Performance Outcomes System

Report run on August 3, 2017

Background

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

These county-specific reports provide updated information on the initial indicators that were developed for the Performance Outcomes System and reported on at the statewide aggregate level in February 2015; they help establish a foundation for on-going reporting. DHCS plans to move to annual reporting of this data for the Performance Outcomes System.

The first series of charts and tables focus on the demographics of children and youth under 21 who are receiving SMH' 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.

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 - 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.

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Additional Information

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

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, medium, whether electronic, on paper, or oral. DHCS has strict rules in place to protect the identification of individuals in public reports. A "Public Aggregate Reporting – DHCS Business Reports" process has been established to maintain confidentiality of client Personal Information. The Performance Outcomes System complies with Federal and State privacy laws. Thus, the POS must appropriately and accurately de-identify data for public reporting. Due to privacy concerns, some cells in this report may have been suppressed to comply with state and federal rules. When necessary, this data is represented as follows: 1) Data that is missing is indicated as "-" 2) Data that has been suppressed due to privacy concerns is indicated as "^".

Report Interpretation

*County-specific findings may be interpreted alongside the POS statewide and population-based report findings.

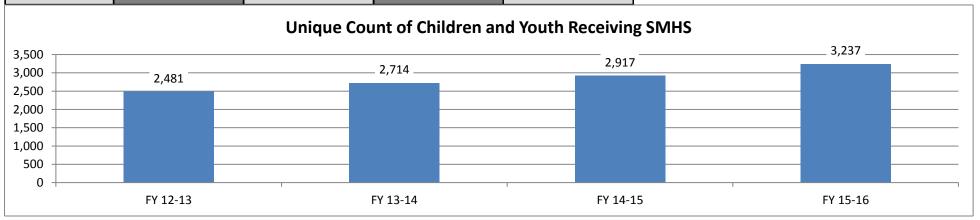
*The *penetration rates* reported here were calculated using a different methodology than that used by the External Quality Review Organization (EQRO). The differences in methodology make comparison between the POS penetration rates and the EQRO penetration rates not appropriate or useful. The POS methodology for calculating penetration rates was selected because it is easier to compute, more straightforward to interpret, and is in use by other states and counties. For the POS, the penetration rate is calculated by taking the total number of youth who received X number of 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 report will incorporate other outpatient and inpatient Medi-Cal SMHS' billed through the Managed Care healthcare delivery systems. Currently, the number of days is capped at 365 days (to mitigate the impact of extreme statistical anomalies) when calculating the mean and max for time between discharge and step down service. This methodology will be updated in the next reporting cycle. Additionally, county specific and population-based reports are based off of the 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.

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

SFY	Unique Count Receiving SMHS*	Year-Over-Year Percentage Change	Unique Count of Medi-Cal Eligibles	Year-Over-Year Percentage Change
FY 12-13	2,481		80,388	
FY 13-14	2,714	9.4%	87,705	9.1%
FY 14-15	2,917	7.5%	91,233	4.0%
FY 15-16	3,237	11.0%	97,574	7.0%
Compound Annual Growth Rate SFY**		9.3%		6.7%



