



The Massachusetts Health Policy Forum's Student Forum

January 6, 2021

Brooke Doyle

Commissioner

Massachusetts Department of Mental Health



Important Facts:

Epidemic of Premature Death

In the US the average life expectancy has increased steadily to
78.7 years (National Center for Health Statistics)

The average life span for SPMI ranged from 49 – 60 years
(National Institute for Mental Health-NIMH)

25-30 years shorter life span than the general public

Declining over the past 30 years

If substance use is factored in 10 years shorter

Disproportionate risk of death from preventable cardio
metabolic risk factors, common chronic illnesses and
cardiovascular disease

The average loss of life expectancy of all cancers combined is
15 years



Important Child/Adolescent Statistics:

- 21% of children and adolescents in the US meet diagnostic criteria for MH disorder with impaired functioning
- 50% of adult psychiatric conditions are diagnosable by a youth's 14th birthday and 75% by age 25
- 50% of adults in US with MH disorders had symptoms by the age of 14
- Children with chronic medical conditions have more than 2x the likelihood of having a MH disorder
- We know that people recover from mental illness...treatment works...social determinants of health influences recovery



DMH Statutory Mandate

To take cognizance of all matters affecting the mental health of the citizens of the Commonwealth; and specifically, to:

- provide for services to citizens with long-term or serious mental illness, through a comprehensive program of community mental health services;
- support research into the causes of mental illness; and
- have supervision and control of all public facilities for mentally ill persons and to have general supervision, through licensing, of all private facilities for such persons.

DMH:

- Provides or arranges for DMH community services for adults, children and youth for whom services are authorized;
- Operates inpatient continuing care psychiatric facilities and licenses private acute inpatient facilities;
- Establishes standards and policies to ensure effective and culturally competent care that promotes recovery and self-determination and protects human rights; and
- Supports mental health training and research.

Legal Sources of Authority:

M.G.L. ch. 19; M.G.L. ch. 123; 104 CMR 25.00 thru 33.00



DMH Mission and Vision

MISSION

The Department of Mental Health, as the State Mental Health Authority, assures and provides access to services and supports to meet the mental health needs of individuals of all ages, enabling them to live, work and participate in their communities. Recognizing that mental health is an essential part of healthcare, the Department establishes standards to ensure effective and culturally competent care to promote recovery. The Department sets policy, promotes self-determination, protects human rights and supports mental health training and research. This critical mission is accomplished by working in partnership with other state agencies, individuals, families, providers and communities.

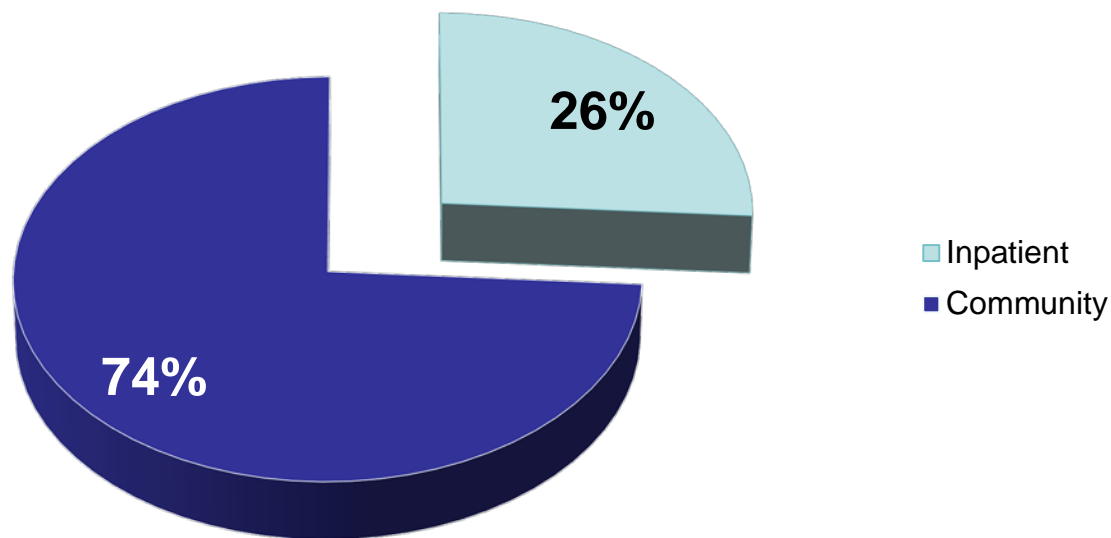
VISION

Mental health care is an essential part of health care. The Massachusetts Department of Mental Health, as the State Mental Health Authority, promotes mental health through early intervention, treatment, education, policy and regulation so that all residents of the Commonwealth may live full and productive lives.



