

Katie A. Specialty Mental Health Services Report - 12 Month Rolling

Report run on 6/27/2017

Overview

The Katie A. v Bonta lawsuit Settlement Agreement – in place since December 2011 - outlines a series of actions that are intended to transform the way children and youth who are in foster care or who are at imminent risk of foster care placement receive access to mental health services consistent with a Core Practice Model (CPM) that creates a coherent and all-inclusive approach to service planning and delivery. The Settlement Agreement also specifies that children and youth who meet subclass criteria (as defined in the Settlement Agreement) are eligible to receive Intensive Care Coordination (ICC), Intensive Home Based Services (IHBS), and Therapeutic Foster Care (TFC) (once approved as a Medi-Cal service). County MHPs are required to provide ICC and IHBS services to subclass members. MHPs provide ICC and IHBS and claim federal reimbursement through the Short-Doyle/Medi-Cal (SDMC) claiming system.

The Department of Health Care Services' (DHCS) Mental Health Services Division (MHSD) Information Notice 13-11 instructed counties of the Short-Doyle/Medi-Cal (SDMC) system changes required to support the implementation of ICC and IHBS which included submitting claims with a Demonstration Project Identifier (DPI) of "KTA" and procedure codes (T1017, HK) for Intensive Care Coordination and (H2015, HK) for Intensive Home Based Services.

Purpose of Report

This report displays metrics associated with approved claims for services provided to the Katie A. subclass members. It will be updated monthly and posted during the second week of every month beginning in March 2014.

Some important objectives of the Katie A. Settlement Agreement are to collect existing data specific to the subclass in order to evaluate utilization and timely access to appropriate care and to post data that is useful to counties, stakeholders, and State departments in addressing the needs of subclass members. This report is one of many activities the State has undergone in order to achieve these objectives. Subject to some important limitations, this report provides information regarding the number of subclass members and their service utilization. It also includes service utilization by county and this assists in gauging counties' progress implementing ICC and IHBS.

While this report provides valuable information, it is important to note that there are factors, such as claim lag of up to 12 months, which must be considered. In addition, while this report provides information on a county by county basis, it does not provide information regarding the factors that lead to possible differences among counties in their implementation of ICC and IHBS and provision of other Specialty Mental Health Services (SMHS) to subclass members.

Report Highlights

- ▶ The number of subclass members for this reporting period is 18,203 (statewide).
- ▶ Total approved amount to date is \$155,955,754 (statewide).
- ▶ The total amount of ICC minutes provided to subclass members to date is 20,215,277 (statewide).
- ▶ The total amount of IHBS minutes provided to subclass members to date is 21,630,953 (statewide).
- ▶ The number of subclass members that have received ICC to date is 13,165 (statewide).
- ▶ The number of subclass members that have received IHBS to date is 9,387 (statewide).
- ▶ The total number of counties with approved claims for ICC and/or IHBS is 51.
- ▶ The total number of counties using the KTA Demonstration Project Identifier is 49.

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Definitions

- **Approved Service Claims:** The total number of approved service lines adjudicated through the SDMC claiming system regardless of minutes or duplicate subclass member counts.
- **Total Amount of Approved Katie A Services:** The sum of all total approved amounts by the SDMC claiming system for claims with a DPI of "KTA" or claims billed with either Intensive Care Coordination or Intensive Home Based Services.
- **Approved ICC & IHBS Minutes*:** The total number of approved Intensive Care Coordination and Intensive Home Based Services minutes adjudicated through the SDMC claiming system.
- **Unduplicated Katie A. Subclass Members:** The total number of unique Katie A subclass members linked to claims adjudicated and approved through the SDMC claiming system in a particular month (bar graph charts) or for previous 12 months (county table).
- **SMHS Provided to Katie A. Subclass Members:** Any Specialty Mental Health Services adjudicated and approved through the SDMC claiming system with the "KTA" DPI or billed with either Intensive Care Coordination or Intensive Home Based Services.

