

# Adult Performance Outcomes System – Shasta County California

## March 8<sup>th</sup>, 2022

### **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.asp>

### **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-in-time view of adults arriving, exiting, and continuing services over a two-year period. The timeto-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 Years 2015 to 2020.

### **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 Years 2015 to 2020.
- Medi-Cal Eligibility Data System (MEDS) data from the Management Information System/Decision Support System (MIS/DSS) Years 2015 to 2020.

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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/services/MH/Documents/MedCCC/Library/POSMeasuresCatalog\\_Sept15Reporting\\_Final\\_1.11.15.pdf](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 is missing or has been suppressed due to privacy concerns is indicated as "N/A".

### **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 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-MeasuresCatalog.aspx>

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\*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 fiscal responsibility for the patient and whom has been attributed the time to next service in days used in the calculations for this indicator.

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

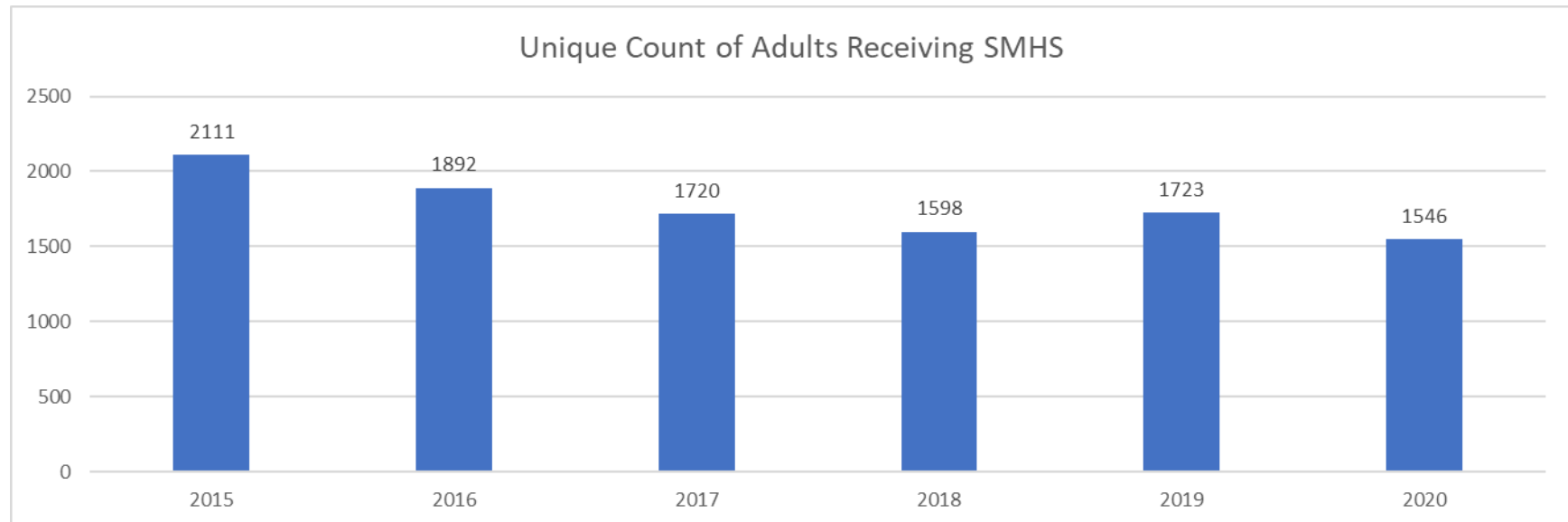
## Adult Performance Outcomes System – Shasta County California March 8<sup>th</sup>, 2022

### Demographics Report: Unique Count of Adults Receiving SMHS and Eligible for Medi-Cal by Year

Year	Unique Count Receiving SMHA	Year-Over-Year Percentage Change	Unique Count of Medi-Cal Eligibles	Year-Over-Year Percentage Change
2015	2111	N/A	42950	N/A
2016	1892	-10%	46582	8%
2017	1720	-9%	46907	1%
2018	1598	-7%	45735	-2%
2019	1723	8%	45570	0%
2020	1546	-10%	44513	-2%
<b>Compound Annual Growth Rate</b>	N/A	-29%	N/A	4%

\*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)



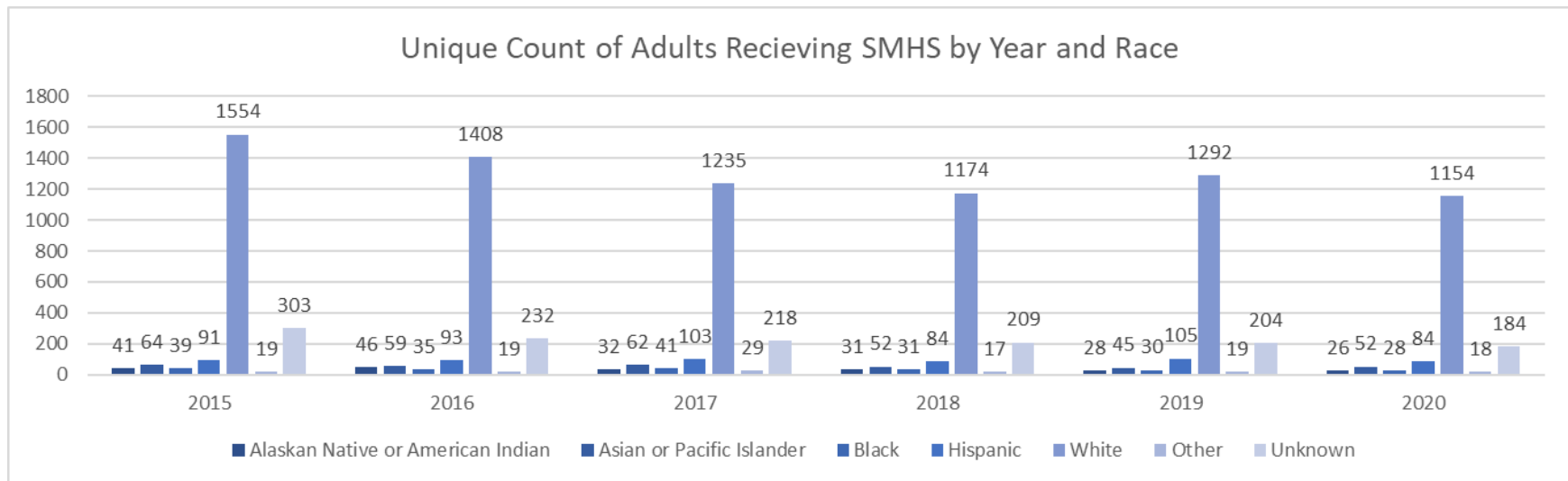
## Adult Performance Outcomes System – Shasta County California March 8<sup>th</sup>, 2022

