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 Cruz 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	318		556	
FY 14-15	304	-4.4%	528	-5.0%
FY 15-16	317	4.3%	570	8.0%
FY 16-17	266	-16.1%	540	-5.3%
Compound Annual Growth Rate SFY**		**-5.8%**		**-1.0%**

**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 Cruz County as of June 6, 2018

Fiscal Year	Black Count	Black %	Hispanic Count	Hispanic %	White Count	White %	Other Count	Other %
FY 13-14	11	3.5%	142	44.7%	131	41.2%	34	10.7%
FY 14-15	^	^	139	45.7%	115	37.8%	^	^
FY 15-16	13	4.1%	152	47.9%	115	36.3%	37	11.7%
FY 16-17	^	^	140	52.6%	88	33.1%	^	^

^ Data has been suppressed to protect patient privacy.
*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 Cruz 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	17	5.3%	45	14.2%	113	35.5%	105	33.0%	38	11.9%
FY 14-15	12	3.9%	41	13.5%	108	35.5%	96	31.6%	47	15.5%
FY 15-16	13	4.1%	46	14.5%	96	30.3%	120	37.9%	42	13.2%
FY 16-17	16	6.0%	42	15.8%	64	24.1%	100	37.6%	44	16.5%

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

Santa Cruz County as of June 6, 2018

Fiscal Year	Female Count	Female %	Male Count	Male %
FY 13-14	145	45.6%	173	54.4%
FY 14-15	144	47.4%	160	52.6%
FY 15-16	151	47.6%	166	52.4%
FY 16-17	133	50.0%	133	50.0%

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

Santa Cruz 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	**318**	**556**	**57.2%**	**304**	**528**	**57.6%**	**317**	**570**	**55.6%**	**266**	**540**	**49.3%**
Children 0-2	17	98	17.3%	12	92	13.0%	13	109	11.9%	16	115	13.9%
Children 3-5	45	98	45.9%	41	68	60.3%	46	84	54.8%	42	85	49.4%
Children 6-11	113	157	72.0%	108	144	75.0%	96	137	70.1%	64	114	56.1%
Youth 12-17	105	145	72.4%	96	154	62.3%	120	171	70.2%	100	149	67.1%
Youth 18-20	38	58	65.5%	47	70	67.1%	42	69	60.9%	44	77	57.1%
Black	11	26	42.3%	^	23	^	13	21	61.9%	^	19	^
Hispanic	142	246	57.7%	139	244	57.0%	152	284	53.5%	140	262	53.4%
White	131	226	58.0%	115	189	60.8%	115	194	59.3%	88	178	49.4%
Other	34	58	58.6%	^	72	^	37	71	52.1%	^	81	^
Female	145	255	56.9%	144	242	59.5%	151	257	58.8%	133	251	53.0%
Male	173	301	57.5%	160	286	55.9%	166	313	53.0%	133	289	46.0%

**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 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 Cruz 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	267	556	48.0%	249	528	47.2%	261	570	45.8%	229	540	42.4%
Children 0-2	13	98	13.3%	^	92	^	^	109	^	^	115	^
Children 3-5	32	98	32.7%	30	68	44.1%	36	84	42.9%	38	85	44.7%
Children 6-11	101	157	64.3%	93	144	64.6%	80	137	58.4%	59	114	51.8%
Children 12-17	86	145	59.3%	78	154	50.6%	102	171	59.6%	84	149	56.4%
Youth 18-20	35	58	60.3%	^	70	^	^	69	^	^	77	^
Black	^	26	^	^	23	^	^	21	^	^	19	^
Hispanic	116	246	47.2%	117	244	48.0%	123	284	43.3%	121	262	46.2%
White	107	226	47.3%	98	189	51.9%	98	194	50.5%	75	178	42.1%
Other	^	58	^	^	72	^	^	71	^	^	81	^
Female	128	255	50.2%	118	242	48.8%	127	257	49.4%	119	251	47.4%
Male	139	301	46.2%	131	286	45.8%	134	313	42.8%	110	289	38.1%

**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.*

^ 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
Santa Cruz 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	$ 13,126	1,678	681	660	4,470	5,249	328	159	17	1,296	18	.	.	9	.	.	3
FY 14-15	$ 14,101	3,507	1,331	515	4,115	5,646	388	346	18	684	.	.	.	9	.	.	.
FY 15-16	$ 11,794	2,630	866	493	3,175	4,095	249	289	14	636	.	.	.	6	.	.	.
FY 16-17	$ 15,823	3,677	1,010	247	3,448	2,959	356	347	22	.	.	.	.	5	.	.	.
MEAN	**$ 13,711**	**2,873**	**972**	**479**	**3,802**	**4,487**	**330**	**285**	**18**	**872**	**18**	**0**	**0**	**8**	**0**	**0**	**3**

**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 Cruz 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	105	33.0%	28	8.8%	38	11.9%	64	20.1%	58	18.2%	25	7.9%	318	100%
FY 14-15	75	24.7%	30	9.9%	49	16.1%	73	24.0%	59	19.4%	18	5.9%	304	100%
FY 15-16	90	28.4%	26	8.2%	27	8.5%	80	25.2%	77	24.3%	17	5.4%	317	100%
FY 16-17	56	21.1%	24	9.0%	31	11.7%	66	24.8%	66	24.8%	23	8.6%	266	100%

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

Santa Cruz 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	^	^	^	^	^	^	0	27	4.3	0
FY 14-15	15	88.2%	^	^	^	^	0	4	0.4	0
FY 15-16	^	^	^	^	^	^	0	0	0.0	0
FY 16-17	11	91.7%	^	^	^	^	0	24	2.9	0

** **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.