

NAVIGATING AN UNPRECEDENTED REFORM LANDSCAPE

NASEM

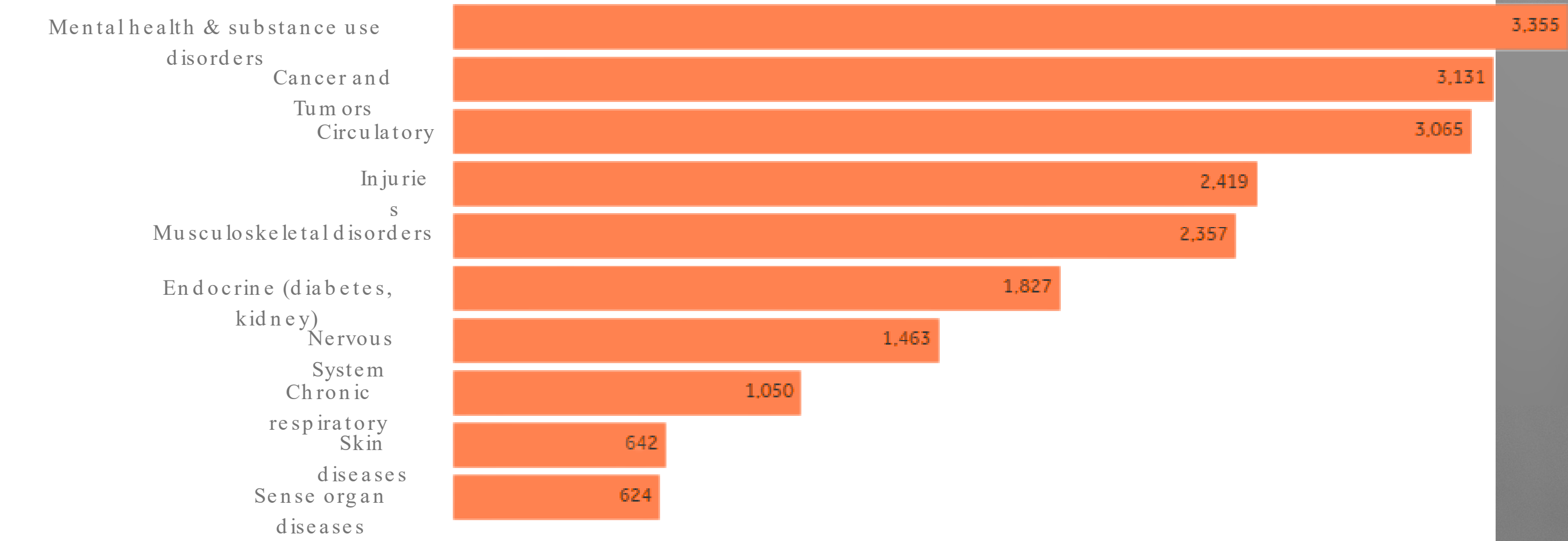
JUSTICE, HEALING AND THE FUTURE OF MENTAL HEALTH

MENTAL HEALTH & SUBSTANCE USE

ARE THE **LEADING CAUSES OF DISEASE BURDEN** IN THE US

DALY, or the Disability-Adjusted Life-Year, is a metric that combines the burden of mortality and morbidity (non-fatal health problems) into a single number. One DALY can be thought of as one lost year of "healthy" life.

AGE STANDARDIZED DALYS RATE PER 100,000 POPULATION, BOTH SEXES, 2015



DALYs measure the total impact of a disease by combining the years of life lost due to early death and the years lived with disability.

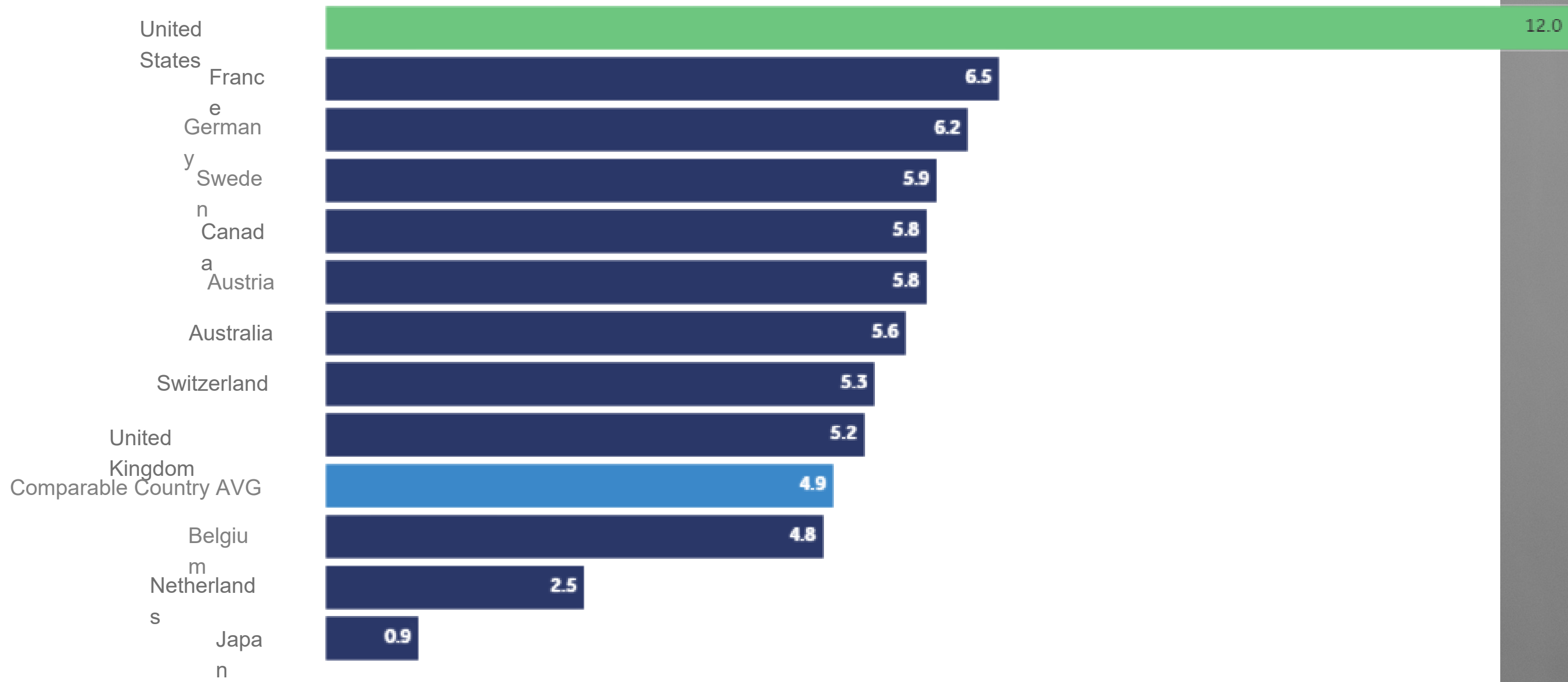
It's calculated by adding these two together: $DALY = YLL + YLD$.