### Demographics Report: Unique Count of Adults 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	41	N/A	64	N/A	39	N/A	91	N/A	1554	N/A	19	N/A	303	N/A
2016	46	12%	59	-8%	35	-10%	93	2%	1408	-9%	19	0%	232	-23%
2017	32	-30%	62	5%	41	17%	103	11%	1235	-12%	29	53%	218	-6%
2018	31	-3%	52	-16%	31	-24%	84	-18%	1174	-5%	17	-41%	209	-4%
2019	28	-10%	45	-13%	30	-3%	105	25%	1292	10%	19	12%	204	-2%
2020	26	-7%	52	16%	28	-7%	84	-20%	1154	-11%	18	-5%	184	-10%

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

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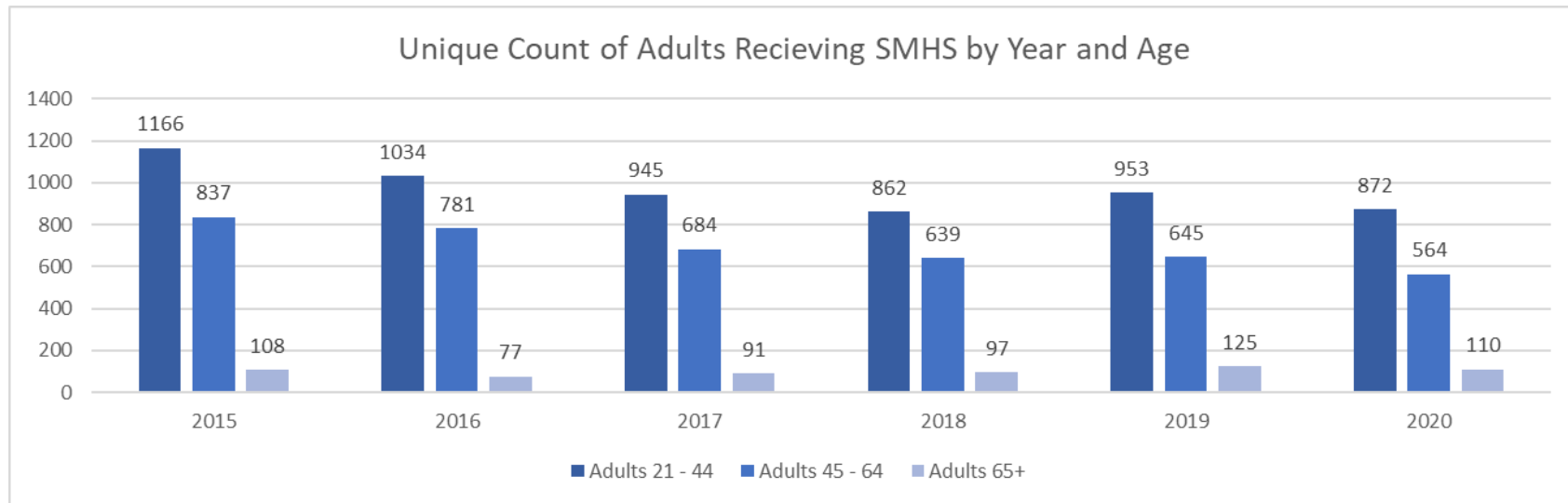
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### Demographics Report: Unique Count of Adults Receiving SMHS by Year and Age

	Adults 21 - 44	Adults 21 - 44 %	Adults 45 - 64	Adults 45 - 64 %	Adults 65+	Adults 65+ %
<b>2015</b>	1166	55%	837	40%	108	5%
<b>2016</b>	1034	55%	781	41%	77	4%
<b>2017</b>	945	55%	684	40%	91	5%
<b>2018</b>	862	54%	639	40%	97	6%
<b>2019</b>	953	55%	645	37%	125	7%
<b>2020</b>	872	56%	564	36%	110	7%

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

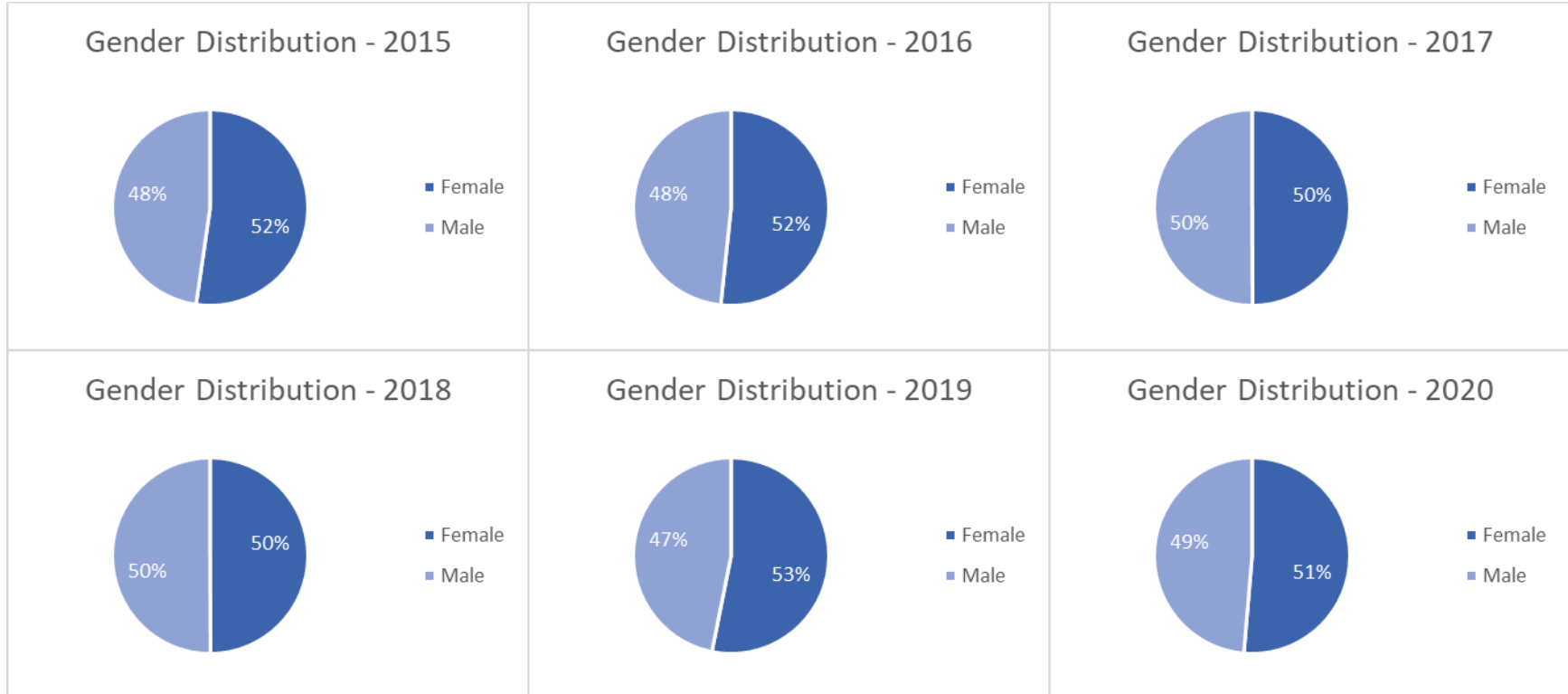
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## Adult Performance Outcomes System – Shasta County California March 8<sup>th</sup>, 2022

