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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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/provgovpart/pos/Pages/Performance-Outcomes-System-Reports-and-Measures-Catalog.aspx

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/provgovpart/pos/Pages/default.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). As of now, this report only classifies youth and their service usage for FY 12/13 and FY13/14. 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/Documents/1115 Waiver Behavioral Health-Services-Needs-Assessment-3.1.pos/Pages/Performance-Outcomes-System-Reports-and-Measures-Catalog.aspx

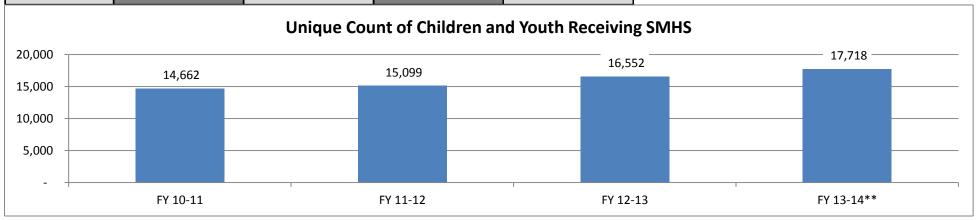
*The psychiatric emergency services/hospital data reported on in the time to step-down services report relies solely on claims data from Short Doyle/Medi-Cal II. In the future this report will incorporate other outpatient and inpatient Medi-Cal SMHS' billed through the Managed Care healthcare delivery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

*DHCS is in process of updating the data source for the two following types of Service Usage: Hospital Inpatient and Hospital Inpatient Admin.. This is being done to ensure the findings are complete. June 2016 is slated for an update of the POS reports and will include fee-for service data where it is appropriate.

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	14,662		289,547	
FY 11-12	15,099	3.0%	299,441	3.4%
FY 12-13	16,552	9.6%	360,327	20.3%
FY 13-14**	17,718	7.0%	407,026	13.0%
Compound Annual Growth Rate SFY**		6.5%		12.0%

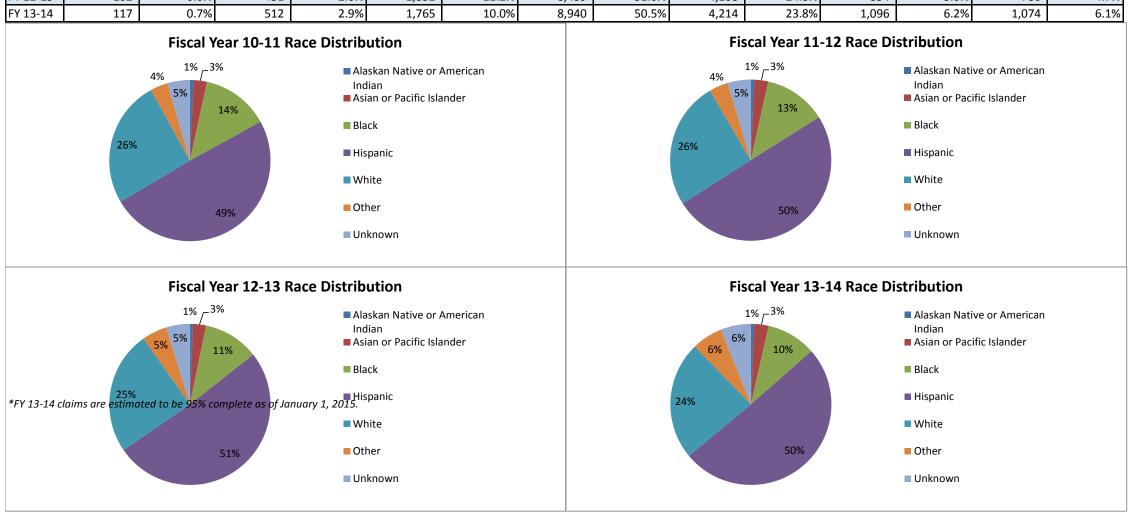


^{*}SMHS = Specialty Mental Health Services. See Measures Catalog for more detailed information.

