Revealing the "Right" Behavioral Health Solution

Making Sense of the Ecosystem to Transform Care

Introduction

Achieving optimal health cannot rely on improving physical health alone. Our holistic health journeys must nurture emotional resilience, a sense of well-being, and overall mental and physical health. Research conducted by the National Institute of Mental Health highlights the correlation between depression and an elevated risk of developing chronic physical conditions, such as diabetes and cardiovascular disease.[1] In fact, individuals with depression demonstrated a 1.5 times higher risk of 29 medical conditions, with the highest incidence of endocrine, musculoskeletal, and circulatory issues.[2] While efforts to address behavioral health have been prioritized in the United States, particularly in light of the COVID-19 pandemic, there are still existing barriers that contribute to gaps in care enabling the mental health crisis. Key barriers to consider include the following:

- Increased demand for quality mental healthcare services resulting from a growing need, coupled with the limited availability of high-quality mental health professionals.
- Financial barriers resulting from rising healthcare costs.
- Mental health disparities experienced by underserved communities and disadvantaged populations.
- Fragmented healthcare delivery system driven by continued lack of integration and bidirectional data exchange.

Building off the attention to these barriers during the pandemic, health plans have an opportunity to redesign how behavioral healthcare is delivered to their members. Consideration needs to be given to the creation of a care delivery ecosystem that embeds behavioral healthcare as a fundamental component of treating physical health.

Risk Strategies Consulting examined the current healthcare ecosystem and found that current fragmentation of care prohibits members of the healthcare system from achieving a holistic care experience. We are working with our clients and health plan partners to overcome the silos that exist in delivering behavioral and physical healthcare. Ultimately, the goal is to create an integrated ecosystem that results in early identification of behavioral health conditions, increased clinical alignment, accountability, transparency, and improved cost-effective quality patient outcomes.
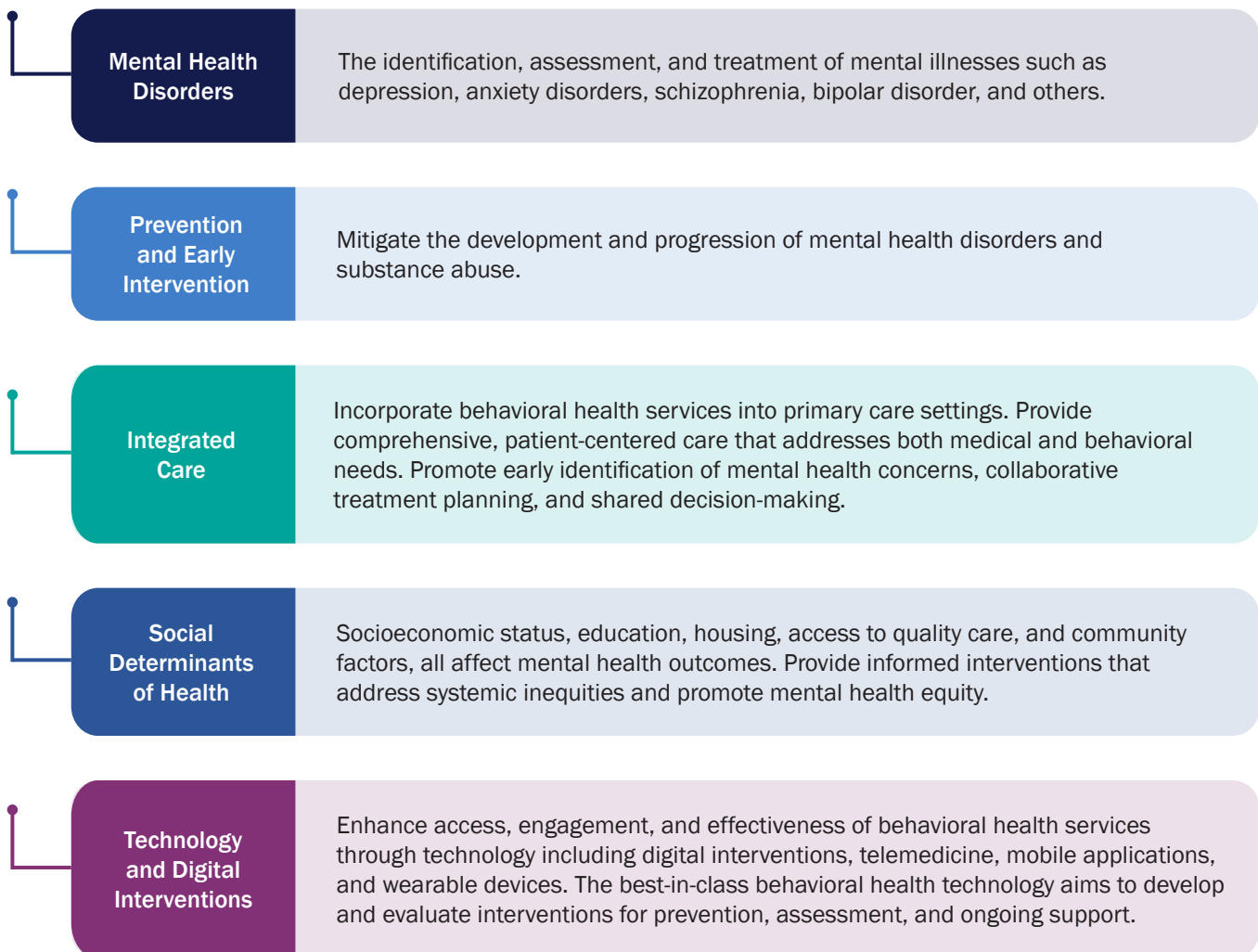
I. Defining Behavioral Health

