NORTH CAROLINA
NC-STeP
STATEWIDE TELEPSYCHIATRY PROGRAM

Third Quarter Progress Updates

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CENTER FOR TELEPSYCHIATRY

- 30 hospitals currently live
- 26 additional hospitals scheduled to go live dates between July and October 2014
- Contracts with 4 additional Provider sites executed
  - Novant
  - Mission
  - Cone Health
  - Monarch

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Program Timeline Required by the Legislative Plan
January – March 2014

| Timeline	Result
Contracts with the remaining 9 hospitals on the AHF wait list are executed.	**Contracts executed with 10 hospitals - Novant (4) and Cone Health (6)**
6 hospitals from the wait list "Go Live" with telepsychiatry (total in network = 24).	**4 went live (Nash, Lenoir, Cape Fear and Cape Fear Valley Bladen – (22 in network)**
14 new hospitals secured to participate in the network (i.e. contracts, provider credentialing initiated, equipment ordered).	**14 new referral sites secured.**
ECU submits first quarterly performance report to ORHCC.	**Completed**
Contracts with 3 to 5 new providers secured.	**6 new hospital contracts under negotiations, 1 new Provider contract executed (Cape Fear)**
Apply for Duke Endowment funding.	**Application submitted**
Year 2 budget prepared.	**Completed**

Program Timeline Required by the Legislative Plan
April – June 2014

Timeline	Result
Seven hospitals "Go Live" (total in network = 31).	**8 went live – 30 in network (2 delayed to second week of August)**
14 additional referral sites recruited to participate in the network (i.e. contracts, provider credentialing initiated, equipment ordered).	**16 new referral sites recruited to participate.**
ECU submits quarterly performance report and financial statements to DHHS Office of Rural Health and Community Care.	**Completed**
Contracts with three to five new referral sites secured.	**19 hospital contracts under negotiations, and Contracts with 4 additional Provider sites executed (Novant, Mission, Cone Health, and Monarch)**
Duke Endowment funds awarded (to be determined).	**Grant awarded**
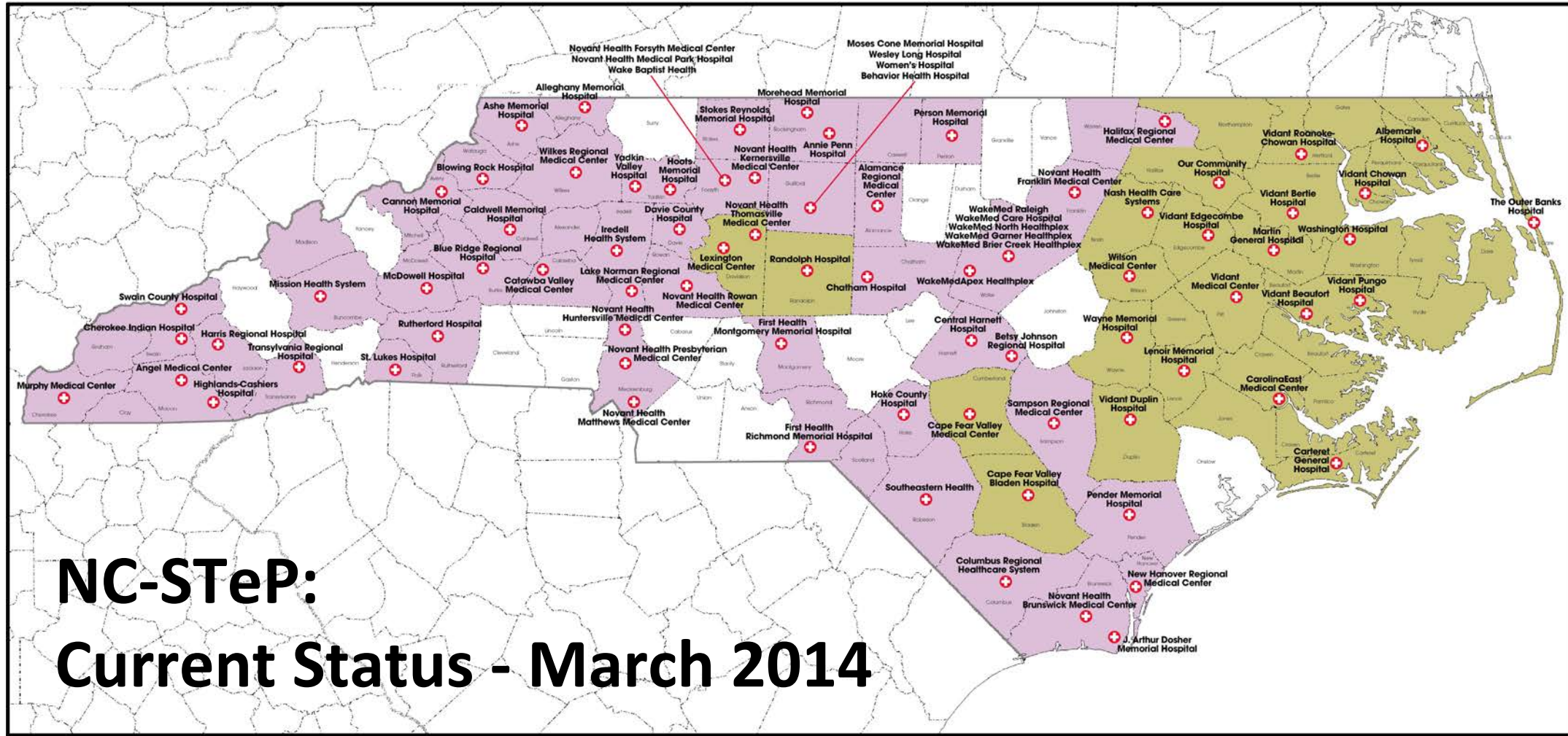
NC-STeP:
Current Status - March 2014

NC-STeP:
Current Status - July 2014
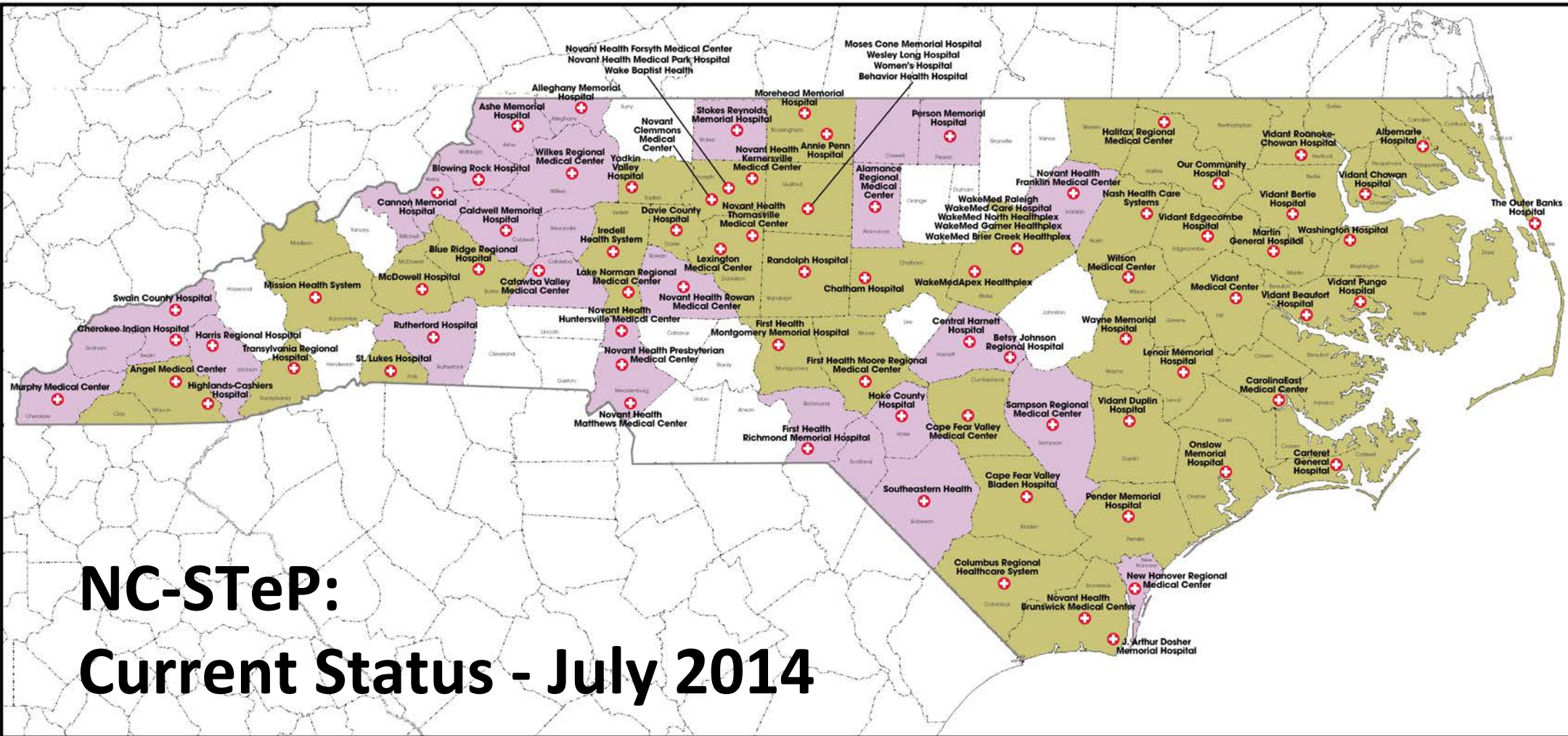
NC-STeP: Interim Progress Report as of June 2014

