

Performance Outcomes System Children with an Open Child Welfare Case County 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 county 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:

<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, 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 "^".

*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 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.

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

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

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

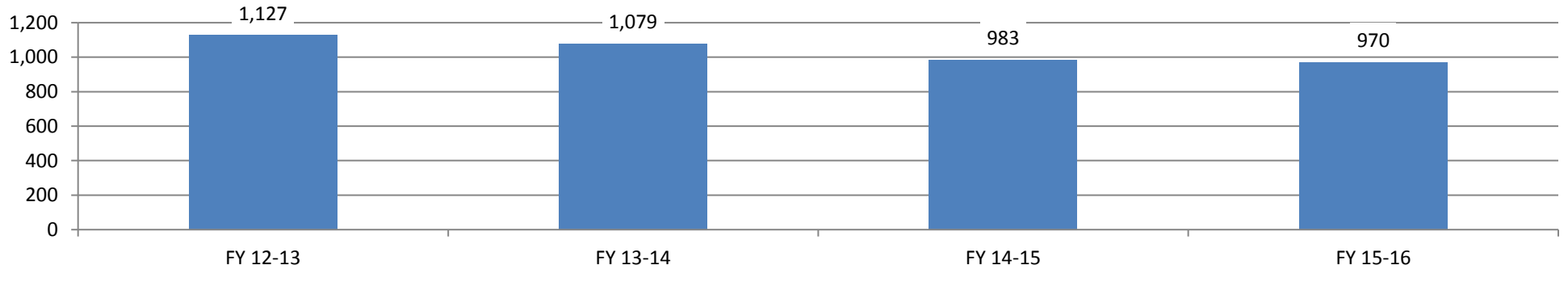
Please contact cmhpos@dhcs.ca.gov for any questions regarding this report.

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

Kern County as of August 9, 2017

SFY	Unique Count Receiving SMHS*	Year-Over-Year Percentage Change	Unique Count of Open Child Welfare Youth in Medi-Cal	Year-Over-Year Percentage Change
FY 12-13	1,127		3,378	
FY 13-14	1,079	-4.3%	3,151	-6.7%
FY 14-15	983	-8.9%	3,049	-3.2%
FY 15-16	970	-1.3%	2,824	-7.4%
Compound Annual Growth Rate SFY**		-4.9%		-5.8%

Unique Count of Children and Youth Receiving SMHS



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

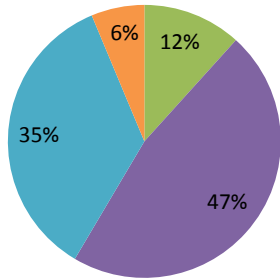
**SFY = State Fiscal Year which is July 1 through June 30.

Demographics Report: Unique Count of Children and Youth with an Open Child Welfare Case Receiving SMHS by Fiscal Year
 Kern County as of August 9, 2017

Fiscal Year	Black Count	Black %	Hispanic Count	Hispanic %	White Count	White %	Other Count	Other %
FY 12-13	132	11.7%	527	46.8%	397	35.2%	71	6.3%
FY 13-14	120	11.1%	496	46.0%	400	37.1%	63	5.8%
FY 14-15	140	14.2%	426	43.3%	359	36.5%	58	5.9%
FY 15-16	125	12.9%	435	44.8%	350	36.1%	60	6.2%

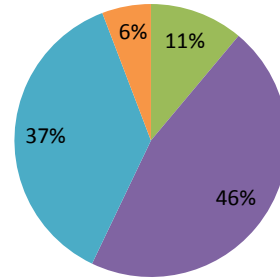
Fiscal Year 12-13 Race Distribution

■ Black ■ Hispanic ■ White ■ Other



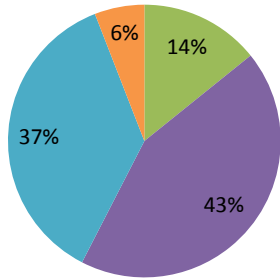
Fiscal Year 13-14 Race Distribution

■ Black ■ Hispanic ■ White ■ Other



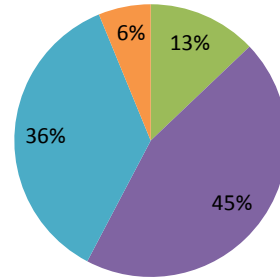
Fiscal Year 14-15 Race Distribution

■ Black ■ Hispanic ■ White ■ Other



Fiscal Year 15-16 Race Distribution

■ Black ■ Hispanic ■ White ■ Other

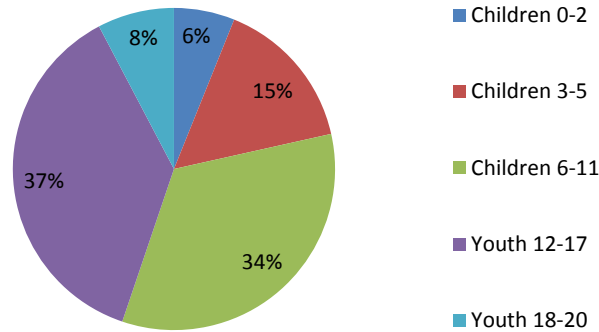


Please note: This report uses the Medi-Cal Eligibility Data System to obtain race/ethnicity data. CDSS uses Child Welfare Services/Case Management System to obtain race/ethnicity data. For more information, please refer to the Measures Catalog.

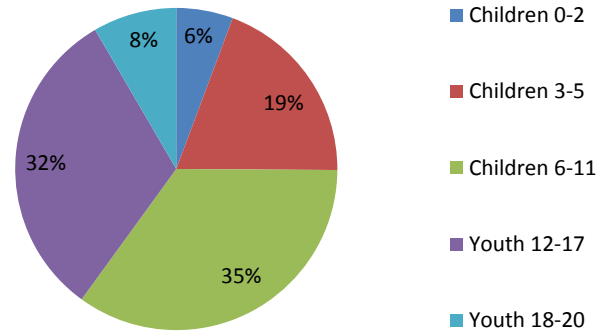
Demographics Report: Unique Count of Children and Youth with an Open Child Welfare Case Receiving SMHS by Fiscal Year
 Kern County as of August 9, 2017

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	69	6.1%	173	15.4%	380	33.7%	418	37.1%	87	7.7%
FY 13-14	61	5.7%	209	19.4%	377	34.9%	341	31.6%	91	8.4%
FY 14-15	21	2.1%	135	13.7%	347	35.3%	357	36.3%	123	12.5%
FY 15-16	18	1.9%	99	10.2%	369	38.0%	358	36.9%	126	13.0%