Source: KFF: What are the current costs and outcomes related to mental health and substance abuse disorders?

MENTAL HEALTH & SUBSTANCE USE

AMONG COMPARABLE COUNTRIES, THE U.S. HAS THE HIGHEST RATE OF DEATH

THE AGE - STANDARDIZED DEATH RATE PER 100,000 POPULATION DUE TO MENTAL HEALTH AND SUBSTANCE USE DISORDERS, BOTH SEXES, 2015



Source: KFF: What are the current costs and outcomes related to mental health and substance abuse disorders?

YOUNG PEOPLE ARE IN CRISIS

CONSIDER THE FACTS BEFORE COVID

- 19:

104% ▲

Increase in inpatient visits
for suicide, suicidal ideation,
and self-injury among
children aged 1-17.

151% increase for those aged 10-14.

61% ▲

Increase in the rate of self
reported mental health
needs since 2005

50% ▲

Increase in mental health
hospital days for children
since 2006

POST COVID: ▲▲▲

**Suicide has surpassed cancer as a
cause of death.**

**42% of young people experience
persistent sadness and hopelessness**

**1-4 young adults 16-24 seriously
considered suicide.**

**Rates of Self Injury Spike upon entrance
to Juvenile Justice and Child Welfare
systems.**



MAKING HEALING CENTERED SYSTEMS

Requires acknowledgment of how racism and poverty impact the social and emotional health of children and families.

AND how limited
traditional medical
model services are to
mitigating them

TAKING ACTION

There is a real opportunity to address a crisis in the lives and experiences of vulnerable youth. Public opinion and policymaker agendas **are currently aligned**.



POLITICAL WILL

State and Federal administrations have established a focus on child and family well-being driven by COVID, the youth mental health crisis, and decades of evidence from the SDOH movement



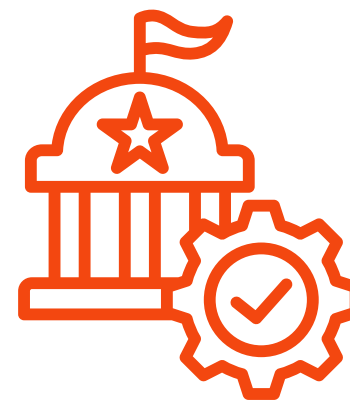
EMERGING CONSENSUS AND CONSCIOUSNESS

Exploring the impact of adversity, structural racism, and the pandemic on the social and emotional health of children and families



COMMUNITY SUPPORT

Half (52%) of all Californians address mental health needs as “extremely important” and list it among the most critical issues for the state to address.



UNPRECEDENTED REFORM & INVESTMENT

A Reform Landscape with Unprecedented Level of Investment (\$10+ Billion) and a shifting payor landscape

TO TAKE ADVANTAGE OF THIS MOMENT, WE NEED TO....



Understand how MediCAL works and how it is changing.

Embrace the critical need to reform our financing and delivery models so that they are team based, healing, and relationship centered.

Focus on building a health care system for people by people through new provider types and community networks

Adopt a paradigm shift that reimagines mental health as a support for healthy development, not a response to pathology.

MEDICAID IS CHANGING IN CALIFORNIA....

**MediCAL has made fundamental
changes and there are unprecedented
opportunities for CBOs**



Boom- >>>

5 Essential Medicaid Strategies

Remove Diagnosis

Remove diagnosis as a prerequisite for treatment. Expand Medical Necessity Criteria in the context of EPSDT and ACES)

Reimagine the workforce and the model

Add new provider types to the Medicaid state plan and reimagine the behavioral health workforce. Leverage lived experience and shift the economic benefit of safety systems to the people they were intended to serve.

Treat parents with their kids

Low-income Americans interact with the healthcare system 12 to 15 times on average in the first three years of their child's life. Center schools and Primary Care as healing and anti-racist centers of support.

Make schools automatically in-network all health plans.

Reach kids where they spend the majority of their time.

Leveraging essential community provider status and the portability requirements of health plans makes schools equivalent to emergency departments. Health plans must reimburse for services provided there regardless of network.

Hustle: Get your fed Matching \$\$\$

Medicaid's unique entitlement for kids is an opportunity to fund the needs of the child welfare system. Pursuing the funding requires grit and determination.

NEW Medicaid Reimbursable Career Pathways to Support ACEs Networks of Care

Leveraging and Integrating The Wisdom and Experience of Culturally Concordant Providers

