

Department of Health Care Services

Medi-Cal Specialty Mental Health Services

November Estimate

Policy Change Supplement

For Fiscal Years
2013-14 and 2014-15

Table of Contents

Medi-Cal Specialty Mental Health Service Descriptions	1
Comparison of Fiscal Impacts of Policy Changes - Accrual Comparisons	6
Children and Adults Service Costs:	
Cash Comparison: FY 2013-14 Children and Adults	7
Cash Comparison: FY 2013-14 HFP and Grand Totals	8
Children and Adult Service Costs:	
Cash Comparison: FY 2013-14 and FY 14-15 Est. Children and Adults	9
Cash Comparison: FY 2013-14 and FY 14-15 Est. HFP and Grand Totals.....	10
Children Service Costs Accrual Comparison:	
Fiscal Year 2012-13 & FY 13-14 Appropriation, May 2013 and Nov 2013 Estimates	11
Fiscal Year 2013-14 May and Nov 2013 Estimates	12
November 2013 Estimate for Fiscal Year 2013-14 and FY 2014-15	13
Adult Service Costs Accrual Comparison:	
Fiscal Year 2012-13 & FY 13-14 Appropriation, May 2013 and Nov 2013 Estimates	14
Fiscal Year 2013-14 May and Nov 2013 Estimates	15
November 2013 Estimate for Fiscal Year 2013-14 and FY 2014-15	16
Children's Table of Approved Claims Costs and Unduplicated Clients Counts	17
Children's Approved Claims and Claim Forecast	18
Unduplicated Clients and Client Forecasts	
All Medi-Cal Children Compared to Children Receiving Specialty Mental Health Services...	19
Children's Services Approved Claims Data	
Number of Clients, Units of Service, Costs per Unit, and Approved Amounts by Service	20
Adults' Table of Approved Claim Costs and Unduplicated Client Counts	23
Adults' Approved Claims and Claims Forecast	24
Unduplicated Clients and Client Forecasts	25
Adults' Services Approved Claims Data	
Number of Clients, Units of Service, Costs per Unit, and Approved Amounts by Service	26
Children Costs and Unduplicated Clients by Service Type and Year	29
Adults Costs and Unduplicated Clients by Service Type and Year	30
About the Healthy Families Program	31
Healthy Families to Medi-Cal Transition	32
Service Type Forecasts: Table of Contents	36
Service Type Forecasts: Children Services	38
Service Type Forecasts: Adult Services	100

Service Descriptions

Overview

The Medi-Cal Specialty Mental Health Services Program is “carved-out” of the broader Medi-Cal program and is also administered by the Department of Health Care Services (Department) under the authority of a waiver approved by the Centers for Medicare and Medicaid Services (CMS). The Department contracts with a Mental Health Plan (MHP) in each county to provide or arrange for the provision of Medi-Cal specialty mental health services. All MHPs are county mental health departments.

Specialty mental health services are Medi-Cal entitlement services for adults and children that meet medical necessity criteria, which consist of having a specific covered diagnosis, functional impairment, and meeting intervention criteria. MHPs must certify that they incurred a cost before seeking federal reimbursement through claims to the State. MHPs are responsible for the non-federal share of Medi-Cal specialty mental health services. Mental health services for Medi-Cal beneficiaries who do not meet the criteria for specialty mental health services are provided under the broader Medi-Cal program either through managed care plans (by primary care providers within their scope of practice) or fee-for-service. Children’s specialty mental health services are provided under the federal requirements of the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) benefit, which is available to full-scope beneficiaries under age 21.

The following Medi-Cal specialty mental health services are provided for children and adults:

<u>Services</u>	<u>Children</u>	<u>Adult</u>
Adult Crisis Residential Services*	X	X
Adult Residential Treatment Services*	X	X
Crisis Intervention	X	X
Crisis Stabilization	X	X
Day Rehabilitation	X	X
Day Treatment Intensive	X	X
Medication Support	X	X
Psychiatric Health Facility Services	X	X
Psychiatric Inpatient Hospital Services	X	X
Targeted Case Management	X	X
Therapeutic Behavioral Services	X	
Therapy and Other Service Activities	X	X

*Includes Children Age 18 through 20

Service Descriptions

Adult Crisis Residential Services (CRS)

Adult crisis residential services provide an alternative to acute psychiatric hospital services for beneficiaries who otherwise would require hospitalization. The CRS programs for adults provide normalized living environments, integrated into residential communities. The services follow a social rehabilitation model that integrates aspects of emergency psychiatric care, psychosocial rehabilitation, milieu therapy, case management and practical social work.

Adult Residential Treatment Services

Adult Residential Treatment Services are rehabilitative services provided in a non-institutional, residential setting for beneficiaries who would be at risk of hospitalization or other institutional placement if they were not receiving residential treatment services. The services include a wide range of activities and services that support beneficiaries in their effort to restore, maintain, and apply interpersonal and independent living skills and to access community support systems. Service activities may include assessment, plan development, therapy, rehabilitation, and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Crisis Intervention

Crisis intervention services last less than 24 hours and are for, or on behalf of, a beneficiary for a condition that requires more timely response than a regularly scheduled visit. Service activities include, but are not limited to, assessment, collateral and therapy. Crisis Intervention services may either be face-to-face or by telephone with the beneficiary or the beneficiary's significant support person and may be provided anywhere in the community.

Crisis Stabilization

Crisis stabilization services last less than 24 hours and are for, or on behalf of, a beneficiary for a condition that requires a more timely response than a regularly scheduled visit. Service activities include but are not limited to one or more of the following: assessment, collateral, and therapy. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Day Rehabilitative (Half-Day & Full-Day)

Day rehabilitation services are a structured program of rehabilitation and therapy with services to improve, maintain or restore personal independence and functioning, consistent with requirements for learning and development and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to assessment, plan development, therapy, rehabilitation and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Service Descriptions

Day Treatment Intensive (Half-Day & Full-Day)

Day treatment intensive services are a structured, multi-disciplinary program of therapy that may be used as an alternative to hospitalization, or to avoid placement in a more restrictive setting, or to maintain the client in a community setting and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to, assessment, plan development, therapy, rehabilitation and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Medication Support

Medication support services include prescribing, administering, dispensing and monitoring of psychiatric medications or biologicals that are necessary to alleviate the symptoms of mental illness. Service activities may include but are not limited to: evaluation of the need for medication; evaluation of clinical effectiveness and side effects; obtaining informed consent; instruction in the use, risks and benefits of, and alternatives for, medication; collateral and plan development related to the delivery of service and/or assessment for the client; prescribing, administering, dispensing and monitoring of psychiatric medications or biologicals; and medication education.

Psychiatric Health Facility (PHF) Services

“Psychiatric Health Facility” means a facility licensed under the provisions beginning with Section 77001 of Chapter 9, Division 5, Title 22 of the California Code of Regulations. “Psychiatric Health Facility Services” are therapeutic and/or rehabilitative services provided in a psychiatric health facility on an inpatient basis to beneficiaries who need acute care, which meets the criteria of Section 1820.205 of Chapter 11, Division 1, Title 9 of the California Code of Regulations, and whose physical health needs can be met in an affiliated general acute care hospital or in outpatient settings. These services are separate from those categorized as “Psychiatric Inpatient Hospital”.

Psychiatric Inpatient Hospital Services

Psychiatric inpatient hospital services include both acute psychiatric inpatient hospital services and administrative day services. Acute psychiatric inpatient hospital services are provided to beneficiaries for whom the level of care provided in a hospital is medically necessary to diagnose or treat a covered mental illness. Administrative day services are inpatient hospital services provided to beneficiaries who were admitted to the hospital for an acute psychiatric inpatient hospital service and the beneficiary’s stay at the hospital must be continued beyond the beneficiary’s need for acute psychiatric inpatient hospital services due to lack of residential placement options at non-acute residential treatment facilities that meet the needs of the beneficiary.

Psychiatric inpatient hospital services are provided by Short-Doyle / Medi-Cal (SD/MC) hospitals and Fee-for-Service / Medi-Cal (FFS/MC) hospitals. MHPs claim reimbursement for the cost of psychiatric inpatient hospital services provided by Short-Doyle Medi-Cal hospitals through the Short-Doyle Medi-Cal (SD/MC) claiming system. FFS/MC hospitals claim reimbursement for the cost of psychiatric inpatient hospital services through the FFS/MC Fiscal Intermediary system. MHPs are responsible for authorization of psychiatric inpatient hospital services reimbursed through either billing system. For SD/MC hospitals, the daily rate includes the cost of any needed professional services. The FFS/MC hospital daily rate does not include professional services, which are billed separately from the FFS/MC inpatient hospital services via the SD/MC claiming system.

Targeted Case Management (TCM)

Targeted case management is a service that assists a beneficiary in accessing needed medical, educational, social, prevocational, vocational, rehabilitative, or other community services. The service activities may include, but are not limited to, communication, coordination and referral; monitoring service delivery to ensure beneficiary access to services and the service delivery system; monitoring of the beneficiary's progress, placement services, and plan development. TCM services may be face-to-face or by telephone with the client or significant support persons and may be provided anywhere in the community. Additionally, services may be provided by any person determined by the MHP to be qualified to provide the service, consistent with the scope of practice and state law.

Therapeutic Behavioral Services (TBS)

Therapeutic behavioral services are intensive, individualized, short-term outpatient treatment interventions for beneficiaries up to age 21. Individuals receiving these services have serious emotional disturbances (SED), are experiencing a stressful transition or life crisis and need additional short-term, specific support services to accomplish outcomes specified in the written treatment plan.

Therapy and Other Service Activities (formerly referred to as Mental Health Services)

Individual or group therapies and interventions are designed to provide a reduction of mental disability and restoration, improvement or maintenance of functioning consistent with the goals of learning, development, independent living, and enhanced self-sufficiency. These services are separate from those provided as components of adult residential services, treatment services, crisis intervention, crisis stabilization, day rehabilitation, or day treatment intensive. Service activities may include, but are not limited to:

1. Assessment - A service activity designed to evaluate the current status of mental, emotional, or behavioral health. Assessment includes, but is not limited to, one or more of the following: mental status determination, analysis of the clinical history, analysis of relevant cultural issues and history; diagnosis; and the use of mental health testing procedures.
2. Plan Development - A service activity that consists of development of client plans, approval of client plans, and/or monitoring and recording of progress.
3. Therapy - A service activity that is a therapeutic intervention that focuses primarily on symptom reduction as a means to reduce functional impairments. Therapy may be delivered to an individual or group and may include family therapy at which the client is present.
4. Rehabilitation - A service activity that includes, but is not limited to, assistance, improving, maintaining or restoring functional skills, daily living skills, social and leisure skills, grooming and personal hygiene skills; obtaining support resources; and/or obtaining medication education.
5. Collateral - A service activity involving a significant support person in the beneficiary's life for the purpose of addressing the mental health needs of the beneficiary in terms of achieving goals of the beneficiary's client plan. Collateral may include, but is not limited to, consultation and training of the significant support person(s) to assist in better utilization of mental health services by the client, consultation and training of the significant support person(s) to assist in better understanding of mental illness, and family counseling with the significant support person(s) in achieving the goals of the client plan. The client may or may not be present for this service activity.

The distribution and use of expenditures of each service activity varies over time with changes in client needs.

Department of Health Care Services
Nov 2013 Estimate

Specialty Mental Health Services Program
Comparison of Fiscal Impacts of Policy Changes – Accrual Comparison

Medi-Cal Specialty Mental Health Services
Policy Change Supplement

(In Thousands)														
Fiscal Year 2013-14 May 2013 Estimate Compared to Fiscal Year 2013-14 November 2013 Estimate														
POLICY CHG.		May 2013 Est. for FY 2013-14				November 2013 Est. for FY 2013-14				DIFFERENCE				
TYPE	NO.	DESCRIPTION	TF	GF	FFP	CF ⁽¹⁾	TF	GF	FFP	CF ⁽¹⁾	TF	GF	FFP	CF ⁽¹⁾
Base	224/69	SMHS FOR CHILDREN	\$1,550,977	\$0	\$779,998	\$770,979	\$1,465,995	\$0	\$737,167	\$728,828	-\$84,982	\$0	-\$42,831	-\$42,151
Base	225/70	SMHS FOR ADULTS	\$1,028,520	\$0	\$514,260	\$514,260	\$1,010,693	\$0	\$505,347	\$505,346	-\$17,827	\$0	-\$8,913	-\$8,914
Regular	61/71	SPECIALTY MENTAL HEALTH SVCS SUPP REIMBURSEMENT ⁽²⁾	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Regular	62/75	HEALTHY FAMILIES - SED	\$34,124	\$0	\$22,181	\$11,943	\$28,609	\$0	\$18,596	\$10,013	-\$5,515	\$0	-\$3,585	-\$1,930
Regular	63/74	KATIE A. V. DIANA BONTA	\$53,502	\$0	\$26,751	\$26,751	\$53,502	\$0	\$26,751	\$26,751	\$0	\$0	\$0	\$0
Regular	64/73	TRANSITION OF HFP - SMH SERVICES	\$63,901	\$0	\$41,536	\$22,365	\$63,901	\$0	\$41,536	\$22,365	\$0	\$0	\$0	\$0
Regular	65/78	SOLANO COUNTY SMHS REALIGNMENT CARVE-OUT	\$5,538	\$0	\$2,769	\$2,769	\$4,540	\$0	\$2,270	\$2,270	-\$998	\$0	-\$499	-\$499
Regular	66/77	OVER ONE-YEAR CLAIMS	\$6,000	\$0	\$3,000	\$3,000	\$6,000	\$0	\$3,000	\$3,000	\$0	\$0	\$0	\$0
Regular	68/79	SISKIYOU COUNTY MENTAL HEALTH PLAN OVERPAYMENT ⁽³⁾	\$0	\$0	\$0	\$0	\$0	\$7,204	-\$7,204	\$0	\$0	\$7,204	-\$7,204	\$0
Regular	69/80	IMD ANCILLARY SERVICES	\$0	\$6,000	-\$6,000	\$0	\$0	\$6,000	-\$6,000	\$0	\$0	\$0	\$0	\$0
Regular	70/82	REIMBURSEMENT IN IMD ANCILLARY SERVICES COSTS	-\$12,000	-\$12,000	\$0	\$0	-\$12,000	-\$12,000	\$0	\$0	\$0	\$0	\$0	\$0
Regular	71/81	CHART REVIEW	-\$580	\$0	-\$580	\$0	-\$1,475	\$0	-\$1,475	\$0	-\$895	\$0	-\$895	\$0
Regular	72/83	INTERIM AND FINAL COST SETTLEMENTS - SMHS	-\$70,714	\$39,385	-\$110,099	\$0	-\$41,760	\$27,777	-\$69,537	\$0	\$28,954	-\$11,608	\$40,562	\$0
Regular	204/72	ELIMINATION OF STATE MAXIMUM RATES	\$251,991	\$0	\$126,564	\$125,427	\$251,991	\$0	\$126,564	\$125,427	\$0	\$0	\$0	\$0
Regular	245/76	INVESTMENT IN MENTAL HEALTH WELLNESS	\$24,800	\$0	\$24,800	\$0	\$12,400	\$0	\$12,400	\$0	-\$12,400	\$0	-\$12,400	\$0
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$289,887	\$0	\$145,288	\$144,599	\$289,887	\$0	\$145,288	\$144,599	\$0	\$0	\$0	\$0
Other	9/7	SMH MAA	\$45,291	\$0	\$26,436	\$18,855	\$41,226	\$0	\$25,053	\$16,173	-\$4,065	\$0	-\$1,383	-\$2,682
Other	10/14	COUNTY UR & QA ADMIN	\$25,957	\$0	\$16,901	\$9,056	\$25,957	\$0	\$16,901	\$9,056	\$0	\$0	\$0	\$0
Other	11/5	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$26,641	\$0	\$26,641	\$0	\$47,779	\$0	\$47,779	\$0	-\$21,138	\$0	\$21,138	\$0
SPECIALTY MENTAL HEALTH TOTAL			\$3,323,835	\$33,385	\$1,640,446	\$1,650,004	\$3,247,245	\$28,981	\$1,624,436	\$1,593,828	-\$76,590	-\$4,404	-\$16,010	-\$56,176

Fiscal Year 2013-14 November 2013 Estimate Compared to Fiscal Year 2014-15 November 2013 Estimate														
POLICY CHG.		November 2013 Est. for FY 2013-14				November 2013 Est. for FY 2014-15				DIFFERENCE				
TYPE	NO.	DESCRIPTION	TF	GF	FFP	CF ⁽¹⁾	TF	GF	FFP	CF ⁽¹⁾	TF	GF	FFP	CF ⁽¹⁾
Base	224/69	SMHS FOR CHILDREN	\$1,465,995	\$0	\$737,167	\$728,828	\$1,526,500	\$0	\$767,594	\$758,906	\$60,505	\$0	\$30,427	\$30,078
Base	225/70	SMHS FOR ADULTS	\$1,010,693	\$0	\$505,347	\$505,346	\$1,031,685	\$0	\$515,843	\$515,842	\$20,992	\$0	\$10,497	\$10,496
Regular	61/71	SPECIALTY MENTAL HEALTH SVCS SUPP REIMBURSEMENT ⁽²⁾	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Regular	62/75	HEALTHY FAMILIES - SED	\$28,609	\$0	\$18,596	\$10,013	\$27,973	\$0	\$18,182	\$9,791	-\$636	\$0	-\$414	-\$222
Regular	63/74	KATIE A. V. DIANA BONTA	\$53,502	\$0	\$26,751	\$26,751	\$37,986	\$0	\$18,993	\$18,993	-\$15,516	\$0	-\$7,758	-\$7,758
Regular	64/73	TRANSITION OF HFP - SMH SERVICES	\$63,901	\$0	\$41,536	\$22,365	\$65,430	\$0	\$42,529	\$22,900	\$1,529	\$0	\$994	\$535
Regular	65/78	SOLANO COUNTY SMHS REALIGNMENT CARVE-OUT	\$4,540	\$0	\$2,270	\$2,270	\$4,540	\$0	\$2,270	\$2,270	\$0	\$0	\$0	\$0
Regular	66/77	OVER ONE-YEAR CLAIMS	\$6,000	\$0	\$3,000	\$3,000	\$6,000	\$0	\$3,000	\$3,000	\$0	\$0	\$0	\$0
Regular	68/79	SISKIYOU COUNTY MENTAL HEALTH PLAN OVERPAYMENT ⁽³⁾	\$0	\$7,204	-\$7,204	\$0	\$0	\$0	\$0	\$0	\$0	-\$7,204	\$7,204	\$0
Regular	69/80	IMD ANCILLARY SERVICES	\$0	\$6,000	-\$6,000	\$0	\$0	\$6,000	-\$6,000	\$0	\$0	\$0	\$0	\$0
Regular	70/82	REIMBURSEMENT IN IMD ANCILLARY SERVICES COSTS	-\$12,000	-\$12,000	\$0	\$0	-\$12,000	-\$12,000	\$0	\$0	\$0	\$0	\$0	\$0
Regular	71/81	CHART REVIEW	-\$1,475	\$0	-\$1,475	\$0	-\$418	\$0	-\$418	\$0	\$1,057	\$0	\$1,057	\$0
Regular	72/83	INTERIM AND FINAL COST SETTLEMENTS - SMHS	-\$41,760	\$27,777	-\$69,537	\$0	\$0	\$0	\$0	\$0	\$41,760	-\$27,777	\$69,537	\$0
Regular	204/72	ELIMINATION OF STATE MAXIMUM RATES	\$251,991	\$0	\$126,564	\$125,427	\$271,375	\$0	\$136,100	\$135,075	\$19,384	\$0	\$9,536	\$9,648
Regular	245/76	INVESTMENT IN MENTAL HEALTH WELLNESS	\$12,400	\$0	\$12,400	\$0	\$24,800	\$0	\$24,800	\$0	\$12,400	\$0	\$12,400	\$0
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$289,887	\$0	\$145,288	\$144,599	\$325,444	\$0	\$163,042	\$162,402	\$35,557	\$0	\$17,754	\$17,803
Other	9/7	SMH MAA	\$41,226	\$0	\$25,053	\$16,173	\$43,609	\$0	\$26,501	\$17,108	\$2,383	\$0	\$1,448	\$935
Other	10/14	COUNTY UR & QA ADMIN	\$25,957	\$0	\$16,901	\$9,056	\$26,740	\$0	\$17,411	\$9,329	\$783	\$0	\$510	\$273
Other	11/5	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$47,779	\$0	\$47,779	\$0	\$13,321	\$0	\$13,321	\$0	-\$34,458	\$0	-\$34,458	\$0
SPECIALTY MENTAL HEALTH TOTAL			\$3,247,245	\$28,981	\$1,624,436	\$1,593,828	\$3,392,985	-\$6,000	\$1,743,169	\$1,655,616	\$145,740	-\$34,981	\$118,732	\$61,789

Notes:

(1) County Funds (CF)

(2) The methodology for estimating the SMHS Supplemental Reimbursement costs is a cash-based approach to reflect the actual estimate of FFP expenditures in the year they will occur. These costs are for services from January 2009 through June 2012 and, as such, are not reflected in the accrual estimate.

(3) Siskiyou County will reimburse the Department \$200,000 General Fund (GF) annually, which began August 2012. As a result, of the total FFP repayment of \$7,204,000 that the Department will make in FYs 2013-14, 2014-15, \$7,004,000 will be paid from the Department's GF.

(In thousands)								
Children								
POLICY CHANGE			May 2013 Est for FY 2013-14		Nov. 2013 Est for FY 2013-14		DIFFERENCE	
TYPE	NO.	DESCRIPTION	GF	FFP	GF	FFP	GF	FFP
Base	224/69	SMHS FOR CHILDREN	\$ -	\$ 775,685	\$ -	\$ 728,307	\$ -	\$ (47,378)
Base	225/70	SMHS FOR ADULTS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	61/71	SPECIALTY MENTAL HEALTH SVCS SUPP REIMBURSEMENT	\$ -	\$ 146,100	\$ -	\$ 146,100	\$ -	\$ -
Regular	62/75	HEALTHY FAMILIES - SED	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	63/74	KATIE A. V. DIANA BONTA	\$ -	\$ 23,161	\$ -	\$ 27,955	\$ -	\$ 4,794
Regular	64/73	TRANSITION OF HFP - SMH SERVICES	\$ -	\$ 32,731	\$ -	\$ 32,619	\$ -	\$ (112)
Regular	65/78	SOLANO COUNTY SMHS REALIGNMENT CARVE-OUT	\$ -	\$ 1,911	\$ -	\$ 1,567	\$ -	\$ (344)
Regular	66/77	OVER ONE-YEAR CLAIMS	\$ -	\$ 1,205	\$ -	\$ 1,205	\$ -	\$ -
Regular	68/79	SISKIYOU COUNTY MENTAL HEALTH PLAN OVERPAYMENT	\$ -	\$ -	\$ 4,000	\$ (4,000)	\$ 4,000	\$ (4,000)
Regular	69/80	IMD ANCILLARY SERVICES	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	70/82	REIMBURSEMENT IN IMD ANCILLARY SERVICES COSTS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	71/81	CHART REVIEW	\$ -	\$ (153)	\$ -	\$ (389)	\$ -	\$ (236)
Regular	72/83	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$ 39,385	\$ (54,399)	\$ 27,777	\$ (33,747)	\$ (11,608)	\$ 20,652
Regular	204/72	ELIMINATION OF STATE MAXIMUM RATES	\$ -	\$ 61,940	\$ -	\$ 61,794	\$ -	\$ (146)
Regular	245/76	INVESTMENT IN MENTAL HEALTH WELLNESS	\$ -	\$ 10,168	\$ -	\$ 5,084	\$ -	\$ (5,084)
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$ -	\$ 87,884	\$ -	\$ 86,117	\$ -	\$ (1,767)
Other	9/7	SMH MAA	\$ -	\$ 15,272	\$ -	\$ 17,568	\$ -	\$ 2,296
Other	10/14	COUNTY UR & QA ADMIN	\$ -	\$ 10,467	\$ -	\$ 10,317	\$ -	\$ (150)
Other	11/5	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$ -	\$ 14,936	\$ -	\$ 29,639	\$ -	\$ 14,703
Total Children			\$ 39,385	\$ 1,126,908	\$ 31,777	\$ 1,110,136	\$ (7,608)	\$ (16,772)
Adults								
POLICY CHANGE			May 2013 Est for FY 2013-14		Nov. 2013 Est for FY 2013-14		DIFFERENCE	
TYPE	NO.	DESCRIPTION	GF	FFP	GF	FFP	GF	FFP
Base	224/69	SMHS FOR CHILDREN	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Base	225/70	SMHS FOR ADULTS	\$ -	\$ 515,510	\$ -	\$ 502,241	\$ -	\$ (13,269)
Regular	61/71	SPECIALTY MENTAL HEALTH SVCS SUPP REIMBURSEMENT	\$ -	\$ 147,719	\$ -	\$ 147,719	\$ -	\$ -
Regular	62/75	HEALTHY FAMILIES - SED	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	63/74	KATIE A. V. DIANA BONTA	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	64/73	TRANSITION OF HFP - SMH SERVICES	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	65/78	SOLANO COUNTY SMHS REALIGNMENT CARVE-OUT	\$ -	\$ 858	\$ -	\$ 703	\$ -	\$ (155)
Regular	66/77	OVER ONE-YEAR CLAIMS	\$ -	\$ 1,795	\$ -	\$ 1,795	\$ -	\$ -
Regular	68/79	SISKIYOU COUNTY MENTAL HEALTH PLAN OVERPAYMENT	\$ -	\$ -	\$ 3,204	\$ (3,204)	\$ 3,204	\$ (3,204)
Regular	69/80	IMD ANCILLARY SERVICES	\$ 6,000	\$ (6,000)	\$ 6,000	\$ (6,000)	\$ -	\$ -
Regular	70/82	REIMBURSEMENT IN IMD ANCILLARY SERVICES COSTS	\$ (12,000)	\$ -	\$ (12,000)	\$ -	\$ -	\$ -
Regular	71/81	CHART REVIEW	\$ -	\$ (427)	\$ -	\$ (1,086)	\$ -	\$ (659)
Regular	72/83	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$ -	\$ (48,542)	\$ -	\$ (29,655)	\$ -	\$ 18,887
Regular	204/72	ELIMINATION OF STATE MAXIMUM RATES	\$ -	\$ 62,544	\$ -	\$ 62,396	\$ -	\$ (148)
Regular	245/76	INVESTMENT IN MENTAL HEALTH WELLNESS	\$ -	\$ 14,632	\$ -	\$ 7,316	\$ -	\$ (7,316)
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$ -	\$ 52,827	\$ -	\$ 51,174	\$ -	\$ (1,653)
Other	9/7	SMH MAA	\$ -	\$ 9,237	\$ -	\$ 10,625	\$ -	\$ 1,388
Other	10/14	COUNTY UR & QA ADMIN	\$ -	\$ 6,331	\$ -	\$ 6,241	\$ -	\$ (90)
Other	11/5	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$ -	\$ 9,035	\$ -	\$ 15,210	\$ -	\$ 6,175
Total Adults			\$ (6,000)	\$ 765,519	\$ (2,796)	\$ 765,475	\$ 3,204	\$ (44)

(In thousands)								
Healthy Families Program								
POLICY CHANGE			May 2013 Est for FY 2013-14		Nov. 2013 Est for FY 2013-14		DIFFERENCE	
TYPE	NO.	DESCRIPTION	GF	FFP	GF	FFP	GF	FFP
Base	224/69	SMHS FOR CHILDREN	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Base	225/70	SMHS FOR ADULTS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	61/71	SPECIALTY MENTAL HEALTH SVCS SUPP REIMBURSEMENT	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	62/75	HEALTHY FAMILIES - SED	\$ -	\$ 22,250	\$ -	\$ 18,731	\$ -	\$ (3,519)
Regular	63/74	KATIE A. V. DIANA BONTA	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	64/73	TRANSITION OF HFP - SMH SERVICES	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	65/78	SOLANO COUNTY SMHS REALIGNMENT CARVE-OUT	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	66/77	OVER ONE-YEAR CLAIMS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	68/79	SISKIYOU COUNTY MENTAL HEALTH PLAN OVERPAYMENT	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	69/80	IMD ANCILLARY SERVICES	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	70/82	REIMBURSEMENT IN IMD ANCILLARY SERVICES COSTS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	71/81	CHART REVIEW	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	72/83	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$ -	\$ (7,158)	\$ -	\$ (6,135)	\$ -	\$ 1,023
Regular	204/72	ELIMINATION OF STATE MAXIMUM RATES	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	245/76	INVESTMENT IN MENTAL HEALTH WELLNESS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$ -	\$ 1,015	\$ -	\$ 504	\$ -	\$ (511)
Other	9/7	SMH MAA	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other	10/14	COUNTY UR & QA ADMIN	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other	11/5	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$ -	\$ 2,670	\$ -	\$ 2,930	\$ -	\$ 260
Total Healthy Families Program			\$ -	\$ 18,777	\$ -	\$ 16,030	\$ -	\$ (2,747)
Grand Total								
POLICY CHANGE			May 2013 Est for FY 2013-14		Nov. 2013 Est for FY 2013-14		DIFFERENCE	
TYPE	NO.	DESCRIPTION	GF	FFP	GF	FFP	GF	FFP
Base	224/69	SMHS FOR CHILDREN	\$ -	\$ 775,685	\$ -	\$ 728,307	\$ -	\$ (47,378)
Base	225/70	SMHS FOR ADULTS	\$ -	\$ 515,510	\$ -	\$ 502,241	\$ -	\$ (13,269)
Regular	61/71	SPECIALTY MENTAL HEALTH SVCS SUPP REIMBURSEMENT	\$ -	\$ 293,819	\$ -	\$ 293,819	\$ -	\$ -
Regular	62/75	HEALTHY FAMILIES - SED	\$ -	\$ 22,250	\$ -	\$ 18,731	\$ -	\$ (3,519)
Regular	63/74	KATIE A. V. DIANA BONTA	\$ -	\$ 23,161	\$ -	\$ 27,955	\$ -	\$ 4,794
Regular	64/73	TRANSITION OF HFP - SMH SERVICES	\$ -	\$ 32,731	\$ -	\$ 32,619	\$ -	\$ (112)
Regular	65/78	SOLANO COUNTY SMHS REALIGNMENT CARVE-OUT	\$ -	\$ 2,769	\$ -	\$ 2,270	\$ -	\$ (499)
Regular	66/77	OVER ONE-YEAR CLAIMS	\$ -	\$ 3,000	\$ -	\$ 3,000	\$ -	\$ -
Regular	68/79	SISKIYOU COUNTY MENTAL HEALTH PLAN OVERPAYMENT	\$ -	\$ -	\$ 7,204	\$ (7,204)	\$ 7,204	\$ (7,204)
Regular	69/80	IMD ANCILLARY SERVICES	\$ 6,000	\$ (6,000)	\$ 6,000	\$ (6,000)	\$ -	\$ -
Regular	70/82	REIMBURSEMENT IN IMD ANCILLARY SERVICES COSTS	\$ (12,000)	\$ -	\$ (12,000)	\$ -	\$ -	\$ -
Regular	71/81	CHART REVIEW	\$ -	\$ (580)	\$ -	\$ (1,475)	\$ -	\$ (895)
Regular	72/83	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$ 39,385	\$ (110,099)	\$ 27,777	\$ (69,537)	\$ (11,608)	\$ 40,562
Regular	204/72	ELIMINATION OF STATE MAXIMUM RATES	\$ -	\$ 124,484	\$ -	\$ 124,190	\$ -	\$ (294)
Regular	245/76	INVESTMENT IN MENTAL HEALTH WELLNESS	\$ -	\$ 24,800	\$ -	\$ 12,400	\$ -	\$ (12,400)
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$ -	\$ 141,726	\$ -	\$ 137,795	\$ -	\$ (3,931)
Other	9/7	SMH MAA	\$ -	\$ 24,509	\$ -	\$ 28,193	\$ -	\$ 3,684
Other	10/14	COUNTY UR & QA ADMIN	\$ -	\$ 16,798	\$ -	\$ 16,558	\$ -	\$ (240)
Other	11/5	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$ -	\$ 26,641	\$ -	\$ 47,779	\$ -	\$ 21,138
Grand Total			\$ 33,385	\$ 1,911,204	\$ 28,981	\$ 1,891,641	\$ (4,404)	\$ (19,563)

(In thousands)								
Children								
POLICY CHANGE			Nov. 2013 Est for FY 2013-14		Nov. 2013 Est for FY 2014-15		DIFFERENCE	
TYPE	NO.	DESCRIPTION	GF	FFP	GF	FFP	GF	FFP
Base	224/69	SMHS FOR CHILDREN	\$ -	\$ 728,307	\$ -	\$ 758,674	\$ -	\$ 30,367
Base	225/70	SMHS FOR ADULTS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	61/71	SPECIALTY MENTAL HEALTH SVCS SUPP REIMBURSEMENT	\$ -	\$ 146,100	\$ -	\$ 53,652	\$ -	\$ (92,448)
Regular	62/75	HEALTHY FAMILIES - SED	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	63/74	KATIE A. V. DIANA BONTA	\$ -	\$ 27,955	\$ -	\$ 26,751	\$ -	\$ (1,204)
Regular	64/73	TRANSITION OF HFP - SMH SERVICES	\$ -	\$ 32,619	\$ -	\$ 41,938	\$ -	\$ 9,319
Regular	65/78	SOLANO COUNTY SMHS REALIGNMENT CARVE-OUT	\$ -	\$ 1,567	\$ -	\$ 1,567	\$ -	\$ -
Regular	66/77	OVER ONE-YEAR CLAIMS	\$ -	\$ 1,205	\$ -	\$ 1,205	\$ -	\$ -
Regular	68/79	SISKIYOU COUNTY MENTAL HEALTH PLAN OVERPAYMENT	\$ 4,000	\$ (4,000)	\$ -	\$ -	\$ (4,000)	\$ 4,000
Regular	69/80	IMD ANCILLARY SERVICES	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	70/82	REIMBURSEMENT IN IMD ANCILLARY SERVICES COSTS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	71/81	CHART REVIEW	\$ -	\$ (389)	\$ -	\$ (110)	\$ -	\$ 279
Regular	72/83	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$ 27,777	\$ (33,747)	\$ -	\$ -	\$ (27,777)	\$ 33,747
Regular	204/72	ELIMINATION OF STATE MAXIMUM RATES	\$ -	\$ 61,794	\$ -	\$ 72,990	\$ -	\$ 11,196
Regular	245/76	INVESTMENT IN MENTAL HEALTH WELLNESS	\$ -	\$ 5,084	\$ -	\$ 10,168	\$ -	\$ 5,084
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$ -	\$ 86,117	\$ -	\$ 97,704	\$ -	\$ 11,587
Other	9/7	SMH MAA	\$ -	\$ 17,568	\$ -	\$ 16,180	\$ -	\$ (1,388)
Other	10/14	COUNTY UR & QA ADMIN	\$ -	\$ 10,317	\$ -	\$ 10,719	\$ -	\$ 402
Other	11/5	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$ -	\$ 29,639	\$ -	\$ 7,921	\$ -	\$ (21,718)
Total Children			\$ 31,777	\$ 1,110,136	\$ -	\$ 1,099,359	\$ (31,777)	\$ (10,777)
Adults								
POLICY CHANGE			Nov. 2013 Est for FY 2013-14		Nov. 2013 Est for FY 2014-15		DIFFERENCE	
TYPE	NO.	DESCRIPTION	GF	FFP	GF	FFP	GF	FFP
Base	224/69	SMHS FOR CHILDREN	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Base	225/70	SMHS FOR ADULTS	\$ -	\$ 502,241	\$ -	\$ 512,977	\$ -	\$ 10,736
Regular	61/71	SPECIALTY MENTAL HEALTH SVCS SUPP REIMBURSEMENT	\$ -	\$ 147,719	\$ -	\$ 54,246	\$ -	\$ (93,473)
Regular	62/75	HEALTHY FAMILIES - SED	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	63/74	KATIE A. V. DIANA BONTA	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	64/73	TRANSITION OF HFP - SMH SERVICES	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	65/78	SOLANO COUNTY SMHS REALIGNMENT CARVE-OUT	\$ -	\$ 703	\$ -	\$ 703	\$ -	\$ -
Regular	66/77	OVER ONE-YEAR CLAIMS	\$ -	\$ 1,795	\$ -	\$ 1,795	\$ -	\$ -
Regular	68/79	SISKIYOU COUNTY MENTAL HEALTH PLAN OVERPAYMENT	\$ 3,204	\$ (3,204)	\$ -	\$ -	\$ (3,204)	\$ 3,204
Regular	69/80	IMD ANCILLARY SERVICES	\$ 6,000	\$ (6,000)	\$ 6,000	\$ (6,000)	\$ -	\$ -
Regular	70/82	REIMBURSEMENT IN IMD ANCILLARY SERVICES COSTS	\$ (12,000)	\$ -	\$ (12,000)	\$ -	\$ -	\$ -
Regular	71/81	CHART REVIEW	\$ -	\$ (1,086)	\$ -	\$ (308)	\$ -	\$ 778
Regular	72/83	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$ -	\$ (29,655)	\$ -	\$ -	\$ -	\$ 29,655
Regular	204/72	ELIMINATION OF STATE MAXIMUM RATES	\$ -	\$ 62,396	\$ -	\$ 60,487	\$ -	\$ (1,909)
Regular	245/76	INVESTMENT IN MENTAL HEALTH WELLNESS	\$ -	\$ 7,316	\$ -	\$ 14,632	\$ -	\$ 7,316
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$ -	\$ 51,174	\$ -	\$ 58,060	\$ -	\$ 6,886
Other	9/7	SMH MAA	\$ -	\$ 10,625	\$ -	\$ 9,786	\$ -	\$ (839)
Other	10/14	COUNTY UR & QA ADMIN	\$ -	\$ 6,241	\$ -	\$ 6,484	\$ -	\$ 243
Other	11/5	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$ -	\$ 15,210	\$ -	\$ 4,065	\$ -	\$ (11,145)
Total Adults			\$ (2,796)	\$ 765,475	\$ (6,000)	\$ 716,927	\$ (3,204)	\$ (48,548)

(In thousands)								
Healthy Families Program								
POLICY CHANGE			Nov. 2013 Est for FY 2013-14		Nov. 2013 Est for FY 2014-15		DIFFERENCE	
TYPE	NO.	DESCRIPTION	GF	FFP	GF	FFP	GF	FFP
Base	224/69	SMHS FOR CHILDREN	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Base	225/70	SMHS FOR ADULTS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	61/71	SPECIALTY MENTAL HEALTH SVCS SUPP REIMBURSEMENT	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	62/75	HEALTHY FAMILIES - SED	\$ -	\$ 18,731	\$ -	\$ 18,307	\$ -	\$ (424)
Regular	63/74	KATIE A. V. DIANA BONTA	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	64/73	TRANSITION OF HFP - SMH SERVICES	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	65/78	SOLANO COUNTY SMHS REALIGNMENT CARVE-OUT	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	66/77	OVER ONE-YEAR CLAIMS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	68/79	SISKIYOU COUNTY MENTAL HEALTH PLAN OVERPAYMENT	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	69/80	IMD ANCILLARY SERVICES	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	70/82	REIMBURSEMENT IN IMD ANCILLARY SERVICES COSTS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	71/81	CHART REVIEW	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	72/83	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$ -	\$ (6,135)	\$ -	\$ -	\$ -	\$ 6,135
Regular	204/72	ELIMINATION OF STATE MAXIMUM RATES	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Regular	245/76	INVESTMENT IN MENTAL HEALTH WELLNESS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$ -	\$ 504	\$ -	\$ 21	\$ -	\$ (483)
Other	9/7	SMH MAA	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other	10/14	COUNTY UR & QA ADMIN	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other	11/5	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$ -	\$ 2,930	\$ -	\$ 1,335	\$ -	\$ (1,595)
Total Healthy Families Program			\$ -	\$ 16,030	\$ -	\$ 19,663	\$ -	\$ 3,633
Grand Total								
POLICY CHANGE			Nov. 2013 Est for FY 2013-14		Nov. 2013 Est for FY 2014-15		DIFFERENCE	
TYPE	NO.	DESCRIPTION	GF	FFP	GF	FFP	GF	FFP
Base	224/69	SMHS FOR CHILDREN	\$ -	\$ 728,307	\$ -	\$ 758,674	\$ -	\$ 30,367
Base	225/70	SMHS FOR ADULTS	\$ -	\$ 502,241	\$ -	\$ 512,977	\$ -	\$ 10,736
Regular	61/71	SPECIALTY MENTAL HEALTH SVCS SUPP REIMBURSEMENT	\$ -	\$ 293,819	\$ -	\$ 107,898	\$ -	\$ (185,921)
Regular	62/75	HEALTHY FAMILIES - SED	\$ -	\$ 18,731	\$ -	\$ 18,307	\$ -	\$ (424)
Regular	63/74	KATIE A. V. DIANA BONTA	\$ -	\$ 27,955	\$ -	\$ 26,751	\$ -	\$ (1,204)
Regular	64/73	TRANSITION OF HFP - SMH SERVICES	\$ -	\$ 32,619	\$ -	\$ 41,938	\$ -	\$ 9,319
Regular	65/78	SOLANO COUNTY SMHS REALIGNMENT CARVE-OUT	\$ -	\$ 2,270	\$ -	\$ 2,270	\$ -	\$ -
Regular	66/77	OVER ONE-YEAR CLAIMS	\$ -	\$ 3,000	\$ -	\$ 3,000	\$ -	\$ -
Regular	68/79	SISKIYOU COUNTY MENTAL HEALTH PLAN OVERPAYMENT	\$ 7,204	\$ (7,204)	\$ -	\$ -	\$ (7,204)	\$ 7,204
Regular	69/80	IMD ANCILLARY SERVICES	\$ 6,000	\$ (6,000)	\$ 6,000	\$ (6,000)	\$ -	\$ -
Regular	70/82	REIMBURSEMENT IN IMD ANCILLARY SERVICES COSTS	\$ (12,000)	\$ -	\$ (12,000)	\$ -	\$ -	\$ -
Regular	71/81	CHART REVIEW	\$ -	\$ (1,475)	\$ -	\$ (418)	\$ -	\$ 1,057
Regular	72/83	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$ 27,777	\$ (69,537)	\$ -	\$ -	\$ (27,777)	\$ 69,537
Regular	204/72	ELIMINATION OF STATE MAXIMUM RATES	\$ -	\$ 124,190	\$ -	\$ 133,477	\$ -	\$ 9,287
Regular	245/76	INVESTMENT IN MENTAL HEALTH WELLNESS	\$ -	\$ 12,400	\$ -	\$ 24,800	\$ -	\$ 12,400
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$ -	\$ 137,795	\$ -	\$ 155,785	\$ -	\$ 17,990
Other	9/7	SMH MAA	\$ -	\$ 28,193	\$ -	\$ 25,966	\$ -	\$ (2,227)
Other	10/14	COUNTY UR & QA ADMIN	\$ -	\$ 16,558	\$ -	\$ 17,203	\$ -	\$ 645
Other	11/5	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$ -	\$ 47,779	\$ -	\$ 13,321	\$ -	\$ (34,458)
Grand Total			\$ 28,981	\$ 1,891,641	\$ (6,000)	\$ 1,835,949	\$ (34,981)	\$ (55,692)

(In Thousands)			
	TF	FFP	CF
FISCAL YEAR 2012-13 APPROPRIATION			
Forecast of Approved Claims	\$1,279,831	\$639,915	\$540,222
Less County Baseline	\$0	\$0	\$68,840
Less 10% County Share of Cost Above Baseline	\$0	\$0	\$30,854
Subtotal Approved Claims	\$1,279,831	\$639,915	\$639,916
Katie A. Lawsuit	\$53,502	\$26,751	\$26,751
Healthy Families Program Transition to Medi-Cal	\$49,304	\$32,047	\$17,257
Total Fiscal Year 2012-13 Appropriation	\$1,382,637	\$698,713	\$683,924
FISCAL YEAR 2013-14 MAY ESTIMATE			
Policy Change 224 - SMHS for Children	\$1,550,977	\$779,998	\$770,979
Less FFS Inpatient	(\$71,084)	(\$36,038)	(\$35,046)
Less Rates Elimination Adjustment ⁽¹⁾	(\$41,459)	(\$20,842)	(\$20,617)
Policy Change 224 - Subtotal	\$1,438,434	\$723,118	\$715,316
Policy Change 63 - Katie A. v. Bontá	\$53,502	\$26,751	\$26,751
Policy Change 64 - Transition of HFP - SMHS	\$63,901	\$41,536	\$22,365
Total Fiscal Year 2013-14 May Estimate	\$1,555,837	\$791,405	\$764,432
FISCAL YEAR 2013-14 NOVEMBER ESTIMATE			
Policy Change 69 - SMHS for Children	\$1,465,995	\$737,167	\$728,828
Less FFS Inpatient	(\$72,547)	(\$36,509)	(\$36,038)
Less Rates Elimination Adjustment ⁽²⁾	(\$51,989)	(\$26,142)	(\$25,847)
Policy Change 69 - Subtotal	\$1,341,459	\$674,516	\$666,943
Policy Change 74 - Katie A. v. Bontá	\$53,502	\$26,751	\$26,751
Policy Change 73 - Transition of HFP - SMHS	\$63,901	\$41,536	\$22,365
Total Fiscal Year 2013-14 November Estimate	\$1,458,862	\$742,803	\$716,059

(1) The rates elimination adjustment estimates the affect of eliminating the statewide maximum allowance rates as described in regular PC 72. The adjustment was calculated by comparing the approved claims by service type and county to the approved units multiplied by the statewide maximum allowance rate that would have been in affect in Fiscal Year 2012-13 for each service type. The SMA adjustment is equal to the approved dollars in excess of the approved units multiplied by the statewide maximum allowance rate by service type and county. The difference was than increased by the percentage change in the SD/MC forecast from FY 2012-13 to FY 2013-14. The estimate is based on approved claims through March 31, 2013.

(2) The rates elimination adjustment estimates the affect of eliminating the statewide maximum allowance rates in regular PC 72. The adjustment was calculated by comparing the approved claims by service type and county to the approved units multiplied by the statewide maximum allowance rate that would have been in affect in Fiscal Year 2012-13 for each service type. The SMA adjustment is equal to the approved dollars in excess of the approved units multiplied by the SMA rate by service type and county. The difference was increased by the percentage change in the SD/MC forecast from FY 2012-13 to FY 2013-14. The estimate is based on approved claims through June 30, 2013.

(In Thousands)			
	TF	FFP	CF
FISCAL YEAR 2013-14 MAY ESTIMATE			
Policy Change 224 - SMHS for Children	\$1,550,977	\$779,998	\$770,979
Less FFS Inpatient	(\$71,084)	(\$36,038)	(\$35,046)
Less Rates Elimination Adjustment ⁽¹⁾	(\$41,459)	(\$20,842)	(\$20,617)
Policy Change 224 - Subtotal	\$1,438,434	\$723,118	\$715,316
Policy Change 63 - Katie A. v. Bontá	\$53,502	\$26,751	\$26,751
Policy Change 64 - Transition of HFP - SMHS	\$63,901	\$41,536	\$22,365
Total Fiscal Year 2013-14 May Estimate	<u>\$1,555,837</u>	<u>\$791,405</u>	<u>\$764,432</u>
FISCAL YEAR 2013-14 NOVEMBER ESTIMATE			
Policy Change 69 - SMHS for Children	\$1,465,995	\$737,167	\$728,828
Less FFS Inpatient	(\$72,547)	(\$36,509)	(\$36,038)
Less Rates Elimination Adjustment ⁽²⁾	(\$51,989)	(\$26,142)	(\$25,847)
Policy Change 69 - Subtotal	\$1,341,459	\$674,516	\$666,943
Policy Change 74 - Katie A. v. Bontá	\$53,502	\$26,751	\$26,751
Policy Change 73 - Transition of HFP - SMHS	\$63,901	\$41,536	\$22,365
Total Fiscal Year 2013-14 November Estimate	<u>\$1,458,862</u>	<u>\$742,803</u>	<u>\$716,059</u>
DIFFERENCE (NOVEMBER ESTIMATE LESS MAY ESTIMATE)			
Policy Change 69/224 - SMHS for Children	(\$84,982)	(\$42,831)	(\$42,151)
Less FFS Inpatient	(\$1,463)	(\$471)	(\$992)
Less Rates Elimination Adjustment ^(1,2)	(\$10,530)	(\$5,300)	(\$5,230)
Policy Change 69/224 - Subtotal	(\$96,975)	(\$48,602)	(\$48,373)
Policy Change 74/63 - Katie A. v. Bontá	\$0	\$0	\$0
Policy Change 73/64 - Transition of HFP - SMHS	\$0	\$0	\$0
Total Fiscal Year 2013-14 November Estimate	<u>(\$96,975)</u>	<u>(\$48,602)</u>	<u>(\$48,373)</u>

(1) The rates elimination adjustment estimates the affect of eliminating the statewide maximum allowance rates as described in regular PC 72. The adjustment was calculated by comparing the approved claims by service type and county to the approved units multiplied by the statewide maximum allowance rate that would have been in affect in Fiscal Year 2012-13 for each service type. The SMA adjustment is equal to the approved dollars in excess of the approved units multiplied by the statewide maximum allowance rate by service type and county. The difference was than increased by the percentage change in the SD/MC forecast from FY 2012-13 to FY 2013-14. The estimate is based on approved claims through March 31, 2013 with dates of service from July 1, 2012 through December 31, 2012.

(2) The rates elimination adjustment estimates the affect of eliminating the statewide maximum allowance rates in regular PC 72. The adjustment was calculated by comparing the approved claims by service type and county to the approved units multiplied by the statewide maximum allowance rate that would have been in affect in Fiscal Year 2012-13 for each service type. The SMA adjustment is equal to the approved dollars in excess of the approved units multiplied by the SMA rate by service type and county. The difference was increased by the percentage change in the SD/MC forecast from FY 2012-13 to FY 2013-14. The estimate is based on approved claims through June 30, 2013.

