## 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: <a href="http://www.dhcs.ca.gov/services/MH/Documents/MedCCC/Library/POSMeasuresCatalog\_Sept15Reporting\_Final\_1.11.15.pdf">http://www.dhcs.ca.gov/services/MH/Documents/MedCCC/Library/POSMeasuresCatalog\_Sept15Reporting\_Final\_1.11.15.pdf</a>

#### 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: <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>

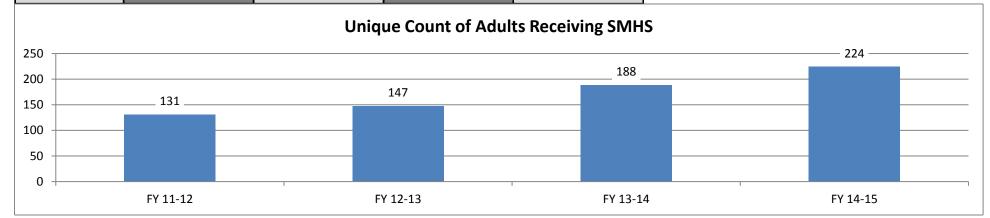
\*The psychiatric emergency services/hospital data measured in the **time to step-down services** report relies solely on claims data from Short Doyle/Medi-Cal II. Currently, the number of days is capped at 365 days (to mitigate the impact of extreme statistical anomalies) when calculating the mean and 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 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

SFY	Unique Count Receiving SMHS*	Year-Over-Year Percentage Change	Unique Count of Medi-Cal Eligibles	Year-Over-Year Percentage Change
FY 11-12	131		1,292	
FY 12-13	147	12.2%	1,293	0.1%
FY 13-14	188	27.9%	1,762	36.3%
FY 14-15	224	19.1%	2,082	18.2%
Compound Annual Growth Rate SFY**		19.6%		17.2%

Modoc County



\*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

Modoc 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 9
Y 11-12	۸	٨	٨	٨	0	0.0%	٨	٨	106	80.9%	٨	٨	12	9.2
Y 12-13	۸	٨	٨	۸	0	0.0%	٨	۸	115	78.2%	٨	٨	18	12.2
Y 13-14	۸	۸	0	0.0%	^	۸	٨	^	151	80.3%	0	0.0%	23	12.2
Y 14-15	13	5.8%	0	0.0%	^	^	۸	^	167	74.6%	۸	۸	34	15.2
		Fiscal Y	/ear 11-12 F	Race Distrib	ution				Fis	cal Year 12	-13 Race Dis	stribution		
	^		^ 0%	Inc	askan Native or A dian ian or Pacific Isla				^ 12%	^ 0% ^ ^		Alaskan Nati Indian Asian or Pac	ve or American ific Islander	
					ack							Black		
					spanic hite							Hispanic White		
		81%			her Iknown					78%		Other Unknown		
	0%	0% ^		Ala	askan Native or A Jian	American	ED DL	JE TO	SMAL Fis	<b>L CEL</b> cal Year 14	L SIZES	Alaskan Nati Indian	ve or American	
		12%			ian or Pacific Isla ack	inder			∧ 15%	A A A A A A A A A A A A A A A A A A A		Asian or Pac Black	inc islander	
FY 13-14 c	laims are estima	ted to be 95% c	omplete as of Ja	His nuary 1, 2015.	spanic							Hispanic		
					hite her							White Other		
		80%	/	01						75%		Other		

