

Mobile Crisis Management

NC Results First Program Evaluation

Through the North Carolina Results First Initiative, the Department of Health and Human Services' Adult Mental Health Section (AMH) and the Office of State Budget and Management (OSBM) reviewed high-quality research evidence to determine the effectiveness of the Mobile Crisis Management program.

Research evidence shows that Mobile Crisis Management is effective at reducing psychiatric hospitalization and crime related to serious mental illness.

AMH and OSBM also used benefit-cost analysis tools to estimate the program's return on investment. Given uncertainties around the exact makeup of the population served by mobile crisis management, crime outcomes are modeled in two distinct ways. The first analysis provides an estimate of the expected per person return on investment for an individual whose likelihood of becoming involved in the criminal justice system mirrors that of the general population. Meanwhile, the second analysis provides a per person estimate of the return on investment for individuals whose likelihood of crime mirrors that of individuals who have had contact with the criminal justice system and are considered low risk.

This program generates higher benefits when delivered to criminal justice system-involved participants because impacts from reduced crime are more pronounced for a population with a higher likelihood of recidivism. In contrast, the benefits for the general population do not outweigh the cost of delivery. It is not possible to determine whether the state can expect an overall positive return on investment without a better understanding of the population being served.

Program Description

Mobile Crisis Management (MCM) is a crisis community outreach program that provides immediate telephonic response to assess crises and determine the risk, mental status, medical stability, and appropriate response for an individual. Once triaged, MCM can provide callers access to services, treatment, and supports for acute mental health, developmental disabilities, or substance use.

Monetized Benefits

Monetization of the program's impact on psychiatric hospitalization relies on statewide and national data on psychiatric hospitalization rates and average costs.

Benefits related to reduced crime reflect avoided criminal justice system and victimization costs associated with a conviction. The estimated program impact on crime is applied to the likelihood an individual will be convicted of a criminal offense.[1] This analysis reflects the crime outcomes of a general population as well as a criminal justiceinvolved population that is considered low risk.

Benefit-Cost Analysis

A marginal cost analysis was conducted to determine the per person cost of the average mobile crisis management interaction. OSBM worked with AMH staff to pull billing data for MCM to determine the average number of units reimbursed per person and the average rate billed per unit. On average, individuals utilize 15.3 units (3.8 hours) of MCM services at an average cost of \$65.06 per unit. This results in an average cost of \$998 per interaction with Mobile Crisis Management.

Accounting for variation in key estimates, there is a 16 percent chance that the benefits will outweigh the program delivery costs when the program is delivered to the general population, increasing to 86 percent when MCM is delivered to criminal justice systeminvolved participants.

Benefit-Cost Summary (2020 Dollars)	General Population	Criminal Justice System- Involved, Low Risk
Benefits per participant	+ \$ 645	+ \$ 4,477
Reduced Crime	\$43	\$ 3,875
Reduced Psychiatric Hospitalization	\$602	\$ 602
Costs per participant	\$ (998)	\$ (998)
Benefits less costs	= \$(352)	= \$ 3,480
Benefit to cost ratio	\$0.64 per	\$4.44 per dollar
	dollar invested	invested
Likelihood benefits will exceed costs	16%	86%

Of the \$645 in benefits per person for the general population, taxpayer gains from reduced psychiatric hospitalization and crime account for \$498. Reduced crime victimization accounts for \$148.

In comparison, when MCM is delivered to individuals who have been involved in the criminal justice system it reduces their likelihood of a future criminal conviction, generating higher benefits from avoided crime victimization and criminal justice system utilization costs. Benefits total \$4,478 per person served.

Table 2: Benefits by Perspective	General Population	Criminal Justice System-Involved, Low Risk
Taxpayer	\$491	\$1,027
Federal	\$354	\$354
State	\$135	\$394
Local	<i>\$3</i>	\$279
Participants	\$7	\$7
Other ^[2]	\$148	\$3,444
Total	\$645	\$4,478

Recommendations & Next Steps

Strengthen Outreach to Criminal Justice System Involved Individuals and Track Utilization Data

When Mobile Crisis Management is utilized by criminal justice system-involved individuals, defined as convicted individuals in community supervision who are considered low risk, benefits associated with reduced crime are much higher with overall benefits totaling \$4.44 for every dollar invested in the program. This analysis suggests that the program is extremely beneficial to this population and the AMH will strengthen coordination with Court Services and Community Supervision to ensure they are aware of Mobile Crisis Management and referring individuals they work with to the service when appropriate.

Track Service Population Characteristics and Program Outcomes

Additionally, to better estimate the average return on investment of the program and improve targeting, Adult Mental Health staff will work with LME-MCOs to track data on the population utilizing Mobile Crisis Management services. This should include source of referral and follow through tracking on outcomes of intervention – diversion from emergency department use, inpatient hospitalization, and criminal justice system involvement.

1. The likelihood that an individual will be convicted of a criminal offense is based on a Washington State baseline. Analysis assumes that the North Carolina baseline would be the same or similar.

2. Benefits may include reductions in crime victimization, the economic benefits from a more educated workforce, and the benefits from employer-paid health insurance.





