Performance Outcomes Adult Specialty Mental Health Services Report Report Date February 12, 2019

Background

This report measures the effectiveness of adult specialty mental health services. It models reports developed to measure Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) mental health services as mandated by Welfare and Institutions Code Section 14707.5. The intent of these reports is to improve outcomes at the individual, program, and system levels and inform fiscal decision-making related to the purchase of services.

Since 2012 DHCS has worked with several groups of stakeholders to create a structure for reporting, to develop a Performance Measurement Paradigm, and to design 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.

Overview

Three reports will be provided: statewide aggregate data; population-based county groups; and county-specific data. These aggregate reports provide adult information on the initial indicators that were developed for the Performance Outcomes System. DHCS plans to move to annual reporting of these data for the Performance Outcomes System.

The first series of charts and tables focus on the demographics of adults 21* and older 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. Utilization of services reports are shown in terms of dollars, as well as by service in time increments. Two types of penetration information are provided; both penetration rate tables are also broken out by demographic characteristics. The snapshot table provides a point-intime view of adults 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 stepdown services following inpatient discharge.

Where possible, the reports provide trend information by displaying information for Fiscal Years (FY) 14/15, 15/16, 16/17, and 17/18.

Definitions

- *Population Beneficiaries with approved services adjudicated through the Short Doyle/Medi-Cal II claiming system that were:
- Age 21 or older 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 14/15 through FY 17/18.

Medi-Cal Eligibility Data System (MEDS) data from the Management Information System/Decision Support System (MIS/DSS) FY 14/15 through FY 17/18.

Performance Outcomes Adult Specialty Mental Health Services Report Report Date February 12, 2019

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/services/MH/Documents/MedCCC/Library/POSMeasuresCatalog Sept15Reporting Final 1.11.15.pdf

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, these data are represented as follows: 1) Data that are missing is indicated as "-" 2) Data that have been suppressed due to privacy concerns is indicated as "^".

Report Highlights

*County-specific findings may be interpreted alongside the POS statewide and population-based report findings.

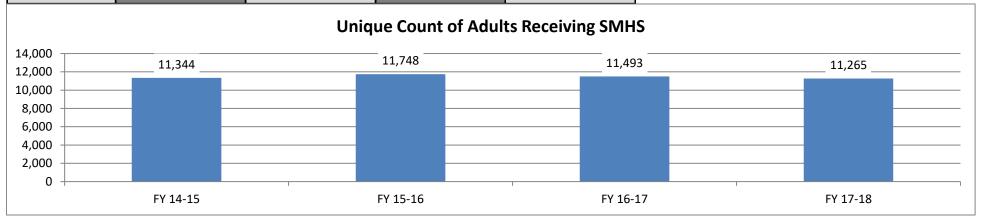
*The **penetration** rates reported here were calculated using a different methodology than that used by the External Quality Review Organization (EQRO). The differences in methodology makes comparison between the POS penetration rates and the EQRO penetration rates not appropriate nor useful. The POS 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 adults who received a number of SMHS (1 or 5 for POS) in a FY and dividing that by the total number of Medi-Cal eligible adults 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 adults' movement through the SMHS system. The report uses five general categories to classify if an adult is entering, exiting, continuing services, or a combination of these categories (e.g., arriving and exiting). As of now, this report only classifies adults and their service usage for FY 14/15 through FY17/18. Eventually the snapshot data will be used along with measures of service effectiveness to identify whether adults 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 measured in the **time to step-down services** report relies solely on claims data from Short Doyle/Medi-Cal II. 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 on the county of fiscal responsibility for the patient who receives step-down services.

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 Medi-Cal Eligibles	Year-Over-Year Percentage Change
FY 14-15	11,344		253,774	
FY 15-16	11,748	3.6%	271,714	7.1%
FY 16-17	11,493	-2.2%	275,387	1.4%
FY 17-18	11,265	-2.0%	263,761	-4.2%
Compound Annual Growth Rate SFY**		-0.2%		1.3%

