Performance Outcomes System Reports

Report run on August 3, 2016

Background

Three reports will be created during each new reporting period. The reports that will be produced are as follows: statewide aggregate data; population-based county groups; and county-specific data. 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

These county-specific reports provide updated information on the initial indicators that were developed for the Performance Outcomes System and reported on at the statewide aggregate level in February 2015; they help establish a foundation for on-going reporting. 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 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 Fiscal Years (FY) 11/12, 12/13, 13/14, and 14/15.

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 - 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.

Performance Outcomes System Reports

Report run on August 3, 2016

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, 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

*County-specific findings may be interpreted alongside the POS statewide and population-based report findings.

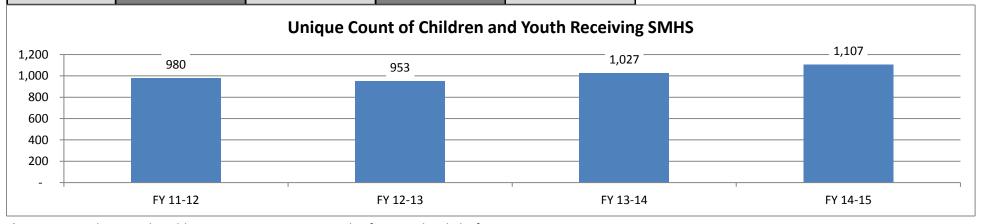
*The *penetration rates* reported here were calculated using a different methodology than that used by the External Quality Review Organization (EQRO). The differences in methodology make comparison between the POS penetration rates and the EQRO penetration rates not appropriate or useful. The POS methodology 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 FY 12/13 and FY13/14. 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 relies solely on claims data from Short Doyle/Medi-Cal II. 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."

Please contact cmhpos@dhcs.ca.gov for any questions regarding this report.

SFY	Unique Count Receiving SMHS*	Year-Over-Year Percentage Change	Unique Count of Medi-Cal Eligibles	Year-Over-Year Percentage Change
FY 11-12	980		13,444	
FY 12-13	953	-2.8%	14,532	8.1%
FY 13-14	1,027	7.8%	17,021	17.1%
FY 14-15	1,107	7.8%	17,837	4.8%
Compound Annual Growth Rate SFY**		4.1%		9.9%



