Case Study

Integrated care pathways for mental health in Rhode Island, USA

Beacon Health Strategies, Rhode Island

Background
Mental health problems among young children are putting increased pressure on health resources. From 1993 to 2001 spending on mental health for children increased by 150 per cent in Rhode Island. One in five children aged 6 to 17 has a diagnosable or addictive disorder, and one in ten has significant functional impairment. Mental healthcare in the US tends to be fragmented and crisis driven, with the majority of costs in high-intensive hospitals and residential care. Until recently in Rhode Island, local psychiatric hospitals and emergency rooms were the only option for children with mental healthcare needs. In 2004, 2,500 children and adolescents were hospitalised for mental health disorders, including alcoholism, drug use, depression and hyperactivity. Once hospitalised, children could remain in high cost acute care for many months, while patients could often be admitted to general wards and non-specialist psychiatric care. As many as 50 per cent of hospitalised children could be discharged if suitable community services were provided. However, there continues to be inadequate investment in appropriate community based alternatives.

Method
In 2001 the health plan responsible for providing services for at-risk children, Neighborhood Health Plan of Rhode Island, joined forces with Beacon Health Strategies, a for-profit mental health managed care organisation, to develop a continuum of quality alternative services. The partnership aimed to develop a more comprehensive continuum of community based services to reduce unnecessary admissions and readmissions, and allow patients to be discharged more rapidly back into the community.

Beacon Health Strategies began by making a full assessment of the existing services and conducting a rigorous analysis to identify the at-risk population. Working in partnership with the health plan, but also the Rhode Island Departments of Human Services and Children, Youth and Families (the main healthcare providers and charities) Beacon Health Strategies developed an effective model for a more integrated pathway.

A new “continuum of care”
Beacon Health Strategies brought together a range of existing providers, such as Gateway Healthcare, St. Mary’s Home for Children, The Providence Center and community mental health centres, to develop a new continuum of care. From 2004 to 2006 it developed seven new layers of intermediate services:

- **Acute Residential Treatment Service (ARTS)** – The first layer below hospitalisation is a community based short term or diversionary service, providing psychiatric evaluation, short term stabilisation, individual, family and group therapy on a 24-hour basis in a secure setting. The ARTS programme is provided by the non-profit St Mary’s Home for Children and the specialist mental healthcare provider Gateway, which operates an 8-bed modified

---

6. Ibid.
8. Ibid.
Case Study

Integrated care pathways for mental health in Rhode Island, USA

ranch home. Although providing intensive care it does not feature the “locked doors” of traditional psychiatric care and is 66 per cent cheaper per day, with average length of stay of two to six weeks.11

> Community Based Partial Hospital (PHP) – PHP is a step down from the ARTS programme, a community based psychiatric treatment centre which provides short term services Monday to Friday. It is staffed by multidisciplinary health professionals with patients receiving six hour sessions of psychotherapy and medication for 12 to 15 individuals. Children return home in the evening to minimise disruption to family life.12

> Intensive Outpatient (IOP) – Less intensive than PHP, IOP provides therapeutic treatment to children and adolescents who can be safely treated with partial hospitalisation. Sessions are three hours, three to five days a week.

> Intensive Outpatient Without Walls (IOP without walls) – Treatment is provided at patients’ home and school with clinicians working in the community with the objective of providing 24 hour support for patients and their families.

> Psychiatric Response Network (PRN) – This delivers psychiatric evaluation and treatment services to children and adolescents in the custody of the Department for Children, Youth and Families. PRN services include psychiatric evaluations, performed at the residential program site by board certified child/adolescent psychiatrists. In addition, these physicians and a clinical nurse specialist also provide follow-up medication management visits on site.

> Enhanced Outpatient Services (EOS) – Provides clinical services by a licensed therapist and a case manager either in office based settings or in members’ homes. Providers offer rapid access to this service and are able to provide varying levels of service intensity to meet the unique needs of children and their families. This service may be used to assist a member who is transitioning from an inpatient stay or to prevent an admission.

> Pre-paid Urgent Visits Appointments – Neighborhood Health Plan and Beacon have contracted with Gateway and The Providence Center for pre-paid appointments to ensure ready access for urgent psychiatric evaluations.13

This tiered network allow Beacon to ensure members are using appropriate levels of care and support patients’ step down from hospitalisation, as well as reducing the number of emergency admissions.

Outcomes

The new continuum of care has provided a more integrated and higher quality service to children and adolescents with mental health disorders. Patient satisfaction is also high, with a majority of parents of children with special healthcare needs rating the Neighborhood Health Plan plan “the best health plan possible” on consumer surveys.14 89.5 per of parents rated the health plan as either a ten, nine, eight or seven out of a possible ten.15

Beacon Health Strategies has also delivered significant savings for the Neighborhood Health Plan and the State of Rhode Island. The initiative to coordinate care and provide community based alternatives resulted in a $5.24 million reduction in costs for foster children and children with special needs in 2007, or 19.8 per cent of the total cost of children’s mental health hospitalisations in the previous year.16 The growth in health spending for children with

12 LifeSpan (2004), Hasbro Children’s Partial Hospital Program.
14 Neighborhood Health Plan of Rhode Island (2009), “Neighborhood’s program for children with special health care needs limit cost growth to 1.4 percent over the last three years by expanding access to care and building new service options”, Health Plan Performance Series, February.
15 Ibid.
special healthcare needs was contained to 1.4 per cent per year between 2005 and 2008, compared to the growth in Medicaid spending of 6.6 per cent per year. 17

Expenditure on inpatient care for children with special needs was cut by over 80 per cent, 2007.18 The number of hospital days for children and adolescents dropped by 25 per cent between 2006 and 2007, from 12,467 to 9,304.19 By 2008 the number of hospital days for children had been cut by 39 per cent from 2005 levels, visits to specialist physicians increased by 19 per cent and visits to diversionary treatment centres increased by 24 per cent.20

Since going active in Rhode Island in 2001, Beacon Health now works in 17 States, with 50 health plans and organising care for 6 million people. Beacon launched UK operations in 2011.21

---

17 Neighborhood Health Plan of Rhode Island (2009), “Neighborhood’s program for children with special health care needs limit cost growth to 1.4 percent over the last three years by expanding access to care and building new service options”, Health Plan Performance Series, February.
20 Neighborhood Health Plan of Rhode Island (2009), “Neighborhood’s program for children with special health care needs limit cost growth to 1.4 percent over the last three years by expanding access to care and building new service options”, Health Plan Performance Series, February.
21 beaconhs.co.uk.