

Behavioral Health Incentive Program (BHIP)

- BHIP Indicator results FY 2022-23 - final
 - Trends/Best Practices
 - Met/Not Met for SFY 22-23



BHIP Performance Indicators FYs 2018-23

1. Engagement in Outpatient Substance Use Disorder (SUD) Treatment
2. Follow-Up within 7 Days of an Inpatient Hospital Discharge for a Mental Health (MH) Condition
3. Follow-Up within 7 Days of an Emergency Department (ED) Visit for SUD
4. Follow-Up after a Positive Depression Screening
5. Behavioral Health Screening or Assessment for Children in the Foster Care System

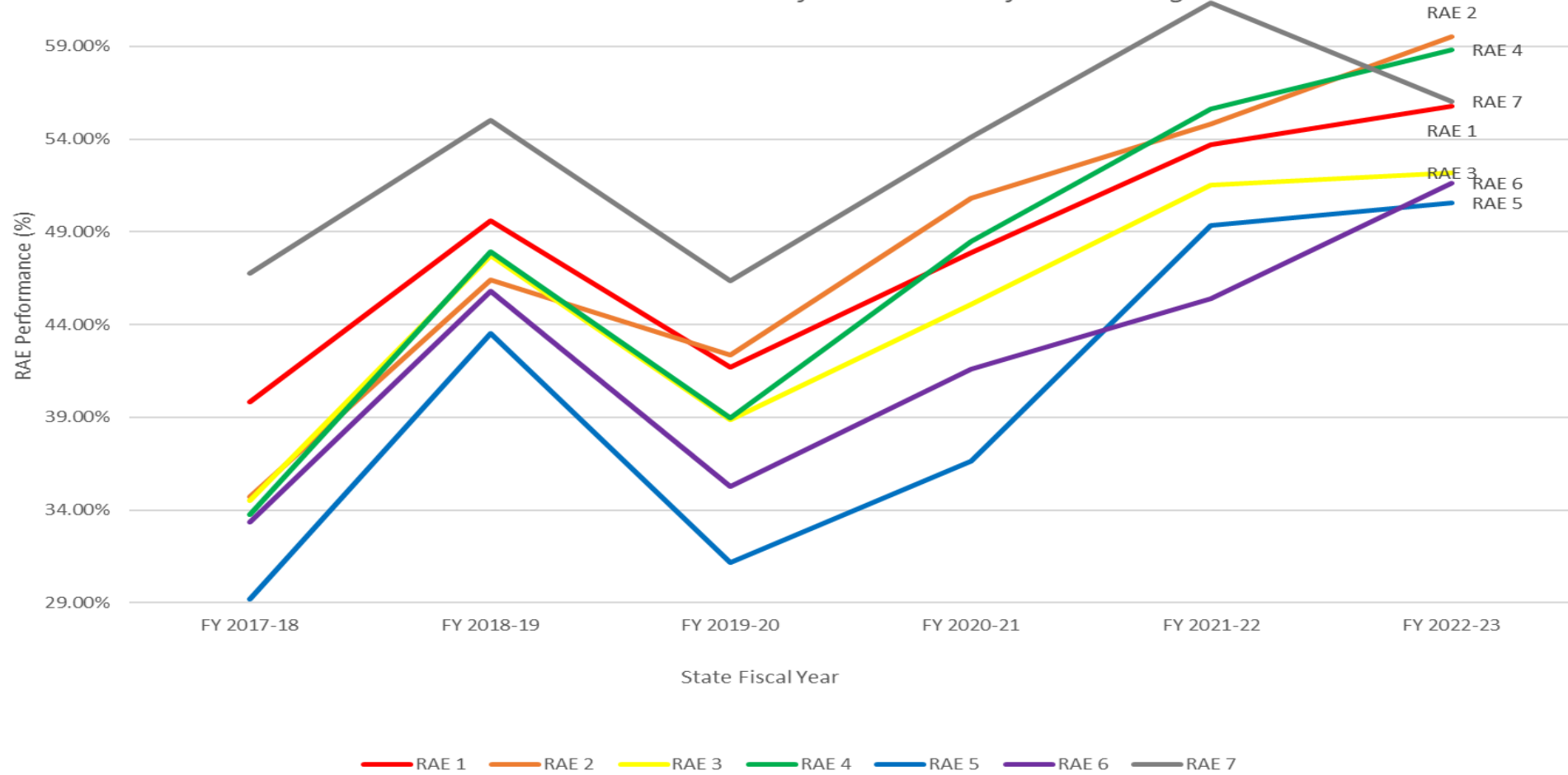
For more details on each measure, please refer to the BHIP [specifications](#).

