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.

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

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.

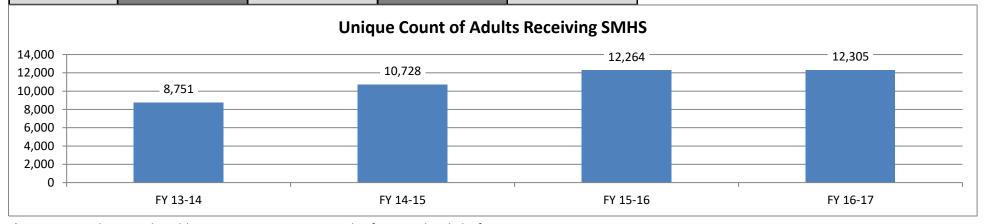
*The **penetration** rates reported here were calculated using a different methodology than that used by the External Quality Review Organization (EQRO). The differences in methodology makes comparison between the POS penetration rates and the EQRO penetration rates not appropriate nor useful. The POS 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: http://www.dhcs.ca.gov/provgovpart/pos/Pages/Performance-Outcomes-System-Reports-and-Measures-Catalog.aspx

*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	8,751		196,287	
FY 14-15	10,728	22.6%	240,909	22.7%
FY 15-16	12,264	14.3%	269,780	12.0%
FY 16-17	12,305	0.3%	283,025	4.9%
Compound Annual Growth Rate SFY**		12.0%		13.0%

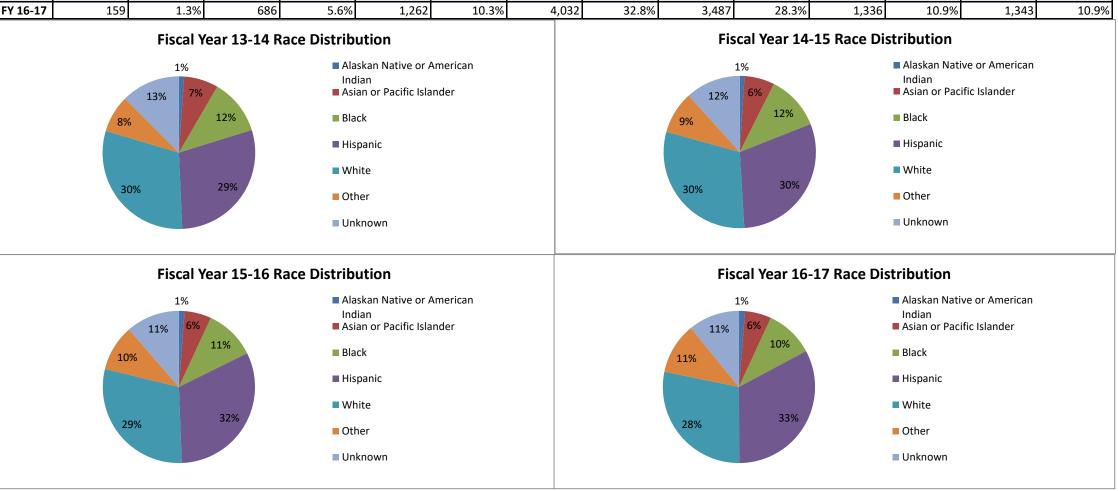


^{*}SMHS = Specialty Mental Health Services. See Measures Catalog for more detailed information.

