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.

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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

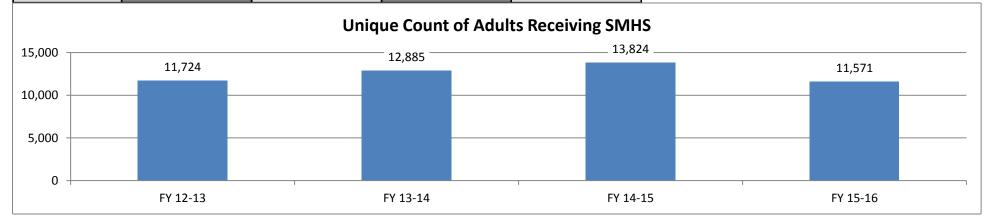
*The psychiatric emergency services/hospital data measured in the **time to step-down services** report relies solely on claims data from Short Doyle/Medi-Cal II. Currently, the number of days is capped at 365 days (to mitigate the impact of extreme statistical anomalies) when calculating the mean and 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	11,724		141,790	
FY 13-14	12,885	9.9%	227,355	60.3%
FY 14-15	13,824	7.3%	274,303	20.6%
FY 15-16	11,571	-16.3%	292,968	6.8%
Compound Annual Growth Rate SFY**		-0.4%		27.4%

Alameda County as of August, 2017

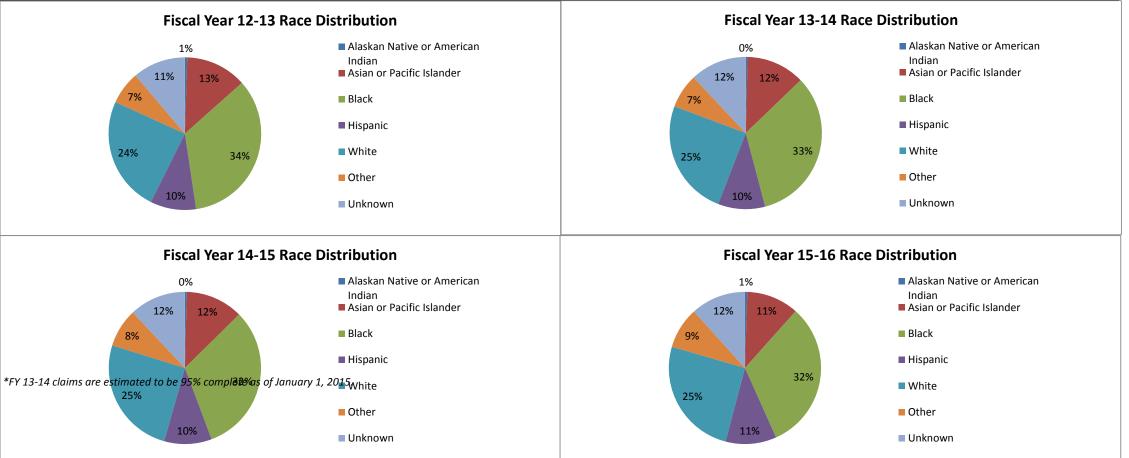


*SMHS = Specialty Mental Health Services. See Measures Catalog for more detailed information.

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

Demographics Report: Unique Count of Adults Receiving SMHS by Fiscal Year Alameda County 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	63	0.5%	1,515	12.9%	4,005	34.2%	1,134	9.7%	2,866	24.4%	823	7.0%	1,318	11.2%
FY 13-14	56	0.4%	1,596	12.4%	4,259	33.1%	1,283	10.0%	3,195	24.8%	944	7.3%	1,552	12.0%
FY 14-15	61	0.4%	1,684	12.2%	4,386	31.7%	1,391	10.1%	3,511	25.4%	1,137	8.2%	1,654	12.0%
FY 15-16	57	0.5%	1,279	11.1%	3,673	31.7%	1,254	10.8%	2,937	25.4%	1,014	8.8%	1,357	11.7%

