National Council for Behavioral Health

- JFK’s New Frontier
- Community problem solvers – mental health and addiction treatments including medications; case management; ACT; clubhouse; housing; residential; jail diversion and re-entry; crisis services; peer and recovery supports; healthcare

2100 organizations in 50 states serving 8 million adults, children and families

Specialty behavioral health niche: caring for complex, costly patients

Services are Clinically Effective

Up to 90% of people being treated recover.

Mental health treatments work:
- 80% Bipolar
- 70% Major depression/panic disorder/GAD
- 60% Schizophrenia

These success rates are comparable to those for physical health care:
- 70-80% asthma and diabetes
- 60-70% cardiovascular disease
- 41-52% heart disease

Services are Cost Effective

- State Hospital: $175,000
- Jail Cell: $85,000
- Community Residential Facility: $65,000
- Single Room Occupancy with Services: $40,000
- Supportive Housing with ACT: $22,500
The Next New Frontier

- Most Americans don’t know signs of suicide, addiction or mental illness, what to do about them or how to find help
- First episode psychosis - 40,000 new cases of schizophrenia – delayed treatment/ life long disability
- 23 million people needing Substance Use treatment, 10 percent receiving care (28 million need diabetes care and 84 percent receiving care)
- Since 1980 600,000 died of AIDS, 3.3 million SUD
- 68% of adults with mental illness have medical condition and 29% with medical condition have mental health disorder - treatment primarily medication in primary care, poorly managed

Pieces in Place…

- Insurance Reform and Coverage Expansion for 49.1 million – necessary expensive technical fixes
- Parity
- Service Delivery Redesign and Payment Reform is focus … improving care and “bending the cost curve”
Embracing Change

Inverting the Resource Allocation Triangle so that:

• Inpatient and Institutional Care are limited
• Chronic conditions are care coordinated

Getting healthcare dollars under new population based and integrated budget arrangements
• Dual Eligible Initiatives
• Accountable Care Organizations
• Medical/Healthcare Homes – PCBHI grants; ACA and health homes amendment

State Health Home Proposal Status

MO saved about $4.2 million in hospital and emergency room Medicaid costs
Challenging forces at play

- Experimentation
- Monopoly economy
- Liberation of information

Where are we?

Significant roadblocks …

- Small businesses/small margins
- Outdated business/practice culture
- Lack of capital for improvements (HIT, human capital, new service lines) and no federal safety net status to support improvement
- State oversight – little standardization to support investment
Excellence in Mental Health Act  
(S. 264/H.R. 1263)

Parity in the Safety Net

- Establishes minimum service package and criteria for Federally Qualified Behavioral Health Centers (FQBHCs), designed to serve those with mental and addiction disorders.
- Improves Medicaid reimbursement
- Promotes coordination with FQHCs

Senators Debbie Stabenow & Roy Blunt, author of the 2013 Excellence in MH Act

Mental Health First Aid Act  
(H.R. 274/S.153)

- Senator Mark Begich (D-AK), Congressman Ron Barber (D-AZ)
- Many people know how to provide first aid in health emergency – but few know what to do for someone experiencing mental health crisis.
- Authorizes grants to train communities in MHFA.

Senator Mark Begich, author of the MHFA Act
Behavioral Health IT Act

Extends federal health IT incentive payments to community mental health and addiction treatment facilities

Senator Sheldon Whitehouse, author of the Behavioral Health IT Act

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