

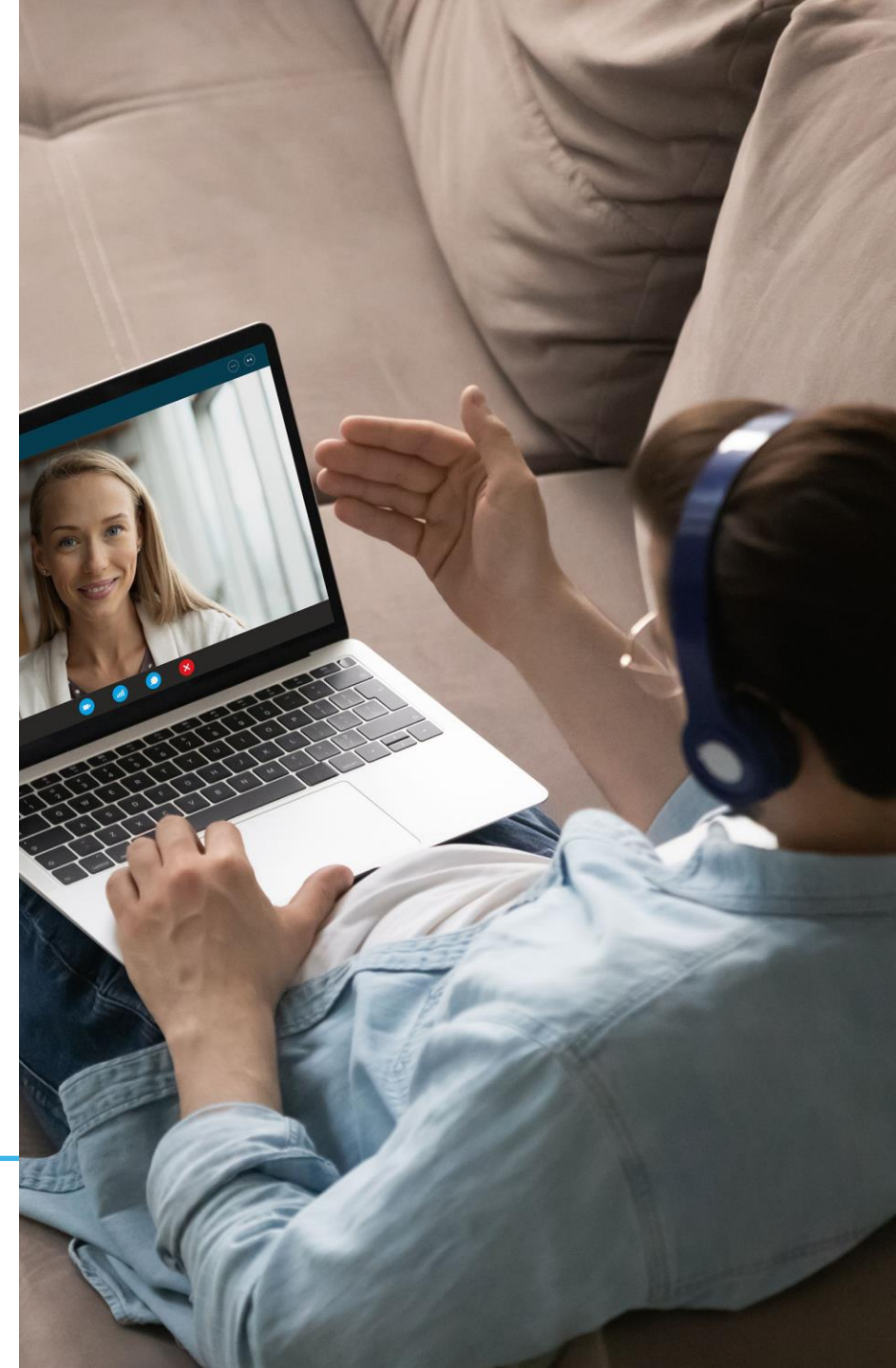


2020 Employer Annual Report

Food Employers Labor Relations Association and United Food and Commercial Workers VEBA Fund

Fern Schanback, LMHC, CASAC, JM
Account Executive

February 24, 2021



Abbreviations: Key



Commonly Used Abbreviations

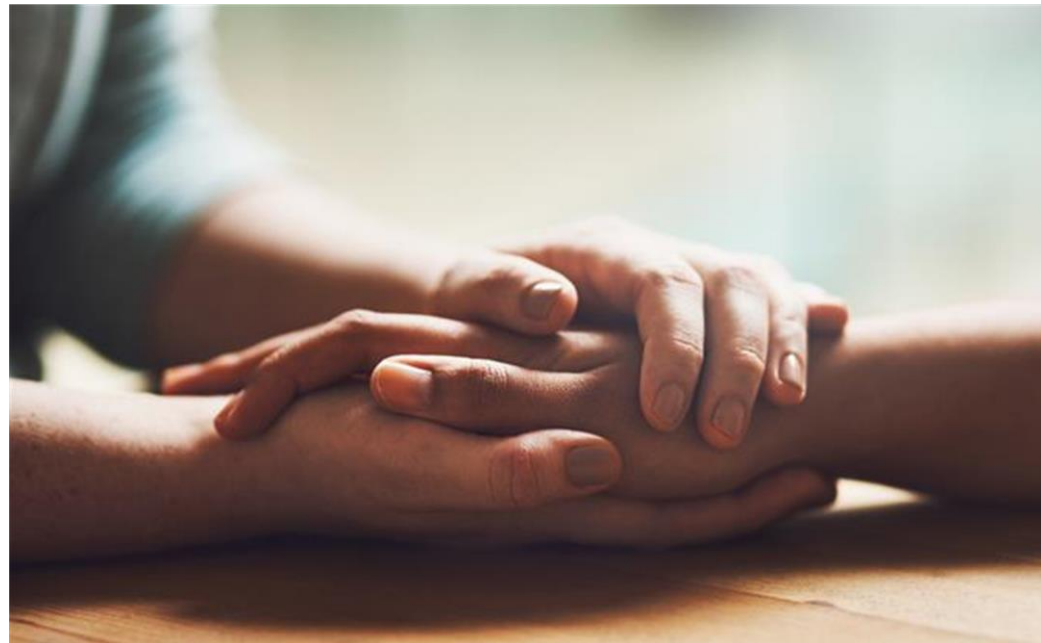
Abbreviation	Description
MHSUD	Mental Health Substance Use Disorder
ALOC/HLOC	Alternative/Higher Levels of Care (RTC, PHP, IOP)
IP	Inpatient (Acute)
RTC	Residential Treatment
PHP	Partial Hospitalization
IOP	Intensive Outpatient
OP	Outpatient
PMPM	Per Member per Month
INN	In-Network Providers
OON	Out of Network Providers
BOB	Beacon Book of Business Median
Trend	% Change
Recidivism	Hospital Re-admissions
ABA	Applied Behavioral Analysis (Autism)

Chapter

01

Responding to the
COVID-19 pandemic

Anticipating and responding to member needs



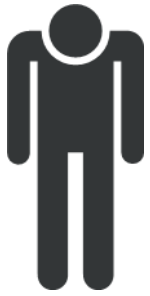
The COVID-19 pandemic turned the world upside down

Beacon moved quickly to understand client needs – and develop solutions for work and life.

Beacon's strategic plan focused on 4 main areas:

- Anticipating and responding to member needs
- Expanding access to services with virtual health and provider support
- Delivering tailored solutions
- Addressing trends to reimagine the future

COVID response: Employee Assistance Program



3x

Americans report being depressed 3x more than they were before the pandemic¹

To address member needs, Beacon created a range of COVID-19 resources, including:

- Expanded in-the-moment support for members in emotional anguish through Beacon's clinical referral line with EAP risk-related cases doubling, including crisis interventions
- Accelerated follow-up outreach after hospitalization for at-risk members to ensure they were connected to services, including community-based services
- Dedicated COVID-related web content that drove 185,000+ views
- 20 client webinars addressing the impact of the pandemic, political unrest, and social unrest on mental health
- Monthly provider webinar training attended by more than 5,000 Beacon providers

Chapter

02

Responding to the COVID-19
pandemic

Expanding access to services with virtual health and provider support



COVID response: Telehealth expansion



54%

members without current outpatient treatment who were connected to telehealth

81x

higher use of telehealth services in 2020 vs. 2019

29%

of telehealth users in 2020 are new users of behavioral health services

Beacon quickly expanded telehealth services and helped providers meet increased demand.

- Fast-tracked Beacon EAP Wellbeing Digital platform to expand access
- Covered telehealth services, including phone and video therapy
- Complied with regulatory direction on utilizing safe technologies that protect patient confidentiality and security platforms to deliver telehealth services
- Worked with employer partners to enhance their current benefit to include telehealth services

Providers adapted quickly

81%

of behavioral health providers surveyed in September 2020 began using telehealth for the first time due to COVID-19

98%

of outpatient providers plan to continue to offer telehealth services post-pandemic



