OVERVIEW OF PROPOSED AMENDMENTS TO THE CARE ACT DATA DICTIONARY

CARE Act Data Collection and Reporting





Resource Elements

CARE Act Legislative Updates

Overview of Legislative Updates and Key Implications

CARE Act Data Dictionary Updates

Summary of Updated and New Sections of the CARE Act Data Dictionary

CARE Act Data Dictionary Flowcharts

• Overview of Flowcharts to Guide CARE Act Data Collection and Reporting

County Reporting Expectations and Resources

- Review of High-level Timeline and Reporting Deadlines
- Preview of CARE Act Data Collection and Reporting Resources and TTA

Stakeholder Comment Period Process

• Overview of approach and process for Stakeholder Comments on the CARE Act Data Dictionary

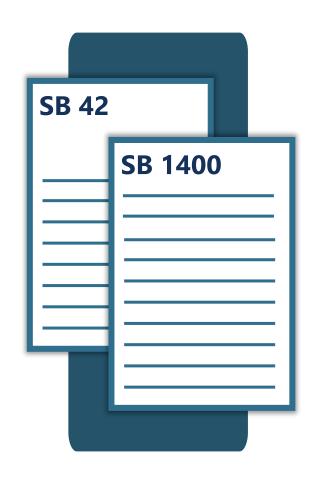


CARE Act Data Legislative Updates





Legislative Updates

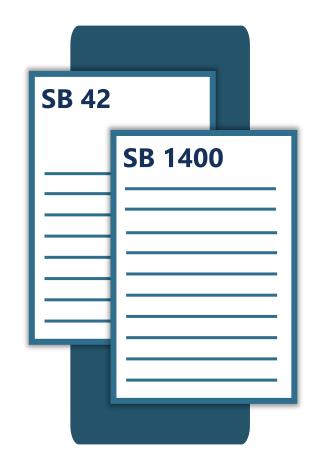


- Senate Bill (SB) 42: Amends provisions of the CARE Act, including referrals by facilities to County BH, communication between courts, alternatives to conservatorship, changes to CARE procedures, as well as collaboration on system performance. Requires referral data from facilities to be included in the Annual CARE Act Report (Brief here).
- Senate Bill (SB) 1400*: Amends provisions of the Penal Code related to CARE referrals of individuals deemed incompetent to stand trial. Additionally amends provisions to expand reporting requirements related to CARE inquires, referrals and petitioned individuals (Brief here).

^{*}The bill requires DHCS, beginning in 2026, to include the additional data collected in its annual CARE Act report to be posted on the DHCS website (Effective January 1, 2025).



Legislative Updates



- In accordance with SB 1400, DHCS is required to include the additional data elements in its annual CARE Act report, beginning in 2026.
- Effective January 1, 2025, counties are expected to report on the expanded data requirements. DHCS understands there may be data quality issues specific to the measures included in SB 1400 following the New Year. DHCS will collaborate with county partners to address and work through these issues, and counties are expected to begin collecting this data to the extent they are administratively available.

Legislative Data Requirements

Trial Court Data | SB 1400 W&I Code 5985(d)(3) (A-E)

No Changes

- (A) Number of petitions submitted
- (B) Number of initial appearances on the petition set
- (C) Number of hearings held
- (D) Number of CARE plans ordered and CARE agreements approved
- (E) Number of court petitions dismissed

Legislative Data Requirements

Process Measure Data | SB 1400 W&I Code 5985(e1-21)

New Additions

- (1) Demographics
- (2) Petitioner's Relationship to CARE Act (13) Total Petitions, Petitions resulting in Respondent
- (3) Services and Supports
- (4) Housing Placements
- (5) Treatments Continued and Terminated
- (6) Substance Use
- (7) Detentions and LPS Involvement
- (8) Criminal Justice Involvement
- (9) Deaths and Cause of Death
- (10) Outreach and Engagement Activities (20) Psychiatric advance directives
- (11) CARE Contacts (Inquiries)

(12) CARE System Referrals

- hearings & dismissals
- (14) Information on Petition Dispositions
- (15) Volunteer supporters
- (16) Voluntary CARE agreement
- (17) Ordered and completed CARE plans
- (18) Services and supports in CARE plan and
- court orders for stabilizing medications
- (19) Adherence to medication
- (21) Graduation plans

