

**Performance Outcomes System Children/Youth in Foster Care Report**  
**Report run on June 8, 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 groupings, and county-specific reports where possible. 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.aspx>

**Purpose and Overview**

This report provides updated information on the initial indicators that were developed for the Performance Outcomes System. 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 Foster Care case children and youth under 21 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. Penetration and engagement rate data 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. For all of the measures and indicators included in this report, the denominator is the "Unique Count of Children and Youth receiving SMHS" shown on page 3 of the report and is broken out by state FY.

Utilization of services reports are shown in terms of dollars, as well as by service in time increments. 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:** Foster Care or Open Child Welfare 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.
- Child Welfare Services/Case Management System (CWS/CMS) data for children in FY 13/14 through FY 16/17.

**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://www.dhcs.ca.gov/services/MH/Documents/POS\\_MeasuresCatalog\\_Sept2016.pdf](http://www.dhcs.ca.gov/services/MH/Documents/POS_MeasuresCatalog_Sept2016.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, 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**

\*Population-based and county-specific report findings may be interpreted alongside the POS statewide report findings.

\***New Age Methodology** for Identifying Children under 21 (POS reports posted **after** 7/1/17): Beneficiaries that were under the age of 21 for the entire fiscal year (their age was less than 21 as of June 30th of the reported fiscal year).

\*The **penetration rates** reported here were calculated using a different methodology than that used by the External Quality Review Organization (EQRO). For the POS, the penetration rate is calculated by taking the total number of youth who received one or more SMHS’ 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. Penetration rates provide a measure of initial contact with the specialty mental health system.

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\*The **engagement rates** are calculated similarly to penetration rates but are intended to measure ongoing engagement with the specialty mental health system. The engagement rate is calculated by taking the total number of youth who received five or more SMHS' in a FY and dividing that by the total number of Medi-Cal eligible youth for that FY.

\*The **snapshot** report provides a point-in-time look at children and youth's movement through the SMHS system. The report uses six 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/services/MH/Documents/POS\\_MeasuresCatalog\\_Sept2016.pdf](http://www.dhcs.ca.gov/services/MH/Documents/POS_MeasuresCatalog_Sept2016.pdf)

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 beneficiary's county of Medi-Cal responsibility during the eligibility month when the inpatient service occurred.

\***Data Source Methodology:** Demographic & Penetration and Snapshot - based on MEDS data; Utilization - based on Claims Submission data; Time to step-down - based on Inpatient Hospital data.

\***Open Child Welfare:** Children/youth who are provided child welfare services either while living in their home, or while living out-of-home in a foster care setting. Excludes children: placed in California under the jurisdiction of another state (incoming interstate Compact on the Placement of Children (ICPC)) and who are placed with non-dependent guardians.

\***Foster Care Placement:** Children/youth who are removed from their home by a child placement agency, including county child welfare services and probation departments and placed in a foster care setting. Excludes children: placed in California under the jurisdiction of another state (incoming interstate Compact on the Placement of Children (ICPC)) and who are placed with non-dependent legal guardians.

**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 in Foster Care Receiving SMHS by Fiscal Year  
San Joaquin County as of June 8, 2018**

SFY	Unique Count Receiving SMHS*	Year-Over-Year Percentage Change	Unique Count of Foster Care Youth in Medi-Cal	Year-Over-Year Percentage Change
<b>FY 13-14</b>	1,120		2,017	
<b>FY 14-15</b>	1,092	-2.5%	2,049	1.6%
<b>FY 15-16</b>	1,127	3.2%	2,109	2.9%
<b>FY 16-17</b>	1,028	-8.8%	2,016	-4.4%
<b>Compound Annual Growth Rate SFY**</b>		<b>-2.8%</b>		<b>0.0%</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 in Foster Care Receiving SMHS by Fiscal Year  
San Joaquin County as of June 8, 2018**

<b>Fiscal Year</b>	<b>Black Count</b>	<b>Black %</b>	<b>Hispanic Count</b>	<b>Hispanic %</b>	<b>White Count</b>	<b>White %</b>	<b>Other Count</b>	<b>Other %</b>
<b>FY 13-14</b>	261	23.3%	392	35.0%	345	30.8%	122	10.9%
<b>FY 14-15</b>	262	24.0%	396	36.3%	314	28.8%	120	11.0%
<b>FY 15-16</b>	281	24.9%	396	35.1%	305	27.1%	145	12.9%
<b>FY 16-17</b>	270	26.3%	350	34.0%	270	26.3%	138	13.4%

\*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 in Foster Care Receiving SMHS by Fiscal Year  
San Joaquin County as of June 8, 2018**