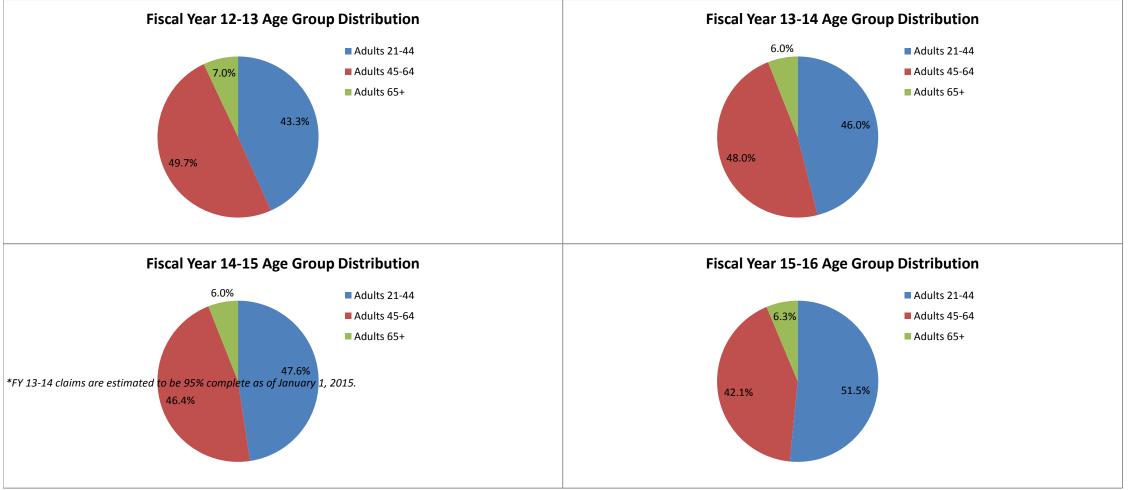


Please note: This report uses the Medi-Cal Eligibility Data System to obtain race/ethnicity data. CDSS uses Child Welfare Services/Case Management System to obtain race/ethnicity data. For more information, please refer to the Measures Catalog.

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

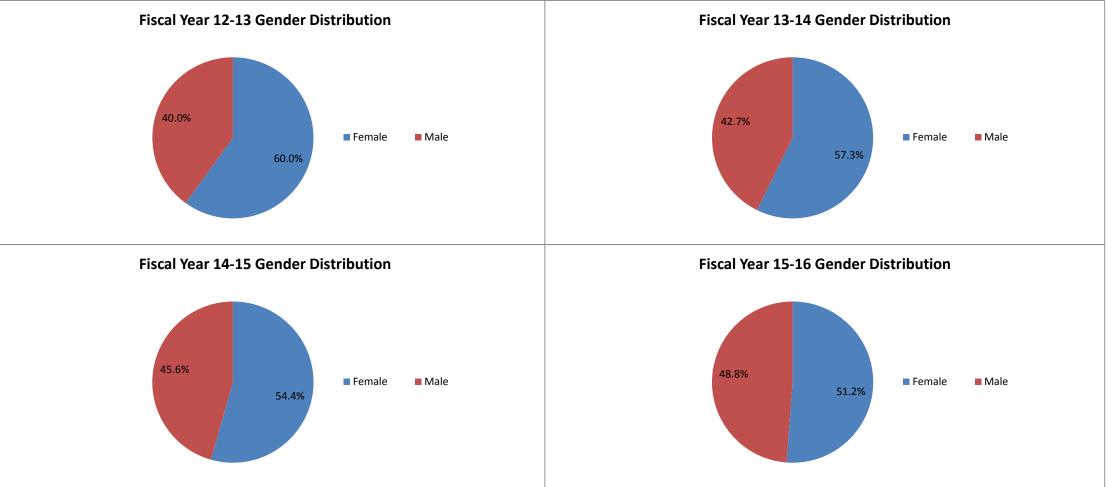
Alameda County as of August, 2017

Fiscal Year	Adults 21-44 Count	Adults 21-44 %	Adults 45-64 Count	Adults 45-64 %	Adults 65+ Count	Adults 65+ %
FY 12-13	5,075	43.3%	5,824	49.7%	825	7.0%
FY 13-14	5,929	46.0%	6,187	48.0%	769	6.0%
FY 14-15	6,585	47.6%	6,414	46.4%	825	6.0%
FY 15-16	5,964	51.5%	4,875	42.1%	732	6.3%



