

# Centerstone of America

Headquarters: Nashville, Tennessee  
Measurement-Based Care in Behavioral Health



## An Overview of Measurement-Based Care in Behavioral Health

Just a decade ago, the majority of behavioral healthcare clinicians did not commonly use patient reported outcome measures (PROMs)<sup>1</sup> for routine clinical care. More recently, however, there has been a large shift due to the development of innovative technologies, such as measurement feedback systems (MFS), that allow clinicians to easily administer a broad range of validated scales or measures. Decades of research now demonstrates that this practice, known as measurement-based care (MBC) - or the systematic use of patient-reported data to monitor treatment and inform care decisions - outperforms usual care, particularly for

those patients who are not initially responding to treatment.

One recent randomized controlled trial (RCT) found that the treatment response rate increased by 24% and remission rates increased by 45% when measurement-based care was used, compared to treatment as usual.<sup>2</sup> Despite these compelling results, less than 18% of psychiatrists and 12% of psychologists in the United States routinely administer symptom rating scales to their patients.<sup>3</sup>

## Barriers to MBC Adoption

Even with these demonstrated benefits, there are barriers that have prevented

MBC from being more widely adopted including:

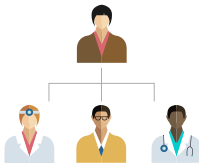
- Lack of alignment with organizational goals
- Lack of buy-in from clinicians, patients and staff
- Lack of formal training for clinicians
- Lack of training manual and protocol availability
- Time constraints (one of the most commonly cited reasons by behavioral health clinicians)
- Perceived mismatch between clinical needs and the measure content, including rating scales that are designed for research rather than clinician use
- Perceived negative impact on establishing patient rapport when administering rating scales
- Time-consuming and complicated measures, such as standardized diagnostic interviews
- Technology barriers (see next page)<sup>4</sup>



### Organizational

*The Challenge:*  
low level of institutional buy-in

*The Solution:*  
Build the case that aligns your MBC project with your institutional goals



### Departmental

*The Challenge:*  
minimal expertise in selecting appropriate mbc technology

*The Solution:*  
Obtain “Live Use Cases” of the MBC technology in use at other institutions



### Clinical Engagement

*The Challenge:*  
lack of clarity regarding impact on patient-provider interaction

*The Solution:*  
Educate clinicians on the benefits of MBC and share best practices



### Staff Engagement

*The Challenge:*  
perceived negative impact on clinical workflows

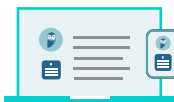
*The Solution:*  
Integrate with EMR to automate processes and increase staff adoption



### Patient Engagement

*The Challenge:*  
struggles with technology, privacy, security and lack of education of benefits to care

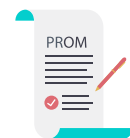
*The Solution:*  
Utilize a user-friendly and accessible MBC technology with reminders and privacy assurances; discuss results with patients



### Technology

*The Challenge:*  
difficulties in resolving technical and data issues

*The Solution:*  
Implement in phases: Early adopters test technology and provide feedback on usability and features



### Privacy/Security

*The Challenge:*  
threats to confidentiality and privacy

*The Solution:*  
Use institutional security review to ensure that the technology meets required standards to protect health information

# Centerstone of America

Centerstone of America is a not-for-profit national leader in behavioral healthcare providing services in Florida, Illinois, Indiana, Kentucky and Tennessee. Through its Centerstone Research Institute the organization also strives to improve behavioral healthcare through research and the application of technology.

## Pioneering MBC: The Challenges

For more than a decade, Centerstone has been at the forefront of MBC. “We have built our own tools, and purchased others, to help with measurement on the clinical side,” said Ashley Newton, MPS, PMP, Chief Operating Officer of the Centerstone Research Institute, “But these efforts presented challenges. Many technology tools only specialized in a subset of the functionality Centerstone needed; and the software didn’t always integrate well within existing workflows.”

