

Commonwealth of Massachusetts

Executive Office of Health and
Human Services



Imagining the Future of Children's Behavioral Health

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May 6, 2015



Facts – Public Health Issue



- Between 13-20% of children living in the United States are affected by mental illness in a given year
- Almost half of all lifetime incidences of mental illness begin by age 14
- Suicide is now the second leading cause of death for youth between the ages of 10 to 24
- 50% of students age 14 or older with a mental disorder drop out of high school, the highest drop-out rate of any “disability” group
- The CDC estimates that the economic impact of mental health challenges among youth under age 24 is \$247 billion annually



Accomplishments – To Celebrate



- Massachusetts leads the nation in developmental screenings, including behavioral health screenings for youth
- Mental Health America ranked Massachusetts 6th out of the 50 states and DC in a recent report
 - 98% of youth in Massachusetts with an emotional or behavioral developmental issue are consistently insured
- Massachusetts Child Psychiatry Access Project (MCPAP) has been replicated in 32 states and DC
 - Expanding its reach to support access to care for mother's experience post-partum depression through the MCPAP for Moms project
- Successful Passage of Chapter 321
 - Encouraged early identification of mental illness in children
 - Expanded insurance protections for families
 - Established the Knowledge Center and the Children's Behavioral Health Advisory Council



Remaining Work



- Massachusetts ranked 21st out of 50 states and DC with respect to youth who need but did not receive mental health services
- Timely access to care has been a long-standing issue
- Youth “boarding” in emergency departments rather than receiving the care and treatment they need is simply **unacceptable**
- True mental health and substance use parity remains elusive for too many young people and their families



Other Issues Affecting Child/Adolescent Mental Health



Opioid Epidemic

Homelessness

Autism



Envisioning the Future – What might it look like?



- Integration of Medical and Behavioral Health
 - Prevention, Intervention, Treatment, Recovery
 - Patient centered medical homes
 - Parent support
 - Screening brief intervention and referral to treatment (SBIRT)
 - Care coordination
 - Evidence-based therapies
 - Real connections between schools and mental health services
- Availability of needed services **regardless of payer**
- Better alignment of funding across payers – No Wrong Door



Envisioning the Future – Prevention and Early Identification



- Funding spent on prevention and early identification and treatment of mental illness and substance abuse
- Investments in:
 - Early childhood mental health
 - Early identification of mental illness
 - Screening and treatment for moms with post-partum depression
 - Supporting parents with mental illness during pregnancy and the early years of their child's development
 - Substance abuse programs
- Public Health Strategy: Intervening upstream before mental health challenges become more difficult
- Suicide Prevention



Envisioning the Future – Workforce



- Highly skilled, well trained, and culturally, ethnically, and racially diverse workforce
- The Knowledge Center will play a key role in strengthening workforce
- Expanding our workforce to include young adult peer mentors and family partners to improve care access and engagement
- Transformation through the inclusion of young adults and families as care providers
- Ensure necessary skills and competencies are taught by partnering with our incredibly rich higher education system for delivery of service in today's modern health care environment
- Cross training across systems



Envisioning the Future – Health Information Technology



- Reliance on health information technology including telehealth to make more effective use of our limited workforce
- For example:
 - MBHP permit payment for psychiatric/medication evaluation and medication management services delivered via video conferencing in Emergency Services Programs/Mobile Crisis Intervention (ESP/MCI) and outpatient provider settings
 - Electronic Medical Records with privacy protection



Envisioning the Future – Integration of Behavioral & Physical Health Care



Break down the barriers:

- reimbursement issues
- outdated regulations
- privacy concerns
- lack of interoperability
- stigma related to mental health and substance use



Envisioning the Future – Policies, Services and Financing



- Better coordination and collaboration across systems
- Enhanced collaboration and education with schools
- Children with mental illness are “all” of our children regardless of what door they enter
- Actively engage our stakeholders and evaluate our policies
- We have Achieved a great deal:
 - Broader inclusion of families and young people at the policy, management, and service levels
 - Work of PPAL, MPOWER, pioneering family partners and young adult peer mentors have a seat at the table
 - Created a humane, collaborative, and family-centered system



Envisioning the Future – Focus on Results



- Evaluate the effectiveness of clinical care
- “Level the playing field” with physical health care
- The Knowledge Center’s critical role in identifying evidence-based practices for statewide implementation will ensure that ALL can access the highest quality services – no matter where you live.