

Developing Unduplicated Client Counts and Building Unique Client Identifiers

NRI/State Data Infrastructure
Coordinating Center
Technical Assistance Workshop
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Unique IDs are a tool to reach a goal...not the goal.

Unique IDs can help states

- Develop unduplicated counts of the numbers of clients served
 - Important for planning and systems monitoring, budgeting
- Identify individual clients who are being served in multiple settings and help coordinate care
- Allow linkage between SMHA systems and other state and local data systems (corrections, Medicaid, employment, housing, vocational rehabilitation, etc).
- Be used to Generate Performance/Outcome Measures

Why Unique IDs/Unduplicated Client Counts?

- Important for Linking with Other Datasets
 - Allows links with Medicaid, corrections, and other parts of state government. Development of state data warehouses
 - Better care coordination, planning, budgeting, evaluation, and performance measurement
- Federal Reporting
 - URS Tables request Unduplicated Client Counts
 - Other Performance Reporting
 - URS Table 5 asks for Medicaid status of SMHA Clients
 - URS Outcome Tables may be generated by linking SMHA data with Corrections or Education data

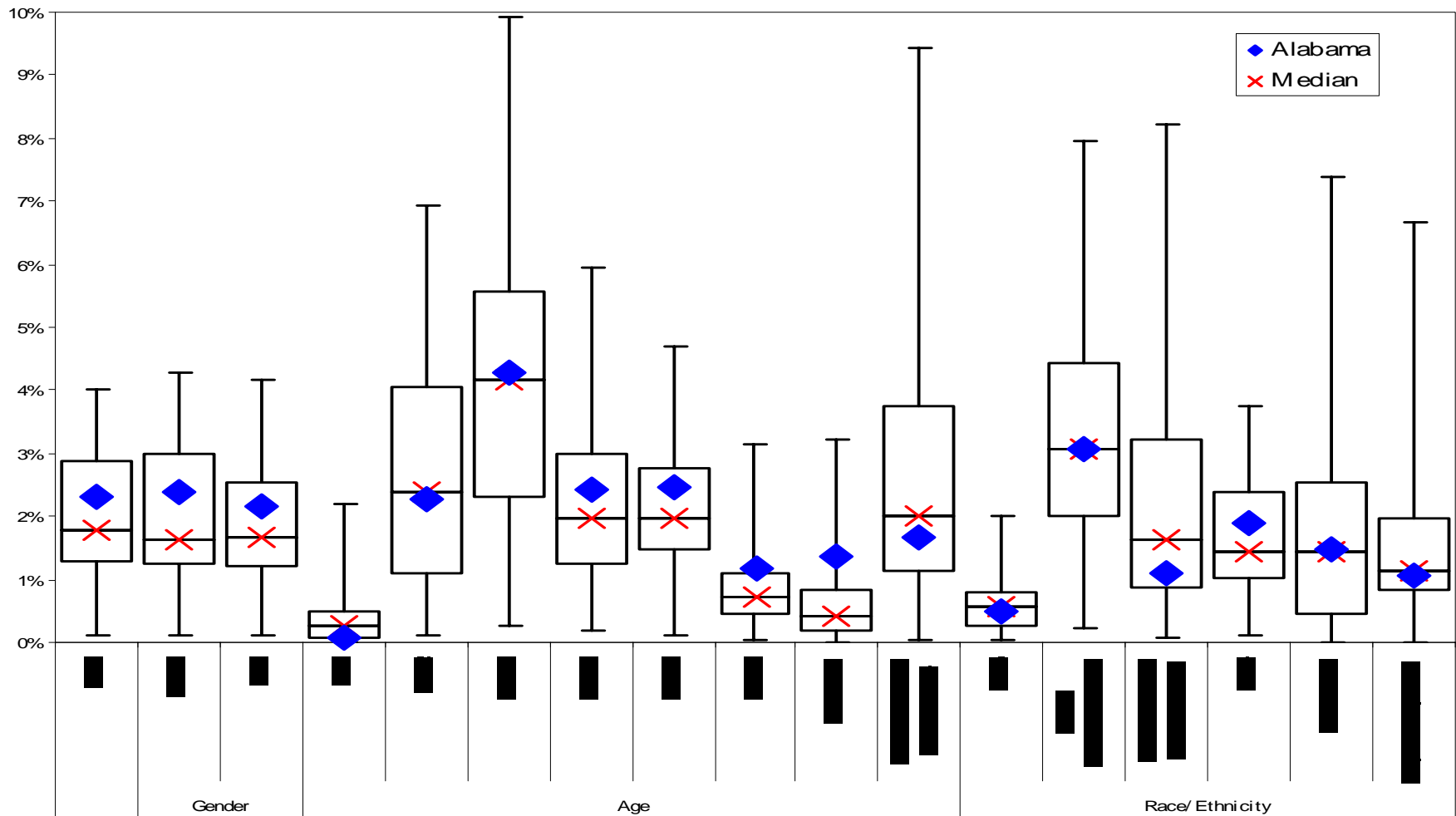
2005 URS Data on Unduplicated Client Counts

- States served 5.9 million persons in 2005—about 1.96% of their state's population
 - But we know not all states were able to report unduplicated client counts...thus, the 5.9 million may be an over count of the actual number of persons who received public mental health services.
- Over 3.2 million persons (61% of SMHA Clients) had Medicaid pay for at least part of their MH Services (URS Table 5).
 - But only 42 states were able to report on this table and some states only reported on Medicaid Eligible Clients (not Medicaid paid)

2005 URS Data on Unduplicated Client Counts

- 34 States reported they were able to report unduplicated clients counts
- 17 states reported duplication between state hospitals and community clients
- 9 states reported duplication between various community providers
- 5 states reported duplication between child and adult mh systems
- 16 States reported working on unduplication

State Mental Health Service Utilization, Percent of State Population Served: By Quartile DRAFT 2005



State Unique Identifiers: 2004-05 State MH Profiles

- 33 states reported having a unique ID
 - 22 States use Social Security Number as either their ID or as part of the ID
 - 14 in Both State Hospitals and Community Systems
 - 5 in State Hospitals
 - 3 in Community Systems
 - 25 States Use an Assigned ID (usually a random number)
 - 15 States Use a Constructed ID (created using elements used to generate the ID)
 - 4 States use Other IDs
 - Medicaid ID (MI, NC, and NJ)
 - Encrypted SSN in 1 state

Linking SMHA client data with other State data systems

- 37 States report linking Medicaid paid claims data to SMHA administrative data
- 19 States link MH client data with Alcohol and Other Drug client data
- 8 States link MH data with Criminal Justice Data
- 2 State linked Child Welfare data with SMHA data
- 2 States linked Vocational Rehabilitation data with SMHA data

TA Workshop: Plans for the Next 2 Days

- Address some legal issues in HIPAA and other law that impact states generating and using unique identifiers
- Provide Participants with examples of different ways that states are using to unduplicate client data and generate unique identifiers
- Provide participants with time to address state specific questions about generating unduplicated client counts with experts