

HOSPITALS and Mental Health

Recent cuts to reimbursement and hospital tax hikes, the elimination of stateoperated mental health programs and services, and reductions to other community providers threaten to shred what remains of the mental health safety net at the very time Connecticut needs it most.

Each day, Connecticut hospitals treat children and adults in crisis. A lack of resources in the mental health system, however, means patients don't always receive the appropriate care in the appropriate setting at the appropriate time. Often their only recourse is to go to the emergency department (ED) – a highly stimulating and potentially stress-inducing environment, which can exacerbate a patient's condition rather than improve it. The problem is particularly acute for children and adolescents, for whom the need for services greatly outstrips the number of available beds and trained specialists.

Hospitals struggle to care for these patients and, while funding levels keep shrinking, the number of patients coming to hospitals for these services keeps growing.

The Role of Hospitals as Mental Health Caregivers

Every Connecticut hospital treats adults and children with mental health-related conditions. Some hospitals have dedicated inpatient mental health treatment programs. Others offer services through separate institutions within their healthcare system. Every hospital offers at least short- term inpatient services for individuals with mental health needs. Hospitals also deliver mental health services through outpatient clinics, crisis services, and EDs. EDs remain one of the major entry points into the mental health treatment system in Connecticut.

Opportunities for Innovation and Leadership

Connecticut hospitals are pursuing initiatives to improve behavioral healthcare for children and adults, including:

- Developing and implementing Community Care
 Teams (CCTs). CCTs are partnerships among hospitals
 and other community providers who meet regularly
 to address the needs of vulnerable patients, including
 those who are chronically mentally and/or physically ill,
 homeless, or abusing substances.
- Embedding mental health professionals in doctor's offices.

BY THE NUMBERS

MORE THAN 28%



More than 28% of all inpatient and ED visits to Connecticut hospitals were from patients with a diagnosis of a mental health disorder.

32%
INCREASE



Between FY 2010 and FY 2015, Connecticut hospitals experienced a 32% increase in patient visits with a mental health diagnosis.

21%
INCREASE



There were 33,346 hospital visits for mental health among children and young adults ages 0-19 in FY 2015. This represents a 21% increase in visits between 2010 and 2015 for this age group.



Several hospitals are locating mental health specialists in doctors' offices as a way to increase access to these services for patients.

- Using Telepsychiatry two-way real-time interactive audio and video equipment to provide clinical psychiatric care at a distance. Several hospitals are using technology to reach their psychiatric patients and improve health outcomes.
- Working with the Department of Children and Families (DCF) on Emergency Mobile Psychiatric Services (EMPS) to help resolve mental health crises at home, in school, or wherever help is needed.

CHA Mental Health Recommendations

CHA supports short- and long-term solutions to improve Connecticut's mental health system:

- 1. Redesign the Medicaid program to better support mental health services.
- 2. Improve access to state facilities and services by requiring disclosure of health outcome data and quality measures.
- Support Community Care Teams (CCTs) and related care coordination services.
- Assess and accommodate short- and long-term bed need for psychiatric patients.
- 5. Develop crisis stabilization and emergency services for children.
- 6. Adopt measures to combat prescription drug abuse.

The Legislature's Role in Improving Mental Health Services

Connecticut's mental healthcare system involves a complex array of state-operated and state-funded providers. This system

includes a number of state agencies, each with its own mission and constituency. For example, the Connecticut Behavioral Health Plan for Children found that children's mental health services are fragmented, inefficient, and difficult to access for children and families. It acknowledged the critically important role of hospital EDs in the behavioral health safety net supporting Connecticut children and families. Here is what the legislature can do to help:

- Mandate cooperation among all state agencies and providers. State government is both a provider of mental health services and a regulator of private care providers. Cooperation among all state agencies and collaboration with hospitals and other mental healthcare providers are essential to achieve our goals.
- 2. Support Funding for Community Care Teams (CCTs). A Legislative Program Review Committee report concluded that successful initiatives for frequent users of the ED with mental health disorders have more face-to-face client interaction, involve EDs in the development of patient care plans, monitor a patient's progress, and engage the patient in managing their mental health needs. CCTs have all these attributes. CCTs will improve patient outcomes, save Medicaid dollars by reducing ED visits, reduce overcrowding in EDs, relieve pressure on hospital staff and other community providers, and demonstrate genuine regional collaboration.
- Increase Medicaid reimbursement for mental health services. Raising Medicaid reimbursement rates for mental health services would better ensure hospitals and other providers are able to provide access to mental health care for all who need it.
- 4. Implement a comprehensive statewide strategy to reduce prescription drug and heroin abuse. A statewide strategy must expand the availability of overdose reversal drugs, create effective prevention programs, improve the prescription drug monitoring system, provide insurance coverage for treatment, and establish sufficient facilities to treat people suffering from drug addiction.

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