

# Centene Advanced Behavioral Health

*White Paper*

## Advocating for the Mental Health of Medicare Recipients



For more than 50 years, Medicare has provided essential health insurance coverage to a large portion of the US population. In 2021, it was estimated that more than 63 million received Medicare benefits,<sup>1</sup> and projections show that number will continue to grow by 1.5 million Americans each year from 2021 to 2029.<sup>2</sup>

The majority of beneficiaries are comprised of individuals age 65 and older, and this population faces challenges that come with aging such as loss of independence, feelings of isolation, and declining physical health – all of which greatly impact mental wellbeing. Medicare benefits ensure access to care given that one out of five older individuals have limited discretionary income for unexpected medical expenditures.<sup>3</sup> Additionally, those with lower incomes may struggle to balance basic living expenses with the cost of necessary care including prescription medications and routine outpatient services.<sup>4</sup>

Medicare spending is predicted to almost double between 2019 and 2029,<sup>5</sup> and although the majority of Medicare beneficiaries qualify by age, 13% of those with Medicare coverage are under age 65, qualifying through Social Security disability benefits.<sup>6</sup> Reports show that this subsection is more likely to experience impaired physical and cognitive health, daily living limitations, and lower incomes.<sup>7</sup> Further, those who are dually-eligible with both Medicare and Medicaid coverage, have disproportionately higher costs and prevalence of behavioral health conditions. It is therefore imperative that the healthcare industry address the physical, mental and social wellbeing of this complex population using a coordinated approach.

While recent policy changes have improved access to mental health services for Medicare beneficiaries, there is still work to be done to ensure they can easily receive the care they need to live healthier, higher-quality lives. As an industry leader and one of the largest Managed Care Organizations in the country serving many of our nation's most vulnerable citizens, Centene is committed to ensuring the mental wellbeing of Medicare beneficiaries through access to high-quality care, innovative programs, and a wide range of health solutions. The following are recommendations for payers in this pursuit.

## Recommendations

### OLDER ADULT BENEFICIARIES

Because the majority of those receiving Medicare benefits are aged 65 and older, they may experience challenges associated with this stage in life that negatively impact mental wellbeing such as an increase in chronic medical conditions, loss of a spouse or partner, or decline in self-sufficiency.

Additionally, for some, accessing care may become more difficult whether it be from reduced mobility or lack of experience with new technologies. Payers have an opportunity to ensure these individuals receive care that focuses on a whole health approach so they can stay well and be well throughout their lives.



In 2021, an estimated  
**63 million**  
Americans received  
Medicare benefits  
and  
**1.5 million**  
more will be added  
**each year from**  
**2021 to 2029**



Numerous studies show that chronic medical conditions can result in mental health distress, hindering not only physical recovery but emotional wellbeing. As individuals age and encounter increased physical challenges, they may also be less likely to actively participate in their recovery. By integrating care efforts, payers can help reduce unnecessary healthcare expenditures and improve health outcomes for members. While all individuals benefit from a whole health approach, integration is essential as people age because they may be more likely to experience multiple comorbidities.

Cardiovascular disease impacts more than 43 million individuals who are age 60 or older, with heart disease and stroke in the top four causes of death for those age 65 and older.<sup>8</sup> After a cardiac event, individuals may experience mental health conditions such as depression, anxiety, or post-traumatic stress disorder. Additionally, those recovering from a heart-related condition may endure pain, fear of death, physical limitations, and even financial concerns – all of which impact mental state.<sup>9</sup> “Among cardiac patients 75 and older, nearly 60% have some type of cognitive impairment.”<sup>10</sup> Research has shown that those with dementia or mild cognitive impairments are less likely to receive needed cardiac care.<sup>11</sup>

More than 16% of those age 65 and over are affected by mild cognitive impairment, which can impact individuals’ ability to live independently or clearly reason.<sup>12</sup> Because changes in memory and thinking may be subtle, impairment that can develop into dementia is not always diagnosed. In the US, more than six million adults over age 65 “are living with dementia caused by Alzheimer’s disease, the most common form, and that number is expected to double by 2050.”<sup>13</sup> Because early diagnosis is key, it is essential that payers ensure interventions address both mental and physical needs of Medicare members.

