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.

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 "^".

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.

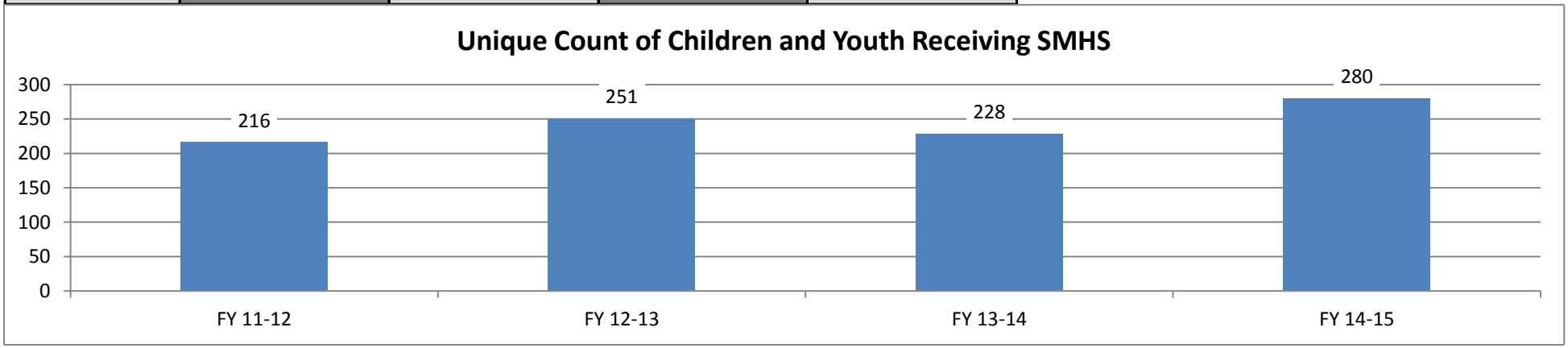
***Foster Care Placement:** Children/youth who are removed from their home by a child placement agency, including county child welfare services and probation departments and placed in a foster care setting. Excludes children: placed in California under the jurisdiction of another state (incoming interstate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

Sonoma County as of August 3, 2016

SFY	Unique Count Receiving SMHS*	Year-Over-Year Percentage Change	Unique Count of Foster Youth Care in Medi-Cal	Year-Over-Year Percentage Change
FY 11-12	216		743	
FY 12-13	251	16.2%	776	4.4%
FY 13-14	228	-9.2%	732	-5.7%
FY 14-15	280	22.8%	712	-2.7%
Compound Annual Growth Rate SFY**		**9.0%**		**-1.4%**



**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

Sonoma County as of August 3, 2016

Fiscal Year	Black Count	Black %	Hispanic Count	Hispanic %	White Count	White %	Other Count	Other %
FY 11-12	11	5.1%	56	25.9%	135	62.5%	14	6.5%
FY 12-13	15	6.0%	56	22.3%	157	62.5%	23	9.2%
FY 13-14	^	^	59	25.9%	126	55.3%	^	^
FY 14-15	13	4.6%	78	27.9%	138	49.3%	51	18.2%

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

Sonoma 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	^	^	67	31.0%	129	59.7%	^	^
FY 12-13	26	10.4%	78	31.1%	128	51.0%	19	7.6%
FY 13-14	25	11.0%	71	31.1%	116	50.9%	16	7.0%
FY 14-15	40	14.3%	85	30.4%	130	46.4%	25	8.9%

CHARTS NOT PRODUCED DUE TO SMALL CELL SIZES.

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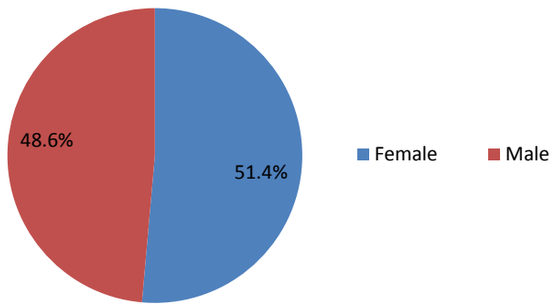
Demographics Report: Unique Count of Current Children and Youth in Foster Care Receiving SMHS by Fiscal Year

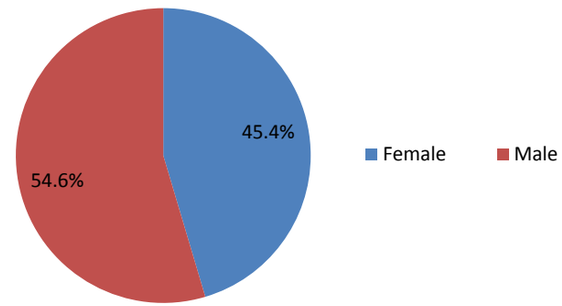
Sonoma County as of August 3, 2016

Fiscal Year	Female Count	Female %	Male Count	Male %
FY 11-12	111	51.4%	105	48.6%
FY 12-13	114	45.4%	137	54.6%
FY 13-14	112	49.1%	116	50.9%
FY 14-15	129	46.1%	151	53.9%

