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.

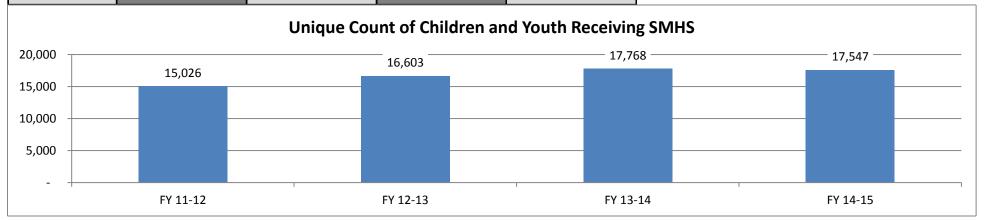
*The *penetration rates* reported here were calculated using a different methodology than that used by the External Quality Review Organization (EQRO). The differences in methodology make comparison between the POS penetration rates and the EQRO penetration rates not appropriate or useful. The POS methodology 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	15,026		298,347	
FY 12-13	16,603	10.5%	361,190	21.1%
FY 13-14	17,768	7.0%	407,161	12.7%
FY 14-15	17,547	-1.2%	435,787	7.0%
Compound Annual Growth Rate SFY**		5.3%		13.5%



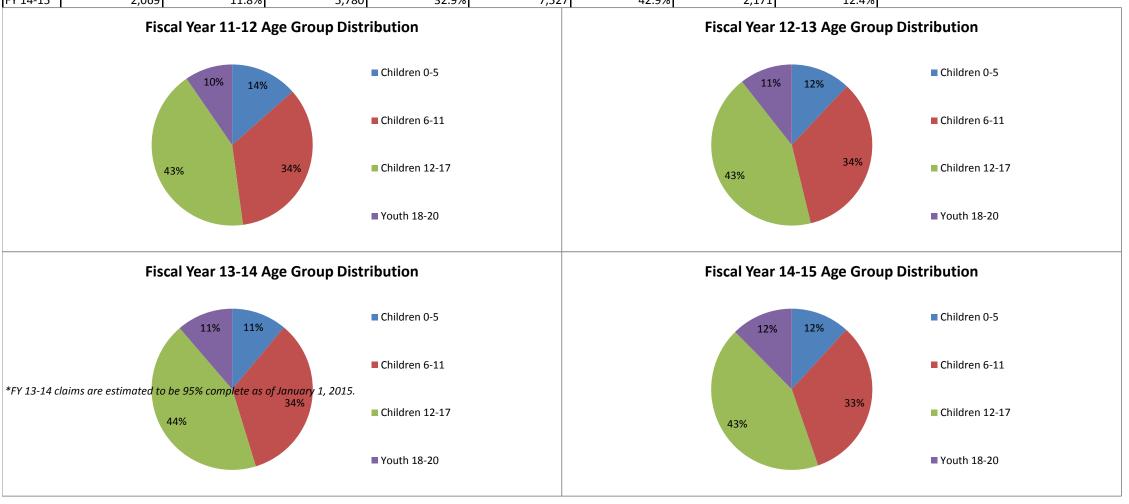
^{*}SMHS = Specialty Mental Health Services. See Measures Catalog for more detailed information.

