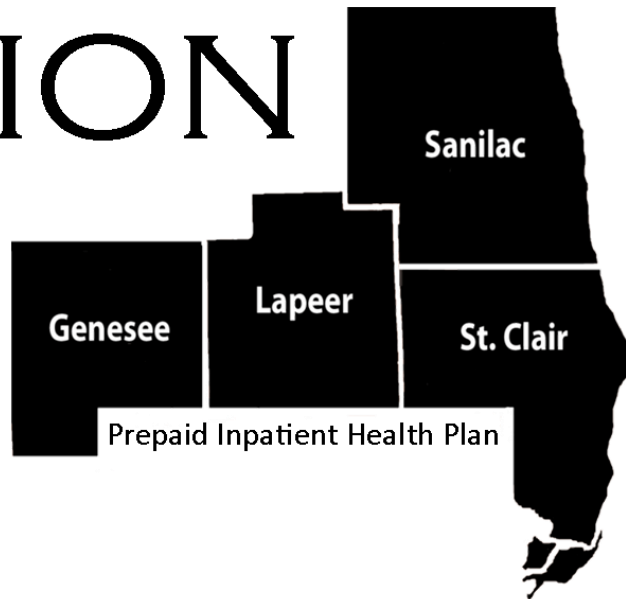


REGION

10



Michigan Mission-Based Performance Indicator System
JULY – SEPTEMBER
4TH QUARTER FY 2017

Region 10 PIHP
Michigan Mission-Based Performance Indicator System

4th Quarter FY2017 Summary Report
(July 1, 2017 – September 30, 2017)

This report is a summary of the performance indicators reported to the Michigan Department of Health and Human Services (MDHHS) by the PIHP (data aggregated from CMH / SUD providers). The Michigan Mission-Based Performance Indicator System (MMBPIS) was implemented in fiscal year 1997. The indicators have been revised over time, with the current revision effective October 1, 2006.

The indicators measure the performance of the PIHP for Medicaid beneficiaries served through the CMH/SUD affiliates. Since the indicators are a measure of performance, deviations from standards and negative statistical outliers may be addressed through contract action. Information from these indicators will be published on the MDHHS website within 90 days of the close of the reporting period.

This report summarizes the PIHP's results from the fourth quarter of fiscal year 2017 as well as trending information for the past three years of Performance Indicator data.

Performance Indicator 1

Indicator 1.a. The percentage of children receiving a pre-admission screening for psychiatric inpatient care for whom the disposition was completed within three hours. *The standard is 95%.*

	PIHP (Medicaid only)											
	1Q FY 15	2Q FY 15	3Q FY 15	4Q FY 15	1Q FY 16	2Q FY 16	3Q FY 16	4Q FY 16	1Q FY 17	2Q FY17	3Q FY 17	4Q FY 17
Genesee Health System	100	100	100	100	100	100	100	99.26	99.43	100	100	100
Lapeer CMH	100	100	100	100	100	100	100	100	100	100	100	100
Sanilac CMH	100	100	100	100	100	100	100	100	100	100	100	100
St. Clair CMH	100	100	100	100	100	100	100	100	100	100	100	100
PIHP Totals	100 N=219	100 N=216	100 N=207	100 N=210	100 N=216	100 N=243	100 N=259	99.56 N=229	100 N=281	100 N=286	100 N=280	100 N=270

Indicator 1.b. The percentage of adults receiving a pre-admission screening for psychiatric inpatient care for whom the disposition was completed within three hours. *The standard is 95%.*

	PIHP (Medicaid only)											
	1Q FY 15	2Q FY 15	3Q FY 15	4Q FY 15	1Q FY 16	2Q FY 16	3Q FY 16	4Q FY 16	1Q FY 17	2Q FY17	3Q FY 17	4Q FY 17
Genesee Health System	99.61	100	100	100	100	100	99.32	99.11	99.60	100	99.31	99.88
Lapeer CMH	100	100	100	100	100	100	100	100	100	100	100	100
Sanilac CMH	100	100	100	100	100	100	100	100	100	100	100	100
St. Clair CMH	100	100	99.80	100	100	100	100	100	100	100	100	100
PIHP Totals	99.74 N=774	100 N=859	100 N=827	100 N=798	100 N=799	100 N=1132	99.54 N=1082	99.42 N=1202	100 N=1090	100 N=1105	99.52 N=1257	99.92 N=1200

