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

<table>
<thead>
<tr>
<th>Program name</th>
<th>Date of last literature review</th>
<th>Total benefits</th>
<th>Taxpayer benefits</th>
<th>Non-taxpayer benefits</th>
<th>Costs</th>
<th>Benefits minus costs (net present value)</th>
<th>Benefit to cost ratio</th>
<th>Chance benefits will exceed costs</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Anxiety</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cognitive behavioral therapy (CBT) for adult anxiety</td>
<td>Sep. 2016</td>
<td>$33,227</td>
<td>$10,134</td>
<td>$23,093</td>
<td>($595)</td>
<td>$32,632</td>
<td>$55.83</td>
<td>100 %</td>
</tr>
<tr>
<td>Acceptance and Commitment Therapy for adult anxiety</td>
<td>Sep. 2016</td>
<td>$22,904</td>
<td>$6,992</td>
<td>$15,912</td>
<td>($449)</td>
<td>$22,455</td>
<td>$51.00</td>
<td>84 %</td>
</tr>
<tr>
<td>Collaborative primary care for anxiety (general adult population)</td>
<td>Dec. 2016</td>
<td>$13,235</td>
<td>$4,133</td>
<td>$9,102</td>
<td>($866)</td>
<td>$12,368</td>
<td>$15.27</td>
<td>90 %</td>
</tr>
<tr>
<td><strong>Depression</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cognitive behavioral therapy (CBT) for adult depression</td>
<td>Sep. 2016</td>
<td>$26,072</td>
<td>$7,996</td>
<td>$18,076</td>
<td>($523)</td>
<td>$25,549</td>
<td>$49.85</td>
<td>100 %</td>
</tr>
<tr>
<td>Collaborative primary care for depression (general adult population)</td>
<td>Dec. 2016</td>
<td>$11,035</td>
<td>$3,489</td>
<td>$7,547</td>
<td>($867)</td>
<td>$10,169</td>
<td>$12.74</td>
<td>98 %</td>
</tr>
<tr>
<td>Collaborative primary care for depression with comorbid medical conditions (general adult population)</td>
<td>Dec. 2016</td>
<td>$7,313</td>
<td>$2,411</td>
<td>$4,903</td>
<td>($975)</td>
<td>$6,339</td>
<td>$5.10</td>
<td>100 %</td>
</tr>
<tr>
<td>Collaborative primary care for depression with comorbid medical conditions (older adult population)</td>
<td>Dec. 2016</td>
<td>$2,249</td>
<td>$843</td>
<td>$1,406</td>
<td>($598)</td>
<td>$1,651</td>
<td>$3.76</td>
<td>84 %</td>
</tr>
<tr>
<td>Collaborative primary care for depression (older adult population)</td>
<td>Dec. 2016</td>
<td>$1,458</td>
<td>$582</td>
<td>$876</td>
<td>($600)</td>
<td>$858</td>
<td>$2.43</td>
<td>80 %</td>
</tr>
<tr>
<td><strong>Trauma</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cognitive behavioral therapy (CBT) for adult posttraumatic stress disorder (PTSD)</td>
<td>Sep. 2016</td>
<td>$51,900</td>
<td>$16,312</td>
<td>$35,588</td>
<td>($584)</td>
<td>$51,316</td>
<td>$88.86</td>
<td>100 %</td>
</tr>
<tr>
<td>Eye Movement Desensitization and Reprocessing (EMDR) for adult posttraumatic stress disorder (PTSD)</td>
<td>Sep. 2016</td>
<td>$43,263</td>
<td>$13,541</td>
<td>$29,723</td>
<td>($71)</td>
<td>$43,193</td>
<td>$611.37</td>
<td>100 %</td>
</tr>
<tr>
<td>Posttraumatic stress disorder (PTSD) prevention following trauma</td>
<td>May. 2014</td>
<td>$5,661</td>
<td>$1,906</td>
<td>$3,755</td>
<td>($886)</td>
<td>$4,775</td>
<td>$6.39</td>
<td>98 %</td>
</tr>
<tr>
<td><strong>Serious Mental Illness</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cognitive behavioral therapy (CBT) for schizophrenia/psychosis</td>
<td>Dec. 2014</td>
