

The New CAHPS Outpatient Mental Health Survey

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What Changed in 20 Years & What Has Not?

- 20th Century health plans often limited enrollees to 8 or 10 outpatient visits—restricted access was a theme in focus groups
- Mental and physical health plans were often separate entities
- Mental Health Parity and Addiction Equity Act (2008) extended Mental Health Parity Act (1996) prohibitions on limited benefits
- Patient Protection and Affordable Care Act (ACA 2010) deemed mental health care as an essential benefit
- The ACA expanded small group and individual health insurance markets and Medicaid
- Groups like the National Alliance on Mental Illness worked to reduce stigma associated with mental health
- 1 in 5 adults experience mental illness each year

Refinements of CAHPS Mental Health Care Surveys

Year	Event
2016	Cognitive testing and focus groups to understand relevance of survey content given changes in mental health care landscape
2017	Cognitive testing and focus groups with a revised survey
2017	Online survey to assess use of different treatment modes
2018	Technical Expert Panel reviewed developments and made recommendations
2018	Additional cognitive testing and a new draft instrument
2018	Field test of a revised survey using online panel and with Department of Veterans Affairs panel
2021	Field testing of a revised survey in four Medicaid health plans
2022	Field testing of a revised survey in a four family medicine practices

What did we learn?

- Cognitive interviews showed problems with wording
 - ▶ For example, participants didn't understand “using up” mental health benefits
- Focus groups reflected how mental health care has changed
 - ▶ Plan arrangements have evolved
 - ▶ New ways of interacting with ALL health care
- On the other hand, the more things change, the more they stay the same—patients build their medication and counseling systems

Some of the Major Changes between ECHO and the new CAHPS Outpatient Mental Health Survey



Dropped:

- Questions about health plans
- Questions about perceived improvement and functioning

Added:

- Questions about including family and friends in treatment/decisions
- Question asking whether patients were given information about their rights
- Question asking whether patients felt they could refuse a specific type of treatment

First Field Test of Current Mental Health Care Survey



- Medicaid selected four health plans
- Random sample of 1000 enrollees per plan
- Patients 21 years and older who had visit in the last 6 months for a mental health diagnosis, a substance use disorder or both

Field Test Protocol

1. Sent a prenotification letter with URL for web survey.
 2. Mailed a self-administered questionnaire, a cover letter, and a business reply envelope.
 3. Nonrespondents sent a second questionnaire packet 3 weeks after the first mailing.
- ▶ LIMITED RESPONSE!!!
- ▶ Second mailing to 1508 plan members with no prenotification letters since few respondents used the web-based survey.
 - ▶ Two mailings of questionnaire packets

Results

Protocol	Eligible	Web complete	Paper complete	Response Rate
1. Push-to-Web & Mail a. Letter with URL b. Survey Packet, no URL c. Survey Packet with URL	3408	25	336	10.6%
2. Mail Only a. Survey Packet with URL b. Survey Packet with URL	1316	14	87	7.7%

Notes: About 14% of mailings to sampled plan members were returned due to bad addresses, and some were returned from people no longer living in the state.

We found small difference in response rates between the 4- and 8-page questionnaires in round 2.

7.4% response rate for the 4-page and 8.6% for the 8-page questionnaires.

Second Field Test: Patients Seen in Family Medicine

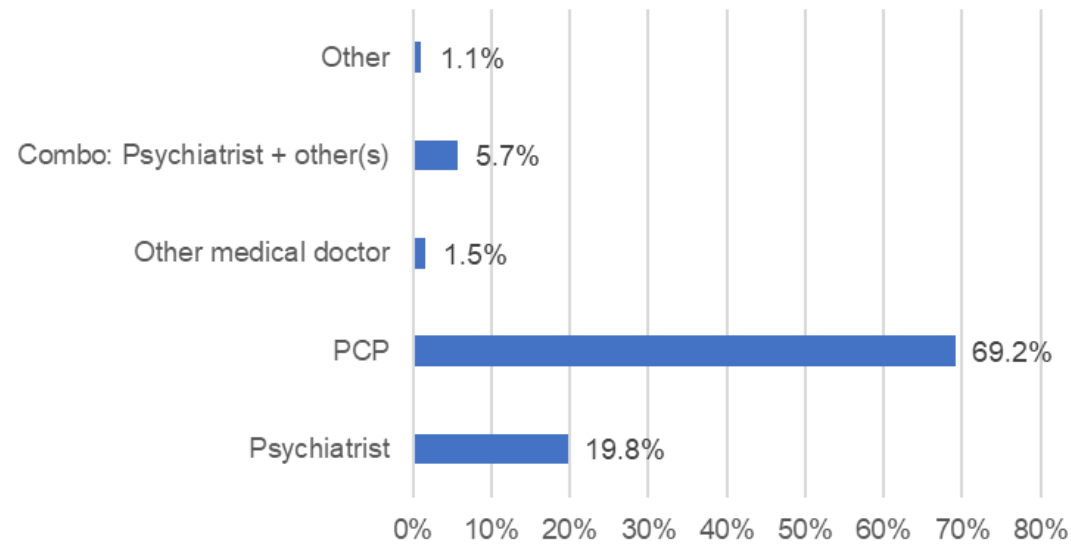
- Four family medicine practices in central Massachusetts
- Random sample of 750 or more patients per practice
 - ▶ Planned 250 mental health diagnosis, 250 substance use disorder, 250 Both
 - ▶ Practices had fewer patients seen for substance use disorder, reallocated sample
- Patients seen between March 1 & August 22, 2022
- Adults 18 years and older who had visit in the last 6 months for a mental health diagnosis, a substance use disorder, or both
- Exclusions: Patients with intellectual disabilities or dementia

