

2023 Quality of Behavioral Health Services in Washington State: Adult Enrollees Speak Out

The link between the quality of service and outcome is well established in health care. Better services lead to more positive results and higher levels of client satisfaction. Assessing the quality of behavioral health services is essential because it offers policymakers, providers, and other stakeholders the opportunity to improve outcomes and ensure that enrollees receive needed services to support their recovery. This brief report presents key findings from a 2023 survey of behavioral health (BH) adult enrollees receiving publicly funded mental health (MH) and substance use disorder (SUD) treatment services in Washington state. The survey applies measures from the Uniform Reporting System (URS) designed by the Substance Abuse and Mental Health Services Administration (SAMHSA) to assess dimensions of care.

THE 2023 BEHAVIORAL HEALTH ENROLLEE SURVEY

The Health Care Authority Division of Behavioral Health and Recovery (DBHR) contracts with the Social & Economic Sciences Research Center (SESRC) to conduct an annual statewide survey to assess enrollees' perception of the quality of publicly funded behavioral health treatment services they receive. DBHR uses the results to meet federal, state, and other reporting requirements.

The survey was conducted from June until November 2023. A random sample of adult Medicaid enrollees (age 18 and over) who received outpatient MH or SUD treatment services from May through October 2022 were invited to answer questions about their experience receiving behavioral health services in a mixed-mode survey with telephone, web, or mail-in option.

A 12.1% response rate was obtained from a starting sample of 10,756 randomly selected adult enrollees. With a total of 1,305 responding, the survey has a margin of error of $\pm 2.7\%$ at a 95% confidence interval. Eighty-two percent responded to the survey by telephone and 18% by web. The sample comprises 1048 (80.3%) MH and 257 (19.7%) SUD enrollees.

Fifty-eight percent of respondents were female, 38% were male, and 5% provided a different identification. Thirty-seven percent have a minority status. Across age groups, 5% were 18-20 years old, 54% were 21-40, 33% were 41-60, 8% were 61-75, and less than 1% of respondents were over 75 years old. Forty percent of adults were employed at the time of the survey with over half of them (55%) working 35 or more hours per week.

- A high proportion of both MH and SUD enrollees, 71% or higher, gave positive ratings to access to services, participation in treatment planning, appropriateness and quality of services, and general satisfaction with services.
- MH and SUD enrollees reported differing levels of positive ratings on perceived outcome of services. A lower percentage of MH enrollees gave positive ratings, 60%, compared to SUD enrollees, where 73% gave positive ratings.

In addition, the survey uses two metrics from the National Outcome Measures (NOMS) monitored by SAMHSA: social connectedness and improved functioning. A higher proportion of SUD than MH enrollees gave positive ratings for both social connectedness and improved functioning. The difference in ratings suggests that MH enrollees have more problems with their social well-being and functioning compared to SUD enrollees.

When asked how well their behavioral health needs are being met, 73% of MH enrollees and 79% of SUD enrollees said very well or well.

Conclusion: Almost all of the adult enrollees believed the services they received were right for them. Many agreed they could access needed care, felt enabled to set recovery goals, and were generally satisfied with services. However, compared to SUD enrollees, MH enrollees have poorer outcomes and did not do as well with respect to social connectedness and functioning.



Figure 1. Adult BH Enrollee Evaluation of Care

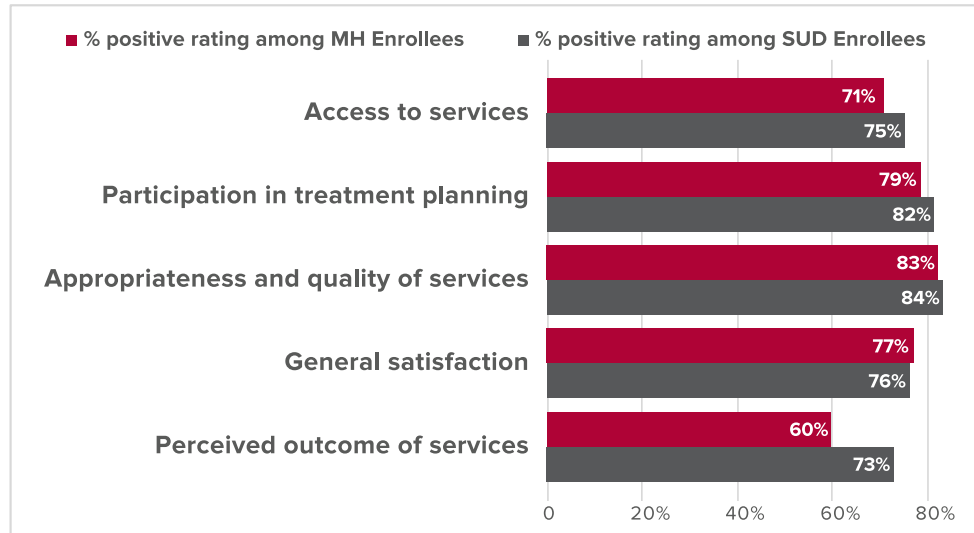


Figure 2. SAMHSA National Outcome Measures (NOMS)

