Performance Outcomes System Initial Reports

Report run on July 29, 2015

Background

This is the first round of county-specific reporting produced for the Performance Outcomes System which reflects a refresh of the data on the indicators that were reported in February 2015 at the statewide aggregate level. 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 Medical 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, develop the Performance Measurement Paradigm, and 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.

Purpose and Overview

Moving forward, three reports will be created during each new reporting period. The reports that will be produced are the following: statewide aggregate data; population-based county groups; and county-specific data. These are the first county-specific reports providing 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.

Where possible, the reports provide trend information by displaying information for Fiscal Years (FY) 10/11, 11/12, 12/13, and 13/14.

The first reports focus on the demographic characteristics of the children and youth under 21 who are receiving Specialty Mental Health Services (SMHS), based on approved claims for Medi-Cal eligible beneficiaries. The reports include data on the demographics of this population by age, gender, race/ethnicity. Two types of penetration information is provided for children/youth served and not served. Both penetration rate tables are also broken out by demographic characteristics.

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. Starting with this report, any outpatient service that occurs on or after the inpatient discharge is included in the analysis.

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; or
- Age 21 during the approved date of the service on the claim and a birth date on or after January 1st of the Fiscal Year.

Data Sources -

- Short-Doyle/Medi-Cal II (SD/MC II) claims with dates of service in FY 10/11 through FY 13/14.
- Medi-Cal Eligibility Data System (MEDS) data from the Management Information System/Decision Support System (MIS/DSS) FY 10/11 through FY 13/14.

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Report run on July 29, 2015

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/individuals/Documents/POS%20Measures%20Catalog 2.17.15.pdo

The Measures Catalog is posted on the POS site under the heading "POS Reports and Measures Catalog."

Background 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/individuals/Pages/POSReports.aspx

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 Specialty Mental Health Services (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.

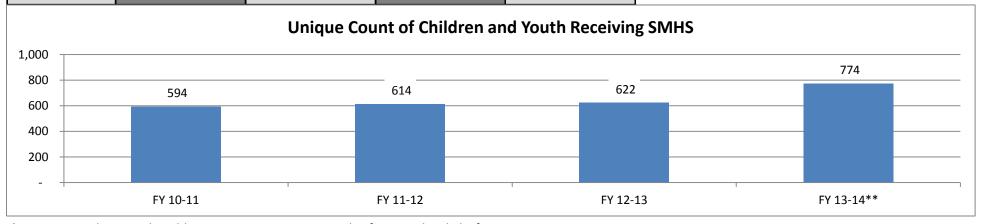
*The *snapshot* report provides a point-in-time look at children and youth's movement through the SMHS system. The report uses five general categories to classify if a youth is entering, exiting, continuing services, or a combination of these categories (e.g., arriving and exiting). This methodology 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/Documents/1115 Waiver Behavioral Health Services Needs Assessment 3 1 12.pdf.

*The psychiatric emergency services/hospital data reported on in the *time to step-down services* report relies solely on claims data from Short Doyle/Medi-Cal II. In the future this report will incorporate other outpatient and inpatient Medi-Cal SMHS' billed through the Managed Care healthcare delivery systems.

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

Demographics Report: Unique Count of Children and Youth 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 10-11	594		6,627	
FY 11-12	614	3.4%	6,719	1.4%
FY 12-13	622	1.3%	7,366	9.6%
FY 13-14**	774	24.4%	9,997	35.7%
Compound Annual Growth Rate SFY**		9.2%		14.7%



