
PAGE: SECTION II: DIVISIONS WITH MEDICAID SERVICES AND HEALTHY MONTANA KIDS
1. Option: Implement Treatment Protocols and Evidence Based Practices in Medicaid

DPHHS Program: Human and Community Services Division, Health Resources Division, Senior a term Care Division, Disability Services Division, and Addictive and Mental Disorders Division

Additional research will be required to fully define and estimate costs and savings for this option

General Fund: Not yet determined

State Special Revenue: Not yet determined

Federal Special Revenue: Not yet determined

For further information see [Reference Book](#) page 29

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|---|---------------------------|
| <p>1. MHA questions the need for treatment protocols for Medicaid. The Department already funds the Passport to Health program and requires prior authorization of some services. These programs are typically based upon existing treatment guidelines and protocols.</p> <p>Were the Department move to adopt treatment protocols, other utilization control projects should be eliminated. Further, Medicaid should be careful to adopt treatment protocols consistent with other payers in order to avoid conflicting treatment guidelines.</p> | Thu, Sep 9, 2010 4:15 PM |
| <p>2. This should continue. Investing in best practices and efficiencies is never a waste of money.</p> | Wed, Sep 8, 2010 5:16 PM |
| <p>3. It is unfortunate that poicy-makers are this unfamiliar with therapeutic treatment for persons suffering from mental illness. While long term psychotherapy may appear to be less cost efficient, it can likely prevent the hundreds of thousands of dollars spent on more intense levels of care (such as hospitalization) when more "economic" methods are used. As a result of HMO care, many persons no longer receive the benefits of proven effective treatments such as long term psychotherapy.</p> | Tue, Sep 7, 2010 1:30 PM |
| <p>4. Whereas this concept may have merit, it is typically very expensive and time consuming, particularly for the providers of Medicaid services who are already suffering under low rates and exorbitant paperwork. During difficult financial times, it is not appropriate to attempt an implementation of an expensive experiment.</p> | Tue, Sep 7, 2010 10:40 AM |
| <p>5. Makes it pretty hard to deal with it.</p> | Sat, Sep 4, 2010 11:49 AM |
| <p>6. I support this concept. I know that implementing a system such as LEAN Healthcare or the Toyota management system could drastically reduce the cost of billing and reimbursement and possibly add enough funding to support further improvements in the entire system.</p> | Fri, Sep 3, 2010 3:03 PM |

25 responses per p

answered question

skipped question

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| 7. | i am disabled & do not drive, i rely heavily on the outings i get to go to bank, stores & haircuts. i only get out twice a week & need social time as it is NOT mentally healthy to be a "shut-in", which could lead to more physical problems & more expense. | Fri, Sep 3, 2010 2:16 PM |
| <hr/> | | |
| 8. | I thought the governer was not going to cut social programs ? | Fri, Sep 3, 2010 11:02 AM |
| <hr/> | | |
| 9. | All the evidence suggests that Americans spend too much money on health care while getting poorer outcomes for that expense. The key seems to be that the number of procedures ordered is too high. I support evidence-based medicine protocols to rein in health care spending. | Thu, Sep 2, 2010 4:58 PM |
| <hr/> | | |
| 10. | There are very few actual evidence based practices. How does this save money? | Thu, Sep 2, 2010 4:07 PM |
| <hr/> | | |
| 11. | This is where we must be headed to decrease illness disability and chronicity as well as inappropriate or unresearched treatment options. | Thu, Sep 2, 2010 11:44 AM |
| <hr/> | | |
| 12. | Yes. Many consumers of mental health services and their families are calling for this kind of change. | Wed, Sep 1, 2010 9:14 PM |
| <hr/> | | |
| 13. | I do not support reducing funds for this. | Thu, Aug 26, 2010 10:50 AM |
| <hr/> | | |
| 14. | I think it is a good idea to develop some standards for treatment and to find ways to make sure that all the tests and treatments are best practices. Sure, some people have unique medical problmes that require additional research/treatment plans, but most people can be treated with basic protocols. | Wed, Aug 25, 2010 2:00 PM |
| <hr/> | | |
| 15. | I am all for eliminating waste and fraud in the medicaid insurance program and therefore support efforts to improve the system. However, if all we are talking about is hiring professionals to study the problems and implement best practices, let's get started, but not use the knee jerk approach to change which so often does not work. | Wed, Aug 25, 2010 1:23 PM |
| <hr/> | | |
| 16. | This is a definite must for the state and there are many states who have set examples of how to do so. | Sun, Aug 22, 2010 5:06 PM |
| <hr/> | | |
| 17. | I believe that spending on direct services is the priority currently when so many individuals are not recieving services. | |

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answered question

skipped question