(In Thousands)			
	TF	FFP	CF
FISCAL YEAR 2013-14 NOVEMBER ESTIMATE			
Policy Change 69 - SMHS for Children	\$1,465,995	\$737,167	\$728,828
Less FFS Inpatient	(\$72,547)	(\$36,509)	(\$36,038)
Less Rates Elimination Adjustment ⁽¹⁾	(\$51,989)	(\$26,142)	(\$25,847)
Policy Change 69 - Subtotal	\$1,341,459	\$674,516	\$666,943
Policy Change 74 - Katie A. v. Bontá	\$53,502	\$26,751	\$26,751
Policy Change 73 - Transition of HFP - SMHS	\$63,901	\$41,536	\$22,365
Total Fiscal Year 2013-14 May Estimate	<u>\$1,458,862</u>	<u>\$742,803</u>	<u>\$716,059</u>
FISCAL YEAR 2014-15 NOVEMBER ESTIMATE			
Policy Change 69 - SMHS for Children	\$1,526,500	\$767,594	\$758,906
Less FFS Inpatient	(\$77,512)	(\$39,007)	(\$38,505)
Less Rates Elimination Adjustment ⁽¹⁾	(\$54,061)	(\$27,184)	(\$26,877)
Policy Change 69 - Subtotal	\$1,394,927	\$701,403	\$693,524
Policy Change 74 - Katie A. v. Bontá	\$53,502	\$26,751	\$26,751
Policy Change 73 - Transition of HFP - SMHS	\$64,430	\$41,880	\$22,550
Total Fiscal Year 2013-14 November Estimate	<u>\$1,512,859</u>	<u>\$770,034</u>	<u>\$742,825</u>
DIFFERENCE (FISCAL YEAR 2014-15 LESS FISCAL YEAR 2013-14)			
Policy Change 69 - SMHS for Children	\$60,505	\$30,427	\$30,078
Less FFS Inpatient	(\$4,965)	(\$2,498)	(\$2,467)
Less Rates Elimination Adjustment ⁽¹⁾	(\$2,072)	(\$1,042)	(\$1,030)
Policy Change 69 - Subtotal	\$53,468	\$26,887	\$26,581
Policy Change 74 - Katie A. v. Bontá	\$0	\$0	\$0
Policy Change 73 - Transition of HFP - SMHS	\$529	\$344	\$185
Total Fiscal Year 2013-14 November Estimate	<u>\$53,997</u>	<u>\$27,231</u>	<u>\$26,766</u>

(1) The rates elimination adjustment estimates the affect of eliminating the statewide maximum allowance rates in regular PC 72. The adjustment was calculated by comparing the approved claims by service type and county to the approved units multiplied by the statewide maximum allowance rate that would have been in affect in Fiscal Year 2012-13 for each service type. The SMA adjustment is equal to the approved dollars in excess of the approved units multiplied by the SMA rate by service type and county. For Fiscal Year 2013-14, the difference was increased by the percentage change in the SD/MC forecast from FY 2012-13 to FY 2013-14. For Fiscal Year 2014-15, the adjustment for Fiscal Year 2013-14 was increased by the percentage change in the SD/MC forecast from FY 2013-14 to FY 2014-15. The estimate is based on approved claims through June 30, 2013.

(In Thousands)			
	TF	FFP	CF
FISCAL YEAR 2012-13 APPROPRIATION			
Mental Health Managed Care Program			
Mental Health Managed Care - Psychiatric Inpatient Services	\$447,642	\$226,092	\$221,550
Mental Health Managed Care - Mental Health Professional Services	\$71,947	\$36,121	\$35,826
TBS Administration	\$912	\$456	\$456
BCCTP	\$60	\$0	\$60
FY 2009-10 Budget Act Reduction	(\$128,000)	(\$64,000)	(\$64,000)
Subtotal	\$392,561	\$198,669	\$193,892
Other Short-Doyle/Medi-Cal Reimbursements			
Total Direct Service Forecast	\$788,084	\$394,042	\$394,042
Less Mental Health Managed Care Professional Services Reimbursement	(\$36,121)	(\$36,121)	\$0
Less Rates Elimination Adjustment ⁽¹⁾	\$0	\$0	\$0
Subtotal	\$751,963	\$357,921	\$394,042
FY 2012-13 Appropriation	<u>\$1,144,524</u>	<u>\$556,590</u>	<u>\$587,934</u>
MAY 2013 ESTIMATE FOR FISCAL YEAR 2013-14			
Mental Health Managed Care Program			
Psychiatric Inpatient Services			
PC 224 - FFS Inpatient - Children	\$66,820	\$33,604	\$33,216
PC 225 - FFS Inpatient Adults	\$143,624	\$71,812	\$71,812
Psychiatric Inpatient Services - Subtotal	<u>\$210,444</u>	<u>\$105,416</u>	<u>\$105,028</u>
Subtotal	\$210,444	\$105,416	\$105,028
Other Short-Doyle/Medi-Cal Reimbursements			
Total Direct Service Forecast	\$860,332	\$430,166	\$430,166
Less Rates Elimination Adjustment ⁽²⁾	(\$38,648)	(\$19,324)	(\$19,324)
Subtotal	\$821,684	\$410,842	\$410,842
May 2013 Estimate for Fiscal Year 2013-14	<u>\$1,032,128</u>	<u>\$516,258</u>	<u>\$515,870</u>
NOVEMBER 2013 ESTIMATE FOR FISCAL YEAR 2013-14			
Mental Health Managed Care Program			
Psychiatric Inpatient Services			
PC 69 - FFS Inpatient - Children	\$72,547	\$36,509	\$36,038
PC 70 - FFS Inpatient - Adults	\$146,863	\$73,432	\$73,431
Psychiatric Inpatient Services - Subtotal	<u>\$219,410</u>	<u>\$109,941</u>	<u>\$109,469</u>
Subtotal	\$219,410	\$109,941	\$109,469
Other Short-Doyle/Medi-Cal Reimbursements			
Total Direct Services Forecast	\$863,830	\$431,915	\$431,915
Less Rates Elimination Adjustment ⁽³⁾	(\$31,924)	(\$15,962)	(\$15,962)
Subtotal	\$831,906	\$415,953	\$415,953
November 2013 Estimate for Fiscal Year 2013-14	<u>\$1,051,316</u>	<u>\$525,894</u>	<u>\$525,422</u>

(1) Claims for reimbursement were limited to statewide maximum allowance rates through service Fiscal Year 2011-12. Since May 2012 Estimate for the Fiscal Year 2012-13 appropriation was based upon claims data prior to Fiscal Year 2012-13, there is no SMA adjustment.

(2) The rate elimination adjustment estimates the affect of elimination the statewide maximum allowance rates as described in PC 72. The adjustment was calculated by comparing the change in the cost per unit by service type for the first quarter of Fiscal Year 2012-13 to the last quarter of Fiscal Year 2011-12 increased by a cost of living factor. The difference in the cost per unit was multiplied by the total units of service by service type to determine the SMA adjustment. The estimate was based upon claims received through March 31, 2013.

(3) The rates elimination adjustment estimates the affect of eliminating the statewide maximum allowance rates as described in regular PC 72. The adjustment is calculated by comparing the approved claims by service type and county to the approved units multiplied by the statewide maximum allowance rate that would have been in affect in Fiscal Year 2012-13 for each service type. The SMA adjustment is equal to the approved dollars in excess of the approved units multiplied by the statewide maximum allowance rate by service type and county. For The difference was increased by the percentage change in the SD/MC forecast from FY 2012-13 to FY 2013-14. The estimate was based upon claims received through June 30, 2013.

(In Thousands)	TF	FFP	CF
MAY 2013 ESTIMATE FOR FISCAL YEAR 2013-14			
Mental Health Managed Care Program			
Psychiatric Inpatient Services			
PC 224 - FFS Inpatient - Children	\$66,820	\$33,604	\$33,216
PC 225 - FFS Inpatient Adults	\$143,624	\$71,812	\$71,812
Psychiatric Inpatient Services - Subtotal	\$210,444	\$105,416	\$105,028
Subtotal	\$210,444	\$105,416	\$105,028
Other Short-Doyle/Medi-Cal Reimbursements			
PC 225 - SD/MC	\$860,332	\$430,166	\$430,166
Less Rates Elimination Adjustment ⁽¹⁾	(\$38,648)	(\$19,324)	(\$19,324)
Subtotal	\$821,684	\$410,842	\$410,842
May 2013 Estimate for Fiscal Year 2013-14	<u>\$1,032,128</u>	<u>\$516,258</u>	<u>\$515,870</u>
NOVEMBER 2013 ESTIMATE FOR FISCAL YEAR 2013-14			
Mental Health Managed Care Program			
Psychiatric Inpatient Services			
PC 69 - FFS Inpatient - Children	\$72,547	\$36,509	\$36,038
PC 70 - FFS Inpatient Adults	\$146,863	\$73,432	\$73,431
Psychiatric Inpatient Services - Subtotal	\$219,410	\$109,941	\$109,469
Subtotal	\$219,410	\$109,941	\$109,469
Other Short-Doyle/Medi-Cal Reimbursements			
PC 70 - SD/MC	\$863,830	\$431,915	\$431,915
Less Rates Elimination Adjustment ⁽²⁾	(\$31,924)	(\$15,962)	(\$15,962)
Subtotal	\$831,906	\$415,953	\$415,953
May 2013 Estimate for Fiscal Year 2013-14	<u>\$1,051,316</u>	<u>\$525,894</u>	<u>\$525,422</u>
DIFFERENCE (NOVEMBER 2013 ESTIMATE LESS MAY 2013 ESTIMATE)			
Mental Health Managed Care Program			
Psychiatric Inpatient Services			
PC 69/224 - FFS Inpatient - Children	\$5,727	\$2,905	\$2,822
PC 70/225 - FFS Inpatient - Adults	\$3,239	\$1,620	\$1,619
Psychiatric Inpatient Services - Subtotal	\$8,966	\$4,525	\$4,441
Subtotal	\$8,966	\$4,525	\$4,441
Other Short-Doyle/Medi-Cal Reimbursements			
PC 70/225 - SD/MC	\$3,498	\$1,749	\$1,749
Less Rates Elimination Adjustment	\$6,724	\$3,362	\$3,362
Subtotal	\$10,222	\$5,111	\$5,111
November 2013 Estimate for Fiscal Year 2013-14	<u>\$19,188</u>	<u>\$9,636</u>	<u>\$9,552</u>

(1) The rate elimination adjustment estimates the affect of elimination the statewide maximum allowance rates as described in PC 72. The adjustment was calculated by comparing the change in the cost per unit by service type for the first quarter of Fiscal Year 2012-13 to the last quarter of Fiscal Year 2011-12 increased by a cost of living factor. The difference in the cost per unit was multiplied by the total units of service by service type to determine the SMA adjustment. The estimate was based upon claims received through March 31, 2013.

(2) The rates elimination adjustment estimates the affect of eliminating the statewide maximum allowance rates as described in regular PC 72. The adjustment is calculated by comparing the approved claims by service type and county to the approved units multiplied by the statewide maximum allowance rate that would have been in affect in Fiscal Year 2012-13 for each service type. The SMA adjustment is equal to the approved dollars in excess of the approved units multiplied by the statewide maximum allowance rate by service type and county. For The difference was increased by the percentage change in the SD/MC forecast from FY 2012-13 to FY 2013-14. The estimate was based upon claims received through June 30, 2013.

(In Thousands)			
	TF	FFP	CF
NOVEMBER 2013 ESTIMATE FOR FISCAL YEAR 2013-14			
Mental Health Managed Care Program			
Psychiatric Inpatient Services			
PC 224 - FFS Inpatient - Children	\$72,547	\$36,509	\$36,038
PC 225 - FFS Inpatient Adults	\$146,863	\$73,432	\$73,431
Psychiatric Inpatient Services - Subtotal	\$219,410	\$109,941	\$109,469
Subtotal	\$219,410	\$109,941	\$109,469
Other Short-Doyle/Medi-Cal Reimbursements			
PC 225 - SD/MC	\$863,830	\$431,915	\$431,915
Less Rates Elimination Adjustment ⁽¹⁾	(\$31,924)	(\$15,962)	(\$15,962)
Subtotal	\$831,906	\$415,953	\$415,953
May 2013 Estimate for Fiscal Year 2013-14	<u>\$1,051,316</u>	<u>\$525,894</u>	<u>\$525,422</u>
NOVEMBER 2013 ESTIMATE FOR FISCAL YEAR 2014-15			
Mental Health Managed Care Program			
Psychiatric Inpatient Services			
PC 69 - FFS Inpatient - Children	\$77,512	\$39,007	\$38,505
PC 70 - FFS Inpatient Adults	\$153,570	\$76,785	\$76,785
Psychiatric Inpatient Services - Subtotal	\$231,082	\$115,792	\$115,290
Subtotal	\$231,082	\$115,792	\$115,290
Other Short-Doyle/Medi-Cal Reimbursements			
PC 70 - SD/MC	\$878,115	\$439,058	\$439,058
Less Rates Elimination Adjustment ⁽¹⁾	(\$32,545)	(\$16,273)	(\$16,273)
Subtotal	\$845,571	\$422,785	\$422,785
May 2013 Estimate for Fiscal Year 2013-14	<u>\$1,076,653</u>	<u>\$538,577</u>	<u>\$538,075</u>
DIFFERENCE (FISCAL YEAR 2014-15 LESS FISCAL YEAR 2013-14)			
Mental Health Managed Care Program			
Psychiatric Inpatient Services			
PC 69/224 - FFS Inpatient - Children	\$4,965	\$2,498	\$2,467
PC 70/225 - FFS Inpatient - Adults	\$6,707	\$3,353	\$3,354
Psychiatric Inpatient Services - Subtotal	\$11,672	\$5,851	\$5,821
Subtotal	\$11,672	\$5,851	\$5,821
Other Short-Doyle/Medi-Cal Reimbursements			
PC69/225 - SD/MC	\$14,286	\$7,143	\$7,143
Less Rates Elimination Adjustment	(\$621)	(\$311)	(\$311)
Subtotal	\$13,665	\$6,832	\$6,832
November 2013 Estimate for Fiscal Year 2013-14	<u>\$25,337</u>	<u>\$12,683</u>	<u>\$12,653</u>

(1) The rates elimination adjustment estimates the affect of eliminating the statewide maximum allowance rates as described in regular PC 72. The adjustment is calculated by comparing the approved claims by service type and county to the approved units multiplied by the statewide maximum allowance rate that would have been in affect in Fiscal Year 2012-13 for each service type. The SMA adjustment is equal to the approved dollars in excess of the approved units multiplied by the statewide maximum allowance rate by service type and county. For Fiscal Year 2013-14, the difference was increased by the percentage change in the SD/MC forecast from FY 2012-13 to FY 2013-14. For Fiscal Year 2014-15, the adjustment for Fiscal Year 2013-14 was increased by the percentage change in the SD/MC forecast from FY 2013-14 to FY 2014-15. The estimate was based upon claims received through June 30, 2013.

CHILDREN'S TABLE OF APPROVED CLAIM COSTS AND UNDUPLICATED CLIENTS COUNTS
2014-15 GOVERNOR'S BUDGET FORECASTS BY SERVICE FISCAL YEAR (ACCRUAL)
STATE FISCAL YEARS 1998-99 THROUGH 2014-15
DATA AS OF 6/30/2013

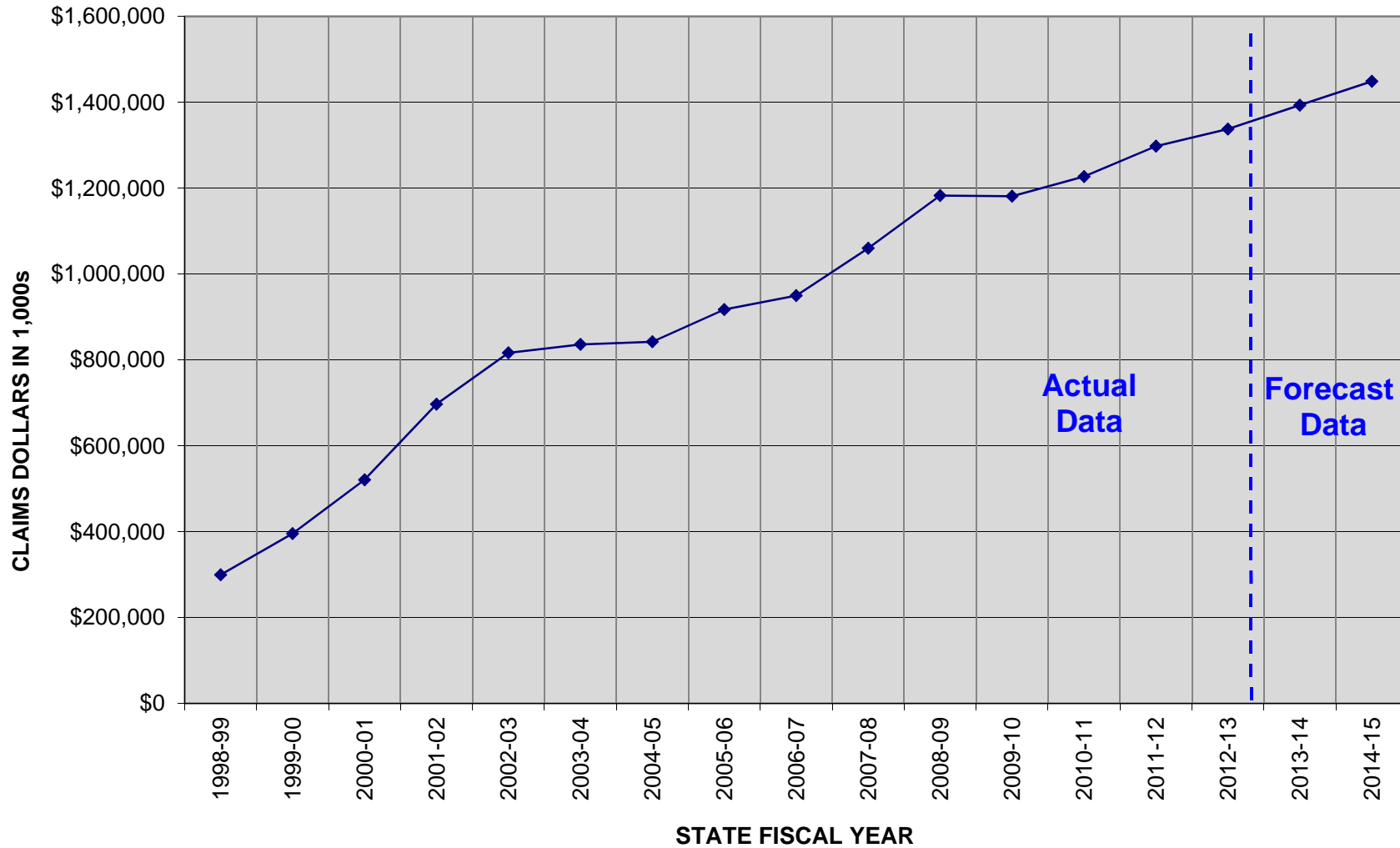
	Fiscal Year	Approved Claims ^(1&3) (In 1,000s)	Percentage Change in Claim Costs	Unduplicated Children Receiving SMHS	Percent Growth in Clients	Cost Per Client	Percent Growth in Cost Per Client	Trend in Medi-Cal Children Enrollment Growth	All Medi-Cal Children ⁽²⁾
Actual	1998-99	\$299,917		121,410		\$2,470			
Actual	1999-00	\$395,934	32.01%	129,950	7.03%	\$3,047	23.34%		
Actual	2000-01	\$521,107	31.61%	140,404	8.04%	\$3,711	21.81%		
Actual	2001-02	\$697,155	33.78%	157,314	12.04%	\$4,432	19.40%		
Actual	2002-03	\$816,707	17.15%	173,201	10.10%	\$4,715	6.40%		
Actual	2003-04	\$836,210	2.39%	183,031	5.68%	\$4,569	-3.11%		
Actual	2004-05	\$842,542	0.76%	185,770	1.50%	\$4,535	-0.73%		
Actual	2005-06	\$917,545	8.90%	187,437	0.90%	\$4,895	7.93%		3,467,311
Actual	2006-07	\$949,907	3.53%	184,095	-1.78%	\$5,160	5.41%	-0.91%	3,435,906
Actual	2007-08	\$1,060,202	11.61%	194,551	5.68%	\$5,449	5.61%	1.73%	3,495,318
Actual	2008-09	\$1,182,903	11.57%	207,494	6.65%	\$5,701	4.61%	3.89%	3,631,457
Actual	2009-10	\$1,181,499	-0.12%	211,184	1.78%	\$5,595	-1.86%	6.05%	3,851,248
Actual	2010-11	\$1,227,202	3.87%	217,086	2.79%	\$5,653	1.04%	3.36%	3,980,825
Actual	2011-12	\$1,297,860	5.76%	230,682	6.26%	\$5,626	-0.48%	1.10%	4,024,798
Forecast	2012-13	\$1,337,907	3.09%	242,377	5.07%	\$5,520	-1.89%	6.55%	4,288,519
Forecast	2013-14	\$1,393,448	4.15%	251,941	3.95%	\$5,531	0.20%		
Forecast	2014-15	\$1,448,988	3.99%	261,507	3.80%	\$5,541	0.18%		

⁽¹⁾ Actual Approved Claims SD/MC Data for Specialty Mental Health as of June 30, 2013.

⁽²⁾ Medi-Cal enrollment data based on average of 12 months of actual monthly enrollment data for each year (years prior to 2005-06 readily not available).

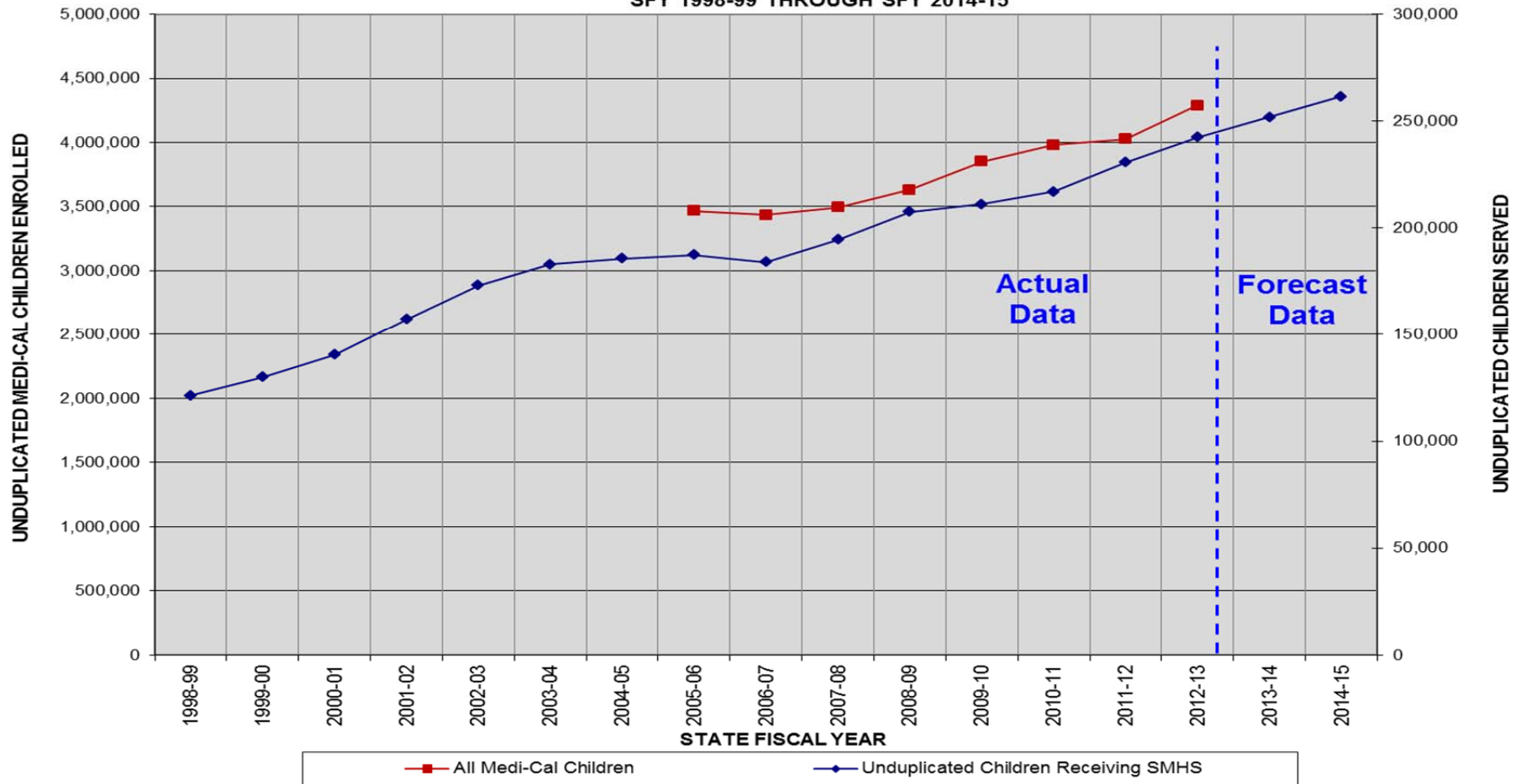
⁽³⁾ Beginning with the May 2013 Estimate, all children's services (except FFS/MC inpatient services) are included in this table of approved claims for FY 2008-09 and on.

CHILDREN'S APPROVED CLAIMS AND CLAIMS FORECAST
SFY 1998-99 THROUGH SFY 2014-15



Source: Approved Claims, SD/MC Specialty Mental Health Services as of June 30, 2013

UNDUPLICATED CLIENTS AND CLIENT FORECASTS
All Medi-Cal Children Compared to Children Receiving Specialty Mental Health Services
SFY 1998-99 THROUGH SFY 2014-15



Source: Approved Claims, SD/MC Specialty Mental Health Services as of June 30, 2013

Children's Services Approved Claims Data

**Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts By Service
FY 2005-06 through FY 2011-12* Actual and SFY 2012-13 through 2014-15 Forecast**

*Actual data as of 6/30/2013

Psychiatric Health Facility Services - SMA ¹ \$612.47						Adult Crisis Residential Services - SMA ¹ \$345.38				
FY	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount
2005-06	287	6,038	21	\$466.97	\$2,819,563	180	2,898	16	\$261.50	\$757,827
2006-07	281	5,812	21	\$473.38	\$2,751,264	178	2,592	15	\$282.87	\$733,189
2007-08	454	7,112	16	\$498.51	\$3,545,425	184	3,044	17	\$281.77	\$857,723
2008-09	561	7,296	13	\$516.52	\$3,768,537	178	2,924	16	\$284.42	\$831,647
2009-10	588	7,274	12	\$514.59	\$3,743,149	205	3,111	15	\$276.50	\$860,182
2010-11	602	8,586	14	\$547.36	\$4,699,605	204	3,190	16	\$285.73	\$911,478
2011-12	629	8,266	13	\$567.84	\$4,693,775	234	3,076	13	\$291.53	\$896,745
2012-13	628	9,804	16	\$588.32	\$5,767,901	216	3,023	14	\$315.50	\$953,763
2013-14	663	10,334	16	\$600.70	\$6,207,630	221	3,014	14	\$322.30	\$971,398
2014-15	695	10,862	16	\$611.98	\$6,647,362	228	3,006	13	\$329.02	\$989,032
Change	4.83%	5.11%	0.27%	1.88%	7.08%	3.17%	-0.27%	-3.33%	2.09%	1.82%
Adult Residential Services - SMA ¹ \$168.46						Crisis Stabilization Services - SMA ¹ \$94.54				
FY	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount	Number of Clients	Number of Hours	Hours Per Client	Cost Per Hour	Approved Amount
2005-06	136	10,671	78	\$137.50	\$1,467,222	4,617	67,633	15	\$82.62	\$5,587,555
2006-07	129	13,609	105	\$141.35	\$1,923,674	4,396	64,832	15	\$86.49	\$5,607,091
2007-08	122	11,942	98	\$147.67	\$1,763,463	4,892	70,547	14	\$90.48	\$6,383,354
2008-09	127	12,934	102	\$142.76	\$1,846,438	5,243	71,264	14	\$88.20	\$6,285,198
2009-10	130	12,081	93	\$145.39	\$1,756,485	5,799	76,811	13	\$92.01	\$7,067,162
2010-11	115	10,519	91	\$155.10	\$1,631,533	6,462	86,746	13	\$90.94	\$7,888,616
2011-12	98	7,265	74	\$157.53	\$1,144,472	7,091	97,568	14	\$90.26	\$8,806,049
2012-13	101	8,010	79	\$161.47	\$1,293,366	7,456	102,985	14	\$102.80	\$10,586,920
2013-14	96	7,223	75	\$166.05	\$1,199,347	7,924	108,991	14	\$104.44	\$11,383,234
2014-15	90	6,438	72	\$171.69	\$1,105,328	8,396	114,997	14	\$105.91	\$12,179,545
Change	-6.25%	-10.87%	-4.93%	3.40%	-7.84%	5.96%	5.51%	-0.42%	1.41%	7.00%
Day Treatment Intensive Half Day Services ⁽²⁾ - SMA ¹ \$144.13						Day Treatment Intensive Full Day Services - SMA ¹ \$202.43				
FY	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount
2005-06	482	40,811	85	\$124.61	\$5,085,620	3,109	292,918	94	\$173.45	\$50,805,916
2006-07	522	42,873	82	\$130.65	\$5,601,400	3,006	271,100	90	\$183.10	\$49,638,598
2007-08	567	48,965	86	\$116.65	\$5,711,570	2,876	267,724	93	\$182.68	\$48,907,835
2008-09	394	28,700	73	\$99.90	\$2,867,165	2,916	280,805	96	\$181.99	\$51,103,346
2009-10	284	25,738	91	\$104.08	\$2,678,755	2,657	252,788	95	\$179.91	\$45,479,444
2010-11	228	23,151	102	\$35.38	\$819,123	2,369	225,141	95	\$184.62	\$41,564,585
2011-12	216	22,056	102	\$106.55	\$2,350,030	2,293	210,679	92	\$186.31	\$39,250,638
2012-13	10	3,159	316	\$99.70	\$314,964	1,792	164,246	92	\$200.43	\$32,920,272
2013-14	-	0	0	\$0.00	\$0	1,588	143,513	90	\$207.06	\$29,715,593
2014-15						1,380	122,777	89	\$215.93	\$26,510,916
Change						-13.10%	-14.45%	-1.55%	4.28%	-10.78%

(1) - The State Maximum Allowance (SMA) for FY 11/12 is noted here as a historical reference and was removed as maximum rate for computing federal reimbursement for dates of service beginning July 1, 2012 per AB 1297.

(2) - There were significantly fewer approved claims in FY 2012-13 for Day Treatment Intensive Half Day services and no costs forecast for FY 13-14.

Children's Services Approved Claims Data
Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts By Service
FY 2005-06 through FY 2011-12* Actual and SFY 2012-13 through 2014-15 Forecast

*Actual data as of 6/30/2013

Day Rehabilitative Half Day Services - SMA ¹ \$84.08						Day Rehabilitative Full Day Services - SMA ¹ \$131.24				
FY	Number of Clients	Number of Days	Days Per Client	Cost Per Day ⁽²⁾	Approved Amount	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount
2005-06	343	29,254	85	\$76.88	\$2,249,072	3,539	293,326	83	\$106.39	\$31,207,410
2006-07	168	14,196	85	\$82.79	\$1,175,267	3,110	239,108	77	\$114.41	\$27,357,205
2007-08	137	14,730	108	\$74.87	\$1,102,872	2,657	209,849	79	\$117.62	\$24,682,839
2008-09	189	17,839	94	\$73.75	\$1,315,612	2,493	173,556	70	\$118.10	\$20,496,465
2009-10	175	16,200	93	\$86.00	\$1,393,141	2,203	150,231	68	\$113.04	\$16,981,995
2010-11	127	14,239	112	\$98.01	\$1,395,605	1,481	116,242	78	\$117.36	\$13,641,791
2011-12	102	9,358	92	\$96.67	\$904,599	1,759	120,580	69	\$118.90	\$14,337,165
2012-13	64	6,256	98	\$90.73	\$567,615	1,832	125,556	69	\$127.92	\$16,061,360
2013-14	52	4,558	88	\$101.04	\$460,563	1,671	108,628	65	\$131.92	\$14,329,712
2014-15	37	2,861	77	\$123.56	\$353,513	1,510	91,701	61	\$137.38	\$12,598,064
Change	-28.85%	-37.23%	-11.78%	22.28%	-23.24%	-9.63%	-15.58%	-6.58%	4.14%	-12.08%
Targeted Case Management Services - SMA ¹ \$2.02						Therapy & Other Service Activities - SMA ¹ \$2.61				
FY	Number of Clients	Number of Minutes	Minutes Per Client	Cost Per Minute	Approved Amount	Number of Clients	Number of Minutes ⁽³⁾	Minutes Per Client	Cost Per Minute	Approved Amount
2005-06	87,388	41,449,035	474	\$1.68	\$69,461,219	171,158	283,676,792	1,657	\$2.10	\$595,219,487
2006-07	80,731	38,791,728	481	\$1.79	\$69,366,241	172,277	289,148,424	1,678	\$2.20	\$636,792,514
2007-08	83,131	40,820,893	491	\$1.82	\$74,419,098	179,926	318,795,013	1,772	\$2.25	\$717,760,360
2008-09	89,348	43,863,813	491	\$1.87	\$81,814,298	192,601	377,655,636	1,961	\$2.19	\$828,266,009
2009-10	90,638	41,675,136	460	\$1.88	\$78,388,301	195,727	446,900,610	2,283	\$1.86	\$829,576,695
2010-11	90,561	40,549,679	448	\$1.87	\$76,020,619	201,350	380,887,877	1,892	\$2.29	\$871,026,286
2011-12	94,727	41,712,930	440	\$1.82	\$75,813,872	214,621	401,238,478	1,870	\$2.32	\$931,688,450
2012-13	91,797	35,049,591	382	\$2.16	\$75,572,783	219,208	381,382,132	1,740	\$2.53	\$964,732,444
2013-14	93,531	33,866,361	362	\$2.24	\$75,750,769	227,096	393,707,122	1,734	\$2.57	\$1,013,688,142
2014-15	95,266	32,683,130	343	\$2.32	\$75,928,753	234,989	406,032,113	1,728	\$2.62	\$1,062,643,839
Change	1.85%	-3.49%	-5.25%	3.86%	0.23%	3.48%	3.13%	-0.33%	1.65%	4.83%
Therapeutic Behavioral Services - SMA ¹ \$2.61						Medication Support Services - SMA ¹ \$4.82				
FY	Number of Clients	Number of Minutes	Minutes Per Client	Cost Per Minute	Approved Amount	Number of Clients	Number of Minutes	Minutes Per Client	Cost Per Minute	Approved Amount
2005-06	3,260	24,065,822	7,382	\$2.03	\$48,939,785	64,898	20,017,781	308	\$3.80	\$76,119,707
2006-07	3,655	26,047,259	7,126	\$2.10	\$54,816,863	64,468	19,544,557	303	\$4.07	\$79,488,307
2007-08	3,809	27,593,980	7,244	\$2.19	\$60,351,325	65,051	20,048,025	308	\$4.16	\$83,413,472
2008-09	4,210	28,751,510	6,829	\$2.19	\$62,984,126	69,283	21,471,506	310	\$4.23	\$90,778,784
2009-10	5,169	33,221,104	6,427	\$2.08	\$69,164,178	70,149	22,038,136	314	\$4.20	\$92,646,574
2010-11	6,432	39,942,951	6,210	\$2.02	\$80,662,424	70,840	22,981,170	324	\$4.16	\$95,674,949
2011-12	7,337	41,372,108	5,639	\$2.11	\$87,312,375	73,427	23,340,516	318	\$4.21	\$98,266,243
2012-13	7,710	37,966,988	4,924	\$2.39	\$90,692,681	72,622	21,732,218	299	\$4.76	\$103,345,823
2013-14	8,498	40,037,045	4,711	\$2.42	\$96,750,864	74,163	22,056,337	297	\$4.86	\$107,277,345
2014-15	9,282	42,107,102	4,536	\$2.44	\$102,809,047	75,704	22,380,453	296	\$4.97	\$111,208,869
Change	9.23%	5.17%	-3.71%	1.04%	6.26%	2.08%	1.47%	-0.60%	2.16%	3.66%

- (1) The State Maximum Allowance (SMA) for FY 11/12 is noted here as a historical reference and was removed as maximum rate for computing federal reimbursement for dates of service beginning July 1, 2012 per AB 1297.
- (2) Currently analyzing the reason that Day Rehabilitative Half Day Services cost per day exceeds the SMA in FY's 09-10, 10-11, 11-12.
- (3) The large increase in the number of minutes for FY 2009-10 is due to over reporting of units of time by certain counties while implementing new billing systems.

Children's Services Approved Claims Data
Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts By Service
FY 2005-06 through FY 2011-12* Actual and SFY 2012-13 through 2014-15 Forecast

*Actual data as of 6/30/2013

Crisis Intervention Services - SMA ¹ \$3.88						Psychiatric Inpatient Hospital Services - SD/MC ⁽²⁾ - SMA ¹ \$1,213.75				
FY	Number of Clients	Number of Minutes	Minutes Per Client	Cost Per Minute	Approved Amount	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount
2005-06	15,872	4,108,282	259	\$3.41	\$14,003,423					
2006-07	15,125	3,934,788	260	\$3.63	\$14,272,657					
2007-08	15,445	4,249,925	275	\$3.72	\$15,804,877					
2008-09	17,423	4,812,360	276	\$3.75	\$18,041,728	1,876	16,126	9	\$775.40	\$12,504,102
2009-10	16,787	4,630,136	276	\$3.74	\$17,309,756	1,852	17,701	10	\$816.53	\$14,453,454
2010-11	16,989	5,077,564	299	\$3.69	\$18,758,488	1,980	15,928	8	\$785.22	\$12,506,982
2011-12	17,038	5,280,897	310	\$3.64	\$19,205,733	2,017	15,965	8	\$826.19	\$13,190,188
2012-13	16,378	4,882,508	298	\$4.25	\$20,767,803	1,870	16,024	9	\$894.57	\$14,334,631
2013-14	16,486	4,997,437	303	\$4.35	\$21,716,606	1,917	15,981	8	\$924.07	\$14,767,603
2014-15	16,593	5,112,366	308	\$4.43	\$22,665,403	1,960	15,939	8	\$953.67	\$15,200,575
Change	0.65%	2.30%	1.64%	2.02%	4.37%	2.24%	-0.26%	-2.45%	3.20%	2.93%
Psychiatric Inpatient Hospital Services - FFS/MC ^(2,3)										
FY	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount					
2005-06										
2006-07										
2007-08										
2008-09	7,697	67,776	9	\$ 666.68	\$45,184,960					
2009-10	8,257	75,403	9	\$ 686.92	\$51,795,601					
2010-11	9,037	78,685	9	\$ 702.98	\$55,313,818					
2011-12	8,930	82,004	9	\$ 717.72	\$58,855,971					
2012-13	10,090	92,704	9	\$ 729.00	\$67,581,293					
2013-14	10,683	97,996	9	\$ 740.30	\$72,546,660					
2014-15	11,278	103,288	9	\$ 750.45	\$77,512,025					
Change	5.57%	5.40%	-0.16%	1.37%	6.84%					

(1) - The State Maximum Allowance (SMA) for FY 11/12 is noted here as a historical reference and was removed as maximum rate for computing federal reimbursement for dates of service beginning July 1, 2012 per AB 1297.

(2) - FY 05-06 through FY 07-08 information will be added in a future update of this table.

(3) - FFS/MC data as of August 23, 2013

ADULTS' TABLE OF APPROVED CLAIM COSTS AND UNDUPLICATED CLIENTS COUNTS
2014-15 GOVERNOR'S BUDGET FORECASTS BY SERVICE FISCAL YEAR (ACCRUAL)
STATE FISCAL YEARS 2005-06 THROUGH 2014-15
DATA AS OF 6/30/2013

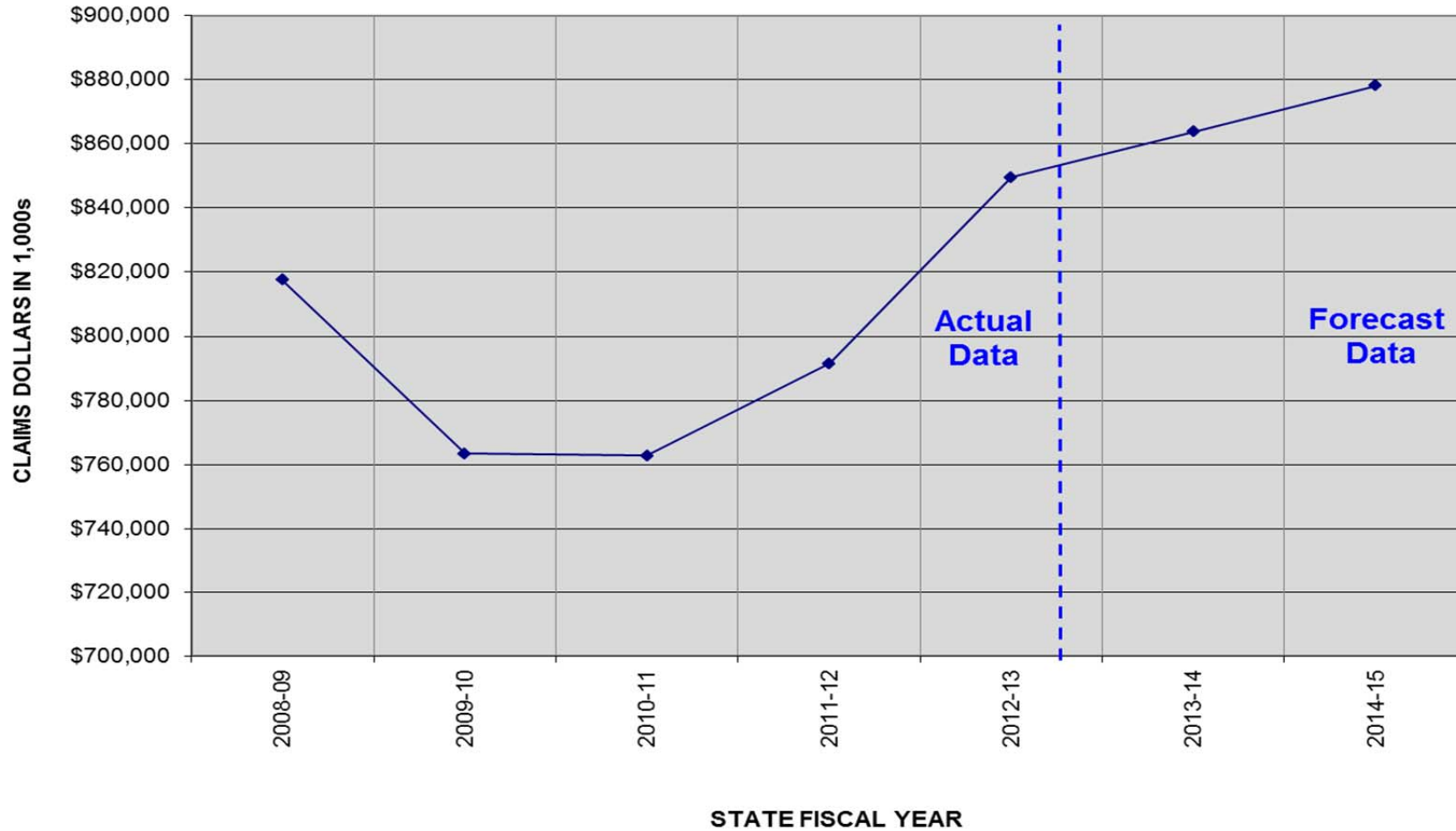
	Fiscal Year	Approved Claims ^(1&3) (In 1,000s)	Percentage Change in Claim Costs	Unduplicated Adults Receiving SMHS	Percent Growth in Clients	Cost Per Client	Percent Growth in Cost Per Client	Trend in Medi-Cal Adults' Enrollment Growth	All Medi-Cal Adults ⁽²⁾
Actual	2005-06								3,071,718
Actual	2006-07							0.22%	3,078,495
Actual	2007-08							1.41%	3,121,776
Actual	2008-09	\$817,638		242,939		\$3,366		3.70%	3,237,370
Actual	2009-10	\$763,333	-6.64%	232,954	-4.11%	\$3,277	-2.64%	4.87%	3,394,954
Actual	2010-11	\$762,821	-0.07%	231,614	-0.58%	\$3,294	0.51%	3.79%	3,523,766
Actual	2011-12	\$791,532	3.76%	235,315	1.60%	\$3,364	2.13%	1.78%	3,586,641
Forecast	2012-13	\$849,545	7.33%	242,086	2.88%	\$3,509	4.33%	0.87%	3,617,736
Forecast	2013-14	\$863,830	1.68%	242,464	0.16%	\$3,563	1.52%		
Forecast	2014-15	\$878,115	1.65%	242,843	0.16%	\$3,616	1.50%		

⁽¹⁾ Actual Approved Claims SD/MC Data for Specialty Mental Health as of June 30, 2013.

⁽²⁾ Medi-Cal enrollment data based on average of 12 months of actual monthly enrollment data for each year (years prior to 2005-06 readily not available).

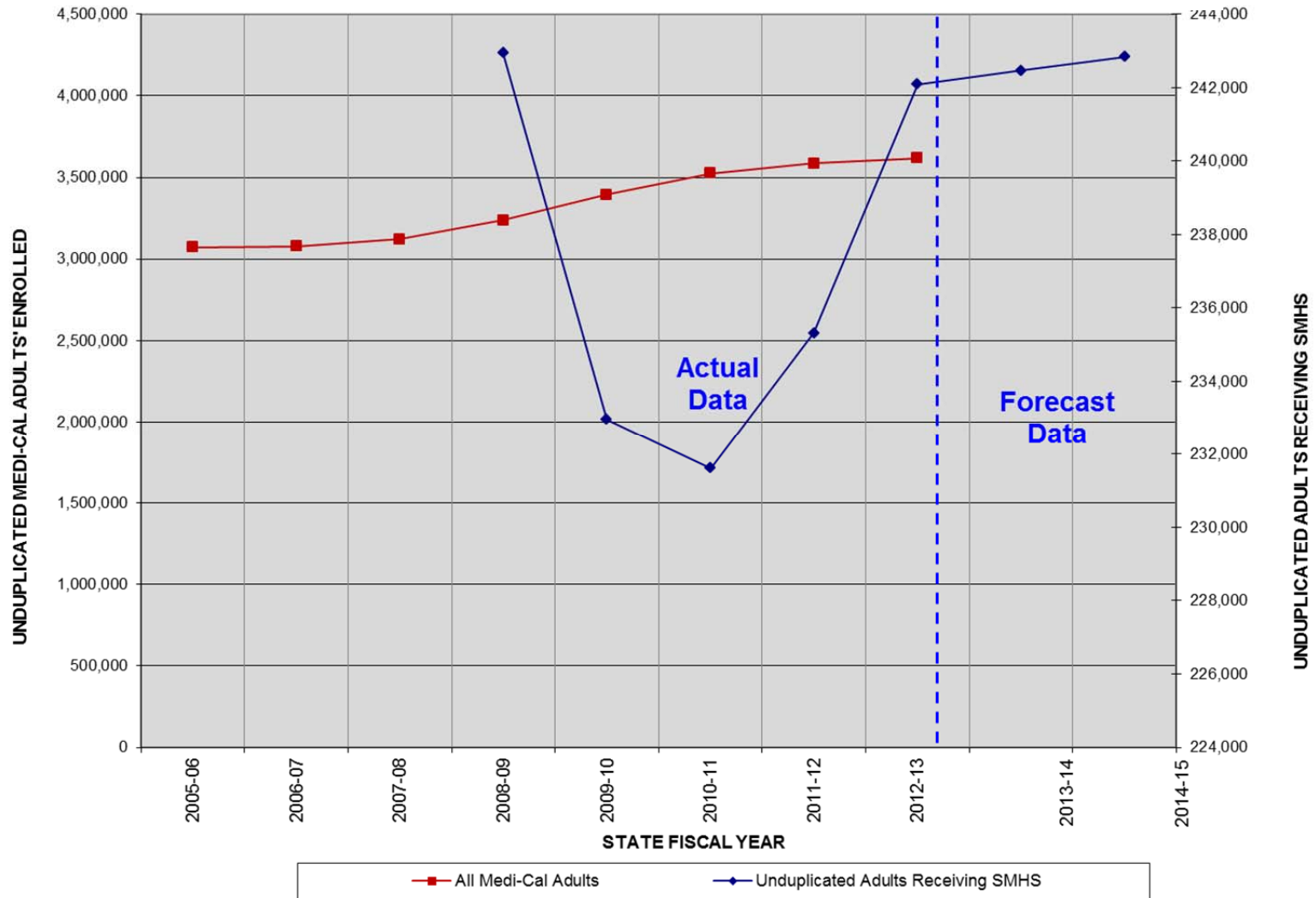
⁽³⁾ FFS/MC inpatient service costs are not included in this table of approved claims.

ADULTS' APPROVED CLAIMS AND CLAIMS FORECAST
SFY 2008-09 THROUGH SFY 2014-15



Source: Approved Claims, SD/MC Specialty Mental Health Services as of June 30, 2013

UNDUPLICATED CLIENTS AND CLIENT FORECASTS
All Medi-Cal Adults' Compared to Adults' Receiving Specialty Mental Health Services
SFY 2005-06 THROUGH SFY 2014-15



Source: Approved Claims, SD/MC Specialty Mental Health Services as of June 30, 2013

Adults' Services Approved Claims Data
Adults' Services Approved Claims Data

Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts By Service
FY 2008-09 through FY 2011-12* Actual and SFY 2012-13 through 2014-15 Forecast

*Actual data as of 6/30/2013

Psychiatric Health Facility Services - SMA ¹ \$612.47						Adult Crisis Residential Services - SMA ¹ \$345.38				
FY	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount
2008-09	2,388	27,167	11	\$535.31	\$14,542,834	3,423	65,783	19	\$288.94	\$19,007,024
2009-10	2,307	25,668	11	\$553.68	\$14,211,935	3,445	65,690	19	\$287.28	\$18,871,631
2010-11	2,418	27,499	11	\$561.84	\$15,450,117	3,714	68,007	18	\$295.55	\$20,099,437
2011-12	2,731	29,671	11	\$582.12	\$17,272,139	3,896	71,847	18	\$304.78	\$21,897,445
2012-13	2,380	31,855	13	\$630.73	\$20,091,749	3,746	62,542	17	\$320.29	\$20,031,583
2013-14	2,405	32,976	14	\$648.16	\$21,373,830	3,818	62,218	16	\$327.63	\$20,384,704
2014-15	2,432	34,097	14	\$664.45	\$22,655,914	3,894	61,893	16	\$335.06	\$20,737,824
Change	1.12%	3.40%	2.25%	2.51%	6.00%	1.99%	-0.52%	-2.46%	2.27%	1.73%

Adult Residential Services - SMA ¹ \$168.46						Crisis Stabilization Services - SMA ¹ \$94.54				
FY	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount	Number of Clients	Number of Hours	Hours Per Client	Cost Per Hour	Approved Amount
2008-09	1,519	152,389	100	\$145.60	\$22,187,309	19,725	378,550	19	\$89.69	\$33,950,960
2009-10	1,436	120,395	84	\$149.83	\$18,039,205	19,296	378,019	20	\$90.88	\$34,354,978
2010-11	1,155	96,948	84	\$155.32	\$15,057,763	21,068	412,873	20	\$90.66	\$37,429,203
2011-12	1,157	97,138	84	\$157.28	\$15,277,907	23,252	468,867	20	\$92.33	\$43,291,334
2012-13	1,105	90,257	82	\$160.78	\$14,511,376	23,642	504,328	21	\$101.59	\$51,232,600
2013-14	1,021	79,193	78	\$166.56	\$13,190,266	24,585	528,867	22	\$103.59	\$54,787,124
2014-15	934	68,129	73	\$174.22	\$11,869,157	25,527	553,404	22	\$105.42	\$58,341,648
Change	-8.52%	-13.97%	-5.96%	4.60%	-10.02%	3.83%	4.64%	0.78%	1.77%	6.49%

Day Treatment Intensive Half Day Services ⁽²⁾ - SMA ¹ \$144.13						Day Treatment Intensive Full Day Services ⁽²⁾ - SMA ¹ \$202.43				
FY	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount
2008-09	0					210	5,808	28	\$130.21	\$756,246
2009-10	0					97	2,984	31	\$155.24	\$463,225
2010-11	0					61	2,724	45	\$170.93	\$465,618
2011-12	0					16	431	27	\$173.13	\$74,617
2012-13	0					0				
2013-14	0					0				
2014-15	0					0				
Change	0.00%					0.00%				

- (1) - The State Maximum Allowance (SMA) for FY 11/12 is noted here as a historical reference and was removed as maximum rate for computing federal reimbursement for dates of service beginning July 1, 2012 per AB 1297.
- (2) - There were no approved claims for adults receiving Day Treatment Intensive Half Day services. For Day Treatment Intensive Full Day services, there were no approved claims in FY 2012-13.

