



cchealth.org

FAMILIAR FACES

Project Update

November 17, 2025

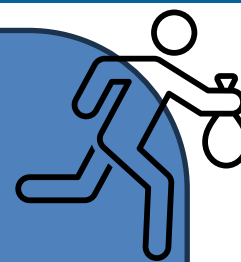
Familiar Faces Project Goals

Longitudinal
Changes in Socio-
Demographic,
Health and Housing
characteristics for
Justice Involved
Individuals

Identifying patterns
in justice
involvement – how
are these related to
health and housing
characteristics?

Predictors of
probation
violations, rearrest,
recidivism

Exploration of
programs for
engagement with
Familiar Face
population

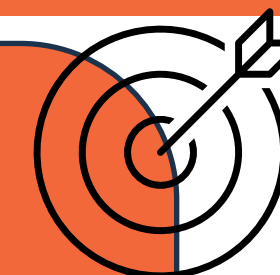


Cluster 2: Justice Involved

21% of Bookings
22% of Population
56% Recidivism Rate
2.6 Average Post-Bookings
77% Male – Avg Age 35
30% Hispanic / 31% Black
33% White / 4% Unknown Race
1.1 Previous ED Visits / 0.8 PES Visits
0.08 Average Chronic Diseases
0.01 Average Housing Services Used
Average Charge scores: 5.9

Cluster 3: High Utilization

5% of Bookings
1% of Population
87% Recidivism Rate
11.5 Average Post-Bookings
80% Male – Avg Age 40
16% Hispanic / 26% Black
45% White / 1% Unknown Race
13.8 Previous ED Visits / 20 PES Visits
0.08 Average Chronic Diseases
0.08 Average Housing Services Used
Average Charge scores: 4.1



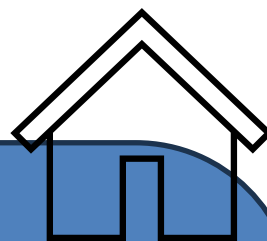
Cluster 4: Health Needs

9% of Bookings
13% of Population
61% Recidivism Rate
80% Male – Avg Age 40
19% Hispanic / 34% Black
33% White / 2% Unknown Race
2.7 Previous ED Visits / 1.4 PES Visits
0.85 Average Chronic Diseases
0.01 Average Housing Services Used
Average Charge scores: 4.1



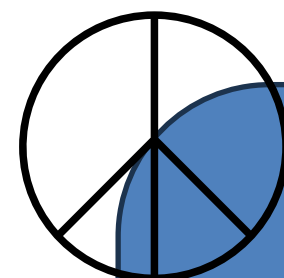
Cluster 1: Housing Needs

0.7% of Bookings
0.5% of Population
61% Recidivism Rate
2.4 Average Post-Bookings
74% male – Avg Age 41
14% Hispanic / 35% Black
33% White / 6% Unknown Race
3.4 Previous ED Visits / 2.3 PES Visits
0.38 Average Chronic Diseases
136 Average Housing Services Used
Average Charge scores: 4.4



Cluster 5: Low Risk

21% of Bookings
35% of Population
24% Recidivism Rate
0.4 Post-Bookings
84% male – Avg Age 36
14% Hispanic / 35% Black
33% White / 69% Unknown Race
0.006 Previous ED Visits / 0.001 PES Visits
0.02 Average Chronic Diseases
0 Average Housing Services Used
Average Charge scores: 4.4



Cluster 6: AOD & Violence

38% of Bookings
34% of Population
63% Recidivism Rate
3 Average Post-Bookings
81% male – Avg Age 35
30% Hispanic / 28% Black
33% White / 69% Unknown Race
1.1 Previous ED Visits / 0.7 PES Visits
0.03 Average Chronic Diseases
0.007 Average Housing Services Used
Average Charge scores: 3.1



Full Population

53% Recidivism Rate
2.8 Average Post-Bookings
80% male – Avg Age 36
28% Hispanic / 24% Black
23% White / 17% Unknown Race
1.7 Previous ED Visits / 1.7 PES Visits
0.16 Average Chronic Diseases
1 Average Housing Services Used
Average Charge Scores: 4.2

Questions From Last Meeting

Are Familiar Faces being referred to and enrolling in Enhanced Case Management?	How often are Familiar Faces using the PES? What sort of follow-up is happening afterwards?	What is the total cost of providing services to the Familiar Face population?
What Behavioral Health Services do the Familiar Faces population use? What diagnoses do they have?	What Homeless Services do the Familiar Faces population use? How much do they use relative to other groups?	What happens when individuals in our system stop taking psychoactive medications?

