated prevalence of Children with Substance Abuse Disorders served decreased by 3.39%.

Please note that the actual number of persons served between CY 2006 and CY 2010 increased in every age and diagnostic group. The increase in the number served did not keep pace with the estimated increase in prevalence for each age and diagnostic group. Additionally, the increase in the number served between CY 2006 and CY 2010 did not keep pace with the increase in the general population for our catchment area. Between CY 2006 and CY 2010 the general population of the PBH catchment area grew from approximately 697,933 to 736,174 or 5.48%.

A total of 13,638 waiver participants from the PBH catchment area were served during CY 2010. The total number of Medicaid eligible consumers (actual) for the PBH catchment area during CY 2010 was 109,277. This equates to a Medicaid penetration rate of 12.48%.



The following chart is a break down of the number of consumers served by Funding Category and Benefit Plan. Please note that this is an unduplicated count with in each discrete category; however, a consumer may have been served under one or more benefit plan. The Total by Benefit Plan and Grand Total are unduplicated counts of consumers served. Due to serving consumers who fall in to multiple diagnostic groups, The Total by Dx Group is a duplicated count. The Grand Total by Dx Group is an unduplicated count.

<b>Medicaid Funded Consumers</b>					
<b>Benefit Plan</b>		<b>Basic</b>	<b>Basic Augmented</b>	<b>Enhanced</b>	<b>Total by Dx Group</b>
<b>Age Group</b>	<b>Dx Group</b>				
Adult	AO	56	6	39	96
	MH	5,448	2,706	1,576	6,467
	DD	126	84	845	951
	SA	1,016	1,037	410	1,689
Child	AO	80	8	25	108
	MH	4,237	2,085	1,166	5,000
	DD	116	82	346	481
	SA	143	46	16	164
Total by Benefit Plan		10,574	5,750	4,152	13,638
<b>State Funded Consumers</b>					
<b>Benefit Plan</b>		<b>Basic</b>	<b>Basic Augmented</b>	<b>Enhanced</b>	<b>Total by Dx Group</b>
<b>Age Group</b>	<b>Dx Group</b>				
Adult	AO	136	4	125	259
	MH	4,610	1,759	2,272	6,212
	DD	4	14	824	825
	SA	2,355	894	1,530	3,255
Child	AO	13	3	27	42
	MH	336	45	426	731
	DD	7	1	221	225
	SA	73	17	17	94
Total by Benefit Plan		6,889	2,504	4,987	10,392
Grand Total		16,904	7,987	7,727	21,707

\*AO = Consumer who received "Assessment and/or Outreach"

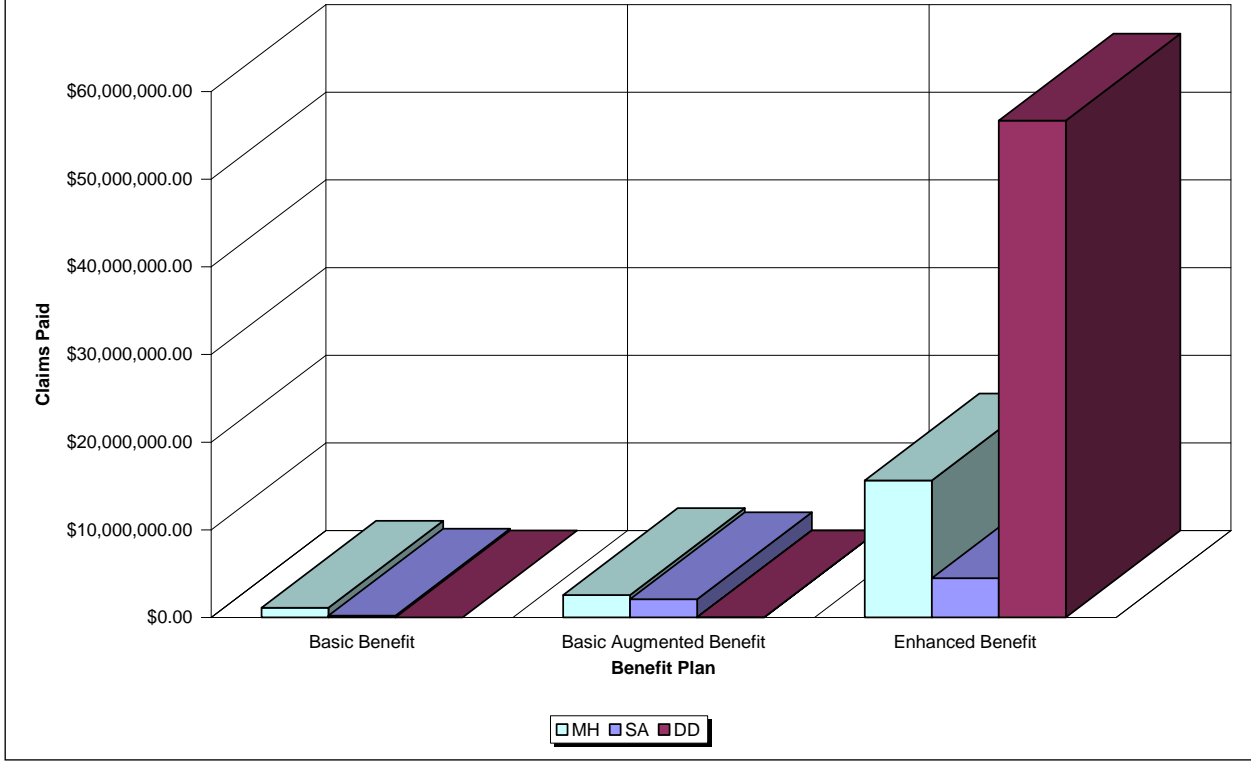


The following chart and graphs are a break down of claims paid for all Funding Categories and Benefit Plans.

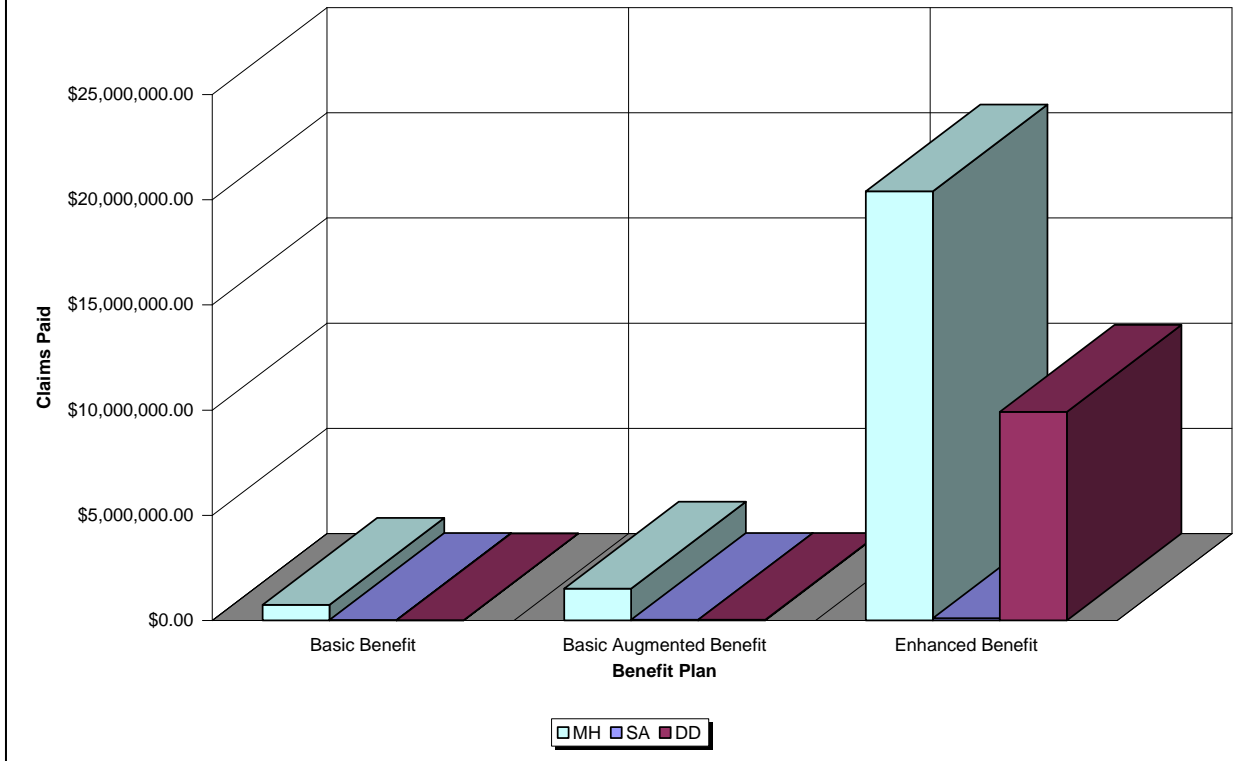
All Funding Categories					
Demographics		Level of Eligibility			
		Basic Benefit	Basic Augmented Benefit	Enhanced Benefit	All Benefit Categories
Age	Disability Group	total cost of service units provided	total cost of service units provided	total cost of service units provided	Total Cost by age and disability group
Adult	AO	\$12,573.71	\$3,611.49	\$202,204.40	\$218,389.60
	MH	\$1,097,925.17	\$2,553,130.09	\$15,614,737.50	\$19,265,792.76
	SA	\$198,869.83	\$2,079,679.44	\$4,481,244.55	\$6,759,793.82
	DD	\$3,007.29	\$20,095.97	\$56,674,374.90	\$56,697,478.16
<b>Subtotal</b>		<b>\$1,312,376.00</b>	<b>\$4,656,516.99</b>	<b>\$76,972,561.35</b>	<b>\$82,941,454.34</b>
Child	AO	\$8,635.44	\$8,758.66	\$10,053.67	\$27,447.77
	MH	\$738,659.13	\$1,512,521.09	\$20,390,542.53	\$22,641,722.75
	SA	\$27,572.13	\$28,774.11	\$104,116.87	\$160,463.11
	DD	\$7,512.19	\$28,992.55	\$9,909,761.62	\$9,946,266.36
<b>Subtotal</b>		<b>\$782,378.89</b>	<b>\$1,579,046.41</b>	<b>\$30,414,474.69</b>	<b>\$32,775,899.99</b>
<b>Grand Total</b>		<b>\$2,094,754.89</b>	<b>\$6,235,563.40</b>	<b>\$107,387,036.04</b>	<b>\$115,717,354.34</b>

\*AO = Consumer who received "Assessment and/or Outreach"

**Paid Claims for Adult PBH Consumers for All Funding Categories by Benefit Plan**



**Claims Paid for Child PBH Consumers for All Funding Categories by Benefit Plan**



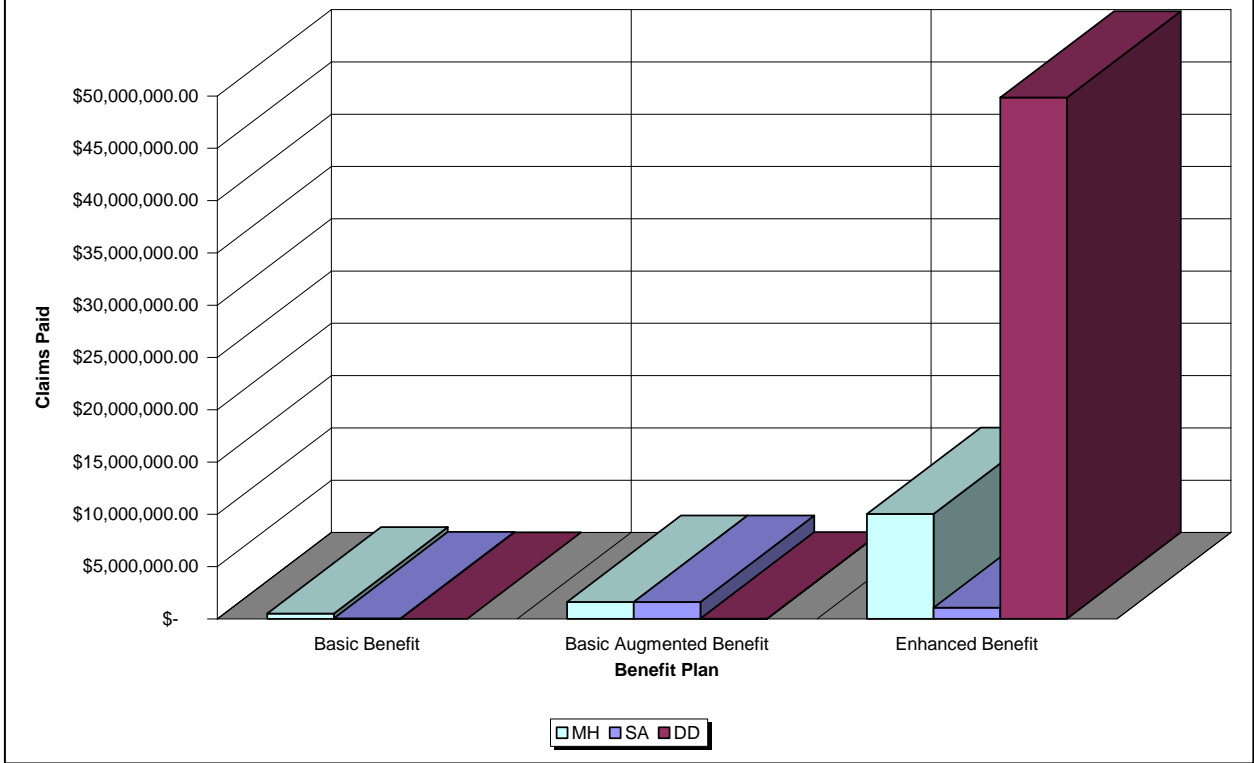
The following chart and graphs are a break down of claims paid for PBH Medicaid and all Benefit Plans.