Performance Indicator 2

Indicator 2 The percentage of new persons receiving a face-to-face assessment with a professional within 14 calendar days of a non-emergency request for service. **95% is the standard.**

	PIHP (Medicaid only)											
	1Q FY 15	2Q FY 15	3Q FY 15	4Q FY 15	1Q FY 16	2Q FY 16	3Q FY 16	4Q FY 16	1Q FY 17	2Q FY17	3Q FY 17	4Q FY 17
Genesee Health System	97.37	98.72	98.54	97.51	95.77	96.73	97.02	92.28 (311/337)	93.85 (351/374)	88.20 (299/339)	98.10	100
Lapeer CMH	99.15	100	100	99.09	100	99.25	96.12	100	99.33	98.66	99.35	100
Sanilac CMH	100	100	100	100	100	100	100	100	100	100	100	100
St. Clair CMH	100	100	100	100	100	100	100	100	100	99.65	100	100
Genesee SUD	95.04	95.41	98.47	96.21								
St. Clair SUD	97.63	99.29	99.36	97.60								
Region 10 PIHP SUD					98.70	98.47	98.07	95.10	96.44	97.25	93.93 (883/940)	95.70
PIHP Totals	97.48 N=1750	98.29 N=1823	98.99 N=1889	98.03 N=1674	98.29 N=1755	98.39 N=1802	98.16 N=1689	95.84 N=1732	96.78 N=1737	96.16 N=1796	96.49 N=1880	97.87 N=1792

Indicator 2.a. The percentage of new children with emotional disturbance receiving a face-to-face assessment with a professional within 14 calendar days of a non-emergency request for service. **95% is the standard.**

	PIHP (Medicaid only)											
	1Q FY 15	2Q FY 15	3Q FY 15	4Q FY 15	1Q FY 16	2Q FY 16	3Q FY 16	4Q FY 16	1Q FY 17	2Q FY 17	3Q FY 17	4Q FY 17
Genesee Health System	96.52	97.67	97.81	99.19	95.54	93.29 (153/164)	97.17	97.53	96.63	82.73 (115/139)	97.60	100
Lapeer CMH	100	100	100	95.00	100	97.37	97.44	100	97.96	98.03	97.67	100
Sanilac CMH	100	100	100	100	100	100	100	100	100	100	100	100
St. Clair CMH	100	100	100	100	100	100	100	100	100	100	100	100
PIHP Totals	98.30 N=236	98.83 N=258	98.70 N=231	98.99 N=198	97.24 N=326	95.76 N=283	93.34 N=241	98.42 N=253	97.73 N=352	91.72 N=302	98.34 N=302	100 N=285

Indicator 2.b. The percentage of new adults with mental illness receiving a face-to-face assessment with a professional within 14 calendar days of a non-emergency request for service. **95% is the standard.**

	PIHP (Medicaid only)											
	1Q FY 15	2Q FY 15	3Q FY 15	4Q FY 15	1Q FY 16	2Q FY 16	3Q FY 16	4Q FY 16	1Q FY 17	2Q FY17	3Q FY 17	4Q FY 17
Genesee Health System	97.72	99.35	98.50	97.85	95.79	98.98	96.75	84.67 (116/137)	84.62 (88/104)	92.57 (137/148)	97.90	100
Lapeer CMH	98.63	100	100	100	100	100	100	100	100	100	100	100
Sanilac CMH	100	100	100	100	100	100	100	100	100	100	100	100
St. Clair CMH	100	100	100	100	100	100	100	100	100	99.25	100	100
PIHP Totals	98.45 N=709	99.59 N=745	99.06 N=742	98.63 N=659	98.05 N=410	99.55 N=448	98.75 N=400	95.01 N=421	95.45 N=352	97.09 N=412	99.18 N=485	100 N=484

