

June 2018 Monthly Report

OMH Facility Performance Metrics and Community Service Investments

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June 2018 Monthly Report:

OMH facility performance metrics and community service investments

Report Overview:

This report is issued pursuant to the State Fiscal Year 2018-19 Budget agreement which requires that "The Commissioner of Mental Health shall provide monthly status reports of the 2018-19 community investments and the impact on inpatient census to the Temporary President of the Senate, the Speaker of the Assembly, and the Chairs of the Senate and Assembly fiscal committees. Such reports shall include state operated psychiatric facility census; occurrence of census exceeding budgeted capacity and reason; occurrence of out of catchment area placements that are due to insufficient capacity in the catchment area hospital; admissions and discharges; rate of Medicaid psychiatric inpatient readmissions to any hospital within thirty days of discharge; Medicaid emergency room psychiatric visits; descriptions of 2018-19 new community service investments; average length of stay; and number of long-term stay patients. Such reports shall include an explanation of any material census reductions, when known to the facility."

This report is comprised of several components:

- 1. State Psychiatric Center (PC) descriptive metrics;
- Description and status of community service investments;
- 3. Psychiatric readmissions to hospitals and emergency rooms for State PC discharges;
- 4. Psychiatric readmissions to hospitals and emergency rooms for Article 28 and Article 31 hospital psychiatric unit discharges.

Statewide Overview of Service Expansion:

Utilization of services developed in SFY 2014-15 through 2016-17 continued to grow during June. Planning is underway for new and enhanced services to be developed with resources funded in the SFY 2017-18 Budget.

Supported housing continued developing and serving new individuals, with over 1,550 new individuals served with the expansion capacity through June. Supported housing beds issued in the SFY 2017-18 continued serving new individuals statewide; and requests for proposals to the New York City and Long Island beds were under review during June. The new rates for supported housing units were updated during June, as reflected in the accompanying tables.

State-operated community services continued expanding their reach through eight facility service regions of the State. Statewide expansion has served over 12,100 new individuals through June, as outlined in the accompanying tables. Programs funded through Aid to Localities, including mobile crisis, Assertive Community Treatment (ACT), and peer crisis respite services, continue with start-up and expansion in all areas of the State. Over 44,600 new individuals have been served in the Aid to Localities-funded programs through June.



Table 1: NYS OMH State Psychiatric Center Inpatient Descriptive Metrics for June, 2018

	Capital Beds	Funded Capacity	Capacity Change ²	Admission	Catchment Area Placements ³	Disc	:harge ⁴	Long Stay⁵	Month	ly Average Daily C	ensus ⁶
State Inpatient	N	N	N	N	N	N	Days	N	N	N	N
Facilities ¹	Capital Beds as of end of SFY 2017- 18	June, 2018 Funded Capacity	Capacity change from previous month	# of Admissions during June 2018	# of out of catchment area placements during June, 2018	# of Discharges during June 2018	Median Length of Stay for discharges during June 2018	# of Long Stay on census 06/30/2018	Avg. daily census 04/1/2018- 04/30/2018	Avg. daily census 05/1/2018- 05/31/2018	Avg. daily census 06/1/2018- 06/30/2018
Adult											
Bronx	156	156		9		8	121	88	155	153	152
Buffalo	221	157		14		16	166	72	157	157	154
Capital District	158	109		27	1	26	17	69	108	107	105
Creedmoor	480	333		20		20	274	203	325	322	323
Elmira	104	52	1	15		10	70	15	45	45	52
Greater Binghamton	178	75		10		11	104	30	73	69	71
Hutchings	132	117		8	1	10	67	46	99	99	99
Kingsboro	254	161		14		11	243	90	160	159	159
Manhattan	476	150		17		19	166	60	146	146	148
Pilgrim	771	277		10		7	173	182	275	277	277
Rochester	222	83		10		10	221	37	80	81	80
Rockland	436	368		15		13	229	229	364	360	360
South Beach	280	237		24		20	124	91	230	221	229
St. Lawrence	84	40		7		4	178	8	33	30	34
Washington Heights	21	21		17		18	23	0	18	18	20
Total	3,973	2,336		217		203	119	1,220	2,267	2,243	2,262
Children & Youth											
Elmira	48	13		8	2	9	22	2	12	12	12
Greater Binghamton	16	14		16	2	17	23	0	13	13	13
Hutchings	30	23		18	5	17	40	0	19	19	19
Mohawk Valley	32	32		40		47	17	2	32	31	29
NYC Children's Center	184	102		20		21	93	31	89	97	101
Rockland CPC	56	20		12		18	42	1	20	20	15
Sagamore CPC	77	54		12		11	102	20	41	41	41
South Beach	12	11		3		3	58	3	10	10	11
St. Lawrence	29	28		26	1	33	22	0	28	23	22
Western NY CPC	46	46		12		19	104	7	43	44	42
Total	530	343		167		195	29	66	307	311	304
Forensic											
Central New York	450	179		29		24	75	18	100	99	97
Kirby	220	196		18		23	92	87	191	196	196
Mid-Hudson	340	288		21		24	79	149	281	285	279
Rochester	84	84		3		3	335	57	84	84	84
Total	1,094	747		71		74	82	311	656	664	655

Updated as of July 5, 2018

- 1. Research units and Sexual Offender Treatment Programs (SOTP) were excluded.
- 2. Capacity increases in this report for Elmira reflect a temporary increase associated with need that exceeds previously-funded bed levels. Staffing levels are adjusted as needed to accommodate such changes.
- 3. Catchment area placements are defined as: The number of individuals referred to this facility but admitted outside of its catchment area due to insufficient capacity at the time of referral.
- 4. Discharge includes discharges to the community and transfers to another State IP facility.
- 5. Long Stay is defined as: Length of stay over one year for adult and forensic inpatients, and over 90 days for child inpatients.
- 6. Monthly Average Daily Census defined as: Total number of inpatient service days for a month divided by the total number of days in the month. Population totals displayed may differ from the sum of the facility monthly census values due to rounding.



Table 2: Transformation and Article 28/31 Reinvestment Summary - By Facility

OMH Facility	Target Population	Prior Capacity ¹	Reinvestment Expansion	Annualized Reinvestment	Allocated	New Individua Served
		HCBS	Waiver Slots			
Greater Binghamton	Children	60	12	\$315,516	\$315,516	58
Imira	Children	90	12	\$315,516	\$315,516	28
t. Lawrence	Children	78	12	\$315,516	\$315,516	38
agamore	Children	192	60	\$1,488,240	\$1,488,240	201
/estern NY	Children	110	24	\$631,032	\$631,032	91
ochester	Children	100	-	φοσ1,002	-	-
ew York City	Children	600	78	\$1,749,440	\$1,749,440	145
ockland	Children	177	30	\$323,118	\$323,118	118
utchings	Children	72	18	\$473,274	\$473,274	55
Subtotal	Children	1,479	246	\$5,611,652	\$5,611,652	734
Subiolai				\$3,011,032	\$5,011,032	734
		Supported H	ousing Beas			
reater Binghamton	Adults	289	88	\$739,258	\$739,258	148
mira	Adults	517	82	\$735,194	\$735,194	108
. Lawrence	Adults	306	55	\$459,150	\$459,150	97
lgrim	Adults	2,245	208	\$4,063,494	\$3,563,664	203
ıffalo	Adults	1,196	112	\$992,368	\$992,368	164
ochester	Adults	555	125	\$1,135,163	\$1,135,163	208
ew York City	Adults	8,776	364	\$7,490,770	\$6,324,500	280
ockland	Adults	1,841	145	\$2,002,184	\$2,002,184	177
apital District PC	Adults	659	84	\$631,636	\$631,636	94
ıtchings	Adults	837	42	\$341,502	\$341,502	75
Subtotal		17,221	1,305	\$18,590,719	\$16,924,619	1,554
		State-Co	mmunity			
reater Binghamton				\$5,740,000	\$4,378,500	4,252
mira				00 700 :	A O ==== :==	
. Lawrence				\$2,736,160	\$2,736,160	2,126
agamore				\$3,570,000	\$1,820,000	1,619
grim					\$1,750,000	1,021
estern NY				\$1,050,000	\$1,050,000	904
iffalo				\$490,000	\$490,000	251
ochester				\$2,145,440	\$2,145,440	820
ew York City				\$2,660,000	\$1,470,000	592
ockland				\$2,000,000		
				\$770,000	\$280,000	33
apital District PC					\$420,000	52
utchings Subtotal				\$1,068,400 \$20,230,000	\$1,068,400 \$17,608,500	465 12,135
		Aid to Lo	ocalities			
reater Binghamton					\$954,921	3,946
Imira				\$1,690,288	\$703,574	1031
				£4.004.000		
. Lawrence				\$1,331,000	\$1,330,998	3,369
agamore				\$5,866,000	\$5,512,338	128
lgrim						5,023
estern NY				-	-	-
ıffalo				\$2,989,517	\$2,989,517	3,813
ochester				\$3,173,000	\$3,173,000	1830
ew York City				\$7,432,000	\$7,430,938	1729
ockland					\$4,228,116	7,445
apital District PC				\$5,740,000	\$430,000	36
utchings Subtotal				\$1,077,000 \$29,298,805	\$1,077,000 \$27,830,402	892 29,242
		State	wide			
uicide Prevention, Forensics and Susta	ined Engagement			\$2,500,000	\$2,500,000	
esidential Stipend Adjustment	za Engagomont			\$5,725,636	\$5,725,636	N/A
						404
eer Specialist Certification				N/A	N/A	184
NF Transition Supports Subtotal				\$5,500,000 \$13,725,636	\$5,500,000 \$13,725,636	166
Suptotal				⊉13,123,03 6	\$13,725,636	
		2017-18 Investm	nents Available*		*Allocated funds for SF\	/ 2017-18 will be
d to Localities				\$4,527,958 \$4,527,958	distributed by facility ser approval of local and re-	vice area upon
TOTAL TRANSFORMATION				\$91,984,770	\$81,700,809	44,015
. O.ME TRANSPORMATION		Article 28/31 F	Reinvestment	40.,001,110	ψο 1,7 σοςσσο	77,010
. James Mercy (WNY)	Child & Adult	N/A	N/A	\$894,275	\$894,275	2,737
edina Memorial (WNY)	Adults	N/A	N/A	\$199,030	\$199,030	931
edina Memoriai (WIVI)	Child & Adult	N/A	N/A	\$10,254,129	\$10,254,129	1,888
olliswood/Stony Lodge/Mt Sinai (NYC)		N/A	N/A		\$4.634.577	5.901
olliswood/Stony Lodge/Mt Sinai (NYC) ony Lodge/Rye (Hudson River)	Child & Adult	N/A	N/A	\$4,634,577	\$4,634,577 \$2,910,400	5,901 3,981
olliswood/Stony Lodge/Mt Sinai (NYC) ony Lodge/Rye (Hudson River) BMC/NSUH/PK (Long Island)				\$4,634,577 \$2,910,400	\$2,910,400	3,981
olliswood/Stony Lodge/Mt Sinai (NYC) tony Lodge/Rye (Hudson River) BMC/NSUH/PK (Long Island) Subtotal	Child & Adult	N/A	N/A	\$4,634,577		

^{1.} Prior capacity refers to the program capacity at the end of State fiscal year 2013-14; before Transformation investments began.



