

Presentation to the
Commission on Health Care Facilities in the 21st Century



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Major Goals of This Presentation

1. To provide an understanding of the NYS public mental health system
 - OMH mission and functions
 - Who is served
 - What services are delivered
 - State Psychiatric Center consolidation and reconfiguration that has already occurred
 - General hospital mental health services currently being delivered
 - Benefits of reconfiguration experienced by OMH
2. To contribute to a thoughtful process that enables informed decision making with respect to specialty services

Mission



Promote the mental health of all New Yorkers, with a particular focus on providing hope and recovery for adults with serious mental illness and children with serious emotional disturbances.

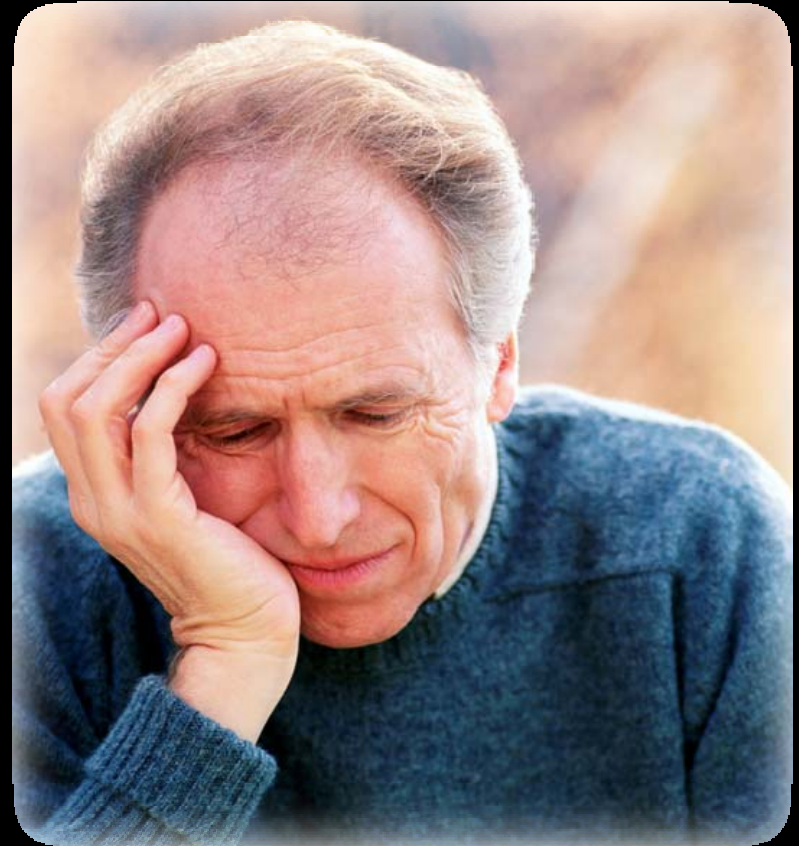
Priority Populations

- The highest need adults with serious mental illness
- Children with serious emotional disturbance who are currently or may be at risk for out-of-home treatment
- Victims of trauma



Impact of Mental Illness

- Nearly 30 percent of American adults each year have diagnosable mental disorders.¹
- Only three out of 10 adults with diagnosable disorders receive mental health treatment.²
- Four of the 10 leading causes of disability in the U.S. and other developed countries are mental disorders, including major depression, bipolar disorder, and schizophrenia.³



¹ Kessler, Chiu et al., 2005

² Kessler, Demler, et al., 2005

³ World Health Organization, 2004

Estimated Prevalence of Adult Mental Illness

	National Prevalence Estimates	Estimated NYS Individuals
Mental illness (diagnosable mental health disorder)	23.9%	3,500,000
Serious mental illness (mental health disorder and a substantial functional impairment)	5.4%	790,000
Serious and persistent mental illness (mental health disorder, substantial functional impairment, prolonged duration)	2.6%	380,000

⁴ National estimates from Center for Mental Health Services for any 12 months (Kessler, Berglund et al., 2004).