Indicator 2.c. The percentage of new children with developmental disabilities receiving a face-to-face assessment with a professional within 14 calendar days of a non-emergency request for service. **95% is the standard.**

	PIHP (Medicaid only)											
	1Q FY 15	2Q FY 15	3Q FY 15	4Q FY 15	1Q FY 16	2Q FY 16	3Q FY 16	4Q FY 16	1Q FY 17	2Q FY17	3Q FY 17	4Q FY 17
Genesee Health System	97.14	88.23	100	100	100	100	100	100	100	88.88 (32/36)	100	100
Lapeer CMH	100	100	100	100	100	100	0 (0/3)	100	100	100	100	100
Sanilac CMH	100	100	100	100	100	100	100	100	100	100	100	100
St. Clair CMH	100	100	100	100	100	100	100	100	100	100	100	100
PIHP Totals	98.39 N=62	95 N=40	100 N=72	100 N=77	100 N=38	100 N=40	93.18 N=44	100 N=56	100 N=89	95.35 N=86	100 N=102	100 N=104

Indicator 2.d. The percentage of new adults with developmental disabilities receiving a face-to-face assessment with a professional within 14 calendar days of a non-emergency request for service. **95% is the standard.**

	PIHP (Medicaid only)											
	1Q FY 15	2Q FY 15	3Q FY 15	4Q FY 15	1Q FY 16	2Q FY 16	3Q FY 16	4Q FY 16	1Q FY 17	2Q FY17	3Q FY 17	4Q FY 17
Genesee Health System	95.23	100	100	100	95.00	100	97.37	95.00	100	93.75 (15/16)	100	100
Lapeer CMH	100	100	100	100	100	100	100	100	100	90.90 (10/11)	100	100
Sanilac CMH	100	100	100	100	100	100	100	100	100	100	100	100
St. Clair CMH	100	100	100	100	100	100	100	100	100	100	100	100
PIHP Totals	97.78 N=45	100 N=42	100 N=74	100 N=52	98.18 N=55	100 N=52	98.57 N=70	98.03 N=51	100 N=45	96.08 N=51	100 N=51	100 N=51

Indicator 2.e. The percentage of new persons with Substance Use Disorders receiving a face-to-face assessment with a professional within 14 calendar days of a non-emergency request for service. **95% is the standard.**

	PIHP (Medicaid only)											
	1Q FY 15	2Q FY 15	3Q FY 15	4Q FY 15	1Q FY 16	2Q FY 16	3Q FY 16	4Q FY 16	1Q FY 17	2Q FY17	3Q FY 17	4Q FY 17
Genesee SUD	95.03	95.41	98.47	96.21								
St. Clair SUD	97.63	99.29	99.36	97.60								
Region 10 PIHP SUD					98.70	98.47	98.07	95.16	96.44	97.25	93.93	95.70
PIHP Totals	96.13 N=698	96.88 N=738	98.83 N=770	96.80 N=688	98.70 N=926	98.47 N=979	98.07 N=934	95.16 N=951	96.44 N=899	97.25 N=945	93.94 N=940	95.70 N=868

Performance Indicator 3

Indicator 3 The percent of new persons starting any needed on-going service within 14 days of a non-emergent assessment with a professional.
95% within 14 days is the standard.

	PIHP (Medicaid only)											
	1Q FY 15	2Q FY 15	3Q FY 15	4Q FY 15	1Q FY 16	2Q FY 16	3Q FY 16	4Q FY 16	1Q FY 17	2Q FY17	3Q FY 17	4Q FY 17
Genesee Health System	98.64	97.84	98.00	97.19	97.55	98.53	97.17	98.30	97.62	99.58	100	100
Lapeer CMH	96.91	99.06	99.01	98.85	97.50	100	100	98.89	93.20 (96/103)	95.04	98.33	95.35
Sanilac CMH	100	100	100	100	100	97.56	100	97.95	100	100	100	98.18
St. Clair CMH	96.05	97.71	97.18	99.23	97.27	98.22	97.18	97.52	98.90	96.77	92.75 (179/193)	98.33
Genesee SUD	95.80	95.16	96.04	95.90								
St. Clair SUD	99.16	99.56	98.77	100								
Region 10 PIHP SUD					98.11	98.72	99.54	99.15	99.77	99.82	99.67	98.48
PIHP Totals	97.50 N=1159	97.51 N=1169	97.71 N=1180	98.29 N=1114	97.89 N=1617	98.66 N=1571	98.66 N=1642	98.70 N=1699	98.68 N=1663	99.00 N=1407	98.81 N=1509	98.83 N=1434

