

Investing in **Prevention**

A Blueprint for an Impactful Behavioral Health Strategy



Accelerating Need for Behavioral Health Services

Behavioral health needs are skyrocketing as a result of the massive social, economic, and personal upheavals brought on by the COVID-19 pandemic.

According to the Kaiser Family Foundation, nearly 4 in 10 adults reported symptoms of anxiety or depression during the pandemic in contrast to only 1 in 10 during the previous year. Furthermore, 36% of adults reported difficulty sleeping, 32% reported poor appetite or overeating, 18% reported difficulty controlling their temper, 12% reported increased alcohol or substance use, and 12% reported worsening chronic health conditions—all due to stress and worry over the pandemic. ²

The uncertainty of navigating a post-pandemic future is also taking a toll: in a recent survey, nearly half of all employees reported experiencing anxiety and burnout over the lack of a clear vision for post-pandemic work.³

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The Power of Prevention

As employers reconsider their behavioral health offerings to meet these daunting challenges, they can maximize their positive impact on outcomes and costs by investing in prevention. A preventive behavioral health strategy can mitigate the challenges described above by:

 Addressing subclinical issues before they become more serious.

Big problems often start small. Though they don't typically require clinical treatment, everyday life stressors, such as worry, sleep issues, anger, relationship challenges, burnout, and life transitions can have a profound impact on overall health and wellbeing and quickly progress into more serious and costly behavioral health concerns. Addressing these issues early through low-barrier support options like coaching can help individuals develop the necessary coping skills and resilience to bounce back from life's challenges.

 Identifying and directing individuals with more complex needs to appropriate clinical care earlier and more efficiently.

A preventive approach also has powerful benefits for individuals with more serious behavioral health needs. Even before the pandemic, more than 20% of American adults experienced mental illness each year while less than half received treatment. One study found that the average delay between the onset of mental illness symptoms and treatment is a staggering 11 years. In Identifying and directing individuals with more complex behavioral health issues to appropriate levels of clinical care earlier and more efficiently can help ensure optimal treatment outcomes, increased workplace productivity, higher quality of life, and lower total healthcare costs.

Every \$1
invested into
treatment for common
mental health
disorders returns \$4 in
improved health
and productivity.¹¹





Even more alarmingly, the number of people with unmet or untreated behavioral health needs is also increasing.

Data from the CDC's Household Pulse Survey shows that between August 2020 and February 2021, the percent of individuals with symptoms of anxiety or depression who had unmet mental health needs increased to nearly 24%.⁴ An analysis by McKinsey's Center for Societal Benefit through Healthcare also found total claims for behavioral health services decreased by nearly 10% in 2020 in comparison to the previous year, despite the unprecedented number of Americans experiencing psychological distress and substance use issues.⁵

Unmet behavioral health needs drive significant healthcare and economic costs for employers, not to mention high personal costs for employees and their loved ones.

Individuals with behavioral health challenges often have more difficulty managing their physical health—from completing preventive health screenings to keeping appointments with their providers to following through on care plans—increasing their risk for chronic disease, poor health outcomes, and higher total healthcare costs. A recent large–scale claims study of the commercially–insured population found that average annual healthcare costs for individuals with behavioral health conditions were 3.5x higher than for those without. The same study found that the majority of high–cost claimants (i.e., the most expensive 10% of individuals accounting for 70% of all healthcare costs) had behavioral health conditions.⁶

Lack of adequate behavioral health support also has significant consequences on workplace performance. Before the pandemic, mental health issues already cost the US an estimated \$500 billion each year in lost productivity. With 9 out of 10 employers reporting COVID-19 has affected their workforce behavioral health and/or productivity, the current economic loss is likely even greater.

4 in 10

Adults reported symptoms of anxiety or depression during the pandemic vs.

1 in 10 pre-pandemic

12%

reported increased alcohol or substance use

3.5x

higher healthcare costs for those with behavioral health conditions

\$500B

in lost workplace productivity due to mental health issues





Key Components of a Preventive Behavioral Health Strategy

- An effective and impactful preventive behavioral health strategy incorporates the following components—all of which enhance prevention, early identification, and treatment.
- Low-barrier care and support options
- Individuals often forgo care because of considerable barriers to access. A shortage of providers has created mental health deserts across the country where individuals can't access care in a timely manner. Over 119 million Americans, or more than a third of the entire US population, live in areas with mental health provider shortages.¹² In some of the largest US cities, it takes an average of 25 days for new patients to see a psychiatrist.¹³ Outside of major US cities, wait times are often much longer-if behavioral health providers are available at all. A study by the American Journal of Preventive Medicine found that 65% of non-metropolitan counties lacked a psychiatrist and 47% lacked a psychologist.¹⁴ Availability and ease of access have a direct impact on treatment outcomes. For example, for patients being treated by a psychiatrist for depression, the odds of achieving response and remission increase significantly as the time between appointments is reduced.¹⁵ Beyond limited provider availability and long appointment wait times, the high cost of care and stigma around mental illness remain strong deterrents to obtaining the necessary behavioral health services.
- Convenient, low-barrier care and support options are thus essential to a preventive behavioral health strategy. A high-quality, virtual behavioral health provider with robust national coverage and short appointment wait times can eliminate barriers imposed by geographic shortages. For individuals who may be reluctant to go to an in-person office or clinic, virtual care offers the safety and privacy of their chosen location. Multiple access modalities and options for support can further overcome stigma by providing friendly, less "clinical" ways to connect. For example, individuals who aren't ready to see a licensed clinician may be comfortable messaging a coach or using self-guided digital tools—both of which can be meaningful steps to addressing their behavioral health needs.