Enhanced Case Management Use

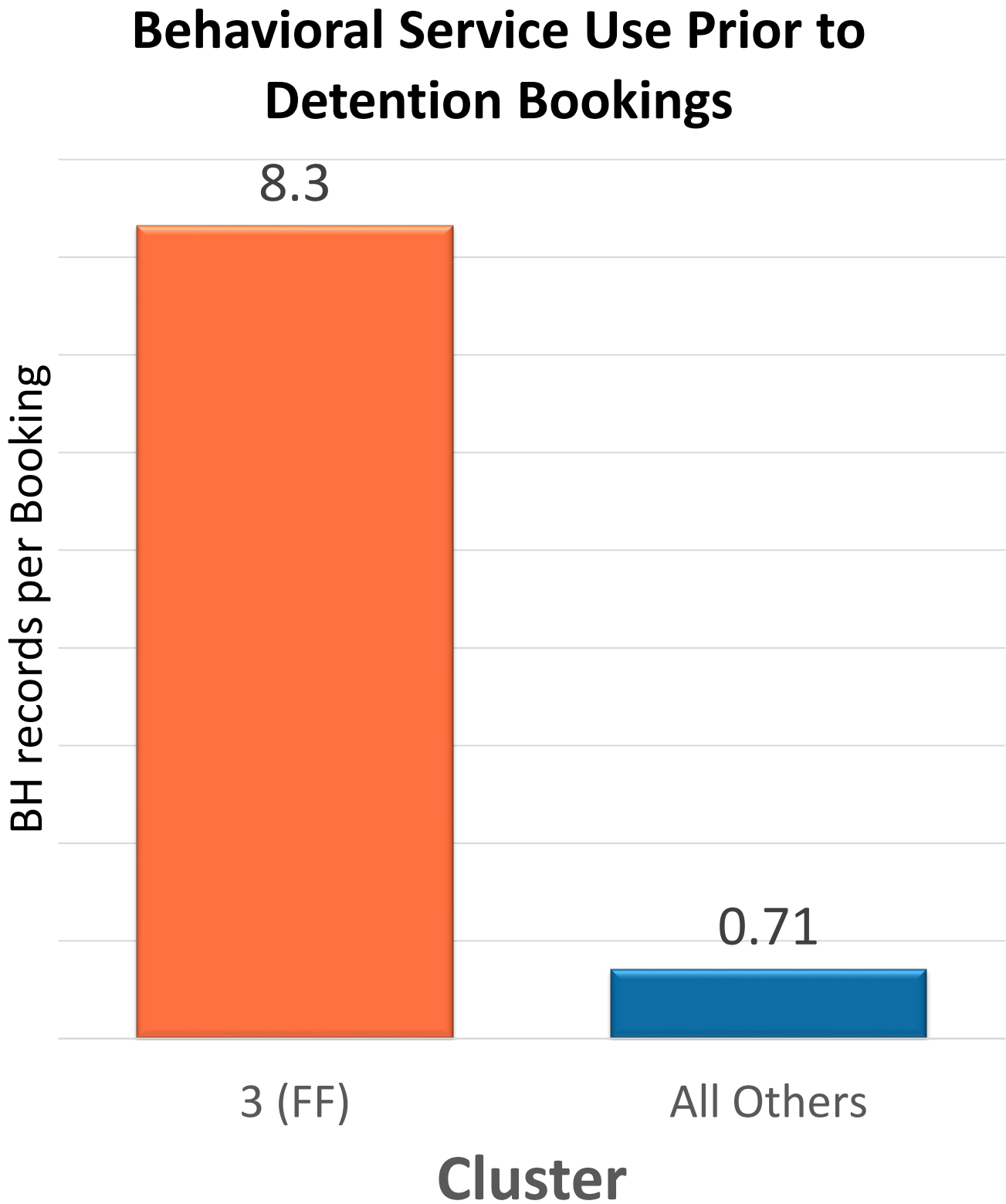
Cluster 3: Familiar Faces

5% of Bookings
1% of Population
87% Recidivism Rate
11.5 Average Post Bookings
80% Male – Avg Age 40
16% Hispanic / 26% Black
45% White / 1% Unknown Race
13.8 Previous ED Visits / 20 PES Visits
0.08 Average Chronic Diseases
0.08 Average Housing Services Used
Average Charge scores: 4.1

	Cluster 3 (Familiar Faces)	All Others
Currently In Enhanced Case Management (ECM)	5%	2%
Successful Completion of ECM	2%	1%
Unsuccessful Referral to Enhanced Case Management	54%	19%
Not Referred for ECM	40%	78%

Behavioral Health Utilization & Diagnostic Codes

- Familiar Faces received 12 times as many Behavioral Health Services** (in prior 6 months) compared to all other clusters (8.3 per booking)
- Diagnoses for Familiar Faces were **highest in the ‘Psychotic Disorders’ and ‘Substance Use’** categories (44% and 42%).
- Familiar Faces have lower rates of **Medication Service Use** – indicative of lower opiate use



