

# Leadership in Public Mental Health

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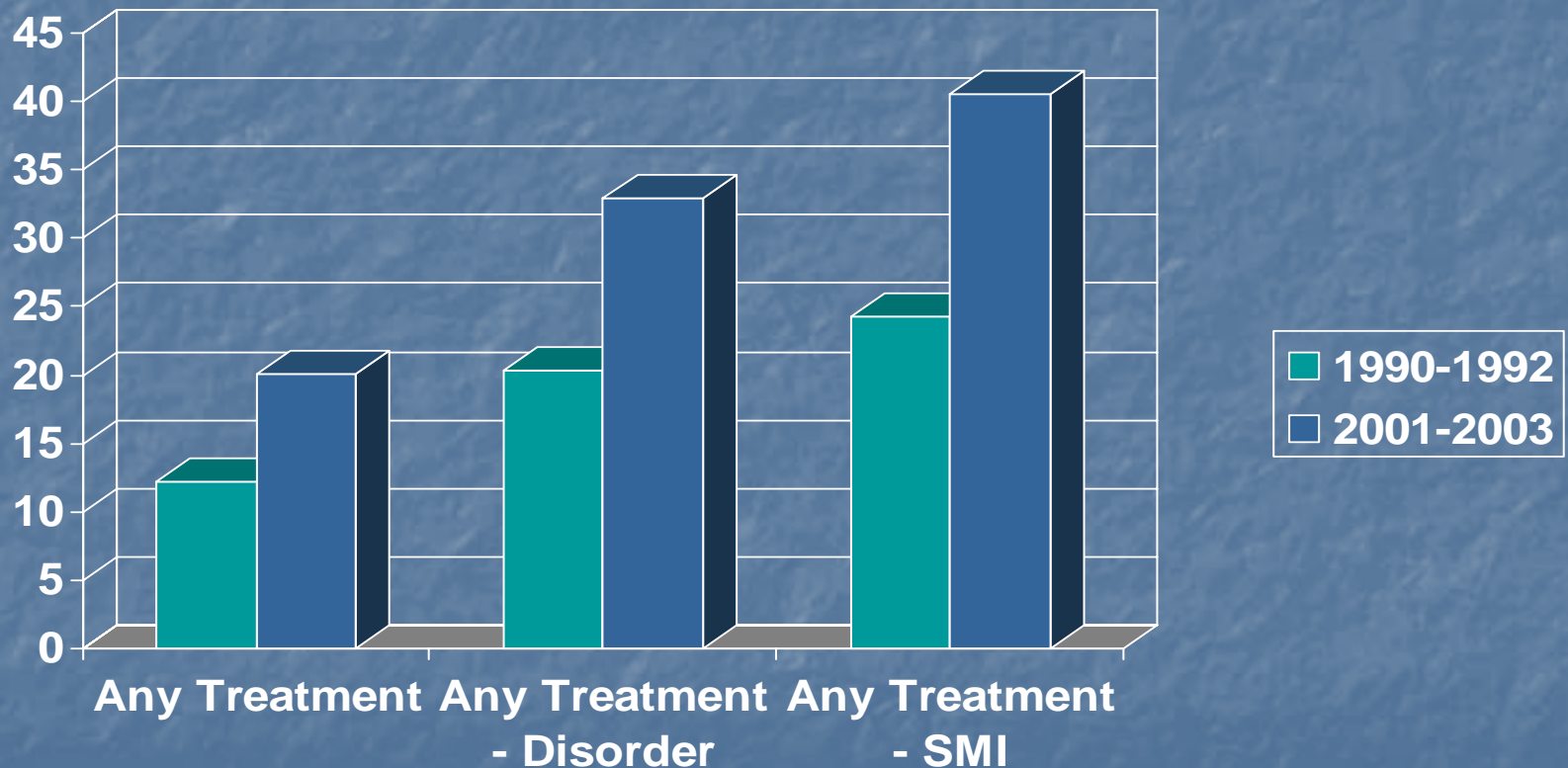
# Overview

- Past Performance of Mental Health System
- Sources of Progress to Date
- Recent Policy Changes
- Recent Changes in Well-Being
- Implications for Future Leadership

# Better...but not Well

- Substantial progress in well-being of people with mental illness 1950-2000

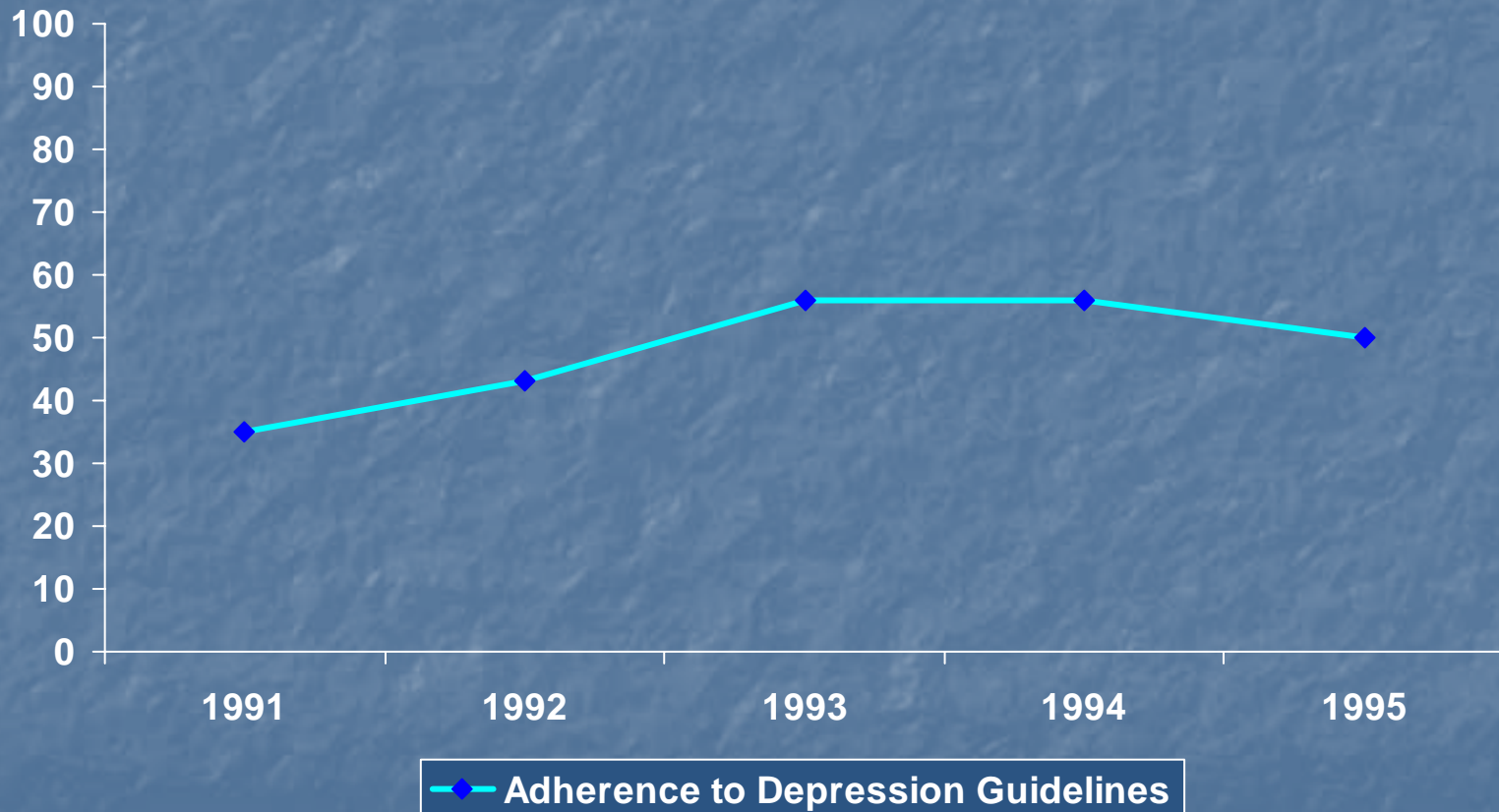
# More People Reported MH Treatment (Epidemiological Diagnosis)



# Recent Patterns

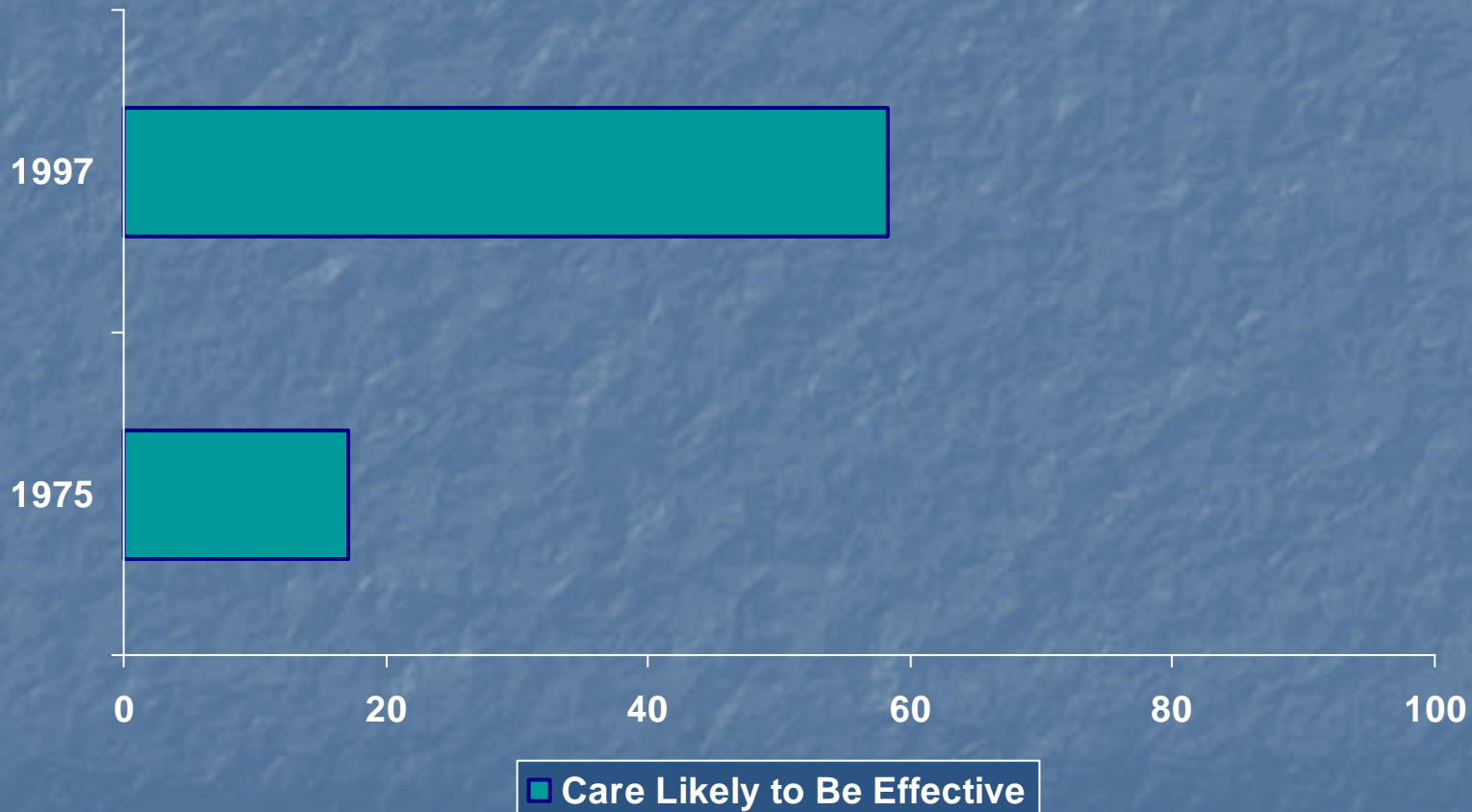
- Continued increases in diagnosis rates
  - Mainly in primary care
  - Mainly accompanied by Rx
  - Mainly among adults and seniors