Diabetes is another condition that is more prevalent in older populations, leading to stress and anxiety given the need for constant monitoring and lifestyle maintenance. Up to 50% of people with diabetes experience diabetes distress, which unlike depression, is a direct result of factors related to diabetes.<sup>14</sup> Variances in blood sugar may also bring about mood changes, fatigue, and anxiety, making it difficult to discern a mental health condition from blood sugar irregularity.

- » In light of this, Centene launched a pilot program in conjunction with the American Diabetes Association that provides meal plans and recipes specifically created for those with diabetes and pre-diabetes to ensure proper nutrition, take the guesswork and stress out of preparing beneficial foods, and help individuals balance healthy eating with other life challenges they may be facing. This program is provided to members at the onset of diagnosis to enable early education about the importance of food choices when living with diabetes, giving members a strong knowledge base to avoid health complications from this disease.
- » As a step in better integrating mental and physical health care, Centene’s chronic conditions management programs include behavioral health screenings as part of comprehensive assessments and education for enhancing self-care skills. Developed for members with chronic conditions including diabetes, congestive heart failure (CHF), coronary artery disease (CAD), hypertension, and chronic obstructive pulmonary disease (COPD), the programs improve whole health and reduce inpatient admissions through care management, member engagement, and provider education. The integrated approach aims to increase medication adherence, remove barriers to care, and increase member knowledge for improved self-management of their conditions.

The prevalence of polypharmacy is high for those age 65 and older with an estimated 57% of women and 44% of men taking five or more medications per week,<sup>15</sup> making medication management an important component to overall care. Often, that responsibility falls upon family members who are serving as caregivers. Payers should find ways to support not only members, but also those who care for them. The report, *Home Alone: Family Caregivers Providing Complex Chronic Care*, broke new ground in what is understood about family caregivers. Funded by The John A. Hartford Foundation, *Home Alone* highlighted the increasing complexity of the challenges facing family caregivers. The report found that, in addition to performing traditional personal care tasks, nearly half of family caregivers also perform complex medical/nursing tasks – a strain that falls heavily on low-income and multicultural populations.

In addition, Home Alone indicates that most family caregivers perform these tasks with very little guidance from clinicians, leaving them feeling stressed and concerned about making a mistake.

- » To help address this and apply research to practice, the Centene Foundation for Quality Healthcare awarded a grant to the AARP Foundation to support developing and disseminating a series of evidence-based, consumer-facing instructional videos and resources designed to support family caregivers in several important areas, including medication management. Centene clinical experts reviewed these materials and stated they would be very likely to recommend the resources to staff and patients.

Another challenge this age group faces is an increased risk of loneliness and social isolation, along with the resulting adverse effects. The National Academies of Sciences, Engineering, and Medicine (NASEM) reports that almost 25% of adults 65 and older are socially isolated.<sup>16</sup> Medical conditions and life changes such as the loss of friends and family or living alone contribute to this. Both loneliness and social isolation have been linked to increased mortality risk and decreased treatment success of both mental and physical health conditions.<sup>17</sup> Research from AARP and Stanford University also shows that because those who are isolated are more ill when they go to the hospital and require a longer stay, the cost of Medicare increases by almost \$7 billion a year.<sup>18</sup>

Compounding this public health problem, the COVID-19 pandemic further increased feelings of being alone and mental distress for American adults and increased the need for mental health care for all age groups, including older adult Medicare beneficiaries. Additionally, the negative effects of social isolation have shown to be amplified in older adults, often leading to depression that stems from loneliness.<sup>19</sup> While many age groups used technology such as social media or two-way video conversations to stay in touch with others and combat some of the experienced seclusion, the generational-based digital divide has become even more apparent throughout the pandemic.

