

The Nebraska Partnership for Mental Healthcare Access in Pediatrics (NEP-MAP)

Munroe-Meyer Institute
University of Nebraska Medical Center



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INSTITUTE



Unmet Behavioral Health Needs

Depression often goes undetected

PCPs have few places to refer patients

30-50% of referrals never make the first appointment

67% do not access behavioral health treatment

Impact of COVID



Increase in
depression and
anxiety

Increased unmet
mental health needs
among adults

Increase in
overdoses in early
pandemic

Parent-reported
impact on child's
mental health

Increased mental
health-related ED
visits

Increased demand
for services +
difficulty recruiting
and retaining
providers

Nebraska Behavioral Health Workforce



88 of 93 counties
are Federally
identified Mental
Health Professions
Shortage Areas

74% of providers
practice in
Metropolitan areas

32 counties have 0
mental health
professionals

Only 4 rural counties
have a child
psychiatrist

Munroe-Meyer Institute



444 S. 44th St. (across from the ED at UNMC)

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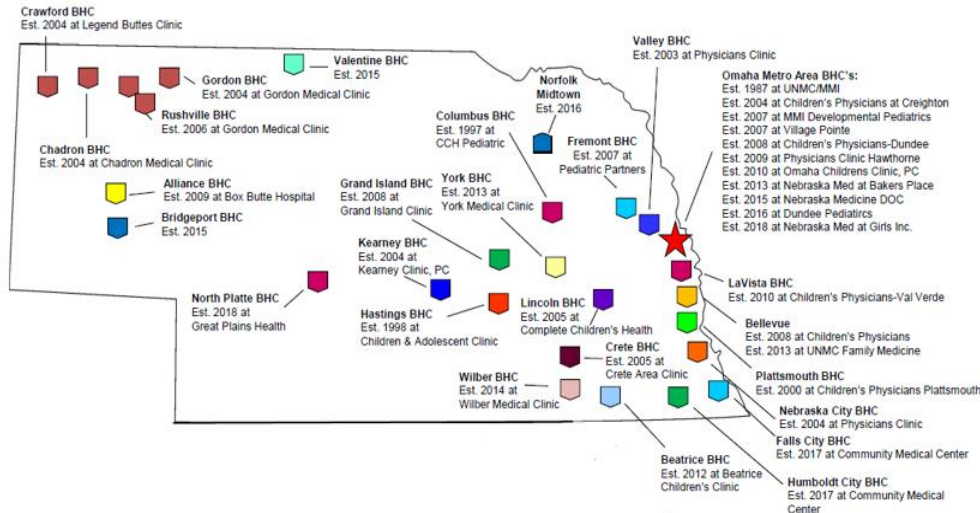


6902 Pine St. Omaha, NE 68106 (Scott Campus in Aksarben)

Munroe-Meyer Institute



- Developing a network of co-located behavioral health clinics since 1997
- Current network includes 43 clinics across Nebraska





The Primary Care Experience

1. See patients in exam rooms
2. Provide training to a variety of students
3. Hallway consultations with PCPs/staff
4. On the spot consults with patients directly
5. Continuing education talks to PCPs/staff (and community providers)
6. Systems change within the primary care setting
7. Community involvement

Primary Care Experience



Primary Care Experience



Behavioral Health in PC



80-85% Behavioral health
concerns can be managed in PC

Require referral/
community treatment



10-15%

5%



Specialty care

Access vs. Accessing Behavioral Health



- Creating **ACCESS** points does not mean that patients will **ACCESS** services
- 50-50 chance they will make an appointment
- 50% of those who make an appointment will show for the appointment
- Only 25% at most access behavioral health



Primary Care as Gatekeepers

- Primary care providers are often seen as the first contact point in
 - Health System
 - Specialty Care
 - Behavioral Health
- PCPs are PPCPs
- PCPs are more likely to manage mental and behavioral health conditions than refer them out.