# Quality of Care Received Improved - Depression



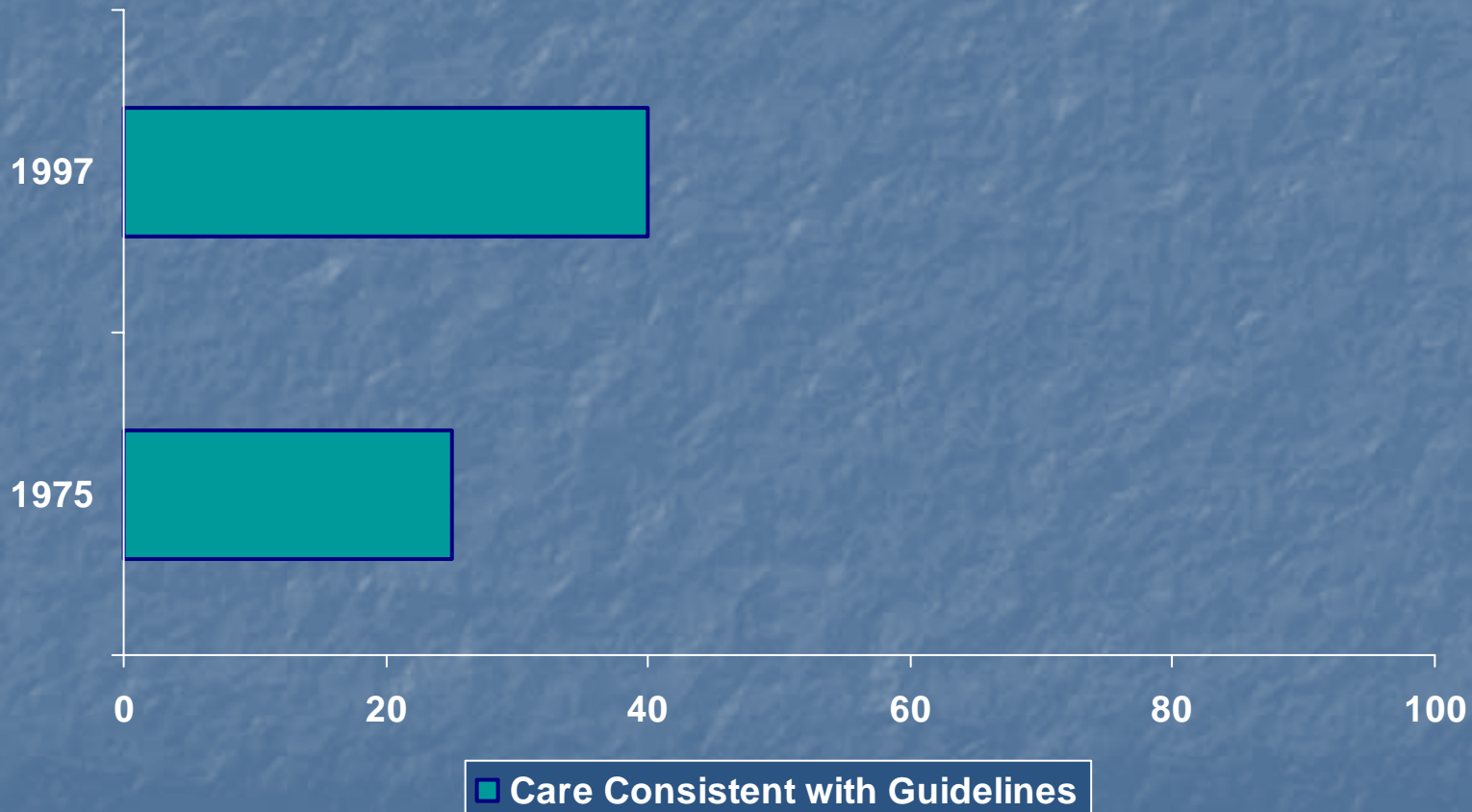
Source: MedStat

# Quality of Care Received Improved - ADD



Source: Frank and Glied

# Quality of Care Received Improved - Schizophrenia

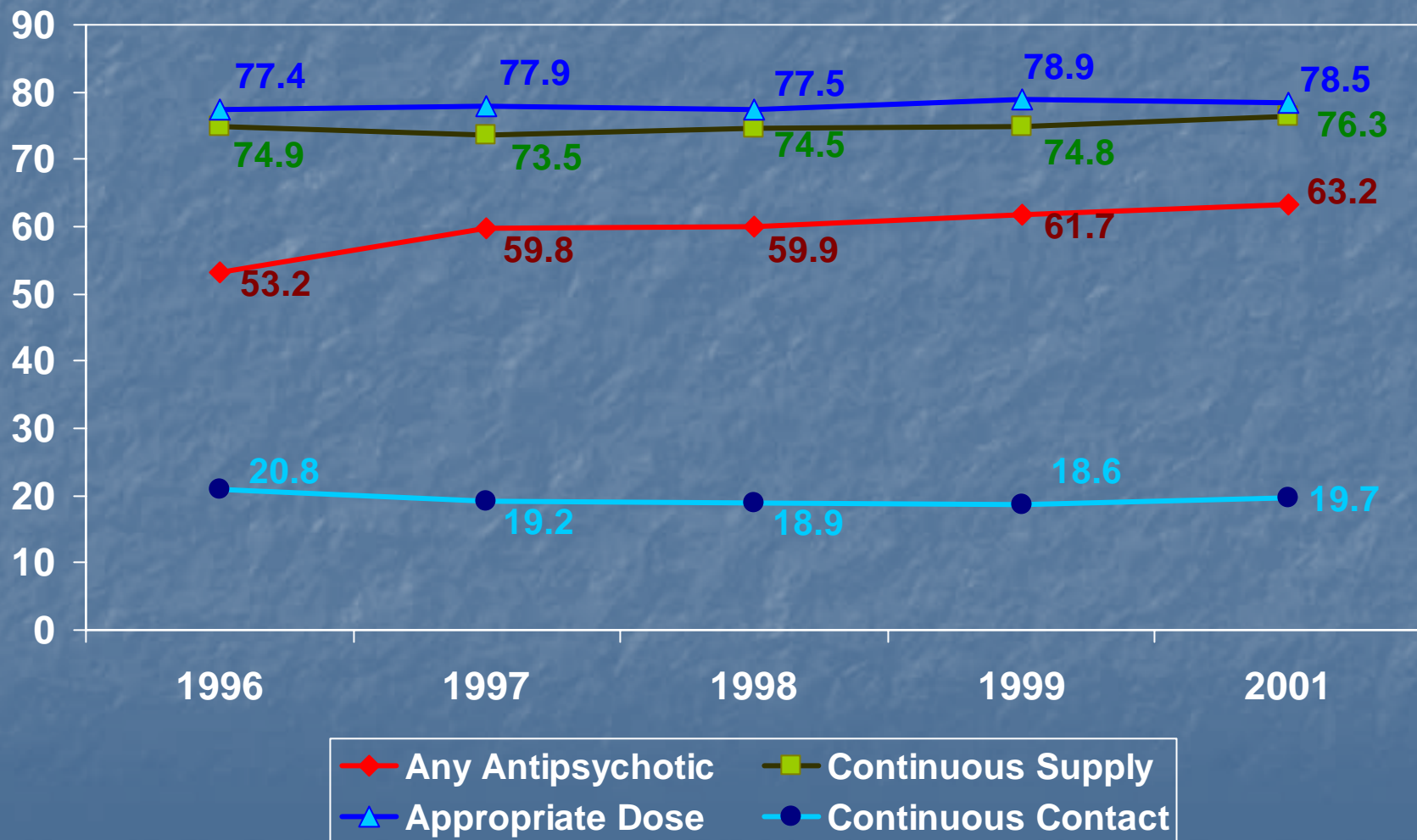


Source: Frank and Glied

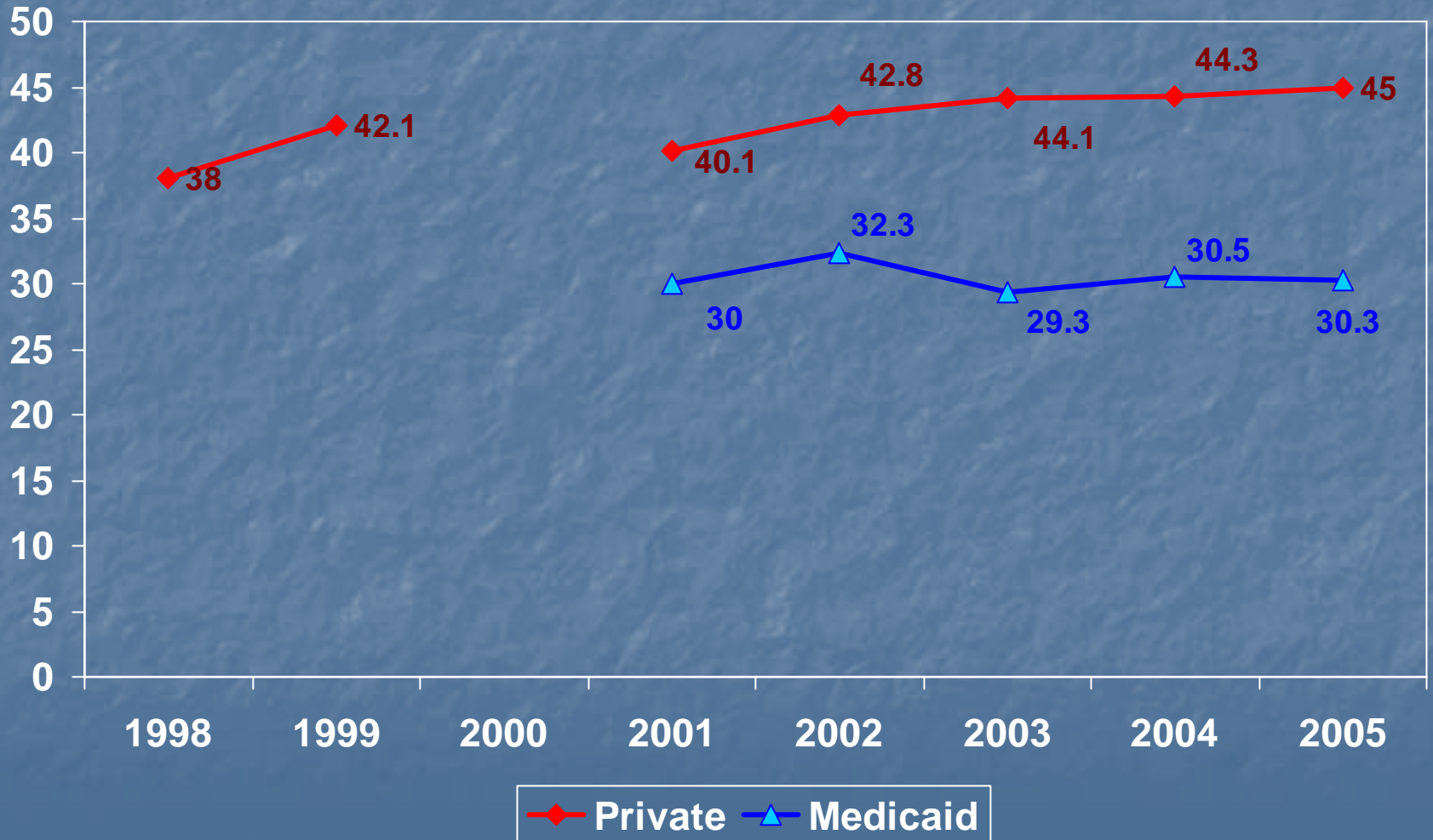
# Quality of Care Received Improved – Other Disorders