Behavioral health refers to the branch of healthcare that focuses on the relationship between a person's behaviors, thoughts, and emotions and their overall well-being. It encompasses the prevention, diagnosis, and treatment of mental health disorders, substance abuse disorders, and other conditions that impact an individual's mental and emotional well-being.

The latest studies in healthcare recognize that behavioral health is not solely confined to mental illnesses but also encompasses a broader spectrum of conditions, including addictive behaviors, stress-related disorders, and lifestyle factors that influence health outcomes. Behavioral health emphasizes the interplay between biological, psychological, social, and environmental factors in shaping an individual's mental health. Key components of behavioral health include:

Mental Health Disorders	The identification, assessment, and treatment of mental illnesses such as depression, anxiety disorders, schizophrenia, bipolar disorder, and others.
Prevention and Early Intervention	Mitigate the development and progression of mental health disorders and substance abuse.
Integrated Care	Incorporate behavioral health services into primary care settings. Provide comprehensive, patient-centered care that addresses both medical and behavioral needs. Promote early identification of mental health concerns, collaborative treatment planning, and shared decision-making.
Social Determinants of Health	Socioeconomic status, education, housing, access to quality care, and community factors, all affect mental health outcomes. Provide informed interventions that address systemic inequities and promote mental health equity.
Technology and Digital Interventions	Enhance access, engagement, and effectiveness of behavioral health services through technology including digital interventions, telemedicine, mobile applications, and wearable devices. The best-in-class behavioral health technology aims to develop and evaluate interventions for prevention, assessment, and ongoing support.

By focusing on key components, behavioral health professionals and health plans can provide holistic care that promotes mental health well-being, reduces the burden of mental health disorders, and improves overall health outcomes. An integrated healthcare ecosystem refers to a comprehensive and interconnected network of healthcare providers, systems, technologies, and services that collaborate and work together to deliver coordinated and patient-centered care.

II. Benefit Design

Risk Strategies Consulting understands benefit designs for self-funded employer groups can be complex. The need to simplify the process to maximize the value of our client's healthcare investments is mission-critical! Every employer is unique, and benefit design should align with the company's goals, budget, and employee needs. The importance of an integrated benefit ecosystem has grown significantly due to the rising demand for comprehensive ancillary and voluntary benefits that are crucial for retaining and attracting talent. Navigating a benefits ecosystem can indeed be a perplexing experience for employees in mid to large employer groups. Such organizations often provide a wide range of benefits to their employees including health insurance, retirement plans, paid time off, flexible spending accounts, wellness programs, and more. While these benefits are intended to support and enhance the employee experience, the complex nature of the ecosystem can lead to confusion and uncertainty. According to the most recent McKinsey Employer Health Benefits Survey, more than 70 percent of employers work with three or more benefit vendors.[3]

Risk Strategies Consulting works with each client to understand the healthcare needs and demographics of their members through data mapping and creates a detailed ecosystem schematic for a more simplistic review. We conduct an assessment of the ecosystem to identify any instances of duplicated services. Using these strategies, we can develop tailored solutions that balance mental and physical health benefits within an ecosystem in alignment with the unique needs of the employer.

III. Access Evolution

"Access to Care Resolution" is an article published by the National Association for Behavioral Healthcare (NABH) in March 2019.[4] This article outlines the challenges patients with behavioral health conditions face and the environment created by managed care organizations that often restrict access to medically necessary care. Three years after the start of the COVID-19 pandemic, the nationwide challenge of patients accessing quality behavioral healthcare still exists.

Mental Health America published "The State of Mental Health in America" providing the following information about disparities individuals are facing in 2023:[5]

50 MILLION Americans experience a mental illness but over half of them do not receive treatment.

Almost a third **(28.2%)** of the adults with mental illness reported they did not receive care because they could not afford it.

