Performance Outcomes System

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 SMH' 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.

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.

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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, 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 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.

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	2,916		85,044	
FY 12-13	3,155	8.2%	91,166	7.2%
FY 13-14	3,845	21.9%	114,684	25.8%
FY 14-15	3,933	2.3%	121,900	6.3%
Compound Annual Growth Rate SFY**		10.5%		12.8%

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

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

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	۸	۸	28	1.0%	118	4.0%	1,700	58.3%	881	30.2%	٨	۸	137	4.7%
FY 12-13	12	0.4%	44	1.4%	120	3.8%	1,831	58.0%	919	29.1%	41	1.3%	188	6.0%
FY 13-14	14	0.4%	117	3.0%	120	3.1%	2,228	57.9%	1,048	27.3%	66	1.7%	252	6.6%
FY 14-15	13	0.3%	170	4.3%	91	2.3%	2,279	57.9%	1,045	26.6%	98	2.5%	237	6.0%

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.

[^] 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	349	12.0%	1,041	35.7%	1,232	42.2%	294	10.1%
FY 12-13	302	9.6%	1,114	35.3%	1,366	43.3%	373	11.8%
FY 13-14	425	11.1%	1,293	33.6%	1,627	42.3%	500	13.0%
FY 14-15	421	10.7%	1,264	32.1%	1,696	43.1%	552	14.0%

Fiscal Year	Female Count	Female %	Male Count	Male %
FY 11-12	1,276	43.8%	1,640	56.2%
FY 12-13	1,374	43.5%	1,781	56.5%
FY 13-14	1,725	44.9%	2,120	55.1%
FY 14-15	1,781	45.3%	2,152	54.7%

Penetration Rates* Report: Children and Youth With At Least One SMHS Visit** Ventura County as of August 3, 2016

		FY 11-12			FY 12-13			FY 13-14			FY 14-15	
	Children and Youth with 1 or more SMHS Visits	Certified Eligible	Penetration Rate	Children and Youth with 1 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 1 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 1 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate
All	2,916	85,044	3.4%	3,155	91,166	3.5%		114,684	3.4%		121,900	3.2%
Children 0-5	349	35,673	1.0%	302	35,775	0.8%	425	38,060	1.1%	421	37,786	1.1%
Children 6-11	1,041	22,770	4.6%	1,114	26,186	4.3%	1,293	34,684	3.7%	1,264	36,772	3.4%
Children 12-17	1,232	17,723	7.0%	1,366	19,754	6.9%	1,627	28,286	5.8%	1,696	30,101	5.6%
Youth 18-20	294	8,878	3.3%	373	9,451	3.9%	500	13,654	3.7%	552	17,241	3.2%
Alaskan Native or American Indian	۸	143	۸	12	143	8.4%	14	173	8.1%	13	183	7.1%
Asian or Pacific Islander	28	6,361	0.4%	44	6,942	0.6%	117	10,954	1.1%	170	12,667	1.3%
Black	118	1,388	8.5%	120	1,414	8.5%	120	1,530	7.8%	91	1,625	5.6%
Hispanic	1,700	56,128	3.0%	1,831	60,115	3.0%	2,228	71,342	3.1%	2,279	73,391	3.1%
White	881	14,761	6.0%	919	15,891	5.8%	1,048	20,720	5.1%	1,045	22,301	4.7%
Other	۸	1,904	۸	41	2,124	1.9%	66	4,275	1.5%	98	5,438	1.8%
Unknown	137	4,359	3.1%	188	4,537	4.1%	252	5,690	4.4%	237	6,295	3.8%
Female	1,276	42,445	3.0%	1,374	45,465	3.0%	1,725	56,879	3.0%	1,781	60,452	2.9%
Male	1,640	42,599	3.8%	1,781	45,701	3.9%	2,120	57,805	3.7%	2,152	61,448	3.5%

^{*}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.

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.

