# Performance Outcomes System Children with an Open Child Welfare Case Report Report run on August 9, 2017

### Background

Two reports will be created during each new reporting period. The reports that will be produced are as follows: statewide aggregate data and population-based county groups.

These reports help meet the intent of the Legislature, as stated in Welfare and Institutions Code Section 14707.5, to develop a performance outcomes system for Early and Periodic

Screening, Diagnosis, and Treatment (EPSDT) mental health services that will improve outcomes at the individual, program, and system levels and inform fiscal decision-making related to the purchase of services. This reporting effort is part of the implementation of a performance outcomes system for Medi- Cal Specialty Mental Health Services (SMHS) for children and youth.

Since 2012 DHCS has worked with several groups of stakeholders to create a structure for reporting, to develop the Performance Measurement Paradigm, and to develop indicators and measures. The Performance Outcomes System will be used to evaluate the domains of access, engagement, service appropriateness to need, service effectiveness, linkages, cost effectiveness and satisfaction. Further information on the Performance Measures System implementation is available on the DHCS website. Documents posted include the relevant legislation, plans submitted to the Legislature, and handouts for meetings with the Stakeholder Advisory Committee back to the first meeting in 2012. To obtain this information go to: http://www.dhcs.ca.gov/provgovpart/pos/Pages/default.aspx

### Purpose and Overview

This population-based aggregate report provides updated information on the initial indicators that were developed for the Performance Outcomes System. DHCS plans to move to annual reporting of this data for the Performance Outcomes System.

The first series of charts and tables focus on the demographics of Foster Care case children and youth under 21 who are receiving SMHS' based on approved claims for Medi-Cal eligible beneficiaries. Specifically, this includes demographics tables of this population by age, gender, and race/ethnicity. Two types of penetration information are provided. Both penetration rates tables are also broken out by demographic characteristics. Utilization of services data are shown in terms of dollars, as well as by service, in time increments. The snapshot table provides a point-in-time view of children/youth arriving, exiting, and continuing services over a two-year period. The time to step down table provides a view over the past four years of the time to step-down services following inpatient discharge.

Where possible, the reports provide trend information by displaying information for four Fiscal Years (FY). A FY is from July 1st to June 30th. For all of the measures and indicators included in this report, the denominator is the "Unique Count of Children and Youth receiving SMHS" shown on page 3 of the report and is broken out by state FY.

Utilization of services reports are shown in terms of dollars, as well as by service in time increments. The snapshot report provides a point-in-time view of children arriving, exiting, and continuing services over a two-year period. The final report provides a view over the past four years of the time to step-down services (i.e., time to next contact after an inpatient discharge). Note: The time to step-down report has a change in methodology from the first report produced in February 2015. In the initial report only outpatient services provided at least one day after the inpatient discharge were included in the calculations. On subsequent reports any outpatient service that occurs on or after the inpatient discharge is included in the analysis.

#### Definitions

**Population**: Open Child Welfare beneficiaries with approved services adjudicated through the Short Doyle/Medi-Cal II claiming system that were:

Age 20 or younger during the approved date of service on the claim.

#### **Data Sources:**

- Short-Doyle/Medi-Cal II (SD/MC II) claims with dates of service in FY 12/13 through FY 15/16.
- Medi-Cal Eligibility Data System (MEDS) data from the Management Information System/Decision Support System (MIS/DSS) FY 12/13 through FY15/16.
- Child Welfare Services/Case Management System (CWS/CMS) data for children in FY 12/13 through FY 15/16.

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### Additional Information

The **Measures Catalog** is the companion document for these reports and provides the methodology and definitions for the measures. Each measure is defined and the numerator and denominator used to develop the metrics are provided with relevant notes and additional references. The Measures Catalog may be found at: <a href="http://www.dhcs.ca.gov/provgovpart/pos/Pages/Performance-Outcomes-System-Reports-and-Measures-Catalog.aspx">http://www.dhcs.ca.gov/provgovpart/pos/Pages/Performance-Outcomes-System-Reports-and-Measures-Catalog.aspx</a>

#### Note on Privacy:

The Health Insurance Portability and Accountability Act (HIPAA) and Code of Federal Regulations (CFR) 42 rules protect most individually identifiable health information in any form or medium, whether electronic, on paper, or oral. DHCS has strict rules in place to protect the identification of individuals in public reports. A "Public Aggregate Reporting – DHCS Business Reports" process has been established to maintain confidentiality of client Personal Information. The Performance Outcomes System complies with Federal and State privacy laws. Thus, the POS must appropriately and accurately de-identify data for public reporting. Due to privacy concerns, some cells in this report may have been suppressed to comply with state and federal rules. When necessary, this data is represented as follows: 1) Data that is missing is indicated as "-".

\*Population-based report findings may be interpreted alongside the POS statewide report findings.

