



## Quality Management Improvement & Accountability (QMIA)

# YOUTH EMPOWERMENT SERVICES QMIA Quarterly Report

State Fiscal Year 2021, 3<sup>rd</sup> Q 2021



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# YES, QMIA Quarterly Report SFY21, 3<sup>rd</sup> Q

QMIA-Q SFY 2021, 3<sup>rd</sup> Q includes data from Q3 of SFY 2021 (Jan, Feb, March 2021),  
SFY 2021 Year to date (Q1, Q2, Q3), and trends for previous SFYs

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## QMIA Quarterly Report SFY 2021, 3<sup>rd</sup> Q

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to date (Q1, Q2, and Q3), and trends for previous SFYs  
and trend data from previous SFYs

### Overview of YES QMIA Quarterly Report

The goal of Idaho's Youth Empowerment Services (YES) program is to develop, implement, and sustain a child, youth and family-driven, coordinated, and comprehensive children's mental health delivery system of care. This enhanced child serving system will lead to improved outcomes for children, youth, and families who are dealing with mental illness.

The Quality Management Improvement and Accountability Quarterly Report (QMIA-Q) is a critical aspect of YES monitoring based on data collected by the YES partners, which include the Department of Health and Welfare's Divisions of Behavioral Health (DBH), Medicaid, and Family and Community Services (FACS), as well as the Idaho Department of Juvenile Corrections (IDJC), and the Idaho State Department of Education (SDE).

The QMIA-Q is assembled with information about the children, youth, and families accessing mental care in Idaho primarily through the Medicaid/Optum Network and the Division of Behavioral Health (DBH) Children's Mental Health (CMH) Regional clinics. Most of the data is from Medicaid or DBH as these two child serving systems provide most of the outpatient mental health care for children and youth. Data in the report includes children and youth who have Medicaid, and children whose family's income is over the Medicaid Federal Poverty Guideline, children having trouble in school because of mental illness, children under court orders for mental health services including child protection, and children with developmental disabilities and co-occurring mental illness.

The QMIA-Q June 2021 includes data from Q3 of SFY 2021 (Jan, Feb, and March of 2021), SF Year to date 2021 (Q1, Q2 and Q3), and trend data from previous SFYs. The QMIA-Q June 2021 includes some additional analysis of what the data tells us to assist readers in understanding the data (see boxes in labeled "What is this data telling us?")

The QMIA-Q is available publicly on the YES website and delivered to all YES workgroups to support decision making related to plans for system improvement by building collaborative systems, developing new services, and creating workforce training plans.

### YES QMIA -Q Summary:

A new section of the QMIA-Q has been added in this June 2021 edition which is a brief summary of the notable results of the data and associated analysis, QMIA Council recommendations and Action Items. Action items are tasks that the QMIA Council will work on. Recommendations are projects that may be adopted by the Council or other YES committees or workgroups. A summary of the action items and recommendations is noted below:

#### Notable results:

Results of Child and Adolescent Needs and Strengths CANS assessment continue to be very consistent with 30% assessed as not eligible for YES a 70% assessed as eligible for YES (page 6).

There were 7 counties in which there were no CANS: Boise, Butte, Clark, Camas, Lincoln, Owyhee, and Teton, and 7 counties with less than .050% penetration: Blaine, Clearwater, Gooding, Idaho, Jefferson, Jerome, Latah, Washington. (pages 10-12).

Children and youth in Regions 2 and 5 are receiving fewer services and fewer types of services by comparison than other regions in the state. (pages 14-50).

The number of applications for Psychiatric Residential Treatment Facilities (PRTF) placements continues to increase as does the percentage of denials. (pages 51-53)

Medicaid expenditures per person for Q3 by region vary from \$1156.50 in Region 1 to \$632.33 in Region 2. (page 70)

#### QMIA Council Recommendations:

- Request YES partners develop a plan to assess why Asian and Native American children and youth appear to be underserved (QMIA Q Section #4, page 9).
- Request YES partners work with both Liberty and Optum to identify root cause of gaps in CANS assessments in the counties with no CANS and those with less than .50% penetration. (QMIA Q Section #4, page 12).
- Request YES partners develop a plan for increasing service availability and access in all 7 regions with a goal to increase access statewide (QMIA- Q Section 5, page 51).
- Request YES partners to develop a plan for increasing access to services for children 5-11 QMIA- Q Section 7, page 60).
- Request YES partners to evaluate variances in expenditures by region (QMIA- Q Section 9, page 66).

#### QMIA Council Action Items:

- Council to finalize a method for establishing the range expected number of YES eligible children and youth (QMIA Q Section #1, page 5).
- Council to set a goal for number of children and youth accessing YES services in collaboration with IGT (QMIA- Q Section #1, page 5).
- Council to continue to track the number of children with an initial CANS quarterly and develop trend analysis that will be helpful in assessing if there are an appropriate number of children and youth being identified as needing mental health services through an initial CANS. (QMIA-Q Section #4, page 10).
- Council to work with Plaintiffs and consultants (Praed, BSU, UnionPoint) to establish YES performance measures regarding YES services (QMIA- Q Section 5, page 51).
- Council to continue work on improving information on how to create an effective Safety/Crisis Plan QMIA- Q Section 7, page 60).

#### Questions?

If information provided within this QMIA-Q evokes questions or an interest in additional data collection, please contact [YES@dhw.idaho.gov](mailto:YES@dhw.idaho.gov) with your questions, concerns, or suggestions. For Medicaid-specific questions or concerns, please contact [YESProgram@dhw.idaho.gov](mailto:YESProgram@dhw.idaho.gov).



## 1: SFY 2021 Number of potential Class Members estimated

**Background:** Based on the Jeff D Settlement Agreement (Jeff D Settlement Agreement ( <https://yes.idaho.gov/youth-empowerment-services/about-yes/yes-history/?target=0> ) Sections 24 and 71. A.) the defendants must establish and annually update the range of expected Class Member service utilization.

**Report for SFY 2021:** The QMIA Council developed the estimated range of children and youth who are expected to utilize YES services and published that number in the QMIA-Q April 2021 (Section 1 of QMIA Q April “Estimated number” can be found in Appendix B of this QMIA-Q). As noted in that report, there is no single national report or survey that definitively estimates the prevalence of serious emotional disturbance (SED) in the US, however, according to the authorities such as the Substance Abuse and Mental Health Services Administration (SAMHSA<sup>1</sup>) the prevalence range is between 6.8% and 11.5 %. Due to the lack of a definitive way to create the estimate several methods, including different populations and different rates, were used and the range identified was quite wide (13,000<sup>2</sup> to 33,000<sup>3</sup>). The QMIA Council proposed using a target of serving 23,000 children and youth by the end of SFY 2023 as a starting point to evaluate the current level of utilization but will be working with YES plaintiffs and other stakeholders to establish the actual goal.

### **QMIA Council Action Items or Recommendations:**

- 1) Action Item- QMIA Council to finalize a method for establishing the range children and youth expected to be eligible for YES.
- 2) Action Item- QMIA Council to set a goal for number of children and youth accessing YES services in collaboration with IGT.

## 2. Identification and Screening of Potential Class Members

**Background:** To ensure that children and youth with mental health needs may be appropriately identified, Idaho implemented the use of the Child and Adolescent Needs and Strengths (CANS) assessment instrument.

**Report:** To identify and screen children and youth for YES services a child or youth may have an initial CANS in any of three YES entities (DBH, Liberty and/or Optum Network providers). Data is reported below for all three entities.

*Table 1: SFY 2020- Children and Youth with Initial CANS*

SFY 2020	DBH	Liberty	Optum Providers	Unduplicated Total*
Distinct clients by agency	452	1,423	13,460	14,746
%	2.9%	9.3%	87.8%	

*Table 2: SFYTD 2021 (Q1- Q3) Children and Youth with Initial CANS*

SFYTD 2021	DBH	Liberty	Optum Providers	Unduplicated Total*
Distinct clients by agency	230 <sup>4</sup>	643	7402	8091
%	2.8%	7.9%	91.5%	

<sup>1</sup> SAMHSA report from 2017 noted the prevalence range between 6.8 and 11.5 % (Page 20, [https://www.samhsa.gov/sites/default/files/programs\\_campaigns/ismicc\\_2017\\_report\\_to\\_congress.pdf](https://www.samhsa.gov/sites/default/files/programs_campaigns/ismicc_2017_report_to_congress.pdf))

<sup>2</sup> 189,249 Medicaid members X 6.9% =13,058 or approximately 13,000

<sup>3</sup> 424,000 children and youth in Idaho X 6.9% = 33,231 or approximately 33,000

<sup>4</sup> This number was previously understated and should have been Q1= 87, Q2= 71, Q3=74

### What is the data telling us?

This data indicates that YES Class Members are being identified using the CANS. As the system continues to develop it is expected that more of the children and youth will be assessed by Optum Providers than by DBH or Liberty as the CANS has become the standardized method for assessing all children and youth who are entering the mental health system of care. The number completed by quarter will be reported in each successive QMIA-Q so that over time quarterly trends in the number of initial CANS may be established.

### 3. Number of YES eligible children and youth based on initial CANS

**Background:** An algorithm based on the CANS was developed for Idaho to support identification of YES members. The algorithm results in a rating of 0, 1, 2, or 3. Based on that algorithm, all children who have a CANS rating of “1” or greater are considered to meet the criteria for eligibility for YES membership. Children and youth with a rating of “0” on the CANS may still have mental health needs and are still provided mental health services but they do not meet the eligibility criteria established in the Jeff D. Settlement Agreement to be considered a class member of the Jeff D. Lawsuit.

**Report:** Of all the initial CANS completed in SFY 2020 and 2021 (Q1-Q3), 70% met the criteria for eligibility for YES (CANS 1, 2, or 3 rating) and 30% did not meet the criteria (CANS rating of 0). The percentages of those found eligible vs those found not eligible across time continues to be consistent, which indicates that there may be crude reliability in the percentage of children and youth who are assessed who likely qualify for YES (e.g. it is expected that approximately 70% of children accessing mental health services would meet criteria to be YES eligible).

Table 3: SFY 2020 CANS Rating – by Agency completing CANS

Assessment score	DBH		Liberty		Optum Providers		Unduplicated Total*	
	# of CANS	% of CANS	# of CANS	% of CANS	# of CANS	% of CANS	# of CANS	% of CANS
0	25	5%	29	2%	4,560	33%	4,611	30%
1	116	26%	397	28%	6,417	46%	6,853	44%
2	59	13%	317	22%	1,382	10%	1,733	11%
3	252	56%	680	48%	1,540	11%	2,326	15%
Total # of CANS	452		1,423		13,460*		14,746*	

\*Total numbers from Table 1 on page 5

Note: The percent of CANS completed by each entity and variations in ratings are in accordance with YES system of care expectations. The expectation is that majority of children and youth will access the YES system by having an initial CANS through their Optum provider so those numbers are much higher and the rating vary more then for DBH or Liberty. Only children who do not have Medicaid or need respite will have their CANS through Liberty, so the numbers for Liberty are lower, and the ratings are higher.

Table 4: SFY 2021 Year to Date (Q1- Q3) CANS Rating – by Agency completing CANS:

Assessment score	DBH		Liberty		Optum Providers		Unduplicated Total*	
	# of CANS	% of CANS	# of CANS	% of CANS	# of CANS	% of CANS	# of CANS	% of CANS
0	15	7%	8	1%	2,518	33%	2539	30%
1	53	23%	161	25%	3725	49%	3922	47%
2	32	14%	145	23%	618	8%	788	9%
3	131	57%	329	51%	723	10%	1130	14%
Total # of CANS	231	3 % of total	643	8% of total	7584	91% of total	8379	

\*Noted: Denominators for calculation of percentage is based on actual number of CANS not distinct number of children and youth.

#### What is the data telling us?

This data indicates that children and youth are being assessed as eligible for YES services using the CANS. Of all CANS completed, only 30% are found as not eligible for YES. As the system continues to develop it is expected that more of the children and youth will be assessed by Optum providers than by DBH or Liberty as the CANS has become the standardized method for assessing all children and youth who are entering the mental health system of care. The number completed by quarter will be reported in each successive QMIA-Q so that over time quarterly trends in number of initial CANS may be established.

Predicted target to be served by CANS score:

Based on the percentage of CANS ratings of 1, 2, or 3 compared to the targeted number of children to be served a rough prediction can be made of the number of children and youth that may be eligible for YES services. While targets have not yet been determined this rough prediction can be used to begin assessing the amount and types of services needed.

Table 5: Predicted prevalence by CANS ratings compared to the QMIA council proposed target goal of 23,000

CANS Rating	YES Eligible	Percent of total eligible	Predicted Prevalence Needing Services*
1	3922	67%	15,400
2	788	13%	3,000
3	1130	20%	4,600
Total #			23,000

\*Numbers are rounded to nearest 50

#### 4. Characteristics of children and youth assessed using the CANS

**Background:** The characteristics of the children and youth who were assessed are noted by age, gender, race/ ethnicity, and geographic distribution by county. The goal of assessing those who have received an initial CANS assessment is to identify if there may have been any disparities compared to the population of Idaho or compared to previous years.

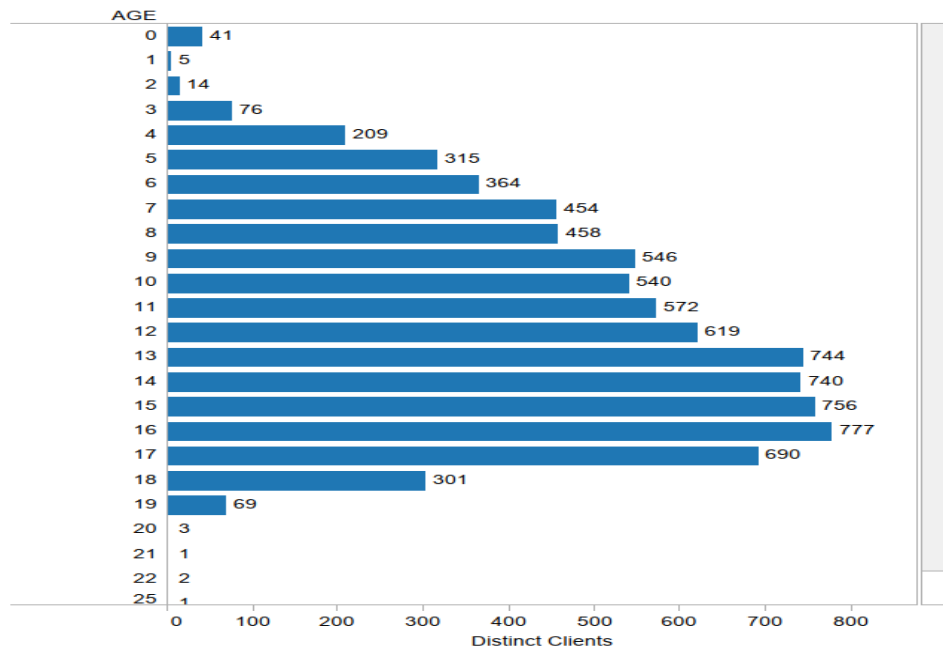
**Report: By Age- data includes comparison of SFY 2020 and SFYTD 2021 (Q1-Q3):**

Table 6: Ages of children and youth who received an initial CANS - summary

Age range	# SFY 2020	%SFY 2020	# SFYTD 2021	% SFYTD 2021
3-4	493	3.4%	285	3.5%
5-6	1260	8.7%	679	8.4%
7-8	1775	12.2%	912	11.3%
9-11	3318	22.8%	1664	20.6%
12-14	3753	25.8%	2103	26.0%
15-17	3961	27.2%	2223	27.5%
All ages	14,560		8,091	

Chart 1: Ages of children and youth who received an initial CANS

CMH CANS Clients count by Age for SFY 2021



#### Report by Gender: SFYTD 2021 (Q1- Q3):

Report: The number and percentage of children and youth based on the initial CANS for SFYTD 2021 is approximately reflective of the percentages of the states population. To date, there has been an increase this SFY in the percentage of females receiving a CANS.

Table 7: Gender of children and youth who received a CANS

	Female	Male	Refused	Transgender Female	Transgender Male	Unknown	Grand total
Distinct clients	4,048	3,970	14	13	32	14	8,091
% by Gender	50.05%	49.07%	0.17%	0.16%	0.40%	0.17%	
% of Idaho's Population	48.87%	51.13%	NA	Unknown	Unknown	NA	

Note: State level census data does not track or report on percentages of Idaho's children and youth identifying as Transgender Male or Female.

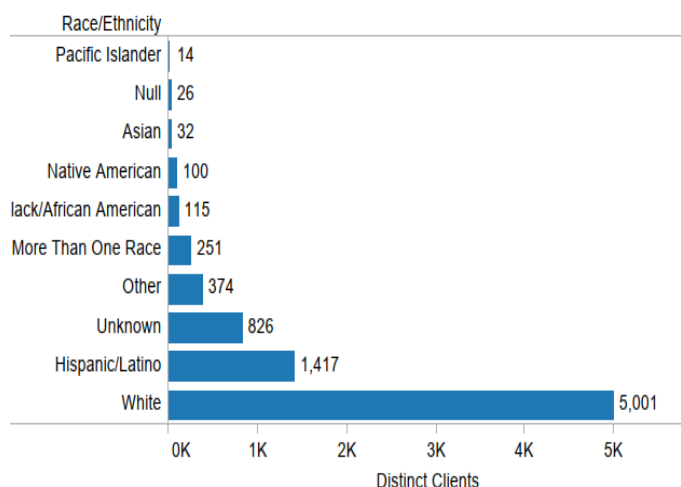
#### Report by Race and Ethnicity: SFYTD 2021 (Q1- Q3):

The number and percentage of children and youth based on the initial CANS by Race/Ethnicity for SFYTD 2021 indicates that there may be some disparities in the children and youth being assessed with the CANS. Black/African American and Hispanic children and youth appear to be assessed at a higher rate than the general population percentage in Idaho. Asian and Native American children and youth appear to be underserved. Also notable is that approximately 15% of CANS that continue to be entered into the CANS tracking system (ICANS) had either unknown or other as the race or ethnicity of the child or youth served (see graph).

Table 8: Race and Ethnicity of children and youth who received a CANS:

	Asian	Black/ African American	Hispanic/ Latinx	More than one race	Native American	Pacific islander	White
Distinct Clients	32	115	1,417	251	100	14	5,001
% by Race Ethnicity	0.5%	1.7%	20.5%	3.6%	1.4%	0.2%	72.2%
% of Idaho's population	1.6%	0.9%	12.7%	2.5%	1.7%	0.2%	80.4%

CMH CANS Clients count by **Race/Ethnicity** for SFY 2021



#### QMIA Council Action Items or Recommendations:

- 3) Recommendation- Request YES partners develop a plan to assess why Asian and Native American children and youth appear to be underserved.

#### Report by County: SFYTD 2021 (Q1- Q3):

Report: As can be seen in Table 9 when compared to regional populations the gap in locations where CANS are completed is most evident in Regions 6, 2 and 3.

Table 9: Initial CANS Assessments by Region

Region	# CANS completed	Q3 % of CANS completed	% population	Variance
1	1097	13.4%	11.8%	1.6%
2	187	2.3%	5.3%	<b>-3.0%</b>
3	1277	15.6%	17.8%	<b>-2.2%</b>
4	2280	27.7%	27.2%	0.5%
5	969	11.8%	12.4%	<b>-.6%</b>
6	594	7.2%	11.1%	<b>-3.9%</b>
7	1815	22.0%	14.4%	7.6%

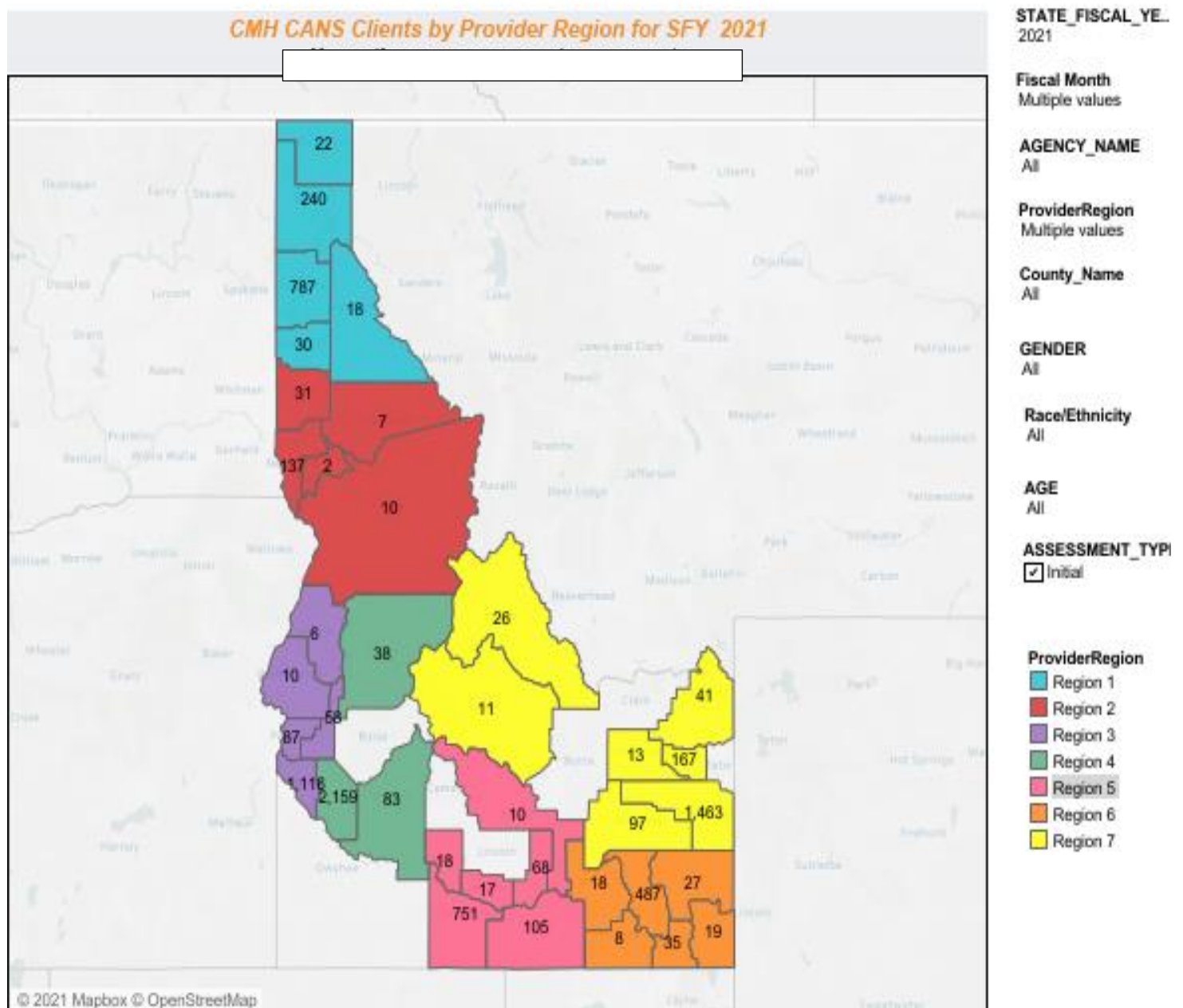
Note: The location of the CANS is the providers location which may differ from the location of the client's home

As can be seen in the map below showing the number based on the initial CANS provided in SFYTD 2021, there are still 7 counties with "0" completed CANS: Boise, Butte, Clark, Camas, Lincoln, Owyhee, and Teton. This is a slight

improvement over the 10 counties reported in Q1 (included counties), and 8 counties in Q2 (included Adams County) of SFY 2021. When compared to regional populations the gap in CANS assessments is most evident in Region 2

#### QMIA Council Action Items or Recommendations:

- 4) Action Item - Continue to track the number of children with an initial CANS quarterly and develop trend analysis that will be helpful in assessing if there are an appropriate number of children and youth being identified as needing mental health services through an initial CANS.





The following table (Table 10) shows the comparison between the number of initial CANS to the population under 18 in each county. In addition to the 7 counties in which there were no CANS, there were several counties (8) with less than .050% penetration: Blaine, Clearwater, Gooding, Idaho, Jefferson, Jerome, Latah, Washington. The counties with the highest rate of CANS completions are: Bonner (Region 1), Kootenai (Region 1), Twin Falls (Region 5), Bannock (Region 6), and Bonneville (Region 7).

Table 10- Initial CANS (colors below match to map above)

Region/COUNTY	CANS	Population	Penetration rate	Region/COUNTY	CANS	Population	Penetration rate
<b>Region 1</b>				<b>Region 5</b>			
Benewah	30	2,113	1.42%	Blaine	10	5,138	0.19%
Boundary	22	2,776	0.79%	Camas	0	277	0
Bonner	240	9,247	2.60%	Cassia	105	7,671	1.37%
Kootenai	787	38,656	2.04%	Gooding	18	4,913	0.37%
Shoshone	18	2,737	0.66%	Jerome	17	7,554	0.23%
				Lincoln	0	1,562	0
<b>Region 2</b>				Minidoka	68	5,931	1.15%
Clearwater	7	1,488	0.47%	Twin Falls	751	24,114	3.11%
Idaho	10	3,308	0.30%				
Latah	31	7,785	0.40%	<b>Region 6</b>			
Lewis	7	855	0.82%	Bannock	487	23,615	2.06%
Nez Perce	131	8,581	1.53%	Bear Lake	19	1,625	1.17%
				Caribou	27	2,038	1.32%
<b>Region 3</b>				Franklin	35	4,530	0.77%
Adams	6	794	0.76%	Oneida	8	1,313	0.61%
Canyon	1115	67,475	1.65%	Power	18	2,498	0.72%
Gem	58	4,153	1.40%				
Owyhee	0	3,075	0	<b>Region 7</b>			
Payette	87	6,350	1.37%	Bingham	94	14,445	0.65%
Washington	10	2,352	0.43%	Bonneville County	1463	37,498	3.90%
				Butte County	0	632	0
<b>Region 4</b>				Clark County	0	182	0
Ada	2,159	118,078	1.83%	Custer County	11	789	1.39%
Boise	0	1,384	0	Fremont County	41	3,411	1.20%
Elmore	83	7,185	1.16%	Jefferson County	13	10,680	0.12%
Valley	38	2,124	1.79%	Lemhi County	26	1,526	1.70%
				Madison County	167	10,536	1.59%
				Teton County	0	2,964	0

#### What is the data telling us?

There are wide disparities between counties and state wide in the rate of CANS completions. It is unclear if the issue is related to primarily resources (such as CANS assessors) or other barriers that are not known. Several of the counties are quite rural and include frontier areas.

#### QMIA Council Action Items or Recommendations:

- 5) Recommendation- YES partners to work with both Liberty and Optum to identify root cause of gaps in CANS assessments in the counties with no CANS and those with less than .50% penetration.

## 5. YES Medicaid service utilization

**Background:** The Jeff D Settlement Agreement requires all services listed in Appendix C to be available to children and youth with SED.

**Report:** In SFYTD 2021 Q3, as of the end of March the number of children and youth who had received outpatient mental health service from Medicaid/Optum under the 1915(i) waiver was 2,027 and with other Medicaid was 14,844 for a total of 16,871.

**Table 11: 1915 (i) Medicaid Accessing Services by Quarter - Ages 0 to 17 Only**

Description: This table displays the distinct count of Medicaid Members (counted by Medicaid ID), by quarter, who have been identified as having an SED based on the Liberty CANS assessment and who utilized services at any time between 7/1/2018 to 3/31/2021. Data as of 5/13/2021.

Region.	SFY19-Q1 (Jul to Sep)	SFY19-Q2 (Oct to Dec)	SFY19-Q3 (Jan to Mar)	SFY19-Q4 (Apr to Jun)	SFY20-Q1 (Jul to Sep)	SFY20-Q2 (Oct to Dec)	SFY20-Q3 (Jan to Mar)	SFY20-Q4 (Apr to Jun)	SFY21-Q1 (Jul to Sep)	SFY21-Q2 (Oct to Dec)	SFY21-Q3 (Jan to Mar)
Region 1	98	106	114	129	164	204	232	246	255	246	239
Region 2	45	48	55	65	65	66	76	76	86	89	89
Region 3	64	73	99	142	199	222	237	270	294	315	295
Region 4	90	131	179	232	310	346	388	441	496	523	518
Region 5	49	55	70	98	123	139	153	145	156	149	143
Region 6	47	51	57	84	91	112	133	149	165	178	183
Region 7	301	314	346	384	447	488	515	531	570	564	560
Region 9/Out of State	6	3	0	3	4	1	2	6	6	3	0
<b>Total by Quarter</b>	<b>700</b>	<b>781</b>	<b>920</b>	<b>1,137</b>	<b>1,403</b>	<b>1,578</b>	<b>1,736</b>	<b>1,864</b>	<b>2,028</b>	<b>2,067</b>	<b>2,027</b>

The data indicates that more children and youth who have been identified as meeting YES criteria for SED via the waiver are receiving mental health services in SFY 2021 than previous years (SFY 2021 average 2,041 per quarter, SFY 2020 average 1,645 per quarter, SFY 2019 average 880 per quarter).

**Table 12: All other Medicaid Members accessing Services by Quarter - Ages 0 to 17 Only**

Description: This table displays the distinct count of all other Medicaid Members (counted by MID) who were NOT identified as 1915 (i), by quarter, and utilized services at any time between 7/1/2018 to 3/31/2021. Data as of 5/13/2021.

Region.	SFY19-Q1 (Jul to Sep)	SFY19-Q2 (Oct to Dec)	SFY19-Q3 (Jan to Mar)	SFY19-Q4 (Apr to Jun)	SFY20-Q1 (Jul to Sep)	SFY20-Q2 (Oct to Dec)	SFY20-Q3 (Jan to Mar)	SFY20-Q4 (Apr to Jun)	SFY21-Q1 (Jul to Sep)	SFY21-Q2 (Oct to Dec)	SFY21-Q3 (Jan to Mar)
Region 1	1,841	1,840	1,984	1,963	1,746	1,732	1,817	1,610	1,604	1,671	1,771
Region 2	594	575	624	560	508	509	546	447	500	474	457
Region 3	3,521	3,578	3,830	4,013	3,594	3,647	3,624	2,936	2,964	3,111	3,196
Region 4	4,009	4,161	4,307	4,274	3,816	3,817	3,788	3,191	3,203	3,404	3,527
Region 5	1,506	1,542	1,536	1,562	1,472	1,455	1,577	1,303	1,397	1,532	1,721
Region 6	1,549	1,584	1,609	1,636	1,555	1,602	1,617	1,494	1,424	1,370	1,463
Region 7	2,694	2,777	2,828	2,885	2,776	2,790	2,780	2,599	2,473	2,555	2,684
Region 9/Out of State	37	40	43	61	70	45	43	41	57	36	25
<b>Total</b>	<b>15,751</b>	<b>16,097</b>	<b>16,761</b>	<b>16,954</b>	<b>15,537</b>	<b>15,597</b>	<b>15,792</b>	<b>13,621</b>	<b>13,622</b>	<b>14,153</b>	<b>14,844</b>

The number of children with other Medicaid (not related to the 1915(i) waiver) who are receiving mental health services increased in Q3 but remains lower than Q3 from last two years. It is notable that that average served by quarter is decreasing (SFY 2021 average 14,206 per quarter, SFY 2020 average 15,137 per quarter, SFY 2019 average 16,391 per quarter). This may be due to the impact of COVID -19.

**Table 13: The total number of children served by quarter**

This table combines the number of children and youth who received Medicaid via the 1915(i) waiver and those with other types of Medicaid (regular Medicaid, Foster Care Medicaid, etc.) who accessed mental health services. Data as of 5/13/21.

	SFY19- Q1 (Jul to Sep)	SFY19- Q2 (Oct to Dec)	SFY19- Q3 (Jan to Mar)	SFY19- Q4 (Apr to Jun)	SFY20- Q1 (Jul to Sep)	SFY20- Q2 (Oct to Dec)	SFY20- Q3 (Jan to Mar)	SFY20- Q4 (Apr to Jun)	SFY21- Q1 (Jul to Sep)	SFY21- Q2 (Oct to Dec)	SFY21- Q3 (Jan- March)
<b>Total 1915(i)</b>	700	781	920	1,137	1,403	1,578	1,736	1,864	2,028	2,067	2,027
<b>Total Medicaid</b>	15,751	16,097	16,761	16,954	15,537	15,597	15,792	13,621	13,622	14,153	14,844
<b>Total by Quarter</b>	16,451	16,878	17,681	18,091	16,940	17,175	17,528	15,485	15,650	16,220	16,871

The total number of children served in Q3 of 2021 is lower than the number served in Q3 of SFY19 and SFY20. It is notable that the average number service per quarter is decreasing (SFY 2021 average 16,247 per quarter, SFY 2020 average 16,782 per quarter, SFY 2019 average 17,275 per quarter). This drop is possibly a result of impacts related to COVID 19.

### **Utilization of YES Services Provided by Optum**

Utilization by services covered by Optum is included for each of the following YES services:

Psychotherapy	Family Psychoeducation
CANS Assessment	Partial Hospitalization (PHP)
Targeted Care Coordination	Intensive Home and Community Based Services (IHBCs)
Substance Use Disorder	Day Treatment (Day Tx)
Skills Building (CBRS)	Crisis Services
Respite	Child and Family Interdisciplinary Team (CFT)
Psychological and Neuropsychological testing	Behavior Identification
Medication Management	Adaptive Behavior Treatment
Youth Support Services (Youth Peer)	
Skills Training and Development (STAD)	

**Note on the following tables and charts:**

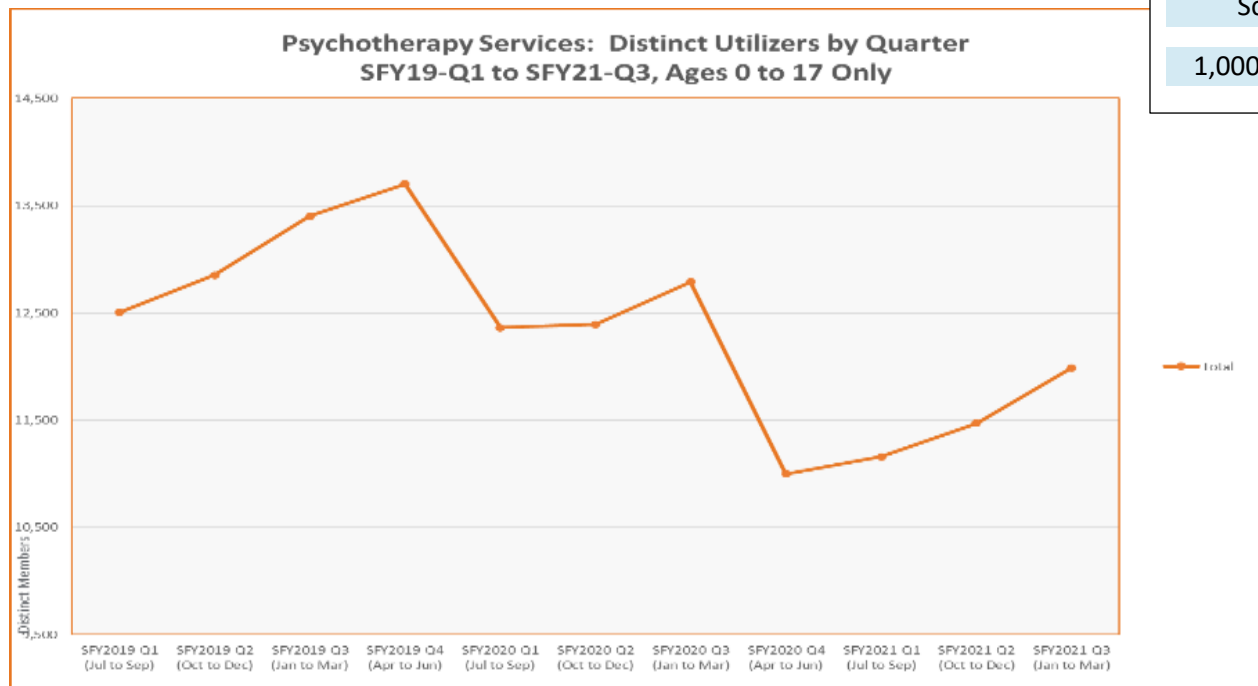
**Scales on each chart vary so notes have been added in a text box regarding the scale for each.**

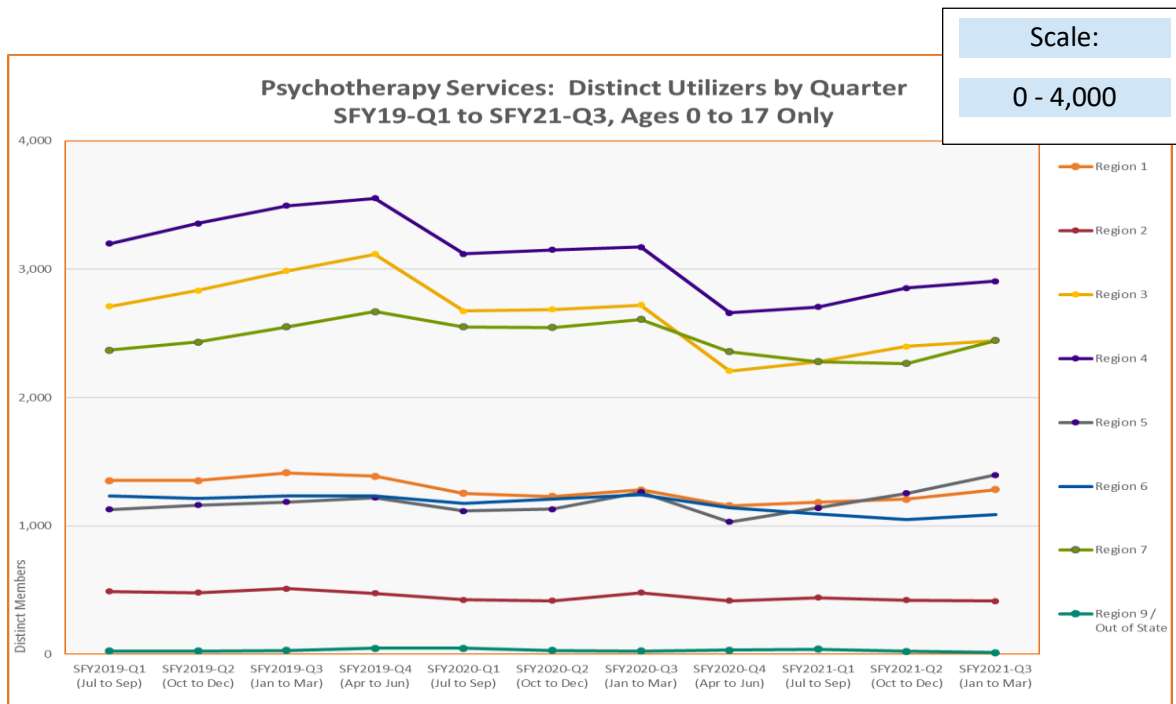
## Psychotherapy Services

### Psychotherapy - Distinct service utilizers per Region/Quarter

Description: This table displays distinct number of members between the ages of 0 to 17, by quarter who utilized the indicated service between 7/1/2018 to 3/31/2021. Note: Total distinct utilizer count represents an unduplicated (distinct) count of utilizers for the given state fiscal year across all quarters and/or regions combined. Data as of 5/13/21.

	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7	Region 9 / Out of State	Total
Service Date SFY-Qtr.	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers
SFY2019-Q1 (Jul to Sep)	1,352	490	2,711	3,198	1,127	1,231	2,370	26	12,505
SFY2019-Q2 (Oct to Dec)	1,353	480	2,834	3,355	1,162	1,213	2,431	25	12,853
SFY2019-Q3 (Jan to Mar)	1,414	512	2,985	3,493	1,187	1,232	2,550	31	13,404
SFY2019-Q4 (Apr to Jun)	1,386	474	3,117	3,552	1,221	1,235	2,670	47	13,702
SFY2019 Distinct Total Utilizers	2,297	791	5,025	5,625	2,144	2,092	3,902	91	21,967
SFY2020-Q1 (Jul to Sep)	1,255	424	2,675	3,120	1,116	1,177	2,551	46	12,364
SFY2020-Q2 (Oct to Dec)	1,229	417	2,685	3,151	1,131	1,207	2,545	29	12,394
SFY2020-Q3 (Jan to Mar)	1,281	480	2,720	3,171	1,264	1,241	2,609	25	12,791
SFY2020-Q4 (Apr to Jun)	1,157	416	2,207	2,660	1,031	1,139	2,356	33	10,999
SFY2020 Distinct Total Utilizers	2,050	708	4,434	5,115	2,019	1,958	3,851	91	20,226
SFY2021-Q1 (Jul to Sep)	1,184	442	2,277	2,706	1,140	1,091	2,279	40	11,159
SFY2021-Q2 (Oct to Dec)	1,209	422	2,397	2,853	1,253	1,048	2,266	23	11,471
SFY2021-Q3 (Jan to Mar)	1,282	414	2,444	2,906	1,397	1,089	2,445	12	11,989
SFY2021 Distinct Total Utilizers	1,757	622	3,519	4,193	1,927	1,575	3,234	59	16,886





### What is the data telling us?

In SFY 2019, the percentage of youth accessing psychotherapy through Medicaid was 94% of the QMIA Council proposed targeted total number of children and youth (21,543/ 23,000\*), and in SFY 2020 this percentage decreased to 86% (19,832/ 23,000). Again, in SFY 2021 overall the statewide the percentage is trending up but is still less than it was in the previous two fiscal years. The first three quarters of SFY 2021 are lower than each of the previous years' first two quarters. Comparing 3<sup>rd</sup> quarter to 3<sup>rd</sup> quarter by region, all the regions except Regions 1 and 5 have trended downward.

