



## Mental Health Expenditure and Service Utilization Report (MHEASURE) January 15, 2015

### Overview

The mission of the District of Columbia Department of Behavioral Health (DBH) is to develop, manage and oversee a public mental health system for adults, children and youth and their families that is consumer driven, community based, culturally competent and supports prevention, resiliency and recovery and the over-all well-being of the District's citizens. The DBH serves children and youth with a diagnosis of severe emotional disturbance (SED) and adults with severe mental illness. District residents who meet the enrollment criteria are eligible to receive the full range of mental health services and supports.

DBH provides an array of mental health services and supports through a Mental Health Rehabilitation Option (MHRS). This includes: (1) Diagnostic and Assessment, (2) Medication/Somatic treatment, (3) Counseling, (4) Community Support, (5) Crisis/Emergency, (6) Rehabilitation/Day Services, (7) Intensive Day Treatment, (8) Community Based Intervention, (9) Assertive Community Treatment, (10) Transition Support Services. In addition, there are a variety of evidence-based services and promising practices. This includes wraparound support, trauma-informed care, school mental health services, early childhood services, suicide prevention, forensic services and Supported Employment.

The Mental Health Expenditure and Service Utilization (MHEASURE) Report provides a summary of key agency measures related to service cost, utilization and access to the public mental health system. Specifically, the following information is contained within this document:

- Enrollment data is presented in *Figures 1 and 2-Consumers Enrolled and Served*;
- The number of consumers served is shown in *Figure 3 and 4- Consumer Count by Age Group and Funding Source*;
- Service utilization by race and gender is presented in *Figures 5a, 5b, 5c* and;
- Cost and utilization data based upon claims expenditures for Fiscal Year 2008 - Fiscal Year 2014 is presented in *Figures 6-11*; and the
- Percent of adult consumers with Serious Mental Illness (SMI) and children and youth with Serious Emotional Disturbances (SED) served within the public mental health system is presented in *Figures 12 and 13*.

Reports are published January 15th and July 15th of each fiscal year.



The MHEASURE report contains information regarding the services paid for through Medicaid claims and local dollars. It reflects services provided to consumers enrolled with the District's public mental health system.

## Limitations of the Report

**Findings are based solely on the public mental health system's claims data.** Individuals receiving care receive a wider array of services than what is reflected through DBH claims data. Many of these services are delivered through other arrangements. For example, approximately seventy percent of all Medicaid recipients are enrolled in a managed care plan, through which they may receive mental health or behavioral health services outside of the public mental health system. Individuals who are not enrolled in managed care may also access other mental health or behavioral health services delivered through non-MHRS providers such as independent psychiatrists which would also not be captured in the public mental health claims data set.

**Only those services that are paid through claims are included in the data set of information summarized for this report.** The DBH provides a robust array of contracted services that are supported with local dollars that enhance the quality of care provided to individuals with mental illness and their families. This includes prevention and intervention services provided through school based mental health, homeless outreach services, early childhood services, wraparound support, forensic services, housing, transition-age youth services, portions of supported employment services, and suicide prevention services.

**Two of the evidence-based practices offered within the children and youth system of care are included in the "counseling" utilization count so report does not reflect the utilization of each these specialized services individually.** Within this report, the data shown for counseling includes the utilization of Trauma Focused Cognitive Behavior Therapy (TF-CBT), Child Parent Psychotherapy for Family Violence (CPP-FV) and MHRS Counseling.

## Summary of Findings

The Department of Behavioral Health continues to develop a robust array of services to meet the mental health service needs of the people receiving care. Findings based upon the current analysis of data shows:

**The Department of Mental Health served a total of 22,759 consumers in Fiscal Year 2014.** This represents a 2% decrease from FY 13 and includes 4,201 children/youth and 18,558 adults. The District's penetration rate in FY13 (FY14 data is still pending), according to the Substance Abuse and Mental Health Services Administration (SAMHSA), is 37 per 1,000, while the national average is 22 per 1,000.



**The total expenditures for mental health services rose 13% in FY 2014 when compared to those in FY 2013.** This includes both MHRS services and additional services such as jail diversion, supported employment, crisis beds and integrated care coordination which are funded through DMH's local dollar allocation. It should be noted there was a 15% rate increase in FY14 for medication/somatic services, counseling, and community support.

**The highest cost driver within the system is intensive community based services (Assertive Community Treatment, Community Based Intervention, Multi-systemic Therapy and Functional Family Therapy).** The average annual cost per consumer (\$7902) for this service cluster was almost double that of the next most expensive service, specialty services (Day Treatment, the Integrated Care Community Project, Supported Employment, Team Meetings, and Jail Diversion), which had an annual average cost per consumer of \$3987.

**Across adult and child consumers, crisis services (Non-authorized Crisis Beds, Psychiatric Beds, and Emergency Services) declined 16% from FY13 to FY14.** Specialty services increased by 29%, and transition support services (Inpatient Discharge Planning, Continuity of Care Treatment Planning, and Community Psychiatric Supportive Treatment Program) increased by 312%.

**The number of consumers who were enrolled but not seen increased by 2472 between FY13 and FY14.** This is an increase from 16% of total enrolled consumers to 23% of enrolled consumers. This number consists of consumers who were enrolled in FY14 with a Core Service Agency (CSA) but who were never seen. There were 293 of these consumers who received at least one service from a Managed Care Organization (MCO) or Freestanding Mental Health Clinic. The time between consumers' enrollment through the Access Helpline is being tracked on a weekly basis, and staff are following up with CSA's that are not quickly serving consumers.

**DBH provides evidence based practices at a higher rate than the national average.** The national average for consumers receiving Assertive Community Treatment (ACT) services is 2%. In the District of Columbia, 9.5% of adult DBH consumers participated in ACT services. The national average for consumers receiving Multi-systemic Therapy (MST) is 1%, while 3% of DBH child/youth consumers received MST in FY14. Two percent (2 %) is the national average for consumers receiving Functional Family Therapy (FFT), and 6% of DBH child/youth consumers received this service in FY14.

**The majority of the individuals served within the public mental health system continue to be African American.** Fiscal year 2014 data identifies 90.6% of the population as African American; 3.4% as White and 2.4% as Hispanic. There is also a small number of American Indian/Alaskan Natives and Asian Americans receiving services, which comprises 3.5% of the total population served.

**The system continues to serve approximately the same proportion of males and females.** For FY 2014 11,752 (51.6%) are male and 10,976 (48.2%) are female.