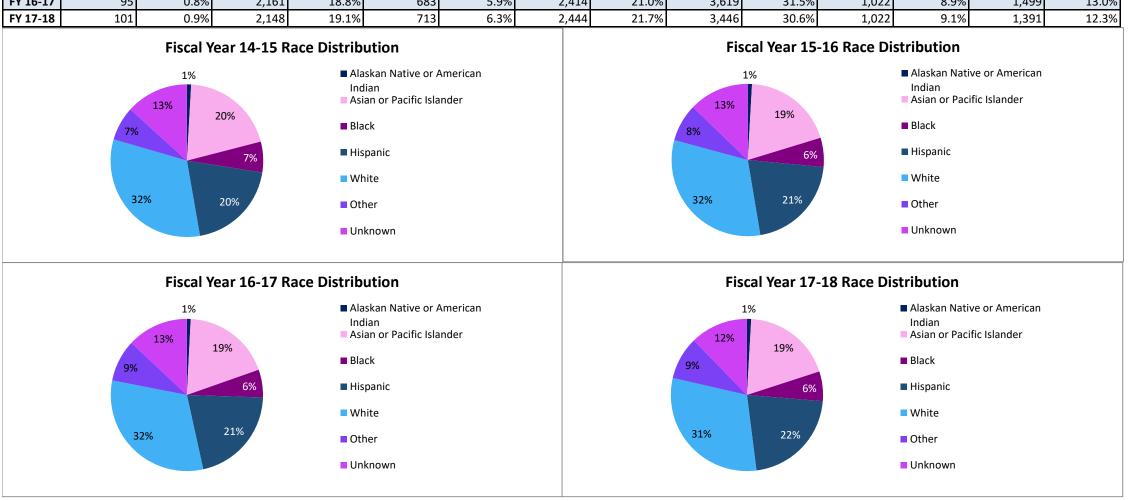


^{*}SMHS = Specialty Mental Health Services. See Measures Catalog for more detailed information.

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

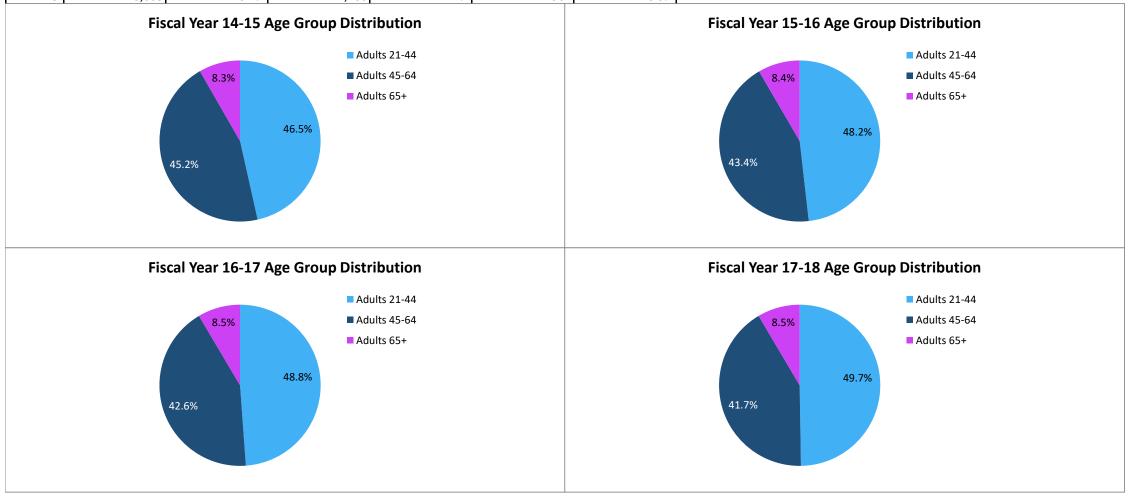
Santa Clara County as of February 12, 2019

