

Collaborative Models for Expediting Access to Behavioral Health Care: A Panel Discussion with Industry Experts

November 19, 2024

Online Questions: At any time, submit your questions in the Q&A box at the bottom of your screen. We will take questions at the end of the presentation.

Collaborative Models for Expediting Access to Behavioral Health Care: A Panel Discussion with Industry Experts

November 19, 2024



Shana Palmieri, LCSW
Chief Clinical Officer
XFERALL™

Shana Palmieri is the chief clinical officer and co-founder at XFERALL. In this role, she is responsible for the strategic business operations and clinical innovation. Shana entered the start-up world after more than 17 years of experience in health care and social services, including direct clinical practice and health care administration. Before joining the team to launch XFERALL, Shana was the director of community services at Kalihi Palama Health Center in Honolulu, Hawaii, and worked at The George Washington University Hospital as the director of the Behavioral Health Division, which she developed.



Paul Rains | RN, MSW
System SVP, Behavioral Health
CommonSpirit Health

Paul has worked in the field of mental health and substance abuse treatment since 1989. Paul's experience spans numerous care and treatment settings including residential substance use disorder, acute inpatient, long-term adolescent, correctional, and outpatient. Paul serves on the Centers for Behavioral Health Advisory Board, the Behavioral Health Action Coalition and numerous other workgroups and committees that address a wide variety of mental health issues.



Anantha Panyala, PhD
Executive Director
Sacramento County Mental Health Treatment Center,
Behavioral Health Services

Dr. Panyala is the Executive Director for the Mental Health Treatment Center, Behavioral Health Services, Sacramento County. With over 35 years of experience in the field of mental health, Dr. Panyala started her career teaching psychology and later moved to community mental health, working with children and families. At the Mental Health Treatment Center, Dr. Panyala has served in different capacities for 20 years, many of them in a leadership role working with community and system partners in processing and expediting acute care to individuals in need.



Michelle M. Ho
Division Director
Santa Clara County Behavioral Health Services Department

Michelle M. Ho is a Division Director for Santa Clara County's Behavioral Health Services Department and has been with Santa Clara County for 12 years. Michelle oversees discharge planning and care coordination efforts for behavioral health patients who are either in custody health and/or residing in inpatient psychiatric settings. During her time at Santa Clara, she has implemented various behavioral health programs to reduce the rate of recidivism of high inpatient utilization and wait times in the emergency room settings.

