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.

Performance Outcomes System Foster Care Reports

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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 "-" 2) Data that has been suppressed due to privacy concerns is indicated as "A".

Report Interpretation

*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 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 report 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.

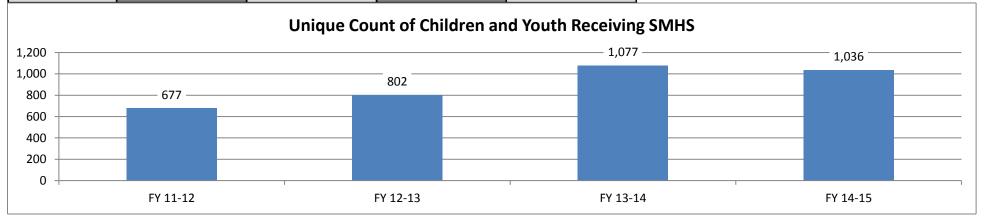
*Open Child Welfare: Children/youth who are provided child welfare services either while living in their home, or while living out-of-home in a foster care setting. Excludes children: placed in California under the jurisdiction of another state (incoming interstate Compact on the Placement of Children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

Demographics Report: Unique Count of Current Children and Youth in Foster Care Receiving SMHS by Fiscal Year San Joaquin County as of August 3, 2016

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	677		1,604	
FY 12-13	802	18.5%	1,682	4.9%
FY 13-14	1,077	34.3%	1,939	15.3%
FY 14-15	1,036	-3.8%	1,997	3.0%
Compound Annual Growth Rate SFY**		15.2%		7.6%

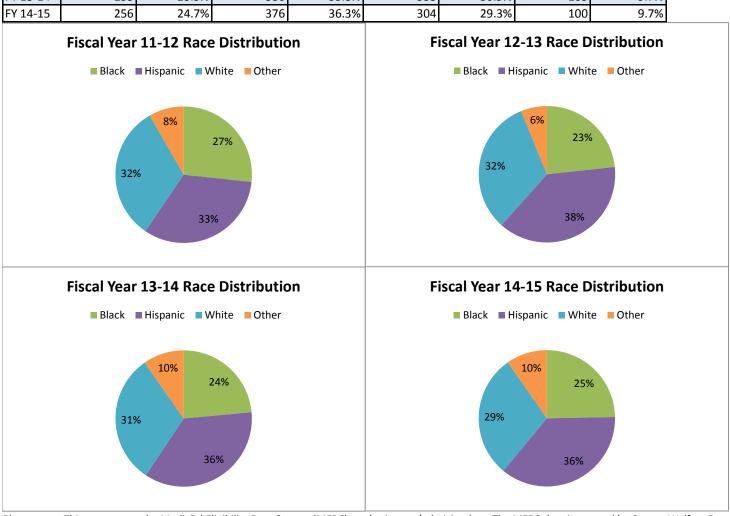


^{*}SMHS = Specialty Mental Health Services. See Measures Catalog for more detailed information.

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

Demographics Report: Unique Count of Current Children and Youth in Foster Care Receiving SMHS by Fiscal Year San Joaquin County as of August 3, 2016