Indicator 3.a. The percent of new children with emotional disturbance starting any needed on-going service within 14 days of a non-emergent assessment with a professional. **95% within 14 days is the standard.**

	PIHP (Medicaid only)											
	1Q FY 15	2Q FY 15	3Q FY 15	4Q FY 15	1Q FY 16	2Q FY 16	3Q FY 16	4Q FY 16	1Q FY 17	2Q FY17	3Q FY 17	4Q FY 17
Genesee Health System	99.27	98.57	98.55	99.24	96.05	96.89	95.26	98.37	96.07	100	100	100
Lapeer CMH	88.88 (16/18)	94.74 (18/19)	100	100	100	100	100	100	85.71 (24/28)	100	100	96.55
Sanilac CMH	100	100	100	100	100	100	100	100	100	100	100	100
St. Clair CMH	92.98 (53/57)	93.62 (44/47)	93.94 (31/33)	96.67	96.15	93.75 (45/48)	100	100	98.18	98.18	95.83	100
PIHP Totals	96.85 N=222	97.3 N=225	98.10 N=210	98.88 N=179	96.43 N=308	96.69 N=302	96.56 N=320	98.78 N=246	95.73 N=328	99.63 N=272	99.31 N=288	99.60 N=250

Indicator 3.b. The percentage of new adults with mental illness starting any needed on-going service. **95% within 14 days is the standard.**

	PIHP (Medicaid only)											
	1Q FY 15	2Q FY 15	3Q FY 15	4Q FY 15	1Q FY 16	2Q FY 16	3Q FY 16	4Q FY 16	1Q FY 17	2Q FY17	3Q FY 17	4Q FY 17
Genesee Health System	99.05	97.91	96.43	100	98.94	100	99.37	98.92	100	99.00	100	100
Lapeer CMH	100	100	98.51	95.57	100	100	100	98.48	96.82	95.08	97.10	95.74
Sanilac CMH	100	100	100	100	100	96.30	100	96.55	100	100	100	97.30
St. Clair CMH	97.30	100	97.59	100	97.87	100	95.18	96.06	98.91	95.96	92.86 (104/112)	97.00
PIHP Totals	98.92 N=277	95.55 N=267	97.83 N=277	99.61 N=257	98.93 N=325	99.75 N=404	98.45 N=322	97.79 N=408	99.14 N=348	97.94 N=438	97.86 N=467	98.68 N=449

Indicator 3.c. The percentage of new children with developmental disabilities starting any needed on going service within 14 days of a non-emergent assessment with a professional. **95% within 14 days is the standard.**

	PIHP (Medicaid only)											
	1Q FY 15	2Q FY 15	3Q FY 15	4Q FY 15	1Q FY 16	2Q FY 16	3Q FY 16	4Q FY 16	1Q FY 17	2Q FY17	3Q FY 17	4Q FY 17
Genesee Health System	94.88 (37/39)	92.59 (25/27)	98.46	96.12	100	100	96.43	95.00	95.12	100	100	100
Lapeer CMH	75 (3/4)	100	100	100	100	100	100	100	100	100	100	100
Sanilac CMH	100	100	100	100	100	100	100	100	100	100	100	100
St. Clair CMH	100	100	100	100	100	100	96.55	100	100	95.23	85.19 (23/27)	100
PIHP Totals	94.91 N=59	95.55 N=45	98.46 N=65	97.40 N=77	100 N=41	100 N=34	96.97 N=66	98.00 N=50	97.14 N=70	98.57 N=70	95.65 N=92	100 N=103

