

COUNTY BEHAVIORAL HEALTH PLAN RATINGS MEASUREMENT YEAR 2023

County Behavioral Health Plans (BHP) include county Mental Health Plans (MHP) and Drug Medi-Cal Organized Delivery System (DMC-ODS) plans. Both plans focus on quality improvement (QI) initiatives to improve a total of 11 MHP and DMC-ODS behavioral health measures. MY23 rates may have been impacted by data reporting issues related to Behavioral Health Payment Reform.

To improve performance, DHCS requires county BHPs to collaborate with managed care plans through contracts and interagency agreements to establish QI programs and collect and submit performance measurement data required by DHCS.

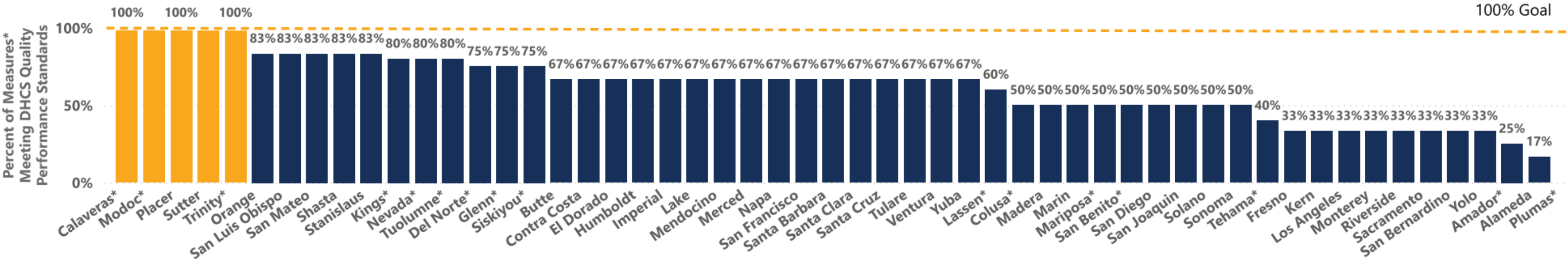
HOW DO MHP MEASURES LOOK IN CALIFORNIA?

The following graph highlights how county BHPs perform on specific MHP measures within California. The individual behavioral health measures identified below are specified by the National Committee for Quality Assurance (NCQA) Healthcare Effectiveness Data Information Set (HEDIS®). DHCS establishes quality performance standards defined by the NCQA Quality Compass® Medicaid HMO as the 50th percentile benchmark for each of these six behavioral measures. BHPs are contractually required to meet or exceed DHCS quality performance standards. DHCS has set a goal for all plans to meet the DHCS quality performance standards on all measures.

Click on each measure below to learn more

- » [AMM-Acute](#)
(Antidepressant Medication Management, Acute)
- » [AMM-Continuation](#)
(Antidepressant Medication Management, Chronic)
- » [FUH-30 Days](#)
(Follow-up After Hospitalization for Mental Illness)
- » [FUM-30 Days](#)
(Follow-up After Emergency Department (ED) Visit for Mental Illness)
- » [APP](#)
(Use of First Line Psychosocial Care for Children and Adolescents on Antipsychotics)
- » [SAA](#)
(Adherence to Antipsychotic Medications for Individuals with Schizophrenia)

MHPs Meeting the DHCS Quality Performance Standards for 6 Select MHP Measures* in Measurement Year 2023



Note: The graph illustrates the counties with the percentage of Mental Health Plans’ (MHP) behavioral measures (total of six) that met or exceeded the DHCS quality performance standards.* If any of the 6 measures are omitted due to very low numbers, the measure(s) are not included in the MHP county’s overall performance calculation. For Alpine, Inyo, and Mono counties, 5 or more MHP measures were omitted due to very low numbers, so these county performances are not included in the highlights below. Groups with denominators less than 30 are omitted because such small rates are unreliable and may be subject to reidentification. MY23 rates may have been impacted by data reporting issues related to Behavioral Health Payment Reform. These results have been calculated by DHCS and have not been validated by the External Quality Review Organization (EQRO). EQRO-validated rates will be published by DHCS in the annual EQRO Technical Reports by April 30, 2025.

Calaveras, Modoc, Placer,
Sutter, and Trinity

Highest performing counties in meeting DHCS quality performance standards for all MHP behavioral measures that did not require suppression.

