

# Facilitating Rapid Access to Outpatient Mental Health and Substance Use Care

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# Objectives

- Increase knowledge of historical and current context of access to behavioral healthcare services
- Identify models of care and organizational strategies for increasing access to behavioral healthcare services
- Increase awareness of populations experiencing disparities in accessing behavioral health services

# Accessing Behavioral Health Services

- Defining and measuring access to care
- Entry points for accessing behavioral health services
- Impact of delayed/not received healthcare
- Federal efforts to improve access to care
- Other factors influencing access to care
- The impact of the Covid-19 pandemic



# Access Systems and Models

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- Grassroots
- Crisis services
- Telehealth services
- Integrated physical and behavioral health
- Certified Community Behavioral Health Clinics (CCBHCs)
- Collaborative Care Model (CoCM)



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# Operationalized Rapid Access in an Outpatient Setting

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- Rapid access
- Same Day Access (SDA)
- Child psychiatry access programs
- Veterans Choice Program



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# Organizational Strategies to Improve Access to Care

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- Expand hours of operation to include evenings and/or weekends
- Engage in outreach efforts, including outreach to populations not currently being served
- Address barriers, including social determinants of health
- Reduce staff vacancies and turnover
- Train staff to be culturally competent
- Develop and leverage community partnerships
- Include individuals who are receiving services in CQI efforts



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## Disparities in Access to Rapid Care and Strategies for Improvement

- Populations experiencing disparities
  - Race/Ethnicity
  - Age
  - Gender identity and sexual orientation
- Strategies for improving access to care



# Measurements and Metrics Used for Rapid Access Industry Standards

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- Lack of standardized measurements and metrics
- Community Behavioral Health Clinics (CCBHCs)
  - State certification and SAMHSA funded grantees
  - Access standards for routine and urgent appointments
  - Initial and full evaluation timeline requirements





# Metrics

- SAMHSA
  - Time to Services (I-SERV)
    - Initial Evaluation
    - Initial Clinical Services
    - Crisis Services
- NCQA
  - Follow Up After Hospitalization for Mental Illness, 18+
  - Follow Up After Hospitalization for Mental Illness, 6-17
  - Follow Up After Emergency for Mental Illness, Adults and Children
  - Follow Up After Emergency Department Visit for Alcohol and Other Drug Dependence
- CCBHCs
  - Initial evaluation within 10 business days and urgent needs within one business day
  - Individuals with established receive a routine visit within 10 days of the request
  - Subject to more stringent state, federal or accreditation standards, individuals will receive comprehensive evaluation within 60 days of their first request for services

# Metrics

- Child Psychiatry Access Programs
  - A system of regional consultation teams for children's behavioral health throughout Massachusetts that is designed to support PCPs, pediatricians and others in managing their pediatric patients.
  - MCPAP for moms also provides resources for obstetricians and primary care providers caring for new moms.
- Veterans Choice Program
  - Allows veterans who have wait times of more than 30 days, or who are located more than 40 miles from the nearest VA to receive care that is paid for by the VA and delivered by contracted non-VA providers.
  - Must develop a referral network and ensure an adequate number of capable, qualified and culturally competent providers for veterans



# Key Recommendations

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- Create national standards for network adequacy that apply to all health plans
- Define rapid access/same day access
- Establish national standards for accessing behavioral healthcare
- Promote, and support expanding models of care that support timely access to behavioral healthcare services
- Engage in efforts to reduce disparities in access to care at federal, state, and local levels
- Provide funding and support agencies in developing their own strategies for increasing access to care at the organizational level

Thank you!

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