\*The penetration rates reported here were calculated using a different methodology than that used by the External Quality Review Organization (EQRO). The differences in methodology make comparison between the POS penetration rates and the EQRO penetration rates not appropriate or useful. The POS methodology for calculating penetration rates was selected because it is easier to compute, more straightforward to interpret, and is in use by other states and counties. For the POS, the penetration rate is calculated by taking the total number of youth who received X number of SMHS (1 or 5 for POS) in a FY and dividing that by the total number of Medi-Cal eligible youth for that FY. This methodology results in lower penetration rates as compared to the EQRO rates, but it does so across the board so that all counties and the state will be similarly impacted.

\*The **snapshot** report provides a point-in-time look at children and youth's movement through the SMHS system. The report uses five general categories to classify if a youth is entering, exiting, continuing services, or a combination of these categories (e.g., arriving and exiting). Eventually the snapshot data will be used along with measures of service effectiveness to identify whether youth are improving as a result of receiving services from the time they first arrived in the system to when they exit the system. This methodology was adapted from the California Mental Health and Substance Use System Needs Assessment (2012). More information on the original methodology can be found here:

http://www.dhcs.ca.gov/provgovpart/pos/Pages/Performance-Outcomes-System-Reports-and-Measures-Catalog.aspx

\*The psychiatric emergency services/hospital data reported on in the time to step-down services report includes data from Short Doyle/Medi-Cal II claims data and fee-for-service data. In the future this re port will incorporate other outpatient and inpatient Medi-Cal SMHS' billed through the Managed Care healthcare delivery systems. Currently, the number of days is capped at 365 days (to mitigate the impact of extreme statistical anomalies) when calculating the mean and max for time between discharge and step down service. This methodology will be updated in the next reporting cycle. Additionally, county specific and population-based reports are based off of the county of the hospital the patient is discharged from and whom has been attributed the time to next service in days used in the calculations for this indicator.

\*Data Source Methodology: Demographic & Penetration and Snapshot - based on MEDS data; Utilization - based on Claims Submission data; Time to step-down - based on Inpatient Hospital data.

\*Open Child Welfare: Children/youth who are provided child welfare services either while living in their home, or while living out-of-home in a foster care setting. Excludes children: placed in California under the jurisdiction of another state (incoming interstate Compact on the Placement of Children (ICPC)) and who are placed with non-dependent guardians.

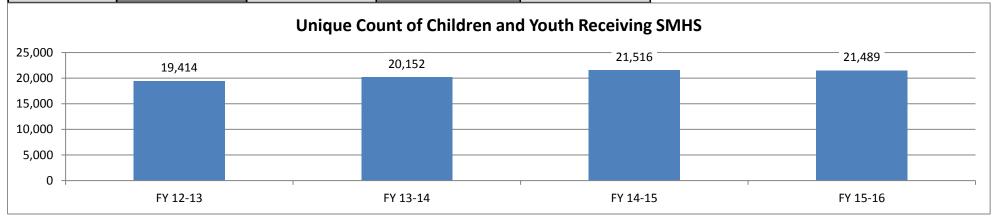
\*Foster Care Placement: Children/youth who are removed from their home by a child placement agency, including county child welfare services and probation departments and placed in a foster care setting. Excludes children: placed in California under the jurisdiction of another state (incoming interstate Compact on the Placement of Children (ICPC)) and who are placed with non-dependent legal guardians.

\*DHCS analyzed the declines in the penetration rates and found that they were due to the Healthy Families transition and Affordable Care Act expansion, which resulted in a large and rapid increase in the number of children/youth who were enrolled in Medi-Cal. Examination of the number of children/youth accessing specialty mental health services showed modest growth. Penetration and utilization data will continue to be monitored over time as they become available.

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

# Demographics Report: Unique Count of Children and Youthwith an Open Child Welfare Case Receiving SMHS by Fiscal Year Large Sized Counties as of August 9, 2017