Chapter

03

Responding to the
COVID-19 pandemic

Delivering tailored solutions



Top reasons members accessed the EAP



Marital / relationship



Anxiety



Stress



Depression



Situational /
adjustment concern



Family

Legal and financial referrals

LEGAL



Domestic relations



Estate planning



Civil



Real estate



Landlord/Tenant



Probate

FINANCIAL



Tax issues



Debt coach



Retirement planning



Hardship



Spending plan



Mortgage

Top 2020 Work/Life balance trends



General health and wellness resources



Housing



Social services



Career



Day care centers



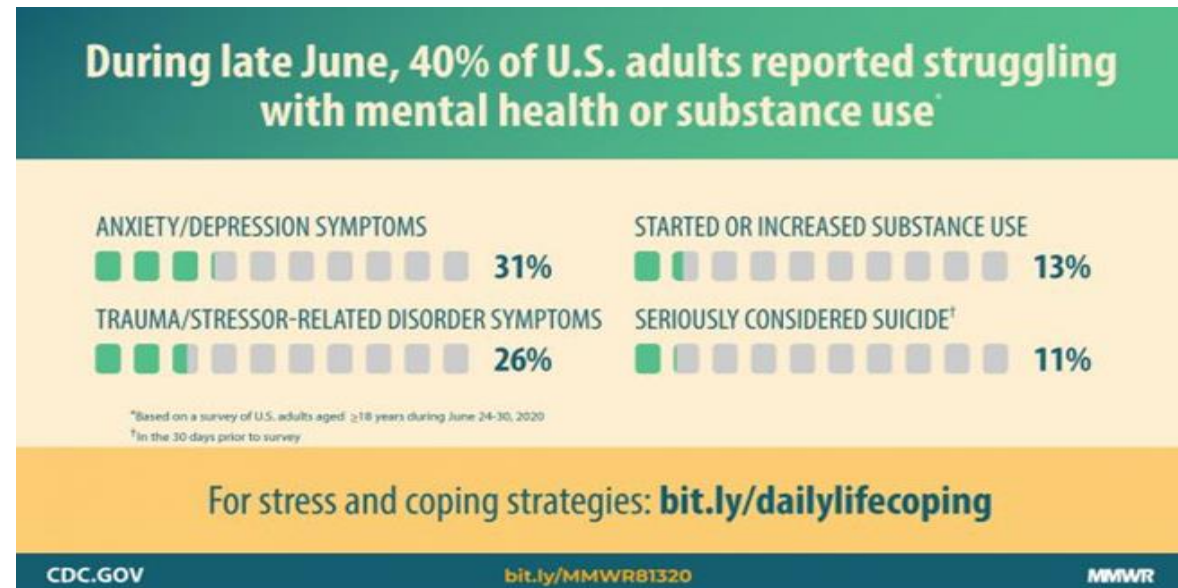
Childcare resources

Chapter

04

Responding to the
COVID-19 pandemic

Addressing trends to reimagine the future



Reimagining the future

Beacon anticipates additional shifts in key behavioral health trends as a result of COVID-19 and ongoing social justice movements.

4 anticipated changes

- Behavioral health needs will increase
- Substance use disorder diagnoses will increase
- Suicide rates will increase
- Telehealth use will continue to be normalized by society

Behavioral health needs will increase

1 in 3 individuals could have behavioral health needs in 2021 compared to 1 in 5 pre-pandemic²

50% behavioral health need prevalence could experience a 50% increase after the COVID-19 pandemic³

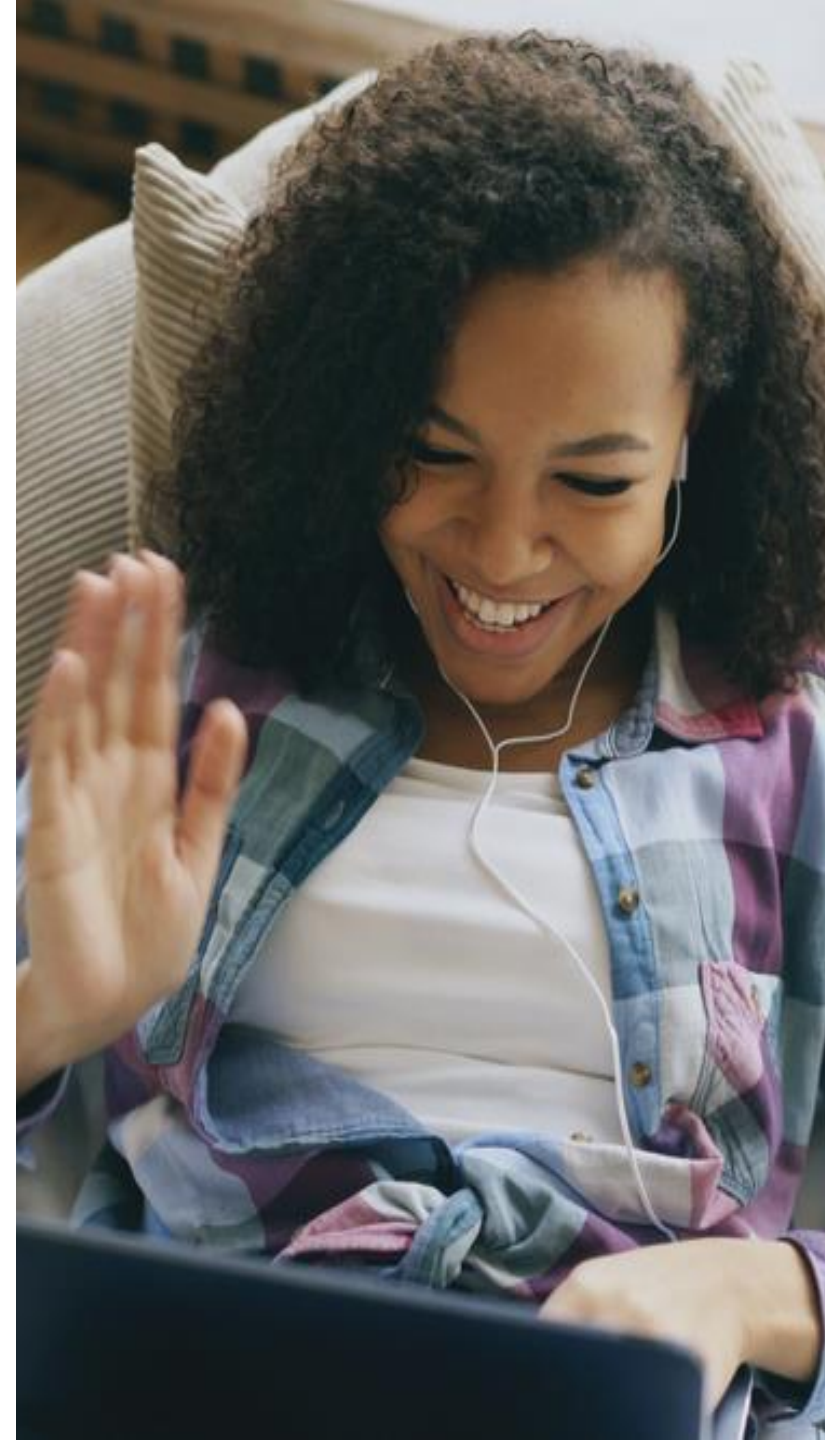
52% of adults report being more open about mental health due to COVID-19⁴



² Returning to resilience: The impact of COVID-19 on mental health and substance use, McKinsey & Company, 2020.

³ Understanding the hidden costs of COVID-19's potential impact on US healthcare, McKinsey & Company, 2020.

⁴ New Survey Finds Most Americans Want Suicide Prevention to Be a National Priority, Suicide Prevention Resource Center, 2020.



Substance use disorder diagnoses will increase

55%

of respondents report an increase in past-month alcohol consumption (18% reporting a significant increase)⁵

36%

report an increase in illicit drug use⁵

18%

increase in overdoses (March – May 2020)⁶



Suicide rates will increase

Based on growing behavioral health needs and past suicide data following the Spanish Flu of 1918 and SARS in 2003, we can expect an uptick in deaths by suicide.

SUICIDE RATES

1.6% increase in the suicide rate for every percentage point increase in unemployment⁷



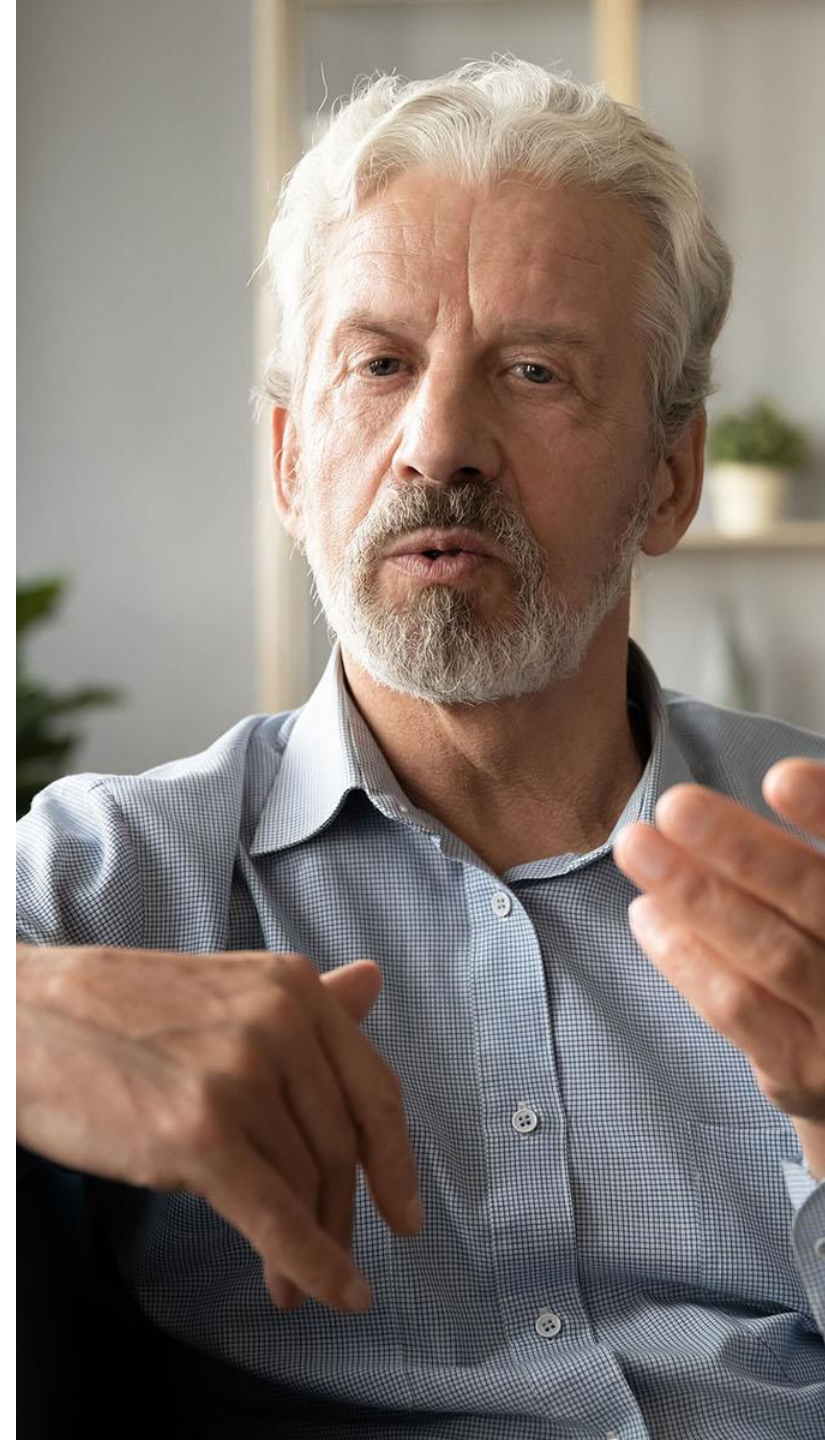
Telehealth use will continue to be normalized by society

