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DEVELOPING A CASEMIX CLASSIFICATION FOR SPECIALIST MENTAL HEALTH SERVICES

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ABSTRACT

The Mental Health Classification and Service Costs (MH-CASC) Project aimed to determine whether patient factors predicted mental health service costs, and whether these could be used to build a patient classification that in turn could be used as a basis for the funding of specialist mental health services. Participants included all patients who received at least one hour of face-to-face service at a sample of services representing 25% of Australia's specialist mental health sector. Patient attribute data and resource use data were collected on all inpatient and community episodes of care undergone by these patients between 1 September and 30 November 1996. A total of 16,611 setting-specific episodes contributed to the class-finding analysis. An underlying classification was found, comprising 42 patient classes (23 for inpatient episodes and 19 for community episodes) which accounted for 78% of the variance in total episode costs. The classification explains 63% of the variance in inpatient episode costs and 15% of the variance in community episode costs. The classification had clinical logic, in that patients who would be expected to cost more were in fact found to cost more. The MH-CASC classification has considerable potential as the first version of a casemix system for mental health services. Ongoing refinement will be necessary.

Keywords: Mental Health, Psychiatry, Casemix, Classification, Episode Costs

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