Performance Outcomes Adult Specialty Mental Health Services Report
Report Date February 12, 2019

Background

This report measures the effectiveness of adult specialty mental health services. It models reports developed to measure Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) mental health services as mandated by Welfare and Institutions Code Section 14707.5. The intent of these reports is to improve outcomes at the individual, program, and system levels and inform fiscal decision-making related to the purchase of services. Since 2012 DHCS has worked with several groups of stakeholders to create a structure for reporting, to develop a Performance Measurement Paradigm, and to design 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

Overview

Three reports will be provided: statewide aggregate data; population-based county groups; and county-specific data. These aggregate reports provide adult information on the initial indicators that were developed for the Performance Outcomes System. DHCS plans to move to annual reporting of these data for the Performance Outcomes System. The first series of charts and tables focus on the demographics of adults 21* and older 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. Utilization of services reports are shown in terms of dollars, as well as by service in time increments. Two types of penetration information are provided; both penetration rate tables are also broken out by demographic characteristics. The snapshot table provides a point-in-time view of adults 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 stepdown services following inpatient discharge. Where possible, the reports provide trend information by displaying information for Fiscal Years (FY) 14/15, 15/16, 16/17, and 17/18.

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/MedCCC/Library/POSMeasuresCatalog_Sept15Reporting_Final_1.11.15.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; 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, these data are represented as follows: 1) Data that are missing is indicated as "-" 2) Data that have been suppressed due to privacy concerns is indicated as "^".

Report Highlights

*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 makes comparison between the POS penetration rates and the EQRO penetration rates not appropriate nor 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 adults who received a number of SMHS (1 or 5 for POS) in a FY and dividing that by the total number of Medi-Cal eligible adults 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). 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 fiscal responsibility for the patient 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.

Demographics Report: Unique Count of Adults 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	341,796		7,188,745	
FY 15-16	346,667	1.4%	7,881,839	9.6%
FY 16-17	342,896	-1.1%	8,221,835	4.3%
FY 17-18	337,785	-1.5%	8,064,123	-1.9%
Compound Annual Growth Rate SFY**		**-0.4%**		**3.9%**

**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 Adults Receiving SMHS by Fiscal Year

Statewide 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	2,457	0.7%	23,971	7.0%	53,092	15.5%	76,987	22.5%	121,854	35.7%	17,090	5.0%	46,345	13.6%
FY 15-16	2,472	0.7%	23,128	6.7%	53,028	15.3%	82,645	23.8%	121,164	35.0%	18,049	5.2%	46,181	13.3%
FY 16-17	2,406	0.7%	22,178	6.5%	51,632	15.1%	85,706	25.0%	118,061	34.4%	18,361	5.4%	44,552	13.0%
FY 17-18	2,392	0.7%	21,644	6.4%	50,631	15.0%	88,142	26.1%	114,312	33.8%	18,726	5.5%	41,938	12.4%

**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 Adults Receiving SMHS by Fiscal Year

Statewide as of February 12, 2019

Fiscal Year	Adults 21-44 Count	Adults 21-44 %	Adults 45-64 Count	Adults 45-64 %	Adults 65+ Count	Adults 65+ %
FY 14-15	165,869	48.5%	155,124	45.4%	20,803	6.1%
FY 15-16	172,742	49.8%	152,186	43.9%	21,739	6.3%
FY 16-17	173,828	50.7%	146,189	42.6%	22,879	6.7%
FY 17-18	175,068	51.8%	139,123	41.2%	23,594	7.0%

Demographics Report: Unique Count of Adults Receiving SMHS by Fiscal Year

Statewide as of February 12, 2019

Fiscal Year	Female Count	Female %	Male Count	Male %
FY 14-15	181,849	53.2%	159,947	46.8%
FY 15-16	182,255	52.6%	164,412	47.4%
FY 16-17	178,227	52.0%	164,669	48.0%
FY 17-18	174,454	51.6%	163,331	48.4%

Penetration Rates* Report: Adults With At Least One SMHS Visit**
Statewide as of February 12, 2019