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

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

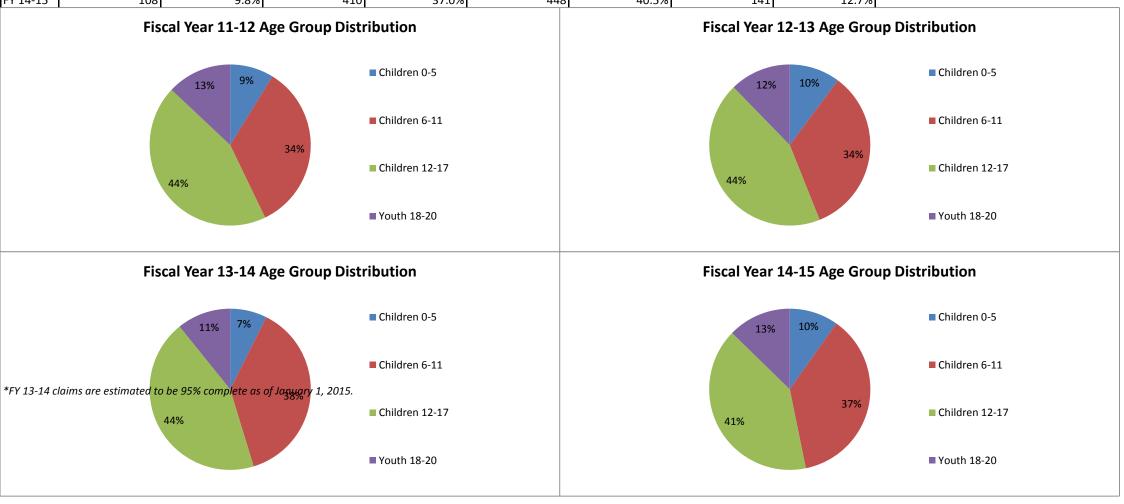
Mendocino County as of August 3, 2016

Fiscal Year	Alaskan Native or American Indian Count	Alaskan Native or American Indian %	Asian or Pacific Islander Count	Asian or Pacific Islander %	Black Count	Black %	Hispanic Count	Hispanic %	White Count	White %	Other Count	Other %	Unknown Count	Unknown %
FY 11-12	93	9.5%	۸	۸	25	2.6%	180	18.4%	628	64.1%	۸	۸	۸	^
FY 12-13	88	9.2%	۸	۸	19	2.0%	192	20.1%	601	63.1%	۸	۸	۸	^
FY 13-14	82	8.0%	۸	۸	19	1.9%	258	25.1%	587	57.2%	٨	۸	۸	۸
FY 14-15	79	7.1%	۸	۸	27	2.4%	283	25.6%	638	57.6%	٨	۸	^	^

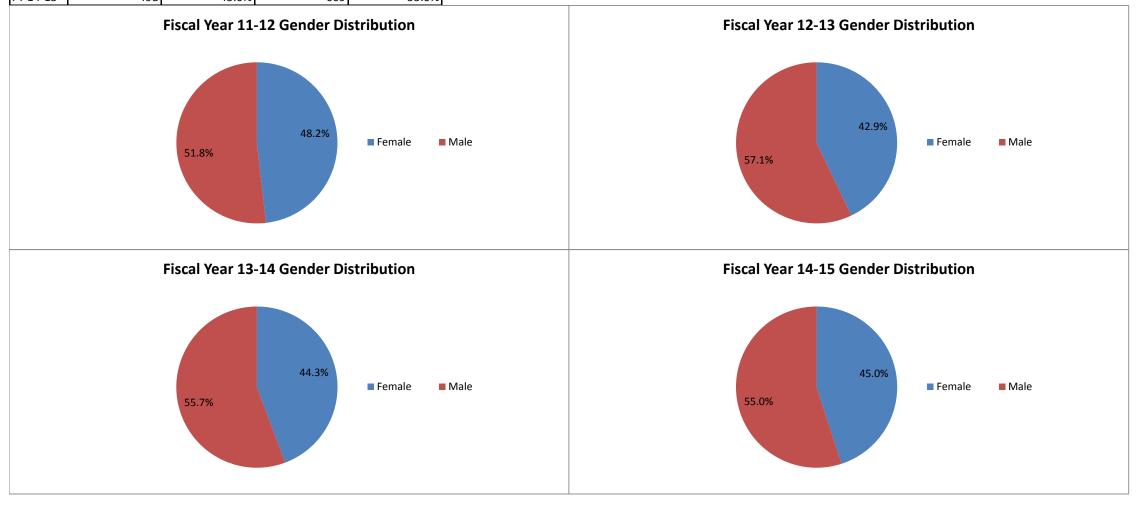
CHARTS NOT PRODUCED DUE TO SMALL CELL SIZES.

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

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	86	8.8%	334	34.1%	433	44.2%	127	13.0%
FY 12-13	97	10.2%	322	33.8%	417	43.8%	117	12.3%
FY 13-14	76	7.4%	389	37.9%	451	43.9%	111	10.8%
FY 14-15	108	9.8%	410	37.0%	448	40.5%	141	12.7%



