





Hospital Emergency Room Overcrowding
Emergency Detentions



Emergency Detention w/ Warrant

1. Application for Emergency Detention (any adult over 18)
2. Application Granted for Reasonable Cause
3. Warrant Issued
 - Apprehend
 - Transport
 - Detention at inpatient mental health facility

Doing well but Missing
Hospital Buy In and Scope

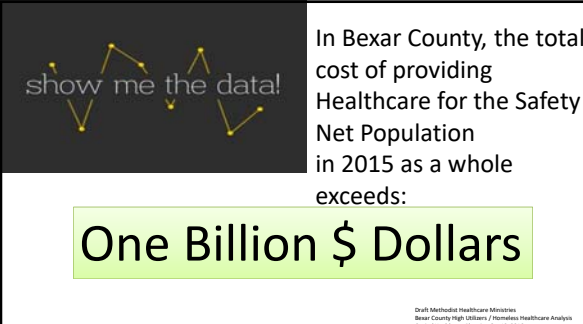


“What’s my motivation”

Diversion 1.0
2003 to 2017 Community Medical Directors Roundtable - Monthly Reports
2004 Measuring Potential and Economic and Societal Benefits
2007 Cost Analysis of the Bexar County, Texas, Jail Diversion Program
2008 to 2016 Report of Success; Annual

Diversion 2.0
2014 Bexar County Pretrial and Mental Health Improvement Process
2015 Bexar County Smart Justice: Implementation Year One Progress
2016 Council of State Governments Intake Process and Recommendations for Change

Diversion 3.0
2015 Bexar County Consortium – Community Mental Health Model
2016 MHM/Meadows – Bexar County Mental Health Systems Assessment
2016 MHM/Capital Healthcare Planning – Bexar County High Utilizers/Homeless
Healthcare Analysis (Cost)



In Bexar County, the total
cost of providing
Healthcare for the Safety
Net Population
in 2015 as a whole
exceeds:

One Billion \$ Dollars

Dyall Methodical Healthcare Ministries,
Bexar County High Utilizers / Homeless Healthcare Analysis
Capital Healthcare Planning (Oct 13, 2015)

Data-Driven Decision Making - Gonzales

Data Driven Metrics

- Encounters across all hospitals and settings totaled over 1.1 million
- Safety Net Population Data Totals = 313,985
 - Homeless Population = 14,614 or 4.7%
 - Mental Health Population = 33,810 or 10.8%
 - Super Utilizer Data = 3,507 or 1.1%

- Cost Data was submitted for just over 70%
- EMS and Incarceration costs are not included in total

Providers saw 314,000 unique patients

- 11% had MH diagnosis
- 5% were homeless
- 13% came from outside Bexar County
- 11% of the Safety Net sought care from all 8 entities
- Utilization rate of 9.5 encounters per patient

Homeless and Mental Health

- 40% of Homeless patients are also in the MH population
- Total overlap of 5,845 patients
- 54% of Homeless population are unfunded

Most expensive Patients

- Ms. M = \$484,000
- Mr. G = \$292,000
- Mr. C = \$220,000

Cost Totals for 2015

- All \$1.1 Billion
- Homeless Population \$80 million
- Mental Health exceeded \$200 million
- Super Utilizers \$175 million

Cost If Nothing is Done

The Total Cost of providing healthcare for the Safety Net population as a whole exceeds \$1 Billion annually.

SOURCE	Total Estimated Cost	Discharges	Emergency Visits	Hospital OP	Clinic Visits
Regisite	\$206,574,000 19%	\$134,905,000 22%	44,148,000 30%	27,522,000 13%	-
Centromed	\$1,956,000 0%	-	-	-	1,956,000 2%
CHCS	\$21,239,000 2%	-	-	-	21,239,000 17%
Christus	\$213,968,000 19%	\$99,796,000 16%	43,106,000 29%	71,066,000 34%	-
Methodist	\$80,397,000 7%	\$64,224,000 10%	5,546,000 4%	10,938,000 5%	-
Novel	\$2,874,000 0%	-	-	-	2,874,000 2%
Nix	\$42,714,000 4%	\$32,069,000 5%	8,301,000 2%	7,344,000 4%	-
SW General	\$54,106,000 5%	\$33,553,000 5%	13,911,000 10%	6,643,000 3%	-
University*	\$475,373,000 43%	\$255,360,000 41%	36,435,000 25%	84,971,000 41%	98,627,000 79%
Total	\$1,099,511,000	\$619,907,000	146,428,000	208,482,000	124,696,000

* Estimated costs are highly weighted to those systems providing more intense services such as inpatient acute care and emergency services

Outcomes So Far

- Downtown Homeless Count down by 80%
- 8,000 lives improved by transition to homes (3,000) and off streets plus higher level of care.

- 1,000 empty jail beds
- Approximately \$96 million in cost avoidance at jail
- Over 35,000 helped with sobering, detox and crisis intervention

- Reduced Jail Population
- Reduced Recidivism
- Reduced Cost
- Increased access to care
- Increased public safety

**BEXAR COUNTY
DEPARTMENT OF BEHAVIORAL AND MENTAL
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