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 14-15	99	0.9%	2,276	20.1%	735	6.5%	2,242	19.8%	3,665	32.3%	822	7.2%	1,505	13.3%
FY 15-16	104	0.9%	2,275	19.4%	726	6.2%	2,450	20.9%	3,745	31.9%	941	8.0%	1,507	12.8%
FY 16-17	95	0.8%	2,161	18.8%	683	5.9%	2,414	21.0%	3,619	31.5%	1,022	8.9%	1,499	13.0%
FY 17-18	101	0.9%	2,148	19.1%	713	6.3%	2,444	21.7%	3,446	30.6%	1,022	9.1%	1,391	12.3%
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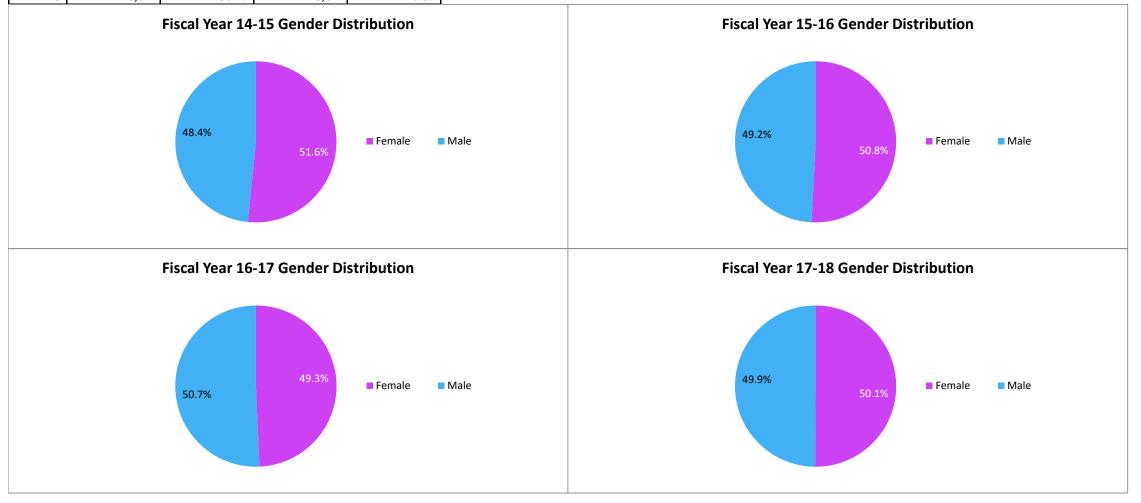


Please note: This report uses the Medi-Cal Eligibility Data System to obtain race/ethnicity data. CDSS uses Child Welfare Services/Case Management System to obtain race/ethnicity data. For more information, please refer to the Measures Catalog.

Fiscal Year	Adults 21-44 Count	Adults 21-44 %	Adults 45-64 Count	Adults 45-64 %	Adults 65+ Count	Adults 65+ %
FY 14-15	5,276	46.5%	5,130	45.2%	938	8.3%
FY 15-16	5,663	48.2%	5,104	43.4%	981	8.4%
FY 16-17	5,613	48.8%	4,900	42.6%	980	8.5%
FY 17-18	5,603	49.7%	4,700	41.7%	962	8.5%

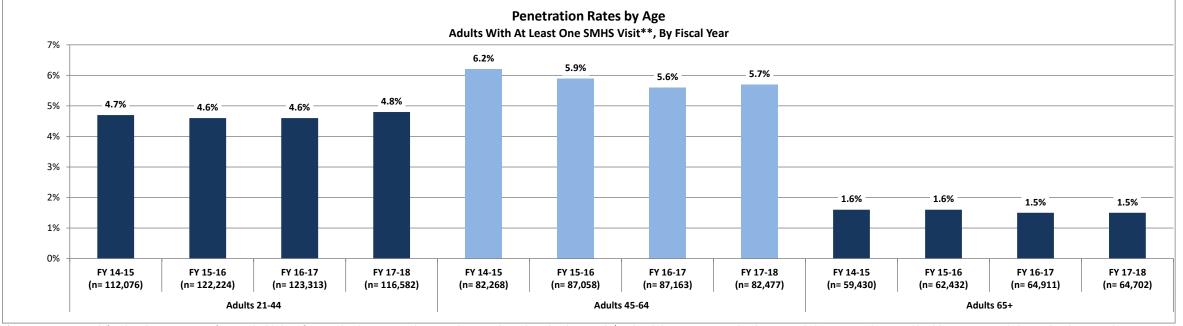


Fiscal Year	Female Count	Female %	Male Count	Male %
FY 14-15	5,857	51.6%	5,487	48.4%
FY 15-16	5,970	50.8%	5,778	49.2%
FY 16-17	5,671	49.3%	5,822	50.7%
FY 17-18	5,644	50.1%	5,621	49.9%



