

Performance Outcomes Adult Specialty Mental Health Services Report

Report Date September, 2016

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-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) 11/12, 12/13, 13/14, and 14/15.

Definitions

***Population** - Beneficiaries with approved services adjudicated through the Short Doyle/Medi-Cal II claiming system that were:

- Age 22 or older 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 July 1st of the Fiscal Year.

Data Sources -

- Short-Doyle/Medi-Cal II (SD/MC II) claims with dates of service in FY 11/12 through FY 14/15.
- Medi-Cal Eligibility Data System (MEDS) data from the Management Information System/Decision Support System (MIS/DSS) FY 11/12 through 14/15.

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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 FY14/15. 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 the hospital from which the patient is discharged and receives step-down services.

Please contact cmhpos@dhcs.ca.gov for any questions regarding this report.

**Demographics Report: Unique Count of Adults Receiving SMHS by Fiscal Year
Alameda County**

SFY	Unique Count Receiving SMHS*	Year-Over-Year Percentage Change	Unique Count of Medi-Cal Eligibles	Year-Over-Year Percentage Change
FY 11-12	11,876		135,517	
FY 12-13	11,577	-2.5%	138,325	2.1%
FY 13-14	12,744	10.1%	223,753	61.8%
FY 14-15	13,633	7.0%	270,306	20.8%
Compound Annual Growth Rate SFY**		4.7%		25.9%

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

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

The Measures Catalog may be found at: http://www.dhcs.ca.gov/services/MH/Documents/MedCCC/Library/POSMeasuresCatalog_Sept15Reporting_Final_1.11.15.pdf

**Demographics Report: Unique Count of Adults Receiving SMHS by Fiscal Year
Alameda County**

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 11-12	54	0.5%	1,687	14.2%	4,276	36.0%	1,174	9.9%	3,223	27.1%	638	5.4%	824	6.9%
FY 12-13	62	0.5%	1,552	13.4%	4,125	35.6%	1,179	10.2%	2,998	25.9%	638	5.5%	1,023	8.8%
FY 13-14	69	0.5%	1,635	12.8%	4,404	34.6%	1,306	10.2%	3,320	26.1%	860	6.7%	1,150	9.0%
FY 14-15	66	0.5%	1,711	12.6%	4,516	33.1%	1,380	10.1%	3,538	26.0%	1,133	8.3%	1,289	9.5%

**FY 13-14 claims are estimated to be 95% complete as of January 1, 2015.*

**Demographics Report: Unique Count of Adults Receiving SMHS by Fiscal Year
Alameda County**

Fiscal Year	Adults 21-44 Count	Adults 21-44 %	Adults 45-64 Count	Adults 45-64 %	Adults 65+ Count	Adults 65+ %
FY 11-12	5,160	43.4%	5,995	50.5%	721	6.1%
FY 12-13	4,988	43.1%	5,840	50.4%	749	6.5%
FY 13-14	5,827	45.7%	6,211	48.7%	706	5.5%
FY 14-15	6,518	47.8%	6,375	46.8%	740	5.4%

**FY 13-14 claims are estimated to be 95% complete as of January 1, 2015.*

**Demographics Report: Unique Count of Adults Receiving SMHS by Fiscal Year
Alameda County**

Fiscal Year	Female Count	Female %	Male Count	Male %
FY 11-12	7,194	60.6%	4,682	39.4%
FY 12-13	6,945	60.0%	4,632	40.0%
FY 13-14	7,316	57.4%	5,428	42.6%
FY 14-15	7,461	54.7%	6,172	45.3%

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

	FY 11-12			FY 12-13			FY 13-14			FY 14-15		
	Adults with 1 or more SMHS Visits	Certified Eligible Adults	Penetration Rate	Adults with 1 or more SMHS Visits	Certified Eligible Adults	Penetration Rate	Adults with 1 or more SMHS Visits	Certified Eligible Adults	Penetration Rate	Adults with 1 or more SMHS Visits	Certified Eligible Adults	Penetration Rate
All	11,876	135,517	8.8%	11,577	138,325	8.4%	12,744	223,753	5.7%	13,633	270,306	5.0%
Adults 21-44	5,160	51,232	10.1%	4,988	52,733	9.5%	5,827	98,070	5.9%	6,518	127,762	5.1%
Adults 45-64	5,995	38,528	15.6%	5,840	38,700	15.1%	6,211	77,181	8.0%	6,375	91,051	7.0%
Adults 65+	721	45,757	1.6%	749	46,892	1.6%	706	48,502	1.5%	740	51,493	1.4%
Alaskan Native or American Indian	54	525	10.3%	62	524	11.8%	69	872	7.9%	66	996	6.6%
Asian or Pacific Islander	1,687	39,754	4.2%	1,552	40,614	3.8%	1,635	67,058	2.4%	1,711	82,489	2.1%
Black	4,276	35,599	12.0%	4,125	35,807	11.5%	4,404	52,528	8.4%	4,516	58,637	7.7%
Hispanic	1,174	19,232	6.1%	1,179	20,250	5.8%	1,306	30,562	4.3%	1,380	37,312	3.7%
White	3,223	21,292	15.1%	2,998	21,165	14.2%	3,320	38,947	8.5%	3,538	48,308	7.3%
Other	638	9,712	6.6%	638	9,837	6.5%	860	19,764	4.4%	1,133	26,159	4.3%
Unknown	824	9,403	8.8%	1,023	10,128	10.1%	1,150	14,022	8.2%	1,289	16,405	7.9%
Female	7,194	85,240	8.4%	6,945	86,888	8.0%	7,316	128,330	5.7%	7,461	151,260	4.9%
Male	4,682	50,277	9.3%	4,632	51,437	9.0%	5,428	95,423	5.7%	6,172	119,046	5.2%

