The Question: Do patients value provider outcome and performance information in their mental health care decision-making?

Research shows that there is significant variability in mental health clinicians’ overall and domain-specific effectiveness with their patients. Despite a push to move towards total performance data transparency that informs patient treatment decision-making, mental health patients rarely have access to clinician performance data. As a result, many patients report difficulties with identifying a good-fitting clinician. Although mental health care (MHC) patients appear to value using clinician performance information for provider selection, there is little known about its value relative to other treatment-relevant information. Studies demonstrate that patient values and preferences are contextual and multidimensional. Armed with this knowledge, James Boswell, Ph.D. and his colleagues at the University at Albany, SUNY and University of Massachusetts Amherst surveyed diverse mental health care consumers’ to explore their attitudes and preferences regarding the use of provider outcome and performance information, and the relative values placed on providers’ performance track record compared to other potentially important provider/treatment factors. The full results of the study are available in the *Journal of Consulting and Clinical Psychology*.

The Implications: The findings suggest that patients value therapist performance data, in addition to other factors including: lower costs, a positive alliance, symptom relief, lower side effects, and convenient travel.

In general, patients preferred therapists with a track record of success. However, the pattern of patient valuing was complex as patients were open to trading off general efficacy for certain factors of higher importance to them, such as cost. For example, MHC consumers were willing to give up roughly 35% in expected efficacy to work with a less expensive clinician. MHC consumers were also willing to see an overall less effective therapist because they value a good relational experience. These working relationships may be particularly important in MHC compared to other health service domains, and therefore the establishment of these relationships should also be considered an indicator of effectiveness. The study also indicates that MHC consumers can be reliably separated into groups that place relatively more or less value on provider performance. As such, it may be particularly important to personalize referrals and case assignments for consumers who are skeptical of a given therapist’s ability to help them from the start. Patient values and preferences are multidimensional. Provider performance data should be considered in conjunction with other therapist and treatment factors. These values can make for improved matching of patients to therapists.

Contact Us
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