Research supports the effectiveness and acceptance of telehealth by members and providers

TELEHEALTH USE

98%

of Beacon outpatient providers plan on continuing telehealth



Chapter

05

Executive Summary 2020



FELRA Services with Beacon-2020

Current Services

MENTAL HEALTH & SUBSTANCE DISORDER TREATMENT

AUTHORIZATION OF MEDICAL NECESSITY FOR ALL SERVICES

TELEHEALTH/TELEPSYCHIATRY

ACCOUNT MANAGEMENT

ENHANCED REPORTING/CUSTOMIZATION

NETWORK MANAGEMENT/PROVIDER RELATIONS

INTENSIVE CASE MANAGEMENT

EMPLOYEE ASSISTANCE PROGRAM (EAP)

24 HOUR CLINICAL REFERRAL LINE

CLAIMS PROCESSING

FELRA's Key Metrics Summary-2020



83 percent of all claims were paid applying the In-Network benefit- an **INCREASE of 1 percent** from 2019



79% of the total claims paid were related to IP & ALOC; **decrease of 38%** from 2019

37%

Of total spend cost is associated with High Cost Claimants– this percentage **DECREASED** from 2019 where HCC's were responsible for 45% of total spend



In 2020, there was a **30% Increase of EAP services;** annualized utilization from 2019



PMPM in 2020 was \$3.17 which is a decrease of **25%** from 2019--PMPM was \$4.21. Overall claims paid **decreased by 28%**

Key Program Data Driving Claims -2020 v 2019

		FELRA 2020	2019	Trend
1	Membership			
1a	Average Membership	19,324	20,071	-3.72%
2	Paid Dollars - Overall			
2a	Overall Paid	\$734,951	\$1,014,893	-28%
2b	PMPM	\$3.17	\$4.21	-25%
2c	In-Network Paid	\$612,725	\$833,633	-26%
2d	In-Network PMPM	\$2.64	\$3.46	-24%
2e	Out-of-network Paid	\$122,226	\$181,260	-33%
2f	Out-of-network PMPM	\$0.53	\$0.75	-29%
3	High Cost Claimants (HCC)			
3a	HCC Total Paid	\$270,258	\$456,311	-41%
3b	HCC Members Count	5	12	-58%
3c	Non-HCC Total Paid	\$464,692	\$558,582	-17%
3d	Non-HCC Count	514	642	-20%

Membership

decreased by almost 4% from 2019 and 7% from 2019 that had if 20,789

HCC's (>\$20,000)

claims paid decreased 41% from 2019, with a 58% decrease in the number of HCC's

Behavioral Health Access-2020

Distinct Count by* Beneficiary Type	EAP Distinct Cases	MH/SUD IP & ALOC* Benefit	MH/SUD Outpatient * Benefit
Employee (12,271)	99	34	281
Spousal Partner (3,031)	13	11	75
Dependent (4,022)	64	21	130
Plan Enrollment (Eligibility)	8,190	19,324	19,324
Annualized Utilization Admits/Visits	178 cases 2.17%	96 Admissions 4.97 admits/1,000	3,456 visits 22.98 visits/1000 13.88 Avg. # of Visits
Beacon BOB Mean	3.32%	6.15 admits/1,000	362.75 visits/1000 45.33 Avg. # of Visits

- **IP & ALOC:** 96 total admissions (47 MH/49 SUD) compared to 102 for 2019 (45 MH/57 SUD); representing a 14% decrease in SUD admissions, with a 4% increase in MH admissions; with an overall decrease of 6% for the highest level of care
- **OP:** 3,456 visits (3,012 MH/444 SUD), compared to 5,064 visits in 2019 (4,343 MH/721 SUD); representing an overall decrease of 47%
- **EAP:** utilization increased by 31% from 2019, from 145 cases to 178. The overall annualized utilization was 1.66% in 2019 and 2.17% in 2020



* Unduplicated members accessing care

Behavioral Health Cost Trends-2020

- **IP & ALOC** costs have steadily declined since 2018, with a 61% decrease from total claims paid in 2020, and a 26 decrease from 2019
- **OUTPATIENT** claims paid decreased by 51% from 2018 and 32% from 2019
- 79% of claims paid were for IP & ALOC
- Mature health plans strive for 45% IP & 55% OP, recommendation to promote EAP services to decrease use of MHSUD benefits



Chapter 06

MHSUD-Utilization Summary-2020 v 2019



Total Paid Claims by Level of Care-2020 v 2019

Level of Care	2020	2019	Trend
INN-IP	\$257,915	\$315,782	-18%
ONN-IP	\$54,510	\$2,078	2523%
INN-RTC	\$137,144	\$228,144	-40%
OON- RTC	\$3,000	\$106,149	-97%
INN-PHP	\$43,654	\$70,787	-38%
OON-PHP	\$0	\$18,279	-100%
INN-IOP	\$45,982	\$27,244	-35%
ONN-IOP	\$41,645	\$23,045	81%
INN-OP	\$128,031	\$191,675	-33%
OON-OP	\$23,071	\$31,709	-27%

2020: \$734,951 total claims paid with 4,427 units of service (3,337 MH/1,090 SUD)

2019: \$1,014,893 total claims paid with 6,337 units of service (4,844 MH/1,493 SUD)

There was a large increase in claims paid to out-of-network providers for inpatient treatment and 80% increase for intensive outpatient treatment

Claims paid to in-network providers decreased for all levels of care

Network Savings: \$ 1,148,885
Billed Amount: \$ 1,948,742
Allowed Amount: \$ 799,877

Recommendation to drive members to in-network providers

FELRA For the period 1/1/2019 through 12/31/2020			
LEVEL OF CARE	Rolling 12 Months		
	2020	2019	Trend
IP Total Paid	\$312,425.00	\$317,861.00	-1.71%
Average Cost Per Unit	\$1,044.90	\$753.22	38.72%
PMPM	\$1.35	\$1.32	2.27%
Days/1000	20.08	14.60	37.53%
Admits/1000	3.31	2.54	30.31%
PHP Total Paid	\$43,653.00	\$89,066.00	-50.99%
Average Cost Per Unit	\$330.70	\$434.47	-23.88%
PMPM	\$0.19	\$0.37	-48.65%
Days /1000	3.18	5.63	-43.52%
Admits/1000	0.41	0.80	-48.75%
Residential Total Paid	\$140,144.00	\$334,293.00	-58.08%
Average Cost Per Unit	\$549.59	\$799.74	-31.28%
PMPM	\$0.60	\$1.39	-56.83%
Days/1000	8.02	11.53	-30.44%
Admits/1000	0.72	1.10	-34.55%
IOP Total Paid	\$87,627.00	\$50,289.00	74.25%
Average Cost Per Unit	\$307.46	\$220.57	39.39%
PMPM	\$0.38	\$0.21	80.95%
Days/1000	3.74	2.74	36.50%
Admits/1000	0.52	0.65	-20.00%
OP Total Paid	\$151,101.00	\$223,384.00	-32.36%
Average Cost Per Unit	\$43.72	\$44.11	-0.88%
PMPM	\$0.65	\$0.93	-30.11%
Visits/1000 MH	155.87	216.38	-27.96%
Average # Visits/MH	13.88	7.35	88.84%
Visits/1000 SUD	22.98	35.92	-36.02%
Average # Visits/SUD	13.88	16.02	-13.36%

Utilization Summary Table-IP & HLOC-2020 v 2019

Utilization Statistics

Utilization Statistics	2020	2019	% Change
Acute Care + HLOC Admits/1000	4.97	5.08	-2.2%
Avg. Length of Acute Care + HLOC Stay	7.05	6.79	3.8%
Acute Care + HLOC Days/1000	35.02	34.50	1.5%
IP & ALOC Penetration	0.34%	0.36%	-5.5%

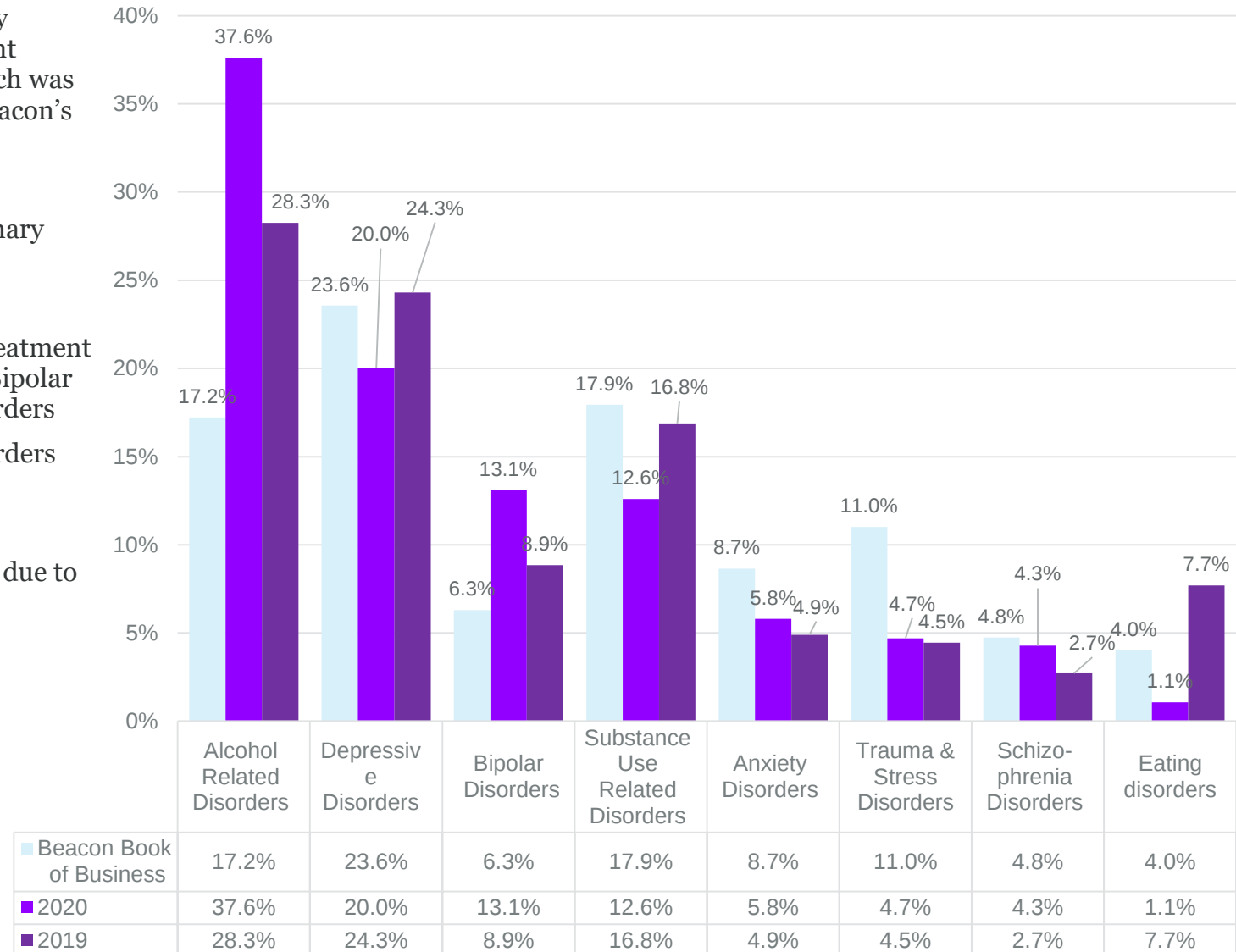
Penetration by Beneficiary Type*:

