Department of Health Care Services

Medi-Cal Specialty Mental Health Services

May Revision Estimate

Policy Change Supplement

For Fiscal Years 2012-13 and 2013-14

Medi-Cal Specialty Mental Health Services

Table of Contents

Medi-Cal Specialty Mental Health Service Descriptions	1
Comparison of Fiscal Impacts of Policy Changes - Accrual Comparisons	6
Children and Adults Service Costs:	
Cash Comparison: FY 2012-13	7
Cash Comparison: FY 2013-14	9
Children Service Costs Accrual Comparison:	
Fiscal Year 2012-13 Appropriation, November 2012, May 2013	11
Fiscal Year 2012-13	12
Fiscal Year 2013-14	13
Fiscal Year 2012-13 vs. 2013-14	14
Adult Service Costs Accrual Comparison:	
Fiscal Year 2012-13 Appropriation, November 2012, May 2013	15
Fiscal Year 2012-13	17
Fiscal Year 2013-14	18
Fiscal Year 2012-13 vs. 2013-14	19
Children's Table of Approved Claims Costs and Unduplicated Clients Counts	20
Children's Approved Claims and Claim Forecast	21
Unduplicated Clients and Client Forecasts	
All Medi-Cal Children Compared to Children Receiving Specialty Mental Health Services.	22
Percent Change in Children's Costs and Clients	23
Children's Services Approved Claims Data	
Number of Clients, Units of Service, Costs per Unit, and Approved Amounts by Service	24
Adults' Table of Approved Claim Costs and Unduplicated Client Counts	27
Adults' Approved Claims and Claims Forecast	28
Unduplicated Clients and Client Forecasts	29
Percent Change in Adults' Costs and Clients	30
Adults' Services Approved Claims Data	
Number of Clients, Units of Service, Costs per Unit, and Approved Amounts by Service	31
Children Costs and Unduplicated Clients by Service Type and Year	34

Medi-Cal Specialty Mental Health Services

Adults Costs and Unduplicated Clients by Service Type and Year	35
Healthy Families SED	
Table of Approved Claims and Claim Cost	36
Table of Unduplicated Clients	37
Children's Forecast by Service Type	38
Adults' Forecast by Service Type	102
Policy Changes(Pages as listed in the DHCS Ma	v 2013 Medi-Cal Estimate

Overview

The Medi-Cal Specialty Mental Health Services Program is "carved-out" of the broader Medi-Cal program and is also administered by the Department under the authority of a waiver approved by the Centers for Medicare and Medicaid Services (CMS). The Department contracts with a Mental Health Plan (MHP) in each county to provide or arrange for the provision of Medi-Cal specialty mental health services. All MHPs are county mental health departments.

Specialty mental health services are Medi-Cal entitlement services for adults and children that meet medical necessity criteria, which consist of having a specific covered diagnosis, functional impairment, and meeting intervention criteria. MHPs must certify that they incurred a cost before seeking federal reimbursement through claims to the State. MHPs are responsible for the non-federal share of Medi-Cal specialty mental health services. Mental health services for Medi-Cal beneficiaries who do not meet the criteria for specialty mental health services are provided under the broader Medi-Cal program either through managed care plans (by primary care providers within their scope of practice) or fee-for-service. Children's specialty mental health services are provided under the federal requirements of the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) benefit, which is available to full-scope beneficiaries under age 21.

The following Medi-Cal specialty mental health services are provided for children and adults:

Services	<u>Children</u>	<u>Adult</u>
Adult Crisis Residential Services*	Χ	Χ
Adult Residential Treatment Services*	Χ	X
Crisis Intervention	Χ	X
Crisis Stabilization	Χ	Χ
Day Rehabilitation	Χ	Χ
Day Treatment Intensive	Χ	Χ
Medication Support	Χ	Χ
Psychiatric Health Facility Services	Χ	Χ
Psychiatric Inpatient Hospital Services	Χ	Χ
Targeted Case Management	Χ	Χ
Therapeutic Behavioral Services	Χ	
Therapy and Other Service Activities	Χ	Χ

^{*}Includes Children Age 18 through 20

Adult Crisis Residential Services (CRS)

Adult crisis residential services provide an alternative to acute psychiatric hospital services for beneficiaries who otherwise would require hospitalization. The CRS programs for adults provide normalized living environments, integrated into residential communities. The services follow a social rehabilitation model that integrates aspects of emergency psychiatric care, psychosocial rehabilitation, milieu therapy, case management and practical social work.

Adult Residential Treatment Services

Adult Residential Treatment Services are rehabilitative services provided in a non-institutional, residential setting for beneficiaries who would be at risk of hospitalization or other institutional placement if they were not receiving residential treatment services. The services include a wide range of activities and services that support beneficiaries in their effort to restore, maintain, and apply interpersonal and independent living skills and to access community support systems. Service activities may include assessment, plan development, therapy, rehabilitation, and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Crisis Intervention

Crisis intervention services last less than 24 hours and are for, or on behalf of, a beneficiary for a condition that requires more timely response than a regularly scheduled visit. Service activities include, but are not limited to, assessment, collateral and therapy. Crisis Intervention services may either be face-to-face or by telephone with the beneficiary or the beneficiary's significant support person and may be provided anywhere in the community.

Crisis Stabilization

Crisis stabilization services last less than 24 hours and are for, or on behalf of, a beneficiary for a condition that requires a more timely response than a regularly scheduled visit. Service activities include but are not limited to one or more of the following: assessment, collateral, and therapy. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Day Rehabilitative (Half-Day & Full-Day)

Day rehabilitation services are a structured program of rehabilitation and therapy with services to improve, maintain or restore personal independence and functioning, consistent with requirements for learning and development and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to assessment, plan development, therapy, rehabilitation and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Day Treatment Intensive (Half-Day & Full-Day)

Day treatment intensive services are a structured, multi-disciplinary program of therapy that may be used as an alternative to hospitalization, or to avoid placement in a more restrictive setting, or to maintain the client in a community setting and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to, assessment, plan development, therapy, rehabilitation and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Medication Support:

Medication support services include prescribing, administering, dispensing and monitoring of psychiatric medications or biologicals that are necessary to alleviate the symptoms of mental illness. Service activities may include but are not limited to: evaluation of the need for medication; evaluation of clinical effectiveness and side effects; obtaining informed consent; instruction in the use, risks and benefits of, and alternatives for, medication; collateral and plan development related to the delivery of service and/or assessment for the client; prescribing, administering, dispensing and monitoring of psychiatric medications or biologicals; and medication education.

Psychiatric Health Facility (PHF) Services

"Psychiatric Health Facility" means a facility licensed under the provisions beginning with Section 77001 of Chapter 9, Division 5, Title 22 of the California Code of Regulations. "Psychiatric Health Facility Services" are therapeutic and/or rehabilitative services provided in a psychiatric health facility on an inpatient basis to beneficiaries who need acute care, which meets the criteria of Section 1820.205 of Chapter 11, Division 1, Title 9 of the California Code of Regulations, and whose physical health needs can be met in an affiliated general acute care hospital or in outpatient settings. These services are separate from those categorized as "Psychiatric Inpatient Hospital".

<u>Psychiatric Inpatient Hospital Services</u>

Psychiatric inpatient hospital services include both acute psychiatric inpatient hospital services and administrative day services. Acute psychiatric inpatient hospital services are provided to beneficiaries for whom the level of care provided in a hospital is medically necessary to diagnose or treat a covered mental illness. Administrative day services are inpatient hospital services provided to beneficiaries who were admitted to the hospital for an acute psychiatric inpatient hospital service and the beneficiary's stay at the hospital must be continued beyond the beneficiary's need for acute psychiatric inpatient hospital services due to lack of residential placement options at non-acute residential treatment facilities that meet the needs of the beneficiary.

Psychiatric inpatient hospital services are provided by Short-Doyle / Medi-Cal (SD/MC) hospitals and Fee-for-Service / Medi-Cal (FFS/MC) hospitals. MHPs claim reimbursement for the cost of psychiatric inpatient hospital services provided by Short-

Doyle Medi-Cal hospitals through the Short-Doyle Medi-Cal (SD/MC) claiming system. FFS/MC hospitals claim reimbursement for the cost of psychiatric inpatient hospital services through the FFS/MC Fiscal Intermediary system. MHPs are responsible for authorization of psychiatric inpatient hospital services reimbursed through either billing system. For SD/MC hospitals, the daily rate includes the cost of any needed professional services. The FFS/MC hospital daily rate does not include professional services, which are billed separately from the FFS/MC inpatient hospital services via the SD/MC claiming system.

Targeted Case Management (TCM)

Targeted case management is a service that assists a beneficiary in accessing needed medical, educational, social, prevocational, vocational, rehabilitative, or other community services. The service activities may include, but are not limited to, communication, coordination and referral; monitoring service delivery to ensure beneficiary access to services and the service delivery system; monitoring of the beneficiary's progress, placement services, and plan development. TCM services may be face-to-face or by telephone with the client or significant support persons and may be provided anywhere in the community. Additionally, services may be provided by any person determined by the MHP to be qualified to provide the service, consistent with the scope of practice and state law.

Therapeutic Behavioral Services (TBS)

Therapeutic behavioral services are intensive, individualized, short-term outpatient treatment interventions for beneficiaries up to age 21. Individuals receiving these services have serious emotional disturbances (SED), are experiencing a stressful transition or life crisis and need additional short-term, specific support services to accomplish outcomes specified in the written treatment plan.

Therapy and Other Service Activities (formerly referred to as Mental Health Services)

Individual or group therapies and interventions are designed to provide a reduction of mental disability and restoration, improvement or maintenance of functioning consistent with the goals of learning, development, independent living, and enhanced self-sufficiency. These services are separate from those provided as components of adult residential services, treatment services, crisis intervention, crisis stabilization, day rehabilitation, or day treatment intensive. Service activities may include, but are not limited to:

 Assessment - A service activity designed to evaluate the current status of mental, emotional, or behavioral health. Assessment includes, but is not limited to, one or more of the following: mental status determination, analysis of the clinical history, analysis of relevant cultural issues and history; diagnosis; and the use of mental health testing procedures.

Page 4

- Plan Development A service activity that consists of development of client plans, approval of client plans, and/or monitoring and recording of progress.
- 3. <u>Therapy</u> A service activity that is a therapeutic intervention that focuses primarily on symptom reduction as a means to reduce functional impairments. Therapy may be delivered to an individual or group and may include family therapy at which the client is present.
- 4. <u>Rehabilitation</u> A service activity that includes, but is not limited to, assistance, improving, maintaining or restoring functional skills, daily living skills, social and leisure skills, grooming and personal hygiene skills; obtaining support resources; and/or obtaining medication education.
- 5. Collateral A service activity involving a significant support person in the beneficiary's life for the purpose of addressing the mental health needs of the beneficiary in terms of achieving goals of the beneficiary's client plan. Collateral may include, but is not limited to, consultation and training of the significant support person(s) to assist in better utilization of mental health services by the client, consultation and training of the significant support person(s) to assist in better understanding of mental illness, and family counseling with the significant support person(s) in achieving the goals of the client plan. The client may or may not be present for this service activity.

The distribution of use and expenditures of each service activity varies over time with changes in client needs.

Comparison of Fiscal Impacts of Policy Changes - Accrual Comparison

2010 May Estimate				or r roodr iiiipaot		ugee / 100. u.u.						i oney ona	nge cappioment
(In Thousands)		•	•		•		•		•				
		Fiscal Year 2	012-13 November 2	012 Estimate Com	pared to Fiscal Y	ear 2012-13 May 2	2013 Estimate						
													-
POLICY CHANGE		Nov	. 2012 Est. for FY 201:	2-13			May 2013 Es	t. for FY 2012-13			DIFFER	ENCE	
TYPE NO. DESCRIPTION	TF	GF	FFP	LRF	CF ⁽¹⁾	TF	ĞF	FFP	LRF/CF	TF	GF	FFP	LRF/CF
Base 60/225 ADULT, AND FFS PSYCHIATRIC INPATIENT (2,4)	\$976,497	\$0	\$488,249	\$488,249	\$0	\$1,003,956	\$0	\$501,978	\$501,978	\$27,459	\$0	\$13,730	\$13,730
Base 60/224 CHILDREN (4)	\$1,319,942	\$0	\$663,723	\$553,985	\$102,234	\$1,473,670	\$0	\$741,117	\$732,553	\$153,728	\$0	\$77,394	\$76,334
Regular 61 SPECIALTY MENTAL HEALTH SVCS SUPP REIMBURSEMENT (3)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Regular 62 HEALTHY FAMILIES - SED	\$30,750	\$0	\$19,987	\$10,763	\$0	\$33,409	\$0	\$21,716	\$11,693	\$2,659	\$0	\$1,729	\$930
Regular 63 KATIE A. V. DIANA BONTA	\$26,751	\$0	\$13,376	\$13,376	\$0	\$26,751	\$0	\$13,376	\$13,376	\$0	\$0	\$0	\$0
Regular 64 TRANSITION OF HFP - SMH SERVICES	\$17,447	\$0	\$11,341	\$6,106	\$0	\$17,185	\$0	\$11,170	\$6,015	-\$262	\$0	-\$170	-\$92
Regular 65 SOLANO COUNTY SMHS REALIGNMENT CARVE-OUT	\$5,538	\$0	\$2,769	\$2,769	\$0	\$5,538	\$0	\$2,769	\$2,769	\$0	\$0	\$0	\$0
Regular 66 OVER ONE-YEAR CLAIMS	\$4,000	\$0	\$2,000	\$2,000	\$0	\$4,000	\$0	\$2,000	\$2,000	\$0	\$0	\$0	\$0
Regular 67 SPECIALTY MENTAL HEALTH LAWSUIT	\$370	\$180	\$190	\$0	\$0	\$370	\$180	\$190	\$0	\$0	\$0	\$0	\$0
Regular 68 SISKIYOU COUNTY MENTAL HEALTH PLAN OVERPAYMENT	\$0	\$6,217	-\$6,217	\$0	\$0	\$0	\$6,227	-\$6,227	\$0	\$0	\$10	-\$10	\$0
Regular 69 IMD ANCILLARY SERVICES	\$0	\$6,000	-\$6,000	\$0	\$0	\$0	\$6,000	-\$6,000	\$0	\$0	\$0	\$0	\$0
Regular 70 REIMBURSEMENT IN IMD ANCILLARY SERVICES COSTS	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Regular 71 CHART REVIEW	-\$450	\$0	-\$450	\$0	\$0	-\$590	\$0	-\$590	\$0	-\$140	\$0	-\$140	\$0
Regular 72 INTERIM AND FINAL COST SETTLEMENTS - SMHS	-\$26,634	\$1,151	-\$27,785	\$0	\$0	-\$26,634	\$1,151	-\$27,785	\$0	\$0	\$0	\$0	\$0
Regular 204 ELIMINATION OF STATE MAXIMUM RATES	\$233,992	\$0	\$117,524	\$116,468	\$0	\$233,992	\$0	\$117,524	\$116,468	\$0	\$0	\$0	\$0
Other 3 COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$258,767	\$0	\$129,800	\$128,967	\$0	\$258,767	\$0	\$129,800	\$128,967	\$0	\$0	\$0	\$0
Other 9 SMH MAA	\$42,328	\$0	\$24,707	\$17,621	\$0	\$42,328	\$0	\$24,707	\$17,621	\$0	\$0	\$0	\$0
Other 10 COUNTY UR & QA ADMIN	\$25,271	\$0	\$16,455	\$8,816	\$0	\$25,271	\$0	\$16,455	\$8,816	\$0	\$0	\$0	\$0
Other 11 INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$15,821	\$0	\$15,821	\$0	\$0	\$15,821	\$0	\$15,821	\$0	\$0	\$0	\$0	\$0
SPECIALTY MENTAL HEALTH TOTAL	\$2,930,390	\$13,548	\$1,465,489	\$1,349,119	\$102,234	\$3,113,834	\$13,558	\$1,558,021	\$1,542,255	\$183,444	\$10	\$92,532	\$90,902

			Fiscal Year 2	013-14 November 2	012 Estimate Com	pared to Fiscal Y	ear 2013-14 May 2	2013 Estimate						
							-							
POLICY	CHG.		Nov.	. 2012 Est. for FY 201:	3-14	40		May 2013 Es	t. for FY 2013-14			DIFFER	ENCE	
TYPE	NO. DESCRIPTION	TF	GF	FFP	LRF	CF ⁽¹⁾	TF	GF	FFP	LRF/CF	TF	GF	FFP	LRF/CF
Base	60/225 ADULT, AND FFS PSYCHIATRIC INPATIENT (4)	\$986,208	\$0	\$493,104	\$493,104	\$0	\$1,028,520	\$0	\$514,260	\$514,260	\$42,312	\$0	\$21,156	\$21,156
Base	60/224 CHILDREN (4)	\$1,380,800	\$0	\$694,552	\$579,336	\$106,912	\$1,550,977	\$0	\$779,998	\$770,979	\$170,177	\$0	\$85,446	\$84,731
Regular	61 SPECIALTY MENTAL HEALTH SVCS SUPP REIMBURSEMENT (3)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Regular	62 HEALTHY FAMILIES - SED	\$31,240	\$0	\$20,306	\$10,934	\$0	\$34,124	\$0	\$22,181	\$11,943	\$2,884	\$0	\$1,875	\$1,009
Regular	63 KATIE A. V. DIANA BONTA	\$53,502	\$0	\$26,751	\$26,751	\$0	\$53,502	\$0	\$26,751	\$26,751	\$0	\$0	\$0	\$0
Regular	64 TRANSITION OF HFP - SMH SERVICES	\$64,048	\$0	\$41,631	\$22,417	\$0	\$63,901	\$0	\$41,536	\$22,365	-\$147	\$0	-\$95	-\$52
Regular	65 SOLANO COUNTY SMHS REALIGNMENT CARVE-OUT	\$5,538	\$0	\$2,769	\$2,769	\$0	\$5,538	\$0	\$2,769	\$2,769	\$0	\$0	\$0	\$0
Regular	66 OVER ONE-YEAR CLAIMS	\$4,000	\$0	\$2,000	\$2,000	\$0	\$6,000	\$0	\$3,000	\$3,000	\$2,000	\$0	\$1,000	\$1,000
Regular	67 SPECIALTY MENTAL HEALTH LAWSUIT	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Regular	68 SISKIYOU COUNTY MENTAL HEALTH PLAN OVERPAYMENT	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Regular	69 IMD ANCILLARY SERVICES	\$0	\$6,000	-\$6,000	\$0	\$0	\$0	\$6,000	-\$6,000	\$0	\$0	\$0	\$0	\$0
Regular	70 REIMBURSEMENT IN IMD ANCILLARY SERVICES COSTS	-\$12,000	-\$12,000	\$0	\$0	\$0	-\$12,000	-\$12,000	\$0	\$0	\$0	\$0	\$0	\$0
Regular	71 CHART REVIEW	-\$450	\$0	-\$450	\$0	\$0	-\$580	\$0	-\$580	\$0	-\$130	\$0	-\$130	\$0
Regular	72 INTERIM AND FINAL COST SETTLEMENTS - SMHS	-\$65,939	\$39,261	-\$105,200	\$0	\$0	-\$70,714	\$39,385	-\$110,099	\$0	-\$4,775	\$124	-\$4,899	\$0
Regular	204 ELIMINATION OF STATE MAXIMUM RATES	\$251,991	\$0	\$126,564	\$125,427	\$0	\$251,991	\$0	\$126,564	\$125,427	\$0	\$0	\$0	\$0
Other	3 COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$289,887	\$0	\$145,288	\$144,599	\$0	\$289,887	\$0	\$145,288	\$144,599	\$0	\$0	\$0	\$0
Other	9 SMH MAA	\$45,291	\$0	\$26,436	\$18,855	\$0	\$45,291	\$0	\$26,436	\$18,855	\$0	\$0	\$0	\$0
Other	10 COUNTY UR & QA ADMIN	\$25,957	\$0	\$16,901	\$9,056	\$0	\$25,957	\$0	\$16,901	\$9,056	\$0	\$0	\$0	\$0
Other	11 INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$26,641	\$0	\$26,641	\$0	\$0	\$26,641	\$0	\$26,641	\$0	\$0	\$0	\$0	\$0
	SPECIALTY MENTAL HEALTH TOTAL	\$3,086,714	\$33,261	\$1,511,293	\$1,435,248	\$106,912	\$3,299,035	\$33,385	\$1,615,646	\$1,650,004	\$212,321	\$124	\$104,353	\$107,844

prior county baseline for children's services before the 2011 Realignment.

(2) As compared to FY 2012-13 Appropriation, the methodology for estimating the Adults and FFS Psychiatric Inpatient costs was changed to a claimbased forecast approach to reflect the actual estimate of FFP expenditures. While this has resulted in a May Appropriation to November Estimate reduction in total funds, this is only a technical change to provide a more accurate FFP estimate and does not affect Realignment funding.

(3) As compared to FY 2012-13 Appropriation, the methodology for estimating the SMHS Supplemental Reimbursement costs was changed to a cashbased approach to reflect the actual estimate of FFP expenditures in the year they will occur. These costs are for services from January 2009 through June 2012 and, as such, are not reflected in the FY 2012-13 accrual estimate. While this has resulted in a May Appropriation to November Estimate reduction in total funds, this is only a technical change to provide a more accurate FFP estimate and does not affect Realignment funding.

Notes: (1) County Funds (CF) are considered the same as other Local Realignment Funds (LRF) and are shown here only to provide a reference amount to the (4) The May 2013 estimate replaces Base PC 224 and Base PC 225. With this change, the psychiatric inpatient costs included in PC 60 as a single total cost are now distributed in PC 224 and PC 225 so that these costs reflect the appropriate child and adult age groups. The costs in PC 224 and PC 225 also reflect program growth and an increase due to the elimination of state maximum rates as described in regular PC 204.

Date Last Updated: 5/2/2013

Department of Health Care Services May 2013 Estimate

Specialty Mental Health Services Program Children and Adults Service Costs - Cash Comparison: FY 2012-13

Specialty Mental Health Services
Policy Change Supplement

(in thousands)

Children													
	CHANGE		Nov	/. 2012 Est	for	FY 2012-13	N	May 2013 Est 1	for I	FY 2012-13	DIFFE	REN	CE
TYPE		DESCRIPTION		GF		FFP		GF		FFP	GF		FFP
Base	60/225	ADULT AND FFS PSYCHIATRIC INPATIENT / SMHS FOR ADULT:	\$		\$	34,133	\$	-	\$	-	\$ -	\$	(34,133)
Base	60/224	CHILDREN / SMHS FOR CHILDREN	\$	-	\$	699,212	\$	-	\$	809,852	\$ -	\$	110,640
Regular	61	SPECIALTY MENTAL HEALTH SVCS SUPP REIMBURSEMENT	\$	-	\$	29,627	\$	-	\$	-	\$ -	\$	(29,627)
Regular	62	HEALTHY FAMILIES - SED	\$	-	\$	-	\$	-			\$ -	\$	-
Regular	63	KATIE A. V. DIANA BONTA	\$	-	\$	9,785	\$	-	\$	9,785	\$ -	\$	-
Regular	64	TRANSITION OF HFP - SMH SERVICES	\$	-	\$	8,297	\$	-	\$	7,931	\$ -	\$	(366)
Regular	65	SOLANO COUNTY	\$	-	\$	1,911	\$	-	\$	1,911	\$ -	\$	-
Regular	66	OVER ONE-YEAR CLAIMS	\$	-	\$	803	\$	-	\$	803	\$ -	\$	-
Regular	67	SPECIALTY MENTAL HEALTH LAWSUIT	\$	180	\$	190	\$	180	\$	190	\$ -	\$	-
Regular	68	SISKIYOU COUNTY MENTAL HEALTH PLAN OVERPAYMENT	\$	4,911	\$	(4,911)	\$	4,911	\$	(4,911)	\$ -	\$	-
Regular	69	IMD ANCILLARY SERVICES	\$	-	\$	-	\$	-			\$ -	\$	-
Regular	70	REIMBURSEMENT IN IMD ANCILLARY SERVICES COSTS	\$	-	\$	-	\$	-			\$ -	\$	-
Regular	71	CHART REVIEW	\$	-	\$	(122)	\$	-	\$	(160)	\$ -	\$	(38)
Regular	72	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$	1,151	\$	(15,374)	\$	1,151	\$	(15,374)	\$ -	\$	-
Regular	204	ELIMINATION OF STATE MAXIMUM RATES	\$	-	\$	45,027	\$	-	\$	45,027	\$ -	\$	-
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$	-	\$	78,342	\$	-	\$	78,342	\$ -	\$	-
Other	9	SMH MAA	\$	-	\$	14,507	\$	-	\$	14,272	\$ -	\$	(235)
Other	10	COUNTY UR & QA ADMIN	\$	-	\$	10,177	\$	-	\$	10,177	\$ -	\$	-
Other	11	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$	-	\$	9,803	\$	-	\$	9,803	\$ -	\$	-
Total Chi	ildren		\$	6,242	\$	921,408	\$	6,242	\$	967,649	\$ -	\$	46,241

Adults													
POLICY (CHANGE		No	v. 2012 Est	for l	FY 2012-13	Ma	ay 2013 Est	for F	Y 2012-13	DIFFE	REN	CE
TYPE	NO.	DESCRIPTION		GF		FFP		GF		FFP	GF		FFP
Base	60/225	ADULT AND FFS PSYCHIATRIC INPATIENT	\$	-	\$	482,594	\$	-	\$	541,957	\$ -	\$	59,363
Base	60/224	CHILDREN / SMHS FOR CHILDREN	\$	-	\$	-	\$	-			\$ -	\$	-
Regular	61	SPECIALTY MENTAL HEALTH SVCS SUPP REIMBURSEMENT	\$	-	\$	34,560	\$	-	\$	-	\$ -	\$	(34,560)
Regular	62	HEALTHY FAMILIES - SED	\$	-	\$	-	\$	-			\$ -	\$	-
Regular	63	KATIE A. V. DIANA BONTA	\$	-	\$	-	\$	-			\$ -	\$	-
Regular	64	TRANSITION OF HFP - SMH SERVICES	\$	-	\$	-	\$	-			\$ -	\$	-
Regular	65	SOLANO COUNTY	\$	-	\$	858	\$	-	\$	858	\$ -	\$	-
Regular	66	OVER ONE-YEAR CLAIMS	\$	-	\$	1,197	\$	-	\$	1,197	\$ -	\$	-
Regular	67	SPECIALTY MENTAL HEALTH LAWSUIT	\$	-	\$	-	\$	-			\$ -	\$	-
Regular	68	SISKIYOU COUNTY MENTAL HEALTH PLAN OVERPAYMENT	\$	1,306	\$	(1,306)	\$	1,306	\$	(1,306)	\$ -	\$	-
Regular	69	IMD ANCILLARY SERVICES	\$	6,000	\$	(6,000)	\$	6,000	\$	(6,000)	\$ -	\$	-
Regular	70	REIMBURSEMENT IN IMD ANCILLARY SERVICES COSTS	\$	-	\$	-	\$	-			\$	\$	-
Regular	71	CHART REVIEW	\$	-	\$	(328)	\$	-	\$	(430)	\$ -	\$	(102)
Regular	72	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$	-	\$	(11,759)	\$	-	\$	(11,759)	\$ -	\$	-
Regular	204	ELIMINATION OF STATE MAXIMUM RATES	\$	-	\$	45,467	\$	-	\$	45,467	\$ -	\$	-
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$	-	\$	47,056	\$	-	\$	47,056	\$ -	\$	-
Other	9	SMH MAA	\$	-	\$	8,775	\$	-	\$	8,633	\$ -	\$	(142)
Other	10	COUNTY UR & QA ADMIN	\$	-	\$	6,156	\$	-	\$	6,156	\$ -	\$	-
Other	11	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$	-	\$	5,930	\$	-	\$	5,930	\$ -	\$	-
Total Adı	ults		\$	7,306	\$	613,199	\$	7,306	\$	637,758	\$ -	\$	24,559

^{*}The Adult and FFS Psychiatric Inpatient estimate includes costs for services provided to children that were not historically reimbursed through the Early and Periodic Screening Diagnosis and Treatment (EPSDT) program. The adult estimate includes the cost of providing Short-Doyle/Medi-Cal inpatient hospital services to children and the FFS Psychiatric Inpatient estimate includes the cost of providing FFS/MC acute psychiatric inpatient hospital services to children.

Page 7

Specialty Mental Health Services Program Children and Adults Service Costs - Cash Comparison: FY 2012-13

Specialty Mental Health Services Policy Change Supplement

Healthy	Families	Program									
POLICY	CHANGE		Nov. 2012 Est	fo	FY 2012-13	May 2013 Est	for	FY 2012-13	DIFFE	REN	CE
TYPE	NO.	DESCRIPTION	GF		FFP	GF		FFP	GF		FFP
Base	60/225	ADULT AND FFS PSYCHIATRIC INPATIENT / SMHS FOR ADULT	\$ -	\$	-	\$ -	\$	-	\$ -	\$	1
Base	60/224	CHILDREN / SMHS FOR CHILDREN	\$ -	\$	-	\$ -	\$	-	\$ -	\$	-
Regular	61	SPECIALTY MENTAL HEALTH SVCS SUPP REIMBURSEMENT	\$ -	\$	-	\$ -	\$	-	\$ -	\$	-
Regular	62	HEALTHY FAMILIES - SED	\$ -	\$	21,215	\$ -	\$	23,950	\$ -	\$	2,735
Regular	63	KATIE A. V. DIANA BONTA	\$ -	\$	-	\$ -	\$	-	\$ -	\$	-
Regular	64	TRANSITION OF HFP - SMH SERVICES	\$ -	\$	-	\$ -	\$	-	\$ -	\$	-
Regular	65	SOLANO COUNTY	\$ -	\$	-	\$ -	\$	-	\$ -	\$	-
Regular	66	OVER ONE-YEAR CLAIMS	\$ -	\$	-	\$ -	\$	-	\$ 	\$	-
Regular	67	SPECIALTY MENTAL HEALTH LAWSUIT	\$ -	\$	-	\$ -	\$	-	\$ 	\$	-
Regular	68	SISKIYOU COUNTY MENTAL HEALTH PLAN OVERPAYMENT	\$ -	\$	-	\$ -	\$	-	\$ 	\$	-
Regular	69	IMD ANCILLARY SERVICES	\$ -	\$	-	\$ -	\$	-	\$ 	\$	-
Regular	70	REIMBURSEMENT IN IMD ANCILLARY SERVICES COSTS	\$ -	\$	-	\$ -	\$	-	\$ 	\$	-
Regular	71	CHART REVIEW	\$ -	\$	-	\$ -	\$	-	\$ 	\$	-
Regular	72	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$ -	\$	(652)	\$ -	\$	(652)	\$ 	\$	-
Regular	204	ELIMINATION OF STATE MAXIMUM RATES	\$ -	\$	-	\$ -	\$	-	\$ -	\$	-
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$ -	\$	1,227	\$ -	\$	1,227	\$ 	\$	-
Other	9	SMH MAA	\$ -	\$		\$ -	\$	-	\$ -	\$	-
Other	10	COUNTY UR & QA ADMIN	\$ -	\$		\$ -	\$	-	\$ -	\$	-
Other	11	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$ -	\$	88	\$ -	\$	88	\$ -	\$	-
Total He	althy Fan	nilies Program	\$ -	\$	21,878	\$ -	\$	24,613	\$ -	\$	2,735

Grand To	otal												
POLICY	CHANGE		Nov	. 2012 Est	for	FY 2012-13	M	lay 2013 Est f	or I	FY 2012-13	DIFFE	REN	CE
TYPE	NO.	DESCRIPTION		GF		FFP		GF		FFP	GF		FFP
Base	60/225	ADULT AND FFS PSYCHIATRIC INPATIENT / SMHS FOR ADULT	\$	-	\$	516,727	\$	-	\$	541,957	\$ -	\$	25,230
Base	60/224	CHILDREN / SMHS FOR CHILDREN	\$	-	\$	699,212	\$	-	\$	809,852	\$ -	\$	110,640
Regular	61	SPECIALTY MENTAL HEALTH SVCS SUPP REIMBURSEMENT	\$	-	\$	64,187	\$	-	\$	-	\$ -	\$	(64,187)
Regular	62	HEALTHY FAMILIES - SED	\$	-	\$	21,215	\$	-	\$	23,950	\$ -	\$	2,735
Regular	63	KATIE A. V. DIANA BONTA	\$	-	\$	9,785	\$	-	\$	9,785	\$ -	\$	-
Regular	64	TRANSITION OF HFP - SMH SERVICES	\$	-	\$	8,297	\$	-	\$	7,931	\$ -	\$	(366)
Regular	65	SOLANO COUNTY	\$	-	\$	2,769	\$	-	\$	2,769	\$ -	\$	-
Regular	66	OVER ONE-YEAR CLAIMS	\$	-	\$	2,000	\$	-	\$	2,000	\$ -	\$	-
Regular	67	SPECIALTY MENTAL HEALTH LAWSUIT	\$	180	\$	190	\$	180	\$	190	\$ -	\$	-
Regular	68	SISKIYOU COUNTY MENTAL HEALTH PLAN OVERPAYMENT	\$	6,217	\$	(6,217)	\$	6,217	\$	(6,217)	\$ -	\$	-
Regular	69	IMD ANCILLARY SERVICES	\$	6,000	\$	(6,000)	\$	6,000	\$	(6,000)	\$ -	\$	-
Regular	70	REIMBURSEMENT IN IMD ANCILLARY SERVICES COSTS	\$	-	\$	-	\$	-	\$	-	\$ -	\$	-
Regular	71	CHART REVIEW	\$	-	\$	(450)	\$	-	\$	(590)	\$ -	\$	(140)
Regular	72	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$	1,151	\$	(27,785)	\$	1,151	\$	(27,785)	\$ -	\$	-
Regular	204	ELIMINATION OF STATE MAXIMUM RATES	\$	-	\$	90,494	\$	-	\$	90,494	\$ -	\$	-
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$	-	\$	126,625	\$	-	\$	126,625	\$ -	\$	-
Other	9	SMH MAA	\$	-	\$	23,282	\$	-	\$	22,905	\$ -	\$	(377)
Other	10	COUNTY UR & QA ADMIN	\$	-	\$	16,333	\$	-	\$	16,333	\$ -	\$	-
Other	11	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$	-	\$	15,821	\$	-	\$	15,821	\$ -	\$	-
Grand To	otal		\$	13,548	\$	1,556,485	\$	13,548	\$	1,630,020	\$ -	\$	73,535

