# Emerging Collaborations for Mental Health Wellness Today's Featured Speakers



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## Cross-System Collaboration to Promote Child and Adolescent Behavioral Health

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## Overview of Presentation

- AmeriHealth Caritas Ohio Who We Are
- Next Generation of Medicaid Managed Care
- Child and Adolescent Behavioral Health Crisis
- Behavioral Health Snapshot of Ohio's Youth
- School-Based Behavioral Health Care Initiative
- Resources: (1) How to Take Action and (2) OhioRISE

# AmeriHealth Caritas Ohio (ACOH) One of Ohio's New Medicaid Managed Care Organizations (MCOs)

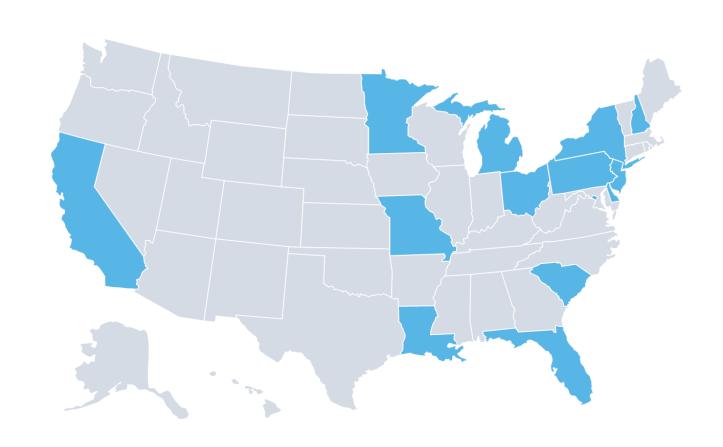
https://www.amerihealthcaritasoh.com/



#### AmeriHealth Caritas Family of Companies



- Over 35 years experience as national leaders in managed care solutions for those most in need
- More then 5 million members across
   12 states and D.C. with an expanding national footprint
- AmeriHealth Caritas Ohio launched February 2023 with Ohio's Next Generation Medicaid Program



## Organizational Alignment with Ohio's Next Generation Medicaid Program



#### **Our Mission**

To help people get care, stay well, and build healthy communities

#### **Our Vision**

To be the national leader in empowering those in need, especially the marginalized and underserved, across their full life journey from wellness to resilience



#### Ohio Medicaid | Next Generation Managed Care Program



• 7 MCOs and OhioRISE (statewide program for youth with complex behavioral health and multisystem needs)

#### Next Generation Highlights:

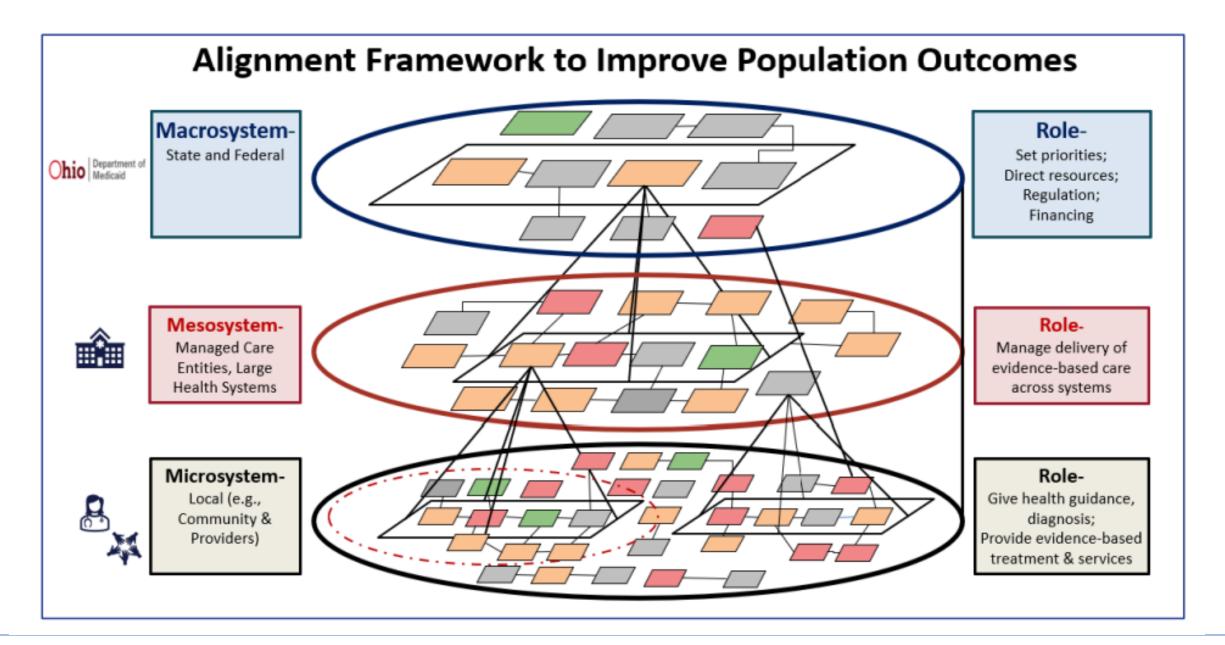
- Population Health Approach
- Quality Improvement Program
- Health Equity Commitment
- Cross-Plan Collaboration
  - Standardization and transparency
  - Joint QI and community reinvestment projects for collective impact