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

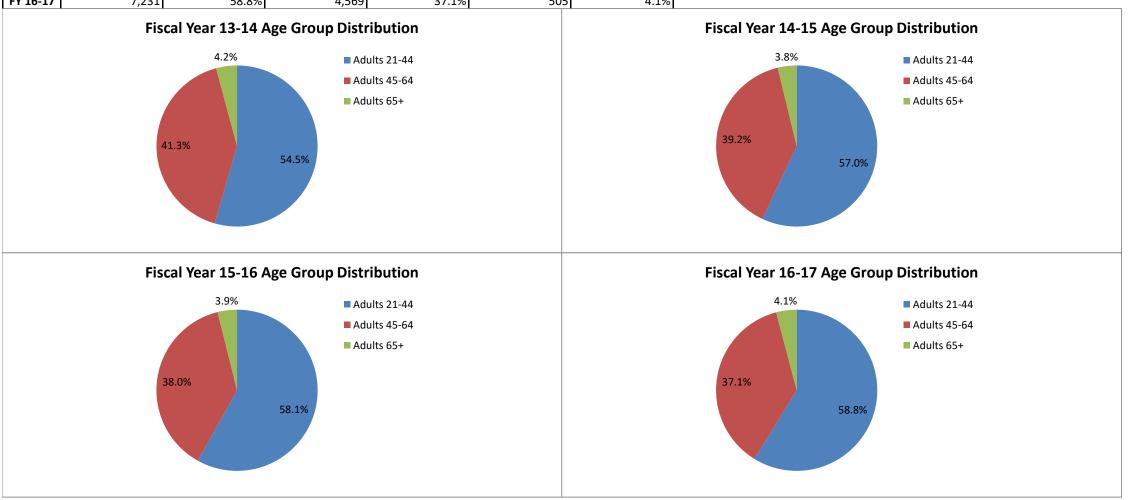
Fresno County as of March 22, 2018

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	93	1.1%	641	7.3%	1,034	11.8%	2,545	29.1%	2,653	30.3%	689	7.9%	1,096	12.5%
FY 14-15	112	1.0%	690	6.4%	1,242	11.6%	3,223	30.0%	3,241	30.2%	966	9.0%	1,254	11.7%
FY 15-16	144	1.2%	699	5.7%	1,329	10.8%	3,882	31.7%	3,604	29.4%	1,205	9.8%	1,401	11.4%
FY 16-17	159	1.3%	686	5.6%	1,262	10.3%	4,032	32.8%	3,487	28.3%	1,336	10.9%	1,343	10.9%
		Fiscal Y	⁄ear 13-14 R	Race Distrib	ution				Fis	cal Year 14	-15 Race Di	stribution		

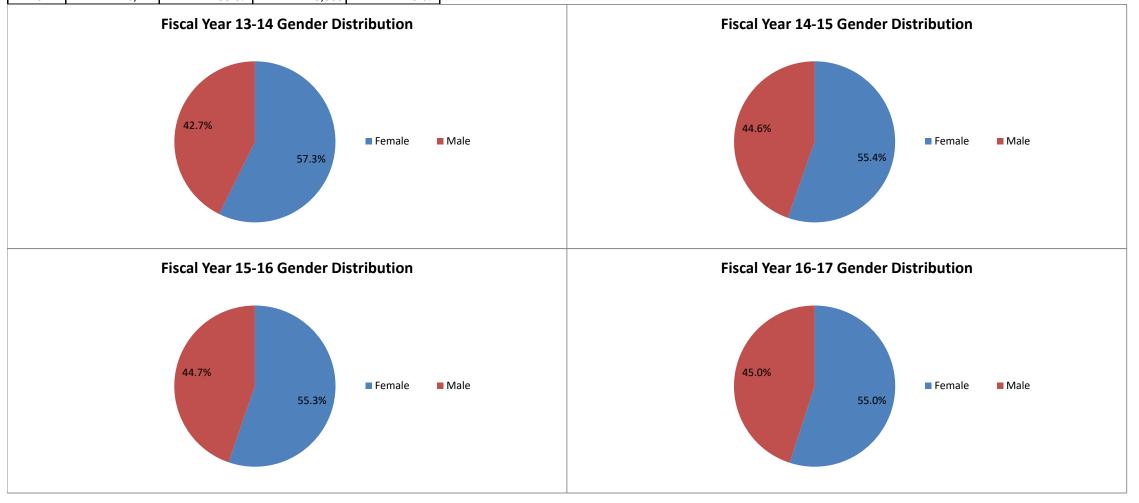


Please note: This report uses the Medi-Cal Eligibility Data System to obtain race/ethnicity data. CDSS uses Child Welfare Services/Case Management System to obtain race/ethnicity data. For more information, please refer to the Measures Catalog.

