

### Prevalence

- 17% of MA adult residents have a mental illness; and
- 10% MA adult residents have a substance use disorder (SUD), based on 2011 data.<sup>1</sup>
- Individuals with one or more chronic physical health diagnoses and Medicaid beneficiaries or uninsured individuals are comparatively more likely to have mental illness than the general population.
  - E.g., 34% of commercially insured residents and 81% of Medicaid beneficiaries with a chronic medical condition also had a behavioral health diagnosis in 2013.
- Comorbidity of mental illness and SUD is also common
  - Approximately half of individuals with a SUD also have a mental illness; and
  - One-fifth of those with a mental health diagnosis also have a SUD.<sup>2</sup>

### Spending

- Patients with both behavioral health and physical diagnoses have significantly higher health care expenditures than patients with only a physical diagnosis.
- A behavioral health diagnosis increases spending on management of chronic disease
  - Patients with both have 2-2.5 times higher health care expenditures than those with only a chronic disease<sup>3</sup> and are among the highest-cost patients in emergency settings.<sup>4</sup>
  - E.g., Medicare fee-for-service expenditures on patients with hypertension and behavioral health diagnosis were on average \$500 greater per patient than those with hypertension only.<sup>5</sup>
- Patients with behavioral health conditions incur comparatively higher out of pocket costs.
- They can experience difficulty finding post-acute placements due to provider hesitancy to accept patients with complexities that are associated with higher costs to the provider.<sup>6</sup>
- In 2012, services and prescription drugs associated with behavioral health accounted for 9-11% of total health care expenditures in the Commonwealth (a total of \$6-\$7 billion).<sup>7</sup>
- The high proportion of behavioral health expenses is due in part to the fact that the majority of dollars spent on behavioral health go toward emergency and inpatient services, rather than outpatient.<sup>8</sup>

### Emergency Department (ED) Utilization

- ED visits related to behavioral health are a growing share of all ED visits
- The number of ED visits associated with primary behavioral health diagnoses increased by 24% between 2010 and 2014, which accounts for a total of 7% of total visits
- ED behavioral health visits were markedly more prevalent in some areas of the Commonwealth.<sup>9</sup>
  - E.g., the rate was as low as 20/1,000 residents in West Merrimack / Middlesex, and as high as 43 / 1,000 residents in Fall River (after adjusting for age and sex).<sup>10</sup>
- Behavioral health conditions were more prevalent among frequent ED users (5+ visits in a year) than other ED users, at 11 % versus 5 %.
- Avoidable ED utilization related to behavioral health stems from a number of factors, including:
  - Inadequate provider availability;
  - Inefficient patient incentives; and
  - Social and community factors.
- HPC recommended that the Commonwealth focus on creating and strengthening community collaborations to reduce unnecessary utilization tied to behavioral health.<sup>11</sup>
- Lower numbers of behavioral health providers per capita by region is associated with higher rates of behavioral health-related ED visits.<sup>12</sup>
- However, patients who use the ED at comparatively higher rates also tend to use outpatient services more

frequently

- This suggests that providing more services alone is not sufficient to reduce ED utilization for those with serious behavioral health diagnoses.<sup>13</sup>
- The disproportionate and growing ED use among patients with behavioral health needs highlights an opportunity to reduce spending and improve care through better access to and coordination of care

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<sup>1</sup> 2013 Health Policy Commission Cost Trends Report. July 2014 Supplement. <http://www.mass.gov/anf/docs/hpc/07012014-cost-trends-report.pdf>. Accessed March 1, 2016

<sup>2</sup> 2013 Health Policy Commission Cost Trends Report. July 2014 Supplement. <http://www.mass.gov/anf/docs/hpc/07012014-cost-trends-report.pdf>. Accessed March 1, 2016

<sup>3</sup> 2013 Health Policy Commission Cost Trends Report. <http://www.mass.gov/anf/docs/hpc/2013-cost-trends-report-full-report.pdf>. Accessed March 1, 2016

<sup>4</sup> 2014 Health Policy Commission Cost Trends Report. <http://www.mass.gov/anf/budget-taxes-and-procurement/oversight-agencies/health-policy-commission/2014-cost-trends-report.pdf>. Accessed March 1, 2016

<sup>5</sup> 2014 Health Policy Commission Cost Trends Report. <http://www.mass.gov/anf/budget-taxes-and-procurement/oversight-agencies/health-policy-commission/2014-cost-trends-report.pdf>. Accessed March 1, 2016

<sup>6</sup> 2015 Health Policy Commission Cost Trends Report. <http://www.mass.gov/anf/budget-taxes-and-procurement/oversight-agencies/health-policy-commission/publications/2015-cost-trends-report.pdf>. Accessed March 1, 2016

<sup>7</sup> 2013 Health Policy Commission Cost Trends Report. <http://www.mass.gov/anf/docs/hpc/2013-cost-trends-report-full-report.pdf>. Accessed March 1, 2016

<sup>8</sup> 2013 Health Policy Commission Cost Trends Report. <http://www.mass.gov/anf/docs/hpc/2013-cost-trends-report-full-report.pdf>. Accessed March 1, 2016

<sup>9</sup> 2015 Health Policy Commission Cost Trends Report. <http://www.mass.gov/anf/budget-taxes-and-procurement/oversight-agencies/health-policy-commission/publications/2015-cost-trends-report.pdf>. Accessed March 1, 2016

<sup>10</sup> 2015 Health Policy Commission Cost Trends Report. <http://www.mass.gov/anf/budget-taxes-and-procurement/oversight-agencies/health-policy-commission/publications/2015-cost-trends-report.pdf>. Accessed March 1, 2016

<sup>11</sup> 2014 Health Policy Commission Cost Trends Report. <http://www.mass.gov/anf/budget-taxes-and-procurement/oversight-agencies/health-policy-commission/2014-cost-trends-report.pdf>. Accessed March 1, 2016

<sup>12</sup> 2015 Health Policy Commission Cost Trends Report. <http://www.mass.gov/anf/budget-taxes-and-procurement/oversight-agencies/health-policy-commission/publications/2015-cost-trends-report.pdf>. Accessed March 1, 2016

<sup>13</sup> 2015 Health Policy Commission Cost Trends Report. <http://www.mass.gov/anf/budget-taxes-and-procurement/oversight-agencies/health-policy-commission/publications/2015-cost-trends-report.pdf>. Accessed March 1, 2016