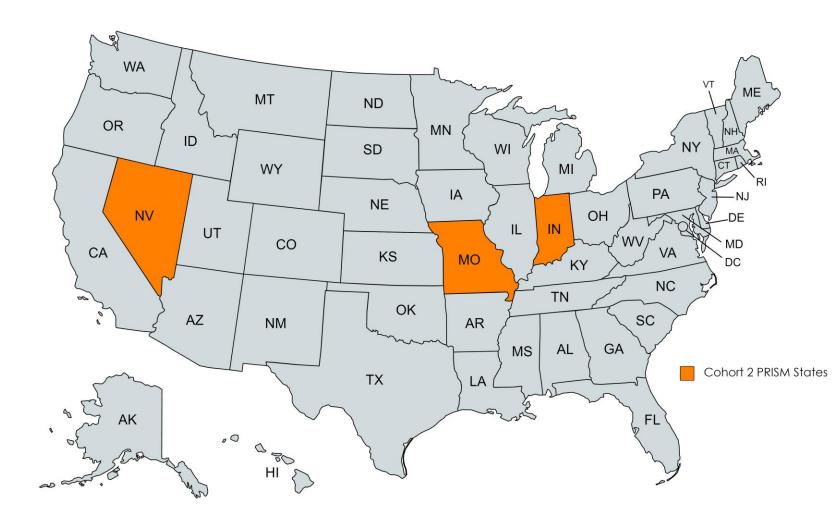
## Recruiting, Funding, and Training an Effective and Innovative Maternal Behavioral Health Workforce

Wednesday, July 21st, 2021



# PRISM Learning Community: Cohort 2





## Agenda

Welcome and Introductions

Strategies for Expanding an Effective and Innovative Behavioral Health Workforce

Joy Burkhard, Founder and Executive Director, 2020 Mom Knowledge Builds Connections & Community Trust

Kay Matthews, Founder and Executive Director, Shades of Blue

Q&A

Wrap-Up & Adjourn

## Objectives

- Highlight best practices in behavioral health workforce recruitment and retention.
- Discuss traditional and non-traditional funding sources for maternal behavioral health.
- Share innovative models and programs that address maternal behavioral health.



The content, findings, and conclusions shared in this presentation are those of the speakers and do not necessarily reflect the official positions of or endorsements by ASTHO, AMCHP, or the PRISM project funder (HRSA).



# Joy Burkhard

Founder and Executive Director, 2020 Mom



Strategies for Expanding an Effective and Innovative Behavioral health Workforce

> Joy Burkhard, MBA 2020 Mom



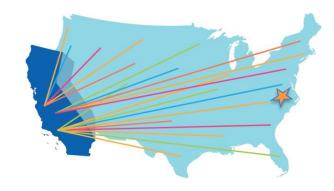
PRISM Virtual Learning Session July 2021

www.2020Mom.org

## Who is 2020 Mom?

2020 Mom.s Mission: To Close Gaps in Maternal Mental Health Care





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2020

We support for Innovators and Change Agents: Insights, Tools, Convening Opportunities and Policy Change

## What We will Cover:

#### **Introduction & Level Setting**

Maternal Mental Health BH Workforce Provider Shortages



#### Finding

# Funding



## Did you know?

Childbearing aged women account for the largest group of Americans with Depression.

Postpartum depression is the most common complication of childbirth.

New onset of maternal depression occurs almost as frequently in pregnancy as in the postp period.

American Academy of Pediatrics has noted that Maternal Depression is the most under diagnosed obstetric complication in America.

Cost the U.S. and States billions of dollars & treating pays immediate dividends into state Medicaid budgets.

Despite the Prevalence and ROI, Maternal Depression (+Anxiety/Psychosis/PTSD/OCD) largely goes undiagnosed and untreated.



## More about ROI: Spotlight on TX

#### **Costs to Texas Medicaid**

Texas pays a financial price when MMHCs go untreated — highlighting the return on investment of state maternal health efforts.

Of the \$2.2 billion in costs, \$1 billion is a cost to Medicaid.