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

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

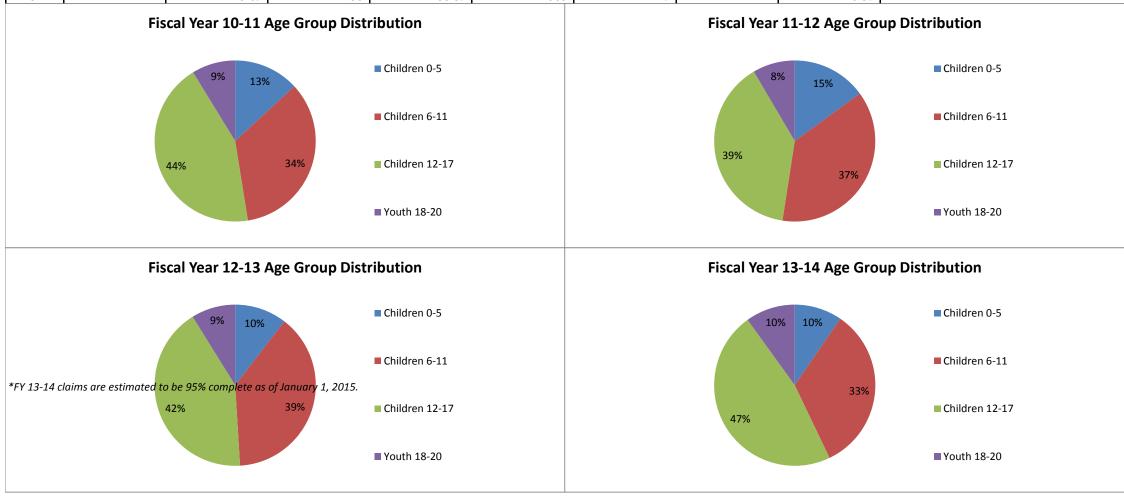
Demographics Report: Unique Count of Children and Youth Receiving SMHS by Fiscal Year

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 10-11	۸	۸	۸	۸	۸	٨	49	8.2%	512	86.2%	-	0.0%	17	2.9%
FY 11-12	۸	^	-	0.0%		٨	53	8.6%	528	86.0%	۸	۸	18	2.9%
FY 12-13 FY 13-14	۸	^	۸	٨	٨	٨	56 64	9.0% 8.3%		85.5% 81.4%	-	0.0%	19 57	3.1% 7.4%
		Fiscal Y	/ear 10-11 F	■ Ala	ution askan Native or /	American			Fis 3%	cal Year 11	-12 Race Di	12 W A	ive or American	
		8	3%	Asi	ian or Pacific Isla	inder				9%		Asian or Pac	ific Islander	
				CH	ART	SN	OT	PRC	DU	CED)	Black Hispanic White		
		86%	F		known	SIN	DIC	ATC	R D	UE	TO	OtherUnknown		
		Fiscal Y	⁄ear 12-13 F	Race Distrib	SMA	ALL	CEL	L SIZ	ZESFis	cal Year 13	-14 Race Di	stributionu	tion	
		0% 3%	9%	line	iskan Native or / lian ian or Pacific Isla				7%	8%		Alaskan Nati IndianAsian or Pac	ive or American ific Islander	
				Bla								Black Hispanic		
*FY 13-14 c	laims are estima	ted to be 95% c	omplete as of Ja	nuary 1, 2015.								White		
		86%		Ot	her				81%			Other Unknown		
				- On	INTOWIT							= OHKHOWH		

[^] Data has been suppressed to protect patient privacy.

Demographics Report: Unique Count of Children and Youth Receiving SMHS by Fiscal Year

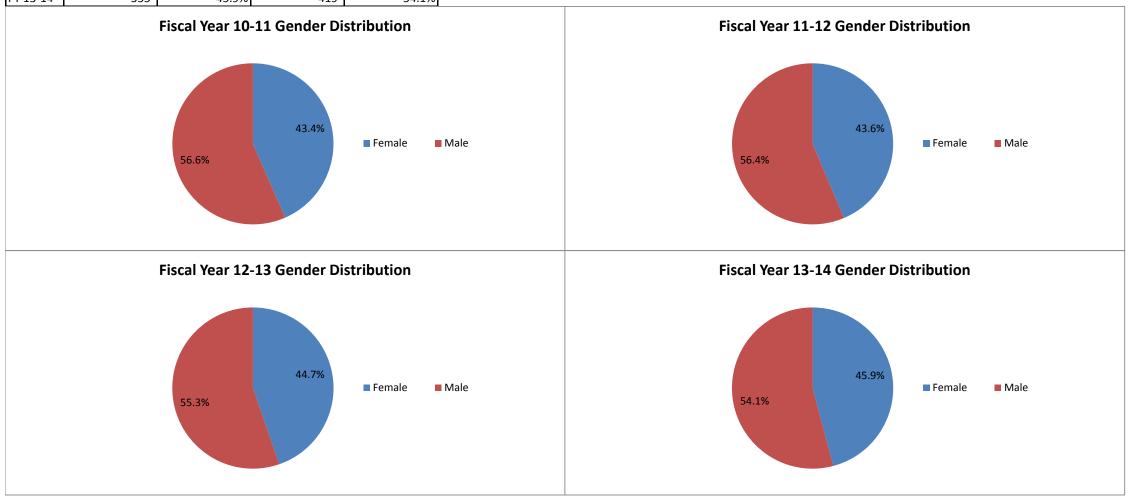
Fiscal Year	Children 0-5 Count	Children 0-5 %	Children 6-11 Count	Children 6-11 %	Children 12-17 Count	Children 12-17 %	Youth 18-20 Count	Youth 18-20 %
FY 10-11	78	13.1%	204	34.3%	260	43.8%	52	8.8%
FY 11-12	92	15.0%	230	37.5%	240	39.1%	52	8.5%
FY 12-13	65	10.5%	240	38.6%	262	42.1%	55	8.8%
FY 13-14	74	9.6%	258	33.3%	365	47.2%	77	9.9%