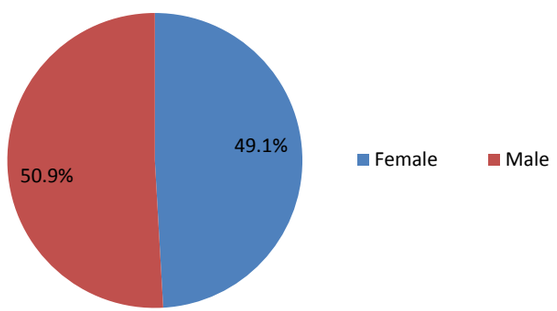
Fiscal Year 11-12 Gender Distribution



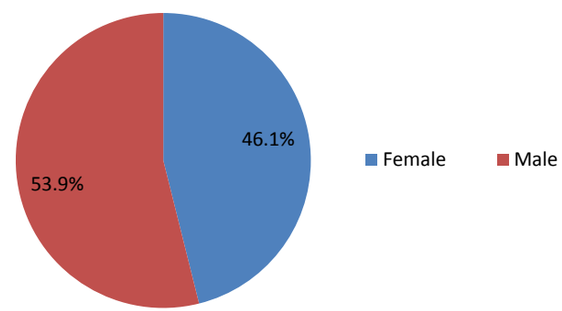
Fiscal Year 12-13 Gender Distribution



Fiscal Year 13-14 Gender Distribution



Fiscal Year 14-15 Gender Distribution



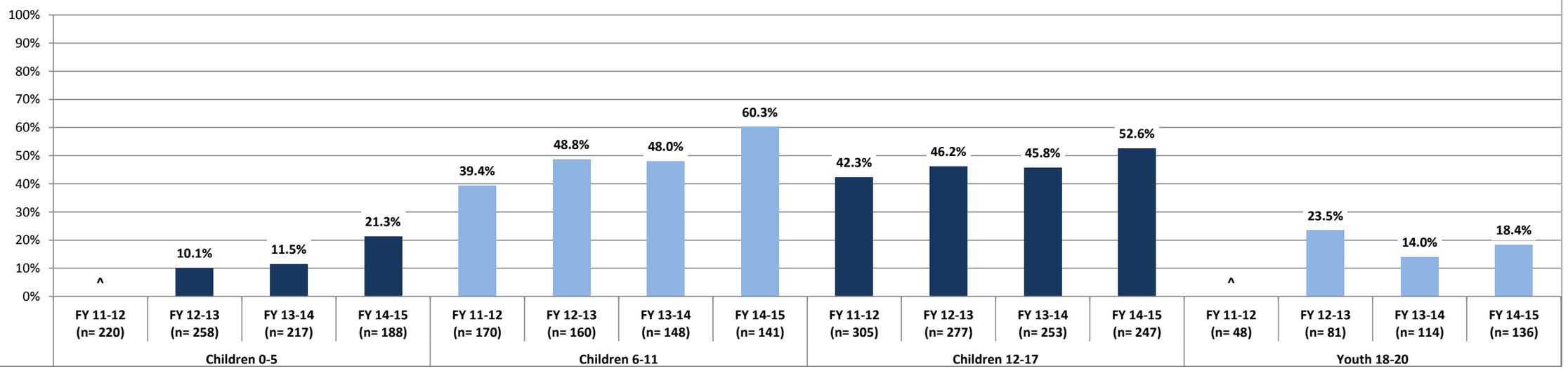
Penetration Rates* Report: Unique Count of Current Children and Youth in Foster Care with At Least One SMHS Visit**

Sonoma 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	**216**	**743**	**29.1%**	**251**	**776**	**32.3%**	**228**	**732**	**31.1%**	**280**	**712**	**39.3%**
Children 0-5	^	220	^	26	258	10.1%	25	217	11.5%	40	188	21.3%
Children 6-11	67	170	39.4%	78	160	48.8%	71	148	48.0%	85	141	60.3%
Children 12-17	129	305	42.3%	128	277	46.2%	116	253	45.8%	130	247	52.6%
Youth 18-20	^	48	^	19	81	23.5%	16	114	14.0%	25	136	18.4%
Black	11	44	25.0%	15	36	41.7%	^	38	^	13	36	36.1%
Hispanic	56	167	33.5%	56	193	29.0%	59	179	33.0%	78	193	40.4%
White	135	405	33.3%	157	385	40.8%	126	353	35.7%	138	325	42.5%
Other	14	127	11.0%	23	162	14.2%	^	162	^	51	158	32.3%
Female	111	330	33.6%	114	331	34.4%	112	329	34.0%	129	319	40.4%
Male	105	413	25.4%	137	445	30.8%	116	403	28.8%	151	393	38.4%

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.*

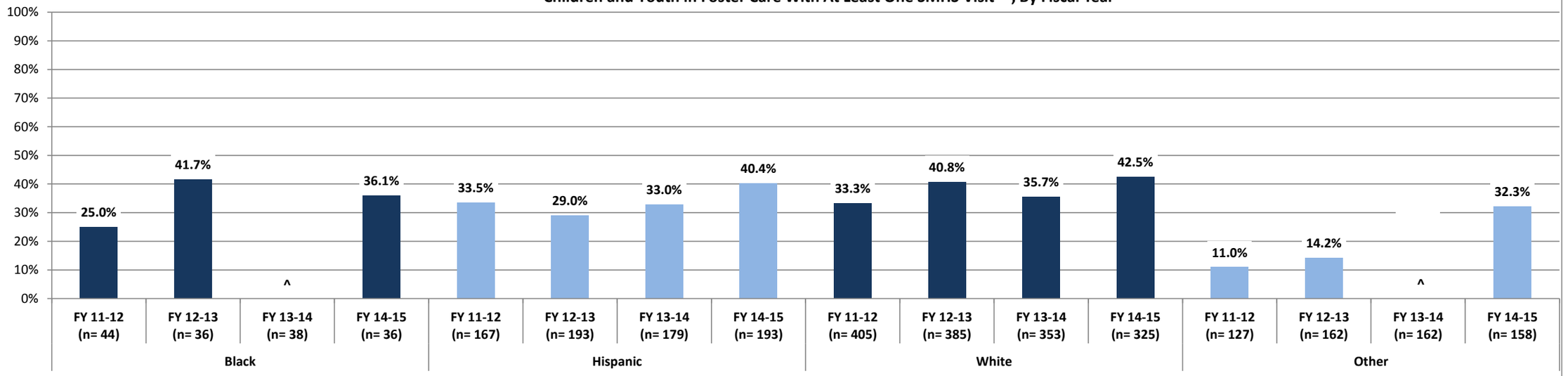
^ Data has been suppressed to protect patient privacy.

