

Performance Outcomes System Reports

Report run on August 3, 2016

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

Population-based county grouped data is presented in this report. County groups are organized into the following four groups based on county population: small-rural, small, medium, and large counties. The counties in each group are listed on page 3 of this report and also available in the Measures Catalog. 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 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 Fiscal Years (FY) 11/12, 12/13, 13/14, and 14/15.

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. Starting with this report, 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; or
- Age 21 during the approved date of the service on the claim and a birth date on or after January 1st of the Fiscal Year.

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Data Sources -

- Short-Doyle/Medi-Cal II (SD/MC II) claims with dates of service in FY 10/11 through FY 13/14.
- Medi-Cal Eligibility Data System (MEDS) data from the Management Information System/Decision Support System (MIS/DSS) FY 10/11 through FY 13/14.
- Child Welfare Services/Case Management System (CWS/CMS) data for children in FY 11/12 through FY 14/15.

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

*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). As of now, this report only classifies youth and their service usage for FY 12/13 and FY13/14. 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 relies solely on claims data from Short Doyle/Medi-Cal II. 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."

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***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.

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County Groupings

Counties are grouped by population, as follows:

Category:

Small Rural: Population is less than 50,000

Small: Population is 50,000-199,999

Medium: Population is 200,000-749,000

Large: Population is 750,000-3,999,999

Very Large: 4,000,000 or greater

Counties in each Category:

Small Rural: Alpine, Amador, Calaveras, Colusa, Del Norte, Glenn, Inyo, Lassen, Mariposa, Modoc, Mono, Plumas, Sierra, Siskiyou, Trinity

Small: El Dorado, Humboldt, Imperial, Kings, Lake, Madera, Mendocino, Napa, Nevada, San Benito, Shasta, Sutter, Tehama, Tuolumne, Yuba

Medium: Butte, Marin, Merced, Monterey, Placer, San Joaquin, San Luis Obispo, San Mateo, Santa Barbara, Santa Cruz, Solano, Sonoma, Stanislaus, Tulare, Yolo
Large: Alameda, Contra Costa, Fresno, Kern, Orange, Riverside, Sacramento, San Bernardino, San Diego, San Francisco, Santa Clara, Ventura

Very Large: Los Angeles

Population information is provided for each county (on pages 13 and 14) of the Measures Catalog.

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

**Demographics Report: Unique Count of Children and Youth with an Open Child Welfare Case Receiving SMHS by Fiscal Year
Large County Populations as of August 3, 2016**

SFY	Unique Count Receiving SMHS*	Year-Over-Year Percentage Change	Unique Count of Youth Child Welfare in Medi-Cal	Year-Over-Year Percentage Change
FY 11-12	19,986		52,431	
FY 12-13	19,288	-3.5%	52,749	0.6%
FY 13-14	20,155	4.5%	54,523	3.4%
FY 14-15	21,577	7.1%	56,093	2.9%
Compound Annual Growth Rate SFY**		2.6%		2.3%

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

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

**Demographics Report: Unique Count of Children and Youth with an Open Child Welfare Case Receiving SMHS by Fiscal Year
Large County Populations as of August 3, 2016**

Fiscal Year	Black Count	Black %	Hispanic Count	Hispanic %	White Count	White %	Other Count	Other %
FY 11-12	4,649	23.3%	7,727	38.7%	5,740	28.7%	1,870	9.4%
FY 12-13	4,412	22.9%	7,552	39.2%	5,363	27.8%	1,961	10.2%
FY 13-14	4,557	22.6%	7,877	39.1%	5,491	27.2%	2,230	11.1%
FY 14-15	4,761	22.1%	8,429	39.1%	5,753	26.7%	2,634	12.2%

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 with an Open Child Welfare Case Receiving SMHS by Fiscal Year
Large County Populations as of August 3, 2016**

Fiscal Year	Children 0 5 Count	Children 0 5 %	Children 6 11 Count	Children 6 11 %	Children 12 17 Count	Children 12-17 %	Youth 18-20 Count	Youth 18-20 %
FY 11-12	4,268	21.4%	6,184	30.9%	8,636	43.2%	898	4.5%
FY 12-13	4,090	21.2%	6,153	31.9%	7,746	40.2%	1,299	6.7%
FY 13-14	4,478	22.2%	6,484	32.2%	7,633	37.9%	1,560	7.7%
FY 14-15	5,207	24.1%	6,959	32.3%	7,582	35.1%	1,829	8.5%