Updated March 2024



Engagement in Outpatient Substance Use Disorder (SUD) Treatment

Please note: FY 2022-23 is Draft data and subject to change



YEAR	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23
RAE 1	39.84%	49.58%	41.72%	47.90%	53.72%	55.76%
RAE 2	34.72%	46.40%	42.34%	50.80%	54.79%	59.54%
RAE 3	34.53%	47.75%	38.84%	45.09%	51.53%	52.20%
RAE 4	33.75%	47.93%	38.98%	48.51%	55.64%	58.80%
RAE 5	29.18%	43.54%	31.19%	36.65%	49.33%	50.58%
RAE 6	33.36%	45.82%	35.29%	41.61%	45.40%	51.62%
RAE 7	46.77%	55.01%	46.37%	54.10%	61.34%	56.05%

Goal Met
Goal Not Met



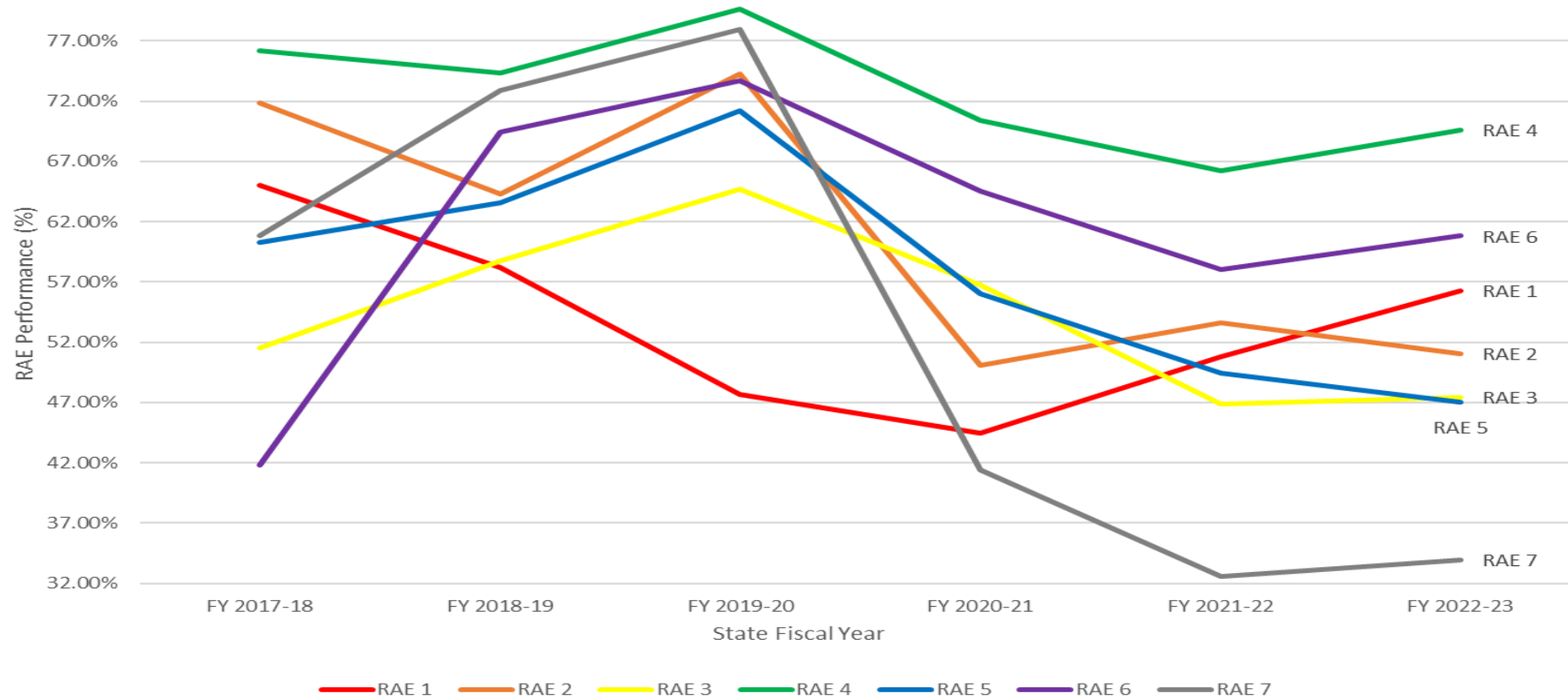
Indicator #1 - Trends/Best Practices

- All RAEs met their goal for this indicator (3rd year in a row)
 - Connection into Practice Transformation and Performance Improvement Cycles in SUD activities and Hospital Transformation.
 - Educating Practices on Engagement.
 - Educating about what the measure actually is, how to hit numerators and denominators and how to follow coding by reviewing the specification document.
 - Payout funding Rural and Frontier areas. First point of contact is through ED for SUD. Working on education and eliminating the stigma of SUD in ED. Colorado Rural Opioid and Addiction treatment system.



Follow-up within 7 days of an Inpatient Hospital Discharge for a Mental Health (MH) Condition

Please note: FY 2022-23 is Draft data and subject to change



YEAR	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23
RAE 1	65.02%	58.18%	47.66%	44.48%	50.79%	56.24%
RAE 2	71.82%	64.31%	74.23%	50.07%	53.59%	51.08%
RAE 3	51.53%	58.76%	64.71%	56.76%	46.84%	47.43%
RAE 4	76.17%	74.36%	79.61%	70.43%	66.21%	69.57%
RAE 5	60.32%	63.56%	71.20%	56.03%	49.46%	47.03%
RAE 6	41.82%	69.45%	73.69%	64.51%	58.07%	60.81%
RAE 7	60.86%	72.90%	77.93%	41.42%	32.59%	33.90%