Impact of Serious Emotional Disturbance



- 1 out of 10 children has a serious emotional disturbance.¹⁰
- Only 30 percent of children age 14 and older with emotional disturbance graduate with a standard high school diploma.¹¹
- Among all disabilities, emotional disturbance was associated with the highest rate of school dropout.¹²
- Suicide is the 3rd leading cause of death among children and adolescents.¹³

⁵ DHHS, 1996

⁶ Reimer & Smink, 2005

⁷ Minino et al, 2002

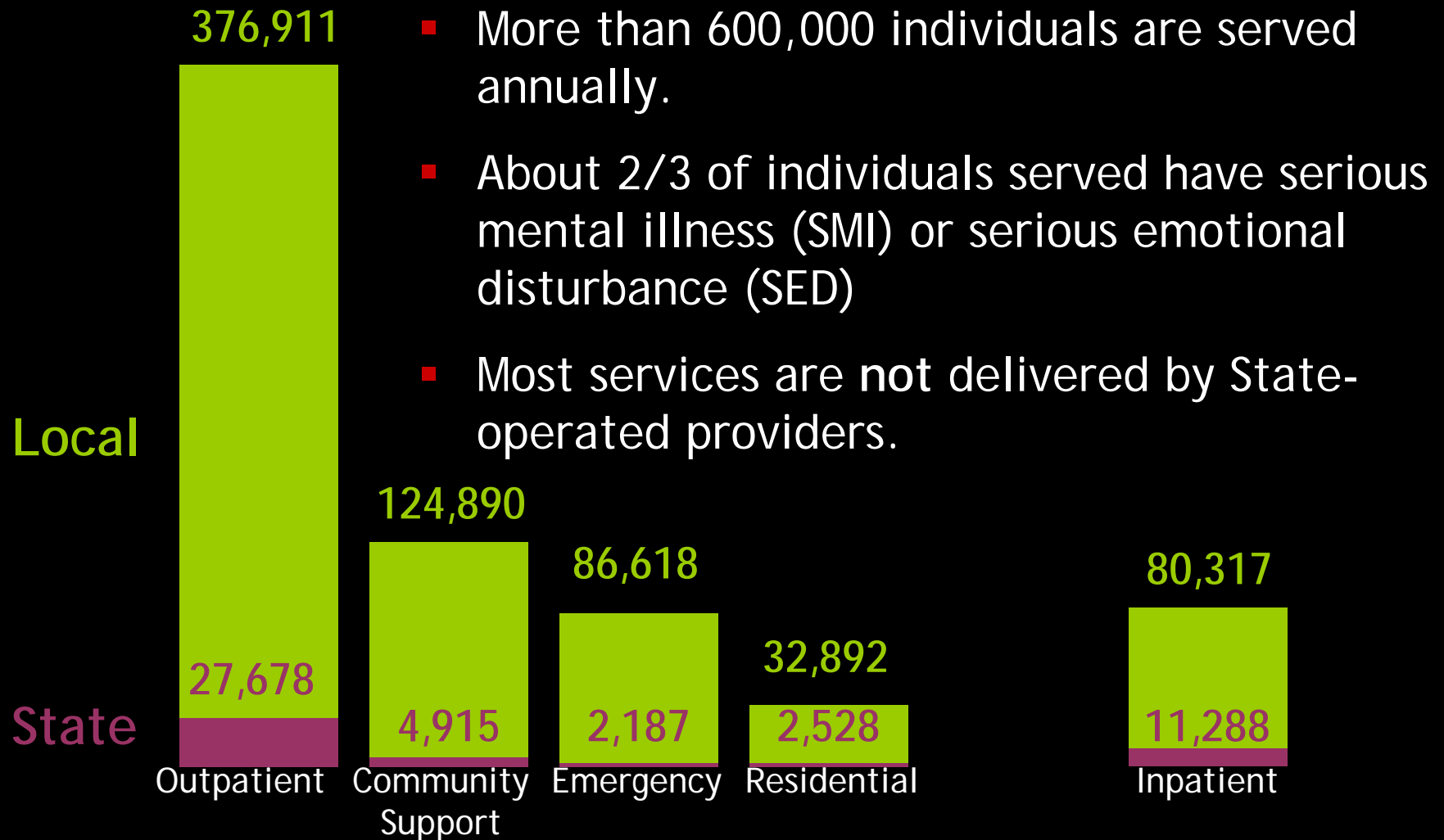
⁸ CDC, online inquiry

Estimated Prevalence of Serious Emotional Disturbance in Children and Adolescents

	Prevalence Estimates	Estimated NYS Individuals
Serious emotional disturbance (in any 12 months, a diagnosable mental health disorder and functional impairment, ages 9–17)	12%	500,000

⁹ National estimates from Center for Mental Health Services for any 12 months for ages 9–17, applied to all children (CMHS, 1996).