Legislative Data Requirements

Outcome Measures | SB 1400 W&I Code 5985 (e22-23)

No Changes

- (22) Improvement in housing status, including gaining and maintaining housing
- (22) Reductions in emergency department visits and inpatient hospitalizations
- (22) Reductions in law enforcement encounters and incarceration
- (22) Reductions in involuntary treatment and conservatorship
- (22) Reductions in substance use
- (23) Demographic disparities

Overview of Proposed Data Dictionary 2.0 Amendments

Section 1: Introduction – No substantive changes

Section 2: Instructions – Expanded

Section 3: Petitioned Individuals – Expanded

Section 4: CARE Inquiries – New

Section 5: System Referrals – New

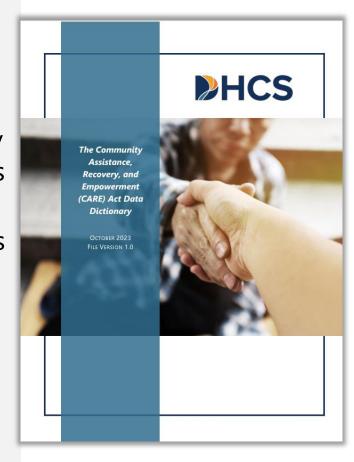
Appendices: Glossary of Terms - New



Section 2: Instructions - Expanded

Revised Definitions

- **CARE participant:** An individual who is the subject of a petition for CARE proceedings and met prima facie.
- **Elective client:** A CARE participant who was diverted to elective county services and supports (formerly referred to as voluntary county services and supports), resulting in the petition being dismissed by the court.
- Active participant: A CARE participant who is receiving county services and supports through a CARE plan, CARE agreement, or for their first 12 months as an elective client.
- Former participant: An elective client who has received the first 12 months of elective services, or a CARE participant who enters into a CARE agreement, or a CARE plan, but who has either graduated from CARE, or for whom CARE Act proceedings were dismissed or terminated.

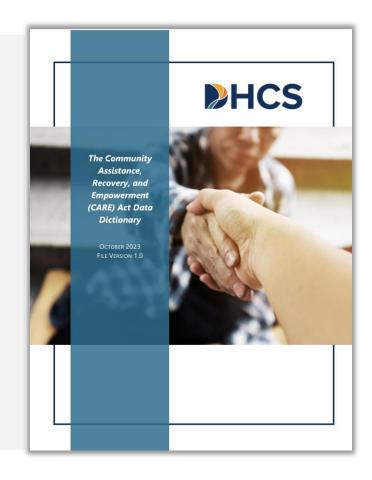




Section 2: Instructions – Expanded (Con't.)

Updated Measurement Periods

- Adds Referral Period: Begins when a county behavioral health agency receives a system referral. This period ends when one of the following occurs, whichever comes first:
 - The county behavioral health agency files a CARE petition; or
 - The individual is enrolled in county services and supports.





Section 2: Instructions – Expanded (Con't.)

CARE Participants	Reporting Requirement
Active Participants: A CARE participant who is receiving county services and supports through a CARE plan, CARE agreement, or for their first 12 months as an elective client.	12 months for all CARE participants or up to a total of 24 months for those reappointed in a CARE plan.
Former Participants: An elective client who has received the first 12 months of elective services, or a CARE participant who enters into a CARE agreement, or a CARE plan, but who has either graduated from CARE, or for whom CARE Act proceedings were dismissed or terminated.	12 months for all former participants continuing to receive elective county services and supports. County behavioral health agencies shall report data on former participants to the extent administrative data is available.

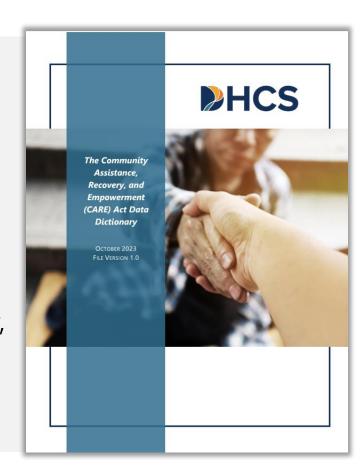
County BH is not required to continue reporting on former participants no longer receiving county BH services, non-California residents, or privately insured and not receiving county BH services.



