

5 Questions to Redefine Success in Behavioral Health

Traditional engagement metrics, such as calls answered, portal logins and referrals placed measure activity, not outcomes. **When health plans measure what truly matters, such as care established rather than outreach attempts, both clinical outcomes and total cost of care improve.**



Improved post-discharge follow-through has been associated with **~42% reductions in psychiatric readmissions in some Medicaid cohorts.**



Are you tracking the metrics that really matter for both member outcomes and financial performance? **Review this checklist to see if you're on track:**



Time-to-placement for members to reach appropriate levels of care



Care continuity including scheduled AND completed visits



Clinical improvement through standard assessments (e.g., PHQ-9, GAD-7)



Alignment of workflows to outcomes, not just activity volume



Visibility into high-risk events (e.g., ED discharges, crisis referrals) across settings and networks



We must move from process optimization to impact optimization: shifting from **“Did we document it?”** to **“Did it help?”**

Anything less risks sustaining motion without meaningful improvement.

To learn more about how to unify systems to better serve patients and increase real engagement, explore **Bamboo Bridge®** or **contact us.**