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

This statewide report provides 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.

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 ofyouth 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 penetrationrates 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.

*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
Statewide 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	259,286		6,059,669	
FY 15-16	258,747	-0.2%	6,259,742	3.3%
FY 16-17	260,611	0.7%	6,307,467	0.8%
FY 17-18	267,088	2.5%	6,122,476	-2.9%
Compound Annual Growth Rate SFY**		**1.0%**		**0.3%**

**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

Statewide 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	1,395	0.5%	7,061	2.7%	31,138	12.0%	139,471	53.8%	52,214	20.1%	9,341	3.6%	18,666	7.2%
FY 15-16	1,377	0.5%	7,268	2.8%	30,160	11.7%	142,253	55.0%	49,891	19.3%	9,307	3.6%	18,491	7.1%
FY 16-17	1,351	0.5%	7,201	2.8%	28,732	11.0%	148,516	57.0%	47,502	18.2%	9,083	3.5%	18,226	7.0%
FY 17-18	1,230	0.5%	7,456	2.8%	28,412	10.6%	155,971	58.4%	47,201	17.7%	9,013	3.4%	17,805	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

Statewide 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	7,736	3.0%	22,115	8.5%	89,038	34.3%	109,226	42.1%	31,171	12.0%
FY 15-16	7,838	3.0%	21,673	8.4%	88,952	34.4%	108,468	41.9%	31,816	12.3%
FY 16-17	7,602	2.9%	20,673	7.9%	88,480	34.0%	111,816	42.9%	32,040	12.3%
FY 17-18	7,763	2.9%	20,425	7.6%	88,057	33.0%	118,181	44.2%	32,662	12.2%

Demographics Report: Unique Count of Children and Youth Receiving SMHS by Fiscal Year

Statewide Sized Counties as of February 12, 2019

Fiscal Year	Female Count	Female %	Male Count	Male %
FY 14-15	115,718	44.6%	143,568	55.4%
FY 15-16	116,239	44.9%	142,508	55.1%
FY 16-17	118,608	45.5%	142,003	54.5%
FY 17-18	123,253	46.1%	143,835	53.9%

Penetration Rates* Report: Children and Youth with At Least One SMHS Visit**
Statewide 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	**259,286**	**6,059,669**	**4.3%**	**258,747**	**6,259,742**	**4.1%**	**260,611**	**6,307,467**	**4.1%**	**267,088**	**6,122,476**	**4.4%**
Children 0-2	7,736	932,306	0.8%	7,838	929,669	0.8%	7,602	912,137	0.8%	7,763	865,511	0.9%
Children 3-5	22,115	918,847	2.4%	21,673	926,313	2.3%	20,673	925,569	2.2%	20,425	900,677	2.3%
Children 6-11	89,038	1,841,703	4.8%	88,952	1,893,226	4.7%	88,480	1,904,001	4.6%	88,057	1,837,315	4.8%
Children 12-17	109,226	1,617,314	6.8%	108,468	1,723,356	6.3%	111,816	1,761,170	6.3%	118,181	1,735,264	6.8%
Youth 18-20	31,171	749,499	4.2%	31,816	787,178	4.0%	32,040	804,590	4.0%	32,662	783,709	4.2%
Alaskan Native or American Indian	1,395	21,578	6.5%	1,377	21,569	6.4%	1,351	21,062	6.4%	1,230	20,158	6.1%
Asian or Pacific Islander	7,061	429,193	1.6%	7,268	436,085	1.7%	7,201	433,074	1.7%	7,456	404,868	1.8%
Black	31,138	437,610	7.1%	30,160	435,569	6.9%	28,732	431,114	6.7%	28,412	415,774	6.8%
Hispanic	139,471	3,527,084	4.0%	142,253	3,633,686	3.9%	148,516	3,658,834	4.1%	155,971	3,554,652	4.4%
White	52,214	914,734	5.7%	49,891	921,485	5.4%	47,502	904,868	5.2%	47,201	856,903	5.5%
Other	9,341	280,140	3.3%	9,307	297,632	3.1%	9,083	318,241	2.9%	9,013	329,099	2.7%
Unknown	18,666	449,330	4.2%	18,491	513,716	3.6%	18,226	540,274	3.4%	17,805	541,022	3.3%
Female	115,718	2,972,583	3.9%	116,239	3,068,874	3.8%	118,608	3,092,056	3.8%	123,253	3,000,612	4.1%
Male	143,568	3,087,086	4.7%	142,508	3,190,868	4.5%	142,003	3,215,411	4.4%	143,835	3,121,864	4.6%

