

# Performance Outcomes System Initial Reports

Report run on March 13, 2018

## Background

Three reports will be created during each new reporting period. The reports that will be produced are as follows: statewide aggregate data; population-based county groups; and county-specific data. These reports help meet the intent of the Legislature, as stated in Welfare and Institutions Code Section 14707.5, to develop a performance outcomes system for Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) mental health services that will improve outcomes at the individual, program, and system levels and inform fiscal decision-making related to the purchase of services. This reporting effort is part of the implementation of a performance outcomes system for Medi-Cal Specialty Mental Health Services (SMHS) for children and youth.

Since 2012 DHCS has worked with several groups of stakeholders to create a structure for reporting, to develop the Performance Measurement Paradigm, and to develop 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.asp>

## Purpose and Overview

These county-specific reports provide updated information on the initial indicators that were developed for the Performance Outcomes System and reported on at the statewide aggregate level in February 2015; they help establish a foundation for on-going reporting. DHCS plans to move to annual reporting of this data for the Performance Outcomes System.

The first series of charts and tables focus on the demographics of children and youth under 21 who are receiving SMH' based on approved claims for Medi-Cal eligible beneficiaries. Specifically, this includes demographics tables of this population by age, gender, and race/ethnicity. Two types of penetration information are provided. Both penetration rates tables are also broken out by demographic characteristics. Utilization of services data are shown in terms of dollars, as well as by service, in time increments. The snapshot table provides a point-in-time view of children/youth 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 step-down services following inpatient discharge.

Where possible, the reports provide trend information by displaying information for four Fiscal Years (FY). A FY is from July 1st to June 30th.

Utilization of services reports are shown in terms of dollars, as well as by service in time increments. The snapshot report provides a point-in-time view of children arriving, exiting, and continuing services over a two-year period. The final report provides a view over the past four years of the time to step-down services (i.e., time to next contact after an inpatient discharge). **Note:** *The time to step-down report has a change in methodology from the first report produced in February 2015. In the initial report only outpatient services provided at least one day after the inpatient discharge were included in the calculations. On subsequent reports, any outpatient service that occurs on or after the inpatient discharge is included in the analysis.*

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## Definitions

**Population** - Beneficiaries with approved services adjudicated through the Short Doyle/Medi-Cal II claiming system that were:

- Age 20 or younger 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 13/14 through FY 16/17.

- Medi-Cal Eligibility Data System (MEDS) data from the Management Information System/Decision Support System (MIS/DSS) FY 13/14 through FY16/17.

## 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://dhcs.ca.gov/provgovpart/pos/Pages/Performance-Outcomes-System-Reports-and-Measures-Catalog.aspx>

**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, 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, this data is represented as follows: 1) Data that is missing is indicated as "-" 2) Data that has been suppressed due to privacy concerns is indicated as "^".

## Report Interpretation

\*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 make comparison between the POS penetration rates and the EQRO penetration rates not appropriate or 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 youth who received X number of SMHS (1 or 5 for POS) in a FY and dividing that by the total number of Medi-Cal eligible youth 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.

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\*The **snapshot** report provides a point-in-time look at children and youth's movement through the SMHS system. The report uses five general categories to classify if a youth is entering, exiting, continuing services, or a combination of these categories (e.g., arriving and exiting). Eventually the snapshot data will be used along with measures of service effectiveness to identify whether youth 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 reported on in the **time to step-down services** report includes data from Short Doyle/Medi-Cal II claims data and fee-for-service data. In the future this report will incorporate other outpatient and inpatient Medi-Cal SMHS' billed through the Managed Care healthcare delivery systems. 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 off of the county of fiscal responsibility for the patient and whom has been attributed the time to next service in days used in the calculations for this indicator.

