# Performance Outcomes System Children in Foster Care County Report Report run on August 9, 2017

#### Background

Two reports will be created during each new reporting period. The reports that will be produced are as follows: statewide aggregate data and population-based county groups.

These reports help meet the intent of the Legislature, as stated in Welfare and Institutions Code Section 14707.5, to develop a performance outcomes system for Early and Periodic

Screening, Diagnosis, and Treatment (EPSDT) mental health services that will improve outcomes at the individual, program, and system levels and inform fiscal decision-making related to the purchase of services. This reporting effort is part of the implementation of a performance outcomes system for Medi- Cal Specialty Mental Health Services (SMHS) for children and youth.

Since 2012 DHCS has worked with several groups of stakeholders to create a structure for reporting, to develop the Performance Measurement Paradigm, and to develop indicators and measures. The Performance Outcomes System will be used to evaluate the domains of access, engagement, service appropriateness to need, service effectiveness, linkages, cost effectiveness and satisfaction. Further information on the Performance Measures System implementation is available on the DHCS website. Documents posted include the relevant legislation, plans submitted to the Legislature, and handouts for meetings with the Stakeholder Advisory Committee back to the first meeting in 2012. To obtain this information go to: http://www.dhcs.ca.gov/provgovpart/pos/Pages/default.aspx

#### Purpose and Overview

This county aggregate report provides updated information on the initial indicators that were developed for the Performance Outcomes System. DHCS plans to move to annual reporting of this data for the Performance Outcomes System.

The first series of charts and tables focus on the demographics of Foster Care case children and youth under 21 who are receiving SMHS' based on approved claims for Medi-Cal eligible beneficiaries. Specifically, this includes demographics tables of this population by age, gender, and race/ethnicity. Two types of penetration information are provided. Both penetration rates tables are also broken out by demographic characteristics. Utilization of services data are shown in terms of dollars, as well as by service, in time increments. The snapshot table provides a point-in-time view of children/youth arriving, exiting, and continuing services over a two-year period. The time to step down table provides a view over the past four years of the time to step-down services following inpatient discharge.

Where possible, the reports provide trend information by displaying information for four Fiscal Years (FY). A FY is from July 1st to June 30th. For all of the measures and indicators included in this report, the denominator is the "Unique Count of Children and Youth receiving SMHS" shown on page 3 of the report and is broken out by state FY.

Utilization of services reports are shown in terms of dollars, as well as by service in time increments. The snapshot report provides a point-in-time view of children arriving, exiting, and continuing services over a two-year period. The final report provides a view over the past four years of the time to step-down services (i.e., time to next contact after an inpatient discharge). Note: The time to step-down report has a change in methodology from the first report produced in February 2015. In the initial report only outpatient services provided at least one day after the inpatient discharge were included in the calculations. On subsequent reports any outpatient service that occurs on or after the inpatient discharge is included in the analysis.

#### Definitions

Population: Foster Care beneficiaries with approved services adjudicated through the Short Doyle/Medi-Cal II claiming system that were:

Age 20 or younger during the approved date of service on the claim.

#### **Data Sources:**

- Short-Doyle/Medi-Cal II (SD/MC II) claims with dates of service in FY 12/13 through FY 15/16.
- Medi-Cal Eligibility Data System (MEDS) data from the Management Information System/Decision Support System (MIS/DSS) FY 12/13 through FY15/16.
- Child Welfare Services/Case Management System (CWS/CMS) data for children in FY 12/13 through FY 15/16.

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#### Additional Information

The **Measures Catalog** is the companion document for these reports and provides the methodology and definitions for the measures. Each measure is defined and the numerator and denominator used to develop the metrics are provided with relevant notes and additional references. The Measures Catalog may be found at: <a href="http://www.dhcs.ca.gov/provgovpart/pos/Pages/Performance-Outcomes-System-Reports-and-Measures-Catalog.aspx">http://www.dhcs.ca.gov/provgovpart/pos/Pages/Performance-Outcomes-System-Reports-and-Measures-Catalog.aspx</a>

#### Note on Privacy:

The Health Insurance Portability and Accountability Act (HIPAA) and Code of Federal Regulations (CFR) 42 rules protect most individually identifiable health information in any form or medium, whether electronic, on paper, or oral. DHCS has strict rules in place to protect the identification of individuals in public reports. A "Public Aggregate Reporting – DHCS Business Reports" process has been established to maintain confidentiality of client Personal Information. The Performance Outcomes System complies with Federal and State privacy laws. Thus, the POS must appropriately and accurately de-identify data for public reporting. Due to privacy concerns, some cells in this report may have been suppressed to comply with state and federal rules. When necessary, this data is represented as follows: 1) Data that is missing is indicated as "-".