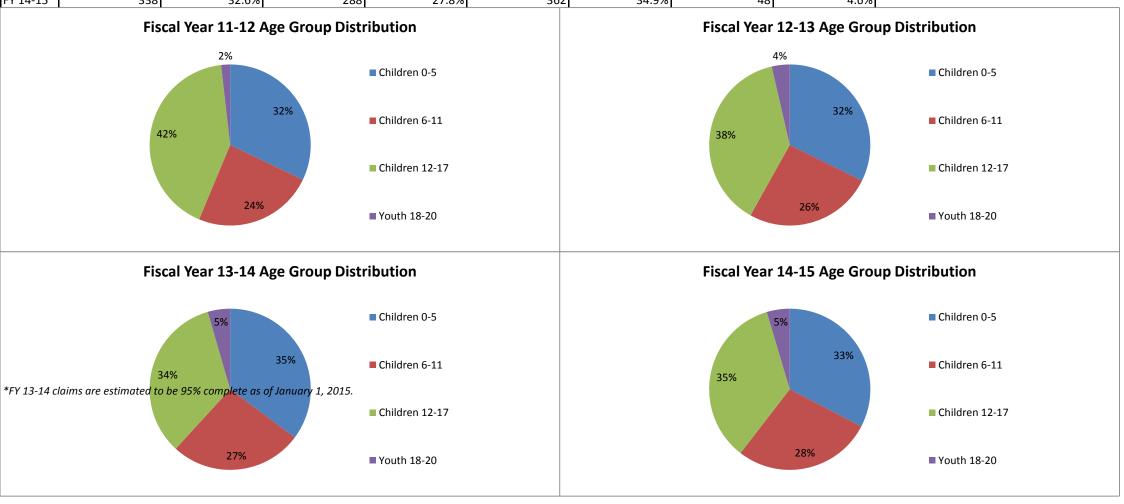
Fiscal Year	Black Count	Black %	Hispanic Count	Hispanic %	White Count	White %	Other Count	Other %
FY 11-12	181	26.7%	222	32.8%	218	32.2%	56	8.3%
FY 12-13	187	23.3%	307	38.3%	258	32.2%	50	6.2%
FY 13-14	253	23.5%	386	35.8%	333	30.9%	105	9.7%
FY 14-15	256	24.7%	376	36.3%	304	29.3%	100	9.7%



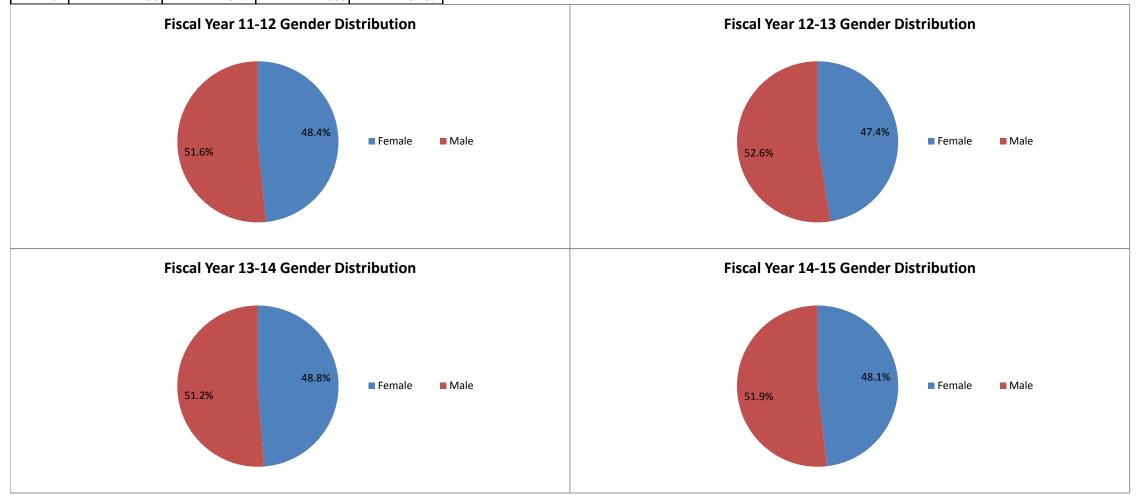
Please note: This report uses the Medi-Cal Eligibility Data System (MEDS) to obtain race/ethnicity data. The MEDS data is entered by County Welfare Departments and may differ from data maintained by County Mental Health Plans. For more information, please refer to the Measures Catalog

Demographics Report: Unique Count of Current Children and Youth in Foster Care Receiving SMHS by Fiscal Year San Joaquin County as of August 3, 2016