**Please contact [cmhpos@dhcs.ca.gov](mailto:cmhpos@dhcs.ca.gov) for any questions regarding this report.**

**Demographics Report: Unique Count of Children and Youth Receiving SMHS by Fiscal Year  
Alameda County as of March 13, 2018**

SFY	Unique Count Receiving SMHS*	Year-Over-Year Percentage Change	Unique Count of Medi-Cal Eligibles	Year-Over-Year Percentage Change
<b>FY 13-14</b>	11,079		166,220	
<b>FY 14-15</b>	10,774	-2.8%	172,523	3.8%
<b>FY 15-16</b>	10,523	-2.3%	179,484	4.0%
<b>FY 16-17</b>	10,232	-2.8%	180,927	0.8%
<b>Compound Annual Growth Rate SFY**</b>		<b>-2.6%</b>		<b>2.9%</b>

*\*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 Children and Youth Receiving SMHS by Fiscal Year  
Alameda County as of March 13, 2018**

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 %
<b>FY 13-14</b>	48	0.4%	713	6.4%	3,600	32.5%	3,827	34.5%	1,166	10.5%	682	6.2%	1,043	9.4%
<b>FY 14-15</b>	46	0.4%	712	6.6%	3,455	32.1%	3,814	35.4%	1,078	10.0%	614	5.7%	1,055	9.8%
<b>FY 15-16</b>	56	0.5%	698	6.6%	3,262	31.0%	3,890	37.0%	1,084	10.3%	587	5.6%	946	9.0%
<b>FY 16-17</b>	49	0.5%	609	6.0%	3,043	29.7%	4,089	40.0%	1,040	10.2%	564	5.5%	838	8.2%

*\*This report uses the Medi-Cal Eligibility Data System for racial data, while CDSS uses the Child Welfare Services/Case Management System.*

**Demographics Report: Unique Count of Children and Youth Receiving SMHS by Fiscal Year  
Alameda County as of March 13, 2018**

<b>Fiscal Year</b>	<b>Children 0-2 Count</b>	<b>Children 0-2 %</b>	<b>Children 3-5 Count</b>	<b>Children 3-5 %</b>	<b>Children 6-11 Count</b>	<b>Children 6-11 %</b>	<b>Children 12-17 Count</b>	<b>Children 12-17 %</b>	<b>Youth 18-20 Count</b>	<b>Youth 18-20 %</b>
<b>FY 13-14</b>	364	3.3%	1,006	9.1%	3,767	34.0%	4,478	40.4%	1,464	13.2%
<b>FY 14-15</b>	376	3.5%	948	8.8%	3,685	34.2%	4,328	40.2%	1,437	13.3%
<b>FY 15-16</b>	331	3.1%	889	8.4%	3,606	34.3%	4,242	40.3%	1,455	13.8%
<b>FY 16-17</b>	314	3.1%	750	7.3%	3,584	35.0%	4,145	40.5%	1,439	14.1%

**Demographics Report: Unique Count of Children and Youth Receiving SMHS by Fiscal Year  
Alameda County as of March 13, 2018**

<b>Fiscal Year</b>	<b>Female Count</b>	<b>Female %</b>	<b>Male Count</b>	<b>Male %</b>
<b>FY 13-14</b>	4,974	44.9%	6,105	55.1%
<b>FY 14-15</b>	4,804	44.6%	5,970	55.4%
<b>FY 15-16</b>	4,783	45.5%	5,740	54.5%
<b>FY 16-17</b>	4,691	45.8%	5,541	54.2%

**Penetration Rates\* Report: Children and Youth with At Least One SMHS Visit\*\*  
Alameda County as of March 13, 2018**

	FY 13-14			FY 14-15			FY 15-16			FY 16-17		
	Children and Youth with 1 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 1 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 1 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 1 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate
<b>All</b>	<b>11,079</b>	<b>166,220</b>	<b>6.7%</b>	<b>10,774</b>	<b>172,523</b>	<b>6.2%</b>	<b>10,523</b>	<b>179,484</b>	<b>5.9%</b>	<b>10,232</b>	<b>180,927</b>	<b>5.7%</b>
Children 0-2	364	26,422	1.4%	376	26,908	1.4%	331	26,729	1.2%	314	26,192	1.2%
Children 3-5	1,006	26,396	3.8%	948	26,302	3.6%	889	26,511	3.4%	750	26,637	2.8%
Children 6-11	3,767	50,501	7.5%	3,685	52,675	7.0%	3,606	54,637	6.6%	3,584	54,564	6.6%
Children 12-17	4,478	43,360	10.3%	4,328	45,521	9.5%	4,242	49,186	8.6%	4,145	50,251	8.2%
Youth 18-20	1,464	19,541	7.5%	1,437	21,117	6.8%	1,455	22,421	6.5%	1,439	23,283	6.2%
Alaskan Native or American Indian	48	413	11.6%	46	413	11.1%	56	425	13.2%	49	393	12.5%
Asian or Pacific Islander	713	30,023	2.4%	712	31,513	2.3%	698	32,159	2.2%	609	31,762	1.9%
Black	3,600	33,005	10.9%	3,455	32,720	10.6%	3,262	31,903	10.2%	3,043	31,102	9.8%
Hispanic	3,827	65,191	5.9%	3,814	67,549	5.6%	3,890	71,470	5.4%	4,089	73,112	5.6%
White	1,166	13,237	8.8%	1,078	13,872	7.8%	1,084	13,930	7.8%	1,040	13,352	7.8%
Other	682	14,224	4.8%	614	15,313	4.0%	587	16,329	3.6%	564	18,009	3.1%
Unknown	1,043	10,127	10.3%	1,055	11,143	9.5%	946	13,268	7.1%	838	13,197	6.3%
Female	4,974	81,570	6.1%	4,804	84,621	5.7%	4,783	87,974	5.4%	4,691	88,523	5.3%
Male	6,105	84,650	7.2%	5,970	87,902	6.8%	5,740	91,510	6.3%	5,541	92,404	6.0%

