

Brandeis-Maine Addiction Treatment Study

Incentives in Public Addiction Treatment: Testing Design and Enhancing Impact

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Maine Association of Substance Abuse Programs (MASAP)

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Project Overview Webinar – January 2014

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Knowledge Advancing Social Justice

Goals for today

- Introduction
- Describe the Brandeis-Maine Addiction Treatment Study
- Answer your questions

Overall project goals

- Determine how financial incentives to programs and to front-line staff and clinicians affect:
 - Program performance
 - Access, retention, units of service [SAMHS measures]
 - Unintended effects
 - Client mix, treatment intensity, other services provided/referred
 - Client outcomes
 - Substance use, arrests, readmissions to treatment
- Develop a nuanced understanding of how programs and clinicians respond to financial incentives

Overview of approach

1. Analysis of SAMHS data
2. Program director interviews
3. Clinician and front-line staff surveys
4. Clinician group incentive (CGI) experiment

Project period: Sept 2012 – Aug 2017



SAMHS and MASAP input invited throughout

1. Data analysis

- ✓ Work with SAMHS to:
 - Obtain TDS data for adult clients in OP/IOP programs
 - Obtain SAMHS performance and reward/penalty data for agencies with incentivized contracts (“IC”)

Use TDS and SAMHS data to:

- Examine change in access and retention
- Identify other effects of incentivized contract

2. Program director interviews

- Semi-structured, 1 hour, in-person or by phone
- Web-based pre-interview survey, 10-15 minute
 - 3 time points, \$50 honorarium for each
 - Directors of IC and non-IC programs this winter
 - Directors of IC programs before and after clinician incentive experiment
- Interview will address:
 - How program has adapted to incentives
 - Organizational and management characteristics
 - Use of innovative practices and quality improvement programs

3. Front-line staff / Clinician surveys

- Brief email/web-based survey
 - Confidential
 - 3 sets of surveys, \$10 honorarium per survey
 - All clinicians/front-line staff in IC and non-IC programs
 - All clinicians/front-line staff in IC programs before and after the clinician incentives experiment
- Survey will address:
 - Practice patterns
 - Response to incentives
 - Perception of program organizational characteristics (e.g., degree of team approach within the program)

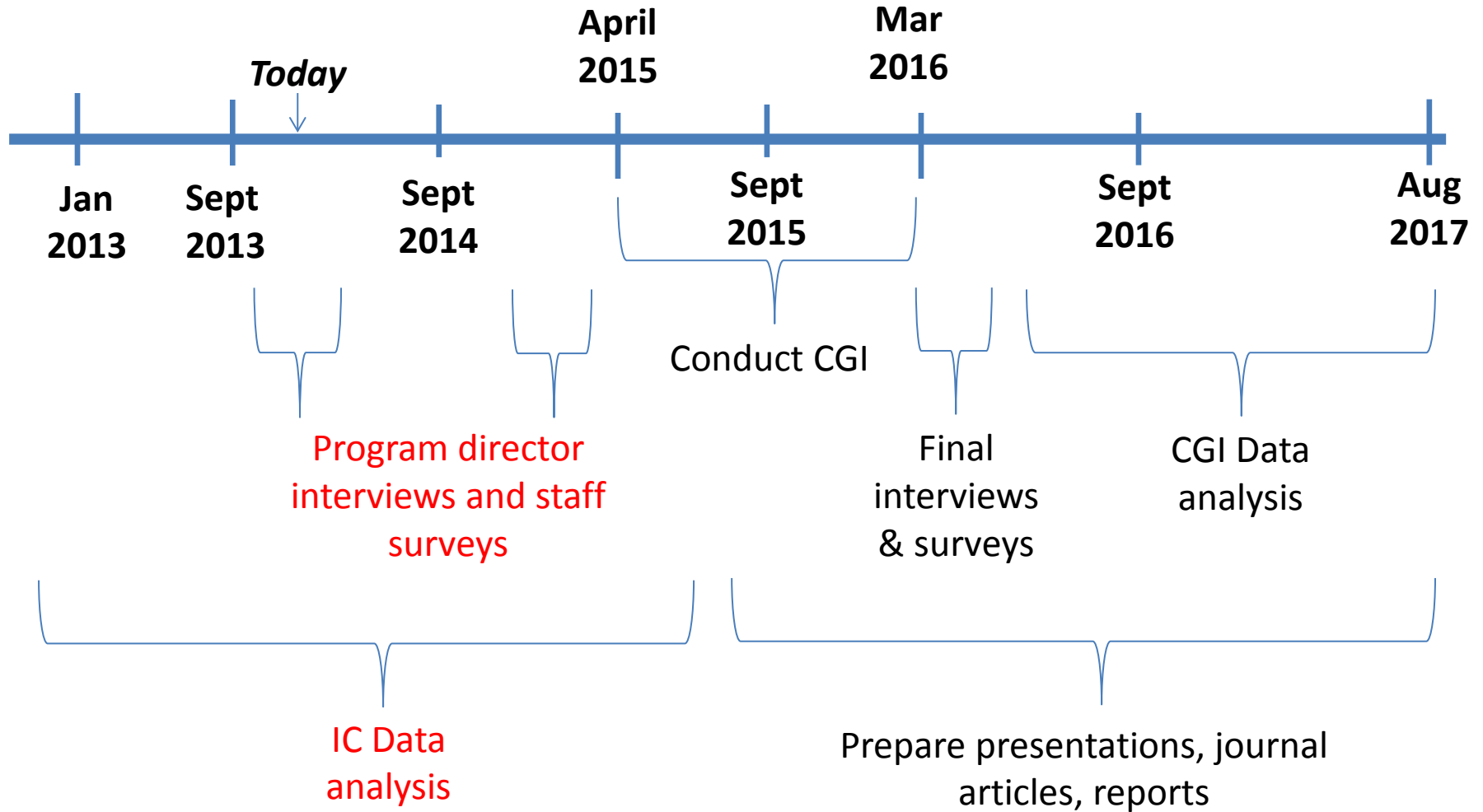
4. Clinician Group Incentive (CGI) experiment overview

- Test effect of incentives paid directly to clinicians and front-line staff
 - Randomized controlled trial
 - Randomized at the program level – all in a program eligible (or not) for incentives
- Overlaid on existing incentivized contract
- Reward for the same performance measures
 - Rewarded for agency performance, NOT individual performance
- 1 year experiment

4. Clinician Group Incentive (CGI) experiment – Approach

- Develop incentive and payment procedures
- Work with SAMHS and MASAP to maximize program and clinician/staff participation
- Invite all IC programs to participate
 - \$200 honorarium to program if agree to be randomized
- Randomize participating programs to receive clinician incentives or not
- Work with programs to identify eligible staff
- Introduce CGI to clinicians/staff in CGI programs
- Ensure confidentiality of clinician/staff participation

Project timeline



Project team

- **Institute for Behavioral Health, Heller School for Social Policy and Management, Brandeis University**

Sharon Reif, principal investigator *Maureen Stewart*, project director

Maria Torres, co-investigator *Margot Davis*, co-investigator

Connie Horgan, co-investigator *Tom McGuire*, co-investigator

Dominic Hodgkin, co-investigator *Grant Ritter*, statistician

Beth Mohr, programmer

- **Maine Office of Substance Abuse and Mental Health Services (SAMHS)**
- **Other Collaborators**
 - Maine Association of Substance Abuse Programs (MASAP)
 - Brandeis colleagues

Questions?



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also see our website: <http://sihp.brandeis.edu/ibh/maine-incentives/index.html>