The Value of Integrated Care
- SAMHSA View -

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Behavioral Health is Essential To Health

Prevention Works

Treatment is Effective

People Recover
Why Behavioral Health Is Essential to Health?

• 7% of the adult population (34 million people), has co-morbid mental and physical conditions within a given year

• 24% of pediatric primary care office visits and 25% of all adult stays in community hospitals involve mental and substance use disorders

• People with CVD are 43% more likely to have anxiety disorder at some point in their lives

• Individuals with mental illnesses die at an average age of 53
## Roles of SAMHSA’s Regional Administrators

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<tr>
<th>Represent SAMHSA &amp; Connect with Stakeholders</th>
<th>Promote Initiatives &amp; Engage Target Populations</th>
<th>Collaborate to Support HHS Regions Together</th>
<th>Support Stakeholders</th>
<th>Conduct &amp; Report Regional Environmental Scan</th>
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<td>• Voice of SAMHSA Administrator in the regions and states.</td>
<td>• Contribute to the development and support of HHS/SAMHSA initiatives and activities that advance behavioral health.</td>
<td>• Lead cross-agency initiatives within the region and incorporate the support and collaboration of key HHS OPDIVs and other federal partners to advance behavioral health.</td>
<td>• Provide regional behavioral health leadership that supports stakeholder action, program development, policy innovation, and system transformation.</td>
<td>• Prepare periodic reports to communicate important regional/state trends, issues, and policy changes that affect SAMHSA’s programs, grantees, and stakeholders.</td>
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<td>• Educate and engage the public and key stakeholders in SAMHSA’s vision, mission, Strategic Initiatives, vital few, theory of change and priorities.</td>
<td>• Lead strategic discussion within communities, states and regions promoting behavioral health and advancing prevention, diagnosis, treatment of and recovery from mental and substance use disorders.</td>
<td>• Support HHS regional initiatives championed by Regional Directors, Regional Health Administrators, and/or regional OPDIV counterparts</td>
<td>• Leverage national and regional resources and technical assistance in collaboration with headquarters.</td>
<td>• Communicate performance success, challenges, and opportunities for improvement.</td>
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<td>• Connect the public and key stakeholders to people and resources.</td>
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<td>• Identify opportunities to increase collaboration among HHS colleagues to assure behavioral health is a priority.</td>
<td>• Assist stakeholders in expanding relationships and obtaining the information and resources they need.</td>
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<td>• Coordinate with and support the functions of the SAMHSA POs related to grants, contracts and cooperative agreements.</td>
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### LEADERSHIP

• As part of SAMHSA leadership, participate in development and implementation of SAMHSA strategic vision, direction and policies nationally.

• Promote engagement across Centers and Offices as members of the leadership team.

• Prepare periodic reports to communicate important regional/state trends, issues, and policy changes that affect SAMHSA’s programs, grantees, and stakeholders.

• Communicate performance success, challenges, and opportunities for improvement.
Responses Resulting from the ACA

- Health Homes—start with people who have a variety of chronic conditions
- Accountable Care Organizations—start with Medicare population
- Patient Safety Initiative—reward hospitals and other facilities for fewer incidents
- Quality Measures—focus on identifying people who are at risk of certain conditions
SAMHSA’S Strategic Initiatives

AIM: Improving the Nation’s Behavioral Health (1-2)
AIM: Transforming Health Care in America (3-6)
AIM: Achieving Excellence in Operations (7-8)
Health Reform

- **Health Reform** – Increasing access to appropriate high quality prevention, treatment, and recovery services for mental and substance use disorders compared with the availability of services for other medical conditions; and supporting integrated, coordinated care, especially for people with behavioral health and other co-occurring health conditions such as HIV/AIDS.

- Dual eligibles/emergency room diversions/IMD exclusion.

- Integration – what does that mean?
HHS 11 operating divisions = 8 PHs and 3 Human Services & Staff Divisions

NIH → NIDA / NIAA / NIMH

ACF  AHRQ  ACL  ATSDR
CDC  CMS  FDA  HRSA
IHS  OS  OSG  OCR
OASH  SAMHSA
Larger Public Health Ecosystem

- NIH Collaboration with other HHS agencies is vital to transforming fundamental scientific knowledge into useful applications (disease treatments, preventive interventions, protective health policies, public health campaigns). Information from HHS agencies on public health needs in turn inform the policies & promote the priorities for NIH funded research. Demonstrations and services evaluations are a part of the Operations Division objectives.
Models of Integration

1. Universal Screening
2. Navigators
3. Co-location
4. Health Homes
5. PBHCI Grants/CIHS
6. NESCOI/IBHLC Efforts
7. System-Level Integration of Care
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