### Performance Outcomes Adult Specialty Mental Health Services Report Report Date March 22, 2018

#### Background

This report measures the effectiveness of adult specialty mental health services. It models reports developed to measure Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) mental health services as mandated by Welfare and Institutions Code Section 14707.5. The intent of these reports is to improve outcomes at the individual, program, and system levels and inform fiscal decision-making related to the purchase of services. Since 2012 DHCS has worked with several groups of stakeholders to create a structure for reporting, to develop a Performance Measurement Paradigm, and to design 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.asp

#### Overview

Three reports will be provided: statewide aggregate data; population-based county groups; and county-specific data. These aggregate reports provide adult information on the initial indicators that were developed for the Performance Outcomes System. DHCS plans to move to annual reporting of these data for the Performance Outcomes System. The first series of charts and tables focus on the demographics of adults 21\* and older 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. Utilization of services reports are shown in terms of dollars, as well as by service in time increments. Two types of penetration information are provided; both penetration rate tables are also broken out by demographic characteristics. The snapshot table provides a point-in-time view of adults 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 stepdown services following inpatient discharge. Where possible, the reports provide trend information by displaying information for Fiscal Years (FY) 13/14, 14/15, 15/16, and 16/17.

#### **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 13/14 through FY 16/17.
• Medi-Cal Eligibility Data System (MEDS) data from the Management Information System/Decision Support System (MIS/DSS) FY 13/14 through FY16/17.

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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/services/MH/Documents/MedCCC/Library/POSMeasuresCatalog\_Sept15Reporting\_Fin al\_1.11.15.pdf

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, these data are represented as follows: 1) Data that are missing is indicated as "-" 2) Data that have been suppressed due to privacy concerns is indicated as "^".

### **Report Highlights**

\*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 makes comparison between the POS penetration rates and the EQRO penetration rates not appropriate nor 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 adults who received a number of SMHS (1 or 5 for POS) in a FY and dividing that by the total number of Medi-Cal eligible adults 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.

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\*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 fiscal responsibility for the patient 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 13-14	12,885		227,351	
FY 14-15	13,824	7.3%	274,295	20.6%
FY 15-16	11,572	-16.3%	292,958	6.8%
FY 16-17	11,044	-4.6%	297,957	1.7%
Compound Annual Growth Rate SFY**		-5.0%		9.4%

<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.

Fiscal Year	Alaskan Native or American Indian Count	Native or	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 13-14	54	0.4%	1,552	12.0%	4,192	32.5%	1,314	10.2%	3,142	24.4%	1,003	7.8%	1,628	12.6%
FY 14-15	61	0.4%	1,619	11.7%	4,311	31.2%	1,437	10.4%	3,447	24.9%	1,187	8.6%	1,762	12.7%
FY 15-16	55	0.5%	1,173	10.1%	3,633	31.4%	1,354	11.7%	2,888	25.0%	1,025	8.9%	1,444	12.5%
FY 16-17	59	0.5%	1,086	9.8%	3,456	31.3%	1,321	12.0%	2,663	24.1%	1,075	9.7%	1,384	12.5%

<sup>\*</sup>This report uses the Medi-Cal Eligibility Data System for racial data, while CDSS uses the Child Welfare Services/Case Management System.

Fiscal Year	Adults 21-44 Count	21-44 Adults 21-44 Adults 45-64 Count		Adults 45-64 %	Adults 65+ Count	Adults 65+ %
FY 13-14	5,929	46.0%	6,187	48.0%	769	6.0%
FY 14-15	6,585	47.6%	6,414	46.4%	825	6.0%
FY 15-16	5,964	51.5%	4,876	42.1%	732	6.3%
FY 16-17	5,851	53.0%	4,462	40.4%	731	6.6%

Fiscal Year	Female Count	Female %	Male Count	Male %
FY 13-14	7,386	57.3%	5,499	42.7%
FY 14-15	7,523	54.4%	6,301	45.6%
FY 15-16	5,922	51.2%	5,650	48.8%
FY 16-17	5,499	49.8%	5,545	50.2%