One huge finding: Of the \$2.2 billion in costs for untreated MMHCS, 45% is directly related to kids, such as child behavioral and developmental disorders, preterm births and asthma.

Mathematica estimates that failing to treat maternal mental health conditions results in an additional 7,472 preterm births.

https://ccf.georgetown.edu/2021/03/05/report-examines-the-high-cost-of-failure-to-treat-postpartum-depression-and-other-maternalmental-health-conditions/



## Level Set - the Behavioral Health Workforce

#### Services:



The behavioral health workforce provides: Prevention, Treatment or Recovery services for mental health or addiction disorders May provide case management support

#### Various Disciplines:

Is comprised of a variety of disciplines including licensed and unlicensed providers like: MDs, Social Workers, Counselors, Psychologists, Peers

**Provides Care in Varying Settings:** 

Provides care across various treatment and community settings



## Level Set - Mental Health Provider Shortages



National shortage all provider types, including:

Psychiatrists (super shortages of reproductive psychiatrists), Psychologists, social workers, and marriage and family therapists

This has lead to significant unmet need in behavioral health care, especially for the most underserved populations .

1/3 of Americans live in a Mental Health Professional Shortage Area



## **Level Set - PCP and Ob Shortages**



In 2019, it was reported only 45% of the national need for primary care professionals was met.

In 2017, the American College of Obstetrics and Gynecology estimated half of U.S. counties lacked a single OB-GYN.



## It's Time to Think Outside the Box State Level Strategies



-Engage Private Insurers as a part of their network adequacy corrective action plans to: -Invest in increasing residency/fellowship programs for psychiatrists and Ob/Gyns -Work with universities and community colleges to promote careers in BH, including students with diverse cultural and linguistic backgrounds

-Provide reports/technical assistance to lawmakers about the benefits of:

-State Certification and Reimbursement to Doulas

-State Training, Certification and Reimburse of MH Certified Peers



## It's Time to Think Outside the Bag State Funding / HRSA Grants



- 1. The Behavioral Health Workforce Education and Training (BHWET) Program aims to increase the supply of behavioral health professionals while also improving distribution of a quality behavioral health care.
- 1. The Primary Care National Health Service Core (NHSC) Loan Repayment Program
- Maternal Depression and Related Behavioral Disorders (MDRBD) Program provides grants to support novel solutions like telepsychiatry consultation programs <u>HRSA Awarded</u> <u>Grants to 7 States</u>: FL, KS, LA, MT, NC, RI, VT
- 1. Opportunities to Expand Opiod Epidemic Funded Projects



## It's Time to Think Outside the Bag State Funding



#### **Peer Support Funding Medicaid+**

Medicaid is not the only mechanism through which states have supported funding for peer support services. According to the University of California, most states use a combination of general funds, federal funds and foundation grants to implement and sustain peer support programs.



## It's Time to Think Outside the Box Program Level Strategies

#### **FIND MMH Providers:**

-Start with the www.Postpartum.Net Directory -Seek those who are certified as Perinatal Mental Health-Certified (PMH-Cs)

#### TRAIN Existing Staff:

-WIC Counselors & Home Visitors (there are many live/on-demand online MMH courses) that provide a pathway to PMH-Certification

#### **CONNECT** Peers to Programs/Providers:

-Support Community Based Organizations, Healthy Start Programs, FQHCs, Indian Health Clinics, Rural Health Clinics and Hospitals in Connecting with Certified Peer Support Specialists 2020



## Lowest Hanging Fruit: Certified Peer Support in MMH?

Training, Testing and a Credential for Peers Each state has a state sanctioned CPSS program (CO in the works)

**2020** Mom is Working Aggressively on a "MMH' Training Track -RI International w/ partners, MHA Ohio (POEM) developed a formal curriculum and are testing a modified training track through phase 2 of our study.

- -Includes cultural components relative to the Black community, including doulas
- -Mexican/Latin phase being proposed in phase 3.

#### Advocacy Opportunities in States that Only Address SUD

Pioneering states first addressed peer support to support those battling substance use disorder. 10-12 states frameworks need to be updated to account for mental health peer support.

