



The Impact of a National Health Information Infrastructure on the Field of Mental Health

NCVHS Subcommittee on Privacy
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Community Behavioral Healthcare

Introduction



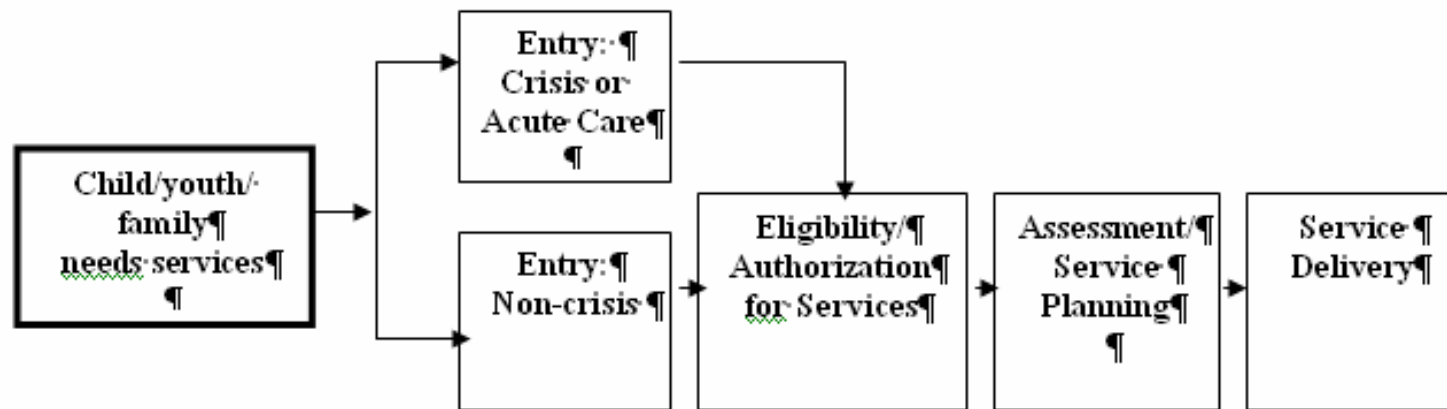
- ◆ National Council for Community Behavioral Healthcare
 - oldest and largest trade association representing the nation's providers of mental health, substance abuse and developmental disability services
 - members serve more than four and one-half million individuals and employ more than a quarter of a million staff

President's New Freedom Commission on Mental Health

- ◆ “Achieving the Promise: Transforming Mental Health Care in America”
 - Goal 6: Technology is Used to Access Mental Health Care and Information
 - ◆ Use health technology and telehealth to improve access and coordination of mental health care, especially for Americans in remote areas or in underserved populations.
 - ◆ Develop and implement integrated health record and personal health information systems.

Why the electronic health record is important to the mental health system

- ◆ The care of individuals generally follows two basic patterns that impact electronic health records.



Why the electronic health record is important to the mental health system

◆ In the majority of mental health provider organizations the clinical activities are supported by paper and pencil.

A. Revenue Enhancement for Existing Service Levels

6. Reduction in Progress Notes Completion Time

	Low	Medium	High
Average minutes/visit to complete note	15	15	15
Time savings from automated workflow	26%	36%	46%
New time to complete note	11.10	9.60	8.15
Minutes saved per visit	3.90	5.40	6.85
Visits per year	276,650	276,650	276,650
Clinician hours saved per year	17,982	24,899	31,584
% Time for additional services	60%	60%	60%
Additional Service Minutes	647,361	896,346	1,137,032
Average FFP per minute (all minutes)	\$0.53	\$0.53	\$0.53
Additional FFP per year	\$343,392	\$475,466	\$603,138

Why the electronic health record is important to the mental health system

◆ Crisis Services Management

Provider Base System - Microsoft Internet Explorer

Name: Douglass, Joe DOB: 03/05/1988 ID: 8970310

Crisis Plan

Assessment Date: 04/26/2001
(Note plan and appointment date/time below)

I, Joe Douglass, agree not to harm myself or to inflict bodily harm directed toward myself or others, or to cause harm leading to the injury of other persons. If I have suicidal or homicidal thoughts, I will call the Mobile Crisis Unit at (111) 333-4444, Emergency Response System at 911, or go to the hospital.