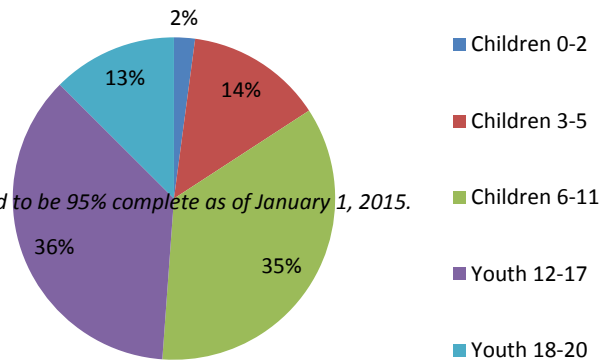
Fiscal Year 12-13 Age Group Distribution



Fiscal Year 13-14 Age Group Distribution

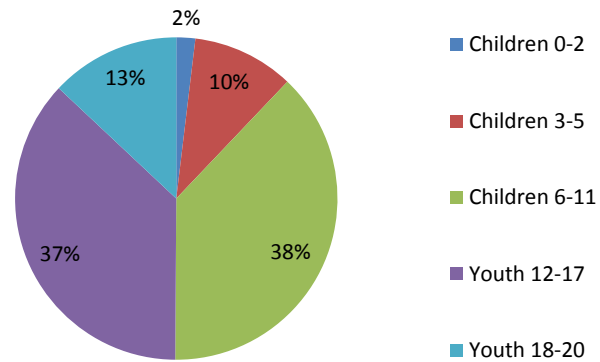


Fiscal Year 14-15 Age Group Distribution



*FY 13-14 claims are estimated to be 95% complete as of January 1, 2015.

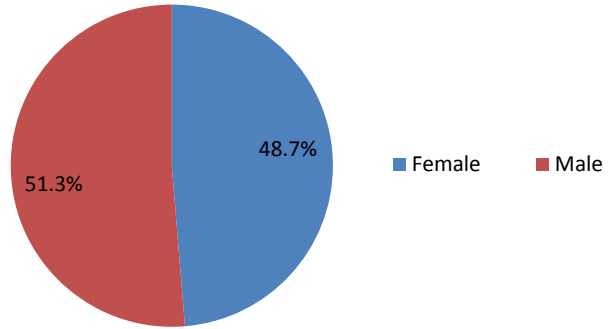
Fiscal Year 15-16 Age Group Distribution



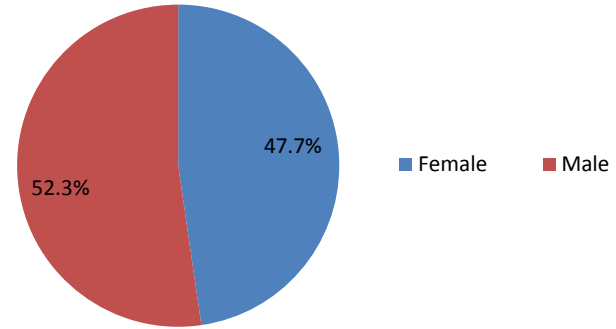
Demographics Report: Unique Count of Children and Youth with an Open Child Welfare Case Receiving SMHS by Fiscal Year
 Kern County as of August 9, 2017

Fiscal Year	Female Count	Female %	Male Count	Male %
FY 12-13	549	48.7%	578	51.3%
FY 13-14	515	47.7%	564	52.3%
FY 14-15	498	50.7%	485	49.3%
FY 15-16	467	48.1%	503	51.9%

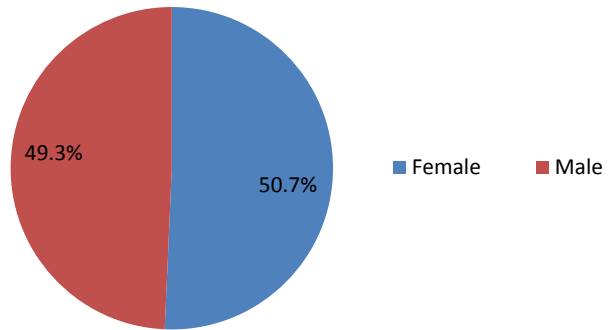
Fiscal Year 12-13 Gender Distribution



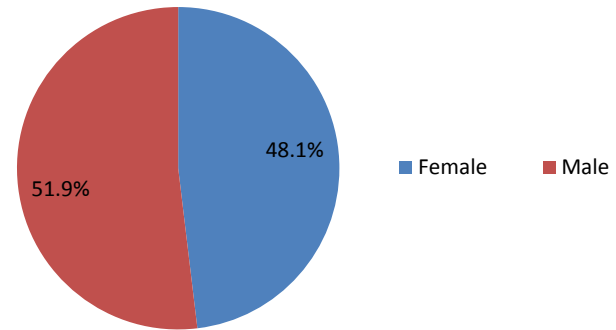
Fiscal Year 13-14 Gender Distribution



Fiscal Year 14-15 Gender Distribution



Fiscal Year 15-16 Gender Distribution

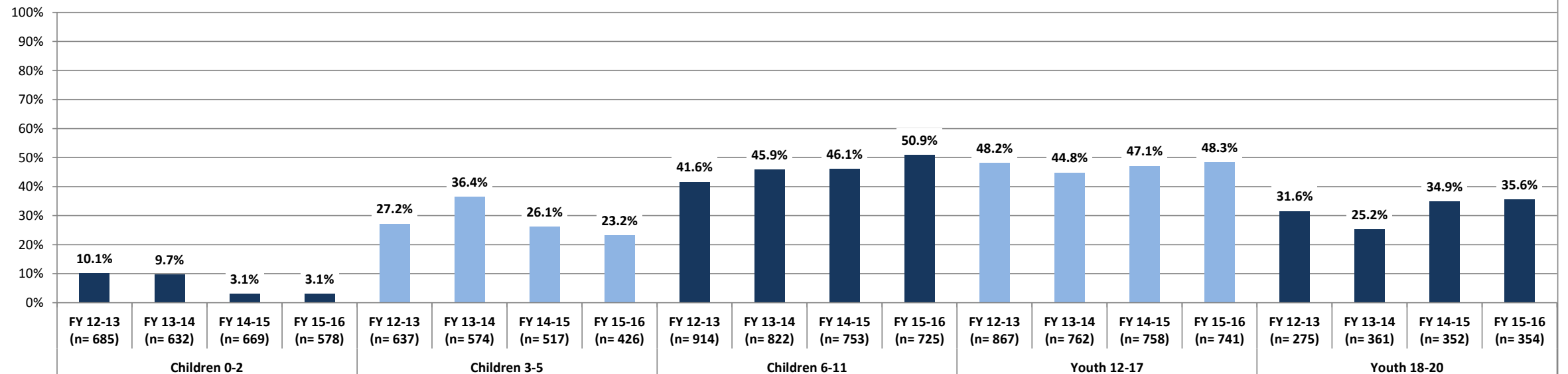


Penetration Rates* Report: Children and Youth with an Open Child Welfare Case with At Least One SMHS Visit**
Kern County as of August 9, 2017