Goal Met
Goal Not Met



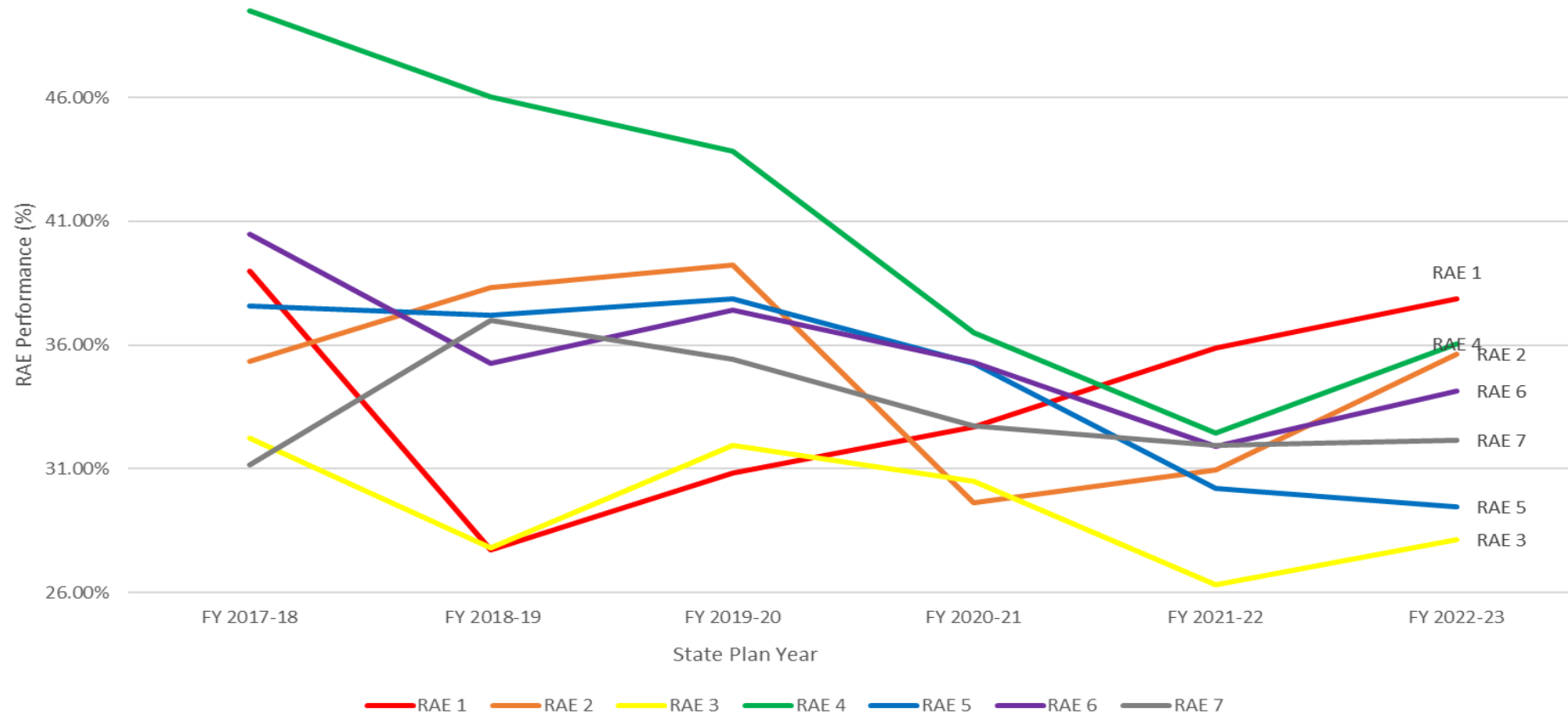
Indicator #2 - Trends/Best Practices

- Increased # of BH providers
- Partnerships with CMHCs for warm handoffs for post-hospital & ED follow-up
- RAE Care Coordination Relationships



Follow-up within 7 days of an Emergency Department (ED) Visit for Substance Use Disorder

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YEAR	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23
RAE 1	39.00%	27.75%	30.85%	32.69%	35.87%	37.88%
RAE 2	35.34%	38.33%	39.25%	29.64%	30.94%	35.65%
RAE 3	32.22%	27.83%	31.97%	30.50%	26.33%	28.16%
RAE 4	49.49%	46.03%	43.83%	36.49%	32.45%	36.07%
RAE 5	37.56%	37.22%	37.85%	35.25%	30.20%	29.46%
RAE 6	40.46%	35.25%	37.42%	35.30%	31.92%	34.15%
RAE 7	31.17%	37.01%	35.41%	32.75%	31.96%	32.15%