Adults' Services Approved Claims Data
Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts By Service
FY 2008-09 through FY 2011-12* Actual and SFY 2012-13 through 2014-15 Forecast

*Actual data as of 6/30/2013

Day Rehabilitative Half Day Services - SMA ¹ \$84.08						Day Rehabilitative Full Day Services - SMA ¹ \$131.24				
FY	Number of Clients	Number of Days	Days Per Client	Cost Per Day ⁽²⁾	Approved Amount	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount
2008-09	140	7,345	52	\$81.99	\$602,222	1,610	105,935	66	\$116.91	\$12,384,663
2009-10	147	7,243	49	\$85.43	\$618,775	1,433	86,570	60	\$115.67	\$10,013,561
2010-11	212	8,429	40	\$91.26	\$769,234	1,159	77,179	67	\$118.71	\$9,162,148
2011-12	274	11,677	43	\$91.39	\$1,067,169	967	62,840	65	\$129.42	\$8,132,649
2012-13	199	8,436	42	\$90.15	\$760,518	699	40,401	58	\$138.37	\$5,590,135
2013-14	193	7,897	41	\$93.11	\$735,253	465	24,213	52	\$162.96	\$3,945,720
2014-15	189	7,361	39	\$96.45	\$709,986	231	8,025	35	\$286.77	\$2,301,305
Change	-2.07%	-6.79%	-4.81%	3.59%	-3.44%	-50.32%	-66.86%	-33.28%	75.98%	-41.68%

Targeted Case Management Services - SMA ¹ \$2.02						Therapy & Other Service Activities - SMA ¹ \$2.61				
FY	Number of Clients	Number of Minutes	Minutes Per Client	Cost Per Minute	Approved Amount	Number of Clients	Number of Minutes	Minutes Per Client	Cost Per Minute	Approved Amount
2008-09	104,990	51,966,882	495	\$1.90	\$98,727,675	174,525	149,110,381	854	\$2.18	\$324,330,747
2009-10	101,679	47,370,610	466	\$1.92	\$90,901,814	163,667	150,421,426	919	\$2.01	\$302,814,037
2010-11	97,746	46,051,507	471	\$1.88	\$86,614,748	162,082	165,110,057	1019	\$1.87	\$308,174,784
2011-12	97,578	49,212,770	504	\$1.73	\$85,010,335	166,690	156,368,959	938	\$2.08	\$324,974,797
2012-13	92,818	40,578,056	437	\$2.31	\$93,582,818	166,722	138,720,119	832	\$2.55	\$353,440,467
2013-14	90,144	38,562,403	428	\$2.42	\$93,164,137	165,698	138,591,131	836	\$2.62	\$363,442,865
2014-15	87,473	36,546,749	418	\$2.54	\$92,745,454	164,673	138,462,150	841	\$2.70	\$373,445,265
Change	-2.96%	-5.23%	-2.33%	5.04%	-0.45%	-0.62%	-0.09%	0.53%	2.85%	2.75%

Medication Support Services - SMA ¹ \$4.82						Crisis Intervention Services - SMA ¹ \$3.88				
FY	Number of Clients	Number of Minutes	Minutes Per Client	Cost Per Minute	Approved Amount	Number of Clients	Number of Minutes	Minutes Per Client	Cost Per Minute	Approved Amount
2008-09	172,015	46,242,888	269	\$4.35	\$201,050,453	36,007	7,899,429	219	\$3.74	\$29,575,525
2009-10	164,805	47,157,084	286	\$4.01	\$189,101,130	33,946	7,451,140	219	\$3.74	\$27,850,847
2010-11	162,991	52,815,281	324	\$3.55	\$187,380,808	31,843	7,116,739	223	\$3.75	\$26,664,591
2011-12	164,844	50,254,539	305	\$3.83	\$192,553,587	30,882	7,216,120	234	\$3.74	\$26,984,252
2012-13	155,529	42,815,826	275	\$4.75	\$203,272,083	28,449	6,737,570	237	\$4.22	\$28,436,194
2013-14	152,709	42,459,416	278	\$4.85	\$206,004,534	26,849	6,550,512	244	\$4.35	\$28,506,046
2014-15	149,888	42,103,004	281	\$4.96	\$208,736,986	25,247	6,363,451	252	\$4.49	\$28,575,898
Change	-1.85%	-0.84%	1.03%	2.18%	1.33%	-5.97%	-2.86%	3.31%	3.19%	0.25%

- (1) - The State Maximum Allowance (SMA) for FY 11/12 is noted here as a historical reference and was removed as maximum rate for computing federal reimbursement for dates of service beginning July 1, 2012 per AB 1297.
- (2) - Currently analyzing the reason that Day Rehabilitative Half Day Services cost per day exceeds the SMA in FY's 09-10, 10-11, 11-12.

Adults' Services Approved Claims Data
Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts By Service
FY 2008-09 through FY 2011-12* Actual and SFY 2012-13 through 2014-15 Forecast
 *Actual data as of 6/30/2013

FY	Psychiatric Inpatient Hospital Services - SD/MC - SMA ⁽¹⁾ \$1,213.75					Psychiatric Inpatient Hospital Services - FFS/MC ⁽²⁾				
	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount
2008-09	6,444	74,807	12	\$808.82	\$60,505,545	14,360	203,224	14	\$545.83	\$110,926,714
2009-10	6,359	73,819	12	\$759.75	\$56,084,301	14,537	194,469	13	\$575.10	\$111,839,820
2010-11	6,159	72,404	12	\$767.26	\$55,552,524	14,864	200,741	14	\$600.28	\$120,501,219
2011-12	6,262	68,543	11	\$802.36	\$54,996,395	14,298	207,266	14	\$623.90	\$129,312,474
2012-13	5,033	54,820	11	\$1,069.94	\$58,654,251	14,967	214,045	14	\$654.79	\$140,155,361
2013-14	4,823	49,768	10	\$1,177.34	\$58,593,884	14,787	216,001	15	\$679.92	\$146,862,845
2014-15	4,613	44,722	10	\$1,308.83	\$58,533,519	14,607	217,957	15	\$704.59	\$153,570,329
Change	-4.35%	-10.14%	-6.05%	11.17%	-0.10%	-1.22%	0.91%	2.15%	3.63%	4.57%

- (1) - The State Maximum Allowance (SMA) for FY 11/12 is noted here as a historical reference and was removed as maximum rate for computing federal reimbursement for dates of service beginning July 1, 2012 per AB 1297.
- (2) - FFS/MC data as of August 23, 2013

MEDI-CAL SPECIALTY MENTAL HEALTH SERVICES - ACCRUAL COMPARISON

Children Costs and Unduplicated Clients by Service Type and Year

Actual data as of 6/30/2013 for (SD/MC) actual data as of 8/23/2013 for (FFS/MC)

(DOLLARS IN THOUSANDS)

Children	Fiscal Year 2011-12		Fiscal Year 2012-13		% Change		Fiscal Year 2013-14		% Change	
	Total Costs	Total Clients	Total Costs	Total Clients	Dollars	Clients	Total Costs	Total Clients	Dollars	Clients
All Services*	\$1,356,716	230,682	\$1,405,488	242,377	3.6%	5.1%	\$1,465,994	251,941	4.3%	3.9%
Adult Crisis Residential	\$897	234	\$954	216	6.4%	-7.7%	\$971	221	1.8%	2.3%
Adult Residential	\$1,144	98	\$1,293	101	13.0%	3.1%	\$1,199	96	-7.3%	-5.0%
Crisis Intervention	\$19,206	17,038	\$20,768	16,378	8.1%	-3.9%	\$21,717	16,486	4.6%	0.7%
Crisis Stabilization	\$8,806	7,091	\$10,587	7,456	20.2%	5.1%	\$11,383	7,924	7.5%	6.3%
Day Rehabilitation - Full Day	\$14,337	1,759	\$16,061	1,832	12.0%	4.2%	\$14,330	1,671	-10.8%	-8.8%
Day Rehabilitation - Half Day	\$905	102	\$568	64	-37.3%	-37.3%	\$461	52	-18.9%	-18.8%
Day Treatment Intensive - Full Day	\$41,565	2,369	\$39,251	2,293	-5.6%	-3.2%	\$32,920	1,792	-16.1%	-21.8%
Day Treatment Intensive - Half Day	\$2,350	216	\$315	10	-86.6%	-95.4%	\$0	0	-100.0%	-100.0%
Medication Support	\$98,266	73,427	\$103,346	72,622	5.2%	-1.1%	\$107,277	74,163	3.8%	2.1%
Psychiatric Health Facility	\$4,694	629	\$5,768	628	22.9%	-0.2%	\$6,208	663	7.6%	5.6%
Psychiatric Inpatient Hospital Services - SD/MC	\$13,190	2,017	\$14,335	1,870	8.7%	-7.3%	\$14,768	1,917	3.0%	2.5%
Targeted Case Management	\$75,814	94,727	\$75,573	91,797	-0.3%	-3.1%	\$75,751	93,531	0.2%	1.9%
Therapeutic Behavioral Services	\$87,312	7,337	\$90,693	7,710	3.9%	5.1%	\$96,751	8,498	6.7%	10.2%
Therapy and Other Service Activities	\$931,688	214,621	\$964,732	219,208	3.5%	2.1%	\$1,013,688	227,096	5.1%	3.6%
Psychiatric Inpatient Hospital Services - FFS/MC	\$58,856	8,930	\$67,581	10,090	14.8%	13.0%	\$72,547	10,683	7.3%	5.9%

*The total costs will not equal the sum of individual service types due to the forecast methodology. The trend for all services combined is different than the trend of individual services. The total number of clients of all services is an unduplicated count and not equal to the sum of the service type counts.

MEDI-CAL SPECIALTY MENTAL HEALTH SERVICES AND HEALTHY FAMILIES PROGRAM - ACCRUAL COMPARISON
Adults Costs and Unduplicated Clients by Service Type and Year
(DOLLARS IN THOUSANDS)

Actual data as of 6/30/2013 for (SD/MC) actual data as of 8/23/2013 for (FFS/MC)

Adults	Fiscal Year 2011-12		Fiscal Year 2012-13		% Change		Fiscal Year 2013-14		% Change	
	Total Costs	Total Clients	Total Costs	Total Clients	Dollars	Clients	Total Costs	Total Clients	Dollars	Clients
All Services*	\$920,845	235,315	\$989,700	242,086	7.5%	2.9%	\$1,010,693	242,464	2.1%	0.2%
Adult Crisis Residential	\$21,897	3,896	\$20,032	3,746	-8.5%	-3.9%	\$20,385	3,818	1.8%	1.9%
Adult Residential	\$15,278	1,157	\$14,511	1,105	-5.0%	-4.5%	\$13,190	1,021	-9.1%	-7.6%
Crisis Intervention	\$26,984	30,882	\$28,436	28,449	5.4%	-7.9%	\$28,506	26,849	0.2%	-5.6%
Crisis Stabilization	\$43,291	23,252	\$51,233	23,642	18.3%	1.7%	\$54,787	24,585	6.9%	4.0%
Day Rehabilitation - Full Day	\$8,133	967	\$5,590	699	-31.3%	-27.7%	\$3,946	465	-29.4%	-33.5%
Day Rehabilitation - Half Day	\$1,067	274	\$761	199	-28.7%	-27.4%	\$735	193	-3.3%	-3.0%
Day Treatment Intensive - Full Day	\$0	0	\$0	0	0.0%	0.0%	\$0	0	0.0%	0.0%
Day Treatment Intensive - Half Day	\$0	0	\$0	0	0	0.0%	\$0	0	0.0%	0.0%
Medication Support	\$192,554	164,844	\$203,272	155,529	5.6%	-5.7%	\$206,005	152,709	1.3%	-1.8%
Psychiatric Health Facility	\$17,272	2,731	\$20,092	2,380	16.3%	-12.9%	\$21,374	2,405	6.4%	1.1%
Psychiatric Inpatient Hospital Services - SD/MC	\$54,996	6,262	\$58,654	5,033	6.7%	-19.6%	\$58,594	4,823	-0.1%	-4.2%
Targeted Case Management	\$85,010	97,578	\$93,583	92,818	10.1%	-4.9%	\$93,164	90,144	-0.4%	-2.9%
Therapy and Other Service Activities	\$324,975	166,690	\$353,440	166,722	8.8%	0.0%	\$363,443	165,698	2.8%	-0.6%
Psychiatric Inpatient Hospital Services - FFS/MC	\$129,312	14,298	\$140,155	14,967	8.4%	4.7%	\$146,863	14,787	4.8%	-1.2%

*The total costs will not equal the sum of individual service types due to the forecast methodology. The trend for all services combined is different than the trend of individual services. The total number of clients of all services is an unduplicated count and not equal to the sum of the service type counts.

About the Healthy Families Program

The Healthy Families program provided low cost insurance coverage for health, dental, and vision services to children who did not have insurance and did not qualify for no-cost Medi-Cal. Due to a change in State law, children who were enrolled in the Healthy Family program have been transitioned into Medi-Cal, with the transition beginning January 1, 2013.

About the Healthy Families Program (HFP) Transition To Medi-Cal

Pursuant to Assembly Bill (AB) 1494, (Committee on Budget, Chapter 28, Statutes of 2012), all Healthy Families Program (HFP) enrollees will transition to Medi-Cal as targeted low-income Medicaid children, as allowed under federal law, beginning January 1, 2013. The transition of approximately 875,000 HFP enrollees will be implemented in four separate phases over the course of one year and in a manner that minimizes disruption in services, maintains adequate provider networks, and ensures access to care. Each Phase will require an implementation plan, including information on health and dental plan network adequacy, continuity of care, eligibility and enrollment requirements, consumer protections, and family notifications.

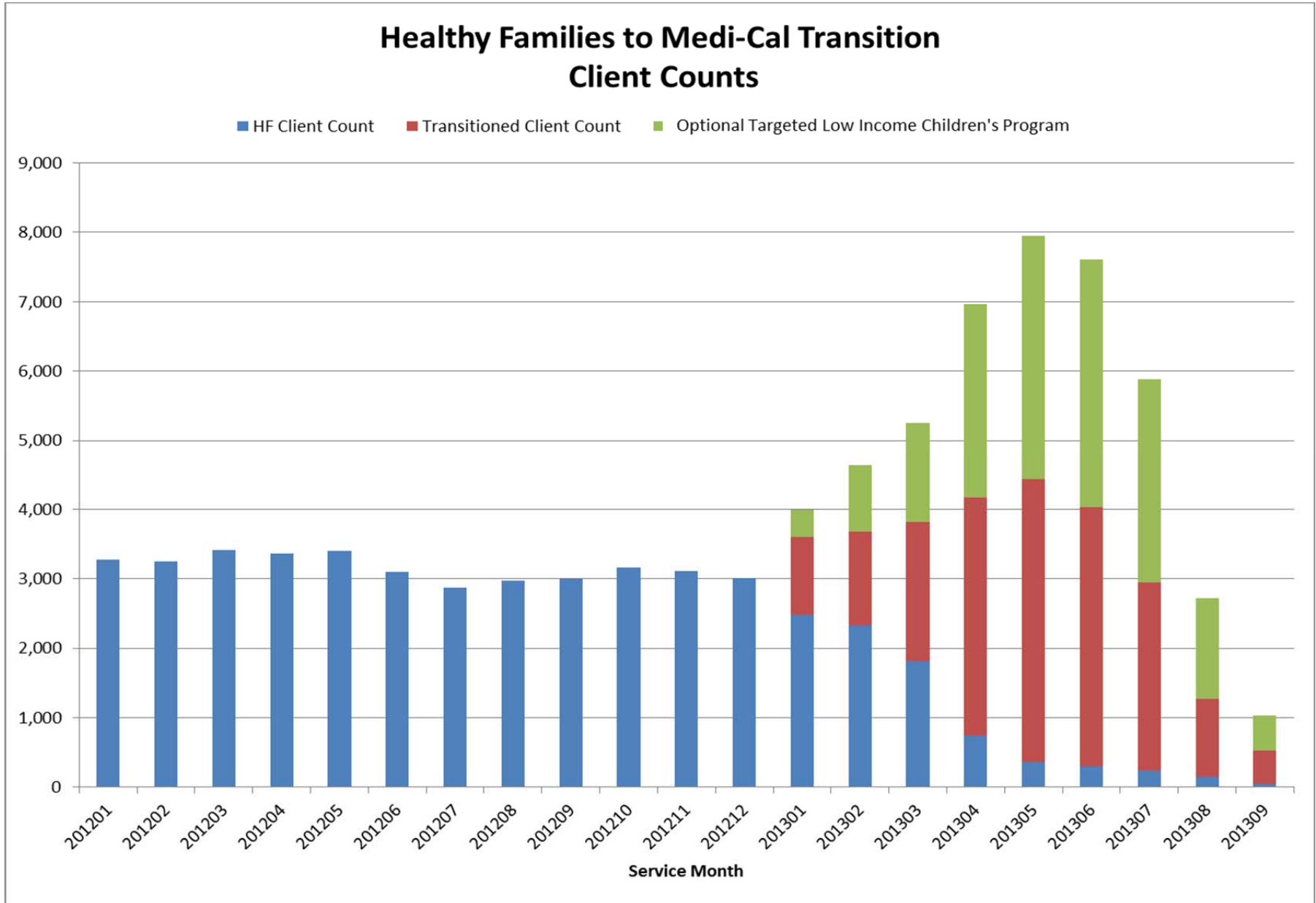
The transition of HFP enrollees to Medi-Cal will simplify eligibility and coverage for children and families while providing additional benefits and lowering costs for children at certain income levels. The State will also gain administrative efficiencies, achieve General Fund savings, and provide a more consistent health plan contracting process while increasing plan accountability for providing high quality services to children.

Healthy Families to Medi-Cal Transition						
Specialty Mental Health Services Utilization						
Claims Data as of November 8, 2013 (SDMC) and September 30, 2013 (Psychiatric Inpatient - FFS/MC)						
Service Type	FY 2011-2012 (HFP Only)		FY 2012-2013 (HFP, Transitioned, and OTLICP)		% Change	
	Total Costs	Total Clients	Total Costs	Total Clients**	Costs	Clients
All SDMC Billed Services Combined*	\$31,724,031	7,666	\$50,309,355	15,486	59%	102%
Adult Residential Treatment Services	\$4,380	1	\$2,941	1	-33%	0%
Case Management/Brokerage	\$1,901,275	3,259	\$3,039,500	4,704	60%	44%
Crisis Intervention	\$573,753	588	\$1,311,124	1,047	129%	78%
Crisis Residential Treatment Services	\$16,094	3			-100%	-100%
Crisis Stabilization	\$142,887	122	\$560,483	398	295%	226%
Day Rehabilitation - Full Day	\$260,188	34	\$232,767	39	-11%	15%
Day Treatment Intensive - Full Day	\$611,733	47	\$724,667	60	18%	28%
Hospital Inpatient			\$329,374	69	***	***
Hospital Inpatient Admin Day			\$3,051	1	***	***
Medication Support Services	\$3,433,722	2,580	\$5,310,175	4,453	55%	73%
Therapy and Other Service Activities	\$24,701,386	7,119	\$38,639,790	14,435	56%	103%
Psychiatric Health Facility	\$78,614	14	\$155,484	33	98%	136%
Psychiatric Inpatient - FFS/MC			\$730,921	188	***	***
Cost Per Client (not including FFS/MC)*	\$4,138		\$3,249			
<p>* Unique Client Count for ALL SDMC Billed Services Combined is not the sum of the individual services because it is an unduplicated count and a single client may have received multiple types of Specialty Mental Health services during the year. SDMC Services include all listed services except Psychiatric Inpatient -FFS/MC.</p>						
<p>** The total costs have not been adjusted to reflect the impact of the elimination of the maximum rates on July 1, 2012, per AB 1297. When comparing the total costs in FY 2011-12 to FY 2012-13, there may be an increase in total cost per client due to the elimination of the maximum rates.</p>						
<p>*** % Change is undefined because there were no FY 2011-2012 services in these service types.</p>						

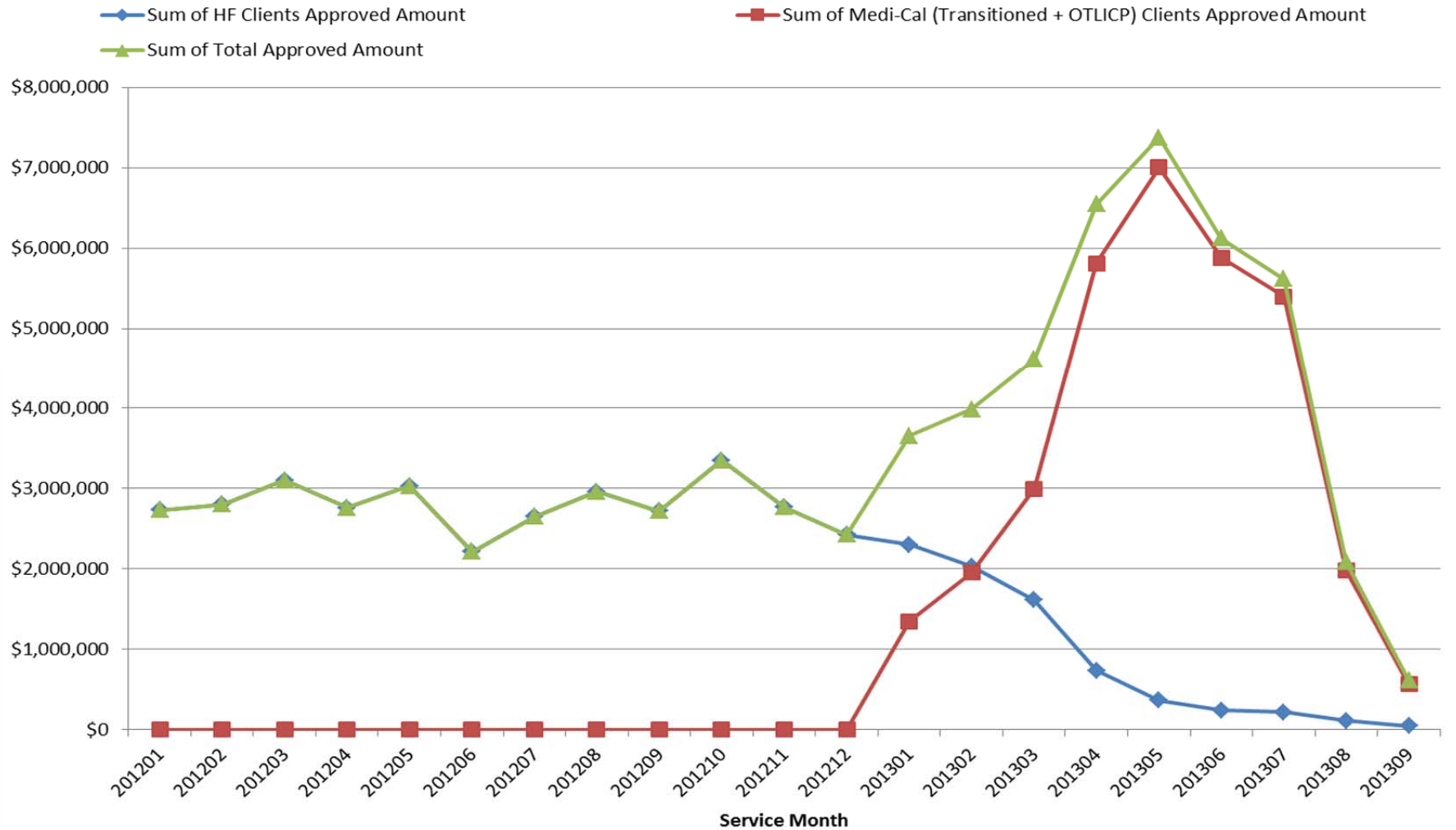
Healthy Families to Medi-Cal Transition				
Estimated and Actual Costs for Clients				
Claims Data as of November 8, 2013 (SDMC) and September 30, 2013 (Psychiatric Inpatient - FFS/MC)				
	SDMC Billed Services		Psychiatric Inpatient - FFS/MC	
	Full-Year Estimate ¹	FY 12-13 Actual	Full-Year Estimate ²	FY 12-13 Actual
New EPSDT Medi-Cal clients as result of HF transition	22,486	7,505	1,931	188
Costs per new client:	\$2,137	\$2,303	\$8,351	\$3,888
Total new costs as result of HF Transition:	\$49,303,432	\$17,281,767	\$16,126,288	\$730,921

¹Based on an April 17, 2012, estimate that assumed a 3.47% penetration rate for specialty mental health outpatient services in the total HFP transition population. Note that FY 2012-13 only represents totals for the HFP and the half-year transition program start-up. Additional clients and costs are expected to accumulate in future reports.

²Based on an April 17, 2012, estimate that assumed a 0.22% penetration rate for specialty mental health psychiatric inpatient services in the total HFP transition population. Note that FY 2012-13 only represents totals for the HFP and the half-year transition program start-up. Additional clients and costs are expected to accumulate in future reports.



Healthy Families Transition Approved Claims Amounts Statewide Summary



Service Type Forecasts

Table of Contents

Children Services Section

Adult Crisis Residential Services.....	38
Adult Residential Services.....	42
Crisis Intervention	46
Crisis Stabilization	50
Day Rehabilitative Half Day.....	54
Day Rehabilitative Full Day	58
Day Treatment Intensive Half Day	62
Day Treatment Intensive Full Day	66
Medication Support	70
Psychiatric Health Facility Services.....	74
Psychiatric Inpatient Hospital Services – SD/MC Hospitals	78
Targeted Case Management.....	83
Therapeutic Behavioral Service	87
Therapy and Other Service Activities	91
Psychiatric Inpatient Hospital Services – FFS/MC Hospitals.....	96

Adult Services Section

Adult Crisis Residential Services.....	100
Adult Residential Services.....	104
Crisis Intervention	108
Crisis Stabilization.....	112
Day Rehabilitative Half Day.....	116
Day Rehabilitative Full Day	120
Day Treatment Intensive Half Day	124
Day Treatment Intensive Full Day	125
Medication Support	129
Psychiatric Health Facility Services.....	133
Psychiatric Inpatient Hospital Services – SD/MC Hospitals	137
Targeted Case Management.....	141
Therapy and Other Service Activities	145
Psychiatric Inpatient Hospital Services – FFS/MC Hospitals.....	150

Adult Crisis Residential Services

Adult Crisis Residential Services (CRS):

Adult crisis residential services provide an alternative to acute psychiatric hospital services for beneficiaries who otherwise would require hospitalization. The CRS programs for adults provide normalized living environments, integrated into residential communities. The services follow a social rehabilitation model that integrates aspects of emergency psychiatric care, psychosocial rehabilitation, milieu therapy, case management and practical social work.

Summary:

The forecast for Adult Crisis Residential Services include statistically unchanging client counts and slight increases in annual costs over the next few fiscal years.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 831,647	178
Actual	FY 2009-10	\$ 860,182	205
Actual	FY 2010-11	\$ 911,478	204
Actual	FY 2011-12	\$ 896,745	234
Actual + Forecast	FY 2012-13	\$ 953,763	216
Actual + Forecast	FY 2013-14	\$ 971,398	221
Forecast	FY 2014-15	\$ 989,032	228

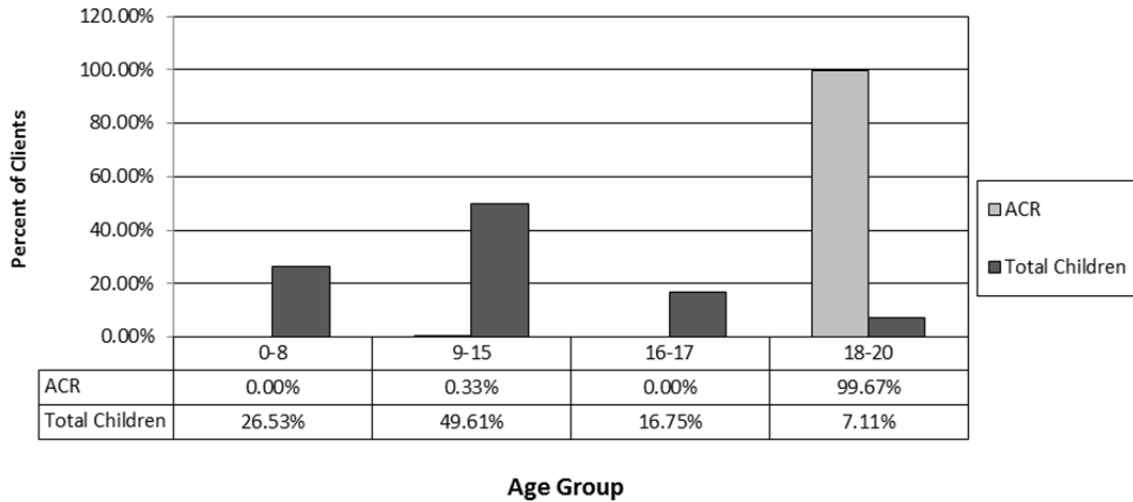
Budget Forecast Narrative:

Slight growth in dollars and clients is expected for FY 2014-15 Adult Crisis Residential Services.

Client Profile Data:

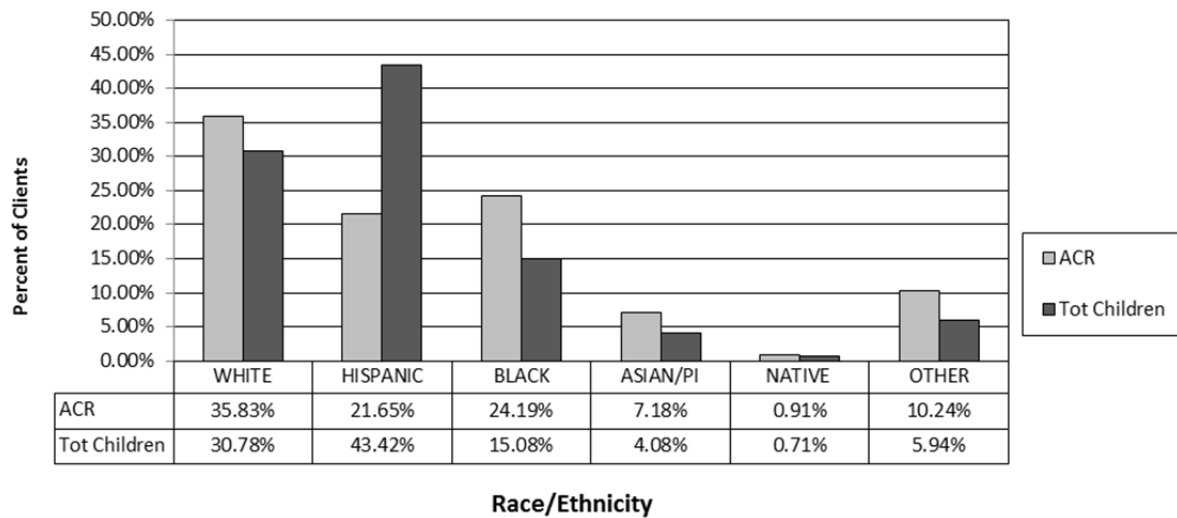
Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 1a
CHILDREN
 Clients Receiving Adult Crisis Residential Services by Age Group
 Fiscal Year 2011-12
 Data as of 06/30/13



Age Group

Table 1b
CHILDREN
 Clients Receiving Adult Crisis Services by Race/Ethnicity
 Fiscal Year 2011-12
 Data as of 06/30/13



Race/Ethnicity

Table 1c
CHILDREN
Clients Receiving Adult Crisis Residential Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

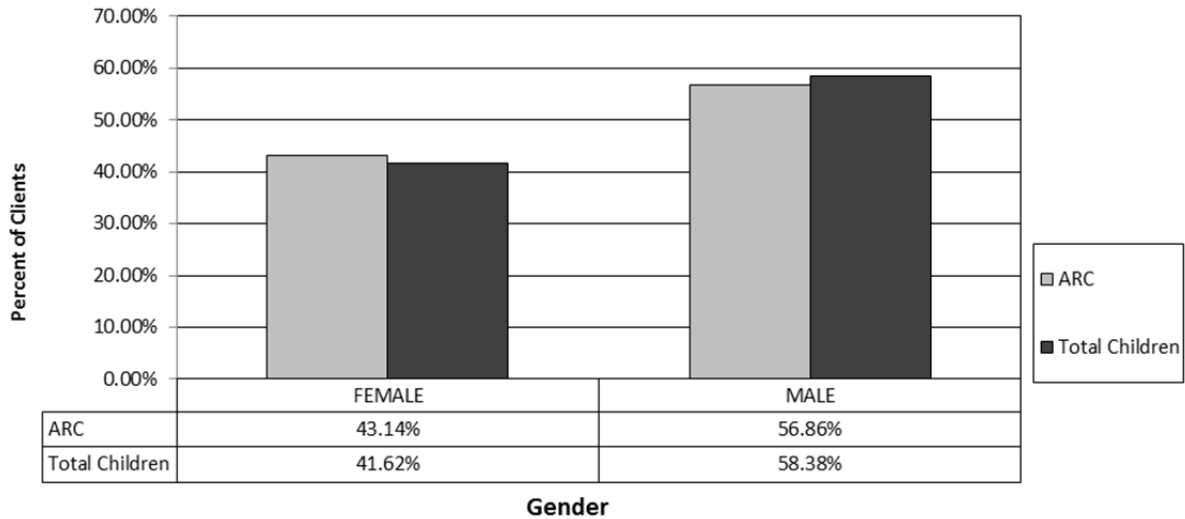


Table 1d
Other Services Received by Children Receiving Adult Crisis Residential Services
Adult Crisis Residential Fiscal Year 2011-12

	Number of Clients	Percentage of Clients
ADULT CRISIS RESIDENTIAL	234	100.00%
MEDICATION SUPPORT	211	90.17%
THERAPY AND OTHER SERVICE ACTIVITIES	198	84.62%
TARGETED CASE MANAGEMENT	172	73.50%
CRISIS INTERVENTION	114	48.72%
FFS-HOSPITAL INPATIENT	99	42.31%
CRISIS STABILIZATION	94	40.17%
HOSPITAL INPATIENT	43	18.38%
PHF	40	17.09%
ADULT RESIDENTIAL	23	9.83%
THERAPEUTIC BEHAVIORAL SERVICES	11	4.70%
DAY TX REHABILITATIVE FULL DAY	6	2.56%
DAY TX INTENSIVE FULL DAY	2	0.85%

Service Metrics:

**Table 1e
Adult Crisis Residential Services Approved Amount
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Amount
Number of Clients	234	100%	\$ 24,612
Mean	\$ 3,832	99%	\$ 19,341
Standard Deviation	\$ 4,112	95%	\$ 12,925
Median	\$ 2,332	90%	\$ 9,103
Mode	\$ 228	75%	\$ 5,170
Interquartile Range	\$ 3,967	50%	\$ 2,332
		25%	

**Table 1f
Adult Crisis Residential Services Days
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Days
Number of Clients	234	100%	73
Mean	13	99%	56
Standard Deviation	13	95%	42
Median	9	90%	29
Mode	1	75%	17
Interquartile Range	12	50%	9
		25%	5

**Table 1g
Historical Trends
Adult Crisis Residential by Fiscal Year**

Data Type	<u>2009-2010</u>	<u>2010-2011</u>	<u>2011-2012</u>	<u>2012-2013*</u>
Number of Clients	205	204	234	216
Number of Days	3,111	3,190	3,076	3,023
Days Per Client	15	16	13	14
Approved Amount	\$860,182	\$911,478	\$896,745	\$953,763

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Data includes actual claims through June 30, 2013.

Adult Residential Services

Adult Residential Treatment Services:

Adult Residential Treatment Services are rehabilitative services provided in a non-institutional, residential setting for beneficiaries who would be at risk of hospitalization or other institutional placement if they were not receiving residential treatment services. The services include a wide range of activities and services that support beneficiaries in their effort to restore, maintain, and apply interpersonal and independent living skills and to access community support systems. Service activities may include assessment, plan development, therapy, rehabilitation, and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

The forecast for Adult Residential Services indicates a decrease in clients and total cost through FY 2014-15.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 1,846,438	127
Actual	FY 2009-10	\$ 1,756,485	130
Actual	FY 2010-11	\$ 1,631,533	115
Actual	FY 2011-12	\$ 1,144,472	98
Actual + Forecast	FY 2012-13	\$ 1,293,366	101
Actual + Forecast	FY 2013-14	\$ 1,199,347	96
Forecast	FY 2014-15	\$ 1,105,328	90

Budget Forecast Narrative:

The forecast indicates a declining trend in costs through FY 2014-15.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 2a
CHILDREN
 Clients Receiving Adult Residential Services by Age Group
 Fiscal Year 2011-12
 Data as of 06/30/13

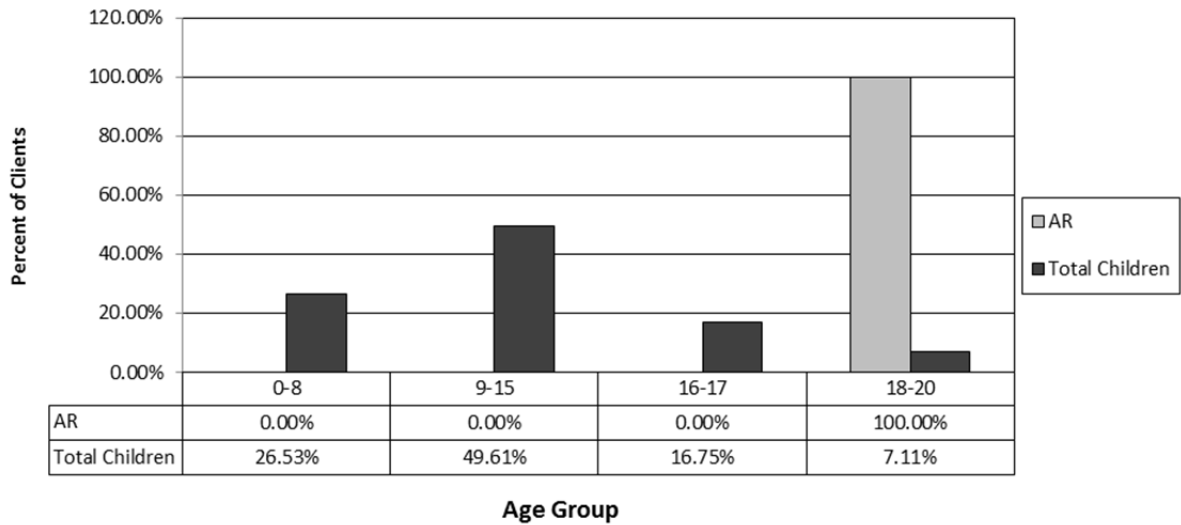


Table 2b
CHILDREN
 Clients Receiving Adult Residential Services by Race/Ethnicity
 Fiscal Year 2011-12
 Data as of 06/30/13

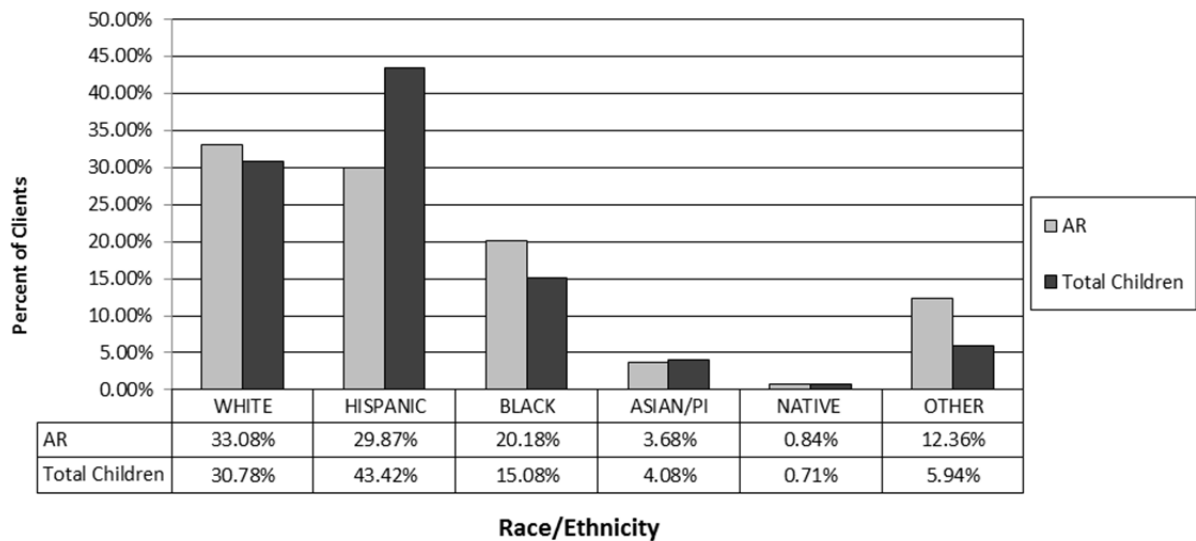


Table 2c
CHILDREN
Clients Receiving Adult Residential Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

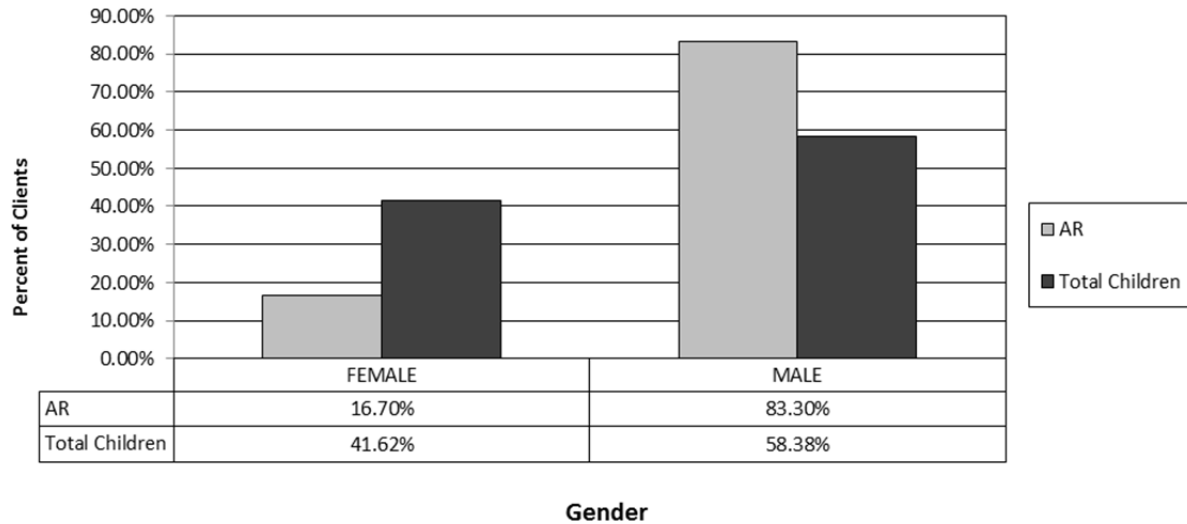


Table 2d
Other Services Received by Children Receiving Adult Residential Service
Fiscal Year 2011-12

	Number of Clients	Percentage of Clients
ADULT RESIDENTIAL	98	100.00%
MEDICATION SUPPORT	92	93.88%
THERAPY AND OTHER SERVICE ACTIVITIES	87	88.78%
TARGETED CASE MANAGEMENT	80	81.63%
CRISIS INTERVENTION	30	30.61%
CRISIS STABILIZATION	29	29.59%
FFS-HOSPITAL INPATIENT	25	25.51%
ADULT CRISIS RESIDENTIAL	23	23.47%
HOSPITAL INPATIENT	15	15.31%
DAY TX INTENSIVE FULL DAY	14	14.29%
DAY TX REHABILITATIVE FULL DAY	9	9.18%
THERAPEUTIC BEHAVIORAL SERVICES	6	6.12%
PHF	4	4.08%
DAY TX REHABILITATIVE HALF DAY	1	1.02%

Service Metrics:

**Table 2e
Adult Residential Approved Amount
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Amount
Number of Clients	98	100%	\$ 52,320
Mean	\$ 11,678	99%	\$ 52,320
Standard Deviation	\$ 11,322	95%	\$ 37,687
Median	\$ 7,629	90%	\$ 28,422
Mode	\$ 1,685	75%	\$ 15,696
Interquartile Range	\$ 11,770	50%	\$ 7,629
		25%	\$ 3,926

**Table 2f
Adult Residential Days
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Days
Number of Clients	98	100%	327
Mean	74	99%	327
Standard Deviation	71	95%	240
Median	49	90%	181
Mode	31	75%	103
Interquartile Range	78	50%	49
		25%	25

**Table 2g
Historical Trends
Adult Residential by Fiscal Year**

<u>Data Type</u>	<u>2009-2010</u>	<u>2010-2011</u>	<u>2011-2012</u>	<u>2012-2013*</u>
Number of Clients	130	115	98	101
Number of Days	12,081	10,519	7,265	8,010
Days Per Client	93	91	74	79
Approved Amount	\$1,756,485	\$1,631,533	\$1,144,472	\$1,293,366

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Crisis Intervention

Crisis Intervention:

Crisis intervention services last less than 24 hours and are for, or on behalf of, a beneficiary for a condition that requires more timely response than a regularly scheduled visit. Service activities include, but are not limited to, assessment, collateral and therapy. Crisis Intervention services may either be face-to-face or by telephone with the beneficiary or the beneficiary’s significant support person and may be provided anywhere in the community.

Summary:

The number of clients and costs are forecast to increase for Crisis Intervention services through FY 2014-15.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 18,041,728	17,423
Actual	FY 2009-10	\$ 17,309,756	16,787
Actual	FY 2010-11	\$ 18,758,488	16,989
Actual	FY 2011-12	\$ 19,205,733	17,038
Actual + Forecast	FY 2012-13	\$ 20,767,803	16,378
Actual + Forecast	FY 2013-14	\$ 21,716,606	16,486
Forecast	FY 2014-15	\$ 22,665,403	16,593

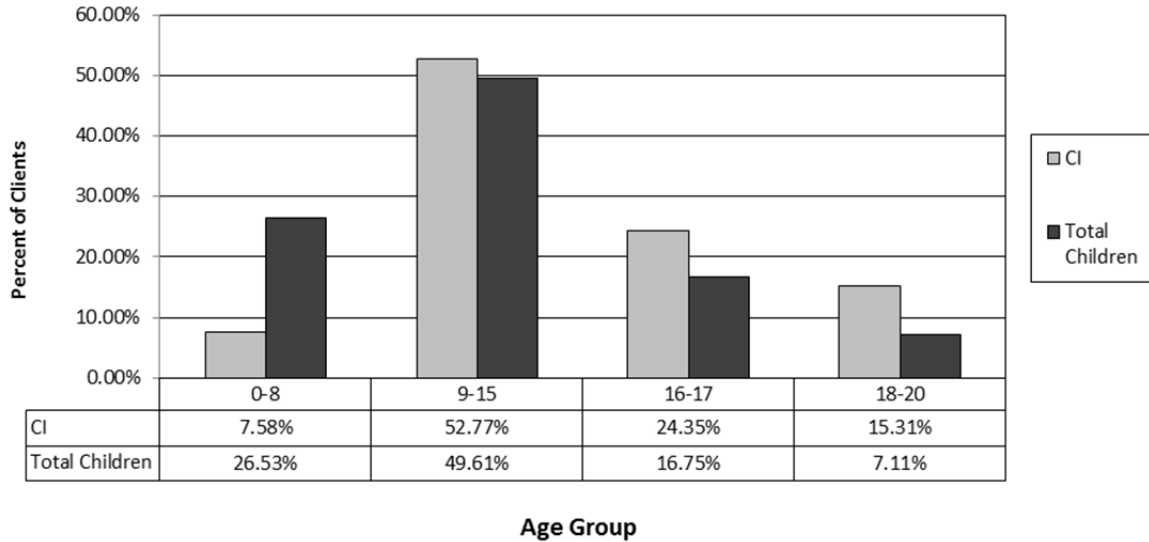
Budget Forecast Narrative:

Costs for Crisis Intervention services are projected to increase through FY 2014-15.

