Performance Outcomes Adult Specialty Mental Health Services Report Report Date August, 2017

Background

This report measures the effectiveness of adult specialty mental health services. It models reports developed to measure Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) mental health services as mandated by Welfare and Institutions Code Section 14707.5. The intent of these reports is to improve outcomes at the individual, program, and system levels and inform fiscal decision-making related to the purchase of services.

Since 2012 DHCS has worked with several groups of stakeholders to create a structure for reporting, to develop a Performance Measurement Paradigm, and to design indicators and measures. The Performance Outcomes System will be used to evaluate the domains of access, engagement, service appropriateness to need, service effectiveness, linkages, cost effectiveness and satisfaction. Further information on the Performance Measures System implementation is available on the DHCS website. Documents posted include the relevant legislation, plans submitted to the Legislature, and handouts for meetings with the Stakeholder Advisory Committee back to the first meeting in 2012. To obtain this information go to: http://www.dhcs.ca.gov/provgovpart/pos/Pages/default.aspx.

Overview

Three reports will be provided: statewide aggregate data; population-based county groups; and county-specific data. These aggregate reports provide adult information on the initial indicators that were developed for the Performance Outcomes System. DHCS plans to move to annual reporting of these data for the Performance Outcomes System.

The first series of charts and tables focus on the demographics of adults 21* and older who are receiving SMHS based on approved claims for Medi-Cal eligible beneficiaries. Specifically, this includes demographics tables of this population by age, gender, and race/ethnicity. Utilization of services reports are shown in terms of dollars, as well as by service in time increments. Two types of penetration information are provided; both penetration rate tables are also broken out by demographic characteristics. The snapshot table provides a point-in-time view of adults arriving, exiting, and continuing services over a two-year period. The time-to-step-down table provides a view over the past four years of the time to stepdown services following inpatient discharge.

Where possible, the reports provide trend information by displaying information for Fiscal Years (FY) 12/13, 13/14, 14/15, and 15/16.

Definitions

*Population - Beneficiaries with approved services adjudicated through the Short Doyle/Medi-Cal II claiming system that were:
Age 21 or older during the approved date of service on the claim.

Data Sources -

Short-Doyle/Medi-Cal II (SD/MC II) claims with dates of service in FY 12/13 through FY 15/16.
Medi-Cal Eligibility Data System (MEDS) data from the Management Information System/Decision Support System (MIS/DSS) FY 12/13 through 15/16.

Performance Outcomes Adult Specialty Mental Health Services Report Report Date August, 2017

Additional Information

The **Measures Catalog** is the companion document for these reports and provides the methodology and definitions for the measures. Each measure is defined and the numerator and denominator used to develop the metrics are provided with relevant notes and additional references. The Measures Catalog may be found at: http://www.dhcs.ca.gov/services/MH/Documents/MedCCC/Library/POSMeasuresCatalog_Sept15Reporting_Final_1.11.15.pdf

Note on Privacy:

The Health Insurance Portability and Accountability Act (HIPAA) and Code of Federal Regulations (CFR) 42 rules protect most individually identifiable health information in any form or medium; whether electronic, on paper, or oral. DHCS has strict rules in place to protect the identification of individuals in public reports. A "Public Aggregate Reporting – DHCS Business Reports" process has been established to maintain confidentiality of client Personal Information. The Performance Outcomes System complies with Federal and State privacy laws. Thus, the POS must appropriately and accurately de-identify data for public reporting. Due to privacy concerns, some cells in this report may have been suppressed to comply with state and federal rules. When necessary, these data are represented as follows: 1) Data that are missing is indicated as "-" 2) Data that have been suppressed due to privacy concerns is indicated as "^".

Report Highlights

*County-specific findings may be interpreted alongside the POS statewide and population-based report findings.

*The **penetration** rates reported here were calculated using a different methodology than that used by the External Quality Review Organization (EQRO). The differences in methodology makes comparison between the POS penetration rates and the EQRO penetration rates not appropriate nor useful. The POS methodology for calculating penetration rates was selected because it is easier to compute, more straightforward to interpret, and is in use by other states and counties. For the POS, the penetration rate is calculated by taking the total number of adults who received a number of SMHS (1 or 5 for POS) in a FY and dividing that by the total number of Medi-Cal eligible adults for that FY. This methodology results in lower penetration rates as compared to the EQRO rates, but it does so across the board so that all counties and the state will be similarly impacted.