			Table 3a	: Greater Bir	nghamton Health Center				
					Investment F	Investment Plan Progress			
Service	Target Population	County	Prior Capacity	Reinvestment Expansion (units)	Status Update	Start Up Date	New Individuals Served	Annualized Reinvestment Amount (\$)	
HCBS Waiver	Children	Broome	24	6	Otatus Opuato	4/1/2014	32	\$157,758	
HCBS Waiver	Children	Tioga	6	6	1	6/5/2014	26	\$157,758	
SUBTOTAL:	0111101011	gu	30	12		0/0/2011	58	\$315,516	
								40.10,0.10	
Supported Housing	Adult	Broome	161	53		8/1/2014	108	\$430,943	
Supported Housing	Adult	Chenango	46	8		10/1/2014	9	\$65,048	
Supported Housing	Adult	Delaware	27	6		1/1/2016	1	\$48,786	
Supported Housing	Adult	Otsego	30	8		6/1/2015	8	\$66,664	
Supported Housing	Adult	Tioga	25	3		7/1/2015	7	\$26,157	
Supported Housing	Adult	Tompkins	0	10		11/1/2014	15	\$101,660	
SUBTOTAL:			289	88			148	\$739,258	
State Resources:			N/A						
Mobile Integration Team ¹	Adults &	Southern Tier	IN/A					†	
Mobile integration ream	Children	Service Area		38.35 FTEs		6/1/2014	3,533	\$1,342,250	
Clinic Expansion ¹	Adult	Southern Tier							
		Service Area		7.2 FTEs		1/1/2015	353	\$252,000	
OnTrack NY Expansion	Adult	Southern Tier							
		Service Area		3 FTE		2/2/2017	20	\$210,000	
SUBTOTAL:							3,906	\$1,804,250	
		_							
Aid to Localities:		Eastern Southern Tier Service Area	N/A	N/A					
Crisis Intervention Team (CIT)	Adults & Children	Broome	IN/A	IN/A		9/14/2015	2,598	\$80,400	
Engagement & Transitional Support	Adults &	Chenango &					,	****,	
Services Program	Children	Delaware				12/28/2015	258	\$160,800	
Family Stabilization Program	Children	Otsego				6/27/2016	41	\$80,400	
Warm Line Program	Adult	Tioga				6/11/2016	60	\$35,040	
Drop-In Center	Adult	Tioga				11/1/2015	103	\$45,360	
Crisis Stabilization Team	Adult	Broome				4/30/2018	24	\$80,000	
Peer-In-Home Companion Respite	Adult	Broome				8/1/2017	124	\$42,000	
Enhanced Outreach Services	Adults & Children	Chenango				8/1/2017	106	\$80,000	
Enhanced Outreach Services	Adults & Children	Delaware				8/1/2017	627	\$80,000	
Enhanced Child & Family Support Services	Children	Otsego			Funding has been made available on the county State Aid Letter, and is effective July 1, 2017.		N/A	\$54,958	
System Monitoring Support	Adult & Children	Otsego				9/1/2017	N/A	\$25,042	
Crisis/Respite Program Expansion ²	Adult	Tompkins				1/1/2018	5	\$190,921	
SUBTOTAL:							3,946	\$954,921	

State Resources - In I	Development:		\$1,306,971
	TOTAL:	8,058	\$5,120,916

^{1.} State Resources program funding is shared with Elmira service area. State Resources subtotal reflects 50% of the full Southern Tier allocation, with the remainder in Table 3b.

2. Reinvestment funding \$50,921 previously allocated for Transitional Housing Program in Tompkins county on Table 3b was reallocated to a new Crisis/Respite Program Expansion in Tompkins county on Table 3a by combining with \$140,000 unallocated Aid to Localities funding on Table 3a.

					sychiatric Center Investment Plan Progress				
				Reinvestment		Fiall Flogiess	New	Annualized	
	Target		Prior	Expansion			Individuals	Reinvestmer	
Service	Population	County	Capacity	(units)	Status Update	Start Up Date	Served	Amount (\$)	
HCBS Waiver	Children	Seneca	6	3	Giaida opadic	6/5/2014	9	\$78,879	
HCBS Waiver	Children	Steuben	12	3		6/5/2014	11	\$78,879	
HCBS Waiver	Children	Wayne	12	6		6/5/2014	8	\$157,758	
SUBTOTAL:	Cilidien	vvayrie	36	12		0/0/2014	28	\$315,516	
002101712.			- 55					ψο το,ο το	
Supported Housing	Adult	Allegany	35	2		11/1/2014	3	\$17,438	
Supported Housing	Adult	Cattaraugus	0	1		2/1/2015	1	\$8,719	
Supported Housing	Adult	Chemuna	121	31		9/1/2014	40	\$275,869	
Supported Housing	Adult	Ontario	64	13		10/1/2014	18	\$118,339	
Supported Housing	Adult	Schuyler	6	6		12/1/2015	3	\$52,314	
Supported Housing	Adult	Seneca	28	9		8/1/2014	14	\$80,091	
Supported Housing	Adult	Steuben	119	8		9/1/2014	9	\$69,752	
Supported Housing	Adult	Tompkins	64	4		9/1/2014	8	\$40,664	
Supported Housing	Adult	Wayne	70	4		10/1/2014	6	\$36,412	
Supported Housing	Adult	Yates	10	4		6/1/2015	6	\$35,596	
SUBTOTAL:	710011	1 0100	517	82		0/1/2010	108	\$735,194	
302.0			• • • • • • • • • • • • • • • • • • • •					V. 55, 15 1	
State Resources:			N/A						
Mobile Integration Team ¹	Adults &	Southern Tier							
Wobile integration ream	Children	Service Area		38.35 FTEs		6/1/2014	3,533	\$1,342,250	
Clinic Expansion ¹	Adult	Southern Tier		00.001120		6/ 1/2011	0,000	ψ.,σ.i2,2σσ	
Cliffic Expansion	riadit	Service Area		7.2 FTEs		1/1/2015	353	\$252,000	
Crisis/respite Unit	Children	Elmira PC		7.21120		17 172010	000	Ψ202,000	
Cholo/100pilo Chil	Official	Service Area		12.5 FTEs		4/16/2015	346	\$875,000	
Clinic Expansion	Children	Elmira PC		12.01120		1/10/2010	0.10	φοι σ,σσσ	
Cimio Expansion	Official	Service Area		1.5 FTEs		9/1/2014	N/A	\$105,000	
SUBTOTAL:		001110071100		1.01120		0/1/2011	4,232	\$2,574,250	
002101712.							4,202	Ψ <u>2</u> ,01-4, <u>2</u> 00	
Aid to Localities:		Western							
7.10.10 20001111001		Southern Tier/							
		Finger Lakes							
		Service Area	N/A	N/A					
Respite Services	Adult	Western	,,	1471		3/1/2016	76	\$50.368	
Community Support Services	Adult	Southern Tier/				5/1/2016	530	\$61,947	
Family Support	Adult	Finger Lakes				3/7/2017	6	\$34,887	
Peer Training	Adult	Service Area				12/5/2015	281	\$10,538	
Transitional Housing Program	Adult	Steuben				7/1/2015	53	\$101,842	
Transitional Housing Program	Adult	Yates				4/8/2016	27	\$50,921	
Mobile Psychiatric Supports	Adult	Wayne			Funding has been made available on the	17072010		φοσ,σΞ.	
Modile i Sydillatile Gupports	/ tduit	· · · ayııc			county State Aid Letter, and is effective				
					January 1, 2017.			\$40,576	
Community Support Program	Adult	Chemung			bandary 1, 2017.			ψ10,010	
Expansion - Long Stay Team	Addit	onemany				7/1/2017	58	\$108,000	
Home-Based Crisis Intervention	Children	Chamuna			Funding has been made available on the	7/1/2017	30	\$100,000	
Program Expansion	Ciliuleli	Chemung			county State Aid Letter, and is effective				
FIUGIAIII EXPAIISIUII								\$244.405	
SUBTOTAL:					October 1, 2017.	-	1031	\$244,495 \$703,574	
				i e	1	1	10.51	1 3/03.3/4	

State Resources - In Development:		\$53,786
Aid to Localities - In Development:		\$30,793
TOTAL:	5,399	\$4,413,113

^{1.} State Resources program funding is shared with Binghamton service area. State resources subtotal reflects 50% of the full Southern Tier allocation, with the remainder in Table 3a.

*Note: Reinvestment funding \$50,921 previously allocated for Transitional Housing Program in Tompkins county on Table 3b was reallocated to a new Crisis/Respite Program Expansion in Tompkins county on Table 3a by combining with \$140,000 unallocated Aid to Localities funding on Table 3a.

Table 3c: St. Lawrence Psychiatric Center										
					Investr	nent Plan Progres				
				Reinvestment	Status Update	Start Up Date	New Individuals	Annualized		
	Target	_	Prior	Expansion			Served	Reinvestment		
Service	Population	County	Capacity	(units)				Amount (\$)		
HCBS Waiver	Children	Essex	12	6		6/5/2014	14	\$157,758		
HCBS Waiver	Children	St. Lawrence	18	6		5/1/2014	24	\$157,758		
SUBTOTAL:			30	12			38	\$315,516		
Over a set of House in a	A -114	Olimetaria	F.4			40/4/0044	40	COC CO 4		
Supported Housing	Adult	Clinton	54	8		10/1/2014 3/1/2015	16 9	\$66,664 \$49,998		
Supported Housing Supported Housing	Adult Adult	Essex Franklin	29 42	6 5		1/1/2015	10	\$49,998 \$40,655		
						11/1/2014	14			
Supported Housing Supported Housing	Adult Adult	Jefferson Lewis	57 51	9 2		2/1/2015	5	\$82,296 \$16,262		
	Adult	St. Lawrence	73	25		1/1/2015	43	\$203,275		
Supported Housing SUBTOTAL:	Adult	St. Lawrence	306	55		1/1/2013	97	\$459,150		
SOBIOTAL.			300	33			31	\$439,130		
State Resources:			N/A							
Mobile Integration Team	Adults &	St. Lawrence								
· ·	Children	PC Service								
		Area		21 FTEs		6/6/2014	1,844	\$1,470,000		
Clinic expansion	Children	Jefferson		6.5 FTEs		9/8/2015	156	\$455,000		
Crisis/respite Unit ¹	Children	St. Lawrence								
		PC Service								
		Area		11.5 FTEs		10/1/2016	126	\$811,160		
SUBTOTAL:							2,126	\$2,736,160		
Aid to Localities:		St. Lawrence								
		PC Service								
		Area	N/A	N/A		0///00/-		1 10.000		
Outreach Services Program	Adult	Clinton				2/1/2015	98	\$46,833		
Mobile Crisis Program	Adult	Essex				4/28/2015	223	\$23,417		
Community Support Program	Children	Essex				3/1/2015	270	\$23,416		
Mobile Crisis Program	Adults &	St. Lawrence				7/1/2015	500	\$46,833		
Support Services Program	Children Adult	Franklin				3/15/2015	508 47	\$46,833 \$12,278		
Self Help Program	Adult	Franklin				3/15/2015	115	\$12,277		
Outreach Services Program	Adults &	Franklin				3/13/2013	113	\$12,211		
Outreach Services Flogram	Children	I I GI IN III I		1		3/15/2015	820	\$12,278		
Crisis Intervention Program	Adults &	Franklin				3/13/2013	020	Ψ12,210		
- Indiana in Togram	Children			1		6/1/2015	60	\$10,000		
Outreach Services Program	Adults &	Lewis		1		5,20.0		Ţ.I,000		
	Children					1/4/2016	263	\$46,833		
Outreach Services Program	Adult	Jefferson				9/28/2015	917	\$46,833		
Non-Medicaid Care Coordination	Children	Jefferson				9/1/2017	20	\$200,000		
Child & Family Support Team	Children	St. Lawrence				2/12/2018	28	\$200,000		
Therapeutic Crisis Respite Program	Children	Jefferson			Funding has been made available on th					
					county State Aid Letter, and is effective					
					July 1, 2018.			\$650,000		
SUBTOTAL:							3,369	\$1,330,998		