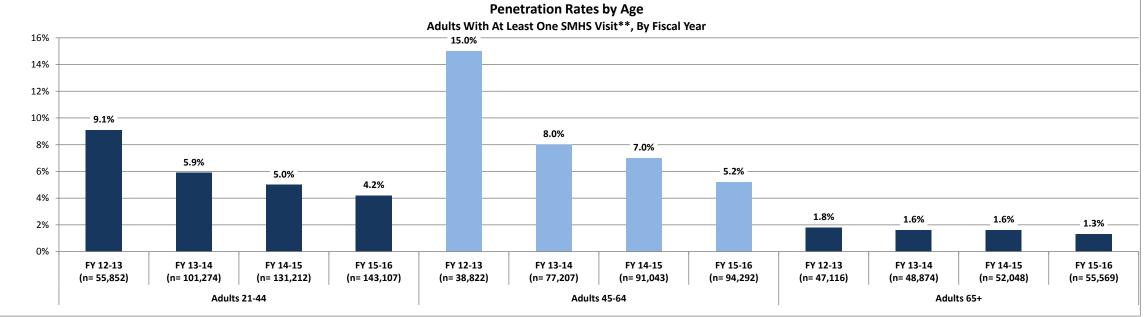
Demographics Report: Unique Count of Adults Receiving SMHS by Fiscal Year Alameda County as of August, 2017

Fiscal Year	Female Count	Female %	Male Count	Male %
FY 12-13	7,035	60.0%	4,689	40.0%
FY 13-14	7,388	57.3%	5,497	42.7%
FY 14-15	7,527	54.4%	6,297	45.6%
FY 15-16	5,922	51.2%	5,649	48.8%



Penetration Rates* Report: Adults With At Least One SMHS Visit** Alameda County 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	11,724	141,790	8.3%	12,885	227,355	5.7%	13,824	274,303	5.0%	11,571	292,968	3.9%
Adults 21-44	5,075	55,852	9.1%	5,929	101,274	5.9%	6,585	131,212	5.0%	5,964	143,107	4.2%
Adults 45-64	5,824	38,822	15.0%	6,187	77,207	8.0%	6,414	91,043	7.0%	4,875	94,292	5.2%
Adults 65+	825	47,116	1.8%	769	48,874	1.6%	825	52,048	1.6%	732	55,569	1.3%
Alaskan Native or American Indian	63	526	12.0%	56	857	6.5%	61	985	6.2%	57	1,038	5.5%
Asian or Pacific Islander	1,515	40,806	3.7%	1,596	66,618	2.4%	1,684	81,768	2.1%	1,279	89,403	1.4%
Black	4,005	36,335	11.0%	4,259	52,666	8.1%	4,386	58,455	7.5%	3,673	60,375	6.1%
Hispanic	1,134	20,883	5.4%	1,283	31,283	4.1%	1,391	38,400	3.6%	1,254	41,040	3.1%
White	2,866	21,259	13.5%	3,195	38,734	8.2%	3,511	48,027	7.3%	2,937	50,835	5.8%
Other	823	11,001	7.5%	944	21,357	4.4%	1,137	28,044	4.1%	1,014	31,962	3.2%
Unknown	1,318	10,980	12.0%	1,552	15,840	9.8%	1,654	18,624	8.9%	1,357	18,315	7.4%
Female	7,035	88,791	7.9%	7,388	130,272	5.7%	7,527	153,337	4.9%	5,922	162,630	3.6%
Male	4,689	52,999	8.8%	5,497	97,083	5.7%	6,297	120,966	5.2%	5,649	130,338	4.3%

