



Mid-Ohio Psychological Services, Inc.

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QA REPORT

TO: Bradley A. Hedges, Ph.D.
Executive Director

FROM: Shawna Watts-Shumaker, MBA
Quality Assurance Coordinator

SUBJECT: Quality Assurance Activities for October 2005
Chart Reviews for August 2005

SUBMITTED: March 8, 2006

I: MAJOR UNUSUAL INCIDENTS

There were three major unusual incidents for the month of October. The first incident occurred on 10/11/2005. The Lancaster Police Department were contacted after a Listen Line Staff contacted the agency regarding client #02013109 indicating that they had ingested poison and telephone contact could not be established with the client. The client was evaluated at Fairfield Medical Center and discharged home. AJ Bierly saw the client on 10/12/2005.

The second incident occurred on 10/25/2005. The Lancaster Police were contacted due to a hit a run on agency property. A staff member's car was damaged when someone backed into it while exiting the agency parking lot. An accident report was taken and the police were supplied with information indicating who may have hit the car based on a description given by an agency staff member who witnessed the accident.

The third incident occurred on 10/27/2005. The Lancaster Police were contacted after client #05052302 hung up on a clinician after threatening suicide. Client was unwilling to come to the office or report to the hospital voluntarily. The client was transported to Fairfield Medical Center. After evaluation by Emergency Services, the client was admitted. The client was discharged on 10/31/2005 and Paula Moreland saw the client on 11/3/2005.



AN INDEPENDENT CONTRACT AGENCY OF THE FAIRFIELD COUNTY ADAMH BOARD

II: TRANSFERS FROM STATE HOSPITALS

There were no releases from a state hospital in October.

There were two clients released from community hospitalization in October. Client #05110301 was admitted to Fairfield Medical Center on 10/8/2005 and discharged on 10/9/2005. Jessica Mitchell saw the client on 11/3/2005 for a diagnostic intake that was schedule following the client's release from the hospital. This person was not a client of the agency prior to the diagnostic intake occurring.

Client #05052302 was admitted to Fairfield Medical Center on 10/27/2005 and discharged on 10/31/2005. Paula Moreland saw the client on 11/3/2005.

III: PLANT/PHYSICAL HEALTH AND SAFETY

There were no health and safety issues.

IV: RECORDS COMPLETENESS REVIEW (August)

Clinicians	Percent Compliant With Standard	Chart Included AOD Services	Chart Included CSP Services
Chris Ray's Team			
Dr. Chris Ray	100	NO	NO
Bonnie Daniels	97	NO	YES
Rick Gehlbach	98	NO	NO
Chris Johnson*	89	NO	YES
Tricia Ostrander	97	NO	YES
Team Score	96		
Robin Rippeth's Team			
Dr. Robin Rippeth	99	NO	YES
Steve Ford	96	NO	YES
Mike Selegue	99	NO	NO
Paula Moreland	97	NO	YES
Karis Mason	98	NO	NO
Misty Coleman*	73	NO	NO
Jessica Mitchell	97	NO	YES
Ellen Marshall	98	NO	YES
Kimberly Rugg	95	NO	YES
Team Score	95		
Scott Craft's Team			
Dr. Scott Craft*	92	NO	YES
Joe Dunson*	93	NO	YES
A.J. Bierly	99	NO	YES
Amanda Moore	95	NO	YES
Team Score	95		
Brad Hedges' Team			
Dr. Brad Hedges	96	NO	NO
Claire Robitaille	99	NO	NO
Dean Bachelor	96	NO	NO
Team Score	97		

Franklin County Team			
Joni Grim	97	NO	YES
Team Score	97		

*Denotes that the clinician did not meet the target threshold of 95% compliance with the standards.

Eighty-seven percent of the clinicians met the 95% threshold for the record review.

Reasons that clinicians did not meet the threshold and the percentage of records reviewed are as follows:

- Fourteen percent of the records reviewed were missing a copy of the current medical card.
- Thirty-six percent of the records reviewed were missing forms or had incomplete forms in the chart.
- Signatures were missing on some forms in the chart for 14% of the clinicians.
- In twenty-three percent of the records reviewed there was at least one session recorded that did not match the billing record.
- Twenty-three percent of the records reviewed had an Individual Service Plan on the chart that needed to be updated.
- Nine percent of the records reviewed did not have a reviewed health assessment.
- Five percent of clinicians were missing case notes for billed services.

V: PEER REVIEW (August)

Clinicians	Percent Compliant With Standard	Chart Included AOD Services	Chart Included CSP Services
Chris Ray's Team			
Dr. Chris Ray	100	NO	NO
Bonnie Daniels	97	NO	YES
Rick Gehlbach	97	NO	NO
Chris Johnson	91	NO	YES
Tricia Ostrander	96	NO	YES
Team Score	96		
Robin Rippeth's Team			
Dr. Robin Rippeth	97	NO	YES
Steve Ford	95	NO	YES
Mike Selegue*	88	NO	NO
Paula Moreland	93	NO	YES
Karis Mason	96	NO	NO
Misty Coleman	90	NO	NO
Jessica Mitchell	94	NO	YES
Ellen Marshall	94	NO	YES
Kimberly Rugg	90	NO	YES
Team Score	93		
Scott Craft's Team			
Dr. Scott Craft	95	NO	NO
Joe Dunson	100	NO	YES
A.J. Bierly	98	NO	YES
Amanda Moore	96	NO	YES
Team Score	97		

Brad Hedges' Team			
Dr. Brad Hedges	100	NO	NO
Claire Robitaille	100	NO	NO
Dean Bachelor*	83	NO	NO
Team Score	94		
Franklin County Team			
Joni Grim	100	NO	YES
Team Score	100		

*Denotes that the clinician did not meet the target threshold of 90% compliance with the standards.

Ninety-one percent of the clinicians met the 90% threshold for peer review.

- Thirty-six percent of the records reviewed for peer review showed that the clinician did not complete the required forms, or make the necessary referrals.
- Forty-one percent of the records were not maintained consistently in that case notes were not completed and not billed for. Also, the client, clinician, and the supervisor have not signed the progress note or other necessary documentation.

VI: UTILIZATION REVIEW (October)

Clinician	Number of Clients Assigned	Number of Clients Seen	Average Number of Contacts Per Client Seen
Dean Bachelor	36	11	1.73
A.J. Bierly	46	28	2.86
Misty Coleman	64	37	3.16
Dr. Scott Craft	81	19	2.63
Bonnie Daniels	60	33	1.79
Joe Dunson	25	27	3.89
Steve Ford	72	47	1.96
Rick Gehlbach	55	41	1.93
Dr. Joni Grim	84	27	3.22
Dr. Brad Hedges	67	18	1.11
Chris Johnson	92	50	1.92
Ellen Marshall	112	39	2.05
Karis Mason	69	33	1.27
Jessica Mitchell	28	21	1.95
Amanda Moore	45	38	3.55
Paula Moreland	75	32	1.94
Tricia Ostrander	74	63	1.80
Dr. Chris Ray	34	30	1.50
Dr. Robin Rippeth	24	16	1.63
Claire Robitaille	42	29	2.10
Kimberly Rugg	51	41	3.12
Mike Selegue	91	51	1.96
Heather Stevens	20	12	2.16
Average	59	32	2.23

The No Show rate for October was 18%. When considering both the no show rate and the cancellation rate, this figure is 29%.

VII: AOD UTILIZATION REVIEW

There are currently no AOD groups active within the agency. AOD clients continue to be seen on an individual basis following the agency's revised AOD program plan.

VIII: INVOLUNTARY TERMINATIONS

No involuntary terminations were conducted during the month of October 2005.

IX: PROFESSIONAL STAFF ORGANIZATION

The clinical staff maintains current licensure requirements.

Mid-Ohio Psychological Services has been approved as a CEU provider by the Ohio Psychological Association (#311358292) and the Ohio Counselor, Social Worker & Marriage and Family Therapy Board (RCS060502). The third agency sponsored training was held on 10/28/2005 entitled Mental Health and the Criminal Justice System: Coordinating Care by Dr. Scott Craft and Dr. Christopher Ray.