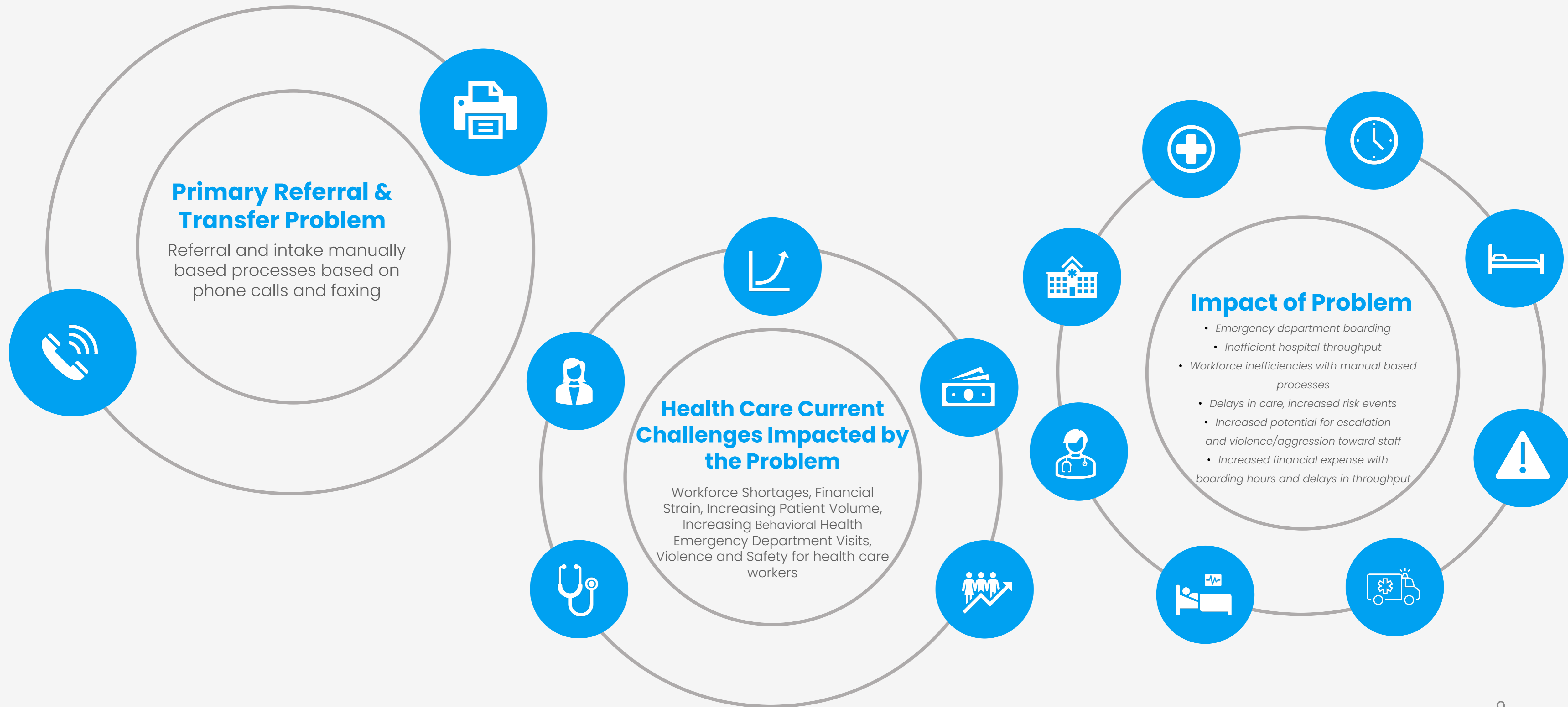
The influx of behavioral health patients has significantly impacted hospitals nationwide, straining resources and reshaping care dynamics. This surge has led to increased psychiatric admissions, **often overwhelming emergency departments that struggle with the complexity and volume of cases**. As a result, patients requiring behavioral health services frequently face extended wait times, remaining in emergency rooms for hours or even days before being transferred to appropriate facilities.

WAIT 3X AS LONG

for clinically appropriate care in hospital emergency departments than patients with other care needs

SPEND 19.9 MILLION HOURS

in hospital emergency departments for a transfer to clinically appropriate care





Before California counties & health systems launched an innovative automated behavioral health transfer digital platform, the average wait time for patients to secure a behavioral health bed was

8+ Hours



Facilities using XFERALL in California find placement for patients in **under 2 hours.**



XFERALL Placement | Faster Placement. Reduced Workload. Better Patient Care.