## Applegate Alignment Model

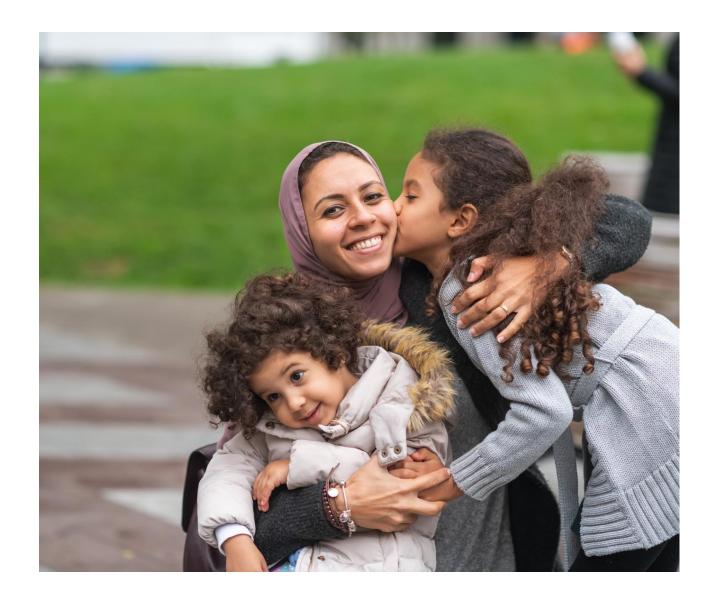




## **Population Health Priority**



Improve Behavioral Health and Wellness Outcomes among Ohio's Children and Adolescents





## Behavioral Health | Definition

encompasses mental health and substance use, as well as overall psychological well-being and any behavior that affects whole person health (including physical, emotional, and social health)<sup>1,2,3</sup>

1. American Psychological Association. APA dictionary of psychology <a href="https://dictionary.apa.org/behavioral-health">https://dictionary.apa.org/behavioral-health</a>

2. Centers for Medicare and Medicaid Services. Behavioral health; 2020 <a href="https://www.cms.gov/behavioral-health">https://www.cms.gov/behavioral-health</a>
3. Center for Disease Control and Prevention <a href="https://www.cdc.gov/pcd/issues/2020/20">https://www.cdc.gov/pcd/issues/2020/20</a>

