

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

<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 "^".

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 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 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.

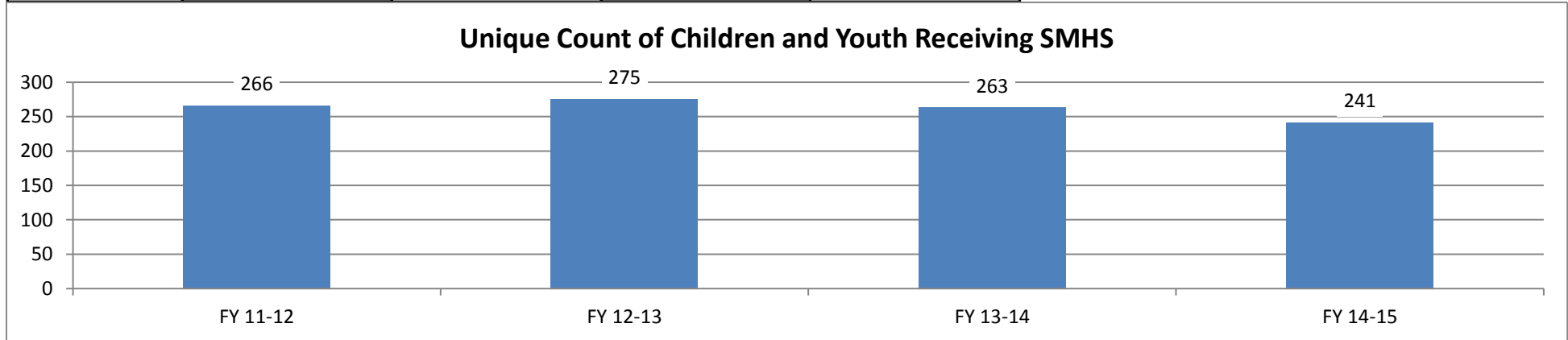
***Open Child Welfare:** Children/youth who are provided child welfare services either while living in their home, or while living out-of-home in a foster care setting. Excludes children: placed in California under the jurisdiction of another state (incoming interstate Compact on the Placement of Children (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 Santa Cruz
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	266		428	
FY 12-13	275	3.4%	405	-5.4%
FY 13-14	263	-4.4%	411	1.5%
FY 14-15	241	-8.4%	388	-5.6%
Compound Annual Growth Rate SFY**		-3.2%		-3.2%



*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
 Santa Cruz County as of August 3, 2016

Fiscal Year	Black Count	Black %	Hispanic Count	Hispanic %	White Count	White %	Other Count	Other %
FY 11-12	12	4.5%	118	44.4%	123	46.2%	13	4.9%
FY 12-13	^	^	121	44.0%	134	48.7%	^	^
FY 13-14	^	^	116	44.1%	123	46.8%	^	^
FY 14-15	^	^	97	40.2%	104	43.2%	^	^

CHARTS NOT PRODUCED DUE TO SMALL CELL SIZES.

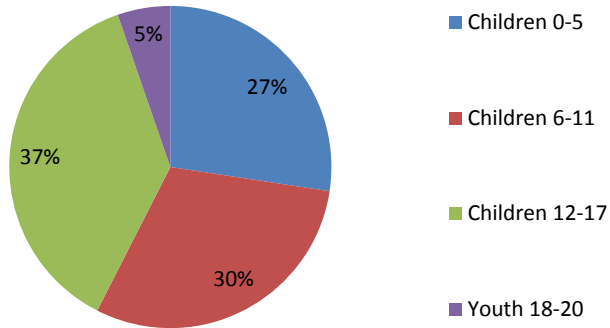
[^] Data has been suppressed to protect patient privacy.

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

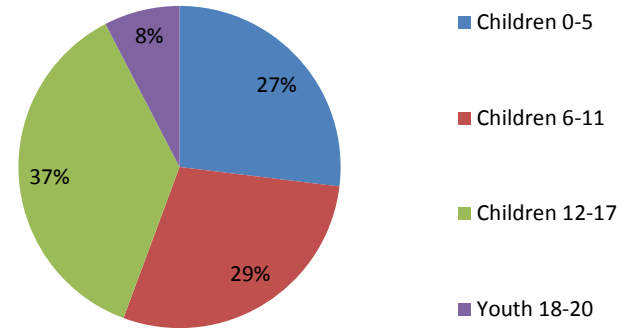
Demographics Report: Unique Count of Current Children and Youth in Foster Care Receiving SMHS by Fiscal Year
 Santa Cruz County as of August 3, 2016

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	73	27.4%	80	30.1%	99	37.2%	14	5.3%
FY 12-13	74	26.9%	79	28.7%	101	36.7%	21	7.6%
FY 13-14	54	20.5%	84	31.9%	102	38.8%	23	8.7%
FY 14-15	44	18.3%	77	32.0%	83	34.4%	37	15.4%

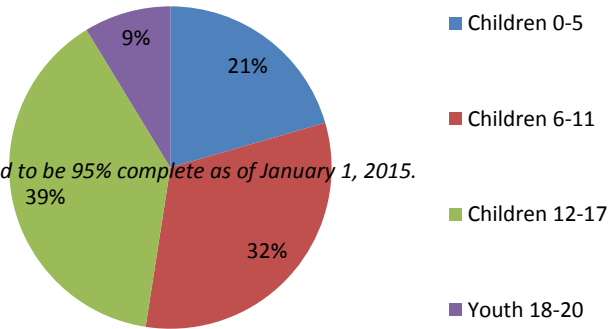
Fiscal Year 11-12 Age Group Distribution