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

\*The penetration rates reported here were calculated using a different methodology than that used by the External Quality Review Organization (EQRO). The differences in methodology make comparison between the POS penetration rates and the EQRO penetration rates not appropriate or useful. The POS methodology for calculating penetration rates was selected because it is easier to compute, more straightforward to interpret, and is in use by other states and counties. For the POS, the penetration rate is calculated by taking the total number of youth who received X number of SMHS (1 or 5 for POS) in a FY and dividing that by the total number of Medi-Cal eligible youth for that FY. This methodology results in lower penetration rates as compared to the EQRO rates, but it does so across the board so that all counties and the state will be similarly impacted.

\*The snapshot report provides a point-in-time look at children and youth's movement through the SMHS system. The report uses five general categories to classify if a youth is entering, exiting, continuing services, or a combination of these categories (e.g., arriving and exiting). Eventually the snapshot data will be used along with measures of service effectiveness to identify whether youth are improving as a result of receiving services from the time they first arrived in the system to when they exit the system. This methodology was adapted from the California Mental Health and Substance Use System Needs Assessment (2012). More information on the original methodology can be found here:

http://www.dhcs.ca.gov/provgovpart/pos/Pages/Performance-Outcomes-System-Reports-and-Measures-Catalog.aspx

\*The psychiatric emergency services/hospital data reported on in the time to step-down services report includes data from Short Doyle/Medi-Cal II claims data and fee-for-service data. In the future this re port will incorporate other outpatient and inpatient Medi-Cal SMHS' billed through the Managed Care healthcare delivery systems. Currently, the number of days is capped at 365 days (to mitigate the impact of extreme statistical anomalies) when calculating the mean and max for time between discharge and step down service. This methodology will be updated in the next reporting cycle. Additionally, county specific and population-based reports are based off of the county of the hospital the patient is discharged from and whom has been attributed the time to next service in days used in the calculations for this indicator.

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

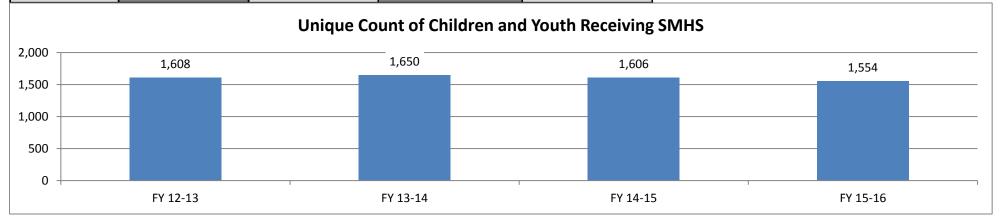
\*Open Child Welfare: Children/youth who are provided child welfare services either while living in their home, or while living out-of-home in a foster care setting. Excludes children: placed in California under the jurisdiction of another state (incoming interstate Compact on the Placement of Children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

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

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

# Demographics Report: Unique Count of Children and Youth in Foster Care Receiving SMHS by Fiscal Year Alameda County as of August 9, 2017

SFY	Unique Count Receiving SMHS*	Year-Over-Year Percentage Change	Unique Count of Foster Care Youth in Medi-Cal	Year-Over-Year Percentage Change
FY 12-13	1,608		2,407	
FY 13-14	1,650	2.6%	2,488	3.4%
FY 14-15	1,606	-2.7%	2,455	-1.3%
FY 15-16	1,554	-3.2%	2,332	-5.0%
Compound Annual Growth Rate SFY**		-1.1%		-1.0%

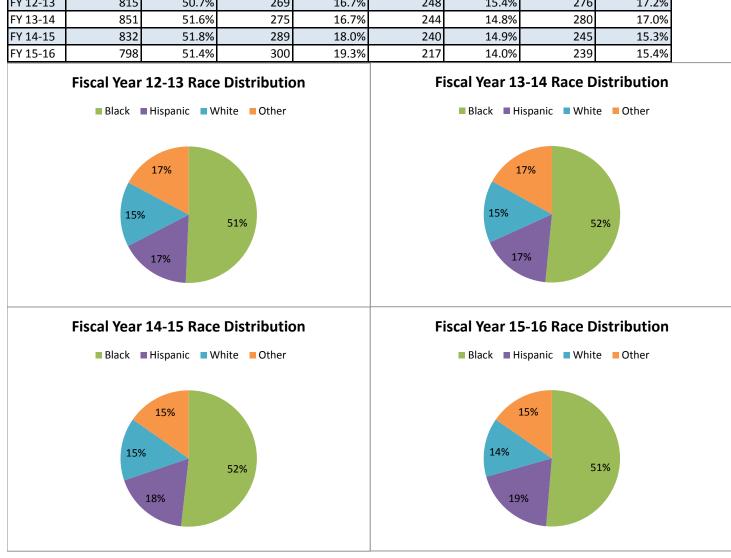


<sup>\*</sup>SMHS = Specialty Mental Health Services. See Measures Catalog for more detailed information.

<sup>\*\*</sup>SFY = State Fiscal Year which is July 1 through June 30.

