

The WSIPP benefit-cost analysis examines, on an apples-to-apples basis, the monetary value of programs or policies to determine whether the benefits from the program exceed its costs. WSIPP's research approach to identifying evidence-based programs and policies has three main steps. First, we determine "what works" (and what does not work) to improve outcomes using a statistical technique called meta-analysis. Second, we calculate whether the benefits of a program exceed its costs. Third, we estimate the risk of investing in a program by testing the sensitivity of our results. For more detail on our methods, see our [Technical Documentation](#).

Current estimates replace old estimates. Numbers will change over time as a result of model inputs and monetization methods.

## Adult Mental Health

Program name	Date of last literature review	Total benefits	Taxpayer benefits	Non-taxpayer benefits	Costs	Benefits minus costs (net present value)	Benefit to cost ratio	Chance benefits will exceed costs
<b>Anxiety</b>								
Cognitive behavioral therapy (CBT) for adult anxiety	Sep. 2016	\$33,702	\$10,279	\$23,423	(\$603)	\$33,099	\$55.85	100 %
Acceptance and Commitment Therapy for adult anxiety	Sep. 2016	\$23,231	\$7,092	\$16,139	(\$455)	\$22,776	\$51.01	84 %
Collaborative primary care for anxiety (general adult population)	Dec. 2016	\$13,424	\$4,192	\$9,232	(\$879)	\$12,545	\$15.28	90 %
<b>Depression</b>								
Cognitive behavioral therapy (CBT) for adult depression	Sep. 2016	\$26,459	\$8,116	\$18,343	(\$530)	\$25,928	\$49.89	100 %
Collaborative primary care for depression (general adult population)	Dec. 2016	\$11,200	\$3,541	\$7,659	(\$879)	\$10,322	\$12.75	98 %
Collaborative primary care for depression with comorbid medical conditions (general adult population)	Dec. 2016	\$7,427	\$2,448	\$4,978	(\$988)	\$6,439	\$7.52	100 %
Collaborative primary care for depression with comorbid medical conditions (older adult population)	Dec. 2016	\$2,291	\$858	\$1,432	(\$607)	\$1,684	\$3.78	83 %
Collaborative primary care for depression (older adult population)	Dec. 2016	\$1,485	\$593	\$893	(\$608)	\$877	\$2.44	81 %
<b>Trauma</b>								
Cognitive behavioral therapy (CBT) for adult posttraumatic stress disorder (PTSD)	Sep. 2016	\$52,684	\$16,561	\$36,123	(\$592)	\$52,092	\$88.95	100 %
Eye Movement Desensitization and Reprocessing (EMDR) for adult posttraumatic stress disorder (PTSD)	Sep. 2016	\$43,917	\$13,747	\$30,170	(\$72)	\$43,845	\$612.03	100 %
Posttraumatic stress disorder (PTSD) prevention following trauma	May. 2014	\$5,747	\$1,935	\$3,812	(\$898)	\$4,849	\$6.40	99 %
<b>Serious Mental Illness</b>								
Cognitive behavioral therapy (CBT) for schizophrenia/psychosis	Dec. 2014	\$15,117	\$8,766	\$6,352	(\$1,532)	\$13,586	\$9.87	61 %
Individual Placement and Support (IPS) for individuals with serious mental illness	May. 2014	\$6,589	\$2,098	\$4,491	(\$849)	\$5,741	\$7.77	80 %
Peer support: Addition of a peer specialist to the treatment team	May. 2014	\$6,219	\$2,480	\$3,739	(\$3,698)	\$2,521	\$1.68	77 %
Primary care in integrated settings (Veteran's Administration, Kaiser Permanente)	May. 2014	\$1,171	\$480	\$691	(\$243)	\$928	\$4.82	52 %
Acceptance and Commitment Therapy for schizophrenia/psychosis	Sep. 2016	\$1,289	\$953	\$336	(\$737)	\$552	\$1.75	48 %
Mobile crisis response	May. 2014	\$1,457	\$1,270	\$187	(\$1,256)	\$201	\$1.16	48 %
Primary care in behavioral health settings	May. 2014	\$349	\$172	\$177	(\$232)	\$117	\$1.50	50 %
Primary care in behavioral health settings (community-based settings)	May. 2014	(\$208)	(\$9)	(\$198)	(\$288)	(\$496)	(\$0.72)	27 %
Illness Management and Recovery (IMR)	Sep. 2016	(\$287)	\$326	(\$613)	(\$1,708)	(\$1,995)	(\$0.17)	40 %
Peer support: Substitution of a peer specialist for a non-peer on the treatment team	May. 2014	(\$3,503)	(\$1,062)	(\$2,441)	\$0	(\$3,503)	n/a	28 %