Fiscal Year	Adults 21-44 Count	Adults 21-44 %	Adults 45-64 Count	Adults 45-64 %	Adults 65+ Count	Adults 65+ %
FY 13-14	4,768	54.5%	3,615	41.3%	368	4.2%
FY 14-15	6,111	57.0%	4,204	39.2%	413	3.8%
FY 15-16	7,127	58.1%	4,660	38.0%	477	3.9%
FY 16-17	7.231	58.8%	4.569	37.1%	505	4.1%

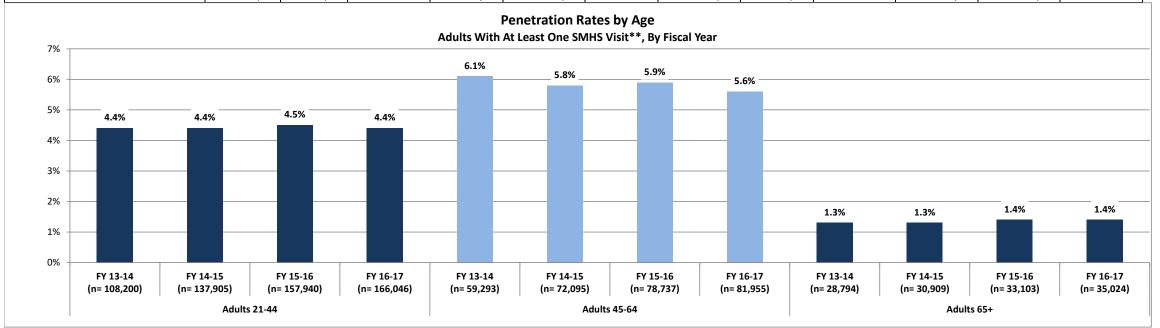


Fiscal Year	Female Count	Female %	Male Count	Male %
FY 13-14	5,014	57.3%	3,737	42.7%
FY 14-15	5,939	55.4%	4,789	44.6%
FY 15-16	6,777	55.3%	5,487	44.7%
FY 16-17	6,772	55.0%	5,533	45.0%



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

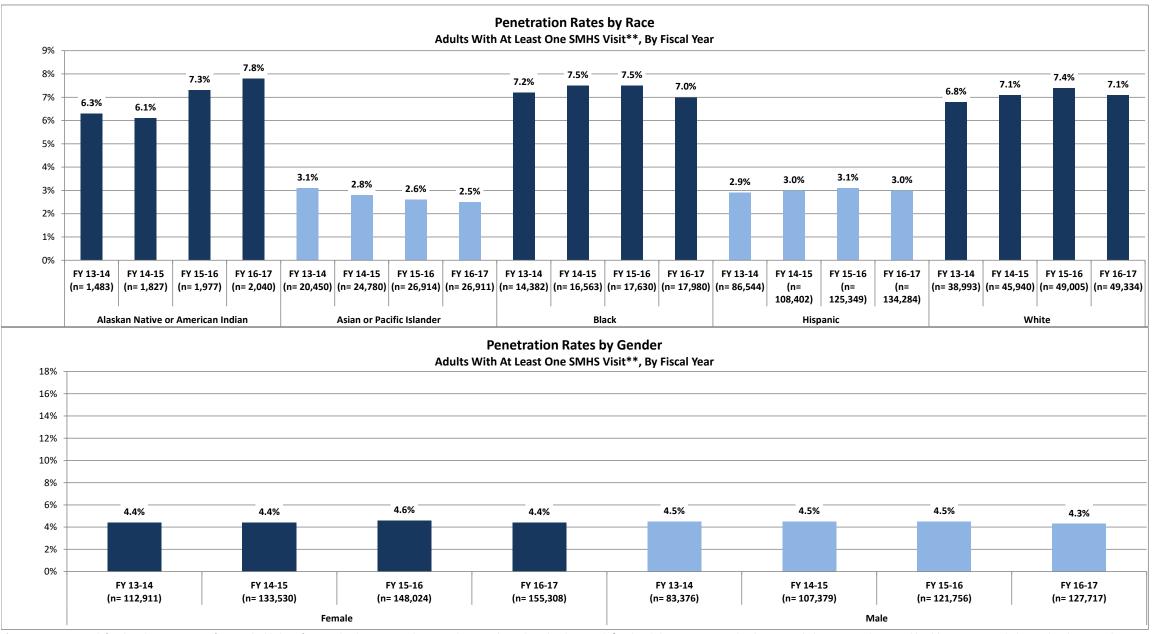
		FY 13-14			FY 14-15			FY 15-16		FY 16-17			
	Adults and	Certified		Adults and	Certified		Adults and	Certified		Adults and	Certified		
	Older Adults	Eligible	Penetration	Older Adults	Eligible Adults	Penetration	Older Adults	Eligible	Penetration	Older Adults	Eligible Adults	Penetration	
	with 1 or	Adults and	Rate	with 1 or	and Older	Rate	with 1 or more	Adults and	Rate	with 1 or more	and Older	Rate	
	more SMHS	Older Adults		more SMHS	Adults		SMHS Visits	Older Adults		SMHS Visits	Adults		
All	8,751	196,287	4.5%	10,728	240,909	4.5%	12,264	269,780	4.5%	12,305	283,025	4.3%	
Adults 21-44	4,768	108,200	4.4%	6,111	137,905	4.4%	7,127	157,940	4.5%	7,231	166,046	4.4%	
Adults 45-64	3,615	59,293	6.1%	4,204	72,095	5.8%	4,660	78,737	5.9%	4,569	81,955	5.6%	
Adults 65+	368	28,794	1.3%	413	30,909	1.3%	477	33,103	1.4%	505	35,024	1.4%	
Alaskan Native or American Indian	93	1,483	6.3%	112	1,827	6.1%	144	1,977	7.3%	159	2,040	7.8%	
Asian or Pacific Islander	641	20,450	3.1%	690	24,780	2.8%	699	26,914	2.6%	686	26,911	2.5%	
Black	1,034	14,382	7.2%	1,242	16,563	7.5%	1,329	17,630	7.5%	1,262	17,980	7.0%	
Hispanic	2,545	86,544	2.9%	3,223	108,402	3.0%	3,882	125,349	3.1%	4,032	134,284	3.0%	
White	2,653	38,993	6.8%	3,241	45,940	7.1%	3,604	49,005	7.4%	3,487	49,334	7.1%	
Other	689	18,905	3.6%	966	25,064	3.9%	1,205	29,191	4.1%	1,336	32,042	4.2%	
Unknown	1,096	15,530	7.1%	1,254	18,333	6.8%	1,401	19,714	7.1%	1,343	20,434	6.6%	
Female	5,014	112,911	4.4%	5,939	133,530	4.4%	6,777	148,024	4.6%	6,772	155,308	4.4%	
Male	3,737	83,376	4.5%	4,789	107,379	4.5%	5,487	121,756	4.5%	5,533	127,717	4.3%	