Penetration Rates* Report: Adults With At Least One SMHS Visit**

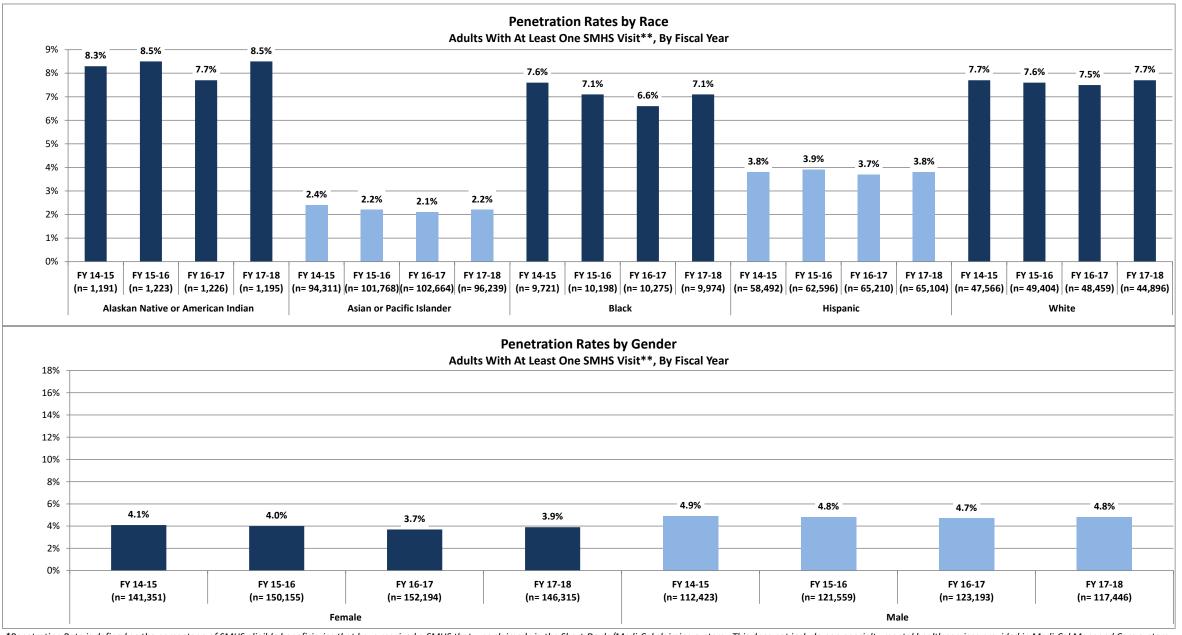
		FY 14-15			FY 15-16			FY 16-17		FY 17-18			
	Adults and Older Adults with 1 or more SMHS	Certified Eligible Adults and Older Adults	Penetration Rate	Adults and Older Adults with 1 or more SMHS	Certified Eligible Adults and Older Adults	Penetration Rate	Adults and Older Adults with 1 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate	Adults and Older Adults with 1 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate	
All	11,344	253,774	4.5%	11,748	271,714	4.3%	11,493	275,387	4.2%	11,265	263,761	4.3%	
Adults 21-44	5,276	112,076	4.7%	5,663	122,224	4.6%	5,613	123,313	4.6%	5,603	116,582	4.8%	
Adults 45-64	5,130	82,268	6.2%	5,104	87,058	5.9%	4,900	87,163	5.6%	4,700	82,477	5.7%	
Adults 65+	938	59,430	1.6%	981	62,432	1.6%	980	64,911	1.5%	962	64,702	1.5%	
Alaskan Native or American Indian	99	1,191	8.3%	104	1,223	8.5%	95	1,226	7.7%	101	1,195	8.5%	
Asian or Pacific Islander	2,276	94,311	2.4%	2,275	101,768	2.2%	2,161	102,664	2.1%	2,148	96,239	2.2%	
Black	735	9,721	7.6%	726	10,198	7.1%	683	10,275	6.6%	713	9,974	7.1%	
Hispanic	2,242	58,492	3.8%	2,450	62,596	3.9%	2,414	65,210	3.7%	2,444	65,104	3.8%	
White	3,665	47,566	7.7%	3,745	49,404	7.6%	3,619	48,459	7.5%	3,446	44,896	7.7%	
Other	822	20,659	4.0%	941	23,306	4.0%	1,022	25,070	4.1%	1,022	25,099	4.1%	
Unknown	1,505	21,834	6.9%	1,507	23,219	6.5%	1,499	22,483	6.7%	1,391	21,254	6.5%	
Female	5,857	141,351	4.1%	5,970	150,155	4.0%	5,671	152,194	3.7%	5,644	146,315	3.9%	
Male	5,487	112,423	4.9%	5,778	121,559	4.8%	5,822	123,193	4.7%	5,621	117,446	4.8%	



^{*}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.

