

How to Develop a Financially Sustainable Behavioral Health Program

Building a financially sustainable behavioral health program at scale means delivering quality care to your patient population by a team of top-notch behavioral health providers. It also means having efficient care models that help your organization scale services and meet quality measures that enable your health system to thrive.

We broke down how you can leverage quality providers and effective care models delivered via telehealth to build a financially sustainable behavioral health program.

Financial obstacles health systems may face

With **14.1 million people in the U.S. with a serious mental illness**, availability of treatment is critical.¹ However, significant barriers keep people from the care they need, including the behavioral health provider shortage, leading people to seek care in the ED.

Additionally, many of those in crisis are covered by Medicaid, making reimbursement challenging. **In 2020, combined underpayments from Medicare and Medicaid to hospitals totaled nearly \$100 billion.**²

Every hospital faces a hierarchy of needs regarding patient care – from those who need immediate care in the ED to those stuck in referral queues to those who need proactive outreach in the community.

So, how can you help more people with behavioral health conditions and become financially sustainable? Let's look at a few building blocks that can help you achieve this goal.



6 pillars of a financially sustainable behavioral health program

1. Increased ED throughput

By augmenting your on-site care with a multidisciplinary team of behavioral health providers available 24/7/365, you can ensure every patient receives timely access to quality care and is not taking up valuable space in the ED longer than is clinically appropriate.

2. Reduced admissions

By having access to a variety of virtual providers, like LCSWs, PMHNPs, and MDs, on your team, patients are more likely to get to the right level of care and help ensure only the most critical are admitted, and those who might be more effectively treated in a lower level of care get the help they need. Ultimately, this approach can help decrease long-term costs.

3. Limiting revisit rates

By providing the most effective care possible, and ensuring every patient has an optimal discharge plan to manage their mental health, patients are less likely to come back to your hospital. At the same time, it can also better position your organization to retain patients within your network.

4. Increased revenue

In outpatient settings, many health systems are foregoing revenue by not having timely access available – driving unnecessarily high leakage and no-show rates. By having scalable care models that provide high-quality care, you can see and retain more patients.

5. Driving sustainable margins

To drive sustainable margins in outpatient behavioral healthcare, health systems must leverage a multidisciplinary care team that works top-of-license and deliberately ensures patients are navigated to the right resource at the right time in the right way.

6. Improved total cost of care

By treating behavioral health alongside physical conditions, you're helping total cost of care overtime, and increasing key metrics like pharmacy cost, reducing length of stay, and improving patient outcomes.



Quality care models that build a financially sustainable future

Virtual Clinic

This care model provides a clinician-guided, evidence-based-navigation assessment that directs patients to the most appropriate next level of care, delivers effective short-term behavioral health care, and facilitates closed-loop hand-offs. This model also helps ensure patients don't have to return to the hospital for additional care or escalate to the emergency department unnecessarily. The model was also built for scalability and financial sustainability to ensure it can help serve large populations effectively.

Virtual Clinic works to expand and accelerate access to care and achieving measurement-based outcomes like increasing revenue, driving sustainable margins, and improving total cost of care.

