

Performance Outcomes System Initial Reports

Report run on February 12, 2019

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.asp>

Purpose and Overview

These population-based 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.*

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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.

Data Sources - Short-Doyle/Medi-Cal II (SD/MC II) claims with dates of service in FY 14/15 through FY 17/18.

- Medi-Cal Eligibility Data System (MEDS) data from the Management Information System/Decision Support System (MIS/DSS) FY 14/15 through FY17/18.

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/services/MH/Documents/POS_MeasuresCatalog_Sept2016.pdf

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.

***New Age Methodology** for Identifying Children under 21 (POS reports posted after to 7/1/17): Beneficiaries that were under the age of 21 for the entire fiscal year (their age was less than 21 as of June 30th of the reported fiscal year).

The **penetration rates reported here were calculated using a different methodology than that used by the External Quality Review Organization (EQRO). For the POS, the penetration rate is calculated by taking the total number of youth who received one or more SMHS' 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. Penetration rates provide a measure of initial contact with the specialty mental health system.

*The **engagement rates** are calculated similarly to penetration rates but are intended to measure ongoing engagement with the specialty mental health system. The engagement rate is calculated by taking the total number of youth who received five or more SMHS' in a FY and dividing that by the total number of Medi-Cal eligible youth for that FY.

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*The **snapshot** report provides a point-in-time look at children and youth's movement through the SMHS system. The report uses six general categories to classify if a youth is entering, exiting, continuing services, or a combination of these categories (e.g., arriving and exiting). 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 the beneficiary's county of Medi-Cal responsibility during the eligibility month when the inpatient service occurred.

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

**Demographics Report: Unique Count of Children and Youth Receiving SMHS by Fiscal Year
Large Sized Counties as of February 12, 2019**

SFY	Unique Count Receiving SMHS*	Year-Over-Year Percentage Change	Unique Count of Medi-Cal Eligibles	Year-Over-Year Percentage Change
FY 14-15	119,187		3,093,172	
FY 15-16	119,175	0.0%	3,209,838	3.8%
FY 16-17	117,717	-1.2%	3,226,902	0.5%
FY 17-18	119,681	1.7%	3,145,602	-2.5%
Compound Annual Growth Rate SFY**		0.1%		0.6%

**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 Sized Counties as of February 12, 2019**

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 14-15	514	0.4%	4,586	3.8%	15,619	13.1%	57,621	48.3%	24,836	20.8%	6,908	5.8%	9,103	7.6%
FY 15-16	542	0.5%	4,683	3.9%	15,187	12.7%	58,667	49.2%	24,249	20.3%	6,881	5.8%	8,966	7.5%
FY 16-17	527	0.4%	4,453	3.8%	14,271	12.1%	60,496	51.4%	22,874	19.4%	6,642	5.6%	8,454	7.2%
FY 17-18	468	0.4%	4,500	3.8%	14,098	11.8%	63,323	52.9%	22,717	19.0%	6,605	5.5%	7,970	6.7%

**This report uses the Medi-Cal Eligibility Data System for racial data, while CDSS uses the Child Welfare Services/Case Management System.*

**Demographics Report: Unique Count of Children and Youth Receiving SMHS by Fiscal Year
Large Sized Counties as of February 12, 2019**

Fiscal Year	Children 0-2 Count	Children 0-2 %	Children 3-5 Count	Children 3-5 %	Children 6-11 Count	Children 6-11 %	Children 12-17 Count	Children 12-17 %	Youth 18-20 Count	Youth 18-20 %
FY 14-15	2,915	2.4%	9,854	8.3%	39,942	33.5%	51,341	43.1%	15,135	12.7%
FY 15-16	3,121	2.6%	9,708	8.1%	40,031	33.6%	50,810	42.6%	15,505	13.0%
FY 16-17	2,939	2.5%	9,276	7.9%	38,706	32.9%	51,378	43.6%	15,418	13.1%
FY 17-18	3,175	2.7%	9,088	7.6%	38,281	32.0%	53,725	44.9%	15,412	12.9%

**Demographics Report: Unique Count of Children and Youth Receiving SMHS by Fiscal Year
Large Sized Counties as of February 12, 2019**

Fiscal Year	Female Count	Female %	Male Count	Male %
FY 14-15	52,967	44.4%	66,220	55.6%
FY 15-16	53,671	45.0%	65,504	55.0%
FY 16-17	53,706	45.6%	64,011	54.4%
FY 17-18	55,171	46.1%	64,510	53.9%

**Penetration Rates* Report: Children and Youth with At Least One
SMHS Visit** Large Sized Counties as of February 12, 2019**

