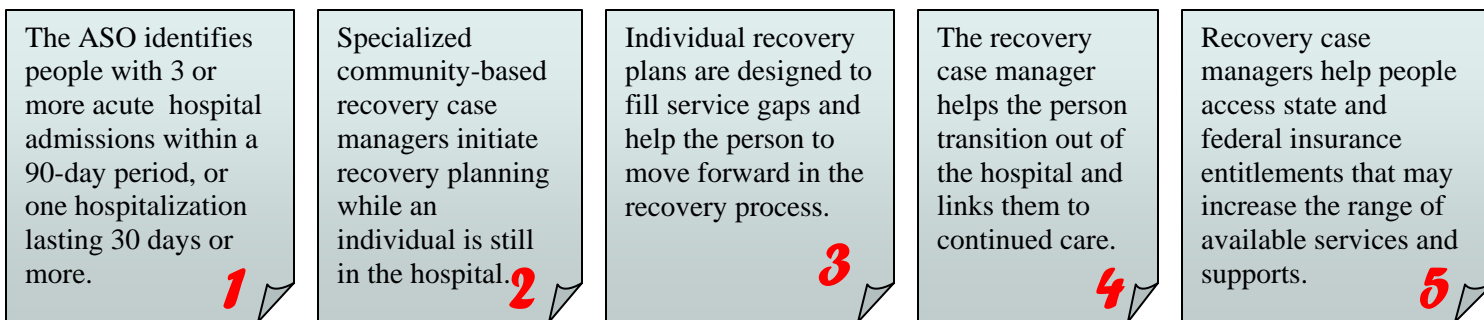


Individualized Recovery Services Improve Outcomes

If any of us had a family member admitted for inpatient mental health care three or more times in 90 days, we would probably ask what was being missed. This is not to say the inpatient care was poor or unnecessary...but repeatedly within 90 days? Its focus on a recovery-oriented service system has led DMHAS staff and our partners – Local Mental Health Authorities (LMHA), staff at community hospitals with acute care mental health units, the Administrative Services Organization (ASO) – to identify persons with this pattern of admissions and to offer them new service strategies that may result in improved care and quality of life in their community. This effort began in April of 2004 and was implemented for our General Assistance Behavioral Health Program.

HOW IT WORKS

General assistance recipients who have needed acute mental health levels of care (i.e. crisis intervention and emergency hospitalizations, etc.) more often than should be expected are identified and given *rapid access* to a community-based recovery case manager.



Benefits Associated with the Specialized Recovery Services:

- Better access to integrated mental health and substance use treatment for individuals with co-occurring psychiatric and substance use disorders.
- Help with applying for entitlements when a long-term disability has been identified.
- Additional recovery supports (food, clothing, transportation, etc.) obtained through the DMHAS Basic Needs Program.

189 of 366 people served (52%) had no additional mental health acute care episodes following enrollment in the initiative.

Of 175 who applied for *Medicaid Health Insurance, 125 were awarded coverage.

**People may work and still receive this benefit.*

Positive outcomes result in improved access to acute care services for other General Assistance recipients.

Acute Care Episodes 6 Mos. Before and 6 Mos. After Receiving Specialized Recovery Services