Medicaid					
Demographics		Level of Eligibility			
		Basic Benefit	Basic Augmented Benefit	Enhanced Benefit	All Benefit Categories
Age	Disability Group	total cost of service units provided	total cost of service units provided	total cost of service units provided	Total Cost by age and disability group
Adult	AO	\$ 4,227.69	\$ 2,484.61	\$ 4,896.64	\$ 11,608.94
	MH	\$ 508,368.73	\$ 1,618,002.28	\$10,025,481.77	\$ 12,151,852.79
	SA	\$ 47,348.84	\$ 1,616,792.73	\$ 1,063,049.46	\$ 2,727,191.03
	DD	\$ 3,007.29	\$ 20,095.97	\$49,840,161.89	\$ 49,863,265.15
<b>Subtotal</b>		<b>\$562,952.55</b>	<b>\$3,257,375.59</b>	<b>\$60,933,589.77</b>	<b>\$ 64,753,917.91</b>
Child	AO	\$ 7,500.02	\$ 8,407.79	\$ 3,077.86	\$ 18,985.67
	MH	\$ 691,371.04	\$ 1,490,143.30	\$20,152,311.51	\$ 22,333,825.85
	SA	\$ 15,149.70	\$ 20,484.72	\$ 90,173.78	\$ 125,808.20
	DD	\$ 7,175.81	\$ 28,633.95	\$ 9,842,745.52	\$ 9,878,555.28
<b>Subtotal</b>		<b>\$721,196.57</b>	<b>\$1,547,669.76</b>	<b>\$30,088,308.67</b>	<b>\$32,357,175.00</b>
<b>Grand Total</b>		<b>\$1,284,149.12</b>	<b>\$4,805,045.35</b>	<b>\$91,021,898.44</b>	<b>\$97,111,092.92</b>

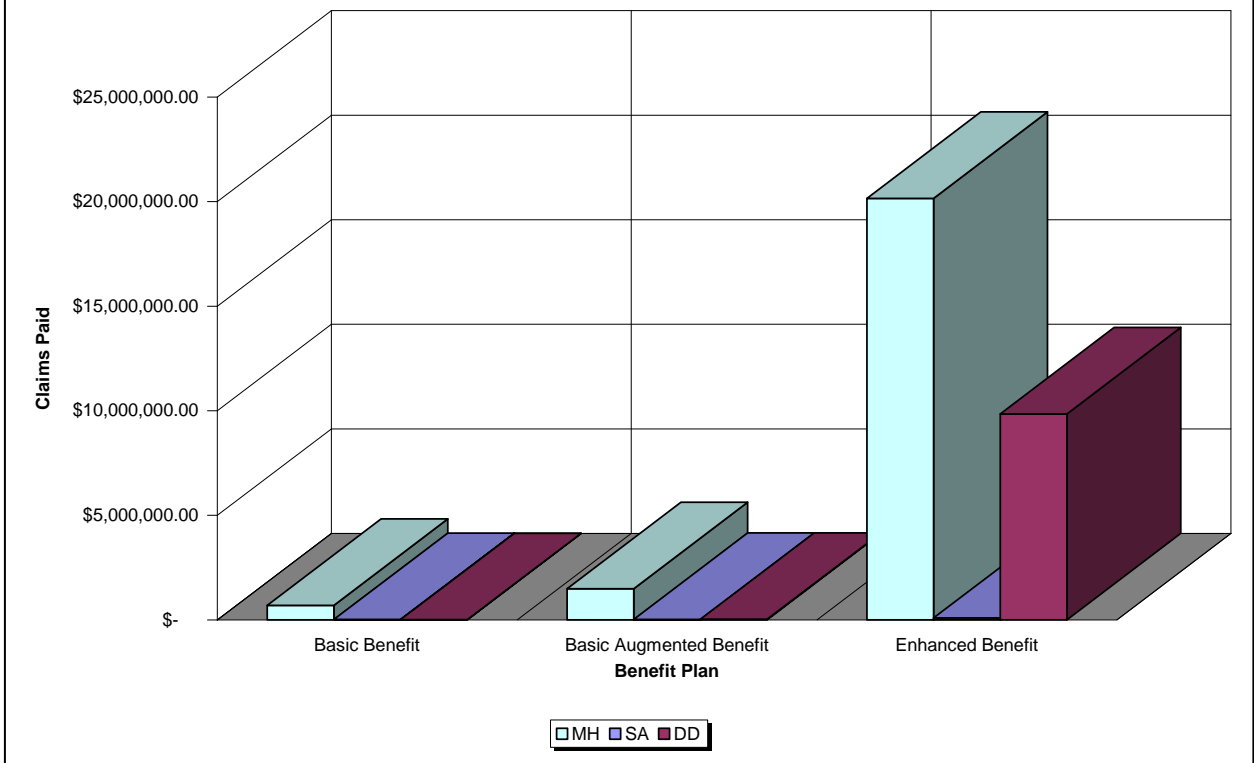
\*AO = Consumer who received "Assessment and/or Outreach"



**Paid Claims for PBH Adult Medicaid Consumers by Benefit Plan**



**Paid Claims for PBH Child Medicaid Consumers for by Benefit Plan**

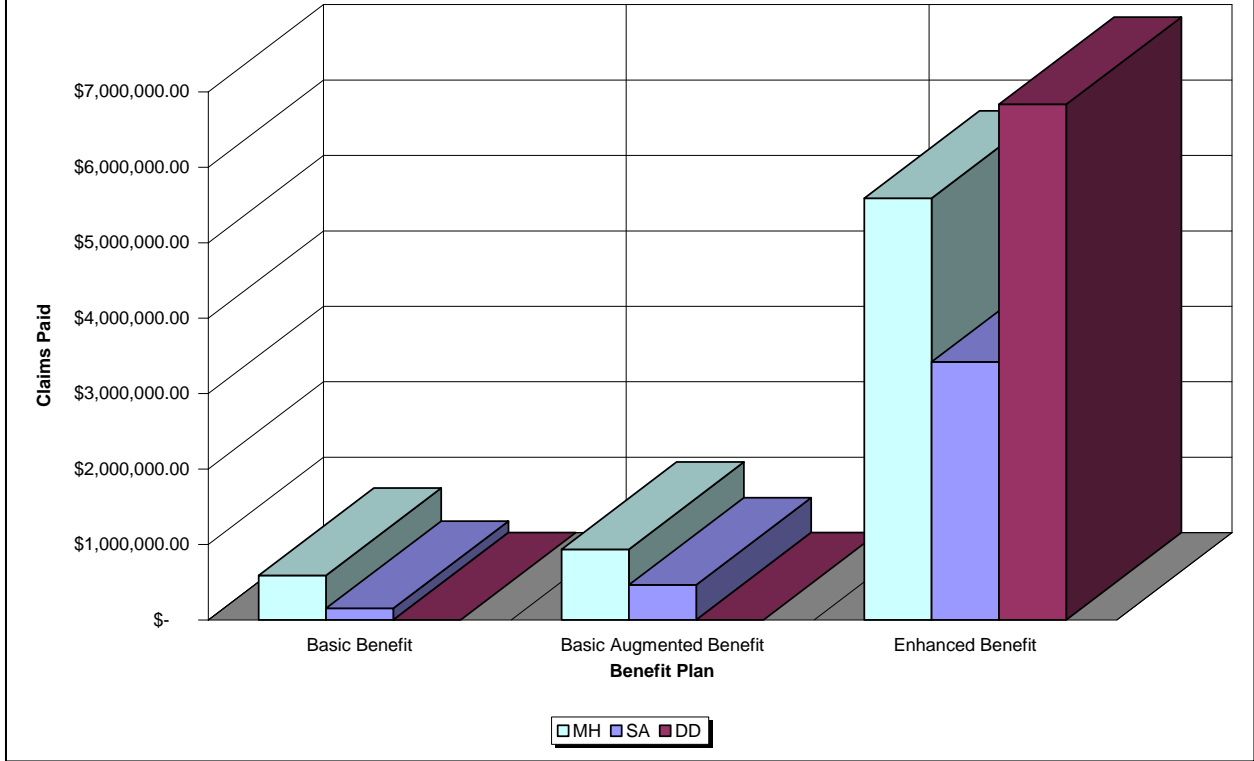


The following chart and graphs are a break down of claims paid for PBH State Funds and all Benefit Plans.

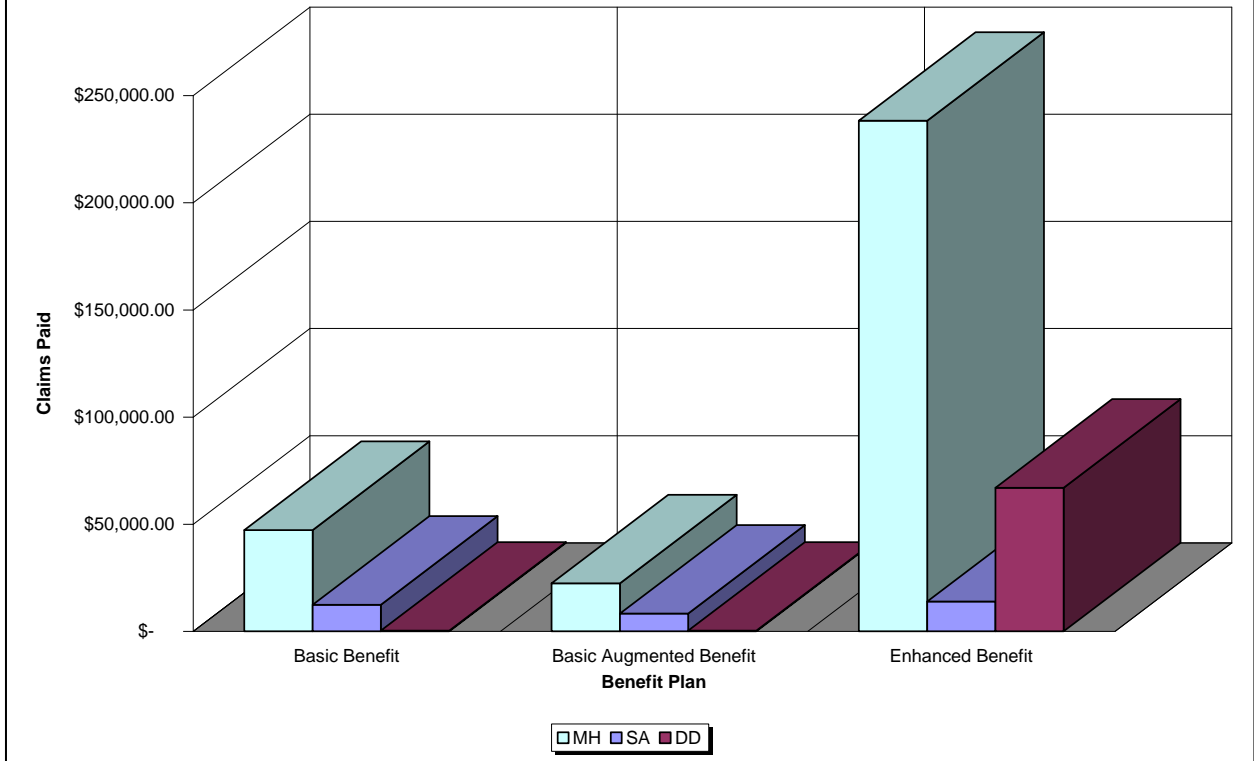
State Funds					
Demographics		Level of Eligibility			
		Basic Benefit	Basic Augmented Benefit	Enhanced Benefit	All Benefit Categories
Age	Disability Group	total cost of service units provided	total cost of service units provided	total cost of service units provided	Total Cost by age and disability group
Adult	AO	\$ 8,346.02	\$ 1,126.88	\$ 197,307.76	\$ 206,780.66
	MH	\$ 589,556.44	\$ 935,127.81	\$ 5,589,255.73	\$ 7,113,939.98
	SA	\$ 151,520.99	\$ 462,886.71	\$ 3,418,195.09	\$ 4,032,602.79
	DD	\$ -	\$ -	\$ 6,834,213.01	\$ 6,834,213.01
<b>Subtotal</b>		<b>\$749,423.45</b>	<b>\$1,399,141.40</b>	<b>\$16,038,971.58</b>	<b>\$18,187,536.43</b>
Child	AO	\$ 1,135.42	\$ 350.87	\$ 6,975.81	\$ 8,462.10
	MH	\$ 47,288.09	\$ 22,377.79	\$ 238,231.02	\$ 307,896.90
	SA	\$ 12,422.43	\$ 8,289.39	\$ 13,943.09	\$ 34,654.91
	DD	\$ 336.38	\$ 358.60	\$ 67,016.10	\$ 67,711.08
<b>Subtotal</b>		<b>\$61,182.32</b>	<b>\$31,376.65</b>	<b>\$326,166.02</b>	<b>\$418,724.99</b>
<b>Grand Total</b>		<b>\$810,605.77</b>	<b>\$1,430,518.05</b>	<b>\$16,365,137.60</b>	<b>\$18,606,261.42</b>

\*AO = Consumer who received "Assessment and/or Outreach"

