Performance Outcomes System Children with an Open Child Welfare Case Statewide Report Report run on August 9, 2017

Background

Two reports will be created during each new reporting period. The reports that will be produced are as follows: statewide aggregate data and population-based county groups.

These reports help meet the intent of the Legislature, as stated in Welfare and Institutions Code Section 14707.5, to develop a performance outcomes system for Early and Periodic

Screening, Diagnosis, and Treatment (EPSDT) mental health services that will improve outcomes at the individual, program, and system levels and inform fiscal decision-making related to the purchase of services. This reporting effort is part of the implementation of a performance outcomes system for Medi- Cal Specialty Mental Health Services (SMHS) for children and youth.

Since 2012 DHCS has worked with several groups of stakeholders to create a structure for reporting, to develop the Performance Measurement Paradigm, and to develop 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

Purpose and Overview

This statewide aggregate report provides updated information on the initial indicators that were developed for the Performance Outcomes System. DHCS plans to move to annual reporting of this data for the Performance Outcomes System.

The first series of charts and tables focus on the demographics of Foster Care case children and youth under 21 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. Two types of penetration information are provided. Both penetration rates tables are also broken out by demographic characteristics. Utilization of services data are shown in terms of dollars, as well as by service, in time increments. The snapshot table provides a point-in-time view of children/youth 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 step-down services following inpatient discharge.

Where possible, the reports provide trend information by displaying information for four Fiscal Years (FY). A FY is from July 1st to June 30th. For all of the measures and indicators included in this report, the denominator is the "Unique Count of Children and Youth receiving SMHS" shown on page 3 of the report and is broken out by state FY.

Utilization of services reports are shown in terms of dollars, as well as by service in time increments. The snapshot report provides a point-in-time view of children arriving, exiting, and continuing services over a two-year period. The final report provides a view over the past four years of the time to step-down services (i.e., time to next contact after an inpatient discharge). Note: The time to step-down report has a change in methodology from the first report produced in February 2015. In the initial report only outpatient services provided at least one day after the inpatient discharge were included in the calculations. On subsequent reports any outpatient service that occurs on or after the inpatient discharge is included in the analysis.

Definitions

Population: Open Child Welfare beneficiaries with approved services adjudicated through the Short Doyle/Medi-Cal II claiming system that were:

Age 20 or younger 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 12/13 through FY 15/16.
- Medi-Cal Eligibility Data System (MEDS) data from the Management Information System/Decision Support System (MIS/DSS) FY 12/13 through FY15/16.
- Child Welfare Services/Case Management System (CWS/CMS) data for children in FY 12/13 through FY 15/16.

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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/provgovpart/pos/Pages/Performance-Outcomes-System-Reports-and-Measures-Catalog.aspx

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, this data is represented as follows: 1) Data that is missing is indicated as "-".

*Population-based report findings may be interpreted alongside the POS statewide 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 make comparison between the POS penetration rates and the EQRO penetration rates not appropriate or 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 youth who received X number of SMHS (1 or 5 for POS) in a FY and dividing that by the total number of Medi-Cal eligible youth 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 children and youth's movement through the SMHS system. The report uses five general categories to classify if a youth is entering, exiting, continuing services, or a combination of these categories (e.g., arriving and exiting). Eventually the snapshot data will be used along with measures of service effectiveness to identify whether youth 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 reported on in the time to step-down services report includes data from Short Doyle/Medi-Cal II claims data and fee-for-service data. In the future this re port will incorporate other outpatient and inpatient Medi-Cal SMHS' billed through the Managed Care healthcare delivery systems. 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 off of the county of the hospital the patient is discharged from and whom has been attributed the time to next service in days used in the calculations for this indicator.

*Data Source Methodology: Demographic & Penetration and Snapshot - based on MEDS data; Utilization - based on Claims Submission data; Time to step-down - based on Inpatient Hospital data.

*Open Child Welfare: Children/youth who are provided child welfare services either while living in their home, or while living out-of-home in a foster care setting. Excludes children: placed in California under the jurisdiction of another state (incoming interstate Compact on the Placement of Children (ICPC)) and who are placed with non-dependent guardians.

*Foster Care Placement: Children/youth who are removed from their home by a child placement agency, including county child welfare services and probation departments and placed in a foster care setting. Excludes children: placed in California under the jurisdiction of another state (incoming interstate Compact on the Placement of Children (ICPC)) and who are placed with non-dependent legal guardians.

*DHCS analyzed the declines in the penetration rates and found that they were due to the Healthy Families transition and Affordable Care Act expansion, which resulted in a large and rapid increase in the number of children/youth who were enrolled in Medi-Cal. Examination of the number of children/youth accessing specialty mental health services showed modest growth. Penetration and utilization data will continue to be monitored over time as they become available.

