

Reduction in Drug Use

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Benchmark finalized on 10/1/2009

Report Description:**Measure: Reduction in Drug Use**

This report reflects the number of individuals who have reported a reduction in drug use between the selected month and seven months prior to the selected month. For example, if the indicated month is June 2008, reported drug use is compared between December 1, 2007 and June 30, 2008. To be included in this report, an individual must receive three services from contract sources Community Mental Health (01), or Medicaid Services for which DMHSAS Pays Match, Adults (50). Only clients that are active at the beginning of the seventh month i.e. December 1, 2007 in the example above are included.

Establishment of Benchmark: The intent of this report is to identify the benchmark and present a summary of the data that determined the different levels of the benchmark.

Benchmark Comparison: The intent of this report is for providers to compare their performance on the set measure for any six month period to the benchmark as determined in the six month period between 05/01/2008 and 10/31/2008. The report shows data for the past six months from the end date entered.

Exclusion:

1. PACT clients
2. Discharge code 68 (Death)
3. Discharge code 65 (Incarcerated)
4. Persons under 18 years of age on the date of service
5. Data that are missing, invalid, or do not fit the criteria

Definitions:

Drug Use: Describes whether drug use has increased, decreased, or remained the same between the selected month and seven months prior to the selected month.

Improve: Frequency of reported drug use at selected month is lower than reported drug use at seven months prior to selected month.

No Change: Drug use did not increase or decrease within measurement period (between selected month and seven months prior to selected month).

Worsen: Frequency of reported drug use at selected month is greater than reported drug use at seven months prior to selected month.

Percent: The number of clients who reported a decrease in drug use between the selected month and seven months prior to the selected month divided by the provider's total number of clients reported to have improved, worsened, or exhibited no change in drug use x 100.

Average: The arithmetic mean of the data. In a data set, the mean is the sum of the data divided by the number of data points.

Standard Deviation: A measure of the dispersion or spread of the data. One standard deviation above and below the average determines the upper and lower limits.

Upper Limit: Average plus one standard deviation.

Lower Limit: Average minus one standard deviation.

Benchmark: A standard by which providers may be measured or judged.

How the Benchmark is Determined:

The benchmark is determined by the distribution of data from all 15 Community Mental Health Centers for a period of six months (05/01/2008 - 10/31/2008). From these data points, the average and standard deviations were calculated. These statistics were then used to establish the benchmark. The benchmark is utilized to assess monthly performance.

Benchmark categories are based on the average and upper and lower limits, as established in this report:

None: No points are awarded to an agency with a percentage below the lower limit.

One Point: An agency will receive one point when its monthly performance percent falls below the average but on or above the lower limit.

Two Points: An agency will receive two points when its monthly performance percent equals or exceeds the average.

Bonus: Bonus points will be awarded to providers whose monthly percentage equals or exceeds the upper limit.

Report Information:

Frequency of update: Claims are updated weekly. CDCs are updated weekly.

Last updated: Last paid claim is through 4/27/2016, CDCs are through 5/3/2016.

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