

ACTION BRIEF

Employer Strategies that Drive Value



Employers for Healthcare Value Since 1980

INTEGRATING MENTAL HEALTH SERVICES AND PRIMARY CARE

IMPROVING OUTCOMES, LOWERING COSTS, REDUCING STIGMA

ACTION STEPS FOR EMPLOYERS:

1. Identify the unmet needs of your population and work to close gaps by integrating more mental health services through existing EAPs, telemental health, and other mental and behavioral health resources.
2. Ask your health plans and/or consultants to foster partnerships with local providers and medical specialists who are already offering proven integrative medical care with mental health services.
3. Insist that your health plan support and promote an evidence-based integrative approach.
4. Use your integrative healthcare approach as a pathway for developing total-person care and a culture of wellbeing.

INTRODUCTION (THE PROBLEM)

Research shows that 68% of people diagnosed with mental illness, particularly depression, have higher rates of comorbidities than the general population. These patients also are more likely to die prematurely and are at greater risk for unfavorable outcomes when they experience illness or disease. In fact, the American Heart Association has recognized depression as a risk factor for poor prognosis after a heart attack. But research shows that care and outcomes significantly improve when mental health services are integrated into primary care strategies.

Historically, the healthcare system has not addressed mental health and physical health with an integrative approach:



- ▶ **48%** of mental health appointments are with a non-psychiatric primary care provider
- ▶ **67%** of people with a behavioral health disorder do not get behavioral health treatment
- ▶ **30%-50%** of patients referred from primary care to an outpatient behavioral health clinic do not make the first appointment
- ▶ **Two-thirds** of primary care physicians report not being able to access outpatient behavioral health for their patients¹

Medical and mental conditions have high rates of co-occurrence²



29%

of adults with medical conditions also have mental health conditions



68%

of adults with mental health conditions also have medical conditions



¹ American Psychiatric Association (APA) and Academy of Psychosomatic Medicine (APM)

² National Alliance Presentation Feb 5, 2020 – 'How Employers Can Improve Access to Effective Behavioral Care Through Measurement-based Care'

INTEGRATIVE CARE MODEL

Over the past decade, the move toward integrating mental health and medical services has led to improved patient outcomes, lower costs, and reduced stigma. Significant research spanning three decades has identified one model—the Collaborative Care Model (CoCM)—as effective and efficient in delivering integrated care.³

The CoCM, developed jointly by the American Psychiatric Association (APA) and Academy of Consultation-Liaison Psychiatry (ACLP), delivers effective mental health care in primary care with a care team led by a primary care provider and including a behavioral health care manager and consulting psychiatrist. Combining behavioral, psychosocial and medical care better meets the whole-person health needs of patients with mental health conditions.

The CoCM differs from other integrative health services because of the replicated evidence supporting its outcomes, its steady reliance on consistent principles of chronic care delivery, and its attention to accountability and quality improvement (QI).

ACTION STEP 1: Identify the unmet needs of your population and work to close gaps by integrating more services through existing employee assistance programs (EAPs), telemental health, and other mental and behavioral health resources.

Inclusion of an EAP, telemental health, and other mental and behavioral health resources in the health benefit package:

- ▶ May encourage more people familiar with available resources to use those services at an early stage when mental health challenges first arise
- ▶ Has no/few financial barriers to access
- ▶ Allows supervisors, managers and other coworkers to refer employees directly
- ▶ Facilitates referral to specialty treatment when necessary
- ▶ In some cases, allows individuals who receive assessment and/or short-term counseling to continue specialty treatment with the same provider

The Five Principles of the Collaborative Care Model

Over time, expert consensus has identified five essential elements of the Collaborative Care Model (CoCM). These five principles can be a foundational guideline for employers as they begin exploring how to add an integrative approach to their healthcare benefits.

- 1. Patient-Centered Team Care:** Primary care and behavioral health providers collaborate effectively using shared care plans that incorporate patient goals. The availability of physical and mental health care at a familiar location increases patient comfort and reduces duplicate assessments. Increased patient engagement often leads to a better experience and outcomes.
- 2. Population-Based Care:** The care team shares a defined group of patients, tracked in a registry to ensure no one falls through the cracks. Practices reach out to patients who are not improving, and mental health specialists provide caseload-focused consultation, not just ad-hoc advice.
- 3. Measurement-Based Treatment to Target:** Each patient's treatment plan clearly articulates personal goals and clinical outcomes, which are routinely measured by evidence-based tools. Treatments are actively changed if patients fail to show the improvement expected, until clinical goals are achieved.
- 4. Evidence-Based Care:** Patients are offered treatments with credible research evidence that supports their efficacy in treating the target condition.
- 5. Accountable Care:** Providers are accountable and reimbursed for quality of care and clinical outcomes, not just the volume of care provided.

Benefits of the Collaborative Care Model (CoCM) from APA

For every \$1 spent on care delivered in the CoCM, there is a **\$6.50 ROI** in improved health and productivity.



By delivering care in CoCM, employers can see a **combined cost savings of \$1,815 per employee per year** in health care spending and improved productivity.