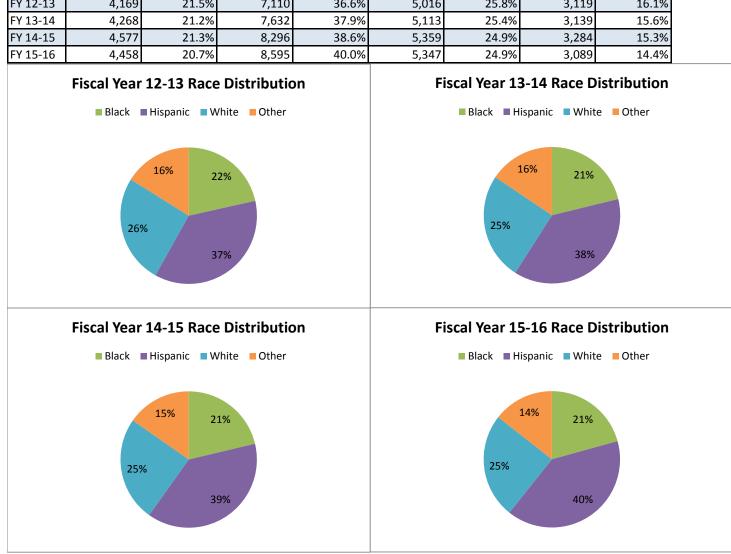
SFY	Unique Count Receiving SMHS*	Year-Over-Year Percentage Change	Unique Count of Youth Child Welfare in Medi-Cal	Year-Over-Year Percentage Change
FY 12-13	19,414		53,279	
FY 13-14	20,152	3.8%	54,785	2.8%
FY 14-15	21,516	6.8%	55,551	1.4%
FY 15-16	21,489	-0.1%	54,224	-2.4%
Compound Annual Growth Rate SFY**		3.4%		0.6%



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

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

Fiscal Year	Black Count	Black %	Hispanic Count	Hispanic %	White Count	White %	Other Count	Other %
FY 12-13	4,169	21.5%	7,110	36.6%	5,016	25.8%	3,119	16.1%
FY 13-14	4,268	21.2%	7,632	37.9%	5,113	25.4%	3,139	15.6%
FY 14-15	4,577	21.3%	8,296	38.6%	5,359	24.9%	3,284	15.3%
FY 15-16	4,458	20.7%	8,595	40.0%	5,347	24.9%	3,089	14.4%

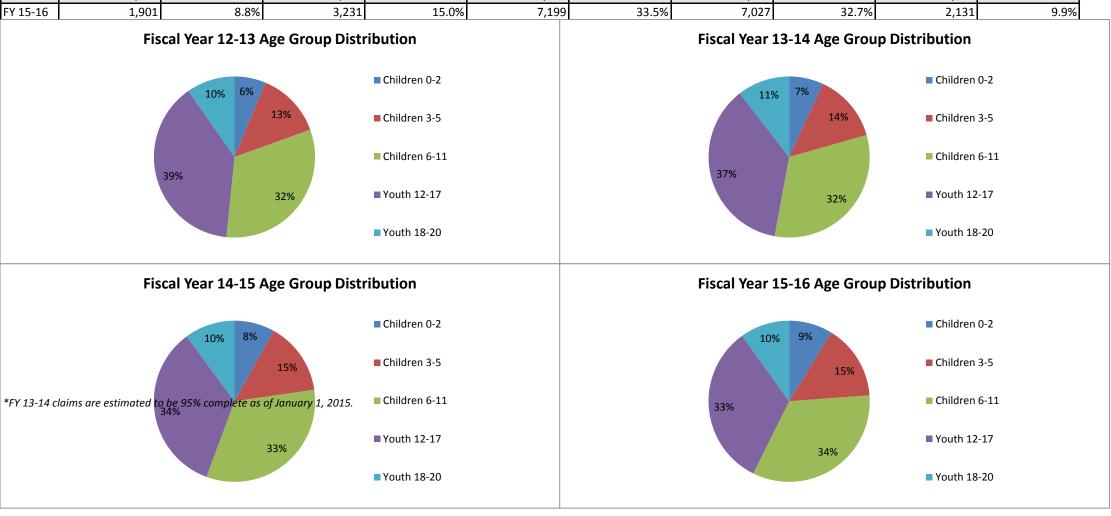


<sup>\*</sup>Please note: This report uses the Medi-Cal Eligibility Data System to obtain race/ethnicity data. CDSS uses Child Welfare Services/ Case Management System to obtain race/ethnicity data. For more information, please refer to the Measures Catalog.

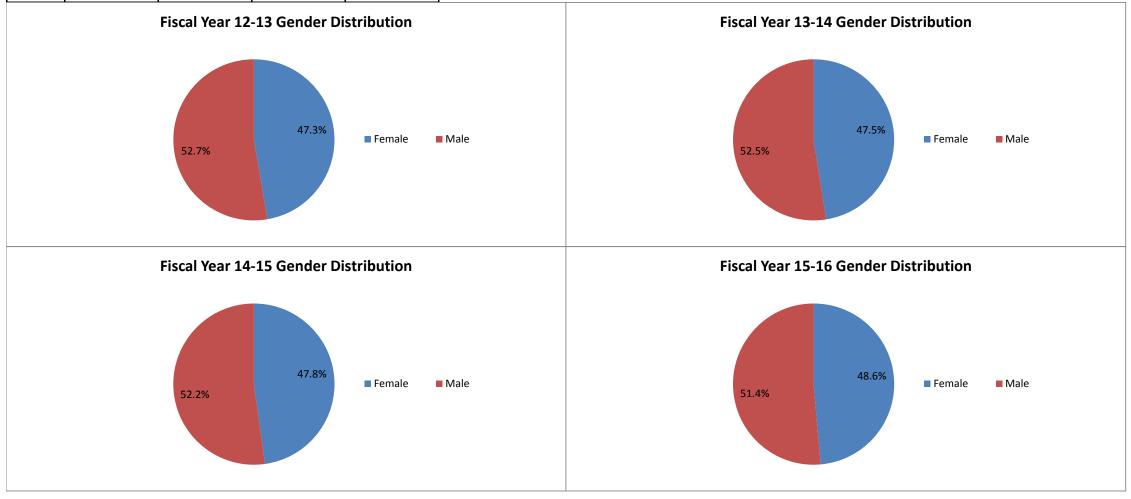
<sup>\*\*</sup>The race/ethnicity data have changed considerably since it was last published in 2016. DHCS is currently performing analyses to determine the nature of these changes and may update this table, if needed.

