Maintaining Access to Care for Mentally Ill Populations

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Introduction

- The National Institute of Mental Health reports that one in four adults—approximately 57.7 million Americans—experience a mental health disorder in a given year.

- Mental illness usually strikes individuals in the prime of their lives, often during adolescence and young adulthood. All ages are susceptible, but the young and the old are especially vulnerable.

- Without treatment the consequences of mental illness for the individual and society are staggering: unnecessary disability, unemployment, substance abuse, homelessness, inappropriate incarceration, suicide and wasted lives; The economic cost of untreated mental illness is more than $100 billion dollars each year.

Introduction

- Treatments for serious mental illnesses are highly effective; between 70 and 90 percent of individuals have significant reduction of symptoms and improved quality of life with a combination of pharmacological and psychosocial treatments and supports.

- With appropriate effective medication and a wide range of services tailored to their needs, most people who live with serious mental illnesses can significantly reduce the impact of their illness and find a satisfying measure of achievement and independence.

The Current State of the Mental Health System in Alabama

- In 2006, Alabama’s mental health care system received an overall grade of D. In three years, its grade has not changed.

- Due to funding shortages, only 33 percent of individuals with serious mental illness receive services from the state’s public mental health system.

- In the past six years, overall funding for mental health has only increased 14% while the demand for services has increased by 44%.


Alabama Department of Mental Health. Alabama Department of Mental Health Departmental Overview. PowerPoint Presentation to the State Legislature 2010 Regular Session. Modified August 2010
Alabama Budget for Mental Health

- In 2006, Alabama spent $64 per capita on mental health agency services, which equates to 0.9% of total state spending that year.

- Since 2008, the Alabama Department of Mental Health General Fund revenues have decreased by 38%. In 2012, it is anticipated that the public mental health system will be cut an additional $28 million in state dollars.
Alabama’s revenue has been in a decline due to the economy’s recent downturn.

This has crippled the state’s general fund and education trust fund. Both funds are utilized to pay for public services; however, the general fund does not have growth taxes to support it as the education trust fund does.

With the decline in revenues to the General Fund and the public’s continued demand for no increases in any state taxes, services are ultimately faced with serious cuts.

The demand for additional funding for services is not privy to mental health alone. Public Safety, Corrections, Pardons and Parole, Medicaid, Public Health, Human Resources (child welfare), and Administrative Office of Courts are also funded out of the State General Fund and they have their advocates.
The Alabama Mental Health Budget Deficit

- Supplanted Stimulus Funds are depleted.
- Waiting list for community-based services have become even longer.
- State hospitals have projected an additional cost in hospital care for FY12 of $18 million for the mentally ill who do not receive needed treatment within the local community.
- The state will lose $3 dollars in federal funds for every state dollar utilized in the community for mental health services.

How Did We End Up Here?

Shift from Hospitals to Community Care

- Over the past forty years, Alabama’s mental health system was primarily directed by judicial oversight as a result of the Wyatt vs. Stickney class action lawsuit.

- The Wyatt case shifted from institutional care to community-based treatment.

- The Alabama mental health system transitioned individuals from institutional settings to more community integrated systems for treatment and care.

- The census at Bryce Hospital dropped from over 5,000 patients in 1971 to less than 400 in 2004.

How Did We End Up Here?

*Shift from Hospitals to Community Care*

- Over the thirty-three year term of the case, a broad network of community providers evolved, and by 2003 when the case was settled, community mental health providers served over 100,000 Alabamians per year.

- The settlement did not result in a significant increase in state funding for community-based recovery-oriented services.

- The per capita spending for mental health services in Alabama continues to remain low compared to other states ($79 per capita vs. national average of $121).

Alabama Department of Mental Health. *Alabama Department of Mental Health Departmental Overview*. PowerPoint Presentation to the State Legislature 2010 Regular Session. Modified August 2010.

The Inevitable Result

- **Prisons: The New Asylums**

  - The Consensus Project 2011 states that the rate of mental illness in state prisons and jails (16%) is at least three times the rate in the general population (5%).

  - Increasing funding for mental health services would ultimately alleviate the burden of treating individuals with mental illness in the criminal justice system.

Prisons in Alabama: The “de facto” mental health care provider

- Alabama has one of the nation’s largest prison populations - over 31,000 in 2009.

- The state’s prison population continues to grow even though nationwide the prison population has decreased for the first time in twenty-eight years.

- Currently approximately 24% of inmates in Alabama correctional facilities have a serious mental illness.

**Figure 1** National Incarceration Rates. Source: National Institute of Corrections.

**Figure 2** Change in State Prison Populations. Source: Equal Justice Initiative. March 2010
Homelessness and Mental Illness

- According to the National Coalition for the Homeless, **20-25%** of the homeless population in the United States **suffers from some form of serious mental illness**.

- When nothing is done, people with serious mental illnesses and/or co-occurring substance use disorders who are homeless often cycle between the streets, jails, and high-cost care, including ERs and psychiatric hospitals.

- It costs essentially the same amount of money to house someone in stable, supportive housing as it does to keep that person homeless and stuck in the revolving door of high-cost crisis care and emergency housing.

Programs that have proved to be very beneficial to individuals with serious mental illness include the evidence based Assertive Community Treatment Teams (ACT Teams).

**Assertive Community Treatment**

- ACT provides individualized services directly to consumers who receive the multidisciplinary, round the clock staffing of a psychiatric unit, but within the comfort of their own home and community.
  - Key features include treatment, rehabilitation, and support services.
  - ACT offers significant advantages over standard case management models in reducing homelessness and symptom severity in homeless persons with severe mental illness.
  - Multiple studies show ACT programs reduce hospital days by about 58% compared to case management services—and by about 78% compared to outpatient clinic care.
  - ACT programs indicated lower arrests, jail days and hospitalizations.


ACT in Alabama

- The majority of community mental health centers in Alabama have at least one ACT Team.
- The number of ACT Teams is extremely limited per community mental health center due to the cost of implementing and sustaining this evidence based practice.
- The need for more ACT Teams is great; however, the money to adequately fund them is not available.
Stakeholders - Proponents

- National Alliance on Mental Illness
- American Psychiatric Association
- American Psychological Association
- National Coalition for the Homeless
- United States Conference of Mayors
- Justice System: Law Enforcement, Corrections, Courts
- Alabama Mental Health System
Stakeholders - Potential Opponents

- State Legislature
- State Agencies vying for General Fund dollars
- Citizens unwilling to increase any state tax
- Alabama Public Education System – receives all growth tax revenues
Recommendations

- There is a need to develop a better funding mechanism in the state of Alabama in order to increase funding for mental health services. The state should ensure access to mental health care, rather than waste money on jails, prisons, and emergency rooms to ‘not treat’ individuals with mental illness.
Recommendations

Options for Addressing the Mental Health Crisis in Alabama

- Increasing funding for mental health by posing legislation to develop a better funding mechanism for mental health services.
- Emphasize community services qualifying for Medicaid and federal matching funds.
- Policy makers either merge the two separate funds (General Fund and Education Trust Fund) in order to provide growth tax revenue for all public services. . . . OR
- Reduce the earmarking of existing taxes in order to provide more flexibility in the allocation of resources.
- Create new tax structure that provides growth revenue for critical mental health services.
References


- National Institute of Corrections. Available at http://nicic.gov/StateStats/?State=AL

References

Questions? Comments?