SUBJECT
National Outcomes Measures (NOMS) SUD

CHAPTER 01
SECTION 06
SUBJECT 08

CHAPTER Administrative
SECTION Provider Network

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REVIEWED BY
AUTHORIZED BY Region 10 PIHP Board

I. APPLICATION:

☐ PIHP Board ☐ CMH Providers ☒ SUD Providers
☐ PIHP Staff ☐ CMH ☐ Subcontractors

II. POLICY STATEMENT:

It shall be the policy of Region 10 PIHP to ensure each individual receiving Substance Use Disorder (SUD) behavioral health services and supports will be evaluated using the National Outcome Measures (NOMS) tool.

III. DEFINITIONS:

A. Evidence-Based Practices (EBP): According to SAMHSA, EBP is a practice which, based on research findings and expert or consensus opinion about available evidence, is expected to produce a specific clinical outcome (measurable change in a person’s clinical status). Thus, clinical outcomes information, such as information provided by NOMS, provides essential indicators of clinical effectiveness to thereby identify an EBP.

B. National Outcomes Measures (NOMS): These service outcome measures gauge a person’s response to SUD Behavioral Health services, as they are taken strategically across key event-points of service (intake, periodic review annually, and program transfer/discharge). NOMS help identify the extent to which services received have been clinically effective. Life-areas in a person’s daily living in the community are identified and measured, as based on national outcome studies undertaken by the Substance Abuse and Mental Health Services Administration (SAMHSA) on National Outcome Measures. The PIHP identifies the following clinical services domains as the focus of NOMS within the PIHP: a) Reduced Morbidity (substance abstinence status), b) Reduced Morbidity (mental health status), c) Employment Status, d) Education Status, e) Legal Status (crime and criminal justice), f) Stability in Housing, g) Social Connectedness, h) Perception of Care.

IV. STANDARDS:

Clinical outcomes information shall be generated by use of the MIX system pertaining to National Outcomes Measures (NOMS). Such information becomes an integral part of the person’s clinical case record in addition to goals / objectives incorporating the unique needs, strengths, abilities, and preferences of the person served.
V. PROCEDURES:

SUD Provider

1. SUD Contract Providers complete NOMS at intake / service plan annual, periodic review and at transfer / discharge via MIX: View, SUD Section (SUD providers). Note: provider programs that utilize MIX within its fiscal or clerical operations, only, should develop their own internal processes to assist case holders in the timely submittal of NOMS data.

2. All providers ensure the following information is entered: Data, Use of (applicable) Evidence Based Practice, Interval, NOMS status as of the data entered by checking the appropriate option within each category.

VI. EXHIBITS: