

Value-Based Care Models for Mental Health and Substance Use Services in Medicaid

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OVERVIEW

Increasingly, Medicaid managed care organizations (MCOs) are adopting value-based care models to improve care for individuals with mental health conditions and/or substance use disorders. These models incentivize an integrated approach to the identification, treatment, and management of mental health and substance use disorders, along with physical health conditions.

Individuals with mental health and/or substance use disorders have typically received care in a fragmented delivery system that rewards providers for volume rather than value of care. Value-based models promote a holistic approach by incentivizing mental health and substance use providers to address physical health needs and encouraging primary care providers to screen, manage, and refer patients with mental health and/or substance use disorders.

The use of value-based models for mental health and substance use treatment is relatively new but holds significant promise. Medicaid MCOs are working with providers on care coordination, data analytics, and performance measurement and improvement to accelerate the adoption of value-based care.

Topics

- Opportunity for value-based mental health and substance use care
- Approaches to value-based care
- Importance of quality metrics

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