

DHS/Division of Mental Health FY12 Provider Manual

Performance Measures

Performance Measures: The indicators listed below represent information that is already being collected on an ongoing basis and that DHS/DMH will use to monitor community provider performance in FY 2012. DHS/DMH is currently focused primarily on monitoring consumer access to services. (In future contract cycles, key indicators on which DHS/DMH will focus will include additional measures on the quality of services delivered and consumer related outcomes.) All indicators relate to services provided during FY 2012:

- a) Percentage of consumers receiving services who meet the criteria for the DMH Target/priority population;
- b) Percentage of consumers receiving services who meet the criteria for the DMH Eligible population;
- c) Percentage of consumers receiving services who are 200% or below of the Federal poverty level;
- d) Percentage of consumers receiving services who are not eligible for Medicaid;
- e) Percentage of consumers receiving services who are eligible for DHS/DMH services;
- f) Percentage of consumers receiving services within 24 hours of discharge from a state-operated hospital;
- g) Percentage of Community Support (individual, group or team) services provided off-site (e.g. in the community with a standard: 60%);
- h) Percentage of Assertive Community Treatment services provided off-site (e.g. in the community with a standard: 75%);
- i) For Providers receiving a contract or whom are under another business agreement with DHS/DMH to provide evidence-based practices each evidence-based practice (EBP) the fidelity scale scores for the EBP(s) at 6 month intervals (e.g., 6, 12, 18);
- j) Percentage of the following registration fields containing valid data (e.g. responses other than unknown or deferred in the case of diagnosis):
 - a. Diagnosis
 - b. History of Disability
 - c. Level of Impairment
 - d. GAF/CGAS
 - e. Income
 - f. Number in household
 - g. Residential arrangement
 - h. Ohio Scale Scores (C&A)
 - i. Columbia Impairment Scale Scores (C&A)
- k) Percentage of records for non-Medicaid consumers that contain income exceptions
- l) Percentage of records with evidence of appropriate billing, collection and reporting of consumer co-payment in accordance with the DHS/DMH payment table or appropriate adjustment of billed amounts based on the application of the DHS/DMH sliding fee scale.
- m) Employment status
- n) Number of days from initiation of forensic services to either:
 - a. Adjudication of Fitness or
 - b. Conditional Release
- o) Percentage of LEP consumers receiving services compared to the percentage of LEP individuals living in the geographic service area.