Most Individuals with SMI/SED Receive Services in Community Settings



¹⁰ Data are from the Patient Characteristics Survey.

New York State Hospitals

- A substantial portion of mental health services are delivered by NYS hospitals.
- Many hospitals provide both inpatient and outpatient mental health services.
- General hospitals, private psychiatric hospitals and State Psychiatric Centers have different, complementary roles.
- A substantial number of additional inpatient beds have been approved or are under consideration.
- The “IMD” exclusion has important implications for the configuration of inpatient services.

Current Inpatient Hospital Capacity

Adult and Children's

	# of Hospitals	# of Beds	Bed Census	Occupancy Rates
<i>Statewide Total</i>	167	11,927	10,748	90%

Number of New York State Hospitals

Adult and Children's

Article 28	117
Article 31	9
Residential Treatment Facilities	19
State Psychiatric Centers	22*
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Total	167

This number does not include Washington Heights.

Current Inpatient Hospital Capacity: New York City Example

Adult and Children's

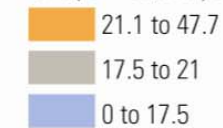
OMH Region	Hospital Type	# of Hospitals	# of Beds	Bed Census	Occupancy Rates
<i>NYC</i>	28	46	3,096	2,731	88%
	31	2	267	251	94%
	RTF	3	125	123	98%
	SPC	8	1,940	1,888	97%
	<i>Subtotal</i>		59	5,428	4,993

New York City Region Adult Inpatient Services

- ◆ Service providers by type, location and number of beds
- ◆ Bed utilization by County per 100,000 general population



Adult bed utilization
Rate per 100,000 population



- Article 28 beds (General Hospital)
- ★ Article 31 beds (Private Hospital)
- ▲ Residential Treatment Facility
- NYS Psychiatric Center



County	Provider	Adult Beds	County	Provider	Adult Beds	County	Provider	Adult Beds
■ Article 28 (General) Hospitals			New York	Beth Israel Medical Center	92	Queens	Episcopal Health Services	43
Bronx	Bronx-Lebanon Hospital Center	73		Cabrini Medical Center	30		Jamaica Hospital Medical Center	50
	Montefiore Medical Center	22		Lenox Hill Hospital	27		New York Flushing Hospital and Medical Center	18
	NYC-HHC Jacobi Medical Center	125		Mount Sinai Medical Center	80		NYC-HHC Elmhurst Hospital Center	131
	NYC-HHC Lincoln Medical & Mental Health Cente	30		North General Hospital	42		NYC-HHC Queens Hospital Center	53
	NYC-HHC North Central Bronx Hospital	70		NYC-HHC Bellevue Hospital Center	285		Saint Vincent CMC-Brooklyn-Queens	24
	Our Lady Of Mercy Medical Center	33		NYC-HHC Harlem Hospital Center	52		LI Jewish Hillside	187
	St. Barnabas Hospital	49		NYC-HHC Metropolitan Hospital Center	104	Richmond	Saint Vincent Catholic Medical Centers (SI)	55
Kings	Brookdale Hospital Medical Center	52		NYU Hospitals Center	22		Staten Island University Hospital (N=29, S=35)	64
	Interfaith Medical Center	120		St. Vincent's Baley Seton	25	★ Article 31 (Private) Hospitals		
	Kingsbrook Jewish Medical Center	30		Saint Vincent Catholic Medical Centers	63	New York	New York Gracie Square Hospital	157
	Long Island College Hospital	39		St. Vincent's Midtown Hospital	12	Queens	QPH d/b/a Holliswood Hospital	55
	Lutheran Medical Center	35		NY Presbyterian Hosp Allen	35	● State Psychiatric Centers		
	Maimonides Medical Center	70		NY Presbyterian Hosp Columbia	24	Bronx	Bronx Psychiatric Center	340
	New York Methodist Hospital	50		NY Presbyterian Hosp Weill Cornell	68	Kings	Kingboro Psychiatric Center	290
	NYC-HHC Coney Island Hospital	60		St Luke Roosevelt Rsvlt	32	Manhattan	Manhattan Psychiatric Center	340
	NYC-HHC Kings County Hospital Center	216		St Luke Roosevelt St Luke	61		NYS Psychiatric Institute (Washington Heights)	21
	NYC-HHC Woodhull Medical & Mental Health Cent	135				Queens	Creedmoor Psychiatric Center	420
	University Hospital of Brooklyn	34				Richmond	South Beach Psychiatric Center	305