Indicator 3.d. The percentage of new adults with developmental disabilities starting any needed on-going service within 14 days of a non-emergent assessment with a professional. **95% within 14 days is the standard.**

	PIHP (Medicaid only)											
	1Q FY 15	2Q FY 15	3Q FY 15	4Q FY 15	1Q FY 16	2Q FY 16	3Q FY 16	4Q FY 16	1Q FY 17	2Q FY17	3Q FY 17	4Q FY 17
Genesee Health System	100	100	100	93.75 (15/16)	100	100	100	95.24	100	100	100	100
Lapeer CMH	100	100	100	100	71.42 (5/7)	100	100	100	85.71 (6/7)	75.00 (6/8)	100	83.33 (5/6)
Sanilac CMH	100	100	100	100	100	100	100	100	100	100	100	100
St. Clair CMH	100	100	100	100	95.23	100	100	100	100	100	100	100
PIHP Totals	100 N=31	100 N=31	100 N=56	97.50 N=40	93.50 N=48	100 N=49	100 N=70	97.91 N=48	97.62 N=42	96.36 N=55	100 N=38	97.96 N=48

Indicator 3.e. The percentage of new persons with Substance Use Disorder starting any needed on-going service within 14 days of a non-emergent assessment with a professional. **95% within 14 days is the standard.**

	PIHP (Medicaid only)											
	1Q FY 15	2Q FY 15	3Q FY 15	4Q FY 15	1Q FY 16	2Q FY 16	3Q FY 16	4Q FY 16	1Q FY 17	2Q FY17	3Q FY 17	4Q FY 17
Genesee SUD	95.80	95.15	96.04	95.90								
St. Clair SUD	99.16	99.56	98.77	100								
Region 10 PIHP SUD					98.11	98.72	99.54	99.15	99.77	99.82	99.68	98.48
PIHP Totals	97.19 N=570	96.83 N=601	97.20 N=328	97.68 N=561	98.11 N=845	98.72 N=782	99.54 N=864	99.15 N=947	99.77 N=875	99.82 N=572	99.68 N=624	98.48 N=584

Performance Indicator 4

Indicator 4.a.1 The percentage of children discharged from a psychiatric inpatient unit who are seen for follow-up care within seven days. **95% is the standard.**

	PIHP (Medicaid only)											
	1Q FY 15	2Q FY 15	3Q FY 15	4Q FY 15	1Q FY 16	2Q FY 16	3Q FY 16	4Q FY 16	1Q FY 17	2Q FY17	3Q FY 17	4Q FY 17
Genesee Health System	100	100	100	100	100	96.67	96.55	97.77	100	100	100	97.87
Lapeer CMH	100	100	100	100	100	100	100	100	100	100	100	100
Sanilac CMH	100	100	100	100	100	100	100	100	100	100	100	100
St. Clair CMH	100	100	90.91 (10/11)	100	100	100	96	100	100	100	100	100
PIHP Totals	100 N=55	100 N=50	98.11 N=53	100 N=40	100 N=43	98.41 N=63	97.03 N=101	98.70 N=77	100 N=110	100 N=84	100 N=86	98.90 N=90

Indicator 4.a.2 The percentage of adults discharged from a psychiatric inpatient unit who are seen for follow-up care within seven days.
95% is the standard.

	PIHP (Medicaid only)											
	1Q FY 15	2Q FY 15	3Q FY 15	4Q FY 15	1Q FY 16	2Q FY 16	3Q FY 16	4Q FY 16	1Q FY 17	2Q FY17	3Q FY 17	4Q FY 17
Genesee Health System	100	98.30	97.75	100	100	96.05	95.45	95.53	95.88	98.26	98.06	97.04
Lapeer CMH	100	100	100	100	100	100	100	100	100	100	100	100
Sanilac CMH	93.75 (15/16)	100	100	100	93.33 (14/15)	100	100	100	100	100	100	100
St. Clair CMH	100	100	100	100	98.78	97.62	100	98.36	98.53	100	97.44	98.46
PIHP Totals	99.39 N=165	99.09 N=222	99.04 N=208	100 N=184	99.12 N=225	97.05 N=305	96.73 N=367	96.57 N=380	96.73 N=336	98.75 N=320	98.08 N=364	97.53 N=355

Indicator 4.b The percent of discharges from a substance use disorder detox unit who are seen for follow-up care within seven days.
95% is the standard.