DMH Budget Expenditures: Majority spent on Community-Based Services

2020 DMH EXPENDITURE DISTRIBUTION





DMH Services

Community-based Services include:

- Adult Community Clinical Services (ACCS)
- Program of Assertive Community Treatment (PACT)
- Clubhouses
- Case Management
- Recovery Learning Communities
- Forensic - Court Clinic, Jail Diversion and Re-entry Services
- Respite Services
- Homeless Support Services
- Child, Youth and Family (CYF) intensive home-based services
- CFY Flexible Support Services
- CYF Day Treatment/After School Services
- CYF School and Community-based Support Services
- Young Adult Access Centers



DMH Private Facility Licensure

Facility Licensure:

- DMH oversees the licensure of 2,778 beds in 63 licensed inpatient facilities:
 - Freestanding psychiatric hospitals and
 - Psychiatric units in general hospitals
 - 4 Intensive residential treatment programs for children and adolescents totaling 80 beds
- DMH ensures that licensed hospitals are in compliance with regulatory requirements based on bi-annual licensing surveys, reviews of incidents, complaints, and unannounced inspections. DMH Licensing also conducts Human Rights Trainings regularly for licensed facility staff. A Restraint Prevention Conference is also provided annually in collaboration with the Child, Youth, and Family Service Division for licensed facilities.



DMH Research Centers of Excellence

1. Department of Psychiatry-MGH; The Center of Excellence for Psychosocial and Systemic Research
 2. UMass Implementation Science and Practice Advances Research Center (iSPARC)
 3. Children's Behavioral Health Knowledge Center
- DMH Guiding Priorities for Research:
 - Culturally competent research and evidence-based practices
 - Consumer Involvement in Research
 - Dissemination of Research Finding to Accelerate the adoption of evidence-based practices