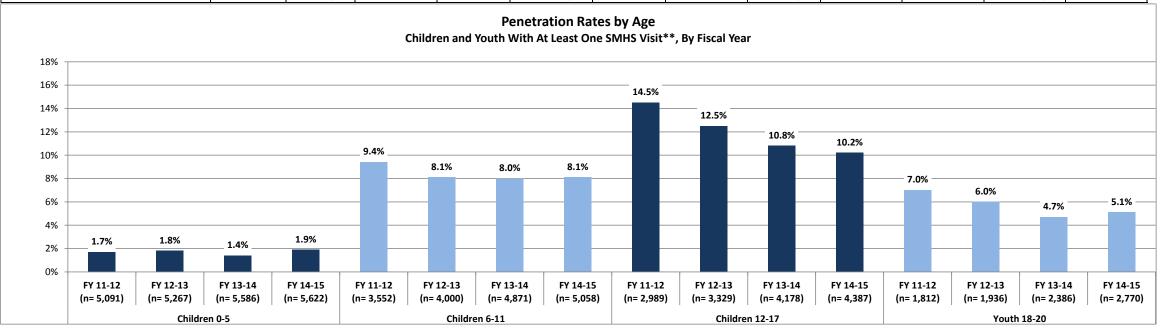
Fiscal Year	Female Count	Female %	Male Count	Male %
FY 11-12	472	48.2%	508	51.8%
FY 12-13	409	42.9%	544	57.1%
FY 13-14	455	44.3%	572	55.7%
FY 14-15	498	45.0%	609	55.0%



Penetration Rates* Report: Children and Youth With At Least One SMHS Visit**

Mendocino County as of August 3, 2016

		FY 11-12			FY 12-13			FY 13-14		FY 14-15			
	Children and	Certified		Children and	Certified		Children and	Certified		Children and	Certified		
	Youth with 1 or more SMHS	Eligible Children and	Penetration Rate	Youth with 1 or more	Eligible Children and	Penetration Rate	Youth with 1 or more SMHS	Eligible Children and	Penetration Rate	Youth with 1 or more SMHS	Eligible Children and	Penetration Rate	
	Visits	Youth	Nate	SMHS Visits	Youth	Mate	Visits	Youth	Mate	Visits	Youth	Nate	
All	980	13,444	7.3%	953	14,532	6.6%	1,027	17,021	6.0%	1,107	17,837	6.2%	
Children 0-5	86	5,091	1.7%	97	5,267	1.8%	76	5,586	1.4%	108	5,622	1.9%	
Children 6-11	334	3,552	9.4%	322	4,000	8.1%	389	4,871	8.0%	410	5,058	8.1%	
Children 12-17	433	2,989	14.5%	417	3,329	12.5%	451	4,178	10.8%	448	4,387	10.2%	
Youth 18-20	127	1,812	7.0%	117	1,936	6.0%	111	2,386	4.7%	141	2,770	5.1%	
Alaskan Native or American Indian	93	1,064	8.7%	88	1,131	7.8%	82	1,163	7.1%	79	1,153	6.9%	
Asian or Pacific Islander	^	156	٨	۸	168	۸	^	241	٨	۸	249	^	
Black	25	144	17.4%	19	163	11.7%	19	173	11.0%	27	176	15.3%	
Hispanic	180	4,968	3.6%	192	5,392	3.6%	258	6,324	4.1%	283	6,589	4.3%	
White	628	6,217	10.1%	601	6,623	9.1%	587	7,432	7.9%	638	7,655	8.3%	
Other	۸	67	٨	۸	60	۸	۸	125	٨	٨	118	۸	
Unknown	^	828	۸	۸	995	۸	۸	1,563	۸	^	1,897	۸	
Female	472	6,641	7.1%	409	7,170	5.7%	455	8,408	5.4%	498	8,806	5.7%	
Male	508	6,803	7.5%	544	7,362	7.4%	572	8,613	6.6%	609	9,031	6.7%	