Penetration Rates* Report: Unique Count of Current Children and Youth in Foster Care with At Least One SMHS Visit**

Sonoma County as of August 3, 2016

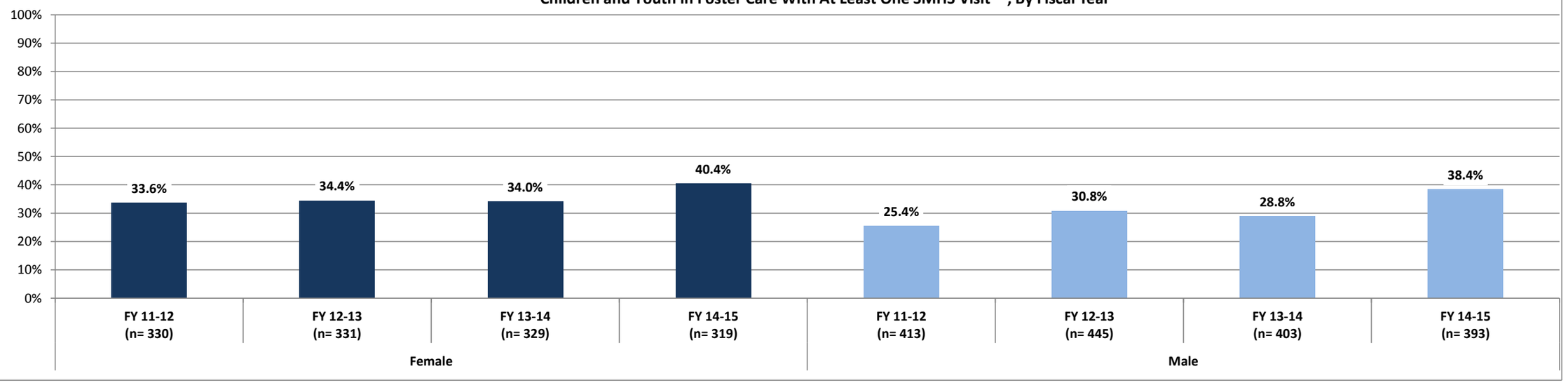
Penetration Rates by Race

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



Penetration Rates by Gender

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.*

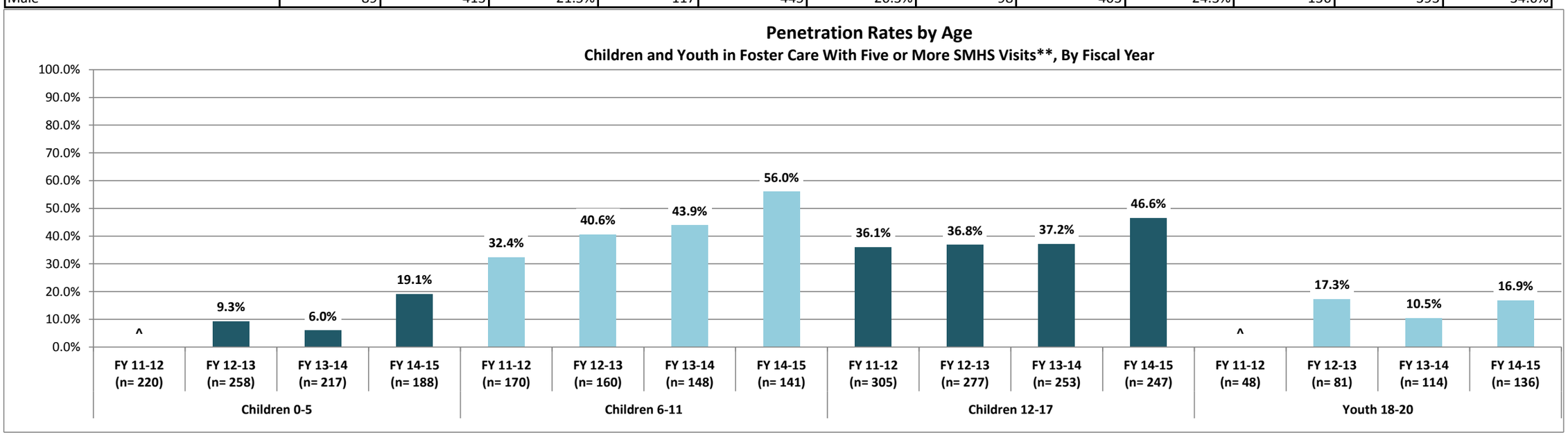
***Children and Youth in Foster Care that have received at least one SMHS that was claimed through the Short-Doyle/ Medi-Cal claiming system on at least one (1) day in the Fiscal Year.*