	PIHP (Medicaid only)											
	1Q FY 15	2Q FY 15	3Q FY 15	4Q FY 15	1Q FY 16	2Q FY 16	3Q FY 16	4Q FY 16	1Q FY 17	2Q FY17	3Q FY 17	4Q FY 17
Genesee SUD	98.98	100	99.30	95.99								
St. Clair SUD	100	100	100	99.02								
Region 10 PIHP SUD					100	100	95.88	95.24	100	95.00	100	100
PIHP Totals	99.49 N=196	100 N=203	99.58 N=237	97.35 N=226	100 N=176	100 N=50	95.88 N=97	95.24 N=21	100 N=16	95.00 N=20	100 N=29	100 N=18

Performance Indicator 5

Indicator 5. The percentage of area Medicaid recipients having received PIHP Managed services.
This indicator is calculated by MDHHS.

	PIHP (Medicaid only)											
	1Q FY 15	2Q FY 15	3Q FY 15	4Q FY 15	1Q FY 16	2Q FY 16	3Q FY 16	4Q FY 16	1Q FY 17	2Q FY17	3Q FY 17	4Q FY 17
Total Medicaid Beneficiaries Served	9,342	10,609	10,900	10,856	10,660	10,814	11,057	10,892	11,025	11,089	11,203	14,357
Number of Area Medicaid Recipients	138,917	136,553	137,544	138,729	144,630	146,848	146,457	146,300	153,728	147,147	147,280	149,804
PIHP Totals	6.72%	7.77%	7.92%	7.83%	7.37%	7.36%	7.55%	7.44%	7.17%	7.54%	7.61%	9.58%

Performance Indicator 6

Indicator 6. The Percent of Habilitation Supports Waiver (HSW) Enrollees in the quarter who received at least one HSW Service each month other than Supports Coordination. **This indicator is calculated by MDHHS.**

	PIHP (Medicaid only)											
	1Q FY 15	2Q FY 15	3Q FY 15	4Q FY 15	1Q FY 16	2Q FY 16	3Q FY 16	4Q FY 16	1Q FY 17	2Q FY17	3Q FY 17	4Q FY 17
Number of HSW Enrollees Receiving at Least One HSW Service Other Than Supports Coordination	665	648	649	642	654	645	644	641	653	640	641	625
Total Number of HSW Enrollees	675	656	657	657	657	657	645	644	662	656	653	636
PIHP Totals	98.52	98.78	98.78	97.72	99.54	98.17	99.84	99.43	98.64	97.56	98.16	98.27

Performance Indicator 8

Indicator 8.a. The percent of adults with mental illness served by the CMHSPs and PIHPs that are employed competitively. This represents the total for FY17. (BH TEDS data)

Population	Total # of Enrollees	# of Enrollees who are competitively employed	Competitive employment rate
Genesee Health System	5783	486	8.40%
Lapeer	833	131	15.73%
Sanilac	494	85	17.21%
St. Clair	1792	263	14.68%
PIHP Totals	8902	965	10.84%

Indicator 8.b. The percent of adults with developmental disabilities served by the CMHSPs and PIHPs that are employed competitively. This represents the total for FY17. (BH TEDS data)

Population	Total # of Enrollees	# of Enrollees who are competitively employed	Competitive employment rate
Genesee Health System	742	23	3.10%
Lapeer	230	13	5.65%
Sanilac	116	5	4.31%
St. Clair	444	51	11.49%
PIHP Totals	1532	92	6.01%

Indicator 8.c. The percent of adults dually diagnosed with mental illness/developmental disabilities served by the CMHSPs and PIHPs that are employed competitively. This represents the total for FY17. (BH TEDS data)

Population	Total # of Enrollees	# of Enrollees who are competitively employed	Competitive employment rate
Genesee Health System	514	20	3.89%
Lapeer	85	4	4.71%
Sanilac	118	9	7.63%
St. Clair	303	28	9.24%
PIHP Totals	1020	61	5.98%

