

Virginia: Advancing Mental Health

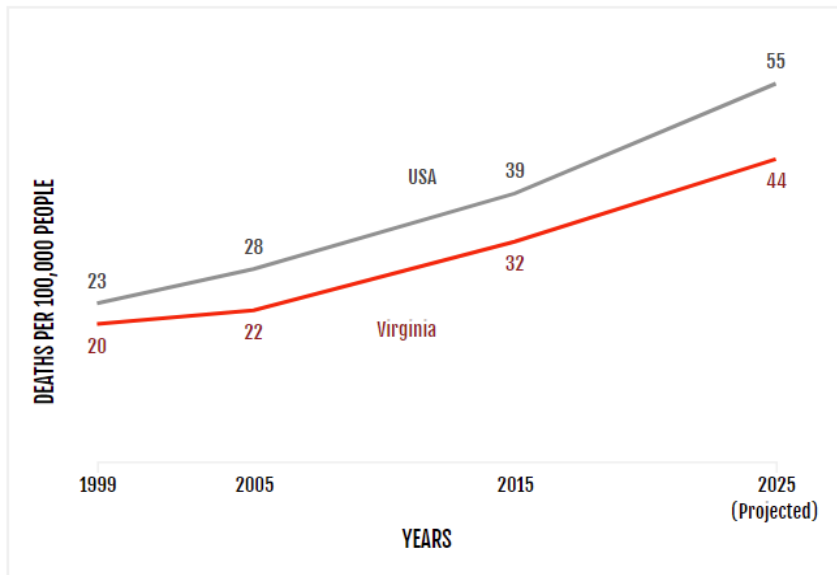
Farley Health Policy Center

The Themes

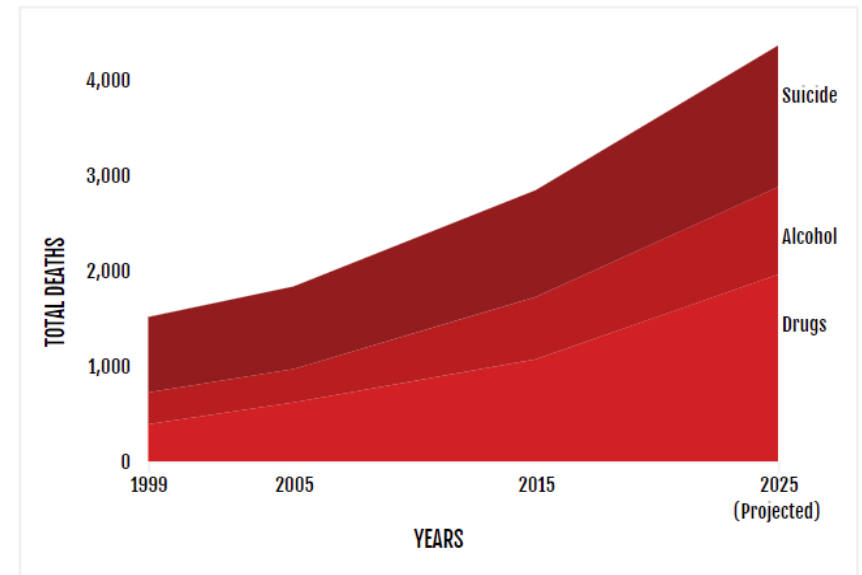
1. Alignment and integration
2. Standards and accountability
3. Multiple entry points to ease access