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Continuum of behavioral health services with triage and navigation

Behavioral health needs occur across a full spectrum, from preventive care and subclinical conditions to complex care and substance use disorders. A continuum of behavioral health services that includes therapy and psychiatry, personalized care plans, coaching for subclinical conditions, and enhanced programs for specific target populations (e.g., substance use, eating disorders, comorbid conditions) helps ensure individuals receive the right care and support, regardless of their level of need.

At one end of the continuum, coaching can provide action-oriented planning, support, and follow-up to help individuals address distressing issues and concerns that come up in everyday life (e.g., stress, worry, transitions). While coaching doesn't diagnose or treat specific clinical conditions, it can help individuals develop self-coping skills and resilience to mitigate the risk of routine stressors becoming more severe. At the other end, therapy and psychiatry can support individuals with more serious or complex behavioral health needs through assessment, diagnosis, and evidence-based treatment for clinical conditions.

But access to a continuum of behavioral health services isn't enough to guarantee optimal outcomes. Patients may be confused or frustrated at having to figure out the best care option on their own, resulting in treatment delays, inadequate care, or both. Integrating expert triage and navigation at key member touch points can eliminate confusion and friction by ensuring patients are seamlessly guided to the right care, from the right provider, at the right time.

Chronic conditions and mental illness are deeply interrelated.
There are high rates of co-occurring depression across a number of common chronic conditions.





Medical-behavioral health integration

Chronic conditions and mental illness are deeply interrelated. There are high rates of co-occurring depression across a number of common chronic conditions, including cardiovascular disease (17%), stroke (23%), diabetes (27%), cancer (40%), and Parkinson's disease (51%). Individuals with chronic disease, which include 6 out of 10 adults in the US, are at increased risk of developing behavioral health conditions as they cope with the challenges of their medical diagnosis—from uncertainty about treatment outcomes to changes in physical and mental health to chronic pain. At the same time, behavioral health conditions themselves can lead to chronic diseases as individuals struggle to manage their overall health and wellbeing.

This complex interrelationship underscores the importance of medical behavioral health integration in any preventive behavioral health strategy. Providers must be trained and enabled to treat the whole person, which rarely happens when medical and behavioral health services are siloed. For example, while the US Preventive Services Task Force recommends depression screening in the general adult population, a recent study found only 5% of adults were screened in primary care settings—suggesting a tremendous missed opportunity for prevention, early identification, and treatment.¹⁸

Employers can close this gap through behavioral health offerings that incorporate integrated delivery models, such as collaborative care. Under such models, a patient-centered team of primary care and behavioral health providers within the same practice work collaboratively to deliver whole-person care using shared care plans. Employers should be sure to evaluate whether the necessary infrastructure is in place to enable true care coordination, promote continuity of care, and increase patient engagement and follow-through. Key infrastructure components include integrated chart sharing between medical and behavioral health clinicians through a single EMR; seamless cross-referral and follow-up protocols between primary care and behavioral health; integration of industry standard symptoms rating scales (e.g., PHQ-9, GAD-7) to identify unmet behavioral health needs; and a robust program of provider cross-training and continuing education.

6 in 10

Adults in the US have a chronic condition

1 out of 3

people with chronic medical conditions experience depression

only 5%

of adults are screened for depression in primary care





Relationship-centric support

Extensive research shows that a strong therapeutic relationship between therapist and patient is one of the most important factors in successful treatment outcomes. Individuals should have the opportunity to work with the same providers over time to establish a positive therapeutic relationship, which can include such qualities as mutual trust and respect, agreement on goals, and shared decision making. Maintaining continuity of patient–provider relationships is more likely with an employed provider network. An employed provider network also allows for consistent quality and training. Providers should receive extensive training in "webside" manner to effectively deploy patient–centered interventions, such as motivational interviewing, that strengthen the therapeutic relationship in a virtual setting.

Summary

We have reached an inflection point in the need for and understanding of impactful behavioral health services. Investing in preventive behavioral health offers a powerful way for employers to help ensure optimal treatment outcomes, increased workplace productivity, higher quality of life, and lower total healthcare costs.



How We Can Help

Our integrated Behavioral Health solution delivers compassionate, coordinated therapy, psychiatry, and coaching to your employees. Our employed providers include licensed psychiatrists, psychologists, master's level therapists, and certified coaches—allowing us to address a wide range of care needs, from subclinical to complex care. Consistent with our whole person approach, our medical providers are cross–trained to recognize, score, and treat mental health issues, and they coordinate closely with our behavioral health providers though chart sharing, cross–referrals, and coordinated care plans and care management.

Our proven outcomes are the greatest testament to the high-value care we deliver. Through our virtual psychiatry and therapy visits, we have demonstrated significant reductions in symptoms of depression that exceed industry benchmarks for in-person treatment.

Our Behavioral Health solution is part of our Total Virtual Care™ approach that delivers evidence-based, whole-person care integrated with your larger benefits network to ensure employees receive other appropriate services along the care continuum.



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