	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	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	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	1,127	3,378	33.4%	1,079	3,151	34.2%	983	3,049	32.2%	970	2,824	34.3%
Children 0-2	69	685	10.1%	61	632	9.7%	21	669	3.1%	18	578	3.1%
Children 3-5	173	637	27.2%	209	574	36.4%	135	517	26.1%	99	426	23.2%
Children 6-11	380	914	41.6%	377	822	45.9%	347	753	46.1%	369	725	50.9%
Youth 12-17	418	867	48.2%	341	762	44.8%	357	758	47.1%	358	741	48.3%
Youth 18-20	87	275	31.6%	91	361	25.2%	123	352	34.9%	126	354	35.6%
Black	132	434	30.4%	120	391	30.7%	140	413	33.9%	125	350	35.7%
Hispanic	527	1,650	31.9%	496	1,540	32.2%	426	1,444	29.5%	435	1,312	33.2%
White	397	1,057	37.6%	400	995	40.2%	359	974	36.9%	350	931	37.6%
Other	71	237	30.0%	63	225	28.0%	58	218	26.6%	60	231	26.0%
Female	549	1,617	34.0%	515	1,484	34.7%	498	1,446	34.4%	467	1,323	35.3%
Male	578	1,761	32.8%	564	1,667	33.8%	485	1,603	30.3%	503	1,501	33.5%

Penetration Rates by Age

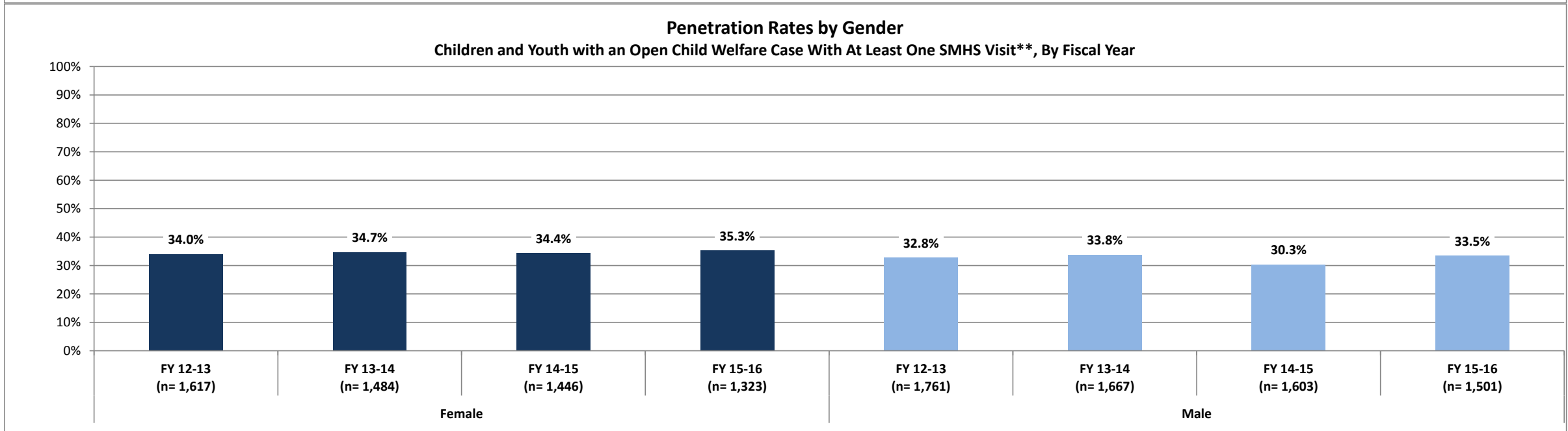
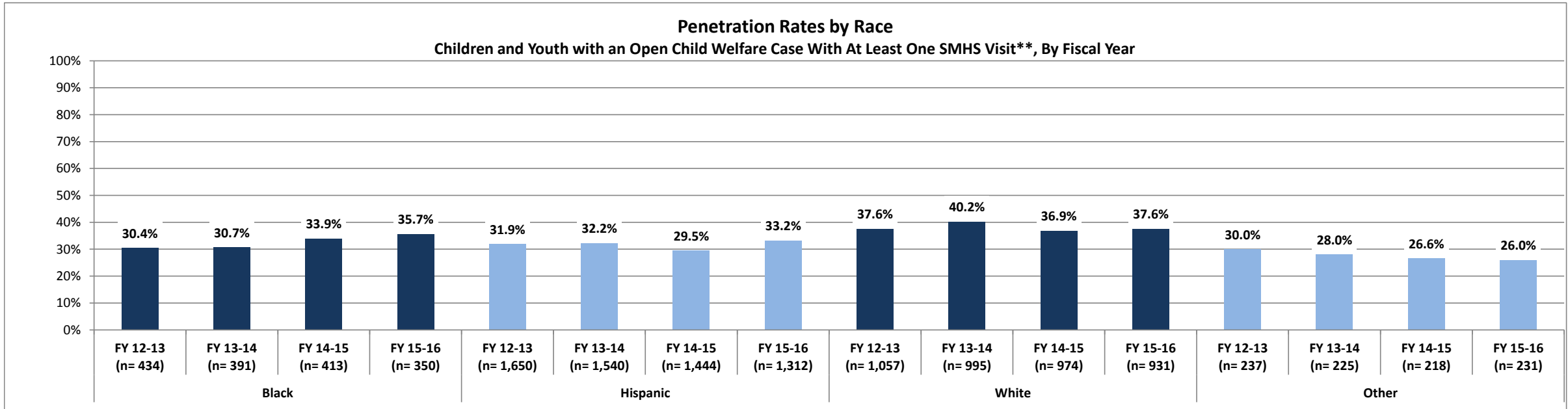
Children and Youth with an Open Child Welfare Case With At Least One SMHS Visit, By Fiscal Year**



*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**
 Kern County as of August 9, 2017

