



# INTERVENTIONS

# Mental Health Hospitalizations

## INDICATOR

Rate of children admitted to the hospital for mental health reasons, per 1,000 residents.

Numerator	Number of children admitted to the hospital for			
	mental health reasons (any mental health diagnosis),			
	based on MDC 19 Mental Diseases & Disorders			
Denominator	Children aged 0 to 17, per 1,000			

### DESCRIPTION

This metric is the number of inpatient mental health or psychiatric hospitalizations based on diagnosis for children in private or public hospitals and for all insurance payers. The following principal mental health diagnoses are included: anxiety disorder, attention-deficit disorder, conduct disorder, dementia, cognitive, developmental, impulse control, mood, personality, schizophrenia, and suicide. Hospitalization data are reported by the Wisconsin Department of Health Services (DHS) to the national dataset.

#### IMPORTANCE

The National Institute of Mental Health, state agencies, and local health systems track inpatient mental health, or psychiatric hospitalizations as a measure of response to and treatment for individuals with mental illness. Effective community services are correlated with reductions in psychiatric hospitalizations (Drake, 2008; Hoagwood, 2001).

#### LIMITATIONS

- This metric tracks overall number of discharges from the hospital and provides no information related to the number of times a child may have been admitted.
- Hospitalizations are reported by each state government to be tracked federally. States may have different tracking and reporting requirements. Individual state data is not publically available. National metric includes "Mood Disorders", not all psychiatric diagnoses under CCS primary diagnosis classification and may lead to slight underestimation.

**National Analyses** 

#### ADDITIONAL ANALYSES

#### **Wisconsin Analyses**

For more information regarding psychiatric hospitalizations among the Medicaid child population, see Fact Sheet: <u>Youth</u> Psychiatric Hospitalizations, Readmissions, and Emergency <u>Detentions</u>.

#### SOURCE

Drake, Robert E., et al. (2008). A systematic review of psychosocial research on psychosocial interventions for people with co-occurring severe mental and substance use disorders. Journal of Substance Abuse Treatment, 34(1), 123-138.

Hoagwood, Kimberly, et al. (2001). Evidence-based practice in child and adolescent mental health services." Psychiatric Services, 52(9), 1179-1189. US: HCUP Fast Stats. Healthcare Cost and Utilization Project (HCUP). November 2017. Agency for Healthcare Research and Quality, Rockville, MD. Retrieved from www.hcup-us.ahrq.gov/faststats/national/inpatientcommondiagnoses.jsp.

WI: WI Department of Health Services. (2015 & 2016). Wisconsin Public Health Profiles. Wisconsin. Madison, WI. Retrieved from https://www.dhs.wisconsin.gov/publications/p4/p45358-2016.pdf.

YEAR:		2014		
WI	US		Best	Worst
7.1 <b>*</b> per 1,000	1.6		Not avai	lable
PAST YEAR:		2013		
WI	US			
6.5	1.5			
0.5	1.2			

\* Indicates a statistically significant difference from the US value at p<0.05.