^ 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**

Sonoma 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	**178**	**743**	**24.0%**	**205**	**776**	**26.4%**	**184**	**732**	**25.1%**	**253**	**712**	**35.5%**
Children 0-5	^	220	^	24	258	9.3%	13	217	6.0%	36	188	19.1%
Children 6-11	55	170	32.4%	65	160	40.6%	65	148	43.9%	79	141	56.0%
Children 12-17	110	305	36.1%	102	277	36.8%	94	253	37.2%	115	247	46.6%
Youth 18-20	^	48	^	14	81	17.3%	12	114	10.5%	23	136	16.9%
Black	^	44	^	14	36	38.9%	^	38	^	13	36	36.1%
Hispanic	44	167	26.3%	45	193	23.3%	48	179	26.8%	68	193	35.2%
White	114	405	28.1%	132	385	34.3%	106	353	30.0%	125	325	38.5%
Other	^	127	^	14	162	8.6%	^	162	^	47	158	29.7%
Female	89	330	27.0%	88	331	26.6%	86	329	26.1%	117	319	36.7%
Male	89	413	21.5%	117	445	26.3%	98	403	24.3%	136	393	34.6%



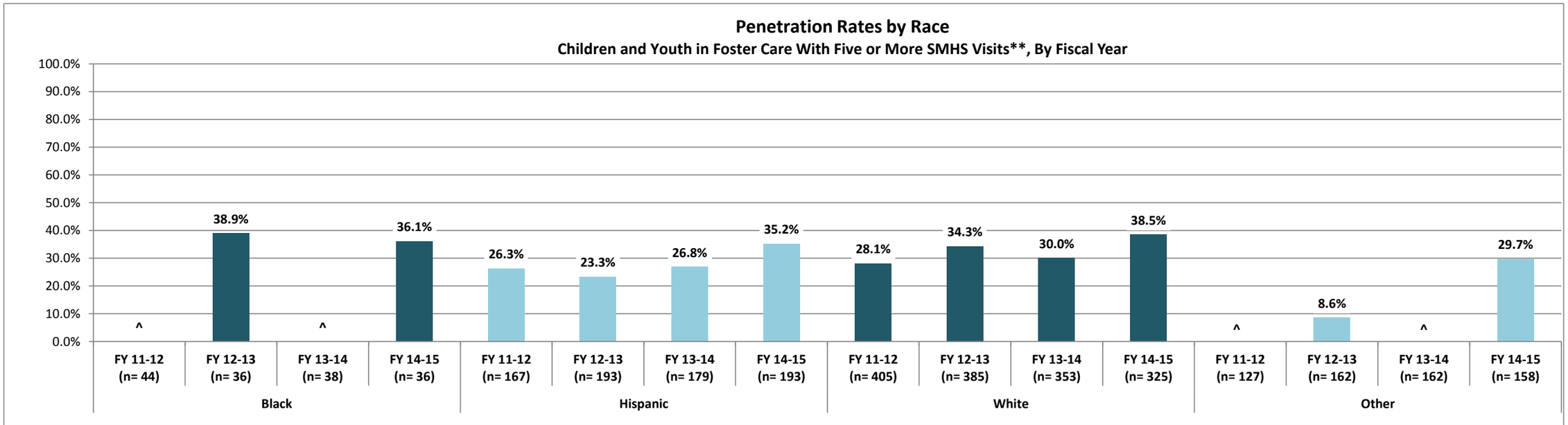
**Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in Medi-Cal Managed Care system.*

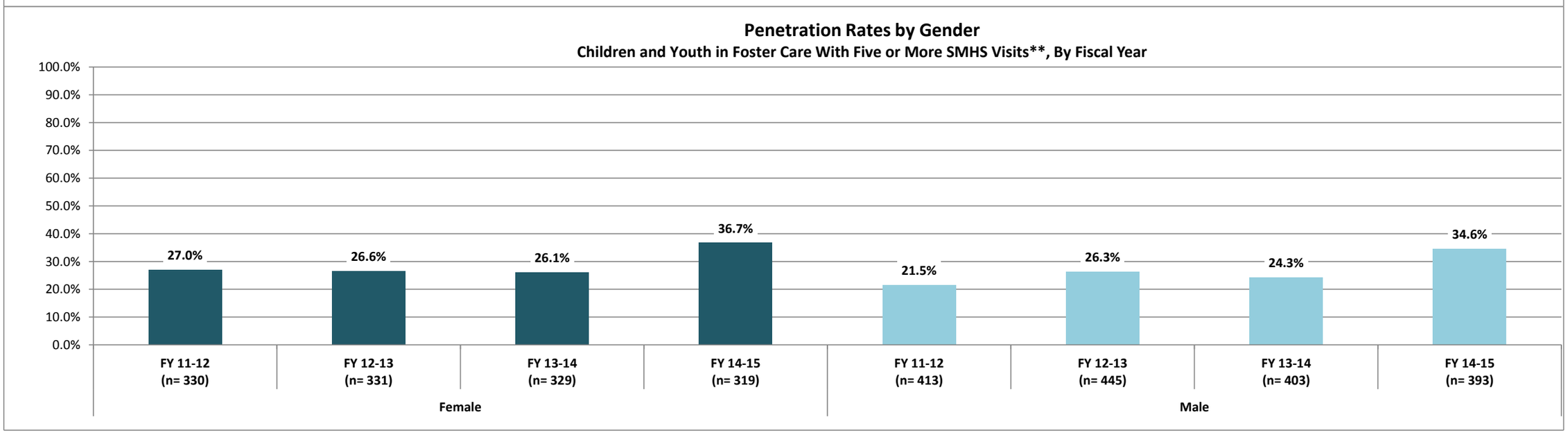
***Children and Youth in Foster Care that have received at least five SMHS that were claimed through the Short-Doyle/ Medi-Cal claiming system on at least five (5) or more different days in the Fiscal Year.*