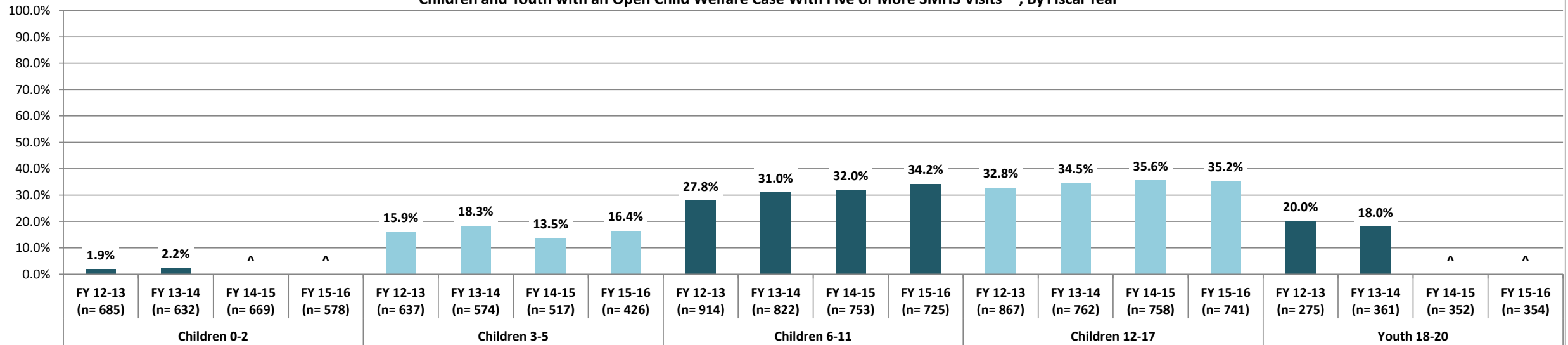


*Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in the Medi-Cal Managed Care system
 **Children and Youth with an 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**
Kern County 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	707	3,378	20.9%	702	3,151	22.3%	680	3,049	22.3%	681	2,824	24.1%
Children 0-2	13	685	1.9%	14	632	2.2%	^	669	^	^	578	^
Children 3-5	101	637	15.9%	105	574	18.3%	70	517	13.5%	70	426	16.4%
Children 6-11	254	914	27.8%	255	822	31.0%	241	753	32.0%	248	725	34.2%
Children 12-17	284	867	32.8%	263	762	34.5%	270	758	35.6%	261	741	35.2%
Youth 18-20	55	275	20.0%	65	361	18.0%	^	352	^	^	354	^
Black	78	434	18.0%	82	391	21.0%	86	413	20.8%	91	350	26.0%
Hispanic	311	1,650	18.8%	315	1,540	20.5%	292	1,444	20.2%	296	1,312	22.6%
White	274	1,057	25.9%	264	995	26.5%	265	974	27.2%	253	931	27.2%
Other	44	237	18.6%	41	225	18.2%	37	218	17.0%	41	231	17.7%
Female	347	1,617	21.5%	340	1,484	22.9%	338	1,446	23.4%	323	1,323	24.4%
Male	360	1,761	20.4%	362	1,667	21.7%	342	1,603	21.3%	358	1,501	23.9%

Penetration Rates by Age
Children and Youth with an Open Child Welfare Case With Five or More SMHS Visits**, By Fiscal Year



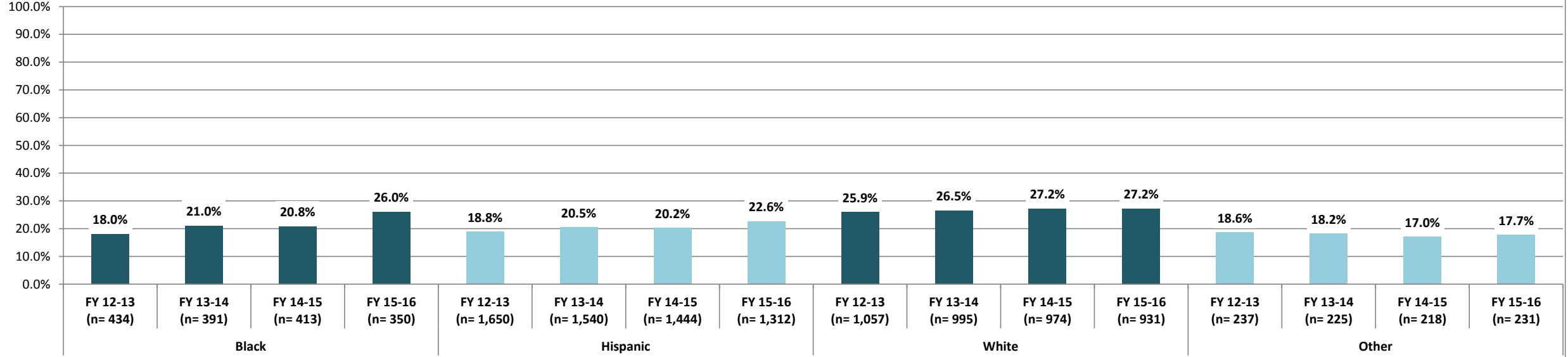
*Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in Medi-Cal Managed Care system.

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

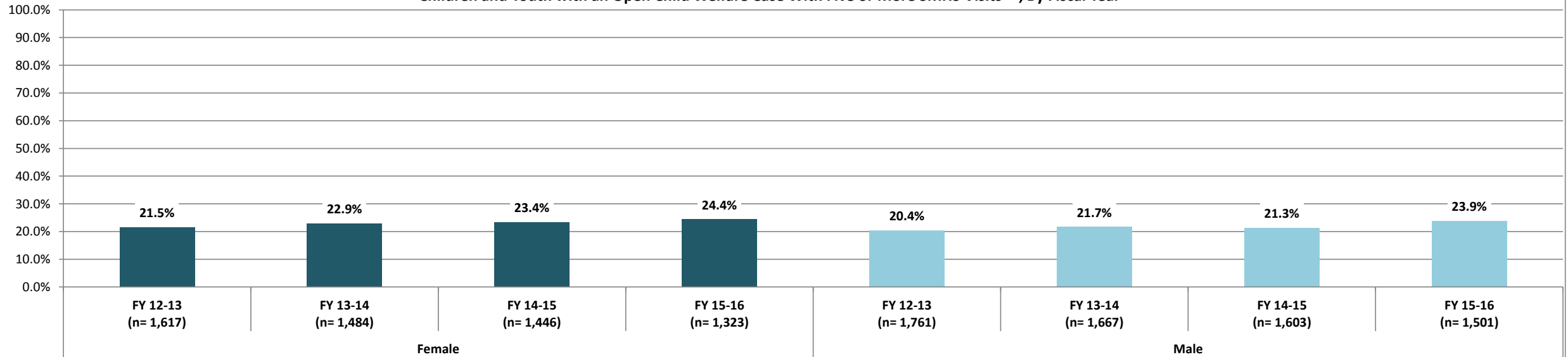
^ Data has been suppressed to protect patient privacy.