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	217	32.1%	164	24.2%	284	41.9%	12	1.8%
FY 12-13	259	32.3%	207	25.8%	307	38.3%	29	3.6%
FY 13-14	379	35.2%	286	26.6%	363	33.7%	49	4.5%
FY 14-15	338	32.6%	288	27.8%	362	34.9%	48	4.6%

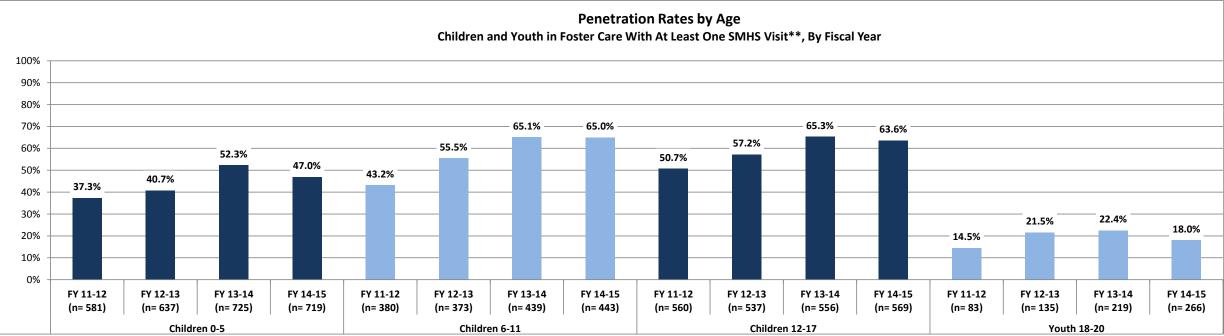


Fiscal Year	Female Count	Female %	Male Count	Male %
FY 11-12	328	48.4%	349	51.6%
FY 12-13	380	47.4%	422	52.6%
FY 13-14	526	48.8%	551	51.2%
FY 14-15	498	48.1%	538	51.9%