The impact on clinicians and patients was also an issue. “One of our main struggles was gathering data and reporting to the state or payers. When we spend so much time collecting data from the patient, it reduces the effectiveness of the appointment and leaves us less time to work with patients on their

mental health concerns,” added Prasad Kodali, Chief Information Officer for Centerstone. It wasn’t just clinical challenges Centerstone wanted to resolve. “One of the business problems we are trying to address is how to conduct screenings in a manner that patients are comfortable with, that reduces staff time, and gives both patients and clinicians the ability to view all results in one place,” said Bob Siegmann, Centerstone’s Senior Vice President of Integrated Health Services. “Ultimately, we want MBC for mental and behavioral health to be similar to measuring blood pressure – something that is natural and easily performed as part of an appointment. But that’s harder to do in the day-to-day world where therapists are dealing with large patient populations.”



## Establishing MCB Technology into Practice with Owl

Centerstone was awarded a Certified Community Behavioral Health Clinic (CCBHC) grant to support initiatives that use MBC to meet diagnostic and treatment challenges. With this grant, Centerstone initiated a partnership with Owl. Owl's cloud-based MBC solution

("the Owl") has enabled Centerstone to screen patients for behavioral health status, track patient progress and monitor treatment efficacy. With a web-based, mobile-friendly interface, patients can easily complete PROMs on any device – a home computer, smartphone or an iPad in the waiting room. This approach has allowed the technology to integrate seamlessly with Centerstone's clinical workflows and EHR system. The Owl platform streamlines the clinical workflow by automating the scheduling of measures as well as instantly scoring and graphing patient progress over the course of treatment in a visual format. The Owl – the preferred MBC platform for the American Psychiatric Association (APA) PsychPRO national mental health patient registry – uses evidence-based PROMs to foster deeper patient engagement and enhance clinician confidence by guiding care. The Owl also



helps Centerstone benchmark data across its multiple location and service lines in several states and supports quality and reporting requirements (Merit-based Incentive Payment System, or MIPS). "We evaluated several companies and Owl had the most ready-to-go solution, off the shelf. Other vendors are only aspiring to get there at this point," noted Newton.

The simplicity and ease-of-use of the Owl solution helps clinicians minimize their focus on data collection during the initial appointments, a critical time in building patient-clinician relationships. "When we push the collection of data to the patient, through an app that automatically integrates with the EHR, the clinician has that information at his or her fingertip when the patient arrives, and the appointment can focus on the treatment," added Kodali. "The time we have to spend initially at intake collecting data is not profitable. By applying the Owl solution, it helps remove that financial burden of the first few appointments."

*"The benefit of working with the Owl team is that they are experts in understanding requirements and creating a user experience that makes it easy for clinicians and patients to adopt."*

## Seeing Clinical Results

Since implementing the Owl solution in an Indiana multi-site pilot program in early 2018, Centerstone has now expanded its deployment across multiple states. The response from both clinicians and patients has been overwhelmingly positive with engagement levels well in excess of industry standards. Centerstone's staff consistently indicates that the Owl has reduced clinical burden by making it easy to assign measures, designate treatment teams, guide care and, most importantly, aggregate data across their population. In addition, the Owl has allowed them to review measure scores and graphs quickly before appointments. Clinicians use the outcomes graphs in session with patients, which provides a shared understanding of treatment goals and further engages patients in their care.

"Patients love the idea of being able to use an iPad in the waiting room or using their smartphones or computers at home," noted Siegmann. "They feel like it's more private than if they are filling out a piece of paper or verbally providing results to their therapist, and they are likely to be more honest in their responses."

With the success of its pilot program in Indiana, Centerstone is now using the Owl as a core tool for MBC implementation in Kentucky and expects system-wide deployment throughout its Florida, Illinois and Tennessee facilities over time. Ultimately the Owl will benefit the more than 170,000 patients Centerstone serves annually in its five-state territory. "There is no way to do MBC this well without technology like the Owl to support the large numbers of patients we see day to day," said Siegmann.

