

Performance Outcomes System Reports

Report run on 8/3/2016

Background

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

Population-based county grouped data is presented in this report. County groups are organized into the following four groups based on county population: small-rural, small, medium, and large counties. The counties in each group are listed on page 3 of this report and also available in the Measures Catalog. 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 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 Fiscal Years (FY) 11/12, 12/13, 13/14, and 14/15.

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. Starting with this report, 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.

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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.

Additional Information

The Measures Catalog is the companion document for these reports and provides the methodology and definitions for the measures. Each measure is defined and the numerator and denominator used to develop the metrics are provided with relevant notes and additional references. The Measures Catalog may be found at:

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

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

Report Interpretation

*County-specific findings may be interpreted alongside the POS statewide and population-based 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). 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 future this 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."

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

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County Groupings

Counties are grouped by population, as follows:

Category:

Small Rural: Population is less than 50,000

Small: Population is 50,000-199,999

Medium: Population is 200,000-749,000

Large: Population is 750,000-3,999,999

Very Large: 4,000,000 or greater

Counties in each Category:

Small Rural: Alpine, Amador, Calaveras, Colusa, Del Norte, Glenn, Inyo, Lassen, Mariposa, Modoc, Mono, Plumas, Sierra, Siskiyou, Trinity

Small: El Dorado, Humboldt, Imperial, Kings, Lake, Madera, Mendocino, Napa, Nevada, San Benito, Shasta, Sutter, Tehama, Tuolumne, Yuba

Medium: Butte, Marin, Merced, Monterey, Placer, San Joaquin, San Luis Obispo, San Mateo, Santa Barbara, Santa Cruz, Solano, Sonoma, Stanislaus, Tulare, Yolo
Large: Alameda, Contra Costa, Fresno, Kern, Orange, Riverside, Sacramento, San Bernardino, San Diego, San Francisco, Santa Clara, Ventura

Very Large: Los Angeles

Population information is provided for each county (on pages 13 and 14) of the Measures Catalog.

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

**Demographics Report: Unique Count of Children and Youth Receiving SMHS by Fiscal Year
Small-Rural County Populations as of August 3, 2016**

SFY	Unique Count Receiving SMHS*	Year-Over-Year Percentage Change	Unique Count of Medi-Cal Eligibles	Year-Over-Year Percentage Change
FY 11-12	2,337		37,998	
FY 12-13	2,349	0.5%	39,552	4.1%
FY 13-14	2,707	15.2%	47,075	19.0%
FY 14-15	2,815	4.0%	49,881	6.0%
Compound Annual Growth Rate SFY**		6.4%		9.5%

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

**SFY = State Fiscal Year which is July 1 through June 30.

**Demographics Report: Unique Count of Children and Youth Receiving SMHS by Fiscal Year
Small-Rural County Populations as of August 3, 2016**

Fiscal Year	Alaskan Native or American Indian Count	Alaskan Native or American Indian %	Asian or Pacific Islander Count	Asian or Pacific Islander %	Black Count	Black %	Hispanic Count	Hispanic %	White Count	White %	Other Count	Other %	Unknown Count	Unknown %
FY 11-12	153	6.5%	12	0.5%	35	1.5%	402	17.2%	1,602	68.5%	^	^	^	^
FY 12-13	154	6.6%	14	0.6%	36	1.5%	410	17.5%	1,588	67.6%	^	^	^	^
FY 13-14	159	5.9%	15	0.6%	36	1.3%	530	19.6%	1,769	65.3%	^	^	^	^
FY 14-15	161	5.7%	17	0.6%	27	1.0%	622	22.1%	1,798	63.9%	^	^	^	^

^ Data has been suppressed to protect patient privacy.