### Demographics Report: Unique Count of Children and Youthwith an Open Child Welfare Case Receiving SMHS by Fiscal Year Large Sized Counties as of August 9, 2017

Fiscal Year	Children 0-2 Count	Children 0-2 %	Children 3-5 Count	Children 3-5 %	Children 6-11 Count	Children 6-11 %	Youth 12-17 Count	Youth 12-17 %	Youth 18-20 Count	Youth 18-20 %
FY 12-13	1,217	6.3%	2,566	13.2%	6,229	32.1%	7,521	38.7%	1,881	9.7%
FY 13-14	1,397	6.9%	2,765	13.7%	6,514	32.3%	7,369	36.6%	2,107	10.5%
FY 14-15	1,745	8.1%	3,145	14.6%	7,077	32.9%	7,369	34.2%	2,180	10.1%
FY 15-16	1,901	8.8%	3,231	15.0%	7,199	33.5%	7,027	32.7%	2,131	9.9%

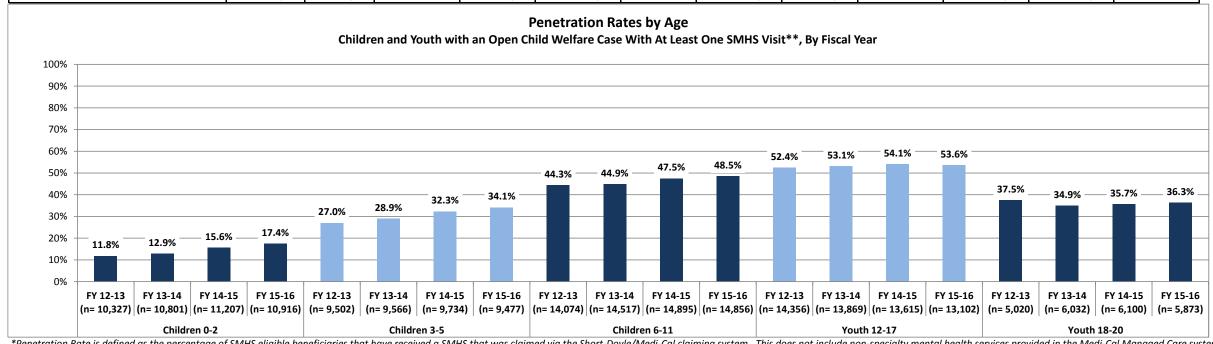


Fiscal Year	Female Count	Female %	Male Count	Male %
FY 12-13	9,180	47.3%	10,234	52.7%
FY 13-14	9,576	47.5%	10,576	52.5%
FY 14-15	10,281	47.8%	11,235	52.2%
FY 15-16	10,446	48.6%	11,043	51.4%



### Penetration Rates\* Report: Children and Youth with an Open Child Welfare Case with At Least One SMHS Visit\*\* Large Sized Counties as of August 9, 2017