Client Profile Data:

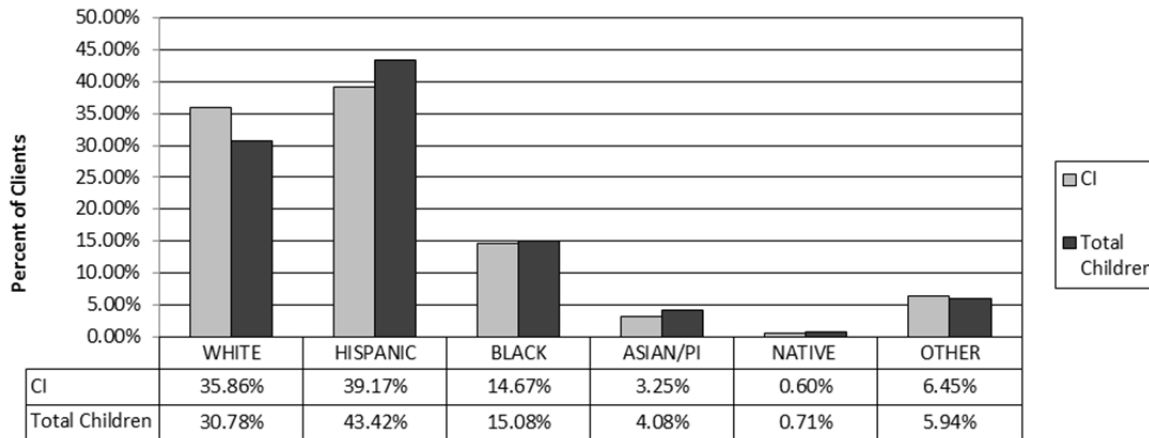
Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 3a
CHILDREN
Clients Receiving Crisis Intervention by Age Group
Fiscal Year 2011-12
Data as of 06/30/13



Age Group

Table 3b
CHILDREN
Clients Receiving Crisis Intervention by Race/Ethnicity
Fiscal Year 2011-12
Data as of 06/30/13



Race/Ethnicity

Table 3c
CHILDREN
Clients Receiving Crisis Intervention by Gender
Fiscal Year 2011-12
Data as of 06/30/13

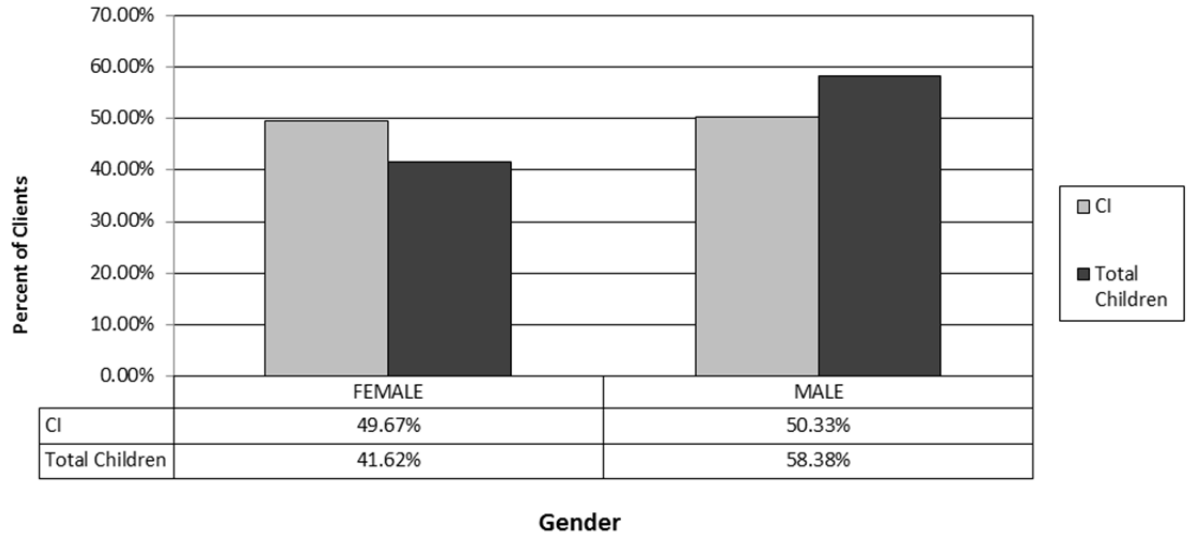


Table 3d
Other Services Received by Children Receiving Crisis Intervention Service
Service Fiscal Year 2011-12

	Number of Clients	Percent of Clients
CRISIS INTERVENTION	17,038	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	14,195	83.31%
TARGETED CASE MANAGEMENT	11,029	64.73%
MEDICATION SUPPORT	10,053	59.00%
FFS-HOSPITAL INPATIENT	4,807	28.21%
CRISIS STABILIZATION	2,566	15.06%
THERAPEUTIC BEHAVIORAL SERVICES	1,982	11.63%
HOSPITAL INPATIENT	1,114	6.54%
DAY TX INTENSIVE FULL DAY	525	3.08%
PHF	330	1.94%
DAY TX REHABILITATIVE FULL DAY	287	1.68%
ADULT CRISIS RESIDENTIAL	114	0.67%
DAY TX INTENSIVE HALF DAY	61	0.36%
ADULT RESIDENTIAL	30	0.18%
DAY TX REHABILITATIVE HALF DAY	12	0.07%

Service Metrics:

**Table 3e
Crisis Intervention Service Approved Amount
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Amount
Number of Clients	17,038	100%	\$ 21,538
Mean	\$ 1,141	99%	\$ 6,602
Standard Deviation	\$ 1,351	95%	\$ 3,504
Median	\$ 718	90%	\$ 2,212
Mode	\$ 1,862	75%	\$ 1,533
Interquartile Range	\$ 1,164	50%	\$ 718
		25%	\$ 369

**Table 3f
Crisis Intervention Service Days
Fiscal Year 2011-12**

Statistic	Minutes	Quartile	Minutes
Number of Clients	17,038	100%	5,975
Mean	310	99%	1,860
Standard Deviation	373	95%	960
Median	198	90%	626
Mode	480	75%	420
Interquartile Range	315	50%	198
		25%	105

**Table 3g
Historical Trends
Crisis Intervention Fiscal Year 2011-12**

<u>Data Type</u>	<u>2009-2010</u>	<u>2010-2011</u>	<u>2011-2012</u>	<u>2012-2013*</u>
Number of Clients	16,787	16,989	17,038	16,378
Number of Minutes	4,630,136	5,077,564	5,280,897	4,882,508
Minutes Per Client	276	299	310	298
Approved Amount	\$17,309,756	\$18,758,488	\$19,205,733	\$20,767,803

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Crisis Stabilization

Crisis Stabilization:

Crisis stabilization services last less than 24 hours and are for, or on behalf of, a beneficiary for a condition that requires a more timely response than a regularly scheduled visit. Service activities include but are not limited to one or more of the following: assessment, collateral, and therapy. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

The forecast for Crisis Stabilization Services is for moderate growth in clients and costs over the next few fiscal years.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 6,285,198	5,243
Actual	FY 2009-10	\$ 7,067,162	5,799
Actual	FY 2010-11	\$ 7,888,616	6,462
Actual	FY 2011-12	\$ 8,806,049	7,091
Actual + Forecast	FY 2012-13	\$ 10,586,920	7,456
Actual + Forecast	FY 2013-14	\$ 11,383,234	7,924
Forecast	FY 2014-15	\$ 12,179,545	8,396

Budget Forecast Narrative:

Moderate growth in costs is forecast through FY 2014-15.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 4a
CHILDREN
Clients Receiving Crisis Stabilization Services by Age Group
Fiscal Year 2011-12
Data as of 06/30/13

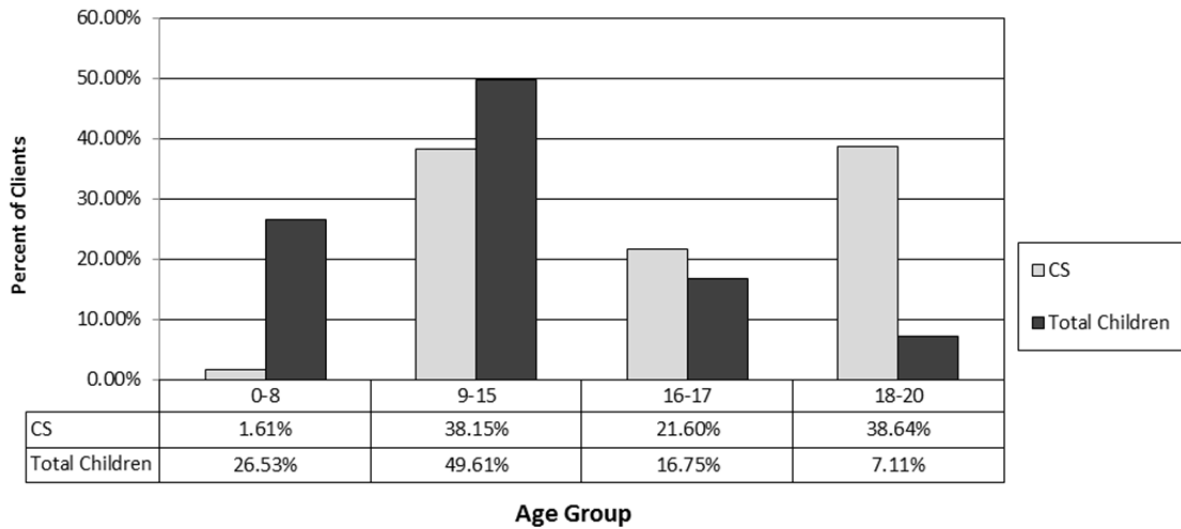


Table 4b
CHILDREN
Clients Receiving Crisis Stabilization Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 06/30/13

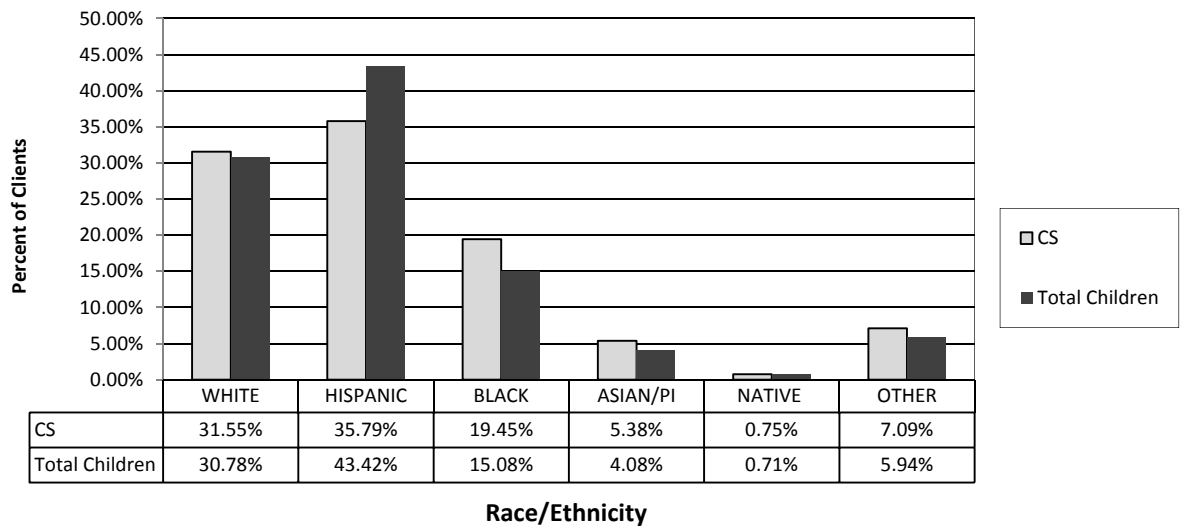


Table 4c
CHILDREN
Clients Receiving Crisis Stabilization Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

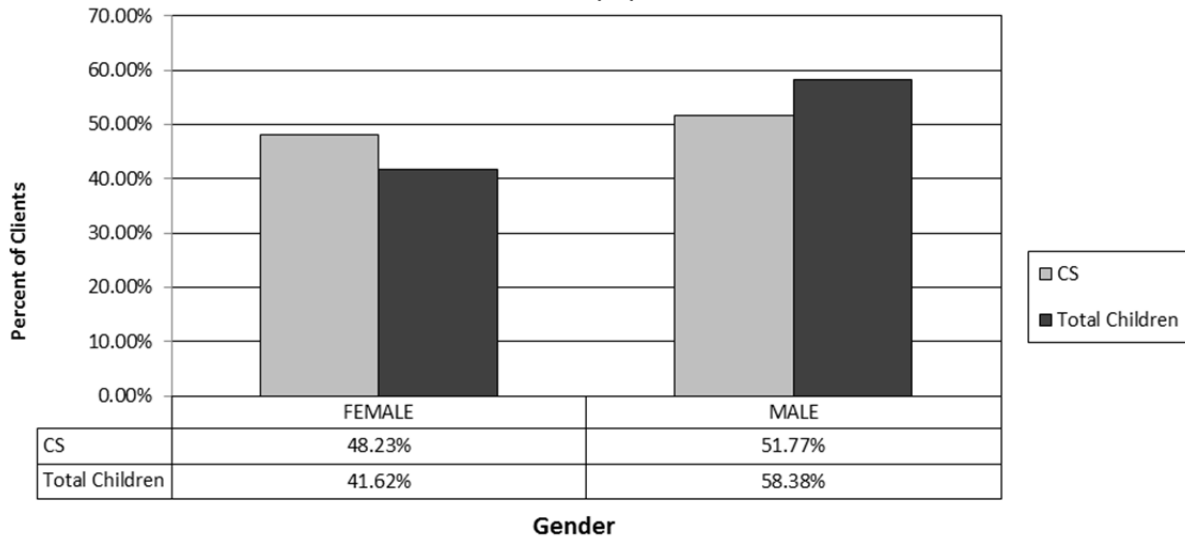


Table 4d
Other Services Received by Children Receiving Crisis Stabilization Service
Fiscal Year 2011-12

	Number of Clients	Percent of Clients
CRISIS STABILIZATION	7,091	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	4,968	70.06%
MEDICATION SUPPORT	3,928	55.39%
TARGETED CASE MANAGEMENT	3,572	50.37%
CRISIS INTERVENTION	2,566	36.19%
FFS-HOSPITAL INPATIENT	2,432	34.30%
HOSPITAL INPATIENT	982	13.85%
THERAPEUTIC BEHAVIORAL SERVICES	773	10.90%
PHF	329	4.64%
DAY TX INTENSIVE FULL DAY	324	4.57%
DAY TX REHABILITATIVE FULL DAY	146	2.06%
ADULT CRISIS RESIDENTIAL	94	1.33%
DAY TX INTENSIVE HALF DAY	33	0.47%
ADULT RESIDENTIAL	29	0.41%
DAY TX REHABILITATIVE HALF DAY	5	0.07%

Service Metrics:

**Table 4e
Crisis Stabilization Approved Amount
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Amount
Number of Clients	7,091	100%	\$ 32,805
Mean	\$ 1,260	99%	\$ 7,091
Standard Deviation	\$ 1,468	95%	\$ 3,782
Median	\$ 851	90%	\$ 2,553
Mode	\$ 1,891	75%	\$ 1,796
Interquartile Range	\$ 1,456	50%	\$ 851
		25%	\$ 340

**Table 4f
Crisis Stabilization Days
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Days
Number of Clients	7,091	100%	347
Mean	14	99%	78
Standard Deviation	16	95%	40
Median	10	90%	28
Mode	20	75%	20
Interquartile Range	16	50%	10
		25%	4

**Table 4g
Historical Trends
Crisis Stabilization by Fiscal Year**

<u>Data Type</u>	<u>2009-2010</u>	<u>2010-2011</u>	<u>2011-2012</u>	<u>2012-2013*</u>
Number of Clients	5,799	6,462	7,091	7,456
Number of Hours	76,811	86,746	97,568	102,985
Hours Per Client	13	13	14	14
Approved Amount	\$ 7,067,162	\$ 7,888,616	\$ 8,806,049	\$ 10,586,920

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Day Rehabilitative Half Day

Day Rehabilitative (Half-Day):

Day rehabilitation services are a structured program of rehabilitation and therapy with services to improve, maintain or restore personal independence and functioning, consistent with requirements for learning and development and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to assessment, plan development, therapy, rehabilitation and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

For Day Rehabilitative Half Day Services, the forecast for FY 2014-15 is for a decline in both dollars and clients.

The reduction in the use of Day Treatment and Day Rehabilitation Half Day and Full Day services is due to counties using more community based services to achieve the same or better outcomes with less costly services. Counties are serving fewer children in group home and non-public school settings, which are the primary providers of day treatment and day rehabilitation services. This is due to the implementation of Mental Health Services Act (MHSA) Full Service Partnerships, the Katie A. lawsuit, and other innovations that allow counties to effectively meet the needs of clients at home rather than institutional settings.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 1,315,612	189
Actual	FY 2009-10	\$ 1,393,141	175
Actual	FY 2010-11	\$ 1,395,605	127
Actual	FY 2011-12	\$ 904,599	102
Actual + Forecast	FY 2012-13	\$ 567,615	64
Actual + Forecast	FY 2013-14	\$ 460,563	52
Forecast	FY 2014-15	\$ 353,513	37

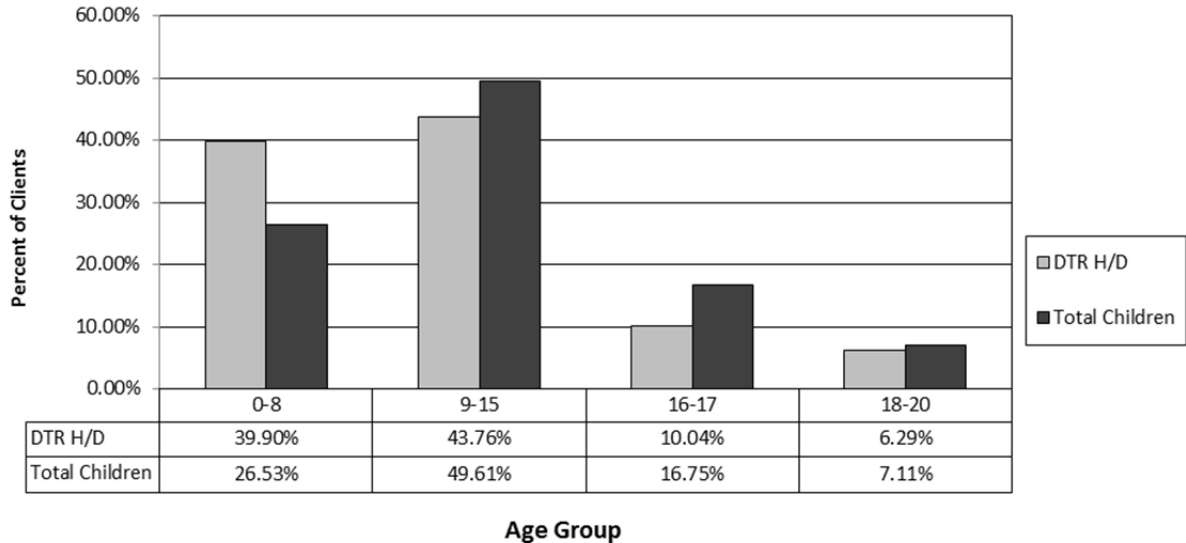
Budget Forecast Narrative:

Day Rehabilitative Half Day service costs are forecast to decline through FY 2014-15.

Client Profile Data:

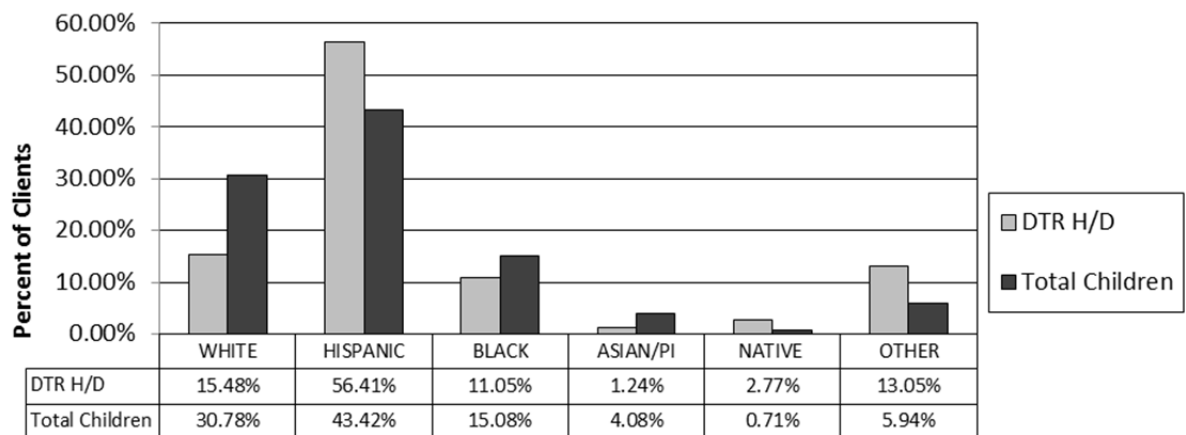
Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 5a
CHILDREN
Clients Receiving Day Treatment Rehabilitative-Half Day Services by Age Group
Fiscal Year 2011-12
Data as of 06/30/13



Age Group

Table 5b
CHILDREN
Clients Receiving Day Treatment Rehabilitative-Half Day Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 06/30/13



Race/Ethnicity

Table 5c
CHILDREN
Clients Receiving Day Treatment Rehabilitative-Half Day Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

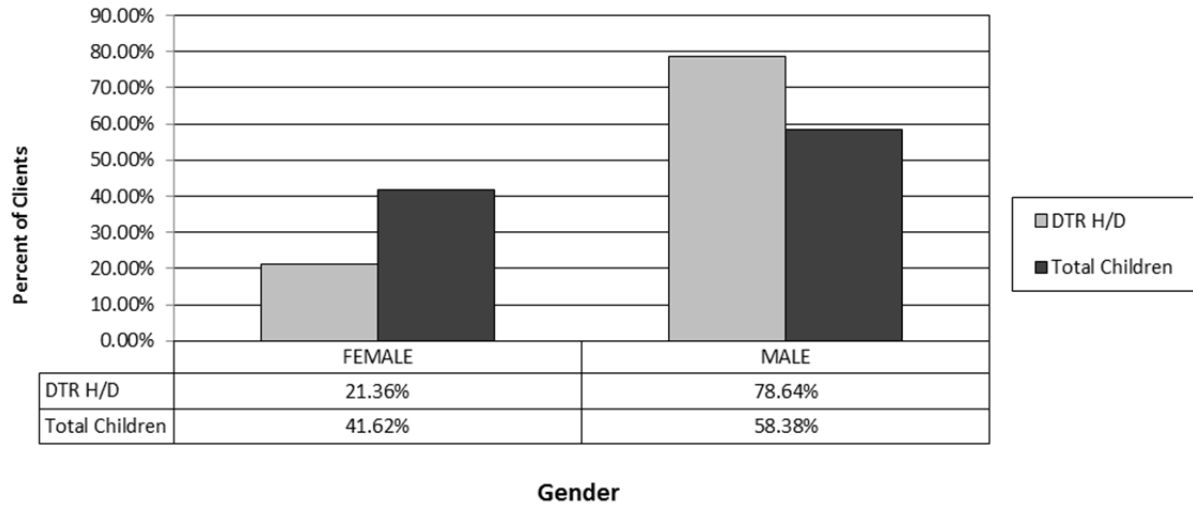


Table 5d
Other Services Received by Children Receiving Day Rehabilitative Half Day Services
Fiscal Year 2011-12

	Number of Clients	Percent of Clients
DAY TX REHABILITATIVE HALF DAY	102	100.00%
MEDICATION SUPPORT	65	63.73%
THERAPY AND OTHER SERVICE ACTIVITIES	65	63.73%
TARGETED CASE MANAGEMENT	54	52.94%
DAY TX REHABILITATIVE FULL DAY	17	16.67%
CRISIS INTERVENTION	12	11.76%
THERAPEUTIC BEHAVIORAL SERVICES	11	10.78%
CRISIS STABILIZATION	5	4.90%
DAY TX INTENSIVE FULL DAY	5	4.90%
FFS-HOSPITAL INPATIENT	4	3.92%
ADULT RESIDENTIAL	1	0.98%

Service Metrics:

Table 5e
Day Rehabilitative Half Day Approved Amount
Fiscal Year 2011-12

Statistic	Amount	Quartile	Amount
Number of Clients	102	100%	\$ 26,117
Mean	\$ 8,869	99%	\$ 25,198
Standard Deviation	\$ 7,808	95%	\$ 23,623
Median	\$ 5,531	90%	\$ 20,011
Mode	\$ 1,312	75%	\$ 15,387
Interquartile Range	\$ 13,704	50%	\$ 5,531
		25%	\$ 1,682

Table 5f
Day Rehabilitative Half Days
Fiscal Year 2011-12

Statistic	Amount	Quartile	Days
Number of Clients	102	100%	239
Mean	92	99%	238
Standard Deviation	79	95%	230
Median	58	90%	199
Mode	6	75%	173
Interquartile Range	154	50%	58
		25%	19

Table 5g
Historical Trends
Day Rehabilitative Half Day by Fiscal Year

<u>Data Type</u>	<u>2009-2010</u>	<u>2010-2011</u>	<u>2011-2012</u>	<u>2012-2013*</u>
Number of Clients	175	127	102	64
Number of Days	16,200	14,239	9,358	6,256
Days Per Client	93	112	92	98
Approved Amount	\$ 1,393,141	\$ 1,395,605	\$ 904,599	\$ 567,615

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Day Rehabilitative Full Day

Day Rehabilitative (Full-Day):

Day rehabilitation services are a structured program of rehabilitation and therapy with services to improve, maintain or restore personal independence and functioning, consistent with requirements for learning and development and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to assessment, plan development, therapy, rehabilitation and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

The forecast for Day Rehabilitative Full Day Services shows a decrease in clients and cost through SFY 2014-15.

The reduction in the use of Day Treatment and Day Rehabilitation Half Day and Full Day services is due to counties using more community based services to achieve the same or better outcomes with less costly services. Counties are serving fewer children in group home and non-public school settings, which are the primary providers of day treatment and day rehabilitation services. This is due to the implementation of Mental Health Services Act (MHSA) Full Service Partnerships, the Katie A. lawsuit, and other innovations that allow counties to effectively meet the needs of clients at home rather than institutional settings.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 20,496,465	2,493
Actual	FY 2009-10	\$ 16,981,995	2,203
Actual	FY 2010-11	\$ 13,641,791	1,481
Actual	FY 2011-12	\$ 14,337,165	1,759
Actual + Forecast	FY 2012-13	\$ 16,061,360	1,832
Actual + Forecast	FY 2013-14	\$ 14,329,712	1,671
Forecast	FY 2014-15	\$ 12,598,064	1,510

Budget Forecast Narrative:

Day Rehabilitation Full Day costs are forecast to decline sharply through FY 2014-15.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 6a
CHILDREN
Clients Receiving Day Treatment Rehabilitative-Full Day Services by Age Group
Fiscal Year 2011-12
Data as of 06/30/13

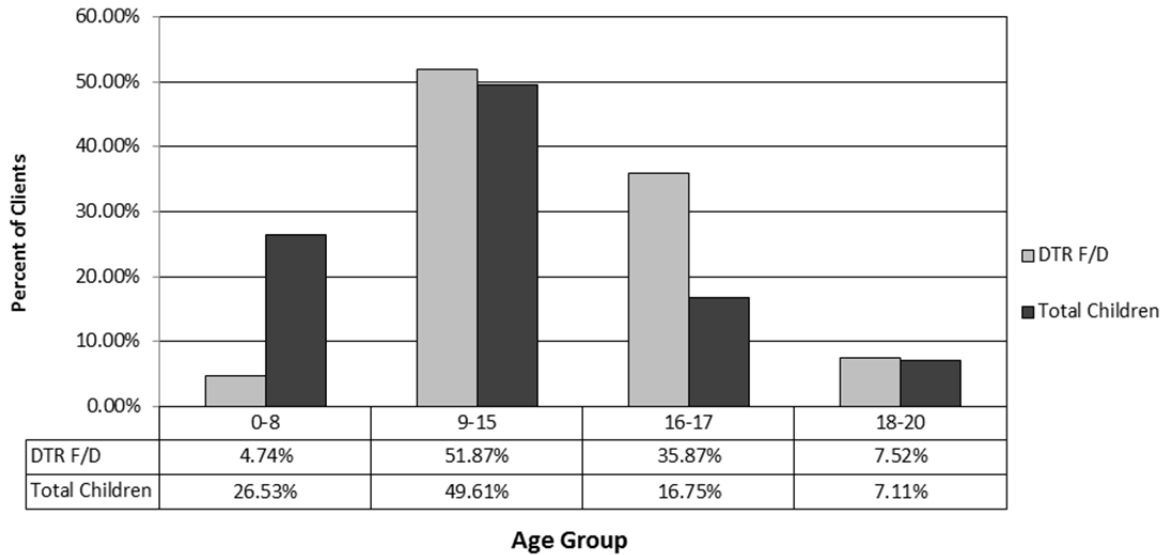


Table 6b
CHILDREN
Clients Receiving Day Treatment Rehabilitative-Full Day Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 06/30/13

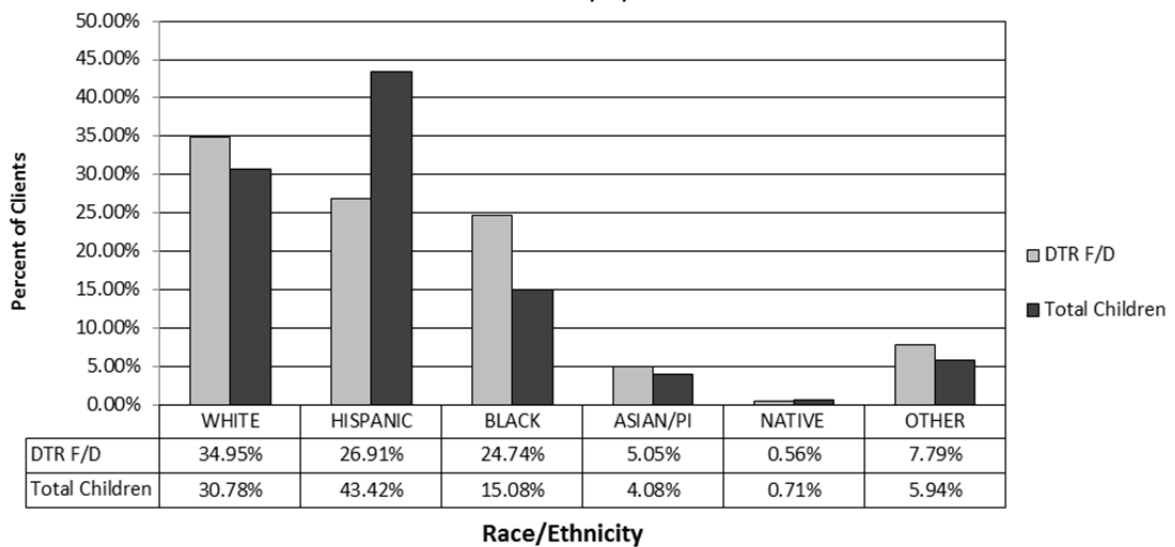


Table 6c
CHILDREN
Clients Receiving Day Treatment Rehabilitative-Full Day Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

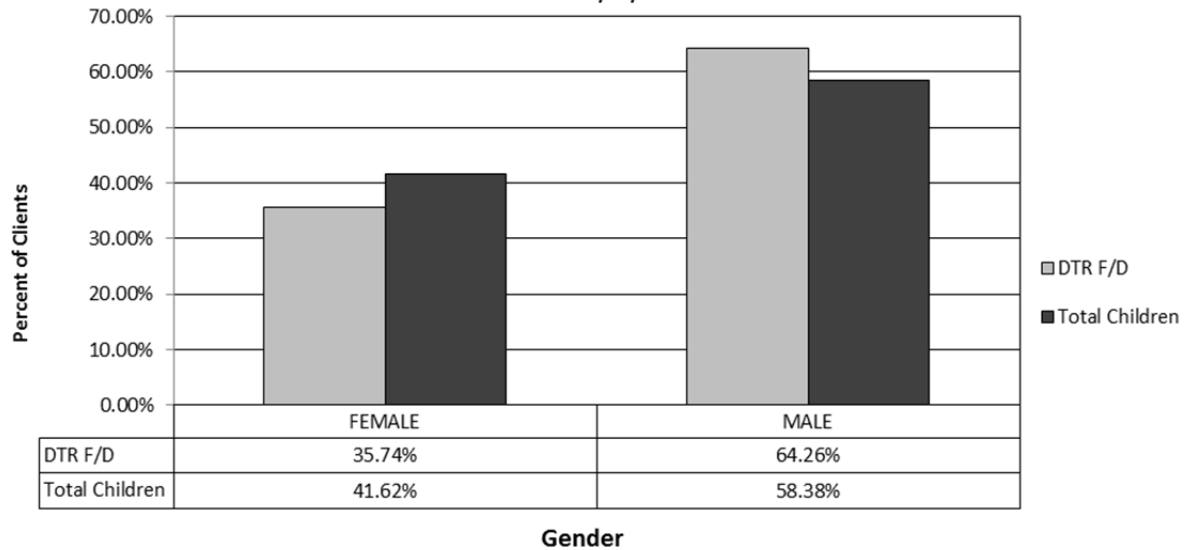


Table 6d
Other Services Received by Children Receiving Day Rehabilitative Full Day Services
Fiscal Year 2011-12

	Number of Clients	Percent of Clients
DAY TX REHABILITATIVE FULL DAY	1,759	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	1,233	70.10%
MEDICATION SUPPORT	1,175	66.80%
TARGETED CASE MANAGEMENT	712	40.48%
CRISIS INTERVENTION	287	16.32%
THERAPEUTIC BEHAVIORAL SERVICES	253	14.38%
DAY TX INTENSIVE FULL DAY	241	13.70%
FFS-HOSPITAL INPATIENT	181	10.29%
CRISIS STABILIZATION	146	8.30%
HOSPITAL INPATIENT	69	3.92%
DAY TX INTENSIVE HALF DAY	56	3.18%
PHF	28	1.59%
DAY TX REHABILITATIVE HALF DAY	17	0.97%
ADULT RESIDENTIAL	9	0.51%
ADULT CRISIS RESIDENTIAL	6	0.34%

Service Metrics:

**Table 6e
Day Rehabilitative Full Day Approved Amount
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Amount
Number of Clients	1,759	100%	\$ 43,178
Mean	\$ 8,160	99%	\$ 30,054
Standard Deviation	\$ 8,126	95%	\$ 24,432
Median	\$ 4,930	90%	\$ 21,655
Mode	\$ 656	75%	\$ 12,862
Interquartile Range	\$ 11,287	50%	\$ 4,930
		25%	\$ 1,575

**Table 6f
Day Rehabilitative Full Days
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Days
Number of Clients	1,759	100%	344
Mean	69	99%	248
Standard Deviation	69	95%	214
Median	42	90%	176
Mode	4	75%	108
Interquartile Range	96	50%	42
		25%	12

**Table 6g
Historical Trends
Day Rehabilitative Full Day by Fiscal Year**

<u>Data Type</u>	<u>2009-2010</u>	<u>2010-2011</u>	<u>2011-2012</u>	<u>2012-2013*</u>
Number of Clients	2,203	1,481	1,759	1,832
Number of Days	150,231	116,242	120,580	125,556
Days Per Client	68	78	69	69
Approved Amount	\$ 16,981,995	\$ 13,641,791	\$ 14,337,165	\$ 16,061,360

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Day Treatment Intensive Half Day

Day Treatment Intensive (Half-Day):

Day treatment intensive services are a structured, multi-disciplinary program of therapy that may be used as an alternative to hospitalization, or to avoid placement in a more restrictive setting, or to maintain the client in a community setting and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to, assessment, plan development, therapy, rehabilitation and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

The forecast for Day Treatment Intensive Half Day Services is for a sharp decrease in the number of clients and related costs.

The reduction in the use of Day Treatment and Day Rehabilitation Half Day and Full Day services is due to counties using more community based services to achieve the same or better outcomes with less costly services. Counties are serving fewer children in group home and non-public school settings, which are the primary providers of day treatment and day rehabilitation services. This is due to the implementation of Mental Health Services Act (MHSA) Full Service Partnerships, the Katie A. lawsuit, and other innovations that allow counties to effectively meet the needs of clients at home rather than institutional settings.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$2,867,165	394
Actual	FY 2009-10	\$2,678,755	284
Actual	FY 2010-11	\$819,123*	228
Actual	FY 2011-12	\$2,350,030	216
Actual + Forecast	FY 2012-13	\$314,964	10
Actual + Forecast	FY 2013-14	\$0	0
Forecast	FY 2014-15	\$0	0

*The forecast dollars are unreasonably low due to a reporting error by San Diego county that year

Budget Forecast Narrative:

There has been a sharp decline in cost with Day Treatment Intensive Half Day services over the past few years. The forecast is for zero dollars in FY 2014-15 with zero clients served in this capacity.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 7a
CHILDREN
Clients Receiving Day Treatment Intensive-Half Day Services by Age Group
Fiscal Year 2011-12
Data as of 06/30/13

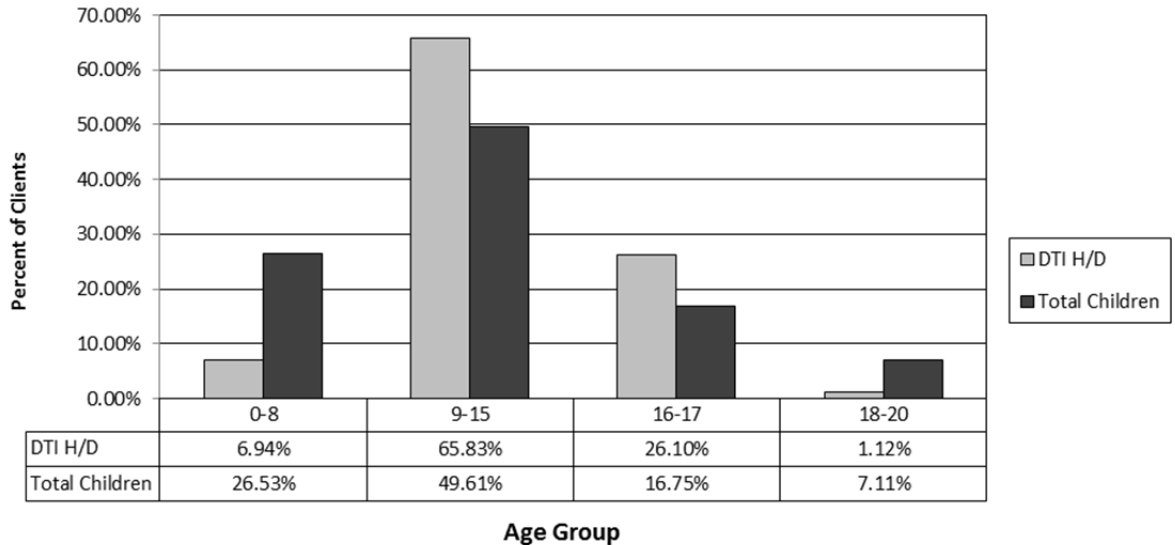


Table 7b
CHILDREN
Clients Receiving Day Treatment Intensive-Half Day Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 06/30/13

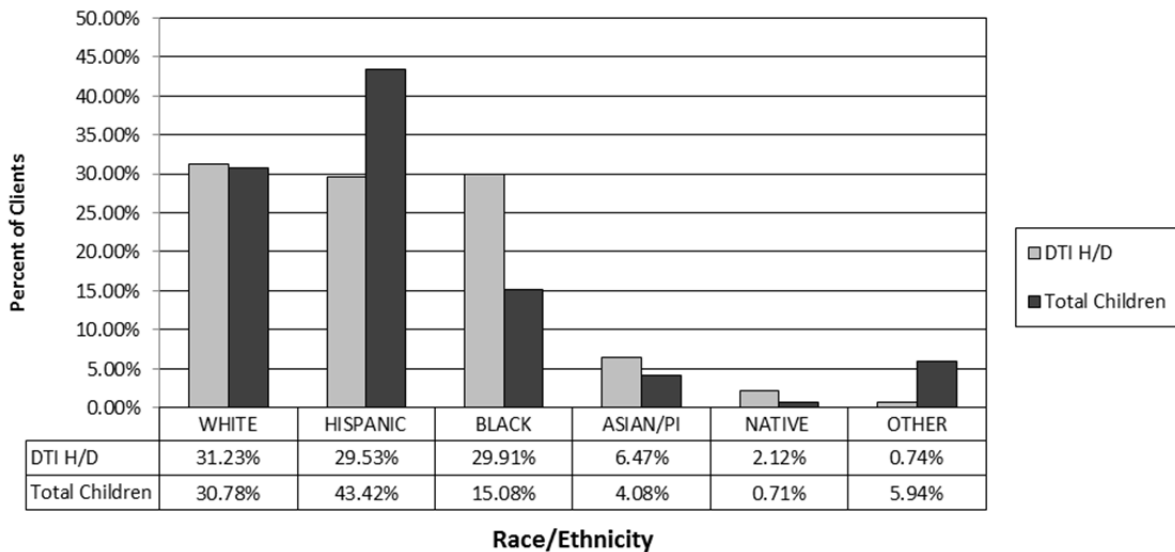


Table 7c
CHILDREN
Clients Receiving Day Treatment Intensive-Half Day Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

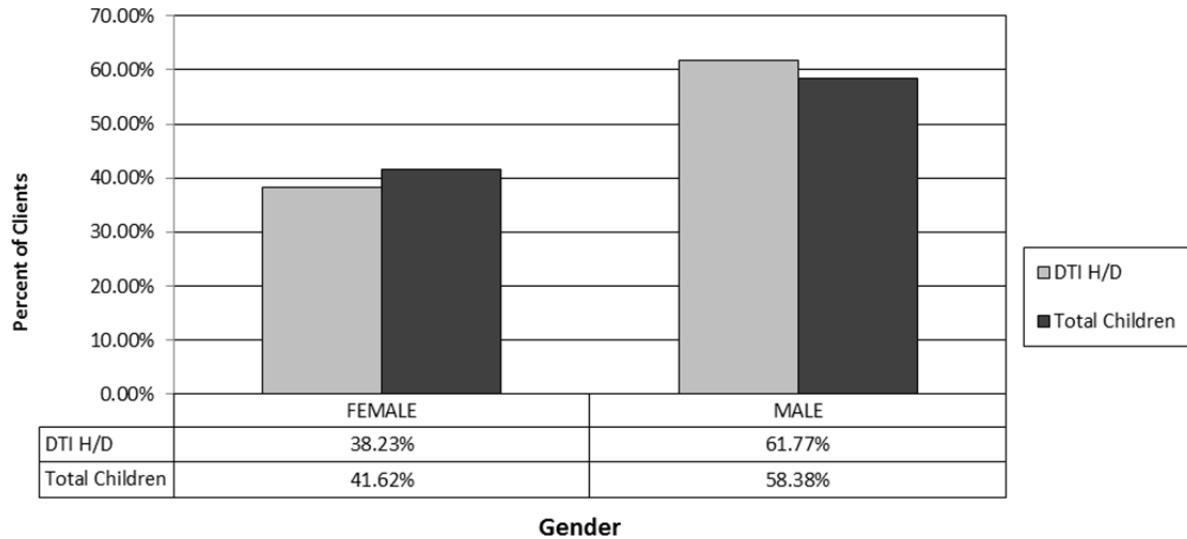


Table 7d
Other Services Received by Children Receiving Day Treatment Intensive Half Day Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
DAY TX INTENSIVE HALF DAY	216	100.00%
MEDICATION SUPPORT	213	98.61%
THERAPY AND OTHER SERVICE ACTIVITIES	147	68.06%
THERAPEUTIC BEHAVIORAL SERVICES	95	43.98%
TARGETED CASE MANAGEMENT	79	36.57%
DAY TX INTENSIVE FULL DAY	62	28.70%
CRISIS INTERVENTION	61	28.24%
DAY TX REHABILITATIVE FULL DAY	56	25.93%
FFS-HOSPITAL INPATIENT	36	16.67%
CRISIS STABILIZATION	33	15.28%
HOSPITAL INPATIENT	33	15.28%
PHF	2	0.93%

Service Metrics:

**Table 7e
 Day Treatment Intensive Half Day Approved Amount
 Fiscal Year 2011-12**

Statistic	Amount	Quartile	Amount
Number of Clients	216	100%	\$ 26,865
Mean	\$ 10,880	99%	\$ 26,865
Standard Deviation	\$ 8,600	95%	\$ 26,235
Median	\$ 10,074	90%	\$ 24,661
Mode	\$ 525	75%	\$ 17,473
Interquartile Range	\$ 14,744	50%	\$ 10,074
		25%	\$ 2,728

**Table 7f
 Day Treatment Intensive Half Day Facility Days
 Fiscal Year 2011-12**

Statistic	Amount	Quartile	Days
Number of Clients	216	100%	256
Mean	102	99%	256
Standard Deviation	81	95%	250
Median	96	90%	232
Mode	6	75%	164
Interquartile Range	142	50%	96
		25%	22

**Table 7g
 Historical Trends
 Day Treatment Intensive Half Day by Fiscal Year**

<u>Data Type</u>	<u>2009-2010</u>	<u>2010-2011</u>	<u>2011-2012</u>	<u>2012-2013*</u>
Number of Clients	284	228	216	10
Number of Days	25,738	23,151	22,056	3,159
Days Per Client	91	102	102	316
Approved Amount	\$ 2,678,755	\$ 819,123	\$ 2,350,030	\$ 314,964

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Day Treatment Intensive Full Day

Day Treatment Intensive (Full-Day):

Day treatment intensive services are a structured, multi-disciplinary program of therapy that may be used as an alternative to hospitalization, or to avoid placement in a more restrictive setting, or to maintain the client in a community setting and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to, assessment, plan development, therapy, rehabilitation and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

There has been a sharp decline in costs and clients with Day Treatment Intensive Full Day services over the past few years. The forecast for Day Treatment Intensive Full Day Services is for continued decreases in clients and costs.

The reduction in the use of Day Treatment and Day Rehabilitation Half Day and Full Day services is due to counties using more community based services to achieve the same or better outcomes with less costly services. Counties are serving fewer children in group home and non-public school settings, which are the primary providers of day treatment and day rehabilitation services. This is due to the implementation of Mental Health Services Act (MHSA) Full Service Partnerships, the Katie A. lawsuit, and other innovations that allow counties to effectively meet the needs of clients at home rather than institutional settings.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 51,103,346	2,916
Actual	FY 2009-10	\$ 45,479,444	2,657
Actual	FY 2010-11	\$ 41,564,585	2,369
Actual	FY 2011-12	\$ 39,250,638	2,293
Actual + Forecast	FY 2012-13	\$ 32,920,272	1,792
Actual + Forecast	FY 2013-14	\$ 29,715,593	1,588
Forecast	FY 2014-15	\$ 26,510,916	1,380

Budget Forecast Narrative:

Costs are expected to decline through FY 2014-15.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 8a
CHILDREN
 Clients Receiving Day Treatment Intensive-Full Day Services by Age Group
 Fiscal Year 2011-12
 Data as of 06/30/13

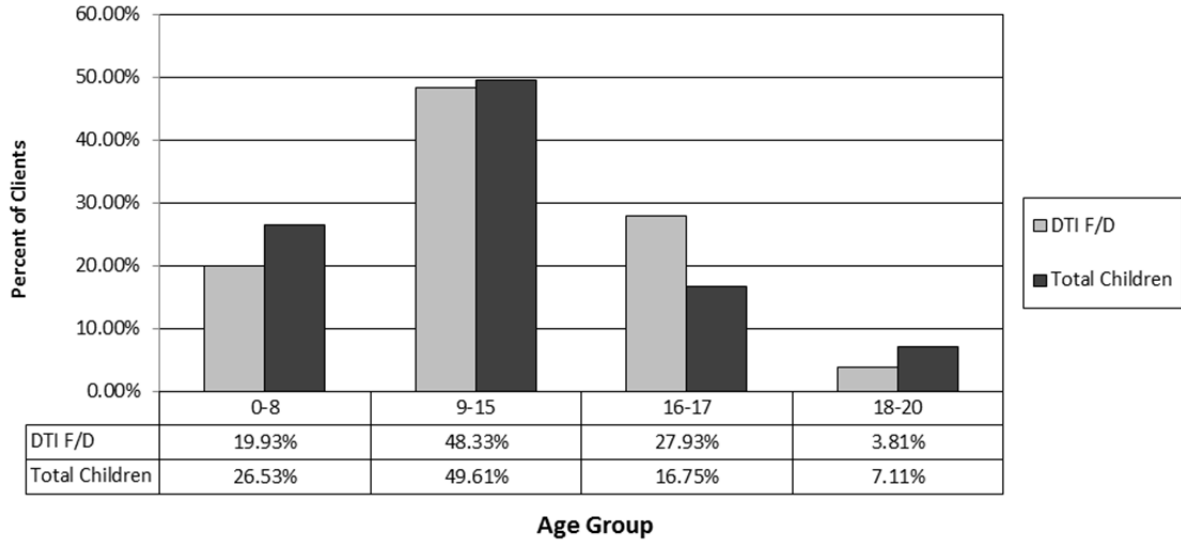


Table 8b
CHILDREN
 Clients Receiving Day Treatment Intensive-Full Day Services by Race/Ethnicity
 Fiscal Year 2011-12
 Data as of 06/30/13

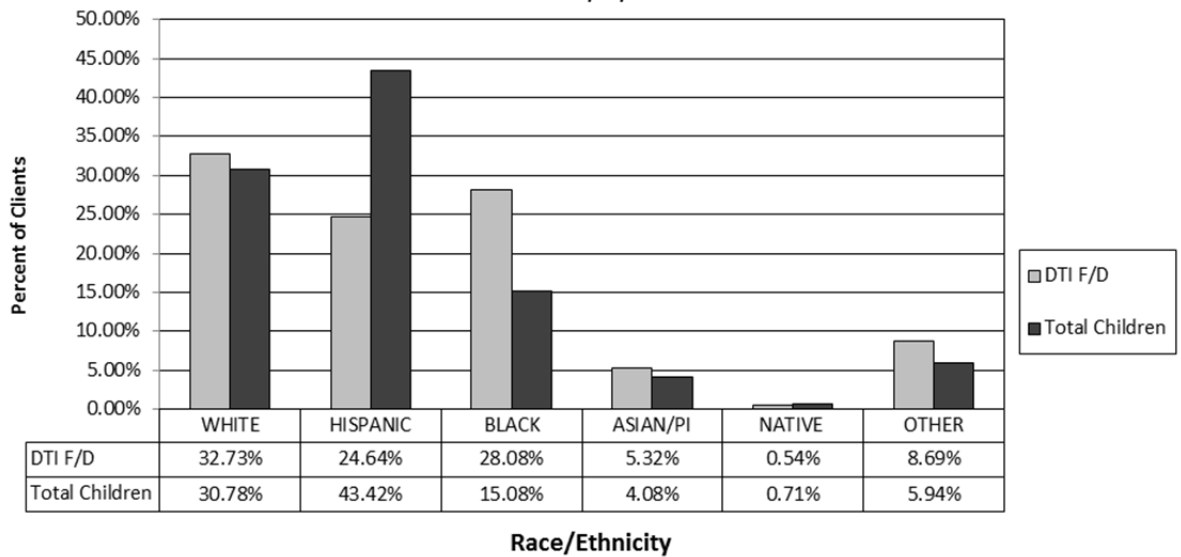


Table 8c
CHILDREN
Clients Receiving Day Treatment Intensive-Full Day Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

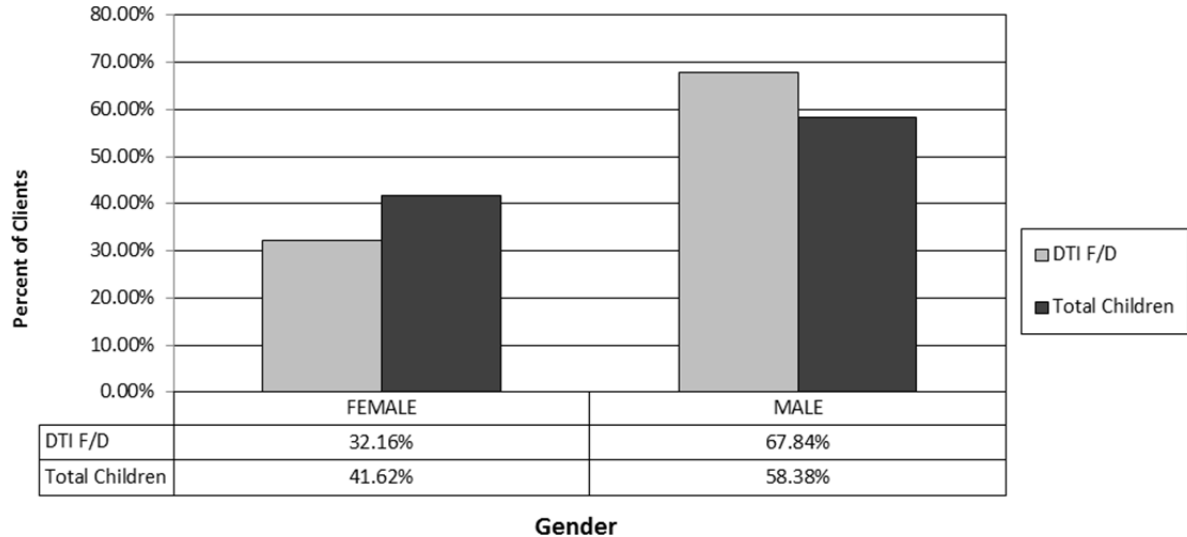


Table 8d
Other Services Received by Children Receiving Day Treatment Intensive Full Day Services
Fiscal Year 2011-12

	Number of Clients	Percent of Clients
DAY TX INTENSIVE FULL DAY	2,293	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	1,869	81.51%
MEDICATION SUPPORT	1,768	94.60%
TARGETED CASE MANAGEMENT	1,348	76.24%
THERAPEUTIC BEHAVIORAL SERVICES	554	41.10%
CRISIS INTERVENTION	525	94.77%
CRISIS STABILIZATION	324	61.71%
FFS-HOSPITAL INPATIENT	322	99.38%
DAY TX REHABILITATIVE FULL DAY	241	74.84%
PHF	117	48.55%
HOSPITAL INPATIENT	95	81.20%
DAY TX INTENSIVE HALF DAY	62	65.26%
ADULT RESIDENTIAL	14	22.58%
DAY TX REHABILITATIVE HALF DAY	5	35.71%
ADULT CRISIS RESIDENTIAL	2	40.00%

Service Metrics:

**Table 8e
Day Treatment Intensive Full Day Approved Amount
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Amount
Number of Clients	2,293	100%	\$ 56,894
Mean	\$ 17,208	99%	\$ 48,178
Standard Deviation	\$ 13,540	95%	\$ 42,105
Median	\$ 13,968	90%	\$ 37,752
Mode	\$ 202	75%	\$ 27,637
Interquartile Range	\$ 22,306	50%	\$ 13,968
		25%	\$ 5,331

**Table 8f
Day Treatment Intensive Full Days
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Days
Number of Clients	2,293	100%	338
Mean	92	99%	243
Standard Deviation	71	95%	218
Median	78	90%	200
Mode	-	75%	149
Interquartile Range	119	50%	78
		25%	30

**Table 8g
Historical Trends
Day Treatment Intensive Full Day by Fiscal Year**

Data Type	2009-2010	2010-2011	2011-2012	2012-2013*
Number of Clients	2,657	2,369	2,293	1,792
Number of Days	252,788	225,141	210,679	164,246
Days Per Client	95	95	92	92
Approved Amount	\$ 45,479,444	\$ 41,564,585	\$ 39,250,638	\$ 32,920,272

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Medication Support

Medication Support:

Medication support services include prescribing, administering, dispensing and monitoring of psychiatric medications or biologicals that are necessary to alleviate the symptoms of mental illness. Service activities may include but are not limited to: evaluation of the need for medication; evaluation of clinical effectiveness and side effects; obtaining informed consent; instruction in the use, risks and benefits of, and alternatives for, medication; collateral and plan development related to the delivery of service and/or assessment for the client; prescribing, administering, dispensing and monitoring of psychiatric medications or biologicals; and medication education.