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

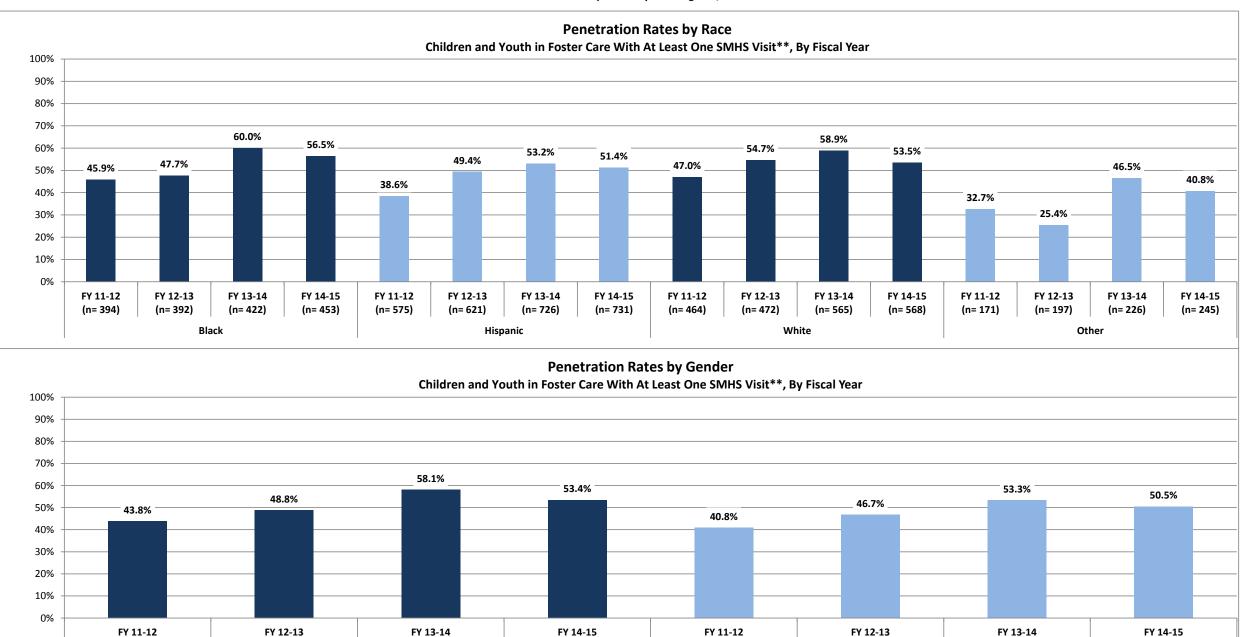
		FY 11-12			FY 12-13			FY 13-14			FY 14-15	
	Foster Care Youth with 1 or more SMHS Visits	Certified Eligible Foster Care Youth	Penetration Rate	Foster Care Youth with 1 or more SMHS Visits	Certified Eligible Foster Care Youth	Penetration Rate	Foster Care Youth with 1 or more SMHS Visits	Certified Eligible Foster Care Youth	Penetration Rate	Foster Care Youth with 1 or more SMHS Visits	Certified Eligible Foster Care Youth	Penetration Rate
All	677	1,604	42.2%	802	1,682	47.7%	1,077	1,939	55.5%	1,036	1,997	51.9%
Children 0-5	217	581	37.3%	259	637	40.7%	379	725	52.3%	338	719	47.0%
Children 6-11	164	380	43.2%	207	373	55.5%	286	439	65.1%	288	443	65.0%
Children 12-17	284	560	50.7%	307	537	57.2%	363	556	65.3%	362	569	63.6%
Youth 18-20	12	83	14.5%	29	135	21.5%	49	219	22.4%	48	266	18.0%
Black	181	394	45.9%	187	392	47.7%	253	422	60.0%	256	453	56.5%
Hispanic	222	575	38.6%	307	621	49.4%	386	726	53.2%	376	731	51.4%
White	218	464	47.0%	258	472	54.7%	333	565	58.9%	304	568	53.5%
Other	56	171	32.7%	50	197	25.4%	105	226	46.5%	100	245	40.8%
Female	328	749	43.8%	380	779	48.8%	526	906	58.1%	498	932	53.4%
Male	349	855	40.8%	422	903	46.7%	551	1,033	53.3%	538	1,065	50.5%



^{*}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 in Foster Care 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: Unique Count of Current Children and Youth in Foster Care with At Least One SMHS Visit** San Joaquin County as of August 3, 2016



(n= 932)

Female

(n= 906)

(n= 779)

(n= 749)

(n= 855)

(n= 903)

(n= 1,033)

Male

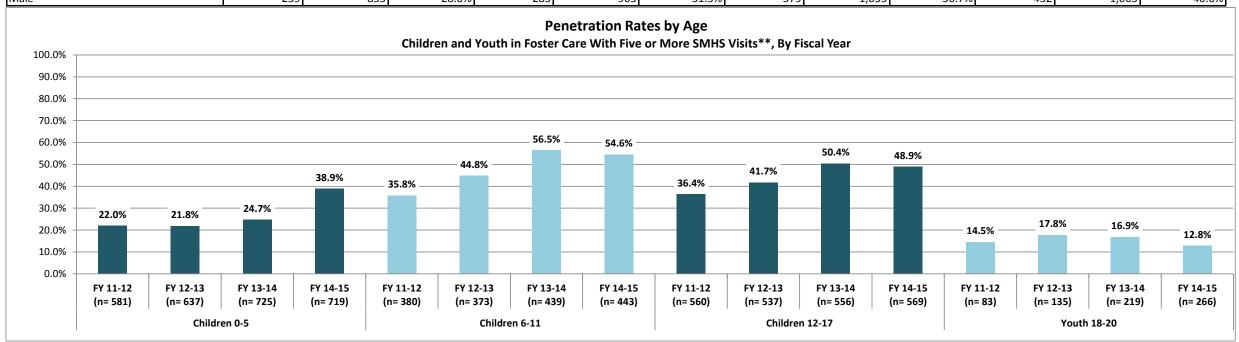
(n= 1,065)