# Department of Behavioral Health

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Stephen T. Baron, Director

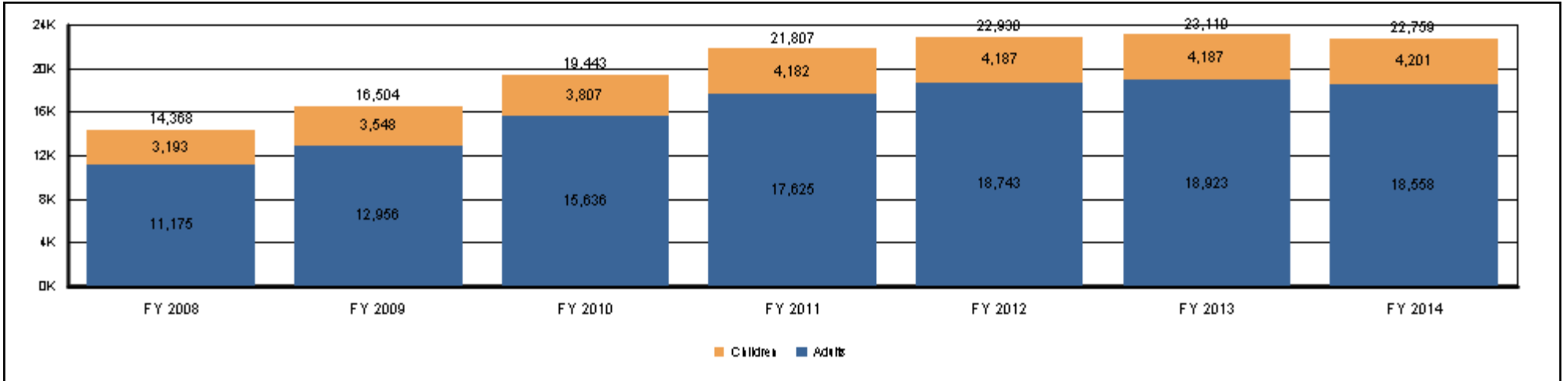
**For FY 2014 Mental health services provided to the majority of individuals served within the public mental health system were funded through Medicaid (91%), rather than with local dollars.** As of August 11, 2012, DBH implemented the requirements of the Mental Health Services Eligibility Act of 2011. This provided Medicaid to children at 300% of the Federal Poverty Level (FPL) and adults at 200% of the FPL. This is the same percentage of consumers receiving services through Medicaid as FY13.

**The majority of adults served have a diagnosis of severe mental illness (SMI), and the majority of children and youth served have a diagnosis of severe emotional disturbance (SED).** The most prevalent diagnoses of adults receiving services in FY 14 continue to be mood disorders, schizophrenic disorders, and bipolar disorders. The most prevalent diagnoses of children and youth served during the same period are mood disorders, attention deficit disorders, and adjustment disorders.

*Report prepared by the DBH Office of Programs and Policy's Applied Research and Evaluation Unit*



Figure 1 - Consumers Served by the Department of Behavioral Health



**Children (Age 0-17)**

11% Increase from 2008 to 2009  
7% Increase from 2009 to 2010  
10% Increase from 2010 to 2011  
0% Decrease from 2011 to 2012  
0% Decrease from 2012 to 2013  
0% Decrease from 2013 to 2014

**Adults (Age 18+)**

16% Increase from 2008 to 2009  
21% Increase from 2009 to 2010  
13% Increase from 2010 to 2011  
6% Increase from 2011 to 2012  
1% Increase from 2012 to 2013  
-2% Decrease from 2013 to 2014

**Children & Adults Combined**

15% Increase from 2008 to 2009  
18% Increase from 2009 to 2010  
12% Increase from 2010 to 2011  
5% Increase from 2011 to 2012  
1% Increase from 2012 to 2013  
-2% Decrease from 2013 to 2014

Figure 1. displays the total number of consumers who received mental health services from Fiscal Year 2008 to Fiscal Year 2014. Each number represents an individual consumer who received at least one service within the public mental health system during the specified timeframe.



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### Figure 2 - Consumers Enrolled and Served by the Department of Behavioral Health

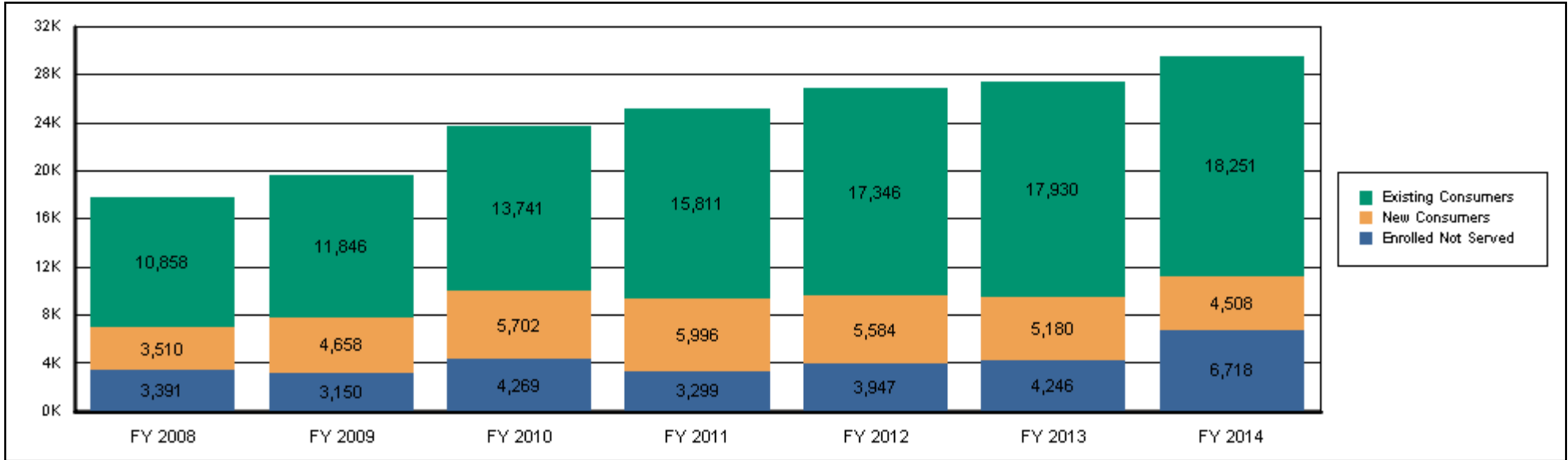


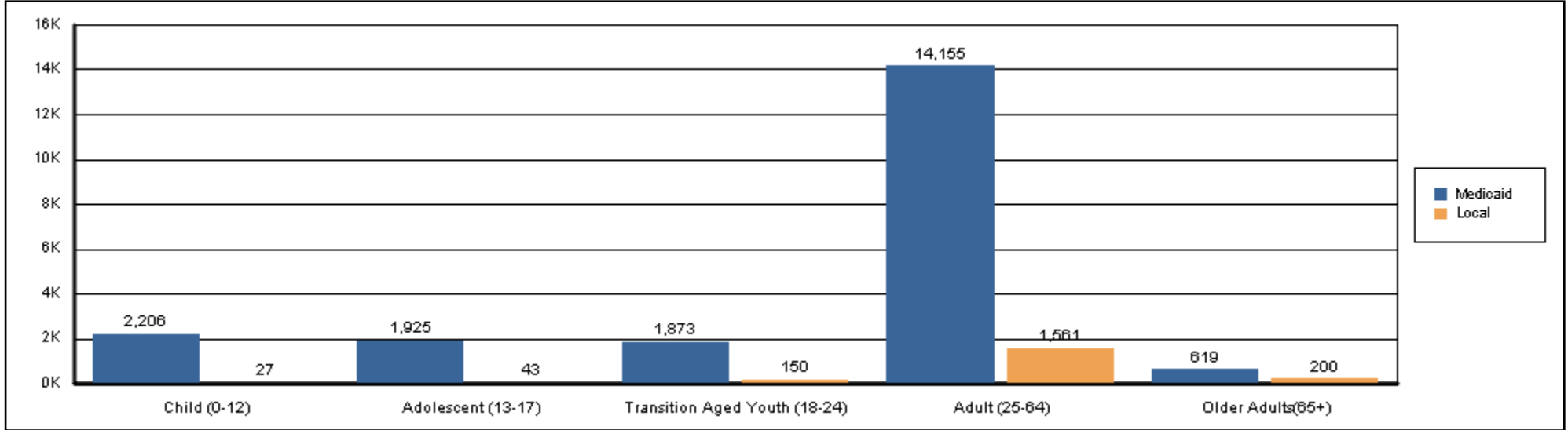
Figure 2. displays the number of consumers which are either : 1) consumers that were enrolled prior to this reporting period (Existing Consumers), 2) new to the public mental health system (New Consumers), and 3) consumers that are enrolled but have not received a service during this reporting period (Enrolled Not Served). For the purposes of this report enrollment is defined as linkage to a provider in the public mental health system.