EVALUATION CRITERIA	BASELINE VALUES/MEASURES AS REPORTED ON ORIGINAL GRANT APPLICATION	TARGET TO BE REACHED BY 06/30/2014	VALUES/MEASURES REACHED AS OF 6/30/14
1. To increase the number of participating consultant providers from 12 to 20 (and consulting sites)	12	20	**21** **Novant (5), Cone Health (6), CCNC (11), and Cape Fear Valley (4)**
2. To increase the number of Telepsychiatry referring sites by 13, from 15 to 27	15	27	**30** **21 reporting; 9 additional hospitals went live last during the last two weeks of June, will not submit first report until August**
3. To increase the number of telepsychiatric assessments conducted	450/month	3,600	**1992 in Q3** **(sum of total encounters from CCNC)** **4374 Cumulative (546/month)**
4. Provide evaluation and care to Involuntary Committed patients	147/month	1,176	**729 in Q3** **1465 Cumulative** **(183/month)**
5. To increase the number of overturned involuntary	42/month	336	**202 in Q3** **374 Cumulative** **(47/month)**
6. To reduce the Length of Stay for all patients with a primary mental health diagnosis across	26 hours	25 hours	**24.6 hrs. in Q3** **(Median)**

- Initiated a data collection and management system designed to gather program data from:

  - hospitals participating in the NC-STeP

  - psychiatric services providers

- Each participating referral site submits monthly patient encounter data electronically to the Center.

  - includes unique patient identification number, arrival date and time information, discharge date and time information, patient discharge disposition, and IVC status.

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- The Center aggregates the referral site data for each quarterly reporting period and conducts analysis to determine the metrics below. Analysis is conducted for each individual site and for the program overall.
    - Total number of assessments
    - Length of stay
    - Length of stay by discharge disposition
    - Number of IVCs
    - IVC turnover rate
    - Percent of patients by discharge disposition
- The Center reports this data quarterly and develops ongoing procedures (graphs, charts, progress reports) so that these metrics can be monitored and compared over time to assess the program outcomes and monitor program quality.
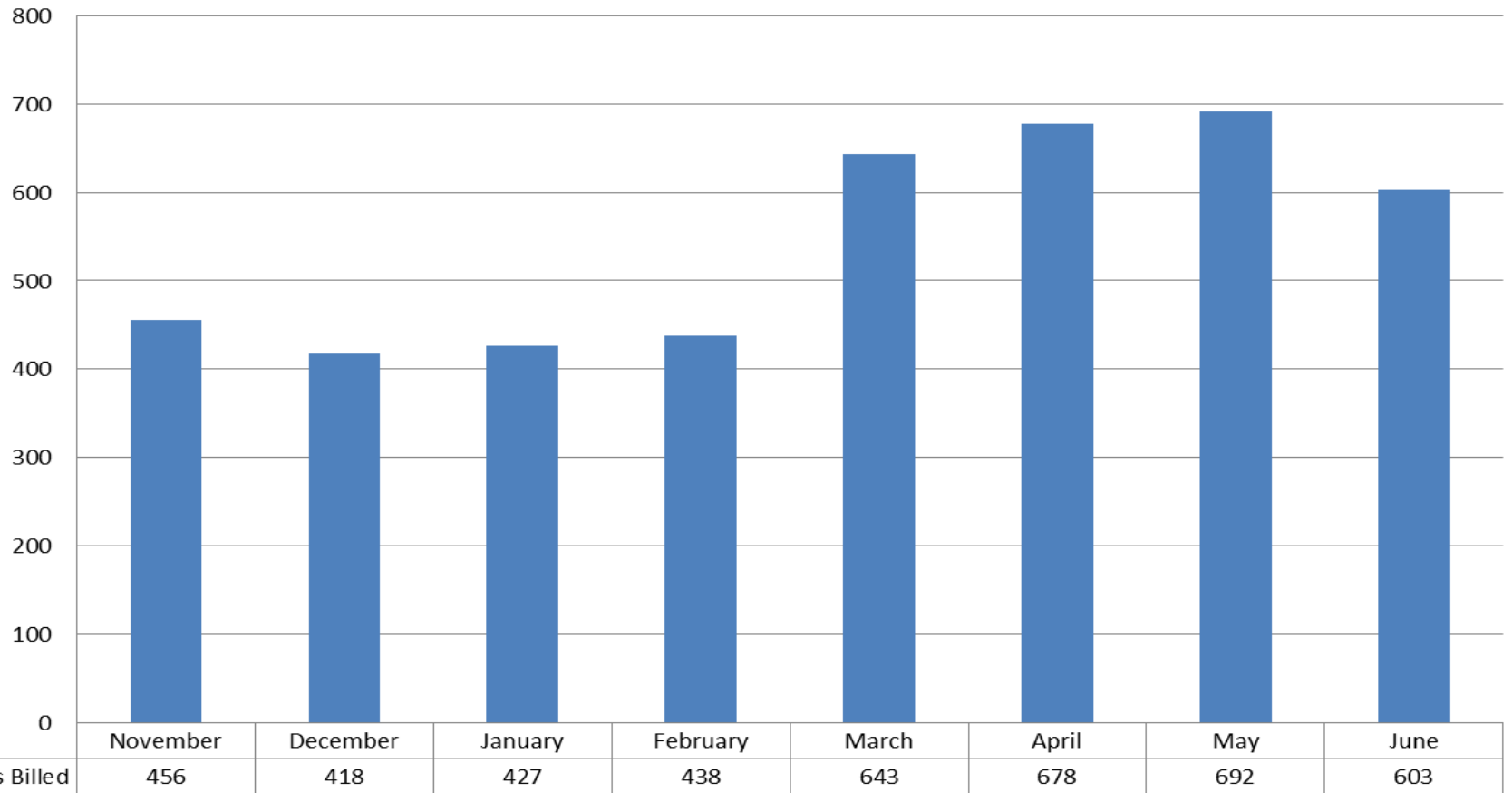
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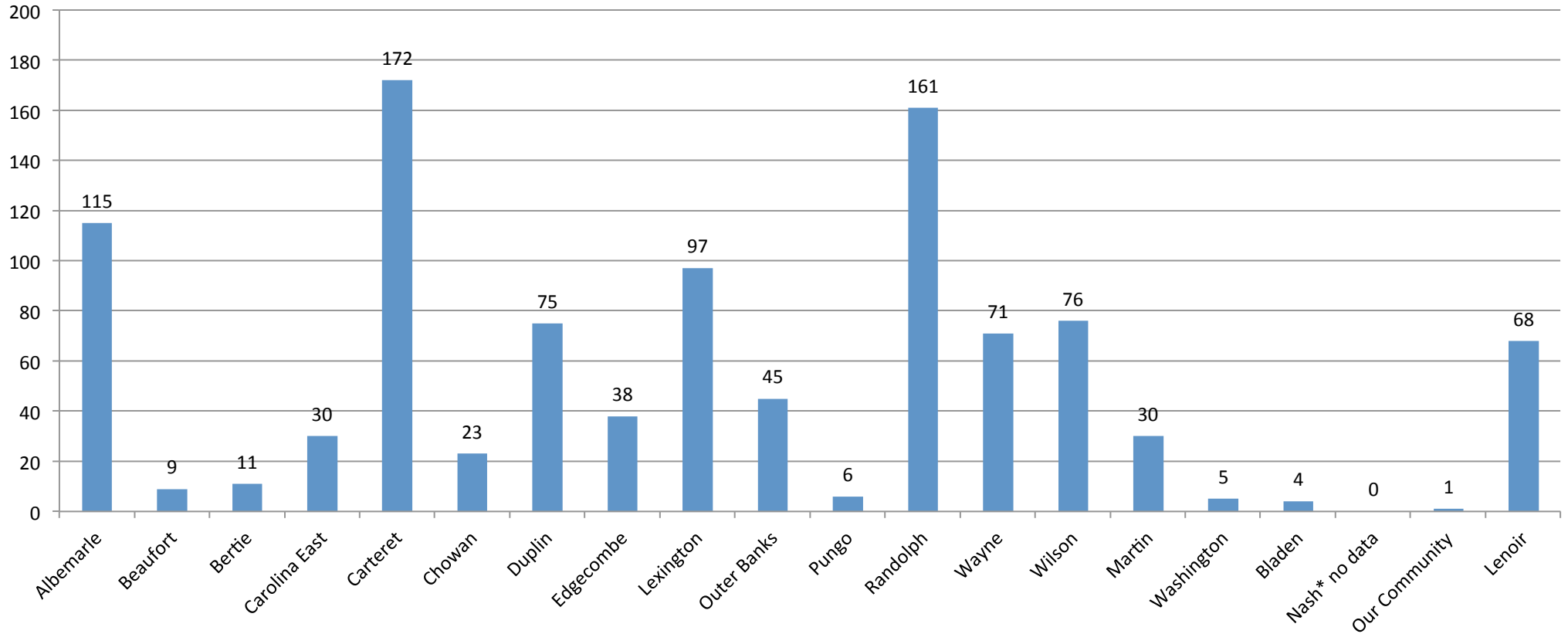STATEWIDE TELEPSYCHIATRY PROGRAM