TOTAL: 5,630 \$4,841,824



	Table 3d: Sagamore Children's Psychiatric Center										
		Tabl	e 3d: Sag	amore Child							
					Inves	tment Plan Pro	gress				
				Reinvestment				Annualized			
	Target		Prior	Expansion			New Individuals	Reinvestment			
Service	Population	County	Capacity	(units)	Status Update	Start Up Date	Served	Amount (\$)			
HCBS Waiver	Children	Nassau	90	24		10/1/2013	89	\$661,440			
HCBS Waiver	Children	Suffolk	102	30		5/6/2014	81	\$826,800			
SUBTOTAL:			192	54			170	\$1,488,240			
State Resources:			N/A								
Family Court Evaluation	Children	Long Island		1 FTE		4/1/2014	N/A	\$70,000			
Mobile Crisis	Children	Suffolk		1 FTE		7/1/2014	1,024	\$70,000			
Mobile Integration Team	Children	Nassau &									
S .		Suffolk		10 FTEs		11/30/2014	201	\$700,000			
Clinic Expansion ¹	Children	Nassau &									
		Suffolk		5 FTEs		3/21/2016	71	\$350,000			
Crisis/respite Unit	Children	Nassau &									
		Suffolk		9 FTEs		3/9/2015	323	\$630,000			
SUBTOTAL:							1,619	\$1,820,000			
Aid to Localities:		Long Island	N/A	N/A							
6 Non-Medicaid Care	Children	Suffolk									
Coordinators						4/1/2016	116	\$526,572			
1.5 Intensive Case Managers	Children	Suffolk			State Aid & State Share of						
					Medicaid*	4/1/2016	12	\$81,299			
Non-Medicaid Case	Children	Nassau			Funding has been made						
Management			1		available on the county State Aid			\$85,000			
Mobile Crisis Team	Adults &	Nassau			Letter, and is effective July 1,						
	Children				2017.			\$225,700			
SUBTOTAL:							128	\$918,571			

Aid to Localities - In	Aid to Localities - In Development:			
	TOTAL:	1,917	\$4,506,811	

1. A portion of previously allocated and unused clinic FTEs have been reprogrammed for future planning.



^{*} Gross Medicaid projected \$100,690

			l able	e 3e: Pilgrim	Psychiatric Center			
					Inv	estment Plan Pr	ogress	
				Reinvestment				Annualized
	Target		Prior	Expansion			New Individuals	Reinvestment
Service	Population	County	Capacity	(units)	Status Update	Start Up Date	Served	Amount (\$)
Supported Housing	Adult	Nassau	885	83		3/1/2015	73	\$1,422,039
Supported Housing	Adult	Suffolk	1,360	125		12/1/2014	130	\$2,141,625
SUBTOTAL:			2,245	208			203	\$3,563,664
State Resources:			N/A					
Clinic Expansion	Adult	Nassau & Suffolk		5 FTEs		11/20/2015	44	\$350,000
Mobile Integration Team	Adult	Nassau &						
		Suffolk		20 FTEs		1/11/2016	977	\$1,400,000
SUBTOTAL:			1				1,021	\$1,750,000
Aid to Localities:		Long Island	N/A	N/A				
2 Assertive Community	Adult	Nassau			State Aid & State Share of			
Treatment teams*				136	Medicaid*	3/1/2015	172	\$1,158,299
Three (3) Mobile Crisis	Adults &	Nassau &						
Teams	Children	Suffolk				8/1/2015	3,892	\$758,740
Hospital Alternative Respite	Adult	Suffolk						
Program						7/6/2016	57	\$532,590
Recovery Center	Adult	Suffolk				4/15/2016	532	\$250,000
Mobile Crisis Team	Adults &	Nassau &						
Expansion - Long Stay Team1	Children	Suffolk				7/1/2016	See Table 3n ¹	\$272,948
Mobile Residential Support Team Expansion - Long Stay	Adult	Suffolk						
Team						7/1/2016	370	\$275,186
Crisis Program Expansion -	Adult	Nassau			Funding has been made available			
Long Stay Team					on the county State Aid Letter,			
3 ,					and is effective July 1, 2016.			\$230,864
Crisis Stabilization Center	Adult	Suffolk	İ	İ	Funding has been made available			\$804,440
Mobile Crisis Team ²	Adults &	Nassau			on the county State Aid Letter,			*
	Children		1		and is effective July 1, 2017.			\$225,700
Client Financial Management	Adult	Nassau]			
Services ²								\$85,000
SUBTOTAL:							5,023	\$4,593,767

Supported Housing - In Develop	\$499,830		
State & Local Resources- In Developme	nt ^{2, 3:}		\$144,160
ТО	TAL:	6.247	\$10.551.421

^{*} Gross Medicaid projected \$1,827,048; State Share adjusted to reflect current model

- 1. The Mobile Crisis Team expansion in Suffolk County is funded by Long Island Art. 28 reinvestment funding and Pilgrim PC Aid to Localities funding. The number of newly served individuals is only reflected on Table 3n, so as not to duplicate the number of individuals served.
- 2. Previously undeveloped State FTE resources converted to support new local Mobile Crisis and Client Financial Management programming. Additional unallocated resources shifted to Table 3h.
- 3. State Resources funding In Development \$70,000 previously allocated to NYC PC on Table 3h was reallocated to Pilgrim PC on Table 3e by combining with \$74,160 Aid to Localities funding- In Development on Table 3e.



		Table 3f:	Western N	NY Children's	s - Buffalo Psychiatric Cente	er			
						Investment Plan Progress			
				Reinvestment		`		Annualized	
	Target		Prior	Expansion			New Individuals	Reinvestment	
Service	Population	County	Capacity	(units)	Status Update	Start Up Date	Served	Amount (\$)	
HCBS Waiver	Children	Allegany	0	6	·	6/5/2014	18	\$157,758	
HCBS Waiver	Children	Cattaraugus	12	6		11/1/2013	19	\$157,758	
HCBS Waiver	Children	Chautauqua	6	6		6/5/2014	26	\$157,758	
HCBS Waiver	Children	Erie	78	6		4/1/2014	28	\$157,758	
SUBTOTAL:			96	24			91	\$631,032	
		_							
Supported Housing	Adult	Cattaraugus	104	12		7/1/2014	19	\$104,628	
Supported Housing	Adult	Chautauqua	86	12		8/1/2014	16	\$104,628	
Supported Housing	Adult	Erie	863	66		8/1/2014	95	\$587,334	
Supported Housing	Adult	Niagara	143	22		9/1/2014	34	\$195,778	
SUBTOTAL:			1,196	112			164	\$992,368	
State Resources:			N/A						
Mobile Integration Team	Children	Western NY	IN//A						
Weblie integration ream	Ormaron	CPC Service							
		Area		10 FTEs		12/19/2014	733	\$700,000	
Clinic Expansion	Children	Western NY		101120		12/10/2011	700	ψ100,000	
Clinic Expansion	Offiliation	CPC Service							
		Area		4 FTEs		2/5/2015	131	\$280,000	
Mobile Mental Health Juvenile	Children	Western NY		71123		2/3/2013	101	Ψ200,000	
Justice Team	Cilidien	CPC Service							
Justice Team		Area		1 FTE		12/1/2015	40	\$70,000	
Mobile Integration Toom	۸ مار راه	Buffalo PC	1	1111		12/1/2013	40	Ψ10,000	
Mobile Integration Team	Adult			7 FTEs		1/12/2016	054	\$490,000	
SUBTOTAL:		Service Area		/ FIES		1/12/2010	251 1,155	\$1,540,000	
SOBIOTAL.							1,100	ψ1,040,000	
Aid to Localities:									
Peer Crisis Respite Center	Adult	Chautauqua							
(including Warm Line)		and							
,		Cattaraugus				11/18/2015	175	\$315,000	
Mobile Transitional Support	Adult	Chautauqua					-	, , , , , , ,	
Teams (2)		and							
,		Cattaraugus				1/1/2015	541	\$234,000	
Peer Crisis Respite Center	Adult	Erie				1/1/2013	341	Ψ234,000	
(including Warm Line)	Addit	Liic				1/26/2015	628	\$353,424	
Mobile Transitional Support	Adult	Erie				1/20/2010	020	φοσο, : <u>Σ</u> :	
Teams (3)	7 taut	2110				1/26/2015	500	\$431,000	
Crisis Intervention Team	Adults &	Erie							
	Children					1/1/2015	872	\$191,318	
Peer Crisis Respite Center	Adult	Niagara							
(including Warm Line)						12/1/2014	763	\$256,258	
Mobile Transitional Support	Adult	Niagara							
Team						1/20/2015	211	\$117,000	
Community Integration Team -	Adult	Erie							
Long Stay Team						10/27/2016	70	\$350,000	
Diversion Program	Adult	Erie	Ì			1/12/2018	53	\$424,712	
Reintegration Enhanced			Ì		Funding has been made available				
Support Program	Adult	Erie			on the county State Aid Letter,			1	
',' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		'			and is effective April 1, 2018.			\$316,805	
SUBTOTAL:			1	1			3,813	\$2,989,517	

TOTAL: 5,223 \$6,152,917



					ychiatric Center	Investment Plan Progress				
				Reinvestment	IIIVCSI	anonti lan riog	1000	Annualized		
	Target		Prior	Expansion			New Individuals	Reinvestment		
Service	Population	County	Capacity	(units)	Status Update	Start Up Date	Served	Amount (\$)		
Supported Housing	Adult	Genesee	45	2	Ciaius Opaais	1/1/2016	4	\$17,798		
Supported Housing	Adult	Livingston	38	2		2/1/2015	4	\$18,206		
Supported Housing	Adult	Monroe	427	103		10/1/2014	179	\$937,609		
Supported Housing	Adult	Orleans	25	6		7/1/2015	6	\$54,618		
Supported Housing	Adult	Wayne	0	6		12/1/2014	7	\$54,618		
Supported Housing	Adult	Wyoming	20	6		11/1/2014	8	\$52,314		
SUBTOTAL:	Adult	vvyorning	555	125		11/1/2014	208	\$1,135,163		
SUBTUTAL.			555	123			200	\$1,133,163		
State Resources:			N/A							
Mobile Integration Team	Adult	Rochester PC	14/71							
	Addit	Service Area		24 FTEs		10/30/2014	684	\$1,680,000		
OnTrackNY Expansion	Adult	Rochester PC		211120		10/00/2011	00.	ψ.,σσσ,σσσ		
Cirridonivi Expandion	ridait	Service Area		2 FTEs		3/21/2016	39	\$185,440		
Clinic Expansion	Adult	Rochester PC		220		0/21/2010	00	ψ.ου,υ		
Cirilo Expandion	ridait	Service Area		4 FTEs		1/1/2015	97	\$280,000		
SUBTOTAL:		COLVICO 7 II CO				17 172010	820	\$2,145,440		
0021017(2)							020	\$2,110,110		
Aid to Localities:		Rochester PC								
		Service Area	N/A	N/A						
Peer Bridger Program	Adult	Genesee &								
0 0		Orleans				6/4/2015	25	\$30,468		
Community Support Team	Adult	Rochester PC								
,		Service Area				3/1/2015	139	\$500,758		
Peer Bridger Program	Adult	Livingston								
		Monroe								
		Wayne								
		Wyoming				2/1/2015	139	\$262,032		
Crisis Transitional Housing	Adult	Livingston				2/15/2015	37	\$112,500		
Crisis Transitional Housing	Adult	Orleans				7/30/2015	40	\$112,500		
Crisis Transitional Housing	Adult	Wayne				4/8/2015	53	\$112,500		
Crisis Transitional Housing	Adult	Wyoming				2/28/2015	46	\$112,500		
Peer Run Respite Diversion	Adult	Monroe				5/7/2015	776	\$500,000		
Assertive Community	Adult	Monroe			State Aid & State Share of					
Treatment Team				48	Medicaid*	7/1/2015	62	\$390,388		
Assertive Community	Adult	Monroe			State Aid & State Share of					
Treatment Team				48	Medicaid*		94	\$390,388		
Peer Support ¹	Adult	Monroe				1/15/2016		\$30,006		
Enhanced Recovery Supports	Adult	Wyoming					1	+,000		
Cappoin	, .aun	,				9/1/2014	263	\$51,836		
Recovery Center	Adult	Genesee &						. , -		
-		Orleans				5/7/2015	97	\$217,124		
Community Support Team -	Adult	Monroe						•		
Long Stay Team						5/1/2016	59	\$350,000		
SUBTOTAL:							1,830	\$3,173,000		

TOTAL: 2,858 \$6,453,603



^{*}Gross Medicaid projected \$621,528 per ACT Team (\$1,243,056)

^{1.} Peer support is an enhancement of the ACT model, and individuals served by the ACT Team also receive peer support.