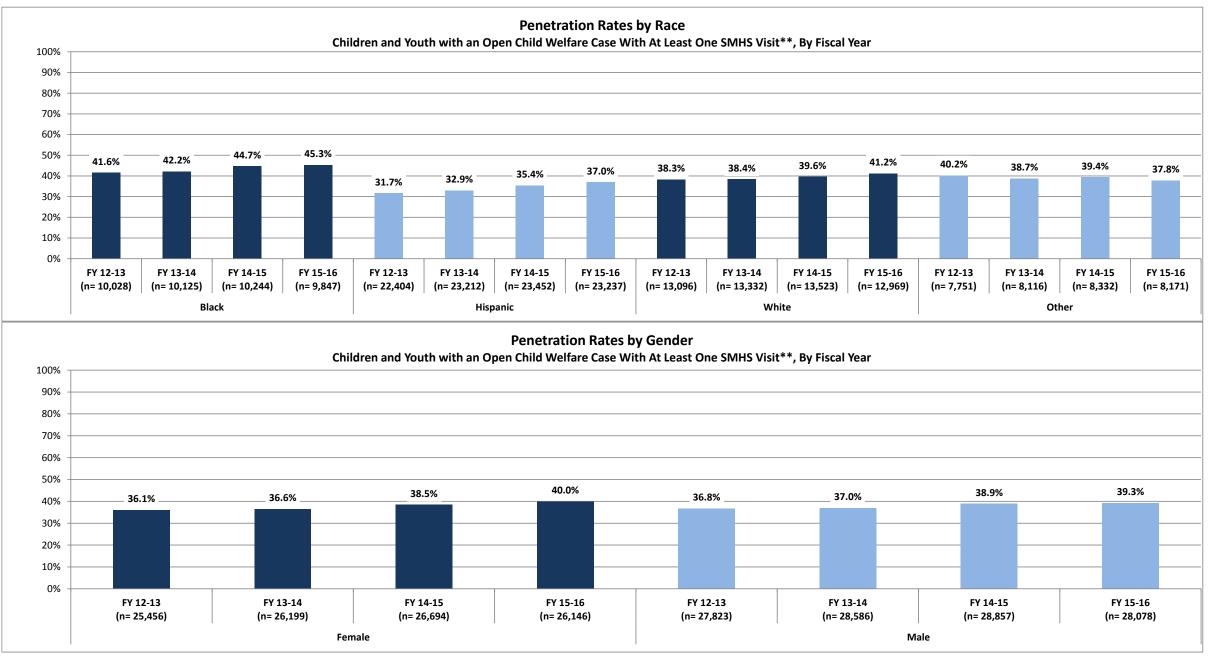
		FY 12-13			FY 13-14			FY 14-15			FY 15-16	
	Children and Youth with an Open Child Welfare Case with 1 or more SMHS Visits	Youth with an Open	Penetration Rate	Children and Youth with an Open Child Welfare Case with 1 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate	Open Child Welfare Case with 1 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate	Children and Youth with an Open Child Welfare Case with 1 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate
All	19,414	53,279	36.4%	20,152	54,785	36.8%	21,516	55,551	38.7%	21,489	54,224	39.6%
Children 0-2	1,217	10,327	11.8%	1,397	10,801	12.9%	1,745	11,207	15.6%	1,901	10,916	17.4%
Children 3-5	2,566	9,502	27.0%	2,765	9,566	28.9%	3,145	9,734	32.3%	3,231	9,477	34.1%
Children 6-11	6,229	14,074	44.3%	6,514	14,517	44.9%	7,077	14,895	47.5%	7,199	14,856	48.5%
Youth 12-17	7,521	14,356	52.4%	7,369	13,869	53.1%	7,369	13,615	54.1%	7,027	13,102	53.6%
Youth 18-20	1,881	5,020	37.5%	2,107	6,032	34.9%	2,180	6,100	35.7%	2,131	5,873	36.3%
Black	4,169	10,028	41.6%	4,268	10,125	42.2%	4,577	10,244	44.7%	4,458	9,847	45.3%
Hispanic	7,110	22,404	31.7%	7,632	23,212	32.9%	8,296	23,452	35.4%	8,595	23,237	37.0%
White	5,016	13,096	38.3%	5,113	13,332	38.4%	5,359	13,523	39.6%	5,347	12,969	41.2%
Other	3,119	7,751	40.2%	3,139	8,116	38.7%	3,284	8,332	39.4%	3,089	8,171	37.8%
Female	9,180	25,456	36.1%	9,576	26,199	36.6%	10,281	26,694	38.5%	10,446	26,146	40.0%
Male	10,234	27,823	36.8%	10,576	28,586	37.0%	11,235	28,857	38.9%	11,043	28,078	39.3%



<sup>\*</sup>Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in the Medi-Cal Managed Care system

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

### Penetration Rates\* Report: Children and Youth with an Open Child Welfare Case with At Least One SMHS Visit\*\* Large Sized Counties as of August 9, 2017

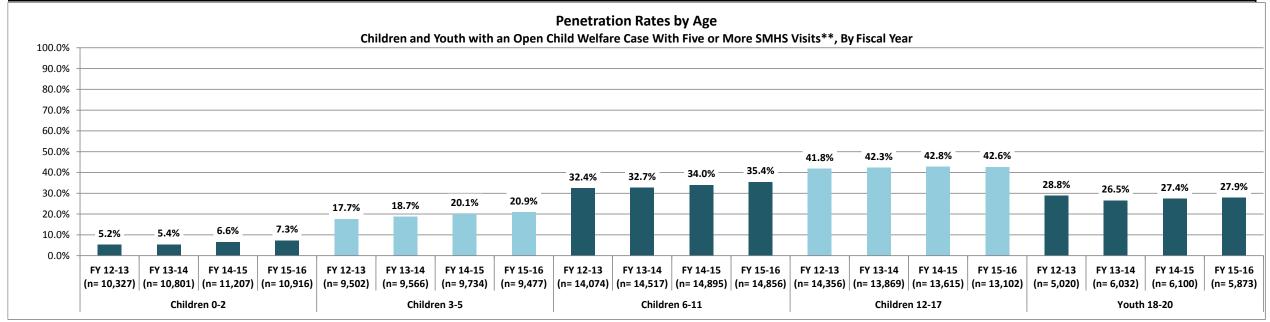


<sup>\*</sup>Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in the Medi-Cal Managed Care system