Fiscal Year 12-13 Age Group Distribution

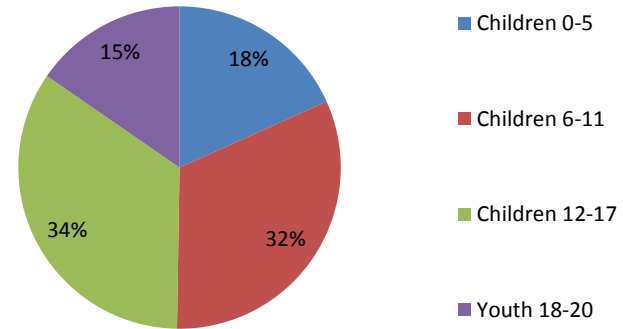


Fiscal Year 13-14 Age Group Distribution



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

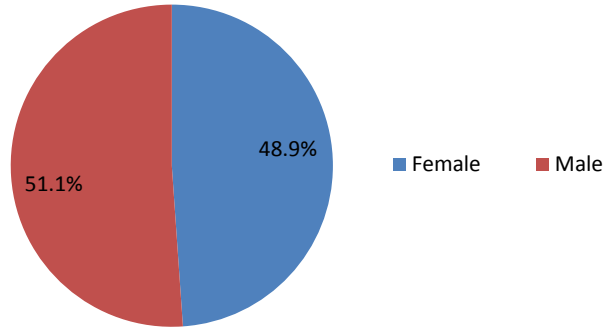
Fiscal Year 14-15 Age Group Distribution



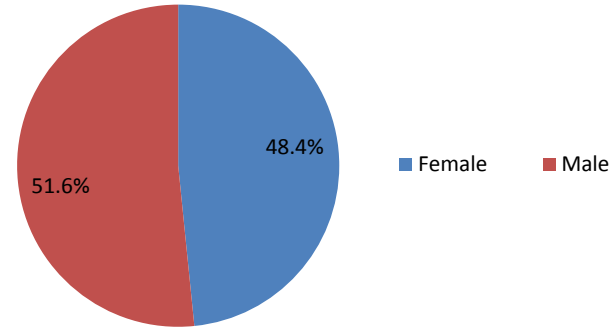
Demographics Report: Unique Count of Current Children and Youth in Foster Care Receiving SMHS by Fiscal Year
 Santa Cruz County as of August 3, 2016

Fiscal Year	Female Count	Female %	Male Count	Male %
FY 11-12	130	48.9%	136	51.1%
FY 12-13	133	48.4%	142	51.6%
FY 13-14	127	48.3%	136	51.7%
FY 14-15	118	49.0%	123	51.0%

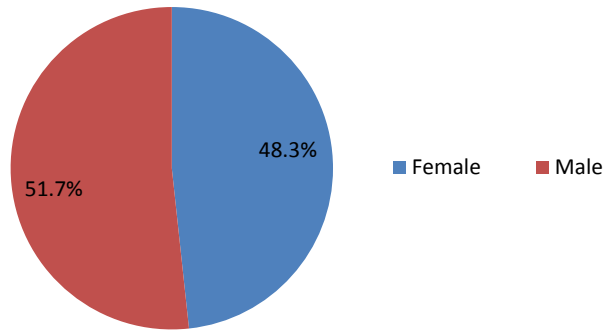
Fiscal Year 11-12 Gender Distribution



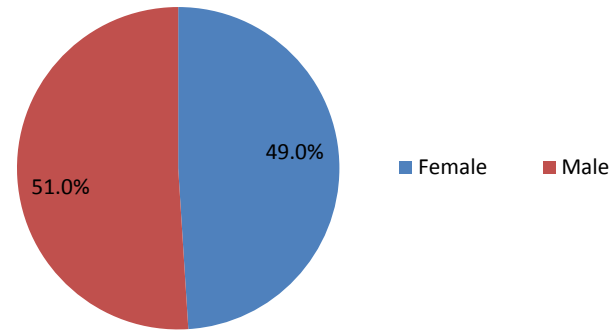
Fiscal Year 12-13 Gender Distribution



Fiscal Year 13-14 Gender Distribution



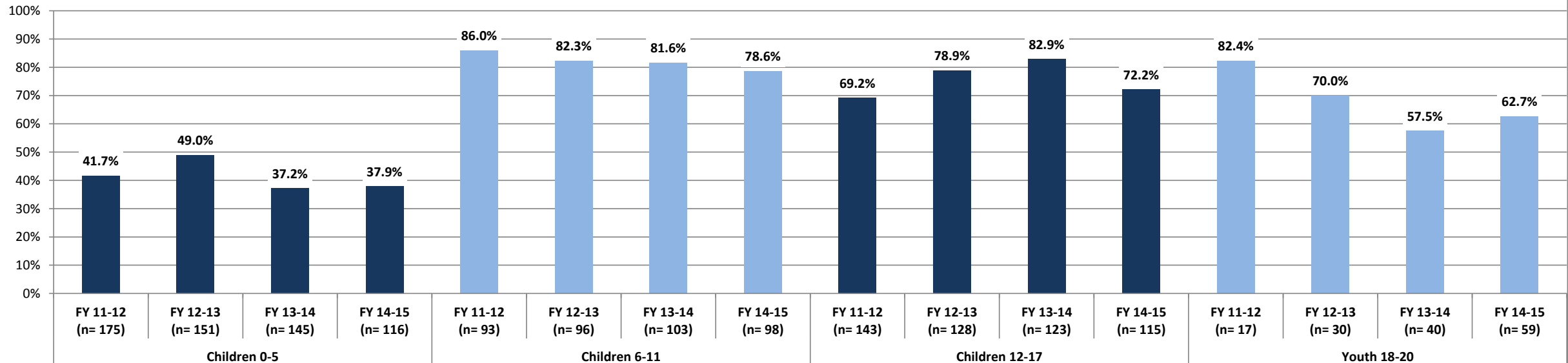
Fiscal Year 14-15 Gender Distribution



Penetration Rates* Report: Unique Count of Current Children and Youth in Foster Care with At Least One SMHS Visit**
 Santa Cruz 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	266	428	62.1%	275	405	67.9%	263	411	64.0%	241	388	62.1%
Children 0-5	73	175	41.7%	74	151	49.0%	54	145	37.2%	44	116	37.9%
Children 6-11	80	93	86.0%	79	96	82.3%	84	103	81.6%	77	98	78.6%
Children 12-17	99	143	69.2%	101	128	78.9%	102	123	82.9%	83	115	72.2%
Youth 18-20	14	17	82.4%	21	30	70.0%	23	40	57.5%	37	59	62.7%
Black	12	19	63.2%	^	16	^	^	12	^	^	14	^
Hispanic	118	168	70.2%	121	162	74.7%	116	177	65.5%	97	162	59.9%
White	123	188	65.4%	134	176	76.1%	123	173	71.1%	104	148	70.3%
Other	13	53	24.5%	^	51	^	^	49	^	^	64	^
Female	130	192	67.7%	133	183	72.7%	127	189	67.2%	118	182	64.8%
Male	136	236	57.6%	142	222	64.0%	136	222	61.3%	123	206	59.7%