		Ta	ble 3h: Ne	w York City	Psychiatric Centers			
			1	 	-	restment Plan Prod	aress	
				Reinvestment		T .	,	Annualized
	Target		Prior	Expansion			New Individuals	Reinvestment
Service	Population	County	Capacity	(units)	Status Update	Start Up Date	Served	Amount (\$)
HCBS Waiver	Children	Bronx	144	33		10/1/2013	57	\$916,566
HCBS Waiver	Children	Kings	180	12		1/1/2014	53	\$332,745
HCBS Waiver	Children	New York	132	6		6/1/2015	15	\$167,385
HCBS Waiver	Children	Queens	108	12		10/1/2013	20	\$332,745
SUBTOTAL:			564	63			145	\$1,749,440
Supported Housing	Adult	Bronx	2,120	70		5/1/2015	52	\$1,216,250
Supported Housing	Adult	Kings	2,698	60		7/1/2016	25	\$1,042,500
Supported Housing	Adult	New York	1,579	104		3/1/2015	137	\$1,807,000
Supported Housing	Adult	Queens	1,887	70		12/1/2016	31	\$1,216,250
Supported Housing	Adult	Richmond	492	60		4/1/2016	35	\$1,042,500
SUBTOTAL:			8,776	364			280	\$6,324,500
State Resources:			N/A					
Mobile Integration Team	Adult	Queens		7 FTEs		3/21/2016	168	\$490,000
Mobile Integration Team	Adult	New York		7 FTEs		12/23/2016	182	\$490,000
Mobile Integration Team	Children	Bronx						
		Kings						
011770741		Queens		7 FTEs		1/1/2017	242	\$490,000
SUBTOTAL:			+				592	\$1,470,000
Aid to Localities:								
Respite Capacity Expansion	Adult	NYC	N/A	N/A		7/1/2015	726	\$2,884,275
Pathway Home Program	Adult	NYC				4/1/2016	618	\$3,546,663
Crisis Pilot Program (3 Year)	Adult	NYC				9/1/2016	385	\$462,760
Hospital Based Care Transition	Adult	NYC			Funding has been made			
Team					available on direct contract,			
					effective April 1, 2017.			\$537,240
SUBTOTAL:							1,729	\$7,430,938

Supported Housing - Ir		\$1,166,270	
State Resources - In		\$1,120,000	
	TOTAL:	2,746	\$19,261,148



^{1.} State Resources funding – In Development \$70,000 previously allocated to NYC PC on Table 3h was reallocated to Pilgrim PC on Table 3e by combining with \$74,160 Aid to Localities funding- In Development on Table 3e.

		Table 3i: Ro	ckland a	nd Capital Di	strict Psychiatric Centers			
						stment Plan Prog	gress	
				Reinvestment		,		Annualized
	Target		Prior	Expansion			New Individuals	Reinvestment
Service	Population	County	Capacity	(units)	Status Update	Start Up Date	Served	Amount (\$)
HCBS Waiver	Children	Orange	21	6		11/1/2013	31	\$157,758
HCBS Waiver	Children	Rockland	24	6		6/5/2014	17	\$165,360
SUBTOTAL:			45	12			48	\$323,118
Supported Housing	Adult	Dutchess	229	20		12/1/2014	24	\$273,040
Supported Housing	Adult	Orange	262	36		10/1/2014	48	\$491,472
Supported Housing	Adult	Putnam	67	4		5/1/2015	5	\$60,896
Supported Housing	Adult	Rockland	173	19		7/1/2014	29	\$299,934
Supported Housing	Adult	Sullivan	61	10		11/1/2014	9	\$98,470
Supported Housing	Adult	Ulster	142	28		1/1/2015	35	\$297,220
Supported Housing	Adult	Westchester	907	28		4/1/2015	27	\$481,152
Supported Housing	Adult	Albany	276	11		3/1/2017	11	\$110,572
Supported Housing	Adult	Columbia	39	8		1/1/2017	8	\$80,416
Supported Housing	Adult	Greene	35	9		3/1/2015	See Table 3m ¹	\$90,468
Supported Housing	Adult	Rensselaer	125	10		6/1/2017	8	\$100,520
Supported Housing	Adult	Saratoga	50	6			3	\$60,312
Supported Housing	Adult	Schenectady	153	3		10/1/2015	See Table 3m ¹	\$30,156
Supported Housing	Adult	Schoharie	31	8		2/1/2017	6	\$80,416
Supported Housing	Adult	Warren &	54	8				^
OUDTOTAL		Washington	0.004	000		11/1/2017	9	\$78,776
SUBTOTAL:			2,604	208			222	\$2,633,820
State Resources:								
Mobile Integration Team	Adult	Rockland PC						
Wobile integration ream	Addit	Service Area		4 FTEs		2/2/2017	33	\$280,000
Mobile Integration Team	Adult	Capital District		11.120		2,2,20	00	\$200,000
mozne magration ream	, taut	PC Service						
		Area		6 FTEs		10/1/2016	52	\$420,000
SUBTOTAL:							85	\$700,000
Aid to Localities:		Rockland PC						
		Service Area	N/A	N/A				
Hospital Diversion/Crisis Respite	Adult	Dutchess				2/12/2015	193	\$200,000
Outreach Services	Adult	Orange				12/1/2014	23	\$36,924
Outreach Services	Children	Orange				10/1/2014	442	\$85,720
Advocacy/Support Services	Adult	Putnam				9/28/2015	33	\$23,000
Self-Help Program	Adult	Putnam Rockland				2/1/2015	54	\$215,000
Mobile Crisis Intervention Program ²	Adults & Children	Rockiand				0/04/0045	4.000	# 440,000
Hospital Diversion/ Transition	Adults &	Sullivan				3/31/2015	1,620	\$449,668
	Children	Sullivari				44/04/0044	4.040	#00F 000
Program ²		Hotor				11/24/2014	1,219	\$225,000
Mobile Crisis Services ²	Adults & Children	Ulster				2/9/2015	2,955	\$400,000
Assertive Community Treatment	Adult	Ulster			State Aid & State Share of	21312013	۷,٥٥٥	ψ+00,000
team expansion (48 to 68 slots)	Auuit	CISICI		20	Medicaid:	12/1/2014	107	\$100,616
Outreach Services	Adult	Westchester			ivicultalu.	4/1/2015	91	\$267,328
Crisis Intervention/ Mobile Mental	Children	Westchester						Ţ,0 <u></u> 0
Health Team						11/1/2014	151	\$174,052
Family Engagement & Support	Adults &	Rockland						·
Services Program	Children			<u> </u>		1/1/2017	338	\$95,000
Outreach Team - Long Stay Team	Adult	Albany				9/6/2016	27	\$230,000
· .		Schenectady				9/9/2016	9	\$200,000
		Dutchess				12/12/2016	9	\$225,000
		Orange				9/14/2016	18	\$225,000
		Rockland				8/17/2016	19	\$225,000
				1		10/4/2016	10	\$225,000
		Westchester						
Respite Services Program	Children	Dutchess				7/27/2017	27	\$275,000
		Dutchess Westchester				7/27/2017 9/19/2017	23	\$189,048
Home Based Crisis Intervention	Children Children	Dutchess Westchester Orange				7/27/2017 9/19/2017 9/18/2017	23 24	\$189,048 \$100,000
		Dutchess Westchester Orange Rockland				7/27/2017 9/19/2017 9/18/2017 10/23/2017	23 24 23	\$189,048 \$100,000 \$160,000
Home Based Crisis Intervention		Dutchess Westchester Orange Rockland Sullivan				7/27/2017 9/19/2017 9/18/2017 10/23/2017 2/28/2018	23 24 23 13	\$189,048 \$100,000 \$160,000 \$100,000
Home Based Crisis Intervention		Dutchess Westchester Orange Rockland				7/27/2017 9/19/2017 9/18/2017 10/23/2017	23 24 23	\$189,048 \$100,000 \$160,000

Aid to Localities -In Development: \$1,074,192

TOTAL:

7,836

Notes:



\$9,389,246

^{*} Gross Medicaid projected \$229,156

^{1.} Greene and Schenectady Counties currently receive Stony-Lodge Rye Article 28 funding for supported housing, and utilization is reported on Table 3m. Additional supported housing units were awarded to these counties through Rockland PC Aid to Localities. All utilization will continue to be reported on the Table 3m to prevent duplication.

^{2.} Mobile Crisis programs in Rockland, Sullivan and Ulster Counties are funded by the Rockland PC Aid to Localities funding and Stony-Lodge Rye Article 28 funding. The number of newly served individuals is only reflected on the Rockland PC table so as not to duplicate the number of individuals served.

			Table 3i	: Hutchings I	Psychiatric Center			
			1 43.0 0			estment Plan Pro	aress	
	_			Reinvestment				Annualized Reinvestment
	Target		Prior	Expansion	0	0 5 .	New Individuals	
Service	Population	County	Capacity	(units)	Status Update	Start Up Date	Served	Amount (\$)
HCBS Waiver	Children	Cayuga	12	6		7/1/2014	16	\$157,758
HCBS Waiver	Children	Cortland	6	6		7/1/2014	16	\$157,758
HCBS Waiver	Children	Onondaga	42	6		4/1/2014	23	\$157,758
SUBTOTAL:			60	18			55	\$473,274
Supported Housing	Adult	Cayuga	61	7		1/1/2016	9	\$56,917
Supported Housing	Adult	Cortland	53	4		1/1/2016	5	\$32,524
Supported Housing	Adult	Fulton	30	3		2/1/2017	1	\$24,393
Supported Housing	Adult	Hamilton	4	3		1/1/2017	2	\$24,393
Supported Housing	Adult	Herkimer	30	1		1/1/2017	8	\$8,131
Supported Housing	Adult	Madison	28	4		4/1/2017	5	\$32,524
Supported Housing	Adult	Montgomery	37	3		1/1/2017	3	\$24,393
Supported Housing	Adult	Oneida	232	8		2/17/2017	23	\$65,048
Supported Housing	Adult	Onondaga	300	4		10/1/2017	4	\$32,524
Supported Housing	Adult	Oswego	62	5		12/1/2015	15	\$40,655
SUBTOTAL:			837	42			75	\$341,502
State Resources:								
Crisis/respite unit	Children	Hutchings PC						
Character unit	Official	Service Area	N/A	12 FTEs		11/5/2014	424	\$840,000
OnTrackNY Expansion	Adults &	Hutchings PC						
	Children	Service Area	N/A	3 FTEs		8/1/2015	41	\$228,400
SUBTOTAL:							465	\$1,068,400
Aid to Localities:		Hutchings PC		N1/A				
		Service Area	N/A	N/A		4/4/004=		***
Children's Respite Program	Children	Onondaga		-		4/1/2017	004	\$96,750
Clinical Services & Support	Children	Onondaga		-		4/1/2017	601	\$430,555
Respite/Clinical Oversight	Children	Onondaga				4/1/2017		\$99,695
Long Stay Reduction	Adult	Onondaga				11/0/0015	40	0000 000
Transition Team						11/9/2016	10	\$300,000
Enhanced Outreach and	Adults &	Hamilton				5/11/2018	22	\$37,500
Clinical Support Services	Children	Herkimer				11/17/2017	22	\$37,500
		Fulton				11/1/2017	0	\$37,500
Enhanced Child & Family	Children	Montgomery				4/1/2017	227	¢27 500
Support Services SUBTOTAL:						4/1/2017	237 892	\$37,500
SUBTUTAL:	I		l				892	\$1,077,000

TOTAL:	1,487	\$2,960,176



Article 28 and 31 Hospital Reinvestment Summaries

Pursuant to Chapter 53 of the Laws of 2014 for services and expenses of the medical assistance program to address community mental health service needs resulting from the reduction of psychiatric inpatient services.