Page 8 Date Last Updated: 5/18/2013

Specialty Mental Health Services Program Children and Adults Service Costs - Cash Comparison: FY 2013-14

Specialty Mental Health Services
Policy Change Supplement

(in thousands)

Children								
POLICY	CHANGE		Nov. 2012 Est f	or FY 2013-14	May 2013 Est f	or FY 2013-14	DIFFER	ENCE
TYPE	NO.	DESCRIPTION	GF	FFP	GF	FFP	GF	FFP
Base	60/225	ADULT AND FFS PSYCHIATRIC INPATIENT / SMHS FOR ADULT	-	36,014	-	-	-	(36,014)
Base	60/224	CHILDREN / SMHS FOR CHILDREN	-	692,605	-	775,685	-	83,080
Regular	61	SPECIALTY MENTAL HEALTH SVCS SUPP REIMBURSEMENT	-	115,789	-	146,100	-	30,311
Regular	62	HEALTHY FAMILIES - SED	-	-	-	-	-	-
Regular	63	KATIE A. V. DIANA BONTA	-	23,161	-	23,161	-	-
Regular	64	TRANSITION OF HFP - SMH SERVICES	-	33,500	-	32,731	-	(769)
Regular	65	SOLANO COUNTY	-	1,911	-	1,911	-	-
Regular	66	OVER ONE-YEAR CLAIMS	-	803	-	1,205	-	402
Regular	67	SPECIALTY MENTAL HEALTH LAWSUIT	-	-	-	-	-	-
Regular	68	SISKIYOU COUNTY MENTAL HEALTH PLAN OVERPAYMENT	-	-	-	-	-	-
Regular	69	IMD ANCILLARY SERVICES	-	-	-	-	-	-
Regular	70	REIMBURSEMENT IN IMD ANCILLARY SERVICES COSTS	-	-	-	-	-	-
Regular	71	CHART REVIEW	-	(119)	-	(153)	-	(34)
Regular	72	INTERIM AND FINAL COST SETTLEMENTS - SMHS	39,261	(55,593)	39,385	(54,399)	124	1,194
Regular	204	ELIMINATION OF STATE MAXIMUM RATES	-	61,940	-	61,940	-	-
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	-	87,884	-	87,884	-	-
Other	9	SMH MAA	-	15,523	-	15,272	-	(251)
Other	10	COUNTY UR & QA ADMIN	-	10,467	-	10,467	-	-
Other	11	INTERIM AND FINAL COST SETTLEMENTS - SMHS	-	14,936	-	14,936	-	-
Total Ch	ildren		39,261	1,038,821	39,385	1,116,739	124	77,918

Adults													
POLICY (CHANGE		No	v. 2012 Est	for I	FY 2013-14	М	ay 2013 Est	for I	FY 2013-14	DIFFE	REN	CE
TYPE	NO.	DESCRIPTION		GF		FFP		GF		FFP	GF		FFP
Base	60/225	ADULT AND FFS PSYCHIATRIC INPATIENT	\$	-	\$	462,042	\$	-	\$	515,510	\$ -	\$	53,468
Base	60/224	CHILDREN / SMHS FOR CHILDREN	\$	-	\$	-	\$	-	\$	-	\$ -	\$	-
Regular	61	SPECIALTY MENTAL HEALTH SVCS SUPP REIMBURSEMENT	\$	-	\$	117,072	\$	-	65	147,719	\$ -	\$	30,647
Regular	62	HEALTHY FAMILIES - SED	\$	-	\$	-	\$	-	65	-	\$ -	\$	-
Regular	63	KATIE A. V. DIANA BONTA	\$	-	\$	-	\$	-	65	-	\$ -	\$	-
Regular	64	TRANSITION OF HFP - SMH SERVICES	\$	-	\$	-	\$	-	\$	-	\$ -	\$	-
Regular	65	SOLANO COUNTY	\$	-	\$	858	\$	-	65	858	\$ -	\$	-
Regular	66	OVER ONE-YEAR CLAIMS	\$	-	\$	1,197	\$	-	\$	1,796	\$ -	\$	599
Regular	67	SPECIALTY MENTAL HEALTH LAWSUIT	\$	-	\$	-	\$	-			\$ -	\$	-
Regular	68	SISKIYOU COUNTY MENTAL HEALTH PLAN OVERPAYMENT	\$	-	\$	-	\$	-	\$	-	\$ -	\$	-
Regular	69	IMD ANCILLARY SERVICES	\$	6,000	\$	(6,000)	\$	6,000	\$	(6,000)	\$ -	\$	-
Regular	70	REIMBURSEMENT IN IMD ANCILLARY SERVICES COSTS	\$	(12,000)	\$	-	\$	(12,000)	\$	-	\$ -	\$	-
Regular	71	CHART REVIEW	\$	-	\$	(331)	\$	-	\$	(427)	\$ -	\$	(96)
Regular	72	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$	-	\$	(42,523)	\$	-	\$	(48,542)	\$ -	\$	(6,019)
Regular	204	ELIMINATION OF STATE MAXIMUM RATES	\$	-	\$	62,544	\$	-	\$	62,544	\$ -	\$	-
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$	-		52,827	\$	-		52,827	\$ -	\$	-
Other	9	SMH MAA	\$	-		9,389	\$	-		9,237	\$ -	\$	(152)
Other	10	COUNTY UR & QA ADMIN	\$	-		6,331	\$	-		6,331	\$ -	\$	-
Other	11	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$	-		9,035	\$	-		9,035	\$ -	\$	-
Total Adı	ults		\$	(6,000)	\$	672,441	\$	(6,000)	\$	750,888	\$ -	\$	78,447

^{*}The Adult and FFS Psychiatric Inpatient estimate includes costs for services provided to children that were not historically reimbursed through the Early and Periodic Screening Diagnosis and Treatment (EPSDT) program. The adult estimate includes the cost of providing Short-Doyle/Medi-Cal inpatient hospital services to children and the FFS Psychiatric Inpatient estimate includes the cost of providing FFS/MC acute psychiatric inpatient hospital services to children.

Page 9

Specialty Mental Health Services Program Children and Adults Service Costs - Cash Comparison: FY 2013-14

Specialty Mental Health Services
Policy Change Supplement

(in thousands)

(III tilloud												
Healthy I	Families I	Program										
POLICY	CHANGE		Nov. 2012 Est	for	FY 2013-14	May 2013 Est	for F	Y 2013-14	_	DIFFE	REN	CE
TYPE	NO.	DESCRIPTION	GF		FFP	GF		FFP	(GF		FFP
Base	60/225	ADULT AND FFS PSYCHIATRIC INPATIENT / SMHS FOR ADULT	\$ -	\$	-				\$	-	\$	-
Base	60/224	CHILDREN / SMHS FOR CHILDREN	\$ -	\$	-				\$	-	\$	-
Regular	61	SPECIALTY MENTAL HEALTH SVCS SUPP REIMBURSEMENT	\$ -	\$	-				\$	-	\$	-
Regular	62	HEALTHY FAMILIES - SED	\$ -	\$	20,417		\$	22,250	\$	-	\$	1,833
Regular	63	KATIE A. V. DIANA BONTA	\$ -	\$	-				\$	-	\$	-
Regular	64	TRANSITION OF HFP - SMH SERVICES	\$ -	\$	-				\$	-	\$	-
Regular	65	SOLANO COUNTY	\$ -	\$	-				\$	-	\$	-
Regular	66	OVER ONE-YEAR CLAIMS	\$ -	\$	-				\$	-	\$	-
Regular	67	SPECIALTY MENTAL HEALTH LAWSUIT	\$ -	\$	-				\$	-	\$	-
Regular	68	SISKIYOU COUNTY MENTAL HEALTH PLAN OVERPAYMENT	\$ -	\$	-				\$	-	\$	-
Regular	69	IMD ANCILLARY SERVICES	\$ -	\$	-				\$	-	\$	-
Regular	70	REIMBURSEMENT IN IMD ANCILLARY SERVICES COSTS	\$ -	\$	-				\$	-	\$	-
Regular	71	CHART REVIEW	\$ -	\$	-				\$	-	\$	-
Regular	72	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$ -	\$	(7,084)		\$	(7,158)	\$	-	\$	(74)
Regular	204	ELIMINATION OF STATE MAXIMUM RATES	\$ -	\$	-				\$	-	\$	-
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$ -	\$	1,015		\$	1,015	\$	-	\$	-
Other	9	SMH MAA	\$ -	\$	-		\$	-	\$	-	\$	-
Other	10	COUNTY UR & QA ADMIN	\$ -	\$	-		\$	-	\$	-	\$	-
Other	11	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$ -	\$	2,670		\$	2,670	\$	-	\$	-
Total Ch	ildren and	d Adults	\$ -	\$	17,018	\$ -	\$	18,777	\$	-	\$	1,759

Grand To	Grand Total													
POLICY	CHANGE		Nov	v. 2012 Est	for	FY 2013-14	M	lay 2013 Est f	or I	FY 2013-14	DIFFERENCE			
TYPE	NO.	DESCRIPTION		GF		FFP		GF		FFP		GF		FFP
Base	60/225	ADULT AND FFS PSYCHIATRIC INPATIENT / SMHS FOR ADULT	\$	-	\$	498,056	\$		\$	515,510	\$	-	\$	17,454
Base	60/224	CHILDREN / SMHS FOR CHILDREN	\$	-	\$	692,605	\$	-	\$	775,685	\$	-	\$	83,080
Regular	61	SPECIALTY MENTAL HEALTH SVCS SUPP REIMBURSEMENT	\$	-	\$	232,861	\$	-	\$	293,819	\$	-	\$	60,958
Regular	62	HEALTHY FAMILIES - SED	\$	-	\$	20,417	\$	-	\$	22,250	\$	-	\$	1,833
Regular	63	KATIE A. V. DIANA BONTA	\$	-	\$	23,161	\$	-	\$	23,161	\$	-	\$	-
Regular	64	TRANSITION OF HFP - SMH SERVICES	\$	-	\$	33,500	\$	-	\$	32,731	\$	-	\$	(769)
Regular	65	SOLANO COUNTY	\$	-	\$	2,769	\$	-	\$	2,769	\$	-	\$	-
Regular	66	OVER ONE-YEAR CLAIMS	\$	-	\$	2,000	\$	-	\$	3,000	\$	-	\$	1,000
Regular	67	SPECIALTY MENTAL HEALTH LAWSUIT	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Regular	68	SISKIYOU COUNTY MENTAL HEALTH PLAN OVERPAYMENT	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
Regular	69	IMD ANCILLARY SERVICES	\$	6,000	\$	(6,000)	\$	6,000	\$	(6,000)	\$	-	\$	-
Regular	70	REIMBURSEMENT IN IMD ANCILLARY SERVICES COSTS	\$	(12,000)	\$	-	\$	(12,000)	\$	-	\$	-	\$	-
Regular	71	CHART REVIEW	\$	-	\$	(450)	\$	-	\$	(580)	\$	-	\$	(130)
Regular	72	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$	39,261	\$	(105,200)	\$	39,385	\$	(110,099)	\$	124	\$	(4,899)
Regular	204	ELIMINATION OF STATE MAXIMUM RATES	\$	-	\$	124,484	\$	-	\$	124,484	\$	-	\$	-
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$	-	\$	141,726	\$	-	\$	141,726	\$	-	\$	-
Other	9	SMH MAA	\$	-	\$	24,912	\$	-	\$	24,509	\$	-	\$	(403)
Other	10	COUNTY UR & QA ADMIN	\$	-	\$	16,798	\$	-	\$	16,798	\$	-	\$	-
Other	11	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$	-	\$	26,641	\$	-	\$	26,641	\$	-	\$	-
Grand To	otal		\$	33,261	\$	1,728,280	\$	33,385	\$	1,886,404	\$	124	\$	158,124

^{*}The Children and Adults table captures the estimate contained in those policy changes that were not split into children and adults, such as the Healthy Families - SED policy change and other administrative policy changes.

Date Last Updated: 4/15/2013

May 2013 Estimate	Fiscal Year 2012-13: Appropriation, November 2012, May 2013 Policy Change Supplement								
(in thousands)				,				, 5- 5	
	TI		GF	FF	P	LR	RF	CF	(1)
Fiscal Year 2012-13 Appropriation									
Forecast of Approved Claims	\$1,279,831			\$639,915		\$639,916		\$0	
Less County Baseline	\$0			\$0		(\$68,840)		\$68,840	
Less 10% County Share of Cost Above Baseline	\$ 0			\$0		(\$30,854)		\$30,854	
Subtotal Approved Claims	· ·	\$1,279,831		,	\$639,915	,	\$540,222		\$99,694
Katie A. Lawsuit		\$53,502			\$26,751		\$26,751		\$0
Healthy Families Program Transition to Medi-Cal		\$49,304			\$32,047		\$17,257		\$0
Total	=	\$1,382,637	\$0	-	\$698,713	-	\$584,230	_	\$99,694
Fiscal Year 2012-13 November 2012 Estimate									
Policy Change 60 - Children		\$1,319,942			\$663,723		\$553,985		\$102,234
Policy Change 63 - Katie A. v. Bonta		\$26,751			\$13,376		\$13,375		\$0
Policy Change 64 - Transition of HFP - SMHS		\$17,447			\$11,341		\$6,106		\$0
Total	- -	\$1,364,140	\$0	- -	\$688,440	-	\$573,466	- -	\$102,234
Fiscal Year 2012-13 May 2013 Estimate									
Policy Change 224 - SMHS for Children	\$1,473,670			\$741,117		\$628,989		\$103,564	
Less FFS Inpatient	(\$66,820)			(\$33,877)		(\$32,943)		\$0	
Less Rates Elimination Adjustment ⁽²⁾	(\$39,413)			(\$19,982)		(\$19,431)		\$0	
Policy Change 224 - Subtotal	(ψου, 110)	\$1,367,437		(Ψ10,002)	\$687,258	(ψ10,101)	\$576,615		\$103,564
Policy Change 63 - Katie A. v. Bonta		\$26,751			\$13,376		\$13,375		\$0
Policy Change 64 - Transition of HFP - SMHS		\$17,185			\$11,170		\$6,015		\$0
Total	-	\$1,411,373	\$0	-	\$711,804	-	\$596,005	-	\$103,564
	=		•	=	·	=	· · · · · · · · · · · · · · · · · · ·	-	· · · · · · · · · · · · · · · · · · ·

Children Service Costs Accrual Comparison

Specialty Mental Health Services

Department of Health Care Services

Date Last Updated: 05/02/2013 Page 11

⁽¹⁾ County Funds (CF) are considered the same as other Local Realignment Funds (LRF) and are shown here only to provide a reference to the prior local funds used for children's services.

⁽²⁾ The rates elimination adjustment estimates the affect of eliminating the statewide maximum allowance rates as described in regular PC 204. The adjustment is calculated by comparing the approved dollars by service type and county to the approved units multiplied by the statewide maximum allowance rate that would have been in affect in Fiscal Year 12-13 for each service type. The SMA adjustment is equal to the approved dollars in excess of the approved units multiplied by the statewide maximum allowance rate by service type and county.

Department of Health Care Services May 2013 Estimate	Children Service Fisca	·	Specialty Mental Health Services Policy Change Supplement			
(in thousands)						
	TF	GF	FFP	LRF	CF ⁽¹⁾	
Fiscal Year 2012-13 November 2012 Estimate						
Policy Change 60 - Children	\$1,319,942		\$663,723	\$553,985	\$102,234	
Policy Change 63 - Katie A. v. Bonta	\$26,751		\$13,376			
Policy Change 64 - Transition of HFP - SMHS	\$17,447		\$11,341	· ·		
Total	\$1,364,140	\$0	· · · · · · · · · · · · · · · · · · ·	+		
	<u>Ψ1,001,110</u>	Ψ.		= + + + + + + + + + + + + + + + + + + +		
Fiscal Year 2012-13 May 2013 Estimate						
Policy Change 224 - SMHS for Children	\$1,473,670		\$741,117	\$628,989	\$103,564	
Less FFS Inpatient	(\$66,820)		(\$33,877)	(\$32,943)	\$0	
Less Rates Elimination Adjustment ⁽²⁾	(\$39,413)		(\$19,982)	(\$19,431)	\$0	
Policy Change 224 - Subtotal	\$1,367,437		\$687,258			
Policy Change 63 - Katie A. v. Bonta	\$26,751		\$13,376	\$13,375	\$0	
Policy Change 64 - Transition of HFP - SMHS	\$17,185		\$11,170	\$6,015	\$0	
Total	\$1,411,373	\$0	\$711,804	\$596,005	\$103,564	
Difference (May Estimate Less November Estimate)						
Policy Change 224 - SMHS for Children	\$47,495		\$23,535	· ·	· ·	
Policy Change 63 - Katie A. v. Bonta	\$0		\$0		\$0	
Policy Change 64 - Transition of HFP - SMHS	(\$262)		(\$170)	(+- /	\$0	
	\$47,233		\$23,365	\$22,538	\$1,330	

⁽¹⁾ County Funds (CF) are considered the same as other Local Realignment Funds (LRF) and are shown here only to provide a reference to the prior local funds used for adult services.

⁽²⁾ The rates elimination adjustment estimates the affect of eliminating the statewide maximum allowance rates as described in regular PC 204. The adjustment is calculated by comparing the approved dollars by service type and county to the approved units multiplied by the statewide maximum allowance rate that would have been in affect in Fiscal Year 12-13 for each service type. The SMA adjustment is equal to the approved dollars in excess of the approved units multiplied by the statewide maximum allowance rate by service type and county. The adjustment for FY 2013-14 is the FY 2012-13 adjustment multiplied by the percentage of the growth in costs in FY 2013-14 compared to FY 2012-13.

May 2013 Estimate		Fisca	l Year 20	Policy Change Supplement					
(in thousands)									
	TF		GF	FFP		LR	F	CI	F ⁽¹⁾
Fiscal Year 2013-14 November 2012 Estimate									
				_			.		
Policy Change 60 - Children	\$1,	,380,800			694,552		\$579,336		\$106,912
Policy Change 63 - Katie A. v. Bonta		\$53,502			\$26,751		\$26,751		\$0
Policy Change 64 - Transition of HFP - SMHS		\$64,048			\$41,631	_	\$22,417		\$0
Total	<u>\$1</u>	,498,350	\$0	\$	5762,934	=	\$628,504		\$106,912
Fiscal Year 2013-14 May 2013 Estimate									
Policy Change 224 - SMHS for Children	\$1,550,977			\$779,998		\$661,861		\$109,118	
Less FFS Inpatient	(\$71,084)			(\$36,038)		(\$35,046)		\$0	
Less Rates Elimination Adjustment ⁽²⁾	(\$41,459)			(\$20,842)		(\$20,617)		\$0	
Policy Change 224 - Subtotal	\$1,	438,434		\$	723,118		\$606,198		\$109,118
Policy Change 63 - Katie A. v. Bonta		\$53,502			\$26,751		\$26,751		\$0
Policy Change 64 - Transition of HFP - SMHS		\$63,901			\$41,536		\$22,365		\$0
Total	\$1,	,555,837	\$0		791,405	_	\$655,314]	\$109,118
Difference (May Estimate Less November Estimate)									
Policy Change 224 - SMHS for Children									
Less FFS Inpatient									
Less Rates Elimination Adjustment ⁽²⁾									
Policy Change 224 - Subtotal		\$57,634			\$28,566		\$26,862		\$2,206
Policy Change 63 - Katie A. v. Bonta		\$07,034			\$20,300 \$0		\$0		Ψ2,200 \$(
Policy Change 64 - Transition of HFP - SMHS		(\$147)			(\$96)		(\$51)		\$0
Total Difference		\$57,487			\$28,470	_	\$26,811	·	\$2,206

Children Service Costs Accrual Comparison

Specialty Mental Health Services

Department of Health Care Services

Date Last Updated: 05/02/2013 Page 13

⁽¹⁾ County Funds (CF) are considered the same as other Local Realignment Funds (LRF) and are shown here only to provide a reference to the prior local funds used for adult services.

⁽²⁾ The rates elimination adjustment estimates the affect of eliminating the statewide maximum allowance rates as described in regular PC 204. The adjustment is calculated by comparing the approved dollars by service type and county to the approved units multiplied by the statewide maximum allowance rate that would have been in affect in Fiscal Year 12-13 for each service type. The SMA adjustment is equal to the approved dollars in excess of the approved units multiplied by the statewide maximum allowance rate by service type and county. The adjustment for FY 2013-14 is the FY 2012-13 adjustment multiplied by the percentage of the growth in costs in FY 2013-14 compared to FY 2012-13.

Department of Health Care Services	Children Service Costs Accrual Comparison					Specialty Mental Health Services				
May 2013 Estimate		FY 2012	-13 vs. FY	[′] 2013-14		Policy Change Supplement				
(in thousands)										
	TI	F	GF	FF	P	LRF		CF	- (1)	
Fiscal Year 2012-13 May 2013 Estimate										
Policy Change 224 - SMHS for Children	¢1 472 670			\$741,117		\$628,989		\$103,564		
Less FFS Inpatient	\$1,473,670 (\$66,820)			(\$33,877)		(\$32,943)		\$103,364		
· ·										
Less Rates Elimination Adjustment ⁽²⁾	(\$39,413)	#4 007 407		(\$19,982)	ФC07 ОГО	(\$19,431)	Ф Г 70 04 Г	\$0	#400 FC4	
Policy Change 224 - Subtotal		\$1,367,437			\$687,258		\$576,615		\$103,564	
Policy Change 63 - Katie A. v. Bonta		\$26,751			\$13,376		\$13,375		\$0 \$0	
Policy Change 64 - Transition of HFP - SMHS Total	-	\$17,185		_	\$11,170	-	\$6,015	-	\$0	
Total	-	\$1,411,373	\$0	=	\$711,804	=	\$596,005	=	\$103,564	
Fiscal Year 2013-14 May 2013 Estimate										
Policy Change 224 - SMHS for Children	\$1,550,977			\$779,998		\$661,861		\$109,118		
Less FFS Inpatient	(\$71,084)			(\$36,038)		(\$35,046)		\$0		
Less Rates Elimination Adjustment ⁽²⁾	(\$41,459)			(\$20,842)		(\$20,617)		\$0		
Policy Change 224 - Subtotal	7	\$1,438,434		7	\$723,118		\$606,198		\$109,118	
Policy Change 63 - Katie A. v. Bonta		\$53,502			\$26,751		\$26,751		\$0	
Policy Change 64 - Transition of HFP - SMHS		\$63,901			\$41,536		\$22,365		\$0	
Total		\$1,555,837	\$0	_	\$791,405	-	\$655,314] -	\$109,118	
Difference (May Estimate Less November Estimate)										
Policy Change 224 - SMHS for Children	\$77,307			\$38,881		\$32,872		\$5,554		
Less FFS Inpatient	(\$4,264)			(\$2,161)		(\$2,103)		\$0		
Less Rates Elimination Adjustment ⁽²⁾	(\$2,046)			(\$860)		(\$1,186)		\$0		
Policy Change 224 - Subtotal		\$70,997			\$35,860		\$29,583		\$5,554	
Policy Change 63 - Katie A. v. Bonta		\$26,751			\$13,375		\$13,376		\$0	
Policy Change 64 - Transition of HFP - SMHS		\$46,716		_	\$30,365	-	\$16,351		\$0	
Total Difference		\$144,464	\$0		\$79,600		\$59,310		\$5,554	

⁽¹⁾ County Funds (CF) are considered the same as other Local Realignment Funds (LRF) and are shown here only to provide a reference to the prior local funds used for adult services.

⁽²⁾ The rates elimination adjustment estimates the affect of eliminating the statewide maximum allowance rates as described in regular PC 204. The adjustment is calculated by comparing the approved dollars by service type and county to the approved units multiplied by the statewide maximum allowance rate that would have been in affect in Fiscal Year 12-13 for each service type. The SMA adjustment is equal to the approved dollars in excess of the approved units multiplied by the statewide maximum allowance rate by service type and county. The adjustment for FY 2013-14 is the FY 2012-13 adjustment multiplied by the percentage of the growth in costs in FY 2013-14 compared to FY 2012-13.

	Т	F	GF	FFP LRF		RF	CF	(2)	
FISCAL YEAR 2012-13 APPROPRIATION								_	
Mental Health Managed Care Program									
Mental Health Managed Care - Psychiatric Inpatient Services	\$447,642			\$226,092		\$221,550			
Mental Health Managed Care - Mental Health Professional Services	\$71,947			\$36,121		\$35,826			
TBS Administration	\$912			\$456		\$456			
ВССТР	\$60			\$0		\$60			
FY 2009-10 Budget Act Reduction	(\$128,000)			(\$64,000)		(\$64,000)			
Subtotal ⁽¹⁾	(*	\$392,561		(\$198,669	(\$193,892		
Other Short-Doyle/Medi-Cal Reimbursements		ψ002,001			Ψ130,003		Ψ100,002		
Total Direct Service Forecast	\$788.084			\$394,042				\$394,042	
Less Mental Health Managed Care Professional Services Reimbursement	(\$36,121)			(\$36,121)				\$0	
Less Rates Elimination Adjustment ⁽³⁾	\$0			(\$66,121)				Ψ0	
Subtotal	\$0	¢754 062			\$357,921				¢204.042
FY 2012-13 Appropriation	-	\$751,963 \$1,144,524	\$0	-	\$556,590			-	\$394,042 \$587,934
NOVEMBER 2012 ESTIMATE FOR FISCAL YEAR 2012-13		\$1,144,524	\$0		\$556,590				\$387,934
Mental Health Managed Care Program									
_	¢404.000			COO 454		COO 454		CO	
Psychiatric Inpatient Services	\$184,908			\$92,454		\$92,454		\$0 \$0	
Mental Health Professional Services	\$0			\$0 \$0		\$0 \$0		\$0 \$0	
TBS Administration BCCTP	\$0			\$0 \$0		\$0 \$0		\$0 \$0	
	\$0			\$0		\$0		\$0	
FY 2009-10 Budget Act Reduction	\$0	* • • • • • • • • • • • • • • • • • • •		\$0	000 1=1	\$0	000 151	\$0	•
Subtotal		\$184,908			\$92,454		\$92,454		\$0
Other Short-Doyle Medi-Cal Reimbursements	4-04-00			****		•		****	
Total Direct Service Forecast	\$791,589			\$395,795		\$0		\$395,795	
Less Mental Health Managed Care Professional Services Reimbursement	\$0			\$0		\$0		\$0	
Less Rates Elimination Adjustment ⁽³⁾	\$0								
Subtotal		\$791,589			\$395,795		\$0		\$395,795
November 2012 Estimate for FY 2012-13 ⁽⁴⁾		\$976,497	\$0		\$488,249		\$92,454		\$395,795
MAY 2013 ESTIMATE FOR FISCAL YEAR 2012-13									
Mental Health Managed Care Program									
Psychiatric Inpatient Services									
PC 224 - FFS Inpatient - Children	\$66,820			\$33,604		\$33,216		\$0	
PC 225 - FFS Inpatient - Adults	\$143,624			\$71,812		\$71,812		\$0	
Psychiatric Inpatient Services - Subtotal	\$210,444			\$105,416		\$105,028		\$0	
Mental Health Professional Services	\$0			\$0		\$0		\$0	
TBS Administration	\$0			\$0		\$0		\$0	
BCCTP	\$0			\$0		\$0		\$0	
FY 2009-10 Budget Act Reductions	\$0			\$0		\$0		\$0	
Subtotal		\$210,444		* -	\$105,416	, ,	\$105,028	, ,	\$0
Other Short-Doyle Medi-Cal Reimbursements		Ψ=,			ψ.00,		ψ.00,020		Ψů
Total Direct Service Forecast	\$860,332			\$430,166		\$0		\$430,166	
Less Mental Health Managed Care Professional Services Reimbursement	\$0			\$ 100,100		\$0		\$0	
Less Rates Elimination Adjustment ⁽⁵⁾				(\$19,324)		ΨΟ			
•	(\$38,648)	#004 004		(\$19,324)	£440.040		* 0	(\$19,324)	#440 040
Subtotal	-	\$821,684	Φ.		\$410,842		\$0		\$410,842
May 2012 Estimate for FY 2012-13		\$1,032,128	\$0		\$516,258		\$105,028		\$410,842

Notes for Prior Page

- (1) These subtotals do not include the estimated cost to Solano County as a result of carving out specialty mental health services from Solano Partnership Healthcare, which is included in Regular PC 65. The TF estimate for Solano County is \$5,538, the FFP estimate is \$2,769 and the LRF estimate is \$2,769. As a result these subtotals differ from those in the Fiscal Year 2012-13 May Revision by the estimated costs to Solano County.
- (2) County Funds (CF) are considered the same as other Local Realignment Funds (LRF) and are shown here only to provide a reference to prior local funds used for adult services.
- (3) Claims for reimbursement were limited to statewide maximum allowance (SMA) rates through service Fiscal Year 2011-12. Since the November 2012 Estimate was based upon claims through service Fiscal Year 2011-12, there is no SMA adjustment.
- (4) A decline in LRF is due to a change in the methodology used to estimate the Psychiatric Inpatient and Mental Health Professional Services costs. The methodology changed from one that used beneficiary counts to one that uses claims data. This does not reflect a decline in the counties' obligation to provide specialty mental health services.
- (5) The rates elimination adjustment estimates the affect of eliminating the SMA rates as described in regular PC 204. The adjustment is calculated by comparing the cost per unit of service, by service type, in the quarters before and after July 1, 2012. After adjusting for inflation, the increased cost per unit of service in the quarter after July 1, 2012, is attributed to the elimination of the maximum rates. This increased cost multiplied by the actual approved units of service in FY 2012-13 utilized by the forecast model is the adjustment for FY 2012-13.

	Т	F	GF	FF	P	LR	F	CF ⁽	1)
NOVEMBER 2012 ESTIMATE FOR FISCAL YEAR 2012-13									
Mental Health Managed Care Program									
Psychiatric Inpatient Services	\$184,908			\$92,454		\$92,454		\$0	
Subtotal		\$184,908			\$92,454		\$92,454		\$0
Other Short-Doyle Medi-Cal Reimbursements									
Total Direct Service Forecast	\$791,589			\$395,795		\$0		\$395,795	
Less Rates Elimination Adjustment ⁽²⁾	\$0								
Subtotal		\$791,589			\$395,795		\$0		\$395,795
November 2012 Estimate for FY 2012-13		\$976,497	\$0		\$488,249		\$92,454		\$395,795
MAY 2013 ESTIMATE FOR FISCAL YEAR 2012-13									
Mental Health Managed Care Program									
Psychiatric Inpatient Services									
PC 224 - FFS Inpatient - Children	\$66,820			\$33,604		\$33,216		\$0	
PC 225 - FFS Inpatient - Adult	\$143,624			\$71,812		\$71,812		\$0	
Psychiatric Inpatient Services - Subtotal	\$210,444			\$105,416		\$105,028		\$0	
Subtotal		\$210,444			\$105,416		\$105,028		\$0
Other Short-Doyle Medi-Cal Reimbursements									
Total Direct Service Forecast	\$860,332			\$430,166		\$0		\$430,166	
Less Rates Elimination Adjustment ⁽³⁾	(\$38,648)			(\$19,324)		\$0		(\$19,324)	
Subtotal		\$821,684		_	\$410,842	_	\$0	_	\$410,842
May 2012 Estimate for FY 2012-13		\$1,032,128	\$0		\$516,258		\$105,028		\$410,842
DIFFERENCE (MAY ESTIMATE LESS NOVEMBER ESTIMATE)									
Mental Health Managed Care Program									
Psychiatric Inpatient Services	\$25,536			\$12,962		\$12,574		\$0	
Subtotal		\$25,536			\$12,962		\$12,574		\$0
Other Short-Doyle Medi-Cal Reimbursements									
Total Direct Service Forecast	\$68,743			\$34,372		\$0		\$34,372	
Less Rates Elimination Adjustment ⁽³⁾	(\$38,648)			(\$19,324)		\$0		(\$19,324)	
Subtotal		\$30,095		·	\$15,048		\$0		\$15,048
November 2012 Estimate for FY 2012-13		\$55,631	\$0	•	\$28,010	_	\$12,574	· _	\$15,048

⁽¹⁾ County Funds (CF) are considered the same as other Local Realignment Funds (LRF) and are shown here only to provide a reference to prior local funds used for adult services.

⁽²⁾ Claims for reimbursement were limited to statewide maximum allowance (SMA) rates through service Fiscal Year 2011-12. Since the November 2012 Estimate was based upon claims through service Fiscal Year 2011-12, there is no SMA adjustment.

⁽³⁾ The rates elimination adjustment estimates the affect of eliminating the SMA rates as described in regular PC 204. The adjustment is calculated by comparing the cost per unit of service, by service type, in the quarters before and after July 1, 2012. After adjusting for inflation, the increased cost per unit of service in the quarter after July 1, 2012, is attributed to the elimination of the maximum rates. This increased cost multiplied by the actual approved units of service in FY 2012-13 utilized by the forecast model is the adjustment for FY 2012-13.

