## Performance Outcomes System Reports Report run on 8/3/2016

#### 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 countyspecific 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: <a href="http://www.dhcs.ca.gov/provgovpart/pos/Pages/default.aspx">http://www.dhcs.ca.gov/provgovpart/pos/Pages/default.aspx</a>

#### **Purpose and Overview**

Population-based county grouped data is presented in this report. County groups are organized into the following four groups based on county population: small-rural, small, medium, and large counties. The counties in each group are listed on page 3 of this report and also available in the Measures Catalog. 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. Starting with this report, 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.

## Performance Outcomes System Reports Report run on 8/3/2016

#### **Data Sources -**

• Short-Doyle/Medi-Cal II (SD/MC II) claims with dates of service in FY 10/11 through FY 13/14.

• Medi-Cal Eligibility Data System (MEDS) data from the Management Information System/Decision Support System (MIS/DSS) FY 10/11 through FY 13/14.

#### **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: <a href="http://www.dhcs.ca.gov/provgovpart/pos/Pages/Performance-Outcomes-System-Reports-and-Measures-Catalog.aspx">http://www.dhcs.ca.gov/provgovpart/pos/Pages/Performance-Outcomes-System-Reports-and-Measures-Catalog.aspx</a>

#### 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, me dium, 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 penetrationrates 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 futurethis 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.

## Performance Outcomes System Reports Report run on 8/3/2016

### **County Groupings**

Counties are grouped by population, as follows:

#### Category:

Small Rural: Population is less than 50,000 Small: Population is 50,000-199,999 Medium: Population is 200,000-749,000 Large: Population is 750,000-3,999,999 Very Large: 4,000,000 or greater

#### **Counties in each Category:**

Small Rural: Alpine, Amador, Calaveras, Colusa, Del Norte, Glenn, Inyo, Lassen, Mariposa, Modoc, Mono, Plumas, Sierra, Siskiyou, Trinity Small: El Dorado, Humboldt, Imperial, Kings, Lake, Madera, Mendocino, Napa, Nevada, San Benito, Shasta, Sutter, Tehama, Tuolumne, Yuba Medium: Butte, Marin, Merced, Monterey, Placer, San Joaquin, San Luis Obispo, San Mateo, Santa Barbara, Santa Cruz, Solano, Sonoma, Stanislaus, Tulare, Yolo Large: Alameda, Contra Costa, Fresno, Kern, Orange, Riverside, Sacramento, San Bernardino, San Diego, San Francisco, Santa Clara, Ventura Very Large: Los Angeles

Population information is provided for each county (on pages 13 and 14) of the Measures Catalog. http://www.dhcs.ca.gov/provgovpart/pos/Pages/Performance-Outcomes-System-Reports-and-Measures-Catalog.aspx

## Demographics Report: Unique Count of Children and Youth Receiving SMHS by Fiscal Year Large County Populations as of August 3, 2016

SFY	Unique Count Receiving SMHS*	Year-Over-Year Percentage Change	Unique Count of Medi-Cal Eligibles	Year-Over-Year Percentage Change
FY 11-12	100,761		2,306,487	
FY 12-13	109,105	8.3%	2,699,877	17.1%
FY 13-14	118,566	8.7%	3,000,205	11.1%
FY 14-15	120,730	1.8%	3,177,811	5.9%
Compound Annual Growth Rate SFY**		6.2%		11.3%

\*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 Children and Youth Receiving SMHS by Fiscal Year Large County Populations 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	591	0.6%	3,694	3.7%	17,704	17.6%	45,508	45.2%	25,062	24.9%	2,481	2.5%	5,721	5.7%
FY 12-13	588	0.5%	4,102	3.8%	17,578	16.1%	50,696	46.5%	25,956	23.8%	3,284	3.0%	6,901	6.3%
FY 13-14	558	0.5%	4,818	4.1%	17,278	14.6%	56,459	47.6%	27,000	22.8%	4,063	3.4%	8,390	7.1%
FY 14-15	539	0.4%	5,774	4.8%	16,942	14.0%	57,647	47.7%	26,722	22.1%	4,430	3.7%	8,676	7.2%

## Demographics Report: Unique Count of Children and Youth Receiving SMHS by Fiscal Year Large County Populations 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	13,047	12.9%	34,417	34.2%	42,353	42.0%	10,944	10.9%
FY 12-13	12,716	11.7%	37,290	34.2%	46,082	42.2%	13,017	11.9%
FY 13-14	12,951	10.9%	40,380	34.1%	50,896	42.9%	14,339	12.1%
FY 14-15	13,919	11.5%	39,913	33.1%	51,368	42.5%	15,530	12.9%