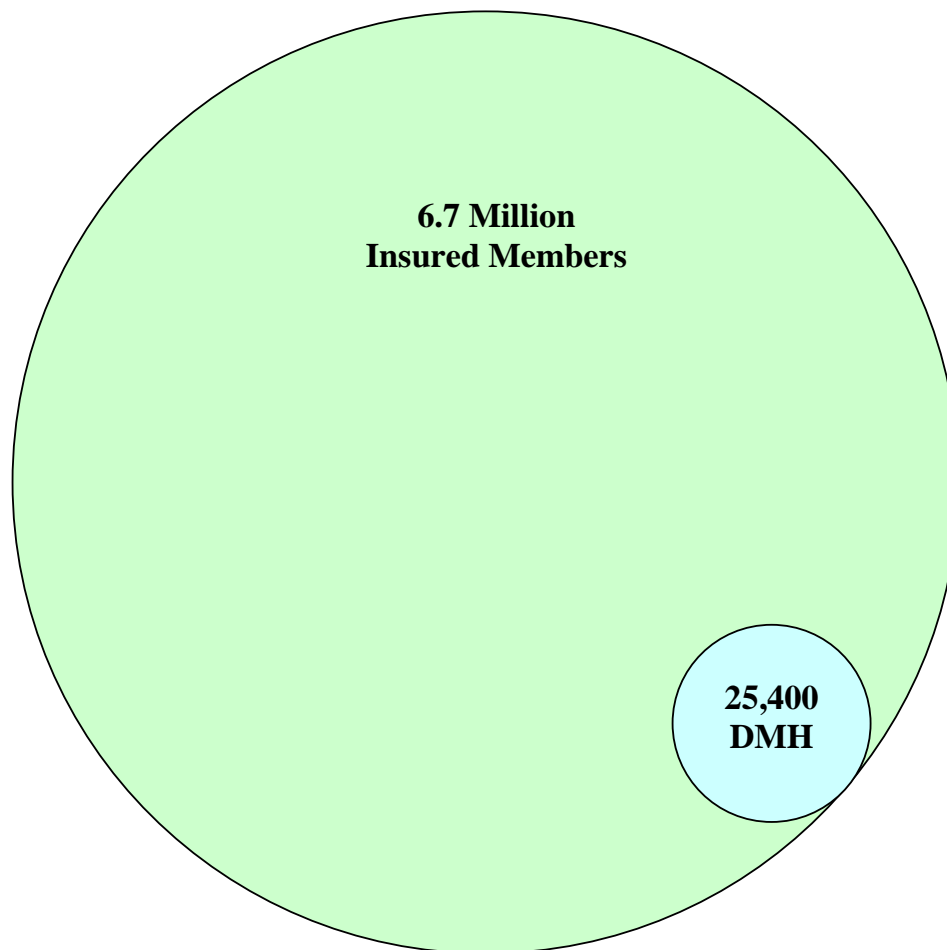


DMH Service Authorization

- Most mental health services, including medication and therapy, are provided through health insurance
- DMH provides supplemental, specialized services for people with the most serious needs to support these individuals so they can live fully in the community
- These services require approval by DMH. Some DMH services can be provided short-term while DMH is completing a clinical review and/or to meet a short-term critical need
- Approximately 25,000 individuals are currently authorized to receive DMH services
- Determining whether to authorize DMH services for an individual depends on an assessment of whether:
 - Individual meets the clinical criteria for DMH services;
 - Individual requires DMH services and has no other means for obtaining them;
 - DMH has available capacity.



Massachusetts Residents with Health Insurance (All Types) vs. Department of Mental Health Persons Served





Person Driven Care

The Continuum of Mental Health Services For Children, Youth and Families

(Not a complete list)

Services covered by Public (e.g., MassHealth) and State-Regulated Private Health Insurance Policies – Must Meet Medical Necessity Criteria (MNC)

Services covered by Public (e.g., MassHealth) and ALL Private Health Insurers - Must Meet MNC



Services covered by the Department of Mental Health

Must Meet **DMH Service Authorization** Criteria

Family Driven/Youth Guided Care

Mobile Crisis Intervention
Services provided by emergency services programs

- Crisis Intervention
- Screening for inpatient care
- Support to access community svcs.

Diversionsary/Intermediate
Provided by hospital, residential and community programs

- Partial Hospitalization
- Community Based Acute Treatment

Intensive Home-Based Services
Provided by community MH agencies

- Intensive Care Coordination
- In-Home Therapy
- In-Home Behavioral Services
- Family Partners
- Therapeutic Mentors

Outpatient Services
Provided by licensed mental health clinicians, in private practice, hospitals, group practices and mental health clinics

- Individual, Family, Group Therapy
- Medication Management

Prescription Drugs
Provided by pharmacies

- Prescribed Medications

Acute Inpatient Services
Provided by general hospital acute or free standing psychiatric hospitals

- Inpatient treatment

Case Management
Provided by DMH staff

- Assessments
- Service Planning & Monitoring
- Coordination
- Referral

Day Services
Provided by contracted community providers

- Therapeutic After-School Programs

School and Community Support Services
Provided by contracted community providers

- Consultation to schools
- Family Support Specialists
- Family Support Groups

Young Adult Access Centers
Provided by contracted community providers

- “Low barrier”, peer-led centers to support to young adults

Flexible Supports
Provided by contracted community providers

- Community Engagement
- Individualized youth and family services
- Camperships

Continuum Services
Provided by contracted providers

- Intensive Home-Based Clinical Services
- Group residential care

Intensive Residential Treatment Programs
Provided by contracted providers

- Intensive treatment in a locked setting for youth meeting commitment criteria

Continuing Care Inpatient Services

- inpatient treatment focusing on skill building & recovery



Person Driven Care

The Continuum of Mental Health Services

(Not a complete list)