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

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

Monterey County as of August 3, 2017

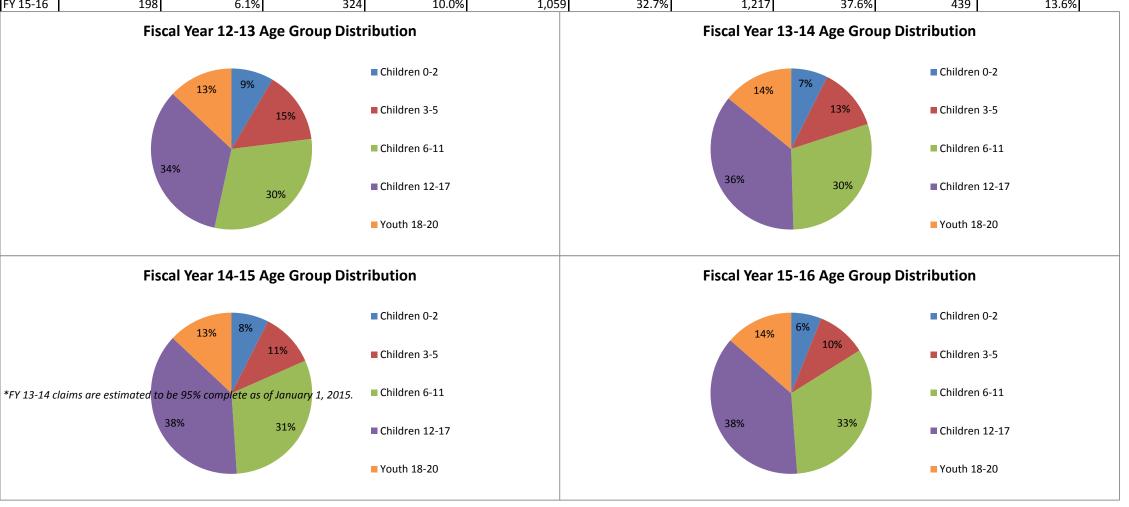
Fiscal Year	Alaskan Native or American Indian Count	Alaskan Native or American Indian %	Asian or Pacific Islander Count	Asian or Pacific Islander %	Black Count	Black %	Hispanic Count	Hispanic %	White Count	White %	Other Count	Other %	Unknown Count	Unknown %
FY 12-13	٨	٨	40	1.6%	78	3.1%	1,756	70.8%	379	15.3%	۸	^	210	8.5%
FY 13-14	٨	٨	50	1.8%	76	2.8%	1,954	72.0%	368	13.6%	۸	۸	242	8.9%
FY 14-15	٨	٨	48	1.6%	71	2.4%	2,115	72.5%	368	12.6%	٨	۸	298	10.2%
FY 15-16	٨	٨	38	1.2%	79	2.4%	2,421	74.8%	357	11.0%	۸	۸	326	10.1%
		Fiscal Y	/ear 12-13 R	lace Distrib	ution				Fis	scal Year 13	-14 Race Di	stribution		

FY 15-16	^	۸	38	1.2%	79	2.4%	2,421	74.8%		357	11.0%	۸	۸	326	10.1%
		Fiscal	Year 12-13 F	Race Distribution	า					Fiscal Y	ear 13-1	4 Race Di	stribution		
	۸	^ 2% 9%	3%	Indian	lative or Ameri Pacific Islander	can			^ 2% 3% ^ 9%			Alaskan Native or American Indian Asian or Pacific Islander			
	15%			Black					14%				Black		
				Hispanic									Hispanic		
				White									White		
			71%	Other						•	72%		Other		
				Unknown	1								Unknown		
		Fiscal		IARTS NO Race Distribution		DUCE	D DUE	TO SN	ЛAL				stribution		
		۸2%	2%		lative or Ameri	can				^1%29	6			tive or American	
	۸	10%		Indian Asian or F	Pacific Islander				۸	10%			Indian Asian or Pa	cific Islander	
	13%			Black					11%				Black		
				Hispanic									Hispanic		
*FY 13-14 clain	13-14 claims are estimated to be 95% complete as of January 1, 2015White												White		
			73%	Other						•	75%		Other		
				Unknown	1								Unknown		