Claims Paid for PBH Adult State Funded Consumers by Benefit Plan



Claims Paid for PBH Child State Funded Consumers by Benefit Plan

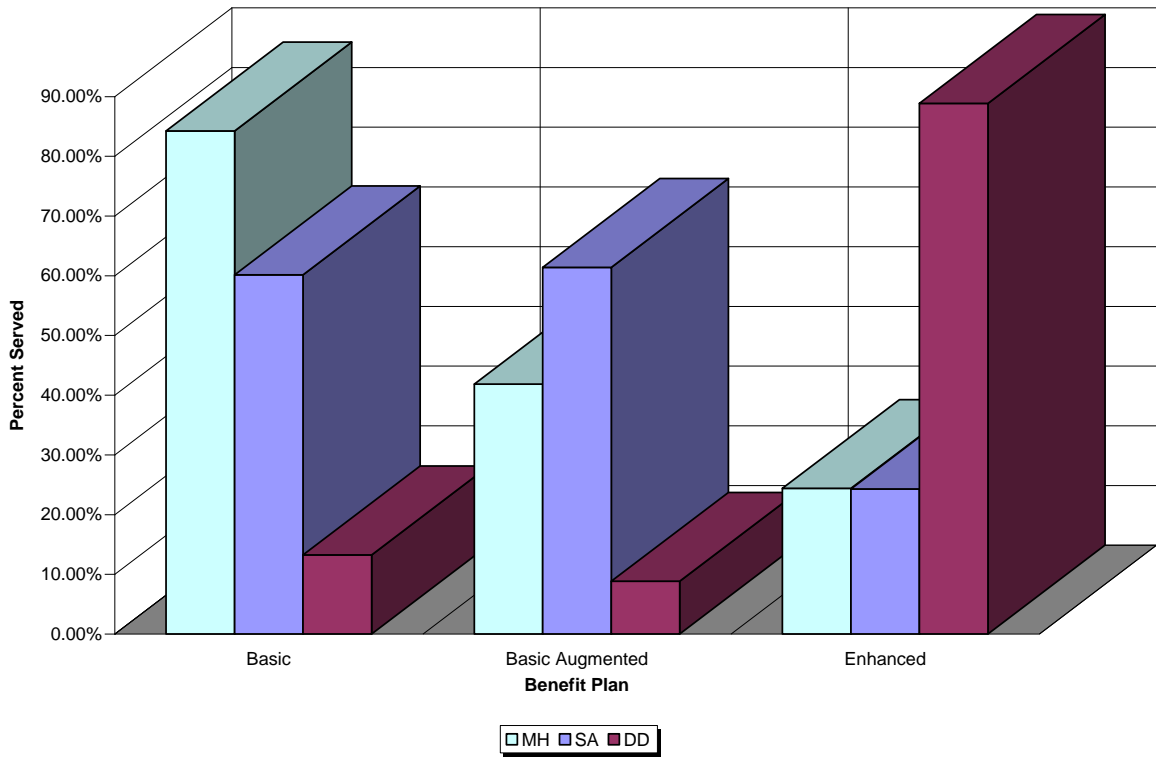


The following chart is a break down of the percentage of consumers served by Funding Category and Benefit Plan. Again, please note that this is an unduplicated count with in each discrete category (Age Group + Dx Group + Benefit Plan); however, a consumer may have been served under one or more benefit plan. (Due to this issue, total percentages across Basic, Basic Augmented, and Enhanced may be more than 100%.)

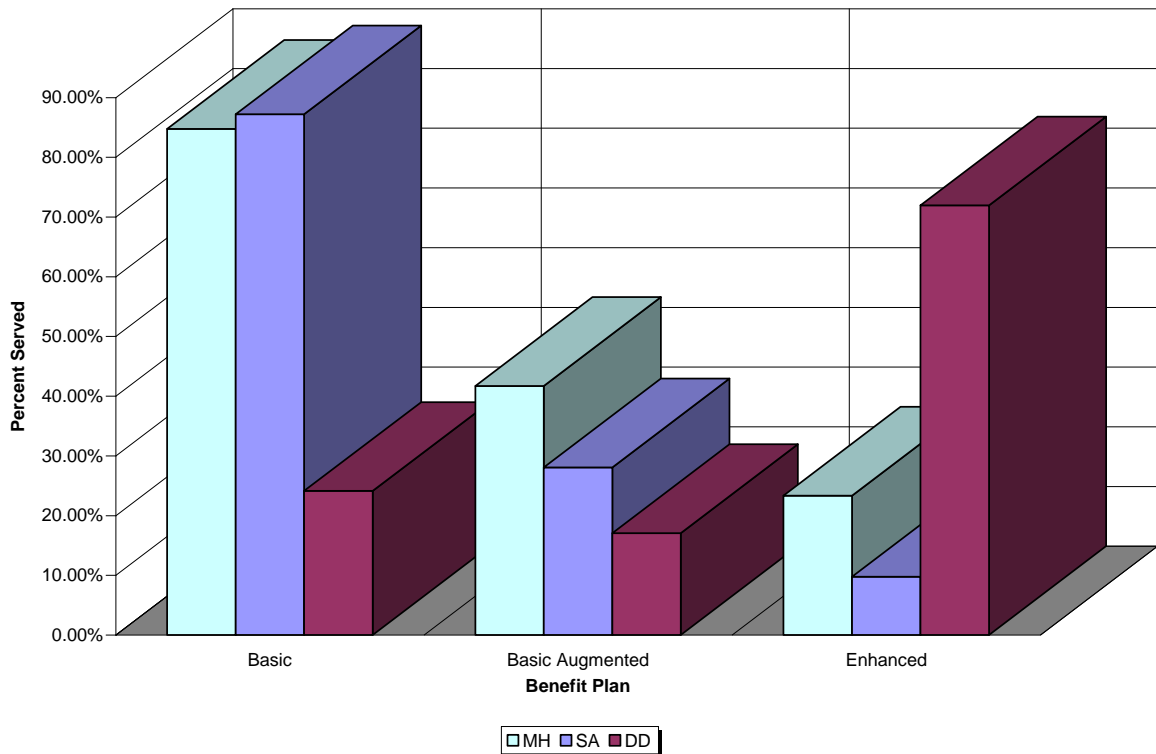
Medicaid Funded Consumers				
Benefit Plan		Basic	Basic Augmented	Enhanced
Age Group	Dx Group			
Adult	AO	58.33%	6.25%	40.63%
	MH	84.24%	41.84%	24.37%
	DD	13.25%	8.83%	88.85%
	SA	60.15%	61.40%	24.27%
Child	AO	74.07%	7.41%	23.15%
	MH	84.74%	41.70%	23.32%
	DD	24.12%	17.05%	71.93%
	SA	87.20%	28.05%	9.76%
State Funded Consumers				
Benefit Plan		Basic	Basic Augmented	Enhanced
Age Group	Dx Group			
Adult	AO	52.51%	1.54%	48.26%
	MH	74.21%	28.32%	36.57%
	DD	0.48%	1.70%	99.88%
	SA	72.35%	27.47%	47.00%
Child	AO	30.95%	7.14%	64.29%
	MH	45.96%	6.16%	58.28%
	DD	3.11%	0.44%	98.22%
	SA	77.66%	18.09%	18.09%

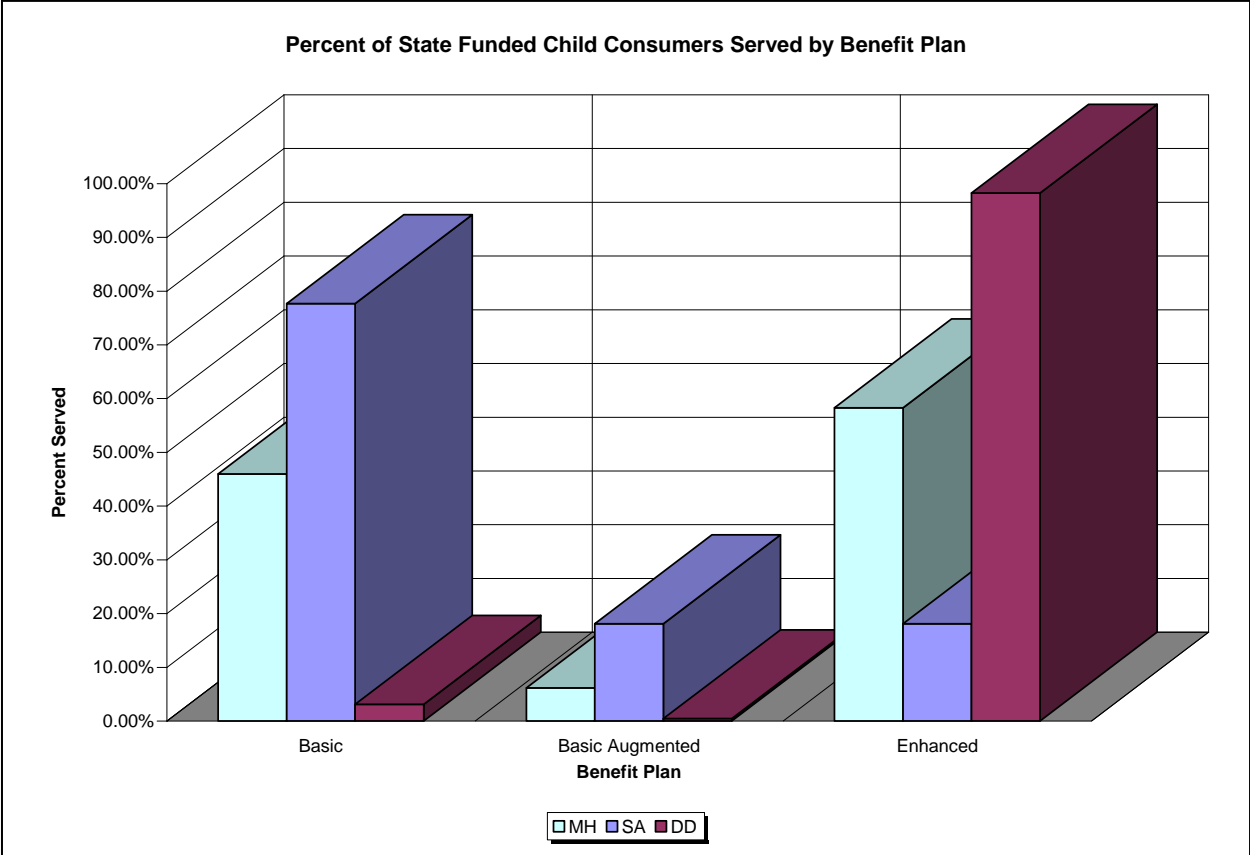
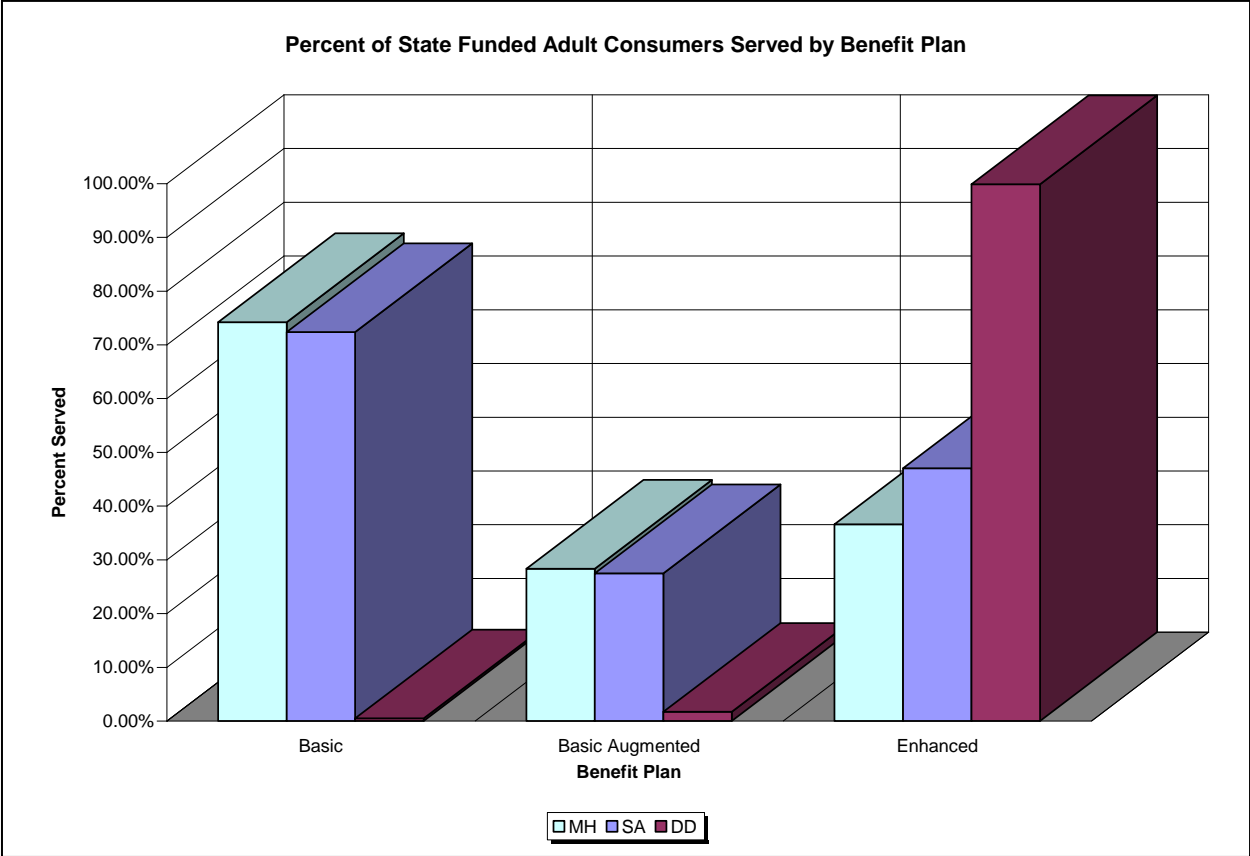
% = distinct consumer served by Age Group, Dx Group, and Benefit Plan divided by Total distinct consumer served by Age Group and Dx Group  
 \*AO = Consumer who received "Assessment and/or Outreach"

Percent of Medicaid Funded Adult Consumers Served by Benefit Plan



Percent of Medicaid Funded Child Consumers Served by Benefit Plan





## The PBH Provider Network

The PBH Provider Network Is made of 239 fully Contracted providers. These providers include Comprehensive Care Providers (CCP), Agencies (single and multi-service), Group Practices (LIP Group), Individual Practices (LIP), Hospital Inpatient Services, and Hospital based outpatient services. Some providers may have both a full contract and a client specific agreement and will show up in both categories. The following chart shows the number of providers by provider type in the Network. The number of providers within “Type of Provider” and “Total Contract Providers” are unduplicated counts.

