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# PSYCKES

## High Utilization of Inpatient and Emergency Room Measures

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Technical Specifications

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**Office of  
Mental Health**

**PSYCKES**

## High Utilization of Inpatient Services

### Description:

The percentage of Medicaid enrollees/members of all ages identified as having 2 or more inpatient stays\* in the past 13 months among enrollees receiving one or more services from a behavioral health or inpatient or provider. The specific service settings of the inpatient stays are broken down into separate sub- indicators, described below.

### Eligible Population:

Age: All ages.

Inclusion Criteria: Medicaid enrollees/members who had received one or more behavioral health outpatient or inpatient service in the 9 months prior to the report date.

Exclusion Criteria: Transfers from another facility.

### Specifications:

| High Utilization – Inpatient          | Description  |
|---------------------------------------|--|
| 2+ Inpatient – Behavioral Health (BH) | Individuals with 2 or more inpatient stays for behavioral health cause (mental health and/or substance use) in the past 13 months. |
| 2+ Inpatient – Mental Health (MH)     | Individuals with 2 or more inpatient stays for mental health cause in the past 13 months.  |
| 2+ Inpatient – Medical                | Individuals with 2 or more inpatient stays for medical health cause in the past 13 months.   |
| 4+ Inpatient/ER – Mental Health (MH)  | Individuals with 4 or more inpatient stays or ER visits for mental health cause in the past 13 months.                             |
| 2+ Inpatient / 2+ ER – Summary        | A summary measure indicating the number of unique individuals who meet criteria for any of the high utilization indicators.        |

*\*Note: Rate Codes and Diagnosis codes to specify Inpatient stay are available upon request.*

## High Utilization of Emergency Room (ER) Services

### Description:

The percentage of Medicaid enrollees/members of all ages identified as having 2 or more Emergency Room visits\* in the past 13 months among enrollees receiving one or more services from an inpatient or behavioral health provider. The specific service settings of the ER visits are broken down into separate sub- indicators, described below.

### Eligible Population:

Age: All ages.

Inclusion Criteria: Medicaid enrollees/members who had received one or more behavioral health outpatient or inpatient service in the 9 months prior to the report date.

Exclusion Criteria: Transfers from another facility.

### Specifications:

| High Utilization – ER                | Description  |
|--------------------------------------|--|
| 2+ ER – Behavioral Health (BH)       | Individuals with 2 or more ER visits for behavioral health cause (mental health and/or substance use) in the past 13 months. |
| 2+ ER – Mental Health (MH)           | Individuals with 2 or more ER visits for mental health cause in the past 13 months.  |
| 2+ ER – Medical                      | Individuals with 2 or more ER visits for medical health cause in the past 13 months.   |
| 4+ Inpatient/ER – Mental Health (MH) | Individuals with 4 or more inpatient stays or ER visits for mental health cause in the past 13 months.                       |
| 2+ Inpatient / 2+ ER – Summary       | A summary measure indicating the number of unique individuals who meet criteria for any of the high utilization indicators.  |

*\*Note: Rate Codes and Diagnosis codes to specify ER visits are available upon request.*