\*Using the goal of 23,000 which is the QMIA Council proposed goal for YES services. The goal is only a proposed goal at this time and a final goal will be determined in collaboration with the IGT.

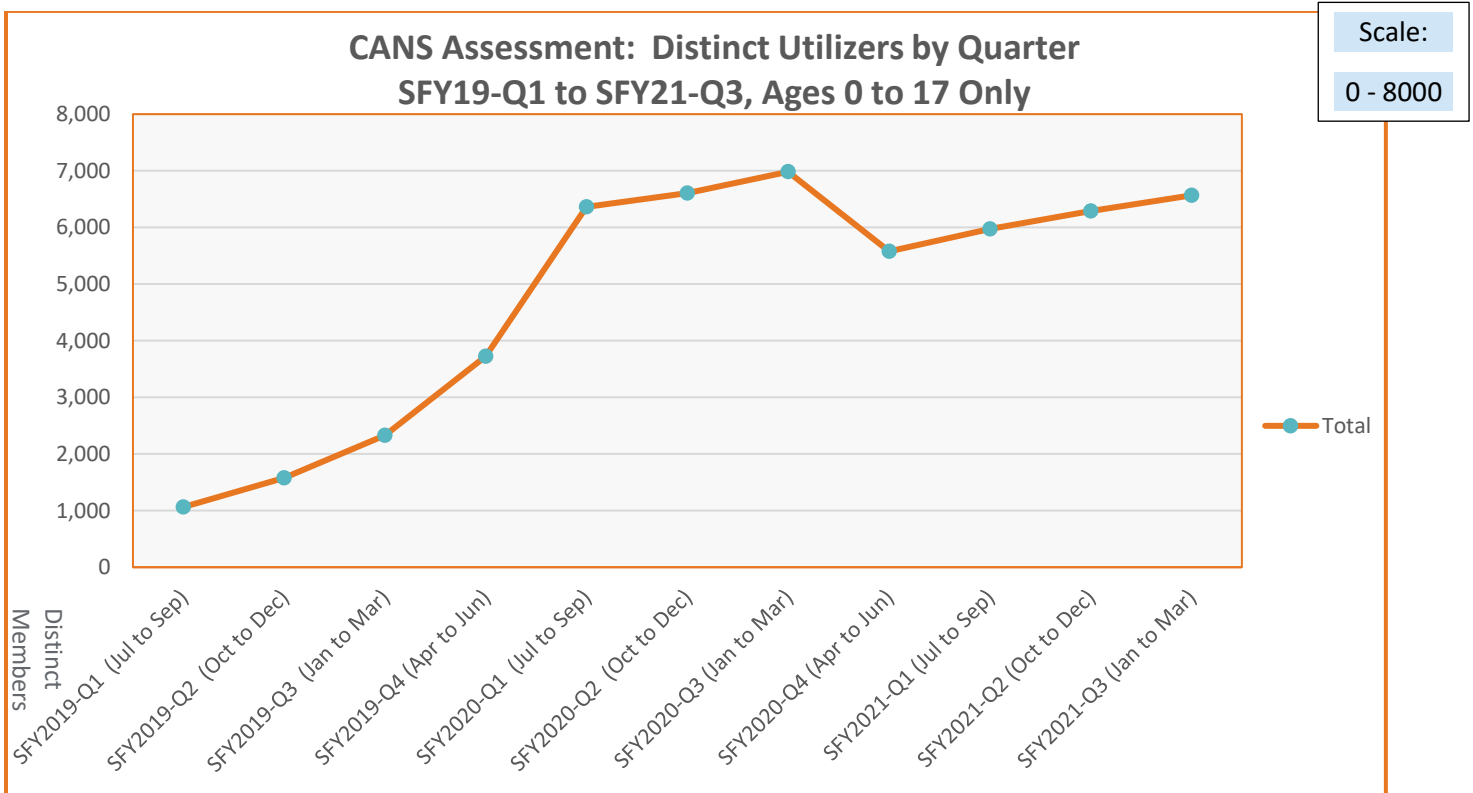
## Child and Adolescent Needs and Strengths (CANS) Assessment

**Table: CANS Assessment - Distinct service utilizers per Region/Quarter**

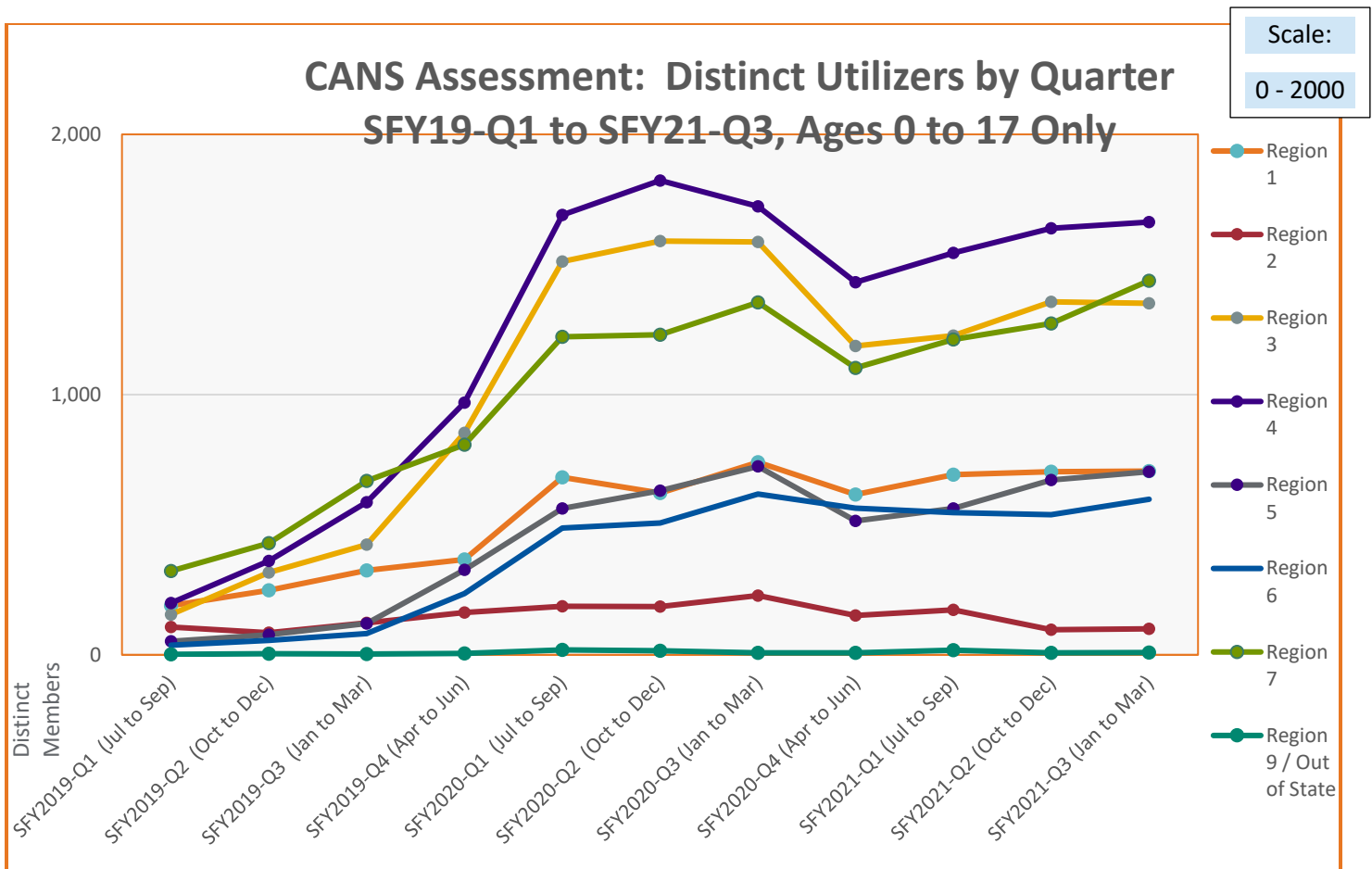
Description: This table displays distinct number of members between the ages of 0 to 17, by quarter who utilized the indicated service between 7/1/2018 to 3/31/2021. Note: Total distinct utilizer count represents an unduplicated (distinct) count of utilizers for the given state fiscal year across all quarters and/or regions combined. Data as of 5/13/21.

Note: This data is based on Optum claims data- not data from the ICANS system so the numbers may differ from the previous data

	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7	Region 9 / Out of State	Total
Service Date SFY-Qtr.	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers
SFY2019-Q1	189	107	155	199	52	37	322	2	1,063
SFY2019-Q2	248	85	317	361	77	55	429	4	1,576
SFY2019-Q3	324	123	424	586	120	82	669	3	2,331
SFY2019-Q4	367	163	853	969	327	235	808	5	3,727
SFY2019 Distinct Total Utilizers	736	308	1,180	1,365	489	321	1,402	10	5,811
SFY2020-Q1	682	187	1,511	1,690	563	487	1,222	19	6,361
SFY2020-Q2	622	185	1,590	1,823	631	507	1,230	16	6,604
SFY2020-Q3	740	228	1,587	1,723	724	618	1,354	8	6,982
SFY2020-Q4	616	151	1,187	1,432	515	564	1,103	8	5,576
SFY2020 Distinct Total Utilizers	1,416	422	3,163	3,586	1,401	1,199	2,682	35	13,904
SFY2021-Q1	692	173	1,227	1,545	563	546	1,212	18	5,976
SFY2021-Q2	704	97	1,357	1,639	672	539	1,273	8	6,289
SFY2021-Q3	706	100	1,351	1,663	704	598	1,438	9	6,569
SFY2021 Distinct Total Utilizers	1,226	259	2,282	2,878	1,256	1,060	2,371	28	11,360







#### What is the data telling us?

In SFY 2019, only 25% of the targeted number of YES class members received a CANS through a Medicaid Network provider (5,779/23,000\*). This increased in 2020 to almost 60% (13,751/23,000\*). For SFY 2021, there is a slight upward trend statewide for the first 3 quarters. There is still a downward trend in Regions 2, 3, and 4 with Regions 1, 5, 6 and 7 remaining fairly stable. While the decrease may be mainly due to COVID-19 the goal is for all YES eligible children and youth to have an initial CANS and CANS update every 90 days. This data indicates that there are children and youth who may not be getting a CANS.

\*Using the QMIA Council proposed goal of 23,000 set in 2021

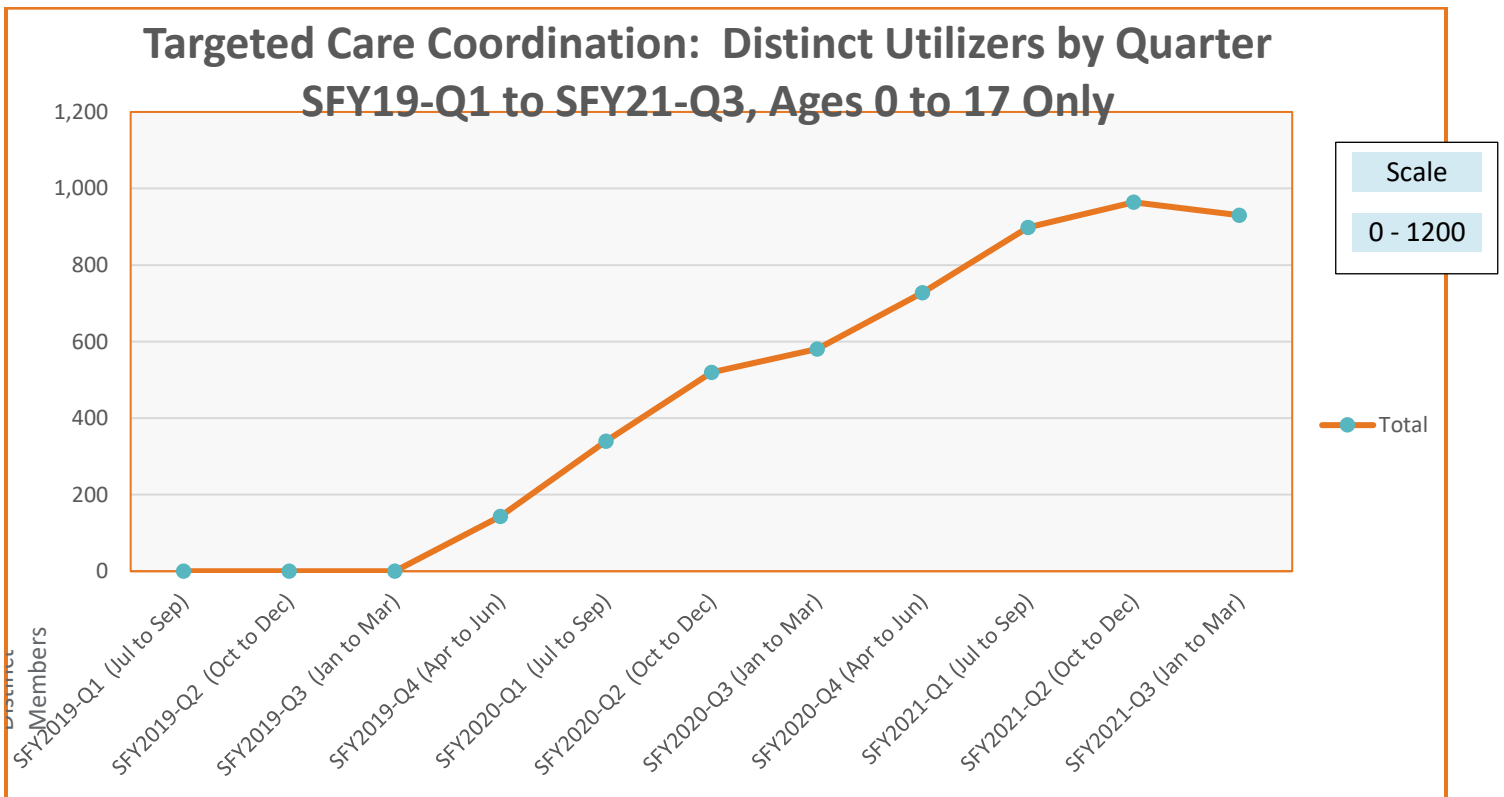
## Targeted Care Coordination

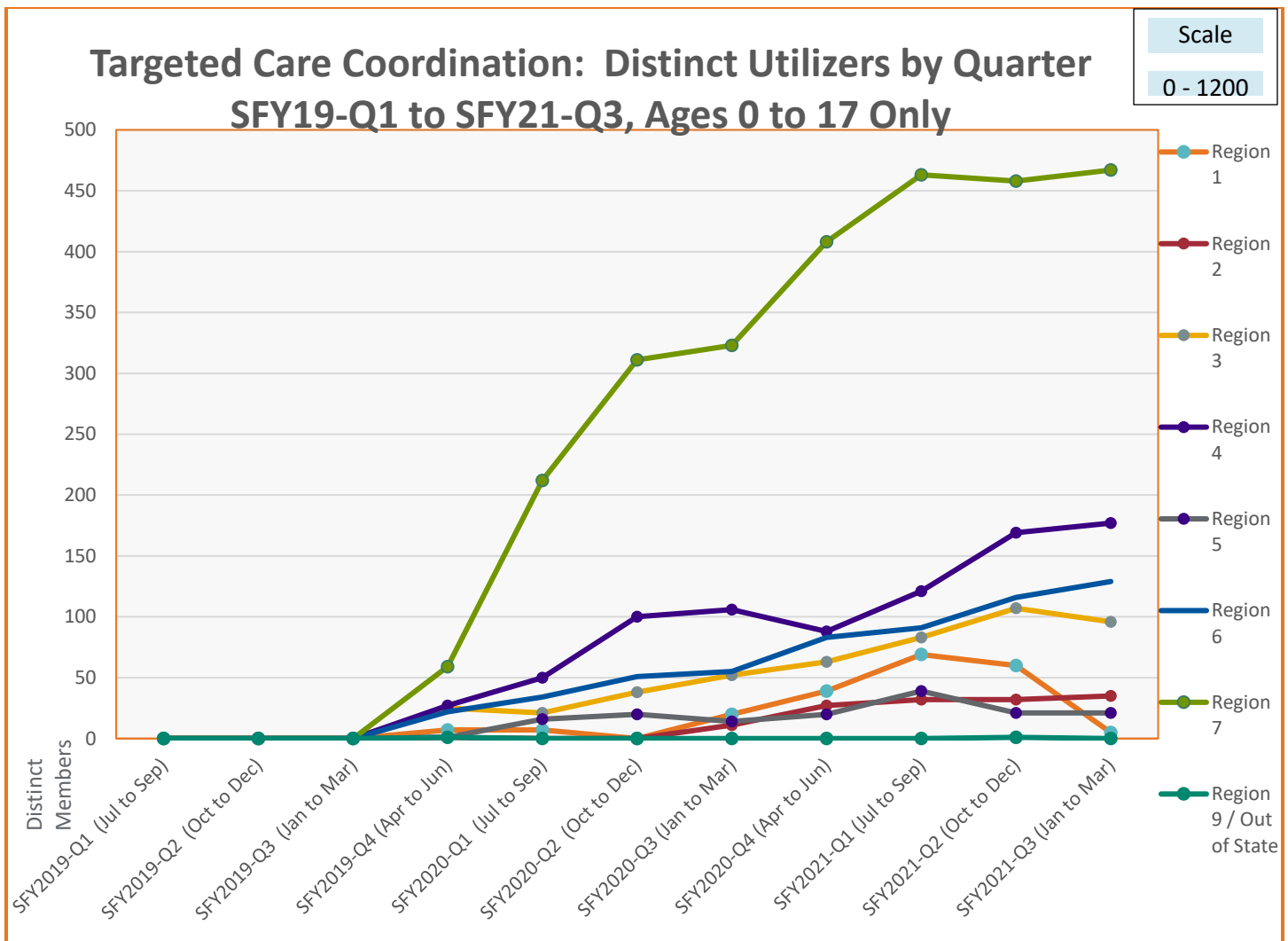
**Table: TCC - Distinct service utilizers per Region/Quarter**

Description: This table displays distinct number of members between the ages of 0 to 17, by quarter who utilized the indicated service between 7/1/2018 to 3/31/2021. Note: Total distinct utilizer count represents an unduplicated (distinct) count of utilizers for the given state fiscal year across all quarters and/or regions combined. Data as of 5/13/21.

Note: TCC service was not provided prior to Q4 of 2019

	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7	Region 9 / Out of State	Total
Service Date SFY-Qtr.	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers
SFY2019-Q1	0	0	0	0	0	0	0	0	0
SFY2019-Q2	0	0	0	0	0	0	0	0	0
SFY2019-Q3	0	0	0	0	0	0	0	0	0
SFY2019-Q4	7	1	25	27	1	22	59	1	143
SFY2019 Distinct Total Utilizers	7	1	25	27	1	22	59	1	143
SFY2020-Q1	7	0	21	50	16	34	212	0	340
SFY2020-Q2	0	0	38	100	20	51	311	0	520
SFY2020-Q3	20	11	52	106	14	55	323	0	581
SFY2020-Q4	39	27	63	88	20	83	408	0	728
SFY2020 Distinct Total Utilizers	56	28	113	219	54	122	545	0	1,137
SFY2021-Q1	69	32	83	121	39	91	463	0	898
SFY2021-Q2	60	32	107	169	21	116	458	1	964
SFY2021-Q3	5	35	96	177	21	129	467	0	930
SFY2021 Distinct Total Utilizers	89	49	143	254	62	173	599	1	1,370





#### What is this data telling us?

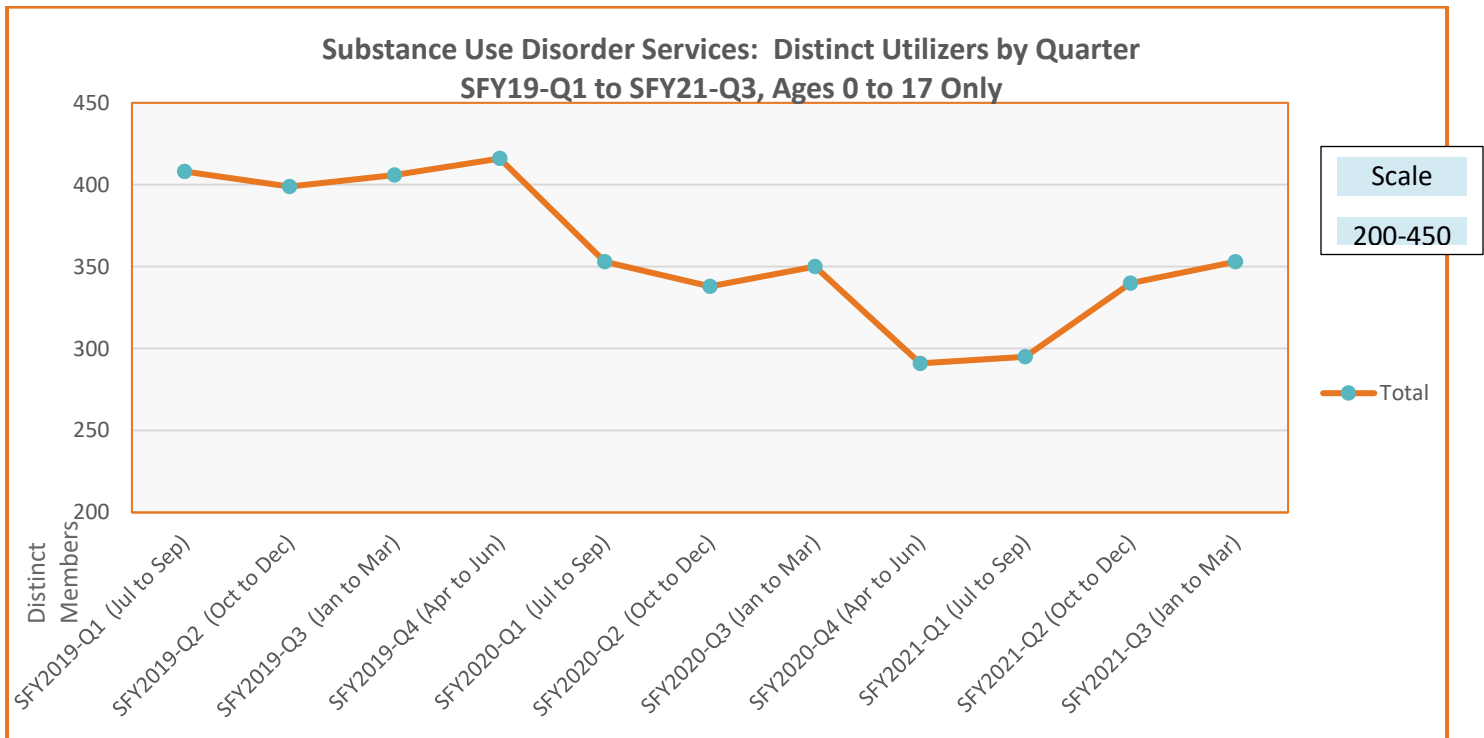
All children and youth with Medicaid eligibility under the 1915(i) Waiver should be receiving TCC (e.g. 2,036 members in Q2 of SFY2021) and all other children and youth who meet criteria for YES may receive TCC. As of the end of SFY 2021 Q3 1,370 children and youth had received TCC. This indicates that fewer children and youth who should be receiving TCC are currently receiving the service. It is unclear what the targeted number should be but as compared just to the waived children and youth the percentage served is 67% (1,370 / 2,036) in Q1- Q3 SFY 2021. However, it is notable that the number receiving the service has been increasing steadily in every region.

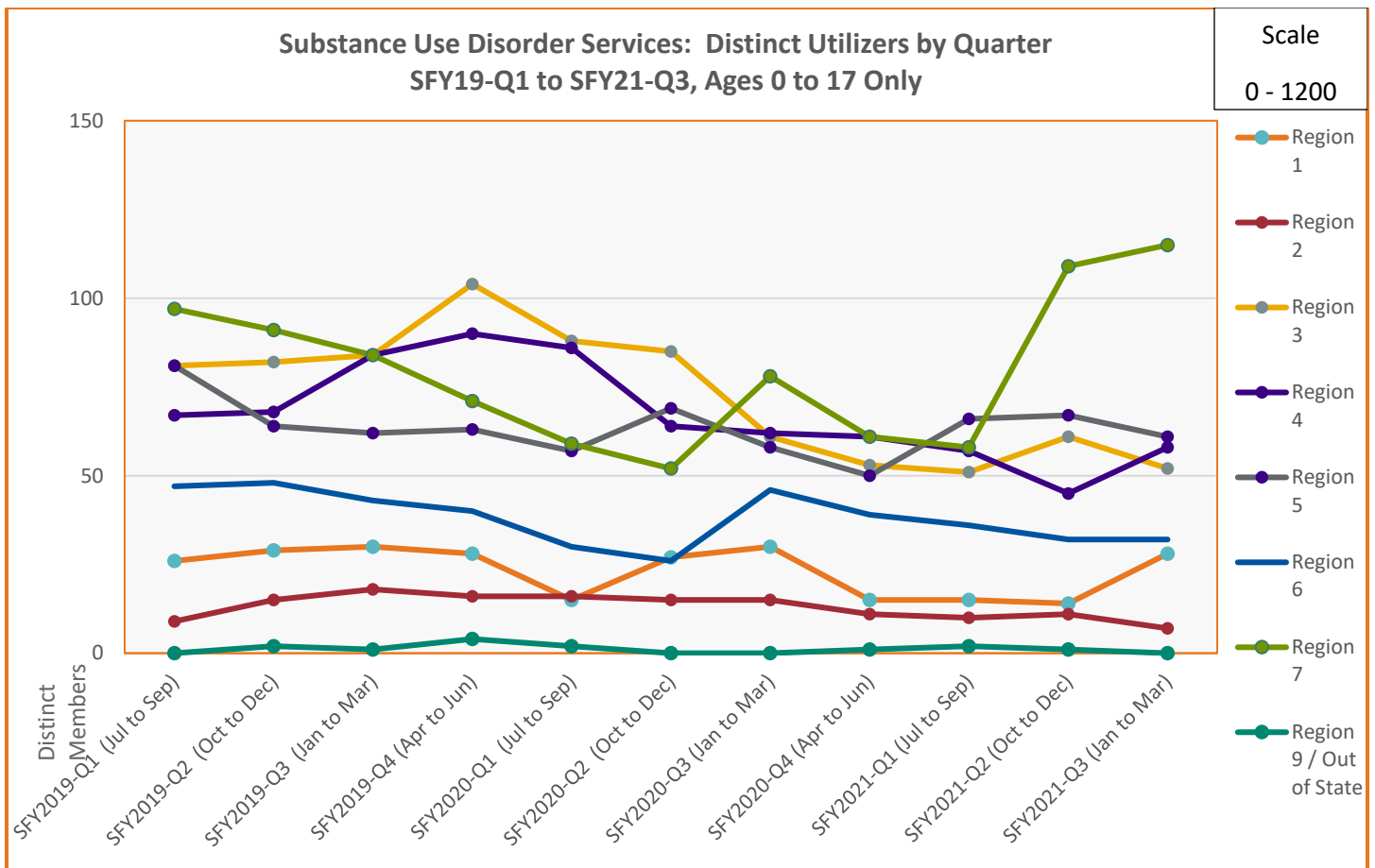
## Substance Use Disorder (SUD) Services

**Table: SUD Services - Distinct service utilizers per Region/Quarter**

Description: This table displays distinct number of members between the ages of 0 to 17, by quarter who utilized the indicated service between 7/1/2018 to 3/31/2021. Note: Total distinct utilizer count represents an unduplicated (distinct) count of utilizers for the given state fiscal year across all quarters and/or regions combined. Data as of 5/13/21.

	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7	Region 9 / Out of State	Total
Service Date SFY-Qtr.	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers
SFY2019-Q1 (Jul to Sep)	26	9	81	67	81	47	97	0	408
SFY2019-Q2 (Oct to Dec)	29	15	82	68	64	48	91	2	399
SFY2019-Q3 (Jan to Mar)	30	18	84	84	62	43	84	1	406
SFY2019-Q4 (Apr to Jun)	28	16	104	90	63	40	71	4	416
SFY2019 Distinct Total Utilizers	72	31	198	169	160	91	176	6	903
SFY2020-Q1 (Jul to Sep)	15	16	88	86	57	30	59	2	353
SFY2020-Q2 (Oct to Dec)	27	15	85	64	69	26	52	0	338
SFY2020-Q3 (Jan to Mar)	30	15	61	62	58	46	78	0	350
SFY2020-Q4 (Apr to Jun)	15	11	53	61	50	39	61	1	291
SFY2020 Distinct Total Utilizers	56	28	162	155	131	69	151	3	755
SFY2021-Q1 (Jul to Sep)	15	10	51	57	66	36	58	2	295
SFY2021-Q2 (Oct to Dec)	14	11	61	45	67	32	109	1	340
SFY2021-Q3 (Jan to Mar)	28	7	52	58	61	32	115	0	353
SFY2021 Distinct Total Utilizers	43	14	96	104	113	57	204	2	633





### What is this data telling us?

According to the 2018 SAMHSA National Findings Report the projected prevalence of substance use disorder in youth ages 12-17 is 2.7% for drug use and 1.6% for alcohol use disorder. Using these percentages compared to the number of Medicaid Members, it is expected that approximately 5,000 youth (rounded to nearest 1,000) would be predicted to have issues with substance use disorders and approximately 3,000 youth (rounded to nearest 1,000) would be projected to have issues with alcohol use disorders.

(<https://www.samhsa.gov/data/sites/default/files/cbhsq-reports/NSDUHNationalFindingsReport2018/NSDUHNationalFindingsReport2018.pdf>)

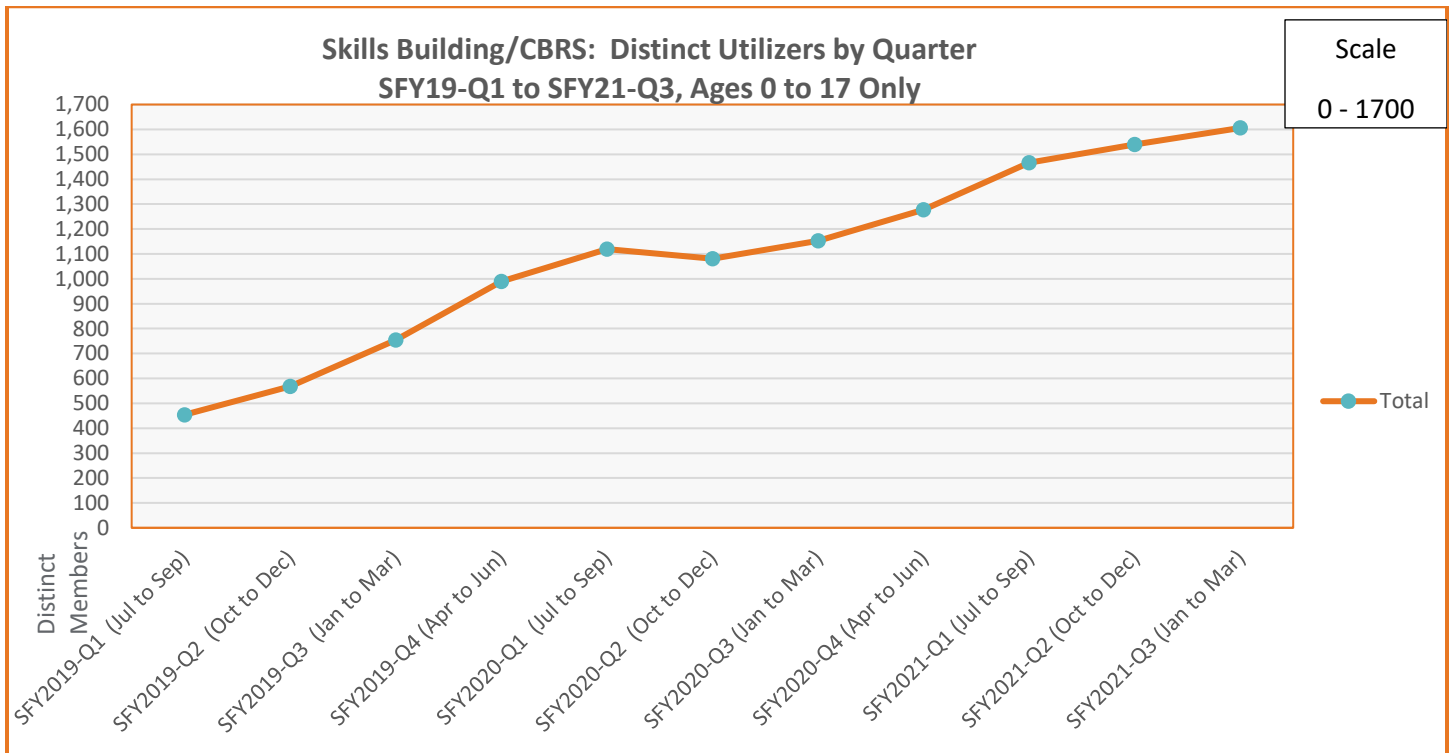
While there may be youth receiving SUD services through other providers the number receiving SUD services is less than 25% of the number who may need the services ( $633 / 5,000 = 13\%$ , and  $633 / 3,000 = 21\%$ ). Note- This could be due to how providers bill or probably indicates a need for more focus on SUD services.

## Skills Building/CBRS

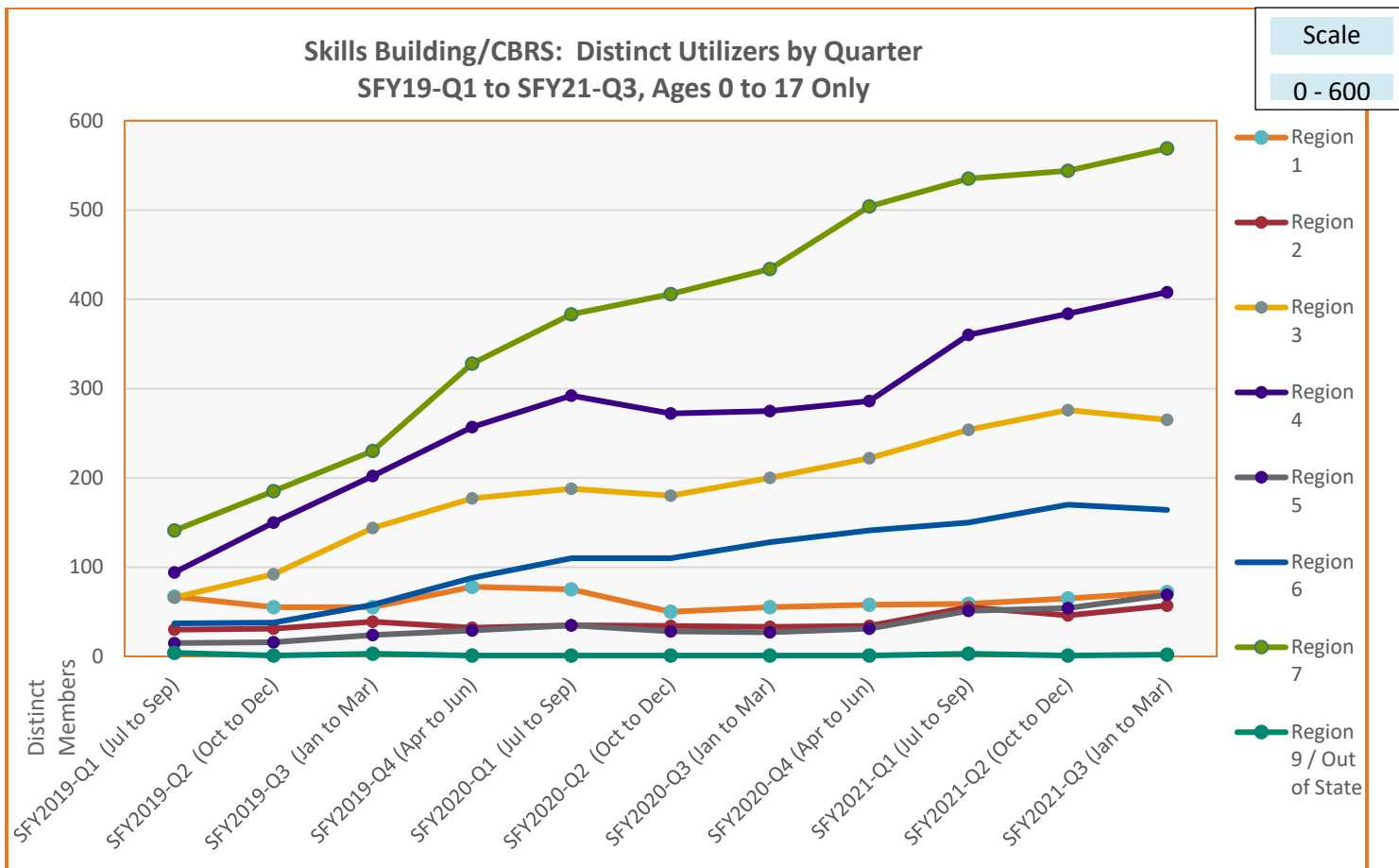
**Table: Skills Building/CBRS - Distinct service utilizers per Region/Quarter**

Description: This table displays distinct number of members between the ages of 0 to 17, by quarter who utilized the indicated service between 7/1/2018 to 3/31/2021. Note: Total distinct utilizer count represents an unduplicated (distinct) count of utilizers for the given state fiscal year across all quarters and/or regions combined. Data as of 5/13/21.

	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7	Region 9 / Out of State	Total
Service Date SFY-Qtr.	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers
SFY2019-Q1 (Jul to Sep)	67	30	66	94	15	37	141	4	454
SFY2019-Q2 (Oct to Dec)	55	31	92	150	16	38	185	1	568
SFY2019-Q3 (Jan to Mar)	55	39	144	202	24	58	230	3	755
SFY2019-Q4 (Apr to Jun)	78	32	177	257	29	88	328	1	990
<b>SFY2019 Distinct Total Utilizers</b>	<b>119</b>	<b>57</b>	<b>230</b>	<b>330</b>	<b>34</b>	<b>114</b>	<b>406</b>	<b>6</b>	<b>1,296</b>
SFY2020-Q1 (Jul to Sep)	75	35	188	292	35	110	383	1	1,119
SFY2020-Q2 (Oct to Dec)	50	34	180	272	28	110	406	1	1,081
SFY2020-Q3 (Jan to Mar)	55	33	200	275	27	128	434	1	1,153
SFY2020-Q4 (Apr to Jun)	58	34	222	286	31	141	504	1	1,277
<b>SFY2020 Distinct Total Utilizers</b>	<b>115</b>	<b>63</b>	<b>369</b>	<b>484</b>	<b>62</b>	<b>215</b>	<b>688</b>	<b>4</b>	<b>2,000</b>
SFY2021-Q1 (Jul to Sep)	59	55	254	360	51	150	535	3	1,467
SFY2021-Q2 (Oct to Dec)	65	46	276	384	54	170	544	1	1,540
SFY2021-Q3 (Jan to Mar)	72	57	265	408	69	164	569	2	1,606
<b>SFY2021 Distinct Total Utilizers</b>	<b>115</b>	<b>63</b>	<b>369</b>	<b>484</b>	<b>62</b>	<b>215</b>	<b>688</b>	<b>4</b>	<b>2,000</b>







#### What is this data telling us?

According to the 2018 SAMHSA National Findings Report, evidence based social skills training may be effective for children and youth with anxiety, depression, disruptive behaviors, exposure to trauma and other mental disorders. Since SFY 2019 the number of children and youth receiving Skills Building has been increasing. While last year the highest number served in any one quarter was 1,271 already by the end of Q3 this year 2,000 have received the service ( $2,000 / 23,000 = 8.69\%$ ). The service seems to be accessed most in Region 7 and Region 4.

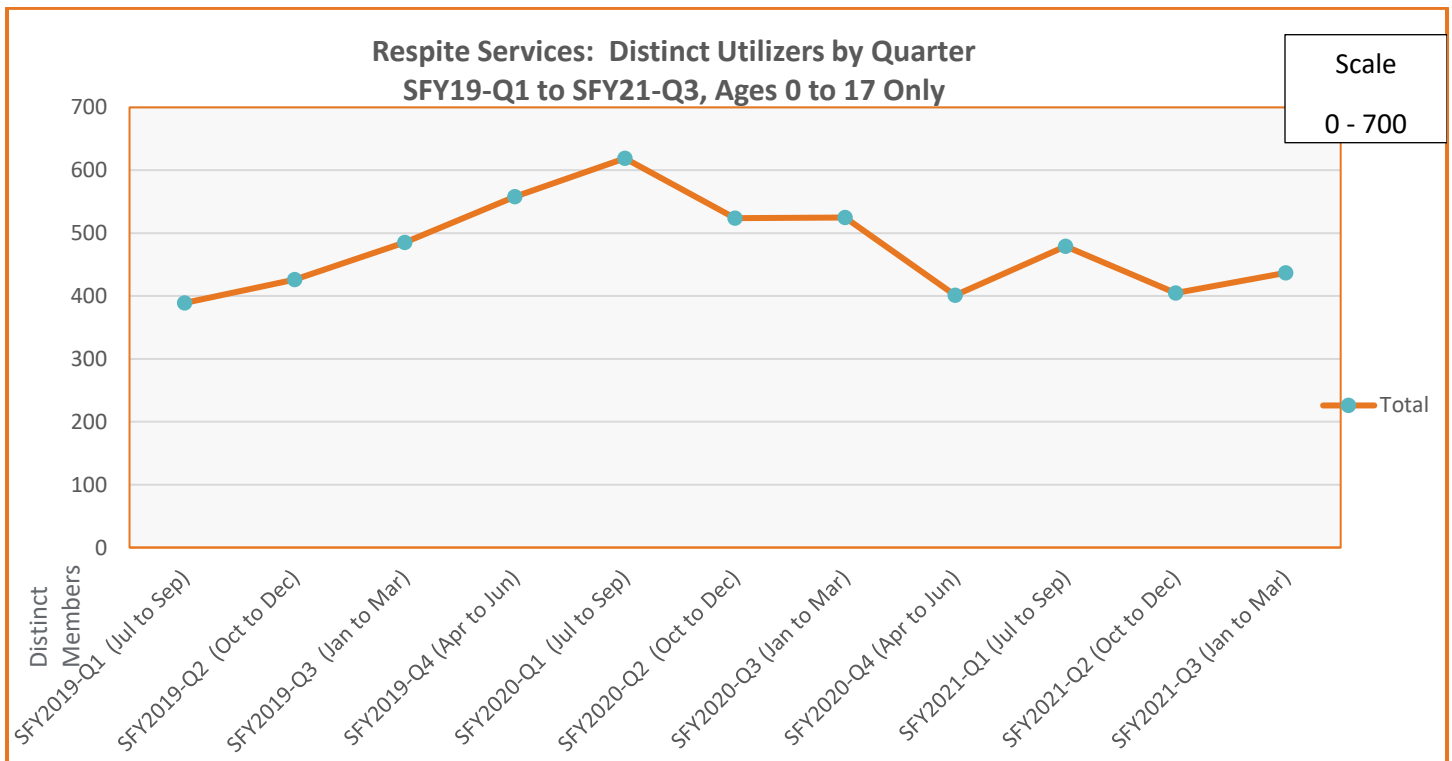
Further analysis is needed to determine how many children and youth could benefit from Skills Building services.

