

2020 Annual Forum

Early Learnings from the Path Forward on Mental Health & Substance Use Monday, November 9, 2020 | 3:45 PM – 4:45 PM ET



Darcy Gruttadaro
MODERATOR
Director
APAF Center for
Workplace Mental
Health



Henry Harbin, MD
Senior Advisor to The
Path Forward, former
CEO of Magellan
Health Services
The Path Forward for
Mental Health &
Substance Use



Colleen McHugh
President and
Executive Vice
President
Health Care Policy
Roundtable and
American Health
Policy Institute



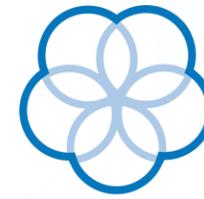
John Miller
Executive Director
MidAtlantic Business
Group on Health



Deb Krause
Regional Strategic
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Minnesota Health
Leadership Council



#NatAllForum



The Path Forward

for mental health and substance use

Health Equity for all Americans

Early Learnings from the Path Forward on Mental Health & Substance Use

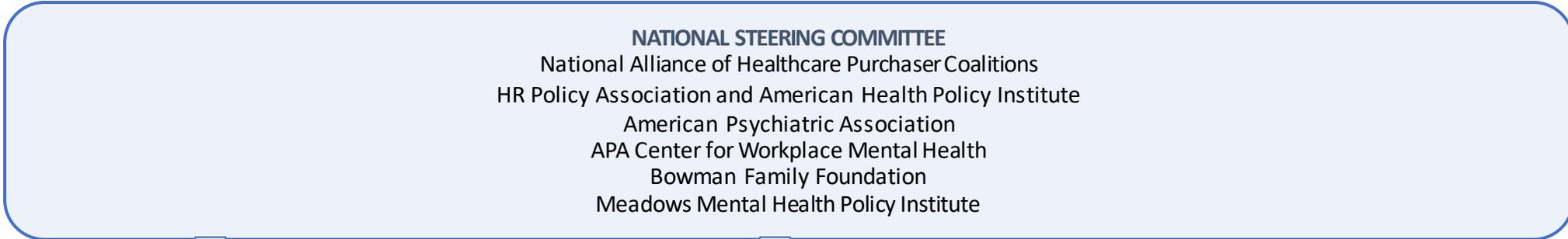
November 9, 2020

Henry Harbin, MD, Senior Advisor to The Path Forward, former CEO of Magellan Health Services



National Alliance
of Healthcare Purchaser Coalitions
Driving Innovation, Health and Value

The PATH FORWARD Five-Year Plan



RESET

Regional
Employer
Stakeholder
Engagement
Team



The Problem – The Solution

Employers overwhelmingly identify the need to improve access to quality, affordable, and timely behavioral healthcare as a critical priority – amplified in light of COVID-19

<p>Five evidence-based reforms can dramatically improve access, early detection, and enhance quality</p> <p>Only a coordinated, multi-stakeholder effort can implement these reforms:</p>	Improve in-network access to BH specialists	
	Expand screening and tracking of BH conditions using Measurement-Based Care, “MBC”:	<i>Evidence clearly shows that consistent use of BH symptom measurement tools (quantitative assessments) improves quality and outcomes by a remarkable 20% - 60%</i>
	Expand access to quality BH treatment by implementing “Collaborative Care” in primary care (as defined in the CoCM codes):	<i>A proven and scalable solution that improves BH access and outcomes (80 RCTS) and reduces costs</i>
	Maintain high and flexible access to Tele-Behavioral Health (TBH), both audio and video	
	Reduce legacy BH disparities	

Success Will Require Multi-Stakeholder Involvement

- True systemic reform is beyond the practical reach of any single stakeholder group
- Inclusive, multi-stakeholder involvement at the national and regional level:
 - Primary care, BH providers and clinical health systems
 - Payers - health plans, employers, states
 - Benefit consultants
 - State and federal regulators and policy makers
 - Local medical societies and associations
 - BH advocates
 - Private sector/philanthropic organizations

Why Should Employers Health Plans and Providers Join the Path Forward?