[^] Data has been suppressed to protect patient privacy.

Demographics Report: Unique Count of Children and Youth by Fiscal Year

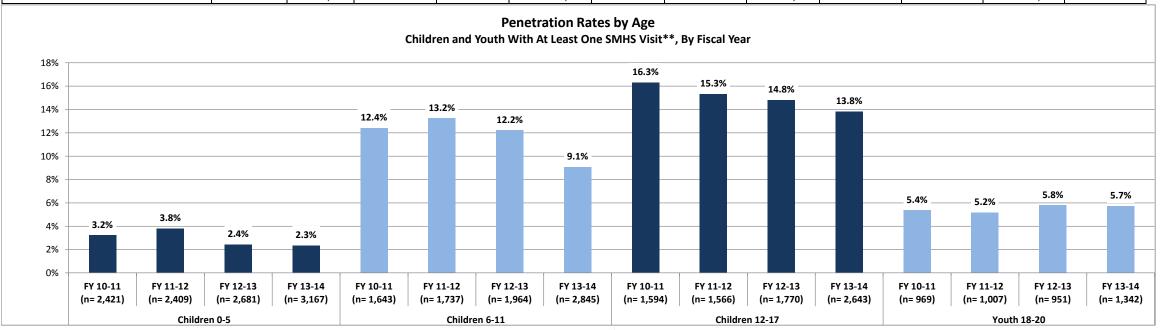
Fiscal Year	Female Count	Female %	Male Count	Male %
FY 10-11	258	43.4%	336	56.6%
FY 11-12	268	43.6%	346	56.4%
FY 12-13	278	44.7%	344	55.3%
FY 13-14	355	45.9%	419	54.1%



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Penetration Rates* Report: Children and Youth With At Least One SMHS Visit**

		FY 10-11			FY 11-12			FY 12-13			FY 13-14	
	Children and Youth with 1	Certified Eligible	Penetration	Children and Youth with 1	Certified Eligible	Penetration	Children and Youth with 1 or	Certified Eligible	Penetration	Children and Youth with 1 or	Certified Eligible	Penetration
	or more SMHS		Rate	or more	Children and	Rate	more SMHS	Children and	Rate	more SMHS	Children and	Rate
	Visits	Youth		SMHS Visits	Youth		Visits	Youth		Visits	Youth	
All	594	6,627	9.0%	614	6,719	9.1%	622	7,366	8.4%	774	9,997	7.7%
Children 0-5	78	2,421	3.2%	92	2,409	3.8%	65	2,681	2.4%	74	3,167	2.3%
Children 6-11	204	1,643	12.4%	230	1,737	13.2%	240	1,964	12.2%	258	2,845	9.1%
Children 12-17	260	1,594	16.3%	240	1,566	15.3%	262	1,770	14.8%	365	2,643	13.8%
Youth 18-20	52	969	5.4%	52	1,007	5.2%	55	951	5.8%	77	1,342	5.7%
Alaskan Native or American Indian	۸	63	۸	۸	59	۸	۸	58 /	\	۸	69	٨
Asian or Pacific Islander	٨	101	٨	-	83	0.0%	٨	77 /	١	٨	127	٨
Black	۸	59	٨	۸	60	^	٨	65 /	١	۸	65	٨
Hispanic	49	1,068	4.6%	53	1,135	4.7%	56	1,230	4.6%	64	1,533	4.2%
White	512	4,909	10.4%	528	4,958	10.6%	532	5,363	9.9%	630	6,969	9.0%
Other	-	68	0.0%	۸	56	۸	-	64	0.0%	۸	124	٨
Unknown	17	359	4.7%	18	368	4.9%	19	509	3.7%	57	1,110	5.1%
Female	258	3,189	8.1%	268	3,263	8.2%	278	3,537	7.9%	355	4,837	7.3%
Male	336	3,438	9.8%	346	3,456	10.0%	344	3,829	9.0%	419	5,160	8.1%