Deaths due to Alcohol, Drugs and Suicide per 100,000 people, Virginia and USA



Alcohol, Drugs and Suicide deaths in Virginia: 1999 to 2015, and 2025 projected



Pain in the Nation, 2017

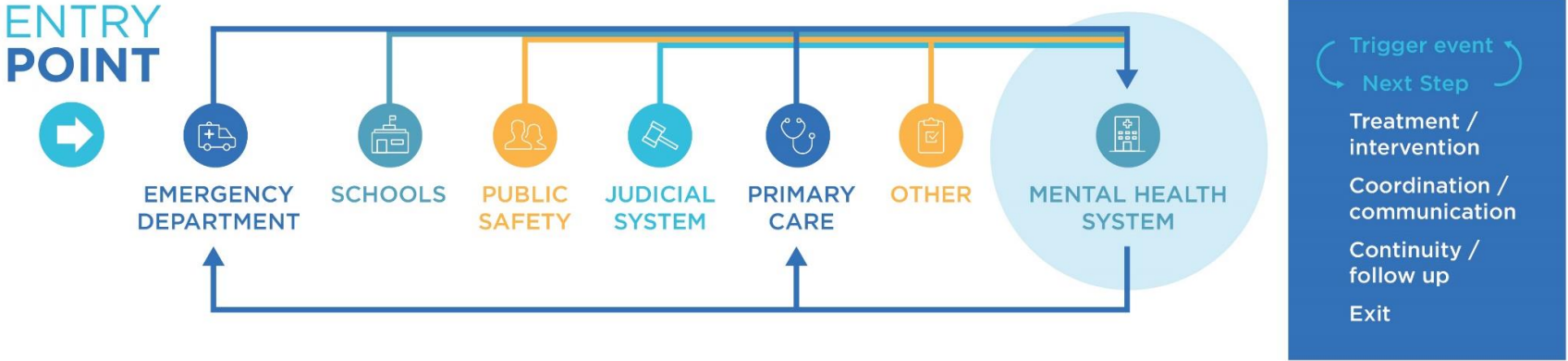


Medicaid matters

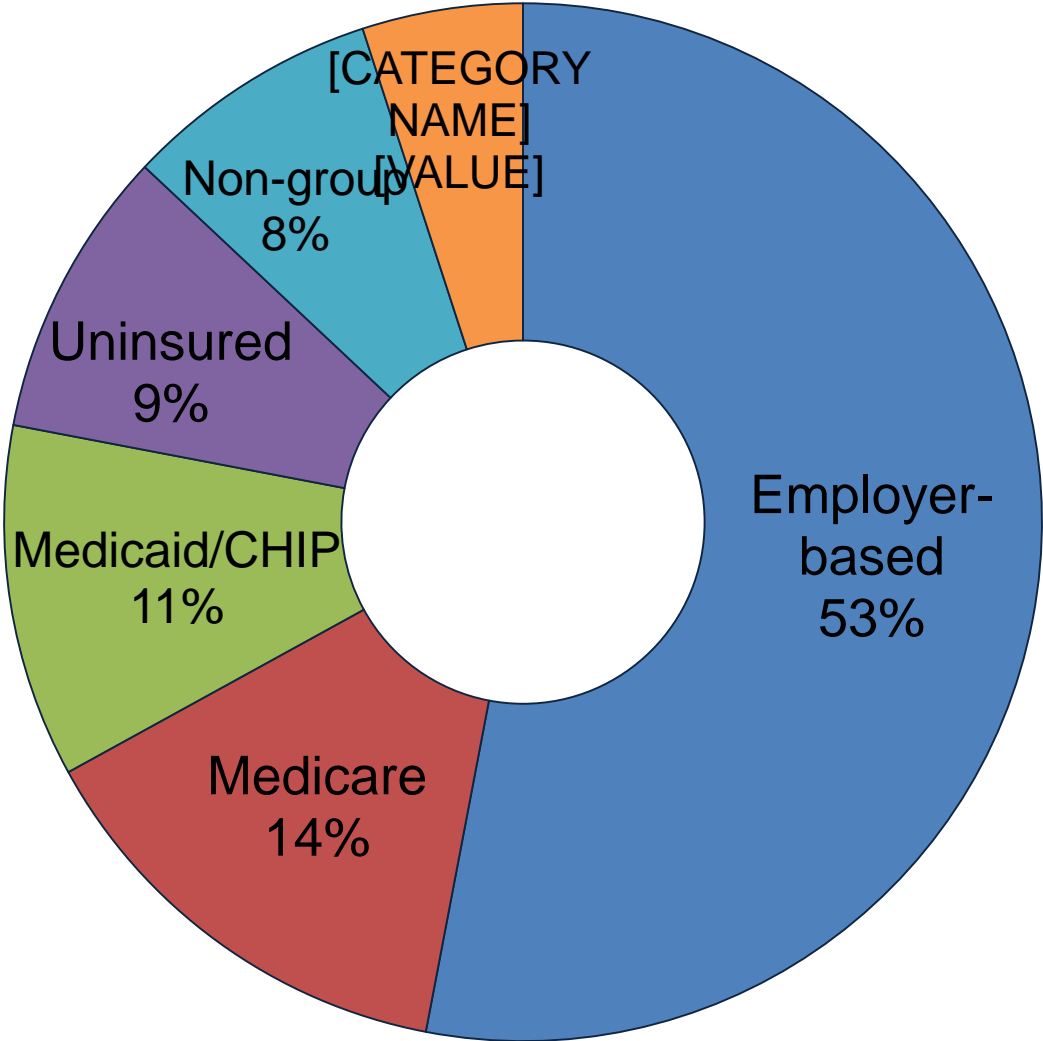
- Medicaid is the single largest payer in the United States for behavioral health services, including mental health and substance use services.
- Medicaid accounted for 26 percent of behavioral health spending in 2009.
- Medicaid enrollees with behavioral health diagnoses have varied physical and behavioral health needs. They range from young children who need screening, referral, and treatment for attention deficit hyperactivity disorder or depression to chronically homeless adults with serious mental illness.
- In 2011, one in five Medicaid beneficiaries had behavioral health diagnoses but accounted for almost half of total Medicaid expenditures, with more than \$131 billion spent on their care (including physical, behavioral, and other Medicaid-covered services).



Our challenge and our solution



Virginia Insurance Coverage - 2015



Kaiser Family Foundation estimates based on the Census Bureau's March Current Population Survey (CPS: Annual Social and Economic Supplements), 2015.

Method

- Department of Medical Assistance Services (DMAS)
 - Claims Data from Fiscal Year 2017
- Department of Behavioral Health and Developmental Services
 - Psychiatric Free Standing Hospitals
 - State-funded BH Facilities
 - CSB Locations and Service Areas
- Department of Health
 - Population Health Outcomes, 2015
 - Mortality Rates
 - BH Outcomes including Self-Reported MH Status and many others