The Path Forward is the **only** national BH implementation plan:

- Using an employer led, market-driven approach to assure major advances
- **Coordinating the efforts of many stakeholders – none of which could succeed alone**
- Focusing on both BH specialists and primary care providers
- Transforming BH care at a population level and achieving:
 - Health equity for all Americans
 - Reduced deaths of despair
 - Reduced workplace disability/ increased productivity
 - Reduced costs of co-morbid medical conditions

Early Successes of The Path Forward

All 8 RESET Regions have begun implementing the Path Forward

- All have formally committed to PF priorities
- All have been educating key regional stakeholders
- Several have engaged State Health Officials as partners as well as local expert Behavioral consultants or organizations
- All are now proficient in understanding the action steps needed to implement the 5 priorities

The National Steering Committee

- Successfully engaged multiple partners and supporters including:
 - HR Policy Association and American Health Policy Institute is now a formal partner
 - Most large Behavioral Consumer and Professional organizations
 - URAC has announced a MBC standard, discussions with Joint Commission to expand their MBC standard
 - Active discussions with most large health plans to form partnerships
 - Active discussions with large Provider organizations to form partnerships
 - Publication of multiple action oriented White Papers to drive adoption of the 5 priorities
 - Milliman High Cost Study , Tele Behavioral Best Practices, Covid-19 and the PF priorities, Covid-19 and Collaborative Care, Impact of Covid-19 on Deaths of Despair, Collaborative Care and Medicaid for SUD

The Path Forward

Colleen McHugh

President, Health Care Policy Roundtable

EVP, American Health Policy Institute



Minnesota Health Leadership Council

in affiliation with the National Alliance of Healthcare Purchaser Coalitions

HR Policy Association and American Health Policy Institute

HR Policy Association is the lead public policy organization of chief human resource officers *representing the largest Fortune 500 employers (over 375 members)* doing business in the United States and globally.

The Association brings these executives together not simply to discuss how human resource practices and policies should be improved, but also to create a vision for successful HR strategies and pursue initiatives that promote job growth, employment security and competitiveness.



Supporting Chief Human Resource Officers:

- Weekly calls since March on implications of COVID on employers across all HR disciplines
- Sharing data
- Bringing forward industry experts
- Learning from each other
- Supporting health policy on the hill

Employee Well-Being and Mental Health

- A survey by tech giant Oracle and HR firm Workplace Intelligence found the pandemic has significantly increased levels of workplace stress, anxiety and burnout.
 - The poll of more than 12,000 employees, managers and top executives across 11 countries suggests **2020 has been the most stressful year ever for the global workforce**, with more than two-thirds of respondents saying they were more stressed at work than ever before
 - **“It’s the biggest workforce issue of our time and will be for the next decade”** said Dan Schawbel, managing partner, Workplace Intelligence.

Employee Well-Being and Mental Health Top Priority

- Mental health and overall well-being is now more important than ever.
 - Lines are blurred between work and home
 - Fatigued workforce
 - Concerned about burnout
 - Generational impact
- Various Strategies and Solutions
 - Enhanced outreach, town halls, virtual coffee hours
 - Mindfulness & Meditation, Fitness Apps
 - Brain Health – Headspace, Total Brain, Calm
 - Calendar Management/PTO – increases and encouraging
 - Childcare, Eldercare Support
 - EAP – expanding number of free visits
 - Networks – support OON
 - Financial Wellness

Reimagining Work

- What does a Hybrid model look like?
 - Certain days in the office and others remote
 - Some completely remote
 - How we communicate, connect, create
 - Virtual ready workforce
 - Home/office/satellite offices (face to face and remote based on nature of work)
 - Manage, coach, collaborate, evaluate and motivate
 - Technology enables multiple models of working
 - Culture prioritizes belonging and trust
- When will *all* workers return to the workplace?