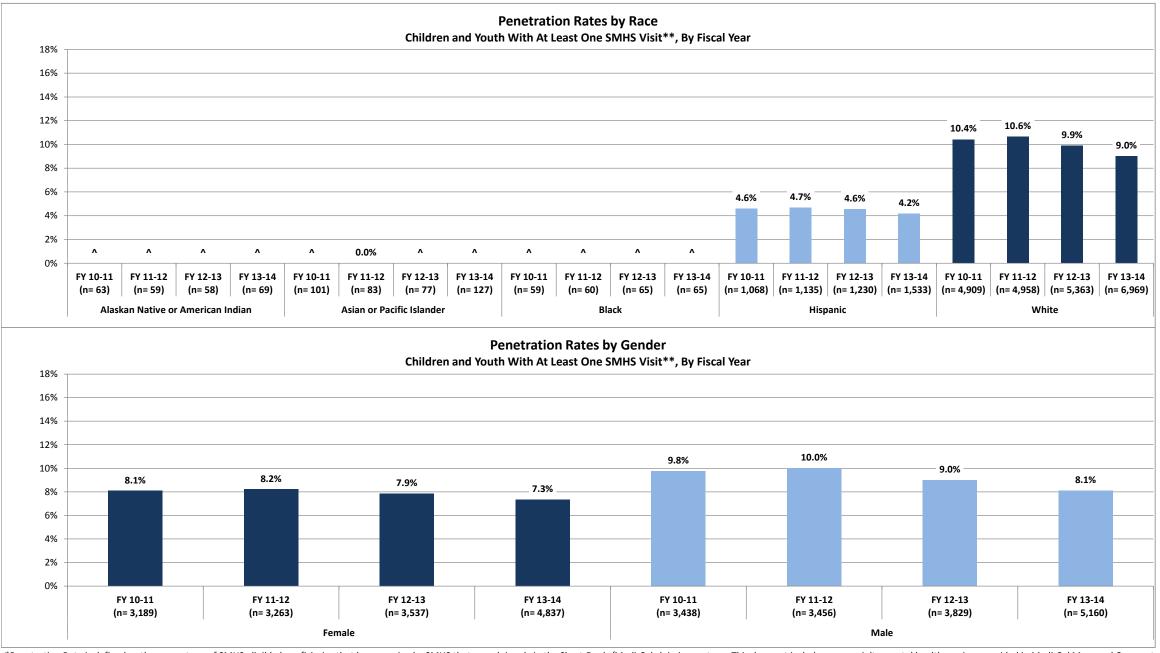


^{*}Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in Medi-Cal Managed Care system.

^{**}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.

[^] Data has been suppressed to protect patient privacy.

Penetration Rates* Report: Children and Youth With At Least One SMHS Visit**



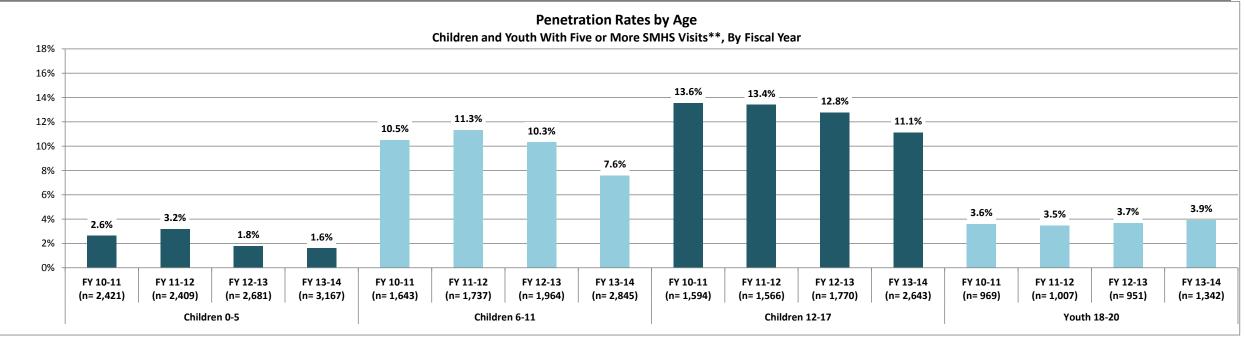
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**Children and Youth that have received at least one SMHS that was claimed through the Short-Doyle/ Medi-Cal claiming system on at least one (1) day in the Fiscal Year.

