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Introduction

Purpose of This Data Book

The intent of this data book is to summarize historical data on the Mental Health (MH) and Substance Use Disorder (SUD) service utilization patterns in the State of Washington's (State's) Medicaid program in order to develop per member per month (PMPM) cost estimates to be used in rate-setting analyses for the future managed care program. This data book has been produced by the State's actuarial contractor, Mercer Government Human Services Consulting (Mercer), part of Mercer Health & Benefits, LLC.

Contents of This Data Book

This data book contains demographic and utilization data related to Medicaid covered MH and SUD services only. MH services were historically administered by the Regional Support Networks in a manged care environment prior to transitioning to the Behavioral Health Organizations (BHOs) in April, 2016. This MH data was submitted to the State that reflects CY 2013-2015 encounters for outpatient and evaluation and treatment (E&T) services. Additionally, for MH, inpatient services are captured on a fee-for-service (FFS) basis through the ProviderOne (P1) system for Medicaid eligible individuals in the Medicaid mental health program. SUD services were historically administered on a FFS basis and captured in State data warehouses. This SUD data includes claims data from the P1 system for SUD services as well as additional SUD treatment services data from the Treatment and Assessment Report Generation Tool (TARGET) for Medicaid eligibles. Additional information on these data sources is outlined below:

- The MH P1 Inpatient data reflect FFS claims payments made by the State directly to providers. BHOs reimburse the State for services for their members, but the BHOs do not report encounters on these services.
- The SUD P1 data reflect FFS claims payments made by the State directly to SUD providers.
- The MH outpatient and E&T encounter data are submitted by the BHOs to the State's Medicaid management information system. The State provided an extract of the encounter data to Mercer.
- The TARGET SUD data are reported via a web-based system directly by the agencies. The
 TARGET data capture services provided to clients by SUD providers. This data system
 largely captures services provided to non-Medicaid eligibles, but also contains records of
 services provided to Medicaid clients. The State provided Mercer detailed TARGET datasets
 at the recipient, service date and modality level for evaluation in this analysis.

• The eligibility information used in the data analysis is summarized from the State's eligibility data. The State provided an eligibility file which outlines the Medicaid enrollment segments for each member and the applicable recipient aid category (RAC) code.

Based on discussions with the State, the data in this data book are limited to services rendered in calendar year (CY) 2015, with payments made through May, 2016. This time period was selected as the primary source for basing the rate calculations as it is the most recent complete year of data and allows for sufficient data runout in order to apply credible completion factors (discussed further in Section 5 below) and it reflects the utilization for the Newly Eligible population which became Medicaid eligible as of January 2014.

To ensure the encounter and claim data accurately reflect the services provided during the CY 2015 period, the State afforded the BHOs the opportunity to review the data for accuracy and completeness. No material issues were identified by the BHOs related to the CY 2015 data period.

Prior to the BHO program being effective April 1, 2016, counties were organized into Regional Support Networks (RSNs). With the start of the BHO program, there were some county shifts and renaming of entities. To reflect the naming conventions and structure effective during the SFY 2018 contract period, this data book references and summarizes information by the BHO program structure:

- Great Rivers: Cowlitz, Grays Harbor, Lewis, Pacific, Wahkiakum.
- Greater Columbia Behavioral Health: Asotin, Benton, Columbia, Franklin, Garfield, Kittitas, Klickitat, Walla Walla, Whitman, Yakima.
- King County: King.
- North Central: Chelan, Douglas, Grant.
- North Sound Mental Health Administration: Island, San Juan, Skagit, Snohomish, Whatcom.
- Pierce County (operated by Optum): Pierce.
- Salish: Clallam, Jefferson, Kitsap.
- Southwest: Clark, Skamania.
- Spokane: Adams, Ferry, Lincoln, Okanogan, Pend Oreille, Spokane, Stevens.
- Thurston-Mason: Mason, Thurston.

Note that the counties included within the labeled Southwest BHO were transitioned into the Fully Integrated Managed Care program effective April 1, 2016 and as such will not be covered under the SFY 2018 MH and SUD managed care capitation rates. However, the Southwest BHO historical utilization is summarized within this data book based on historical information received from the Southwest RSN.

The users of this data book are cautioned that direct comparisons cannot be made between the information in this data book and raw data from P1, TARGET and encounter data for MH and SUD services. Mercer applied adjustments to the raw data which are described in Section 5.

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The users of this data book are also cautioned against relying solely on the data contained herein. The State and Mercer provide no guarantee, either written or implied, that this book is 100% accurate or error free. In addition, the data included here and the adjustments made are subject to change based on further State decisions.

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Covered Populations

The Washington Medicaid managed care program for MH and SUD services will cover all Medicaid eligible individuals including the Temporary Assistance for Needy Families and the State Children's Health Insurance Program programs, the Poor Elderly, Children in Foster Care and the Disabled population. In addition, the managed care program will cover the Newly Eligible population up to 133% of the federal poverty level, which was part of the Medicaid expansion under the Affordable Care Act (ACA), effective January 2014.

Rate Cells

The base data are summarized by rate cells split into cohorts that have different historical cost and utilization patterns, which inherently represent different levels of risk. The State will employ five rate cells to differentiate payment rates to the managed care entities where children are defined as under age 21.

- Disabled Adults.
- Non-Disabled Adults.
- Disabled Children (including Foster Care).
- Non-Disabled Children.
- Newly Eligible Adults.

The following logic was used to categorize the Medicaid population based on RAC codes into the rate cells. Note that the RAC codes listed below do not reflect a comprehensive list of eligibility codes, but rather captures the codes found in the data used for this analysis.

Rate Cell	RAC Code
Non-disabled	1026, 1028-1032, 1039, 1046, 1048, 1052 1055, 1059, 1065, 1066, 1068, 1069, 1071-1074, 1083, 1084, 1088, 1095, 1096, 1101, 1103, 1104, 1106, 1108, 1109, 1124, 1140, 1146, 1148, 1149, 1152, 1154, 1156, 1174, 1196-1199, 1202, 1203, 1204, 1206, 1207, 1212, 1213, 1218, 1222, 1223, 1240, 1241, 1244, 1246, 1248-1251, 1256, 1260, 1264-1266
Disabled (including Foster Care)	1014-1023 (Foster Care), 1047, 1049, 1067, 1070, 1075, 1076, 1086, 1091, 1105, 1107, 1110, 1111, 1121, 1134, 1147, 1150, 1151, 1153, 1162-1165, 1168, 1169, 1175, 1219, 1221, 1224, 1225, 1236-1239, 1242, 1243, 1245, 1247, 1252-1255, 1258, 1261, 1267-1269
Newly Eligible	1126, 1201, 1217

Rate Cell	RAC Code
Excluded (State-Only)	1082, 1097, 1098, 1099, 1100, 1112-1120, 1122, 1123, 1125, 1127, 1133, 1138, 1139, 1142, 1183, 1185, 1191, 1192, 1194, 1200, 1205, 1208-1211, 1214-1216, 1226, 1227, 1230-1235

Mercer cross referenced the State eligibility file to the P1 MH and SUD claims data, TARGET SUD data, and MH encounter data to assign the RAC codes and rate cells. Additionally, this allowed Mercer to limit the data files to the Medicaid population that will be covered under the managed care program. The results of this filtering are further described in Section 5 for all data sets.

In addition to excluding specific RAC codes, eligibility records for the American Indian/Alaskan Native population were excluded from these data summaries as these individuals are not expected to be administered under the BHO program. Mercer acknowledges that the State continues to finalize decisions on delivery of services for this population. To the extent these decisions impact the managed care program, additional adjustments may be necessary. This is further discussed in the Data Adjustments and Exclusions section (Section 5).

Finally, eligibility exclusions were made based on IMD provisions outlined in the Medicaid Managed Care Final Rule. Additional details are outlined in the Data Adjustments and Exclusions section (Section 5).

Identification of Dual Eligibles

The eligibility file provided by the State contains a 'DUAL_ELGBLTY_DESC' field used to identify the dual eligibles for purposes of evaluating the Medicare cost-sharing adjustment discussed in Section 5. The logic used to identify dual eligibles is outlined below.

DUAL_ELGBLTY_INDCTR	DUAL_ELGBLTY_DESC	Dual/non-Dual
00	Not Dual, Not a Medicare Beneficiary	non-Dual
01	Qualified Medicare Beneficiary (QMB) Only	non-Dual
02	Full Benefit Dual with QMB	Dual
03	Specified Low-income Medicare Beneficiary (SLMB) Only	non-Dual
04	Full Benefit Dual with SLMB	Dual
05	Qualified Disabled Working Individual (QDWI)	non-Dual
06	Qualified Individual (QI-1)	non-Dual
08	Other Dual Eligible with Medicaid Coverage	Dual
91	Medicare Only	non-Dual
(blank)		non-Dual

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Covered Services

The specific services required under the BHO Medicaid managed care contract will be detailed in the contract between BHOs and the State. Mercer reviewed the covered services with the State to ensure all procedure codes reflected in this data book are covered in the State Plan and will be covered under the BHO contract. The table below reflects the procedure codes found in the MH and SUD data. The claims data for the covered State Plan services are summarized in Section 6 using the following service crosswalks.

Summarization Logic for MH Claims Data

Service Modality	Primary Service Setting	Procedure Codes	Type of Utilization
Inpatient Hospital Facility		All inpatient mental health FFS claims	Days
E&T	Facility	H2013 and all encounters captured in E&T database	Days
Residential MH Service	Facility	H0018, H0019	Days
Crisis	Office/ Community	H0030, H2011, S9484, S9485	Days or Services
High-Intensity Treatment	Community	H0040, H2022, H2033, S9480	Days or Services
Day Support	Office	H2012	Services
Individual Treatment Services	Office	90785, 90832-90834, 90836- 90838, 90889, 99241-99245, H0004, H0032, H0046 (without modifier UB) ¹ , T1013	Services
Group Treatment Services	Office	90849, 90853	Services
Family Treatment	Office	90846, 90847	Services
Intake	Office	90791, 90792, 96101, 96102, 96116, 96118, 96119, 99201- 99205, 99304-99306, 99324, 99326, H0031	Services
Special Population Evaluation	Office	T1023	Services

Service Modality	Primary Service Setting	Procedure Codes	Type of Utilization
Medication Management	Office	90863, 96372, 99211-99215, 99307-99310, 99334-99337, 99341-99343, 99347-99350, M0064, T1001	Services
Medication Monitoring	Community	H0033, H0034	Services
Rehab Case Management	Community	H0023	Services
Community Psych Services	Community	H0036, H2014, H2015, H2017, H2021	Services
Peer Support	Community	H0038	Services
Community Transition	Community	T2038	Services
Therapeutic Psychoeducation	Office	H0025, H2027, S9446	Services
Excluded former 1915(b)(3) Services	Community	H0045, H2023, H2025, H2031, S9125, T1005	
Excluded (State-only) Services		99075, H0001 (MH Only), H0002, H0043, H2036, T1016	

¹The State identified H0046 (without the UB modifier) is included in the Individual Treatment Services modality, whereas the H0046 UB is excluded as this code is limited to a request for services.

Encounters for the Program of Assertive Community Treatment (PACT) are identified using a 'UD' modifier and are included in the data book. Additionally, encounters for the Wraparound with Intensive Services (WISe) are identified using a 'U8' modifier and are summarized on a statewide basis within Section 6.

Summarization Logic for P1 SUD Claims Data

Service Modality	Primary Service Setting	Procedure Codes	Type of Utilization
Assessment	Office	80100, H0001 (SUD Only), H0003, H0049	Services
Detoxification	Facility	H0009-H0011	Days
Outpatient	Office	86580, 96153 (Group), 96154, 96155, H0004, H0033, H2033 (Group), T1015, T1017	Services
Opiate Substitution Treatment	Office	H0020	Days
Residential	Facility	H0018, H0019	Days

Service Modality	Primary Service Setting	Procedure Codes	Type of Utilization
Excluded (State-only) Services		H2036, T1009, T1028	

This data book includes services rendered at federally qualified health center (FQHC) providers. The service expenditures reflect the FFS payments and do not include any supplemental payments to these FQHC providers. Additionally, the data book excludes services offered through the Safe Babies, Safe Moms program.

Summarization Logic for TARGET SUD Data

The State provided a SUD dataset from the TARGET system to supplement SUD claims records not captured in the P1 system. These are primarily for non-Medicaid populations that moved to the Newly Eligible rating group as of January 1, 2014. However, due to variations in provider reporting, the TARGET data may also contain SUD claim records for Medicaid eligibles that are not captured in the P1 system. As discussed in Section 5, Mercer included records from the TARGET dataset that were not already present in the P1 claims data to ensure duplicate records were excluded. The resulting TARGET data for the covered State Plan services are summarized in Section 6 using the following modality crosswalk.

Service Modality	Primary Service Setting	Detailed Modality	Type of Utilization
Detoxification	Facility	Detoxification	Days
Outpatient	Office	Group Care Enhancement, Intensive Outpatient, Outpatient	Services
Opiate Substitution Treatment	Office	Methadone/Opiate Substitution Treatment	Days
Residential	Facility	Intensive Inpatient, Long-term Residential, Recovery House	Days

Note that procedure code level detail was not captured in the TARGET system, so the service modality was assigned by the State based on the type of service and provider. Mercer relied on the detailed service modalities to summarize the TARGET data reflected in this data book.

The Outpatient services are summarized as 15-minute units in this data book, while the Detoxification, Opiate Substitution Treatment, and Residential services are summarized as per diem services. Additionally, the Outpatient services were further split into Individual and Group by BHO based on utilization contained within a supplemental TARGET dataset from the State.

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Cost Development

This Section outlines the cost development process Mercer and the State completed in order to assign costs to the MH and SUD data sources. These costs are reflected in the summaries shown in Section 6.

MH Unit Cost Development

The MH encounter data system does not collect payment information from the BHOs on the actual payments to providers. In order to calculate the PMPM cost for use in rate setting, Mercer developed estimates for the unit cost for each of the E&T and outpatient services delivered to Medicaid eligibles.

The MH service array in the State of Washington includes services that are reported in the encounter data in one of two ways. Services provided in 24-hour settings report the number of days of services. The other outpatient services are reported based on the duration of services in minutes. Inpatient claims are captured in the State's Medicaid Management Information System (MMIS) system and thus capture the days for each stay as well as the payments made for the individual claims.

Given the differences in reporting for the outpatient services, Mercer utilized different methodologies to develop the hourly cost estimates and the per diem costs for the encounter data. Each approach is discussed below.

Methodology for Hourly MH Outpatient Services

Mercer relied on a cost-modeling approach to estimate the unit cost associated with each hourly service modality. This methodology is analogous to an approach to develop a fee schedule for each of these services, which has been used in other states' fee-for-service programs.

The general methodological components are identified below along with the primary data source:

- Staffing Assumptions and Staff Wages.
- Employee-Related Expenses Benefits, Employer Taxes (e.g., FICA, unemployment and workers compensation).
- Provider Overhead Expenses.
- Productivity Assumptions (billable versus non-billable time).

At the end of this section, Mercer has included the average hourly costs by modality and a comparison to the 2011 results. The cumulative impact of the changes to the underlying cost and productivity assumptions was a 16.3% increase in the average hourly cost applied to the CY 2015 outpatient hourly encounters.

Data Sources

- Compensation study on wages typically earned by mental health professionals.
- National studies on provider benefit and overhead related expenses.

Staffing Assumptions and Staff Wages

The MH encounter data captures information on the professional delivering each service. Mercer developed unit costs specific to the CPT code and county to assign hourly rates to the encounter data. To support the development of the hourly rates, Mercer collected occupational employment salary statistics from the United States Department of Labor, Bureau of Labor Statistics (BLS) as of May 2015 for national, State of Washington and regional metropolitan areas within Washington. Additionally, Mercer referenced the information on staff wages collected through a compensation study conducted by consultants from our compensation practice, which was used for the unit cost development during the CY 2014 rate-setting process. Mercer applied a 2.9% annual trend factor to bring that survey data to a CY 2015 basis.

The surveys reviewed in the compensation study are:

- Occupational Employment Statistics from the United States Department of Labor, Bureau of Labor Statistics – May 2012 through May 2015.
- Integrated Health Network Compensation Survey from Mercer Human Resource Consulting

 April 2012.
- Hospital & Healthcare Professional, Nursing & Allied Services Personnel Compensation Report from Watson Wyatt Data Sources – February 2012.
- Sullivan Cotter Physician's Survey February 2010.

Mercer relied primarily on the information gathered from the BLS for the final wage assumptions. This study reviewed wage levels for professionals working in the State of Washington with similar education and experience as the staff providing mental health services. Salaries in each of the surveys have been adjusted for inflation to be on a consistent 2015 basis. The salary assumptions are provided in the following exhibit.

Based on review and discussions with the State, the BHOs are classified into the following areas for the wage assumptions:

- Area 1 BHOs King, North Sound, Salish, Pierce and Thurston Mason.
- Area 2 BHOs Southwest and Great Rivers.
- Area 3 BHOs Greater Columbia, North Central and Spokane.

Exhibit 1 – 2015 Median Salaries by Provider Type

Provider Type	State of Washington	Area 1 – Seattle/ Tacoma/ Bellevue	Area 2 – Vancouver/ Portland	Area 3 – Spokane/ Eastern WA
Below Master's Degree	\$51,000	\$53,000	\$53,000	\$51,000
Master's Level Professional/ Psychologist (MA/PhD)	\$69,000	\$74,000	\$76,000	\$67,000
Psychiatrist/Medical Doctor (MD) ¹	\$213,000	\$213,000	\$213,000	\$213,000
Registered Nurse/ Licensed Practical Nurse (RN/LPN)	\$70,000	\$72,000	\$74,000	\$64,000
Advanced Registered Nurse Practitioner/Physician Assistant (ARNP/PA)	\$111,000	\$118,000	\$120,000	\$107,000
Certified Peer Counselor	\$36,000	\$39,000	\$37,000	\$33,000

¹Through additional discussion with the State, the Psychiatrist/Medical Doctor salary for all areas reflects the Urban Psychiatrist/Medical Doctor salary to account for the need to attract providers in the Rural and Frontier regions.

The statewide twenty-fifth and seventy-fifth percentile salaries are illustrated in the following exhibit to demonstrate the range of salaries observed in the BLS information and surveys.

Exhibit 2 - 2015 Statewide Salary Ranges

Provider Type	Twenty-fifth Percentile	Seventy-fifth Percentile
Below Master's Degree	\$42,000	\$61,000
MA/PhD	\$61,000	\$76,000
Psychiatrist/MD	\$151,000	\$216,000
RN/LPN	\$60,000	\$82,000
ARNP/PA	\$100,000	\$124,000
Certified Peer Counselor	\$28,000	\$46,000

Staffing Descriptions

The following provides a brief description of the staff qualifications and the positions reviewed for the salary assumptions included in the table:

- **Below Masters Level Professional** An individual who is a graduate of a college or university with professional experience. This staff is not a licensed professional. The staffing assumption focused on salaries for mental health social workers and counselors.
- Masters Level Professional An individual who is a graduate of a college or university
 with a masters degree. The staffing assumption focused on salaries for masters level social
 workers and masters level case managers.

- Psychologist Licensed psychologist positions were reviewed to develop wage assumptions.
- **Psychiatrist** Psychiatrist positions were reviewed to develop wage assumptions.
- Medical Doctor A clinical supervisor who conducts initial assessments upon admission and directs psychopharmacologic and medical services. Family practice and general practitioner medical doctors were reviewed to develop wage assumptions.
- **Registered Nurse** The positions reviewed for the staffing assumption include registered nurses with various levels of experience.
- **Licensed Practical Nurse** The positions reviewed for the staffing assumption include licensed practical nurses with various levels of experience.
- Advanced Practice Nurse The positions reviewed for the staffing assumption include advanced practice nurses and nurse practitioners with various levels of experience.
- Physician Assistant Physician assistant positions were reviewed to develop wage assumptions.
- **Certified Peer Counselor** Life experience with mental illness and mental health services. The positions reviewed for the staffing assumption include psychiatric aides and counselors.

Employee-Related Expenses (ERE)

The ERE assumption includes consideration for the fringe benefits including insurance benefits and employer taxes. Mercer reviewed information from prior unit cost surveys as well as national publications and information from other states to gather benchmarks and used a 30% for the ERE assumption this cycle. This assumption is consistent with the prior rate development process as well as national studies from the Employee Benefit Research Institute.

Provider Overhead Expenses

The provider overhead assumption includes expenses related to the capital expenses associated with program operation, costs for supervisory or home office staff and other general administrative expenses including transportation. Mercer reviewed prior unit cost surveys as well as benchmarks in other states to analyze the impact of provider overhead expenses.

Consistent with the previous rate development process, Mercer incorporated an overhead assumption of 40% of total expenses. This adjustment was applied as a percentage of total costs to account for provider overhead expenses. Note that the 40% overhead assumption is applied consistently across all providers. While Mercer recognizes that provider overhead assumptions may vary among providers, a 40% assumption is expected to be sufficient in aggregate. Mercer's experience in other states suggests an assumption of 40% is reasonable.

Productivity Assumptions

The productivity assumptions are related to the percentage of full-time equivalent staff hours (2,080 hours per year) that translates into direct billable hours for each service modality. Mercer modeled the productivity of staff separately by service modality to consider the differences in service delivery between clinic-based services and community-based services as well as

differences inherent to specific services such as crisis. While we recognize that certain services categorized as office-based may be provided occasionally in the community and vice versa, we concluded that it was appropriate to recognize variation in productivity based on the "typical" service setting based on the procedure code definition.

The assumptions consider the following components of non-billable time:

- **Paid Time-Off (PTO)** PTO includes consideration for vacation, holidays and sick time. The assumptions varied the level of PTO for practitioners with higher levels of education.
 - Vacation Three weeks of vacation assumed for all staff except MD/Psychiatrist, which were set at four weeks, and Certified Peer Specialists set at two weeks.
 - Eleven paid holidays.
 - Ten sick days.
- **Training** We have assumed the training to be 40 hours per year for each staff member. This was based on BHO input during the last rate-setting exercise.
- **Travel** Time spent traveling to community-based appointments. In addition, because of the outpost service delivery structure in the frontier counties, one hour of travel time has been included for most office-based services versus 0.5 hours for urban and rural counties.

Exhibit 3 – Travel Assumptions

Classification	Office-based Services	Community-based Services
Urban	0.5 hours for mental health staff, 0.25 for RN	1 hour per day, 0 for PA/Psych
Rural	0.5 hours for mental health staff, 0.25 for RN	1.5 hours per day, 0 for PA/Psych
Frontier	1 hour for mental health staff, 0.5 for RN	2.5 hours per day, 0 for PA/Psych

- **Supervision** Many of the service definitions indicate that services can be provided under the supervision of a mental health professional, which is defined as at least Master's level in the State Plan. To account for time spent by staff supervising or being supervised, the following assumptions were used:
 - 5 hours per week of supervision time for MA/PhD staff.
 - 2 hours of time per week being supervised or supervising for Psychiatrist and Physician assistants.
 - 1 hour of time per week being supervised or supervising for other staff.
- Notes Notes are required to document the treatment and progress of a client. The
 documentation time is assumed to be greater for the evaluation and case management
 activities.
 - 1.25 hours per day for Psychiatrist and Physician assistants.
 - 1 hour per day for other staff.
 - Intake services and Special Population services were set at 2 hours per day for all staff.
 - Respite services were set at 0.5 hours per day for all staff.
- On-call Time For crisis services, this is a factor to reflect the on-call nature of staff in these services. This was set at 1.5 hours per day.

• **General Admin** — This reflects the amount of time spent in other office-related functions. This includes team meetings, office management, mandatory breaks, etc. This was set at 0.5 hours per day.

Other Distinctions by Service Modality

While the exhibits provide a general summary of the assumptions, slight modifications were made for certain modalities:

- **Intake and Assessment** Mercer assumed slightly lower productivity assumptions for intake services that may require greater documentation.
- High Intensity Treatment Mercer assumed slightly lower productivity assumptions to account for additional non-billable team meetings (two hours per week) for this evidencebased service.
- Medication Management Mercer assumed higher productivity assumptions for medication management services because of limited travel requirements.

Urban/Rural/Frontier Designation

As noted in the travel assumptions above, Mercer included consideration for additional travel time for rural and frontier counties based on discussions with the State. It is assumed that providers in rural and frontier counties may need to spend additional time in transit for community-based services. To differentiate counties between urban and rural, Mercer relied on a distinction established by the Washington State Office of Financial Management for urban and rural designation (http://www.ofm.wa.gov/pop/popden/rural.asp). In addition, Mercer utilized the frontier distinctions published at http://www.frontierus.org/documents/2010 frontier-areaslist.htm to differentiate the frontier counties. Rather than assign this distinction at the BHO level, Mercer assigned the distinction at the county level to better match the circumstances within BHOs that serve counties of varying geographies. The following table outlines the designations by county within each BHO.