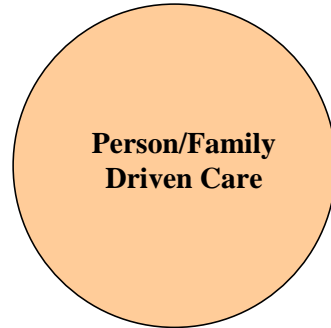
Services covered by Public (e.g., MassHealth) and Private (e.g., Blue Cross Blue Shield) Health Payers

Must Meet **Medical Necessity** Criteria



Services covered by the Department of Mental Health

Must Meet **DMH Service Authorization** Criteria



Emergency Services
Provided by emergency services programs, at general acute hospitals & state operated in limited locations – REMOVE red section

- Crisis Intervention and Screening Services
- Crisis Stabilization Services

Diversionary/Intermediate
Provided by community programs and at general acute hospitals

- Psychiatric Day Treatment
- Partial Hospitalization
- Community Based Acute Treatment

Outpatient Services
Provided by independent licensed mental health clinicians, at mental health clinics & state operated in limited locations

- Individual, Family, Group Therapy
- Medication Management
- Assessments

Prescription Drugs
 Provided by pharmacies

- Prescribed Medications

Acute Inpatient Services
Provided by general hospital acute or free standing psychiatric hospitals & state operated in limited locations

- Inpatient treatment

Peer Operated Services
Provided by contracted peer-operated organizations; DMH authorization is not needed

- Peer-Respite Services
- Recovery Learning Communities

Case Management
Provided by DMH

- Assessments
- Service Planning & Monitoring
- Coordination
- Referral

Continuing Care Inpatient Services
Provided by DMH

- Inpatient treatment focusing on rehabilitation & recovery/resiliency

Flexible Supports
Provided by contracted community providers

- Community Engagement
- Individualized youth and family services
- Tenancy Assistance
- Recovery Focused Activities

Clinical Services
Provided by contracted community providers and DMH

- Assessments and Service Planning Development
- Evidence-based clinical treatment and skills development

Residential Services
Provided by contracted community providers & state operated in limited locations

- Group Living
- Independent Living with Clinical Outreach
- Medication Management



**Person
Driven
Care**

The Continuum of Mental Health Services

(Not a complete list)

Hospital Services covered by Public (e.g., MassHealth) and Private (e.g., Blue Cross Blue Shield) Health Payers

Who Provides
Health payers contract through emergency services programs and emergency room departments with general hospitals (e.g., Massachusetts General Hospital) to provide emergency/crisis services. In addition, health payers contract with general acute hospitals and free standing acute psychiatric hospitals (e.g., McLean Hospital) to provide acute inpatient care which provides short-term, intensive diagnostic, evaluation, treatment and stabilization services to individuals experiencing an acute psychiatric episode.

Admissions
Persons who meet health payers' medical necessity criteria and need acute hospital level of care are admitted to a general hospital acute psychiatric unit or freestanding psychiatric hospital. Approximately, 68,000 individuals are admitted to acute inpatient psychiatric hospital settings each year. Only 10% of those admitted are DMH clients. A typical course of treatment lasts 10 to 14 days but may be as long as 30 days.
Persons who do not meet acute hospital level of care may be referred to community crisis stabilization services which are also covered by health payers.

Licensed Acute Hospitals & Beds
There are 63 licensed inpatient facilities with 2,778 psychiatric beds licensed by DMH.



Hospital Services covered by the Department of Mental Health

Who Provides
DMH operates and contracts for continuing care inpatient services. Continuing inpatient psychiatric care provides ongoing treatment, stabilization and rehabilitation services to the relatively few individuals who require longer term hospitalization that are beyond the capacity of the acute inpatient system.

Admissions
Persons are either court referred or meet DMH continuing care hospital level of care criteria and generally transferred to DMH after the conclusion of an acute inpatient course of treatment in a general hospital psychiatric unit or freestanding psychiatric hospital licensed by DMH. Persons are admitted to the first available bed in a DMH-operated inpatient unit or state hospital. On average, 1,400 adults per year are admitted to DMH for inpatient services. Approximately half of those are court referred. On average, treatment for non-court referred admissions lasts 180 days but may be much longer.