- » Through its continued dedication to providing innovative solutions to overcome barriers, Centene is looking toward novel uses of technology that address social isolation and bridge the digital divide. Having a companion animal can help individuals decrease loneliness and gain a sense of purpose and need. However, for older adults who may be experiencing mobility limitations or memory loss, ownership of a living animal can be problematic due to the necessity of feeding, walking, and other care. Early research shows promise that robotic pets with lifelike qualities such as movement and sound can help lower feelings of isolation. A pilot program in New York tested the correlation of robotic pets in reducing isolation in older adults, with “70% reporting a decrease in isolation after one year.”<sup>20</sup> In a study of older individuals considered at-risk for social isolation, 85% of “interactions with the robotic companion pet decreased feelings of anxiety, increased communication abilities, and/or increased the general wellbeing of the patient.”<sup>21</sup> Robotic pets are also proving to be effective in improving health in other ways as well. In a Journal of Alzheimer’s Disease study, over a three-month period, dementia patients who interacted with robotic pets exhibited “a 6.8% reduction in antidepressants and 10% reduction in pain medications.”<sup>22</sup>



Nearly  
**25% of adults**  
**age 65+**  
experience social  
isolation



**112 million Americans** live in areas of the country where **mental health care providers** are in short supply



- » Centene has embarked on a partnership with San Diego State University's Center for Excellence in Aging & Longevity to address multiple issues that impact the wellbeing of older adults and their caregivers. As part of this, The Wellness Club was established to provide a whole health approach to navigating current and emerging challenges including social determinants of health barriers, isolation, and the need to return to a focus on mental and physical health and wellness in the wake of COVID-19. The Wellness Club uses a peer navigator approach to connect older adults with trained peers who provide guidance, resources, and support. Additionally, through its intergenerational component, university students are connected with older adults to encourage healthy interactions and foster companionship. These pairings also allow for educational opportunities that address the digital divide and strengthen older adults' comfortability with technologies that can assist in maintaining and achieving wellness as they age.
- » Centene remains committed to partnering with federal and state governments to support affordable and accessible vaccines, treatment, and testing to protect communities from the continued impact of the pandemic. Because vaccination is imperative to curtailing the spread of this virus and the associated mental health impact, and because older populations were at higher risk of illness, the Centene Charitable Foundation partnered with organizations to support the communities Centene serves.
  - » To ensure vulnerable Americans, including seniors, were able to get to vaccination sites, Centene teamed up with Lyft, National Council on Aging (NCOA), National Hispanic Council on Aging (NHCOA) and United Way to offer safe and reliable transportation at no cost.
  - » Through the partnership with NCOA and Lyft, older adults were provided transportation to and from their vaccine appointments. NCOA distributed ride codes to its aging services network through a public campaign to support low-income, uninsured, and at-risk communities who are unable to get their vaccine appointments due to the lack of transportation.
  - » NHCOA launched a multi-lingual COVID-19 Resource Center to assist Hispanic communities and older adults with getting vaccinated. A helpline was established to make sure people received up-to-date, scientifically based information on vaccines, current safety guidelines, and facts about the virus in Spanish, English, and Portuguese. The Resource Center helped people register for vaccine appointments, and Lyft provided transportation to and from.

### **MENTAL CARE ACCESS**

While challenges in receiving mental health care can occur at any time in life, there are nuances within older populations that must be recognized and addressed to ensure they receive the care they need. From functional limitations that may impact ability to attend in-person care, to the stigma of seeking mental health therapy, to comfort with technology, payers should tailor their efforts to ensure the aging population can more easily overcome obstacles.

Compared to adults age 50-64, those age 65 or older reported they were more likely to “rarely” or “never” receive emotional support needed.<sup>23</sup> Depression and anxiety are widespread among older adults, and anxiety may be underestimated because they are more likely to focus on reporting physical issues versus mental concerns. One of the reasons for this underreporting is that older individuals may not feel comfortable with discussing their mental state or distress. This generational stigma associated with behavioral health may discourage them from seeking help.

- » Payers can help to prevent worsening of mental state by supporting providers, care managers, community health workers, and community partners to better educate the members they serve to maintain mental wellness and resiliency, address stigma, and offer evidence-based self-help resources. Education, awareness, and anti-stigma messages normalize the difficulties many are experiencing thereby encouraging people to seek help to address symptoms they may observe in themselves or their loved ones. Payers should also ensure websites and materials have easy-to-access resources specific to this population and their caregivers and are sensitive to cultural and linguistic preferences.
- » By referring members to evidence-based, age-friendly care that can help with early symptom management and prevention of disorders, payers can increase access without stigma and begin to proactively change perception of behavioral health care.
- » Using a balance of technology and human connection in a three-market pilot, Centene is realizing positive health outcomes and working to help destigmatize the use of behavioral health services. Case Managers identify and outreach to members based on data analytics and referrals. Members are then assigned a health coach who provides telephonic evidence-based care and education regarding virtual care appointments. Strong partnerships and improved clinical coordination ease the transfer of care between providers and form a seamless member experience during a time of unprecedented need. This coordination includes collaboration between the health plan team and providers on member treatment goals, progress, and interventions to mitigate gaps in care, as well as case rounds that add an enhanced perspective of member needs. The pilot has resulted in more member follow through with treatment, an enhanced member experience, and ultimately improved clinical outcomes and reduced medical costs.