*The **snapshot** report provides a point-in-time look at adults' movement through the SMHS system. The report uses five general categories to classify if an adult is entering, exiting, continuing services, or a combination of these categories (e.g., arriving and exiting). As of now, this report only classifies adults and their service usage for FY 12/13 through FY15/16. Eventually the snapshot data will be used along with measures of service effectiveness to identify whether adults are improving as a result of receiving services from the time they first arrived in the system to when they exit the system. This methodology was adapted from the California Mental Health and Substance Use System Needs Assessment (2012). More information on the original methodology can be found here: http://www.dhcs.ca.gov/provgovpart/pos/Pages/Performance-Outcomes-System-Reports-and-Measures-Catalog.aspx

*The psychiatric emergency services/hospital data measured in the **time to step-down services** report relies solely on claims data from Short Doyle/Medi-Cal II. Currently, the number of days is capped at 365 days (to mitigate the impact of extreme statistical anomalies) when calculating the mean and max for time between discharge and step down service. This methodology will be updated in the next reporting cycle. Additionally, county specific and population-based reports are based on the county of the hospital from which the patient is discharged and receives step-down services.

Please contact cmhpos@dhcs.ca.gov for any questions regarding this report.

Demographics Report: Unique Count of Adults Receiving SMHS by Fiscal Year

SFY	Unique Count Receiving SMHS*	Year-Over-Year Percentage Change	Unique Count of Medi-Cal Eligibles	Year-Over-Year Percentage Change
FY 12-13	13,644		205,171	
FY 13-14	16,381	20.1%	297,848	45.2%
FY 14-15	19,268	17.6%	365,106	22.6%
FY 15-16	19,073	-1.0%	396,182	8.5%
Compound Annual Growth Rate SFY**		11.8%		24.5%

Small Sized Counties as of August, 2017

*SMHS = Specialty Mental Health Services. See Measures Catalog for more detailed information.

**SFY = State Fiscal Year which is July 1 through June 30.

Demographics Report: Unique Count of Adults Receiving SMHS by Fiscal Year

Small Sized Counties as of August, 2017

Fiscal Year	Alaskan Native or American Indian Count	Alaskan Native or American Indian %	Asian or Pacific Islander Count	Asian or Pacific Islander %	Black Count	Black %	Hispanic Count	Hispanic %	White Count	White %	Other Count	Other %	Unknown Count	Unknown %
FY 12-13	213	1.6%	430	3.2%	377	2.8%	2,705	19.8%	8,252	60.5%	117	0.9%	1,550	11.4%
FY 13-14	261	1.6%	455	2.8%	503	3.1%	3,375	20.6%	9,706	59.3%	168	1.0%	1,913	11.7%
FY 14-15	325	1.7%	502	2.6%	578	3.0%	4,263	22.1%	11,245	58.4%	197	1.0%	2,158	11.2%
FY 15-16	318	1.7%	480	2.5%	549	2.9%	4,568	24.0%	10,821	56.7%	152	0.8%	2,185	11.5%

Please note: This report uses the Medi-Cal Eligibility Data System to obtain race/ethnicity data. CDSS uses Child Welfare Services/Case Management System to obtain race/ethnicity data. For more information, please refer to the Measures Catalog.

Demographics Report: Unique Count of Adults Receiving SMHS by Fiscal Year

Small Sized Counties as of August, 2017

Fiscal Year	Adults 21-44 Count	Adults 21-44 %	Adults 45-64 Count	Adults 45-64 %	Adults 65+ Count	Adults 65+ %
FY 12-13	6,735	49.4%	5,966	43.7%	943	6.9%
FY 13-14	8,391	51.2%	6,966	42.5%	1,024	6.3%
FY 14-15	10,224	53.1%	7,883	40.9%	1,161	6.0%
FY 15-16	10,287	53.9%	7,656	40.1%	1,130	5.9%

Demographics Report: Unique Count of Adults Receiving SMHS by Fiscal Year Small Sized Counties as of August, 2017

Fiscal Year	Female Count	Female %	Male Count	Male %
FY 12-13	8,252	60.5%	5,392	39.5%
FY 13-14	9,530	58.2%	6,851	41.8%
FY 14-15	10,806	56.1%	8,462	43.9%
FY 15-16	10,572	55.4%	8,501	44.6%

Penetration Rates* Report: Adults With At Least One SMHS Visit** Small Sized Counties as of August, 2017

