

Meadows Mental Health Policy Institute

Collaborative Care Implementation Costs Across 10 U.S. Health Care Systems

Executive Summary

Collaborative Care (CoCM) is an evidence-based treatment model for behavioral health integration. Typically implemented in general medical or pediatric settings, CoCM leverages the services of a specially trained behavioral health care manager to collaboratively manage a panel of patients with the medical team and a designated psychiatric consultant. CoCM has been shown to be effective in the early identification and treatment of mental health conditions. This integration of services addresses access barriers and the stigma often associated with seeking out mental health services. However, because questions have been raised about implementation costs associated with CoCM, we set out to analyze CoCM implementation cost data from 10 health systems nationwide that varied in size, geographical region, and urban/rural setting. The results of this study further confirm that CoCM is both efficient and cost-effective, with its value being driven by resource sharing and a drastically reduced need for psychiatric clinical time.

CoCM Implementation Costs Across 10 U.S. Health Care Systems				
Cost Parameter	Cost Lower Bound	Cost Upper Bound	Mean Cost	Median Cost
Small Systems (<1,000,000 Annual Outpatient Encounters) – N=3				
Leadership Costs	\$44,531	\$287,729	\$150,566	\$119,438
IT Costs	<i>Limited Data Available</i>			
Operations	\$14,269	\$54,713	\$34,963	\$35,909
Vendor Costs	\$0	\$25,365	\$8,889	\$1,302
Overall Costs Per Clinic	\$58,800	\$324,940	\$194,418	\$199,515
Medium Systems (1,000,000 – 5,000,000 Annual Outpatient Encounters) – N=3				
Leadership Costs	\$47,516	\$467,279	\$195,678	\$72,240
IT Costs	\$0	\$72,816	\$24,567	\$886
Operations	\$13,361	\$20,645	\$18,208	\$20,619
Vendor Costs	\$0	\$7,552	\$2,702	\$555
Overall Costs Per Clinic	\$69,047	\$488,191	\$241,156	\$166,229

CoCM Implementation Costs Across 10 U.S. Health Care Systems				
Large Systems (1,000,000 – 5,000,000 Annual Outpatient Encounters) – N=4				
Leadership Costs	\$22,152	\$450,810	\$150,562	\$64,644
IT Costs	\$550	\$100,000	\$36,206	\$22,138
Operations	\$0	\$83,927	\$31,190	\$20,417
Vendor Costs	\$0	\$20,193	\$9,588	\$9,080
Overall Costs Per Clinic	\$48,595	\$652,896	\$227,547	\$104,348
All Health Care Systems – N=10				
Leadership Costs	\$22,152	\$467,279	\$164,098	\$88,177
IT Costs	\$0	\$100,000	\$21,853	\$718
Operations	\$0	\$83,927	\$28,427	\$20,632
Vendor Costs	\$2,702	\$9,588	\$7,313	\$928
Overall Costs Per Clinic	\$48,595	\$652,896	\$221,691	\$161,512

Overall, the median cost per CoCM clinic implemented was \$160,000, with this figure ranging from \$49,000 to \$650,000. Smaller health systems had a higher median cost per clinic implemented (\$200,000), while larger systems had a smaller median cost (\$100,000). Of note, one large health system using a turnkey CoCM vendor experienced markedly reduced per-clinic implementation costs (\$49,000) relative to the median. Across all health systems, leadership personnel costs accounted for 70% of total CoCM costs, suggesting that efficient implementation with the involvement of fewer high-level leadership personnel for shorter periods of time may be favorable in reducing overall implementation spending. Finally, our findings demonstrated that direct CoCM operational costs accounted for less than 20% of implementation spending, highlighting the value inherent in CoCM that is driven by task sharing and the need for a relatively small amount of psychiatric consultant clinical time.