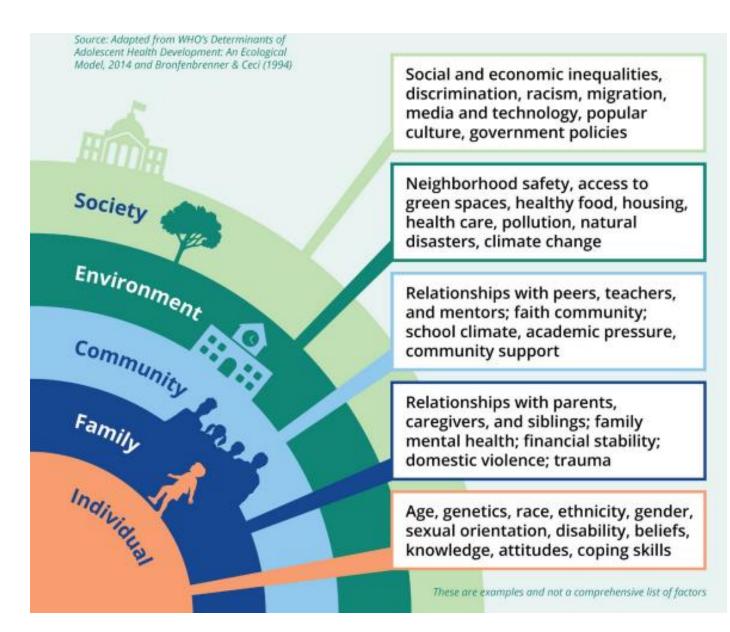
#### Youth Behavioral Health Crisis Predates the Pandemic



CDC's National Youth Risk Behavior Survey showed alarming increase in depression symptoms and suicidal thoughts/behaviors in the 10 years preceding the pandemic

Many Factors Impact
Child and Adolescent
Behavioral Health

CDC Youth Risk Behavior Survey (2009-2019 Trends Report) (<a href="https://www.cdc.gov/healthyyouth/data/yrbs/index.htm">https://www.cdc.gov/healthyyouth/data/yrbs/index.htm</a>)



### Pandemic-Era Stressors Amplified Existing Crisis



Disruptions to Home, School, Community

Social Isolation
Disconnectedness
Social Media

## Loss of Important Activities

extracurriculars, school events, graduation, family gatherings, celebrations, etc.

Loss of Loved Ones
200K U.S. youth lost a parent
or caregiver to COVID-19

Financial Concerns
29% of students had a parent

or caregiver lose their job

Abuse at Home

55% reported emotional abuse and 11% reported physical abuse at home

Covid-19 Orphanhood, Imperial College London, 2022; CDC Adolescent Behaviors and Experiences Survey, Jan-June 2021.





## Schools Play an Essential Role to Child Development, Health, Wellness, and Safety

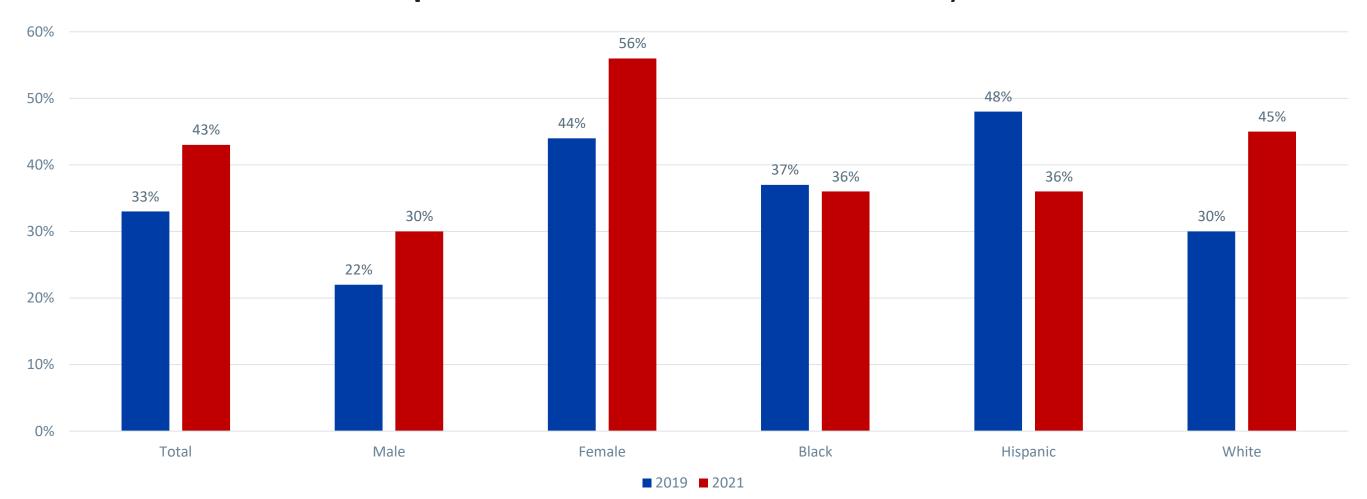
- Academic and intellectual development
- Structure, organization, and routine
- Safe environment (adult supervision)
- Physical activity, exercise, recreation
- Social and emotional development
- Community, connectedness, sense of belonging
- Access to critical services, supports, resources

