NOMs and Performance Measurement

Planning and Development Timeline: 2009-2014
2009: New MH Outcomes System

Guiding Principles

• Align Ohio outcomes with SAMHSA NOMs
• Reduce administrative burden to providers
  – Address gaps in MH client information system
  – Collaborate with ODADAS
  – Get stakeholder feedback
National Outcome Measures (NOMs)

• FY 2010 ODMH obtained SAMHSA grant
  – Agreed to report 3 NOMs with client-level files similar to TEDS
    • Living Situation
    • Employment /School Success
    • Criminal Justice Involvement
  – Agreed to report 4 NOMs with MHSIP/YSS-F survey
    • Perception of care Scale
    • Quality of Life (Outcomes) Scale
    • Social Connectedness Scale
    • 8-item Functioning Scale

All these NOMs are same for MH & AOD

These NOMs are post-hoc (no pre-post)
Survey Level Reporting: 2011-2013
Random, stratified statewide sampling

MHSIP Percent of Positive Subscale Scores: 2011-2013†

- Social Connectedness: 2011 (63.1%), 2012 (65.1%), 2013 (65.7%)
- Functioning: 2011 (50.3%), 2012 (55.9%), 2013 (54.9%)
- Quality of Life - Outcomes: 2011 (44.2%), 2012 (57.8%), 2013 (57.8%)
- General Satisfaction: 2011 (81.9%), 2012 (84.4%), 2013 (82.9%)
- Treatment Planning: 2011 (79.7%), 2012 (83.1%), 2013 (82.7%)
- Quality & Appropriateness: 2011 (76.6%), 2012 (82.7%), 2013 (81.2%)
- Access: 2011 (76.2%), 2012 (80.3%), 2013 (78.2%)

†MHSIP subscale score calculations have been standardized across three years for comparability.

Client-level Reporting 2010 - 2012
Development of SMD/SED Record

• Build on to OH BH Reporting System
• Focus on Priority Population – SMD/SED
  – Reduce burden by collecting only SMD/SED records
  – Operationalize SMD/SED using GAF or Provider designation
  – Support Integrated Care with collection of Physical Health measures – Biomarkers
2012-2013
Piloting the SMD/SED Record

• Grants supporting 9 providers in 6 board areas

• Primary Goal: Identify data collection and reporting problems

• Other objectives--Evaluation & QI reports--suspended
  – elevation of Medicaid to state
    • OHBH linked to MACSIS, not MITS
  – consolidation of ODMH & ODADAS
    • creation of LeanOhio OHBH workgroup

• Lessons Learned
2013: LeanOhio OHBH Workgroup

• Met at request of OhioMHAS Director between 8/13 and 12/13
• Provider and Board representatives
• Staffs with Offices of Planning, Quality & Research and Information Services
• Recommendations for consolidated approach
  – to outcomes and performance management
  – to collection, reporting and use of BH information
2014: Performance Measurement

• Recommended MH performance measures:
  – % receiving OP follow-up 30 days after hospitalization
  – % receiving second service within 90 days of assessment (new intake)
    • Average length of time between assessment and second service
  – % employed

• Workgroup made up of stakeholders to assist with operationalization and benchmarking