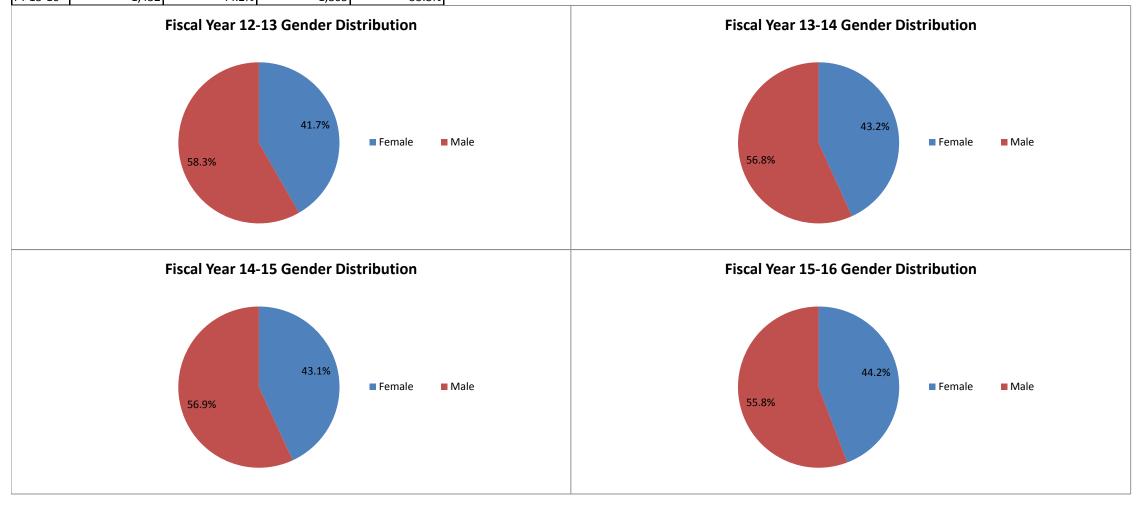
Please note: This report uses the Medi-Cal Eligibility Data System to obtain race/ethnicity data. CDSS uses Child Welfare Services/Case Management System to obtain race/ethnicity data. For more information, please refer to the Measures Catalog.

^ Data has been suppressed to protect patient privacy.

Fiscal Year	Children 0-2 Count	Children 0-2 %	Children 3-5 Count	Children 3-5 %	Children 6-11 Count	Children 6-11 %	Children 12-17 Count	Children 12-17 %	Youth 18-20 Count	Youth 18-20 %
FY 12-13	212	8.5%	359	14.5%	754	30.4%	833	33.6%	323	13.0%
FY 13-14	201	7.4%	342	12.6%	802	29.6%	984	36.3%	385	14.2%
FY 14-15	218	7.5%	317	10.9%	894	30.6%	1,110	38.1%	378	13.0%
FY 15-16	198	6.1%	324	10.0%	1,059	32.7%	1,217	37.6%	439	13.6%

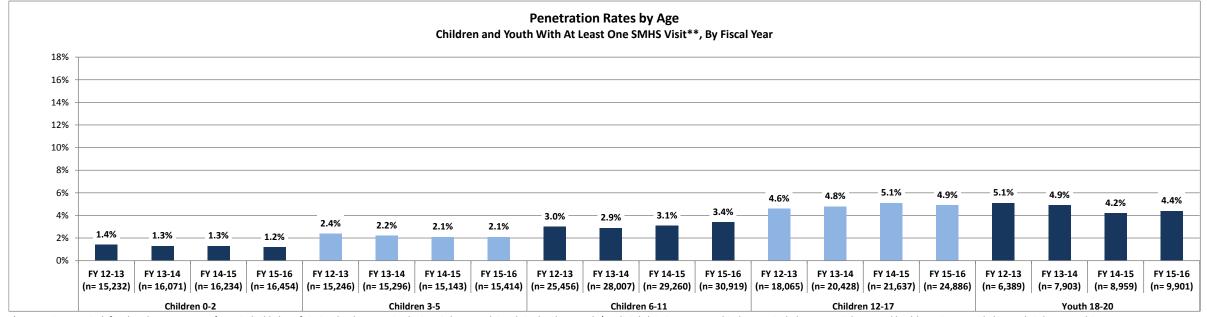


Fiscal Year	Female Count	Female %	Male Count	Male %
FY 12-13	1,034	41.7%	1,447	58.3%
FY 13-14	1,173	43.2%	1,541	56.8%
FY 14-15	1,256	43.1%	1,661	56.9%
FY 15-16	1.432	44.2%	1,805	55.8%



