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2024 CHT Chart Review Statewide Analysis

Changes & Lessons from the CHT Expansion Pilot

Fall 2024 CHT Chart Review

- The CHT Expansion Pilot included two detailed chart reviews by QI Facilitators and Practice Staff.
- QI Facilitators and Staff undertook the second round of the chart review in October and November of 2024.
- Nearly 600 charts were reviewed across the entire state.
- Changes from the 2023 review included:
 - More specific breakdowns for age categories
 - Greater differentiation between screenings in various age categories
- Provides a chance to compare 2023 results to 2024 results and see what has changed.



Data Collected

- Charts were eligible for sampling if the patient had a CHT interaction between July and September 2024.
- Screening information was gathered for the year between September 2023 and July 2024.
- The number of interactions, types of services, and goals, outcomes, and connections were counted for Quarter 3 of 2024.
- This data provided a snapshot of CHT services during the quarter, not necessarily of entire episodes of care.



Data Set & Cleaning Process

- Of 579 forms submitted, 578 contained usable data entries!
- Cleaning for statewide analysis involved:
 - Ensuring data had valid relationships between fields. (e.g. making sure that if outcomes were measured, someone didn't check the 'no outcomes' box.)
 - Adding categories to the Screening Types and CHT Engagement Reasons questions to capture the majority of entered comments.
- After cleaning, data was collated, analyzed, and, where appropriate, compared to 2023 results.



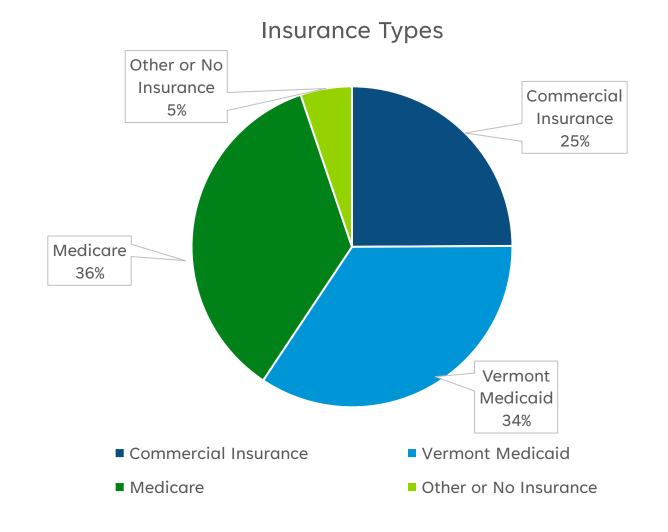
Demographic Information



Insurance Types

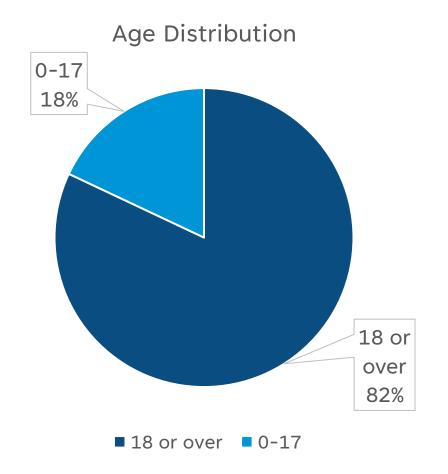
Since the 2023 review:

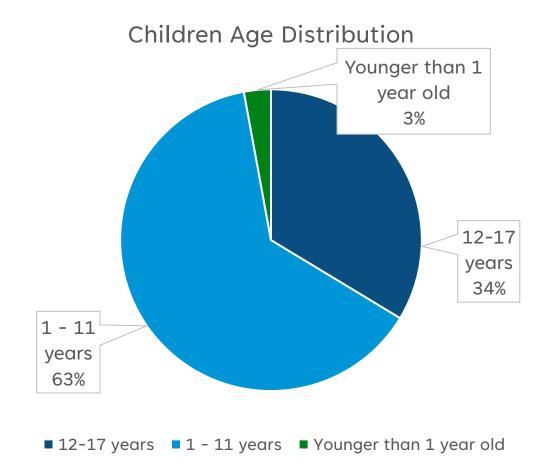
- The number of Medicare insured individuals increased slightly.
- Approximately the same proportion of individuals were insured through Medicaid and Commercial insurers.
- There was no change in Other types of insurance coverage.





