



# Data Explainer Series

*Week 1: Office Hours*

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# Series Schedule

Webinar Date	Office Hours Date	Webinar Title
7/29/2025	8/1/2025	Introduction to Statewide Goals & Access to Care ← <i>You Are Here</i>
8/5/2025	8/8/2025	Homelessness
8/12/2025	8/15/2025	Justice-Involvement
8/19/2025	8/22/2025	Removal of Children from the Home
8/26/2025	8/29/2025	Overdoses and Suicides
9/2/2025	9/5/2025	Untreated Behavioral Health Conditions, Prevention and Treatment of Co-Occurring Physical Health Conditions
9/9/2025	9/12/2025	Care Experience, Quality of Life, Social Connection
9/15/2025	9/19/2025	Engagement in School and Work
9/23/2025	9/26/2025	Institutionalization
9/30/2025	9/30/2025	Collaborating with Local Planning Processes

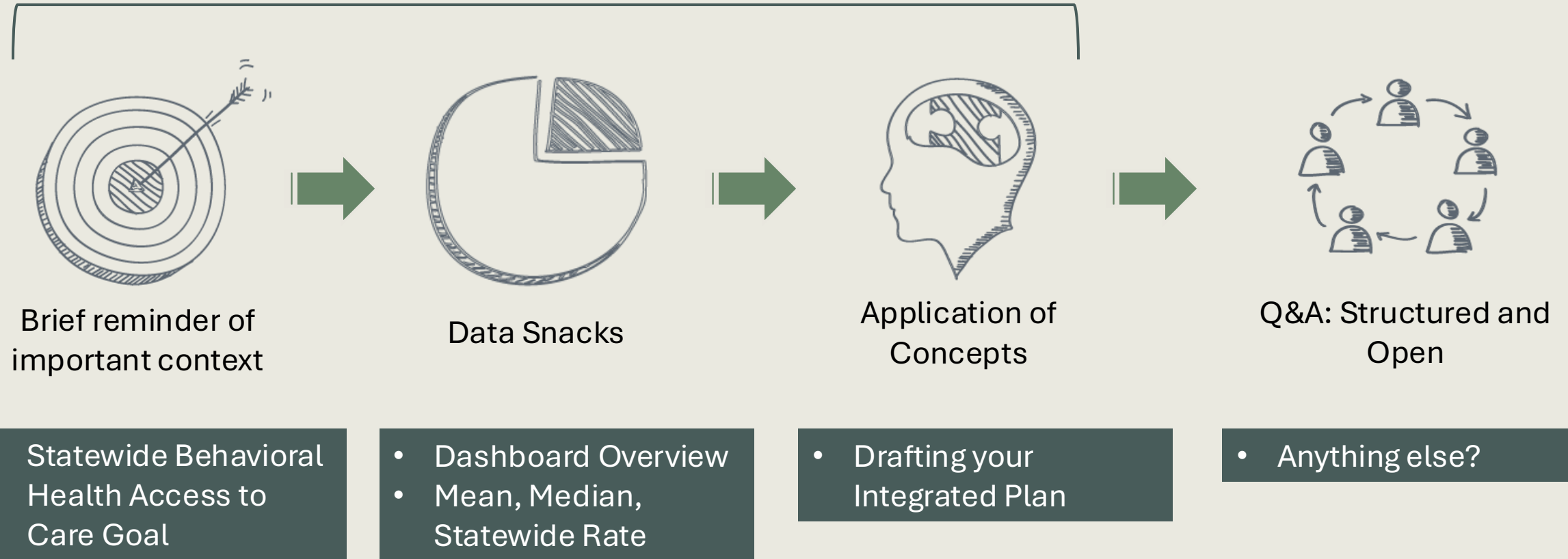
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# Necessary Information

- Each week we have a new webinar topic and corresponding office hours.
- The aim of office hours is to dive a bit deeper and respond to questions.
- All webinars will be recorded and placed on our website (*office hours will not be recorded*).

# Office Hours Grounding

20-30 minutes



# Poll: What are you here for today?

I'm here for:

- A slower walkthrough of context
- I have a specific question
- I want to see a walk-through of the dashboard
- I want to hear the general Q&A
- I want more data snacks
- I want more examples of county responses to data
- Other





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# Agenda

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Welcome

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Access to Care Dashboard Overview

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Drafting your Integrated Plan

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Webinar Q&A

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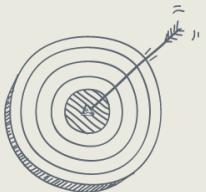
Open Discussion



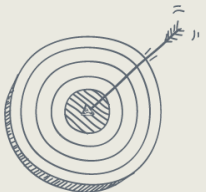
# The Largest Picture

The vision for Behavioral Health Transformation is that all Californians have access to behavioral health services...