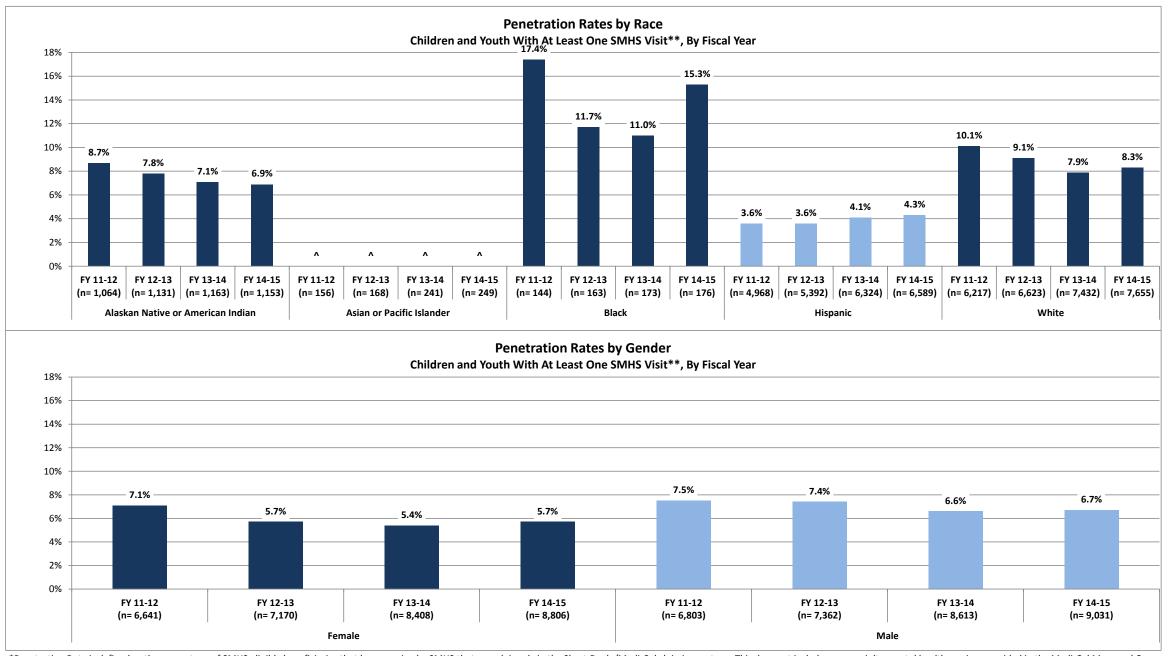


^{*}Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in the Medi-Cal Managed Care system.

^{**}Children and Youth that have received at least one SMHS in the Fiscal Year.

Penetration Rates* Report: Children and Youth With At Least One SMHS Visit**

Mendocino 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 the Medi-Cal Managed Care system.

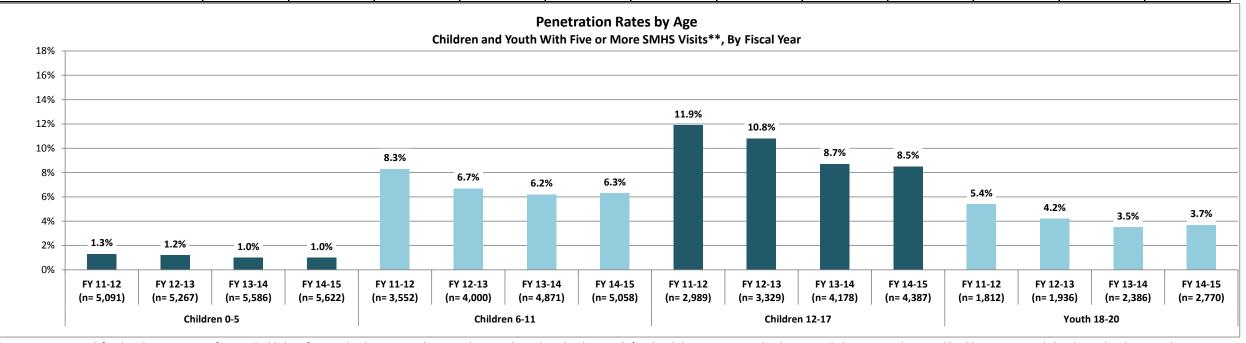
^{**}Children and Youth that have received at least one SMHS in the Fiscal Year.

