



Whole Health Campaign Policy Brief: *Integrated Health Care*

Background

The prevalence of mental health and substance use disorders exacts an extraordinary toll on our country.

- Mental health and addictive disorders are the leading cause of combined death and disability for women and the second leading cause for men.
- Adults with serious mental illness die 25 years sooner than those who do not have a mental illness.
- In 2003, mental illness and substance use disorders led to \$171 billion in lost workplace productivity and, by 2013, this figure is estimated to rise to more than \$300 billion.

Mental illness and addiction disorders are treatable health challenges – just like cancer, diabetes, and heart disease. Recovery rates are comparable to and even surpass the treatment success rates for many physical health conditions. *Integrating care for mental health and addiction into all proposals to reform the nation's health care system would help alleviate the enormous costs of mental illness and addiction on employers, public health services, the criminal justice system, and millions of Americans and their families.*

The following recommendations were developed by the Whole Health Campaign (WHC), a collaboration of over 106 prominent national, state, and local mental health and addiction prevention, treatment, and recovery organizations working to make sure that the current healthcare debate includes both mind and body.

The WHC was initially organized to bring together mental health and addiction-focused organizations to ensure that the presidential candidates and two party platforms thoroughly integrate behavioral health into their healthcare reform strategies. Through this initiative, we have developed an active, collaborative organization made up of strong, independent mental health and addiction prevention, treatment, and recovery leaders and organizations that act in concert to promote the major goals of the Campaign.

Recommended Service Integration Goal and Related Actions

The WHC strongly recommends that National Health Reform endorse and implement the following integration goal and related action steps:

Ensure that National Health Reform promotes individual and family recovery from mental illnesses and addictions as integral to overall health and wellbeing. This means that mental

health, substance use, and primary health care services are fully integrated, and that mind and body issues are fully considered in the care of each person.

This goal has several critical action steps:

- Ensure that health reform proposals provide access to care for mental and substance use disorders, and physical disorders, in both primary and specialty care settings. As health reform proposes financing and service delivery models for primary and preventive care, such as *medical home models and wellness programs*, these models must be responsive to and inclusive of the needs of persons with mental and substance use disorders and their families.
- Ensure proactive leadership on integration of care for the *whole* person and the *whole* family that spans *whole* health, including mental health, substance use, primary care, and other specialty care services.
- Ensure that all health information technology systems support and promote an integrated approach to care and protect the privacy of personal health information.
- Assure that health reform proposals to improve the management of serious and chronic illnesses integrate care for the mental and substance use disorders of individuals and families. Health financing and care programs must support consumer and family education, intensive outreach, and care coordination, all of which are especially important for individuals with mental illnesses and substance use disorders.
- Strengthen workforce training so that healthcare professional and organizations are competent to prevent, treat, and support the recovery of individuals with mental illnesses and addiction. The health workforce includes mental health and addiction specialists, primary care and medical specialists, and individuals and families with mental illnesses and addition.
- Ensure that health financing is sufficient to support accessible, effective healthcare for people with mental and substance use disorders. Financial incentives and disincentives must be aligned to support access and quality healthcare for people with mental and substance use disorders *and* to support prevention, screening, early intervention and care coordination. Payment and reimbursement reform are crucial complements to coverage reform.

Recommended Infrastructure Changes Necessary to Achieve Integrated Whole Health Services

The WHC strongly recommends that National Health Reform endorse and implement the following infrastructure changes to facilitate the successful implementation of integrated service delivery that spans whole health services:

Behavioral health issues play a critical role in virtually all public health concerns from chronic and infectious disease prevention to emergency preparedness. In fact, the World Health Organization states that there is no health without mental health and defines health as “a state of complete physical, *mental* and social well-being, and not merely the absence of disease or infirmity” The WHC strongly recommends that the development of a common leadership structure for public health must integrally include mental and substance use conditions.

The WHC strongly recommends the following actions:

- Behavioral health issues should be considered in the creation of an independent governmental body to oversee the public’s health and assure federal, state, and local coordination. The Public Health Task Force appointed by the President should include strong and visible representation from the behavioral health field.
- Behavioral health expertise should be reflected within the White House and in key Federal agencies (Domestic Policy Council, the National Economic Council; Homeland Security Council, National Security Council, and the Office of Management and Budget). In addition, the Office of National Drug Control Policy should have a broader public health mandate focused on the prevention of drug, alcohol, and tobacco problems for adolescents and adults. The Office of National Drug Control Policy could serve as a model of a cabinet-level public health policy office within the Executive Office of the President with authority to review and approve the substance use budgets of Executive Agencies.
- A new Under Secretary for Health, having authority over the Public Health Service agencies, the Assistant Secretary for Preparedness and Response, and the Centers for Medicare and Medicaid Services, should be created. This position will be able to shape and coordinate federal public health policy, particularly around behavioral health policy and practice. The directives of that position should include ensuring that a focus on mental and substance use conditions is infused within all agencies it oversees. For example, the Under Secretary could require through regulation that all Medicaid waivers and State Medicaid plan amendments be reviewed and approved by his/her office to assure that they explicitly address behavioral health public health issues in an appropriate and responsible manner.
- To further ensure behavioral health issues are integrated within all federal cabinet departments, the proposed subcabinet working group and Office of Health Policy should include strong representation from the both mental health and addictions recovery and prevention communities.
- Worksite wellness for federal employees and their families should also include public behavioral health awareness activities, screening for tobacco use, mental health problems and unhealthy alcohol use, and brief confidential counseling for employees who have behavioral health conditions.

Specific Reform Recommendations on Mental Health and Substance Use Care and Prevention

Three documents have been prepared to define in detail the specific recommendations of the mental health and substance use fields around national health reform. These three documents are:

Benefit Design and Delivery of Care
Reforming the Healthcare Delivery System
Wellness Promotion and Chronic Disease Prevention Initiatives

We will be glad to provide either an e-version or paper copy of each of these documents.

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