^{*}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**

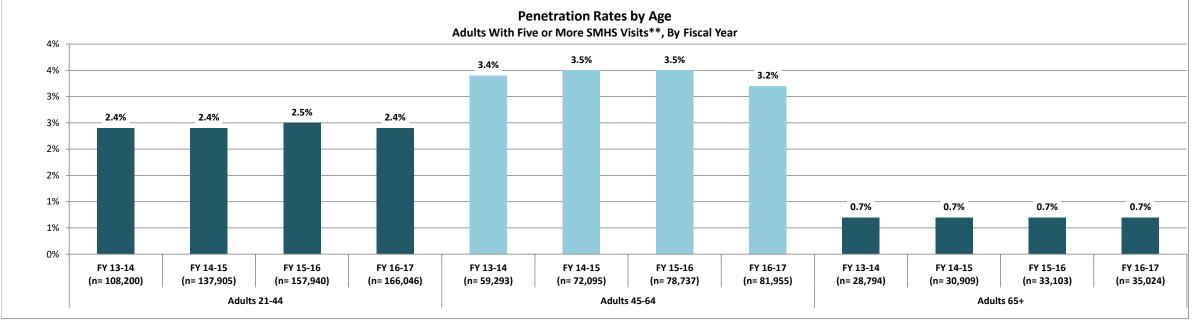


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^{**}Adults and Older Adults at least one SMHS that was claimed through the Short-Doyle/ Medi-Cal claiming system on at least one (1) day in the Fiscal Year.