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

### Penetration Rates\* Report: Children and Youth with an Open Child Welfare Case with Five or More SMHS Visits\*\* Large Sized Counties as of August 9, 2017

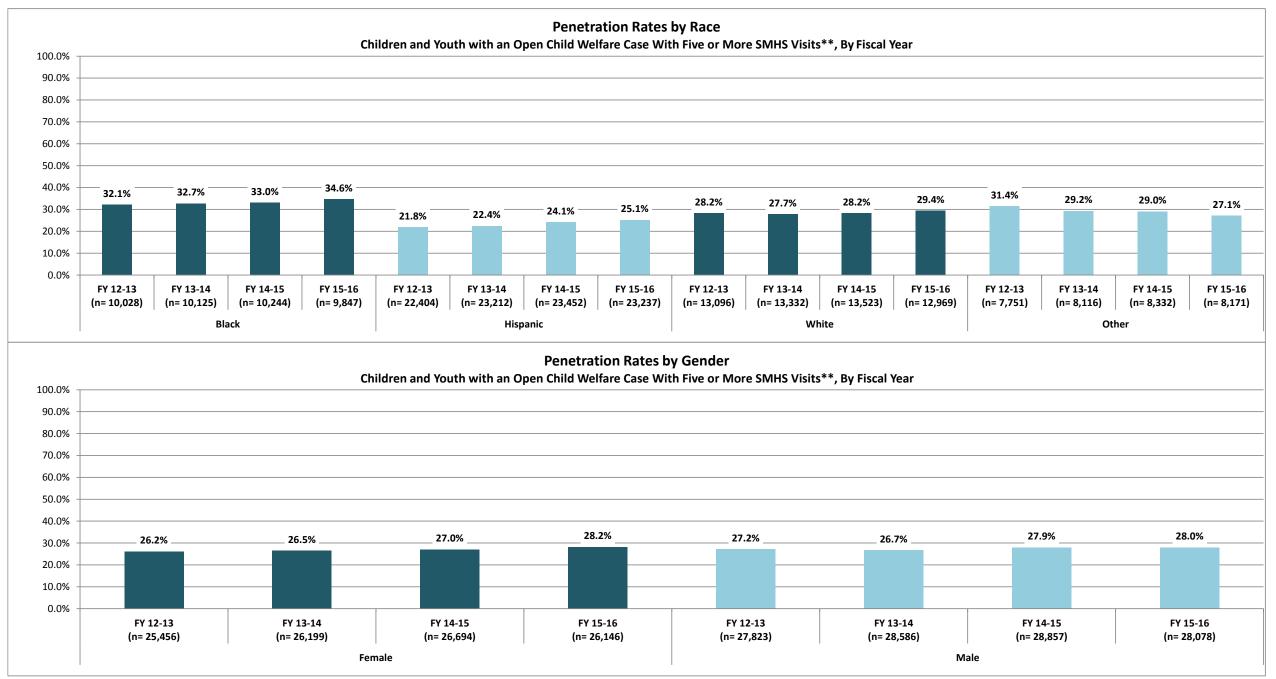
		FY 12-13			FY 13-14			FY 14-15			FY 15-16	
	Children and Youth with an Open Child Welfare Case with 5 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate	Children and Youth with an Open Child Welfare Case with 5 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate	Children and Youth with an Open Child Welfare Case with 5 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate	Children and Youth with an Open Child Welfare Case with 5 or more SMHS Visits	Certified Eligible Children and Youth with an Open Child Welfare Case	Penetration Rate
All	14,226	53,279	26.7%	14,584	54,785	26.6%	15,250	55,551	27.5%	15,258	54,224	28.1%
Children 0-2	532	10,327	5.2%	583	10,801	5.4%	744	11,207	6.6%	794	10,916	7.3%
Children 3-5	1,682	9,502	17.7%	1,785	9,566	18.7%	1,956	9,734	20.1%	1,985	9,477	20.9%
Children 6-11	4,567	14,074	32.4%	4,750	14,517	32.7%	5,060	14,895	34.0%	5,262	14,856	35.4%
Children 12-17	6,001	14,356	41.8%	5,865	13,869	42.3%	5,821	13,615	42.8%	5,581	13,102	42.6%
Youth 18-20	1,444	5,020	28.8%	1,601	6,032	26.5%	1,669	6,100	27.4%	1,636	5,873	27.9%
Black	3,222	10,028	32.1%	3,314	10,125	32.7%	3,376	10,244	33.0%	3,404	9,847	34.6%
Hispanic	4,874	22,404	21.8%	5,207	23,212	22.4%	5,654	23,452	24.1%	5,835	23,237	25.1%
White	3,695	13,096	28.2%	3,690	13,332	27.7%	3,807	13,523	28.2%	3,807	12,969	29.4%
Other	2,435	7,751	31.4%	2,373	8,116	29.2%	2,413	8,332	29.0%	2,212	8,171	27.1%
Female	6,668	25,456	26.2%	6,941	26,199	26.5%	7,209	26,694	27.0%	7,385	26,146	28.2%
Male	7,558	27,823	27.2%	7,643	28,586	26.7%	8,041	28,857	27.9%	7,873	28,078	28.0%