^{**}Adults and Older Adults 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.

Penetration Rates* Report: Adults With At Least One SMHS Visit**

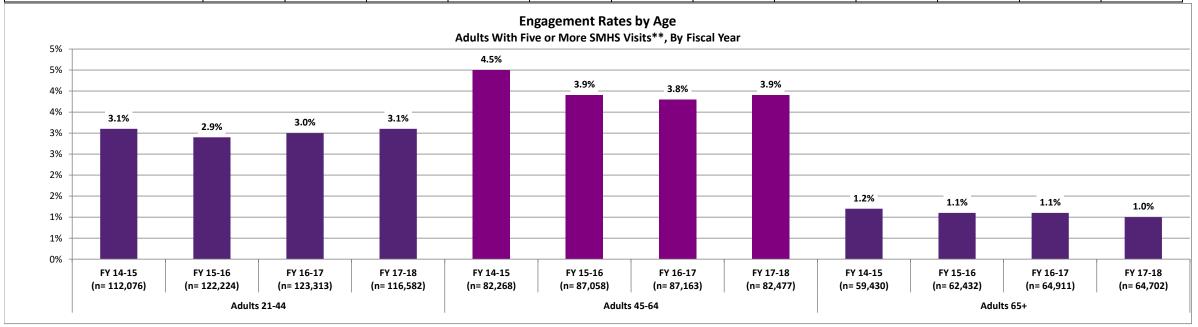


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^{**}Adults and Older Adults at least one SMHS that was claimed through the Short-Doyle/ Medi-Cal claiming system on at least one (1) day in the Fiscal Year.

Engagement Rates* Report: Adults with Five or More SMHS Visits**

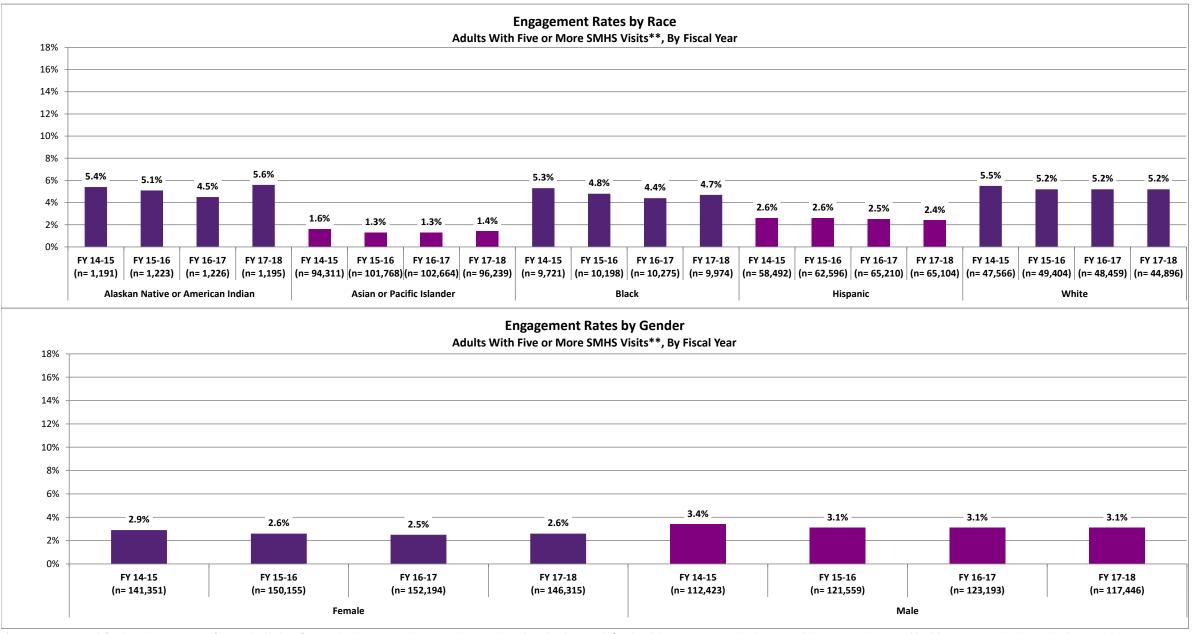
		FY 14-15			FY 15-16			FY 16-17		FY 17-18			
	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate	Adults and Older Adults with 5 or more SMHS Visits	Certified Eligible Adults and Older Adults	Penetration Rate	
All	7,884	253,774	3.1%	7,698	271,714	2.8%	7,647	275,387	2.8%	7,426	263,761	2.8%	
Adults 21-44	3,525	112,076	3.1%	3,580	122,224	2.9%	3,642	123,313	3.0%	3,571	116,582	3.1%	
Adults 45-64	3,665	82,268	4.5%	3,416	87,058	3.9%	3,301	87,163	3.8%	3,182	82,477	3.9%	
Adults 65+	694	59,430	1.2%	702	62,432	1.1%	704	64,911	1.1%	673	64,702	1.0%	
Alaskan Native or American Indian	64	1,191	5.4%	62	1,223	5.1%	55	1,226	4.5%	67	1,195	5.6%	
Asian or Pacific Islander	1,500	94,311	1.6%	1,305	101,768	1.3%	1,302	102,664	1.3%	1,350	96,239	1.4%	
Black	511	9,721	5.3%	491	10,198	4.8%	452	10,275	4.4%	471	9,974	4.7%	
Hispanic	1,515	58,492	2.6%	1,607	62,596	2.6%	1,605	65,210	2.5%	1,581	65,104	2.4%	
White	2,639	47,566	5.5%	2,572	49,404	5.2%	2,533	48,459	5.2%	2,354	44,896	5.2%	
Other	532	20,659	2.6%	567	23,306	2.4%	620	25,070	2.5%	612	25,099	2.4%	
Unknown	1,123	21,834	5.1%	1,094	23,219	4.7%	1,080	22,483	4.8%	991	21,254	4.7%	
Female	4,100	141,351	2.9%	3,889	150,155	2.6%	3,824	152,194	2.5%	3,750	146,315	2.6%	
Male	3,784	112,423	3.4%	3,809	121,559	3.1%	3,823	123,193	3.1%	3,676	117,446	3.1%	