May 2013 Estimate	(in thousands) Policy Change Supplementary								
That Lotto Louriato		,	,			T			
	TI	F	GF	FF	Р	LF	RF	CF	(1)
NOVEMBER 2012 ESTIMATE FOR FISCAL YEAR 2013-14									
Mental Health Managed Care Program									
Psychiatric Inpatient Services	\$190,271			\$95,136		\$95,136		\$0	
Subtotal		\$190,271			\$95,136		\$95,136		\$0
Other Short-Doyle Medi-Cal Reimbursements									
Total Direct Service Forecast	\$795,937			\$397,969		\$0		\$397,969	
Less Rates Elimination Adjustment ⁽²⁾	\$0								
Subtotal		\$795,937			\$397,969		\$0		\$397,969
November 2012 Estimate for FY 2012-13	_	\$986,208	\$0		\$493,104		\$95,136		\$397,969
MAY 2013 ESTIMATE FOR FISCAL YEAR 2013-14									
Mental Health Managed Care Program									
Psychiatric Inpatient Services									
PC 224 - FFS Inpatient - Children	\$71,084			\$35,749		\$35,335		\$0	
PC 225 - FFS Inpatient - Adults	\$150,378			\$75,189		\$75,189		\$0	
Psychiatric Inpatient Services - Subtotal	\$221,462			\$110,938		\$110,524		\$0	
Subtotal		\$221,462			\$110,938		\$110,524		\$0
Other Short-Doyle Medi-Cal Reimbursements									
Total Direct Service Forecast	\$878,142			\$439,071		\$0		\$439,071	
Less Rates Elimination Adjustment ⁽³⁾	(\$39,448)			(\$19,724)		\$0		(\$19,724)	
Subtotal		\$838,694		,	\$419,347		\$0		\$419,347
Total Difference	_	\$1,060,156	\$0	-	\$530,285	•	\$110,524	_	\$419,347
DIFFERENCE (MAY ESTIMATE LESS NOVEMBER ESTIMATE)									
Mental Health Managed Care Program									
Psychiatric Inpatient Services	\$31,191			\$15,803		\$15,389		\$0	
Subtotal		\$31,191			\$15,803		\$15,389		\$0
Other Short-Doyle Medi-Cal Reimbursements									
Total Direct Service Forecast	\$82,205			\$41,103		\$0		\$41,103	
Less Rates Elimination Adjustment ⁽³⁾	(\$39,448)			(\$19,724)		\$0		(\$19,724)	
Subtotal	,	\$42,757		, , ,	\$21,379		\$0		\$21,379
Total Difference	_	\$73,948	\$0	·-	\$37,181	·	\$15,389	1 -	\$21,379

Adult Service Costs Accrual Comparison - Fiscal Year 2013-14

Department of Health Care Services

Specialty Mental Health Services

⁽¹⁾ County Funds (CF) are considered the same as other Local Realignment Funds (LRF) and are shown here only to provide a reference to prior local funds used for adult services.

⁽²⁾ Claims for reimbursement were limited to statewide maximum allowance (SMA) rates through service Fiscal Year 2011-12. Since the November 2012 Estimate was based upon claims through service Fiscal Year 2011-12, there is no SMA adjustment.

⁽³⁾ The rates elimination adjustment estimates the affect of eliminating the SMA rates as described in regular PC 204. The adjustment is calculated by comparing the cost per unit of service, by service type, in the quarters before and after July 1, 2012. After adjusting for inflation, the increased cost per unit of service in the quarter after July 1, 2012, is attributed to the elimination of the maximum rates. This increased cost multiplied by the actual approved units of service in FY 2012-13 utilized by the forecast model is the adjustment for FY 2012-13. The adjustment for FY 2013-14 compared to FY 2012-13.

	Т	F	GF	FF	Р	LRF		CF	(1)
MAY 2013 ESTIMATE FOR FISCAL YEAR 2012-13									
Mental Health Managed Care Program									
Psychiatric Inpatient Services									
PC 224 - FFS Inpatient - Children	\$66,820			\$33,604		\$33,216		\$0	
PC 225 - FFS Inpatient - Adults	\$143,624			\$71,812		\$71,812		\$0 \$0	
Psychiatric Inpatient Services - Subtotal	\$210,444			\$105,416		\$105,028		\$0	
Subtotal		\$210,444			\$105,416		\$105,028		\$0
Other Short-Doyle Medi-Cal Reimbursements									
Total Direct Service Forecast	\$860,332			\$430,166		\$0		\$430,166	
Less Rates Elimination Adjustment ⁽³⁾	(\$38,648)			(\$19,324)		\$0		(\$19,324)	ļ
Subtotal	,	\$821,684			\$410,842		\$0		\$410,842
May 2012 Estimate for FY 2012-13	-	\$1,032,128	\$0	-	\$516,258	-	\$105,028	-	\$410,842
MAY 2013 ESTIMATE FOR FISCAL YEAR 2013-14									
Mental Health Managed Care Program									
Psychiatric Inpatient Services									
PC 224 - FFS Inpatient - Children	\$71,084			\$35,749		\$35,335		\$0	
PC 225 - FFS Inpatient - Adults	\$150,378			\$75,189		\$75,189		\$0	
Psychiatric Inpatient Services - Subtotal	\$221,462			\$110,938		\$110,524		\$0	
Subtotal		\$221,462			\$110,938		\$110,524		\$0
Other Short-Doyle Medi-Cal Reimbursements									
Total Direct Service Forecast	\$878,142			\$439,071		\$0		\$439,071	
Less Rates Elimination Adjustment ⁽³⁾	(\$39,448)			(\$19,724)		\$0		(\$19,724)	
Subtotal	,	\$838,694			\$419,347		\$0		\$419,347
Total Difference	-	\$1,060,156	\$0	-	\$530,285	-	\$110,524	-	\$419,347
DIFFERENCE (MAY ESTIMATE LESS NOVEMBER ESTIMATE)									
Mental Health Managed Care Program									
Psychiatric Inpatient Services	\$11,018			\$5,522		\$5,496		\$0	
Subtotal		\$11,018			\$5,522		\$5,496		\$0
Other Short-Doyle Medi-Cal Reimbursements									
Total Direct Service Forecast	\$17,810			\$8,905		\$0		\$8,905	
Less Rates Elimination Adjustment ⁽³⁾	(\$800)			(\$400)				(\$400)	
Subtotal	(+200)	\$17,010		(+ 30)	\$8,505		\$0	(+)	\$8,505
Total Difference	-	\$28,028	\$0	-	\$14,027	-	\$5,496	=	\$8,505

- (1) County Funds (CF) are considered the same as other Local Realignment Funds (LRF) and are shown here only to provide a reference to prior local funds used for adult services.
- (2) Claims for reimbursement were limited to statewide maximum allowance (SMA) rates through service Fiscal Year 2011-12. Since the November 2012 Estimate was based upon claims through service Fiscal Year 2011-12, there is no SMA adjustment.
- (3) The rates elimination adjustment estimates the affect of eliminating the state maximum rates as described in regular PC 204. The adjustment is calculated by comparing the cost per unit of service, by service type, in the quarters before and after July 1, 2012. After adjusting for inflation, the increased cost per unit of service in the quarter after July 1, 2012, is attributed to the elimination of the maximum rates. This increased cost multiplied by the actual approved units of service in FY 2012-13 utilized by the forecast model is the adjustment for FY 2012-13. The adjustment for FY 2013-14 is the FY 2012-13 adjustment multiplied by the percentage of the growth in costs in FY 2013-14 compared to FY 2012-13.

CHILDREN'S TABLE OF APPROVED CLAIM COSTS AND UNDUPLICATED CLIENTS COUNTS 2013-14 GOVERNOR'S BUDGET FORECASTS BY SERVICE FISCAL YEAR (ACCRUAL) STATE FISCAL YEARS 1998-99 THROUGH 2013-14 DATA AS OF 3/31/2013

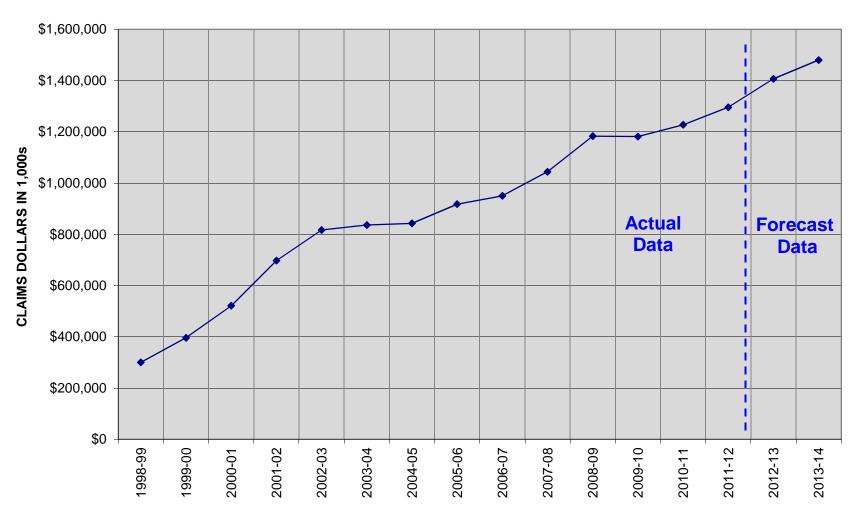
				Unduplicated				Trend in Medi-Cal	
		Approved	Percentage	Children	Percent			Children	
		Claims ^(1&3)	Change in	Receiving	Growth in	Cost Per	Percent Growth in	Enrollment	All Medi-Cal
	Fiscal Year	(In 1,000s)	Claim Costs	SMHS	Clients	Client	Cost Per Client	Growth	Children ⁽²⁾
	1998-99	\$299,917		121,410		\$2,470			
Actual	1999-00	\$395,934	32.01%	129,950	7.03%	\$3,047	23.34%		
Actual	2000-01	\$521,107	31.61%	140,404	8.04%	\$3,711	21.81%		
Actual	2001-02	\$697,155	33.78%	157,314	12.04%	\$4,432	19.40%		
Actual	2002-03	\$816,707	17.15%	173,201	10.10%	\$4,715	6.40%		
Actual	2003-04	\$836,210	2.39%	183,031	5.68%	\$4,569	-3.11%		
Actual	2004-05	\$842,542	0.76%	185,770	1.50%	\$4,535	-0.73%		
Actual	2005-06	\$917,545	8.90%	187,437	0.90%	\$4,895	7.93%		3,467,311
Actual	2006-07	\$949,907	3.53%	184,095	-1.78%	\$5,160	5.41%	-0.91%	3,435,906
Actual	2007-08	\$1,044,068	9.91%	192,825	4.74%	\$5,415	4.94%	1.73%	3,495,318
Actual	2008-09	\$1,182,903	13.30%	207,494	7.61%	\$5,701	5.29%	3.89%	3,631,457
Actual	2009-10	\$1,181,292	-0.14%	211,185	1.78%	\$5,594	-1.88%	6.05%	3,851,248
Actual	2010-11	\$1,227,300	3.89%	217,078	2.79%	\$5,654	1.07%	3.36%	3,980,825
Forecast	2011-12	\$1,295,542	5.56%	230,484	6.18%	\$5,621	-0.58%	1.10%	4,024,798
Forecast	2012-13	\$1,406,850	8.59%	258,489	12.15%	\$5,443	-3.17%		
Forecast	2013-14	\$1,479,893	5.19%	270,897	4.80%	\$5,463	0.37%		

⁽¹⁾ Actual Approved Claims SD/MC Data for Specialty Mental Health as of March 31, 2013.

⁽²⁾ Medi-Cal enrollment data based on average of 12 months of actual monthly enrollment data for each year (years prior to 2005-06 readily not available).

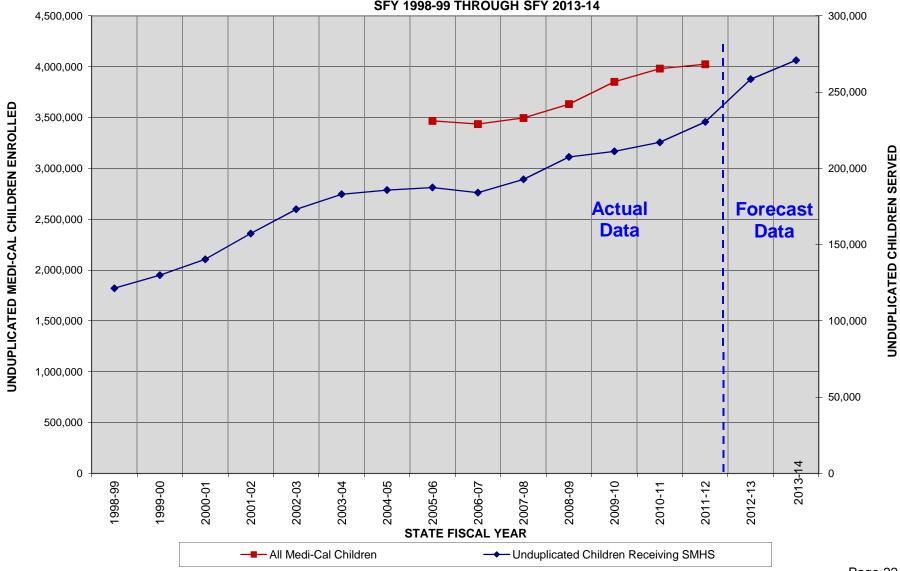
⁽³⁾ Beginning with the May 2013 Estimate, all children's services (except FFS/MC inpatient services) are included in this table of approved claims for FY 2008-09 and

CHILDREN'S APPROVED CLAIMS AND CLAIMS FORECAST SFY 1998-99 THROUGH SFY 2013-14



STATE FISCAL YEAR

UNDUPLICATED CLIENTS AND CLIENT FORECASTS All Medi-Cal Children Compared to Children Receiving Specialty Mental Health Services SFY 1998-99 THROUGH SFY 2013-14

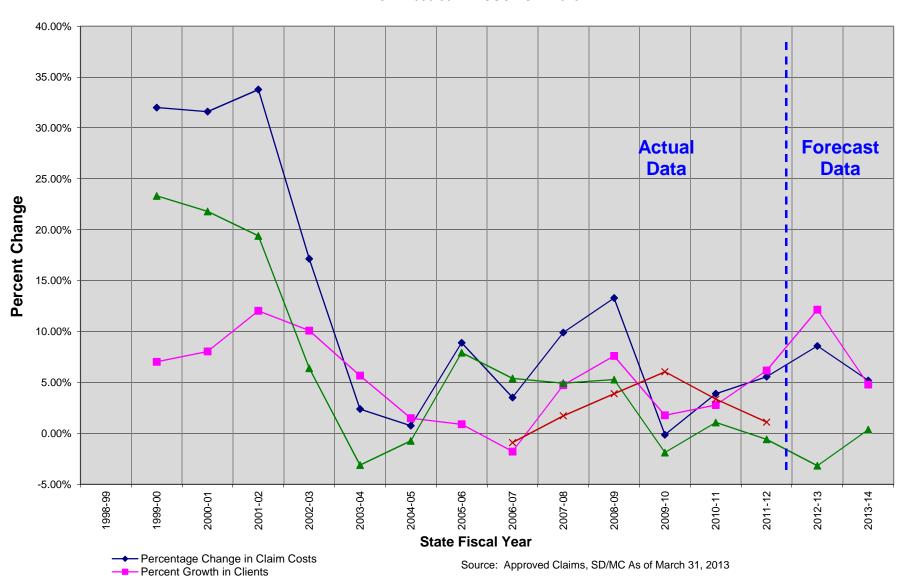


Source: Approved Claims, SD/MC Specialty Mental Health Services As of March 31, 2013

Percent Growth in Cost Per Client

Trend in Medi-Cal Children Enrollment Growth

PERCENT CHANGE IN CHILDREN'S COSTS AND CLIENTS SFY 1998-99 THROUGH SFY 2013-14



Children's Services Approved Claims Data Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts By Service FY 2005-06 through FY 2011-12* Actual and SFY 2012-13 through 2013-14 Forecast *Actual data as of 3/31/2013

	Psy	chiatric Health	Facility Ser	rvices - SMA	A ¹ \$612.47
	Number of	Number of	Days Per	Cost Per	
FY	Clients	Days	Client	Day	Approved Amount
2005-06	287	6,038	21	\$466.97	\$2,819,563
2006-07	281	5,812	21	\$473.38	\$2,751,264
2007-08	454	7,112	16	\$498.51	\$3,545,425
2008-09	561	7,296	13	\$516.52	\$3,768,537
2009-10	588	7,274	12	\$514.59	\$3,743,149
2010-11	602	8,586	14	\$547.36	\$4,699,605
2011-12	620	8,167	13	\$567.29	\$4,633,065
2012-13	661	8,929	14	\$585.79	\$5,230,562
2013-14	709	9,263	13	\$599.50	\$5,553,170
Change	7.26%	3.74%	-3.28%	2.34%	6.17%

,	Adult Crisis Residential Services - SMA ¹ \$345.38									
Number of		Days Per								
Clients	Number of Days	Client	Cost Per Day	Approved Amount						
180	2,898	16	\$261.50	\$757,827						
178	2,592	15	\$282.87	\$733,189						
184	3,044	17	\$281.77	\$857,723						
178	2,924	16	\$284.42	\$831,647						
205	3,111	15	\$276.50	\$860,182						
204	3,190	16	\$285.73	\$911,478						
232	3,062	13	\$291.91	\$893,819						
238	3,175	13	\$308.86	\$980,626						
240	3,211	13	\$312.99	\$1,004,999						
0.84%	1.13%	0.29%	1.34%	2.49%						

		Adult Residential Services - SMA ¹ \$168.46					
FY	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount		
2005-06	136	10,671	78	\$137.50	\$1,467,222		
2006-07	129	13,609	105	\$141.35	\$1,923,674		
2007-08	122	11,942	98	\$147.67	\$1,763,463		
2008-09	127	12,934	102	\$142.76	\$1,846,438		
2009-10	130	12,081	93	\$145.39	\$1,756,485		
2010-11	115	10,519	91	\$155.10	\$1,631,533		
2011-12	95	7,235	76	\$157.61	\$1,140,333		
2012-13	96	6,265	65	\$163.53	\$1,024,537		
2013-14	89	5,033	57	\$172.09	\$866,119		
Change	-7.29%	-19.66%	-13.35%	5.23%	-15.46%		

Crisis Stabilization Services - SMA ¹ \$94.54							
Number of	Number of	Hours Per					
Clients	Hours	Client	Cost Per Hour	Approved Amount			
4,617	67,633	15	\$82.62	\$5,587,555			
4,396	64,832	15	\$86.49	\$5,607,091			
4,892	70,547	14	\$90.48	\$6,383,354			
5,243	71,264	14	\$88.20	\$6,285,198			
5,799	76,811	13	\$92.01	\$7,067,162			
6,461	86,724	13	\$90.97	\$7,889,373			
7,021	96,625	14	\$90.26	\$8,721,035			
7,066	98,053	14	\$98.08	\$9,617,058			
7,445	102,901	14	\$99.27	\$10,215,378			
5.36%	4.94%	-0.40%	1.22%	6.22%			

	Day Treatment Intensive Half Day Services ⁽²⁾ - SMA ¹ \$144.13					
	Number of	Number of	Days Per	Cost Per		
FY	Clients	Days	Client	Day	Approved Amount	
2005-06	482	40,811	85	\$124.61	\$5,085,620	
2006-07	522	42,873	82	\$130.65	\$5,601,400	
2007-08	567	48,965	86	\$116.65	\$5,711,570	
2008-09	394	28,700	73	\$99.90	\$2,867,165	
2009-10	284	25,738	91	\$104.08	\$2,678,755	
2010-11	228	23,151	102	\$35.38	\$819,123	
2011-12	217	22,257	103	\$106.57	\$2,371,849	
2012-13	9	216	24	\$168.70	\$36,439	
2013-14	-	0	0	\$0.00	\$0	
Change	-100.00%	-100.00%	-100.00%	-100.00%	-100.00%	

Day T	Day Treatment Intensive Full Day Services - SMA ¹ \$202.43								
Number of		Days Per							
Clients	Number of Days	Client	Cost Per Day	Approved Amount					
3,109	292,918	94	\$173.45	\$50,805,916					
3,006	271,100	90	\$183.10	\$49,638,598					
2,876	267,724	93	\$182.68	\$48,907,835					
2,916	280,805	96	\$181.99	\$51,103,346					
2,657	252,788	95	\$179.91	\$45,479,444					
2,368	225,124	95	\$184.62	\$41,563,104					
2,265	209,888	93	\$185.54	\$38,942,647					
1,715	174,599	102	\$193.23	\$33,738,635					
1,493	157,605	106	\$196.27	\$30,932,692					
-12.94%	-9.73%	3.69%	1.57%	-8.32%					

^{(1) -} The State Maximum Allowance (SMA) for FY 11/12 is noted here as a historical reference and was removed as maximum rate for computing federal reimbursement for dates of service beginning July 1, 2012 per AB 1297.

^{(2) -} There were significantly fewer approved claims in FY 2012-13 for Day Treatment Intensive Half Day services and no costs forecast for FY 13-14.

Children's Services Approved Claims Data Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts By Service FY 2005-06 through FY 2011-12* Actual and SFY 2012-13 through 2013-14 Forecast *Actual data as of 3/31/2013

	Day	Day Rehabilitative Half Day Services - SMA ¹ \$84.08					
FY	Number of Clients	Number of Days	Days Per Client	Cost Per Day ⁽²⁾	Approved Amount		
2005-06	343	29,254	85	\$76.88	\$2,249,072		
2006-07	168	14,196	85	\$82.79	\$1,175,267		
2007-08	137	14,730	108	\$74.87	\$1,102,872		
2008-09	189	17,839	94	\$73.75	\$1,315,612		
2009-10	175	16,200	93	\$86.00	\$1,393,141		
2010-11	127	14,239	112	\$98.01	\$1,395,605		
2011-12	102	9,371	92	\$96.68	\$905,950		
2012-13	57	7,125	125	\$96.45	\$687,201		
2013-14	39	5,865	150	\$104.37	\$612,108		
Change	-31.58%	-17.68%	20.31%	8.21%	-10.93%		

Day Rehabilitative Full Day Services - SMA ¹ \$131.24							
Number of		Days Per					
Clients	Number of Days	Client	Cost Per Day	Approved Amount			
3,539	293,326	83	\$106.39	\$31,207,410			
3,110	239,108	77	\$114.41	\$27,357,205			
2,657	209,849	79	\$117.62	\$24,682,839			
2,493	173,556	70	\$118.10	\$20,496,465			
2,203	150,231	68	\$113.04	\$16,981,995			
1,481	116,242	78	\$117.36	\$13,641,791			
1,757	120,531	69	\$118.87	\$14,327,621			
1,827	119,156	65	\$125.62	\$14,967,936			
1,672	101,060	60	\$128.92	\$13,028,583			
-8.48%	-15.19%	-7.32%	2.63%	-12.96%			

	Tar	Targeted Case Management Services - SMA ¹ \$2.02					
	Number of	Number of	Minutes	Cost Per			
FY	Clients	Minutes	Per Client	Minute	Approved Amount		
2005-06	87,388	41,449,035	474	\$1.68	\$69,461,219		
2006-07	80,731	38,791,728	481	\$1.79	\$69,366,241		
2007-08	83,131	40,820,893	491	\$1.82	\$74,419,098		
2008-09	89,348	43,863,813	491	\$1.87	\$81,814,298		
2009-10	90,638	41,601,092	459	\$1.88	\$78,304,421		
2010-11	90,561	40,535,315	448	\$1.88	\$76,047,232		
2011-12	94,671	41,697,313	440	\$1.82	\$75,947,101		
2012-13	95,902	39,770,438	415	\$2.01	\$80,090,123		
2013-14	98,614	39,758,317	403	\$2.05	\$81,535,068		
Change	2.83%	-0.03%	-2.78%	1.84%	1.80%		

1	Therapy & Other Service Activities - SMA ¹ \$2.61							
Number of	Number of	Minutes	Cost Per					
Clients	Minutes ⁽³⁾	Per Client	Minute	Approved Amount				
171,158	283,676,792	1,657	\$2.10	\$595,219,487				
172,277	289,148,424	1,678	\$2.20	\$636,792,514				
179,926	318,795,013	1,772	\$2.25	\$717,760,360				
192,601	377,655,636	1,961	\$2.19	\$828,266,009				
195,728	446,775,555	2,283	\$1.86	\$829,471,455				
201,343	380,811,932	1,891	\$2.29	\$871,082,886				
214,322	399,811,953	1,865	\$2.33	\$930,152,851				
227,140	415,958,762	1,831	\$2.45	\$1,020,824,204				
236,287	436,754,725	1,848	\$2.48	\$1,084,219,696				
4.03%	5.00%	0.93%	1.15%	6.21%				

	1	Therapeutic Behavioral Services - SMA ¹ \$2.61					
	Number of	Number of	Minutes	Cost Per			
FY	Clients	Minutes	Per Client	Minute	Approved Amount		
2005-06	3,260	24,065,822	7,382	\$2.03	\$48,939,785		
2006-07	3,655	26,047,259	7,126	\$2.10	\$54,816,863		
2007-08	3,809	27,593,980	7,244	\$2.19	\$60,351,325		
2008-09	4,210	28,751,510	6,829	\$2.19	\$62,984,126		
2009-10	5,169	33,219,333	6,427	\$2.08	\$69,167,751		
2010-11	6,432	39,935,039	6,209	\$2.02	\$80,675,140		
2011-12	7,339	41,211,665	5,615	\$2.11	\$87,089,611		
2012-13	8,246	42,474,347	5,151	\$2.27	\$96,351,059		
2013-14	9,051	45,276,897	5,002	\$2.28	\$103,260,043		
Change	9.76%	6.60%	-2.88%	0.54%	7.17%		

Medication Support Services - SMA ¹ \$4.82							
Number of	Number of	Minutes	Cost Per				
Clients	Minutes	Per Client	Minute	Approved Amount			
64,898	20,017,781	308	\$3.80	\$76,119,707			
64,468	19,544,557	303	\$4.07	\$79,488,307			
65,051	20,048,025	308	\$4.16	\$83,413,472			
69,283	21,471,506	310	\$4.23	\$90,778,784			
70,149	22,028,047	314	\$4.20	\$92,626,517			
70,839	22,977,541	324	\$4.16	\$95,677,356			
73,286	23,249,856	317	\$4.22	\$98,095,461			
74,733	23,465,363	314	\$4.54	\$106,450,574			
76,605	24,135,623	315	\$4.60	\$110,971,838			
2.50%	2.86%	0.34%	1.35%	4.25%			

^{(1) -} The State Maximum Allowance (SMA) for FY 11/12 is noted here as a historical reference and was removed as maximum rate for computing federal reimbursement for dates of service beginning July 1, 2012 per AB 1297.

^{(2) -} Currently analyzing the reason that Day Rehabilitative Half Day Services cost per day exceeds the SMA in FY's 09-10, 10-11, 11-

^{(3) -} The large increase in the number of minutes for FY 2009-10 is due to over reporting of units of time by certain counties while implementing new billing systems.

Children's Services Approved Claims Data Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts By Service FY 2005-06 through FY 2011-12* Actual and SFY 2012-13 through 2013-14 Forecast *Actual data as of 3/31/2013

		Crisis Intervention Services - SMA ¹ \$3.88					
FY	Number of Clients	Number of Minutes	Minutes Per Client	Cost Per Minute	Approved Amount		
2005-06	15,872	4,108,282	259	\$3.41	\$14,003,423		
2006-07	15,125	3,934,788	260	\$3.63	\$14,272,657		
2007-08	15,445	4,249,925	275	\$3.72	\$15,804,877		
2008-09	17,423	4,812,360	276	\$3.75	\$18,041,728		
2009-10	16,787	4,629,020	276	\$3.74	\$17,307,893		
2010-11	16,990	5,077,643	299	\$3.69	\$18,758,370		
2011-12	16,973	5,241,235	309	\$3.65	\$19,123,555		
2012-13	17,718	5,429,286	306	\$3.99	\$21,638,994		
2013-14	18,126	5,680,099	313	\$4.02	\$22,858,590		
Change	2.30%	4.62%	2.26%	0.97%	5.64%		

Psychiatr	Psychiatric Inpatient Hospital Services - SD/MC ⁽²⁾ - SMA ¹ \$1,213.75							
Number of		Days Per						
Clients	Number of Days	Client	Cost Per Day	Approved Amount				
1,876	16,126	9	\$775.40	\$12,504,102				
1,852	17,701	10	\$816.53	\$14,453,454				
1,980	15,928	8	\$785.22	\$12,506,982				
2,014	15,922	8	\$828.87	\$13,197,314				
2,032	16,464	8	\$874.89	\$14,404,202				
2,097	16,593	8	\$899.26	\$14,921,399				
3.20%	0.78%	-2.34%	2.79%	3.59%				

	Psychiatric Inpatient Hospital Services - FFS/MC ^(2,3)					
	Number of	Number of	Days Per	Cost Per		
FY	Clients	Days	Client	Day	Approved Amount	
2005-06						
2006-07						
2007-08						
2008-09	7,697	67,776	9	\$ 666.68	\$45,184,960	
2009-10	8,257	75,403	9	\$ 686.92	\$51,795,601	
2010-11	9,037	78,685	9	\$ 702.98	\$55,313,818	
2011-12	8,930	82,004	9	\$ 717.72	\$58,855,971	
2012-13	10,732	91,240	9	\$ 732.36	\$66,820,082	
2013-14	10,692	95,356	9	\$ 745.46	\$71,083,834	
Change	-0.37%	4.51%	4.90%	1.79%	6.38%	

^{(1) -} The State Maximum Allowance (SMA) for FY 11/12 is noted here as a historical reference and was removed as maximum rate for computing federal reimbursement for dates of service beginning July 1, 2012 per AB 1297.

^{(2) -} FY 05-06 through FY 07-08 information will be added in a future update of this table.

^{(3) -} FFS/MC data as of February 28, 2013

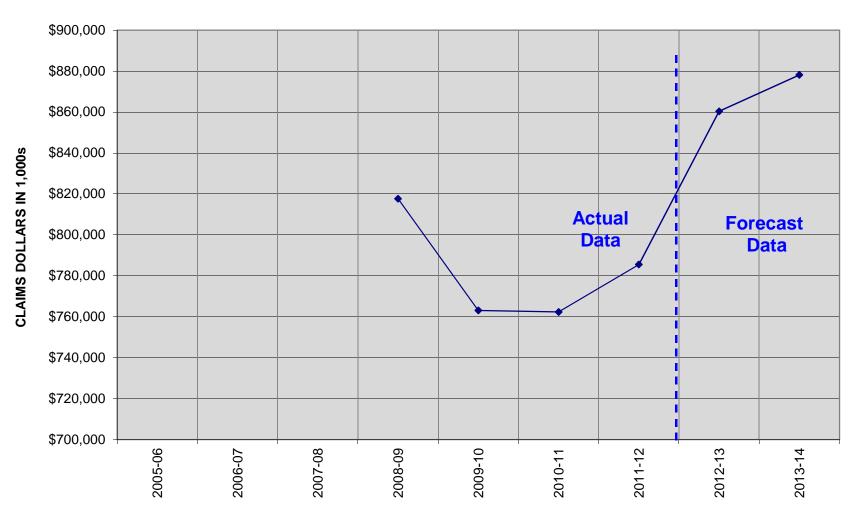
ADULTS' TABLE OF APPROVED CLAIM COSTS AND UNDUPLICATED CLIENTS COUNTS 2013-14 GOVERNOR'S BUDGET FORECASTS BY SERVICE FISCAL YEAR (ACCRUAL) STATE FISCAL YEARS 1998-99 THROUGH 2013-14 DATA AS OF 3/31/2013

	Fiscal Year	Approved Claims ^(1&3) (In 1,000s)	Percentage Change in Claim Costs	Unduplicated Adults Receiving SMHS	Percent Growth in Clients	Cost Per Client	Percent Growth in Cost Per Client	Trend in Medi-Cal Adults' Enrollment Growth	All Medi-Cal Adults ⁽²⁾
Actual	2005-06	(1111,0000)	Oldini Coolo	CIVII 10	Ollotto	Ollone	COST OF CHOTE	O10Will	4,752,360
Actual	2006-07							0.38%	
Actual	2007-08							0.71%	
Actual	2008-09	\$817,638		242,939		\$3,366		2.93%	4,945,085
Actual	2009-10	\$763,105	-6.67%	232,953	-4.11%	\$3,276	-2.67%	1.77%	5,032,695
Actual	2010-11	\$762,363	-0.10%	231,585	-0.59%	\$3,292	0.49%	2.80%	5,173,812
Forecast	2011-12	\$785,508	3.04%	234,020	1.05%	\$3,357	1.96%		
Forecast	2012-13	\$860,332	9.53%	270,354	15.53%	\$3,182	-5.19%		
Forecast	2013-14	\$878,142	2.07%	276,466	2.26%	\$3,176	-0.19%		

⁽¹⁾ Actual Approved Claims SD/MC Data for Specialty Mental Health as of March 31, 2013.

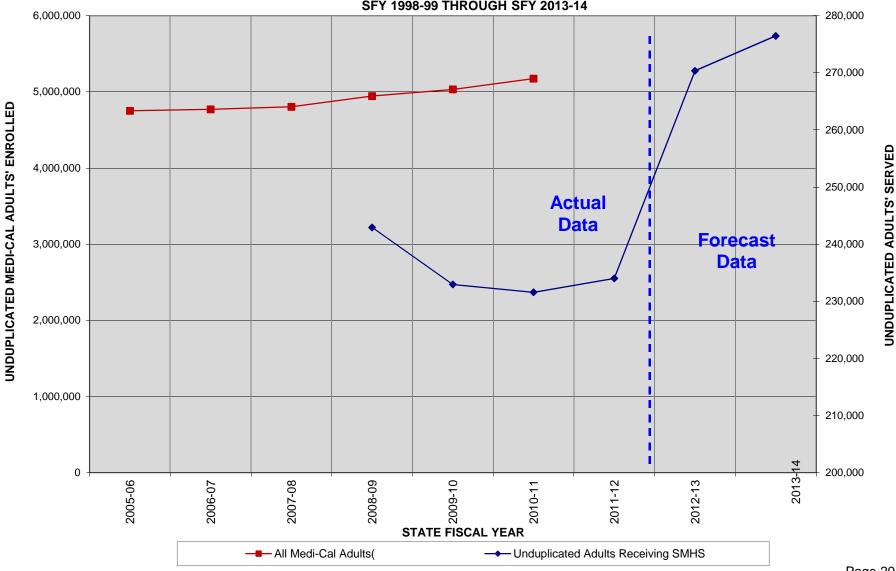
⁽²⁾ Medi-Cal enrollment data based on average of 12 months of actual monthly enrollment data for each year (years prior to 2005-06 readily not available).