- Anxiety disorders
  - More receiving medications
  - Fewer receiving benzodiazepines
- Bipolar disorder
  - More receiving mood stabilizers
  - Higher intensity of psychotherapy use

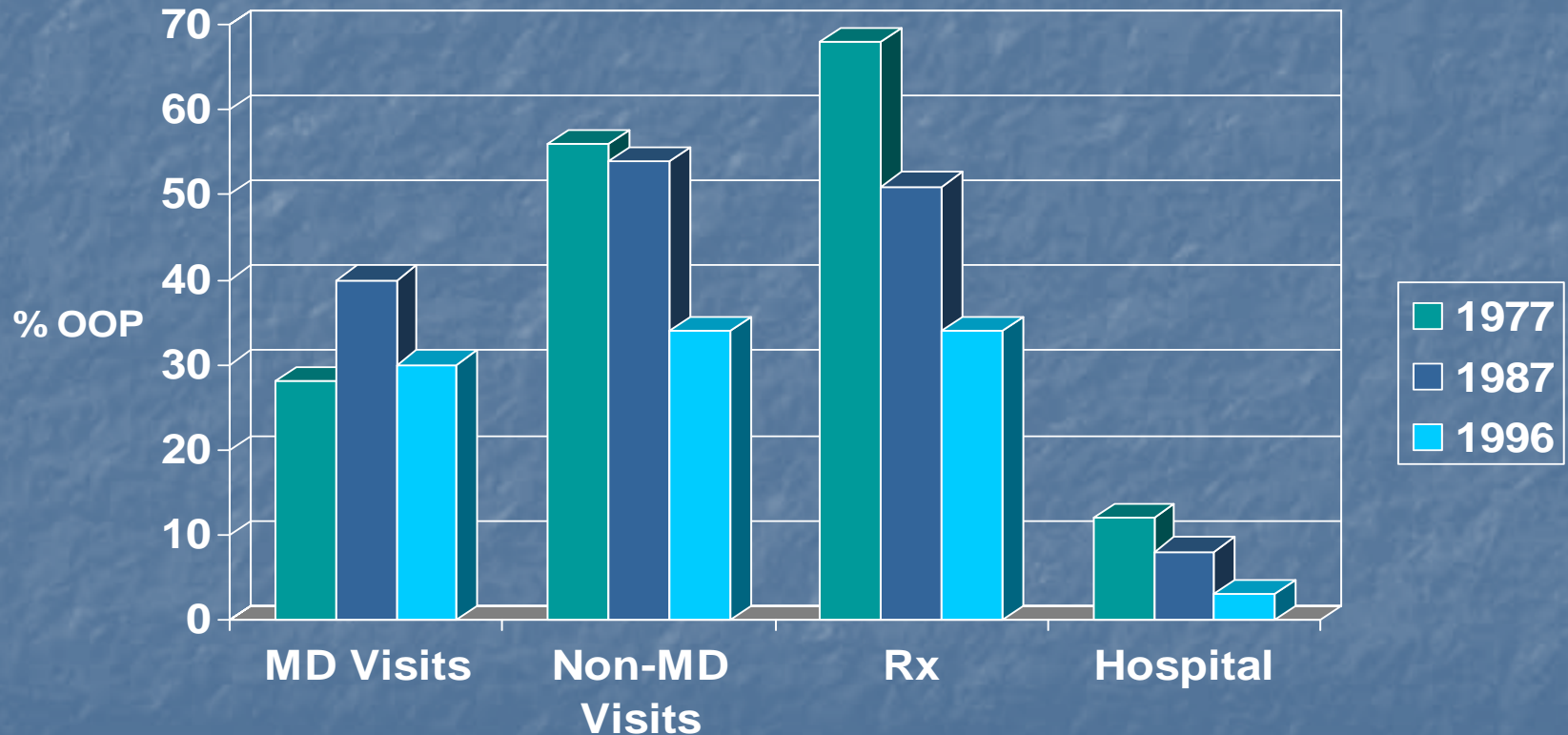
# Recent Changes: Quality Schizophrenia Treatment in Florida Medicaid



# Recent Changes: Percentage Of Patients Receiving Appropriate Continuation Treatment For Depression

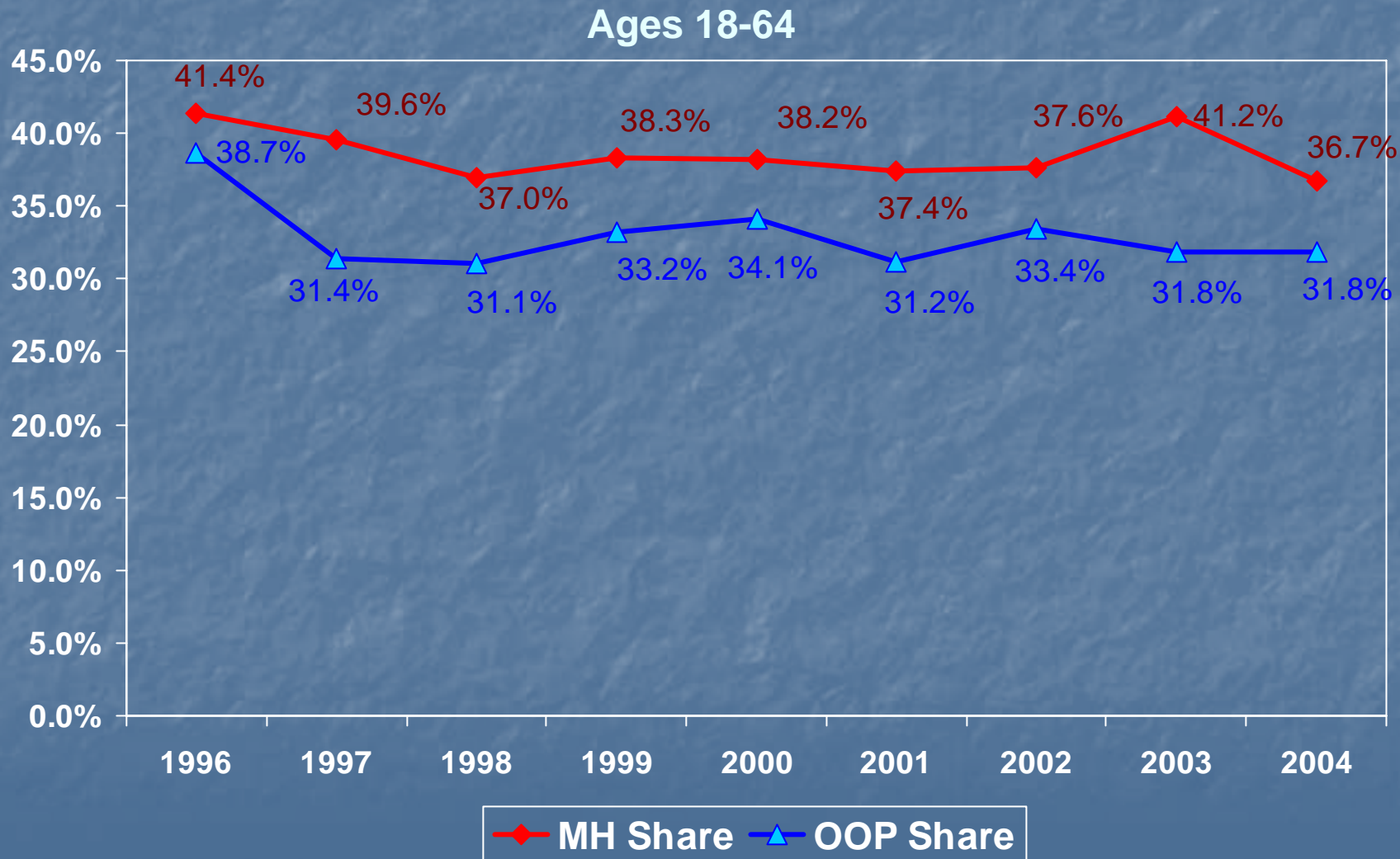


# Reduced Financial Burden (Out-of-Pocket Share of Expenses per Person with Dx)



Source: Frank and Glied

# Recent Changes: Mental Health OOP Adults as a Share of Mental Health and Total Health OOP (MEPS)



# Resources Increased

1972

- 31% receive food stamps
- 33% receive Medicaid
- No SSI
- 7% receive SSDI
- No section 8 housing

1998

- 63% receive food stamps
- 60% receive Medicaid
- 41% receive SSI
- 30% receive SSDI
- 4% have housing voucher