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

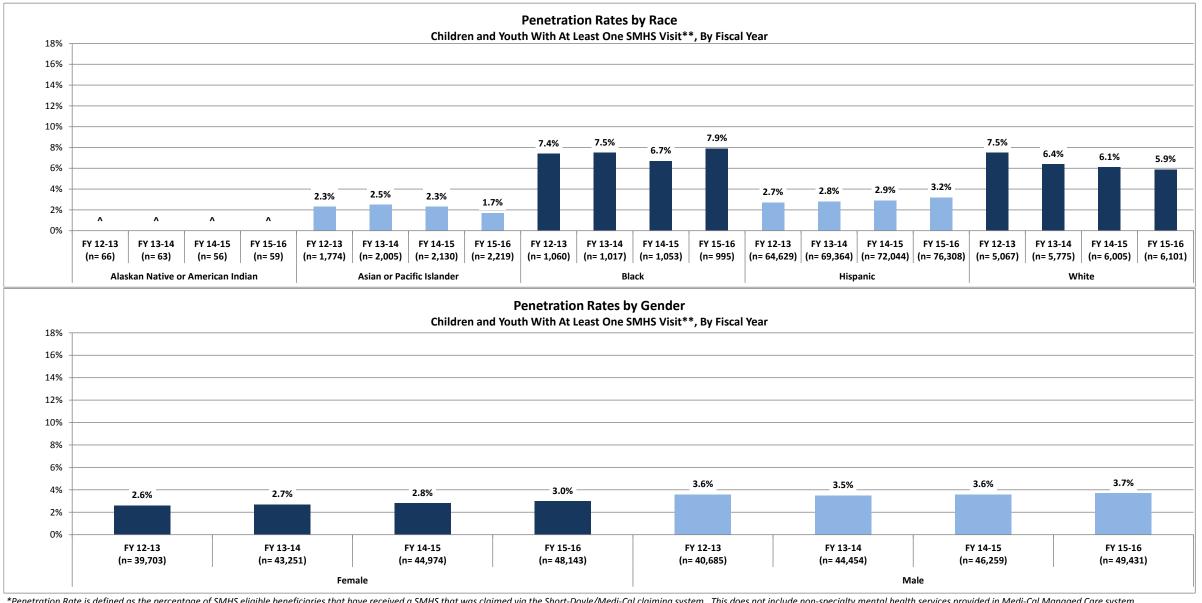
		FY 12-13			FY 13-14			FY 14-15			FY 15-16	
	Children and Youth with 1 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 1 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 1 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 1 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate
All	2,481	80,388	3.1%	2,714	87,705	3.1%	2,917	91,233	3.2%	3,237	97,574	3.3%
Children 0-2	212	15,232	1.4%	201	16,071	1.3%	218	16,234	1.3%	198	16,454	1.2%
Children 3-5	359	15,246	2.4%	342	15,296	2.2%	317	15,143	2.1%	324	15,414	2.1%
Children 6-11	754	25,456	3.0%	802	28,007	2.9%	894	29,260	3.1%	1,059	30,919	3.4%
Children 12-17	833	18,065	4.6%	984	20,428	4.8%	1,110	21,637	5.1%	1,217	24,886	4.9%
Youth 18-20	323	6,389	5.1%	385	7,903	4.9%	378	8,959	4.2%	439	9,901	4.4%
Alaskan Native or American Indian	۸	66	۸	۸	63	۸	۸	56	۸	۸	59	۸
Asian or Pacific Islander	40	1,774	2.3%	50	2,005	2.5%	48	2,130	2.3%	38	2,219	1.7%
Black	78	1,060	7.4%	76	1,017	7.5%	71	1,053	6.7%	79	995	7.9%
Hispanic	1,756	64,629	2.7%	1,954	69,364	2.8%	2,115	72,044	2.9%	2,421	76,308	3.2%
White	379	5,067	7.5%	368	5,775	6.4%	368	6,005	6.1%	357	6,101	5.9%
Other	۸	570	^	۸	801	٨	۸	633	٨	٨	561	٨
Unknown	210	7,222	2.9%	242	8,680	2.8%	298	9,312	3.2%	326	11,331	2.9%
Female	1,034	39,703	2.6%	1,173	43,251	2.7%	1,256	44,974	2.8%	1,432	48,143	3.0%
Male	1,447	40,685	3.6%	1,541	44,454	3.5%	1,661	46,259	3.6%	1,805	49,431	3.7%



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

^{**}Children and Youth that have received at least one SMHS that was claimed through the Short-Doyle/ Medi-Cal claiming system on at least one (1) day in the Fiscal Year.