Clinician	Workshop Name	Dates Attended	# of CEU's
Brad Hedges	MH and CJ: Coordinating Care	10/28/2005	4
Chris Ray	MH and CJ: Coordinating Care	10/28/2005	4
Robin Rippeth	MH and CJ: Coordinating Care	10/28/2005	4
Karis Mason	MH and CJ: Coordinating Care	10/28/2005	4
Mike Selegue	MH and CJ: Coordinating Care	10/28/2005	4
Ellen Marshall	MH and CJ: Coordinating Care	10/28/2005	4
Joni Grim	MH and CJ: Coordinating Care	10/28/2005	4
Tricia Ostrander	MH and CJ: Coordinating Care	10/28/2005	4
Joe Dunson	MH and CJ: Coordinating Care	10/28/2005	4
Derrick Gehlbach	Clinical Supervision	10/26/2005	6
Derrick Gehlbach	AOD Prevention and Treatment	10/2-10/4	18.5

The Mental Health and Criminal Justice: Coordinating Care training was also attended by 2 individuals from outside the agency.

X: REVIEW OF WAITING LIST

There were a total of 94 new clients seen in the month of October. Sixty percent of these new clients were from Fairfield County. The total number of clients seen in the month of October was 712.

The average time between phone intake and completion of intakes for new clients was 40 days.

XI: REVIEW OF SERVICES UNDER CONTRACT

Currently no services are provided under contract to this agency.

XII: FOCUSED REVIEW AREA

The focused area of review for October was to review the number of clients released from psychiatric inpatient care that do not receive necessary services within two weeks of requesting them and to conduct a fire drill.

A review of clients who had psychiatric hospital stays in the past twelve months was conducted.

There were 26 incidents involving 17 clients being psychiatrically hospitalized; this is a decrease from 39 incidents for the same time frame last year. There were fifteen adults (88% of the clients) including 5 females and 10 males and two children (12% of the clients) including 2 females and 0 males hospitalized. Nine of the hospitalizations were in a state facility; all others were in community hospitals. On average (mean) the client's hospitalization lasted 60 days. The median length of stay was 5 days.

Three of the clients hospitalized did not have a diagnosis that would qualify as severely mentally disabled. One of these clients (adult) was hospitalized for forensic reasons; a second client (adult) was reportedly hospitalized due to medication instability; and the third (child) may have occurred due to the lack of availability of placement in another setting such as foster care.

There were a total of 17 clients hospitalized:

- 12 % of the clients were diagnosed with an affective disorder
- 12 % were diagnosed with a co-occurring affective and AOD disorder
- 24 % were diagnosed with a thought disorder
- 18 % were diagnosed with a co-occurring thought and AOD disorder
- 29 % were diagnosed with a mental health disorder other than affective and thought disorder
- 5 % were diagnosed with a co-occurring other mental health disorder and AOD

Clients had an average of 6 contacts with the agency and missed one scheduled appointment in the ten days before admission to the hospital. All clients received services within 14 days of discharge. Clients had an average of seven contacts with the agency in the ten days following their release from the hospital. They missed an average of one scheduled appointment in the same time period.

A summary of data reflecting hospitalizations is attached. Also attached are graphs of the data.

A fire drill was conducted on October 21, 2005 at 8:00 am at the Lancaster office. The drill message was delivered using the intercom on the phone system. Three buildings were evacuated in 59 seconds.

XIII: RESPONSE TO LAST MONTHS FOCUS REVIEW

There was no response to last month's focused review.

XIV: CLIENT RIGHTS AND GRIEVANCES

There were no client rights or grievance issues for October 2005.

XV: TREATMENT OUTCOMES REPORTING

The agency is currently working with outcomes data to try and develop reports that will pull agency level information regarding client outcomes to be used for treatment improvement and quality assurance. The agency continues to submit outcomes data on a regular basis to the state at a rate about that of the other agencies in the local system.

cc: Fairfield County Mental Health and Recovery Services Board
MOPS Board of Directors
MOPS Staff
QA Minutes Logbook

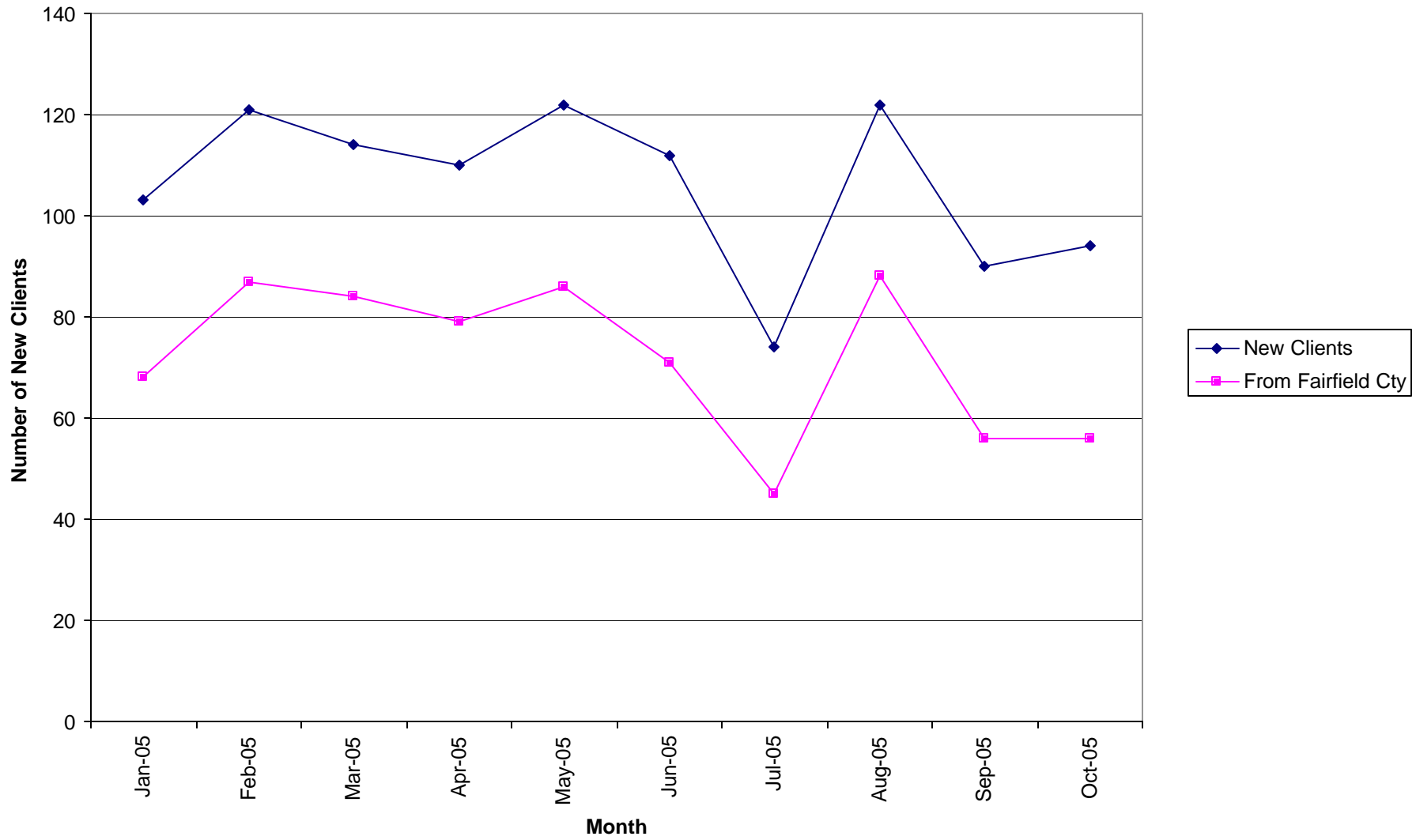
Agency Service Budget Month of October 2005