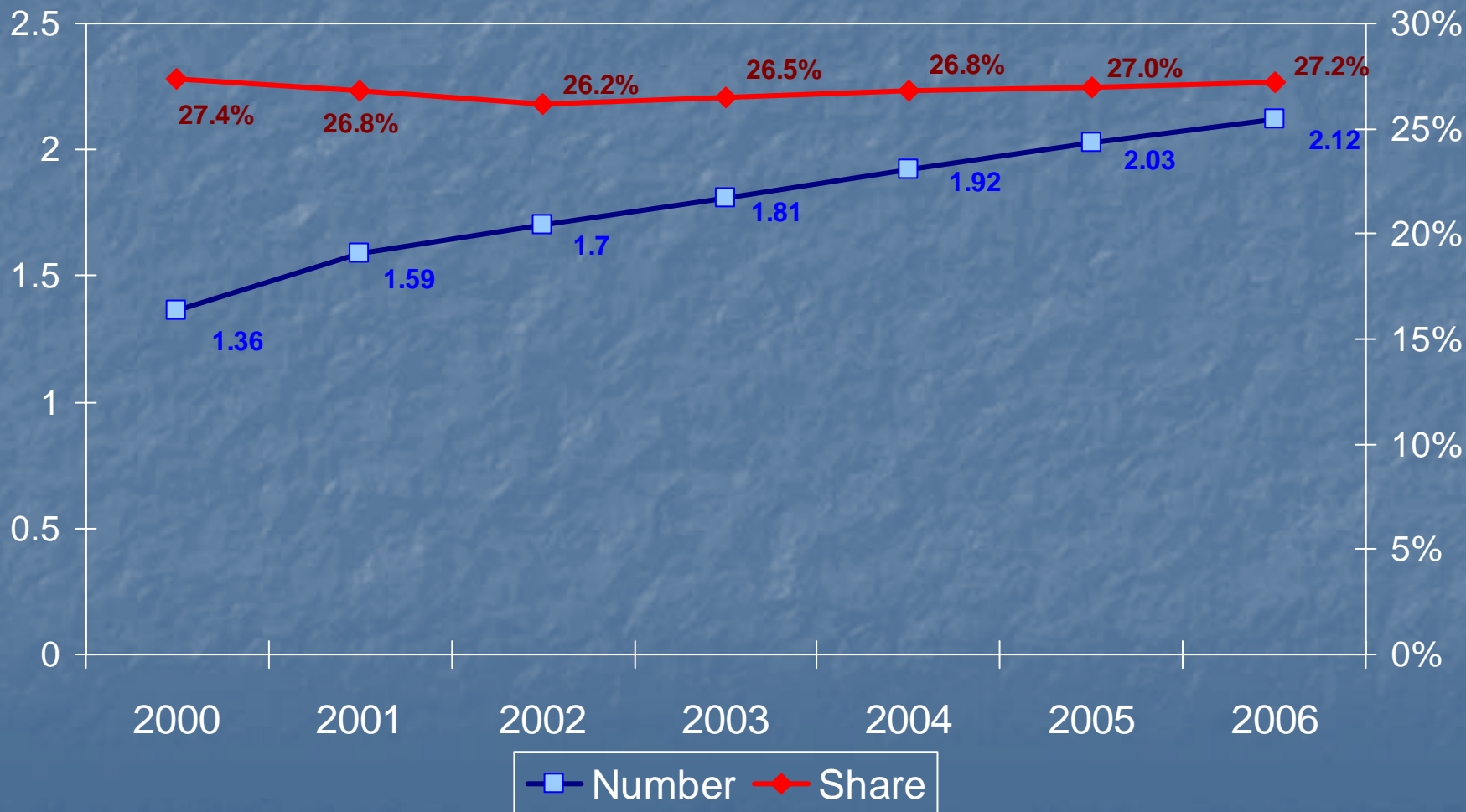
# Continued Growth in SSI

## Recipients of SSI Payments due to MH Diagnosis in Millions and as a Share of All SSI Recipients

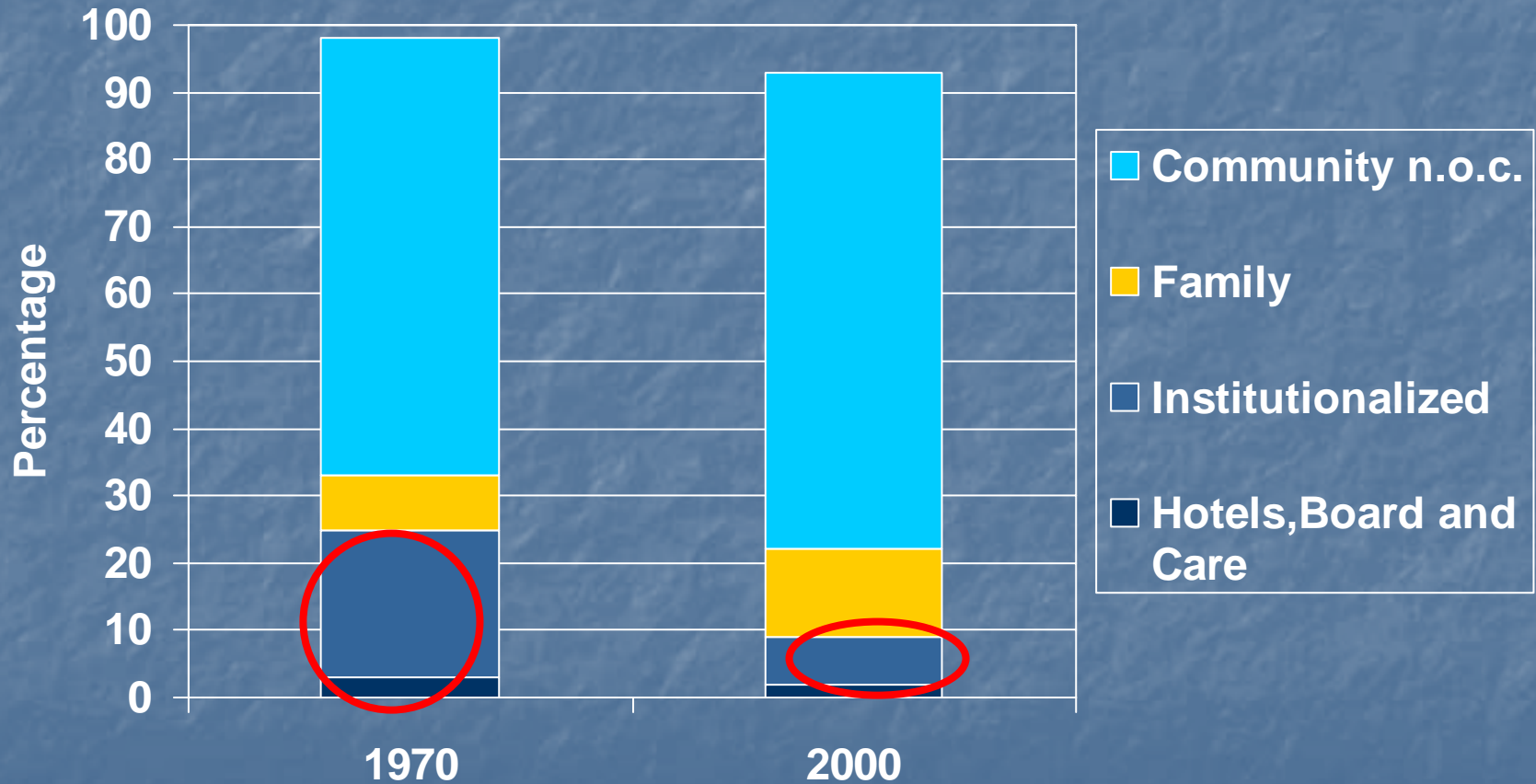


# And in SSDI

## Recipients of SSDI Payments due to MH Diagnosis in Millions and as a Share of All Active Beneficiaries



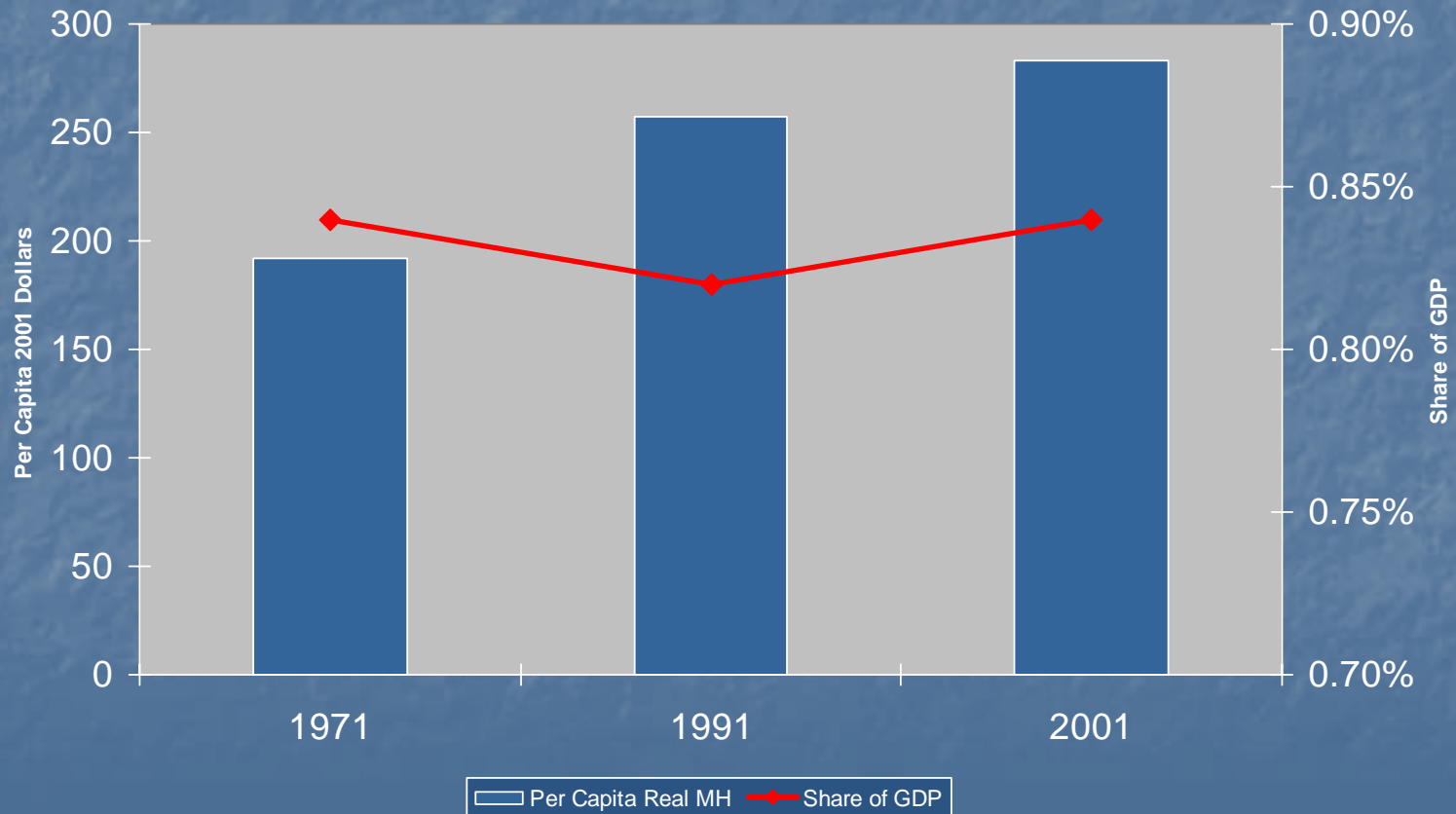
# More People with SMI living Independently or with Family