*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 that have received 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 decreased because the number of Affordable Care Act SMHS eligible beneficiaries increased markedly beginning in SFY 2013-14 while claims increased more gradually.

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

	FY 11-12			FY 12-13			FY 13-14			FY 14-15		
	Adults with 5 or more SMHS Visits	Certified Eligible Adults	Penetration Rate	Adults with 5 or more SMHS Visits	Certified Eligible Adults	Penetration Rate	Adults with 5 or more SMHS Visits	Certified Eligible Adults	Penetration Rate	Adults with 5 or more SMHS Visits	Certified Eligible Adults	Penetration Rate
All	8,168	135,517	6.0%	7,720	138,325	5.6%	8,468	223,753	3.8%	8,322	270,306	3.1%
Adults 21-44	3,630	51,232	7.1%	3,429	52,733	6.5%	3,827	98,070	3.9%	3,883	127,762	3.0%
Adults 45-64	4,125	38,528	10.7%	3,859	38,700	10.0%	4,180	77,181	5.4%	3,945	91,051	4.3%
Adults 65+	413	45,757	0.9%	432	46,892	0.9%	461	48,502	1.0%	494	51,493	1.0%
Alaskan Native or American Indian	38	525	7.2%	44	524	8.4%	47	872	5.4%	41	996	4.1%
Asian or Pacific Islander	1,205	39,754	3.0%	1,104	40,614	2.7%	1,175	67,058	1.8%	1,147	82,489	1.4%
Black	2,799	35,599	7.9%	2,590	35,807	7.2%	2,741	52,528	5.2%	2,546	58,637	4.3%
Hispanic	819	19,232	4.3%	783	20,250	3.9%	865	30,562	2.8%	857	37,312	2.3%
White	2,265	21,292	10.6%	2,046	21,165	9.7%	2,259	38,947	5.8%	2,209	48,308	4.6%
Other	458	9,712	4.7%	427	9,837	4.3%	558	19,764	2.8%	660	26,159	2.5%
Unknown	584	9,403	6.2%	726	10,128	7.2%	823	14,022	5.9%	862	16,405	5.3%
Female	4,891	85,240	5.7%	4,565	86,888	5.3%	4,898	128,330	3.8%	4,603	151,260	3.0%
Male	3,277	50,277	6.5%	3,155	51,437	6.1%	3,570	95,423	3.7%	3,719	119,046	3.1%

*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 that 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 decreased because the number of Affordable Care Act SMHS eligible beneficiaries increased markedly beginning in SFY 2013-14 while claims increased more gradually.

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

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 11-12	4,755	512	1,379	249	190	33	0	201	11	10	8	12	82	0
FY 12-13	5,581	374	1,442	239	195	35	0	193	11	6	8	12	79	0
FY 13-14	5,587	384	1,402	235	163	30	6	175	10	7	11	12	93	0
FY 14-15	5,982	341	1,333	248	170	34	0	181	8	10	11	13	107	0
MEAN	\$ 5,476.09	403	1,389	243	179	33	6	187	10	8	10	12	90	0

**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 adults that received the SMHS represented in their respective graph by Fiscal Year.*

**Snapshot Report: Unique Count of Adults Receiving SMHS
Arriving, Exiting, and with Service Continuance by Fiscal Year
Alameda County**

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	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	1,578	13.6%	2,804	24.2%	1,300	11.2%	1,713	14.8%	3,759	32.5%	416	3.6%	11,570	100%
FY 13-14	2,405	18.9%	2,621	20.6%	1,261	9.9%	1,417	11.1%	4,658	36.6%	371	2.9%	12,733	100%
FY 14 - 15	1,307	9.6%	1,811	13.3%	885	6.5%	2,622	19.2%	6,067	44.5%	950	7.0%	13,642	100%

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

Alameda County

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 with No Step Down*	Percentage of Inpatient Discharges with 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	5,641	41.0%	3,257	23.6%	4,105	29.8%	772	5.6%	0	365	50.4	10
FY 12-13	1,070	46.6%	500	21.8%	599	26.1%	127	5.5%	0	365	41.3	8
FY 13-14	280	78.4%	25	7.0%	36	10.1%	16	4.5%	0	365	13.8	0
FY 14-15	345	75.0%	33	7.2%	53	11.5%	29	6.3%	0	365	19.7	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.