# 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.aspx.

#### 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-intime 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 21 or older 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 FY 16/17.

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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 Final 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.

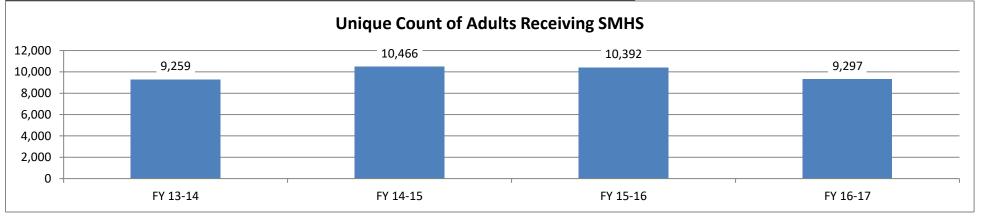
\*The **penetration** rates reported here were calculated using a different methodology than that used by the External Quality Review Organization (EQRO). The differences in methodology makes comparison between the POS penetration rates and the EQRO penetration rates not appropriate nor useful. The POS 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.

\*The **snapshot** report provides a point-in-time look at adults' movement through the SMHS system. The report uses five general categories to classify if an adult is entering, exiting, continuing services, or a combination of these categories (e.g., arriving and exiting). As of now, this report only classifies adults and their service usage for FY 12/13 through FY15/16. Eventually the snapshot data will be used along with measures of service effectiveness to identify whether adults 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: <a href="http://www.dhcs.ca.gov/provgovpart/pos/Pages/Performance-Outcomes-System-Reports-and-Measures-Catalog.aspx">http://www.dhcs.ca.gov/provgovpart/pos/Pages/Performance-Outcomes-System-Reports-and-Measures-Catalog.aspx</a>

\*The psychiatric emergency services/hospital data measured in the **time to step-down services** report relies solely on claims data from Short Doyle/Medi-Cal II. 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 on the county of fiscal responsibility for the patient who receives step-down services.

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	9,259		120,353	
FY 14-15	10,466	13.0%	152,839	27.0%
FY 15-16	10,392	-0.7%	169,777	11.1%
FY 16-17	9,297	-10.5%	177,061	4.3%
Compound Annual Growth Rate SFY**		0.1%		13.7%

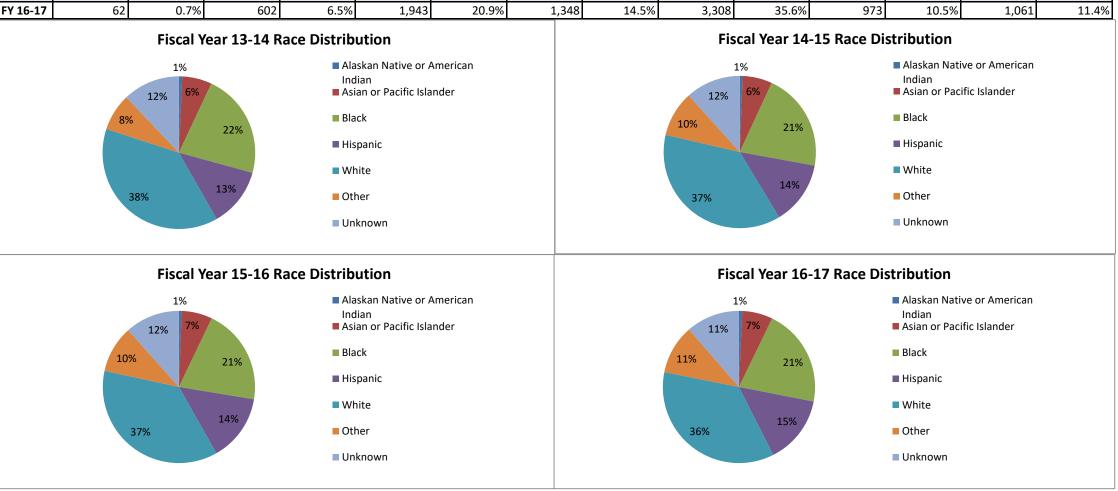


<sup>\*</sup>SMHS = Specialty Mental Health Services. See Measures Catalog for more detailed information.