... this leads to improved health and happiness for individuals, better overall outcomes and reduced disparities.



# The More Immediate Picture: Integrated Plan

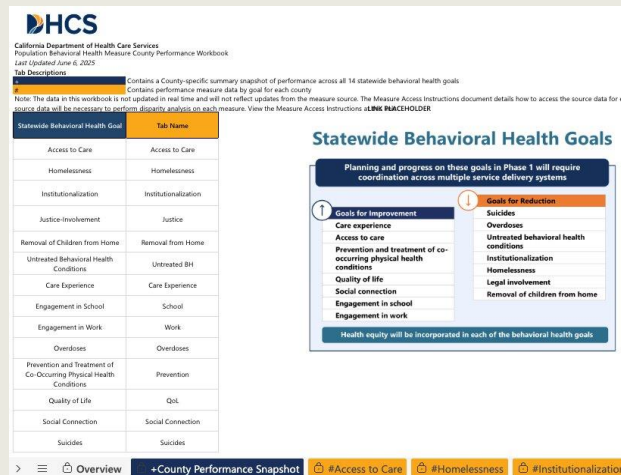




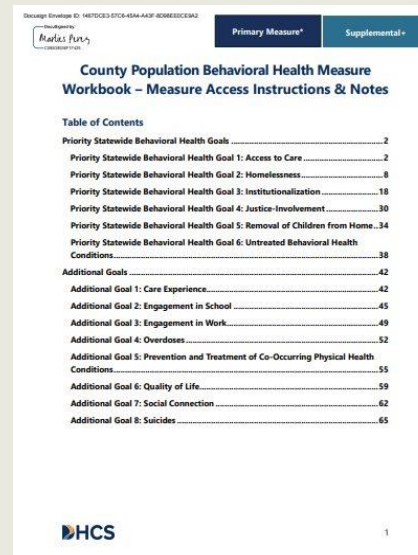
# Access to Care Dashboard

*Priority Goal*

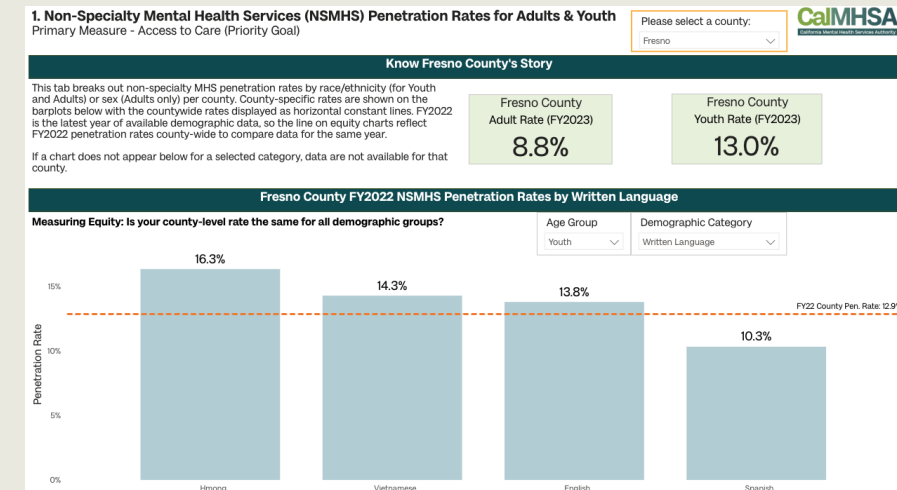




## County Rates directly from DHCS Workbook



County-specific Equity Data  
extracted from DHCS-  
recommended data sources



An all-in-one resource for you to  
complete your IP

# Tips: The DHCS Workbook and IP Requirements

- ✓ The Workbook reflects a point-in-time as of June 2025; more recent data may be available from the primary source
- ✓ The Workbook provides calculated statewide rates that may not have been available in primary data sources
- ✓ In most cases, the year requested in the IP is available



# Data Bite: Dashboard Orientation



CalMHSa is hosting an educational series through Sept. 30 to support counties in advancing California's statewide behavioral health goals and population-level measures under the Behavioral Health Services Act. The webinars and corresponding office hours will help counties incorporate these goals into Integrated Plans and strengthen data-informed strategies that improve population health outcomes. *Please note: Live participation in the series is only for county behavioral health staff.*

Visit this web page for links to recordings of each webinar, printable resource materials, and data dashboards as they are developed.