There are **350** individuals for every one mental health provider in the U.S.

OVER 1 IN 10 youth in the U.S. are experiencing depression that is severely impairing their ability to function at school or work, at home, with family, or in their social life.

Nationally, **1 IN 10** youth who are covered under private insurance do not have coverage for mental or emotional difficulties.

As a solution, some national, self-funded employers have turned to behavioral health point solutions to provide quick access to a clinically robust behavioral health network. Though point solutions have driven more timely access to care, they are often a carve-out medical solution and not integrated with the medical carrier and ecosystem. This prohibits either party (point solution or carriers) from having a holistic patient view. Point solutions are not well equipped to manage patients throughout the entire behavioral health continuum. For example, patients with chronic medical illnesses (cancer or musculoskeletal diagnoses) that have a high probability to result in behavioral complications; are best managed by early intervention from the clinical management team within a health plan/medical carrier. Health plans have an opportunity to create a sophisticated healthcare ecosystem that will provide better behavioral healthcare and optimize health outcomes.

A sophisticated healthcare ecosystem leverages digital platforms to support both virtual and brick-and-mortar access to quality care and included medical and prescription data. This integration incorporates more comprehensive behavioral health access, ensuring a cohesive member care journey. This thorough design allows health plans to develop clinical protocols and individualized treatment plans that meet both physical and behavioral health needs. Though increasing the utilization of behavioral health point solutions and digital tools is a significant step in the right direction, medical carriers must continue working to align benefits. A thorough review of benefit design, provider geo-access, patient cost-sharing, and utilization management tools should be conducted to ensure that access to mental health benefits is aligned with physical health benefits.

IV. Behavioral Health Rights

Improving access to behavioral healthcare improves the patient's chances of receiving the right care, at the right time, and in the right setting. Understanding these three pillars is critical to designing a benefit that will optimize the treatment of mental health. We would be amiss if we did not also include a fourth right, which is human rights. Humans have the right to care that matches their needs. Receiving care for a mental health condition should not be frustrating or difficult. If individuals experience repeated days of mental unhealth without the right care, they are at risk for physical health problems that increase the chances of morbidity and mortality. Conditions such as depression and anxiety can affect an individual's thoughts and habits, and if not treated can also affect sleep. Sleep deficiency can significantly impact cognitive functioning, making it challenging to make decisions, solve problems, regulate emotions and behavior, and adapt to change. Studies show that people who are sleep deficient are less productive at work and school. In fact, a study conducted by the Sleep Foundation found that the diminished productivity and motivation from being sleep-deficient could cost employers an estimated annual cost of $1,967 per employee.[6]

Access to the right behavioral health treatment is instrumental in enhancing an individual's quality of life. Establishing an early and accurate treatment plan the patient is comfortable with is crucial to their long-term health. In addition, removing barriers that are known to impact a patient's ability to adhere to the treatment plan must be considered and addressed upfront and throughout treatment.

i. Right Care

An essential piece of behavioral health treatment is obtaining an accurate and timely diagnosis which will drive the long-term treatment plan. Behavioral healthcare is complex, and people are often faced with finding a provider that they are comfortable with and trust. In the U.S., behavioral and mental health stigmas can make adults less likely to seek help.[7] Providing the right care for any patient must include behavioral health professionals with specified expertise designed to match the needs of various patient types. Studies have shown the lack of cultural acknowledgment and ethnic factors by a provider or care team could contribute to the underdiagnosis or misdiagnosis of mental illness. Collaborative partnerships between providers and health plans should improve compliance/adherence, hasten recovery times, and optimize clinical outcomes.

ii. Right Time

For a person living with a behavioral health diagnosis, the consequence of delaying treatment can be dangerous. Health plans must put in place intelligent models that can work to identify and engage patients earlier. This includes predictive analysis that recognizes a patient's behavioral health needs for pre-acute and post-acute encounters. It is critical to embed touch points throughout the care journey to acknowledge and close both medical and behavioral health gaps in care.

iii. Right Setting

Behavioral health treatment must be available across the entire healthcare continuum. This includes inpatient, residential, partial hospitalization for urgent care, intensive outpatient, and recovery support services. Family and peer support services, especially for substance use disorder resolutions are also critical. With the spike in behavioral health needs came a particularly disturbing creation of lower acuity interventions from digital applications. The American Psychiatric Association estimates there are more than 10,000 mental health applications available, with only a few being FDA approved.[8]