Fiscal Year	Children 0-2 Count	Children 0-2 %	Children 3-5 Count	Children 3-5 %	Children 6-11 Count	Children 6-11 %	Youth 12-17 Count	Youth 12-17 %	Youth 18-20 Count	Youth 18-20 %
<b>FY 13-14</b>	198	17.7%	162	14.5%	300	26.8%	368	32.9%	92	8.2%
<b>FY 14-15</b>	193	17.7%	143	13.1%	293	26.8%	391	35.8%	72	6.6%
<b>FY 15-16</b>	135	12.0%	170	15.1%	336	29.8%	399	35.4%	87	7.7%
<b>FY 16-17</b>	122	11.9%	156	15.2%	322	31.3%	335	32.6%	93	9.0%

**Demographics Report: Unique Count of Children and Youth in Foster Care Receiving SMHS by Fiscal Year**  
**San Joaquin County as of June 8, 2018**

<b>Fiscal Year</b>	<b>Female Count</b>	<b>Female %</b>	<b>Male Count</b>	<b>Male %</b>
<b>FY 13-14</b>	531	47.4%	589	52.6%
<b>FY 14-15</b>	521	47.7%	571	52.3%
<b>FY 15-16</b>	546	48.4%	581	51.6%
<b>FY 16-17</b>	517	50.3%	511	49.7%

**Penetration Rates\* Report: Children and Youth in Foster Care with At Least One SMHS Visit\*\*  
San Joaquin County as of June 8, 2018**

	FY 13-14			FY 14-15			FY 15-16			FY 16-17		
	Children and Youth in Foster Care with 1 or more SMHS Visits	Certified Eligible Children and Youth in Foster Care	Penetration Rate	Children and Youth in Foster Care with 1 or more SMHS Visits	Certified Eligible Children and Youth in Foster Care	Penetration Rate	Children and Youth in Foster Care with 1 or more SMHS Visits	Certified Eligible Children and Youth in Foster Care	Penetration Rate	Children and Youth in Foster Care with 1 or more SMHS Visits	Certified Eligible Children and Youth in Foster Care	Penetration Rate
<b>All</b>	<b>1,120</b>	<b>2,017</b>	<b>55.5%</b>	<b>1,092</b>	<b>2,049</b>	<b>53.3%</b>	<b>1,127</b>	<b>2,109</b>	<b>53.4%</b>	<b>1,028</b>	<b>2,016</b>	<b>51.0%</b>
Children 0-2	198	438	45.2%	193	409	47.2%	135	392	34.4%	122	400	30.5%
Children 3-5	162	283	57.2%	143	307	46.6%	170	298	57.0%	156	301	51.8%
Children 6-11	300	464	64.7%	293	468	62.6%	336	508	66.1%	322	485	66.4%
Youth 12-17	368	559	65.8%	391	594	65.8%	399	639	62.4%	335	549	61.0%
Youth 18-20	92	273	33.7%	72	271	26.6%	87	272	32.0%	93	281	33.1%
Black	261	439	59.5%	262	462	56.7%	281	465	60.4%	270	468	57.7%
Hispanic	392	748	52.4%	396	746	53.1%	396	776	51.0%	350	721	48.5%
White	345	590	58.5%	314	585	53.7%	305	564	54.1%	270	510	52.9%
Other	122	240	50.8%	120	256	46.9%	145	304	47.7%	138	317	43.5%
Female	531	948	56.0%	521	964	54.0%	546	1,026	53.2%	517	985	52.5%
Male	589	1,069	55.1%	571	1,085	52.6%	581	1,083	53.6%	511	1,031	49.6%

\*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.

\*\*Children and Youth in Foster Care that have received at least one SMHS in the FisPage 7 of 14



**Engagement Rates\* Report: Children and Youth in Foster Care with Five or More SMHS Visits\*\***  
**San Joaquin County as of June 8, 2018**