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

Penetration Rates* Report: Children and Youth with Five or More SMHS Visits**

Mendocino County as of August 3, 2016

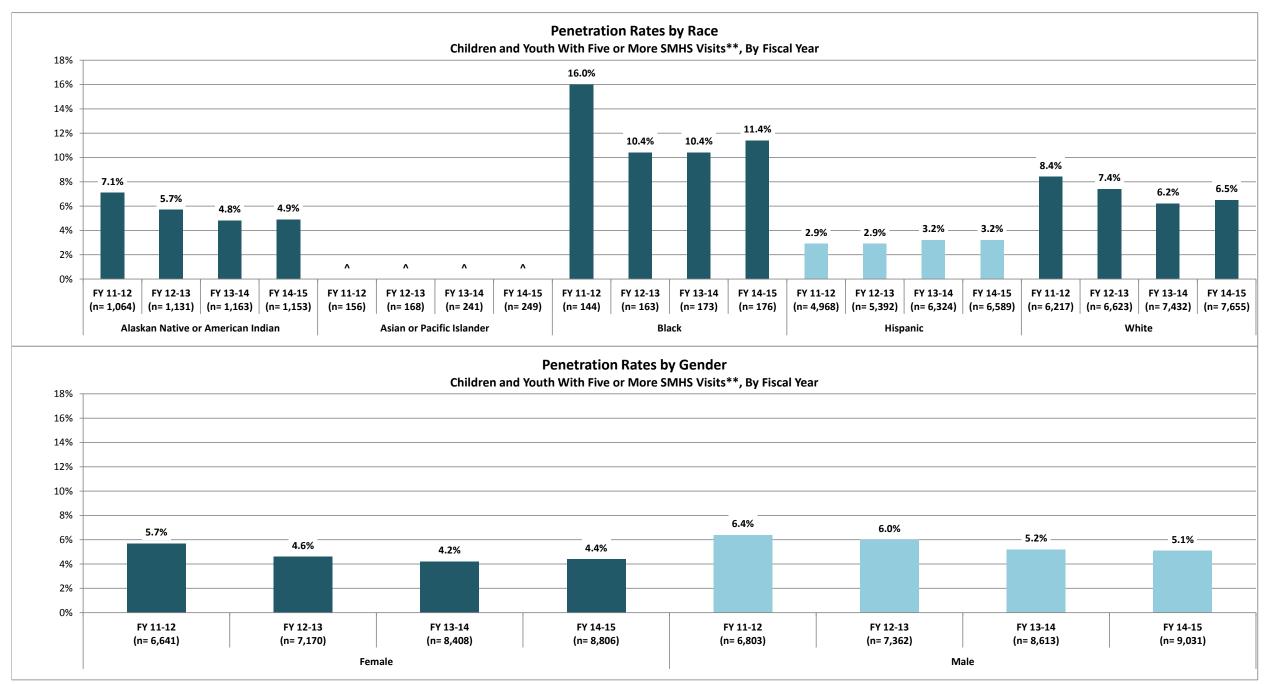
		FY 11-12			FY 12-13			FY 13-14			FY 14-15	
	Children and Youth with 5 or more SMHS	Certified Eligible Children and	Penetration Rate	Children and Youth with 5 or more SMHS	Certified Eligible Children and	Penetration Rate	Children and Youth with 5 or more SMHS	Certified Eligible Children and	Penetration Rate	Children and Youth with 5 or more SMHS	Certified Eligible Children and	Penetration Rate
	Visits	Youth		Visits	Youth		Visits	Youth		Visits	Youth	
All	813	13,444	6.0%	773	14,532	5.3%	802	17,021	4.7%	850	17,837	4.8%
Children 0-5	64	5,091	1.3%	64	5,267	1.2%	55	5,586	1.0%	58	5,622	1.0%
Children 6-11	294	3,552	8.3%	269	4,000	6.7%	300	4,871	6.2%	317	5,058	6.3%
Children 12-17	357	2,989	11.9%	358	3,329	10.8%	364	4,178	8.7%	372	4,387	8.5%
Youth 18-20	98	1,812	5.4%	82	1,936	4.2%	83	2,386	3.5%	103	2,770	3.7%
Alaskan Native or American Indian	76	1,064	7.1%	65	1,131	5.7%	56	1,163	4.8%	56	1,153	4.9%
Asian or Pacific Islander	۸	156	٨	۸	168	۸	۸	241	٨	٨	249	۸
Black	23	144	16.0%	17	163	10.4%	18	173	10.4%	20	176	11.4%
Hispanic	143	4,968	2.9%	157	5,392	2.9%	202	6,324	3.2%	214	6,589	3.2%
White	521	6,217	8.4%	490	6,623	7.4%	459	7,432	6.2%	495	7,655	6.5%
Other	۸	67	۸	۸	60	٨	۸	125	۸	٨	118	۸
Unknown	^	828	^	^	995	^	^	1,563	^	۸	1,897	^
Female	376	6,641	5.7%	332	7,170	4.6%	353	8,408	4.2%	386	8,806	4.4%
Male	437	6,803	6.4%	441	7,362	6.0%	449	8,613	5.2%	464	9,031	5.1%