In addition to personal difficulties in accessing mental care, there are systematic issues as well. “More than 112 million Americans live in areas of the country where mental health care providers are in short supply, and experts predict increasing shortages in psychiatrists, clinical and counseling psychologists, social workers, mental health counselors, and other specialty mental health professionals through 2025.”<sup>24</sup> To combat this shortage and improve access across the nation, telehealth may be part of a solution. As technology continues to advance and further how individuals interact with care, TeleBehavioral Health (TeleBH) challenges must also be addressed. Pew Research states that more than 77% of US adults age 65 and older report that they require assistance using computers, tablets, or smartphones, which stems from discomfort or fear in using the device. Additionally, while TeleBH provides members access to a larger provider network to better match their needs for specialty expertise or cultural sensitivity, the Eighth FCC Broadband Progress Report conveys that access in rural areas remains problematic with 19 million residents lacking connectivity and many more with insufficient internet speeds to support video calls.

- » When creating TeleBH solutions, payers should ensure usability is tested for older populations who desire straightforward and uncomplicated technology. Additionally, having a support team who will patiently explain use and answer questions will help this population feel more secure in using this modality of care.
- » Supporting the option for audio-only visits allows more members to benefit from TeleBH, whether by preference or need. Audio-only TeleBH can be used when audio/visual is not possible due to lack of access to a video capable device, video is perceived as being invasive, the presence of a disability that limits use of visual technology, or residing in areas with limited broadband. Conversely, video and other options should also be available to meet the needs of individuals with certain disabilities, including hearing impairment.

- » It is important for payers to advocate for better technology infrastructure in rural areas. Organizations should continue to bolster infrastructure to strengthen delivery of telehealth for both providers and members, and payers should ensure robust provider networks that provide both in-person care and telehealth treatment.

## DUALLY ELIGIBLE

Individuals who receive both Medicare and Medicaid benefits, whether due to age or disability and low income, are considered dual eligible. In 2020, more than 12 million Americans were dually eligible, and accounted for a disproportionate amount of Medicare and Medicaid spending.<sup>25</sup> Within Medicare, dually eligible individuals constitute 20% of those enrolled yet 34% of spending, and within Medicaid, duals represent 15% of those enrolled yet 32% of cost.<sup>25</sup> Americans with disabilities under age 65 account for approximately 8% of the population, but that percentage nearly doubles within the Medicare population.<sup>26</sup>

Dually eligible beneficiaries often endure increased mental and physical health concerns and social risks compared to other Medicare members. Because of the increased need for care, Medicaid coverage is critical to supplement Medicare for low-income beneficiaries, providing services that are not covered through Medicare alone. According to Centers for Medicare and Medicaid Services (CMS), 60% of dually eligible beneficiaries have more than one chronic condition, 41% are diagnosed with a mental health condition, and 49% require long-term care services and supports (LTSS).<sup>27</sup> Additionally, almost one-third of dually eligible members “have been diagnosed with a serious mental illness (SMI), such as schizophrenia, bipolar disorder, or major depressive disorder, a rate almost three times higher than for non-dually eligible Medicare beneficiaries.”<sup>28</sup> It is also reported that spend for dually eligible individuals with mental health diagnosis is twofold of those without.<sup>28</sup>

Those with SMI tend to have higher pharmacy costs due to comorbidities and the need for specialty psychiatric medications and may need more assistance in managing their health. They also may be more susceptible to social determinants obstacles such as unstable housing, food insecurity, and lack of transportation. Mortality rates in individuals with SMI are extraordinarily high compared to the general population, with lifespans ending on average 10 to 20 years earlier.<sup>29</sup>