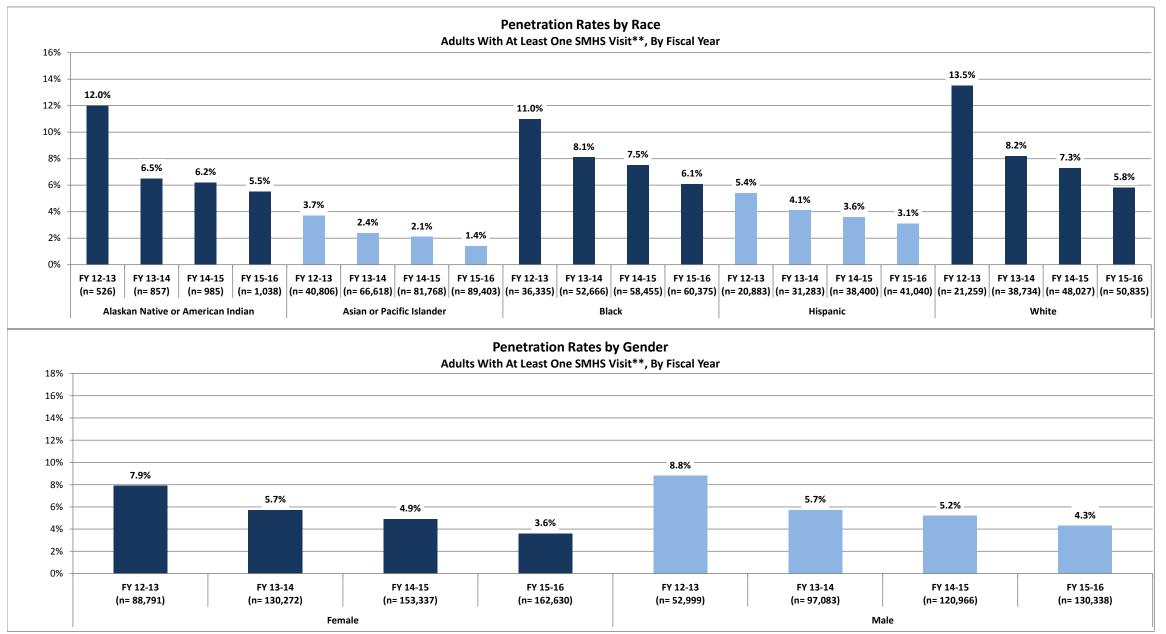


*Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in Medi-Cal Managed Care system. **Adults and Older Adults at least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

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Penetration Rates* Report: Adults With At Least One SMHS Visit**

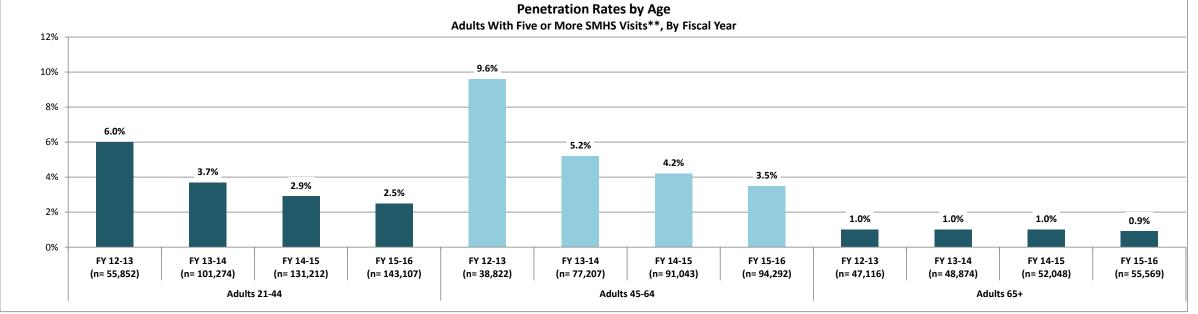
Alameda County as of August, 2017



*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** Alameda County as of August, 2017