Aggregate Data – No Inference Intended on Individual Level



Virginia Medicaid – Context of our Population

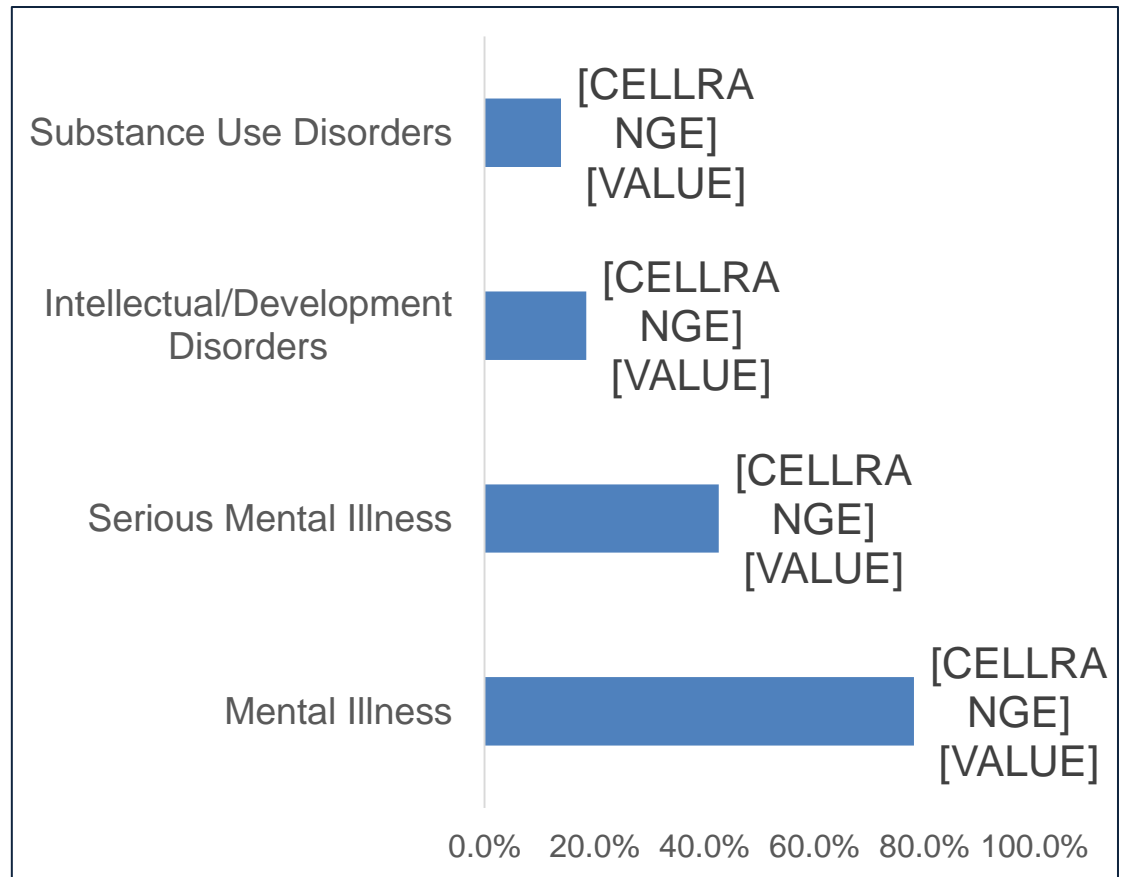
- 8.4 million Virginians – July 2016 estimate
- Average annual cost per monthly enrollee FY17- \$8,597

	Medicaid	Medicaid/CHIP
No. (%) Enrolled - FY 2016	991,112 (11.8%)	1.099 million (13.1%)
No. (%) Enrolled - FY 2017	1.011 million (12.0%)	1.125 million (13.4%)
Total Expenditures- FY 2016	\$8.86 billion	\$9.11 billion
Total Expenditures- FY 2017	\$9.37 billion	\$9.67 billion



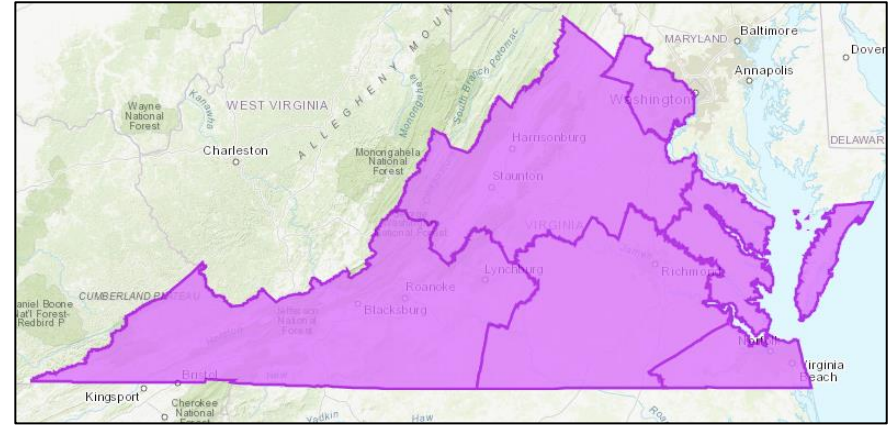
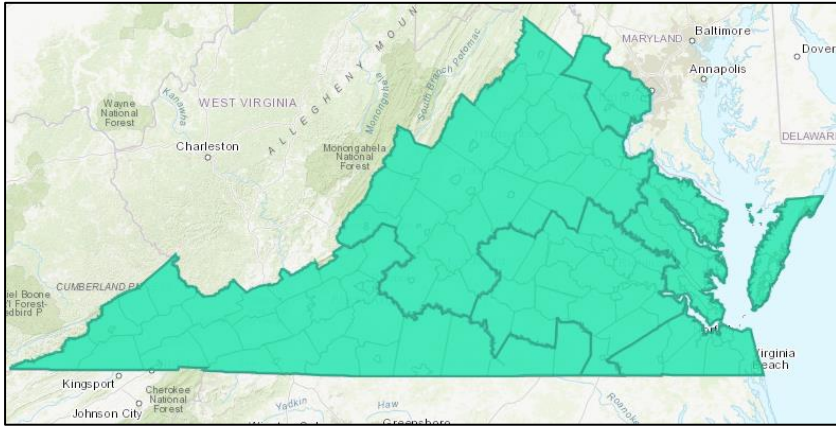
Behavioral Health Population: Medicaid