### Demographics Report: Unique Count of Children and Youth in Foster Care Receiving SMHS by Fiscal Year Alameda County as of August 9, 2017

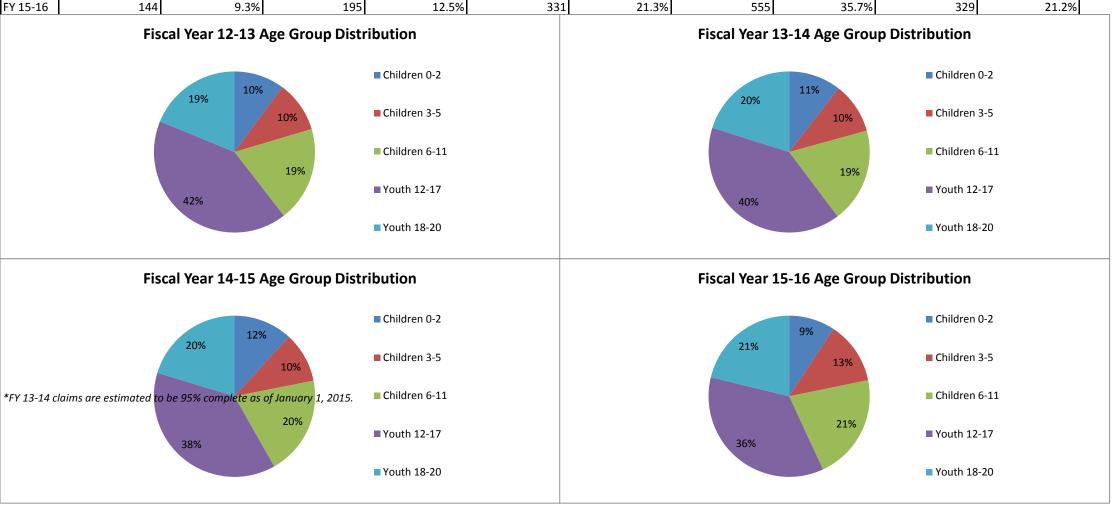
Fiscal Year	Black Count	Black %	Hispanic Count	Hispanic %	White Count	White %	Other Count	Other %
FY 12-13	815	50.7%	269	16.7%	248	15.4%	276	17.2%
FY 13-14	851	51.6%	275	16.7%	244	14.8%	280	17.0%
FY 14-15	832	51.8%	289	18.0%	240	14.9%	245	15.3%
FY 15-16	798	51.4%	300	19.3%	217	14.0%	239	15.4%



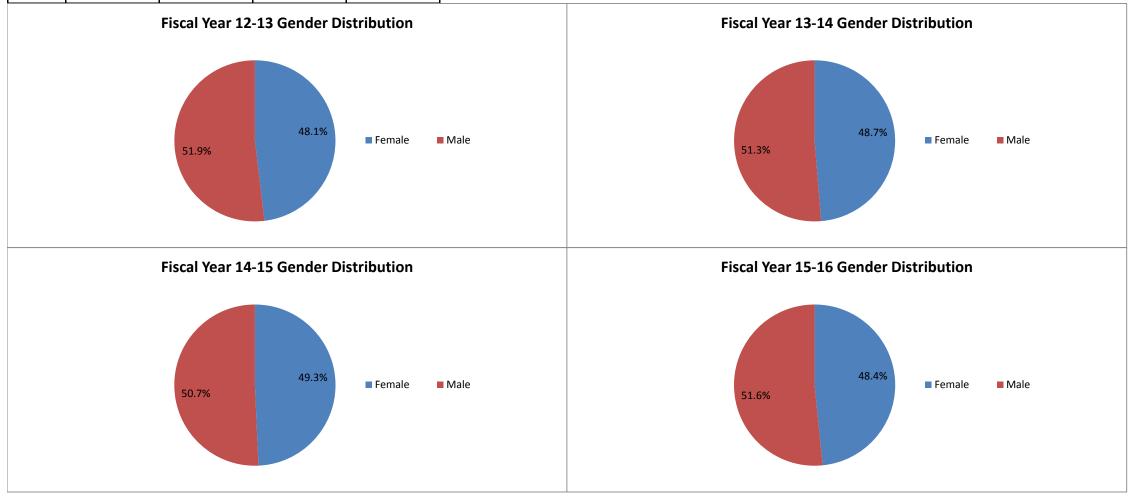
Please note: This report uses the Medi-Cal Eligibility Data System to obtain race/ethnicity data. CDSS uses Child Welfare Services/Case Management System to obtain race/ethnicity data. For more information, please refer to the Measures Catalog.