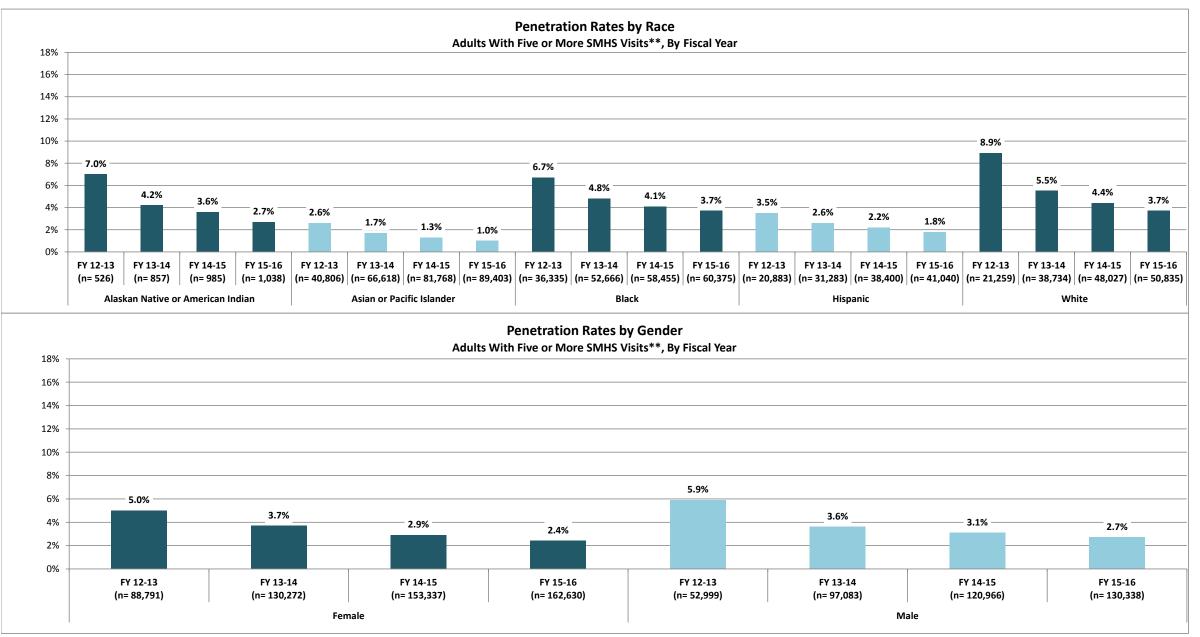
		FY 12-13			FY 13-14			FY 14-15			FY 15-16	
	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate	Adults and Older Adults with 5 or more 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	7,566	141,790	5.3%	8,276	227,355	3.6%	8,145	274,303	3.0%	7,402	292,968	2.5%
Adults 21-44	3,365	55,852	6.0%	3,769	101,274	3.7%	3,777	131,212	2.9%	3,555	143,107	2.5%
Adults 45-64	3,743	38,822	9.6%	4,031	77,207	5.2%	3,848	91,043	4.2%	3,325	94,292	3.5%
Adults 65+	458	47,116	1.0%	476	48,874	1.0%	520	52,048	1.0%	522	55,569	0.9%
Alaskan Native or American Indian	37	526	7.0%	36	857	4.2%	35	985	3.6%	28	1,038	2.7%
Asian or Pacific Islander	1,054	40,806	2.6%	1,122	66,618	1.7%	1,085	81,768	1.3%	909	89,403	1.0%
Black	2,426	36,335	6.7%	2,531	52,666	4.8%	2,378	58,455	4.1%	2,223	60,375	3.7%
Hispanic	730	20,883	3.5%	820	31,283	2.6%	827	38,400	2.2%	757	41,040	1.8%
White	1,901	21,259	8.9%	2,118	38,734	5.5%	2,090	48,027	4.4%	1,898	50,835	3.7%
Other	524	11,001	4.8%	590	21,357	2.8%	659	28,044	2.3%	590	31,962	1.8%
Unknown	894	10,980	8.1%	1,059	15,840	6.7%	1,071	18,624	5.8%	997	18,315	5.4%
Female	4,434	88,791	5.0%	4,764	130,272	3.7%	4,453	153,337	2.9%	3,826	162,630	2.4%
Male	3,132	52,999	5.9%	3,512	97,083	3.6%	3,692	120,966	3.1%	3,576	130,338	2.7%



*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 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.

Penetration Rates* Report: Adults with Five or More SMHS Visits**

Alameda County as of August, 2017



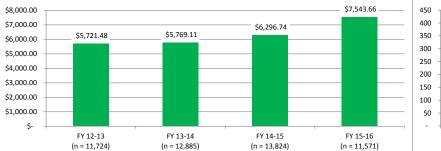
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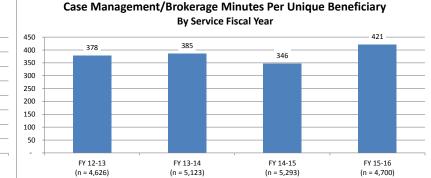
Utilization Report*: Approved Specialty Mental Health Services for Adults Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Fiscal Year*

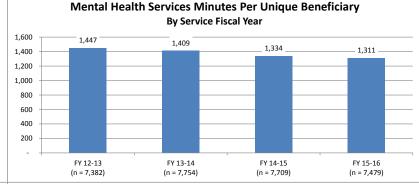
Alameda County as of August, 2017

Fiscal Year	SDN	MC 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	\$	5,721.48	378	1,447	242	195	37	0	198	11	8	8	13	83	7
FY 13-14	\$	5,769.11	385	1,409	238	174	31	36	178	11	8	11	13	93	12
FY 14-15	\$	6,296.74	346	1,334	249	186	36	0	185	8	10	11	14	107	13
FY 15-16	\$	7,543.66	421	1,311	358	187	37	0	188	8	10	9	15	81	17
MEAN	\$	6,332.75	383	1,375	272	186	35	36	187	10	9	10	14	91	12