Type of Provider	# of Providers
Agency	100
Client Specific Agency	7
Comprehensive Community Provider (CCP)	3
Licensed Independent Practitioner (LIP)	90
Client Specific LIP	10
Licensed Independent Practitioner Group (LIP Group)	34
Client Specific LIP Group	13
Hospital Inpatient	8
Hospital Outpatient	3
Non-Contracted Hospital Inpatient	29
Non-Contracted Hospital Outpatient	1
State Hospital, Psychiatric - State Institution	4
Alcohol and Drug Abuse Treatment Center (ADATC) - State Institution	3
Intermediate Care Facility Mental Retardation - State Institution	3
Neurobehavioral - State Institution	1
Local Management Entity (LME) [Mecklenberg SA: SS Detox & SA Residential]	1
Special	2
Vocational Rehabilitation: Non-Contracted	5
Other	2
<b>Total Providers</b>	<b>319</b>
<b>Total Fully Contracted Providers</b>	<b>239</b>
<b>Total Client Specific Contracted Providers</b>	<b>32</b>
<b>Total Contracted Providers</b>	<b>271</b>



**Community Services:**

Of these contracted providers 74 are Community Services providers, 34 within the PBH catchment area and 40 outside of the PBH's five (5) counties. Consumers with Medicaid from the PBH Counties may live in any part of North Carolina. PBH arranges for Medicaid services wherever the consumer lives.

County Service Provided In	Agencies	Additional Sites
<b>Cabarrus</b>	10	11
<b>Davidson</b>	6	2
<b>Rowan</b>	5	8
<b>Stanly</b>	5	18
<b>Union</b>	8	4
<b>Total Community Providers in Catchment Area</b>	<b>34</b>	<b>43</b>
<b>Community Providers Outside PBH Catchment Area</b>	<b>40</b>	<b>30</b>
<b>Total Community Providers</b>	<b>74</b>	<b>73</b>

**Community Support Services:**

During 2010 PBH had one (1) contract providers for Community Support Team.

County served by Provider	*Teams
<b>Cabarrus</b>	5
<b>Davidson</b>	0
<b>Rowan</b>	0
<b>Stanly</b>	0
<b>Union</b>	0
<b>Total Community Support Teams in Catchment Area</b>	<b>5</b>
<b>Community Support Teams Outside PBH Catchment Area</b>	33
<b>Total Community Support Teams</b>	<b>38</b>

\* Within the PBH Catchment Area a team may be based out of a particular county, however, typically will serve the entire catchment area. Each team consists of three (3) staff members. Teams outside of catchment area provide services to consumers living out of catchment area and may not be actively serving a PBH consumer.

## Outpatient Services:

Of the 239 Contracted providers in PBH's Network, 155 provide Outpatient Services. The Network consists of 3 CCPs, 17 Agencies, 16 Group Practices, 41 Individual Practices, and one Hospital based practice that provide outpatient behavioral health and/or psychiatric services inside the catchment area. Additionally, the PBH Network includes 23 Agencies, 11 Group Practices, 42 Independent Practices, and 1 Hospital based practices that provide outpatient behavioral health and/or psychiatric services outside of the PBH catchment area. Most of these providers are located in counties adjoining the PBH catchment area. The chart included below shows where these outpatient providers are located.

County served by Provider	Agencies	CCPs	Additional CCP Sites	Group Practices	LIPs	Hospital Based Practices	Total OP Providers
<b>Cabarrus</b>	5	2	0	4	14	1	26
<b>Davidson</b>	4	2	0	0	3	0	9
<b>Rowan</b>	0	3	0	7	10	0	20
<b>Stanly</b>	3	2	1	2	3	0	10
<b>Union</b>	5	3	0	3	11	0	22
<b>Total in Catchment Area</b>	<b>17</b>	<b>3</b>	<b>1</b>	<b>16</b>	<b>41</b>	<b>1</b>	<b>87</b>
<b>Total Outside PBH Catchment Area</b>	23	0	4	11	42	1	68
<b>Grand Total</b>	<b>40</b>	<b>3</b>	<b>5</b>	<b>27</b>	<b>83</b>	<b>2</b>	<b>155</b>

**Number of Licensed Independent Practitioners (LIPs) in the PBH Network**

County served by Provider	LCSW	LCSWp	LPC	LPCbe or LPCA	LMFT	MFTA	LP/PhD	LPA	CCS	LCAS	CSAC	BCBA	SLP	PT	MD	NP	PA	APNCNS	Total Credentialed LIPs
Cabarrus	21	15	16	4	0	3	19	11	2	7	4	0	1	1	29	3	1	0	133
Davidson	9	3	15	4	3	1	2	1	0	2	0	0	0	0	14	2	1	0	55
Rowan	15	8	33	4	2	0	6	5	1	13	3	0	0	0	12	1	1	1	96
Stanly	8	8	15	8	0	2	4	3	1	4	6	0	0	0	12	4	0	1	74
Union	27	10	16	1	4	0	8	1	0	6	2	3	1	0	4	1	0	0	75
<b>Total in Catchment Area</b>	<b>72</b>	<b>33</b>	<b>87</b>	<b>19</b>	<b>9</b>	<b>6</b>	<b>33</b>	<b>18</b>	<b>4</b>	<b>25</b>	<b>9</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>49</b>	<b>9</b>	<b>3</b>	<b>2</b>	<b>362</b>
<b>Total Outside PBH Catchment Area</b>	<b>76</b>	<b>5</b>	<b>73</b>	<b>1</b>	<b>5</b>	<b>1</b>	<b>30</b>	<b>7</b>	<b>0</b>	<b>13</b>	<b>1</b>	<b>2</b>	<b>2</b>	<b>0</b>	<b>34</b>	<b>11</b>	<b>5</b>	<b>0</b>	<b>255</b>
<b>Grand Total</b>	<b>148</b>	<b>38</b>	<b>160</b>	<b>20</b>	<b>14</b>	<b>7</b>	<b>63</b>	<b>25</b>	<b>4</b>	<b>38</b>	<b>10</b>	<b>5</b>	<b>4</b>	<b>1</b>	<b>83</b>	<b>20</b>	<b>8</b>	<b>2</b>	<b>617</b>

**Abbreviations:**

- |  |   |   |
|--|---|---|
| LCSW - Licensed Clinical Social Worker                 | LP/PhD - Licensed Psychologist (Doctorate Required) | SLP - Speech Language Pathologist                           |
| LCSWp - Licensed Clinical Social Worker, provisional   | LPA - Licensed Psychological Associate              | PT - Physical Therapist                                     |
| LPC - Licensed Professional Counselor                  | CCS - Certified Clinical Supervisor                 | MD - Medical Doctor (generally a Psychiatrist)              |
| LPCbe - Licensed Professional Counselor-Board Eligible | LCAS - License Clinical Addiction Specialist        | NP - Nurse Practitioner                                     |
| LPCA - Licensed Professional Counselor Associate       | CSAC - Certified Substance Abuse Counselor          | PA - Physician Assistant                                    |
| LMFT - Licensed Marriage and Family Therapist          | BCBA - Board Certified Behavioral Analyst           | APNCNS - Advanced Practice Nurse/Certified Nurse Specialist |
| MFTA - Marriage and Family Therapist Associate         |   |   |

\* Please note the subtotal and Grand Total within each licensure category as well as the Total Credentialed LIPs for each county, in catchment area, Outside of catchment area and Grand Total are all unduplicated counts.



**DEVELOPMENTAL DISABILITIES & INNOVATIONS Service Providers:**

Of the 239 Contracted providers in PBH’s Network, 105 are DD providers and 66 of the DD providers also provide Innovations Waiver Services. Slightly more than half of the Innovations Providers have physical sites inside the PBH catchment area. Given that the majority of Innovations Services are not office based, access to these services is not based on the physical site of the provider. It should be noted, however; that many Innovations Service Providers operated multiple sites within our catchment area.

County served by Provider	DD Providers	Innovations Providers
Cabarrus	30	9
Davidson	17	5
Rowan	20	6
Stanly	13	5
Union	21	9
<b>Total Providers in Catchment Area</b>	<b>65</b>	<b>34</b>
<b>Providers Outside PBH Catchment Area</b>	<b>65</b>	<b>32</b>
<b>Total Contract Providers</b>	<b>105</b>	<b>66</b>

**B3 Service Providers:**

B3 Services were provided by 43 of our contracted providers during 2010. During CY 2010 the majority of B3 Service Providers were also Innovations Providers.

County Services Provided In	B3 Providers
Cabarrus	6
Davidson	3
Rowan	3
Stanly	5
Union	4
<b>Total Providers in Catchment Area</b>	<b>21</b>
<b>Providers Outside PBH Catchment Area</b>	<b>22</b>
<b>Total Providers</b>	<b>43</b>



## Residential Services:

During CY 2010 86 of PBH's contract providers provided residential services to our consumers at over 492 sites (over 486 Agency based and 6 State Facilities). Approximately 296 of those sites were located inside the PBH catchment area. Of the contracted residential providers, 24 provide Intermediate Care Facility (ICF) level of care at approximately 86 sites for a total of 756 beds, 240 in catchment area. Additionally, PBH utilizes the 3 State operated Developmental Centers (1454 total beds) and the 3 State operated Neuro-Medical Treatment Facilities (713 total beds). PBH is assigned to the Developmental Center and Neuro-Medical Treatment Facility for the Western Region. We have a limited number of consumers that are located in Developmental Centers and Neuro-Medical Treatment Facilities in the Central and Eastern regions.

### Intermediate Care Facilities (ICF)

County served by Provider	Total Agency Based Residential Sites	State Developmental Centers	State Developmental Center (Total Available Beds)	Number of PBH Consumers served at State Developmental Centers	State Neuro-Medical Treatment Facilities	State Neuro-Medical Treatment Facility (Total Available Beds)	Number of PBH Consumers Served at State Neuro-Medical Treatment Facilities	Community ICF Providers	Additional ICF Sites	Total ICF Sites	Specialized Community Residential - .2100 (Total Available Beds)	Total Community ICF Beds
Cabarrus	98	0	0	0	0	0	0	2	3	5	134	145
Davidson	26	0	0	0	0	0	0	1	1	2	0	12
Rowan	68	0	0	0	0	0	0	2	3	5	0	36
Stanly	55	0	0	0	0	0	0	1	4	5	0	29
Union	49	0	0	0	0	0	0	1	2	3	0	18
<b>Total in Catchment Area</b>	<b>296</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>7</b>	<b>13</b>	<b>20</b>	<b>134</b>	<b>240</b>
Total Outside PBH Catchment Area	190	3	1454	38	3	713	43	17	49	66	186	516
<b>Grand Total</b>	<b>486</b>	<b>3</b>	<b>1454</b>	<b>38</b>	<b>3</b>	<b>713</b>	<b>31</b>	<b>24</b>	<b>62</b>	<b>86</b>	<b>320</b>	<b>756</b>
Total Available Bed Days				530,710			260,245					275,940
Actual Bed Days Used				14,679			11,091					61,590
Total Consumers Served				45			34					185
Average Consumers Served/ Bed Used Per Day				40			30					169
% of Utilization of Total Available Beds				2.77%			4.26%					22.32%

PBH contracts for 320 Specialized Community Residential Center beds (long term ICFs providing integrated medical services and close supervision for up to 30 consumers) for individuals with Developmental Disabilities.

*It should be noted that Intermediate Care Facility (ICF) capacity is determined by a statewide Certificate of Need (CON) process. PBH contracts as needs are indentified and beds are available.*

**\*Please see North Carolina 2011 State Medical Facilities Plan**



**Residential Services: (Continued)**

Child Mental Health - PBH currently has 557 Therapeutic Foster Care beds (family and facility based combined), 162 Residential Treatment High Facility beds, 19 Residential Treatment Secure Facility beds, and 257 Psychiatric Residential Treatment facility beds for children and adolescents under contract. During CY 2010 PBH expanded its residential service array to Residential I Foster Care. This service utilizes the same homes as the Residential I Family Type Therapeutic Foster Care to allow for continuity of care as well as additional time for transition if needed. PBH has excess capacity within our catchment area for Level II and Level III beds. Currently there are no Level IV or PRTF beds located in our catchment area. PBH has large number of Level III Homes/beds and PRTF Facilities/beds under contract because of the high demand for these services statewide and our limited ability to access these when needed. Additionally, there continues to be a shortage of Level IV beds statewide.