ADULTS' APPROVED CLAIMS AND CLAIMS FORECAST SFY 1998-99 THROUGH SFY 2013-14



STATE FISCAL YEAR

UNDUPLICATED CLIENTS AND CLIENT FORECASTS All Medi-Cal Adults' Compared to Adults' Receiving Specialty Mental Health Services SFY 1998-99 THROUGH SFY 2013-14

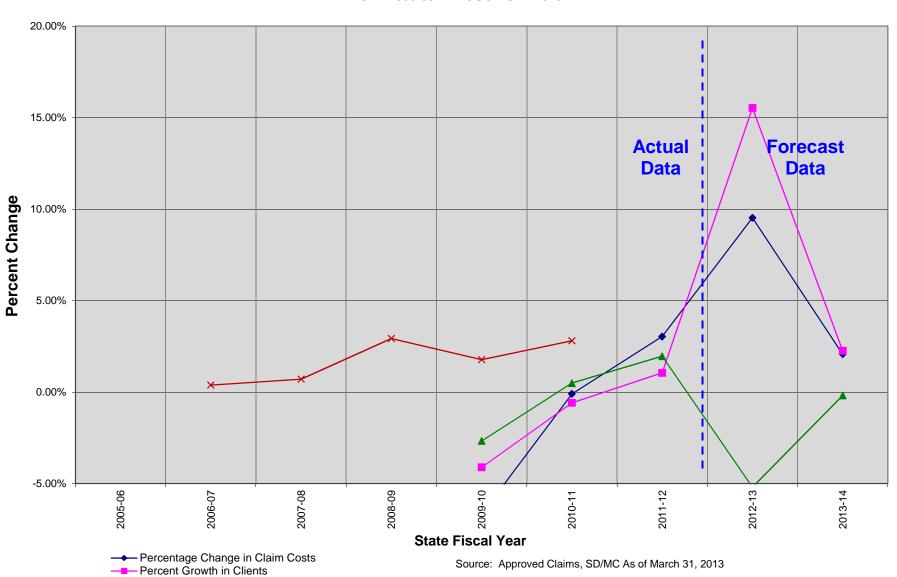


Source: Approved Claims, SD/MC Specialty Mental Health Services As of March 31, 2013

Percent Growth in Cost Per Client

---- Trend in Medi-Cal Adults' Enrollment Growth

PERCENT CHANGE IN ADULTS' COSTS AND CLIENTS SFY 1998-99 THROUGH SFY 2013-14



Adults' Services Approved Claims Data

Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts By Service FY 2008-09 through FY 2011-12* Actual and SFY 2012-13 through 2013-14 Forecast

*Actual data as of 3/31/2013 (Data for years earlier than FY 08/09 are not yet available)

	Psy	Psychiatric Health Facility Services - SMA ¹ \$612.47						
	Number of	Number of	Days Per	Cost Per				
FY	Clients	Days	Client	Day	Approved Amount			
2008-09	2,388	27,167	11	\$535.31	\$14,542,834			
2009-10	2,307	25,668	11	\$553.68	\$14,211,935			
2010-11	2,418	27,499	11	\$561.84	\$15,450,117			
2011-12	2,749	29,866	11	\$582.11	\$17,385,247			
2012-13	3,032	35,889	12	\$617.29	\$22,153,747			
2013-14	3,214	38,121	12	\$629.31	\$23,990,083			
Change	6.00%	6.22%	0.20%	1.95%	8.29%			

Adult Crisis Residential Services - SMA ¹ \$345.38								
Number of		Days Per						
Clients	Number of Days	Client	Cost Per Day	Approved Amount				
3,423	65,783	19	\$288.94	\$19,007,024				
3,445	65,690	19	\$287.28	\$18,871,631				
3,712	67,874	18	\$295.47	\$20,054,595				
3,876	71,293	18	\$304.55	\$21,712,101				
3,946	70,310	18	\$317.28	\$22,307,977				
4,078	71,792	18	\$322.25	\$23,134,909				
3.35%	2.11%	-1.20%	1.57%	3.71%				

	Adult Residential Services - SMA ¹ \$168.46						
	Number of	Number of	Days Per	Cost Per			
FY	Clients	Days	Client	Day	Approved Amount		
2008-09	1,519	152,389	100	\$145.60	\$22,187,309		
2009-10	1,436	120,395	84	\$149.83	\$18,039,205		
2010-11	1,155	96,875	84	\$155.31	\$15,045,758		
2011-12	1,146	95,697	84	\$157.16	\$15,039,308		
2012-13	1,140	91,630	80	\$163.14	\$14,948,110		
2013-14	1,068	81,635	76	\$169.77	\$13,859,257		
Change	-6.32%	-10.91%	-4.90%	4.07%	-7.28%		

	Crisis Stabilization Services - SMA ¹ \$94.54							
Number of Clients	Number of Hours	Hours Per Client		Approved Amount				
19,725	378,550	19	\$89.69	\$33,950,960				
19,296	377,980	20	\$90.89	\$34,354,858				
21,051	412,794	20	\$90.66	\$37,422,732				
22,848	462,670	20	\$92.45	\$42,774,609				
23,344	471,146	20	\$99.41	\$46,837,800				
24,215	486,915	20	\$101.23	\$49,289,316				
3.73%	3.35%	-0.37%	1.83%	5.23%				

	Day Tre	Day Treatment Intensive Half Day Services ⁽²⁾ - SMA ¹ \$144.13					
FY	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount		
2008-09	0						
2009-10	0						
2010-11	0						
2011-12	0						
2012-13	0						
2013-14	0						
Change	0.00%						

Day Tr	Day Treatment Intensive Full Day Services ⁽²⁾ - SMA ¹ \$202.43							
Number of		Days Per						
Clients	Number of Days	Client	Cost Per Day	Approved Amount				
210	5,808	28	\$130.21	\$756,246				
97	2,984	31	\$155.24	\$463,225				
61	2,724	45	\$170.93	\$465,618				
16	428	27	\$173.06	\$74,071				
0								
0								
0.00%								

^{(1) -} The State Maximum Allowance (SMA) for FY 11/12 is noted here as a historical reference and was removed as maximum rate for computing federal reimbursement for dates of service beginning July 1, 2012 per AB 1297.

^{(2) -} There were no approved claims for adults receiving Day Treatment Intensive Half Day services. For Day Treatment Intensive Full Day services, there were no approved claims in FY 2012-13.

Adults' Services Approved Claims Data

Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts By Service FY 2008-09 through FY 2011-12* Actual and SFY 2012-13 through 2013-14 Forecast

*Actual data as of 3/31/2013 (Data for years earlier than FY 08/09 are not yet available)

	Day	Day Rehabilitative Half Day Services - SMA ¹ \$84.08						
	Number of	Number of	Days Per	Cost Per				
FY	Clients	Days	Client	Day ⁽²⁾	Approved Amount			
2008-09	140	7,345	52	\$81.99	\$602,222			
2009-10	147	7,243	49	\$85.43	\$618,775			
2010-11	212	8,429	40	\$91.26	\$769,234			
2011-12	275	11,755	43	\$91.41	\$1,074,480			
2012-13	209	7,405	35	\$99.88	\$739,634			
2013-14	181	3,521	19	\$137.56	\$484,332			
Change	-13.40%	-52.45%	-45.10%	37.72%	-34.52%			

Da	Day Rehabilitative Full Day Services - SMA ¹ \$131.24								
Number of		Days Per							
Clients	Number of Days	Client	Cost Per Day	Approved Amount					
1,610	105,935	66	\$116.91	\$12,384,663					
1,433	86,570	60	\$115.67	\$10,013,561					
1,159	77,179	67	\$118.71	\$9,162,148					
968	63,090	65	\$129.41	\$8,164,587					
774	47,610	62	\$138.51	\$6,594,545					
576	34,698	60	\$156.40	\$5,426,705					
-25.58%	-27.12%	-2.07%	12.91%	-17.71%					

	Tai	Targeted Case Management Services - SMA ¹ \$2.02					
FY	Number of Clients	Number of Minutes	Minutes Per Client	Cost Per Minute	Approved Amount		
2008-09	104,990	51,966,882	495	\$1.90	\$98,727,675		
2009-10	101,679	47,329,097	465	\$1.92	\$90,836,175		
2010-11	97,740	46,048,431	471	\$1.88	\$86,617,233		
2011-12	97,340	49,103,682	504	\$1.73	\$84,878,650		
2012-13	99,399	47,308,809	476	\$2.00	\$94,384,642		
2013-14	98,338	46,969,722	478	\$2.02	\$94,695,058		
Change	-1.07%	-0.72%	0.35%	1.05%	0.33%		

Therapy & Other Service Activities - SMA ¹ \$2.61								
Number of	Number of	Minutes	Cost Per					
Clients	Minutes	Per Client	Minute	Approved Amount				
174,525	149,110,381	854	\$2.18	\$324,330,747				
163,666	150,353,773	919	\$2.01	\$302,668,913				
162,061	164,973,553	1018	\$1.87	\$307,883,157				
165,139	154,876,107	938	\$2.08	\$321,965,544				
174,436	149,730,859	858	\$2.41	\$360,177,234				
175,360	152,334,692	869	\$2.44	\$372,393,291				
0.53%	1.74%	1.20%	1.62%	3.39%				

	Medication Support Services - SMA ¹ \$4.82				
	Number of	Number of	Minutes	Cost Per	
FY	Clients	Minutes	Per Client	Minute	Approved Amount
2008-09	172,015	46,242,888	269	\$4.35	\$201,050,453
2009-10	164,805	47,148,665	286	\$4.01	\$189,088,051
2010-11	162,955	52,785,250	324	\$3.55	\$187,283,329
2011-12	163,003	49,723,143	305	\$3.84	\$190,874,723
2012-13	163,450	47,019,562	288	\$4.42	\$207,948,440
2013-14	162,478	47,506,290	292	\$4.46	\$211,711,916
Change	-0.59%	1.04%	1.64%	0.77%	1.81%

Crisis Intervention Services - SMA ¹ \$3.88					
Number of	Number of	Minutes	Cost Per		
Clients	Minutes	Per Client	Minute	Approved Amount	
36,007	7,899,429	219	\$3.74	\$29,575,525	
33,946	7,450,270	219	\$3.74	\$27,848,697	
31,836	7,115,272	223	\$3.75	\$26,660,355	
30,803	7,184,863	233	\$3.74	\$26,868,963	
30,969	7,320,351	236	\$4.05	\$29,677,532	
30,045	7,288,156	243	\$4.13	\$30,132,457	
-2.98%	-0.44%	2.62%	1.98%	1.53%	

^{(1) -} The State Maximum Allowance (SMA) for FY 11/12 is noted here as a historical reference and was removed as maximum rate for computing federal reimbursement for dates of service beginning July 1, 2012 per AB 1297.

^{(2) -} Currently analyzing the reason that Day Rehabilitative Half Day Services cost per day exceeds the SMA in FY's 09-10, 10-11, 11-12.

Adults' Services Approved Claims Data

Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts By Service FY 2008-09 through FY 2011-12* Actual and SFY 2012-13 through 2013-14 Forecast

*Actual data as of 3/31/2013 (Data for years earlier than FY 08/09 are not yet available)

	Psychiatric Inpatient Hospital Services - SD/MC - SMA ¹ \$1,213.75				
	Number of	Number of	Days Per	Cost Per	
FY	Clients	Days	Client	Day	Approved Amount
2008-09	6,444	74,807	12	\$808.82	\$60,505,545
2009-10	6,359	73,787	12	\$760.06	\$56,082,370
2010-11	6,155	72,378	12	\$767.48	\$55,548,931
2011-12	6,186	67,664	11	\$808.34	\$54,695,751
2012-13	5,280	55,689	11	\$982.20	\$54,697,840
2013-14	5,104	50,272	10	\$1,062.24	\$53,400,933
Change	-3.33%	-9.73%	-6.61%	8.15%	-2.37%

Psychiatric Inpatient Hospital Services - FFS/MC ⁽²⁾					
Number of		Days Per			
Clients	Number of Days	Client	Cost Per Day	Approved Amount	
14,360	203,224	14	\$545.83	\$110,926,714	
14,537	194,469	13	\$575.10	\$111,839,820	
14,864	191,176	13	\$630.32	\$120,501,219	
14,298	207,266	14	\$623.90	\$129,312,474	
15,074	219,457	15	\$654.45	\$143,623,673	
15,194	221,837	15	\$677.88	\$150,378,481	
0.80%	1.08%	0.29%	3.58%	4.70%	

^{(1) -} The State Maximum Allowance (SMA) for FY 11/12 is noted here as a historical reference and was removed as maximum rate for computing federal reimbursement for dates of service beginning July 1, 2012 per AB 1297.

^{(2) -} FFS/MC data as of February 28, 2013

MEDI-CAL SPECIALTY MENTAL HEALTH SERVICES AND HEALTHY FAMILES PROGRAM - ACCRUAL COMPARISON Children Costs and Unduplicated Clients by Service Type and Year (DOLLARS IN THOUSANDS)

	Fiscal Yea	r 2011-12	Fiscal Yea	r 2012-13	% Ch	ange	Fiscal Yea	r 2013-14	% Ch	nange
Children	Total Costs	Total Clients	Total Costs	Total Clients	Dollars	Clients	Total Costs	Total Clients	Dollars	Clients
All Services*	\$1,354,398	230,484	\$1,473,670	258,489	8.8%	12.2%	\$1,550,977	270,897	5.2%	4.8%
Adult Crisis Residential	\$894	232	\$981	238	9.7%	2.6%	\$1,005	240	2.4%	0.8%
Adult Residential	\$1,140	95	\$1,025	96	-10.1%	1.1%	\$866	89	-15.5%	-7.3%
Crisis Intervention	\$19,124	16,973	\$21,639	17,718	13.2%	4.4%	\$22,859	18,126	5.6%	2.3%
Crisis Stabilization	\$8,721	7,021	\$9,617	7,066	10.3%	0.6%	\$10,215	7,445	6.2%	5.4%
Day Rehabilitation - Full Day	\$14,328	1,757	\$14,968	1,827	4.5%	4.0%	\$13,029	1,672	-13.0%	-8.5%
Day Rehabilitation - Half Day	\$906	102	\$687	57	-24.2%	-44.1%	\$612	39	-10.9%	-31.6%
Day Treatment Intensive - Full Day	\$38,943	2,265	\$33,739	1,715	-13.4%	-24.3%	\$30,933	1,493	-8.3%	-12.9%
Day Treatment Intensive - Half Day	\$2,372	217	\$36	9	-98.5%	-95.9%	\$0	0	-100.0%	-100.0%
Medication Support	\$98,095	73,286	\$106,451	74,733	8.5%	2.0%	\$110,972	76,605	4.2%	2.5%
Psychiatric Health Facility	\$4,633	620	\$5,231	661	12.9%	6.6%	\$5,553	709	6.2%	7.3%
Psychiatric Inpatient Hospital Services - SD/MC	\$13,197	2,014	\$14,404	2,032	9.1%	0.9%	\$14,921	2,097	3.6%	3.2%
Targeted Case Management	\$75,947	94,671	\$80,090	95,902	5.5%	1.3%	\$81,535	98,614	1.8%	2.8%
Therapeutic Behavioral Services	\$87,090	7,339	\$96,351	8,246	10.6%	12.4%	\$103,260	9,051	7.2%	9.8%
Therapy and Other Service Activities	\$930,153	214,322	\$1,020,824	227,140	9.7%	6.0%	\$1,084,220	236,287	6.2%	4.0%
Psychiatric Inpatient Hospital Services - FFS/MC	\$58,856	8,930	\$66,820	10,732	13.5%	20.2%	\$71,084	10,692	6.4%	-0.4%

^{*} The total costs will not equal the sum of individual service types due to the forecast methodology. The trend for all services combined is different than the trend of individual services. The total number of clients of all services is an unduplicated count and not equal to the sum of the service type counts.

MEDI-CAL SPECIALTY MENTAL HEALTH SERVICES AND HEALTHY FAMILES PROGRAM - ACCRUAL COMPARISON Adults Costs and Unduplicated Clients by Service Type and Year (DOLLARS IN THOUSANDS)

	Fiscal Yea	r 2011-12	Fiscal Yea	r 2012-13	% Cha	nge	Fiscal Yea	r 2013-14	% Cha	nge
Adults	Total Costs	Total Clients	Total Costs	Total Clients	Dollars	Clients	Total Costs	Total Clients	Dollars	Clients
All Services*	\$914,820	234,020	\$1,003,956	270,354	9.7%	15.5%	\$1,028,520	276,466	2.4%	2.3%
Adult Crisis Residential	\$21,712	3,876	\$22,308	3,946	2.7%	1.8%	\$23,135	4,078	3.7%	3.3%
Adult Residential	\$15,039	1,146	\$14,948	1,140	-0.6%	-0.5%	\$13,859	1,068	-7.3%	-6.3%
Crisis Intervention	\$26,869	30,803	\$29,678	30,969	10.5%	0.5%	\$30,132	30,045	1.5%	-3.0%
Crisis Stabilization	\$42,775	22,848	\$46,838	23,344	9.5%	2.2%	\$49,289	24,215	5.2%	3.7%
Day Rehabilitation - Full Day	\$8,165	968	\$6,595	774	-19.2%	-20.0%	\$5,427	576	-17.7%	-25.6%
Day Rehabilitation - Half Day	\$1,074	275	\$740	209	-31.1%	-24.0%	\$484	181	-34.6%	-13.4%
Day Treatment Intensive - Full Day	\$74	16	\$0	0	-100.0%	-100.0%	\$0	0	0.0%	0.0%
Day Treatment Intensive - Half Day	\$0	0	\$0	0	0	0.0%	\$0	0	0.0%	0.0%
Medication Support	\$190,875	163,003	\$207,948	163,450	8.9%	0.3%	\$211,712	162,478	1.8%	-0.6%
Psychiatric Health Facility	\$17,385	2,749	\$22,154	3,032	27.4%	10.3%	\$23,990	3,214	8.3%	6.0%
Psychiatric Inpatient Hospital Services - SD/MC	\$54,696	6,186	\$54,698	5,280	0.0%	-14.6%	\$53,401	5,104	-2.4%	-3.3%
Targeted Case Management	\$84,879	97,340	\$94,385	99,399	11.2%	2.1%	\$94,695	98,338	0.3%	-1.1%
Therapy and Other Service Activities	\$321,966	165,139	\$360,177	174,436	11.9%	5.6%	\$372,393	175,360	3.4%	0.5%
Psychiatric Inpatient Hospital Services - FFS/MC	\$129,312	14,298	\$143,624	15,074	11.1%	5.4%	\$150,378	15,194	4.7%	0.8%

^{*} The total costs will not equal the sum of individual service types due to the forecast methodology. The trend for all services combined is different than the trend of individual services.

The total number of clients of all services is an unduplicated count and not equal to the sum of the service type counts.

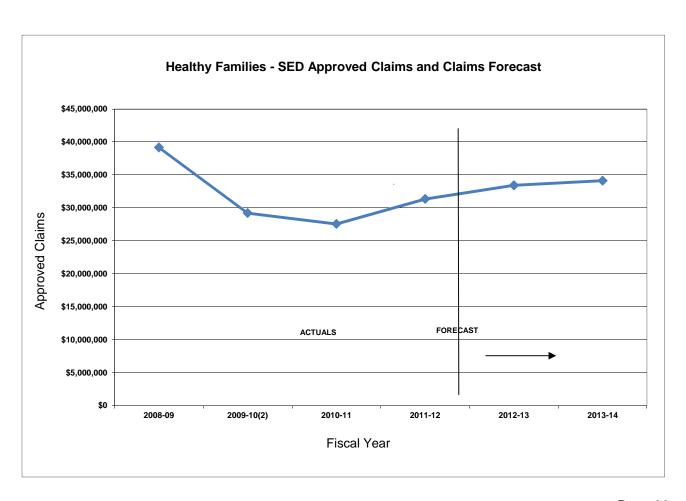
HEALTHY FAMILIES - SED TABLE OF APPROVED CLAIM COSTS

2013-14 GOVERNOR'S BUDGET FORECASTS BY FISCAL YEAR

STATE FISCAL YEARS 2008-09 THROUGH 2013-14 DATA AS OF 3/31/2013

	Fiscal Year	Approved Claims ⁽¹⁾	Percentage Change in Claim Costs
Actual	2008-09	\$39,155,763	
Actual	2009-10 ⁽²⁾	\$29,201,627	-25.42%
Actual	2010-11	\$27,552,700	-5.65%
Forecast	2011-12	\$31,341,662	13.75%
Forecast	2012-13	\$33,409,081	6.60%
Forecast	2013-14	\$34,123,873	2.14%

- (1) Actual Approved Claims SD/MC Data as of September 5, 2012 for Healthy Families Services to Seriously Emotionally Disturbed Children.
- (2) Decrease reflects MRMIB's program reductions to Healthy Families.



HEALTHY FAMILIES - SED TABLE OF UNDUPLICATED CLIENTS

2013-14 GOVERNOR'S BUDGET FORECASTS BY FISCAL YEAR

STATE FISCAL YEARS 2008-09 THROUGH 2013-14 DATA AS OF 3/31/2013

	Fiscal Year	Unduplicated Clients Served ⁽¹⁾	Percentage Change in Clients
Actual	2008-09	9,592	
Actual	2009-10 ⁽²⁾	7,880	-17.85%
Actual	2010-11	7,263	-7.83%
Forecast	2011-12	7,616	4.86%
Forecast	2012-13	7,965	4.58%
Forecast	2013-14	7,982	0.21%

- (1) Actual Approved Claims SD/MC Data as of September 5, 2012 for Healthy Families Services to Seriously Emotionally Disturbed Children.
- (2) Decrease reflects MRMIB's program reductions to Healthy Families.

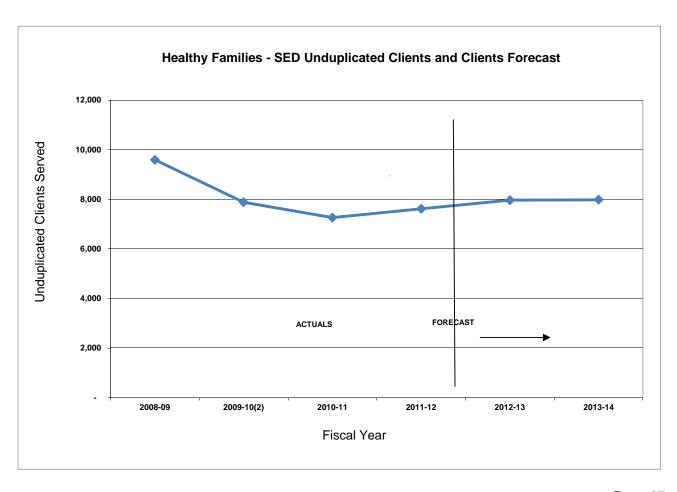


Table of Contents

Service Type	Page
Adult Crisis Residential Services*	39
Adult Residential Treatment Services*	43
Crisis Intervention	47
Crisis Stabilization	51
Day Rehabilitative Half Day	55
Day Rehabilitative Full Day	
Day Treatment Intensive Half Day	
Day Treatment Intensive Full Day	
Medication Support	
Psychiatric Health Facility Services	
Psychiatric Inpatient Hospital Services – SD/MC Hospitals	
Targeted Case Management	
Therapeutic Behavioral Services	
Therapy and Other Service Activities	
Psychiatric Inpatient Hospital Services – FFS/MC Hospitals	
	• .

^{*}Includes Children Age 18 through 20

Adult Crisis Residential Services

Adult Crisis Residential Services (CRS):

Adult crisis residential services provide an alternative to acute psychiatric hospital services for beneficiaries who otherwise would require hospitalization. The CRS programs for adults provide normalized living environments, integrated into residential communities. The services follow a social rehabilitation model that integrates aspects of emergency psychiatric care, psychosocial rehabilitation, milieu therapy, case management and practical social work.

Summary:

The forecast for Adult Crisis Residential Services include statistically unchanging client counts and slight increases in annual costs over the next few fiscal years.

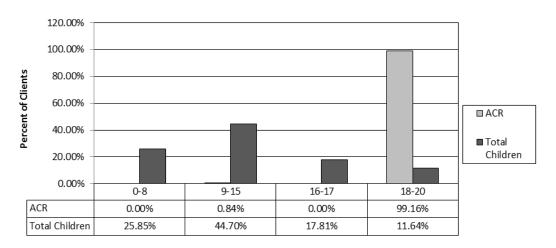
	Forecast Dollars	Forecast Clients
FY 2008-09	\$831,647	178
FY 2009-10	\$860,182	205
FY 2010-11	\$911,478	204
FY 2011-12	\$893,819	232
FY 2012-13	\$980,626	238
FY 2013-14	\$1,004,999	240

Budget Forecast Narrative:

Slight growth in dollars and clients is expected for FY 2013-14 Adult Crisis Residential Services.

Client Profile Data:

Table 1a
CHILDREN
Clients Receiving Adult Crisis Residential Services by Age Group
Fiscal Year 2011-12
Data as of 03/31/13



Age Group

Table 1b
CHILDREN
Clients Receiving Adult Crisis Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 03/31/13

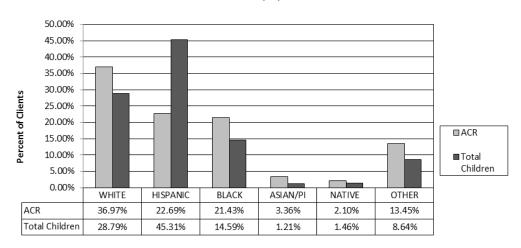


Table 1c CHILDREN Clients Receiving Adult Crisis Residential Services by Gender Fiscal Year 2011-12 Data as of 03/31/13

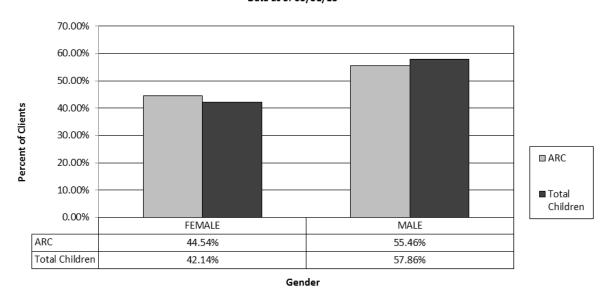


Table 1d
Other Services Received by Children Receiving Adult Crisis Residential Services
Adult Crisis Residential Fiscal Year 2011-12

	Number of Clients	Percent Clients
ADULT CRISIS RESIDENTIAL	232	100.0%
MEDICATION SUPPORT	209	90.1%
THERAPY AND OTHER SERVICE ACTIVITIES	197	84.9%
TARGETED CASE MANAGEMENT	170	73.3%
CRISIS INTERVENTION	112	48.3%
CRISIS STABILIZATION	94	40.5%
HOSPITAL INPATIENT	43	18.5%
PHF	40	17.2%
ADULT RESIDENTIAL	23	9.9%
THERAPEUTIC BEHAVIORAL SERVICES	11	4.7%
DAY TX REHABILITATIVE FULL DAY	6	2.6%
DAY TX INTENSIVE FULL DAY	2	0.9%
DAY TX INTENSIVE HALF DAY	1	0.4%

Service Metrics:

Table 1e
Adult Crisis Residential Services Approved Amount
Fiscal Year 2011-12

Statistic	Amount	
Number of Clients		232
Mean	\$	3,846
Standard Deviation	\$	4,127
Median	\$	2,341
Mode	\$	228
Interquartile Range	\$	3,982

Quartile	Amount
100%	\$ 24,612
99%	\$ 19,341
95%	\$ 12,925
90%	\$ 9,103
75%	\$ 5,171
50%	\$ 2,341
25%	\$ 1,189

Table 1f
Adult Crisis Residential Services Days
Fiscal Year 2011-12

Statistic	Amount
Number of Clients	232
Mean	13
Standard Deviation	12
Median	9
Mode	1
Interquartile Range	13

Quartile	Days
100%	73
99%	56
95%	42
90%	29
75%	17
50%	9
25%	5

Table 1g Historical Trends Adult Crisis Residential by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	178	205	204	232
Number of Days	2,924	3,111	3,190	3,062
Days Per Client	16	15	16	13
Approved Amount	\$831,647	\$860,182	\$911,478	\$893,819

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Adult Residential Services

Adult Residential Treatment Services:

Adult Residential Treatment Services are rehabilitative services provided in a non-institutional, residential setting for beneficiaries who would be at risk of hospitalization or other institutional placement if they were not receiving residential treatment services. The services include a wide range of activities and services that support beneficiaries in their effort to restore, maintain, and apply interpersonal and independent living skills and to access community support systems. Service activities may include assessment, plan development, therapy, rehabilitation, and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

The forecast for Adult Residential Services indicates a decrease in clients and total cost through FY 2013-14.

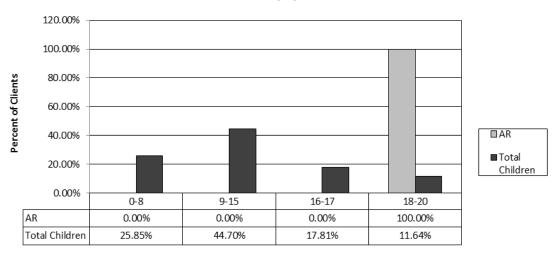
	Forecast Dollars	Forecast Clients
FY 2008-09	\$1,846,438	127
FY 2009-10	\$1,756,485	130
FY 2010-11	\$1,631,533	115
FY 2011-12	\$1,140,333	95
FY 2012-13	\$1,024,537	96
FY 2013-14	\$866,119	89

Budget Forecast Narrative:

The forecast indicates a declining trend in costs through FY 2013-14.

Client Profile Data:

Table 2a CHILDREN Clients Receiving Adult Residential Services by Age Group Fiscal Year 2011-12 Data as of 03/31/13



Age Group

Table 2b
CHILDREN
Clients Receiving Adult Residential Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 03/31/13

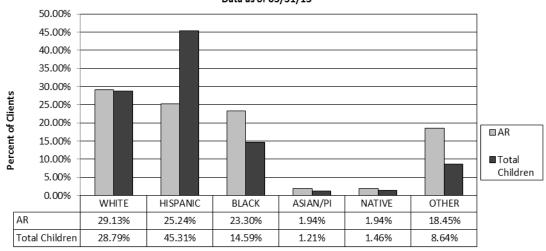
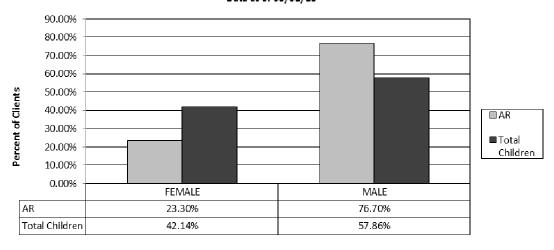


Table 2c CHILDREN Clients Receiving Adult Residential Services by Gender Fiscal Year 2011-12 Data as of 03/31/13



Gender

Table 2d
Other Services Received by Children Receiving Adult Residential Service
Fiscal Year 2011-12

	Number of Clients	Percent Clients
ADULT RESIDENTIAL	95	100.0%
MEDICATION SUPPORT	90	94.7%
THERAPY AND OTHER SERVICE ACTIVITIES	84	88.4%
TARGETED CASE MANAGEMENT	77	81.1%
CRISIS INTERVENTION	28	29.5%
CRISIS STABILIZATION	28	29.5%
ADULT CRISIS RESIDENTIAL	23	24.2%
DAY TX INTENSIVE FULL DAY	14	14.7%
HOSPITAL INPATIENT	14	14.7%
DAY TX REHABILITATIVE FULL DAY	9	9.5%
THERAPEUTIC BEHAVIORAL SERVICES	6	6.3%
PHF	4	4.2%
DAY TX REHABILITATIVE HALF DAY	1	1.1%

Service Metrics:

Table 2e Adult Residential Approved Amount Fiscal Year 2011-12

Statistic	Amount	
Number of Clients	95	
Mean	\$ 11,979	
Standard Deviation	\$ 11,366	
Median	\$ 7,918	
Mode	\$ 1,684	
Interquartile Range	\$ 12,298	

Quartile	Amount
100%	\$ 52,320
99%	\$ 52,320
95%	\$ 37,687
90%	\$ 28,422
75%	\$ 16,509
50%	\$ 7,918
25%	\$ 2,412

Table 2f
Adult Residential Days
Fiscal Year 2011-12

Statistic	Amount
Number of Clients	95
Mean	76
Standard Deviation	72
Median	52
Mode	31
Interquartile Range	84

Quartile	Days
100%	327
99%	327
95%	240
90%	181
75%	109
50%	52
25%	25

Table 2g Historical Trends Adult Residential by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011*	2011-2012*
Number of Clients	127	130	115	95
Number of Days	12,934	12,081	10,519	7,235
Days Per Client	102	93	91	76
Approved Amount	\$1,846,438	\$1,756,485	\$1,631,533	\$1,140,333

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Crisis Intervention

Crisis Intervention:

Crisis intervention services last less than 24 hours and are for, or on behalf of, a beneficiary for a condition that requires more timely response than a regularly scheduled visit. Service activities include, but are not limited to, assessment, collateral and therapy. Crisis Intervention services may either be face-to-face or by telephone with the beneficiary or the beneficiary's significant support person and may be provided anywhere in the community.

Summary:

The number of clients and costs are forecast to increase for Crisis Intervention services through FY 2013-14.

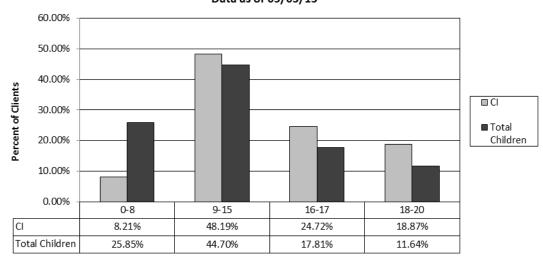
	Forecast Dollars	Forecast Clients
FY 2008-09	\$18,041,728	17,423
FY 2009-10	\$17,307,893	16,787
FY 2010-11	\$18,758,370	16,990
FY 2011-12	\$19,123,555	16,973
FY 2012-13	\$21,638,994	17,718
FY 2013-14	\$22,858,590	18,126

Budget Forecast Narrative:

Costs for Crisis Intervention services should increase through FY 2013-14.

