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# Improving Access To Mental Health in the United States

Fahad M. Al-Assem
falassem@eagles.ewu.edu

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# Improving Access to Mental Health in the United States

**Fahad Al-Assem and Rosalee Allan, FACHE**
**Eastern Washington University, 526 5th Street, Cheney  WA 99004**

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## Introduction

Improving access to mental health in the United States
        Mental health disorders are not selective and affect people of all ages and demography across a population. People with mental health disorders are a burden to the society due to the specialized treatment required. Mental health disorders is prevalent in the United States affecting people at a very young age starting in the teenage period. The United States have a well-developed healthcare system that has helped in the knowledge regarding recognition and treatment of mental health disorders. However, due to lagging of knowledge on public health effects on mental disorder the healthcare treatment system has been unable to deal effectively with the problem. It is now evident that access to mental health is still a problem to a lot of people despite the facilities being available. Furthermore, people with pre-existing chronic medical conditions are more likely to develop mental health disorders complicating the management of both conditions.
        Policy makers are calling for an examination to the mental health treatment system in response to the mass shooting experienced in the country in previous years. The fact that most of the shooting are propagated by children and war veterans is a worrying situation that requires immediate attention. Federal legislations have been called for to help in strengthening community-based mental health services especially for the most vulnerable people who are children and war veterans. Federal policies such as Mental Health Parity and Addiction Equity Act and Affordable Care Act are expected to expand insurance coverage for mental health disorders among many United States children Apart from legislations and policies there is need for a sufficient infrastructure that will serve those who are in need of the treatment. Legislations and policies alone will not improve access if the existing mental healthcare treatment infrastructure is broken.

## Study Objectives

This study seeks to identify the challenges facing mental healthcare and establish measures that can potentially increase access to mental healthcare. A report by the Institute of medicine, Crossing the Quality Chasm: A New Health System for the 21st Century (IOM, 2001), brought forth recommendation that can potentially improve the whole health care system. However, mental health care has various distinctive characteristic such as a differently structured marketplace, and care delivery system. This study examines those differences to find the applicability of Quality Chasm framework in mental health care and describes the best approach for doing so to bring the necessary changes in mental health care system. Mental healthcare system should take advantage of technology, infrastructural changes and integration to medical care system to make sure they reach more people and avail their resources to the people who are in dire need of their services.

## Method

Building on analyses completed by the Institute of Medicine, the review given by the institute on improving access of mental health care, a subsequent report that outlined the various approach to improve the healthcare system fit for the 21st century and a number of recent, well researched resources by experts in mental health gave an examination on the key areas that needed to be addressed that could potentially make mental healthcare accessible. The areas include payment models, the structure of the care system and distribution of the workforce.

## Findings

**Barriers To Accessible Mental Healthcare**
**Fragmented Care System**
        In order to make the necessary improvements in mental healthcare it is important to understand the barriers that hinder the healthcare system. The first problem is a fragmented healthcare system. Mental health has two aspects to it, medical and behavioral depending on what a patient exhibits. A patient with both behavioral and medical conditions has to interact with separate systems of healthcare. That is a medical care system and a mental health care system. Each system has its own culture, regulations, financial incentives and priorities with each focusing on delivering a specific key of services (Melek et. Al., 2014). This leads to overlooking of the key aspects on how to effectively treat the patient and ensure the road to recovery is smooth and specifically focusing on the needs of the patient.

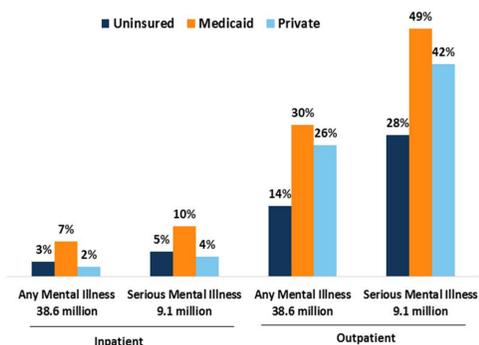**Underprepared and Poorly Distributed Workforce**
        Mental health care requires a wide variety of professionals for effective care. Unfortunately that is not the case in America as the system is undersized, poorly distributed and the workforce is underprepared. The available providers lack the specific skills and experience to offer effective and integrated care. Racial, ethnic and geographic diversity of the workforce is lacking making the distribution of professionals very skewed. This limits access of mental health care for poor and impoverished people. The Association of American Medical Colleges have identified psychiatrist as one of the skilled profession that has a shortfall and predict that by 2025 the deficit will be much worse (IHS, 2015). The current national infrastructure does not offer any hope for the field to producing more psychiatrist since only 1,373 medical school graduates matched to psychiatry in 2016 (NRMP, 2016). The trend is also reported in other professional fields that offer mental health care.