^{*}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: Unique Count of Current Children and Youth in Foster Care with Five or More SMHS Visits** San Joaquin County as of August 3, 2016

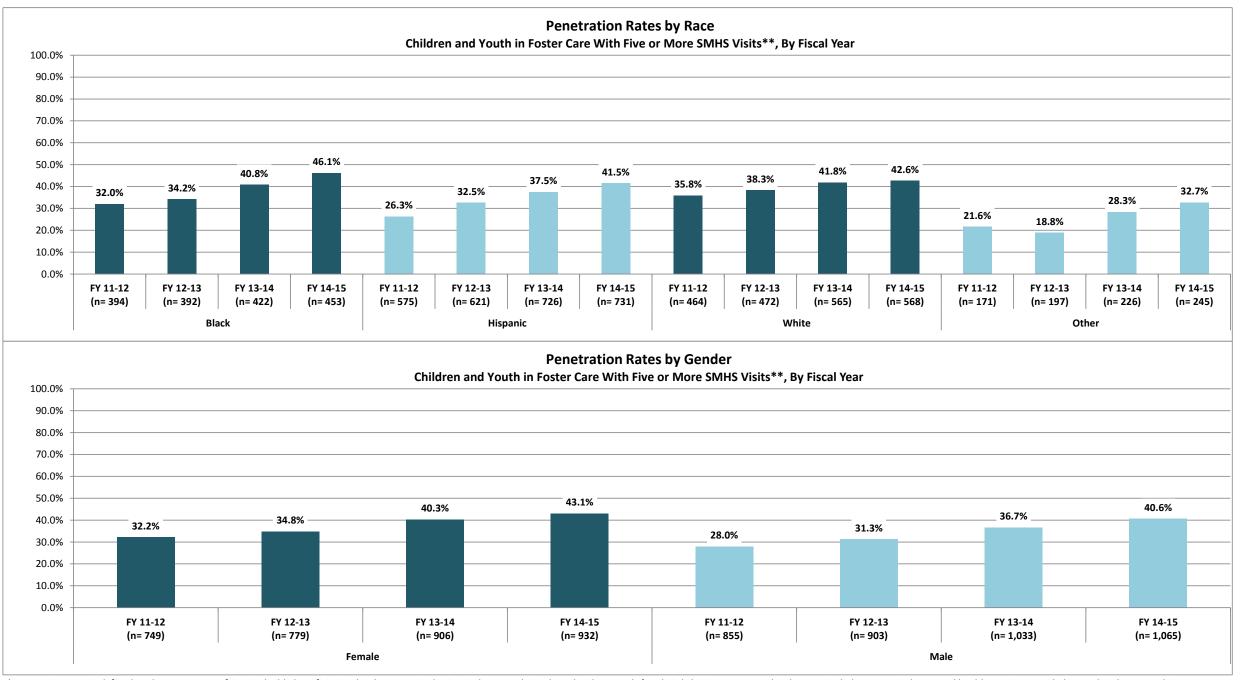
		FY 11-12			FY 12-13			FY 13-14			FY 14-15	
	Foster Care Youth with 5 or more SMHS Visits	Certified Eligible Foster Care Youth	Penetration Rate	Foster Care Youth with 5 or more SMHS Visits	Certified Eligible Foster Care Youth	Penetration Rate	Foster Care Youth with 5 or more SMHS Visits	Certified Eligible Foster Care Youth	Penetration Rate	Foster Care Youth with 5 or more SMHS Visits	Certified Eligible Foster Care Youth	Penetration Rate
All	480	1,604	29.9%	554	1,682	32.9%	744	1,939	38.4%	834	1,997	41.8%
Children 0-5	128	581	22.0%	139	637	21.8%	179	725	24.7%	280	719	38.9%
Children 6-11	136	380	35.8%	167	373	44.8%	248	439	56.5%	242	443	54.6%
Children 12-17	204	560	36.4%	224	537	41.7%	280	556	50.4%	278	569	48.9%
Youth 18-20	12	83	14.5%	24	135	17.8%	37	219	16.9%	34	266	12.8%
Black	126	394	32.0%	134	392	34.2%	172	422	40.8%	209	453	46.1%
Hispanic	151	575	26.3%	202	621	32.5%	272	726	37.5%	303	731	41.5%
White	166	464	35.8%	181	472	38.3%	236	565	41.8%	242	568	42.6%
Other	37	171	21.6%	37	197	18.8%	64	226	28.3%	80	245	32.7%
Female	241	749	32.2%	271	779	34.8%	365	906	40.3%	402	932	43.1%
Male	239	855	28.0%	283	903	31.3%	379	1,033	36.7%	432	1,065	40.6%