With the implementation of a sophisticated healthcare ecosystem, health plans will be well-positioned to address needed behavioral health services and make proper adjustments to the level of care as individualized treatment plans evolve. For instance, during pre-admission outreach calls by care management teams, anxiety related to patients getting substantial, acute, and chronic care should be assessed. Additionally, behavioral health touchpoints should be implemented upon discharge with both the patient and family.
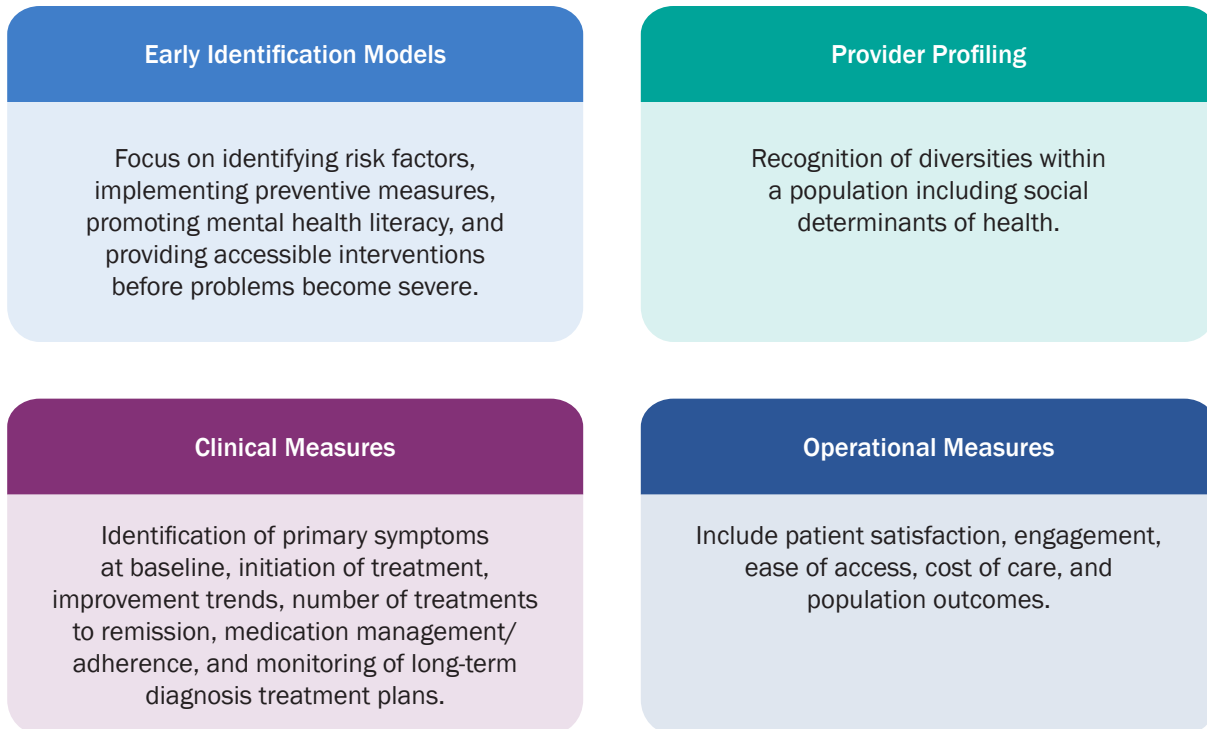
The right care enables the creation of the right ecosystem. This bidirectional, data-driven solution allows health plans to capture multiple events and weave them together to appropriately treat the whole person. Solutions in the market today lack this visibility and miss vital opportunities throughout a member's care journey.

V. Defining Quality

Behavioral healthcare encompasses all areas of a person's life and influences a person's general well-being. To provide quality behavioral healthcare, it is important to first align with data-driven measurements, which can be tracked throughout a person's healthcare journey. All solutions offered in the market claim success, but there is no cohesive solution nor the ability to measure success. The development of quality initiatives should include:

Early Identification Models

Focus on identifying risk factors, implementing preventive measures, promoting mental health literacy, and providing accessible interventions before problems become severe.

Provider Profiling

Recognition of diversities within a population including social determinants of health.

Clinical Measures

Identification of primary symptoms at baseline, initiation of treatment, improvement trends, number of treatments to remission, medication management/adherence, and monitoring of long-term diagnosis treatment plans.

Operational Measures

Include patient satisfaction, engagement, ease of access, cost of care, and population outcomes.

The creation of these measures aims to improve diagnostic techniques, develop evidence-based interventions, and enhance the understanding of underlying treatment mechanisms. Development and reporting on these measures will enhance the opportunities presented by integrating behavioral health and prove the return on investment to key stakeholders.

The Bottom Line

The key to transforming behavioral healthcare is leveraging the incredible array of data health plans have at their fingertips to forge new relationships, allowing for early interventions, and multiple touch points to address behavioral health needs. Access to a wide range of data provides the opportunity to apply analytics to the data and produce a holistic view that drives optimal behavioral and physical outcomes. Developing a comprehensive behavioral health solution that puts patients and their families first is the only way to end the behavioral health crisis.

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