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.

Performance Outcomes Adult Specialty Mental Health Services Report Report Date September, 2016

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.

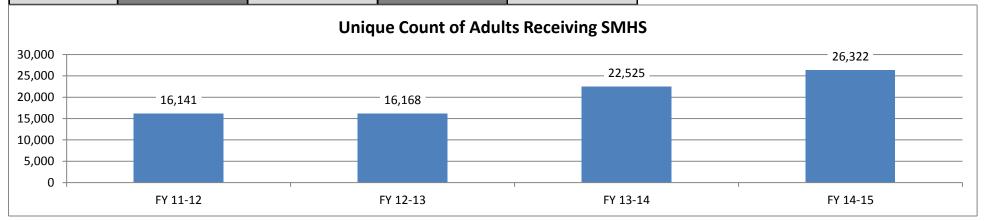
*The **snapshot** report provides a point-in-time look at adults' movement through the SMHS system. The report uses five general categories to classify if an adult is entering, exiting, continuing services, or a combination of these categories (e.g., arriving and exiting). As of now, this report only 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.

San Diego 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	16,141		213,211	
FY 12-13	16,168	0.2%	220,855	3.6%
FY 13-14	22,525	39.3%	370,428	67.7%
FY 14-15	26,322	16.9%	491,537	32.7%
Compound Annual Growth Rate SFY**		17.7%		32.1%



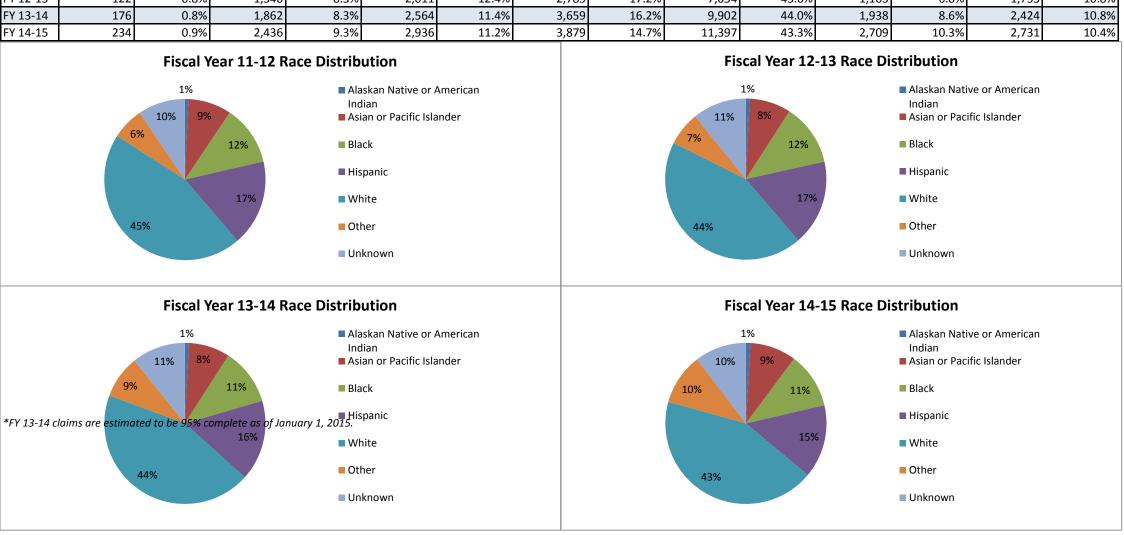
^{*}SMHS = Specialty Mental Health Services. See Measures Catalog for more detailed information.