Hospital	Target Population	County/Region	Annualized Reinvestment Amount
		Allegany, Livingston,	
St. James Mercy	Children and Adults	Steuben	\$894,275
Medina Memorial	Adults	Niagara, Orleans	\$199,030
Holliswood/Stony Lodge/Mt. Sinai	Children and Youth	New York City	\$10,254,129
Stony Lodge & Rye	Children and Adults	Hudson River	\$4,634,577
LBMC/NSUH/PK	Children and Adults	Nassau, Suffolk	\$2,910,400

Subtotal: \$18,892,411

		Table 3k	: Western	Region Article 2	28 Hospital Reinvestme	nt		
			Investment Plan Progress					
	Target		Prior	Reinvestment Expansion		Start Up	New Individuals	Annualized Reinvestment
Service	Population	County	Capacity	(units)	Status Update	Date	Served	Amount (\$)
Article 28:			N/A					
St. Jame	es Mercy							
Intensive Intervention Services	Adult	Allegany				8/25/2014	110	\$95,000
Post Jail Transition Coordinator/Forensic Therapist	Adults & Children	Livingston				1/5/2015	1,273	\$59,275
Enhanced Mobile Crisis Outreach	Adults & Children	Steuben				11/3/2014	1,230	\$490,000
Intensive In-Home Crisis Intervention (Tri-County)	Adults & Children	Allegany Livingston Steuben				6/1/2015	124	\$250,000
SUBTOTAL:							2,737	\$894,275
Medina Mem	orial Hospita	il						
Mental Hygiene Practioner to handle crisis calls (late	Adults & Children	Niagara				0/45/0044	405	#c0 000
afternoon and evenings) Enhanced Crisis Response ¹	Adults & Children	Orleans				8/15/2014 7/1/2014	185 746	\$68,030 \$131,000
SUBTOTAL:							931	\$199,030

TOTAL:	3,668	\$1,093,305
	-,	+ -,,

1. Utilization data for this program has been recalcuated after a review of data quality issues.

		Table 3I: No	w York Ci	ty Region Article	e 28 Hospital Reinvestmen	t		
					Investme	ent Plan Pro	gress	
				Reinvestment			New	Annualized
	Target		Prior	Expansion		Start Up	Individuals	Reinvestment
Service	Population	County	Capacity	(units)		Date	Served	Amount (\$)
Holliswoo			Cupacity	(dirito)		2 4.10	00.700	γομ. (ψ)
HCBS Waiver	Children	Bronx	144	15	State Share of Medicaid:	2/1/2016	See Table 3h1	\$418,500
Crisis Beds	Children	NYC		5				\$210,000
Rapid Response Mobile	Children	NYC		-		1/1/2014	301	\$1,150,000
Family Advocates	Children	NYC				1/1/2014	709	\$450,000
4.5 Rapid Response Teams	Children	NYC				4/28/2015	308	\$1,989,569
Family Resource Center ²	Children	NYC				2/1/2016	500	\$1,335,777
High Fidelity Wrap Around	Children	NYC						\$181,865
SUBTOTAL:			i				1,818	\$5,735,711
Stony Lodge Hospital								
Partial Hospitalization	Children	NYC						
Program & Day Treatment								
Program (Bellevue)					State Share of Medicaid:			\$386,250
Home Based Crisis	Children	NYC						
Intervention Team (Bellevue)						11/1/2015	70	\$300,000
Family Resource Center ²	Children	NYC				2/1/2016	See Note ²	\$728,622
High Fidelity Wraparound	Children	NYC						\$185,128
SUBTOTAL:							70	\$1,600,000
Mount Sin	ai Hospital							
Mt. Sinai Partial	Adult	NYC						
Hospitalization (15 slots)				15	State Share of Medicaid:			\$303,966
4 Assertive Community	Adult	NYC						
Treatment Teams (68 slots								
each)				272	State Share of Medicaid:			\$1,855,694
1 Assertive Community	Adult	NYC						
Treatment Team (48 slots)				48	State Share of Medicaid:			\$384,666
Expanded Respite Capacity	Adult	NYC					293	\$374,093
SUBTOTAL:								\$2,918,418

1,888

TOTAL:

\$10,254,129

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^{1.} Waiver slots in Bronx County are funded by the NYC Aid to Localities reinvestment funding and Stony Lodge Article 28 funding. All waiver utilization is reported on the Table 3h - New York City to prevent duplication in the number of people served.

^{2.} The Family Resource Center is funded by the Holliswood Art. 28 reinvestment funding and Stony Lodge Art. 28 reinvestment funding. The number of newly served individuals is only reflected in the Holliswood Reinvestment so as not to duplicate the number of individuals served.

		Table 3m: H	ludson Ri	ver Region Articl	le 28 Hospital Reinvestmen	nt		
					-	ent Plan Pro	aress	
				Reinvestment			New	Annualized
	Target		Prior	Expansion		Start Up	Individuals	Reinvestment
Service	Population	County	Capacity	(units)	Status Update	Date .	Served	Amount (\$)
Article 28:			N/A					
Stony Lodge	/Rye Hospita	il						
HCBS Waiver Slots	Children	Albany		6	State Share of Medicaid:	12/1/2015	18	\$157,704
		Saratoga		3	State Share of Medicaid:	1/1/2015	21	\$78,803
		Warren		3	State Share of Medicaid:	1/1/2015	12	\$78,803
		Westchester		6	State Share of Medicaid:	1/1/2015	19	\$157,704
SUBTOTAL:							70	\$473,014
Article 28:			N/A					
Supported Housing	Adult	Albany		2		9/1/2015	6	\$18,570
		Greene		5		3/1/2015	15	\$46,425
		Rensselaer		7		5/1/2015	12	\$64,995
		Schenectady		7		10/1/2015	16	\$64,995
Mobile Crisis Services	Adult	Columbia				7/1/2015	1,583	\$180,636
		Greene				7/1/2015	1,434	\$203,859
		Sullivan				11/24/2014	See Table 3i ¹	\$81,447
Hospital Diversion Respite	Adult	Columbia				11/1/2015	20	\$43,560
		Greene				3/1/2015	4	\$20,337
Respite Services	Children	Columbia				3/30/2015	16	\$15,750
		Greene				3/30/2015	27	\$65,670
		Orange				6/30/2015	18	\$30,000
		Sullivan				4/1/2015	30	\$25,000
Respite Services	Adult	Dutchess				3/1/2015	217	\$25,000
		Orange				3/20/2015	45	\$60,000
		Putnam				6/1/2015	11	\$25,000
		Westchester				6/1/2015	45	\$136,460
Self Help Program	Adult	Dutchess				2/12/2015	464	\$60,000
		Orange				6/17/2015	53	\$30,000
		Westchester				4/8/2015	142	\$388,577
Family Support Services	Children	Orange				2/18/2015	157	\$30,000
		Schoharie				2/23/2015	393	\$170,000
Adult Mobile Crisis Team (5 Counties: Rensselaer, Saratoga, Schenectady, Warren-Washington)	Adult	Rensselaer				10/1/2015	479	\$1,000,190
Capital Region Respite Services (3 Counties: Albany, Rensselaer, Schenectady)	Children	Rensselaer						
Mobile Crisis Intervention	Adult	Rockland		 		7/8/2015	48	\$30,000
INDUITE CHAIS INTERVENTION	Adult	Ulster		 		3/30/2015	See Table 3i ¹	\$400,000
Mobile Crisis Team (Tri- County: Saratoga, Warren-	Children	Warren				2/9/2015	See Table 3i ¹	\$300,000
Washington) Home Based Crisis Intervention (Tri-County: Saratoga, Warren-	Children	Warren				1/1/2016	311	\$545,092
Washington) SUBTOTAL:						11/26/2013	285 5,831	\$100,000 \$4,161,563

· IATOT	5 901	\$4.634.577

^{1.} Mobile Crisis programs in Rockland, Sullivan and Ulster Counties are funded by the Rockland PC Aid to Localities funding and Stony Lodge-Rye Article 28 funding. The number of newly served individuals is only reflected on the Rockland PC table so as not to duplicate the number of individuals served.

		Table 3n. I	ona Islan	d Region Article	28 Hospital Reinvestment			
	l	Table 311. I	Long Islan		•	ent Plan Prog	aress	
				Reinvestment	1117001111	one rianti ro	New	Annualized
	Target		Prior	Expansion		Start Up	Individuals	Reinvestment
Service	Population	County	Capacity	(units)	Status Update	Date	Served	Amount (\$)
Article 28:	.,		N/A	(* **/				(.,
Long Beach Medical Center	/North Shore	University Hos	pital/Partial	Hospitalization				
Prog	ram Operated	by Pederson-	Krag					
HCBS Waiver Slots	Children	Suffolk		6	State Share of Medicaid:		31	\$165,400
SUBTOTAL:							31	\$165,400
Article 28:								
(6) Mobile Residential	Adult	Nassau						
Support Teams						7/1/2015	372	\$1,344,000
Mobile Crisis Team	Adults &	Nassau &						
Expansion ¹	Children	Suffolk				8/1/2015	3,056	\$212,000
Satellite Clinic Treatment	Adult	Nassau						
Services					State Share of Medicaid:	8/1/2016	36	\$200,000
(5) OnSite Rehabilitation	Adult	Nassau				2/1/2016	87	\$200,000
	Adult	Nassau						
Residential Support Teams								\$200,000
Help/Hot Line Expansion	Adult	Nassau						\$50,000
On-Site MH Clinic	Children	Nassau						\$50,000
(3) Clinic Treatment	Adult	Nassau						
Services	_					8/18/2016	93	\$375,000
Family Advocate	Children	Nassau				9/1/2017	337	\$84,000
Peer Outreach	Adult	Suffolk						\$30,000
SUBTOTAL:							3,981	\$2,745,000

TOTAL: 4,012 \$2,910,400

Notes:

1. The Mobile Crisis Team expansion in Suffolk County is funded by Long Island Art. 28 reinvestment funding and Pilgrim PC Aid to Localities funding. The number of newly served individuals is only reflected on the Long Island Art. RIV table (Table 3n) so as not to duplicate the number of individuals served.