- Total BH Recipients in FY17- 386,305; 28.1% of total Medicaid Recipients – 1.37 million
- Data reflects # and % individuals for whom a claim was paid for medical services for those with BH condition
- Recipients can be diagnosed with more than one BH condition



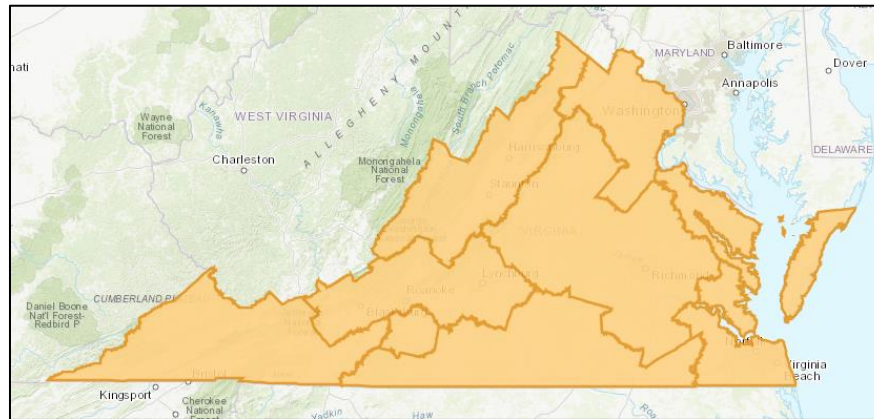
ALIGNMENT





DBHDS

VDH







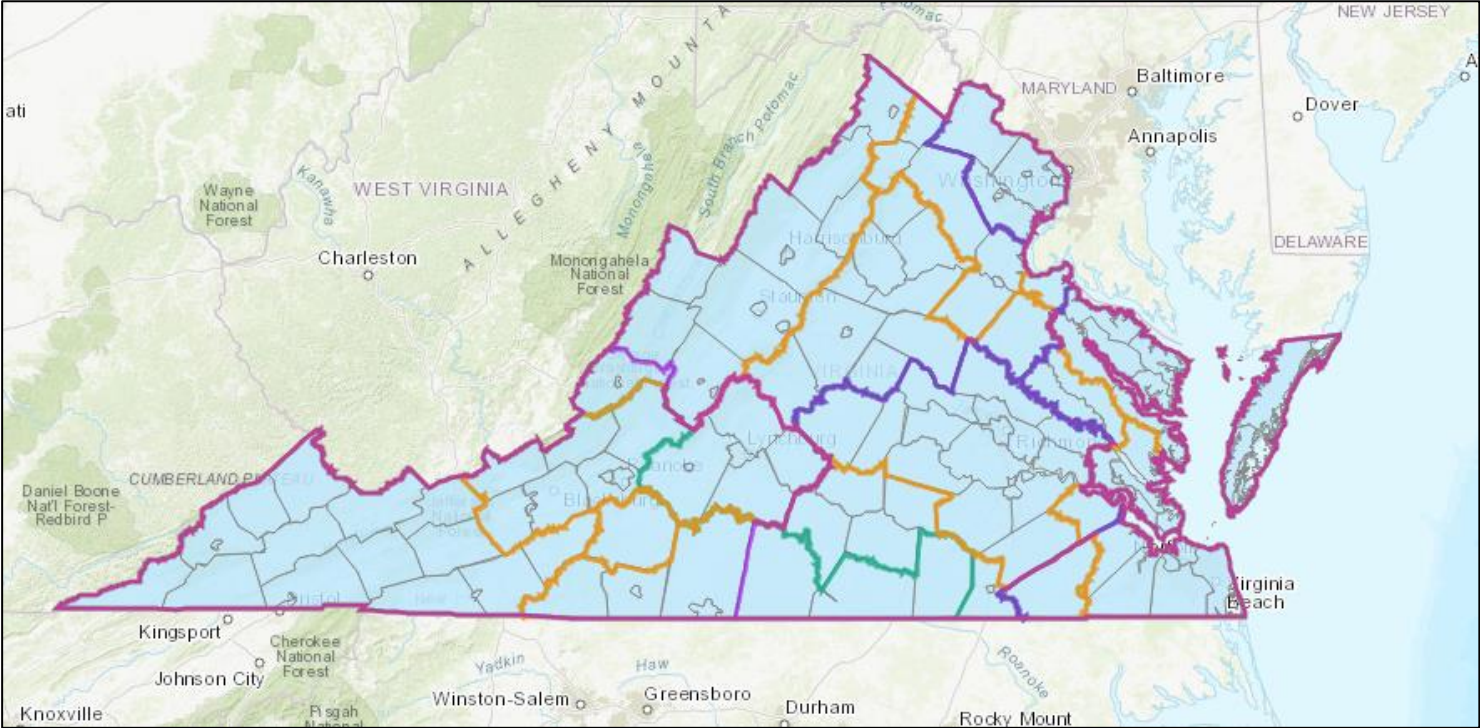
DMAS



Alignment

Legend

- VDH Regions**

- DMAS Regions**

- DBHDS Regions**

- Virginia Jurisdictions**




STANDARDS AND ACCOUNTABILITY



Medicaid Expenditures FY17

	\$	% of Total
Total Claims Expenditures	\$9,218,133,404	100
FFS	\$5,541,560,106	60.1
Long-Term Care	\$2,684,481,133	29.1
Acute Care	\$1,836,635,717	19.9
Mental Health Services	\$862,339,335	9.4
Case Management	\$158,103,920	1.7
Capitated	\$3,676,573,298	39.9
MCO	\$3,614,153,779	39.2
PACE	\$62,419,519	0.7