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



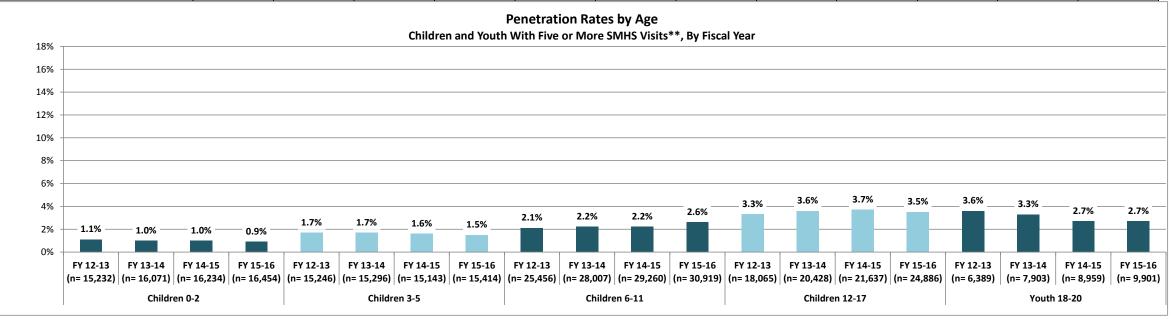
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^{**}Children and Youth that have received at least one SMHS that was claimed through the Short-Doyle/ Medi-Cal claiming system on at least one (1) day in the Fiscal Year.