^{*}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 the Medi-Cal Managed Care system. **Children and Youth that have received at least five SMHS in the Fiscal Year.

Penetration Rates* Report: Children and Youth with Five or More SMHS Visits**

Mendocino 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 the Medi-Cal Managed Care system. **Children and Youth that have received at least five SMHS in the Fiscal Year.

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

Utilization Report*: Approved Specialty Mental Health Services for Children and Youth Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Fiscal Year*

Mendocino County as of August 3, 2016

Fiscal Year	SDMC 1		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		Adult Residential Treatment Services (Days)	
FY 11-12	\$ 4,	953.83	0	0	414	1,810	3,071	150	237	0	0	0	0	0	0	0	0	0
FY 12-13	\$ 6,	238.56	0	0	407	2,417	4,821	201	212	0	0	0	0	0	0	0	0	0
FY 13-14	\$ 5,	902.49	1,001	1,160	256	2,023	5,980	86	255	0	0	0	0	0	0	0	0	0
FY 14-15	\$ 5,	642.36	1,022	1,214	242	2,151	4,870	131	282	0	492	0	0	0	0	0	0	0
MEAN	\$ 5,	684.31	1,012	1,187	330	2,100	4,685	142	247	0	492	0	0	0	0	0	0	0



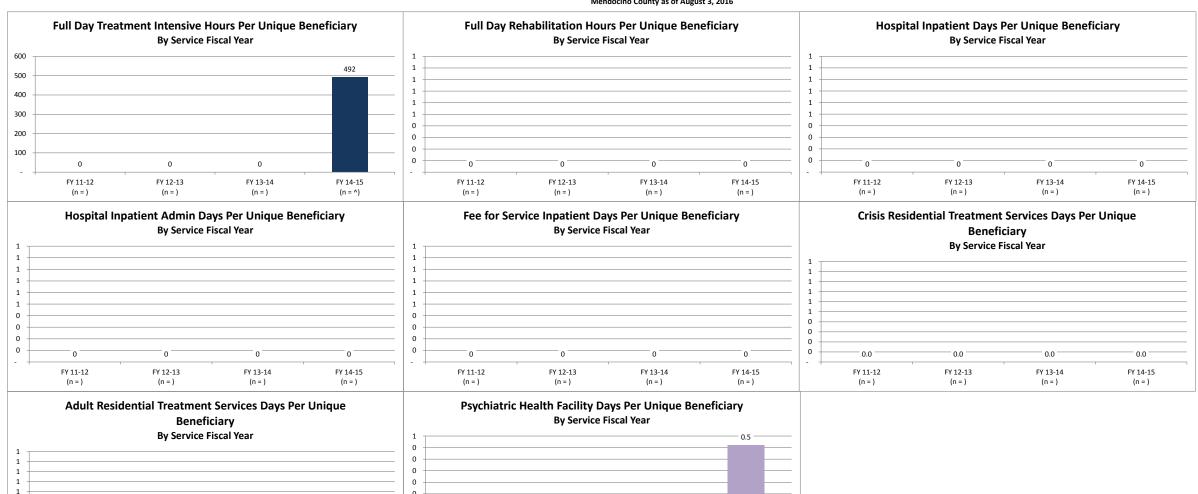
^{*}The graphs are color coded so that those reported in the same unit of analysis (e.g., minutes) are colored similarly.