	FY 14-15			FY 15-16			FY 16-17			FY 17-18		
	Adults and Older Adults with 1 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate	Adults and Older Adults with 1 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetratio n Rate	Adults and Older Adults with 1 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate	Adults and Older Adults with 1 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate
All	**341,796**	**7,188,745**	**4.8%**	**346,667**	**7,881,839**	**4.4%**	**342,896**	**8,221,835**	**4.2%**	**337,785**	**8,064,123**	**4.2%**
Adults 21-44	165,869	3,632,116	4.6%	172,742	4,085,027	4.2%	173,828	4,305,945	4.0%	175,068	4,220,683	4.1%
Adults 45-64	155,124	2,382,757	6.5%	152,186	2,547,090	6.0%	146,189	2,602,241	5.6%	139,123	2,504,499	5.6%
Adults 65+	20,803	1,173,872	1.8%	21,739	1,249,722	1.7%	22,879	1,313,649	1.7%	23,594	1,338,941	1.8%
Alaskan Native or Americ. Ind.	2,457	37,591	6.5%	2,472	40,309	6.1%	2,406	41,255	5.8%	2,392	40,330	5.9%
Asian or Pacific Islander	23,971	968,693	2.5%	23,128	1,059,729	2.2%	22,178	1,089,495	2.0%	21,644	1,034,213	2.1%
Black	53,092	662,219	8.0%	53,028	696,413	7.6%	51,632	716,093	7.2%	50,631	707,648	7.2%
Hispanic	76,987	2,533,658	3.0%	82,645	2,828,591	2.9%	85,706	3,023,981	2.8%	88,142	3,022,958	2.9%
White	121,854	1,915,898	6.4%	121,164	2,060,169	5.9%	118,061	2,099,035	5.6%	114,312	2,025,747	5.6%
Other	17,090	428,760	4.0%	18,049	494,361	3.7%	18,361	535,592	3.4%	18,726	546,350	3.4%
Unknown	46,345	641,926	7.2%	46,181	702,267	6.6%	44,552	716,384	6.2%	41,938	686,877	6.1%
Female	181,849	4,019,074	4.5%	182,255	4,373,941	4.2%	178,227	4,550,456	3.9%	174,454	4,473,167	3.9%
Male	159,947	3,169,671	5.0%	164,412	3,507,898	4.7%	164,669	3,671,379	4.5%	163,331	3,590,956	4.5%

**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.*
***Adults and Older Adults 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: Adults with Five or More SMHS Visits**

Statewide as of February 12, 2019

	FY 14-15			FY 15-16			FY 16-17			FY 17-18		
	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate
All	**212,020**	**7,188,745**	**2.9%**	**214,040**	**7,881,839**	**2.7%**	**210,895**	**8,221,835**	**2.6%**	**205,012**	**8,064,123**	**2.5%**
Adults 21-44	96,892	3,632,116	2.7%	100,025	4,085,027	2.4%	100,596	4,305,945	2.3%	100,258	4,220,683	2.4%
Adults 45-64	101,866	2,382,757	4.3%	100,072	2,547,090	3.9%	95,586	2,602,241	3.7%	89,745	2,504,499	3.6%
Adults 65+	13,262	1,173,872	1.1%	13,943	1,249,722	1.1%	14,713	1,313,649	1.1%	15,009	1,338,941	1.1%
Alaskan Native or Americ Ind	1,450	37,591	3.9%	1,450	40,309	3.6%	1,389	41,255	3.4%	1,353	40,330	3.4%
Asian or Pacific Islander	16,020	968,693	1.7%	15,431	1,059,729	1.5%	14,976	1,089,495	1.4%	14,385	1,034,213	1.4%
Black	31,810	662,219	4.8%	31,808	696,413	4.6%	30,869	716,093	4.3%	29,951	707,648	4.2%
Hispanic	46,641	2,533,658	1.8%	49,648	2,828,591	1.8%	51,464	3,023,981	1.7%	52,068	3,022,958	1.7%
White	75,012	1,915,898	3.9%	74,246	2,060,169	3.6%	72,021	2,099,035	3.4%	68,911	2,025,747	3.4%
Other	10,175	428,760	2.4%	10,633	494,361	2.2%	10,692	535,592	2.0%	10,720	546,350	2.0%
Unknown	30,912	641,926	4.8%	30,824	702,267	4.4%	29,484	716,384	4.1%	27,624	686,877	4.0%
Female	113,357	4,019,074	2.8%	113,190	4,373,941	2.6%	110,193	4,550,456	2.4%	106,851	4,473,167	2.4%
Male	98,663	3,169,671	3.1%	100,850	3,507,898	2.9%	100,702	3,671,379	2.7%	98,161	3,590,956	2.7%