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

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

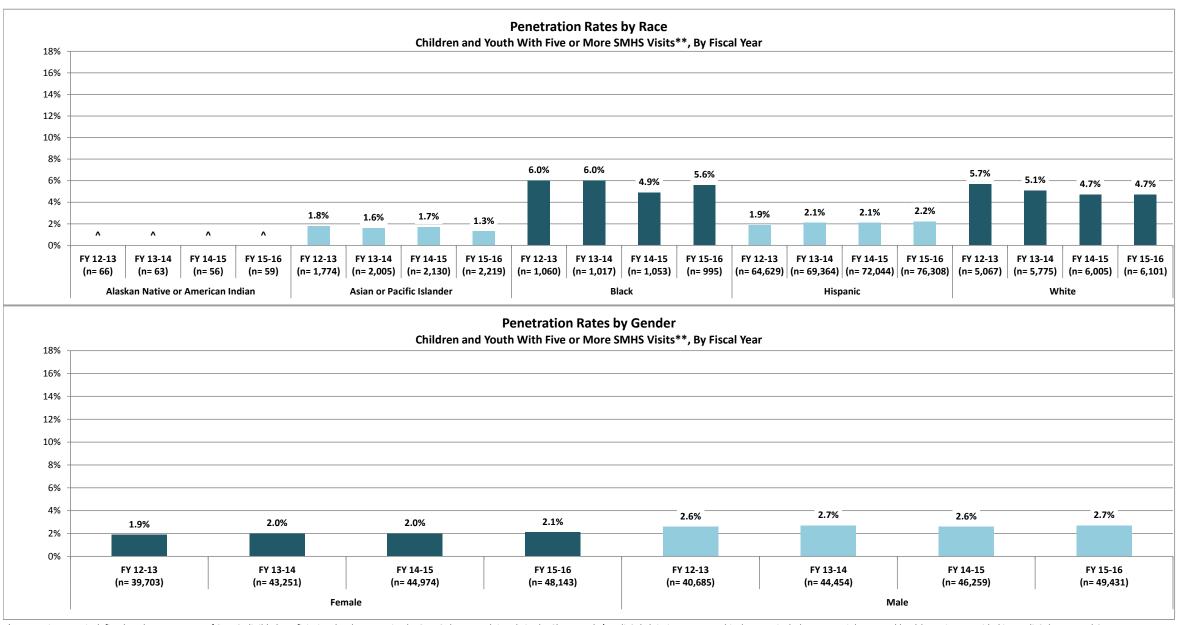
		FY 12-13			FY 13-14			FY 14-15			FY 15-16	
	Children and Youth with 5 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 5 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 5 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 5 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate
All	1,799	80,388	2.2%	2,032	87,705	2.3%	2,098	91,233	2.3%	2,326	97,574	2.4%
Children 0-2	175	15,232	1.1%	153	16,071	1.0%	165	16,234	1.0%	151	16,454	0.9%
Children 3-5	263	15,246	1.7%	262	15,296	1.7%	238	15,143	1.6%	232	15,414	1.5%
Children 6-11	524	25,456	2.1%	616	28,007	2.2%	655	29,260	2.2%	796	30,919	2.6%
Children 12-17	604	18,065	3.3%	742	20,428	3.6%	797	21,637	3.7%	880	24,886	3.5%
Youth 18-20	233	6,389	3.6%	259	7,903	3.3%	243	8,959	2.7%	267	9,901	2.7%
Alaskan Native or American Indian	^	66	۸	^	63	^	^	56	۸	٨	59	۸
Asian or Pacific Islander	32	1,774	1.8%	32	2,005	1.6%	36	2,130	1.7%	29	2,219	1.3%
Black	64	1,060	6.0%	61	1,017	6.0%	52	1,053	4.9%	56	995	5.6%
Hispanic	1,241	64,629	1.9%	1,425	69,364	2.1%	1,485	72,044	2.1%	1,683	76,308	2.2%
White	290	5,067	5.7%	297	5,775	5.1%	284	6,005	4.7%	287	6,101	4.7%
Other	۸	570	۸	۸	801	۸	۸	633	^	۸	561	۸
Unknown	160	7,222	2.2%	195	8,680	2.2%	229	9,312	2.5%	258	11,331	2.3%
Female	742	39,703	1.9%	853	43,251	2.0%	890	44,974	2.0%	1,012	48,143	2.1%
Male	1,057	40,685	2.6%	1,179	44,454	2.7%	1,208	46,259	2.6%	1,314	49,431	2.7%



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

^{**}Children and Youth that have received at least five SMHS that were claimed through the Short-Doyle/ Medi-Cal claiming system on at least five (5) or more different days in the Fiscal Year.

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



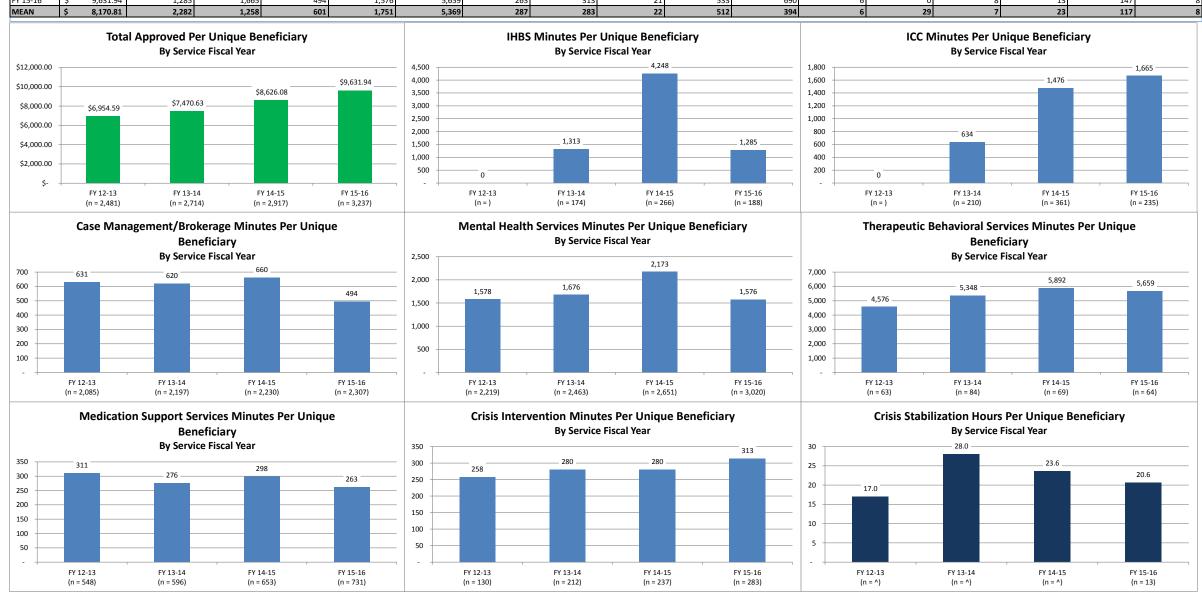
^{*}Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in Medi-Cal Managed Care system.