### Demographics Report: Unique Count of Adults Receiving SMHS by Year and Sex

Year	Female	Female %	Male	Male %
2015	1104	52%	1007	48%
2016	978	52%	914	48%
2017	859	50%	861	50%
2018	798	50%	800	50%
2019	916	53%	807	47%
2020	794	51%	752	49%



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### Penetration Rates Report: Adults with At Least One SMHS Visit by 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>	1,722	46,899	3.36%	1,596	45,717	3.22%	1,723	45,553	3.50%	1,544	44,491	3.22%
<b>Adults 21-32</b>	517	14,796	3.50%	456	13,999	3.30%	506	13,534	3.70%	426	12,689	3.40%
<b>Adults 33-44</b>	429	10,766	4.00%	405	10,783	3.80%	448	11,031	4.10%	444	11,036	4.00%
<b>Adults 45-56</b>	470	9,887	4.80%	435	9,283	4.70%	416	8,953	4.60%	339	8,400	4.00%
<b>Adults 57-68</b>	268	7,725	3.50%	261	7,874	3.30%	300	8,130	3.70%	276	8,276	3.30%
<b>Adults 69+</b>	38	3,725	1.00%	39	3,778	1.00%	53	3,905	1.40%	59	4,090	1.40%
<b>Alaskan Native or American Indian</b>	40	1,386	2.90%	39	1,314	3.00%	30	1,273	2.40%	26	1,259	2.10%
<b>Asian or Pacific Islander</b>	55	1,764	3.10%	52	1,759	3.00%	42	1,745	2.40%	52	1,742	3.00%
<b>Black</b>	40	725	5.50%	N/A	760	N/A	32	793	4.00%	29	760	3.80%
<b>Hispanic</b>	95	3,636	2.60%	81	3,624	2.20%	104	3,762	2.80%	82	3,719	2.20%
<b>Other</b>	15	483	3.10%	N/A	504	N/A	13	523	2.50%	17	438	3.90%
<b>Unknown</b>	272	4,205	6.50%	224	4,202	5.30%	215	3,885	5.50%	197	3,978	5.00%
<b>White</b>	1,205	34,700	3.50%	1,158	33,554	3.50%	1,287	33,572	3.80%	1,141	32,595	3.50%
<b>Female</b>	860	24,950	3.40%	796	24,456	3.30%	916	24,467	3.70%	793	24,046	3.30%
<b>Male</b>	862	21,949	3.90%	800	21,261	3.80%	807	21,086	3.80%	751	20,445	3.70%

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

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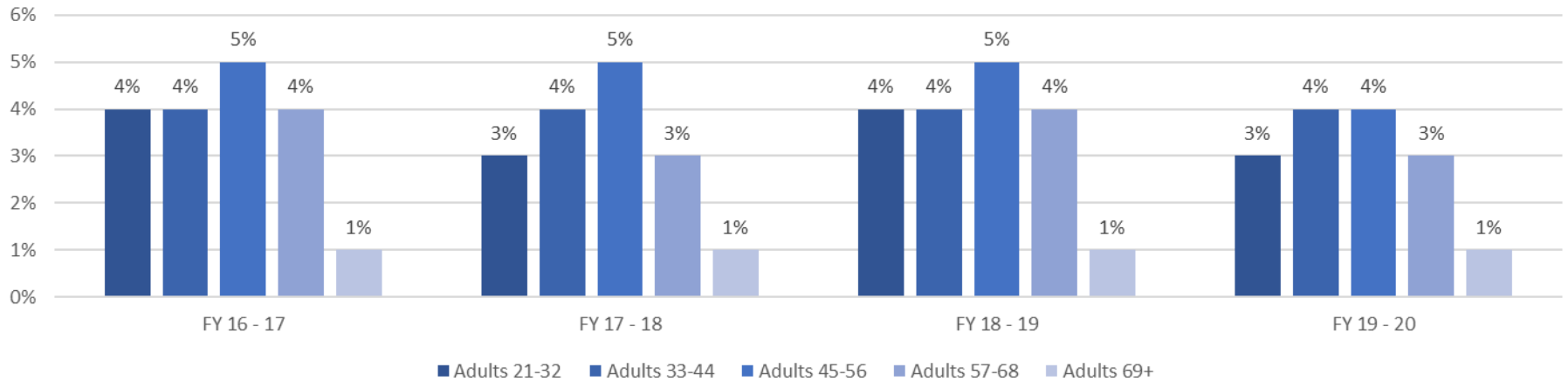
\*\*\*Penetration Rate = The percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This doesn't include non-SMHS provided in Medi-Cal Managed Care system.

\*\*\*\*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.

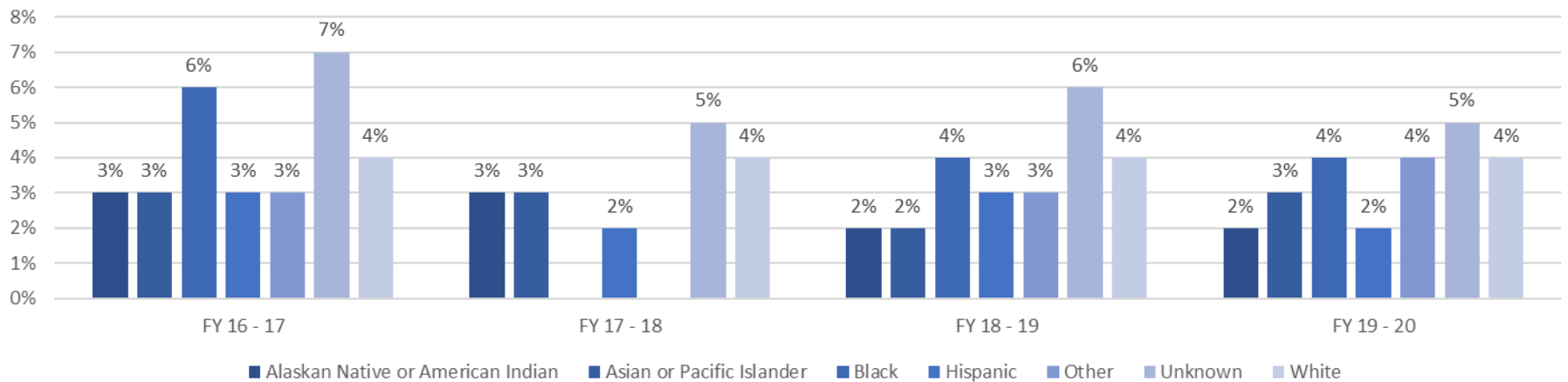


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AB470 Penetration Rates Report: Children and Youth with At Least One Mental Health Visit  
By Age Group: Shasta County (SMHS)