^{*}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.

^{**}Adults and Older Adultsthat 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.

Engagement Rates* Report: Adults with Five or More SMHS Visits**



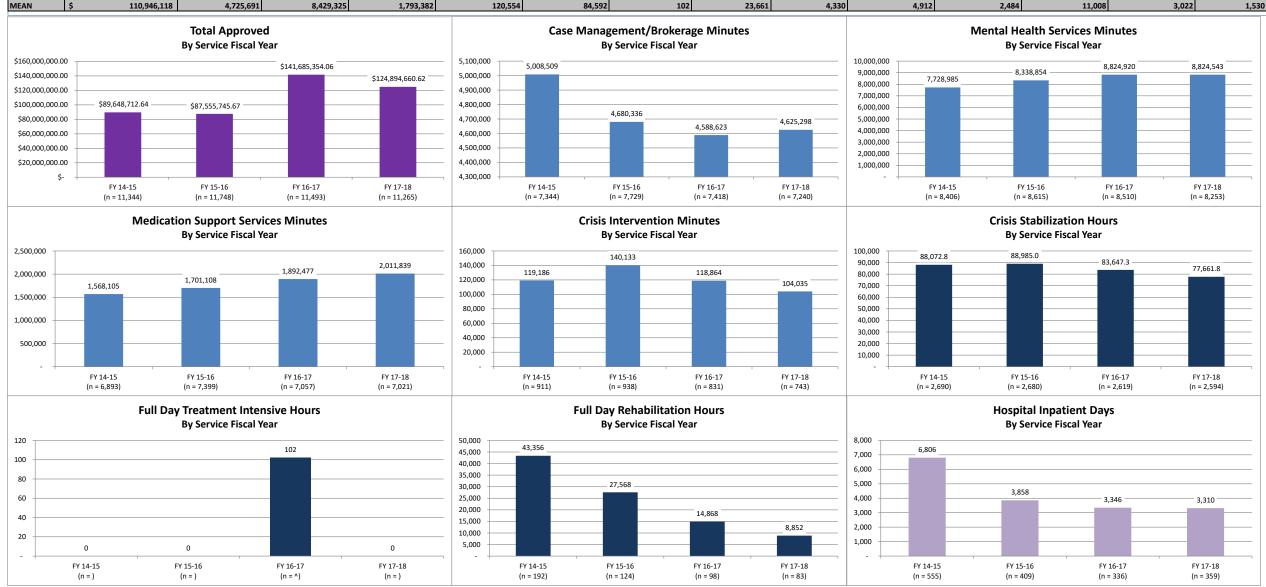
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^{**}Adults and Older Adultsthat have received at least five SMHS that were claimed through the Short-Doyle/ Medi-Cal claiming system on at least five (5) or more different days in the Fiscal Year.

