



Behavioral Health Reform: Into the Future

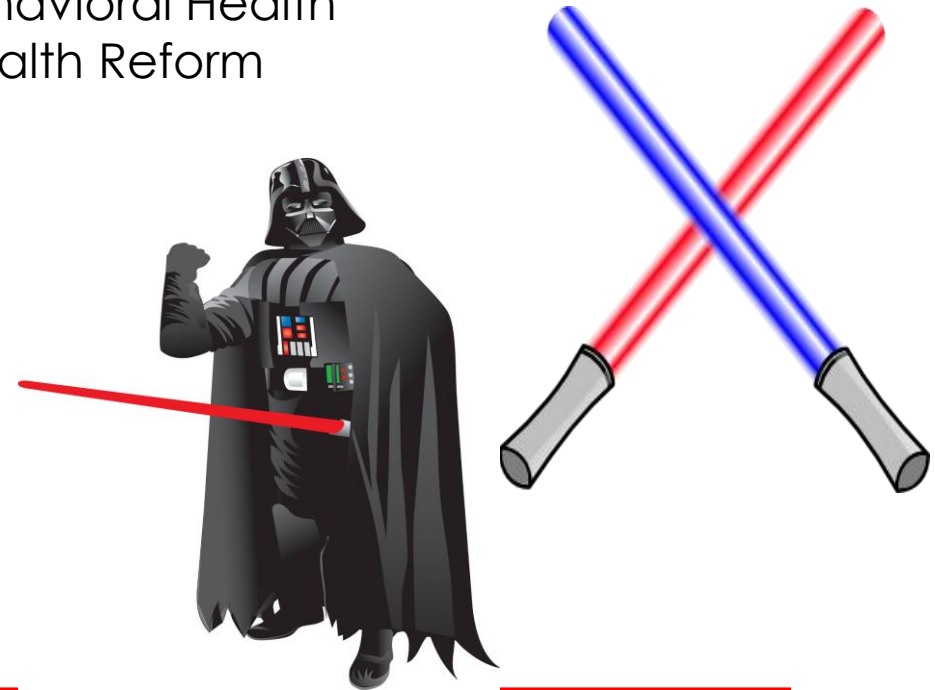
Presented by:

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Signet Health

Topics covered

- Overview of Behavioral Health
- Suicide and Behavioral Health
- Behavioral Health Reform Important Legislation
- What is Behavioral Health Reform today
- The hidden costs of not reforming Behavioral Health
- The national picture of Behavioral Health Reform



