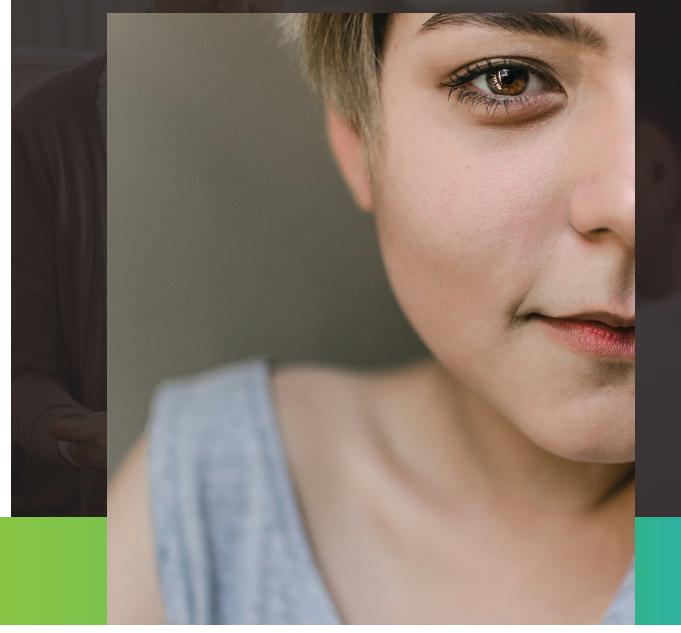
Behavioral Health Data Analytics Collaborative BHDAC







University at Buffalo School of Social Work

University at Buffalo Ъ School of Public Health and Health Professions



Leveraging Collaboration and Data to Drive Better Health Outcomes

A cutting edge viable solution to realize evidence-based, practical behavioral health outcome goals now and in the future

What is the Purpose?

BHDAC is capable of providing an actionable infrastructure to collect and analyze the comprehensive data needed to improve lives, save costs, and enable digital innovation in behavioral health.

What is BHDAC?

A unique data-gathering project and valuable data analytics infrastructure solution designed to improve clients' behavioral health outcomes and save costs. The Strategic Partnership between Integrity Partners, Capital Behavioral Health, UB, and our 36+ providers has successfully built a new community asset that is sustainable and growing. Due to this unique collaboration, collective expertise, and our approvals, and our approvals from the UB Institutional Review Board (IRB), we removed the

challenge of obtaining individual consent, making us the best option for sustainable datadriven outcome solutions in the field. The number of committed partners continues to expand, and we have been recognized by the Office of Mental Health and OASIS as the future direction that providers should be taking.

Strategies to Achieve Future Goals

We deliver impressive success stories today and ensure the ethical practices, scientific rigor, and practical outcomes needed to enable personalized care in the future. The Strategic Partnership combines collaboration, expertise, and shared values to ensure ethical processes are followed. UB Biostatistics and Social Work researchers analyze trends to determine the profiles and predictors required for determining the most effective

treatments. This state-of-the-art scientific analysis combined with a collaborative model provides practical, measurable outcomes that can be generalized to broader populations, enabling the reversal of negative trends and the future of personalized care for behavioral health outcomes that can be generalized for broader populations. This combination of scientific rigor and focus on actionable data will reverse negative trends and enable the future of personalized care for behavioral health.

Current Growth Goals

 Expand our comprehensive data warehouse for scientific analysis
Help partners adopt a standardized intake, treatment, and discharge datagathering process
Continue to grow the number of

Providers in the BHDAC

Leverage and grow the success stories and the reputation of the program





Analyzing the BHDAC provider data, our researchers identified low positive discharge rates for adolescents facing substance use disorder (SUD). Adolescents that do not successfully complete their treatment will increasingly require SUD and emergency department services, costing a significant amount of healthcare resources and reducing access to those services for other patients. There are significant societal costs as well, including the potential for increase crime and adverse educational and workforce impacts.



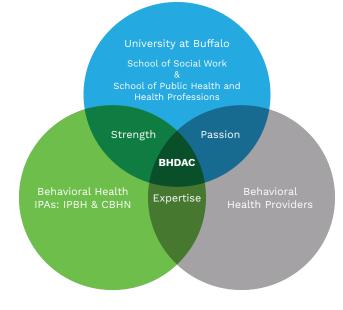
Solution

IPBH recommended using Family-Based Therapy (FBT), an evidence-based clinical treatment requiring clinician certification and including parent(s) and adolescents. We proposed this solution to our providers and developed an FBT training program with 10 IPBH SUD providers and 20 clinicians in FBT. The research demonstrates that, on average, FBT youth and parents successfully complete treatment in 12-16 weeks. Conversely, traditional supportive counseling (SC) has a lower successful completion rate than FBT, and research suggests it takes longer.



Results

Assuming NYS develops the capacity to treat all 61,755 adolescents with FBT and based on the success rate or abstinence from drugs, in 120 days, 45,081 adolescents will be drug-free with FBT versus 5,558 adolescents drug-free with SC. Therefore, based on FBT peerreviewed research, FBT is over eight times more successful than traditional SC. We estimate the potential NYS Healthcare System Savings: \$486,780,000. This number is the benefit of personalized behavioral health treatment services and the clinical integration of evidencebased treatment modalities. (detailed analysis available upon request)



A community asset resulting from a unique strategic partnership in **New York State**

Future Benefits

FBT is one treatment modality for one population, adolescents. The possibility for similar cost savings for other evidence-based treatment modalities for different populations is exponential. The ability of our providers to identify if an adolescent is a good candidate for FBT earlier in the process will enable personalized care to improve outcomes further, reduce costs, and reduce the adverse societal impacts of SUD.



How You Can Help to Change Behavioral Health in NYS

By providing a commitment to long-term investment and the ability to champion our project, you are investing in growing a sustainable community asset that is delivering impressive success stories today and with the potential to address many of the negative historical trends such as increased suicides, growing drug addiction, and opioid crisis.

Five Ways BHDAC Can Help New York State

Opportunities to use data to drive policy decisions and measure their impact

Address the Opioid and Mental Health Crisis by introducing evidence-based treatment and personalized care to improve client outcomes

Drive down healthcare and Medicaid costs

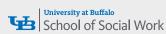
Use analytics to address public and population health issues and demonstrate value to systems level partners and our communities

Recurring opportunity for you to celebrate the significant achievements that you support

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