^{**}Children and Youth that have received at least five SMHS that were claimed through the Short-Doyle/ Medi-Cal claiming system on at least five (5) or more different days in the Fiscal Year.

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

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

Monterey County as of August 3, 2017 **Therapeutic Full Day** Medication Crisis **Full Day** Hospital Crisis Residenti **Psychiatric SDMC Total** IHBS Management/ Behavioral Treatment Fee for Service **Fiscal Year** Services upport Services Intervention Stabilization Rehabilitation npatient Admi Treatment Treatment **Health Facility** (Minutes) Intensive Approved (Minutes) Brokerage Services Inpatient (Days) Inpatient (Days) Services (Days) Services (Days) (Minutes) (Minutes) (Minutes) (Hours) (Hours) (Days) (Days) (Minutes) (Minutes) (Hours) FY 12-13 6.954.59 631 1,578 4,576 311 258 17 556 288 27 183 FY 13-14 7,470.63 1,313 634 620 1,676 276 280 28 566 28 104 5,348 296 280 1,476 660 24 25 FY 14-15 8,626.08 4,248 2,173 5,892 298 395 301 83 34 FY 15-16 9.631.94 1.285 1.665 494 1.576 5.659 263 313 21 533 690 13 147



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

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

[^] Data has been suppressed to protect patient privacy

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



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 = ^)

34.0

FY 14-15

(n = ^)

FY 12-13

(n = ^)

20

0.0

FY 14-15

(n =)

FY 15-16

(n = ^)

0.0

FY 13-14

FY 12-13

(n =)

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

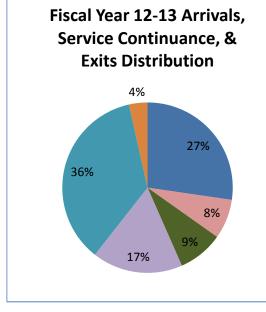
[^] Data has been suppressed to protect patient privacy.

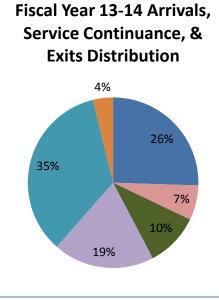
Snapshot Report: Unique Count of Children and Youth Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year

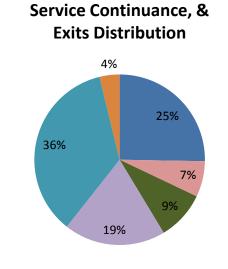
Monterey County as of August 3, 2017

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.
Service Continuance	Children/Youth receiving continuous services with no breaks in service greater than 90 days for a period of at least 2 years (>= 2 YR) or a period of 1 to 2 years (< 2 YR).
Exiting	Children/Youth that did not receive any SMHS within 3 months after their last date of service in the Fiscal Year.
Arriving & Exiting	A distinct category in which children/youth met both the criteria for Arrivals and Exiting above for the fiscal year.
Service Continuance &	
Exiting	A distinct category in which Children/Youth had at least 2 years of Service Continuance going into the Fiscal Year and then Exited within the same Fiscal Year.