What is Behavioral Health

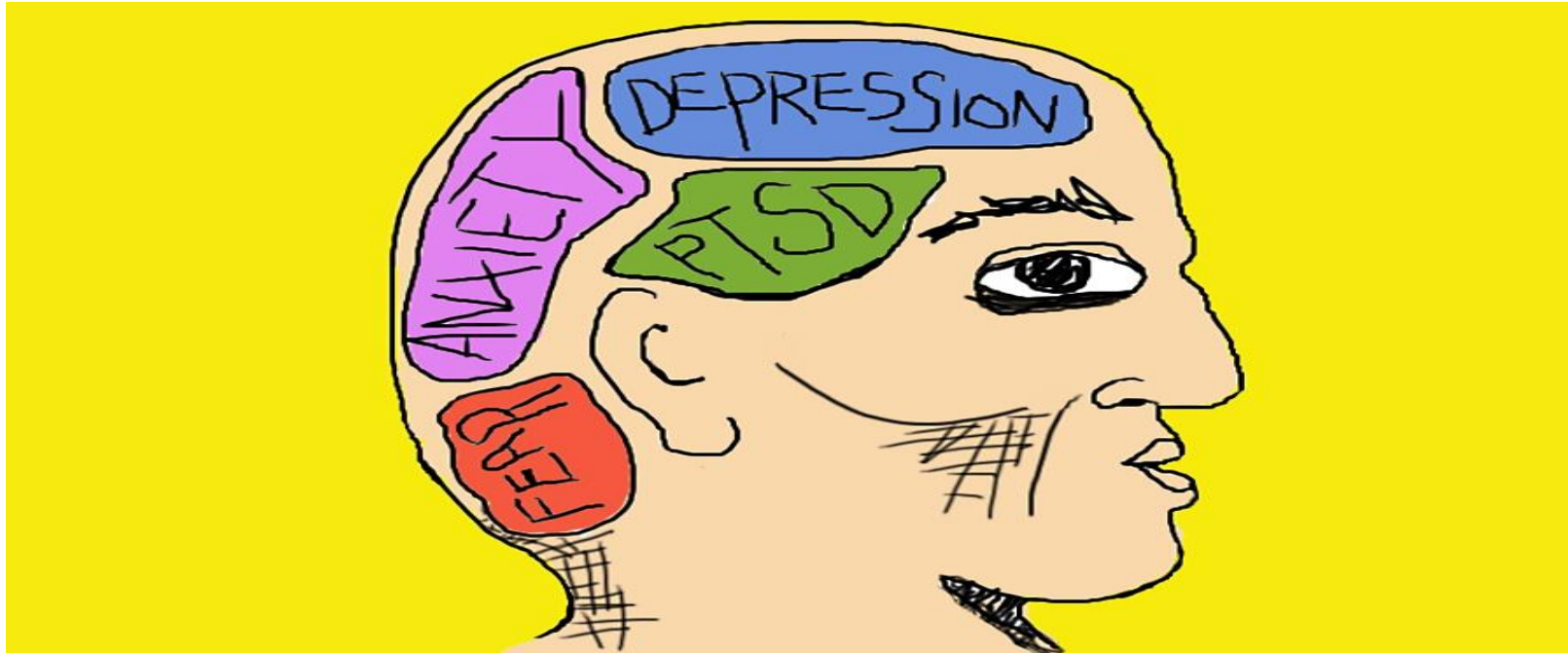
- Behavioral Health encompasses Mental Health and Substance Abuse Problems
- Both are clearly brain diseases

Why should you care about Behavioral Health Reform

1. You are just nice people that care.
2. Strong chance you or someone you know has been touched by a behavioral health issue at some point
3. The astronomical hidden medical costs for people with behavioral health problems
4. Behavioral Health is the #1 diagnostic category of spending in healthcare in the United States, totaling over \$200 billion dollars per year

Mental Illness

- 1 in 5 people live with a mental illness
- More than the populations of Florida and New York combined
- 45 million people (2016)
- Approximately 18% of all adults
- Women higher than men



Mental Illness

- Ages: young adults the highest prevalence
- Youth Mental Health is worsening, Rates of youth with severe depression increased from 6% to over 8% in 2015.
- 76% of youth with severe depression receive no or insufficient treatment.
- Over 1.7% youth with severe depression did not receive treatment.
- Serious workforce shortage in Mental Health, in Alabama only 1 Mental Health Professional to 1,260 people



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Bipolar

The bipolar monster is in fact two opposing consciousnesses fighting for control over one body. One consciousness expresses a constant state of mania, feeling very excitable and over-active, while the other is forever in a low and depressive state. Usually, only one personality has control at any given time, while the dormant side fights to take over the body.

They use gaseous pheromones to dominate and attempt to take over their shared body, influencing anyone that is in close proximity to the monster and passing the dominant state over to the victim. The victim will then experience alternating states like the monster itself. This monster is extremely quick and agile, making it very difficult to identify.

