

# Children and Youth Performance Outcomes System ADA – Shasta County California March 8<sup>th</sup>, 2022

## **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 decisionmaking 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**

These county-specific reports provide updated information on the initial indicators that were developed for the Performance Outcomes System and reported on at the statewide aggregate level in February 2015; they help establish a foundation for on-going reporting. 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 SMH' 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

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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.

**Data Sources:**

- Short-Doyle/Medi-Cal II (SD/MC II) claims with dates of service in 2015 to 2020.
- Medi-Cal Eligibility Data System (MEDS) data from the Management Information System/Decision Support System (MIS/DSS) 2015 to 2020.

**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:

[https://www.dhcs.ca.gov/services/MH/Documents/POS\\_MeasuresCatalog\\_Sept2016.pdf](https://www.dhcs.ca.gov/services/MH/Documents/POS_MeasuresCatalog_Sept2016.pdf)

**Report Interpretation**

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

\*New Age Methodology for Identifying Children under 21 (POS reports posted after to 7/1/17): Beneficiaries that were under the age of 21 for the entire fiscal year (their age was less than 21 as of June 30th of the reported fiscal year).

\*The penetration rates reported here were calculated using a different methodology than that used by the External Quality Review Organization (EQRO). For the POS, the penetration rate is calculated by taking the total number of youth who received one or more SMHS' 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. Penetration rates provide a measure of initial contact with the specialty mental health system.

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\*The engagement rates are calculated similarly to penetration rates but are intended to measure ongoing engagement with the specialty mental health system. The engagement rate is calculated by taking the total number of youth who received five or more SMHS' in a FY and dividing that by the total number of Medi-Cal eligible youth for that FY.

\*The snapshot report provides a point-in-time look at children and youth's movement through the SMHS system. The report uses six 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 beneficiary's county of Medi-Cal responsibility during the eligibility month when the inpatient service occurred

For questions or concerns regarding the MHS Performance Dashboard Reports and Data please email: [BHData@dhcs.ca.gov](mailto:BHData@dhcs.ca.gov)

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**Demographics Report: Unique Count of Children and Youth Receiving SMHS and Eligible for Medi-Cal by Year**

Year	Unique Count Receiving SMHS	Year-Over-Year Percentage Change	Unique Count of Medi-Cal Eligibles	Year-Over-Year Percentage Change
2015	1743	N/A	28233	N/A
2016	1554	-11%	28830	2%
2017	1394	-10%	28492	-1%
2018	1230	-12%	27766	-3%
2019	1282	4%	27686	0%
2020	1251	-2%	27395	-1%
<b>Compound Annual Growth Rate</b>	N/A	-6%	N/A	-1%

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

*\*\*N/A = Data that was unavailable or identifiable data that was suppressed due to low numbers (>11)*

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### Demographics Report: Unique Count of Children and Youth Receiving SMHS by Year and Race

Year	Alaskan Native or American Indian	Alaskan Native or American Indian %	Asian or Pacific Islander	Asian or Pacific Islander %	Black	Black %	Hispanic	Hispanic %	White	White %	Other	Other %	Unknown	Unknown %
2015	49	3%	16	1%	53	3%	148	8%	1292	74%	17	1%	168	10%
2016	41	11%	N/A	N/A	45	12%	142	39%	N/A	N/A	17	5%	117	32%
2017	43	3%	12	1%	41	3%	122	9%	1055	76%	16	1%	105	8%
2018	39	3%	11	1%	49	4%	131	11%	892	73%	13	1%	95	8%
2019	37	11%	11	3%	43	12%	148	42%	N/A	N/A	N/A	N/A	113	32%
2020	34	9%	16	4%	49	13%	140	38%	N/A	N/A	N/A	N/A	125	34%

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

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**Demographics Report: Unique Count of Children and Youth Receiving SMHS by Year and Age**

	Children 0-2	Children 0-2 %	Children 3-5	Children 3-5 %	Children 6-11	Children 6-11 %	Children 12-17	Children 12-17 %	Youth 18- 20	Youth 18- 20 %
<b>2015</b>	11	1%	144	8%	620	36%	743	43%	225	13%
<b>2016</b>	13	1%	116	7%	573	37%	631	41%	221	14%
<b>2017</b>	11	1%	108	8%	493	35%	612	44%	170	12%
<b>2018</b>	N/A	N/A	90	14%	415	62%	N/A	N/A	160	24%
<b>2019</b>	N/A	N/A	107	15%	434	63%	N/A	N/A	152	22%
<b>2020</b>	N/A	N/A	103	15%	422	63%	N/A	N/A	145	22%

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

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**Demographics Report: Unique Count of Children and Youth Receiving SMHS by Year and Gender**