## Demographics Report: Unique Count of Children and Youth by Fiscal Year Large County Populations as of August 3, 2016

Fiscal Year	Female Count	Female %	Male Count	Male %
FY 11-12	42,523	42.2%	58,238	57.8%
FY 12-13	46,570	42.7%	62,535	57.3%
FY 13-14	51,662	43.6%	66,904	56.4%
FY 14-15	53,672	44.5%	67,058	55.5%

### Penetration Rates\* Report: Children and Youth With At Least One SMHS Visit\*\* Large County Populations 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	Eligible	Penetration	Youth with 1	Eligible	Penetration	Youth with 1 or	Eligible	Penetration	Youth with 1 or	Eligible	Penetration
	or more SMHS	Children and	Rate	or more	Children and	Rate	more SMHS	Children and	Rate	more SMHS	Children and	Rate
	Visits	Youth		SMHS Visits	Youth		Visits	Youth		Visits	Youth	
All	100,761	2,306,487	4.4%	109,105	2,699,877	4.0%	118,566	3,000,205	4.0%	120,730	3,177,811	3.8%
Children 0-5	13,047	870,482	1.5%	12,716	917,474	1.4%	12,951	943,259	1.4%	13,919	952,985	1.5%
Children 6-11	34,417	623,921	5.5%	37,290	787,727	4.7%	40,380	881,874	4.6%	39,913	925,717	4.3%
Children 12-17	42,353	535,201	7.9%	46,082	677,830	6.8%	50,896	769,451	6.6%	51,368	808,761	6.4%
Youth 18-20	10,944	276,883	4.0%	13,017	316,846	4.1%	14,339	405,621	3.5%	15,530	490,348	3.2%
Alaskan Native or American Indian	591	7,367	8.0%	588	7,761	7.6%	558	8,293	6.7%	539	8,793	6.1%
Asian or Pacific Islander	3,694	217,797	1.7%	4,102	275,107	1.5%	4,818	328,309	1.5%	5,774	357,867	1.6%
Black	17,704	231,784	7.6%	17,578	241,208	7.3%	17,278	248,637	6.9%	16,942	256,430	6.6%
Hispanic	45,508	1,285,724	3.5%	50,696	1,503,766	3.4%	56,459	1,620,059	3.5%	57,647	1,685,472	3.4%
White	25,062	334,621	7.5%	25,956	377,966	6.9%	27,000	434,398	6.2%	26,722	465,642	5.7%
Other	2,481	90,770	2.7%	3,284	121,648	2.7%	4,063	153,663	2.6%	4,430	173,367	2.6%
Unknown	5,721	138,424	4.1%	6,901	172,421	4.0%	8,390	206,846	4.1%	8,676	230,240	3.8%
Female	42,523	1,144,749	3.7%	46,570	1,338,039	3.5%	51,662	1,483,500	3.5%	53,672	1,569,706	3.4%
Male	58,238	1,161,738	5.0%	62,535	1,361,838	4.6%	66,904	1,516,705	4.4%	67,058	1,608,105	4.2%

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

## Penetration Rates\* Report: Children and Youth With Five or More SMHS Visits\*\* Large County Populations 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 Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 5 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 5 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 5 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate
All	75,057	2,306,487	3.3%	80,847	2,699,877	3.0%	88,898	3,000,205	3.0%	90,724	3,177,811	2.9%
Children 0-5	8,592	870,482	1.0%	8,302	917,474	0.9%	8,494	943,259	0.9%	9,123	952,985	1.0%
Children 6-11	26,763	623,921	4.3%	28,704	787,727	3.6%	31,521	881,874	3.6%	31,281	925,717	3.4%
Children 12-17	32,533	535,201	6.1%	35,165	677,830	5.2%	39,074	769,451	5.1%	39,923	808,761	4.9%
Youth 18-20	7,169	276,883	2.6%	8,845	316,846	2.8%	9,809	405,621	2.4%	10,397	490,348	2.1%
Alaskan Native or American Indian	451	7,367	6.1%	461	7,761	5.9%	422	8,293	5.1%	393	8,793	4.5%
Asian or Pacific Islander	2,822	217,797	1.3%	3,149	275,107	1.1%	3,664	328,309	1.1%	4,446	357,867	1.2%
Black	13,666	231,784	5.9%	13,572	241,208	5.6%	13,324	248,637	5.4%	13,097	256,430	5.1%
Hispanic	33,119	1,285,724	2.6%	36,853	1,503,766	2.5%	41,634	1,620,059	2.6%	42,741	1,685,472	2.5%
White	18,692	334,621	5.6%	18,692	377,966	4.9%	20,209	434,398	4.7%	20,094	465,642	4.3%
Other	1,907	90,770	2.1%	2,487	121,648	2.0%	3,133	153,663	2.0%	3,359	173,367	1.9%
Unknown	4,400	138,424	3.2%	5,295	172,421	3.1%	6,512	206,846	3.1%	6,594	230,240	2.9%
Female	31,396	1,144,749	2.7%	34,316	1,338,039	2.6%	38,330	1,483,500	2.6%	39,909	1,569,706	2.5%
Male	43,661	1,161,738	3.8%	46,700	1,361,838	3.4%	50,568	1,516,705	3.3%	50,815	1,608,105	3.2%