MidAtlantic Mental Health Path Forward

A Regional Employer **Stakeholder Engagement** Team



MidAtlantic
BUSINESS GROUP
ON HEALTH

The MidAtlantic Version: a Partnership

Our Partners:

- MHA of Maryland: Linda Raines
- Maryland Primary Care Program: Howard Haft, MD



Launching the MidAtlantic Path Forward

Getting Group Consensus

ASHA

Daniel G Schuster, LLC

Legg Mason

Marriott International

State of Maryland Employees

Office of Personnel Management

CBIZ Consulting

Managed Care Advisors

Segal Consulting

Aetna

Anthem

CareFirst Blue Cross Blue Shield

Cigna

UnitedHealthcare

Child & Adolescent Society of Greater Washington

GBMC Health Care System

Johns Hopkins Medical Center, Bayview

MATClinics

Med Chi

MedStar Health

Mindoula Health

University of Maryland Medical System

Maryland Department of Health

Maryland Insurance Administration

NCQA

URAC

American Academy of Child & Adolescent Psychiatry

American Psychiatric Association

Primary Care Collaborative



Meeting Follow Up

Convene Providers

One-on One with Health Plans

MHA Hire

Present to Lt. Governors Task Force

Present to Maryland Insurance Administration



What have we learned?

The Three-Way Partnership was Fundamental
Providers Need Education/Facilitation
Alignment could help smooth the way.

Moving Forward

Educate and Support Providers
Broaden Purchaser Support
Continue to Seek Alignment



The Path Forward

Lessons Learned From Minnesota

Deb Krause, Regional Strategic Advisor



Minnesota Health Leadership Council

in affiliation with the National Alliance of Healthcare Purchaser Coalitions

Working With Others Across the State...

LESSON #1: COLLABORATION, UNDERSTANDING,
AND TRUST ARE KEY



The Most Livable City in America



MINNESOTA MEDICAL ASSOCIATION



MENTAL HEALTH Minnesota
The Voice of Recovery



Minnesota Health Leadership Council
in affiliation with the National Alliance of Healthcare Purchaser Coalitions

Meetings We've Held and Things We've Done...

LESSON #2: FOCUS AND SUSTAINABILITY ARE ESSENTIAL

MN Bridges to Excellence 2006 - 2017

- Purchaser-led pay for performance program
- Rewards for optimal and improved performance
- 3 Disease states, including depression
- \$6.5M in reward payments to high-performing clinics

Mental Health Learning Network 2017 - 2018

- Employer-focused: market assessment, key informant meetings, Purchaser Guide
- Benefits benchmarking, Mental Health First Aid @ Work training, and Innovator's Showcase
- Community Dialogue

Mental Health Guiding Coalition 2019 - 2020

- Multi-stakeholder group
- eValue8 Mental Health Deep Dive for Minnesota Health Plans
- Benefits benchmarking, policy engagement, and CoCM training
- PCORI Eugene B. Washington Engagement Award
- 2020 The Path Forward Summit

Why It's Been Effective...

LESSON #3: DILIGENCE AND DETAIL MATTER

For Use During 2019
MODEL DATA REQUEST FORM 08/05/19

**An Employer Tool for Improving Network Access for
Mental Health and Substance Use Disorders (MH/SUD)**

**A Recommendation by the
NATIONAL ALLIANCE OF HEALTHCARE PURCHASER COALITIONS**

In response to employers' calls for improving network access for mental health and substance use disorders, the [Mental Health Treatment and Research Institute LLC](#) ("MHTARI"), a not-for-profit subsidiary of [The Bowman Family Foundation](#), has funded the development of the Model Data Request Form ("MDRF") for use by self-insured employers. The MDRF provides instructions and data requests that employers can send to their TPAs (or consultants) to obtain meaningful data reporting, set forth in a [specified format](#). This document may be updated from time to time. A current version of this MDRF can be found at http://www.mhtari.org/Model_Data_Request_Form.pdf.

Using the MDRF, employers can have their TPAs report on 4 key parameters as recommended by the [National Alliance of Healthcare Purchaser Coalitions](#) and the [American Psychiatric Association Foundation Center for Workplace Mental Health](#):

- (1) **Out-of-Network Use** for MH/SUD versus medical/surgical services.
- (2) **Reimbursement Rates** for MH/SUD and medical/surgical providers, for similar services.
- (3) **Denial Rates** for MH/SUD versus medical/surgical services.
- (4) **Network Directory Accuracy for Psychiatrists**, as indicated by the percentage of listed providers who treat few or no patients on an in-network basis.