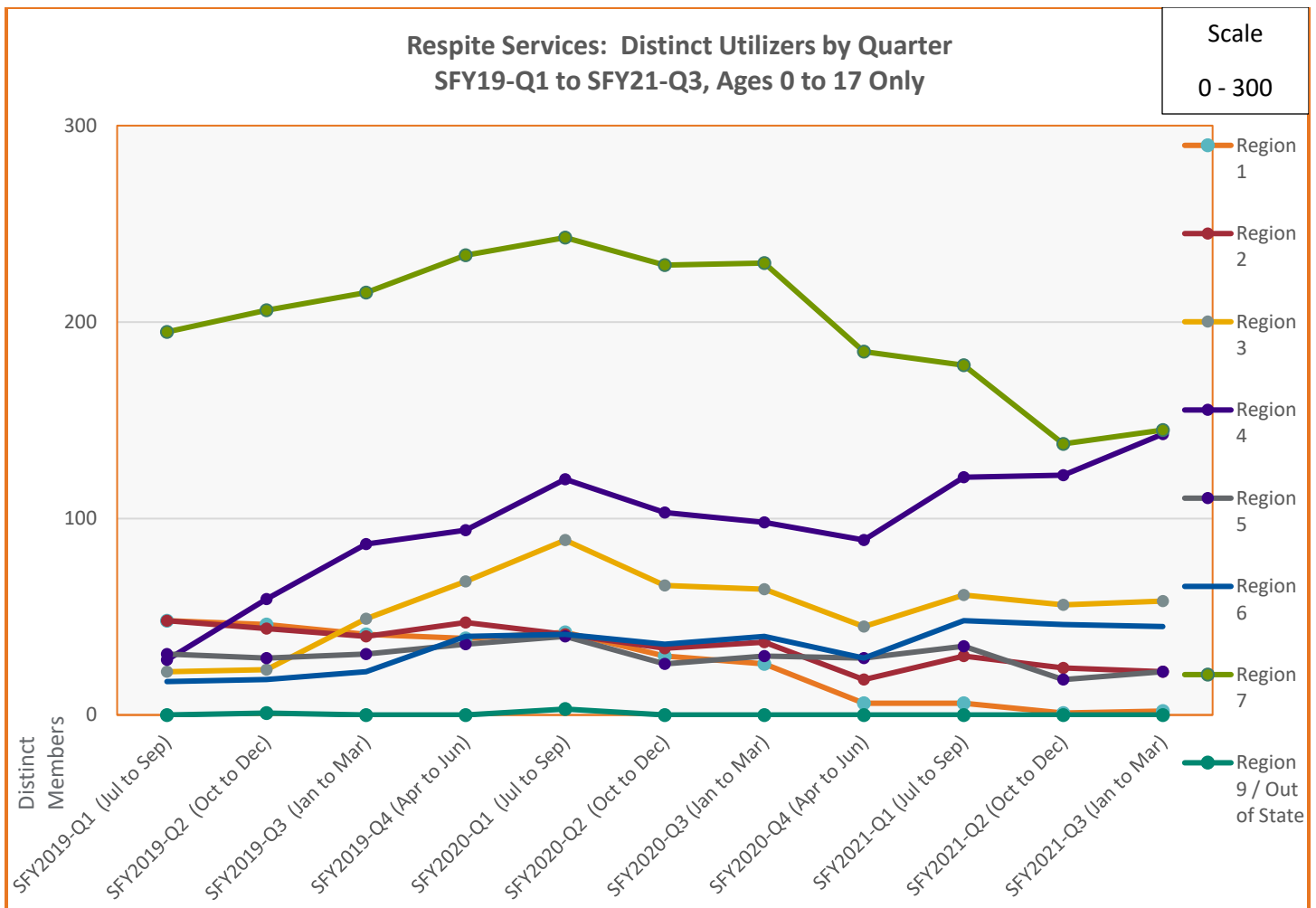
## Respite Services

**Table: Respite Services - Distinct service utilizers per Region/Quarter**

Description: This table displays distinct number of members between the ages of 0 to 17, by quarter who utilized the indicated service between 7/1/2018 to 3/31/2021. Note: Total distinct utilizer count represents an unduplicated (distinct) count of utilizers for the given state fiscal year across all quarters and/or regions combined. Data as of 5/13/21.

	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7	Region 9 / Out of State	Total
Service Date SFY-Qtr.	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers
SFY2019-Q1 (Jul to Sep)	48	48	22	28	31	17	195	0	389
SFY2019-Q2 (Oct to Dec)	46	44	23	59	29	18	206	1	426
SFY2019-Q3 (Jan to Mar)	41	40	49	87	31	22	215	0	485
SFY2019-Q4 (Apr to Jun)	39	47	68	94	36	40	234	0	558
<b>SFY2019 Distinct Total Utilizers</b>	<b>66</b>	<b>59</b>	<b>84</b>	<b>134</b>	<b>53</b>	<b>51</b>	<b>297</b>	<b>1</b>	<b>745</b>
SFY2020-Q1 (Jul to Sep)	42	41	89	120	40	41	243	3	619
SFY2020-Q2 (Oct to Dec)	30	34	66	103	26	36	229	0	524
SFY2020-Q3 (Jan to Mar)	26	37	64	98	30	40	230	0	525
SFY2020-Q4 (Apr to Jun)	6	18	45	89	29	29	185	0	401
<b>SFY2020 Distinct Total Utilizers</b>	<b>54</b>	<b>50</b>	<b>116</b>	<b>187</b>	<b>63</b>	<b>59</b>	<b>339</b>	<b>3</b>	<b>871</b>
SFY2021-Q1 (Jul to Sep)	6	30	61	121	35	48	178	0	479
SFY2021-Q2 (Oct to Dec)	1	24	56	122	18	46	138	0	405
SFY2021-Q3 (Jan to Mar)	2	22	58	143	22	45	145	0	437
<b>SFY2021 Distinct Total Utilizers</b>	<b>7</b>	<b>32</b>	<b>86</b>	<b>188</b>	<b>44</b>	<b>66</b>	<b>227</b>	<b>0</b>	<b>650</b>





### What is this data telling us?

Based on data from the first three quarters of SFY 2021 the use of Respite care through Optum has decreased in SFY 2021. This could be the result of COVID-19 requirements. Respite care through Optum seems most readily utilized in Regions 7 and 4. There is little or no research on predicting the need for Respite care although research in 2000 by Eric Bruns does indicate better outcomes for families receiving Respite. It is notable that while Region 7 and Region 4 have consistently utilized Respite services Region 1 appears to be very underserved.

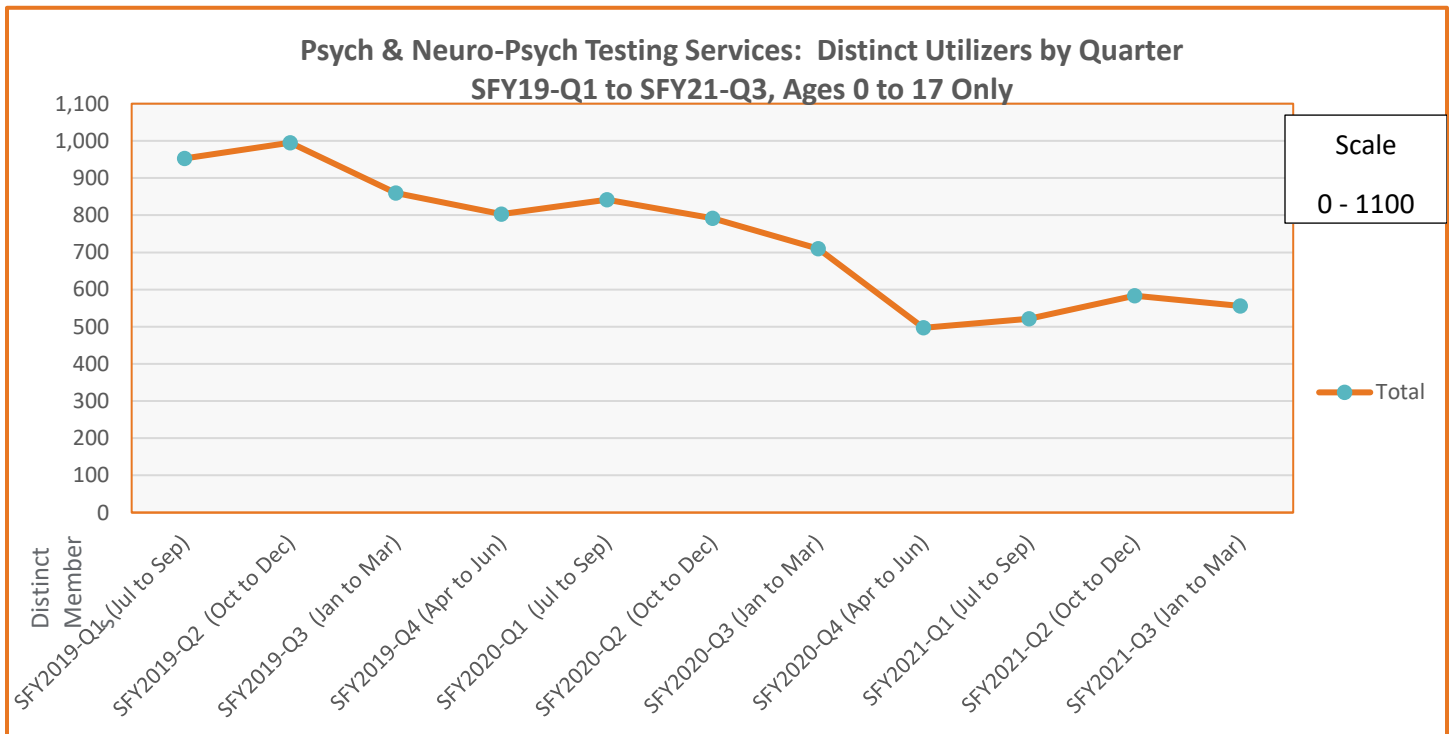
*Note - Respite care is also provided through vouchers by DBH page 55*

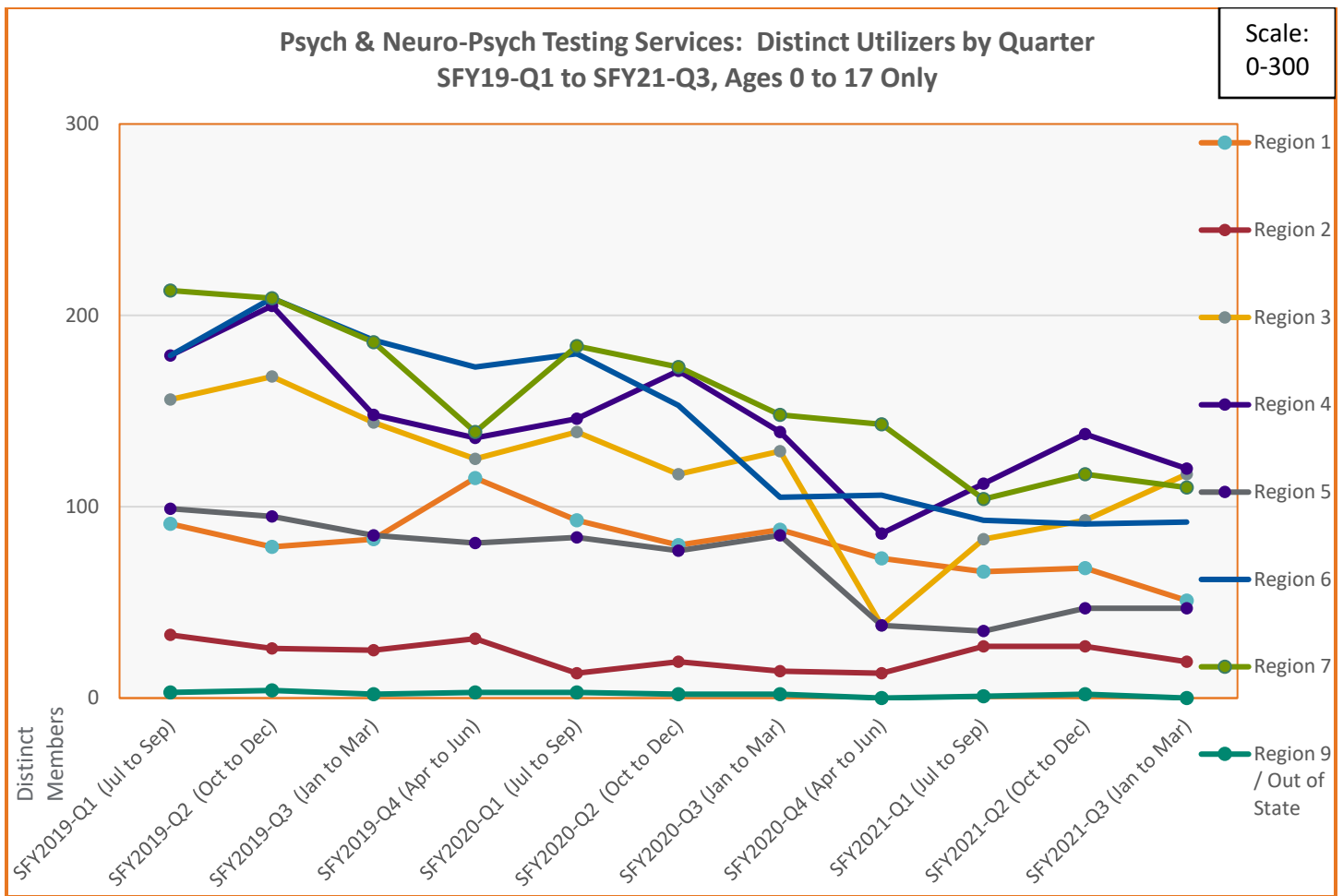
## Psychological & Neuro-Psychological Testing Services

**Table: Psych/Neuro-Psych Testing Services - Distinct service utilizers per Region/Quarter**

Description: This table displays distinct number of members between the ages of 0 to 17, by quarter who utilized the indicated service between 7/1/2018 to 3/31/2021. Note: Total distinct utilizer count represents an unduplicated (distinct) count of utilizers for the given state fiscal year across all quarters and/or regions combined. Data as of 5/13/21.

	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7	Region 9 / Out of State	Total
Service Date SFY-Qtr.	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers
SFY2019-Q1 (Jul to Sep)	91	33	156	179	99	179	213	3	953
SFY2019-Q2 (Oct to Dec)	79	26	168	205	95	209	209	4	995
SFY2019-Q3 (Jan to Mar)	83	25	144	148	85	187	186	2	860
SFY2019-Q4 (Apr to Jun)	115	31	125	136	81	173	139	3	803
SFY2019 Distinct Total Utilizers	359	100	545	623	326	567	624	12	3,156
SFY2020-Q1 (Jul to Sep)	93	13	139	146	84	180	184	3	842
SFY2020-Q2 (Oct to Dec)	80	19	117	171	77	153	173	2	792
SFY2020-Q3 (Jan to Mar)	88	14	129	139	85	105	148	2	710
SFY2020-Q4 (Apr to Jun)	73	13	38	86	38	106	143	0	497
SFY2020 Distinct Total Utilizers	330	57	403	523	254	461	632	7	2,667
SFY2021-Q1 (Jul to Sep)	66	27	83	112	35	93	104	1	521
SFY2021-Q2 (Oct to Dec)	68	27	93	138	47	91	117	2	583
SFY2021-Q3 (Jan to Mar)	51	19	117	120	47	92	110	0	556
SFY2021 Distinct Total Utilizers	183	61	283	362	107	243	324	3	1,566





### What is this data telling us?

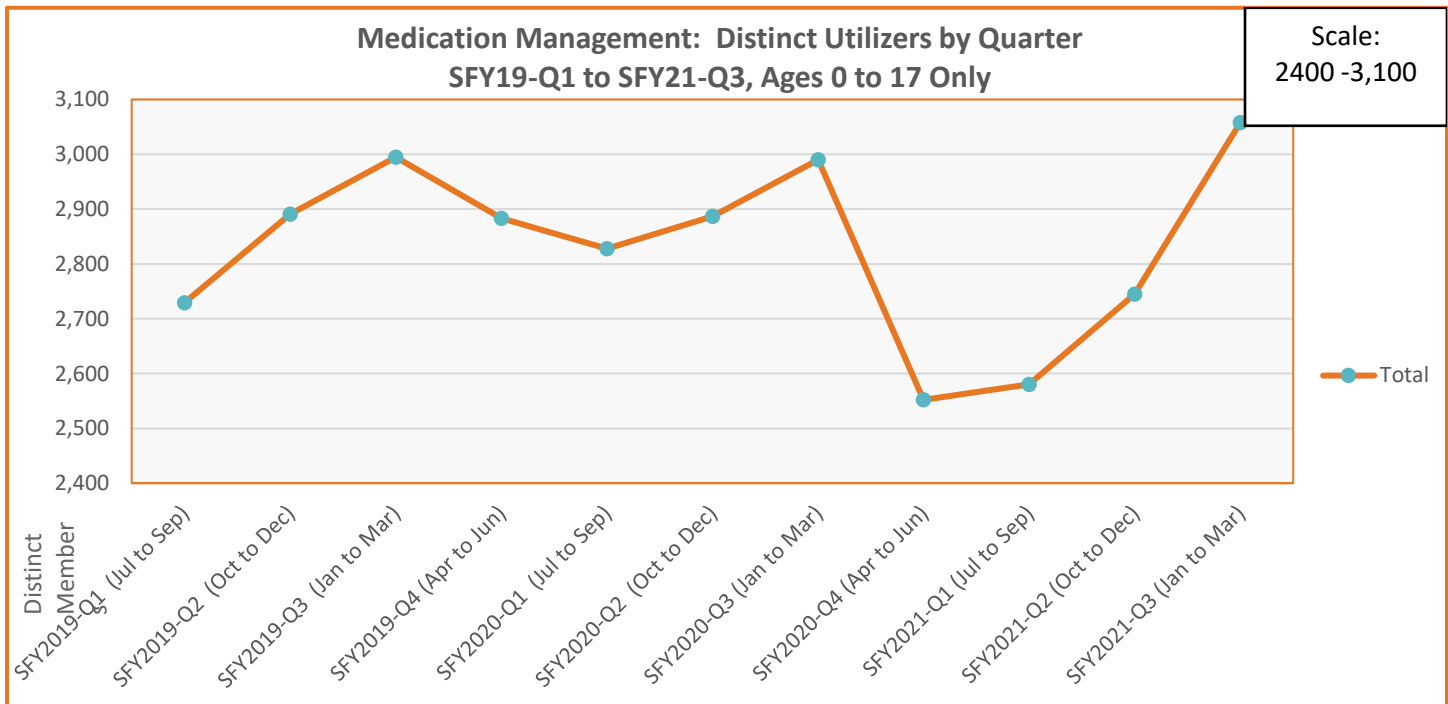
There is little or no research indicating a predicted number of children and youth who should have a psychological or neuropsychological assessment. The most notable issue with Psychological and Neuropsychological assessments for the first 3 quarters of SFY 2021 is that the number of assessments is substantially lower than in the previous 2 years. This change may be due in part to COVID-19. The QMIA will continue to monitor the trend of the use of Psychological and Neuropsychological assessments.

## Medication Management

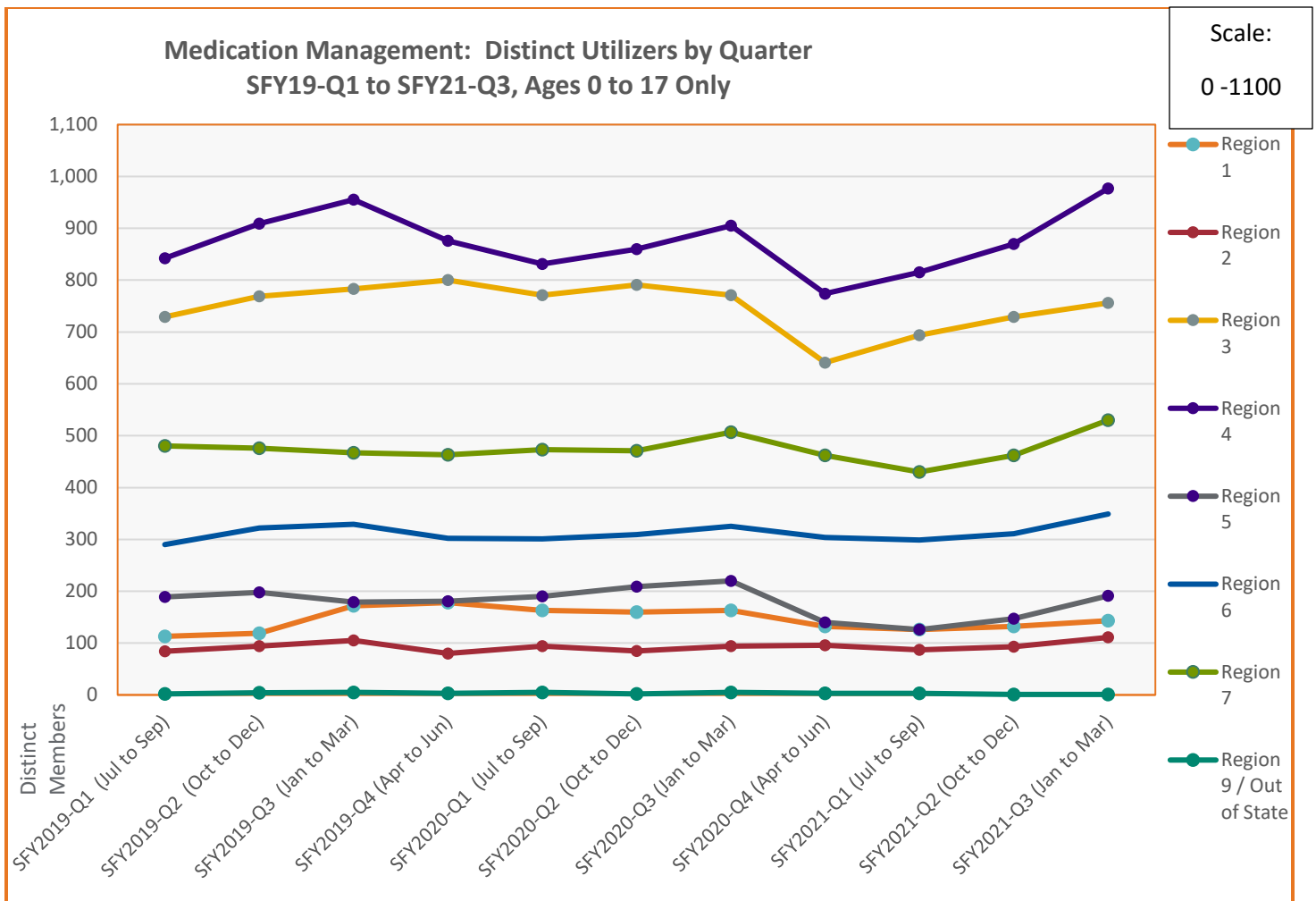
**Table 1: Medication Management - Distinct service utilizers per Region/Quarter**

Description: This table displays distinct number of members between the ages of 0 to 17, by quarter who utilized the indicated service between 7/1/2018 to 3/31/2021. Note: Total distinct utilizer count represents an unduplicated (distinct) count of utilizers for the given state fiscal year across all quarters and/or regions combined. Data as of 5/13/21.

	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7	Region 9 / Out of State	Total
Service Date SFY-Qtr.	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers
SFY2019-Q1 (Jul to Sep)	113	84	729	842	189	290	480	2	2,729
SFY2019-Q2 (Oct to Dec)	119	94	769	909	198	322	476	4	2,891
SFY2019-Q3 (Jan to Mar)	172	105	783	955	179	329	467	5	2,995
SFY2019-Q4 (Apr to Jun)	178	80	800	876	181	302	463	3	2,883
SFY2019 Distinct Total Utilizers	251	155	1,319	1,528	294	547	816	9	4,919
SFY2020-Q1 (Jul to Sep)	163	94	771	831	190	301	473	5	2,828
SFY2020-Q2 (Oct to Dec)	160	85	791	860	209	309	471	2	2,887
SFY2020-Q3 (Jan to Mar)	163	94	771	905	220	325	507	5	2,990
SFY2020-Q4 (Apr to Jun)	132	96	641	774	140	304	462	3	2,552
SFY2020 Distinct Total Utilizers	246	174	1,236	1,436	332	525	830	11	4,790
SFY2021-Q1 (Jul to Sep)	126	87	694	815	126	299	430	3	2,580
SFY2021-Q2 (Oct to Dec)	132	93	729	870	147	311	462	1	2,745
SFY2021-Q3 (Jan to Mar)	143	111	756	977	191	349	530	1	3,058
SFY2021 Distinct Total Utilizers	183	145	1,106	1,404	265	486	751	5	4,345







### What is this data telling us?

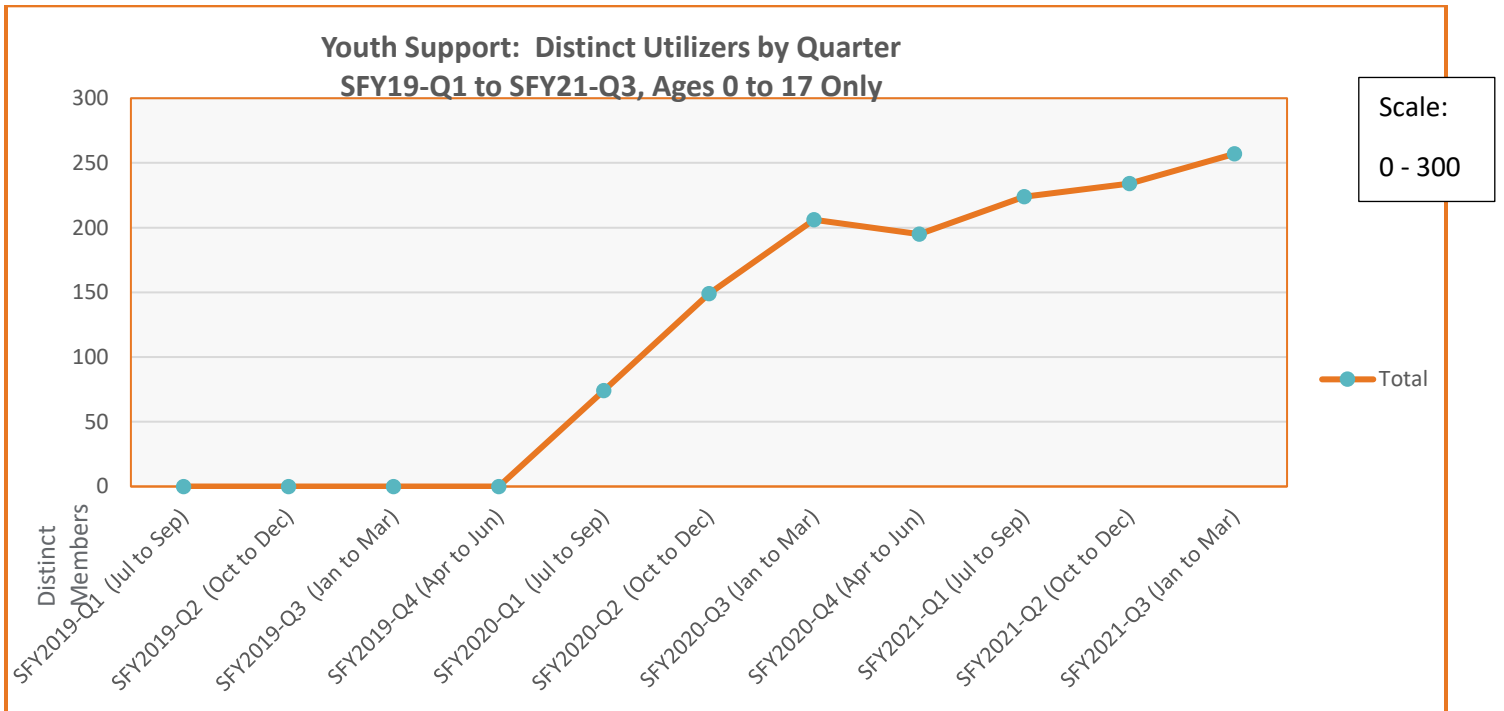
There is no resreach on the prediction for number of children and youth who need Medication Management. The number of children and youth receiving Medication Management has remained consistent over the past two years. The percentage of children and youth receiving Medication Management in Q3 of SFY 2021 compared to the total number of children receiving mental health service is 18.1% (3058/16871). QMIA will continue to monitor the trend of the use of Medication Management.

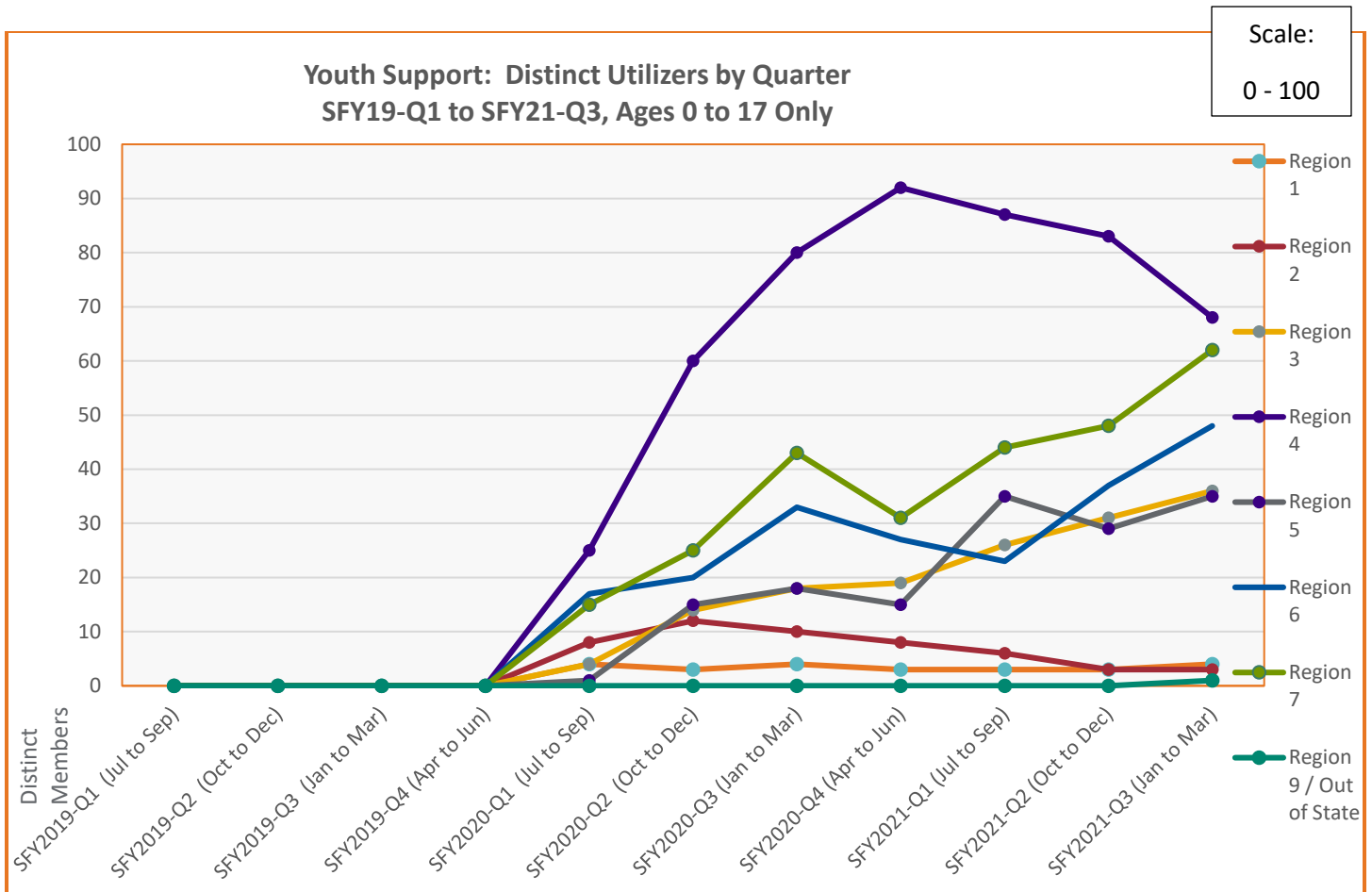
## Youth Support Services

**Table 1: Youth Support - Distinct service  
utilizers per Region/Quarter**

Description: This table displays distinct number of members between the ages of 0 to 17, by quarter who utilized the indicated service between 7/1/2018 to 3/31/2021. Note: Total distinct utilizer count represents an unduplicated (distinct) count of utilizers for the given state fiscal year across all quarters and/or regions combined. Data as of 5/13/21.

	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7	Region 9 / Out of State	Total
Service Date SFY-Qtr.	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers
SFY2019-Q1 (Jul to Sep)	0	0	0	0	0	0	0	0	0
SFY2019-Q2 (Oct to Dec)	0	0	0	0	0	0	0	0	0
SFY2019-Q3 (Jan to Mar)	0	0	0	0	0	0	0	0	0
SFY2019-Q4 (Apr to Jun)	0	0	0	0	0	0	0	0	0
<b>SFY2019 Distinct Total Utilizers</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
SFY2020-Q1 (Jul to Sep)	4	8	4	25	1	17	15	0	74
SFY2020-Q2 (Oct to Dec)	3	12	14	60	15	20	25	0	149
SFY2020-Q3 (Jan to Mar)	4	10	18	80	18	33	43	0	206
SFY2020-Q4 (Apr to Jun)	3	8	19	92	15	27	31	0	195
<b>SFY2020 Distinct Total Utilizers</b>	<b>9</b>	<b>20</b>	<b>29</b>	<b>126</b>	<b>26</b>	<b>57</b>	<b>64</b>	<b>0</b>	<b>331</b>
SFY2021-Q1 (Jul to Sep)	3	6	26	87	35	23	44	0	224
SFY2021-Q2 (Oct to Dec)	3	3	31	83	29	37	48	0	234
SFY2021-Q3 (Jan to Mar)	4	3	36	68	35	48	62	1	257
<b>SFY2021 Distinct Total Utilizers</b>	<b>4</b>	<b>8</b>	<b>43</b>	<b>114</b>	<b>53</b>	<b>69</b>	<b>85</b>	<b>1</b>	<b>377</b>





### What is this data telling us?

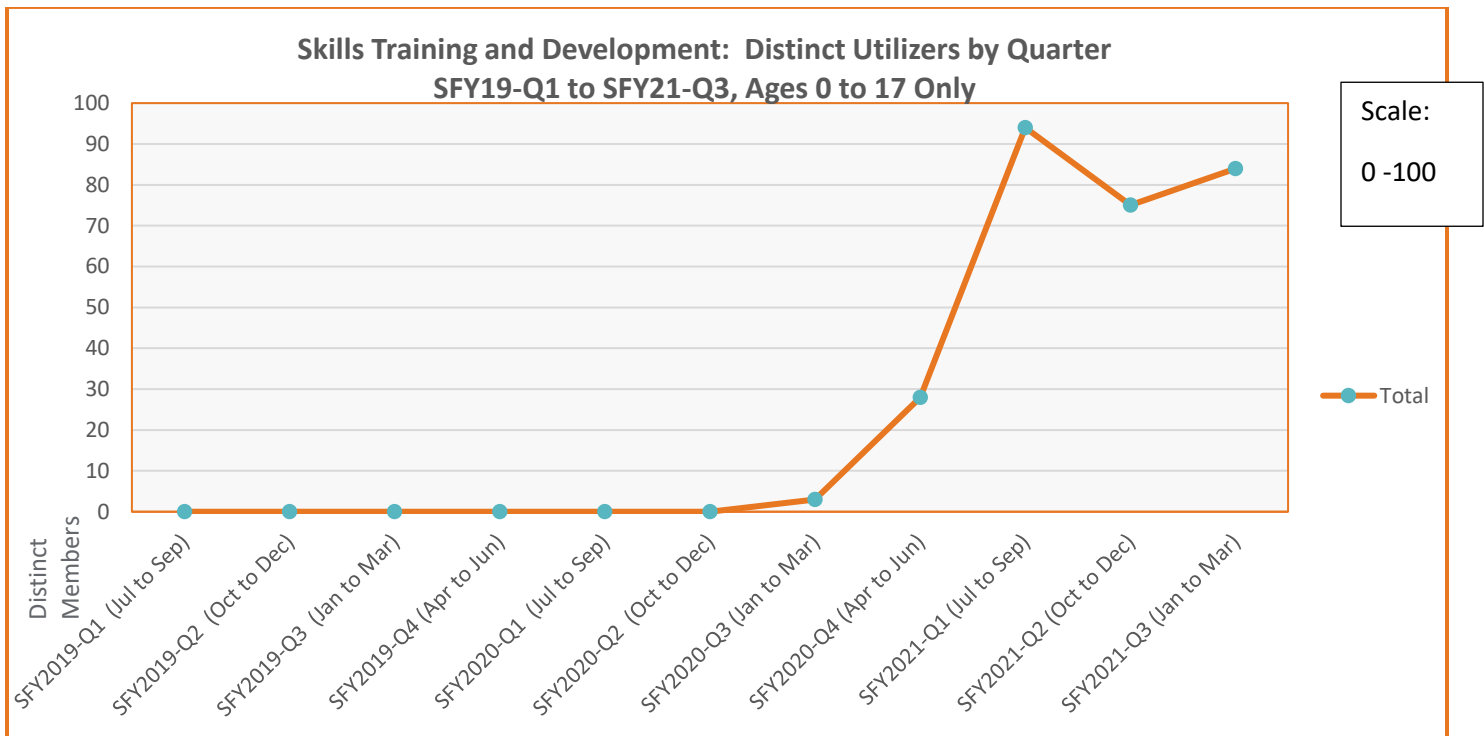
There is no research indicating expected need for Youth Peer Support Services. Youth Peer Support Services began to be available in SFY 2020 and have been utilized in every region, however the amount of services utilized in Regions 1 and 2 seems very limited. It is notable that Youth Support Services have continued to increase in the first two quarters of SFY 2021. QMIA will continue to monitor the trends in use of Peer Support Services.

