

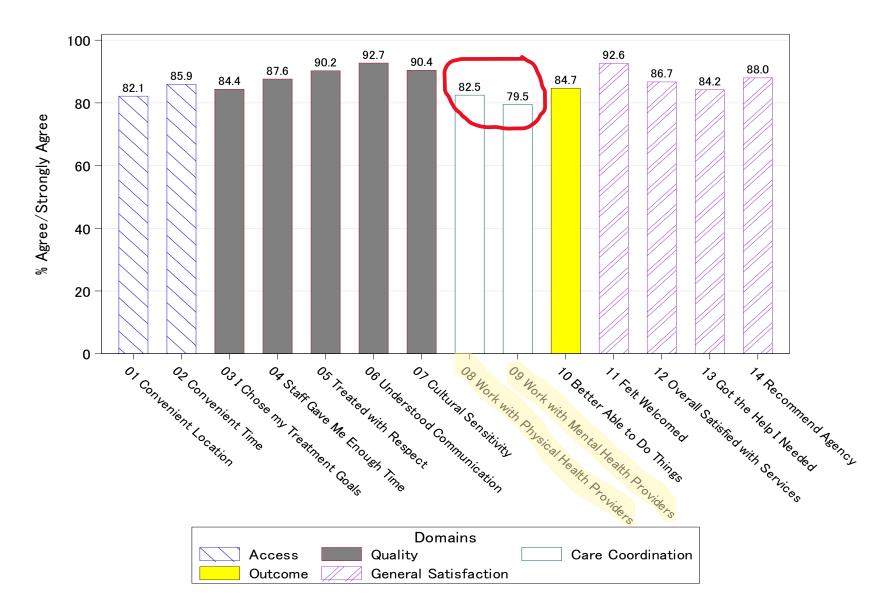
### San Mateo County Drug Med-Cal Organized Delivery System (DMC-ODS)

Treatment Provider Mtg October 3, 2019



# DMC ODS Data Sharing

### Treatment Perception Surveys (2018)



# Clients Served by Race/Ethnicity (2018)

#### DMC-ODS Eligibles and Clients Served by Race/Ethnicity, CY 2018

Race/Ethnicity	Average Monthly Unduplicated DMC-ODS Eligibles	% Eligibles	Unduplicated Annual Count of Clients Served	% Clients Served
White	19,364	14.1%	391	43.0%
Latino/Hispanic	65,363	47.5%	188	20.7%
African-American	4,142	3.0%	89	9.8%
Asian/Pacific Islander	29,084	21.1%	49	5.4%
Native American	232	0.2%	9	1.0%
Other	19,378	14.1%	184	20.2%
Total	137,561	100.0%	910	100.0%

### Small Group Break-Out Instructions

- You have 20 minutes for your small group discussion
- Identify a *facilitator*, a *note taker* and someone to *report back* to the group.

#### **All Participants**

- Listen without judgement.
- Take risks and share your thought, ideas, and experiences.
- Reminder to step back, and give others a chance to speak, if you've already spoken.

#### Facilitator

- Please make sure everyone gets a chance to share their ideas.
- Keep the group moving...and answering all questions.

#### Notetaker

- Please list the name and agency of each person participating on your group
- Hand in your notes to AOD- so we can document and act on your ideas.

#### **Report Back**:

- Highlight the 3-5 most important ideas for the large group report back.
- Target ~ 3 min per group

### Small Group Break-out Questions

- 1. What are your initial reflections?
- 2. How are you/your agency already working to meet these needs? What community resources are you/your agency already tapping into?
- 3. What do you see as challenges our clients face in trying to access needed services? Are there unmet needs you've observed?
- 4. How can BHRS and your agency positively impact the above? What can we do differently to improve access to services?



# Reflections

- 1)What stands out to you?
- 2)What are contributing factors—within our control?
- 3)How can BHRS AOD / your agency impact these?
- 4)Consider how BHRS AOD's /your agency QI plan, CLAS plan, training plan, etc. to improve services.
  - how you welcome clients,
  - how you individualize services,
  - how to provide age, gender, culturally appropriate services.

# Clients Served by Race/Ethnicity (2018)

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# EQRO Recommendations for DMC ODS for FY 19/20

- Implement better systems (both IT and operational) for tracking of timely access to care (use SAPT grant)
- Sustained funding and resources to support Avatar tracking of optimal treatment and care as well as access and timeliness
- Continue to train provider staff on documentation and treatment planning
- Continue documenting IMAT program system changes and share best practices with other counties working on integration, quality and costs.
- Add a Recovery Residence linked to outpatient services for women in need of stable housing and/or stepping down from residential treatment.
- Explore capacity issues related to space at the Opioid Treatment Provider (ART/BAART) to support expanded individual and group counseling.

# Clients Served by Age (2018)

DMC ODS Penetration Rates by Ag
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	San Mateo			Statewide
Age Groups	Average Number of Eligibles per Month	Number of Clients Served	Penetration Rate	Penetration Rate
Total	137,561	910	0.66%	0.31%
Age Group 12-17	33,714	14	0.04%	0.03%
Age Group 18-64	78,312	822	1.05%	0.46%
Age Group 65+	25,536	74	0.29%	0.25%

# Average Approved Claims, by Age (2018)

Average Approved Claims by Age CY 2018				
	San Mateo		Statewide	
Age Groups	Total Approved Claims	Average Approved Claims	Average Approved Claims	
Total	\$4,283,241	\$4,707	\$2,669	
Age Group 12-17	\$24,694	\$1,764	\$866	
Age Group 18-64	\$3,975,845	\$4,837	\$2,872	
Age Group 65+	\$282,702	\$3,820	\$1,713	

### 2018 EQRO Data Footnotes

Footn	tes:
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1	- Includes approved claims data on Drug Medi-Cal eligibles residing in the county who were served in other counties.
2	- Includes Drug Medi-Cal (DMC) approved claims only for those whose aid codes indicate eligibility for DMC program funding.
3	- Based upon the most recent data processing of DMC approved claims and MEDS Monthly Extract File(MMEF) by DHCS for the reported Fiscal Year.
4	- County total number of yearly unduplicated Drug Medi-Cal eligibles is
5	<ul> <li>The county approved claims data is partial i Prepared by Behavioral Health Concepts / CalEQRO scal Year start date, and because of lag time in claims approval processes.</li> <li>Source: Drug Medi-Cal approved claims as of 01/23/2019</li> </ul>
6	- The comparison data in the like sized county and statewide columns are based upon claims data from active DMC-ODS counties. The widely differing start dates will especially impact approved claims data per beneficiary, which are based upon cumulative totals.
7	- The bottom (Engagement Table) displays numbers of visits that include: Outpatient Treatment, Ambulatory Withdrawal Management, Intensive Outpatient Treatment, Partial Hospitalization, Case Management, Physician Consultation, Outpatient MAT and Recovery Support Services. The number of visits for each beneficiary were counted cumulatively.