**Child MH Residential**

County served by Provider	Res I beds	Res II Family Type beds	Res II Facility Type beds	Total Res II beds	Res III beds	Res IV beds	PRTF beds
Cabarrus		126	1	127	22	0	0
Davidson		9	0	9	0	0	0
Rowan		24	12	36	74	0	0
Stanly		0	0	0	0	0	0
Union		34	0	34	0	0	0
<b>Total in Catchment Area</b>		<b>193</b>	<b>13</b>	<b>206</b>	<b>96</b>	<b>0</b>	<b>0</b>
<b>Total Outside PBH Catchment Area</b>		330	21	351	66	19	257
<b>Grand Total</b>		<b>523</b>	<b>34</b>	<b>557</b>	<b>162</b>	<b>19</b>	<b>257</b>
<b>Total Available Bed Days</b>		190,895	12,410	203,305	59,130	6,935	93,805
<b>Actual Bed Days Used</b>	2,988	19,590	2,169	21,759	11,797	471	12,165
<b>Total Consumers Served</b>	29	134	18	151	111	3	74
<b>Average Consumers Served/ Bed Used Per Day</b>	8	54	6	60	32	1	33
<b>% of Utilization of Total Available Beds</b>		10.26%	17.48%	10.70%	19.95%	6.79%	12.97%

**Res I** - Foster Care

**Res II** - Residential Treatment Level II, Therapeutic Foster Care

**Res III**- Residential Treatment Level III, Group Home

**Res IV**- Residential Treatment Level IV, Secure Group Home

**PRTF** - Psychiatric Residential Treatment Facility



State Funded Residential Services - PBH contracts for 35 adult mental health group home beds, 18 child developmental disability group home beds, 395 adult developmental disability group home beds, and 3 licensed alternative family living beds. PBH also contracts for 56 supervised living apartments for adults with developmental disabilities and 74 supervised living apartments for adults with mental illness. These are optional state funded services that are contracted for on an “as-funds-are-available” basis. The Mental Health and Developmental Disability group homes are long-term placements. Currently PBH does not have any substance abuse halfway house beds under contract.

**State Funded Residential Services**

County served by Provider	.5600A beds	.5600B beds	.5600C beds	.5600D beds	.5600E beds	.5600F beds (AFL)	Supervised Living MR 1 resident	Apartments
<b>Cabarrus</b>	12	0	72	0	0	0	13	16
<b>Davidson</b>	0	0	45	0	0	0	4	10
<b>Rowan</b>	0	0	70	0	0	0	4	10
<b>Stanly</b>	6	6	93	0	0	0	23	25
<b>Union</b>	12	0	34	0	0	0	2	0
<b>Total in Catchment Area</b>	<b>30</b>	<b>6</b>	<b>314</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>46</b>	<b>61</b>
<b>Total Outside PBH Catchment Area</b>	<b>5</b>	<b>12</b>	<b>81</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>10</b>	<b>13</b>
<b>Grand Total</b>	<b>35</b>	<b>18</b>	<b>395</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>56</b>	<b>74</b>

**Supervised Living/Group Homes:**

**.5600A**-Adult Mental Illness (MI)

**.5600B**-Child Developmental Disability (DD)

**.5600C**-Adult DD

**.5600D**-Child Substance Abuse (SA)

**.5600E**-Adult SA (Halfway House)

**.5600F**-Alternative Family Living



**The Waiting List for Developmental Disabilities Services:**

The primary source of funding for services for people with developmental disabilities is Medicaid waiver funding. During Calendar Year 2010, PBH had **663** individuals that were served through the Innovations Waiver. There were 404 consumers waiting for Innovations funding.

**Cabarrus County**

Service	Waiting	Placed	Total (Distinct Count)
Awaiting_Innovations	115	21	154

**Davidson County**

Service	Waiting	Placed	Total (Distinct Count)
Awaiting_Innovations	84	19	108

**Rowan County**

Service	Waiting	Placed	Total (Distinct Count)
Awaiting_Innovations	46	14	78

**Stanly County**

Service	Waiting	Placed	Total (Distinct Count)
Awaiting_Innovations	30	3	39

**Union County**

Service	Waiting	Placed	Total (Distinct Count)
Awaiting_Innovations	120	25	164

**Reside Out-of-Catchment Area**

Service	Waiting	Placed	Total (Distinct Count)
Awaiting_Innovations	9	3	16

**Waiting** – currently waiting for an Innovations slot

**Placed** – Received an Innovations slot



State funding for individuals with developmental disabilities is primarily needed for housing because housing is not paid for by Medicaid funds. PBH has 110 people waiting for funding for residential care and housing.

**Cabarrus County**

Service	Waiting	Placed	In Process	Total (Distinct Count)
Total Residential	20	1	11	32

**Davidson County**

Service	Waiting	Placed	In Process	Total (Distinct Count)
Total Residential	17	3	9	29

**Rowan County**

Service	Waiting	Placed	In Process	Total (Distinct Count)
Total Residential	12	2	3	17

**Stanly County**

Service	Waiting	Placed	In Process	Total (Distinct Count)
Total Residential	5	1	5	11

**Union County**

Service	Waiting	Placed	In Process	Total (Distinct Count)
Total Residential	11	0	11	22

**Reside Out-of-Catchment Area**

Service	Waiting	Placed	In Process	Total (Distinct Count)
Total Residential	6	0	0	6

**Waiting** – currently waiting for a residential service  
**Placed** – Received a Residential service

**In Process** – Working with consumer/family to place in Residential Service



During the 2009-2010 Fiscal Year PBH began collecting data on people waiting for non-Medicaid/non-emergency services across all disability groups. The charts below are separated by county and disability group. We believe the need for Mental Health and Substance Abuse Services is under reported at this time.

### Cabarrus County

#### **DD Consumers**

Service	Waiting	Placed	In Process	Total (Distinct Count)
Residential Supports	0	0	4	4
YM811 Supervised Living - 1 Resident	1	0	0	1
YM813 Supervised Living - 3 Residents	0	0	1	1
YP010 Hourly Respite - Individual	5	1	1	7
YP620 ADVP	3	0	23	26
YP710 Sup Living - Low	2	0	0	2
YP720 Sup Living - Moderate	0	0	0	0
YP760 Group Living - Low	3	0	0	3
YP770 Group Living - Moderate	4	1	14	19
YP780 Group Living - High	2	1	0	3
Awaiting_Innovations	116	20	0	136

#### **MH Consumers**

Service	Waiting	Placed	In Process	Total (Distinct Count)
H2012 - HA - Day Treatment Child	1	0	0	1
H2022 Intensive In-Home Services	2	0	0	2
YP710 Sup Living - Low	0	3	0	3
YP760 Group Living - Low	0	1	0	1
YP770 Group Living - Moderate	1	0	0	1
YP780 Group Living - High	0	1	0	1

#### **SA Consumers**

Service	Waiting	Placed	In Process	Total (Distinct Count)
YP710 Sup Living - Low	1	0	0	1

**Waiting** – currently waiting for a service  
**Placed** – Received the service

**In Process**– Working with consumer/family to place in the Service



## Davidson County

### **DD Consumers**

Service	Waiting	Placed	In Process	Total (Distinct Count)
100 ICF/MR Hospital Admission & General Hospital	1	0	1	2
Residential Supports	0	0	2	2
YM813 Supervised Living - 3 Residents	0	0	2	2
YP010 Hourly Respite - Individual	2	2	0	4
YP620 ADVP	1	2	14	17
YP710 Sup Living - Low	1	0	0	1
YP760 Group Living - Low	2	0	0	2
YP770 Group Living - Moderate	4	3	9	16
YP780 Group Living - High	4	0	0	4
Awaiting_Innovations	86	19	0	105

### **MH Consumers**

Service	Waiting	Placed	In Process	Total (Distinct Count)
H0036 HA Community Support - Individual - Child	5	0	0	5
H0036 HB Community Support - Individual - Adult	10	0	0	10
YP710 Sup Living - Low	0	0	0	0
YP760 Group Living - Low	0	0	0	0
YP770 Group Living - Moderate	1	0	0	1
YP780 Group Living - High	0	1	0	1

### **SA Consumers**

Service	Waiting	Placed	In Process	Total (Distinct Count)
None Reported	0	0	0	0

**Waiting** – currently waiting for services  
**Placed** – Received Service

**In Process** – Working with Consumer/family to place in service



## Rowan County

### **DD Consumers**

Service	Waiting	Placed	In Process	Total (Distinct Count)
100 ICF/MR Hospital Admission & General Hospital	0	0	1	1
Residential Supports	0	0	2	2
SF010 Home and Comm Supports -- State	0	1	0	1
YP010 Hourly Respite - Individual	0	1	0	1
YP620 ADVP	4	5	12	21
YP710 Sup Living - Low	2	0	0	2
YP760 Group Living - Low	1	0	0	1
YP770 Group Living - Moderate	2	2	5	9
YP780 Group Living - High	3	0	0	3
Awaiting_Innovations	50	9	0	59

### **MH Consumers**

Service	Waiting	Placed	In Process	Total (Distinct Count)
H2012 - HA - Day Treatment Child	1	0	0	1
H2017 Psychosocial Rehab	1	0	0	1
YP760 Group Living - Low	0	0	0	0
YP770 Group Living - Moderate	2	0	0	2
YP780 Group Living - High	0	0	0	0

### **SA Consumers**

Service	Waiting	Placed	In Process	Total (Distinct Count)
None Reported	0	0	0	0

**Waiting** – currently waiting for services  
**Placed** – Received Service

**In Process** – Working with Consumer/family to place in service



## Stanly County

### **DD Consumers**

Service	Waiting	Placed	In Process	Total (Distinct Count)
100 ICF/MR Hospital Admission & General Hospital	0	1	0	1
Residential Supports	0	1	0	1
YP010 Hourly Respite - Individual	0	0	0	0
YP620 ADVP	0	2	11	13
YP710 Sup Living - Low	2	0	0	2
YP760 Group Living - Low	1	0	0	1
YP770 Group Living - Moderate	1	0	5	6
YP780 Group Living - High	0	2	0	2
Awaiting_Innovations	33	3	0	36

### **MH Consumers**

Service	Waiting	Placed	In Process	Total (Distinct Count)
H2033 Multi-systemic Therapy (MST)	1	0	0	1
YP710 Sup Living - Low	0	0	0	0
YP760 Group Living - Low	0	0	0	0
YP780 Group Living - High	0	1	0	1

### **SA Consumers**

Service	Waiting	Placed	In Process	Total (Distinct Count)
None Reported	0	0	0	0

**Waiting** – currently waiting for services  
**Placed** – Received Service

**In Process** – Working with Consumer/family to place in service

## Union County

### **DD Consumers**

Service	Waiting	Placed	In Process	Total (Distinct Count)
Residential Supports	0	0	0	0
YM813 Supervised Living - 3 Residents	0	0	1	1
YP010 Hourly Respite - Individual	4	2	0	6
YP620 ADVP	1	5	24	30
YP710 Sup Living - Low	3	0	0	3
YP720 Sup Living - Moderate	0	0	1	1
YP760 Group Living - Low	2	0	0	2
YP770 Group Living - Moderate	2	0	11	13
YP780 Group Living - High	1	0	0	1
Awaiting_Innovations	124	22	0	146

### **MH Consumers**

Service	Waiting	Placed	In Process	Total (Distinct Count)
H2012 - HA - Day Treatment Child	1	0	0	1
H2022 Intensive In-Home Services	2	0	0	2
H2033 Multi-systemic Therapy (MST)	1	0	0	1
YP710 Sup Living - Low	1	0	0	1
YP760 Group Living - Low	0	1	0	1
YP770 Group Living - Moderate	1	0	0	1
YP780 Group Living - High	1	1	0	2

### **SA Consumers**

Service	Waiting	Placed	In Process	Total (Distinct Count)
None Reported	0	0	0	0

**Waiting** – currently waiting for services  
**Placed** – Received Service

**In Process** – Working with Consumer/family to place in service



## Out of Catchment Area

### **DD Consumers**

Service	Waiting	Placed	In Process	Total (Distinct Count)
Residential Supports	0	1	1	2
YM812 Supervised Living - 2 Residents	1	0	0	1
YP620 ADVP	0	0	2	2
YP760 Group Living - Low	1	0	0	1
YP770 Group Living - Moderate	1	0	1	2
YP780 Group Living - High	1	1	0	2
Awaiting_Innovations	9	3	0	9

### **MH Consumers**

Service	Waiting	Placed	In Process	Total (Distinct Count)
YP760 Group Living - Low	0	1	0	1

### **SA Consumers**

Service	Waiting	Placed	In Process	Total (Distinct Count)
None Reported	0	0	0	0

**Waiting** – currently waiting for services  
**Placed** – Received Service

**In Process** – Working with Consumer/family to place in service

## **Inpatient Care:**

PBH contracts for multiple levels of inpatient care for both substance abuse and mental health treatment. Currently PBH contracts with one out of catchment area program for social setting detoxification services (44 beds total), one out of area Non-hospital medical detoxification program (16 beds), and 4 residential substance abuse treatment providers; 1 (18 beds) in catchment area and 3 (88 beds) out of catchment area. These services are in great demand and accessibility is often times a problem (see chart on next page on funding eligibility). PBH currently contracts for 32 facility based crisis/detox beds in catchment area that can provide services to mental health and substance abuse consumers. All 32 of these beds are reserved for PBH consumers. PBH is in the process of developing one (1) additional facility based crisis/detox facilities as well as residential crisis services for persons with developmental disabilities. As with the existing facility based crisis unit, all 16 beds will be reserved for PBH consumers. PBH also has a contract with the State's Julian Keith Alcohol and Drug Abuse Treatment Center which has 80 beds operational; however, access to these beds is very limited, and actual utilization is minimal.