**Demographics Report: Unique Count of Children and Youth with an Open Child Welfare Case Receiving SMHS by Fiscal Year
Large County Populations as of August 3, 2016**

Fiscal Year	Female Count	Female %	Male Count	Male %
FY 11-12	9,397	47.0%	10,589	53.0%
FY 12-13	9,105	47.2%	10,183	52.8%
FY 13-14	9,592	47.6%	10,563	52.4%
FY 14-15	10,346	47.9%	11,231	52.1%

Penetration Rates* Report: Children and Youth with an Open Child Welfare Case With At Least One SMHS Visit
Large County Populations as of August 3, 2016**

	FY 11-12			FY 12-13			FY 13-14			FY 14-15		
	Children and Youth with an Open Child Welfare Case with 1 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate	Children and Youth with an Open Child Welfare Case with 1 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate	Open Child Welfare Case with 1 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate	Children and Youth with an Open Child Welfare Case with 1 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate
All	19,986	52,431	38.1%	19,288	52,749	36.6%	20,155	54,523	37.0%	21,577	56,093	38.5%
Children 0-5	4,268	20,370	21.0%	4,090	20,618	19.8%	4,478	21,226	21.1%	5,207	21,667	24.0%
Children 6-11	6,184	13,231	46.7%	6,153	13,611	45.2%	6,484	14,057	46.1%	6,959	14,472	48.1%
Children 12-17	8,636	15,316	56.4%	7,746	14,377	53.9%	7,633	13,872	55.0%	7,582	13,505	56.1%
Youth 18-20	898	3,514	25.6%	1,299	4,143	31.4%	1,560	5,368	29.1%	1,829	6,449	28.4%
Black	4,649	10,102	46.0%	4,412	9,915	44.5%	4,557	10,161	44.8%	4,761	10,461	45.5%
Hispanic	7,727	21,640	35.7%	7,552	22,251	33.9%	7,877	23,116	34.1%	8,429	23,535	35.8%
White	5,740	13,341	43.0%	5,363	13,330	40.2%	5,491	13,609	40.3%	5,753	14,097	40.8%
Other	1,870	7,348	25.4%	1,961	7,253	27.0%	2,230	7,637	29.2%	2,634	8,000	32.9%
Female	9,397	25,088	37.5%	9,105	25,204	36.1%	9,592	26,076	36.8%	10,346	26,981	38.3%
Male	10,589	27,343	38.7%	10,183	27,545	37.0%	10,563	28,447	37.1%	11,231	29,112	38.6%

*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 system

**Children and Youth with an Open Child Welfare Case that have received at least one SMHS in the Fiscal Year.

Penetration Rates* Report: Children and Youth with an Open Child Welfare Case With Five or More SMHS Visits**
Large County Populations as of August 3, 2016

	FY 11-12			FY 12-13			FY 13-14			FY 14-15		
	Children and Youth with an Open Child Welfare Case with 5 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate	Children and Youth with an Open Child Welfare Case with 5 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate	Children and Youth with an Open Child Welfare Case with 5 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate	Children and Youth with an Open Child Welfare Case with 5 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate
All	15,034	52,431	28.7%	14,679	52,749	27.8%	15,107	54,523	27.7%	16,012	56,093	28.5%
Children 0-5	2,611	20,370	12.8%	2,560	20,618	12.4%	2,705	21,226	12.7%	3,107	21,667	14.3%
Children 6-11	4,703	13,231	35.5%	4,706	13,611	34.6%	4,899	14,057	34.9%	5,256	14,472	36.3%
Children 12-17	7,020	15,316	45.8%	6,343	14,377	44.1%	6,213	13,872	44.8%	6,174	13,505	45.7%
Youth 18-20	700	3,514	19.9%	1,070	4,143	25.8%	1,290	5,368	24.0%	1,475	6,449	22.9%
Black	3,744	10,102	37.1%	3,579	9,915	36.1%	3,648	10,161	35.9%	3,693	10,461	35.3%
Hispanic	5,524	21,640	25.5%	5,434	22,251	24.4%	5,574	23,116	24.1%	5,990	23,535	25.5%
White	4,304	13,341	32.3%	4,109	13,330	30.8%	4,169	13,609	30.6%	4,304	14,097	30.5%
Other	1,462	7,348	19.9%	1,557	7,253	21.5%	1,716	7,637	22.5%	2,025	8,000	25.3%
Female	7,022	25,088	28.0%	6,892	25,204	27.3%	7,198	26,076	27.6%	7,599	26,981	28.2%
Male	8,012	27,343	29.3%	7,787	27,545	28.3%	7,909	28,447	27.8%	8,413	29,112	28.9%

*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 with an Open Child Welfare Case that have received at least five SMHS in the Fiscal Year.