^{*}Gross Medicaid projected \$420,800

Table 4: NYS OMH State Psychiatric Center Inpatient Discharge Metrics

	yernatire center inpatient discharg									
	Metrics Post Discharge									
State Inpatient Facilities ¹	Readmission ²	ER Utilization ³								
	For discharge cohort (Sep, 2017-Nov, 2017), % Having Psychiatric Readmission within 30 days	For discharge cohort (Sep, 2017-Nov, 2017 % Utilizing Psychiatric Emergency Room within 30 days								
Adult										
Bronx	17.2%	13.3%*								
Buffalo	18.5%	9.1%*								
Capital District	0.0%*	9.1%*								
Creedmoor	10.2%	9.1%								
Elmira	11.1%*	0.0%*								
Greater Binghamton	15.2%	5.0%								
Hutchings	10.3%	21.4%*								
Kingsboro	15.8%*	7.1%*								
Manhattan	35.8%	5.3%								
Pilgrim	14.3%	0.0%*								
Rochester	8.7%	9.1%*								
Rockland	5.6%	0.0%								
South Beach	20.7%	12.8%								
St. Lawrence	14.3%	0.0%*								
Washington Heights	5.0%	10.5%*								
Total	15.5%	7.9%								
Children & Youth										
Elmira	8.3%	16.7%								
Greater Binghamton	3.4%	16.0%								
Hutchings	7.4%	12.0%								
Mohawk Valley	6.9%	6.9%								
NYC Children's Center	11.7%	9.3%								
Rockland CPC	12.5%	9.1%								
Sagamore CPC	12.9%	3.7%								
South Beach	25.0%*	33.3%*								
St. Lawrence	11.8%	15.6%								
Western NY CPC	0.0%	10.5%*								
Total	9.3%	10.8%								
Forensic										
Central New York	11.1%	0.0%*								
Kirby	9.7%	0.0%								
Mid-Hudson	8.3%	2.8%								
Rochester	0.0%*	0.0%*								
Total	9.7%	1.1%								

Updated as of July 24, 2018

Notes:

- 1. Research units and Sexual Offender Treatment Programs (SOTP) were excluded.
- 2. Readmissions were defined as State PC and Medicaid (Article 28 /31) psychiatric inpatient readmission events occurring within 1 to 30 days after the State PC discharge. The first readmission within the 30 days window was counted. The denominator for this measure was based on State inpatient discharges to the community. The discharge cohort has a 6-month lag to allow time for completion of Medicaid claim submissions. The discharges that were no longer qualified for Medicaid services (lost Medicaid eligibility, had Medicare or third party insurance) were excluded from the discharge cohort but who had a state operated service in the 3 months post discharge were retained in the discharge cohort.
- 3. ER utilization was identified using Medicaid claims and encounters only. The numerator included the first Psychiatric ER/CPEP event that occurred within thirty days post discharge. The denominator for this measure was based on State inpatient discharges to the community. The discharge cohort has a 6-month lag to allow time for completion of Medicaid claim submissions. The discharges that were no longer qualified for Medicaid services (lost Medicaid eligibility, had Medicare or third party insurance) were excluded from the discharge cohort.

*Note this rate may not be stable due to small denominator (less than 20 discharges in the denominator).



Table 5: General and Private Hospital 30-Day Inpatient Readmission and ER Utilization Rates¹

									Metrics Post	Discharge	4	
								Readmiss	ion ⁵		ER Utilizati	on ⁷
				Capa	city (as of 0	6/1/18)	For discharge cohort (Sep, 2017-Nov, 2017), % Having Psychiatric Readmission within 30 days			For discharge cohort (Sep, 2017- Nov, 2017), % Utilizing Psychiatric Emergency Room within 30 days		
Region	County ²	Hospital Name ³	Auspice	Total	Adults	Child	Total	Adult ⁶	Child	Total	Adult	Child
Central	Broome	United Health Services Hospitals, Inc.	Article 28	56	56	0	11.4%	11.4%		12.4%	12.4%	
Central	Cayuga	Auburn Community Hospital	Article 28	14	14	0	19.6%	19.6%		10.9%	10.9%	
Central	Clinton	Champlain Valley Physicians Hospital Med Ctr.8	Article 28	30	18	12	10.7%	9.8%	12.1%	3.6%	2.0%	6.1%
Central	Cortland	Cortland Regional Medical Center, Inc.	Article 28	11	11	0	19.4%	19.4%		13.9%	13.9%	
Central	Franklin	Adirondack Medical Center	Article 28	12	12	0	0.0% *	0.0% *		0.0% *	0.0% *	
Central	Jefferson	Samaritan Medical Center	Article 28	32	32	0	9.3%	9.3%		2.3%	2.3%	
Central	Montgomery	St. Mary's Healthcare	Article 28	20	20	0	6.9%	6.9%		9.7%	9.7%	
Central	Oneida	Faxton - St. Luke's Healthcare	Article 28	26	26	0	22.8%	22.8%	•	15.4%	15.4%	
Central	Oneida	Rome Memorial Hospital, Inc.	Article 28	12	12	0	0.0% *	0.0% *	•	50.0% *	50.0% *	
Central	Oneida	St. Elizabeth Medical Center	Article 28	24	24	0	20.1%	20.1%	•	12.7%	12.7%	
Central	Onondaga	St. Joseph's Hospital Health Center	Article 28	30	30	0	19.8%	19.8%		18.5%	18.5%	
Central	Onondaga	SUNY Health Science Center-University Hospital	Article 28	49	49	0	21.5%	21.5%		20.7%	20.7%	
Central	Oswego	Oswego Hospital, Inc.	Article 28	28	28	0	14.3%	14.3%		15.7%	15.7%	
Central	Otsego	Bassett Healthcare	Article 28	20	20	0	7.5%	7.5%		10.0%	10.0%	
Central	Saint Lawrence	Claxton-Hepburn Medical Center	Article 28	28	28	0	22.9%	22.9%		6.7%	6.7%	
Hudson	Albany	Albany Medical Center	Article 28	26	26	0	16.8%	16.8%		10.2%	10.2%	
Hudson	Columbia	Columbia Memorial Hospital	Article 28	22	22	0	2.4%	2.4%		7.3%	7.3%	
Hudson	Dutchess	Westchester Medical /Mid-Hudson Division	Article 28	40	40	0	19.1%	19.1%		13.9%	13.9%	
Hudson	Orange	Bon Secours Community Hospital	Article 28	24	24	0	21.3%	21.3%		22.7%	22.7%	
Hudson	Orange	Orange Regional Medical Center - Arden Hill Hospital	Article 28	30	30	0	14.6%	14.6%		14.6%	14.6%	
Hudson	Putnam	Putnam Hospital Center	Article 28	20	20	0	32.8%	32.8%		20.7%	20.7%	
Hudson	Rensselaer	Northeast Health - Samaritan Hospital	Article 28	63	63	0	17.2%	17.2%		13.6%	13.6%	
Hudson	Rockland	Nyack Hospital	Article 28	26	26	0	15.6%	15.6%		17.2%	17.2%	
Hudson	Saratoga	FW of Saratoga, Inc.	Article 31	88	31	57	8.2%	2.8%	10.5%	7.4%	5.6%	8.1%
Hudson	Saratoga	The Saratoga Hospital	Article 28	16	16	0	10.2%	10.2%		18.6%	18.6%	
Hudson	Schenectady	Ellis Hospital	Article 28	52	36	16	12.1%	11.5%	13.3%	15.9%	16.0%	15.7%
Hudson	Sullivan	Catskill Regional Medical Center	Article 28	18	18	0	9.4%	9.4%		9.4%	9.4%	
Hudson	Ulster	Health Alliance Hospital Mary's Ave Campus	Article 28	40	40	0	21.1%	21.1%		21.9%	21.9%	
Hudson	Warren	Glens Falls Hospital	Article 28	30	30	0	12.7%	12.7%		11.8%	11.8%	
Hudson	Westchester	Four Winds, Inc.	Article 31	178	28	150	9.8%	8.2%	10.0%	10.4%	12.2%	10.2%
Hudson	Westchester	Montefiore Mount Vernon Hospital, Inc.	Article 28	22	22	0	17.8%	17.8%		15.6%	15.6%	
Hudson	Westchester	New York Presbyterian Hospital ⁹	Article 28	250	205	45	20.3%	23.3%	9.3%	11.9%	12.6%	9.3%
Hudson	Westchester	Northern Westchester Hospital Center	Article 28	15	15	0	7.4%	7.4%		7.4%	7.4%	
Hudson	Westchester	Phelps Memorial Hospital Center	Article 28	22	22	0	3.8%	3.8%		11.5%	11.5%	
Hudson	Westchester	St Joseph's Medical Center	Article 28	149	136	13	16.4%	17.0%	11.9%	13.4%	13.9%	9.5%
Hudson	Westchester	Westchester Medical Center	Article 28	101	66	35	20.8%	20.2%	50.0% *	13.2%	13.5%	0.0% *
Long Island	Nassau	Mercy Medical Center	Article 28	39	39	0	13.5%	13.5%		7.7%	7.7%	
Long Island	Nassau	Nassau Health Care Corp/Nassau Univ Med Ctr	Article 28	128	106	22	13.2%	13.2%	13.2%	12.6%	11.1%	18.4%
Long Island	Nassau	North Shore University Hospital @Syosset ¹⁰	Article 28	20	20	0	12.9%	12.9%	13.276	16.1%	16.1%	10.770
Long Island	Nassau	South Nassau Communities Hospital	Article 28	36	36	0	19.3%	19.3%	•	16.7%	16.7%	•



Table 5: General and Private Hospital 30-Day Inpatient Readmission and ER Utilization Rates 1

									Metrics Post	Discharge	4	
								Readmiss	ion⁵		ER Utilizati	on ⁷
				Capac	city (as of 06	6/1/18)	For discharge cohort (Sep, 2017-Nov, 2017), % Having Psychiatric Readmission within 30 days			For discharge cohort (Sep, 2017- Nov, 2017), % Utilizing Psychiatric Emergency Room within 30 days		
Region	County ²	Hospital Name ³	Auspice	Total	Adults	Child	Total	Adult ⁶	Child	Total	Adult	Child
Long Island	Suffolk	Brookhaven Memorial Hospital Medical Center	Article 28	20	20	0	21.6%	21.6%		11.8%	11.8%	
Long Island	Suffolk	Brunswick Hospital Center, Inc. ¹¹	Article 31	124	87	37	15.7%	21.8%	4.8%	20.5%	23.4%	15.2%
Long Island	Suffolk	Eastern Long Island Hospital Association	Article 28	23	23	0	29.8%	29.8%		15.8%	15.8%	
Long Island	Suffolk	Huntington Hospital	Article 28	21	21	0	20.4%	20.4%		18.4%	18.4%	
Long Island	Suffolk	John T. Mather Memorial Hospital	Article 28	37	27	10	18.6%	20.8%	12.0%	19.6%	23.6%	8.0%
Long Island	Suffolk	St. Catherine's of Siena Hospital	Article 28	42	42	0	29.5%	29.5%	•	16.7%	16.7%	
Long Island	Suffolk	State University of NY at Stony Brook	Article 28	40	30	10	13.1%	16.1%	5.4%	13.1%	15.1%	8.1%
Long Island	Suffolk	The Long Island Home	Article 31	206	141	65	18.7%	20.0%	17.1%	9.3%	8.8%	10.0%
NYC	Bronx	Bronx-Lebanon Hospital Center ¹²	Article 28	104	79	25	16.5%	17.7%	11.6%	22.7%	23.8%	17.9%
NYC	Bronx	Montefiore Medical Center	Article 28	55	55	0	15.9%	15.9%		15.9%	15.9%	
NYC	Bronx	NYC-HHC Jacobi Medical Center	Article 28	107	107	0	19.1%	19.1%		17.6%	17.6%	
NYC	Bronx	NYC-HHC Lincoln Medical & Mental Health Ctr.	Article 28	60	60	0	18.8%	18.8%		14.0%	14.0%	
NYC	Bronx	NYC-HHC North Central Bronx Hospital	Article 28	70	70	0	17.4%	17.4%		16.4%	16.4%	
NYC	Bronx	St. Barnabas Hospital	Article 28	49	49	0	19.6%	19.6%		18.1%	18.1%	
NYC	Kings	Brookdale Hospital Medical Center	Article 28	61	52	9	14.4%	17.2%	3.7%	23.6%	25.4%	16.7%
NYC	Kings	Interfaith Medical Center, Inc.	Article 28	120	120	0	20.5%	20.5%		23.4%	23.4%	
NYC	Kings	Kingsbrook Jewish Medical Center	Article 28	58	58	0	30.6%	30.6%		25.0%	25.0%	
NYC	Kings	Maimonides Medical Center	Article 28	70	70	0	18.8%	18.8%		15.8%	15.8%	
NYC	Kings	NYC-HHC Coney Island Hospital	Article 28	64	64	0	25.8%	25.8%		20.5%	20.5%	
NYC	Kings	NYC-HHC Kings County Hospital Center	Article 28	205	160	45	19.1%	20.3%	12.7%	20.3%	19.9%	22.8%
NYC	Kings	NYC-HHC Woodhull Medical & Mental Health Ctr. 13	Article 28	112	112	0	19.3%	19.3%		21.7%	21.7%	
NYC	Kings	New York Methodist Hospital	Article 28	50	50	0	21.2%	21.2%		10.9%	10.9%	
NYC	Kings	New York University Hospitals Center	Article 28	35	35	0	15.3%	15.3%		10.7%	10.7%	
NYC	New York	Beth Israel Medical Center	Article 28	92	92	0	25.2%	25.2%		21.7%	21.7%	
NYC	New York	Lenox Hill Hospital	Article 28	27	27	0	27.4%	27.4%		31.5%	31.5%	
NYC	New York	Mount Sinai Medical Center ¹⁴	Article 28	46	46	0	20.0%	20.0%		15.6%	15.6%	
NYC	New York	NYC-HHC Bellevue Hospital Center	Article 28	330	285	45	22.8%	23.7%	17.4%	19.7%	18.9%	23.9%
NYC	New York	NYC-HHC Harlem Hospital Center	Article 28	52	52	0	22.3%	22.3%		18.6%	18.6%	
NYC	New York	NYC-HHC Metropolitan Hospital Center	Article 28	122	104	18	25.1%	27.4%	8.3%	20.8%	22.5%	8.3%
NYC	New York	New York Gracie Square Hospital, Inc. ¹⁵	Article 31	133	133	0	20.2%	20.2%		20.6%	20.6%	
NYC	New York	New York Presbyterian Hospital	Article 28	91	91	0	16.7%	16.7%		14.7%	14.7%	-
NYC	New York	New York University Hospitals Center	Article 28	22	22	0	15.3%	15.3%		10.7%	10.7%	
NYC	New York	St. Luke's-Roosevelt Hospital Center	Article 28	110	93	17	15.3%	15.6%	14.1%	16.3%	18.8%	7.8%
NYC	Queens	Episcopal Health Services Inc.	Article 28	43	43	0	25.0%	25.0%		20.8%	20.8%	
NYC	Queens	Jamaica Hospital Medical Center ¹⁶	Article 28	56	56	0	18.8%	18.8%		27.5%	27.5%	•
NYC	Queens	Long Island Jewish Medical Center	Article 28	234	212	22	18.2%	19.4%	6.7%	15.2%	14.9%	17.8%
NYC	Queens	NYC-HHC Elmhurst Hospital Center	Article 28	177	151	26	17.3%	18.8%	4.2%	18.4%	18.1%	20.8%
NYC	Queens	NYC-HHC Queens Hospital Center ¹⁷	Article 28	53	53	0	19.4%	19.4%		24.8%	24.8%	20.070
NYC	Queens	New York Flushing Hospital and Medical Center	Article 28	18	18	0	21.4%	21.4%	•	25.7%	25.7%	•
NYC	Richmond	Richmond University Medical Center	Article 28	65	55	10	13.9%	14.7%	11.4%	37.2%	39.0%	31.8%
NYC	Richmond	Staten Island University Hospital ¹⁸	Article 28	35	35	0	15.0%	15.0%		26.3%	26.3%	31.070
Western	Cattaraugus	Olean General Hospital	Article 28	14	35 14	0	19.8%	19.8%	•	5.8%	26.3% 5.8%	•



