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.*

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.

*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
Santa Clara County as of June 6, 2018

SFY	Unique Count Receiving SMHS*	Year-Over-Year Percentage Change	Unique Count of Open Child Welfare Youth in Medi-Cal	Year-Over-Year Percentage Change
FY 13-14	1,413		3,358	
FY 14-15	1,667	18.0%	3,420	1.8%
FY 15-16	1,709	2.5%	3,372	-1.4%
FY 16-17	1,496	-12.5%	3,215	-4.7%
Compound Annual Growth Rate SFY**		**1.9%**		**-1.4%**

**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 with an Open Child Welfare Case Receiving SMHS by Fiscal Year
Santa Clara County as of June 6, 2018

Fiscal Year	Black Count	Black %	Hispanic Count	Hispanic %	White Count	White %	Other Count	Other %
FY 13-14	126	8.9%	856	60.6%	224	15.9%	207	14.6%
FY 14-15	154	9.2%	1,020	61.2%	243	14.6%	250	15.0%
FY 15-16	150	8.8%	1,064	62.3%	258	15.1%	237	13.9%
FY 16-17	132	8.8%	954	63.8%	221	14.8%	189	12.6%

*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

Santa Clara 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	109	7.7%	205	14.5%	441	31.2%	500	35.4%	158	11.2%
FY 14-15	149	8.9%	243	14.6%	552	33.1%	569	34.1%	154	9.2%
FY 15-16	137	8.0%	249	14.6%	588	34.4%	565	33.1%	170	9.9%
FY 16-17	101	6.8%	206	13.8%	491	32.8%	533	35.6%	165	11.0%

Demographics Report: Unique Count of Children and Youth with an Open Child Welfare Case Receiving SMHS by Fiscal Year

Santa Clara County as of June 6, 2018

Fiscal Year	Female Count	Female %	Male Count	Male %
FY 13-14	687	48.6%	726	51.4%
FY 14-15	822	49.3%	845	50.7%
FY 15-16	867	50.7%	842	49.3%
FY 16-17	771	51.5%	725	48.5%

Penetration Rates* Report: Children and Youth with an Open Child Welfare Case with At Least One SMHS Visit**

Santa Clara 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	**1,413**	**3,358**	**42.1%**	**1,667**	**3,420**	**48.7%**	**1,709**	**3,372**	**50.7%**	**1,496**	**3,215**	**46.5%**
Children 0-2	109	587	18.6%	149	564	26.4%	137	532	25.8%	101	517	19.5%
Children 3-5	205	544	37.7%	243	555	43.8%	249	559	44.5%	206	517	39.8%
Children 6-11	441	956	46.1%	552	1,001	55.1%	588	995	59.1%	491	944	52.0%
Youth 12-17	500	915	54.6%	569	953	59.7%	565	909	62.2%	533	888	60.0%
Youth 18-20	158	356	44.4%	154	347	44.4%	170	377	45.1%	165	349	47.3%
Black	126	244	51.6%	154	285	54.0%	150	258	58.1%	132	243	54.3%
Hispanic	856	2,124	40.3%	1,020	2,144	47.6%	1,064	2,146	49.6%	954	2,051	46.5%
White	224	492	45.5%	243	484	50.2%	258	495	52.1%	221	477	46.3%
Other	207	498	41.6%	250	507	49.3%	237	473	50.1%	189	444	42.6%
Female	687	1,645	41.8%	822	1,692	48.6%	867	1,664	52.1%	771	1,611	47.9%
Male	726	1,713	42.4%	845	1,728	48.9%	842	1,708	49.3%	725	1,604	45.2%

**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 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**

Santa Clara 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	1,163	3,358	34.6%	1,407	3,420	41.1%	1,367	3,372	40.5%	1,227	3,215	38.2%
Children 0-2	66	587	11.2%	86	564	15.2%	70	532	13.2%	65	517	12.6%
Children 3-5	160	544	29.4%	188	555	33.9%	196	559	35.1%	168	517	32.5%
Children 6-11	362	956	37.9%	486	1,001	48.6%	482	995	48.4%	407	944	43.1%
Children 12-17	436	915	47.7%	511	953	53.6%	475	909	52.3%	442	888	49.8%
Youth 18-20	139	356	39.0%	136	347	39.2%	144	377	38.2%	145	349	41.5%
Black	109	244	44.7%	139	285	48.8%	126	258	48.8%	104	243	42.8%
Hispanic	709	2,124	33.4%	866	2,144	40.4%	840	2,146	39.1%	785	2,051	38.3%
White	186	492	37.8%	201	484	41.5%	205	495	41.4%	179	477	37.5%
Other	159	498	31.9%	201	507	39.6%	196	473	41.4%	159	444	35.8%
Female	579	1,645	35.2%	705	1,692	41.7%	694	1,664	41.7%	639	1,611	39.7%
Male	584	1,713	34.1%	702	1,728	40.6%	673	1,708	39.4%	588	1,604	36.7%

**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.*

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

Utilization Report*: Approved SMHS for Children/Youth with an Open Child Welfare Case
Mean Expenditures and Service Quantity per Beneficiary by Fiscal Year
Santa Clara 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)	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)	Adult Residential Treatment Services (Days)	Psychiatric Health Facility (Days)
FY 13-14	$ 24,299	2,759	715	1,197	3,691	3,177	423	238	35	266	464	1	.	12	26	120	.
FY 14-15	$ 16,690	2,055	1,261	1,043	3,354	2,884	380	285	27	562	371	5	3	12	2	1	7
FY 15-16	$ 15,273	2,555	1,638	938	2,737	3,515	295	297	37	397	800	3	38	10	16	.	9
FY 16-17	$ 38,235	2,511	1,544	1,003	2,745	3,232	334	376	25	.	237	39	6	8	41	.	6
MEAN	**$ 23,625**	**2,470**	**1,289**	**1,045**	**3,131**	**3,202**	**358**	**299**	**31**	**408**	**468**	**12**	**16**	**11**	**21**	**61**	**7**

**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 Children and Youth with an Open Child Welfare Case Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year

Santa Clara 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.
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 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	399	28.2%	104	7.4%	152	10.8%	305	21.6%	396	28.0%	57	4.0%	1,413	100%
FY 14-15	490	29.4%	122	7.3%	156	9.4%	295	17.7%	530	31.8%	74	4.4%	1,667	100%
FY 15-16	373	21.8%	108	6.3%	168	9.8%	395	23.1%	576	33.7%	89	5.2%	1,709	100%
FY 16-17	365	24.4%	118	7.9%	135	9.0%	313	20.9%	483	32.3%	82	5.5%	1,496	100%

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

Santa Clara 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	Count of Inpatient Discharges with Step Down between 8 and 30 days of Discharge	Percentage of Inpatient Discharges with Step Down between 8 and 30 days of Discharge	Count of Beneficiaries with a Step Down > 30 Days from Discharge or No Step Down*	Percentage of Beneficiaries with a Step Down > 30 Days from Discharge or 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 13-14	65	79.3%	^	^	^	^	0	114	5.7	1
FY 14-15	56	82.4%	^	^	^	^	0	83	4.9	1
FY 15-16	61	83.6%	^	^	^	^	0	306	9.9	1
FY 16-17	51	82.3%	^	^	^	^	0	124	10.0	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.*

^ Data has been suppressed to protect patient privacy.