## Performance Outcomes System Reports Report run on August 3, 2016

### 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: <a href="http://www.dhcs.ca.gov/provgovpart/pos/Pages/default.aspx">http://www.dhcs.ca.gov/provgovpart/pos/Pages/default.aspx</a>

### **Purpose and Overview**

This statewide aggregate report provides updated information on the initial indicators that were developed for the Performance Outcomes System. DHCS plans to move to annual reporting

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.

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 -

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; or
- Age 21 during the approved date of the service on the claim and a birth date on or after January 1st of the Fiscal Year.

### Data Sources -

- Short-Doyle/Medi-Cal II (SD/MC II) claims with dates of service in FY 10/11 through FY 13/14.
- Medi-Cal Eligibility Data System (MEDS) data from the Management Information System/Decision Support System (MIS/DSS) FY 10/11 through FY 13/14.

### Performance Outcomes System Reports Report run on August 3, 2016

• Child Welfare Services/Case Management System (CWS/CMS) data for children in FY 11/12 through FY 14/15.

### **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, me dium, whether electronic, on paper, or oral. DHCS has strict rules in place to protect the identification of individuals in public reports. A "Public Aggregate Reporting – DHCS Business Reports" process has been established to maintain confidentiality of client Personal Information. The Performance Outcomes System complies with Federal and State privacy laws. Thus, the POS must appropriately and accurately de-identify data for public reporting. Due to privacy concerns, some cells in this report may have been suppressed to comply with state and federal rules. When necessary, this data is represented as follows: 1) Data that is missing is indicated as "-" 2) Data that has been suppressed due to privacy concerns is indicated as "-".

### **Report Interpretation**

\*Population-based 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 penetrationrates 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). As of now, this report only classifies youth and their service usage for FY 12/13 and FY13/14. 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 relies solely on claims data from Short Doyle/Medi-Cal II. In the futurethis report 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."

## Performance Outcomes System Reports Report run on August 3, 2016

\*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 guardians.

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

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 11-12	54,583		129,547	
FY 12-13	55,123	1.0%	131,033	1.1%
FY 13-14	56,393	2.3%	134,197	2.4%
FY 14-15	56,867	0.8%	135,811	1.2%
Compound Annual Growth Rate SFY**		1.4%		1.6%

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

\*\*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 11-12	8,668	15.9%	20,849	38.2%	21,336	39.1%	3,730	6.8%
FY 12-13	8,558	15.5%	21,717	39.4%	20,698	37.5%	4,150	7.5%
FY 13-14	8,621	15.3%	22,333	39.6%	20,837	36.9%	4,602	8.2%
FY 14-15	8,389	14.8%	22,100	38.9%	21,418	37.7%	4,960	8.7%

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.

Fiscal Year	Children 0-5 Count	Children 0-5 %	Children 6-11 Count	Children 6-11 %	Children 12-17 Count	Children 12-17 %	Youth 18-20 Count	Youth 18-20 %
FY 11-12	13,101	24.0%	16,855	30.9%	22,488	41.2%	2,139	3.9%
FY 12-13	13,207	24.0%	17,504	31.8%	21,209	38.5%	3,203	5.8%
FY 13-14	13,888	24.6%	18,363	32.6%	20,527	36.4%	3,615	6.4%
FY 14-15	14,191	25.0%	18,861	33.2%	19,954	35.1%	3,861	6.8%

Fiscal Year	Female Count	Female %	Male Count	Male %
FY 11-12	26,041	47.7%	28,542	52.3%
FY 12-13	26,248	47.6%	28 <i>,</i> 875	52.4%
FY 13-14	27,070	48.0%	29,323	52.0%
FY 14-15	27,387	48.2%	29,480	51.8%

		FY 11-12			FY 12-13			FY 13-14			FY 14-15	
	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		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	54,583	129,547	42.1%	55,123	131,033	42.1%	56,393	134,197	42.0%	56,867	135,811	41.9%
Children 0-5	13,101	49,033	26.7%	13,207	49,623	26.6%	13,888	50,363	27.6%	14,191	50,421	28.1%
Children 6-11	16,855	33,872	49.8%	17,504	35,227	49.7%	18,363	36,620	50.1%	18,861	37,204	50.7%
Children 12-17	22,488	38,112	59.0%	21,209	36,550	58.0%	20,527	35,324	58.1%	19,954	34,106	58.5%
Youth 18-20	2,139	8,530	25.1%	3,203	9,633	33.3%	3,615	11,890	30.4%	3,861	14,080	27.4%
Black	8,668	20,798	41.7%	8,558	20,089	42.6%	8,621	19,870	43.4%	8,389	19,646	42.7%
Hispanic	20,849	55,396	37.6%	21,717	56,665	38.3%	22,333	57,926	38.6%	22,100	57,615	38.4%
White	21,336	38,848	54.9%	20,698	39,869	51.9%	20,837	41,438	50.3%	21,418	43,478	49.3%
Other	3,730	14,505	25.7%	4,150	14,410	28.8%	4,602	14,963	30.8%	4,960	15,072	32.9%
Female	26,041	62,068	42.0%	26,248	62,945	41.7%	27,070	64,686	41.8%	27,387	65,537	41.8%
Male	28,542	67,479	42.3%	28,875	68,088	42.4%	29,323	69,511	42.2%	29,480	70,274	42.0%

\*Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. 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.