Employee: 0.28% (compared to 0.31% in 2019)
Dependent: 0.52% (compared to 0.49% in 2019)
Spouse: 0.36% (compared to 0.42% in 2019)

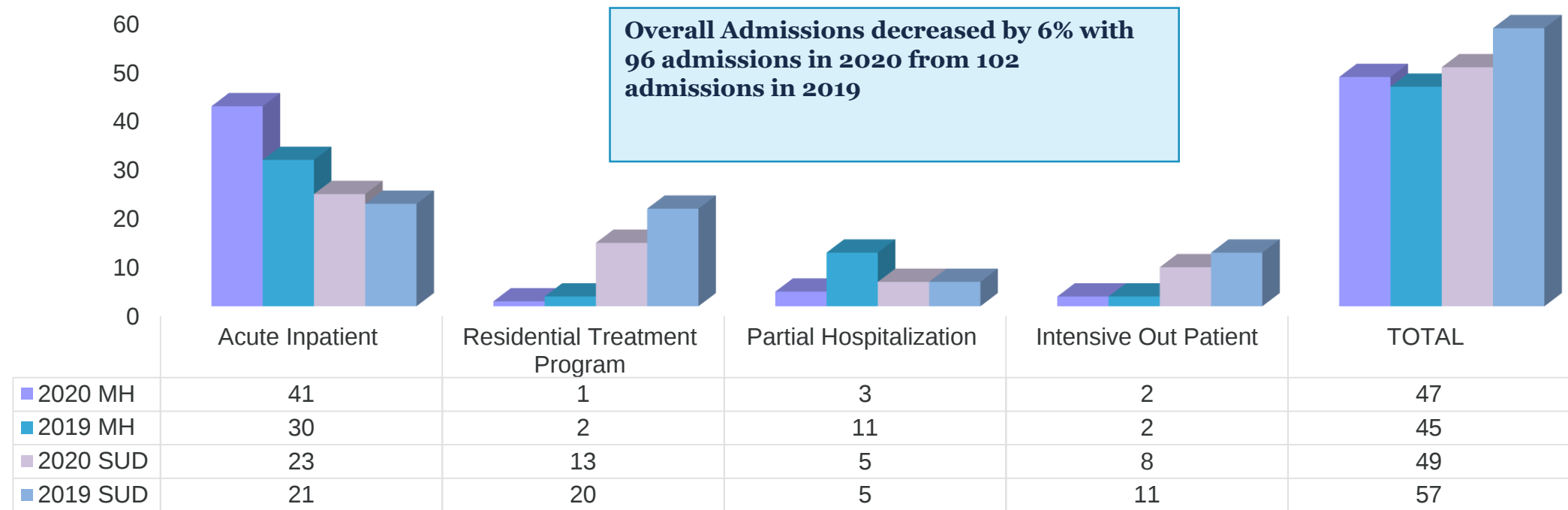
There was an increase in the days/1000 and in the average length of stay compared to 2019

Claims Paid by Clinical Category-2020 v 2019

- Alcohol Related Disorders were the primary condition for which plan participants sought Behavioral Health Treatment in 2020; which was much higher than 2019 and higher than Beacon's Book of Business
- In 2019, Depressive Disorders was the primary reason for participants seeking care
- The second category participants sought treatment for was Depressive disorders, followed by Bipolar Disorders and Substance Use Related Disorders
- There was a slight increase in Anxiety Disorders and a decrease in Eating Disorders
- The increase in these categories were likely due to the impact of COVID



IP & ALOC Admissions -2020 v 2019



Acute Inpatient had a **37% increase** for mental health and a **9% decrease** in substance abuse admissions, market trends indicate that people with SUD were admitted under MH during COVID

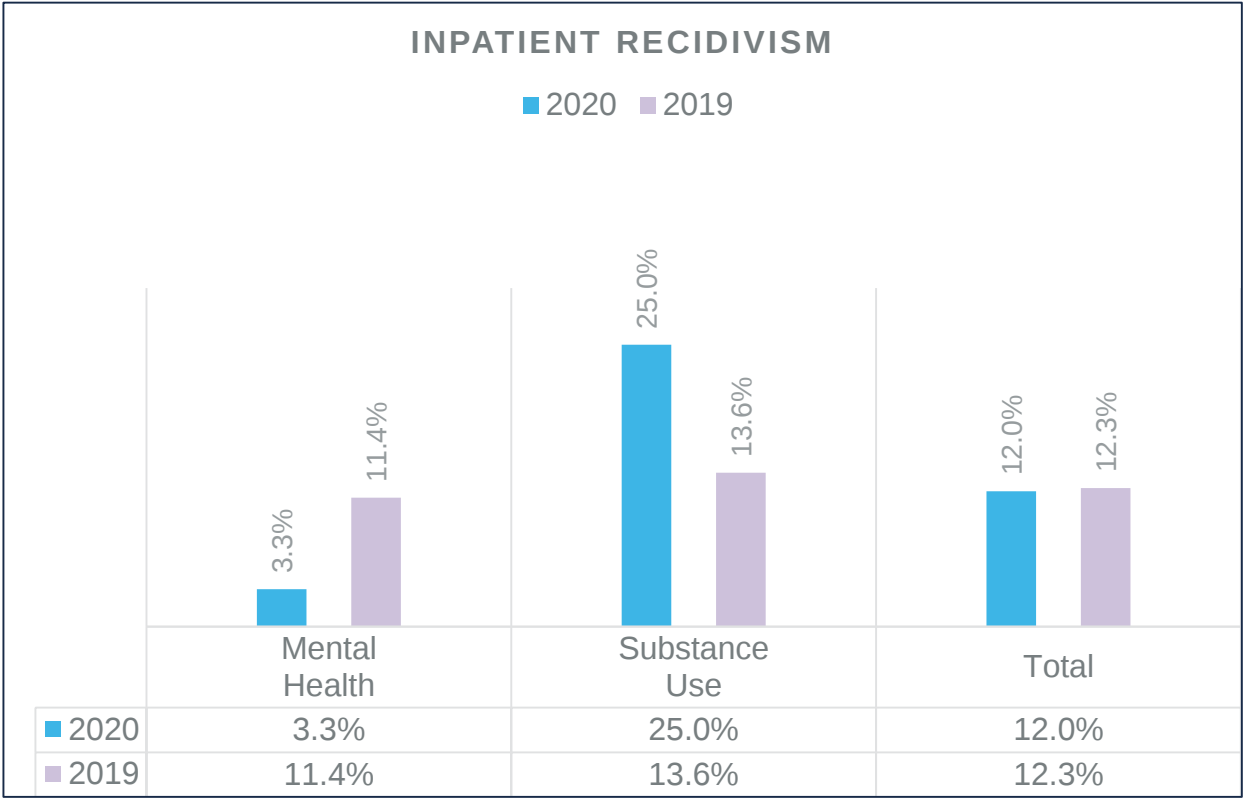
Residential Treatment decreased **50%** for mental health admissions and a **35% decrease** for substance abuse admissions

Partial Hospitalization decreased **72%** for mental health admissions and remained the same for substance abuse admissions

Intensive Outpatient decreased **27%** for substance abuse admissions and remained the same for mental health admissions

Inpatient Recidivism -2020 v 2019

- With some fluctuations in 365-day recidivism for both MH and SUD, the overall results were favorable for readmissions; with a **decrease of -2.43 %** in hospitalizations (57 in 2019 compared to 50 in 2020)
- There was a **significant decrease in MH recidivism rates; 71%** within 365 days, with a significant increase of 83% in SUD readmissions
- Overall, the recidivism rate was lower than 2019



Utilization Summary: Outpatient -2020 v 2019

Utilization Statistics

Utilization Statistics	2020	2019	% Change
Outpatient Visits	3,456 (3,012 MH/444 SUD)	5,064 (4,343 MH/721 SUD)	-31.7%
Members Seen	486	622	-22%
Visits/1000	178.85	252.30	-29.1%
Avg. # of Visits	7.11	8.14	12.65%
Outpatient Penetration	2.52%	3.10%	-18.7%

Penetration by Beneficiary Type:

Employee: 2.29% (compared to 2.86% in 2019)
Dependent: 3.23% (compared to 4.00% in 2019)
Spouse: 2.47% (compared to 2.81% in 2019)

The overall average unit cost per unit was \$43.72, with an overall decrease in the number of outpatients visits compared to 2019