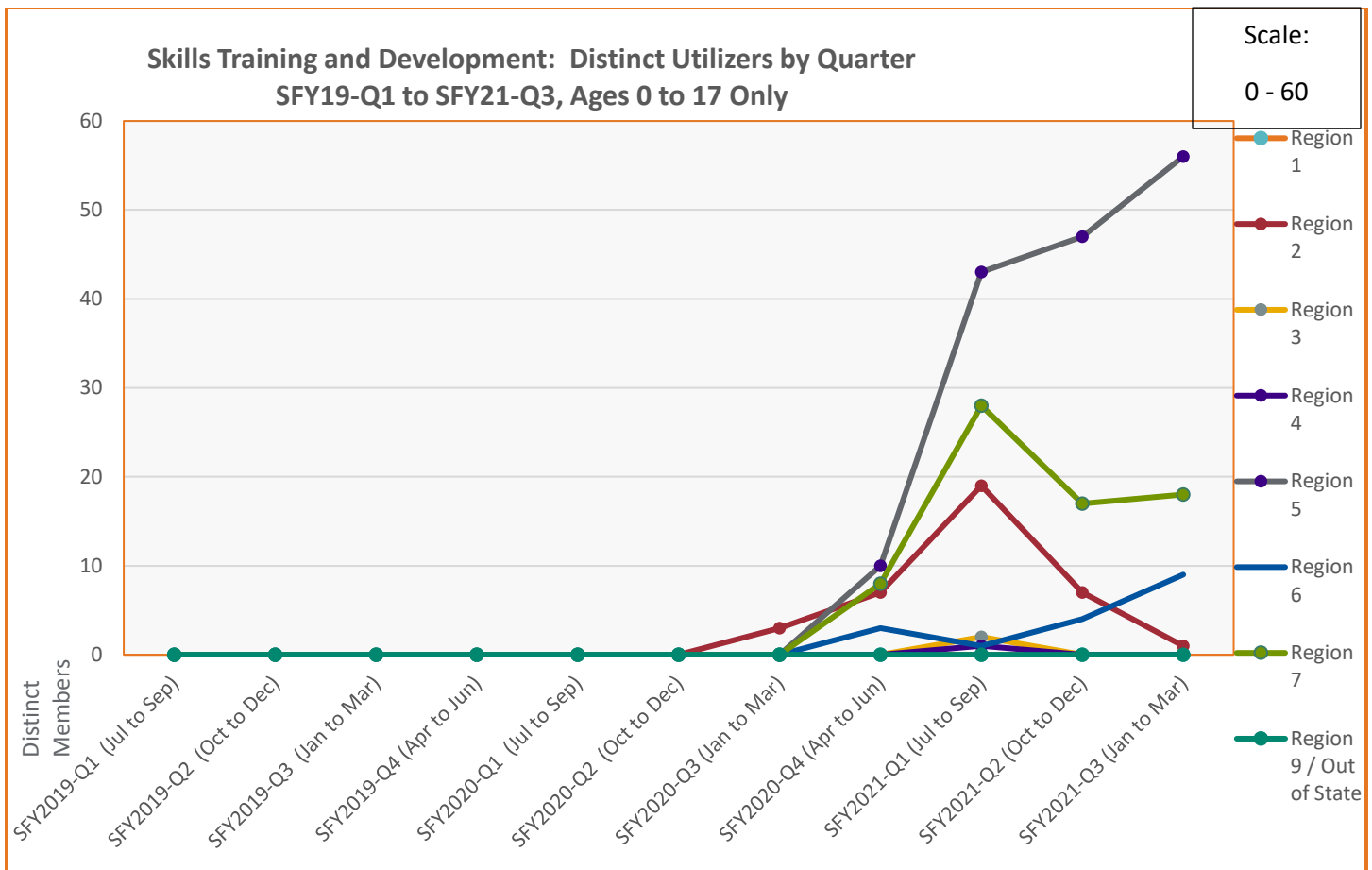
## Skills Training and Development (STAD)

**Table 1: Skills Training and Development (STAD) - Distinct service utilizers per Region/Quarter**

Description: This table displays distinct number of members between the ages of 0 to 17, by quarter who utilized the indicated service between 7/1/2018 to 3/31/2021. Note: Total distinct utilizer count represents an unduplicated (distinct) count of utilizers for the given state fiscal year across all quarters and/or regions combined. Data as of 5/13/21.

	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7	Region 9 / Out of State	Total
Service Date SFY-Qtr.	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers
SFY2019-Q1 (Jul to Sep)	0	0	0	0	0	0	0	0	0
SFY2019-Q2 (Oct to Dec)	0	0	0	0	0	0	0	0	0
SFY2019-Q3 (Jan to Mar)	0	0	0	0	0	0	0	0	0
SFY2019-Q4 (Apr to Jun)	0	0	0	0	0	0	0	0	0
SFY2019 Distinct Total Utilizers	0	0	0	0	0	0	0	0	0
SFY2020-Q1 (Jul to Sep)	0	0	0	0	0	0	0	0	0
SFY2020-Q2 (Oct to Dec)	0	0	0	0	0	0	0	0	0
SFY2020-Q3 (Jan to Mar)	0	3	0	0	0	0	0	0	3
SFY2020-Q4 (Apr to Jun)	0	7	0	0	10	3	8	0	28
SFY2020 Distinct Total Utilizers	0	10	0	0	10	3	8	0	31
SFY2021-Q1 (Jul to Sep)	0	19	2	1	43	1	28	0	94
SFY2021-Q2 (Oct to Dec)	0	7	0	0	47	4	17	0	75
SFY2021-Q3 (Jan to Mar)	0	1	0	0	56	9	18	0	84
SFY2021 Distinct Total Utilizers	0	20	2	1	82	9	38	0	152





#### What is this data telling us?

There is no research indicating expected need for Skills Training and Development (STAD). STAD services appear to be very limited across the state- with 0 in Region 1, and only 2 in Region 3, and 1 in Region 4. It is notable that the amount of STAD services is increasing in the first 3 quarters of SFY 2021.

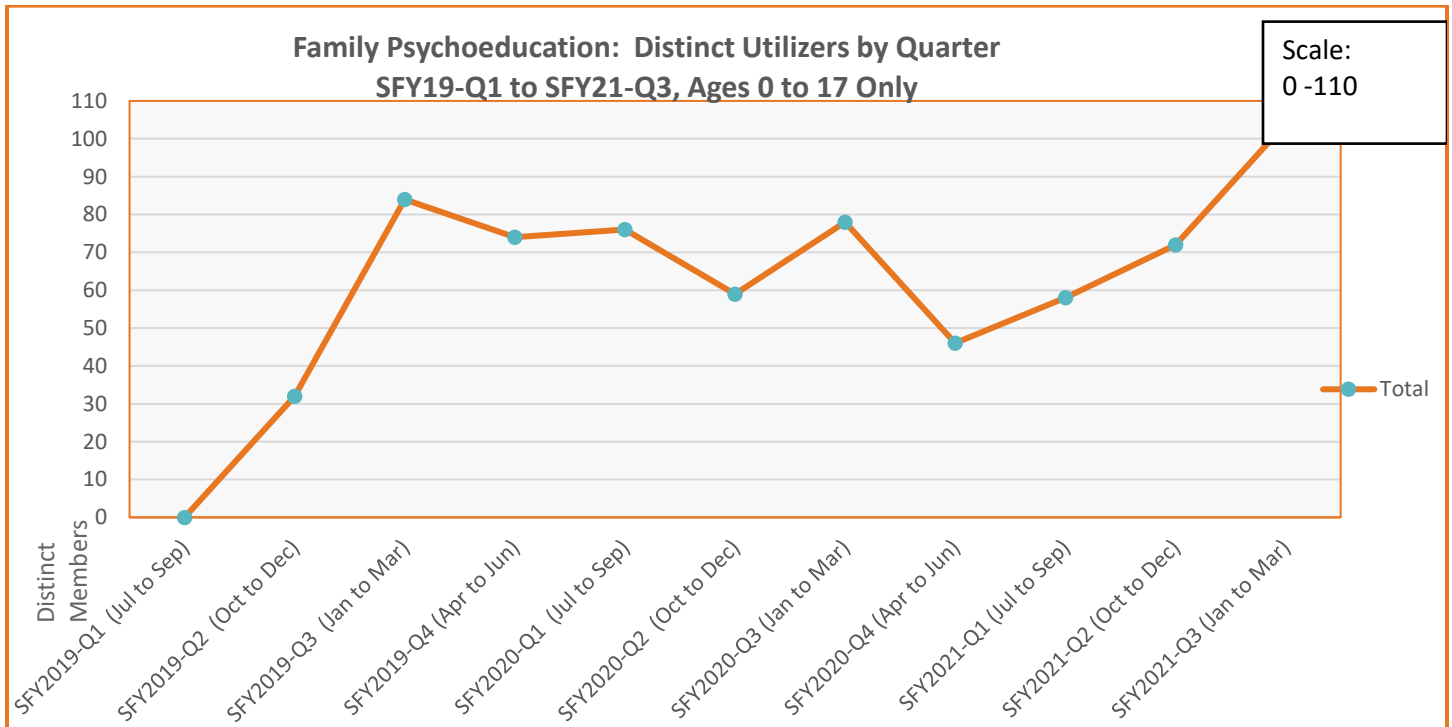
QMIA will continue to monitor the trends in use of STAD.

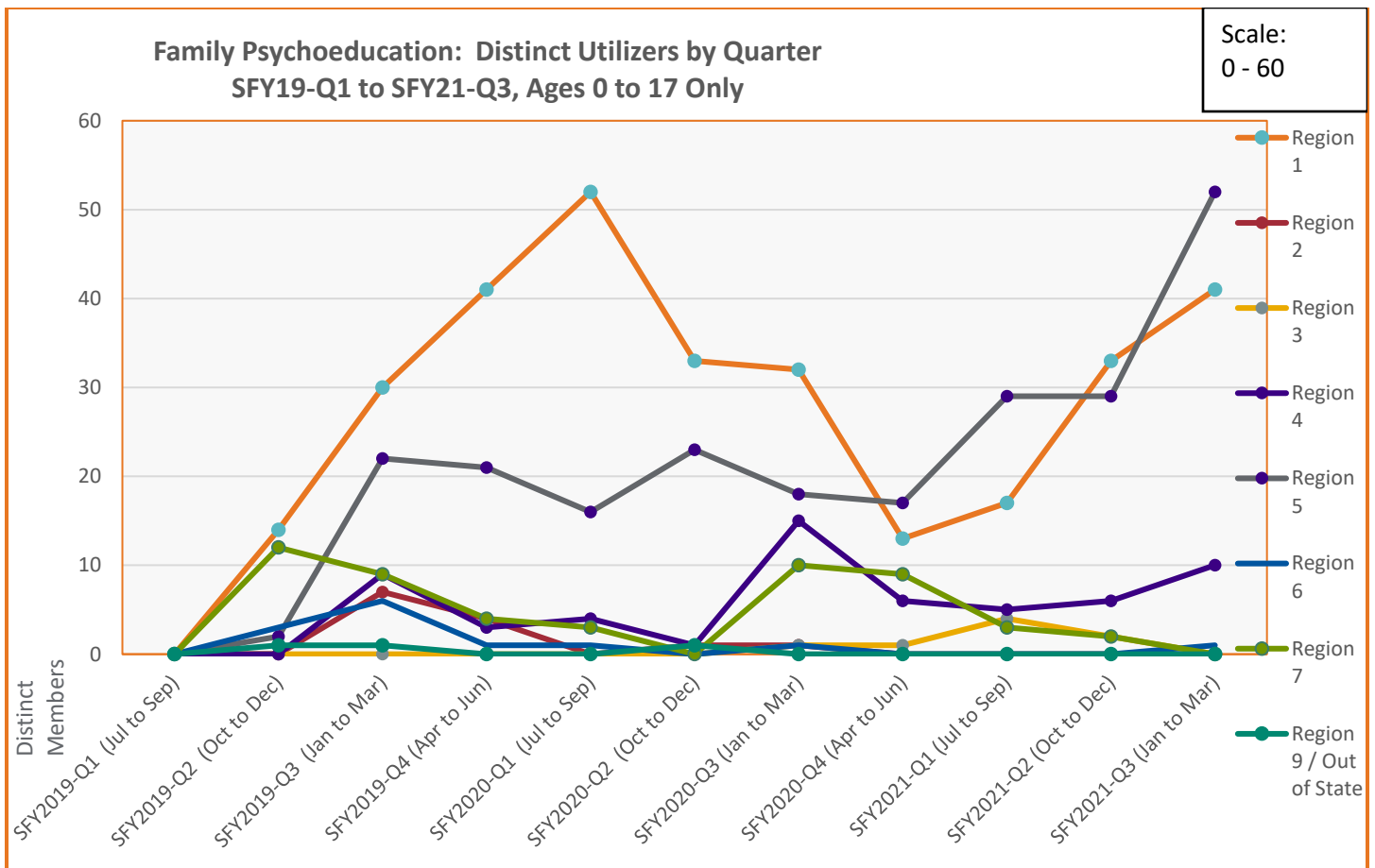
## Family Psychoeducation

**Table 1: Family Psychoeducation - Distinct service utilizers per Region/Quarter**

Description: This table displays distinct number of members between the ages of 0 to 17, by quarter who utilized the indicated service between 7/1/2018 to 3/31/2021. Note: Total distinct utilizer count represents an unduplicated (distinct) count of utilizers for the given state fiscal year across all quarters and/or regions combined. Data as of 5/13/21.

	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7	Region 9 / Out of State	Total
Service Date SFY-Qtr.	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers
SFY2019-Q1 (Jul to Sep)	0	0	0	0	0	0	0	0	0
SFY2019-Q2 (Oct to Dec)	14	0	0	0	2	3	12	1	32
SFY2019-Q3 (Jan to Mar)	30	7	0	9	22	6	9	1	84
SFY2019-Q4 (Apr to Jun)	41	4	0	3	21	1	4	0	74
SFY2019 Distinct Total Utilizers	57	10	0	12	45	10	23	1	158
SFY2020-Q1 (Jul to Sep)	52	0	0	4	16	1	3	0	76
SFY2020-Q2 (Oct to Dec)	33	1	0	1	23	0	0	1	59
SFY2020-Q3 (Jan to Mar)	32	1	1	15	18	1	10	0	78
SFY2020-Q4 (Apr to Jun)	13	0	1	6	17	0	9	0	46
SFY2020 Distinct Total Utilizers	73	2	1	24	72	2	22	1	197
SFY2021-Q1 (Jul to Sep)	17	0	4	5	29	0	3	0	58
SFY2021-Q2 (Oct to Dec)	33	0	2	6	29	0	2	0	72
SFY2021-Q3 (Jan to Mar)	41	0	0	10	52	1	0	0	104
SFY2021 Distinct Total Utilizers	56	0	6	21	104	1	5	0	193





#### What is this data telling us?

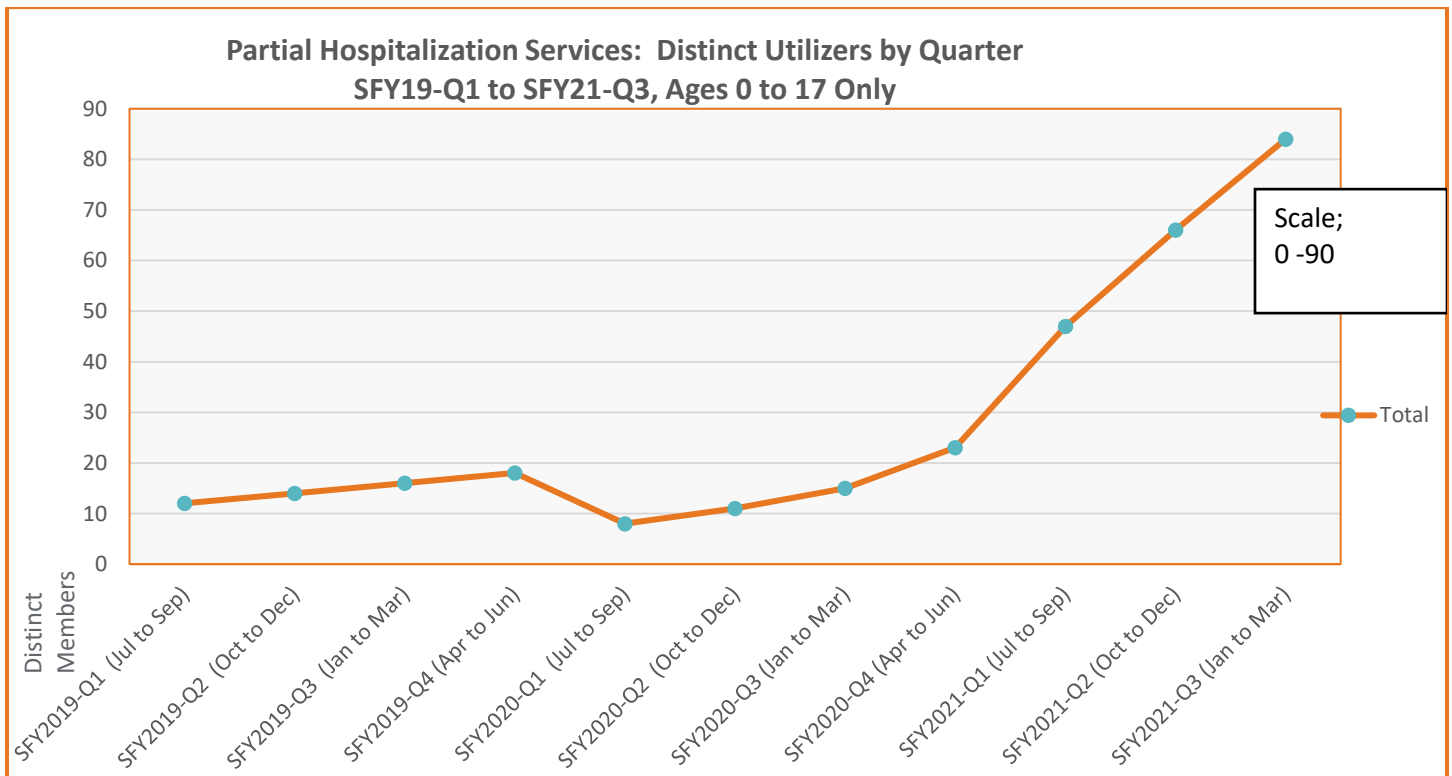
There is no research indicating expected need for Family Psychoeducation. There are no services in Region 2, or 5 and very limited services in 3, 4, 7. QMIA will continue to monitor the trends in use Family Psychoeducation.

## Partial Hospitalization Services (PHP)

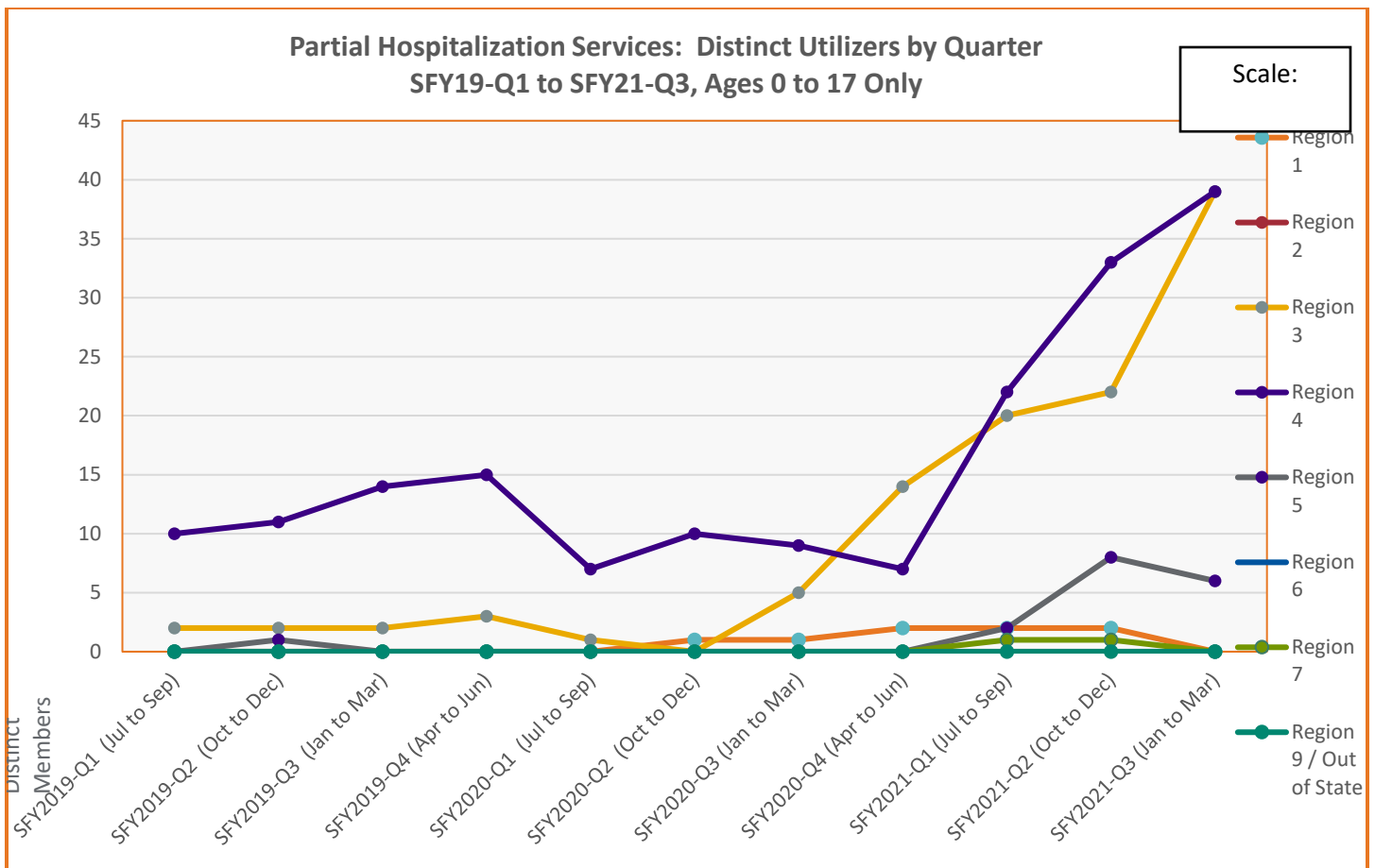
**Table 1: Partial Hospitalization Services - Distinct service utilizers per Region/Quarter**

Description: This table displays distinct number of members between the ages of 0 to 17, by quarter who utilized the indicated service between 7/1/2018 to 3/31/2021. Note: Total distinct utilizer count represents an unduplicated (distinct) count of utilizers for the given state fiscal year across all quarters and/or regions combined. Data as of 5/13/21.

	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7	Region 9 / Out of State	Total
Service Date SFY-Qtr.	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers
SFY2019-Q1 (Jul to Sep)	0	0	2	10	0	0	0	0	12
SFY2019-Q2 (Oct to Dec)	0	0	2	11	1	0	0	0	14
SFY2019-Q3 (Jan to Mar)	0	0	2	14	0	0	0	0	16
SFY2019-Q4 (Apr to Jun)	0	0	3	15	0	0	0	0	18
SFY2019 Distinct Total Utilizers	0	0	6	36	1	0	0	0	43
SFY2020-Q1 (Jul to Sep)	0	0	1	7	0	0	0	0	8
SFY2020-Q2 (Oct to Dec)	1	0	0	10	0	0	0	0	11
SFY2020-Q3 (Jan to Mar)	1	0	5	9	0	0	0	0	15
SFY2020-Q4 (Apr to Jun)	2	0	14	7	0	0	0	0	23
SFY2020 Distinct Total Utilizers	4	0	20	27	0	0	0	0	51
SFY2021-Q1 (Jul to Sep)	2	0	20	22	2	0	1	0	47
SFY2021-Q2 (Oct to Dec)	2	0	22	33	8	0	1	0	66
SFY2021-Q3 (Jan to Mar)	0	0	39	39	6	0	0	0	84
SFY2021 Distinct Total Utilizers	3	0	66	76	11	0	1	0	157







#### What is this data telling us?

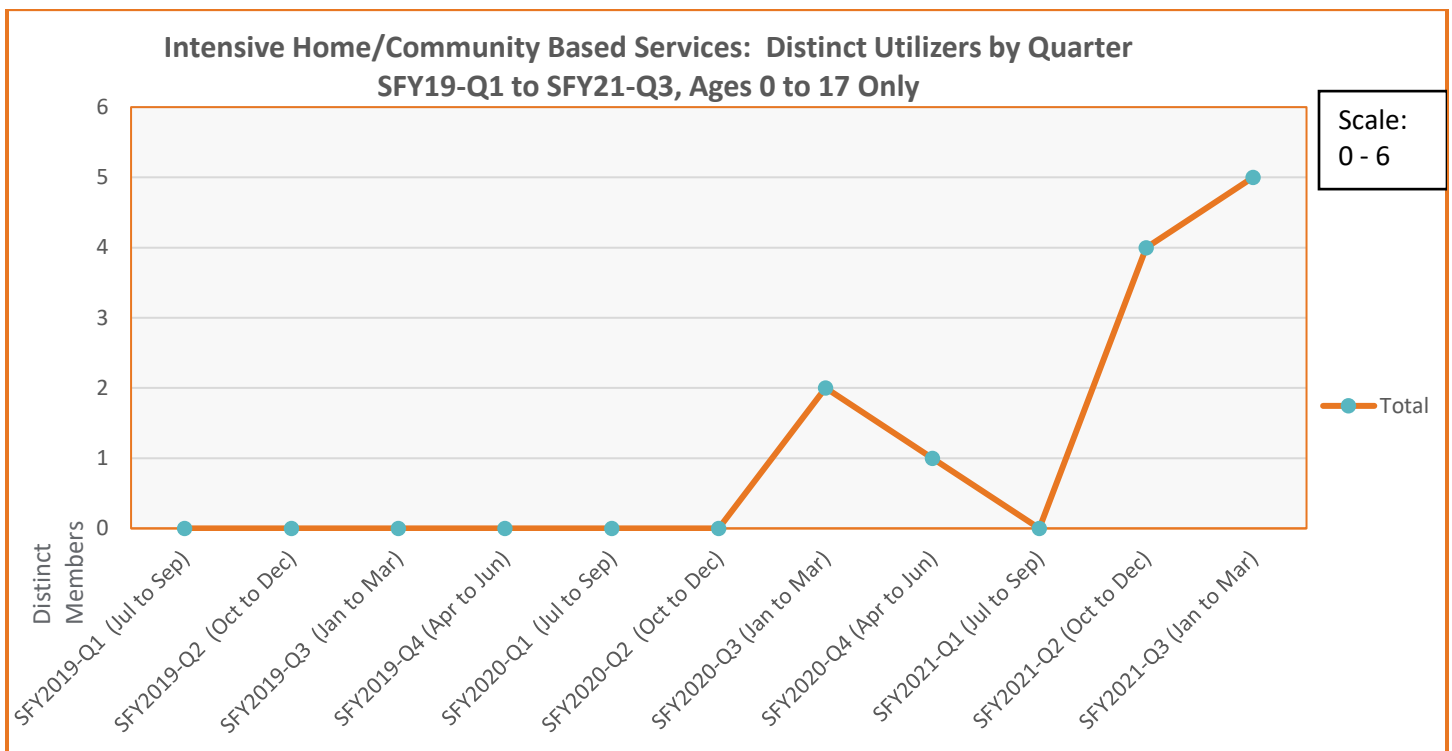
There is no research indicating expected need for Partial Hospitalization. There are no services in Region 2, or 6 and very limited services in 1, 5, 7. QMIA will continue to monitor the trends in use of Partial Hospitalization.

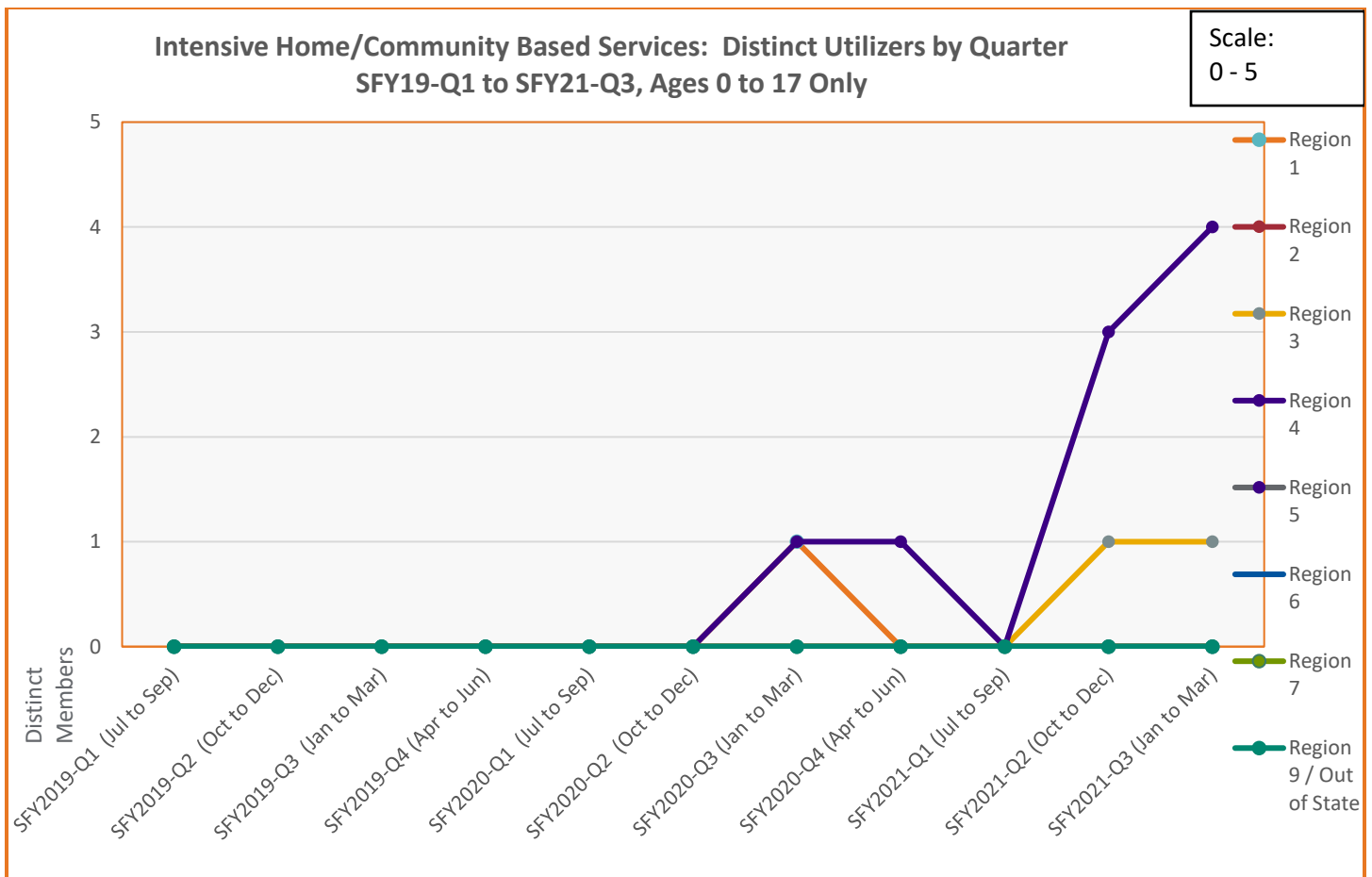
## Intensive Home/Community Based Services (IHCBS)

**Table 1: IHCBS - Distinct service utilizers per Region/Quarter**

Description: This table displays distinct number of members between the ages of 0 to 17, by quarter who utilized the indicated service between 7/1/2018 to 3/31/2021. Note: Total distinct utilizer count represents an unduplicated (distinct) count of utilizers for the given state fiscal year across all quarters and/or regions combined. Data as of 5/13/21.

	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7	Region 9 / Out of State	Total
Service Date SFY-Qtr.	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers
SFY2019-Q1 (Jul to Sep)	0	0	0	0	0	0	0	0	0
SFY2019-Q2 (Oct to Dec)	0	0	0	0	0	0	0	0	0
SFY2019-Q3 (Jan to Mar)	0	0	0	0	0	0	0	0	0
SFY2019-Q4 (Apr to Jun)	0	0	0	0	0	0	0	0	0
SFY2019 Distinct Total Utilizers	0	0	0	0	0	0	0	0	0
SFY2020-Q1 (Jul to Sep)	0	0	0	0	0	0	0	0	0
SFY2020-Q2 (Oct to Dec)	0	0	0	0	0	0	0	0	0
SFY2020-Q3 (Jan to Mar)	1	0	0	1	0	0	0	0	2
SFY2020-Q4 (Apr to Jun)	0	0	0	1	0	0	0	0	1
SFY2020 Distinct Total Utilizers	1	0	0	1	0	0	0	0	2
SFY2021-Q1 (Jul to Sep)	0	0	0	0	0	0	0	0	0
SFY2021-Q2 (Oct to Dec)	0	0	1	3	0	0	0	0	4
SFY2021-Q3 (Jan to Mar)	0	0	1	4	0	0	0	0	5
SFY2021 Distinct Total Utilizers	0	0	1	6	0	0	0	0	7





#### What is this data telling us?

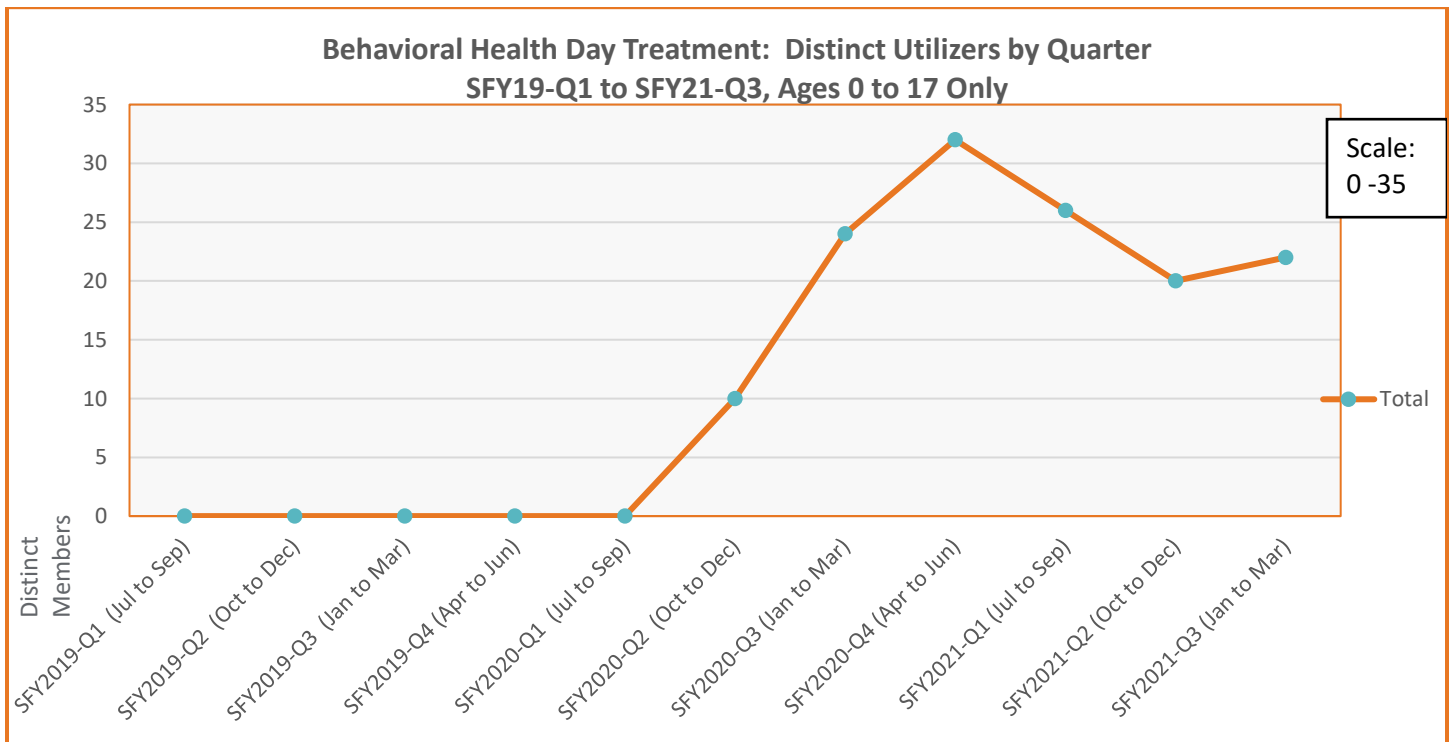
There is no research indicating expected need for Intensive Home/Community Based Services. There are very limited services across the state with only services in Regions 3 and 4. QMIA will continue to monitor the trends in use of Intensive/Home and Community based services.

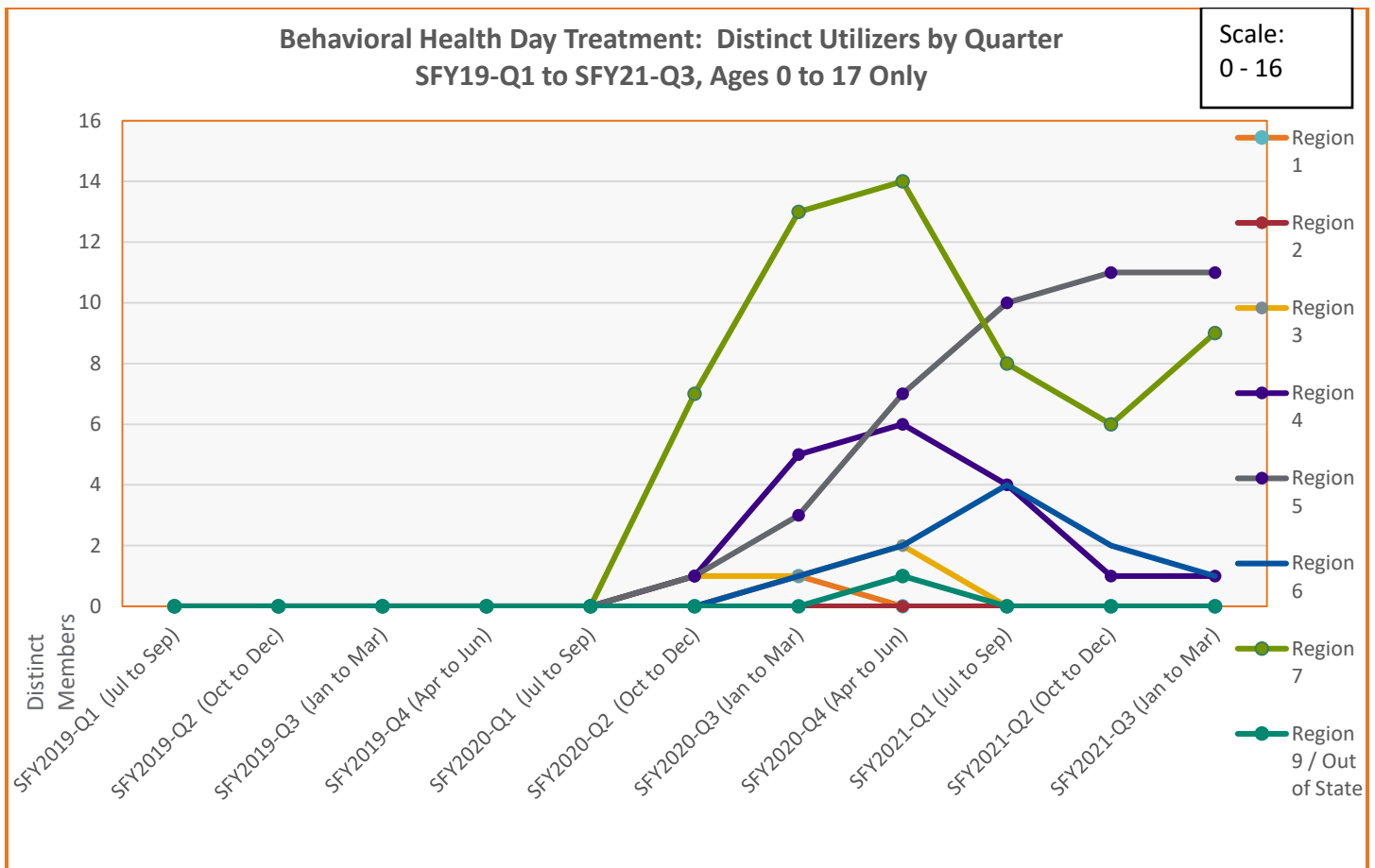
## Behavioral Health Day Treatment

**Table 1: Day Treatment - Distinct service utilizers per Region/Quarter**

Description: This table displays distinct number of members between the ages of 0 to 17, by quarter who utilized the indicated service between 7/1/2018 to 3/31/2021. Note: Total distinct utilizer count represents an unduplicated (distinct) count of utilizers for the given state fiscal year across all quarters and/or regions combined. Data as of 5/13/21.

	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7	Region 9 / Out of State	Total
Service Date SFY-Qtr.	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers
SFY2019-Q1 (Jul to Sep)	0	0	0	0	0	0	0	0	0
SFY2019-Q2 (Oct to Dec)	0	0	0	0	0	0	0	0	0
SFY2019-Q3 (Jan to Mar)	0	0	0	0	0	0	0	0	0
SFY2019-Q4 (Apr to Jun)	0	0	0	0	0	0	0	0	0
SFY2019 Distinct Total Utilizers	0	0	0	0	0	0	0	0	0
SFY2020-Q1 (Jul to Sep)	0	0	0	0	0	0	0	0	0
SFY2020-Q2 (Oct to Dec)	0	0	1	1	1	0	7	0	10
SFY2020-Q3 (Jan to Mar)	1	0	1	5	3	1	13	0	24
SFY2020-Q4 (Apr to Jun)	0	0	2	6	7	2	14	1	32
SFY2020 Distinct Total Utilizers	1	0	2	7	8	3	20	1	42
SFY2021-Q1 (Jul to Sep)	0	0	0	4	10	4	8	0	26
SFY2021-Q2 (Oct to Dec)	0	0	0	1	11	2	6	0	20
SFY2021-Q3 (Jan to Mar)	0	0	0	1	11	1	9	0	22
SFY2021 Distinct Total Utilizers	0	0	0	6	20	5	17	0	48





#### What is this data telling us?

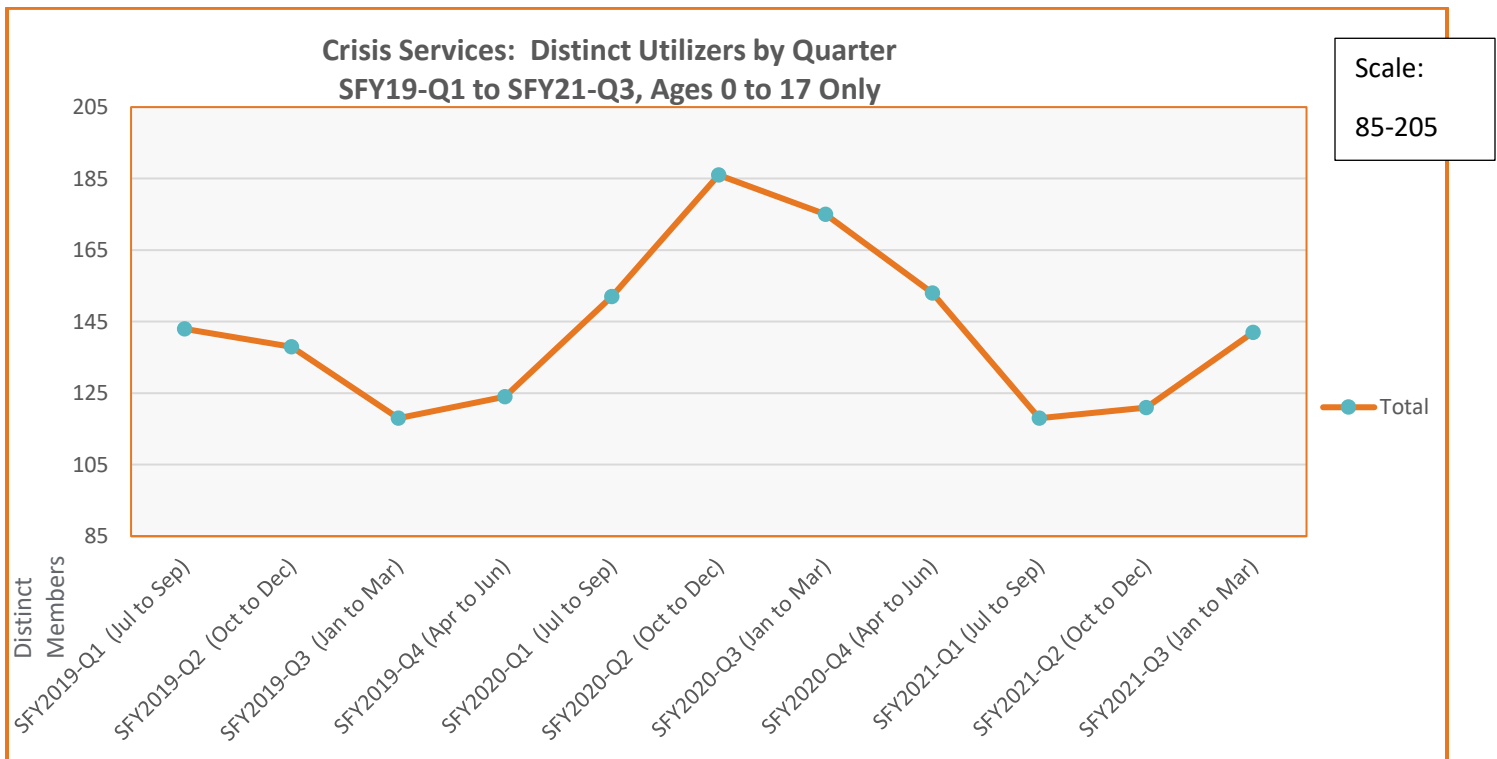
There is no research indicating expected need for Day Treatment. There are no services in Regions 1, 2, or 3 and very limited services in 4, 5, 6 and 7. QMIA will continue to monitor the trends in use of Behavioral Health Day Treatment.