Toby Allen 2014



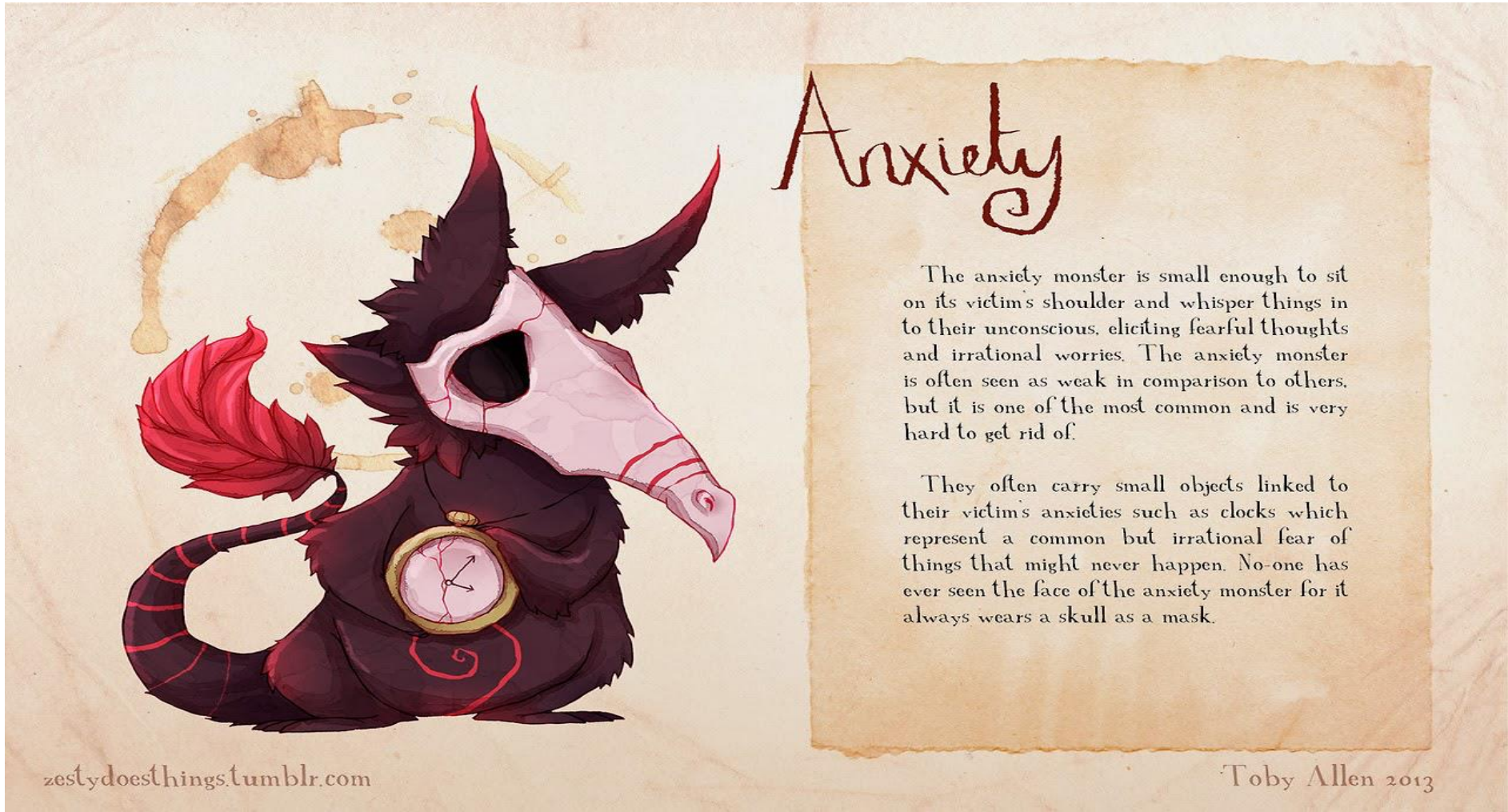
Schizophrenia

The schizophrenia monster is a vile creature that manipulates its victims into doing its bidding. It uses hallucinogenic gases secreted from the pores on his underbelly to control and influence others to do what it wants. Its victims relate to the monster as a powerful and controlling voice inside their subconscious.

It is often accompanied by other monsters such as Paranoia, with Schizophrenia taking up an authoritative role much like a mafia gang leader. They are rarely seen and like to hide in the shadows.

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Toby Allen 2013



Anxiety

The anxiety monster is small enough to sit on its victim's shoulder and whisper things in to their unconscious, eliciting fearful thoughts and irrational worries. The anxiety monster is often seen as weak in comparison to others, but it is one of the most common and is very hard to get rid of.

They often carry small objects linked to their victim's anxieties such as clocks which represent a common but irrational fear of things that might never happen. No-one has ever seen the face of the anxiety monster for it always wears a skull as a mask.