	Service Provided for Month		Budgeted for Month		Fiscal Y-T-D Provided		Fiscal Y-T-D Budgeted		Variance between Budgeted and Provided Y-T-D	
	Total For All of MOPS	Fairfield County Medicaid	Total For All of MOPS	Fairfield County Medicaid	Total For All of MOPS	Fairfield County Medicaid	Total For All of MOPS	Fairfield County Medicaid	Total For All of MOPS	Fairfield County Medicaid
Diagnostic/Assessment	213	104	200	83	772	389	800	332		
	\$27,649	\$13,558	\$25,998	\$10,789	\$100,300	\$50,592	\$103,992	\$43,157	(\$3,692)	\$7,435
Individual Counseling	931	590	962	510	3,615	2,256	3,848	2,040		
	\$83,790	\$53,136	\$86,580	\$45,900	\$325,332	\$202,995	\$346,320	\$183,600	(\$20,988)	\$19,395
Individual CSP	205	191	302	208	861	830	1,208	832		
	\$17,525	\$16,279	\$25,767	\$17,747	\$73,461	\$70,799	\$103,067	\$70,986	(\$29,606)	(\$188)
Group CSP	0	0	0	0	0	0	0	0		
	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Group	187	24	208	26	791	127	832	104		
	\$7,371	\$959	\$8,212	\$1,026	\$31,244	\$5,018	\$32,847	\$4,106	(\$1,603)	\$912
Medication	53	36	53	34	214	151	212	136		
	\$11,113	\$7,612	\$11,176	\$7,170	\$45,021	\$31,905	\$44,704	\$28,678	\$316	\$3,226
AOD Assessment	0	0	2	2	0	0	8	8		
	\$0	\$0	\$192	\$192	\$0	\$0	\$770	\$770	(\$770)	(\$770)
AOD Individual	0	0	2	1	0	0	8	4		
	\$0	\$0	\$131	\$87	\$0	\$0	\$698	\$349	(\$698)	(\$349)
AOD Group	0	0	12	6	0	0	48	24		
	\$0	\$0	\$457	\$228	\$0	\$0	\$1,828	\$914	(\$1,828)	(\$914)
Court Diversion	167	0	196	0	755	0	784	0		
	\$5,842	\$0	\$6,860	\$0	\$26,422	\$0	\$27,440	\$0	(\$1,019)	\$0
Forensic Evaluations	2	0	2	0	2	0	8	0		
	\$1,000	\$0	\$1,000	\$0	\$1,000	\$0	\$4,000	\$0	(\$3,000)	\$0
Other	0	0	8	0	0	0	32	0		
	\$0	\$0	\$280	\$0	\$0	\$0	\$1,120	\$0	(\$1,120)	\$0
Sum \$	\$153,289	\$91,545	\$165,373	\$83,140	\$601,780	\$361,308	\$661,666	\$332,560	(\$59,887)	\$28,748

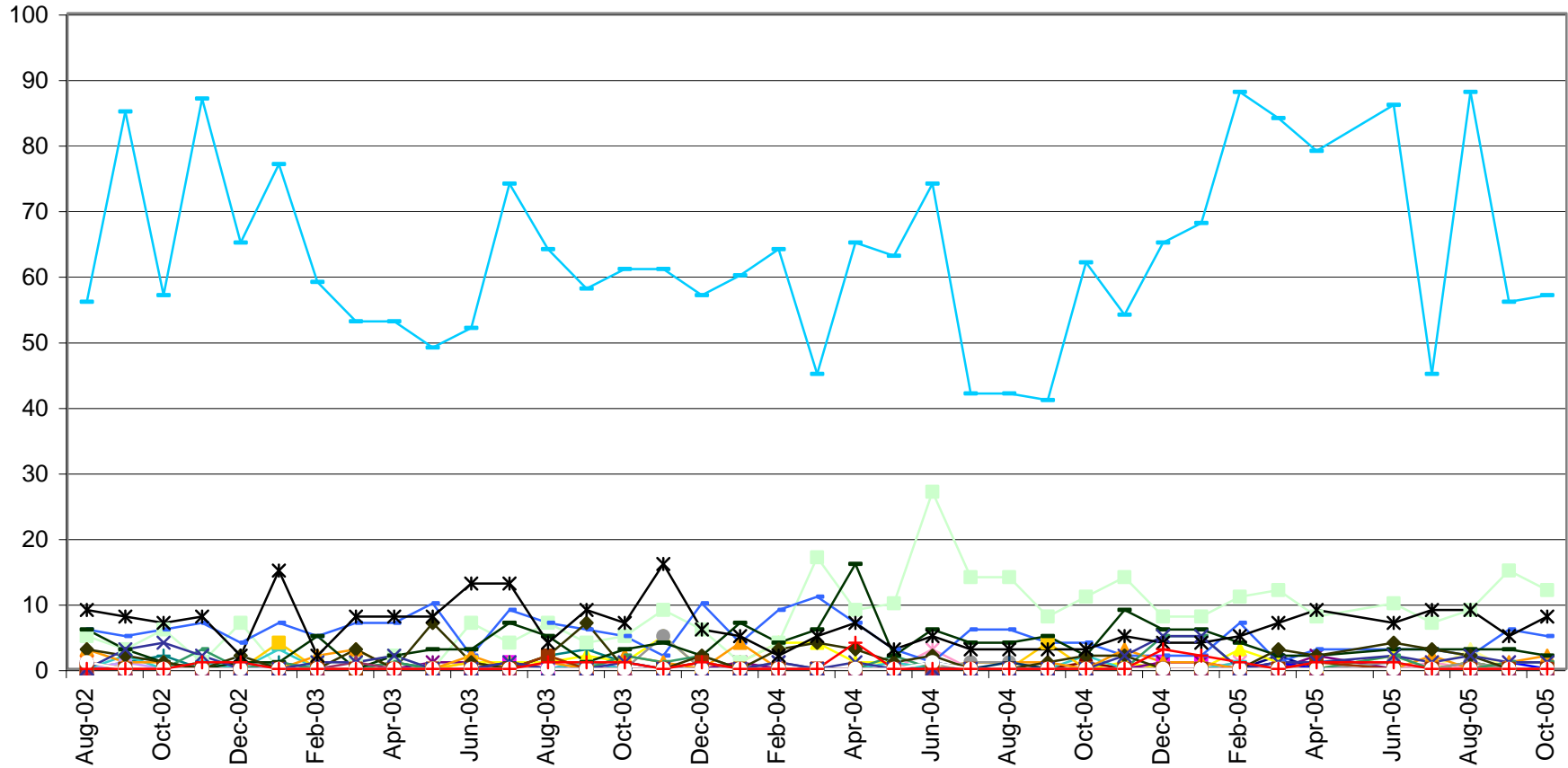
* () figures indicate that MOPS provided fewer services in this category than budgeted.

60% Percent of Services for Fairfield County
 9.06% Percent Below Overall MOPS Budget
 8.64% Percent Over Fairfield County Medicaid