Assessment of Need for Article 28 Inpatient and Outpatient Mental Health Services

- Statutory and regulatory framework exists for assessing need:
 - ✓ New York State Mental Hygiene Law Section 31
 - ✓ Codes, Rules and Regulations of the State of New York, Part 551*
- Applicants are required to substantiate need in the application process.
- Multiple reviews occur in determining need:
 - ✓ New York State Mental Hygiene Law Section 31
 - ✓ Local Governmental Units (County Mental Hygiene Directors)
 - ✓ Mental Health Services Council
 - ✓ NYS Office of Mental Health
 - ✓ NYS Department of Health (for Article 28 programs)

^{11.12} See supporting information for details.

Article 28 Hospitals are a Key Component of the Mental Health Services Safety Net

- Emergency psychiatric services
- Acute inpatient psychiatric services
- Clinical outpatient psychiatric services

The estimated 1.2 million adults and children with serious mental illness and serious emotional disturbances are served statewide in 5,775 inpatient beds and 271 outpatient programs.

Two-thirds of hospitals with adult inpatient psychiatric services also provide licensed outpatient services.

Substantial Changes That Have Occurred in the Adult State Mental Health System

- The State Psychiatric Center system is being “right-sized.”
- Savings from eliminating unneeded adult State Psychiatric Center inpatient capacity have funded expanded community-based services.
- Acute inpatient care has been moved from State Psychiatric Centers to general hospitals.

Adult State Psychiatric Center Trends

The Adult State Psychiatric Center system is undergoing a fundamental rightsizing as evidenced by:

- Reduced census and admission rates
- Very high occupancy rates
- Closures and consolidations
- Focused delivery of intermediate and long-term care

OMH adult psychiatric center census trends 1986-2006

Census trend from 1986 through 1996

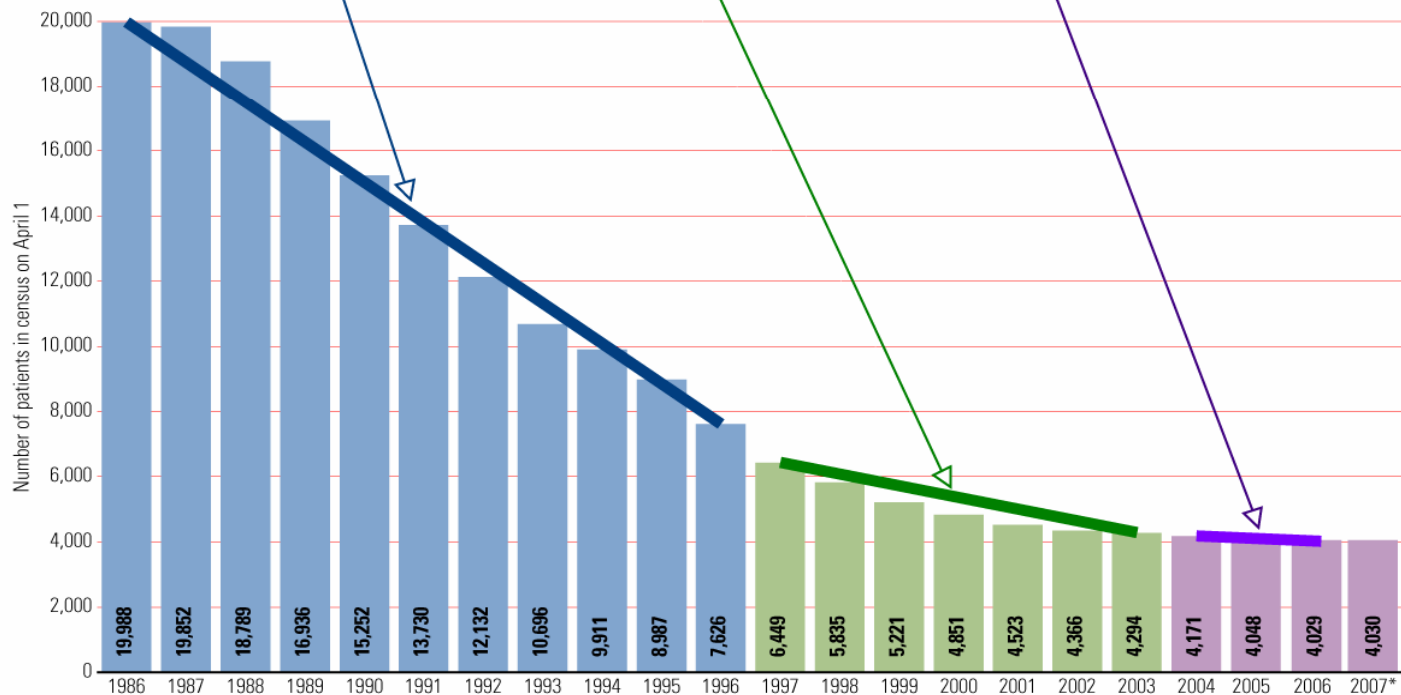
- Acute inpatient to general hospitals
- Geriatric patients to nursing homes

Census trend from 1997 through 2003

- Community reintegration of "Long Stay" patients

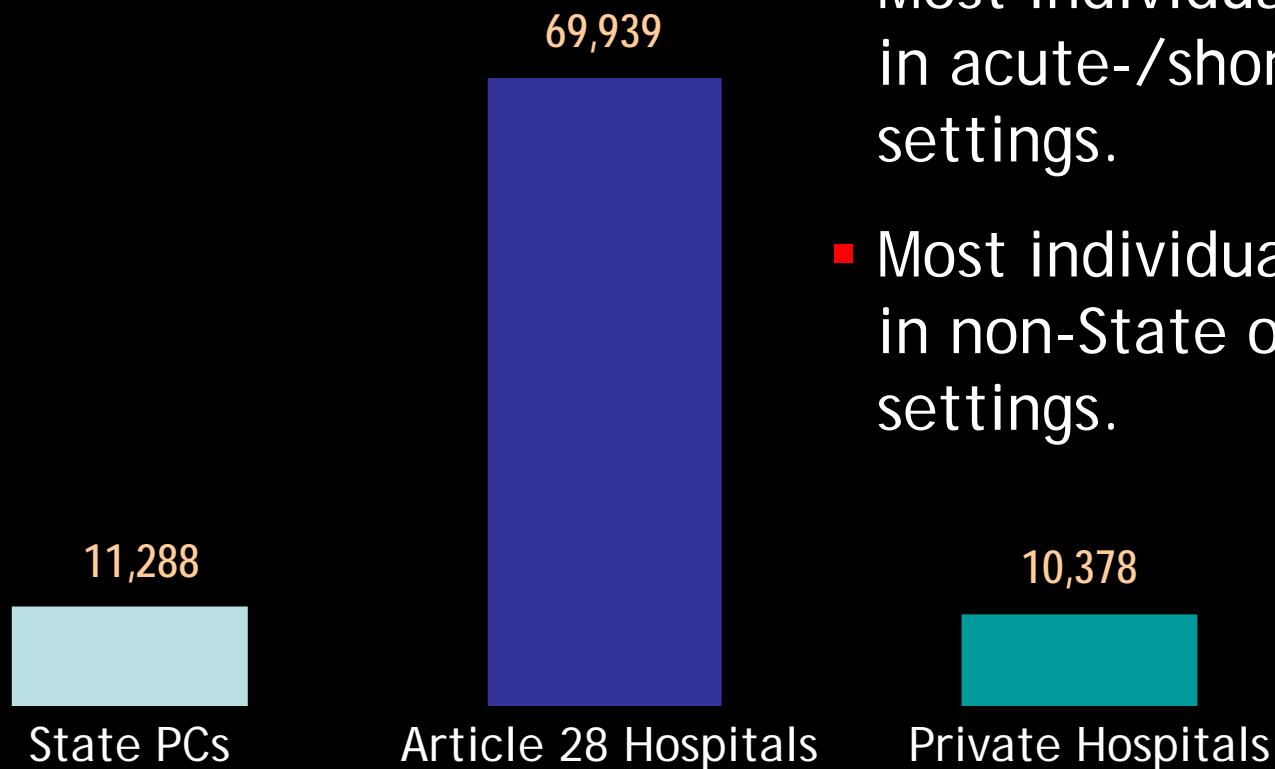
Census trend from 2004 through 2006

- Census decline ends
- Patients more complex
- Community placements more difficult



* Budgeted/Projected

Annual Inpatient Service Delivery



- Most individuals are served in acute-/short-stay settings.
- Most individuals are served in non-State operated settings.