^ 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**

Sonoma County as of August 3, 2016





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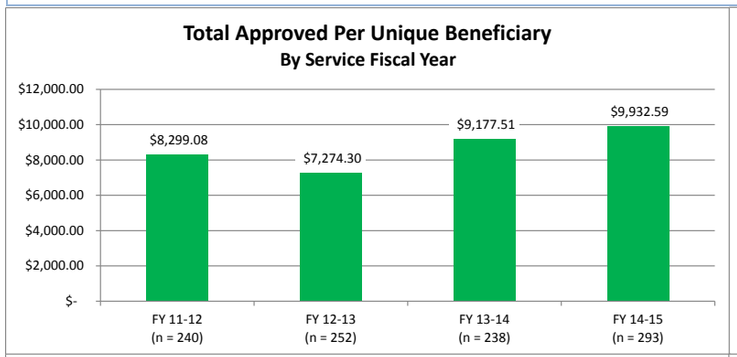
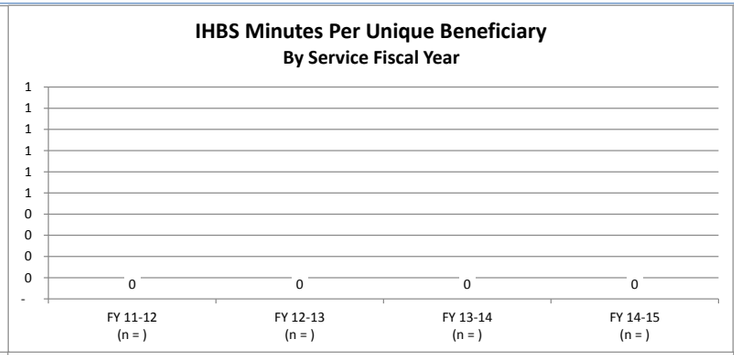
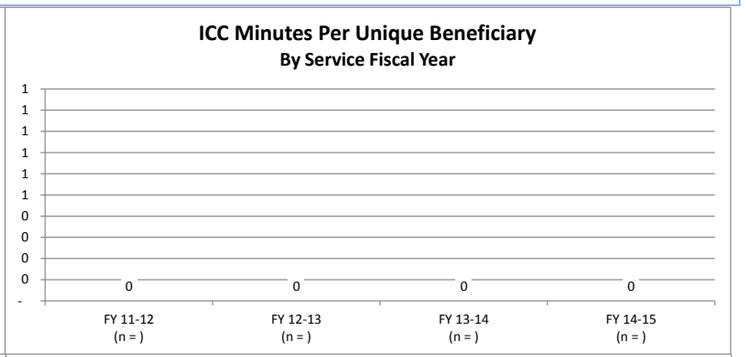
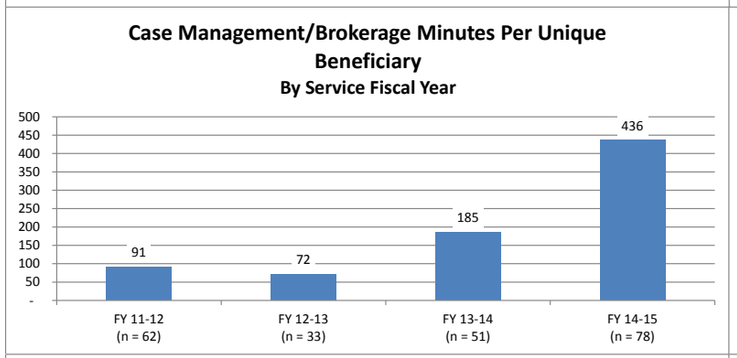
Utilization Report*: Approved Specialty Mental Health Services for Children and Youth in Foster Care
Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Fiscal Year
Sonoma County as of August 3, 2016

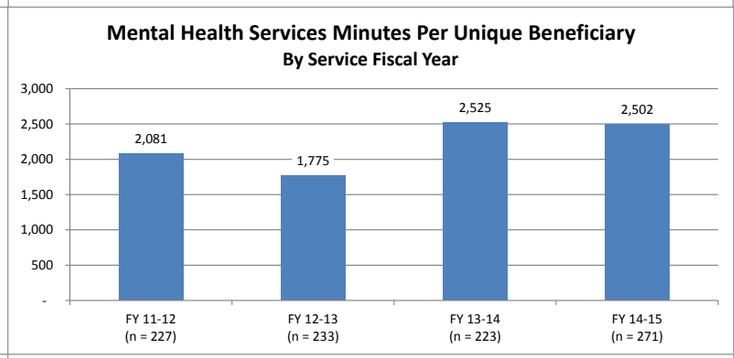
Fiscal Year	SDMC Total Approved	IHBS (Minutes)	ICC (Minutes)	Case Management/ Brokerage (Minutes)	Mental Health Services (Minutes)	Therapeutic Behavioral Services (Minutes)	Medication Support Services (Minutes)	Crisis Intervention (Minutes)	Crisis Stabilization (Hours)	Full Day Treatment Intensive (Hours)	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	$ 8,299.08	0	0	91	2,081	2,820	305	229	13	636	505	0	0	0	0	0	0
FY 12-13	$ 7,274.30	0	0	72	1,775	3,935	285	252	13	498	598	0	0	0	0	0	0
FY 13-14	$ 9,177.51	0	0	185	2,525	5,862	268	285	15	115	614	0	0	7	1	0	0
FY 14-15	$ 9,932.59	0	0	436	2,502	3,188	312	271	20	0	614	0	0	16	4	0	0
MEAN	**$ 8,670.87**	**0**	**0**	**196**	**2,221**	**3,951**	**293**	**259**	**15**	**416**	**583**	**0**	**0**	**12**	**2**	**0**	**0**