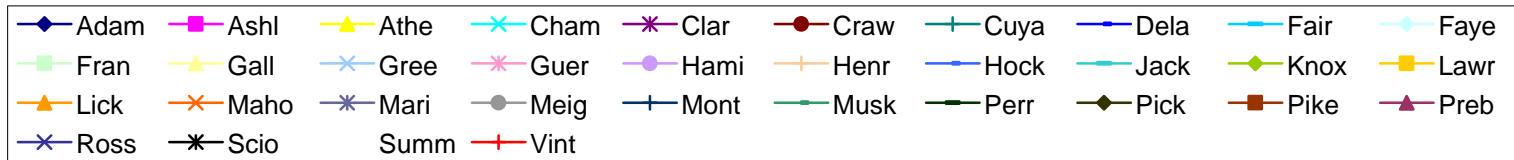
New Clients



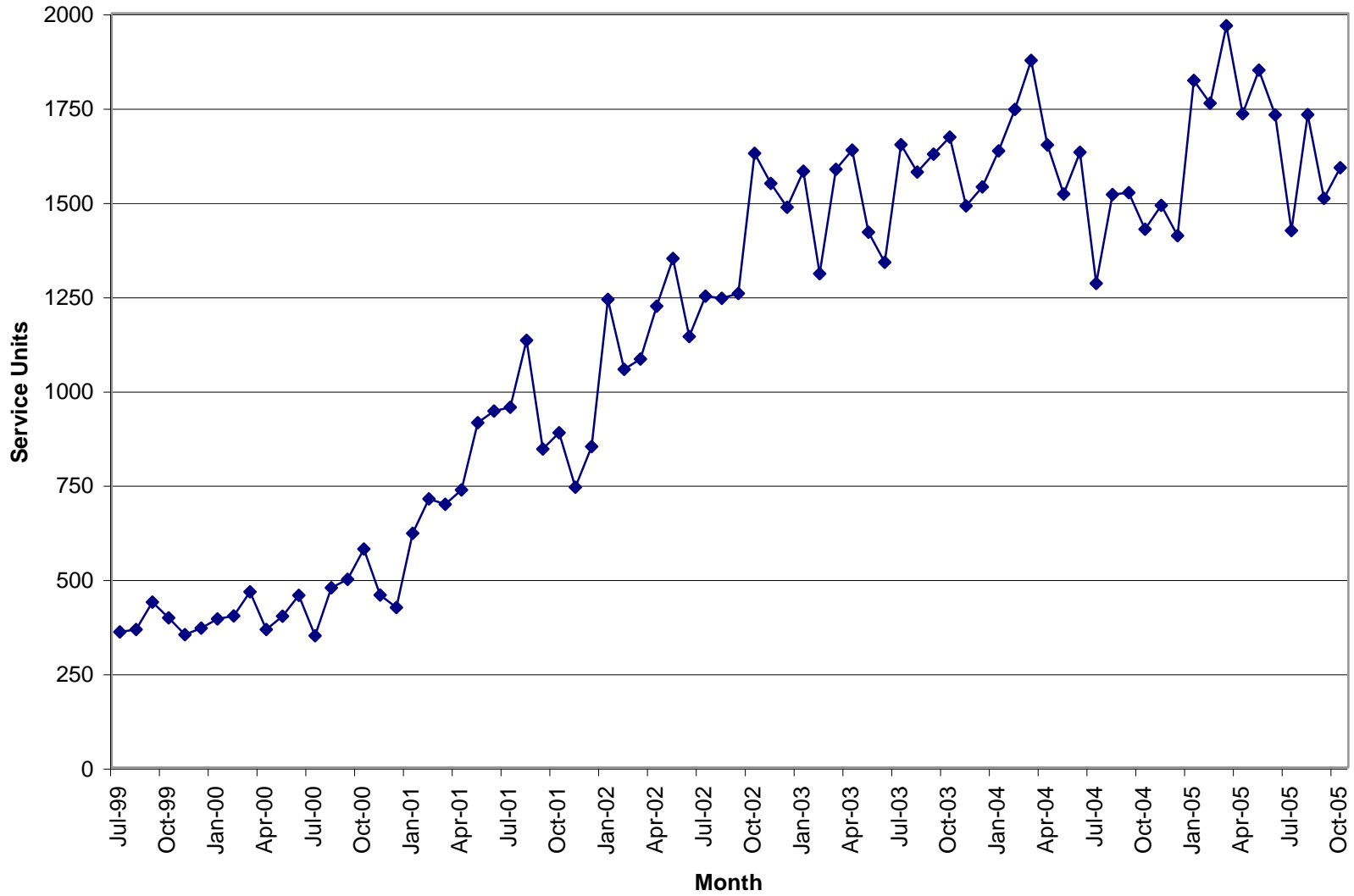
Number of Intakes by County



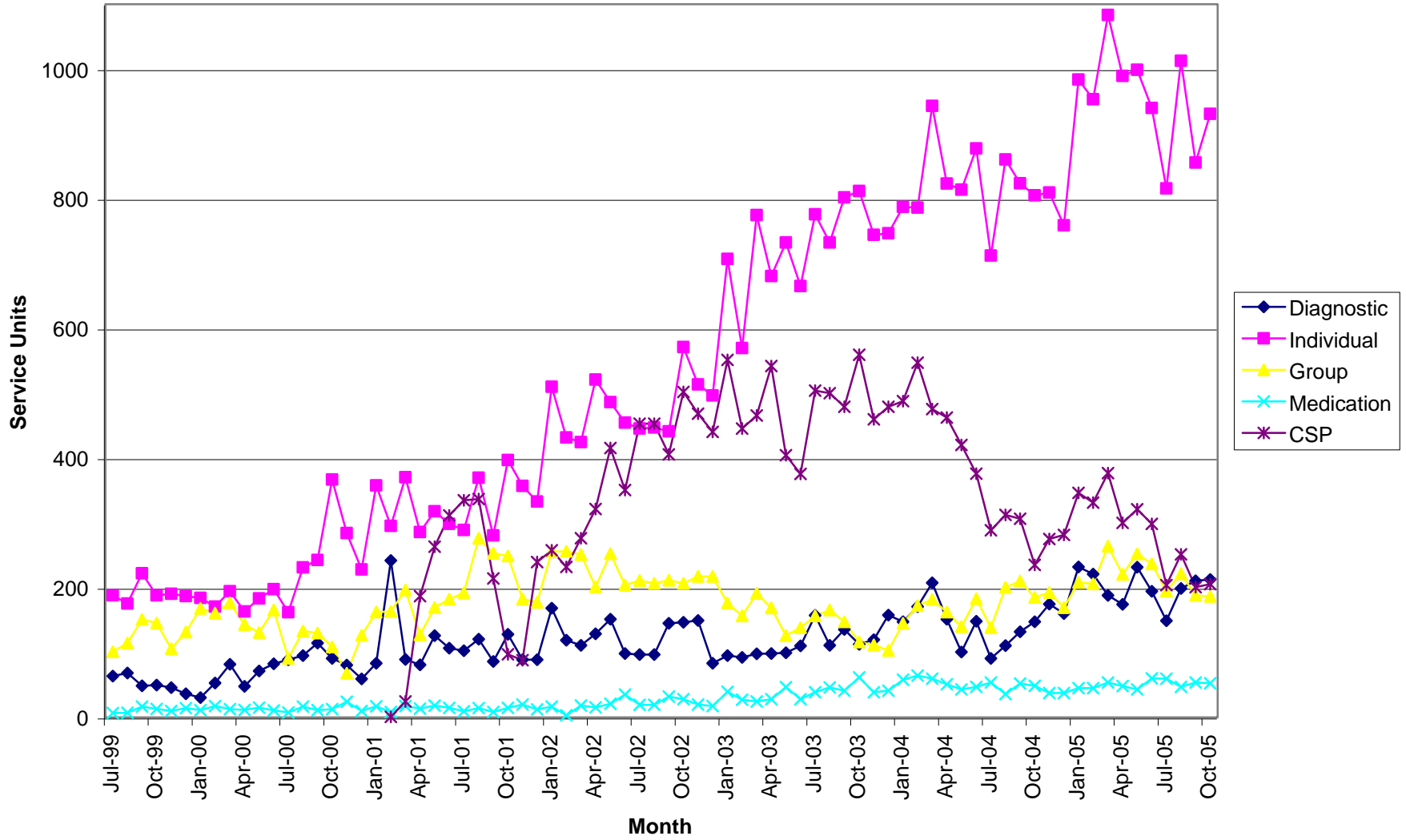
Prior to 9/05 the numbers reported were somewhat inflated due to a report issue that has been corrected.



