BEHAVIORAL HEALTH

Improving Behavioral Health and Appropriate Opioid Use



Nearly 20% of Americans—more than 46 million adults—are affected by a behavioral health disorder annually.¹

Behavioral health encompasses substance use and mental health concerns—components of individual and population health. Unfortunately, of the 11.5 million Americans who misuse prescription pain relievers² and the 2.1 million Americans with Opioid Use Disorder (OUD), only 20% receive specialty addiction treatment.³

There is a significant connection between physical and behavioral health. Almost 70% of people with behavioral health concerns also have medical comorbidities—most often treatable chronic diseases. The combination of comorbid mental and medical conditions are associated with substantial costs.

The Centers for Medicare & Medicaid Services has designated IPRO as the Quality Innovation Network-Quality Improvement Organization (QIN-QIO) for your state. IPRO QIN-QIO uses innovative, evidence-based, and data-driven methods to increase both quality and access to care for those who live with depression, substance use disorders, and dementia.

Partnering with medical and behavioral health providers through community coalitions and nursing centers, we can work together to identify and impact behavioral health outcomes.

Goals

- Increase access to behavioral health services
- Reduce opioid-related harm
- Reduce opioid utilization where appropriate
- Reduce emergency room utilization

Using evidence-based tools, our clinical and quality improvement team provides

Customized Technical Peer-learning Education Opportunities Assistance Training on implementing trauma- Implementation training on trauma- Development of protocols for informed care with our tools; informed care, assessing for Adverse behavioral health screening and Childhood Experiences, and treatment referral, and Support using screening tools for identifying effective interventions; trauma, social determinants of Optimization of your care for health, depression, cognitive issues, Starting or expanding a multipeople with chronic pain. substance use disorders, and health disciplinary MOUD program; equity; Increasing awareness of behavioral Tools for compassionate tapering, health/substance use disorder pain management, & expansion of treatment in nursing centers; and Medications for Opioid Use Disorder Focused rapid-cycle improvement (MOUD); and projects that support integration Strategies for increasing behavioral of behavioral health screening health service access through tools with improved patient health integrated care models. outcomes.

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BEHAVIORAL HEALTH continued





What are the expectations of partipating organizations?

- Establish an internal team to share project responsibility for your organization.
- Commit to collaborate with the QIN-QIO for duration of the project.
- Participate in meetings, learning sessions, and ECHO ® programs as needed.
- Implement and evaluate the impact of one or more intervention strategies.
- Track referrals and screenings conducted for depression, cognitive, and substance use disorders.
- Use your data to monitor and improve outcomes.

For more information

¹Substance Use and Mental Health Services Administration. *Key substance use and mental health indicators in the United States: Results from 2017 National Survey on Drug Use and Health.* 2018. Accessed at www.samhsa.gov/data

²Centers for Disease Control and Prevention. 2018 Annual Surveillance Report of Drug-Related Risks and Outcomes — United States. Surveillance Special Report. Centers for Disease Control and Prevention, U.S. Department of Health and Human Services. Published August 31, 2018.

Accessed from https://www.cdc.gov/drugoverdose/pdf/pubs/2018-cdc-drug-surveillance-report.pdf

³Substance Abuse Center for Behavioral Health Statistics and Quality. *Results from the 2016 National Survey on Drug Use and Health: Detailed Tables.* SAMHSA. Pub. September 7, 2017. Accessed from <a href="https://www.samhsa.gov/data/sites/default/files/NSDUH-DetTabs-2015/NSDU