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

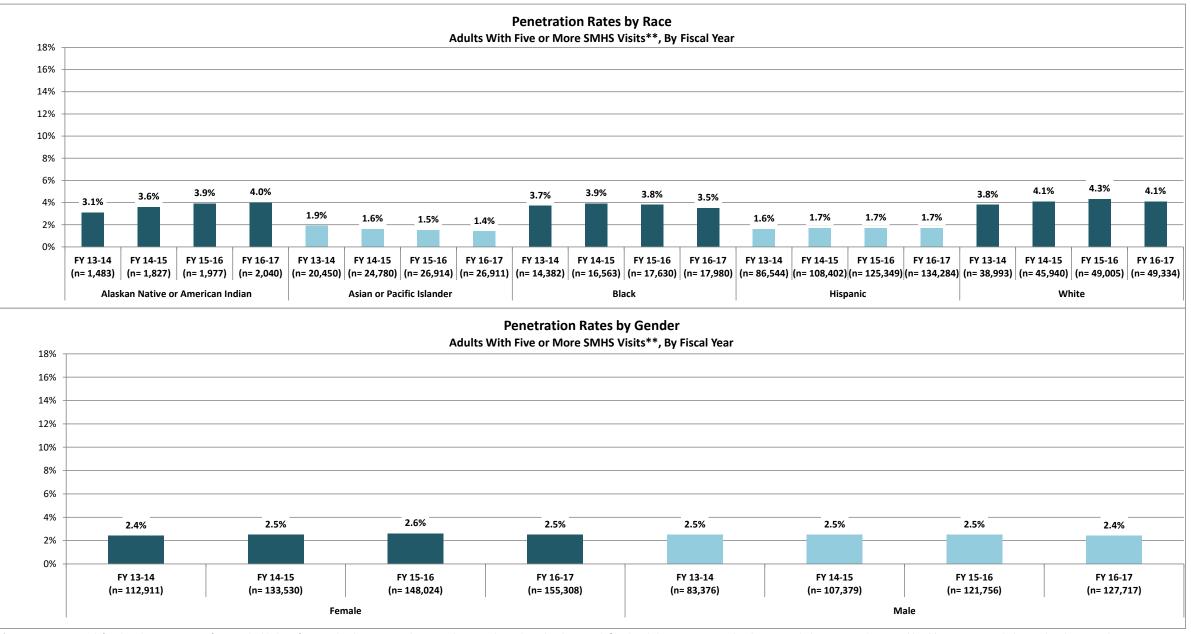
		FY 13-14			FY 14-15			FY 15-16		FY 16-17			
	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate	Adults and Older Adults with 5 or 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	4,792	196,287	2.4%	6,067	240,909	2.5%	6,957	269,780	2.6%	6,890	283,025	2.4%	
Adults 21-44	2,549	108,200	2.4%	3,342	137,905	2.4%	3,942	157,940	2.5%	4,009	166,046	2.4%	
Adults 45-64	2,032	59,293	3.4%	2,496	72,095	3.5%	2,777	78,737	3.5%	2,642	81,955	3.2%	
Adults 65+	211	28,794	0.7%	229	30,909	0.7%	238	33,103	0.7%	239	35,024	0.7%	
Alaskan Native or American Indian	46	1,483	3.1%	65	1,827	3.6%	77	1,977	3.9%	82	2,040	4.0%	
Asian or Pacific Islander	387	20,450	1.9%	387	24,780	1.6%	401	26,914	1.5%	372	26,911	1.4%	
Black	533	14,382	3.7%	639	16,563	3.9%	675	17,630	3.8%	636	17,980	3.5%	
Hispanic	1,354	86,544	1.6%	1,800	108,402	1.7%	2,158	125,349	1.7%	2,240	134,284	1.7%	
White	1,490	38,993	3.8%	1,893	45,940	4.1%	2,128	49,005	4.3%	2,015	49,334	4.1%	
Other	361	18,905	1.9%	510	25,064	2.0%	666	29,191	2.3%	744	32,042	2.3%	
Unknown	621	15,530	4.0%	773	18,333	4.2%	852	19,714	4.3%	801	20,434	3.9%	
Female	2,747	112,911	2.4%	3,388	133,530	2.5%	3,922	148,024	2.6%	3,877	155,308	2.5%	
Male	2,045	83,376	2.5%	2,679	107,379	2.5%	3,035	121,756	2.5%	3,013	127,717	2.4%	



^{*}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 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**