EMPLOYER CASE STUDY

“The more we integrate our services with our partners and close gaps in care, we are finding that the need for EAP/behavioral health services is growing.”

— Bill Dinger, Director, Healthcare Innovation & Labor at The Walt Disney Company

The Walt Disney Company has been working with its own version of integrative care, with unique elements that reflect the specific needs of its workforce. Its model was designed to address four key components resulting from an employee assessment: physical, financial, emotional and social wellbeing. According to Bill Dinger, director, Healthcare Innovation & Labor, the integration of an EAP into each of these dimensions was the critical first step. Learn more about The Walt Disney Total Person Health Approach [here](#).

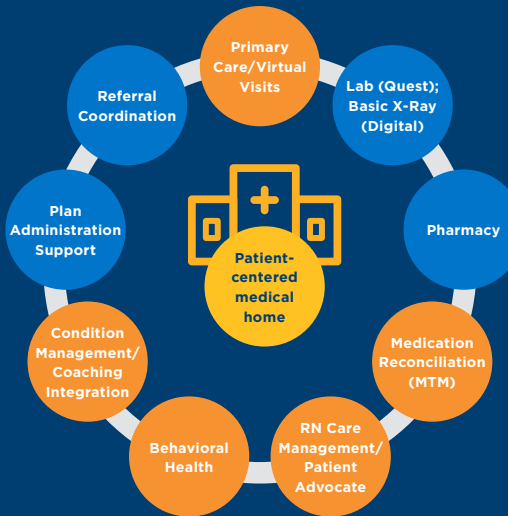
ACTION STEP 2: Ask your health plans and/or consultants to develop partnerships with local providers and medical specialists who are already offering proven integrative services.

While growing numbers of integrative care clinics are being developed nationwide, it is important to partner with those that provide the following:

- ▶ Care coordination and care management
- ▶ Regular/proactive monitoring and treatment-to-target using validated clinical rating scales
- ▶ Regular, systematic psychiatric caseload reviews and consultation for patients who do not show clinical improvement
- ▶ Reimbursement models using capitated, case-rate payments, or pay-for-performance mechanisms

Walt Disney platform for driving value through integration of services and oversight for population health⁴

Lessons learned from the EAP integration led The Walt Disney Company to add other key integrative healthcare strategies including:



- ▶ Offer HMO-like plans (lower out-of-pocket, higher premium contributions, optimized direct-contracted networks) alongside a consumer choice plan (higher out-of-pocket, lower premium contributions, broad carrier network)
- ▶ Integrate both systems through onsite facilities by using care managers, offering pharmacy and, most important, real-time access to mental health specialists (see diagram)
- ▶ Implement on-site or near-site medical facilities that provide primary care for members who select the HMO-like plans
- ▶ Experiment with pilot programs to see what works

PROVIDER CASE STUDY

In June 2015, the University of Pittsburgh Medical Center (UPMC) Total Care-IBD Program was created as the first patient-centered medical home (PCMH) for patients with inflammatory bowel disease (IBD), a lifelong, costly, complex, and debilitating condition that often begins at a young age. This program was designed to provide comprehensive, interdisciplinary preventive care to improve the quality of life for patients who typically experience high rates of emergency department (ED) visits, hospital admissions, disability claims, and mental health/substance use/opioid use disorders (MH/SU/OU). Ongoing assessment of this PCMH has shown:

- ▶ Significant improvement in patient-reported quality of life
- ▶ 90% increase in preventive health measures (e.g., vaccinations, bone health screening, and steroid sparing)



- ▶ High patient satisfaction with physician communication
- ▶ Significant decrease, over a one-year period, in total unplanned care (e.g., ED visits and hospitalization)

Learn about an ongoing PCORI study awarded to UPMC: [Comparing Two Programs to Treat Patients with Inflammatory Bowel Disease and Behavioral Health Conditions](#).

⁴ Diagram from Walt Disney Presentation

⁵ https://www.chcs.org/media/HH_IRC_Collaborative_Care_Model_052113_2.pdf

ACTION STEP 3: Insist that your health plan support and promote an evidence-based integrative healthcare approach.

Employers must work closely with health plans and consultants when broadening their strategies to include integrative mental health and medical care benefits. Consider these steps to ensure that your health plan is supporting and promoting you in this development:

- ▶ Request that the integrative care billing codes are activated
- ▶ Require ongoing reports showing data measuring utilization/outcomes of integrative medical and mental health services
- ▶ Select plans that support providers in implementing evidence-based integrative services
- ▶ Request that TPAs adopt and require standardized measures of outcomes for behavioral health disorders in ACOs and PCMHs and in large in-network mental health providers
- ▶ Request that major in-network medical groups adopt these measures for ACOs, PCMHs, and internal mental health providers
- ▶ Inform health plans that enrollees should be screened and tracked for depression, anxiety, psychosis, bipolar disorder, suicide, and MH/SU/OU disorders
- ▶ Provide incentive payments and minimize administrative requirements for in-network primary care and MH/SU/OU disorder providers who participate in quality improvement programs

An integrated approach goes a long way when it comes to achieving positive, sustainable health outcomes and cost savings that do not compromise quality and access. To learn more about these strategies and the Five Priority Areas that support an improved mental health