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

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

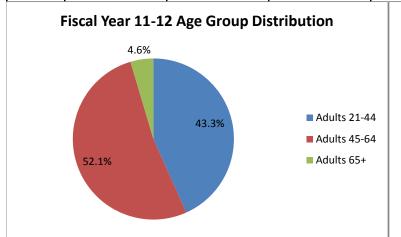
San Diego County

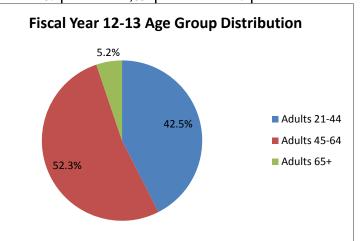
Fiscal Year	Alaskan Native or American Indian Count	Alaskan Native or American Indian %	Asian or Pacific Islander Count	Asian or Pacific Islander %	Black Count	Black %	Hispanic Count	Hispanic %	White Count	White %	Other Count	Other %	Unknown Count	Unknown %
FY 11-12	121	0.7%	1,401	8.7%	1,938	12.0%	2,798	17.3%	7,325	45.4%	1,028	6.4%	1,530	9.5%
FY 12-13	122	0.8%	1,340	8.3%	2,011	12.4%	2,785	17.2%	7,054	43.6%	1,103	6.8%	1,753	10.8%
FY 13-14	176	0.8%	1,862	8.3%	2,564	11.4%	3,659	16.2%	9,902	44.0%	1,938	8.6%	2,424	10.8%
FY 14-15	234	0.9%	2,436	9.3%	2,936	11.2%	3,879	14.7%	11,397	43.3%	2,709	10.3%	2,731	10.4%

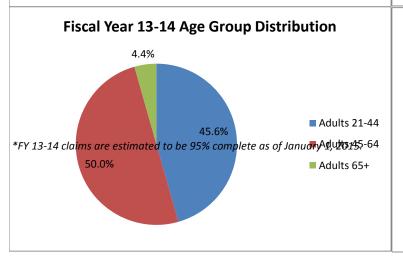


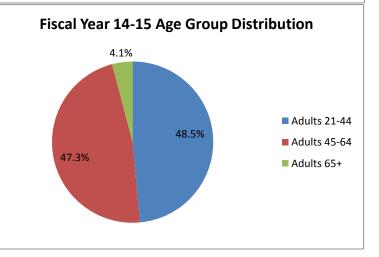
San Diego County

Fiscal Year	Adults 21-44 Count	Adults 21-44 %	Adults 45-64 Count	Adults 45-64 %	Adults 65+ Count	Adults 65+ %
FY 11-12	6,983	43.3%	8,412	52.1%	746	4.6%
FY 12-13	6,877	42.5%	8,452	52.3%	839	5.2%
FY 13-14	10,265	45.6%	11,273	50.0%	987	4.4%
FY 14-15	12,772	48.5%	12,459	47.3%	1,091	4.1%