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**Figure 3 & 4 - Consumer Count by Age Group and Funding Source - FY 2014**

Age Group	Medicaid		Locally Funded	
Child (0-12)	2,206	98.8%	27	1.2%
Adolescent (13-17)	1,925	97.8%	43	2.2%
Transition Aged Youth (18-24)	1,873	92.6%	150	7.4%
Adult (25-64)	14,155	90.1%	1,561	9.9%
Older Adults(65+)	619	75.6%	200	24.4%
<b>Total</b>	<b>20,778</b>	<b>91.3%</b>	<b>1,981</b>	<b>8.7%</b>



Figures 3 & 4 display a count of consumers served by age group (see above) and outlines if the services received were funded by Local and or Medicaid Dollars.



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**Figure 5a - FY 2014 YTD (10/01/2013 - 09/30/2014) Utilization of Mental Health Services by Age**

Service	Child Utilization			YTD Child Total	Adult Utilization					YTD Adult Total	YTD Child & Adult Total	Avg YTD Cost Per Consumer	YTD Paid Amount	Avg YTD 15 Min Increment
	Age (0-5)	Age (6-13)	Age (14-17)		Age (18-24)	Age (25-44)	Age (45-64)	Age (65-84)	Age (85+)					
<b>ACT</b>	0	0	4	4	138	515	1,001	107	2	1,763	1,767	\$8,911.17	\$15,746,035.66	351.40
Group	0	0	0	0	38	135	285	16	0	474	474	\$752.01	\$356,453.57	91.00
Individual	0	0	4	4	138	514	1,000	107	2	1,761	1,765	\$8,719.31	\$15,389,582.09	327.36
<b>CBI</b>	14	472	511	997	49	0	0	0	0	49	1,046	\$6,245.68	\$6,532,981.39	218.18
Level I - MST	0	62	74	136	2	0	0	0	0	2	138	\$7,035.61	\$970,914.78	173.30
Level II & III - 90/180 Day Auth	14	326	342	682	44	0	0	0	0	44	726	\$6,129.07	\$4,449,703.40	252.71
Level IV - FFT	0	118	128	246	4	0	0	0	0	4	250	\$4,449.45	\$1,112,363.21	83.34
<b>Community Support</b>	164	2,115	1,351	3,630	1,675	5,536	7,832	611	14	15,668	19,298	\$2,113.14	\$40,779,288.99	144.77
Group Home	0	0	0	0	3	13	58	16	2	92	92	\$1,813.12	\$166,807.37	120.75
Group Setting	9	176	78	263	132	561	1,004	43	1	1,741	2,004	\$358.99	\$719,410.96	70.99
Ind - Collateral Contact	65	1,029	565	1,659	199	416	660	85	3	1,363	3,022	\$197.77	\$597,673.56	13.33
Ind - Face to Face	139	1,947	1,255	3,341	1,632	5,420	7,745	607	14	15,418	18,759	\$2,017.98	\$37,855,198.39	133.63
Ind - Family/Couple w/Consumer	84	1,179	634	1,897	146	272	250	39	0	707	2,604	\$318.82	\$830,214.07	21.36
Ind - Family/Couple w/o Consumer	57	921	462	1,440	84	89	119	12	0	304	1,744	\$258.98	\$451,667.77	17.31
Physician Team Member	4	85	43	132	75	353	717	78	1	1,224	1,356	\$112.22	\$152,169.86	5.32
Self Help/Peer Support - Group	0	0	0	0	0	1	1	2	0	4	4	\$75.17	\$300.68	11.00
Self Help/Peer Support - Ind	0	0	0	0	0	2	13	3	0	18	18	\$324.80	\$5,846.34	15.44
<b>Counseling</b>	58	460	260	778	220	992	1,297	81	0	2,590	3,368	\$604.52	\$2,036,039.14	35.24
Family w/Consumer	19	37	22	78	5	14	4	0	0	23	101	\$221.68	\$22,390.05	12.44
Group	1	23	14	38	11	132	229	12	0	384	422	\$318.53	\$134,418.79	42.56
Individual, Adult	33	212	130	375	177	915	1,164	74	0	2,330	2,705	\$447.94	\$1,211,677.58	24.52
Individual, Child/Adol	16	221	123	360	35	10	0	0	0	45	405	\$432.02	\$174,969.45	28.10
Offsite	12	203	94	309	35	74	145	26	0	280	589	\$831.22	\$489,588.70	36.63
Without Consumer	4	20	8	32	1	2	1	0	0	4	36	\$83.18	\$2,994.57	4.64
<b>Crisis Services</b>	28	255	159	442	348	964	988	109	4	2,413	2,855	\$3,022.22	\$8,628,424.81	81.04





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**Figure 5a - FY 2014 YTD (10/01/2013 - 09/30/2014) Utilization of Mental Health Services by Age**

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	Age (0-5)	Age (6-13)	Age (14-17)		Age (18-24)	Age (25-44)	Age (45-64)	Age (65-84)	Age (85+)					
Crisis Stabilization	0	0	1	1	13	49	103	4	0	169	170	\$3,576.26	\$607,963.60	11.32
Emergency - CMHF	2	4	18	24	283	777	736	67	1	1,864	1,888	\$3,046.07	\$5,750,976.25	115.12
Emergency - Home	5	47	28	80	0	0	2	0	0	2	82	\$193.75	\$15,887.29	7.35
Emergency - IPF	0	0	0	0	4	13	10	6	1	34	34	\$153.15	\$5,207.13	4.15
Emergency - Mobile Unit	0	0	2	2	74	204	192	48	3	521	523	\$126.26	\$66,033.51	4.67
Emergency - Other/Not Identified	23	237	130	390	11	7	6	1	0	25	415	\$367.61	\$152,559.46	13.95
No Auth Crisis Stabilization	0	0	1	1	13	54	107	5	0	179	180	\$728.15	\$131,067.62	2.31
Psych Bed	0	0	0	0	21	97	152	0	0	270	270	\$7,032.33	\$1,898,729.96	10.00
<b>Day Services</b>	0	12	1	13	83	410	1,063	128	5	1,689	1,702	\$7,097.53	\$12,080,002.18	77.97
Face to Face, w/Consumer	0	12	1	13	83	410	1,063	128	5	1,689	1,702	\$7,097.53	\$12,080,002.18	77.97
<b>D&amp;A</b>	42	390	252	684	342	1,173	1,504	90	3	3,112	3,796	\$184.08	\$698,765.68	1.20
Brief	9	149	104	262	79	296	356	21	0	752	1,014	\$66.93	\$67,871.28	1.12
Community Based	0	0	0	0	4	36	33	2	0	75	75	\$428.41	\$32,131.02	1.01
Comprehensive	33	246	151	430	262	853	1,138	67	3	2,323	2,753	\$217.49	\$598,763.38	1.21
<b>ICCP</b>	0	0	0	0	0	3	16	5	0	24	24	\$16,390.09	\$393,362.04	8.63
ICCP	0	0	0	0	0	3	16	5	0	24	24	\$16,390.09	\$393,362.04	8.63
<b>Jail Diversion</b>	0	0	0	0	5	56	52	0	0	113	113	\$576.14	\$65,104.16	27.65
Criminal Justice System	0	0	0	0	5	56	52	0	0	113	113	\$576.14	\$65,104.16	27.65
<b>Medication Somatic</b>	12	286	211	509	586	2,809	4,751	363	6	8,515	9,024	\$431.14	\$3,890,591.86	10.12
Adult	9	227	177	413	564	2,806	4,747	362	6	8,485	8,898	\$430.40	\$3,829,675.29	9.99
Child/Adol	4	157	99	260	48	3	5	0	0	56	316	\$117.61	\$37,164.91	2.78
Group	0	0	2	2	4	45	67	4	0	120	122	\$194.69	\$23,751.66	12.71
<b>Supported Employment</b>	0	0	1	1	67	398	567	11	0	1,043	1,044	\$1,168.15	\$1,219,548.78	71.30
Therapeutic	0	0	0	0	12	97	162	5	0	276	276	\$179.42	\$49,520.97	10.12
Vocational	0	0	1	1	67	394	560	11	0	1,032	1,033	\$1,132.65	\$1,170,027.81	69.35



