Integrity Partners for Behavioral Health IPA & University at Buffalo

Behavioral Health Data
Analytics Collaborative (BHDAC)
&
Telehealth Research Overview









Presentation Overview

- Introductions
- Behavioral Health Data Analytics Collaborative (BHDAC)
 Overview
- BHDAC Telehealth Research
- BHDAC Potential
- BHDAC and Artificial Intelligence
- Questions



Integrity Partners for Behavioral Health IPA Team

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University at Buffalo Research Team

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Professor & Associate Dean for Research Director, Buffalo Center for Social Research UB School of Social Work

Greg Wilding, Ph.D. University at Buffalo

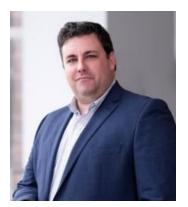
Director, Biostatistics Epidemiology and Research Design Core of UB Clinical Translational Science Institute (CTSI) Director, UB Office of Clinical Trial Development & Implementation

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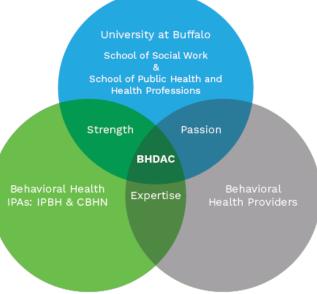
Assistant Professor Depts. of: Family & Community Medicine Psychology and Behavioral Health Neural and Behavioral Sciences







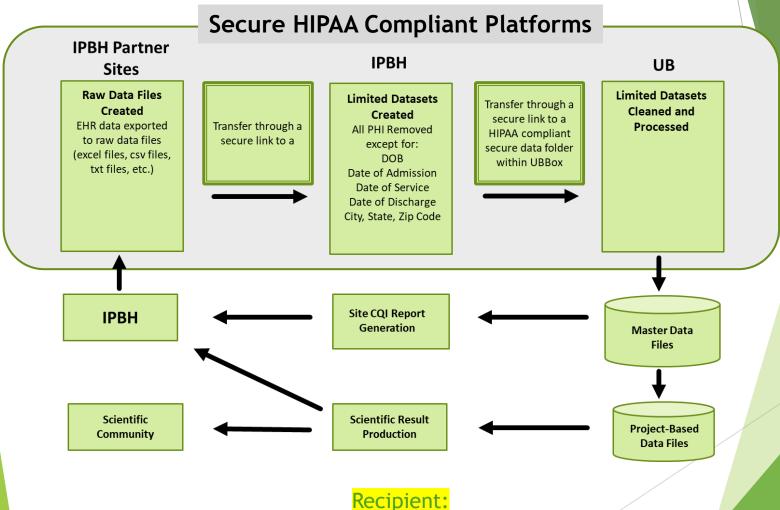
Behavioral Health Data Analytics Collaborative BHDAC



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

Pathway of Data Collection from Partners to Data Warehouse

University at Buffalo, Institutional Review Board Approved



Recipient

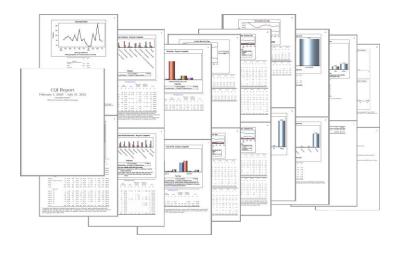
Excellence in Research, Community Level Award
Buffalo Center for Social Research

Benefits of Behavioral Health Data Analytics Collaborative (BHDAC) Products

BHDAC Products

Generate 3 levels of CQI reports with actionable data

- Partner Level CQI Report (Quarterly)
- Network Level CQI Report (Semi-Annual)
- 3. State Level CQI Report (Semi-Annual)

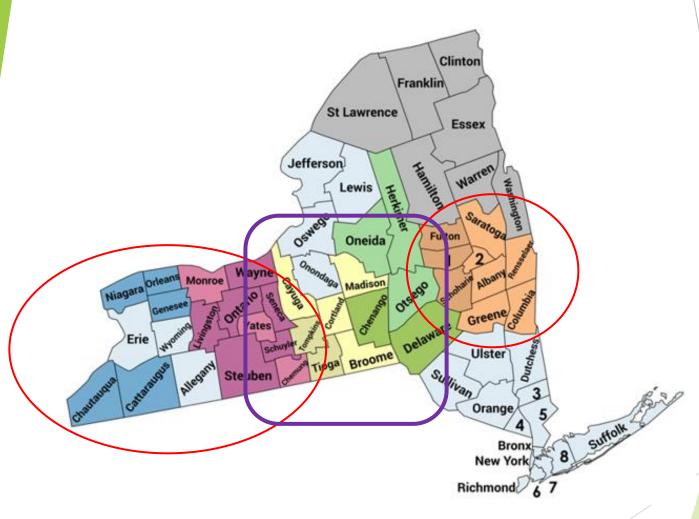


BHDAC Research

Create Research-based documents

- Practice Briefs
- 2. Research Briefs
- Peer-Reviewed Research Articles
- 4. White Papers

Current and Future Counties Covered by BHDAC





Behavioral Health Data Analytics Collaborative (BHDAC)

Telehealth Research

Why Analyze Telehealth?