				# of Initial Psychiatric Assessments Conducted (April-June 2014)	Length of Stay for ED Telepsych Patients	Length of Stay by discharge disposition in hours for ED patients					IVCs for ED patients	
Number	Referring Sites	Consultant Site	NC Step started		LOS for ED assessments conducted Q3	LOS patients disposition Home	LOS patients disposition Transfer	LOS patients disposition Admit	LOS patients disposition AMA	LOS patients disposition Other	IVC in place	IVC's overturned
1	Albemarle Health: A	CCNC	Nov-13	146	36.8 (115)	37.7	37.7	4.9			93	28
2	Vidant Beaufort	CCNC	Nov-13	26	43.1 (9)	23.3	54.4			15.2	5	2
3	Vidant Bertie	CCNC	Nov-13	13	24.4 (11)	4.1	26.4				6	3
4	CarolinaEast	CCNC	Nov-13	36	46.2 (30)	46.4	46				30	7
5	Carteret	CCNC	Nov-13	174	37.8 (172)	44	38.6	5.7		32.3	105	49
6	Vidant Chowan	CCNC	Nov-13	29	32.8 (23)	20.4	42.4				9	4
7	Vidant Duplin	CCNC	Nov-13	94	24.7 (75)	18.7	34			24.6	22	15
8	Vidant Edgecombe	CCNC	Nov-13	60	35.6 (38)	25	40.3			32.5	20	5
9	Lexington Medical C	CCNC	Nov-13	35	37 (97)	16.8	32.5			89.2	69	1
10	Martin General Hosp	CCNC	Dec-13	33	24.5* (30)	15.3*	35.8*	6.3*	4.3*		19*	6*
11	Our Community Hos	CCNC	Nov-13	3	20.3 (1)			20.3				
12	Outer Banks Hospita	CCNC	Nov-13	73	30.5 (45)	36.4	28.6				24	5
13	Vidant Pungo	CCNC	Nov-13	6	31.2 (6)	32.6	28.2				5	4
14	Randolph Hospital	CCNC	Nov-13	247*	38.8* (161)	48.2*	33.5*				126	28*
16	Wayne Memorial Ho	CCNC	Jan-14	84	48.2 (71)	54.3	47.2				56	12
17	Wilson Medical Cen	CCNC	Nov-13	94	data on LOS not available at this time						73	22
18	Nash General Hospit	CCNC	Mar-14	43	data for this hospital not submitted yet						submitted	
19	Lenoir Memorial Hos	CCNC	Mar-14	79	53.8 (68)	74.5	38.6	307.2	14.8		60	8
20	Washington	CCNC	Jun-14	5	41.42 (5)	67	24.3				4	1
21	Bladen		Jun-14		48.7 (4)	52.3	45				3	2
22	Cape Fear		Jun-14									
	Summary			1280	Mean 37.8 Median 24.6 (961)	38.8 (314)	37.1 (589)	31.5 (24)	11.3 (3)	48.5 (30)	729	202 (28%)

NC Step Quarterly Report - for Quarter 3 - April - June 2014 (combined)

NC STeP Number of Total Assessments Billed by Month (November 2013 - June 2014)

	November	December	January	February	March	April	May	June
Number of Total Assessments Billed	456	418	427	438	643	678	692	603

Total Number of ED Telepsychiatry Patients
by hospital - for April - June 2014

Hospital	Patients
Albemarle	115
Beaufort	9
Bertie	11
Carolina East	30
Carteret	172
Chowan	23
Duplin	75
Edgecombe	38
Lexington	97
Outer Banks	45
Pungo	6
Randolph	161
Wayne	71
Wilson	76
Martin	30
Washington	5
Bladen	4
Nash* no data	0
Our Community	1
Lenoir	68