- » Having the right medication support can help SMI populations achieve a better quality of life, reduce behavioral health hospitalizations, and remain in their communities and social support network. The Centene Advanced Behavioral Health (CABH) Behavioral Health Medication Monitoring (BHMM) program promotes psychotropic medication prescribing and treatment that aligns with clinical best practice guidelines. BHMM includes review of metabolic labs and assessments for members to enable early identification for potential comorbidities. Metabolic side effects of psychotropic medication, especially antipsychotics, can include weight gain, dyslipidemia, and increased susceptibility to diabetes, making lab reviews an essential component to maintaining overall health. CABH has highly trained clinicians to perform a comprehensive behavioral health service review, identify alternative therapeutic options, recommend additional care practices, and refer members to case management for



**41% of  
dually eligible  
beneficiaries**  
are diagnosed with  
a mental health  
condition





**41% of members**  
in our Behavioral Health Medication Monitoring program experienced a **decrease in medications without a decrease in overall health**



further interventions. In 2020, 41% of members enrolled in the program were able to safely reduce the number of prescribed medications while improving overall health.

Because dually eligible beneficiaries receive coverage from both Medicare and Medicaid and often have complex needs due to mental, physical, and socioeconomic challenges, coordinating care and benefits can be complicated. Further, it has been reported that uncoordinated funding from these two government programs and siloed care delivered by multiple providers for physical and mental health needs can result in poorer health outcomes.<sup>30</sup>

- » At CABH, Utilization Managers (UM) partner with Care Management to address a lack of social supports and coordinating multiple providers. The UM team serves as an advocate for the member by helping to navigate and maximize appropriate benefits from Medicare and Medicaid to ensure the member receives the care that is needed.
- » Centene supports community-integrated social services via technology platforms to connect members with community benefit organizations. These platforms enable real-time information sharing and centralized access to community support systems, helping our members access resources for improved health and quality of life. In addition to improving member health and wellbeing by ensuring that the member is receiving the right service at the right level of care, the CABH Members Empowered To Succeed (METS) program works directly with members and providers engaged in high rates of outpatient behavioral health services without successful outcomes. The program has reduced unnecessary utilization including a 10% decrease in ED utilization, 17% decrease in behavioral health (BH) inpatient admissions, and 30% decrease in BH outpatient services while improving quality measures.
- » The CABH Long-Term Services and Supports (LTSS)/Long Term Care (LTC) team, in partnership with Centene's state health plans, trains providers, the community, and caregivers who serve these members in nursing facilities, assisted-living facilities, at home, and in the community. Trainers provide evidence-based courses with a focus on topics that look at a full range of needs for this population including caregiver stress reduction, behavior management, caring for members with dementia, fall prevention, as well as abuse, neglect, exploitation and reporting standards. This program's goal is to facilitate access to high-quality services to promote independence and quality of life.

Trusted, collaborative provider-payer partnerships are key to better member health outcomes. To foster this, each physician or facility has a specific CABH Medical Director to work with who communicates with the provider ongoingly and openly. Additionally, CABH uses a unique approach to utilization management that employs data analytics, clinical reviews, and streamlined documentation, and enhanced provider relationships to ensure members receive the best possible care and optimize their benefits.

- » For example, when attending physicians are determining whether members should remain in inpatient care, the CABH Medical Directors collaborate with them to understand progress in treatment while determining whether inpatient treatment is the best course for continued care. These peer-to-peer conversations build long-lasting mutually beneficial partnerships through



ongoing clinical support to increase treatment success and appropriate use of services. Through this collaboration, appropriate discharge plans are created, and reduced readmissions are achieved.

- » Furthering its commitment to both members and providers, Centene launched the Provider Accessibility Initiative (PAI), which was ranked No. 7 on FORTUNE's 2019 "Change the World" list and awarded the CMS 2019 Health Equity Award. Designed in collaboration with Centene's National Disability Advisory Council, the PAI assists those living with disabilities and their companions in accessing quality healthcare. The program is the first of its kind and aims to transition healthcare delivery into a fully accessible system by removing disability access barriers in healthcare offices. What makes this initiative successful is the increased access to care, not only for Centene's membership, but for the community as a whole. Through the PAI's efforts in providing building modifications, diagnostic equipment, and programmatic access, individuals with disabilities have greater access at their provider's office, directly increasing the quality of care and closing care gaps. Additionally, to address the disproportionate impact of COVID-19 on disabled communities, PAI created a COVID-19 Web Series to provide timely recommendations on how providers and organizations can deliver disability-competent care during the pandemic and beyond.