Performance Indicator 9

Indicator 9.a. The percent of adults with mental illness served by the CMHSPs and PIHPs who earned minimum wage or more from any (competitive) employment activities. This represents the total for FY17. (BH TEDS data)

Population	Total # of Enrollees	# of Enrollees who earned minimum wage or more	Competitive employment rate
Genesee Health System	486	364	79.90%
Lapeer	131	109	83.21%
Sanilac	85	73	85.88%
St. Clair	263	218	82.89%
PIHP Totals	965	764	79.17%

Indicator 9.b. The percent of adults with developmental disabilities, served by the CMHSPs and PIHPs who earned minimum wage or more from any (competitive) employment activities. This represents the total for FY17. (BH TEDS data)

Population	Total # of Enrollees	# of Enrollees who earned minimum wage or more	Competitive employment rate
Genesee Health System	23	18	78.26%
Lapeer	13	10	76.92%
Sanilac	5	4	80.00%
St. Clair	51	33	64.71%
PIHP Totals	92	65	70.65%

Indicator 9.c. The percent of adults dually diagnosed with mental illness/developmental disabilities served by the CMHSPs and PIHPs who earned minimum wage or more from any (competitive) employment activities. This represents the total for FY17. (BH TEDS data)

Population	Total # of Enrollees	# of Enrollees who earned minimum wage or more	Competitive employment rate
Genesee Health System	20	18	90.00%
Lapeer	4	4	100.00%
Sanilac	9	6	66.67%
St. Clair	28	17	60.71%
PIHP Totals	61	45	73.77%

Performance Indicator 10

Indicator 10.a The percentage of children readmitted to an inpatient psychiatric unit within 30 calendar days of discharge from a psychiatric inpatient unit. *15% or less within 30 days is the standard.*

	PIHP (Medicaid only)											
	1Q FY 15	2Q FY 15	3Q FY 15	4Q FY 15	1Q FY 16	2Q FY 16	3Q FY 16	4Q FY 16	1Q FY 17	2Q FY17	3Q FY 17	4Q FY 17
Genesee Health System	1.75	0	3.28	12.90	10.77	5.88	14.93	11.43	8.43	9.59	7.59	12.68
Lapeer CMH	0	14.29	0	25.00 (1/4)	0	20.00 (2/10)	15.38 (2/13)	0	0	25.00 (2/8)	0	25.00 (4/16)
Sanilac CMH	0	0	20.00 (1/5)	0	0	0	0	12.50	21.43 (3/14)	0	14.28	33.33 (4/12)
St. Clair CMH	15.79 (3/19)	17.39 (4/23)	8.33	16.67 (3/18)	10.53	5.00	14.29	26.08 (6/23)	6.25	11.11	4.35	8.33
PIHP Totals	4.76 N=84	6.09 N=82	4.65 N=86	13.33 N=90	9.28 N=97	6.93 N=101	13.79 N=116	14.02 N=107	8.82 N=136	10.34 N=116	7.02 N=114	15.45 N=19

Indicator 10.b The percentage of adults readmitted to inpatient psychiatric units within 30 calendar days of discharge from a psychiatric inpatient unit.
15% or less within 30 days is the standard.

	PIHP (Medicaid only)											
	1Q FY 15	2Q FY 15	3Q FY 15	4Q FY 15	1Q FY 16	2Q FY 16	3Q FY 16	4Q FY 16	1Q FY 17	2Q FY17	3Q FY 17	4Q FY 17
Genesee Health System	9.42	9.09	12.03	4.98	14.53	13.94	14.33	12.34	10.91	13.76	12.00	12.25
Lapeer CMH	8.69	17.95 (7/39)	3.03	8.57	3.23	17.07 (7/41)	3.45	11.76	4.16	8.82	0	15.38 (4/26)
Sanilac CMH	19.05 (4/21)	11.11	4.35	16.67 (4/24)	0	15	10	25.00 (7/28)	11.76	11.11	0	0
St. Clair CMH	14.44	4	24.18 (22/91)	25.77 (25/97)	20.18 (22/109)	18.97 (22/116)	10.39	14.10	19.32 (17/88)	11.63	10.48	13.79
PIHP Totals	11.20 N=357	9.09 N=385	13.66 N=388	10.06 N=477	14.48 N=504	15.18 N=593	12.82 N=468	13.21 N=545	12.05 N=523	13.00 N=536	10.84 N=581	12.26 N=71