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Figure 5a - FY 2014 YTD (10/01/2013 - 09/30/2014) Utilization of Mental Health Services by Age

Service	Child Utilization			YTD Child Total	Adult Utilization					YTD Adult Total	YTD Child & Adult Total	Avg YTD Cost Per Consumer	YTD Paid Amount	Avg YTD 15 Min Increment
	Age (0-5)	Age (6-13)	Age (14-17)		Age (18-24)	Age (25-44)	Age (45-64)	Age (65-84)	Age (85+)					
<b>Team Meeting</b>	16	442	287	745	55	33	11	3	0	102	847	\$137.48	\$116,449.00	9.96
Team Meeting	16	442	287	745	55	33	11	3	0	102	847	\$137.48	\$116,449.00	9.96
<b>Transition Support Services</b>	0	5	8	13	47	289	660	100	1	1,097	1,110	\$816.65	\$906,482.47	31.26
Community Psych Supportive Tx	0	0	0	0	0	1	14	1	0	16	16	\$6,811.26	\$108,980.21	52.56
Cont. of Care Tx Planning	0	0	0	0	3	46	112	21	0	182	182	\$405.78	\$73,851.99	20.17
Continuity of Care Treatment	0	1	3	4	32	221	516	78	1	848	852	\$460.76	\$392,564.18	23.18
Inpatient Discharge Planning ACT	0	5	5	10	19	111	248	35	1	414	424	\$780.86	\$331,086.09	24.61
<b>Total All Services</b>	216	2,409	1,576	4,201	2,023	6,526	9,190	800	19	18,558	22,759	\$4,090.39	\$93,093,076.15	190.80



