

Developing a Behavioral Health Workforce to Address Co-Occurring Mental Health and Substance Use Disorders

Tim Knettler, MBA, CAE
Executive Director/CEO, NRI

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Authors:

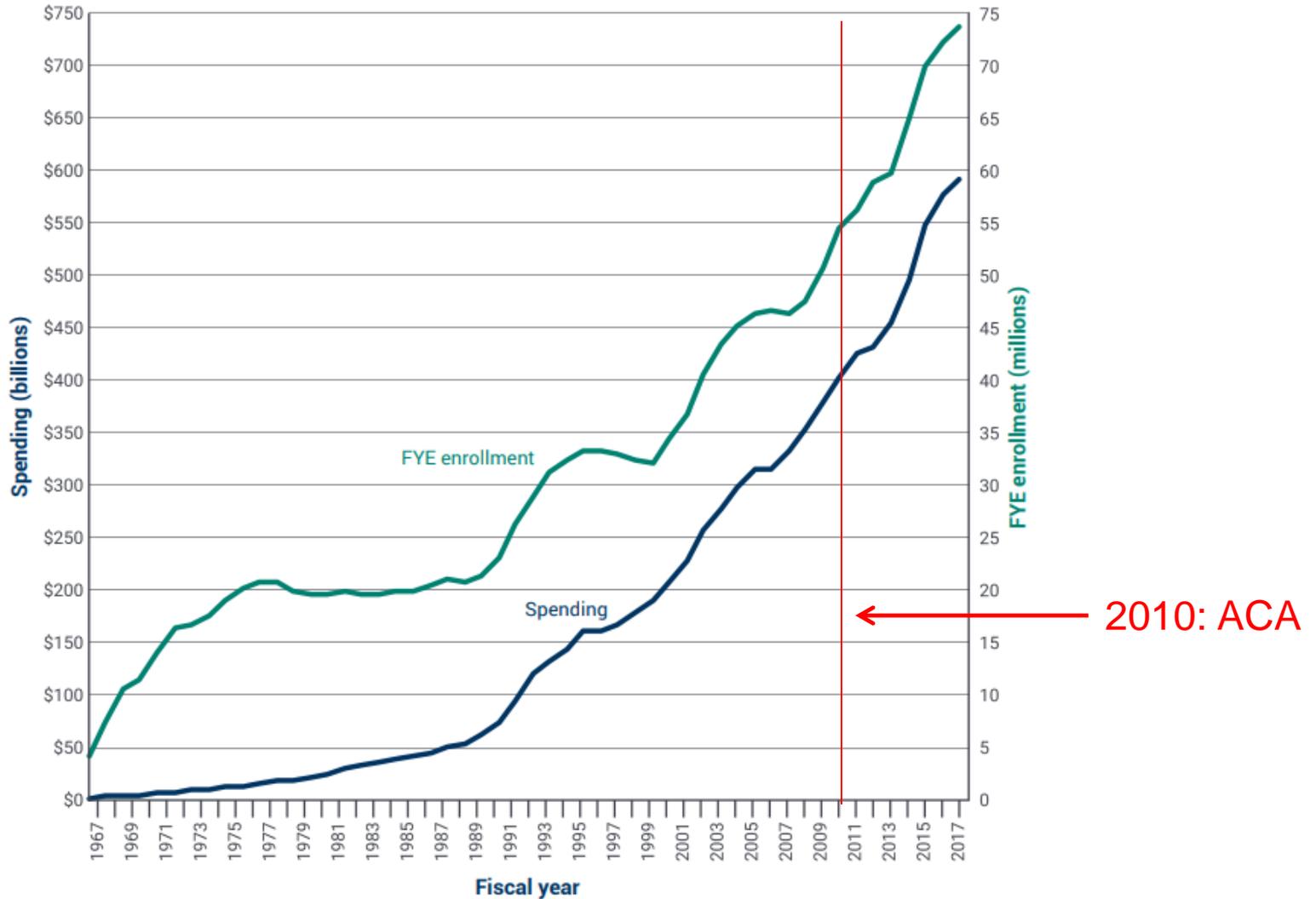
- Amanda Wik, M.A. - NRI
- Vera Hollen, M.A. - NRI
- Angela J. Beck, PhD, MPH - Behavioral Health Workforce Research Center, University of Michigan School of Public Health

