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	519		1,346	
FY 13-14	605	16.6%	1,424	5.8%
FY 14-15	599	-1.0%	1,428	0.3%
FY 15-16	731	22.0%	1,376	-3.6%
Compound Annual Growth Rate SFY**		12.1%		0.7%

*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	22	4.2%	275	53.0%	156	30.1%	66	12.7%	
FY 13-14	25	4.1%	346	57.2%	180	29.8%	54	8.9%	
FY 14-15	23	3.8%	368	61.4%	158	26.4%	50	8.3%	
FY 15-16	27	3.7%	468	64.0%	196	26.8%	40	5.5%	

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	٨	٨	86	16.6%	183	35.3%	201	38.7%	٨	^
FY 13-14	٨	٨	111	18.3%	230	38.0%	210	34.7%	٨	^
FY 14-15	20	3.3%	89	14.9%	221	36.9%	197	32.9%	72	12.0%
FY 15-16	113	15.5%	106	14.5%	230	31.5%	206	28.2%	76	10.4%

^ Data has been suppressed to protect patient privacy.

Fiscal Year	Female Count	Female %	Male Count	Male %
FY 12-13	254	48.9%	265	51.1%
FY 13-14	309	51.1%	296	48.9%
FY 14-15	297	49.6%	302	50.4%
FY 15-16	365	49.9%	366	50.1%

Penetration Rates* Report: Children and Youth in Foster Care with At Least One SMHS Visit** Ventura 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	519	1,346	38.6%	605	1,424	42.5%	599	1,428	41.9%	731	1,376	53.1%
Children 0-2	^	336	٨	۸	350	^	20	366	5.5%	113	378	29.9%
Children 3-5	86	247	34.8%	111	273	40.7%	89	251	35.5%	106	232	45.7%
Children 6-11	183	338	54.1%	230	359	64.1%	221	367	60.2%	230	326	70.6%
Youth 12-17	201	324	62.0%	210	318	66.0%	197	298	66.1%	206	295	69.8%
Youth 18-20	^	101	۸	٨	124	۸	72	146	49.3%	76	145	52.4%
Black	22	56	39.3%	25	48	52.1%	23	45	51.1%	27	44	61.4%
Hispanic	275	743	37.0%	346	860	40.2%	368	908	40.5%	468	888	52.7%
White	156	413	37.8%	180	397	45.3%	158	363	43.5%	196	359	54.6%
Other	66	134	49.3%	54	119	45.4%	50	112	44.6%	40	85	47.1%
Female	254	660	38.5%	309	696	44.4%	297	674	44.1%	365	655	55.7%
Male	265	686	38.6%	296	728	40.7%	302	754	40.1%	366	721	50.8%

Penetration Rates* Report: Children and Youth in Foster Care with Five or More SMHS Visits** Ventura 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	449	1,346	33.4%	515	1,424	36.2%	506	1,428	35.4%	558	1,376	40.6%
Children 0-2	^	336	٨	^	350	٨	12	366	3.3%	35	378	9.3%
Children 3-5	77	247	31.2%	89	273	32.6%	68	251	27.1%	72	232	31.0%
Children 6-11	160	338	47.3%	200	359	55.7%	196	367	53.4%	203	326	62.3%
Children 12-17	174	324	53.7%	186	318	58.5%	174	298	58.4%	187	295	63.4%
Youth 18-20	^	101	۸	^	124	۸	56	146	38.4%	61	145	42.1%
Black	18	56	32.1%	21	48	43.8%	19	45	42.2%	22	44	50.0%
Hispanic	232	743	31.2%	298	860	34.7%	303	908	33.4%	365	888	41.1%
White	141	413	34.1%	153	397	38.5%	144	363	39.7%	140	359	39.0%
Other	58	134	43.3%	43	119	36.1%	40	112	35.7%	31	85	36.5%
Female	222	660	33.6%	265	696	38.1%	253	674	37.5%	279	655	42.6%
Male	227	686	33.1%	250	728	34.3%	253	754	33.6%	279	721	38.7%

*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 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 Ventura 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 Inpatient (Days)	Treatment	Adult Residential Treatment Services (Days)	Psychiatric Health Facility (Days)
FY 12-13	\$ 10,656.11	0	0	366	3,132	5,790	629	254	7	0	114	14	0	5	0	0	0
FY 13-14	\$ 10,160.16	647	628	374	3,025	4,430	575	288	13	0	0	3	0	11	0	0	0
FY 14-15	\$ 11,059.47	2,329	712	506	2,993	3,260	832	307	63	0	394	6	5	10	26	86	0
FY 15-16	\$ 10,219.38	3,066	846	437	2,534	4,029	569	513	31	172	336	5	0	9	14	0	3
MEAN	\$ 10,523.78	2,014	728	421	2,921	4,377	651	340	28	172	281	7	5	9	20	86	3

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

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

^ Data has been suppressed to protect patient privacy.

Snapshot Report: Unique Count of Children and Youth in Foster Care Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year Ventura 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) Count		Exiting Count	Exiting %	Arriving & Exiting Count	Exiting %		Service Continuance (>= 2 YR) and Exiting %	Total Count	Total %
FY 12-13	161	31.0%	35	6.7%	52	10.0%	115	22.2%	136	26.2%	20	3.9%	519	100%
FY 13-14	169	27.9%	46	7.6%	49	8.1%	134	22.1%	191	31.6%	16	2.6%	605	100%
FY 14-15	173	28.9%	40	6.7%	59	9.8%	141	23.5%	161	26.9%	25	4.2%	599	100%
FY 15-16	219	30.0%	55	7.5%	60	8.2%	128	17.5%	242	33.1%	27	3.7%	731	100%

Time to Step Down Report: Children and Youth in Foster Care Stepping Down in SMHS Services Post Inpatient Discharge* Ventura 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	a Step Down > 30	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	21	67.7%	۸	^	۸	^	0	109	13.0	3
FY 13-14	41	80.4%	٨	^	^	^	0	17	3.0	1
FY 14-15	41	95.3%	۸	^	۸	^	0	27	1.9	1
FY 15-16	36	97.3%	۸	^	^	^	0	114	5.1	1

* 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.