Figure 5b - Consumers Served by Race

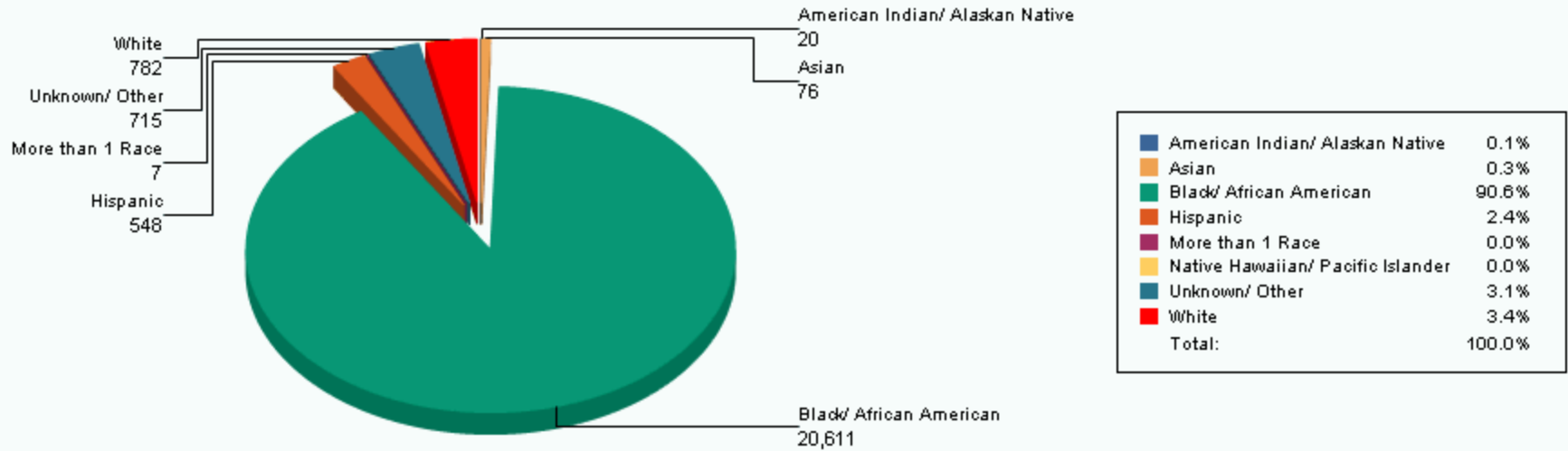




Figure 5c - Consumers Served by Gender

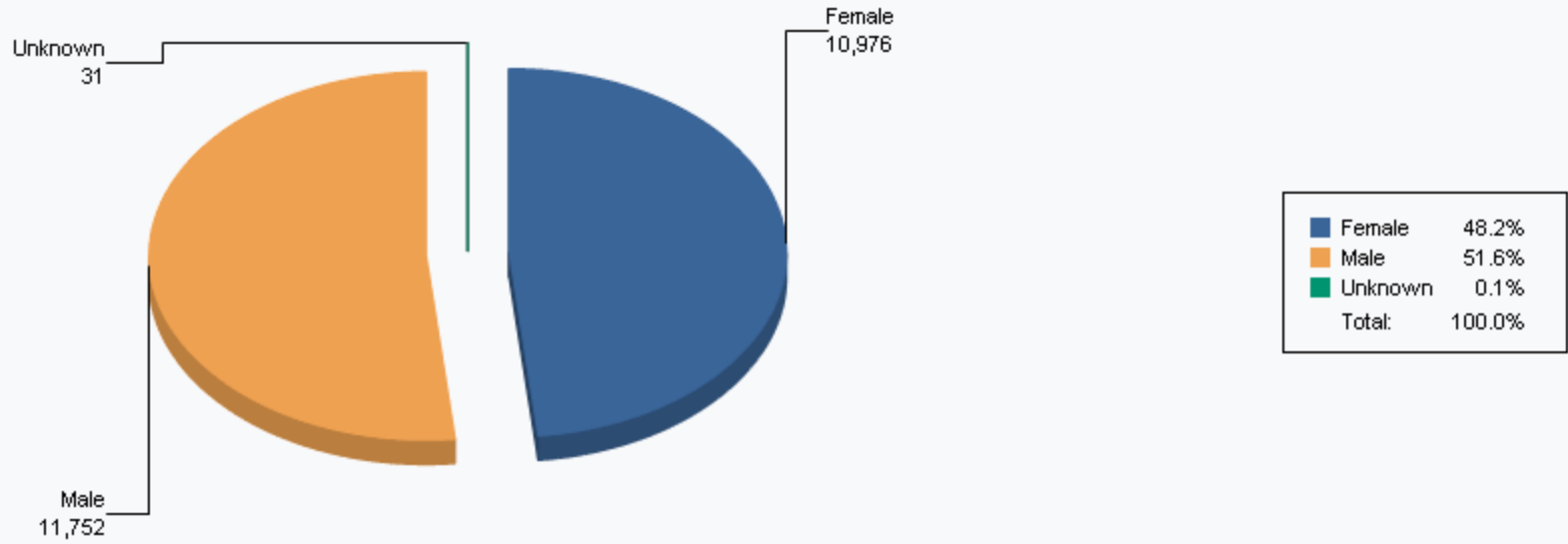
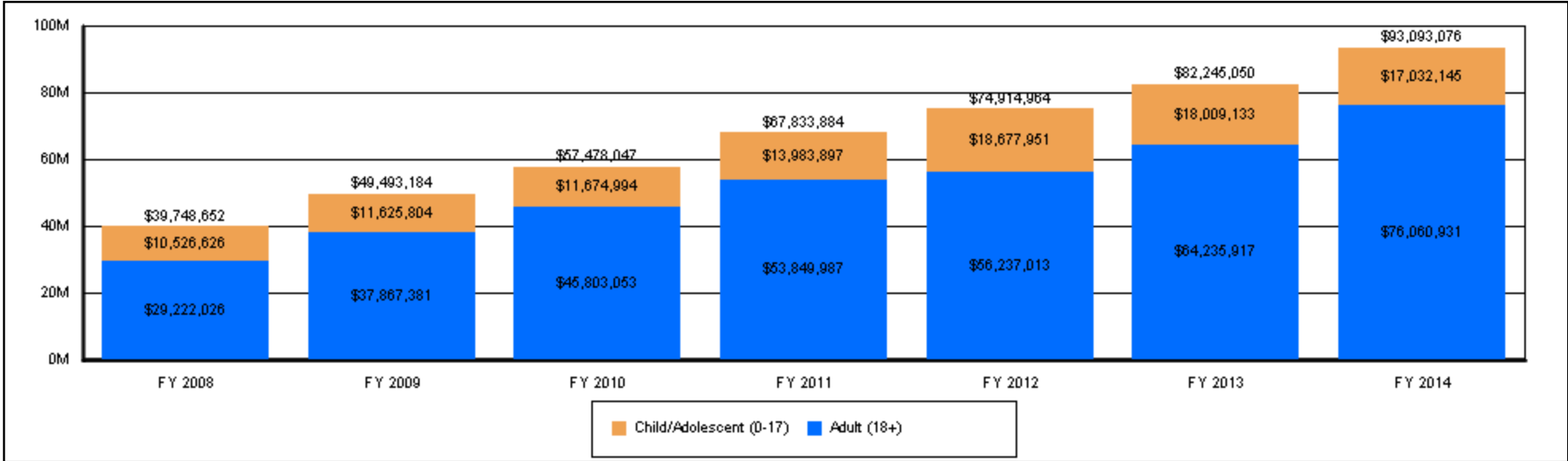




Figure 6a - Claims Expenditures for the Department of Behavioral Health



25% Increase from 2008 to 2009

16% Increase from 2009 to 2010

18% Increase from 2010 to 2011

10% Increase from 2011 to 2012

10% Increase from 2012 to 2013

13% Increase from 2013 to 2014

Figure 6a displays the aggregate cost of Medicaid and Non-Medicaid (Locally Funded) services from Fiscal Year 2008 to Fiscal Year 2014. This total includes Mental Health Rehabilitation Services (MHRS) and Non-MHRS Contracted Services (Jail Diversion, Supported Employment (FY2012), Crisis Beds and the Integrated Care Coordination Project).



Figure 6b - Claims Expenditures for the Department of Behavioral Health by Medicaid & Non-Medicaid Funds

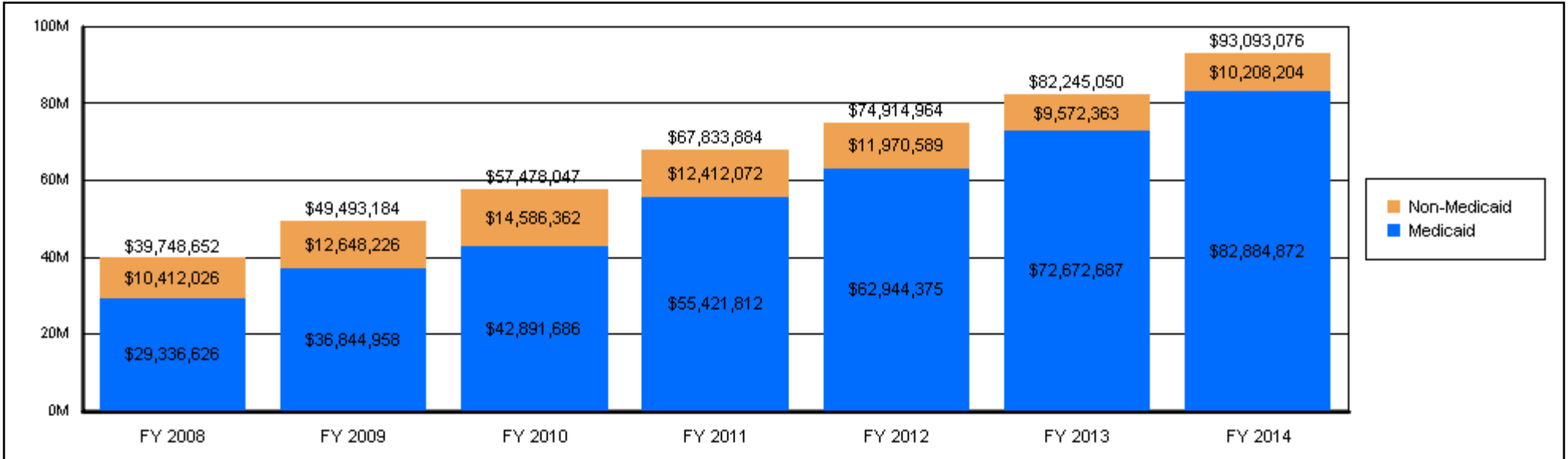
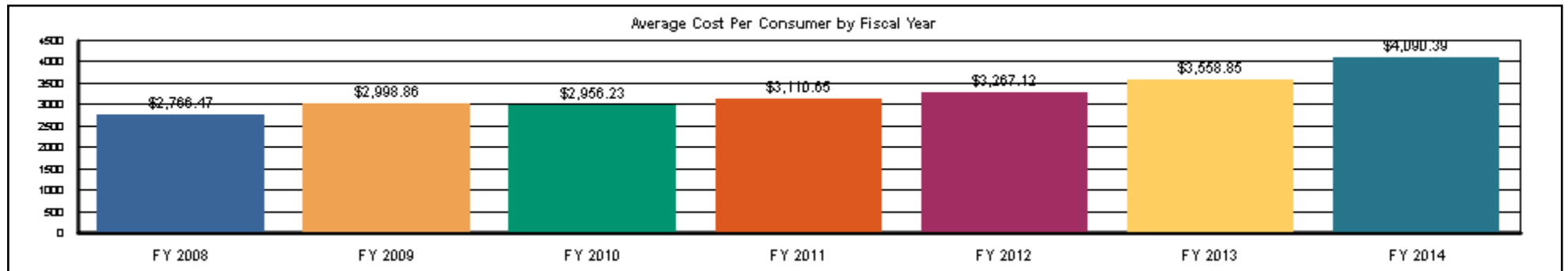


Figure 6b displays the cost of Medicaid and Non-Medicaid (Locally Funded) services from Fiscal Year 2008 to Fiscal Year 2014. This total includes Mental Health Rehabilitation Services (MHRS) and Non-MHRS Contracted Services (Jail Diversion, Supported Employment (FY2012), Crisis Beds and the Integrated Care Coordination Project).