Client Profile Data:

Table 3a
CHILDREN
Clients Receiving Crisis Intervention by Age Group
Fiscal Year 2011-12
Data as of 05/03/13



Age Group

Table 3b
CHILDREN
Clients Receiving Crisis Intervention by Race/Ethnicity
Fiscal Year 2011-12
Data as of 05/03/13

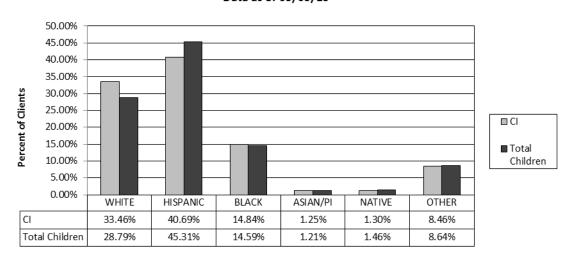
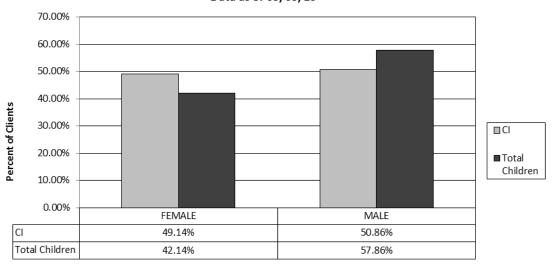


Table 3c CHILDREN Clients Receiving Crisis Intervention by Gender Fiscal Year 2011-12 Data as of 05/03/13



Gender

Table 3d
Other Services Received by Children Receiving Crisis Intervention Service
Service Fiscal Year 2011-12

	Number of Clients	Percent Clients
CRISIS INTERVENTION	16,973	100.0%
THERAPY AND OTHER SERVICE ACTIVITIES	14,134	83.3%
TARGETED CASE MANAGEMENT	10,982	64.7%
MEDICATION SUPPORT	10,006	59.0%
CRISIS STABILIZATION	2,548	15.0%
THERAPEUTIC BEHAVIORAL SERVICES	1,975	11.6%
HOSPITAL INPATIENT	1,100	6.5%
DAY TX INTENSIVE FULL DAY	515	3.0%
PHF	333	2.0%
DAY TX REHABILITATIVE FULL DAY	287	1.7%
ADULT CRISIS RESIDENTIAL	112	0.7%
DAY TX INTENSIVE HALF DAY	61	0.4%
ADULT RESIDENTIAL	28	0.2%
DAY TX REHABILITATIVE HALF DAY	12	0.1%

Service Metrics:

Table 3e
Crisis Intervention Service Approved Amount
Fiscal Year 2011-12

Statistic	Amount	
Number of Clients		16,973
Mean	\$	1,140
Standard Deviation	\$	1,347
Median	\$	718
Mode	\$	1,862
Interquartile Range	\$	1,163
		•

Quartile	Amount	
100%	\$ 21,538	
99%	\$ 6,615	
95%	\$ 3,511	
90%	\$ 2,209	
75%	\$ 1,531	
50%	\$ 718	
25%	\$ 369	

Table 3f
Crisis Intervention Service Days
Fiscal Year 2011-12

Statistic	Minutes	
Number of Clients	16,973	
Mean	309	
Standard Deviation	371	
Median	196	
Mode	480	
Interquartile Range	315	

Quartile	Minutes
100%	5736
99%	1860
95%	960
90%	623
75%	420
50%	196
25%	105

Table 3g
Historical Trends
Crisis Intervention Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	17,423	16,787	16,990	16,973
Number of Minutes	4,812,360	4,629,020	5,077,643	5,241,235
Minutes Per Client	276	276	299	309
Approved Amount	\$18,041,728	\$17,307,893	\$18,758,370	\$19,123,555

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Crisis Stabilization

Crisis Stabilization:

Crisis stabilization services last less than 24 hours and are for, or on behalf of, a beneficiary for a condition that requires a more timely response than a regularly scheduled visit. Service activities include but are not limited to one or more of the following: assessment, collateral, and therapy. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

The forecast for Crisis Stabilization Services is for moderate growth in clients and costs over the next few fiscal years.

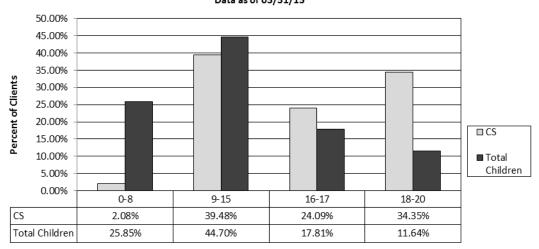
	Forecast Dollars	Forecast Clients
FY 2008-09	\$6,285,198	5,243
FY 2009-10	\$7,067,162	5,799
FY 2010-11	\$7,889,373	6,461
FY 2011-12	\$8,721,035	7,021
FY 2012-13	\$9,617,058	7,066
FY 2013-14	\$10,215,378	7,445

Budget Forecast Narrative:

Moderate growth in costs is forecast through FY 2013-14.

Client Profile Data:

Table 4a
CHILDREN
Clients Receiving Crisis Stabilization Services by Age Group
Fiscal Year 2011-12
Data as of 03/31/13



Age Group

Table 4b
CHILDREN
Clients Receiving Crisis Stabilization Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 03/31/13

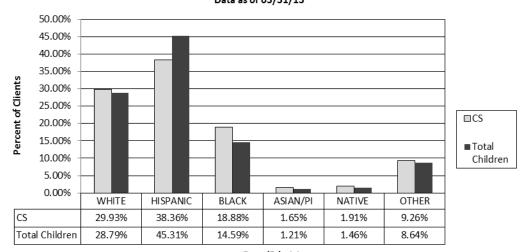


Table 4c
CHILDREN
Clients Receiving Crisis Stabilization Services by Gender
Fiscal Year 2011-12
Data as of 03/31/13

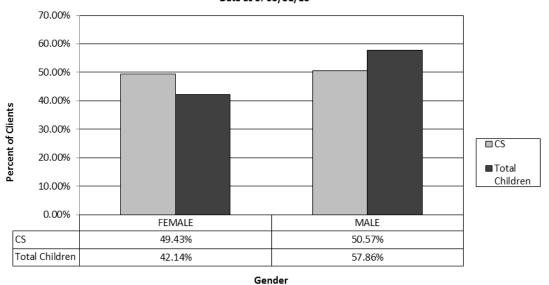


Table 4d
Other Services Received by Children Receiving Crisis Stabilization Service
Fiscal Year 2011-12

	Number of Clients	Percent Clients
CRISIS STABILIZATION	7,021	100.0%
THERAPY AND OTHER SERVICE ACTIVITIES	4,922	70.1%
MEDICATION SUPPORT	3,880	55.3%
TARGETED CASE MANAGEMENT	3,546	50.5%
CRISIS INTERVENTION	2,548	36.3%
HOSPITAL INPATIENT	975	13.9%
THERAPEUTIC BEHAVIORAL SERVICES	771	11.0%
DAY TX INTENSIVE FULL DAY	322	4.6%
PHF	319	4.5%
DAY TX REHABILITATIVE FULL DAY	145	2.1%
ADULT CRISIS RESIDENTIAL	94	1.3%
DAY TX INTENSIVE HALF DAY	33	0.5%
ADULT RESIDENTIAL	28	0.4%
DAY TX REHABILITATIVE HALF DAY	5	0.1%

Service Metrics:

Table 4e
Crisis Stabilization Approved Amount
Fiscal Year 2011-12

Statistic	An	Amount	
Number of Clients		7,021	
Mean	\$	1,259	
Standard Deviation	\$	1,465	
Median	\$	851	
Mode	\$	1,891	
Interquartile Range	\$	1,456	

Quartile	Amount		
100%	\$ 32,80		
99%	\$	7,091	
95%	\$	3,782	
90%	\$	2,553	
75%	\$	1,796	
50%	\$	851	
25%	\$	340	

Table 4f
Crisis Stabilization Days
Fiscal Year 2011-12

Statistic	Amount
Number of Clients	7,021
Mean	14
Standard Deviation	16
Median	10
Mode	20
Interquartile Range	16

Quartile	Days
100%	347
99%	77
95%	40
90%	28
75%	20
50%	10
25%	4

Table 4g Historical Trends Crisis Stabilization by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	5,243	5,799	6,461	7,021
Number of Hours	71,264	76,811	86,724	96,625
Hours Per Client	14	13	13	14
Approved Amount	\$6,285,198	\$7,067,162	\$7,889,373	\$8,721,035

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Day Rehabilitative Half Day

Day Rehabilitative (Half-Day):

Day rehabilitation services are a structured program of rehabilitation and therapy with services to improve, maintain or restore personal independence and functioning, consistent with requirements for learning and development and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to assessment, plan development, therapy, rehabilitation and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

For Day Rehabilitative Half Day Services, the forecast for FY 2013-14 is for a decline in both dollars and clients.

The reduction in the use of Day Treatment and Day Rehabilitation Half Day and Full Day services is due to counties using more community based services to achieve the same or better outcomes with less costly services. Counties are serving fewer children in group home and non-public school settings, which are the primary providers of day treatment and day rehabilitation services. This is due to the implementation of Mental Health Services Act (MHSA) Full Service Partnerships, the Katie A. lawsuit, and other innovations that allow counties to effectively meet the needs of clients at home rather than institutional settings.

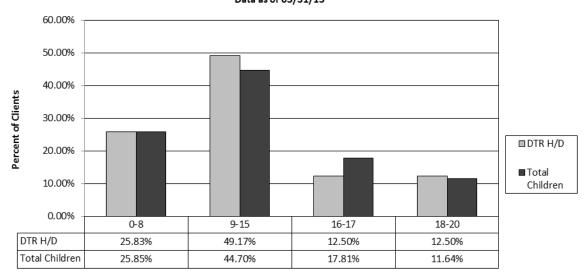
	Forecast Dollars	Forecast Clients
FY 2008-09	\$1,315,612	189
FY 2009-10	\$1,393,141	175
FY 2010-11	\$1,395,605	127
FY 2011-12	\$905,950	102
FY 2012-13	\$687,201	57
FY 2013-14	\$612,108	39

Budget Forecast Narrative:

Day Rehabilitative Half Day service costs are forecast to decline through FY 2013-14.

Client Profile Data:

Table 5a
CHILDREN
Clients Receiving Day Treatment Rehabilitative-Half Day Services by Age Group
Fiscal Year 2011-12
Data as of 03/31/13



Age Group

Table 5b
CHILDREN
Clients Receiving Day Treatment Rehabilitative-Half Day Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 05/03/13

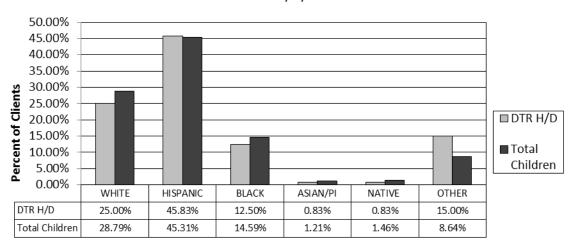
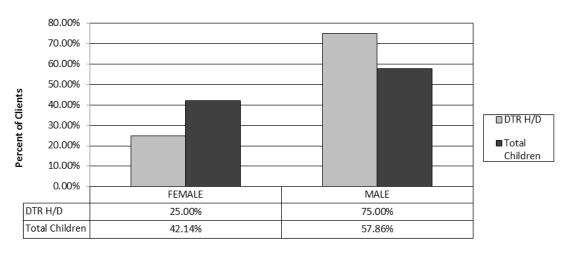


Table 5c
CHILDREN
Clients Receiving Day Treatment Rehabilitative-Half Day Services by Gender
Fiscal Year 2011-12
Data as of 05/03/13



Gender

Table 5d
Other Services Received by Children Receiving Day Rehabilitative Half Day Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
DAY TX REHABILITATIVE HALF DAY	102	100.0%
MEDICATION SUPPORT	65	63.7%
THERAPY AND OTHER SERVICE ACTIVITIES	65	63.7%
TARGETED CASE MANAGEMENT	54	52.9%
DAY TX REHABILITATIVE FULL DAY	17	16.7%
CRISIS INTERVENTION	12	11.8%
THERAPEUTIC BEHAVIORAL SERVICES	11	10.8%
CRISIS STABILIZATION	5	4.9%
DAY TX INTENSIVE FULL DAY	5	4.9%
ADULT RESIDENTIAL	1	1.0%

Service Metrics:

Table 5e
Day Rehabilitative Half Day Approved Amount
Fiscal Year 2011-12

Statistic	Amount	
Number of Clients		102
Mean	\$	8,865
Standard Deviation	\$	7,806
Median	\$	5,531
Mode	\$	1,312
Interquartile Range	\$	13,704

Quartile	Amount	
100%	\$	26,117
99%	\$	25,198
95%	\$	23,623
90%	\$	20,011
75%	\$	15,387
50%	\$	5,531
25%	\$	1,682

Table 5f
Day Rehabilitative Half Days
Fiscal Year 2011-12

Statistic	Amount
Number of Clients	102
Mean	92
Standard Deviation	79
Median	58
Mode	6
Interquartile Range	154

Quartile	Days	
100%	239	
99%	238	
95%	230	
90%	199	
75%	173	
50%	58	
25%	19	

Table 5g
Historical Trends
Day Rehabilitative Half Day by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	189	175	127	102
Number of Days	17,839	16,200	14,239	9,371
Days Per Client	94	93	112	92
Approved Amount	\$1,315,612	\$1,393,141	\$1,395,605	\$905,950

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Day Rehabilitative Full Day

Day Rehabilitative (Full-Day):

Day rehabilitation services are a structured program of rehabilitation and therapy with services to improve, maintain or restore personal independence and functioning, consistent with requirements for learning and development and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to assessment, plan development, therapy, rehabilitation and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

The forecast for Day Rehabilitative Full Day Services shows a decrease in clients and cost through SFY 2013-14.

The reduction in the use of Day Treatment and Day Rehabilitation Half Day and Full Day services is due to counties using more community based services to achieve the same or better outcomes with less costly services. Counties are serving fewer children in group home and non-public school settings, which are the primary providers of day treatment and day rehabilitation services. This is due to the implementation of Mental Health Services Act (MHSA) Full Service Partnerships, the Katie A. lawsuit, and other innovations that allow counties to effectively meet the needs of clients at home rather than institutional settings.

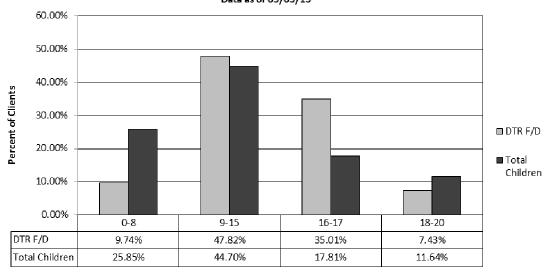
	Forecast Dollars	Forecast Clients
FY 2008-09	\$20,496,465	2,493
FY 2009-10	\$16,981,995	2,203
FY 2010-11	\$13,641,791	1,481
FY 2011-12	\$14,327,621	1,757
FY 2012-13	\$14,967,936	1,827
FY 2013-14	\$13,028,583	1,672

Budget Forecast Narrative:

Day Rehabilitation Full Day costs are forecast to decline sharply through FY 2013-14.

Client Profile Data:

Table 6a
CHILDREN
Clients Receiving Day Treatment Rehabilitative-Full Day Services by Age Group
Fiscal Year 2011-12
Data as of 05/03/13



Age Group

Table 6b
CHILDREN
Clients Receiving Day Treatment Rehabilitative-Full Day Services by Race/Ethnicity
Fiscal Year 2011-12

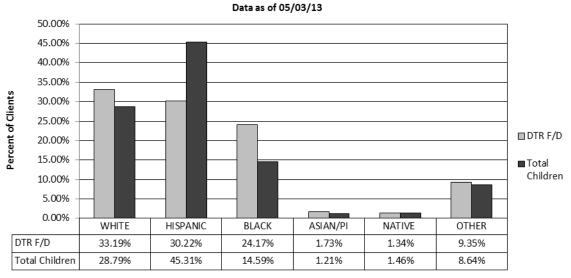


Table 6c CHILDREN Clients Receiving Day Treatment Rehabilitative-Full Day Services by Gender Fiscal Year 2011-12 Data as of 05/03/13

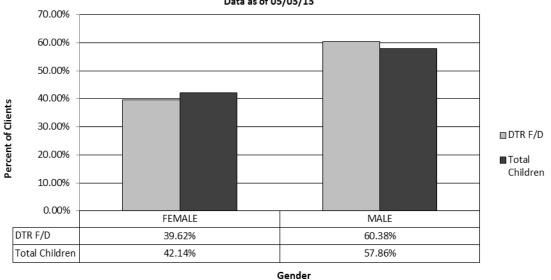


Table 6d
Other Services Received by Children Receiving Day Rehabilitative Full Day Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
DAY TX REHABILITATIVE FULL DAY	1,757	100.0%
THERAPY AND OTHER SERVICE ACTIVITIES	1,229	69.9%
MEDICATION SUPPORT	1,173	66.8%
TARGETED CASE MANAGEMENT	710	40.4%
CRISIS INTERVENTION	287	16.3%
THERAPEUTIC BEHAVIORAL SERVICES	252	14.3%
DAY TX INTENSIVE FULL DAY	226	12.9%
CRISIS STABILIZATION	145	8.3%
HOSPITAL INPATIENT	69	3.9%
DAY TX INTENSIVE HALF DAY	56	3.2%
PHF	28	1.6%
DAY TX REHABILITATIVE HALF DAY	17	1.0%
ADULT RESIDENTIAL	9	0.5%
ADULT CRISIS RESIDENTIAL	6	0.3%

Service Metrics:

Table 6e Day Rehabilitative Full Day Approved Amount Fiscal Year 2011-12

Statistic	Ar	Amount	
Number of Clients		1,757	
Mean	\$	8,158	
Standard Deviation	\$	8,117	
Median	\$	4,930	
Mode	\$	656	
Interquartile Range	\$	11,287	
		•	

Quartile	Amount		
100%	\$	43,178	
99%	\$	30,054	
95%	\$	24,432	
90%	\$	21,655	
75%	\$	12,862	
50%	\$	4,930	
25%	\$	1,575	

Table 6f Day Rehabilitative Full Days Fiscal Year 2011-12

Statistic	Amount
Number of Clients	1,757
Mean	69
Standard Deviation	69
Median	42
Mode	4
Interquartile Range	96

Quartile	Days
100%	342
99%	247
95%	213
90%	176
75%	108
50%	42
25%	12

Table 6g Historical Trends Day Rehabilitative Full Day by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	2,493	2,203	1,481	1,757
Number of Days	173,556	150,231	116,242	120,531
Days Per Client	70	68	80	69
Approved Amount	\$20,496,465	\$16,981,995	\$13,641,791	\$14,327,621

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Day Treatment Intensive Half Day

Day Treatment Intensive (Half-Day):

Day treatment intensive services are a structured, multi-disciplinary program of therapy that may be used as an alternative to hospitalization, or to avoid placement in a more restrictive setting, or to maintain the client in a community setting and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to, assessment, plan development, therapy, rehabilitation and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

The forecast for Day Treatment Intensive Half Day Services is for a sharp decrease in the number of clients and related costs.

The reduction in the use of Day Treatment and Day Rehabilitation Half Day and Full Day services is due to counties using more community based services to achieve the same or better outcomes with less costly services. Counties are serving fewer children in group home and non-public school settings, which are the primary providers of day treatment and day rehabilitation services. This is due to the implementation of Mental Health Services Act (MHSA) Full Service Partnerships, the Katie A. lawsuit, and other innovations that allow counties to effectively meet the needs of clients at home rather than institutional settings.

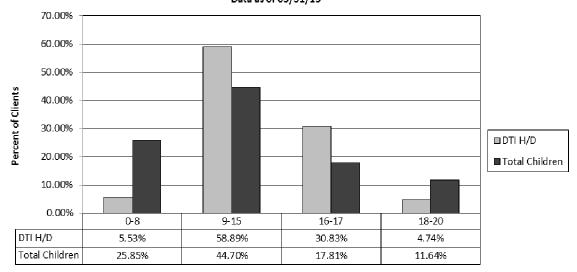
	Forecast Dollars	Forecast Clients
FY 2008-09	\$2,867,165	394
FY 2009-10	\$2,678,755	284
FY 2010-11	\$819,123	228
FY 2011-12	\$2,371,849	217
FY 2012-13	\$36,439	9
FY 2013-14	\$0	0

Budget Forecast Narrative:

There has been a sharp decline in cost with Day Treatment Intensive Half Day services over the past few years. The forecast is for this decline to reach zero dollars in FY 2013-14.

Client Profile Data:

Table 7a
CHILDREN
Clients Receiving Day Treatment Intensive-Half Day Services by Age Group
Fiscal Year 2011-12
Data as of 03/31/13



Age Group

Table 7b
CHILDREN
Clients Receiving Day Treatment Intensive-Half Day Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 03/31/13

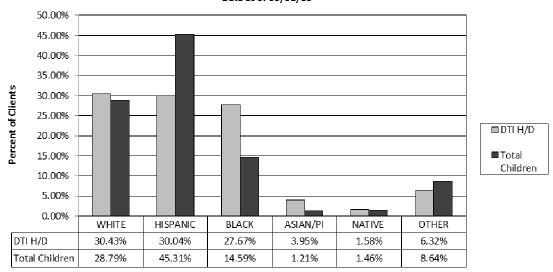


Table 7c
CHILDREN
Clients Receiving Day Treatment Intensive-Half Day Services by Gender
Fiscal Year 2011-12
Data as of 03/31/13

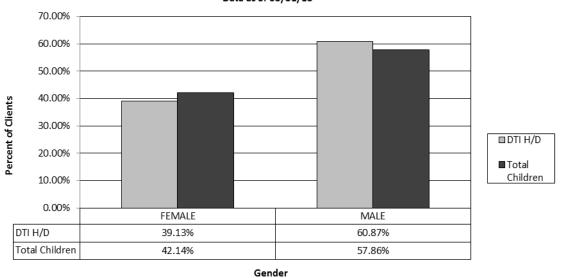


Table 7d
Other Services Received by Children Receiving Day Treatment Intensive Half Day Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
DAY TX INTENSIVE HALF DAY	217	100.0%
MEDICATION SUPPORT	214	98.6%
THERAPY AND OTHER SERVICE ACTIVITIES	148	68.2%
THERAPEUTIC BEHAVIORAL SERVICES	95	43.8%
TARGETED CASE MANAGEMENT	80	36.9%
DAY TX INTENSIVE FULL DAY	62	28.6%
CRISIS INTERVENTION	61	28.1%
DAY TX REHABILITATIVE FULL DAY	56	25.8%
CRISIS STABILIZATION	33	15.2%
HOSPITAL INPATIENT	33	15.2%
PHF	2	0.9%
ADULT CRISIS RESIDENTIAL	1	0.5%

Service Metrics:

Table 7e
Day Treatment Intensive Half Day Approved Amount
Fiscal Year 2011-12

Statistic	Amount	
Number of Clients		217
Mean	\$	10,908
Standard Deviation	\$	8,586
Median	\$	10,074
Mode	\$	525
Interquartile Range	\$	14,692
_		

Quartile	Amount		
100%	\$	26,865	
99%	\$	26,865	
95%	\$	26,235	
90%	\$	24,661	
75%	\$	17,420	
50%	\$	10,074	
25%	\$	2,728	

Table 7f
Day Treatment Intensive Half Day Facility Days
Fiscal Year 2011-12

Statistic	Amount
Number of Clients	217
Mean	103
Standard Deviation	81
Median	96
Mode	6
Interquartile Range	142

Quartile	Days
100%	256
99%	256
95%	250
90%	232
75%	164
50%	96
25%	22

Table 7g
Historical Trends
Day Treatment Intensive Half Day by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	394	284	228	217
Number of Days	28,700	25,738	23,151	22,257
Days Per Client	73	91	102	103
Approved Amount	\$2,867,165	\$2,678,755	\$819,123	\$2,371,849

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Day Treatment Intensive Full Day

Day Treatment Intensive (Full-Day):

Day treatment intensive services are a structured, multi-disciplinary program of therapy that may be used as an alternative to hospitalization, or to avoid placement in a more restrictive setting, or to maintain the client in a community setting and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to, assessment, plan development, therapy, rehabilitation and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

There has been a sharp decline in costs and clients with Day Treatment Intensive Full Day services over the past few years. The forecast for Day Treatment Intensive Full Day Services is for continued decreases in clients and costs.

The reduction in the use of Day Treatment and Day Rehabilitation Half Day and Full Day services is due to counties using more community based services to achieve the same or better outcomes with less costly services. Counties are serving fewer children in group home and non-public school settings, which are the primary providers of day treatment and day rehabilitation services. This is due to the implementation of Mental Health Services Act (MHSA) Full Service Partnerships, the Katie A. lawsuit, and other innovations that allow counties to effectively meet the needs of clients at home rather than institutional settings.

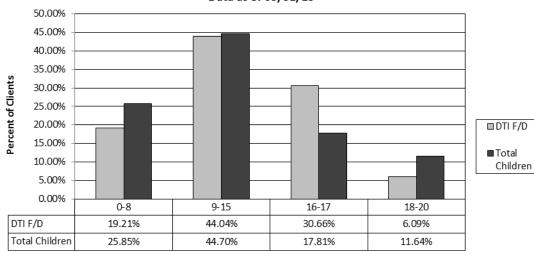
	Forecast Dollars	Forecast Clients
FY 2008-09	\$51,103,346	2,916
FY 2009-10	\$45,479,444	2,657
FY 2010-11	\$41,563,104	2,368
FY 2011-12	\$38,942,647	2,265
FY 2012-13	\$33,738,635	1,715
FY 2013-14	\$30,932,692	1,493

Budget Forecast Narrative:

Costs are expected to decline through FY 2013-14.

Client Profile Data:

Table 8a
CHILDREN
Clients Receiving Day Treatment Intensive-Full Day Services by Age Group
Fiscal Year 2011-12
Data as of 03/31/13



Age Group

Table 8b
CHILDREN
Clients Receiving Day Treatment Intensive-Full Day Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 03/31/13

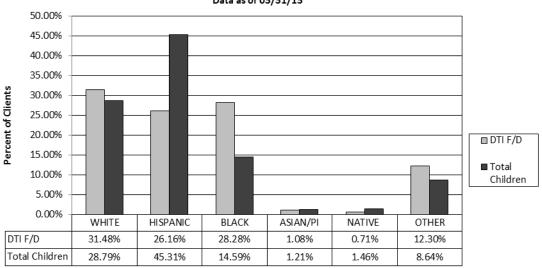


Table 8c CHILDREN Clients Receiving Day Treatment Intensive-Full Day Services by Gender Fiscal Year 2011-12 Data as of 03/31/13

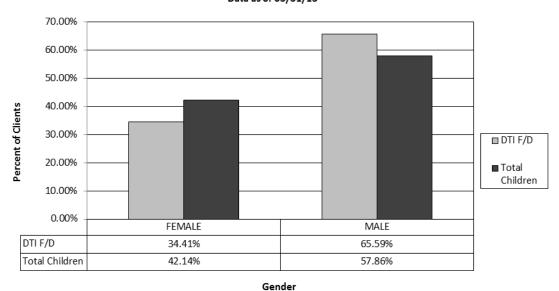


Table 8d
Other Services Received by Children Receiving Day Treatment Intensive Full Day Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
DAY TX INTENSIVE FULL DAY	2,265	100.0%
THERAPY AND OTHER SERVICE ACTIVITIES	1,844	81.4%
MEDICATION SUPPORT	1,739	76.8%
TARGETED CASE MANAGEMENT	1,331	58.8%
THERAPEUTIC BEHAVIORAL SERVICES	550	24.3%
CRISIS INTERVENTION	515	22.7%
CRISIS STABILIZATION	322	14.2%
DAY TX REHABILITATIVE FULL DAY	226	10.0%
PHF	117	5.2%
HOSPITAL INPATIENT	95	4.2%
DAY TX INTENSIVE HALF DAY	62	2.7%
ADULT RESIDENTIAL	14	0.6%
DAY TX REHABILITATIVE HALF DAY	5	0.2%
ADULT CRISIS RESIDENTIAL	2	0.1%

Service Metrics:

Table 8e
Day Treatment Intensive Full Day Approved Amount
Fiscal Year 2011-12

Statistic	Amount	
Number of Clients	2,265	
Mean	\$ 17,261	
Standard Deviation	\$ 13,504	
Median	\$ 14,175	
Mode	\$ 202	
Interquartile Range	\$ 22,320	

Quartile	Amount		
100%	\$	56,717	
99%	\$	47,976	
95%	\$	41,900	
90%	\$	37,652	
75%	\$	27,643	
50%	\$	14,175	
25%	\$	5,323	

Table 8f
Day Treatment Intensive Full Days
Fiscal Year 2011-12

Statistic	Amount
Number of Clients	2,265
Mean	93
Standard Deviation	70
Median	80
Mode	1
Interquartile Range	118

Quartile	Days
100%	337
99%	241
95%	217
90%	200
75%	149
50%	80
25%	31

Table 8g Historical Trends Day Treatment Intensive Full Day by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	2,916	2,657	2,368	2,265
Number of Days	280,805	252,788	225,124	209,888
Days Per Client	96	95	95	93
Approved Amount	\$51,103,346	\$45,479,444	\$41,563,104	\$38,942,647

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Medication Support

Medication Support:

Medication support services include prescribing, administering, dispensing and monitoring of psychiatric medications or biologicals that are necessary to alleviate the symptoms of mental illness. Service activities may include but are not limited to: evaluation of the need for medication; evaluation of clinical effectiveness and side effects; obtaining informed consent; instruction in the use, risks and benefits of, and alternatives for, medication; collateral and plan development related to the delivery of service and/or assessment for the client; prescribing, administering, dispensing and monitoring of psychiatric medications or biologicals; and medication education.

Summary:

The number of unduplicated clients is forecast to decrease slightly with an overall increase in costs per minute and total costs through SFY 2013-14.

	Forecast Dollars	Forecast Clients
FY 2008-09	\$90,778,784	69,283
FY 2009-10	\$92,626,517	70,149
FY 2010-11	\$95,677,356	70,839
FY 2011-12	\$98,095,461	73,286
FY 2012-13	\$106,450,574	74,733
FY 2013-14	\$110,971,838	76,605

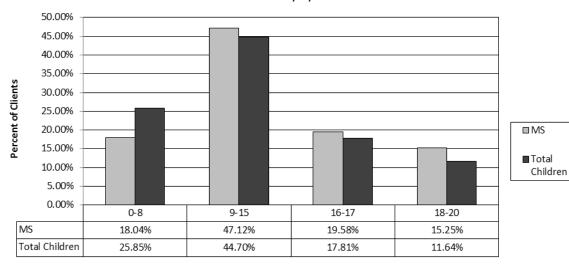
Budget Forecast Narrative:

The Medication Support costs are expected to increase through SFY 2013-14.

Client Profile Data:

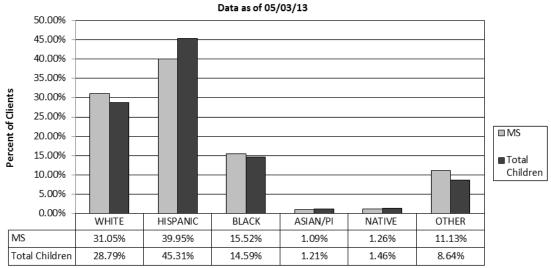
Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of March 31, 2013.

Table 9a
CHILDREN
Clients Receiving Medication Support Services by Age Group
Fiscal Year 2011-12
Data as of 05/03/13



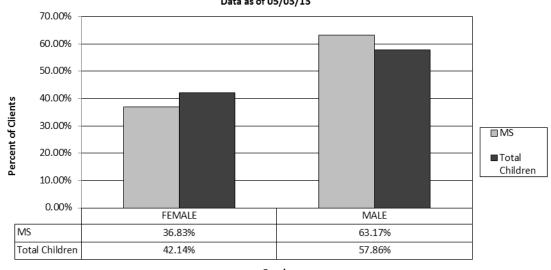
Age Group

Table 9b
CHILDREN
Clients Receiving Medication Support Services by Race/Ethnicity
Fiscal Year 2011-12



Race/Ethnicity

Table 9c
CHILDREN
Clients Receiving Medication Support Services by Gender
Fiscal Year 2011-12
Data as of 05/03/13



Gender

Table 9d
Other Services Received by Children Receiving Medication Support Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
MEDICATION SUPPORT	73,286	100.0%
THERAPY AND OTHER SERVICE ACTIVITIES	64,807	88.4%
TARGETED CASE MANAGEMENT	39,627	54.1%
CRISIS INTERVENTION	10,006	13.7%
THERAPEUTIC BEHAVIORAL SERVICES	5,385	7.3%
CRISIS STABILIZATION	3,880	5.3%
DAY TX INTENSIVE FULL DAY	1,739	2.4%
HOSPITAL INPATIENT	1,328	1.8%
DAY TX REHABILITATIVE FULL DAY	1,173	1.6%
PHF	430	0.6%
DAY TX INTENSIVE HALF DAY	214	0.3%
ADULT CRISIS RESIDENTIAL	209	0.3%
ADULT RESIDENTIAL	90	0.1%
DAY TX REHABILITATIVE HALF DAY	65	0.1%

Service Metrics:

Table 9e Medication Support Approved Amount Fiscal Year 2011-12

Statistic	Α	Amount	
Number of Clients		73,286	
Mean	\$	1,349	
Standard Deviation	\$	1,764	
Median	\$	886	
Mode	\$	578	
Interquartile Range	\$	1,227	

Quartile	Amount
100%	\$ 43,430
99%	\$ 8,009
95%	\$ 3,890
90%	\$ 2,820
75%	\$ 1,661
50%	\$ 886
25%	\$ 434

Table 9f Medication Support Minutes Fiscal Year 2011-12

Statistic	Minutes
Number of Clients	73,286
Mean	317
Standard Deviation	412
Median	211
Mode	90
Interquartile Range	270

Quartile	Minutes
100%	9,828
99%	1,926
95%	901
90%	650
75%	385
50%	211
25%	115

Table 9g Historical Trends Medication Support by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	69,283	70,149	70,839	73,286
Number of Minutes	21,471,506	22,028,047	22,977,541	23,249,856
Minutes Per Client	310	314	324	317
Approved Amount	\$90,778,784	\$92,626,517	\$95,677,356	\$98,095,461

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Psychiatric Health Facility Services

Psychiatric Health Facility (PHF):

"Psychiatric Health Facility" means a facility licensed under the provisions beginning with Section 77001 of Chapter 9, Division 5, Title 22 of the California Code of Regulations. "Psychiatric Health Facility Services" are therapeutic and/or rehabilitative services provided in a psychiatric health facility on an inpatient basis to beneficiaries who need acute care, which meets the criteria of Section 1820.205 of Chapter 11, Division 1, Title 9 of the California Code of Regulations, and whose physical health needs can be met in an affiliated general acute care hospital or in outpatient settings. These services are separate from those categorized as "Psychiatric Hospital Inpatient".