Second Field Test Protocol

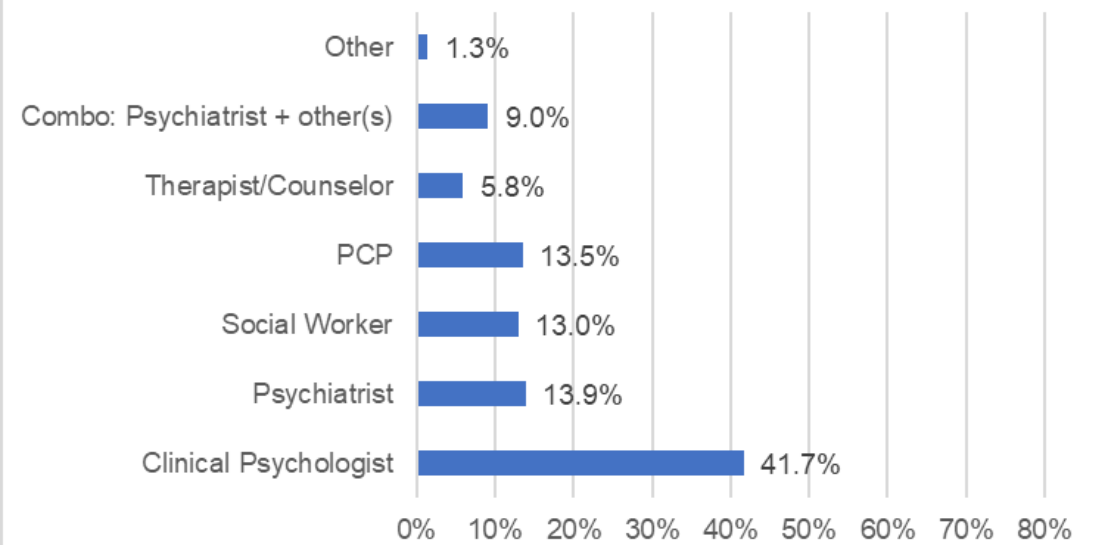
- Sent a survey invitation in English and Spanish with URL for web survey
- Qualtrics web survey in English and Spanish
- Included a self-administered questionnaire and a business reply envelope.
- Nonrespondents sent a second questionnaire packet several weeks after the first mailing.
- Paper surveys available in English and Spanish
 - ▶ English included in mailings
 - ▶ Spanish upon request

Types of Providers

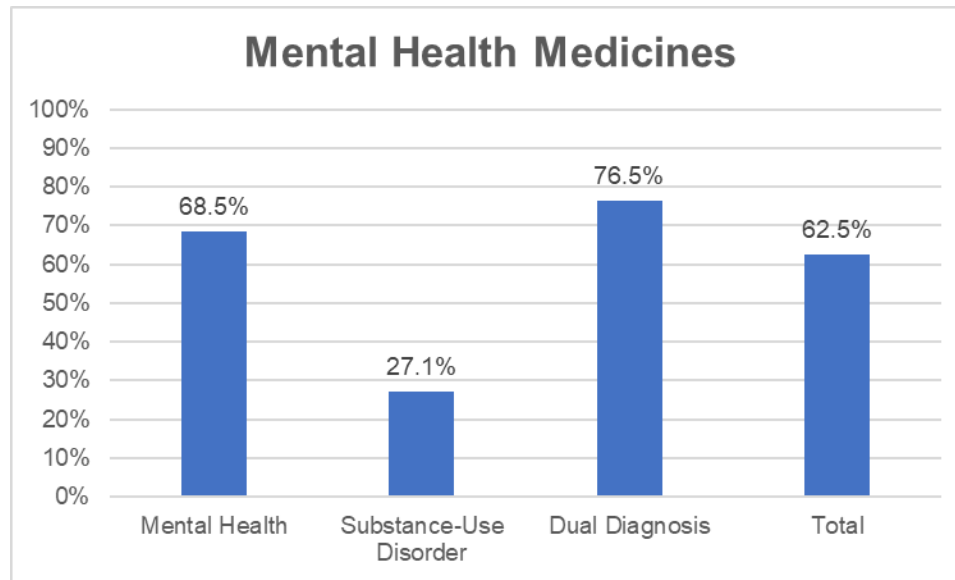
Types of Mental Health Medicine Prescribers