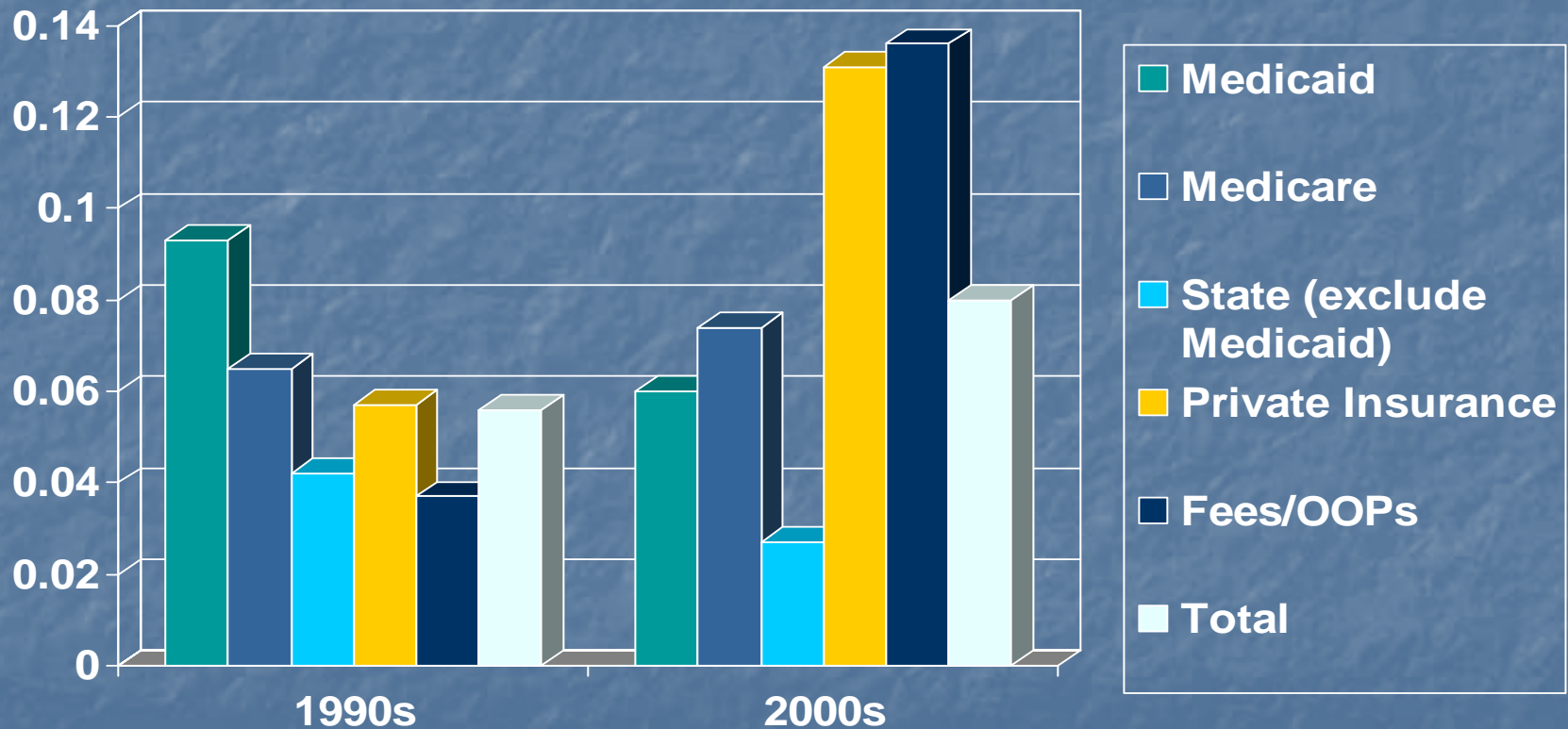
Source: Frank and Glied

# Total Medical Sector MH Spending had not Grown

Mental Health Spending -- Real per Capita  
and as a Share of GDP



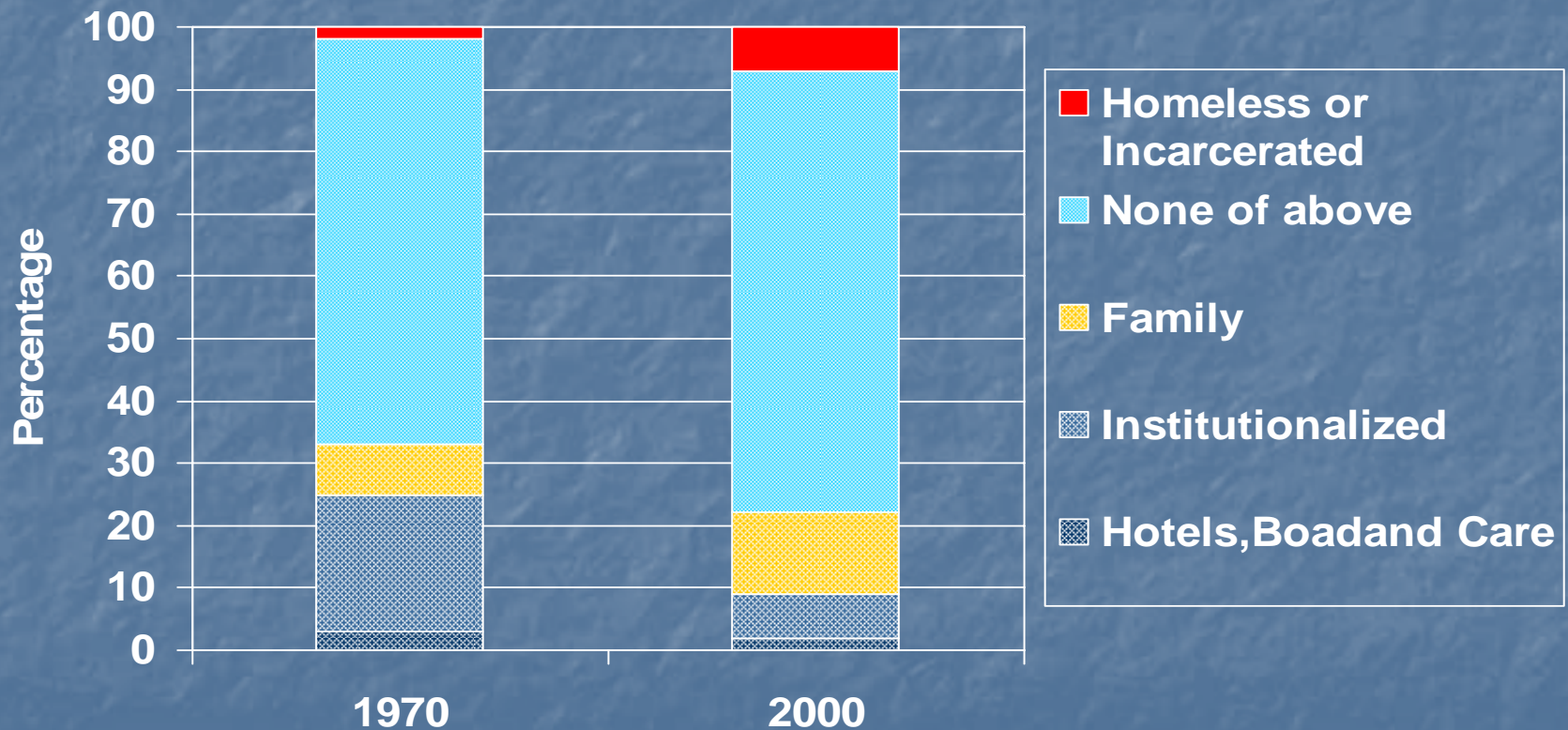
# Recent Changes: Rate of Growth in MH Spending



