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Barbara Dunn LCSW, ACSW, has no relevant financial relationship or commercial interest that could be reasonably construed as a conflict of interest.
Bio - Barbara Dunn

As Director of Program Innovation and Outcomes for Magellan Health Services, Barbara Dunn is responsible for coordinating and evaluating innovative programs across the public sector. Barbara also facilitates the implementation of Magellan’s public sector outcomes assessment initiatives, which help service-recipients and their parents, caregivers and providers track their health, recovery and resiliency.

Barbara began her career working with homeless children and their families through an innovative Headstart program. She also held positions in community mental health, and worked for 10 years in child welfare. She later headed up a foster care program, where she administered a successful pilot program for reunification that was expanded and funded by the Philadelphia Department of Human Services.

As a Magellan-credentialed psychotherapist, Barbara joined Magellan’s staff in 2000 as a care manager, then became clinical supervisor for the Children’s Outpatient/Behavioral Health Rehabilitative Services (BHRS) Department, helping to improve the quality of home and community services. She has championed outcomes-based programs and the use of evidence-based practices to reduce residential treatment and keep children with families.

Barbara also managed the first data-driven, outcomes-based, collaborative BHRS management program in Pennsylvania, which earned a Public Sector Innovative Practices Award in 2006.

A licensed clinical social worker, Barbara holds a master’s degree in Social Service Administration from the University of Chicago and a bachelor’s degree in psychology from Binghampton University.
Learning Objectives

As a result of this training, participants will be able to:

• Define Outcomes-Informed Care

• Describe the trends and research in behavioral health outcomes

• Classify types of behavioral health outcomes

• Explain a measurement feedback system framework

• Summarize how to use outcomes-informed care in clinical practice
The Case for Outcomes

• Evidence based practice
• Measurement and timely feedback are at the core of management and learning theories
• Decision support
• Person centered practice
  – Therapeutic alliance
  – Treatment planning
  – Build trust and voice
• Accreditation
• Funding: grants, pay for performance
• Accountability
Outcomes Informed Care

- Targeting the outcomes desired
- Measuring those outcomes during and at completion of treatment
- Using that measurement in deciding what and when interventions are needed.
“Feedback on client health status is mainly beneficial to clients who may require changes in their current treatment.” Saptya, Riemer, and Bickman (2005)

- Feedback on “flagged” treatment group led to 62% of clients having improvement over the control group.
- Those progressing well in therapy who had feedback had a negligible change in outcomes over the control group.

* No correlation between standardized measures and clinicians perception of progress (Love, Koob, and Hill, 2007)

* Difficulty predicting and detecting worsening of symptoms and functioning over the course of treatment (Hatfield et al., 2009)
### Measuring Outcomes vs. Outcomes Informed Care

<table>
<thead>
<tr>
<th></th>
<th>Aggregate all Medicaid Providers</th>
<th>Trained Providers (Case Mgmt)</th>
<th>Large Provider Pilot</th>
<th>Trained Providers (State-Wide)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional Health 1st score</td>
<td>41</td>
<td>39</td>
<td>39</td>
<td>39</td>
</tr>
<tr>
<td>Emotional Health most recent score</td>
<td>42</td>
<td>41</td>
<td>41</td>
<td>42</td>
</tr>
<tr>
<td>% Emotional Health Improvement</td>
<td>38.1%</td>
<td>53.3%</td>
<td>56.9%</td>
<td>59.7%</td>
</tr>
<tr>
<td>% Members w/ Clinically Significant Emotional Health Improvement</td>
<td>25.1%</td>
<td>34.3%</td>
<td>38.1%</td>
<td>41.4%</td>
</tr>
<tr>
<td>Number of members</td>
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<td>781</td>
<td>197</td>
<td>776</td>
</tr>
<tr>
<td>Stat. sig. (p-value &lt;=0.05)</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>
A Framework for Measurement Feedback Systems

- Decision-Making Needs at the Client-Provider Level
- Decision-Making Needs at the Agency/Organization Level
- Decision-Making Needs at the Policy-Level
Information Technology Architecture

- Accessible
- Real time
- Salient data
- Flexibility in reporting for multiple users and usages
Magellan’s Approach to Outcomes

- **Strength Focused**: Empowering consumers to track their progress across treatment, focusing on recovery, resiliency, and wellness.
- **Clinical Utility**: Real-time consumer and provider reports, functional outcomes, facilitating person-centered planning.
- **Real-time reporting**: Providers’ need to easily stay abreast of individual consumers’ progress in real-time.
- **Tools & Reports Available For Free**
- **Versions for Adults & Children, in English & Spanish**
- **Scientifically-validated**: created in collaboration with a nationally recognized leader in the field, nationally normed.
- **Web-based**: Brief self-report by recipients or caregivers through a secure website.
- **Population Health Management**: Aggregate reports available online to all providers and reports which aggregate up to a community.
Patient-reported Outcomes (PROs): What Are We Measuring?