<sup>\*\*</sup>SFY = State Fiscal Year which is July 1 through June 30.

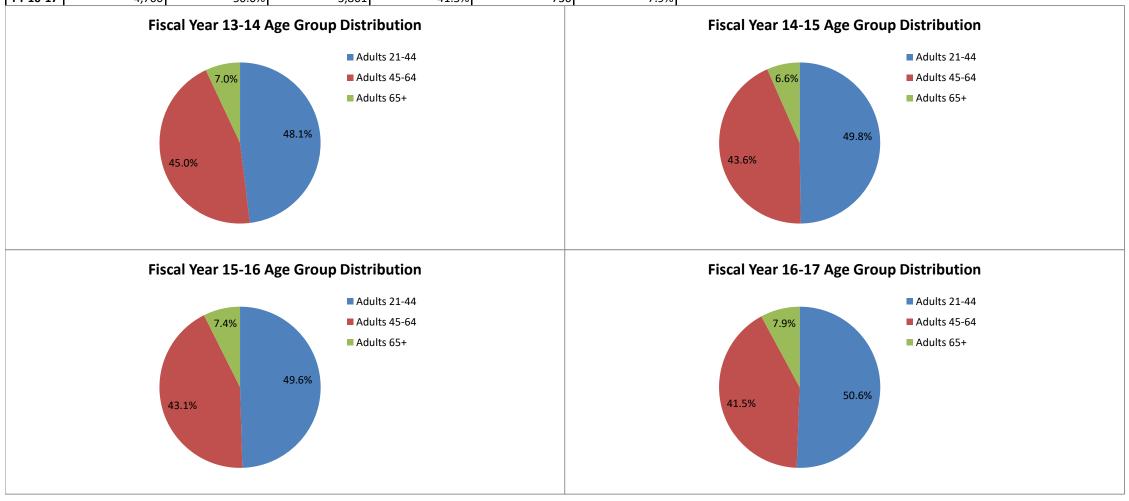
Contra Costa County as of March 22, 2018

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 13-14	61	0.7%	580	6.3%	2,064	22.3%	1,155	12.5%	3,549	38.3%	731	7.9%	1,119	12.1%
FY 14-15	61	0.6%	659	6.3%	2,198	21.0%	1,413	13.5%	3,902	37.3%	1,011	9.7%	1,222	11.7%
FY 15-16	60	0.6%	674	6.5%	2,131	20.5%	1,478	14.2%	3,806	36.6%	1,041	10.0%	1,202	11.6%
FY 16-17	62	0.7%	602	6.5%	1,943	20.9%	1,348	14.5%	3,308	35.6%	973	10.5%	1,061	11.4%
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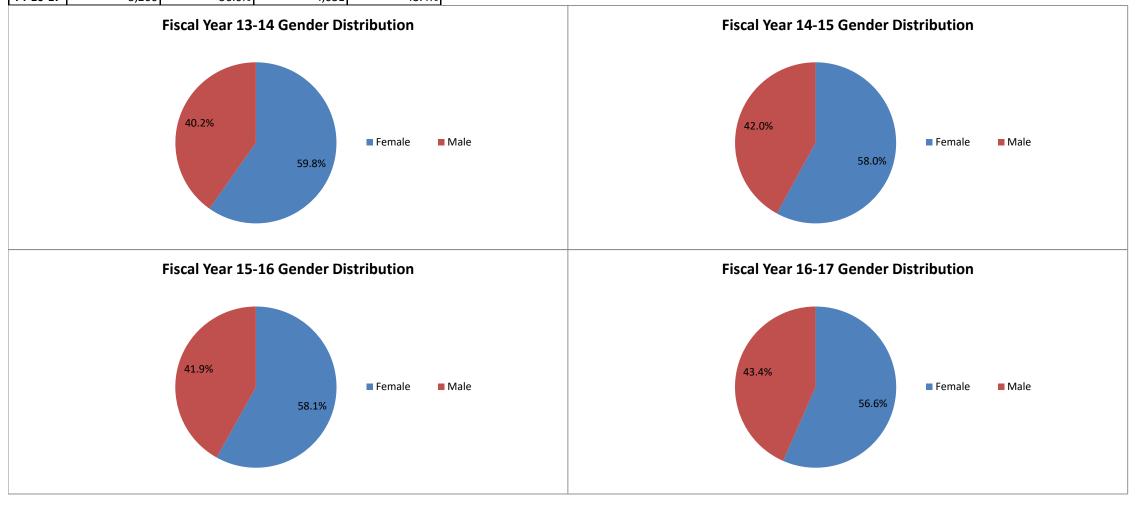