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

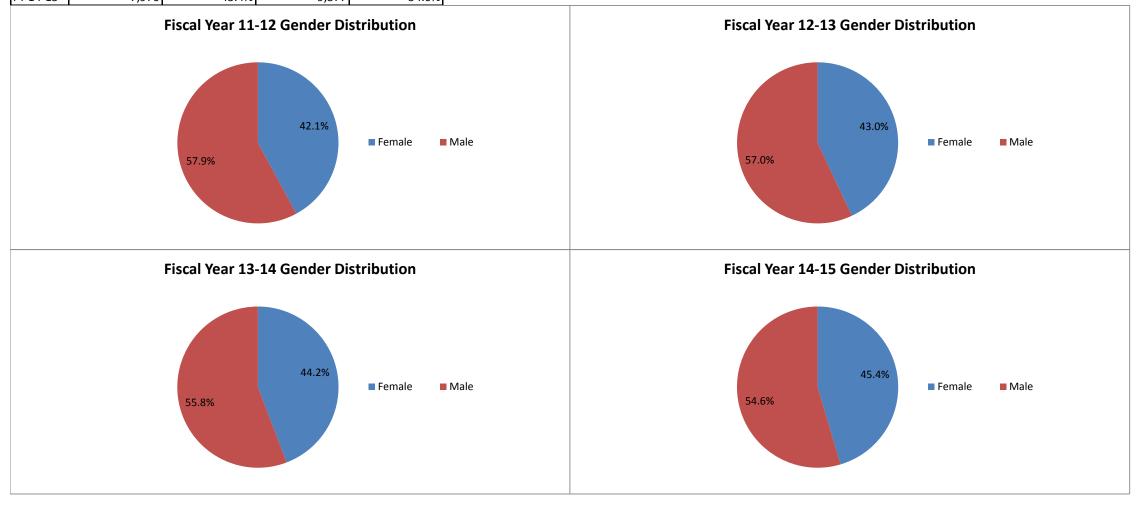
San Diego County as of August 3, 2016

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	104	0.7%	418	2.8%	1,887	12.6%	7,522	50.1%	3,833	25.5%	579	3.9%	683	4.5%
FY 12-13	103	0.6%	435	2.6%	1,856	11.2%	8,467	51.0%	4,127	24.9%	839	5.1%	776	4.7%
FY 13-14	121	0.7%	512	2.9%	1,778	10.0%	8,967	50.5%	4,233	23.8%	1,097	6.2%	1,060	6.0%
FY 14-15	119	0.7%	705	4.0%	1,721	9.8%	8,570	48.8%	4,278	24.4%	1,182	6.7%	972	5.5%
	Fiscal Year 11-12 Race Distribution Alaskan Native or American Indian Asian or Pacific Islander Black Hispanic White Other Unknown									. _% 3%	-13 Race Dis		ve or American ific Islander	
		Fiscal Y	ear 13-14 F	Race Distrib	ution			Fiscal Year 14-15 Race Distribution						
		1% 3%			skan Native or A	American			:	1%			ve or American	
		6% 6%	10%		lian ian or Pacific Isla	nder			7% 6%	4% 10%		Indian ■ Asian or Pac	ific Islander	
	■ Black											■ Black		
*FY 13-14 c	laims are e 3fi% a	ted to be 95% co	omplete as of Ja	nuary 1, 2015.					24%			■ Hispanic■ White		
			51%	■ Ot						49%		■ Other		
	■ Unknown											Unknown		

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	2,021	13.5%	5,168	34.4%	6,397	42.6%	1,440	9.6%
FY 12-13	1,987	12.0%	5,684	34.2%	7,167	43.2%	1,765	10.6%
FY 13-14	1,967	11.1%	6,071	34.2%	7,728	43.5%	2,002	11.3%
FY 14-15	2,069	11.8%	5,780	32.9%	7,527	42.9%	2,171	12.4%



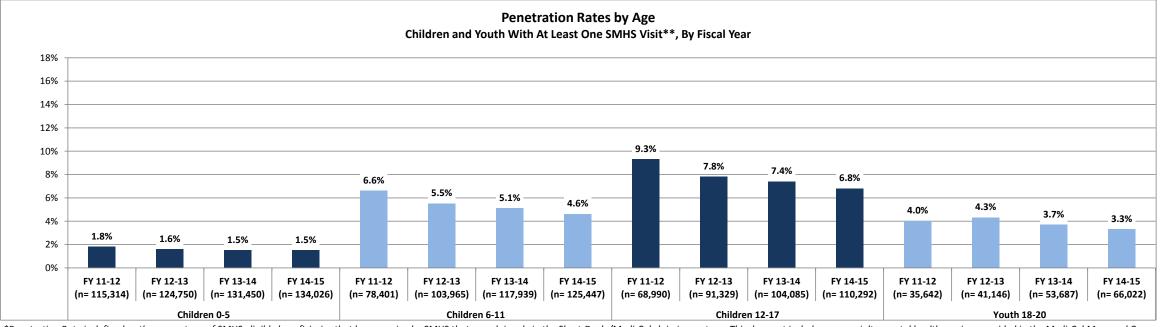
Fiscal Year	Female Count	Female %	Male Count	Male %
FY 11-12	6,332	42.1%	8,694	57.9%
FY 12-13	7,140	43.0%	9,463	57.0%
FY 13-14	7,858	44.2%	9,910	55.8%
FY 14-15	7.970	45.4%	9.577	54.6%