	FY 14-15			FY 15-16			FY 16-17			FY 17-18		
	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	Children and Youth with 1 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate
All	119,187	3,093,172	3.9%	119,175	3,209,838	3.7%	117,717	3,226,902	3.6%	119,681	3,145,602	3.8%
Children 0-2	2,915	477,241	0.6%	3,121	476,723	0.7%	2,939	465,225	0.6%	3,175	443,461	0.7%
Children 3-5	9,854	470,042	2.1%	9,708	476,704	2.0%	9,276	475,799	1.9%	9,088	464,894	2.0%
Children 6-11	39,942	945,447	4.2%	40,031	975,929	4.1%	38,706	979,366	4.0%	38,281	947,638	4.0%
Children 12-17	51,341	823,169	6.2%	50,810	880,631	5.8%	51,378	898,498	5.7%	53,725	888,792	6.0%
Youth 18-20	15,135	377,273	4.0%	15,505	399,851	3.9%	15,418	408,014	3.8%	15,412	400,817	3.8%
Alaskan Native or Americ. Indian	514	8,248	6.2%	542	8,308	6.5%	527	8,136	6.5%	468	7,750	6.0%
Asian or Pacific Islander	4,586	267,003	1.7%	4,683	271,086	1.7%	4,453	266,383	1.7%	4,500	248,674	1.8%
Black	15,619	238,746	6.5%	15,187	238,845	6.4%	14,271	235,718	6.1%	14,098	228,450	6.2%
Hispanic	57,621	1,709,131	3.4%	58,667	1,772,523	3.3%	60,496	1,784,052	3.4%	63,323	1,741,865	3.6%
White	24,836	441,492	5.6%	24,249	444,798	5.5%	22,874	433,833	5.3%	22,717	408,872	5.6%
Other	6,908	207,865	3.3%	6,881	223,761	3.1%	6,642	240,408	2.8%	6,605	250,724	2.6%
Unknown	9,103	220,687	4.1%	8,966	250,517	3.6%	8,454	258,372	3.3%	7,970	259,267	3.1%
Female	52,967	1,519,166	3.5%	53,671	1,575,045	3.4%	53,706	1,582,071	3.4%	55,171	1,542,002	3.6%
Male	66,220	1,574,006	4.2%	65,504	1,634,793	4.0%	64,011	1,644,831	3.9%	64,510	1,603,600	4.0%

*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.

**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.

Engagement Rates* Report: Children and Youth with Five or More SMHS Visits
Large Sized Counties as of February 12, 2019**

	FY 14-15			FY 15-16			FY 16-17			FY 17-18		
	Children and Youth with 5 or more SMHS Visits	Certified Eligible Children and Youth	Engagement Rate	Children and Youth with 5 or more SMHS Visits	Certified Eligible Children and Youth	Engagement Rate	Children and Youth with 5 or more SMHS Visits	Certified Eligible Children and Youth	Engagement Rate	Children and Youth with 5 or more SMHS Visits	Certified Eligible Children and Youth	Engagement Rate
All	86,009	3,093,172	2.8%	85,838	3,209,838	2.7%	85,733	3,226,902	2.7%	86,444	3,145,602	2.7%
Children 0-2	1,326	477,241	0.3%	1,387	476,723	0.3%	1,448	465,225	0.3%	1,313	443,461	0.3%
Children 3-5	6,538	470,042	1.4%	6,379	476,704	1.3%	6,261	475,799	1.3%	6,107	464,894	1.3%
Children 6-11	30,168	945,447	3.2%	30,358	975,929	3.1%	29,657	979,366	3.0%	29,013	947,638	3.1%
Children 12-17	38,230	823,169	4.6%	37,794	880,631	4.3%	38,507	898,498	4.3%	40,030	888,792	4.5%
Youth 18-20	9,747	377,273	2.6%	9,920	399,851	2.5%	9,860	408,014	2.4%	9,981	400,817	2.5%
Alaskan Native or Americ. Ind	359	8,248	4.4%	387	8,308	4.7%	381	8,136	4.7%	332	7,750	4.3%
Asian or Pacific Islander	3,390	267,003	1.3%	3,386	271,086	1.2%	3,286	266,383	1.2%	3,280	248,674	1.3%
Black	11,594	238,746	4.9%	11,239	238,845	4.7%	10,650	235,718	4.5%	10,529	228,450	4.6%
Hispanic	40,752	1,709,131	2.4%	41,687	1,772,523	2.4%	43,676	1,784,052	2.4%	45,340	1,741,865	2.6%
White	18,011	441,492	4.1%	17,474	444,798	3.9%	16,610	433,833	3.8%	16,468	408,872	4.0%
Other	5,150	207,865	2.5%	5,030	223,761	2.2%	4,873	240,408	2.0%	4,794	250,724	1.9%
Unknown	6,753	220,687	3.1%	6,635	250,517	2.6%	6,257	258,372	2.4%	5,701	259,267	2.2%
Female	37,830	1,519,166	2.5%	38,350	1,575,045	2.4%	38,634	1,582,071	2.4%	39,591	1,542,002	2.6%
Male	48,179	1,574,006	3.1%	47,488	1,634,793	2.9%	47,099	1,644,831	2.9%	46,853	1,603,600	2.9%