Summary:

The number of unduplicated clients is forecast to decrease slightly with an overall increase in costs per minute and total costs through FY 2014-15.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 90,778,784	69,283
Actual	FY 2009-10	\$ 92,646,574	70,149
Actual	FY 2010-11	\$ 95,674,949	70,840
Actual	FY 2011-12	\$ 98,266,243	73,427
Actual + Forecast	FY 2012-13	\$ 103,345,823	72,622
Actual + Forecast	FY 2013-14	\$ 107,277,345	74,163
Forecast	FY 2014-15	\$ 111,208,869	75,704

Budget Forecast Narrative:

The Medication Support costs are expected to increase through FY 2014-15.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 9a
CHILDREN
 Clients Receiving Medication Support Services by Age Group
 Fiscal Year 2011-12
 Data as of 06/30/13

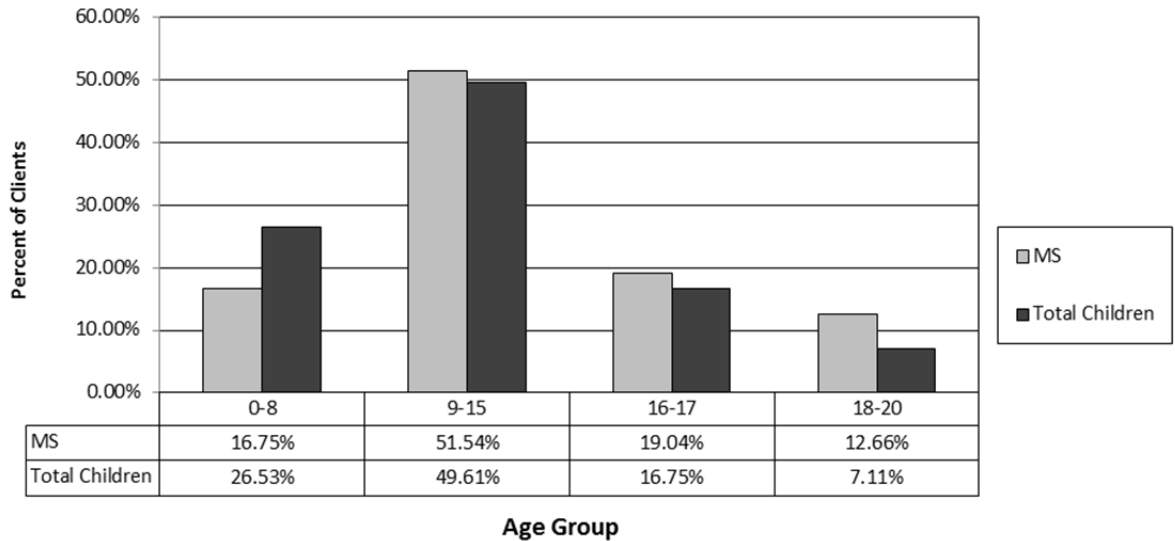


Table 9b
CHILDREN
 Clients Receiving Medication Support Services by Race/Ethnicity
 Fiscal Year 2011-12
 Data as of 06/30/13

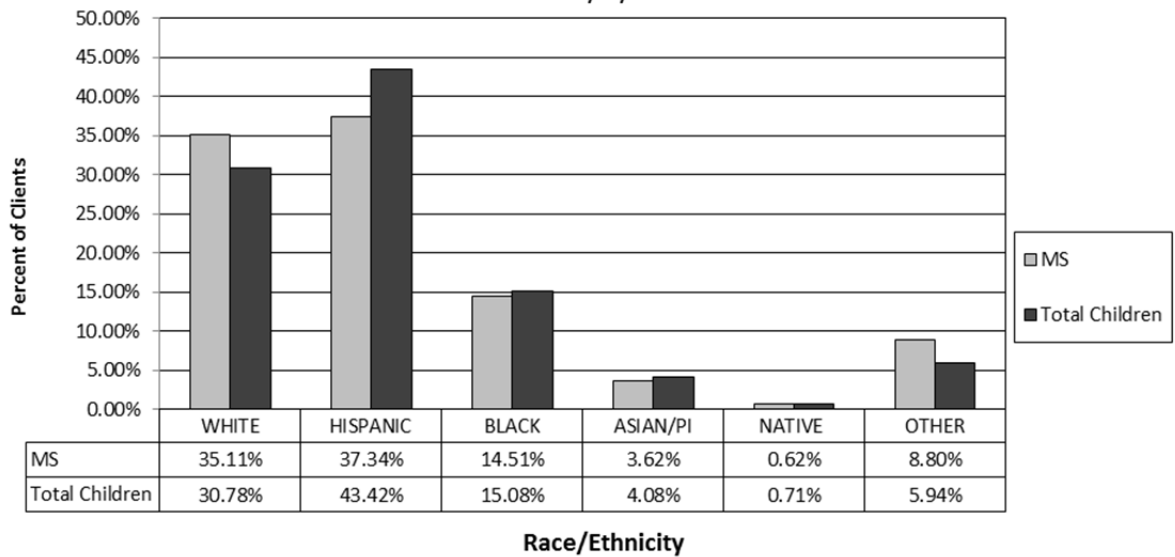


Table 9c
CHILDREN
Clients Receiving Medication Support Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

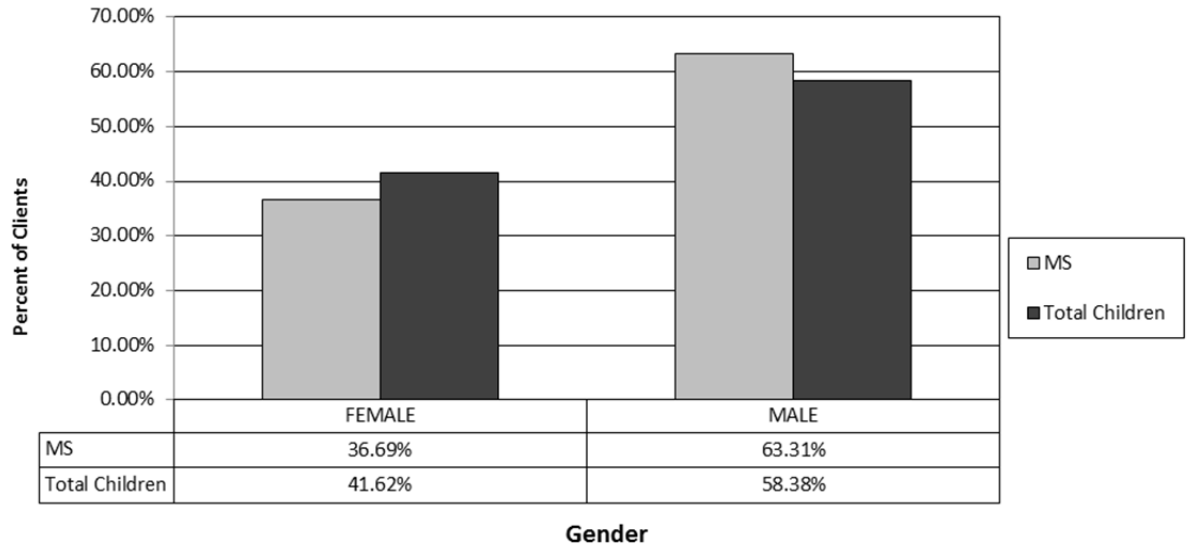


Table 9d
Other Services Received by Children Receiving Medication Support Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
MEDICATION SUPPORT	73,427	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	65,002	88.53%
TARGETED CASE MANAGEMENT	39,741	54.12%
CRISIS INTERVENTION	10,053	13.69%
FFS-HOSPITAL INPATIENT	6,571	8.95%
THERAPEUTIC BEHAVIORAL SERVICES	5,397	7.35%
CRISIS STABILIZATION	3,928	5.35%
DAY TX INTENSIVE FULL DAY	1,768	2.41%
HOSPITAL INPATIENT	1,334	1.82%
DAY TX REHABILITATIVE FULL DAY	1,175	1.60%
PHF	432	0.59%
DAY TX INTENSIVE HALF DAY	213	0.29%
ADULT CRISIS RESIDENTIAL	211	0.29%
ADULT RESIDENTIAL	92	0.13%
DAY TX REHABILITATIVE HALF DAY	65	0.09%

Service Metrics:

**Table 9e
Medication Support Approved Amount
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Amount
Number of Clients	73,427	100%	\$ 43,457
Mean	\$ 1,350	99%	\$ 8,001
Standard Deviation	\$ 1,766	95%	\$ 3,899
Median	\$ 887	90%	\$ 2,827
Mode	\$ 578	75%	\$ 1,663
Interquartile Range	\$ 1,229	50%	\$ 887
		25%	\$ 434

**Table 9f
Medication Support Minutes
Fiscal Year 2011-12**

Statistic	Minutes	Quartile	Minutes
Number of Clients	73,427	100%	9,834
Mean	318	99%	1,938
Standard Deviation	413	95%	906
Median	212	90%	651
Mode	90	75%	386
Interquartile Range	271	50%	212
		25%	115

**Table 9g
Historical Trends
Medication Support by Fiscal Year**

Data Type	2009-2010	2010-2011	2011-2012	2012-2013*
Number of Clients	70,149	70,840	73,427	72,622
Number of Minutes	22,038,136	22,981,170	23,340,516	21,732,218
Minutes Per Client	314	324	318	299
Approved Amount	\$ 92,646,574	\$ 95,674,949	\$ 98,266,243	\$ 103,345,823

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Psychiatric Health Facility Services

Psychiatric Health Facility (PHF):

“Psychiatric Health Facility” means a facility licensed under the provisions beginning with Section 77001 of Chapter 9, Division 5, Title 22 of the California Code of Regulations. “Psychiatric Health Facility Services” are therapeutic and/or rehabilitative services provided in a psychiatric health facility on an inpatient basis to beneficiaries who need acute care, which meets the criteria of Section 1820.205 of Chapter 11, Division 1, Title 9 of the California Code of Regulations, and whose physical health needs can be met in an affiliated general acute care hospital or in outpatient settings. These services are separate from those categorized as “Psychiatric Hospital Inpatient”.

Summary:

The forecast for Psychiatric Health Facility (PHF) Services shows an increase in the number of clients and total costs through FY 2014-15.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 3,768,537	561
Actual	FY 2009-10	\$ 3,743,149	588
Actual	FY 2010-11	\$ 4,699,605	602
Actual	FY 2011-12	\$ 4,693,775	629
Actual + Forecast	FY 2012-13	\$ 5,767,901	628
Actual + Forecast	FY 2013-14	\$ 6,207,630	663
Forecast	FY 2014-15	\$ 6,647,362	695

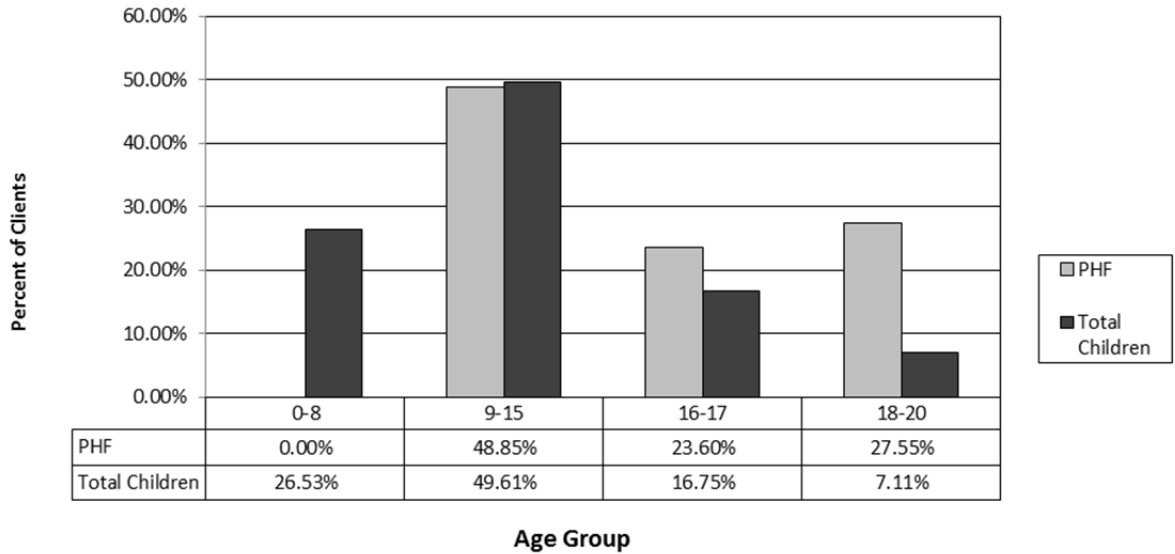
Budget Forecast Narrative:

The total annual costs are expected to increase through FY 2014-15.

Client Profile Data:

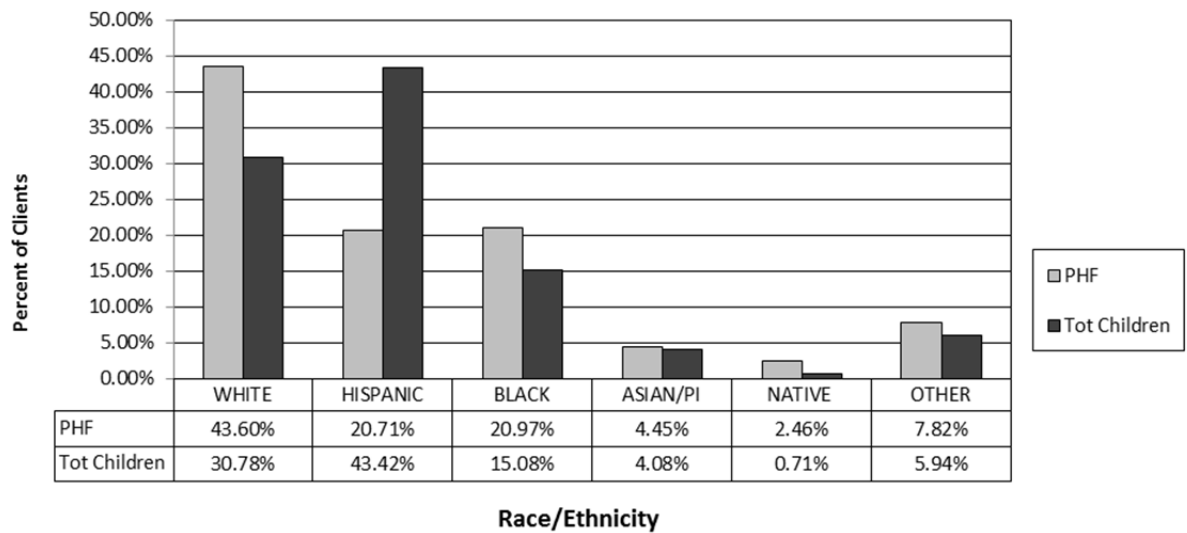
Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 10a
Clients Receiving PHF Services by Age Group
 Fiscal Year 2011-12
 Data as of 06/30/13



Age Group

Table 10b
CHILDREN
Clients Receiving PHF Services by Race/Ethnicity
 Fiscal Year 2011-12
 Data as of 06/30/13



Race/Ethnicity

Table 10c
CHILDREN
Clients Receiving PHF Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

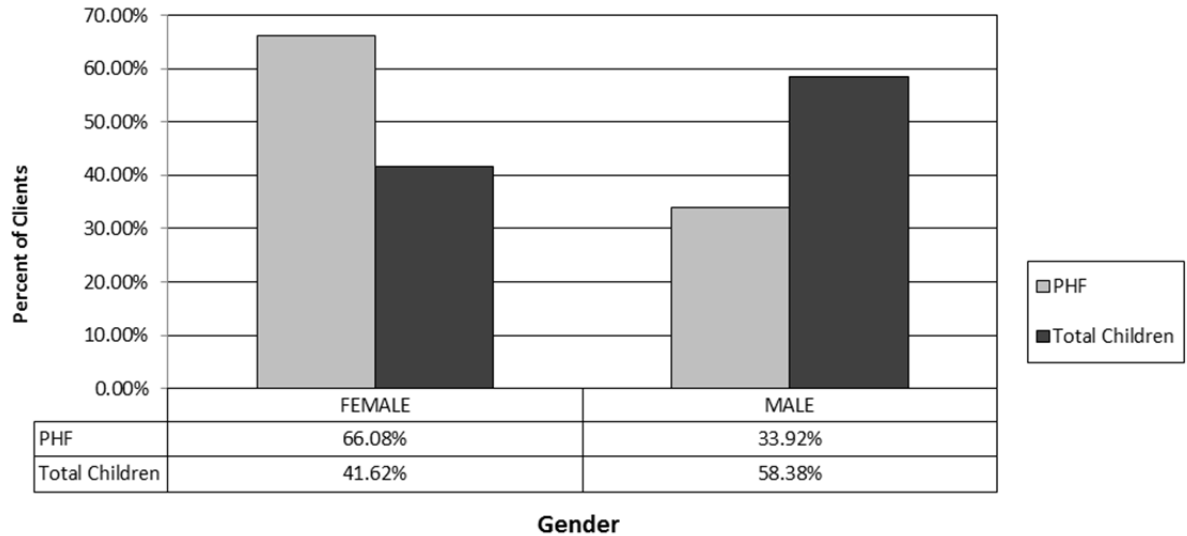


Table 10d
Other Services Received by Children Receiving Psychiatric Health Facility Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
PHF	629	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	480	76.31%
MEDICATION SUPPORT	432	68.68%
TARGETED CASE MANAGEMENT	391	62.16%
CRISIS INTERVENTION	330	52.46%
CRISIS STABILIZATION	329	52.31%
FFS-HOSPITAL INPATIENT	166	26.39%
DAY TX INTENSIVE FULL DAY	117	18.60%
THERAPEUTIC BEHAVIORAL SERVICES	110	17.49%
ADULT CRISIS RESIDENTIAL	40	6.36%
HOSPITAL INPATIENT	33	5.25%
DAY TX REHABILITATIVE FULL DAY	28	4.45%
ADULT RESIDENTIAL	4	0.64%
DAY TX INTENSIVE HALF DAY	2	0.32%

Service Metrics:

**Table 10e
Psychiatric Health Facility Approved Amount
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Amount
Number of Clients	629	100%	\$ 196,661
Mean	\$ 7,510	99%	\$ 79,947
Standard Deviation	\$ 15,673	95%	\$ 27,561
Median	\$ 3,062	90%	\$ 15,374
Mode	\$ 612	75%	\$ 6,737
Interquartile Range	\$ 5,512	50%	\$ 3,062
		25%	\$ 1,225

**Table 10f
Psychiatric Health Facility Days
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Days
Number of Clients	629	100%	336
Mean	13	99%	156
Standard Deviation	28	95%	51
Median	5	90%	28
Mode	1	75%	12
Interquartile Range	10	50%	5
		25%	2

**Table 10g
Historical Trends
Psychiatric Health Facility Services by Fiscal Year**

Data Type	2009-2010	2010-2011	2011-2012	2012-2013*
Number of Clients	588	602	629	628
Number of Days	7,274	8,586	8,266	9,804
Days Per Client	12	14	13	16
Approved Amount	\$ 3,743,149	\$ 4,699,605	\$ 4,693,775	\$ 5,767,901

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Psychiatric Inpatient Hospital Services – SD/MC Hospitals

Psychiatric Hospital Inpatient Services – SD/MC Hospitals:

Psychiatric inpatient hospital services include both acute psychiatric inpatient hospital services and administrative day services. Acute psychiatric inpatient hospital services are provided to beneficiaries for whom the level of care provided in a hospital is medically necessary to diagnose or treat a covered mental illness. Administrative day services are inpatient hospital services provided to beneficiaries who were admitted to the hospital for an acute psychiatric inpatient hospital service and the beneficiary's stay at the hospital must be continued beyond the beneficiary's need for acute psychiatric inpatient hospital services due to lack of residential placement options at non-acute residential treatment facilities that meet the needs of the beneficiary.

Psychiatric inpatient hospital services are provided by Short-Doyle / Medi-Cal (SD/MC) hospitals and Fee-for-Service / Medi-Cal (FFS/MC) hospitals. Mental Health Plans (MHPs) claim reimbursement for the cost of psychiatric inpatient hospital services provided by Short-Doyle Medi-Cal hospitals through the Short-Doyle Medi-Cal (SD/MC) claiming system. FFS/MC hospitals claim reimbursement for the cost of psychiatric inpatient hospital services through the FFS/MC Fiscal Intermediary system. MHPs are responsible for authorization of psychiatric inpatient hospital services reimbursed through either billing system. For SD/MC hospitals, the daily rate includes the cost of any needed professional services. The FFS/MC hospital daily rate does not include professional services, which are billed separately from the FFS/MC inpatient hospital services via the SD/MC claiming system.

Summary:

The forecast for Psychiatric Hospital Inpatient Services provided by SD/MC hospitals shows a small growth in cost and clients through FY 2014-15.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 12,504,102	1,876
Actual	FY 2009-10	\$ 14,453,454	1,852
Actual	FY 2010-11	\$ 12,506,982	1,980
Actual	FY 2011-12	\$ 13,190,188	2,017
Actual + Forecast	FY 2012-13	\$ 14,334,631	1,870
Actual + Forecast	FY 2013-14	\$ 14,767,603	1,917
Forecast	FY 2014-15	\$ 15,200,575	1,960

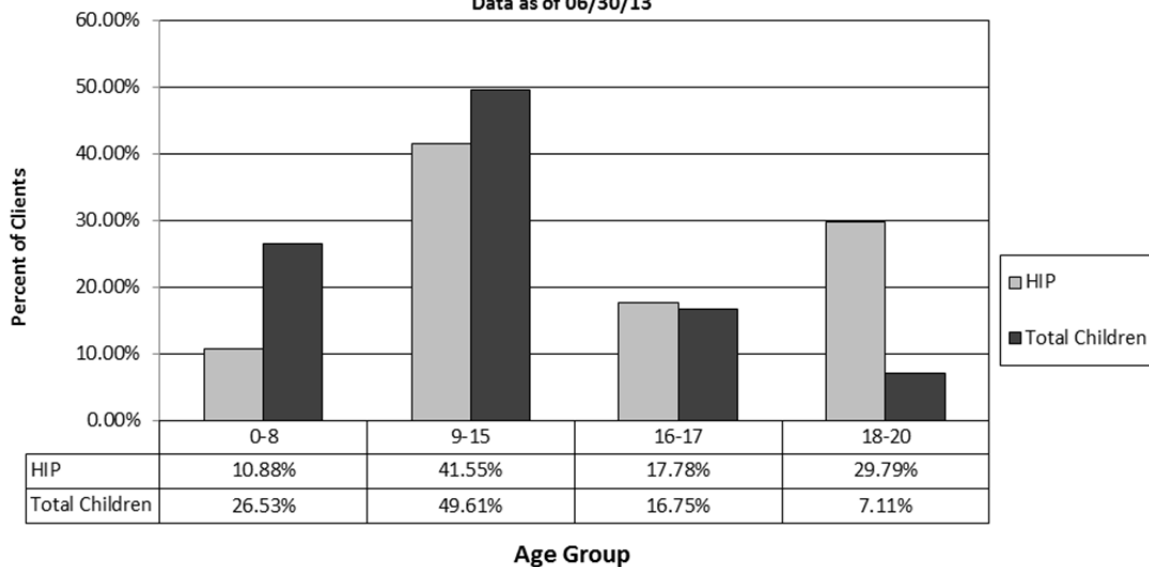
Budget Forecast Narrative:

Costs for Psychiatric Hospital Inpatient Services are forecast to increase slightly through FY 2014-15.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

**Table 11a
 CHILDREN
 Clients Receiving Hospital Inpatient Services by Age Group
 Fiscal Year 2011-2012
 Data as of 06/30/13**



**Table 11b
 CHILDREN
 Clients Receiving Hospital Inpatient Services by Race/Ethnicity
 Fiscal Year 2011-12
 Data as of 06/30/13**

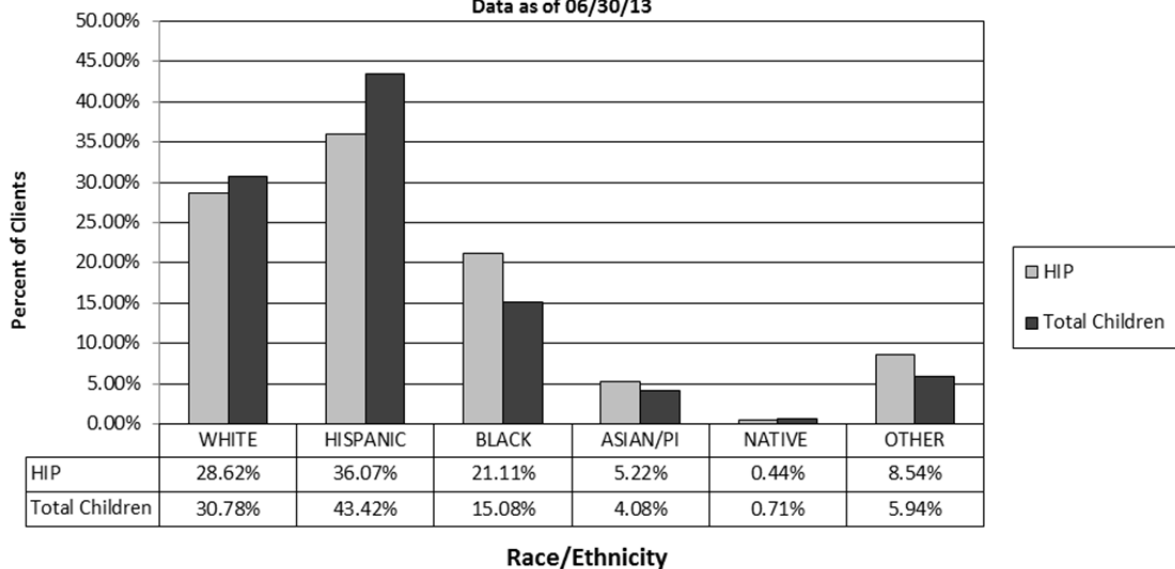


Table 11c
CHILDREN
Clients Receiving Hospital Inpatient Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

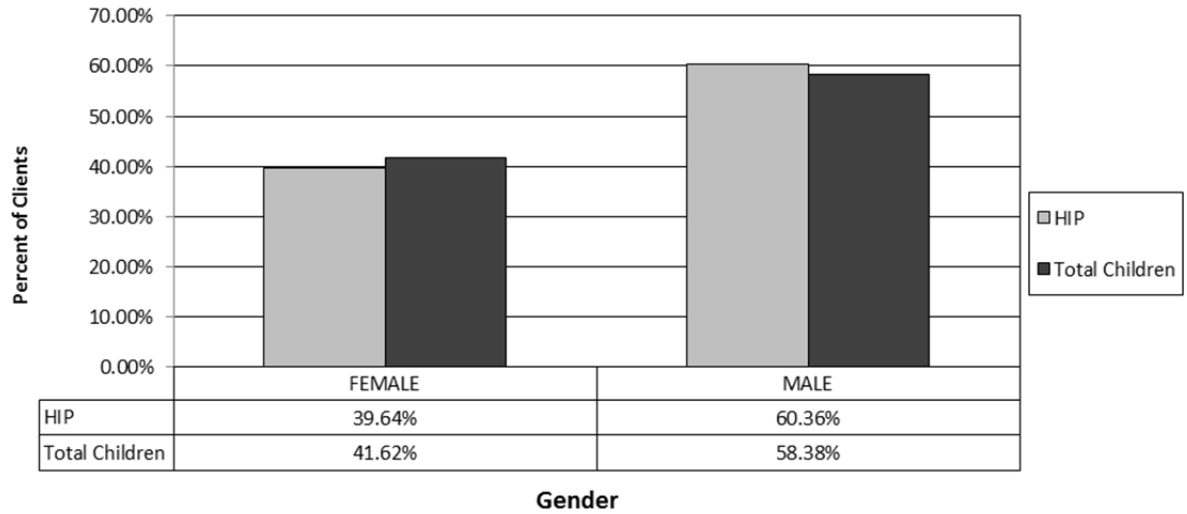


Table 11d
Other Services Received by Children Receiving Hospital Inpatient Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
HOSPITAL INPATIENT	2,017	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	1,591	78.88%
MEDICATION SUPPORT	1,334	66.14%
TARGETED CASE MANAGEMENT	1,334	66.14%
CRISIS INTERVENTION	1,114	55.23%
CRISIS STABILIZATION	982	48.69%
FFS-HOSPITAL INPATIENT	523	25.93%
THERAPEUTIC BEHAVIORAL SERVICES	270	13.39%
DAY TX INTENSIVE FULL DAY	95	4.71%
DAY TX REHABILITATIVE FULL DAY	69	3.42%
ADULT CRISIS RESIDENTIAL	43	2.13%
DAY TX INTENSIVE HALF DAY	33	1.64%
PHF	33	1.64%
ADULT RESIDENTIAL	15	0.74%

Service Metrics:

**Table 11e
Psychiatric Hospital Inpatient Approved Amount
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Amount
Number of Clients	2,017	100%	\$ 103,208
Mean	\$ 6,569	99%	\$ 40,021
Standard Deviation	\$ 7,884	95%	\$ 21,109
Median	\$ 3,900	90%	\$ 13,960
Mode	\$ 2,428	75%	\$ 7,817
Interquartile Range	\$ 5,392	50%	\$ 3,900
		25%	\$ 2,426

**Table 11f
Psychiatric Hospital Inpatient Facility Days
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Days
Number of Clients	2,017	100%	138
Mean	8	99%	46
Standard Deviation	10	95%	26
Median	4	90%	19
Mode	2	75%	10
Interquartile Range	8	50%	4
		25%	2

**Table 11g
Historical Trends
Psychiatric Hospital Inpatient by Fiscal Year**

<u>Data Type</u>	<u>2009-2010</u>	<u>2010-2011</u>	<u>2011-2012</u>	<u>2012-2013*</u>
Number of Clients	1,852	1,980	2,017	1,870
Number of Days	17,701	15,928	15,965	16,024
Days Per Client	10	8	8	9
Approved Amount	\$ 14,453,454	\$ 12,506,982	\$ 13,190,188	\$ 14,334,631

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Targeted Case Management

Targeted Case Management (TCM):

Targeted case management is a service that assists a beneficiary in accessing needed medical, educational, social, prevocational, vocational, rehabilitative, or other community services. The service activities may include, but are not limited to, communication, coordination and referral; monitoring service delivery to ensure beneficiary access to services and the service delivery system; monitoring of the beneficiary's progress, placement services, and plan development. TCM services may be face-to-face or by telephone with the client or significant support persons and may be provided anywhere in the community. Additionally, services may be provided by any person determined by the MHP to be qualified to provide the service, consistent with the scope of practice and state law.

Summary:

The forecast for Targeted Case Management Services shows a growth in cost and clients through 2014-15.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 81,814,298	89,348
Actual	FY 2009-10	\$ 78,388,301	90,638
Actual	FY 2010-11	\$ 76,020,619	90,561
Actual	FY 2011-12	\$ 75,813,872	94,727
Actual + Forecast	FY 2012-13	\$ 75,572,783	91,797
Actual + Forecast	FY 2013-14	\$ 75,750,769	93,531
Forecast	FY 2014-15	\$ 75,928,753	95,266

Budget Forecast Narrative:

Costs for Targeted Case Management are forecast to slightly increase through FY 2014-15.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 12a
CHILDREN
Clients Receiving Targeted Case Management Services by Age Group
Fiscal Year 2011-12
Data as of 06/30/13

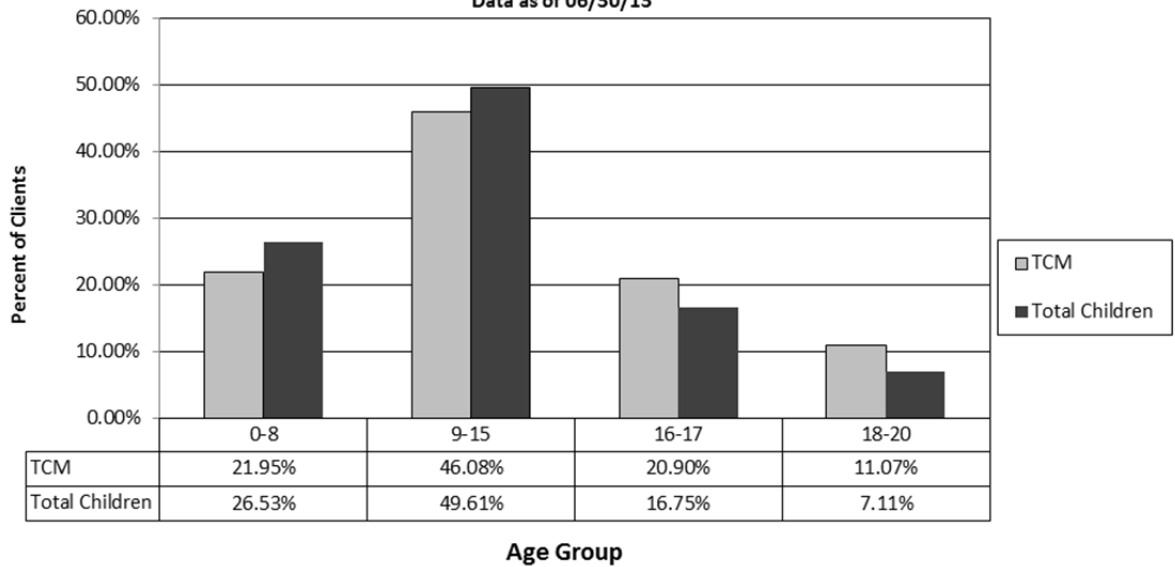


Table 12b
CHILDREN
Clients Receiving Targeted Case Management Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 06/30/13

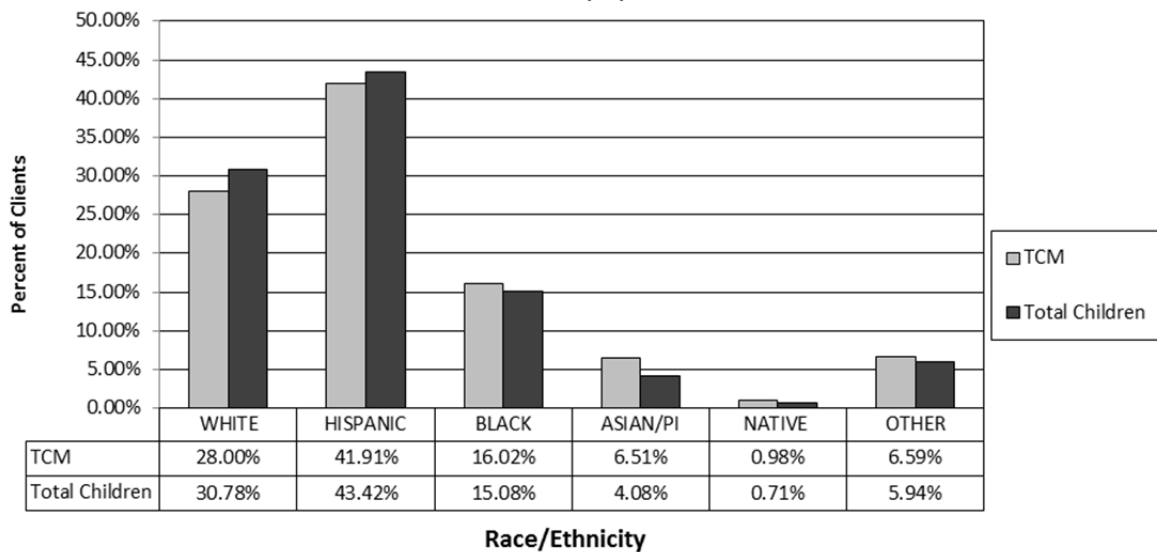


Table 12c
CHILDREN
Clients Receiving Targeted Case Management Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

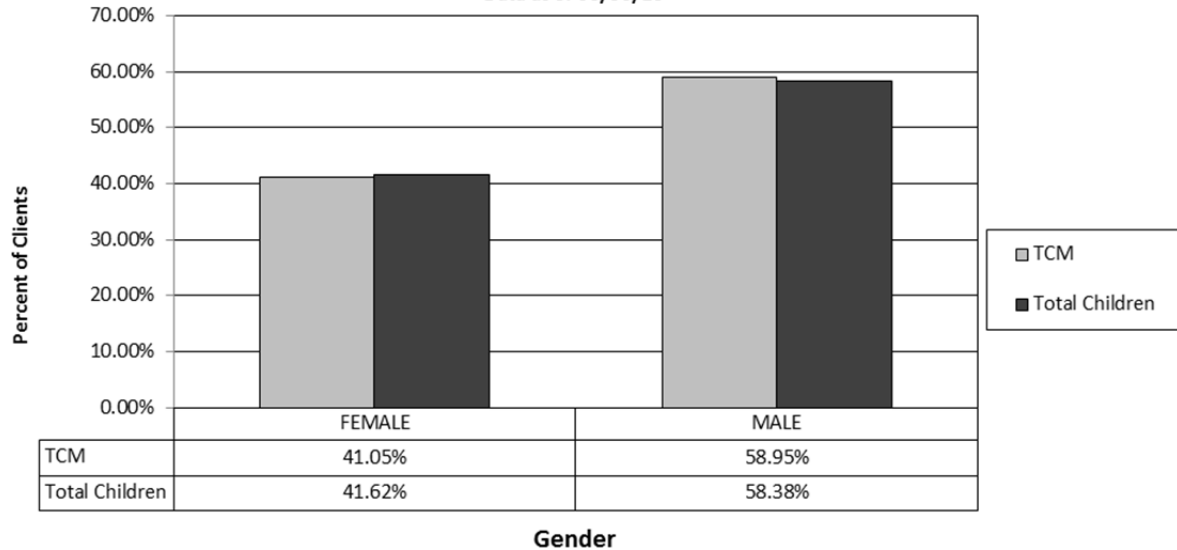


Table 12d
Other Services Received by Children Receiving Targeted Case Management Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
TARGETED CASE MANAGEMENT	94,727	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	89,364	94.34%
MEDICATION SUPPORT	39,741	41.95%
CRISIS INTERVENTION	11,029	11.64%
THERAPEUTIC BEHAVIORAL SERVICES	5,626	5.94%
FFS-HOSPITAL INPATIENT	5,285	5.58%
CRISIS STABILIZATION	3,572	3.77%
DAY TX INTENSIVE FULL DAY	1,348	1.42%
HOSPITAL INPATIENT	1,334	1.41%
DAY TX REHABILITATIVE FULL DAY	712	0.75%
PHF	391	0.41%
ADULT CRISIS RESIDENTIAL	172	0.18%
ADULT RESIDENTIAL	80	0.08%
DAY TX INTENSIVE HALF DAY	79	0.08%
DAY TX REHABILITATIVE HALF DAY	54	0.06%

Service Metrics:

**Table 12e
Targeted Case Management Approved Amount
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Amount
Number of Clients	94,727	100%	\$ 65,832
Mean	\$ 805	99%	\$ 8,553
Standard Deviation	\$ 1,778	95%	\$ 3,250
Median	\$ 269	90%	\$ 1,879
Mode	\$ 61	75%	\$ 739
Interquartile Range	\$ 626	50%	\$ 269
		25%	\$ 113

**Table 12f
Targeted Case Management Minutes
Fiscal Year 2011-12**

Statistic	Minutes	Quartile	Minutes
Number of Clients	94,727	100%	32,590
Mean	440	99%	4,770
Standard Deviation	991	95%	1,787
Median	145	90%	1,030
Mode	60	75%	403
Interquartile Range	343	50%	145
		25%	60

**Table 12g
Historical Trends
Targeted Case Management by Fiscal Year**

<u>Data Type</u>	<u>2009-2010</u>	<u>2010-2011</u>	<u>2011-2012</u>	<u>2012-2013*</u>
Number of Clients	90,638	90,561	94,727	91,797
Number of Minutes	41,675,136	40,549,679	41,712,930	35,049,591
Minutes Per Client	460	448	440	382
Approved Amount	\$ 78,388,301	\$ 76,020,619	\$ 75,813,872	\$ 75,572,783

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Therapeutic Behavioral Service

Therapeutic Behavioral Services (TBS):

Therapeutic behavioral services are intensive, individualized, short-term outpatient treatment interventions for beneficiaries up to age 21. Individuals receiving these services have serious emotional disturbances (SED), are experiencing a stressful transition or life crisis and need additional short-term, specific support services to accomplish outcomes specified in the written treatment plan.

Summary:

TBS has shown rapid growth since its inception. Recent trends reflected in claims data points to continued growth that may accelerate, consistent with the settlement objectives of the Emily Q. lawsuit.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 62,984,126	4,210
Actual	FY 2009-10	\$ 69,164,178	5,169
Actual	FY 2010-11	\$ 80,662,424	6,432
Actual	FY 2011-12	\$ 87,312,375	7,337
Actual + Forecast	FY 2012-13	\$ 90,692,681	7,710
Actual + Forecast	FY 2013-14	\$ 96,750,864	8,498
Forecast	FY 2014-15	\$ 102,809,047	9,282

Budget Forecast Narrative:

Medi-Cal is required to provide TBS services to eligible Medi-Cal beneficiaries under age 21; this requirement was an outcome of a 2001 Judgment and Permanent Injunction in the *Emily Q. v. Diana Bontá* lawsuit. The settlement established a benchmark whereby four percent of children and youth receiving EPSDT services would be recipients of TBS. TBS has experienced significant caseload and expenditure growth in recent years, with expenditures increasing at a slightly higher rate. TBS is a relatively costly service and the increase in clients and costs per minute points to continued increases in total cost in the coming years.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The FY S2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 13a
CHILDREN
Clients Receiving Therapeutic Behavioral Services by Age Group
Fiscal Year 2011-12
Data as of 06/30/13

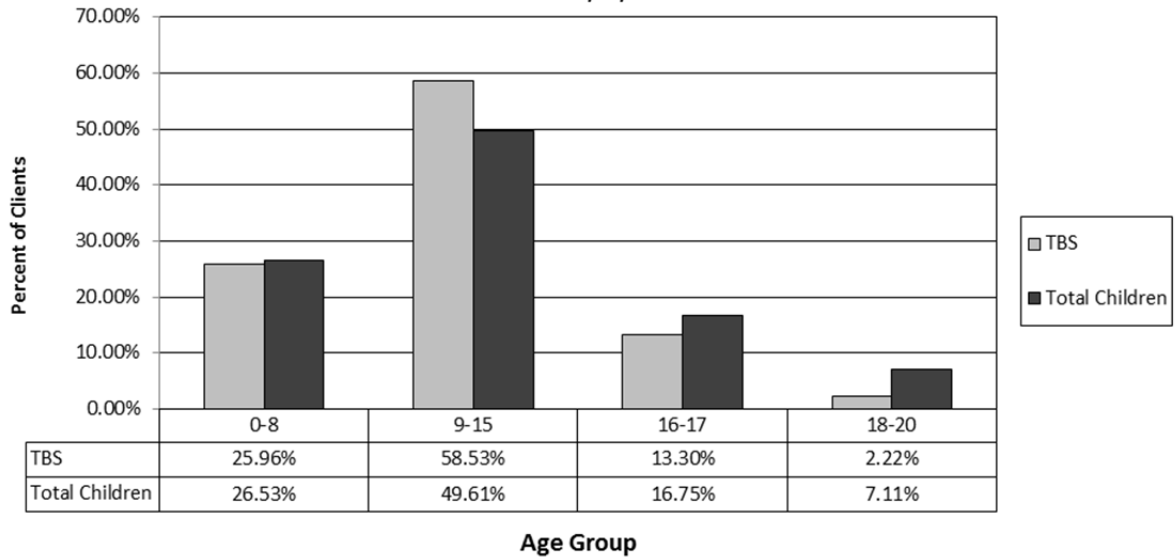


Table 13b
CHILDREN
Clients Receiving Therapeutic Behavioral Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 06/30/13

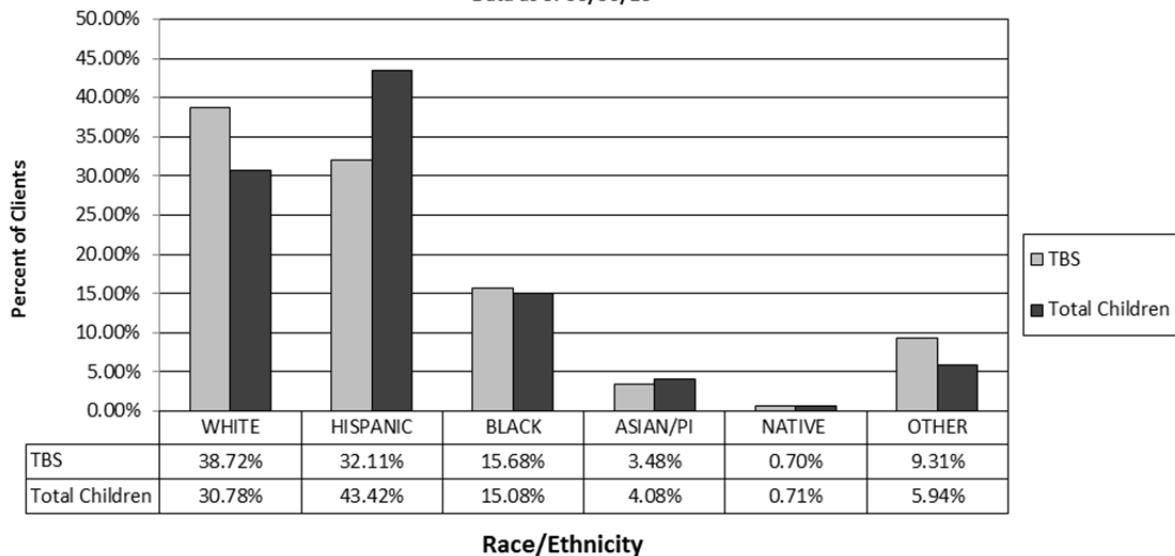


Table 13c
CHILDREN
Clients Receiving Therapeutic Behavioral Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

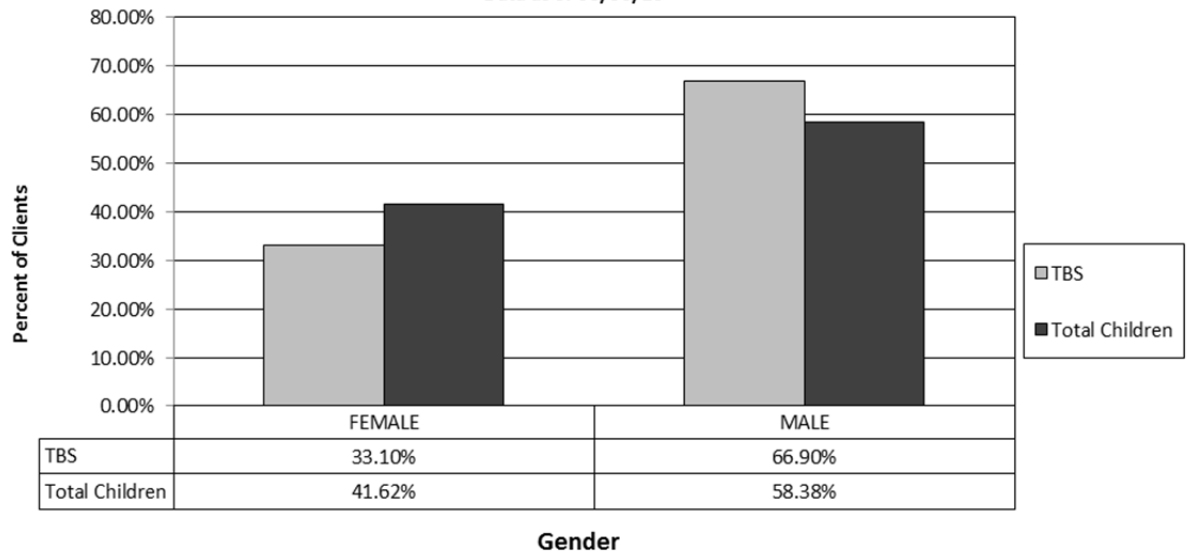


Table 13d
Other Services Received by Children Receiving Therapeutic Behavioral Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
THERAPEUTIC BEHAVIORAL SERVICES	7,337	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	7,100	96.77%
TARGETED CASE MANAGEMENT	5,626	76.68%
MEDICATION SUPPORT	5,397	73.56%
CRISIS INTERVENTION	1,982	27.01%
FFS-HOSPITAL INPATIENT	1,140	15.54%
CRISIS STABILIZATION	773	10.54%
DAY TX INTENSIVE FULL DAY	554	7.55%
HOSPITAL INPATIENT	270	3.68%
DAY TX REHABILITATIVE FULL DAY	253	3.45%
PHF	110	1.50%
DAY TX INTENSIVE HALF DAY	95	1.29%
ADULT CRISIS RESIDENTIAL	11	0.15%
DAY TX REHABILITATIVE HALF DAY	11	0.15%
ADULT RESIDENTIAL	6	0.08%

Service Metrics:

**Table 13e
Therapeutic Behavioral Services Approved Amount
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Amount
Number of Clients	7,337	100%	\$ 166,859
Mean	\$ 11,918	99%	\$ 66,404
Standard Deviation	\$ 13,957	95%	\$ 38,385
Median	\$ 7,641	90%	\$ 28,138
Mode	\$ 313	75%	\$ 15,687
Interquartile Range	\$ 12,759	50%	\$ 7,641
		25%	\$ 2,928

**Table 13f
Therapeutic Behavioral Services Minutes
Fiscal Year 2011-12**

Statistic	Minutes	Quartile	Minutes
Number of Clients	7,337	100%	73,918
Mean	5,639	99%	29,886
Standard Deviation	6,419	95%	17,484
Median	3,780	90%	12,882
Mode	120	75%	7,609
Interquartile Range	6,181	50%	3,780
		25%	1,428

**Table 13g
Historical Trends
Therapeutic Behavioral Service by Fiscal Year**

<u>Data Type</u>	<u>2009-2010</u>	<u>2010-2011</u>	<u>2011-2012</u>	<u>2012-2013*</u>
Number of Clients	5,169	6,432	7,337	7,710
Number of Minutes	33,221,104	39,942,951	41,372,108	37,966,988
Minutes Per Client	6,427	6,210	5,639	4,924
Approved Amount	\$ 69,164,178	\$ 80,662,424	\$ 87,312,375	\$ 90,692,681

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Therapy and Other Service Activities

Therapy and Other Service Activities (formerly referred to as Mental Health Services):

Individual or group therapies and interventions are designed to provide a reduction of mental disability and restoration, improvement or maintenance of functioning consistent with the goals of learning, development, independent living, and enhanced self-sufficiency. These services are separate from those provided as components of adult residential services, treatment services, crisis intervention, crisis stabilization, day rehabilitation, or day treatment intensive. Service activities may include, but are not limited to:

1. **Assessment** - A service activity designed to evaluate the current status of mental, emotional, or behavioral health. Assessment includes, but is not limited to, one or more of the following: mental status determination, analysis of the clinical history, analysis of relevant cultural issues and history; diagnosis; and the use of mental health testing procedures.
2. **Plan Development** - A service activity that consists of development of client plans, approval of client plans, and/or monitoring and recording of progress.
3. **Therapy** - A service activity that is a therapeutic intervention that focuses primarily on symptom reduction as a means to reduce functional impairments. Therapy may be delivered to an individual or group and may include family therapy at which the client is present.
4. **Rehabilitation** - A service activity that includes, but is not limited to, assistance, improving, maintaining or restoring functional skills, daily living skills, social and leisure skills, grooming and personal hygiene skills; obtaining support resources; and/or obtaining medication education.
5. **Collateral** - A service activity involving a significant support person in the beneficiary's life for the purpose of addressing the mental health needs of the beneficiary in terms of achieving goals of the beneficiary's client plan. Collateral may include, but is not limited to, consultation and training of the significant support person(s) to assist in better utilization of mental health services by the client, consultation and training of the significant support person(s) to assist in better understanding of mental illness, and family counseling with the significant support person(s) in achieving the goals of the client plan. The client may or may not be present for this service activity.