Chapter 07

Employee
Assistance
Program

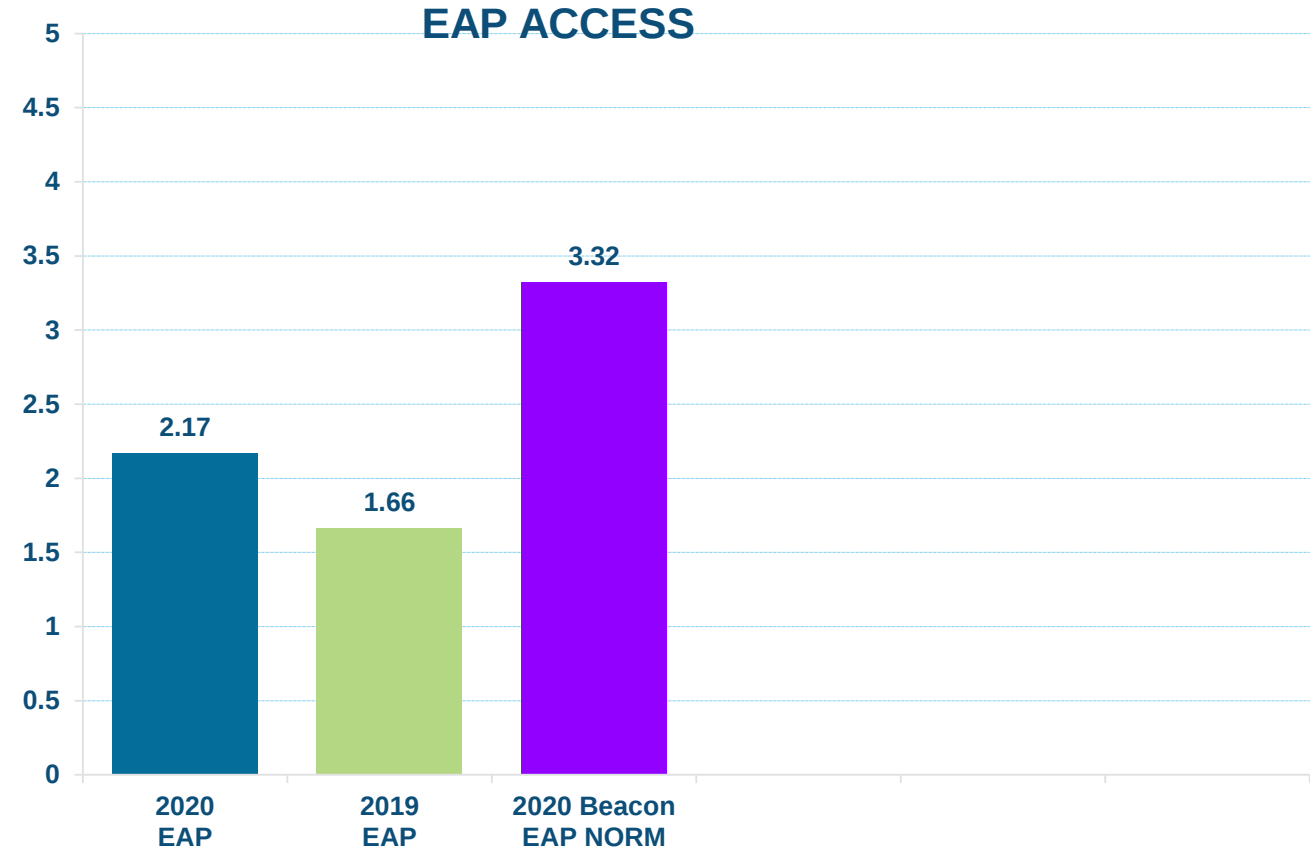


Your Life Resources

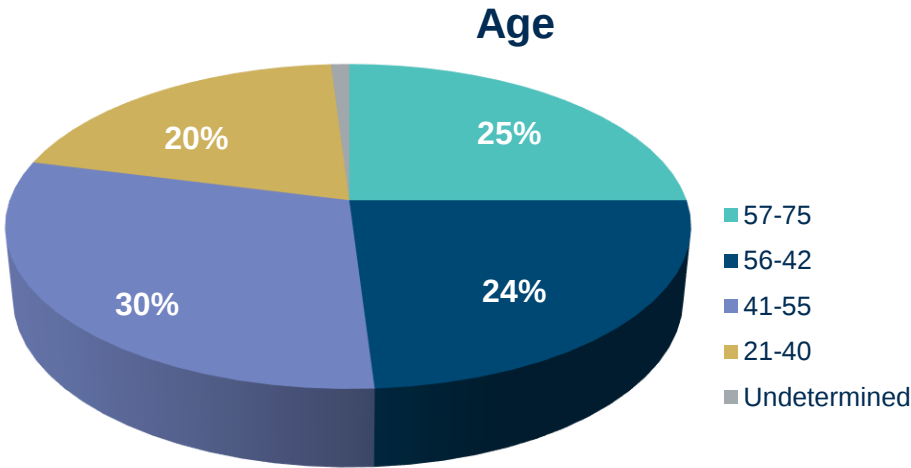
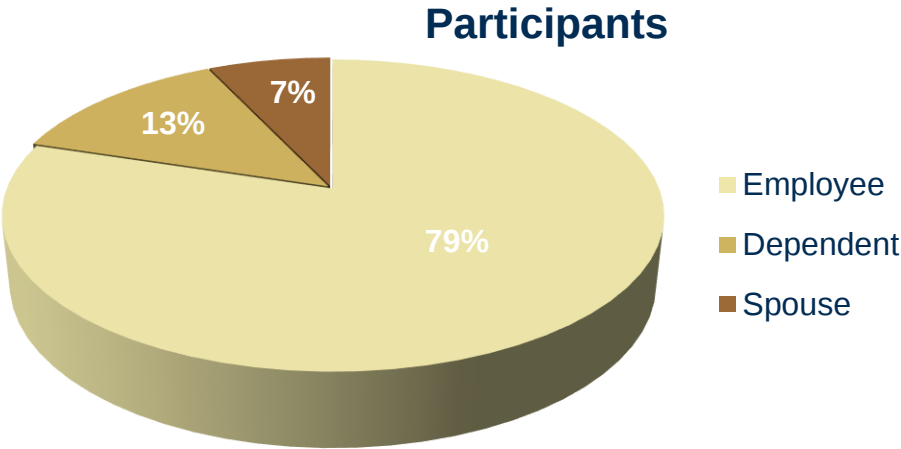
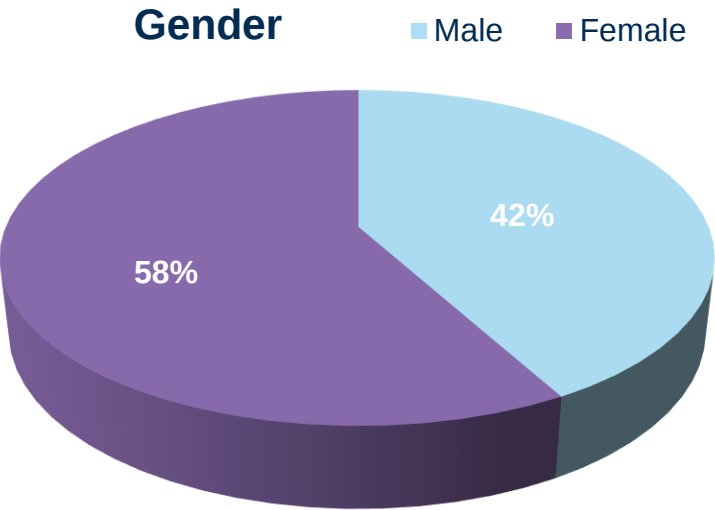


EAP Accessing Benefits Comparison-2020 v 2019

- EAP access increased by 31% with an annual utilization rate of 2.17% from 1.66%, which is lower than Beacon's Book of Business (BOB) of 3.32%
- The distinct EAP cases increased by 23% with 178 cases in 2010 from 145 in 2019
- All of the EAP cases were received by telephone
- 65% of the cases were new members (116) and 35% (62) of the cases were returning to EAP for subsequent episodes of care
- Ninety-four (94%) percent of the cases were resolved within EAP