Section 3: Petitioned Individuals - Expanded

Petitioned Individuals

- Outreach and engagement efforts during CARE Initiation Period
- » Services provided during the CARE Initiation Period
- » Reasons for CARE petition dismissal
- County eligibility determination, including confirmation of clinical stability
- » Revised definition of Elective Clients, expanded to include all receiving county services and supports, regardless of CARE eligibility, with implications for tracking clients over time

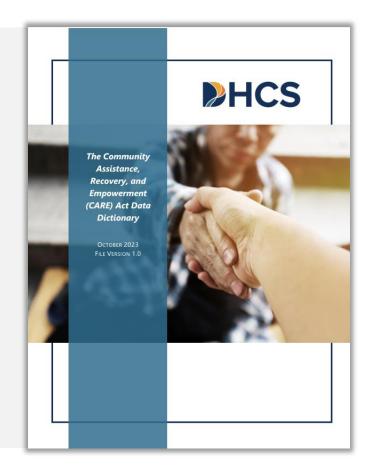




Section 4: CARE Inquiries - New

CARE Inquiries

» Adds aggregate data collection and reporting requirements for inquiries about CARE to County BH.

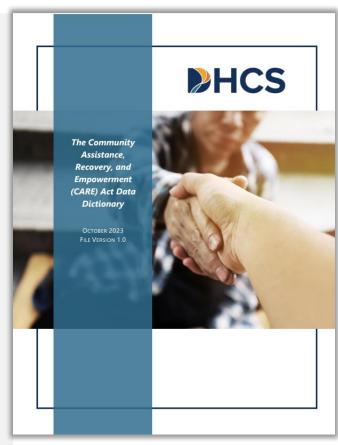




Section 5: System Referrals - New

System Referrals

- » Adds individual-level data collection and reporting requirements for referrals made to County BH from:
 - Misdemeanor proceedings (MIST),
 - Felony proceedings (FIST),
 - Assisted Outpatient Treatment (AOT) proceedings, and
 - A facility (defined as one that provides assessment, evaluation and crisis intervention).
- Includes data on referral source, referral outcome, outreach and engagement efforts, services and supports provided; reasons for not petitioning to CARE or not referring to county services.

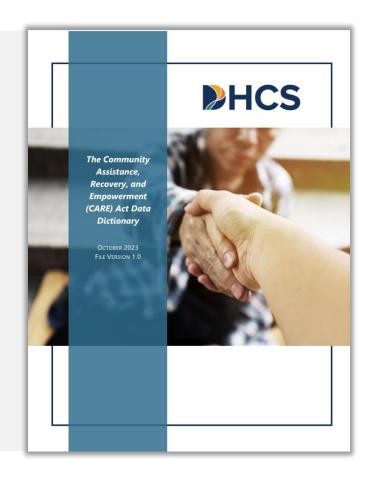




Expanded Appendix: Glossary of Terms

Glossary of Terms

- » Adds a Glossary of Terms to the Appendices.
- The Glossary of Terms replaces the current Data Summary Table. This Table will be moved to a newly developed Supplemental Guide to the CARE Act Data Dictionary.