Penetration Rates* Report: Children and Youth with an Open Child Welfare Case with Five or More SMHS Visits**
 Kern County as of August 9, 2017

Penetration Rates by Race
 Children and Youth with an Open Child Welfare Case With Five or More SMHS Visits**, By Fiscal Year



Penetration Rates by Gender
 Children and Youth with an Open Child Welfare Case With Five or More SMHS Visits**, By Fiscal Year

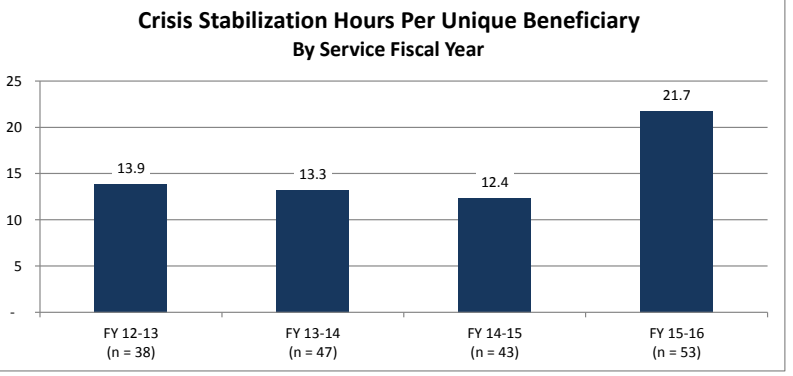
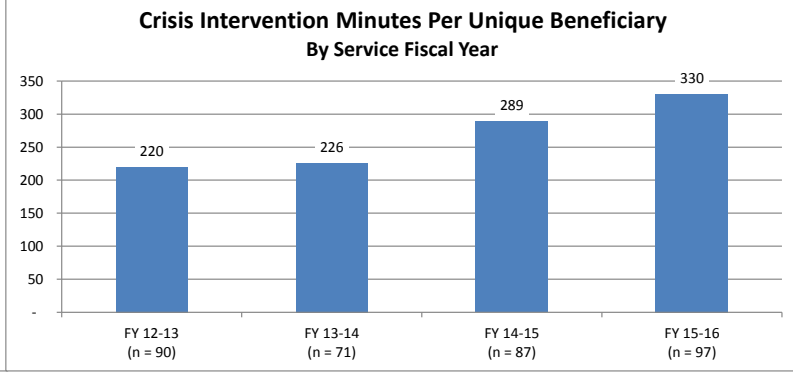
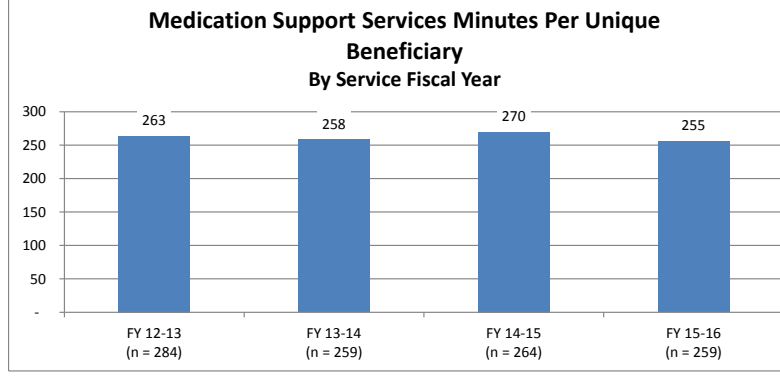
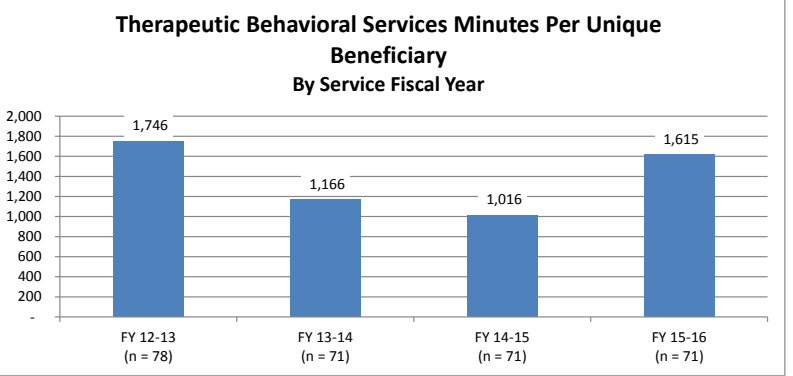
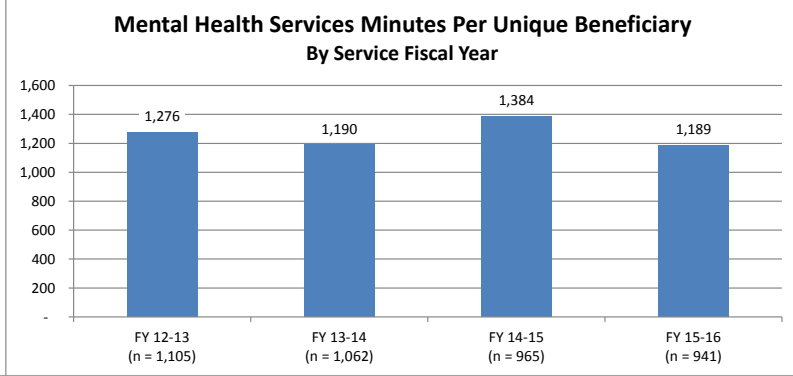
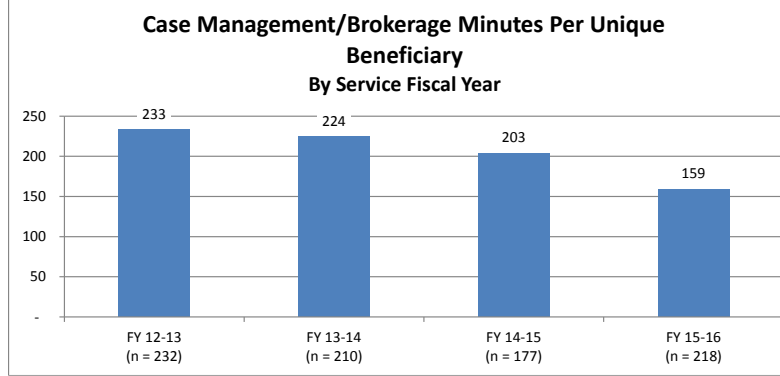
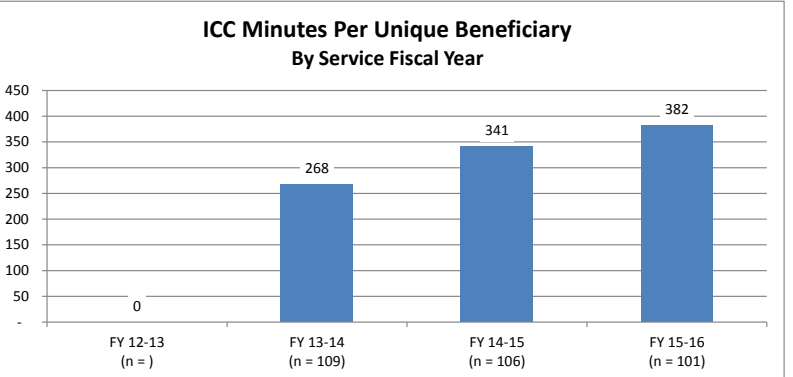
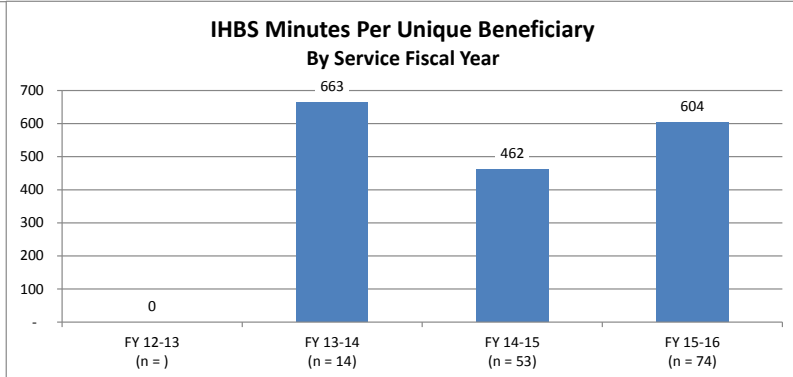
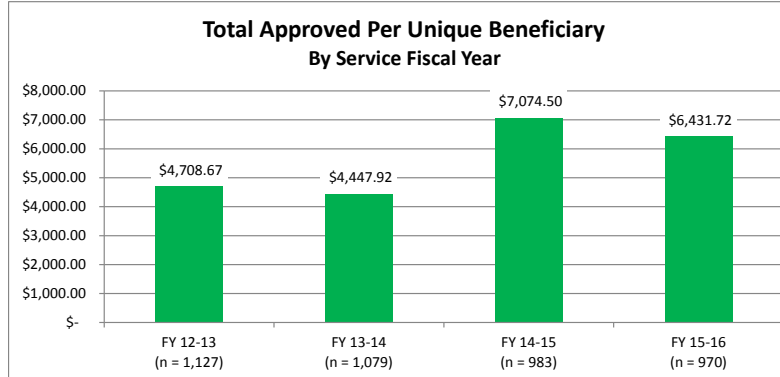


