

# PSYCHOLOGICAL HEALTH ANALYTICS

## What We Do

The Psychological Health Center of Excellence leverages its experience in program evaluation and data analytics to provide relevant, timely, and actionable information that supports evidence-based decision-making to improve psychological health care in the Military Health System (MHS).

### Our analytic services include:



#### Clinical surveillance

How often does a condition occur? What kind of care is delivered?



#### Medical intelligence

Where should we intervene? What opportunities exist to improve care?



#### Program evaluation

Is an innovation successful? How much does care cost?



#### Data visualization

How is information best communicated? What information is most important?

We use medical administrative data (i.e., data that's routinely collected as part of care delivery or third-party billing) to support our analytic efforts. The datasets we use contain information about care delivered directly in military treatment facilities as well as civilian-sector care covered by TRICARE and include (among other things):



Patient demographics (e.g., age, sex, military status, etc.)



Care settings (e.g., primary care, specialty mental health, emergency department, etc.)



Diagnoses recorded (International Classification of Diseases (ICD) diagnostic codes)



Prescriptions written and medications dispensed



Medical procedures/activities performed (based on a variety of medical procedural codes)



Provider information (e.g., medical specialty, credentialing level, assigned clinic, etc.)



Cost of care delivered

## How We Work

We work closely with our customers to develop analytic plans that meet stakeholder needs. Initial conversations seek to:

1. Clarify questions and determine how we will go about finding answers
2. Understand what decisions will be made
3. Identify who the end-users of the analyses will be

We then pull and analyze data and deliver results. Requests can take a single day or several weeks to complete depending on the complexity of the analyses, the type of data required, and the volume of server traffic. For recurring requests, the time to complete subsequent analyses will likely be much shorter than the time required for the initial analysis.

Our data is best-suited to answer questions that describe health care, health conditions, or changes over time in our system. Examples include:



How many patients received specialty mental health care at a specific military installation last month?



What are the most common diagnoses for pediatric patients?



How many encounters does the average PTSD patient have in a given year? How much do those encounters cost?



How many active duty service members filled an opioid prescription last year?

While we usually can't answer questions about why things are happening and we can't speak to things happening outside (or not happening within) our health system, our data can point the way to program implementation problems or successes that warrant more attention.

## Need Data?

We can help! We are pleased to support requests from within the DoD, other federal agencies, and non-government organizations or institutions. To get the ball rolling, please contact us at the address below and one of our analysts will be in touch to schedule an initial call.



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## Contact Us

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