**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.*

***Adults and Older Adultsthat 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 Ye*

Utilization Report*: Approved Specialty Mental Health Services for Adults
Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Fiscal Year*
Statewide as of February 12, 2019

Fiscal Year	SDMC Total Approved	Case Manage-nent/ Brokerage (Minutes)	Mental Health Services (Minutes)	Medication Support Services (Minutes)	Crisis Intervention (Minutes)	Crisis Stabilization (Hours)	Full Day Treatment Intensive (Hours)	Full Day Rehab on (Hours)	Hospital Inpatient (Days)	Hospital Inpatient Admin (Days)	Fee for Service Inpatient (Days)	Crisis Residential Treatment Services (Days)	Adult Residential Treatment Services (Days)	Psych. Health Facility (Days)
FY 14-15	$ 1,676,933,315	54,781,169	197,146,013	62,948,570	10,844,081	1,134,611	246	306,454	71,048	34,059	277,799	128,341	139,694	66,645
FY 15-16	$ 1,742,508,364	54,812,896	204,228,165	64,199,175	11,392,223	1,247,549	0	151,336	60,829	34,888	305,419	131,341	137,576	64,921
FY 16-17	$ 1,936,598,317	54,332,751	203,664,845	64,621,818	13,182,888	1,319,617	11,928	128,854	56,001	34,371	331,476	143,070	149,987	67,897
FY 17-18	$ 2,056,045,960	56,560,523	204,754,161	64,636,121	12,938,602	1,291,076	15,408	122,298	50,951	30,220	338,122	150,899	150,782	70,502
MEAN	**$ 1,853,021,489**	**55,121,835**	**202,448,296**	**64,101,421**	**12,089,449**	**1,248,213**	**9,194**	**177,236**	**59,707**	**33,385**	**313,204**	**138,413**	**144,510**	**67,492**

**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.

Snapshot Report: Unique Count of Adults 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	Adults that did not receive any SMHS within 3 months of their first date of service in the Fiscal Year.
Service Continuance	Adults 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	Adults 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 Adults met both the criteria for Arrivals and Exiting above for the fiscal year.
Service Continuance &	A distinct category in which Adults 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	61,532	18.0%	43,986	12.9%	44,284	13.0%	53,326	15.6%	131,089	38.4%	7,579	2.2%	341,796	100%
FY 15-16	60,957	17.6%	48,548	14.0%	39,170	11.3%	54,067	15.6%	135,908	39.2%	8,017	2.3%	346,667	100%
FY 16-17	59,333	17.3%	49,188	14.3%	37,828	11.0%	52,437	15.3%	134,888	39.3%	9,222	2.7%	342,896	100%
FY 17-18	51,390	15.2%	44,397	13.1%	32,544	9.6%	55,397	16.4%	140,046	41.5%	14,011	4.1%	337,785	100%

Time to Step Down Report: Adults 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	23,435	47.0%	7,412	14.9%	12,676	25.4%	6,292	12.6%	0	365	39.4	8
FY 15-16	26,948	49.5%	7,151	13.1%	12,105	22.2%	8,269	15.2%	0	365	40.2	7
FY 16-17	28,661	50.3%	7,854	13.8%	12,285	21.6%	8,169	14.3%	0	365	37.6	6
FY 17-18	31,061	52.0%	7,315	12.3%	8,927	15.0%	12,387	20.8%	0	365	30.2	6

**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.*