### Performance Outcomes System with an Open Child Welfare Case Report Report run on June 6, 2018

#### 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 groupings, and county-specific reports where possible. 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**

This report provides updated information on the initial indicators that were developed for the Performance Outcomes System. 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 Foster Care case children and youth under 21 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. Penetration and engagement rate data 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. For all of the measures and indicators included in this report, the denominator is the "Unique Count of Children and Youth receiving SMHS" shown on page 3 of the report and is broken out by state FY.

Utilization of services reports are shown in terms of dollars, as well as by service in time increments. 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.

### Performance Outcomes System with an Open Child Welfare Case Report Report run on June 6, 2018

#### **Definitions**

**Population**: Foster Care or Open Child Welfare 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 13/14 through FY 16/17.
- •Medi-Cal Eligibility Data System (MEDS) data from the Management Information System/Decision Support System (MIS/DSS) FY 13/14 through FY16/17.
- •Child Welfare Services/Case Management System (CWS/CMS) data for children in FY 13/14 through FY 16/17.

#### **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, 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**

- \*Population-based and county-specific report findings may be interpreted alongside the POS statewide report findings.
- \*New Age Methodology for Identifying Children under 21 (POS reports posted after 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.

### Performance Outcomes System with an Open Child Welfare Case Report Report run on June 6, 2018

\*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.

\*T he **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/services/MH/Documents/POS\_MeasuresCatalog\_Sept2016.pdf

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 re port 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 beneficiary's county of Medi-Cal responsibility during the eligibility month when the inpatient service occurred.

- \*Data Source Methodology: Demographic & Penetration and Snapshot based on MEDS data; Utilization based on Claims Submission data; Time to step-down based on Inpatient Hospital data.
- \*Open Child Welfare: Children/youth who are provided child welfare services either while living in their home, or while living out-of-home in a foster care setting. Excludes children: placed in California under the jurisdiction of another state (incoming interstate Compact on the Placement of Children (ICPC)) and who are placed with non-dependent guardians.
- \*Foster Care Placement: Children/youth who are removed from their home by a child placement agency, including county child welfare services and probation departments and placed in a foster care setting. Excludes children: placed in California under the jurisdiction of another state (incoming interstate Compact on the Placement of Children (ICPC)) and who are placed with non-dependent legal guardians.

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

### Demographics Report: Unique Count of Children and Youth with an Open Child Welfare Case Receiving SMHS by Fiscal Year Kern County as of June 6, 2018

SFY	Unique Count	Year-Over-Year Percentage	Unique Count of Open Child Welfare	Year-Over-Year Percentage
	Receiving SMHS*	Change	Youth in Medi-Cal	Change
FY 13-14	1,081		3,144	
FY 14-15	987	-8.7%	3,048	-3.1%
FY 15-16	977	-1.0%	2,833	-7.1%
FY 16-17	997	2.0%	2,713	-4.2%
Compound Annual Growth Rate SFY**		-2.7%		-4.8%

<sup>\*</sup>SMHS = Specialty Mental Health Services. See Measures Catalog for more detailed information.

<sup>\*\*</sup>SFY = State Fiscal Year which is July 1 through June 30.

### Demographics Report: Unique Count of Children and Youth with an Open Child Welfare Case Receiving SMHS by Fiscal Year Kern County as of June 6, 2018

Fiscal Year	Black Count	Black %	Hispanic Count	Hispanic %	White Count	White %	Other Count	Other %
FY 13-14	122	11.3%	495	45.8%	397	36.7%	67	6.2%
FY 14-15	147	14.9%	419	42.5%	356	36.1%	65	6.6%
FY 15-16	128	13.1%	428	43.8%	352	36.0%	69	7.1%
FY 16-17	156	15.6%	411	41.2%	367	36.8%	63	6.3%

<sup>\*</sup>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 with an Open Child Welfare Case Receiving SMHS by Fiscal Year Kern County as of June 6, 2018