^{*}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 in Foster Care 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: Unique Count of Current Children and Youth in Foster Care with Five or More SMHS Visits** San Joaquin County as of August 3, 2016

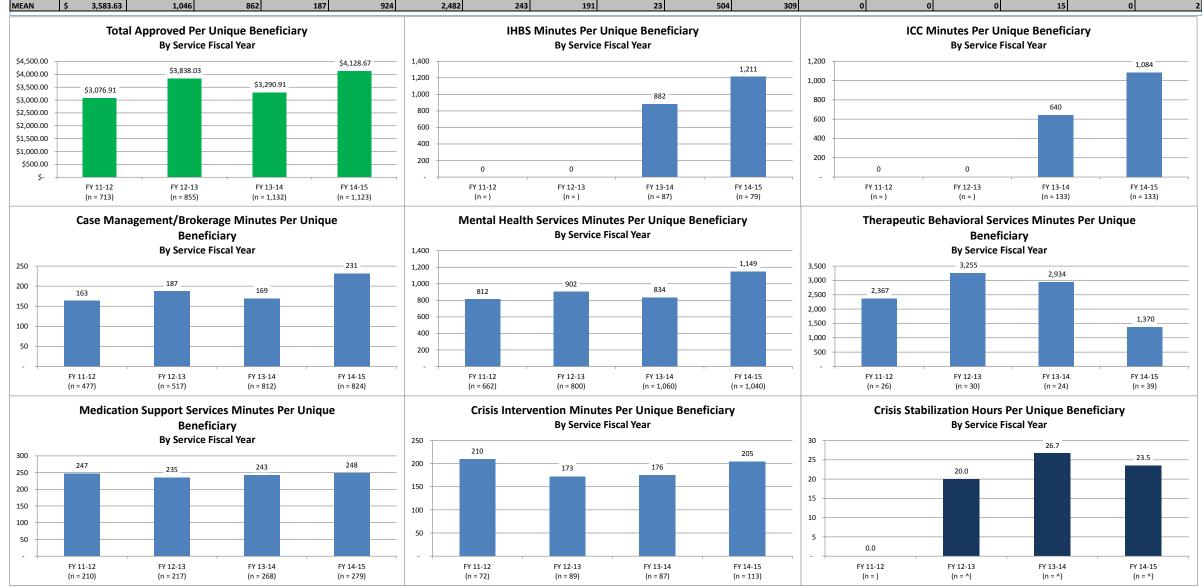


^{*}Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in Medi-Cal Managed Care system.

**Children and Youth in Foster Care 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 Joaquin 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)	Fee for Service Inpatient (Days)	_	Adult Residential Treatment Services (Days)	
FY 11-12	\$ 3,076.91	0	0	163	812	2,367	247	210	0	327	309	0	0	C	0	0	1
FY 12-13	\$ 3,838.03	0	0	187	902	3,255	235	173	20	644	0	0	0	0	0	0	1
FY 13-14	\$ 3,290.91	882	640	169	834	2,934	243	176	27	507	0	0	0	C	0	0	1
FY 14-15	\$ 4,128.67	1,211	1,084	231	1,149	1,370	248	205	24	539	0	0	0	0	15	0	4
MEAN	\$ 3,583.63	1,046	862	187	924	2,482	243	191	23	504	309	0	0	0	15	0	2



^{*}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.