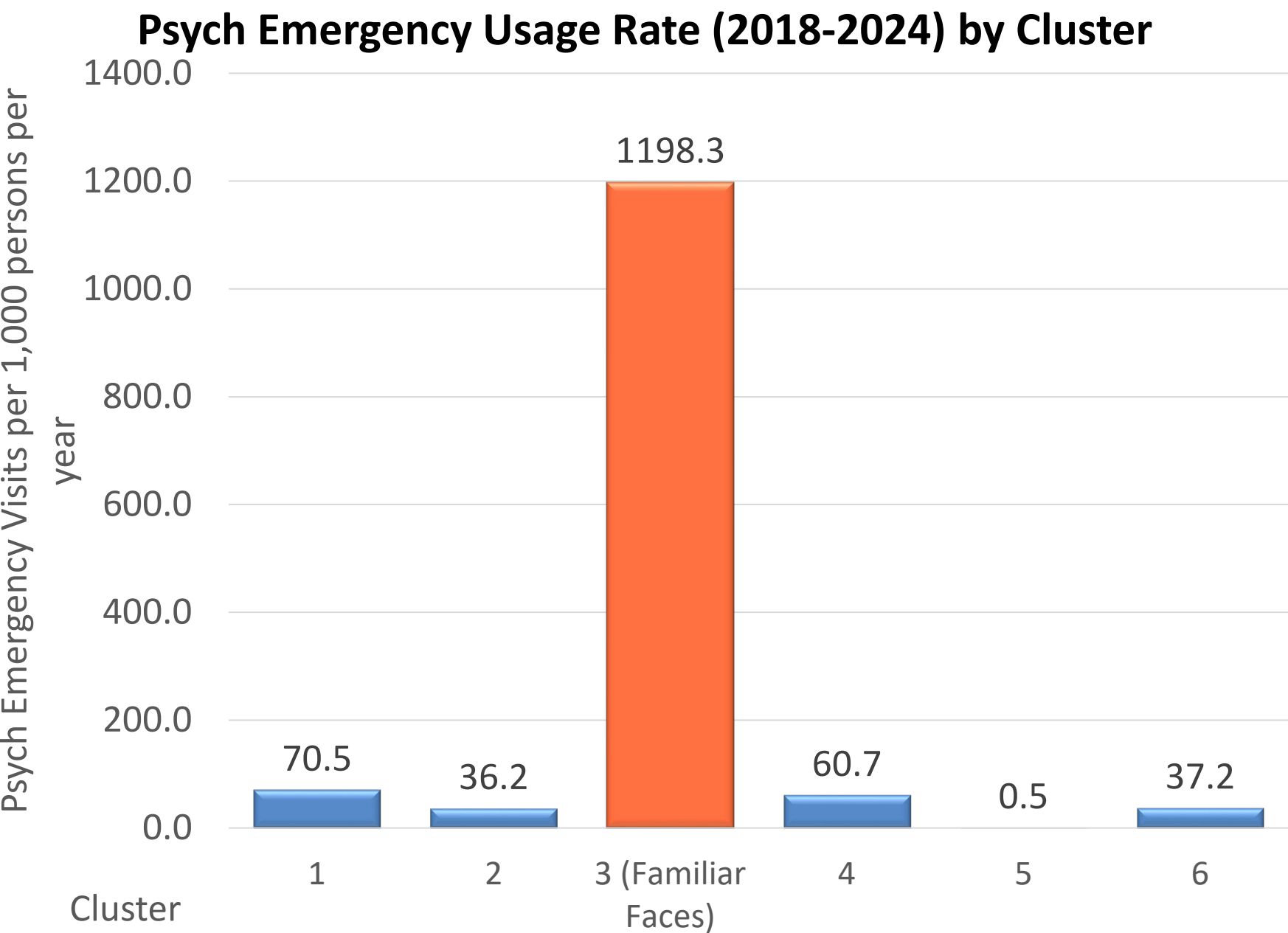
Behavioral Health Use Rate by Category and Cluster						
Cluster	1	2	3 (FF)	4	5	6
Bookings	665	21674	5403	12538	21116	37799
Unique PatID	483	12419	925	5909	16650	20518
Total BH Services	2223	19356	44975	27687	120	17334
Services per Booking - 6mo Prior (BH/Bookings)	3.3	0.9	8.3	2.2	0.01	0.5
Behaviorial Health Service Category						
Residential Treatment	33%	20%	27%	26%	25%	13%
Crisis Services	4%	6%	15%	5%	7%	9%
Inpatient Services	5%	<1%	13%	2%	0%	3%
Uncategorized / Needs Review	7%	<1%	11%	7%	2%	10%
Case Management	6%	5%	8%	4%	0%	5%
Medication Services	22%	38%	7%	40%	53%	41%
Rehabilitation & Support Services	3%	2%	6%	2%	0%	2%
Substance Use Counseling	11%	<1%	3%	7%	8%	7%
Withdrawal & Detox Services	<1%	<1%	3%	2%	2%	2%
Intake & Plan Development	<1%	2%	2%	<1%	3%	<1%
Diagnostic Code Categories						
Psychotic Disorders	10%	13%	44%	10%	2%	16%
Substance Use Disorders	63%	68%	42%	78%	93%	67%
Mood Disorders	17%	8%	10%	6%	5%	8%
Social & Environmental Factors	.	3%	1%	1%	.	0%
None	7%	2%	1%	2%	1%	1%
Anxiety & Trauma Disorders	2%	3%	1%	3%	.	5%
Administrative / Observation	3%	3%	1%	0.5%	.	3%
Neurodevelopmental Disorders	.	1%	0.1%	0.2%	.	0.2%
Personality Disorders	.	0.1%	0.1%	0.0%	.	0.1%
Neurocognitive Disorders	.	.	0.1%	0.1%	.	0.01%

- Is the Familiar Faces population is more likely to have a booking shortly after they stop refilling their psychoactive medications?
- Familiar Faces had a **modest** increase in risk - **7% higher** risk of detention during the 6 months after stopping filling psychoactive prescriptions.
- Remaining detention population had **minimal** increase in risk – a **1.3% higher** risk of detention during the 6 months after stopping filling prescriptions.

New Detention Booking Percentage
in 6 Months After Filling A Psychoactive Prescription

		Psychoactive Prescription Renewed?		Increase in Booking Risk
		No	Yes	
Cluster	3 (Familiar Faces)	44%	41%	7.3%
	All Others	20%	20%	1.3%

- Patients from different clusters showed **similar rates of post-PES follow-up appointment creation** and attendance with behavioral health
- Familiar Faces have a **PES usage rate 46x** higher than the rest of the detention population (1198 visits per 1000 people per year)
- Familiar Faces PES visits are most often **due to Psychosis (56%)**, significantly more than any other cluster