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Penetration Rates* Report: Children and Youth With Five or More SMHS Visits**

		FY 10-11			FY 11-12			FY 12-13			FY 13-14	
	Children and Youth with 5 or	Certified Eligible	Penetration	Children and Youth with 5 or	Certified Eligible	Penetration	Children and Youth with 5 or	Certified Eligible	Penetration	Children and Youth with 5 or	Certified Eligible	Penetration
	more SMHS	Children and	Rate									
	Visits	Youth		Visits	Youth		Visits	Youth		Visits	Youth	
All	488	6,627	7.4%	519	6,719	7.7%	512	7,366	7.0%	614	9,997	6.1%
Children 0-5	64	2,421	2.6%	77	2,409	3.2%	48	2,681	1.8%	51	3,167	1.6%
Children 6-11	173	1,643	10.5%	197	1,737	11.3%	203	1,964	10.3%	216	2,845	7.6%
Children 12-17	216	1,594	13.6%	210	1,566	13.4%	226	1,770	12.8%	294	2,643	11.1%
Youth 18-20	35	969	3.6%	35	1,007	3.5%	35	951	3.7%	53	1,342	3.9%
Alaskan Native or American Indian	۸	63	۸	۸	59	۸	^	58	۸	۸	69	^
Asian or Pacific Islander	۸	101	۸	-	83	0.0%	۸	77	۸	۸	127	۸
Black	۸	59	۸	٨	60	۸	۸	65	۸	۸	65	۸
Hispanic	41	1,068	3.8%	41	1,135	3.6%	40	1,230	3.3%	49	1,533	3.2%
White	416	4,909	8.5%	446	4,958	8.9%	440	5,363	8.2%	497	6,969	7.1%
Other	-	68	0.0%	۸	56	^	-	64	0.0%	^	124	^
Unknown	17	359	4.7%	17	368	4.6%	18	509	3.5%	46	1,110	4.1%
Female	201	3,189	6.3%	226	3,263	6.9%	217	3,537	6.1%	286	4,837	5.9%
Male	287	3,438	8.3%	293	3,456	8.5%	295	3,829	7.7%	328	5,160	6.4%