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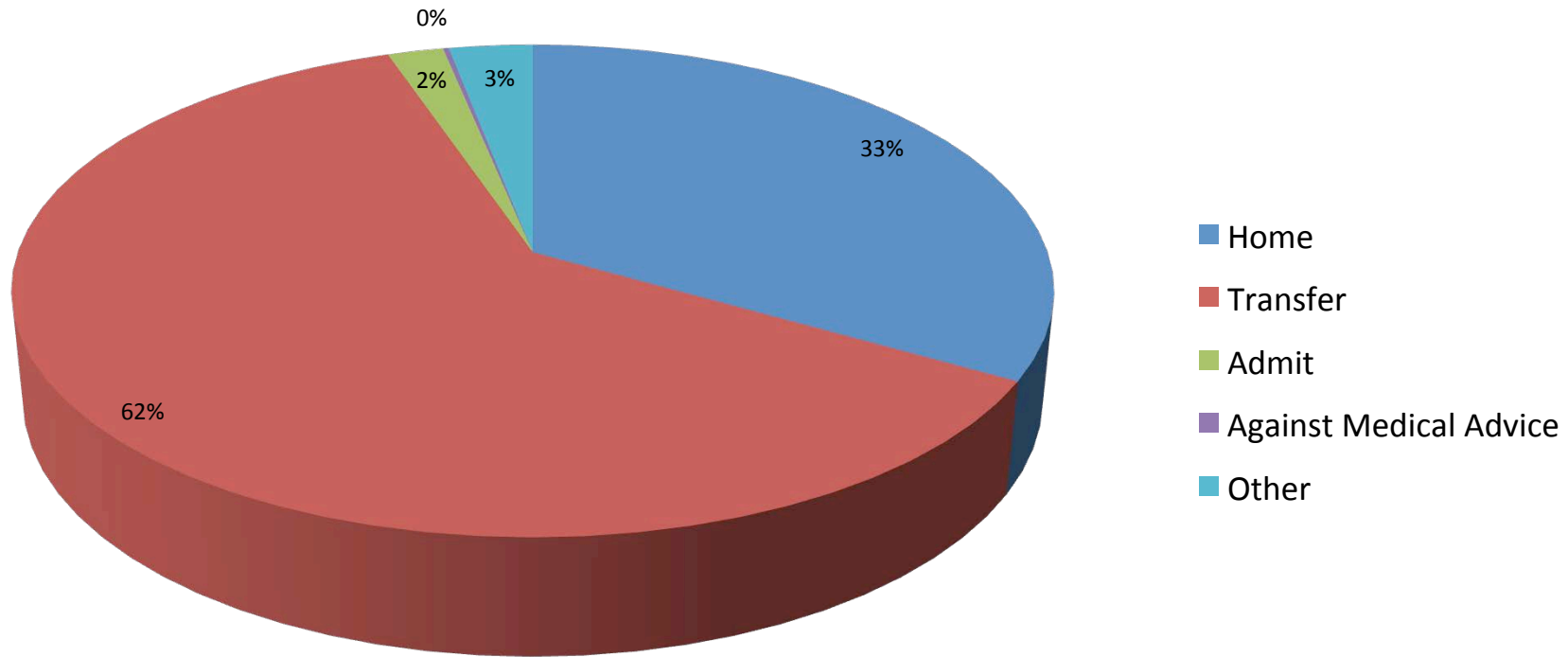STATEWIDE TELEPSYCHIATRY PROGRAM

NC STeP Number of Total Assessments by Hospital
Quarter 1 (11/13-11/13), Quarter 2 (1/14-3/14), Quarter 3 (4/14-6/14)
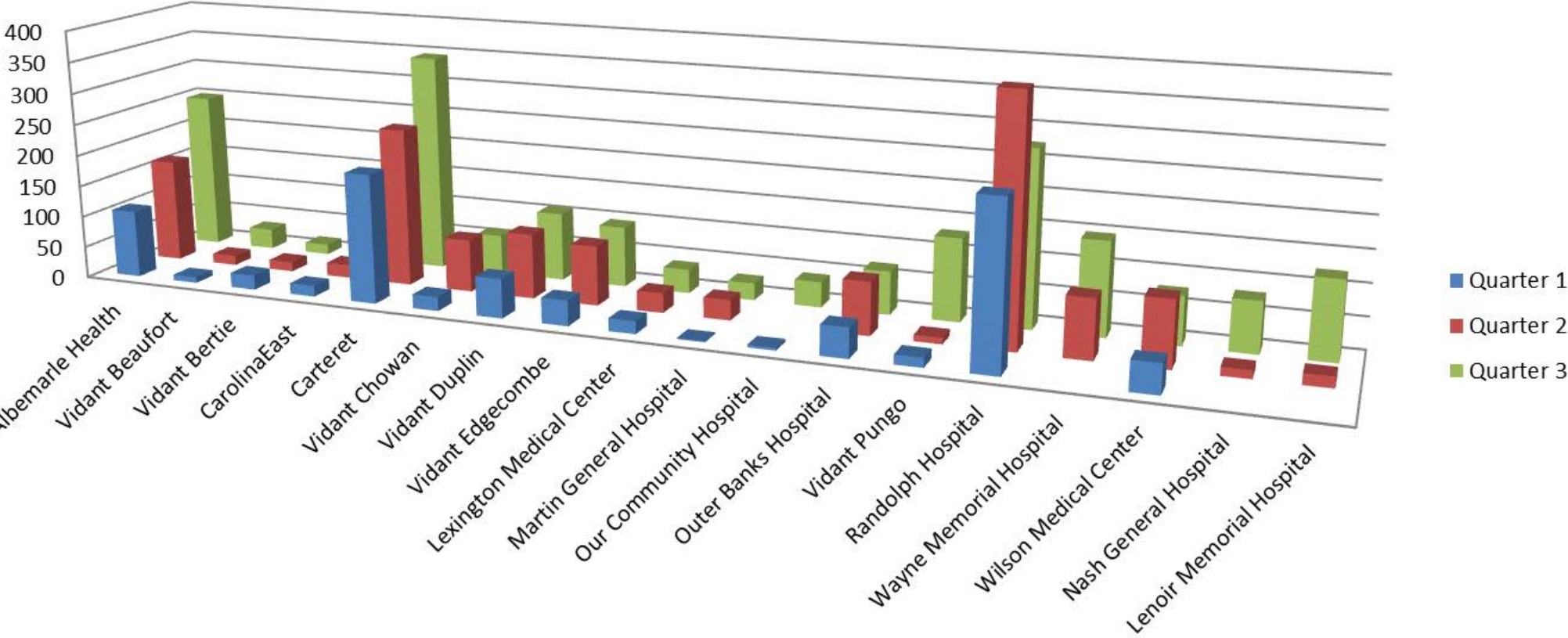
Percent of ED Telepsychiatry Patients by Discharge Disposition April - June 2014

- 0%
- 2%
- 3%
- 33%
- 62%

Legend:
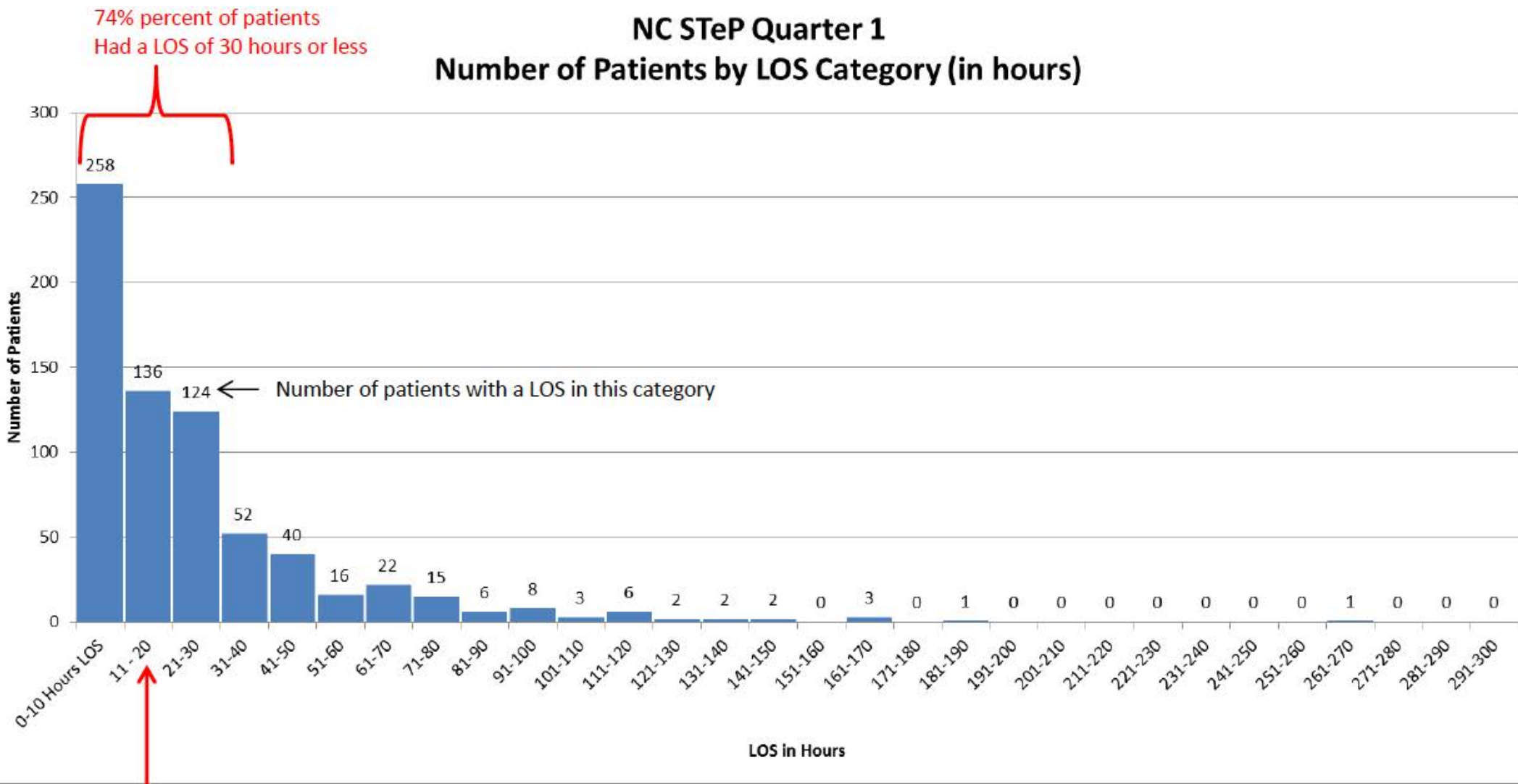- Home
- Transfer
- Admit
- Against Medical Advice
- Other