# Not all the news was good...

- Quality still rather uneven
- Social programs maintain income below poverty

# More People Homeless or Incarcerated

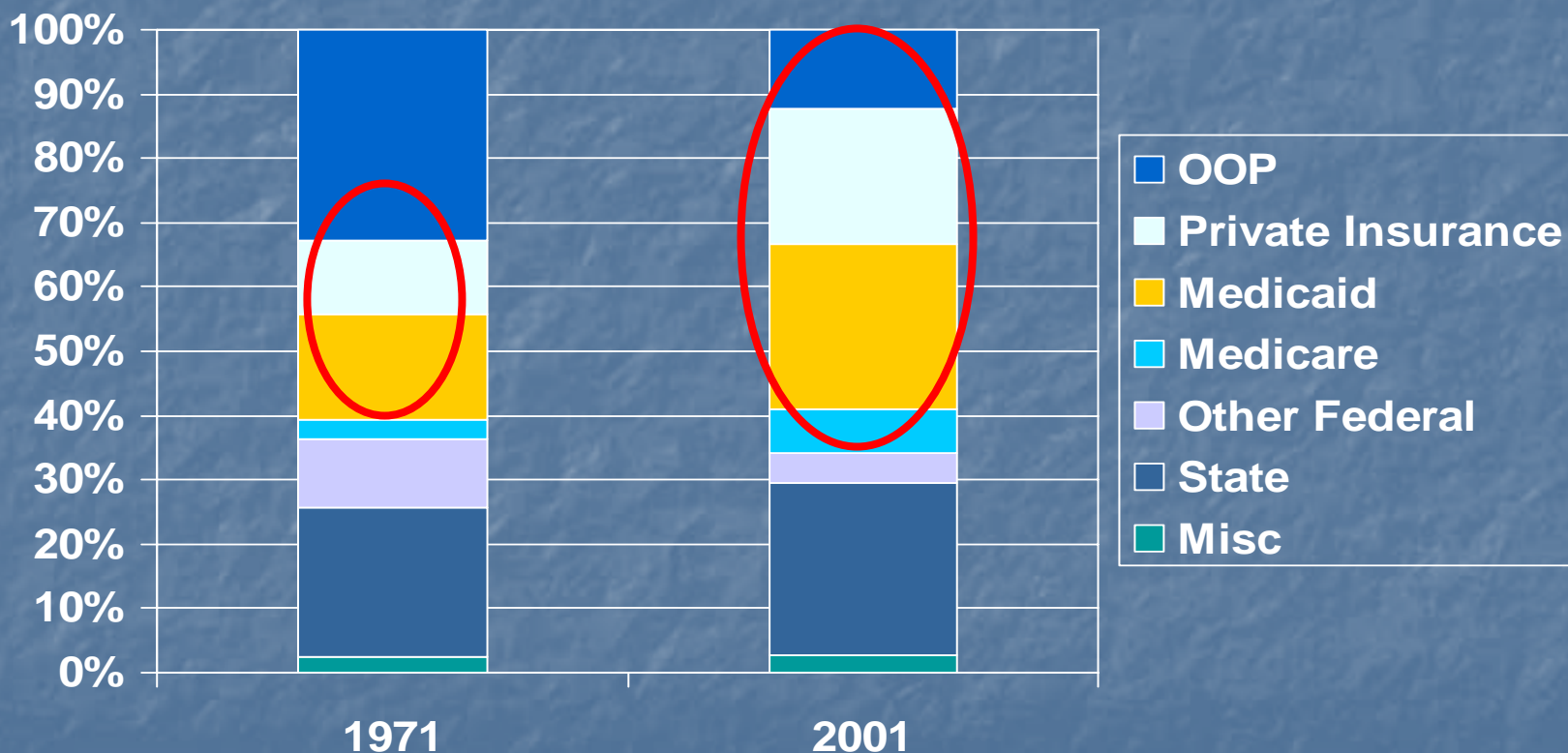


Source: Frank and Glied

# Sources of Progress: Shift toward mainstream

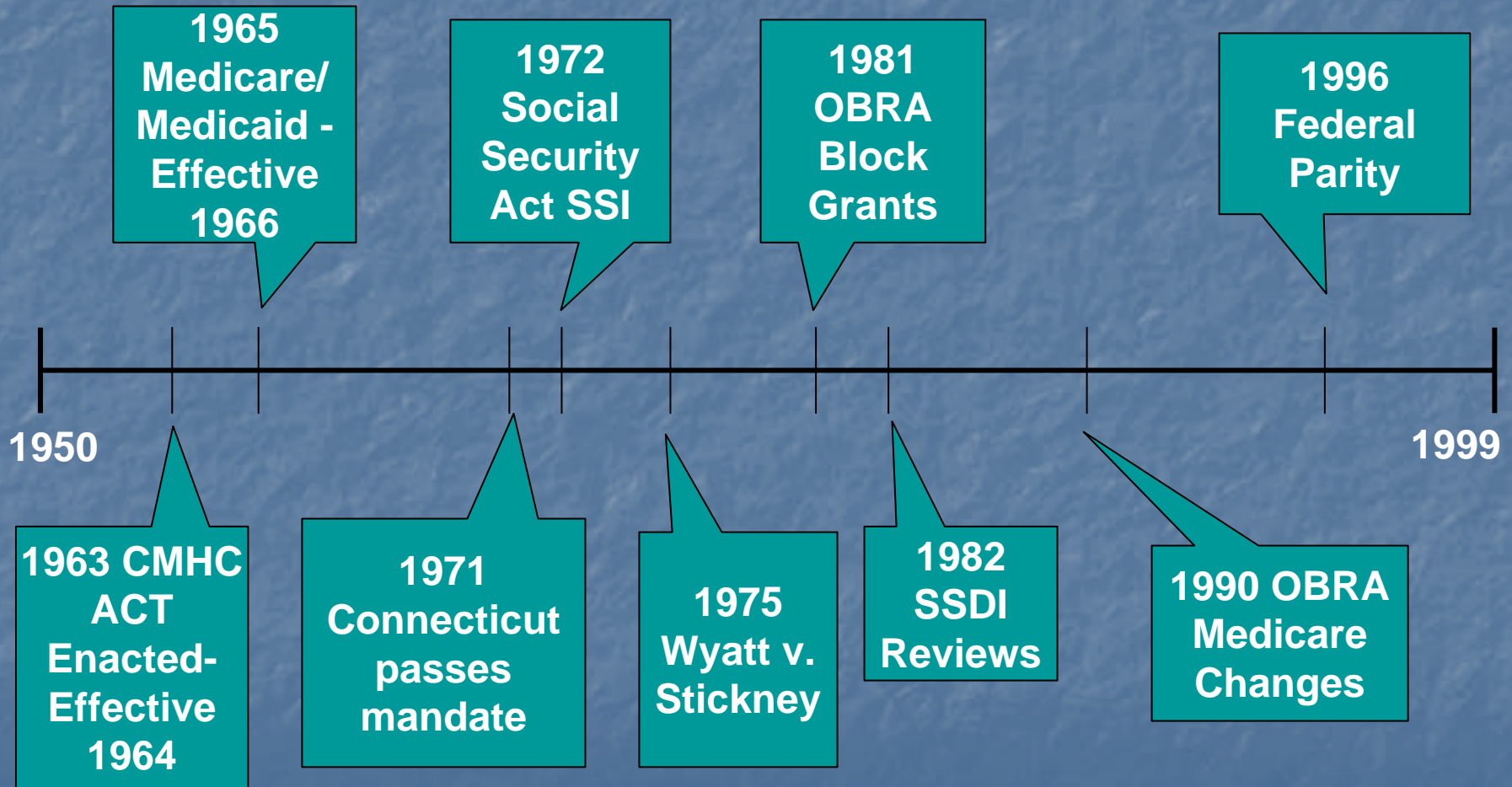
- Growth of health insurance based financing
  - Medicare/Medicaid
  - Private insurance
- Social insurance
  - SSI/DI
  - Housing
  - Food stamps
  - TANF

# Growth in Health Insurance Based Financing



Source: Frank and Glied

# Mental Health Financing Timeline



# Sources of Progress: Rights and Recovery orientation

- Treatment
- No medication for staff convenience
- No unpaid labor
- Equal protection and treatment
- No discriminatory zoning
- Unnecessary restraints and seclusion
- Advance directives
- Community based alternatives

# Sources of Progress: Making the Best Use of Providers and Technologies

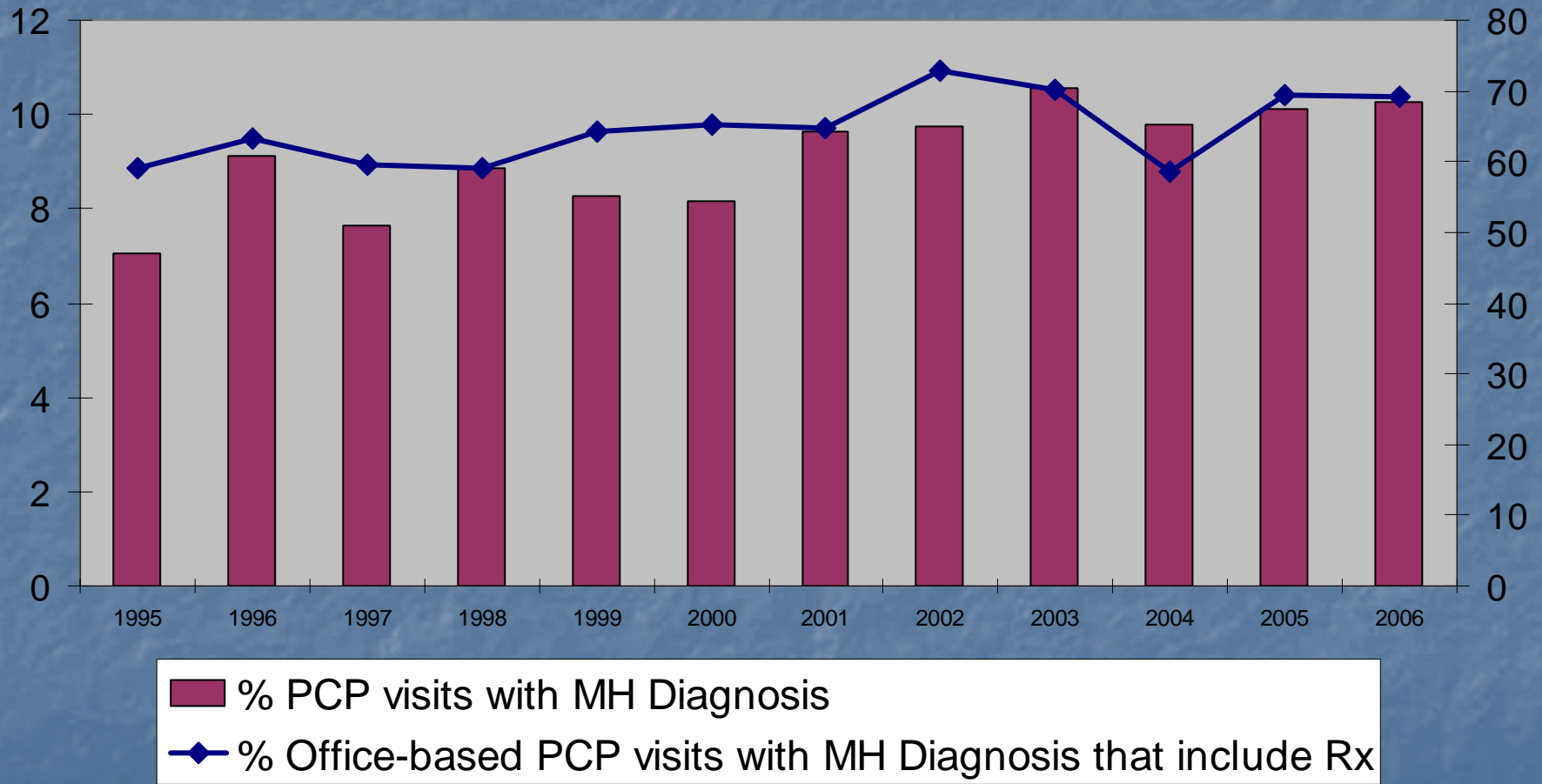
- Supply side
  - Technologies
  - Providers
  - Organization

# Why Has Well-being For People With Mental Disorders Improved?

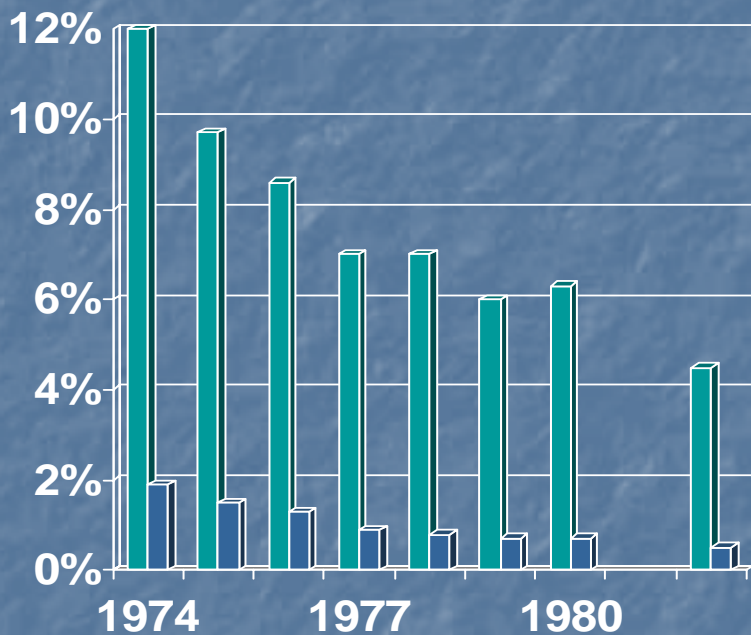
- **New and better treatments?**  
**For most conditions, clinical trial data suggest new treatments are NOT more effective than older treatments.**