**Demographics Report: Unique Count of Children and Youth Receiving SMHS by Fiscal Year
Small-Rural County Populations as of August 3, 2016**

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	208	8.9%	818	35.0%	998	42.7%	313	13.4%
FY 12-13	207	8.8%	822	35.0%	984	41.9%	336	14.3%
FY 13-14	273	10.1%	916	33.8%	1,160	42.9%	358	13.2%
FY 14-15	254	9.0%	940	33.4%	1,244	44.2%	377	13.4%

**Demographics Report: Unique Count of Children and Youth by Fiscal Year
Small-Rural County Populations as of August 3, 2016**

Fiscal Year	Female Count	Female %	Male Count	Male %
FY 11-12	1,065	45.6%	1,272	54.4%
FY 12-13	1,101	46.9%	1,248	53.1%
FY 13-14	1,269	46.9%	1,438	53.1%
FY 14-15	1,309	46.5%	1,506	53.5%

Penetration Rates* Report: Children and Youth With At Least One SMHS Visit
Small-Rural County Populations as of August 3, 2016**

	FY 11-12			FY 12-13			FY 13-14			FY 14-15		
	Children and Youth with 1 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 1 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 1 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 1 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate
All	2,337	37,998	6.2%	2,349	39,552	5.9%	2,707	47,075	5.8%	2,815	49,881	5.6%
Children 0-5	208	13,830	1.5%	207	13,803	1.5%	273	14,969	1.8%	254	15,171	1.7%
Children 6-11	818	9,880	8.3%	822	10,946	7.5%	916	13,704	6.7%	940	14,503	6.5%
Children 12-17	998	9,079	11.0%	984	9,484	10.4%	1,160	11,885	9.8%	1,244	12,482	10.0%
Youth 18-20	313	5,209	6.0%	336	5,319	6.3%	358	6,517	5.5%	377	7,725	4.9%
Alaskan Native or American Indian	153	2,378	6.4%	154	2,439	6.3%	159	2,551	6.2%	161	2,615	6.2%
Asian or Pacific Islander	12	960	1.3%	14	978	1.4%	15	1,146	1.3%	17	1,229	1.4%
Black	35	455	7.7%	36	468	7.7%	36	458	7.9%	27	467	5.8%
Hispanic	402	10,322	3.9%	410	10,981	3.7%	530	14,193	3.7%	622	15,064	4.1%
White	1,602	21,518	7.4%	1,588	21,937	7.2%	1,769	24,599	7.2%	1,798	25,751	7.0%
Other	^	224	^	^	208	^	^	337	^	^	312	^
Unknown	^	2,141	^	^	2,541	^	^	3,791	^	^	4,443	^
Female	1,065	18,861	5.6%	1,101	19,599	5.6%	1,269	23,192	5.5%	1,309	24,547	5.3%
Male	1,272	19,137	6.6%	1,248	19,953	6.3%	1,438	23,883	6.0%	1,506	25,334	5.9%

*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 that have received at least one SMHS that was claimed through the Short-Doyle/ Medi-Cal claiming system on at least one (1) day in the Fiscal Year.

^ Data has been suppressed to protect patient privacy.

Penetration Rates* Report: Children and Youth With Five or More SMHS Visits
Small-Rural County Populations as of August 3, 2016**

	FY 11-12			FY 12-13			FY 13-14			FY 14-15		
	Children and Youth with 5 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 5 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 5 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate	Children and Youth with 5 or more SMHS Visits	Certified Eligible Children and Youth	Penetration Rate
All	1,670	37,998	4.4%	1,651	39,552	4.2%	1,873	47,075	4.0%	1,858	49,881	3.7%
Children 0-5	126	13,830	0.9%	110	13,803	0.8%	146	14,969	1.0%	134	15,171	0.9%
Children 6-11	625	9,880	6.3%	619	10,946	5.7%	680	13,704	5.0%	645	14,503	4.4%
Children 12-17	718	9,079	7.9%	715	9,484	7.5%	841	11,885	7.1%	870	12,482	7.0%
Youth 18-20	201	5,209	3.9%	193	5,319	3.6%	206	6,517	3.2%	209	7,725	2.7%
Alaskan Native or American Indian	115	2,378	4.8%	106	2,439	4.3%	107	2,551	4.2%	107	2,615	4.1%
Asian or Pacific Islander	^	960	^	^	978	^	12	1,146	1.0%	13	1,229	1.1%
Black	23	455	5.1%	25	468	5.3%	25	458	5.5%	15	467	3.2%
Hispanic	276	10,322	2.7%	288	10,981	2.6%	378	14,193	2.7%	414	15,064	2.7%
White	1,145	21,518	5.3%	1,145	21,937	5.2%	1,204	24,599	4.9%	1,182	25,751	4.6%
Other	^	224	^	^	208	^	^	337	^	^	312	^
Unknown	102	2,141	4.8%	107	2,541	4.2%	^	3,791	^	^	4,443	^
Female	747	18,861	4.0%	748	19,599	3.8%	869	23,192	3.7%	863	24,547	3.5%
Male	923	19,137	4.8%	889	19,953	4.5%	1,004	23,883	4.2%	995	25,334	3.9%