<sup>\*</sup>Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in Medi-Cal Managed Care system.

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

### Penetration Rates\* Report: Children and Youth with an Open Child Welfare Case with Five or More SMHS Visits\*\* Large Sized Counties as of August 9, 2017



<sup>\*</sup>Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in Medi-Cal Managed Care system.

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

#### Utilization Report\*: Approved Specialty Mental Health Services for Children and Youth with an with an Open Child Welfare Case Mean Expenditures and Mean Service Quantity per Beneficiary by Fiscal Year Large Sized Counties as of August 9, 2017

Fiscal Year	DMC Total Approved	IHBS (Minutes)	ICC (Minutes)	Case Management/ Brokerage (Minutes)	Mental Health Services (Minutes)	Therapeutic Behavioral Services (Minutes)	Medication Support Services (Minutes)	Crisis Intervention (Minutes)	Crisis Stabilization (Hours)	Full Day Treatment Intensive (Hours)	Full Day Rehabilitation (Hours)	Hospital Inpatient (Days)	Hospital Inpatient Admin (Days)			Adult Residential Treatment Services (Days)	Health Facility
FY 12-13	\$ 9,658.39	856	317	742	2,218	5,291	357	291	18	533	432	5	16	10	25	65	30
FY 13-14	\$ 9,222.50	2,366	1,078	656	2,001	4,746	354	282	20	498	458	5	12	11	19	87	17
FY 14-15	\$ 8,798.53	2,540	1,158	627	1,858	4,395	349	301	20	514	585	4	9	10	21	61	17
FY 15-16	\$ 8,889.04	2,348	1,146	632	1,841	4,482	336	291	25	527	619	6	16	11	24	82	18
MEAN	\$ 9,142.12	2,027	924	664	1,979	4,728	349	291	21	518	523	5	13	10	22	74	20



<sup>\*</sup>The graphs are color coded so that those reported in the same unit of analysis (e.g., minutes) are colored similarly

Please note that (n) values listed at the bottom of each bar graph represent the actual number of children/youth that received the SMHS represented in their respective graph by Fiscal Year.

#### Utilization Report\*: Approved Specialty Mental Health Services for Children and Youth with an Open Child Welfare Case Mean Expenditures and Mean Service Quantity per Beneficiary by Fiscal Year Large Sized Counties as of August 9, 2017

FY 14-15

(n = 150)

21.3

FY 14-15

(n = 36)

FY 15-16

(n = 142)

23.6

FY 15-16

(n = 28)



(n = 48)

(n = ^)

Please note that (n) values listed at the bottom of each bar graph represent the actual number of children/youth that received the SMHS represented in their respective graph by Fiscal Year.

(n = ^)

(n = ^)

(n = 11)

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(n = 62)

(n = 72)

(n = 84)

<sup>\*</sup>The graphs are color coded so that those reported in the same unit of analysis (e.g., minutes) are colored similarly

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

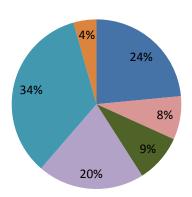
# Snapshot Report: Unique Count of Children and Youth with an Open Child Welfare Case Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year

Large Sized Counties as of August 9, 2017

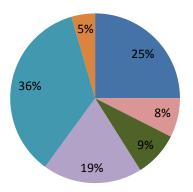
Category	Description (Please refer to the Measures Catalog for more detailed descriptions on all Performance Outcomes System measures.)
Arrivals	Children/Youth that did not receive any SMHS within 3 months of their first date of service in the Fiscal Year.
<b>Service Continuance</b>	Children/Youth receiving continuous services with no breaks in service greater than 90 days for a period of at least 2 years (>= 2 YR) or a period of 1 to 2 years (< 2 YR).
Exiting	Children/Youth that did not receive any SMHS within 3 months after their last date of service in the Fiscal Year.
Arriving & Exiting	A distinct category in which children/youth met both the criteria for <b>Arrivals</b> and <b>Exiting</b> above for the fiscal year.
Service Continuance &	
Exiting	A distinct category in which Children/Youth had at least 2 years of Service Continuance going into the Fiscal Year and then Exited within the same Fiscal Year.