<td>$14,848</td>
<td>$8,610</td>
<td>$6,238</td>
<td>($1,511)</td>
<td>$13,337</td>
<td>$9.83</td>
<td>61 %</td>
</tr>
<tr>
<td>Individual Placement and Support (IPS) for individuals with serious mental illness</td>
<td>May. 2014</td>
<td>$6,498</td>
<td>$2,069</td>
<td>$4,429</td>
<td>($837)</td>
<td>$5,662</td>
<td>$7.77</td>
<td>80 %</td>
</tr>
<tr>
<td>Peer support: Addition of a peer specialist to the treatment team</td>
<td>May. 2014</td>
<td>$6,132</td>
<td>$2,445</td>
<td>$3,687</td>
<td>($3,647)</td>
<td>$2,485</td>
<td>$1.68</td>
<td>79 %</td>
</tr>
<tr>
<td>Primary care in integrated settings (Veteran’s Administration, Kaiser Permanente)</td>
<td>May. 2014</td>
<td>$1,151</td>
<td>$471</td>
<td>$680</td>
<td>($239)</td>
<td>$912</td>
<td>$4.81</td>
<td>51 %</td>
</tr>
<tr>
<td>Acceptance and Commitment Therapy for schizophrenia/psychosis</td>
<td>Sep. 2016</td>
<td>$1,264</td>
<td>$936</td>
<td>$328</td>
<td>($727)</td>
<td>$537</td>
<td>$1.74</td>
<td>47 %</td>
</tr>
<tr>
<td>Mobile crisis response</td>
<td>May. 2014</td>
<td>$1,431</td>
<td>$1,249</td>
<td>$182</td>
<td>($1,239)</td>
<td>$192</td>
<td>$1.16</td>
<td>48 %</td>
</tr>
<tr>
<td>Primary care in behavioral health settings</td>
<td>May. 2014</td>
<td>$342</td>
<td>$168</td>
<td>$174</td>
<td>($229)</td>
<td>$114</td>
<td>$1.50</td>
<td>50 %</td>
</tr>
<tr>
<td>Primary care in behavioral health settings (community-based settings)</td>
<td>May. 2014</td>
<td>($205)</td>
<td>($9)</td>
<td>($196)</td>
<td>($284)</td>
<td>($489)</td>
<td>($0.72)</td>
<td>27 %</td>
</tr>
<tr>
<td>Illness Management and Recovery (IMR)</td>
<td>Sep. 2016</td>
<td>($285)</td>
<td>$320</td>
<td>($606)</td>
<td>($1,685)</td>
<td>($1,970)</td>
<td>($0.17)</td>
<td>41 %</td>
</tr>
<tr>
<td>Peer support: Substitution of a peer specialist for a non-peer on the treatment team</td>
<td>May. 2014</td>
<td>($3,456)</td>
<td>($1,048)</td>
<td>($2,408)</td>
<td>$0</td>
<td>($3,456)</td>
<td>n/a</td>
<td>29 %</td>
</tr>
<tr>
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<td>Date of last literature review</td>
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<td>--------------------------------------------------------</td>
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<td>----------------------------------</td>
</tr>
<tr>
<td>Critical Time Intervention for serious mental illness</td>
<td>Sep. 2016</td>
<td>$1,657</td>
<td>$2,697</td>
<td>$(1,039)</td>
<td>$(6,064)</td>
<td>$(4,407)</td>
<td>$0.27</td>
<td>34 %</td>
</tr>
<tr>
<td>Forensic Assertive Community Treatment (FACT)</td>
<td>May. 2014</td>
<td>$(5,447)</td>
<td>$577</td>
<td>$(6,025)</td>
<td>$(13,395)</td>
<td>$(18,842)</td>
<td>$(0.41)</td>
<td>0 %</td>
</tr>
<tr>
<td>Supported housing for chronically homeless adults</td>
<td>Dec. 2014</td>
<td>$(2,964)</td>
<td>$1,597</td>
<td>$(4,560)</td>
<td>$(16,033)</td>
<td>$(18,996)</td>
<td>$(0.18)</td>
<td>0 %</td>
</tr>
<tr>
<td>Assertive community treatment (ACT)</td>
<td>May. 2014</td>
<td>$(7,908)</td>
<td>$997</td>
<td>$(8,905)</td>
<td>$(18,909)</td>
<td>$(26,817)</td>
<td>$(0.42)</td>
<td>12 %</td>
</tr>
</tbody>
</table>

**Other Adult Mental Health topics reviewed:**

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