**Utilization Report*: Approved Specialty Mental Health Services for Children and Youth with an Open Child Welfare Case
Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Fiscal Year
Large Population Counties as of August 3, 2016**

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)	Crisis Residential Treatment Services (Days)	Adult Residential Treatment Services (Days)	Psychiatric Health Facility (Days)
FY 11-12	\$ 7,691.98	0	0	877	2,176	5,010	335	259	16	528	332	4	7	10	20	61	23
FY 12-13	\$ 9,380.11	856	317	746	2,155	5,219	336	276	18	524	422	4	15	9	25	65	28
FY 13-14	\$ 8,878.46	2,274	1,062	652	1,949	4,758	334	257	19	503	451	5	9	10	19	86	17
FY 14-15	\$ 8,479.68	2,475	1,101	631	1,816	4,409	325	258	20	552	591	4	9	9	22	61	17
MEAN	\$ 8,607.56	1,868	827	727	2,024	4,849	333	263	18	527	449	4	10	10	22	68	21

Fiscal Year	SDMC Total Clients	IHBS Clients	ICC Clients	Case Management/ Brokerage Clients	Mental Health Services Clients	Therapeutic Behavioral Services Clients	Medication Support Services Clients	Crisis Intervention Clients	Crisis Stabilization Clients	Full Day Treatment Intensive Clients	Full Day Rehabilitation Clients	Hospital Inpatient Clients	Hospital Inpatient Admin Clients	Fee for Service Inpatient Clients	Crisis Residential Treatment Services Clients	Adult Residential Treatment Services Clients	Psychiatric Health Facility Clients
FY 11-12	20633	0	0	8546	19150	1332	5645	1181	626	745	761	159	^	962	^	^	60
FY 12-13	19983	97	92	8271	18491	1333	5444	1197	731	410	890	185	17	1087	13	11	52
FY 13-14	20908	1263	2048	8536	19416	1302	5330	1136	845	355	736	165	^	1121	^	^	64
FY 14-15	22440	2345	3816	8927	20973	1340	5171	1029	922	99	473	156	^	1072	39	^	72

*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 with and Open Child Welfare Case Receiving SMHS
Arriving, Exiting, and with Service Continuance by Fiscal Year
Large Population Counties as of August 3, 2016**

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	Service Continuance (< 2 YR) %	Exiting Count	Exiting %	Arriving & Exiting Count	Arriving & Exiting %	Service Continuance (>= 2 YR) & Exiting Count	Service Continuance (>= 2 YR) and Exiting %	Total Count	Total %
FY 12-13	4,558	23.6%	1,652	8.6%	1,751	9.1%	3,930	20.4%	6,616	34.3%	789	4.1%	541	100%
FY 13-14	5,092	25.3%	1,670	8.3%	1,662	8.2%	3,686	18.3%	7,073	35.1%	971	4.8%	645	100%
FY 14-15	5,264	24.4%	1,554	7.2%	1,711	7.9%	4,161	19.3%	7,826	36.3%	1,055	4.9%	651	100%

**Time to Step Down Report: Children and Youth with an Open Child Welfare Case Stepping Down in SMHS Services Post Inpatient Discharge
Large County Populations as of August 3, 2016**

Service FY	Count of Inpatient Discharges with Step Down within 7 Days of Discharge	Percentage of Inpatient Discharges with Step Down within 7 Days of Discharge	Count of Inpatient Discharges with Step Down between 8 and 30 days of Discharge	Percentage of Inpatient Discharges with Step Down between 8 and 30 days of Discharge	Count of Beneficiaries with a Step Down > 30 Days from Discharge or No Step Down*	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 11-12	1,057	72.1%	197	13.4%	213	14.5%	0	365	20.2	1
FY 12-13	1,138	76.1%	151	10.1%	206	13.8%	0	365	15.3	1
FY 13-14	1,249	79.3%	173	11.0%	154	9.8%	0	365	12.1	1
FY 14-15	1,091	74.7%	171	11.7%	198	13.6%	0	365	14.6	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.