PBH contracts with local hospitals for acute inpatient psychiatric services. PBH currently has eight (8) hospitals under contract and is actively working with several other hospitals/hospital systems to facilitate the contract process. PBH also works with over 26 additional non-contracted/out-of-network acute psychiatric inpatient hospital bed providers to insure consumers have access emergency care. Arrangements are made on an as needed basis due to presentation of Medicaid funded consumers in out of network hospitals across the state. Of the eight (8) contract hospitals, three (3) are located inside and five (5) are located outside of PBH's catchment area. Currently, 302 acute psychiatric beds are under contract to PBH and broken down as follows: 18 gero-psychiatry beds, 134 adult psychiatry beds, and 150 adolescent psychiatry beds. *However, only 32 Adult Psychiatry and 10 Gero-psychiatry beds are located in the PBH catchment area.* There is intense demand for adult psychiatry beds, and even with this number of hospitals under contract, PBH routinely has difficulty placing individuals needing adult acute inpatient care. Child psychiatry beds, except for those contracted with Old Vineyard and Holly Hill, tend to be negotiated on a case by case basis through Provider Payment Agreements or are facilitated as emergency services. It should also be noted that 6 of the 8 hospitals are contracted for both PBH Medicaid and State Funded admissions: the capacity of these contracts include 10 gero-psychiatry beds, 56 adult psychiatry beds, and 98 adolescent psychiatry beds; availability of beds is limited due to limited vacancies. State funded contracts allow uninsured/state funded consumers from our catchment area the same benefit as that for Medicaid consumers of being hospitalized locally if the need should arise. This has allowed PBH to significantly reduce our utilization of the state psychiatric facilities.

(See charts on next 3 pages)



## Analysis of Contracted Inpatient Beds and Eligible Funding

All Contracted Inpatient Providers						
Provider Name	Inpatient (Hospital)	Gero Inpt beds	Adult Inpt beds	Adol Inpt beds	Child Inpt beds	Total beds
* Brynn Marr Hospital, Inc.	Out-of-catchment	0	10	20	0	30
CMC - NorthEast, Inc.	In catchment	10	0	0	0	10
High Point Regional Health System	Out-of-catchment	0	24	0	0	24
* Holly Hill Hospital	Out-of-catchment	8	20	52	0	80
* Keystone WSNC LLC DBA Old Vineyard Youth Services	Out-of-catchment	0	0	46	0	46
Moses Cone Health Systems	Out-of-catchment	0	48	32	0	80
Rowan Regional Medical Center	In catchment	0	20	0	0	20
Stanly Regional Medical Center	In catchment	0	12	0	0	12
<b>Total</b>		<b>8</b>	<b>18</b>	<b>134</b>	<b>150</b>	<b>302</b>

Medicaid and State Funded Contract Providers						
Provider Name	Inpatient (Hospital)	Gero Inpt beds	Adult Inpt beds	Adol Inpt beds	Child Inpt beds	Total beds
CMC - NorthEast, Inc.	In catchment	10	0	0	0	10
High Point Regional Health System	Out-of-catchment	0	24	0	0	24
* Holly Hill Hospital	Out-of-catchment	0	0	52	0	52
* Keystone WSNC LLC DBA Old Vineyard Youth Services	Out-of-catchment	0	0	46	0	46
Rowan Regional Medical Center	In catchment	0	20	0	0	20
Stanly Regional Medical Center	In catchment	0	12	0	0	12
<b>Total</b>		<b>6</b>	<b>10</b>	<b>56</b>	<b>98</b>	<b>164</b>

Medicaid Only Contracted Inpatient Providers						
Provider Name	Inpatient (Hospital)	Gero Inpt beds	Adult Inpt beds	Adol Inpt beds	Child Inpt beds	Total beds
* Brynn Marr Hospital, Inc.	Out-of-catchment	0	0	20	0	20
Moses Cone Health Systems	Out-of-catchment	0	48	32	0	80
<b>Total</b>		<b>2</b>	<b>0</b>	<b>48</b>	<b>52</b>	<b>100</b>

State Funded Only Contracted Inpatient Providers						
Provider Name	Inpatient (Hospital)	Gero Inpt beds	Adult Inpt beds	Adol Inpt beds	Child Inpt beds	Total beds
* Brynn Marr Hospital, Inc.	Out-of-catchment	0	10	0	0	10
* Holly Hill Hospital	Out-of-catchment	8	20	0	0	28
<b>Total</b>		<b>2</b>	<b>8</b>	<b>30</b>	<b>0</b>	<b>38</b>

\* Facilities affected by Federal Institution for Mental Disorders (IMD) Rules



### Contract and State Facilities

County served by Provider	SS Detox beds	NHM Detox beds	Residential SA Tx	State Alcohol and Drug Abuse Treatment Centers*	State ADATC Beds	Facility Based Crisis	State Psychiatric Hospitals**	State Psychiatric Hospital Beds	Private Inpatient Hospitals	Gero beds	Adult beds	Adolescent beds	Child beds
Cabarrus	0	0	0	0	0	16	0	0	1	10	0	0	0
Davidson	0	0	18	0	0	0	0	0	3	0	0	0	0
Rowan	0	0	0	0	0	0	0	0	1	0	20	0	0
Stanly	0	0	0	0	0	0	0	0	1	0	12	0	0
Union	0	0	0	0	0	16	0	0	0	0	0	0	0
<b>Total in Catchment Area</b>	<b>0</b>	<b>0</b>	<b>18</b>	<b>0</b>	<b>0</b>	<b>32</b>	<b>0</b>	<b>0</b>	<b>6</b>	<b>10</b>	<b>32</b>	<b>0</b>	<b>0</b>
<b>Total Outside PBH Catchment Area</b>	44	16	88	1	80	0	4	620	2	8	102	150	0
<b>Grand Total</b>	<b>44</b>	<b>16</b>	<b>106</b>	<b>1</b>	<b>80</b>	<b>32</b>	<b>4</b>	<b>620</b>	<b>8</b>	<b>18</b>	<b>134</b>	<b>150</b>	<b>0</b>
<b>Total Bed Available Bed Days</b>	16,060	5,840	38,690		29,200	11,680		226,300		6,570	48,910	54,750	0
<b>Actual Bed Days Used</b>	7	352	11,584		263	5,733		13,654		89	6,873	1,086	0
<b>Total Consumers Served</b>	3	85	399		15	1,210		188		19	1,064	91	0
<b>Average Consumers Served/ Bed Used Per Day</b>	0.02	1	32		1	16		37		0.24	18.83	2.98	0.00
<b>% of Utilization</b>	0.04%	6%	30%		1%	49%		***66%		1%	14%	2%	0%

\* Julian Keith Center, RJ Blackley, Walter B Jones

\*\* Broughton State Hospital, Central Regional Hospital, Cherry Hospital, Dorothea Dix State Hospital (includes gero, adult, & adolescent beds)

\*\*\* Reflect % utilization of PBH's bed allocation, not the total number of State Hospital Beds



<b>Out-of-Network (non-contract) Inpatient Providers Serving PBH Consumers</b>					
<b>County served by Provider</b>	<b>Private Inpatient Hospitals</b>	<b>Gero beds</b>	<b>Adult beds</b>	<b>Adolescent beds</b>	<b>Child beds</b>
<b>Cabarrus</b>	0	0	0	0	0
<b>Davidson</b>	0	26	0	0	0
<b>Rowan</b>	0	0	0	0	0
<b>Stanly</b>	0	0	0	0	0
<b>Union</b>	1	0	0	0	0
<b>Total in Catchment Area</b>	<b>1</b>	<b>26</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Total Outside PBH Catchment Area</b>	25	0	687	147	0
<b>Grand Total</b>	<b>26</b>	<b>26</b>	<b>687</b>	<b>147</b>	<b>0</b>
<b>Actual Bed Days Used</b>	2678	130	1600	948	0
<b>Total Consumers Served</b>	322	26	206	90	0
<b>Average Consumers Served/ Bed Used Per Day</b>	7.34	0.36	4.38	2.60	0.00



## **Inpatient Care:**

### Issues Regarding Inpatient Psychiatric Care:

1. With a general population estimated to be in excess of 736,000 PBH is the third largest LME in the state. We are in a region of rapid population growth.
2. As per North Carolina's 2011 State Medical Facilities Plan there are 68 community adult and 0 child & adolescent psychiatric beds in our local hospitals, *36 (over 50%) are geriatric only beds*. The proposed State Medical Facilities Plan for 2011 shows that our area has a surplus of 13 adult inpatient psychiatric beds. Although the need projection formula certainly includes geriatric need, we believe the formula does not recognize the "set aside" of beds for geriatric only care. In reality, we have only 32 acute psychiatric beds available. *Our area is significantly under-resourced for adult acute psychiatric hospitalization*. Hospital bed availability is determined by the NC State Health Coordinating Council.
3. Additionally, the State Medical Facilities Plan does not report the utilization rates for the current psychiatric bed inventory; however it has been our experience that some hospitals do not staff for full capacity for the beds that are active.
4. The 2011 State Medical Facilities Plan shows a need for 9 child/adolescent beds. We are not aware of any efforts currently underway by any hospitals in our catchment area to add child/adolescent psychiatry beds to their facilities.

During 2010, PBH also had access to State Psychiatric Hospital beds at Broughton Hospital. These facilities have a total of 313 beds and provide geriatric, adult, and adolescent inpatient psychiatric services. All five PBH counties have been assigned to Broughton Hospital. PBH does send consumers to other state hospitals due to capacity issues at Broughton or due to the age of the consumer. Broughton does not have a children's unit. Even though PBH under utilizes our state allocation of psychiatric inpatient beds, we have great difficulty accessing placement for consumers in the state hospitals. This often involves consumers waiting in emergency departments at community hospitals until beds are available.

During 2008-2009, PBH admissions per 1,000 to state psychiatric hospitals were well below the state average; in fact we are ranked 22 out of 24 LMEs (1 is the highest, 24 is the lowest rate). In addition, PBH only used 87% of our allocated bed days at the state psychiatric hospitals in 2008-2009. (see charts on next 2 pages)

**DMH/DD/SAS - State Operated Healthcare Facilities  
State Psychiatric Hospital Admissions Per Capita  
Period of 7/1/08 to 6/30/09**

LME	Adult Acute	Ages 5-12	Ages 13-18	Gero	Other **	Total Admissions*	% of All Admissions	Average Admissions per Month <sup>1</sup>	Population (2008)	Rate per thousand	State Ave. (07/08) per thousand	Utilization Rank per capita (1-24) <sup>2</sup>
ACR	315	6	25	8	18	372	4%	31	264,621	1.406	0.93	4
Albemarle-Tide	93	3	22	11	5	134	2%	11	182,541	0.734	0.93	18
Beacon Center	282	3	46	15	36	382	4%	32	248,084	1.540	0.93	3
Mental Health Partners	144	1	19	8	15	187	2%	16	247,420	0.756	0.93	16
CenterPoint	486	3	26	7	42	564	6%	47	438,266	1.287	0.93	6
Crossroads	179	5	20	6	21	231	3%	19	270,755	0.853	0.93	15
Cumberland	209	5	33	6	35	288	3%	24	319,883	0.900	0.93	14
Durham	388	12	71	8	39	518	6%	43	267,492	1.937	0.93	1
ECBHS	170	1	48	11	25	255	3%	21	404,274	0.631	0.93	21
Eastpointe	284	4	60	34	23	405	5%	34	294,211	1.377	0.93	5
Five County	242	1	20	11	18	292	3%	24	234,180	1.247	0.93	7
Guilford	398	1	36	8	50	493	6%	41	476,831	1.034	0.93	9
Johnston	116	2	22	8	10	158	2%	13	168,825	0.936	0.93	12
Mecklenburg	219	2	46	1	40	308	4%	26	894,219	0.344	0.93	23
OCBHS	125	5	17	5	15	167	2%	14	242,062	0.690	0.93	19
OPC	167	2	32	8	16	225	3%	19	231,244	0.973	0.93	11
Pathways	47	0	18	8	15	88	1%	7	384,960	0.229	0.93	24
Piedmont	247	2	39	10	30	328	4%	27	739,735	0.443	0.93	22
Sandhills	248	1	48	14	41	352	4%	29	547,102	0.643	0.93	20
Smoky Mountain	363	5	60	8	49	485	6%	40	522,576	0.928	0.93	13
Southeastern Ctr	274	5	39	22	30	370	4%	31	355,050	1.042	0.93	8
Southeastern Reg	122	0	34	15	20	191	2%	16	256,296	0.745	0.93	17
Wake	1232	6	103	33	91	1465	17%	122	900,342	1.627	0.93	2
Western Highlands	407	7	43	7	44	508	6%	42	507,121	1.002	0.93	10
<b>Totals</b>	<b>6757</b>	<b>82</b>	<b>927</b>	<b>272</b>	<b>728</b>	<b>8766</b>	<b>100%</b>	<b>731</b>	<b>9,398,090</b>	<b>0.933</b>	<b>0.93</b>	

\*\*Includes Medical, Research, Pretrial, Deaf and Forensic Service Categories

1 =Highlighted LMEs have more than 50 admissions per month

2 =Highlighted LMEs have utilization higher than the state average

\* This is the most recent report available from the NC Division of Mental Health, Developmental Disabilities, and Substance Abuse Services.



<u>LME</u>	<u>Utilization of State Per Capita Allocation of Bed Days for 2008-2009</u>
OCBHS	58.63%
SER	65.09%
Mecklenburg	69.13%
OPC	69.27%
Johnston	72.83%
ECBHS	76.26%
ALB/Tideland	77.96%
Sandhills	79.55%
SEC	84.05%
Piedmont	86.93%
Pathways	87.07%
Guilford	92.26%
Crossroads	94.52%
ACR	98.31%
CenterPoint	100.62%
Beacon Center	104.90%
Cumberland	105.54%
Eastpointe	114.68%
Wake	116.74%
Five County	124.98%
Durham	157.72%
Mental Health Partners	162.54%
Smoky Mountain	172.77%
Western Highlands	196.93%

\* This is the most recent report available from the NC Division of Mental Health, Developmental Disabilities, and Substance Abuse Services.

