

## Tackling America's Mental Health and Addiction Crisis

**MARCH 2021** 

In 2020, the Bipartisan Policy Center convened a Behavioral Health Integration Task Force to break down the barriers and develop policy solutions to integrating physical health, substance use, and mental health care services.

### The Need for Integrated Care

The COVID-19 pandemic is driving mental health problems and surges in drug overdose deaths in the United States. To meet the growing unmet need for screening and treatment, it is imperative to advance the integration of behavioral health and primary care services. Research shows that integrated care enhances access to treatment, improves patient outcomes, reduces health disparities, and is cost effective.

### **COVID-19 Impact**

Rates of mental illness and substance use have risen since the start of the pandemic.

Symptoms of anxiety and/or depression in adults nearly quadrupled

More than 1 in
10 adults
started or
increased
substance use

Drug overdose deaths outpaced all previous records over a 12-month period 25% of young adults seriously considered suicide

#### Challenge

America's behavioral health care system does not have the capacity to serve the growing number of people who need treatment.

Over **55%** of **adults** with a **mental illness** went **untreated** in 2020

Nearly **60%** of **youth** with **major depression** went **untreated** in 2020

Nearly **90%** of **people** with a **substance use disorder** went **untreated** in 2019

### BPC's Recommendations To Expand Integrated Care

Advancing primary care providers' ability to screen for and treat mild to moderate behavioral health conditions will allow more patients to access critical services.

# Current System: Providers work in silos and patients are underserved

- Insufficient capacity and training
- Lack of behavioral health treatment services to refer patients
- Inadequate reimbursement to provide or coordinate behavioral health services



## Integrated System: Providers link primary care and behavioral health services and more patients receive treatment

- New value-based payments to encourage providers to integrate care
- New training resources for providers
- More robust behavioral health provider network to enhance referral and consult capacity





### BPC's Behavioral Health Integration Task Force Key Recommendations

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The task force released 10 key recommendations focused on the development of core integrated care standards, as well as the appropriate financing, tools, and training to support providers. Our recommendations would benefit an estimated 1 million Americans and cost the federal government a net of \$2.2 billion over 10 years, including \$6.9 billion in costs and \$4.7 billion in savings.

#### Establish Core, Minimum Standards Essential for Integration:



- •Establish core service and quality standards to improve accountability for integrating care.
- •Tighten network adequacy rules to ensure enough behavioral health providers in health plan networks are truly available to patients.

#### Drive Integration In New and Existing Value-Based Payment Models:



- •Provide financial incentives and require accountability to build integrated care delivery into existing payment models for Medicaid Managed Care Organizations, Medicare Accountable Care Organizations, and Medicare Advantage plans.
- •Create a capitated and risk-adjusted payment model for primary care providers who treat mild to moderate behavioral health services.

### Expand, Train, and Diversify the Workforce for Integrated Care Teams:



- •Create a nationwide technical assistance program for primary care practices to receive the training necessary to deliver integrated care and participate in value-based payment models.
- •Expand Medicare coverage to additional behavioral health provider types to deliver services within integrated care settings and increase scholarship opportunities and pipeline programs to diversify and broaden the workforce.
- •Increase grant funding for state-wide psychiatric consultation services to provide primary care providers with behavioral health expertise to treat mild to moderate conditions.

### Promote the Use of Electronic Health Records, Telehealth, and Other Technology to Support Integrated Care:



- •Test a model offering financial incentives for behavioral health clinicians to adopt electronic health records and facilitate information exchange between providers.
- •Permanently expand Medicare coverage of telehealth services that advance integration, reduce access disparities, and address the digital divide.
- •Ensure that data collected by behavioral health and other wellness apps are subject to privacy protections under the Health Insurance Portability and Accountability Act.

Health Management Associates completed cost, savings, and population impact estimates. BPC would like to thank Well Being Trust, the Sunflower Foundation, and the New York Community Trust for their generous support. For a full list of recommendations and complete citations, visit: https://bipartisanpolicy.org/report/behavioral-health-2021