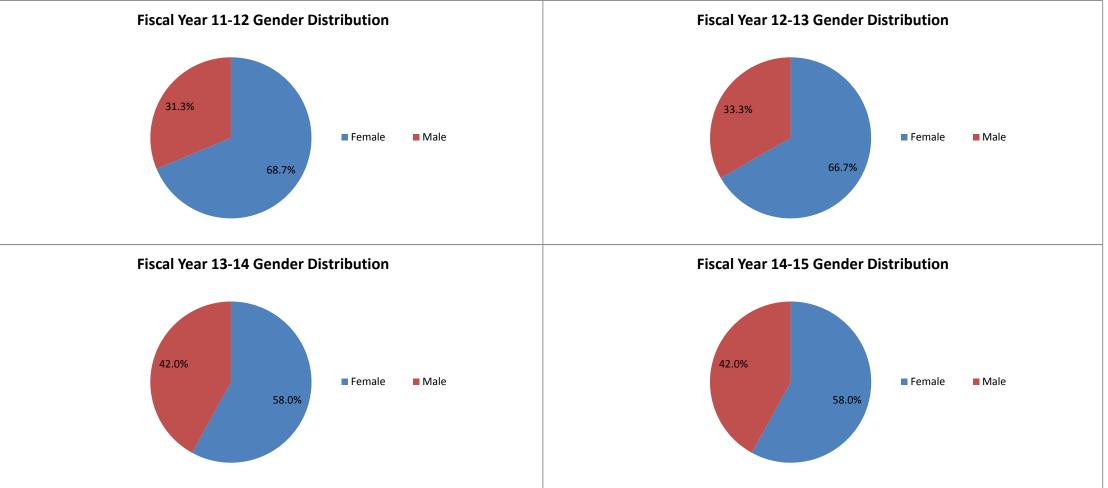
# Demographics Report: Unique Count of Adults Receiving SMHS by Fiscal Year

Modoc 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	۸	۸	65	49.6%	۸	۸	
FY 12-13	٨	٨	76	51.7%	۸	۸	
FY 13-14	79	42.0%	96	51.1%		6.9%	
FY 14-15	112	50.0%	97	43.3%	15	6.7%	
F	iscal Year 11-12	2 Age Group Dis	stribution	Fisca	l Year 12-13 A	ge Group Distr	ibution
	۸				۸		
		۸	Adults 21-44	4		^	Adults 21-44
			Adults 45-64	4			Adults 45-64
	49.6%		Adults 65+	51	L.7%		Adults 65+
CĻ	IARTS N	OT PRO	DUCED	DUE TC	<b>) SMAL</b> I Year 14-15 Aj	L CELL S ge Group Distr	SIZES.
	6.9%				6.7%		
		42.0%	Adults 21-44	4			Adults 21-44
*FY 13-14 c	laims are estimated to	be 95% complete as	of JanuaryAd,u21031455-64	4		50.0%	Adults 45-64
	51.1%		Adults 65+	43	.3%		Adults 65+

## Demographics Report: Unique Count of Adults Receiving SMHS by Fiscal Year Modoc County

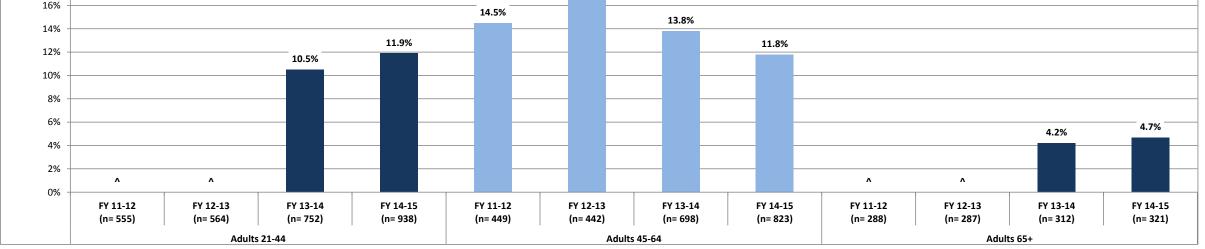
Fiscal Year	Female Count	Female %	Male Count	Male %
FY 11-12	90	68.7%	41	31.3%
FY 12-13	98	66.7%	49	33.3%
FY 13-14	109	58.0%	79	42.0%
FY 14-15	130	58.0%	94	42.0%