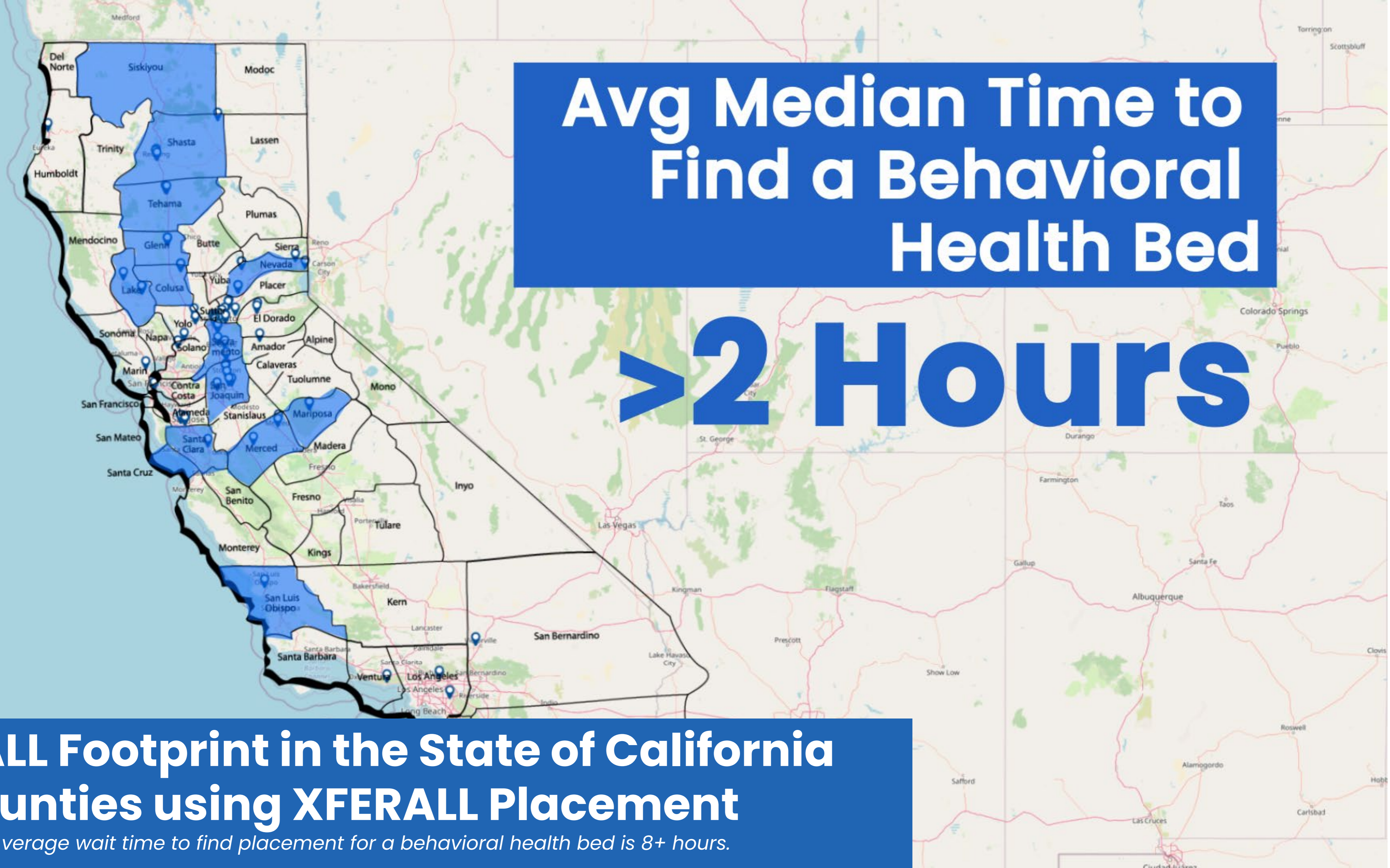
- Patients have been placed out of **87 Referring Locations** via the Digital Patient Transfer Network, including health care facilities, counties, schools, jails, outpatient clinics, and crisis stabilization centers.
- **17 California Counties** joined the Digital Patient Transfer Network to collaborate with Health Systems, expediting patient transfers out of Emergency Departments.
- **XFERALL Intake | Faster Intake. Stronger Relationships. Actionable Data.**
- **78 Behavioral Health facilities**, including inpatient psychiatric units, free-standing psychiatric hospitals, psychiatric health facilities, and crisis stabilization units, have received referrals via the digital patient transfer network throughout California.

**Avg Median Time to
Find a Behavioral
Health Bed**

>2 Hours

**XFERALL Footprint in the State of California
for Counties using XFERALL Placement**

The National Average wait time to find placement for a behavioral health bed is 8+ hours.



