

Insurance Department's enforcement authority regarding this complex issue at the intersection of state and federal law."

"We are committed to providing all Kansans access to high-quality mental health care," Amy Fleischer, a spokesperson for BCBSKS, told *MHW*. "With all kinds of care, whether for medical or mental health conditions,

work is important for keeping health insurance as affordable as possible for all of our members."

Provider association

The executive director of the Association of Community Mental Health Centers of Kansas said he would like to have a conversation with BCBSKS to avoid any misunder-

standing from primary care. On a state-by-state basis, we're seeing the importance of mental health treatment and treatment of the brain."

The association's members provide treatment to more than 140,000 Kansans, ranging from those who can't afford to pay for health care to beneficiaries of Medicaid to private or commercial beneficiaries, he said.

Meanwhile, lawyers representing the Kansas providers and clinicians say BCBSKS's request for confidential client information beyond the scope of the minimum documentation necessary to establish a reimbursement claim, therefore, could harm both Kansas providers and beneficiaries. "Our clients seek to understand how they can reconcile these competing demands without undermining patient access to quality care," the lawyers stated. •

'The most important thing for me and my peers is breach of confidentiality. It's very disturbing.'

Kansas provider, speaking on the condition of anonymity

we sometimes review our providers' approach to billing and whether the level of care delivered is warranted."

Fleischer added, "We perform these reviews with great care to comply with all applicable state and federal laws and regulations. This

standings. Kyle Kessler told *MHW* that if the issues involved quantifiable benefits and nonquantifiable benefits, "we would get engaged very fast."

He added, "We would want them to know that it is not OK to treat mental health any differently

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South Carolina seeks healthcare, BH workforce improvements

Taking into account a changing health care landscape, an evolving workforce, payment models transformation and a need to improve population health, South Carolina officials have released a report that, among its goals, aims to address issues specific to the behavioral health workforce.

The new report, *The Evolving Workforce: Redefining Health Care Delivery in South Carolina*, prepared by the Workforce for Health Taskforce, was released June 20 by the South Carolina Institute of Medicine & Public Health. The workforce brings together more than 60 leading South Carolina experts, including health care systems, state agencies, consumer groups, community-based organizations, academia, nonprofits and philanthropic organizations.

Officials stated that the recommendations by the task force guide

Bottom Line...

The report encouraged the reduction of financial barriers to entry for students interested in behavioral health as a career.

patient-centered value-based care upstream, against tradition and traditional reimbursement, to the place where public health, population health, human services and traditional care delivery coalesce.

"We wanted to take a look at what the workforce needs to keep people healthy and keep them in the community," Maya H. Pack, M.S., M.P.A., associate executive director of the South Carolina Institute of Medicine & Public Health and report editor, told *MHW*. While nurses and physicians provide typical care for patients once they get sick, officials wanted to look at the community

and homes, places that are more accessible to patients, Pack said.

Regarding the concept of behavioral health and physical health, it's important that people are treated as "whole beings," said Brie Hunt, M.Ed., project manager for the South Carolina Institute of Medicine & Public Health and report co-author. "We want to make sure people get treatment when and where they need it at a sufficient cost to the system," Hunt told *MHW*.

The state issued a previous report aimed at addressing the state's behavioral health system: *Hope for Tomorrow: The Collective Approach for Transforming South Carolina's Behavioral Health Systems*. That report outlined a collective approach that addresses the need for expanded services and supports in a number of environments (see *MHW*, May

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25, 2015), such as the creation of the Behavioral Health Coalition — considered an unprecedented alliance of public and private agencies, organizations and health care providers collectively committed to improving the mental health and well-being of everyone in the state.

Four broad themes

The recommendations and action steps in the report have been organized across four broad themes:

1. Embracing the evolution of human and human service roles;
2. Training and educating health and human service providers;
3. Behavioral health workforce needs; and
4. Setting the stage for the evolving workforce.

The state has a significant lack of mental health providers, said Pack. In Mental Health America's Ranking the States 2018 report, South Carolina ranked 40th in its mental health workforce, Pack said. "We unfortunately ranked 50th, last, in access to mental health care," she added. "There are never enough psychiatrists or mental health nurses to meet the growing needs of our community."

The South Carolina Institute of Medicine & Public Health is currently working with the South Carolina Behavioral Health Coalition to address these concerns, Pack pointed out.

Meanwhile, the state's business model is changing. Health care delivery as a whole is transitioning to pay-for-performance, she said. "This movement away from fee-for-service has received bipartisan support on the federal level," Pack said. "However, incentives are needed to increase the spread of value-based payments to all payers and providers, on the state and national level."

In South Carolina, most residents with private insurance still receive care in the traditional fee-for-service payment system, Pack explained. Those covered by Medicare and

Medicaid are more likely to receive care under a value-based payment system such as Healthy Connections Prime for dual-eligible seniors.

The report notes that quality of care is not positively correlated with reimbursement in the fee-for-service model, which leads to unnecessarily high health care costs and inconsistent quality. Conversely, value-based payment models (also known as pay-for-performance) reward providers based on predetermined publicly reported quality metrics and the cost of care, the report stated.

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Maya H. Pack, M.S., M.P.A.

BH workforce recommendations

The task force issued the following behavioral health workforce recommendations:

- Improve reimbursement for behavioral health services and enable government agencies and community-based organizations to improve pay for behavioral health professionals.
- Reduce financial barriers to entry for students interested in behavioral health certifications and degrees.
- Ensure educational entities, students and employers are aware of the need for more behavioral health professionals in South Carolina.
- Place special emphasis on creating a positive, supportive work environment with opportunities for growth in behavioral health settings.

A key solution is to make wages for behavioral health professionals more competitive with private health care professionals, said Pack. Behavioral health professionals require a lot of training and education, but their salaries are not up to par, she noted.

Adjusting public-sector pay bands to provide more competitive pay for behavioral health workers would help create a more positive work life for these providers and encourage more young people to pursue a career in behavioral health, the report stated. Many positions in this field require a master's degree and hands-on experience; pay bands should reflect this reality.

"We need to do all that we can to encourage young people to pursue this as a career option," Pack said. The state needs to reduce financial barriers for students interested in behavioral health as a career, she noted.

More peer support specialists to guide patients in need and support their recovery process are also needed, added Pack.

The State Department of Education and the State Department of Health have made a goal to place a mental health professional in every school in the state by 2002. On March 1, lawmakers approved \$2.2 million for FY 2020 to hire mental health counselors, Pack said. The state every year increases to some degree appropriations to the Department of Mental Health to employ more mental health practitioners in the school, said Pack.

Pack pointed to champions in the field across the state: the National Alliance on Mental Illness-S.C., the South Carolina Department of Mental Health and the South Carolina Department of Alcohol and Other Drug Abuse Services. The champions are organizations that have the ability to make the recommendations a reality, if funding and capacity needs are met, she said. "They have agreed to serve as champions for specific recommendations throughout the report," Pack said. •