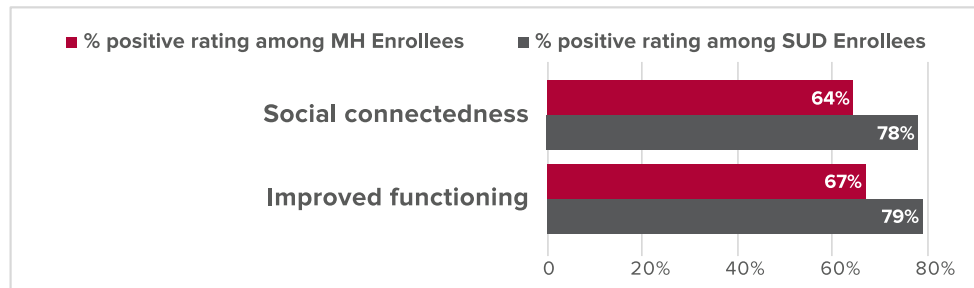
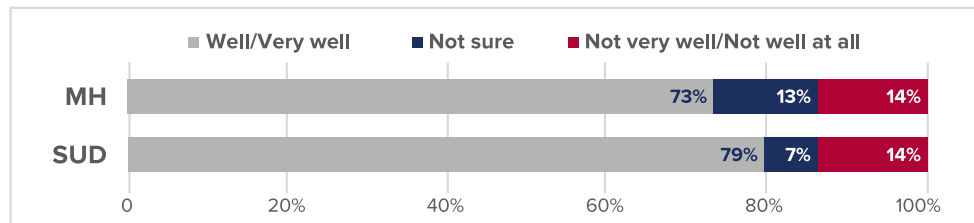


Figure 3. Overall, how well are your behavioral health needs being met?



“I was able to create my own care plan which often made it easy for the appointments to work around my schedule and they were nice.”

“That I can be honest and they directly apply to make my life better.”

“I like that everyone I spoke to was very direct and clear with their plans for treatment, and what they were asking from me.”

“I would say the willingness to adapt to my growth.”

“It helped me to express things, talking about things out loud can help get some clarity, it can get you to face it more strongly, having someone keep log can bring more clarity and scope on how you’ve been improving or haven’t been improving.”

“They helped me to learn to manage my anxiety and come up with ways to identify when I’m having an actual problem. They’ve also helped me learn when to draw boundaries with other people.”



