

# Screening Program PA01

## Program Description

### I - Program Name

The Global Appraisal of Individual Needs-Short Screener (GAIN-SS) Screening Program

### II - Identification of Eligible Member Population

Pennsylvania adults and adolescents who would benefit from an emphasis in preventative care, especially those that have high a prevalence of complex and co-morbid illnesses such as the Commonwealth of Pennsylvania's Medicaid population.

### III - Conditions Where Screening is Recommended and/or Required

The GAIN-SS helps identify those who would benefit from further assessment or referral for psychiatric disorders, substance use disorders, or crime and violence problems, any member suspected of possibly having a depressive disorder, and/or individuals with a mental illness who could also potentially have a substance use disorder.

### IV - Screening Tool

The GAIN-SS was developed by Chestnut Health Systems in response to demands from professionals from a number of different treatment systems to make the process of behavioral health assessment and referral more efficient. This screening assessment was found to have sensitivity and specificity rates in the 90 percent or more range, making it an accurate and precise tool to detect mental illness or its absence.

### V - Planned Screening and Frequency

It is recommended that these tools be utilized for every potential candidate on initial evaluation and at least on a quarterly basis.

### VI - Promoting the Program to Members, Providers, and Practitioners and Obtaining Input into Development and Implementation

Provider and practitioner feedback regarding this screening program will be obtained by presenting the program design in committee meetings. Program information will also be incorporated into the welcome letters for new practitioners and providers. The screening tool along with a description and instructions for use will be made available on the Magellan of Pennsylvania website.

### VII - Scientific Evidence and Best Practices References

According to the National Alliance on Mental Illness approximately 61.5 million Americans, or 1 in 4 adults, experiences mental illness in a given year. About 13.6 million Americans, or 1 in 17 adults, live with a serious mental illness such as schizophrenia, major depression or bipolar disorder. Serious mental illness costs America \$193.2 billion in lost earnings per year.

The Substance Abuse and Mental Health Services Administration reports that approximately 8.9 million adults have co-occurring disorders; that is they have both a mental and substance use disorder. But only 7.4 percent of individuals receive treatment for both conditions with 55.8

percent receiving no treatment at all. It is well known that a large number of those with mental illness and substance use disorders do not seek treatment and will “suffer in silence.” The need for screening for these disorders is vital for the identification, diagnosis and treatment of these conditions. Since these individuals may often be identified in other systems such as correctional facilities, emergency rooms, schools or social services, a short and precise assessment tool is necessary that can be used with minimal training.

- National Institutes of Health, National Institute of Mental Health. (n.d.). *Statistics: Any Disorder Among Adults*. Retrieved March 5, 2013, from [http://www.nimh.nih.gov/statistics/1ANYDIS\\_ADULT.shtml](http://www.nimh.nih.gov/statistics/1ANYDIS_ADULT.shtml)
- National Institutes of Health, National Institute of Mental Health. (n.d.). *The Numbers Count: Mental Disorders in America*. Retrieved March 5, 2013, from <http://www.nimh.nih.gov/health/publications/the-numbers-count-mental-disorders-in-america/index.shtml>
- Substance Abuse and Mental Health Services Administration. (2012). *Results from the 2010 National Survey on Drug Use and Health: Mental Health Findings* NSDUH Series H-42, HHS Publication No. (SMA) 11-4667). Rockville, Md.: Substance Abuse and Mental Health Services Administration, 2012.
- Insel, T.R. (2008). Assessing the Economic Costs of Serious Mental Illness. *The American Journal of Psychiatry*. 165(6), 663-665.
- Parks, J., et al. (2006). *Morbidity and Mortality in People with Serious Mental Illness*. Alexandria, VA: National Association of State Mental Health Program Directors (NASMHPD) Medical Directors Council.
- American Association of Suicidology. (2012). *Suicide in the USA Based on 2010 Data*. Washington, DC: American Association of Suicidology
- Dennis, M.L., Chan, Y.-F., & Funk, R.R. (2006). Development and validation of the GAIN Short Screener (GAINSS) for psychopathology and crime/violence among adolescents and adults. *The American Journal on Addictions*, 15(supplement 1), 80-91  
[www.chestnut.org/LI/gain/GAIN\\_SS/Dennis\\_et\\_al\\_2006\\_Development\\_and\\_validation\\_of\\_the\\_GAIN\\_Short\\_Screener.pdf](http://www.chestnut.org/LI/gain/GAIN_SS/Dennis_et_al_2006_Development_and_validation_of_the_GAIN_Short_Screener.pdf)

### **VIII - Program Review Frequency**

The tools will be evaluated and revised at least every two years or when there are scientific and clinical updates made to them.