



INSTITUTE FOR CLINICAL SYSTEMS IMPROVEMENT

## DIAMOND Fact Sheet

- DIAMOND stands for *Depression Improvement Across Minnesota, Offering a New Direction*
- DIAMOND helps primary care clinics to be more proactive and effective in caring for adult patients with depression, using these six tools:
  1. A standardized assessment questionnaire that helps the primary care provider detect and monitor the patient's symptoms of depression
  2. A tracking system to help the primary care provider monitor the patient's status
  3. A medical guide, backed by extensive clinical research, to help the primary care provider know how to best change or intensify treatment if needed
  4. A clinical care manager to educate the patient, and coordinate their care with a consulting psychiatrist and their primary care provider
  5. A psychiatrist to consult with the care team and provide additional assistance for patients with depression that is severe or not improving
  6. Tools to help the primary care provider prevent a patient who is getting better from falling back into major depression
- Research has proven that this approach – also called “collaborative care” – results in significantly improved outcomes, improved quality of life and greater productivity and long-term health care cost savings for patients with depression.
- ICSI brought medical groups, health plans, employers and patients together to overcome the barriers to establishing a collaborative care approach for patients with depression.
- Minnesota medical groups, along with representatives from six of Minnesota's commercial health plans and the Minnesota Department of Human Services (MDHS), designed DIAMOND's collaborative care model with support from Jürgen Unützer, MD, MPH, from the University of Washington in Seattle and Project IMPACT (*Improving Mood – Promoting Access to Collaborative Treatment*) <http://www.impact-uw.org>.

—more—

*DIAMOND Fact Sheet/page 2*

- Forty-five clinics in Minnesota currently offer DIAMOND, and an additional 40 clinics will be offering the program by March 2010.
- To date, more than 2,400 patients have entered the DIAMOND program. Of the patients contacted six months after being activated in DIAMOND, 43% are in remission, and an additional 17% have seen at least a 50% reduction in the severity of their depression. These results are 5-10 time better than for patients with depression treated under “usual” primary care.
- DIAMOND is unique because it changes the way depression care is delivered and paid for in Minnesota. The roles of care manager and consulting psychiatrist were not reimbursable – and therefore the care model was not sustainable – under established payment systems.
- Health plans, MDHS, providers, employers and patients helped develop the new payment system model to support DIAMOND in Minnesota.
- In the new reimbursement model, health plans make a monthly payment to participating medical groups for a bundle of services offered under DIAMOND. Each medical group and health plan has negotiated a care management fee, which may increase or decrease after 12 months depending on the medical group’s results with patients.
- HealthPartners Research Foundation, with a grant from the National Institute of Mental Health, is conducting research about the effectiveness of the DIAMOND care model and reimbursement system. The study will look at patient outcomes, as well as changes in patients’ work productivity and utilization of health care services.

**For more information, go to [www.icsi.org](http://www.icsi.org).**