Urban/Rural/Frontier Designation by County

ВНО	Urban	Rural	Frontier
Great Rivers		Cowlitz, Grays Harbor and Lewis	Pacific and Wahkiakum
Greater Columbia	Benton	Asotin, Franklin, Kittitas, Walla Walla, Whitman and Yakima	Columbia, Garfield and Klickitat
King	King		
North Central	orth Central Chelan, Douglas and Grant		
North Sound	Snohomish	Island, Skagit and Whatcom	San Juan

вно	Urban	Rural	Frontier
Pierce	Pierce		
Salish	Kitsap	Clallam	Jefferson
Southwest	Clark		Skamania
Spokane	Spokane		Adams, Ferry, Lincoln, Okanogan, Pend Oreille and Stevens
Thurston Mason	Thurston	Mason	

Productivity Summary

The results of our productivity modeling are summarized in the following tables. Mercer and the State reviewed the productivity assumptions included in the prior data book and determined that they continue to be reasonable. Note that separate considerations for WISe services are described in a separate section later in this document. The assumptions continue to be delineated by urban, rural and frontier counties. Generally, the productivity assumptions vary between office and community-based services with special distinctions made for crisis services. The categorization of service modalities as office or community is based on the primary service setting as outlined in the Covered Services table in Section 3.

Exhibit 4a – Urban County Productivity Percentages

Provider Type	Office-based Services	Community-based Services	Crisis Services	All Services Average
Below Master's Degree	58.6%	55.4%	39.6%	58.3%
MA/PhD	49.0%	44.9%	29.6%	47.8%
Psychiatrist/MD	58.4%	59.3%	33.6%	58.4%
RN/LPN	62.4%	55.4%	39.6%	60.7%
ARNP/PA	59.5%	60.8%	34.5%	59.4%
Certified Peer Counselor	N/A	56.7%	N/A	56.7%

Exhibit 4b – Rural County Productivity Percentages

Provider Type	Office-based Services	Community-based Services	Crisis Services	All Services Average
Below Master's Degree	56.6%	50.1%	34.4%	56.3%
MA/PhD	48.0%	39.6%	24.4%	46.6%
Psychiatrist/MD	58.4%	59.3%	28.4%	58.3%
RN/LPN	61.1%	50.1%	34.4%	58.5%

Provider Type	Office-based Services	Community-based Services	Crisis Services	All Services Average
ARNP/PA	59.5%	60.8%	29.2%	59.3%
Certified Peer Counselor	N/A	51.3%	N/A	51.3%

Exhibit 4c - Frontier County Productivity Percentages

Provider Type	Office-based Services	Community-based Services	Crisis Services	All Services Average
Below Master's Degree	49.4%	39.6%	23.8%	49.0%
MA/PhD	41.9%	29.1%	13.8%	40.2%
Psychiatrist/MD	58.4%	59.3%	18.1%	58.3%
RN/LPN	57.8%	39.6%	23.8%	53.5%
ARNP/PA	59.5%	60.8%	18.7%	59.3%
Certified Peer Counselor	N/A	40.6%	N/A	40.6%

Note that these percentages are a function of full-time equivalent staff hours (2,080 hours per year). Thus, a 50% productivity factor is equivalent to 1,040 hours per year spent on billable activities.

Average MH Hourly Rates by Service Modality

While the modeled costs to be attached to each hourly encounter will also vary by salary area, urban/rural designation and provider type, the following exhibit displays the statewide average hourly service rate for each modality. Note that day support services were priced consistent with a 6:1 client to staff ratio, and group treatment services were priced consistent with a 3:1 client to staff ratio. For reference, we have included the average hourly cost from the 2011 study as a comparison point. The average hourly cost attached to the encounters increased by about 16.3%.

Exhibit 5 - Average Hourly Costs by Service Modality

Service Modality	2011 Average Hourly Unit Cost	2015 Average Hourly Unit Cost
Crisis Services	\$229.88	\$251.91
High Intensity Treatment	\$174.86	\$131.13
Day Support	\$20.61	\$19.88
Individual Treatment Services	\$124.91	\$139.56
Group Treatment Services	\$38.01	\$42.20
Family Treatment	\$122.37	\$139.78
Intake	\$176.17	\$196.11
Special Population Evaluation	\$153.50	\$176.06

Service Modality	2011 Average Hourly Unit Cost	2015 Average Hourly Unit Cost
Medication Management	\$209.07	\$211.51
Medication Monitoring	\$128.39	\$130.92
Rehab Case Management	\$127.76	\$139.15
Community Psych Services	\$119.64	\$131.68
Peer Support	\$65.52	\$70.94
Community Transition	\$117.27	\$151.20
Therapeutic Psychoeducation	\$103.11	\$110.90
Total	\$108.18	\$125.79

Wraparound with Intensive Services Encounters (WISe)

WISe is a Medicaid funded range of service components that are individualized, intensive, coordinated, comprehensive, culturally competent, home and community based services for children and youth who have a mental disorder that is causing severe disruptions in behavior. Treatment requires coordination of services and support, intensive care collaboration and ongoing intervention to stabilize the child and family to prevent more restrictive or institutional placement. WISe team members demonstrate a high level of flexibility in accommodating families by working evenings and weekends and responding to crises 24 hours a day, seven days a week. The State defined modifier "U8" to identify services provided to WISe participants by qualified WISe practitioners.

While the CY 2015 encounter data captures utilization associated with WISe service delivery, the team-based model and other factors necessitate additional considerations regarding unit cost development. Mercer was able to identify these outpatient encounters by this U8 modifier and is in discussion with the State on development of hourly unit cost expectations using an approach similar to what is described above for non-WISe encounters. Specifically, the following factors are being assessed:

- Training Each WISe team member is required to complete an additional 32 hours of annual training specific to the WISe program.
- Notes Under the team-based model, additional considerations may be appropriate to reflect the extra time spent coordinating individual care under the team-based model.
- 24-hour Crisis model Access to crisis care on a 24 hour basis is expected to impact the
 the level of non-productive on-call time. Additionally, as WISe team members are accessible
 for crisis events, the team-based model allow additional opportunities to deliver other care
 during certain periods of the day.
- Concurrent delivery of services by multiple providers When clinically appropriate, WISe services may be delivered simultaneously by multiple providers. Because the WISe service may not be encountered separately for each provider, additional considerations may be necessary to reflect the cost of multiple providers delivering care. Note that this

consideration is limited to events where multiple providers are present during the delivery of care and does not include instances where providers confer in separate team meetings.

Additional information will be provided regarding the final assumptions for the considerations noted above.

Methodology for 24-hour Levels of Care

For the MH per diem services, Mercer requested per diems or effective per diems from each BHO for each provider and service reimbursed according to a per diem. In instances where per diems were not provided for a provider and service combination, the per diem provided during the prior rate setting was trended to the CY 2015 time period and used in the pricing of the encounters. Additionally, Mercer reviewed the results for reasonableness with the State and identified situations where per diems were outliers compared to other BHO arrangements for similar services. For those outlier per diems, Mercer adjusted the reported per diem with the prior rate setting per diem, trended to the CY 2015 time period, for that provider and service combination.

These per diems were applied to the days captured in the MH encounter data to calculate costs associated with these services.

Inpatient Claims

The inpatient FFS claims contain payment information, which is reflected in the PMPM calculations for inpatient hospital services. To account for any change in hospital rates have changed since the CY 2015 time period, Mercer will analyze the changes as part of rate setting rather than adjust the historical data.

SUD Cost Development P1 SUD Medicaid Cost Development

The P1 SUD data reflect the actual paid amount for each service based on the Medicaid fee schedule. These amounts are captured in the data summary pages. Potential changes to these fee schedules under managed care will be considered as part of the capitation rate development phase as discussed in Section 7 below.

TARGET SUD Cost Development

The TARGET SUD data capture service admission spans and records for services but do not contain any information on the actual reimbursement for each service. Prior to providing the data files to Mercer, the State assigned cost to the individual service records using fee schedules from the appropriate time period.

The fee schedules used by the State contain Medicaid and county-specific non-Medicaid reimbursement rates. The State applied the appropriate Medicaid and non-Medicaid fee schedules based on eligibility status of the individual at the time of the service. If the participant MERCER

was Medicaid eligible during the month of service, the Medicaid rate was applied, otherwise the county-specific non-Medicaid rate was applied. The non-Medicaid reimbursement rates are used to develop service costs for certain populations who gained Medicaid eligibility through Medicaid expansion. For some Residential services, a provider-specific fee schedule was applied.

The data book is intended to represent the reimbursement levels during a historical study period. Potential change to these fee schedules under managed care will be considered as part of the capitation rate development phase as discussed in Section 7 below.

5

Data Adjustments and Exclusions

This Section outlines the adjustments Mercer made to the MH and SUD data sources. These adjustments are reflected in the summaries shown in Section 6.

Overview

The encounter and claim data provided by the State contained information on the BHO that provided the service. In certain instances, the BHO where the provider was located differed from the BHO where the individual Medicaid member was enrolled. Consistent with the prior rate setting, Mercer summarized the encounter and claim data based on the BHO where the individual Medicaid member was enrolled (i.e. the BHO that received the capitation payment for a particular member).

In determining eligibility, Mercer cross-referenced each encounter to the State's eligibility file to extract the RAC codes. This information was relied on to determine Medicaid eligibility and the corresponding rate cell as discussed in Section 2.

To ensure the encounter and claim data accurately reflect the services provided during CY 2015, the State afforded the BHOs the opportunity to review the data and provide any additional encounter and/or claim records that were not recorded in the State files. No material issues were identified by the BHOs during the CY 2015 time period.

Mercer reviewed the data for consistency from month-to-month. Mercer did not audit the data, but we did determine the CY 2015 data were a reasonable source for rate setting. In order to ensure the data represented Medicaid services provided to Medicaid eligibles, Mercer applied a series of adjustments to the reported claims and encounter data.

Completion Factors SUD and MH IP P1 Data

The P1 data includes claims payment runout through May 2016. Although the P1 data includes at least three months of runout, some portion of incurred claims remain outstanding due to claims payment patterns specific to P1. Therefore, Mercer developed completion factors based on historical P1 claims payment patterns to incorporate consideration for any outstanding claims liability. To establish the completion factors, claims were grouped into the five main SUD modalities as well as the Inpatient MH modality, as outlined in the exhibits from Section 6.

The following factors were used for CY 2015 P1 data:

Modality	CY 2015
Assessment (SUD)	1.021
Detoxification (SUD)	1.002
Outpatient (SUD)	1.048
Opiate Substitution Treatment (SUD)	1.006
Residential (SUD)	1.002
Inpatient (MH)	1.029

MH E&T and Outpatient Encounter Data

Since the E&T and MH Outpatient data are encounters, only service date information is available with no reference to payment date. As the CY 2015 encounters reflect payment runout through May 2016 for CY 2015 E&T and Outpatient encounters, it is not anticipated that any substantial encounter submissions are still outstanding. Review of payment patterns from comparable states for similar services suggested the impact of completion factors to be immaterial after five months of runout. As such, Mercer determined that no MH E&T and Outpatient completion factors would be necessary to apply to the data.

SUD TARGET Data

Claims records reported through TARGET are required to be submitted by providers within one month following month of service. Because the data includes payments made through May, 2016, the State does not anticipate material outstanding claims beyond what is currently reflected in the data. As such, no completion factors were applied for the TARGET data.

MH Outpatient Crisis Data Adjustment

Based on discussions with the State, it is anticipated that the Service Encounter Reporting Instructions (SERI) for the crisis stabilization code S9484 will be updated prior to the SFY 2018 contract period. The change will require certain triage and 24-hour facilities to report crisis stabilization S9484 utilization on a per diem basis while the remaining facilities would report crisis stabilization under S9484 on an hourly basis. Currently, all crisis stabilization encounters are reported under S9484 on an hourly basis as the prior per diem crisis stabilization code S9485 had been discontinued. While the specifics of the updates to the SERI for S9484 are still being determined, Mercer summarized certain S9484 MH outpatient encounters on a per diem basis to be consistent with anticipated reporting practices during the contract period.

Mercer worked with DSHS to identify the providers that would be impacted by the change to the SERI. The list of identified providers includes triage facilities as well as providers who had submitted a per diem or effective per diem for S9485. For those identified providers, Mercer summarized the S9484 encounters based on the unique count of service days as reported in the

encounter data and priced them as a per diem utilizing the available S9485 per diem pricing. All S9484 encounters not converted to days were priced using the crisis hourly unit cost, as described in Section 4.

The BHOs most impacted by this adjustment include Great Rivers, Greater Columbia, North Sound, Spokane and Thurston Mason. Mercer plans to incorporate any necessary adjustments through rate setting to reflect final decisions regarding the SERI updates or pricing considerations specific to the per diem applied to these converted S9484 encounters, as noted in Section 7.

Data Exclusions

A subset of the reported claims and encounters in the MH and SUD data is excluded from the rate-setting base. Mercer removed certain claims that met specific criteria, as discussed with the State. Due to MH E&T and outpatient costs not being assigned to the encounters until one of the last steps in the Data Book development process, the impacts of each applicable exclusion to these data sets is cited as a percentage of total records. MH IP impacts are also cited as a percentage of total claims, whereas SUD P1 and TARGET impacts are reported as a percentage of total costs.

Exclusion for non-Medicaid Eligibles

The State provided Mercer with complete databases of BHO encounters as well as P1 and FFS related claims. After matching the claims to the eligibility data, Mercer excluded any claims records for individuals that are not Medicaid eligible. This includes the exclusion of records with RAC codes determined to be non-Medicaid eligible by the State. This excluded the following from CY 2015:

- 12.0% of P1 MH inpatient claims.
- 26.2% of MH E&T encounters.
- 6.8% of MH outpatient encounters.
- 0.3% of P1 SUD costs.
- 22.7% of TARGET SUD costs.

Exclusion for non-Medicaid Services

Certain procedure codes are not covered under the Medicaid State Plan. This also includes b(3) services which are no longer covered effective July, 2012 as well as the exclusion of H2036 from the P1 SUD data for room and board services (note that the room and board exclusion specific to the SUD TARGET data is referenced below). Mercer removed these records from the encounter data used for Medicaid rate setting. This excluded 1.3% of the MH outpatient encounters and 1.9% of the P1 SUD costs for CY 2015.

Exclusion of Duplicate Claim Records

Multiple outpatient hourly services may be provided on the same day. Therefore, no adjustment was made to the hourly services. Mercer did identify a subset of the per diem encounters that had multiple records on the same day for the same client, reporting unit identifier (RUID) and procedure code. Mercer excluded the duplicate record from the database. This excluded 0.1% of the MH E&T encounters and 0.2% of the MH outpatient encounters for CY 2015.

Exclusion of Duplicate TARGET Records to P1

Due to provider reporting procedures, it was determined that a subset of claims reported in TARGET would also be reported in the P1 data. To identify duplicate records, TARGET records were linked to P1 records using participant ID, agency, dates of service, and modality. Any TARGET records that matched a P1 record using this approach were identified as TARGET and P1 data redundancy, and thus the TARGET record was removed. Due to the magnitude of this adjustment, Mercer worked closely with the State to ensure the logic was consistent with expectations. This excluded 38.2% of the overall TARGET SUD costs for CY 2015.

Exclusion of Room and Board Services

Expenses associated with room and board are not covered under the Medicaid State Plan. The TARGET fee schedules used to price the expenses for TARGET Residential services include a room and board component of \$11.64 per day. Mercer applied an adjustment to cost for these Residential records to remove the cost for room and board. This excluded 3.1% of the TARGET SUD costs for CY 2015.

Bundled Services

Mercer analyzed the MH encounter data to identify instances where encounters were reported on the same day as a per diem service. The encounter data reporting manual allows certain encounters to be reported on the same day as a per diem service. For services deemed unallowable on the same day as a per diem service, Mercer excluded these records from the data set. The following chart summarizes the modalities included and excluded when encounters occurred on the same day as a bundled service.

Per Diem Service	Allowable Modalities Concurrent to Per Diem Service	Excluded Modalities Concurrent to Per Diem Service
Inpatient Hospital	Rehab Case Management, Peer Support	All other modalities
E&T	Rehab Management, Peer Support	All other modalities
Residential Mental Health	All modalities allowable as long as provided by staff outside facility	None

Per Diem Service	Allowable Modalities Concurrent to Per Diem Service	Excluded Modalities Concurrent to Per Diem Service
Crisis	Residential Mental Health, High Intensity Treatment (HIT), Family Tx, Intake, Medication Management, Peer Support, Clubhouse, Respite, Supported Employment, Therapeutic Psychoeducation	Crisis hotline, Day Support, Individual Tx, Group Tx, Medication Monitoring, Rehab Case Management, Community Psych
НІТ	Residential Mental Health, Crisis, Day Support, Intake, Medication Mgmt, Special Population Evaluation, Clubhouse, Respite, Supported Employment, Therapeutic Psychoeducation	Individual Tx, Group Tx, Family Tx, Medication Monitoring, Rehab Case Management, Community Psych, Peer Support

Mercer removed modalities identified in the excluded column that occurred on the same day as a bundled service. One exception to this exclusion was if the outpatient service occurred on the date of admission or discharge from inpatient or E&T. In this case, the encounters were deemed allowable and included in the data. In total, this excluded 0.8% of the MH outpatient encounters for CY 2015. No additional exclusions were made to the MH E&T data.

Exclusion for Department of Corrections

Expenses associated with services delivered in prison settings are not covered under the Medicaid State Plan. Based on discussions with the state, Mercer excluded all SUD Residential costs for claims funded by the Department of Corrections, as well as all SUD Outpatient costs that were delivered in prison facilities. These specific facilities were identified and provided by the state to Mercer. This excluded 2.8% of the TARGET costs for CY 2015.

Exclusion for Services Covered under WMIP, Healthy Options or FFS

Certain individuals received mental health services funded by either Healthy Options (HO) or Medicaid FFS. The State provided Mercer with a database containing mental health records for each of the HO and FFS programs. Mercer identified and excluded any matching combinations of individuals, procedure codes and dates of service in the mental health encounter data. Those records that were not the BHOs responsibility were excluded as they were funded by other programs. This excluded 0.3% of the P1 MH inpatient claims, 0.3% of the MH E&T encounters, 0.4% of the MH outpatient encounters, and 0.3% of the P1 SUD costs for CY 2015.

Additionally, certain members were enrolled in the WMIP program operated by Molina. The State provided Mercer with a list of members enrolled in the WMIP program operated by Molina However, as the WMIP program ended effective June 30, 2014, there was no impact to the CY 2015 time period.

Exclusion of Tribal Services for Certain Tribal Providers and the Enhanced Encounter Payment

Based on discussions with the State, it was determined that all services provided at Tribal Facilities should be excluded from SUD claims data. These services will continue to be reimbursed through other funding streams and will not be included in the capitation payments. The State provided Mercer with a list of applicable Tribal Facilities. In addition, the State informed Mercer of expenses captured in the encounter data that reflect enhanced encounter payments that are made in addition to fee schedule payments for SUD services. Because these enhanced encounter payments are reimbursed through other funding sources, they will not be included in the capitation payments. Note that SUD service expenses historically reimbursed on a FFS basis continue to be included in the data book. This excluded 37.0% of the P1 SUD costs and 1.3% of the TARGET SUD costs for CY 2015.

Exclusion for American Indian/Alaskan Native Claims

Based on discussions with the State, eligibility and MH and SUD claims associated with the American Indian/Alaskan Native population have been excluded from the data book as, during the contract period, MH and SUD services for this population will be covered through the State's FFS program. Mercer identified and excluded claims for this self-identified population by flagging claims with Race_Code field value of 4 or 5. This excluded the following from CY 2015:

- 3.1% of MH inpatient claims.
- 3.0% of MH E&T encounters.
- 2.4% of MH outpatient encounters.
- 3.5% of P1 SUD costs.
- 1.1% of TARGET SUD costs.

While this population is excluded from the data book, there are ongoing discussions regarding the delivery of care for this population during the SFY 2018 time-period. Considerations for final decisions will be incorporated into the SFY 2018 rate development process, as noted in Section 7.

Institution for Mental Disease (IMD) Services Considerations

On May 6, 2016, the CMS published the Medicaid and Children's Health Insurance Program (CHIP) Programs final rule. Provision §438.6(e) states the following, "...the State may make a monthly capitation payment to an MCO or PIHP for adults receiving inpatient treatment in an IMD, so long as the facility is a hospital providing psychiatric or substance use disorder inpatient care or a sub-acute facility providing psychiatric or substance use disorder crisis residential services, and length of stay in the IMD is for a short-term stay of no more than 15 days during the period of the monthly capitation payment." This requirement was effective as of July 6, 2016.

As a result of this provision, Federal Financial Participation (FFP) is not available for capitation payments made for individuals who stay in IMD facilities within a given calendar month in excess MERCER

of 15 days. The adjustments made to the base data to account for this provision are outlined below.

Exclusion of MH IMD Services

Prior to the publication of the provision, Medicaid coverage for services provided in MH IMDs was limited to children ages 21 and under and adults ages 65+. Based on discussions with the State, Mercer excluded all MH IMD claims for individuals ages 22–64 from the base data. Mercer will develop an adjustment through the rate setting process to account for allowable Medicaid MH IMD stays per the final rule. Specific to MH residential services, the State intends to continue to reimburse these outside of the capitation rates.

The State provided Mercer with a list of MH IMD facilities which included hospitals, certain E&Ts and certain residential facilities. Mercer used this list to identify MH inpatient claims as well as encounters for MH E&T and residential IMDs for the population ages 22–64 and excluded these from the data. Based on the list currently available, there were reductions of 8.3% of the E&T encounters, 10.5% of the inpatient claims, and 1.1% of the outpatient encounters for CY 2015, though the results vary based on BHO.

Exclusion of SUD IMD Services

Mercer excluded all SUD IMD claims from the base data and will develop an adjustment through the rate setting process to account for allowable Medicaid SUD IMD stays per the final rule.

The State provided Mercer with a list of SUD IMD facilities which included certain residential and detox facilities across multiple counties. Mercer used this list to identify and exclude SUD residential service records for all individuals provided at these IMD facilities. As the P1 SUD data set does not include any IMD claims, this exclusion was limited to SUD data contained in the TARGET data. This excluded 17.9% of the overall TARGET SUD costs for CY 2015.

Consideration for IMD Excess Stay Claims

In accordance with the Final Rule, if the aggregate count of days in an IMD (MH or SUD) for an individual within a single month exceeds 15 days, all services delivered to that individual during that month are not eligible for FFP under the capitation rate.

To assess the impact of the Final Rule, Mercer identified IMD stays that exceeded 15 days by person and month and excluded all eligibility records as well as all non-IMD claims and encounters from the MH and SUD data in those months for those individuals. This excluded the following in CY 2015:

- 0.9% of MH inpatient claims.
- 0.4% of MH E&T encounters.
- 0.3% of MH outpatient encounters.
- 1.4% of P1 SUD costs.

0.3% of TARGET SUD costs.

Data Adjustments for Dual Eligibles

Mercer reviewed the services provided to individuals who were classified as dual eligible at the time of service according to the State's eligibility file and the logic outlined in Section 2. The P1 system accounts for any Medicare participation during the processing of the claim. As such, within the P1 MH inpatient and P1 SUD data, any Medicare financial participation should be accounted via a reduced Medicaid paid amount.

Mercer analyzed the unit cost data reported in P1 to confirm that no material differences were observed between dual eligible and Medicaid-only recipients. Based on Mercer's analysis and discussions with the State, it was determined that no adjustment is necessary for the SUD TARGET data, as Medicare participation for these types of services is minimal.

In the MH outpatient encounter data, for certain services and provider types, a portion of the medical expense for these individuals during CY 2015 was paid for by Medicare. As a result, an adjustment was necessary for these individuals to ensure the dollars included in this data book reflect only the portion of the service expense paid for by Medicaid. For those dual eligibles, the adjustment was applied to the impacted services and provider types and resulted in an overall downward adjustment of 0.6% to the MH outpatient data.

Inpatient Claim Data Adjustments for Certified Public Expenditure (CPE) Hospitals

The State provided a list of hospitals classified as CPE hospitals. Based on discussion with the State, these CPE hospitals typically cover the State portion of any Medicaid eligible service. As a result, the inpatient claim data provided to Mercer for these CPE hospitals will only include the Federal portion of those inpatient services. To ensure the data book reflects the full cost of the service provided, Mercer used applicable Federal Medical Assistance Percentage (FMAP) rates to estimate the State share of the service cost. This adjustment was applied to those CPE hospitals but resulted in an overall upward adjustment of 7.3% to the inpatient data.

6

CY 2015 Data Summaries

At the top of each page, the calendar year, BHO, and rate cell are listed. Below this information are the member months (MMs) associated with each rate cell. The final page for each BHO reflects the aggregate information across all rate cells.

The remaining columns on each page are described below:

- Service Modality As described in Section 2, each of the covered modalities is listed.
- Dollars This represents the results of the shadow pricing for the MH outpatient and E&T encounters as well as the actual claims payments for MH inpatient data for each service line item. Additionally, this represents the actual claims payments for P1 SUD data and the estimated costs for the TARGET SUD data (as described in Section 4) for each service line item.
- **Utilization** Utilization for each service line item. This represents the number of hours for MH outpatient hourly services, 15-minute units for SUD outpatient services or days (see chart in Section 3).
- Utilization Per 1,000 Annual utilization for each service divided by total eligible MMs multiplied by 12,000.
- Unit Cost Average cost of each service line item; expenses divided by the utilization of services delivered.
- **PMPM** Expenses divided by total MMs.

Year: CY 2015
BHO: Great Rivers
Rate Cell: Disabled
Age Group: Adults
Member Months: 104,769

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$1,504,862	2,596	297	\$579.65	\$14.36
E&T	\$625,676	771	88	\$811.51	\$5.97
Residential MH Service	\$88,141	395	45	\$223.14	\$0.84
Crisis Services	\$1,950,081	5,988	686	\$325.64	\$18.61
Crisis Services (per diem)	\$348,791	823	94	\$423.80	\$3.33
High Intensity Treatment	\$4,027	42	5	\$95.89	\$0.04
Day Support	\$17,110	1,111	127	\$15.40	\$0.16
Individual Treatment Services	\$1,241,196	8,286	949	\$149.79	\$11.85
Group Treatment Services	\$224,856	6,293	721	\$35.73	\$2.15
Family Treatment	\$6,970	44	5	\$159.55	\$0.07
Intake	\$292,860	1,523	174	\$192.25	\$2.80
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$419,124	2,408	276	\$174.09	\$4.00
Medication Monitoring	\$230,147	1,694	194	\$135.90	\$2.20
Rehab Case Management	\$34,670	235	27	\$147.54	\$0.33
Community Psych Services	\$1,278,350	10,174	1,165	\$125.65	\$12.20
Peer Support	\$26,272	350	40	\$75.06	\$0.25
Community Transition	\$44,626	255	29	\$175.00	\$0.43
Therapeutic Psychoeducation	\$91,604	948	109	\$96.65	\$0.87
Assessment	\$16,730	145	17	\$115.13	\$0.16
Detox	\$17,307	74	8	\$234.78	\$0.17
Outpatient	\$67,664	3,165	363	\$21.38	\$0.65
Outpatient - Group	\$226,040	38,680	4,430	\$5.84	\$2.16
Opiate Substitution Treatment	\$499,601	39,414	4,514	\$12.68	\$4.77
Residential	\$62,881	465	53	\$135.37	\$0.60
Mental Health (MH) Services Total	\$8,429,364	43,935	5,032	\$191.86	\$80.46
Substance Use Disorder (SUD) Services Total	\$890,223	81,942	9,385	\$10.86	\$8.50
Total	\$9,319,587	125,878	14,418	\$74.04	\$88.95

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Great Rivers
Rate Cell: Non-Disabled
Age Group: Adults
Member Months: 141,538

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$254,289	391	33	\$650.10	\$1.80
E&T	\$155,593	179	15	\$869.24	\$1.10
Residential MH Service	\$0	0	0	\$0.00	\$0.00
Crisis Services	\$287,751	873	74	\$329.46	\$2.03
Crisis Services (per diem)	\$28,921	40	3	\$723.02	\$0.20
High Intensity Treatment	\$278	9	1	\$30.89	\$0.00
Day Support	\$11,901	774	66	\$15.38	\$0.08
Individual Treatment Services	\$773,650	5,128	435	\$150.86	\$5.47
Group Treatment Services	\$73,719	1,905	161	\$38.70	\$0.52
Family Treatment	\$8,365	52	4	\$160.66	\$0.06
Intake	\$289,623	1,479	125	\$195.86	\$2.05
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$127,529	695	59	\$183.56	\$0.90
Medication Monitoring	\$23,498	175	15	\$134.57	\$0.17
Rehab Case Management	\$11,184	70	6	\$158.79	\$0.08
Community Psych Services	\$350,277	2,615	222	\$133.94	\$2.47
Peer Support	\$11,972	160	14	\$75.06	\$0.08
Community Transition	\$12,806	69	6	\$185.60	\$0.09
Therapeutic Psychoeducation	\$29,627	286	24	\$103.71	\$0.21
Assessment	\$31,657	273	23	\$116.05	\$0.22
Detox	\$40,364	174	15	\$232.51	\$0.29
Outpatient	\$108,354	5,549	470	\$19.53	\$0.77
Outpatient - Group	\$355,761	68,088	5,773	\$5.22	\$2.51
Opiate Substitution Treatment	\$589,050	47,261	4,007	\$12.46	\$4.16
Residential	\$268,687	2,246	190	\$119.62	\$1.90
Mental Health (MH) Services Total	\$2,450,984	14,899	1,263	\$164.50	\$17.32
Substance Use Disorder (SUD) Services Total	\$1,393,873	123,591	10,478	\$11.28	\$9.85
Total	\$3,844,858	138,491	11,742	\$27.76	\$27.16

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Great Rivers
Rate Cell: Disabled
Age Group: Children
Member Months: 39,122

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$137,931	122	37	\$1,131.32	\$3.53
E&T	\$29,000	35	11	\$828.56	\$0.74
Residential MH Service	\$0	0	0	\$0.00	\$0.00
Crisis Services	\$69,134	213	65	\$324.67	\$1.77
Crisis Services (per diem)	\$8,494	18	6	\$471.87	\$0.22
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$0	0	0	\$0.00	\$0.00
Individual Treatment Services	\$677,184	4,563	1,400	\$148.41	\$17.31
Group Treatment Services	\$30,699	675	207	\$45.47	\$0.78
Family Treatment	\$137,534	884	271	\$155.53	\$3.52
Intake	\$150,476	715	219	\$210.44	\$3.85
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$109,256	388	119	\$281.56	\$2.79
Medication Monitoring	\$2,052	15	5	\$138.64	\$0.05
Rehab Case Management	\$8,074	49	15	\$164.72	\$0.21
Community Psych Services	\$188,972	1,312	402	\$144.03	\$4.83
Peer Support	\$13,643	182	56	\$75.06	\$0.35
Community Transition	\$2,105	12	4	\$175.43	\$0.05
Therapeutic Psychoeducation	\$11,487	94	29	\$122.05	\$0.29
Assessment	\$6,768	44	13	\$154.50	\$0.17
Detox	\$913	4	1	\$233.13	\$0.02
Outpatient	\$20,788	1,052	323	\$19.76	\$0.53
Outpatient - Group	\$37,748	5,326	1,634	\$7.09	\$0.96
Opiate Substitution Treatment	\$5,762	673	207	\$8.56	\$0.15
Residential	\$77,212	436	134	\$177.00	\$1.97
Mental Health (MH) Services Total	\$1,576,041	9,277	2,846	\$169.89	\$40.29
Substance Use Disorder (SUD) Services Total	\$149,191	7,535	2,311	\$19.80	\$3.81
Total	\$1,725,231	16,812	5,157	\$102.62	\$44.10

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Great Rivers
Rate Cell: Non-Disabled
Age Group: Children
Member Months: 428,832

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$249,559	235	7	\$1,060.42	\$0.58
E&T	\$84,172	84	2	\$1,002.05	\$0.20
Residential MH Service	\$0	0	0	\$0.00	\$0.00
Crisis Services	\$251,775	799	22	\$314.94	\$0.59
Crisis Services (per diem)	\$19,529	46	1	\$424.54	\$0.05
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$0	0	0	\$0.00	\$0.00
Individual Treatment Services	\$2,034,683	13,905	389	\$146.33	\$4.74
Group Treatment Services	\$56,292	1,168	33	\$48.20	\$0.13
Family Treatment	\$314,295	2,040	57	\$154.08	\$0.73
Intake	\$636,441	3,130	88	\$203.33	\$1.48
Special Population Evaluation	\$185	1	0	\$185.07	\$0.00
Medication Management	\$179,411	641	18	\$280.00	\$0.42
Medication Monitoring	\$176	2	0	\$117.37	\$0.00
Rehab Case Management	\$45,622	249	7	\$182.88	\$0.11
Community Psych Services	\$328,233	2,171	61	\$151.21	\$0.77
Peer Support	\$31,325	412	12	\$76.08	\$0.07
Community Transition	\$2,082	11	0	\$189.29	\$0.00
Therapeutic Psychoeducation	\$41,262	337	9	\$122.42	\$0.10
Assessment	\$33,741	220	6	\$153.49	\$0.08
Detox	\$8,909	36	1	\$250.74	\$0.02
Outpatient	\$105,143	5,794	162	\$18.15	\$0.25
Outpatient - Group	\$224,262	36,758	1,029	\$6.10	\$0.52
Opiate Substitution Treatment	\$32,500	3,003	84	\$10.82	\$0.08
Residential	\$596,637	3,616	101	\$164.99	\$1.39
Mental Health (MH) Services Total	\$4,275,044	25,231	706	\$169.44	\$9.97
Substance Use Disorder (SUD) Services Total	\$1,001,192	49,426	1,383	\$20.26	\$2.33
Total	\$5,276,236	74,657	2,089	\$70.67	\$12.30

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Great Rivers
Rate Cell: Newly Eligible
Age Group: All
Member Months: 333,394

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$1,950,712	2,017	73	\$967.22	\$5.85
E&T	\$252,015	316	11	\$797.51	\$0.76
Residential MH Service	\$18,744	84	3	\$223.14	\$0.06
Crisis Services	\$1,207,757	3,677	132	\$328.42	\$3.62
Crisis Services (per diem)	\$247,797	438	16	\$565.75	\$0.74
High Intensity Treatment	\$93	3	0	\$30.89	\$0.00
Day Support	\$8,230	527	19	\$15.62	\$0.02
Individual Treatment Services	\$1,627,050	10,660	384	\$152.62	\$4.88
Group Treatment Services	\$124,483	2,989	108	\$41.64	\$0.37
Family Treatment	\$11,831	76	3	\$154.86	\$0.04
Intake	\$692,062	3,462	125	\$199.91	\$2.08
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$257,991	1,331	48	\$193.84	\$0.77
Medication Monitoring	\$14,386	112	4	\$128.60	\$0.04
Rehab Case Management	\$50,424	327	12	\$154.22	\$0.15
Community Psych Services	\$616,277	4,658	168	\$132.31	\$1.85
Peer Support	\$24,795	325	12	\$76.35	\$0.07
Community Transition	\$152,963	849	31	\$180.17	\$0.46
Therapeutic Psychoeducation	\$33,340	291	10	\$114.39	\$0.10
Assessment	\$113,890	995	36	\$114.41	\$0.34
Detox	\$185,817	753	27	\$246.81	\$0.56
Outpatient	\$454,861	20,921	753	\$21.74	\$1.36
Outpatient - Group	\$1,550,159	262,773	9,458	\$5.90	\$4.65
Opiate Substitution Treatment	\$1,374,600	110,783	3,987	\$12.41	\$4.12
Residential	\$451,882	3,520	127	\$128.36	\$1.36
Mental Health (MH) Services Total	\$7,290,950	32,143	1,157	\$226.83	\$21.87
Substance Use Disorder (SUD) Services Total	\$4,131,210	399,746	14,388	\$10.33	\$12.39
Total	\$11,422,160	431,889	15,545	\$26.45	\$34.26

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

 Year:
 CY 2015

 BHO:
 Great Rivers

 Rate Cell:
 All

 Age Group:
 All

 Member Months:
 1,047,655

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$4,097,354	5,361	61	\$764.23	\$3.91
E&T	\$1,146,455	1,385	16	\$827.77	\$1.09
Residential MH Service	\$106,885	479	5	\$223.14	\$0.10
Crisis Services	\$3,766,499	11,552	132	\$326.06	\$3.60
Crisis Services (per diem)	\$653,531	1,365	16	\$478.78	\$0.62
High Intensity Treatment	\$4,398	54	1	\$81.45	\$0.00
Day Support	\$37,241	2,412	28	\$15.44	\$0.04
Individual Treatment Services	\$6,353,764	42,543	487	\$149.35	\$6.06
Group Treatment Services	\$510,049	13,030	149	\$39.14	\$0.49
Family Treatment	\$478,996	3,096	35	\$154.70	\$0.46
Intake	\$2,061,463	10,309	118	\$199.96	\$1.97
Special Population Evaluation	\$185	1	0	\$185.07	\$0.00
Medication Management	\$1,093,311	5,462	63	\$200.17	\$1.04
Medication Monitoring	\$270,260	1,996	23	\$135.38	\$0.26
Rehab Case Management	\$149,974	931	11	\$161.12	\$0.14
Community Psych Services	\$2,762,109	20,930	240	\$131.97	\$2.64
Peer Support	\$108,007	1,428	16	\$75.65	\$0.10
Community Transition	\$214,582	1,196	14	\$179.42	\$0.20
Therapeutic Psychoeducation	\$207,321	1,956	22	\$105.98	\$0.20
Assessment	\$202,787	1,677	19	\$120.91	\$0.19
Detox	\$253,311	1,040	12	\$243.65	\$0.24
Outpatient	\$756,810	36,481	418	\$20.75	\$0.72
Outpatient - Group	\$2,393,970	411,626	4,715	\$5.82	\$2.29
Opiate Substitution Treatment	\$2,501,512	201,133	2,304	\$12.44	\$2.39
Residential	\$1,457,298	10,284	118	\$141.71	\$1.39
Mental Health (MH) Services Total	\$24,022,383	125,486	1,437	\$191.43	\$22.93
Substance Use Disorder (SUD) Services Total	\$7,565,689	662,241	7,585	\$11.42	\$7.22
Total	\$31,588,071	787,726	9,023	\$40.10	\$30.15

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Greater Columbia
Rate Cell: Disabled
Age Group: Adults
Member Months: 150,430

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$898,066	1,606	128	\$559.16	\$5.97
E&T	\$1,045,665	1,230	98	\$850.13	\$6.95
Residential MH Service	\$3,868,228	16,936	1,351	\$228.40	\$25.71
Crisis Services	\$1,862,797	8,802	702	\$211.64	\$12.38
Crisis Services (per diem)	\$121,362	593	47	\$204.66	\$0.81
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$331,348	19,686	1,570	\$16.83	\$2.20
Individual Treatment Services	\$1,636,436	12,335	984	\$132.66	\$10.88
Group Treatment Services	\$388,732	11,854	946	\$32.79	\$2.58
Family Treatment	\$9,296	62	5	\$150.75	\$0.06
Intake	\$246,557	1,349	108	\$182.80	\$1.64
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$734,075	4,709	376	\$155.88	\$4.88
Medication Monitoring	\$164,989	1,253	100	\$131.71	\$1.10
Rehab Case Management	\$100,917	734	59	\$137.50	\$0.67
Community Psych Services	\$1,658,066	13,467	1,074	\$123.12	\$11.02
Peer Support	\$129,322	1,963	157	\$65.89	\$0.86
Community Transition	\$2,470	23	2	\$107.38	\$0.02
Therapeutic Psychoeducation	\$264,082	2,670	213	\$98.92	\$1.76
Assessment	\$41,877	359	29	\$116.80	\$0.28
Detox	\$103,424	823	66	\$125.70	\$0.69
Outpatient	\$97,591	5,243	418	\$18.61	\$0.65
Outpatient - Group	\$196,633	39,128	3,121	\$5.03	\$1.31
Opiate Substitution Treatment	\$251,953	19,466	1,553	\$12.94	\$1.67
Residential	\$96,702	702	56	\$137.68	\$0.64
Mental Health (MH) Services Total	\$13,462,408	99,271	7,919	\$135.61	\$89.49
Substance Use Disorder (SUD) Services Total	\$788,179	65,720	5,243	\$11.99	\$5.24
Total	\$14,250,587	164,991	13,162	\$86.37	\$94.73

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015

BHO: Greater Columbia

Rate Cell: Non-Disabled

Age Group: Adults

Member Months: 324,289

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$222,915	543	20	\$410.85	\$0.69
E&T	\$298,856	356	13	\$839.48	\$0.92
Residential MH Service	\$622,729	2,245	83	\$277.38	\$1.92
Crisis Services	\$432,296	1,784	66	\$242.39	\$1.33
Crisis Services (per diem)	\$29,082	126	5	\$230.81	\$0.09
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$37,278	1,793	66	\$20.79	\$0.11
Individual Treatment Services	\$1,276,777	9,346	346	\$136.61	\$3.94
Group Treatment Services	\$74,069	1,756	65	\$42.18	\$0.23
Family Treatment	\$12,873	92	3	\$140.06	\$0.04
Intake	\$356,404	1,886	70	\$189.02	\$1.10
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$253,015	1,388	51	\$182.29	\$0.78
Medication Monitoring	\$5,588	41	2	\$135.19	\$0.02
Rehab Case Management	\$27,014	198	7	\$136.71	\$0.08
Community Psych Services	\$290,132	2,274	84	\$127.61	\$0.89
Peer Support	\$9,197	139	5	\$66.05	\$0.03
Community Transition	\$761	6	0	\$126.90	\$0.00
Therapeutic Psychoeducation	\$54,858	520	19	\$105.60	\$0.17
Assessment	\$82,355	691	26	\$119.14	\$0.25
Detox	\$52,980	411	15	\$128.79	\$0.16
Outpatient	\$259,003	14,211	526	\$18.23	\$0.80
Outpatient - Group	\$539,742	109,162	4,039	\$4.94	\$1.66
Opiate Substitution Treatment	\$156,068	12,074	447	\$12.93	\$0.48
Residential	\$1,224,491	9,255	342	\$132.31	\$3.78
Mental Health (MH) Services Total	\$4,003,845	24,491	906	\$163.48	\$12.35
Substance Use Disorder (SUD) Services Total	\$2,314,639	145,804	5,395	\$15.87	\$7.14
Total	\$6,318,484	170,295	6,302	\$37.10	\$19.48

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015

BHO: Greater Columbia

Rate Cell: Disabled

Age Group: Children

Member Months: 79,191

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$420,846	403	61	\$1,044.97	\$5.31
E&T	\$252,090	315	48	\$800.29	\$3.18
Residential MH Service	\$106,398	485	73	\$219.38	\$1.34
Crisis Services	\$186,326	770	117	\$241.98	\$2.35
Crisis Services (per diem)	\$5,598	32	5	\$174.93	\$0.07
High Intensity Treatment	\$36,176	323	49	\$112.09	\$0.46
Day Support	\$0	0	0	\$0.00	\$0.00
Individual Treatment Services	\$923,550	6,475	981	\$142.63	\$11.66
Group Treatment Services	\$59,972	1,523	231	\$39.36	\$0.76
Family Treatment	\$283,543	2,052	311	\$138.19	\$3.58
Intake	\$216,962	1,076	163	\$201.55	\$2.74
Special Population Evaluation	\$8,810	54	8	\$163.15	\$0.11
Medication Management	\$412,978	1,298	197	\$318.27	\$5.21
Medication Monitoring	\$5,556	42	6	\$131.24	\$0.07
Rehab Case Management	\$6,493	44	7	\$146.23	\$0.08
Community Psych Services	\$201,507	1,357	206	\$148.49	\$2.54
Peer Support	\$1,092	17	3	\$64.24	\$0.01
Community Transition	\$0	0	0	\$0.00	\$0.00
Therapeutic Psychoeducation	\$2,963	26	4	\$112.88	\$0.04
Assessment	\$12,183	110	17	\$110.91	\$0.15
Detox	\$4,356	27	4	\$159.56	\$0.06
Outpatient	\$47,349	2,725	413	\$17.38	\$0.60
Outpatient - Group	\$92,040	15,705	2,380	\$5.86	\$1.16
Opiate Substitution Treatment	\$298	24	4	\$12.29	\$0.00
Residential	\$150,932	891	135	\$169.36	\$1.91
Mental Health (MH) Services Total	\$3,130,859	16,293	2,469	\$192.16	\$39.54
Substance Use Disorder (SUD) Services Total	\$307,157	19,482	2,952	\$15.77	\$3.88
Total	\$3,438,016	35,775	5,421	\$96.10	\$43.41

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015

BHO: Greater Columbia

Rate Cell: Non-Disabled

Age Group: Children

Member Months: 1,460,530

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$399,151	414	3	\$963.39	\$0.27
E&T	\$1,100,203	1,372	11	\$801.90	\$0.75
Residential MH Service	\$64,636	170	1	\$380.21	\$0.04
Crisis Services	\$625,759	2,359	19	\$265.24	\$0.43
Crisis Services (per diem)	\$5,990	34	0	\$176.16	\$0.00
High Intensity Treatment	\$107,810	920	8	\$117.18	\$0.07
Day Support	\$0	0	0	\$0.00	\$0.00
Individual Treatment Services	\$2,791,779	20,209	166	\$138.15	\$1.91
Group Treatment Services	\$160,412	4,020	33	\$39.90	\$0.11
Family Treatment	\$678,535	4,930	41	\$137.63	\$0.46
Intake	\$962,840	5,108	42	\$188.51	\$0.66
Special Population Evaluation	\$64,394	395	3	\$163.02	\$0.04
Medication Management	\$670,719	2,073	17	\$323.60	\$0.46
Medication Monitoring	\$4,835	39	0	\$125.05	\$0.00
Rehab Case Management	\$20,202	131	1	\$153.74	\$0.01
Community Psych Services	\$390,702	2,640	22	\$147.99	\$0.27
Peer Support	\$3,135	51	0	\$62.07	\$0.00
Community Transition	\$106	1	0	\$105.94	\$0.00
Therapeutic Psychoeducation	\$33,948	255	2	\$133.39	\$0.02
Assessment	\$69,072	611	5	\$113.11	\$0.05
Detox	\$9,701	54	0	\$180.64	\$0.01
Outpatient	\$135,139	7,900	65	\$17.11	\$0.09
Outpatient - Group	\$346,109	57,797	475	\$5.99	\$0.24
Opiate Substitution Treatment	\$988	77	1	\$12.86	\$0.00
Residential	\$475,182	2,965	24	\$160.26	\$0.33
Mental Health (MH) Services Total	\$8,085,155	45,120	371	\$179.19	\$5.54
Substance Use Disorder (SUD) Services Total	\$1,036,191	69,402	570	\$14.93	\$0.71
Total	\$9,121,346	114,523	941	\$79.65	\$6.25

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015

BHO: Greater Columbia

Rate Cell: Newly Eligible

Age Group: All

Member Months: 750,503

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$1,574,428	2,224	36	\$707.97	\$2.10
E&T	\$1,082,309	1,286	21	\$841.61	\$1.44
Residential MH Service	\$2,441,633	7,376	118	\$331.02	\$3.25
Crisis Services	\$2,037,389	9,217	147	\$221.06	\$2.71
Crisis Services (per diem)	\$187,591	749	12	\$250.45	\$0.25
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$11,730	609	10	\$19.26	\$0.02
Individual Treatment Services	\$2,970,365	21,410	342	\$138.74	\$3.96
Group Treatment Services	\$368,804	9,859	158	\$37.41	\$0.49
Family Treatment	\$18,784	135	2	\$138.82	\$0.03
Intake	\$862,731	4,429	71	\$194.80	\$1.15
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$655,448	3,091	49	\$212.08	\$0.87
Medication Monitoring	\$11,457	93	1	\$123.24	\$0.02
Rehab Case Management	\$157,718	1,073	17	\$146.97	\$0.21
Community Psych Services	\$713,432	5,770	92	\$123.64	\$0.95
Peer Support	\$27,145	410	7	\$66.21	\$0.04
Community Transition	\$3,089	27	0	\$114.42	\$0.00
Therapeutic Psychoeducation	\$69,995	697	11	\$100.39	\$0.09
Assessment	\$254,618	2,198	35	\$115.83	\$0.34
Detox	\$309,571	2,368	38	\$130.74	\$0.41
Outpatient	\$865,912	43,799	700	\$19.77	\$1.15
Outpatient - Group	\$1,942,508	368,096	5,886	\$5.28	\$2.59
Opiate Substitution Treatment	\$240,150	18,565	297	\$12.94	\$0.32
Residential	\$770,100	6,222	99	\$123.78	\$1.03
Mental Health (MH) Services Total	\$13,194,048	68,455	1,095	\$192.74	\$17.58
Substance Use Disorder (SUD) Services Total	\$4,382,858	441,247	7,055	\$9.93	\$5.84
Total	\$17,576,906	509,702	8,150	\$34.48	\$23.42

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015

BHO: Greater Columbia

Rate Cell: All Age Group: All Member Months: 2,764,943

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$3,515,406	5,190	23	\$677.40	\$1.27
E&T	\$3,779,122	4,559	20	\$828.94	\$1.37
Residential MH Service	\$7,103,624	27,212	118	\$261.05	\$2.57
Crisis Services	\$5,144,568	22,931	100	\$224.35	\$1.86
Crisis Services (per diem)	\$349,622	1,534	7	\$227.92	\$0.13
High Intensity Treatment	\$143,986	1,243	5	\$115.86	\$0.05
Day Support	\$380,356	22,088	96	\$17.22	\$0.14
Individual Treatment Services	\$9,598,906	69,776	303	\$137.57	\$3.47
Group Treatment Services	\$1,051,989	29,013	126	\$36.26	\$0.38
Family Treatment	\$1,003,032	7,271	32	\$137.95	\$0.36
Intake	\$2,645,494	13,847	60	\$191.05	\$0.96
Special Population Evaluation	\$73,205	449	2	\$163.04	\$0.03
Medication Management	\$2,726,236	12,558	55	\$217.09	\$0.99
Medication Monitoring	\$192,425	1,468	6	\$131.09	\$0.07
Rehab Case Management	\$312,343	2,181	9	\$143.24	\$0.11
Community Psych Services	\$3,253,839	25,508	111	\$127.56	\$1.18
Peer Support	\$169,891	2,580	11	\$65.86	\$0.06
Community Transition	\$6,426	57	0	\$112.75	\$0.00
Therapeutic Psychoeducation	\$425,846	4,167	18	\$102.19	\$0.15
Assessment	\$460,104	3,968	17	\$115.94	\$0.17
Detox	\$480,031	3,683	16	\$130.34	\$0.17
Outpatient	\$1,404,993	73,878	321	\$19.02	\$0.51
Outpatient - Group	\$3,117,031	589,886	2,560	\$5.28	\$1.13
Opiate Substitution Treatment	\$649,458	50,206	218	\$12.94	\$0.23
Residential	\$2,717,407	20,035	87	\$135.63	\$0.98
Mental Health (MH) Services Total	\$41,876,315	253,630	1,101	\$165.11	\$15.15
Substance Use Disorder (SUD) Services Total	\$8,829,025	741,657	3,219	\$11.90	\$3.19
Total	\$50,705,339	995,287	4,320	\$50.95	\$18.34

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: King
Rate Cell: Disabled
Age Group: Adults
Member Months: 313,741

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$7,942,036	10,574	404	\$751.08	\$25.31
E&T	\$997,045	1,164	45	\$856.57	\$3.18
Residential MH Service	\$4,187,589	38,733	1,481	\$108.11	\$13.35
Crisis Services	\$1,112,128	4,569	175	\$243.41	\$3.54
Crisis Services (per diem)	\$200,807	2,001	77	\$100.35	\$0.64
High Intensity Treatment	\$980,964	32,601	1,247	\$30.09	\$3.13
Day Support	\$1,088,295	67,603	2,586	\$16.10	\$3.47
Individual Treatment Services	\$6,760,029	49,902	1,909	\$135.46	\$21.55
Group Treatment Services	\$1,678,487	39,238	1,501	\$42.78	\$5.35
Family Treatment	\$54,922	393	15	\$139.79	\$0.18
Intake	\$917,312	4,743	181	\$193.42	\$2.92
Special Population Evaluation	\$71,701	413	16	\$173.61	\$0.23
Medication Management	\$1,671,901	8,819	337	\$189.57	\$5.33
Medication Monitoring	\$405,314	3,053	117	\$132.76	\$1.29
Rehab Case Management	\$16,685	110	4	\$151.77	\$0.05
Community Psych Services	\$4,419,713	32,573	1,246	\$135.69	\$14.09
Peer Support	\$1,973,273	27,556	1,054	\$71.61	\$6.29
Community Transition	\$340	2	0	\$169.75	\$0.00
Therapeutic Psychoeducation	\$476,463	3,772	144	\$126.31	\$1.52
Assessment	\$61,118	594	23	\$102.89	\$0.19
Detox	\$75,253	285	11	\$264.46	\$0.24
Outpatient	\$436,823	23,730	908	\$18.41	\$1.39
Outpatient - Group	\$588,573	116,966	4,474	\$5.03	\$1.88
Opiate Substitution Treatment	\$4,951,057	392,670	15,019	\$12.61	\$15.78
Residential	\$137,668	908	35	\$151.59	\$0.44
Mental Health (MH) Services Total	\$34,955,002	327,818	12,538	\$106.63	\$111.41
Substance Use Disorder (SUD) Services Total	\$6,250,492	535,152	20,469	\$11.68	\$19.92
Total	\$41,205,493	862,971	33,007	\$47.75	\$131.34

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: King
Rate Cell: Non-Disabled
Age Group: Adults
Member Months: 673,450

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$995,077	3,177	57	\$313.24	\$1.48
E&T	\$249,219	314	6	\$793.69	\$0.37
Residential MH Service	\$1,668,926	16,041	286	\$104.04	\$2.48
Crisis Services	\$238,390	995	18	\$239.71	\$0.35
Crisis Services (per diem)	\$27,244	91	2	\$299.39	\$0.04
High Intensity Treatment	\$136,669	4,542	81	\$30.09	\$0.20
Day Support	\$266,056	15,371	274	\$17.31	\$0.40
Individual Treatment Services	\$3,760,186	27,301	486	\$137.73	\$5.58
Group Treatment Services	\$465,948	10,986	196	\$42.41	\$0.69
Family Treatment	\$84,926	605	11	\$140.44	\$0.13
Intake	\$933,789	4,810	86	\$194.14	\$1.39
Special Population Evaluation	\$76,875	435	8	\$176.72	\$0.11
Medication Management	\$529,932	2,956	53	\$179.28	\$0.79
Medication Monitoring	\$58,880	383	7	\$153.90	\$0.09
Rehab Case Management	\$6,343	48	1	\$133.07	\$0.01
Community Psych Services	\$2,443,794	16,775	299	\$145.69	\$3.63
Peer Support	\$253,930	3,546	63	\$71.61	\$0.38
Community Transition	\$0	0	0	\$0.00	\$0.00
Therapeutic Psychoeducation	\$361,346	2,992	53	\$120.77	\$0.54
Assessment	\$63,529	605	11	\$104.95	\$0.09
Detox	\$95,665	367	7	\$260.79	\$0.14
Outpatient	\$238,861	14,354	256	\$16.64	\$0.35
Outpatient - Group	\$539,328	107,354	1,913	\$5.02	\$0.80
Opiate Substitution Treatment	\$2,388,799	187,901	3,348	\$12.71	\$3.55
Residential	\$775,091	5,390	96	\$143.80	\$1.15
Mental Health (MH) Services Total	\$12,557,529	111,366	1,984	\$112.76	\$18.65
Substance Use Disorder (SUD) Services Total	\$4,101,273	315,972	5,630	\$12.98	\$6.09
Total	\$16,658,802	427,338	7,615	\$38.98	\$24.74

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: King
Rate Cell: Disabled
Age Group: Children
Member Months: 98,507

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$2,106,784	1,670	203	\$1,261.55	\$21.39
E&T	\$102,707	131	16	\$784.02	\$1.04
Residential MH Service	\$10,808	106	13	\$101.96	\$0.11
Crisis Services	\$127,476	515	63	\$247.77	\$1.29
Crisis Services (per diem)	\$5,200	14	2	\$371.41	\$0.05
High Intensity Treatment	\$10,448	347	42	\$30.11	\$0.11
Day Support	\$1,956	129	16	\$15.17	\$0.02
Individual Treatment Services	\$2,197,824	14,956	1,822	\$146.96	\$22.31
Group Treatment Services	\$89,437	1,756	214	\$50.93	\$0.91
Family Treatment	\$833,763	6,072	740	\$137.31	\$8.46
Intake	\$364,246	1,742	212	\$209.09	\$3.70
Special Population Evaluation	\$24,036	132	16	\$182.09	\$0.24
Medication Management	\$236,614	814	99	\$290.68	\$2.40
Medication Monitoring	\$9,734	46	6	\$212.76	\$0.10
Rehab Case Management	\$7,897	51	6	\$153.38	\$0.08
Community Psych Services	\$1,030,442	7,256	884	\$142.02	\$10.46
Peer Support	\$53,905	753	92	\$71.61	\$0.55
Community Transition	\$0	0	0	\$0.00	\$0.00
Therapeutic Psychoeducation	\$37,558	298	36	\$126.11	\$0.38
Assessment	\$9,379	85	10	\$110.75	\$0.10
Detox	\$15,536	67	8	\$231.89	\$0.16
Outpatient	\$67,987	4,188	510	\$16.24	\$0.69
Outpatient - Group	\$52,189	8,662	1,055	\$6.03	\$0.53
Opiate Substitution Treatment	\$30,280	3,021	368	\$10.02	\$0.31
Residential	\$122,169	696	85	\$175.42	\$1.24
Mental Health (MH) Services Total	\$7,250,835	36,787	4,481	\$197.10	\$73.61
Substance Use Disorder (SUD) Services Total	\$297,541	16,718	2,037	\$17.80	\$3.02
Total	\$7,548,377	53,505	6,518	\$141.08	\$76.63

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: King
Rate Cell: Non-Disabled
Age Group: Children
Member Months: 1,858,865

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$3,456,944	2,738	18	\$1,262.72	\$1.86
E&T	\$208,725	276	2	\$756.25	\$0.11
Residential MH Service	\$0	0	0	\$0.00	\$0.00
Crisis Services	\$270,091	1,125	7	\$240.08	\$0.15
Crisis Services (per diem)	\$6,424	47	0	\$136.68	\$0.00
High Intensity Treatment	\$2,543	20	0	\$125.57	\$0.00
Day Support	\$213	12	0	\$17.71	\$0.00
Individual Treatment Services	\$7,415,219	51,479	332	\$144.04	\$3.99
Group Treatment Services	\$240,586	4,956	32	\$48.55	\$0.13
Family Treatment	\$2,345,858	17,882	115	\$131.19	\$1.26
Intake	\$1,689,596	8,452	55	\$199.90	\$0.91
Special Population Evaluation	\$136,185	752	5	\$181.10	\$0.07
Medication Management	\$421,927	1,506	10	\$280.23	\$0.23
Medication Monitoring	\$14,143	66	0	\$214.82	\$0.01
Rehab Case Management	\$7,558	55	0	\$137.96	\$0.00
Community Psych Services	\$2,957,323	21,807	141	\$135.62	\$1.59
Peer Support	\$105,679	1,476	10	\$71.61	\$0.06
Community Transition	\$0	0	0	\$0.00	\$0.00
Therapeutic Psychoeducation	\$301,343	2,218	14	\$135.86	\$0.16
Assessment	\$53,910	481	3	\$112.01	\$0.03
Detox	\$69,149	315	2	\$219.44	\$0.04
Outpatient	\$269,284	15,999	103	\$16.83	\$0.14
Outpatient - Group	\$177,526	28,329	183	\$6.27	\$0.10
Opiate Substitution Treatment	\$49,031	4,566	29	\$10.74	\$0.03
Residential	\$608,912	3,894	25	\$156.35	\$0.33
Mental Health (MH) Services Total	\$19,580,356	114,866	742	\$170.46	\$10.53
Substance Use Disorder (SUD) Services Total	\$1,227,813	53,585	346	\$22.91	\$0.66
Total	\$20,808,169	168,450	1,087	\$123.53	\$11.19

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: King
Rate Cell: Newly Eligible
Age Group: All
Member Months: 1,681,461

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$9,040,451	11,377	81	\$794.63	\$5.38
E&T	\$1,176,257	1,429	10	\$823.13	\$0.70
Residential MH Service	\$232,464	2,147	15	\$108.27	\$0.14
Crisis Services	\$1,259,956	5,148	37	\$244.74	\$0.75
Crisis Services (per diem)	\$261,146	2,507	18	\$104.17	\$0.16
High Intensity Treatment	\$279,747	9,297	66	\$30.09	\$0.17
Day Support	\$250,801	15,497	111	\$16.18	\$0.15
Individual Treatment Services	\$8,534,336	60,966	435	\$139.99	\$5.08
Group Treatment Services	\$771,050	16,865	120	\$45.72	\$0.46
Family Treatment	\$80,086	584	4	\$137.05	\$0.05
Intake	\$2,990,828	14,312	102	\$208.97	\$1.78
Special Population Evaluation	\$89,827	501	4	\$179.30	\$0.05
Medication Management	\$1,402,567	5,795	41	\$242.03	\$0.83
Medication Monitoring	\$79,322	530	4	\$149.71	\$0.05
Rehab Case Management	\$23,437	169	1	\$138.98	\$0.01
Community Psych Services	\$2,916,898	20,513	146	\$142.20	\$1.73
Peer Support	\$534,982	7,471	53	\$71.61	\$0.32
Community Transition	\$3,325	20	0	\$166.25	\$0.00
Therapeutic Psychoeducation	\$228,363	1,714	12	\$133.21	\$0.14
Assessment	\$326,268	3,326	24	\$98.09	\$0.19
Detox	\$922,586	3,590	26	\$256.98	\$0.55
Outpatient	\$1,450,694	72,160	515	\$20.10	\$0.86
Outpatient - Group	\$2,743,217	494,771	3,531	\$5.54	\$1.63
Opiate Substitution Treatment	\$7,300,548	581,207	4,148	\$12.56	\$4.34
Residential	\$792,849	5,631	40	\$140.80	\$0.47
Mental Health (MH) Services Total	\$30,155,841	176,841	1,262	\$170.53	\$17.93
Substance Use Disorder (SUD) Services Total	\$13,536,164	1,160,686	8,283	\$11.66	\$8.05
Total	\$43,692,005	1,337,527	9,545	\$32.67	\$25.98

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

 Year:
 CY 2015

 BHO:
 King

 Rate Cell:
 All

 Age Group:
 All

 Member Months:
 4,626,024

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$23,541,292	29,535	77	\$797.05	\$5.09
E&T	\$2,733,953	3,314	9	\$824.97	\$0.59
Residential MH Service	\$6,099,786	57,027	148	\$106.96	\$1.32
Crisis Services	\$3,008,040	12,351	32	\$243.55	\$0.65
Crisis Services (per diem)	\$500,820	4,660	12	\$107.47	\$0.11
High Intensity Treatment	\$1,410,370	46,807	121	\$30.13	\$0.30
Day Support	\$1,607,321	98,612	256	\$16.30	\$0.35
Individual Treatment Services	\$28,667,595	204,604	531	\$140.11	\$6.20
Group Treatment Services	\$3,245,507	73,801	191	\$43.98	\$0.70
Family Treatment	\$3,399,556	25,536	66	\$133.13	\$0.73
Intake	\$6,895,771	34,059	88	\$202.47	\$1.49
Special Population Evaluation	\$398,625	2,233	6	\$178.52	\$0.09
Medication Management	\$4,262,940	19,890	52	\$214.33	\$0.92
Medication Monitoring	\$567,392	4,077	11	\$139.17	\$0.12
Rehab Case Management	\$61,919	433	1	\$143.17	\$0.01
Community Psych Services	\$13,768,171	98,922	257	\$139.18	\$2.98
Peer Support	\$2,921,768	40,801	106	\$71.61	\$0.63
Community Transition	\$3,664	22	0	\$166.57	\$0.00
Therapeutic Psychoeducation	\$1,405,073	10,994	29	\$127.80	\$0.30
Assessment	\$514,205	5,091	13	\$101.00	\$0.11
Detox	\$1,178,189	4,624	12	\$254.82	\$0.25
Outpatient	\$2,463,649	130,431	338	\$18.89	\$0.53
Outpatient - Group	\$4,100,833	756,082	1,961	\$5.42	\$0.89
Opiate Substitution Treatment	\$14,719,716	1,169,364	3,033	\$12.59	\$3.18
Residential	\$2,436,690	16,520	43	\$147.50	\$0.53
Mental Health (MH) Services Total	\$104,499,563	767,678	1,991	\$136.12	\$22.59
Substance Use Disorder (SUD) Services Total	\$25,413,282	2,082,112	5,401	\$12.21	\$5.49
Total	\$129,912,846	2,849,790	7,392	\$45.59	\$28.08

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015

BHO: North Central

Rate Cell: Disabled

Age Group: Adults

Member Months: 40,779

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$214,311	463	136	\$463.32	\$5.26
E&T	\$112,373	172	51	\$653.33	\$2.76
Residential MH Service	\$3,124	14	4	\$223.14	\$0.08
Crisis Services	\$636,267	3,196	940	\$199.08	\$15.60
Crisis Services (per diem)	\$4,588	12	4	\$382.33	\$0.11
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$38,741	2,577	758	\$15.03	\$0.95
Individual Treatment Services	\$496,591	4,277	1,259	\$116.10	\$12.18
Group Treatment Services	\$39,914	999	294	\$39.96	\$0.98
Family Treatment	\$2,555	19	6	\$135.08	\$0.06
Intake	\$82,843	454	134	\$182.42	\$2.03
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$178,081	913	269	\$195.07	\$4.37
Medication Monitoring	\$70,758	548	161	\$129.09	\$1.74
Rehab Case Management	\$57,208	461	136	\$124.04	\$1.40
Community Psych Services	\$563,928	4,746	1,397	\$118.82	\$13.83
Peer Support	\$91,116	1,361	401	\$66.95	\$2.23
Community Transition	\$0	0	0	\$0.00	\$0.00
Therapeutic Psychoeducation	\$12,817	146	43	\$88.09	\$0.31
Assessment	\$7,918	73	21	\$109.19	\$0.19
Detox	\$27,453	235	69	\$116.79	\$0.67
Outpatient	\$22,918	1,165	343	\$19.68	\$0.56
Outpatient - Group	\$49,723	9,744	2,867	\$5.10	\$1.22
Opiate Substitution Treatment	\$4,188	318	94	\$13.15	\$0.10
Residential	\$83,318	586	172	\$142.23	\$2.04
Mental Health (MH) Services Total	\$2,605,213	20,357	5,991	\$127.97	\$63.89
Substance Use Disorder (SUD) Services Total	\$195,518	12,121	3,567	\$16.13	\$4.79
Total	\$2,800,732	32,478	9,557	\$86.23	\$68.68

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: North Central
Rate Cell: Non-Disabled
Age Group: Adults
Member Months: 88,404

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$48,211	188	26	\$256.60	\$0.55
E&T	\$24,830	38	5	\$653.42	\$0.28
Residential MH Service	\$0	0	0	\$0.00	\$0.00
Crisis Services	\$159,229	709	96	\$224.64	\$1.80
Crisis Services (per diem)	\$0	0	0	\$0.00	\$0.00
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$3,676	245	33	\$15.00	\$0.04
Individual Treatment Services	\$237,450	1,909	259	\$124.36	\$2.69
Group Treatment Services	\$23,727	619	84	\$38.33	\$0.27
Family Treatment	\$3,250	24	3	\$137.73	\$0.04
Intake	\$90,034	478	65	\$188.22	\$1.02
Special Population Evaluation	\$163	1	0	\$163.15	\$0.00
Medication Management	\$36,086	178	24	\$202.92	\$0.41
Medication Monitoring	\$499	4	1	\$132.95	\$0.01
Rehab Case Management	\$20,247	153	21	\$132.55	\$0.23
Community Psych Services	\$118,300	1,009	137	\$117.27	\$1.34
Peer Support	\$17,122	256	35	\$66.95	\$0.19
Community Transition	\$0	0	0	\$0.00	\$0.00
Therapeutic Psychoeducation	\$263	3	0	\$87.56	\$0.00
Assessment	\$14,016	130	18	\$107.93	\$0.16
Detox	\$15,011	125	17	\$119.96	\$0.17
Outpatient	\$33,360	1,670	227	\$19.98	\$0.38
Outpatient - Group	\$79,038	15,181	2,061	\$5.21	\$0.89
Opiate Substitution Treatment	\$7,435	626	85	\$11.88	\$0.08
Residential	\$159,814	1,304	177	\$122.55	\$1.81
Mental Health (MH) Services Total	\$783,085	5,813	789	\$134.72	\$8.86
Substance Use Disorder (SUD) Services Total	\$308,675	19,037	2,584	\$16.21	\$3.49
Total	\$1,091,760	24,850	3,373	\$43.93	\$12.35

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: North Central
Rate Cell: Disabled
Age Group: Children
Member Months: 20,130

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$201,744	252	150	\$799.41	\$10.02
E&T	\$0	0	0	\$0.00	\$0.00
Residential MH Service	\$0	0	0	\$0.00	\$0.00
Crisis Services	\$70,085	248	148	\$282.60	\$3.48
Crisis Services (per diem)	\$382	1	1	\$382.33	\$0.02
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$0	0	0	\$0.00	\$0.00
Individual Treatment Services	\$227,740	1,756	1,047	\$129.68	\$11.31
Group Treatment Services	\$1,051	23	14	\$45.19	\$0.05
Family Treatment	\$57,175	436	260	\$131.10	\$2.84
Intake	\$55,307	302	180	\$183.43	\$2.75
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$25,721	89	53	\$288.73	\$1.28
Medication Monitoring	\$33	0	0	\$132.95	\$0.00
Rehab Case Management	\$3,295	24	14	\$136.82	\$0.16
Community Psych Services	\$130,364	1,044	622	\$124.93	\$6.48
Peer Support	\$3,213	48	29	\$66.95	\$0.16
Community Transition	\$0	0	0	\$0.00	\$0.00
Therapeutic Psychoeducation	\$0	0	0	\$0.00	\$0.00
Assessment	\$5,637	54	32	\$103.96	\$0.28
Detox	\$975	8	4	\$130.03	\$0.05
Outpatient	\$23,143	1,286	767	\$17.99	\$1.15
Outpatient - Group	\$48,970	8,101	4,829	\$6.05	\$2.43
Opiate Substitution Treatment	\$13	1	1	\$10.66	\$0.00
Residential	\$29,048	164	98	\$177.04	\$1.44
Mental Health (MH) Services Total	\$776,110	4,223	2,518	\$183.76	\$38.55
Substance Use Disorder (SUD) Services Total	\$107,786	9,614	5,731	\$11.21	\$5.35
Total	\$883,896	13,837	8,249	\$63.88	\$43.91

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: North Central
Rate Cell: Non-Disabled
Age Group: Children
Member Months: 455,546

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$175,946	199	5	\$883.53	\$0.39
E&T	\$20,400	22	1	\$927.29	\$0.04
Residential MH Service	\$0	0	0	\$0.00	\$0.00
Crisis Services	\$209,375	798	21	\$262.41	\$0.46
Crisis Services (per diem)	\$0	0	0	\$0.00	\$0.00
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$196	13	0	\$15.05	\$0.00
Individual Treatment Services	\$768,874	6,060	160	\$126.88	\$1.69
Group Treatment Services	\$13,007	296	8	\$43.88	\$0.03
Family Treatment	\$172,656	1,366	36	\$126.36	\$0.38
Intake	\$271,172	1,563	41	\$173.44	\$0.60
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$44,523	172	5	\$259.61	\$0.10
Medication Monitoring	\$112	1	0	\$149.73	\$0.00
Rehab Case Management	\$16,085	109	3	\$148.20	\$0.04
Community Psych Services	\$343,509	2,835	75	\$121.19	\$0.75
Peer Support	\$9,892	148	4	\$66.95	\$0.02
Community Transition	\$0	0	0	\$0.00	\$0.00
Therapeutic Psychoeducation	\$0	0	0	\$0.00	\$0.00
Assessment	\$22,612	203	5	\$111.66	\$0.05
Detox	\$4,153	23	1	\$183.15	\$0.01
Outpatient	\$44,506	2,299	61	\$19.36	\$0.10
Outpatient - Group	\$50,847	8,097	213	\$6.28	\$0.11
Opiate Substitution Treatment	\$665	87	2	\$7.66	\$0.00
Residential	\$260,540	1,701	45	\$153.17	\$0.57
Mental Health (MH) Services Total	\$2,045,746	13,581	358	\$150.63	\$4.49
Substance Use Disorder (SUD) Services Total	\$383,323	12,409	327	\$30.89	\$0.84
Total	\$2,429,069	25,990	685	\$93.46	\$5.33

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015

BHO: North Central

Rate Cell: Newly Eligible

Age Group: All

Member Months: 211,359

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$444,031	582	33	\$762.72	\$2.10
E&T	\$98,254	139	8	\$706.86	\$0.46
Residential MH Service	\$7,960	62	4	\$128.38	\$0.04
Crisis Services	\$584,603	2,623	149	\$222.88	\$2.77
Crisis Services (per diem)	\$14,792	36	2	\$410.88	\$0.07
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$14,510	963	55	\$15.07	\$0.07
Individual Treatment Services	\$579,774	4,519	257	\$128.29	\$2.74
Group Treatment Services	\$30,567	773	44	\$39.52	\$0.14
Family Treatment	\$5,990	47	3	\$128.36	\$0.03
Intake	\$220,858	1,133	64	\$194.92	\$1.04
Special Population Evaluation	\$163	1	0	\$163.15	\$0.00
Medication Management	\$132,256	555	32	\$238.34	\$0.63
Medication Monitoring	\$34,799	267	15	\$130.49	\$0.16
Rehab Case Management	\$70,627	521	30	\$135.56	\$0.33
Community Psych Services	\$309,345	2,681	152	\$115.38	\$1.46
Peer Support	\$19,816	296	17	\$66.95	\$0.09
Community Transition	\$106	1	0	\$105.94	\$0.00
Therapeutic Psychoeducation	\$3,600	40	2	\$90.00	\$0.02
Assessment	\$64,462	623	35	\$103.49	\$0.30
Detox	\$123,665	980	56	\$126.15	\$0.59
Outpatient	\$156,870	7,419	421	\$21.14	\$0.74
Outpatient - Group	\$337,681	60,799	3,452	\$5.55	\$1.60
Opiate Substitution Treatment	\$13,124	1,072	61	\$12.25	\$0.06
Residential	\$292,283	2,102	119	\$139.06	\$1.38
Mental Health (MH) Services Total	\$2,572,051	15,239	865	\$168.78	\$12.17
Substance Use Disorder (SUD) Services Total	\$988,086	72,995	4,144	\$13.54	\$4.67
Total	\$3,560,137	88,234	5,010	\$40.35	\$16.84

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

 Year:
 CY 2015

 BHO:
 North Central

 Rate Cell:
 All

 Age Group:
 All

 Member Months:
 816,218

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$1,084,242	1,684	25	\$643.81	\$1.33
E&T	\$255,857	371	5	\$689.64	\$0.31
Residential MH Service	\$11,084	76	1	\$145.84	\$0.01
Crisis Services	\$1,659,559	7,574	111	\$219.12	\$2.03
Crisis Services (per diem)	\$19,762	49	1	\$403.31	\$0.02
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$57,122	3,798	56	\$15.04	\$0.07
Individual Treatment Services	\$2,310,428	18,522	272	\$124.74	\$2.83
Group Treatment Services	\$108,265	2,711	40	\$39.93	\$0.13
Family Treatment	\$241,627	1,892	28	\$127.73	\$0.30
Intake	\$720,214	3,931	58	\$183.24	\$0.88
Special Population Evaluation	\$326	2	0	\$163.15	\$0.00
Medication Management	\$416,667	1,906	28	\$218.58	\$0.51
Medication Monitoring	\$106,201	820	12	\$129.58	\$0.13
Rehab Case Management	\$167,462	1,268	19	\$132.11	\$0.21
Community Psych Services	\$1,465,446	12,314	181	\$119.01	\$1.80
Peer Support	\$141,159	2,109	31	\$66.95	\$0.17
Community Transition	\$106	1	0	\$105.94	\$0.00
Therapeutic Psychoeducation	\$16,679	189	3	\$88.48	\$0.02
Assessment	\$114,646	1,082	16	\$105.95	\$0.14
Detox	\$171,258	1,371	20	\$124.94	\$0.21
Outpatient	\$280,797	13,839	203	\$20.29	\$0.34
Outpatient - Group	\$566,260	101,923	1,498	\$5.56	\$0.69
Opiate Substitution Treatment	\$25,425	2,104	31	\$12.08	\$0.03
Residential	\$825,003	5,857	86	\$140.86	\$1.01
Mental Health (MH) Services Total	\$8,782,205	59,214	871	\$148.31	\$10.76
Substance Use Disorder (SUD) Services Total	\$1,983,388	126,176	1,855	\$15.72	\$2.43
Total	\$10,765,593	185,390	2,726	\$58.07	\$13.19

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015

BHO: North Sound

Rate Cell: Disabled

Age Group: Adults

Member Months: 195,304

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$4,128,986	7,046	433	\$585.98	\$21.14
E&T	\$1,341,511	1,971	121	\$680.62	\$6.87
Residential MH Service	\$2,879,439	24,334	1,495	\$118.33	\$14.74
Crisis Services	\$825,929	2,880	177	\$286.78	\$4.23
Crisis Services (per diem)	\$987,862	1,932	119	\$511.32	\$5.06
High Intensity Treatment	\$1,414	32	2	\$44.20	\$0.01
Day Support	\$1,137	75	5	\$15.17	\$0.01
Individual Treatment Services	\$3,834,333	27,210	1,672	\$140.92	\$19.63
Group Treatment Services	\$240,685	5,449	335	\$44.17	\$1.23
Family Treatment	\$11,563	77	5	\$149.27	\$0.06
Intake	\$283,149	1,485	91	\$190.63	\$1.45
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$932,980	4,526	278	\$206.15	\$4.78
Medication Monitoring	\$265,711	1,947	120	\$136.47	\$1.36
Rehab Case Management	\$50,940	333	20	\$153.13	\$0.26
Community Psych Services	\$4,081,056	32,607	2,003	\$125.16	\$20.90
Peer Support	\$174,562	2,280	140	\$76.55	\$0.89
Community Transition	\$1,101	10	1	\$110.10	\$0.01
Therapeutic Psychoeducation	\$269,258	2,536	156	\$106.16	\$1.38
Assessment	\$36,453	317	19	\$115.04	\$0.19
Detox	\$121,815	760	47	\$160.20	\$0.62
Outpatient	\$129,491	7,480	460	\$17.31	\$0.66
Outpatient - Group	\$230,968	44,504	2,734	\$5.19	\$1.18
Opiate Substitution Treatment	\$874,686	67,830	4,168	\$12.90	\$4.48
Residential	\$77,332	564	35	\$137.05	\$0.40
Mental Health (MH) Services Total	\$20,311,617	116,731	7,172	\$174.00	\$104.00
Substance Use Disorder (SUD) Services Total	\$1,470,746	121,455	7,463	\$12.11	\$7.53
Total	\$21,782,363	238,186	14,635	\$91.45	\$111.53

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: North Sound
Rate Cell: Non-Disabled
Age Group: Adults
Member Months: 389,570

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$1,063,756	1,931	59	\$550.75	\$2.73
E&T	\$171,007	230	7	\$743.51	\$0.44
Residential MH Service	\$209,218	1,361	42	\$153.72	\$0.54
Crisis Services	\$239,158	820	25	\$291.60	\$0.61
Crisis Services (per diem)	\$152,236	323	10	\$471.32	\$0.39
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$76	5	0	\$15.17	\$0.00
Individual Treatment Services	\$2,166,671	15,034	463	\$144.12	\$5.56
Group Treatment Services	\$93,885	2,042	63	\$45.99	\$0.24
Family Treatment	\$7,606	51	2	\$148.74	\$0.02
Intake	\$268,765	1,415	44	\$189.97	\$0.69
Special Population Evaluation	\$180	1	0	\$180.20	\$0.00
Medication Management	\$301,520	1,382	43	\$218.11	\$0.77
Medication Monitoring	\$12,679	92	3	\$138.49	\$0.03
Rehab Case Management	\$84,653	771	24	\$109.73	\$0.22
Community Psych Services	\$912,410	7,019	216	\$129.99	\$2.34
Peer Support	\$28,591	372	11	\$76.96	\$0.07
Community Transition	\$0	0	0	\$0.00	\$0.00
Therapeutic Psychoeducation	\$51,600	438	13	\$117.74	\$0.13
Assessment	\$74,758	629	19	\$118.93	\$0.19
Detox	\$153,770	775	24	\$198.48	\$0.39
Outpatient	\$279,810	16,987	523	\$16.47	\$0.72
Outpatient - Group	\$569,998	114,464	3,526	\$4.98	\$1.46
Opiate Substitution Treatment	\$1,171,409	90,955	2,802	\$12.88	\$3.01
Residential	\$725,665	5,543	171	\$130.91	\$1.86
Mental Health (MH) Services Total	\$5,764,011	33,287	1,025	\$173.16	\$14.80
Substance Use Disorder (SUD) Services Total	\$2,975,410	229,352	7,065	\$12.97	\$7.64
Total	\$8,739,421	262,639	8,090	\$33.28	\$22.43

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: North Sound
Rate Cell: Disabled
Age Group: Children
Member Months: 80,728

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$624,550	502	75	\$1,243.45	\$7.74
E&T	\$45,455	46	7	\$988.15	\$0.56
Residential MH Service	\$6,167	81	12	\$76.13	\$0.08
Crisis Services	\$82,060	288	43	\$284.68	\$1.02
Crisis Services (per diem)	\$12,588	26	4	\$484.15	\$0.16
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$0	0	0	\$0.00	\$0.00
Individual Treatment Services	\$1,314,087	9,129	1,357	\$143.95	\$16.28
Group Treatment Services	\$48,121	1,166	173	\$41.27	\$0.60
Family Treatment	\$527,437	3,529	525	\$149.47	\$6.53
Intake	\$130,943	633	94	\$206.84	\$1.62
Special Population Evaluation	\$552	3	0	\$184.14	\$0.01
Medication Management	\$170,617	550	82	\$310.40	\$2.11
Medication Monitoring	\$1,680	11	2	\$146.76	\$0.02
Rehab Case Management	\$3,928	23	3	\$173.15	\$0.05
Community Psych Services	\$534,398	4,124	613	\$129.59	\$6.62
Peer Support	\$2,572	35	5	\$73.49	\$0.03
Community Transition	\$110	1	0	\$110.10	\$0.00
Therapeutic Psychoeducation	\$5,860	59	9	\$98.62	\$0.07
Assessment	\$6,687	59	9	\$113.25	\$0.08
Detox	\$11,003	55	8	\$201.20	\$0.14
Outpatient	\$29,713	1,913	284	\$15.53	\$0.37
Outpatient - Group	\$41,235	6,470	962	\$6.37	\$0.51
Opiate Substitution Treatment	\$6,620	519	77	\$12.77	\$0.08
Residential	\$157,882	961	143	\$164.27	\$1.96
Mental Health (MH) Services Total	\$3,511,125	20,206	3,004	\$173.77	\$43.49
Substance Use Disorder (SUD) Services Total	\$253,141	9,976	1,483	\$25.37	\$3.14
Total	\$3,764,266	30,182	4,487	\$124.72	\$46.63

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: North Sound
Rate Cell: Non-Disabled
Age Group: Children
Member Months: 1,294,755

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$2,239,975	2,160	20	\$1,037.26	\$1.73
E&T	\$121,115	127	1	\$953.66	\$0.09
Residential MH Service	\$10,354	136	1	\$76.13	\$0.01
Crisis Services	\$325,810	1,115	10	\$292.33	\$0.25
Crisis Services (per diem)	\$30,122	59	1	\$510.54	\$0.02
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$0	0	0	\$0.00	\$0.00
Individual Treatment Services	\$4,383,936	30,926	287	\$141.76	\$3.39
Group Treatment Services	\$71,355	1,759	16	\$40.57	\$0.06
Family Treatment	\$1,517,983	10,236	95	\$148.30	\$1.17
Intake	\$541,764	2,678	25	\$202.33	\$0.42
Special Population Evaluation	\$721	4	0	\$180.20	\$0.00
Medication Management	\$317,130	1,038	10	\$305.52	\$0.24
Medication Monitoring	\$310	3	0	\$121.64	\$0.00
Rehab Case Management	\$8,404	51	0	\$166.25	\$0.01
Community Psych Services	\$810,769	5,751	53	\$140.99	\$0.63
Peer Support	\$3,406	46	0	\$74.44	\$0.00
Community Transition	\$302	2	0	\$151.06	\$0.00
Therapeutic Psychoeducation	\$6,318	60	1	\$105.98	\$0.00
Assessment	\$54,772	477	4	\$114.73	\$0.04
Detox	\$45,963	245	2	\$187.91	\$0.04
Outpatient	\$262,759	16,737	155	\$15.70	\$0.20
Outpatient - Group	\$370,012	60,420	560	\$6.12	\$0.29
Opiate Substitution Treatment	\$23,818	1,919	18	\$12.41	\$0.02
Residential	\$685,109	4,198	39	\$163.20	\$0.53
Mental Health (MH) Services Total	\$10,389,772	56,147	520	\$185.04	\$8.02
Substance Use Disorder (SUD) Services Total	\$1,442,432	83,996	778	\$17.17	\$1.11
Total	\$11,832,204	140,144	1,299	\$84.43	\$9.14

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015

BHO: North Sound

Rate Cell: Newly Eligible

Age Group: All

Member Months: 988,067

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$6,019,948	7,576	92	\$794.66	\$6.09
E&T	\$1,051,195	1,487	18	\$706.92	\$1.06
Residential MH Service	\$594,079	3,889	47	\$152.76	\$0.60
Crisis Services	\$960,685	3,354	41	\$286.45	\$0.97
Crisis Services (per diem)	\$1,070,706	2,116	26	\$506.00	\$1.08
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$101	4	0	\$25.35	\$0.00
Individual Treatment Services	\$5,798,592	40,050	486	\$144.78	\$5.87
Group Treatment Services	\$234,813	4,994	61	\$47.02	\$0.24
Family Treatment	\$22,365	157	2	\$142.51	\$0.02
Intake	\$754,107	3,829	46	\$196.96	\$0.76
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$909,796	3,672	45	\$247.75	\$0.92
Medication Monitoring	\$43,068	310	4	\$138.91	\$0.04
Rehab Case Management	\$57,036	447	5	\$127.54	\$0.06
Community Psych Services	\$2,408,190	19,332	235	\$124.57	\$2.44
Peer Support	\$85,996	1,115	14	\$77.14	\$0.09
Community Transition	\$4,686	29	0	\$161.59	\$0.00
Therapeutic Psychoeducation	\$131,782	1,240	15	\$106.32	\$0.13
Assessment	\$289,226	2,500	30	\$115.69	\$0.29
Detox	\$1,103,272	5,261	64	\$209.70	\$1.12
Outpatient	\$1,328,769	65,983	801	\$20.14	\$1.34
Outpatient - Group	\$2,654,856	464,648	5,643	\$5.71	\$2.69
Opiate Substitution Treatment	\$2,136,912	165,615	2,011	\$12.90	\$2.16
Residential	\$1,241,114	9,294	113	\$133.53	\$1.26
Mental Health (MH) Services Total	\$20,147,145	93,600	1,137	\$215.25	\$20.39
Substance Use Disorder (SUD) Services Total	\$8,754,148	713,301	8,663	\$12.27	\$8.86
Total	\$28,901,294	806,901	9,800	\$35.82	\$29.25

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

 Year:
 CY 2015

 BHO:
 North Sound

 Rate Cell:
 All

 Age Group:
 All

 Member Months:
 2,948,424

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$14,077,215	19,215	78	\$732.61	\$4.77
E&T	\$2,730,283	3,861	16	\$707.14	\$0.93
Residential MH Service	\$3,699,256	29,801	121	\$124.13	\$1.25
Crisis Services	\$2,433,642	8,457	34	\$287.78	\$0.83
Crisis Services (per diem)	\$2,253,513	4,456	18	\$505.73	\$0.76
High Intensity Treatment	\$1,414	32	0	\$44.20	\$0.00
Day Support	\$1,315	84	0	\$15.65	\$0.00
Individual Treatment Services	\$17,497,618	122,347	498	\$143.02	\$5.93
Group Treatment Services	\$688,859	15,410	63	\$44.70	\$0.23
Family Treatment	\$2,086,954	14,050	57	\$148.53	\$0.71
Intake	\$1,978,728	10,040	41	\$197.09	\$0.67
Special Population Evaluation	\$1,453	8	0	\$181.68	\$0.00
Medication Management	\$2,632,044	11,168	45	\$235.68	\$0.89
Medication Monitoring	\$323,448	2,363	10	\$136.90	\$0.11
Rehab Case Management	\$204,959	1,625	7	\$126.17	\$0.07
Community Psych Services	\$8,746,823	68,833	280	\$127.07	\$2.97
Peer Support	\$295,126	3,847	16	\$76.71	\$0.10
Community Transition	\$6,199	42	0	\$147.60	\$0.00
Therapeutic Psychoeducation	\$464,819	4,333	18	\$107.27	\$0.16
Assessment	\$461,896	3,982	16	\$116.00	\$0.16
Detox	\$1,435,823	7,096	29	\$202.36	\$0.49
Outpatient	\$2,030,542	109,100	444	\$18.61	\$0.69
Outpatient - Group	\$3,867,069	690,506	2,810	\$5.60	\$1.31
Opiate Substitution Treatment	\$4,213,444	326,837	1,330	\$12.89	\$1.43
Residential	\$2,887,102	20,561	84	\$140.42	\$0.98
Mental Health (MH) Services Total	\$60,123,671	319,970	1,302	\$187.90	\$20.39
Substance Use Disorder (SUD) Services Total	\$14,895,877	1,158,081	4,713	\$12.86	\$5.05
Total	\$75,019,548	1,478,051	6,016	\$50.76	\$25.44

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Pierce
Rate Cell: Disabled
Age Group: Adults
Member Months: 193,868

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$882,986	1,800	111	\$490.45	\$4.55
E&T	\$6,052,038	6,547	405	\$924.40	\$31.22
Residential MH Service	\$4,567,062	28,128	1,741	\$162.37	\$23.56
Crisis Services	\$3,014,223	11,850	733	\$254.37	\$15.55
Crisis Services (per diem)	\$904,915	1,959	121	\$461.93	\$4.67
High Intensity Treatment	\$299	2	0	\$149.58	\$0.00
Day Support	\$0	0	0	\$0.00	\$0.00
Individual Treatment Services	\$3,591,832	29,784	1,844	\$120.60	\$18.53
Group Treatment Services	\$236,915	5,796	359	\$40.88	\$1.22
Family Treatment	\$60,734	486	30	\$125.03	\$0.31
Intake	\$498,922	2,665	165	\$187.22	\$2.57
Special Population Evaluation	\$1,802	10	1	\$180.20	\$0.01
Medication Management	\$487,124	3,016	187	\$161.53	\$2.51
Medication Monitoring	\$97,008	706	44	\$137.31	\$0.50
Rehab Case Management	\$149,625	1,238	77	\$120.88	\$0.77
Community Psych Services	\$1,716,032	14,056	870	\$122.08	\$8.85
Peer Support	\$1,401,322	19,569	1,211	\$71.61	\$7.23
Community Transition	\$399	4	0	\$99.64	\$0.00
Therapeutic Psychoeducation	\$43,248	475	29	\$91.12	\$0.22
Assessment	\$29,181	251	16	\$116.28	\$0.15
Detox	\$60,071	248	15	\$242.03	\$0.31
Outpatient	\$77,229	4,047	250	\$19.08	\$0.40
Outpatient - Group	\$213,937	38,720	2,397	\$5.53	\$1.10
Opiate Substitution Treatment	\$1,043,445	79,488	4,920	\$13.13	\$5.38
Residential	\$59,615	364	23	\$163.63	\$0.31
Mental Health (MH) Services Total	\$23,706,487	128,090	7,928	\$185.08	\$122.28
Substance Use Disorder (SUD) Services Total	\$1,483,478	123,119	7,621	\$12.05	\$7.65
Total	\$25,189,964	251,209	15,549	\$100.27	\$129.93

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Pierce
Rate Cell: Non-Disabled
Age Group: Adults
Member Months: 344,117

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$280,118	551	19	\$508.05	\$0.81
E&T	\$574,131	627	22	\$915.68	\$1.67
Residential MH Service	\$367,887	2,397	84	\$153.48	\$1.07
Crisis Services	\$503,481	2,012	70	\$250.21	\$1.46
Crisis Services (per diem)	\$84,969	190	7	\$447.20	\$0.25
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$0	0	0	\$0.00	\$0.00
Individual Treatment Services	\$1,956,939	15,409	537	\$127.00	\$5.69
Group Treatment Services	\$82,453	1,908	67	\$43.21	\$0.24
Family Treatment	\$23,777	189	7	\$126.08	\$0.07
Intake	\$449,234	2,378	83	\$188.95	\$1.31
Special Population Evaluation	\$180	1	0	\$180.20	\$0.00
Medication Management	\$104,932	594	21	\$176.68	\$0.30
Medication Monitoring	\$11,115	82	3	\$135.69	\$0.03
Rehab Case Management	\$29,355	230	8	\$127.37	\$0.09
Community Psych Services	\$321,921	2,452	85	\$131.32	\$0.94
Peer Support	\$193,491	2,702	94	\$71.61	\$0.56
Community Transition	\$0	0	0	\$0.00	\$0.00
Therapeutic Psychoeducation	\$2,299	23	1	\$98.88	\$0.01
Assessment	\$55,969	469	16	\$119.22	\$0.16
Detox	\$108,902	448	16	\$243.06	\$0.32
Outpatient	\$156,008	9,196	321	\$16.96	\$0.45
Outpatient - Group	\$383,809	75,663	2,639	\$5.07	\$1.12
Opiate Substitution Treatment	\$1,137,938	86,286	3,009	\$13.19	\$3.31
Residential	\$254,611	1,967	69	\$129.44	\$0.74
Mental Health (MH) Services Total	\$4,986,281	31,744	1,107	\$157.08	\$14.49
Substance Use Disorder (SUD) Services Total	\$2,097,237	174,030	6,069	\$12.05	\$6.09
Total	\$7,083,518	205,774	7,176	\$34.42	\$20.58

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Pierce
Rate Cell: Disabled
Age Group: Children
Member Months: 77,341

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$250,213	242	38	\$1,032.81	\$3.24
E&T	\$189,308	199	31	\$951.30	\$2.45
Residential MH Service	\$63,755	351	54	\$181.64	\$0.82
Crisis Services	\$169,308	798	124	\$212.23	\$2.19
Crisis Services (per diem)	\$13,548	28	4	\$483.86	\$0.18
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$0	0	0	\$0.00	\$0.00
Individual Treatment Services	\$1,104,556	8,188	1,270	\$134.90	\$14.28
Group Treatment Services	\$6,885	156	24	\$44.16	\$0.09
Family Treatment	\$476,927	3,583	556	\$133.12	\$6.17
Intake	\$224,551	1,103	171	\$203.61	\$2.90
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$67,848	232	36	\$291.82	\$0.88
Medication Monitoring	\$2,470	14	2	\$182.99	\$0.03
Rehab Case Management	\$37,125	276	43	\$134.44	\$0.48
Community Psych Services	\$235,623	1,629	253	\$144.62	\$3.05
Peer Support	\$85,037	1,188	184	\$71.61	\$1.10
Community Transition	\$0	0	0	\$0.00	\$0.00
Therapeutic Psychoeducation	\$486	4	1	\$121.56	\$0.01
Assessment	\$3,523	29	5	\$119.48	\$0.05
Detox	\$8,989	31	5	\$290.65	\$0.12
Outpatient	\$24,070	1,396	217	\$17.24	\$0.31
Outpatient - Group	\$37,561	5,670	880	\$6.62	\$0.49
Opiate Substitution Treatment	\$1,476	145	22	\$10.18	\$0.02
Residential	\$82,046	512	79	\$160.21	\$1.06
Mental Health (MH) Services Total	\$2,927,641	17,991	2,791	\$162.73	\$37.85
Substance Use Disorder (SUD) Services Total	\$157,665	7,784	1,208	\$20.26	\$2.04
Total	\$3,085,305	25,774	3,999	\$119.70	\$39.89

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Pierce
Rate Cell: Non-Disabled
Age Group: Children
Member Months: 1,062,562

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$320,752	301	3	\$1,066.73	\$0.30
E&T	\$98,193	101	1	\$972.20	\$0.09
Residential MH Service	\$71,436	408	5	\$175.09	\$0.07
Crisis Services	\$470,128	2,317	26	\$202.89	\$0.44
Crisis Services (per diem)	\$17,853	42	0	\$425.07	\$0.02
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$0	0	0	\$0.00	\$0.00
Individual Treatment Services	\$3,842,225	29,066	328	\$132.19	\$3.62
Group Treatment Services	\$19,660	527	6	\$37.29	\$0.02
Family Treatment	\$1,572,536	12,295	139	\$127.90	\$1.48
Intake	\$874,829	4,487	51	\$194.99	\$0.82
Special Population Evaluation	\$3,244	18	0	\$180.20	\$0.00
Medication Management	\$131,348	442	5	\$296.94	\$0.12
Medication Monitoring	\$1,743	11	0	\$166.00	\$0.00
Rehab Case Management	\$76,849	591	7	\$130.13	\$0.07
Community Psych Services	\$465,249	3,057	35	\$152.22	\$0.44
Peer Support	\$289,090	4,037	46	\$71.61	\$0.27
Community Transition	\$100	1	0	\$99.64	\$0.00
Therapeutic Psychoeducation	\$2,305	22	0	\$104.85	\$0.00
Assessment	\$26,310	222	3	\$118.43	\$0.02
Detox	\$36,220	140	2	\$259.02	\$0.03
Outpatient	\$148,800	8,789	99	\$16.93	\$0.14
Outpatient - Group	\$199,786	31,596	357	\$6.32	\$0.19
Opiate Substitution Treatment	\$13,921	1,078	12	\$12.91	\$0.01
Residential	\$307,986	1,875	21	\$164.26	\$0.29
Mental Health (MH) Services Total	\$8,257,539	57,722	652	\$143.06	\$7.77
Substance Use Disorder (SUD) Services Total	\$733,023	43,699	494	\$16.77	\$0.69
Total	\$8,990,562	101,421	1,145	\$88.65	\$8.46

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Pierce
Rate Cell: Newly Eligible
Age Group: All
Member Months: 760,770