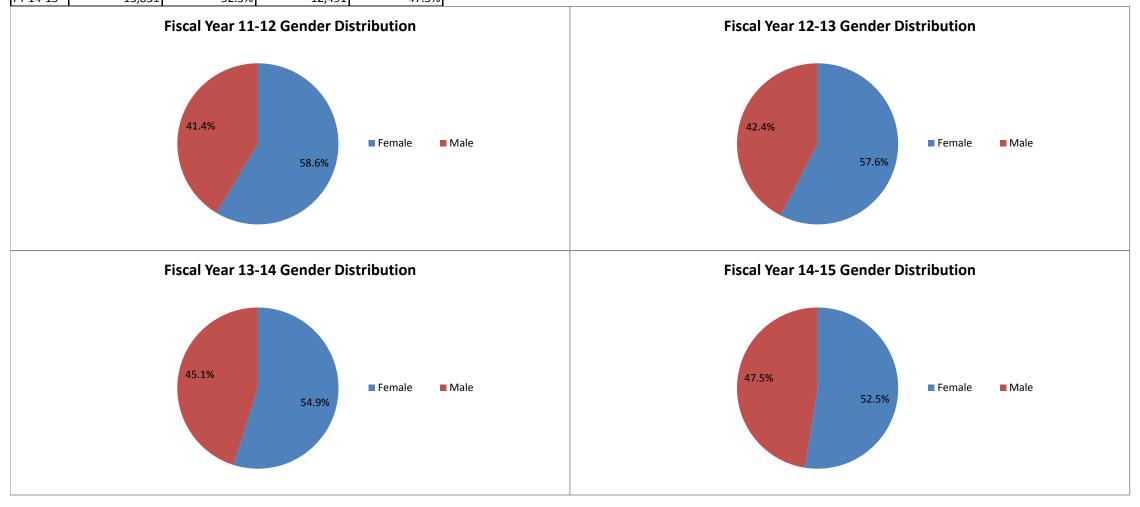






San Diego County

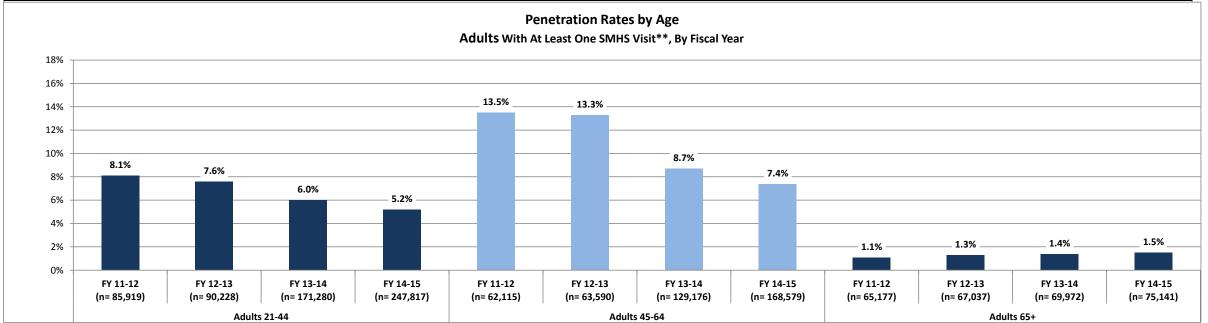
Fiscal Year	Female Count	Female %	Male Count	Male %
FY 11-12	9,456	58.6%	6,685	41.4%
FY 12-13	9,307	57.6%	6,861	42.4%
FY 13-14	12,355	54.9%	10,170	45.1%
FY 14-15	13.831	52.5%	12.491	47.5%



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

San Diego 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	16,141	213,211	7.6%	16,168	220,855	7.3%	22,525	370,428	6.1%	26,322	491,537	5.4%
Adults 21-44	6,983	85,919	8.1%	6,877	90,228	7.6%	10,265	171,280	6.0%	12,772	247,817	5.2%
Adults 45-64	8,412	62,115	13.5%	8,452	63,590	13.3%	11,273	129,176	8.7%	12,459	168,579	7.4%
Adults 65+	746	65,177	1.1%	839	67,037	1.3%	987	69,972	1.4%	1,091	75,141	1.5%
Alaskan Native or American Indian	121	1,129	10.7%	122	1,140	10.7%	176	2,104	8.4%	234	2,784	8.4%
Asian or Pacific Islander	1,401	33,690	4.2%	1,340	34,751	3.9%	1,862	61,298	3.0%	2,436	86,003	2.8%
Black	1,938	18,961	10.2%	2,011	19,194	10.5%	2,564	29,328	8.7%	2,936	36,157	8.1%
Hispanic	2,798	58,083	4.8%	2,785	60,417	4.6%	3,659	92,047	4.0%	3,879	118,079	3.3%
White	7,325	62,124	11.8%	7,054	62,588	11.3%	9,902	110,947	8.9%	11,397	145,426	7.8%
Other	1,028	21,172	4.9%	1,103	23,063	4.8%	1,938	46,854	4.1%	2,709	68,561	4.0%
Unknown	1,530	18,052	8.5%	1,753	19,702	8.9%	2,424	27,850	8.7%	2,731	34,527	7.9%
Female	9,456	134,911	7.0%	9,307	139,514	6.7%	12,355	214,513	5.8%	13,831	274,783	5.0%
Male	6,685	78,300	8.5%	6,861	81,341	8.4%	10,170	155,915	6.5%	12,491	216,754	5.8%