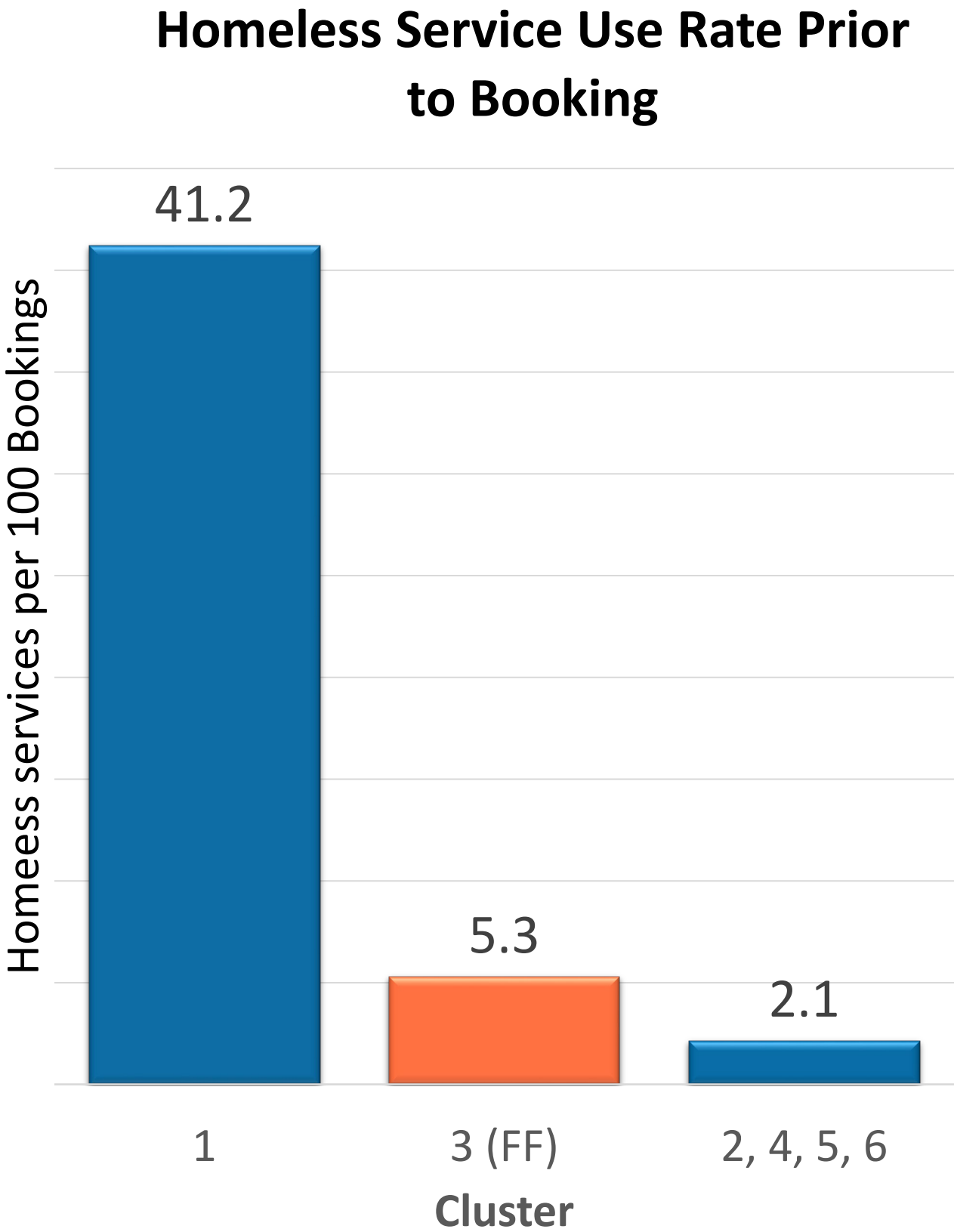


PES Utilization And Follow Up

Cluster	1	2	3 (Familiar Faces)	4	5	6	Never Been to Detention
Total Population Size	241	9,610	647	4,003	16,439	15,685	-
Number of PES Visits	119	2,434	5,427	1,701	57	4,085	19,084
PES Diagnosis Category							
Psychosis	34%	40%	56%	40%	33%	41%	21%
Substance – Other	8%	19%	16%	15%	12%	14%	5%
Mood/Anxiety	18%	10%	9%	13%	7%	11%	22%
Missing	11%	8%	8%	9%	12%	9%	15%
Substance – Alcohol	8%	7%	4%	9%	19%	12%	7%
Other	5%	5%	4%	4%	2%	3%	6%
Trauma/PTSD	13%	9%	2%	7%	12%	8%	18%