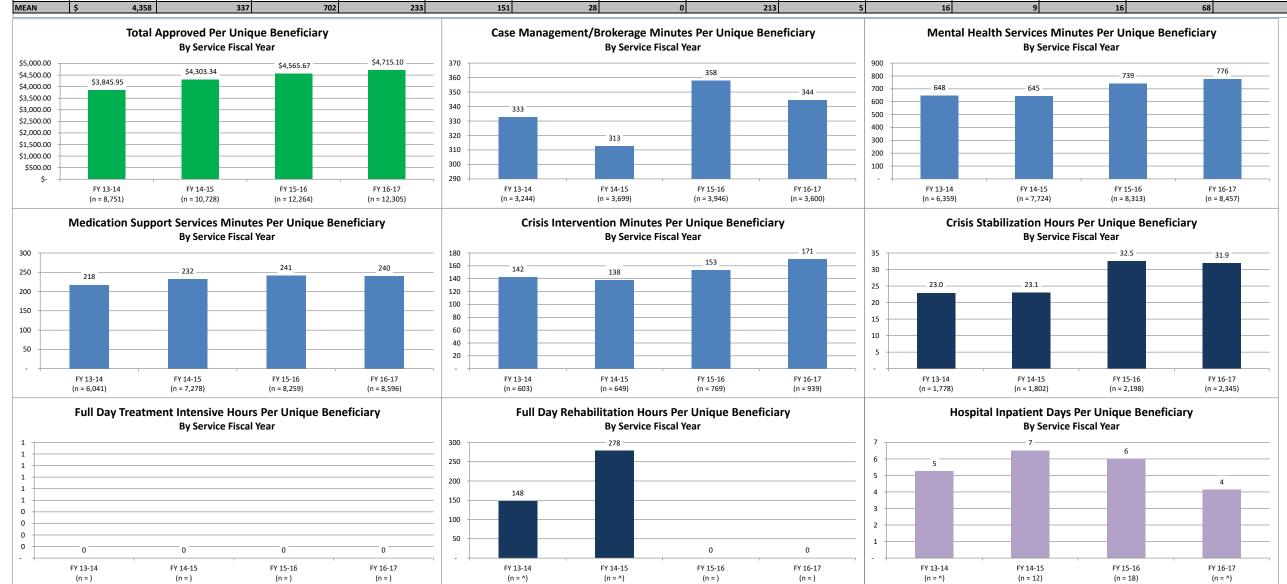
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^{**}Adults and Older Adultsthat have received at least five SMHS that were claimed through the Short-Doyle/ Medi-Cal claiming system on at least five (5) or more different days in the Fiscal Year.

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

Fresno 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)	
FY 13-14	\$ 3,846	333	648	218	142	23	0	148	5	4	9	16	50	31
FY 14-15	\$ 4,303	313	645	232	138	23	0	278	7	43	9	12	150	20
FY 15-16	\$ 4,566	358	739	241	153	33	0	0	6	0	10	18	0	15
FY 16-17	\$ 4,715	344	776	240	171	32	0	0	4	1	10	16	4	14
MEAN	\$ 4,358	337	702	233	151	28	0	213	5	16	9	16	68	20



^{*}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.

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

Fresno County as of March 22, 2018

Crisis Residential Treatment Services Days Per Unique

Beneficiary By Service Fiscal Year

FY 15-16

(n = 11)

12.4

FY 14-15

(n = ^)

15.9

FY 16-17

(n = 13)

20 18

16

14

12

8

4

16.0

FY 13-14

(n = ^)



^{*}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.

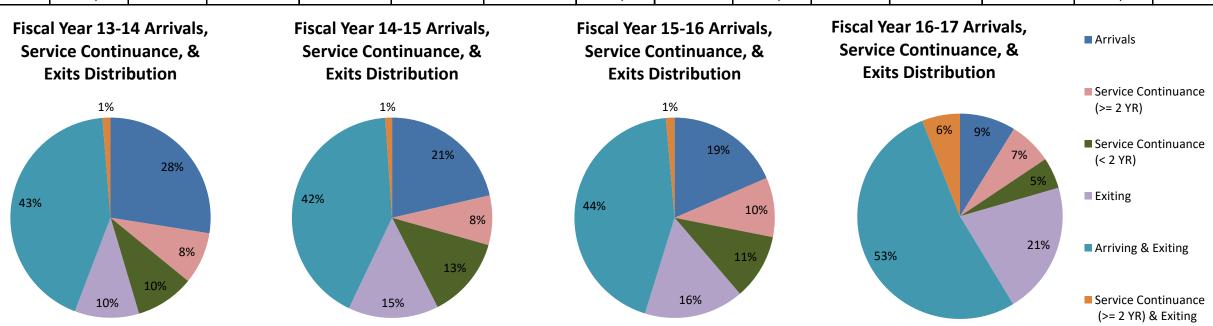
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[^] Data has been suppressed to protect patient privacy.