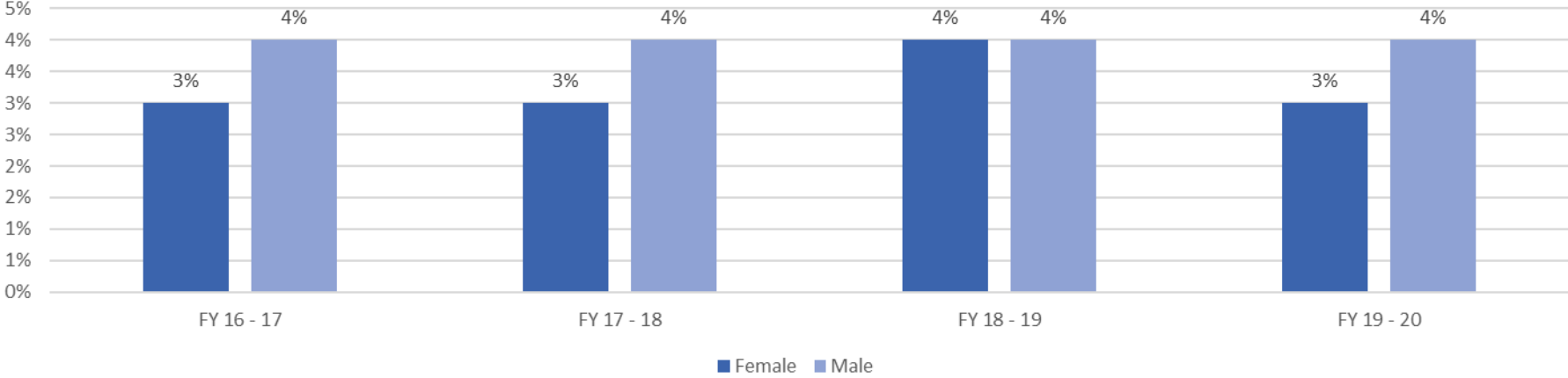


AB470 Penetration Rates Report: Children and Youth with At Least One Mental Health Visit  
By Race: Shasta County (SMHS)



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AB470 Penetration Rates Report: Children and Youth with At Least One Mental Health Visit  
By Gender: Shasta County (SMHS)



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### Penetration Rates Report: Adults with Five or More SMHS Visits by Year

	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>	807	46,899	1.60%	728	45,717	1.48%	781	45,553	1.60%	729	44,491	1.60%
<b>Adults 21-32</b>	193	14,796	1.30%	181	13,999	1.30%	203	13,534	1.50%	177	12,689	1.50%
<b>Adults 33-44</b>	188	10,766	1.70%	181	10,783	1.70%	190	11,031	1.70%	213	11,036	1.70%
<b>Adults 45-56</b>	258	9,887	2.60%	220	9,283	2.40%	222	8,953	2.50%	170	8,400	2.50%
<b>Adults 57-68</b>	149	7,725	1.90%	134	7,874	1.70%	147	8,130	1.80%	151	8,276	1.80%
<b>Adults 69+</b>	19	3,725	0.50%	12	3,778	0.30%	19	3,905	0.50%	18	4,090	0.50%
<b>Alaskan Native or American Indian</b>	N/A	1,386	N/A	20	1,314	1.50%	17	1,273	1.30%	14	1,259	1.10%
<b>Asian or Pacific Islander</b>	36	1,764	2.00%	27	1,759	1.50%	28	1,745	1.60%	33	1,742	1.90%
<b>Black</b>	18	725	2.50%	N/A	760	N/A	N/A	793	N/A	N/A	760	N/A
<b>Hispanic</b>	43	3,636	1.20%	35	3,624	1.00%	44	3,762	1.20%	35	3,719	0.90%
<b>Other</b>	N/A	483	N/A	N/A	504	N/A	N/A	523	N/A	N/A	438	N/A
<b>Unknown</b>	147	4,205	3.50%	109	4,202	2.60%	116	3,885	3.00%	105	3,978	2.60%
<b>White</b>	540	34,700	1.60%	518	33,554	1.50%	561	33,572	1.70%	524	32,595	1.60%
<b>Female</b>	389	24,950	1.60%	358	24,456	1.50%	396	24,467	1.60%	361	24,046	1.50%
<b>Male</b>	418	21,949	1.90%	370	21,261	1.70%	385	21,086	1.80%	368	20,445	1.80%