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$1,651,266	2,141	34	\$771.29	\$2.17
E&T	\$2,864,337	3,053	48	\$938.20	\$3.77
Residential MH Service	\$1,359,969	8,257	130	\$164.70	\$1.79
Crisis Services	\$2,671,514	10,551	166	\$253.20	\$3.51
Crisis Services (per diem)	\$775,973	1,845	29	\$420.58	\$1.02
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$121	8	0	\$15.17	\$0.00
Individual Treatment Services	\$4,986,823	39,135	617	\$127.43	\$6.55
Group Treatment Services	\$163,971	3,931	62	\$41.71	\$0.22
Family Treatment	\$76,635	621	10	\$123.51	\$0.10
Intake	\$1,238,891	6,274	99	\$197.46	\$1.63
Special Population Evaluation	\$2,523	14	0	\$180.20	\$0.00
Medication Management	\$326,054	1,584	25	\$205.84	\$0.43
Medication Monitoring	\$21,280	157	2	\$135.57	\$0.03
Rehab Case Management	\$152,925	1,233	19	\$124.08	\$0.20
Community Psych Services	\$720,277	5,759	91	\$125.07	\$0.95
Peer Support	\$623,027	8,700	137	\$71.61	\$0.82
Community Transition	\$9,466	57	1	\$166.06	\$0.01
Therapeutic Psychoeducation	\$13,119	143	2	\$92.07	\$0.02
Assessment	\$196,687	1,702	27	\$115.59	\$0.26
Detox	\$537,343	2,246	35	\$239.27	\$0.71
Outpatient	\$635,969	28,660	452	\$22.19	\$0.84
Outpatient - Group	\$1,690,139	271,381	4,281	\$6.23	\$2.22
Opiate Substitution Treatment	\$1,636,338	124,464	1,963	\$13.15	\$2.15
Residential	\$415,618	2,862	45	\$145.20	\$0.55
Mental Health (MH) Services Total	\$17,658,171	93,461	1,474	\$188.94	\$23.21
Substance Use Disorder (SUD) Services Total	\$5,112,095	431,315	6,803	\$11.85	\$6.72
Total	\$22,770,266	524,776	8,278	\$43.39	\$29.93

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

 Year:
 CY 2015

 BHO:
 Pierce

 Rate Cell:
 All

 Age Group:
 All

 Member Months:
 2,438,658

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$3,385,334	5,036	25	\$672.28	\$1.39
E&T	\$9,778,007	10,527	52	\$928.85	\$4.01
Residential MH Service	\$6,430,109	39,541	195	\$162.62	\$2.64
Crisis Services	\$6,828,652	27,528	135	\$248.06	\$2.80
Crisis Services (per diem)	\$1,797,258	4,064	20	\$442.24	\$0.74
High Intensity Treatment	\$299	2	0	\$149.58	\$0.00
Day Support	\$121	8	0	\$15.17	\$0.00
Individual Treatment Services	\$15,482,376	121,582	598	\$127.34	\$6.35
Group Treatment Services	\$509,885	12,318	61	\$41.39	\$0.21
Family Treatment	\$2,210,609	17,172	85	\$128.73	\$0.91
Intake	\$3,286,427	16,906	83	\$194.39	\$1.35
Special Population Evaluation	\$7,749	43	0	\$180.20	\$0.00
Medication Management	\$1,117,306	5,868	29	\$190.40	\$0.46
Medication Monitoring	\$133,617	969	5	\$137.84	\$0.05
Rehab Case Management	\$445,879	3,567	18	\$124.99	\$0.18
Community Psych Services	\$3,459,102	26,953	133	\$128.34	\$1.42
Peer Support	\$2,591,967	36,196	178	\$71.61	\$1.06
Community Transition	\$9,964	62	0	\$160.71	\$0.00
Therapeutic Psychoeducation	\$61,457	666	3	\$92.23	\$0.03
Assessment	\$311,670	2,674	13	\$116.57	\$0.13
Detox	\$751,525	3,113	15	\$241.44	\$0.31
Outpatient	\$1,042,075	52,088	256	\$20.01	\$0.43
Outpatient - Group	\$2,525,233	423,031	2,082	\$5.97	\$1.04
Opiate Substitution Treatment	\$3,833,117	291,461	1,434	\$13.15	\$1.57
Residential	\$1,119,877	7,581	37	\$147.73	\$0.46
Mental Health (MH) Services Total	\$57,536,120	329,008	1,619	\$174.88	\$23.59
Substance Use Disorder (SUD) Services Total	\$9,583,496	779,947	3,838	\$12.29	\$3.93
Total	\$67,119,616	1,108,955	5,457	\$60.53	\$27.52

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year:CY 2015BHO:SalishRate Cell:DisabledAge Group:AdultsMember Months:80,631

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$679,135	1,048	156	\$647.90	\$8.42
E&T	\$1,848,124	2,350	350	\$786.44	\$22.92
Residential MH Service	\$1,631,293	9,625	1,432	\$169.49	\$20.23
Crisis Services	\$1,445,427	6,826	1,016	\$211.76	\$17.93
Crisis Services (per diem)	\$4,052	10	1	\$405.17	\$0.05
High Intensity Treatment	\$1,370	31	5	\$44.20	\$0.02
Day Support	\$326,264	19,099	2,842	\$17.08	\$4.05
Individual Treatment Services	\$438,847	2,962	441	\$148.17	\$5.44
Group Treatment Services	\$42,204	858	128	\$49.17	\$0.52
Family Treatment	\$989	7	1	\$152.12	\$0.01
Intake	\$159,492	847	126	\$188.41	\$1.98
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$473,006	3,171	472	\$149.16	\$5.87
Medication Monitoring	\$96,021	781	116	\$122.91	\$1.19
Rehab Case Management	\$66,686	426	63	\$156.49	\$0.83
Community Psych Services	\$2,024,697	15,819	2,354	\$127.99	\$25.11
Peer Support	\$429,850	5,497	818	\$78.20	\$5.33
Community Transition	\$0	0	0	\$0.00	\$0.00
Therapeutic Psychoeducation	\$340,847	3,269	487	\$104.27	\$4.23
Assessment	\$17,100	144	21	\$118.43	\$0.21
Detox	\$34,803	256	38	\$135.97	\$0.43
Outpatient	\$84,024	4,167	620	\$20.16	\$1.04
Outpatient - Group	\$178,438	32,444	4,829	\$5.50	\$2.21
Opiate Substitution Treatment	\$128,435	9,992	1,487	\$12.85	\$1.59
Residential	\$70,199	501	74	\$140.25	\$0.87
Mental Health (MH) Services Total	\$10,008,305	72,625	10,809	\$137.81	\$124.12
Substance Use Disorder (SUD) Services Total	\$513,000	47,504	7,070	\$10.80	\$6.36
Total	\$10,521,305	120,129	17,878	\$87.58	\$130.49

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Salish
Rate Cell: Non-Disabled
Age Group: Adults
Member Months: 119,934

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$92,076	214	21	\$431.12	\$0.77
E&T	\$151,584	197	20	\$769.46	\$1.26
Residential MH Service	\$91,142	490	49	\$186.01	\$0.76
Crisis Services	\$281,026	1,257	126	\$223.52	\$2.34
Crisis Services (per diem)	\$0	0	0	\$0.00	\$0.00
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$20,581	1,304	130	\$15.78	\$0.17
Individual Treatment Services	\$268,519	1,771	177	\$151.59	\$2.24
Group Treatment Services	\$17,841	353	35	\$50.54	\$0.15
Family Treatment	\$1,128	7	1	\$157.45	\$0.01
Intake	\$182,815	962	96	\$189.96	\$1.52
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$68,927	388	39	\$177.73	\$0.57
Medication Monitoring	\$5,014	43	4	\$117.93	\$0.04
Rehab Case Management	\$14,261	89	9	\$159.46	\$0.12
Community Psych Services	\$717,433	5,238	524	\$136.97	\$5.98
Peer Support	\$7,884	104	10	\$76.17	\$0.07
Community Transition	\$0	0	0	\$0.00	\$0.00
Therapeutic Psychoeducation	\$95,740	938	94	\$102.03	\$0.80
Assessment	\$33,569	279	28	\$120.17	\$0.28
Detox	\$65,620	389	39	\$168.48	\$0.55
Outpatient	\$176,653	10,080	1,009	\$17.52	\$1.47
Outpatient - Group	\$405,858	81,885	8,193	\$4.96	\$3.38
Opiate Substitution Treatment	\$94,278	7,227	723	\$13.04	\$0.79
Residential	\$163,755	1,238	124	\$132.23	\$1.37
Mental Health (MH) Services Total	\$2,015,973	13,355	1,336	\$150.95	\$16.81
Substance Use Disorder (SUD) Services Total	\$939,733	101,100	10,116	\$9.30	\$7.84
Total	\$2,955,706	114,455	11,452	\$25.82	\$24.64

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Salish
Rate Cell: Disabled
Age Group: Children
Member Months: 29,511

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$119,970	70	29	\$1,708.98	\$4.07
E&T	\$476,132	483	196	\$985.78	\$16.13
Residential MH Service	\$0	0	0	\$0.00	\$0.00
Crisis Services	\$145,951	604	246	\$241.64	\$4.95
Crisis Services (per diem)	\$0	0	0	\$0.00	\$0.00
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$110,039	6,638	2,699	\$16.58	\$3.73
Individual Treatment Services	\$195,722	1,327	540	\$147.49	\$6.63
Group Treatment Services	\$4,628	91	37	\$50.72	\$0.16
Family Treatment	\$129,951	882	359	\$147.34	\$4.40
Intake	\$64,876	323	131	\$200.77	\$2.20
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$83,581	355	144	\$235.73	\$2.83
Medication Monitoring	\$236	2	1	\$157.46	\$0.01
Rehab Case Management	\$25,012	151	61	\$166.10	\$0.85
Community Psych Services	\$663,995	4,522	1,839	\$146.84	\$22.50
Peer Support	\$20,006	266	108	\$75.35	\$0.68
Community Transition	\$110	1	0	\$110.10	\$0.00
Therapeutic Psychoeducation	\$9,598	86	35	\$111.61	\$0.33
Assessment	\$3,336	28	12	\$117.36	\$0.11
Detox	\$5,858	33	13	\$179.96	\$0.20
Outpatient	\$19,607	1,079	439	\$18.17	\$0.66
Outpatient - Group	\$27,128	4,279	1,740	\$6.34	\$0.92
Opiate Substitution Treatment	\$332	26	10	\$13.01	\$0.01
Residential	\$25,255	143	58	\$177.13	\$0.86
Mental Health (MH) Services Total	\$2,049,807	15,800	6,425	\$129.74	\$69.46
Substance Use Disorder (SUD) Services Total	\$81,516	5,587	2,272	\$14.59	\$2.76
Total	\$2,131,323	21,387	8,696	\$99.66	\$72.22

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Salish
Rate Cell: Non-Disabled
Age Group: Children
Member Months: 326,550

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$157,367	115	4	\$1,372.34	\$0.48
E&T	\$795,457	805	30	\$988.15	\$2.44
Residential MH Service	\$58,102	312	11	\$186.23	\$0.18
Crisis Services	\$248,461	851	31	\$292.05	\$0.76
Crisis Services (per diem)	\$382	1	0	\$382.33	\$0.00
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$243,250	14,176	521	\$17.16	\$0.74
Individual Treatment Services	\$439,320	2,887	106	\$152.15	\$1.35
Group Treatment Services	\$15,474	304	11	\$50.92	\$0.05
Family Treatment	\$320,239	2,134	78	\$150.04	\$0.98
Intake	\$282,383	1,436	53	\$196.58	\$0.86
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$133,184	585	21	\$227.76	\$0.41
Medication Monitoring	\$250	2	0	\$157.94	\$0.00
Rehab Case Management	\$33,949	201	7	\$168.79	\$0.10
Community Psych Services	\$1,172,329	7,650	281	\$153.25	\$3.59
Peer Support	\$13,807	193	7	\$71.73	\$0.04
Community Transition	\$100	1	0	\$99.64	\$0.00
Therapeutic Psychoeducation	\$58,217	464	17	\$125.54	\$0.18
Assessment	\$18,494	158	6	\$117.18	\$0.06
Detox	\$14,611	89	3	\$164.47	\$0.04
Outpatient	\$90,007	5,003	184	\$17.99	\$0.28
Outpatient - Group	\$164,288	27,484	1,010	\$5.98	\$0.50
Opiate Substitution Treatment	\$1,372	157	6	\$8.74	\$0.00
Residential	\$338,468	2,094	77	\$161.62	\$1.04
Mental Health (MH) Services Total	\$3,972,273	32,116	1,180	\$123.68	\$12.16
Substance Use Disorder (SUD) Services Total	\$627,240	34,985	1,286	\$17.93	\$1.92
Total	\$4,599,513	67,101	2,466	\$68.55	\$14.09

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Salish
Rate Cell: Newly Eligible
Age Group: All
Member Months: 321,297

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$839,746	1,036	39	\$810.87	\$2.61
E&T	\$1,149,981	1,451	54	\$792.54	\$3.58
Residential MH Service	\$245,635	1,363	51	\$180.22	\$0.76
Crisis Services	\$1,195,010	5,159	193	\$231.64	\$3.72
Crisis Services (per diem)	\$10,796	24	1	\$449.82	\$0.03
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$76,951	3,884	145	\$19.81	\$0.24
Individual Treatment Services	\$724,221	4,753	178	\$152.37	\$2.25
Group Treatment Services	\$59,015	1,167	44	\$50.57	\$0.18
Family Treatment	\$647	4	0	\$152.12	\$0.00
Intake	\$522,704	2,648	99	\$197.37	\$1.63
Special Population Evaluation	\$180	1	0	\$180.20	\$0.00
Medication Management	\$232,560	1,200	45	\$193.83	\$0.72
Medication Monitoring	\$18,936	138	5	\$136.84	\$0.06
Rehab Case Management	\$56,317	352	13	\$160.20	\$0.18
Community Psych Services	\$1,546,788	11,462	428	\$134.96	\$4.81
Peer Support	\$84,697	1,090	41	\$77.69	\$0.26
Community Transition	\$439	3	0	\$146.38	\$0.00
Therapeutic Psychoeducation	\$154,150	1,346	50	\$114.52	\$0.48
Assessment	\$116,103	1,003	37	\$115.78	\$0.36
Detox	\$361,756	2,219	83	\$162.99	\$1.13
Outpatient	\$609,880	30,216	1,129	\$20.18	\$1.90
Outpatient - Group	\$1,462,653	265,451	9,914	\$5.51	\$4.55
Opiate Substitution Treatment	\$152,719	12,032	449	\$12.69	\$0.48
Residential	\$652,113	4,708	176	\$138.52	\$2.03
Mental Health (MH) Services Total	\$6,918,771	37,081	1,385	\$186.59	\$21.53
Substance Use Disorder (SUD) Services Total	\$3,355,225	315,630	11,788	\$10.63	\$10.44
Total	\$10,273,996	352,710	13,173	\$29.13	\$31.98

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

 Year:
 CY 2015

 BHO:
 Salish

 Rate Cell:
 All

 Age Group:
 All

 Member Months:
 877,923

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$1,888,294	2,482	34	\$760.71	\$2.15
E&T	\$4,421,279	5,286	72	\$836.41	\$5.04
Residential MH Service	\$2,026,173	11,790	161	\$171.86	\$2.31
Crisis Services	\$3,315,875	14,697	201	\$225.62	\$3.78
Crisis Services (per diem)	\$15,230	35	0	\$435.13	\$0.02
High Intensity Treatment	\$1,370	31	0	\$44.20	\$0.00
Day Support	\$777,085	45,101	616	\$17.23	\$0.89
Individual Treatment Services	\$2,066,629	13,701	187	\$150.84	\$2.35
Group Treatment Services	\$139,164	2,773	38	\$50.18	\$0.16
Family Treatment	\$452,953	3,034	41	\$149.28	\$0.52
Intake	\$1,212,270	6,217	85	\$195.00	\$1.38
Special Population Evaluation	\$180	1	0	\$180.20	\$0.00
Medication Management	\$991,258	5,698	78	\$173.96	\$1.13
Medication Monitoring	\$120,457	965	13	\$124.80	\$0.14
Rehab Case Management	\$196,225	1,219	17	\$161.00	\$0.22
Community Psych Services	\$6,125,242	44,690	611	\$137.06	\$6.98
Peer Support	\$556,243	7,149	98	\$77.81	\$0.63
Community Transition	\$649	5	0	\$129.78	\$0.00
Therapeutic Psychoeducation	\$658,552	6,103	83	\$107.90	\$0.75
Assessment	\$188,603	1,613	22	\$116.94	\$0.21
Detox	\$482,647	2,986	41	\$161.62	\$0.55
Outpatient	\$980,173	50,545	691	\$19.39	\$1.12
Outpatient - Group	\$2,238,366	411,544	5,625	\$5.44	\$2.55
Opiate Substitution Treatment	\$377,136	29,435	402	\$12.81	\$0.43
Residential	\$1,249,790	8,684	119	\$143.92	\$1.42
Mental Health (MH) Services Total	\$24,965,129	170,977	2,337	\$146.01	\$28.44
Substance Use Disorder (SUD) Services Total	\$5,516,714	504,806	6,900	\$10.93	\$6.28
Total	\$30,481,843	675,783	9,237	\$45.11	\$34.72

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Southwest
Rate Cell: Disabled
Age Group: Adults
Member Months: 82,455

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$578,356	927	135	\$623.57	\$7.01
E&T	\$1,504,472	1,315	191	\$1,144.09	\$18.25
Residential MH Service	\$30,025	183	27	\$164.07	\$0.36
Crisis Services	\$180,402	688	100	\$262.11	\$2.19
Crisis Services (per diem)	\$146,924	229	33	\$641.59	\$1.78
High Intensity Treatment	\$458,874	3,070	447	\$149.47	\$5.57
Day Support	\$23,975	1,213	177	\$19.76	\$0.29
Individual Treatment Services	\$2,507,482	16,472	2,397	\$152.23	\$30.41
Group Treatment Services	\$135,164	2,912	424	\$46.42	\$1.64
Family Treatment	\$25,039	163	24	\$154.02	\$0.30
Intake	\$355,752	1,800	262	\$197.66	\$4.31
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$419,470	2,385	347	\$175.87	\$5.09
Medication Monitoring	\$81,725	593	86	\$137.70	\$0.99
Rehab Case Management	\$47,387	342	50	\$138.54	\$0.57
Community Psych Services	\$1,095,102	8,298	1,208	\$131.97	\$13.28
Peer Support	\$122,553	1,804	262	\$67.95	\$1.49
Community Transition	\$6,974	61	9	\$114.33	\$0.08
Therapeutic Psychoeducation	\$362,404	3,387	493	\$107.00	\$4.40
Assessment	\$14,364	126	18	\$114.25	\$0.17
Detox	\$81,759	324	47	\$252.70	\$0.99
Outpatient	\$84,890	5,520	803	\$15.38	\$1.03
Outpatient - Group	\$94,848	18,003	2,620	\$5.27	\$1.15
Opiate Substitution Treatment	\$292,430	22,797	3,318	\$12.83	\$3.55
Residential	\$4,321	31	5	\$137.37	\$0.05
Mental Health (MH) Services Total	\$8,082,079	45,842	6,672	\$176.30	\$98.02
Substance Use Disorder (SUD) Services Total	\$572,611	46,801	6,811	\$12.24	\$6.94
Total	\$8,654,690	92,643	13,483	\$93.42	\$104.96

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Southwest
Rate Cell: Non-Disabled
Age Group: Adults
Member Months: 179,517

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$164,102	298	20	\$550.64	\$0.91
E&T	\$361,176	302	20	\$1,195.95	\$2.01
Residential MH Service	\$0	0	0	\$0.00	\$0.00
Crisis Services	\$28,114	106	7	\$264.77	\$0.16
Crisis Services (per diem)	\$42,948	67	4	\$641.02	\$0.24
High Intensity Treatment	\$2,093	14	1	\$149.50	\$0.01
Day Support	\$13,849	696	47	\$19.90	\$0.08
Individual Treatment Services	\$1,301,909	8,588	574	\$151.60	\$7.25
Group Treatment Services	\$58,671	1,210	81	\$48.50	\$0.33
Family Treatment	\$41,490	272	18	\$152.66	\$0.23
Intake	\$360,900	1,742	116	\$207.22	\$2.01
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$132,209	702	47	\$188.42	\$0.74
Medication Monitoring	\$33,435	240	16	\$139.12	\$0.19
Rehab Case Management	\$9,117	61	4	\$149.42	\$0.05
Community Psych Services	\$327,499	2,455	164	\$133.40	\$1.82
Peer Support	\$33,256	490	33	\$67.94	\$0.19
Community Transition	\$3,213	27	2	\$119.01	\$0.02
Therapeutic Psychoeducation	\$167,377	1,643	110	\$101.87	\$0.93
Assessment	\$36,311	320	21	\$113.61	\$0.20
Detox	\$67,871	270	18	\$251.67	\$0.38
Outpatient	\$100,349	6,048	404	\$16.59	\$0.56
Outpatient - Group	\$227,648	45,145	3,018	\$5.04	\$1.27
Opiate Substitution Treatment	\$466,448	36,500	2,440	\$12.78	\$2.60
Residential	\$60,051	465	31	\$129.03	\$0.33
Mental Health (MH) Services Total	\$3,081,356	18,912	1,264	\$162.93	\$17.16
Substance Use Disorder (SUD) Services Total	\$958,677	88,748	5,932	\$10.80	\$5.34
Total	\$4,040,033	107,660	7,197	\$37.53	\$22.51

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Southwest
Rate Cell: Disabled
Age Group: Children
Member Months: 38,567

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$5,310	7	2	\$724.12	\$0.14
E&T	\$136,826	112	35	\$1,221.66	\$3.55
Residential MH Service	\$0	0	0	\$0.00	\$0.00
Crisis Services	\$20,759	80	25	\$260.58	\$0.54
Crisis Services (per diem)	\$33,579	104	32	\$322.88	\$0.87
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$0	0	0	\$0.00	\$0.00
Individual Treatment Services	\$1,387,715	9,068	2,821	\$153.04	\$35.98
Group Treatment Services	\$34,916	814	253	\$42.91	\$0.91
Family Treatment	\$622,721	4,020	1,251	\$154.91	\$16.15
Intake	\$276,995	1,287	400	\$215.21	\$7.18
Special Population Evaluation	\$2,233	12	4	\$186.08	\$0.06
Medication Management	\$136,822	419	130	\$326.43	\$3.55
Medication Monitoring	\$1,368	10	3	\$139.12	\$0.04
Rehab Case Management	\$8,560	60	19	\$142.75	\$0.22
Community Psych Services	\$555,257	4,682	1,457	\$118.59	\$14.40
Peer Support	\$31,710	467	145	\$67.94	\$0.82
Community Transition	\$3,079	26	8	\$118.41	\$0.08
Therapeutic Psychoeducation	\$118,049	1,258	392	\$93.82	\$3.06
Assessment	\$3,525	31	10	\$115.17	\$0.09
Detox	\$2,833	11	3	\$269.17	\$0.07
Outpatient	\$34,496	2,095	652	\$16.47	\$0.89
Outpatient - Group	\$27,826	4,207	1,309	\$6.61	\$0.72
Opiate Substitution Treatment	\$66	5	2	\$12.33	\$0.00
Residential	\$69,004	407	127	\$169.42	\$1.79
Mental Health (MH) Services Total	\$3,375,900	22,425	6,978	\$150.54	\$87.53
Substance Use Disorder (SUD) Services Total	\$137,750	6,756	2,102	\$20.39	\$3.57
Total	\$3,513,651	29,181	9,080	\$120.41	\$91.11

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Southwest
Rate Cell: Non-Disabled
Age Group: Children
Member Months: 646,908

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$171,734	204	4	\$843.26	\$0.27
E&T	\$76,785	64	1	\$1,199.77	\$0.12
Residential MH Service	\$0	0	0	\$0.00	\$0.00
Crisis Services	\$48,287	163	3	\$296.60	\$0.07
Crisis Services (per diem)	\$155,246	444	8	\$349.65	\$0.24
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$2,837	143	3	\$19.84	\$0.00
Individual Treatment Services	\$3,913,850	26,076	484	\$150.09	\$6.05
Group Treatment Services	\$98,546	2,252	42	\$43.75	\$0.15
Family Treatment	\$1,627,957	10,662	198	\$152.68	\$2.52
Intake	\$1,098,237	5,217	97	\$210.52	\$1.70
Special Population Evaluation	\$7,693	42	1	\$183.15	\$0.01
Medication Management	\$264,370	814	15	\$324.67	\$0.41
Medication Monitoring	\$0	0	0	\$0.00	\$0.00
Rehab Case Management	\$18,291	136	3	\$134.08	\$0.03
Community Psych Services	\$942,569	8,155	151	\$115.59	\$1.46
Peer Support	\$57,934	853	16	\$67.94	\$0.09
Community Transition	\$15,443	137	3	\$112.73	\$0.02
Therapeutic Psychoeducation	\$140,026	1,513	28	\$92.52	\$0.22
Assessment	\$27,643	243	5	\$113.84	\$0.04
Detox	\$9,963	35	1	\$287.88	\$0.02
Outpatient	\$167,197	9,751	181	\$17.15	\$0.26
Outpatient - Group	\$120,679	19,025	353	\$6.34	\$0.19
Opiate Substitution Treatment	\$985	111	2	\$8.84	\$0.00
Residential	\$472,859	2,769	51	\$170.74	\$0.73
Mental Health (MH) Services Total	\$8,639,806	56,876	1,055	\$151.91	\$13.36
Substance Use Disorder (SUD) Services Total	\$799,327	31,934	592	\$25.03	\$1.24
Total	\$9,439,132	88,810	1,647	\$106.28	\$14.59