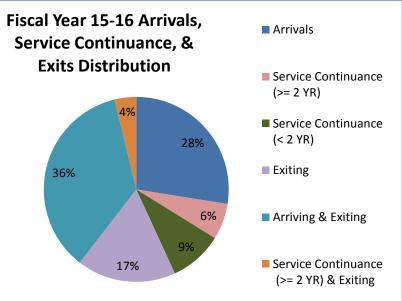
Service Fiscal Year	Arrivals Count	Arrivals %	Service Continuance (>= 2 YR) Count		Service Continuance (<2 YR) Count		Exiting Count	Exiting %	Arriving & Exiting Count	Exiting %		(>= 2 YR) and	Total Count	Total %
FY 12-13	677	27.3%	187	7.5%	213	8.6%	426	17.2%	891	35.9%	87	3.5%	2,481	100%
FY 13-14	691	25.5%	179	6.6%	278	10.2%	521	19.2%	942	34.7%	103	3.8%	2,714	100%
FY 14-15	737	25.3%	199	6.8%	270	9.3%	564	19.3%	1,037	35.6%	110	3.8%	2,917	100%
FY 15-16	891	27.5%	204	6.3%	302	9.3%	561	17.3%	1,155	35.7%	124	3.8%	3,237	100%





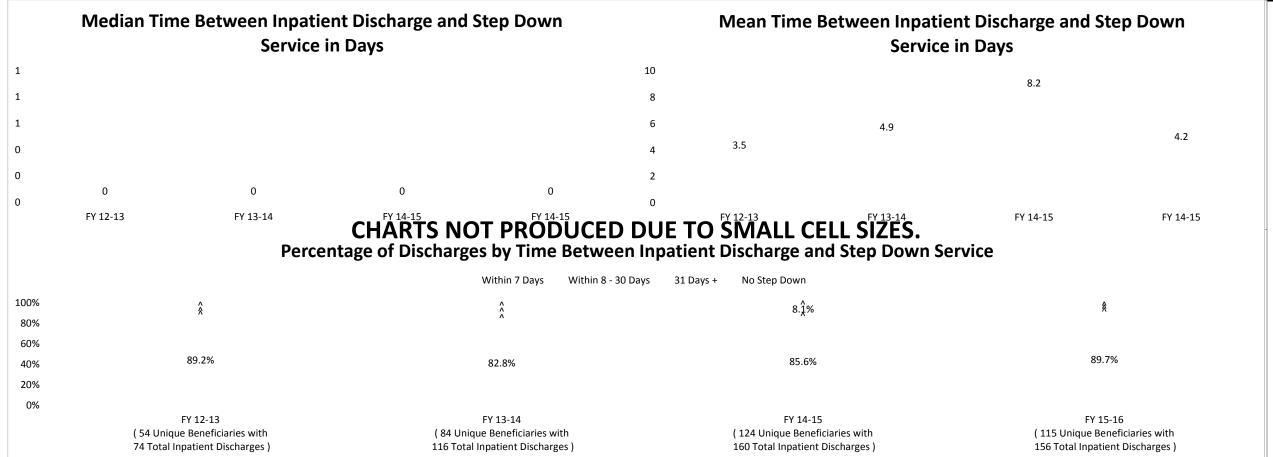


Fiscal Year 14-15 Arrivals,



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

Service FY	Count of Inpatient Discharges with Step Down within 7 Days of Discharge	Step Down within	Count of Inpatient Discharges with Step Down Between 8 and 30 Days	Inpatient Discharges with Step Down	Step Down > 30 Days from	Inpatient Discharges with a	Discharges with		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	66	89.2%	0	0.0%	۸	۸	۸	^	0	67	3.5	0
FY 13-14	96	82.8%	۸	۸	۸	۸	۸	^	0	106	4.9	0
FY 14-15	137	85.6%	٨	۸	13	8.1%	۸	^	0	269	8.2	0
FY 15-16	140	89.7%	۸	۸	۸	^	۸	۸	0	250	4.2	0



^{*} No Step Down is defined as no Medi-Cal eligible service was claimed through Short-Doyle/Medi-Cal after a claimed inpatient service was billed with a discharge date. 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.

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