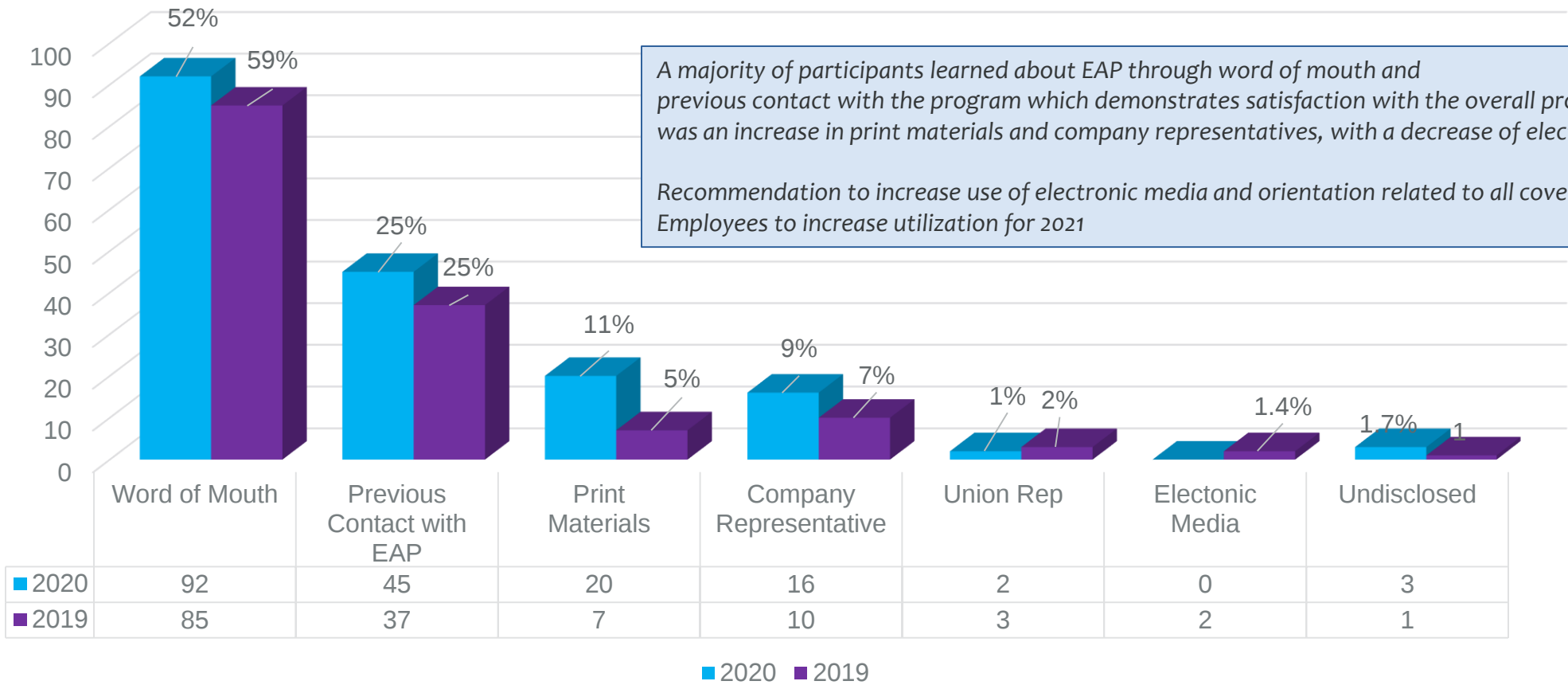


Demographics - 2020

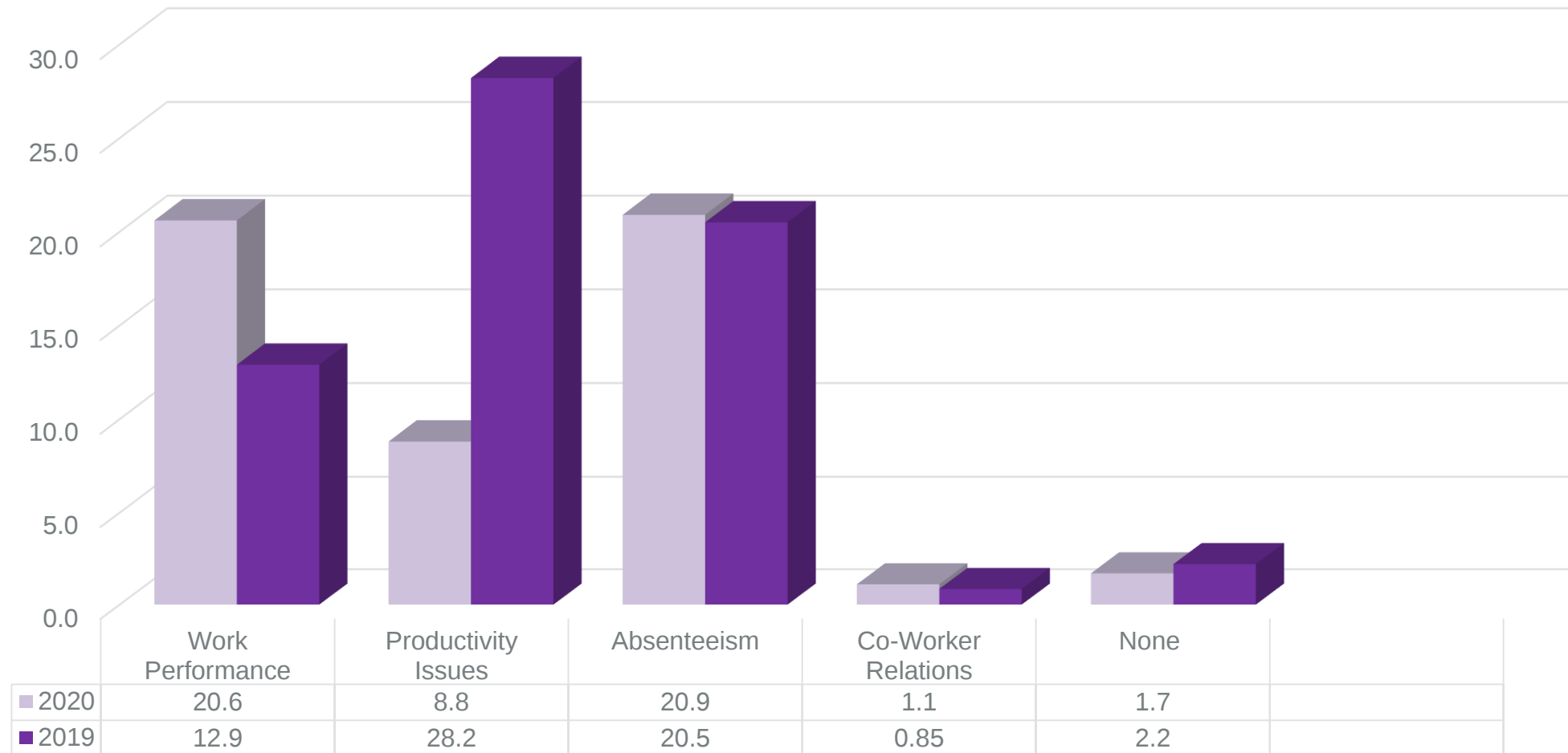


How People Learned about EAP- 2020

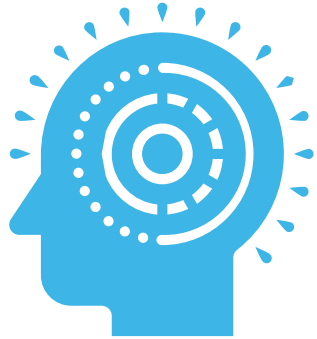
Program Awareness



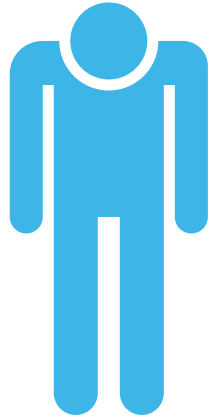
Workplace Performance Challenges- 2020



Top presenting problems -reasons associates access the EAP



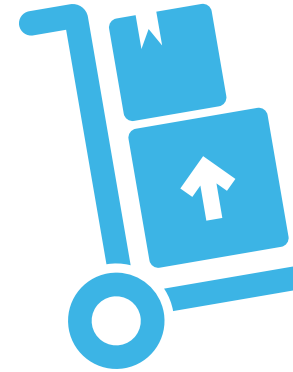
Anxiety



Depression



Marital/Relational



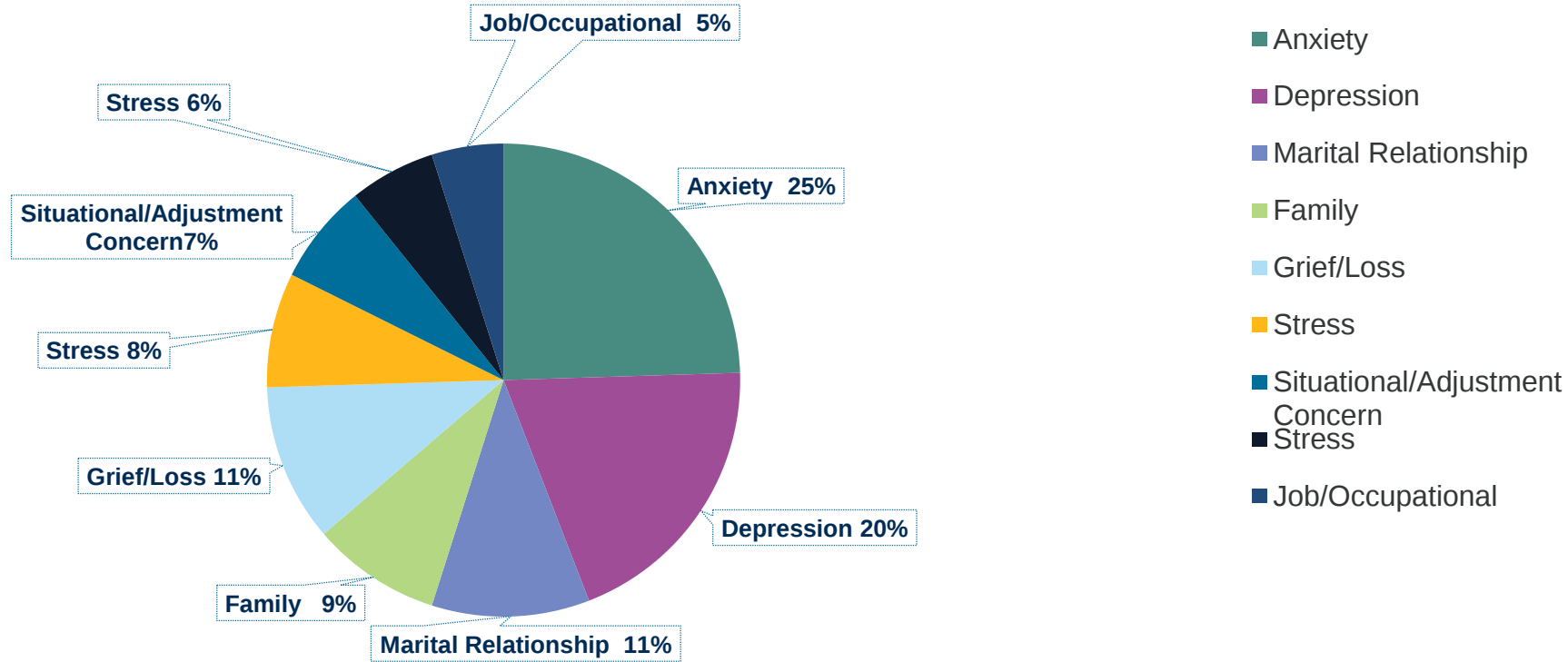
Stress and
Situational/
Adjustment concern



Family

Participants sought services for anxiety, depression, marital relationships, stress, family, grief/loss, and situational/adjustment concerns. There was a 100% increase in people presenting with stress and job/occupational issues compared to 2019. There was no utilization of services related to work/life or financial/legal assistance