* Please see Page 72 of the [MHSD Medi-Cal Billing Manual](#) for more information on SMHS procedures.

Notes Updated: August 18, 2014

- 1) Claims were being denied due to use of a secondary modifier with ICC and IHBS claims. These service modifiers indicated Telephone or Community. The claiming policy has been updated as follows: ICC and IHBS should be provided in the community and may be provided via telehealth and telephone in instances consistent with TCM and Mental Health Services. Activities unique to ICC and IHBS, such as the Children and Family Team, should be performed face to face as often as possible to address the needs of the child and achieve the level of intensity that these services require. A SDMC system change was implemented on 5/30/14 to correct this and Counties are in the process of submitting replacement claims.
- 2) There is typically claim lag between claim approval and the month of service, so the more recent month totals are typically less than older service month totals.
- 3) Not all counties have implemented the "KTA" claim indicator so their claims may be under reported for services other than ICC and IHBS.
- 4) County Table (pages 9 – 11) data elements have been suppressed or combined in county regions to protect client privacy. The OOC County Tables (formerly pages 12 – 14) have been removed to protect client privacy.

Please contact Medi-Cal County Claims Customer Service (MedCCC) at MedCCC@dhcs.ca.gov or 916-650-6525 for any questions regarding this report.

SMHS Provided to Katie A. Subclass Members by Month

Procedure Codes H2015 (IHBS)/T1017 (ICC), Modifier HK; And

Claims Submitted with DPI Element "KTA"

Report Run on 6/27/2017

Supplemental Accessibility Tables

Table Name: Approved Service Claims for Katie A. Subclass Members, Count of service lines by Month of Submission

Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17
1,187	5,911	47,357	36,544	61,188	52,404	75,511	69,550	78,124	102,725	94,158	104,573

Table Name: Unduplicated Count of Katie A. Subclass Members, By Service Month²

Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17
8,206	8,246	8,648	8,503	8,489	8,680	8,669	8,765	7,653	7,401	3,870	1,125

Table Name: Approved ICC & IHBS Minutes Provided to Katie A. Subclass Members, By Service Month²

Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17
3,691,936	3,554,131	4,423,617	4,300,649	4,144,459	4,100,259	3,719,268	4,179,168	3,897,309	4,141,255	1,397,704	296,477

Table Name: Total Approved Amount for All Services¹ Provided to Katie A. Subclass Members, By Service Month²

Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17
\$ 13,901,082	\$ 14,619,824	\$ 17,047,610	\$ 16,163,407	\$ 15,833,735	\$ 15,562,848	\$ 14,484,102	\$ 16,042,186	\$ 13,224,511	\$ 12,320,605	\$ 5,357,937	\$ 1,397,908

Table Name: ICC & IHBS Unduplicated Count of Katie A. Subclass Members, By Service Month²

	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17
ICC	4,600	4,709	5,108	5,101	5,028	5,105	5,114	5,532	4,901	4,461	2,019	445
IHBS	3,670	3,726	3,949	3,940	3,973	3,991	4,096	4,163	3,703	3,366	1,412	342

Table Name: Average Approved ICC & IHBS Minutes per Unduplicated Katie A. Subclass Member, By Service Month²

	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17
ICC	367	361	427	404	384	379	340	371	392	425	300	253
IHBS	525	483	551	548	538	516	467	491	512	644	536	517

¹ All services are defined as any services billed on a claim with a "KTA" Demonstration Project Identifier or ICC, IHBS services.

² Recent service months are affected by claim lag and, in general, do not represent the entire amount of services performed at the time this report is run. Please see the "Notes Updated" section on page 2 of this report for more information on claim lag or systemic issues that may be currently affecting claiming.