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

Modoc County

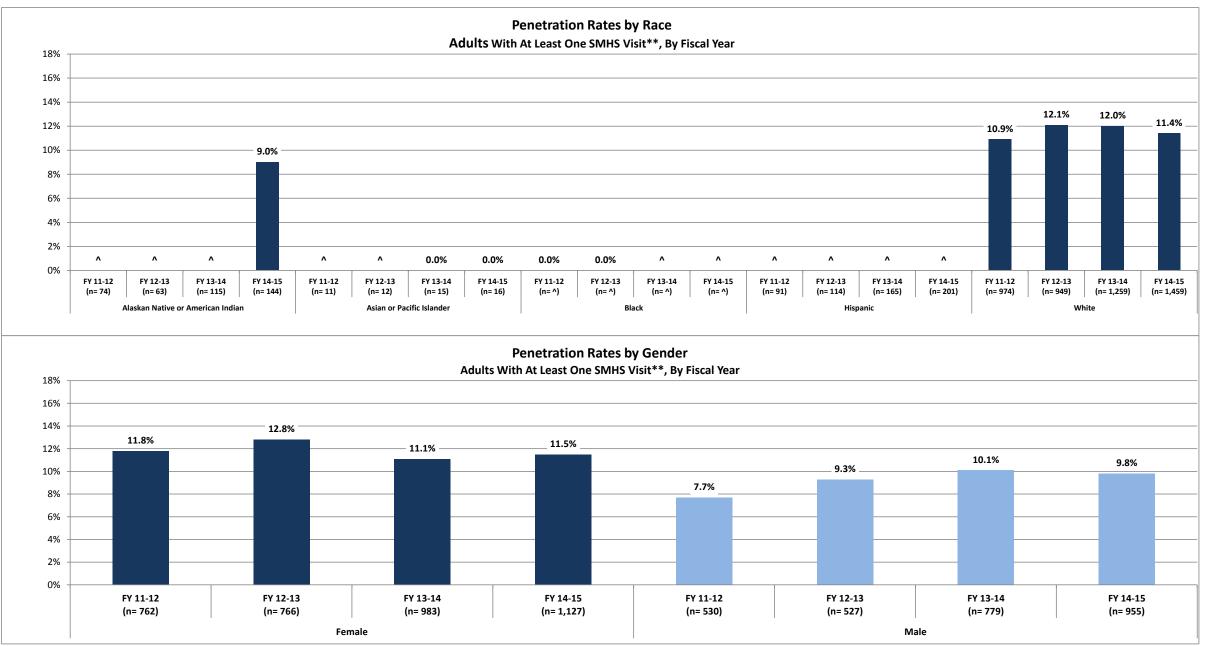
		FY 11-12			FY 12-13			FY 13-14			FY 14-15	
	Adults with 1 or more SMHS Visits	Certified Eligible Adults	Penetration Rate	Adults with 1 or more SMHS Visits	Cortition Eligible	Penetration Rate	Adults with 1 or more SMHS Visits	Certified Eligible Adults	Penetration Rate	Adults with 1 or more SMHS Visits	Certified Eligible Adults	Penetration Rate
All	131	1,292	10.1%	147	1,293	11.4%	188	1,762	10.7%	224	2,082	10.8%
Adults 21-44	٨	555	^	۸	564	^	79	752	10.5%	112	938	11.9%
Adults 45-64	65	449	14.5%	76	442	17.2%	96	698	13.8%	97	823	11.8%
Adults 65+	۸	288	^	^	287	۸	13	312	4.2%	15	321	4.7%
Alaskan Native or American Indian	<u>۸</u>	74	^	^	63	^	^	115	٨	13	144	9.0%
Asian or Pacific Islander	٨	11	^	۸	12	^	0	15	0.0%	0	16	0.0%
Black	0	۸	0.0%	0	^	0.0%	^	^	۸	^	۸	۸
Hispanic	٨	91	^	٨	114	^	^	165	۸	^	201	۸
White	106	974	10.9%	115	949	12.1%	151	1,259	12.0%	167	1,459	11.4%
Other	۸	۸	^	^	^	^	0	۸	0.0%	^	۸	^
Unknown	12	127	9.4%	18	145	12.4%	23	198	11.6%	34	247	13.8%
Female	90	762	11.8%	98	766	12.8%	109	983	11.1%	130	1,127	11.5%
Male	41	530	7.7%	49	527	9.3%	79	779	10.1%	94	955	9.8%
			Ļ		netration Rate	• •	scal Year					
18%					17.2%	-						
16%												
				14.5%		13.8%						