- **Bodily structure and function**
- **What you are able to do: functioning**
- **How you feel: distress and well-being**
- **What you say it is: personal evaluation**

Sources: WHO, ICIDH-2, 2001 (www.who.org)
Behavioral Health Outcomes:

• Classifying behavioral health outcomes:
  ➢ Clinical: symptoms reduced or no longer present
  ➢ Functional: impact on daily life activities
  ➢ Personal: moving forward with life goals
Using the CHI in Clinical Care: Testimonial

“The CHI has been a good conversational piece and learning tool to assist the case manager in having an open dialogue with consumer. Many consumers initially stated that they were completing the CHI because the case managers asked and they wanted to assist. **As the reports continue to be completed and discussed, more and more consumers are able to dialogue more freely and are able to note the changes and be able to provide more insight into why they believe they are improving or showing a decline.** As consumers start to see the CHI as a more valuable tool instead of an inconvenience or something that is being used to set them up for service termination, they are becoming more open and comfortable with completing the forms in an honest and forthcoming manner.”

*Lehigh County Case Management Provider*
Using Outcomes in Clinical Care

• Workflow Support
  – Administration
  – Treatment planning and review
  – Supervisory and team process

• Value Proposition
  – Face value
  – Scored Reports: individual and program

• Decision support
  – Service plans (Person Centered Treatment Planning)
  – Clinical alerts
  – Program evaluation and progress
From the Field: Using the CHI in Program Change

- Roles QI and Supervisor in reviewing and interpreting the data
- Evaluation of Population Characteristics
- Evaluation of Population Change
- Making Plans based on Provider Web Report
- Assessing Progress on Plans

Scott Wolff, Director
Lehigh Valley Community Mental Health Center
Getting Started

• Upcoming webinars
  – Access to *Outcomes360*\textsuperscript{SM} tools
  – Clinical Use of Outcomes Tools with consumers and in supervision
  – Programmatic Use of Provider Web Reporting for Self-Evaluation and Program Improvement

• Start the discussion
  – Identify needed vision, skills, resources, incentives, and actions
  – Review the Decision Tracker Template
  – Bring up questions at the webinars!
Review Online Resources: www.MagellanProvider.com

- Review resources in **Education > Outcomes Library**
- **FAQ**  *For Example: How do I reset my password?*
- **Education > Online Training > Demos of Online Tools (scroll down)**
  - My Practice > **Admin Setup** (1:01 mins)
  - Manage Outcomes > **Manage Outcomes Demo** (2:35 mins)
People Resources

• Provider Services Line 800-788-4005 Monday – Friday 8:00-5:30CT
  – To request a user name, reset a password or ask questions about the website, or if you experience technical difficulty

• Network: Christine Cole at CSCole@MagellanHealth.com
  – To change administrator and ask which MIS# number to use

• Bryon Belding at BNBelding@MagellanHealth.com
  – To change administrator and ask which MIS# number to use

• Outcomes Manager Julie Hoeschen at JHoeschen@MagellanHealth.com
  – On business decisions and clinical use of tools and reports
Questions?

Thank you for your dedication to the people we serve and to improving their lives using outcomes informed care!
To complete the post-test for CE credit:

http://www.surveymonkey.com/s/R29PKZH

The CE post-test will be available until midnight tonight.

Please complete the webinar evaluation at the link below:

http://www.surveymonkey.com/s/XLFYJ6J

The CE evaluation will be available until midnight tonight.

If you have any difficulty accessing the presentation material or post-test, please email Jhoeschen@magellanhealth.com
Bibliography

• Bickman, L., & Riemer, M. (2003). Improving client outcomes through feedback to therapists: The theory. In L. Bickman (Chair), Symposium conducted at the 16th Annual Research Conference. A System of Care for Children’s Mental Health: Expanding the Research Base, Tampa, University of South Florida, The Louis de la Parte Florida Mental Health Institute, Research and Training Center for Children’s Mental Health.


• Ware, John E. SF-36 Health Survey Update. (Pre-publication Version)


• Love, S., Koob, J., and Hill, I. Meeting the Challenges of Evidence-Based Practice: Can Mental Health Therapists Evaluate their Practice? Adoption & Fostering, 7:3 August 2007.
Bibliography


• Bickman, L A measurement feedback system (MFS) is necessary to improve mental health outcomes Journal of American Academy of Child and Adolescent Psychiatry 2008. 47:1114-1119.


• Chorpita, BP; Dalieden, EL Mapping evidence-based treatments for children and adolescents: Application of the distillation and matching model to 615 treatments from 322 randomized trials Journal of Consulting and Clinical Psychology 2009. 77:566-578.