Please note: This report uses the Medi-Cal Eligibility Data System to obtain race/ethnicity data. CDSS uses Child Welfare Services/Case Management System to obtain race/ethnicity data. For more information, please refer to the Measures Catalog.

Fiscal Year	Adults 21-44 Count	Adults 21-44 %	Adults 45-64 Count	Adults 45-64 %	Adults 65+ Count	Adults 65+ %
FY 13-14	4,450	48.1%	4,164	45.0%	645	7.0%
FY 14-15	5,216	49.8%	4,563	43.6%	687	6.6%
FY 15-16	5,150	49.6%	4,478	43.1%	764	7.4%
FY 16-17	4,700	50.6%	3,861	41.5%	736	7.9%

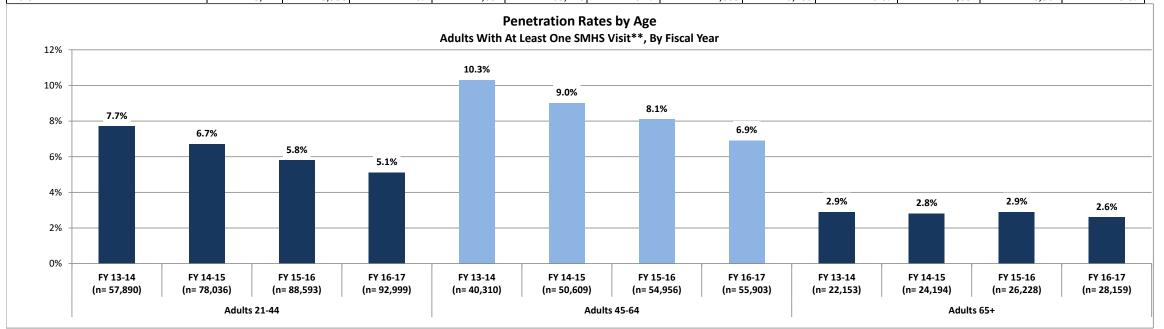


Fiscal Year	Female Count	Female %	Male Count	Male %
FY 13-14	5,535	59.8%	3,724	40.2%
FY 14-15	6,075	58.0%	4,391	42.0%
FY 15-16	6,033	58.1%	4,359	41.9%
FY 16-17	5.266	56.6%	4.031	43.4%