42 of 57
MHP Counties

Were able to meet or exceed the DHCS quality performance standards on at least 50% of MHP measures.

35 of 57
MHP Counties

Were able to meet or exceed the DHCS quality performance standards on FUM-30 Days.

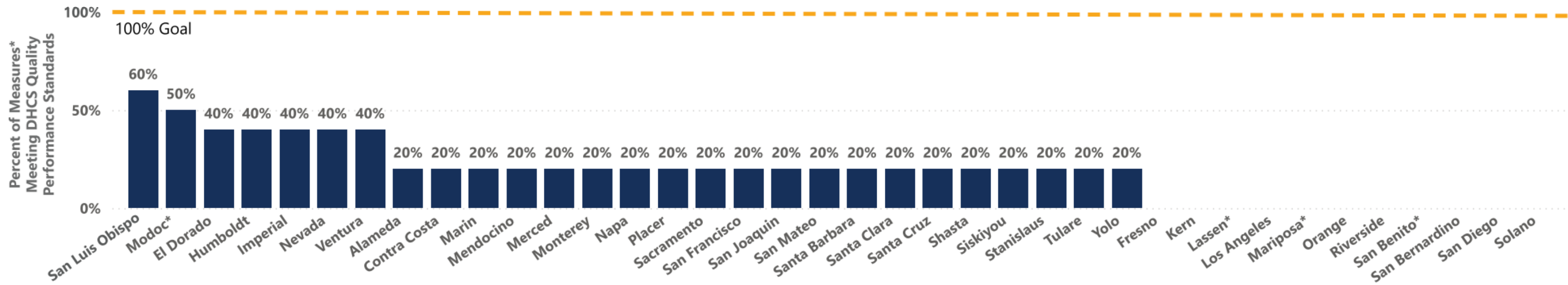
HOW DO DMC-ODS MEASURES LOOK IN CALIFORNIA?

The following graphs highlight how county DMC-ODS plans perform on DMC-ODS measures within California. The individual behavioral health measures identified below are specified by the NCQA HEDIS®. DHCS establishes quality performance standards defined by the NCQA Quality Compass® Medicaid HMO as the 50th percentile benchmark for four of these five behavioral measures. The one measure (OUD-Use of Pharmacotherapy for Opioid Use Disorder) is part of the Centers for Medicare & Medicaid Services (CMS) core set. For that measure, the DHCS quality performance standards will be designated as the CMS state performance median. According to CMS, the state median is calculated as the median of all states. BHPs are contractually required to meet or exceed DHCS quality performance standards. DHCS has set a goal for all plans to meet the DHCS quality performance standards on all measures.

Click on each measure below to learn more

- » [FUA-30 Days](#)
(Follow-up After ED Visit for Substance Use)
- » [OUD](#)
(Use of Pharmacotherapy for Opioid Use Disorder)
- » [IET Initiation](#)
(Initiation of Substance Use Disorder Treatment)
- » [POD](#)
(Pharmacotherapy of Opioid Use Disorder)
- » [IET Engagement](#)
(Engagement of Substance Use Disorder Treatment)

DMC-ODS Plans Meeting the DHCS Quality Performance Standard for 5 Select DMC-ODS Measures* in Measurement Year 2023



Note: The graph illustrates the counties with the percentage of DMC-ODS’ behavioral measures (total of five) that met the DHCS quality performance standards.* If any of the five measures are omitted due to very low numbers, the measure(s) are not included in the DMC-ODS county’s overall performance calculation. Groups with denominators less than 30 are omitted because such small rates are unreliable and may be subject to reidentification. MY23 rates may have been impacted by data reporting issues related to Behavioral Health Payment Reform. These results have been calculated by DHCS and have not been validated by the External Quality Review Organization (EQRO). EQRO-validated rates will be published by DHCS in the annual EQRO Technical Reports by April 30, 2025.

2 of 37
DMC-ODS Counties

Were able to meet or exceed the DHCS quality performance standards on at least 50% of DMC-ODS measures

25 of 37
DMC-ODS Counties

Were able to meet or exceed the DHCS quality performance standards for the OUD measure (adults who have at least 180 days on continuous pharmacotherapy for opiate use disorder).

8 of 37
DMC-ODS Counties

Were able to meet or exceed the DHCS quality performance standards for the FUA-30 days measure.