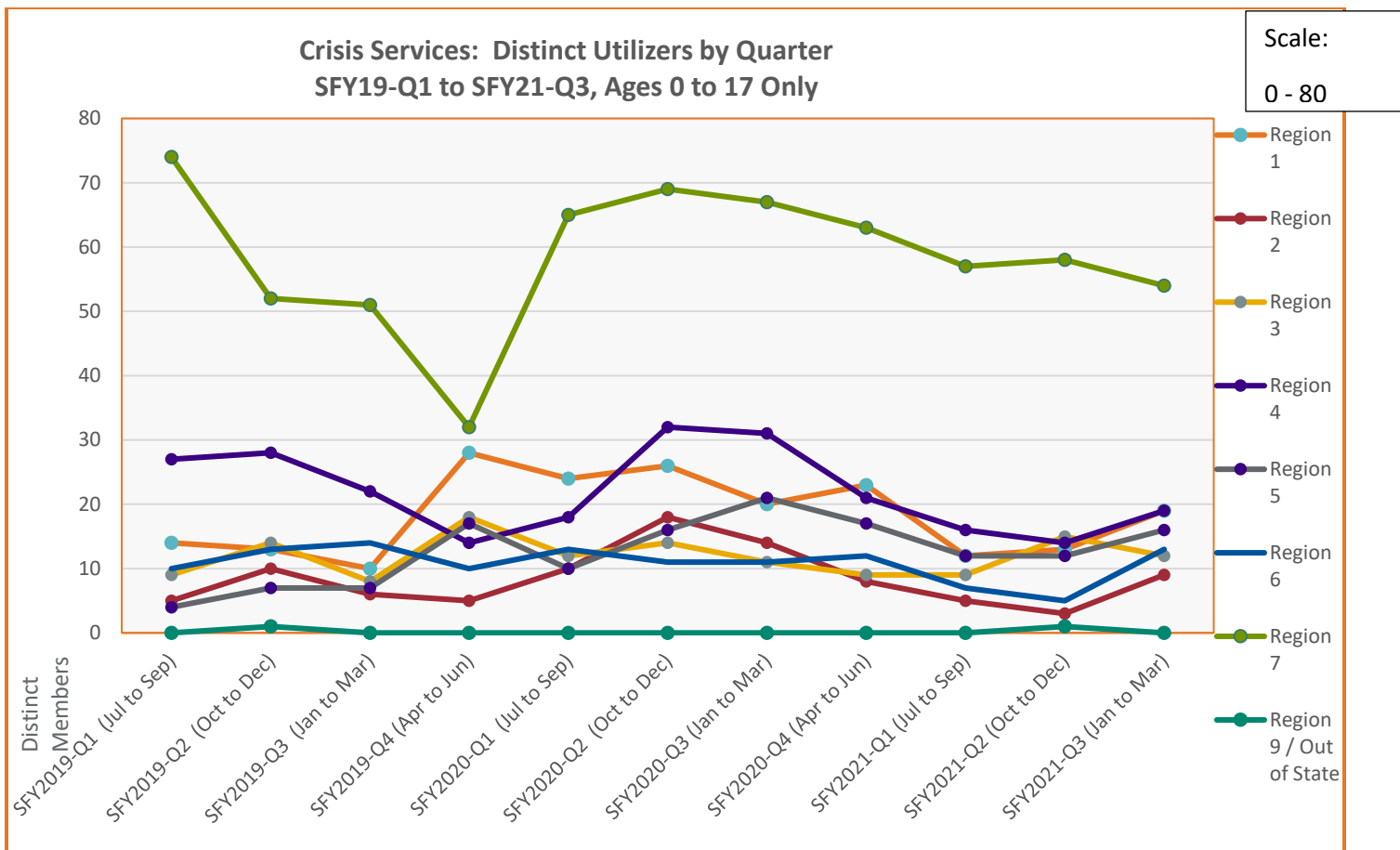
## Crisis Services

**Table 1: Crisis Services - Distinct service utilizers per Region/Quarter**

Description: This table displays distinct number of members between the ages of 0 to 17, by quarter who utilized the indicated service between 7/1/2018 to 3/31/2021. Note: Total distinct utilizer count represents an unduplicated (distinct) count of utilizers for the given state fiscal year across all quarters and/or regions combined. Data as of 5/13/21.

	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7	Region 9 / Out of State	Total
Service Date SFY-Qtr.	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers
SFY2019-Q1 (Jul to Sep)	14	5	9	27	4	10	74	0	143
SFY2019-Q2 (Oct to Dec)	13	10	14	28	7	13	52	1	138
SFY2019-Q3 (Jan to Mar)	10	6	8	22	7	14	51	0	118
SFY2019-Q4 (Apr to Jun)	28	5	18	14	17	10	32	0	124
<b>SFY2019 Distinct Total Utilizers</b>	<b>56</b>	<b>23</b>	<b>47</b>	<b>73</b>	<b>33</b>	<b>42</b>	<b>180</b>	<b>1</b>	<b>455</b>
SFY2020-Q1 (Jul to Sep)	24	10	12	18	10	13	65	0	152
SFY2020-Q2 (Oct to Dec)	26	18	14	32	16	11	69	0	186
SFY2020-Q3 (Jan to Mar)	20	14	11	31	21	11	67	0	175
SFY2020-Q4 (Apr to Jun)	23	8	9	21	17	12	63	0	153
<b>SFY2020 Distinct Total Utilizers</b>	<b>75</b>	<b>43</b>	<b>45</b>	<b>95</b>	<b>61</b>	<b>46</b>	<b>239</b>	<b>0</b>	<b>604</b>
SFY2021-Q1 (Jul to Sep)	12	5	9	16	12	7	57	0	118
SFY2021-Q2 (Oct to Dec)	13	3	15	14	12	5	58	1	121
SFY2021-Q3 (Jan to Mar)	19	9	12	19	16	13	54	0	142
<b>SFY2021 Distinct Total Utilizers</b>	<b>38</b>	<b>16</b>	<b>31</b>	<b>49</b>	<b>38</b>	<b>23</b>	<b>166</b>	<b>1</b>	<b>362</b>





#### What is this data telling us?

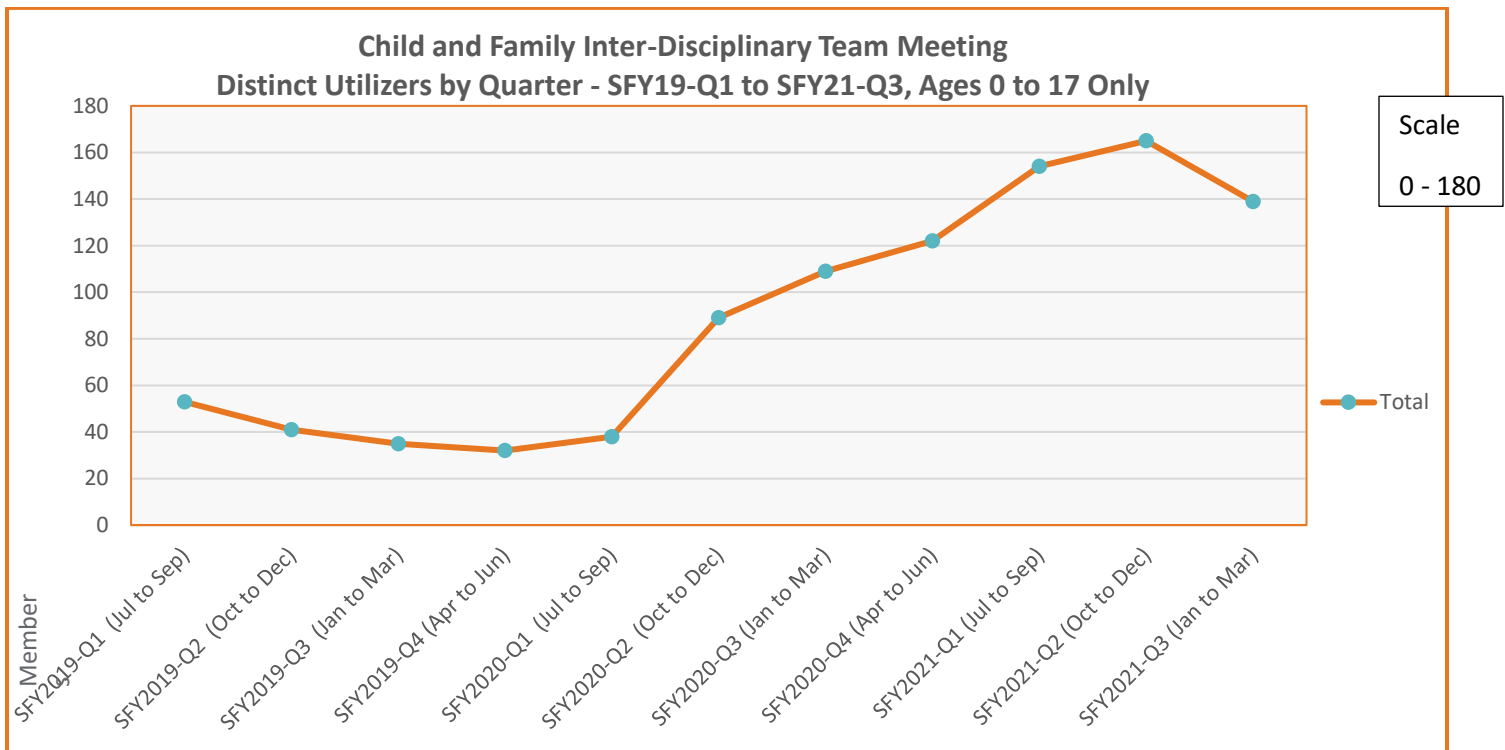
There is no research indicating expected need for Crisis services. There are crisis services in every region, but they remain very limited and have decreased this SFY in comparison to previous years. QMIA will continue to monitor the trends in use of Crisis Services.

## Child and Family Inter-Disciplinary Team Meeting

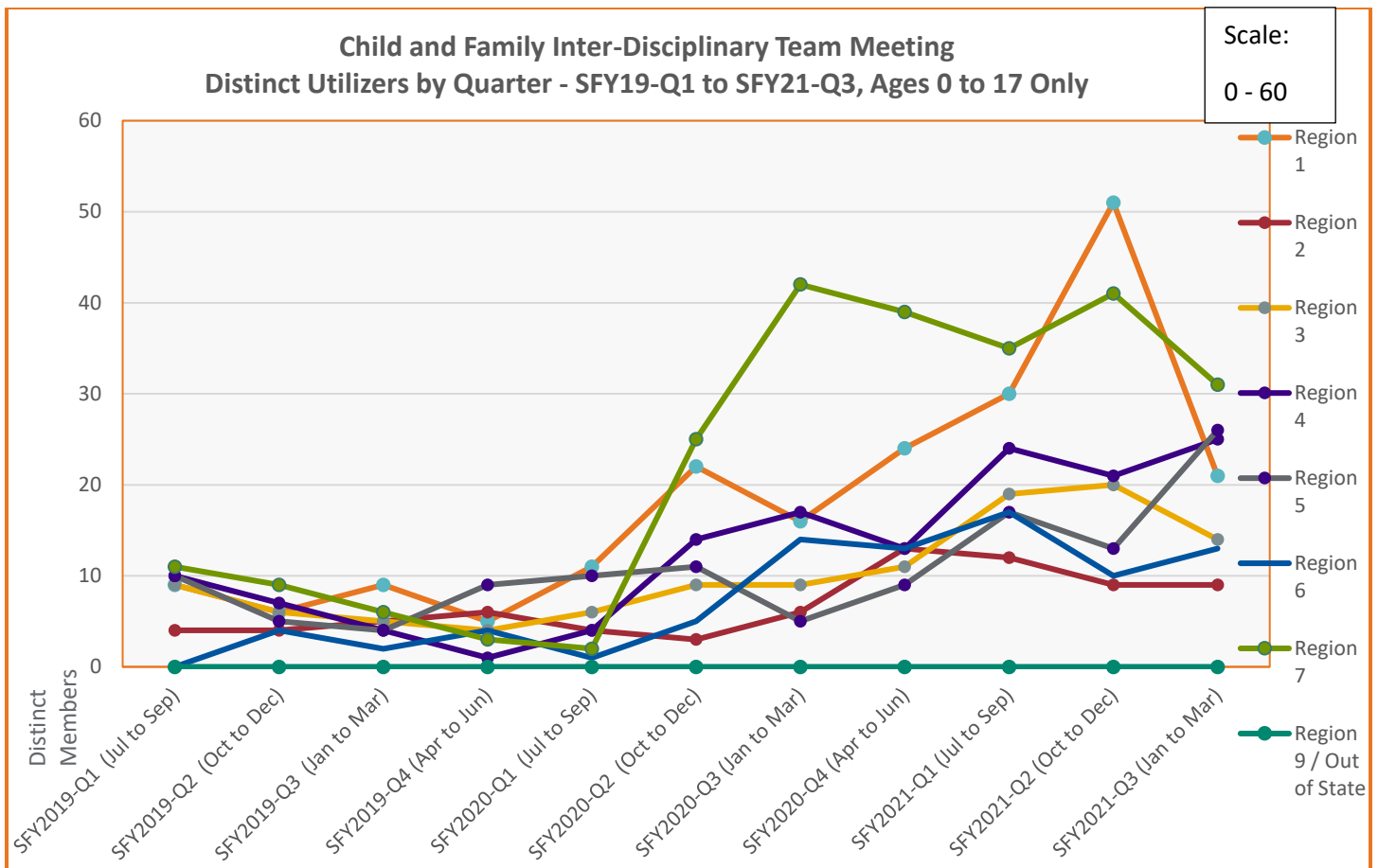
**Table 1: CFT Meeting - Distinct service utilizers per Region/Quarter**

Description: This table displays distinct number of members between the ages of 0 to 17, by quarter who utilized the indicated service between 7/1/2018 to 3/31/2021. Note: Total distinct utilizer count represents an unduplicated (distinct) count of utilizers for the given state fiscal year across all quarters and/or regions combined. Data as of 5/13/21.

	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7	Region 9 / Out of State	Total
Service Date SFY-Qtr.	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers
SFY2019-Q1 (Jul to Sep)	9	4	9	10	10	0	11	0	53
SFY2019-Q2 (Oct to Dec)	6	4	6	7	5	4	9	0	41
SFY2019-Q3 (Jan to Mar)	9	5	5	4	4	2	6	0	35
SFY2019-Q4 (Apr to Jun)	5	6	4	1	9	4	3	0	32
<b>SFY2019 Distinct Total Utilizers</b>	<b>27</b>	<b>16</b>	<b>20</b>	<b>22</b>	<b>23</b>	<b>8</b>	<b>28</b>	<b>0</b>	<b>144</b>
SFY2020-Q1 (Jul to Sep)	11	4	6	4	10	1	2	0	38
SFY2020-Q2 (Oct to Dec)	22	3	9	14	11	5	25	0	89
SFY2020-Q3 (Jan to Mar)	16	6	9	17	5	14	42	0	109
SFY2020-Q4 (Apr to Jun)	24	13	11	13	9	13	39	0	122
<b>SFY2020 Distinct Total Utilizers</b>	<b>59</b>	<b>19</b>	<b>30</b>	<b>41</b>	<b>33</b>	<b>25</b>	<b>105</b>	<b>0</b>	<b>312</b>
SFY2021-Q1 (Jul to Sep)	30	12	19	24	17	17	35	0	154
SFY2021-Q2 (Oct to Dec)	51	9	20	21	13	10	41	0	165
SFY2021-Q3 (Jan to Mar)	21	9	14	25	26	13	31	0	139
<b>SFY2021 Distinct Total Utilizers</b>	<b>70</b>	<b>21</b>	<b>51</b>	<b>60</b>	<b>48</b>	<b>36</b>	<b>98</b>	<b>0</b>	<b>384</b>







#### What is this data telling us?

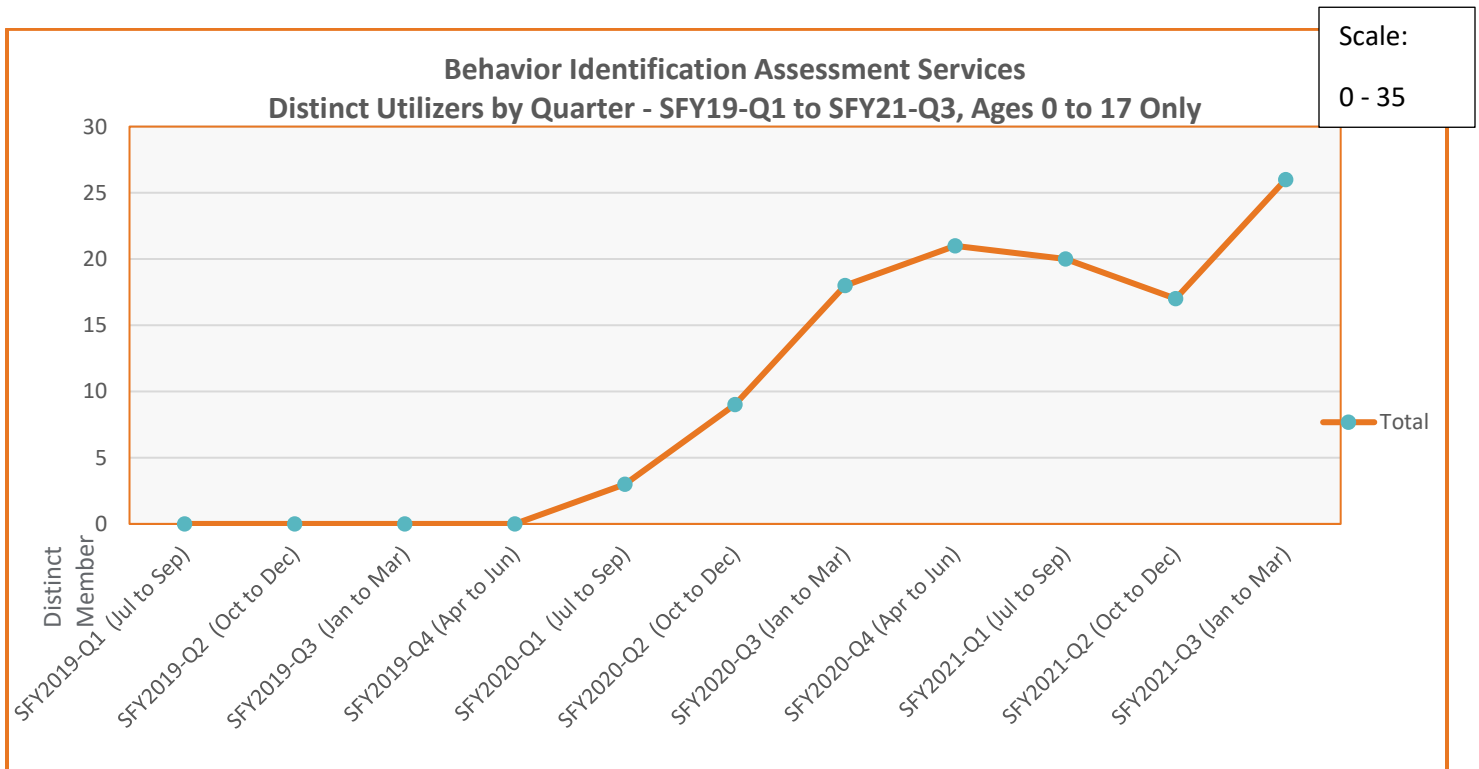
It is expected that all children and youth who meet criteria for YES will receive services that include a Child and Family Team (CFT). The number of CFT services has increased in SFY 2021. It is apparent that child and family teaming is not being billed as a Child and Family Inter-Disciplinary Team meeting and that this billing code is used primarily by Targeted Care Coordinators. QMIA will continue to monitor.

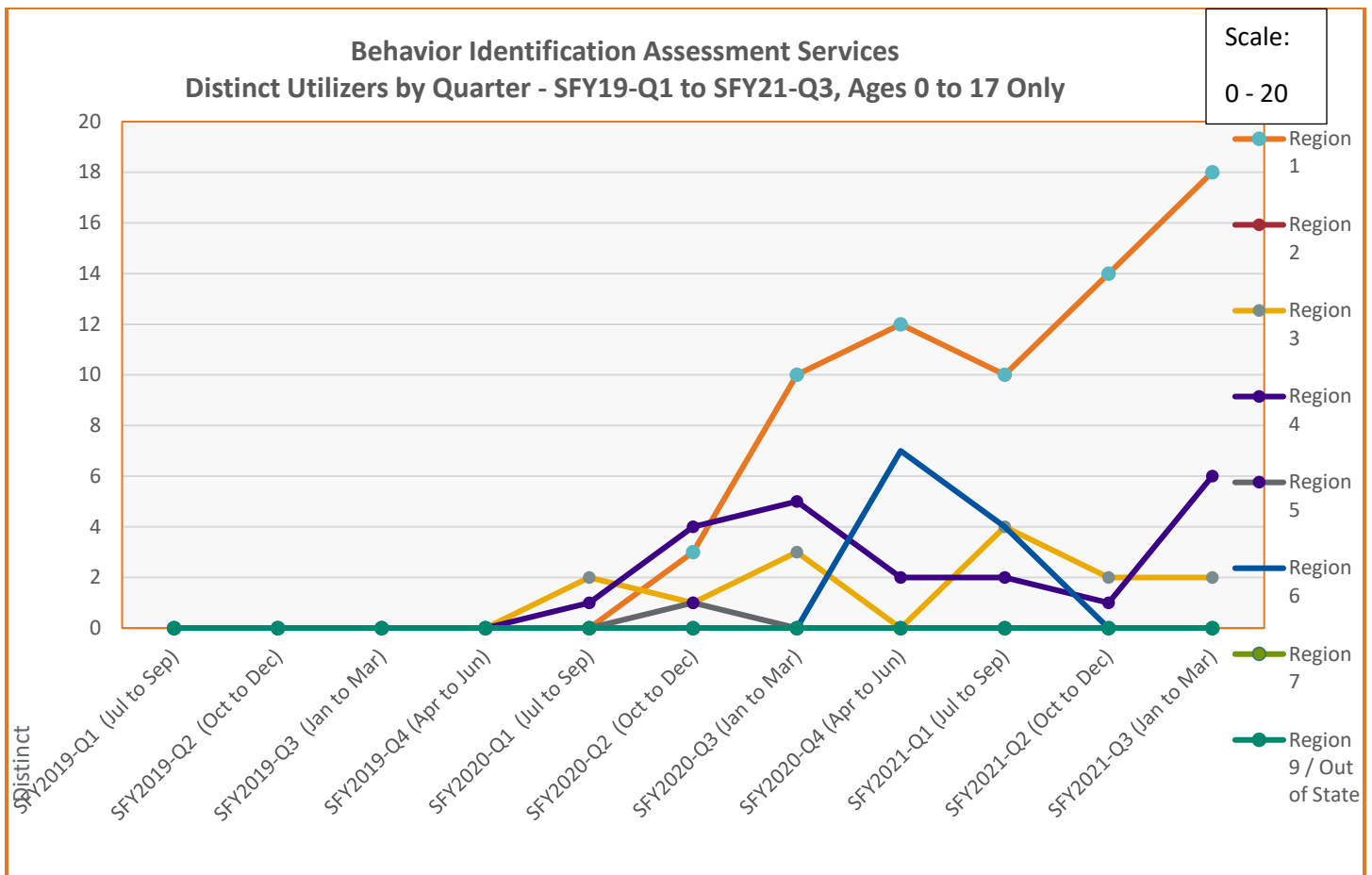
## Behavior Identification Assessment Services

**Table 1: Behavior Identification Assessment Services - Distinct service utilizers per Region/Quarter**

Description: This table displays distinct number of members between the ages of 0 to 17, by quarter who utilized the indicated service between 7/1/2018 to 3/31/2021. Note: Total distinct utilizer count represents an unduplicated (distinct) count of utilizers for the given state fiscal year across all quarters and/or regions combined. Data as of 5/13/21.

	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7	Region 9 / Out of State	Total
Service Date SFY-Qtr.	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers
SFY2019-Q1 (Jul to Sep)	0	0	0	0	0	0	0	0	0
SFY2019-Q2 (Oct to Dec)	0	0	0	0	0	0	0	0	0
SFY2019-Q3 (Jan to Mar)	0	0	0	0	0	0	0	0	0
SFY2019-Q4 (Apr to Jun)	0	0	0	0	0	0	0	0	0
SFY2019 Distinct Total Utilizers	0	0	0	0	0	0	0	0	0
SFY2020-Q1 (Jul to Sep)	0	0	2	1	0	0	0	0	3
SFY2020-Q2 (Oct to Dec)	3	0	1	4	1	0	0	0	9
SFY2020-Q3 (Jan to Mar)	10	0	3	5	0	0	0	0	18
SFY2020-Q4 (Apr to Jun)	12	0	0	2	0	7	0	0	21
SFY2020 Distinct Total Utilizers	22	0	4	9	1	7	0	0	43
SFY2021-Q1 (Jul to Sep)	10	0	4	2	0	4	0	0	20
SFY2021-Q2 (Oct to Dec)	14	0	2	1	0	0	0	0	17
SFY2021-Q3 (Jan to Mar)	18	0	2	6	0	0	0	0	26
SFY2021 Distinct Total Utilizers	36	0	7	9	0	4	0	0	56





#### What is this data telling us?

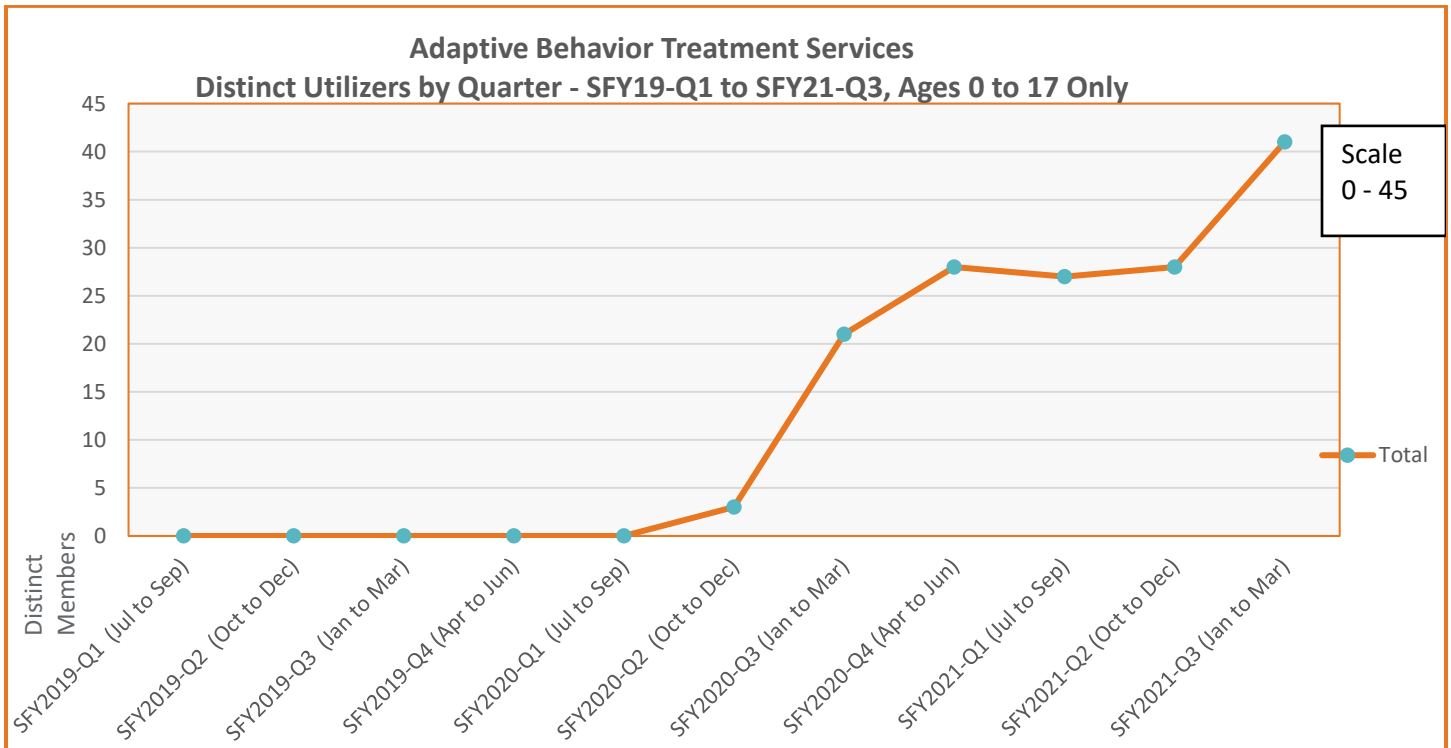
There is no research indicating expected need for Behavior Identification Assessment. There are no services in Region 2, 5, or 7 and very limited services in 3, 4 and 6. QMIA will continue to monitor the trends in use of Behavior Identification Assessment Services.

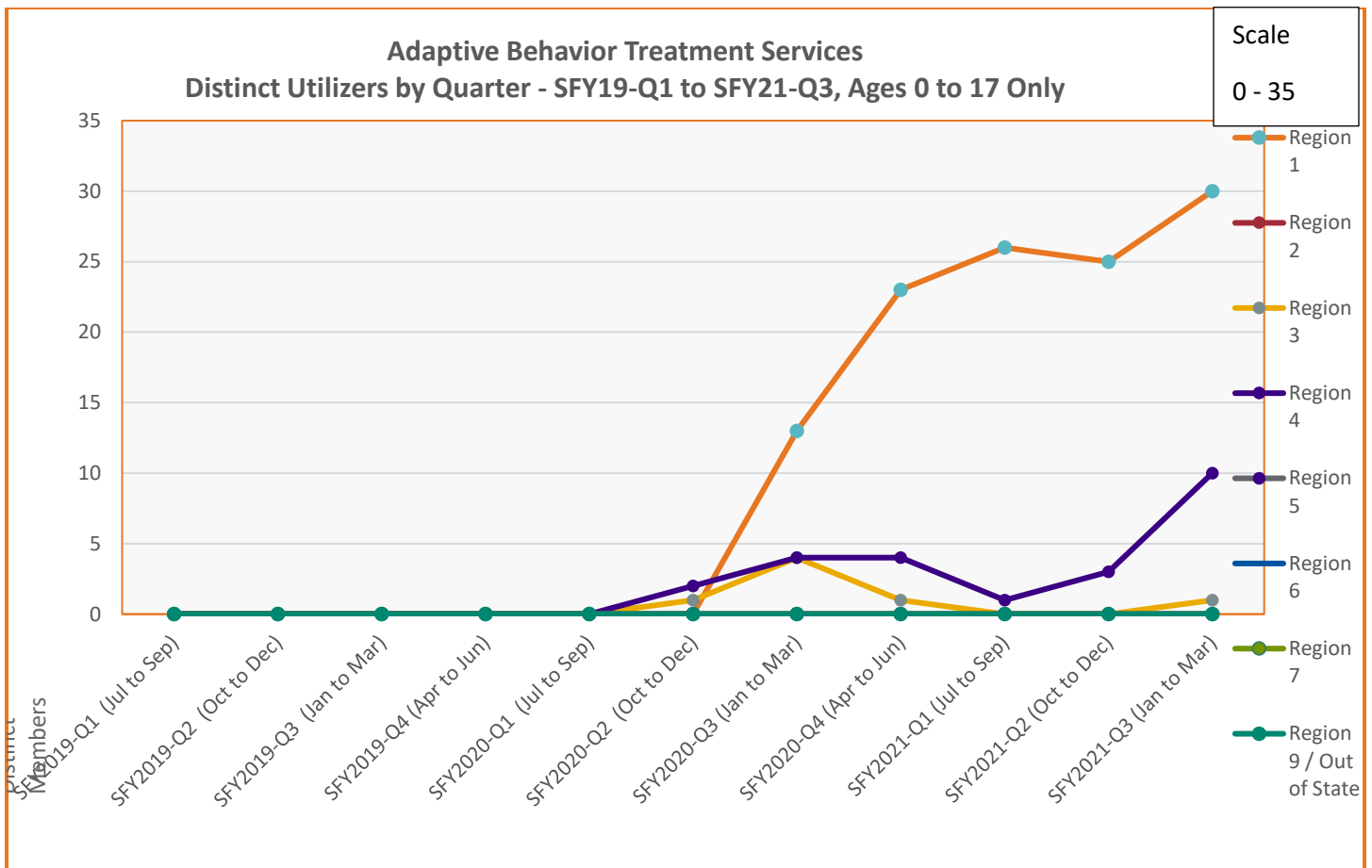
## Adaptive Behavior Treatment Services

**Table 1: Adaptive Behavior Treatment Services - Distinct service utilizers per Region/Quarter**

Description: This table displays distinct number of members between the ages of 0 to 17, by quarter who utilized the indicated service between 7/1/2018 to 3/31/2021. Note: Total distinct utilizer count represents an unduplicated (distinct) count of utilizers for the given state fiscal year across all quarters and/or regions combined. Data as of 5/13/21.

	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7	Region 9 / Out of State	Total
Service Date SFY-Qtr.	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers	Distinct Utilizers
SFY2019-Q1 (Jul to Sep)	0	0	0	0	0	0	0	0	0
SFY2019-Q2 (Oct to Dec)	0	0	0	0	0	0	0	0	0
SFY2019-Q3 (Jan to Mar)	0	0	0	0	0	0	0	0	0
SFY2019-Q4 (Apr to Jun)	0	0	0	0	0	0	0	0	0
SFY2019 Distinct Total Utilizers	0	0	0	0	0	0	0	0	0
SFY2020-Q1 (Jul to Sep)	0	0	0	0	0	0	0	0	0
SFY2020-Q2 (Oct to Dec)	0	0	1	2	0	0	0	0	3
SFY2020-Q3 (Jan to Mar)	13	0	4	4	0	0	0	0	21
SFY2020-Q4 (Apr to Jun)	23	0	1	4	0	0	0	0	28
SFY2020 Distinct Total Utilizers	25	0	4	4	0	0	0	0	33
SFY2021-Q1 (Jul to Sep)	26	0	0	1	0	0	0	0	27
SFY2021-Q2 (Oct to Dec)	25	0	0	3	0	0	0	0	28
SFY2021-Q3 (Jan to Mar)	30	0	1	10	0	0	0	0	41
SFY2021 Distinct Total Utilizers	40	0	1	10	0	0	0	0	51





#### What is this data telling us?

There is no research indicating expected need for Adaptive Behavior Treatment. There are no services in Region 2, 5, 6 or 7 and very limited services in 3, 4. QMIA will continue to monitor the trends in use of Adaptive Behavior Treatment.

#### QMIA Council Action Items or Recommendations:

- 6)** Action Item – Work with Plaintiffs and consultants (Praed, BSU, UnionPoint) to establish YES performance measures regarding YES services.
- 7)** Recommendation – Request YES partners to develop a plan for increasing service availability and access in all 7 regions with a goal to increase access statewide.

## Medicaid

### Children's Medicaid Placement Requests- Psychiatric Residential Treatment Facility (PRTF)

All new Medicaid placement requests received have four potential results, including those that are approved, denied, withdrawn, or technically denied/closed.

- Approved (A) – Approved for placement in Psychiatric Residential Treatment Facility (PRTF); Medicaid works with the member's family to secure a placement in an approved PRTF.
- Denied (D)– Denied placement in PRTF; Medicaid works with the member's representatives and other entities such as Optum Idaho, DBH, or FACS to set up appropriate treatment options.
- Withdrawn (W)– Requestor, such as parent, guardian, or case worker with Children's Developmental Disability (DD), if in state custody, decided not to continue with their request (represented below as W/C).
- Technically Denied or Closed (C)– Additional information requested, but not received (represented below as W/C)

#### Psychiatric Residential Treatment Facility (PRTF):

Chart 2: SFY 2021 Q3 PRTF Application Requests

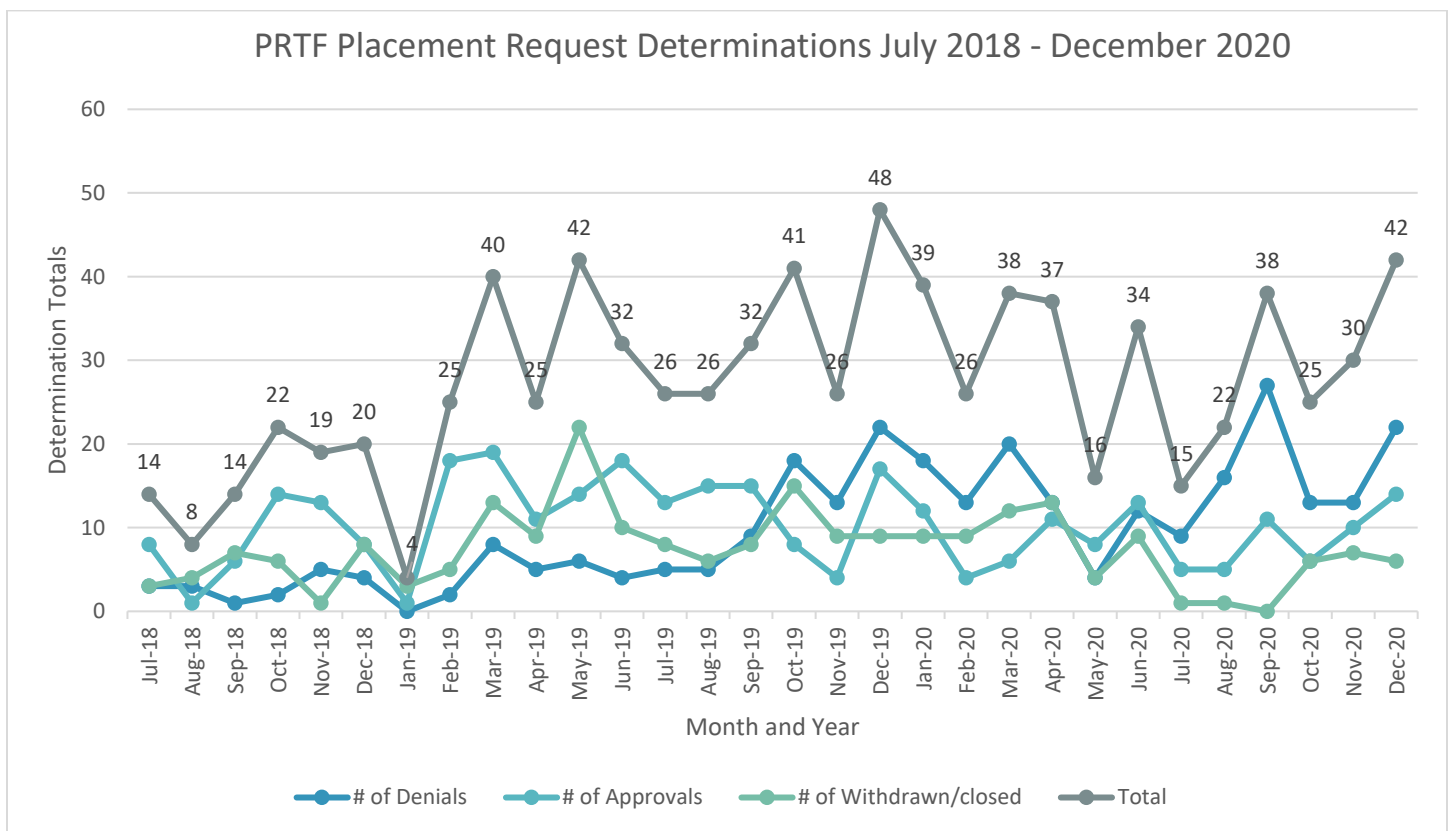


Table 17: PRTF SFY 2019 and 2020

Month	Requests	Denials	Approvals	Withdrawn / Closed	Total	Requested	Denials	Approvals	Withdrawn / Closed	Total
Jul-18	14	3	8	3	14	26	5	13	8	26
Aug-18	8	3	1	4	8	26	5	15	6	26
Sep-18	14	1	6	7	14	32	9	15	8	32
Oct-18	22	2	14	6	22	41	18	8	15	41
Nov-18	19	5	13	1	19	26	13	4	9	26
Dec-18	20	4	8	8	20	48	22	17	9	48
Jan-19	4	0	1	3	4	39	18	12	9	39
Feb-19	25	2	18	5	25	26	13	4	9	26
Mar-19	40	8	19	13	40	38	20	6	12	38
Apr-19	25	5	11	9	25	37	13	11	13	37
May-19	42	6	14	22	42	16	4	8	4	16
Jun-19	32	4	18	10	32	34	12	13	9	34
Total		43	131	91	265		152	113	111	376
Percent of Total		16.2%	49.4%	34.3%			40.4%	30.1%	29.5%	

Table 18: PRTF SFYTD 2021- through Q3

Month	Requests	Denials	Approvals	Withdrawn/Closed	Total
Jul-20	15	9	5	1	15
Aug-20	22	16	5	1	22
Sep-20	38	27	11	0	38
Oct- 20	25	13	6	6	25
Nov-20	30	13	10	7	30
Dec-20	42	22	14	6	42
Jan -21	13	7	6	1	14
Feb - 21	33	13	20	7	40
March - 21	21	8	13	9	30
Total	239	128	90	38	256
Percent of Total		50.0%	35.2%	14.8%	

By the end of Q3 SFY 2021, Medicaid had received a total of 239 requests for Children's Medicaid PRTF placement. During SFY 2021 there have been 256 determinations: 90 have been approved (35.2%) 128 have been denied (50%), 38 have been withdrawn or closed for technical reasons (14.8%). The difference between the

number of applications and determinations is that there were applications from the previous FY which were not determined until this FY.