SMHS Provided to Katie A. Subclass Members Treated Out of County (OOC)¹ by Month

Procedure Codes H2015 (IHBS)/T1017 (ICC), Modifier HK; And
 Claims Submitted with DPI Element "KTA"
 Report Run on 6/27/2017

Supplemental Accessibility Tables

Table Name: Approved Service Claims for OOC Katie A. Subclass Members, Count of service lines by Month of Submission

Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17
43	236	1,153	1,038	1,318	1,224	2,218	1,741	2,244	3,402	3,141	3,009

Table Name: Unduplicated Count of OOC Katie A. Subclass Members, By Service Month³

Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17
239	244	237	258	258	299	281	301	277	251	167	64

Table Name: Approved ICC & IHBS Minutes Provided to OOC Katie A. Subclass Members, By Service Month³

Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17
75,603	54,943	66,141	77,798	77,288	108,039	70,393	86,561	77,487	77,356	35,977	6,929

Table Name: Total Approved Amount for All Services² Provided to OOC Katie A. Subclass Members, By Service Month³

Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17
\$ 425,250	\$ 394,138	\$ 437,206	\$ 438,806	\$ 455,002	\$ 525,224	\$ 410,932	\$ 511,001	\$ 396,817	\$ 340,919	\$ 158,286	\$ 64,533

Table Name: ICC & IHBS Unduplicated Count of OOC Katie A. Subclass Members, By Service Month³

	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17
ICC	114	110	115	122	123	150	122	169	143	129	69	20
IHBS	65	62	50	72	71	104	77	82	79	64	34	^

Table Name: Average Approved ICC & IHBS Minutes per Unduplicated OOC Katie A. Subclass Member, By Service Month³

	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17
ICC	319	264	317	335	291	331	245	239	285	288	245	156
IHBS	603	419	593	513	585	561	525	562	465	628	562	346

¹ Out of County (OOC) is defined as a claim submitted for a Katie A. Subclass Member where the Medi-Cal county of responsibility differs from the county of service.

² All Services is defined as any services billed on a claim with a "KTA" Demonstration Project Identifier or ICC, IHBS services.

³ Recent service months are affected by claim lag and, in general, do not represent the entire amount of services performed at the time this report is run. Please see the "Notes Updated" section on page 2 of this report for more information on claim lag or systemic issues that may be currently affecting claiming.

^ Data has been suppressed to protect patient privacy.

Unique Katie A. Subclass Member Count by Type of SMHS Provided by County of Service