Penetration Rates by Age
 Children and Youth in Foster Care With At Least One SMHS Visit**, By Fiscal Year

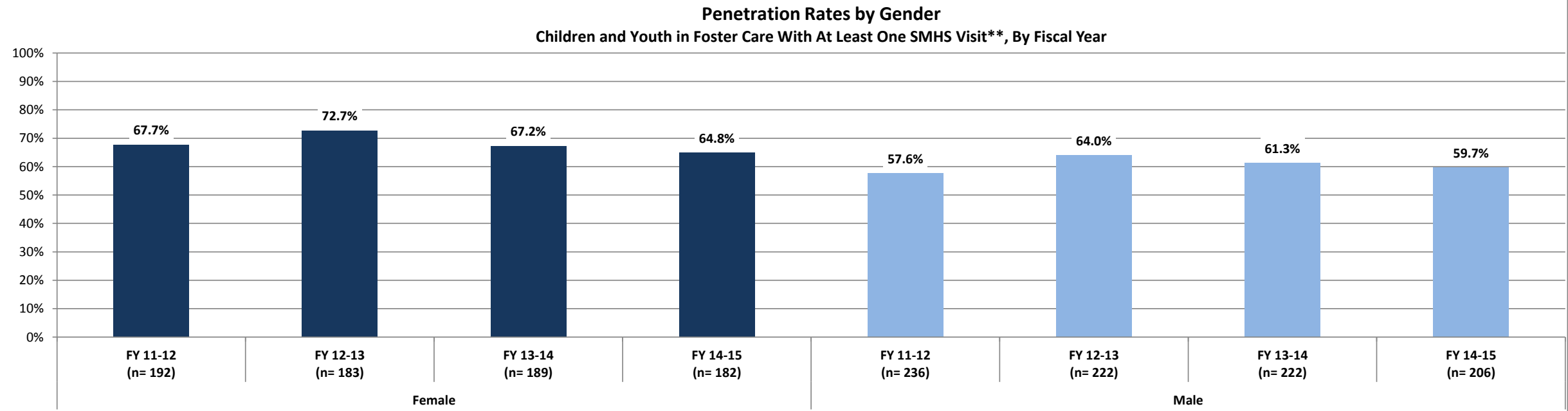
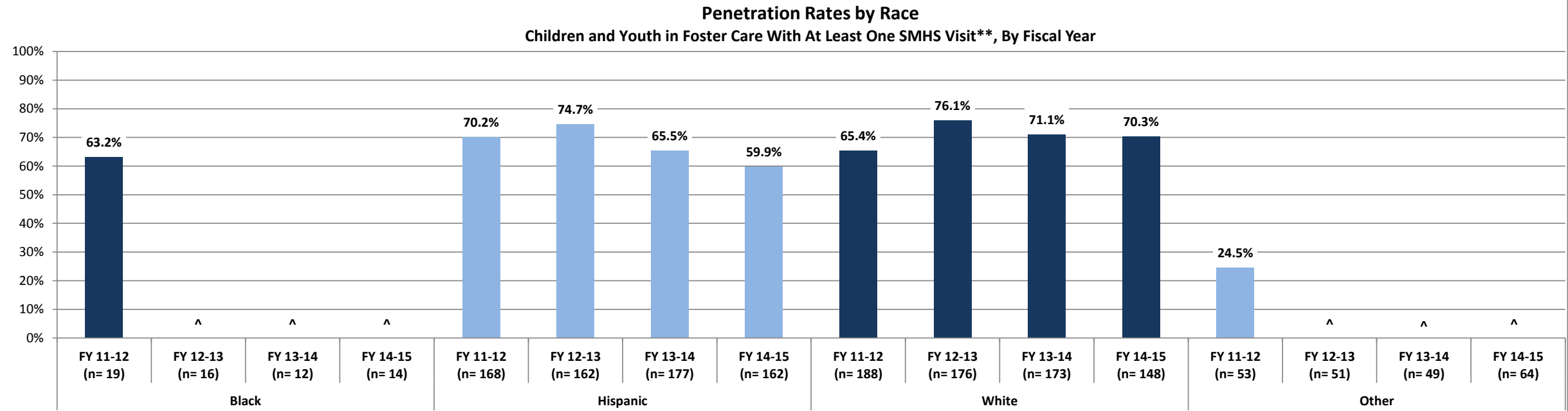


*Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in Medi-Cal Managed Care system.

**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.

^ Data has been suppressed to protect patient privacy.

Penetration Rates* Report: Unique Count of Current Children and Youth in Foster Care with At Least One SMHS Visit**
 Santa Cruz 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 one SMHS that was claimed through the Short-Doyle/ Medi-Cal claiming system on at least one (1) day in the Fiscal Year.