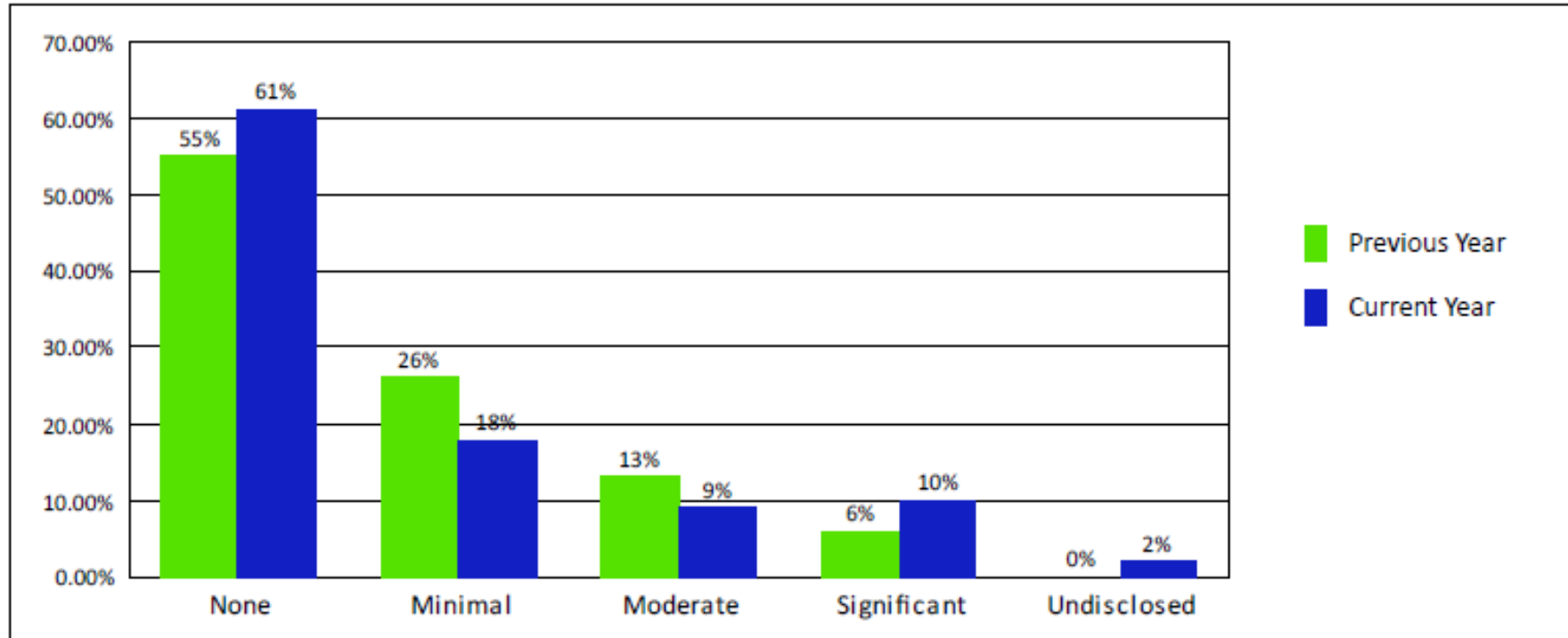
Top Assessed Problems - 2020



- The top assessed problem was Anxiety at 25% which is higher than Beacon's Book of Business (BOB) of 20%. This increase was likely due to COVID-19 and is consistent with industry trends

Trending for Job Dysfunction - 2020

Rolling 12 Month Trending for Job Dysfunction



- There was an increase in participants that reported having significant issues that impacted their job compared to 2019, with a majority of the participants having full-time employment
- 93% of the participants were self referrals, 4% from providers (medical/treatment), 2% union referrals, 1% from a co-worker, 1% from HR, and 1% undisclosed
- 75% of the participants that reported severe impairment reported feeling an improvement after services

Achieve Solutions Website –2020

TOP 10 MOST FREQUENTLY VISITED TOPICS

Employee Assistance Program (EAP)
Anxiety
Depression
Marriage/Couples
Substance Abuse Disorders Treatment and Recovery
Stress Management
Anxiety
Health & Wellness
Alcohol & Other Drugs
Relationships

- In YTD 2020 there were 107 page views, with 30 unique sessions; annualized utilization was 0.69% which decreased significantly from 2019 that had an annualized utilization rate of 1.81% with 385 pages viewed and 169 unique session. This is also below Beacon’s Book of Business of 24.33%. Recommend trainings on how to utilize resources on website and access work/life benefits, and legal/financial assistance.
- There were a total of 59 web inquiries received for the year, with the top articles accessed “Depression: What Is it?” and “The Road to Recovery: Things You Can Change, Things You Cannot” and the top quiz “Understanding Your EAP”

EAP Case Outcomes-2020 v 2019

Plan Year 2020

Plan Year 2019

Eligibility Count 8,190	Eligibility Count 8,732
Counseling Cases 178	Distinct Cases 145
Resolved in EAP – 94%	Resolved in EAP – 92%
Mental Health Referral – 3%	Mental Health Referral – 7%
Substance Use Treatment - 1%	Substance Use Treatment - 1%
Community Resources – 2%	Community Resources – 1%

- The primary purpose of EAP consultation is to promote health and wellness through assessment, brief consultation/treatment and referral to other services – if clinically indicated--there were 116 new members accessing services and 62 returning members, with a higher percentage of cases resolved within EAP
- For employees, assessment and early intervention is shown to positively impact workplace absence, improve productivity, with fewer cases moving toward disability claims

Chapter

08

Helping employees
thrive

Looking ahead to 2021 and beyond



Combining Anthem and Beacon

The combined organization will ultimately provide behavioral health services to 1 out of 6 people in 50 states.



Behavioral health knowledge, clinical expertise, and data insights improve an individual's mental wellbeing as part of total person care.



One of the nation's leading providers of behavioral health services.



Anthem's digital first and data-driven approaches and Beacon's specialty model and support services provide best-in-class behavioral health solutions.



First company to receive Mental Health America's Bell Seal for Workplace Mental Health award.

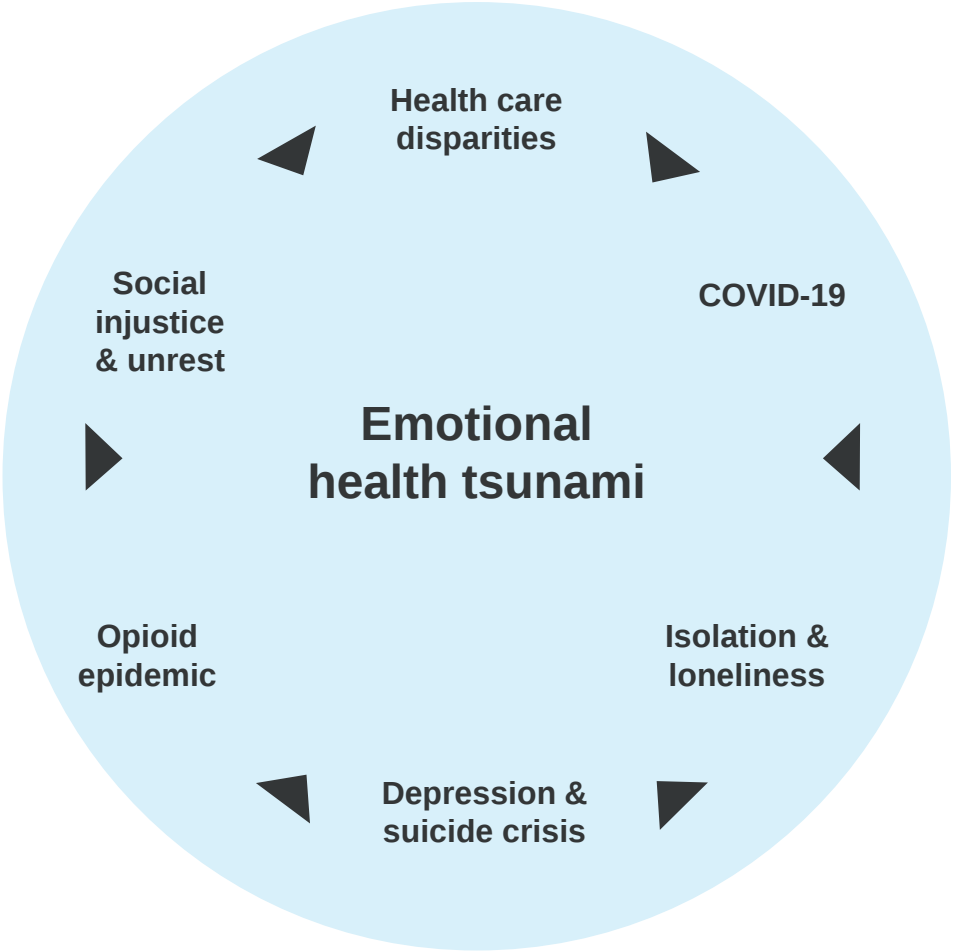
A focus on three key areas to improve health outcomes and help people live their lives to their fullest: **Advancing Whole Person Care, Accessing Care and Empowering Individuals**

Behavioral health is more important than ever

18% of Americans have a BH diagnosis—2x more than diabetes

30% of members with a chronic condition also have a BH diagnosis

20% of PCP claims have a secondary diagnosis for a BH need



Bottom line implications

75% of people with substance use disorder are employed—this has a direct impact on productivity and presenteeism

4% of total spend for ANA clients is being directed to behavioral health

40% These members account for 40-50% of total health care spend

A stronger, market leading behavioral health organization

Anthem



 **beacon**
health options

Digital first
Predictive
modeling

Industry depth
Clinical
expertise
Data insights

Benefits of combined entity

- + Proactive interventions to engage members with supportive guidance, useful tools and valuable insights creating personalized engagement
- + Expanded depth and breadth of offerings
- + Cutting edge solutions
- + Innovative digital and clinical design initiatives

Behavioral health that helps individuals live their best lives



Advancing Whole Person Care

Expertise serving patients across the spectrum, from mild-to-moderate to chronic and complex

Integrating social, behavioral and physical health solutions backed by core administrative capabilities to manage risk and drive improved outcomes for everyone we serve



Accessing Care

Delivers tailored behavioral health services to individuals wherever and when ever they need them

A multi-modal approach with the ability to guarantee timely access to high quality care