Admin/Encounter	2%	1%	1%	2%	0%	1%	1%
Medical Other	0%	0%	0%	1%	2%	1%	1%
Cognitive/Neuro	0%	0%	0%	1%	0%	1%	4%
Pain/Somatic	0%	0%	0%	0%	0%	0%	0%

Homeless Services Utilization

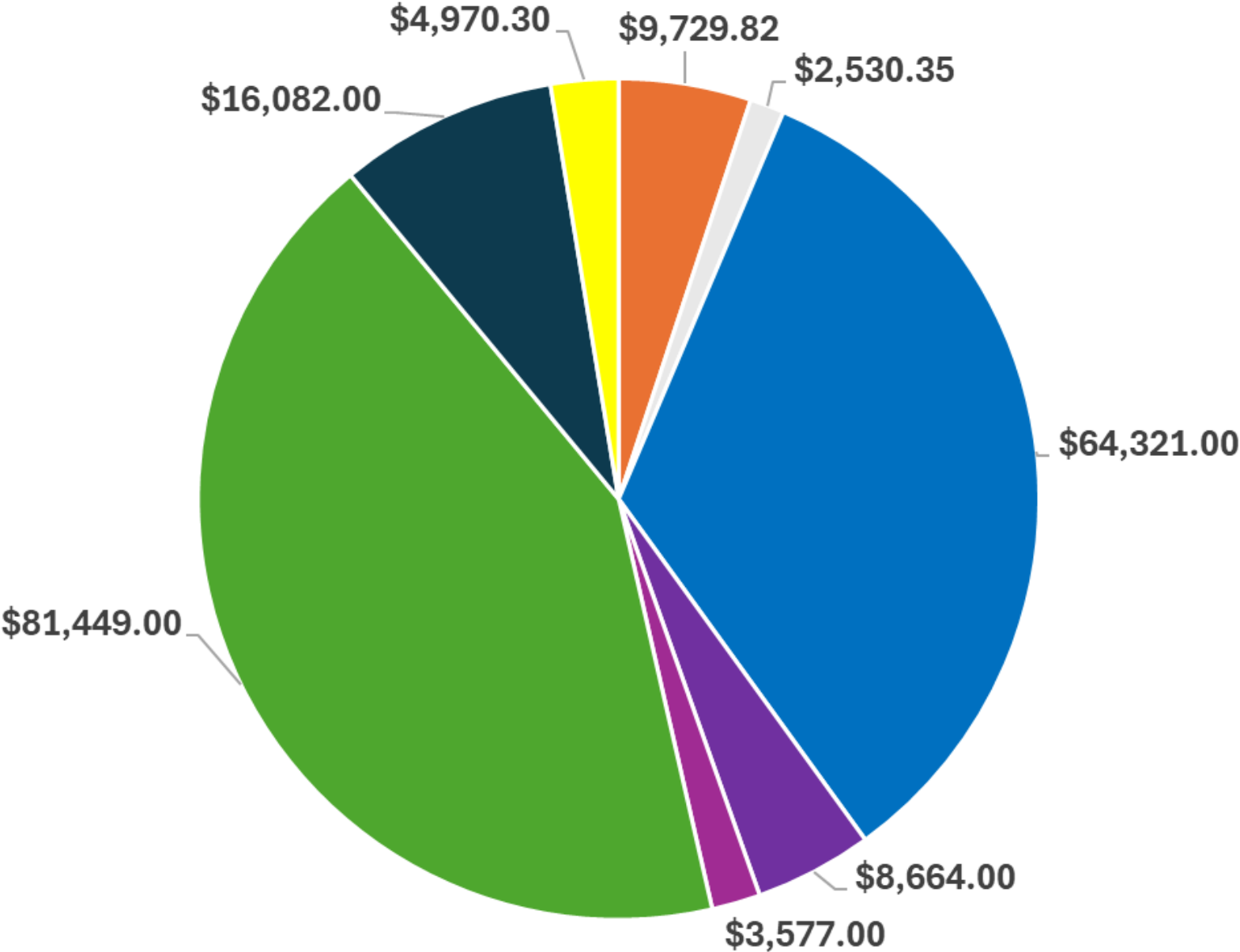
- Familiar Faces used **2.5 times** as many *Homeless services* compared to non-‘housing needs’ population per booking (5.3 Services per 100 bookings)
- Familiar Faces utilization of Homeless services were **highest in the ‘Basic Needs’** category (32%) and were comparably higher in:
 - Shelter Services (16%)
 - Outreach Services (14%)



