

MIDD 2 Initiative PRI-03: Prevention and Early Intervention Behavioral Health for Adults Over 50

How does the program advance the adopted MIDD policy goals?

This initiative impacts the adopted MIDD policy goal of “improve health and wellness of individuals living with behavioral health conditions.”

Screening for depression, anxiety and substance use disorder is provided for older adults (age 50+) receiving primary medical care in the health safety net system. Older adults who screen positive are enrolled in the Mental Health Integration Program (MHIP)³², a short-term behavioral health intervention based on the Collaborative Care Model. The Collaborative Care Model is a specific model for integrated care developed at the University of Washington Advancing Integrated Mental Health Solutions (AIMS) Center to treat common mental health conditions that are persistent in nature and require systematic follow-up. Services take place in primary care clinics that are contracted under Public Health.

MHIP focuses on a defined patient population identified through screening and uses measurement-based practice and treatment to reduce depression and anxiety (as measured by validated screening tools such as the Patient Health Questionnaire-9 and Generalized Anxiety Disorder-7). Primary care providers work with behavioral health professionals to provide evidence-based medications and psychosocial treatments supported by regular consultation with a psychiatric specialist and treatment adjustment for patients who are not improving. Treatment lasts on average for six months.

Adults with more severe or complex needs that cannot be adequately treated in primary care are referred to mental health and substance use disorder treatment.

1. Program Description

◇ A. Service Components/Design (Brief)

The MIDD Strategy Prevention and Early Intervention Mental Health and Substance Abuse Services for Adults Age 50+ provides prevention and intervention services for older adults to reduce or prevent more acute illness, high-risk behaviors, substance use, mental and emotional disorders, and other emergency medical or crisis responses. This MIDD 2 initiative provides screening for depression, anxiety and substance use disorder for older adults (age 50+) receiving primary medical care in the health safety net system. Older adults who screen positive are enrolled in MHIP.

◇ B. Goals

The goal of this initiative is to reduce depression and anxiety (as measured by validated screening tools such as the Patient Health Questionnaire-9 and Generalized Anxiety Disorder-7) and to reduce or prevent more acute illness, high-risk behaviors, substance use, mental and emotional disorders, and other emergency medical or crisis responses.

³² <https://aims.uw.edu/washington-states-mental-health-integration-program-mhip>

◇ C. Preliminary Performance Measures (based on MIDD 2 Framework)³³

1. How much? Service Capacity Measures

This initiative will serve at least 4,000 participants annually.

2. How well? Service Quality Measures

- Increased use of preventive (outpatient) services

3. Is anyone better off? Individual Outcome Measures

- Reduced behavioral health risk factors
- Reduced unnecessary emergency department use

◇ D. Provided by: Contractors

2. Spending Plan

Year	Activity	Amount
2017	Continued screening and intervention services for older adults	\$484,639
2017 Annual Expenditure		\$484,639
2018	Continued screening and intervention services for older adults	\$497,240
2018 Annual Expenditure		\$497,240
Biennial Expenditure		\$981,880

³³ Throughout 2017, review and refinement of Results-Based Accountability (RBA) performance measures for MIDD 2 initiatives will be conducted whenever applicable, in consultation with providers. Updates to performance measures that may result from this collaborative process will be reported in the next MIDD Annual Report in August 2018.

3. Implementation Schedule

◇ A. Procurement and Contracting of Providers

Public Health – Seattle & King County (PHSKC) manages this initiative as part of the MHIP. PHSKC also manages three strategies for the current Veterans and Human Services Levy (VHSL) that target different populations from the MIDD 2 Initiative but are also a part of the MHIP. Pending the outcome of the VHSL renewal, PHSKC may plan for a procurement process for the MHIP that includes funding from both MIDD 2 and the renewed VHSL. Planning will begin in late 2017 after the outcome of the VHSL renewal process is known. A Request for Applications (RFA) will be issued in the second quarter of 2018. New contracts for MIDD 2 funds under this initiative will begin on January 1, 2019. In the meantime, current MIDD 2 service contracts will continue.

◇ B. Services Start date (s)

Services continued on January 1, 2017.

4. Community Engagement Efforts

In late 2016, PHSKC solicited input from stakeholders including the Community Health Plan of Washington (a Medicaid Managed Care Organization implementing MHIP with its members), contracted service providers, and subject matter experts from the University of Washington regarding this initiative and its evaluation.