## Employment by Entities that have Workforce Funds or Can/Will Bill Medicaid



#### A Significant Solution for Maternal Mental Health: Certified Peer Specialists

Nearly 1 in 5<sup>12</sup> women struggle with maternal mental health disorders such as anxiety and depression, yet most go untreated.<sup>22</sup> Though maternal mental health has garnered increased attention over recent years, women continue to experience a lack of consistent and accessible

standard of care in the United States, in part

due to a scarcity of qualified and financially-

Administration (HRSA) as of October 2020 noted

mental illness being able to receive care, as seen

over 5700 mental health professional shortage

areas exist in the U.S.<sup>3</sup> These shortage areas

contribute to the fewer than half of those with

in a 2014 Substance Abuse and Mental Health

accessible mental health providers.

The Health Resources and Services

Services Administration (SAMHSA) survey cited by the National Conference of State Legislatures (NCSL).<sup>4</sup>

The COVID-19 pandemic has only exacerbated these gaps in care, given the growing need for mental health services. According to The Centers for Disease Control and Prevention's (CDC) August 2020 findings, 40.9% of U.S. adults reported struggling with poor mental health or substance abuse related to the COVID-19 pandemic in late June 2020,<sup>6</sup> almost twice the number of U.S. adults having any mental illness in 2019 (20.6%).<sup>6</sup>

In response to this provider shortage and growing need, there has been recent interest in the utilization of certified peer specialists to combat poor mental health. The Centers for Medicare and Medicaid Services (CMS) initially citted the efficacy of peer support programs in 2007, defining peer services as "an evidencebased mental health model of care which consists of a qualified peer support provider who assists individuals with their recovery from mental illness."<sup>7</sup> In addition to the CMS, peer support has been nationally recognized by other federal agencies such as SAMHSA and HRSA and endorsed by organizations like Mental Health America.

Historically, certified peer specialists have been utilized in particular populations or community settings, such as for those with substance use disorders, or veterans. Peer specialists have been found to be effective in reducing anxiety and depression in pregnant and postpartum women as well,<sup>8</sup> making peer support a promising intervention for maternal mental illness.

## Additional Resources available on 2020Mom.org

#### **Provider Core Competencies**

Identifies the skills and knowledge various providers should have who interact with women in the perinatal period

#### A Continuum of Care

Summarizes the 4 critical timeframes for providers to address MMH disorders

#### Screening: Score "Cut Offs" and Timing Recommendations

Developed by PSI at the urging of the task force to identify score cut-off for PHQ-9 and EPDS & Timing of Screens by PCP, Ob/Gyn and Pediatrician

#### A "Menu" of Treatment Options

Adapted from the MCPAP for Moms Toolkit to Include Full Range of Tx Options by Severity

**Detailed Recommendations for All Stakeholders** Everyone can and must do something



## What's Left Nationally? Third Report Coming Dec. 2021

Maternal Mental Health: State of the State in California and Beyond

A follow up report on the implementation of the 2017 California Maternal Mental Health Task Force Report



December 2019

Issued to the California Legislature, Haath and Human Sankosi Agency. Stateholders and the Public New Report Released on Maternal Mental Health

What's been achieved
What remains to be done

Learn More >







## Visit: 2020Mom.org Contact: Joy@2020mom.org

See Remaining Pages for References & California MMH Legislation



## **California's Legislation Signed Into Law**

#### AB 2193 Screening and Insurer Support

Effective July 1, 2019

• Requires insurers to create MMH programs and obstetricians to screen for MMH disorders.

#### AB 3032, Hospital Maternal Mental Health

Effective January 1, 2020

 Requires hospitals to train clinicians and inform mothers about the range of disorders, signs/symptoms and local treatment options if any.

