

## Guidelines on Caseload Size for Behavioral Health Care Managers and Psychiatric Consultants

In a collaborative care model, the size of the patient caseload that can be effectively managed by a full-time or nearly full-time care manager and their psychiatric consultant is a function of: 1) program scope and complexity and 2) the socioeconomic characteristics of the target population. The information below provides guidance in estimating appropriate caseload size based on the experience of existing programs and past studies. Examples from existing collaborative care programs and studies follow.

We recommend hiring full-time or nearly full-time care manager positions as much as is feasible, even if the position must cover two or more smaller clinics to justify the FTE. Behavioral health care managers who are assigned numerous other duties in a fast-paced clinic setting often tend to fall behind on managing their caseload effectively.

### Guidelines for Psychiatric Consultant FTE

For each full-time or nearly full-time care manager, we recommend planning for around 0.075 FTE (i.e., 3 hours/week) of psychiatric consultant time.

### Caseload Matrix for a Full Time (1.0 FTE) Care Manager

		Program Scope and Complexity →	
		Behavioral Health Collaborative Care	Multi-Condition Collaborative Care
Population	<p><i>Adequate income; Intact support networks</i></p>	<p><b>Caseload ~ 90-150</b></p> <p><i>target population - commercially insured older adults</i></p> <p><i>target condition(s) - behavioral (e.g., depression, anxiety, etc.)</i></p> <p><i>program complexity - low</i></p>	<p><b>Caseload ~ 80-100</b></p> <p><i>target population - commercially insured</i></p> <p><i>target condition(s) - behavioral and medical (e.g., depression, hypertension, heart disease, etc.)</i></p> <p><i>program complexity - medium to high</i></p>
	<p><i>Limited Social Supports; Low income; Homeless</i></p>	<p><b>Caseload ~ 60-80</b></p> <p><i>target population - Medicaid and uninsured</i></p> <p><i>target condition(s) - behavioral (e.g., depression, anxiety, etc.)</i></p> <p><i>program complexity - low</i></p>	<p><b>Caseload ~ 50-75</b></p> <p><i>target population - Medicaid and uninsured adults, other vulnerable populations</i></p> <p><i>target conditions - behavioral and medical (e.g., depression, hypertension, heart disease, etc.)</i></p> <p><i>program complexity - high</i></p>

## Typical Caseloads in Collaborative Care Studies and Existing Programs

### **DIAMOND** - Depression Improvement Across Minnesota, Offering a New Direction

9 health plans, 25 medical groups and more than 80 primary care clinics in Minnesota

<i>Target population:</i>	Mostly commercially insured adults
<i>Targeted conditions:</i>	Depression (PHQ-9 $\geq$ 10)
<i>Program complexity:</i>	Low
<i>Care managers:</i>	Typically social workers, psychologists, nurses, certified medical assistants

**Typical caseload for a full-time (or nearly full-time) care manager:** Between 90-120 patients

### **IMPACT** - Improving Mood: Providing Access to Collaborative Treatment

<i>Target population:</i>	Commercially insured older adults
<i>Targeted conditions:</i>	Depression
<i>Program complexity:</i>	Low-moderate
<i>Care managers:</i>	Nurses, psychologists

**Typical caseload for a full-time (or nearly full-time) care manager:** Around 100 to 120 or more were assigned in the IMPACT research study, depending on how the program was structured at individual clinic.

### **MHIP** - Mental Health Integration Program

150 FQHC and other safety net clinics in Washington State

<i>Target population:</i>	Medicaid and uninsured adults, other vulnerable populations
<i>Targeted conditions:</i>	Anxiety, PTSD, depression, serious mental illness, other mental health, substance use
<i>Program complexity:</i>	High
<i>Care managers:</i>	Mostly LCMSWs, some RNs

**Typical caseload for a full-time (or nearly full-time) care manager:** Around 50-75 patients; with care managers supported by community health workers or outreach staff able to support larger caseloads. Some full time care manager positions are split between two clinics.

### **TEAMcare** - also known as Group Health Multi-Condition Collaborative Care

Eight-clinic study in Puget Sound clinics

<i>Target population:</i>	Commercially insured adults who have depression as well as heart disease and/or hypertension.
<i>Targeted conditions:</i>	Depression, diabetes, coronary heart disease
<i>Program complexity:</i>	High
<i>Care managers:</i>	Registered nurses

**Typical caseload for a full-time (or nearly full-time) care manager:** Around 80-100 patients; the study used part time RNs (usually 0.6 FTE or greater) who were carrying caseloads across 2-3 clinics.