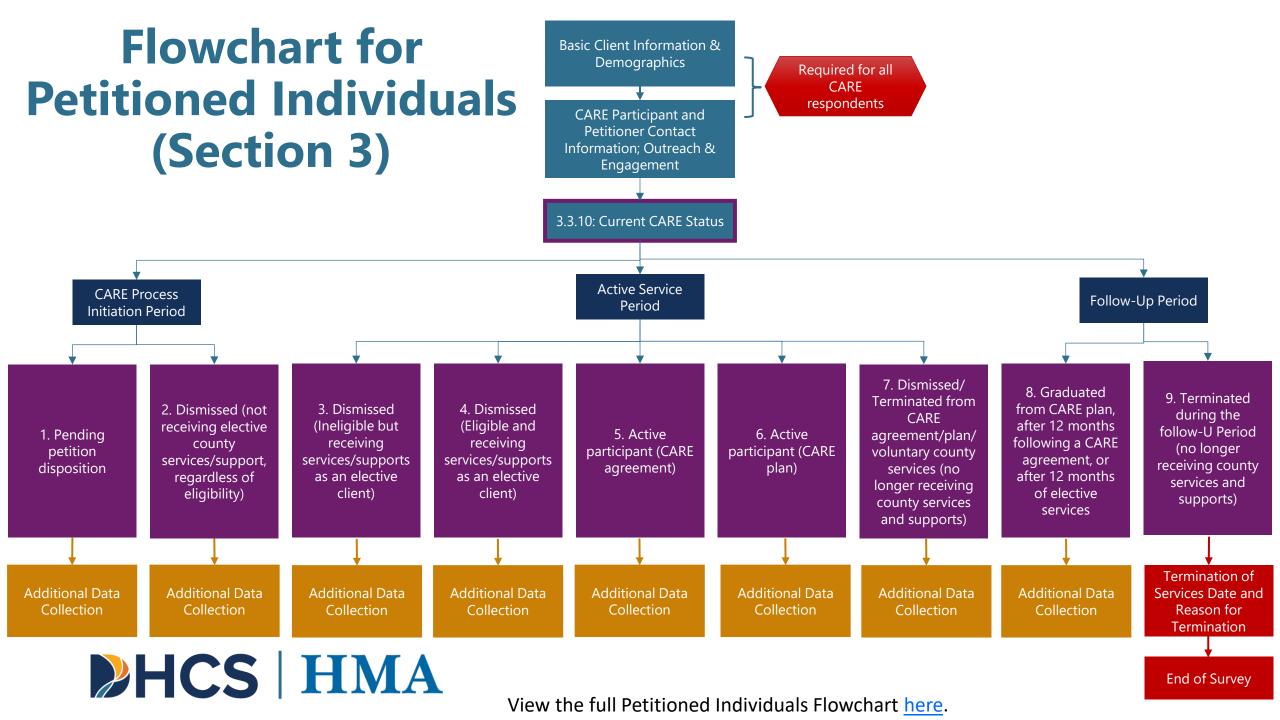




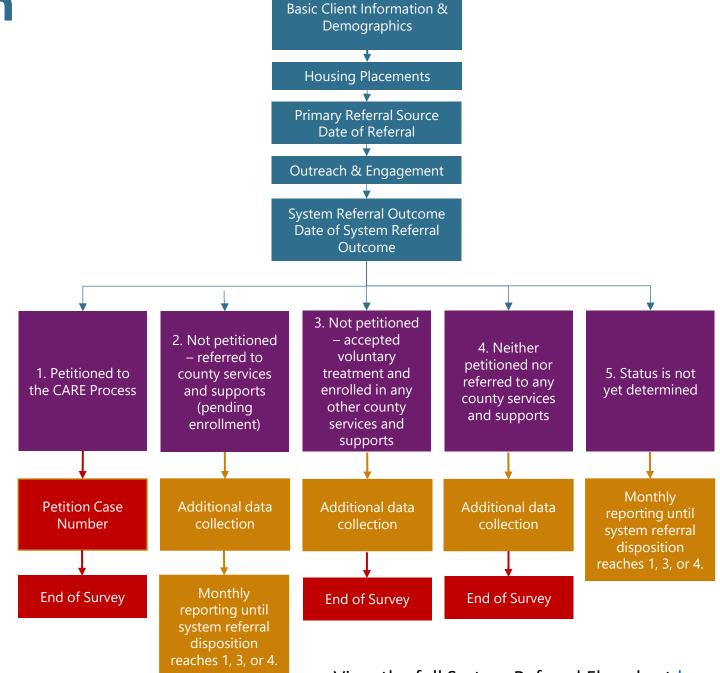
CARE Act Data
Collection and
Reporting:
Flowcharts for
Individuals
Tracked







Flowchart for System Referrals (Section 5)





View the full System Referral Flowchart <u>here</u>.

