



How OpenBeds Helps States with Behavioral Health Access and ED Overutilization

INTRODUCTION

For more than a year, the COVID-19 pandemic has exacerbated demand for mental health and substance use disorder (SUD) services, straining provider resources and contributing to a devastating spike in drug overdose deaths.

The numbers are staggering. More than 87,200 individuals died of drug overdoses during the 12-month period ending in September 2020,^a new Centers for Disease Control and Prevention data show. That is higher than any other 12-month period since the opioid epidemic began in the 1990s.^b

18% Increase in

Mental Health

Emergencies

from

**March 2020 - October 2020
vs. March 2019 - October 2019**



The repercussions of the pandemic are taxing the nation's healthcare system, including hospitals, health systems, and behavioral health providers. More than two-thirds of mental health and substance use treatment organizations report seeing an increased demand for services, and nearly half have seen their patient waitlists grow, according to a February 2021 survey by the National Council for Behavioral Health. 68% said they had to cancel, reschedule, or turn away patients as a result of the pandemic, and half have laid off or furloughed employees.^c

For hospitals and health systems, the pandemic has heightened awareness of key long-standing issues, including the need to reduce emergency department (ED) overcrowding and decrease ED wait times by ensuring patients are routed quickly to the most appropriate care. Mental health emergencies are a significant contributor to these challenges, as EDs too often serve as the entry point to care for individuals needing behavioral health services.

Approximately 21 million ED visits each year are associated with mental health and SUDs. Mental health emergencies comprise just 8.2% of all ED visits, but they take up 11.2% of ED hours.^d

While overall ED visits decreased during the pandemic, the median number of visits for mental health and substance abuse issues increased significantly compared to 2019, according to a recent analysis of 187.5 million ED visits in *JAMA Psychiatry*.^e **Mental health emergencies increased 18%, from a median rate of 2,151 per 100,000 from mid-March to mid-October 2019 to 2,540 per 100,000 from mid-March to mid-October 2020.** ED visits associated with drug overdoses increased 32%, from a median rate of 711 per 100,000 to 940 per 100,000 over the same period, while emergency visits due to opioid overdoses increased nearly 50%, from a median rate of 222 per 100,000 to 330 per 100,000.

Addressing the disproportionate amount of time spent on ED visits associated with rising rates of mental health and substance use issues is critical. Such action has the potential to positively impact public health, improve overall health outcomes, and enhance the quality of the experience for everyone involved—including patients, providers, health systems, and communities.



THE OPENBEDS SOLUTION

OpenBeds offers solutions for states seeking to better support healthcare providers and communities, and address common challenges such as ED overcrowding and long wait times due to inefficient referral processes. Through OpenBeds, states have the ability to create a wide network for collecting, analyzing, and sharing actionable data. The cloud-based solution offers complementary clinician- and public-facing portals that connect providers and consumers to SUD and mental health treatment in eight states: Alaska, Delaware, Indiana, Michigan, Nebraska, Nevada, New Mexico, and Ohio.

OpenBeds facilitates rapid referrals and feedback by identifying and tracking mental health and SUD inpatient and outpatient treatment, and social service resources, in a single network.

The solution provides:



- ▶ **Decision support** for providers and consumers, including detailed inclusion and exclusion criteria for specific services to ensure quality referrals to treatment.



- ▶ **An inventory of outpatient and inpatient services**, including available psychiatric, crisis, dual diagnosis, withdrawal management, and residential treatment beds and wait times.



- ▶ A registry of **social service resources** available for direct or indirect referrals.



- ▶ **Secure two-way provider communication** for the digital exchange of necessary patient information, such as medical records and consent forms.



- ▶ Comprehensive **data aggregation and analytics** capabilities.

FOR PROVIDERS

OpenBeds facilitates optimal access by streamlining care transitions and replacing time-consuming manual processes that often require providers to call, email, or fax multiple facilities individually to find available resources for patients.

FOR PHYSICIANS, NURSES, AND OTHERS WORKING IN THE INTENSE AND DEMANDING ED ENVIRONMENT

OpenBeds offers the ability to see the longitudinal patient record and quickly identify the most appropriate resources to match the level of care best suited to that patient's specific needs. Based on that criteria, providers are then able to efficiently connect and schedule patients for the closest available care through OpenBeds digital screening, intake, and registration functions, which include the ability to coordinate prior authorization and peer support.