Summary:

The forecast for Psychiatric Health Facility (PHF) Services shows an increase in the number of clients and total costs through SFY 2013-14.

	Forecast Dollars	Forecast Clients
FY 2008-09	\$3,768,537	561
FY 2009-10	\$3,743,149	588
FY 2010-11	\$4,699,605	602
FY 2011-12	\$4,633,065	620
FY 2012-13	\$5,230,562	661
FY 2013-14	\$5,553,170	709

Budget Forecast Narrative:

The total annual costs are expected to increase through FY 2013-14.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of March 31, 2013.

Table 10a Clients Receiving PHF Services by Age Group Fiscal Year 2011-12 Data as of 03/31/13

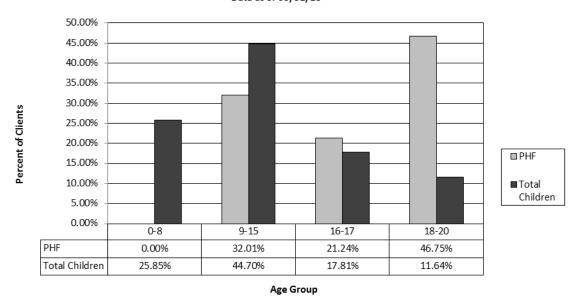
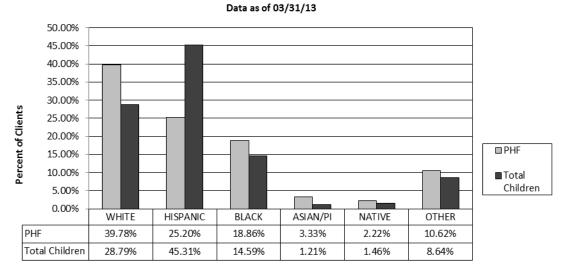


Table 10b CHILDREN Clients Receiving PHF Services by Race/Ethnicity Fiscal Year 2011-12



Race/Ethnicity

Table 10c CHILDREN Clients Receiving PHF Services by Gender Fiscal Year 2011-12 Data as of 03/31/13

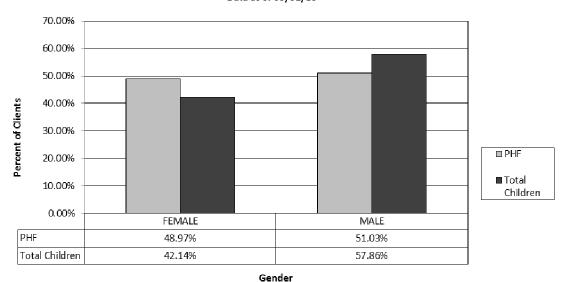


Table 10d
Other Services Received by Children Receiving Psychiatric Health Facility Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
PHF	620	100.0%
THERAPY AND OTHER SERVICE ACTIVITIES	477	76.9%
MEDICATION SUPPORT	430	69.4%
TARGETED CASE MANAGEMENT	389	62.7%
CRISIS INTERVENTION	333	53.7%
CRISIS STABILIZATION	319	51.5%
DAY TX INTENSIVE FULL DAY	117	18.9%
THERAPEUTIC BEHAVIORAL SERVICES	110	17.7%
ADULT CRISIS RESIDENTIAL	40	6.5%
HOSPITAL INPATIENT	33	5.3%
DAY TX REHABILITATIVE FULL DAY	28	4.5%
ADULT RESIDENTIAL	4	0.6%
DAY TX INTENSIVE HALF DAY	2	0.3%

Service Metrics:

Table 10e Psychiatric Health Facility Approved Amount Fiscal Year 2011-12

Statistic	F	Amount
Number of Clients		620
Mean	\$	7,517
Standard Deviation	\$	15,752
Median	\$	3,062
Mode	\$	612
Interquartile Range	\$	5,512

Quartile	Amount
100%	\$ 196,661
99%	\$ 79,947
95%	\$ 27,561
90%	\$ 15,374
75%	\$ 6,737
50%	\$ 3,062
25%	\$ 1,225

Table 10f Psychiatric Health Facility Days Fiscal Year 2011-12

Statistic	Amount
Number of Clients	620
Mean	13
Standard Deviation	28
Median	5
Mode	1
Interquartile Range	10

Quartile	Days
100%	336
99%	156
95%	51
90%	28
75%	12
50%	5
25%	2

Table 10g Historical Trends Psychiatric Health Facility Services by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	561	588	602	620
Number of Days	7,296	7,274	8,586	8,167
Days Per Client	13	12	14	13
Approved Amount	\$3,768,537	\$3,743,149	\$4,699,605	\$4,633,065

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Psychiatric Inpatient Hospital Services – SD/MC Hospitals

<u>Psychiatric Hospital Inpatient Services – SD/MC Hospitals:</u>

Psychiatric inpatient hospital services include both acute psychiatric inpatient hospital services and administrative day services. Acute psychiatric inpatient hospital services are provided to beneficiaries for whom the level of care provided in a hospital is medically necessary to diagnose or treat a covered mental illness. Administrative day services are inpatient hospital services provided to beneficiaries who were admitted to the hospital for an acute psychiatric inpatient hospital service and the beneficiary's stay at the hospital must be continued beyond the beneficiary's need for acute psychiatric inpatient hospital services due to lack of residential placement options at non-acute residential treatment facilities that meet the needs of the beneficiary.

Psychiatric inpatient hospital services are provided by Short-Doyle / Medi-Cal (SD/MC) hospitals and Fee-for-Service / Medi-Cal (FFS/MC) hospitals. Mental Health Plans (MHPs) claim reimbursement for the cost of psychiatric inpatient hospital services provided by Short-Doyle Medi-Cal hospitals through the Short-Doyle Medi-Cal (SD/MC) claiming system. FFS/MC hospitals claim reimbursement for the cost of psychiatric inpatient hospital services through the FFS/MC Fiscal Intermediary system. MHPs are responsible for authorization of psychiatric inpatient hospital services reimbursed through either billing system. For SD/MC hospitals, the daily rate includes the cost of any needed professional services. The FFS/MC hospital daily rate does not include professional services, which are billed separately from the FFS/MC inpatient hospital services via the SD/MC claiming system.

Summary:

The forecast for Psychiatric Hospital Inpatient Services provided by SD/MC hospitals shows a small growth in cost and clients through FY 2013-14.

	Forecast Dollars	Forecast Clients
FY 2008-09	\$12,504,102	1,876
FY 2009-10	\$14,453,454	1,852
FY 2010-11	\$12,506,982	1,980
FY 2011-12	\$13,197,314	2,014
FY 2012-13	\$14,404,202	2,032
FY 2013-14	\$14,921,399	2,097

Budget Forecast Narrative:

Costs for Psychiatric Hospital Inpatient Services are forecast to increase slightly through FY 2013-14.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of March 31, 2013.

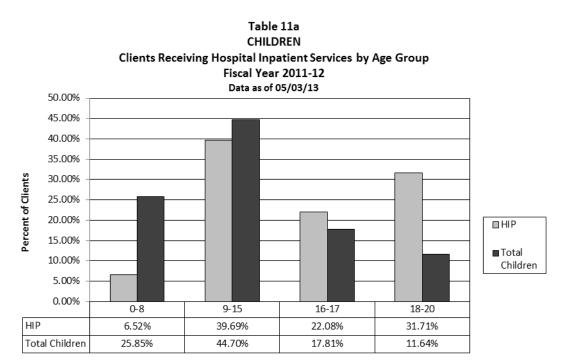
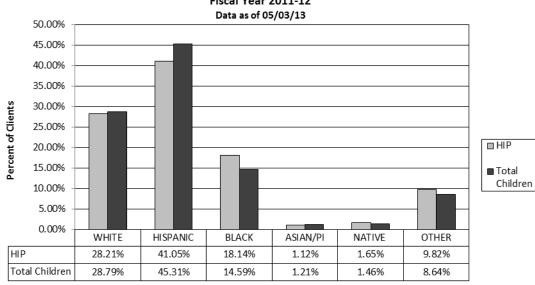
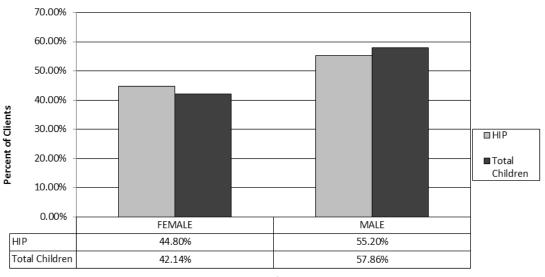


Table 11b
CHILDREN
Clients Receiving Hospital Inpatient Services by Race/Ethnicity
Fiscal Year 2011-12



Race/Ethnicity

Table 11c CHILDREN
Clients Receiving Hospital Inpatient Services by Gender
Fiscal Year 2011-12
Data as of 05/03/13



Gender

Table 11d Other Services Received by Children Receiving Hospital Inpatient Services Fiscal Year 2011-12

	Number of Clients	Percent Clients
HOSPITAL INPATIENT	2,014	100.0%
THERAPY AND OTHER SERVICE ACTIVITIES	1,583	78.6%
TARGETED CASE MANAGEMENT	1,329	66.0%
MEDICATION SUPPORT	1,328	65.9%
CRISIS INTERVENTION	1,100	54.6%
CRISIS STABILIZATION	975	48.4%
THERAPEUTIC BEHAVIORAL SERVICES	270	13.4%
DAY TX INTENSIVE FULL DAY	95	4.7%
DAY TX REHABILITATIVE FULL DAY	69	3.4%
ADULT CRISIS RESIDENTIAL	43	2.1%
DAY TX INTENSIVE HALF DAY	33	1.6%
PHF	33	1.6%
ADULT RESIDENTIAL	14	0.7%

Service Metrics:

Table 11e
Psychiatric Hospital Inpatient Approved Amount
Fiscal Year 2011-12

Statistic	А	Amount	
Number of Clients		2,014	
Mean	\$	6,579	
Standard Deviation	\$	7,881	
Median	\$	3,900	
Mode	\$	2,428	
Interquartile Range	\$	5,392	

Quartile	Amount	
100%	\$	102,308
99%	\$	40,021
95%	\$	21,109
90%	\$	13,960
75%	\$	7,817
50%	\$	3,900
25%	\$	2,426

Table 11f Psychiatric Hospital Inpatient Facility Days Fiscal Year 2011-12

Statistic	Amount
Number of Clients	2,014
Mean	8
Standard Deviation	10
Median	4
Mode	2
Interquartile Range	8

_				
	Quartile	Days		
	100%	138		
	99%	46		
	95%	26		
	90%	18		
	75%	10		
	50%	4		
	25%	2		

Table 11g Historical Trends Psychiatric Hospital Inpatient by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	1,876	1,852	1,980	2,014
Number of Days	16,126	17,701	15,928	15,922
Days Per Client	9	10	8	8
Approved Amount	\$12,504,102	\$14,453,454	\$12,506,982	\$13,197,314

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Targeted Case Management

Targeted Case Management (TCM):

Targeted case management is a service that assists a beneficiary in accessing needed medical, educational, social, prevocational, vocational, rehabilitative, or other community services. The service activities may include, but are not limited to, communication, coordination and referral; monitoring service delivery to ensure beneficiary access to services and the service delivery system; monitoring of the beneficiary's progress, placement services, and plan development. TCM services may be face-to-face or by telephone with the client or significant support persons and may be provided anywhere in the community. Additionally, services may be provided by any person determined by the MHP to be qualified to provide the service, consistent with the scope of practice and state law.

Summary:

The forecast for Targeted Case Management Services shows a growth in cost and clients through 2013-14.

	Forecast Dollars	Forecast Clients
FY 2008-09	\$81,814,298	89,348
FY 2009-10	\$78,304,421	90,638
FY 2010-11	\$76,047,232	90,561
FY 2011-12	\$75,947,101	94,671
FY 2012-13	\$80,090,123	95,902
FY 2013-14	\$81,535,068	98,614

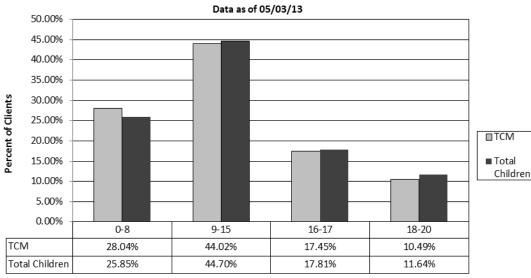
Budget Forecast Narrative:

Costs for Targeted Case Management are forecast to increase through FY 2013-14.

Client Profile Data:

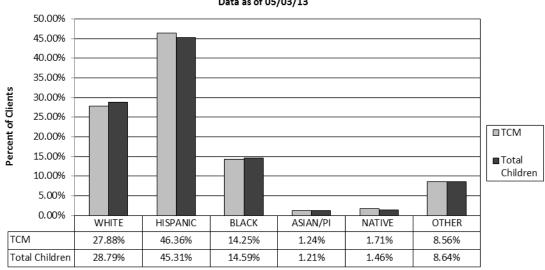
Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of March 31, 2013.

Table 12a
CHILDREN
Clients Receiving Targeted Case Management Services by Age Group
Fiscal Year 2011-12



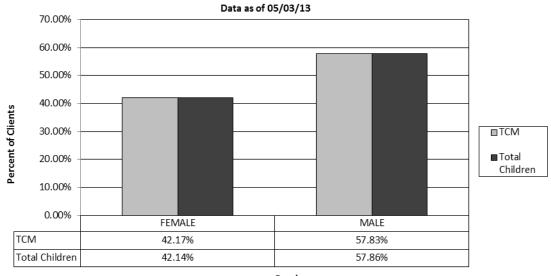
Age Group

Table 12b
CHILDREN
Clients Receiving Targeted Case Management Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 05/03/13



Race/Ethnicity

Table 12c
CHILDREN
Clients Receiving Targeted Case Management Services by Gender
Fiscal Year 2011-12



Gender

Table 12d
Other Services Received by Children Receiving Targeted Case Management Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
TARGETED CASE MANAGEMENT	94,671	100.0%
THERAPY AND OTHER SERVICE ACTIVITIES	89,139	94.2%
MEDICATION SUPPORT	39,627	41.9%
CRISIS INTERVENTION	10,982	11.6%
THERAPEUTIC BEHAVIORAL SERVICES	5,617	5.9%
CRISIS STABILIZATION	3,546	3.7%
DAY TX INTENSIVE FULL DAY	1,331	1.4%
HOSPITAL INPATIENT	1,329	1.4%
DAY TX REHABILITATIVE FULL DAY	710	0.7%
PHF	389	0.4%
ADULT CRISIS RESIDENTIAL	170	0.2%
DAY TX INTENSIVE HALF DAY	80	0.1%
ADULT RESIDENTIAL	77	0.1%
DAY TX REHABILITATIVE HALF DAY	54	0.1%

Service Metrics:

Table 12e
Targeted Case Management Approved Amount
Fiscal Year 2011-12

Statistic	А	Amount	
Number of Clients		94,671	
Mean	\$	806	
Standard Deviation	\$	1,782	
Median	\$	269	
Mode	\$	60	
Interquartile Range	\$	625	

Quartile	Amount	
100%	\$	65,832
99%	\$	8,595
95%	\$	3,258
90%	\$	1,880
75%	\$	739
50%	\$	269
25%	\$	114

Table 12f
Targeted Case Management Minutes
Fiscal Year 2011-12

Statistic	Minutes
Number of Clients	94,671
Mean	440
Standard Deviation	991
Median	145
Mode	60
Interquartile Range	342

Quartile	Minutes
100%	32,590
99%	4,770
95%	1,787
90%	1,028
75%	402
50%	145
25%	60

Table 12g
Historical Trends
Targeted Case Management by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	89,348	90,638	90,561	94,671
Number of Minutes	43,863,813	41,601,092	40,535,315	41,697,313
Minutes Per Client	491	459	448	440
Approved Amount	\$81,814,298	\$78,304,421	\$76,047,232	\$75,947,101

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Therapeutic Behavioral Service

Therapeutic Behavioral Services (TBS):

Therapeutic behavioral services are intensive, individualized, short-term outpatient treatment interventions for beneficiaries up to age 21. Individuals receiving these services have serious emotional disturbances (SED), are experiencing a stressful transition or life crisis and need additional short-term, specific support services to accomplish outcomes specified in the written treatment plan.

Summary:

TBS has shown rapid growth since its inception. Recent trends reflected in claims data points to continued growth that may accelerate, consistent with the settlement objectives of the Emily Q. lawsuit.

	Forecast Dollars	Forecast Clients
FY 2008-09	\$62,984,126	4,210
FY 2009-10	\$69,167,751	5,169
FY 2010-11	\$80,675,140	6,432
FY 2011-12	\$87,089,611	7,339
FY 2012-13	\$96,351,059	8,246
FY 2013-14	\$103,260,043	9,051

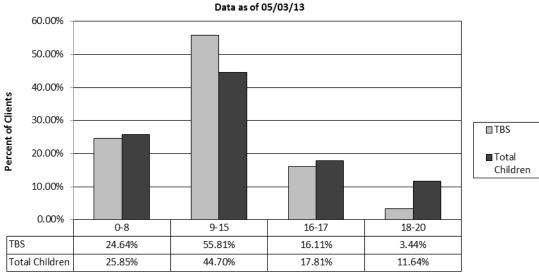
Budget Forecast Narrative:

Medi-Cal is required to provide TBS services to eligible Medi-Cal beneficiaries under age 21; this requirement was an outcome of a 2001 Judgment and Permanent Injunction in the Emily Q. v. Bonta lawsuit. The settlement established a benchmark whereby four percent of children and youth receiving EPSDT services would be recipients of TBS. TBS has experienced significant caseload and expenditure growth in recent years, with expenditures increasing at a slightly higher rate. TBS is a relatively costly service and the increase in clients and costs per minute points to continued increases in total cost in the coming years.

Client Profile Data:

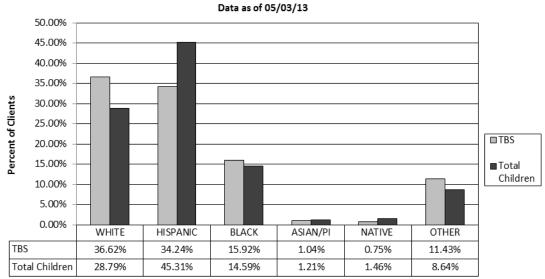
Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of March 31, 2013.

Table 13a
CHILDREN
Clients Receiving Therapeutic Behavioral Services by Age Group
Fiscal Year 2011-12



Age Group

Table 13b
CHILDREN
Clients Receiving Therapeutic Behavioral Services by Race/Ethnicity
Fiscal Year 2011-12



Race/Ethnicity

Table 13c
CHILDREN
Clients Receiving Therapeutic Behavioral Services by Gender
Fiscal Year 2011-12

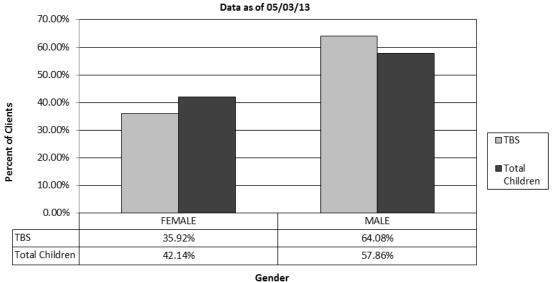


Table 13d

Other Services Received by Children Receiving Therapeutic Behavioral Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
THERAPEUTIC BEHAVIORAL SERVICES	7,339	100.0%
THERAPY AND OTHER SERVICE ACTIVITIES	7,085	96.5%
TARGETED CASE MANAGEMENT	5,617	76.5%
MEDICATION SUPPORT	5,385	73.4%
CRISIS INTERVENTION	1,975	26.9%
CRISIS STABILIZATION	771	10.5%
DAY TX INTENSIVE FULL DAY	550	7.5%
HOSPITAL INPATIENT	270	3.7%
DAY TX REHABILITATIVE FULL DAY	252	3.4%
PHF	110	1.5%
DAY TX INTENSIVE HALF DAY	95	1.3%
ADULT CRISIS RESIDENTIAL	11	0.1%
DAY TX REHABILITATIVE HALF DAY	11	0.1%
ADULT RESIDENTIAL	6	0.1%

Service Metrics:

Table 13e
Therapeutic Behavioral Services Approved Amount
Fiscal Year 2011-12

Statistic	Amount	
Number of Clients	7,339	
Mean	\$	11,882
Standard Deviation	\$	13,987
Median	\$	7,603
Mode	\$	313
Interquartile Range	\$	12,638

Quartile	Amount		
100%	\$	166,859	
99%	\$	66,404	
95%	\$	38,401	
90%	\$	28,110	
75%	\$	15,544	
50%	\$	7,603	
25%	\$	2,906	

Table 13f
Therapeutic Behavioral Services Minutes
Fiscal Year 2011-12

Statistic	Minutes
Number of Clients	7,339
Mean	5,615
Standard Deviation	6,394
Median	3,762
Mode	120
Interquartile Range	6,166

Quartile	Minutes
100%	73,918
99%	29,855
95%	17,484
90%	12,839
75%	7,577
50%	3,762
25%	1,411

Table 13g
Historical Trends
Therapeutic Behavioral Service by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	4,210	5,169	6,432	7,339
Number of Minutes	28,751,510	33,219,333	39,935,039	41,211,665
Minutes Per Client	6,829	6427	6,208	5,615
Approved Amount	\$62,984,126	\$69,167,751	\$80,675,140	\$87,089,611

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Therapy and Other Service Activities

Therapy and Other Service Activities (formerly referred to as Mental Health Services): Individual or group therapies and interventions are designed to provide a reduction of mental disability and restoration, improvement or maintenance of functioning consistent with the goals of learning, development, independent living, and enhanced self-sufficiency. These services are separate from those provided as components of adult residential services, treatment services, crisis intervention, crisis stabilization, day rehabilitation, or day treatment intensive. Service activities may include, but are not limited to:

- Assessment A service activity designed to evaluate the current status of mental, emotional, or behavioral health. Assessment includes, but is not limited to, one or more of the following: mental status determination, analysis of the clinical history, analysis of relevant cultural issues and history; diagnosis; and the use of mental health testing procedures.
- Plan Development A service activity that consists of development of client plans, approval of client plans, and/or monitoring and recording of progress.
- 3. <u>Therapy</u> A service activity that is a therapeutic intervention that focuses primarily on symptom reduction as a means to reduce functional impairments. Therapy may be delivered to an individual or group and may include family therapy at which the client is present.
- 4. <u>Rehabilitation</u> A service activity that includes, but is not limited to, assistance, improving, maintaining or restoring functional skills, daily living skills, social and leisure skills, grooming and personal hygiene skills; obtaining support resources; and/or obtaining medication education.
- 5. <u>Collateral</u> A service activity involving a significant support person in the beneficiary's life for the purpose of addressing the mental health needs of the beneficiary in terms of achieving goals of the beneficiary's client plan. Collateral may include, but is not limited to, consultation and training of the significant support person(s) to assist in better utilization of mental health services by the client, consultation and training of the significant support person(s) to assist in better understanding of mental illness, and family counseling with the significant support person(s) in achieving the goals of the client plan. The client may or may not be present for this service activity.

The distribution of use and expenditures of each service activity varies over time with changes in client needs.

Summary:

The forecast for Therapy and Other Service Activities dollars and clients shows substantial growth primarily driven by an increase in the number of clients served.

	Forecast Dollars	Forecast Clients
FY 2008-09	\$828,266,009	192,601
FY 2009-10	\$829,471,455	195,728
FY 2010-11	\$871,082,886	201,343
FY 2011-12	\$930,152,851	214,322
FY 2012-13	\$1,020,824,204	227,140
FY 2013-14	\$1,084,219,696	236,287

Budget Forecast Narrative:

Costs for Therapy and Other Service Activities are forecast to increase through FY 2013-14.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of March 31, 2013.

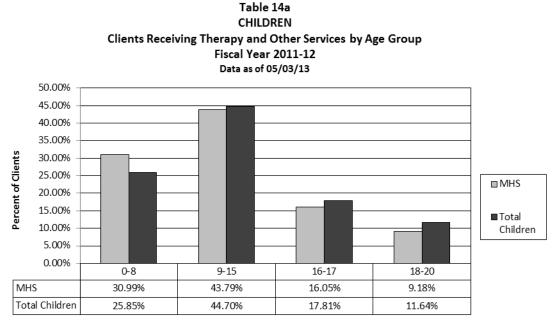
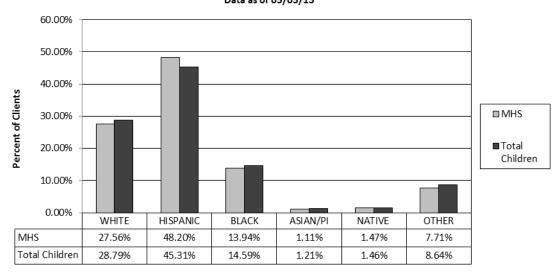
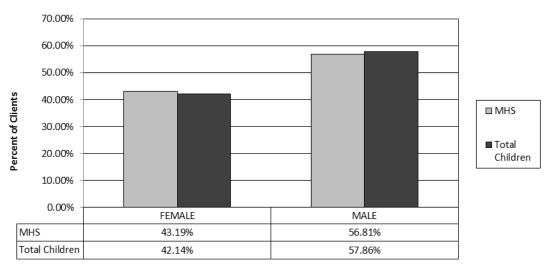


Table 14b
CHILDREN
Clients Receiving Mental Health Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 05/03/13



Race/Ethnicity

Table 14c CHILDREN Clients Receiving Mental Health Services by Gender Fiscal Year 2011-12 Data as of 05/03/13



Gender

Table 14d
Other Services Received by Children Receiving Therapy and Other Service Activities
Fiscal Year 2011-12

	Number of Clients	Percent Clients
THERAPY AND OTHER SERVICE ACTIVITIES	214,322	100.0%
TARGETED CASE MANAGEMENT	89,139	41.6%
MEDICATION SUPPORT	64,807	30.2%
CRISIS INTERVENTION	14,134	6.6%
THERAPEUTIC BEHAVIORAL SERVICES	7,085	3.3%
CRISIS STABILIZATION	4,922	2.3%
DAY TX INTENSIVE FULL DAY	1,844	0.9%
HOSPITAL INPATIENT	1,583	0.7%
DAY TX REHABILITATIVE FULL DAY	1,229	0.6%
PHF	477	0.2%
ADULT CRISIS RESIDENTIAL	197	0.1%
DAY TX INTENSIVE HALF DAY	148	0.1%
ADULT RESIDENTIAL	84	0.0%
DAY TX REHABILITATIVE HALF DAY	65	0.0%

Service Metrics:

Table 14e
Therapy and Other Service Activities Approved Amount
Fiscal Year 2011-12

Statistic	Amount
Number of Clients	214,322
Mean	\$ 4,672
Standard Deviation	\$ 6,860
Median	\$ 2,137
Mode	\$ 157
Interquartile Range	\$ 4,556

Quartile	Amount
100%	\$ 262,195
99%	\$ 33,180
95%	\$ 15,778
90%	\$ 10,443
75%	\$ 5,261
50%	\$ 2,137
25%	\$ 705

Table 14f Therapy and Other Service Activities Minutes Fiscal Year 2011-12

Statistic	Minutes
Number of Clients	214,322
Mean	1,865
Standard Deviation	2,858
Median	966
Mode	60
Interquartile Range	1,938

Minutes
106,592
13,763
6,647
4,415
2,275
966
337

Table 14g Historical Trends Therapy and Other Service Activities by Fiscal Year

Data Type	2008-2009	2009-2010*	2010-2011	2011-2012*
Number of Clients	192,601	195,728	201,343	214,322
Number of Minutes	377,655,636	446,775,555	380,811,932	399,811,953
Minutes Per Client	1,961	2,283	1,891	1,865
Approved Amount	\$828,266,009	\$829,471,455	\$871,082,886	\$930,152,851

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013. The large increase in the number of minutes for FY 2009-10 is due to over reporting of units of time by certain counties while implementing new billing systems.

Psychiatric Inpatient Hospital Services – FFS/MC Hospitals

Psychiatric Inpatient Hospital Services - FFS/MC Hospitals:

Psychiatric inpatient hospital services include both acute psychiatric inpatient hospital services and administrative day services. Acute psychiatric inpatient hospital services are provided to beneficiaries for whom the level of care provided in a hospital is medically necessary to diagnose or treat a covered mental illness. Administrative day services are inpatient hospital services provided to beneficiaries who were admitted to the hospital for an acute psychiatric inpatient hospital service and the beneficiary's stay at the hospital must be continued beyond the beneficiary's need for acute psychiatric inpatient hospital services due to lack of residential placement options at non-acute residential treatment facilities that meet the needs of the beneficiary.

Psychiatric inpatient hospital services are provided by Short-Doyle / Medi-Cal (SD/MC) hospitals and Fee-for-Service / Medi-Cal (FFS/MC) hospitals. Mental Health Plans (MHPs) claim reimbursement for the cost of psychiatric inpatient hospital services provided by Short-Doyle Medi-Cal hospitals through the Short-Doyle Medi-Cal (SD/MC) claiming system. FFS/MC hospitals claim reimbursement for the cost of psychiatric inpatient hospital services through the FFS/MC Fiscal Intermediary system. MHPs are responsible for authorization of psychiatric inpatient hospital services reimbursed through either billing system. For SD/MC hospitals, the daily rate includes the cost of any needed professional services. The FFS/MC hospital daily rate does not include professional services, which are billed separately from the FFS/MC inpatient hospital services via the SD/MC claiming system.

Summary:

The forecast for Psychiatric Inpatient Hospital Services provided by FFS/MC hospitals shows growth in costs through 2013-14 and growth in clients in FY 2012-13 with a slight decline in FY 2013-14.

	Forecast Dollars	Forecast Clients
FY 2008-09	\$45,184,960	7,697
FY 2009-10	\$51,795,601	8,257
FY 2010-11	\$55,313,818	9,037
FY 2011-12	\$58,855,971	8,930
FY 2012-13	\$66,820,082	10,732
FY 2013-14	\$71,083,834	10,692

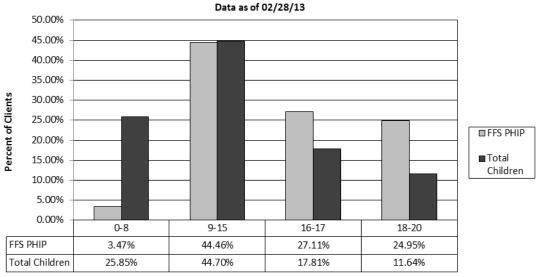
Budget Forecast Narrative:

Costs for Psychiatric Inpatient Hospital Services by FFS/MC hospitals are forecast to increase through FY 2013-14.

Client Profile Data:

Client data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of February 28, 2013.

Table 15a
CHILDREN
Clients Receiving Fee For Service Hospital Inpatient Services by Age Group
Fiscal Year 2011-12

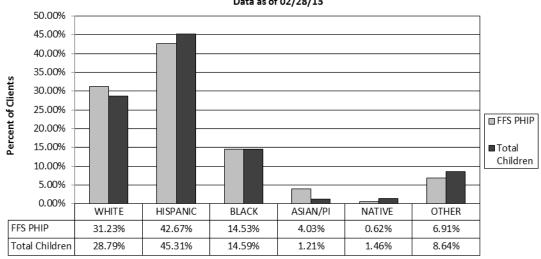


Age Group

Table 15b CHILDREN

Clients Receiving Fee For Service Psychiatric Hospital Inpatient Services by Race/Ethnicity

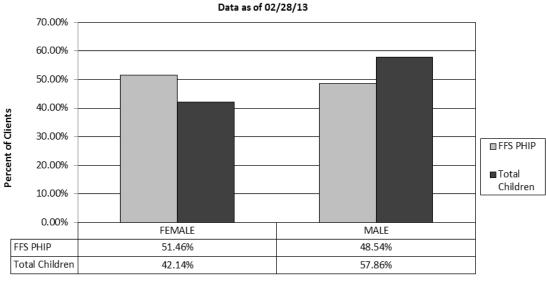
Fiscal Year 2011-12 Data as of 02/28/13



Race/Ethnicity

Table 15c CHILDREN

Clients Receiving Fee For Service Hospital Inpatient Services by Gender Fiscal Year 2011-12



Gender

Table 15d
Other Services Received by Children Receiving FFS Psychiatric Hospital Inpatient Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
FFS-HOSPITAL INPATIENT	8,930	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	7,702	86.25%
MEDICATION SUPPORT	6,537	73.20%
TARGETED CASE MANAGEMENT	5,271	59.03%
CRISIS INTERVENTION	4,789	53.63%
CRISIS STABILIZATION	2,411	27.00%
THERAPEUTIC BEHAVIORAL SERVICES	1,138	12.74%
HOSPITAL INPATIENT	523	5.86%
DAY TX INTENSIVE FULL DAY	318	3.56%
DAY TX REHABILITATIVE FULL DAY	180	2.02%
PHF	165	1.85%
ADULT CRISIS RESIDENTIAL	97	1.09%
DAY TX INTENSIVE HALF DAY	36	0.40%
ADULT RESIDENTIAL	25	0.28%
DAY TX REHABILITATIVE HALF DAY	4	0.04%

Service Metrics:

Table 15e
FFS Psychiatric Hospital Inpatient Services Approved Amount
Fiscal Year 2011-12

Statistic	Amount
Number of Clients	8,930
Mean	\$6,623
Standard Deviation	\$8,781
Median	\$3,896
Mode	\$2,508
Interquartile Range	\$5,122

Quartile	Amount
100%	\$252,787
99%	\$42,870
95%	\$20,863
90%	\$14,336
75%	\$7,470
50%	\$3,896
25%	\$2,348

Table 15f FFS Psychiatric Hospital In Patient Services Days Fiscal Year 2011-12

Statistic	Days
Number of Clients	8,930
Mean	9
Standard Deviation	11
Median	6
Mode	3
Interquartile Range	6

Quartile	Days
100%	245
99%	54
95%	28
90%	20
75%	10
50%	6
25%	4

Table 15g
Historical Trends
FFS Psychiatric Hospital Inpatient Services by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	7,697	8,257	9,037	8,930
Number of Days	67,776	75,403	78,685	82,004
Days Per Client	9	9	9	9
Approved Amount	\$45,184,960	\$51,765,601	\$55,313,818	\$58,855,971

^{*} SFY 2011-12 year data based upon actual claims through February 28, 2013.

