

U.S. Department of Health and Human Services Office of the Assistant Secretary for Planning and Evaluation (ASPE)

Office of Behavioral Health, Disability, and Aging Policy (BHDAP)

To our partners in research and policy analysis:

I am delighted to share with you BHDAP's end-of-year research newsletter. This issue highlights five recent publications, covering behavioral health topics (including opioid-exposed infants, child mental health during the COVID-19 pandemic, network adequacy standards for behavioral health care, and the HHS Overdose Prevention Strategy), and outcomes for dual-eligible beneficiaries in integrated care models.

We also highlight four BHDAP in Action activities, through which our office has coordinated or supported policy development related to key administration priorities. These include the development of the HHS Overdose Prevention Strategy; our convenings of the Medicaid Reentry Stakeholder Group and the Advisory Council on Alzheimer's Research, Care, and Services; and our support of the new HHS-HUD Housing and Services Resource Center.

Together, this work demonstrates the breadth and depth of the issues that our team addresses. We are grateful for your interest and partnership!

Dr. Tisamarie Sherry, Deputy Assistant Secretary

Please share with interested colleagues and/or subscribe below to receive these and other updates from BHDAP.

Status Report on Protecting Our Infants Act Implementation Plan: 2019 (*Posted September 14, 2021*)

Read Report

The current, updated Status Report provides an overview of HHS-wide programs implemented from September 2018 through December 2019. The report features an overview of HHS-funded activities to address gaps in data and surveillance, research and evaluation, programs and services for prenatal opioid exposure and Neonatal Abstinence Syndrome (NAS), provider training and public awareness efforts. Appendix A includes a detailed table of HHS activities on prevention, identification and treatment of prenatal opioid exposures and NAS. The information in the table is organized by agency and includes references to the relevant POIA recommendations to show the implemented activities under the POIA strategy.

Child and Adolescent Mental Health During COVID-19: Considerations for Schools and Early Childhood Providers Issue Brief

(Posted September 24, 2021) Read Brief

This issue brief seeks to estimate the prevalence and type of mental health conditions among children ages 0-17 with COVID-19 diagnosis, negative COVID-19 test or COVID-19 symptoms using a large multi-payer claims database. The high likelihood of mental health conditions among children in the sample highlighted the need for additional supports for mental health providers in schools and early childhood settings, which long have been essential in delivering mental health services to children. The brief reviews the importance of school-based providers in connecting to services students with disabilities and students with adverse childhood experiences as they were found to be most likely to receive mental health diagnosis after a COVID-19-related event.

Comparing Outcomes for Dual Eligible Beneficiaries in Integrated Care: Final Report (*Posted October 22, 2021*)

Read Report

Dual eligible beneficiaries are an important subset of the Medicare and Medicaid populations because they have a high prevalence of chronic conditions and disabilities, substantial care needs, and high health care and LTSS utilization and costs. Integrated care models have the potential to coordinate the administration, financing, and delivery of primary, acute, and behavioral health care, as well as LTSS across the Medicare and Medicaid programs, providing significant opportunities to improve care delivery and experience of care for dual eligible beneficiaries. This report uses Medicare encounter data to compare selected measures of service utilization and outcomes for dual eligible beneficiaries enrolled in three types of integrated care models--D-SNPs, FIDE-SNPs, or PACE--relative to their counterparts enrolled in regular, non-integrated MA plans. Results showed promising early evidence in support of the effectiveness of several types of MA integrated care models relative to nonintegrated MA plans in reducing the use of Medicaid-covered institutional care while increasing the use of HCBS, which is an important intended policy goal.

U.S. Department of Health and Human Services Overdose Prevention Strategy (Posted October 27, 2021)

Read Brief

Addressing the overdose crisis is a top priority of HHS. ASPE convened an interagency workgroup of key HHS experts in overdose prevention and substance use disorders to develop the Overdose Prevention Strategy, which includes four priority areas: primary prevention, harm reduction, evidence-based treatment, and recovery support. This issue brief discusses the Strategy in greater detail, including the objectives under each priority area, associated activities, and guiding principles.

Network Adequacy for Behavioral Health: Existing Standards and Considerations for Designing Standards

(Posted November 22, 2021)

Read Report

Network adequacy is often defined as having enough providers within a health plan network to ensure reasonable and timely access to care. At a minimum, health plans should include a sufficient number of providers who deliver mental health and substance use disorder (SUD) services (collectively referred to in this report as behavioral health services) to support access to those services. Beyond a minimum number of providers, adequate networks should have an appropriate geographic distribution of providers who have the capacity to deliver a wide range of services that align with enrollees' needs. State and federal network adequacy requirements exist, but many consumers face barriers to accessing behavioral health services because networks do not have enough providers who offer the services they need. To better understand network adequacy standards for behavioral health and best practices in developing and enforcing such standards, a targeted environmental scan was conducted and a technical expert panel (TEP) was convened. This report summarizes the findings from these activities.

BHDAP IN ACTION IN 2021

- ASPE is a contributing partner of the new HHS-HUD Housing and Services Resource Center (HSRC). The HRSC will implement a federally coordinated approach to providing resources, program guidance, training, and technical assistance to public housing authorities and housing providers; state Medicaid, disability, aging and behavioral health agencies; the aging and disability networks; homeless services organizations and networks; health care systems and providers; and tribal organizations. Read the press release and visit the new HSRC webpage.
- On October 25, 2021, BHDAP convened the Advisory Council on Alzheimer's Research, Care, and Services and welcomed a new cohort of non-federal members. The Advisory Council heard presentations about ways to support and strengthen the long-term services and supports direct care workforce, both paid and unpaid, to support access to care, improve the quality of caregiving, and meet the growing demand for long-term care dementia services. The Advisory Council also heard about a recent workshop on the behavioral and social research and clinical practice implications of preclinical diagnosis of AD/ADRD, as well as the AD/ADRD decadal study conducted by the National Academies of Sciences, Engineering, and Medicine. For meeting information, including the meeting summary and videos, visit the <u>NAPA webpage</u>.

- On August 20, 2021, BHDAP hosted a meeting of the Medicaid Reentry Stakeholder Group to discuss innovative strategies and best practices to help individuals who are currently incarcerated and returning citizens who are otherwise eligible for Medicaid, ensure continuity of coverage and seamless transitions back to the community. Required by Section 5032 of the SUPPORT ACT. The meeting proceedings available:
 - Medicaid Reentry Stakeholder Group Part 1
 - Medicaid Reentry Stakeholder Group Part 2
 - Medicaid Reentry Stakeholder Group Part 3
 - Medicaid Reentry Stakeholder Group Part 4
- ASPE convened an interagency workgroup of key HHS experts in overdose prevention and substance use disorders to develop the Department's new Overdose Prevention Strategy. The Strategy includes four priority areas: primary prevention, harm reduction, evidence-based treatment, and recovery support. Additionally, ASPE developed an issue brief to accompany the Strategy, which describes its development and highlights objectives and activities associated with each priority area. In addition to the Issue Brief above, there is a <u>Strategy website</u>, <u>Strategy press release</u>, and <u>WaPo article</u> on the Strategy.

Past Newsletters are available at <u>https://aspe.hhs.gov/bhdap-newsletters</u>.

WHO WE ARE: ASPE is the principal advisor to the Secretary of HHS on policy development, including major activities in policy coordination, legislative development, policy research, program evaluation, and economic analysis. Within ASPE, BHDAP focuses on policies and programs that support the independence, productivity, health and well-being of people with disabilities, people with behavioral health conditions, and older adults, including those with long-term care needs.

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