\*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.

\*\*Children and Youth that have received 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: Children and Youth with Five or More SMHS Visits\*\*  
Alameda County as of March 13, 2018**

	FY 13-14			FY 14-15			FY 15-16			FY 16-17		
	Children and Youth with 5 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 5 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 5 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 5 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate
<b>All</b>	<b>9,247</b>	<b>166,220</b>	<b>5.6%</b>	<b>8,972</b>	<b>172,523</b>	<b>5.2%</b>	<b>8,580</b>	<b>179,484</b>	<b>4.8%</b>	<b>8,546</b>	<b>180,927</b>	<b>4.7%</b>
Children 0-2	263	26,422	1.0%	250	26,908	0.9%	205	26,729	0.8%	192	26,192	0.7%
Children 3-5	829	26,396	3.1%	759	26,302	2.9%	704	26,511	2.7%	639	26,637	2.4%
Children 6-11	3,290	50,501	6.5%	3,251	52,675	6.2%	3,131	54,637	5.7%	3,222	54,564	5.9%
Children 12-17	3,745	43,360	8.6%	3,632	45,521	8.0%	3,459	49,186	7.0%	3,414	50,251	6.8%
Youth 18-20	1,120	19,541	5.7%	1,080	21,117	5.1%	1,081	22,421	4.8%	1,079	23,283	4.6%
Alaskan Native or American Indian	40	413	9.7%	40	413	9.7%	47	425	11.1%	39	393	9.9%
Asian or Pacific Islander	573	30,023	1.9%	560	31,513	1.8%	555	32,159	1.7%	499	31,762	1.6%
Black	3,035	33,005	9.2%	2,912	32,720	8.9%	2,656	31,903	8.3%	2,563	31,102	8.2%
Hispanic	3,189	65,191	4.9%	3,164	67,549	4.7%	3,218	71,470	4.5%	3,441	73,112	4.7%
White	961	13,237	7.3%	892	13,872	6.4%	864	13,930	6.2%	844	13,352	6.3%
Other	548	14,224	3.9%	496	15,313	3.2%	438	16,329	2.7%	462	18,009	2.6%
Unknown	901	10,127	8.9%	908	11,143	8.1%	802	13,268	6.0%	698	13,197	5.3%
Female	4,134	81,570	5.1%	3,946	84,621	4.7%	3,897	87,974	4.4%	3,852	88,523	4.4%
Male	5,113	84,650	6.0%	5,026	87,902	5.7%	4,683	91,510	5.1%	4,694	92,404	5.1%

\*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.