*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.

**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 Sized Counties as of February 12, 2019

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)	Crisis Resident Treatment Services (Days)
FY 14-15	\$ 746,039,881	6,376,570	4,629,690	19,170,643	172,248,282	20,266,821	9,945,071	1,708,233	102,649	85,358	512,406	4,901	1,057	44,077	4,342
FY 15-16	\$ 742,478,242	7,050,771	5,804,082	18,749,210	169,758,901	19,666,215	9,400,083	1,682,289	132,079	70,228	433,955	3,730	755	47,253	4,194
FY 16-17	\$ 974,756,213	8,390,743	8,383,398	17,987,736	167,734,541	20,094,922	9,583,938	1,859,509	134,286	66,652	353,864	5,203	723	48,590	3,531
FY 17-18	\$ 972,129,106	9,498,011	10,720,031	17,909,036	169,145,399	20,741,922	9,835,665	1,862,874	133,175	63,402	210,256	6,172	860	49,995	4,634
MEAN	\$ 858,850,860	7,829,024	7,384,300	18,454,156	169,721,781	20,192,470	9,691,189	1,778,226	125,547	71,410	377,620	5,002	849	47,479	4,175

Fiscal Year	Adult Residential Treatment Services (Days)	Psychiatric Health Facility (Days)
FY 14-15	3,929	7,266
FY 15-16	3,019	4,521
FY 16-17	2,581	0
FY 17-18	3,061	0
MEAN	3,148	5,894

**Snapshot Report: Unique Count of Children and Youth Receiving SMHS
Arriving, Exiting, and with Service Continuance by Fiscal Year
Large Sized Counties as of February 12, 2019**

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
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	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) %	Service Continuance (<2 YR) Count	Service Continuance (< 2 YR) %	Exiting Count	Exiting %	Arriving & Exiting Count	Arriving & Exiting %	Service Continuance (>= 2 YR) & Exiting Count	Service Continuance (>= 2 YR) and Exiting %	Total Count	Total %
FY 14-15	28,117	23.6%	9,337	7.8%	10,207	8.6%	24,042	20.2%	43,105	36.2%	4,379	3.7%	119,187	100%
FY 15-16	28,045	23.5%	9,315	7.8%	9,795	8.2%	23,907	20.1%	43,329	36.4%	4,784	3.5%	119,175	100%
FY 16-17	28,300	24.0%	9,279	7.9%	9,845	8.4%	23,387	19.9%	42,223	35.9%	4,683	4.0%	117,717	100%
FY 17-18	27,082	22.6%	8,505	7.1%	8,990	7.5%	24,374	20.4%	45,020	37.6%	5,710	4.8%	119,681	100%

**Time to Step Down Report: Children and Youth Stepping Down in SMHS Services Post Inpatient Discharge* Large Sized
Counties as of February 12, 2019**

Service FY	Count of Inpatient Discharges with Step Down within 7 Days of Discharge	Percentage of Inpatient Discharges with Step Down within 7 Days of Discharge	Count of Inpatient Discharges with Step Down Between 8 and 30 Days	Percentage of Inpatient Discharges with Step Down Between 8 and 30 Days	Count of Inpatient Discharges with a Step Down > 30 Days from Discharge	Percentage of Inpatient Discharges with a Step Down > 30 Days from Discharge	Count of Inpatient Discharges with 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 14-15	5,141	62.3%	1,185	14.4%	1,120	13.6%	802	9.7%	0	364	20.0	2
FY 15-16	5,561	66.9%	998	12.0%	854	10.3%	896	10.8%	0	364	17.2	1
FY 16-17	6,116	68.6%	937	10.5%	924	10.4%	940	10.5%	0	365	15.9	1
FY 17-18	6,241	68.8%	995	11.0%	667	7.4%	1,165	12.8%	0	364	12.9	1

* **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