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 Child Welfare Youth in Medi-Cal	Year-Over-Year Percentage Change
FY 12-13	55,170		131,779	
FY 13-14	56,496	2.4%	134,561	2.1%
FY 14-15	56,862	0.6%	134,900	0.3%
FY 15-16	54,986	-3.3%	129,696	-3.9%
Compound Annual Growth Rate SFY**		-0.1%		-0.5%

Fiscal Year	Black Count	Black %	Hispanic Count	Hispanic %	White Count	White %	Other Count	Other %
FY 12-13	10,450	18.9%	25,299	45.9%	12,815	23.2%	6,606	12.0%
FY 13-14	10,544	18.7%	26,576	47.0%	12,842	22.7%	6,534	11.6%
FY 14-15	10,675	18.8%	27,149	47.7%	12,559	22.1%	6,479	11.4%
FY 15-16	10,362	18.8%	26,629	48.4%	11,857	21.6%	6,138	11.2%

^{*}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.

^{**}The race/ethnicity data have changed considerably since it was last published in 2016. DHCS is currently performing analyses to determine the nature of these changes and may update this table, if needed.

Fiscal Year	Children 0-2 Count	Children 0-2 %	Children 3-5 Count	Children 3-5 %	Children 6-11 Count	Children 6-11 %	Youth 12-17 Count	Youth 12-17 %	Youth 18-20 Count	Youth 18-20 %
FY 12-13	4,498	8.2%	7,843	14.2%	17,610	31.9%	20,451	37.1%	4,768	8.6%
FY 13-14	4,793	8.5%	8,131	14.4%	18,648	33.0%	19,863	35.2%	5,061	9.0%
FY 14-15	4,981	8.8%	8,442	14.8%	19,083	33.6%	19,392	34.1%	4,964	8.7%
FY 15-16	4,773	8.7%	8,237	15.0%	18,761	34.1%	18,419	33.5%	4,796	8.7%

Fiscal Year	Female Count	Female %	Male Count	Male %
FY 12-13	26,263	47.6%	28,907	52.4%
FY 13-14	27,094	48.0%	29,402	52.0%
FY 14-15	27,363	48.1%	29,499	51.9%
FY 15-16	26,603	48.4%	28,383	51.6%

Penetration Rates* Report: Children and Youth with an Open Child Welfare Case With At Least One SMHS Visit** Statewide as of August 9, 2017

		FY 12-13			FY 13-14			FY 14-15			FY 15-16	
	Children and Youth with an Open Child Welfare Case with 1 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate		Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate	Open Child Welfare Case with 1 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate	Children and Youth with an Open Child Welfare Case with 1 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate
All	55,170	131,779	41.9%	56,496	134,561	42.0%	56,862	134,900	42.2%	54,986	129,696	42.4%
Children 0-2	4,498	23,902	18.8%	4,793	24,522	19.5%	4,981	24,690	20.2%	4,773	23,767	20.1%
Children 3-5	7,843	23,773	33.0%	8,131	23,814	34.1%	8,442	24,031	35.1%	8,237	23,028	35.8%
Children 6-11	17,610	36,171	48.7%	18,648	37,543	49.7%	19,083	38,131	50.0%	18,761	37,205	50.4%
Youth 12-17	20,451	36,307	56.3%	19,863	35,216	56.4%	19,392	34,227	56.7%	18,419	32,644	56.4%
Youth 18-20	4,768	11,626	41.0%	5,061	13,466	37.6%	4,964	13,821	35.9%	4,796	13,052	36.7%
Black	10,450	23,246	45.0%	10,544	23,238	45.4%	10,675	23,239	45.9%	10,362	22,016	47.1%
Hispanic	25,299	62,375	40.6%	26,576	64,478	41.2%	27,149	65,252	41.6%	26,629	63,452	42.0%
White	12,815	30,735	41.7%	12,842	30,847	41.6%	12,559	30,251	41.5%	11,857	28,427	41.7%
Other	6,606	15,423	42.8%	6,534	15,998	40.8%	6,479	16,158	40.1%	6,138	15,801	38.8%
Female	26,263	63,327	41.5%	27,094	64,880	41.8%	27,363	65,085	42.0%	26,603	62,686	42.4%
Male	28,907	68,452	42.2%	29,402	69,681	42.2%	29,499	69,815	42.3%	28,383	67,010	42.4%

Penetration Rates* Report: Children and Youth with an Open Child Welfare Case With Five or More SMHS Visits** Statewide as of August 9, 2017

