



NOMs: Moving the System Toward Recovery

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Arizona Department of Health Services
Division of Behavioral Health Services

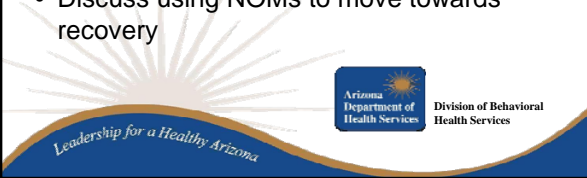


Learning Objectives

- Defining NOMs nationally and locally for both substance abuse treatment and prevention
- Examine Arizona data
- Discuss using NOMs to move towards recovery




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Learning Objectives

- What can NOMs do for me?
- What can NOMs do for the people I serve?



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Each table is assigned a role

- People receiving behavioral health treatment
- Community stakeholders
- State legislators
- Federal legislators
- ADHS leadership
- Behavioral Health Provider
- RBHA

Each table answers one of the following questions (from the perspective of their role):

- 1) Do I care if substance abuse programs are effective? Why/why not?
- 2) How does what I know about substance abuse programs influence my behavior and decisions?
- 3) What would I want to know about the effectiveness of behavioral health treatment and prevention that I don't know right now?

NOMs

- Domain
- Outcome
- Measure
 - Mental Health
 - Substance Abuse Treatment
 - Substance Abuse Prevention

Sources of NOMs Data

- CIS
- TEDS
- SAPT
- NSDUH
- Provider Reports
- Uniform Crime Reports
- National Public Education Financial Survey
- Fatality Analysis Reporting System

Arizona's Definition of Tx NOMs

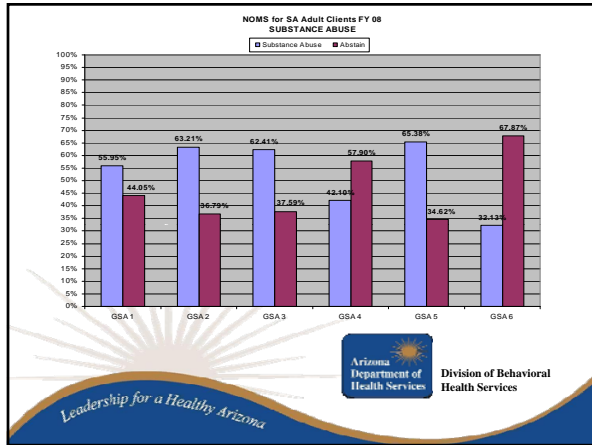
- Substance Abuse Recipients
 - Any record with an Axis 1 substance use diagnosis OR
 - Any record with a Behavioral Health Category: Substance Abuse (Value = "G") OR
 - Any record with a primary, secondary or tertiary substance problem type that is not equal to "none" or is not blank.
 - For Alcohol, exclude SA Freq. of no use, 1-3 times in past month, and 1-2 times per week

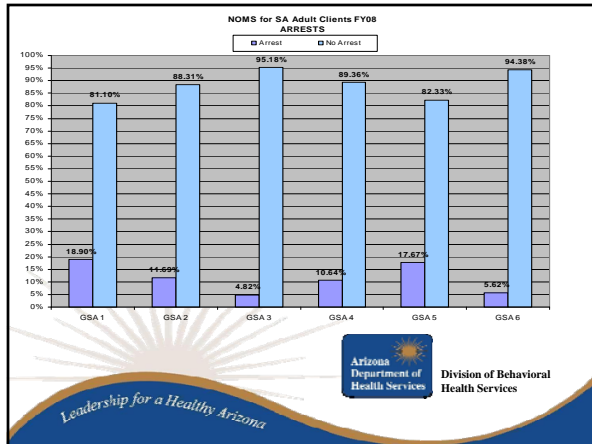
Arizona's NOMs

- Abstinence
- Employment/Education
- Crime
- Housing
- Social Connectedness
- Access/Capacity
- Cost Effectiveness
- Evidence-Based Practice

Change from Admission to Discharge

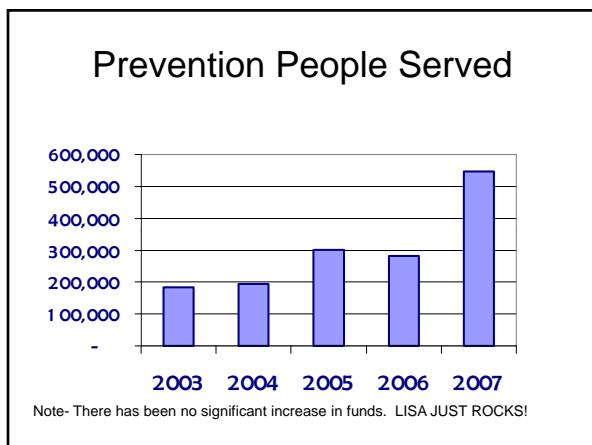
Performance Measure	National	Arizona	NM	NV
Employment	4.5%	18.6%	2.2%	11.9%
Stable Housing	2.3%	0.7%	4.2%	2.9%
No Arrests	14.1%	3.88%	-0.8%	6.8%
Abstinence -Alcohol	21.8%	12.3%	6.7%	5.3%
Abstinence -Drugs	24%	12.9%	4.1%	8.5%

