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An Economic Analysis of the Implementation of Team-based Collaborative Care in Outpatient General Mental Health Clinics

Miller, Christopher J. PhD^{1,2}; Griffith, Kevin N. MPA, PhD^{3,4}; Stolzmann, Kelly MS¹; Kim, Bo PhD^{1,2}; Connolly, Samantha L. PhD^{1,2}; Bauer, Mark S. MD^{1,2}
 Author Information

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 Metrics

Abstract

Background: Collaborative Chronic Care Models represent an evidence-based way to structure care for chronic conditions, including mental health conditions. Few studies, however, have examined the cost implications of collaborative care for mental health.

Objective: We aimed to conduct an economic analysis of implementing collaborative care in 9 outpatient general mental health clinics.

Research Design: Analyses were derived from a stepped wedge hybrid implementation-effectiveness trial. We conducted cost-minimization analyses from the health system perspective, incorporating implementation costs, outpatient costs, and inpatient costs for the year before collaborative care implementation and the implementation year. We used a difference-in-differences approach and conducted 1-way sensitivity analyses to determine the robustness of results to variations ±15% in model parameters, along with probabilistic sensitivity analysis using Monte Carlo simulation.

Subjects: Our treatment group included 5507 patients who were initially engaged in care within 9 outpatient general mental health teams that underwent collaborative care implementation. We compared costs for this group to 45,981 control patients who received mental health treatment as usual at the same medical centers.

Results: Collaborative care implementation cost about \$40 per patient and was associated with a significant decrease in inpatient costs and a nonsignificant increase in outpatient mental health costs. This implementation was associated with \$78 in cost savings per patient. Monte Carlo simulation suggested that implementation was cost saving in 78% of iterations.

Conclusions: Collaborative care implementation for mental health teams was associated with significant reductions in mental health hospitalizations, leading to substantial cost savings of about \$1.70 for every dollar spent for implementation.

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