Penetration Rates* Report: Children and Youth with Five or More SMHS Visits** Ventura County as of August 3, 2016

		FV 11 12		1	FV 12 12			EV 12 14			FV 1 4 1 F	1
		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	2,213	85,044	2.6%	2,513	91,166	2.8%	3,103	114,684	2.7%	3,096	121,900	2.5%
Children 0-5	252	35,673	0.7%	231	35,775	0.6%	335	38,060	0.9%	311	37,786	0.8%
Children 6-11	835	22,770	3.7%	911	26,186	3.5%	1,089	34,684	3.1%	1,056	36,772	2.9%
Children 12-17	941	17,723	5.3%	1,100	19,754	5.6%	1,321	28,286	4.7%	1,359	30,101	4.5%
Youth 18-20	185	8,878	2.1%	271	9,451	2.9%	358	13,654	2.6%	370	17,241	2.1%
Alaskan Native or American Indian	۸	143	۸	^	143	۸	11	173	6.4%	۸	183	^
Asian or Pacific Islander	19	6,361	0.3%	35	6,942	0.5%	99	10,954	0.9%	128	12,667	1.0%
Black	97	1,388	7.0%	99	1,414	7.0%	103	1,530	6.7%	80	1,625	4.9%
Hispanic	1,282	56,128	2.3%	1,445	60,115	2.4%	1,792	71,342	2.5%	1,794	73,391	2.4%
White	676	14,761	4.6%	729	15,891	4.6%	840	20,720	4.1%	829	22,301	3.7%
Other	۸	1,904	^	۸	2,124	۸	53	4,275	1.2%	۸	5,438	۸
Unknown	102	4,359	2.3%	161	4,537	3.5%	205	5,690	3.6%	189	6,295	3.0%
Female	968	42,445	2.3%	1,094	45,465	2.4%	1,395	56,879	2.5%	1,392	60,452	2.3%
Male	1,245	42,599	2.9%	1,419	45,701	3.1%	1,708	57,805	3.0%	1,704	61,448	2.8%

^{*}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.

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.

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

Fiscal Year	SDMC To Approve		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)	Treatment		Psychiatric Health Facility (Days)
FY 11-12	\$ 3,79	2.82	0	0	191	1,397	0	203	220	0	0	0	2	8	10	0	8	0
FY 12-13	\$ 4,59	0.03	0	0	197	1,551	0	198	140	0	0	0	3	9	6	23	92	0
FY 13-14	\$ 4,70	5.02	545	481	169	1,642	0	67	120	0	0	0	4	2	7	20	112	0
FY 14-15	\$ 4,94	7.89	809	430	162	1,624	1,429	85	180	0	0	0	3	6	7	19	91	0
MEAN	\$ 4,50	8.94	677	456	180	1,553	1,429	138	165	0	0	0	3	6	8	20	76	0

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.

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

Snapshot Report: Unique Count of Children and Youth Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year Ventura 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	Continuance	Service Continuance (<2 YR) Count	Service Continuance (< 2 YR) %	Exiting Count	Exiting %	Arriving & Exiting Count	Exiting %		Service Continuance (>= 2 YR) and Exiting %		Total %
FY 12-13	978	31.0%	198	6.3%	362	11.5%	537	17.0%	1,031	32.7%	51	1.6%	3,157	100%
FY 13-14	1,008	26.2%	406	10.6%	373	9.7%	669	17.4%	1,302	33.9%	84	2.2%	3,842	100%
FY 14-15	960	24.4%	397	10.1%	421	10.7%	880	22.4%	1,183	30.1%	90	2.3%	3,931	100%

Time to Step Down Report: Children and Youth Stepping Down in SMHS Services Post Inpatient Discharge* Ventura County as of August 3, 2016

Service FY	Count of Inpatient Discharges with Step Down within 7 Days of Discharge	Inpatient Discharges with	Count of Inpatient Discharges with Step Down Between 8 and 30 Days	Inpatient Discharges with	Step Down > 30 Days from	Inpatient Discharges with a	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	207	73.7%	34	12.1%	29	10.3%	11	3.9%	0	365	19.4	0
FY 12-13	312	71.1%	62	14.1%	39	8.9%	26	5.9%	0	365	17.2	2
FY 13-14	446	72.2%	80	12.9%	47	7.6%	45	7.3%	0	365	13.3	2
FY 14-15	424	66.6%	83	13.0%	53	8.3%	77	12.1%	0	365	16.8	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.