# Behavioral Health Snapshot Ohio's Youth



## Youth Depression | 2019 vs. 2021

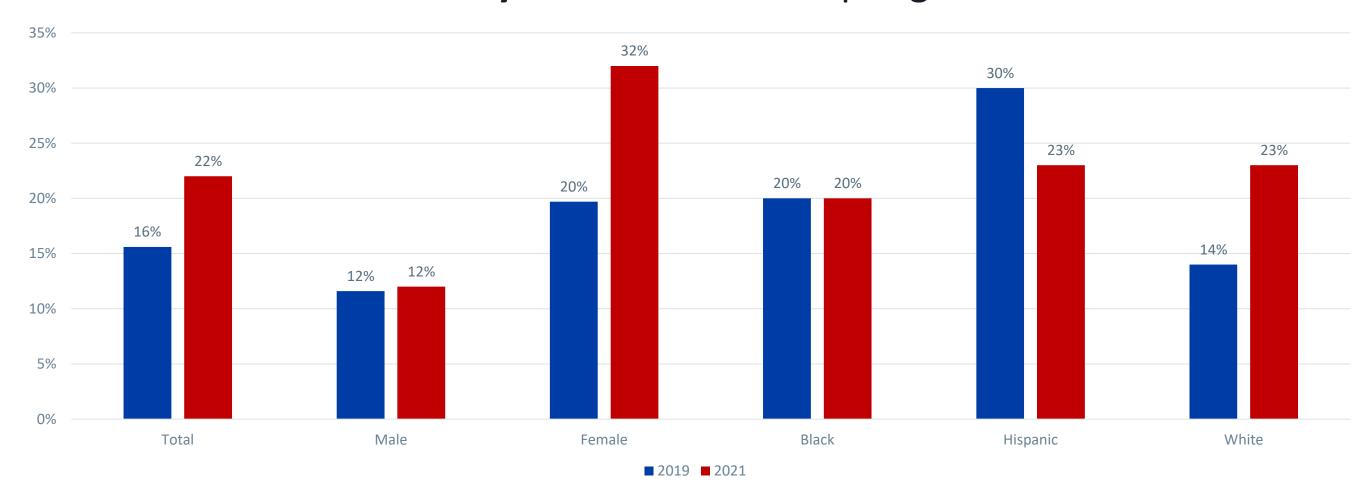
% of High School Students in Ohio reporting **Persistent Sadness and Hopelessness** that Interferes with Daily Activities



CDC Youth Risk Behavior Survey (2019 and 2021) | https://www.cdc.gov/healthyyouth/data/yrbs/index.htm

## Suicidal Thoughts | 2019 vs. 2021

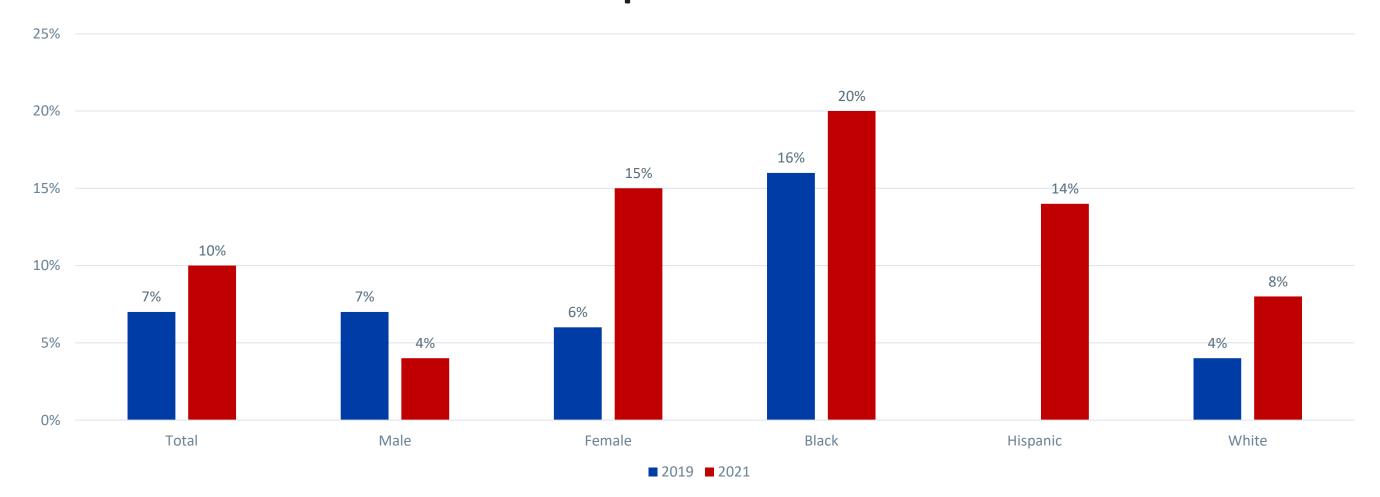
## % of High School Students in Ohio who **Seriously Considered** Attempting Suicide