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Southwest
Rate Cell: Newly Eligible
Age Group: All
Member Months: 416,504

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$1,314,842	1,175	34	\$1,118.54	\$3.16
E&T	\$1,768,483	1,514	44	\$1,168.09	\$4.25
Residential MH Service	\$669	3	0	\$223.14	\$0.00
Crisis Services	\$211,562	797	23	\$265.49	\$0.51
Crisis Services (per diem)	\$445,446	683	20	\$652.19	\$1.07
High Intensity Treatment	\$36,759	245	7	\$150.04	\$0.09
Day Support	\$56,367	2,762	80	\$20.41	\$0.14
Individual Treatment Services	\$3,586,217	23,643	681	\$151.68	\$8.61
Group Treatment Services	\$197,695	4,001	115	\$49.42	\$0.47
Family Treatment	\$43,824	283	8	\$154.76	\$0.11
Intake	\$1,082,413	5,144	148	\$210.44	\$2.60
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$452,378	2,303	66	\$196.46	\$1.09
Medication Monitoring	\$180,110	1,292	37	\$139.40	\$0.43
Rehab Case Management	\$37,849	263	8	\$144.10	\$0.09
Community Psych Services	\$682,542	5,560	160	\$122.75	\$1.64
Peer Support	\$108,881	1,602	46	\$67.95	\$0.26
Community Transition	\$54,537	506	15	\$107.78	\$0.13
Therapeutic Psychoeducation	\$916,598	9,757	281	\$93.94	\$2.20
Assessment	\$146,565	1,295	37	\$113.19	\$0.35
Detox	\$744,038	2,818	81	\$264.07	\$1.79
Outpatient	\$569,434	27,221	784	\$20.92	\$1.37
Outpatient - Group	\$1,159,436	203,563	5,865	\$5.70	\$2.78
Opiate Substitution Treatment	\$775,122	61,464	1,771	\$12.61	\$1.86
Residential	\$88,807	644	19	\$137.86	\$0.21
Mental Health (MH) Services Total	\$11,177,173	61,533	1,773	\$181.65	\$26.84
Substance Use Disorder (SUD) Services Total	\$3,483,402	297,005	8,557	\$11.73	\$8.36
Total	\$14,660,575	358,537	10,330	\$40.89	\$35.20

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

 Year:
 CY 2015

 BHO:
 Southwest

 Rate Cell:
 All

 Age Group:
 All

 Member Months:
 1,363,951

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$2,234,345	2,612	23	\$855.42	\$1.64
E&T	\$3,847,742	3,307	29	\$1,163.51	\$2.82
Residential MH Service	\$30,695	186	2	\$165.02	\$0.02
Crisis Services	\$489,123	1,834	16	\$266.73	\$0.36
Crisis Services (per diem)	\$824,144	1,527	13	\$539.71	\$0.60
High Intensity Treatment	\$497,726	3,329	29	\$149.51	\$0.36
Day Support	\$97,028	4,814	42	\$20.16	\$0.07
Individual Treatment Services	\$12,697,173	83,847	738	\$151.43	\$9.31
Group Treatment Services	\$524,992	11,188	98	\$46.92	\$0.38
Family Treatment	\$2,361,031	15,400	135	\$153.32	\$1.73
Intake	\$3,174,297	15,189	134	\$208.99	\$2.33
Special Population Evaluation	\$9,925	54	0	\$183.81	\$0.01
Medication Management	\$1,405,250	6,623	58	\$212.18	\$1.03
Medication Monitoring	\$296,637	2,136	19	\$138.90	\$0.22
Rehab Case Management	\$121,204	862	8	\$140.59	\$0.09
Community Psych Services	\$3,602,968	29,150	256	\$123.60	\$2.64
Peer Support	\$354,333	5,215	46	\$67.95	\$0.26
Community Transition	\$83,246	757	7	\$109.97	\$0.06
Therapeutic Psychoeducation	\$1,704,454	17,559	154	\$97.07	\$1.25
Assessment	\$228,408	2,014	18	\$113.43	\$0.17
Detox	\$906,464	3,456	30	\$262.29	\$0.66
Outpatient	\$956,366	50,635	445	\$18.89	\$0.70
Outpatient - Group	\$1,630,437	289,942	2,551	\$5.62	\$1.20
Opiate Substitution Treatment	\$1,535,051	120,878	1,063	\$12.70	\$1.13
Residential	\$695,042	4,318	38	\$160.97	\$0.51
Mental Health (MH) Services Total	\$34,356,314	205,588	1,809	\$167.11	\$25.19
Substance Use Disorder (SUD) Services Total	\$5,951,768	471,243	4,146	\$12.63	\$4.36
Total	\$40,308,081	676,831	5,955	\$59.55	\$29.55

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Spokane
Rate Cell: Disabled
Age Group: Adults
Member Months: 182,440

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$1,755,740	3,061	201	\$573.55	\$9.62
E&T	\$2,185,515	3,344	220	\$653.56	\$11.98
Residential MH Service	\$13,944	107	7	\$130.31	\$0.08
Crisis Services	\$1,841,317	6,841	450	\$269.16	\$10.09
Crisis Services (per diem)	\$874,011	2,240	147	\$390.18	\$4.79
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$56,342	3,515	231	\$16.03	\$0.31
Individual Treatment Services	\$2,670,035	20,012	1,316	\$133.42	\$14.64
Group Treatment Services	\$485,349	11,876	781	\$40.87	\$2.66
Family Treatment	\$21,061	148	10	\$142.51	\$0.12
Intake	\$477,220	2,684	177	\$177.77	\$2.62
Special Population Evaluation	\$590	4	0	\$147.53	\$0.00
Medication Management	\$504,035	2,652	174	\$190.06	\$2.76
Medication Monitoring	\$80,944	718	47	\$112.81	\$0.44
Rehab Case Management	\$73,245	554	36	\$132.32	\$0.40
Community Psych Services	\$2,702,083	20,650	1,358	\$130.85	\$14.81
Peer Support	\$282,928	4,553	299	\$62.14	\$1.55
Community Transition	\$9,529	62	4	\$153.70	\$0.05
Therapeutic Psychoeducation	\$817,494	7,150	470	\$114.33	\$4.48
Assessment	\$34,579	295	19	\$117.12	\$0.19
Detox	\$61,433	497	33	\$123.59	\$0.34
Outpatient	\$117,837	6,170	406	\$19.10	\$0.65
Outpatient - Group	\$218,144	41,226	2,712	\$5.29	\$1.20
Opiate Substitution Treatment	\$540,206	41,766	2,747	\$12.93	\$2.96
Residential	\$160,943	1,164	77	\$138.31	\$0.88
Mental Health (MH) Services Total	\$14,851,380	90,171	5,931	\$164.70	\$81.40
Substance Use Disorder (SUD) Services Total	\$1,133,141	91,118	5,993	\$12.44	\$6.21
Total	\$15,984,521	181,289	11,924	\$88.17	\$87.62

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Spokane
Rate Cell: Non-Disabled
Age Group: Adults
Member Months: 293,381

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$284,401	544	22	\$522.84	\$0.97
E&T	\$356,114	545	22	\$653.42	\$1.21
Residential MH Service	\$46,415	358	15	\$129.65	\$0.16
Crisis Services	\$479,734	1,709	70	\$280.73	\$1.64
Crisis Services (per diem)	\$136,409	354	14	\$385.34	\$0.46
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$3,244	203	8	\$15.98	\$0.01
Individual Treatment Services	\$1,618,850	12,151	497	\$133.22	\$5.52
Group Treatment Services	\$309,381	7,396	303	\$41.83	\$1.05
Family Treatment	\$26,478	190	8	\$139.50	\$0.09
Intake	\$427,720	2,382	97	\$179.54	\$1.46
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$173,157	883	36	\$196.13	\$0.59
Medication Monitoring	\$25,130	215	9	\$117.06	\$0.09
Rehab Case Management	\$19,919	156	6	\$127.36	\$0.07
Community Psych Services	\$842,634	6,292	257	\$133.92	\$2.87
Peer Support	\$56,606	911	37	\$62.14	\$0.19
Community Transition	\$3,535	23	1	\$153.70	\$0.01
Therapeutic Psychoeducation	\$365,908	2,973	122	\$123.07	\$1.25
Assessment	\$70,245	601	25	\$116.97	\$0.24
Detox	\$27,634	235	10	\$117.73	\$0.09
Outpatient	\$266,395	14,692	601	\$18.13	\$0.91
Outpatient - Group	\$529,278	106,215	4,344	\$4.98	\$1.80
Opiate Substitution Treatment	\$629,189	48,421	1,981	\$12.99	\$2.14
Residential	\$183,603	1,336	55	\$137.45	\$0.63
Mental Health (MH) Services Total	\$5,175,632	37,286	1,525	\$138.81	\$17.64
Substance Use Disorder (SUD) Services Total	\$1,706,344	171,499	7,015	\$9.95	\$5.82
Total	\$6,881,976	208,785	8,540	\$32.96	\$23.46

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Spokane
Rate Cell: Disabled
Age Group: Children
Member Months: 77,972

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$1,378,637	1,682	259	\$819.79	\$17.68
E&T	\$45,739	70	11	\$653.42	\$0.59
Residential MH Service	\$0	0	0	\$0.00	\$0.00
Crisis Services	\$232,007	887	137	\$261.45	\$2.98
Crisis Services (per diem)	\$11,088	29	4	\$382.33	\$0.14
High Intensity Treatment	\$212,773	632	97	\$336.67	\$2.73
Day Support	\$361,257	9,242	1,422	\$39.09	\$4.63
Individual Treatment Services	\$1,774,025	13,110	2,018	\$135.32	\$22.75
Group Treatment Services	\$214,694	4,965	764	\$43.24	\$2.75
Family Treatment	\$293,296	2,149	331	\$136.50	\$3.76
Intake	\$294,150	1,638	252	\$179.54	\$3.77
Special Population Evaluation	\$653	4	1	\$163.15	\$0.01
Medication Management	\$130,584	600	92	\$217.77	\$1.67
Medication Monitoring	\$13,744	115	18	\$120.03	\$0.18
Rehab Case Management	\$18,542	125	19	\$148.71	\$0.24
Community Psych Services	\$400,670	2,931	451	\$136.70	\$5.14
Peer Support	\$168,400	2,779	428	\$60.61	\$2.16
Community Transition	\$154	1	0	\$153.70	\$0.00
Therapeutic Psychoeducation	\$13,346	139	21	\$96.24	\$0.17
Assessment	\$6,528	57	9	\$114.38	\$0.08
Detox	\$9,410	68	10	\$139.00	\$0.12
Outpatient	\$36,514	2,143	330	\$17.04	\$0.47
Outpatient - Group	\$21,235	3,442	530	\$6.17	\$0.27
Opiate Substitution Treatment	\$21	1	0	\$14.14	\$0.00
Residential	\$40,727	275	42	\$148.33	\$0.52
Mental Health (MH) Services Total	\$5,563,759	41,097	6,325	\$135.38	\$71.36
Substance Use Disorder (SUD) Services Total	\$114,435	5,986	921	\$19.12	\$1.47
Total	\$5,678,193	47,082	7,246	\$120.60	\$72.82

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Spokane
Rate Cell: Non-Disabled
Age Group: Children
Member Months: 946,833

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$2,635,259	3,617	46	\$728.54	\$2.78
E&T	\$105,616	156	2	\$677.02	\$0.11
Residential MH Service	\$9,464	73	1	\$129.65	\$0.01
Crisis Services	\$634,612	2,170	28	\$292.44	\$0.67
Crisis Services (per diem)	\$12,373	32	0	\$386.67	\$0.01
High Intensity Treatment	\$388,106	1,157	15	\$335.44	\$0.41
Day Support	\$697,303	14,925	189	\$46.72	\$0.74
Individual Treatment Services	\$4,612,929	34,221	434	\$134.80	\$4.87
Group Treatment Services	\$580,129	13,273	168	\$43.71	\$0.61
Family Treatment	\$746,124	5,428	69	\$137.47	\$0.79
Intake	\$993,975	5,707	72	\$174.17	\$1.05
Special Population Evaluation	\$990	6	0	\$164.94	\$0.00
Medication Management	\$172,333	834	11	\$206.51	\$0.18
Medication Monitoring	\$23,550	209	3	\$112.93	\$0.02
Rehab Case Management	\$47,607	304	4	\$156.59	\$0.05
Community Psych Services	\$702,474	4,900	62	\$143.36	\$0.74
Peer Support	\$92,329	1,502	19	\$61.48	\$0.10
Community Transition	\$793	5	0	\$158.53	\$0.00
Therapeutic Psychoeducation	\$25,458	265	3	\$95.92	\$0.03
Assessment	\$40,819	357	5	\$114.41	\$0.04
Detox	\$36,302	193	2	\$188.10	\$0.04
Outpatient	\$161,200	9,380	119	\$17.18	\$0.17
Outpatient - Group	\$131,876	21,617	274	\$6.10	\$0.14
Opiate Substitution Treatment	\$6,529	510	6	\$12.80	\$0.01
Residential	\$478,623	2,946	37	\$162.47	\$0.51
Mental Health (MH) Services Total	\$12,481,424	88,784	1,125	\$140.58	\$13.18
Substance Use Disorder (SUD) Services Total	\$855,348	35,003	444	\$24.44	\$0.90
Total	\$13,336,773	123,788	1,569	\$107.74	\$14.09

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Spokane
Rate Cell: Newly Eligible
Age Group: All
Member Months: 732,164

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$2,335,468	3,125	51	\$747.32	\$3.19
E&T	\$2,228,224	3,399	56	\$655.55	\$3.04
Residential MH Service	\$16,716	121	2	\$138.15	\$0.02
Crisis Services	\$1,679,246	6,542	107	\$256.68	\$2.29
Crisis Services (per diem)	\$913,685	2,373	39	\$385.03	\$1.25
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$7,195	448	7	\$16.06	\$0.01
Individual Treatment Services	\$3,826,871	28,362	465	\$134.93	\$5.23
Group Treatment Services	\$770,423	19,350	317	\$39.81	\$1.05
Family Treatment	\$33,607	245	4	\$137.08	\$0.05
Intake	\$1,149,445	6,141	101	\$187.16	\$1.57
Special Population Evaluation	\$653	4	0	\$163.15	\$0.00
Medication Management	\$483,038	2,036	33	\$237.21	\$0.66
Medication Monitoring	\$256,321	2,317	38	\$110.61	\$0.35
Rehab Case Management	\$65,932	521	9	\$126.67	\$0.09
Community Psych Services	\$1,716,603	13,551	222	\$126.68	\$2.34
Peer Support	\$95,065	1,423	23	\$66.83	\$0.13
Community Transition	\$34,389	235	4	\$146.34	\$0.05
Therapeutic Psychoeducation	\$1,398,206	11,849	194	\$118.00	\$1.91
Assessment	\$241,940	2,095	34	\$115.46	\$0.33
Detox	\$281,390	2,145	35	\$131.19	\$0.38
Outpatient	\$1,062,146	52,279	857	\$20.32	\$1.45
Outpatient - Group	\$2,214,945	400,950	6,571	\$5.52	\$3.03
Opiate Substitution Treatment	\$1,193,983	91,756	1,504	\$13.01	\$1.63
Residential	\$662,182	4,799	79	\$137.98	\$0.90
Mental Health (MH) Services Total	\$17,011,086	102,043	1,672	\$166.71	\$23.23
Substance Use Disorder (SUD) Services Total	\$5,656,586	554,024	9,080	\$10.21	\$7.73
Total	\$22,667,672	656,067	10,753	\$34.55	\$30.96

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

 Year:
 CY 2015

 BHO:
 Spokane

 Rate Cell:
 All

 Age Group:
 All

 Member Months:
 2,232,790

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$8,389,504	12,029	65	\$697.43	\$3.76
E&T	\$4,921,208	7,514	40	\$654.94	\$2.20
Residential MH Service	\$86,538	659	4	\$131.32	\$0.04
Crisis Services	\$4,866,916	18,149	98	\$268.16	\$2.18
Crisis Services (per diem)	\$1,947,566	5,028	27	\$387.34	\$0.87
High Intensity Treatment	\$600,879	1,789	10	\$335.87	\$0.27
Day Support	\$1,125,341	28,333	152	\$39.72	\$0.50
Individual Treatment Services	\$14,502,710	107,856	580	\$134.46	\$6.50
Group Treatment Services	\$2,359,976	56,862	306	\$41.50	\$1.06
Family Treatment	\$1,120,565	8,159	44	\$137.34	\$0.50
Intake	\$3,342,509	18,554	100	\$180.15	\$1.50
Special Population Evaluation	\$2,885	18	0	\$160.28	\$0.00
Medication Management	\$1,463,146	7,005	38	\$208.86	\$0.66
Medication Monitoring	\$399,689	3,573	19	\$111.88	\$0.18
Rehab Case Management	\$225,246	1,659	9	\$135.76	\$0.10
Community Psych Services	\$6,364,464	48,324	260	\$131.70	\$2.85
Peer Support	\$695,327	11,167	60	\$62.27	\$0.31
Community Transition	\$48,399	326	2	\$148.46	\$0.02
Therapeutic Psychoeducation	\$2,620,412	22,377	120	\$117.10	\$1.17
Assessment	\$394,111	3,405	18	\$115.74	\$0.18
Detox	\$416,170	3,137	17	\$132.65	\$0.19
Outpatient	\$1,644,092	84,665	455	\$19.42	\$0.74
Outpatient - Group	\$3,115,477	573,450	3,082	\$5.43	\$1.40
Opiate Substitution Treatment	\$2,369,927	182,454	981	\$12.99	\$1.06
Residential	\$1,526,078	10,519	57	\$145.08	\$0.68
Mental Health (MH) Services Total	\$55,083,281	359,381	1,931	\$153.27	\$24.67
Substance Use Disorder (SUD) Services Total	\$9,465,854	857,630	4,609	\$11.04	\$4.24
Total	\$64,549,135	1,217,011	6,541	\$53.04	\$28.91

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Thurston Mason
Rate Cell: Disabled
Age Group: Adults
Member Months: 74,781

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$622,965	1,424	229	\$437.42	\$8.33
E&T	\$1,402,229	1,803	289	\$777.72	\$18.75
Residential MH Service	\$89,705	182	29	\$492.88	\$1.20
Crisis Services	\$309,428	1,273	204	\$243.02	\$4.14
Crisis Services (per diem)	\$469,901	819	131	\$573.75	\$6.28
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$542	29	5	\$18.68	\$0.01
Individual Treatment Services	\$1,028,268	6,869	1,102	\$149.70	\$13.75
Group Treatment Services	\$42,020	927	149	\$45.31	\$0.56
Family Treatment	\$1,105	7	1	\$152.12	\$0.01
Intake	\$114,695	599	96	\$191.54	\$1.53
Special Population Evaluation	\$360	2	0	\$180.20	\$0.00
Medication Management	\$96,343	539	87	\$178.65	\$1.29
Medication Monitoring	\$63,965	527	85	\$121.26	\$0.86
Rehab Case Management	\$69,378	431	69	\$161.13	\$0.93
Community Psych Services	\$889,023	7,403	1,188	\$120.09	\$11.89
Peer Support	\$355,620	4,966	797	\$71.61	\$4.76
Community Transition	\$100	1	0	\$99.64	\$0.00
Therapeutic Psychoeducation	\$106,628	870	140	\$122.53	\$1.43
Assessment	\$11,890	104	17	\$114.05	\$0.16
Detox	\$9,693	51	8	\$190.41	\$0.13
Outpatient	\$44,637	2,252	361	\$19.82	\$0.60
Outpatient - Group	\$104,158	18,949	3,041	\$5.50	\$1.39
Opiate Substitution Treatment	\$406,004	31,397	5,038	\$12.93	\$5.43
Residential	\$38,982	282	45	\$138.24	\$0.52
Mental Health (MH) Services Total	\$5,662,275	28,672	4,601	\$197.48	\$75.72
Substance Use Disorder (SUD) Services Total	\$615,365	53,035	8,510	\$11.60	\$8.23
Total	\$6,277,640	81,707	13,111	\$76.83	\$83.95

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015

BHO: Thurston Mason

Rate Cell: Non-Disabled

Age Group: Adults

Member Months: 119,595

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$307,324	479	48	\$641.32	\$2.57
E&T	\$21,270	28	3	\$759.63	\$0.18
Residential MH Service	\$7,846	14	1	\$560.46	\$0.07
Crisis Services	\$60,234	234	23	\$257.78	\$0.50
Crisis Services (per diem)	\$60,056	105	11	\$571.96	\$0.50
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$0	0	0	\$0.00	\$0.00
Individual Treatment Services	\$559,364	3,724	374	\$150.19	\$4.68
Group Treatment Services	\$41,120	816	82	\$50.41	\$0.34
Family Treatment	\$2,261	16	2	\$144.32	\$0.02
Intake	\$130,468	677	68	\$192.63	\$1.09
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$28,237	136	14	\$207.98	\$0.24
Medication Monitoring	\$3,403	28	3	\$122.20	\$0.03
Rehab Case Management	\$12,492	81	8	\$154.54	\$0.10
Community Psych Services	\$228,515	1,581	159	\$144.54	\$1.91
Peer Support	\$9,470	132	13	\$71.61	\$0.08
Community Transition	\$340	2	0	\$169.75	\$0.00
Therapeutic Psychoeducation	\$15,296	129	13	\$118.35	\$0.13
Assessment	\$17,933	162	16	\$110.40	\$0.15
Detox	\$25,943	125	13	\$207.02	\$0.22
Outpatient	\$138,193	7,428	745	\$18.60	\$1.16
Outpatient - Group	\$262,315	50,653	5,082	\$5.18	\$2.19
Opiate Substitution Treatment	\$463,789	35,883	3,600	\$12.93	\$3.88
Residential	\$74,556	597	60	\$124.85	\$0.62
Mental Health (MH) Services Total	\$1,487,696	8,182	821	\$181.83	\$12.44
Substance Use Disorder (SUD) Services Total	\$982,730	94,850	9,517	\$10.36	\$8.22
Total	\$2,470,426	103,031	10,338	\$23.98	\$20.66

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Thurston Mason
Rate Cell: Disabled
Age Group: Children
Member Months: 30,167

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$94,671	72	29	\$1,317.80	\$3.14
E&T	\$64,229	65	26	\$988.15	\$2.13
Residential MH Service	\$0	0	0	\$0.00	\$0.00
Crisis Services	\$50,392	226	90	\$222.73	\$1.67
Crisis Services (per diem)	\$28,319	70	28	\$404.55	\$0.94
High Intensity Treatment	\$25,797	132	52	\$195.80	\$0.86
Day Support	\$6,658	439	175	\$15.17	\$0.22
Individual Treatment Services	\$400,153	2,652	1,055	\$150.88	\$13.26
Group Treatment Services	\$1,673	33	13	\$50.71	\$0.06
Family Treatment	\$70,586	475	189	\$148.66	\$2.34
Intake	\$56,763	288	114	\$197.39	\$1.88
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$13,186	45	18	\$292.47	\$0.44
Medication Monitoring	\$4,182	31	12	\$136.01	\$0.14
Rehab Case Management	\$20,756	131	52	\$158.95	\$0.69
Community Psych Services	\$97,765	764	304	\$128.05	\$3.24
Peer Support	\$4,340	60	24	\$72.33	\$0.14
Community Transition	\$110	1	0	\$110.10	\$0.00
Therapeutic Psychoeducation	\$1,268	8	3	\$152.12	\$0.04
Assessment	\$6,639	44	18	\$150.66	\$0.22
Detox	\$864	5	2	\$172.67	\$0.03
Outpatient	\$13,973	716	285	\$19.51	\$0.46
Outpatient - Group	\$32,289	4,902	1,950	\$6.59	\$1.07
Opiate Substitution Treatment	\$58	5	2	\$12.84	\$0.00
Residential	\$53,956	322	128	\$167.35	\$1.79
Mental Health (MH) Services Total	\$940,848	5,491	2,184	\$171.36	\$31.19
Substance Use Disorder (SUD) Services Total	\$107,780	5,994	2,384	\$17.98	\$3.57
Total	\$1,048,628	11,485	4,568	\$91.31	\$34.76