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NC-STeP:
Length of Stay

Quarter	Median LOS (in hours)	Mean LOS (in hours)
Quarter 1	16.5	25.6
Quarter 2	23.3	33.08
Quarter 3	24.6	37.8

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**NC STeP Quarter 1
Number of Patients by LOS Category (in hours)**

74% percent of patients
Had a LOS of 30 hours or less

136

124 ← Number of patients with a LOS in this category

Median Length of Stay for Quarter 1 = 16.5 Hours

Number of Patients

LOS in Hours

258, 136, 124, 52, 40, 16, 22, 15, 6, 8, 3, 6, 2, 2, 2, 0, 3, 0, 1, 0, 0, 0, 0, 0, 0, 0, 1, 0, 0, 0

0-10 Hours LOS, 11-20, 21-30, 31-40, 41-50, 51-60, 61-70, 71-80, 81-90, 91-100, 101-110, 111-120, 121-130, 131-140, 141-150, 151-160, 161-170, 171-180, 181-190, 191-200, 201-210, 211-220, 221-230, 231-240, 241-250, 251-260, 261-270, 271-280, 281-290, 291-300

NC STeP Quarter 2
Number of Patients by LOS Category (in hours)

63% percent of patients
Had a LOS of 30 hours or less

Number of patients with a LOS in this category
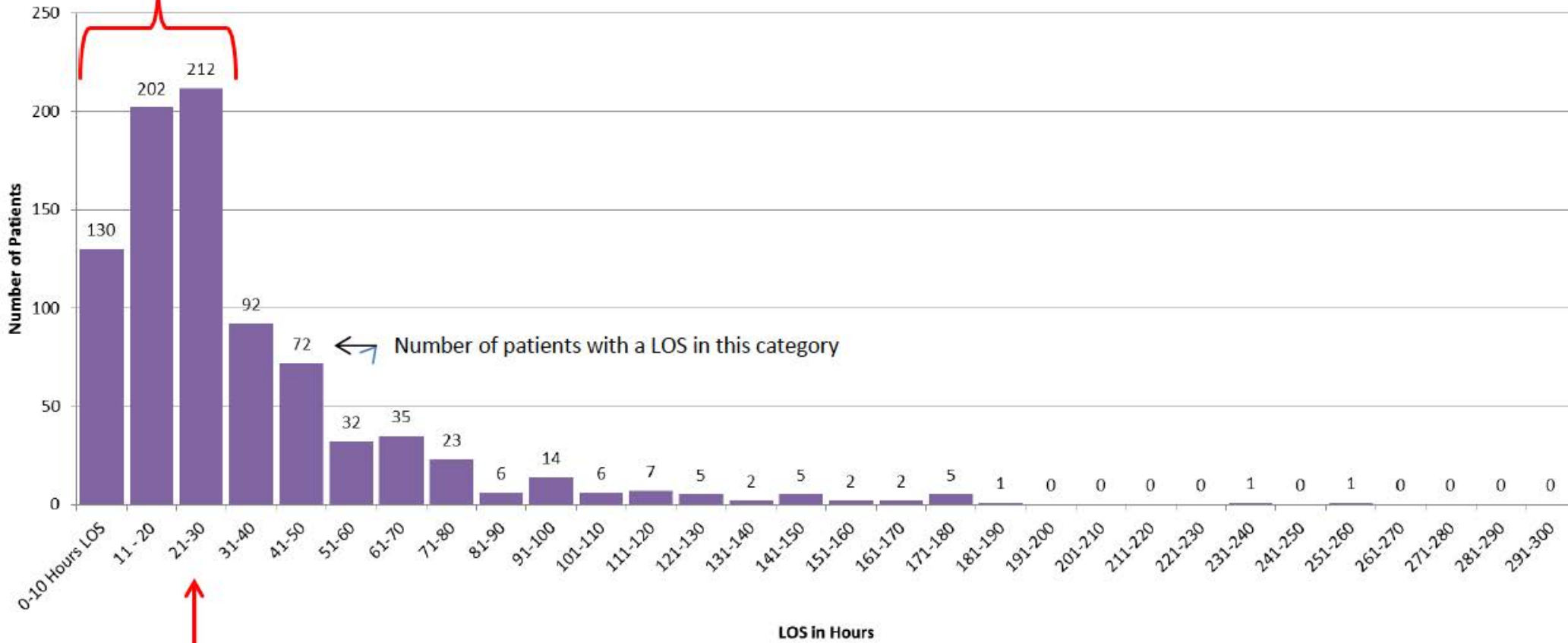
Median Length of Stay for Quarter 2 = 23.3 Hours

Number of Patients (y-axis)

LOS in Hours (x-axis)

Values by category:
- 0-10 Hours LOS: 130
- 11-20: 202
- 21-30: 212
- 31-40: 92
- 41-50: 72
- 51-60: 32
- 61-70: 35
- 71-80: 23
- 81-90: 6
- 91-100: 14
- 101-110: 6
- 111-120: 7
- 121-130: 5
- 131-140: 2
- 141-150: 5
- 151-160: 2
- 161-170: 2
- 171-180: 5
- 181-190: 1
- 191-200: 0
- 201-210: 0
- 211-220: 0
- 221-230: 0
- 231-240: 1
- 241-250: 0
- 251-260: 1
- 261-270: 0
- 271-280: 0
- 281-290: 0
- 291-300: 0