Each week's offering will focus on one or a related grouping of statewide goals and measures and examine them through:

- **Webinars (Tuesdays, 12-1 p.m.):** Focused on understanding the data, including statewide performance metrics, system context, and county health equity and disparity considerations
- **Office Hours (Fridays, 12-1 p.m.):** A collaborative, open forum for discussion and cross-county learning

## CONTENTS

Webinars



Data Dashboards



BHT Planning Documents



<https://www.calmhsa.org/data-explainer-series/>



# Additional Data Tips for Your Integrated Plan

- ✓ When more recent data are not available, appropriate to use the most recent year of data available for the IP
- ✓ If publicly-available or local data are not available, can note on IP "None Available"
- ✓ Use locally available data to supplement publicly-available sources
- ✓ Phase 1 is focused on median and mean as benchmarks for planning rather than evaluation





# Data Snack: Statewide Mean, Median, and Rate

## Statewide Mean

Sum of all county rates divided by 58.



Counties weighted equally despite different population sizes.

## Statewide Rate

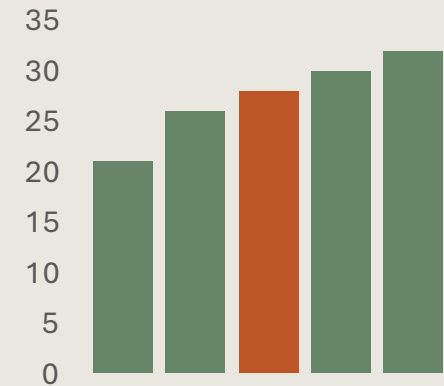
A "weighted mean"



County population-size matters.

## Statewide Median

County rates ranked by minimum to maximum, capture mid-point of the measure.



Measures a "typical" county.

# Drafting the Integrated Plan Narratives



# Community Planning Process: Testing Your Hunches

We need to strike the right balance between being too open-ended and too baked.