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

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

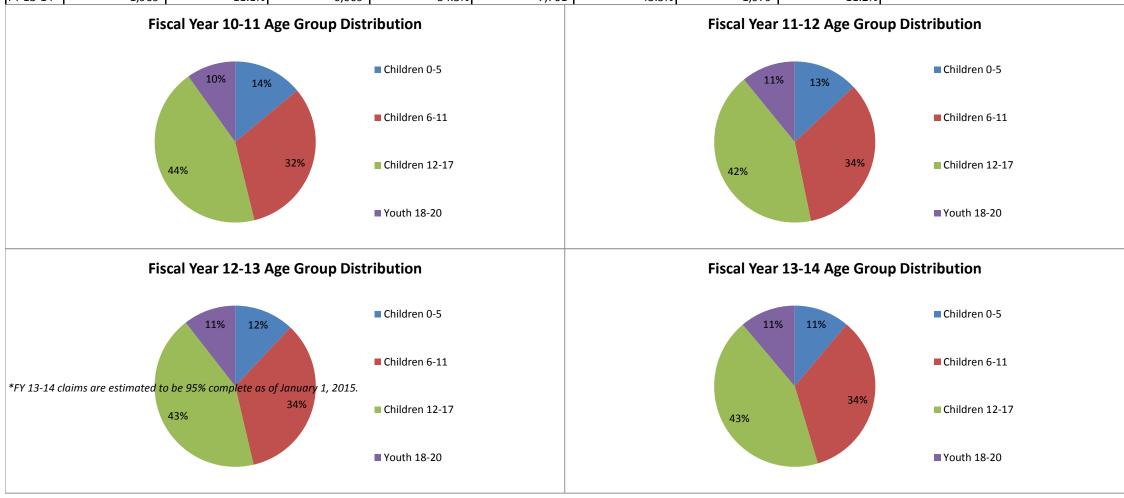
Fiscal Year	Alaskan Native or American Indian Count	Alaskan Native or American Indian %	Asian or Pacific Islander Count	Asian or Pacific Islander %	Black Count	Black %	Hispanic Count	Hispanic %	White Count	White %	Other Count	Other %	Unknown Count	Unknown %
FY 10-11	107	0.7%	393	2.7%	1,994	13.6%	7,251	49.5%	3,739	25.5%	514	3.5%	664	4.5%
FY 11-12	109	0.7%	420	2.8%	1,897	12.6%	7,537	49.9%	3,857	25.5%	579	3.8%	700	4.6%
FY 12-13	102	0.6%	431	2.6%	1,852	11.2%	8,439	51.0%	4,108	24.8%	834	5.0%	786	4.7%
FY 13-14	117	0.7%	512	2.9%	1,765	10.0%	8,940	50.5%	4,214	23.8%	1,096	6.2%	1,074	6.1%