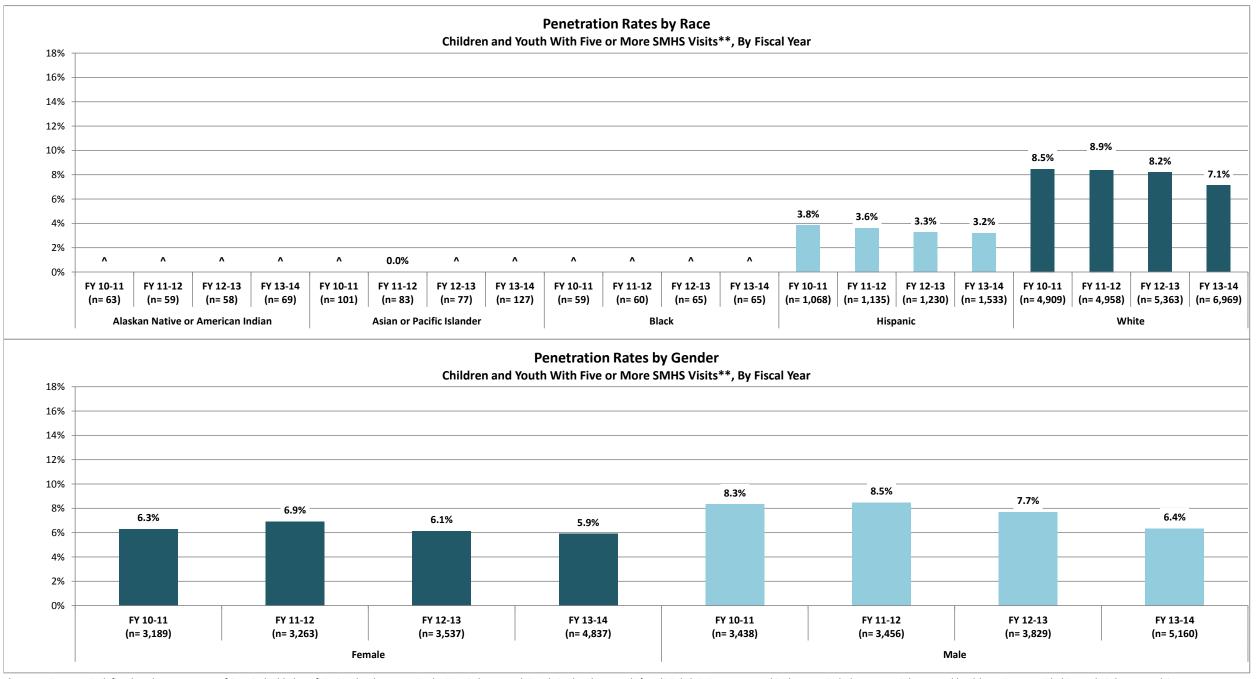


^{*}Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in Medi-Cal Managed Care system.

^{**}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.

[^] Data has been suppressed to protect patient privacy.

Penetration Rates* Report: Children and Youth With Five or More SMHS Visits**



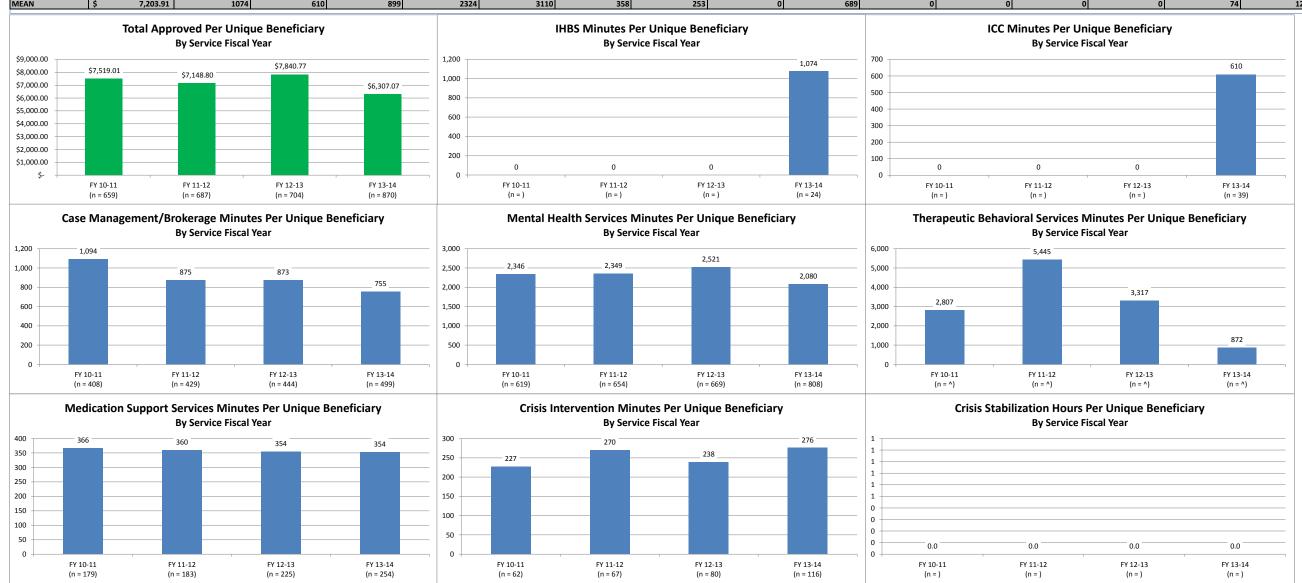
^{*}Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in Medi-Cal Managed Care system.

^{**}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.

