Child Youth and Family
Behavioral Health: Federal Updates

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Key Drivers

- SAMHSA’s Theory of Change to Continually Improve the Nation’s Behavioral Health System
- President’s 2012 Budget
- Health Reform
- HHS Secretary and Departmental Initiatives
- SAMHSA Administrator Initiatives
- New SAMHSA Structures
SAMHSA’s Theory of Change

• Identify Emerging Issues ➔ Foster Innovative Solutions to Real World Problems ➔ Demonstrate and Disseminate New Research or Promising Practices ➔ Use Limited, Short term Grant Investments to Move EB and PP Practices and Policies into Nation’s Core Behavioral Health System

• Core BH System: funded by Medicaid/Medicare, Private Insurance and Block Grants
SAMHSA’s Budget Directions

- President’s 2012 Budget
- SAMHSA Block Grants
- State, Tribal and Community Prevention Grants
- Innovation and Emerging Issues
- Children’s Mental Health Services
State, Tribal and Community Prevention Grants (Section D)

Mental Health State Prevention Grants

• Purpose: implement state-wide comprehensive prevention strategies to address prevention of Mental health problems/disorders
• Use Evidence-supported practices to promote protective factors for MH in children and youth/reduce risk factors
• Prevent/delay onset of mental illnesses/prevent suicide
• Build MH promotion and mental illness prevention capacity at state, local and community levels
• Foundation: 2009 Institute of Medicine Report: Preventing Mental, Emotional, and Behavioral Disorders Among Young People
Affordable Care Act: Health Reform

- More people will have insurance coverage
- Of 32M to be insured:
  - 6-10M will have significant untreated MH and/or Addictions
  - 16M: eligible for Medicaid, including 4-6M people with significant untreated MI/Addictions
- Medicaid: bigger role in MH/SUD than ever!
- Focus on Primary care and coordination with specialty care
- Focus on Health Homes
- Emphasis on home and community-based services, less reliance on institutional care
- Emphasis on promoting wellness and preventing disease
Enhanced Interagency Cooperation

- HRSA/SAMHSA
  - Primary Care and Behavioral Health Integration
  - Coordinated Grant Program and Shared TA Center
- CMS and SAMHSA
  - Health Homes: definitions, state plans and consultation with SAMHSA re state plans
- CDC/AHRQ/SAMHSA: Workgroup on Children’s EHRs
Health Homes: CMS Medicaid Directors Letter, Nov, 2010

- ACA Definition of Health Home to design State option/amendment to Medicaid Plan
- Guidance: medical, behavioral health and social supports and services
- Chronic conditions named in ACA: include mental health condition, substance use disorder
- Standards and Components: align well with system of care principles
- “Provide quality-driven, cost effective, culturally appropriate, and person- and family-centered health homes services..... Coordinate and provide access to mental health and substance abuse services.... Care coordination...person centered planning, etc.”
- “Use health information technology.....”
- Requires States to consult/coordinate with SAMHSA in addressing issues of prevention and treatment of MI and SUD as they develop approaches to health homes
Dept of Health and Human Services

- Office of Health Reform: Key Driver for Agency Work
  - Defining health homes; behavioral health component
  - New coverage opportunities
  - HIT: incentives for provider orgs and practitioners; still waiting for inclusion of BH practitioners
  - HER: Model EHR for Children (CDC/AHRQ)
DHHS: New Structures

- Behavioral Health Coordinating Council
  - Agency Collaborations, e.g. Underage drinking, Early Intervention In SED/SMI for Youth/Young Adults, etc.
- LGBT Issues Council
  - Family Acceptance Policy
  - Data Issues, etc.
  - LGBT Youth and Bullying
- Office of Adolescent Health
  - Enrollment of adolescents in Medicaid
  - IOM Prevention Report: strategies to move it forward
  - Youth Engagement
- Principals Work Group on Health Disparities Strategic Plan
Secretary’s Strategic Initiatives: Two Examples

http://www.hhs.gov/secretary/about/secretarialstrategicinitiatives2010.pdf

• Transform Health Care
  – Ensure access to quality, culturally competent care for vulnerable populations
    • Ensure mental health parity;
    • Improve early detection of mental health and substance use disorders
    • Promote coordination of evidence-based care for individuals with behavioral health issues

• Promote Early Childhood Health and Development
  – Improve early learning
  – Support coordination of services for young children and their families
    • State Advisory Councils on EC
    • Foster local connections with health, nutrition, mental health, family support services
    • Support Home Visiting Programs thru Affordable Care Act
Early Childhood 2010 Conference

• Collaboration between Dept of HHS and Dept of Education, August 2010
• Continued focus on Early Learning and Development → Federal Policy Group
• Monograph in process → proceedings, lessons learned, state examples, federal mapping of resources
SAMHSA’s 8 Strategic Initiatives

• Link: http://www.samhsa.gov/about/strategy.aspx?from=carousel&position=4&date=01262011

• Three Aims:
  – Improving the Nation’s Behavioral Health
    • Prevention; Trauma and Justice; Military Families; Recovery Support
  – Transforming Health Care
    • Health Reform; Health Information Technology
  – Achieving Excellence in Operations
    • Data, Outcomes and Quality (quality plan); Public Awareness & Support
#1. Prevention of Substance Abuse and Mental Illness