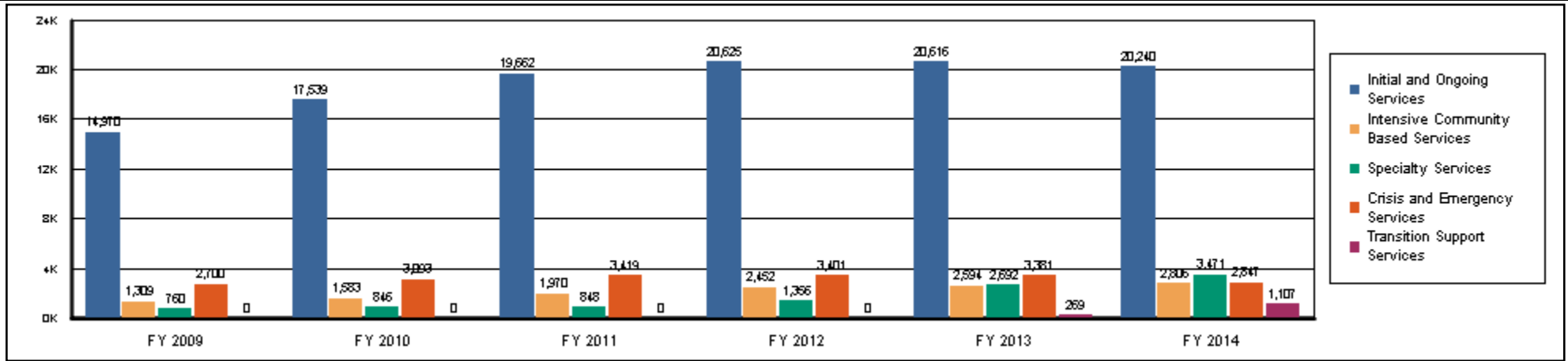


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The DC public mental health system provides a variety of different mental health services to support the needs of the populations it serves. These services are categorized as 1) Initial and On-going Services; 2) Intensive Community-Based Services; 3) Specialty Services, 4) Crisis and Emergency Services, and 5) Transition Support Services. Figures 7a and 7b describe the different services that fall within each category, the number of consumers served within each cluster from Fiscal Year 2009 to Fiscal Year 2014 and the average cost per consumer. Please note that a consumer can be included in multiple service categories. The category of Transition Support Services was created in Fiscal Year 2013.

### Figure 7a - Adult & Child/Adolescent Consumer Counts by Service Cluster



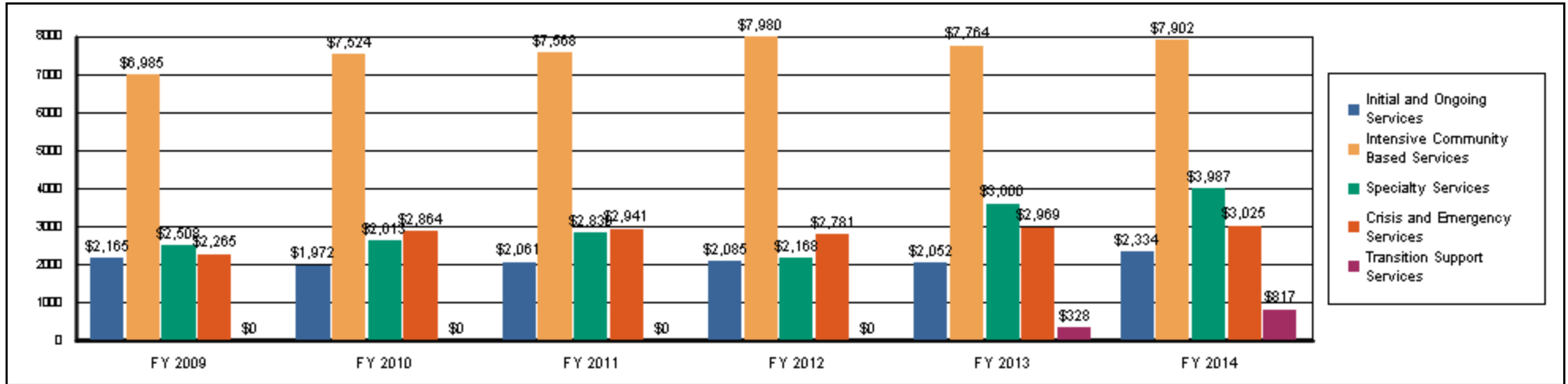
**Initial and Ongoing Services** include Counseling, Community Support, Diagnostic Assessment and Medication Somatic  
**Intensive Community Based Services** include Assertive Community Treatment, Community Based Intervention, Multi Systemic Therapy & Family Functional Therapy  
**Specialty Services** include Day, Integrated Care Community Project, Supported Employment, Team Meeting and Jail Diversion  
**Crisis Services** include Non-Authorized Crisis Beds, Psych Beds and Emergency Services  
**Transition Support Services** include Inpatient Discharge Planning, Continuity of Care Treatment Planning and Community Psych Supportive Treatment Program



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**Figure 7b - Adult & Child/Adolescent Average Annual Cost per Consumer**



**Initial and Ongoing Services**

-9% Decrease from 2009 to 2010  
4% Increase from 2010 to 2011  
1% Increase from 2011 to 2012  
-2% Decrease from 2012 to 2013  
14% Increase from 2013 to 2014

**Intensive Community Based Services**

8% Increase from 2009 to 2010  
1% Increase from 2010 to 2011  
5% Increase from 2011 to 2012  
-3% Decrease from 2012 to 2013  
2% Increase from 2013 to 2014

**Specialty Services**

4% Increase from 2009 to 2010  
8% Increase from 2010 to 2011  
-23% Decrease from 2011 to 2012  
66% Increase from 2012 to 2013  
11% Increase from 2013 to 2014

**Crisis and Emergency Services**

26% Increase from 2009 to 2010  
3% Increase from 2010 to 2011  
-5% Decrease from 2011 to 2012  
7% Increase from 2012 to 2013  
2% Increase from 2013 to 2014

**Transition Support Services**

0% Decrease from 2009 to 2010  
0% Decrease from 2010 to 2011  
0% Decrease from 2011 to 2012  
0% Decrease from 2012 to 2013  
149% Increase from 2013 to 2014

**Initial and Ongoing Services** include Counseling, Community Support, Diagnostic Assessment and Medication Somatic

**Intensive Community Based Services** include Assertive Community Treatment, Community Based Intervention, Multi Systemic Therapy & Family Functional Therapy

**Specialty Services** include Day, Integrated Care Community Project, Supported Employment, Team Meeting and Jail Diversion

**Crisis Services** include Non-Authorized Crisis Beds, Psych Beds and Emergency Services

**Transition Support Services** include Inpatient Discharge Planning, Continuity of Care Treatment Planning and Community Psych Supportive Treatment Program.

\$1,179,454.90 dollars are not included in the above service clusters. These funds were used to fund time specific programs and initiatives.