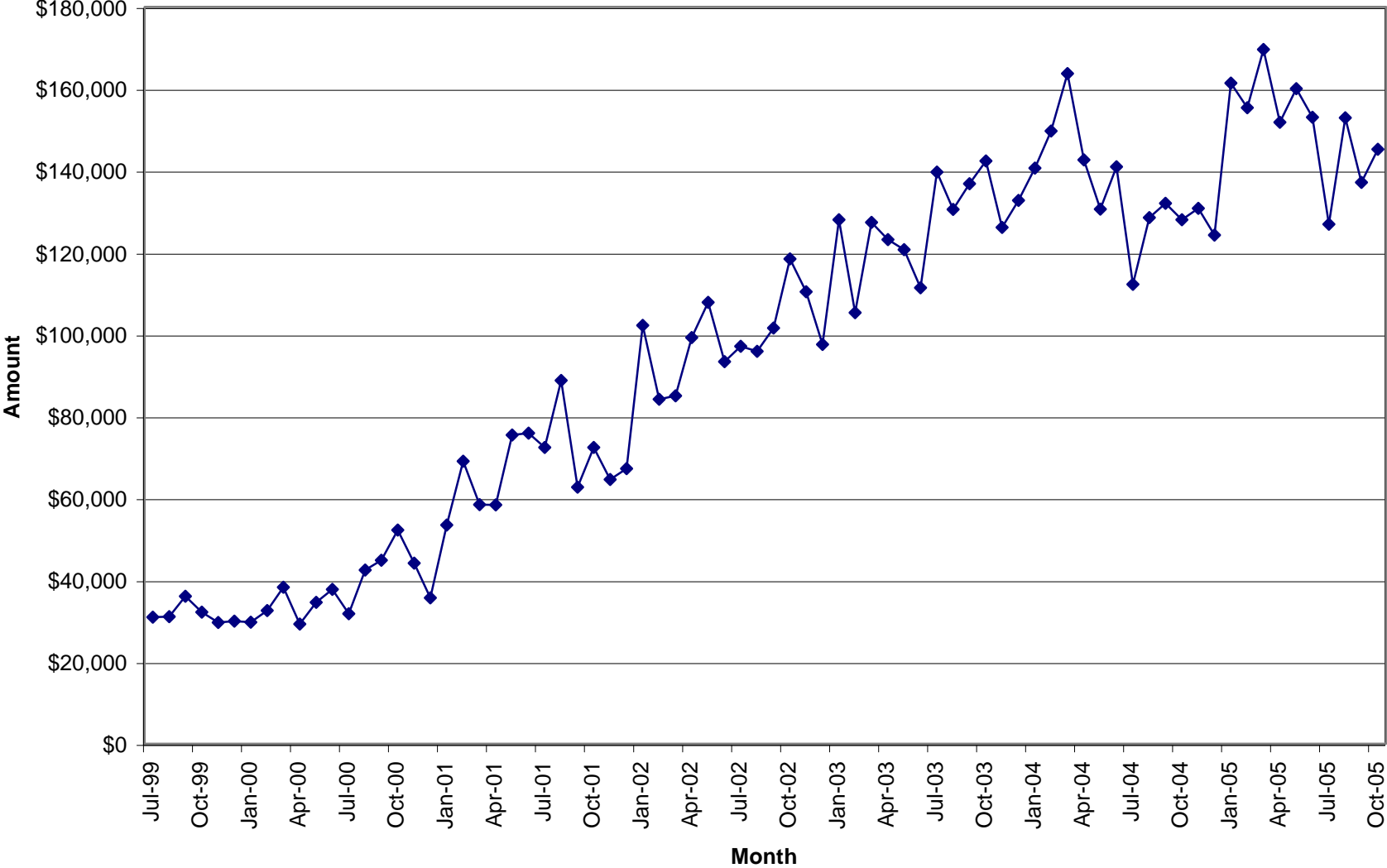
Total Units of Service



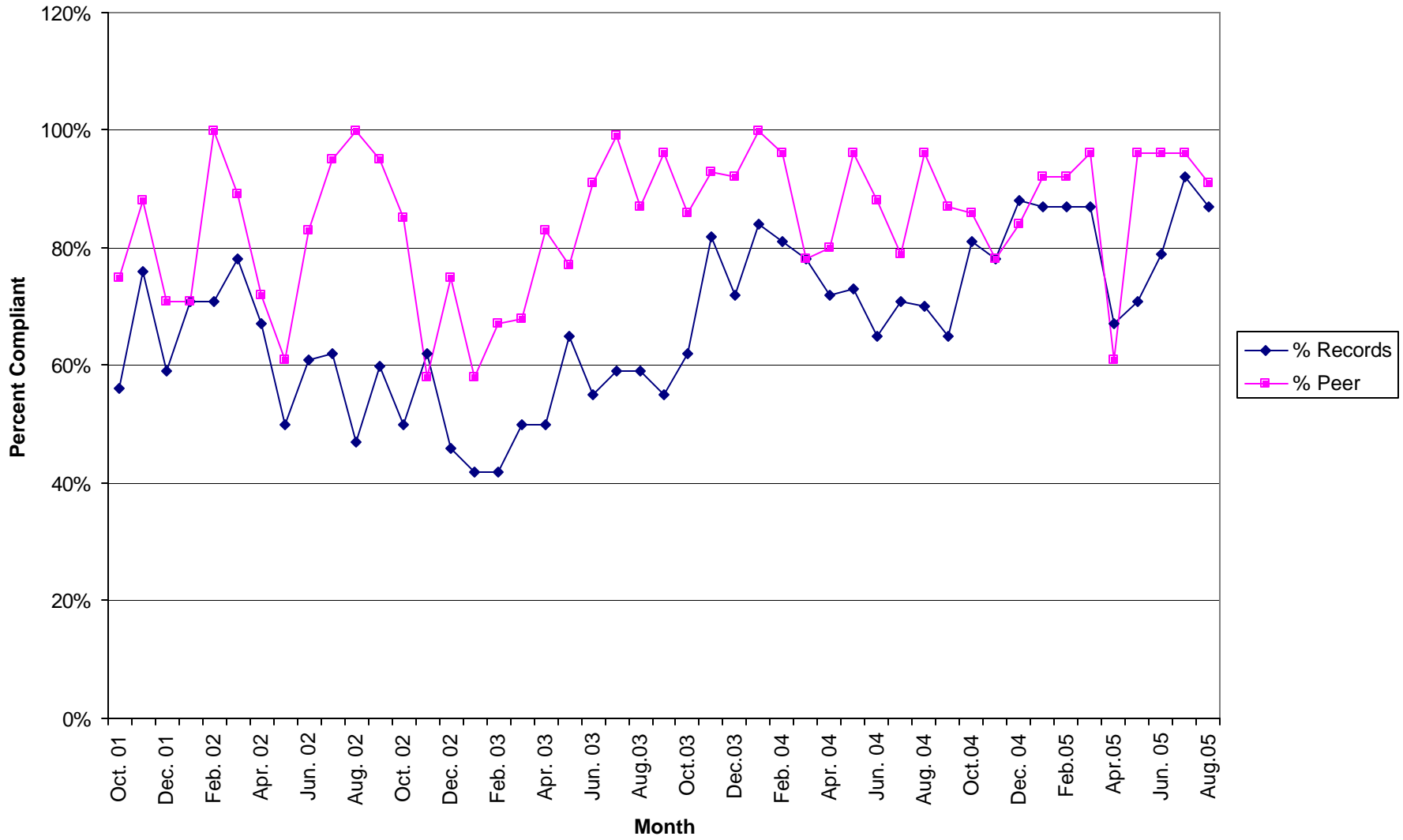
Units of Service



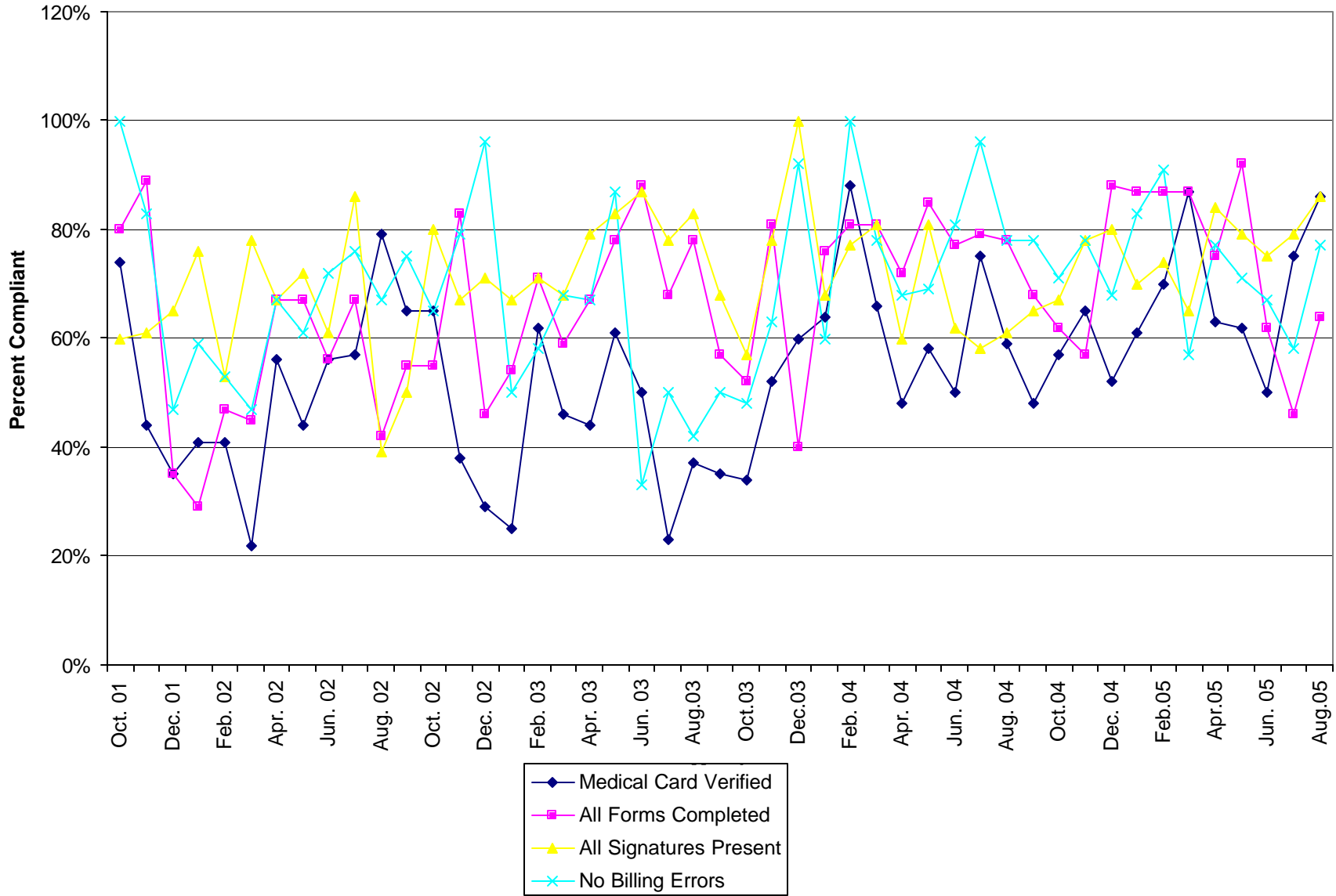
Total Units \$



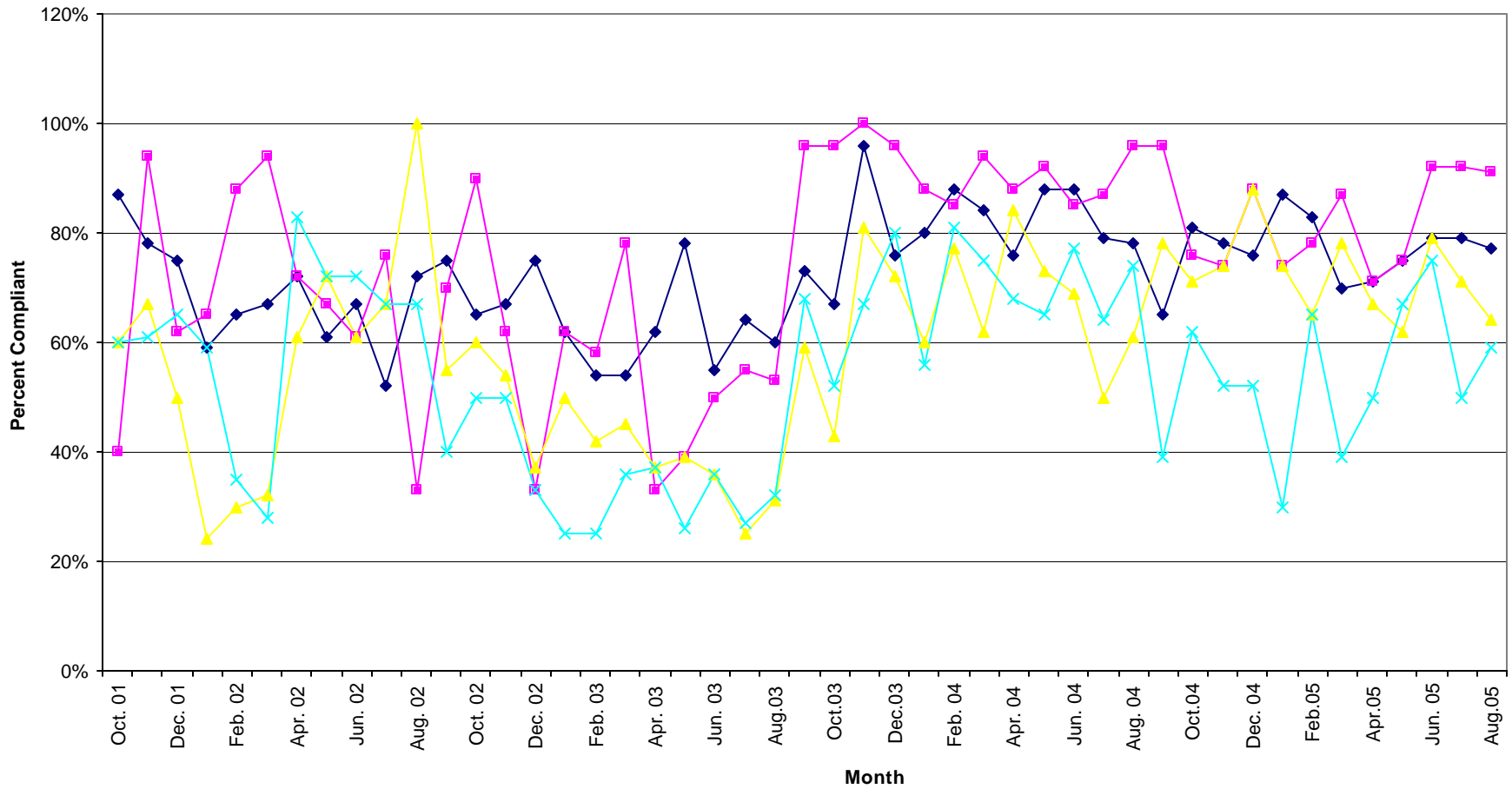
Compliance Review



Selected Record Review Issues



Selected Record Review Issues



- ◆ ISP Completed and Updated
- Health Assessment Completed and Reviewed
- ▲ All Notes Present
- × Record Maintained Consistently

**Unit Production & Scheduling Proficiency by Clinician
Mid Ohio Psychological Services**

October 2005

	Cancellations	Missed	Diagnostics	Evaluations	AOD Assessments	Individual	Group	Community Support	Medication	Other Units	Total Units	Billable Units	Units Billed+ Missed	Schedule Proficiency	% Canceled	% Missed	Lost Units due to C & M	% of Total Billable Units
Unit Rate			129.99	129.99	96.24	90	39.48	65	195	35								
Dean Bachelor	4	19	0.00	0.00	0.00	5.50	12.00	0.00	0.0		40.50	17.50	36.50	48%	10%	47%	57%	1%
A. J. Bierly*	0	0	0.00	0.00	0.00	0.00	0.00	68.10	0.0		68.10	68.10	68.10	100%	0%	0%	0%	4%
Misty Coleman	24	31	6.00	0.00	0.00	66.20	60.50	3.30	0.0		191.00	136.00	167.00	71%	13%	16%	29%	8%
Scott Craft	6	22	0.00	0.00	0.00	20.50	36.40	1.00	0.0	100.0	185.90	157.90	179.90	85%	3%	12%	15%	9%
Bonnie Daniels	7	21	0.00	0.00	0.00	57.30	0.00	0.80	0.0		86.10	58.10	79.10	67%	8%	24%	33%	3%
Joe Dunson *	0	0	0.00	0.00	0.00	0.00	0.00	0.00	0.0	66.9	66.90	66.90	66.90	100%	0%	0%	0%	4%
Steve Ford	18	39	16.50	0.00	0.00	93.60	0.00	3.40	0.0		170.50	113.50	152.50	67%	11%	23%	33%	6%
Rick Gehlbach	7	24	10.50	3.00	0.00	58.20	0.00	2.90	0.0		105.60	74.60	98.60	71%	7%	23%	29%	4%
Joni Grim	10	24	4.00	0.00	0.00	41.90	56.00	2.70	0.0		138.60	104.60	128.60	75%	7%	17%	25%	6%
