

# How Measurement-Based Care (MBC) Informs Health Reform and Value-Based Reimbursement Advocacy



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*The presenters have real or perceived financial relationships to the content of this presentation. Simon Weisz is President at Greenspace Health, a technology company that works with behavioral health organizations.*

1. Introductions
2. Defining Measurement-Based Care
3. What the Research Says
4. Maryland MBC Initiative
5. How MBC Fits into Value Based Care
6. Discussion

\*Please ask questions throughout!

# What is Measurement-Based Care?

Measurement-Based Care (MBC) is defined as the routine collection and use of client-reported progress measures throughout treatment to guide clinical decision making.

# Flipping Traditional Measurement on its Head

MBC makes measurement a **clinically valuable** process. A process that elevates the voices of people in care, provides insight to inform clinical decisions and helps to improve outcomes for everyone that accesses behavioral health services.

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*“I think of MBC as the foundation for good mental health care – literally everything else is built upon this strong and solid foundation. It helps me to make sure that treatment is going in the right direction”*

- Dr. Sandy Resnick, Yale University



# The “Four C’s” of MBC

MBC is an **intuitive clinical process** that is distinct from the basic completion of assessment tools. There are four key components to successfully implementing MBC, which we refer to as “**Four C’s**”:

**1. Consistent** collection of data throughout a client’s treatment. Shift away from pre/post.

**1. Customized** to the presenting issues, symptoms and goals of the client.

**3. Client visibility** is provided into assessment results and overall progress.

**4. Collaborative** between client and clinician. To determine treatment goals, identify progress and inform clinical discussion.

# What the Research Says

## **The more assessments clients complete, the more they improve.**

In youth treatment, outcomes were improved with weekly PROM administration, versus every 90 days.

## **The more often a clinician reviews client results, the more clients improve.**

Client outcomes are better when feedback is provided to the clinician and client versus data just being collected and not viewed or used.

**3.5x**

Higher likelihood that a client experiences reliable change

**42%**

Higher overall improvement in clinical symptoms

**40%**

Lower dropout or cancellation rates and 25% lower no-show rates

**To gather some quick context across the room...**

Has your organization implemented MBC?

Using client-completed outcome measures?

Is this being done in the EHR? Pen and Paper? Other solution?

Level of success? (low, medium, high)

# Maryland Community Behavioral Health Association

What is the coordinated Measurement Based Care initiative in Maryland, and how did it get started?

**18** Organizations

**700** Clinicians

**12,000** Clients



# Why does an organization care about MBC?

1. **Improved care outcomes.**
2. **Clear data on effectiveness.** Understand the impact of your team's programming (and what programs are most effective for whom).
3. **Decrease no-show and cancellations rates** through increased client engagement.
4. **Align with industry requirements** - from accrediting bodies and as part of EBPs.
5. **Prepare for Value-Based Care.**





# Why we chose to make this a coordinated effort?

- 1. Remove Implementation Barriers.**  
Reduce cost and provide support to ensure successful implementation across members.
- 2. Shared Data for Benchmarking.**  
A learning collaborative, consistent measurement and shared dashboard.
- 3. Advocacy.**  
Outcome data can support advocacy efforts and Value Based Payment models.

# The Greenspace Health Dashboard for Maryland



# Discussion Questions

## For Shannon

1. What key questions does MBC allow CBH members to answer today?
2. How has this MBC initiative helped CBH in negotiations / advocacy efforts - with the State or other key stakeholders? Any concrete examples?
3. What roadblocks have existed for CBH in these conversations?
4. Where do you see this initiative in 3 years?

# Discussion Questions

## For Shannon, Simon and Everyone

1. What role do you see MBC playing within Value Based Care?

## For Everyone

2. Can anyone share an example VBC contract?
3. Where do you want to see VBC in 3 years for your organization?

Thank you!

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