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Utilization Report*: Approved Specialty Mental Health Services for Children and Youth Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Fiscal Year** Nevada County as of July 29, 2015

Fiscal Year	SD	DMC Total Approved	IHBS (Minutes)	ICC (Minutes)	Case Management/ Brokerage (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)	Crisis Residential Treatment Services (Days)	Adult Residential Treatment Services (Days)	
FY 10-11	\$	7,519.01	0	0	1094	2346	2807	366	227	0	762	0	0	0	0	159	0
FY 11-12	\$	7,148.80	0	0	875	2349	5445	360	270	0	574	0	0	0	0	14	0
FY 12-13	\$	7,840.77	0	0	873	2521	3317	354	238	0	1338	0	0	0	0	87	14
FY 13-14	\$	6,307.07	1074	610	755	2080	872	354	276	0	81	0	0	0	0	37	10
MEAN	\$	7,203.91	1074	610	899	2324	3110	358	253	0	689	0	0	0	0	74	12

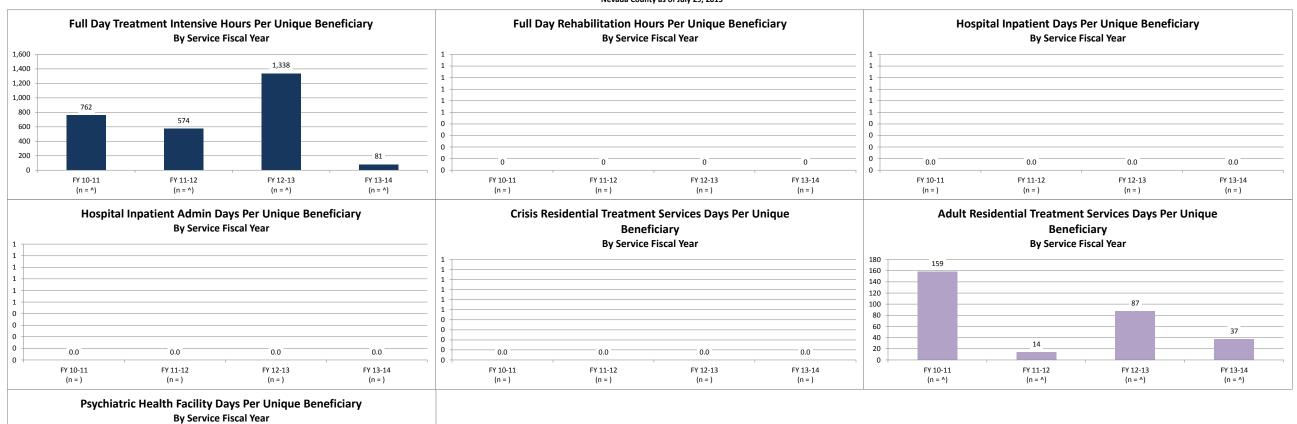


^{*}The graphs are color coded so that those reported in the same unit of analysis (e.g., minutes) are colored similarly.

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 Children and Youth Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Fiscal Year** Nevada County as of July 29, 2015



0.0

FY 11-12

(n =)

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.

9.8

FY 13-14

(n = ^)

14.3

FY 12-13

(n = ^)

0.0

FY 10-11

(n =)

12

10

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

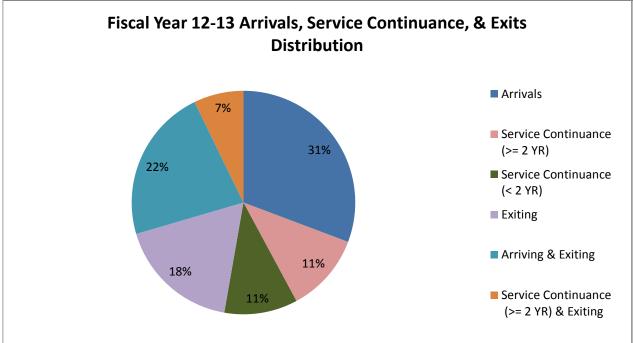
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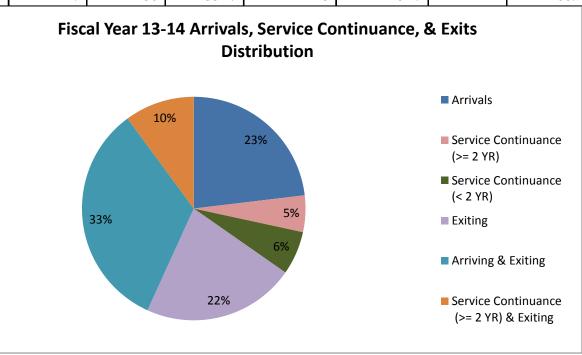
Snapshot Report: Unique Count of Children and Youth Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year