		FY 12-13			FY 13-14			FY 14-15			FY 15-16	
	Adults and	Certified		Adults and	Certified		Adults and	Certified		Adults and	Certified	
	Older Adults	Eligible	Penetration	Older Adults	Eligible Adults	Penetration	Older Adults	Eligible	Penetration	Older Adults	Eligible Adults	Penetration
	with 1 or	Adults and	Rate	with 1 or	and Older	Rate	with 1 or more	Adults and	Rate	with 1 or more	and Older	Rate
	more SMHS	Older Adults		more SMHS	Adults		SMHS Visits	Older Adults		SMHS Visits	Adults	
All	13,644	205,171	6.7%	16,381	297,848	5.5%	19,268	365,106	5.3%	19,073	396,182	4.8%
Adults 21-44	6,735	101,043	6.7%	8,391	150,508	5.6%	10,224	192,202	5.3%	10,287	212,565	4.8%
Adults 45-64	5,966	60,107	9.9%	6,966	101,543	6.9%	7,883	123,732	6.4%	7,656	131,763	5.8%
Adults 65+	943	44,021	2.1%	1,024	45,797	2.2%	1,161	49,172	2.4%	1,130	51,854	2.2%
Alaskan Native or American Indian	213	4,662	4.6%	261	6,511	4.0%	325	7,664	4.2%	318	8,321	3.8%
Asian or Pacific Islander	430	7,602	5.7%	455	11,954	3.8%	502	15,064	3.3%	480	17,061	2.8%
Black	377	4,488	8.4%	503	6,398	7.9%	578	7,601	7.6%	549	8,047	6.8%
Hispanic	2,705	66,102	4.1%	3,375	92,722	3.6%	4,263	116,981	3.6%	4,568	129,524	3.5%
White	8,252	105,157	7.8%	9,706	155,132	6.3%	11,245	186,139	6.0%	10,821	198,425	5.5%
Other	117	1,651	7.1%	168	2,743	6.1%	197	3,475	5.7%	152	3,263	4.7%
Unknown	1,550	15,509	10.0%	1,913	22,388	8.5%	2,158	28,182	7.7%	2,185	31,541	6.9%
Female	8,252	124,599	6.6%	9,530	168,166	5.7%	10,806	200,163	5.4%	10,572	215,249	4.9%
Male	5,392	80,572	6.7%	6,851	129,682	5.3%	8,462	164,943	5.1%	8,501	180,933	4.7%

*Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in Medi-Cal Managed Care system. **Adults and Older Adults at least one SMHS that was claimed through the Short-Doyle/ Medi-Cal claiming system on at least one (1) day in the Fiscal Year.

Penetration Rates* Report: Adults with Five or More SMHS Visits** Small Sized Counties as of August, 2017

		FY 12-13			FY 13-14			FY 14-15			FY 15-16	
	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate
All	8,504	205,171	4.1%	9,663	297,848	3.2%	10,836	365,106	3.0%	10,810	396,182	2.7%
Adults 21-44	3,907	101,043	3.9%	4,614	150,508	3.1%	5,350	192,202	2.8%	5,422	212,565	2.6%
Adults 45-64	4,004	60,107	6.7%	4,435	101,543	4.4%	4,840	123,732	3.9%	4,779	131,763	3.6%
Adults 65+	593	44,021	1.3%	614	45,797	1.3%	646	49,172	1.3%	609	51,854	1.2%
Alaskan Native or American Indian	125	4,662	2.7%	141	6,511	2.2%	160	7,664	2.1%	161	8,321	1.9%
Asian or Pacific Islander	236	7,602	3.1%	248	11,954	2.1%	261	15,064	1.7%	270	17,061	1.6%
Black	242	4,488	5.4%	303	6,398	4.7%	328	7,601	4.3%	293	8,047	3.6%
Hispanic	1,626	66,102	2.5%	1,973	92,722	2.1%	2,439	116,981	2.1%	2,625	129,524	2.0%
White	5,192	105,157	4.9%	5,675	155,132	3.7%	6,183	186,139	3.3%	6,067	198,425	3.1%
Other	64	1,651	3.9%	99	2,743	3.6%	97	3,475	2.8%	75	3,263	2.3%
Unknown	1,019	15,509	6.6%	1,224	22,388	5.5%	1,368	28,182	4.9%	1,319	31,541	4.2%
Female	5,077	124,599	4.1%	5,648	168,166	3.4%	6,212	200,163	3.1%	6,081	215,249	2.8%
Male	3,427	80,572	4.3%	4,015	129,682	3.1%	4,624	164,943	2.8%	4,729	180,933	2.6%

*Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in Medi-Cal Managed Care system. **Adults and Older Adultsthat have received at least five SMHS that were claimed through the Short-Doyle/ Medi-Cal claiming system on at least five (5) or more different days in the Fiscal Year.

