

## Washington State Advisory Group on Mental Health

**WSHA Advisory Group -- Focusing on Outpatient Access and Care.** We have heard loud and clear from our membership that they would like us to work upstream in mental health before a patient needs to be hospitalized for a psychiatric condition. WSHA formed an advisory group to focus on early intervention and care in the emergency departments, as well as advising on legislative proposals. The group is jointly staffed by our association's patient safety and policy departments.

The advisory group consists of a mix of expert administrative and clinical professionals from health systems, managed care organizations, and government agency staff. The group meets quarterly, focusing on outpatient services to address early intervention and integration as identified in the WSHA Strategic Plan. Areas of work include:

- Developing toolkits to assist in clinical practice changes for emergency departments and strategies for early intervention for mental health.
- Supporting WSHA advocating for student loan repayment dollars for mental health. Many key mental health providers, such as psychologist and counselors were left out of our state's health professional's loan repayment program historically.
- Guiding a state budget request for 2017-2019. WSHA will be exploring a major work force initiative to expand the number of psychiatric nurse practitioners.

Other important areas of important work driven in part by state action, include:

**CMS Global Waiver and Integration.** WSHA is supportive of our state's effort to pursue a global Medicaid waiver and to integrate behavioral health with medical care by 2020. The state will be contracting with managed care organizations to provide both components of care and also investing dollars in practice transformation.

**Opioid Prescribing.** Washington State has been at the forefront of this issue. A few years ago our hospitals adopted ER prescribing guidelines for narcotics. Hospitals also committed to tracking prescribing data and following up with providers who excessively prescribe. WSHA worked this year to expand the prescription monitoring program, which tracks narcotic prescriptions by patient, to hospital/health systems so more providers can have access.

**Mental Health Boarding.** Boarding of mental health patients in our EDs/med surgical floors was and continues to be at unrepresented levels. Our state is consistently cited as having one of the lowest inpatient psychiatric bed counts in the country for our population size. Some areas WSHA has been involved with to improve care and add more resources:

- Encouraging our members to partner and open new psychiatric units.
- Supporting a lawsuit when patients sued the state for boarding them without access to appropriate mental health care. The lawsuit produced additional funding by the state.
- Advocating and securing about \$40 million in capital funds for construction costs of new psychiatric units. We expect more than 250 beds to open over the next two to three years in both general acute care hospitals and new freestanding psychiatric hospitals.
- Supporting community mental health in our state budget. WSHA takes an active role in this area during our state legislative session. Our thought: if community mental health is not functioning, our hospital members pay the price.