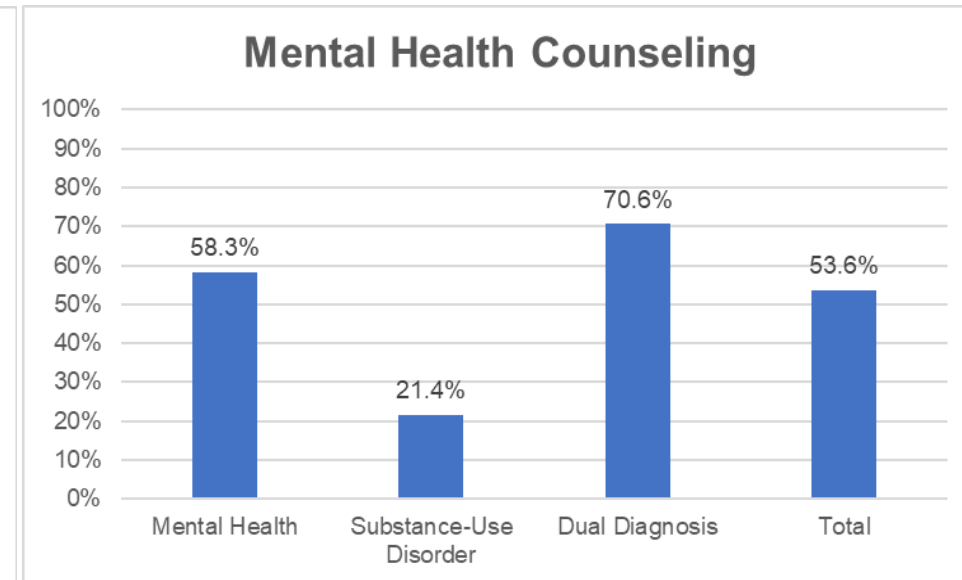
Types of Mental Health Counselors



Counseling or Mental Health Medicines by Treatment Group



“In the last 6 months, have you taken prescription medicine for any kind of mental health reason?”



“In the last 6 months, did you get any mental health counseling for any reason?”

Note: 45% reported both getting mental health counseling and taking prescription medicine for mental health reasons.

28% reported neither counseling nor medicines.

Mental Health Survey Questions to Create Measures


- CAHPS uses composite measures to summarize processes of care, for example:
 - ▶ Access (Getting Timely Appointments, Care, & Information)
 - ▶ Communication (How Well Providers Communicate with Patients)
- Single items
 - ▶ Questions that don't fit with others (Goal Setting for Self Management)
- Ratings of Providers
 - ▶ 0 to 10, where 0 is worst and 10 is best
- Reports often focus on the most positive response to questions, that is, a “top box” response.

Access to Mental Health Counselors

- How difficult was it to find this mental health counselor?
- In the last 6 months, how difficult was it to make appointments with your main mental health counselor?

Responses: Very difficult, Somewhat difficult, Not very difficult, Not difficult at all

“Top Box” response



Communication with Mental Health Counselors

- In the last 6 months, how often did your main mental health counselor listen carefully to you?
- In the last 6 months, how often did your main mental health counselor show respect for what you had to say?

Responses: Never, Sometimes, Usually, Always

Goal Setting

- Screening question: In the last 6 months, did you talk with your main mental health counselor about setting goals for your treatment?
 - ▶ 62% of those reporting counseling talked about goals.
- How much did your main mental health counselor consider what is important to you when setting the goals for treatment?

Responses: A lot, Some, A little, Not at all

Summary of Results

- About $\frac{1}{2}$ to $\frac{3}{4}$ of respondents reported difficulties in access to Rx prescribers and counselors, especially finding counselors
- Only 1 in 5 of those getting counseling reported communication problems

Composite Measures Reliability

Composite	Internal Consistency Reliability	Valid N
Counseling Access		
How difficult to find counselor	0.52	137
How difficult to make appt. w/counselor		
Counseling Communication*		
How often counselor listened	0.89	223
How often counselor treated w/respect		

* Adding “counselor considers what’s important in setting goals” doesn’t change the internal consistency coefficient ($\alpha=0.84$). However, the valid n drops to 170.

Composite Measures Inter-Unit Reliability

Composite	Inter-Unit Reliability	Intraclass Correlation Coefficient (ICC)	Number of subjects per practice necessary for 0.70 reliability
Counseling Access	0.549	0.0215	106
Counseling Communication	0.124	0.0026	911
Counselor Rating	0.598	0.0260	87

Summary and Conclusions

- Survey response was still a challenge
 - ▶ Response was slightly better among patients seen in family medicine practices, compared to a survey by health plan.
- Experiences among those seen for mental health conditions differ from those with Substance Use Disorder
- Results reported in composites are promising
- Construct validity is as expected; measures were associated with ratings of counselors
- Many are in the sample, yet did not report receiving or needing Mental Health or Substance Use Disorder care