For Service Months June 2016 - May 2017

Report Run on 6/27/2017

#	County Name	Unique Katie A. Subclass Members	Total Approved Amount	IHBS Subclass Member Count	ICC Subclass Member Count	Case Management/ Brokerage Subclass Member Count	Crisis Intervention Subclass Member Count	Medication Support Services Subclass Member Count	Mental Health Services Subclass Member Count	Crisis Stabilization Subclass Member Count	Day Rehabilitation Subclass Member Count	Day Treatment Intensive Subclass Member Count	Adult Residential Treatment Services Subclass Member Count	Crisis Residential Treatment Services Subclass Member Count	Hospital Inpatient Subclass Member Count	Hospital Inpatient Admin Subclass Member Count	Psychiatric Health Facility Subclass Member Count
1	Alameda*	532	\$ 9,141,730	107	249	184	38	111	387	42	^	^	^	^	^	^	^
2	Alpine	-	\$ -	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3	Amador*	31	\$ 162,876	17	30	^	^	^	13	13	-	-	-	-	-	-	-
4	Butte*	186	\$ 1,159,413	55	110	39	13	45	132	^	-	-	-	-	-	-	-
5	Calaveras*	25	\$ 327,088	^	21	16	^	^	22	-	-	^	-	-	-	-	-
6	Colusa*^	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
7	Contra Costa*	417	\$ 9,677,516	82	328	283	27	126	347	35	^	^	-	-	-	-	-
8	Del Norte*	19	\$ 307,382	14	16	15	^	^	16	-	-	-	-	-	-	-	-
9	El Dorado*	52	\$ 412,434	30	30	44	-	^	51	-	-	-	-	-	-	-	-
10	Fresno*	556	\$ 3,970,754	^	54	443	13	230	508	58	-	^	-	-	-	-	16
11	Glenn*	47	\$ 216,955	28	38	19	^	^	32	-	-	-	-	-	-	-	-
12	Humboldt*	153	\$ 2,916,036	48	112	76	21	78	141	13	-	^	^	^	-	^	^
13	Imperial*	114	\$ 804,025	65	18	16	^	^	87	104	-	-	-	-	-	-	-
14	Inyo*^	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
15	Kern*	242	\$ 1,886,355	105	144	110	26	109	222	19	-	-	-	-	-	-	^
16	Kings*	41	\$ 215,746	17	27	31	^	^	35	-	-	-	-	-	-	-	-
17	Lake	34	\$ 94,784	^	33	-	-	-	-	-	-	-	-	-	-	-	-
18	Lassen*^	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
19	Los Angeles*	4,761	\$ 42,451,074	4,178	4,093	127	86	399	1,173	-	-	-	-	-	-	-	-
20	Madera*	153	\$ 447,943	-	30	96	^	12	140	-	-	-	-	-	-	-	-
21	Marin*	71	\$ 613,646	19	55	36	^	12	50	^	-	-	-	-	-	-	-
22	Mariposa*	33	\$ 192,272	^	12	^	^	^	31	-	-	-	-	-	-	-	-
23	Mendocino	120	\$ 471,534	62	115	-	-	-	-	-	-	-	-	-	-	-	-
24	Merced*	163	\$ 1,218,509	50	68	58	12	^	156	-	-	-	-	-	-	-	-
25	Modoc*^	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
26	Mono^	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
27	Monterey	309	\$ 1,646,572	198	223	-	-	-	-	-	-	-	-	-	-	-	-
28	Napa*	29	\$ 370,632	^	14	14	^	14	20	-	-	^	-	-	-	-	-
29	Nevada*	37	\$ 325,561	16	25	37	-	12	37	-	-	-	-	-	-	-	-
30	Orange*	1,206	\$ 6,238,841	340	527	453	108	250	886	^	-	-	-	^	-	-	-
31	Placer*	98	\$ 467,698	55	85	19	-	^	29	-	-	-	-	-	-	-	-
32	Plumas*^	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
33	Riverside*	1,963	\$ 5,910,990	546	1,360	391	25	472	1,086	^	-	^	-	-	-	-	-
34	Sacramento*	545	\$ 3,817,687	258	419	394	31	235	428	-	-	-	-	-	-	-	-
35	San Benito*^	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
36	San Bernardino*	1,304	\$ 10,047,067	616	1,069	297	58	348	914	21	^	^	-	^	^	-	^
37	San Diego*	1,442	\$ 10,618,893	547	1,155	92	41	379	613	45	-	223	^	^	17	-	^
38	San Francisco*	235	\$ 11,076,349	193	199	43	-	12	70	-	-	-	-	-	-	-	-
39	San Joaquin*	425	\$ 2,231,858	122	222	216	22	98	296	-	-	^	-	-	-	-	-
40	San Luis Obispo*	252	\$ 3,111,441	182	222	62	16	49	120	-	-	^	-	-	-	-	^
41	San Mateo*	129	\$ 1,958,424	35	61	81	^	50	105	^	-	-	12	^	-	-	-
42	Santa Barbara*	269	\$ 2,550,428	103	207	95	30	68	133	^	-	-	-	^	-	-	-
43	Santa Clara*	768	\$ 7,505,515	645	754	-	-	-	-	-	-	-	-	-	-	-	-
44	Santa Cruz*	82	\$ 924,651	81	55	-	-	-	-	-	-	-	-	-	-	-	-
45	Shasta*	78	\$ 887,128	24	60	52	^	33	65	-	-	-	-	-	-	-	^
46	Sierra**	-	\$ -	-	-	-	-	-	-	-	-	-	-	-	-	-	-
47	Siskiyou*	28	\$ 147,068	17	19	13	^	^	25	-	-	-	-	-	-	-	-
48	Solano*	182	\$ 2,229,266	78	147	86	^	78	128	^	^	^	-	-	-	-	-
49	Sonoma	195	\$ 896,356	137	181	-	-	-	-	-	-	-	-	-	-	-	-
50	Stanislaus*	162	\$ 1,785,075	78	90	75	17	76	150	^	^	^	-	-	-	-	^
51	Sutter***	-	\$ -	-	-	-	-	-	-	-	-	-	-	-	-	-	-
52	Tehama	69	\$ 23,932	-	69	-	-	-	-	-	-	-	-	-	-	-	-
53	Trinity*	20	\$ 24,419	-	-	^	-	-	19	-	-	-	-	-	-	-	-
54	Tulare*	140	\$ 906,949	46	110	104	13	41	124	-	-	-	-	-	-	-	-
55	Tuolumne*	19	\$ 115,923	^	14	^	-	^	18	-	-	-	-	-	-	-	-
56	Ventura*	307	\$ 2,705,815	93	208	170	^	76	233	-	-	-	-	-	-	-	-
57	Yolo*	64	\$ 289,630	32	40	12	^	^	24	-	-	-	-	-	-	-	-
58	Sutter/Yuba*	50	\$ 297,484	^	30	16	^	13	26	-	-	-	-	-	-	-	-
	Statewide^^	18,203	\$ 155,955,754	9,387	13,165	18,203	4,350	643	9,387	258	240	49	^	16	27	^	39