Nebraska Mental Health Access Grant

- 5-year, \$2.2 million HRSA grant through Maternal and Child Health Bureau
- Designed to improve timely access to behavioral healthcare for children in rural Nebraska
- The main goal is to provide primary care providers access to behavioral health supports



Clinical Demonstration Project

Goal



- To improve access for children and families to pediatric mental and behavioral health services
- Utilize our existing network of integrated behavioral health clinics across Nebraska

<https://www.unmc.edu/mmi/services/psychology/teleproviderconsult.html?msclkid=77c12956b5f311ec8c21922c759e3b30>

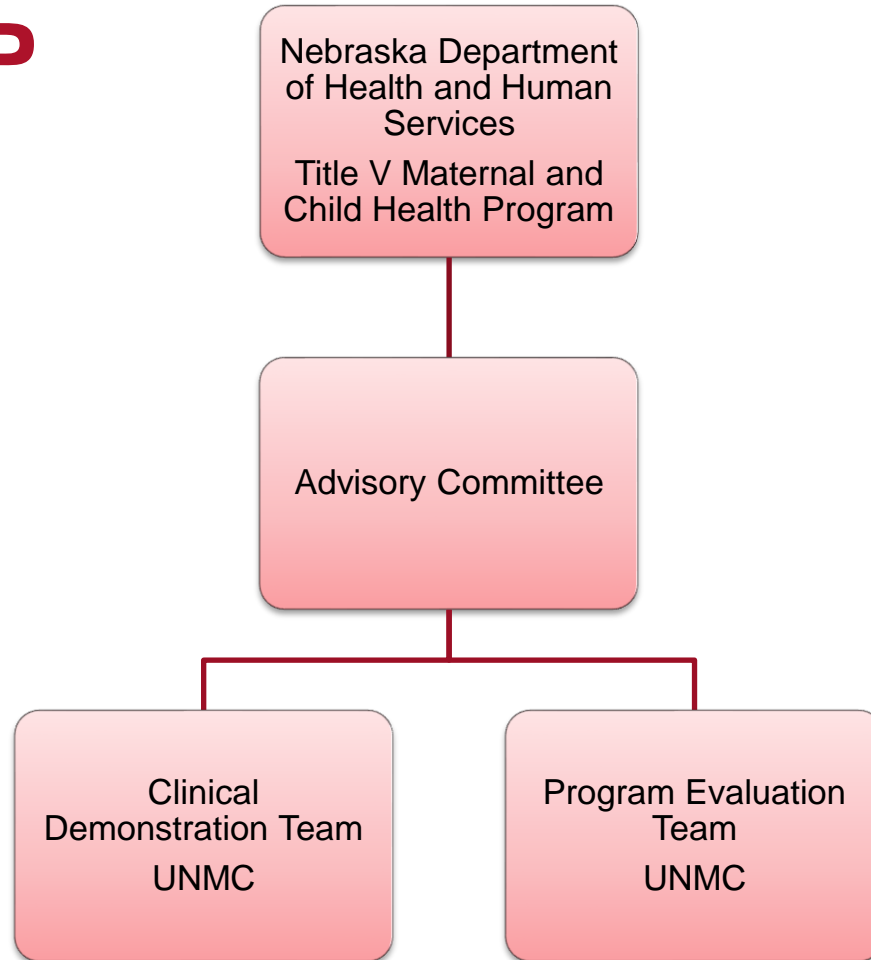


Goals

- Enhance early screening of behavioral health disorders
- Conduct a clinical demonstration project in a network of providers to expand and diversify integrated behavioral health provision in PC pediatric and family medicine practices, with a focus upon rural communities
- Evaluate the overall effectiveness of increasing access to PCP's to behavioral health consultation

<https://www.unmc.edu/mmi/services/psychology/teleproviderconsult.html?msclkid=77c12956b5f311ec8c21922c759e3b30>

NEP-MAP



NEBRASKA PARTNERSHIP
FOR MENTAL HEALTHCARE ACCESS IN PEDIATRICS



www.dhhs.ne.gov/NEPMAP

Clinical Demonstration Project



Project Director: Holly Roberts, PhD
Project Associate: Christian Klepper, PsyD

UNMC MMI
Psychology

UNMC Psychiatry
Ryan Edwards, MD

UNMC Psychiatric
Nursing
Therese Mathews,
MSN, PhD

UNMC
Developmental
Behavioral Pediatrics
Cynthia Ellis, MD

Expert Consultant:
Joseph Evans, PhD

Integrated Behavioral Health Clinics in Nebraska
Licensed MMI Psychology Providers and Collaborators
Post-Doctoral Fellows
Doctoral Interns
Trainees