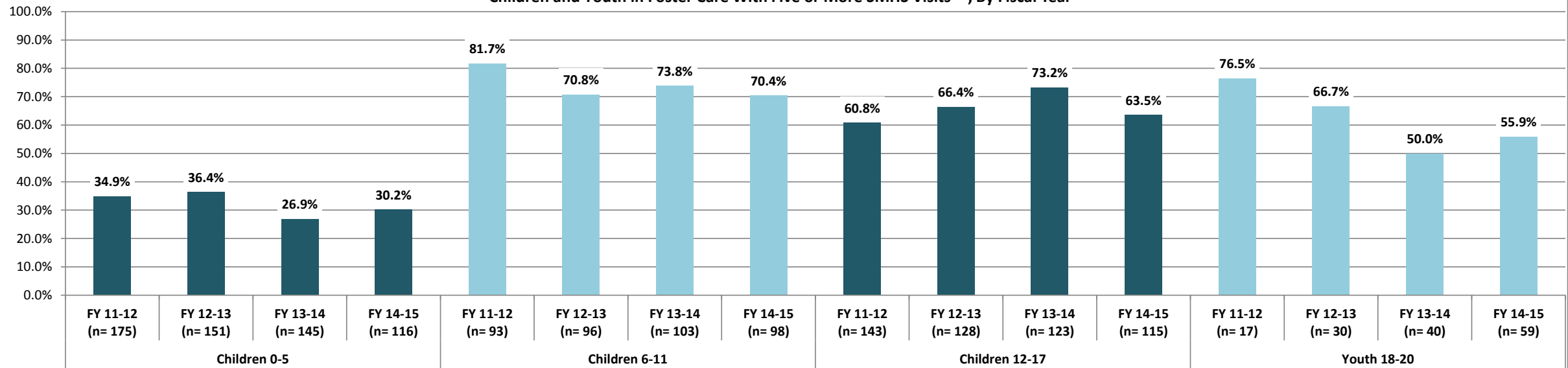
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Penetration Rates* Report: Unique Count of Current Children and Youth in Foster Care with Five or More SMHS Visits**
 Santa Cruz County as of August 3, 2016

	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	237	428	55.4%	228	405	56.3%	225	411	54.7%	210	388	54.1%
Children 0-5	61	175	34.9%	55	151	36.4%	39	145	26.9%	35	116	30.2%
Children 6-11	76	93	81.7%	68	96	70.8%	76	103	73.8%	69	98	70.4%
Children 12-17	87	143	60.8%	85	128	66.4%	90	123	73.2%	73	115	63.5%
Youth 18-20	13	17	76.5%	20	30	66.7%	20	40	50.0%	33	59	55.9%
Black	11	19	57.9%	^	16	^	^	12	^	^	14	^
Hispanic	103	168	61.3%	93	162	57.4%	102	177	57.6%	87	162	53.7%
White	111	188	59.0%	118	176	67.0%	102	173	59.0%	88	148	59.5%
Other	12	53	22.6%	^	51	^	^	49	^	^	64	^
Female	113	192	58.9%	108	183	59.0%	112	189	59.3%	104	182	57.1%
Male	124	236	52.5%	120	222	54.1%	113	222	50.9%	106	206	51.5%

Penetration Rates by Age

Children and Youth in Foster Care With Five or More SMHS Visits, By Fiscal Year**



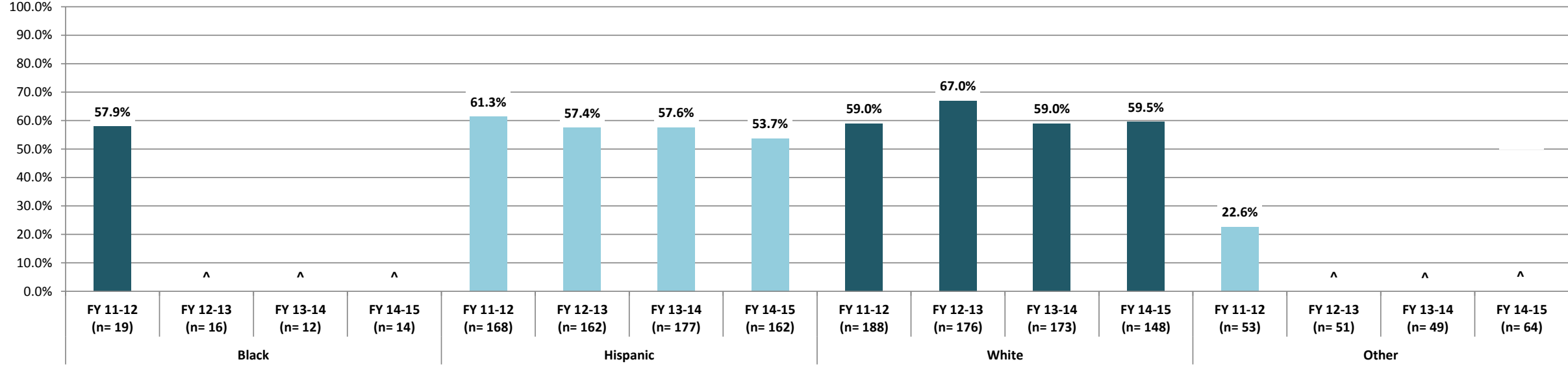
*Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in Medi-Cal Managed Care system.

**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.

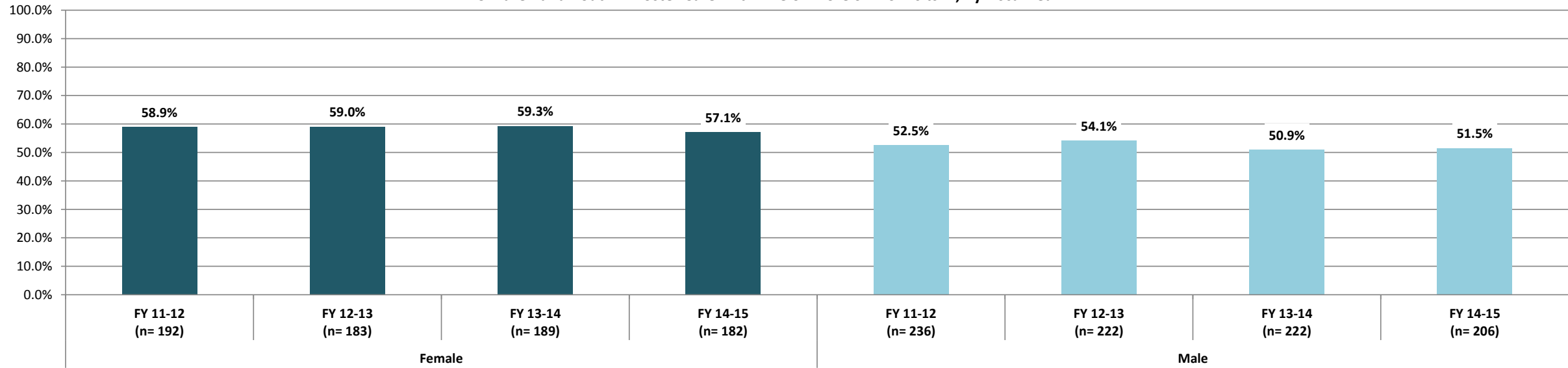
^ Data has been suppressed to protect patient privacy.