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

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

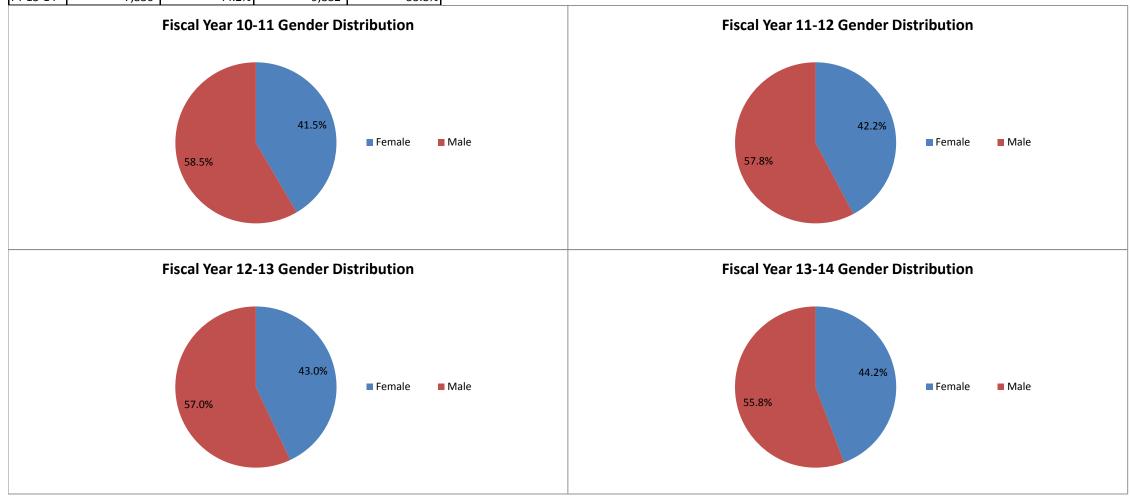
Fiscal Year	Children 0-5 Count	Children 0-5 %	Children 6-11 Count	Children 6-11 %	Children 12-17 Count	Children 12-17 %	Youth 18-20 Count	Youth 18-20 %
FY 10-11	2,048	14.0%	4,720	32.2%	6,448	44.0%	1,446	9.9%
FY 11-12	1,965	13.0%	5,097	33.8%	6,396	42.4%	1,641	10.9%
FY 12-13	1,989	12.0%	5,680	34.3%	7,141	43.1%	1,742	10.5%
FY 13-14	1.969	11.1%	6.069	34.3%	7,701	43.5%	1.979	11.2%



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

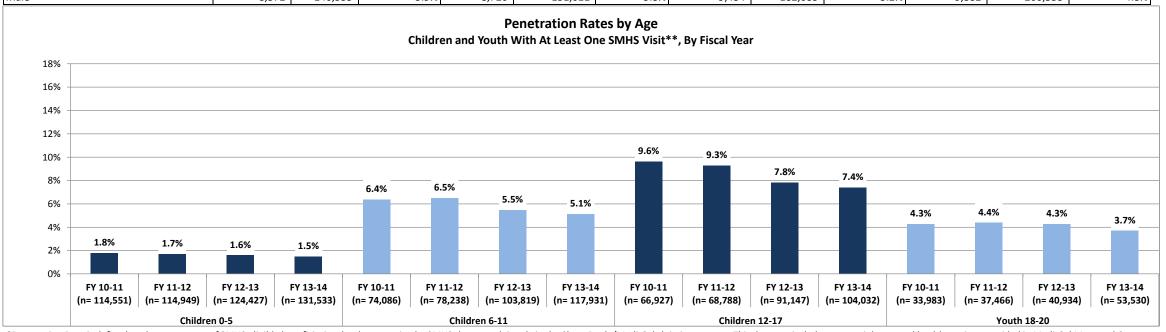
Fiscal Year	Female Count	Female %	Male Count	Male %
FY 10-11	6,090	41.5%	8,572	58.5%
FY 11-12	6,373	42.2%	8,726	57.8%
FY 12-13	7,118	43.0%	9,434	57.0%
FY 13-14	7.836	44.2%	9.882	55.8%