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.

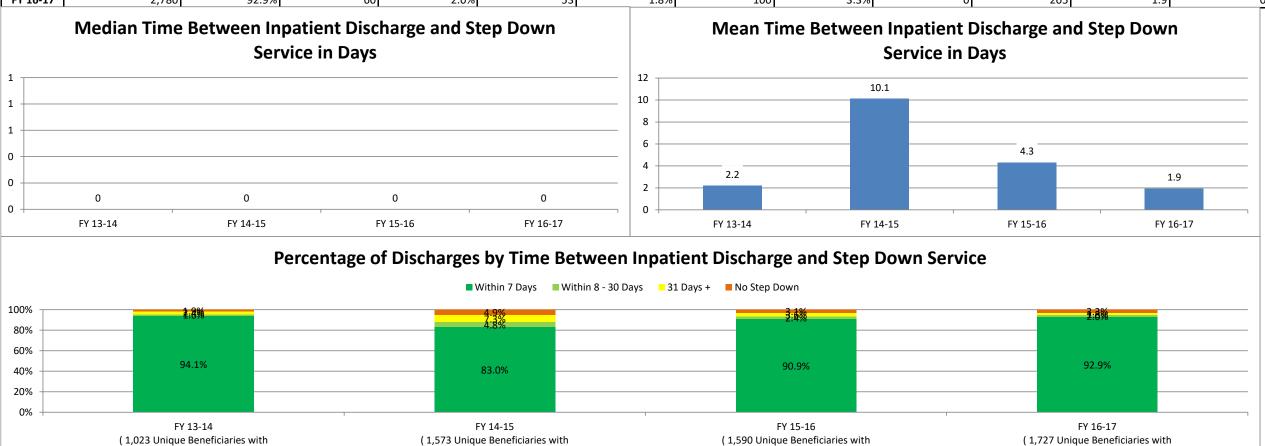
Service Fiscal Year	Arrivals Count	Arrivals %	Service Continuance (>= 2 YR) Count	Continuance	Service Continuance (<2 YR) Count		Exiting Count	Exiting %	Arriving & Exiting Count	Arriving & Exiting %		Service Continuance (>= 2 YR) and Exiting %	Total Count	Total %
FY 13-14	2,410	27.5%	733	8.4%	831	9.5%	907	10.4%	3,753	42.9%	117	1.3%	8,751	100%
FY 14-15	2,300	21.4%	855	8.0%	1,405	13.1%	1,564	14.6%	4,481	41.8%	123	1.1%	10,728	100%
FY 15-16	2,274	18.5%	1,172	9.6%	1,298	10.6%	1,977	16.1%	5,370	43.8%	173	1.4%	12,264	100%
FY 16-17	1,079	8.8%	838	6.8%	604	4.9%	2,565	20.8%	6,476	52.6%	743	6.0%	12,305	100%



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

Fresno County as of March 22, 2018

Service FY	Count of Inpatient Discharges with Step Down within 7 Days of Discharge	Step Down within	Step Down Between 8 and 30	Inpatient Discharges with Step Down	Step Down > 30 Days from	Inpatient Discharges with a	Discharges with		Minimum Number of Days between Discharge and Step Down	Number of Days	Mean Time to Next Contact Post Inpatient Discharge (Days)	Median Time to Next Contact Post Inpatient Discharge (Days)
FY 13-14	1,670	94.1%	28	1.6%	43	2.4%	33	1.9%	0	205	2.2	0
FY 14-15	2,383	83.0%	138	4.8%	209	7.3%	141	4.9%	0	364	10.1	0
FY 15-16	2,500	90.9%	66	2.4%	100	3.6%	84	3.1%	0	356	4.3	0
FY 16-17	2,780	92.9%	60	2.0%	53	1.8%	100	3.3%	0	205	1.9	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.

2,750 Total Inpatient Discharges)

2,993 Total Inpatient Discharges)

2,871 Total Inpatient Discharges)

1,774 Total Inpatient Discharges)