Enter Hospital 1 Name
Any Street
City, State, Zip
Phone

Enter Hospital 2 Name
Any Street
City, State, Zip
Phone

Enter Hospital 3 Name
Any Street
City, State, Zip
Phone

Other

PLANS (other than those listed above)
Natural supports to use

Next Cancel

Provider Base System - Microsoft Internet Explorer

Name: Douglass, Joe DOB: 03/05/1988 ID: 8970310

Risk Assessment Suicide

Resources

Has the individual ever attempted suicide?

No Known Suicide Attempts
 Has Attempted Suicide
 Declines to Disclose Having Ever Attempted Suicide

Number of attempts

Recency of last attempt

Within Past Week
 Within Past Month
 Within Past 90 Days
 Within Past Year
 Over One Year Ago

Reasons, meaning and social context of past attempt(s)

Death of Loved One
 Feelings of Hopelessness
 Problems Related to Job/School
 Chronic Pain/Illness/Disability
 Rejection by Significant Other
 Suicide of Relative/Significant Other

Lethality of last attempt

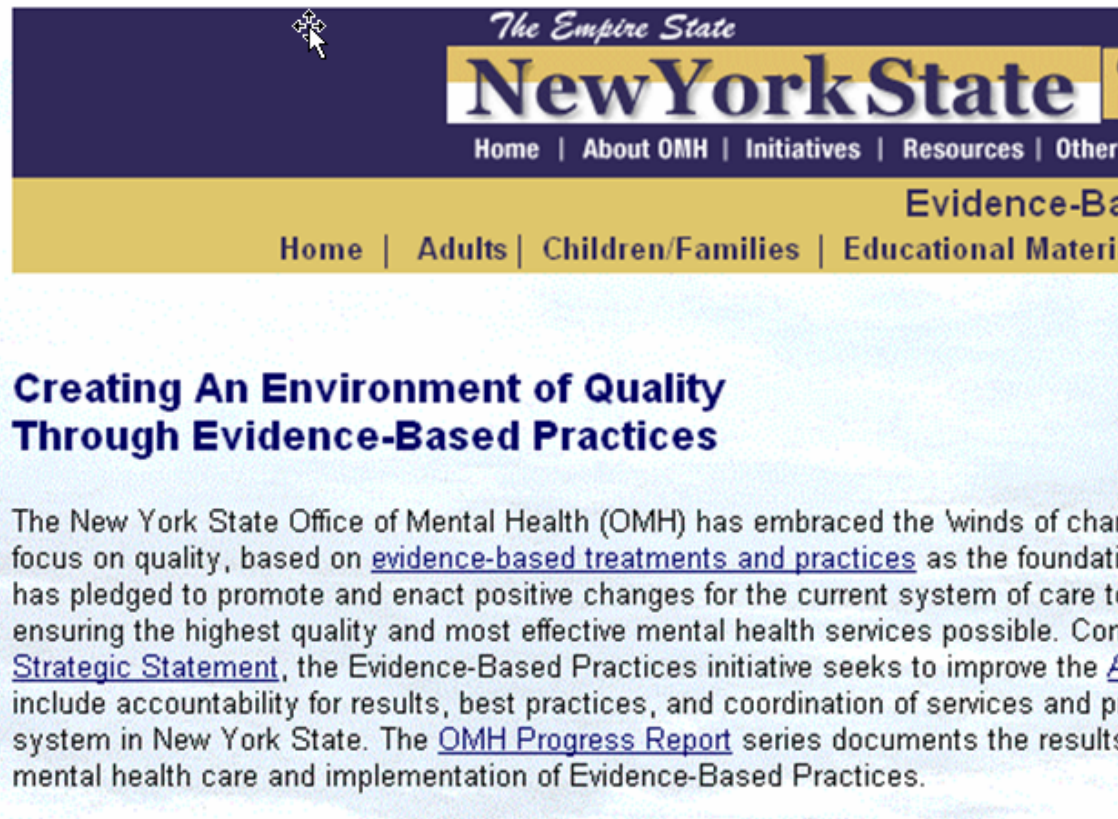
Low Lethality
 Moderate Lethality
 High Lethality