CDC Youth Risk Behavior Survey (2019 and 2021) | https://www.cdc.gov/healthyyouth/data/yrbs/index.htm

## Youth Suicide Attempts | 2019 vs. 2021

#### % of High School Students in Ohio who Reported **Suicide Attempt** within last 12 months

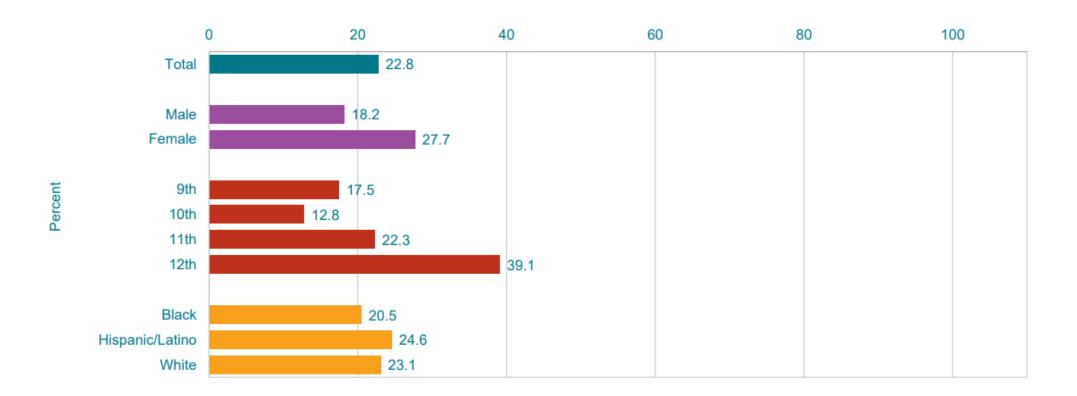


CDC Youth Risk Behavior Survey (2019 and 2021) | https://www.cdc.gov/healthyyouth/data/yrbs/index.htm

## Ohio Youth | Alcohol Use (2021)

CDC Youth Risk Behavior Survey (2021) | https://www.cdc.gov/healthyyouth/data/yrbs/index.htm

### Percentage of High School Students Who Currently Drank Alcohol,\* by Sex, Grade,† and Race/Ethnicity, 2021



<sup>\*</sup>At least one drink of alcohol, on at least 1 day during the 30 days before the survey †11th > 10th, 12th > 9th, 12th > 10th, 12th > 11th (Based on t-test analysis, p < 0.05.)