Brad Hedges	4	1	1.00	23.20	0.00	7.30	0.00	0.30	0.0		36.80	31.80	32.80	86%	11%	3%	14%	2%
Chris Johnson	16	37	23.50	0.00	0.00	63.00	0.00	10.30	0.0		149.80	96.80	133.80	65%	11%	25%	35%	6%
Ellen Marshall	17	36	19.70	0.00	0.00	65.80	0.00	1.20	0.0		139.70	86.70	122.70	62%	12%	26%	38%	5%
Karis Mason	23	21	16.10	5.50	0.00	26.40	6.00	0.30	0.0		98.30	54.30	75.30	55%	23%	21%	45%	3%
Jessica Mitchell	22	16	0.00	0.00	0.00	31.50	3.00	1.70	0.0		74.20	36.20	52.20	49%	30%	22%	51%	2%
Amanda Moore	3	0	2.00	0.00	0.00	36.40	0.00	88.00	0.0		129.40	126.40	126.40	98%	2%	0%	2%	7%
Paula Moreland	12	19	6.00	0.00	0.00	35.70	0.00	6.60	0.0		79.30	48.30	67.30	61%	15%	24%	39%	3%
Tricia Ostrander	23	21	12.30	0.00	0.00	53.70	0.00	0.00	0.0		110.00	66.00	87.00	60%	21%	19%	40%	4%
Chris Ray	7	16	11.60	3.70	0.00	34.30	0.00	0.00	0.0		72.60	49.60	65.60	68%	10%	22%	32%	3%
Robin Rippeth	3	5	17.00	0.00	0.00	16.20	0.00	0.00	0.0		41.20	33.20	38.20	0%	0%	0%	0%	2%
Claire Robitaille	11	20	1.00	0.00	0.00	57.20	0.00	0.00	0.0		89.20	58.20	78.20	65%	12%	22%	35%	3%
Kimberly Rugg	31	32	13.20	0.00	0.00	74.80	0.00	10.80	0.0		161.80	98.80	130.80	61%	19%	20%	39%	6%
Mike Selegue	25	51	12.20	0.00	0.00	76.70	0.00	2.40	0.0		167.30	91.30	142.30	55%	15%	30%	45%	5%
Charles Snyder	82	93	0.00	0.00	0.00	0.00	0.00	0.00	52.7		227.70	52.70	145.70	23%	36%	41%	77%	3%
Heather Stevens	4	8	4.70	0.00	0.00	8.80	12.80	1.60	0.0		39.90	27.90	35.90	0%	0%	0%	0%	2%
Sum Totals	359	556	177.30	35.40	0.00	931.00	186.70	205.40	52.7	166.9	2670.40	1755.40	2311.40					
Average														62%	11%	18%	30%	4%

* These clinicians do not have a daily scheduler therefore their totals are not reported in the missed or cancelled sessions.