The distribution of use and expenditures of each service activity varies over time with changes in client needs.

Summary:

The forecast for Therapy and Other Service Activities dollars and clients shows substantial growth primarily driven by an increase in the number of clients served.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 828,266,009	192,601
Actual	FY 2009-10	\$ 829,576,695	195,727
Actual	FY 2010-11	\$ 871,026,286	201,350
Actual	FY 2011-12	\$ 931,688,450	214,621
Actual + Forecast	FY 2012-13	\$ 964,732,444	219,208
Actual + Forecast	FY 2013-14	\$ 1,013,688,142	227,096
Forecast	FY 2014-15	\$ 1,062,643,839	234,989

Budget Forecast Narrative:

Costs for Therapy and Other Service Activities are forecast to increase through FY 2014-15.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 14a
CHILDREN
Clients Receiving Therapy and Other Services by Age Group
Fiscal Year 2011-12
Data as of 06/30/13

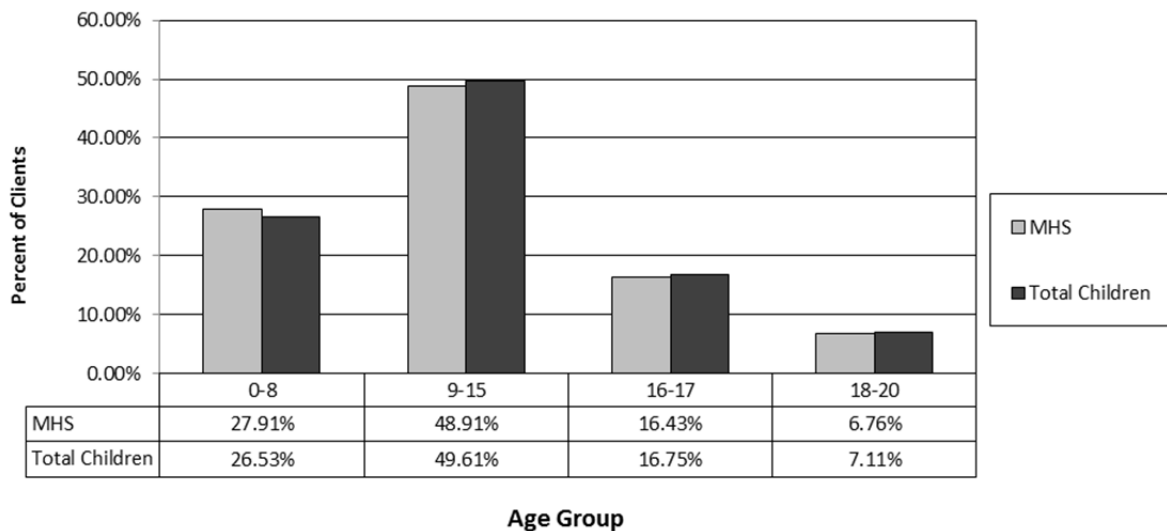
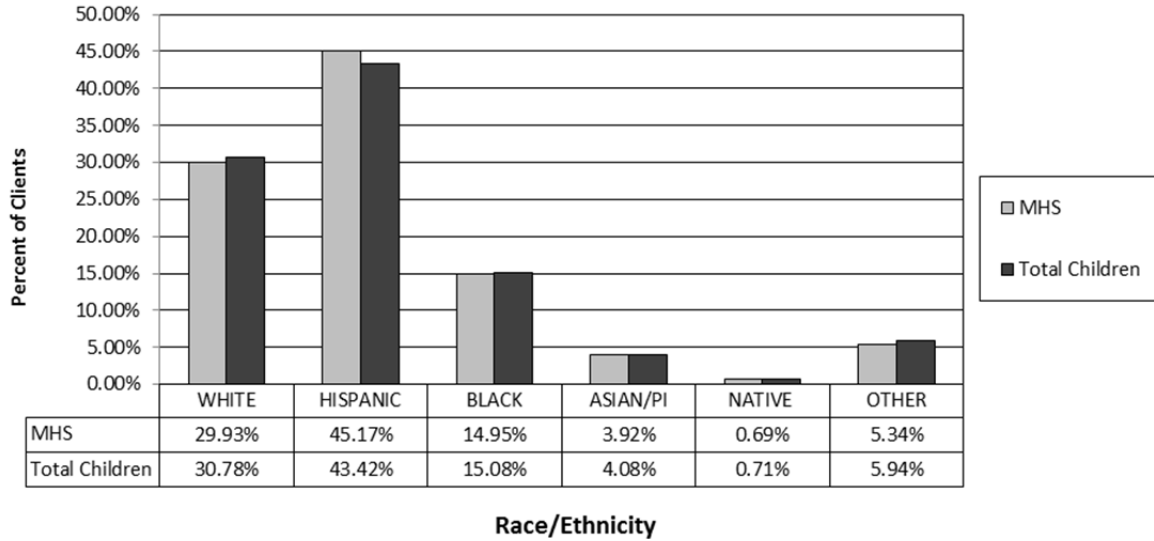
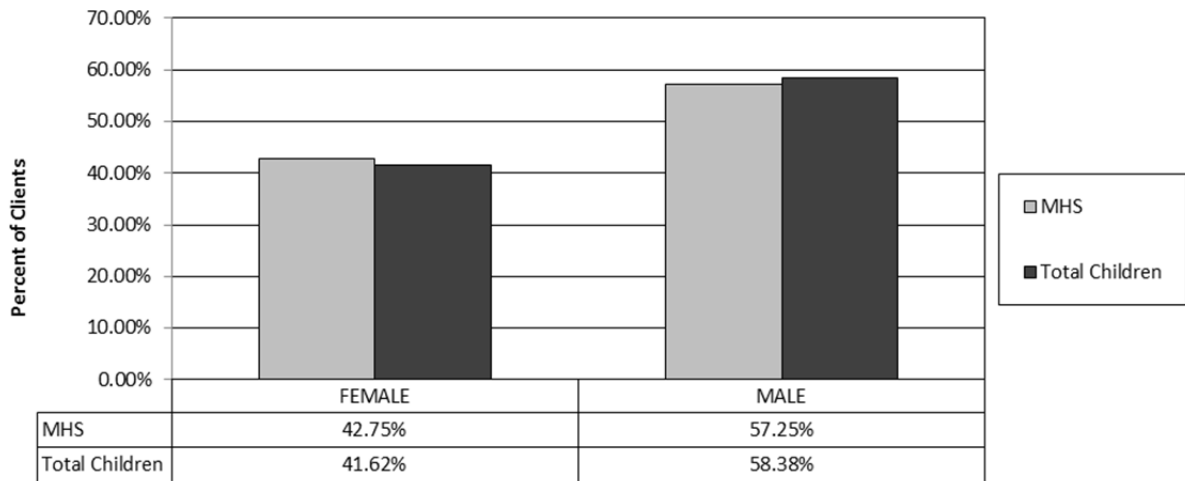


Table 14b
CHILDREN
Clients Receiving Therapy and Other Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 06/30/13



Race/Ethnicity

Table 14c
CHILDREN
Clients Receiving Therapy and Other Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13



Gender

Table 14d
Other Services Received by Children Receiving Therapy and Other Service Activities
Fiscal Year 2011-12

	Number of Clients	Percent Clients
THERAPY AND OTHER SERVICE ACTIVITIES	214,621	100.00%
TARGETED CASE MANAGEMENT	89,364	41.64%
MEDICATION SUPPORT	65,002	30.29%
CRISIS INTERVENTION	14,195	6.61%
FFS-HOSPITAL INPATIENT	7,716	3.60%
THERAPEUTIC BEHAVIORAL SERVICES	7,100	3.31%
CRISIS STABILIZATION	4,968	2.31%
DAY TX INTENSIVE FULL DAY	1,869	0.87%
HOSPITAL INPATIENT	1,591	0.74%
DAY TX REHABILITATIVE FULL DAY	1,233	0.57%
PHF	480	0.22%
ADULT CRISIS RESIDENTIAL	198	0.09%
DAY TX INTENSIVE HALF DAY	147	0.07%
ADULT RESIDENTIAL	87	0.04%
DAY TX REHABILITATIVE HALF DAY	65	0.03%

Service Metrics:

**Table 14e
Therapy and Other Service Activities Approved Amount
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Amount
Number of Clients	214,621	100%	\$ 262,195
Mean	\$ 4,377	99%	\$ 33,285
Standard Deviation	\$ 6,874	95%	\$ 15,805
Median	\$ 2,137	90%	\$ 10,460
Mode	\$ 157	75%	\$ 5,264
Interquartile Range	\$ 4,560	50%	\$ 2,137
		25%	\$ 705

**Table 14f
Therapy and Other Service Activities Minutes
Fiscal Year 2011-12**

Statistic	Minutes	Quartile	Minutes
Number of Clients	214,621	100%	106,592
Mean	1,870	99%	13,850
Standard Deviation	2,870	95%	6,677
Median	969	90%	4,430
Mode	60	75%	2,280
Interquartile Range	1,943	50%	969
		25%	337

**Table 14g
Historical Trends
Therapy and Other Service Activities by Fiscal Year**

<u>Data Type</u>	<u>2009-2010*</u>	<u>2010-2011</u>	<u>2011-2012</u>	<u>2012-2013*</u>
Number of Clients	195,727	201,350	214,621	219,208
Number of Minutes	446,900,610	380,887,877	401,238,478	381,382,132
Minutes Per Client	2,283	1,892	1,870	1,740
Approved Amount	\$ 829,576,695	\$ 871,026,286	\$ 931,688,450	\$ 964,732,444

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013. The large increase in the number of minutes for FY 2009-10 is due to over reporting of units of time by certain counties while implementing new billing systems.

Psychiatric Inpatient Hospital Services – FFS/MC Hospitals

Psychiatric Inpatient Hospital Services – FFS/MC Hospitals:

Psychiatric inpatient hospital services include both acute psychiatric inpatient hospital services and administrative day services. Acute psychiatric inpatient hospital services are provided to beneficiaries for whom the level of care provided in a hospital is medically necessary to diagnose or treat a covered mental illness. Administrative day services are inpatient hospital services provided to beneficiaries who were admitted to the hospital for an acute psychiatric inpatient hospital service and the beneficiary's stay at the hospital must be continued beyond the beneficiary's need for acute psychiatric inpatient hospital services due to lack of residential placement options at non-acute residential treatment facilities that meet the needs of the beneficiary.

Psychiatric inpatient hospital services are provided by Short-Doyle / Medi-Cal (SD/MC) hospitals and Fee-for-Service / Medi-Cal (FFS/MC) hospitals. Mental Health Plans (MHPs) claim reimbursement for the cost of psychiatric inpatient hospital services provided by Short-Doyle Medi-Cal hospitals through the Short-Doyle Medi-Cal (SD/MC) claiming system. FFS/MC hospitals claim reimbursement for the cost of psychiatric inpatient hospital services through the FFS/MC Fiscal Intermediary system. MHPs are responsible for authorization of psychiatric inpatient hospital services reimbursed through either billing system. For SD/MC hospitals, the daily rate includes the cost of any needed professional services. The FFS/MC hospital daily rate does not include professional services, which are billed separately from the FFS/MC inpatient hospital services via the SD/MC claiming system.

Summary:

The forecast for Psychiatric Inpatient Hospital Services provided by FFS/MC hospitals projects growth in costs through 2014-15 and growth in clients in FY 2014-15.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 45,184,960	7,697
Actual	FY 2009-10	\$ 51,795,601	8,257
Actual	FY 2010-11	\$ 55,313,818	9,037
Actual	FY 2011-12	\$ 58,855,971	8,930
Actual + Forecast	FY 2012-13	\$ 67,581,293	10,090
Actual + Forecast	FY 2013-14	\$ 72,546,660	10,683
Forecast	FY 2014-15	\$ 77,512,025	11,278

Budget Forecast Narrative:

Costs for Psychiatric Inpatient Hospital Services by FFS/MC hospitals are forecast to increase through FY 2014-15.

Client Profile Data:

Client data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of August 23, 2013.

Table 15a
CHILDREN
Clients Receiving Fee For Service Hospital Inpatient Services by Age Group
Fiscal Year 2011-12
Data as of 08/23/13

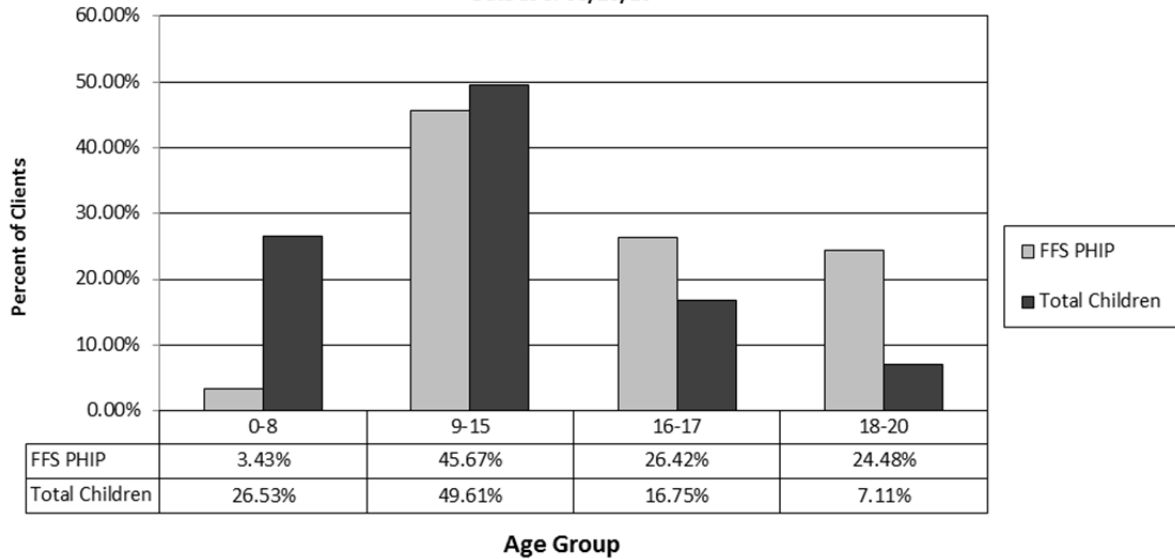


Table 15b
CHILDREN
Clients Receiving Fee For Service Psychiatric Hospital Inpatient Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 08/23/13

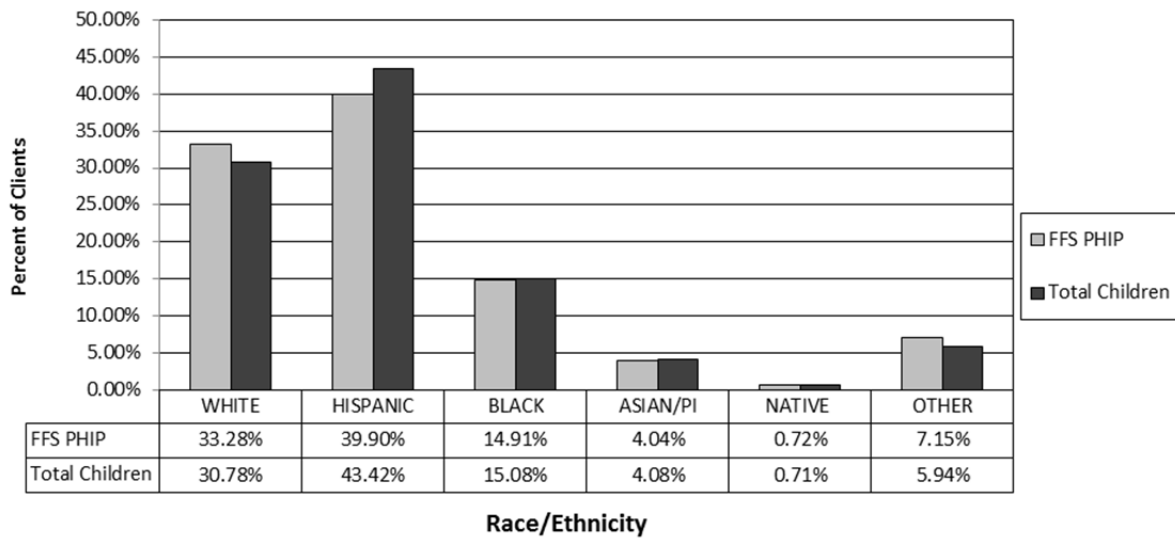


Table 15c
CHILDREN
Clients Receiving Fee For Service Hospital Inpatient Services by Gender
Fiscal Year 2011-12
Data as of 08/23/13

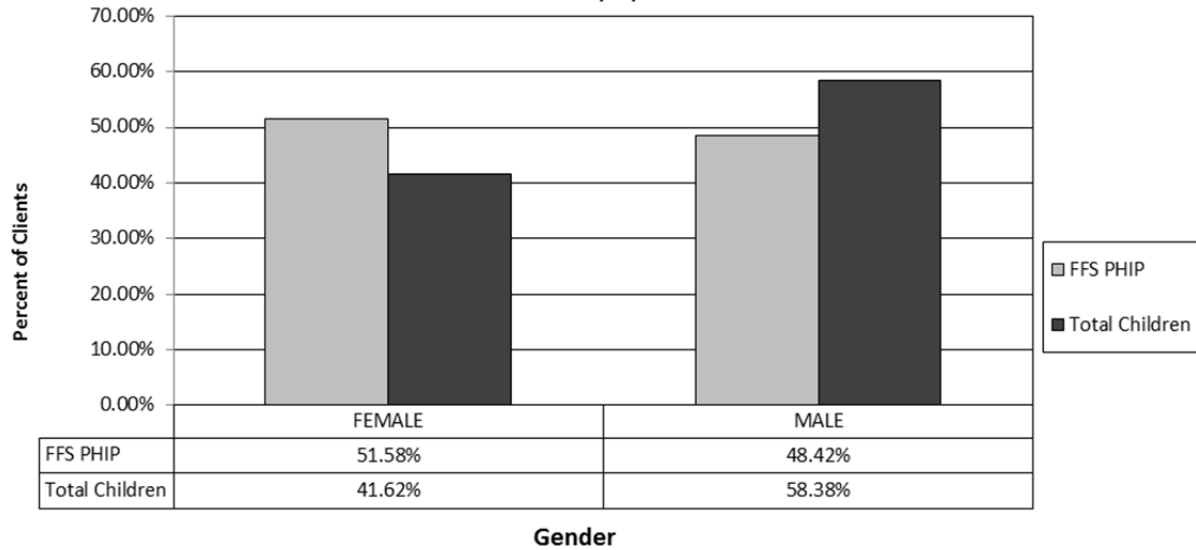


Table 15d
Other Services Received by Children Receiving FFS Psychiatric Hospital Inpatient Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
FFS-HOSPITAL INPATIENT	8,930	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	7,716	86.41%
MEDICATION SUPPORT	6,571	73.58%
TARGETED CASE MANAGEMENT	5,285	59.18%
CRISIS INTERVENTION	4,807	53.83%
CRISIS STABILIZATION	2,432	27.23%
THERAPEUTIC BEHAVIORAL SERVICES	1,140	12.77%
HOSPITAL INPATIENT	523	5.86%
DAY TX INTENSIVE FULL DAY	322	3.61%
DAY TX REHABILITATIVE FULL DAY	181	2.03%
PHF	166	1.86%
ADULT CRISIS RESIDENTIAL	99	1.11%
DAY TX INTENSIVE HALF DAY	36	0.40%
ADULT RESIDENTIAL	25	0.28%
DAY TX REHABILITATIVE HALF DAY	4	0.04%

Service Metrics:

**Table 15e
FFS Psychiatric Hospital Inpatient Services Approved Amount
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Amount
Number of Clients	8,930	100%	\$ 252,787
Mean	\$ 6,627	99%	\$ 42,870
Standard Deviation	\$ 8,787	95%	\$ 20,880
Median	\$ 3,896	90%	\$ 14,336
Mode	\$ 2,508	75%	\$ 7,470
Interquartile Range	\$ 5,117	50%	\$ 3,896
		25%	\$ 2,354

**Table 15f
FFS Psychiatric Hospital In Patient Services Days
Fiscal Year 2011-12**

Statistic	Days	Quartile	Days
Number of Clients	8,930	100%	245
Mean	9	99%	54
Standard Deviation	11	95%	28
Median	6	90%	20
Mode	3	75%	10
Interquartile Range	6	50%	6
		25%	4

**Table 15g
Historical Trends
FFS Psychiatric Hospital Inpatient Services by Fiscal Year**

Data Type	<u>2009-2010</u>	<u>2010-2011</u>	<u>2011-2012</u>	<u>2012-2013*</u>
Number of Clients	8,257	9,037	8,930	10,090
Number of Days	75,403	78,685	82,004	92,704
Days Per Client	9	9	9	9
Approved Amount	\$ 51,795,601	\$ 55,313,818	\$ 58,855,971	\$ 67,581,293

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through August 23, 2013.

Adult Crisis Residential Services

Adult Crisis Residential Services (CRS):

Adult crisis residential services provide an alternative to acute psychiatric hospital services for beneficiaries who otherwise would require hospitalization. The CRS programs for adults provide normalized living environments, integrated into residential communities. The services follow a social rehabilitation model that integrates aspects of emergency psychiatric care, psychosocial rehabilitation, milieu therapy, case management and practical social work.

Summary:

The forecast for Adult Crisis Residential Services include statistically unchanging client counts and slight increases in annual costs over the next few fiscal years.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 19,007,024	3,423
Actual	FY 2009-10	\$ 18,871,631	3,445
Actual	FY 2010-11	\$ 20,099,437	3,714
Actual	FY 2011-12	\$ 21,897,445	3,896
Actual + Forecast	FY 2012-13	\$ 20,031,583	3,746
Actual + Forecast	FY 2013-14	\$ 20,384,704	3,818
Forecast	FY 2014-15	\$ 20,737,824	3,894

Budget Forecast Narrative:

Slight growth in dollars and clients is expected for FY 2014-15 Adult Crisis Residential Services.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 1a
ADULTS
Clients Receiving Adult Crisis Residential Services by Age Group
Fiscal Year 2011-12
Data as of 06/30/13

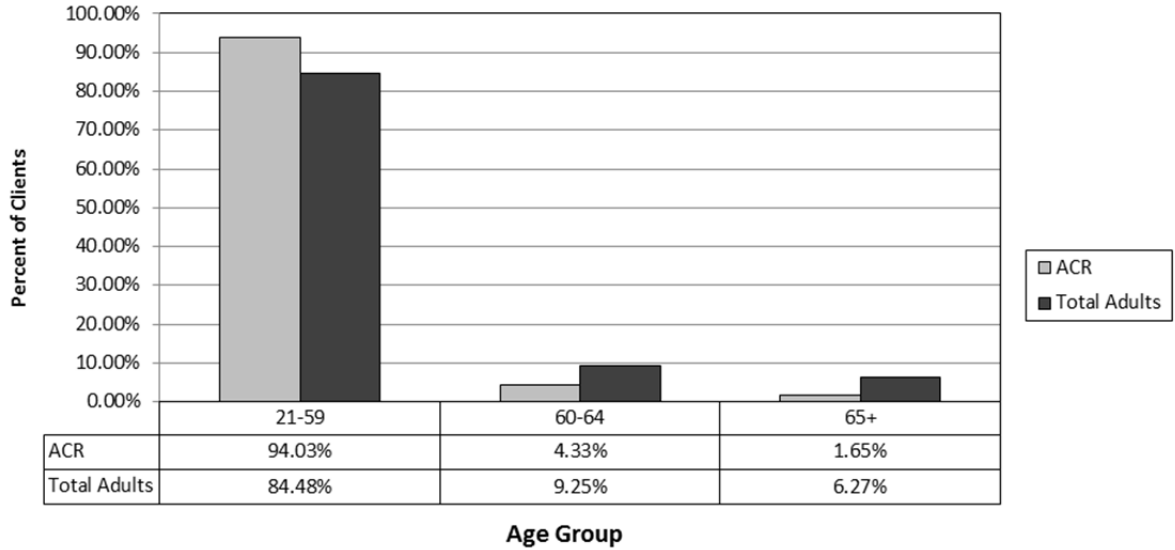


Table 1b
ADULTS
Clients Receiving Adult Crisis Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 06/30/13

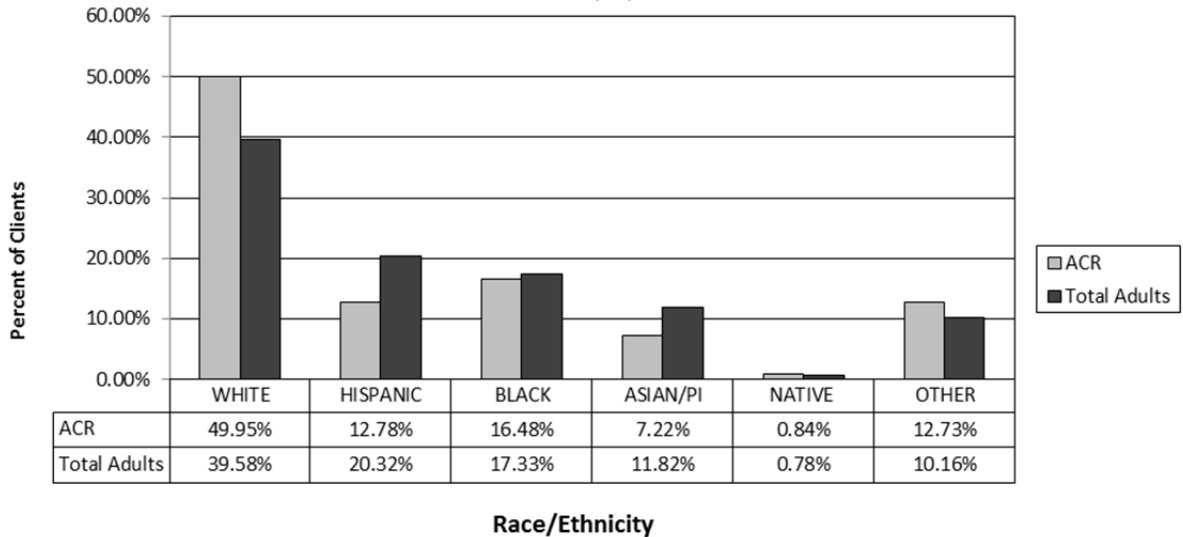


Table 1c
ADULTS
Clients Receiving Adult Crisis Residential Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

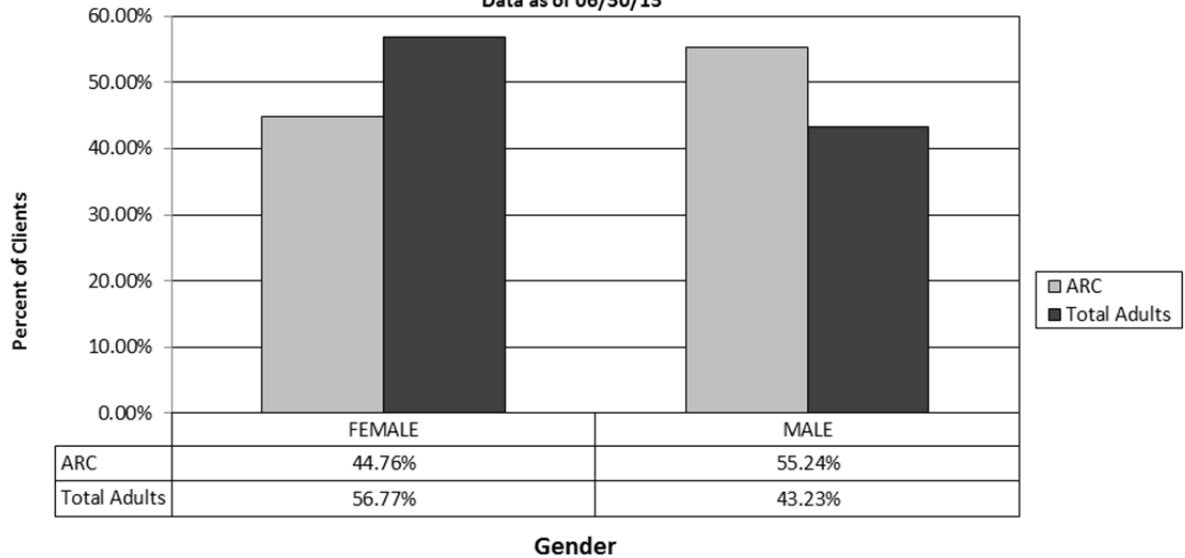


Table 1d
Other Services Received by Adults Receiving Adult Crisis Service
Fiscal Year 2011-12

	Number of Clients	Percent Clients
ADULT CRISIS RESIDENTIAL	3,896	100.00%
MEDICATION SUPPORT	3,380	86.76%
THERAPY AND OTHER SERVICE ACTIVITIES	2,918	74.90%
TARGETED CASE MANAGEMENT	2,693	69.12%
CRISIS STABILIZATION	1,855	47.61%
CRISIS INTERVENTION	1,756	45.07%
FFS-HOSPITAL INPATIENT	957	24.56%
HOSPITAL INPATIENT	614	15.76%
ADULT RESIDENTIAL	446	11.45%
PHF	334	8.57%
DAY TX REHABILITATIVE FULL DAY	302	7.75%
DAY TX REHABILITATIVE HALF DAY	29	0.74%
DAY TX INTENSIVE FULL DAY	4	0.10%

Service Metrics:

**Table 1e
Adult Crisis Residential Approved Amount
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Amount
Number of Clients	3,896	100%	\$ 67,694
Mean	\$ 5,651	99%	\$ 29,703
Standard Deviation	\$ 6,223	95%	\$ 17,269
Median	\$ 3,760	90%	\$ 12,434
Mode	\$ 345	75%	\$ 7,520
Interquartile Range	\$ 5,793	50%	\$ 3,760
		25%	\$ 1,727

**Table 1f
Adult Crisis Residential Days
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Days
Number of Clients	3,896	100%	196
Mean	18	99%	89
Standard Deviation	19	95%	54
Median	14	90%	39
Mode	14	75%	25
Interquartile Range	19	50%	14
		25%	6

**Table 1g
Historical Trends
Adult Crisis Residential by Fiscal Year**

<u>Data Type</u>	<u>2009-2010</u>	<u>2010-2011</u>	<u>2011-2012</u>	<u>2012-2013*</u>
Number of Clients	3,445	3,714	3,896	3,746
Number of Days	65,690	68,007	71,847	62,542
Days Per Client	19	18	18	17
Approved Amount	\$ 18,871,631	\$ 20,099,437	\$ 21,897,445	\$ 20,031,583

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Adult Residential Services

Adult Residential Treatment Services:

Adult Residential Treatment Services are rehabilitative services provided in a non-institutional, residential setting for beneficiaries who would be at risk of hospitalization or other institutional placement if they were not receiving residential treatment services. The services include a wide range of activities and services that support beneficiaries in their effort to restore, maintain, and apply interpersonal and independent living skills and to access community support systems. Service activities may include assessment, plan development, therapy, rehabilitation, and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

The forecast for Adult Residential Services indicates a decrease in clients and total cost through SFY 2014-15.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 22,187,309	1,519
Actual	FY 2009-10	\$ 18,039,205	1,436
Actual	FY 2010-11	\$ 15,057,763	1,155
Actual	FY 2011-12	\$ 15,277,907	1,157
Actual + Forecast	FY 2012-13	\$ 14,511,376	1,105
Actual + Forecast	FY 2013-14	\$ 13,190,266	1,021
Forecast	FY 2014-15	\$ 11,869,157	934

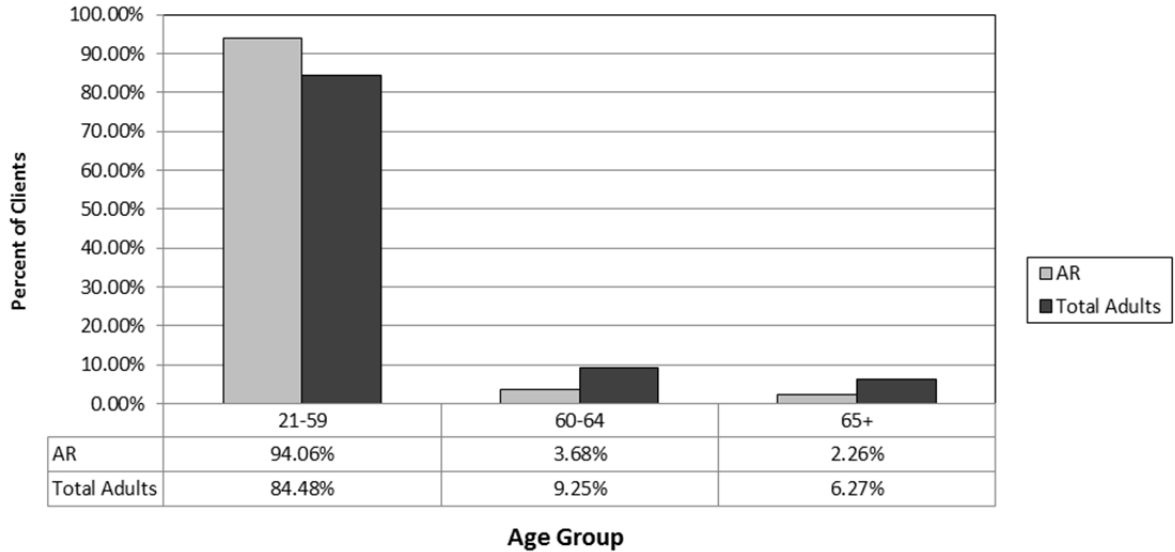
Budget Forecast Narrative:

The forecast indicates a declining trend in costs through FY 2014-15.

Client Profile Data:

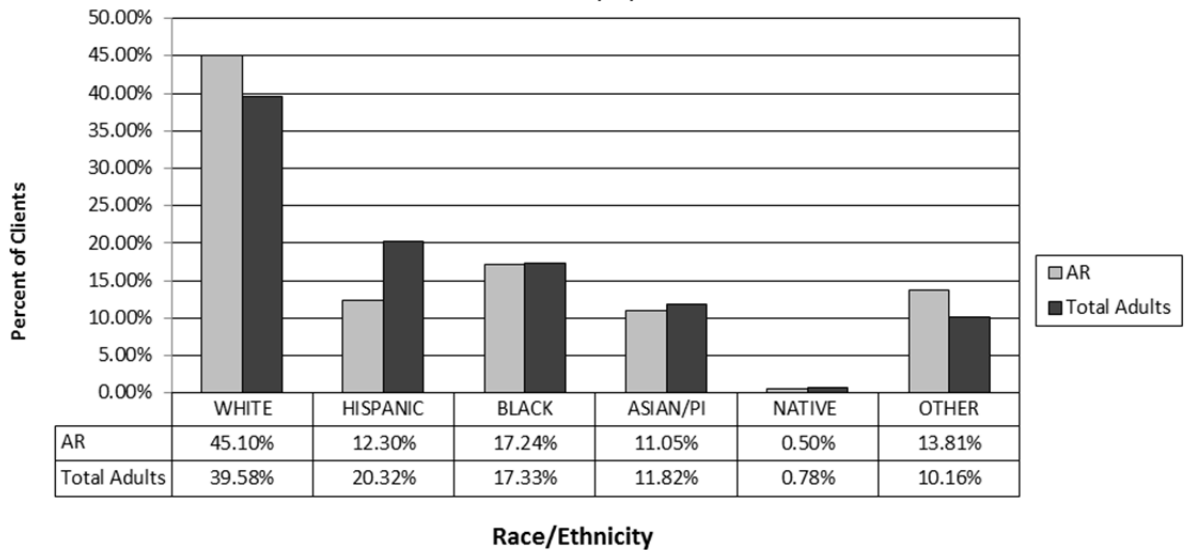
Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The FY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 2a
ADULTS
Clients Receiving Adult Residential Services by Age Group
Fiscal Year 2011-12
Data as of 06/30/13



Age Group

Table 2b
ADULTS
Clients Receiving Adult Residential Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 06/30/13



Race/Ethnicity

Table 2c
ADULTS
Clients Receiving Adult Residential Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

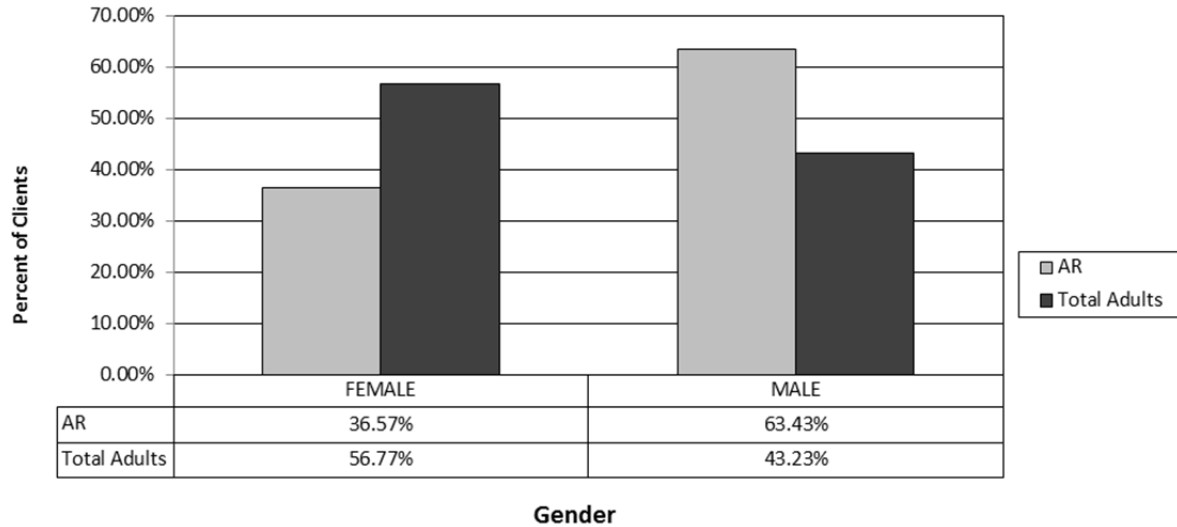


Table 2d
Other Services Received by Adults Receiving Adult Residential Service
Fiscal Year 2011-12

	Number of Clients	Percent Clients
ADULT RESIDENTIAL	1,157	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	1,035	89.46%
TARGETED CASE MANAGEMENT	987	85.31%
MEDICATION SUPPORT	931	80.47%
CRISIS STABILIZATION	485	41.92%
DAY TX REHABILITATIVE FULL DAY	476	41.14%
CRISIS INTERVENTION	472	40.80%
ADULT CRISIS RESIDENTIAL	446	38.55%
HOSPITAL INPATIENT	161	13.92%
FFS-HOSPITAL INPATIENT	151	13.05%
PHF	59	5.10%
DAY TX REHABILITATIVE HALF DAY	15	1.30%
DAY TX INTENSIVE FULL DAY	12	1.04%

Service Metrics:

**Table 2e
Adult Crisis Residential Approved Amount
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Amount
Number of Clients	1,157	100%	\$ 61,319
Mean	\$ 13,205	99%	\$ 54,413
Standard Deviation	\$ 12,517	95%	\$ 40,767
Median	\$ 9,480	90%	\$ 30,323
Mode	\$ 842	75%	\$ 17,857
Interquartile Range	\$ 13,982	50%	\$ 9,480
		25%	\$ 3,875

**Table 2f
Adult Crisis Residential Days
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Days
Number of Clients	1,157	100%	364
Mean	84	99%	327
Standard Deviation	79	95%	258
Median	60	90%	204
Mode	5	75%	117
Interquartile Range	93	50%	60
		25%	24

**Table 2g
Historical Trends
Adult Residential by Fiscal Year**

Data Type	2009-2010	2010-2011	2011-2012	2012-2013*
Number of Clients	1,436	1,155	1,157	1,105
Number of Days	120,395	96,948	97,138	90,257
Days Per Client	84	84	84	82
Approved Amount	\$ 18,039,205	\$ 15,057,763	\$ 15,277,907	\$ 14,511,376

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Crisis Intervention

Crisis Intervention:

Crisis intervention services last less than 24 hours and are for, or on behalf of, a beneficiary for a condition that requires more timely response than a regularly scheduled visit. Service activities include, but are not limited to, assessment, collateral and therapy. Crisis Intervention services may either be face-to-face or by telephone with the beneficiary or the beneficiary’s significant support person and may be provided anywhere in the community.

Summary:

While the number of clients is forecast to decrease in FY 2014-15 for Crisis Intervention services, the costs should increase slightly through FY 2014-15.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 29,575,525	36,007
Actual	FY 2009-10	\$ 27,850,847	33,946
Actual	FY 2010-11	\$ 26,664,591	31,843
Actual	FY 2011-12	\$ 26,984,252	30,882
Actual + Forecast	FY 2012-13	\$ 28,436,194	28,449
Actual + Forecast	FY 2013-14	\$ 28,506,046	26,849
Forecast	FY 2014-15	\$ 28,575,898	25,247

Budget Forecast Narrative:

Costs for Crisis Intervention services should increase slightly through FY 2014-15.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 3a
ADULTS
Clients Receiving Crisis Intervention by Age Group
Fiscal Year 2011-12
Data as of 06/30/13

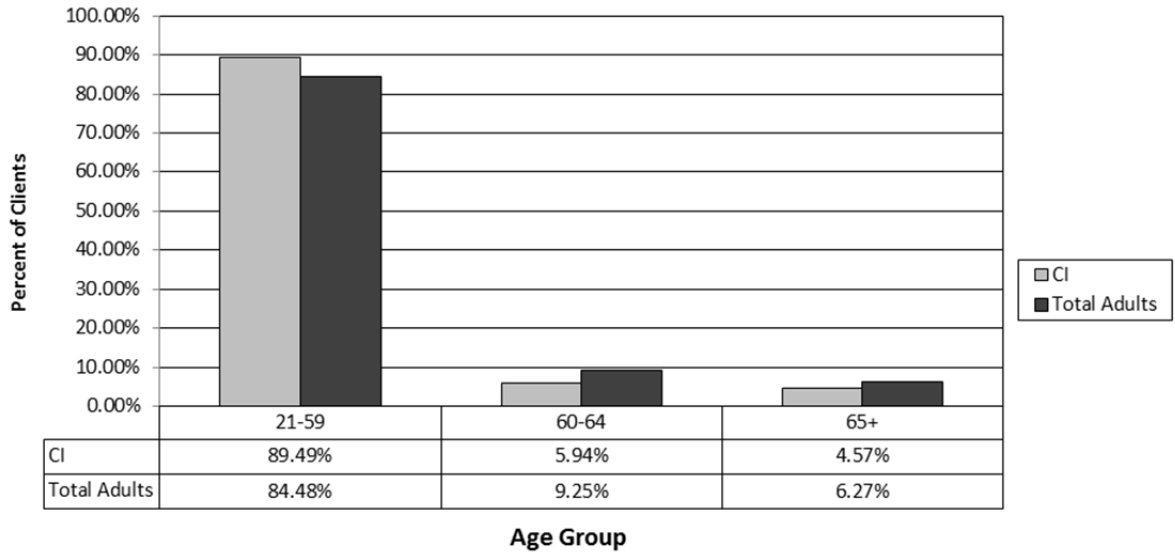


Table 3b
ADULTS
Clients Receiving Crisis Intervention by Race/Ethnicity
Fiscal Year 2011-12
Data as of 06/30/13

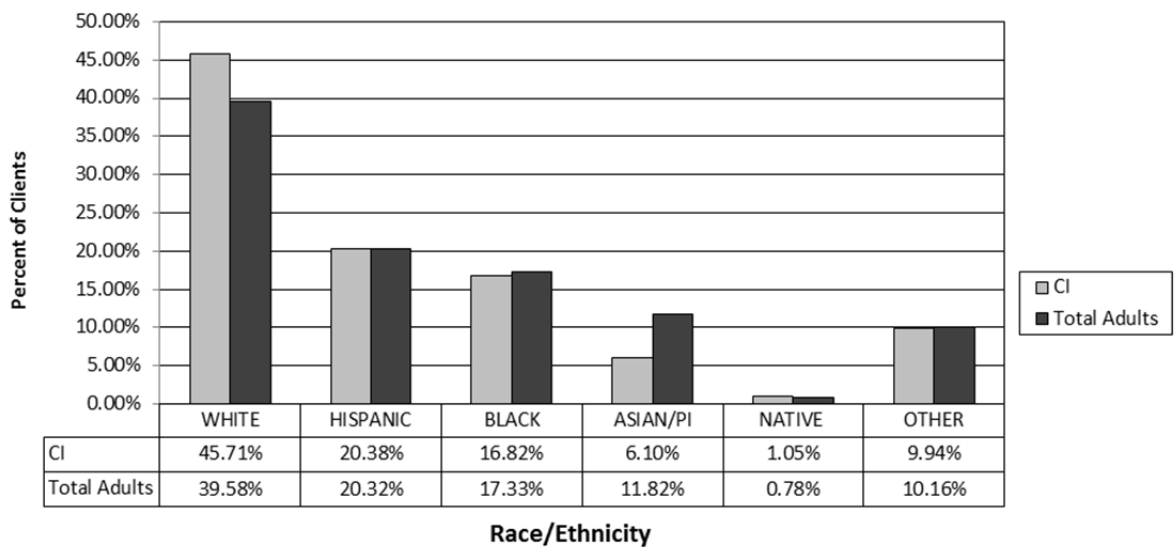


Table 3c
ADULTS
Clients Receiving Crisis Intervention by Gender
Fiscal Year 2011-12
Data as of 06/30/13

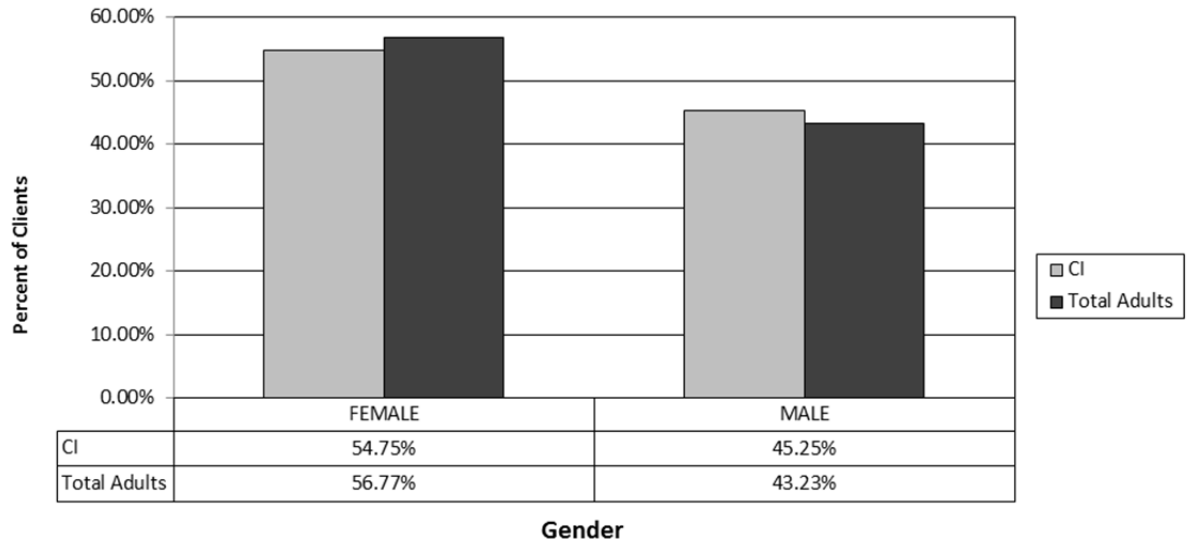


Table 3d
Other Services Received by Adults Receiving Crisis Intervention Service
Service Fiscal Year 2011-12

	Number of Clients	Percent Clients
CRISIS INTERVENTION	30,882	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	21,266	68.86%
MEDICATION SUPPORT	19,705	63.81%
TARGETED CASE MANAGEMENT	17,557	56.85%
CRISIS STABILIZATION	6,640	21.50%
FFS-HOSPITAL INPATIENT	5,749	18.62%
HOSPITAL INPATIENT	2,909	9.42%
ADULT CRISIS RESIDENTIAL	1,756	5.69%
PHF	1,537	4.98%
ADULT RESIDENTIAL	472	1.53%
DAY TX REHABILITATIVE FULL DAY	327	1.06%
DAY TX REHABILITATIVE HALF DAY	42	0.14%
DAY TX INTENSIVE FULL DAY	2	0.01%

Service Metrics:

**Table 3e
Crisis Intervention Approved Amount
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Amount
Number of Clients	30,882	100%	\$ 22,271
Mean	\$ 886	99%	\$ 5,172
Standard Deviation	\$ 1,035	95%	\$ 2,694
Median	\$ 578	90%	\$ 1,862
Mode	\$ 466	75%	\$ 1,048
Interquartile Range	\$ 757	50%	\$ 578
		25%	\$ 291

**Table 3f
Crisis Intervention Minutes
Fiscal Year 2011-12**

Statistic	Minutes	Quartile	Minutes
Number of Clients	30,882	100%	5,809
Mean	234	99%	1,380
Standard Deviation	275	95%	718
Median	150	90%	489
Mode	120	75%	280
Interquartile Range	199	50%	150
		25%	81

**Table 3g
Historical Trends
Crisis Intervention Fiscal Year**

Data Type	2009-2010	2010-2011	2011-2012	2012-2013*
Number of Clients	33,946	31,843	30,882	28,449
Number of Minutes	7,451,140	7,116,739	7,216,120	6,737,570
Minutes Per Client	219	223	234	237
Approved Amount	\$ 27,850,847	\$ 26,664,591	\$ 26,984,252	\$ 28,436,194

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Crisis Stabilization

Crisis Stabilization:

Crisis stabilization services last less than 24 hours and are for, or on behalf of, a beneficiary for a condition that requires a more timely response than a regularly scheduled visit. Service activities include but are not limited to one or more of the following: assessment, collateral, and therapy. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

The forecast for Crisis Stabilization Services is for moderate growth in clients and costs over the next few fiscal years.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 33,950,960	19,725
Actual	FY 2009-10	\$ 34,354,978	19,296
Actual	FY 2010-11	\$ 37,429,203	21,068
Actual	FY 2011-12	\$ 43,291,334	23,252
Actual + Forecast	FY 2012-13	\$ 51,232,600	23,642
Actual + Forecast	FY 2013-14	\$ 54,787,124	24,585
Forecast	FY 2014-15	\$ 58,341,648	25,527

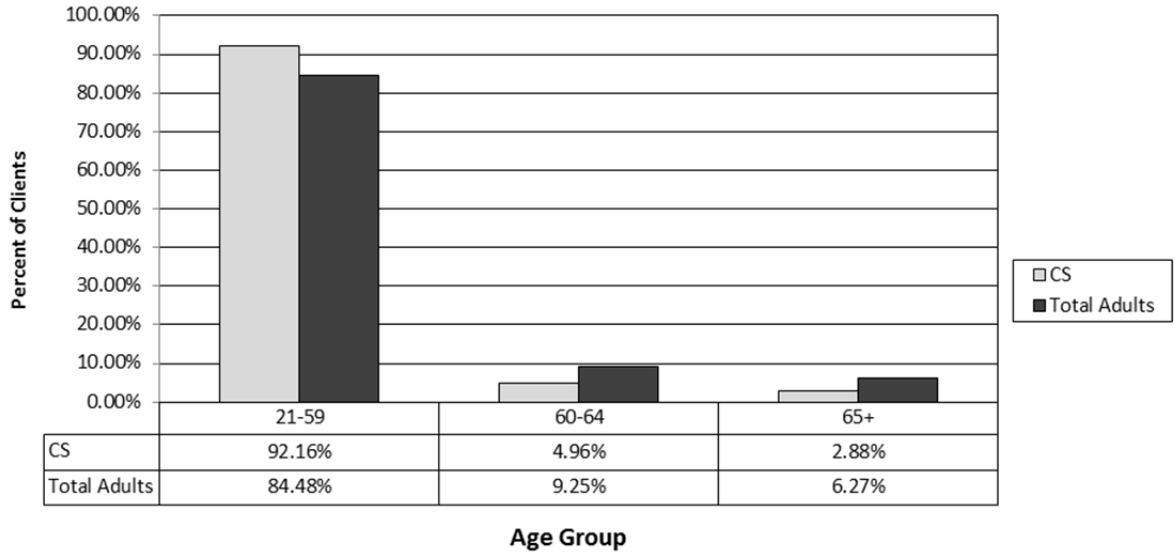
Budget Forecast Narrative:

Moderate growth in costs is forecast through FY 2014-15.