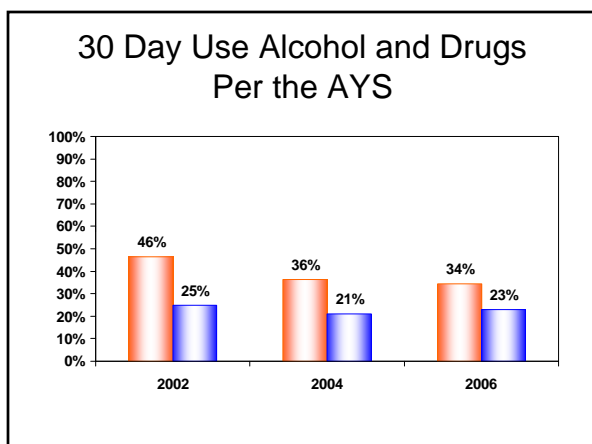


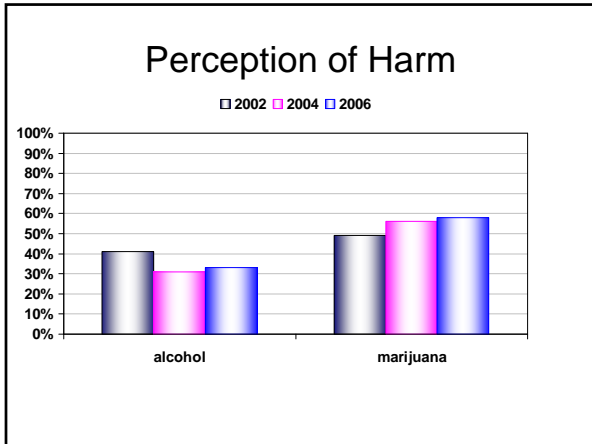


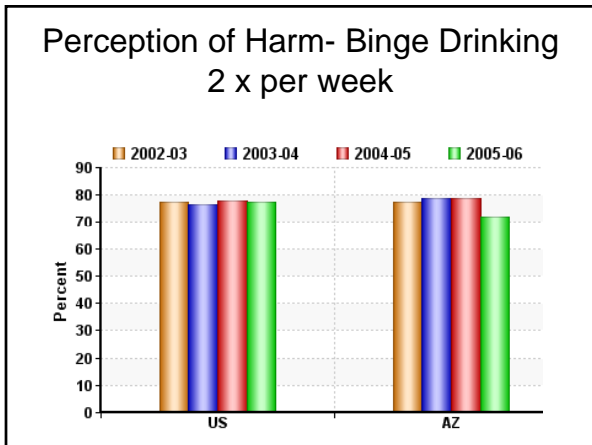
Cost Effectiveness

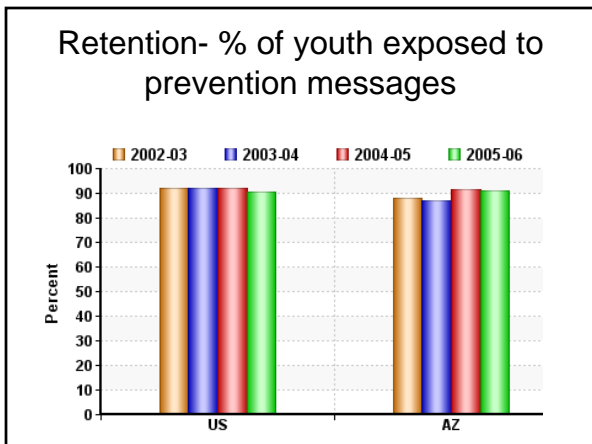
	IOM Intervention Type			
	Universal Direct	Universal Indirect	Selective	Indicated
Cost Bands	\$58-694	\$1-82	\$151-6,409	\$51- 4,888
Avg cost of AZ program	\$32.02	\$0.38	\$133.24	\$85.44
% of AZ programs	38%	50%	42%	N/A

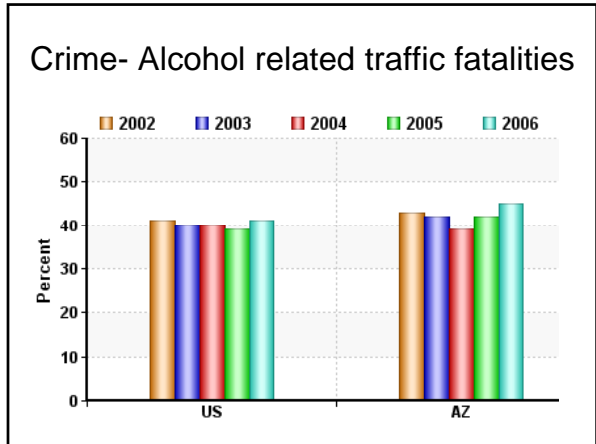












Activity/Policy Recommendations

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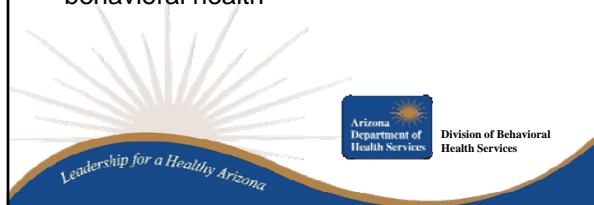
Using NOMs

- Benchmarking
- Regular provider feedback
- Targets
- Performance based contracting
- Publicize data
- Accountability
- Informed decision-making
- Greater involvement of consumers and families

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What can NOMs do for me?

- Allow you to inform, monitor and improve
- Promote practices that work
- Ensure the public continues to invest in behavioral health



What can NOMs do for the people I serve?

- Assure them their tax dollars are well invested
- Give them faith that recovery is possible
- Reassure people that substance use disorders are preventable



References

- <http://www.nationaloutcomemeasures.samhsa.gov>
- <http://www.azdhs.gov/bhs/sapt.htm> (SAPT currently open for public comment)