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015

BHO: Thurston Mason

Rate Cell: Non-Disabled

Age Group: Children

Member Months: 357,408

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$429,508	443	15	\$970.17	\$1.20
E&T	\$120,686	131	4	\$921.27	\$0.34
Residential MH Service	\$223	1	0	\$223.14	\$0.00
Crisis Services	\$135,024	530	18	\$254.76	\$0.38
Crisis Services (per diem)	\$51,538	124	4	\$415.63	\$0.14
High Intensity Treatment	\$26,214	132	4	\$198.21	\$0.07
Day Support	\$1,441	95	3	\$15.17	\$0.00
Individual Treatment Services	\$1,310,656	8,832	297	\$148.40	\$3.67
Group Treatment Services	\$17,944	371	12	\$48.35	\$0.05
Family Treatment	\$180,808	1,257	42	\$143.80	\$0.51
Intake	\$246,976	1,294	43	\$190.94	\$0.69
Special Population Evaluation	\$1,081	6	0	\$180.20	\$0.00
Medication Management	\$13,880	44	1	\$312.72	\$0.04
Medication Monitoring	\$7,636	53	2	\$142.86	\$0.02
Rehab Case Management	\$26,524	165	6	\$161.18	\$0.07
Community Psych Services	\$213,174	1,703	57	\$125.19	\$0.60
Peer Support	\$5,944	81	3	\$73.16	\$0.02
Community Transition	\$0	0	0	\$0.00	\$0.00
Therapeutic Psychoeducation	\$13,460	93	3	\$145.51	\$0.04
Assessment	\$41,836	265	9	\$157.70	\$0.12
Detox	\$2,216	12	0	\$184.51	\$0.01
Outpatient	\$69,129	3,890	131	\$17.77	\$0.19
Outpatient - Group	\$134,069	22,046	740	\$6.08	\$0.38
Opiate Substitution Treatment	\$956	115	4	\$8.31	\$0.00
Residential	\$207,496	1,256	42	\$165.22	\$0.58
Mental Health (MH) Services Total	\$2,802,716	15,355	516	\$182.53	\$7.84
Substance Use Disorder (SUD) Services Total	\$455,702	27,584	926	\$16.52	\$1.28
Total	\$3,258,418	42,939	1,442	\$75.88	\$9.12

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015

BHO: Thurston Mason
Rate Cell: Newly Eligible
Age Group: All

Member Months: 308,240

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$2,266,992	2,450	95	\$925.48	\$7.35
E&T	\$1,100,703	1,442	56	\$763.32	\$3.57
Residential MH Service	\$170,602	305	12	\$559.35	\$0.55
Crisis Services	\$355,279	1,372	53	\$258.96	\$1.15
Crisis Services (per diem)	\$389,612	710	28	\$548.75	\$1.26
High Intensity Treatment	\$0	0	0	\$0.00	\$0.00
Day Support	\$76	5	0	\$15.17	\$0.00
Individual Treatment Services	\$1,679,495	11,087	432	\$151.48	\$5.45
Group Treatment Services	\$72,726	1,442	56	\$50.43	\$0.24
Family Treatment	\$2,540	18	1	\$141.87	\$0.01
Intake	\$424,368	2,153	84	\$197.13	\$1.38
Special Population Evaluation	\$0	0	0	\$0.00	\$0.00
Medication Management	\$78,291	300	12	\$260.90	\$0.25
Medication Monitoring	\$11,189	94	4	\$119.16	\$0.04
Rehab Case Management	\$108,240	704	27	\$153.68	\$0.35
Community Psych Services	\$239,740	1,881	73	\$127.45	\$0.78
Peer Support	\$106,827	1,489	58	\$71.74	\$0.35
Community Transition	\$6,930	46	2	\$150.65	\$0.02
Therapeutic Psychoeducation	\$19,262	174	7	\$110.55	\$0.06
Assessment	\$103,447	909	35	\$113.81	\$0.34
Detox	\$119,901	584	23	\$205.22	\$0.39
Outpatient	\$458,896	22,425	873	\$20.46	\$1.49
Outpatient - Group	\$1,087,904	194,734	7,581	\$5.59	\$3.53
Opiate Substitution Treatment	\$864,537	66,936	2,606	\$12.92	\$2.80
Residential	\$401,784	2,899	113	\$138.61	\$1.30
Mental Health (MH) Services Total	\$7,032,871	25,672	999	\$273.95	\$22.82
Substance Use Disorder (SUD) Services Total	\$3,036,469	288,487	11,231	\$10.53	\$9.85
Total	\$10,069,340	314,159	12,230	\$32.05	\$32.67

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

 Year:
 CY 2015

 BHO:
 Thurston Mason

 Rate Cell:
 All

 Age Group:
 All

Member Months: 890,191

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$3,721,460	4,867	66	\$764.56	\$4.18
E&T	\$2,709,118	3,469	47	\$780.95	\$3.04
Residential MH Service	\$268,377	502	7	\$534.61	\$0.30
Crisis Services	\$910,357	3,635	49	\$250.43	\$1.02
Crisis Services (per diem)	\$999,425	1,828	25	\$546.73	\$1.12
High Intensity Treatment	\$52,011	264	4	\$197.01	\$0.06
Day Support	\$8,716	568	8	\$15.34	\$0.01
Individual Treatment Services	\$4,977,936	33,165	447	\$150.10	\$5.59
Group Treatment Services	\$175,483	3,589	48	\$48.89	\$0.20
Family Treatment	\$257,299	1,773	24	\$145.12	\$0.29
Intake	\$973,270	5,010	68	\$194.27	\$1.09
Special Population Evaluation	\$1,442	8	0	\$180.20	\$0.00
Medication Management	\$229,935	1,065	14	\$215.98	\$0.26
Medication Monitoring	\$90,375	733	10	\$123.22	\$0.10
Rehab Case Management	\$237,391	1,511	20	\$157.12	\$0.27
Community Psych Services	\$1,668,217	13,331	180	\$125.14	\$1.87
Peer Support	\$482,201	6,729	91	\$71.67	\$0.54
Community Transition	\$7,479	50	1	\$149.58	\$0.01
Therapeutic Psychoeducation	\$155,914	1,275	17	\$122.33	\$0.18
Assessment	\$181,744	1,485	20	\$122.39	\$0.20
Detox	\$158,618	778	10	\$204.01	\$0.18
Outpatient	\$724,829	36,711	495	\$19.74	\$0.81
Outpatient - Group	\$1,620,734	291,285	3,927	\$5.56	\$1.82
Opiate Substitution Treatment	\$1,735,345	134,336	1,811	\$12.92	\$1.95
Residential	\$776,775	5,356	72	\$145.03	\$0.87
Mental Health (MH) Services Total	\$17,926,406	83,371	1,124	\$215.02	\$20.14
Substance Use Disorder (SUD) Services Total	\$5,198,046	469,950	6,335	\$11.06	\$5.84
Total	\$23,124,451	553,321	7,459	\$41.79	\$25.98

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Statewide
Rate Cell: Disabled
Age Group: Adults
Member Months: 1,419,198

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$19,207,442	30,547	258	\$628.79	\$13.53
E&T	\$17,114,647	20,667	175	\$828.11	\$12.06
Residential MH Service	\$17,358,550	118,637	1,003	\$146.32	\$12.23
Crisis Services	\$13,177,999	52,913	447	\$249.05	\$9.29
Crisis Services (per diem)	\$4,063,212	10,618	90	\$382.67	\$2.86
High Intensity Treatment	\$1,446,949	35,778	303	\$40.44	\$1.02
Day Support	\$1,883,753	114,908	972	\$16.39	\$1.33
Individual Treatment Services	\$24,205,050	178,109	1,506	\$135.90	\$17.06
Group Treatment Services	\$3,514,326	86,202	729	\$40.77	\$2.48
Family Treatment	\$194,234	1,405	12	\$138.29	\$0.14
Intake	\$3,428,802	18,149	153	\$188.93	\$2.42
Special Population Evaluation	\$74,454	429	4	\$173.55	\$0.05
Medication Management	\$5,916,140	33,138	280	\$178.53	\$4.17
Medication Monitoring	\$1,556,582	11,821	100	\$131.68	\$1.10
Rehab Case Management	\$666,741	4,863	41	\$137.11	\$0.47
Community Psych Services	\$20,428,050	159,793	1,351	\$127.84	\$14.39
Peer Support	\$4,986,817	69,898	591	\$71.34	\$3.51
Community Transition	\$65,538	418	4	\$156.79	\$0.05
Therapeutic Psychoeducation	\$2,784,843	25,223	213	\$110.41	\$1.96
Assessment	\$271,210	2,408	20	\$112.64	\$0.19
Detox	\$593,011	3,552	30	\$166.94	\$0.42
Outpatient	\$1,163,103	62,938	532	\$18.48	\$0.82
Outpatient - Group	\$2,101,462	398,364	3,368	\$5.28	\$1.48
Opiate Substitution Treatment	\$8,992,006	705,139	5,962	\$12.75	\$6.34
Residential	\$791,961	5,567	47	\$142.26	\$0.56
Mental Health (MH) Services Total	\$142,074,129	973,513	8,232	\$145.94	\$100.11
Substance Use Disorder (SUD) Services Total	\$13,912,753	1,177,968	9,960	\$11.81	\$9.80
Total	\$155,986,883	2,151,481	18,192	\$72.50	\$109.91

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Statewide
Rate Cell: Non-Disabled
Age Group: Adults
Member Months: 2,673,795

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$3,712,269	8,316	37	\$446.40	\$1.39
E&T	\$2,363,779	2,816	13	\$839.41	\$0.88
Residential MH Service	\$3,014,163	22,906	103	\$131.59	\$1.13
Crisis Services	\$2,709,412	10,499	47	\$258.07	\$1.01
Crisis Services (per diem)	\$561,864	1,296	6	\$433.54	\$0.21
High Intensity Treatment	\$139,040	4,565	20	\$30.46	\$0.05
Day Support	\$356,661	20,391	92	\$17.49	\$0.13
Individual Treatment Services	\$13,920,315	100,362	450	\$138.70	\$5.21
Group Treatment Services	\$1,240,814	28,990	130	\$42.80	\$0.46
Family Treatment	\$212,155	1,496	7	\$141.77	\$0.08
Intake	\$3,489,753	18,208	82	\$191.66	\$1.31
Special Population Evaluation	\$77,399	438	2	\$176.71	\$0.03
Medication Management	\$1,755,544	9,301	42	\$188.75	\$0.66
Medication Monitoring	\$179,240	1,301	6	\$137.76	\$0.07
Rehab Case Management	\$234,585	1,858	8	\$126.25	\$0.09
Community Psych Services	\$6,552,914	47,708	214	\$137.35	\$2.45
Peer Support	\$621,518	8,810	40	\$70.54	\$0.23
Community Transition	\$20,655	127	1	\$162.64	\$0.01
Therapeutic Psychoeducation	\$1,144,313	9,946	45	\$115.06	\$0.43
Assessment	\$480,342	4,159	19	\$115.49	\$0.18
Detox	\$653,761	3,319	15	\$196.98	\$0.24
Outpatient	\$1,756,986	100,216	450	\$17.53	\$0.66
Outpatient - Group	\$3,892,775	773,811	3,473	\$5.03	\$1.46
Opiate Substitution Treatment	\$7,104,402	553,135	2,482	\$12.84	\$2.66
Residential	\$3,890,324	29,343	132	\$132.58	\$1.45
Mental Health (MH) Services Total	\$42,306,392	299,335	1,343	\$141.33	\$15.82
Substance Use Disorder (SUD) Services Total	\$17,778,591	1,463,983	6,570	\$12.14	\$6.65
Total	\$60,084,982	1,763,318	7,914	\$34.07	\$22.47

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Statewide
Rate Cell: Disabled
Age Group: Children
Member Months: 571,236

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$5,340,655	5,023	106	\$1,063.32	\$9.35
E&T	\$1,341,487	1,456	31	\$921.35	\$2.35
Residential MH Service	\$187,128	1,023	21	\$182.92	\$0.33
Crisis Services	\$1,153,497	4,629	97	\$249.20	\$2.02
Crisis Services (per diem)	\$118,795	322	7	\$368.93	\$0.21
High Intensity Treatment	\$285,194	1,434	30	\$198.95	\$0.50
Day Support	\$479,910	16,448	346	\$29.18	\$0.84
Individual Treatment Services	\$10,202,555	71,224	1,496	\$143.25	\$17.86
Group Treatment Services	\$492,075	11,203	235	\$43.92	\$0.86
Family Treatment	\$3,432,935	24,081	506	\$142.56	\$6.01
Intake	\$1,835,270	9,107	191	\$201.52	\$3.21
Special Population Evaluation	\$36,285	205	4	\$177.00	\$0.06
Medication Management	\$1,387,207	4,789	101	\$289.65	\$2.43
Medication Monitoring	\$41,056	285	6	\$144.23	\$0.07
Rehab Case Management	\$139,682	934	20	\$149.61	\$0.24
Community Psych Services	\$4,038,995	29,620	622	\$136.36	\$7.07
Peer Support	\$383,918	5,793	122	\$66.28	\$0.67
Community Transition	\$5,668	42	1	\$134.95	\$0.01
Therapeutic Psychoeducation	\$200,615	1,973	41	\$101.69	\$0.35
Assessment	\$64,205	541	11	\$118.62	\$0.11
Detox	\$60,737	307	6	\$197.77	\$0.11
Outpatient	\$317,642	18,594	391	\$17.08	\$0.56
Outpatient - Group	\$418,221	66,762	1,402	\$6.26	\$0.73
Opiate Substitution Treatment	\$44,925	4,420	93	\$10.16	\$0.08
Residential	\$808,232	4,808	101	\$168.10	\$1.41
Mental Health (MH) Services Total	\$31,102,925	189,589	3,983	\$164.05	\$54.45
Substance Use Disorder (SUD) Services Total	\$1,713,962	95,432	2,005	\$17.96	\$3.00
Total	\$32,816,887	285,022	5,987	\$115.14	\$57.45

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Statewide
Rate Cell: Non-Disabled
Age Group: Children
Member Months: 8,838,789

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	РМРМ
Inpatient	\$10,236,195	10,425	14	\$981.90	\$1.16
E&T	\$2,731,352	3,138	4	\$870.41	\$0.31
Residential MH Service	\$214,216	1,100	1	\$194.74	\$0.02
Crisis Services	\$3,219,322	12,227	17	\$263.30	\$0.36
Crisis Services (per diem)	\$299,456	829	1	\$361.23	\$0.03
High Intensity Treatment	\$524,673	2,230	3	\$235.33	\$0.06
Day Support	\$945,240	29,364	40	\$32.19	\$0.11
Individual Treatment Services	\$31,513,471	223,661	304	\$140.90	\$3.57
Group Treatment Services	\$1,273,406	28,927	39	\$44.02	\$0.14
Family Treatment	\$9,476,990	68,231	93	\$138.90	\$1.07
Intake	\$7,598,214	39,071	53	\$194.47	\$0.86
Special Population Evaluation	\$214,492	1,224	2	\$175.24	\$0.02
Medication Management	\$2,348,825	8,149	11	\$288.24	\$0.27
Medication Monitoring	\$52,755	383	1	\$137.61	\$0.01
Rehab Case Management	\$301,091	1,991	3	\$151.19	\$0.03
Community Psych Services	\$8,326,330	60,666	82	\$137.25	\$0.94
Peer Support	\$612,541	8,797	12	\$69.63	\$0.07
Community Transition	\$18,925	158	0	\$119.78	\$0.00
Therapeutic Psychoeducation	\$622,339	5,226	7	\$119.08	\$0.07
Assessment	\$389,209	3,237	4	\$120.26	\$0.04
Detox	\$237,186	1,140	2	\$208.08	\$0.03
Outpatient	\$1,453,164	85,541	116	\$16.99	\$0.16
Outpatient - Group	\$1,919,455	313,170	425	\$6.13	\$0.22
Opiate Substitution Treatment	\$130,764	11,622	16	\$11.25	\$0.01
Residential	\$4,431,813	27,315	37	\$162.25	\$0.50
Mental Health (MH) Services Total	\$80,529,832	505,798	687	\$159.21	\$9.11
Substance Use Disorder (SUD) Services Total	\$8,561,590	442,024	600	\$19.37	\$0.97
Total	\$89,091,422	947,822	1,287	\$94.00	\$10.08

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Statewide
Rate Cell: Newly Eligible
Age Group: All
Member Months: 6,503,759

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$27,437,883	33,702	62	\$814.13	\$4.22
E&T	\$12,771,759	15,516	29	\$823.13	\$1.96
Residential MH Service	\$5,088,469	23,607	44	\$215.55	\$0.78
Crisis Services	\$12,163,001	48,440	89	\$251.10	\$1.87
Crisis Services (per diem)	\$4,317,543	11,481	21	\$376.06	\$0.66
High Intensity Treatment	\$316,598	9,545	18	\$33.17	\$0.05
Day Support	\$426,083	24,707	46	\$17.25	\$0.07
Individual Treatment Services	\$34,313,745	244,585	451	\$140.29	\$5.28
Group Treatment Services	\$2,793,548	65,372	121	\$42.73	\$0.43
Family Treatment	\$296,309	2,171	4	\$136.50	\$0.05
Intake	\$9,938,406	49,525	91	\$200.68	\$1.53
Special Population Evaluation	\$93,346	521	1	\$179.17	\$0.01
Medication Management	\$4,930,378	21,867	40	\$225.48	\$0.76
Medication Monitoring	\$670,868	5,310	10	\$126.34	\$0.10
Rehab Case Management	\$780,505	5,608	10	\$139.17	\$0.12
Community Psych Services	\$11,870,091	91,166	168	\$130.20	\$1.83
Peer Support	\$1,711,229	23,921	44	\$71.54	\$0.26
Community Transition	\$269,930	1,773	3	\$152.24	\$0.04
Therapeutic Psychoeducation	\$2,968,417	27,252	50	\$108.93	\$0.46
Assessment	\$1,853,206	16,646	31	\$111.33	\$0.28
Detox	\$4,689,339	22,964	42	\$204.20	\$0.72
Outpatient	\$7,593,431	371,084	685	\$20.46	\$1.17
Outpatient - Group	\$16,843,497	2,987,167	5,512	\$5.64	\$2.59
Opiate Substitution Treatment	\$15,688,034	1,233,892	2,277	\$12.71	\$2.41
Residential	\$5,768,734	42,682	79	\$135.16	\$0.89
Mental Health (MH) Services Total	\$133,158,108	706,068	1,303	\$188.59	\$20.47
Substance Use Disorder (SUD) Services Total	\$52,436,242	4,674,435	8,625	\$11.22	\$8.06
Total	\$185,594,350	5,380,503	9,927	\$34.49	\$28.54

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015
BHO: Statewide
Rate Cell: All
Age Group: All
Member Months: 20,006,777

Service Modality	Dollars*	Utilization**	Utilization Per 1,000	Unit Cost	PMPM
Inpatient	\$65,934,445	88,012	53	\$749.15	\$3.30
E&T	\$36,323,024	43,593	26	\$833.23	\$1.82
Residential MH Service	\$25,862,526	167,273	100	\$154.61	\$1.29
Crisis Services	\$32,423,230	128,707	77	\$251.91	\$1.62
Crisis Services (per diem)	\$9,360,871	24,546	15	\$381.36	\$0.47
High Intensity Treatment	\$2,712,453	53,551	32	\$50.65	\$0.14
Day Support	\$4,091,647	205,818	123	\$19.88	\$0.20
Individual Treatment Services	\$114,155,136	817,941	491	\$139.56	\$5.71
Group Treatment Services	\$9,314,169	220,695	132	\$42.20	\$0.47
Family Treatment	\$13,612,623	97,384	58	\$139.78	\$0.68
Intake	\$26,290,444	134,060	80	\$196.11	\$1.31
Special Population Evaluation	\$495,975	2,817	2	\$176.06	\$0.02
Medication Management	\$16,338,093	77,243	46	\$211.51	\$0.82
Medication Monitoring	\$2,500,501	19,100	11	\$130.92	\$0.12
Rehab Case Management	\$2,122,602	15,254	9	\$139.15	\$0.11
Community Psych Services	\$51,216,380	388,954	233	\$131.68	\$2.56
Peer Support	\$8,316,022	117,218	70	\$70.94	\$0.42
Community Transition	\$380,716	2,518	2	\$151.20	\$0.02
Therapeutic Psychoeducation	\$7,720,527	69,619	42	\$110.90	\$0.39
Assessment	\$3,058,172	26,991	16	\$113.30	\$0.15
Detox	\$6,234,034	31,282	19	\$199.28	\$0.31
Outpatient	\$12,284,327	638,373	383	\$19.24	\$0.61
Outpatient - Group	\$25,175,410	4,539,274	2,723	\$5.55	\$1.26
Opiate Substitution Treatment	\$31,960,132	2,508,208	1,504	\$12.74	\$1.60
Residential	\$15,691,063	109,714	66	\$143.02	\$0.78
Mental Health (MH) Services Total	\$429,171,386	2,674,304	1,604	\$160.48	\$21.45
Substance Use Disorder (SUD) Services Total	\$94,403,138	7,853,842	4,711	\$12.02	\$4.72
Total	\$523,574,524	10,528,146	6,315	\$49.73	\$26.17

^{*}Based on actual paid dollars for inpatient claims, reported per diem for daily non-inpatient services, and modeled unit costs for hourly services

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

Year: CY 2015

BHO: Statewide WISe Encounters

Rate Cell: All Age Group: All User Months: 6,170

Service Modality	User Months*	Utilization**
Inpatient	-	0
E&T	-	0
Residential MH Service	-	0
Crisis Services	658	1,756
Crisis Services (per diem)	-	0
High Intensity Treatment	205	1,105
Day Support	-	0
Individual Treatment Services	4,991	19,080
Group Treatment Services	42	73
Family Treatment	2,637	7,835
Intake	583	1,030
Special Population Evaluation	-	0
Medication Management	885	571
Medication Monitoring	-	0
Rehab Case Management	250	884
Community Psych Services	4,621	23,674
Peer Support	3,191	14,442
Community Transition	-	0
Therapeutic Psychoeducation	17	18
Assessment	-	0
Detox	-	0
Outpatient	-	0
Outpatient - Group	-	0
Opiate Substitution Treatment	-	0
Residential		0
Mental Health (MH) Services Total	6,170	70,467
Substance Use Disorder (SUD) Services Total	-	0
Total	6,170	70,467

^{*}Unique User Months by Modality for 2015 Utilization

^{**}Days for daily services, Hours for hourly services. Refer to Section III of the narrative for more information by modality

7

Adjustments to Calculate the Capitation Rates

This Section describes the adjustments that Mercer will make to the historical data to calculate the SUD and MH services portions of the capitation rates. Mercer makes adjustments to the base data to match the experience of a population actuarially equivalent to what is expected to be served during the upcoming contract period. These adjustments are required by the Centers for Medicare and Medicaid Services (CMS) in determining rates for Medicaid managed care programs. Mercer will certify to CMS that the final rates are actuarially sound.

These adjustments have **not** been reflected in the data book pages:

- Mercer understands certain data anomalies may exist in the data. Mercer will review the data and apply adjustments for:
 - Anomalies associated with the distribution of services by service modality. Mercer will
 review these instances and apply adjustments as necessary to reflect a more expected
 service distribution as applicable.
 - Unusual high/low volume of encounters during the data period. Mercer may consider averages or blending across multiple years as necessary to account for service volatility. If necessary, CY 2013 and CY 2014 data is available and has been processed in a similar manner the to the CY 2015 data described above.
- Mercer will project costs and utilization as part of the rate development. The trends used to
 project these costs will be based on historical data across different years. In addition to the
 data, Mercer will review national trend indices, and similar trend information from other
 states. Cost and utilization will be trended from the midpoint of CY 2015 to the midpoint of
 the applicable contract year. CY 2014 and emerging 2016 data will be largely used to
 support trend development.
- In addition to making the above adjustments, Mercer will consider adjustments for programmatic changes. The list below reflects potential programmatic changes that require consideration, though additional adjustments may also be reviewed:
 - Changes in SUD service reimbursement levels between current Medicaid/non-Medicaid rates and those expected under managed care. Mercer has collected information on the higher non-Medicaid fee schedules in effect for certain services and certain counties. Mercer will analyze the fee schedules as well as the implications of the recent Medicaid expansion to assess adjustments for capitation rate setting.
 - Changes in utilization patterns for certain services after shifting to a managed care environment.
 - Changes to the reimbursement structure for certain services, including 24-hour crisis.
 - Changes to IMD classification for certain institutions.

- Changes to covered benefits.
- Impact of new/closing/converting facilities.
- Evaluation of impact of the Medicaid Final Rule.
- Potential inclusion of the allowable stays of 15 days or less in IMD settings repriced at the equivalent State Plan rate.
- Consideration of managed care adjustments in the development of the rate ranges:
 - Analysis of historical service penetration/utilization rates and comparison to other states to assess whether historical data reflect expected level of penetration and utilization under managed care.
 - Analysis of utilization data in the encounters and Inpatient claims to determine whether there are opportunities for increased efficiency.
 - Cost per client served statistics for specific sub-populations.
- Administrative allowances:
 - Recognize that the cost to administer the program will likely differ between large and small managed care entities.
 - Review administrative costs generated by a Mercer model for an efficient managed care organization.
 - Note that provider administrative expenses are accounted for in the modeled hourly rates attached to the MH outpatient encounters.



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