Fee For Service Behavioral Health Service Expenditures FY17

	\$	% of Total
Mental Health Services	\$862,339,335	100
Mental Health Skill Building Services	\$252,678,903	29.3
Therapeutic Day Treatment	\$187,116,301	21.7
Other BH Services	\$151,843,988	17.6
Intensive In-Home Treatment	\$127,614,235	14.8
Residential Treatment Centers - Levels A/B/C	\$110,209,774	12.8
Mental Hospital -State	\$31,299,362	3.6
Mental Hospital- Private	\$1,576,774	0.2

Other BH Services include EDPST Specialty Services, Therapeutic Group Home Services, Crisis Stabilization Services, Crisis Intervention Services, Psychosocial Rehabilitation Services, MH Case Management and Day Treatment/Partial Hospitalization



Cost and Type of Community Mental Health Service

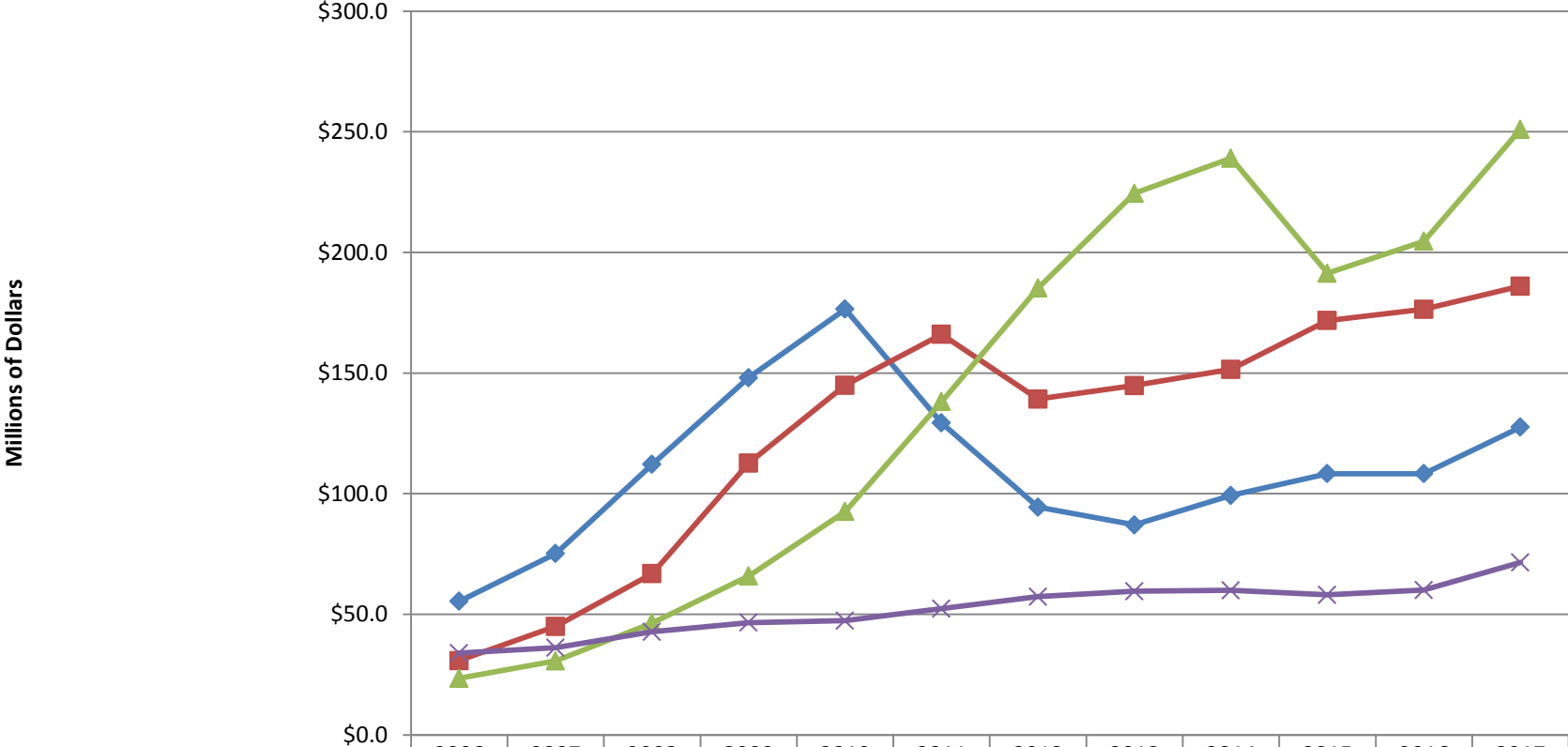
Type of Community MH Service	Total Expenditures	% of Total
Mental Health Skill Building	\$250,995,665	39.5
Therapeutic Day Treatment	\$186,000,194	29.2
Intensive In-Home	\$127,614,235	20.1
Psychosocial Rehab	\$29,968,435	4.7
Crisis Stabilization	\$20,645,574	3.2
Intensive Community Treatment	\$13,024,735	2.0
Crisis Intervention	\$4,682,024	0.7
Other	\$3,220,495	0.5
Total	\$636,151,356	100