### Demographics Report: Unique Count of Children and Youth in Foster Care Receiving SMHS by Fiscal Year Alameda County as of August 9, 2017

Fiscal Year	Children 0-2 Count	Children 0-2 %	Children 3-5 Count	Children 3-5 %	Children 6-11 Count	Children 6-11 %	Youth 12-17 Count	Youth 12-17 %	Youth 18-20 Count	Youth 18-20 %
FY 12-13	162	10.1%	165	10.3%	307	19.1%	671	41.7%	303	18.8%
FY 13-14	174	10.5%	169	10.2%	313	19.0%	662	40.1%	332	20.1%
FY 14-15	190	11.8%	162	10.1%	320	19.9%	608	37.9%	326	20.3%
FY 15-16	144	9.3%	195	12.5%	331	21.3%	555	35.7%	329	21.2%

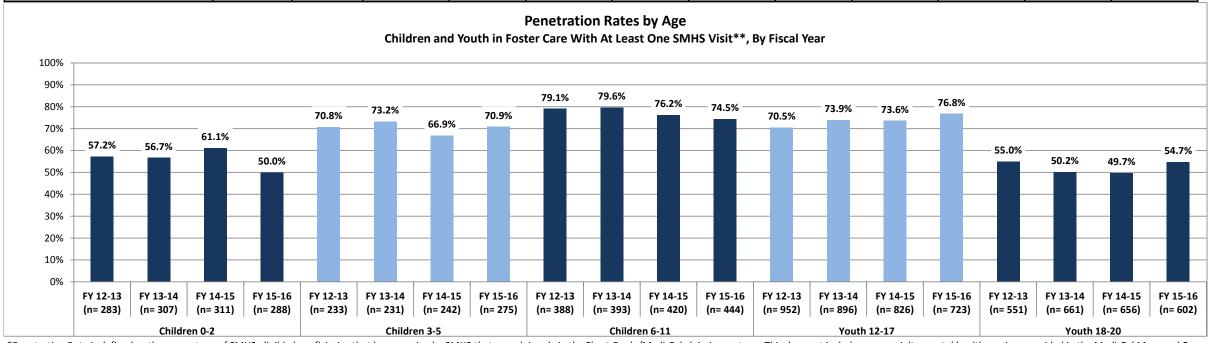


Fiscal Year	Female Count	Female %	Male Count	Male %
FY 12-13	774	48.1%	834	51.9%
FY 13-14	803	48.7%	847	51.3%
FY 14-15	792	49.3%	814	50.7%
FY 15-16	752	48.4%	802	51.6%



### Penetration Rates\* Report: Children and Youth in Foster Care with At Least One SMHS Visit\*\* Alameda County as of August 9, 2017

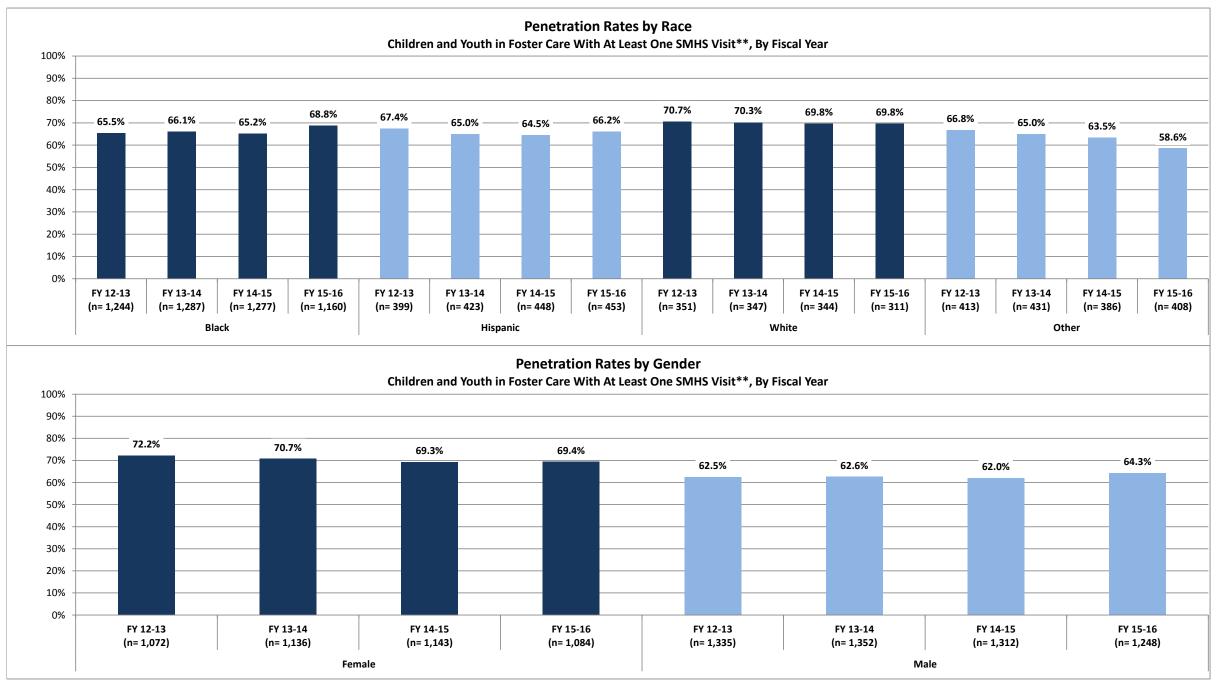
		FY 12-13			FY 13-14			FY 14-15		FY 15-16			
	Children and Youth in Foster Care with 1 or more SMHS Visits	Certified Eligible Children and Youth in Foster Care	Penetration Rate	Children and Youth in Foster Care with 1 or more SMHS Visits	Certified Eligible Children and Youth in Foster Care	Penetration Rate	Children and Youth in Foster Care with 1 or more SMHS Visits	Certified Eligible Children and Youth in Foster Care	Penetration Rate	Children and Youth in Foster Care with 1 or more SMHS Visits	Certified Eligible Children and Youth in Foster Care	Penetration Rate	
All	1,608	2,407	66.8%	1,650	2,488	66.3%	1,606	2,455	65.4%	1,554	2,332	66.6%	
Children 0-2	162	283	57.2%	174	307	56.7%	190	311	61.1%	144	288	50.0%	
Children 3-5	165	233	70.8%	169	231	73.2%	162	242	66.9%	195	275	70.9%	
Children 6-11	307	388	79.1%	313	393	79.6%	320	420	76.2%	331	444	74.5%	
Youth 12-17	671	952	70.5%	662	896	73.9%	608	826	73.6%	555	723	76.8%	
Youth 18-20	303	551	55.0%	332	661	50.2%	326	656	49.7%	329	602	54.7%	
Black	815	1,244	65.5%	851	1,287	66.1%	832	1,277	65.2%	798	1,160	68.8%	
Hispanic	269	399	67.4%	275	423	65.0%	289	448	64.5%	300	453	66.2%	
White	248	351	70.7%	244	347	70.3%	240	344	69.8%	217	311	69.8%	
Other	276	413	66.8%	280	431	65.0%	245	386	63.5%	239	408	58.6%	
Female	774	1,072	72.2%	803	1,136	70.7%	792	1,143	69.3%	752	1,084	69.4%	
Male	834	1,335	62.5%	847	1,352	62.6%	814	1,312	62.0%	802	1,248	64.3%	