61% percent of patients Had a LOS of 30 hours or less

**NC STeP Quarter 3
Number of Patients by LOS Category (in hours)**

Number of Patients

250

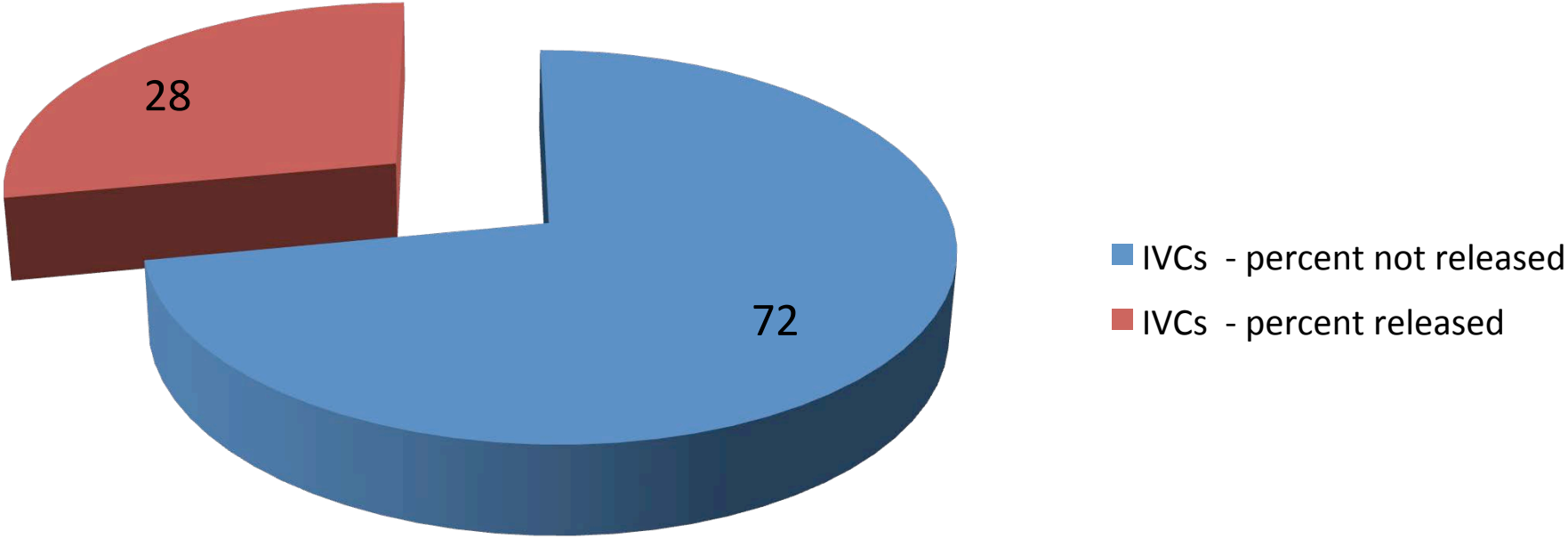236

204

200

150

150

100

89

80 ← Number of patients with a LOS in this category

50

47
37
33

11 17
4   11   5   8   2   3   6   1   2   4   1   0   0   2   0   0   0   2   0   0

0-10 Hours LOS | 11 - 20 | 21-30 | 31-40 | 41-50 | 51-60 | 61-70 | 71-80 | 81-90 | 91-100 | 101-110 | 111-120 | 121-130 | 131-140 | 141-150 | 151-160 | 161-170 | 171-180 | 181-190 | 191-200 | 201-210 | 211-220 | 221-230 | 231-240 | 241-250 | 251-260 | 261-270 | 271-280 | 281-290 | 291-300
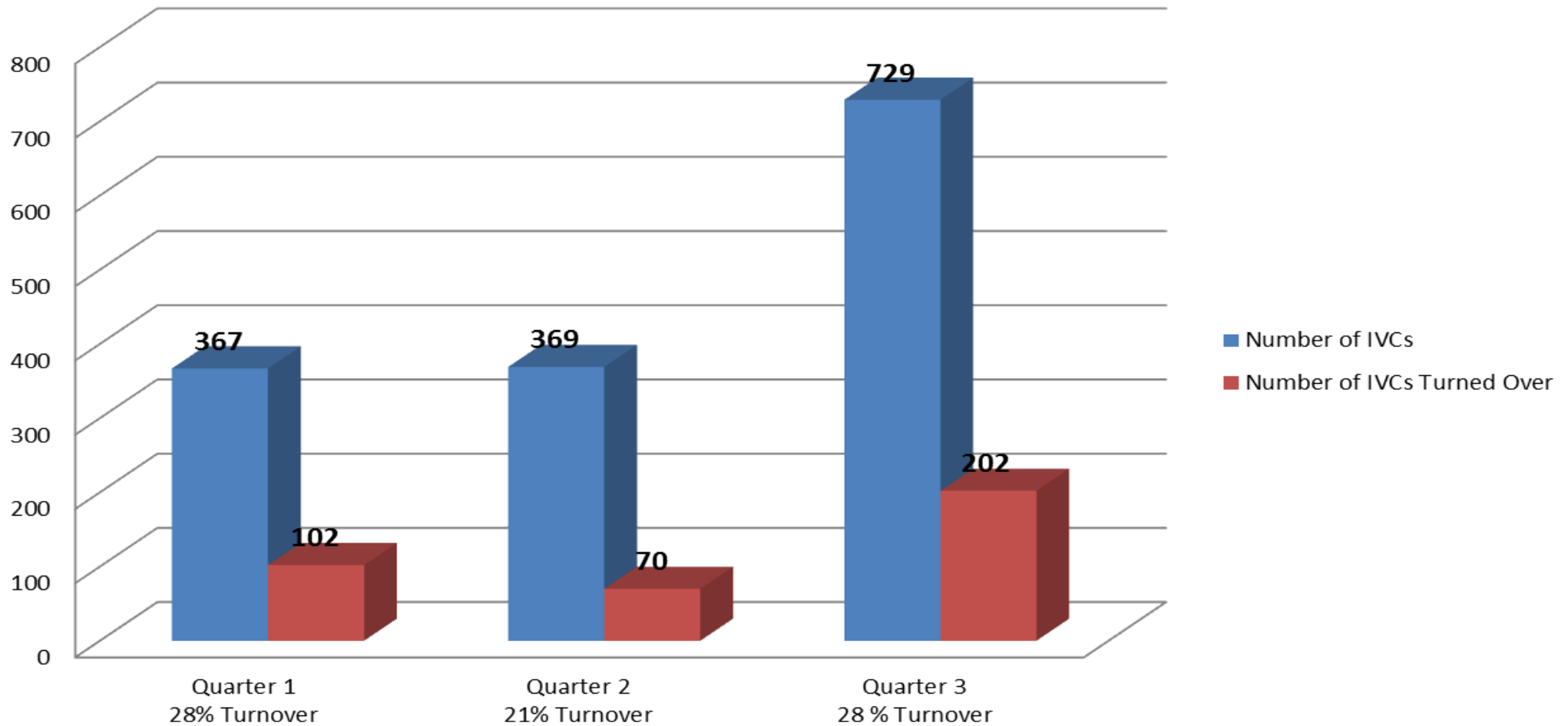
LOS in Hours
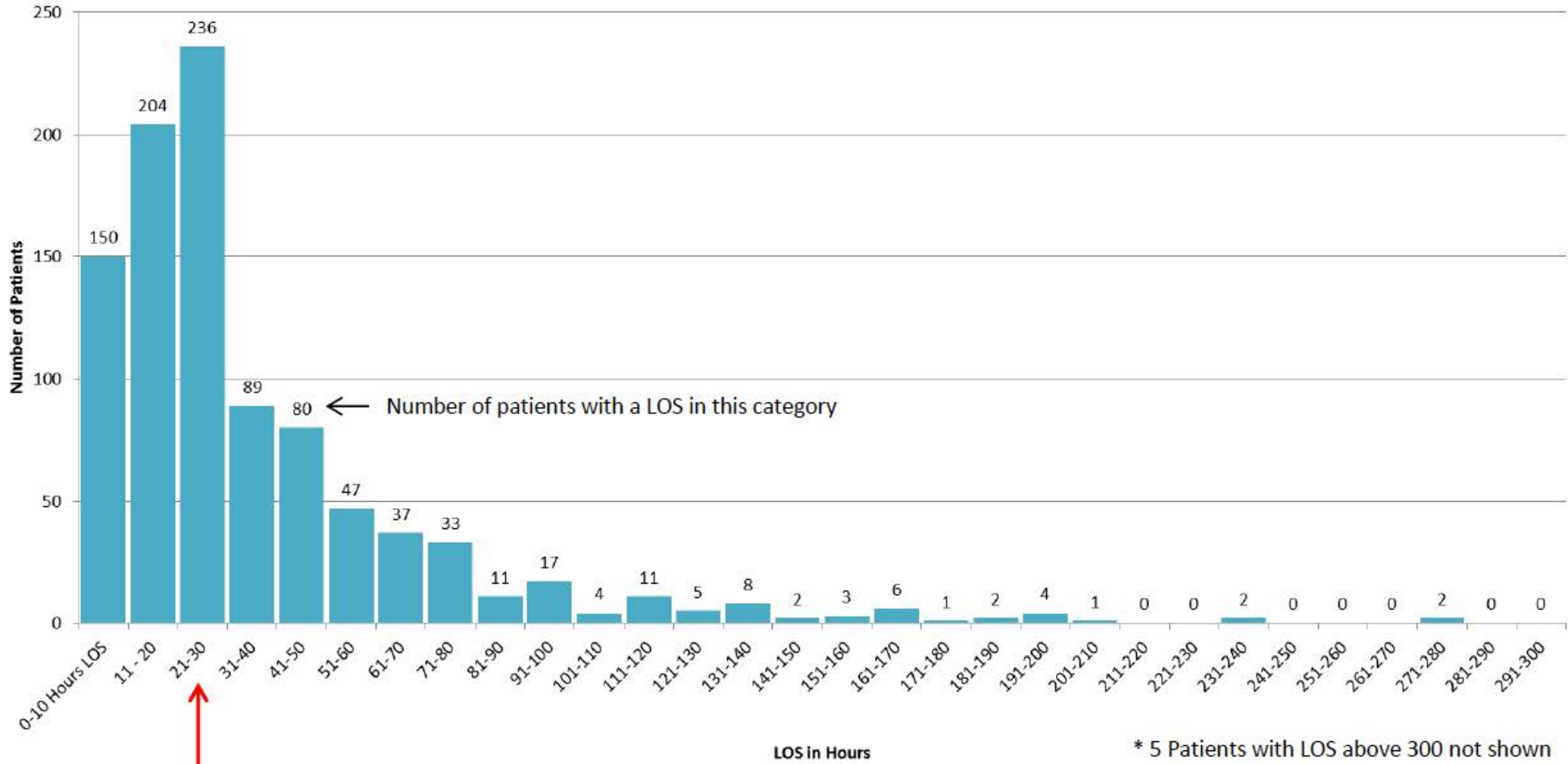
* 5 Patients with LOS above 300 not shown