**Unfavorable Payment Models**
        The most prevalent payment method in the healthcare system is the fee-for-service (FFS) system. This payment does not provide flexibility for providers to cater for a coordinated care effectively since essential elements of integrated care are not reimbursed. Mental healthcare services especially behavioral conditions are not valued by the FFS system. Bundled or capitated payments offer more flexibility in mobilizing for resources when offering mental health care and they also allow for coordinated care for patients. However, they also have their own limitations when it comes to implementation and pricing thus they are not ideal for mental health patients. The needs of patient vary so does the treatment method recommended to the patient. Various resources come into play when specializing treatment to fit each and every patient. This means that the cost of treatment varies for each patient. Capitated or bundled payment therefore, has to be risk adjusted to account for the various treatment methods offered to the patients. According to McGuire (2016) the current risk-adjustment approaches are not sophisticated enough to pay the providers the fair amount for high-need patients.
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Figure 6

**Past-Year Mental Health Treatment Among Nonelderly Adults by Insurance Status, 2015**

Uninsured  Medicaid  Private

| | Inpatient | | | Outpatient | |
|---|---|---|---|---|---|
| | Any Mental Illness 38.6 million | Serious Mental Illness 9.1 million | | Any Mental Illness 38.6 million | Serious Mental Illness 9.1 million |
| Uninsured | 3% | 5% | | 14% | 28% |
| Medicaid | 7% | 10% | | 30% | 49% |
| Private | 2% | 4% | | 26% | 42% |

NOTE: Differences between Medicaid and uninsured are statistically significant except for inpatient treatment for serious mental illness. Differences between Medicaid and private insurance are statistically significant except for outpatient treatment for serious mental illness.
SOURCE: Kaiser Family Foundation Analysis of 2015 National Survey on Drug Use and Health

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## Potential Improvements in Mental Healthcare

There are a lot of improvements required in mental health system to make it more accessible. There are various opportunities available that can help overcome the barriers of accessible mental health care and if sized they would considerably improve access to mental health care.

**Integration of Health care Systems**
        Due to fragmentation in the healthcare system some services search as mental health care are hard to come by. However, due to business integration which has become a driving force in consolidating various providers to provide various services under one entity, hospitals and various entities providing health care are merging to interact more closely and provide healthcare solution to the people. This merging encourage scale and scope in service provision. Federal policy initiatives have also played a role in encouraging merging and integration by giving out financial incentives for providers to integrate.
**Changing Approaches to Payment methods**
        The biggest challenge in payment is finding the fair amount of money to be paid for the service offered. Thus payers and provider agencies should have payment amount that is reasonable and adequate for evidence-based practice. Payment should be based on the good outcomes rather than the volume of service offered. This will ensure that the quality of treatment is not only effective but quality as well. Bundled payments and value-based approaches model encourage service providers to focus on outcomes and create a flexible environment in supporting non-traditional services or providers which is an essential component of integrated care.
**Insurance Expansion and Mental Health Parity**
        Patient Protection and Affordable Care Act (ACA) has led to an increase in the number of Americans covered by health insurance facilitating improvements in the care for people with mental conditions. ACA stipulates that insurance policies should include a cover for mental health services. Health parity laws have ensured that insurers do not put greater financial requirements on mental health services than what is placed on medical care services for an insurance policy provided. Putting such measures in place will ensure there is financial accessibility to a wide array of mental health care services to many people.
**Technology**
        Technology is very crucial in healthcare system as it has the potential to enhance access to quality and cost efficiency health care services. Electronic Health Records (ERH) is one technological implementation in health care system that has led to provision of quality services. However, it relies on efficient and effective communication among service providers to guarantee cost effective and quality care. This has led to its slow adoption by providers of mental health services due to confidentiality and information sharing which is very specific to clinical mental health. In comparison to the rapid rise in EHR use in general medical and primary care settings, less than 20% of mental health facilities have adopted the EHRs (Walker et. Al., 2016). For HIT benefits to be realized innovative solutions have to be developed to address the issue of confidentiality and information sharing. Financial incentives also need to be catered for to encourage providers to purchase technology and use it in ways that are integrated into the genera medical systems.

## Recommendations

To improve access to mental health care to people public policy will have to play a major role in changing how mental health care is delivered to the people. There are three major direction that are very critical for improved access, outcome and effective mental healthcare. Introduction of better payment approaches that recognize the cost of managing care of patient with mental health issues and which facilitate the use of teams and technology to help in identification, engagement and management of care for such patients. Investment in strategies and programs for expansion, improvement, diversification and leveraging the workforce and to develop incentives that will improve service in underserved areas. Measurable standards that encourage dissemination of tested organizational models have to be clearly developed and implemented allowing establishment of a culture of shared accountability to integrate delivery of services.

## Conclusion

The healthcare sector faces a lot of challenges as it struggles to improve access to mental healthcare for many Americans coping with the condition. Recovery from mental conditions might be a lifelong process but with accessible healthcare the outcomes might be very promising and probably make better and easier the lives of people living with the condition. Clinical and policy strategies hold the potential for enabling significant improvement in access to mental healthcare. The knowledge and information that is needed is available and what remains is putting it into action.

4.19%, or
OVER 10.3 MILLION ADULTS
have serious thoughts of suicide in the U.S.
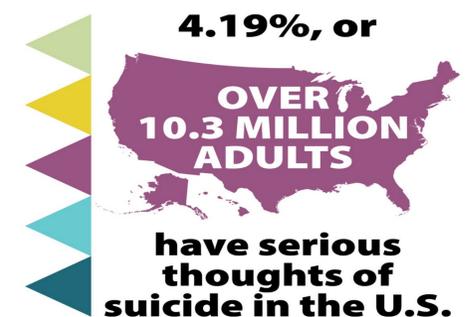
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