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

<sup>\*\*</sup>Children and Youth in Foster Care that have received at least one SMHS in the Fiscal Year.

### Penetration Rates\* Report: Children and Youth in Foster Care with At Least One SMHS Visit\*\* Alameda County as of August 9, 2017

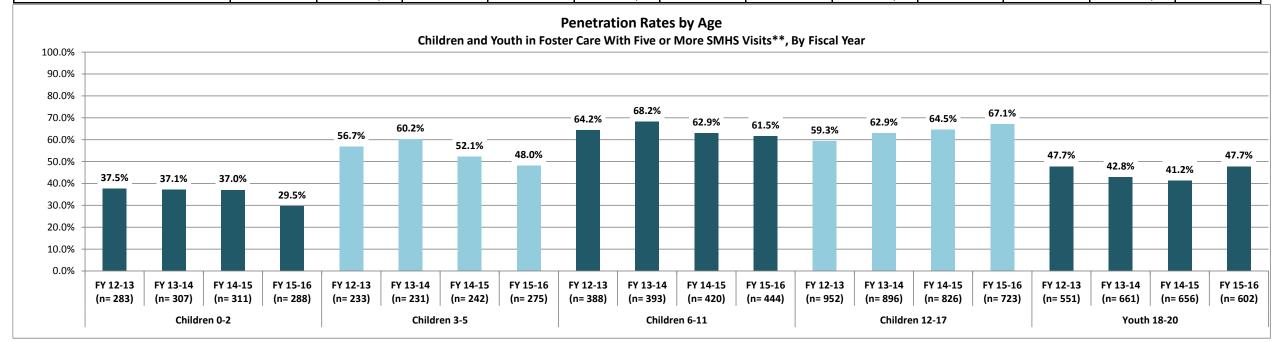


<sup>\*</sup>Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in the Medi-Cal Managed Care sy.