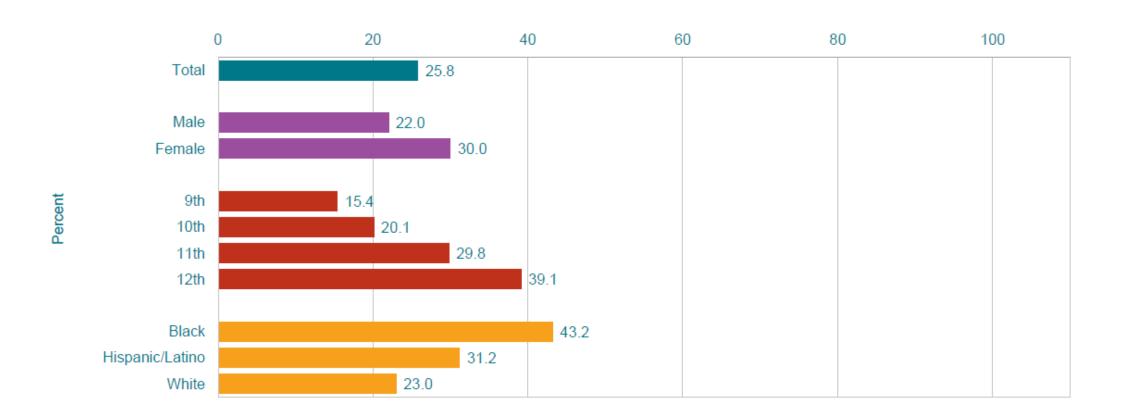
This graph contains weighted results.

All Hispanic students are included in the Hispanic category. All other races are non-Hispanic.

## Ohio Youth | Marijuana Use (2021)

CDC Youth Risk Behavior Survey (2021) | https://www.cdc.gov/healthyyouth/data/yrbs/index.htm

Percentage of High School Students Who Ever Used Marijuana,\* by Sex, Grade,† and Race/Ethnicity,† 2021



<sup>\*</sup>One or more times during their life

Ohio - YRBS, 2021 - QN45

<sup>†11</sup>th > 9th, 12th > 9th; B > W (Based on t-test analysis, p < 0.05.)

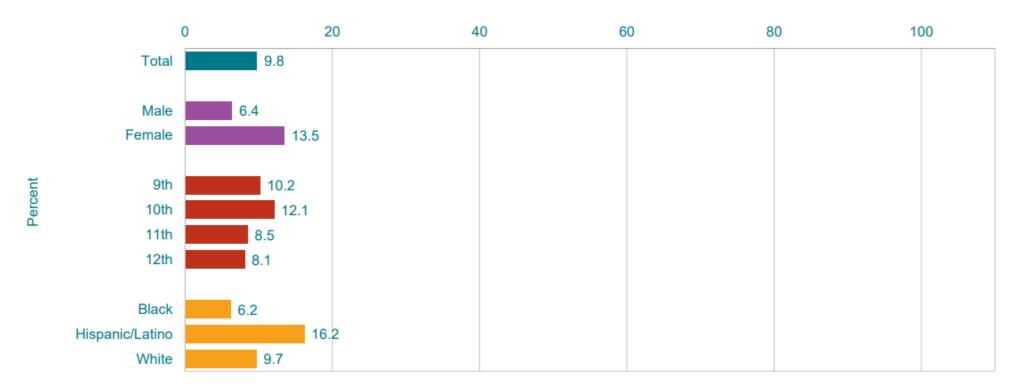
All Hispanic students are included in the Hispanic category. All other races are non-Hispanic.

This graph contains weighted results.

## Ohio Youth | Opioid Misuse (2021)

CDC Youth Risk Behavior Survey (2021) | https://www.cdc.gov/healthyyouth/data/yrbs/index.htm

Percentage of High School Students Who Ever Took Prescription Pain Medicine Without a Doctor's Prescription or Differently Than How a Doctor Told Them to Use It,\* by Sex,† Grade, and Race/Ethnicity, 2021



<sup>\*</sup>Counting drugs such as codeine, Vicodin, OxyContin, Hydrocodone, and Percocet, one or more times during their life †F > M (Based on t-test analysis, p < 0.05.)

All Hispanic students are included in the Hispanic category. All other races are non-Hispanic. This graph contains weighted results.

