

Including Community Mental Health & Addiction Services Providers in Federal HIT Funding Initiatives

The Health Information Technology for Economic and Clinical Health Act (HITECH Act) was enacted as part of the American Recovery and Reinvestment Act in January of 2009. It creates a new Medicare and Medicaid reimbursement incentive to encourage a wide array of providers to adopt and utilize electronic health records. Among other priorities, widespread adoption of Health Information Technology (HIT) is meant to increase healthcare quality, reduce medical errors, and promote care coordination.

Although psychiatrists may access these incentive payments, Community Behavioral Health Organizations (CBHOs), as facilities, are not eligible for this funding. This means that: 1) the vast majority of individuals with mental health and substance use problems who seek care at CBHOs will not benefit from the potential positive outcomes of provider usage of HIT, and 2) the potential for primary care providers and mental health/addiction providers to develop collaborative relationships is greatly limited — a serious concern given the high prevalence of chronic health conditions in individuals with mental illness and substance use problems.

The National Council is seeking inclusion of CBHOs in any and all federal HIT initiatives to ensure that individuals with mental illnesses and addictions have access to the overall health benefits of provider usage of HIT.

POLICY RATIONALE FOR INCLUDING CBHOs IN FEDERAL HIT FUNDING INITIATIVES

The clinical challenges presented by individuals with mental illness, substance use problems, and co-occurring chronic health conditions validate the need for multidisciplinary interventions, such as:

- >> Partnerships between CBHOs, Federally Qualified Health Centers (FQHCs), and other community health providers.
- >> Nursing capability onsite at CBHOs to screen for health conditions.
- >> Integrating mental health and addiction treatment.
- >> Ongoing access to primary care physicians.
- >> Ongoing access to specialty medical services.
- >> Coordination with wellness activities including weight management and smoking cessation.
- >> Relationships with psychiatric hospitals and emergency rooms to facilitate discharge planning.

This extraordinary array of clinical and wellness activities cannot be managed or appropriately coordinated without health information technology that can be easily accessed at each service site.

Community Mental Health Centers and other community-based mental health and addiction providers should be included in all federal HIT funding initiatives, including the new Medicaid reimbursement system authorized by section 4201 of the HITECH ACT.



Request

Include community behavioral health organizations in all federal health information technology initiatives.