Utilization Report*: Approved Specialty Mental Health Services for Adults Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Fiscal Year*

Small Sized Counties as of August, 2017

Fiscal Year	SDM	ЛС Total Approved	Case Management/ Brokerage (Minutes)	Mental Health Services (Minutes)	Medication Support Services (Minutes)	Crisis Intervention (Minutes)	Crisis Stabilization (Hours)	Full Day Treatment Intensive (Hours)	Full Day Rehabilitation (Hours)	Hospital Inpatient (Days)	Hospital Inpatient Admin (Days)	Fee for Service Inpatient (Days)	Crisis Residential Treatment Services (Days)	Adult Residential Treatment Services (Days)	Psychiatric Health Facility (Days)
FY 12-13	\$	3,891.36	643	675	351	242	22	0	375	9	13	12	19	97	13
FY 13-14	\$	3,870.18	573	633	325	236	21	0	195	8	20	10	20	77	12
FY 14-15	\$	4,015.92	530	622	306	258	21	0	584	6	63	10	21	75	11
FY 15-16	\$	4,241.86	529	616	311	256	22	0	393	6	28	11	21	85	10
MEAN	\$	4,004.83	569	637	323	248	21	0	387	7	31	11	20	84	11

*The graphs are color coded so that those reported in the same unit of analysis (e.g., minutes) are colored similarly.

Please note that (n) values listed at the bottom of each bar graph represent the actual number of children/youth that received the SMHS represented in their respective graph by Fiscal Year.

^ Data has been suppressed to protect patient privacy.

Snapshot Report: Unique Count of Adults Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year Small Sized Counties as of August, 2017

Category	Description (Please refer to the Measures Catalog for more detailed descriptions on all Performance Outcomes System measures.)
Arrivals	Adults that did not receive any SMHS within 3 months of their first date of service in the Fiscal Year.
Service Continuance	Adults receiving continuous services with no breaks in service greater than 90 days for a period of at least 2 years (>= 2 YR) or a period of 1 to 2 years (< 2 YR).
Exiting	Adults that did not receive any SMHS within 3 months after their last date of service in the Fiscal Year.
Arriving & Exiting	A distinct category in which Adults met both the criteria for Arrivals and Exiting above for the fiscal year.
Service Continuance &	
Exiting	A distinct category in which Adults had at least 2 years of Service Continuance going into the Fiscal Year and then Exited within the same Fiscal Year.

Service Fiscal Year	Arrivals Count	Arrivals %	Service Continuance (>= 2 YR) Count	Continuance	Service Continuance (<2 YR) Count		Exiting Count	Exiting %	Arriving & Exiting Count	Arriving & Exiting %	Service Continuance (>= 2 YR) & Exiting Count	Service Continuance (>= 2 YR) and Exiting %	Total Count	Total %
FY 12-13	2,340	17.2%	2,091	15.3%	1,673	12.3%	2,050	15.0%	5,208	38.2%	282	2.1%	13,644	100%
FY 13-14	3,577	21.8%	2,131	13.0%	1,624	9.9%	2,096	12.8%	6,657	40.6%	296	1.8%	16,381	100%
FY 14-15	3,308	17.2%	2,041	10.6%	2,128	11.0%	2,807	14.6%	8,622	44.7%	362	1.9%	19,268	100%
FY 15-16	3,082	16.2%	2,095	11.0%	1,950	10.2%	3,048	16.0%	8,545	44.8%	353	1.9%	19,073	100%

Time to Step Down Report: Adults Stepping Down in SMHS Services Post Inpatient Discharge*

Small Sized Counties as of August, 2017

Service FY	Count of Inpatient Discharges with Step Down within 7 Days of Discharge	Inpatient Discharges with	Step Down	Inpatient Discharges with	Step Down > 30	Inpatient Discharges with a	Discharges with	Percentage of Inpatient Discharges with No Step Down*	Minimum Number of Days between Discharge and Step Down	Maximum Number of Days between Discharge and Step Down	Mean Time to Next Contact Post Inpatient Discharge (Days)	Median Time to Next Contact Post Inpatient Discharge (Days)
FY 12-13	627	53.0%	276	23.3%	217	18.3%	63	5.3%	0	340	21.5	5
FY 13-14	575	48.5%	271	22.9%	291	24.6%	48	4.1%	0	356	26.9	7
FY 14-15	560	68.9%	69	8.5%	100	12.3%	84	10.3%	0	346	20.1	0
FY 15-16	485	71.3%	55	8.1%	65	9.6%	75	11.0%	0	333	15.8	0

* No Step Down is defined as no Medi-Cal eligible service was claimed through Short-Doyle/Medi-Cal after a claimed inpatient service was billed with a discharge date. This category may include data currently unavailable to DHCS, such as beneficiaries that were moved to a community-based program or beneficiaries that were incarcerated.