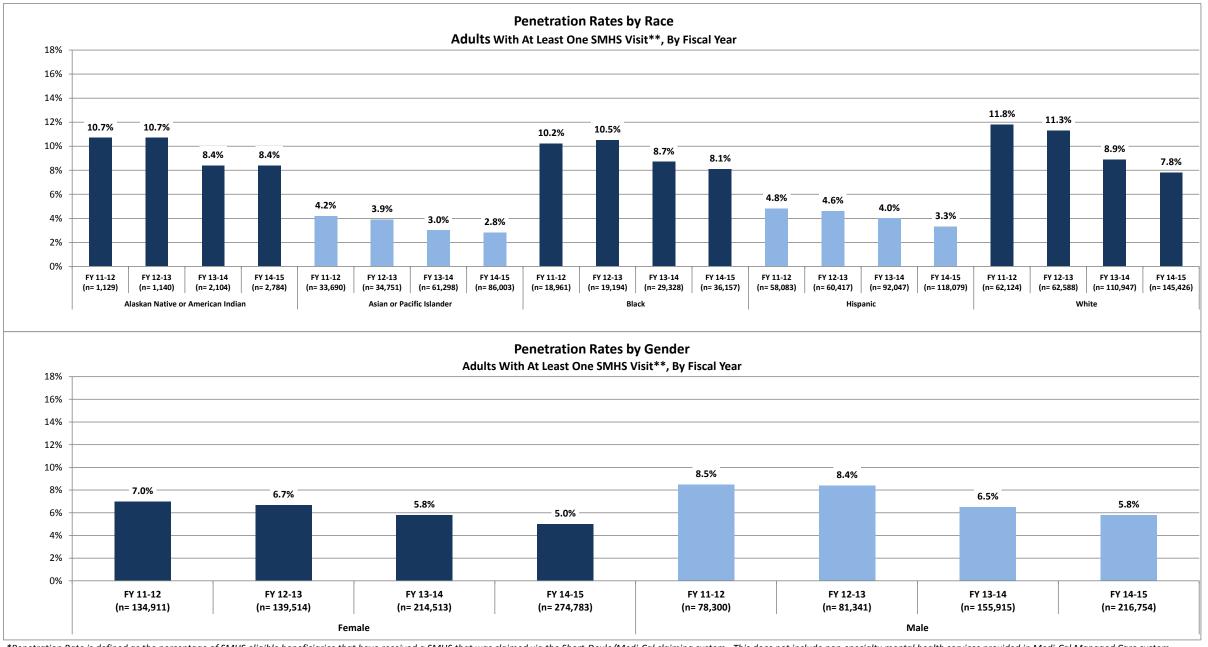


^{*}Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in Medi-Cal Managed Care system.

^{**}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* Report: Adults With At Least One SMHS Visit**

San Diego County



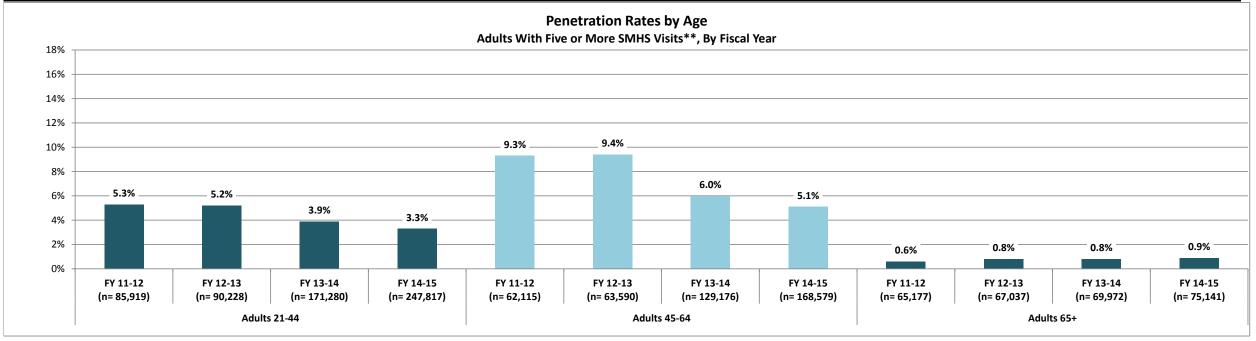
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^{**}Adults that have received at least one SMHS that was claimed through the Short-Doyle/ Medi-Cal claiming system on at least one (1) day in the Fiscal Year.