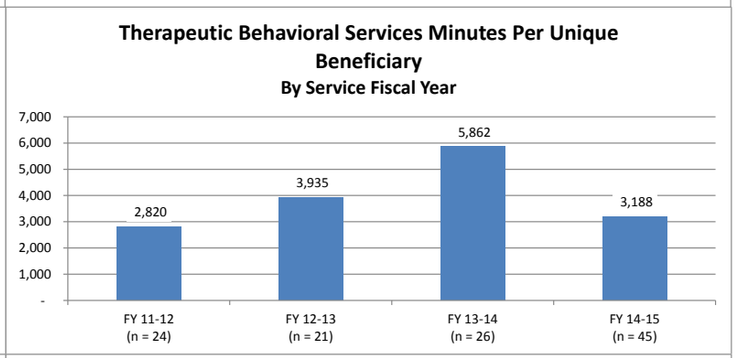


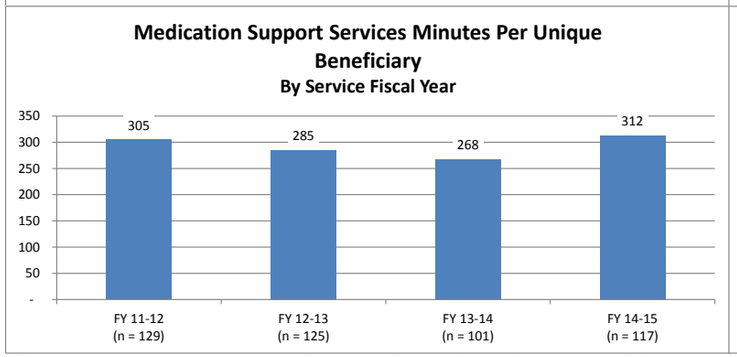


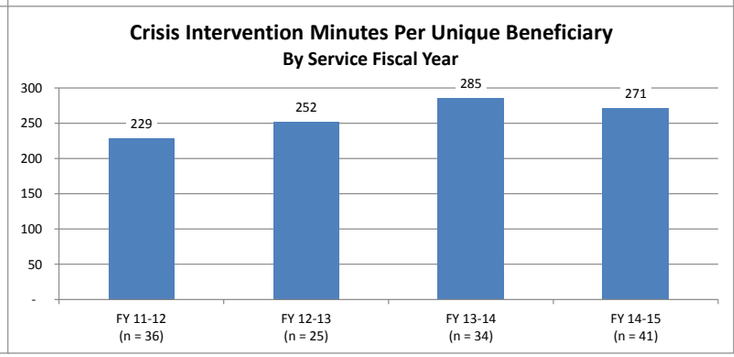


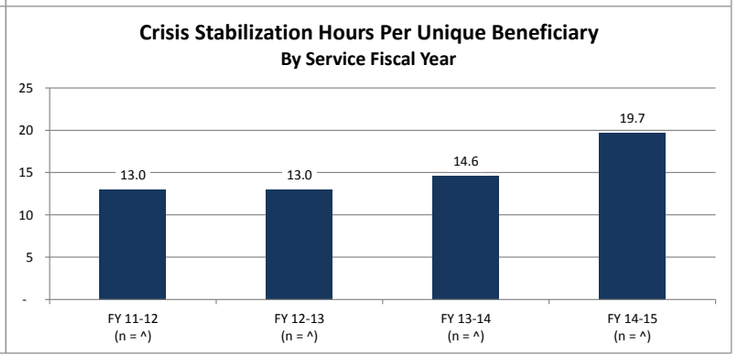










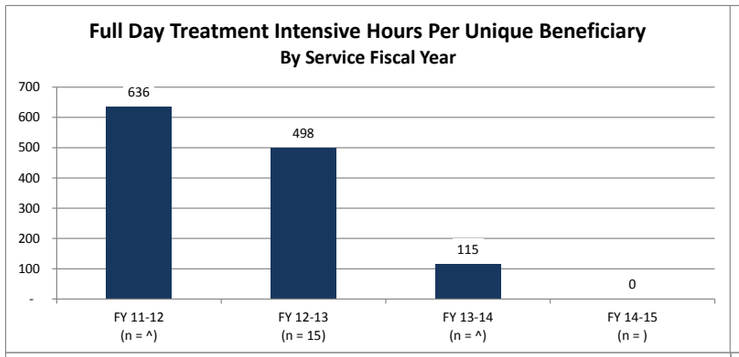


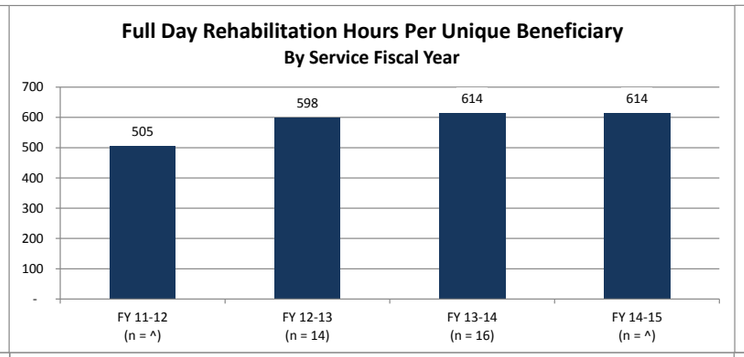
**The graphs are color coded so that those reported in the same unit of analysis (e.g., minutes) are colored similarly.*

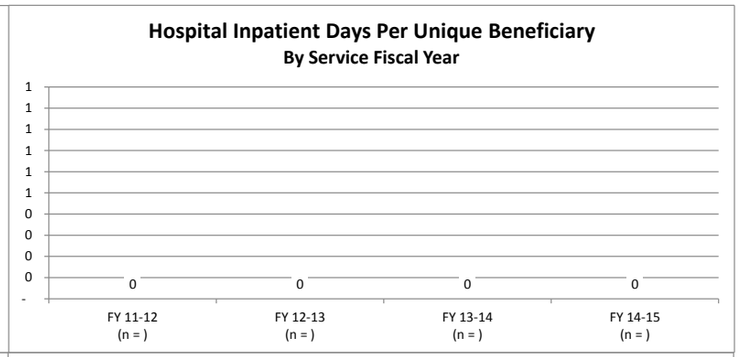
Please note that (n) values listed at the bottom of each bar graph represent the actual number of children/youth that received the SMHS represented in their respective graph by Fiscal Year.