	Female	Female %	Male	Male %
<b>2015</b>	792	45%	951	55%
<b>2016</b>	678	44%	876	56%
<b>2017</b>	621	45%	773	55%
<b>2018</b>	571	46%	659	54%
<b>2019</b>	618	48%	664	52%
<b>2020</b>	595	48%	656	52%

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### Penetration Rates Report: Children and Youth with At Least One SMHS Visit by Fiscal Year

	FY 16 - 17			FY 17 - 18			FY 18 - 19			FY 19 - 20		
	Number of Clients with MH Visits	Certified Eligibles	Rate	Number of Clients with MH Visits	Certified Eligibles	Rate	Number of Clients with MH Visits	Certified Eligibles	Rate	Number of Clients with MH Visits	Certified Eligibles	Rate
<b>All</b>	1,394	28,494	4.89%	1,230	27,768	4.43%	1,282	27,686	4.63%	1,248	27,386	4.56%
<b>Children 0-2</b>	11	4,803	0.20%	N/A	4,603	N/A	N/A	4,496	N/A	N/A	4,276	N/A
<b>Children 3-5</b>	108	4,540	2.40%	N/A	4,514	N/A	N/A	4,456	N/A	N/A	4,349	N/A
<b>Children 6-11</b>	493	8,609	5.70%	415	8,401	4.90%	434	8,403	5.20%	422	8,307	5.10%
<b>Children 12-17</b>	612	7,196	8.50%	561	7,164	7.80%	583	7,309	8.00%	573	7,442	7.70%
<b>Youth 18-20</b>	170	3,346	5.10%	160	3,086	5.20%	152	3,022	5.00%	143	3,012	4.70%
<b>Alaskan Native or American Indian</b>	43	787	5.50%	39	768	5.10%	37	745	5.00%	33	704	4.70%
<b>Asian or Pacific Islander</b>	12	1,049	1.10%	11	945	1.20%	N/A	894	N/A	N/A	874	N/A
<b>Black</b>	41	512	8.00%	50	480	10.40%	42	451	9.30%	50	424	11.80%
<b>Hispanic</b>	122	3,641	3.40%	132	3,583	3.70%	149	3,673	4.10%	140	3,652	3.80%
<b>Other</b>	11	279	3.90%	12	317	3.80%	N/A	335	N/A	N/A	298	N/A
<b>Unknown</b>	138	3,898	3.50%	112	4,365	2.60%	111	4,779	2.30%	126	5,347	2.40%
<b>White</b>	1,027	18,328	5.60%	874	17,310	5.00%	923	16,809	5.50%	876	16,087	5.40%
<b>Female</b>	622	13,950	4.50%	572	13,611	4.20%	618	13,546	4.60%	593	13,311	4.50%
<b>Male</b>	772	14,544	5.30%	658	14,157	4.60%	664	14,140	4.70%	655	14,075	4.70%

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

\*\*N/A = Data that was unavailable or identifiable data that was suppressed due to low numbers (>11)

\*\*\*Penetration Rate = The percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This doesn't include non-SMHS provided in Medi-Cal Managed Care system.

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



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### Penetration Rates Report: Children and Youth with Five or More SMHS Visits by Fiscal Year

	FY 16 - 17			FY 17 - 18			FY 18 - 19			FY 19 - 20		
	Number of Clients with MH Visits	Certified Eligibles	Rate	Number of Clients with MH Visits	Certified Eligibles	Rate	Number of Clients with MH Visits	Certified Eligibles	Rate	Number of Clients with MH Visits	Certified Eligibles	Rate
<b>All</b>	1,011	28,494	3.55%	868	27,768	3.13%	904	27,686	3.27%	913	27,386	3.33%
<b>Children 0-2</b>	N/A	4,803	N/A	N/A	4,603	N/A	N/A	4,496	N/A	N/A	4,276	N/A
<b>Children 3-5</b>	N/A	4,540	N/A	N/A	4,514	N/A	N/A	4,456	N/A	N/A	4,349	N/A
<b>Children 6-11</b>	369	8,609	4.30%	313	8,401	3.70%	309	8,403	3.70%	320	8,307	3.90%
<b>Children 12-17</b>	463	7,196	6.40%	399	7,164	5.60%	428	7,309	5.90%	426	7,442	5.70%
<b>Youth 18-20</b>	102	3,346	3.00%	87	3,086	2.80%	85	3,022	2.80%	84	3,012	2.80%
<b>Alaskan Native or American Indian</b>	26	787	3.30%	26	768	3.40%	24	745	3.20%	18	704	2.60%
<b>Asian or Pacific Islander</b>	N/A	1,049	N/A	N/A	945	N/A	N/A	894	N/A	N/A	874	N/A
<b>Black</b>	32	512	6.30%	34	480	7.10%	35	451	7.80%	35	424	8.30%
<b>Hispanic</b>	98	3,641	2.70%	84	3,583	2.30%	118	3,673	3.20%	91	3,652	2.50%
<b>Other</b>	N/A	279	N/A	N/A	317	N/A	N/A	335	N/A	N/A	298	N/A
<b>Unknown</b>	114	3,898	2.90%	86	4,365	2.00%	75	4,779	1.60%	89	5,347	1.70%
<b>White</b>	723	18,328	3.90%	621	17,310	3.60%	639	16,809	3.80%	665	16,087	4.10%
<b>Female</b>	445	13,950	3.20%	392	13,611	2.90%	423	13,546	3.10%	442	13,311	3.30%
<b>Male</b>	566	14,544	3.90%	476	14,157	3.40%	481	14,140	3.40%	471	14,075	3.30%