Service Fiscal Year	Arrivals Count	Arrivals %	Service Continuance (>= 2 YR) Count		Service Continuance (<2 YR) Count		Exiting Count	Exiting %	Arriving & Exiting Count	Arriving & Exiting %		(>= 2 YR) and	Total Count	Total %
FY 12-13	4,553	23.5%	1,614	8.3%	1,779	9.2%	3,952	20.4%	6,658	34.3%	858	4.4%	19,414	100%
FY 13-14	5,030	25.0%	1,516	7.5%	1,729	8.6%	3,830	19.0%	7,148	35.5%	899	4.5%	20,152	100%
FY 14-15	4,553	23.5%	1,614	8.3%	1,779	9.2%	3,952	20.4%	6,658	34.3%	858	4.4%	19,414	100%
FY 15-16	5,167	24.0%	1,448	6.7%	1,710	8.0%	4,441	20.7%	7,830	36.4%	893	4.2%	21,489	100%

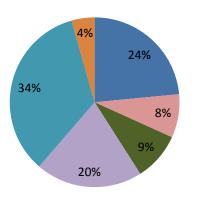
Fiscal Year 12-13 Arrivals, Service Continuance, & Exits Distribution



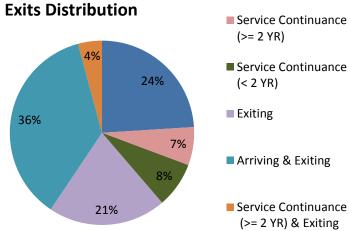
Fiscal Year 13-14 Arrivals, Service Continuance, & Exits Distribution



Fiscal Year 14-15 Arrivals, Service Continuance, & Exits Distribution



Fiscal Year 15-16 Arrivals,
Service Continuance, &
Exits Distribution



Arrivals

# Time to Step Down Report: Children and Youth with an Open Child Welfare Case Stepping Down in SMHS Services Post Inpatient Discharge\* Large Sized Counties as of August 9, 2017

Service FY	Count of Inpatient Discharges with Step Down within 7 Days of Discharge	Percentage of Inpatient Discharges with Step Down within 7 Days of Discharge	Count of Inpatient Discharges with Step Down between 8 and 30 days of Discharge	Discharges with Step Down	Count of Beneficiaries wit a Step Down > 3 Days from Discharge or No Step Down*	0 a Step Down > 30 Days from	Minimum Number of Days between Discharge and Step Down	Maximum Number of Days between Discharge and Step Down	Mean Time to Next Contact Post Inpatient Discharge (Days)	Median Time to Next Contact Post Inpatient Discharge (Days)
FY 12-13	773	77.3%	90	9.0%	13	13.7%	0	346	11.1	. 0
FY 13-14	845	79.9%	109	10.3%	10	9.8%	0	335	8.4	0
FY 14-15	717				13					
FY 15-16	719	77.5%	92	9.9%	11	17 12.6%	0	364	10.8	1
1.2 —	Median Time	ep Down Ser	•	•	16 -	Mean Tim	e Between I Down S	ervice in Day	ys	Step
			1	1	14			14.	1	
1					12	11.1				10.8
0.8					10 +		8.4			
0.6					8 +					
0.4					6 +					
					4 +					
0.2	0	0			2 +					
0 +	FY 12-13	FY 13-14	FY 14-15	FY 15-16	0 +	FY 12-13	FY 13-14	FY 14	-15	FY 15-16
100% 80%	13.79 9.0%	<u> </u>		•	-	31 Days + or No Step  13. 12.	Down	Down Servi	12.6% 9.9%	
40%	77.3%	6		79.9%		73.	5%		77.5%	

FY 13-14

( 607 Unique Beneficiaries with

1,058 Total Inpatient Discharges)

20%

FY 12-13

( 572 Unique Beneficiaries with

1,000 Total Inpatient Discharges )

FY 14-15

(581 Unique Beneficiaries with

975 Total Inpatient Discharges )

FY 15-16

( 559 Unique Beneficiaries with

928 Total Inpatient Discharges )

<sup>\*</sup> **No Step Down** is defined as no Medi-Cal eligible service was claimed through Short-Doyle/Medi-Cal after a claimed inpatient service was billed with a discharge date. This category may include data currently unavailable to DHCS, such as beneficiaries that were moved to a community-based program or beneficiaries that were incarcerated.