### Penetration Rates\* Report: Adults With At Least One SMHS Visit\*\* Alameda County as of March 22, 2018

		FY 13-14			FY 14-15			FY 15-16			FY 16-17	
	Adults and Older Adults with 1 or more SMHS Visits	Fligible	Penetration Rate	Adults and Older Adults with 1 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetratio n Rate	Adults and Older Adults with 1 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate	Adults and Older Adults with 1 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate
All	12,885	227,351	5.7%	13,824	274,295	5.0%	11,572	292,958	4.0%	11,044	297,957	3.7%
Adults 21-44	5,929	101,270	5.9%	6,585	131,210	5.0%	5,964	143,103	4.2%	5,851	145,868	4.0%
Adults 45-64	6,187	77,207	8.0%	6,414	91,038	7.0%	4,876	94,285	5.2%	4,462	93,365	4.8%
Adults 65+	769	48,874	1.6%	825	52,047	1.6%	732	55,570	1.3%	731	58,724	1.2%
Alaskan Native or American India	54	843	6.4%	61	967	6.3%	55	1,024	5.4%	59	991	6.0%
Asian or Pacific Islander	1,552	63,640	2.4%	1,619	76,877	2.1%	1,173	82,880	1.4%	1,086	84,638	1.3%
Black	4,192	51,888	8.1%	4,311	57,607	7.5%	3,633	59,421	6.1%	3,456	59,064	5.9%
Hispanic	1,314	33,121	4.0%	1,437	41,903	3.4%	1,354	46,038	2.9%	1,321	48,846	2.7%
White	3,142	38,159	8.2%	3,447	47,302	7.3%	2,888	50,006	5.8%	2,663	49,401	5.4%
Other	1,003	22,389	4.5%	1,187	29,196	4.1%	1,025	33,285	3.1%	1,075	35,663	3.0%
Unknown	1,628	17,311	9.4%	1,762	20,443	8.6%	1,444	20,304	7.1%	1,384	19,354	7.2%
Female	7,386	130,278	5.7%	7,523	153,335	4.9%	5,922	162,642	3.6%	5,499	165,515	3.3%
Male	5,499	97,073	5.7%	6,301	120,960	5.2%	5,650	130,316	4.3%	5,545	132,442	4.2%

<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.

<sup>\*\*</sup>Adults and Older Adults 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: Adults With At Least One SMHS Visit\*\* Alameda County as of March 22, 2018

		FY 13-14			FY 14-15			FY 15-16			FY 16-17	
	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetratio n Rate	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetratio n Rate	Adults and Older Adults with 5 or more SMHS Visits	Certified Fligible	Penetratio n Rate	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetratio n Rate
All	8,276	227,351	3.6%	8,145	274,295	3.0%	7,404	292,958	2.5%	7,079	297,957	2.4%
Adults 21-44	3,769	101,270	3.7%	3,777	131,210	2.9%	3,556	143,103	2.5%	3,482	145,868	2.4%
Adults 45-64	4,031	77,207	5.2%	3,848	91,038	4.2%	3,326	94,285	3.5%	3,066	93,365	3.3%
Adults 65+	476	48,874	1.0%	520	52,047	1.0%	522	55,570	0.9%	531	58,724	0.9%
Alaskan Native or American Inc	36	843	4.3%	37	967	3.8%	28	1,024	2.7%	31	991	3.1%
Asian or Pacific Islander	1,089	63,640	1.7%	1,046	76,877	1.4%	845	82,880	1.0%	785	84,638	0.9%
Black	2,501	51,888	4.8%		57,607	4.1%		59,421	3.7%	2,139	59,064	3.6%
Hispanic	841	33,121	2.5%	851	41,903	2.0%	807	46,038	1.8%	782	48,846	1.6%
White	2,092	38,159	5.5%	2,061	47,302	4.4%	1,863	50,006	3.7%	1,711	49,401	3.5%
Other	620	22,389	2.8%	682	29,196	2.3%	616	33,285	1.9%	649	35,663	1.8%
Unknown	1,097	17,311	6.3%	1,124	20,443	5.5%	1,048	20,304	5.2%	982	19,354	5.1%
Female	4,762	130,278	3.7%	4,450	153,335	2.9%	3,826	162,642	2.4%	3,590	165,515	2.2%
Male	3,514	97,073	3.6%	3,695	120,960	3.1%	3,578	130,316	2.7%	3,489	132,442	2.6%