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

San Diego 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	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	15,026	298,347	5.0%	16,603	361,190	4.6%	17,768	407,161	4.4%	17,547	435,787	4.0%	
Children 0-5	2,021	115,314	1.8%	1,987	124,750	1.6%	1,967	131,450	1.5%	2,069	134,026	1.5%	
Children 6-11	5,168	78,401	6.6%	5,684	103,965	5.5%	6,071	117,939	5.1%	5,780	125,447	4.6%	
Children 12-17	6,397	68,990	9.3%	7,167	91,329	7.8%	7,728	104,085	7.4%	7,527	110,292	6.8%	
Youth 18-20	1,440	35,642	4.0%	1,765	41,146	4.3%	2,002	53,687	3.7%	2,171	66,022	3.3%	
Alaskan Native or American Indian	104	1,250	8.3%	103	1,332	7.7%	121	1,467	8.2%	119	1,666	7.1%	
Asian or Pacific Islander	418	23,468	1.8%	435	28,698	1.5%	512	34,313	1.5%	705	39,303	1.8%	
Black	1,887	24,827	7.6%	1,856	25,830	7.2%	1,778	26,344	6.7%	1,721	27,146	6.3%	
Hispanic	7,522	160,314	4.7%	8,467	196,553	4.3%	8,967	212,654	4.2%	8,570	221,416	3.9%	
White	3,833	44,602	8.6%	4,127	52,498	7.9%	4,233	62,678	6.8%	4,278	68,693	6.2%	
Other	579	25,765	2.2%	839	34,962	2.4%	1,097	44,149	2.5%	1,182	49,614	2.4%	
Unknown	683	18,121	3.8%	776	21,317	3.6%	1,060	25,556	4.1%	972	27,949	3.5%	
Female	6,332	147,508	4.3%	7,140	178,157	4.0%	7,858	200,786	3.9%	7,970	215,054	3.7%	
Male	8,694	150,839	5.8%	9,463	183,033	5.2%	9,910	206,375	4.8%	9,577	220,733	4.3%	

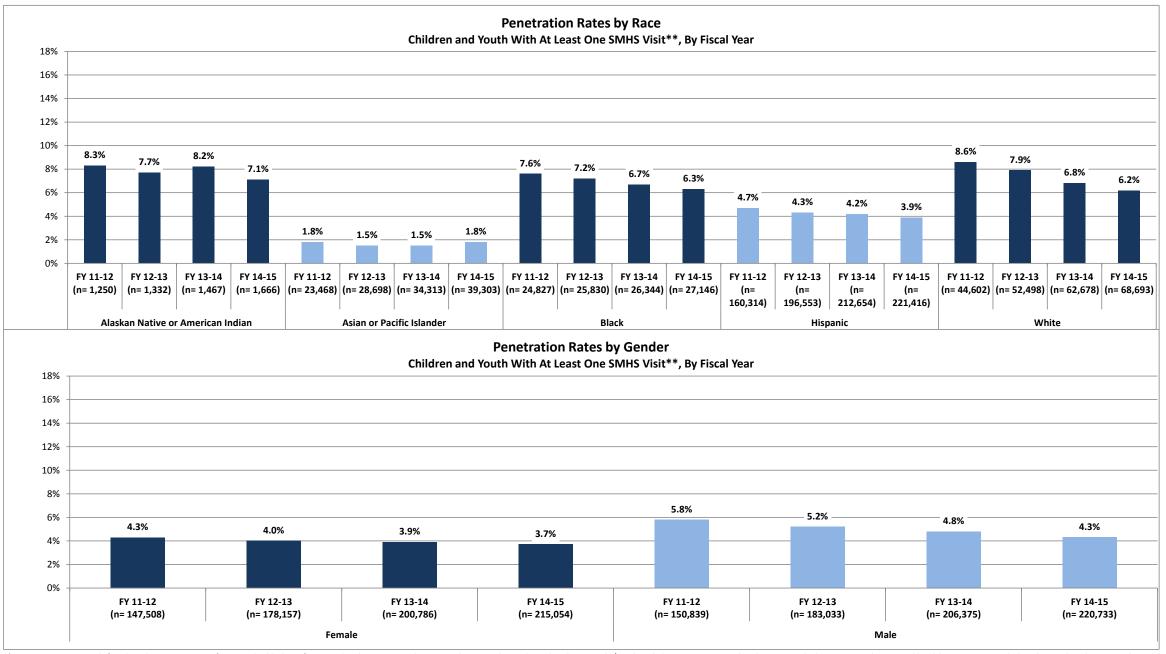


^{*}Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in the Medi-Cal Managed Care system.