Tele-Behavioral Health Consultation (TBHC)



Behavioral health providers or case managers on-site at primary care clinics

Behavioral health/care managers determine need for consultation with psychiatry

Consultant consults with PCP (audio or audio-visual) on the same day

- Child Psychiatry
- Developmental Medicine
- Psychiatric Nurse Practitioner

Consultation Requests by Enrolled Providers

Demographics



Provider Type

- Physician (MD/DO) = 72%
- APRN or PA-C = 28%

Gender

- Male = 47%
- Female = 53%

Location

- Rural = 81%
- Urban = 19%



Consultation Requests

- 87.5% of requests have included patients with multiple behavioral and emotional concerns
 - ADHD
 - Anxiety
 - Autism
 - Aggression
 - Depression
 - Disruptive Behavior
 - Trauma



Consultation Requests

- 90.6% include questions specific to medication management
 - No medications = 9.4%
 - 1 medication = 6.25%
 - 2+ medications = 84.35%
 - 3+ medications = 28.1%
 - 4+ medications = 9.4%



Consultation Outcomes

Medication:

- No changes
- Change dose on current medication(s)
- Change medication
- Add another medication
- Discontinue medication

Non-Medication:

- Anticipatory guidance in behavioral interventions
- Referral to a higher level of care/specialized services

Behavioral Health Consultation for Primary Care Providers

The UNMC Tele-Behavioral Health Consultation Team (TBHC) provides psychiatry support to primary care providers in Nebraska who are managing pediatric patients with behavioral health problems. Providers are available to offer guidance on diagnosis, medications, and psychotherapy interventions to assist primary care providers in better managing patients in their practices. Support is available through phone and synchronous audio/video teleconference consultations to referring primary care providers.

How Does it Work?

1. The participating provider or representative initiates a request to Dani Porter at (402) 559-3838 or through the website at unmc.edu/mmi/departments/psychology/psych-patientcare/teleproviderconsult.html
2. A member of the TBHC team will contact the provider within the same business day to offer guidance.
3. The TBHC is not an emergency service. Emergencies will be routed to local emergency services.
4. The UNMC TBHC team does not prescribe medication. They provide support for prescribers.

Team Members



Terri Mathews, Ph.D., APRN-NP
Psychiatric Nurse Practitioner



Ryan Edwards, M.D.
Psychiatrist



Cindy Ellis, M.D.
Developmental-Behavioral
Pediatrician

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A Good State of Mind



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The UNMC Tele-Behavioral Health Consultation Team is supported by an award from Nebraska Department of Health and Human Services (NEDHHS). The award is made possible by the Health Resources and Services Administration's (HRSA) Pediatric Mental Health Care Access Program, Grant No. U49MC000002, with NEDHHS as lead state agency. The contents of the project are the responsibility of UNMC/MMI and do not necessarily represent official views of, or endorsement by, HRSA or NEDHHS.



Primary Care Providers (PCPs)

- PCPs can request a consultation three ways:

1) Visit our website:

<https://www.unmc.edu/mmi/services/psychology/teleproviderconsult.html>

2) QR Code



3) Call 402-559-3838

Tele-Behavioral Health Consultation (TBHC) Primary Care Webinar Series



Gender-Affirming Practices in Primary Care

Tuesday, June 7 | 12 p.m. to 1 p.m.

Impact of Social Media on Youth and How to Manage Social Media Recommendations in Primary Care

Tuesday, June 14 | 12 p.m. to 1 p.m.

Obsessive Compulsive Disorder in Primary Care

Tuesday, June 21 | 12 p.m. to 1 p.m.

Medication Management in Primary Care

More information coming soon!

<https://mhttcnetwork.org/centers/mid-america-mhttc/tele-behavioral-health-consultation-tbhc-primary-care-webinar-series>



Questions?