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 Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Fiscal Year*

Mendocino 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

(n =)

0.0

FY 13-14

(n =)

0.0

FY 11-12

(n =)

Page 12 of 14

FY 12-13

(n =)

FY 11-12

(n =)

0.0

FY 13-14

(n =)

FY 14-15 (n = ^)

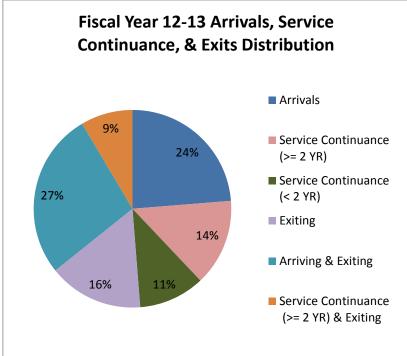
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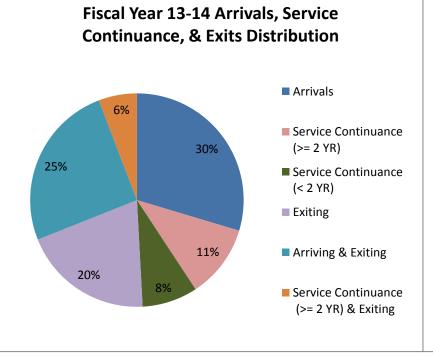
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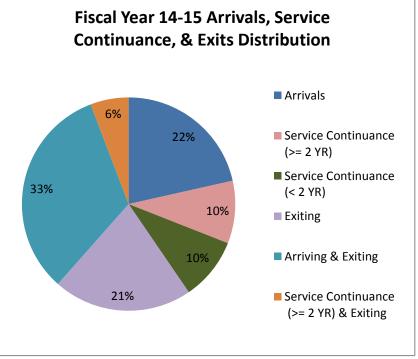
Snapshot Report: Unique Count of Children and Youth Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year

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	Continuance	Service Continuance (<2 YR) Count	Service Continuance (< 2 YR) %	Exiting Count	Exiting %	Arriving & Exiting Count	Arriving & Exiting %	Service Continuance (>= 2 YR) & Exiting Count	(>= 2 YR) and	Total Count	Total %
FY 12-13	226	23.7%	135	14.2%	103	10.8%	148	15.5%	259	27.2%	81	8.5%	952	100%
FY 13-14	304	29.6%	114	11.1%	86	8.4%	203	19.8%	259	25.2%	60	5.8%	1,026	100%
FY 14-15	239	21.5%	106	9.5%	105	9.5%	234	21.1%	363	32.7%	64	5.8%	1,111	100%







Time to Step Down Report: Children and Youth 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	Step Down within 30 Days of	Discharges with Step Down within 30 Days of	Step Down > 30 Days from	Discharges with a Step Down > 30 Days from	Discharges with No Step Down*	Inpatient Discharges with No Step Down*	of Days between Discharge and Step Down	between Discharge and	Inpatient Discharge	Inpatient Discharge
	of Discharge	Discharge	Discharge	Discharge	Discharge	Discharge		No Step Down	Step Down	Step Down	(Days)	(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
10 9 8 7 6 5												
100%	FY 10-11	FY 11-12	ercenta e c	Square s	/ \L_L	etween Inpa- ithin 8 - 30 Days 31	FY 10-11 ient Dischar Days + No Step	ge and Step	ov n 3 ervi	FY 12-13	FY 13	

^{*} **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.