		FY 12-13			FY 13-14			FY 14-15			FY 15-16	
	Children and Youth with an Open Child Welfare Case with 5 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate	Children and Youth with an Open Child Welfare Case with 5 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate	Children and Youth with an Open Child Welfare Case with 5 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate	Children and Youth with an Open Child Welfare Case with 5 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate
All	41,610	131,779	31.6%	42,019	134,561	31.2%	41,795	134,900	31.0%	40,497	129,696	31.2%
Children 0-2	2,296	23,902	9.6%	2,320	24,522	9.5%	2,490	24,690	10.1%	2,237	23,767	9.4%
Children 3-5	5,421	23,773	22.8%	5,455	23,814	22.9%	5,605	24,031	23.3%	5,457	23,028	23.7%
Children 6-11	13,488	36,171	37.3%	14,135	37,543	37.7%	14,234	38,131	37.3%	14,283	37,205	38.4%
Children 12-17	16,651	36,307	45.9%	16,123	35,216	45.8%	15,627	34,227	45.7%	14,850	32,644	45.5%
Youth 18-20	3,754	11,626	32.3%	3,986	13,466	29.6%	3,839	13,821	27.8%	3,670	13,052	28.1%
Black	8,153	23,246	35.1%	8,149	23,238	35.1%	8,074	23,239	34.7%	8,052	22,016	36.6%
Hispanic	18,612	62,375	29.8%	19,318	64,478	30.0%	19,527	65,252	29.9%	19,249	63,452	30.3%
White	9,708	30,735	31.6%	9,649	30,847	31.3%	9,364	30,251	31.0%	8,708	28,427	30.6%
Other	5,137	15,423	33.3%	4,903	15,998	30.6%	4,830	16,158	29.9%	4,488	15,801	28.4%
Female	19,701	63,327	31.1%	20,116	64,880	31.0%	19,950	65,085	30.7%	19,578	62,686	31.2%
Male	21,909	68,452	32.0%	21,903	69,681	31.4%	21,845	69,815	31.3%	20,919	67,010	31.2%

^{*}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.

^{**}Children and Youth with an Open Child Welfare Case that have received at least five SMHS in the Fiscal Year.

Utilization Report*: Approved Specialty Mental Health Services for Children and Youth with an Open Child Welfare Case Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Fiscal Year Statewide as of August 9, 2017

Fiscal Year	SDMC Total Approved	IHBS (Minutes)	ICC (Minutes)	Case Management/ Brokerage (Minutes)	Mental Health Services (Minutes)	Therapeutic Behavioral 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)	Treatment	Adult Residential Treatment Services (Days)	Psychiatric Health Facility (Days)
FY 12-13	\$ 8,931.88	848	265	512	2,428	5,158	409	398	18	549	434	10	17	10	26	74	40
FY 13-14	\$ 8,891.01	2,009	1,457	465	2,139	5,037	404	412	19	541	469	11	20	11	. 19	127	33
FY 14-15	\$ 8,726.94	2,412	1,706	445	1,950	4,868	411	430	19	539	540	10	10	10	21	79	29
FY 15-16	\$ 8,983.02	2,436	1,694	443	1,956	4,797	407	404	22	576	563	9	17	11	. 21	129	25
MEAN	\$ 8,883.21	1,926	1,280	466	2,118	4,965	408	411	20	551	502	10	16	11	. 22	102	32

^{*}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 Children and Youth with and Open Child Welfare Case Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year

Statewide as of August 9, 2017

Category	Description (Please refer to the Measures Catalog for more detailed descriptions on all Performance Outcomes System measures.)
Arrivals	Children/Youth that did not receive any SMHS within 3 months of their first date of service in the Fiscal Year.
Service Continuance	Children/Youth 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	Children/Youth 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 children/youth met both the criteria for Arrivals and Exiting above for the fiscal year.
Service Continuance &	
Exiting	A distinct category in which Children/Youth 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 %		(>= 2 YR) and		Total %
FY 12-13	13,854	25.1%	3,693	6.7%	4,686	8.5%	12,029	21.8%	18,813	34.1%	2,095	3.8%	55,170	100%
FY 13-14	14,288	25.3%	3,534	6.3%	4,531	8.0%	11,950	21.2%	19,989	35.4%	2,204	3.9%	56,496	100%
FY 14-15	14,336	25.2%	3,471	6.1%	4,537	8.0%	12,163	21.4%	20,174	35.5%	2,181	3.8%	56,862	100%
FY 15-16	13,407	24.4%	3,473	6.3%	4,325	7.9%	12,289	22.3%	19,234	35.0%	2,258	4.1%	54,986	100%

Time to Step Down Report: Children and Youth with an Open Child Welfare Case Stepping Down in SMHS Services Post Inpatient Discharge Statewide as of August 9, 2017

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	between 8 and 30	Discharges with 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 12-13	2,529	77.9%	387	11.9%	329	10.1%	0	363	9.6	1
FY 13-14	2,720	79.5%	374	10.9%	326	9.5%	0	364	9.8	1
FY 14-15	2,437	75.1%	415	12.8%	391	12.1%	0	365	11.6	1
FY 15-16	2,060	75.5%	325	11.9%	342	12.5%	0	364	11.6	1

^{*} **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.