Age Breakdown





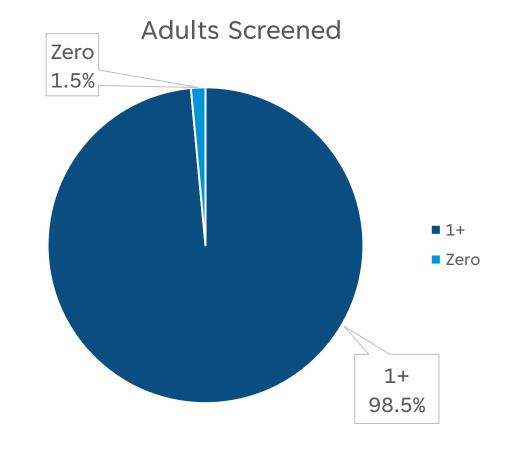


Adult Analysis



Screenings Given

- The proportion of adults receiving at least one screening increased significantly since 2023, when only 91.2% showed evidence of being screened.
- Only 13.3% of patients had evidence of the CMS HRSN tool being used for screening.





Domains Screened

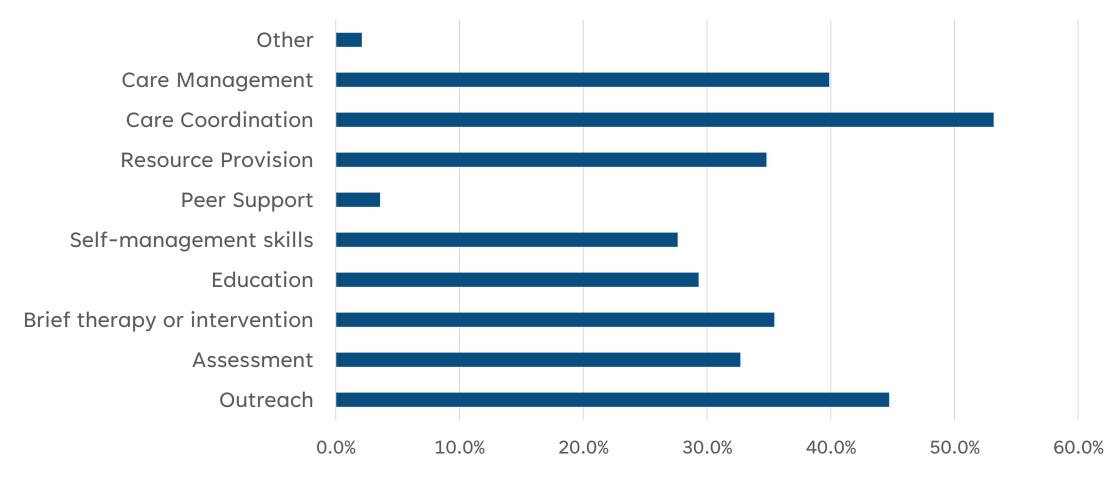
Domain	% Screened	% Positive (of Screened)	Notes
Depression	78.1%	44.6%	
Substance Use - Alcohol	75.3%	17.9%	Significant increase in % screened
Substance Use – Opioids/Other	57.8%	21.5%	Significant increase in % screened
Substance Use - Tobacco	85.2%	31.2%	Significant increase in % screened
Suicide	38.6%	18.0%	Significant increase in % screened
Housing	53.6%	34.6%	Significant increase in % screened
Food Security	54.6%	42.9%	Significant increase in % screened
Transportation	49.6%	40.0%	Significant increase in % screened
Safety/Interpersonal Violence	46.0%	28.9%	Significant increase in % screened
Finances	40.3%	58.1%	Significant increase in % screened