Table of Contents

Service Type	Page
	_
Adult Crisis Residential Services	103
Adult Residential Treatment Services	107
Crisis Intervention	111
Crisis Stabilization	115
Day Rehabilitation Half Day	119
Day Rehabilitation Full Day	
Day Treatment Intensive Half Day	
Day Treatment Intensive Full Day	128
Medication Support	132
Psychiatric Health Facility Services	
Psychiatric Hospital Inpatient Services - SD/MC Hospitals	140
Targeted Case Management	144
Therapy and Other Service Activities	
Psychiatric Inpatient Hospital Services - FFS/MC Hospitals	153

Adult Crisis Residential Services

Adult Crisis Residential Services (CRS):

Adult crisis residential services provide an alternative to acute psychiatric hospital services for beneficiaries who otherwise would require hospitalization. The CRS programs for adults provide normalized living environments, integrated into residential communities. The services follow a social rehabilitation model that integrates aspects of emergency psychiatric care, psychosocial rehabilitation, milieu therapy, case management and practical social work.

Summary:

The forecast for Adult Crisis Residential Services include statistically unchanging client counts and slight increases in annual costs over the next few fiscal years.

	Forecast Dollars	Forecast Clients
FY 2008-09	\$19,007,024	3,423
FY 2009-10	\$18,871,631	3,445
FY 2010-11	\$20,054,595	3,712
FY 2011-12	\$21,712,101	3,876
FY 2012-13	\$22,307,977	3,946
FY 2013-14	\$23,134,909	4,078

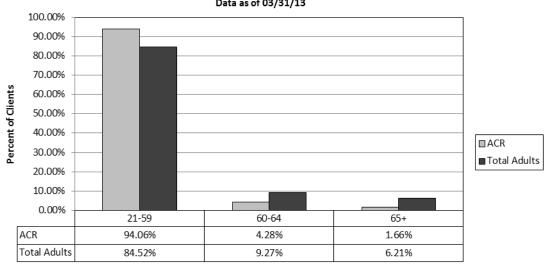
Budget Forecast Narrative:

Slight growth in dollars and clients is expected for FY 2013-14 Adult Crisis Residential Services.

Client Profile Data:

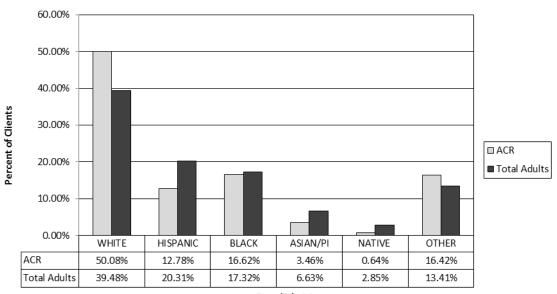
Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of March 31, 2013.

Table 1a
ADULTS
Clients Receiving Adult Crisis Residential Services by Age Group
Fiscal Year 2011-12
Data as of 03/31/13



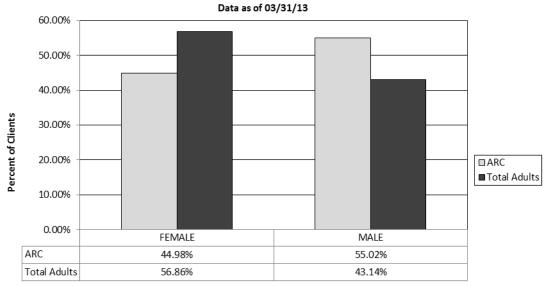
Age Group

Table 1b
ADULTS
Clients Receiving Adult Crisis Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 03/31/13



Race/Ethnicity

Table 1c
ADULTS
Clients Receiving Adult Crisis Residential Services by Gender
Fiscal Year 2011-12



Gender

Table 1d
Other Services Received by Adults Receiving Adult Crisis Service
Fiscal Year 2011-12

	Number of Clients	Percent Clients
ADULT CRISIS RESIDENTIAL	3,876	100.0%
MEDICATION SUPPORT	3,333	86.0%
THERAPY AND OTHER SERVICE ACTIVITIES	2,886	74.5%
TARGETED CASE MANAGEMENT	2,664	68.7%
CRISIS STABILIZATION	1,825	47.1%
CRISIS INTERVENTION	1,758	45.4%
HOSPITAL INPATIENT	606	15.6%
ADULT RESIDENTIAL	439	11.3%
PHF	334	8.6%
DAY TX REHABILITATIVE FULL DAY	301	7.8%
DAY TX REHABILITATIVE HALF DAY	29	0.7%
DAY TX INTENSIVE FULL DAY	4	0.1%

Table 1e
Adult Crisis Residential Approved Amount
Fiscal Year 2011-12

Statistic	Amount	
Number of Clients		3,876
Mean	\$	5,627
Standard Deviation	\$	6,205
Median	\$	3,709
Mode	\$	345
Interquartile Range	\$	5,623

Quartile	Amount	
100%	\$	67,694
99%	\$	29,703
95%	\$	17,269
90%	\$	12,434
75%	\$	7,350
50%	\$	3,709
25%	\$	1,727

Table 1f
Adult Crisis Residential Days
Fiscal Year 2011-12

Statistic	Amount
Number of Clients	3,876
Mean	18
Standard Deviation	19
Median	12
Mode	14
Interquartile Range	19
_	

Quartile	Days
100%	196
99%	89
95%	54
90%	39
75%	25
50%	13
25%	6

Table 1g
Historical Trends
Adult Crisis Residential by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	3,423	3,445	3,712	3,876
Number of Days	65,783	65,690	67,874	71,293
Days Per Client	19	19	18	18
Approved Amount	\$19,007,024	\$18,871,631	\$20,054,595	\$21,712,101

 $^{^{\}star}$ SFY 2011-12 year data based upon actual claims through March 31, 2013.

Adult Residential Services

Adult Residential Treatment Services:

Adult Residential Treatment Services are rehabilitative services provided in a non-institutional, residential setting for beneficiaries who would be at risk of hospitalization or other institutional placement if they were not receiving residential treatment services. The services include a wide range of activities and services that support beneficiaries in their effort to restore, maintain, and apply interpersonal and independent living skills and to access community support systems. Service activities may include assessment, plan development, therapy, rehabilitation, and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

The forecast for Adult Residential Services indicates a decrease in clients and total cost through FY 2013-14.

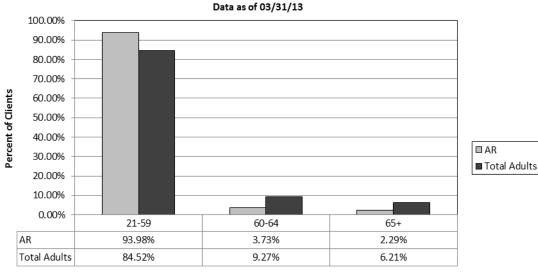
	Forecast Dollars	Forecast Clients
FY 2008-09	\$22,187,309	1,519
FY 2009-10	\$18,039,205	1,436
FY 2010-11	\$15,045,758	1,155
FY 2011-12	\$15,039,308	1,146
FY 2012-13	\$14,948,110	1,140
FY 2013-14	\$13,859,257	1,068

Budget Forecast Narrative:

The forecast indicates a declining trend in costs through FY 2013-14.

Client Profile Data:

Table 2a
ADULTS
Clients Receiving Adult Residential Services by Age Group
Fiscal Year 2011-12



Age Group

Table 2b
ADULTS
Clients Receiving Adult Residential Services by Race/Ethnicity
Fiscal Year 2011-12

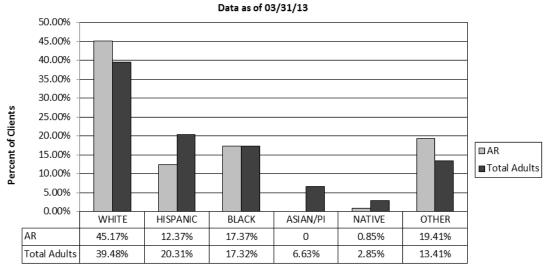
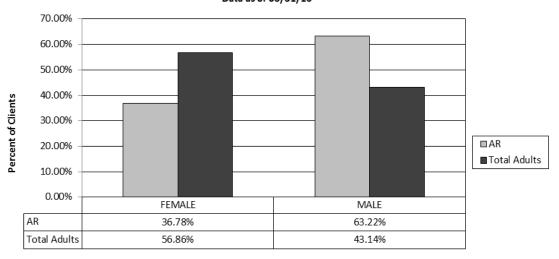


Table 2c
ADULTS
Clients Receiving Adult Residential Services by Gender
Fiscal Year 2011-12
Data as of 03/31/13



Gender

Table 2d
Other Services Received by Adults Receiving Adult Residential Service
Fiscal Year 2011-12

	Number of Clients	Percent Clients
ADULT RESIDENTIAL	1,146	100.0%
THERAPY AND OTHER SERVICE ACTIVITIES	1,012	88.3%
TARGETED CASE MANAGEMENT	967	84.4%
MEDICATION SUPPORT	904	78.9%
CRISIS STABILIZATION	476	41.5%
DAY TX REHABILITATIVE FULL DAY	474	41.4%
CRISIS INTERVENTION	466	40.7%
ADULT CRISIS RESIDENTIAL	439	38.3%
HOSPITAL INPATIENT	158	13.8%
PHF	59	5.1%
DAY TX REHABILITATIVE HALF DAY	15	1.3%
DAY TX INTENSIVE FULL DAY	12	1.0%

Table 2e
Adult Crisis Residential Approved Amount
Fiscal Year 2011-12

Statistic	Amount	
Number of Clients	1,146	
Mean	\$ 13,097	
Standard Deviation	\$ 12,531	
Median	\$ 9,434	
Mode	\$ 842	
Interquartile Range	\$ 13,982	

Quartile	Amount	
100%	\$	61,319
99%	\$	54,413
95%	\$	40,767
90%	\$	30,323
75%	\$	17,688
50%	\$	9,434
25%	\$	3,706

Table 2f
Adult Crisis Residential Days
Fiscal Year 2011-12

Statistic	Amount
Number of Clients	1,146
Mean	84
Standard Deviation	80
Median	59
Mode	5
Interquartile Range	92

Quartile	Days
100%	364
99%	327
95%	258
90%	203
75%	116
50%	59
25%	24

Table 2g Historical Trends Adult Residential by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	1,519	1,436	1,155	1,146
Number of Days	152,389	120,395	96,875	95,697
Days Per Client	100	84	84	84
Approved Amount	\$22,187,309	\$18,039,205	\$15,045,758	\$15,039,308

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Crisis Intervention

Crisis Intervention:

Crisis intervention services last less than 24 hours and are for, or on behalf of, a beneficiary for a condition that requires more timely response than a regularly scheduled visit. Service activities include, but are not limited to, assessment, collateral and therapy. Crisis Intervention services may either be face-to-face or by telephone with the beneficiary or the beneficiary's significant support person and may be provided anywhere in the community.

Summary:

While the number of clients is forecast to decrease in FY 2013-14 for Crisis Intervention services, the costs should increase slightly through FY 2013-14.

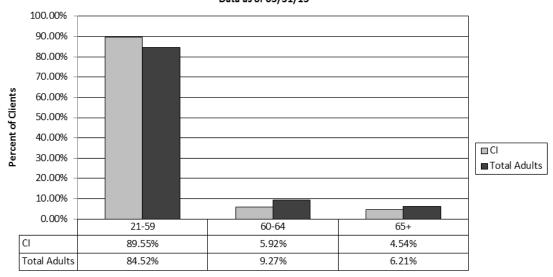
	Forecast Dollars	Forecast Clients
FY 2008-09	\$29,575,525	36,007
FY 2009-10	\$27,848,697	33,946
FY 2010-11	\$26,660,355	31,836
FY 2011-12	\$26,868,963	30,803
FY 2012-13	\$29,677,532	30,969
FY 2013-14	\$30,132,457	30,045

Budget Forecast Narrative:

Costs for Crisis Intervention services should increase slightly through FY 2013-14.

Client Profile Data:

Table 3a
ADULTS
Clients Receiving Crisis Intervention by Age Group
Fiscal Year 2011-12
Data as of 03/31/13



Age Group

Table 3b
ADULTS
Clients Receiving Crisis Intervention by Race/Ethnicity
Fiscal Year 2011-12
Data as of 03/31/13

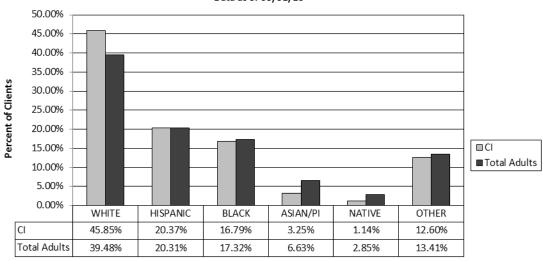
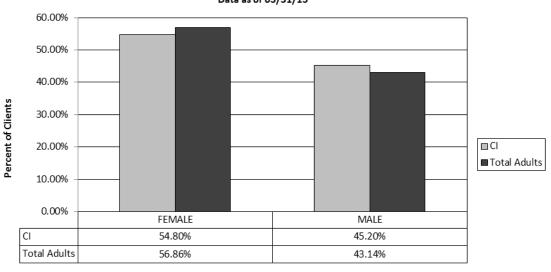


Table 3c ADULTS Clients Receiving Crisis Intervention by Gender Fiscal Year 2011-12 Data as of 03/31/13



Gender

Table 3d
Other Services Received by Adults Receiving Crisis Intervention Service
Service Fiscal Year 2011-12

	Number of Clients	Percent Clients
CRISIS INTERVENTION	30,803	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	21,085	68.45%
MEDICATION SUPPORT	19,521	63.37%
TARGETED CASE MANAGEMENT	17,399	56.48%
CRISIS STABILIZATION	6,555	21.28%
HOSPITAL INPATIENT	2,849	9.25%
ADULT CRISIS RESIDENTIAL	1,758	5.71%
PHF	1,574	5.11%
ADULT RESIDENTIAL	466	1.51%
DAY TX REHABILITATIVE FULL DAY	323	1.05%
DAY TX REHABILITATIVE HALF DAY	42	0.14%
DAY TX INTENSIVE FULL DAY	2	0.01%

Table 3e
Crisis Intervention Approved Amount
Fiscal Year 2011-12

Statistic	А	Amount	
Number of Clients		30,803	
Mean	\$	883	
Standard Deviation	\$	1,029	
Median	\$	574	
Mode	\$	466	
Interquartile Range	\$	757	

Quartile	Amount
100%	\$ 22,271
99%	\$ 5,122
95%	\$ 2,685
90%	\$ 1,862
75%	\$ 1,048
50%	\$ 574
25%	\$ 291

Table 3f
Crisis Intervention Minutes
Fiscal Year 2011-12

Statistic	Minutes
Number of Clients	30,803
Mean	233
Standard Deviation	273
Median	150
Mode	120
Interquartile Range	200

Quartile	Minutes
100%	5,809
99%	1,372
95%	716
90%	485
75%	280
50%	150
25%	80

Table 3g
Historical Trends
Crisis Intervention Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	36,007	33,946	31,836	30,803
Number of Minutes	7,899,429	7,450,270	7,115,272	7,184,863
Minutes Per Client	219	219	223	233
Approved Amount	\$29,575,525	\$27,848,697	\$26,660,355	\$26,868,963

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Crisis Stabilization

Crisis Stabilization:

Crisis stabilization services last less than 24 hours and are for, or on behalf of, a beneficiary for a condition that requires a more timely response than a regularly scheduled visit. Service activities include but are not limited to one or more of the following: assessment, collateral, and therapy. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

The forecast for Crisis Stabilization Services is for moderate growth in clients and costs over the next few fiscal years.

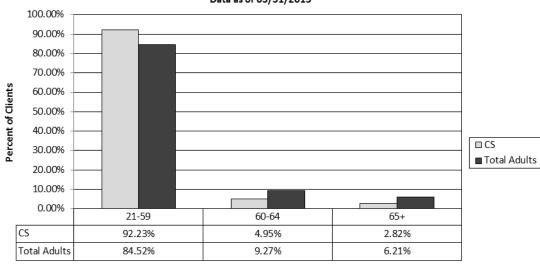
	Forecast Dollars	Forecast Clients
FY 2008-09	\$33,950,960	19,725
FY 2009-10	\$34,354,858	19,296
FY 2010-11	\$37,422,732	21,051
FY 2011-12	\$42,774,609	22,848
FY 2012-13	\$46,837,800	23,344
FY 2013-14	\$49,289,316	24,215

Budget Forecast Narrative:

Moderate growth in costs is forecast through FY 2013-14.

Client Profile Data:

Table 4a
ADULTS
Clients Receiving Crisis Stabilization Services by Age Group
Fiscal Year 2011-12
Data as of 03/31/2013



Age Group

Table 4b
ADULTS
Clients Receiving Crisis Stabilization Services by Race/Ethnicity
Fiscal Year 2011-12

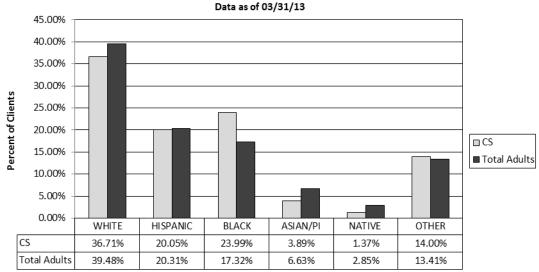


Table 4c
ADULTS
Clients Receiving Crisis Stabilization Services by Gender
Fiscal Year 2011-12
Data as of 03/31/13

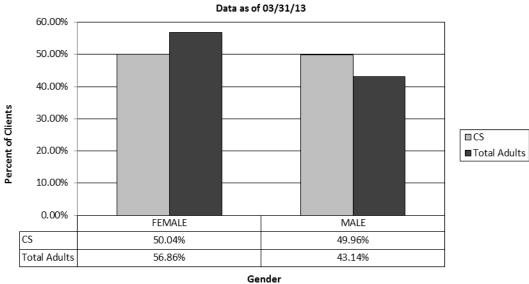


Table 4d
Other Services Received by Adults Receiving Crisis Stabilization Service
Fiscal Year 2011-12

	Number of Clients	Percent Clients
CRISIS STABILIZATION	22,848	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	12,588	55.09%
MEDICATION SUPPORT	11,644	50.96%
TARGETED CASE MANAGEMENT	9,206	40.29%
CRISIS INTERVENTION	6,555	28.69%
HOSPITAL INPATIENT	4,008	17.54%
ADULT CRISIS RESIDENTIAL	1,825	7.99%
PHF	999	4.37%
ADULT RESIDENTIAL	476	2.08%
DAY TX REHABILITATIVE FULL DAY	354	1.55%
DAY TX REHABILITATIVE HALF DAY	112	0.49%
DAY TX INTENSIVE FULL DAY	7	0.03%

Service Metrics:

Table 4e Crisis Stabilization Approved Amount Fiscal Year 2011-12

Statistic	Amount	
Number of Clients		22,848
Mean	\$	1,922
Standard Deviation	\$	3,072
Median	\$	1,324
Mode	\$	1,891
Interquartile Range	\$	1,418

Quartile	Amount	
100%	\$	85,275
99%	\$	13,614
95%	\$	5,862
90%	\$	3,782
75%	\$	1,891
50%	\$	1,324
25%	\$	473

Table 4f Crisis Stabilization Hours Fiscal Year 2011-12

Statistic	Hours
Number of Clients	22,848
Mean	20
Standard Deviation	33
Median	15
Mode	20
Interquartile Range	15

Quartile	Hours
100%	902
99%	145
95%	63
90%	40
75%	20
50%	15
25%	5

Table 4g Historical Trends Crisis Stabilization by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	19,725	19,296	21,051	22,848
Number of Hours	378,550	377,980	412,794	462,670
Hours Per Client	19	20	20	20
Approved Amount	\$33,950,960	\$34,354,858	\$37,422,732	\$42,774,609

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Day Rehabilitative Half Day

Day Rehabilitative (Half-Day):

Day rehabilitation services are a structured program of rehabilitation and therapy with services to improve, maintain or restore personal independence and functioning, consistent with requirements for learning and development and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to assessment, plan development, therapy, rehabilitation and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

For Day Rehabilitative Half Day Services, the forecast for FY 2013-14 is for a decline in both dollars and clients. Given the sharp growth in FY 2010-11 and FY 2011-12 this forecast may increase in the next estimate cycle.

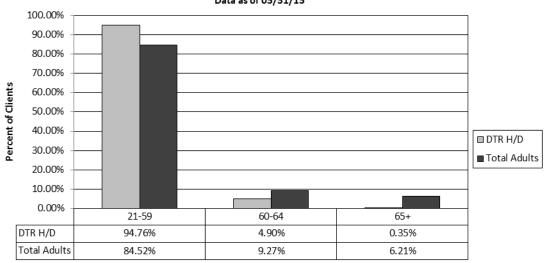
	Forecast Dollars	Forecast Clients
FY 2008-09	\$602,222	140
FY 2009-10	\$618,775	147
FY 2010-11	\$769,234	212
FY 2011-12	\$1,074,480	275
FY 2012-13	\$739,634	209
FY 2013-14	\$484,332	181

Budget Forecast Narrative:

Day Rehabilitative Half Day service costs are forecast to decline through FY 2013-14.

Client Profile Data:

Table 5a
ADULTS
Clients Receiving Day Treatment Rehabilitative-Half Day Services by Age Group
Fiscal Year 2011-12
Data as of 03/31/13



Age Group

Table 5b
ADULTS
Clients Receiving Day Treatment Rehabilitative-Half Day Services
by Race/Ethnicity
Fiscal Year 2011-12
Data as of 03/31/13

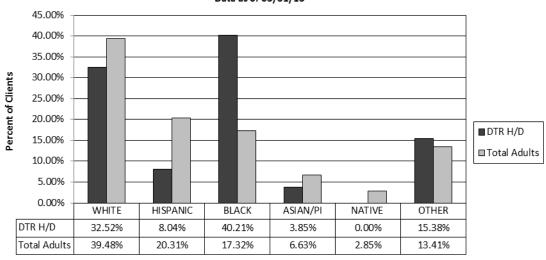


Table 5c ADULTS Clients Receiving Day Treatment Rehabilitative-Half Day Services by Gender Fiscal Year 2011-12 Data as of 03/31/13

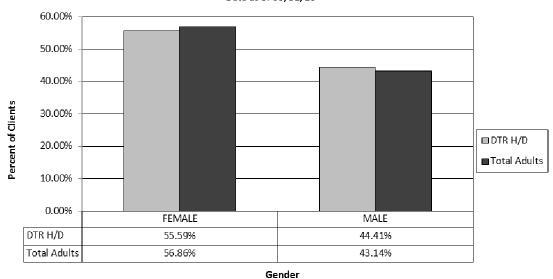


Table 5d
Other Services Received by Adults Receiving Day Rehabilitative Half Day Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
DAY TX REHABILITATIVE HALF DAY	275	100.0%
MEDICATION SUPPORT	205	74.5%
THERAPY AND OTHER SERVICE ACTIVITIES	189	68.7%
TARGETED CASE MANAGEMENT	140	50.9%
CRISIS STABILIZATION	112	40.7%
CRISIS INTERVENTION	42	15.3%
HOSPITAL INPATIENT	39	14.2%
ADULT CRISIS RESIDENTIAL	29	10.5%
ADULT RESIDENTIAL	15	5.5%
DAY TX REHABILITATIVE FULL DAY	7	2.5%

Table 5e
Day Treatment Rehabilitation Half Day Approved Amount
Fiscal Year 2011-12

Statistic	Amount	
Number of Clients		275
Mean	\$	3,902
Standard Deviation	\$	4,388
Median	\$	2,208
Mode	\$	295
Interquartile Range	\$	5,051

Quartile	Amount		
100%	\$ 23,072		
99%	\$	2,103	
95%	\$	12,955	
90%	\$	9,331	
75%	\$	5,808	
50%	\$	2,208	
25%	\$	757	

Table 5f
Day Treatment Rehabilitation Half Days
Fiscal Year 2011-12

Statistic	Amount
Number of Clients	275
Mean	43
Standard Deviation	47
Median	26
Mode	1
Interquartile Range	56

Quartile	Days
100%	225
99%	211
95%	146
90%	98
75%	64
50%	26
25%	8

Table 5g
Historical Trends
Day Rehabilitative Half Day by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	140	147	212	275
Number of Days	7,345	7,243	8,429	11,755
Days Per Client	52	49	40	43
Approved Amount	\$602,222	\$618,775	\$769,234	\$1,074,480

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Day Rehabilitative Full Day

Day Rehabilitative (Full-Day):

Day rehabilitation services are a structured program of rehabilitation and therapy with services to improve, maintain or restore personal independence and functioning, consistent with requirements for learning and development and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to assessment, plan development, therapy, rehabilitation and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

The forecast for Day Rehabilitative Full Day Services shows a sharp decrease in clients and cost through SFY 2013-14.

The reduction in the use of Day Treatment and Day Rehabilitation Half Day and Full Day services is due to counties using more community based services to achieve the same or better outcomes with less costly services. This is due to the implementation of Mental Health Services Act (MHSA) Full Service Partnerships and other innovations that allow counties to effectively meet the needs of clients at home rather than institutional settings.

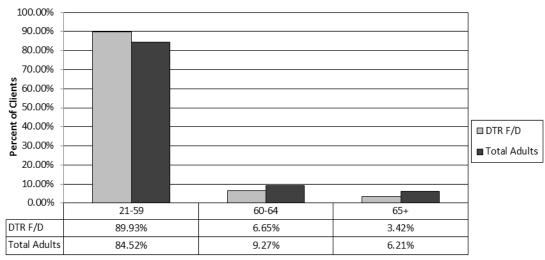
	Forecast Dollars	Forecast Clients
FY 2008-09	\$12,384,663	1,610
FY 2009-10	\$10,013,561	1,433
FY 2010-11	\$9,162,148	1,159
FY 2011-12	\$8,164,587	968
FY 2012-13	\$6,594,545	774
FY 2013-14	\$5,426,705	576

Budget Forecast Narrative:

Day Rehabilitation Full Day costs are forecast to decline sharply through FY 2013-14.

Client Profile Data:

Table 6a
ADULTS
Clients Receiving Day Treatment Rehabilitative-Full Day Services by Age Group
Fiscal Year 2011-12
Data as of 03/31/13



Age Group

Table 6b
Adults
Clients Receiving Day Treatment Rehabilitative-Full Day Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 03/31/13

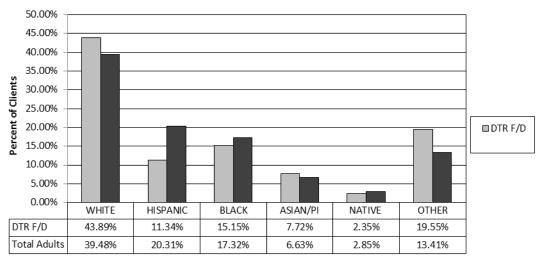


Table 6c
ADULT
Clients Receiving Day Treatment Rehabilitative-Full Day Services by Gender
Fiscal Year 2011-12

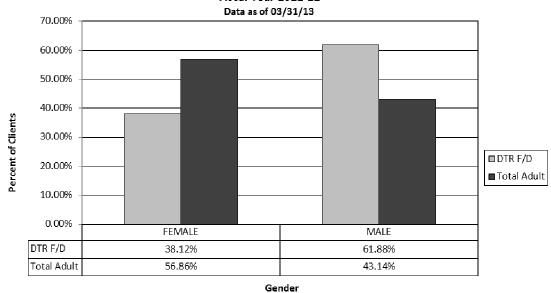


Table 6d
Other Services Received by Adults Receiving Day Rehabilitative Full Day Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
DAY TX REHABILITATIVE FULL DAY	968	100.0%
THERAPY AND OTHER SERVICE ACTIVITIES	849	87.7%
TARGETED CASE MANAGEMENT	791	81.7%
MEDICATION SUPPORT	739	76.3%
ADULT RESIDENTIAL	474	49.0%
CRISIS STABILIZATION	354	36.6%
CRISIS INTERVENTION	323	33.4%
ADULT CRISIS RESIDENTIAL	301	31.1%
HOSPITAL INPATIENT	143	14.8%
PHF	12	1.2%
DAY TX INTENSIVE FULL DAY	8	0.8%
DAY TX REHABILITATIVE HALF DAY	7	0.7%

Table 6e
Day Treatment Rehabilitative Full Day Approved Amount
Fiscal Year 2011-12

Statistic	Amount	
Number of Clients	968	
Mean	\$	8,424
Standard Deviation	\$	8,195
Median	\$	5,643
Mode	\$	2,625
Interquartile Range	\$	9,187

Quartile	Amount		
100%	\$	38,880	
99%	\$	34,080	
95%	\$	26,510	
90%	\$	21,655	
75%	\$	11,680	
50%	\$	5,643	
25%	\$	3,464	

Table 6f
Day Treatment Rehabilitative Full Days
Fiscal Year 2011-12

Statistic	Amount
Number of Clients	968
Mean	65
Standard Deviation	63
Median	44
Mode	5
Interquartile Range	69

Quartile	Days
100%	324
99%	261
95%	202
90%	166
75%	89
50%	44
25%	20

Table 6g
Historical Trends
Day Rehabilitative Full Day by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	1,610	1,433	1,159	968
Number of Days	105,935	86,570	77,179	63,090
Days Per Client	66	60	67	65
Approved Amount	\$12,384,663	\$10,013,561	\$9,162,148	\$8,164,587

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Day Treatment Intensive Half Day

Day Treatment Intensive (Half-Day):

Day treatment intensive services are a structured, multi-disciplinary program of therapy that may be used as an alternative to hospitalization, or to avoid placement in a more restrictive setting, or to maintain the client in a community setting and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to, assessment, plan development, therapy, rehabilitation and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

County mental health plans use Day Treatment Intensive Full Day services for adults, if needed. No half day service costs were claimed in FY 2008-09 or after.

The reduction in the use of Day Treatment and Day Rehabilitation Half Day and Full Day services is due to counties using more community based services to achieve the same or better outcomes with less costly services. This is due to the implementation of Mental Health Services Act (MHSA) Full Service Partnerships and other innovations that allow counties to effectively meet the needs of clients at home rather than institutional settings.

Page 127

Day Treatment Intensive Full Day

<u>Day Treatment Intensive (Full-Day):</u>

Day treatment intensive services are a structured, multi-disciplinary program of therapy that may be used as an alternative to hospitalization, or to avoid placement in a more restrictive setting, or to maintain the client in a community setting and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to, assessment, plan development, therapy, rehabilitation and collateral. Collateral addresses the mental health needs of the beneficiary to ensure coordination with significant others and treatment providers.

Summary:

The forecast for Day Treatment Intensive Full Day Services shows a sharp decrease to zero in clients and cost through SFY 2013-14.

The reduction in the use of Day Treatment and Day Rehabilitation Half Day and Full Day services is due to counties using more community based services to achieve the same or better outcomes with less costly services. This is due to the implementation of Mental Health Services Act (MHSA) Full Service Partnerships and other innovations that allow counties to effectively meet the needs of clients at home rather than institutional settings.

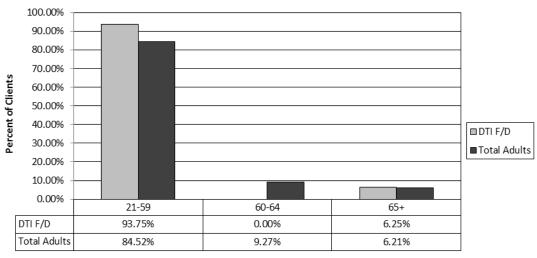
	Forecast Dollars	Forecast Clients
FY 2008-09	\$756,246	210
FY 2009-10	\$463,225	97
FY 2010-11	\$465,618	61
FY 2011-12	\$74,071	16
FY 2012-13	\$0	0
FY 2013-14	\$0	0

Budget Forecast Narrative:

Costs are expected to decline sharply to zero in FY 2012-13 and remain at zero in FY 2013-14.

Client Profile Data:

Table 7a
ADULTS
Clients Receiving Day Treatment Intensive-Full Day Services by Age Group
Fiscal Year 2011-12
Data as of 03/31/13



Age Group

Table 7b
ADULTS
Clients Receiving Day Treatment Intensive-Full Day Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 03/31/13

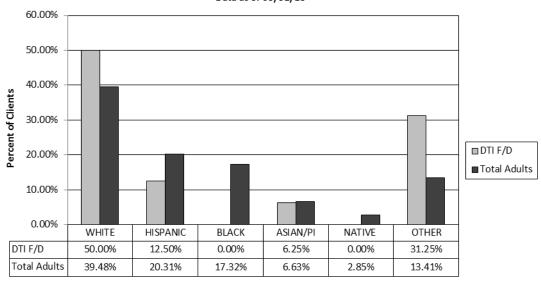
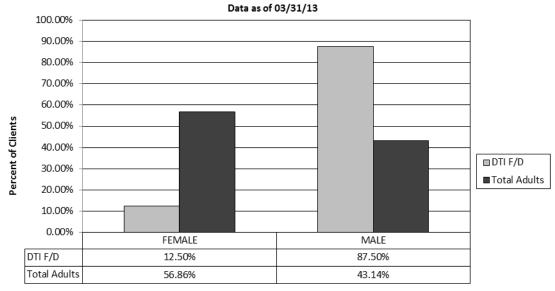


Table 7c
ADULTS

Clients Receiving Day Treatment Intensive-Full Day Services by Gender
Fiscal Year 2011-12



Gender

Table 7d
Other Services Received by Adults Receiving Day Treatment Intensive Full Day Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
DAY TX INTENSIVE FULL DAY	16	100.0%
THERAPY AND OTHER SERVICE ACTIVITIES	14	87.5%
ADULT RESIDENTIAL	12	75.0%
MEDICATION SUPPORT	12	75.0%
TARGETED CASE MANAGEMENT	10	62.5%
DAY TX REHABILITATIVE FULL DAY	8	50.0%
CRISIS STABILIZATION	7	43.8%
ADULT CRISIS RESIDENTIAL	4	25.0%
CRISIS INTERVENTION	2	12.5%
HOSPITAL INPATIENT	1	6.3%

Table 7e
Day Treatment Intensive Full Day Approved Amount
Fiscal Year 2011-12

Statistic	А	Amount	
Number of Clients		16	
Mean	\$	4,629	
Standard Deviation	\$	4,844	
Median	\$	3,255	
Mode	\$	1,215	
Interquartile Range	\$	4,030	

Quartile	Amount		
100%	\$	20,243	
99%	\$	20,243	
95%	\$	20,243	
90%	\$	10,324	
75%	\$	5,503	
50%	\$	3,255	
25%	\$	1,473	

Table 7f
Day Treatment Intensive Full Day Days
Fiscal Year 2011-12

Statistic	Amount
Number of Clients	16
Mean	27
Standard Deviation	24
Median	21
Mode	6
Interquartile Range	26

Quartile	Days
100%	100
99%	100
95%	100
90%	51
75%	37
50%	21
25%	9

Table 7g
Historical Trends
Day Treatment Intensive Full Day by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	210	97	61	16
Number of Days	5,808	2,984	2,724	428
Days Per Client	28	31	45	27
Approved Amount	\$756,246	\$463,225	\$465,618	\$74,071

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Medication Support

Medication Support:

Medication support services include prescribing, administering, dispensing and monitoring of psychiatric medications or biologicals that are necessary to alleviate the symptoms of mental illness. Service activities may include but are not limited to: evaluation of the need for medication; evaluation of clinical effectiveness and side effects; obtaining informed consent; instruction in the use, risks and benefits of, and alternatives for, medication; collateral and plan development related to the delivery of service and/or assessment for the client; prescribing, administering, dispensing and monitoring of psychiatric medications or biologicals; and medication education.