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

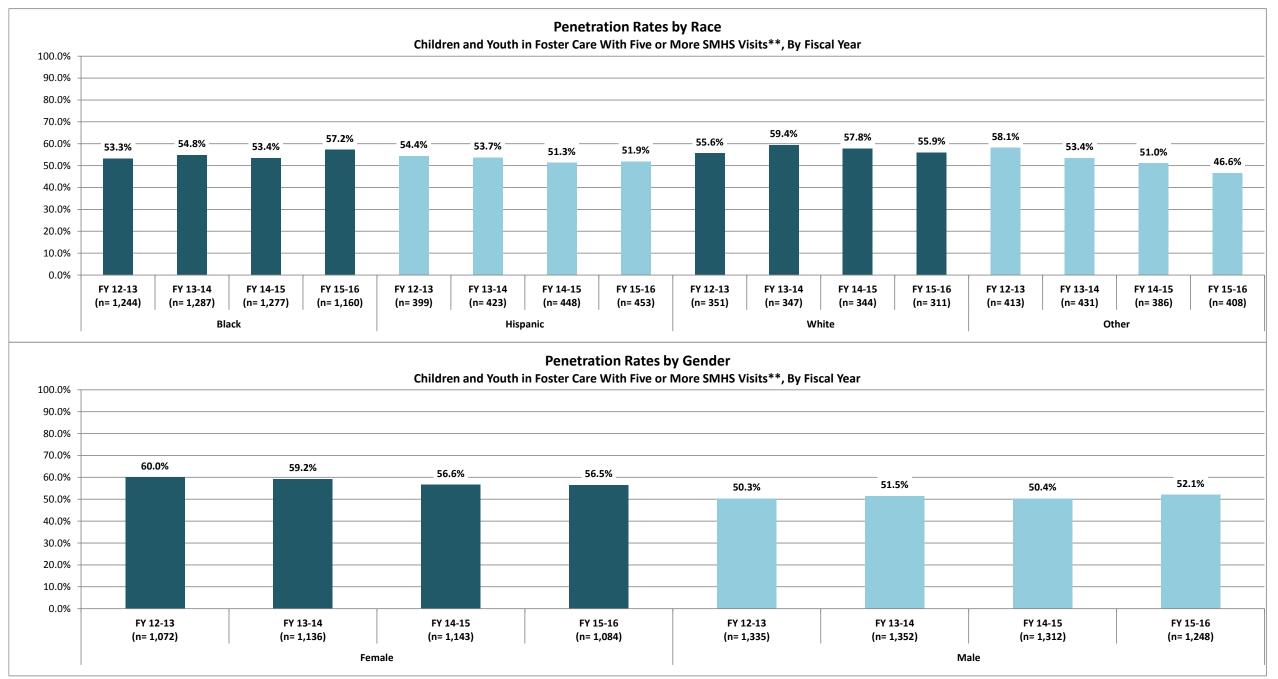
### \* Report: Children and Youth in Foster Care with Five or More SMHS Visits\*\* Alameda County as of August 9, 2017

		FY 12-13			FY 13-14			FY 14-15			FY 15-16	
	Children and Youth in Foster Care with 5 or more SMHS Visits	Certified Eligible Children and Youth in Foster Care	Penetration Rate	Children and Youth in Foster Care with 5 or more SMHS Visits	Certified Eligible Children and Youth in Foster Care	Penetration Rate	Children and Youth in Foster Care with 5 or more SMHS Visits	Certified Eligible Children and Youth in Foster Care	Penetration Rate	Children and Youth in Foster Care with 5 or more SMHS Visits	Certified Eligible Children and Youth in Foster Care	Penetration Rate
All	1,315	2,407	54.6%	1,368	2,488	55.0%	1,308	2,455	53.3%	1,262	2,332	54.1%
Children 0-2	106	283	37.5%	114	307	37.1%	115	311	37.0%	85	288	29.5%
Children 3-5	132	233	56.7%	139	231	60.2%	126	242	52.1%	132	275	48.0%
Children 6-11	249	388	64.2%	268	393	68.2%	264	420	62.9%	273	444	61.5%
Children 12-17	565	952	59.3%	564	896	62.9%	533	826	64.5%	485	723	67.1%
Youth 18-20	263	551	47.7%	283	661	42.8%	270	656	41.2%	287	602	47.7%
Black	663	1,244	53.3%	705	1,287	54.8%	682	1,277	53.4%	663	1,160	57.2%
Hispanic	217	399	54.4%	227	423	53.7%	230	448	51.3%	235	453	51.9%
White	195	351	55.6%	206	347	59.4%	199	344	57.8%	174	311	55.9%
Other	240	413	58.1%	230	431	53.4%	197	386	51.0%	190	408	46.6%
Female	643	1,072	60.0%	672	1,136	59.2%	647	1,143	56.6%	612	1,084	56.5%
Male	672	1,335	50.3%	696	1,352	51.5%	661	1,312	50.4%	650	1,248	52.1%



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

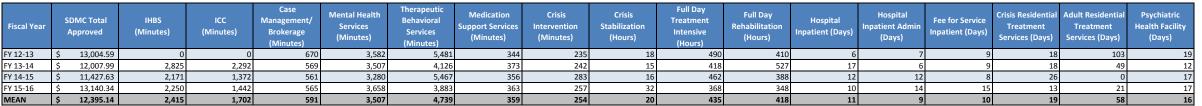
### \* Report: Children and Youth in Foster Care with Five or More SMHS Visits\*\* Alameda County as of August 9, 2017