^{**}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**

San Diego County as of August 3, 2016



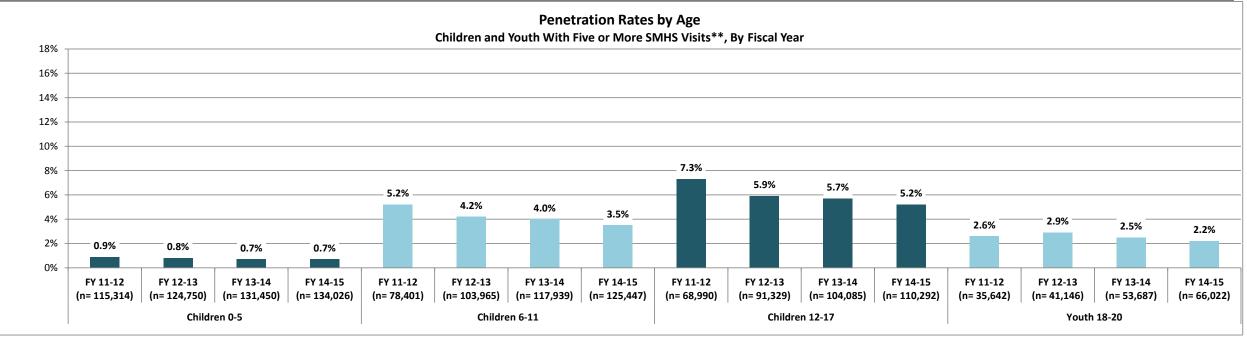
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^{**}Children and Youth that have received at least one SMHS in the Fiscal Year.

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

San Diego 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 5 or	Eligible	Penetration	Youth with 5 or	Eligible	Penetration	Youth with 5 or	Eligible	Penetration	Youth with 5 or	Eligible	Penetration
	more SMHS	Children and	Rate									
	Visits	Youth		Visits	Youth		Visits	Youth		Visits	Youth	
All	11,068	298,347	3.7%	11,892	361,190	3.3%	12,863	407,161	3.2%	12,439	435,787	2.9%
Children 0-5	1,016	115,314	0.9%	946	124,750	0.8%	942	131,450	0.7%	931	134,026	0.7%
Children 6-11	4,102	78,401	5.2%	4,328	103,965	4.2%	4,686	117,939	4.0%	4,358	125,447	3.5%
Children 12-17	5,021	68,990	7.3%	5,424	91,329	5.9%	5,917	104,085	5.7%	5,718	110,292	5.2%
Youth 18-20	929	35,642	2.6%	1,194	41,146	2.9%	1,318	53,687	2.5%	1,432	66,022	2.2%
Alaskan Native or American Indian	70	1,250	5.6%	81	1,332	6.1%	84	1,467	5.7%	80	1,666	4.8%
Asian or Pacific Islander	304	23,468	1.3%	296	28,698	1.0%	327	34,313	1.0%	495	39,303	1.3%
Black	1,420	24,827	5.7%	1,324	25,830	5.1%	1,290	26,344	4.9%	1,230	27,146	4.5%
Hispanic	5,512	160,314	3.4%	6,131	196,553	3.1%	6,528	212,654	3.1%	6,140	221,416	2.8%
White	2,860	44,602	6.4%	2,945	52,498	5.6%	3,102	62,678	4.9%	3,023	68,693	4.4%
Other	402	25,765	1.6%	547	34,962	1.6%	769	44,149	1.7%	782	49,614	1.6%
Unknown	500	18,121	2.8%	568	21,317	2.7%	763	25,556	3.0%	689	27,949	2.5%
Female	4,658	147,508	3.2%	5,150	178,157	2.9%	5,639	200,786	2.8%	5,611	215,054	2.6%
Male	6,410	150,839	4.2%	6,742	183,033	3.7%	7,224	206,375	3.5%	6,828	220,733	3.1%