Other BH Services include EDPST Specialty Services, Therapeutic Group Home Services, MH Case Management and Day Treatment/Partial Hospitalization

Community Mental Health Services Spend Over Time

Total Expenditures on Community Mental Health Services

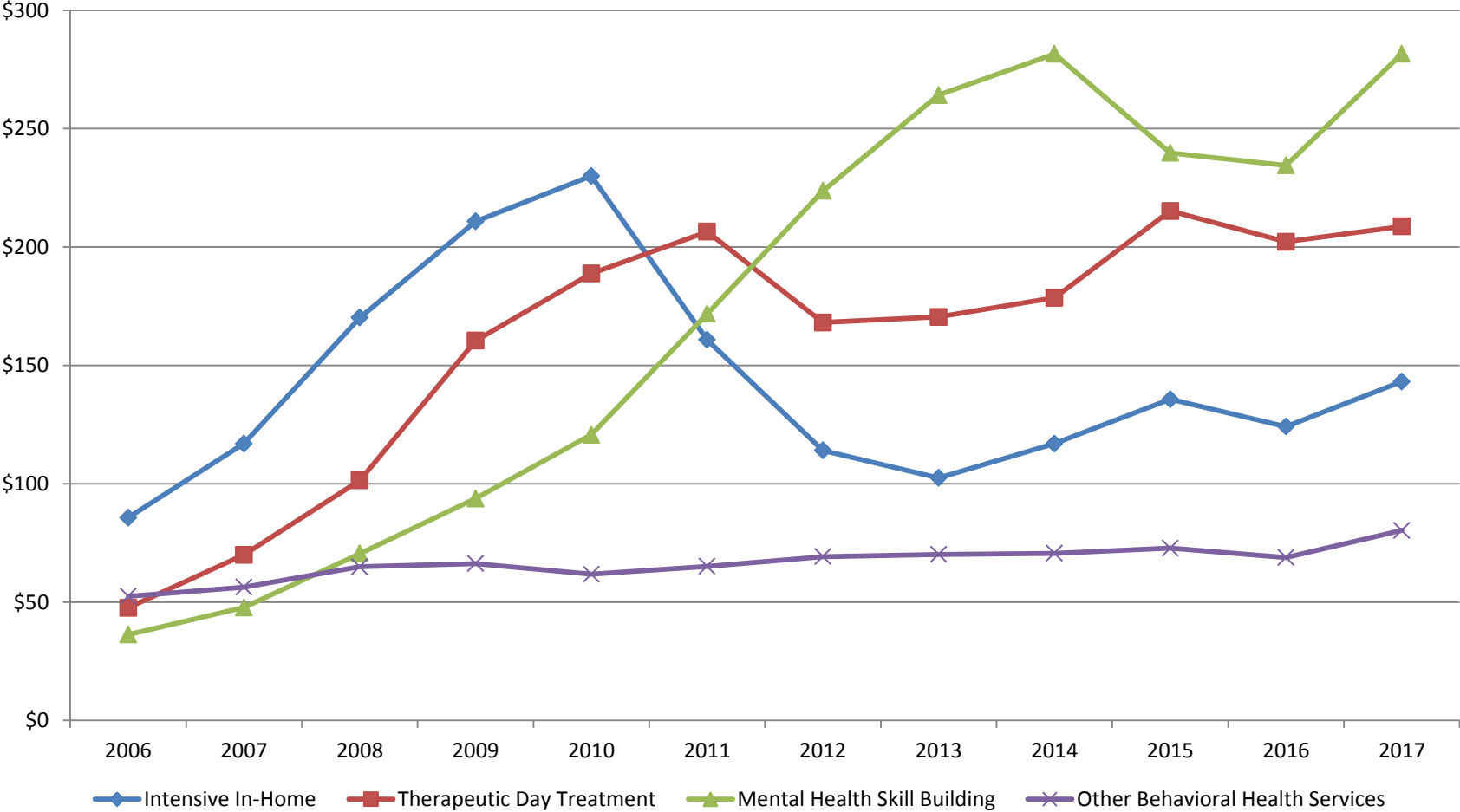


	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
◆ Intensive In-Home	\$55.4	\$75.2	\$112.1	\$148.0	\$176.5	\$129.3	\$94.4	\$87.1	\$99.3	\$108.3	\$108.3	\$127.6
■ Therapeutic Day Treatment	\$30.8	\$45.0	\$66.8	\$112.7	\$144.9	\$166.1	\$139.2	\$144.9	\$151.6	\$171.8	\$176.5	\$186.0
▲ Mental Health Skill Building	\$23.4	\$30.7	\$46.4	\$65.8	\$92.6	\$138.2	\$185.3	\$224.5	\$239.1	\$191.4	\$204.6	\$251.0
× Other Behavioral Health Services	\$33.9	\$36.2	\$42.8	\$46.5	\$47.4	\$52.4	\$57.3	\$59.6	\$59.9	\$58.1	\$60.0	\$71.5



Community Mental Health Services Spend Per Member Over Time

Community Mental Health Services Spend Per Member Per Year



Percentage of Total Medicaid Expenditures for Community MH Treatment Type: Non-CSBs vs CSBs