## Penetration Rates\* Report: Adults With At Least One SMHS Visit\*\*

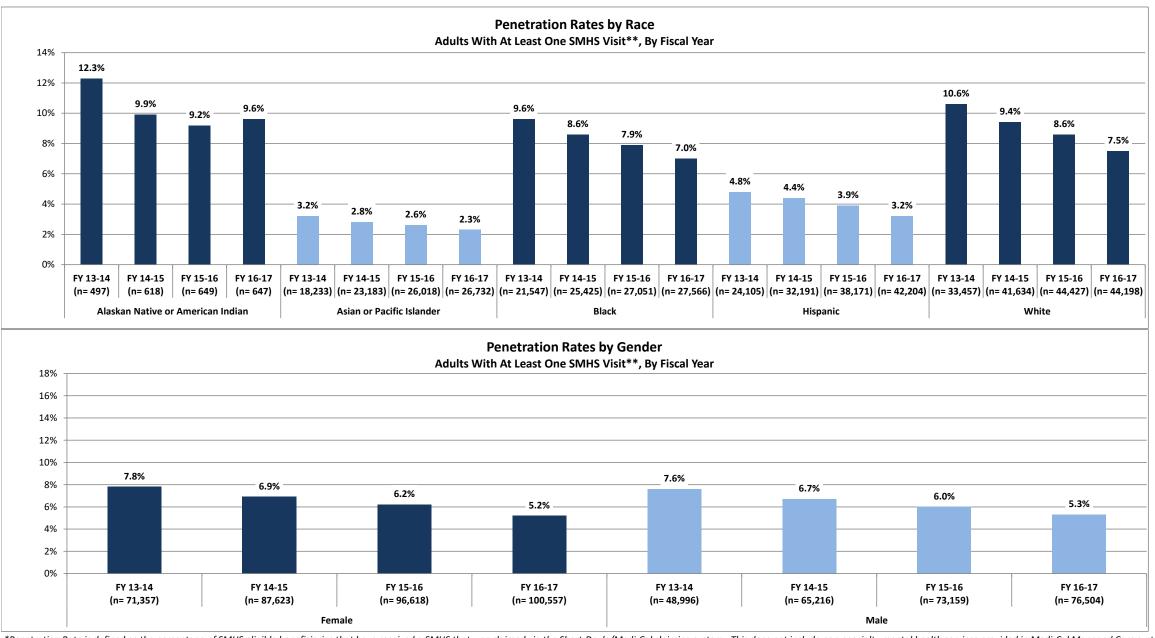
		FY 13-14			FY 14-15			FY 15-16			FY 16-17	
	Adults and	Certified		Adults and	Certified		Adults and	Certified		Adults and	Certified	
	Older Adults	Eligible	Penetration	Older Adults	Eligible Adults	Penetration	Older Adults	Eligible	Penetration	Older Adults	Eligible Adults	Penetration
	with 1 or	Adults and	Rate	with 1 or	and Older	Rate	with 1 or more	Adults and	Rate	with 1 or more	and Older	Rate
	more SMHS	<b>Older Adults</b>		more SMHS	Adults		SMHS Visits	Older Adults		SMHS Visits	Adults	
All	9,259	120,353	7.7%	10,466	152,839	6.8%	10,392	169,777	6.1%	9,297	177,061	5.3%
Adults 21-44	4,450	57,890	7.7%	5,216	78,036	6.7%	5,150	88,593	5.8%	4,700	92,999	5.1%
Adults 45-64	4,164	40,310	10.3%	4,563	50,609	9.0%	4,478	54,956	8.1%	3,861	55,903	6.9%
Adults 65+	645	22,153	2.9%	687	24,194	2.8%	764	26,228	2.9%	736	28,159	2.6%
Alaskan Native or American Indian	61	497	12.3%	61	618	9.9%	60	649	9.2%	62	647	9.6%
Asian or Pacific Islander	580	18,233	3.2%	659	23,183	2.8%	674	26,018	2.6%	602	26,732	2.3%
Black	2,064	21,547	9.6%	2,198	25,425	8.6%	2,131	27,051	7.9%	1,943	27,566	7.0%
Hispanic	1,155	24,105	4.8%	1,413	32,191	4.4%	1,478	38,171	3.9%	1,348	42,204	3.2%
White	3,549	33,457	10.6%	3,902	41,634	9.4%	3,806	44,427	8.6%	3,308	44,198	7.5%
Other	731	13,201	5.5%	1,011	18,141	5.6%	1,041	21,187	4.9%	973	23,567	4.1%
Unknown	1,119	9,313	12.0%	1,222	11,647	10.5%	1,202	12,274	9.8%	1,061	12,147	8.7%
Female	5,535	71,357	7.8%	6,075	87,623	6.9%	6,033	96,618	6.2%	5,266	100,557	5.2%
Male	3,724	48,996	7.6%	4,391	65,216	6.7%	4,359	73,159	6.0%	4,031	76,504	5.3%



<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. This does not include non-specialty mental health services provided in Medi-Cal Managed Care system.