Telehealth is becoming a significant modality to provide mental health treatment.

Is It Effective?

Is the use of telehealth improving success rates for clients and thereby reducing costs?

What Does the Data Say?

Dr. Braden Linn will review.

Benefits of Behavioral Health Data Analytics Collaborative (BHDAC) Telehealth Research

Telehealth Research

- This analysis looked at the relationship of telehealth usage to no-show rates in partner agencies
- More than 30,000 clients with 500,000 appointment records were part of the data
- Data were drawn from 2020-2022

What do we mean by no-show?

No Show Includes

- Client does not present for session
- Data are from an EHR—subject to coder error

Does NOT Include

- Provider cancellations/reschedules
- Clients arriving late
- Client reschedules

Research Questions Key Scientific Findings

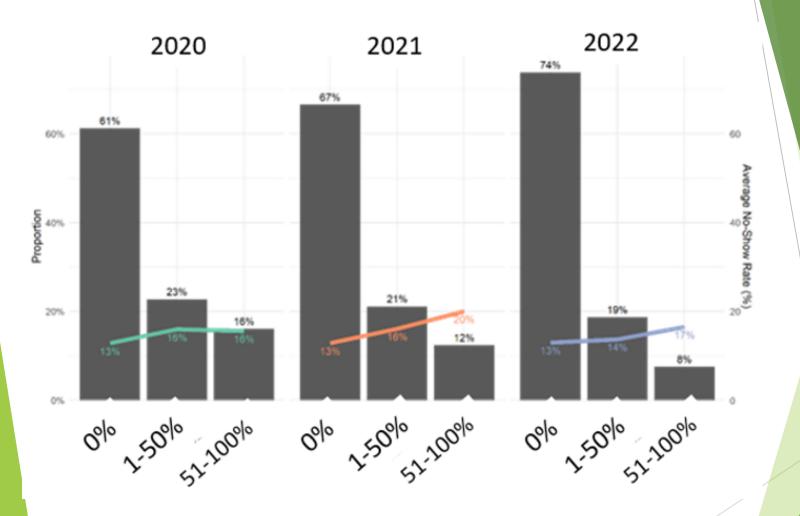
Research Questions

Do clients with high telehealth usage have lower no-show rates compared with clients who use no (or occasional) telehealth?

Research Findings

- Clients who used more telehealth had more no-shows after accounting for the effects of COVID
- The results remained even after conducting a sensitivity analysis, suggesting a robust finding

Telehealth usage and no-show rate by year



Percentage of Client Telehealth Visits

Practice Recommendations Based on Findings

- > In-person service delivery as the standard of care
- Telehealth visits should be reserved for special circumstances and occasional visits to prevent disruptions that could cause premature termination or delay of care
 - Example: client reports suicidal ideation and requires assessment but is impaired and cannot drive

Ongoing Analysis

Next Steps

- We will evaluate any new strategies that we recommend
- Explore why high telehealth/high no-shows
 - Are there differences in severity of presenting problem?
 - Are there differences in therapeutic alliance?
- Remember that findings are nuanced and should be confirmed by ongoing research

BHDAC Potential

Dr. Greg Wilding will highlight the potential of this data warehouse project.

BHDAC Potential

BHDAC Potential

- Infinite number of potential analysis with available data to examine urgent questions to ultimately improve client outcomes and decrease system costs
- Ability to add other system's data (e.g. education, criminal justice, healthcare) into the data warehouse to examine critical questions that impact clients, systems, and policies.
- Leverage university partners and resources to realize full potential
 - UB Clinical and Translational Science Institute
 - UB Institute for Artificial Intelligence and Data Science
 - Extracting analyzable variables from unstructured clinical notes, maintaining patient privacy
 - Prospective AI models can assist with data-driven clinical decision making, early risk detection, and prediction of treatment outcomes

Behavioral Health Data Analytics Collaborative BHDAC

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

Thank you! Questions