# 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.

#### 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, 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 "^".

\*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.

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	789		1,421	
FY 13-14	751	-4.8%	1,436	1.1%
FY 14-15	804	7.1%	1,403	-2.3%
FY 15-16	713	-11.3%	1,280	-8.8%
Compound Annual Growth Rate SFY**		-3.3%		-3.4%

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

\*\*SFY = State Fiscal Year which is July 1 through June 30.

Fiscal Year	Black Count	Black %	Hispanic Count	Hispanic %	White Count	White %	Other Count	Other %	
FY 12-13	271	34.3%	115	14.6%	61	7.7%	342	43.3%	
FY 13-14	245	32.6%	113	15.0%	60	8.0%	333	44.3%	
FY 14-15	265	33.0%	102	12.7%	65	8.1%	372	46.3%	
FY 15-16	216	30.3%	66	9.3%	67	9.4%	364	51.1%	

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	41	5.2%	62	7.9%	220	27.9%	355	45.0%	111	14.1%
FY 13-14	47	6.3%	69	9.2%	173	23.0%	345	45.9%	117	15.6%
FY 14-15	72	9.0%	85	10.6%	196	24.4%	307	38.2%	144	17.9%
FY 15-16	57	8.0%	69	9.7%	170	23.8%	286	40.1%	131	18.4%

Fiscal Year	Female Count	Female %	Male Count	Male %
FY 12-13	381	48.3%	408	51.7%
FY 13-14	360	47.9%	391	52.1%
FY 14-15	373	46.4%	431	53.6%
FY 15-16	316	44.3%	397	55.7%

#### Penetration Rates\* Report: Children and Youth in Foster Care with At Least One SMHS Visit\*\* San Francisco 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	789	1,421	55.5%	751	1,436	52.3%	804	1,403	57.3%	713	1,280	55.7%
Children 0-2	41	206	19.9%	47	199	23.6%	72	206	35.0%	57	178	32.0%
Children 3-5	62	127	48.8%	69	154	44.8%	85	148	57.4%	69	146	47.3%
Children 6-11	220	275	80.0%	173	256	67.6%	196	260	75.4%	170	236	72.0%
Youth 12-17	355	512	69.3%	345	492	70.1%	307	441	69.6%	286	420	68.1%
Youth 18-20	111	301	36.9%	117	335	34.9%	144	348	41.4%	131	300	43.7%
Black	271	558	48.6%	245	524	46.8%	265	484	54.8%	216	426	50.7%
Hispanic	115	199	57.8%	113	205	55.1%	102	185	55.1%	66	140	47.1%
White	61	112	54.5%	60	115	52.2%	65	113	57.5%	67	96	69.8%
Other	342	552	62.0%	333	592	56.3%	372	621	59.9%	364	618	58.9%
Female	381	689	55.3%	360	665	54.1%	373	646	57.7%	316	586	53.9%
Male	408	732	55.7%	391	771	50.7%	431	757	56.9%	397	694	57.2%

#### Penetration Rates\* Report: Children and Youth in Foster Care with Five or More SMHS Visits\*\* San Francisco 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	662	1,421	46.6%	616	1,436	42.9%	620	1,403	44.2%	547	1,280	42.7%
Children 0-2	23	206	11.2%	29	199	14.6%	30	206	14.6%	25	178	14.0%
Children 3-5	46	127	36.2%	47	154	30.5%	58	148	39.2%	45	146	30.8%
Children 6-11	192	275	69.8%	151	256	59.0%	160	260	61.5%	140	236	59.3%
Children 12-17	314	512	61.3%	292	492	59.3%	264	441	59.9%	243	420	57.9%
Youth 18-20	87	301	28.9%	97	335	29.0%	108	348	31.0%	94	300	31.3%
Black	228	558	40.9%	206	524	39.3%	205	484	42.4%	165	426	38.7%
Hispanic	89	199	44.7%	90	205	43.9%	77	185	41.6%	53	140	37.9%
White	55	112	49.1%	46	115	40.0%	48	113	42.5%	62	96	64.6%
Other	290	552	52.5%	274	592	46.3%	290	621	46.7%	267	618	43.2%
Female	317	689	46.0%	297	665	44.7%	274	646	42.4%	241	586	41.1%
Male	345	732	47.1%	319	771	41.4%	346	757	45.7%	306	694	44.1%

\*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.

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

Fiscal Year	SDMC Total Approved	IHBS (Minutes)	ICC (Minutes)	Case Management/ Brokerage (Minutes)	Mental Health Services (Minutes)	Therapeutic Behavioral Services (Minutes)	Medication Support Services (Minutes)	Crisis Intervention (Minutes)	Crisis Stabilization (Hours)	Full Day Treatment Intensive (Hours)	Full Day Rehabilitation (Hours)	Hospital Inpatient (Days)	Hospital Inpatient Admin (Days)	Fee for Service		Adult Residential Treatment Services (Days)	
FY 12-13	\$ 21,356.72	881	342	625	4,927	5,822	405	395	22	576	427	4	20	15	13	30	6
FY 13-14	\$ 22,635.02	4,561	2,219	570	3,160	4,655	425	461	17	578	642	8	0	21	9	1	3
FY 14-15	\$ 25,081.32	5,217	2,129	473	2,882	4,548	405	438	32	234	610	6	6	16	21	90	12
FY 15-16	\$ 32,920.70	5,663	2,074	542	3,282	7,260	380	318	15	0	510	3	0	8	0	0	0
MEAN	\$ 25,498.44	4,081	1,691	553	3,563	5,571	404	403	22	463	547	5	13	15	14	40	7

\*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.

# Snapshot Report: Unique Count of Children and Youth in Foster Care Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year San Francisco 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.
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) %	Service Continuance (<2 YR) Count		Exiting Count	Exiting %	Arriving & Exiting Count	Exiting %		Service Continuance (>= 2 YR) and Exiting %	Total Count	Total %
FY 12-13	166	21.0%	133	16.9%	94	11.9%	150	19.0%	193	24.5%	53	6.7%	789	100%
FY 13-14	175	23.3%	108	14.4%	88	11.7%	133	17.7%	196	26.1%	51	6.8%	751	100%
FY 14-15	172	21.4%	98	12.2%	64	8.0%	151	18.8%	264	32.8%	55	6.8%	804	100%
FY 15-16	180	25.2%	90	12.6%	47	6.6%	151	21.2%	209	29.3%	36	5.0%	713	100%

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

Service FY	Count of Inpatient Discharges with Step Down within 7 Days of Discharge	Inpatient Discharges with Step Down within 7 Days of	Count of Inpatient Discharges with Step Down between 8 and 30 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*		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	35	85.4%	^	^	^	۸	0	160	17.8	0
FY 13-14	44	97.8%	٨	^	^	٨	0	13	0.6	0
FY 14-15	34	85.0%	۸	^	^	۸	0	61	2.7	0
FY 15-16	12	85.7%	۸	^	^	۸	0	57	6.1	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.