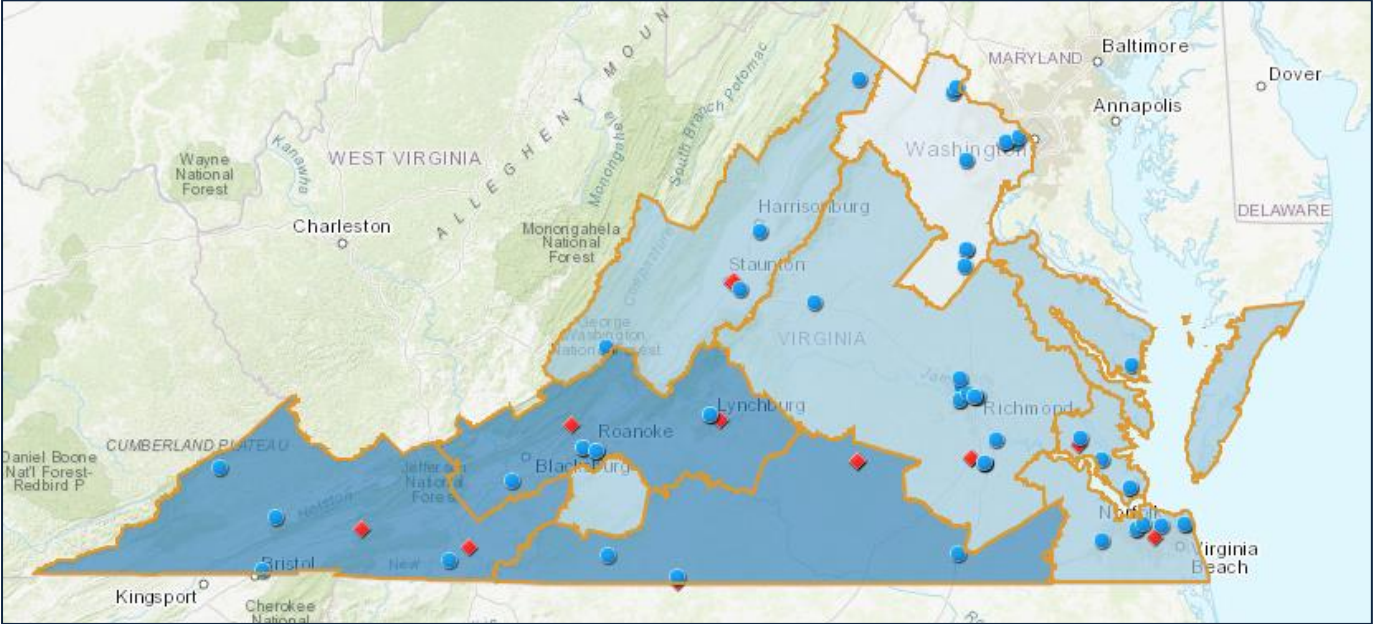
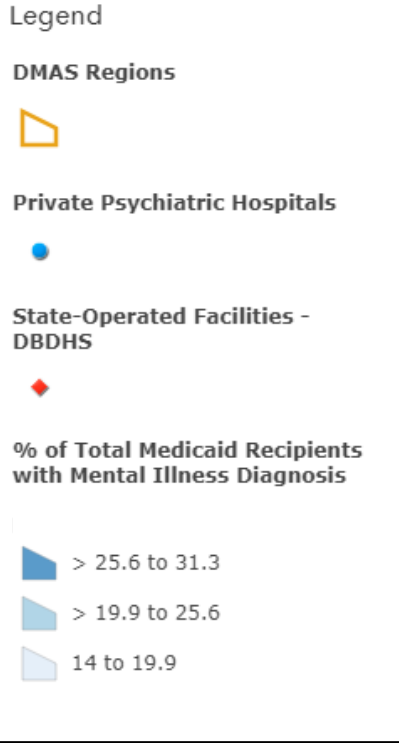
		Expenditures FY17	% of Total for Each Treatment
Intensive In-Home Treatment Total = \$127,614,235	Non-CSB	\$126,110,391	98.8%
	CSB	\$1,503,845	1.2%
Therapeutic Day Treatment Total= \$187,116,301	Non-CSB	\$143,557,814	76.7%
	CSB	\$43,558,487	23.3%
Mental Health Skill Building Services Total = \$252,678,903	Non-CSB	\$238,800,535	94.5%
	CSB	\$13,878,368	5.5%
Other Behavioral Health Services Total= \$71,171,203	Non-CSB	\$30,152,021	42.4%
	CSB	\$41,019,182	57.6%
EPSDT Specialty Services Total= \$80,672,785	Non-CSB	\$80,538,145	99.8%
	CSB	\$134,640	0.2%

Non-CSB refers to private providers

Other BH Services: Includes Psychosocial Rehabilitation, Crisis Intervention and Stabilization and Intensive Community Treatment