\*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\*\* Modoc County



\*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 Five or More SMHS Visits\*\* Modoc County

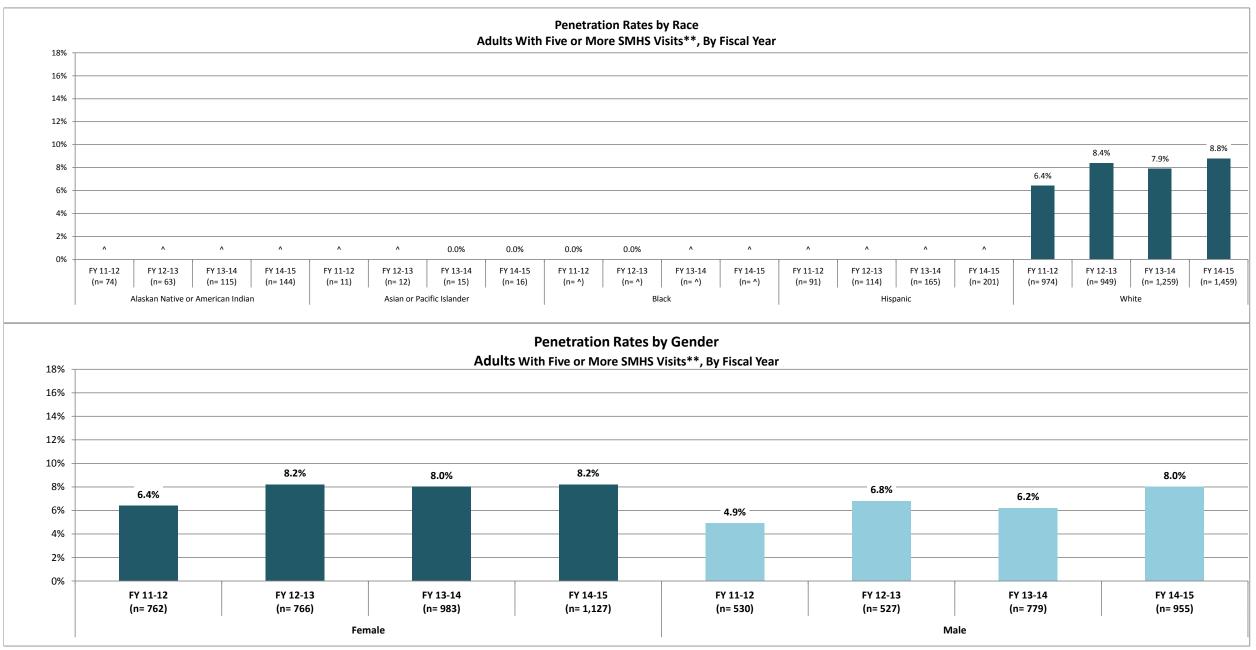
		FY 11-12			FY 12-13		FY 13-14				FY 14-15	
	Adults with 5 or more SMHS Visits	Certified Eligible Adults	Penetration Rate	Adults with 5 or more SMHS Visits	Certified Eligible Adults	Penetration Rate	Adults with 5 or more SMHS Visits	Certified Eligible Adults	Penetration Rate	Adults with 5 or more SMHS Visits	Certified Eligible Adults	Penetration Rate
All	75	1,292	5.8%	99	1,293	7.7%	127	1,762	7.2%	168	2,082	8.1%
Adults 21-44	٨	555	٨	^	564	۸	49	752	6.5%	74	938	7.9%
Adults 45-64	41	449	9.1%	54		12.2%	67	698	9.6%	81	823	9.8%
Adults 65+	٨	288	۸	^	287	۸	11	312	3.5%	13	321	4.0%
Alaskan Native or American Indian	٨	74	٨	^	63	۸	^	115	^	^	144	^
Asian or Pacific Islander	۸	11	٨	^	12	۸	0	15	0.0%	0	16	0.0%
Black	0	۸	0.0%	0	۸	0.0%	^	۸	^	۸	^	^
Hispanic	۸	91	۸	^	114	۸	^	165	۸	۸	201	^
White	62	974	6.4%	80	949	8.4%		1,259	7.9%	129	1,459	8.8%
Other	0	۸	0.0%	0	۸	0.0%		۸	0.0%	0	^	0.0%
Unknown	۸	127	۸	^	145	۸	18	198	9.1%	26	247	10.5%
Female	49	762	6.4%	63	766	8.2%	79	983	8.0%	92	1,127	8.2%
				36	527	6.8%	48	779	6.2%	76	955	8.0%
18%	26	530	4.9%	P	enetration Ra ve or More SMH	tes by Age		//9	0.2%	70		
18% 16%	26	530	4.9%	P	enetration Ra	tes by Age			0.276			
18%	26	530	4.9%	P	enetration Ra	tes by Age			0.276			
Male	26	530	4.9%	P	enetration Ra ve or More SMH	tes by Age			0.276			
Male	26		7.9%	P Adults With Fi	enetration Ra ve or More SMH	tes by Age IS Visits**, By F	iscal Year		0.276			
Male	26	6.5%		P Adults With Fi	enetration Ra ve or More SMH	tes by Age IS Visits**, By F	iscal Year		0.276			
Male	26			P Adults With Fi	enetration Ra ve or More SMH	tes by Age IS Visits**, By F	iscal Year				3.5%	4.0%
18%   16%   16%   14%   12%   10%   8%   6%   4%   2%				P Adults With Fi	enetration Ra ve or More SMH	tes by Age IS Visits**, By F	iscal Year					
18%   16%   16%   14%   12%   10%   8%   6%   4%   2%	26			P Adults With Fi	enetration Ra ve or More SMH	tes by Age IS Visits**, By F	iscal Year		Δ.276	Δ		
18%   16%   16%   14%   12%   10%   8%   6%   4%   2%	л FY 12-13			P Adults With Fi	enetration Ra ve or More SMH	tes by Age IS Visits**, By F	iscal Year 9.8 9.8	% -15 FY	۸ 11-12			