Median Length of Stay for Quarter 3 = 24.6 Hours

IVCs - By Release Status - April - June 2014
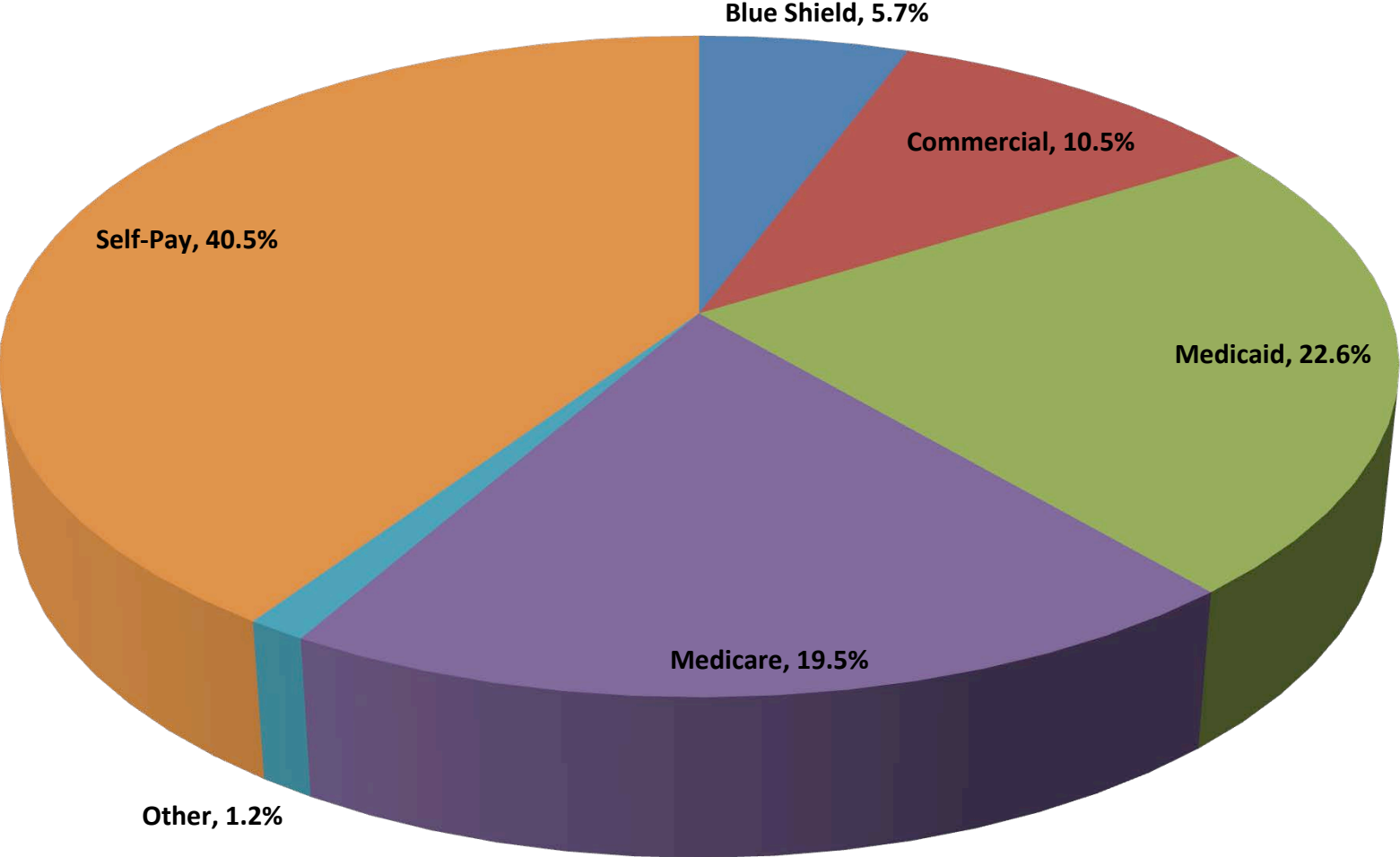

28

72

■ IVCs - percent not released

■ IVCs - percent released

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NC STeP: Number of IVCs by Quarter for Participating Hospitals

	Quarter 1 28% Turnover	Quarter 2 21% Turnover	Quarter 3 28% Turnover
Number of IVCs	367	369	729
Number of IVCs Turned Over	102	70	202

Hospital EDs and Percent of Use - April - June 2014

Region	Percent
Albemarle	11%
Beaufort	1%
Bertie	1%
Carolina East	3%
Carteret	17%
Duplin	7%
Chowan	2%
Edgecombe	4%
Lexington	9%
Pungo	1%
Outer Banks	4%
Randolph	16%
Wayne	7%
Wilson	7%
Martin	3%
Washington	0%
Bladen	0%
Our Community	0%
Lenoir	7%