CHT Encounter Stats for Q3-2024

- Of 474 adult patients, 99% had documented CHT encounters from July to September 2024.
- 51% of patients had 1 or 2 documented encounters in this time.
- 33% had 4 or more encounters and 16% had 7 or more encounters.
- Encounter Data basic statistics:
 - Mean Number of Encounters per patient: 3.78
 - Median Number of Encounters per patient: 2
 - Range of Encounters per patient: 0-29



CHT Interventions Experienced



CHT Interventions Experienced: Changes

Since 2023, the types of interventions provided changed depending on the reasons for CHT Engagement (all significant at .02 level):

- More Brief Therapy/Interventions for Mental Health concerns (existing or new)
- More Resource Provision for people with Financial and Medical/Chronic Condition concerns
- More Care Management for people with Mental Health (existing or new),
 Childcare, and Legal concerns

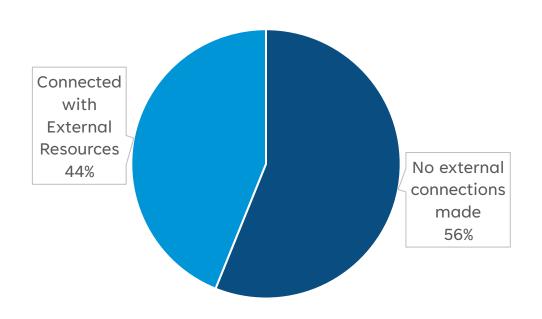
No statistically significant (.05 level) decreases in any services for any interventions were noted.



External Connections

- No change at all in the proportion of individuals who were connected externally!
- Significant decrease in the proportion of patients who were given a list.
- Significant increase in the proportion of patients for which the external resource was provided information.

External Connections



- No external connections made
- Connected with External Resources



Goals & Documentation

- The proportion of individuals with documented goals (53.0%) didn't change significantly from 2023.
 - The ways in which goals were documented showed some change from documentation in a narrative to documentation in a care plan since 2023.

How Goals were Documented	2024	2023
Care Plan	63.7%	53.3%
Narrative	36.3%	46.7%

Outcomes

 A significant increase in the proportion of individuals with documented outcomes was seen since 2023

Outcomes Documented	2024	2023
None	39.0%	57.7%
Some documentation	61.0%	37.6%

• A significant increase in the number of outcomes documented by initial and/or initial and repeat measures was noticed.



Child & Adolescent Analysis



Screenings Given to Kids

Age 0-11

Domain	% Screened
Developmental Milestones	57.1%
Social, Emotional, and Behavioral Development	64.5%

Age 12-17

Domain	% Screened	% Positive
Pregnancy Intention	20.0%	
Social, Emotional, and		
Behavioral Development	60.6%	
Depression	88.6%	58.1%
Suicide	54.3%	
Substance Use	71.4%	36.0%

Caregiver/Family Screenings

- 84.6% of child/adolescent patient charts showed some evidence of caregiver/family screening for relevant domains.
- Approximately 25% of these domains were screened using a CMS HRSN tool.
- Top concerns were:

Domain	% Screened	% Screened Positive
Finances	42.3%	61.4%
Transportation	45.2%	46.8%
Food Security	69.2%	41.7%



What's Next?



Next Steps

- Perform additional analysis of screening and positivity rates to study differences in Health Service Areas and Practice Types.
- Incorporate comparisons with 2023 data into the CHT Expansion Pilot evaluation.
- QI facilitators will utilize the information from the more detailed comparisons to work with practices to improve screening rates and access pathways to CHTs.

Thank You!

Blueprint for Health Central Office

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