Fiscal Year	Children 0-2 Count	Children 0-2 %	Children 3-5 Count	Children 3-5 %	Children 6-11 Count	Children 6-11 %	Youth 12-17 Count	Youth 12-17 %	Youth 18-20 Count	Youth 18-20 %
FY 13-14	61	5.6%	210	19.4%	379	35.1%	340	31.5%	91	8.4%
FY 14-15	21	2.1%	135	13.7%	351	35.6%	357	36.2%	123	12.5%
FY 15-16	18	1.8%	100	10.2%	373	38.2%	360	36.8%	126	12.9%
FY 16-17	28	2.8%	132	13.2%	356	35.7%	359	36.0%	122	12.2%

## Demographics Report: Unique Count of Children and Youth with an Open Child Welfare Case Receiving SMHS by Fiscal Year Kern County as of June 6, 2018

Fiscal Year	Female Count	Female %	Male Count	Male %
FY 13-14	514	47.5%	567	52.5%
FY 14-15	499	50.6%	488	49.4%
FY 15-16	471	48.2%	506	51.8%
FY 16-17	464	46.5%	533	53.5%

### Penetration Rates\* Report: Children and Youth with an Open Child Welfare Case with At Least One SMHS Visit\*\* Kern County as of June 6, 2018

		FY 13-14			FY 14-15			FY 15-16			FY 16-17	
	Children and Youth with an Open Child Welfare Case with 1 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate	Children and Youth with an Open Child Welfare Case with 1 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetratio n Rate	Open Child Welfare Case with 1 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate	Children and Youth with an Open Child Welfare Case with 1 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate
All	1,081	3,144	34.4%	987	3,048	32.4%	977	2,833	34.5%	997	2,713	36.7%
Children 0-2	61	627	9.7%	21	657	3.2%	18	574	3.1%	28	580	4.8%
Children 3-5	210	574	36.6%	135	522	25.9%	100	429	23.3%	132	455	29.0%
Children 6-11	379	825	45.9%	351	759	46.2%	373	734	50.8%	356	678	52.5%
Youth 12-17	340	758	44.9%	357	761	46.9%	360	743	48.5%	359	664	54.1%
Youth 18-20	91	360	25.3%	123	349	35.2%	126	353	35.7%	122	336	36.3%
Black	122	401	30.4%	147	427	34.4%	128	365	35.1%	156	386	40.4%
Hispanic	495	1,524	32.5%	419	1,432	29.3%	428	1,297	33.0%	411	1,247	33.0%
White	397	1,001	39.7%	356	975	36.5%	352	950	37.1%	367	846	43.4%
Other	67	218	30.7%	65	214	30.4%	69	221	31.2%	63	234	26.9%
Female	514	1,488	34.5%	499	1,447	34.5%	471	1,330	35.4%	464	1,225	37.9%
Male	567	1,656	34.2%	488	1,601	30.5%	506	1,503	33.7%	533	1,488	35.8%

<sup>\*</sup>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.

<sup>\*\*</sup>Children and Youth with an Open Child Welfare Case that have received at least one SMHS in the Fiscal Year.

### Penetration Rates\* Report: Children and Youth with an Open Child Welfare Case with Five or More SMHS Visits\*\* Kern County as of June 6, 2018

		FY 13-14			FY 14-15			FY 15-16			FY 16-17	
	Children and Youth with an Open Child Welfare Case with 5 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate	Children and Youth with an Open Child Welfare Case with 5 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate	Children and Youth with an Open Child Welfare Case with 5 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate	Children and Youth with an Open Child Welfare Case with 5 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate
All	704	3,144	22.4%	683	3,048	22.4%	687	2,833	24.2%	712	2,713	26.2%
Children 0-2	14	627	2.2%	٨	657	٨	۸	574	۸	12	580	2.1%
Children 3-5	106	574	18.5%	70	522	13.4%	71	429	16.6%	73	455	16.0%
Children 6-11	256	825	31.0%	243	759	32.0%	251	734	34.2%	254	678	37.5%
Children 12-17	263	758	34.7%	271	761	35.6%	263	743	35.4%	272	664	41.0%
Youth 18-20	65	360	18.1%	٨	349	٨	۸	353	۸	101	336	30.1%
Black	83	401	20.7%	90	427	21.1%	95	365	26.0%	106	386	27.5%
Hispanic	311	1,524	20.4%	286	1,432	20.0%	292	1,297	22.5%	285	1,247	22.9%
White	264	1,001	26.4%	263	975	27.0%	251	950	26.4%	278	846	32.9%
Other	46	218	21.1%	44	214	20.6%	49	221	22.2%	43	234	18.4%
Female	340	1,488	22.8%	340	1,447	23.5%	327	1,330	24.6%	334	1,225	27.3%
Male	364	1,656	22.0%	343	1,601	21.4%	360	1,503	24.0%	378	1,488	25.4%