*Too Open-Ended*

*Just Right*

*Too Baked*

Starting with open-ended questions

Starting with a Hunch

Starting with a ready-made plan



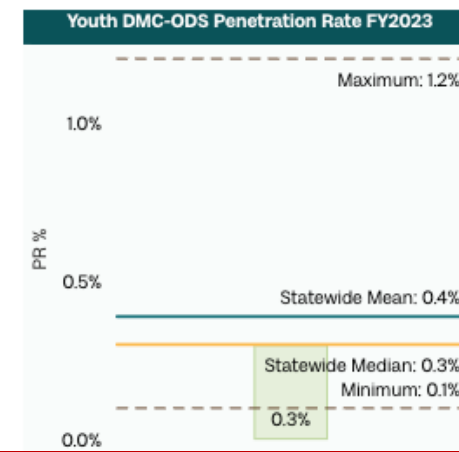
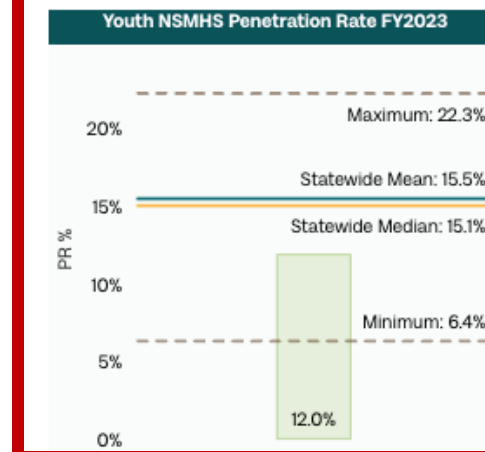
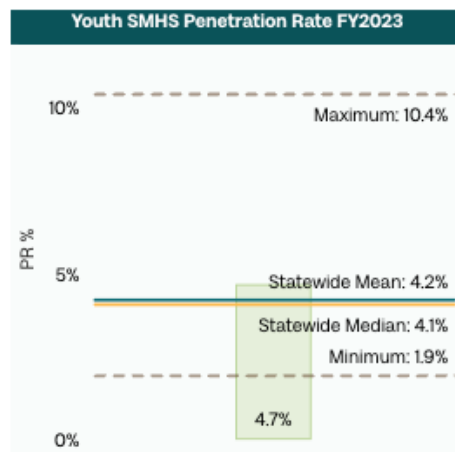
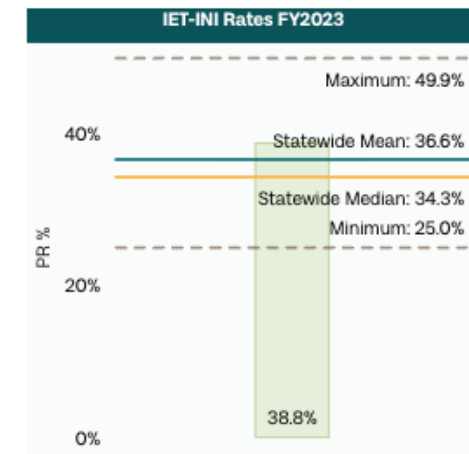
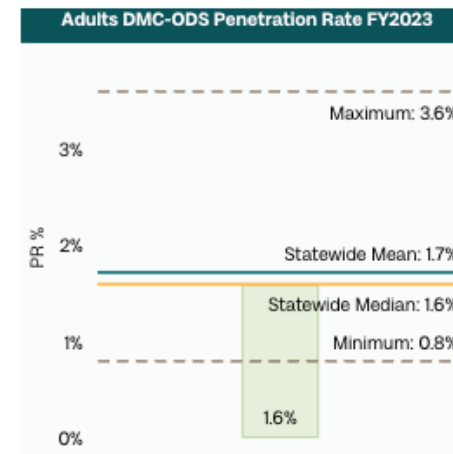
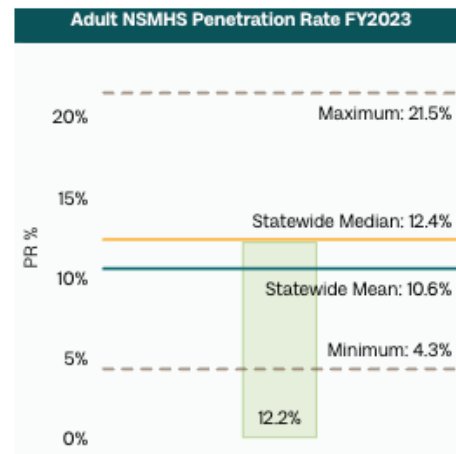
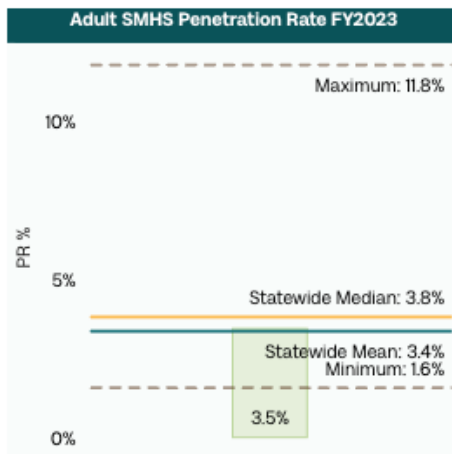
# Example: Kern County Measure Overview

## Kern County's Access to Care Data Overview

This tab provides an overview of each measure per county. County-specific rates are shown on the barplots below with the statewide mean, median, minimum and maximum displayed as horizontal constant lines. The DMC barplots for Adults and Youth will update to reflect either DMC State Plan or DMC-ODS rates dependent on county selection. If a bar does not appear in a plot below, data are not available for that rate for the selected county.

Please select a county:

Kern



# Example: Kern County Adult SMHS Disparities Analysis

## 2. Specialty Mental Health Services (SMHS) Penetration Rates for Adults & Youth

Primary Measure - Access to Care (Priority Goal)

Please select a county:

Kern



### Know Kern County's Story

This tab breaks out SMHS penetration rates by race/ethnicity (for Youth and Adults) or sex (Adults only) per county. County-specific rates are shown on the barplots below with the countywide rates displayed as horizontal constant lines. FY2021 is the latest year of available demographic data, so the line on equity charts reflects FY2021 penetration rates county-wide to compare data for the same year.

If a chart does not appear below for a selected category, data are not available for that county.