Table 5: General and Private Hospital 30-Day Inpatient Readmission and ER Utilization Rates 1

							Metrics Post Discharge ⁴							
								Readmissi	ion ⁵		ER Utilization	on ⁷		
				-	city (as of 06	•	2017) Read	, % Having F mission with	in 30 days	For discharge cohort (Sep, 2017- Nov, 2017), % Utilizing Psychiatric Emergency Room within 30 days				
Region	County ²	Hospital Name ³	Auspice	Total	Adults	Child	Total	Adult ⁶	Child	Total	Adult	Child		
Western	Chautauqua	TLC Health Network	Article 28	20	20	0	12.1%	12.1%	•	12.1%	12.1%			
Western	Chautauqua	Woman's Christian Assoc. of Jamestown, NY	Article 28	40	30	10	18.0%	21.6%	11.9%	8.1%	8.8%	6.8%		
Western	Chemung	St. Joseph's Hospital	Article 28	25	25	0	23.6%	23.6%	•	8.5%	8.5%			
Western	Erie	Brylin Hospitals, Inc.	Article 31	88	68	20	8.0%	8.8%	6.5%	5.7%	1.8%	12.9%		
Western	Erie	Erie County Medical Center ¹⁹	Article 28	160	144	16	11.9%	12.3%	4.5%	16.1%	16.3%	13.6%		
Western	Monroe	Rochester General Hospital	Article 28	30	30	0	19.7%	19.7%		12.7%	12.7%			
Western	Monroe	The Unity Hospital of Rochester	Article 28	40	40	0	7.1%	7.1%	•	12.5%	12.5%			
Western	Monroe	Univ of Roch Med Ctr/Strong Memorial Hospital	Article 28	93	66	27	10.1%	11.1%	7.9%	21.7%	22.2%	20.6%		
Western	Niagara	Eastern Niagara Hospital, Inc.	Article 28	12	0	12	18.5%		18.5%	0.0%		0.0%		
Western	Niagara	Niagara Falls Memorial Medical Center	Article 28	54	54	0	10.4%	10.4%		16.8%	16.8%			
Western	Ontario	Clifton Springs Hospital and Clinic	Article 28	18	18	0	16.7%	16.7%	•	19.4%	19.4%			
Western	Tompkins	Cayuga Medical Center at Ithaca, Inc.	Article 28	26	20	6	14.0%	16.4%	5.3% *	4.7%	6.0%	0.0% *		
Western	Wayne	Newark-Wayne Community Hospital, Inc.	Article 28	16	16	0	13.6%	13.6%		13.6%	13.6%			
Western	Wyoming	Wyoming County Community Hospital	Article 28	12	12	0	14.6%	14.6%		10.4%	10.4%			
Western	Yates	Soldiers & Sailors Memorial Hospital	Article 28	10	10	0	0.0% *	0.0% *		0.0% *	0.0% *	<u> </u>		
Statewide Total				5,944	5,164	780	17.7%	18.6%	10.5%	16.9%	17.4%	13.2%		

Updated as of Jul 24, 2018

Source: Concerts, Medicaid, MHARS

Notes:

- 1. Private (Article 31) hospitals are classified as Institutes for Mental Diseases (IMD), and as such, are not reimbursed by Medicaid for inpatient treatment in their facilities for persons aged 22-64.
- 2. Data are presented by county of discharging hospital location and age group (child or adult). If an entity operates more than one hospital and county is not available on the records (e.g., managed care encounters), the discharges and readmissions are assigned to one of the hospitals.
- 3. Hospitals that closed prior to 06/1/2018 are excluded.
- 4. The denominators for the metrics were based on discharges to the community. The discharge cohort has a 6-month lag to allow time for completion of Medicaid claim submissions. The discharges that were no longer qualified for Medicaid services (lost Medicaid eligibility, had Medicare or third party insurance) were excluded from the discharge cohort.
- 5. Readmissions were defined as State PC and Medicaid psychiatric (Article 28 /31) inpatient events occurring within 1 to 30 days after the Article 28 /31 discharge. The readmission was only counted once.
- 6. When the psychiatric unit is a child or adolescent unit, persons aged 21 or younger are counted as a child. For adult units, persons aged 16 or older are counted as adults.
- 7. ER data were extracted from Medicaid claims and encounters only. The numerator included the first Psychiatric ER/CPEP event that occurred within thirty days post discharge.
- 8. Change at Champlain Valley Physicians Hospital Med Ctr. was made to reduce adult beds by 4(from 22 to 18) effective on 5/25/2017.
- 9. Changes at New York Presbyterian Hospital adult capacity reduced by 2 bed from 207 to 205 effective on 11/7/2017
- 10. North Shore University Hospital @ Syosset was not appearing in this report prior to June 2017, due to a Medicaid data matching issue that has now been resolved.
- 11. Changes at Brunswick Hospital Center, Inc. adult capacity expended by 8 bed from 79 to 87 and child capacity reduced by 8 from 45 to 37 effective on 9/9/2016
- 12. Changes at Bronx-Lebanon Hospital Center adult capacity is expanded by 6 bed from 73 to 79 effective on 10/20/2017
- 13. Changes at NYC-HHC Woodhull Medical & Mental Health Ctr. adult capacity is reduced by 23 bed from 135 to 112 effective on 11/30/2017
- 14. Changes at Mount Sinai Medical Center adult capacity is reduced by 30 bed from 76 to 46 effective on 7/1/2016
- 15. Changes at New York Gracie Square Hospital, Inc. adult capacity is reduced by 24 bed from 157 to 133 effective on 9/15/2017
- 16. Changes at Jamaica Hospital Medical Center adult capacity is expanded by 4 bed from 52 to 56 effective on 12/22/2017 ,updated on 3/20/2018
- 17. Changes at NYC-HHC Queens Hospital Center adult capacity is reduced by 18 bed from 71 to 53 effective on 10/16/2017
- 18. Changes at Staten Island University Hospital adult capacity is reduced by 29 bed from 64 to 35 due to one of units has been functionally closed and effective on 7/15/2016
- 19. Changes at Erie County Medical Center adult capacity is expanded by 24 non-operational beds from 120 to 144 due to consolidation of services from Kaleida hospital effective on July 2017. However, these 24 non-operational beds were just entered in Concerts in June, 2018 so they are not captured in the overall capacity previously.

*Note: This rate may not be stable due to small denominator (less than 20 discharges in the denominator).



Glossary of Services

1. Supported Housing: Supported Housing is a category of community-based housing that is designed to ensure that individuals who are seriously and persistently mentally ill (SPMI) may exercise their right to choose where they are going to live, taking into consideration the recipient's functional skills, the range of affordable housing options available in the area under consideration, and the type and extent of services and resources that recipients require to maintain their residence with the community. Supported Housing is not as much considered a "program" which is designed to develop a specific number of beds; but rather, it is an approach to creating housing opportunities for people through the development of a range of housing options, community support services, rental stipends, and recipient specific advocacy and brokering. As such, this model encompasses community support and psychiatric rehabilitation approaches.

The unifying principle of Supported Housing is that individual options in choosing preferred long term housing must be enhanced through:

- Increasing the number of affordable options available to recipients;
- Ensuring the provision of community supports necessary to assist recipients in succeeding in their preferred housing and to meaningfully integrate recipients into the community; and
- Separating housing from support services by assisting the resident to remain in the housing of his choice while the type and intensity of services vary to meet the changing needs of the individual.
- 2. Home and Community Based Services Waiver (HCBS): HCBS was developed as a response to experience and learning gained from other state and national grant initiatives. The goals of the HCBS waiver are to:
 - Enable children to remain at home, and/or in the community, thus decreasing institutional placement.
 - Use the Individualized Care approach to service planning, delivery and evaluation. This
 approach is based on a full partnership between family members and service providers.
 Service plans focus upon the unique needs of each child and builds upon the strengths of
 the family unit.
 - Expand funding and service options currently available to children and adolescents with a diagnosis of serious emotional disturbance and their families.
 - Provide services that promote better outcomes and are cost-effective.

The target population of children eligible for the waiver are children with a diagnosis of serious emotional disturbance who without access to the waiver would be in psychiatric institutional placement. Parent income and resources are not considered in determining a child's eligibility.

The HCBS waiver includes six new services not otherwise available in Medicaid:

• Individualized Care Coordination includes the components of intake and screening, assessment of needs, service plan development, linking, advocacy, monitoring and consultation.