*Penetration Rate is defined as the percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This does not include non-specialty mental health services provided in Medi-Cal Managed Care system.

**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
 Kern County as of August 9, 2017

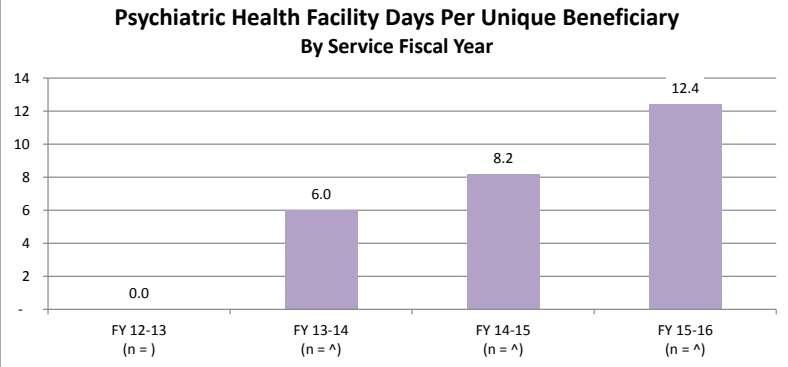
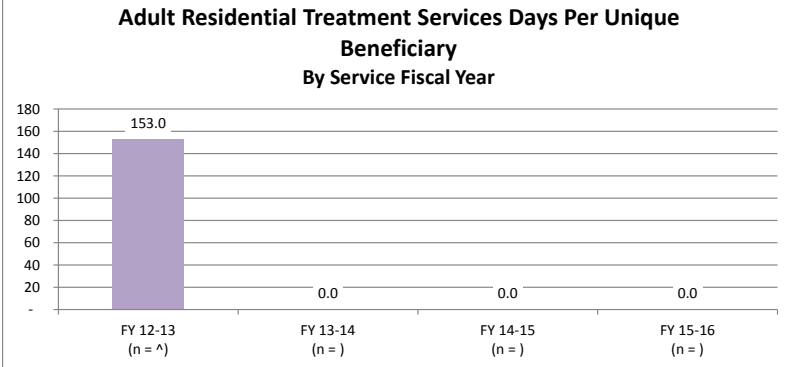
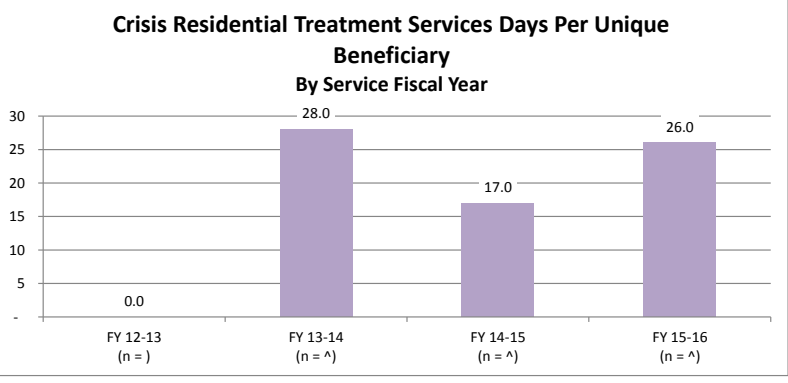
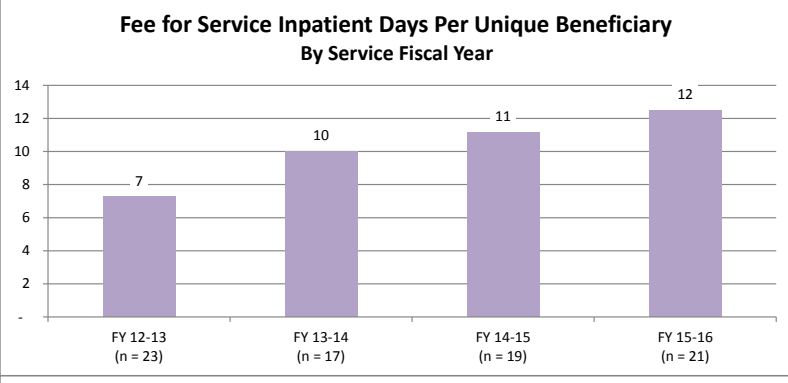
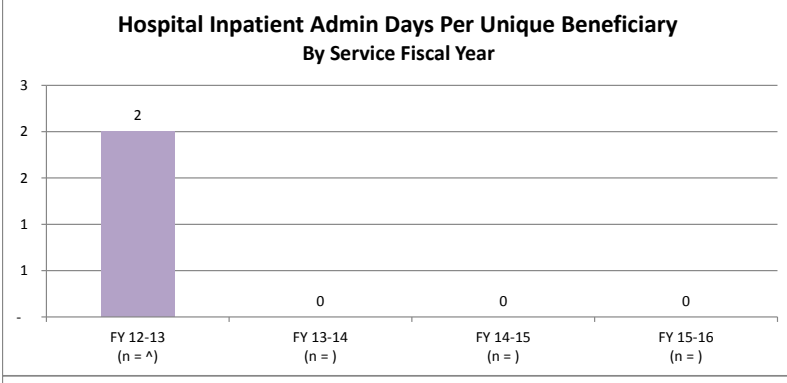
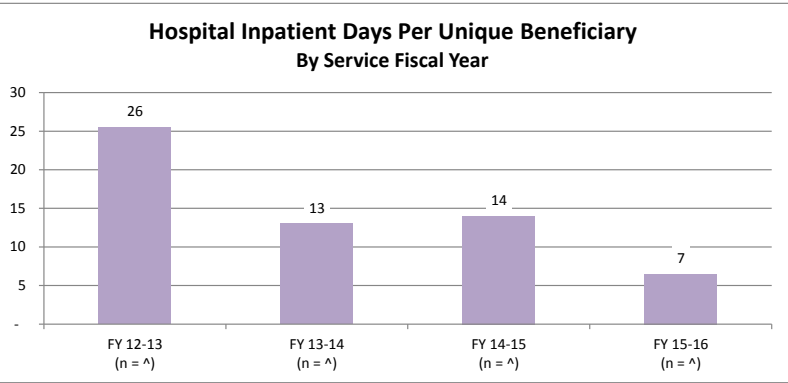
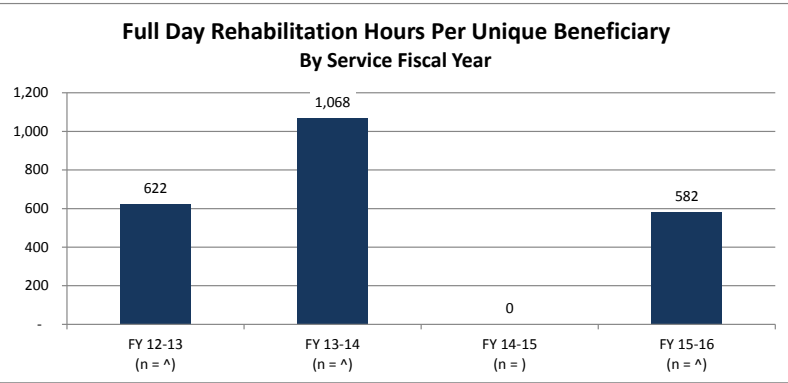
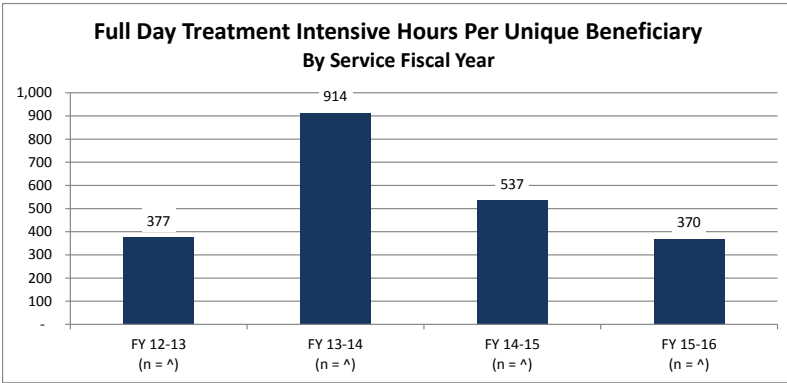
Fiscal Year	SDMC Total Approved	IHBS (Minutes)	ICC (Minutes)	Case Management/Brokerage (Minutes)	Mental Health Services (Minutes)	Therapeutic Behavioral Services (Minutes)	Medication Support Services (Minutes)	Crisis Intervention (Minutes)	Crisis Stabilization (Hours)	Full Day Treatment Intensive (Hours)	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 12-13	\$ 4,708.67	0	0	233	1,276	1,746	263	220	14	377	622	26	2	7	0	153	0
FY 13-14	\$ 4,447.92	663	268	224	1,190	1,166	258	226	13	914	1,068	13	0	10	28	0	6
FY 14-15	\$ 7,074.50	462	341	203	1,384	1,016	270	289	12	537	0	14	0	11	17	0	8
FY 15-16	\$ 6,431.72	604	382	159	1,189	1,615	255	330	22	370	582	7	0	12	26	0	12
MEAN	\$ 5,665.70	576	330	205	1,260	1,386	262	266	15	549	757	15	2	10	24	153	9