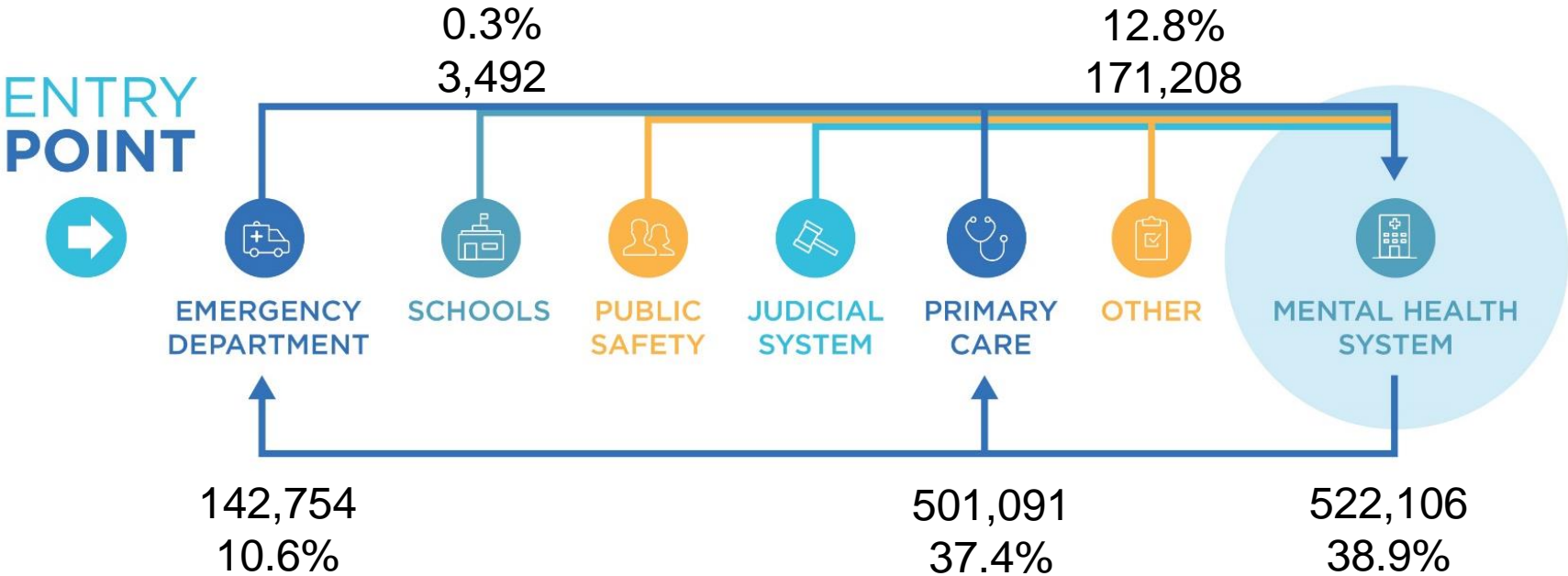
Prevalence of Mental Illness Diagnoses and Facility Location



MULTIPLE POINTS OF ACCESS



No Wrong Door - Virginia



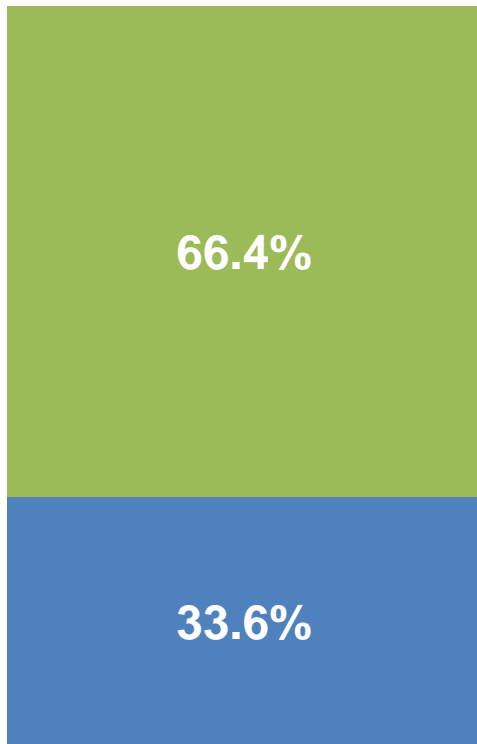
In FY2017, Medicaid recipients had 1,340,651 “behavioral health touches” across multiple care settings.



% of BH Prescriptions by Provider

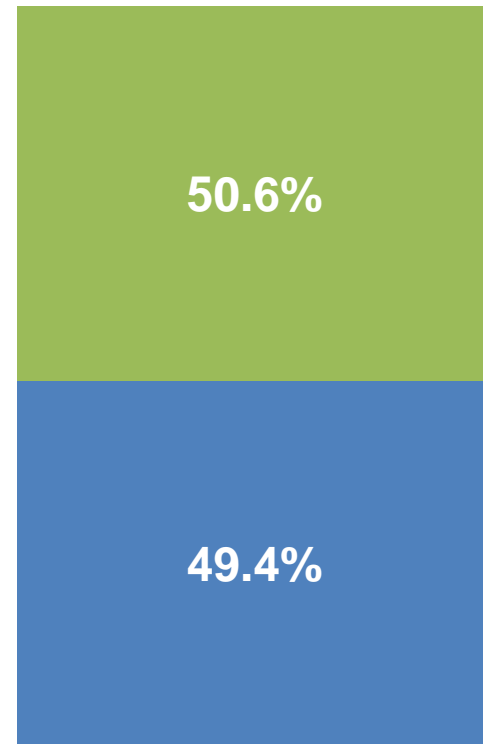
Psychiatric Prescriptions

■ BH Providers ■ Non-BH Providers



SUD Prescriptions

■ BH Providers ■ Non-BH Providers



BH Providers include Psychiatrists, Psychologists, LCSWs, Nurses, Nurse Practitioners and other Behavioral Health providers as classified by DMAS. Non-BH Providers include Physicians (mostly in Primary Care – Family Med, Pediatrics, Internal Med, Geriatrics), Nurses, Nurse practitioners and other medical professionals as classified by DMAS.

Our Goal

- Alignment and integration
- Standards and accountability
- Multiple entry points to ease access