Program name	Date of last literature review	Total benefits	Taxpayer benefits	Non-taxpayer benefits	Costs	Benefits minus costs (net present value)	Benefit to cost ratio	Chance benefits will exceed costs
Critical Time Intervention for serious mental illness	Sep. 2016	\$1,701	\$2,746	(\$1,045)	(\$6,149)	(\$4,448)	\$0.28	34 %
Forensic Assertive Community Treatment (FACT)	May. 2014	(\$5,520)	\$587	(\$6,108)	(\$13,582)	(\$19,103)	(\$0.41)	0 %
Supported housing for chronically homeless adults	Dec. 2014	(\$3,002)	\$1,620	(\$4,623)	(\$16,257)	(\$19,260)	(\$0.18)	0 %
Assertive community treatment (ACT)	May. 2014	(\$8,010)	\$1,016	(\$9,025)	(\$19,174)	(\$27,184)	(\$0.42)	13 %

### Other Adult Mental Health topics reviewed:

Program name	Date of last literature review	Notes
Integrated Dual Disorder Treatment (IDDT)	Sep. 2018	<a href="#">Click for meta-analytic results</a>
Assisted outpatient treatment	Nov. 2015	<a href="#">Click for meta-analytic results</a>
Cognitive behavioral therapy (CBT) for prodromal psychosis	Sep. 2016	<a href="#">Click for meta-analytic results</a>
Collaborative primary care for dementia (older adult population)	Feb. 2018	<a href="#">Click for meta-analytic results</a>
Individual Placement and Support for first episode psychosis	Aug. 2017	<a href="#">Click for meta-analytic results</a>
Integrated treatment for first-episode psychosis	Sep. 2016	<a href="#">Click for meta-analytic results</a>
Integrated treatment for prodromal psychosis	Sep. 2016	<a href="#">Click for meta-analytic results</a>
Medicaid Health Homes	Dec. 2014	<a href="#">Click for meta-analytic results</a>
Motivational interviewing to enhance treatment engagement for serious mental illness	Sep. 2016	<a href="#">Click for meta-analytic results</a>
Telemedicine for depression in primary care	Dec. 2016	<a href="#">Click for meta-analytic results</a>
Telemedicine for posttraumatic stress disorder (PTSD) in primary care	Dec. 2016	<a href="#">Click for meta-analytic results</a>
Wellness Recovery Action Plan (WRAP)	Dec. 2014	<a href="#">Click for meta-analytic results</a>
Applied Suicide Intervention Skills Training (ASIST)	Nov. 2020	No rigorous evaluation measuring outcome of interest.
Collaborative primary care for posttraumatic stress disorder (PTSD)	Dec. 2016	No rigorous evaluation measuring outcome of interest.
Crisis Intervention Team	May. 2014	No rigorous evaluation measuring outcome of interest.
Forensic Integrative Re-entry Support and Treatment (FIRST)	May. 2014	No rigorous evaluation measuring outcome of interest.
Forensic Intensive Supportive Housing (FISH)	May. 2014	No rigorous evaluation measuring outcome of interest.
Integrated cognitive therapies program for co-occurring mental illness and substance abuse	May. 2014	No rigorous evaluation measuring outcome of interest.
LEARN Saves Lives Suicide Prevention Training for Parents/Caregivers	Nov. 2020	No rigorous evaluation measuring outcome of interest.
Peer Bridger	May. 2014	No rigorous evaluation measuring outcome of interest.
Trauma Informed Care: Risking Connection	May. 2014	No rigorous evaluation measuring outcome of interest.

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