Article 28 Hospital Inpatient Psychiatric Discharges 15-Year Trends

- Discharges have increased.
- Average length of stay has decreased.

	1990	1995	2000	2004*
Discharges	74,563	95,695	108,977	107,271
ALOS	24.77	19.10	14.99	14.81

*These numbers may be slightly underestimated due to missing data.

Data from OMH analysis of SPARCS data.

NYS Mental Health Expenditures

Article 28 hospitals account for 37 percent of total expenditures for mental health services:

- Article 28 hospitals account for 48 percent of expenditures for inpatient services.
- Article 28 hospitals account for 40 percent of expenditures for outpatient services.

NYS Mental Health Expenditures *(cont.)*

- Article 28 hospitals expend more total and inpatient mental health care dollars than Article 31 hospitals or OMH.
- Article 28 hospitals provide nearly as much outpatient care as Article 31 hospitals and much more than OMH.

	Article 28	Article 31	OMH (SPC)	Total
Inpatient	\$1.215	\$.246	\$1.080	\$2.541
Outpatient	.424	.467	.174	1.065
Other	.120	.764	.204	1.089
Total	\$1.759	\$1.477	\$1.458	\$4.695

\$ in Billions

From OMH analysis of FY01 Consolidated Fiscal Reports and Institutional Cost Reports.

Article 28 Inpatient Psychiatric Units Primarily Serve Medicare and/or Medicaid Population

- Article 28 hospitals are an integral part of the safety net.
- 80 percent of inpatient stays were reimbursed by Medicare and/or Medicaid in 2004.
- The number of inpatient stays reimbursed by Medicare and/or Medicaid has increased from approximately 60 percent in 1990.

Positive Change – Reconfiguration and Consolidation of Middletown State PC

- Areas of assessment by the Office of Mental Health
- Population, geographic, socioeconomic, and demographic characteristics of Orange and Sullivan Counties
- Inventory of existing health and mental health services
- Expressed stakeholder community service needs
- Priorities for community services expansion

Positive Change – Reconfiguration and Consolidation of Middletown State PC

Expressed stakeholder service needs included enhanced:

- Residential services (addition of community residence beds)
- Transitional services (creation of transitional living and crisis beds)
- Outpatient services (addition of ACT, mobile crisis and MICA and forensic aftercare services)
- Maintenance of inpatient capacity (consolidation with Rockland State PC)

Positive Change – Reconfiguration and Consolidation of Middletown State PC *(cont.)*

Efficiency/cost-effectiveness

- Reduce the administrative overhead.
- Fully utilize inpatient capacity.
- Avoid major capital construction and renovation costs.
- Make available physical plant assets for new use/sale.

Positive Change – Reconfiguration and Consolidation of Middletown State PC *(cont.)*

Planning and Implementation

- Inclusive stakeholder planning process
- Comprehensive analysis of capacity, access and utilization patterns in the surrounding area
- Comprehensive analysis of operating costs incurred and avoided

Positive Change – Reconfiguration and Consolidation of Middletown State PC *(cont.)*

Workforce

- Staff assignments aligned with new service continuum to promote long-term employment security.
- Staff provided with new options/opportunities.

Summary

- Mental illness is prevalent.
- People with mental illness live successfully in the community with appropriate supports.
- The mental health system is an inter-related set of community support, outpatient, inpatient, and emergency services.
- State Psychiatric Centers provide intermediate and long-term care.

Summary *(cont.)*

- Article 28 hospitals provide a substantial portion of acute inpatient and outpatient mental health services.
- Two-thirds of Article 28 hospitals with inpatient psychiatric units also provide licensed outpatient services.
- Article 28 psychiatric inpatients are predominantly Medicare and/or Medicaid funded.

Summary *(cont.)*

- Article 28 hospitals account for 37 percent of mental health expenditures in NYS.
- Positive change can be achieved through hospital reconfiguration.

Citations

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