Kern County  
Adult Rate (FY2023)  
**3.5%**

Kern County  
Youth Rate (FY2023)  
**4.7%**

### Kern County FY2021 SMHS Penetration Rates by Race

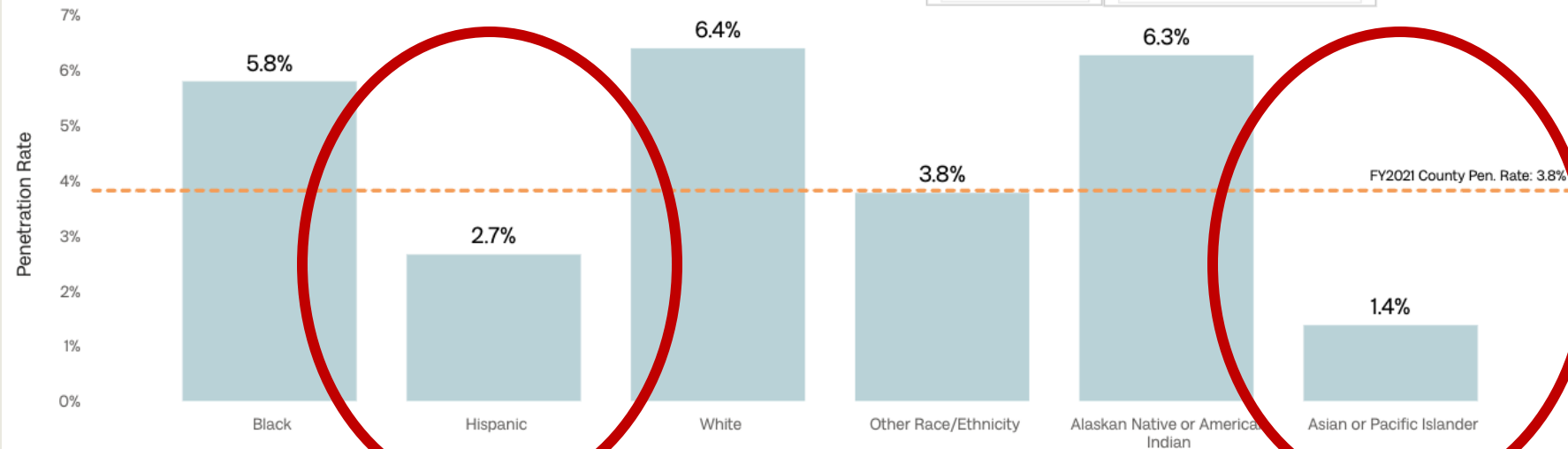
Measuring Equity: Is your county-level rate the same for all demographic groups?

Age Group

Adult

Demographic Category

Race





# Example: Kern County Disparities Analysis

*“For any disparities observed, please provide a written summary of your findings, including the measures and population groups experiencing disparities and a description of the data that supported your analysis.” (2,000 character limit)*

Kern reviewed FY 2021-22 penetration rate data from the DHCS data workbook. The adult SMHS rates are comparable to the statewide mean and the youth SMHS rates exceed it; however, racial disparities exist. Specifically, Hispanic (2.7% adult, 3.8% youth) and Asian or Pacific Islander (1.4% adult, 1.6% youth) beneficiary SMHS penetration rates are below the County rate (3.5% adult, 4.7% youth).



# Integrated Plan: Cross Measure Questions

- *Describe what programs, services, partnerships, or initiatives the county is planning to strengthen or implement*
- *Describe how you plan to address measures where your status is below the statewide average or median, within the context of local needs*
- *Refer to any data that was used to inform new programs, services, partnerships, or initiatives the county is implementing (e.g., developing an intervention targeting a sub-population in which data demonstrates they have poorer outcomes)*

(2,000 character limit)



# Example: Kern County Cross-Measure Narrative

## Part I

- To address the lower-than-statewide NSMHS and DMC-ODS PR for youth identified in the DHCS Workbook and additional review of local data, Kern County will partner with Local Education Agencies to expand pathways to identification and referral.
- Kern will offer training to teachers and school staff on signs of early MH/SUD issues and how to refer.
- Kern will establish bi-weekly coordination of care meetings with MCPs to discuss strategies for increasing access to NSMHS.
- Kern will ensure that mobile teams are trained in linkage to youth NSMHS and youth DMC-ODS services and screening appropriately.



# Example: Kern County Cross-Measure Narrative, Part II

- Kern identified a disparity in adult SMHS access via the DHCS Workbook, with Hispanic/Latino and Asian/Pacific Islander Medi-Cal members having lower PRs than other groups.
- Kern reviewed local timeliness data and discovered wait times for Spanish assessments were longer than English assessments and found many non-English speaking members dropped off the call when waiting for the language line to connect. Kern also reviewed staffing and found a shortage of bilingual/bicultural staff to serve the Asian and Pacific Islanders populations.
- In order to address both of these identified disparities, Kern is moving towards performance-based contracting with MH providers to incentivize a pay differential for language skills.





# Reminder: There are Six Priority Goals and One Additional Goal

Designing strategies that address more than one goal/measure at once will work in your favor!







# Office Hours Q&A

*Turning data into action*

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# What's Next?

Please fill out the survey in the chat!

BHT Data Explainer Series: Office  
Hours Experience Survey



Data Explainer Week 2:  
Homelessness

Tuesday 8/5, 12-1 p.m.

Questions:

[managedcare@calmhsa.org](mailto:managedcare@calmhsa.org)







# Thank You!

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