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- Road to Improving Access
- Prevalence of COD
- Payment Sources
- Barriers to Integrated Treatment
- Mental Health Professional Shortage Areas
- Training Programs, Data Availability & Needs
- Innovations for Integrated Treatment
- Recommendations

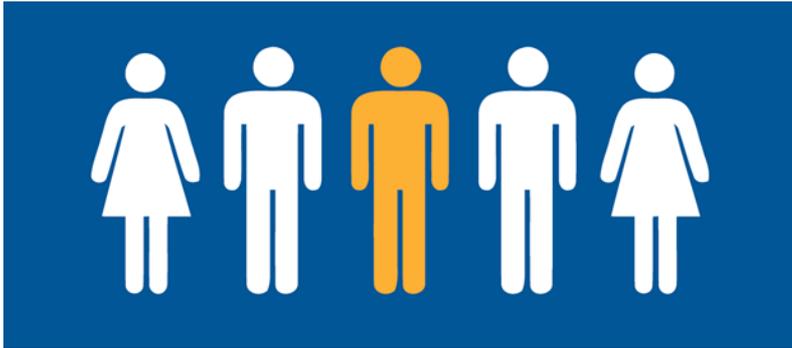
- 2008 - Mental Health Parity Addiction Equity Act
- 2010 – Affordable Care Act / Medicaid Expansion

Medicaid Enrollment and Spending: FYs 1966-2017

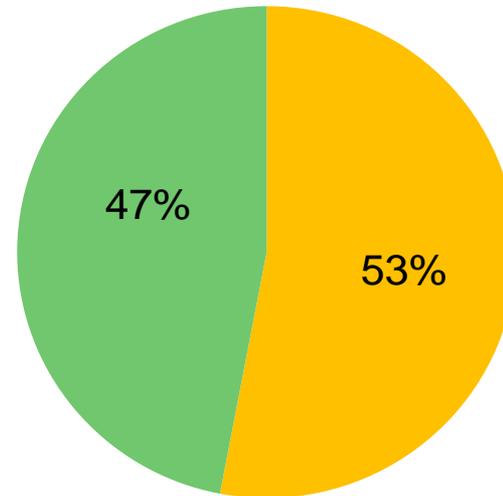


Source: MACStats: Medicaid and CHIP Data Book December 2018. Retrieved from <https://www.macpac.gov/publication/medicaid-enrollment-and-spending/>