- Crisis Response Services are activities aimed at stabilizing occurrences of child/family crisis where it arises.
- **Intensive In-home Services** are ongoing activities aimed at providing intensive interventions in the home when a crisis response service is not enough.
- **Respite Care** are activities that provide a needed break for the family and the child to ease the stress at home and improve family harmony.
- Family Support Services are activities designed to enhance the ability of the child to
 function as part of a family unit and to increase the family's ability to care for the child in
 the home and in community based settings.
- **Skill Building Services** are activities designed to assist the child in acquiring, developing and addressing functional skills and support, both social and environmental.
- 3. Mobile Integration Teams (MIT): Mobile Integration Teams provide an array of services delivered by multidisciplinary professionals and paraprofessionals to successfully maintain each person in his or her home or community. The intent of this program is to address the social, emotional, behavioral and mental health needs of the recipients and their families to prevent an individual from needing psychiatric hospitalization. Examples of services include, but are not limited to, health teaching, assessment, skill building, psychiatric rehabilitation and recovery support, in-home respite, peer support, parent support and skills groups, crisis services, linkage and referral, outreach and engagement. The population to be served includes children and adolescents, their families, and adults. The services provided by this team can be provided in any setting, including an individual's residence, schools, as well as inpatient or outpatient treatment settings.
- 4. Respite Services: Temporary services (not beds) provided by trained staff in the consumer's place of residence or other temporary housing arrangement. Includes custodial care for a disabled person in order that primary care givers (family or legal guardian) may have relief from care responsibilities. The purpose of respite services is to provide relief to the primary care provider, allow situations to stabilize and prevent hospitalizations and/or longer term placements out of the home. Maximum Respite Care services per Consumer per year are 14 days.
- 5. Outreach: Outreach programs/services are intended to engage and/or assess individuals potentially in need of mental health services. Outreach programs/services are not crisis services. Examples of applicable services are socialization, recreation, light meals, and provision of information about mental health and social services. Another type of service within this program code includes off-site, community based assessment and screening services. These services can be provided at forensic sites, a consumer's home, other residential settings, including homeless shelters, and the streets.
- 6. Assertive Community Treatment (ACT) Program: ACT Teams provide mobile intensive treatment and support to people with psychiatric disabilities. The focus is on the improvement of an individual's quality of life in the community and reducing the need for inpatient care, by providing intense community-based treatment services by an interdisciplinary team of mental health professionals. Building on the successful components of the Intensive Case Management (ICM) program, the ACT program has low staff-outpatient ratios; 24-hour-a-day, seven-day-perweek availability; enrollment of consumers, and flexible service dollars. Treatment is focused on individuals who have been unsuccessful in traditional forms of treatment.
- 7. Advocacy/Support Services: Advocacy/support services may be individual advocacy or systems advocacy (or a combination of both). Examples are warm lines, hot lines, teaching daily



living skills, providing representative payee services, and training in any aspect of mental health services. Individual advocacy assists consumers in protecting and promoting their rights, resolving complaints and grievances, and accessing services and supports of their choice. Systems advocacy represent the concerns of a class of consumers by identifying patterns of problems and complaints and working with program or system administrators to resolve or eliminate these problems on a systemic, rather than individual basis.

- 8. Intensive Case Management (ICM): In addition to providing the services in the general Targeted Case Management program description above, ICM is set at a case manager/client ratio of 1:12. Medicaid billing requirements for the Traditional ICM model requires a minimum of four (4) 15 minute face-to-face contacts per individual per month. For programs serving Children and Families, one contact may be collateral. The Flexible ICM model requires a minimum of two (2) 15 minute minimum face-to-face contacts per individual, per month but must maintain a minimum aggregate of 4 face-to-face contacts over the entire caseload. For programs serving Children and Families, 25% of the aggregate contacts can be collaterals.
- 9. Crisis Intervention: Crisis intervention services, applicable to adults, children and adolescents, are intended to reduce acute symptoms and restore individuals to pre-crisis levels of functioning. Examples of where these services may be provided include emergency rooms and residential settings. Provision of services may also be provided by a mobile treatment team, generally at a consumer's residence or other natural setting (not at an in-patient or outpatient treatment setting). Examples of services are screening, assessment, stabilization, triage, and/or referral to an appropriate program or programs. This program type does not include warm lines or hot lines.
- 10. Non-Medicaid Care Coordination: Activities aimed at linking the consumer to the service system and at coordinating the various services in order to achieve a successful outcome. The objective of care coordination in a mental health system is continuity of care and service. Services may include linking, monitoring and case-specific advocacy. Care Coordination Services are provided to enrolled consumers for whom staff is assigned a continuing care coordination responsibility. Thus, routine referral would not be included unless the staff member making the referral retains a continuing active responsibility for the consumer throughout the system of service. Persons with Medicaid may receive services from this program, however the program does not receive reimbursement from Medicaid.
- 11. Recovery Center: A program of peer support activities that are designed to help individuals with psychiatric diagnosis live, work and fully participate in communities. These activities are based on the principle that people who share a common condition or experience can be of substantial assistance to each other. Specific program activities will: build on existing best practices in self-help/peer support/mutual support; incorporate the principles of Olmstead; assist individuals in identifying, remembering or discovering their own passions in life; serve as a clearinghouse of community participation opportunities; and then support individuals in linking to those community groups, organizations, networks or places that will nurture and feed an individual's passions in life. Social recreation events with a focus on community participation opportunities will be the basis for exposing individuals to potential passion areas through dynamic experiences, not lectures or presentations.
- 12. Self Help Program: To provide rehabilitative and support activities based on the principle that people who share a common condition or experience can be of substantial assistance to each other. These programs may take the form of mutual support groups and networks, or they may be more formal self-help organizations that offer specific educational, recreational, social or other program opportunities.



- 13. Clinic Treatment: A clinic treatment program shall provide treatment designed to minimize the symptoms and adverse effects of illness, maximize wellness, and promote recovery. A clinic treatment program for adults shall provide the following services: outreach, initial assessment (including health screening), psychiatric assessment, crisis intervention, injectable psychotropic medication administration (for clinics serving adults), psychotropic medication treatment, psychotherapy services, family/collateral psychotherapy, group psychotherapy, and complex care management. The following optional services may also be provided: developmental testing, psychological testing, health physicals, health monitoring, and psychiatric consultation. A clinic treatment program for children shall provide the following services: outreach, initial assessment (including health screening), psychiatric assessment, crisis intervention, psychotropic medication treatment, psychotherapy services, family/collateral psychotherapy, group psychotherapy, and complex care management. The following optional services may also be provided: developmental testing, psychological testing, health physicals, health monitoring, psychiatric consultation, and injectable psychotropic medication administration.
- 14. Home-Based Crisis Intervention: The Home-Based Crisis Intervention Program is a clinically oriented program with support services by a MSW or Psychiatric Consultant which assists families with children in crisis by providing an alternative to hospitalization. Families are helped through crisis with intense interventions and the teaching of new effective parenting skills. The overall goal of the program is to provide short-term, intensive in-home crisis intervention services to a family in crisis due to the imminent risk of their child being admitted to a psychiatric hospital. The target population for the HBCI Program is families with a child or adolescent ages 5 to 17 years of age, who are experiencing a psychiatric crisis so severe that unless immediate, effective intervention is provided, the child will be removed from the home and admitted to a psychiatric hospital. Families referred to the program are expected to come from psychiatric emergency services.
- **15. Crisis Housing/Beds (Adult):** Non-licensed residential program, or dedicated beds in a licensed program, which provide consumers a homelike environment with room, board and supervision in cases where individuals must be removed temporarily from their usual residence.
- **16. Children & Youth Crisis/Respite:** The intent of the crisis/respite program is to provide a short-term, trauma-sensitive, safe and therapeutic living environment, and crisis support to children and adolescents with serious emotional disturbances, their families and residential service providers.

The goal of the program is to:

- Stabilize the crisis situation and support the family or service provider's efforts to maintain the child in his or her current residence;
- Provide immediate access to treatment services;
- Increase engagement with peer and family support services;
- Improve the family/caregiver's ability to respond to the environmental/social stressors that precipitated the need for respite; and
- Decrease the inappropriate use of emergency departments, inpatient hospitalizations and/or other out-of-home placements.

This program is intended to be an opportunity to provide intense support and guidance to the youth and their family/caregivers so as to prevent a reoccurrence of the situation preceding the admission.

17. Transportation: The provision of transportation to and from facilities or resources specified in the Consumer's individual treatment plan as a necessary part of his/her service for mental disability. This includes all necessary supportive services for full and effective integration of the Consumer into community life.



- 18. Flexible Recipient Service Dollars: Flexible Recipient Service Dollars are not based on a particular fiscal model and are available to provide for a recipient's emergency and non-emergency needs. These funds are to be used as payment of last resort. The use of the service dollars should include participation of the recipient of services, who should play a significant role in the planning for, and the utilization of, service dollars. Services purchased on behalf of a recipient, such as Respite or Crisis Services, should be reported using this Service Dollar program code. Examples of services may include housing, food, clothing, utilities, transportation and assistance in educational, vocational, social or recreational and fitness activities, security deposits, respite, medical care, crisis specialist, homemakers and escorts. This program code cannot be allocated for AHSCM, ICM, SCM, BCM, ACT, RTF Transition Coordinators or Home and Community Based Waiver Services. Agency administrative costs allocated to the operating costs of this program via the Ratio Value allocation methodology are redistributed to other OMH programs in the CFR.
- 19. Family Support Services: Family support programs provide an array of formal and informal services to support and empower families with children and adolescents having serious emotional disturbances. The goal of family support is to reduce family stress and enhance each family's ability to care for their child. To do this, family support programs operate on the principles of individualized care and recognizing every child and family is unique in their strengths and needs. Connecting family members to other families with children with serious emotional problems helps families to feel less isolated and identify their own strengths. Family support programs ideally provide the following four core services: family/peer support, respite, advocacy, and skill building/educational opportunities.
- **20. OnTrackNY:** OnTrackNY program is intended for early identification of psychotic symptoms and the development of early intervention strategies to mitigate the onset of psychotic disorders. These programs generally focus on serving transition-aged youth and young adults experiencing their first episode of psychosis.
- **21. On-Site Rehabilitation:** Program objective is to assist mentally ill adults living in adult congregate care settings, supervised or supported living arrangements to achieve their treatment and community living rehabilitation goals. Services include one or a combination of:
 - (1) consumer self-help and support interventions:
 - (2) community living;
 - (3) academic and/or social leisure time rehabilitation training and support services.

Services are provided either at the residential location of the resident or in the natural or provideroperated community and are provided by a team that is either located at the residential site or which functions as a mobile rehabilitation team traveling from site to site.

- **22. Pathway Home Teams:** Pathway Home teams are multi-disciplinary, staffed by masters-level clinicians, case managers, registered nurses, and peers. Teams follow the evidence-based practice of the critical time intervention model of care, engaging clients intensively during the first 30 days. The team will work clients until they have settled back into the community and are linked with the services they need. While every situation is unique, this takes about six to nine months on average.
- 23. Family Resource Centers: Family Resource Centers aim to strengthen secure attachment between parent and child relationships, and to promote healthy social-emotional development in children age five and under from high risk families residing in eight communities in the Bronx and Harlem.
- 24. High Fidelity Wraparound (HFW) is a youth-guided, family-driven planning process that allows youth and their family achieve treatment goals that they have identified and prioritized, with



assistance from their natural supports and system providers, while the youth remains in his or her home and community setting.

- 25. Mobile Residential Support Teams focus on transitioning adults living in supported housing apartments into community living. Once these individuals are living in the community, Mobile Residential Support Teams visit them in their homes to help ensure that their basic needs are being met. Teams assist with discharge and community residential support for high risk individuals such as those with co-morbid medical conditions, dual diagnoses of mental illness and/or developmental disability.
- **26.** Long Stay Teams are services that assist with the transition of long stay individuals in State PC or residential settings into structured community settings. Long stay is defined as an adult with a State PC or residential length of stay exceeding one year.