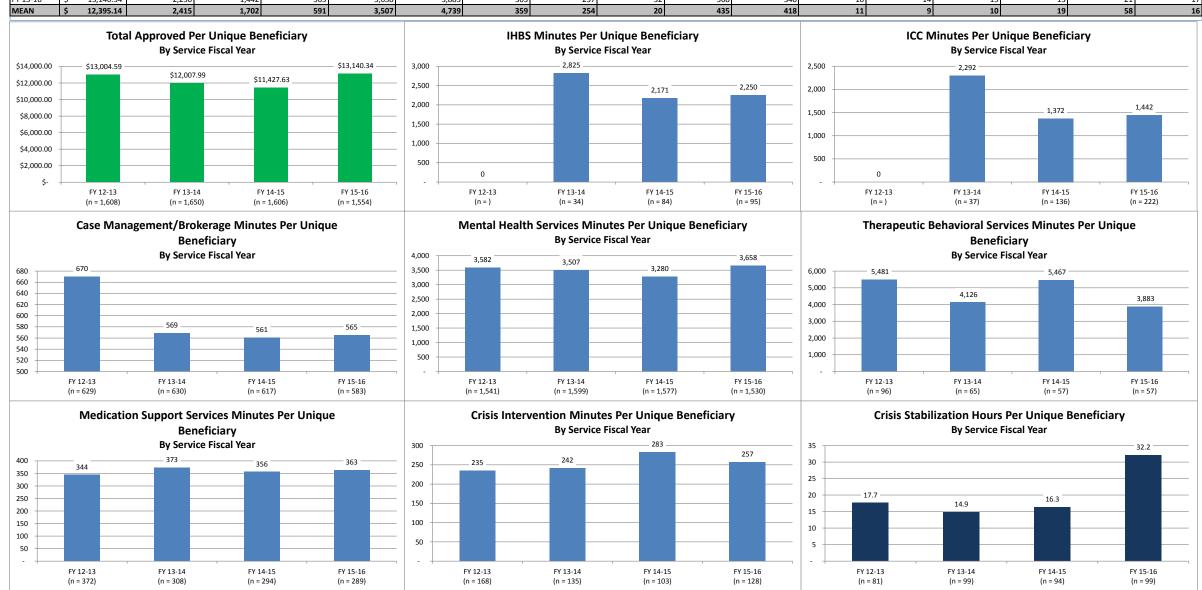


<sup>\*</sup>Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in Medi-Cal Managed Care system.

<sup>\*\*</sup>Children and Youth in Foster Care that have received at least five SMHS in the Fiscal Year.

# Utilization Report\*: Approved Specialty Mental Health Services for Children/Youth in Foster Care Mean Expenditures and Mean Service Quantity per Beneficiary by Fiscal Year Alameda County as of August 9, 2017





<sup>\*</sup>The graphs are color coded so that those reported in the same unit of analysis (e.g., minutes) are colored similarly

Please note that (n) values listed at the bottom of each bar graph represent the actual number of children/youth that received the SMHS represented in their respective graph by Fiscal Year.

# Utilization Report\*: Approved Specialty Mental Health Services for Children/Youth in Foster Care Mean Expenditures and Mean Service Quantity per Beneficiary by Fiscal Year Alameda County as of August 9, 2017



<sup>\*</sup>The graphs are color coded so that those reported in the same unit of analysis (e.g., minutes) are colored similarly.

FY 13-14

(n = ^)

Please note that (n) values listed at the bottom of each bar graph represent the actual number of children/youth that received the SMHS represented in their respective graph by Fiscal Year.

FY 15-16

(n = ^)

FY 12-13

(n = 29)

FY 13-14

(n = 31)

FY 14-15

(n = )

FY 12-13

(n = ^)

FY 15-16

(n = 33)

FY 14-15

(n = 26)

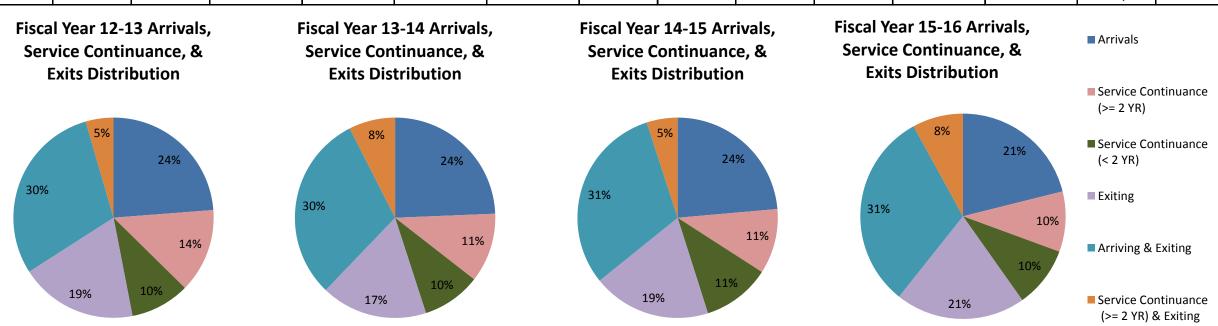
<sup>^</sup> Data has been suppressed to protect patient privacy.