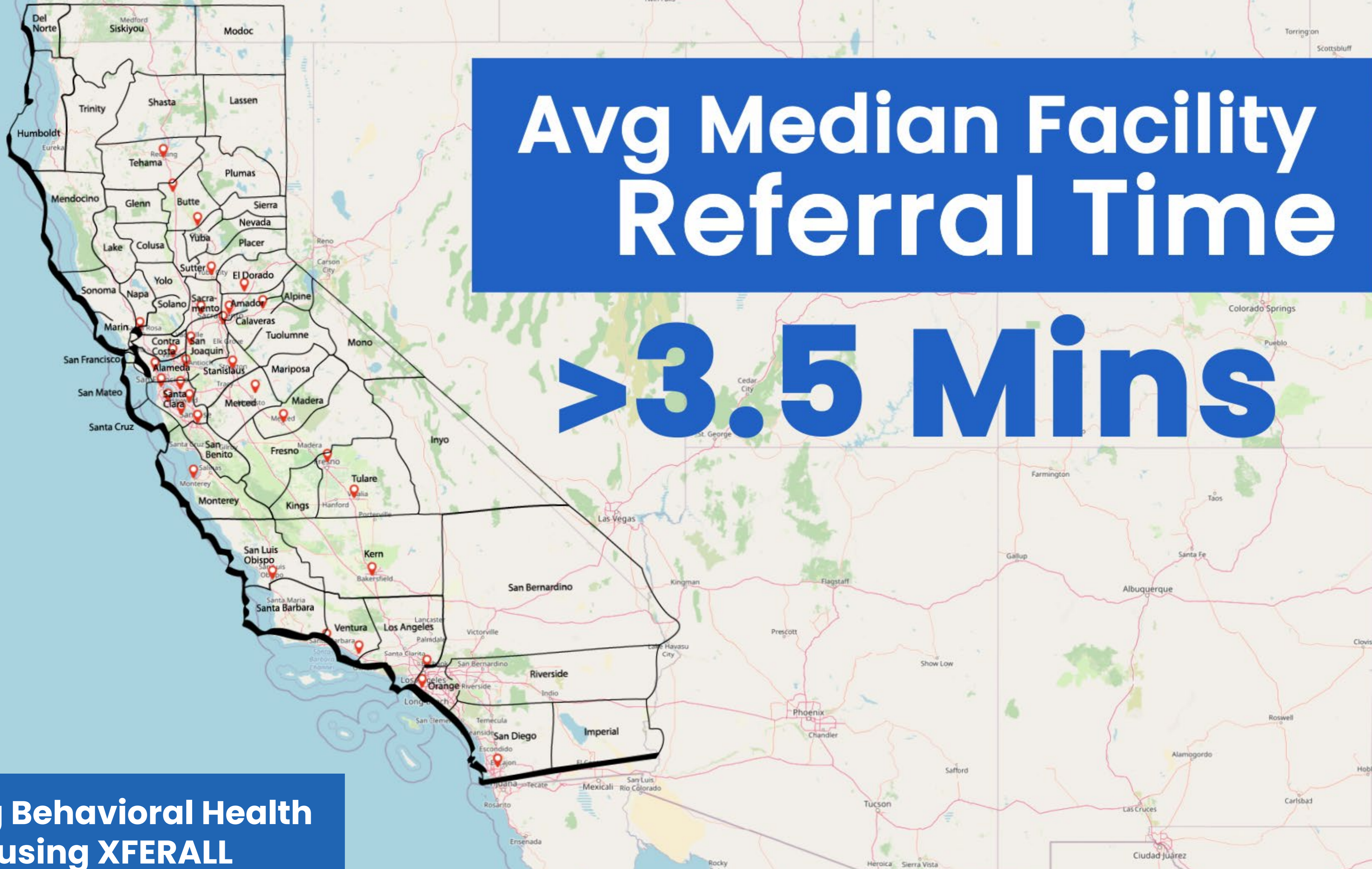
Facilities in CA Taking Advantage of Digital Patient Transfers



Avg Median Facility Referral Time

> 3.5 Mins

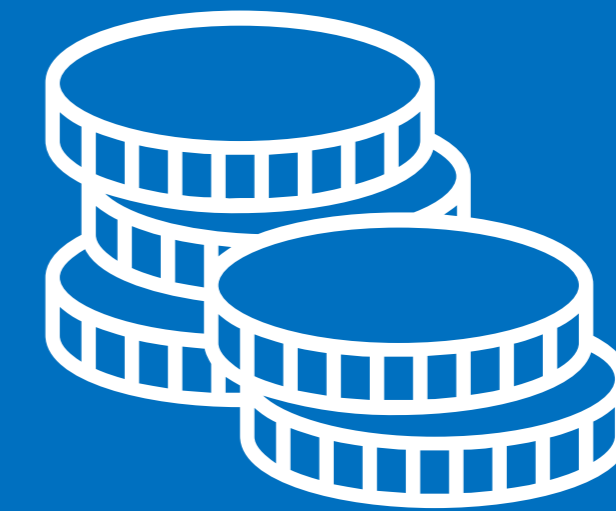
Receiving Behavioral Health Facilities using XFERALL