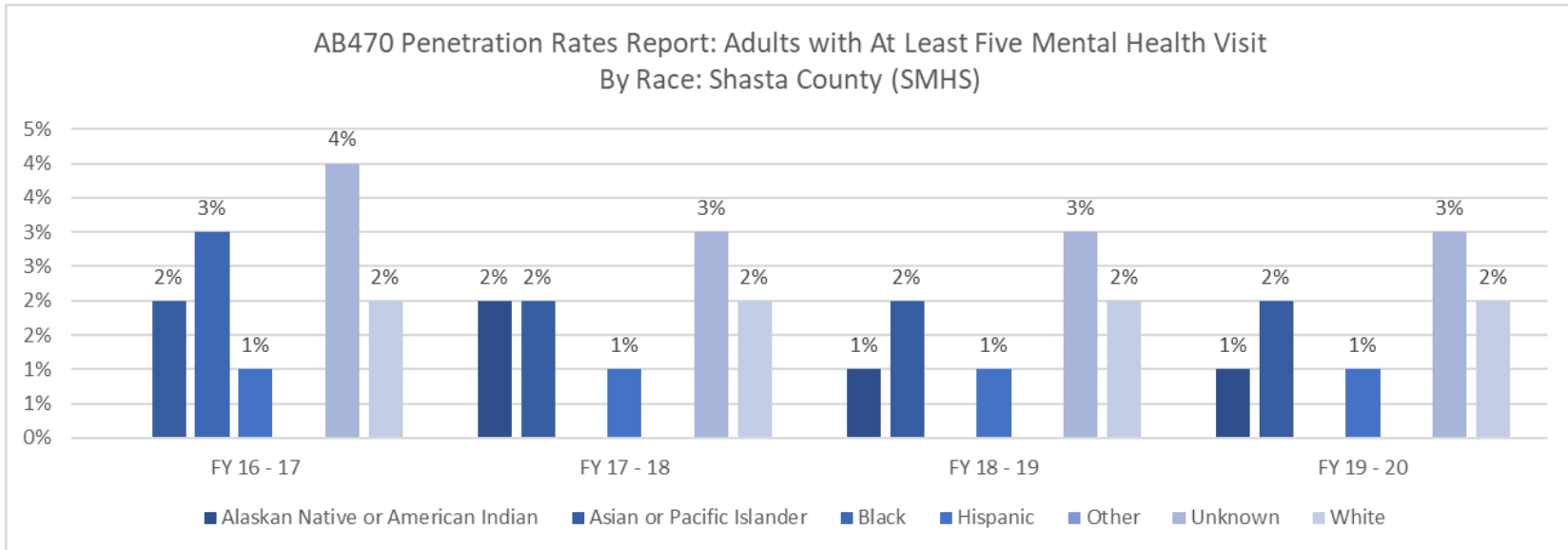
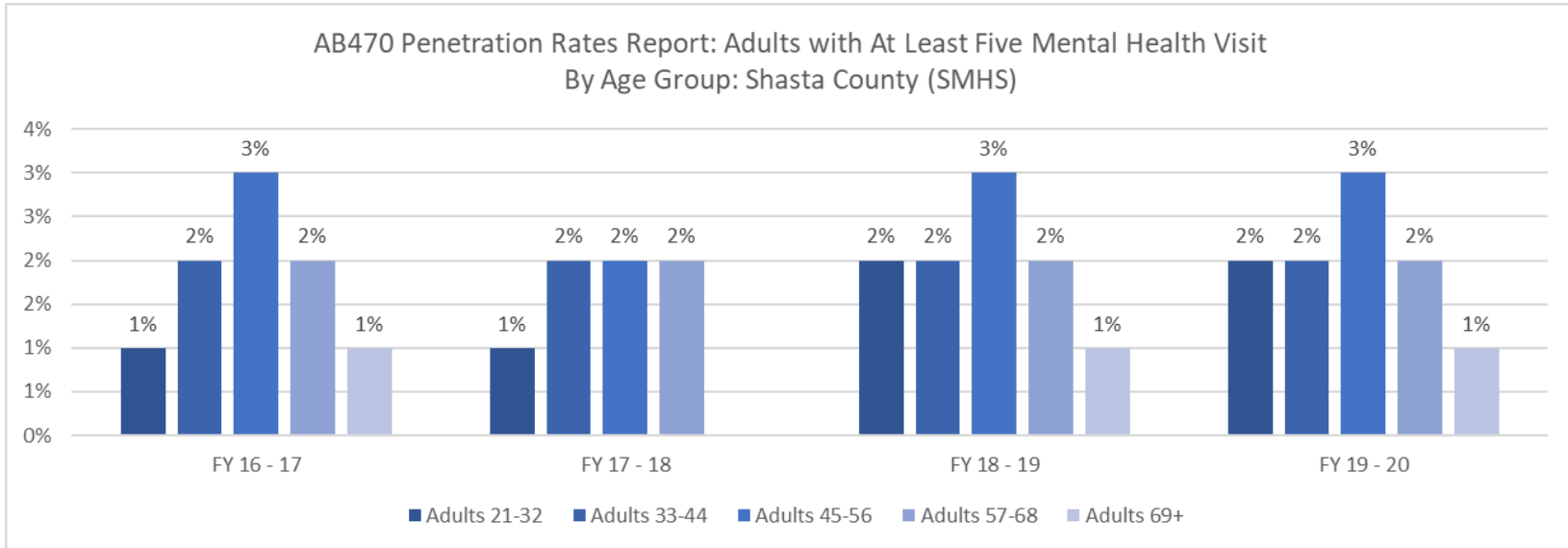
\*SMHS = Specialty Mental Health Services. See Measures Catalog for more detailed information.

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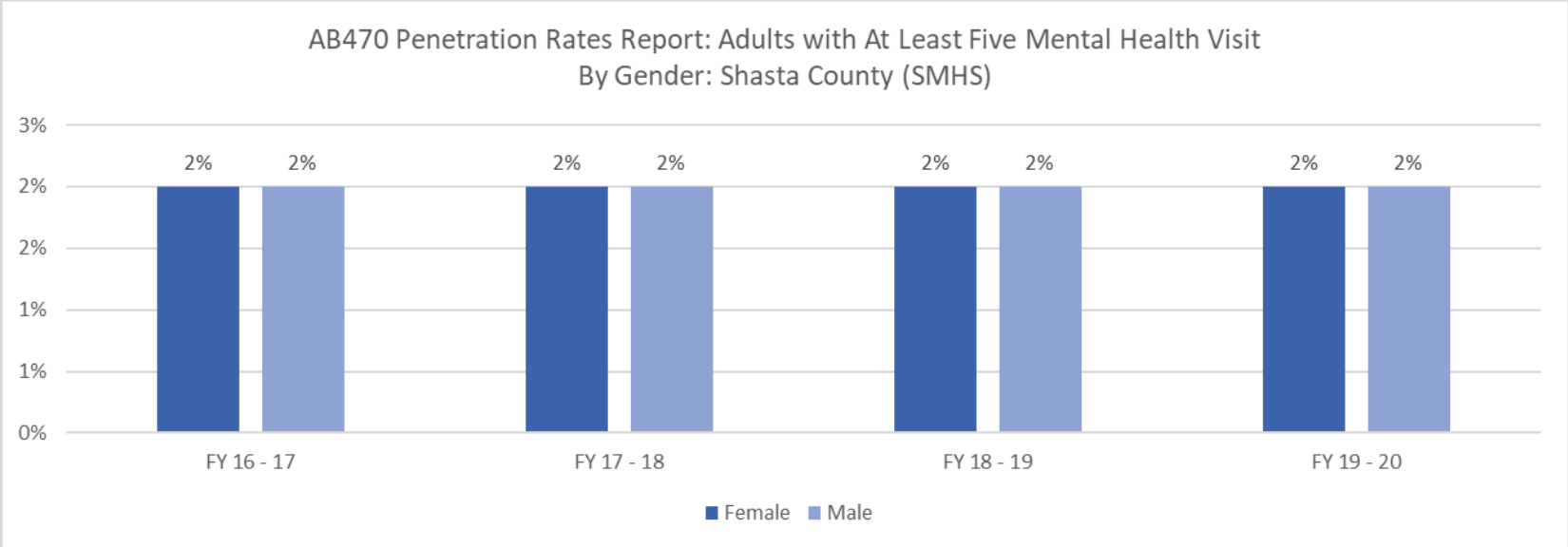
\*\*\*Penetration Rate = The percentage of SMHS eligible beneficiaries that have received a SMHS that was claimed via the Short-Doyle/Medi-Cal claiming system. This doesn't include non-SMHS provided in Medi-Cal Managed Care system.