**But these treatments are much easier to prescribe and tolerate – dissemination to primary care much faster.**

# Adult Diagnosis and Treatment by PCPs



# Quality of Care has Improved -- Exnovation

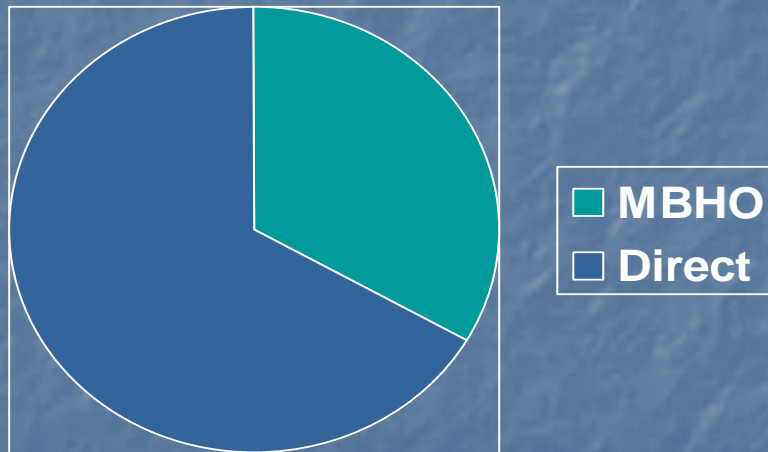


- ECT
- Insulin shock
- Psychosurgery
- Miltown
- Minor Tranquilizers

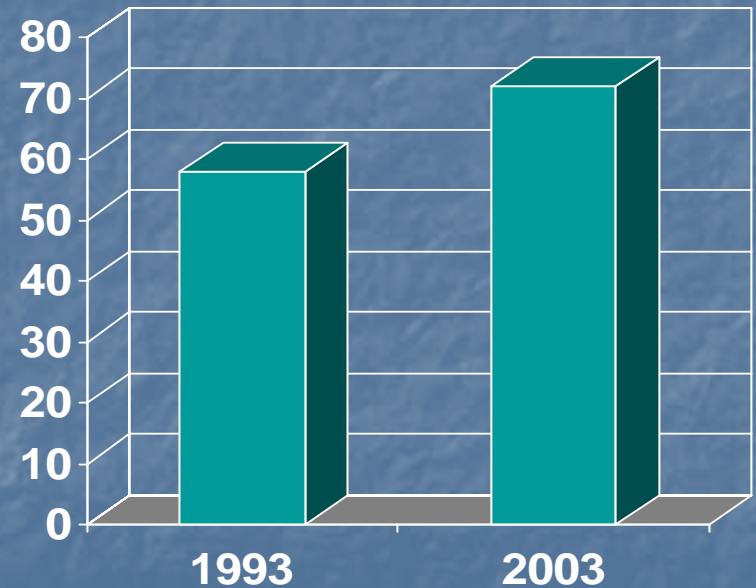
■ ECT per Hospitalized  
■ ECT per SMI

# Growth of MBHO

Medicaid (Public) use  
of MBHO -- 2003



Share of Health Plans  
using MBHOs



# MBHOs

33,500 psychiatrists

PLUS

70,000 psychologists

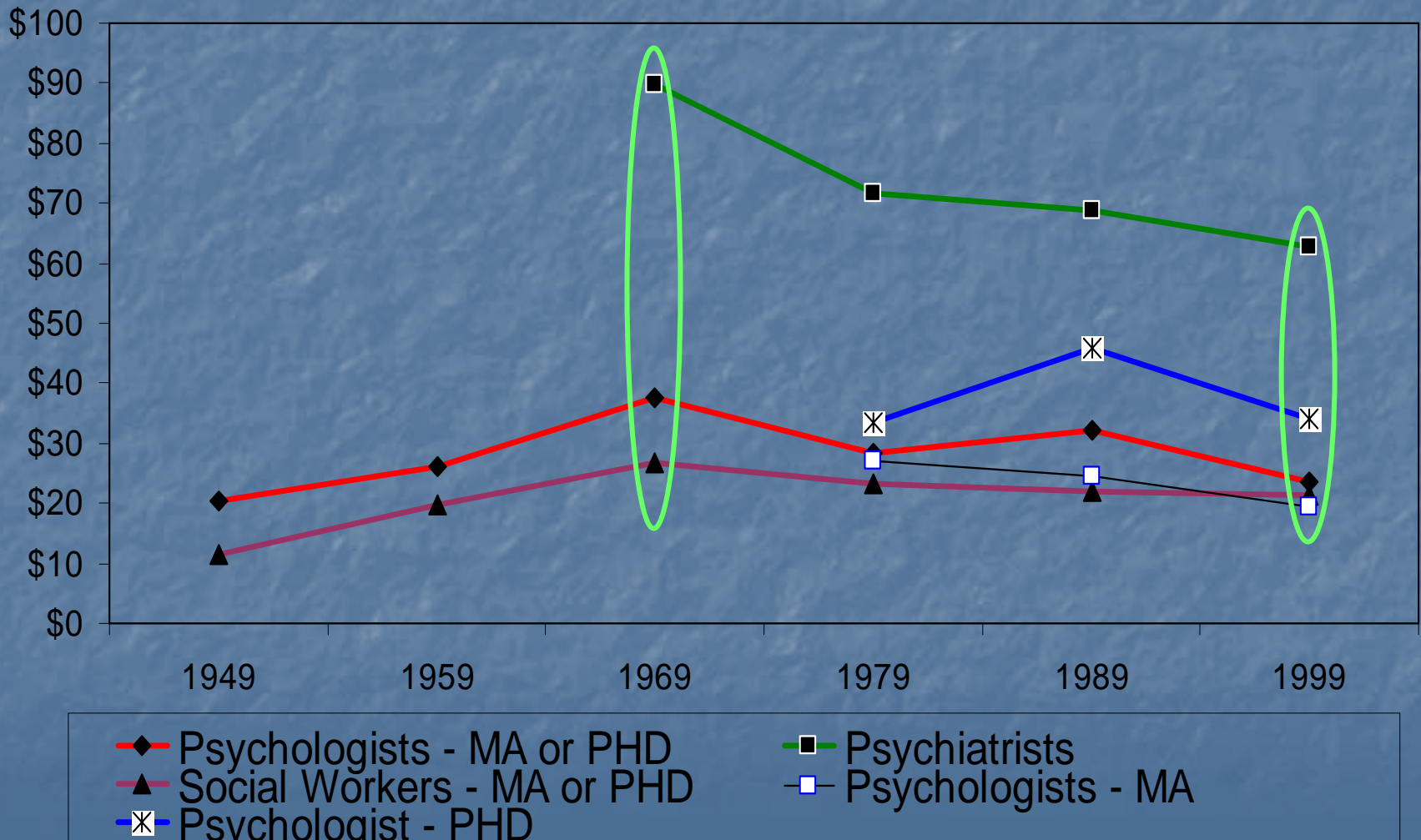
PLUS

200,000 social workers, counselors, and family therapists



# Expanding Supply

(Inflation adjusted Hourly Professional Earnings)



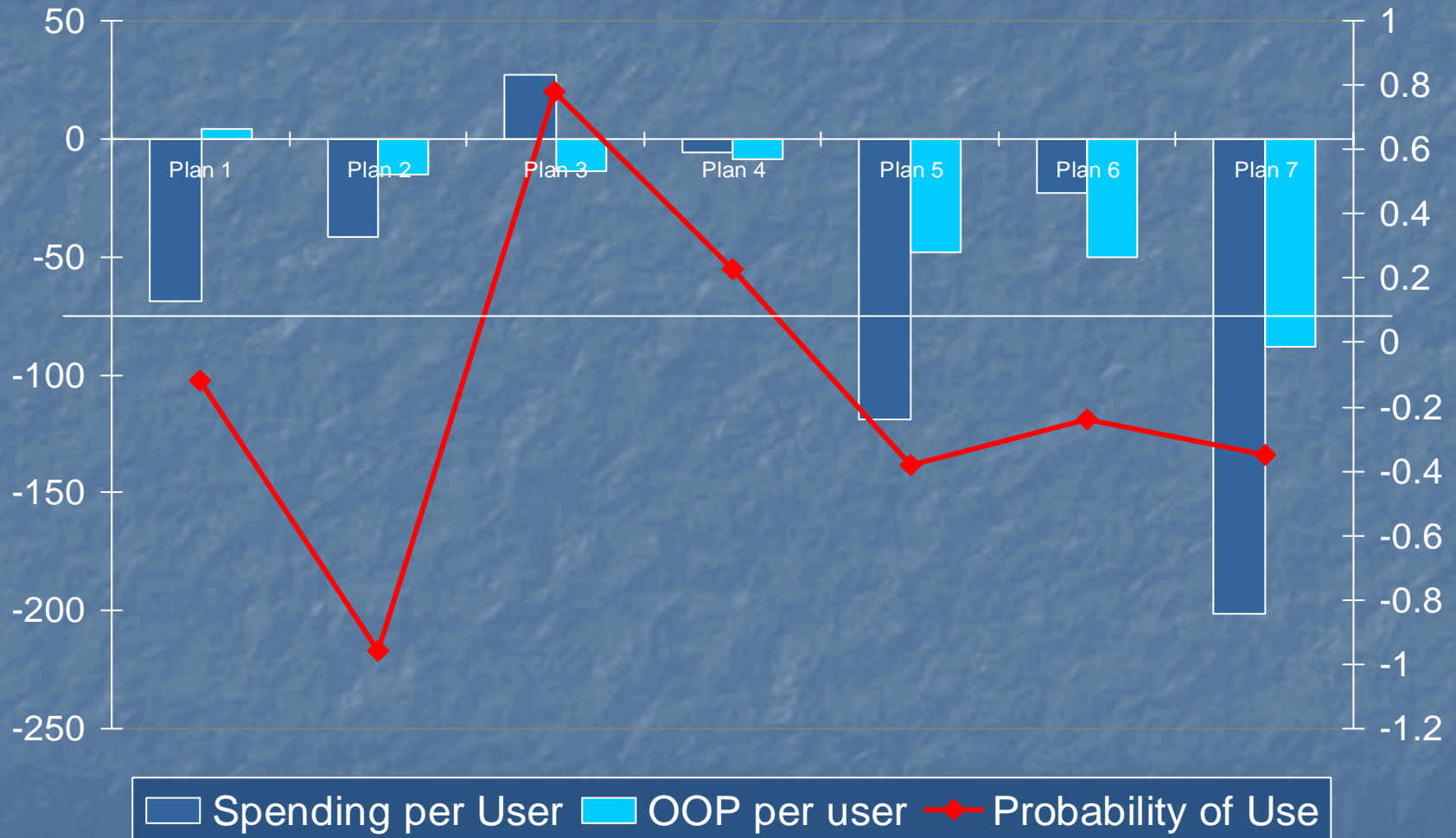
Source: Frank and Glied

# Recent Policy Changes

- Parity

- Wellstone-Domenici Bill passed October 3, 2008

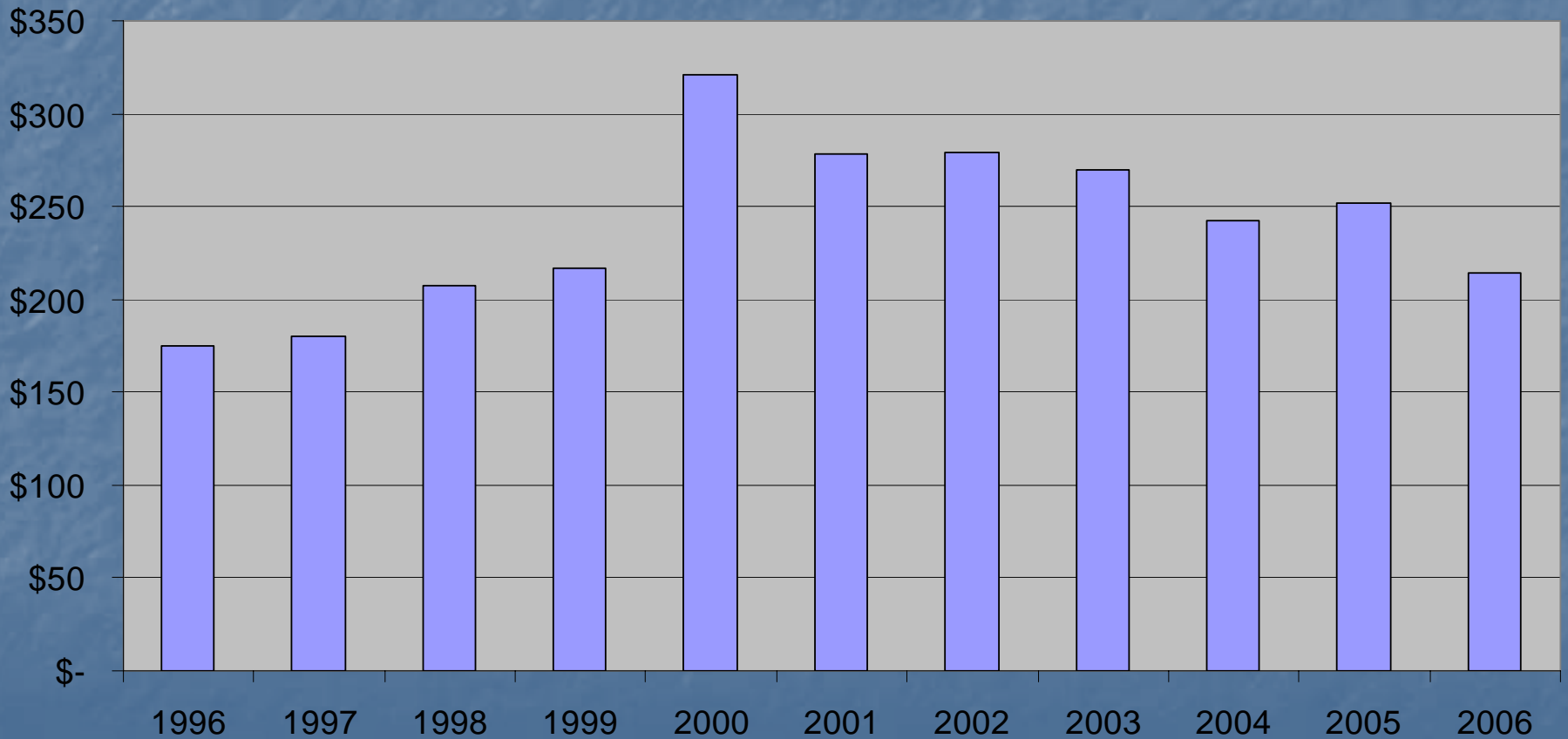
# FEHB Parity Study Results



# Medicare Part D

- Shift in Medication spending
  - Away from seniors toward government
  - Away from Medicaid to Medicare