Total Approved Per Unique Beneficiary By Service Fiscal Year







Crisis Stabilization Hours Per Unique Beneficiary

By Service Fiscal Year

31.0

FY 13-14

(n = 3,662)

35.9

FY 14-15

(n = 4,755)

36.9

FY 15-16

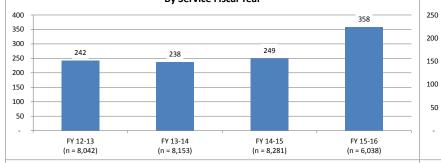
(n = 4,759)

8

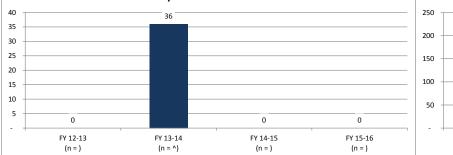
FY 15-16

(n = 1,248)

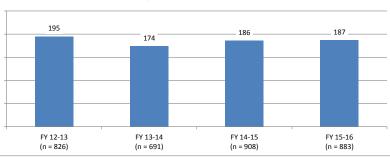
Medication Support Services Minutes Per Unique Beneficiary By Service Fiscal Year



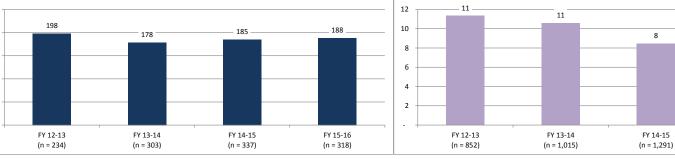
Full Day Treatment Intensive Hours Per Unique Beneficiary By Service Fiscal Year



Crisis Intervention Minutes Per Unique Beneficiary By Service Fiscal Year







40

35

30

25

20

15

10

5

36.9

FY 12-13

(n = 2,702)

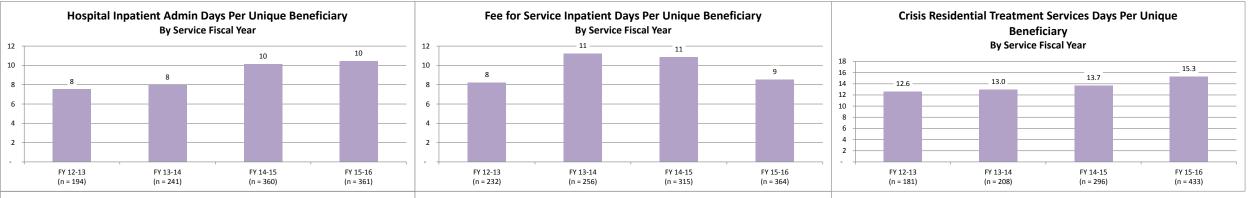
Hospital Inpatient Days Per Unique Beneficiary By Service Fiscal Year

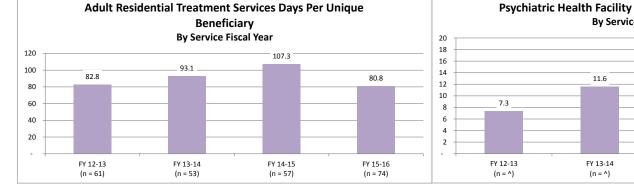
*The graphs are color coded so that those reported in the same unit of analysis (e.g., minutes) are colored similarly.

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.

Utilization Report*: Approved Specialty Mental Health Services for Adults Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Fiscal Year* Alameda County as of August, 2017





Psychiatric Health Facility Days Per Unique Beneficiary By Service Fiscal Year

FY 14-15

(n = 34)

FY 15-16 (n = 21)

17.3 12.8

*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.

