

SELECT COMMITTEE ON EFFICIENCY IN GOVERNMENT

LCSC02: Outcomes Measurement for Children's Mental Health Services

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Background

The Select Committee on Efficiency in Government authorized the drafting of a bill directing the Department of Public Health and Human Services (DPHHS) to measure and report on the effectiveness of children's mental health services.

Reason for the Recommendation

Stakeholders said Medicaid payments for mental health services should be based on whether the treatment leads to better outcomes for patients, rather than solely on the type and amount of services provided. They suggested that DPHHS be required to measure outcomes for mental health services, beginning with services provided by the Children's Mental Health Bureau.

Cost Considerations

The bill draft may result in additional data collection and analysis requirements for DPHHS. It also will require publication of an annual report.

Data collection and analysis for outcome measures: Stakeholders believe the department already collects much of the data necessary to measure outcomes. For example, DPHHS is required by 52-2-311, MCA, to collect statistics and report on the placement of some children receiving mental health services — those high-risk children with multi-agency service needs. DPHHS also has chosen a tool for measuring the strengths and the intensity of the needs of youth receiving services and their families. This tool, the Child and Adolescent Needs and Strengths assessment (CANS), was discussed at the March meeting of the Select Committee on Efficiency in Government.

Because some elements for measurement of outcomes may already be in place, identifying the costs that DPHHS may estimate for data collection and analysis is difficult.

Report on identified outcomes: The bill draft requires DPHHS to publish and distribute to providers an annual written report on its measurement of the identified outcomes and to specify the results for each provider of children's mental health services.

Costs for the report could be range from a few hundred dollars to \$1,000 or more, depending on the number of pages, the format, and the number of copies printed. A review of selected DPHHS publications in recent years shows the following range of costs:

- \$393.90 for 100 copies of the 20-page *Montana Heart Disease and Stroke Prevention State Plan 2011-2015*, printed in color;
- \$530 for 500 copies of the 64-page black-and-white *Guide to the Department of Public Health and Human Services*, published in a smaller format in 2006; and
- \$6,070 for 5,000 copies of the 51-page *Montana Tobacco Use Prevention Plan*, published in color in 2005.