Nevada County as of August 3, 2015

Category	Description (Please refer to the Measures Catalog for more detailed descriptions on all Performance Outcomes System measures.)
Arrivals	Children/Youth that did not receive any SMHS within 3 months of their first date of service in the Fiscal Year.
Service Continuance	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 years (< 2 YR).
Exiting	Children/Youth 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 children/youth met both the criteria for Arrivals and Exiting above for the fiscal year.
Service Continuance &	
Exiting	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 Year.

Service Fiscal Year	Arrivals Count	Arrivals %	Service Continuance (>= 2 YR) Count	Continuance	Service Continuance (<2 YR) Count	Service Continuance (< 2 YR) %	Exiting Count	Exiting %	Arriving & Exiting Count	Arriving & Exiting %	Service Continuance (>= 2 YR) & Exiting Count	(>= 2 YR) and		Total %
FY 12-13	191	30.7%	71	11.4%	66	10.6%	110	17.7%	139	22.3%	45	7.2%	622	100%
FY 13-14	179	23.1%	41	5.3%	49	6.3%	171	22.1%	256	33.1%	78	10.1%	774	100%





Time to Step Down Report: Children and Youth Stepping Down in SMHS Services Post Inpatient Discharge Nevada County as of July 28, 2015

	Discharges with Step Down within 7 Days	Step Down within	Step Down within	Step Down within	Step Down > 30	Step Down > 30	Discharges with	Discharges with	Of Days between Discharge and	between	Inpatient	
	of Discharge	7 Days of	30 Days of	30 Days of	Days from	Days from	No Step Down*	No Step Down*	Step Down	Discharge and	Discharge	Discharge
		Discharge	Discharge	Discharge	Discharge	Discharge				Step Down	(Days)	(Days)
FY 10-11	0		0	21212	0		0		0	0	0.0	
FY 11-12	0		0	0.070	0		0	0.070	0	0	0.0	
FY 12-13	0		0		0		0		0	0	0.0	
FY 13-14	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0	0.0	
10 9 8 7	Median Time	Ser	vice in Days	•	·				Service in [Days	d Step Down	
5												
	R ₀ C		CEC) ₀ FC)R ₀		S _{0.0}		CA	FY 12-13	R D _{0.0}	
0) U ₀ C	CEC	FY 12-13	FY 13-14 Tine Fe	tweet Inpat	FY 10-11	ge and Step				
100%) U ₀ C	EC	FY 12-13	FY 13-14 Tine Fe	tweet Inpa	FY 10-11 ient Dischar	ge and Step				
) U ₀ C	EC	FY 12-13	FY 13-14 Tine Fe	tweet Inpa	FY 10-11 ient Dischar	ge and Step				
100% 80% 60%) U ₀ C	EC	FY 12-13	FY 13-14 Tine Fe	tweet Inpa	FY 10-11 ient Dischar	ge and Step				
100% 80% 60% 40%) U ₀ C	EC	FY 12-13	FY 13-14 Tine Fe	tweet Inpa	FY 10-11 ient Dischar	ge and Step				
100% 80% 60% 40%	FY 10-11	FY 11-12	EC	FY 12-13	FY 13-14 FY 13-14 Within 7 Days With	tweet Inpa	FY 10-11 ient Dischar	ge and Step			FY 13	
100% 80% 60% 40%	FY 10-11	FY 11-12 F 0.0%	EC	FY 12-13 Control of the second secon	FY 13-14 FY 13-14 Within 7 Days Within 7 Days	tweet Inpa	FY 10-11 Discharge Days + No Step I	ge and Step Down			FY 13	
100% 80% 60% 40%	FY 10-11	FY 11-12	EC	FY 12-13	FY 13-14 FY 13-14 Within 7 Days With	tweet Inpa	FY 10-11 Discharge Days + No Step I	ge and Step		FY 12-13	FY 13	

* 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.