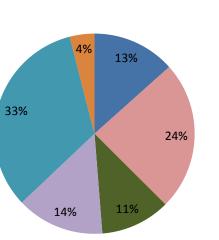
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Snapshot Report: Unique Count of Adults Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year Alameda County as of August, 2017

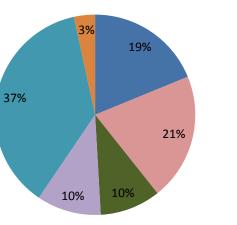
Category	Description (Please refer to the Measures Catalog for more detailed descriptions on all Performance Outcomes System measures.)
Arrivals	Adults that did not receive any SMHS within 3 months of their first date of service in the Fiscal Year.
Service Continuance	Adults receiving continuous services 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		Service Continuance (<2 YR) Count		Exiting Count	Exiting %	Arriving & Exiting Count	Arriving & Exiting %		Service Continuance (>= 2 YR) and Exiting %	Total Count	Total %
FY 12-13	1,569	13.4%	2,823	24.1%	1,319	11.3%	1,668	14.2%	3,879	33.1%	466	4.0%	11,724	100%
FY 13-14	2,425	18.8%	2,638	20.5%	1,258	9.8%	1,346	10.4%	4,781	37.1%	437	3.4%	12,885	100%
FY 14-15	1,788	12.9%	2,157	15.6%	1,239	9.0%	2,253	16.3%	5,727	41.4%	660	4.8%	13,824	100%
FY 15-16	1,579	13.6%	1,997	17.3%	1,105	9.5%	1,535	13.3%	4,829	41.7%	526	4.5%	11,571	100%

Fiscal Year 12-13 Arrivals, Service Continuance, & Exits Distribution



Fiscal Year 13-14 Arrivals, Service Continuance, & Exits Distribution





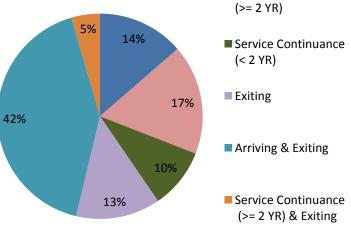
13%

16%

16%

9%



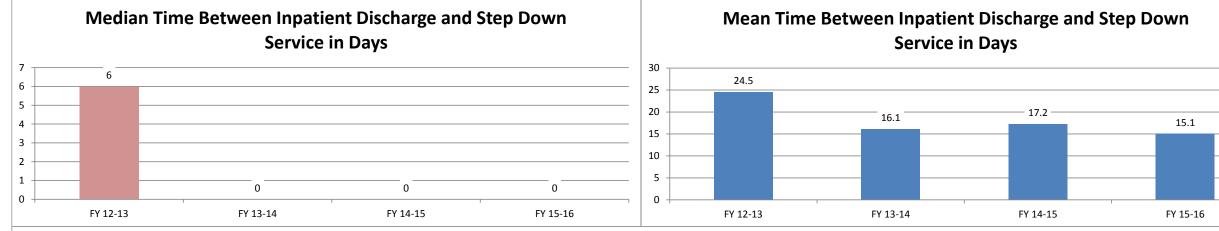


41%

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

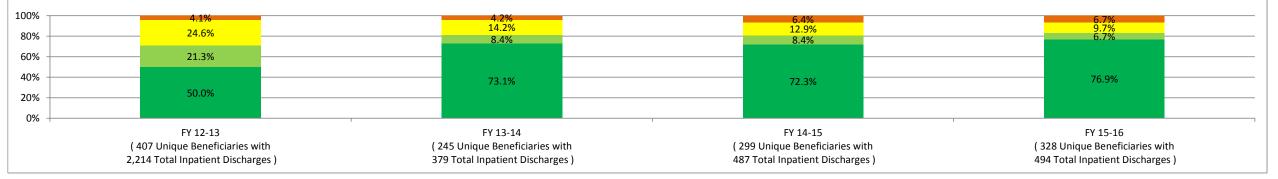
Alameda County as of August, 2017

Service FY	Count of Inpatient Discharges with Step Down within 7 Days of Discharge	Inpatient Discharges with Step Down within	Step Down Between 8 and 30	Inpatient Discharges with Step Down	Step Down > 30 Days from	Inpatient Discharges with a	Discharges with		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	1,107	50.0%	471	21.3%	545	24.6%	91	4.1%	0	322	24.5	6
FY 13-14	277	73.1%	32	8.4%	54	14.2%	16	4.2%	0	288	16.1	0
FY 14-15	352	72.3%	41	8.4%	63	12.9%	31	6.4%	0	358	17.2	0
FY 15-16	380	76.9%	33	6.7%	48	9.7%	33	6.7%	0	358	15.1	0





■ Within 7 Days ■ Within 8 - 30 Days ■ 31 Days + ■ No Step Down



* **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.