* Counties currently submitting claims with the 'KTA' Demonstration Project Identifier.

** Sierra - There is no data listed for Sierra County (Code 46) because Placer County (Code 31) acts as the MHP for both counties and submits service claims for Medi-Cal beneficiaries in both counties.

*** Sutter - There is no data listed for Sutter County (Code 51) because Sutter/Yuba is a combined MHP pursuant to the joint powers agreement between those two counties. All Medi-Cal specialty mental health services claims for Medi-Cal beneficiaries in both counties are submitted under Yuba County's code (Code 58).

^ Data in the cells have been suppressed to protect patient privacy.

^^ The Statewide totals shown reflect the actual Statewide totals and incorporates any County data that may have been suppressed.

Katie A. Services Report Technical Definitions

Data Source:

Short Doyle Medi-Cal II (SD2), Copy of Production Database

Methodology:

1. The SD2 Copy of Production Database is queried for Payer Claim Control Numbers (ID numbers that are unique to each service line) found with a Demonstration Project Identifier (DPI) value set to "KTA" and/or claimed with Intensive Care Coordination (T1017, HK) or Intensive Home Based Services (H2015, HK) services
2. The query filters out voided, replaced, and denied claims

Variables, Assumptions, and Limitations:

1. This report defines the subclass as the total number of youth linked to claims with a DPI of "KTA" or claims billed with either Intensive Care Coordination or Intensive Home Based Services that were adjudicated and approved through the SDMC claiming system
2. Not all counties have implemented the "KTA" claim indicator so their claims may be under reported for services other than ICC and IHBS
3. While this report provides information on a county by county basis, it does not provide information regarding the factors that lead to possible differences among counties in their implementation of ICC and IHBS and provision of other Specialty Mental Health Services (SMHS) to subclass members
4. Claims were being denied due to use of a secondary modifier with ICC and IHBS claims. A SDMC system change was implemented on 5/30/14 to correct this and Counties are in the process of submitting replacement claims
 - These service modifiers indicated Telephone or Community
 - The claiming policy has been updated as follows:
"ICC and IHBS should be provided in the community and may be provided via telehealth and telephone in instances consistent with TCM and Mental Health Services. Activities unique to ICC and IHBS, such as the Children and Family Team, should be performed face to face as often as possible to address the needs of the child and achieve the level of intensity that these services require."
5. Claim lag: In the Short Doyle Medi-Cal II data system, there is typically claim lag between claim approval and the month of service, so the more recent month totals are typically less than older service month totals