#### What is this data telling us?

There has been a trend over the past 2-plus years of both increasing applications and an increasing percentage of denials. These increased number of applications may be due to increases in the population and/or increased information available on how to access services. The root cause of the increase in the percentage of denials has not been analyzed.

Table 19: PRTF **Admits** and discharges **per month**

SFY 2020	July 19	Aug 19	Sept 19	Oct 19	Nov 19	Dec 19	Jan 20	Feb 20	Mar 20	Apr 20	May 20	June 20	Total
Admits	5	9	10	10	5	7	15	11	5	6	10	5	98
Discharges	3	3	3	4	2	9	1	2	6	8	9	5	55

Table 20: Timeliness of PRTF Decisions

#### Children's Medicaid Timeliness Data SFY 2021 Q3: January 1- March 31, 2021

*The below data set represents 70 applications received between January 1-March 31 with final decision of "approved" or "denied". There were 22 additional applications received during this time frame that were closed, withdrawn or deemed technical denials. Total applications received: 92.*

Approvals <i>n=38</i>	
Days (cal) from completed EPSDT application received to NOD <sup>1</sup> sent	
Days	# Applications
0-30	19
31-60	15
61-90	4 (2 SR <sup>2</sup> )
91-120	0
Denials <i>n=32</i>	

<sup>1</sup>A Notice of Decision (NOD) is sent out on the date the parent/guardian is informally notified of the decision via phone call.

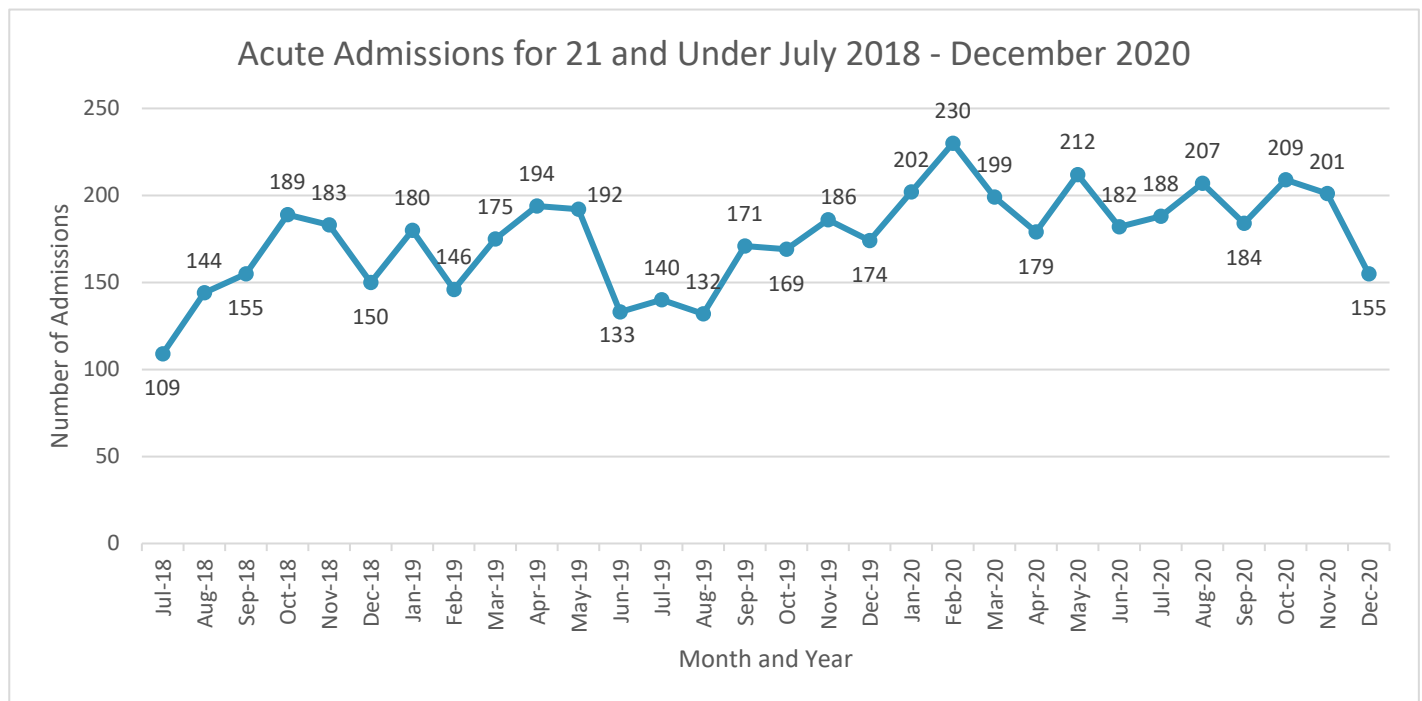
<sup>2</sup>A Second Review (SR) occurs when it is discovered (following a denial, usually at the treatment team meeting) that there may be additional information to demonstrate medical necessity and potentially lead to an approval. When a second review is requested, this can add length to the application process.



Table 21: Medicaid hospitalization

**Hospitalization Admits per month (Medicaid is reporting hospital admits for 21 years of age and under)**

SFY	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Total
SFY 2019	109	144	155	189	183	150	180	146	175	194	192	133	<b>1950</b>
SFY 2020	140	132	171	169	186	174	202	230	199	179	212	182	<b>2176</b>
SFYTD 2021	188	207	184	209	201	155	181	213	248				<b>1786</b>



On average there continues to be a notable trend for more acute admissions per month:

- SFY 2019  $1,950 / 12 = 163$
- SFY 2020  $2,176 / 12 = 181$
- SFYTD 2021  $1,786 / 9 = 198$

This may be due partially to increases in population

## 6. YES DBH Service Utilization

Background: DBH provides some children's mental health services not currently provided by Medicaid/Optum: Vouchered Respite, Wraparound, Parenting with Love and Limits (PLL), State Hospital South (SHS), and residential placements paid for by DBH (for children and youth who are not Medicaid eligible or who have Medicaid but were denied placement in PRTF).

### DBH Vouchered Respite

The Children's Mental Health Voucher Respite Care program is available to parents or caregivers of youth with serious emotional disturbance to provide short-term or temporary respite care by friends, family, or other individuals in the family's support system. Through the voucher program, families pay an individual directly for respite services and are then reimbursed by the division's contractor. A single voucher may be issued for up to \$600 for six months per child. Two vouchers can be issued per child per year.

Table 22- SFYTD 21 (Q1- Q3)

Region	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March	Total # of Vouchers
1	9	6	4	5	3	1	8	4	4	44
2	3	1	0	2	2	3	1	2	2	16
3	2	3	3	0	4	8	5	7	8	40
4	16	11	17	3	0	12	4	11	3	77
5	0	0	0	1	0	0	0	0	0	1
6	0	3	4	1	2	4	5	4	6	29
7	36	32	16	35	34	40	49	38	37	317
<b>Total Clients</b>	<b>66</b>	<b>56</b>	<b>44</b>	<b>47</b>	<b>45</b>	<b>68</b>	<b>72</b>	<b>66</b>	<b>60</b>	<b>524</b>

### DBH Wraparound Intensive Services (WInS)

It is estimated that approximately 1,350 children and youth in Idaho may need Wraparound services. During SFY 2020, 335 children and youth received Wraparound services and since the initial implementation of Wraparound in Idaho, in January of 2018, 456 children and families have received WInS.

Table 23: WInS- SFY 20 and SFYTD 21 (Q1- Q3)

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March	April	May	June	SFY Total Unduplicated
SFY 2020	62	34	21	24	53	32	45	36	26	32	29	17	335
SFYTD 2021	19	16	34	23	24	24	19	25	27				155

### DBH Parenting with Love and Limits (PLL)

The evidence-based practice called Parenting with Love and Limits (PLL) is offered through the regional DBH CMH clinics in regions across the state.

Table 24: PLL SFY 20 and SFYTD 21 (Q1- Q3)

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March	April	May	June	Total SFY Unduplicated
SFY 2020	16	17	13	11	8	6	18	13	9	12	3	12	137
SFYTD 2021	5	3	6	4	5	5	4	8	6				47

The number of families receiving PLL has trended downward substantially for SFYTD 2021

#### DBH Residential placements:

Table 25: Residential SFY 20 and SFYTD 21 (Q1- Q3)

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March	April	May	June	Total SFY Unduplicated
SFY 2020	8	3	4	3	2	2	4	4	6	6	6	8	18
SFYTD 2021	9	9	14	NA*	13	14	15	12	10				20

- \* Data for October is not available as there was a change in how data was being collected.

DBH experienced an increased number of residential placements SFYTD 2021 vs SFY 2020 Quarters 1 and 2. \* Data for October is missing due to a change in the WITS system

#### DBH State Hospital South (SHS):

Table 26: SHS SFY 20 and SFYTD 21 (Q1- Q3)

	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total SFY Unduplicated
SFY 2020	17	20	18	18	22	21	21	23	25	24	25	21	101
SFYTD2021	28	24	30	NA*	19	20	16	19	17				65

DBH experienced an increased number of admissions SFY 2021 Q1 vs SFY 2020 Q1. Admissions for Q3 2021 are very similar to the admissions from 2020.

#### DBH SHS Readmission Incidents (not unique individuals)

Table 26a: SFY 17 - 20 and SFYTD 21 (Q1- Q3)

Range of days to Readmission	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021
Re-admission 30 days or less	0	0	0	1	0
Re-admission 31 to 90 day	5	6	2	3	0
Re-admission 90 to 180 days	4	1	6	2	0
Re-admission 181 to 365 days	5	6	7	4	0
Re-admission more than 365 days	11	9	9	7	3

DBH has been tracking the trend of readmissions incidents for SHS. It is notable that the number of incidents within 30 days has been extremely low. The only year in which there was a readmission within 30 days was 2020 and the rate of readmission for that year is still 1% ( $1/101 = .99\%$ ). The rate for 31-90 days is 4% ( $1 + 3 / 101 = 3.96\%$ ). It is also notable that the number of readmission incidents has declined steadily over the past 4 years.

SHS has now closed its adolescent unit and a new State Hospital facility (State Hospital West) began accepting adolescent admissions in May 2021. The QMIA-Q report will begin adding in State Hospital West data in Q4.

#### DBH 20-511A:

The number of 20-511A court ordered cases dropped overall from an annual high of 598 in 2016 to 373 in 2020.

The number of 20-511A court orders for SFY 2020 (373) is a drop of 21% compared to SFY 2019.

Chart 4: Annual # of Court Ordered 20-511A, SFY 2015- 2020

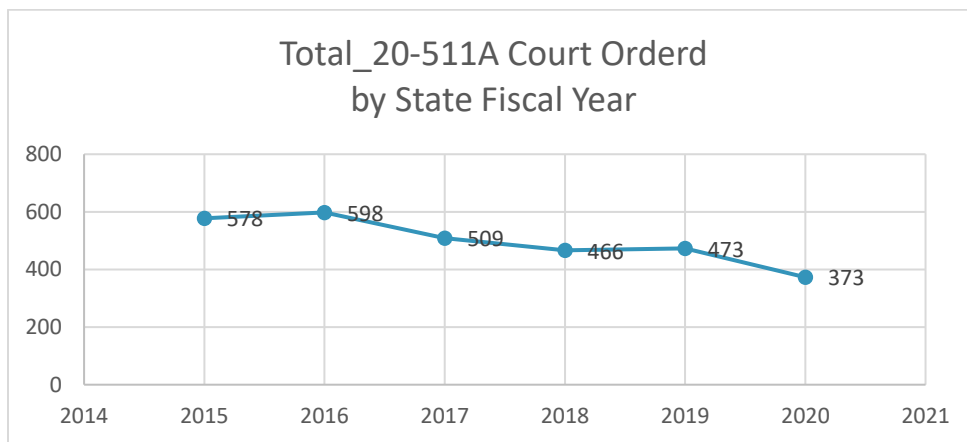


Table 27: 20-511A SFYTD 2021 as of end of Q3

Region	SFYTD Total
1	25
2	4
3	17
4	48
5	35
6	12
7	47
Total	188

If the current trend continues, SFY21 could end up being substantially below 300 total.

## 7. YES Partners data

### Family and Community Services (FACS)

DBH and FACS are working together on a plan for including data on children and youth in foster care in future QMIA-Q reports. We will be collaborating on data that will allow us to assess children in foster care who have had a CANS. The data is delayed this quarter based on some changes in the FACS Division but will be included in future QMIA-Q reports.

Table 28: SFYTD 2021 # of Children in Foster Care by month

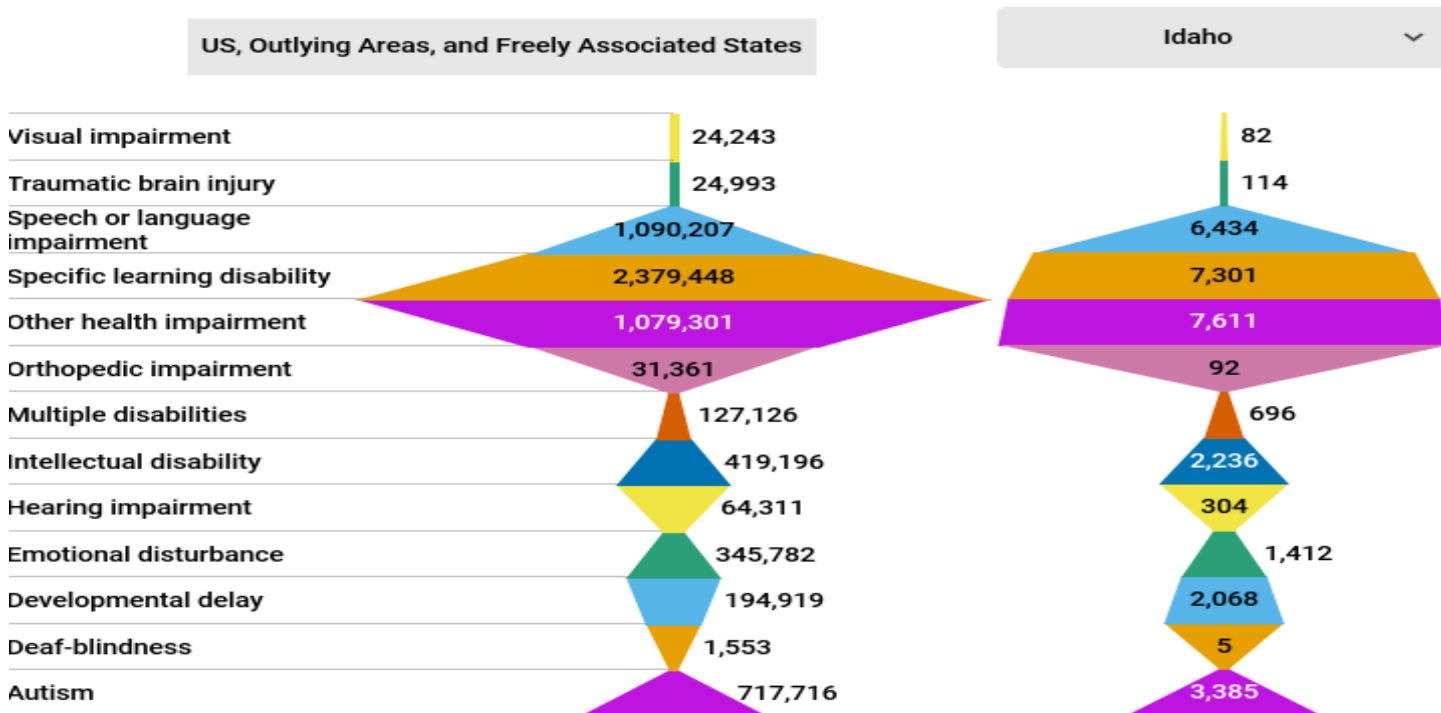
Month	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March
Children in Care	1635	1653	1659	1683	1690	1693	1699	1763	1725

Note: Counts in the above chart have been updated to reflect point-in-time data pulled from the new FACS data system for all completed quarters of SFY2021 to date. Variances in counts from prior reports are due to a combination of system and methodology changes for FACS data collection and reporting in the new system.

### State Department of Education (SDE)

On page 59 is an infographic describing Special Education services in Idaho. In 2020 3.94% (1,412) of children served through Special Education were identified as having “Emotional Behavioral Disorder”. There may also be some children and youth with Emotional Behavioral Disorder in the “Multiple Disabilities” category (2.09% of children served). In comparing the percentage receiving Special education related emotional disorders in Idaho to other states the national percentage for 2019-2020 was 5.27% nationally.

#### Number of Students with Disabilities, Ages 5 (in kindergarten)-21, by Disability Category, Served Under IDEA, Part B, in the US, Outlying Areas, and Freely Associated States: SY 2019-20



Source: U.S. Department of Education, EDFacts Data Warehouse (EDW): “IDEA Part B Child Count and Educational Environments Collection,” 2019-20. <https://www2.ed.gov/programs/osepidea/618-data/state-level-data-files/part-b-data/child-count-and-educational-environments/bchildcountandedenvironments2019-20.csv> All data for Wisconsin were suppressed due to data quality concerns. Data for Iowa was not available.

Full details of this report can be found at the following link: <https://www.sde.idaho.gov/sped/public-reporting/files/osep/OSEP-Fast-Facts-School-aged-children-5-thru-21-served-under-part-B-IDEA.pdf>



# SPECIAL EDUCATION

To enable all students to achieve high academic standards and quality of life, the Special Education department works collaboratively with districts, agencies, and parents to ensure students receive quality, meaningful, and needed services.

## Who We Serve

Disability Categories 2019-2020 School Year



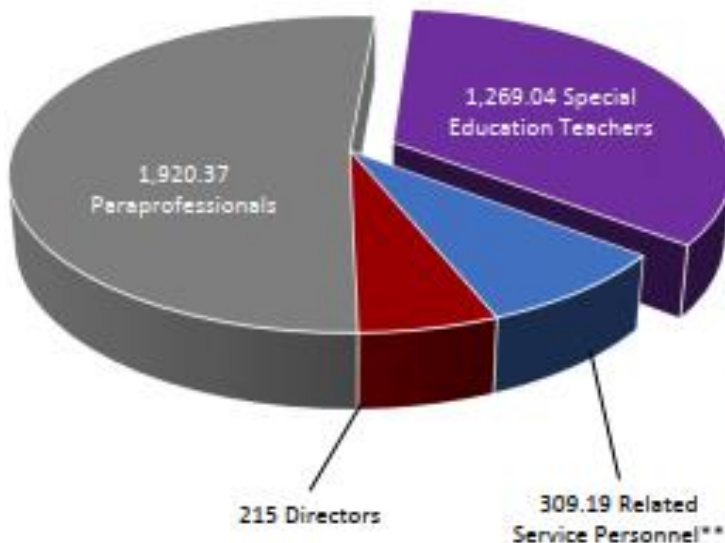
## How We've Grown

Number of Idaho Students Receiving Special Education Services



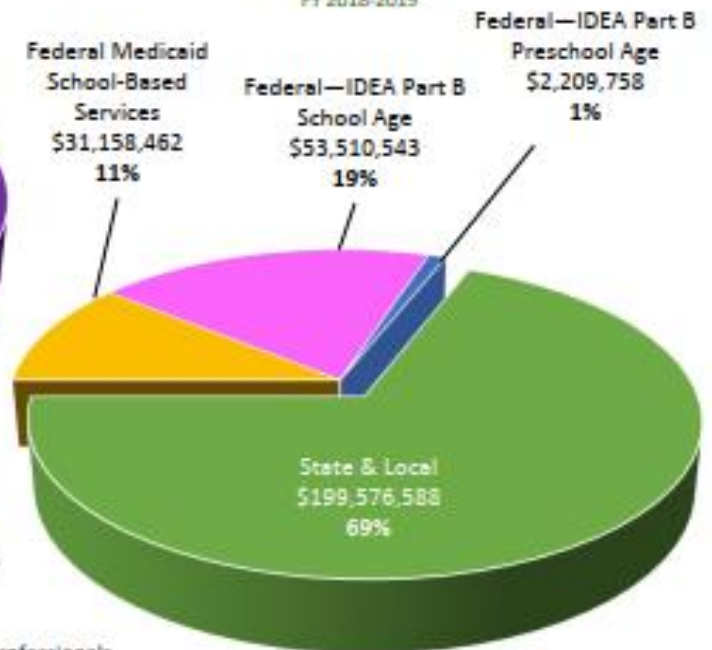
## Staffing

2018-2019 School Year\*



## Funding

FY 2018-2019



\*Data are based off of the EDFacts submission on special education professionals

\*\* Speech-Language Pathologists, Interpreters, Occupational Therapists, Physical Therapists

Data regarding the number and percent of children and youth removed from the classroom based on disability is noted in the chart below and more details can be found at the following link:

<https://www.sde.idaho.gov/sped/public-reporting/files/2019-2020-618-part-b-reports/Discipline-2019-2020-redacted.xlsx>

Table 29:

<b>Number of Times and Percentage Children with Disabilities were Subject to any kind of Disciplinary Removal by Disability Category</b>		
<b>Disability Category</b>	<b>Total Disciplinary Removals</b>	<b>Percentage Total Disciplinary Removals</b>
Intellectual Disability	204	6%
Hearing Impairments	13	0%
Speech or Language Impairments	179	5%
Visual Impairments	**	**
Emotional Disturbance	665	19%
Orthopedic Impairments	**	**
Other Health Impairments	1,415	40%
Specific Learning Disabilities	720	20%
Deaf-Blindness	**	**
Multiple Disabilities	**	**
Autism	251	7%
Traumatic Brain Injury	8	0%
Developmental Delay1	50	1%
<b>Total</b>	<b>3,513</b>	<b>100%</b>

Additional data provided by SDE is available on the SDE Website and can be accessed using the links below:

2020 Idaho Child Count Regional Map: <https://www.sde.idaho.gov/sped/public-reporting/files/child-count/2020-Regional-Map-SWD-Population-11X17.pdf>

2020-2021 Child Count by LEA: <https://www.sde.idaho.gov/sped/public-reporting/files/child-count/Child-Count-by-LEA-2020-2021-Redacted.xlsx>

## **Idaho Department of Juvenile Corrections (IDJC)**

### About IDJC

When a youth is committed to IDJC, they are thoroughly assessed in the Observation and Assessment (O&A) units during the initial duration of their time in commitment. During O&A, best practice assessments (including determining SED status via documentation provided from system partners) determine the risks and needs of juveniles to determine the most suitable program placement to meet the individual and unique needs of each youth. Youth may be placed at a state juvenile



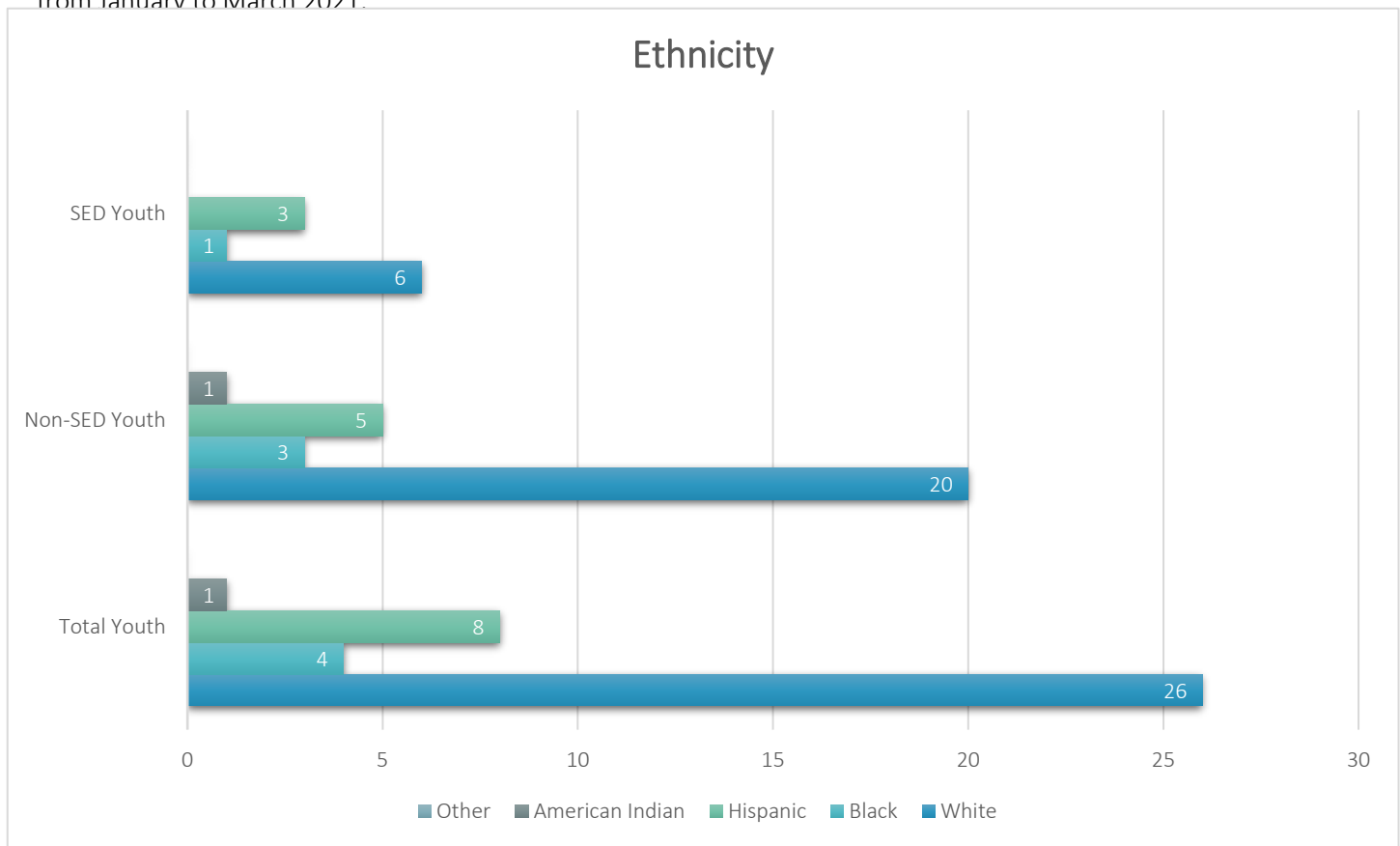
corrections center or a licensed contract facility to address criminogenic risk and needs. Criminogenic needs are those conditions that contribute to the juvenile’s delinquency most directly.

IDJC provides services to meet the needs of youth defined in individualized assessments and treatment plans. Specialized programs are used for juveniles with sex offending behavior, serious substance use disorders, mental health disorders, and female offenders. All programs focus on youth’s strengths and target reducing criminal behavior and thinking, in addition to decreasing the juvenile’s risk to reoffend using a cognitive behavioral approach. The programs are evaluated by nationally accepted and recognized standards for the treatment of juvenile offenders. Other IDJC services include professional medical care, counseling, and education/vocational programs.

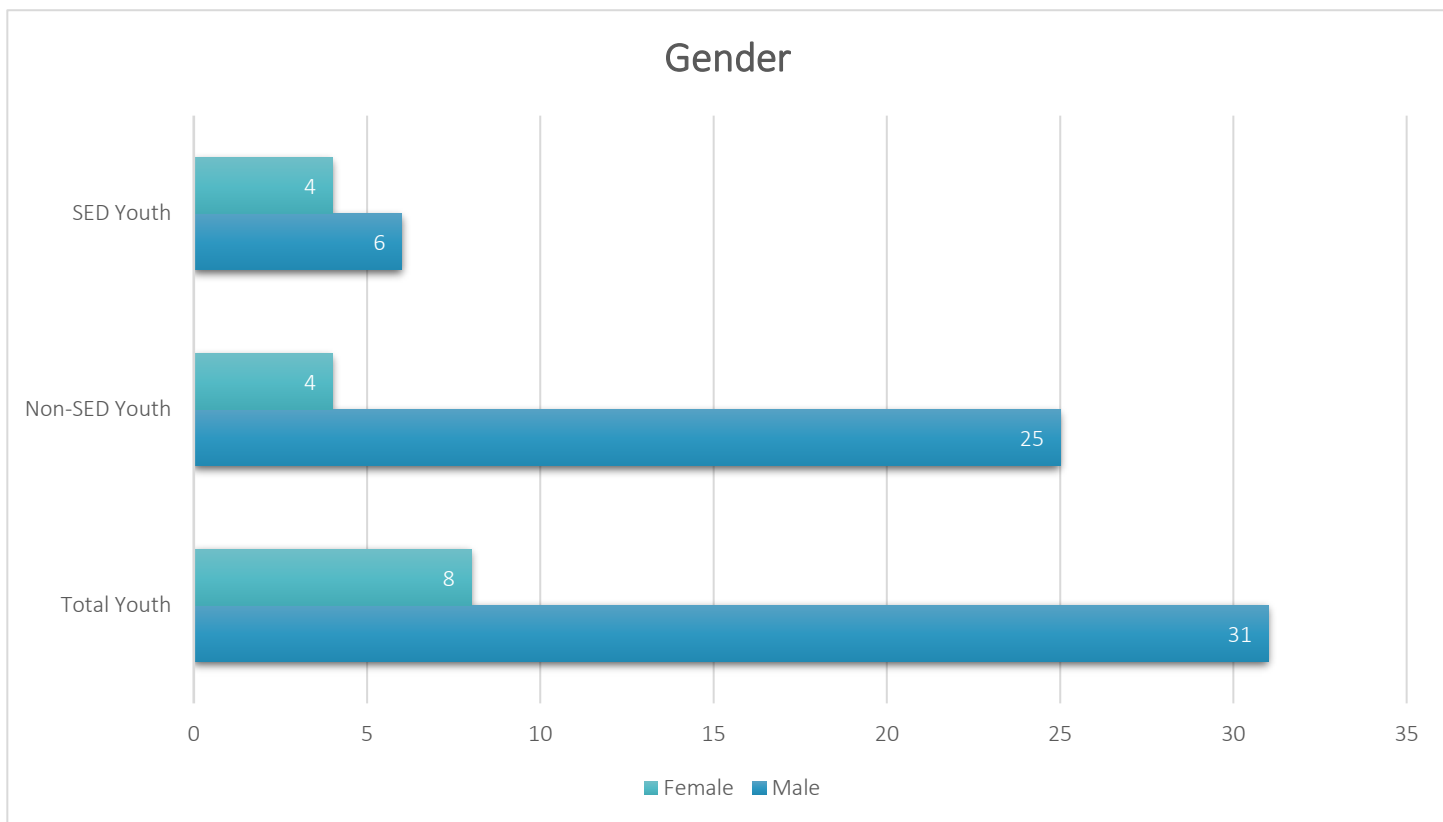
Once a youth has completed treatment and the risk to the community has been reduced, the juvenile is most likely to return to county probation. Each juvenile’s return to the community is associated with a plan for reintegration that requires the juvenile and family to draw upon support and services from providers at the community level. Making this link back to the community is critical to the ultimate success of youth leaving state custody.

### 2021 Third Quarter Data

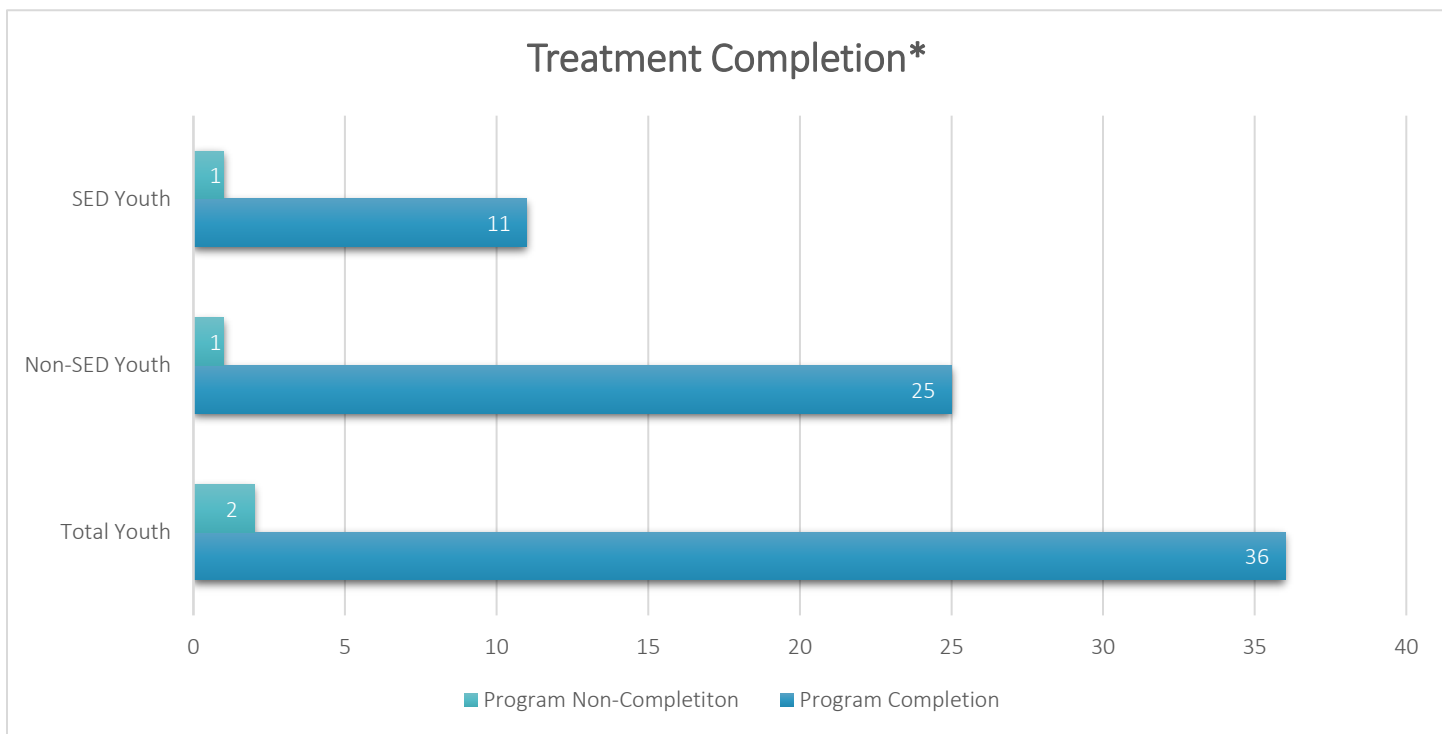
The graphs below compare ethnicity and gender between all youth committed to IDJC and SED youth committed to IDJC from January to March 2021.



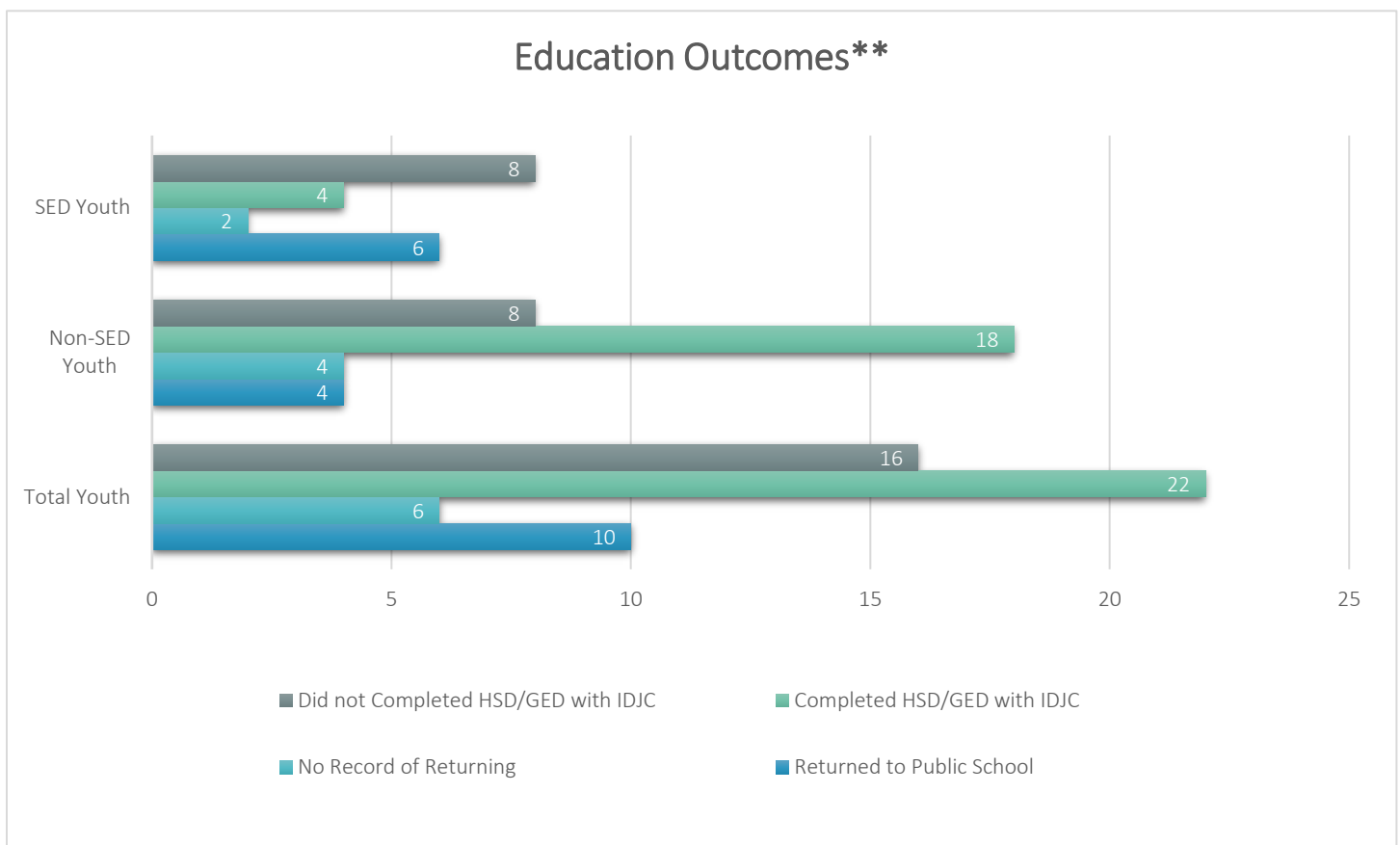




The graphs below compare positive youth outcomes between all youth released from IDJC and SED youth released from IDJC between January and March 2021.



\*Defined as reduced risk to a 2 or a 1 (5-1 scale) on the Progress Assessment / Reclassification (PA/R) assessment.



**\*\*Eligible juveniles are under 19 that did not complete their high school diploma (HSD) or General Education Development (GED) while attending the accredited school at IDJC.**

## 8. YES Family Perception of Service Quality and Satisfaction

### **The QMIA Family Advisory Subcommittee (Q-FAS)**

The Q-FAS presents an opportunity to gather and learn from families' stories. Q-FAS solicits family members' and family advocates' first-hand input on families' experiences accessing and utilizing YES services. The feedback received about successes, challenges, and barriers to care is used to identify areas that need increased focus and to prioritize quality improvement projects. This subcommittee helps to guide YES partners work, providing children, youth, and families in Idaho access to appropriate and effective mental health care.