After patients are discharged from the ED, clinicians can close the loop on referrals to ensure individuals are connected to needed treatment. They can use OpenBeds to track whether providers have accepted or declined those referrals. If the referral is denied, they can see the reasons why. Lastly, they can see whether or not patients showed up for the recommended follow-up care or services.

FOR PATIENTS AND FAMILIES

OpenBeds helps to ensure that individuals in need of mental health and SUD services are not left waiting for extended periods as providers search for suitable referral care. Treatment Connection—OpenBeds public-facing portal for consumers—streamlines access to care. Using a straightforward, easy-to-use format, it provides individuals with critical information to help them connect more efficiently to the most appropriate and closest care available in their communities. By facilitating smooth transitions to effective care, OpenBeds ultimately helps improve the likelihood those patients will have better outcomes.

FOR STATES

OpenBeds provides detailed data and analytics capabilities to help public health officials track key ED performance metrics. The solution's analytics dashboard can be used to track real-time statewide user engagement, utilization, wait times from discharge to referral, and referral patterns.

State agencies can track how efficiently EDs are handling referrals through OpenBeds date and time stamp functionality to determine whether individuals are being connected to treatment and services, and how quickly those connections are made. State officials also are able to identify trends in ED referral patterns to determine if and where there may be gaps in behavioral health resources. For example, they can identify if additional SUD services may be needed to serve rural communities where providers routinely have difficulty placing ED patients for treatment following overdoses.

OpenBeds is best utilized when there is extensive engagement among providers to ensure a robust network, with a full array of care options for patients and referring providers to choose from. Having active participation of hospitals and health systems is critical to the success of OpenBeds across the states where its solutions are deployed. ED staff typically are onboarded as referrers in OpenBeds. This enables them to access the full spectrum of behavioral health treatment options in the state to help secure quality referrals to the most appropriate level of care for individuals presenting at the ED with behavioral health needs.

THE RESULTS

Implementation of OpenBeds can help states have a positive impact on the overall ED experience, including facilitating faster referrals to the most appropriate care.

For example, one of our state customer's extensive provider participation has contributed to a significant increase in treatment referrals and decreased wait times since the state implemented its solution. The state's department of health launched OpenBeds in 2018 to expedite placement of patients in need of mental health and SUD services.

Prior to implementation, providers relied on a disjointed process for referring patients through phone, fax, and email communications. ED staff often spent undue amounts of time calling around to various facilities to find available treatment options for patients, and some patients fell through the cracks as a result. Upon implementing OpenBeds, state officials led an aggressive engagement campaign to educate providers about the system, including how it worked and the numerous benefits of participating. More than 70 provider facilities statewide now actively participate as a result.

Within its first year, the state accommodated 20,924 treatment referrals, including 75% that involved inpatient services, and 57% voluntary and 43% non-voluntary referrals. The state has seen a 2.8% compound monthly growth rate in referrals through the network. **Broad use of the system also has helped to significantly shorten the amount of time patients have to wait for referrals. Over the course of the first 12 months, the proportion of receiving organizations that acknowledged a referral within 30 minutes or less steadily increased to a high of 65%.**

This has contributed to expanded access for patients, with the number of distinct services offered among all active receiving organizations growing 173% within the first year alone, from 40 in October 2018 to 109 by October 2019. Through the system's data and analytics capabilities, state health officials are able to track overall referral patterns and identify specific problem areas, including the most commonly abused substances and difficult-to-place medical conditions, such as patients with active psychoses, complex medical conditions, and developmental disabilities.



Broad Use of the OpenBeds System

- Significantly **shortened the amount of time patients have to wait for** referrals
- Increased access to care by **increasing the number of distinct services offered for patients 173%**
- Helps state partners to track **key ED performance metrics**
- Ultimately **improves patient outcomes** for those in need of mental health and SUD services