\*\*\*\*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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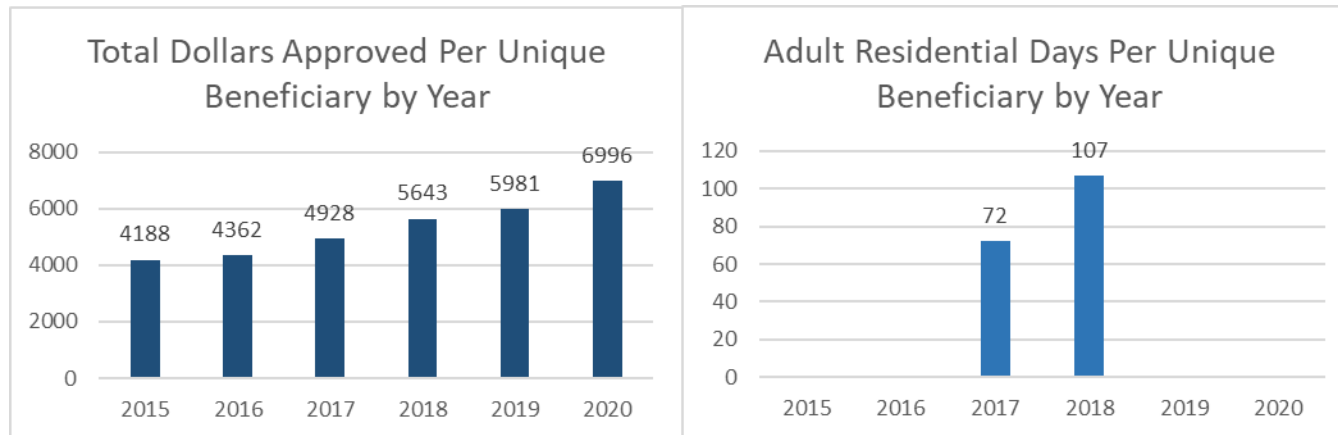
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### Utilization Report: Approved SMHS for Adults Mean Expenditures and Mean Service Quantity per Unique Beneficiary by Year

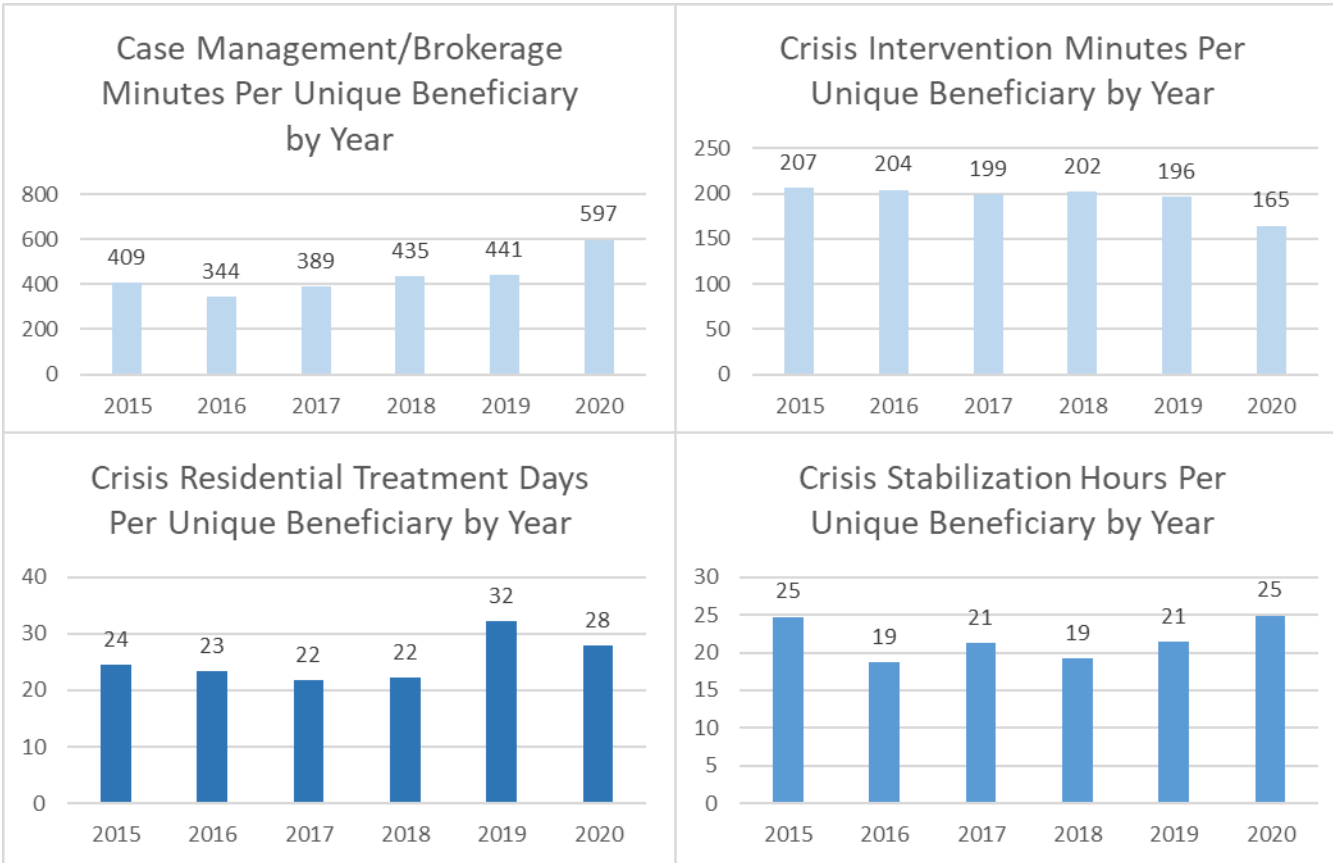
	SDMC Total (Dollars)	Adult Residential Treatment (Days)	Case Management/Brokerage (Min)	Crisis Intervention (Min)	Crisis Residential Treatment (Days)	Crisis Stabilization (Hrs)	FFS Inpatient (Days)	Inpatient Admin (Days)	Full Day Rehabilitation (Hrs)	ICC (Mins)	IHBS (Mins)	Medication Support Services (Mins)	Mental Health Services (Mins)	Psychiatric Health Facility (Days)	SDMC Hospital Inpatient (Days)
<b>2015</b>	4188	N/A	409	207	24	25	12	N/A	N/A	N/A	N/A	427	328	11	N/A
<b>2016</b>	4362	N/A	344	204	23	19	9	N/A	N/A	N/A	N/A	482	378	10	N/A
<b>2017</b>	4928	72	389	199	22	21	8	N/A	N/A	N/A	N/A	555	431	10	10
<b>2018</b>	5643	107	435	202	22	19	7	N/A	N/A	N/A	N/A	260	502	12	N/A
<b>2019</b>	5981	N/A	441	196	32	21	11	N/A	N/A	N/A	N/A	232	454	11	N/A
<b>2020</b>	6996	N/A	597	165	28	25	13	N/A	N/A	N/A	N/A	262	457	13	N/A
<b>Average</b>	90	436	196	25	22	10	N/A	N/A	N/A	N/A	370	425	11	10	5350