Penetration Rates* Report: Unique Count of Current Children and Youth in Foster Care with Five or More SMHS Visits**
 Santa Cruz County as of August 3, 2016

Penetration Rates by Race
 Children and Youth in Foster Care With Five or More SMHS Visits**, By Fiscal Year



Penetration Rates by Gender
 Children and Youth in Foster Care With Five or More SMHS Visits**, By Fiscal Year



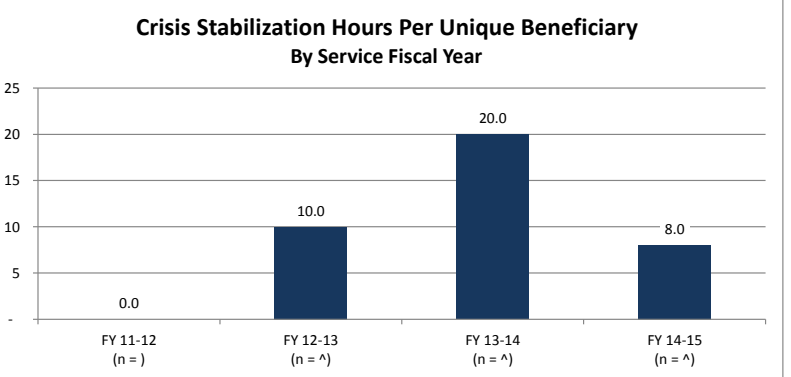
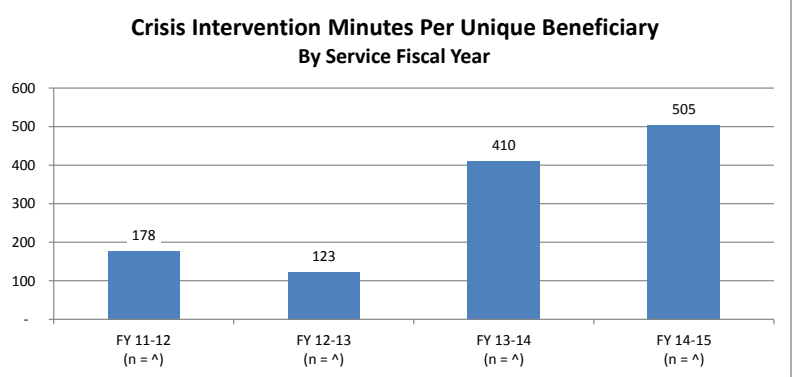
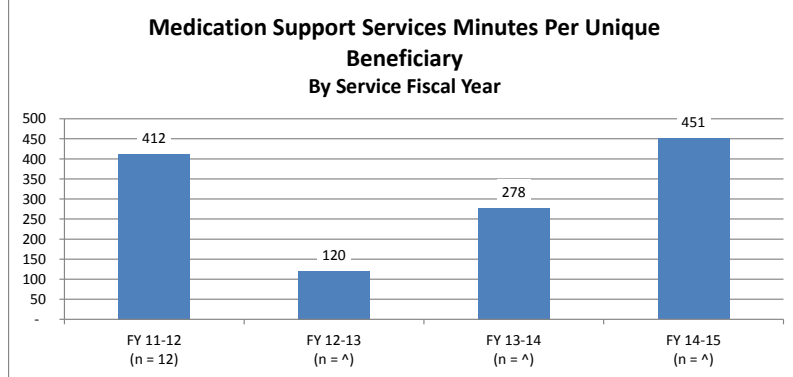