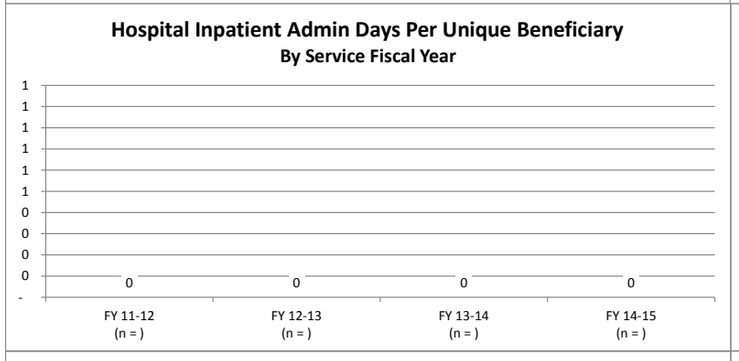
^ Data has been suppressed to protect patient privacy.

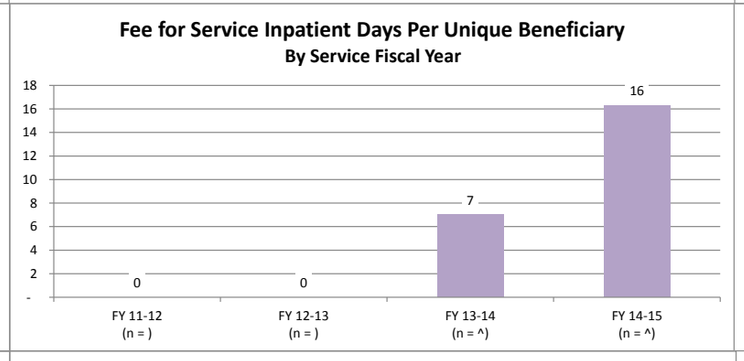
Utilization Report*: Approved Specialty Mental Health Services for Children and Youth in Foster Care
Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Fiscal Year
Sonoma County as of August 3, 2016

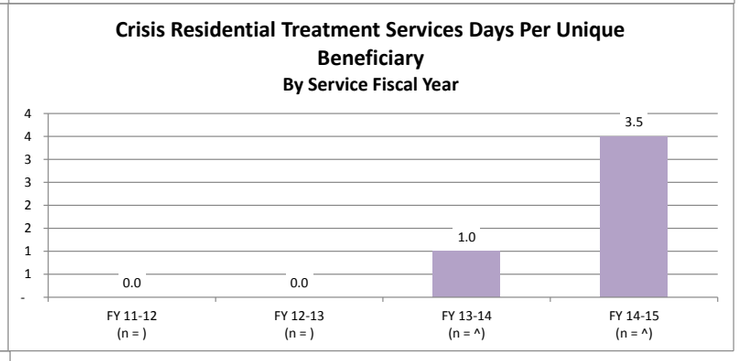


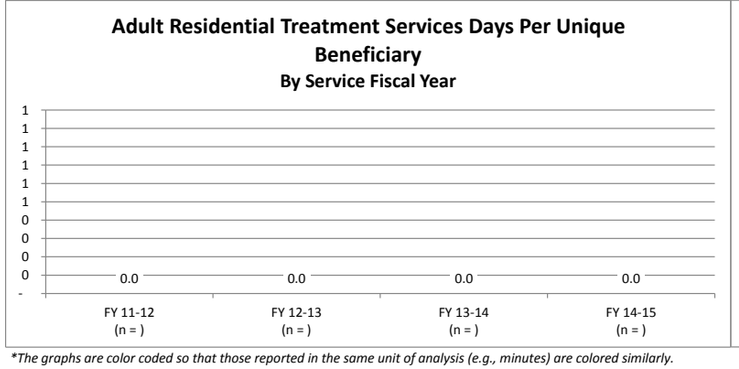


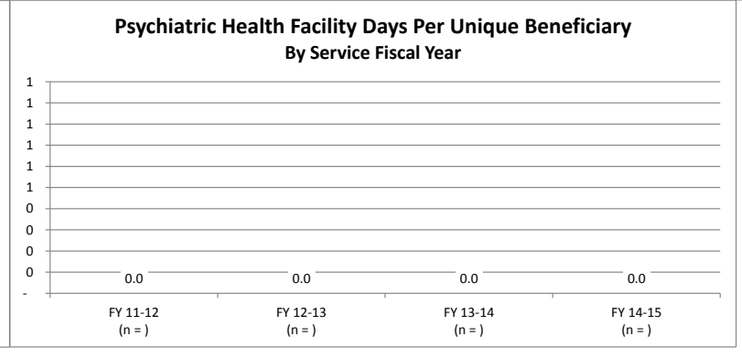












**The graphs are color coded so that those reported in the same unit of analysis (e.g., minutes) are colored similarly.*

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

Sonoma 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.