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Toby Allen 2013



Anorexia Nervosa

As a parasitic assassin, Anorexia Nervosa slowly kills its victims from the inside. This monster is almost invisible, thanks to its translucent body, but it casts its shadow on those it inhabits, causing its victims to see a warped image of themselves. It manipulates and controls its victim, convincing them to maintain a minimal body weight by restricting food intake and encouraging excessive exercise to lose what it perceives as "extra" weight.

The ultimate goal of Anorexia Nervosa is to make its victims destroy themselves through starvation and other health complications that arise due to its manipulation. The main powers of this monster are control and secrecy which cause its victims to try and hide their extreme habits. In order to defeat Anorexia Nervosa, its existence must be acknowledged, only then can its powers be rendered useless. It is common for Anorexia and Body Dysmorphia to work together.

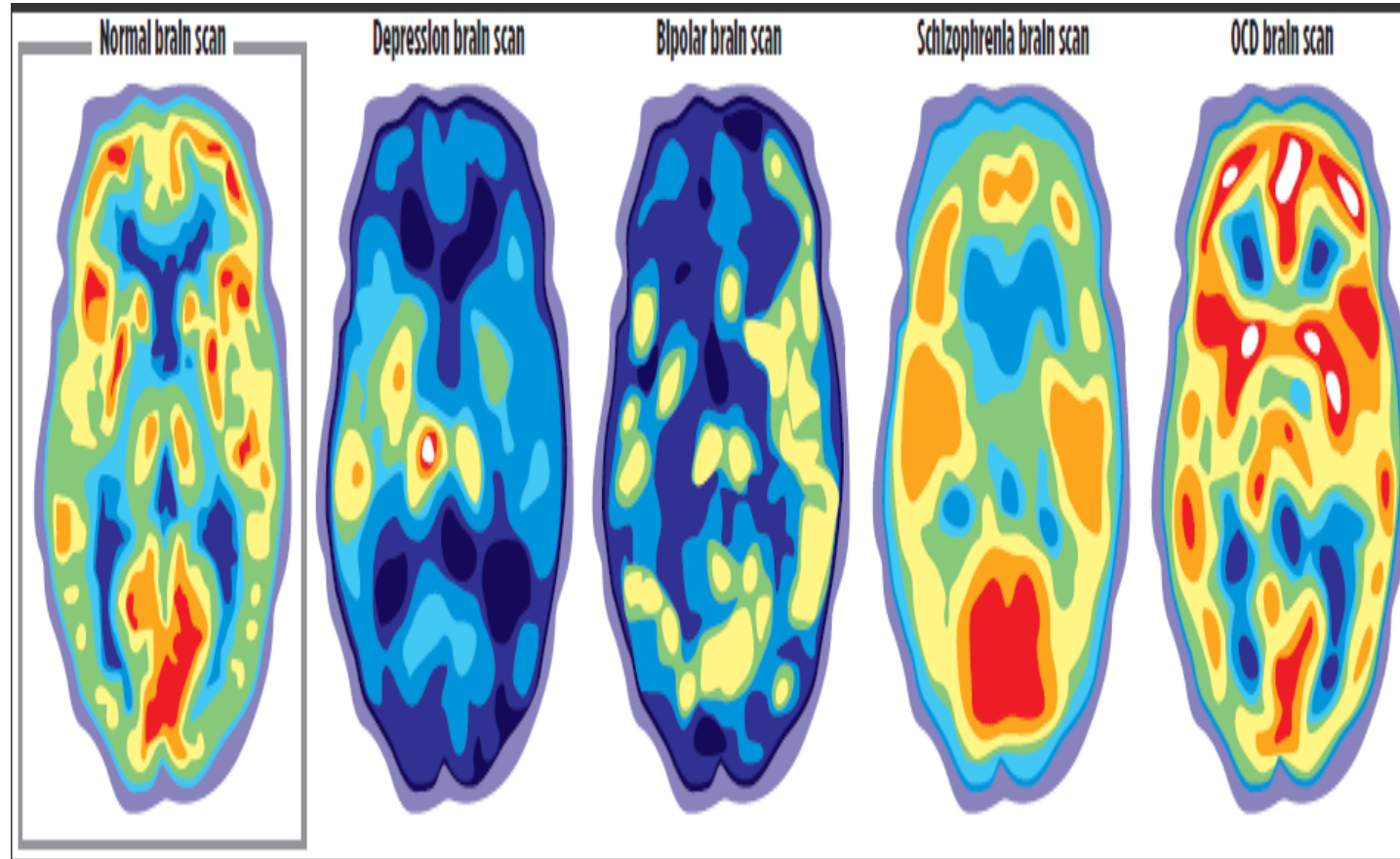
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Toby Allen 2015