### **Specialty Care Providers:**

Child Day Treatment: During CY 2010 PBH had 9 Day Treatment service providers under contract. Of those providers, 2 were physically located inside PBH's catchment area. Those providers outside of our catchment area have been enrolled to meet the needs of individual consumers living in other parts of the state. The number of Day Treatment service providers has been affected by CABHA requirements.

Methadone Treatment: PBH contracted with 2 methadone treatment providers, one with 2 physical locations inside PBH's catchment area. Each provider also has a physical location outside of our catchment area

Substance Abuse SAIOP: PBH had two contracted providers of Substance Abuse Intensive Outpatient Program (SAIOP) services. We are continuing to evaluate the need for additional SAIOP services in the Network and will expand the availability services as needed.



County served by Provider	Day Treatment	Opioid Treatment	Additional Opioid Treatment Sites*	SACOT	SAIOP	Additional SAIOP Sites
Cabarrus	0	1	0	1	1	1
Davidson	0	1	0	0	0	1
Rowan	1	0	0	0	0	1
Stanly	0	0	0	0	0	1
Union	1	0	2	0	1	1
<b>Total in Catchment Area</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>1</b>	<b>2</b>	<b>5</b>
<b>Total Outside PBH Catchment Area</b>	7	0	1	1	0	0
<b>Grand Total</b>	<b>9</b>	<b>2</b>	<b>3</b>	<b>2</b>	<b>2</b>	<b>5</b>

\*Total of 5 Opioid Treatment sites operated by 2 contract agencies.

SACOT – Substance Abuse Comprehensive Outpatient Treatment  
SAIOP – Substance Abuse Intensive Outpatient

Intensive In-Home Team Capacity Calendar Year 2010							
Provider	# teams	Annual Capacity	Cabarrus	Davidson	Rowan	Stanly	Union
Monarch	12	192	X	X	X	X	X
RHA	6	96	X	X	X	X	X
	18	288					

In CY 2010 the number of contracted providers offering Intensive In-Home services decreased due to CABHA rules, however, the overall number of teams increased by seven (7). This increased the capacity of Intensive In-Home services by 136 consumers. For CY 2011, DAYMARK Recovery Services will begin developing Intensive In-Home Teams. Youth Villages will also develop at least one Intensive In-Home Team; however, the team(s) will only serve child and youth consumers designated to receive MAJORS funding.

## INNOVATIONS WAIVER

Service Type	Actual Utilization to Capacity					Projected Need to Capacity		
	Actual Utilization			2010/11 Target	Difference (under target)	Capacity*	2011/12 Projection	Capacity
	Consumers Served	Units of Service	Standard Hours/units			consumers/units		
<b>INNOVATIONS WAIVER SERVICES</b>	663	7,391 Member Months	n/a	633	30	670 consumers 7,821 member months	675 consumers 8,100 Member Months	n/a
INNOVATIONS WAIVER - AUG COM DEVICE		n/a	n/a	n/a	n/a	4 consumers n/a	one time	sufficient capacity
INNOVATIONS WAIVER – ASSISTIVE TECHNOLOGY, EQUIPMENT AND SUPPLIES	23	n/a	n/a	47	(24)	47 consumers n/a units	one time	sufficient capacity
INNOVATIONS WAIVER - COMMUNITY GUIDE	243	3,172	793	243	0	243 consumers 4,200 units	243 consumers 4,200 units	Due to Targeted Case Management ending for Waiver LME's, capacity of this service will need to be expanded.
INNOVATIONS WAIVER - CRISIS SERVICES	3	560	140	5	(2)	5 consumers 590 units	5 consumers 590 units	sufficient capacity
INNOVATIONS WAIVER - FINANCIAL MANAGEMENT SERVICES	6	72	18	5	1	6 consumers 72 units	5 consumers 70 units	sufficient capacity
INNOVATIONS WAIVER - HOME AND COMMUNITY SUPPORTS	437	2,074,729	518,682	481	(44)	481 consumers 2,623,023 units	0 consumers 0 units	this service was replaced with Personal Care, Intensive In-home Supports & In-home Skill Building as of 04/01/11
INNOVATIONS WAIVER - HOME MODIFICATIONS	19	n/a	n/a	16	3	19 consumers n/a units	one time	sufficient capacity
INNOVATIONS WAIVER - INDIVIDUAL SUPPLIES AND EQUIPMENT	2	2	n/a	3	(1)	3 consumers 7 units	2 consumers 2 units	sufficient capacity



Actual Utilization to Capacity						Projected Need to Capacity		
Service Type	Actual Utilization			2010/11 Target	Difference (under target)	Capacity*	2011/12 Projection	Capacity
	Consumers Served	Units of Service	Standard Hours/units			consumers/units		
INNOVATIONS WAIVER - NURSING RESPITE - LPN	0	0	0	1	(1)	1 consumer 32 units	0 consumers 0 units	sufficient capacity
INNOVATIONS WAIVER - NURSING RESPITE - RN	3	2,218	555	4	(1)	4 consumers 5,458 units	4 consumers 5,458 units	sufficient capacity
INNOVATIONS WAIVER - PA/RESPITE	421	680,103	170,026	396	25	421 consumers 680,103 units	421 consumers 700,00 units	sufficient capacity
INNOVATIONS WAIVER - RESIDENTIAL SUPPORTS	200	62,946	62,946	209	(9)	209 consumers 66,592 units	209 consumers 66,592 units	sufficient capacity
INNOVATIONS WAIVER - SUPPORTED EMPLOYMENT SERVICES	74	130,160	32,540	95	(21)	95 consumers 169,584 units	95 consumers 169,584 units	sufficient capacity
Innovations Waiver - Training	18	3,718	930	15	3	18 consumers 3,718 units	15 consumers 3,523 units	sufficient capacity
INNOVATIONS WAIVER - VEHICLE ADAPTATIONS	10	11	n/a	10	0	10 consumers 11 units	one time	sufficient capacity
INNOVATIONS WAIVER -DAY SUPPORTS	234	875,424	218,856	233	1	234 consumers 875,424 units	234 consumers 875,424 units	sufficient capacity**
SPECIALIZED CONSULTATIVE SERVICE	92	6,519	1,630	53	39	92 consumers 6,519 units	95 consumers 6,732 units	Increased capacity is needed

\* Capacity of Innovations Providers is continuously adjusted to meet the needs of Innovations Consumers. This includes adding new services and sites to existing provider contracts and adding new providers when necessary. In general, the existing provider network has been able to keep up with any increase in demand for services.

## MEDICAID

Actual Utilization to Capacity							Projected Need to Capacity		
Service Type	Actual Utilization			2010/11 Target	Difference (under target)	Capacity*		2011/12 Projection	Capacity
	Consumers Served	Units of Service	Standard Hours			Beds	Bed Days/std hours/ consumers		
<b>Community Support Team</b>	72	62,001	15,500	<b>86 consumers</b> 53,072 units	<b>(14) consumers</b> 8,829 units		90 consumers 77,501 units	<b>86 consumers</b> 74,057 units	Adequate
Adult	72	62,001	15,500	n/a	n/a		270		
Child	0	0	0	n/a	n/a		45		
<b>Outpatient</b>	<b>12,718</b>	<b>552,420</b>	<b>173,625</b>	<b>1,5097 consumers</b> 732,557 units	<b>(2,379) consumers</b> <b>(180,137) units</b>		<b>47,346 consumers,</b> <b>or;</b> <b>378,768 std hours</b>	<b>15,097 consumers</b> <b>732,557 units</b>	Adequate
Adult	7,657	492,500	139,439	n/a	n/a		30,361	9,090	
Child	5,061	59,920	34,186	n/a	n/a		7,112	6,007	
<b>Inpatient (per diem) Community Beds</b>	<b>844</b>	<b>7,443</b>		<b>814 consumers</b> 6,996 bed days	<b>30 Consumers</b> <b>(447) bed days</b>	<b>302 under contract</b>	<b>110,230 bed days under contract</b>	<b>889 consumers</b> 7,843 bed days	PBH does not have exclusive access to these beds. Based on waiting times for admission and beds available at the time of need, additional capacity is needed in catchment area, but, not available due to limit on acute psychiatric beds per State Medical Facilities Plan (CON).
Total Adult (bed days) - in and out of catchment area	603	3,729		3,505	224	n/a	n/a		
Total Child (bed days) - in and out of catchment area	241	3,714		3,491	223	n/a	n/a		



Actual Utilization to Capacity								Projected Need to Capacity	
Service Type	Actual Utilization			2010/11 Target	Difference (under target)	Capacity*		2011/12 Projection	Capacity
	Consumers Served	Units of Service	Standard Hours			Beds	Bed Days/std hours/consumers		
Contracted Adult (bed days) - in and out of catchment area	415	2,114		n/a	n/a	152	55,480		
Contracted Child (bed days) - in and out of catchment area	131	1,345		n/a	n/a	150	54,750		
Non-contracted Adult (bed days) - in and out of catchment area	214	1,615		n/a	n/a	n/a	n/a		
Non-contracted Child (bed days) - in and out of catchment area	122	2,369		n/a	n/a	n/a	n/a		
<b>Child Residential (per diem)</b>	<b>287</b>	<b>49,247</b>		<b>332 consumers</b> <b>59,760 bed days</b>	<b>(551)</b> <b>consumers</b> <b>(10,513) bed days</b>	<b>995</b>	<b>363,175</b>	<b>332 consumers</b>	<b>see below</b>
Therapeutic Foster Care	152	21,792		160	(8)	557	203,305	155 consumers	Adequate
Residential Tx Level III	111	11,829		130	(19)	162	59,130	120 consumers	These are not unique counts due to consumers moving from one level to the next. Total number of consumers expected to be served for level II & III is 240.
Residential Tx Level IV	3	471		3	0	19	6,935	3 consumers no additional level IV beds have been developed at this time.	Need additional capacity, there is a significant shortage of Level IV beds statewide. PBH is in the process of bringing on additional Level IV providers who have committed to developing facilities within our catchment area.



Actual Utilization to Capacity								Projected Need to Capacity	
Service Type	Actual Utilization			2010/11 Target	Difference (under target)	Capacity*		2011/12 Projection	Capacity
	Consumers Served	Units of Service	Standard Hours			Beds	Bed Days/std hours/ consumers		
PRTF	74	12,165		66	8	257	93,805	75 consumers 12,776 bed days	Need to develop Level IV capacity to reduce use of PRTF.
SAIOP**	90	1,523		80	10		240	100 consumers 1,692 units 11% increase over 2010 actual	Adequate
Day Treatment (per diem)	139	53,187		227	(88)		53,750	140 consumers 53,570 units	Continue to study need for additional capacity. CABHA standards required the transitioning of programs to CABHA providers causing a decrease in the number of provider agencies with this service, however, the number of programs remained stable. It is not clear how school district funding issues will affect the viability of existing programs.
Multi-systemic Therapy ***	128	31,732	7,933	165	(37)		163	140 consumers 34,706 units Increase of 12 consumers over 2010.	PBH experienced a reduction in the utilization of this service from 2009 to 2010. This may be due to a significant increase in the utilization of Intensive In-home Services



Actual Utilization to Capacity							Projected Need to Capacity		
Service Type	Actual Utilization			2010/11 Target	Difference (under target)	Capacity*		2011/12 Projection	Capacity
	Consumers Served	Units of Service	Standard Hours			Beds	Bed Days/std hours/consumers		
Intensive In-home Services ****	317	10,870		331	(14)		288	331 consumers 11,350 units	Additional capacity is needed. At least one additional provider of IHS will be added during FY 11/12

♦Community Support Team Capacity is based on CST of 3 staff with 15 consumers per staff member of 45 per team.

\*Outpatient Capacity is calculated based on: ([the number of credentialed clinicians in the providers network (607)] x [work hours in a year (2080)] x [productivity target (60%)]) x [estimated portion of FTE providing services to PBH consumers (50%)]

\* Inpatient and Child Residential are in total bed days per year (#beds x 365 days = capacity)

\*\* SAIOP capacity is based on 1 QP (12:1 ratio for consumers) and treatment session lasting 12 weeks (5 programs x 12 consumers x 4 sessions)

\*\*\* Day Treatment is based on the potential students/consumers by the number of possible school days

\*\*\*\* MST and Intensive Home capacity is the number of consumers that are estimated to be able to be served.