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

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	Certified		Children and	Certified		Children and	Certified		Children and	Certified	
	Youth with 1	Eligible	Penetration	Youth with 1	Eligible	Penetration	Youth with 1 or	Eligible	Penetration	Youth with 1 or	Eligible	Penetration
	or more SMHS	Children and	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	14,662	289,547	5.1%	15,099	299,441	5.0%	16,552	360,327	4.6%	17,718	407,026	4.4%
Children 0-5	2,048	114,551	1.8%	1,965	114,949	1.7%	1,989	124,427	1.6%	1,969	131,533	1.5%
Children 6-11	4,720	74,086	6.4%	5,097	78,238	6.5%	5,680	103,819	5.5%	6,069	117,931	5.1%
Children 12-17	6,448	66,927	9.6%	6,396	68,788	9.3%	7,141	91,147	7.8%	7,701	104,032	7.4%
Youth 18-20	1,446	33,983	4.3%	1,641	37,466	4.4%	1,742	40,934	4.3%	1,979	53,530	3.7%
Alaskan Native or American Indian	107	1,141	9.4%	109	1,217	9.0%	102	1,283	8.0%	117	1,418	8.3%
Asian or Pacific Islander	393	20,068	2.0%	420	20,195	2.1%	431	24,348	1.8%	512	29,513	1.7%
Black	1,994	25,001	8.0%	1,897	25,159	7.5%	1,852	25,847	7.2%	1,765	26,306	6.7%
Hispanic	7,251	158,368	4.6%	7,537	163,663	4.6%	8,439	198,790	4.2%	8,940	214,319	4.2%
White	3,739	43,045	8.7%	3,857	44,715	8.6%	4,108	51,977	7.9%	4,214	62,008	6.8%
Other	514	23,053	2.2%	579	24,860	2.3%	834	33,843	2.5%	1,096	43,127	2.5%
Unknown	664	18,871	3.5%	700	19,632	3.6%	786	24,239	3.2%	1,074	30,335	3.5%
Female	6,090	143,214	4.3%	6,373	148,430	4.3%	7,118	177,644	4.0%	7,836	200,688	3.9%
Male	8,572	146,333	5.9%	8,726	151,011	5.8%	9,434	182,683	5.2%	9,882	206,338	4.8%

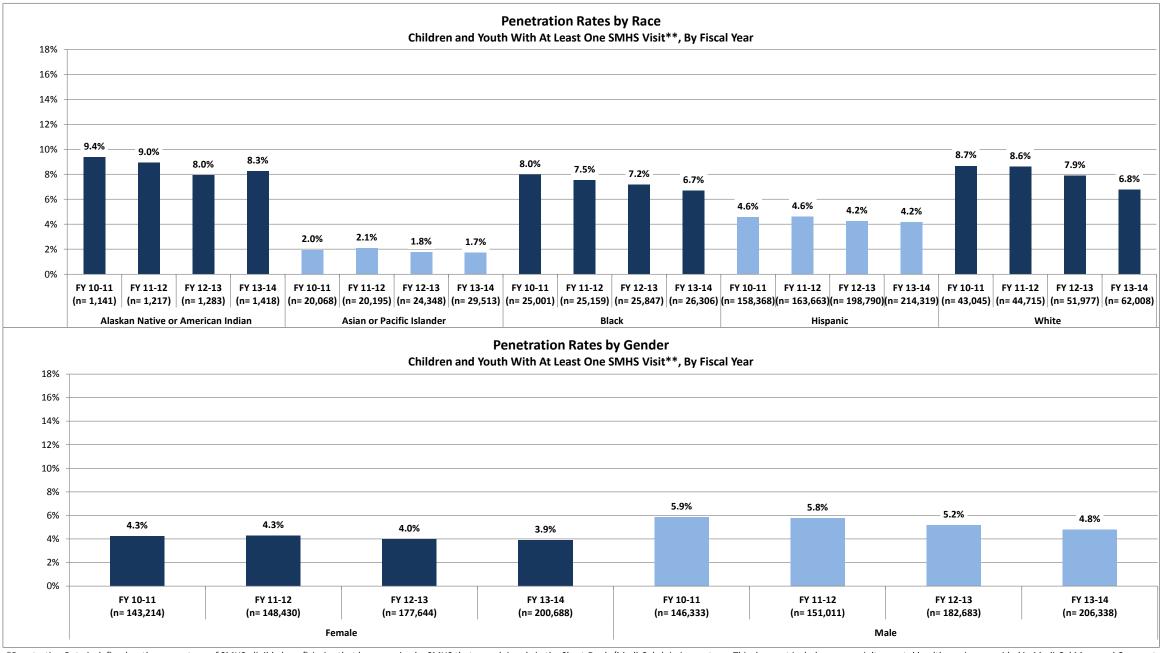


^{*}Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in Medi-Cal Managed Care system.