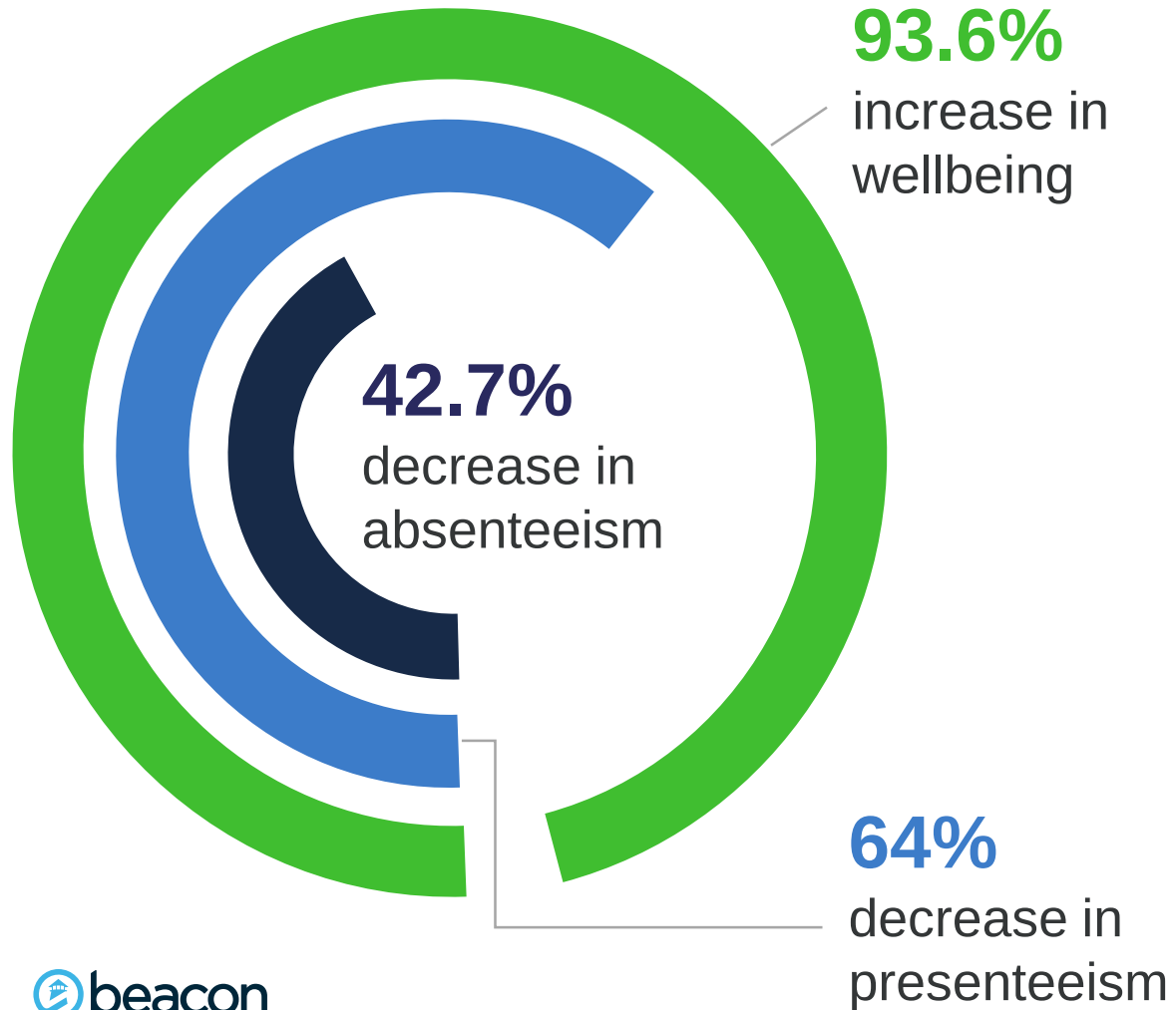


Empowering Individuals

Personalized, data driven approaches to support the right care for mental health and well being

Insights driven outreach engages members to improve whole person health, patient satisfaction and outcomes

Addressing and improving workplace concerns



Expanding EAP networks for better outcomes

Launched a revised provider relations strategy focused on delivering a differentiated provider service experience and process standardization, which will result in:



increased provider satisfaction, NPS, provider retention and advocacy



implementing a tiered provider engagement strategy ranging from a standard service model to high touch.

EAP Network Combination 1/2021	
Company	Increase
Anthem	80%
Beacon	30%

Future network integration activities

- 4/1 – Beacon commercial and Medicare providers in CT and MO can see Anthem members.
- Beacon Medicare providers in NM can see Amerigroup Amerivantage members.
- 7/1 – planning to add several states and thousands of providers (TBD).

Accomplishments of Integration: Communication

Member Self-Care Content: Video, Podcasts, Fliers



Personalized support for overcoming addiction

Addiction to a substance, such as alcohol, drugs, or nicotine, or to a behavior such as gambling is a serious problem. It affects all aspects of your life, from your work and relationships to your personal health.

If you are struggling with addiction, your <Employee Assistance Program> (EAP) offers a wide range of support and resources, available at no extra cost, to help you:

- Recognize the physical and emotional signs of substance abuse
- Understand how drug abuse can affect others
- Address related substance abuse issues, such as mental health problems

These resources can help you understand addiction, begin recovery, and create healthy, lifelong habits:

Professional counseling

Connect with a licensed professional counselor for confidential online or in-person sessions. <You and your household members each> receive <x> visits per issue per year.

Educational podcasts

Learn more by listening to brief, educational podcasts from our licensed professional counselors.

Online support

Search for "addiction" on the website to read articles that can help you and your loved ones.

Your <EAP> is here to help, 24/7

There are three ways to find support:

1. Call <phone>.
2. <Use our <mobile app name> app>.
3. Go to <website> and enter your company code: <PROGRAM NAME>.

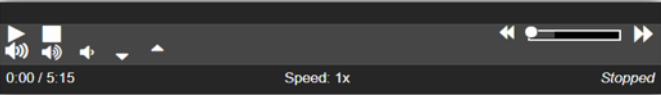
Fresh start



How to know if you're ready for change and how to set goals to move forward. Hosts: Mark DeFee, LPC and KC Schroder, LPC. This audio plays for 5 minutes and 15 seconds.

 [Click here to download MP3 9.04mb](#)

Play Audio



0:00 / 5:15 Speed: 1x Stopped

Thought Leadership



A COVID-19 vaccine: It's about more than physical health

January 27, 2021 Dr. Elisabeth Hager COVID-19, Loneliness and Social Isolation, Mental Health 23 Comments



The physical threat of COVID-19 is clear, which is why many Americans have spent the better part of a year

Caregiving: Help employees to succeed in their dual roles

January 13, 2021 Dule Seamans Caregiver Health, Mental Health 3 Comments



As we herald in a new year with a COVID-19 vaccine, our hope is a return to a life we once knew of being the social animals we're meant to be.

For healthcare, 2021 poses the hope to refocus on issues that will continue to remain of utmost importance to the health and wellbeing of Americans in a post-pandemic world.

Peer support: Shared experience in suicide prevention

September 23, 2020 Clarence Jordan Peer support, Recovery, Suicide prevention 8 Comments



Peer support specialists — those individuals with lived experience of mental illness and/or substance use disorder (SUD) — have been well-established in behavioral health interventions.

Their shared experience provides the credibility and understanding that help individuals with mental health and SUD challenges on their road to recovery.

[READ MORE](#)

Reimagining what it means to thrive

Helping individuals live their best lives

Beacon	Anthem
Advancing Whole Person Care • Singular focus on behavioral health • Deep clinical expertise to deliver specialized programs & services	• Integrated PH and BH with care management infrastructure for operations via joint rounds • Predictive analytics that utilize 'whole person data' to identify and intervene with at risk cohorts
Accessing Care when and how Individuals need it • Comprehensive behavioral health network provides access to array of specialized services • Expertise in creating provider partnerships to deliver high value & integrated care	• Broad behavioral health network delivering expanded access • Value based interventions and integrated care from behavioral provider and primary care provider perspective
Empowering Individuals to Meet their Goals • Unified, BH digital platform to engage patients where they are • Peers utilize expertise to connect and engage with individuals	• Advanced analytics to stratify populations based on required care intensity and to identify rising risk

Behavioral health of the future



Integrating BH expertise with PH to deliver whole person care



Providing comprehensive delivery system to meet population health needs at scale



Creating new products to improve early identification, access and deliver better patient outcomes

Chapter

09

Strategic Recommendations-FELRA-2021



Strategic Recommendations -2021

Centers for Medicare & Medicare Services (CMS) and Mental Health Services Administration (SAMSHA) recommends that health plans include expansion of telehealth to help mitigate the impact of COVID-19, while also helping to reducing the spread, for mental health and substance use disorders by: (1.) reducing barriers and utilizing all available telehealth options, including partial hospitalization, offered to members in their homes; (2.) providing members with educational webinars/newsletters/orientations on ways to manage anxiety and stress; and (4.) connection to community resources—focusing on the whole persons needs

- **Increase utilization of services to in-network providers & Enhanced Promotion of EAP Services:** Increase promotion of all available EAP services-counseling, work/life resources, legal/financial assistance-to help decrease costs for MHSUD claims. Alignment with Beacon to help address workplace issues and provide recommendations for trainings and workshops to help offset projections of increases in mental health and substance abuse issues. The EAP program provides short-term solutions with referrals to in-network providers—focusing on the whole person’s wellness—decreasing utilization for higher levels of care. Focus on work/life balance and legal/financial services due to zero utilization
- **Increase OP Visits, decrease claims for IP & HLOC, expand telehealth:** Today’s environment requires health plans to be flexible and accessible--expanding telehealth for members; 71% of people are more likely to seek care if available, accessible, and without barriers and 86% of members who use telehealth follow through with treatment. Approval of Ria Health (when available) can help decrease the use of inpatient care for Alcohol Disorders. The average cost per unit for IP treatment for mental health was \$1,506.61 and \$636.45 for substance use, compared to the average cost per visit for OP visits which is \$62.84 and \$56.40 for telehealth; increase use of OP services
- **Autism Services (ABA):** Research shows that early diagnosis’ and interventions for autism have a positive impact on overall functioning and provide comprehensive services for members. The # of children assumed to be diagnosable with Autism Spectrum Disorder is 12.4 million, with > 50 % of parents needing to stop work, and 46% requiring more help/information in managing their emotional/physical/mental health; add ABA services to provide comprehensive coverage for members

Thank You!

Contact Us



 **800-353-3572**

 **www.achievesolutions.net/felra**

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Submission on 02/24/2021*