***In a Centerstone survey, the overwhelming majority of patients (89%) also reported that completing their PROMs before the initial visit gave them more time to discuss concerns and potential solutions with their social workers and in some cases treatment clinicians.***

## MBC: The Business Case

**With early clinical successes and planned expansion of the Owl, Centerstone also sees the potential for significant MBC business benefits, including:**

- A competitive advantage by delivering proven results
- Greater evidence of the quality of care delivered that will resonate with both Centerstone's board of directors and payers board of directors and payers
- Optimal utilization management and reimbursement
- Better matching of resources to patient needs, as well as coordination of care and referrals
- Support of value-based care

"Our intent is that the continued use of the Owl in all of our states will enable us to stand out in the marketplace as a premier clinician," said Siegmann. "Until now, we didn't have a definitive way to show that we are getting better results. With MBC through the Owl, in the long-term, we expect to be able to do that." Centerstone also expects that being able to document patients' results through the Owl will assist in the negotiation of rates with payers and state Medicaid systems while stemming revenue leakage. "The intent is that with the health plans, if we can prove we can get better outcomes, we will be able to negotiate more appropriate payment for our services," Newton noted. The industry is still in the early stages of transitioning from a fee-for-service model to one based on outcomes. Pioneers like Centerstone are establishing the standard for adoption of new approaches, like the Owl, to foster uptake of evidence-based practices to improve care.

## About Centerstone of America

Centerstone of America is a not-for-profit healthcare organization dedicated to delivering care that changes people's lives. Centerstone provides mental health and substance abuse treatment, education and support to communities in Florida, Illinois, Indiana, Kentucky and Tennessee, and additionally offers individuals with intellectual and developmental disabilities life skills development, employment and housing services. Nationally, Centerstone has specialized programs for service members, veterans and their loved ones, and employee assistance programs for businesses of all sizes. Centerstone Research Institute improves behavioral healthcare through research and technology. For more information, visit [www.centerstone.org](http://www.centerstone.org).

## About Owl

Owl is the leading provider of precision care management solutions for behavioral health. Through its advanced cloud-based platform, the company offers a scalable and sustainable strategy to integrate measurement-based care, clinical decision support, and data insights into existing treatment workflows across all behavioral health conditions. Owl enables behavioral health and primary care providers to expand access, enable telehealth, and improve quality care delivery, while reducing risk and enabling value-based care. Leading organizations, including Main Line Health, Amita Health, Inova Health, West Yavapai Guidance Clinic and Aurora Mental Health Center, use Owl to improve clinical and financial outcomes. For more information visit [owl.health](http://owl.health).

*"Payers are still in the infancy of reimbursing based on the value of care," Kodali concluded. "We see great potential for the Owl. If we can measure improvements, it speaks volumes to the value of the clinical care we are providing, which aligns well with the direction where healthcare is headed."*

<sup>1</sup>Aboraya, Ahmed, MD, DrPH and Nasrallah, Henry A., MD. It's time to implement measurement-based care in psychiatric practice. (Current Psychiatry. 2019 June;18(6):6-8) <https://www.mdedge.com/psychiatry/article/201625/mixed-topics/its-time-implement-measurement-based-care-psychiatric>

<sup>2</sup>Mandros, Athena. Why So Little Measurement-Based Mental Health Care? (Open Minds 01/29/2019) <https://www.openminds.com/market-intelligence/executive-briefings/why-so-little-measurement-based-mental-health-care/> including <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4910387/>

<sup>3</sup>Fortney, John C. Ph.D.; Unützer, Jürgen, M.D., M.P.H.; Wrenn, Glenda, M.D., M.S.H.P.; Pyne, Jeffrey M., M.D.; Smith, G. Richard, M.D.; Schoenbaum, Michael, Ph.D.; and Harbin, Henry T. M.D. A Tipping Point for Measurement-Based Care. (Psychiatry Online, 1 Sep 2016) <https://doi.org/10.1176/appi.ps.201500439>

<sup>4</sup>Lewis, C.C.; Boyd, M.; Puspitasari A.; Navarro E.; Howard J.; Kassab H.; Hoffman M.; Scott K.; Lyon A.; Douglas, S.; Simon, G.; Kroenke, K. Implementing Measurement-Based Care in Behavioral Health: A Review. (JAMA Psychiatry. 2019 Mar 1;76(3):324-335. doi: 10.1001/jamapsychiatry.2018.3329.) <https://www.ncbi.nlm.nih.gov/pubmed/30566197>