^{**}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.

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



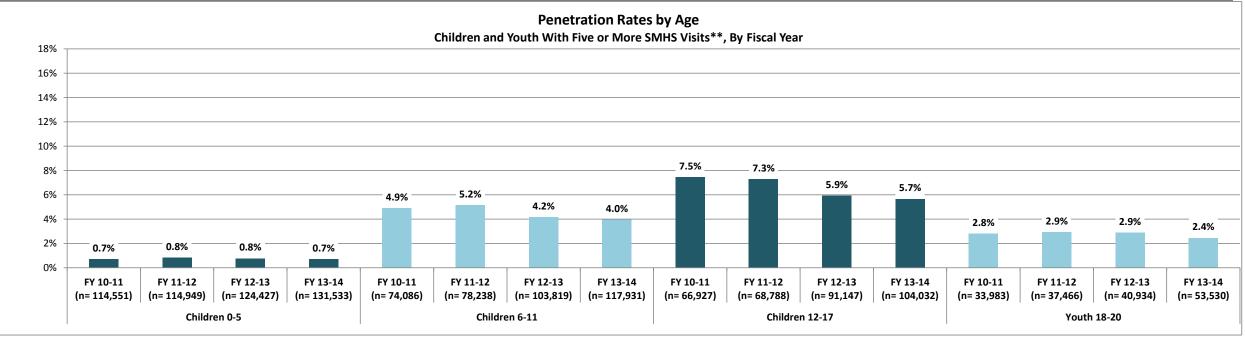
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Penetration Rates* Report: Children and Youth With Five or More SMHS Visits**

		FY 10-11			FY 11-12			FY 12-13			FY 13-14	
	Children and	Certified		Children and	Certified		Children and	Certified		Children and	Certified	
	Youth with 5 or	Eligible	Penetration	Youth with 5 or	Eligible	Penetration	Youth with 5 or	Eligible	Penetration	Youth with 5 or	Eligible	Penetration
	more SMHS	Children and	Rate									
	Visits	Youth		Visits	Youth		Visits	Youth		Visits	Youth	
All	10,386	289,547	3.6%	11,099	299,441	3.7%	11,855	360,327	3.3%	12,802	407,026	3.1%
Children 0-5	813	114,551	0.7%	962	114,949	0.8%	948	124,427	0.8%	940	131,533	0.7%
Children 6-11	3,630	74,086	4.9%	4,034	78,238	5.2%	4,317	103,819	4.2%	4,670	117,931	4.0%
Children 12-17	4,992	66,927	7.5%	5,011	68,788	7.3%	5,406	91,147	5.9%	5,883	104,032	5.7%
Youth 18-20	951	33,983	2.8%	1,092	37,466	2.9%	1,184	40,934	2.9%	1,309	53,530	2.4%
Alaskan Native or American Indian	73	1,141	6.4%	73	1,217	6.0%	81	1,283	6.3%	81	1,418	5.7%
Asian or Pacific Islander	270	20,068	1.3%	306	20,195	1.5%	295	24,348	1.2%	324	29,513	1.1%
Black	1,406	25,001	5.6%	1,417	25,159	5.6%	1,324	25,847	5.1%	1,274	26,306	4.8%
Hispanic	5,182	158,368	3.3%	5,524	163,663	3.4%	6,102	198,790	3.1%	6,494	214,319	3.0%
White	2,651	43,045	6.2%	2,864	44,715	6.4%	2,932	51,977	5.6%	3,086	62,008	5.0%
Other	338	23,053	1.5%	397	24,860	1.6%	543	33,843	1.6%	767	43,127	1.8%
Unknown	466	18,871	2.5%	518	19,632	2.6%	578	24,239	2.4%	776	30,335	2.6%
Female	4,270	143,214	3.0%	4,672	148,430	3.1%	5,137	177,644	2.9%	5,605	200,688	2.8%
Male	6,116	146,333	4.2%	6,427	151,011	4.3%	6,718	182,683	3.7%	7,197	206,338	3.5%