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

Alameda County as of August 9, 2017

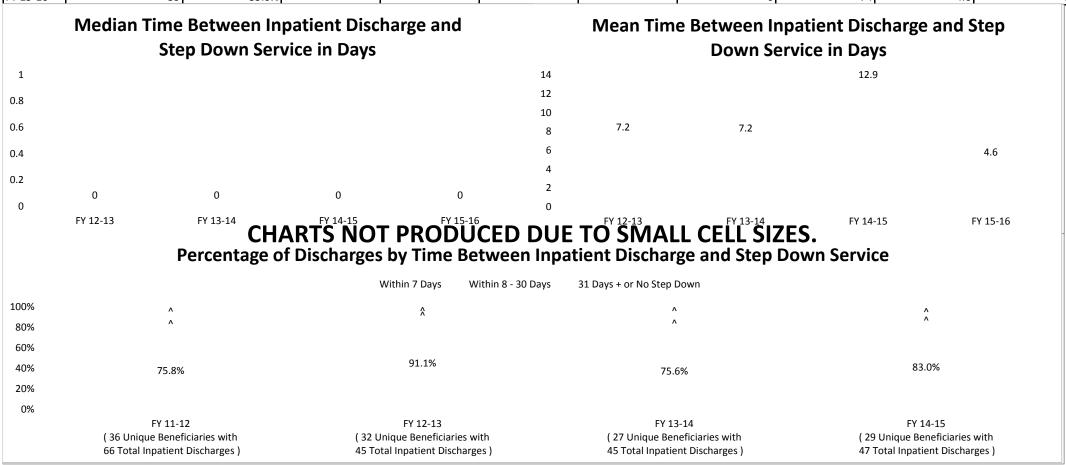
Category	Description (Please refer to the Measures Catalog for more detailed descriptions on all Performance Outcomes System measures.)
Arrivals	Children/Youth that did not receive any SMHS within 3 months of their first date of service in the Fiscal Year.
<b>Service Continuance</b>	Children/Youth receiving continuous services with no breaks in service greater than 90 days for a period of at least 2 years (>= 2 YR) or a period of 1 to 2 years (< 2 YR).
Exiting	Children/Youth that did not receive any SMHS within 3 months after their last date of service in the Fiscal Year.
<b>Arriving &amp; Exiting</b>	A distinct category in which children/youth met both the criteria for <b>Arrivals</b> and <b>Exiting</b> above for the fiscal year.
Service Continuance &	
Exiting	A distinct category in which Children/Youth had at least 2 years of Service Continuance going into the Fiscal Year and then Exited within the same Fiscal Year.

Service Fiscal Year	Arrivals Count	Arrivals %	Service Continuance (>= 2 YR) Count	Continuance	Service Continuance (<2 YR) Count	Service Continuance (< 2 YR) %	Exiting Count	Exiting %	Arriving & Exiting Count	Arriving & Exiting %		Service Continuance (>= 2 YR) and Exiting %	Total Count	Total %
FY 12-13	383	23.8%	218	13.6%	154	9.6%	305	19.0%	476	29.6%	72	4.5%	1,608	100%
FY 13-14	402	24.4%	184	11.2%	156	9.5%	284	17.2%	501	30.4%	123	7.5%	1,650	100%
FY 14-15	379	23.6%	169	10.5%	177	11.0%	307	19.1%	494	30.8%	80	5.0%	1,606	100%
FY 15-16	328	21.1%	148	9.5%	149	9.6%	318	20.5%	486	31.3%	125	8.0%	1,554	100%



# Time to Step Down Report: Children and Youth in Foster Care Stepping Down in SMHS Services Post Inpatient Discharge\* Alameda County as of August 9, 2017

Service FY	Count of Inpatient Discharges with Step Down within 7 Days of Discharge	Discharges with Step Down within 7 Days of	days of Discharge	Inpatient Discharges with Step Down between 8 and 30	a Step Down > 30 Days from Discharge or No	Percentage of Beneficiaries with a Step Down > 30 Days from Discharge or No Step Down*	Minimum Number of Days between Discharge and Step Down	Maximum Number of Days between Discharge and Step Down	Mean Time to Next Contact Post Inpatient Discharge (Days)	Median Time to Next Contact Post Inpatient Discharge (Days)
FY 12-13	50	75.8%	۸	۸	۸	۸	0	132	7.2	0
FY 13-14	41	91.1%	۸	۸	۸	۸	0	142	7.2	0
FY 14-15	34	75.6%	۸	۸	۸	۸	0	329	12.9	0
FY 15-16	39	83.0%	۸	۸	^	۸	0	74	4.6	0



<sup>\*</sup> **No Step Down** is defined as no Medi-Cal eligible service was claimed through Short-Doyle/Medi-Cal after a claimed inpatient service was billed with a discharge date. This category may include data currently unavailable to DHCS, such as beneficiaries that were moved to a community-based program or beneficiaries that were incarcerated.

<sup>^</sup> Data has been suppressed to protect patient privacy.