Client Profile Data:

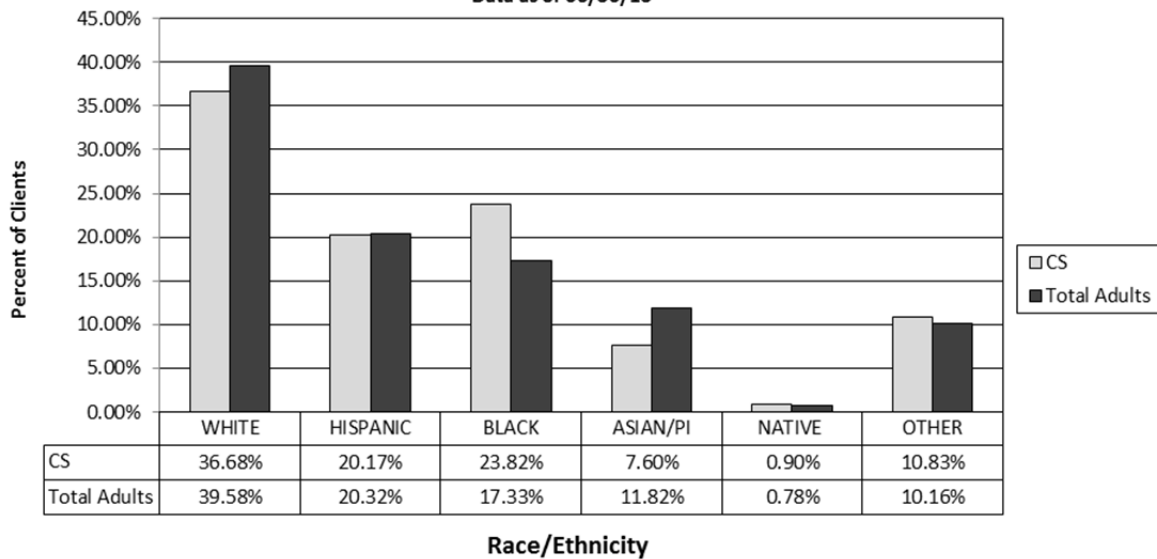
Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 4a
ADULTS
Clients Receiving Crisis Stabilization Services by Age Group
Fiscal Year 2011-12
Data as of 06/30/2013



Age Group

Table 4b
ADULTS
Clients Receiving Crisis Stabilization Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 06/30/13



Race/Ethnicity

Table 4c
ADULTS
Clients Receiving Crisis Stabilization Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

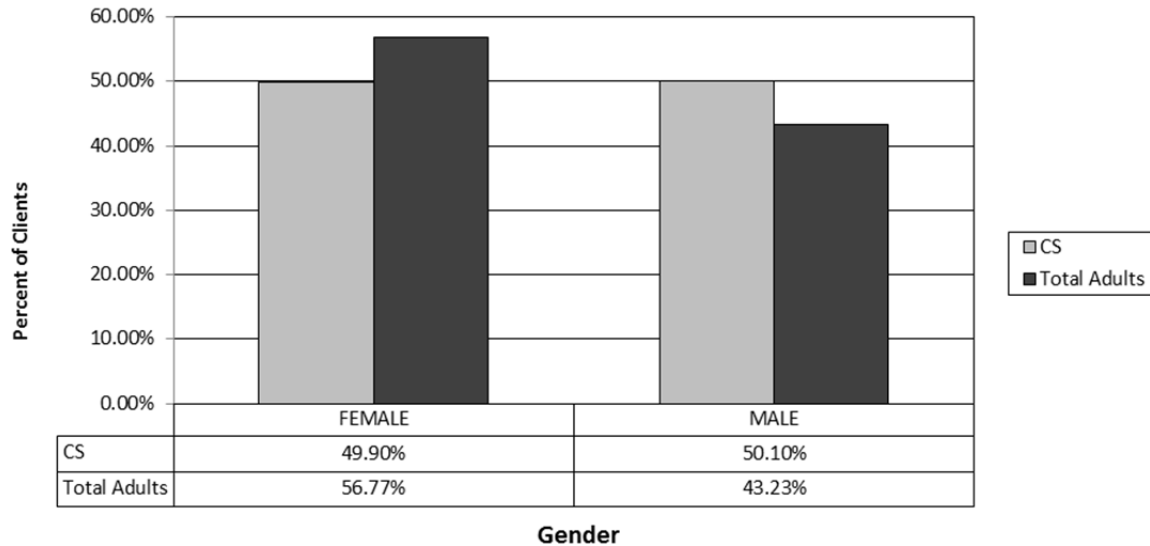


Table 4d
Other Services Received by Adults Receiving Crisis Stabilization Service
Fiscal Year 2011-12

	Number of Clients	Percent Clients
CRISIS STABILIZATION	23,252	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	13,300	57.20%
MEDICATION SUPPORT	12,331	53.03%
TARGETED CASE MANAGEMENT	9,691	41.68%
CRISIS INTERVENTION	6,824	29.35%
FFS-HOSPITAL INPATIENT	4,471	19.23%
HOSPITAL INPATIENT	4,230	18.19%
ADULT CRISIS RESIDENTIAL	1,907	8.20%
PHF	1,049	4.51%
ADULT RESIDENTIAL	498	2.14%
DAY TX REHABILITATIVE FULL DAY	370	1.59%
DAY TX REHABILITATIVE HALF DAY	116	0.50%
DAY TX INTENSIVE FULL DAY	7	0.03%

Service Metrics:

**Table 4e
Crisis Stabilization Approved Amount
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Amount
Number of Clients	23,252	100%	\$ 85,275
Mean	\$ 1,914	99%	\$ 13,614
Standard Deviation	\$ 3,074	95%	\$ 5,861
Median	\$ 1,324	90%	\$ 3,782
Mode	\$ 1,891	75%	\$ 1,891
Interquartile Range	\$ 1,434	50%	\$ 1,324
		25%	\$ 457

**Table 4f
Crisis Stabilization Hours
Fiscal Year 2011-12**

Statistic	Hours	Quartile	Hours
Number of Clients	23,252	100%	902
Mean	20	99%	146
Standard Deviation	33	95%	63
Median	15	90%	40
Mode	20	75%	20
Interquartile Range	15	50%	15
		25%	5

**Table 4g
Historical Trends
Crisis Stabilization by Fiscal Year**

<u>Data Type</u>	<u>2009-2010</u>	<u>2010-2011</u>	<u>2011-2012</u>	<u>2012-2013*</u>
Number of Clients	19,296	21,068	23,252	23,642
Number of Hours	378,019	412,873	468,867	504,328
Hours Per Client	20	20	20	21
Approved Amount	\$ 34,354,978	\$ 37,429,203	\$ 43,291,334	\$ 51,232,600

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Day Rehabilitative Half Day

Day Rehabilitative (Half-Day):

Day rehabilitation services are a structured program of rehabilitation and therapy with services to improve, maintain or restore personal independence and functioning, consistent with requirements for learning and development and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to assessment, plan development, therapy, rehabilitation and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

For Day Rehabilitative Half Day Services, the forecast for FY 2013-14 is for a decline in both dollars and clients.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 602,222	140
Actual	FY 2009-10	\$ 618,775	147
Actual	FY 2010-11	\$ 769,234	212
Actual	FY 2011-12	\$ 1,067,169	274
Actual + Forecast	FY 2012-13	\$ 760,518	199
Actual + Forecast	FY 2013-14	\$ 735,253	193
Forecast	FY 2014-15	\$ 709,986	189

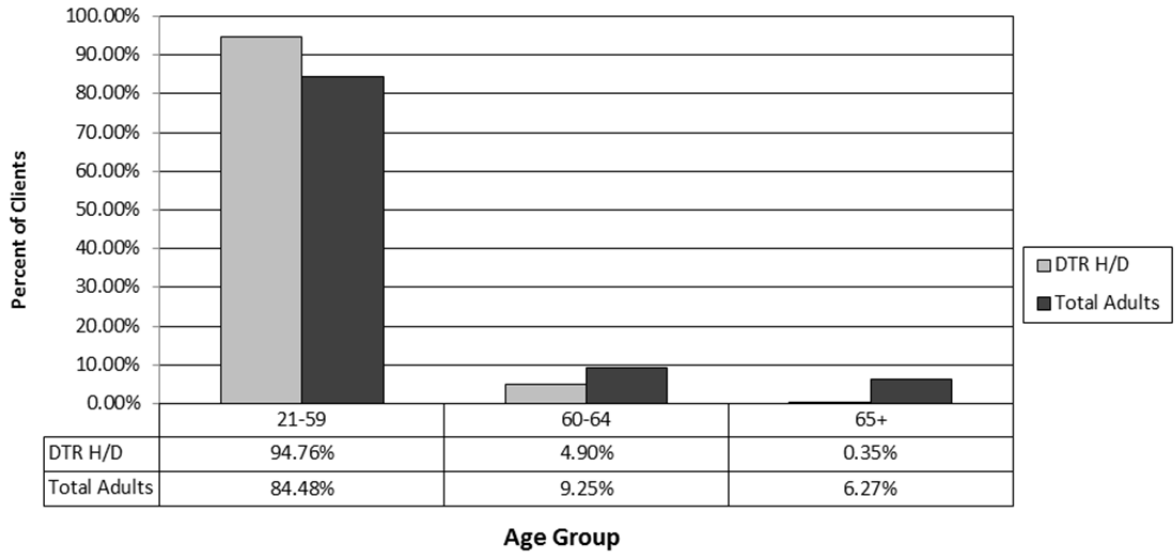
Budget Forecast Narrative:

Day Rehabilitative Half Day service costs are forecast to decline through FY 2013-14.

Client Profile Data:

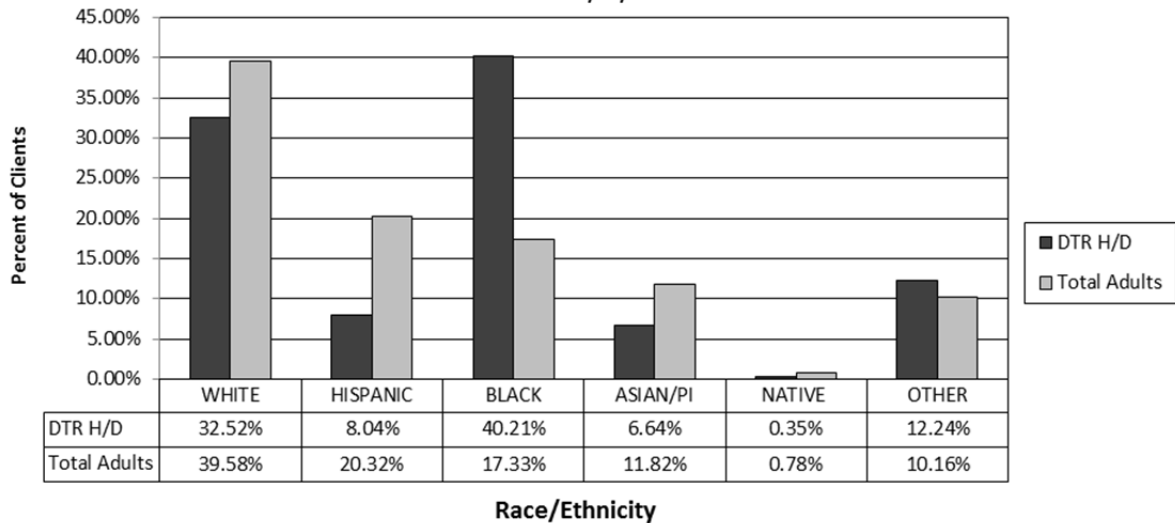
Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 5a
ADULTS
Clients Receiving Day Treatment Rehabilitative-Half Day Services by Age Group
Fiscal Year 2011-12
Data as of 06/30/13



Age Group

Table 5b
ADULTS
Clients Receiving Day Treatment Rehabilitative-Half Day Services
by Race/Ethnicity
Fiscal Year 2011-12
Data as of 06/30/13



Race/Ethnicity

Table 5c
ADULTS
Clients Receiving Day Treatment Rehabilitative-Half Day Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

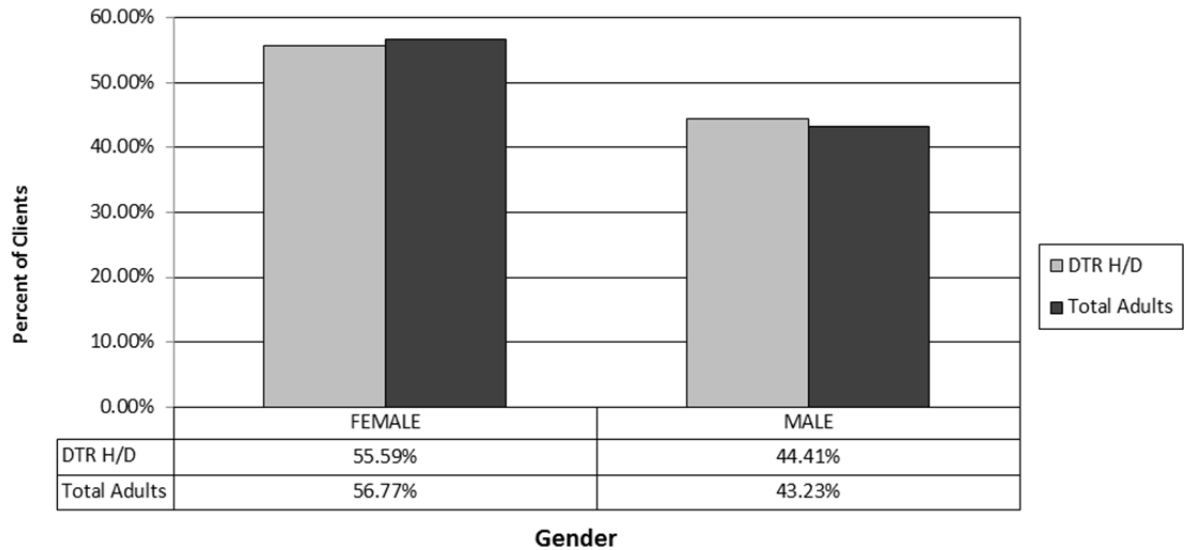


Table 5d
Other Services Received by Adults Receiving Day Rehabilitative Half Day Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
DAY TX REHABILITATIVE HALF DAY	274	100.00%
MEDICATION SUPPORT	206	75.18%
THERAPY AND OTHER SERVICE ACTIVITIES	189	68.98%
TARGETED CASE MANAGEMENT	140	51.09%
CRISIS STABILIZATION	112	40.88%
CRISIS INTERVENTION	42	15.33%
HOSPITAL INPATIENT	40	14.60%
ADULT CRISIS RESIDENTIAL	29	10.58%
FFS-HOSPITAL INPATIENT	17	6.20%
ADULT RESIDENTIAL	15	5.47%

Service Metrics:

Table 5e
Day Treatment Rehabilitation Half Day Approved Amount
Fiscal Year 2011-12

Statistic	Amount	Quartile	Amount
Number of Clients	274	100%	\$ 23,072
Mean	\$ 3,895	99%	\$ 21,021
Standard Deviation	\$ 4,391	95%	\$ 12,955
Median	\$ 2,145	90%	\$ 9,331
Mode	\$ 295	75%	\$ 5,808
Interquartile Range	\$ 5,051	50%	\$ 2,145
		25%	\$ 757

Table 5f
Day Treatment Rehabilitation Half Days
Fiscal Year 2011-12

Statistic	Amount	Quartile	Days
Number of Clients	274	100%	225
Mean	43	99%	211
Standard Deviation	47	95%	146
Median	26	90%	98
Mode	1	75%	64
Interquartile Range	56	50%	26
		25%	8

Table 5g
Historical Trends
Day Rehabilitative Half Day by Fiscal Year

<u>Data Type</u>	<u>2009-2010</u>	<u>2010-2011</u>	<u>2011-2012*</u>	<u>2012-2013</u>
Number of Clients	147	212	274	199
Number of Days	7,243	8,429	11,677	8,436
Days Per Client	49	40	43	42
Approved Amount	\$ 618,775	\$ 769,234	\$ 1,067,169	\$ 760,518

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Day Rehabilitative Full Day

Day Rehabilitative (Full-Day):

Day rehabilitation services are a structured program of rehabilitation and therapy with services to improve, maintain or restore personal independence and functioning, consistent with requirements for learning and development and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to assessment, plan development, therapy, rehabilitation and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

The forecast for Day Rehabilitative Full Day Services shows a sharp decrease in clients and cost through SFY 2014-15.

The reduction in the use of Day Treatment and Day Rehabilitation Half Day and Full Day services is due to counties using more community based services to achieve the same or better outcomes with less costly services. This is due to the implementation of Mental Health Services Act (MHSA) Full Service Partnerships and other innovations that allow counties to effectively meet the needs of clients at home rather than institutional settings.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 12,384,663	1,610
Actual	FY 2009-10	\$ 10,013,561	1,433
Actual	FY 2010-11	\$ 9,162,148	1,159
Actual	FY 2011-12	\$ 8,132,649	967
Actual + Forecast	FY 2012-13	\$ 5,590,135	699
Actual + Forecast	FY 2013-14	\$ 3,945,720	465
Forecast	FY 2014-15	\$ 2,301,305	231

Budget Forecast Narrative:

Day Rehabilitation Full Day costs are forecast to decline sharply through FY 2014-15.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 6a
ADULTS
Clients Receiving Day Treatment Rehabilitative-Full Day Services by Age Group
Fiscal Year 2011-12
Data as of 06/30/13

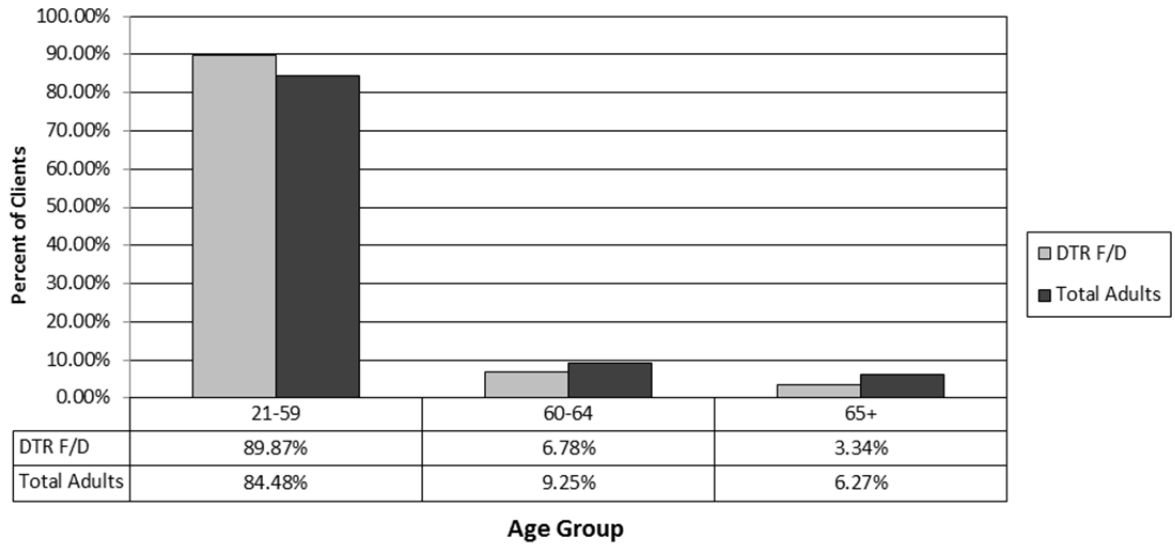


Table 6b
ADULTS
Clients Receiving Day Treatment Rehabilitative-Full Day Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 06/30/13

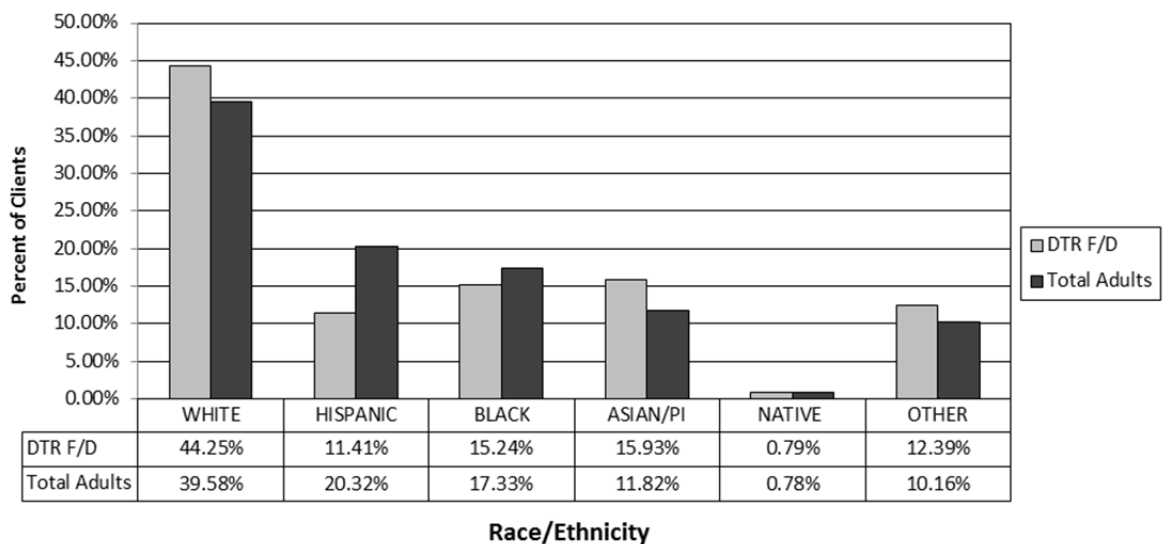


Table 6c
ADULT
Clients Receiving Day Treatment Rehabilitative-Full Day Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

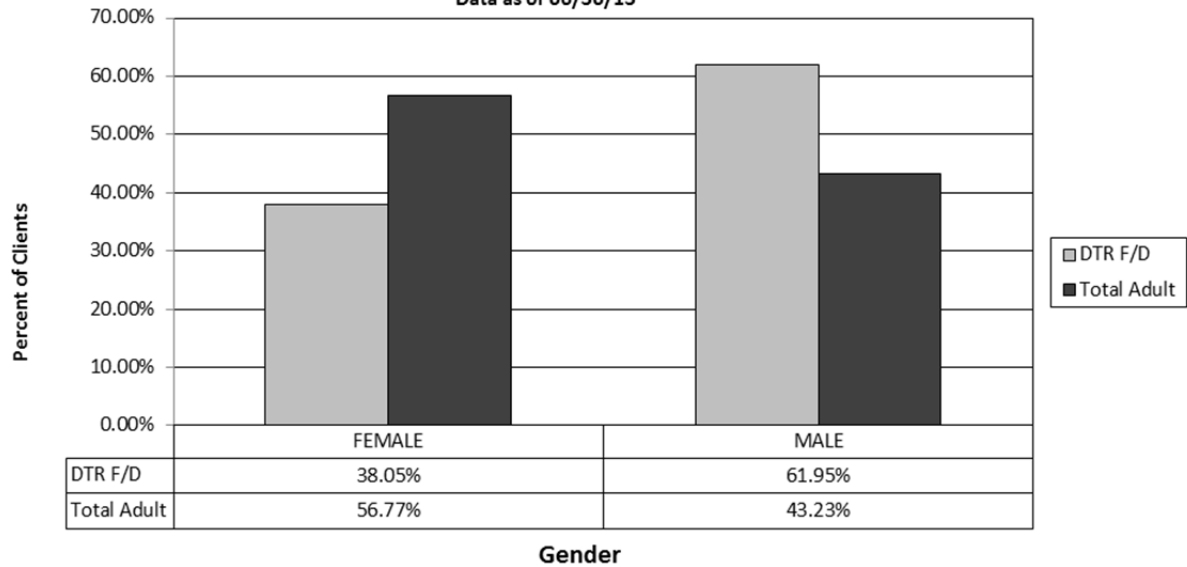


Table 6d
Other Services Received by Adults Receiving Day Rehabilitative Full Day Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
DAY TX REHABILITATIVE FULL DAY	967	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	854	88.31%
TARGETED CASE MANAGEMENT	796	82.32%
MEDICATION SUPPORT	745	77.04%
ADULT RESIDENTIAL	476	49.22%
CRISIS STABILIZATION	359	37.13%
CRISIS INTERVENTION	327	33.82%
ADULT CRISIS RESIDENTIAL	302	31.23%
HOSPITAL INPATIENT	144	14.89%
FFS-HOSPITAL INPATIENT	76	7.86%
PHF	12	1.24%
DAY TX INTENSIVE FULL DAY	8	0.83%
DAY TX REHABILITATIVE HALF DAY	7	0.72%

Service Metrics:

Table 6e
Day Treatment Rehabilitative Full Day Approved Amount
Fiscal Year 2011-12

Statistic	Amount	Quartile	Amount
Number of Clients	967	100%	\$ 38,880
Mean	\$ 8,410	99%	\$ 34,080
Standard Deviation	\$ 8,192	95%	\$ 26,510
Median	\$ 5,643	90%	\$ 21,655
Mode	\$ 2,625	75%	\$ 11,680
Interquartile Range	\$ 9,187	50%	\$ 5,643
		25%	\$ 2,494

Table 6f
Day Treatment Rehabilitative Full Days
Fiscal Year 2011-12

Statistic	Amount	Quartile	Days
Number of Clients	967	100%	324
Mean	65	99%	261
Standard Deviation	63	95%	202
Median	65	90%	166
Mode	5	75%	89
Interquartile Range	69	50%	44
		25%	20

Table 6g
Historical Trends
Day Rehabilitative Full Day by Fiscal Year

<u>Data Type</u>	<u>2009-2010</u>	<u>2010-2011</u>	<u>2011-2012</u>	<u>2012-2013*</u>
Number of Clients	1,433	1,159	967	699
Number of Days	86,570	77,179	62,840	40,401
Days Per Client	60	67	65	58
Approved Amount	\$ 10,013,561	\$ 9,162,148	\$ 8,132,649	\$ 5,590,135

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Day Treatment Intensive Half Day

Day Treatment Intensive (Half-Day):

Day treatment intensive services are a structured, multi-disciplinary program of therapy that may be used as an alternative to hospitalization, or to avoid placement in a more restrictive setting, or to maintain the client in a community setting and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to, assessment, plan development, therapy, rehabilitation and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

County mental health plans use Day Treatment Intensive Full Day services for adults, if needed. No half day service costs were claimed in FY 2008-09 or after.

The reduction in the use of Day Treatment and Day Rehabilitation Half Day and Full Day services is due to counties using more community based services to achieve the same or better outcomes with less costly services. This is due to the implementation of Mental Health Services Act (MHSA) Full Service Partnerships and other innovations that allow counties to effectively meet the needs of clients at home rather than institutional settings.

Day Treatment Intensive Full Day

Day Treatment Intensive (Full-Day):

Day treatment intensive services are a structured, multi-disciplinary program of therapy that may be used as an alternative to hospitalization, or to avoid placement in a more restrictive setting, or to maintain the client in a community setting and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to, assessment, plan development, therapy, rehabilitation and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

The forecast for Day Treatment Intensive Full Day Services costs were zero and no clients are expected to be serviced through FY 2014-15.

The reduction in the use of Day Treatment and Day Rehabilitation Half Day and Full Day services is due to counties using more community based services to achieve the same or better outcomes with less costly services. This is due to the implementation of Mental Health Services Act (MHSA) Full Service Partnerships and other innovations that allow counties to effectively meet the needs of clients at home rather than institutional settings.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$756,246	210
Actual	FY 2009-10	\$463,225	97
Actual	FY 2010-11	\$465,618	61
Actual	FY 2011-12	\$74,617	16
Actual + Forecast	FY 2012-13	\$0	0
Actual + Forecast	FY 2013-14	\$0	0
Forecast	FY 2014-15	\$0	0

Budget Forecast Narrative:

Costs are expected remain at zero in FY 2013-14 and through FY 2014-15

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 7a
ADULTS
Clients Receiving Day Treatment Intensive-Full Day Services by Age Group
Fiscal Year 2011-12
Data as of 06/30/13

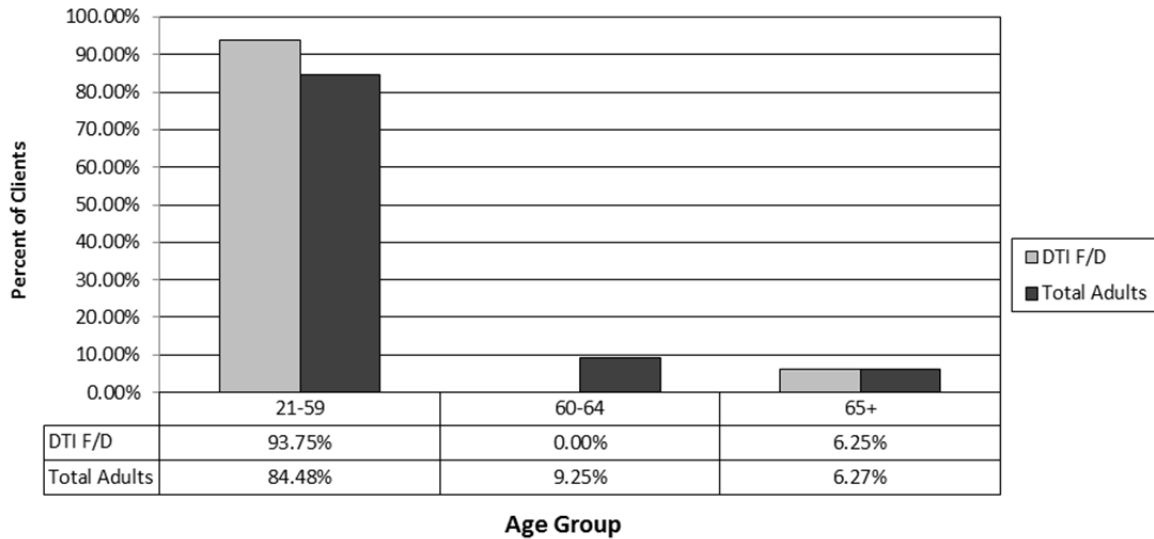


Table 7b
ADULTS
Clients Receiving Day Treatment Intensive-Full Day Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 06/30/13

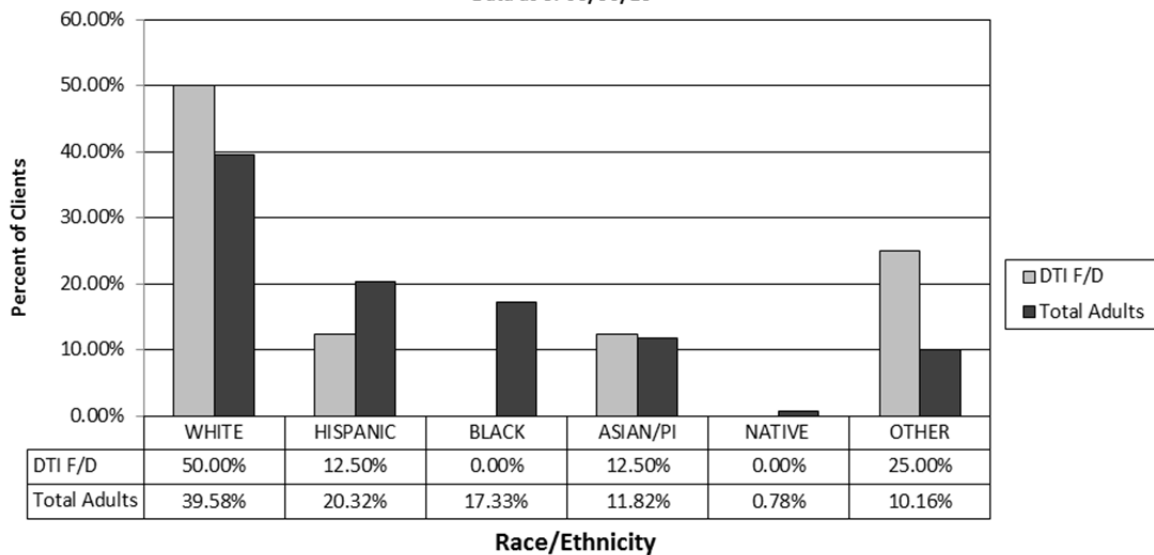


Table 7c
ADULTS
Clients Receiving Day Treatment Intensive-Full Day Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

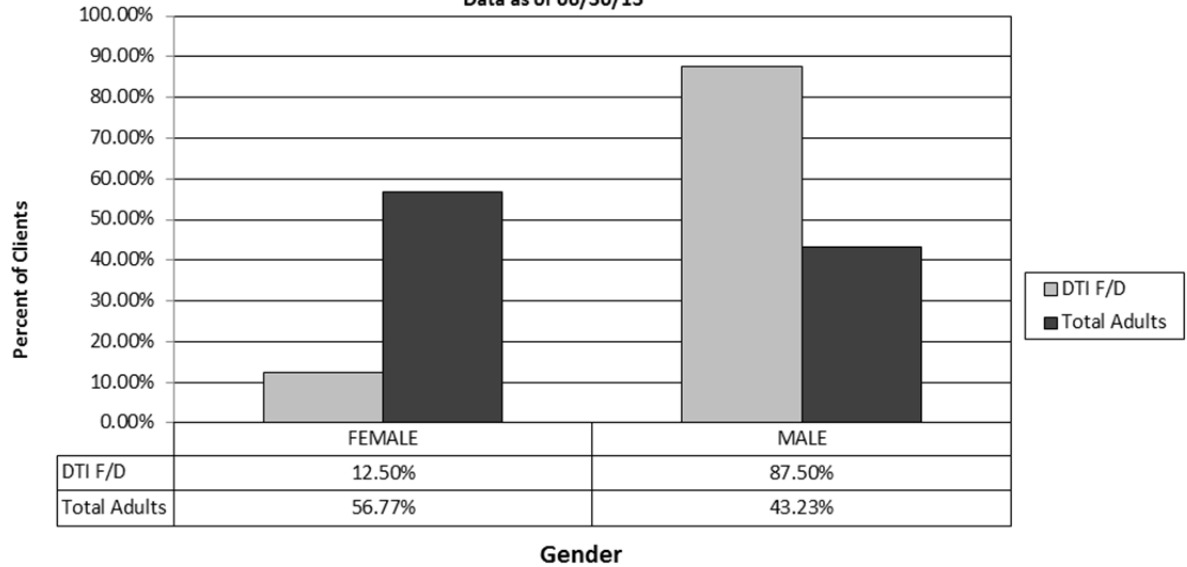


Table 7d
Other Services Received by Adults Receiving Day Treatment Intensive Full Day Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
DAY TX INTENSIVE FULL DAY	16	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	14	87.50%
ADULT RESIDENTIAL	12	75.00%
MEDICATION SUPPORT	12	75.00%
TARGETED CASE MANAGEMENT	10	62.50%
DAY TX REHABILITATIVE FULL DAY	8	50.00%
CRISIS STABILIZATION	7	43.75%
ADULT CRISIS RESIDENTIAL	4	25.00%
CRISIS INTERVENTION	2	12.50%
FFS-HOSPITAL INPATIENT	2	12.50%
HOSPITAL INPATIENT	1	6.25%

Service Metrics:

Table 7e
Day Treatment Intensive Full Day Approved Amount
Fiscal Year 2011-12

Statistic	Amount	Quartile	Amount
Number of Clients	16	100%	\$ 20,243
Mean	\$ 4,629	99%	\$ 20,243
Standard Deviation	\$ 4,844	95%	\$ 20,243
Median	\$ 3,255	90%	\$ 10,324
Mode	\$ 1,215	75%	\$ 5,503
Interquartile Range	\$ 4,030	50%	\$ 3,255
		25%	\$ 1,473

Table 7f
Day Treatment Intensive Full Day Days
Fiscal Year 2011-12

Statistic	Amount	Quartile	Days
Number of Clients	16	100%	100
Mean	27	99%	100
Standard Deviation	24	95%	100
Median	27	90%	51
Mode	6	75%	36
Interquartile Range	26	50%	21
		25%	10

Table 7g
Historical Trends
Day Treatment Intensive Full Day by Fiscal Year

<u>Data Type</u>	<u>2009-2010</u>	<u>2010-2011</u>	<u>2011-2012</u>	<u>2012-2013*</u>
Number of Clients	97	61	16	0
Number of Days	2,984	2,724	431	0
Days Per Client	31	45	27	0
Approved Amount	\$ 463,225	\$ 465,618	\$ 74,617	0

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Medication Support

Medication Support:

Medication support services include prescribing, administering, dispensing and monitoring of psychiatric medications or biologicals that are necessary to alleviate the symptoms of mental illness. Service activities may include but are not limited to: evaluation of the need for medication; evaluation of clinical effectiveness and side effects; obtaining informed consent; instruction in the use, risks and benefits of, and alternatives for, medication; collateral and plan development related to the delivery of service and/or assessment for the client; prescribing, administering, dispensing and monitoring of psychiatric medications or biologicals; and medication education.

Summary:

The number of unduplicated clients is forecast to decrease slightly with an overall decrease in minutes per client and an increase costs per minute and total costs through FY 2014-15.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 201,050,453	172,015
Actual	FY 2009-10	\$ 189,101,130	164,805
Actual	FY 2010-11	\$ 187,380,808	162,991
Actual	FY 2011-12	\$ 192,553,587	164,844
Actual + Forecast	FY 2012-13	\$ 203,272,083	155,529
Actual + Forecast	FY 2013-14	\$ 206,004,534	152,709
Forecast	FY 2014-15	\$ 208,736,986	149,888

Budget Forecast Narrative:

The Medication Support costs are expected to increase through FY 2014-15.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 8a
ADULTS
Clients Receiving Medication Support Services by Age Group
Fiscal Year 2011-12
Data as of 06/30/13

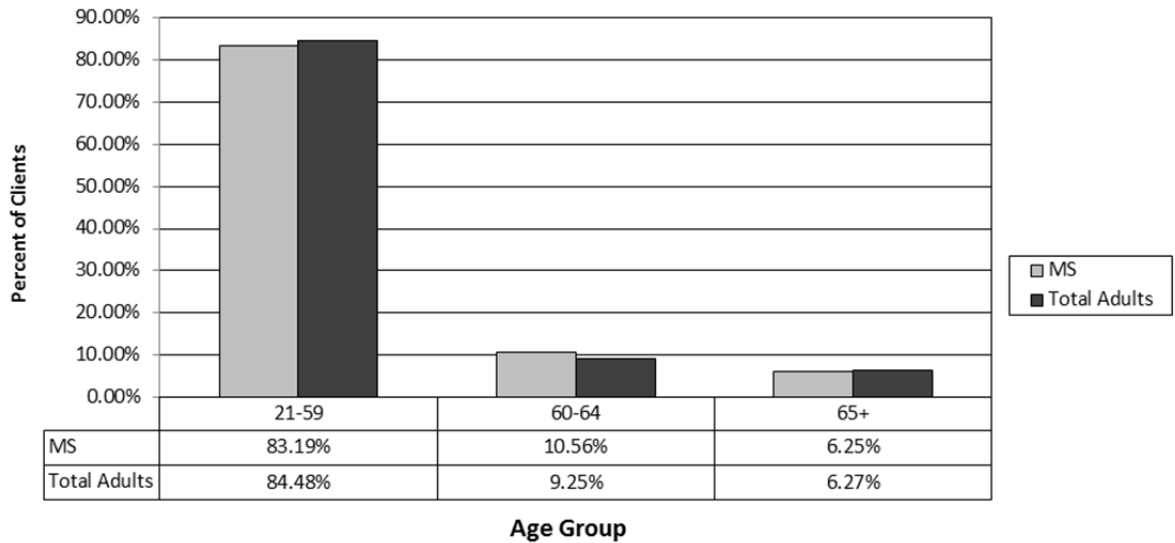


Table 8b
ADULTS
Clients Receiving Medication Support Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 06/30/13

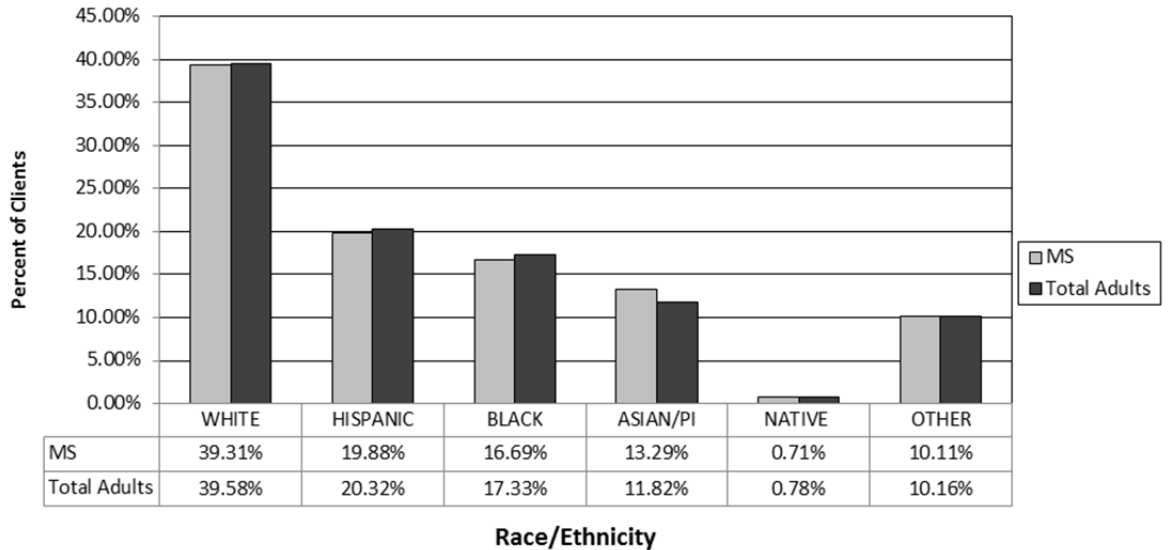


Table 8c
ADULTS
Clients Receiving Medication Support Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

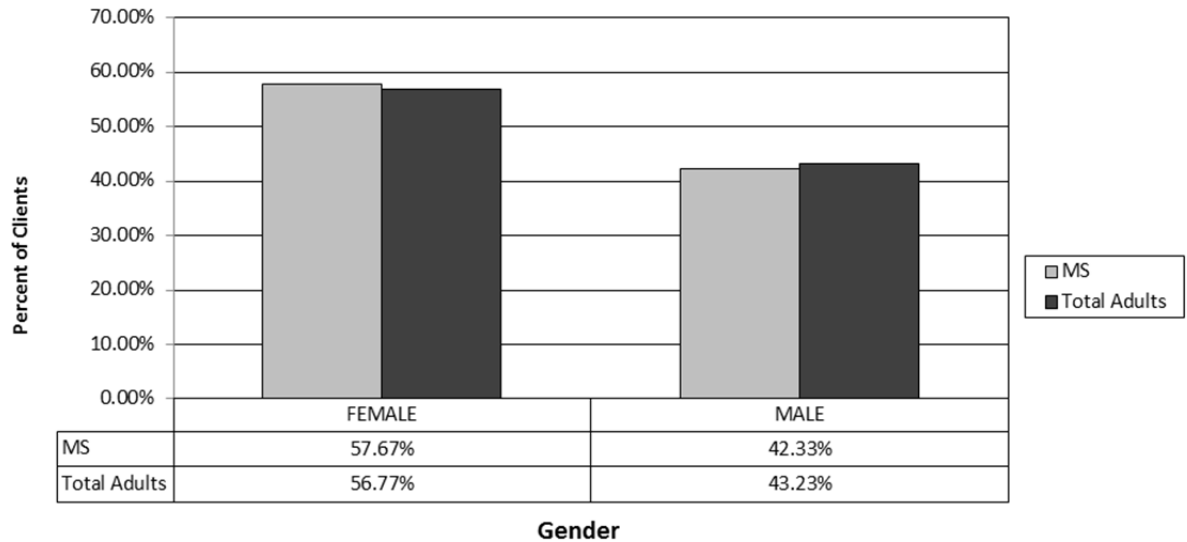


Table 8d
Other Services Received by Adults Receiving Medication Support Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
MEDICATION SUPPORT	164,844	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	115,577	70.11%
TARGETED CASE MANAGEMENT	78,600	47.68%
CRISIS INTERVENTION	19,705	11.95%
CRISIS STABILIZATION	11,997	7.28%
FFS-HOSPITAL INPATIENT	9,792	5.94%
HOSPITAL INPATIENT	4,169	2.53%
ADULT CRISIS RESIDENTIAL	3,380	2.05%
PHF	1,742	1.06%
ADULT RESIDENTIAL	931	0.56%
DAY TX REHABILITATIVE FULL DAY	745	0.45%
DAY TX REHABILITATIVE HALF DAY	206	0.12%
DAY TX INTENSIVE FULL DAY	12	0.01%

Service Metrics:

**Table 8e
Medication Support Approved Amount
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Amount
Number of Clients	164,844	100%	\$ 217,568
Mean	\$ 1,177	99%	\$ 8,870
Standard Deviation	\$ 1,954	95%	\$ 3,819
Median	\$ 700	90%	\$ 2,458
Mode	\$ 289	75%	\$ 1,299
Interquartile Range	\$ 985	50%	\$ 700
		25%	\$ 313

**Table 8f
Medication Support Minutes
Fiscal Year 2011-12**

Statistic	Minutes	Quartile	Minutes
Number of Clients	164,844	100%	54,135
Mean	305	99%	2,400
Standard Deviation	515	95%	1,000
Median	180	90%	634
Mode	60	75%	320
Interquartile Range	230	50%	180
		25%	90

**Table 8g
Historical Trends
Medication Support by Fiscal Year**

<u>Data Type</u>	<u>2009-2010</u>	<u>2010-2011</u>	<u>2011-2012</u>	<u>2012-2013*</u>
Number of Clients	164,805	162,991	164,844	155,529
Number of Minutes	47,157,084	52,815,281	50,254,539	42,815,826
Minutes Per Client	286	324	305	275
Approved Amount	\$ 189,101,130	\$ 187,380,808	\$ 192,553,587	\$ 203,272,083

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Psychiatric Health Facility Services

Psychiatric Health Facility (PHF):

“Psychiatric Health Facility” means a facility licensed under the provisions beginning with Section 77001 of Chapter 9, Division 5, Title 22 of the California Code of Regulations. “Psychiatric Health Facility Services” are therapeutic and/or rehabilitative services provided in a psychiatric health facility on an inpatient basis to beneficiaries who need acute care, which meets the criteria of Section 1820.205 of Chapter 11, Division 1, Title 9 of the California Code of Regulations, and whose physical health needs can be met in an affiliated general acute care hospital or in outpatient settings. These services are separate from those categorized as “Psychiatric Hospital Inpatient”.