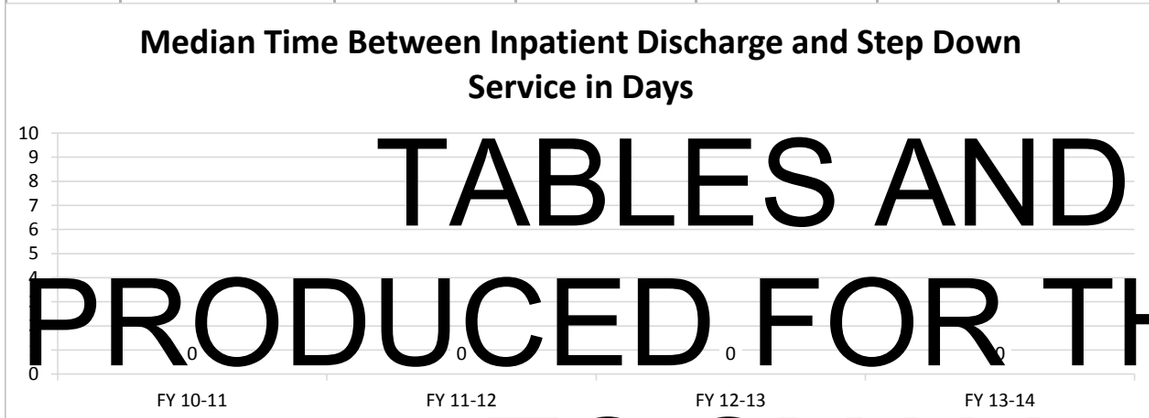
Service Fiscal Year	Arrivals Count	Arrivals %	Service Continuance (>= 2 YR) Count	Service Continuance (>= 2 YR) %	Service Continuance (<2 YR) Count	Service Continuance (< 2 YR) %	Exiting Count	Exiting %	Arriving & Exiting Count	Arriving & Exiting %	Service Continuance (>= 2 YR) & Exiting Count	Service Continuance (>= 2 YR) and Exiting %	Total Count	Total %
FY 12-13	65	25.9%	15	6.0%	16	6.4%	50	19.9%	87	34.7%	18	7.2%	251	100%
FY 13-14	77	33.6%	^	^	29	12.7%	40	17.5%	58	25.3%	^	^	229	100%
FY 14-15	85	30.6%	23	8.3%	36	12.9%	59	21.2%	63	22.7%	12	4.3%	278	100%

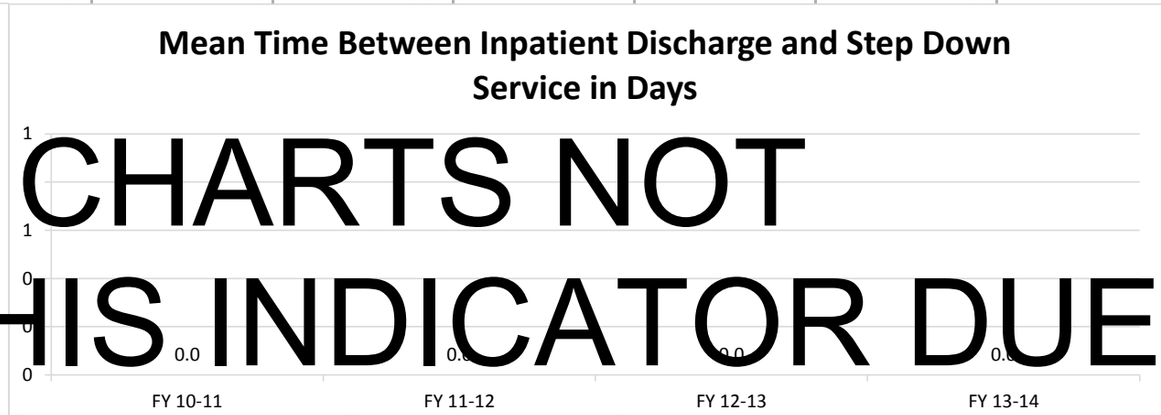
CHARTS NOT PRODUCED DUE TO SMALL CELL SIZES.

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

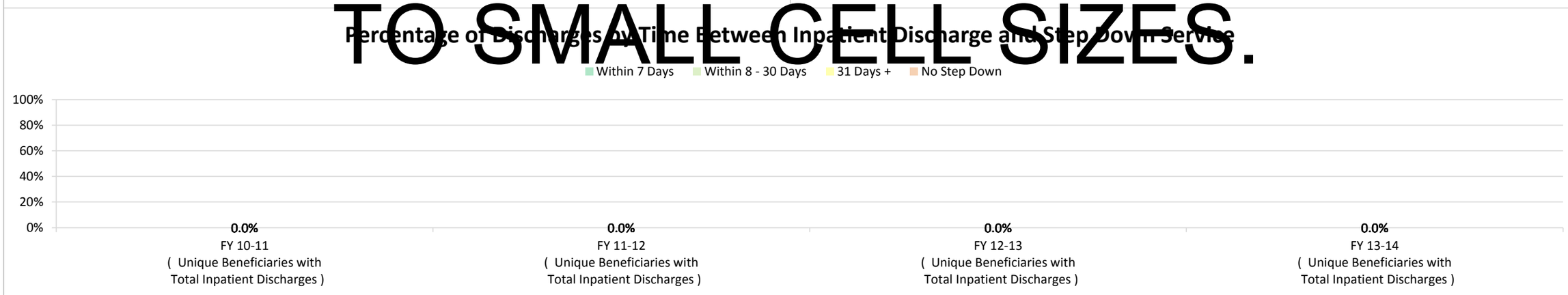
County as of August 3, 2016

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





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



** **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.*