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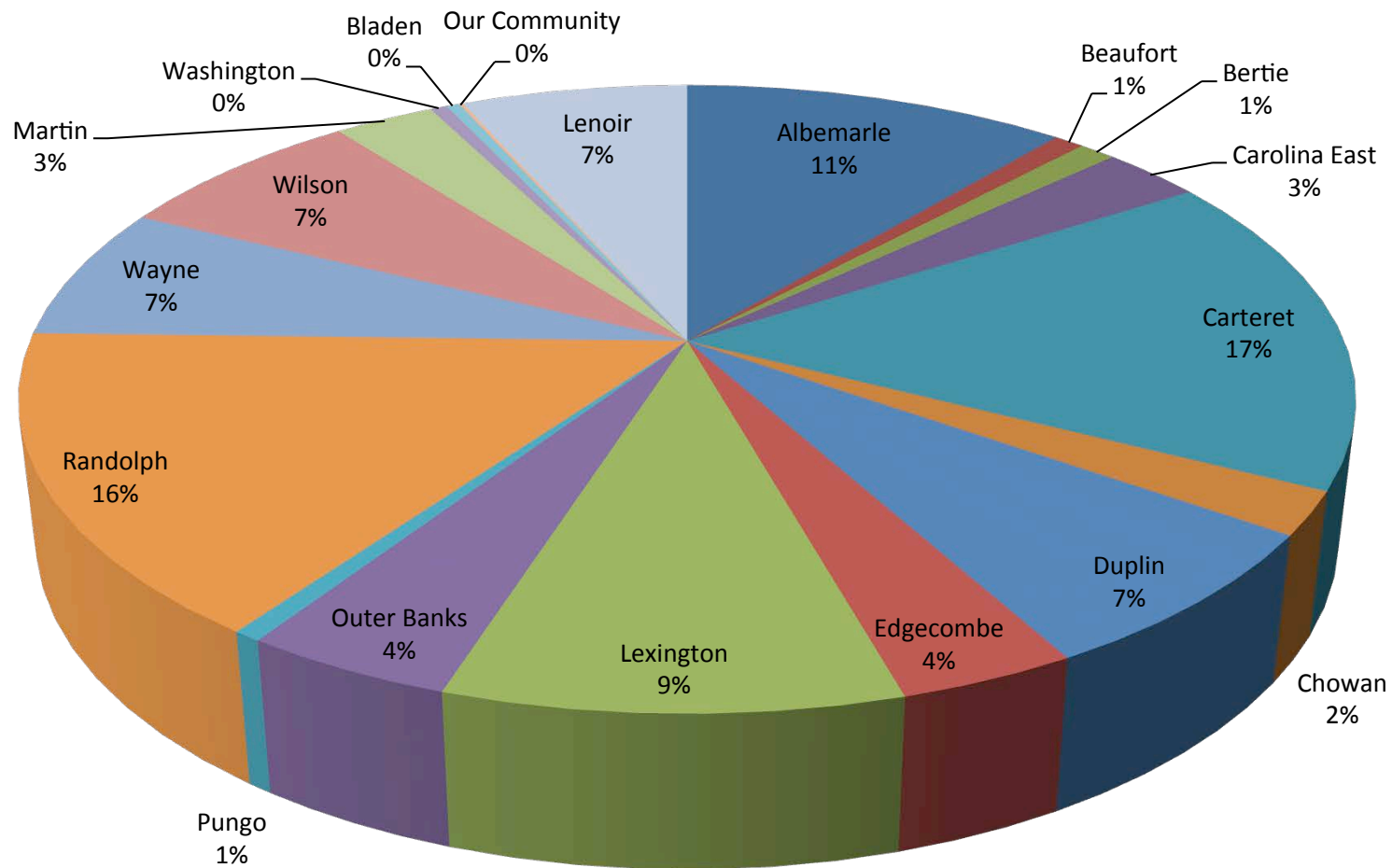
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FY 2014
NCSTeP - Payor Mix
(based on initial status)

Blue Shield, 5.7%

Commercial, 10.5%

Medicaid, 22.6%

Self-Pay, 40.5%

Medicare, 19.5%

Other, 1.2%

System's Savings from Overturned IVCs

	Total IVC's	Overturned	
		#	%
November - December	367	102	28%
January - March	369	70	19%
April - June	605	174	29%
Total	1,341	346	26%
Self Pay and Medicaid % of payor mix	59%	59%	
	791	204	
Average cost per inpatient day		$ 1,080	
ALOS per IVC		5	
Average Inptatient cost per IVC		$ 5,400	
Self Pay & Medicaid IVC's overturned		204	
NC Cost Savings from over turned IVC's		$ 1,102,356	
NCSTeP FY 2014 Total Expense		$ 595,743	
Return on Total Investment FY 2014		185%	

NC-STeP FY 2014 IVC's

Overturned 346

Total 1,341
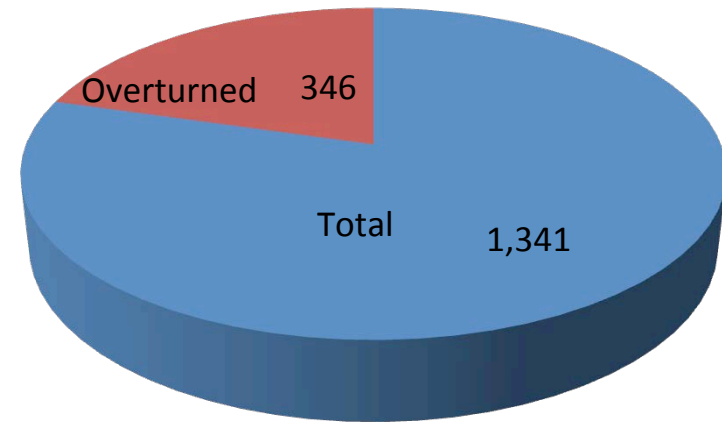
Summary Codes	Vidant (Beaufort, Bertie, Chowan, Duplin, Edgecombe, Pungo)	Albemarle	Carteret	Carolina East	Lexington	Outer Banks (seems to use same codes as Vidant?)	Randolph	Wilson
Discharge Codes for Hospitals Using the Telepsychiatry Program								
Home	discharged to home or self care (routine discharge)	home	home, self-care	discharge to home or self care	home	discharged to home or self care (routine discharge)	discharge home	home/self care/group home
	discharged transferred to home under care of organized home health service org							
Transfer	discharged/transferred to a psychiatric hospital or psychiatric unit	transfer	Xfer to psych hosp/unit	transferred to psych hospital	psych transfer	discharged/transferred to a psychiatric hospital or psychiatric unit	discharge to psych facility	psych hospital/unit
	discharged to a short term general hospital for inpatient care		Xfer st-trm hosp/unit			discharged to a short term general hospital for inpatient care		short term hospital inp care
	discharged/transferred to an inpatient rehab facility (IRF)		d/c or Xfer ICF			discharged/transferred to an inpatient rehab facility (IRF)		acute hospital transfer
	discharged/transferred to skilled nursing facility (SNF) with medicare certification						discharge to rest home/ass liv	
	discharged/transferred to another type of health care inst not defined elsewhere in this list							
Admit		admit					disch inpatient	inpatient in WMC
Left against medical advice	left against medical advice or discontinued care		against medical advice					
Other	no code							
	discharged/transferred to court/law enforcement					discharged/transferred to court/law enforcement		

Telepsychiatry Portal

- Will Support all the HIT functions required of NC-STeP
- The portal is a group of separate but related technologies that will serve as the primary interface through which data is reviewed and created regarding patient encounters, including:
  - Scheduling of patients and providers
  - Exchanging clinical data for patient care
  - Collection of encounter data to support the needs of network managers and billing agents and to support timely referrals

Telepsychiatry Portal

- Most of the components of the portal exist today and are readily available, but the scheduling component will likely require a custom development effort if an appropriate off-the-shelf solution cannot be utilized.

- For the telepsychiatry network to be successful, these components must be integrated to work as a whole.
  - NC-STeP participants will be required to implement and utilize the portal as prescribed.

NC-STeP Telepsychiatry Portal and HIE Updates

- RFI closed December 2013

- Information gathering meeting with NC-HIE - January 2014

- Information gathering with NCHA - February 2014

- RFP Issued May 2014

- RFP Closed June 11, 2014

- Demonstrations from bidders July 2-3, 2014

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Program Outcomes Summary
Data for the Period April– June 2014

- NC-STeP is ahead of schedule in most of the legislatively defined timelines.

- 30 hospitals live (21 hospitals reporting during the period).

- 1280 Initial Telepsychiatry Assessments were conducted under the program during this period.

- Close to 5000 encounters since November 2013

- The median length of stay for all ED patients who received telepsychiatry services during this quarter was 24.6 hours

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- 729 ED patients who received telepsychiatry services had an IVC in place during their ED stay. 202 of those patients did not have an IVC in place when they were discharged, or 28%.

- Of the ED patients who received telepsychiatry services, 33% were discharged to home. 61% were discharged to another facility.

  – This was an average; the percent varied quite a bit across different hospitals.

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