A new section of the Quarterly Rights and Resolution report will be to report issues raised by the QFAS. While these issues may or may not be associated with actual data, it is believed that the issues should be noted and tracked as part of QMIA. At the April meeting of the Q-FAS a letter from a family member was reviewed and the following areas of concern were discussed:

*Need for crisis response team to intervene and help evaluate if an ER visit and possible acute inpatient is needed.*

*Need for acute inpatient for medication issues*

*Need for Partial hospitalization and day treatment for kids 5 to 12*

*More collaboration between DD and YES services*

*More access to instate services- step-down, diversion, hospital and residential.*

### **QMIA Council Action Items or Recommendations:**

- 8)** Recommendation – Request YES partners to develop a plan for increasing access to services for children 5-12

### **YES Quality Survey**

BSU on behalf of DHW conducted a cross-sectional survey mailed out to 5,998 caregivers of youth who had participated in YES behavioral health services from July 1, 2020 to January 27, 2021. Using the Idaho CANS database as a sampling frame, DBH selected a stratified sample of caregivers, allocated proportionally across Idaho's seven regions, and mailed them a survey regarding their experiences and outcomes of care for one randomly selected youth within their household. The survey was fielded during March and April of 2021. Survey items addressed the areas of (1) the extent to which care provided to the youth and family was adherent to the Idaho YES principles of care and Practice Model, (2) the adequacy of safety/crisis planning, (3) the extent to which families experiences with the CANS adhered to guidelines, (4) participation in select services, and (5) service outcomes over the last six months including changes in youth functioning, mental health, out of home placements, and caregiver self-efficacy to assess services and supports.

The survey report describes YES participants experience and outcomes of care statewide for 2021, compare results to findings from the 2020 survey and present analyses of variations in experiences of care based on youth sex, ethnicity, and race. BSU completed statistical analyses on the responses and results were weighted to account for the survey sampling design and nonresponse. Results of the survey will be presented to various stakeholder groups beginning in July, and the full report will be published on the YES Website.

### **QMIA Council Action Items or Recommendations:**

- 9)** Action Item-QMIA Council to continue work on improving available information on effective Safety/Crisis Plan

## YES Complaints: 3<sup>rd</sup> Quarter Summary, SFY 2021

Background: Number basis and outcomes of complaints and appeals

The YES QMIA Council believes that each complaint received offers an opportunity to improve the system for youth and families. The complaints system is one of several mechanisms constructed within YES to place youth and families at the center of their care.

**Table 30: Total Complaints and Appeals SFY21 3<sup>rd</sup> Q**

	Division of Behavioral Health\ (DBH)	Division of Medicaid <sup>5</sup>	Department of Juvenile Corrections (IDJC)	Family and Community Services (FACS)	State Department of Education (SDE) <sup>6</sup>	Total
1st Q	0	3	7	0	-	10
2 <sup>nd</sup> Q	0	3	8	1	0	12
3 <sup>rd</sup> Q	0	9	5	0	0	14
Total	0	15	20	1	0	36

In the 3<sup>rd</sup> quarter of SFY 2021, there were 14 YES-related complaints across all YES partners and a total of 36 year to date.

The whole YES Rights and Resolutions (YES Complaints) report can be found at the following link:

<https://yes.idaho.gov/youth-empowerment-services/about-yes/yes-history/?target=3>



<sup>5</sup> Includes information from Optum Idaho, the Medicaid Idaho Behavioral Health Plan.

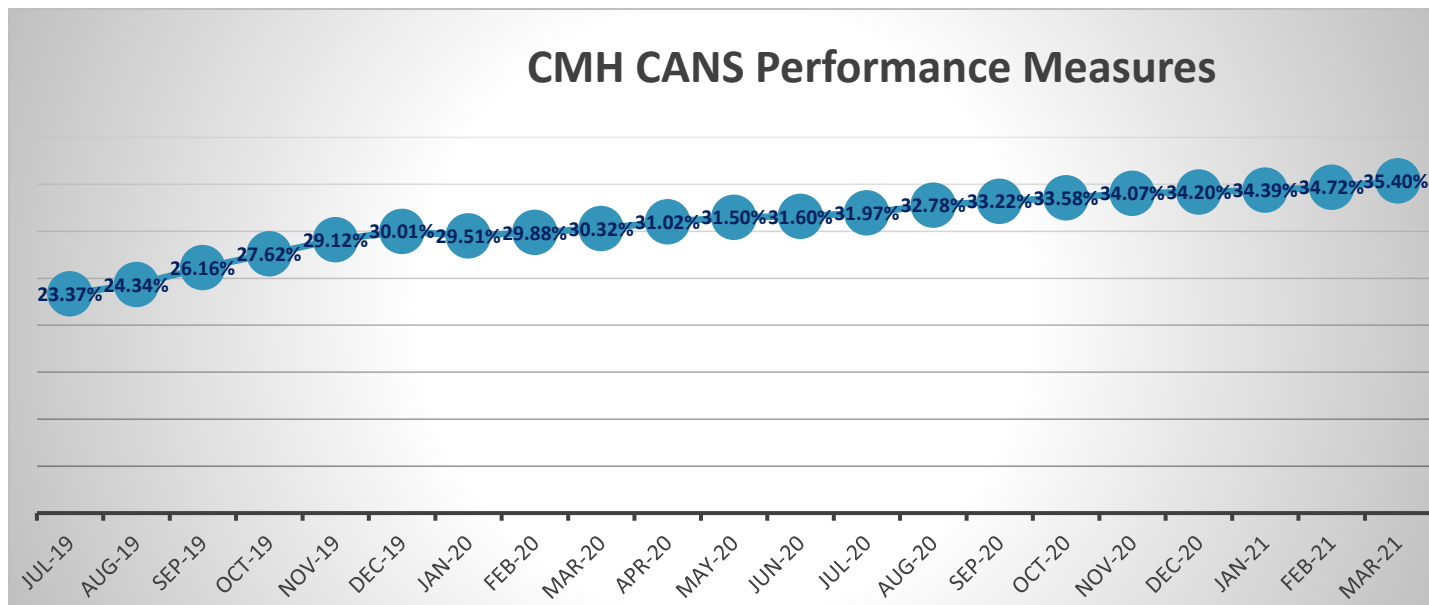
<sup>6</sup> Complaints reported by the SDE are not necessarily complaints related to mental health services as their federally required reporting system does not filter complaints based on the child's disability.

## 9. YES Service Outcomes

**Background:** Measure service outcomes for children, youth and their families.

**Report:** A measure of outcomes of the YES system is the number of children that have had at least three CANS assessments and have shown a reduction in need as evidenced by a change (decrease) in the overall CANS rating. For example: A child who started with an overall CANS rating of 3 improved to at least a rating of 2 or better over 3 rating periods.

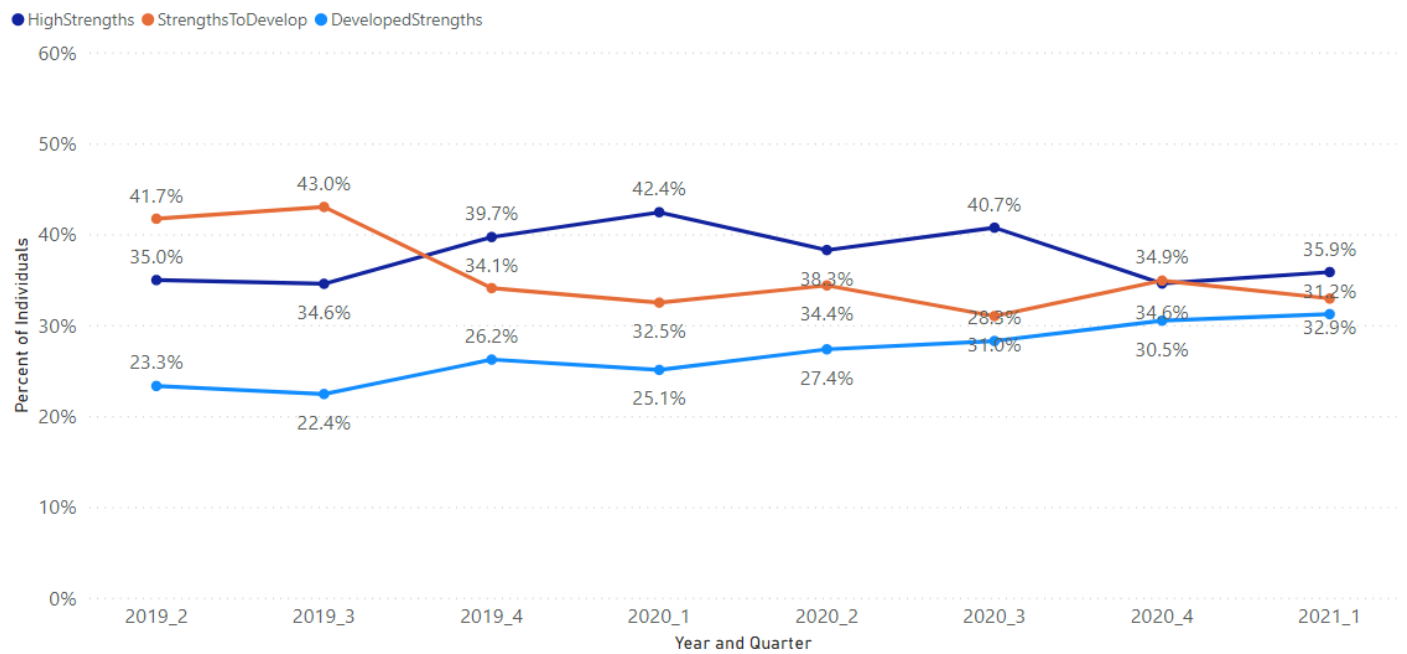
Statewide CANS ratings continue to demonstrate improvement.



**Note:** Outcomes data includes all children who received outpatient services but may also include children who received other services in addition to outpatient.

In addition to the measure above DBH has worked with the Praed Foundation to develop additional ways to assess YES outcomes. The chart below shows the number and percentage of children and youth who developed strengths while in treatment. This has increased from 23.3 % in 2019 to 29.3% in 2020 (light blue line).

### Strength Category at Last Assessment by Year and Quarter



Strengths Category	2019_2	2019_3	2019_4	2020_1	2020_2	2020_3	2020_4	2021_1	Total
Developed Strengths	38	61	140	295	288	247	291	1166	2526
High Strengths	57	94	212	499	403	356	330	1339	3290
Strengths to Develop	68	117	182	382	362	271	333	1230	2945
<b>Total</b>	<b>163</b>	<b>272</b>	<b>534</b>	<b>1176</b>	<b>1053</b>	<b>874</b>	<b>954</b>	<b>3735</b>	<b>8761</b>

### Notes on Graph:

Each point represents the percentage of youth by strengths category for each quarter. To be included in this graph the youth had to have at least 3 assessments, with more than 90 days between their first and last assessment.

## 10. YES Medicaid Expenditures

Medicaid spending for mental health services for children and youth in SFY 2021.

**Section 6 Expenditures:** Total dollars paid for services rendered to members between the ages of 0 to 17 continues to increase, quarter over quarter and year over year. Like information noted in Section 2, SED Utilizers, the increase in expenditures may be attributed to continued awareness of YES Program eligibility as well as implementation of new services for children and adolescents over this time period.

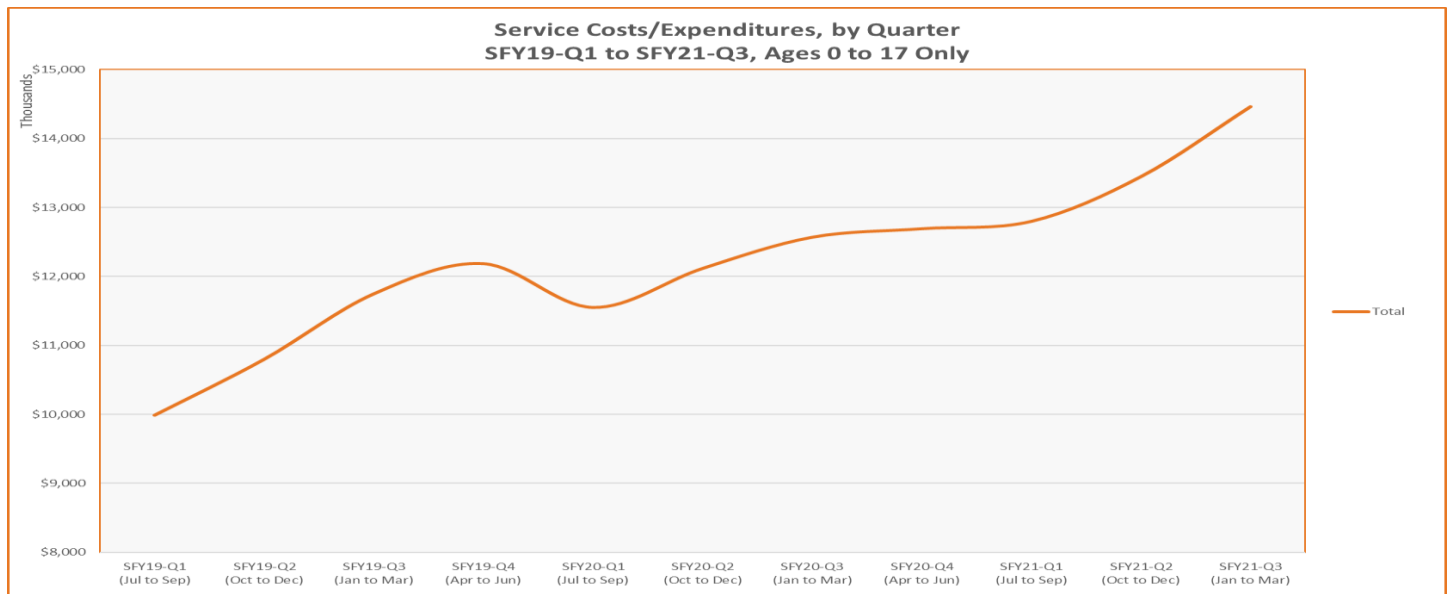
QoQ (SFY21-Q2 to SFY21-Q3): 7.5%

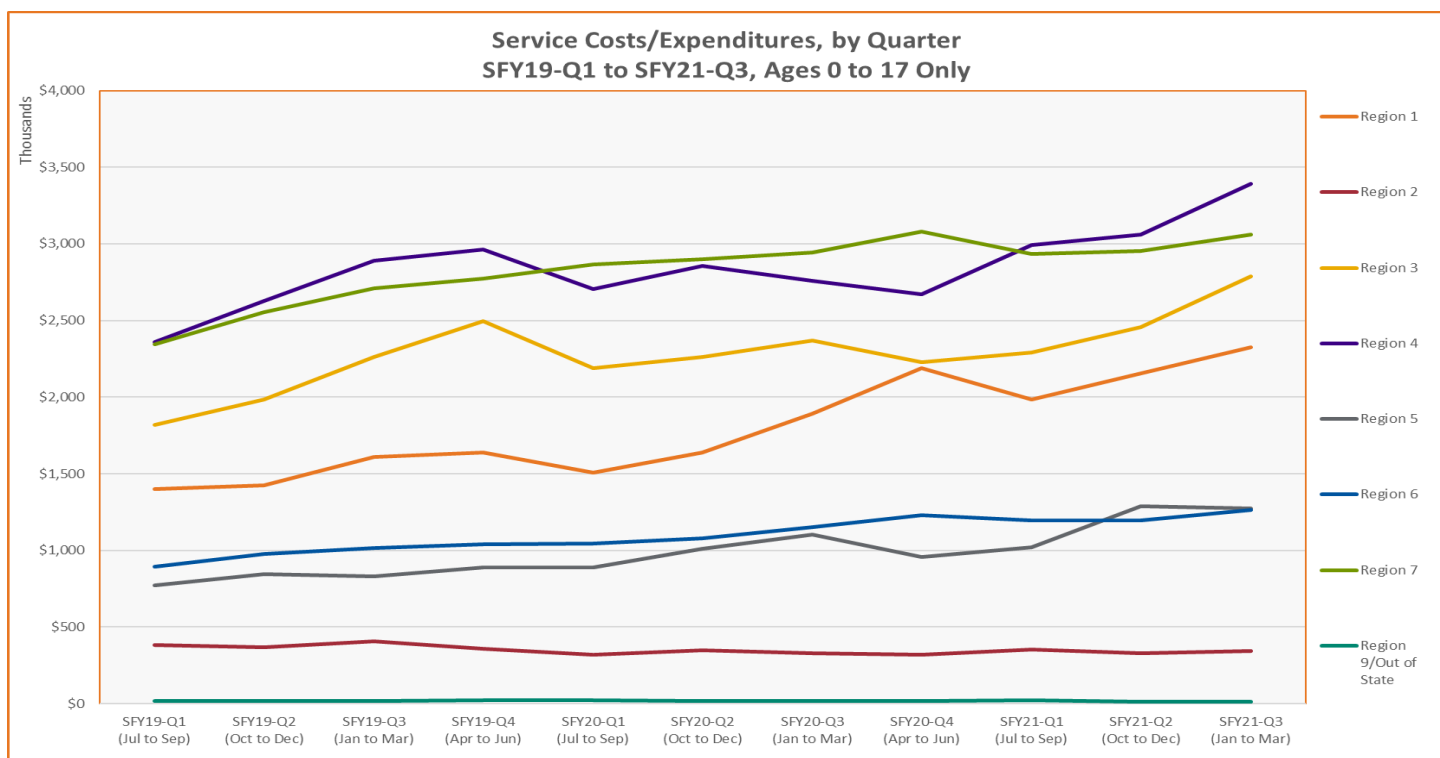
YoY (SFY20-Q3 to SFY21-Q3): 15.1%

**Table #31: Service Costs - 7/1/2018 to 3/31/2021 -  
Ages 0 to 17 Only**

Description: This table displays the total dollars paid, by quarter, for services rendered to members between the ages of 0 to 17 between service date range 7/1/2018 to 3/31/2021. Data as of 5/13/21.

Region.	SFY19-Q1 (Jul to Sep)	SFY19-Q2 (Oct to Dec)	SFY19-Q3 (Jan to Mar)	SFY19-Q4 (Apr to Jun)	SFY20-Q1 (Jul to Sep)	SFY20-Q2 (Oct to Dec)	SFY20-Q3 (Jan to Mar)	SFY20-Q4 (Apr to Jun)	SFY21-Q1 (Jul to Sep)	SFY21-Q2 (Oct to Dec)	SFY21-Q3 (Jan to Mar)
Region 1	\$ 1,401,287	\$ 1,425,126	\$ 1,607,386	\$ 1,640,487	\$ 1,507,697	\$ 1,637,899	\$ 1,889,807	\$ 2,190,279	\$ 1,984,995	\$ 2,153,371	\$ 2,324,561
Region 2	\$ 380,943	\$ 366,544	\$ 407,471	\$ 356,614	\$ 320,376	\$ 347,238	\$ 331,672	\$ 317,964	\$ 352,185	\$ 328,924	\$ 345,251
Region 3	\$ 1,818,624	\$ 1,984,375	\$ 2,262,959	\$ 2,496,213	\$ 2,190,269	\$ 2,262,511	\$ 2,369,729	\$ 2,225,906	\$ 2,292,415	\$ 2,456,181	\$ 2,787,790
Region 4	\$ 2,357,851	\$ 2,625,806	\$ 2,891,555	\$ 2,963,992	\$ 2,704,842	\$ 2,858,128	\$ 2,758,705	\$ 2,672,693	\$ 2,993,010	\$ 3,059,515	\$ 3,389,914
Region 5	\$ 774,486	\$ 847,605	\$ 833,087	\$ 891,403	\$ 890,145	\$ 1,011,850	\$ 1,103,959	\$ 958,237	\$ 1,020,758	\$ 1,290,090	\$ 1,275,756
Region 6	\$ 891,966	\$ 975,420	\$ 1,014,995	\$ 1,038,913	\$ 1,045,883	\$ 1,078,119	\$ 1,153,883	\$ 1,229,562	\$ 1,197,795	\$ 1,193,998	\$ 1,263,556
Region 7	\$ 2,344,737	\$ 2,554,570	\$ 2,712,035	\$ 2,775,393	\$ 2,865,582	\$ 2,900,628	\$ 2,944,437	\$ 3,080,425	\$ 2,936,345	\$ 2,953,088	\$ 3,061,901
Region 9/Out of State	\$ 15,397	\$ 18,085	\$ 17,356	\$ 22,228	\$ 24,778	\$ 19,386	\$ 16,063	\$ 16,679	\$ 21,624	\$ 12,956	\$ 14,411
<b>Total</b>	<b>\$ 9,985,292</b>	<b>\$ 10,797,531</b>	<b>\$ 11,746,846</b>	<b>\$ 12,185,243</b>	<b>\$ 11,549,571</b>	<b>\$ 12,115,759</b>	<b>\$ 12,568,254</b>	<b>\$ 12,691,743</b>	<b>\$ 12,799,126</b>	<b>\$ 13,448,122</b>	<b>\$ 14,463,139</b>





**Table 32: Expenditure per member per quarter:**

Region	Q1 Number Served			Per person Expenditure Per Region	Q2 Number Served			Per person Expenditure Per Region	Q3 Number served			Per person Expenditure Per Region	Q3 Ranking
	Other Medicaid	1915(i)	Total	Quarterly Expenditure/ Total number served	Other Medicaid	1915(i)	Total	Quarterly Expenditure/ Total number served	Other Medicaid	1915(i)	Total	Quarterly Expenditure/ Total number served	
1	1,601	255	1,856	\$ 1,063.98	1642	241	1883	\$1098.49	1,771	239	2,010	\$1,156.50	#1
2	498	86	584	\$ 601.15	466	87	553	\$556.67	457	89	546	\$632.33	#7
3	2,952	294	3,246	\$ 704.45	3038	310	3348	\$709.44	3,196	295	3,491	\$798.56	#4
4	3,185	494	3,679	\$ 810.71	3311	517	3828	\$763.62	3,527	518	4,045	\$838.05	#3
5	1,389	155	1,544	\$ 657.95	1500	144	1644	\$729.97	1,721	143	1,864	\$684.42	#6
6	1,412	161	1,573	\$ 756.23	1314	174	1488	\$760.70	1,463	183	1,646	\$767.65	#5
7	2,466	570	3,036	\$ 964.67	2481	560	3041	\$935.28	2,684	560	3,244	\$943.87	#2
9	56	6	62	\$ 348.13	33	3	36	\$333.57	25	0	25	\$576.44	NA
<b>Total</b>	<b>13,559</b>	<b>2,021</b>	<b>15,580</b>	<b>\$ 818.41</b>	<b>13,785</b>	<b>2036</b>	<b>15821</b>	<b>\$813.02</b>	<b>14,844</b>	<b>2,027</b>	<b>16,871</b>	<b>\$857.28</b>	



### **What is this data telling us?**

Expenditure per member per region is based on number of clients served and expenditure by region -For SFY Q3 the average cost statewide is \$857.28. Note that there is substantial difference between regions and \$1,156.50 in Region 1 (35% over average) is highest expenditure per client and \$632.33 (26% below average) is the lowest per client in Region 2.

### **QMIA Council Action Items or Recommendations:**

**10)** Recommendation- QMIA Council to request YES partners to evaluate variances in expenditures by region.

## 11. Supplementary Section of the QMIA Quarterly Report:

The Supplementary QMIA Report is assembled with information about children, youth, and families in Idaho and from data collected by the Department of Health and Welfare's Divisions of Behavioral Health (DBH), Medicaid, and Family and Community Services (FACS), as well as the Idaho Department of Juvenile Corrections (IDJC), and the Idaho State Department of Education (SDE). Data in the supplemental portion of the QMIA Quarterly may include more detailed descriptions of youth receiving services, access and barriers to care such as gaps in services, workforce development, youth and family experience and engagement, appropriate use of services, effectiveness of services and quality improvement projects.

### YES Communications

## YES WEBSITE ANALYTICS

Reporting Period: January 1, 2021 — March 31, 2021

### VISITORS AND PAGES

#### Visits

**4,111**

% of Total: 100.00% (4,111)



#### Unique Visitors

**2,627**

% of Total: 100.00% (2,627)



#### Type of Visitors

■ New Visitor ■ Returning Visitor



#### Visits by Location

City	Sessions
Boise	1,304
Meridian	294
Idaho Falls	149
(not set)	129
Nampa	123
Seattle	120
Salt Lake City	117
Twin Falls	114
Pocatello	106
Coeur d'Alene	97

#### Pageviews

● Pageviews

400



#### Unique Page Views Top 10: 1/1/21-3/31/21

Page Title	Unique Pageviews	Pageviews
YES   Home	3,256	3,774
Youth Empowerment Services > ContactUs	1,063	1,178
Quick Start	530	618
Parents	407	451
Youth Empowerment Services > YESTools > PracticeManual	337	379
Project Information	286	365
Youth Empowerment Services > About YES > YESOverview	271	289
Publications	236	402
Youth Empowerment Services > YESTools > YESTraining	211	226
Youth Empowerment Services > GettingStarted > Youth	195	250

#### Average Pages per Visit

**2.40**

Avg for View: 2.40 (0.00%)

#### Average Visit Duration

**00:02:58**

Avg for View: 00:02:58 (0.00%)

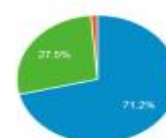
#### Bounce Rate

**42.30%**

Avg for View: 42.30% (0.00%)

#### Visits by Device

■ desktop ■ mobile ■ tablet



#### Visits by Device

Device Category	Sessions	Bounce Rate
desktop	2,926	39.27%
mobile	1,131	50.75%
tablet	54	29.63%

#### Visits by Traffic Site

Traffic Type	Sessions
organic	1,978
direct	1,779
referral	354

**Direct** traffic categorizes visits that do not come from a referring URL, such as a search engine, another website with a link to our site, etc. **Organic** traffic is defined as visitors coming from a search engine, such as Google or Bing. (non-paid ad source). **Referral** traffic records visits that come from a link to a page on our site from another website, social media page and sometimes email (although Outlook and some other email programs may not pass along referral information, so these may show up as Direct traffic. See page 3 for a list of top traffic sources.

# YES WEBSITE ANALYTICS

Reporting Period: January 1, 2021 — March 31, 2021

## TRAFFIC SOURCES AND FILES

### Most Engaging Traffic Sources

Source / Medium	Sessions	Pages / Session
(direct) / (none)	1,779	2.26
google / organic	1,776	2.46
bing / organic	150	2.53
idaholas.com / referral	44	2.30
byui.instructure.com / referral	42	1.14
yahoo / organic	40	3.20
m.facebook.com / referral	34	1.76
livebetteridaho.org / referral	28	2.89
optumidaho.com / referral	24	2.58
idhw.webex.com / referral	23	1.83

### QMIA Reports

	Q1 Downloads
1. <a href="#">QMIA Quarterly</a> —April 2021	0 (As of April 12)
2. <a href="#">QMIA Quarterly</a> —January 2021	43 (As of April 12)
3. <a href="#">Rights and Resolutions</a> —April 2021	0 (As of April 12)
4. <a href="#">Rights and Resolutions</a> —January 2021	5 (As of April 12)
5. <a href="#">WinS</a> —Q1 SFY 2021	4 (As of April 12)

### File Downloads

File refers to file downloads.

External refers to clicks on links to other websites.

Event Category	Unique Events
File Download	2,458

File downloads + external site link clicks.

### Files Downloaded - Top 10

File Name	Q1 Downloads
1. <a href="#">Getting Started with YES</a>	498
2. <a href="#">YES 101</a>	288
3. <a href="#">Mental Health Checklist for Youth</a>	168
4. <a href="#">Youth MH Checklist for Families</a>	159
5. <a href="#">YES Practice Manual</a>	134
6. <a href="#">YES Overview Trifold</a>	117
7. <a href="#">Youth Crisis and Safety Plan Guide</a>	111
8. <a href="#">MH Crisis Definition and Expectations</a>	104
9. <a href="#">YES 101—Text Only</a>	76
10. <a href="#">Getting Started Contacts</a>	61

### Access to YES- Medicaid/Optum

A comparison across the state compared to the total Idaho population age 0-18\* indicates that the average number of children and youth served in SFY 2020 per thousand is 62. Regions 3 and 7 served more than the average while regions 2, 4, 5, and 6 were below the average. Region 1 was approximately the same as the average. Region 2 had the lowest number served per thousand.

SFY 2020- Rate per thousand regional population\* - total population under 18

Region	1	2	3	4	5	6	7	Total
#s served	3,451	1,023	6,727	7,117	2,953	3,057	5,323	29,672
Idaho youth Population 2019	56,753	25,631	85,805	130,947	59,547	53,627	69,294	481,604
Number in 1000s	57	26	86	131	60	54	69	482
Rate per 1,000	61	40	78	54	50	57	77	62

\*Note Census estimate is based on 0-18 while YES serves 0-17.

Rate per thousand Medicaid members– total Medicaid members under 18 (includes Medicaid members that do not meet criteria for YES)

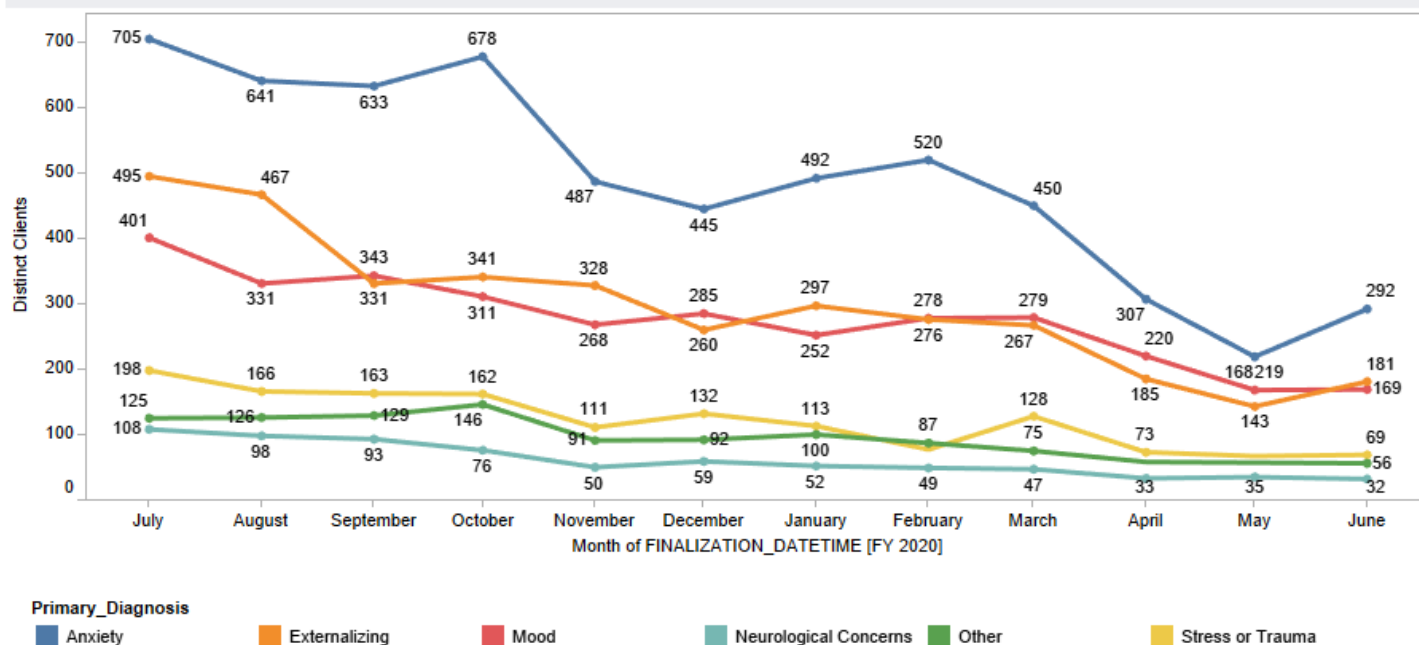
	Q1	Q2 SFY 2019	Q3 SFY 2019	Q4 SFY 2019	Q1 SFY 2020	Q2 SFY 2020	Q3 SFY 2020	Q4 SFY 2020	Q1 SFY 2021	Q2 SFY 2021	Q3 SFY 2021
Total Utilizers		16,450	16,876	17,676	18,090	16,937	17,475	15,322	15,385		
Total Distinct members		200,329	201,411	193,888	196,143	192,454	178,005	181,831	186,163		
Percent Utilizers		8.21%	8.38%	9.12%	9.22%	8.8%	9.82%	8.43%	8.26%		
Rate Per 1,000		82	84	91	92	88	98	84	83		

## YES Diagnosis

The following charts are based on Diagnosis data from the ICANS system. Anxiety is the most frequent diagnosis, although there may be a downward trend.

Diagnosis SFY 2020

*Clients Served Trends (Unduplicated Client Count) by Diagnosis by Fiscal Month for SFY 2020 for Assessment Type is Initial*



## Diagnosis by month – SFY21 Q3

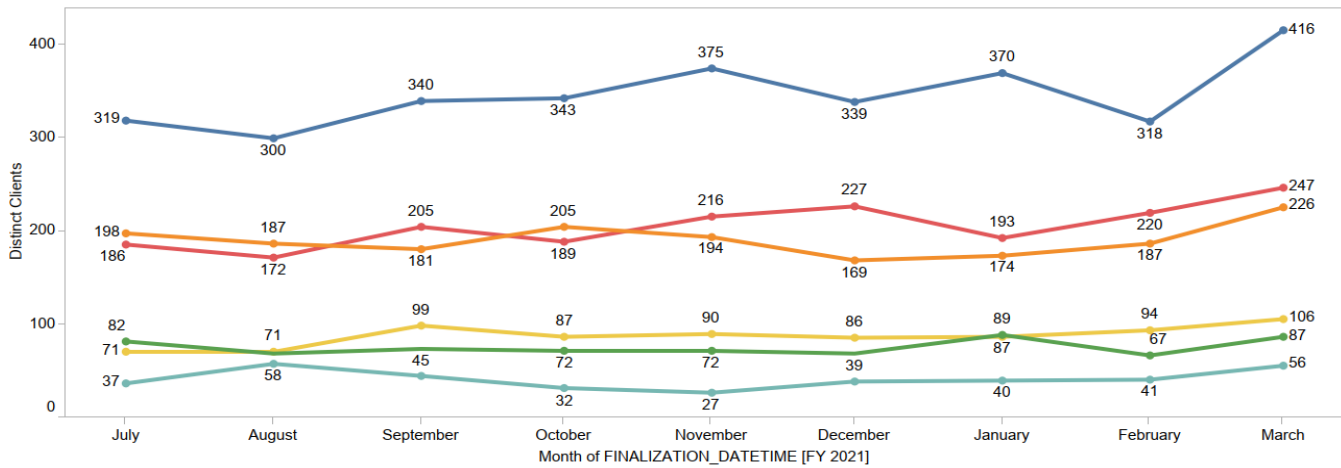
**Clients Served(Unduplicated Client Count) by Diagnosis by Fiscal Month for SFY 2021 for Assessment Type is Initial**

Month of FINALIZATION_DATETIME										
Primary_Diagnosis	July 2020	August 2020	September 2020	October 2020	November 2020	December 2020	January 2021	February 2021	March 2021	Grand Total
Anxiety	319	300	340	343	375	339	370	318	416	3,076
Externalizing	198	187	181	205	194	169	174	187	226	1,668
Mood	186	172	205	189	216	227	193	220	247	1,801
Neurological Concerns	37	58	45	32	27	39	40	41	56	360
Other	82	69	74	72	72	69	89	67	87	673
Stress or Trauma	71	71	99	87	90	86	87	94	106	767
<b>Grand Total</b>	<b>889</b>	<b>854</b>	<b>941</b>	<b>925</b>	<b>972</b>	<b>923</b>	<b>949</b>	<b>926</b>	<b>1,136</b>	<b>8,091</b>

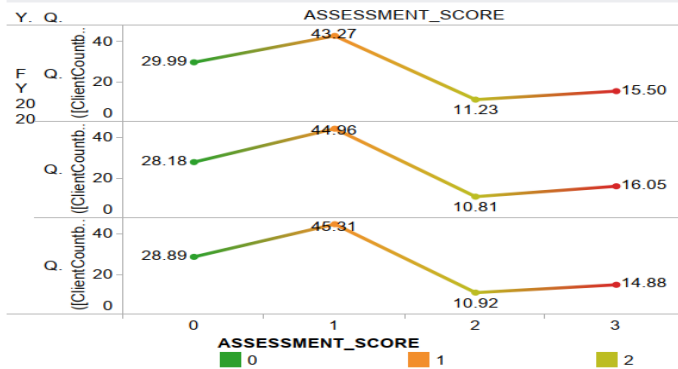
### Primary\_Diagnosis

■ Anxiety
 ■ Externalizing
 ■ Mood
 ■ Neurological Concerns
 ■ Other
 ■ Stress or Trauma

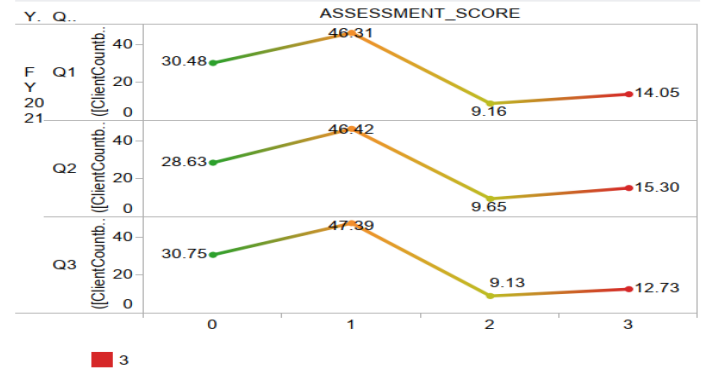
**Clients Served Trends (Unduplicated Client Count) by Diagnosis by Fiscal Month for SFY 2021 for Assessment Type is Initial**



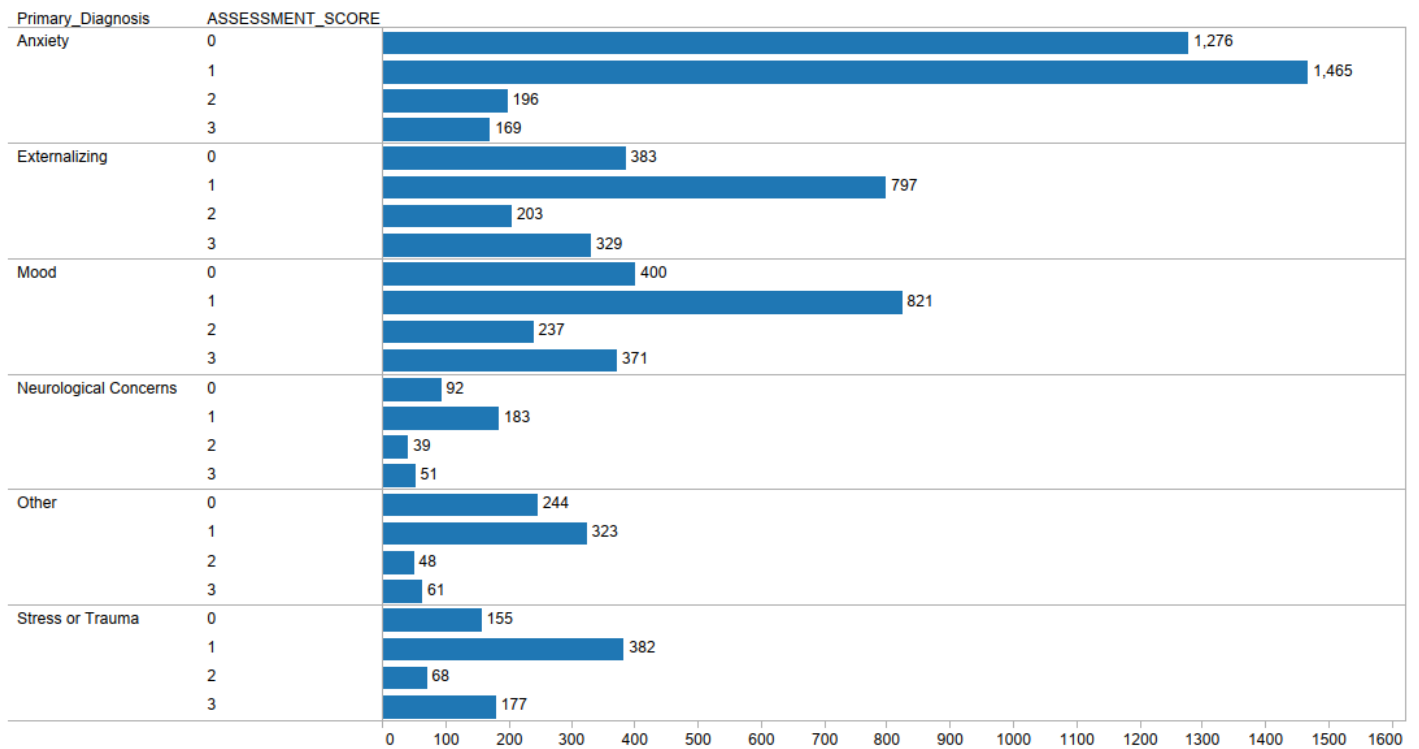
**Client Served % by quarter and by assessment score for Q1, Q2, Q3 SFY 2020**



**Client Served % by quarter and by assessment score for Q1, Q2, Q3 SFY 2021**



## Diagnosis and CANS scores- SFY2021 Q3



## Are children safe, in school and out of trouble?

DBH has begun using the CANS data to assess if children and youth are safe, in school and out of trouble. Each of the following charts is information from the CANS at intake. Data is inclusive of Q1-Q3

Are children safe? Based on the results of the initial CANS the following are the ratings on Suicide Watch, Danger to others, Self-Mutilation, Self-Harm, Flight Risk. For SFY 2021 Q1 – Q3 approximately 78% on average have no evidence of safety issues (score of zero on the CANS), 17% have some safety concerns noted, 5% have safety issues that are interfering with their functioning, and 1% are having sever problems with safety issues.