<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.

<sup>\*\*</sup>Adults and Older Adultsthat 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 Y

### Utilization Report\*: Approved Specialty Mental Health Services for Adults - Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Fiscal Year\* Alameda County as of March 22, 2018

Fiscal Year	MC Total pproved	Case Management/ Brokerage (Minutes)	Mental Health 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 13-14	\$ 5,769	385	1,409	238	174	31	36	178	11	8	11	13	93	12
FY 14-15	\$ 6,297	346	1,334	249	186	36	0	185	8	10	11	14	107	13
FY 15-16	\$ 7,463	417	1,289	348	181	37	0	177	8	10	9	15	81	17
FY 16-17	\$ 7,748	445	1,324	356	193	29	0	173	6	11	8	15	83	7
MEAN	\$ 6,819	398	1,339	298	184	33	36	178	8	10	10	14	91	12

<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.

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

# Snapshot Report: Unique Count of Adults Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year Alameda County as of March 22, 2018

Category	Description (Please refer to the Measures Catalog for more detailed descriptions on all Performance Outcomes System measures.)
Arrivals	Adults that did not receive any SMHS within 3 months of their first date of service in the Fiscal Year.
<b>Service Continuance</b>	Adults 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	Adults 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 Adults met both the criteria for Arrivals and Exiting above for the fiscal year.
Service Continuance &	A distinct category in which Adults 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 %	Exiting	Arriving & Exiting %	Service Continuance (>= 2 YR) & Exiting Count	Service Continuance (>= 2 YR) and Exiting %	Total Count	Total %
FY 13-14	2,425	18.8%	2,638	20.5%	1,258	9.8%	1,346	10.4%	4,781	37.1%	437	3.4%	12,885	100%
FY 14-15	1,788	12.9%	2,157	15.6%	1,239	9.0%	2,253	16.3%	5,727	41.4%	660	4.8%	13,824	100%
FY 15-16	1,582	13.7%	2,001	17.3%	1,106	9.6%	1,534	13.3%	4,826	41.7%	523	4.5%	11,572	100%
FY 16-17	1,366	12.4%	1,438	13.0%	838	7.6%	1,593	14.4%	4,974	45.0%	835	7.6%	11,044	100%

### Time to Step Down Report: Adults Stepping Down in SMHS Services Post Inpatient Discharge\* Alameda County as of March 22, 2018

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	Percentage of Inpatient Discharges with Step Down Between 8 and 30 Days	Count of Inpatient Discharges with a Step Down > 30 Days from Discharge	Percentage of Inpatient Discharges with a Step Down > 30 Days from Discharge	Count of Inpatient Discharges	Percentage of Inpatient Discharges with No Step Down*	Minimum Number of Days between Discharge and Step Down	Number of Days between	Mean Time to Next Contact Post Inpatient Discharge (Days)	to Next Contact Post
FY 13-14	283	72.8%	32	8.2%	55	14.1%	19	4.9%	0	291	17.3	0
FY 14-15	341	71.3%	41	8.6%	58	12.1%	38	7.9%	0	358	19.5	0
FY 15-16	362	78.2%	28	6.0%	44	9.5%	29	6.3%	0	358	14.5	0
FY 16-17	400	84.0%	22	4.6%	23	4.8%	31	6.5%	0	280	7.1	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.