\*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.

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

Modoc County



\*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.

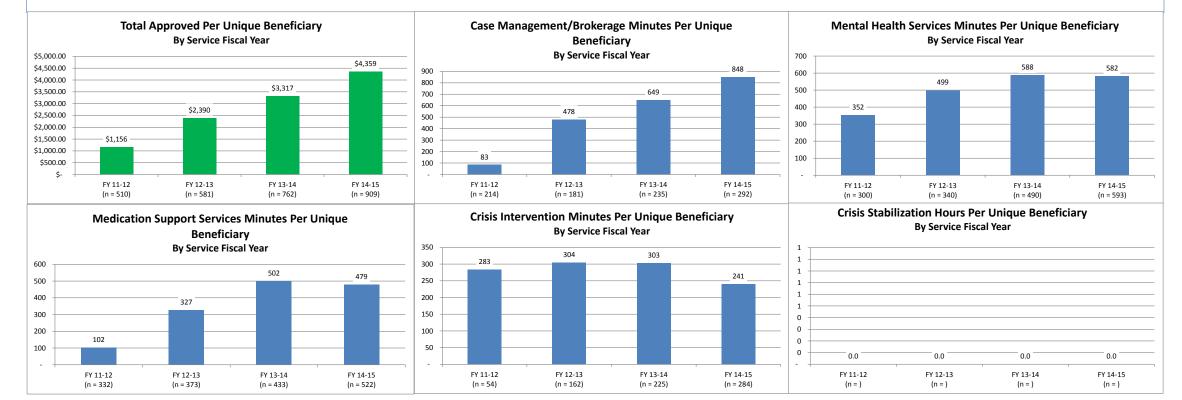
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Penetration rates decreased because the number of Affordable Care Act SMHS eligible beneficiaries increased markedly beginning in SFY 2013-14 while claims increased more gradually.

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

Modoc County

Fiscal Year		Case Management/ Brokerage (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	1,156	83	352	102	283	0	0	68	0	0	0	0	0	11
FY 12-13	2,390	478	499	327	304	0	0	0	0	0	0	0	0	9
FY 13-14	3,317	649	588	502	303	0	0	0	0	0	0	0	0	10
FY 14-15	4,359	848	582	479	241	0	0	0	0	0	0	0	0	9
MEAN	\$ 2,805.38	514	505	352	283	0	0	68	0	0	0	0	0	10



\*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.