- O Obsessive
- C Compulsive
- D Disorder

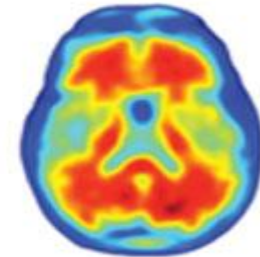
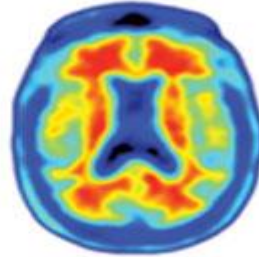
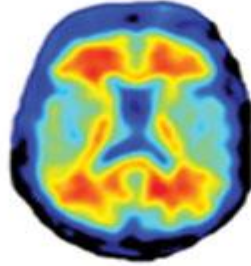
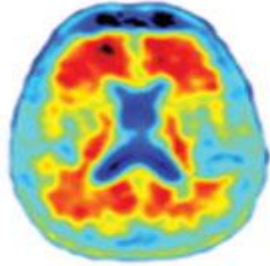


Mental Illness is a Brain Disorder

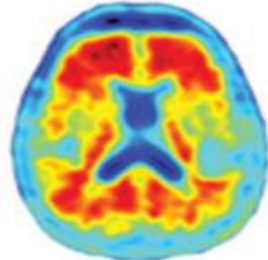


Does Treatment work?

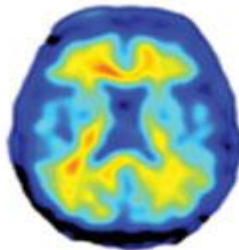
Before treatment



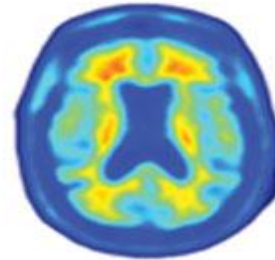
After one year of treatment



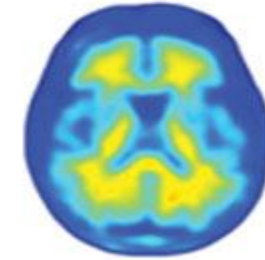
Placebo



Low dose



Medium dose



High dose

Suicide

- Suicide is a national epidemic in the US
- Suicide claimed the lives of 45,000 in 2016
- Every day between 18-22 veterans die by suicide
- Suicide is the 2nd leading cause of death between ages 10 to 34
- More than 90% of children who die by suicide suffer with a mental health condition
- Suicide is the 4th leading cause of death for people between 35 to 54
- Twice as many suicides as deaths by homicide
- Suicide rates increased 28% between 1999 and 2016

Bi Partisan Legislative Efforts

- 2002: President's New Freedom Commission on Mental Health
- 2008: Mental Health Parity-Addiction Equity Act
Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Act of 2008
Took effect 2010, became an essential health benefit
Challenges: Does not require mental health and substance abuse benefits
Carve outs for Behavioral Health
- 2010: Expand Parity

Legislative Efforts

- 2016: Century Cures Act - Promotes & funds the acceleration of research into preventing & curing serious illnesses; accelerates drug & medical device development; attempts to address the opioid abuse crisis; and tries to improve mental health service delivery.