\*\*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\*\*

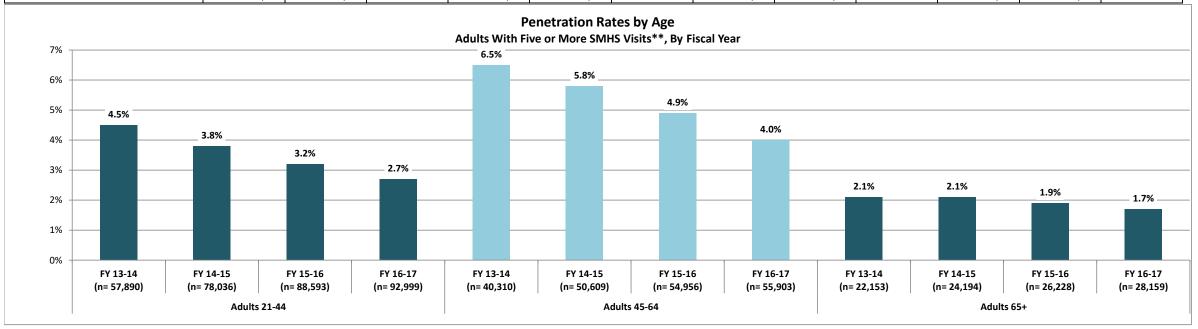


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\*\*Adults and Older Adults at least one SMHS that was claimed through the Short-Doyle/ Medi-Cal claiming system on at least one (1) day in the Fiscal Year.

## Penetration Rates\* Report: Adults with Five or More SMHS Visits\*\*

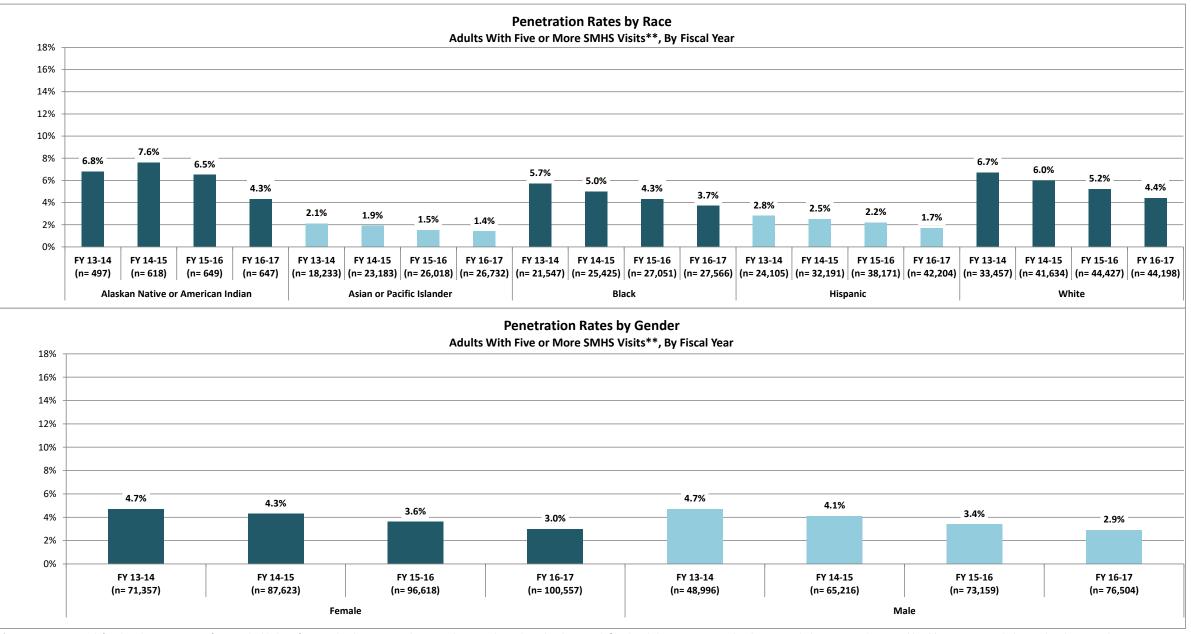
		FY 13-14			FY 14-15			FY 15-16			FY 16-17	
	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate
All	5,682	120,353	4.7%	6,406	152,839	4.2%	6,029	169,777	3.6%	5,191	177,061	2.9%
Adults 21-44	2,604	57,890	4.5%	2,950	78,036	3.8%	2,819	88,593	3.2%	2,497	92,999	2.7%
Adults 45-64	2,615	40,310	6.5%	2,957	50,609	5.8%	2,713	54,956	4.9%	2,228	55,903	4.0%
Adults 65+	463	22,153	2.1%	499	24,194	2.1%	497	26,228	1.9%	466	28,159	1.7%
Alaskan Native or American Indian	34	497	6.8%	47	618	7.6%	42	649	6.5%	28	647	4.3%
Asian or Pacific Islander	391	18,233	2.1%	436	23,183	1.9%	392	26,018	1.5%	363	26,732	1.4%
Black	1,221	21,547	5.7%	1,259	25,425	5.0%	1,161	27,051	4.3%	1,008	27,566	3.7%
Hispanic	673	24,105	2.8%	815	32,191	2.5%	834	38,171	2.2%	710	42,204	1.7%
White	2,228	33,457	6.7%	2,489	41,634	6.0%	2,296	44,427	5.2%	1,946	44,198	4.4%
Other	424	13,201	3.2%	545	18,141	3.0%	545	21,187	2.6%	503	23,567	2.1%
Unknown	711	9,313	7.6%	815	11,647	7.0%	759	12,274	6.2%	633	12,147	5.2%
Female	3,389	71,357	4.7%	3,745	87,623	4.3%	3,520	96,618	3.6%	2,975	100,557	3.0%
Male	2,293	48,996	4.7%	2,661	65,216	4.1%	2,509	73,159	3.4%	2,216	76,504	2.9%