**STATE FUNDS**

Actual Utilization to Capacity							Projected Need to Capacity		
Service Type	Actual Utilization			2009/10 Target	Difference	Capacity*		2011/12 Projection	Capacity
	Consumers Served	Units of Service	Standard Hours			Beds	Bed Days/std hours/ consumers		
<b>Community Support Team</b>	3	2,306	577	n/a	n/a		315 consumers♦	<b>5 consumers</b> 4,584 units	Adequate
Adult	3	2,306	577	n/a	n/a		270		
Child	0	0	0	n/a	n/a		45		
<b>Outpatient</b>	<b>8,281</b>	<b>259,189</b>	<b>73,290</b>	<b>8,000</b>	<b>281</b>		<b>37,473 consumers, or; 328,224 std hours</b>	<b>8,300 consumers</b>	Adequate
Adult	7,687	253,290	71,514	7,280	407		30361	7,280	
Child	594	5,899	1,776	720	(126)		7,112	720	
<b>Inpatient (per diem) Community Beds</b>	<b>640</b>	<b>4,597</b>		626 consumers 4,063 bed days	<b>14 consumers</b> <b>(534) bed days</b>	<b>236</b>	<b>86,140</b>	<b>650 consumers</b> 4,669 bed days	PBH does not have exclusive access to these beds. Based on waiting times for admission and beds available at the time of need, additional capacity is needed in catchment area, but, not available due to limit on acute psychiatric beds per State Medical Facilities Plan (CON).
Total Adult (bed days) - in and out of catchment area	635	4,544		n/a	n/a	n/a	n/a		
Total Child (bed days) - in and out of catchment area	5	53		n/a	n/a	n/a	n/a		



Actual Utilization to Capacity							Projected Need to Capacity		
Service Type	Actual Utilization			2009/10 Target	Difference	Capacity*		2011/12 Projection	Capacity
	Consumers Served	Units of Service	Standard Hours			Beds	Bed Days/std hours/consumers		
Contracted Adult (bed days) - in and out of catchment area	635	4,544		595 consumers 3,860 bed days	40 consumers 684 bed days	86	31,390	644 consumers 4,605 bed days	
Contracted Child (bed days) - in and out of catchment area	5	53		31 consumers 203 bed days	(26) consumers (150) bed days	150	54,750	6 consumers 64 bed days	
Non-contracted Adult (bed days) - in and out of catchment area	0	0		n/a	n/a	n/a	n/a		
Non-contracted Child (bed days) - in and out of catchment area	0	0		n/a	n/a	n/a	n/a		
<b>Child Residential (per diem)</b>	<b>17</b>	<b>328</b>		<b>25</b>	<b>(1)</b>	<b>995</b>	<b>363,175</b>	<b>307 consumers</b>	see below
Therapeutic Foster Care	1	24		0	24	557	203,305	0 consumers 0	State funded services are frozen at this time
Residential Tx Level III	0	0		20	(20)	162	59,130	0 consumers 0	State funded services are frozen at this time
Residential Tx Level IV	0	0		3	(3)	19	6,935	0 consumers 0	State funded services are frozen at this time
PRTF	0	0		2	(2)	257	93,805	0 consumers 0	State funded services are frozen at this time



Actual Utilization to Capacity						Projected Need to Capacity			
Service Type	Actual Utilization			2009/10 Target	Difference	Capacity*		2011/12 Projection	Capacity
	Consumers Served	Units of Service	Standard Hours			Beds	Bed Days/std hours/consumers		
SAIOP**	231	3,961		253 consumers 3,693 units	(22) consumers 268 units		240	255 consumers 3,693 units	adequate
Day Treatment (per diem)	0	0		0	0		53,750	0 consumers 0 units	State funds are frozen at this time.
Multi-systemic Therapy ***	1	142	36	0	1		163	14 consumers 3,353 units	adequate
Intensive In-home Services ****	6	135		0	6		164	0 consumers 0 units	State funds are frozen at this time.

◆Community Support Capacity was determined using a caseload of 15 consumers per staff (QP, AP, or PP); Community Support Team Capacity is based on CST of 3 staff with 15 consumers per staff member of 45 per team.

\*Outpatient Capacity is calculated based on: ([the number of credentialed clinicians in the providers network (607)] x [work hours in a year (2080) x productivity target (60%)]) x [estimated portion of FTE providing services to PBH consumers (50%)]

\* Inpatient and Child Residential are in total bed days per year (#beds x 365 days = capacity)

\*\* SAIOP capacity is based on 1 QP (12:1 ratio for consumers) and treatment session lasting 12 weeks (5 programs x 12 consumers x 4 sessions)

\*\*\* Day Treatment is based on the potential students/consumers by the number of possible school days

\*\*\*\* MST and Intensive Home capacity is the number of consumers that are estimated to be able to be served.



## PBH Network Development Plan

PBH experienced cuts in State funding in both Fiscal Year 2008-2009 and Fiscal Year 2009-2010. Fortunately PBH did not have additional cuts to its State allocation for FY 2010/2011. The decreases in State funding from the two previous Fiscal Years has continued to have a negative effect on services for uninsured consumers and on our capacity for service development during the past three (3) years. North Carolina continues to experience budgetary shortfalls and restoration of State funding for mental health, developmental disabilities, and/or substance abuse services is unlikely for Fiscal Year 2011/2012. Most of the new initiatives planned for this fiscal year are limited to consumers that have Medicaid coverage or with funds from future savings from decreased use of state hospitals (based on use of community alternatives identified below). Our ability to implement our Substance Abuse Plan and to increase housing options for all disabilities is severely limited by the loss of State funds. Very few adult consumers with substance abuse treatment needs have Medicaid, and Medicaid does not fund housing.

It should be noted that significant changes were made to the Medicaid Waiver that took effect July 1, 2010. One of the more overt changes was the modification of the Waiver from a single LME Waiver, The PBH Cardinal and Innovations Waiver, to the multiple LME North Carolina Mental Health, Developmental Disabilities, and Substance Abuse Services Health Plan. The change in the Waiver included adjustments to the service array and service definitions. PBH projected increased utilization of Community Support Team, Day Treatment, Multi-systemic Therapy, Individual Respite, and Emergency Services. PBH also experience a significant increase in the utilization of Intensive In-home Services.

In April of 2011 additional changes to the Innovations Waiver took effect including changing Home Supports in to separate services: Personal Care, In-home Skill Building-Individual, In-home Skill Building-Group, and Intensive In-home Support.

PBH Priorities have been developed through both an analysis of service utilization and capacity of Network providers. Additionally, these priorities are consistent with the vision of our network as defined in our Local Business Plan and the Network Development goals and priorities set forth in PBH's 2010 Demographic, Utilization, and Network Capacity Study. It is important to note that the following goals from the Local Business Plan/2010 Capacity Study have been met.

1. Implement changes for the Innovations Waiver.
2. Evaluate the need for/utilization of Substance Abuse Intensive Outpatient Programs.
3. Evaluate the need for an additional Day Program in Davidson County for DD consumers.
4. Maximize the utilization of both the Union and Cabarrus Crisis Recovery Centers.

PBH continues to focus on the following priorities from the Local Business Plan.

1. The development of a substance abuse continuum of care for both children and adults.  
***PBH experienced a decline in the use of child substance abuse services during CY 2010 and will need to work with Medicaid and State funded providers to prioritize this during 2011/2012.***



2. Increased access to psychiatric care through development of a primary care co-location model.  
*We are continuing to work on this goal, however, have not made the level of progress we had hoped to due to the complexity of the model.*
3. Reduce the DD waiting list.  
*This is on ongoing goal for PBH. The number of consumers on the waiting list continues to grow even as new slots are added for Innovations and consumers access B-3 Services.*
4. Increased access to higher levels of residential care for identified children.  
*PBH continues to be concerned with increasing access to higher levels of residential care in order to avoid out of state placements for children, however, this goal will require a statewide effort with assistance from the Division of Mental Health, Developmental Disabilities, and Substance Abuse Services. Currently, a provider is in the process of developing a 12 bed PRTF in Stanly County that should be ready to admit consumers during FY 2011/2012.*
5. Increase penetration into Specialty Medicaid Population Groups, as identified in the Medicaid Waiver.  
*PBH is currently focusing on increasing penetration in to services by children in foster care in Union County.*
6. Maximize the utilization of both the Union and Cabarrus Crisis Recovery Centers.  
*Both CRC's are staying at or near capacity; however, we will need to continue to monitor to insure maximum utilization.*
7. Decrease the use of Hospital Emergency Departments for the delivery of behavioral healthcare services. This will include:  
*PBH is making progress on this goal. We have implemented a new monitoring tool for Mobile Crisis to that will provide data assist in evaluating the effectiveness of the program. The CCPs have developed a standardized First Responder Protocol which has been implemented. PBH has also increased the accessibility of crisis beds at the CRC to facilitate moving consumers out of Hospital Emergency Departments. PBH is also working with providers to establish a standardized crisis plan format and insure every consumer has a crisis plan. This goal is still in process.*

As indicated below, providers were identified from within the PBH network to expand their capacity to meet the priorities for CY 2010. In all instances this is built on provider expertise in service provision. The table below lists the outcome of the efforts under taken by PBH and its Provider Network to address the network development priorities delineated above.

Priority	Program	Outcomes
SA Continuum	Substance Abuse: Intensive Outpatient	During 2009/2010 RHA developed two IOP programs.



Priority	Program	Outcomes
	Treatment programs for adults.	Utilization of all IOP programs continues to be lower than expected; however, RHA is seeing growth in its Cabarrus IOP as of Spring 2011. PBH will continue to track the utilization of these programs on a monthly basis. Additionally, PBH's contracted providers will need to determine clinical characteristics for the target consumer and focus efforts on ensuring these individuals are referred for treatment.
Decrease utilization of state hospitals. Reduce recidivism for all psychiatric hospitals.	Bridger Program	PBH was not able to implement the Peer Bridger Program during FY 2010/2011 due funding issues. PBH plans to evaluate the feasibility of implementing this program for FY 2011/2012 after July 1, 2011.
Increase access to psychiatric services.	Psychiatry Services	PBH continues to increase access to psychiatric services. Additionally, PBH continues to increase its contracting with group practices that include or are made up of psychiatrist.
SA continuum for adolescents	MAJORS	MAJORS is a program that targets youth with substance abuse conditions and that have been involved in the legal system. During FY 2011/2012 MAJORS will transition to a funding source that will allow additional providers to serve this population. Additionally, it will assure that all MAJORS referrals have a GAINS assessment and have access to Intensive In-home services.
Reduce need for child residential services; increase community alternatives.	Increase Intensive In Home capacity.	During CY 2010, PBH continued to work with its provider network to increase intensive in-home capacity. Seven (7) new teams were added between January 1, 2010 and December 31, 2010 for a total of 18 teams with annual capacity of 188 consumers. PBH will work with providers to develop additional teams to increase capacity as needed. DAYMARK will begin providing Intensive In-home Services during FY 2011/2012.
Increase substance abuse continuum.	Intensive In-home substance abuse	RHA and Monarch have either added substance abuse teams or placed substance abuse staff on teams.
Reduce psychiatric hospitalization by increasing crisis alternatives.  Increase substance abuse continuum.	Additional Facility Based Crisis/Detox Facilities	In January of 2010, PBH successfully opened an additional Crisis Center for adults with mental health crisis and detoxification treatment needs in Union County. DAYMARK operates both the existing Crisis/Recovery Center (CRC) in Cabarrus County and the new Union CRC for PBH. PBH is continuing to plan for the development of a CRC in Davidson County. Davidson County continues to have a high rate of crisis and inpatient utilization. Davidson County does not have an acute psychiatric unit in either of its general hospitals.
Further develop crisis continuum.	DD Crisis Center	The need for a DD Crisis Center will be evaluated to determine whether there is sufficient demand to support a center based program. We may have available space in the building we plan to purchase in Davidson County, and if this is the case, the program can be located there.
Reduce state hospital utilization.	Residential Services for Serious and Persistently Mentally Ill adults	Progress on this goal is limited by availability of funding. Medicaid does not pay for residential services for adults with mental illness. PBH continues to expand the Shelter Plus Care program that targets homeless consumers for housing.
Further develop crisis continuum.	DD Consultation Team	An area wide Consultation Team was started in CY 2009 in to assist in better meeting the needs of people with co-occurring



Priority	Program	Outcomes
		mental illness and developmental disabilities conditions. This service will transition to Behavioral Health and Consulting Psychology July 1, 2011. Difficulties regarding this team/service include significant documentation and staffing time that is not billable.
Increase choice in outpatient services.	Increase in outpatient capacity	PBH continues to increase the number Licensed Independent Practitioner (LIP) and LIP Group contracts. This continues to be the fastest growing group of contract providers in the PBH Network.
Increase access to mental health treatment in primary care. Increase access to psychiatric care.	Best practice initiative: primary access to psychiatric consultation	We are continuing to work on this goal, however, have not made the level of progress we had hoped to due to the complexity of the model.
Increase access to mental health treatment in primary care.	Best practice initiative: primary care co-location program	We are continuing to work on this goal, however, have not made the level of progress we had hoped to due to the complexity of the model.
Reduce out of home placement of children; ensure appropriate interventions are provided in child residential services.	Children's residential continuum	This continues to be a priority for PBH. A team will be developing a plan for a system of residential services for children that is more focused, that includes wrap around specialty supports based on clinical indications, and which will provide a more intensive clinical milieu. The implementation and success of the plan may be effected by the availability of State funding.
Increase access to higher levels of care for child residential services.	Increase access to higher levels of care for residential services for children that require this level of care.	We have one provider that is in the process of developing a 12 bed PRTF in Stanly County. Statewide there continues to be a need for additional Level IV residential service options. Issues include decrease in state funding; cost of operating a level IV home vs. PRTF vs. per diem rate; and small number of Level IV homes statewide. This problem will require a statewide effort with assistance from the Division of Mental Health, Developmental Disabilities, and Substance Abuse Services.
Reduce the DD waiting list.	Implement additional Innovations waiver slots.	5 new Innovations Waiver slots will be available to PBH for FY 2011/2012. As of April 2012 PBH will have a total of 680 Innovations Waiver slots, however this does not meet the need.



### **Implementation of the Network Development Plan:**

The Network Development Plan has been incorporated into the PBH budget and Plan of Work for 2011-2012. Responsible PBH Departments or Cross Functional Teams are incorporated into the plan as well as accountability at the Senior and Executive management levels. Progress will be monitored through regular reports at the Executive and Board levels of the agency.