Goal Met
Goal Not Met

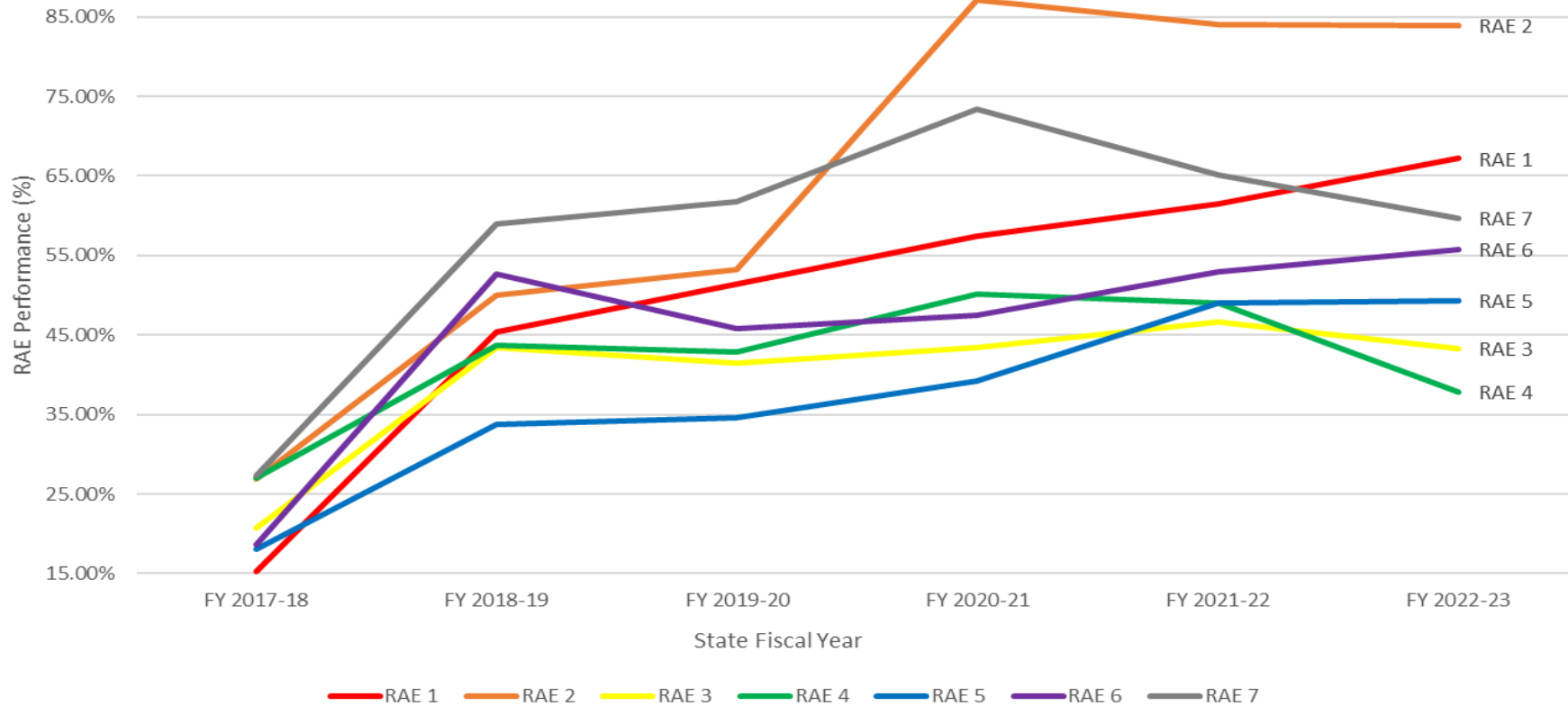


Indicator #3 - Trends/Best Practices

- Implementation of the following tactics:
 - Big push to educate partners
 - High level of collaboration with partners
 - Increased access via telehealth platforms



Follow-Up after a Positive Depression Screening
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YEAR	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23
RAE 1	15.32%	45.32%	51.47%	57.49%	61.43%	67.16%
RAE 2	26.83%	50.00%	53.25%	87.09%	83.99%	83.84%
RAE 3	20.70%	43.48%	41.50%	43.47%	46.69%	43.33%
RAE 4	27.10%	43.64%	42.87%	50.19%	49.03%	37.80%
RAE 5	18.12%	33.82%	34.64%	39.21%	48.98%	49.28%
RAE 6	18.61%	52.70%	45.87%	47.48%	52.98%	55.74%
RAE 7	27.26%	58.99%	61.75%	73.39%	65.09%	59.70%