### CMH CANS Clients (SAFE)

	SUICIDE_WATCH					
	Null	0	1	2	3	Grand Total
Suicide Watch	1	6,007	1,772	408	60	8,091
% along SUICIDE_...	0.01%	74.24%	21.90%	5.04%	0.74%	100.00%

**SUICIDE\_WATCH**  
Assessment Score  
Applies to SUICIDE WATCH  
Table only  
All

	DANGER_TO_OTHERS					
	Null	0	1	2	3	Grand Total
Distinct Clients	1	6,302	1,359	568	47	8,091
% along DANGER_T..	0.01%	77.89%	16.80%	7.02%	0.58%	100.00%

**DANGER\_TO\_OTHERS**  
Assessment Score  
Applies to DANGER TO OTHERS  
Table only  
All

	SELF_MUTILATION					
	Null	0	1	2	3	Grand Total
Distinct Clients	1	6,141	1,494	587	31	8,091
% along SELF_MUTILA..	0.01%	75.90%	18.46%	7.25%	0.38%	100.00%

**SELF\_MUTILATION**  
Assessment Score  
Applies to SELF MUTILATION  
Table only  
All

	SELF_HARM					
	Null	0	1	2	3	Grand Total
Distinct Clients	1	6,540	1,279	432	38	8,091
% along SELF_HARM	0.01%	80.83%	15.81%	5.34%	0.47%	100.00%

**SELF\_HARM**  
Assessment Score  
Applies to SELF HARM  
Table only  
All

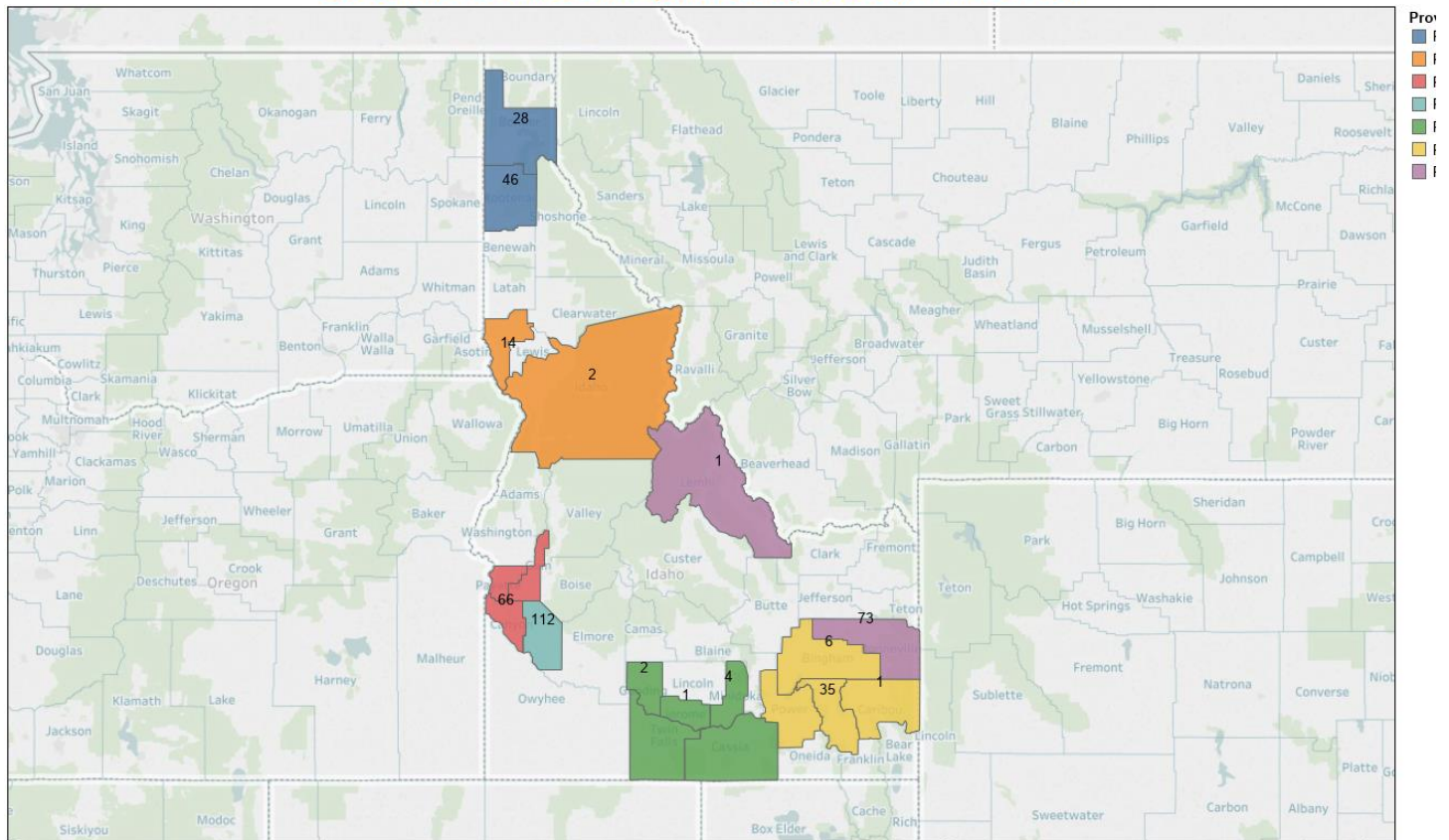
	FLIGHT_RISK					
	Null	0	1	2	3	Grand Total
Distinct Clients	1	6,855	1,028	278	49	8,091
% along FLIGHT_RISK	0.01%	84.72%	12.71%	3.44%	0.61%	100.00%

**FLIGHT\_RISK**  
Assessment Score  
Applies to FLIGHT RISK  
Table only  
All

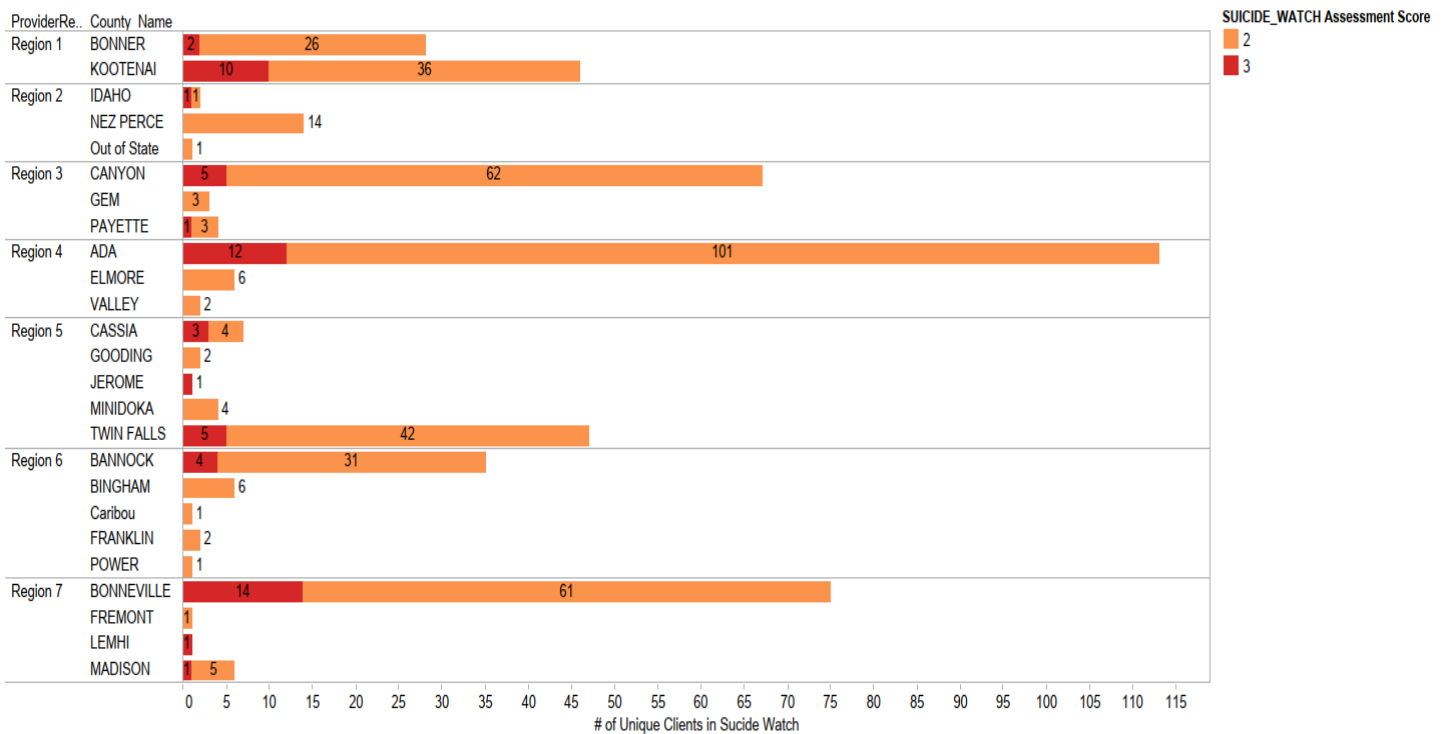


Locations of children and youth with higher risk of safety issues by county:

**SAFE/Suicide Watch Assessment (Score 2 and 3) for SFY 2021 Till March 2021**



### Suicide Watch (Safe Domain) (3)





## In School

### CANS scores on School Attendance and School Behavior

#### CMH CANS Clients (In School)

These Filters apply to full dashboard

AGENCY\_NAME  
All

STATE\_FISCAL\_YEAR  
2021

Fiscal Month  
All

County\_Name  
All

AGE  
All

GENDER  
All

Race/Ethnicity  
All

SCHOOL\_ATTENDANCE (Applies to School Attendance items only)  
Assessment Score  
All

SCHOOL\_Behavior (Applies to School Behavior items only)  
Assessment Score  
All

School Attendance							
	0	1	2	3	Null	N/A	Grand T..
Distinct Clie..	5,362	1,191	603	192	1	962	8,091
%	66.27%	14.72%	7.45%	2.37%	0.01%	11.89%	100.00%

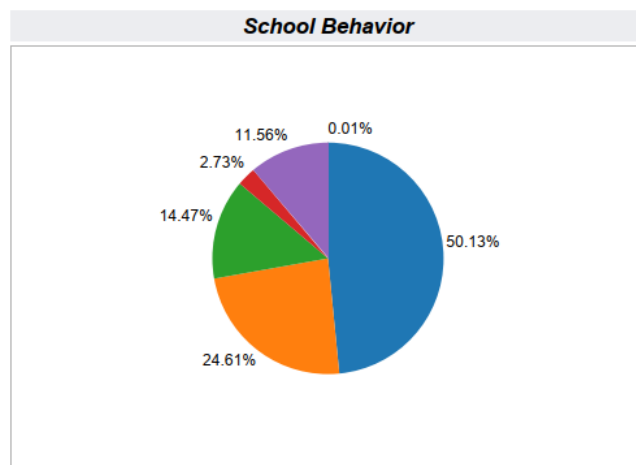
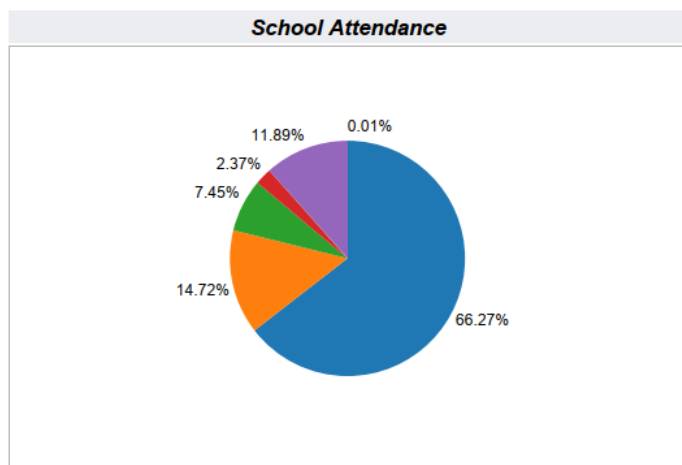
School Behavior							
	Null	0	1	2	3	N/A	Grand ..
Distinct Clie..	1	4,056	1,991	1,171	221	935	8,091
%	0.01%	50.13%	24.61%	14.47%	2.73%	11.56%	100.00%

SCHOOL\_ATTENDANCE Assessment Score

Null 0 1 2 3 N/A

SCHOOL\_BEHAVIOR Assessment Score

Null 0 1 2 3 N/A



#### What is School Behavior?

This item on the CANS rates the behavior of the individual in school or school-like settings (e.g., Head Start, pre-school). A rating of '3' would indicate an individual who is still having problems after special efforts have been made (e.g., problems in a special education class).

#### Questions to Consider

- How is the individual behaving in school?
- Has the individual had any detentions or suspensions?
- Has the individual needed to go to an alternative placement?
- What do these behaviors look like?
- Is it consistent among all subjects/classes?
- How long has it been going on?
- How long has the individual been in the school?

**CMH CANS Clients (Juvenile Justice)**

These Filters apply to full dashboard

AGENCY\_NAME All     
 STATE\_FISCAL\_YEAR 2021     
 Fiscal Month All     
 County\_Name All     
 AGE All     
 GENDER All     
 Race/Ethnicity All

LEGAL\_ISSUES ( Applies to Legal Issues items only)  
 LEGAL\_ISSUES  
 All

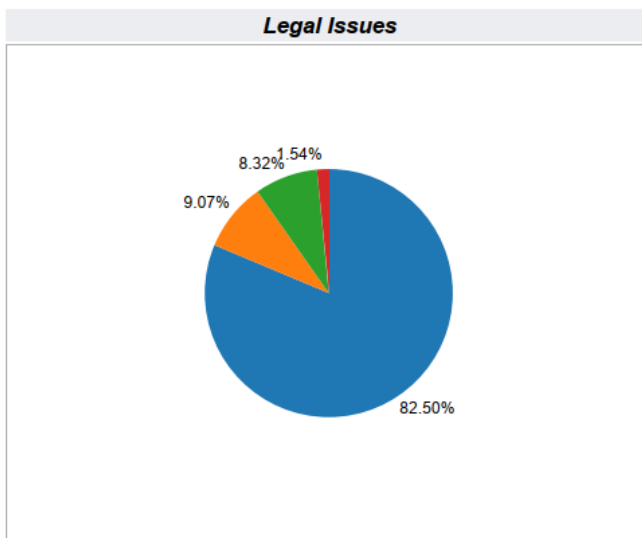
RISK\_BEHAVIORS\_DELINQUENCY ( Applies to Delinquency items only)  
 RISK\_BEHAVIORS\_DELINQUENCY  
 All

Legal Issues						
	Null	0	1	2	3	Grand T..
Distinct Clients	1	6,675	734	673	125	8,091
% LEGAL_ISSUES	0.01%	82.50%	9.07%	8.32%	1.54%	100.00%

Delinquency						
	Null	0	1	2	3	Grand ..
Distinct Clients	1	6,990	879	293	36	8,091
% BEHAVIO..	0.01%	86.39%	10.86%	3.62%	0.44%	100.00%

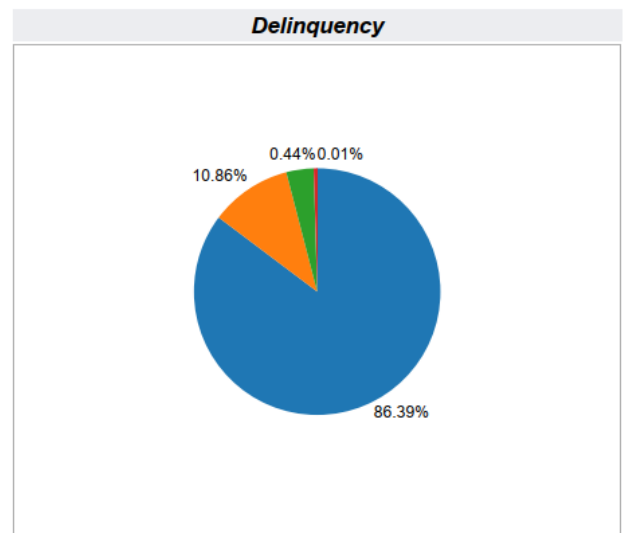
LIFE FUNCTIONING LEGAL ISSUES

Null 0 1 2 3



RISK\_BEHAVIORS\_DELINQUENCY

Null 0 1 2 3



# Appendix A: Glossary- updated June 2021

<b>Child and Adolescent Needs and Strengths (CANS)</b>	A tool used in the assessment process that provides a measure of a child's or youth's needs and strengths.
<b>Class Member</b>	Idaho residents with serious emotional disturbance (SED) who are under the age of 18, have a diagnosable mental health condition, and have a substantial functional impairment.
<b>Distinct Number of Clients</b>	Child or youth is counted once within the column or row but may not be unduplicated across the table.
<b>EPSDT</b>	Early and Periodic Screening, Diagnostic and Treatment (EPSDT), which is now referred to as Children's Medicaid, provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid. EPSDT is key to ensuring that children and adolescents receive appropriate preventive, dental, mental health, developmental, and specialty services. (National website Medicaid.gov).
<b>IEP</b>	The Individualized Education Plan (IEP) is a written document that spells out a child or youth's learning needs, the services the school will provide and how progress will be measured.
<b>Intensive Care Coordination (ICC)</b>	A case management service that provides a consistent single point of management, coordination, and oversight for ensuring that children who need this level of care are provided access to medically necessary services and that such services are coordinated and delivered consistent with the Principles of Care and Practice Model.
<b>Jeff D. Class Action Lawsuit Settlement Agreement</b>	The Settlement Agreement that ultimately will lead to a public children's mental health system of care (SoC) that is community-based, easily accessed and family-driven and operates other features consistent with the System of Care Values and Principles.
<b>QMIA</b>	A quality management, improvement, and accountability program.
<b>Serious Emotional Disturbance (SED)</b>	The mental, behavioral, or emotional disorder that causes functional impairment and limits the child's functioning in family, school, or community activities. This impairment interferes with how the youth or child needs to grow and change on the path to adulthood, including the ability to achieve or maintain age-appropriate social, behavioral, cognitive, or communication skills.
<b>SFY</b>	The acronym for State Fiscal Year, which is July 1 to June 30 of each year.
<b>SFYTD</b>	The acronym for State Fiscal Year to Date.
<b>System of Care</b>	An organizational philosophy and framework that involves collaboration across agencies, families, and youth for improving services and access, and expanding the array of coordinated community-based, culturally and linguistically competent services and supports for children.
<b>TCOM</b>	The Transformational Collaborative Outcomes Management (TCOM) approach is grounded in the concept that the different agencies that serve children all have their own perspectives and these different perspectives create conflicts. The tensions that result from these conflicts are best managed by keeping a focus on common objectives — a shared vision. In human service enterprises, the shared vision is the person (or people served). In health care, the shared vision is the patient; in the child serving system, it is the child and family, and so forth. By creating systems that all return to this shared vision, it is easier to create and manage effective and equitable systems.
<b>Unduplicated Number of Clients</b>	Child or youth is counted only once in the column or row
<b>Youth Empowerment Services (YES)</b>	The name chosen by youth groups in Idaho for the new System of Care that will result from the Children's Mental Health Reform Project.
<b>Other YES Definitions</b>	System of Care terms to know: <a href="https://yes.idaho.gov/youth-empowerment-services/resources/terms-to-know/yes-system-of-care-terms-to-know/">https://yes.idaho.gov/youth-empowerment-services/resources/terms-to-know/yes-system-of-care-terms-to-know/</a> YES Project Terms to know: <a href="https://yes.idaho.gov/youth-empowerment-services/resources/terms-to-know/yes-project-terms-to-know/">https://yes.idaho.gov/youth-empowerment-services/resources/terms-to-know/yes-project-terms-to-know/</a>

# Appendix B – 2021 Annual Estimated Number of Children who will qualify for YES -Excerpt from April updated 3-1-2021

## Note: Initially reported in QMIA – Q April 2021

**Background:** Based on the Jeff D Settlement Agreement an annual estimate for number of children and youth who may qualify for YES must be established.

**Report:** There is no single national report or survey that definitively estimates the prevalence of serious emotional disturbance (SED) in the US. As a result, the estimated number of children and youth who may qualify for YES services is based on an estimate of prevalence of SED and several population estimates. This estimated range is based on the following population data and calculations:

Population numbers utilized for estimated number who will qualify for YES:

- 481,604<sup>7</sup> children and youth ages 0-18 in Idaho in 2019.
- 189,249 Medicaid members in Idaho ages 0-17 (Medicaid members number updated as of 3-1-2021<sup>8</sup>).
- 199,139 children and youth in living in poverty in Idaho according to the National Center for Children in Poverty in 2018 (see [http://www.nccp.org/profiles/ID\\_profile\\_6.html](http://www.nccp.org/profiles/ID_profile_6.html)).<sup>9</sup>

Estimated prevalence of SED for children and youth who may qualify for YES:

To create the range of expected number of children and youth to be served in SFY 21, two methods (previously used by Boise State University (BSU) and Optum) for establishing the prevalence rate were utilized. The first method is the expected prevalence of mental illness (6%) based on the estimated percent of children with extreme impairment according to the Substance Abuse and Mental Health Services Administration (SAMHSA<sup>10</sup>). (<https://yes.idaho.gov/youth-empowerment-services/about-yes/yes-history/?target=7>) . The second method is based on Optum trends in service utilization data for SFY 2020, which indicates that based on rate per thousand Medicaid members we are currently serving more than 6% and indicates that in Idaho the projected prevalence may be higher than the national prevalence, 6.9% (see SED Prevalence chart in Section 10 showing rate per thousand members). The additional use of a third method, prevalence in the poverty population, was considered as well as it added a dimension of the estimating prevalence that was not calculated in the past (11.7%). The QMIA Council has also included the expected prevalence rate of 8% as this was a number used historically in the Jeff D lawsuit to estimate the number of children and youth in need of mental health services.

Based on the three methods of predicting the number of the children and youth who may meet the criteria to be eligible for YES services, the range of the number of children and youth in Idaho who may qualify for YES services in SFY 2021 is approximately 13,000<sup>11</sup> to 33,000<sup>12</sup> (see chart below, numbers are rounded to nearest 1,000).

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<sup>7</sup> The data in this report of 481,604 children and youth has been updated as the number reported last month was incorrectly understated.

<sup>8</sup> The number of Medicaid members varies monthly - see Appendix B for updated details on Medicaid Members for Dec 2020.

<sup>9</sup> Poverty is a strong predictor of mental health needs in children and youth. (Farmer et al. 2001). According to the National Survey of America's Families (NSAF), 11.7 percent of poor children have an emotional/behavioral issue using parent reports from the Child Behavior Checklist, while only 6.4 percent of nonpoor children have such issues (Howell 2004).

<sup>10</sup> SAMHSA report from 2017 noted the prevalence range between 6.8 and 11.5 % (Page 20, [https://www.samhsa.gov/sites/default/files/programs\\_campaigns/ismicc\\_2017\\_report\\_to\\_congress.pdf](https://www.samhsa.gov/sites/default/files/programs_campaigns/ismicc_2017_report_to_congress.pdf))

<sup>11</sup> 189,249 Medicaid members X 6.9% = 13,058 or approximately 13,000

<sup>12</sup> 424,000 children and youth in Idaho X 6.9% = 33,231 or approximately 33,000

Table B1: Methods used for estimation of need of mental health services

Population estimate based on:	Population	6%	6.9%	8%	11.7%
Total # of children in Idaho under 18	481,604	28,896	33,231	38,528	NA
Total number of Medicaid Members under 18	189,249	11,355	13,058	15,140	22,142
Total number of children living in poverty	199,139	11,948	13,741	15,931	23,299

It has been noted that the estimated range of number of children and youth who need YES services is too broad. The QMIA Council recognizes that the Interagency Governance Team (IGT) would like to have a better-defined measure of compliance with the Jeff D Settlement Agreement. While further work is in progress to define/determine the target for successful completion of requirements in the Jeff D Settlement Agreement, the QMIA Council will utilize the target of providing services to **23,000** children and adolescents (70% of 33,000) so that an initial analysis of gaps in services may be assessed.

#### Estimated need per region

In addition to the estimate of the number of children and youth statewide who may qualify for YES the QMIA Council requested an analysis of estimated needs by region.

To establish estimates for the number of children and youth that need services in each region the percent of children and youth in each region was multiplied by the estimated target of children who may qualify for YES (23,000) and rounded to the closest 50. The Regional Estimated Target will be used as a rough but serviceable benchmark to assess regions current service delivery.

Table B2: Estimated annual target number for SFY 2021 who need services by region:

	1	2	3	4	5	6	7	Total
Idaho youth Population 2019	56,753	25,631	85,805	130,947	59,547	53,627	69,294	481,604
Percent of region population vs state	11.78%	5.32%	17.82%	27.19%	12.36%	11.14%	14.39%	100%
Regional Estimated Target <sup>13</sup>	2,700	1,200	4,100	6,250	2,850	2,550	3,300	23,000

To determine if there were gaps in regional services the total number of all children and youth with Medicaid who were served in SFY 2020 was multiplied by the percentage thought to be eligible for YES (70%). The estimated YES eligible served was then compared to the Regional Estimated Target.

Table B3: Estimated gaps and variance by Region

SFY 2020	1	2	3	4	5	6	7	Total
Total Unduplicated Number served 2020 <sup>14</sup>	3,451	1,023	6,727	7,117	2,953	3,057	5,323	29,672
Estimated YES eligible served <sup>15</sup>	2,415	716	4,709	4,982	2,067	2,140	3,726	20,770
Regional Estimated Target <sup>16</sup>	2,700	1,200	4,100	6,250	2,850	2,550	3,300	23,000
Estimated Variance <sup>17</sup>	-285	-484	609	-1268	-783	-410	426	2195
Estimated Percent below target <sup>18</sup>	-10.6%	-40.3%	NA	-20.3%	-27.2%	-16.1%	NA	-9.6%

Statewide the estimated number of children and youth eligible for YES who received services is 20,770 which is 9.6% less than the statewide estimated target of 23,000. Based on these Regions 3 and 7 appear to be serving at least the target

<sup>13</sup> Estimated Target = 23,000 which is 70% of the high range (70% X 33,000 = 23,000).

<sup>14</sup> Total number served through Optum SFY 2020 as reported in the QMIA Quarterly report published in Sept 2020.

<sup>15</sup> Regional estimates are based the percent of those eligible (70%) and not eligible for YES (30%) as noted in Section 3 of the QMIA report multiplied times the estimated target by region.

<sup>16</sup> See footnote #6

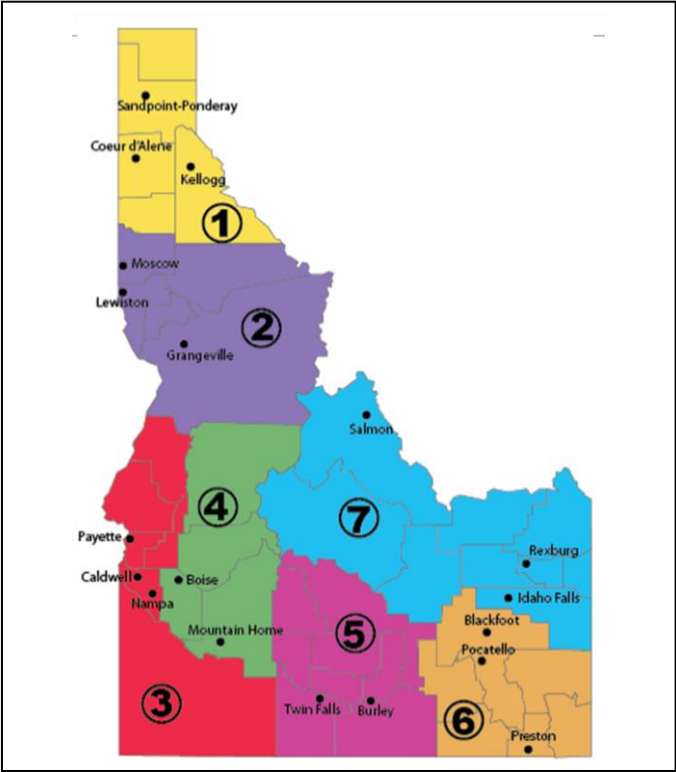
<sup>17</sup> Estimated Variance = Difference between Estimated target and Estimated YES eligible served

<sup>18</sup> Estimated Percent below target= Estimated Variance / Estimated Target

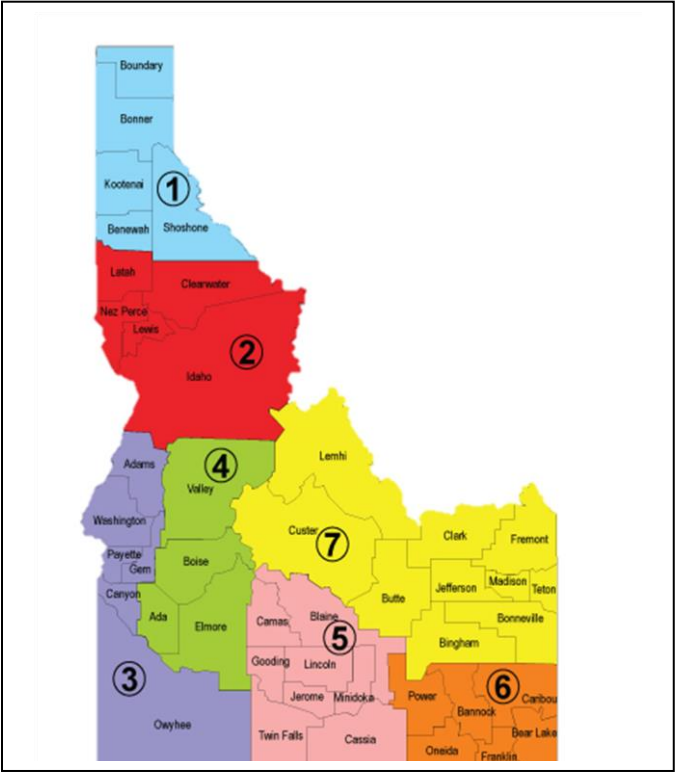
number to be served. However, it is notable that based on these estimated targets regions 1, 2, 4, 5 and 6 appear to be underserved- with region 2 as the highest percent.

# Appendix C- Regional Maps

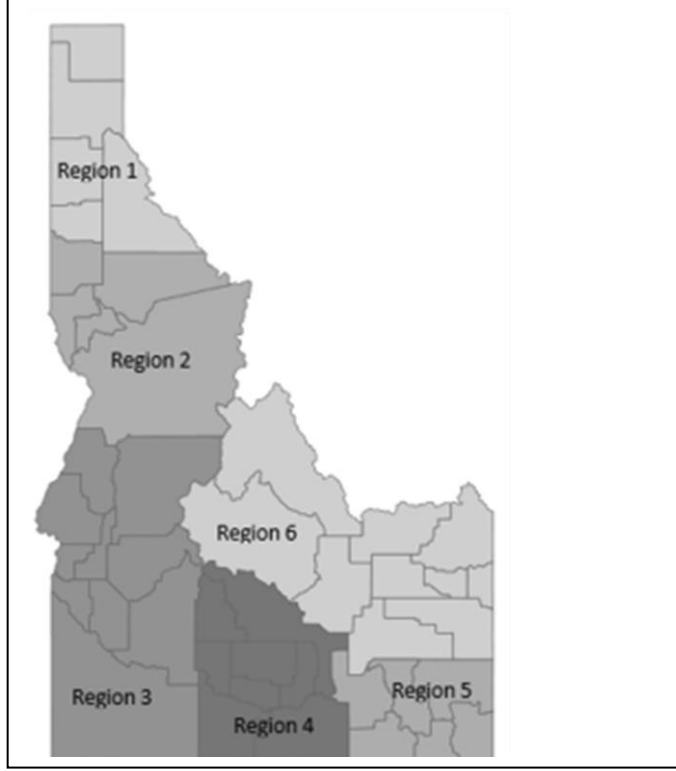
Idaho Department of Health and Welfare: Medicaid,



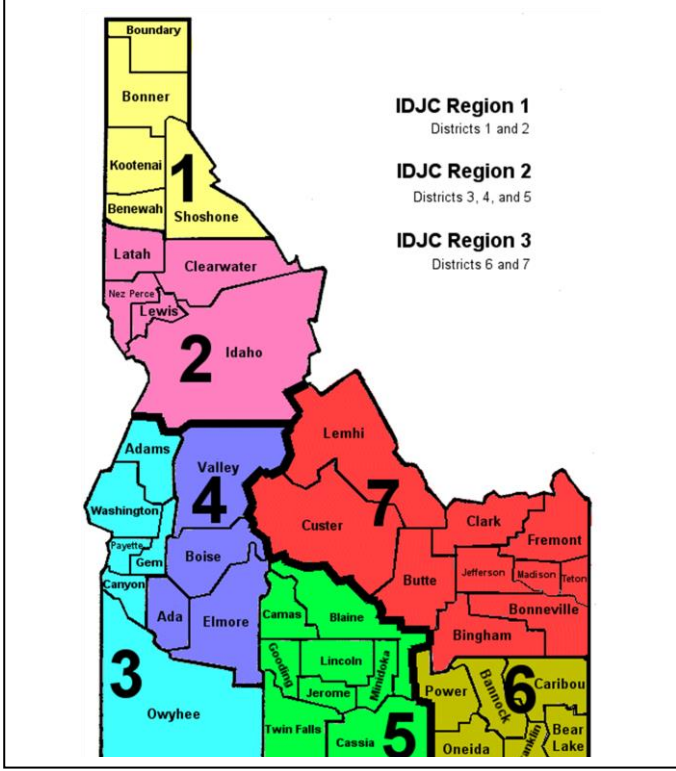
Idaho Department of Health and Welfare: DBH



Idaho State Department of Education



Idaho Department of Juvenile Corrections



## Appendix D- Medicaid Members under the age of 18

**Section 1 Eligible Members:** Medicaid eligible members (0-17) remains stable over the report time period (SFY19-Q1 to SFY21-Q3), with positive growth over the last four quarters across all regions. The most recent quarter increase of Total Members grew by 1.1% Quarter over Quarter (QoQ) (SFY21-Q2 to SFY21-Q3). Year over Year (YoY) (SFY20-Q3 to SFY21-Q3), membership saw an increase of 7.9%.

No region over the last four quarters has experienced a decrease in eligible members, except for Region 9.

QoQ (SFY21-Q2 to SFY21-Q3): 1.1%

YoY (SFY20-Q3 to SFY21-Q3): 7.9%

**Table 1: Medicaid Eligible Members as of 03/31/2021**

Description: This table displays the distinct count of Medicaid Members (counted by MID) that were eligible as of 3/31/21 and was between the ages of 0 to 17 on that date. Data as of 5/13/21.

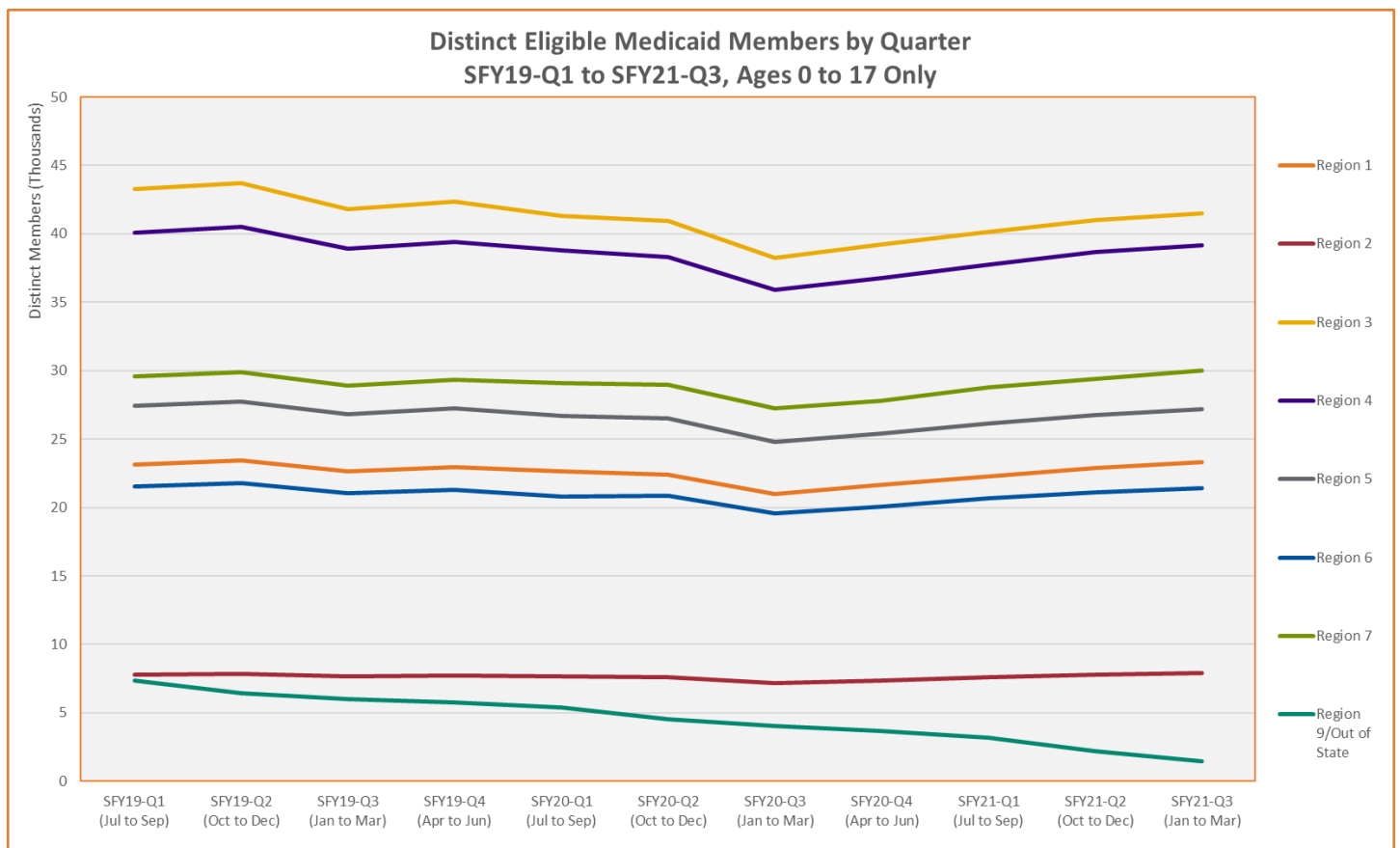
	Ages 0 to 17
	Total Distinct Members as of 3/31/2021
Region 1	23,108
Region 2	7,811
Region 3	41,182
Region 4	38,826
Region 5	26,979
Region 6	21,289
Region 7	29,795
Region 9/Out of State	1,043
Total	190,033



**Table 2: Medicaid Eligible Members by Quarter - Ages 0 to 17 Only**

Description: This table displays the distinct count of Medicaid Eligible Members between the ages of 0 to 17, by quarter, during the period between 7/1/2018 to 3/31/21. Members are counted by MID and age was under 18 as of the last day of each quarter. Data as of 5/13/21.

Region.	SFY19-Q1 (Jul to Sep)	SFY19-Q2 (Oct to Dec)	SFY19-Q3 (Jan to Mar)	SFY19-Q4 (Apr to Jun)	SFY20-Q1 (Jul to Sep)	SFY20-Q2 (Oct to Dec)	SFY20-Q3 (Jan to Mar)	SFY20-Q4 (Apr to Jun)	SFY21-Q1 (Jul to Sep)	SFY21-Q2 (Oct to Dec)	SFY21-Q3 (Jan to Mar)
Region 1	23,116	23,452	22,648	22,953	22,669	22,392	21,002	21,635	22,290	22,913	23,305
Region 2	7,811	7,855	7,670	7,745	7,681	7,616	7,190	7,364	7,601	7,788	7,882
Region 3	43,281	43,676	41,809	42,330	41,283	40,921	38,235	39,192	40,151	41,002	41,494
Region 4	40,103	40,519	38,944	39,415	38,775	38,304	35,899	36,749	37,732	38,660	39,172
Region 5	27,441	27,741	26,836	27,245	26,719	26,541	24,784	25,421	26,133	26,788	27,176
Region 6	21,562	21,782	21,031	21,290	20,827	20,849	19,591	20,069	20,659	21,110	21,438
Region 7	29,574	29,876	28,885	29,347	29,120	28,949	27,223	27,789	28,766	29,407	30,019
Region 9/Out of State	7,335	6,447	6,030	5,780	5,383	4,559	4,058	3,664	3,204	2,177	1,484
<b>Total</b>	<b>200,223</b>	<b>201,348</b>	<b>193,853</b>	<b>196,105</b>	<b>192,457</b>	<b>190,131</b>	<b>177,982</b>	<b>181,883</b>	<b>186,536</b>	<b>189,845</b>	<b>191,970</b>





## Appendix E- Presenting Concern Categories

Presenting Concern Categories Assigned based on Primary Diagnosis of Youth entered into CANS Tool	
Category	Concern
Anxiety	Anxiety/Generalized Anxiety
	Panic
	Phobia
	Adjustment
Stress or Trauma	Post-Traumatic Stress
	Trauma/Loss
	Reactive Attachment
Mood	Mood Disturbance
	Dysthymia
	Depression
	Bi-polar Disorder
Externalizing	Attention-Deficit Hyperactivity Disorder (ADHD)
	Conduct Disorder
	Intermittent Explosive Disorder
	Disruptive Mood Dysregulation
	Oppositional Defiant Disorder
Neurological Concerns	Psychotic Features of Disorder
	Autism Spectrum
	Intellectual Disability
	Neurological Disorder NOS
Other	Disorders of Eating
	Gender Identity Disorder
	Personality Disorders

Presenting Concern Categories provided by Dr. Nathaniel Israel of Union Point Group, LLC.