Utilization Report*: Approved Specialty Mental Health Services for Adults Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Fiscal Year*

Santa Clara County as of February 12, 2019

Fiscal Year	SDMC Total Approved	Case Management/ Brokerage (Minutes)		Medication Support Services (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 14-15	\$ 89,648,713	5,008,509	7,728,985	1,568,105	119,186	88,073	0	43,356	6,806	4,735	3,067	11,026	3,526	2,562
FY 15-16	\$ 87,555,746	4,680,336	8,338,854	1,701,108	140,133	88,985	0	27,568	3,858	5,704	2,123	12,130	3,452	2,039
FY 16-17	\$ 141,685,354	4,588,623	8,824,920	1,892,477	118,864	83,647	102	14,868	3,346	6,031	2,389	11,768	3,246	1,473
FY 17-18	\$ 124,894,661	4,625,298	8,824,543	2,011,839	104,035	77,662	0	8,852	3,310	3,178	2,356	9,106	1,863	48
MEAN	\$ 110,946,118	4,725,691	8,429,325	1,793,382	120,554	84,592	102	23,661	4,330	4,912	2,484	11,008	3,022	1,530



^{*}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.

Utilization Report*: Approved Specialty Mental Health Services for Adults Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Fiscal Year*

Santa Clara County as of February 12, 2019

Crisis Residential Treatment Services Days

By Service Fiscal Year

11,768.0

FY 16-17

(n = 415)

9,106.0

FY 17-18

(n = 349)

12,130.0

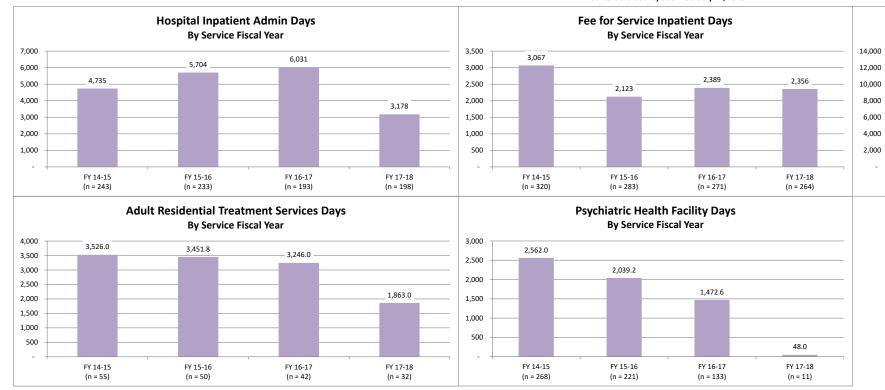
FY 15-16

(n = 477)

11,026.0

FY 14-15

(n = 463)



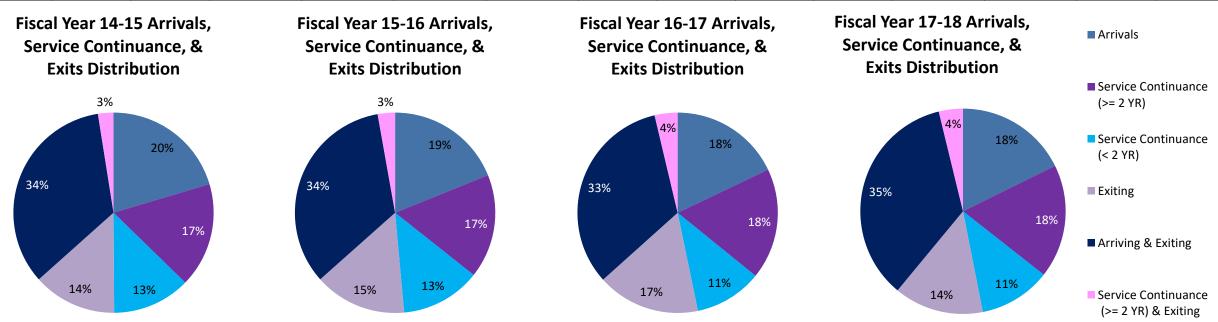
^{*}The graphs are color coded so that those reported in the same unit of analysis (e.g., minutes) are colored similarly.