Consequence of attempt

Back Next Cancel

Why the electronic health record is important to the mental health system

◆ Supporting the Implementation of Evidence-Based Practices



The screenshot shows the New York State Office of Mental Health (OMH) website. The header includes the text "The Empire State" and "New York State" in a large font. Below the header is a navigation menu with links: "Home | About OMH | Initiatives | Resources | Other". A secondary navigation bar contains "Home | Adults | Children/Families | Educational Materi". The main content area features the title "Creating An Environment of Quality Through Evidence-Based Practices" in bold. Below the title is a paragraph of text: "The New York State Office of Mental Health (OMH) has embraced the winds of change and focused on quality, based on [evidence-based treatments and practices](#) as the foundation. The OMH has pledged to promote and enact positive changes for the current system of care to ensure the highest quality and most effective mental health services possible. Core to the [Strategic Statement](#), the Evidence-Based Practices initiative seeks to improve the system and include accountability for results, best practices, and coordination of services and programs throughout the mental health care system in New York State. The [OMH Progress Report](#) series documents the results of the current mental health care and implementation of Evidence-Based Practices."

Obstacles to implementing an electronic health record in mental health

◆ Vendor Mismatch

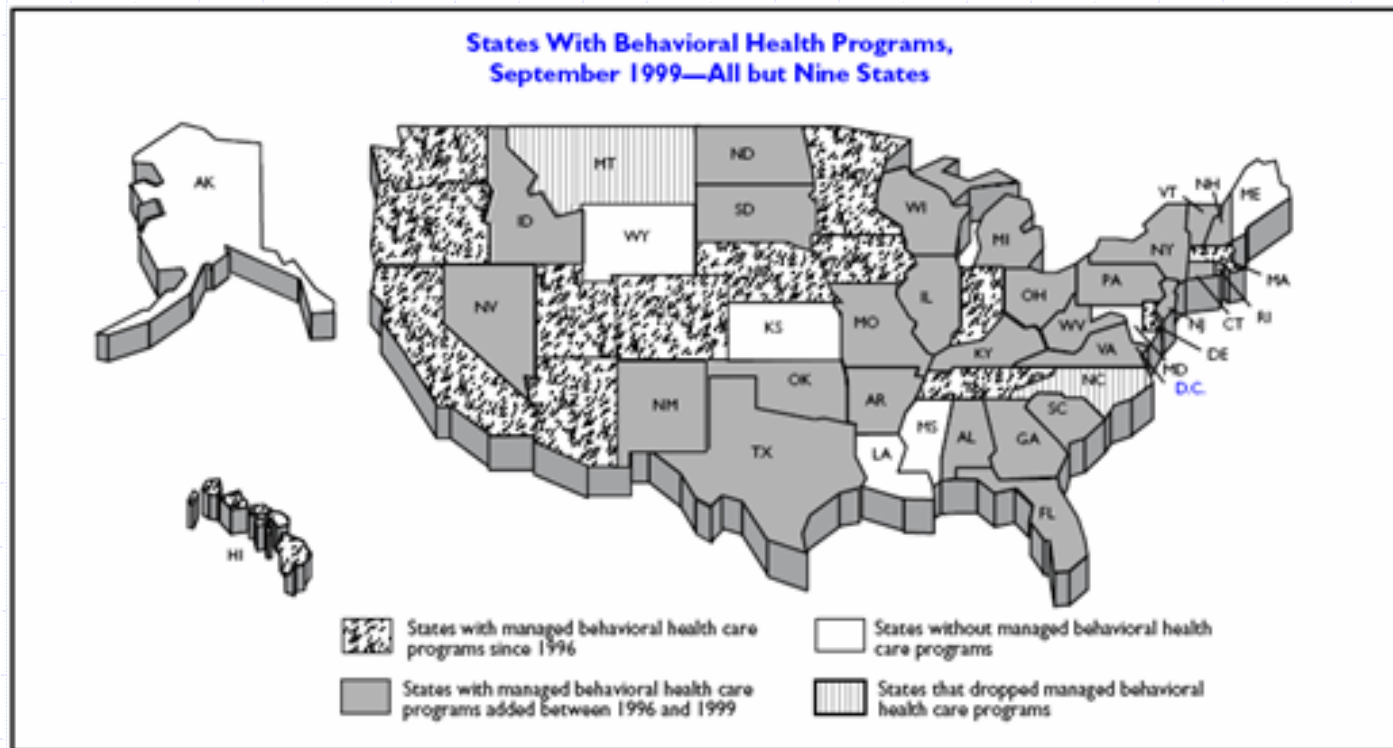
Individual County Members	Small County Group	
Alameda	Amador	Modoc
Butte	Colusa	Mono
Contra Costa	Del Norte	Napa
Fresno	El Dorado	Nevada
Kern	Glenn	Sutter-Yuba
Marin	Inyo	Shasta
San Diego	Lassen	Calaveras
San Luis Obispo	Madera	San Benito
San Mateo		
Santa Barbara		
Stanislaus		