## Ohio Youth | Behavioral Health Disparities



Girls, LGBTQ+ youth, and racial/ethnic minorities are at increased risk

#### **Risk Factors Include:**

- Systemic and structural racism
- Stigma and discrimination
- Peer victimization and bullying
- Unrealistic standards around physical appearance and weight (girls)
- Sexual harassment and violence (girls)

## Takeaways | Call to Action



- Youth behavioral health decline predated and intensified by pandemic
- Girls, LGBTQ+ youth, and racial/ethnic minorities at higher risk
- Schools play critical role in youth development, health, wellness, safety, and sense of belonging

Cross-system collaboration is essential Everyone has a role to play

PRIORITY:

Partnering with and building capacity in schools

## Challenges & Opportunities



High Demand 350% increase in demand for BH

Workforce Shortage
42 BH professional
shortage areas

School Counselors
403 students to 1
counselor in Ohio

Burnout & Stress in education and BH workforce

Payment Models

Do not support full

continuum care

Ohio Department of Mental Health & Addiction Services. (2021). Understanding Supply and Demand Within Ohio's Behavioral Health System [White paper]; American School Counselor Association Student-to-School-Counselor Ratio (2020-2021)

# Better Health Partnership Child and Adolescent Behavioral Health Subcommittee



School-Based **Behavioral Health Care** 

Tier 3:

FEW Students

5% of students with complex BH needs

#### **AmeriHealth** Caritas Ohio

**Tier 2:** 

Inpatient and residential services

Outpatient BH, Intensive Outpatient

(IOPs), Partial Hospitalization (PHPs)

**Tier 3: Treatment & Recovery** 

Care management services

Comprehensive BH evaluation

**BH Crisis Services** 

Think of the season of the sea Level of care increases with complexity, severity, and risk

Secondary Prevention and Early Intervention

SOME Students (25-30%) with emerging risk and mild to moderate BH needs

#### **Tier 2: Secondary Prevention & Early Intervention**

- Targeted BH assessment + brief intervention in schools
- Paraprofessionals (e.g., family support specialists) to provide education, skills training, coaching, and support
- BH clinicians to provide brief evidence-based treatments (incl. group programs) in school setting
- School-based programs for at-risk youth and families

#### Tier 1:

**Universal Prevention and Supports** 

**ALL Students** 

#### **Tier 1: BH Promotion & Primary Prevention**

- Universal BH screening in classrooms and clinics
- Health/wellness education and tools (incl. BH)
- BH destigmatize campaign and events to build awareness, relationships, and trust
- Social-emotional learning curricula
- Teacher, caregiver, gatekeeper education/support

#### School-Based Behavioral Health Initiative



Universal (school-wide) Screening to identify youth and families with BH needs and emerging risk

Evidence-Based Interventions & Supports focused on modifiable risk and protective factors (e.g., school and family connectedness; caregiver engagement; youth coping and psychological flexibility)

Teacher, Staff, and Caregiver Support to reduce burnout/stress and promote behavioral health/wellness

https://publications.aap.org/pediatrics/article/144/1/e20183766/37106/Adolescent-Connectedness-and-Adult-Health-Outcomes?autologincheck=redirected

## More to Come...



#### How to Take Action Based on Your Role



Visit: <a href="https://www.hhs.gov/surgeongeneral/priorities/youth-mental-health/index.html">https://www.hhs.gov/surgeongeneral/priorities/youth-mental-health/index.html</a>

Young People

Family & Caregivers

Educators

Healthcare Professionals

Journalists & Media

Social Media & Video Game Companies

Community Organizations

**Funders** 

**Employers** 

Governments

Researchers

#### Additional Information about the OhioRISE Program



What is OhioRISE? OhioRISE is a special Medicaid program designed to help youth up to age 20 who have complex behavioral health challenges.

How does OhioRISE help improve the education experience? OhioRISE can help students who struggle in the classroom due to unmet behavioral health needs.

When should a student be referred to OhioRISE? The following behaviors may indicate a student's need for additional support and/or referral to OhioRISE:

- Difficulty controlling emotions
- Changes in social interactions/ withdrawing from peers and friends
- Changes in academic performance
- Behavioral challenges: aggression, defiance, impulsivity, or hyperactivity
- Self harm or threats to harm others
- Disorganized thinking and speech
- Involvement in multiple system (e.g., justice, child welfare, developmental disability)

#### How does a Student enroll in OhioRISE?

- Certain needs for behavioral healthcare identified by the Child and Adolescent Needs and Strengths (CANS) assessment, or
- A recent inpatient hospital stay for mental illness or substance use disorder, or
- A recent inpatient stay in a Psychiatric Residential Treatment Facility (PRTF)



## Thank You

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