California's Cost Savings with XFERALL | From March 2023 - October 2024

Across all the facilities currently using XFERALL in the State of California, ***the total cost savings amounts to almost a whopping \$20M in just a little over a year.***

The more XFERALL is implemented across the state, the more cost savings every facility will see, especially facilities with larger footprints.



Total Cost Savings:
\$18,962,270



Paul Rains | RN, MSW
System SVP, Behavioral Health
CommonSpirit Health

In May of 2023, Merced County of California and Dignity Health–St Joseph’s Telehealth Assessment Team team came together and developed a collaborative strategy for Mercy Medical Center Dignity Health.

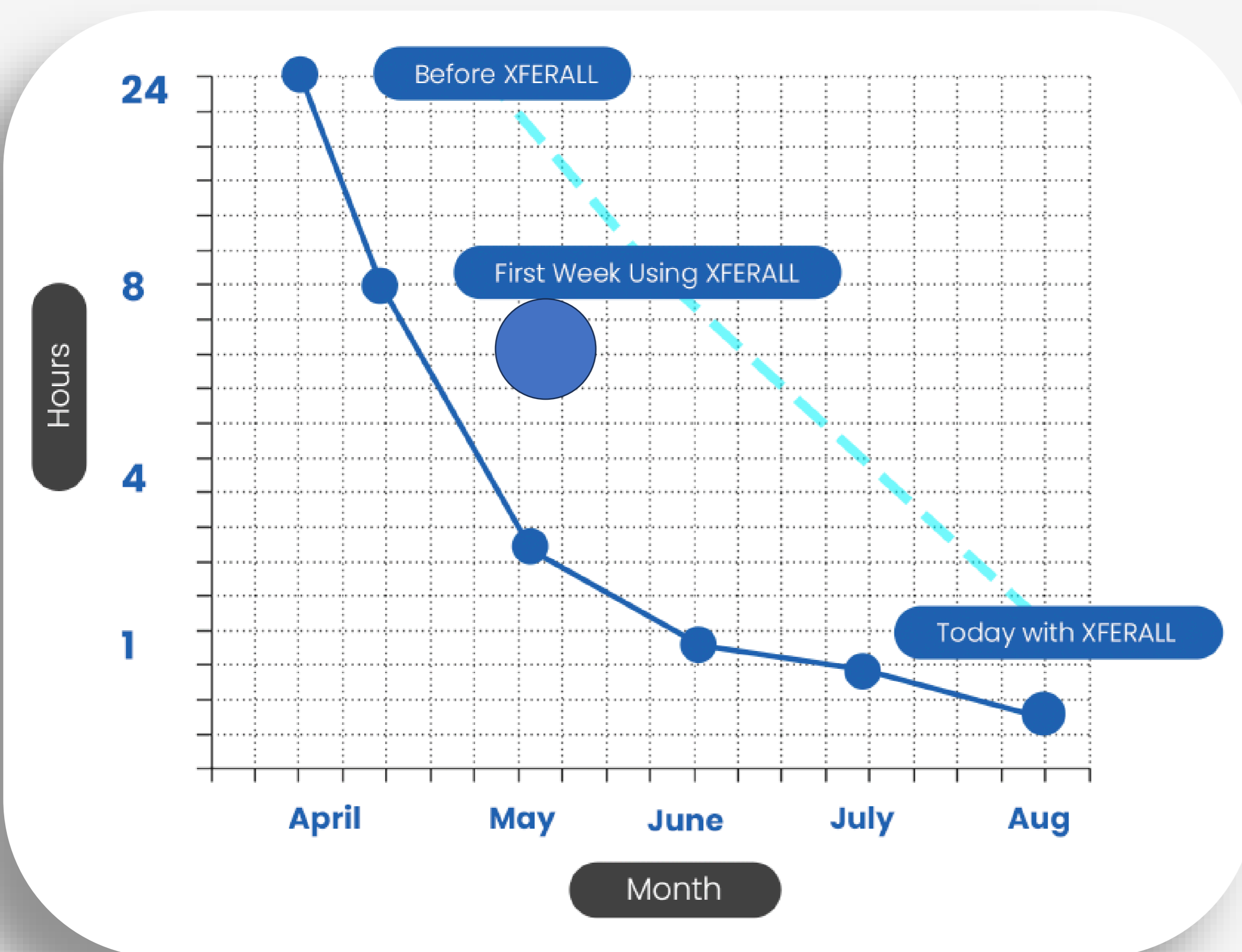
Dignity Health & Merced County Slash Patient Transfer Times by 191%