#	COMPANY
1	A4 Health Systems
2	ABSolute Intergrated Solutions
3	Accumedic Computer Systems, Inc.
4	Adia Information Management Corp.
5	Allscripts Healthcare Solutions
6	American Healthcare Software Enterprises Inc.
7	Anasazi Software, Inc.
8	Askesis Development Group Inc.
9	Axolotl Corporation
10	BPL Sytems/Leitch
11	CalCIS
12	California Software Laboratories
13	Caminar Software
14	CareFacts Informations Systems
15	Cerner Corp.
16	CHARTCARE Inc.
17	Civorex Systems, Inc.
18	Claimsnet.com
19	CMHC Systems, Inc.

Table 6: Current CBS Coalition Counties

Obstacles to implementing an electronic health record in mental health

◆ 50 States, 50 Sets of Rules



Obstacles to implementing an electronic health record in mental health

◆ Limited Information Technology Resources and Expertise



In a 2001 study, the research and consulting firm META Group, Stamford, Conn., determined that the banking and financial industries spent an average of 6.09 percent of revenues on IT in 2000 and 6.50 percent in 2001, compared with about 4.81 percent in 2000 and 4.20 percent in 2001 for healthcare.

Obstacles to implementing an electronic health record in mental health

◆ Difficult Transitions

Marion County Health Dept Activities/Forms Map

Forms:		Forms:	
Consumer Service Record - Clinical Services	AMH	Chart Communications	AMH
Discretionary Loans	AMH	Consumer Service Record - Clinical Services	AMH
Health Insurance Claim Form	AMH	IDS Screening Form	AMH
IDS Screening Form	AMH	Progress Note	AMH
Invoice for Client Records	AMH	BCCS Chart Sheet	BCCS
Primary/Exceptional Need Authorization Form for Adults: Age 18 and Over	AMH	Case Management Notes	BCCS
Master Tracking System	BCCS	Client Service Record Group Progress Note	CMH
Women's Health Check and/or Mammography Voucher	BCCS	Consumer Service Record - Flexible Service Activities	CMH
Adolescent Drug/Alcohol Boys Group Enrollment Tracking	CMH	Contact Log	CMH
Adolescent Drug/Alcohol Girls Group Enrollment Tracking	CMH	Family Sexual Abuse Treatment Group Progress Note	CMH
Adolescent Drug/Alcohol Monthly Tracking Form	CMH	Head Start Individual Child Observation	CMH
Client Service Record Group Progress Note	CMH	Head Start Mental Health Observation	CMH
Consumer Service Record - Flexible Service Activities	CMH	Parent Letter - Child Participation in Services	CMH

Obstacles to implementing an electronic health record in mental health

◆ Privacy Concerns

President Bush said,

"... Americans must understand and send this message: mental disability is not a scandal - it is an illness. And like physical illness, it is treatable, especially when the treatment comes early."



PRESIDENT'S NEW FREEDOM

COMMISSION ON MENTAL HEALTH

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What assistance is needed to make the transition to electronic health records

1. The National Council for Community Behavioral Healthcare, must play an increased role in providing leadership on issues related to the National Health Information Infrastructure development and implementation. This means increasing our efforts at the Federal level to ensure that mental health stakeholders are at the table more often as infrastructure standards and national policy continue to be developed.

What assistance is needed to make the transition to electronic health records

2. NCCBH needs to work closely with member organizations to develop an Electronic Health Records Strategic Plan for the behavioral health provider community. This plan should include an education plan and framework for implementing an electronic health record in behavioral health provider organizations.

What assistance is needed to make the transition to electronic health records

3. Specific Federal funding and technical assistance needs to be earmarked to support these efforts in mental health. A portion of the funding already in the pipeline for demonstration projects and loans should be made more readily available to the behavioral health system so that we don't fall further behind the general healthcare system.

What assistance is needed to make the transition to electronic health records

4. States, as major mental health care purchasers, must place an increased value on the NHI and reflect this commitment in their financing mechanisms and technical assistance structures.