



Child Youth and Family Behavioral Health: Federal Updates

Larke Nahme Huang, Ph.D.

Senior Advisor

Administrator's Office of Policy Planning & Innovation

SAMHSA February 16, 2011



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's Budget:
<http://www.samhsa.gov/Budget/FY2012/SAMHSA-FY11CJ.pdf>
- 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
- <http://www.samhsa.gov/healthreform/healthHomes/index.aspx>

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

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
- ¹⁴ 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
- ¹⁷ 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

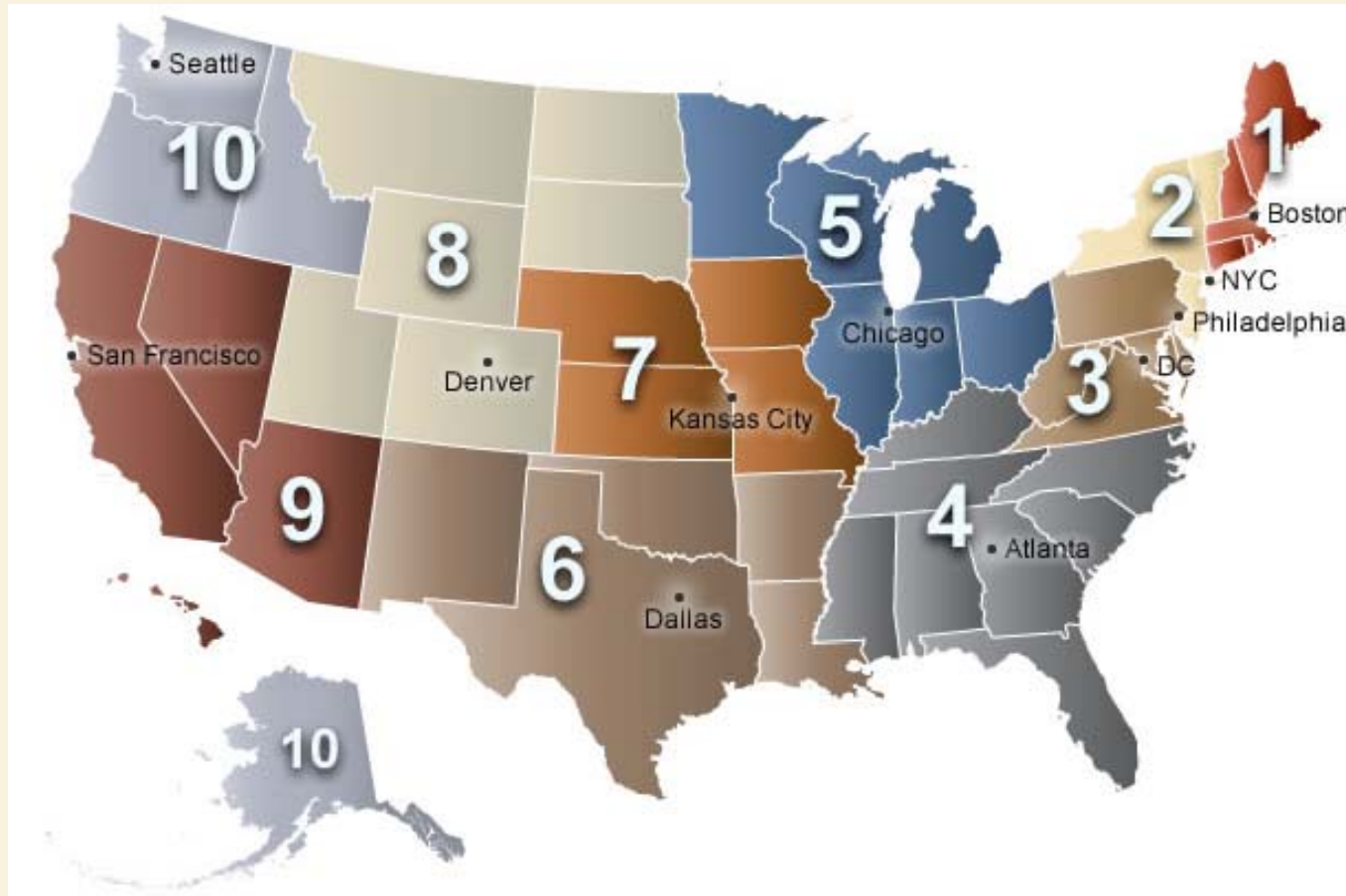
Developmental Process of Good and Modern System

- 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



Proposed Implementation 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

24

- 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

Interagency Work Group on Youth Programs

www.findyouthinfo.gov

- 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