This allowed them to expedite patient transfers and improve productivity with the use of the XFERALL Digital Patient Transfer Platform.



Merced County went from **24+ hour transfer times** to finding placement in **30 minutes.**

Merced County Median Patient Acceptance Times



From the moment Merced County implemented XFERALL, they saw an immediate decrease in the time it took to locate care for their behavioral and mental health patients.

As you can see depicted on the graph to the left, there was a drastic decrease in time to locate placement from April (before using XFERALL) to August 2023.

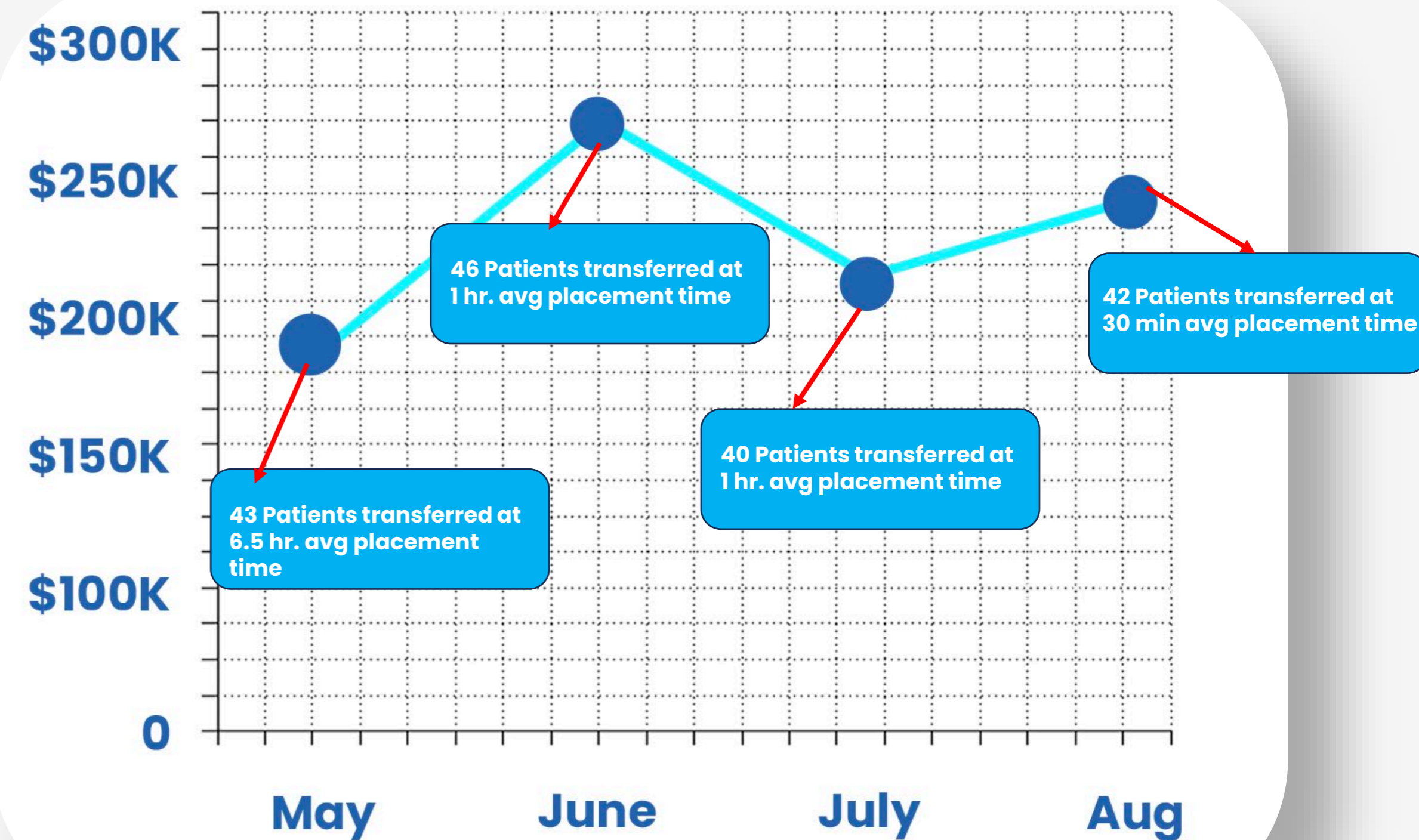
Estimated Cost Savings of Total Cost Savings: \$929,375