<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. This does not include non-specialty mental health services provided in Medi-Cal Managed Care 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 Year.

#### Penetration Rates\* Report: Adults with Five or More SMHS Visits\*\*



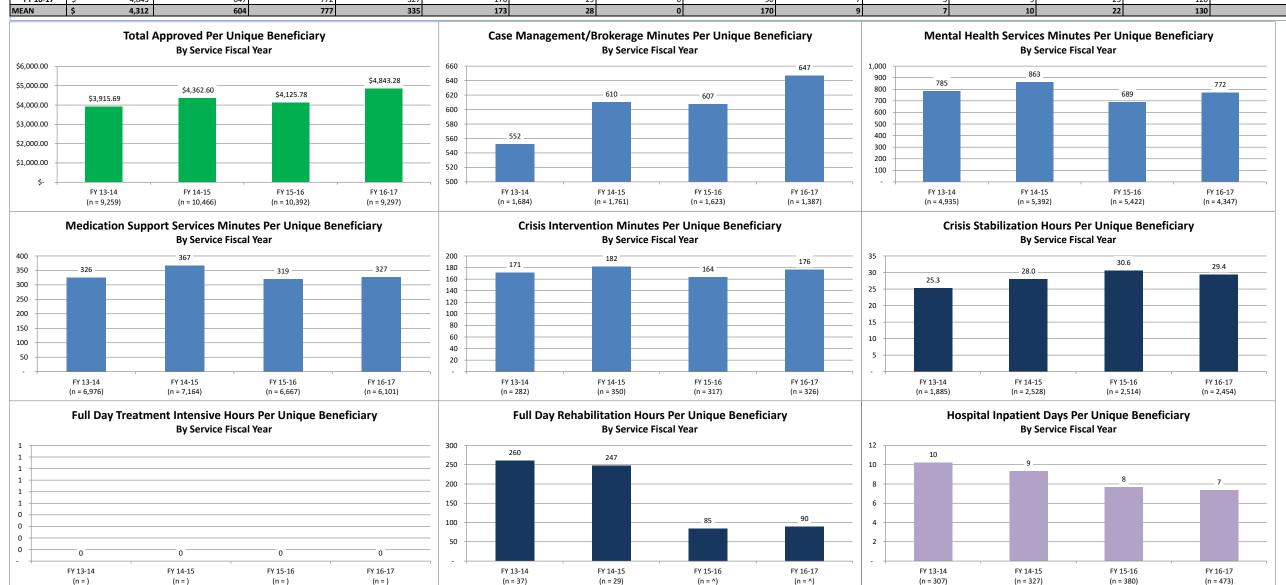
<sup>\*</sup>Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in Medi-Cal Managed Care system.