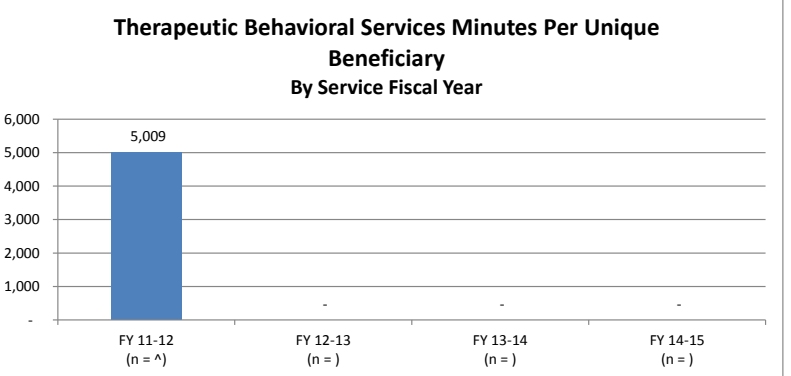
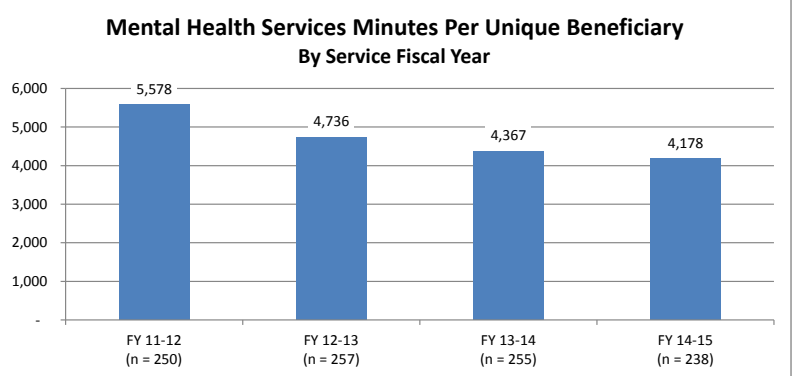
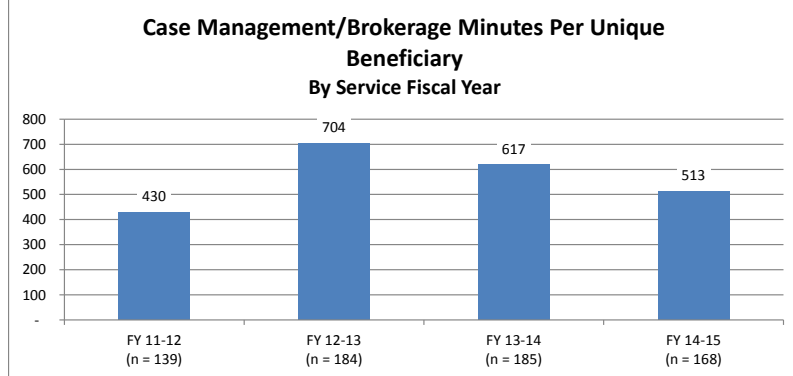
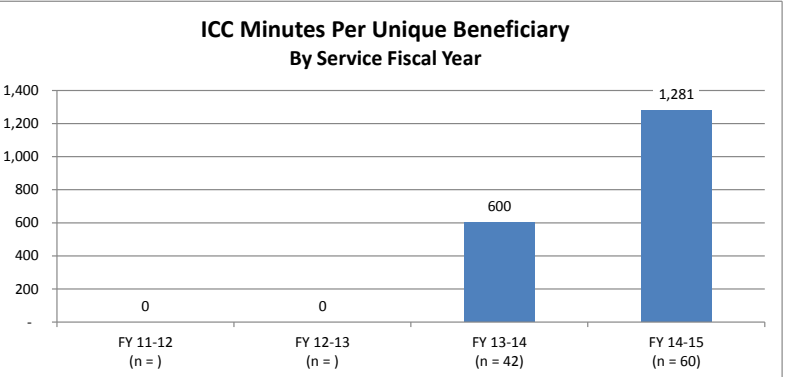
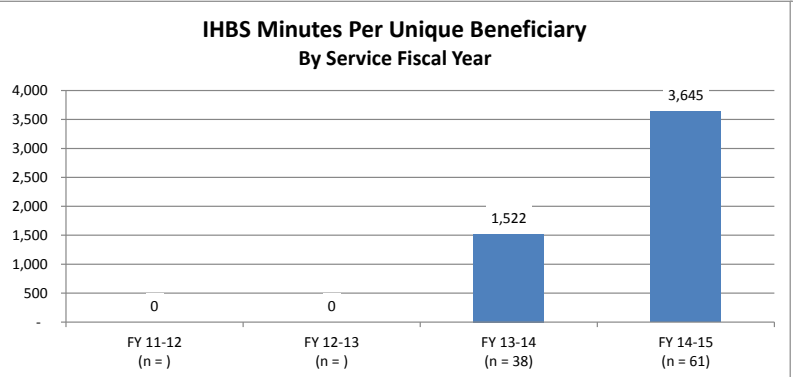
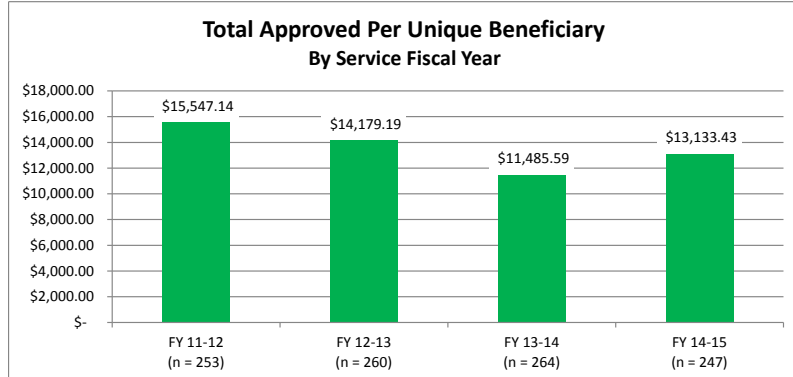
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**Children and Youth in Foster Care that have received at least five SMHS that were claimed through the Short-Doyle/ Medi-Cal claiming system on at least five (5) or more different days in the Fiscal Year.