	FY 13-14			FY 14-15			FY 15-16			FY 16-17		
	Children and Youth in Foster Care with 5 or more SMHS Visits	Certified Eligible Children and Youth in Foster Care	Penetration Rate	Children and Youth in Foster Care with 5 or more SMHS Visits	Certified Eligible Children and Youth in Foster Care	Penetration Rate	Children and Youth in Foster Care with 5 or more SMHS Visits	Certified Eligible Children and Youth in Foster Care	Penetration Rate	Children and Youth in Foster Care with 5 or more SMHS Visits	Certified Eligible Children and Youth in Foster Care	Penetration Rate
<b>All</b>	736	2,017	36.5%	879	2,049	42.9%	842	2,109	39.9%	819	2,016	40.6%
Children 0-2	52	438	11.9%	147	409	35.9%	80	392	20.4%	65	400	16.3%
Children 3-5	96	283	33.9%	120	307	39.1%	134	298	45.0%	131	301	43.5%
Children 6-11	244	464	52.6%	250	468	53.4%	269	508	53.0%	277	485	57.1%
Children 12-17	287	559	51.3%	313	594	52.7%	304	639	47.6%	278	549	50.6%
Youth 18-20	57	273	20.9%	49	271	18.1%	55	272	20.2%	68	281	24.2%
Black	174	439	39.6%	215	462	46.5%	218	465	46.9%	215	468	45.9%
Hispanic	255	748	34.1%	316	746	42.4%	284	776	36.6%	285	721	39.5%
White	234	590	39.7%	254	585	43.4%	239	564	42.4%	215	510	42.2%
Other	73	240	30.4%	94	256	36.7%	101	304	33.2%	104	317	32.8%
Female	352	948	37.1%	427	964	44.3%	413	1,026	40.3%	422	985	42.8%
Male	384	1,069	35.9%	452	1,085	41.7%	429	1,083	39.6%	397	1,031	38.5%

\*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.

\*\*Engagement 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.

**Utilization Report\*: Approved SMHS for Children/Youth in Foster Care  
Mean Expenditures and Service Quantity per Beneficiary by Fiscal Year  
San Joaquin County as of June 8, 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>	\$ 4,228	1,010	649	216	971	2,834	310	229	25	520	84	4	0	10	12	30	9
<b>FY 14-15</b>	\$ 5,307	1,646	1,142	252	1,246	1,907	331	245	24	539	519	0	0	8	15	0	5
<b>FY 15-16</b>	\$ 5,057	1,445	858	227	1,210	1,964	303	289	29	1,224	906	0	0	9	28	0	9
<b>FY 16-17</b>	\$ 6,286	832	730	246	1,517	2,258	331	211	18	617	141	0	0	12	0	0	0
<b>MEAN</b>	<b>\$ 5,219</b>	<b>1,233</b>	<b>845</b>	<b>235</b>	<b>1,236</b>	<b>2,241</b>	<b>319</b>	<b>244</b>	<b>24</b>	<b>725</b>	<b>413</b>	<b>4</b>	<b>0</b>	<b>10</b>	<b>18</b>	<b>30</b>	<b>8</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.

^ Data has been suppressed to protect patient privacy.

**Snapshot Report: Unique Count of Children and Youth in Foster Care Receiving SMHS  
Arriving, Exiting, and with Service Continuance by Fiscal Year  
San Joaquin County as of June 8, 2018**

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 ( $\geq 2$ 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 <b>Arrivals</b> and <b>Exiting</b> above for the fiscal year.
Service Continuance &	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 ( $\geq 2$ YR) Count	Service Continuance ( $\geq 2$ YR) %	Service Continuance ( $< 2$ YR) Count	Service Continuance ( $< 2$ YR) %	Exiting Count	Exiting %	Arriving & Exiting Count	Arriving & Exiting %	Service Continuance ( $\geq 2$ YR) & Exiting Count	Service Continuance ( $\geq 2$ YR) and Exiting %	Total Count	Total %
<b>FY 13-14</b>	332	29.6%	44	3.9%	57	5.1%	155	13.8%	503	44.9%	29	2.6%	1,120	100%
<b>FY 14-15</b>	319	29.2%	56	5.1%	82	7.5%	262	24.0%	355	32.5%	18	1.6%	1,092	100%
<b>FY 15-16</b>	267	23.7%	56	5.0%	64	5.7%	319	28.3%	379	33.6%	42	3.7%	1,127	100%
<b>FY 16-17</b>	260	25.3%	46	4.5%	77	7.5%	229	22.3%	386	37.5%	30	2.9%	1,028	100%

**Time to Step Down Report: Children and Youth in Foster Care Stepping Down in SMHS Services Post Inpatient Discharge\***  
**San Joaquin County as of June 8, 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 of Discharge	Percentage of Inpatient Discharges with Step Down between 8 and 30 days of Discharge	Count of Beneficiaries with a Step Down > 30 Days from Discharge or No Step Down*	Percentage of Beneficiaries with a Step Down > 30 Days from Discharge or 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	22	95.7%	^	^	^	^	0	33	2.1	0
FY 14-15	25	96.2%	^	^	^	^	0	52	2.2	0
FY 15-16	25	83.3%	^	^	^	^	0	232	13.2	0
FY 16-17	22	88.0%	^	^	^	^	0	47	3.5	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.

^ Data has been suppressed to protect patient privacy.