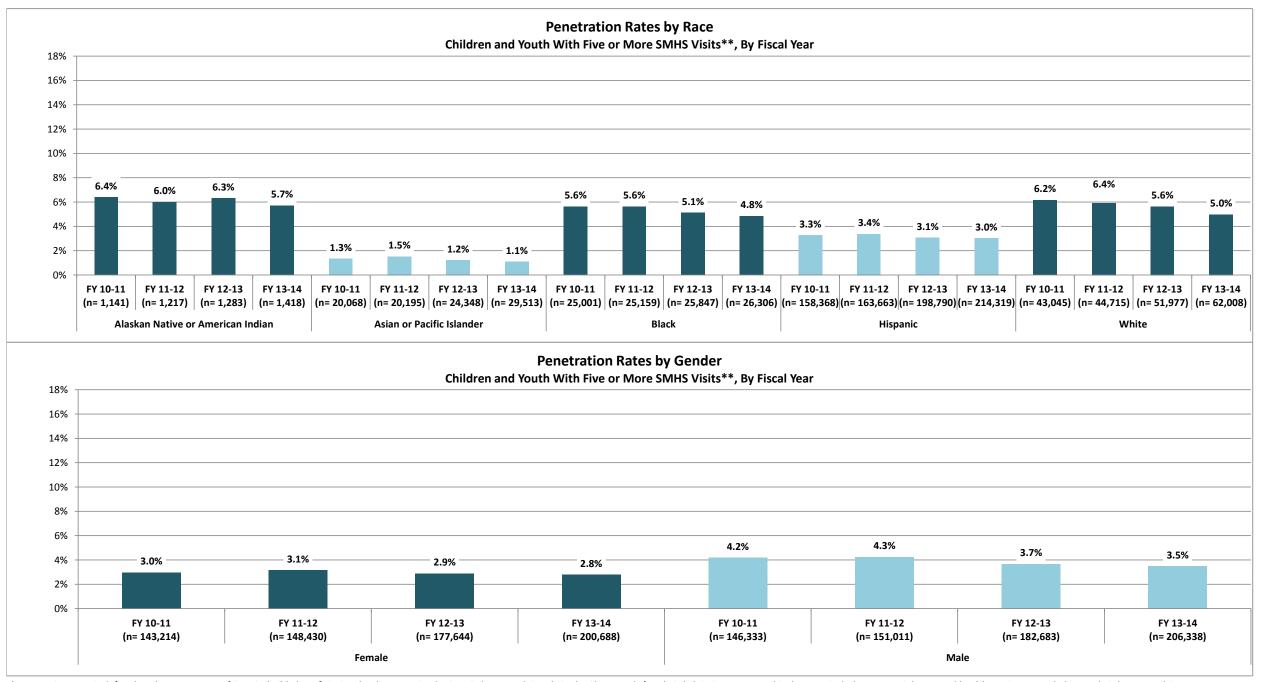


^{*}Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in Medi-Cal Managed Care system.