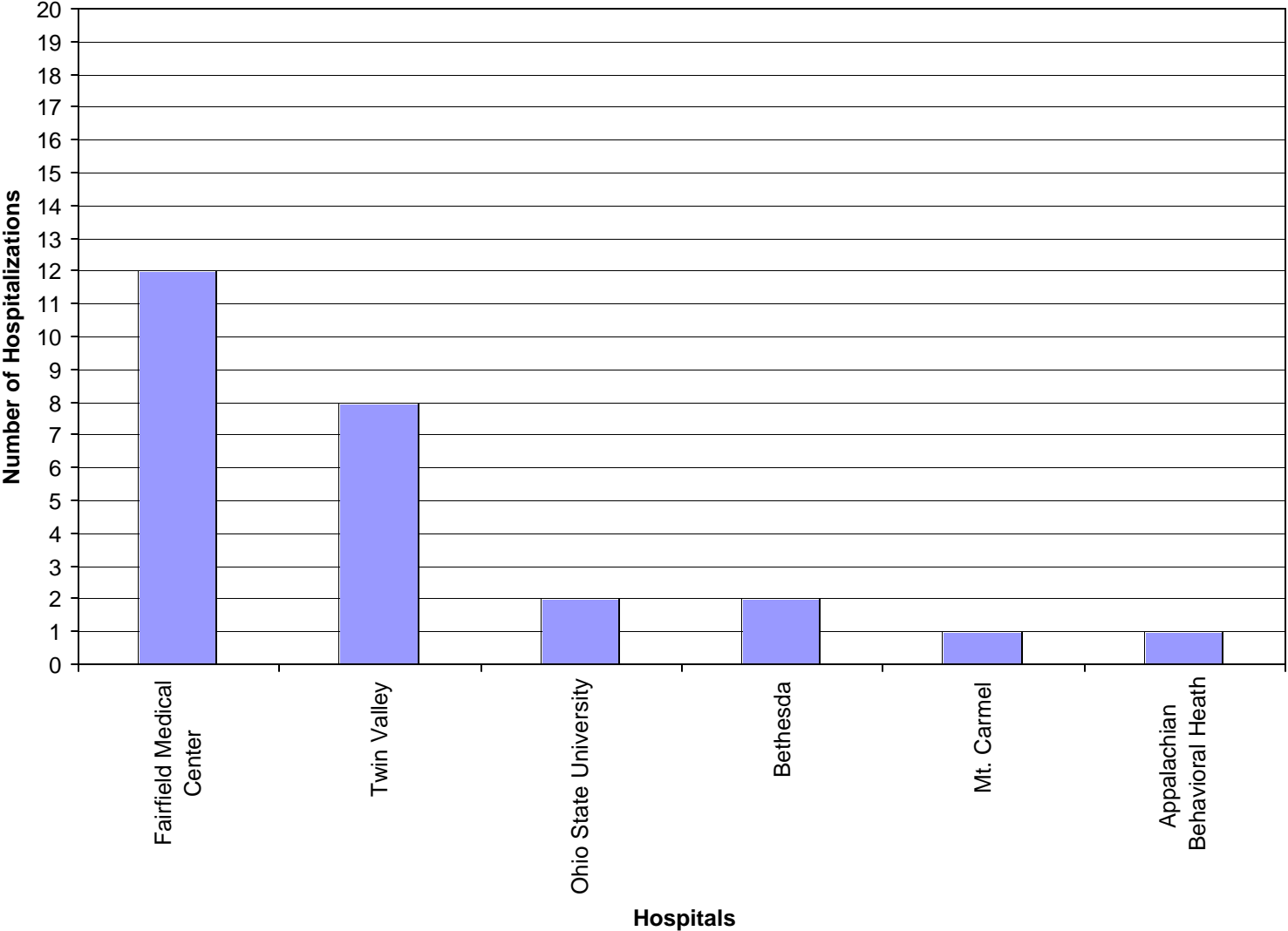
% of Agency \$ Billed by Clinician

October	2005		Weighted							
	DA	EVAL	AOD	IND	Group	CSP	MED	Other	Tot Units	% of Tot
Unit Rate	\$ 129.99	\$ 129.99	\$ 96.24	\$ 90	\$ 39.48	\$ 65	\$ 195	\$ 35		
Dean Bachelor	0.00	0.00	0.00	5.50	12.00	0.00	0.0	0.0		
	\$0	\$0	\$0	\$495	\$474	\$0	\$0	\$0	\$ 968.76	0.69%
A.J. Bierly	0.00	0.00	0.00	0.00	0.00	68.10	0.00	0.00		
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4,426.50	\$0.00	\$0.00	\$ 4,426.50	3.17%
Misty Coleman	6.00	0.00	0.00	66.20	60.50	3.30	0.00	0.00		
	\$779.94	\$0.00	\$0.00	\$5,958.00	\$2,388.54	\$214.50	\$0.00	\$0.00	\$ 9,340.98	6.69%
Scott Craft	0.00	0.00	0.00	20.50	36.40	1.00	0.0	100.0		
	\$0.00	\$0.00	\$0.00	\$1,845.00	\$1,437.07	\$65.00	\$0.00	\$3,500.00	\$ 6,847.07	4.90%
Bonnie Daniels	3.50	0.00	0.00	57.30	0.00	0.80	0.00	0.00		
	\$454.97	\$0.00	\$0.00	\$5,157.00	\$0.00	\$52.00	\$0.00	\$0.00	\$ 5,663.97	4.06%
Joe Dunson	0.00	0.00	0.00	0.00	0.00	0.00	0.00	66.90		
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,341.50	\$2,341.50	1.68%
Steve Ford	16.50	0.00	0.00	93.60	0.00	3.40	0.00	0.00		
	\$2,144.84	\$0.00	\$0.00	\$8,424.00	\$0.00	\$221.00	\$0.00	\$0.00	\$ 10,789.84	7.73%
Rick Gehlbach	10.50	3.00	0.00	58.20	0.00	2.90	0.00	0.00		
	\$1,364.90	\$389.97	\$0.00	\$5,238.00	\$0.00	\$188.50	\$0.00	\$0.00	\$ 7,181.37	5.14%
Joni Grim	4.00	0.00	0.00	41.90	56.00	2.70	0.00	0.00		
	\$519.96	\$0.00	\$0.00	\$3,771.00	\$2,210.88	\$175.50	\$0.00	\$0.00	\$ 6,677.34	4.78%
Brad Hedges	1.00	23.20	0.00	7.30	0.00	0.30	0.00	0.00		
	\$129.99	\$3,015.77	\$0.00	\$657.00	\$0.00	\$19.50	\$0.00	\$0.00	\$ 3,822.26	2.74%
Chris Johnson	23.50	0.00	0.00	63.00	0.00	10.30	0.00	0.00		
	\$3,054.77	\$0.00	\$0.00	\$5,670.00	\$0.00	\$669.50	\$0.00	\$0.00	\$ 9,394.27	6.73%
Ellen Marshall	19.70	0.00	0.00	65.80	0.00	1.20	0.00	0.00		
	\$2,560.80	\$0.00	\$0.00	\$5,922.00	\$0.00	\$78.00	\$0.00	\$0.00	\$8,560.80	6.13%
Karis Mason	16.10	5.50	0.00	26.40	6.00	0.30	0.00	0.00		
	\$2,092.84	\$714.95	\$0.00	\$2,376.00	\$236.88	\$19.50	\$0.00	\$0.00	\$ 5,440.16	3.90%
Jessica Mitchell	0.00	0.00	0.00	31.50	3.00	1.70	0.00	0.00		
	\$0.00	\$0.00	\$0.00	\$2,835.00	\$118.44	\$110.50	\$0.00	\$0.00	\$3,063.94	2.19%
Amanda Moore	2.00	0.00	0.00	36.40	0.00	88.00	0.00	0.00		
	\$259.98	\$0.00	\$0.00	\$3,276.00	\$0.00	\$5,720.00	\$0.00	\$0.00	\$9,255.98	6.63%
Paula Moreland	6.00	0.00	0.00	35.70	0.00	6.60	0.0	0.0		
	\$779.94	\$0.00	\$0.00	\$3,213.00	\$0.00	\$429.00	\$0.00	\$0.00	\$ 4,421.94	3.17%
Tricia Ostrander	12.30	0.00	0.00	53.70	0.00	0.00	0.0	0.0		
	\$1,598.88	\$0.00	\$0.00	\$4,833.00	\$0.00	\$0.00	\$0.00	\$0.00	\$ 6,431.88	4.61%
Chris Ray	11.60	3.70	0.00	34.30	0.00	0.00	0.00	0.00		
	\$1,507.88	\$480.96	\$0.00	\$3,087.00	\$0.00	\$0.00	\$0.00	\$0.00	\$ 5,075.85	3.64%
Robin Rippeth	17.00	0.00	0.00	16.70	0.00	0.00	0.00	0.00		
	\$2,209.83	\$0.00	\$0.00	\$1,503.00	\$0.00	\$0.00	\$0.00	\$0.00	\$ 3,712.83	2.66%
Claire Robitaille	1.00	0.00	0.00	57.20	0.00	0.00	0.00	0.00		
	\$129.99	\$0.00	\$0.00	\$5,148.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,277.99	3.78%
Kimberly Rugg	13.20	0.00	0.00	74.80	0.00	10.80	0.00	0.00		
	\$1,715.87	\$0.00	\$0.00	\$6,732.00	\$0.00	\$702.00	\$0.00	\$0.00	\$9,149.87	6.55%
Mike Selegue	12.20	0.00	0.00	76.70	0.00	2.40	0.00	0.00		
	\$1,585.88	\$0.00	\$0.00	\$6,903.00	\$0.00	\$156.00	\$0.00	\$0.00	\$8,644.88	6.19%
Charles Snyder	0.00	0.00	0.00	0.00	0.00	0.00	52.70	0.00		
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$10,276.50	\$0.00	\$10,276.50	7.36%
Heather Stevens	4.70	0.00	0.00	8.80	12.80	1.60	0.00	0.00		
	\$610.95	\$0.00	\$0.00	\$792.00	\$505.34	\$104.00	\$0.00	\$0.00	\$2,012.30	1.44%
Sum Totals	\$21,786.32	\$4,601.65	\$0.00	\$77,103.00	\$7,370.92	\$12,649.00	\$10,276.50	\$5,841.50	\$139,628.89	