*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 Unique Beneficiary by Fiscal Year
 Kern County as of August 9, 2017



*The graphs are color coded so that those reported in the same unit of analysis (e.g., minutes) are colored similarly.
 Please note that (n) values listed at the bottom of each bar graph represent the actual number of children/youth that received the SMHS represented in their respective graph by Fiscal Year.
 ^ Data has been suppressed to protect patient privacy.

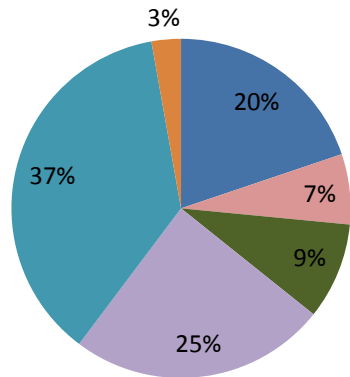
Snapshot Report: Unique Count of Children and Youth with an Open Child Welfare Case Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year

Kern County as of August 9, 2017

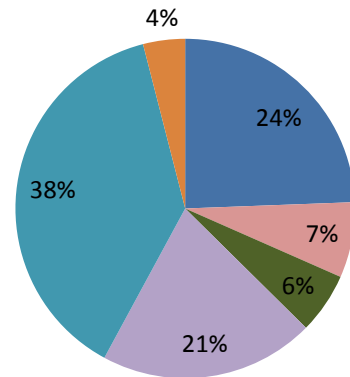
Category	Description (Please refer to the Measures Catalog for more detailed descriptions on all Performance Outcomes System measures.)
Arrivals	Children/Youth that did not receive any SMHS within 3 months of their first date of service in the Fiscal Year.
Service Continuance	Children/Youth receiving 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	223	19.8%	76	6.7%	104	9.2%	276	24.5%	416	36.9%	32	2.8%	1,127	100%
FY 13-14	263	24.4%	78	7.2%	63	5.8%	221	20.5%	411	38.1%	43	4.0%	1,079	100%
FY 14-15	233	23.7%	61	6.2%	84	8.5%	225	22.9%	334	34.0%	46	4.7%	983	100%
FY 15-16	219	22.6%	70	7.2%	70	7.2%	210	21.6%	359	37.0%	42	4.3%	970	100%