NUMBER OF REFERRALS MADE BY REFERRING ORGANIZATIONS BY MONTH

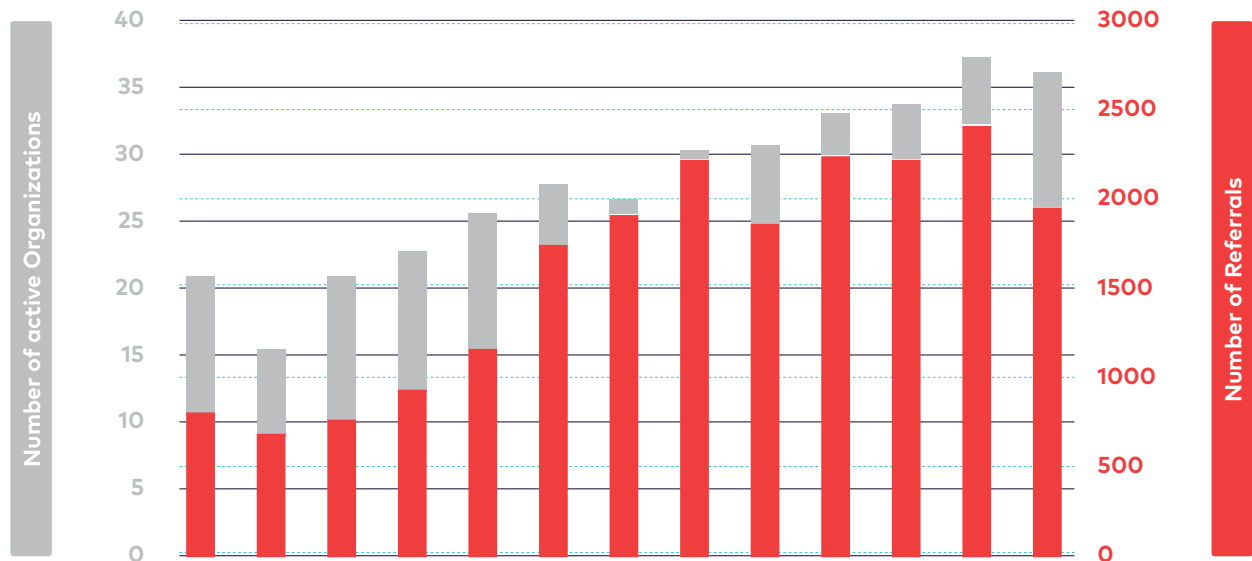


Figure 1. Number of referrals made by referring organizations by month

Source: Proprietary Appriss Health Consumer Data

OpenBeds is helping officials and providers improve overall mental health and SUD services in the state, including streamlining referrals and shortening wait times by getting patients more quickly to the most appropriate levels of care. In addition, the system has helped the state's department of health identify service gaps, effectively target funding, shape policy, evaluate program effectiveness and design, and alleviate some of the treatment burden for clinical staff, social workers, and other providers.

CONCLUSION

OpenBeds is helping states across the country enhance vital access to care for their communities. In the process, it is helping public health officials and providers address long-standing health system challenges that have been exacerbated by the COVID-19 pandemic, such as high demand for behavioral health services that contributes to ED overcrowding and long wait times for patients from discharge to referral.

OpenBeds current solution and new developments support states' public health goals by expanding access, better tracking referral trends, and addressing mental health needs before, during, and after escalation. As our state customer's results clearly illustrate, engaging hospitals and health systems statewide is key to success in maximizing the many potential benefits of OpenBeds. With broad provider participation, OpenBeds can improve access to much-needed treatment for individuals presenting with SUD or mental health needs, and ultimately help facilitate better outcomes for those individuals.



To learn more, contact us at info@openbeds.net or visit ApprissHealth.com/solutions/openbeds.

REFERENCES

- A.** Centers for Disease Control and Prevention, "[Provisional Drug Overdose Death Counts.](#)" National Center for Health Statistics, April 4, 2021.
- B.** Goodnough, A., "[Overdose Deaths Have Surged During the Pandemic, C.D.C. Data Shows.](#)" *The New York Times*, April 14, 2021.
- C.** National Council for Behavioral Health, "[New Report: 40% of Mental Health and Addiction Treatment Organizations Will Survive Less than a Year Without Additional Financial Support.](#)" Press release, March 4, 2021.
- D.** Appriss Health analysis of proprietary client data.

Holland, K.M., Jones, C., Vivolo-Kantor, A., "[Trends in U.S. Emergency Department Visits for Mental Health, Overdose, and Violence Outcomes Before and During the COVID-19 Pandemic](#)" (see Table 2). *JAMA Psychiatry*, 78(4):372-379. Feb. 3, 2021.
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