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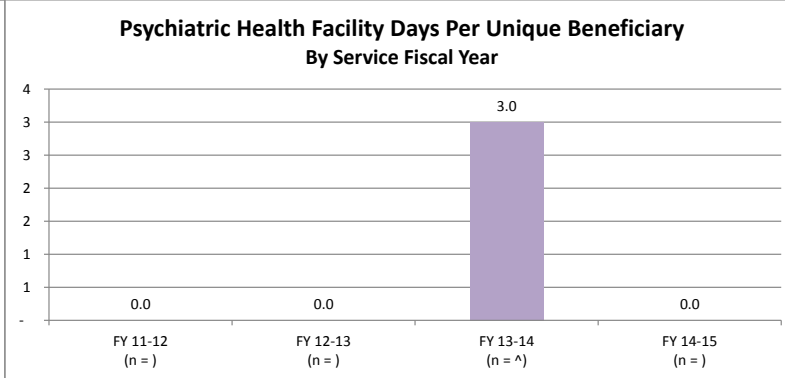
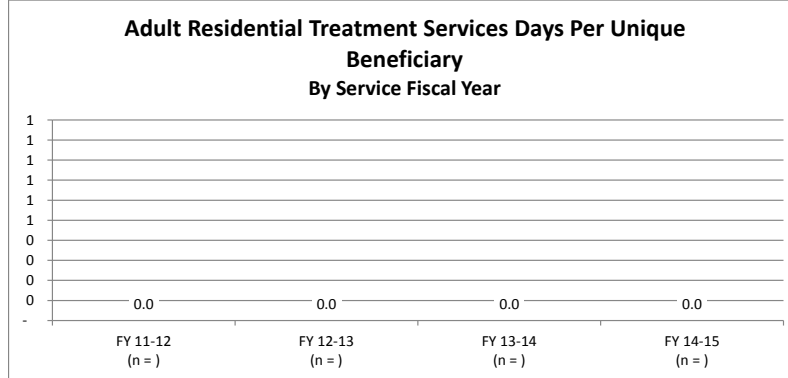
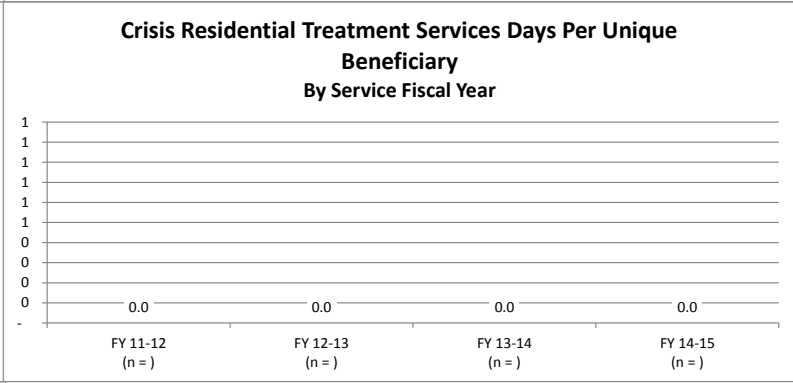
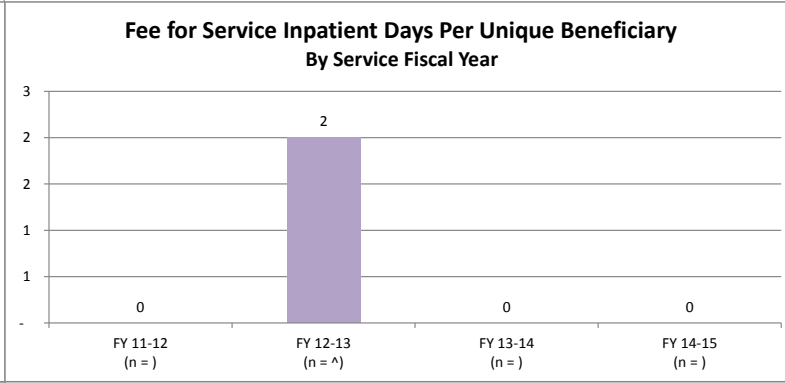
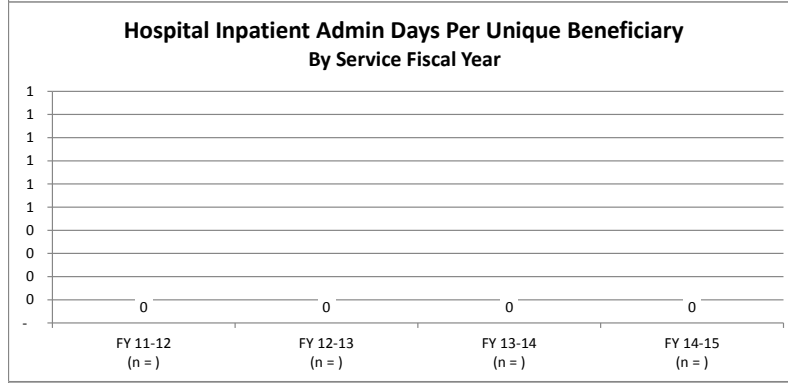
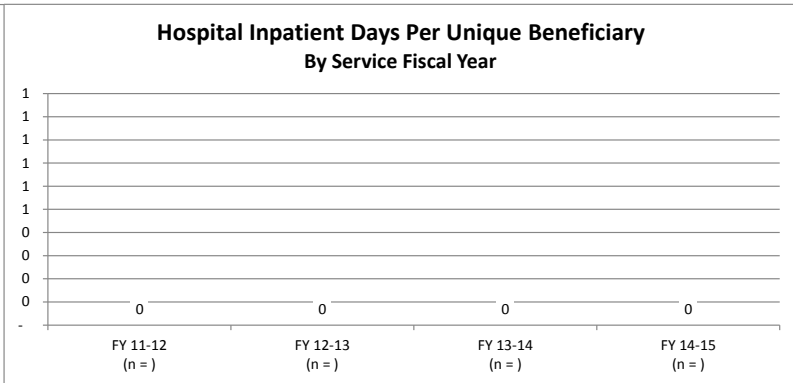
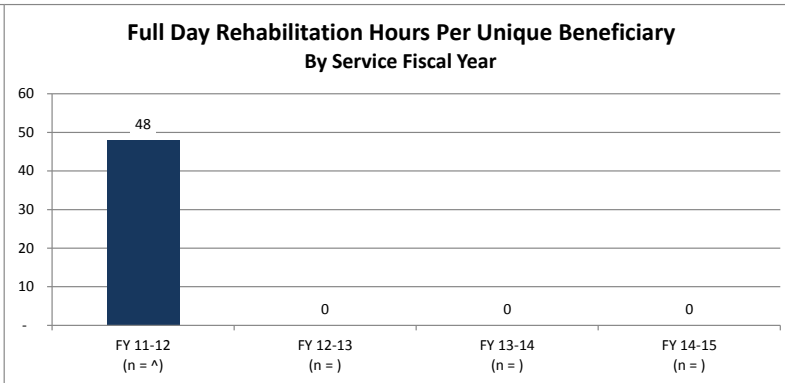
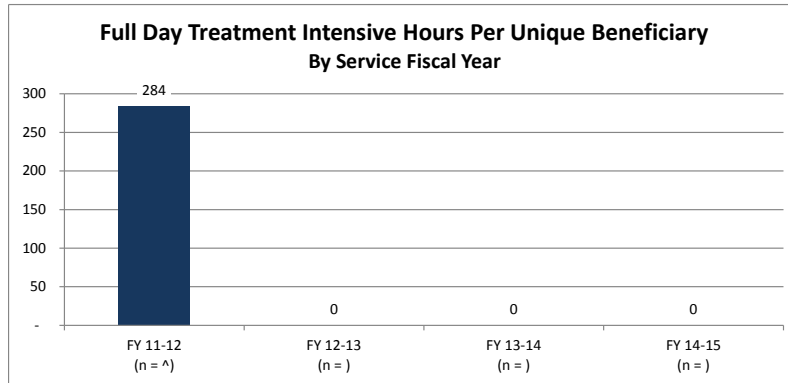
Utilization Report*: Approved Specialty Mental Health Services for Children and Youth in Foster Care
Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Fiscal Year
 Santa Cruz County as of August 3, 2016