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

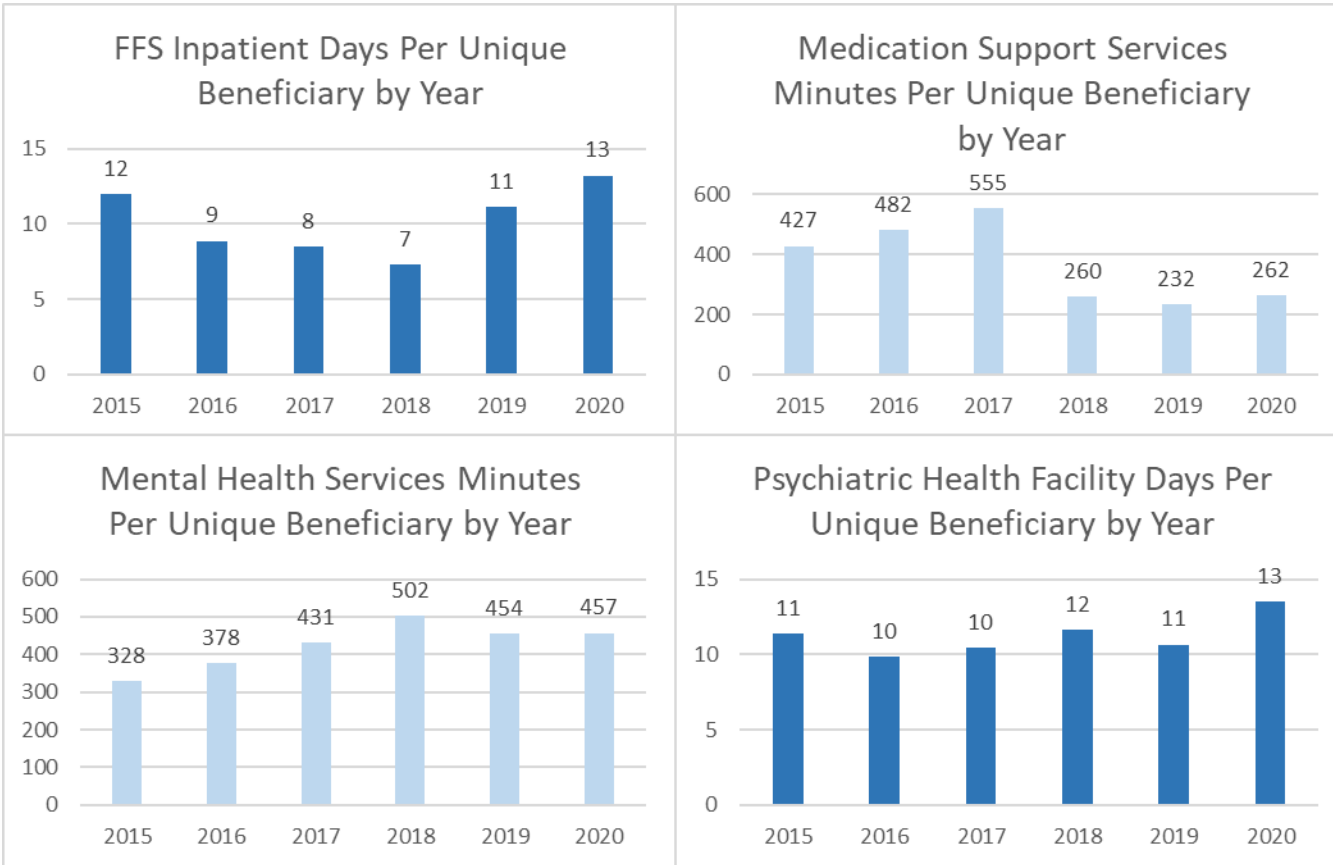
\*\*These graphs are color coded so that reports in the same unit of analysis (e.g., minutes, hours, etc.) are colored similarly.



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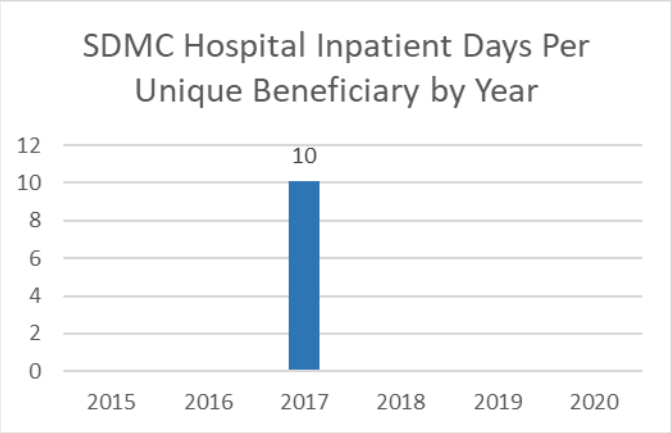


