Improving population health requires a whole-person approach to meet the full range of an individual's needs. This includes delivering physical and behavioral health, as well as linking to community-based services, in an integrated manner where providers are accountable for patient outcomes while delivering people-centered care. Barriers to care, such as workforce shortages and lack of reimbursement, must be addressed to better support access to care across the continuum. Trinity Health is committed to protecting and expanding access to high-value behavioral health services.

A Commitment to Behavioral Health Spans the Continuum of Care

Trinity Health is leading innovative efforts to create a People-Centered Health System that seamlessly cares for all of an individual's needs and is focused on serving hard-to-reach populations by:

- Expanding access by leveraging behavioral health expertise and utilizing emerging technologies such as telehealth.
- Advancing integrated care models and incorporating behavioral health into new payment and delivery models, including accountable care organizations (ACOs) and health homes.
- Promoting collaborative care strategies and tactics such as behavioral health integration within the primary care practice.
- Leveraging a full array of health care workers including community health workers (CHWs), peer-to-peer support specialists, recovery coaches and case managers.
- Developing an advanced care management model that allows practitioners to practice at the top of their licenses to support integrated care teams.

What Can Policymakers Do?

Protect and Expand Access to Integrated, High-Value Behavioral Health Services

Recommendations:

- Guard against policies that would limit access to Medicaid and marketplace coverage or reduce access to behavioral health services (e.g. Essential Health Benefits (EHB) as defined in the Patient Protection and Affordable Care Act).
- Increase access to behavioral health services through adequate reimbursement across all payers to all providers (e.g. CHW, social workers); increase funding for community-based programs and inpatient capacity; and eliminate Medicare and Medicaid billing restrictions related to mental health services.
- Promote opportunities for states to expand access to behavioral health services through Medicaid Section 1115 demonstration waivers.
- Maintain EHB coverage requirements and enforce parity regulations for behavioral health services to ensure all needs are met equitably.
- Include waivers for telehealth, as part of alternative payment models (APMs), to facilitate care coordination and communication between providers and patients.
- Provide financial incentives, such as upfront care coordination fees, and align quality incentives in clinically integrated networks and across all payers to facilitate integrated care and reduce administrative burden.
- Harmonize telehealth licensing regulations and credentialing to increase access and allow for seamless delivery of services by providing for telehealth reimbursement.
Behavioral Health: Accessibility is Critical to People-Centered Care

Expand Workforce Opportunities

**Recommendations:**
- Expand the pipeline of behavioral health professionals, and support increased behavioral health training for primary care providers (PCPs).
- Allow psychiatrists, psychologists, social workers, nurses, care coordinators, CHWs and peer-to-peer support specialists to practice in collaborative, team-based environments according to their highest level of education, training and licensure; support efforts to facilitate care delivery across states, such as through Licensure Compacts for providers.

Address Whole-Person Needs

**Recommendations:**
- Create incentives to expand the use of community-based services and in-home care to facilitate transitions across settings and coordination between acute and community-based providers and services.
- Support community care teams, crisis intervention teams, and high-utilizer programs that include services for social needs such as housing and food.
- Test new models to support community health transformation by creating linkages between health systems, providers and community-based services, and encourage care coordination to optimize access and delivery of wrap-around support services.

Ensure Health Information Technology (HIT) Supports Coordination Between Providers and Patients

**Recommendations:**
- Ensure HIT standards and regulations support changes in payment and delivery systems, are aligned with care delivery needs in APMs, and facilitate the management of population health.
- Align the 42 CFR Part 2 privacy requirements relating to the use of substance use disorder (SUD) treatment records with the Health Insurance Portability and Accountability Act (HIPAA) requirements that allow the use of patient information for treatment, payment and health care operations.
- Support access to integrated electronic medical records across providers and settings to enhance delivery of coordinated, comprehensive care.

Trinity Health Behavioral Health Best Practices

**Evidence-Based Treatment for Opioid Use Disorder: Initiating Medications in Emergency Department (ED) & Acute Care Settings**

Trinity Health recognizes that the opioid epidemic has impacted communities in many ways, including a tremendous loss of life. Screening, intervention and treatment of opioid use disorder with evidence-based medications across the continuum of care saves lives, improves health and reduces cost. Trinity Health Of New England (THOINE) has developed an Addiction Medicine Consult Service for the acute care setting and ED systems to initiate medications for addiction treatment (MAT), such as methadone, buprenorphine and naltrexone with seamless connections to ongoing care in the community. THOINE is piloting a hub-and-spoke model for expanded access to these treatments in the ambulatory system.

**Peer-to-Peer Supports: Fully Leveraging the Behavioral Health Workforce to Meet Needs**

Peer support specialists have personal experience with recovery from mental health, substance use or trauma conditions, and receive specialized training and supervision to support others who are experiencing similar journeys toward increased wellness. Trinity Health hospitals are using this workforce as well as CHWs to meet behavioral health needs and build a more people-centered workforce.

**Advancing Collaborative Care Models: Team-Driven, Evidence-Based Care**

Collaborative, team-based care between behavioral health and primary care providers (PCP) is critical to delivering high quality, people centered care. More than 80 randomized controlled trials demonstrate collaborative care models improve outcomes in depression and other physical health conditions such as diabetes and cardiovascular disease. A behavioral health specialist assists the PCP in treating patients with behavioral health conditions like depression and anxiety in the primary care office. They review patients weekly with a consulting psychiatrist, and work with the patient and PCP to implement medication recommendations (if needed) and deliver evidenced based behavioral interventions. A number of Trinity Health sites in Michigan are implementing this model with success in terms of improved health outcomes, and patient and provider satisfaction.

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**Mission**

We, Trinity Health, serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities.

**Core Values**

Reverence • Commitment to Those Who Are Poor

Justice • Stewardship • Integrity

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