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

San Diego 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	10,743	213,211	5.0%	11,163	220,855	5.1%	14,978	370,428	4.0%	17,359	491,537	3.5%
Adults 21-44	4,553	85,919	5.3%	4,660	90,228	5.2%	6,677	171,280	3.9%	8,139	247,817	3.3%
Adults 45-64	5,774	62,115	9.3%	5,980	63,590	9.4%	7,715	129,176	6.0%	8,548	168,579	5.1%
Adults 65+	416	65,177	0.6%	523	67,037	0.8%	586	69,972	0.8%	672	75,141	0.9%
Alaskan Native or American Indian	82	1,129	7.3%	87	1,140	7.6%	120	2,104	5.7%	145	2,784	5.2%
Asian or Pacific Islander	881	33,690	2.6%	885	34,751	2.5%	1,157	61,298	1.9%	1,583	86,003	1.8%
Black	1,308	18,961	6.9%	1,355	19,194	7.1%	1,735	29,328	5.9%	1,945	36,157	5.4%
Hispanic	1,794	58,083	3.1%	1,907	60,417	3.2%	2,434	92,047	2.6%	2,507	118,079	2.1%
White	5,019	62,124	8.1%	5,008	62,588	8.0%	6,728	110,947	6.1%	7,664	145,426	5.3%
Other	603	21,172	2.8%	661	23,063	2.9%	1,142	46,854	2.4%	1,614	68,561	2.4%
Unknown	1,056	18,052	5.8%	1,260	19,702	6.4%	1,662	27,850	6.0%	1,901	34,527	5.5%
Female	6,065	134,911	4.5%	6,181	139,514	4.4%	8,001	214,513	3.7%	8,982	274,783	3.3%
Male	4,678	78,300	6.0%	4,982	81,341	6.1%	6,977	155,915	4.5%	8,377	216,754	3.9%

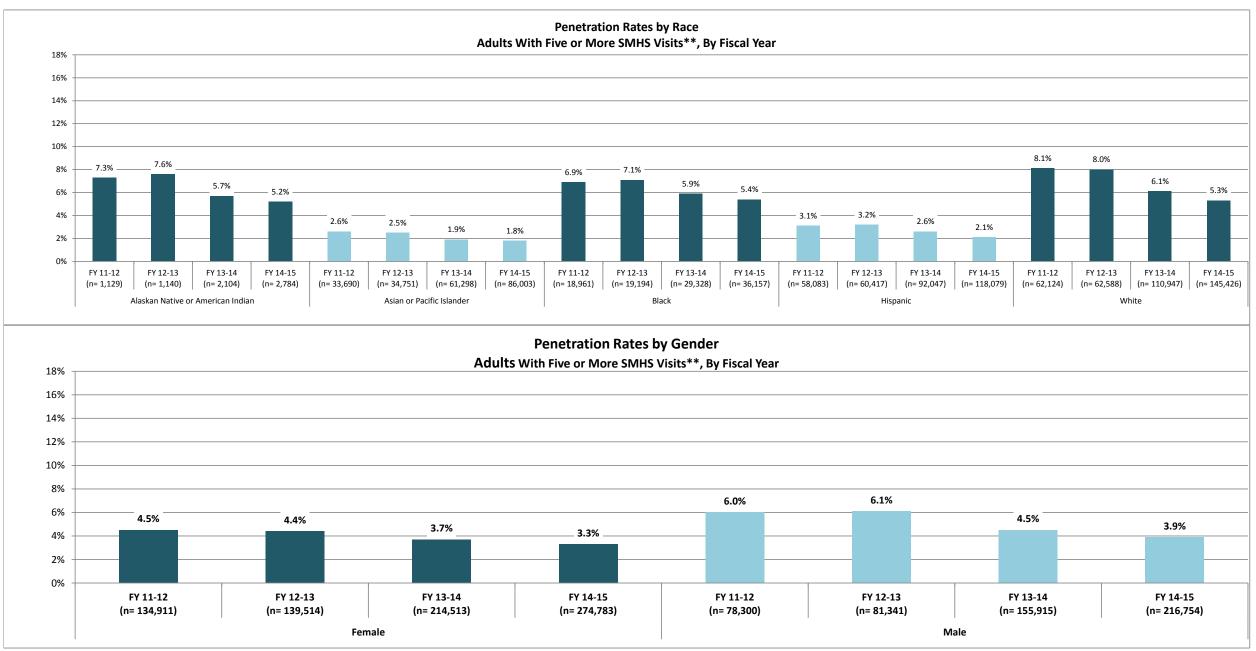


^{*}Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in Medi-Cal Managed Care system.