\*\*Children and Youth that 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 Children and Youth  
Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Fiscal Year  
Alameda County as of March 13, 2018**

Fiscal Year	SDMC Total Approved	IHBS (Minutes)	ICC (Minutes)	Case Management/ Brokerage (Minutes)	Mental Health Services (Minutes)	Therapeutic Behavioral 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)
<b>FY 13-14</b>	\$ 9,038	2,183	2,115	380	2,729	5,353	368	273	12	513	475	10	4	8	19	100	10
<b>FY 14-15</b>	\$ 9,309	2,251	1,506	397	2,876	5,673	365	289	15	461	316	8	8	7	20	95	10
<b>FY 15-16</b>	\$ 9,576	2,194	1,416	395	2,947	5,319	373	270	17	366	490	8	11	9	19	86	11
<b>FY 16-17</b>	\$ 10,905	1,968	1,931	356	3,041	4,784	385	286	14	676	268	6	13	7	17	79	12
<b>MEAN</b>	<b>\$ 9,707</b>	<b>2,149</b>	<b>1,742</b>	<b>382</b>	<b>2,898</b>	<b>5,282</b>	<b>373</b>	<b>280</b>	<b>15</b>	<b>504</b>	<b>387</b>	<b>8</b>	<b>9</b>	<b>8</b>	<b>19</b>	<b>90</b>	<b>11</b>

*\*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.*

**Snapshot Report: Unique Count of Children and Youth Receiving SMHS  
Arriving, Exiting, and with Service Continuance by Fiscal Year  
Alameda County as of March 13, 2018**

<b>Category</b>	<b>Description (Please refer to the Measures Catalog for more detailed descriptions on all Performance Outcomes System measures.)</b>
<b>Arrivals</b>	Children/Youth that did not receive any SMHS within 3 months of their first date of service in the Fiscal Year.
<b>Service Continuance</b>	Children/Youth 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
<b>Exiting</b>	Children/Youth that did not receive any SMHS within 3 months after their last date of service in the Fiscal Year.
<b>Arriving &amp; Exiting</b>	A distinct category in which children/youth met both the criteria for <b>Arrivals</b> and <b>Exiting</b> above for the fiscal year.
<b>Service Continuance</b>	A distinct category in which Children/Youth had at least 2 years of Service Continuance going into the Fiscal Year and then Exited within the same Fiscal

<b>Service Fiscal Year</b>	<b>Arrivals Count</b>	<b>Arrivals %</b>	<b>Service Continuance (&gt;= 2 YR) Count</b>	<b>Service Continuance (&gt;= 2 YR) %</b>	<b>Service Continuance (&lt;2 YR) Count</b>	<b>Service Continuance (&lt; 2 YR) %</b>	<b>Exiting Count</b>	<b>Exiting %</b>	<b>Arriving &amp; Exiting Count</b>	<b>Arriving &amp; Exiting %</b>	<b>Service Continuance (&gt;= 2 YR) &amp; Exiting Count</b>	<b>Service Continuance (&gt;= 2 YR) and Exiting %</b>	<b>Total Count</b>	<b>Total %</b>
<b>FY 13-14</b>	2,370	21.4%	1,320	11.9%	1,108	10.0%	1,869	16.9%	3,817	34.5%	595	5.4%	11,079	100%
<b>FY 14-15</b>	2,392	22.2%	1,340	12.4%	1,022	9.5%	1,837	17.1%	3,656	33.9%	527	4.9%	10,774	100%
<b>FY 15-16</b>	2,178	20.7%	1,237	11.8%	978	9.3%	1,798	17.1%	3,658	34.8%	674	6.4%	10,523	100%
<b>FY 16-17</b>	2,138	20.9%	1,049	10.3%	805	7.9%	1,715	16.8%	3,775	36.9%	750	7.3%	10,232	100%

**Time to Step Down Report: Children and Youth Stepping Down in SMHS Services Post Inpatient Discharge\***  
**Alameda County as of March 13, 2018**

Service FY	Count of Inpatient Discharges with Step Down within 7 Days of Discharge	Percentage of Inpatient Discharges with Step Down within 7 Days of Discharge	Count of Inpatient Discharges with Step Down Between 8 and 30 Days	Percentage of Inpatient Discharges with Step Down Between 8 and 30 Days	Count of Inpatient Discharges with a Step Down > 30 Days from Discharge	Percentage of Inpatient Discharges with a Step Down > 30 Days from Discharge	Count of Inpatient Discharges with No Step Down*	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 13-14	267	88.7%	^	^	14	4.7%	^	^	0	142	4.5	0
FY 14-15	236	83.1%	23	8.1%	^	^	^	^	0	329	11.3	0
FY 15-16	204	85.7%	^	^	13	5.5%	^	^	0	339	7.1	0
FY 16-17	289	87.6%	15	4.5%	13	3.9%	13	3.9%	0	249	5.6	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  
 ^ Data has been suppressed to protect patient privacy.