Helping Families in Crisis Reform Act of 2016-
(S2680)-

1. Promotes de-escalation, training and diverting people to treatment instead of incarceration
2. Communication allowed by HIPAA
3. Interactions with law enforcement & justice system
4. Grants for suicide prevention, law enforcement training, Psychiatrists and therapists in underserved areas

The cost of not covering BH services

- Medical costs for treating patients with chronic medical and behavioral health disorders are 2 to 3 times higher than the medical surgical general population
 - Between 9% to 17% of the additional spending can be saved through effective Behavioral Health/Medical Integration
 - Care Management
 - Non Traditional Services
 - Health Homes (Medical Homes)
 - Total spend in US for people who suffer with Behavioral Health disorders is estimated at \$752 billion annually
 - Common medical problems: CHF, diabetes, asthma, cancer
- (Milliman * From administrative claims data)

Behavioral Health Reform

- Historically medical and behavioral health care is very fragmented
- Fragmentation leads to poor quality of care, higher costs of care, higher costs for businesses, higher costs for publicly funded systems such as justice, education, and human services
- What is Behavioral Health Reform?
- Reforming the current Behavioral Health funding and care systems to provide better access to cost effective care across continuums , What does this really mean?
- SAMSHA has included integration of health and behavioral health as a top strategic initiative
- CMS has implemented Primary Care Medical Homes
- Federal waivers and funds to promote health and behavioral health integration

Behavioral Health Reform

- Various Federal and State initiatives:
- National Governors Association:
 - Data Exchange
 - Transform Medicaid
 - Leverage purchasing power to accelerate reform
 - Improve care for people with Behavioral Health needsKey focus if better integration and coordination of services
- Expand Telehealth
- Develop budget neutral initiatives to create more community based services
- Embed Behavioral Health into PCP offices
 - Telehealth
 - Therapists
 - Care coordination

Behavioral Health Reform

Health Homes and Population Health

What is a Health Home?

It is not a physical space!

It is a group of health care and service providers working together to improve coordination of care and service delivery.

*Improve health outcomes.

*Decrease ED visits.

*Decrease costs

Demonstration Projects

Multi-payer Advance Primary Care Practice Demonstration

CMS: joining with private health plans

Eight States

CMS Innovation Center

Behavioral Health Reform

Patient Centered Medical Home-

A medical home is not simply a place but a model of the organization of primary care that delivers core functions of primary health care. (Agency for Healthcare Research & Quality)

Five Attributes of a PCMH

1. Comprehensive Care
2. Patient Centered “Whole Person focus”
3. Coordinated Care
4. Accessible Services
5. Quality and Safety

The Triple Aim: Improved Patient Outcomes, Improved Patient Experience, Improved Value

US Department of Health & Human Services

Per member, per month to the PCMH

Total cost of care is typical

Behavioral Health Reform in Texas

Texas has taken a more regional and community based approach to Behavioral Health Reform

State Representative Four Price

- Chairs both House Select Committee on Mental Health & Public Health Committee
- Both the House & Senate are focusing on Behavioral Health

Senate is debating investing \$95 million to address Behavioral Health needs Texas House proposed appropriating an additional \$162 million to address Behavioral Health needs

Leon Evans, CEO Center for Health Services, San Antonio

- Jail Diversion
- Crisis Care Center
- Forging partnerships with law enforcement
- Diverted 10,000 Bexar residents into treatment programs
- Estimated savings of over \$50 million to the region

Behavioral Health Reform

Maine, Vermont, Rhode Island, NY, Pennsylvania, North Carolina,
Michigan, Minnesota

Community Centered Health Home Demonstration Project (2016)

- Louisiana, Miss., Alabama, Florida
- Broadened the approach from PCMH to a community approach

Behavioral Health Reform Initiatives

Arkansas

Patient Centered Medical Homes

Total Cost of Care

Behavioral Health Population- Medicaid

Managed Care approach

Behavioral Health Reform Initiatives

Three tiers

Tier 2 & 3, highest cost patients with Behavioral Health needs, most functionally impaired, 80% of Medicaid spend on BH is with this 20% of the population, Total cost of care sits with the BH specialty Behavioral Health Home

Tier 1, highest functioning patients, estimated to be 80% of Behavioral Health Patients, Total cost of care sits with the PCMH

References

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- The National Institute of Mental Health
- Substance And Mental Health Services Administration, SAMHSA
- National Governors Association
- American College of Physicians (acponline.org)
- U.S Department of Health & Human Services
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