^{**}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* Report: Adults with Five or More SMHS Visits**

San Diego 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 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* San Diego County

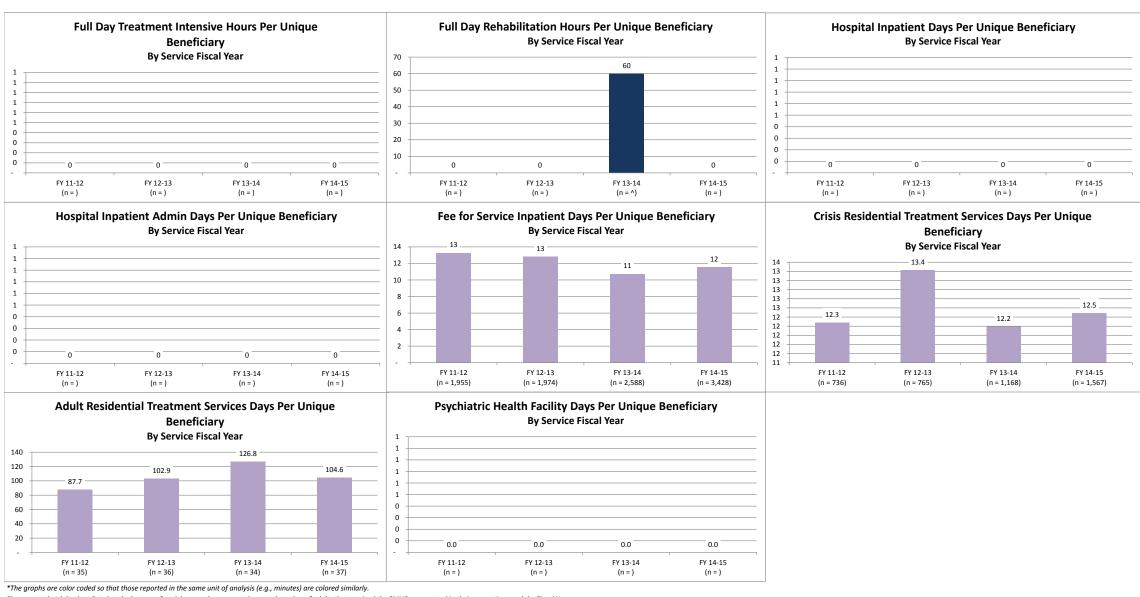
Fiscal Year		Case Management/ Brokerage (Minutes)				Crisis Stabilization (Hours)	Full Day Treatment Intensive (Hours)	Full Day Rehabilitation (Hours)	Hospital Inpatient (Days)	Hospital Inpatient Admin (Days)	Fee for Service Inpatient (Days)	Crisis Residential Treatment Services (Days)	Adult Residential Treatment Services (Days)	Psychiatric Health Facility (Days)
FY 11-12	2,616	552	527	224	96	16	0	0	0	0	13	12	88	0
FY 12-13	3,435	558	576	252	106	20	0	0	0	0	13	13	103	0
FY 13-14	3,130	432	519	231	98	21	0	60	0	0	11	12	127	0
FY 14-15	3,519	433	495	252	81	22	0	0	0	0	12	12	105	0
MEAN	\$ 3,175.07	494	529	240	95	20	0	60	0	0	12	13	106	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.

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



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.

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

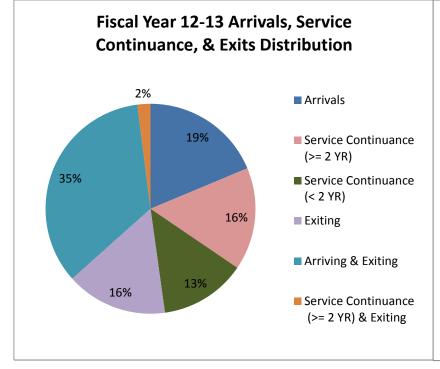
Snapshot Report: Unique Count of Adults Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year