#### AB 845, MD and Maternal Mental Health Education

Effective January 1, 2020

Encourages the state medical board to educate MDs about MMH disorders



## **Pending 2020 California Legislation**

#### AB 935 Ob/Ped/PCP to Psychiatrist Virtual Consultation

(in 2019 Introduced as AB 1676 and 2020 as 2360)

- Address psychiatric shortages and builds Ob/Ped/PCP capacity to screen, and develop treatment plans for Moms & Children for
- Requires provide and public Health Plans to Develop or Contract out the consultation program and communicate its availability to network providers and monitor/improve utilization



## References

#### Model Overall State Workforce Strategy

Scheyer K, Gilchrist E, Muther J, Hemeida S, Wong SL. Recruitment and Retention Recommendations for Oregon's Behavioral Health Workforce. Farley Health Policy Center, April 2019.

#### Allied Workforce / Peer Support

https://www.ncsl.org/Portals/1/Documents/Health/1-Health-Care-Needs-Emerging-Workforce v03.pdf https://healthworkforce.ucsf.edu/sites/healthworkforce.ucsf.edu/files/Report-Peer Provider Workforce in Behavioral Health-A Landscape Analysis.pdf

#### **Shortages**

https://www.fiercehealthcare.com/practices/millennial-women-expected-to-be-most-impacted-by-ob-gyn-shortage-report-says https://www.behavioralhealthworkforce.org/wp-content/uploads/2020/02/Recruitment-and-Retention-of-BH-Providers-Full-Report-2.2020.pdf https://depts.washington.edu/fammed/chws/wp-content/uploads/sites/5/2019/12/State-Incentive-Programs-Allied-Health-FR-2019.pdf

#### Cost of Untreated Maternal Mental Health Disorders

https://ccf.georgetown.edu/2021/03/05/report-examines-the-high-cost-of-failure-to-treat-postpartum-depression-and-other-maternal-mental-healthconditions/

#### **Expanding Access to Doula care**

https://www.mhtf.org/2021/05/31/expanding-access-to-doula-care-best-practices-for-state-legislation/

#### Funding





# Kay Matthews

Founder and Executive Director, Shades of Blue

# KNOWLEDGE BUILDS CONNECTIONS & COMMUNITY TRUST

Kay Matthews Executive Director Shades of Blue Project

#### ACCORDING TO THE AMERICAN PSYCHOLOGICAL ASSOCIATION

Less than 2 percent of American Psychological Association members are Black or African American, some may worry that mental health care practitioners are not culturally competent enough to treat their specific issues

The health service psychology workforce<sup>2</sup> was 88 percent white and 12 percent racial/ethnic minorities, and the academic workforce<sup>3</sup> was 81 percent white and 19 percent racial/ethnic minorities.

## RECRUITMENT & TRAINING RETENTION **SOLUTIONS**

- Inclusion of traditional healing practices
- Co-created models of care informed by the community
- Training providers in cultural competency and Black maternal mental health
- Education and engaging in the community members

NBEC Project: Equitable Anti-Racists Black Maternal Mental Health

## EFFECTIVE MODELS OF CARE THAT WORK

### Peer Support Lead Group Models

Peer to Peer Support Group Models Shared Decision Making Models

Structured Support Group Models Community Healthcare Worker Models

## Local & National Organizations

Foundation Funding (Philanthropy)

Insurers

Crowdfunding

Contracts-SubContracts

NON-TRADITIONAL & TRADITIONAL FUNDING SOLUTIONS

#### RESOURCES & MENTAL HEALTH ORGANIZATIONS PRIORITIZING MENTAL HEALTH ?

Shades of Blue Project (INSPIRE Method) Diversity Uplifts (Trains Healthcare Professionals)

Beam (Trainings Offered) Safe Black Space (Community Connection)

Mommy Up (Community Connection)

Black Mamas Matter Alliance National Birth Equity Collaborative

# WE ARE THE SOLUTION

The community is the missing link. It is imperative that when decisions are being made that someone from the community is involved in the conversation.

# LET'S STAY CONNECTED

## Join Us for Black Maternal Mental Health Week Activities

kaym@shadesofblueproject.org www.shadesofblueproject.org

# Discussion



## Your Input Matters

- Please help us evaluate today's learning session by visiting <u>https://bit.ly/rfteimbhw</u> on your device now.
- Thank you!



# Thank you!

