Performance Outcomes System Foster Care Reports Report run on August 3, 2016

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 county 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 children and youth in Foster Care 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: Foster Care 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; or

• Age 21 during the approved date of the service on the claim and a birth date on or after January 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 FY14/15.

• Child Welfare Services/Case Management System (CWS/CMS) data for children in FY 11/12 through FY 14/15.

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 "-" 2) Data that has been suppressed due to privacy concerns 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). As of now, this report only classifies youth and their service usage for the two most recent fiscal years. 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.

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 Foster Care Youth in Medi-Cal	Year-Over-Year Percentage Change
FY 11-12	1,969		5,583	
FY 12-13	1,963	-0.3%	6,056	8.5%
FY 13-14	2,261	15.2%	6,373	5.2%
FY 14-15	2,336	3.3%	6,927	8.7%
Compound Annual Growth Rate SFY**		5.9%		7.5%

*SMHS = Specialty Mental Health Services. See Measures Catalog for more detailed information. **SFY = State Fiscal Year which is July 1 through June 30.

Fiscal Year	Black Count	Black %	Hispanic Count	Hispanic %	White Count	White %	Other Count	Other %	
FY 11-12	406	20.6%	803	40.8%	647	32.9%	113	5.7%	
FY 12-13	400	20.4%	761	38.8%	659	33.6%	143	7.3%	
FY 13-14	434	19.2%	903	39.9%	730	32.3%	194	8.6%	
FY 14-15	454	19.4%	874	37.4%	771	33.0%	237	10.1%	

Fiscal Year	Children 0-5 Count	Children 0-5 %	Children 6-11 Count	Children 6-11 %	Children 12-17 Count	Children 12-17 %	Youth 18-20 Count	Youth 18-20 %
FY 11-12	519	26.4%	590	30.0%	796	40.4%	64	3.3%
FY 12-13	549	28.0%	612	31.2%	703	35.8%	99	5.0%
FY 13-14	677	29.9%	722	31.9%	764	33.8%	98	4.3%
FY 14-15	866	37.1%	661	28.3%	730	31.3%	79	3.4%

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

Fiscal Year	Female Count	Female %	Male Count	Male %
FY 11-12	912	46.3%	1,057	53.7%
FY 12-13	900	45.8%	1,063	54.2%
FY 13-14	984	43.5%	1,277	56.5%
FY 14-15	1,005	43.0%	1,331	57.0%

Penetration Rates* Report: Children and Youth in Foster Care with At Least One SMHS Visit** San Bernardino County as of August 3, 2016

		FY 11-12			FY 12-13			FY 13-14			FY 14-15	
	Foster Care Youth with 1 or more SMHS Visits	Certified Eligible Foster Care Youth	Penetration Rate	Foster Care Youth with 1 or more SMHS Visits	Certified Eligible Foster Care Youth	Penetration Rate	Foster Care Youth with 1 or more SMHS Visits	Certified Eligible Foster Care Youth	Penetration Rate	Foster Care Youth with 1 or more SMHS Visits	Certified Eligible Foster Care Youth	Penetration Rate
All	1,969	5,583	35.3%	1,963	6,056	32.4%	2,261	6,373	35.5%	2,336	6,927	33.7%
Children 0-5	519	2,224	23.3%	549	2,465	22.3%	677	2,577	26.3%	866	2,853	30.4%
Children 6-11	590	1,327	44.5%	612	1,534	39.9%	722	1,669	43.3%	661	1,825	36.2%
Children 12-17	796	1,699	46.9%	703	1,661	42.3%	764	1,639	46.6%	730	1,702	42.9%
Youth 18-20	64	333	19.2%	99	396	25.0%	98	488	20.1%	79	547	14.4%
Black	406	1,084	37.5%	400	1,150	34.8%	434	1,177	36.9%	454	1,218	37.3%
Hispanic	803	2,431	33.0%	761	2,624	29.0%	903	2,792	32.3%	874	3,005	29.1%
White	647	1,610	40.2%	659	1,739	37.9%	730	1,808	40.4%	771	2,032	37.9%
Other	113	458	24.7%	143	543	26.3%	194	596	32.6%	237	672	35.3%
Female	912	2,678	34.1%	900	2,899	31.0%	984	3,015	32.6%	1,005	3,320	30.3%
Male	1,057	2,905	36.4%	1,063	3,157	33.7%	1,277	3,358	38.0%	1,331	3,607	36.9%