^{**}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**

Fiscal Year	SDM	MC Total Approved	IHBS (Minutes)	ICC (Minutes)	Case Management/ Brokerage (Minutes)	Mental Health	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	\$	3,809.75	0	0	301	1272	5724	232	243	8	542	418	N/A	N/A	14	0	0
FY 11-12	\$	3,790.29	0	0	287	1255	5238	234	260	11	508	331	N/A	N/A	10	10	68
FY 12-13	\$	4,284.37	195	0	251	1114	4579	209	185	10	486	433	N/A	N/A	13	116	107
FY 13-14	\$	4,410.76	1183	948	237	1045	4567	218	142	11	694	434	N/A	N/A	10	63	60
MEAN	\$	4,073.79	689	948	269	1171	5027	223	207	10	558	404	N/A	N/A	11	63	78

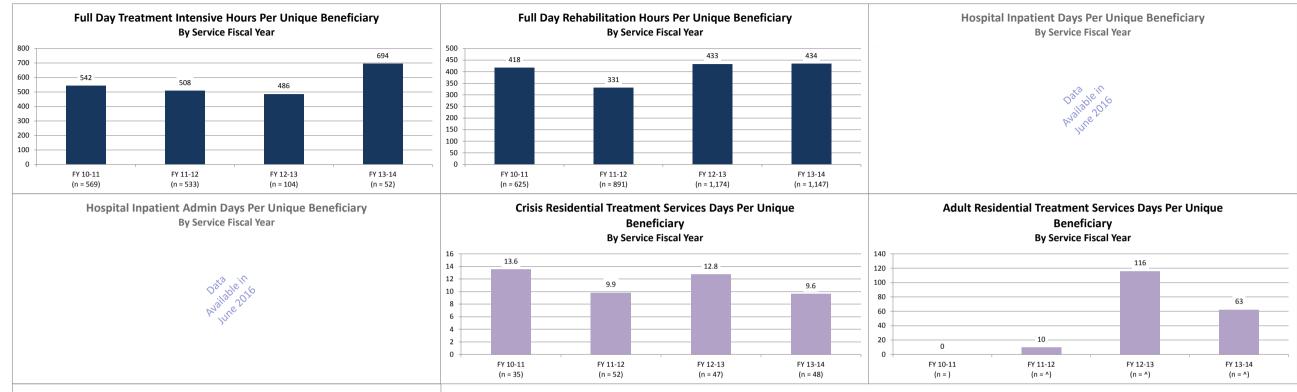


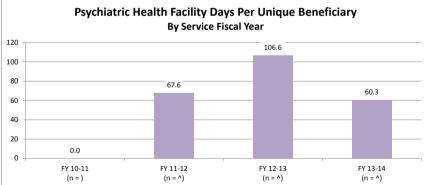
^{*}The graphs are color coded so that those reported in the same unit of analysis (e.g., minutes) are colored similarly

^{**}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.

^{***}This data will be available in June, 2016

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





^{*}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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^{**}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.

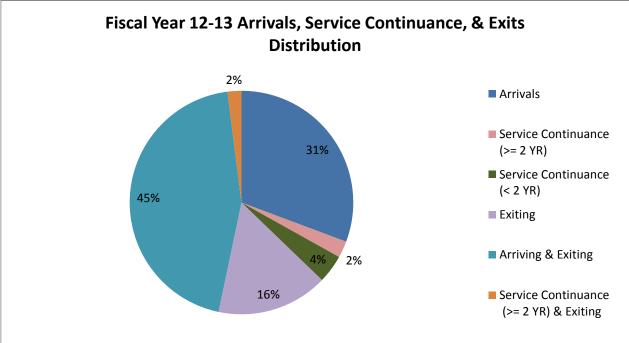
^{***}This data will be available in June, 2016

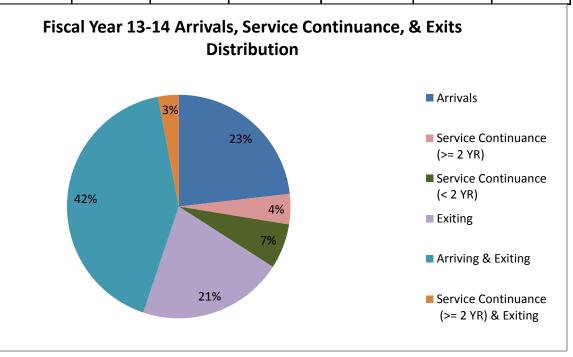
Snapshot Report: Unique Count of Children and Youth Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year

San Diego 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.