		FY 11-12			FY 12-13			FY 13-14			FY 14-15	
	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	43,050	129,547	33.2%	43,343	131,033	33.1%	43,717	134,197	32.6%	43,653	135,811	32.1%
Children 0-5	8,883	49,033	18.1%	8,871	49,623	17.9%	9,023	50,363	17.9%	9,189	50,421	18.2%
Children 6-11	13,537	33,872	40.0%	13,993	35,227	39.7%	14,523	36,620	39.7%	14,761	37,204	39.7%
Children 12-17	18,924	38,112	49.7%	17,798	36,550	48.7%	17,142	35,324	48.5%	16,552	34,106	48.5%
Youth 18-20	1,706	8,530	20.0%	2,681	9,633	27.8%	3,029	11,890	25.5%	3,151	14,080	22.4%
Black	6,864	20,798	33.0%	6,819	20,089	33.9%	6,763	19,870	34.0%	6,455	19,646	32.9%
Hispanic	15,743	55,396	28.4%	16,339	56,665	28.8%	16,564	57,926	28.6%	16,107	57,615	28.0%
White	17,552	38,848	45.2%	16,902	39,869	42.4%	16,906	41,438	40.8%	17,270	43,478	39.7%
Other	2,891	14,505	19.9%	3,283	14,410	22.8%	3,484	14,963	23.3%	3,821	15,072	25.4%
Female	20,465	62,068	33.0%	20,554	62,945	32.7%	20,957	64,686	32.4%	20,838	65,537	31.8%
Male	22,585	67,479	33.5%	22,789	68,088	33.5%	22,760	69,511	32.7%	22,815	70,274	32.5%

\*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. \*\*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 Open Child Welfare Case Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Fiscal Year Statewide as of August 3, 2016

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)	Fee for Service	Treatment		Psychiatric Health Facility (Days)
FY 11-12	\$ 8,255.97	0	0	569	2,459	5,420	412	414	17	513	385	9	11	11	19	121	33
FY 12-13	\$ 8,947.73	848	256	513	2,430	5,172	409	399	18	487	435	10	18	11	26	73	40
FY 13-14	\$ 8,909.40	1,985	1,450	466	2,143	5,047	405	411	19	510	470	11	20	11	19	126	33
FY 14-15	\$ 8,747.31	2,393	1,681	447	1,956	4,861	410	426	19	549	543	10	10	10	20	79	28
MEAN	\$ 8,715.10	1,742	1,129	499	2,247	5,125	409	413	18	515	458	10	15	11	21	100	34

Fiscal Year	SDMC Total Clients	IHBS Clients	ICC Clients	Case Management/ Brokerage Clients	Mental Health Services Clients	Therapeutic Behavioral Services Clients		Crisis Intervention Clients	Crisis Stabilization Clients	Full Day Treatment Intensive Clients	Full Day Rehabilitation Clients	Hospital Inpatient Clients	Hospital Inpatient Admin Clients	Fee for Service		Adult Residential Treatment Services Clients	
FY 11-12	54,545	0	0	25,560	52,745	3,165	14,720	3,953	1,256	1,293	1,138	444	33	1,789	^	14	132
FY 12-13	55,108	98	127	24,578	53,393	3,283	14,409	3,833	1,408	924	1,264	480	55	1,848	^	24	130
FY 13-14	56,365	4,868	6,192	24,699	54,652	3,104	14,066	3,842	1,697	763	1,071	438	43	1,977	38	20	135
FY 14-15	56,848	7,133	9,320	23,843	55,183	3,071	13,645	3,561	1,902	393	782	447	60	1,838	61	12	147

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

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

# Snapshot Report: Unique Count of Children and Youth with and Open Child Welfare Case Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year Statewide as of August 3, 2016

Category	Description (Please refer to the Measures Catalog for more detailed descriptions on all Performance Outcomes System measures.)
Arrivals	Children/Youth that did not receive any SMHS within 3 months of their first date of service in the Fiscal Year.
Service Continuance	Children/Youth receiving continuous services with no breaks in service greater than 90 days for a period of at least 2 years (>= 2 YR) or a period of 1 to 2 years (< 2 YR).
Exiting	Children/Youth that did not receive any SMHS within 3 months after their last date of service in the Fiscal Year.
Arriving & Exiting	A distinct category in which children/youth met both the criteria for Arrivals and Exiting above for the fiscal year.
Service Continuance &	
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	Service Continuance (< 2 YR) %	Exiting Count	Exiting %	Arriving & Exiting Count	Arriving & Exiting %		Service Continuance (>= 2 YR) and Exiting %		Total %
FY 12-13	4,558	23.6%	1,652	8.6%	1,751	9.1%	3,930	20.4%	6,616	34.3%	789	4.1%	55,123	100%
FY 13-14	5,092	25.3%	1,670	8.3%	1,662	8.2%	3,686	18.3%	7,073	35.1%	971	4.8%	56,393	100%
FY 14-15	5,264	24.4%	1,554	7.2%	1,711	7.9%	4,161	19.3%	7,826	36.3%	1,055	4.9%	56,867	100%

### Time to Step Down Report: Children and Youth with an Open Child Welfare Case Stepping Down in SMHS Services Post Inpatient Discharge Statewide as of August 3, 2016

Service FY	Count of Inpatient Discharges with Step Down within 7 Days of Discharge	Discharges with Step Down within	hotween 8 and 30	Discharges with 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 11-12	2,296	75.0%	454	14.8%	312	10.2%	0	365	14.8	1
FY 12-13	2,450	77.4%	385	12.2%	332	10.5%	0	365	12.4	1
FY 13-14	2,657	79.5%	367	11.0%	320	9.6%	0	365	11.2	1
FY 14-15	2,375	74.7%	417	13.1%	388	12.2%	0	365	12.2	1

\* **No Step Down** is defined as no Medi-Cal eligible service was claimed through Short-Doyle/Medi-Cal after a claimed inpatient service was billed with a discharge date. 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.