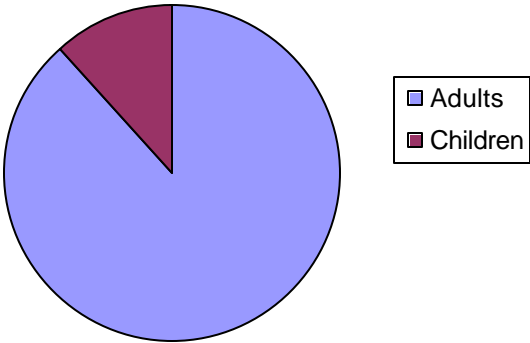
This chart represents the percentage of the total dollars billed by clinician in September 2005.

Psychiatric Care Hospital Utilization																					
Services Rendered Within 20 days of Hospitalization																					
20 day include 10 days before and 10 days after stay																					
Month	ID#	Category*	Sex	Diagnosis	Facility	Hospital Stay	Length of Stay					After					Seen within 14 days of discharge				
							Stay	Individual	CSP	Group	Medication	Missed	Individual	CSP	Group	Medication		Missed			
Oct-04	03022004	A	M	296.64 301.91 304.31	Bipolar I Disorder, Most Recent Episode Mixed Severe w/Psychotic Features Personality Disorder NOS w/Antisocial Features Cannabis Dependence in Early Full Remission	Twin Valley	0/1/2004-10/18/2004	18		8				2	1	1		1	2	Yes	
	020605C1	A	M	295.30 304.80	Schizophrenia Disorder Paranoid Type Polysubstance Abuse	Twin Valley	2/06/2004-10/19/2004	257		3				1				4		1	Yes
	02102204	A	M	295.70 301.83	Schizoaffective Disorder Bipolar/Depressive Type Borderline Personality Disorder	FMC	0/18/2004-10/22/2004	5	1	4		1	1		1	2				1	Yes
	02050902	A	F	311 300.01 303.90 304.30	Depressive Disorder NOS Panic Disorder w/o Agoraphobia Alcohol Dependence Cannabis Dependence	FMC	0/02/2004-10/07/2004	6	1			1	1		1					1	Yes
Nov-04	031110C1	A	M	311	Depressive Disorder NOS	Twin Valley	0/20/2004-11/10/2004	22		6				1				3		1	Yes
Dec-04	030220C1	A	M	295.30 305.20	Schizophrenia Paranoid Type Cannabis Abuse	Twin Valley	4/05/2004-12/25/2004	265		1				1				5		1	Yes
	04060402	C	F	309.4.3 V61.21	Adjustment Disorder with Mixed Disturbance of Mood and Behavior Physical or Sexual Abuse of a Child	Bethesda	2/7/2004-12/10/2004	4	1	1					1					1	Yes
	02013108	A	M	295.10 295.70	Schizophrenia Disorganized Type Schizoaffective Disorder Bipolar Type/Depressive Type	FMC	2/05/2004-12/06/2004	2	1	1				1	3	11			1	1	Yes
Jan-05	001013C1	A	M	V61.21 304.30 307.23 301.9	Physical or Sexual Abuse of a Child Cannabis Dependence Tourette's Disorder Personality Disorder	Twin Valley	2/16/2004-01/17/2005	33		1				2	2	1				2	Yes
	04042002	A	F	307.50 296.33	Eating Disorder NOS Major Depressive Disorder Recurrent Severe w/o Psychotic Disorder	FMC	0/05/2005-01/06/2005	2		1				1	1	6			1	1	Yes
	02111502	A	F	301.83 309.81	Borderline Personality Disorder Posttraumatic Stress Disorder	FMC	0/20/2005-01/22/2005	3	2	7					1	5			1		Yes
Feb-05	None																				
Mar-05	02111502	A	F	301.83 309.81	Borderline Personality Disorder Posttraumatic Stress Disorder	OSU-Harding	3/18/2005-03/21/2005	4	2	4					2	3					Yes
	02073006	A	F	V61.20 V61.21	Parent Child Relational Problems Physical or Sexual Abuse or Neglect of a Child	FMC	3/16/2005-03/18/2005	3	1	1				1	1				1	1	Yes
Apr-05	02111502	A	F	301.83 309.81	Borderline Personality Disorder Posttraumatic Stress Disorder	FMC	3/10/2005-04/11/2005	2	1	3		1			1	3					Yes
	02111502	A	F	301.83 309.81	Borderline Personality Disorder Posttraumatic Stress Disorder	FMC	3/26/2005-04/27/2005	2	1	1					2	9			1		Yes
May-05	04121605	A	M	295.30	Schizophrenia Paranoid Type	Twin Valley	3/23/2005-05/12/2005	51		6				1				4		1	Yes
	02013109	A	M	295.30	Schizophrenia Paranoid Type	FMC	3/03/2005-05/05/2005	3	1	6		1	1		5					1	Yes
Jun-05	02111502	A	F	301.83 309.81	Borderline Personality Disorder Posttraumatic Stress Disorder	OSU-Harding	3/10/2005-06/22/2005	13	2	9					3	7			1		Yes
Jul-05	02111502	A	F	301.83 309.81	Borderline Personality Disorder Posttraumatic Stress Disorder	Appalachian Behavioral Health Cambridge Campus	7/10/2005-07/20/2005	11	1	2					2	9			1		Yes
	04080303	A	F	309.28	Adjustment Disorder with Mixed Anxiety and Depressed Mood	FMC	3/29/2005-07/01/2005	3	1					1	1					1	Yes

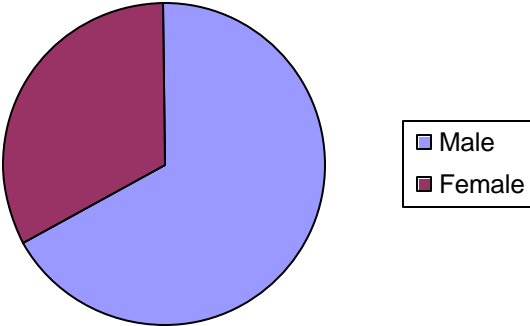
Hospitals Utilized for Inpatient Care



Adults vs. Children for Hospitalizations



Adult Demographics for Hospitalization



Child Demographics for Hospitalizations