On-Demand Services

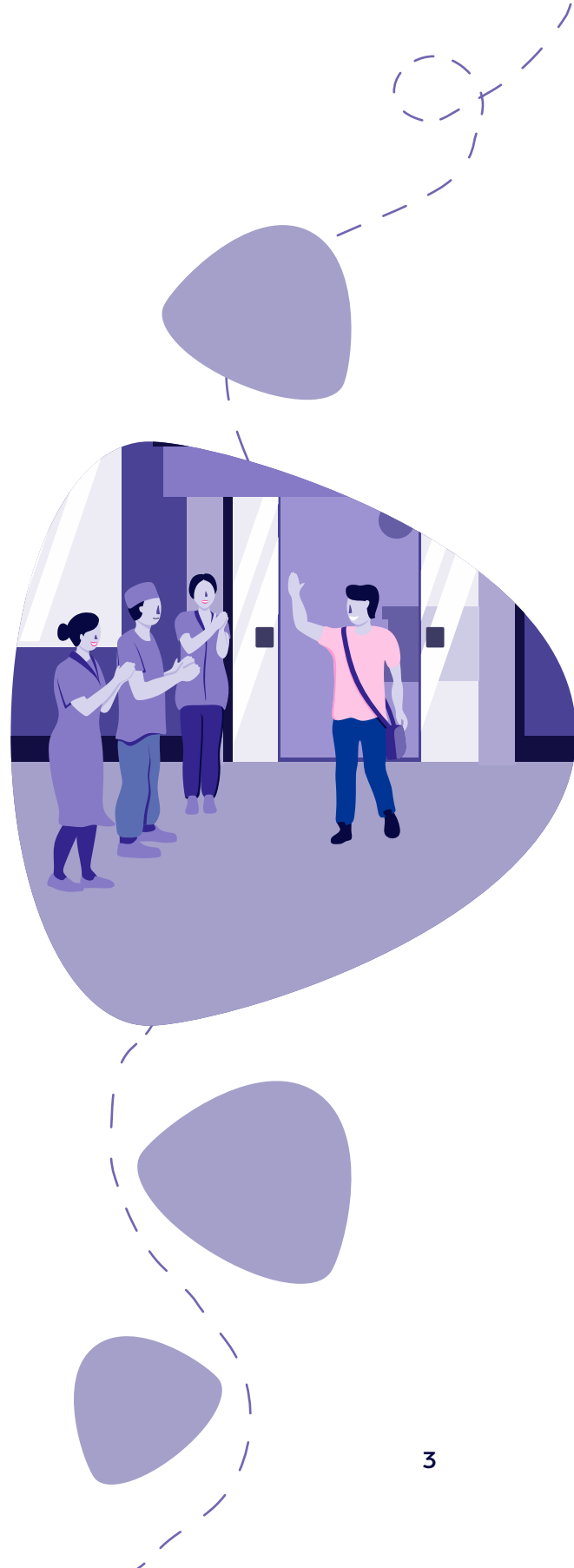
These services leverage a pod of providers to help support ED and MedSurg units with on-demand consults 24/7 – ensuring your health system is never without a behavioral health specialist. On-Demand Services provides access to providers who are experts in assessing and managing risk to help patients get triaged and evaluated as quickly as possible.

On-Demand Services leads to increased ED throughput, decreased inpatient admissions, and reduced revisit rates

Scheduled Services

This approach provides a predictable coverage model for organizations, meaning your virtual providers are available on a regular schedule each week. Most importantly, it means your providers are never without a behavioral health provider to lean on for their expertise.

Scheduled Services increases access to care, expands your patients access to specialists, increases revenue, and improves total cost of care.



Laying the foundation for whole-person care

Physical and behavioral health are intrinsically linked. For example, research from the National Library of Medicine shows that **74.9% of psychiatric inpatients had at least one medical comorbidity, including 57.5% of people ages 18-24.**³

When a hospital helps a patient with their behavioral health, they aid in their physical health as well. If you're managing total cost of care and population health, delivering holistic care for your patients is essential.

According to a behavioral health analysis by Evernorth Health Services, treating behavioral health conditions in outpatient care is directly tied with a reduction in medical and pharmacy costs. In their analysis, they highlight **savings up to \$2,565 per person over the 15 months following a diagnosis and up to \$3,321 per person over the 27 months following a diagnosis.**⁴

Where Iris Telehealth its in

At Iris Telehealth, we are dedicated to bridging behavioral health care gaps across the continuum. Our 200+ partner organizations across the country leverage our solutions to transform the way they're delivering behavioral health care throughout their inpatient, outpatient, and acute care services. As a Joint Commission accredited behavioral health medical group, we are dedicated to meeting quality measures in provider selection, patient care, compliance, and regulatory standards.

Via our comprehensive care models, data analytics platform, and rigorous management model, we are able to meet clinical, financial, and operational goals for behavioral health programs of any size and scope.

Contact us today to learn more about how we can help your organization achieve and maintain your quality measures.

Sources

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