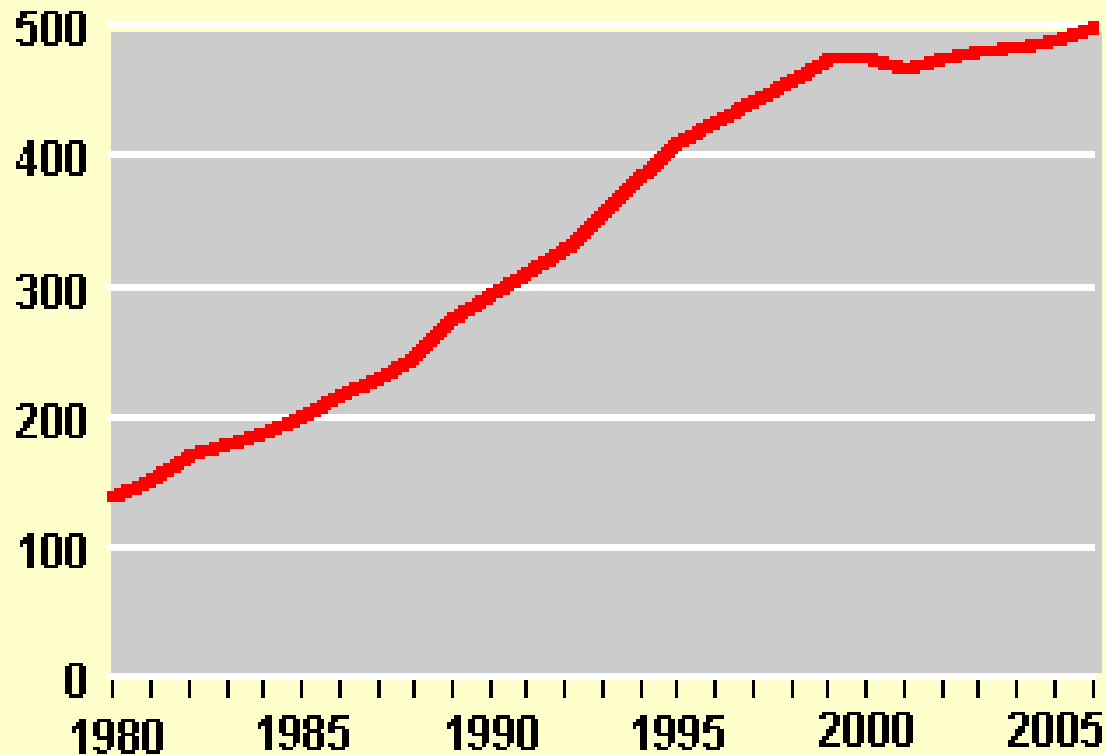
# Out of Pocket Expenditures -- Seniors with MH Diagnosis



# Social Policy: Continued increases in incarceration rates

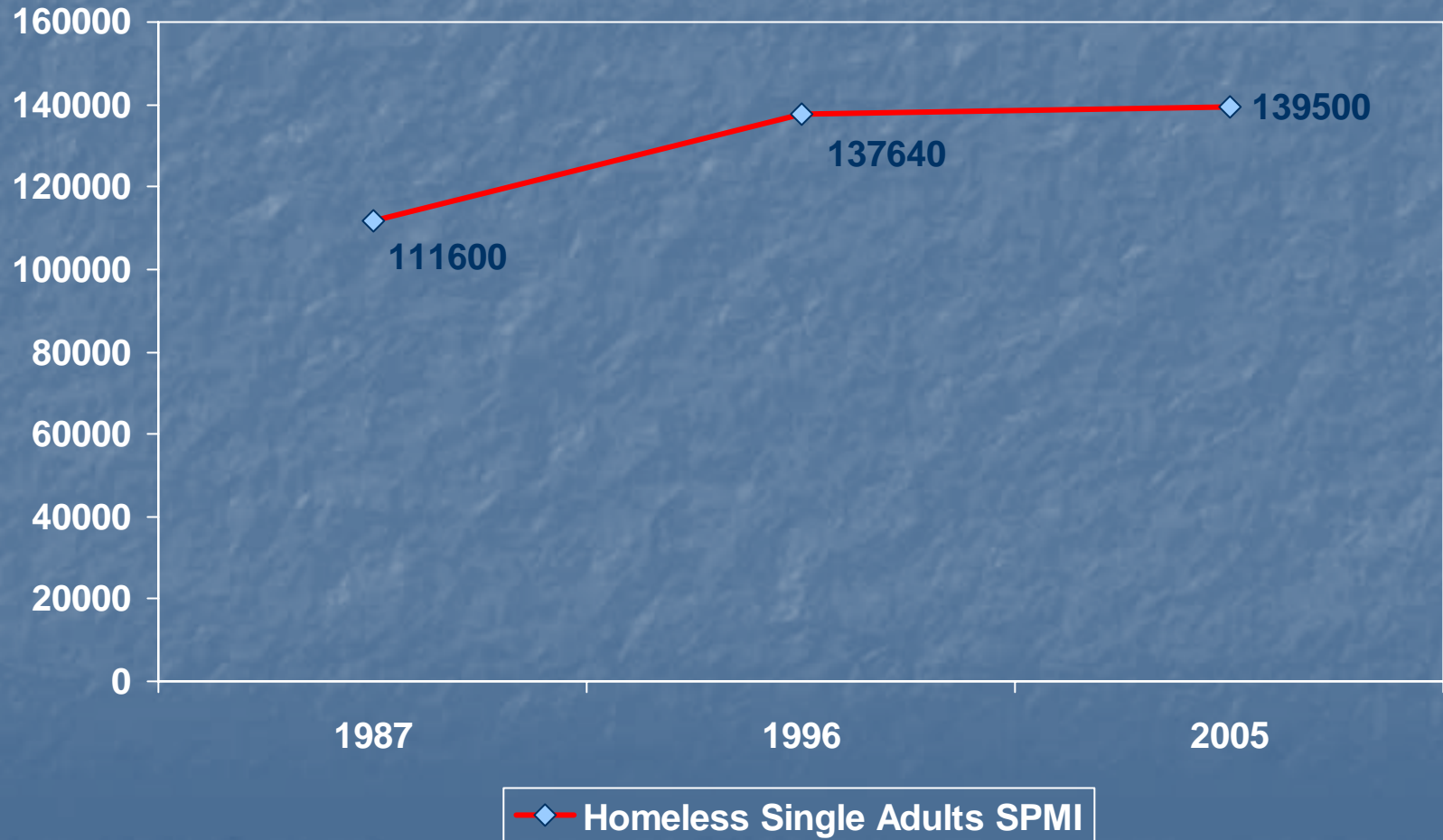
## Incarceration rate, 1980-2006

Number of offenders per 100,000 population



# Social Policy: Homelessness Initiatives

## Number of Homeless Single Adults with SPMI



# There is **room for improvement**

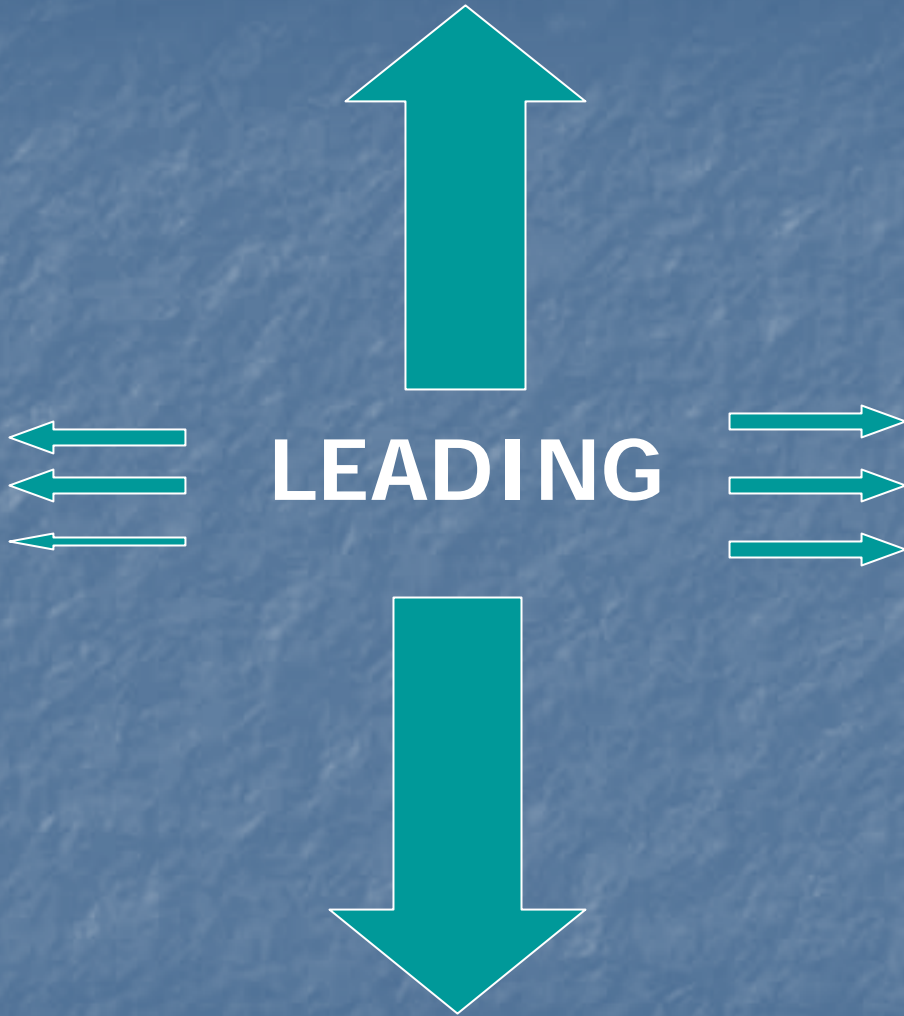
- ...and the past can be a guide
  - *Choosing the right technologies and suppliers*
  - *Building on mainstream programs*
  - *Expanding the role of consumers*

# Outlook

- State budget cuts
  - Especially unmatched programs

# Outlook

- Threats can make institutions rigid
  - Act in non-creative ways
  - Across the board cuts
  - Learned helplessness



# Leading from the top Restructuring

- Downsizing as an opportunity
- Use downsizing as part of a broader plan
  - Maintain goals – change means
  - Exnovation and substitution
    - Ineffective programs vs. evidence-based strategies

# Leading Across Collaboration

- Build alliances
- Cooperation vs. competition
- Redesign alliances
  - Prison and jail
  - Education
  - Housing
  - Veterans

# Leading Up Making the Case

- Advocacy
- Interest Groups
- Consumers

# And...

- Potential for Federal reform

Thank you!