Massachusetts Child Psychiatry Access Program (MCPAP) for Moms:
Utilization and Quality Assessment

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Disclosure Statement: Nancy Byatt, DO, MSCI, MBA

- Medical Director, MCPAP for Moms, MA Department of Mental Health, Executive Director, Lifeline4Moms
- Advisory Boards, consultant and speaker honoraria, Sage Therapeutics or their agents
- Council Member, Gerson Lehman Group
- Perinatal Depression Advisory Board, Janssen / Johnson and Johnson
- Steering Committee on Clinical Advances in Postpartum Depression, Medscape
- Consultant, Ovia Health
The vast majority of perinatal depression is unrecognized and untreated

Perinatal depression is recognized as a major public health problem
The perinatal period is ideal for the detection and treatment of depression

Regular opportunities to screen and engage women in treatment

Ob/Gyn providers have a pivotal role

Most depression is treated by primary care providers
Transforming obstetric care to include mental health care can provide an innovative solution.
Massachusetts Child Psychiatry Access Program

For Moms

- **Education**
  - Toolkits
  - Grand Rounds
  - Practice Learning

- **Perinatal Psychiatry Consultation**
  - Staffed at cost of 1 full time psychiatrist

- **Resources and Referrals**
  - Staffed by 2.2 full time care coordinators

## Telephone Consultation

<table>
<thead>
<tr>
<th>Obstetric providers/Midwives</th>
<th>Family Medicine</th>
<th>Psychiatric providers</th>
<th>Primary care providers</th>
<th>Pediatric providers</th>
</tr>
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Discuss potential management strategies

Recommend a Face to Face Evaluation

Refer to the community
Resources and referrals link women with therapy, support groups, and other community resources.

Support the wellness and mental health of perinatal women.
Since our launch in July 2014, MCPAP for Moms has served many providers and parents

<table>
<thead>
<tr>
<th>Category</th>
<th>Count</th>
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<tbody>
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<td>OB Practices Enrolled</td>
<td>151 (72%)</td>
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<tr>
<td>Women Served</td>
<td>5,616</td>
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<tr>
<td>Doc-doc Telephone Encounters</td>
<td>3,546</td>
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<tr>
<td>Face to Face Evaluations</td>
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Enrolled Practices and Members Served

- Enrolled Practices
- Members Served

The chart shows the increase in enrolled practices and members served over time, with a steady rise from August 2014 to February 2019.
Barriers to Treatment

**Patient**
- Lack of education regarding treatment options
- Lack of follow-up
- Physical health prioritized over mental health

**Provider**
- Discomfort with making psych
- Undertrained
- Low self-efficacy

**Systems**
- Hard to integrate depression care into work flow
- Not understanding how to use MCPAP for Moms
Women disclose symptoms
And seek care

Facilitators to Treatment

Patient
- Proactive education and treatment
- Ob providing med treatment
- Resources and referrals

Provider
- Trainings and toolkit
- Access to consultation
- Patient psychoeducation

Systems
- Access to resources and referrals
- Routine screening

Utilization of Treatment

Improved Outcomes

Prepared providers, with resources

www.chroniccare.org
Untreated depression comes at a high cost

$22,000/yr

$192,400,000/yr

Diaz et al. (2010). *Wilder Research.*
Our costs our low

$22,000/yr

$11.81/yr
$0.98/month

$192,400,000/yr

$850,000/yr
50% is recuperated through legislated surcharge to commercial insurers

$22,000/yr

~$200 Million/yr

$11.81/yr
$0.98/month

$850,000/yr

Diaz et al. (2010). Wilder Research.
With MCPAP for Moms, all perinatal women across MA have access to psychiatric treatment

MCPAP for Moms can serve as model for other states in the US
With MCPAP for Moms, all perinatal women across MA have access to psychiatric treatment.

MCPAP for Moms can serve as model for others states and countries.
Soon 10 states will have similar programs
Lifeline4Moms can help through:

**Building Capacity to Address Maternal Mental Health and Substance Use Disorders**
To secure buy-in from stakeholders, identify critical resources, and lay the groundwork to support providers in addressing perinatal mental health.

**Training and Workforce Development**
To help health care settings address maternal mental health and substance use disorders.

**Consultation**
Support primary care and specialty providers to implement evidence-based standards of clinical care to enhance maternal mental health during the perinatal period. Focus on helping providers integrate mental health care into their everyday practice.

**Research and Evaluation**
To develop maternal mental health interventions and programs, and to assess their impact on individuals, providers, and systems.

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**Our Team**
Our team works with diverse stakeholders to transform women's health care by integrating mental health and substance use disorder recognition and management into standard care.

**Why Choose Us?**
Our team developed the Massachusetts Psychiatry Access Program (MCWAP) for Moms. MCWAP for Moms has shifted paradigms on how to address depression in obstetric settings, impacted state and national policies regarding perinatal mental health, and increased access to perinatal mental health care for thousands of women. We are leading the nation in developing similar scalable programs and establishing best practices for integrating maternal mental health care into settings that have not traditionally addressed mental health. We are well-suited to help others do the same.
Long-term goals include linkage with other data sets to close knowledge gaps

- Potential cost savings
- Depression outcomes
- Treatment rates
- Provider self-efficacy
Our vision is to unify programs across the US in the pursuit of a common mission.
Our mission is to help improve maternal & child health through perinatal psychiatry access programs
Please contact me with questions

www.mcpapformoms.org
www.lifeline4moms.org

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Thank you!
QUESTIONS?

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