Summary:

The forecast for Psychiatric Health Facility (PHF) Services shows an increase in the number of clients and total costs through FY 2014-15.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 14,542,834	2,388
Actual	FY 2009-10	\$ 14,211,935	2,307
Actual	FY 2010-11	\$ 15,450,117	2,418
Actual	FY 2011-12	\$ 17,272,139	2,731
Actual + Forecast	FY 2012-13	\$ 20,091,749	2,380
Actual + Forecast	FY 2013-14	\$ 21,373,830	2,405
Forecast	FY 2014-15	\$ 22,655,914	2,432

Budget Forecast Narrative:

The total annual costs are expected to increase through FY 2014-15.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 9a
ADULTS
Clients Receiving PHF Services by Age Group
Fiscal Year 2011-12
Data as of 06/30/13

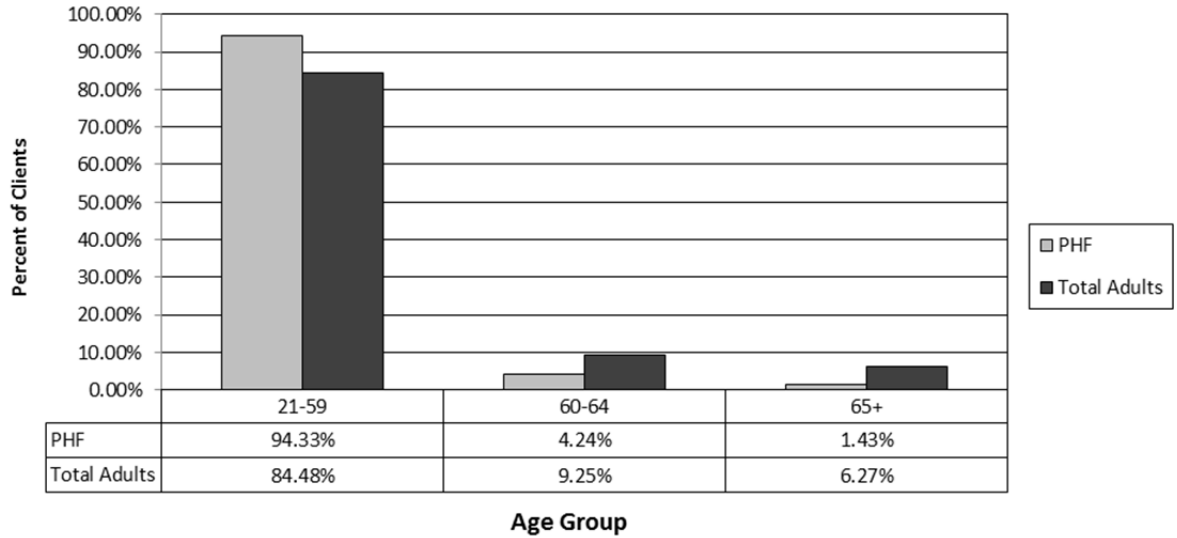


Table 9b
ADULTS
Clients Receiving PHF Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 06/30/13

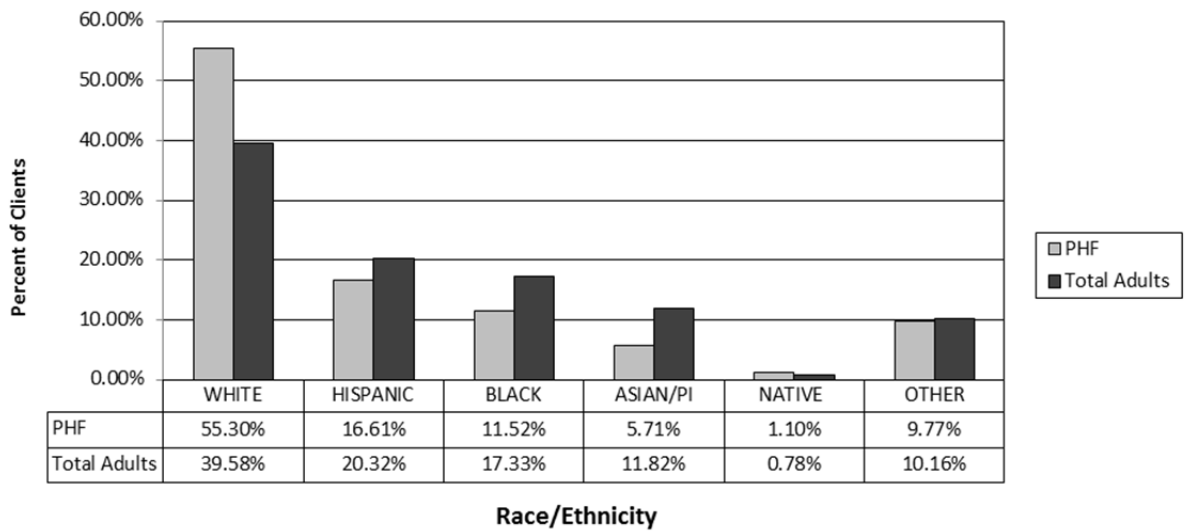


Table 9c
ADULTS
Clients Receiving PHF Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

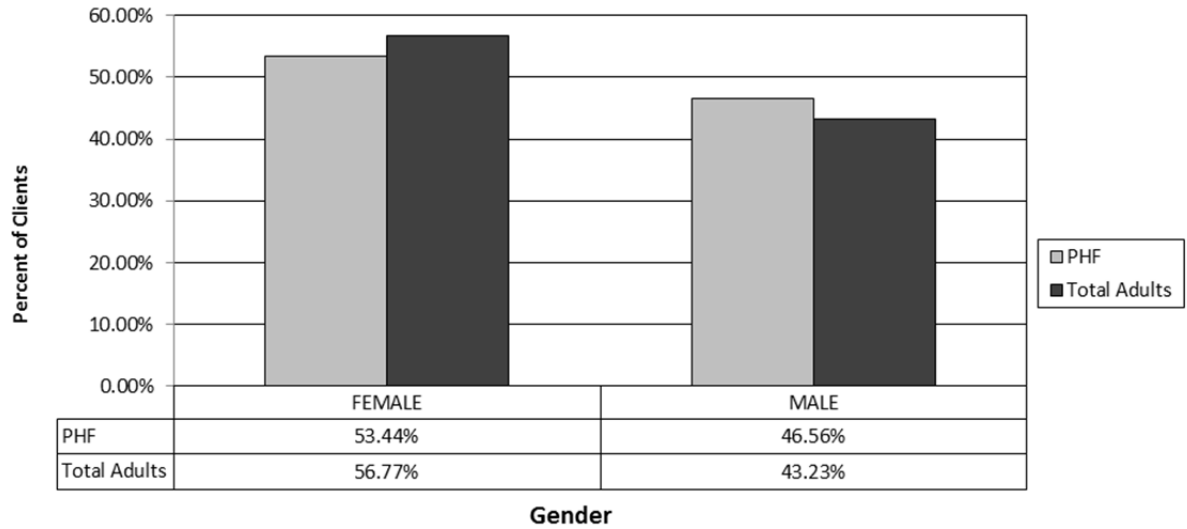


Table 9d
Other Services Received by Adults Receiving Psychiatric Health Facility Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
PHF	2,731	100.00%
MEDICATION SUPPORT	1,742	63.79%
THERAPY AND OTHER SERVICE ACTIVITIES	1,724	63.13%
TARGETED CASE MANAGEMENT	1,709	62.58%
CRISIS INTERVENTION	1,537	56.28%
CRISIS STABILIZATION	1,020	37.35%
ADULT CRISIS RESIDENTIAL	334	12.23%
FFS-HOSPITAL INPATIENT	297	10.88%
HOSPITAL INPATIENT	124	4.54%
ADULT RESIDENTIAL	59	2.16%
DAY TX REHABILITATIVE FULL DAY	12	0.44%

Service Metrics:

**Table 9e
Psychiatric Health Facility Approved Amount
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Amount
Number of Clients	2,731	100%	\$ 109,020
Mean	\$ 6,371	99%	\$ 45,323
Standard Deviation	\$ 9,078	95%	\$ 23,886
Median	\$ 3,062	90%	\$ 16,460
Mode	\$ 1,225	75%	\$ 7,609
Interquartile Range	\$ 6,384	50%	\$ 3,062
		25%	\$ 1,225

**Table 9f
Psychiatric Health Facility Days
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Days
Number of Clients	2,731	100%	178
Mean	11	99%	83
Standard Deviation	16	95%	42
Median	5	90%	28
Mode	2	75%	13
Interquartile Range	11	50%	5
		25%	2

**Table 9g
Historical Trends
Psychiatric Health Facility Services by Fiscal Year**

<u>Data Type</u>	<u>2009-2010</u>	<u>2010-2011</u>	<u>2011-2012</u>	<u>2012-2013*</u>
Number of Clients	2,307	2,418	2,731	2,380
Number of Days	25,668	27,499	29,671	31,855
Days Per Client	11	11	11	13
Approved Amount	\$ 14,211,935	\$ 15,450,117	\$ 17,272,139	\$ 20,091,749

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Psychiatric Inpatient Hospital Services – SD/MC Hospitals

Psychiatric Hospital Inpatient Services – SD/MC Hospitals:

Psychiatric inpatient hospital services include both acute psychiatric inpatient hospital services and administrative day services. Acute psychiatric inpatient hospital services are provided to beneficiaries for whom the level of care provided in a hospital is medically necessary to diagnose or treat a covered mental illness. Administrative day services are inpatient hospital services provided to beneficiaries who were admitted to the hospital for an acute psychiatric inpatient hospital service and the beneficiary's stay at the hospital must be continued beyond the beneficiary's need for acute psychiatric inpatient hospital services due to lack of residential placement options at non-acute residential treatment facilities that meet the needs of the beneficiary.

Psychiatric inpatient hospital services are provided by Short-Doyle / Medi-Cal (SD/MC) hospitals and Fee-for-Service / Medi-Cal (FFS/MC) hospitals. Mental Health Plans (MHPs) claim reimbursement for the cost of psychiatric inpatient hospital services provided by Short-Doyle Medi-Cal hospitals through the Short-Doyle Medi-Cal (SD/MC) claiming system. FFS/MC hospitals claim reimbursement for the cost of psychiatric inpatient hospital services through the FFS/MC Fiscal Intermediary system. MHPs are responsible for authorization of psychiatric inpatient hospital services reimbursed through either billing system. For SD/MC hospitals, the daily rate includes the cost of any needed professional services. The FFS/MC hospital daily rate does not include professional services, which are billed separately from the FFS/MC inpatient hospital services via the SD/MC claiming system.

Summary:

The forecast for Psychiatric Hospital Inpatient Services shows a small decrease in cost and clients through FY 2014-15.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 60,505,545	6,444
Actual	FY 2009-10	\$ 56,084,301	6,359
Actual	FY 2010-11	\$ 55,552,524	6,159
Actual	FY 2011-12	\$ 54,996,395	6,262
Actual + Forecast	FY 2012-13	\$ 58,654,251	5,033
Actual + Forecast	FY 2013-14	\$ 58,593,884	4,823
Forecast	FY 2014-15	\$ 58,533,519	4,613

Budget Forecast Narrative:

Costs for Psychiatric Hospital Inpatient Services for FY 2014-15 are forecasted to be on par with the prior two fiscal years.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 10a
ADULTS
Clients Receiving Hospital Inpatient Services by Age Group
Fiscal Year 2011-12
Data as of 06/30/13

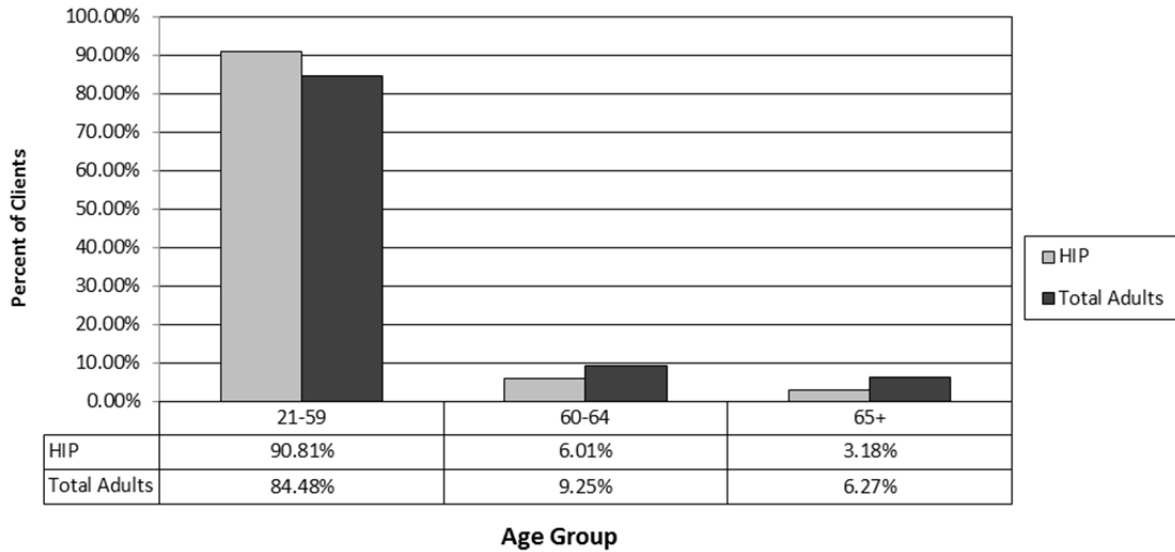


Table 10b
ADULTS
Clients Receiving Hospital Inpatient Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 06/30/13

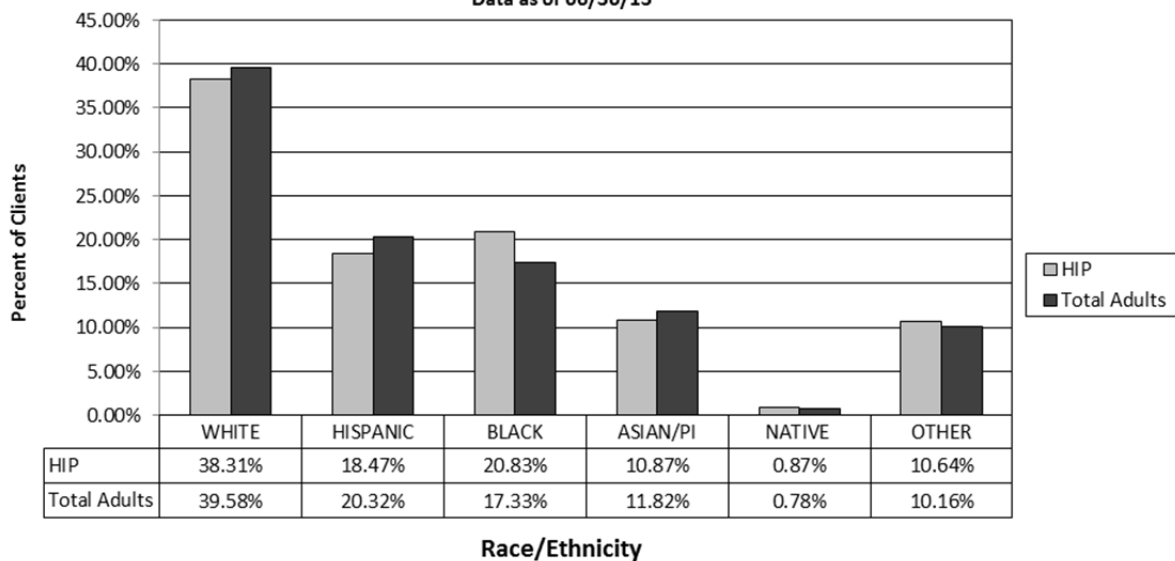


Table 10c
ADULTS
Clients Receiving Hospital Inpatient Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

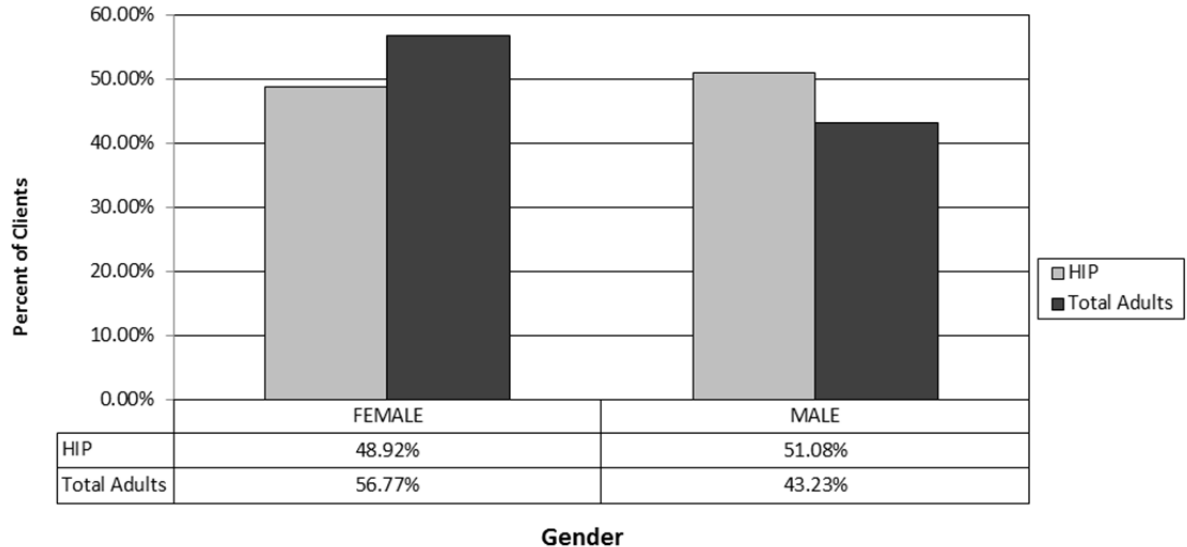


Table 10d
Other Services Received by Adults Receiving Psychiatric Hospital Inpatient Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
HOSPITAL INPATIENT	6,262	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	4,358	69.59%
MEDICATION SUPPORT	4,169	66.58%
CRISIS STABILIZATION	4,114	65.70%
TARGETED CASE MANAGEMENT	3,132	50.02%
CRISIS INTERVENTION	2,909	46.45%
FFS-HOSPITAL INPATIENT	929	14.84%
ADULT CRISIS RESIDENTIAL	614	9.81%
ADULT RESIDENTIAL	161	2.57%
DAY TX REHABILITATIVE FULL DAY	144	2.30%
PHF	124	1.98%
DAY TX REHABILITATIVE HALF DAY	40	0.64%
DAY TX INTENSIVE FULL DAY	1	0.02%

Service Metrics:

**Table 10e
Psychiatric Hospital Inpatient Approved Amount
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Amount
Number of Clients	6,262	100%	\$ 205,291
Mean	\$ 8,880	99%	\$ 65,348
Standard Deviation	\$ 13,176	95%	\$ 32,801
Median	\$ 4,065	90%	\$ 21,848
Mode	\$ 2,428	75%	\$ 9,710
Interquartile Range	\$ 7,285	50%	\$ 4,065
		25%	\$ 2,426

**Table 10f
Psychiatric Hospital Inpatient Days
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Days
Number of Clients	6,262	100%	209
Mean	11	99%	87
Standard Deviation	17	95%	42
Median	5	90%	27
Mode	2	75%	12
Interquartile Range	10	50%	5
		25%	2

**Table 10g
Historical Trends
Psychiatric Hospital Inpatient Services by Fiscal Year**

<u>Data Type</u>	<u>2009-2010</u>	<u>2010-2011</u>	<u>2011-2012</u>	<u>2012-2013*</u>
Number of Clients	6,359	6,159	6,262	5,033
Number of Days	73,819	72,404	68,543	54,820
Days Per Client	12	12	11	11
Approved Amount	\$ 56,084,301	\$ 55,552,524	\$ 54,996,395	\$ 58,654,251

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Targeted Case Management

Targeted Case Management (TCM):

Targeted case management is a service that assists a beneficiary in accessing needed medical, educational, social, prevocational, vocational, rehabilitative, or other community services. The service activities may include, but are not limited to, communication, coordination and referral; monitoring service delivery to ensure beneficiary access to services and the service delivery system; monitoring of the beneficiary's progress, placement services, and plan development. TCM services may be face-to-face or by telephone with the client or significant support persons and may be provided anywhere in the community. Additionally, services may be provided by any person determined by the MHP to be qualified to provide the service, consistent with the scope of practice and state law.

Summary:

The forecast for Targeted Case Management Services shows a slight decrease in cost and a small decrease in clients through FY 2014-15.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 98,727,675	104,990
Actual	FY 2009-10	\$ 90,901,814	101,679
Actual	FY 2010-11	\$ 86,614,748	97,746
Actual	FY 2011-12	\$ 85,010,335	97,578
Actual + Forecast	FY 2012-13	\$ 93,582,818	92,818
Actual + Forecast	FY 2013-14	\$ 93,164,137	90,144
Forecast	FY 2014-15	\$ 92,745,454	87,473

Budget Forecast Narrative:

Costs for Targeted Case Management are forecast to be slightly lower through FY 2014-15.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

Table 11a
ADULTS
Clients Receiving Targeted Case Management Services by Age Group
Fiscal Year 2011-12
Data as of 06/30/13

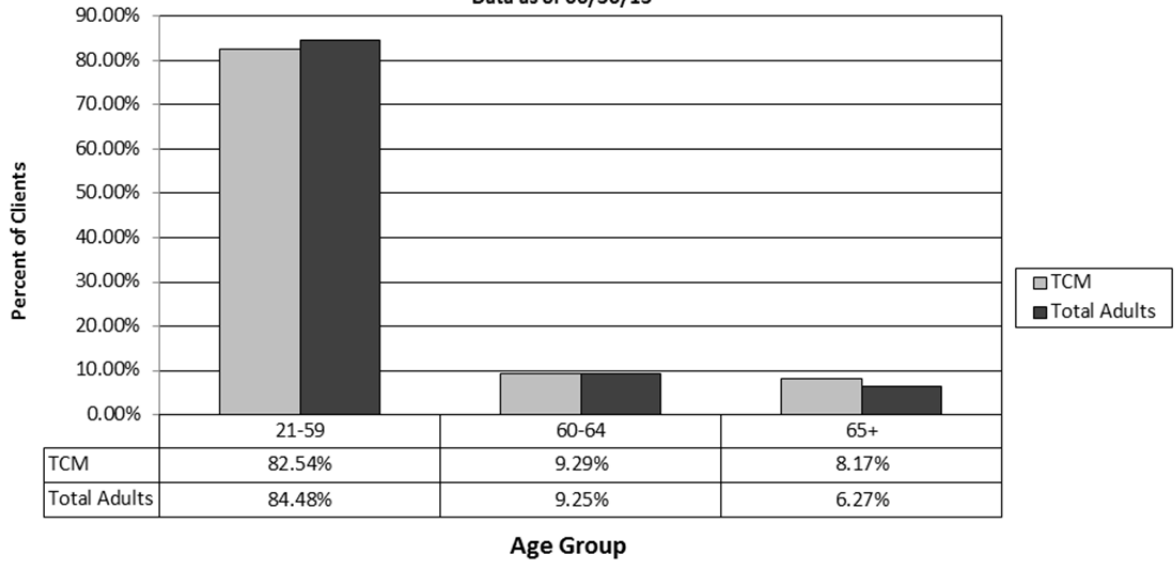


Table 11b
ADULTS
Clients Receiving Targeted Case Management Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 06/30/13

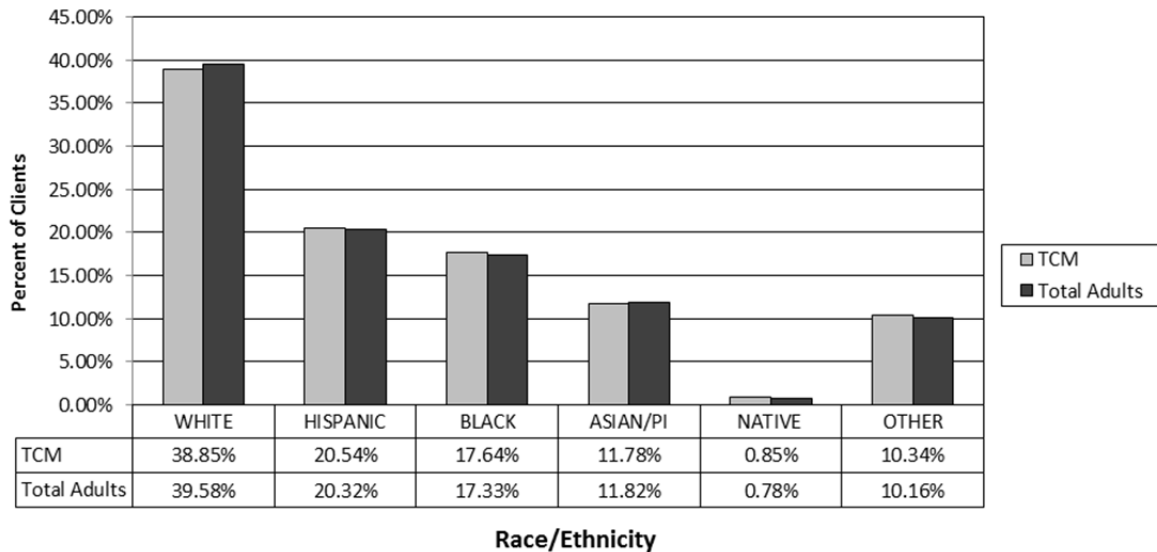


Table 11c
ADULTS
Clients Receiving Targeted Case Management Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

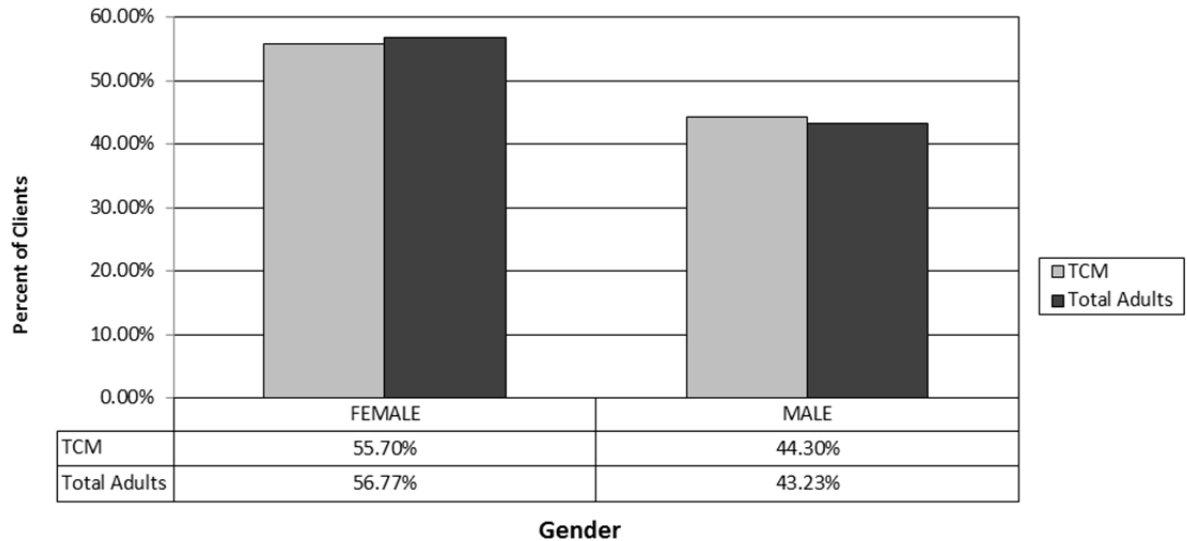


Table 11d
Other Services Received by Adults Receiving Targeted Case Management Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
TARGETED CASE MANAGEMENT	97,578	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	82,246	84.29%
MEDICATION SUPPORT	78,600	80.55%
CRISIS INTERVENTION	17,557	17.99%
CRISIS STABILIZATION	9,428	9.66%
FFS-HOSPITAL INPATIENT	6,304	6.46%
HOSPITAL INPATIENT	3,132	3.21%
ADULT CRISIS RESIDENTIAL	2,693	2.76%
PHF	1,709	1.75%
ADULT RESIDENTIAL	987	1.01%
DAY TX REHABILITATIVE FULL DAY	796	0.82%
DAY TX REHABILITATIVE HALF DAY	140	0.14%
DAY TX INTENSIVE FULL DAY	10	0.01%

Service Metrics:

**Table 11e
Targeted Case Management Approved Amount
Fiscal Year 2011-12**

Statistic	Amount	Quartile	Amount
Number of Clients	97,578	100%	\$ 71,005
Mean	\$ 875	99%	\$ 8,506
Standard Deviation	\$ 1,755	95%	\$ 3,734
Median	\$ 283	90%	\$ 2,236
Mode	\$ 61	75%	\$ 848
Interquartile Range	\$ 742	50%	\$ 283
		25%	\$ 106

**Table 11f
Targeted Case Management Minutes
Fiscal Year 2011-12**

Statistic	Minutes	Quartile	Minutes
Number of Clients	97,578	100%	35,151
Mean	504	99%	5,123
Standard Deviation	1,081	95%	2,145
Median	155	90%	1,271
Mode	30	75%	480
Interquartile Range	422	50%	155
		25%	58

**Table 11g
Historical Trends
Targeted Case Management by Fiscal Year**

Data Type	<u>2009-2010</u>	<u>2010-2011</u>	<u>2011-2012</u>	<u>2012-2013*</u>
Number of Clients	101,679	97,746	97,578	92,818
Number of Minutes	47,370,610	46,051,507	49,212,770	40,578,056
Minutes Per Client	466	471	504	437
Approved Amount	\$ 90,901,814	\$ 86,614,748	\$ 85,010,335	\$ 93,582,818

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Therapy and Other Service Activities

Therapy and Other Service Activities (formerly referred to as Mental Health Services):

Individual or group therapies and interventions are designed to provide a reduction of mental disability and restoration, improvement or maintenance of functioning consistent with the goals of learning, development, independent living, and enhanced self-sufficiency. These services are separate from those provided as components of adult residential services, treatment services, crisis intervention, crisis stabilization, day rehabilitation, or day treatment intensive. Service activities may include, but are not limited to:

1. Assessment - A service activity designed to evaluate the current status of mental, emotional, or behavioral health. Assessment includes, but is not limited to, one or more of the following: mental status determination, analysis of the clinical history, analysis of relevant cultural issues and history; diagnosis; and the use of mental health testing procedures.
2. Plan Development - A service activity that consists of development of client plans, approval of client plans, and/or monitoring and recording of progress.
3. Therapy - A service activity that is a therapeutic intervention that focuses primarily on symptom reduction as a means to reduce functional impairments. Therapy may be delivered to an individual or group and may include family therapy at which the client is present.
4. Rehabilitation - A service activity that includes, but is not limited to, assistance, improving, maintaining or restoring functional skills, daily living skills, social and leisure skills, grooming and personal hygiene skills; obtaining support resources; and/or obtaining medication education.
5. Collateral - A service activity involving a significant support person in the beneficiary's life for the purpose of addressing the mental health needs of the beneficiary in terms of achieving goals of the beneficiary's client plan. Collateral may include, but is not limited to, consultation and training of the significant support person(s) to assist in better utilization of mental health services by the client, consultation and training of the significant support person(s) to assist in better understanding of mental illness, and family counseling with the significant support person(s) in achieving the goals of the client plan. The client may or may not be present for this service activity.

The distribution of use and expenditures of each service activity varies over time with changes in client needs.

Summary:

The forecast for Therapy and Other Service Activities dollars and clients shows growth primarily driven by an increase in the number of clients served beginning in FY 2011-12.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 324,330,747	174,525
Actual	FY 2009-10	\$ 302,814,037	163,667
Actual	FY 2010-11	\$ 308,174,784	162,082
Actual	FY 2011-12	\$ 324,974,797	166,690
Actual + Forecast	FY 2012-13	\$ 353,440,467	166,722
Actual + Forecast	FY 2013-14	\$ 363,442,865	165,698
Forecast	FY 2014-15	\$ 373,445,265	164,673

Budget Forecast Narrative:

Costs for Therapy and Other Service Activities are forecast to increase through FY 2014-15.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The FY 2011-12 client tables and the historical trends tables are based upon claims received as of June 30, 2013.

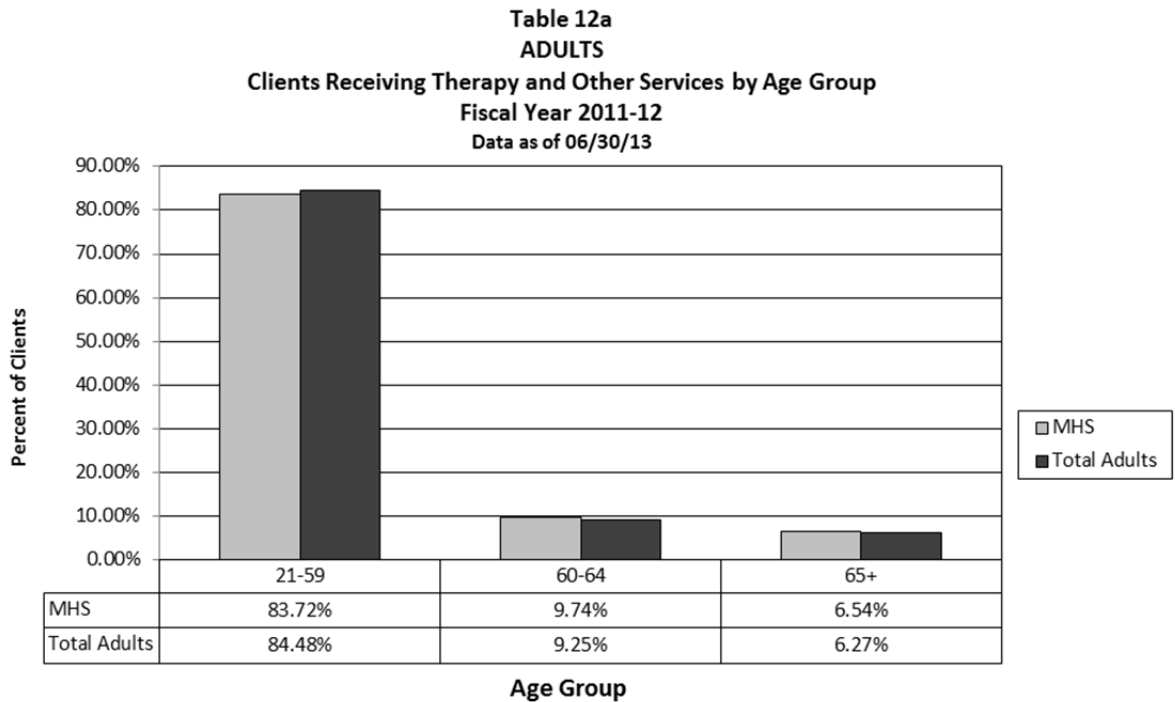


Table 12b
ADULTS
Clients Receiving Therapy and Other Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 06/30/13

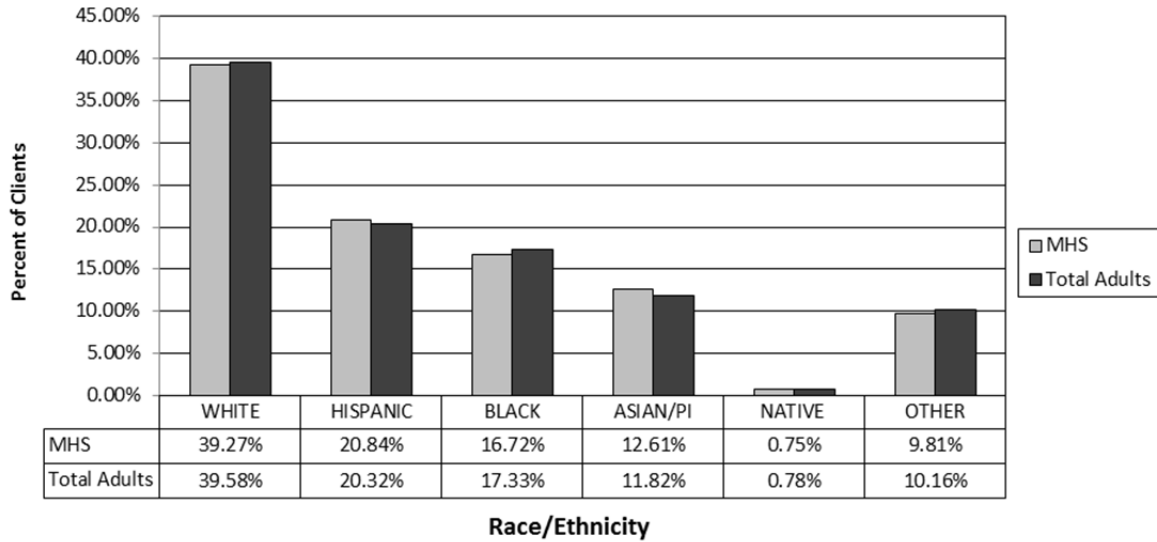


Table 12c
ADULTS
Clients Receiving Therapy and Other Services by Gender
Fiscal Year 2011-12
Data as of 06/30/13

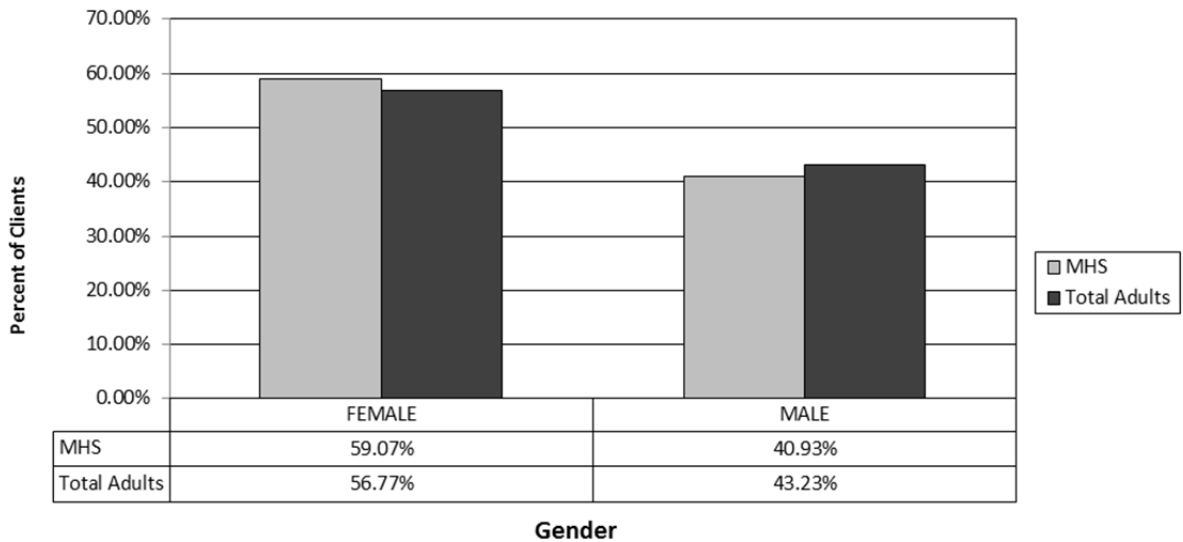


Table 12d
Other Services Received by Adults Receiving Therapy and Other Service Activities
Fiscal Year 2011-12

	Number of Clients	Percent Clients
THERAPY AND OTHER SERVICE ACTIVITIES	166,690	100.00%
MEDICATION SUPPORT	115,577	69.34%
TARGETED CASE MANAGEMENT	82,246	49.34%
CRISIS INTERVENTION	21,266	12.76%
CRISIS STABILIZATION	12,940	7.76%
FFS-HOSPITAL INPATIENT	11,427	6.86%
HOSPITAL INPATIENT	4,358	2.61%
ADULT CRISIS RESIDENTIAL	2,918	1.75%
PHF	1,724	1.03%
ADULT RESIDENTIAL	1,035	0.62%
DAY TX REHABILITATIVE FULL DAY	854	0.51%
DAY TX REHABILITATIVE HALF DAY	189	0.11%
DAY TX INTENSIVE FULL DAY	14	0.01%

Service Metrics:

Table 12e
Therapy and Other Services Approved Amount
Fiscal Year 2011-12

Statistic	Amount	Quartile	Amount
Number of Clients	166,690	100%	\$ 138,887
Mean	\$ 1,965	99%	\$ 18,539
Standard Deviation	\$ 3,827	95%	\$ 8,517
Median	\$ 624	90%	\$ 5,203
Mode	\$ 157	75%	\$ 1,896
Interquartile Range	\$ 1,650	50%	\$ 624
		25%	\$ 245

Table 12f
Therapy and Other Services Minutes
Fiscal Year 2011-12

Statistic	Minutes	Quartile	Minutes
Number of Clients	166,690	100%	60,220
Mean	938	99%	8,221
Standard Deviation	1,748	95%	3,858
Median	328	90%	2,442
Mode	60	75%	1,005
Interquartile Range	880	50%	328
		25%	125

Table 12g
Historical Trends
Therapy and Other Service Activities by Fiscal Year

<u>Data Type</u>	<u>2009-2010</u>	<u>2010-2011</u>	<u>2011-2012</u>	<u>2012-2013*</u>
Number of Clients	163,667	162,082	166,690	166,722
Number of Minutes	150,421,426	165,110,057	156,368,959	138,720,119
Minutes Per Client	919	1019	938	832
Approved Amount	\$ 302,814,037	\$ 308,174,784	\$ 324,974,797	\$ 353,440,467

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through June 30, 2013.

Psychiatric Inpatient Hospital Services – FFS/MC Hospitals

Psychiatric Inpatient Hospital Services – FFS/MC Hospitals:

Psychiatric inpatient hospital services include both acute psychiatric inpatient hospital services and administrative day services. Acute psychiatric inpatient hospital services are provided to beneficiaries for whom the level of care provided in a hospital is medically necessary to diagnose or treat a covered mental illness. Administrative day services are inpatient hospital services provided to beneficiaries who were admitted to the hospital for an acute psychiatric inpatient hospital service and the beneficiary's stay at the hospital must be continued beyond the beneficiary's need for acute psychiatric inpatient hospital services due to lack of residential placement options at non-acute residential treatment facilities that meet the needs of the beneficiary.

Psychiatric inpatient hospital services are provided by Short-Doyle / Medi-Cal (SD/MC) hospitals and Fee-for-Service / Medi-Cal (FFS/MC) hospitals. Mental Health Plans (MHPs) claim reimbursement for the cost of psychiatric inpatient hospital services provided by Short-Doyle Medi-Cal hospitals through the Short-Doyle Medi-Cal (SD/MC) claiming system. FFS/MC hospitals claim reimbursement for the cost of psychiatric inpatient hospital services through the FFS/MC Fiscal Intermediary system. MHPs are responsible for authorization of psychiatric inpatient hospital services reimbursed through either billing system. For SD/MC hospitals, the daily rate includes the cost of any needed professional services. The FFS/MC hospital daily rate does not include professional services, which are billed separately from the FFS/MC inpatient hospital services via the SD/MC claiming system.

Summary:

The forecast for Psychiatric Inpatient Hospital Services provided by FFS/MC hospitals shows growth in costs through FY 2014-15.

<u>Data Composition</u>	<u>Fiscal Year</u>	<u>Dollars</u>	<u>Clients</u>
Actual	FY 2008-09	\$ 110,926,714	14,360
Actual	FY 2009-10	\$ 111,839,820	14,537
Actual	FY 2010-11	\$ 120,501,219	14,864
Actual	FY 2011-12	\$ 129,312,474	14,298
Actual + Forecast	FY 2012-13	\$ 140,155,361	14,967
Actual + Forecast	FY 2013-14	\$ 146,862,845	14,787
Forecast	FY 2014-15	\$ 153,570,329	14,607

Budget Forecast Narrative:

Costs for FFS Psychiatric Hospital Inpatient Services by FFS/MC hospitals are forecast to increase through FY 2014-15.

Client Profile Data:

Client data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of August 23, 2013.

Table 13a
ADULTS
Clients Receiving Fee For Service Hospital Inpatient Services by Age Group
Fiscal Year 2011-12
Data as of 08/23/13

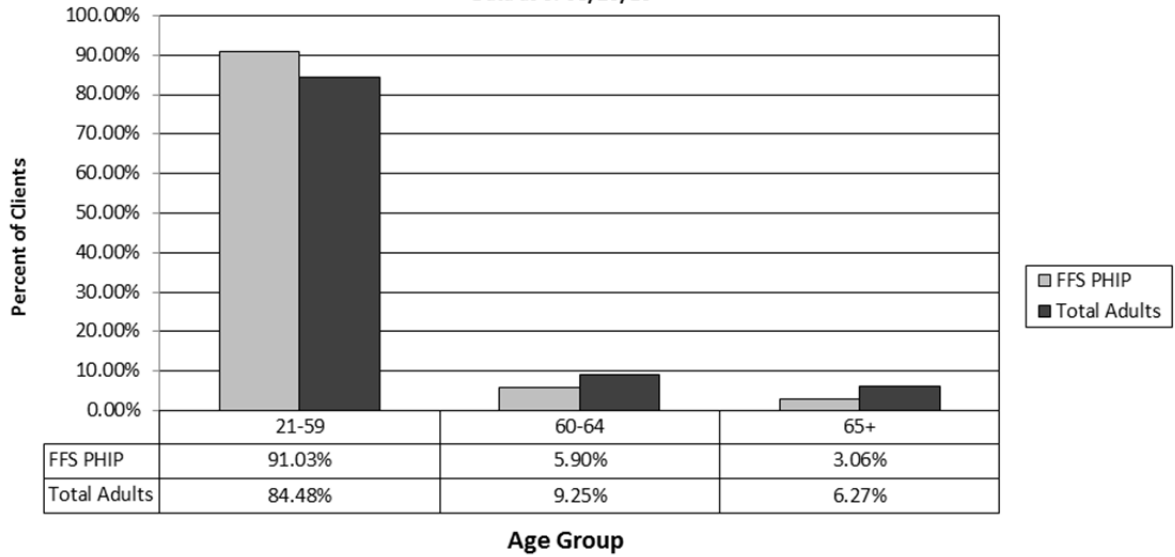


Table 13b
ADULTS
Clients Receiving Fee For Service Psychiatric Hospital Inpatient Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 08/23/13

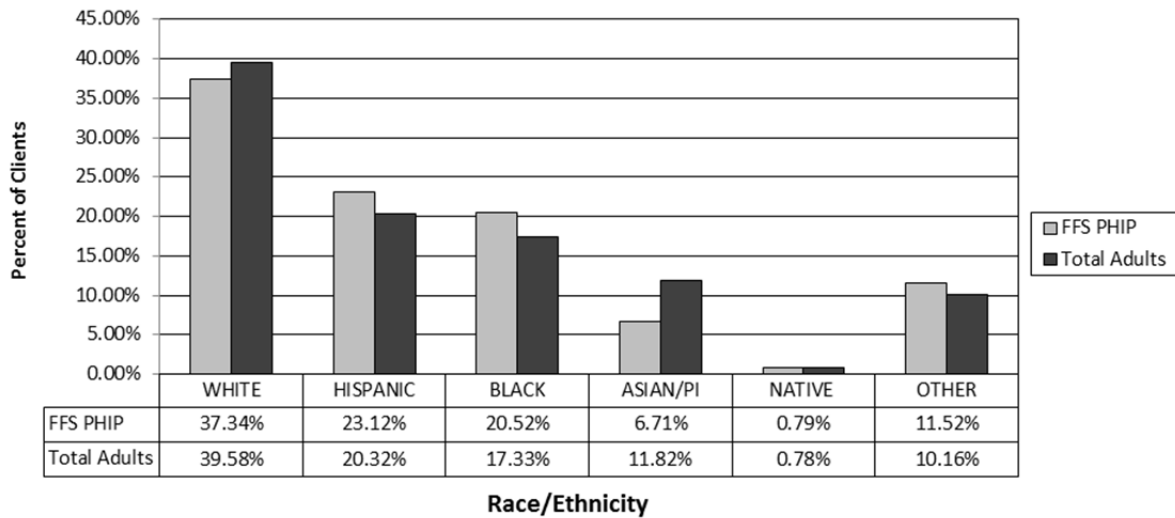


Table 13c
ADULTS
Clients Receiving Fee For Service Hospital Inpatient Services by Gender
Fiscal Year 2011-12
Data as of 08/23/13

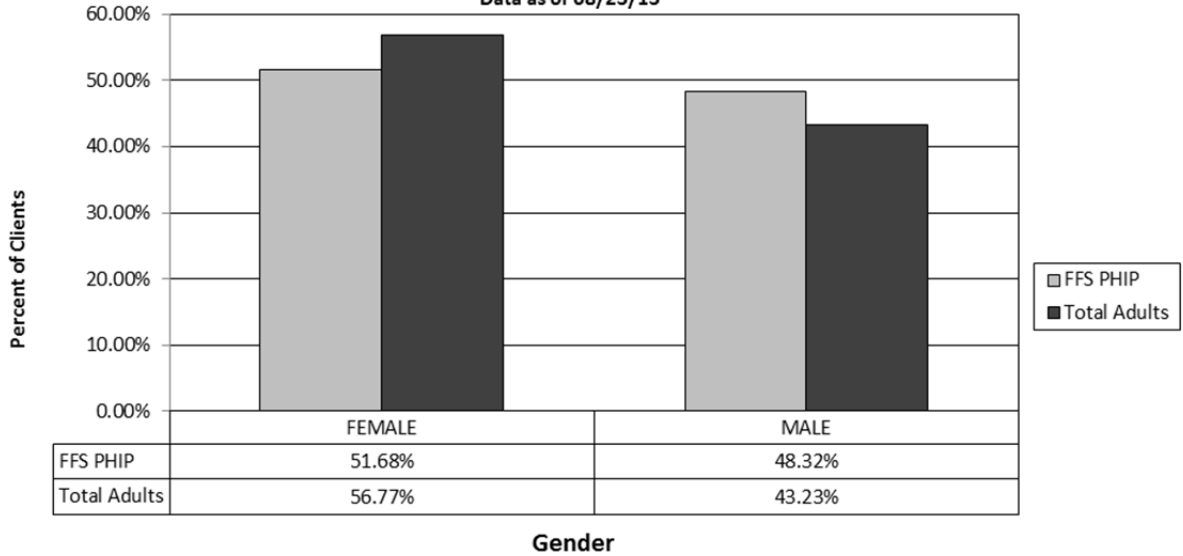


Table 13d
Other Services Received by Adults Receiving Fee for Service Psychiatric Inpatient Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
FFS-HOSPITAL INPATIENT	14,298	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	11,427	79.92%
MEDICATION SUPPORT	9,792	68.49%
TARGETED CASE MANAGEMENT	6,304	44.09%
CRISIS INTERVENTION	5,749	40.21%
CRISIS STABILIZATION	4,351	30.43%
ADULT CRISIS RESIDENTIAL	957	6.69%
HOSPITAL INPATIENT	929	6.50%
PHF	297	2.08%
ADULT RESIDENTIAL	151	1.06%
DAY TX REHABILITATIVE FULL DAY	76	0.53%
DAY TX REHABILITATIVE HALF DAY	17	0.12%
DAY TX INTENSIVE FULL DAY	2	0.01%

Service Metrics:

Table 13e
Fee for Service Psychiatric Inpatient Approved Amount
Fiscal Year 2011-12

Statistic	Amount	Quartile	Amount
Number of Clients	14,298	100%	\$ 315,512
Mean	\$ 9,208	99%	\$ 80,457
Standard Deviation	\$ 15,416	95%	\$ 34,518
Median	\$ 4,060	90%	\$ 21,386
Mode	\$ 1,569	75%	\$ 9,581
Interquartile Range	\$ 7,489	50%	\$ 4,060
		25%	\$ 2,092

Table 13f
Fee for Service Psychiatric Inpatient Services Days
Fiscal Year 2011-12

Statistic	Days	Quartile	Days
Number of Clients	14,298	100%	560
Mean	14	99%	133
Standard Deviation	26	95%	55
Median	6	90%	34
Mode	3	75%	15
Interquartile Range	12	50%	6
		25%	3

Table 13g
Historical Trends
Fee for Service Psychiatric Inpatient Services by Fiscal Year

<u>Data Type</u>	<u>2009-2010</u>	<u>2010-2011</u>	<u>2011-2012</u>	<u>2012-2013</u>
Number of Clients	14,537	14,864	14,298	14,967
Number of Days	194,469	200,741	207,266	214,045
Days Per Client	13	14	14	14
Approved Amount	\$ 111,839,820	\$ 120,501,219	\$ 129,312,474	\$ 140,155,361

*FY 2012-13 year numbers are forecasted using actual claims and weighted claim estimates. Actual claims data is through August 23, 2013.