Summary:

The number of unduplicated clients is forecast to decrease slightly with an overall decrease in minutes per client and an increase costs per minute and total costs through SFY 2013-14.

	Forecast Dollars	Forecast Clients
FY 2008-09	\$201,050,453	172,015
FY 2009-10	\$189,088,051	164,805
FY 2010-11	\$187,283,329	162,955
FY 2011-12	\$190,874,723	163,003
FY 2012-13	\$207,948,440	163,450
FY 2013-14	\$211,711,916	162,478

Budget Forecast Narrative:

The Medication Support costs are expected to increase through SFY 2013-14.

Client Profile Data:

Table 8a
ADULTS
Clients Receiving Medication Support Services by Age Group
Fiscal Year 2011-12
Data as of 03/31/13

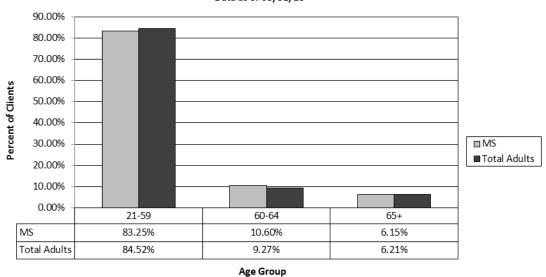


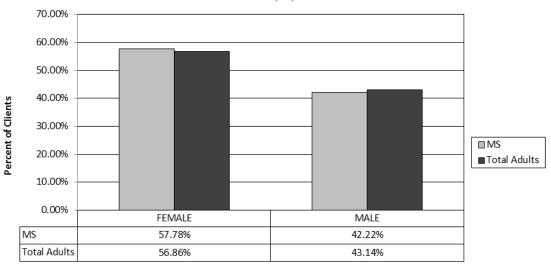
Table 8b

ADULTS
Clients Receiving Medication Support Services by Race/Ethnicity

Fiscal Year 2011-12

Data as of 03/31/13 45.00% 40.00% 35.00% 30.00% Percent of Clients 25.00% 20.00% ■ MS 15.00% ■Total Adults 10.00% 5.00% 0.00% WHITE HISPANIC BLACK ASIAN/PI NATIVE OTHER MS 7.75% 39.13% 19.89% 16.68% 3.15% 13.40% Total Adults 17.32% 2.85% 39.48% 20.31% 6.63% 13.41%

Table 8c
ADULTS
Clients Receiving Medication Support Services by Gender
Fiscal Year 2011-12
Data as of 03/31/13



Gender

Table 8d
Other Services Received by Adults Receiving Medication Support Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
MEDICATION SUPPORT	163,003	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	114,113	70.01%
TARGETED CASE MANAGEMENT	77,465	47.52%
CRISIS INTERVENTION	19,521	11.98%
CRISIS STABILIZATION	11,644	7.14%
HOSPITAL INPATIENT	4,094	2.51%
ADULT CRISIS RESIDENTIAL	3,333	2.04%
PHF	1,740	1.07%
ADULT RESIDENTIAL	904	0.55%
DAY TX REHABILITATIVE FULL DAY	739	0.45%
DAY TX REHABILITATIVE HALF DAY	205	0.13%
DAY TX INTENSIVE FULL DAY	12	0.01%

Table 8e
Medication Support Approved Amount
Fiscal Year 2011-12

Statistic	Α	mount
Number of Clients	1	163,003
Mean	\$	1,174
Standard Deviation	\$	1,951
Median	\$	687
Mode	\$	145
Interquartile Range	\$	981

Quartile	Amount	
100%	\$	217,568
99%	\$	8,848
95%	\$	3,803
90%	\$	2,449
75%	\$	1,295
50%	\$	699
25%	\$	313

Table 8f
Medication Support Minutes
Fiscal Year 2011-12

Statistic	Minutes
Number of Clients	163,003
Mean	305
Standard Deviation	515
Median	179
Mode	60
Interquartile Range	230

Quartile	Minutes
100%	54,135
99%	2,403
95%	997
90%	630
75%	320
50%	179
25%	90

Table 8g
Historical Trends
Medication Support by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	172,015	164,805	162,955	163,003
Number of Minutes	46,242,888	47,148,665	52,785,250	49,723,143
Minutes Per Client	269	286	324	305
Approved Amount	\$201,050,453	\$189,088,051	\$187,283,329	\$190,874,723

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Psychiatric Health Facility Services

Psychiatric Health Facility (PHF):

"Psychiatric Health Facility" means a facility licensed under the provisions beginning with Section 77001 of Chapter 9, Division 5, Title 22 of the California Code of Regulations. "Psychiatric Health Facility Services" are therapeutic and/or rehabilitative services provided in a psychiatric health facility on an inpatient basis to beneficiaries who need acute care, which meets the criteria of Section 1820.205 of Chapter 11, Division 1, Title 9 of the California Code of Regulations, and whose physical health needs can be met in an affiliated general acute care hospital or in outpatient settings. These services are separate from those categorized as "Psychiatric Hospital Inpatient".

Summary:

The forecast for Psychiatric Health Facility (PHF) Services shows an increase in the number of clients and total costs through SFY 2013-14.

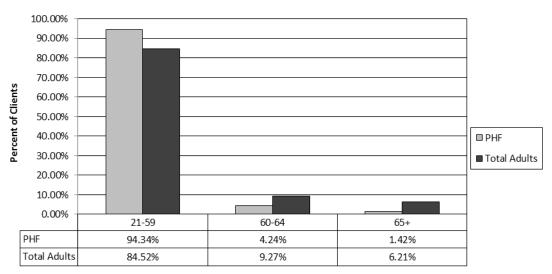
	Forecast Dollars	Forecast Clients
FY 2008-09	\$14,542,834	2,388
FY 2009-10	\$14,211,935	2,307
FY 2010-11	\$15,450,117	2,418
FY 2011-12	\$17,385,247	2,749
FY 2012-13	\$22,153,747	3,032
FY 2013-14	\$23,990,083	3,214

Budget Forecast Narrative:

The total annual costs are expected to increase through FY 2013-14.

Client Profile Data:

Table 9a Adults Clients Receiving PHF Services by Age Group Fiscal Year 2011-12 Data as of 03/31/13



Age Group

Table 9b **ADULTS** Clients Receiving PHF Services by Race/Ethnicity Fiscal Year 2011-12 Data as of 03/31/13

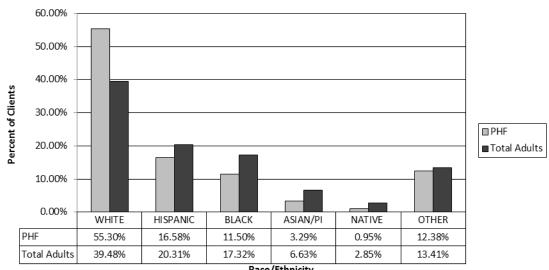


Table 9c
ADULTS
Clients Receiving PHF Services by Gender
Fiscal Year 2011-12
Data as of 03/31/13

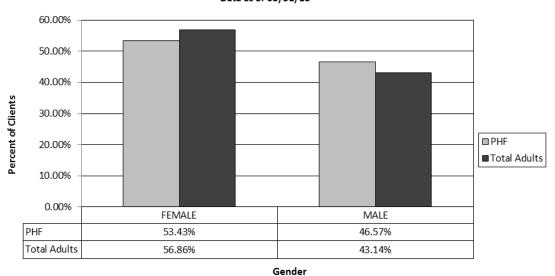


Table 9d
Other Services Received by Adults Receiving Psychiatric Health Facility Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
PHF	2,749	100.0%
MEDICATION SUPPORT	1,740	63.3%
THERAPY AND OTHER SERVICE ACTIVITIES	1,723	62.7%
TARGETED CASE MANAGEMENT	1,711	62.2%
CRISIS INTERVENTION	1,574	57.3%
CRISIS STABILIZATION	999	36.3%
ADULT CRISIS RESIDENTIAL	334	12.1%
HOSPITAL INPATIENT	123	4.5%
ADULT RESIDENTIAL	59	2.1%
DAY TX REHABILITATIVE FULL DAY	12	0.4%

Table 9e
Psychiatric Health Facility Approved Amount
Fiscal Year 2011-12

Statistic	Amount	
Number of Clients		2,749
Mean	\$	6,358
Standard Deviation	\$	9,064
Median	\$	3,062
Mode	\$	1,225
Interquartile Range	\$	6,384

Quartile	Amount	
100%	\$	109,020
99%	\$	45,323
95%	\$	23,886
90%	\$	16,460
75%	\$	7,609
50%	\$	3,062
25%	\$	1,225

Table 9f
Psychiatric Health Facility Days
Fiscal Year 2011-12

Statistic	Amount
Number of Clients	2,749
Mean	11
Standard Deviation	16
Median	5
Mode	2
Interquartile Range	11

Quartile	Days
100%	178
99%	83
95%	42
90%	28
75%	13
50%	5
25%	2

Table 9g
Historical Trends
Psychiatric Health Facility Services by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	2,388	2,307	2,418	2,749
Number of Days	27,167	25,668	27,499	29,866
Days Per Client	11	11	11	11
Approved Amount	\$14,542,834	\$14,211,935	\$15,450,117	\$17,385,247

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Psychiatric Inpatient Hospital Services – SD/MC Hospitals

Psychiatric Hospital Inpatient Services – SD/MC Hospitals:

Psychiatric inpatient hospital services include both acute psychiatric inpatient hospital services and administrative day services. Acute psychiatric inpatient hospital services are provided to beneficiaries for whom the level of care provided in a hospital is medically necessary to diagnose or treat a covered mental illness. Administrative day services are inpatient hospital services provided to beneficiaries who were admitted to the hospital for an acute psychiatric inpatient hospital service and the beneficiary's stay at the hospital must be continued beyond the beneficiary's need for acute psychiatric inpatient hospital services due to lack of residential placement options at non-acute residential treatment facilities that meet the needs of the beneficiary.

Psychiatric inpatient hospital services are provided by Short-Doyle / Medi-Cal (SD/MC) hospitals and Fee-for-Service / Medi-Cal (FFS/MC) hospitals. Mental Health Plans (MHPs) claim reimbursement for the cost of psychiatric inpatient hospital services provided by Short-Doyle Medi-Cal hospitals through the Short-Doyle Medi-Cal (SD/MC) claiming system. FFS/MC hospitals claim reimbursement for the cost of psychiatric inpatient hospital services through the FFS/MC Fiscal Intermediary system. MHPs are responsible for authorization of psychiatric inpatient hospital services reimbursed through either billing system. For SD/MC hospitals, the daily rate includes the cost of any needed professional services. The FFS/MC hospital daily rate does not include professional services, which are billed separately from the FFS/MC inpatient hospital services via the SD/MC claiming system.

Summary:

The forecast for Psychiatric Hospital Inpatient Services shows a small decrease in cost and clients through FY 2013-14.

	Forecast Dollars	Forecast Clients
FY 2008-09	\$60,505,545	6,444
FY 2009-10	\$56,082,370	6,359
FY 2010-11	\$55,548,931	6,155
FY 2011-12	\$54,695,751	6,186
FY 2012-13	\$54,697,840	5,280
FY 2013-14	\$53,400,933	5,104

Budget Forecast Narrative:

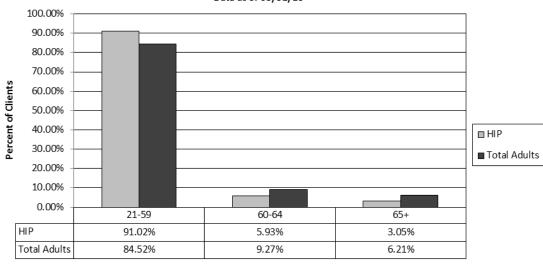
Costs for Psychiatric Hospital Inpatient Services are forecast to decrease slightly through FY 2013-14.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis

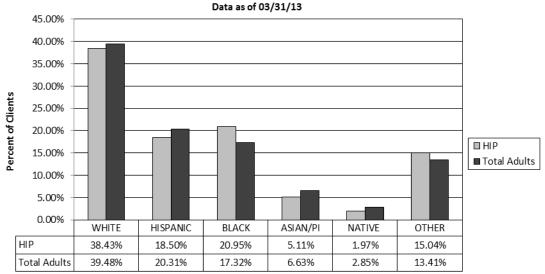
purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of March 31, 2013.

Table 10a ADULTS Clients Receiving Hospital Inpatient Services by Age Group Fiscal Year 2011-12 Data as of 03/31/13



Age Group

Table 10b
ADULTS
Clients Receiving Hospital Inpatient Services by Race/Ethnicity
Fiscal Year 2011-12



Race/Ethnicity

Table 10c
ADULTS
Clients Receiving Hospital Inpatient Services by Gender
Fiscal Year 2011-12
Data as of 03/31/13

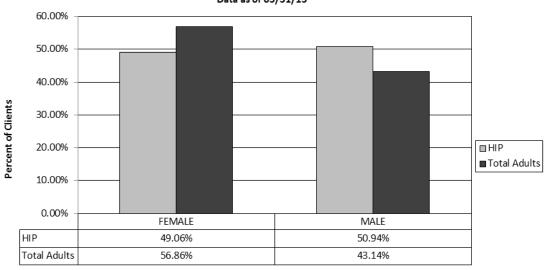


Table 10d
Other Services Received by Adults Receiving Psychiatric Hospital Inpatient Services
Fiscal Year 2011-12

Gender

	Number of Clients	Percent Clients
HOSPITAL INPATIENT	6,186	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	4,288	69.32%
MEDICATION SUPPORT	4,094	66.18%
CRISIS STABILIZATION	4,008	64.79%
TARGETED CASE MANAGEMENT	3,068	49.60%
CRISIS INTERVENTION	2,849	46.06%
ADULT CRISIS RESIDENTIAL	606	9.80%
ADULT RESIDENTIAL	158	2.55%
DAY TX REHABILITATIVE FULL DAY	143	2.31%
PHF	123	1.99%
DAY TX REHABILITATIVE HALF DAY	39	0.63%
DAY TX INTENSIVE FULL DAY	1	0.02%

Table 10e
Psychiatric Hospital Inpatient Approved Amount
Fiscal Year 2011-12

Statistic	ļ	Amount
Number of Clients		6,186
Mean	\$	8,926
Standard Deviation	\$	13,228
Median	\$	4,184
Mode	\$	2,428
Interquartile Range	\$	7,329

Quartile	Amount	
100%	\$	205,291
99%	\$	65,543
95%	\$	32,882
90%	\$	21,848
75%	\$	9,754
50%	\$	4,184
25%	\$	2,426

Table 10f
Psychiatric Hospital Inpatient Days
Fiscal Year 2011-12

Statistic	Amount
Number of Clients	6,186
Mean	11
Standard Deviation	16
Median	5
Mode	2
Interquartile Range	10

Quartile	Days
100%	209
99%	87
95%	42
90%	27
75%	12
50%	5
25%	2

Table 10g
Historical Trends
Psychiatric Hospital Inpatient Services by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	6,444	6,359	6,155	6,186
Number of Days	74,807	73,787	72,378	67,664
Days Per Client	12	12	12	11
Approved Amount	\$60,505,545	\$56,082,370	\$55,548,931	\$54,695,751

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Targeted Case Management

Targeted Case Management (TCM):

Targeted case management is a service that assists a beneficiary in accessing needed medical, educational, social, prevocational, vocational, rehabilitative, or other community services. The service activities may include, but are not limited to, communication, coordination and referral; monitoring service delivery to ensure beneficiary access to services and the service delivery system; monitoring of the beneficiary's progress, placement services, and plan development. TCM services may be face-to-face or by telephone with the client or significant support persons and may be provided anywhere in the community. Additionally, services may be provided by any person determined by the MHP to be qualified to provide the service, consistent with the scope of practice and state law.

Summary:

The forecast for Targeted Case Management Services shows a small growth in cost and a small decrease in clients through 2013-14.

	Forecast Dollars	Forecast Clients
FY 2008-09	\$98,727,675	104,990
FY 2009-10	\$90,836,175	101,679
FY 2010-11	\$86,617,233	97,740
FY 2011-12	\$84,878,650	97,340
FY 2012-13	\$94,384,642	99,399
FY 2013-14	\$94,695,058	98,338

Budget Forecast Narrative:

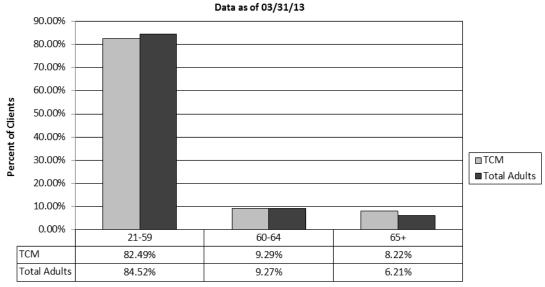
Costs for Targeted Case Management are forecast to increase slightly through FY 2013-14..

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of March 31, 2013.

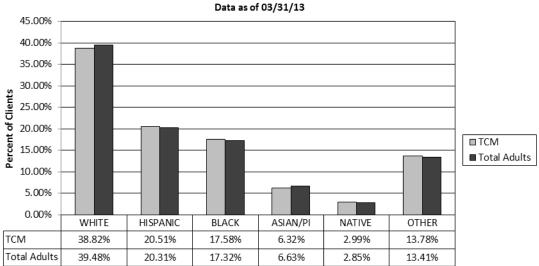
Table 11a
ADULTS

Clients Receiving Targeted Case Management Services by Age Group
Fiscal Year 2011-12



Age Group

Table 11b
ADULTS
Clients Receiving Targeted Case Management Services by Race/Ethnicity
Fiscal Year 2011-12



Race/Ethnicity

Table 11c
ADULTS
Clients Receiving Targeted Case Management Services by Gender
Fiscal Year 2011-12
Data as of 03/31/13

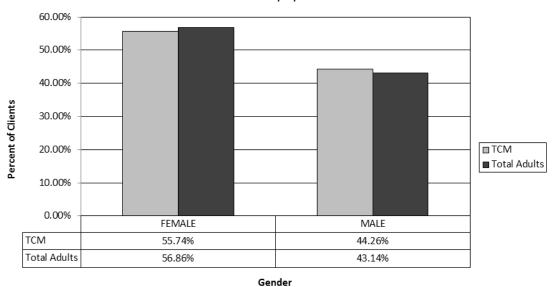


Table 11d
Other Services Received by Adults Receiving Targeted Case Management Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
TARGETED CASE MANAGEMENT	97,340	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	81,163	83.38%
MEDICATION SUPPORT	77,465	79.58%
CRISIS INTERVENTION	17,399	17.87%
CRISIS STABILIZATION	9,206	9.46%
HOSPITAL INPATIENT	3,068	3.15%
ADULT CRISIS RESIDENTIAL	2,664	2.74%
PHF	1,711	1.76%
ADULT RESIDENTIAL	967	0.99%
DAY TX REHABILITATIVE FULL DAY	791	0.81%
DAY TX REHABILITATIVE HALF DAY	140	0.14%
DAY TX INTENSIVE FULL DAY	10	0.01%

Table 11e
Targeted Case Management Approved Amount
Fiscal Year 2011-12

Statistic	А	mount
Number of Clients		97,340
Mean	\$	873
Standard Deviation	\$	1,748
Median	\$	283
Mode	\$	61
Interquartile Range	\$	742

Quartile	Amount	
100%	\$	69,967
99%	\$	8,456
95%	\$	3,721
90%	\$	2,232
75%	\$	848
50%	\$	283
25%	\$	107

Table 11f
Targeted Case Management Minutes
Fiscal Year 2011-12

Statistic	Minutes
Number of Clients	97,340
Mean	504
Standard Deviation	1,076
Median	155
Mode	30
Interquartile Range	422

Quartile	Minutes
100%	34,637
99%	5,087
95%	2,131
90%	1,268
75%	480
50%	155
25%	58

Table 11g
Historical Trends
Targeted Case Management by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	104,990	101,679	97,740	97,340
Number of Minutes	51,966,882	47,329,097	46,048,431	49,103,682
Minutes Per Client	495	465	471	504
Approved Amount	\$98,727,675	\$90,836,175	\$86,617,233	\$84,878,650

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Therapy and Other Service Activities

Therapy and Other Service Activities (formerly referred to as Mental Health Services): Individual or group therapies and interventions are designed to provide a reduction of mental disability and restoration, improvement or maintenance of functioning consistent with the goals of learning, development, independent living, and enhanced self-sufficiency. These services are separate from those provided as components of adult residential services, treatment services, crisis intervention, crisis stabilization, day rehabilitation, or day treatment intensive. Service activities may include, but are not limited to:

- Assessment A service activity designed to evaluate the current status of mental, emotional, or behavioral health. Assessment includes, but is not limited to, one or more of the following: mental status determination, analysis of the clinical history, analysis of relevant cultural issues and history; diagnosis; and the use of mental health testing procedures.
- Plan Development A service activity that consists of development of client plans, approval of client plans, and/or monitoring and recording of progress.
- 3. <u>Therapy</u> A service activity that is a therapeutic intervention that focuses primarily on symptom reduction as a means to reduce functional impairments. Therapy may be delivered to an individual or group and may include family therapy at which the client is present.
- 4. Rehabilitation A service activity that includes, but is not limited to, assistance, improving, maintaining or restoring functional skills, daily living skills, social and leisure skills, grooming and personal hygiene skills; obtaining support resources; and/or obtaining medication education.
- 5. <u>Collateral</u> A service activity involving a significant support person in the beneficiary's life for the purpose of addressing the mental health needs of the beneficiary in terms of achieving goals of the beneficiary's client plan. Collateral may include, but is not limited to, consultation and training of the significant support person(s) to assist in better utilization of mental health services by the client, consultation and training of the significant support person(s) to assist in better understanding of mental illness, and family counseling with the significant support person(s) in achieving the goals of the client plan. The client may or may not be present for this service activity.

The distribution of use and expenditures of each service activity varies over time with changes in client needs.

Summary:

The forecast for Therapy and Other Service Activities dollars and clients shows growth primarily driven by an increase in the number of clients served beginning in FY 2011-12.

	Forecast Dollars	Forecast Clients
FY 2008-09	\$324,330,747	174,525
FY 2009-10	\$302,668,913	163,666
FY 2010-11	\$307,883,157	162,061
FY 2011-12	\$321,965,544	165,139
FY 2012-13	\$360,177,234	174,436
FY 2013-14	\$372,393,291	175,360

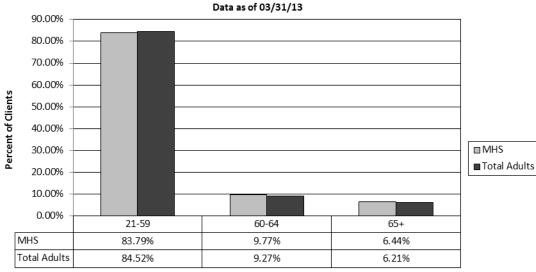
Budget Forecast Narrative:

Costs for Therapy and Other Service Activities are forecast to increase through FY 2013-14.

Client Profile Data:

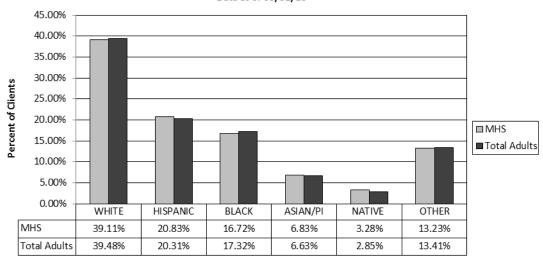
Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of March 31, 2013.

Table 12a
ADULTS
Clients Receiving Therapy and Other Services by Age Group
Fiscal Year 2011-12



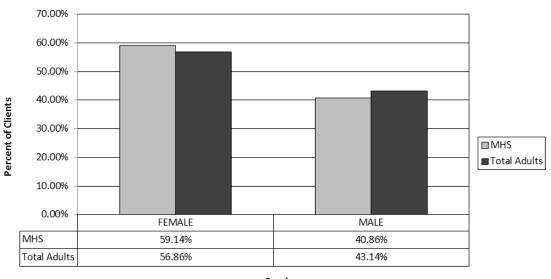
Age Group

Table 12b
ADULTS
Clients Receiving Therapy and Other Services by Race/Ethnicity
Fiscal Year 2011-12
Data as of 03/31/13



Race/Ethnicity

Table 12c
ADULTS
Clients Receiving Therapy and Other Services by Gender
Fiscal Year 2011-12
Data as of 03/31/13



Gender

Table 12d
Other Services Received by Adults Receiving Therapy and Other Service Activities
Fiscal Year 2011-12

	Number of Clients	Percent Clients
THERAPY AND OTHER SERVICE ACTIVITIES	165,139	100.00%
MEDICATION SUPPORT	114,113	69.10%
TARGETED CASE MANAGEMENT	81,163	49.15%
CRISIS INTERVENTION	21,085	12.77%
CRISIS STABILIZATION	12,588	7.62%
HOSPITAL INPATIENT	4,288	2.60%
ADULT CRISIS RESIDENTIAL	2,886	1.75%
PHF	1,723	1.04%
ADULT RESIDENTIAL	1,012	0.61%
DAY TX REHABILITATIVE FULL DAY	849	0.51%
DAY TX REHABILITATIVE HALF DAY	189	0.11%
DAY TX INTENSIVE FULL DAY	14	0.01%

Table 12e
Therapy and Other Services Approved Amount
Fiscal Year 2011-12

Statistic	Amount		
Number of Clients		165,139	
Mean	\$	1,958	
Standard Deviation	\$	3,811	
Median	\$	626	
Mode	\$	157	
Interquartile Range	\$	1,647	

Quartile	Amount	
100%	\$	138,887
99%	\$	18,456
95%	\$	8,485
90%	\$	5,189
75%	\$	1,892
50%	\$	626
25%	\$	245

Table 1f
Therapy and Other Services Minutes
Fiscal Year 2011-12

Statistic	Minutes
Number of Clients	165,139
Mean	938
Standard Deviation	1,742
Median	327
Mode	60
Interquartile Range	880

Quartile	Minutes
100%	60,220
99%	8,190
95%	3,838
90%	2,435
75%	1,005
50%	327
25%	125

Table 12g
Historical Trends
Therapy and Other Service Activities by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012*
Number of Clients	174,525	163,666	162,061	165,139
Number of Minutes	149,110,381	150,353,773	164,973,553	154,876,107
Minutes Per Client	854	919	1018	938
Approved Amount	\$324,330,747	\$302,668,913	\$307,883,157	\$321,965,544

^{*} SFY 2011-12 year data based upon actual claims through March 31, 2013.

Psychiatric Inpatient Hospital Services – FFS/MC Hospitals

Psychiatric Inpatient Hospital Services – FFS/MC Hospitals:

Psychiatric inpatient hospital services include both acute psychiatric inpatient hospital services and administrative day services. Acute psychiatric inpatient hospital services are provided to beneficiaries for whom the level of care provided in a hospital is medically necessary to diagnose or treat a covered mental illness. Administrative day services are inpatient hospital services provided to beneficiaries who were admitted to the hospital for an acute psychiatric inpatient hospital service and the beneficiary's stay at the hospital must be continued beyond the beneficiary's need for acute psychiatric inpatient hospital services due to lack of residential placement options at non-acute residential treatment facilities that meet the needs of the beneficiary.

Psychiatric inpatient hospital services are provided by Short-Doyle / Medi-Cal (SD/MC) hospitals and Fee-for-Service / Medi-Cal (FFS/MC) hospitals. Mental Health Plans (MHPs) claim reimbursement for the cost of psychiatric inpatient hospital services provided by Short-Doyle Medi-Cal hospitals through the Short-Doyle Medi-Cal (SD/MC) claiming system. FFS/MC hospitals claim reimbursement for the cost of psychiatric inpatient hospital services through the FFS/MC Fiscal Intermediary system. MHPs are responsible for authorization of psychiatric inpatient hospital services reimbursed through either billing system. For SD/MC hospitals, the daily rate includes the cost of any needed professional services. The FFS/MC hospital daily rate does not include professional services, which are billed separately from the FFS/MC inpatient hospital services via the SD/MC claiming system.

Summary:

The forecast for Psychiatric Inpatient Hospital Services provided by FFS/MC hospitals shows growth in costs and clients through 2013-14.

	Forecast Dollars	Forecast Clients
FY 2008-09	\$110,926,714	14,360
FY 2009-10	\$111,839,820	14,537
FY 2010-11	\$120,501,219	14,864
FY 2011-12	\$129,312,474	14,298
FY 2012-13	\$143,623,673	15,074
FY 2013-14	\$150,378,481	15,194

Budget Forecast Narrative:

Costs for FFS Psychiatric Hospital Inpatient Services by FFS/MC hospitals are forecast to increase through FY 2013-14.

Client Profile Data:

Client data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes.

The SFY 2011-12 client tables and the historical trends tables are based upon claims received as of February 28, 2013.

Table 13a
ADULTS
Clients Receiving Fee For Service Hospital Inpatient Services by Age Group
Fiscal Year 2011-12
Data as of 02/28/13

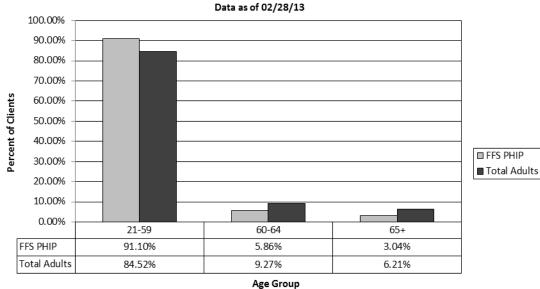
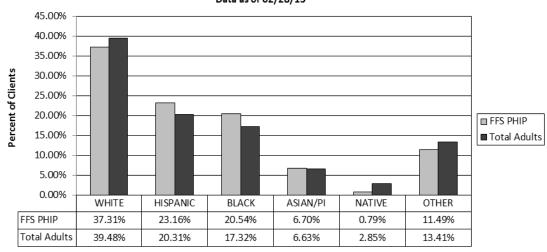
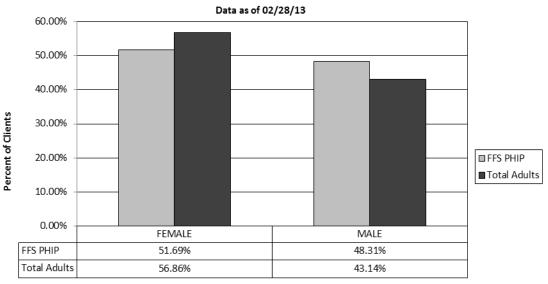


Table 13b
ADULTS
Clients Receiving Fee For Service Psychiatric Hospital Inpatient Services by
Race/Ethnicity
Fiscal Year 2011-12
Data as of 02/28/13



Race/Ethnicity

Table 13c
ADULTS
Clients Receiving Fee For Service Hospital Inpatient Services by Gender
Fiscal Year 2011-12



Gender

Table 13d
Other Services Received by Adults Receiving Fee for Service Psychiatric Inpatient Services
Fiscal Year 2011-12

	Number of Clients	Percent Clients
FFS-HOSPITAL INPATIENT	14,298	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	11,357	79.43%
MEDICATION SUPPORT	9,723	68.00%
TARGETED CASE MANAGEMENT	6,283	43.94%
CRISIS INTERVENTION	5,741	40.15%
CRISIS STABILIZATION	4,251	29.73%
ADULT CRISIS RESIDENTIAL	951	6.65%
HOSPITAL INPATIENT	922	6.45%
PHF	298	2.08%
ADULT RESIDENTIAL	150	1.05%
DAY TX REHABILITATIVE FULL DAY	76	0.53%
DAY TX REHABILITATIVE HALF DAY	17	0.12%
DAY TX INTENSIVE FULL DAY	2	0.01%

Table 13e
Fee for Service Psychiatric Inpatient Approved Amount
Fiscal Year 2011-12

Statistic	Amount
Number of Clients	14,298
Mean	\$9,174
Standard Deviation	\$15,266
Median	\$4,060
Mode	\$1,569
Interquartile Range	\$7,483

Quartile	Amount
100%	\$274,240
99%	\$79,430
95%	\$34,383
90%	\$21,322
75%	\$9575
50%	\$4060
25%	\$2092

Table 13f
Fee for Service Psychiatric Inpatient Services Days
Fiscal Year 2011-12

Statistic	Days	
Number of Clients	14,298	
Mean	14	
Standard Deviation	26	
Median	6	
Mode	3	
Interquartile Range	12	

Quartile	Days
100%	461
99%	131
95%	55
90%	33
75%	15
50%	6
25%	3

Table 13g
Historical Trends
Fee for Service Psychiatric Inpatient Services by Fiscal Year

Data Type	2008-2009	2009-2010	2010-2011	2011-2012
Number of Clients	14,360	14,537	14,864	14,298
Number of Days	203,224	194,469	191,176	207,266
Days Per Client	14	13	13	14
Approved Amount	\$110,926,714	\$111,839,820	\$120,501,219	\$129,312,474

^{*} SFY 201-12 year data based upon actual claims through February 28, 2013.