Performance Indicator 11

Indicator 11. The annual number of substantiated recipient rights complaints in the categories of Abuse I and II, and Neglect I and II per 1,000 persons served by CMHSPs and by PIHPs.

RR Complaints	Abuse I		Abuse II		Neglect I		Neglect II	
	# of Complaints from Medicaid Beneficiaries	# of Complaints Substantiated by ORR	# of Complaints from Medicaid Beneficiaries	# of Complaints Substantiated by ORR	# of Complaints from Medicaid Beneficiaries	# of Complaints Substantiated by ORR	# of Complaints from Medicaid Beneficiaries	# of Complaints Substantiated by ORR
Genesee Health System	4	0	79	7	7	3	29	22
Lapeer CMH	0	0	5	2	0	0	0	0
Sanilac CMH	0	0	4	2	1	1	1	1
St. Clair CMH	0	0	11	3	3	0	2	2
PIHP Totals	4	0	99	14	11	4	32	25

Performance Indicator 13

Indicator 13. The percent of adults with developmental disabilities served, who live in a private residence alone, with spouse, or non-relative(s). This represents the total for FY17. (BH TEDS data)

Population	Total # of Enrollees	# of Enrollees with a developmental disability who live in a private residence alone, with spouse or non-relatives	Private residence rate
Genesee Health System	742	50	6.74%
Lapeer CMH	230	47	20.43%
Sanilac CMH	116	24	20.69%
St. Clair CMH	444	171	38.51%
PIHP Totals	1532	292	19.06%

Performance Indicator 14

Indicator 14. The percent of adults with serious mental illness served, who live in a private residence alone, with spouse, or non-relative(s). This represents the total for FY17. (BH TEDS data)

Population	Total # of Enrollees	# of Enrollees with serious mental illness who live alone, with spouse or non-relative	Private residence rate
Genesee Health System	5783	2655	45.91%
Lapeer CMH	833	571	68.55%
Sanilac CMH	494	360	72.87%
St. Clair CMH	1792	1148	64.06%
PIHP Totals	8902	4734	53.18%

NARRATIVE OF RESULTS

The following PIHP Performance Indicators for Medicaid customers have performance standards that have been set by the Michigan Department of Health and Human Services.

At the PIHP level, all performance standards were met except for indicator #10a. The Indicator states, *“The percentage of readmissions of children during the quarter to an inpatient psychiatric unit within 30 days of discharge.”* **The standard is 15% or less.** The PIHP scored 15.45% for this indicator.

When a CMH reports that the MDHHS standard for a performance indicator has not been achieved during a quarter, a root cause analysis and plan of improvement is submitted to Region 10 PIHP along with the respective CMH data. The analysis is reviewed, and the plan of improvement is monitored over time by the PIHP along with the trend of scores on all the performance indicators.

Performance Indicator #3 states, *“The percent of new persons starting any needed on-going service within 14 days of a non-emergent assessment with a professional.”* **95% within 14 days is the standard.** Lapeer CMH met the set standard overall, however did not meet the set standard for the breakout of adults with developmental disabilities with 83.33%.

Performance Indicator #10 states, *“The percentage of persons readmitted to an inpatient psychiatric unit within 30 calendar days of discharge from a psychiatric inpatient unit.”* **15% or less within 30 days is the standard.** Lapeer CMH did not meet the set standard for children with 25.00%, nor adults with 15.38%. Sanilac CMH did not meet the set standard for children with 33.33%.

All the CMHs have submitted root cause analyses and corrective action plans for any indicators not meeting set performance standards. Additional oversight and follow up regarding corrective action items will occur through the contract monitoring process.