

Coalition For Outcomes-Based Benefits (COBB)

BASIC TENETS

1. Assessment and care management functions are independent and free of financial and therapeutic **conflicts of interest** between the source(s) of the funds and the provider of services.
2. The accountability system incorporates a **real-time system** for collecting and evaluating clinical and financial outcomes.
3. The clinical assessment system recognizes and incorporates the unique needs of **special populations**.
4. The service delivery system incorporates elements of **personal responsibility** regarding the individual clients' clinical and financial commitments, as they are ready and able to make them.
5. The COBB model utilizes a “**feedback loop**” that continuously incorporates clinical and financial data to refine and improve the delivery of services.
6. COBB works with **providers** to improve the viability of their products.
7. COBB works with **payors** to improve access to existing funding streams and create new financing scenarios.
8. COBB works with all relevant parties in the arena to create **uniform criteria and standards** for the collection of treatment outcome and cost offset data, as well as vehicles for the collection and dissemination of such data.