**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**

Statewide 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	**191,241**	**6,059,669**	**3.2%**	**190,737**	**6,259,742**	**3.0%**	**193,246**	**6,307,467**	**3.1%**	**196,736**	**6,122,476**	**3.2%**
Children 0-2	3,900	932,306	0.4%	3,809	929,669	0.4%	3,907	912,137	0.4%	3,818	865,511	0.4%
Children 3-5	14,933	918,847	1.6%	14,641	926,313	1.6%	14,264	925,569	1.5%	14,102	900,677	1.6%
Children 6-11	68,297	1,841,703	3.7%	68,709	1,893,226	3.6%	68,701	1,904,001	3.6%	67,933	1,837,315	3.7%
Children 12-17	83,505	1,617,314	5.2%	82,761	1,723,356	4.8%	85,437	1,761,170	4.9%	89,490	1,735,264	5.2%
Youth 18-20	20,606	749,499	2.7%	20,817	787,178	2.6%	20,937	804,590	2.6%	21,393	783,709	2.7%
Alaskan Native or American In	970	21,578	4.5%	984	21,569	4.6%	946	21,062	4.5%	861	20,158	4.3%
Asian or Pacific Islander	5,243	429,193	1.2%	5,249	436,085	1.2%	5,327	433,074	1.2%	5,447	404,868	1.3%
Black	23,283	437,610	5.3%	22,728	435,569	5.2%	21,731	431,114	5.0%	21,371	415,774	5.1%
Hispanic	102,414	3,527,084	2.9%	104,625	3,633,686	2.9%	110,200	3,658,834	3.0%	115,164	3,554,652	3.2%
White	38,129	914,734	4.2%	36,313	921,485	3.9%	34,636	904,868	3.8%	34,251	856,903	4.0%
Other	6,968	280,140	2.5%	6,857	297,632	2.3%	6,649	318,241	2.1%	6,508	329,099	2.0%
Unknown	14,234	449,330	3.2%	13,981	513,716	2.7%	13,757	540,274	2.5%	13,134	541,022	2.4%
Female	84,362	2,972,583	2.8%	84,856	3,068,874	2.8%	86,927	3,092,056	2.8%	90,006	3,000,612	3.0%
Male	106,879	3,087,086	3.5%	105,881	3,190,868	3.3%	106,319	3,215,411	3.3%	106,730	3,121,864	3.4%

**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
Statewide 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 Residential Treatment Services (Days)
FY 14-15	$ 1,674,156,714	18,853,973	16,769,536	35,497,528	416,552,370	39,842,314	24,305,296	5,873,271	169,162	355,318	727,415	14,693	1,988	96,669	5,897
FY 15-16	$ 1,684,164,754	20,931,484	19,159,875	33,384,730	412,170,885	37,478,367	23,330,052	5,797,010	198,426	313,624	597,600	12,062	1,696	97,405	5,834
FY 16-17	$ 1,976,060,897	24,153,771	23,307,684	32,207,440	419,597,407	35,652,059	23,447,172	6,493,575	203,076	286,922	464,698	12,878	1,257	106,423	5,056
FY 17-18	$ 2,040,774,439	27,472,865	27,756,459	31,701,226	429,391,787	36,737,003	23,632,361	7,246,743	212,258	264,654	311,236	13,708	1,166	109,634	6,115
MEAN	**$ 1,843,789,201**	**22,853,023**	**21,748,389**	**33,197,731**	**419,428,112**	**37,427,436**	**23,678,720**	**6,352,650**	**195,731**	**305,130**	**525,237**	**13,335**	**1,527**	**102,533**	**5,726**

Fiscal Year	Adult Residential Treatment Services (Days)	Psychiatric Health Facility (Days)
FY 14-15	5,727	10,458
FY 15-16	5,954	13,093
FY 16-17	5,262	12,554
FY 17-18	4,939	11,744
MEAN	**5,471**	**11,962**

Snapshot Report: Unique Count of Children and Youth Receiving SMHS
Arriving, Exiting, and with Service Continuance by Fiscal Year
Statewide 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	64,020	24.7%	20,512	7.9%	22,329	8.6%	53,809	20.8%	88,284	34.0%	10,332	4.0%	259,286	100%
FY 15-16	63,873	24.7%	20,470	7.9%	21,776	8.4%	53,830	20.8%	88,012	34.0%	10,786	4.2%	258,747	100%
FY 16-17	66,655	25.6%	20,731	8.0%	22,387	8.6%	52,377	20.1%	87,837	33.7%	10,624	4.1%	260,611	100%
FY 17-18	64,602	24.2%	19,829	7.4%	21,535	8.1%	56,008	21.0%	92,713	34.7%	12,401	4.6%	267,088	100%

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

Statewide 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	11,728	62.6%	2,881	15.4%	2,402	12.8%	1,713	9.1%	0	365	18.9	3
FY 15-16	11,455	63.6%	2,503	13.9%	2,105	11.7%	1,945	10.8%	0	365	18.8	2
FY 16-17	12,713	63.3%	2,794	13.9%	2,436	12.1%	2,128	10.6%	0	365	18.5	2
FY 17-18	12,762	63.3%	2,764	13.7%	1,874	9.3%	2,751	13.7%	0	364	15.5	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*