*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 that have received at least five SMHS that were claimed through the Short-Doyle/ Medi-Cal claiming system on at least five (5) or more different days in the Fiscal Year.

^ Data has been suppressed to protect patient privacy.

**Utilization Report*: Approved Specialty Mental Health Services for Children and Youth
Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Fiscal Year**
Small-Rural Population Counties as of August 3, 2016**

Fiscal Year	SDMC Total Approved	IHBS (Minutes)	ICC (Minutes)	Case Management/ Brokerage (Minutes)	Mental Health Services (Minutes)	Therapeutic Behavioral Services (Minutes)	Medication Support Services (Minutes)	Crisis Intervention (Minutes)	Crisis Stabilization (Hours)	Full Day Treatment Intensive (Hours)	Full Day Rehabilitation (Hours)	Hospital Inpatient (Days)	Hospital Inpatient Admin (Days)	Fee for Service Inpatient (Days)	Crisis Residential Treatment Services (Days)	Adult Residential Treatment Services (Days)	Psychiatric Health Facility (Days)
FY 11-12	\$ 4,271.48	0	0	504	1,345	6,366	243	285	0	532	316	0	0	0	0	0	34
FY 12-13	\$ 4,381.98	0	0	513	1,392	5,433	260	279	0	602	303	0	0	0	0	0	35
FY 13-14	\$ 4,078.72	852	291	408	1,232	9,020	266	252	0	380	742	0	0	0	0	0	29
FY 14-15	\$ 4,082.84	2,083	669	304	1,132	3,992	259	236	0	156	604	0	0	0	0	110	20
MEAN	\$ 4,203.76	1,467	480	432	1,275	6,203	257	263	0	417	491	0	0	0	0	110	29

Fiscal Year	SDMC Total Clients	IHBS Clients	ICC Clients	Case Management/ Brokerage Clients	Mental Health Services Clients	Therapeutic Behavioral Services Clients	Medication Support 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 Inpatient Clients	Crisis Residential Treatment Services Clients	Adult Residential Treatment Services Clients	Psychiatric Health Facility Clients
FY 11-12	2,456	-	-	898	2,270	30	756	315	-	^	^	-	-	-	-	-	^
FY 12-13	2,448	-	-	999	2,229	21	719	350	-	^	^	-	-	-	-	-	^
FY 13-14	2,821	36	77	1,089	2,580	17	823	405	-	^	^	-	-	-	-	-	24
FY 14-15	2,918	88	134	1,154	2,643	25	874	509	-	^	^	-	-	-	-	^	17

*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 Receiving SMHS
Arriving, Exiting, and with Service Continuance by Fiscal Year
Small-Rural County Populations 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) %	Service Continuance (<2 YR) Count	Service Continuance (< 2 YR) %	Exiting Count	Exiting %	Arriving & Exiting Count	Arriving & Exiting %	Service Continuance (>= 2 YR) & Exiting Count	Service Continuance (>= 2 YR) and Exiting %	Total Count	Total %
FY 12-13	566	24.1%	188	8.0%	218	9.3%	465	19.8%	834	35.5%	77	3.3%	2,348	100%
FY 13-14	703	26.0%	194	7.2%	230	8.5%	457	16.9%	1,031	38.2%	87	3.2%	2,702	100%
FY 14-15	585	20.7%	189	6.7%	257	9.1%	574	20.4%	1,120	39.7%	95	3.4%	2,820	100%