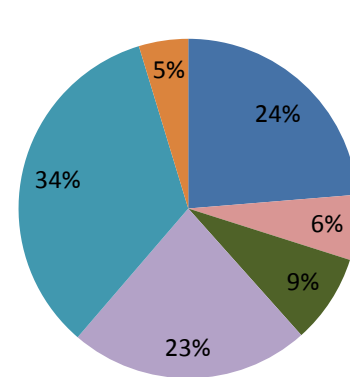
Fiscal Year 12-13 Arrivals, Service Continuance, & Exits Distribution



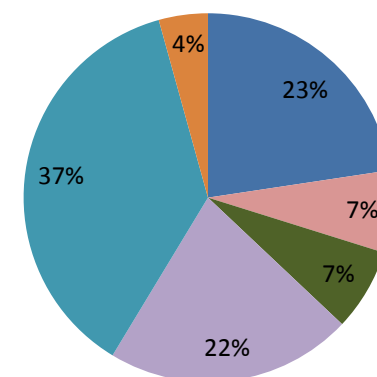
Fiscal Year 13-14 Arrivals, Service Continuance, & Exits Distribution



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



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



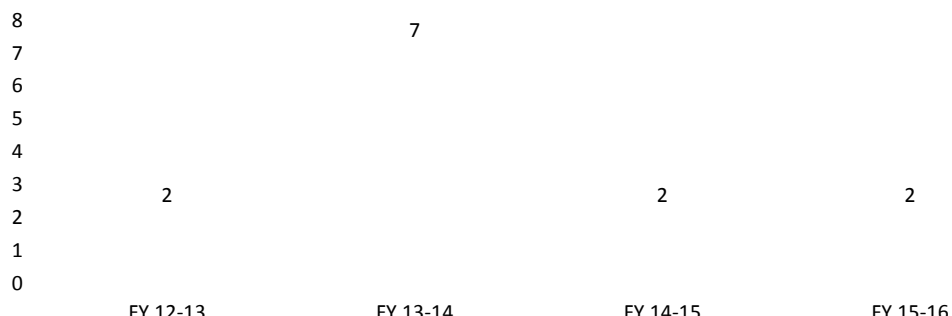
- Arrivals
- Service Continuance (≥ 2 YR)
- Service Continuance (< 2 YR)
- Exiting
- Arriving & Exiting
- Service Continuance (≥ 2 YR) & Exiting

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

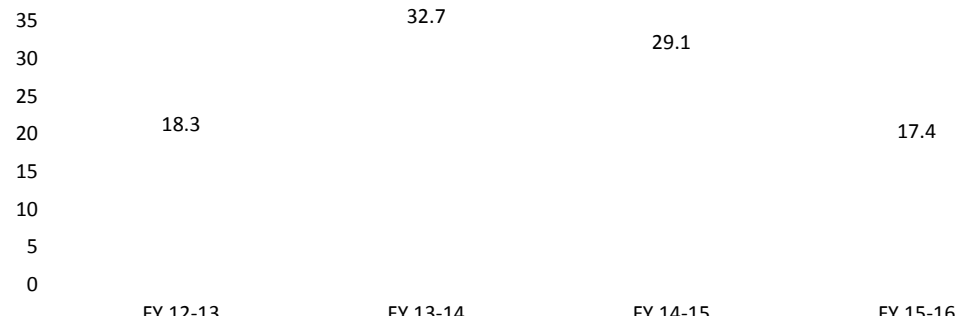
Kern County as of August 9, 2017

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	Percentage of Inpatient Discharges with Step Down between 8 and 30 days of Discharge	Count of Beneficiaries with a Step Down > 30 Days from Discharge or No Step Down*	Percentage of Beneficiaries with a Step Down > 30 Days from Discharge or No Step Down*	Minimum Number of Days between Discharge and Step Down	Maximum Number of Days between Discharge and Step Down	Mean Time to Next Contact Post Inpatient Discharge (Days)	Median Time to Next Contact Post Inpatient Discharge (Days)
FY 12-13	34	68.0%	^	^	^	^	0	317	18.3	2
FY 13-14	19	51.4%	^	^	^	^	0	261	32.7	7
FY 14-15	28	66.7%	^	^	^	^	0	270	29.1	2
FY 15-16	32	69.6%	^	^	^	^	0	347	17.4	2

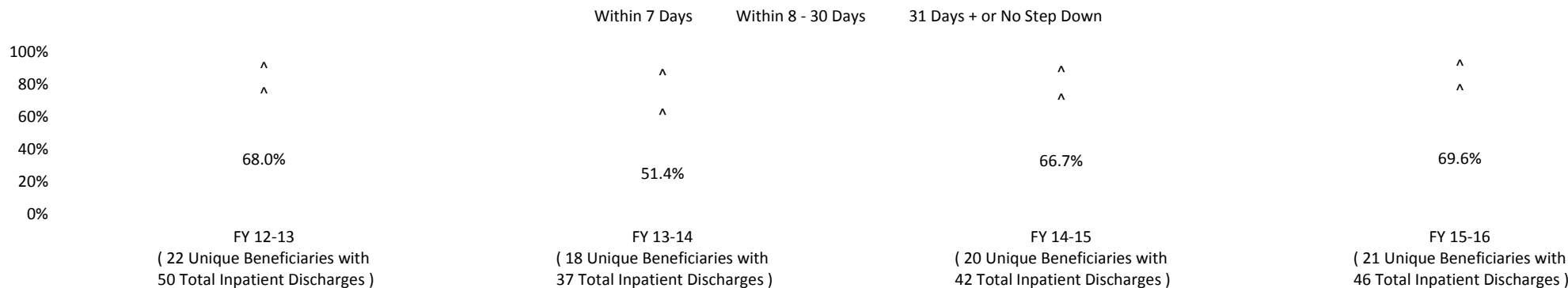
Median Time Between Inpatient Discharge and Step Down Service in Days



Mean Time Between Inpatient Discharge and Step Down Service in Days



CHARTS NOT PRODUCED DUE TO SMALL CELL SIZES.
Percentage of Discharges by Time Between Inpatient Discharge and Step Down Service



* **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.

^ Data has been suppressed to protect patient privacy.