*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. **Foster Care Youth 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: Children and Youth in Foster Care with Five or More SMHS Visits** San Bernardino County as of August 3, 2016

		FY 11-12			FY 12-13			FY 13-14			FY 14-15	
	Foster Care Youth with 5 or more SMHS Visits	Certified Eligible Foster Care Youth	Penetration Rate	Foster Care Youth with 5 or more SMHS Visits	Certified Eligible Foster Care Youth	Penetration Rate	Foster Care Youth with 5 or more SMHS Visits	Certified Eligible Foster Care Youth	Penetration Rate	Foster Care Youth with 5 or more SMHS Visits	Certified Eligible Foster Care Youth	Penetration Rate
All	1,284	5,583	23.0%	1,327	6,056	21.9%	1,473	6,373	23.1%	1,721	6,927	24.8%
Children 0-5	330	2,224	14.8%	368	2,465	14.9%	478	2,577	18.5%	607	2,853	21.3%
Children 6-11	363	1,327	27.4%	385	1,534	25.1%	433	1,669	25.9%	512	1,825	28.1%
Children 12-17	553	1,699	32.5%	506	1,661	30.5%	492	1,639	30.0%	548	1,702	32.2%
Youth 18-20	38	333	11.4%	68	396	17.2%	70	488	14.3%	54	547	9.9%
Black	261	1,084	24.1%	284	1,150	24.7%	304	1,177	25.8%	334	1,218	27.4%
Hispanic	498	2,431	20.5%	501	2,624	19.1%	527	2,792	18.9%	632	3,005	21.0%
White	460	1,610	28.6%	449	1,739	25.8%	517	1,808	28.6%	589	2,032	29.0%
Other	65	458	14.2%	93	543	17.1%	125	596	21.0%	166	672	24.7%
Female	585	2,678	21.8%	572	2,899	19.7%	621	3,015	20.6%	733	3,320	22.1%
Male	699	2,905	24.1%	755	3,157	23.9%	852	3,358	25.4%	988	3,607	27.4%

*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. **Foster Care Youth 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 Children and Youth in Foster Care Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Fiscal Year San Bernardino County as of August 3, 2016

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)		Treatment	Adult Residential Treatment Services (Days)	Psychiatric Health Facility (Days)
FY 11-12	\$ 4,159.21	0	0	224	1,410	3,367	210	222	15	522	562	3	0	8	C	0	16
FY 12-13	\$ 4,945.44	0	0	252	1,639	2,635	191	223	11	572	527	6	0	7	C	0	36
FY 13-14	\$ 5,138.77	1,230	863	304	1,555	2,497	221	202	13	691	401	2	0	7	4	0	81
FY 14-15	\$ 5,409.00	2,599	1,099	326	1,488	2,632	227	221	12	679	544	3	0	6	39	0	58
MEAN	\$ 4,913.11	1,914	981	277	1,523	2,783	212	217	13	616	508	3	0	7	21	. 0	48

*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.

Snapshot Report: Unique Count of Children and Youth in Foster Care Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year San Bernardino County as of August 3, 2016

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		Service Continuance (<2 YR) Count		Exiting Count	Exiting %	Arriving & Exiting Count	Exiting %	Service Continuance (>= 2 YR) & Exiting Count	(>= 2 YR) and	Total Count	Total %
FY 12-13	459	23.3%	100	5.1%	164	8.3%	400	20.3%	789	40.1%	55	2.8%	1,967	100%
FY 13-14	545	24.1%	95	4.2%	156	6.9%	411	18.2%	989	43.8%	61	2.7%	2,257	100%
FY 14-15	665	28.5%	82	3.5%	166	7.1%	487	20.9%	860	36.9%	70	3.0%	2,330	100%

Time to Step Down Report: Children and Youth in Foster Care Stepping Down in SMHS Services Post Inpatient Discharge* San Bernardino County as of August 3, 2016

Service FY	Count of Inpatient Discharges with Step Down within 7 Days of Discharge	Inpatient Discharges with Step Down within 7 Days of	between 8 and 30	Inpatient Discharges with Step Down between 8 and 30				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	195	57.5%	75	22.1%	69	20.4%	0	365	26.4	4
FY 12-13	177	69.4%	33	12.9%	45	17.6%	0	365	22.6	1
FY 13-14	217	72.6%	39	13.0%	43	14.4%	0	365	13.3	1
FY 14-15	236	69.6%	45	13.3%	58	17.1%	0	365	15.2	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.