DMH Continuing Care Hospitals & Beds
There are statewide 663adult and 30 child/adolescent continuing care inpatient beds located at two state operated psychiatric hospitals (Worcester, Taunton), psychiatric units at two DPH hospitals (Shattuck, Tewksbury), psychiatric inpatient beds at Fuller Mental Health Center, and 30 contracted beds at a private hospital in Springfield.

**Person /Family
Driven Care**



Person Driven Care

Services covered by the Department of Mental Health

Apply for Community Services & Meet all Clinical, Functional, & Needs & Means Criteria

Person/Family Driven Care

Referral by the Courts or Acute General Hospital or Private Psychiatric Hospital & Meet Continuing Care Hospital Level of Care Criteria

25,400 Persons Served (3800 children and youth)
Continuing Care Community Services
 Flexible Supports Rehabilitative Services Peer Operated
 Case Management Residential Services

Continuing Care Inpatient Services
 Clinical Treatment Rehabilitative Services
 Court Ordered Evaluations/Treatment

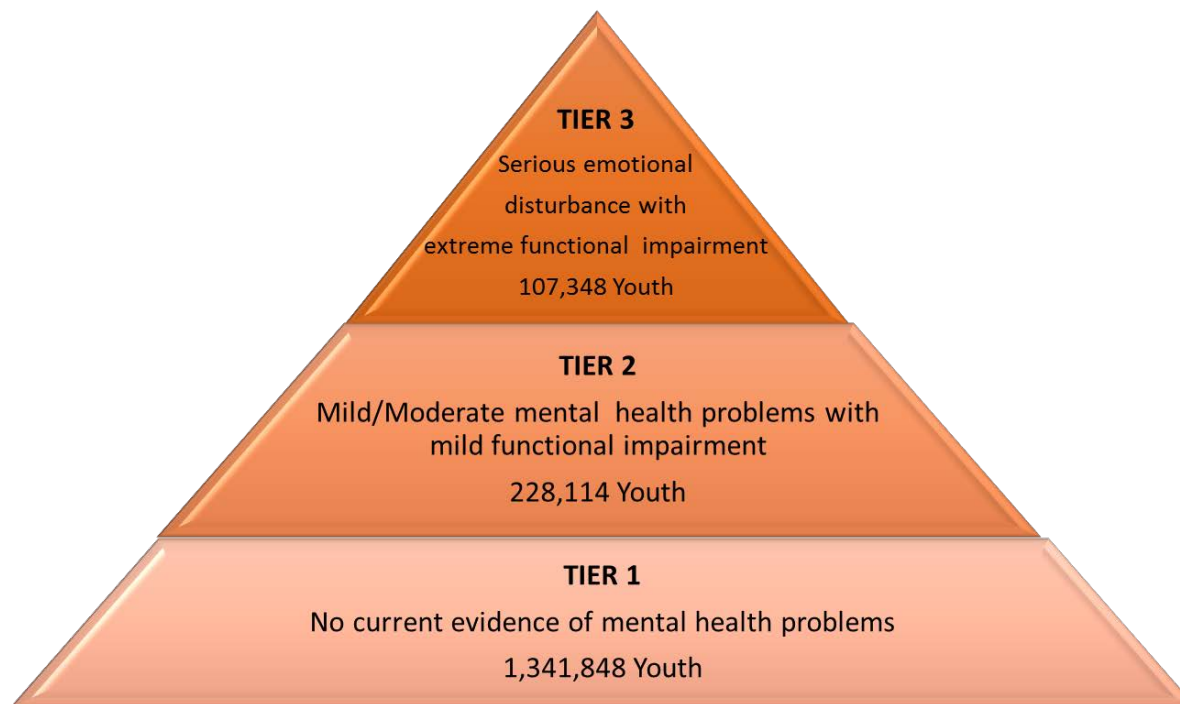
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|---|--|--|--|
| Adult Community Clinical Services | Program of Assertive Community Treatment | Clubhouse Services | Recovery Learning Communities |
| Respite Services | Homeless Outreach Teams & Shelter Services | Forensic Services Court Clinics | Jail Diversion Programs |
| Continuum & Flexible Support for Children, Youth & Families | Day Services: After School Programs | Intensive Residential Treatment Programs | School & Community Support/Young Adult Access Ctrs |

- Worcester Recovery Center & Hospital, incl. 30 adolescent beds
- Taunton State Hospital
- Shattuck Hospital
- Tewksbury Hospital
- Fuller Mental Health Center
- Contracted Beds in Springfield



Who Needs Mental Health Services?