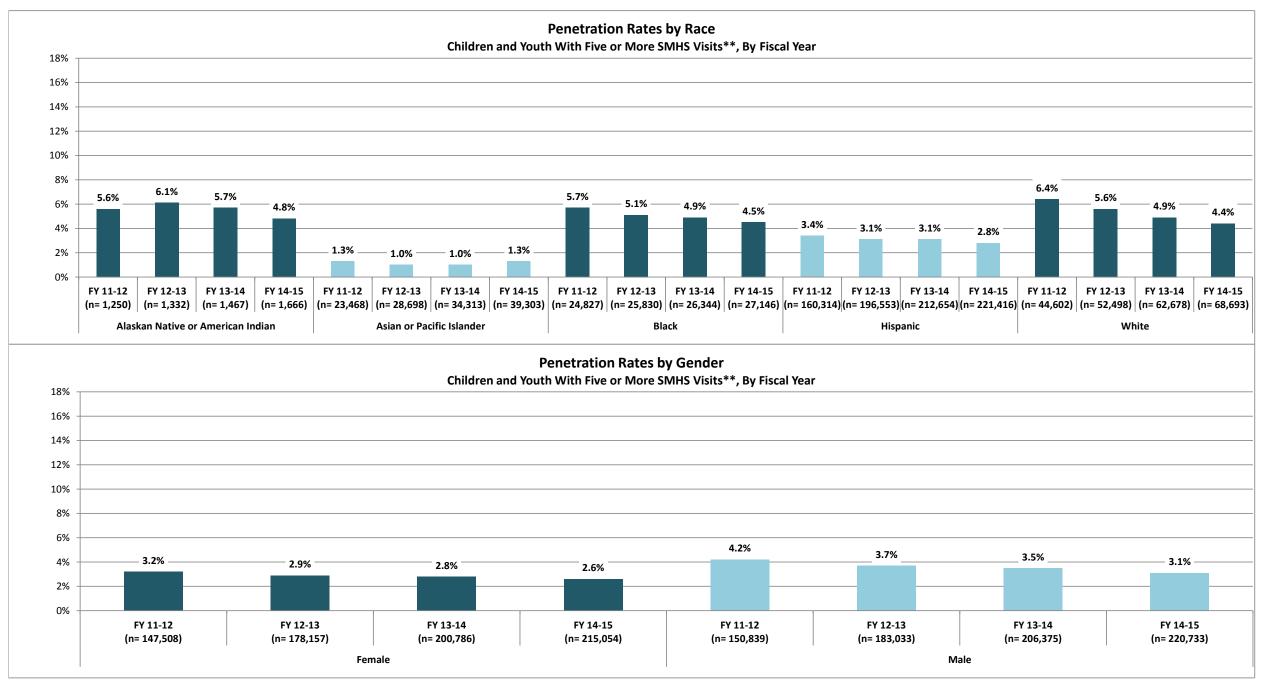


^{*}Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in the Medi-Cal Managed Care system.

^{**}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**

San Diego 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.

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

San Diego 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	Crisis Residential Treatment Services (Days)		Psychiatric Health Facility (Days)
FY 11-12	\$ 3,622.21	0	0	271	1,188	5,134	220	260	11	413	325	3	10	7	10	10	0
FY 12-13	\$ 4,222.31	195	0	250	1,072	4,519	202	182	10	419	413	4	15	7	13	116	0
FY 13-14	\$ 4,425.88	1,313	886	238	1,027	4,543	213	139	11	706	403	4	0	7	10	63	0
FY 14-15	\$ 4,383.14	1,357	912	210	1,025	4,197	214	136	10	626	493	3	13	8	11	126	0
MEAN	\$ 4,163.39	955	899	242	1,078	4,598	212	179	10	541	408	3	13	7	11	79	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*



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 = ^)

FY 13-14

(n = ^)

0

FY 11-12

(n =)

10.0

FY 11-12

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Page 12 of 14

FY 12-13

(n =)

0.0 FY 13-14

(n =)

FY 14-15

(n =)

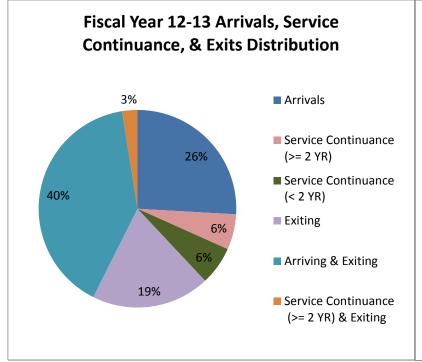
^{*}The graphs are color coded so that those reported in the same unit of analysis (e.g., minutes) are colored similarly.

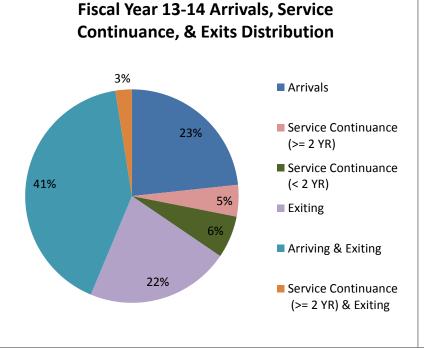
[^] Data has been suppressed to protect patient privacy.