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



\*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 Adults Receiving SMHS** Arriving, Exiting, and with Service Continuance by Fiscal Year

Modoc County

Category		Description	(Please refer to	the Measures	Catalog for mor	e detailed desc	riptions on a	ll Performan	ce Outcomes	System meas	sures.)			
Arrivals		Adults that o	lid not receive a	iny SMHS withir	n 3 months of th	eir first date of	service in th	e Fiscal Year.						
Service Cont	inuance	Adults receiv	ing continuous/	services with n	o breaks in serv	ice greater than	90 days for a	a period of at	least 2 years	(>= 2 YR) or a	a period of 1 to 2	2 years (< 2 YR).		
Exiting		Adults that o	lid not receive a	iny SMHS withir	n 3 months aftei	r their last date	of service in	the Fiscal Yea	ar.					
Arriving & Ex	xiting	A distinct ca	tegory in which	adults met botl	n the criteria for	Arrivals and Ex	<b>iting</b> above f	or the fiscal y	year.					
Service Cont	inuance &													
Exiting		A distinct ca	tegory in which	adults had at le	ast 2 years of Se	ervice Continua	nce going int	o the Fiscal Y	ear and then	Exited within	the same Fiscal	Year.		
Service Fiscal Year	Arrivals	Arrivals %	Service Continuance	Service Continuance	Service Continuance	Service Continuance	Exiting Count	Exiting %	Arriving & Exiting	Arriving & Exiting %	Service Continuance (>= 2 YR) &	Service Continuance (>= 2 YR) and	Total	Total %

			Count		(						Exiting Count	Exiting %	
FY 12-13	27	18.2%	<b>^</b>	٨	38	25.7%	27	18.2%	35	23.6%	^	۸	148
FY 13-14	46	24.3%	36	19.0%	24	12.7%	^	^	62	32.8%	^	^	189
FY 14 - 15	50	22.5%	37	16.7%	<b>^</b>	^	34	15.3%	66	29.7%	^	^	222
		-	-	-	-	-		-					-

Fiscal Year 12-13 Arrivals, Service **Continuance, & Exits Distribution** 

## Fiscal Year 13-14 Arrivals, Service **Continuance, & Exits Distribution**

## Fiscal Year 14-15 Arrivals, Service **Continuance, & Exits Distribution**

86% 89% 84%

	۸	Arrivals	٨		Arrivals	۸		Arrivals
24%	18%	Service Continuance (>= 2 YR)		24%	Service Continuance (>= 2 YR)		23%	Service Continuance (>= 2 YR)
			PRODUCE	D DUE		ELL SIZES	5.	Service Continuance (< 2 YR)
		Exiting			Exiting			Exiting
18%	26%	Arriving & Exiting		19%	Arriving & Exiting		17%	Arriving & Exiting
		Service Continuance (>= 2 YR) & Exiting	^ 13%		Service Continuance (>= 2 YR) & Exiting	15%		Service Continuance (>= 2 YR) & Exiting

## Time to Step Down Report: Children and Youth Stepping Down in SMHS Services Post Inpatient Discharge Modoc 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 within 30 Days of Discharge	Percentage of Inpatient Discharges with Step Down within 30 Days of Discharge	Count of Inpatient Discharges with a Step Down > 30 Days from Discharge	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 Next Contact I Inpatient Discharge (Days)
Y 11-12	0	0.0%			0							
Y 12-13	0	0.0%	-		0	,	-					
Y 13-14	0		-		0		-		-	-		
Y 14-15	0	0.0%	C	0.0%	0	0.0%	0	0.0%	0	0	0.0	
10	Median Time	Ser	vice in Days		·				Service in	•	·	
9 8 7 6 5	Rocreation FY 10-11			ES ) 6 FC FY 12-13							R D	0. <b></b> 13-14

were moved to a community-based program or beneficiaries that were incarcerated.