***Estimated Level of Need Children, Youth and Young Adults (Ages 0-20)**



An estimated 1,677,310 youth between the ages of 0-20 are living in Massachusetts (24.3% of the total population). Tiers 3 and 2 represent 20% of the youth in MA based on the Surgeon General's report of any diagnosable mental illness disorder during childhood and adolescence.

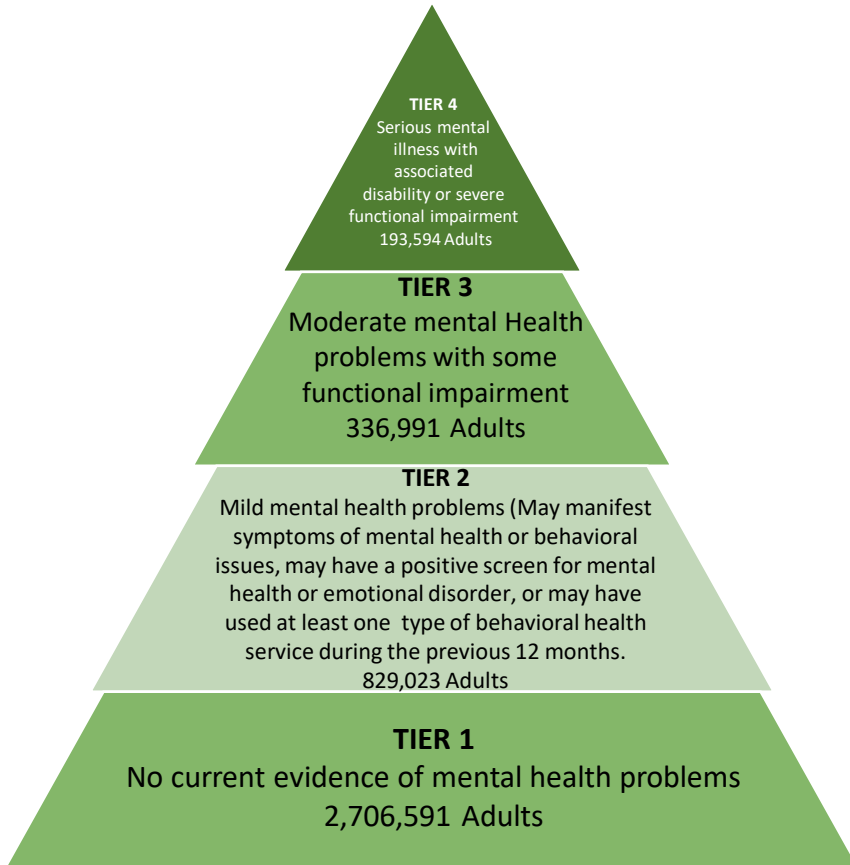
*Estimated Level of Need based on 2019 U.S. Census American Community Survey, 2019 National Institutes of Mental Health prevalence estimates.



Who Needs Mental Health Services?