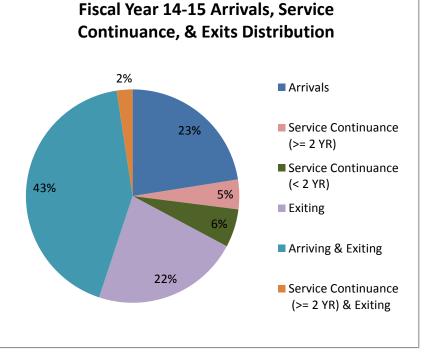
Snapshot Report: Unique Count of Children and Youth Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year

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		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	4,298	25.9%	968	5.8%	1,045	6.3%	3,223	19.4%	6,661	40.1%	410	2.5%	16,605	100%
FY 13-14	4,133	23.3%	859	4.8%	1,135	6.4%	3,879	21.8%	7,325	41.2%	440	2.5%	17,771	100%
FY 14-15	3,950	22.5%	781	4.5%	1,013	5.8%	3,914	22.3%	7,457	42.5%	428	2.4%	17,543	100%

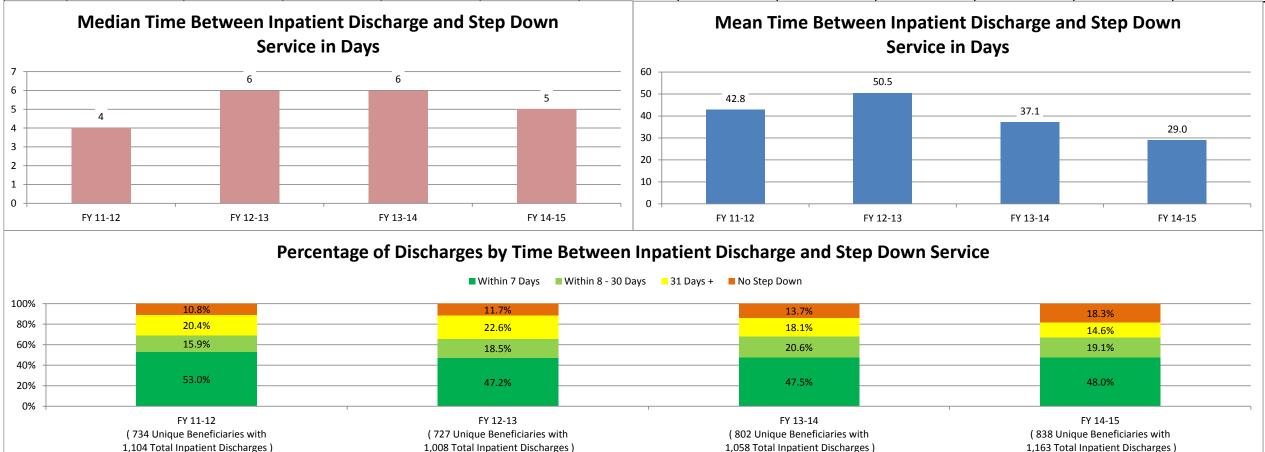






Time to Step Down Report: Children and Youth Stepping Down in SMHS Services Post Inpatient Discharge*

Service FY	Count of Inpatient Discharges with Step Down within 7 Days of Discharge	Step Down within	Step Down Between 8 and 30	Inpatient Discharges with Step Down	Step Down > 30	Inpatient	Discharges with		Minimum Number of Days between Discharge and Step Down	Number of Days	Mean Time to Next Contact Post Inpatient Discharge (Days)	Median Time to Next Contact Post Inpatient Discharge (Days)
FY 11-12	585	53.0%	175	15.9%	225	20.4%	119	10.8%	0	365	42.8	4
FY 12-13	476	47.2%	186	18.5%	228	22.6%	118	11.7%	0	365	50.5	6
FY 13-14	503	47.5%	218	20.6%	192	18.1%	145	13.7%	0	365	37.1	6
FY 14-15	558	48.0%	222	19.1%	170	14.6%	213	18.3%	0	365	29.0	5
	Median Time	e Between Ir	patient Disc	harge and S	tep Down		Mean T	ime Betwee	n Inpatient	Discharge an	d Step Dow	n



^{*} **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.