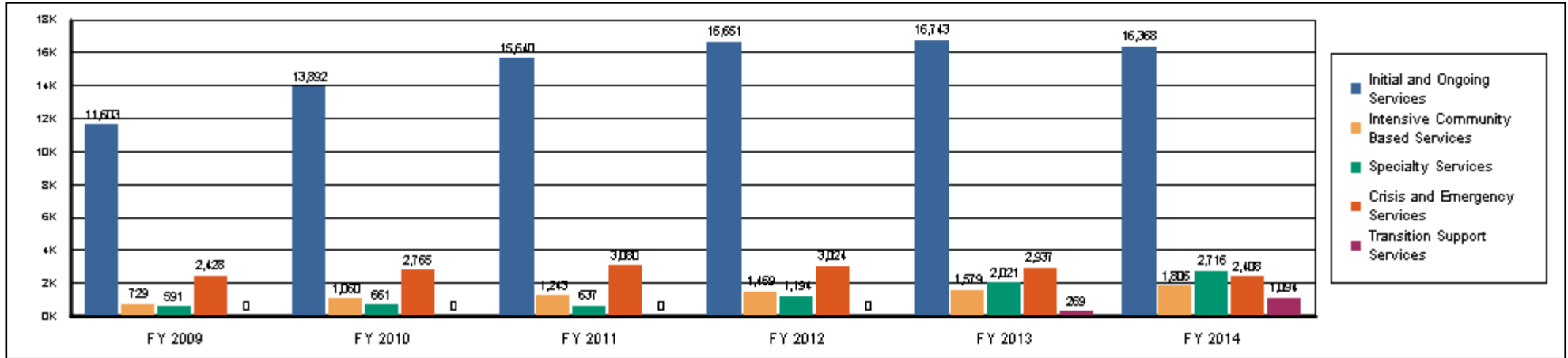




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### Figure 8 - Adult Consumer Counts by Service Cluster



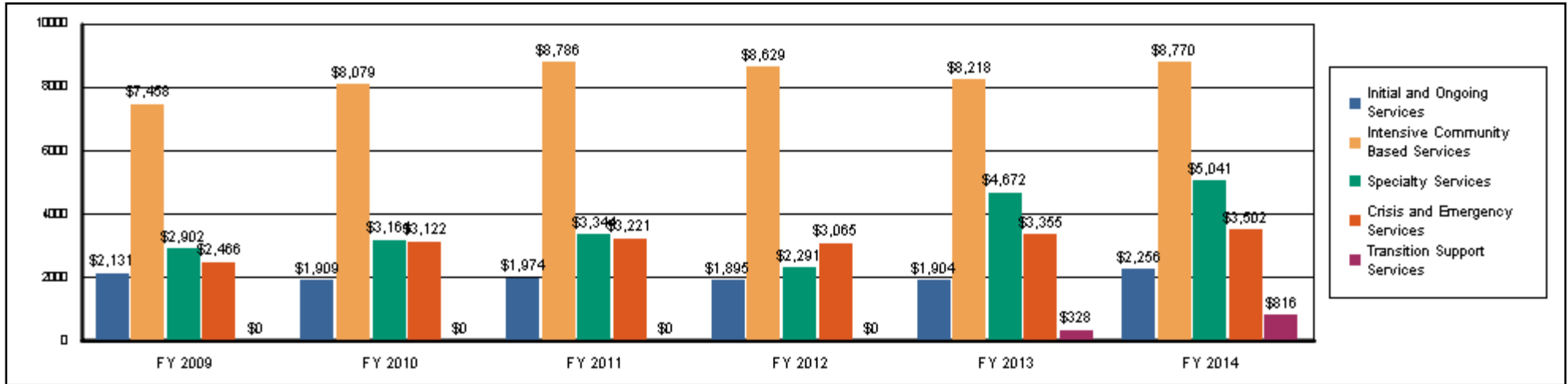
**Initial and Ongoing Services** include Counseling, Community Support, Diagnostic Assessment and Medication Somatic  
**Intensive Community Based Services** include Assertive Community Treatment, Community Based Intervention, Multi Systemic Therapy & Family Functional Therapy  
**Specialty Services** include Day, Integrated Care Community Project, Supported Employment, Team Meeting and Jail Diversion  
**Crisis Services** include Non-Authorized Crisis Beds, Psych Beds and Emergency Services  
**Transition Support Services** include Inpatient Discharge Planning, Continuity of Care Treatment Planning and Community Psych Supportive Treatment Program



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**Figure 9 - Adult Average Annual Cost per Consumer**



<u>Initial and Ongoing Services</u>	<u>Intensive Community Based Services</u>	<u>Specialty Services</u>	<u>Crisis and Emergency Services</u>	<u>Transition Support Services</u>
-10% Decrease from 2009 to 2010	8% Increase from 2009 to 2010	8% Increase from 2009 to 2010	27% Increase from 2009 to 2010	0% Decrease from 2009 to 2010
3% Increase from 2010 to 2011	9% Increase from 2010 to 2011	9% Increase from 2010 to 2011	3% Increase from 2010 to 2011	0% Decrease from 2010 to 2011
-4% Decrease from 2011 to 2012	-2% Decrease from 2011 to 2012	-2% Decrease from 2011 to 2012	-5% Decrease from 2011 to 2012	0% Decrease from 2011 to 2012
0% Decrease from 2012 to 2013	-5% Decrease from 2012 to 2013	-5% Decrease from 2012 to 2013	9% Increase from 2012 to 2013	0% Decrease from 2012 to 2013
19% Increase from 2013 to 2014	7% Increase from 2013 to 2014	7% Increase from 2013 to 2014	4% Increase from 2013 to 2014	149% Increase from 2013 to 2014

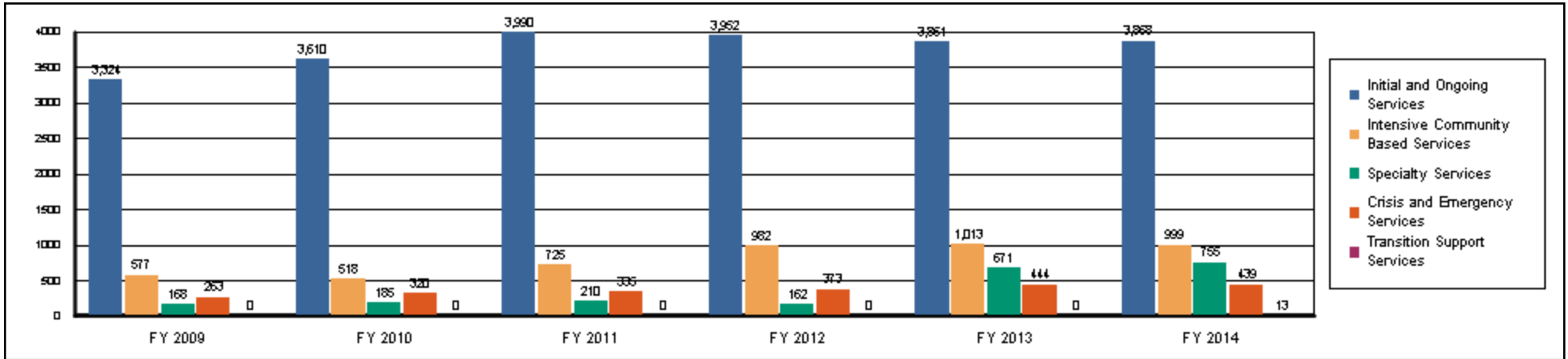
**Initial and Ongoing Services** include Counseling, Community Support, Diagnostic Assessment and Medication Somatic  
**Intensive Community Based Services** include Assertive Community Treatment, Community Based Intervention, Multi Systemic Therapy & Family Functional Therapy  
**Specialty Services** include Day, Integrated Care Community Project, Supported Employment, Team Meeting and Jail Diversion  
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### Figure 10 - Child/Adolescent Consumer Counts by Service Cluster



