



NC Priorities for a Strong Public Behavioral Health System: Investing in Behavioral Health and Resilience

Kelly Crosbie, MSW, LCSW
Director, DMHDDSUS
Kelly.Crosbie@dhhs.nc.gov

Leadership
Summit

The Need in North Carolina

- Roughly 1 in 5 North Carolinians will experience a mental illness – that’s over 2 million North Carolinians.
- In 2019, more than 55% did not receive treatment – that’s more than 1 million North Carolinians who went without care.
- Youth suicides doubled in the last decade. Suicide is the 2nd leading cause of death for youth ages 10-18 in North Carolina. Suicide is the 2nd leading cause of death among people ages 15-34 in the United States.
- Drug overdose deaths jumped 72% in two years. In 2021, 4041 North Carolinians died from drug overdoses. This is the highest number North Carolina has ever recorded in a single year.
- We have nearly 300 fewer state psychiatric hospital beds available to patients due to staffing shortages.
- Every day, 350 people sit in emergency departments waiting for care. 50 of those are children.
- Serious mental illness affects an estimated 14.5% of men and 31% of women in jails.
- We don’t have enough QPs, APS, PP, licensed professionals to meet the needs of people with MH, SUD, IDD, TBI needs.

Guiding Principles

- Everyone deserves access to health care-including medical care, behavioral health care, and home and community based services
 - Medical Expansion!
 - Some of our existing funding for safety net care (\$275 million annually) could be spent on things Medicaid doesn't cover, like harm reduction, prevention, and supports for individuals with intellectual developmental disabilities (I/DDs) and brain injury.
- Whenever possible, people should be able to access services in the setting that is the best fit for them, including in home and community-based settings.
 - That includes people with intellectual and developmental disabilities, brain injury, and people with serious mental illness.
- We need to invest in rates and workforce to ensure access to high quality care in our public behavioral health and IDD/TBI system.

NC DHHS Priorities

These priorities and our work across the department are grounded in whole-person health, driven by equity, and responsive to the lessons learned responding to the greatest health crisis in more than a generation.

Behavioral Health & Resilience



We need to offer services further upstream to build resiliency, invest in coordinated systems of care that **make mental health services easy to access** when and where they are needed and to **reduce the stigma** around accessing these services.

Child & Family Well-Being



We will work to ensure that North Carolina's children grow up safe, healthy and thriving in nurturing and resilient families and communities. **Investing in families and children's healthy development builds more resilient families, better educational outcomes and, in the long term, a stronger society.**

Strong & Inclusive Workforce



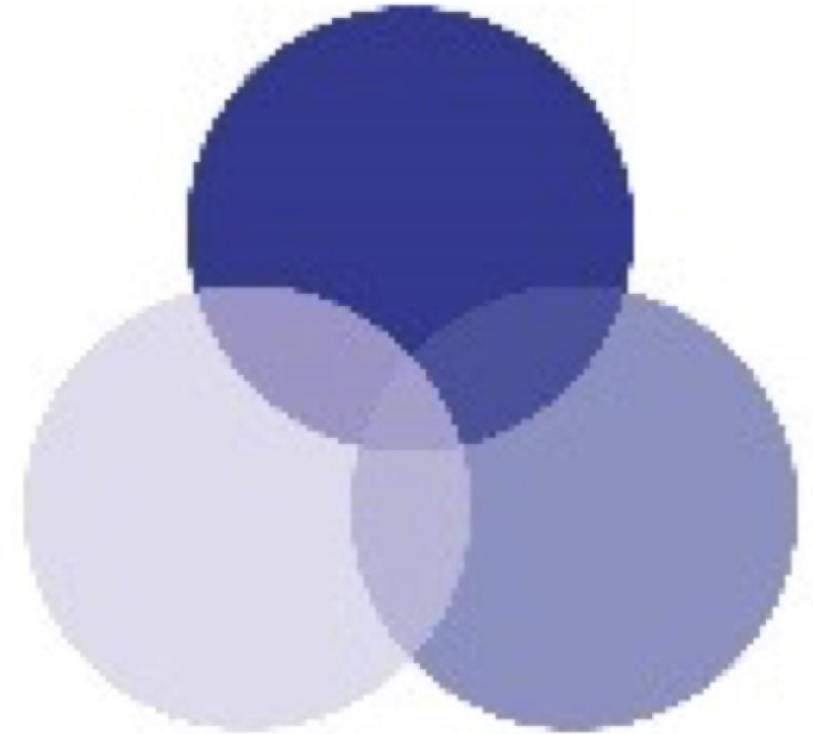
We will work to strengthen the **workforce that supports early learning, health and wellness by delivering services** to North Carolina. And we will take action to be an equitable workplace that lives its values and ensure that all people have the opportunity to be fully included members of their communities.