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

#### Utilization Report\*: Approved Specialty Mental Health Services for Children and Youth Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Fiscal Year\*\* Large Population Counties 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)	<b>T</b>	Adult Residential Treatment Services (Days)	Psychiatric Health Facility (Days)
FY 11-12	\$ 5,076.50	0	0	531	1,542	4,829	264	225	13	562	385	4	12	8	12	42	11
FY 12-13	\$ 5,978.02	845	314	461	1,493	4,752	261	221	14	559	433	5	10	8	18	77	11
FY 13-14	\$ 5,903.80	2,253	1,045	426	1,487	4,576	263	226	15	529	440	5	9	8	18	99	11
FY 14-15	\$ 6,075.27	2,447	1,086	430	1,554	4,385	268	218	16	501	535	4	15	7	22	97	11
MEAN	\$ 5,758.40	1,848	815	462	1,519	4,636	264	222	14	538	448	4	11	8	17	79	11

Fiscal Year	SDMC Total Clients	IHBS Clients	ICC Clients	Case Management/ Brokerage Clients	Mental Health Services Clients	Behavioral	Medication Support Services Clients	Crisis Intervention Clients	Crisis Stabilization Clients	Full Day Treatment Intensive Clients	Full Day Rehabilitation Clients	Hospital Inpatient Clients	Hospital Inpatient Admin Clients	Fee for Service Inpatient Clients	Treatment	Adult Residential Treatment Services Clients	Psychiatric Health Facility Clients
FY 11-12	103,060	-	-	38,748	92,758	3,848	33,436	6,027	4,219	1,450	1,286	1,053	59	5,550	128	42	337
FY 12-13	111,463	107	100	40,782	100,274	4,145	36,270	6,700	5,481	961	1,508	1,175	75	6,407	178	60	449
FY 13-14	121,452	1,354	2,192	44,650	109,053	4,178	38,528	7,165	6,357	814	1,284	1,251	65	7,666	257	67	440
FY 14-15	123,819	2,521	4,115	45,131	110,489	4,427	37,357	7,280	7,432	150	945	1,304	84	8,104	295	59	510

\*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.

# Snapshot Report: Unique Count of Children and Youth Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year Large County Populations 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) Count		Exiting Count	Exiting %	Eviting	Arriving & Exiting %		Service Continuance (>= 2 YR) and Exiting %		Total %
FY 12-13	28,533	26.2%	8,763	8.0%	9,310	8.5%	19,977	18.3%	39,134	35.9%	3,377	3.1%	109,094	100%
FY 13-14	28,747	24.2%	9,262	7.8%	10,539	8.9%	23,337	19.7%	43,145	36.4%	3,540	3.0%	118,570	100%
FY 14-15	28,117	23.3%	9,434	7.8%	10,210	8.5%	24,921	20.6%	43,941	36.4%	4,096	3.4%	120,719	100%

# Time to Step Down Report: Children and Youth Stepping Down in SMHS Services Post Inpatient Discharge Large Population Counties as of August 3, 2016

Service FY	Count of Inpatient Discharges with Step Down within 7 Days of Discharge	Sten Down within	Step Down Between 8 and 30	Inpatient Discharges with Step Down	Count of Inpatient Discharges with a Step Down > 30 Days from Discharge	Inpatient Discharges with a	Count 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	4,948	59.9%	1,306	15.8%	1,405	17.0%	596	7.2%	0	365	31.9	2
FY 12-13	5,382	65.6%	1,116	13.6%	1,095	13.3%	610	7.4%	0	365	25.4	1
FY 13-14	5,982	63.8%	1,390	14.8%	1,189	12.7%	815	8.7%	0	365	23.5	2
FY 14-15	5,913	59.9%	1,538	15.6%	1,233	12.5%	1,183	12.0%	0	365	21.2	2

\* **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.