ASSESSING BEHAVIORAL HEALTH SERVICES 2019-2023

Figure 4. MH Enrollees Reporting Positive Evaluation of Care

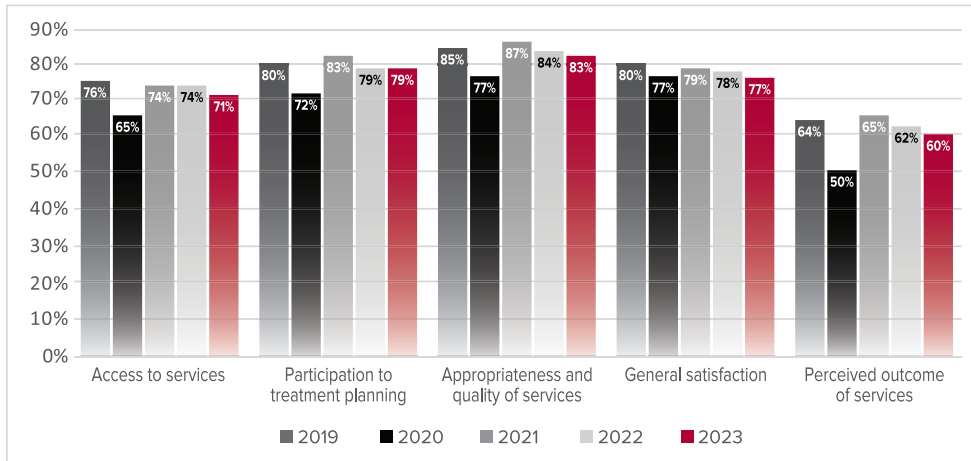


Figure 5. MH Enrollees Reporting Positive Ratings on SAMHSA NOMS

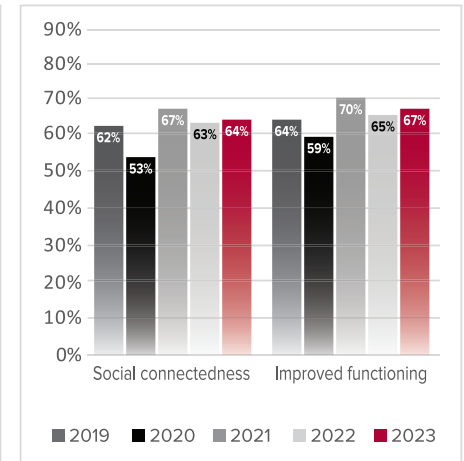


Figure 6. SUD Enrollees Reporting Positive Evaluation of Care

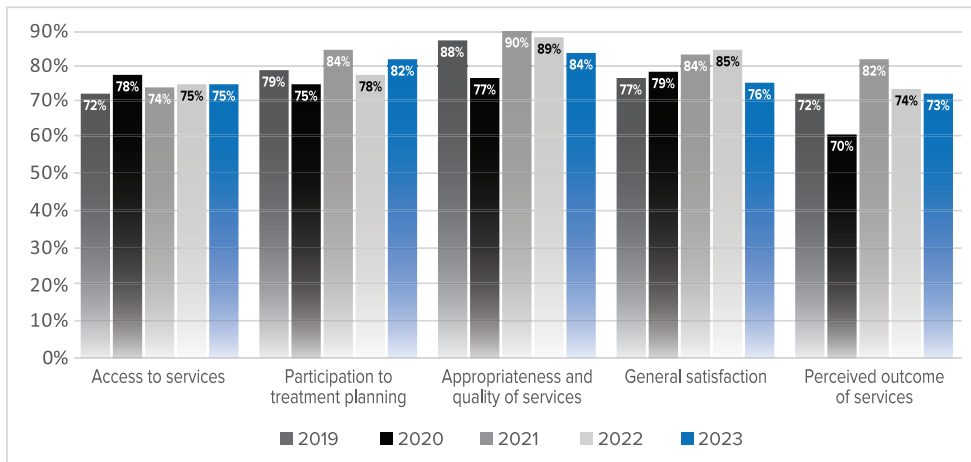
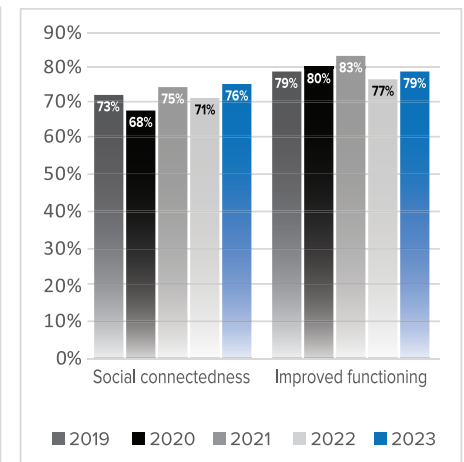


Figure 7. SUD Enrollees Reporting Positive Ratings on SAMHSA NOMS



Overall, a high percentage of both MH and SUD enrollees indicated their behavioral health needs are being met well or very well. The analysis of MH enrollees' responses from 2019 to 2023 shows a consistent trend across all five dimensions of care and two SAMHSA NOMS dimensions marked by a dip in positive ratings in the 2020 survey, coinciding with the onset of the COVID-19 pandemic. However, subsequent surveys in 2021 to 2023 indicate a return to pre-pandemic levels, suggesting a rebound in satisfaction. MH enrollees generally provided high positive ratings in the dimensions of participation in treatment planning, appropriateness and quality of services, and general satisfaction. There was a slightly lower percentage of positive ratings for access to services, but still a substantial number of MH enrollees gave positive ratings. A majority of MH enrollees gave positive ratings for perceived outcome of services and the two SAMHSA NOMS dimensions, namely social connectedness and improved functioning, consistent with the positive rating levels in the previous year and 2019.

The evaluation of SUD enrollees' feedback over time reveals a varied pattern in the percentages of positive ratings across all dimensions of care. Notably, for access to services, participation in treatment planning, and the two SAMHSA NOMS dimensions, positive ratings in 2023 either matched or exceeded those in 2021, 2022, and the pre-pandemic year 2019. This positive trend suggests improved satisfaction in these specific areas. In 2023, slightly fewer SUD enrollees gave positive ratings to three dimensions of care – appropriateness and quality of services, general satisfaction, and perceived outcome of services – when contrasted with the ratings observed in 2021, 2022, and in 2019, the year prior to the pandemic.

Conclusion: The overall trend in MH enrollees' feedback reveals resilience and recovery past the initial impact of the pandemic. MH enrollees' lower ratings for social connectedness and improved functioning relative to higher ratings by SUD enrollees suggest that more can be done in the future to improve these outcome measures for MH enrollees. SUD enrollees' responses show a mixed pattern where ratings for some measures of care have remained stable in 2022 and 2023, but have seen a drop and increase in other ratings in 2023. The decline in positive ratings for appropriateness and quality of care, and for general satisfaction among SUD enrollees may help providers identify specific areas of SUD care that need improvement.