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

\*\*N/A = Data that was unavailable or identifiable data that was suppressed due to low numbers (>11)

\*\*\*Penetration Rate = The percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This doesn't include non-SMHS provided in Medi-Cal Managed Care system.

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

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### Utilization Report: Approved SMHS for Children and Youth Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Year

	SDMC Total (Dollars)	Adult Residential Treatment (Days)	Case Management/Brokerage (Min)	Crisis Intervention (Min)	Crisis Residential Treatment (Days)	Crisis Stabilization (Hrs)	FFS Inpatient (Days)	Full Day Intensive Treatment (Hrs)	Full Day Rehabilitation (Hrs)	ICC (Mins)	IHBS (Mins)	Medication Support Services (Mins)	Mental Health Services (Mins)	Psychiatric Health Facility (Days)	SDMC Hospital Inpatient (Days)	Therapeutic Behavioral Services (Mins)
<b>2015</b>	4525	N/A	222	176	N/A	12	8	N/A	N/A	1070	540	451	1243	11	N/A	4474
<b>2016</b>	5179	N/A	215	192	N/A	16	9	N/A	N/A	1500	1806	423	1412	7	N/A	8110
<b>2017</b>	5206	N/A	258	190	N/A	10	9	N/A	N/A	1535	1535	448	1398	5	N/A	6729
<b>2018</b>	5946	N/A	261	158	N/A	20	10	N/A	N/A	1076	1374	501	1663	7	N/A	4831
<b>2019</b>	6133	N/A	253	169	N/A	11	10	N/A	N/A	591	673	400	1565	8	N/A	3167
<b>2020</b>	6594	N/A	258	190	N/A	10	9	N/A	N/A	1535	1535	448	1398	5	N/A	5206
<b>Average</b>	5597	N/A	244	179	N/A	13	9	N/A	N/A	1218	1244	445	1447	7	N/A	5419

*\*Information in categories in the above table that were not graphed is due to lower numbers (<11) of unique clients – indicated by N/A.*

*\*\*These graphs are color coded so that reports in the same unit of analysis (e.g., minutes, hours, etc.) are colored similarly.*

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### Snapshot Report: Unique Count of Children and Youth Receiving SMHS Arriving, Exiting, and with Service Continuance by Year

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

Year	Arrivals	Arrivals	Service Continuance (>= 2 YR)	Service Continuance (>= 2 YR)	Service Continuance (< 2 YR)	Service Continuance (< 2 YR)	Exiting	Exiting	Arriving and Exiting	Arriving and Exiting	Service Continuance (>= 2 YR) and Exiting	Service Continuance (>= 2 YR) and Exiting
2015	365	21%	171	10%	179	10%	384	22%	573	33%	71	4%
2016	338	22%	155	10%	141	9%	332	21%	507	33%	81	5%
2017	279	20%	109	8%	136	10%	310	22%	481	35%	79	6%
2018	288	23%	123	10%	141	11%	220	18%	404	33%	54	4%
2019	337	26%	127	10%	142	11%	230	18%	388	30%	58	5%
2020	231	18%	129	10%	190	15%	235	19%	404	32%	62	5%

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### Time to Step Down Report: Children and Youth Stepping Down in SMHS Post Inpatient Discharge

Year	Less Than 7 Days Step Down Service Count	Between 8 and 30 Days Step Down Service Count	More Than 30 Days Step Down Service Count	No Step Down Service Count	Minimum Number of Days for a Step Down Service	Maximum Number of Days for a Step Down Service	Mean Number of Days for a Step Down Service	Median Number of Days for a Step Down Service	Unique number of children/youth beneficiaries
2015	53	N/A	N/A	N/A	0	224	8.5	0	49
2016	63	N/A	N/A	N/A	0	253	5.9	0	54
2017	89	N/A	N/A	N/A	0	168	5.0	0	80
2018	52	N/A	N/A	N/A	0	328	14.8	0	50
2019	46	N/A	N/A	N/A	0	271	17.2	0	47
2020	44	N/A	N/A	N/A	0	330	23.8	1	40

*\*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*

*\*\*Information in categories in the above table that were not graphed is due to lower numbers (<11) of unique clients or unavailable – indicated by N/A.*