<sup>\*</sup>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.

<sup>\*\*</sup>Children and Youth with an Open Child Welfare Case that have received at least five SMHS in the Fiscal Year.

<sup>^</sup> Data has been suppressed to protect patient privacy.

# Utilization Report\*: Approved SMHS for Children/Youth with an Open Child Welfare Case Mean Expenditures and Service Quantity per Beneficiary by Fiscal Year Kern County as of June 6, 2018

Fiscal Year	SDMC Total Approved	IHBS (Minutes)	ICC (Minutes)	Case Management / Brokerage (Minutes)	Mental Health Services (Minutes)	Therapeutic Behavioral Services (Minutes)	n Support Services	Interventio n (Minutes)	Stabilizatio	Intensive	Full Day Rehabilitati on (Hours)	Hospital Inpatient (Days)	Hospital Inpatient Admin (Days)	Fee for Service Inpatient (Days)		Adult Residential Treatment Services (Days)	Health
FY 13-14	\$ 4,438	663	268	223	1,187	1,166	258	222	13	914	1,068	13		10	28		6
FY 14-15	\$ 7,072	462	341	203	1,384	1,016	269	289	12	537	•	14		11	17		8
FY 15-16	\$ 6,429	603	377	158	1,191	1,610	254	330	22	370	582	7		12	26		12
FY 16-17	\$ 6,059	594	286	234	1,176	1,251	272	260	20		476			12			2
MEAN	\$ 5,999	580	318	204	1,234	1,261	263	275	17	607	709	11	0	11	24	0	7

<sup>\*</sup>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.

# Snapshot Report: Unique Count of Children and Youth with an Open Child Welfare Case Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year

#### Kern County as of June 6, 2018

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.
<b>Service Continuance</b>	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 &	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 13-14	263	24.3%	79	7.3%	62	5.7%	219	20.3%	413	38.2%	45	4.2%	1,081	100%
FY 14-15	235	23.8%	61	6.2%	85	8.6%	224	22.7%	336	34.0%	46	4.7%	987	100%
FY 15-16	222	22.7%	70	7.2%	70	7.2%	212	21.7%	360	36.8%	43	4.4%	977	100%
FY 16-17	270	27.1%	74	7.4%	83	8.3%	176	17.7%	354	35.5%	40	4.0%	997	100%

Time to Step Down Report: Children and Youth with an Open Child Welfare Case Stepping Down in SMHS Services Post Inpatient Discharge\*

Kern County as of June 6, 2018

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	Discharges with Step Down between 8	Percentage of Inpatient Discharges with Step Down between 8 and 30 days of Discharge	Beneficiaries with a Step Down > 30 Days from Discharge or	Days from	Minimum Number of	The second secon	Mean Time to Next Contact Post Inpatient Discharge (Days)	to Next
FY 13-14	14	48.3%	۸	۸	۸	۸	0	261	35.6	8
FY 14-15	31	70.5%	۸	۸	۸	۸	0	270	26.7	2
FY 15-16	32	68.1%	۸	۸	۸	۸	0	347	17.2	2
FY 16-17	13	61.9%	۸	^	^	^	0	257	27.6	6

<sup>\*</sup> 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.

<sup>^</sup> Data has been suppressed to protect patient privacy.