XFERALL has a proven track record of providing cost savings to facilities that implement their platform, just as Merced County did. **In May of 2024, Merced County created cost savings of \$188,125 for the hospitals they operate on behalf. In June, \$264,500, in July, \$230,000, and in August, \$246,750.**

This means during this time frame, Merced County achieved a **total cost savings, on behalf of the EDs they provide placements for, of approximately \$929,375.**

These figures are calculated from the average cost per hour (\$250/hr.) to have a patient waiting for the appropriate care in a facility and compared to the 24-hour patient transfer time costs prior to the XFERALL implementation.

Merced County Month By Month Savings





”

The data from XFERALL has been invaluable, enabling us to quickly connect individuals from emergency departments to the right care and demonstrate our response to the community's behavioral health needs.

”

Julianne Sims, LCSW
Assistant Director, Clinical Services,
Merced County Behavioral Health



**Panel
Discussion**



Anantha Panyala, PhD
Executive Director,
Sacramento County
Mental Health
Treatment Center

Project Outcomes

Referral Sources have sent 2,147 digital requests via the platform for behavioral health requests for placement at Sacramento County for inpatient psychiatric treatment since February 2024. **Sacramento County has been able to track in the team-based platform 5,592 referrals.**

Since joining the digital network, **38% of the referrals have been from referral sources, also using the digital network** that can communicate in real-time to expedite transfers and receive responses in minutes! (This number continues to grow as the network in California grows.)

Sacramento County has received referrals on the digital network platform from 22 counties & referral sources at 39 different originating patient locations (Emergency departments, ISUs & CSUs).

Response times have been expedited to referral sources and continue to decrease.

February 2024 Referral Response Time | 3 Minutes 41 Seconds
October 2024 Referral Response Time | 49 Seconds


Project Outcomes

Since December 2023, Santa Clara EPS has completed 2,505 referrals to inpatient psychiatric facilities via the Digital Patient Transfer Network.

Santa Clara EPS coordinates referrals and transfers and has placed patients with 14 regional behavioral health inpatient facilities.

Improving Response & Acceptance for Transfers:

December 2023 Referral Response Time Median from Receiving BH Hospitals |
10 Minutes 22 Seconds

 October 2024 Referral Response Time Median from Receiving BH Hospitals |
14 Seconds

December 2023 Acceptance for Transfer Median Time from Receiving BH Hospitals |
2 hours 52 minutes

 October 2024 Acceptance for Transfer Median Time from Receiving BH Hospitals |
48 Minutes



Michelle Ho, LPT
Division Director
Behavioral Health Services
Santa Clara County
Behavioral Health Services

Meghan Hardin, FACHE, MHCDS, MBA

Regional Vice President

Hospital Council

mhardin@hospitalcouncil.org

Shana Palmieri, LCSW

CCO & Co-Founder

XFERALL

shana.palmieri@xferall.com

Thank You

Thank you for participating in today's webinar.

For education questions, contact: CHA Education at education@calhospital.org