The Patient Journey through an Integrative Healthcare Experience

Keeping Patients on a path to improved outcomes through regular, systematic psychiatric monitoring

“David” (age 47) had high blood pressure and diabetes. Unengaged and unmotivated, he was not managing his disease effectively. In an integrative healthcare system, David was flagged for clinical interactions when he placed a call to the pharmacy to discuss his blood pressure medicine formulary options. He was immediately connected to an in-network health coach, who detected stress and anxiety. David received real-time assistance locating an in-network therapist and was encouraged to set up five free visits. He was shown how to access the online stress program and later had the opportunity to speak directly with a health coach. Carefully walking David through these steps helped him better manage his care, which improved his mental and physical wellbeing.

approach, go to [The Path Forward Initiative](#). In a CIGNA example, three years of integrating medical and pharmacy benefits saved clients an average of more than \$75 per member per year (PMPY). Adding mental health benefits to the analysis enhanced that advantage, driving an average \$193 PMPY additional savings.⁶

ACTION STEP 4: Use your integrative healthcare approach as a pathway to developing total-person care and a culture of wellbeing.

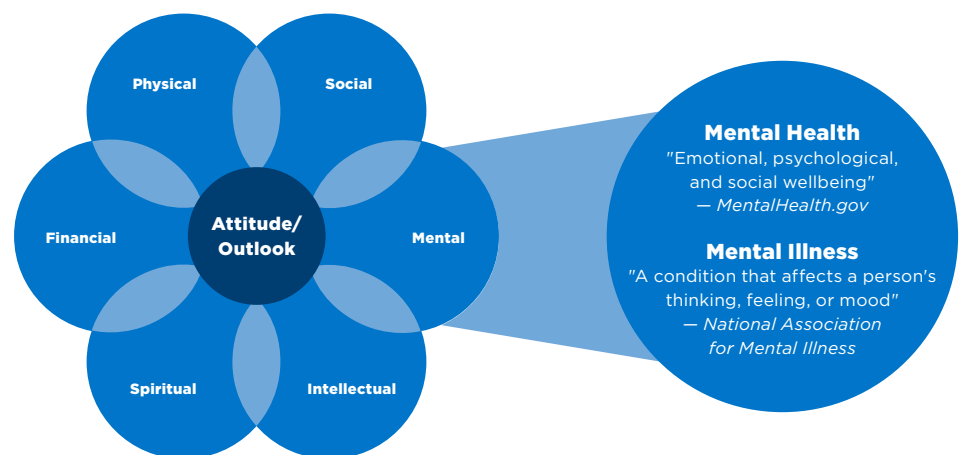
According to [mentalhealth.gov](#), “mental health includes our emotional, psychological, and social wellbeing.” The National Association for Mental

Illness (NAMI), describes mental illness as “a condition that affects a person’s thinking, feeling or mood. Such conditions may affect someone’s ability to relate to others and function each day.” These definitions show that mental health is an integral part of wellbeing, as highlighted in this graphic below.⁷

Once an organization makes a commitment to integrate mental health services, the pathway toward a holistic Total Person Health approach becomes clear. Inherently, when mental health issues are addressed, the whole person is addressed.

Learn more about Total Person Health and a Culture of Wellbeing [here](#).

Relationship between Mental Health and Wellbeing



6 CIGNA Integrative Care Benefits – Special Report

7 NWA Wellbeing Whitepaper

SPECIAL COVID-19 CONSIDERATION

“The impact of the pandemic on people’s mental health is already extremely concerning,” said Dr. Tedros Adhanom Ghebreyesus, director-general of the World Health Organization. “Social isolation, fear of contagion, and loss of family members is compounded by the distress caused by loss of income and often employment.”

Organizations that had an integrative approach in place before the pandemic, including a robust mental health telemedicine component, have been able to respond quickly to the urgent mental health needs of their workforces. This crisis has underscored the reasons employers should consider proactively implementing an evidence-based integrative approach that not only addresses everyday wellbeing concerns but can quickly expand to manage an unexpected emergency like COVID-19.

By treating both the mental and physical healthcare needs of patients through an evidence-based, integrative approach, we can move toward improved patient outcomes and satisfaction at a lower cost by addressing common, disabling and costly behavioral health problems earlier, more effectively, and in tandem with medical conditions.

Telehealth for Mental Health Services

Telehealth has been a particularly effective tool for managing the rising mental health cases due to the pandemic. A study from PCORI was completed well before this crisis but is a good reminder that telehealth treatment for mental illness has been proven through comparative effective research studies to be as effective as in-person treatment. The study from PCORI is an excellent example.

Telemedicine Research Study: [PCORI-funded Study with Results: “Comparing a Smartphone Program with a Peer-Led Program to Help People with Serious Mental Illness Manage their Symptoms”](#)



RESOURCES FOR EMPLOYERS:

- [Integrating mental health into primary care](#)
- [PCORI research studies on mental and behavioral health](#)
- [Improving quality of care with behavioral health: Clinical trials & UPMC](#)
- [National Initiative: The Path Forward on Mental Health & Substance Use](#)



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