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)	Crisis Residential Treatment Services (Days)	Adult Residential Treatment Services (Days)	Psychiatric Health Facility (Days)
FY 11-12	\$ 15,547.14	0	0	430	5,578	5,009	412	178	0	284	48	0	0	0	0	0	0
FY 12-13	\$ 14,179.19	0	0	704	4,736	0	120	123	10	0	0	0	0	2	0	0	0
FY 13-14	\$ 11,485.59	1,522	600	617	4,367	0	278	410	20	0	0	0	0	0	0	0	3
FY 14-15	\$ 13,133.43	3,645	1,281	513	4,178	0	451	505	8	0	0	0	0	0	0	0	0
MEAN	\$ 13,586.34	2,584	941	566	4,715	5,009	315	304	13	284	48	0	0	2	0	0	3



*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
 Santa Cruz County as of August 3, 2016



*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 Current Children and Youth in Foster Care Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year

Santa Cruz 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) %	Service Continuance (< 2 YR) Count	Service Continuance (< 2 YR) %	Exiting Count	Exiting %	Arriving & Exiting Count	Arriving & Exiting %	Service Continuance (≥ 2 YR) & Exiting Count	Service Continuance (≥ 2 YR) and Exiting %	Total Count	Total %
FY 12-13	71	25.8%	24	8.7%	29	10.5%	78	28.4%	60	21.8%	13	4.7%	275	100%
FY 13-14	81	30.9%	^	^	27	10.3%	64	24.4%	58	22.1%	^	^	262	100%
FY 14-15	67	27.8%	22	9.1%	32	13.3%	61	25.3%	44	18.3%	15	6.2%	241	100%

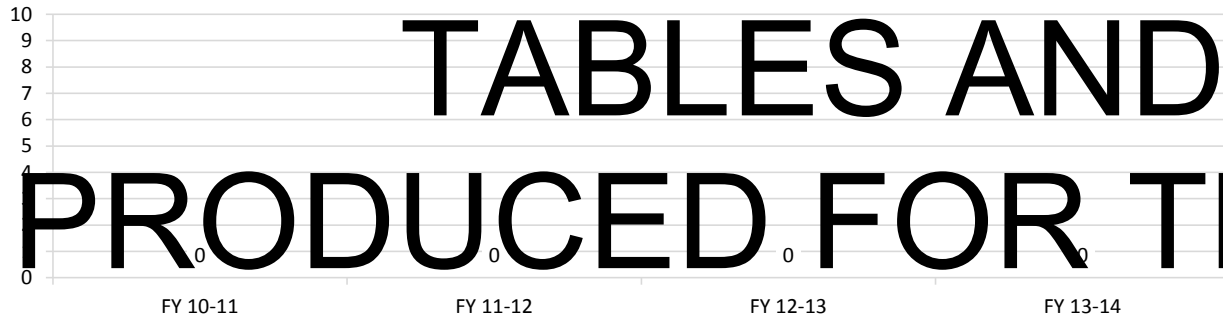
CHARTS NOT PRODUCED DUE TO SMALL CELL SIZES.

Time to Step Down Report: Current Children and Youth in Foster Care Stepping Down in SMHS Services Post Inpatient Discharge

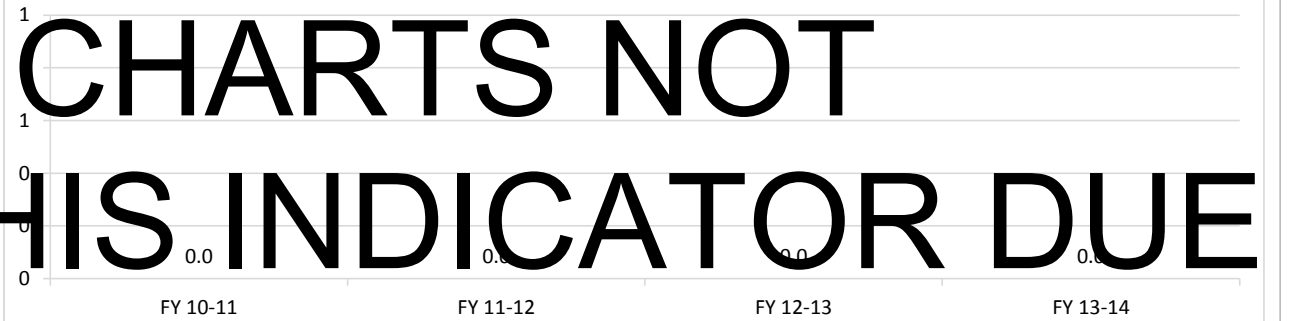
County as of August 3, 2016

Service FY	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	Percentage of 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 to Next Contact Post Inpatient Discharge (Days)
FY 11-12	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0	0.0	0
FY 12-13	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0	0.0	0
FY 13-14	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0	0.0	0
FY 14-15	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0	0.0	0

Median Time Between Inpatient Discharge and Step Down Service in Days



Mean Time Between Inpatient Discharge and Step Down Service in Days



TABLES AND CHARTS NOT PRODUCED FOR THIS INDICATOR DUE TO SMALL CELL SIZES.

Percentage of Discharges by Time Between Inpatient Discharge and Step Down Service



* **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.