DHHS BEHAVIORAL HEALTH & RESILIENCE PRIORITY AREAS

- Promoting integrated behavioral and physical healthcare
- Addressing the intersection of behavioral health & criminal justice systems
- Increasing access to crisis services
- Addressing substance use disorders
- Improving behavioral health data infrastructure

Promote Integrated Behavioral and Physical Healthcare

- Increase use of collaborative care model in primary care
- Operationalize Certified Community Behavioral Health Clinic (CCBHC) pilots and develop sustainability plan
- Awarded a CCBHC planning grant in March 2023
- Operationalize Tailored Care Management Systemwide
- Launch Tailored Plans



Address the Intersection of Behavioral Health & Criminal Justice Systems



- Maintain and grow pre-arrest diversion and re-entry programs
 - We've invested more than \$15M for local diversion & re-entry programs in 30 counties
- Grow capacity restoration programs
 - NC Rise/Mecklenburg County Detention Center
 - NEXT: Wake & Cumberland Counties

Increase Access to Crisis Services



- Launched 988 and maintain >90% answer rate (July 2022)
 - 31,417 calls (an average of 4,496 per month)
 - Almost 2000 new callers each month
 - Launching Peer Warm Line (RFA in May)
- Launched Bed Registry for Behavioral Health (BH SCAN) in January 2023
 - 88% of license beds are operational
 - Less than 7% of beds are 'free' on any given day

Address Substance Use Disorders



- Implement legislative changes to provide mobile Opioid Treatment Programs (OTP)
- Expand Collegiate Recovery programs (another \$3.2m)
 - 13 colleges/universities
 - NEXT: focus on HBCU
- Align Medicaid/State SUD services to ASAM criteria

Improve Behavioral Health Data Infrastructure



- Implement comprehensive BH hold in emergency department reporting (NCDETECT)
 - Every day ~350 people in EDs waiting for treatment
- Implement BH Syndromic Surveillance using NCDETECT
- Implement Electronic Health Records in the state psychiatric hospitals

DMHDDSUS Updates

- Executing on DHHS Behavioral Health & Resiliency Priorities (BH&R)
- Preparing to execute on the \$1B Gov Plan/HB855
- Preparing our Strategic Plan (State Plan for Mental Health, Developmental Disabilities, and Substance Abuse Services)
 - Public Sharing of Data/Progress
- Plain Language Campaign: Helping People Understand Our System Better
- Anti-Stigma Campaign
- 988 Campaign
- Peer Services—refreshing array of certification options; planning learning collaboratives.
- Trying to listen better and share more. Our system works best when we all work together and when we use/share data for decision-making.

Investing in Behavioral Health and Resilience

A comprehensive plan to strengthen North Carolina's mental health and substance use disorder treatment system



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**



Key Investments to Strengthen North Carolina's Behavioral Health System

1. Make behavioral health services more available when and where people need them (\$550 million)
2. Build strong systems to support people in crisis and people with complex needs (\$400 million)
3. Enable better health access and outcomes with data and technology (\$50 million)

\$1 BILLION total investment in NC's behavioral health system

Key Investments to Strengthen North Carolina's Behavioral Health System

1. Make behavioral health services more available when and where people need them
 - Raise Medicaid reimbursement rates for behavioral health services (\$225 million)
 - Improve access to routine, integrated care in communities and schools (\$175 million)
 - Address the intersection of the behavioral health and justice systems (\$150 million)

Key Investments to Strengthen North Carolina's Behavioral Health System

2. Build strong systems to support people in crisis and people with complex needs

- Build a strong statewide behavioral health crisis system (\$200 million)
- Transform child welfare and family well-being (\$100 million)
- Create sustainable hospitalization and step-down options (\$100 million)

3. Enable better health access and outcomes with data and technology (\$50 million)

Goals for these Investments:

- More people will be able to access **affordable mental health and substance use disorder treatments**.
- **More behavioral health providers** will be able to provide services when needed.
- **Fewer people will experience behavioral health crises** because there will be more early intervention and prevention services to meet them where they are in communities and schools.
- When people do experience a crisis, there will be **faster, better ways to get them help**.
- **Our inpatient psychiatric hospitals' capacity will better meet the demand** thanks to a stronger and better-compensated workforce and more step-down options to less intensive care
- **Fewer children will be "living" in emergency departments and DSS offices** because there will be more prevention services and more appropriate placements available.



Thank you!

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