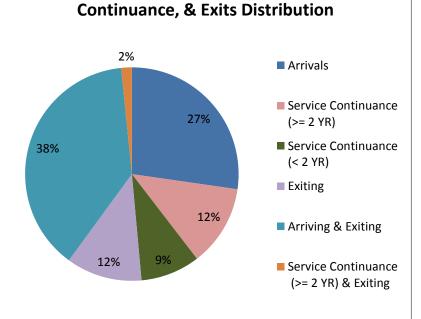
San Diego County

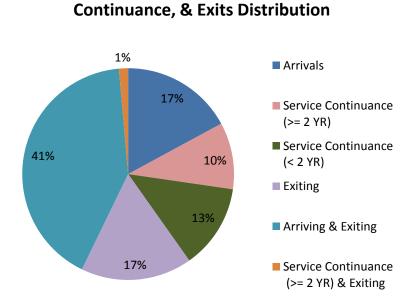
Category	Description (Please refer to the Measures Catalog for more detailed descriptions on all Performance Outcomes System measures.)
Arrivals	Adults that did not receive any SMHS within 3 months of their first date of service in the Fiscal Year.
Service Continuance	Adults receiving continuous services 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	Continuance	Service Continuance (<2 YR) Count	Service Continuance (< 2 YR) %	Exiting Count	Exiting %	Arriving & Exiting Count	Exiting %		Service Continuance (>= 2 YR) and Exiting %		Total %
FY 12-13	3,025	18.7%	2,555	15.8%	2,150	13.3%	2,523	15.6%	5,606	34.6%	320	2.0%	16,179	100%
FY 13-14	6,137	27.3%	2,764	12.3%	2,030	9.0%	2,584	11.5%	8,650	38.4%	355	1.6%	22,520	100%
FY 14 - 15	4,496	17.1%	2,685	10.2%	3,397	12.9%	4,473	17.0%	10,896	41.4%	378	1.4%	26,325	100%

Fiscal Year 13-14 Arrivals, Service





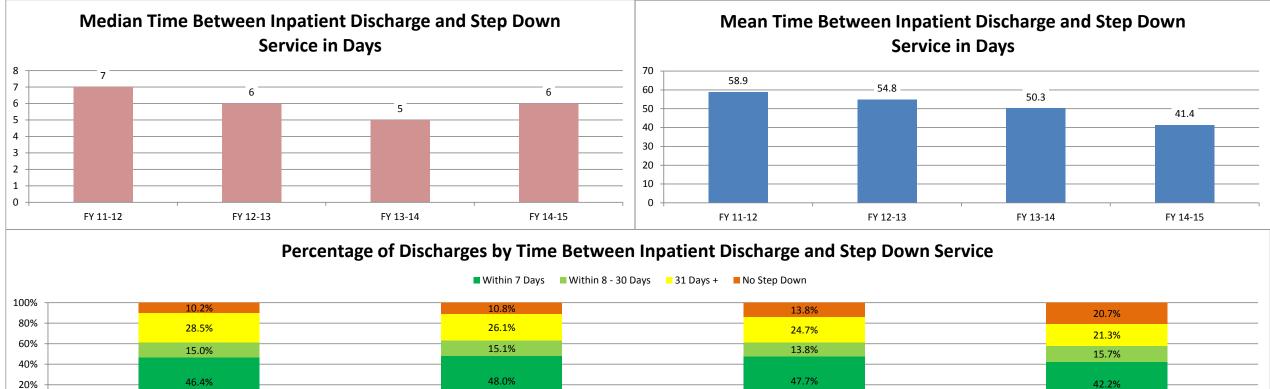


Fiscal Year 14-15 Arrivals, Service

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

San Diego County

Service FY	Count of Inpatient Discharges with Step Down within 7 Days of Discharge ^a	Step Down within	Step Down Between 8 and 30	Inpatient Discharges with Step Down	Stan Down 5 30	Innationt	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 11-12	1,347	46.4%	435	15.0%	826	28.5%	295	10.2%	0	365	58.9	7
FY 12-13	1,427	48.0%	450	15.1%	774	26.1%	320	10.8%	0	365	54.8	6
FY 13-14	1,492	47.7%	432	13.8%	774	24.7%	433	13.8%	0	365	50.3	5
FY 14-15	1,993	42.2%	743	15.7%	1,006	21.3%	978	20.7%	0	365	41.4	6



FY 11-12

(1,716 Unique Beneficiaries with

2,903 Total Inpatient Discharges)

0%

FY 12-13

(1,686 Unique Beneficiaries with

2,971 Total Inpatient Discharges)

FY 13-14

(2,027 Unique Beneficiaries with

3,131 Total Inpatient Discharges)

FY 14-15

(2,951 Unique Beneficiaries with

4,720 Total Inpatient Discharges)

^a Adults aged 22-64 receiving inpatient services from Institution for Mental Disease (IMD) facilities not included in count of inpatient discharges.

b **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.