<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 Year.

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

Contra Costa County as of March 22, 2018

Fiscal Year	SDMC Total Approved	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	\$ 3,916	552	785	326	171	25	0	260	10	5	9	20	126	16
FY 14-15	\$ 4,363	610	863	367	182	28	0	247	9	13	10	20	142	13
FY 15-16	\$ 4,126	607	689	319	164	31	0	85	8	7	11	24	126	6
FY 16-17	\$ 4,843	647	772	327	176	29	0	90	7	5	9	25	126	10
MEAN	\$ 4,312	604	777	335	173	28	0	170	9	7	10	22	130	11



<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.

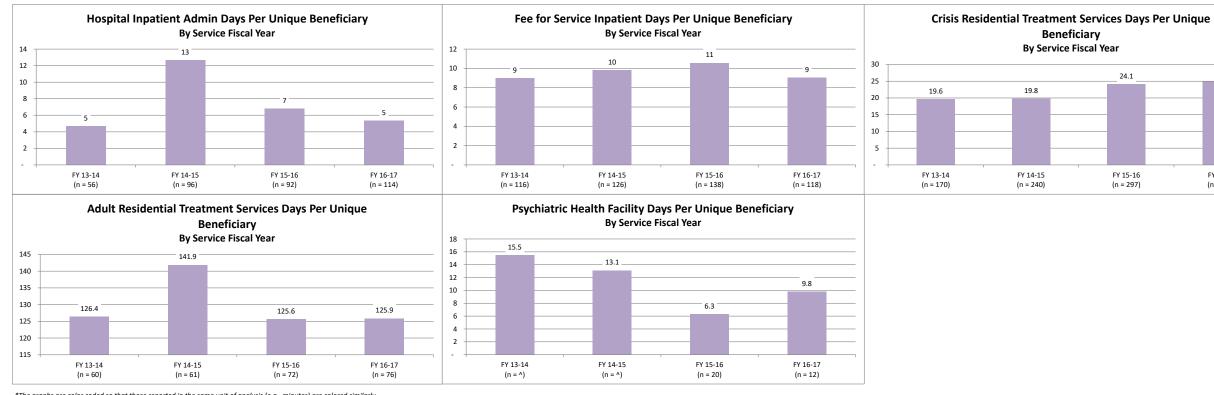
#### **Utilization Report\*: Approved Specialty Mental Health Services for Adults** Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Fiscal Year\*

Contra Costa County as of March 22, 2018

24.9

FY 16-17

(n = 309)



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

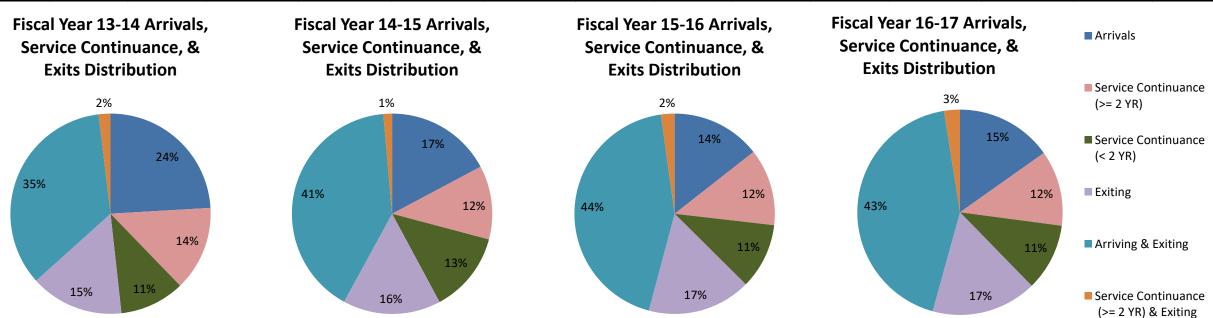
Please note that (n) values listed at the bottom of each bar graph represent the actual number of children/youth that received the SMHS represented in their respective graph by Fiscal Year.