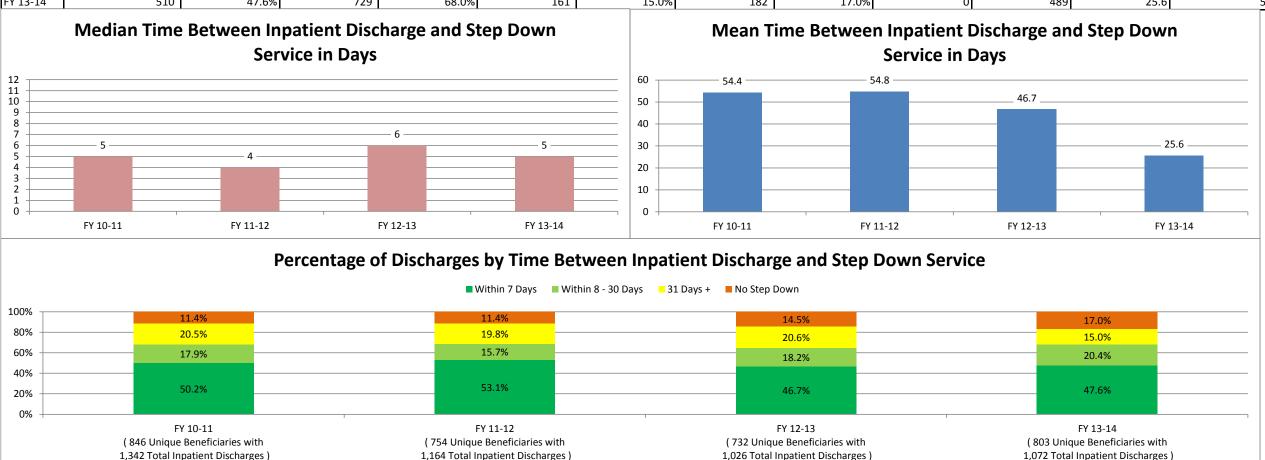
Service Fiscal Year	Arrivals Count	Arrivals %	Service Continuance (>= 2 YR) Count	Continuance	Service Continuance (<2 YR) Count	Service Continuance (< 2 YR) %	Exiting Count	Exiting %	Arriving & Exiting Count	Exiting %	Service Continuance (>= 2 YR) & Exiting Count	(>= 2 YR) and		Total %
FY 12-13	5,083	30.7%	398	2.4%	682	4.1%	2,667	16.1%	7,396	44.7%	326	2.0%	16,552	100%
FY 13-14	4,103	23.2%	775	4.4%	1,148	6.5%	3,735	21.1%	7,419	41.9%	538	3.0%	17,718	100%





Time to Step Down Report: Children and Youth Stepping Down in SMHS Services Post Inpatient Discharge

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	Step Down Within	Inpatient	Count of Inpatient Discharges with a Step Down > 30 Days from Discharge	Inpatient	Discharges with		Minimum Number of Days between Discharge and Step Down	Number of Days	Mean Time to Next Contact Post Inpatient Discharge (Days)	Median Time to Next Contact Post Inpatient Discharge (Days)	
FY 10-11	674	50.2%	914	68.1%	275	20.5%	153	11.4%	0	1431	54.4	5	
FY 11-12	618	53.1%	801	68.8%	230	19.8%	133	11.4%	0	1245	54.8	4	
FY 12-13	479	46.7%	666	64.9%	211	20.6%	149	14.5%	0	873	46.7	6	
FY 13-14	510	47.6%	729	68.0%	161	15.0%	182	17.0%	0	489	25.6	5	
	Madien Time Between Inneticut Discharge and Stan 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.