Homeless Service Usage Rates by Category and Cluster			
Cluster	1	3 (FF)	2, 4, 5, 6
Bookings	665	5403	93792
Unique Patient ID	483	925	55496
Recent H3 Services (30d prior)	274	285	2013
Services per 100 Bookings	41.2	5.3	2.1
Homeless Service Categories			
Basic Needs	21%	32%	33%
Referrals & Linkages	5%	19%	18%
Shelter Services	6%	16%	12%
Outreach Services	4%	14%	12%
Housing Services	20%	5%	6%
Case Management	20%	3%	4%
Day Services / Drop-in Centers	<1%	3%	3%
Medical Services	<1%	2%	1%
Document & ID Services	<1%	2%	3%
Substance Use Services	<1%	1%	<1%

Annual Spend on Familiar Faces

Annual Claimed Cost of Services for Familiar Faces
Population 2023 - Total \$191K per Year



EMS	Homeless	External Claims	CCRMC ED
CCRMC PES	CCRMC IP	Detention	BH/SUD

Cluster	Average Paid Per Person	Average Claimed Cost Per Person
1 (Housing)	\$ 38,189	\$ 57,194
2 (Justice)	\$ 13,106	\$ 19,639
3 (Familiar Faces)	\$126,740	\$ 191,323
4 (Health Needs)	\$ 34,583	\$ 59,332
5 (Low Risk)	\$ 5,181	\$ 5,333
6 (AOD / Violence)	\$ 13,334	\$ 18,415

DEPT. OF SOCIAL SERVICES

MILLION-DOLLAR MURRAY

Why problems like homelessness may be easier to solve than to manage.



By Malcolm Gladwell

February 6, 2006

Top 5 Familiar Faces by Total Cost of Claims

Rank	Total Claimed Cost	Person - Year
1	\$ 2,934,536.00	Person A - 2022
2	\$ 2,926,768.00	Person B – 2023
3	\$ 2,818,268.00	Person C – 2018
4	\$ 2,669,397.72	Person D – 2022
5	\$ 2,496,149.25	Person E- 2023

Takeaways

60% of Familiar Faces have been referred to ECM, but only 5% are currently engaged in the program

Familiar Faces have a 46x higher usage rate of PES services than other clusters

Average annual claimed cost to Contra Costa of a Familiar Face member: \$191K

Familiar Faces receive 12x as many behavioral health services compared to other groups

Familiar Faces use 2.5x as many homeless services as non-'housing-needs' groups

Familiar Faces show a 7% increase in risk of a new detention booking following stopping filling psychoactive drug prescription

Next Steps

1. Finalize Data Design and Model Target

- Confirm longitudinal structure, feature set, and target definition for modeling
- Create a data spec and a finalized modeling objective

2. Build Predictive Model Prototype

- Develop and train an initial model to identify individuals at risk for becoming Familiar Faces
- Create a prototype model that includes performance metrics and example outputs

3. Validate Model Output with Stakeholders

- Review high-risk flags with program and operational partners
- Generate feedback and recommendations for refinement

4. Explore Programmatic Response Options

- Engage stakeholders to identify potential interventions and service pathways



cchealth.org

Thank You