<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

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.
Service Continuance	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.
Arriving & Exiting	A distinct category in which Adults met both the criteria for Arrivals and Exiting above for the fiscal year.
Service Continuance &	
Exiting	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	Continuance	Service Continuance (<2 YR) Count	Service Continuance (< 2 YR) %	Exiting Count	Exiting %	Arriving & Exiting Count	Arriving & Exiting %		(>= 2 YR) and		Total %
FY 13-14	2,234	24.1%	1,264	13.7%	968	10.5%	1,396	15.1%	3,224	34.8%	173	1.9%	9,259	100%
FY 14-15	1,805	17.2%	1,249	11.9%	1,358	13.0%	1,658	15.8%	4,246	40.6%	150	1.4%	10,466	100%
FY 15-16	1,497	14.4%	1,292	12.4%	1,106	10.6%	1,740	16.7%	4,531	43.6%	226	2.2%	10,392	100%
FY 16-17	1,416	15.2%	1,106	11.9%	987	10.6%	1,539	16.6%	4,020	43.2%	229	2.5%	9,297	100%



## Time to Step Down Report: Adults Stepping Down in SMHS Services Post Inpatient Discharge\*

Service FY	Count of Inpatient Discharges with Step Down within 7 Days of Discharge	Sten Down within	Rotwoon X and 30	Discharges with	Step Down > 30	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 13-14	105	66.9%	٨	۸	23	14.6%	۸	۸	0	188	17.0	2
FY 14-15	134	68.4%	22	11.2%	27	13.8%	13	6.6%	0	332	22.6	1
FY 15-16	147	73.5%	13	6.5%	24	12.0%	16	8.0%	0	249	11.9	0
FY 16-17	128	76.6%	٨	۸	۸	۸	19	11.4%	0	346	11.4	0

	Median Time Between Inpatient Service in D	•	n	Mea	n Time Between Inpat Servic	ient Discharge and S e in Days	itep Down
3			25		22.6		
2	2		20	17.0			
			15			11.9	11.4
	1		10				
			5				
)		0	0				
	FY 13-14 FY 14-15	CHARTS NOT PROI	DUCED DU	JE TO ŠM	ALL CELL SIZES.	FY 15-16	FY 16-17
		CHARTS NOT PROD ge of Discharges by Time					Ł. 10-1/
				oatient Disc			FY 16-17
00%	Percenta	ge of Discharges by Time Within 7 Days 6.6%	e Between Inp	oatient Disc	harge and Step Down S Step Down 8.0%	Service	
	Percenta	ge of Discharges by Time Within 7 Days	e Between Inp	oatient Disc	harge and Step Down S	Service	.4% ^
80%	Percenta	ge of Discharges by Time Within 7 Days 6.6% 13.8%	e Between Inp	oatient Disc	harge and Step Down S  Step Down  8.0% 12.0%	Service	
30% 50%	Percenta	ge of Discharges by Time Within 7 Days 6.6% 13.8%	e Between Inp	oatient Disc	harge and Step Down S  Step Down  8.0% 12.0%	Service	
80% 60% 40%	Percenta	ge of Discharges by Time Within 7 Days  6.6% 13.8% 11.2%	e Between Inp	oatient Disc	harge and Step Down S Step Down  8.0% 12.0% 6.5%	Service	.4% ^
80% 60% 40%	Percenta  ^ 14.6% ^ 66.9%	ge of Discharges by Time  Within 7 Days  6.6% 13.8% 11.2%  68.4%	e Between Inp	oatient Disc	harge and Step Down S  Step Down  8.0% 12.0% 6.5%  73.5%	Service	.4% ^ .6%
100% 80% 60% 40% 20%	Percenta	ge of Discharges by Time Within 7 Days  6.6% 13.8% 11.2%	Within 8 - 30 Days	31 Days + No	harge and Step Down S Step Down  8.0% 12.0% 6.5%	Service  11  76	.4% ^

<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. 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.

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