Goal Met
 Goal Not Met



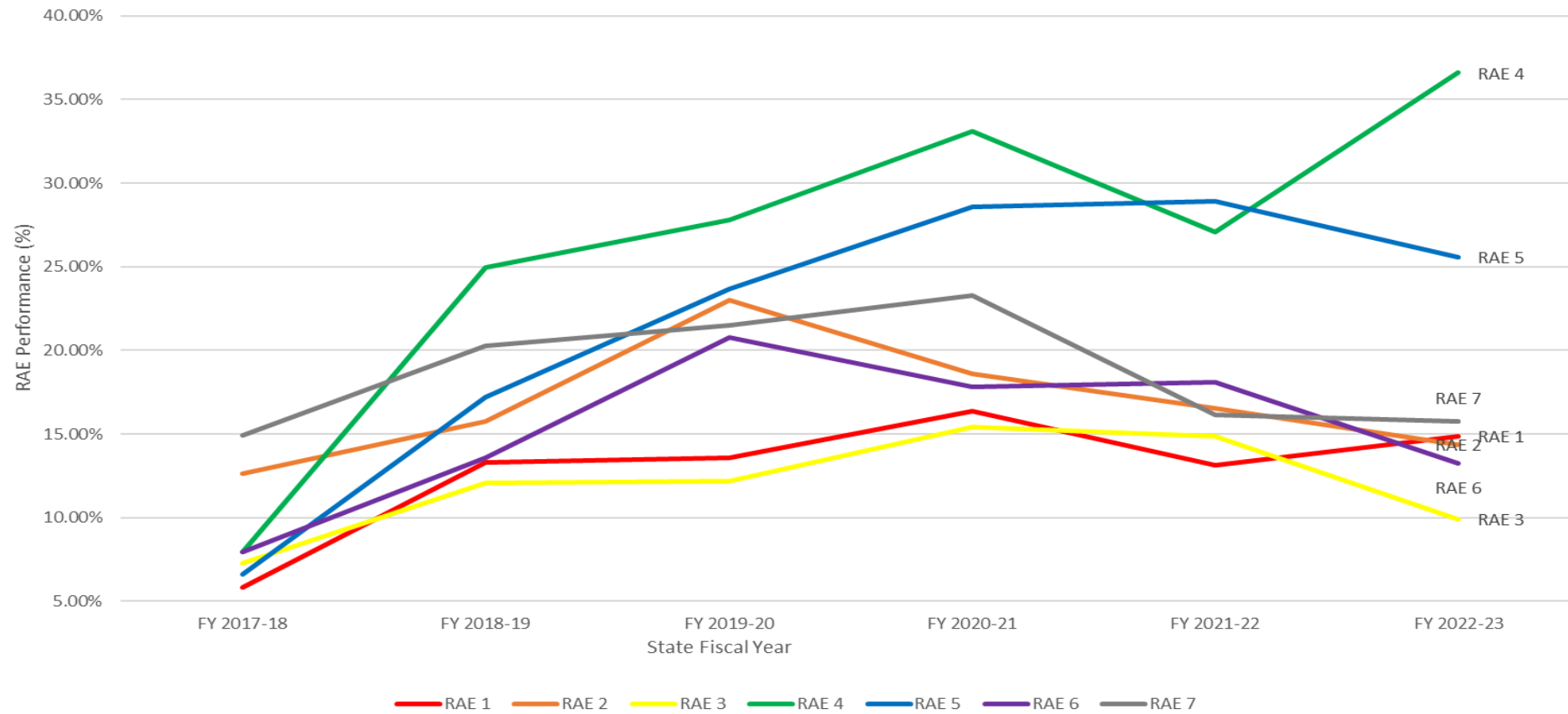
Indicator #4 - Trends/Best Practices

- Overall three RAEs met this measure and indicated the following:
 - Practice Transformation Coaching
 - Intensive work with primary care practices to increase depression screening rates & follow-up.
 - Implemented secondary interventions that focused on “value-based contracting with primary care practices
 - Evaluation of intervention effectiveness
 - Peer Workgroups



Behavioral Health Screening or Assessment for Children in the Foster Care System

Please note: FY 2022-23 is Draft data and subject to change



YEAR	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23
RAE 1	5.85%	13.29%	13.57%	16.39%	13.12%	14.86%
RAE 2	12.63%	15.76%	23.00%	18.60%	16.56%	14.38%
RAE 3	7.29%	12.05%	12.17%	15.41%	14.88%	9.92%
RAE 4	7.94%	24.93%	27.78%	33.11%	27.05%	36.59%
RAE 5	6.58%	17.20%	23.70%	28.57%	28.93%	25.58%
RAE 6	7.94%	13.59%	20.79%	17.82%	18.09%	13.25%
RAE 7	14.93%	20.26%	21.51%	23.29%	16.12%	15.73%

Note: This data does not include DH in SFY20-21

Goal Met

Goal Not Met



Indicator #5 - Trends/Best Practices

- Majority of RAEs saw a decrease from prior year.
- Challenge is the delay in data from multiple entities to HCPF to RAE
- Connecting with DHS to get that data sooner. Need a better understanding of how aid code 70 and how that will impact this measure.



Performance Measure Program Updates

- 24-25 Specification Documents
 - Key Performance Indicators
 - Performance Pool
 - BHIP
 - Depression Screening Gate Change
 - NUM = # of screenings
 - DEN = # of eligible members (no longer attached to WV)
 - Health Equity Plan Measures





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