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.

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

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.

*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.

*T he **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

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 re port 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 for any questions regarding this report.

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SFY	Unique Count Receiving SMHS*	Year-Over-Year Percentage Change	Unique Count of Foster Care Youth in Medi-Cal	Year-Over-Year Percentage Change
FY 13-14	367		802	
FY 14-15	364	-0.8%	719	-10.3%
FY 15-16	365	0.3%	684	-4.9%
FY 16-17	335	-8.2%	668	-2.3%
Compound Annual Growth Rate SFY**		-3.0%		-5.9%

*SMHS = Specialty Mental Health Services. See Measures Catalog for more detailed information. **SFY = State Fiscal Year which is July 1 through June 30.

Fiscal Year	Black Count	Black %	Hispanic Count	Hispanic %	White Count	White %	Other Count	Other %
FY 13-14	22	6.0%	74	20.2%	201	54.8%	70	19.1%
FY 14-15	20	5.5%	63	17.3%	205	56.3%	76	20.9%
FY 15-16	15	4.1%	60	16.4%	184	50.4%	106	29.0%
FY 16-17	۸	۸	56	16.7%	114	34.0%	۸	٨

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

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 %
FY 13-14	20	5.4%	53	14.4%	132	36.0%	134	36.5%	28	7.6%
FY 14-15	19	5.2%	54	14.8%	139	38.2%	130	35.7%	22	6.0%
FY 15-16	46	12.6%	60	16.4%	103	28.2%	122	33.4%	34	9.3%
FY 16-17	45	13.4%	41	12.2%	101	30.1%	113	33.7%	35	10.4%

Fiscal Year	Female Count	Female %	Male Count	Male %		
FY 13-14	196	53.4%	171	46.6%		
FY 14-15	206	56.6%	158	43.4%		
FY 15-16	197	54.0%	168	46.0%		
FY 16-17	179	53.4%	156	46.6%		

		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	Penetratio n 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
All	367	802	45.8%	364	719	50.6%	365	684	53.4%	335	668	50.1%
Children 0-2	20	134	14.9%	19	134	14.2%	46	127	36.2%	45	117	38.5%
Children 3-5	53	130	40.8%	54	94	57.4%	60	103	58.3%	41	89	46.1%
Children 6-11	132	191	69.1%	139	185	75.1%	103	158	65.2%	101	160	63.1%
Youth 12-17	134	250	53.6%	130	228	57.0%	122	201	60.7%	113	195	57.9%
Youth 18-20	28	97	28.9%	22	78	28.2%	34	95	35.8%	35	107	32.7%
Black	22	38	57.9%	20	31	64.5%	15	27	55.6%	^	19	^
Hispanic	74	206	35.9%	63	136	46.3%	60	129	46.5%	56	142	39.4%
White	201	433	46.4%	205	406	50.5%	184	354	52.0%	114	257	44.4%
Other	70	125	56.0%	76	146	52.1%	106	174	60.9%	٨	250	۸
Female	196	396	49.5%	206	376	54.8%	197	357	55.2%	179	336	53.3%
Male	171	406	42.1%	158	343	46.1%	168	327	51.4%	156	332	47.0%

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

		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
All	290	802	36.2%	288	719	40.1%	239	684	34.9%	218	668	32.6%
Children 0-2	^	134	۸	۸	134	٨	۸	127	^	12	117	10.3%
Children 3-5	42	130	32.3%	41	94	43.6%	33	103	32.0%	20	89	22.5%
Children 6-11	114	191	59.7%	114	185	61.6%	84	158	53.2%	73	160	45.6%
Children 12-17	105	250	42.0%	108	228	47.4%	91	201	45.3%	87	195	44.6%
Youth 18-20	٨	97	۸	٨	78	٨	۸	95	۸	26	107	24.3%
Black	17	38	44.7%	17	31	54.8%	^	27	^	^	19	٨
Hispanic	63	206	30.6%	41	136	30.1%	33	129	25.6%	41	142	28.9%
White	155	433	35.8%	165	406	40.6%	121	354	34.2%	77	257	30.0%
Other	55	125	44.0%	65	146	44.5%	۸	174	^	۸	250	٨
Female	149	396	37.6%	164	376	43.6%	133	357	37.3%	121	336	36.0%
Male	141	406	34.7%	124	343	36.2%	106	327	32.4%	97	332	29.2%

*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

**Children and Youth in Foster Care that have received at least five SMHS in the Fiscal Year.

^ Data has been suppressed to protect patient privacy.

Utilization Report*: Approved SMHS for Children/Youth in Foster Care Mean Expenditures and Service Quantity per Beneficiary by Fiscal Year Santa Barbara 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)	n Support Services	Crisis Interventio n (Minutes)	Crisis Stabilizatio n (Hours)	Full Day Treatment Intensive (Hours)	Full Day Rehabilitati on (Hours)	Hospital Inpatient (Days)	Hospital Inpatient Admin (Days)	Service	Crisis Residential Treatment Services (Days)		Psychiatric Health Facility (Days)
FY 13-14	\$ 6,832	1,216	373	277	2,440	6,266	446	188	17	588	1,392	0	0	3	0	0	0
FY 14-15	\$ 8,134	829	828	274	2,150	5,155	403	251	10	0	78	14	17	13	0	0	0
FY 15-16	\$ 7,731	1,610	1,174	302	1,779	4,607	531	404	27	192	0	0	0	18	19	0	0
FY 16-17	\$ 8,677	2,381	1,131	290	1,634	3 <i>,</i> 948	467	323	16	951	0	0	0	21	4	0	0
MEAN	\$ 7,843	1,509	876	286	2,001	4,994	462	292	17	577	735	14	17	14	11	0	0

*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

Santa Barbara 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 (>= 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 &	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	Service Continuance (>= 2 YR) %	Service Continuance (<2 YR) Count	Service Continuance (< 2 YR) %	Exiting Count	Exiting %	Arriving & Exiting Count	Arriving & Exiting %	Service Continuance (>= 2 YR) & Exiting Count	Service Continuance (>= 2 YR) and Exiting %	Total Count	Total %
FY 13-14	85	23.2%	22	6.0%	39	10.6%	88	24.0%	118	32.2%	15	4.1%	367	100%
FY 14-15	84	23.1%	29	8.0%	24	6.6%	80	22.0%	130	35.7%	17	4.7%	364	100%
FY 15-16	90	24.7%	24	6.6%	27	7.4%	67	18.4%	134	36.7%	23	6.3%	365	100%
FY 16-17	72	21.5%	24	7.2%	21	6.3%	83	24.8%	121	36.1%	14	4.2%	335	100%

Time to Step Down Report: Children and Youth in Foster Care Stepping Down in SMHS Services Post Inpatient Discharge* Santa Barbara 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	Beneficiaries with a Step Down > 30 Days from Discharge or	Days from	Minimum Number of Days between	Maximum Number of Days between Discharge and Step Down	-	Median Time to Next Contact Post Inpatient Discharge (Days)
FY 13-14	٨	۸	^	۸	۸	^	0	220	110.0	110
FY 14-15	12	80.0%	^	^	۸	^	0	109	13.7	2
FY 15-16	28	90.3%	^	^	^	^	0	37	2.8	1
FY 16-17	27	87.1%	^	^	^	^	0	34	3.6	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. ^ Data has been suppressed to protect patient privacy.