

FAQ 10: Summary Reports (4/12/18)

These are the responses to questions asked during this webinar. To view the webinar recording go to <http://www.mhdata.org/events/dcr-kickoff-nov2>

1. I'm curious about client columns with different modes? Are modes related the services they had?

- 05 = 24 Hour Services
- 10 = Day Services
- 15 = Outpatient Services

<p>S-05.0 MODE OF SERVICE</p> <p>PURPOSE:</p> <p>Identifies, in broad terms, the category of service, i.e., 24 Hour, Day, and/or Outpatient.</p> <p>FIELD DESCRIPTION:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Type:</td> <td>Character</td> </tr> <tr> <td>Byte(s):</td> <td>2</td> </tr> <tr> <td>Format:</td> <td>XX</td> </tr> <tr> <td>Required On:</td> <td>All Service Records</td> </tr> <tr> <td>Source:</td> <td>Local Mental Health</td> </tr> </table> <p>VALID CODES:</p> <p>05 = 24 Hour Services 10 = Day Services 15 = Outpatient Services</p> <p>The coding scheme follows the County Cost Report definitions.</p> <p>COMMENTS:</p> <p>For information about reporting clients, services, and providers, see Technical Supplement TS-F: REPORTING TIPS, Tip One.</p> <p>For examples of reporting this data element, see Technical Supplement TS-F: REPORTING TIPS, Tip Two.</p> <p>DEFINITIONS:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 20%;">24 Hour Services (05)</td> <td>Services designed to provide a therapeutic environment of care and treatment within a residential setting. Depending on the severity of mental disorder, and the need for related medical care, treatment would be provided in one of a variety of settings.</td> </tr> <tr> <td>Day Services (10)</td> <td>Services which provide a range of therapeutic and rehabilitative programs as an alternative to inpatient care.</td> </tr> <tr> <td>Outpatient Services (15)</td> <td>Services designed to provide short-term or sustained therapeutic intervention for individuals experiencing acute and/or ongoing psychiatric distress.</td> </tr> </table> <p>For more details on these definitions, see the California Code of Regulations, Title 9, Chapter 11 and the County Cost Report documentation.</p>	Type:	Character	Byte(s):	2	Format:	XX	Required On:	All Service Records	Source:	Local Mental Health	24 Hour Services (05)	Services designed to provide a therapeutic environment of care and treatment within a residential setting. 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Outpatient Services (15)	Services designed to provide short-term or sustained therapeutic intervention for individuals experiencing acute and/or ongoing psychiatric distress.	<p>S-06.0 SERVICE FUNCTION</p> <p>PURPOSE:</p> <p>Identifies the specific type of service received by the client within 24 Hour, Day, and/or Outpatient mode of service.</p> <p>FIELD DESCRIPTION:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Type:</td> <td>Character</td> </tr> <tr> <td>Byte(s):</td> <td>2</td> </tr> <tr> <td>Format:</td> <td>XX</td> </tr> <tr> <td>Required On:</td> <td>All Service Records</td> </tr> <tr> <td>Source:</td> <td>Local Mental Health</td> </tr> </table> <p>VALID CODES:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;"><u>24 Hour Services/Mode 05</u></td> <td style="width: 50%;"><u>Outpatient Services/Mode 15</u></td> </tr> <tr> <td>10-18 = Hospital Inpatient</td> <td>01-09 = Linkage Brokerage</td> </tr> <tr> <td>19 = Hospital Administrative Day</td> <td>10-18 = Collateral</td> </tr> <tr> <td>20-29 = Psychiatric Health Facility (PHF)</td> <td>19 = Professional Inpatient Visit - Collateral</td> </tr> <tr> <td>30-34 = SNF Intensive</td> <td>30-38 = Mental Health Services (MHS)</td> </tr> <tr> <td>35 = IMD Basic (no Patch)</td> <td>39 = Professional Inpatient Visit - MHS</td> </tr> <tr> <td>36-39 = IMD With Patch</td> <td>40-48 = Mental Health Services (MHS)</td> </tr> <tr> <td>40-49 = Adult Crisis Residential</td> <td>49 = Professional Inpatient Visit - MHS</td> </tr> <tr> <td>50-59 = Jail Inpatient</td> <td>50-57 = Mental Health Services (MHS)</td> </tr> <tr> <td>60-64 = Residential, Other</td> <td>58 = Therapeutic Behavioral Services (TBS)</td> </tr> <tr> <td>65-79 = Adult Residential</td> <td>59 = Professional Inpatient Visit - MHS</td> </tr> <tr> <td>80-84 = Semi-Supervised Living</td> <td>60-68 = Medication Support (MS)</td> </tr> <tr> <td>85-89 = Independent Living</td> <td>69 = Professional Inpatient Visit - MS</td> </tr> <tr> <td>90-94 = Mental Health Rehab Center</td> <td>70-78 = Crisis Intervention (CI)</td> </tr> <tr> <td></td> <td>79 = Professional Inpatient Visit - CI</td> </tr> </table> <p><u>Day Services/Mode 10</u></p> <table style="width: 100%; border: none;"> <tr> <td>20-24 = Crisis Stabilization - Emergency Room</td> </tr> <tr> <td>25-29 = Crisis Stabilization - Urgent Care</td> </tr> <tr> <td>30-39 = Vocational Services</td> </tr> <tr> <td>40-49 = Socialization</td> </tr> <tr> <td>60-69 = SNF Augmentation</td> </tr> <tr> <td>81-84 = Day Treatment Intensive - Half Day</td> </tr> <tr> <td>85-89 = Day Treatment Intensive - Full Day</td> </tr> <tr> <td>91-94 = Day Rehabilitation - Half Day</td> </tr> <tr> <td>95-99 = Day Rehabilitation - Full Day</td> </tr> </table> <p>The coding scheme follows the County Cost Report definitions.</p>	Type:	Character	Byte(s):	2	Format:	XX	Required On:	All Service Records	Source:	Local Mental Health	<u>24 Hour Services/Mode 05</u>	<u>Outpatient Services/Mode 15</u>	10-18 = Hospital Inpatient	01-09 = Linkage Brokerage	19 = Hospital Administrative Day	10-18 = Collateral	20-29 = Psychiatric Health Facility (PHF)	19 = Professional Inpatient Visit - Collateral	30-34 = SNF Intensive	30-38 = Mental Health Services (MHS)	35 = IMD Basic (no Patch)	39 = Professional Inpatient Visit - MHS	36-39 = IMD With Patch	40-48 = Mental Health Services (MHS)	40-49 = Adult Crisis Residential	49 = Professional Inpatient Visit - MHS	50-59 = Jail Inpatient	50-57 = Mental Health Services (MHS)	60-64 = Residential, Other	58 = Therapeutic Behavioral Services (TBS)	65-79 = Adult Residential	59 = Professional Inpatient Visit - MHS	80-84 = Semi-Supervised Living	60-68 = Medication Support (MS)	85-89 = Independent Living	69 = Professional Inpatient Visit - MS	90-94 = Mental Health Rehab Center	70-78 = Crisis Intervention (CI)		79 = Professional Inpatient Visit - CI	20-24 = Crisis Stabilization - Emergency Room	25-29 = Crisis Stabilization - Urgent Care	30-39 = Vocational Services	40-49 = Socialization	60-69 = SNF Augmentation	81-84 = Day Treatment Intensive - Half Day	85-89 = Day Treatment Intensive - Full Day	91-94 = Day Rehabilitation - Half Day	95-99 = Day Rehabilitation - Full Day
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2. Do the "services" including non-billable services?

- They include all CSI reported services.
- CSI services should include any services provided by the county, regardless of funder, including those which are Medi-Cal non-billable services.

3. Are you posting the presentation?

- Yes! It is available on the MHDATA website at www.mhdata.org.

4. **We get the information to report the SDMC funded 05 clients, we just thought CSI got that from SDMC. You have confirmed that we do need to report them, correct?**
 - That is not correct. The CSI data system is not linked to the SDMC data system. All SDMC funded 05 clients should be reported directly to CSI as well.
5. **Any thought to creating reports like the ones presented by EQRO such as penetration?**
 - Not at this time. We want to get to a point where we think the data in the CSI is representative of the population we serve before looking at things like penetration. We are just describing the data but we encourage folks to get there
6. **Is the average the goal that the state is supposed to reach?**
 - No, we aren't really setting goals now. The Summary Reports are not a goal-oriented. They are designed to describing the system at this point so that we can identify how to establish benchmarks. No benchmarks have been established at this time.

Resources:

DHCS Data Quality Improvement Webinar Information

<http://www.mhdata.org/events>

BHIS Website

<https://bhissecure.dhcs.ca.gov/>

Best way to reach CSI Help Desk

mhsdata@dhcs.ca.gov