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 Joaquin County as of August 3, 2016



FY 12-13

(n =)

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.

FY 14-15

0.0

FY 13-14

(n =)

0.0

FY 11-12

(n =)

1.0

FY 13-14

(n = ^)

FY 14-15 (n = ^)

1.0

FY 12-13

(n = ^)

FY 11-12

(n = ^)

^{*}The graphs are color coded so that those reported in the same unit of analysis (e.g., minutes) are colored similarly.

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

Snapshot Report: Unique Count of Current Children and Youth in Foster Care Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year

San Joaquin 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.

ı	Service Fiscal Year	Arrivals Count	Arrivals %	Service Continuance (>= 2 YR) Count	Continuance	Service Continuance (<2 YR) Count		Exiting Count	Exiting %	Arriving & Exiting Count	Exiting %	Service Continuance (>= 2 YR) & Exiting Count	Service Continuance (>= 2 YR) and Exiting %	Total Count	Total %
F	Y 12-13	170	21.3%	^	^	52	6.5%	163	20.4%	361	45.2%	^	۸	798	100%
F	Y 13-14	303	28.1%	41	3.8%	50	4.6%	151	14.0%	512	47.5%	21	1.9%	1,078	100%
F	Y 14-15	290	28.0%	47	4.5%	76	7.3%	250	24.1%	358	34.5%	16	1.5%	1,037	100%

CHARTS NOT PRODUCED DUE TO SMALL CELL SIZES.

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

Service FY	Discharges with Step Down within 7 Days of Discharge	Discharges with Step Down within 7 Days of Discharge	Discharges with Step Down within 30 Days of Discharge	Discharges with Step Down within 30 Days of Discharge	Discharges with a Step Down > 30 Days from Discharge	Discharges with a Step Down > 30 Days from Discharge	Count of Inpatient Discharges with No Step Down*	Inpatient Discharges with No Step Down*	of Days between Discharge and Step Down	Number of Days between Discharge and Step Down	Next Contact Post Inpatient Discharge (Days)	Inpatient Discharge (Days)
FY 11-12	0		0				0		0	0		
FY 12-13	0		0				0	0.011	0	0		
FY 13-14	0		0	4.4.1				0.011	0	0		
FY 14-15	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0	0.0	
10 9 8 7			vice in Days		AN		HA	RT	Service in I	•		
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100% 80% 60%) U ₀ C	EC	FY 12-13	FY 13-14	T 0 1 0 1 1 1 1 1 1 1	S _{0.0} FY 10-11 ient Dischar	Se Sep	CA	TOF	R D	
100% 80% 60% 40%) U ₀ C	EC	FY 12-13	FY 13-14	T 0 1 0 1 1 1 1 1 1 1	S _{0.0} FY 10-11 ient Dischar	Se Sep	CA	TOF	R D	
100% 80% 60% 40% 20%	FY 10-11	FY 11-12	EC	FY 12-13	FY 13-14 SANTINE BE Within 7 Days Wi	T 0 1 0 1 1 1 1 1 1 1	S _{0.0} FY 10-11 ient Dischar	ge and step	CA	TOF	R D	
100% 80% 60% 40%	FY 10-11	FY 11-12 F	EC	FY 12-13 Solves	FY 13-14 SATINE BE Within 7 Days Wi	T 0 1 0 1 1 1 1 1 1 1	S _{0.0} FY 10-11 ient Dischar	ge and step	CA	TOF	P D FY :	
100% 80% 60% 40% 20%	FY 10-11	FY 11-12	EC	FY 12-13 Solves	FY 13-14 SANTINE BE Within 7 Days Wi	T 0 1 0 1 1 1 1 1 1 1	S _{0.0} FY 10-11 ient Dischar, 1 Days + No Step	ge and step	CA	FY 12-13	R D	

* 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.

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