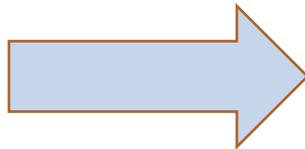
The MDRF is intended to allow employers to (a) better understand the experience of their employees when seeking to access MH/SUD treatment as compared to medical/surgical treatment, (b) assess the adequacy and accuracy of their TPA's MH/SUD provider networks, and (c) request improvements as deemed necessary.

DISCLAIMER - No Legal Advice: The MDRF is made available for informational purposes only and is not intended and should not be construed as providing legal advice. Each situation is highly fact specific. Therefore, each employer or other user ("User") of the MDRF should carefully consider: (1) whether the MDRF would achieve its intended purpose and (2) whether modifications to the MDRF are needed, for example, to address the User's specific circumstances. MHTARI disclaims any and all representations and warranties, express or implied, regarding the MDRF, including without limitation, the ability of the MDRF to achieve its intended purpose.

The MDRF begins on the following page. After reviewing the **DISCLAIMER**, employers may send the MDRF (with appropriate modifications, if any) to their TPAs or consultants. Employers should indicate whether they want each data analysis conducted for one or more markets/regions (separately), for all markets/regions (aggregated), or both.

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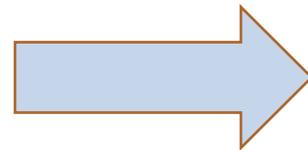
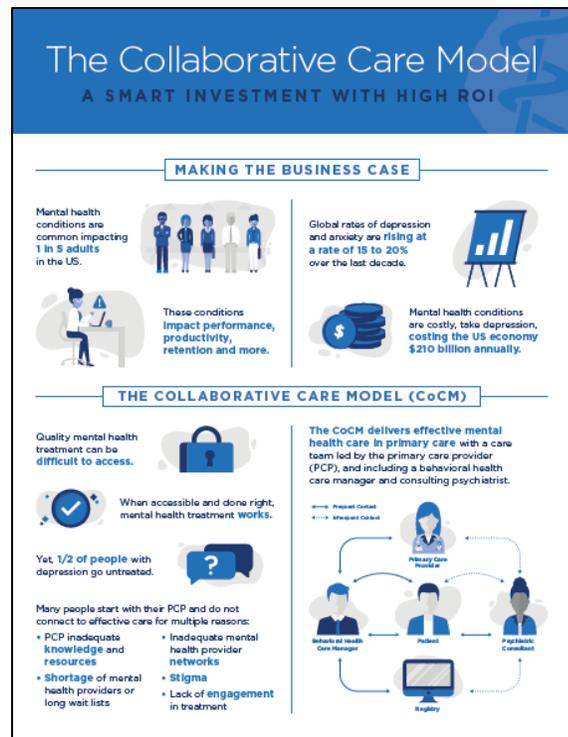
Model Data Request Form 08.05.19.1800



- **Actions:**
 - Educate employers
 - Provide tools
 - Encourage utilization
 - Check in
 - Understand and break down barriers (MDRF Action Plan)
 - Recognize and celebrate success
- **Example: Public Sector Purchaser**

The Power of The Path Forward...

LESSON #4: WORK WITHIN YOUR “SPHERE OF INFLUENCE”, LEVERAGE YOUR UNIQUE ASSETS, AND FOCUS ON ACCOUNTABILITY AND RESULTS



- Actions:
 - Educate employers
 - eValue8 Mental Health Deep Dive for MN Health Plans
 - Provider training in partnership with the Center for Workplace Mental Health, UW AIMS Center, ICSI and MPS
 - Ongoing education and conversations with other stakeholders: Department of Commerce, ICSI, MN Hospital Association
 - PCORI Project
- Example: Health Plans

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