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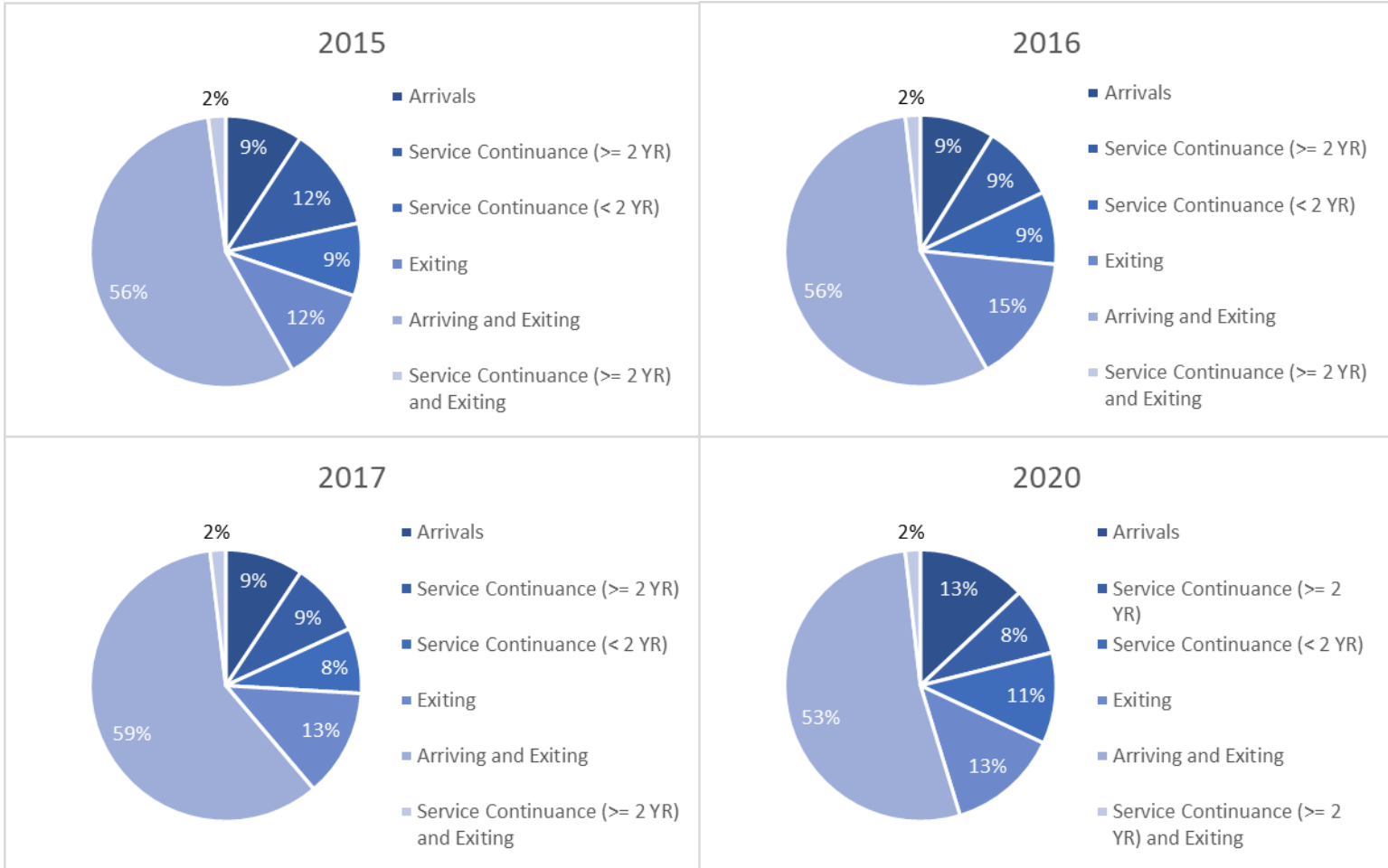
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### Snapshot Report: Unique Count of Adults Receiving SMHS Arriving, Exiting, and with Service Continuance by Year

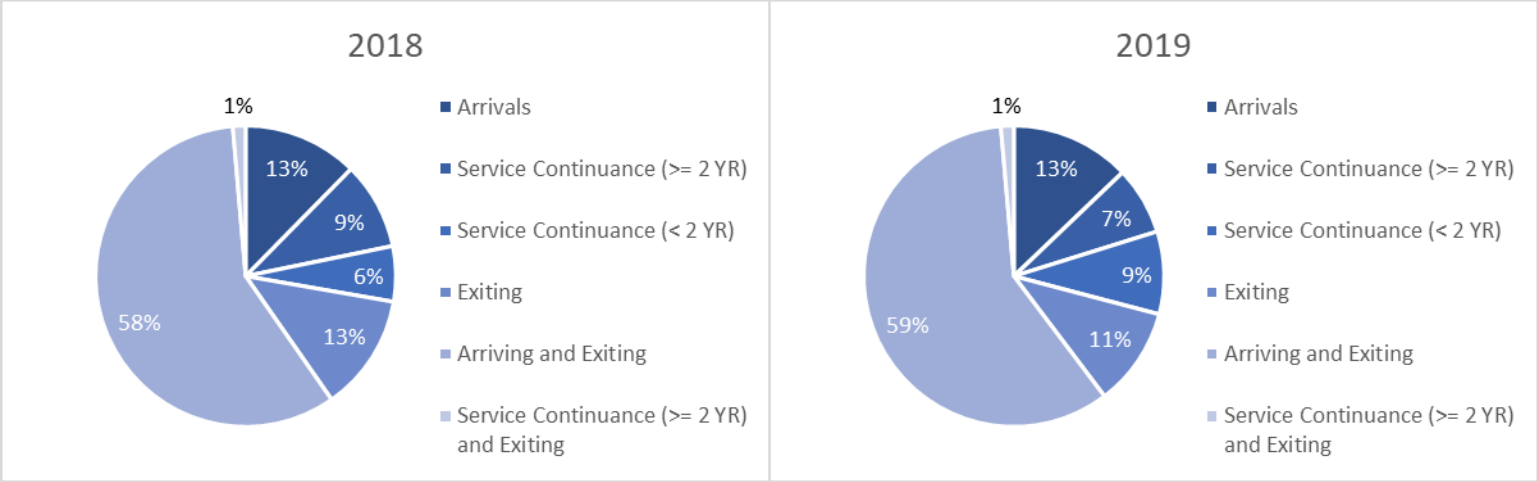
Category	Description (Please refer to the Measures Catalog for more detailed descriptions on all Performance Outcomes System measures.)
<b>Arrivals</b>	Adults that did not receive any SMHS within 3 months of their first date of service in the Fiscal Year.
<b>Exiting</b>	Adults receiving continuous services 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).
<b>Service Continuance</b>	Adults 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	195	9%	261	12%	183	9%	244	12%	1184	56%	44	2%
2016	168	9%	171	9%	164	9%	289	15%	1066	56%	34	2%
2017	160	9%	152	9%	134	8%	221	13%	1021	59%	32	2%
2018	198	12%	150	9%	95	6%	201	13%	932	58%	22	1%
2019	222	13%	126	7%	153	9%	183	11%	1015	59%	24	1%
2020	201	13%	125	8%	168	11%	206	13%	818	53%	28	2%

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### Time to Step Down Report: Adults Stepping Down in SMHS Post Inpatient Discharge by Year

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	26	N/A	N/A	N/A	0	51	4	0	26
2016	13	N/A	N/A	N/A	0	236	36	5	15
2017	28	N/A	N/A	N/A	0	144	8	0	24
2018	28	N/A	N/A	N/A	0	129	8	0	31
2019	66	13	30	16	0	338	36	3	92
2020	96	20	21	30	0	280	22	2	113

*\*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.*

*\*\*\*There was only enough information to graph for the year of 2019 and 2020.*