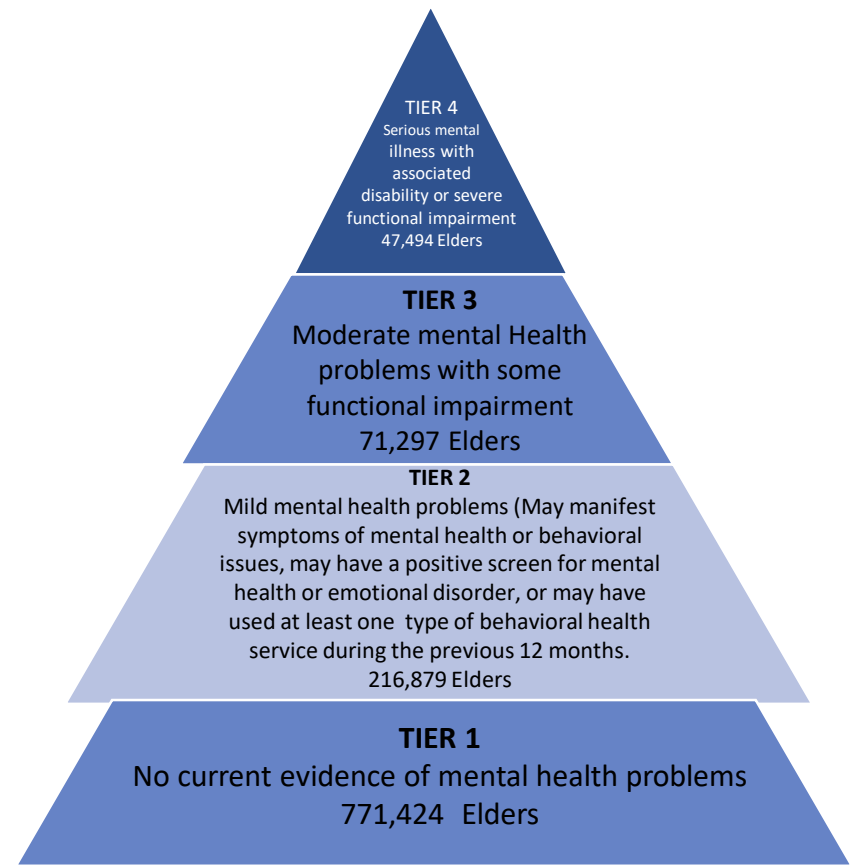
*Estimated Level of Need

Adults (Ages 21-64)



An estimated 4,066,154 individuals between the ages of 21 and 64 are living in Massachusetts (58.9% of the total population). 1,359,563 are potentially living with a mental illness.

Elders (Ages 65 & Above)



An estimated 1,107,089 individuals over the age of 65 are living in Massachusetts (16.1% of the total population). 335,669 are potentially living with a mental illness.

*Estimated Level of Need based on 2019 U.S. Census American Community Survey, 2019 National Institutes of Mental Health prevalence estimates.



DMH Services: *Brief Descriptions*

SERVICES	DESCRIPTION
Inpatient/Continuing Care System	DMH-operated psychiatric inpatient facilities: two psychiatric hospitals; psychiatric units in two public health hospitals; five community mental health centers that promote treatment, rehabilitation, recovery.
Adult Community Clinical Services (ACCS)	ACCS is a comprehensive, clinically focused service that provides clinical interventions and peer and family support to facilitate engagement, support full community participation and maximize symptom stabilization and self-management of individuals residing in all housing settings. In addition, ACCS provides a range of provider-based housing options as treatment settings to assist individuals in developing skills, establishing natural supports and resources to live successfully in the community.
Respite Services	Respite Services provide temporary short-term, community-based clinical and rehabilitative services that enable a person to live in the community as fully and independently as possible.
Program of Assertive Community Treatment (PACT)	A multidisciplinary team approach providing acute and long term support, community based psychiatric treatment, assertive outreach, and rehabilitation services to persons served.
Clubhouses	Clubhouse Services provide skill development and employment services that help individuals to develop skills in social networking, independent living, budgeting, accessing transportation, self-care, maintaining educational goals, and securing and retaining employment.
Recovery Learning Communities (RLCs)	Consumer-operated networks of self help/peer support, information and referral, advocacy and training activities.
DMH Case Management	State-operated service that provides assessment of needs, service planning development and monitoring, service referral and care coordination, and family/caregiver support.
Homelessness Services	Comprehensive screening, engagement, stabilization, needs assessment, and referral services for adults living in shelters.
Forensic Services	Provides forensic mental health assessments and consultations for individuals involved in the criminal justice system; court clinicians act as liaisons for court personnel on mental health issues in both adult and juvenile sessions.
Jail Diversion/Police Crisis Intervention Training	Supports 146 local communities and campus police at 13 Colleges/Universities to provide enhanced behavioral health intervention trainings to public safety personnel and to increase law enforcement's positive collaboration with local behavioral health service providers and other social and educational service entities. Training topics address people with behavioral health challenges of all ages, and for youth, focus on citizens with autism, emotional disturbance, substance use disorder,