1 in 5 Medicaid beneficiaries has a behavioral health condition

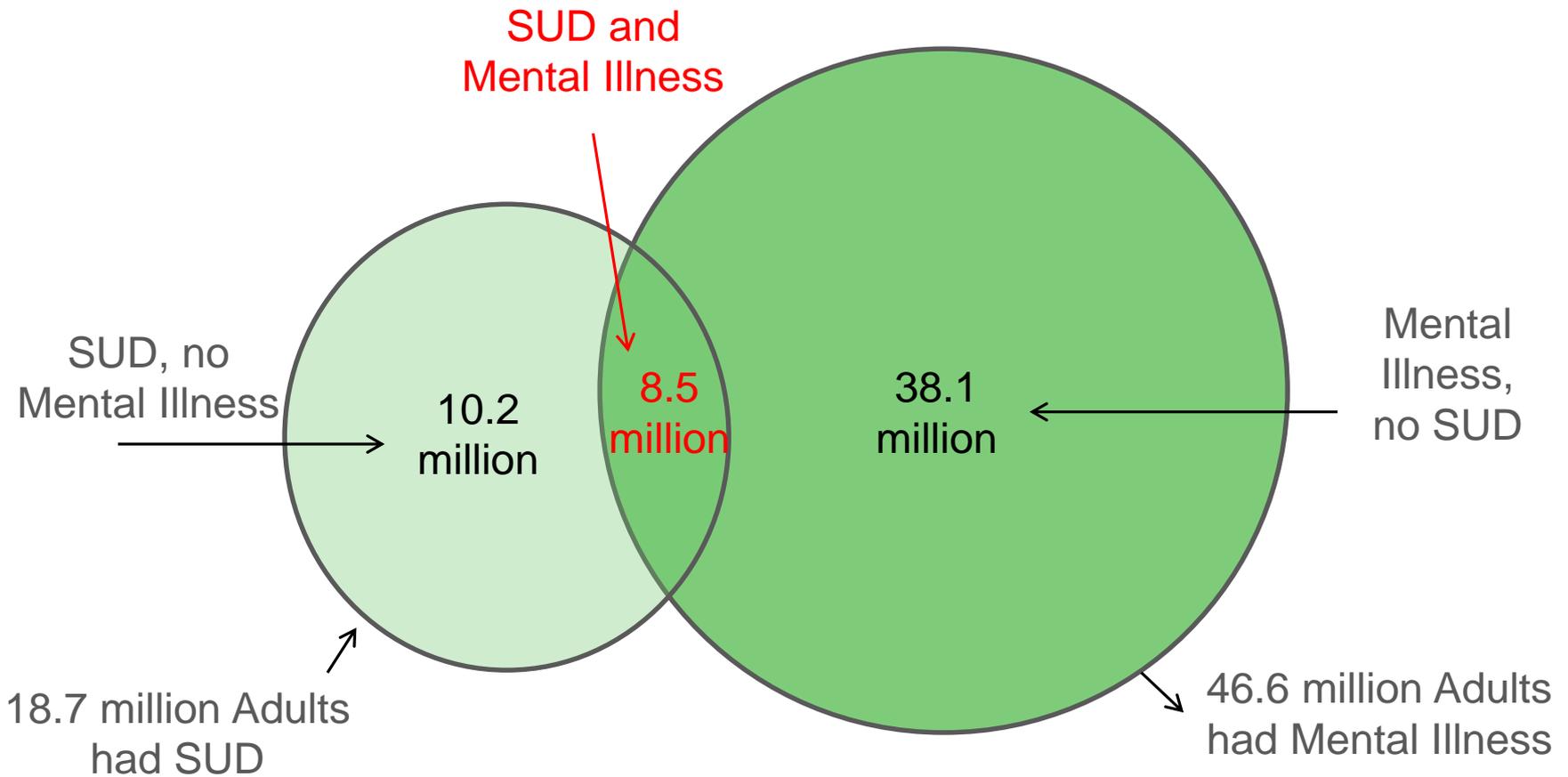


But accounts for more than half of total Medicaid expenditures for adults



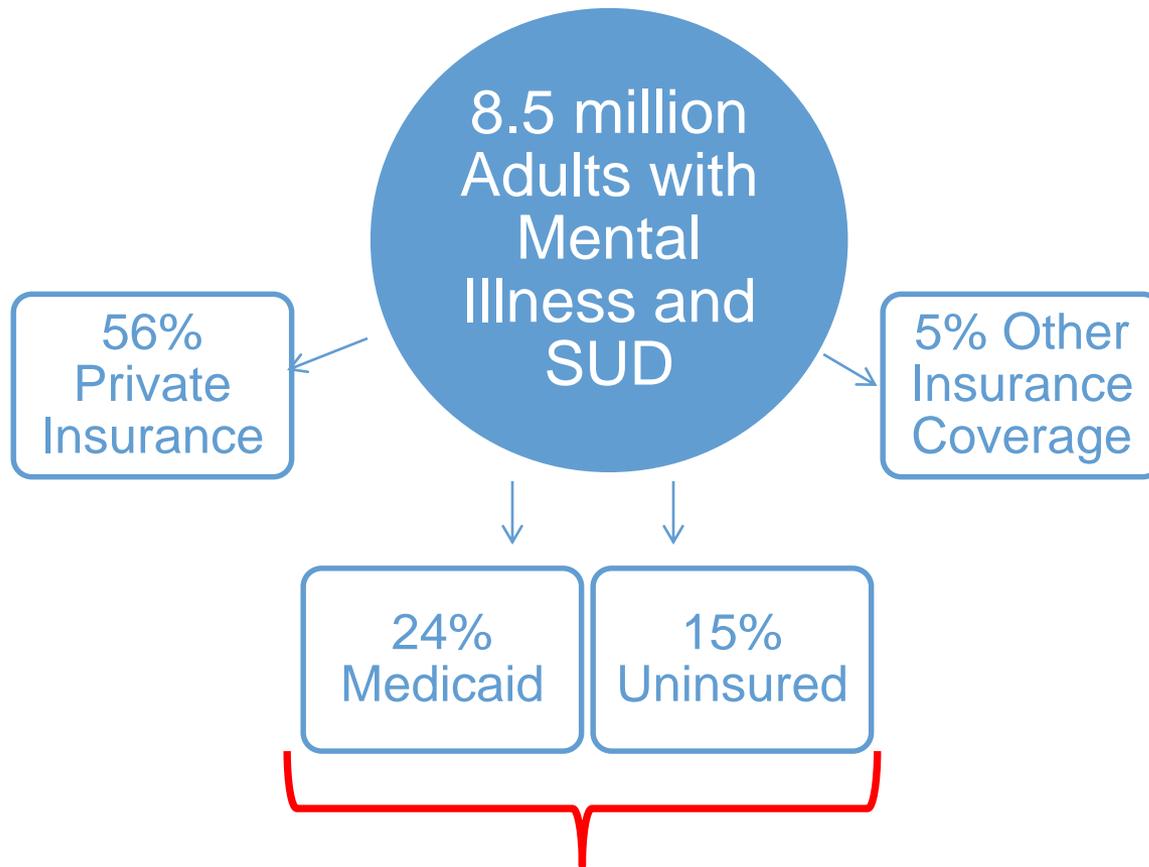
Source: MACPAC Report to Congress on Medicaid and CHIP, 2015. Retrieved from <https://www.macpac.gov/wp-content/uploads/2015/06/June-2015-Report-to-Congress-on-Medicaid-and-CHIP.pdf>

CO-OCCURRING MENTAL ILLNESS AND SUD, ADULTS AGE 18+, 2017



Source: Key substance use and mental health indicators in the United States: Results from the 2017 National Survey on Drug Use and Health, SAMHSA