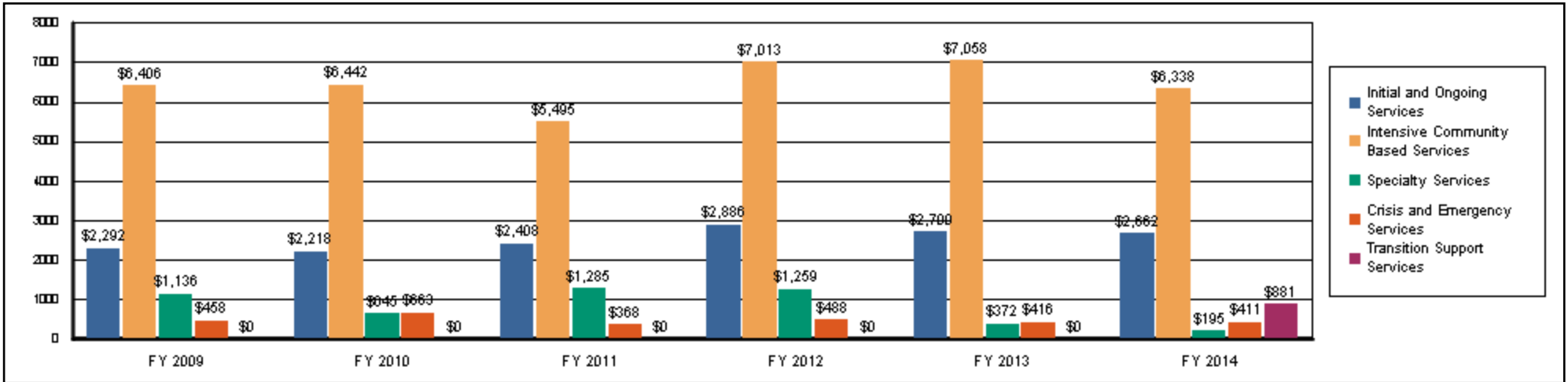
**Initial and Ongoing Services** include Counseling, Community Support, Diagnostic Assessment and Medication Somatic  
**Intensive Community Based Services** include Assertive Community Treatment, Community Based Intervention, Multi Systemic Therapy & Family Functional Therapy  
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**Figure 11 - Child/Adolescent Average Annual Cost per Consumer**



<u>Initial and Ongoing Services</u>	<u>Intensive Community Based Services</u>	<u>Specialty Services</u>	<u>Crisis and Emergency Services</u>	<u>Transition Support Services</u>
-3% Decrease from 2009 to 2010	1% Increase from 2009 to 2010	-43% Decrease from 2009 to 2010	45% Increase from 2009 to 2010	0% Decrease from 2009 to 2010
9% Increase from 2010 to 2011	-15% Decrease from 2010 to 2011	99% Increase from 2010 to 2011	-45% Decrease from 2010 to 2011	0% Decrease from 2010 to 2011
20% Increase from 2011 to 2012	28% Increase from 2011 to 2012	-2% Decrease from 2011 to 2012	33% Increase from 2011 to 2012	0% Decrease from 2011 to 2012
-6% Decrease from 2012 to 2013	1% Increase from 2012 to 2013	-70% Decrease from 2012 to 2013	-15% Decrease from 2012 to 2013	0% Decrease from 2012 to 2013
-1% Decrease from 2013 to 2014	-10% Decrease from 2013 to 2014	-48% Decrease from 2013 to 2014	-1% Decrease from 2013 to 2014	0% Decrease from 2013 to 2014

**Initial and Ongoing Services** include Counseling, Community Support, Diagnostic Assessment and Medication Somatic  
**Intensive Community Based Services** include Assertive Community Treatment, Community Based Intervention, Multi Systemic Therapy & Family Functional Therapy  
**Specialty Services** include Day, Integrated Care Community Project, Supported Employment, Team Meeting and Jail Diversion  
**Crisis Services** include Non-Authorized Crisis Beds, Psych Beds and Emergency Services  
**Transition Support Services** include Inpatient Discharge Planning, Continuity of Care Treatment Planning and Community Psych Supportive Treatment Program

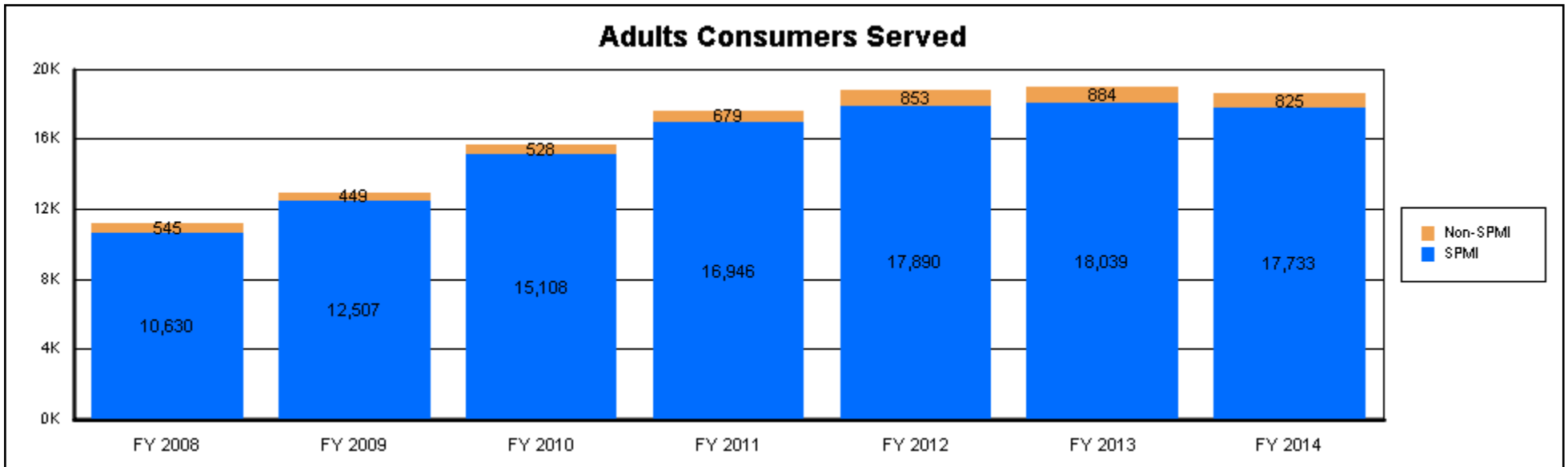


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**Figure 12 - Adult Consumers Served with Serious & Persistent Mental Illness (SPMI) Diagnosis**

Period	Adults with SPMI Diagnosis		Adults without SPMI Diagnosis		Total Adults Served
		%		%	
FY 2008	10,630	95%	545	5%	11,175
FY 2009	12,507	97%	449	3%	12,956
FY 2010	15,108	97%	528	3%	15,636
FY 2011	16,946	96%	679	4%	17,625
FY 2012	17,890	95%	853	5%	18,743
FY 2013	18,039	95%	884	5%	18,923
FY 2014	17,733	96%	825	4%	18,558





**Figure 13 - Child & Adolescent Consumers Served with Serious Emotional Disturbance (SED) Diagnosis**

Period	Children/Adolescent with SED Diagnosis		Children/Adolescent without SED		Total Child/Adolescent Served
		%		%	
FY 2008	2,571	81%	622	19%	3,193
FY 2009	2,925	82%	623	18%	3,548
FY 2010	3,104	82%	703	18%	3,807
FY 2011	3,431	82%	751	18%	4,182
FY 2012	3,475	83%	712	17%	4,187
FY 2013	3,586	86%	601	14%	4,187
FY 2014	3,529	84%	672	16%	4,201