County
Reporting
Expectations and
Resources





High-Level Timeline For Release and Reporting of the Updated CARE Act Data Dictionary 2.0

December 2024: The **Q1 2025:** Final Data May 30, 2025: Counties new BHIN 24-041 is Dictionary v2.0 is submit Q1 2025 data released, superseding anticipated for release using DD v2.0 BHIN 23-052 **December 2024:** Draft March 1, 2025: Counties Data Dictionary v2.0 is submit Q4 2024 data released for stakeholder using DD v1.0 comment



- Counties collect data in monthly installments and must submit within 60 days following the close of the reporting period.
- Counties can elect to submit data monthly or wait until 60 days post the end of the quarter to submit all three monthly files. Submitting monthly may alleviate some burden to QA timeline.
- Counties must adhere to the reporting and submission schedule regardless of implementation date.

Reporting Period	Submission Deadline
Q1: January 1 – March 31	May 30
Q2: April 1 – June 30	August 29
Q3: July 1 – September 30	November 29
Q4: October 1 – December 31	March 1



Updated Data Submission Procedure

» SurveyMonkey:

- A complete submission for each reporting month will require completion of three separate surveys:
 - (1) Petitioned individuals,
 - (2) CARE Inquiries, and
 - (3) System Referrals

» MOVEit File Transfer:

 Data File Template Options A and B will be updated to reflect the expanded CARE Act Data Dictionary 2.0 requirements, including additional worksheets for CARE Inquiries and System Referrals.

County BH may choose to submit all required data via either SurveyMonkey or the MOVEit File Transfer Application using provided Data File Templates.

Counties must submit data using only one mechanism during each quarter.



County Data Reporting Expectations and Resources



County Responsibilities



DHCS/HMA Resources

- » Review resource briefs on <u>SB 42</u> and <u>SB 1400</u>, that summarize the amended provisions of the CARE Act.
- Counties will provide DHCS with additional data required per SB 42 and 1400 for inclusion in the 2026 Annual Report.
- Counties will report in alignment with the current Data Dictionary 1.0 for the Q4 2024 reporting period.
- Counties are expected to report on expanded data elements in alignment with Data Dictionary 2.0 effective January 1, 2025.

- » Revised Data Dictionary v2.0
- » Data Flow Charts for Petitioned Individuals and System Referred Individuals
- » Updated SurveyMonkey Forms
- » Update Data File Template Options A and B
- » Updated QA Checklist
- » New Supplemental Guide for the CARE Act Data Dictionary
- » TTA on Q1 2025 submission and QA process



Data Collection and Reporting Resources and Support

» Existing TTA Resources:

- Bi-Weekly Data-Focused Office Hours (continuing through 2025); <u>Register here</u>
- HMA CARE Data Team participation in upcoming Implementation Support Office Hours; <u>Register here</u>
- Data Collection & Reporting Resource <u>Library</u>
- Data Collection and Reporting TA <u>Request</u> <u>Form</u>
- Direct email to HMA CARE Data Team <u>CAREDataTeam@HealthManagement.com</u>
- Support to county team members and their EHR vendors (as applicable)

» Planned TTA:

- Q1 2025:
 - Data Dictionary v2.0 Overview Training, including CARE Act Data Flow Charts
 - Updated Data Submission Options Training (i.e., revised and new SurveyMonkey surveys, and data file templates), including updated QA Process Overview Training
- Concurrent with release of DD 2.0:
 - Redesigned CARE Act Data Collection and Reporting Resources page, including updated FAQs and Supplemental Guide for the CARE Act Data Dictionary
- Future 2025:
 - Post-Q1 2025 data submission, Open Forum on common data quality issues, guidance to address data deficiencies



Overview of Stakeholder Comment Period





Data Dictionary 2.0 Stakeholder Comment Period Process

- The Data Dictionary 2.0 Stakeholder Comment Period will last 10 business days from December 10th through December 23rd. The form will be closed on December 24th.
- » Notice of the process will be shared via email by HMA liaisons to all 58 counties. The distribution list will include:
 - County BH Directors
 - CARE implementation team county contacts
 - CARE data team county contacts
- » A <u>Stakeholder Comment Form</u> with open-ended fields has been developed to help collect feedback and on specific sections of the Data Dictionary 2.0. Alternatively, feedback can be provided via email to <u>DHCSCAREAct@dhcs.ca.gov</u>.