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 Adults Receiving SMHS Arriving, Exiting, and with Service Continuance by Fiscal Year

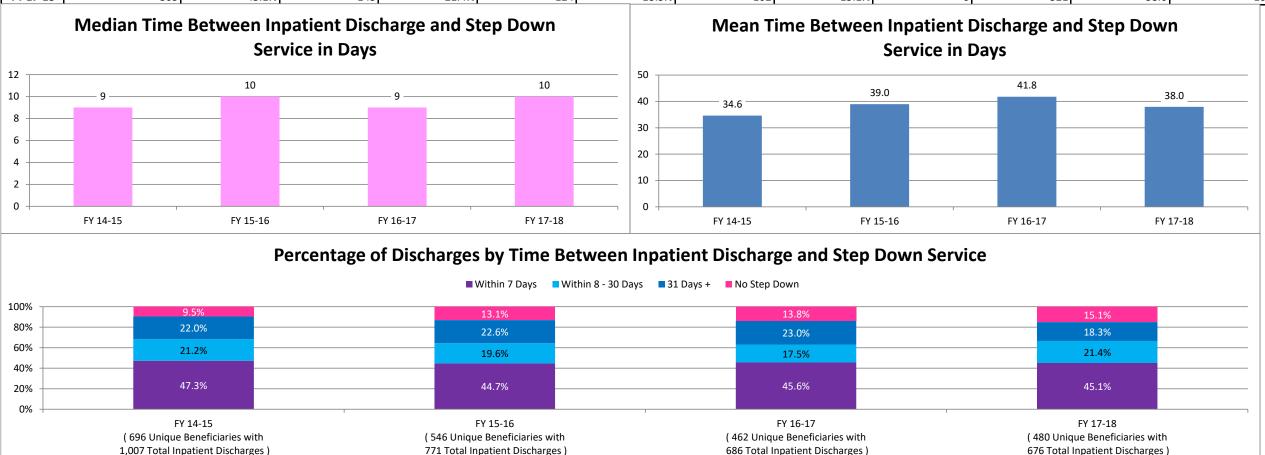
Category	Description (Please refer to the Measures Catalog for more detailed descriptions on all Performance Outcomes System measures.)
Arrivals	Adults that did not receive any SMHS within 3 months of their first date of service in the Fiscal Year.
Service Continuance	Adults receiving continuous services 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	Adults 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 Adults met both the criteria for Arrivals and Exiting above for the fiscal year.
Service Continuance &	
Exiting	A distinct category in which Adults 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	Continuance	Service Continuance (<2 YR) Count	Service Continuance (< 2 YR) %	Exiting Count	Exiting %	Arriving & Exiting Count	Arriving & Exiting %		(>= 2 YR) and	Total Count	Total %
FY 14-15	2,317	20.4%	1,914	16.9%	1,425	12.6%	1,532	13.5%	3,868	34.1%	288	2.5%	11,344	100%
FY 15-16	2,216	18.9%	1,968	16.8%	1,518	12.9%	1,755	14.9%	3,965	33.8%	326	2.8%	11,748	100%
FY 16-17	2,061	17.9%	2,061	17.9%	1,250	10.9%	1,913	16.6%	3,778	32.9%	430	3.7%	11,493	100%
FY 17-18	1,994	17.7%	2,017	17.9%	1,277	11.3%	1,590	14.1%	3,961	35.2%	426	3.8%	11,265	100%



Time to Step Down Report: Adults Stepping Down in SMHS Services Post Inpatient Discharge*

Service FY	Count of Inpatient Discharges with Step Down within 7 Days of Discharge	Sten Down within	Step Down Between 8 and 30	Inpatient Discharges with	Days from	Inpatient	I DISCHAPOAS WITH		Minimum Number of Days between Discharge and Step Down	Number of Days	Mean Time to Next Contact Post Inpatient Discharge (Days)	Median Time to Next Contact Post Inpatient Discharge (Days)
FY 14-15	476	47.3%	213	21.2%	222	22.0%	96	9.5%	0	358	34.6	9
FY 15-16	345	44.7%	151	19.6%	174	22.6%	101	13.1%	0	343	39.0	10
FY 16-17	313	45.6%	120	17.5%	158	23.0%	95	13.8%	0	353	41.8	9
FY 17-18	305	45.1%	145	21.4%	124	18.3%	102	15.1%	0	321	38.0	10
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^{*} **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.