- Primary prevention focus: build emotional health, prevent/delay onset of SU and MI (draw on IOM report on prevention)

- Prevent suicides and attempts among high risk populations, esp. military families, LGBTQ youth and American Indians/Alaska Natives
  - National Action Alliance for Suicide Prevention:
    - Task forces to address vulnerable populations, including tribes and LGBT youth

- Prevent/reduce consequences of underage drinking/adult problem drinking

- Reduce prescription drug misuse/abuse
#2. Trauma and Justice

- Develop comprehensive public health approach to trauma
- Make screening and early intervention for trauma common practice
- Reduce impact of trauma and violence on children, youth and families
- Address needs of people with MD/SUD/COD and histories of trauma in CJ and JJ systems
- Reduce impact of disasters on behavioral health
Trauma-related Activities

- ACF: Children’s Bureau: interest in trauma and CW delivery system
- DOJ/OJJDP: Children Exposed to Violence (8 grantees); linking with SAMHSA Child Trauma work
- Family Treatment Courts: Children Affected by Methamphetamine; 12 new grants; judicial leverage in collaboration
- Focus on trauma-specific interventions for diverse ethnic/racial communities; address historical trauma
- Creating trauma-informed service systems
- Promoting more trauma-focused work in Systems of Care
#5. Health Reform

- SAMHSA’s *Good and Modern System for Addiction and Mental Health Services*
  - Guiding principles for service system
  - Chart of Prevention, Treatment and Recovery Services
  - http://www.samhsa.gov/healthreform/

- Finalize and implement parity provisions in Mental Health Parity and Addiction Equity Act and ACA

- Foster Integration of Primary Care and Behavioral Health
  - Grants to local behavioral health providers
  - TA Center with HRSA

- Agency Lead: John O’Brien, Sr Advisor, SAMHSA/OPPI
Good and Modern System of Mental Health and Addictions Services

- Benefit package, within available funding, that supports recovery and resilience
- Promote program standards, common service definitions, system performance expectations and consumer/family outcomes
- Create/distribute appropriately credentialed and competent primary care and BH care providers
- Encourage innovative use of technology (education, information, intervention)
- Funding strategies sufficiently flexible to promote more efficient system of services and supports
Developmental Process of Good and Modern System

- Established Principles
- Proposed Continuum of Services
- Service Definitions (prevention, treatment, recovery)
- Stakeholder Input and Review
- Identified/Refined Service Definitions
- Evidence for Services/Review of Evidence
Sample of New Services Proposed

- Recovery Support Coaching
- Self Directed Care
- Brief Motivational Interviewing for AOD Use for Elderly
- Parent Training
- Case Management: Facilitated Referral
- Mental Health Consultation
- Parent/Family Caregiver Support
- Child/Youth and Caregiver Respite Care
- Therapeutic Mentoring
- Technological Support Services,
- Etc.
New Structures:
SAMHSA’s Regional Office Plan
Fiscal Year 2011

• Establish a Regional Coordinator position to ensure the efficient dissemination of information and coordination between SAMHSA Headquarters and Regional staff.

• Hire staff for the following HHS Regions:
  – Region II (New York, New Jersey, Puerto Rico, U.S. Virgin Islands)
  – Region IV (Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee)
  – Region VI (Arkansas, Louisiana, New Mexico, Oklahoma, and Texas)
  – Region VII (Iowa, Kansas, Missouri, Nebraska) and
  – Region X (Alaska, Idaho, Oregon, Washington)

• Fiscal Year 2012

  • Hire staff for the remaining HHS Regions:
    – Region I, III, V, VIII, IX
SAMHSA Office of Behavioral Health Equity

- Provision in Affordable Care Act to create an Office of Minority Health in 6 HHS Agencies
- Six offices are coordinated by the Assistance Secretary for Health, Dr. Howard Koh
- Support Secretary’s HHS Disparities Strategic Action Plan
- Align work with SAMHSA’s Eight Strategic Initiatives
  - each SI has Action Steps to address disparities within their initiative
- In process of setting up this office
Tribal Law and Order Act
July 29, 2010

- Provisions re Substance Abuse: SAMHSA created Office of Indian Alcohol and Substance Abuse
- Consult with tribes on framework for coordination of federal resources and development of Tribal Action Plan
- Interagency coordination with Justice, Education, and HHS
- “Dear Tribal Leader” letter: SAMHSA and IHS to clarify roles/responsibilities, collaborations
New Data Resource

- **Measure of America**: Health, Education and Income Index and Composite Index of American Human Development Index
- **Reports**:
  - By National, State, Congressional District
  - By geography, gender, race/ethnicity
  - Mapping feature
- **Based on American Community Survey (CDC and Census Bureau)**
- **www.measureofamerica.org**
15 Collaborating Departments/Agencies
Developing federal Strategic Plan for Youth Programs
Listening Sessions around U.S.
Subgroups:
- Positive Youth Development
- Transition Age Youth
- Bullying Prevention