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## Comparison of Mental Health Treatment Expenditures in Usual Psychiatric Care Between Madrid and Boston Hospital Systems

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**Introduction:** Public hospital systems have struggled to identify ways of cutting costs while improving quality of mental health treatment, even more since the economic downturn.

**Objective:** To compare mental health care expenditures and quality in two large sites, Boston and Madrid, and to analyze the amount of the expenditure corresponding to pharmacy, ER, outpatient and inpatient care.

**Methods:** Data are mental health electronic records from three hospitals in Madrid (n=31,183 person-years) and in Boston(n=8,805). Adequacy of care was measured as four or more visits within the last year. Unadjusted comparisons of variables were conducted using t-tests. Multivariate generalized linear regression models were computed with log link and residual variance proportional to mean squared, adjusting for covariates. Results were also adjusted for World Bank Purchasing Power Parity and converted to U.S. dollars.

**Results:** The annual average treatment expenditure is \$4,874 in Boston and \$2,693 in Madrid . Boston patients had a bigger percentage of use (13,6% vs 5,3%) and greater annual expenditure (\$25,175 vs \$15,470) for inpatient services (p<0,05). Conversely, Madrid patients used and spent more on outpatient treatments (87% vs 84%;\$1,670 vs \$1,378;p<0,05).Being in the Boston site, having a bipolar, psychotic or alcohol disorder was a significant positive predictor of total expenditure. Adequacy of care was bigger in Boston (32,8% vs 23,1%)

**Conclusions:** Emphasis on outpatient care appears to reduce inpatient stays and global expenditures. An earlier recognition due to a more open access to treatments in Spain may help decreasing costs. Bipolar, psychotic and alcohol disorders imply bigger costs.