PAYMENT SOURCES



Nearly 40% rely on public sector service providers

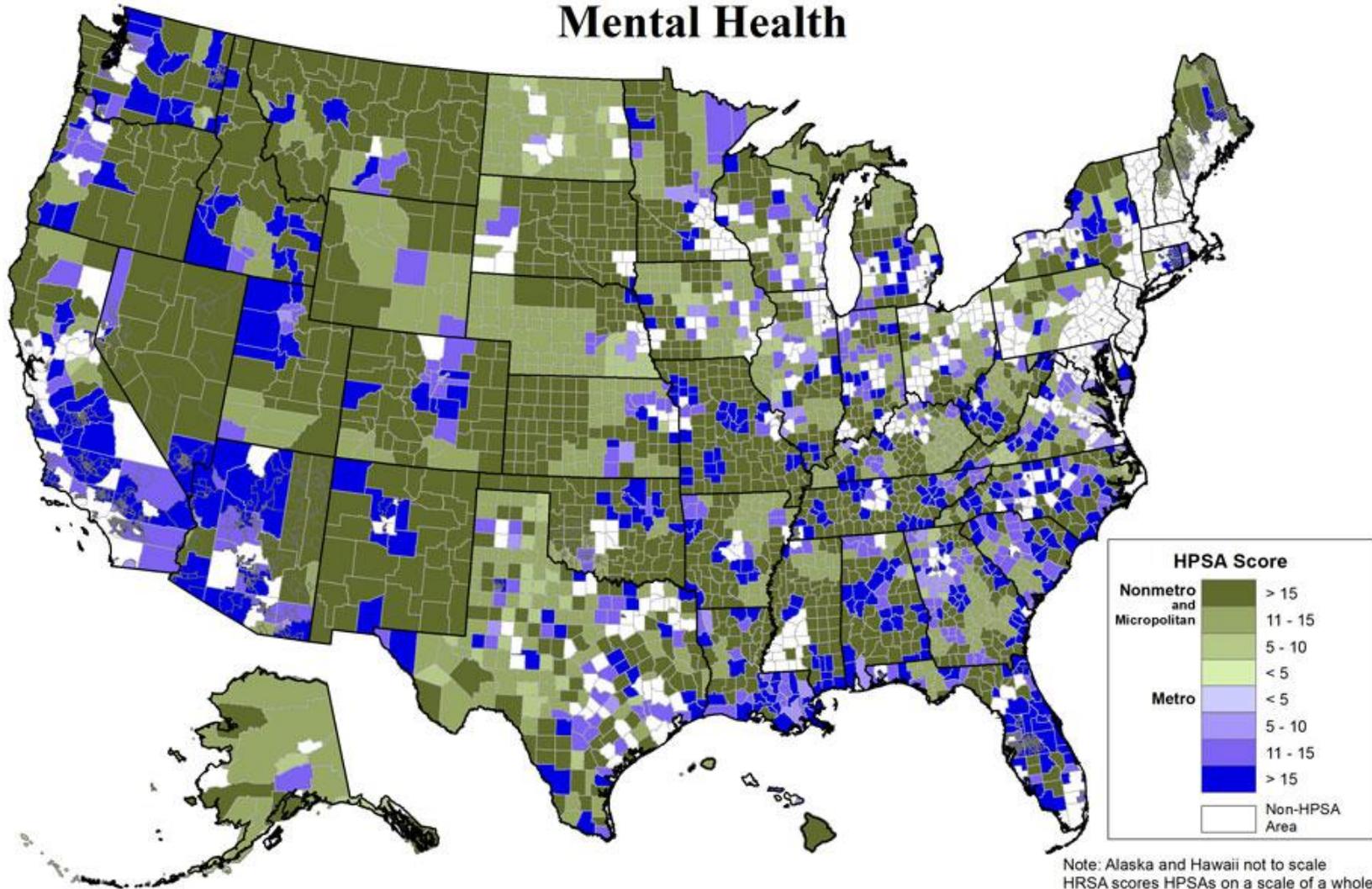
- Locating dually trained treatment providers is a challenge
- Insurance Coverage
- High cost of treatment
- Low provider reimbursement rates
- Shortage of medication prescribers

- Behavioral Health Workforce =
 - Licensed Clinical Providers
 - Certified Providers

 - Unlicensed Providers
 - Non-certified Provider

 - Other health professionals

Health Professional Shortage Areas Mental Health



Note: Alaska and Hawaii not to scale
 HPSA scores HPSAs on a scale of a whole number (0-25 for mental health), with higher scores indicating greater need

Source(s): data.HRSA.gov, U.S. Department of Health and Human Services, July 2019



TRAINING PROGRAMS

- Limited training in treating co-occurring disorders
- Few programs formally train on EBPs for COD
- No national credential for COD providers

- HRSA Behavioral Health Workforce Education and Training program

- Qualified training programs providing COD training
- Certificates, Certification or other Credential?
- Which entities or state licensing boards have info on COD training & specialty licenses or certifications?
- Searchable list and location of active COD providers & their practices

- University of Michigan's BH Workforce Research Center
 - National BH Workforce Minimum Data Set – standardized
 - Implementation Barriers & Potential

- Collaborative Care Models

- Free training from the APA

<https://www.psychiatry.org/psychiatrists/practice/professional-interests/integrated-care/get-trained>

- Certified Community Behavioral Health Clinics (CCBHC)

RECOMMENDATIONS

- Establish a nationally recognized professional credential for treating COD
- States expand the authority to prescribe medications to other qualified BH professions
- Develop a system to effectively track the U.S. BH workforce

Contact:

Tim Knettlar, MBA, CAE
Executive Director/CEO
NRI - National Association of State Mental Health Program Directors
Research Institute (NRI)
TKnettlar@nri-inc.org
703-738-8160