Assessing and measuring dually eligible and age 65+ Medicare members' experience with mental health care can help inform payer strategies and plans for improving services. One such mechanism to do so is the CAHPS Experience of Care and Health Outcomes (ECHO) Survey. The survey metrics are based on a variety of touchpoints along the customer journey spectrum including how quickly they receive treatment and office wait times; how well clinicians communicate; how well they were informed about treatment options, medication side effects, and managing their condition; and access to treatment and information from their health plan. While payers may not have direct control over some of the touchpoints within the journey, there are a number of ways they can positively influence the member experience.

- » CABH help providers overcome barriers by placing emphasis on provider education and relationships. This is accomplished through ongoing, regular visits with providers and sharing of resources. Some of the resources include educational pieces focusing on what ECHO is and its importance, tip sheets to help providers in member conversations around reducing mental health stigma, patient engagement strategies that incorporate the RESPECT (Rapport, Empathy, Support, Partnership, Explanations, Cultural Competence and Trust) model, and medication adherence training.
- » Additionally, CABH creates and distributes member-facing education regarding obstacles that may contribute to poorer mental wellness including social determinants such as health literacy, living conditions, and social isolation.

## FEDERAL & STATE POLICY RECOMMENDATIONS

In order to successfully ensure Medicare beneficiaries have access to and are confident in accessing mental health care, sustaining recent public policy changes and pursuing future opportunities is essential. These include, but are not limited to, the following considerations.

- » To address critical gaps in care, promote access to needed services, and increase the breadth of the mental health workforce in strength and scope, payers should encourage the recognition of mental health counselors and marriage and family therapists as mental health providers. Research has demonstrated the high success and low recidivism rates of these types of providers, as well as their cost-effectiveness.<sup>31</sup> Centene supports the passage of the Mental Health Access Improvement Act (S.828, H.R. 432), recognizing these mental health counselors and marriage and family therapists as covered Medicare providers. Additionally, Centene supports utilizing existing providers appropriately and having them work at the top of their licensure.
- » Furthering efforts to address the mental health care provider shortage, payers should support Congress instituting Medicare coverage of certified peer support specialist services. These paraprofessional services, provided by those with lived experience recovering from mental health and substance use disorders, can play a significant role in supporting individuals currently living with these conditions. Centene supports the Promoting Effective and Empowering Recovery Services in Medicare (PEERS) Act of 2021, (S. 2144, H.R. 2767). This legislation takes important steps to recognize the role of peer support specialists to help facilitate engagement with services, manage both physical and mental health conditions, and build support systems to live increasingly self-directed lives.

- » Additionally, championing both cross-state licensure and expanded scopes of practice can expand the mental and behavioral health workforce in traditionally underserved areas by improving provider access geographically and professionally. Centene supports the aims of the bipartisan Temporary Reciprocity to Ensure Access to Treatment (TREAT) Act to “provide temporary licensing reciprocity for all practitioners or professionals, including those who treat both physical and mental health conditions, in all states for all types of services (in-person and telehealth) during the COVID-19 response.”<sup>32</sup> With tight controls over fraud, waste, and abuse, and proper scrutiny over credentialing, federal licensing and scope of practice barriers can be reduced to workers seeking to participate in federal healthcare programs.
- » Recently, CMS issued a final rule on the CY 2022 Physician Fee Schedule (PFS) for Medicare payments that allows for TeleBH services to more easily be accessed. Under this, Medicare beneficiaries may originate telehealth visits from their homes and geographic restrictions are eliminated. Additionally, federally qualified health centers (FQHCs) and rural health clinics may also provide behavioral health services via telehealth. The rule also allows flexibility for providers to diagnose and care for established patients’ mental health via audio-only methods when the patient is unable to or chooses not to use a video option.
  - » Payers should advocate for permanence of the rule, as well as for future flexibility and evaluation of new modalities as technology advances. Additionally, payers should support corrective legislation to fix the provision in the Omnibus Bill that requires an in-person visit within six months of a TeleBH visit post-public health emergency.
  - » Centene also recommends appropriate regulatory agencies conduct research to determine how best to leverage audio-only technology as a modality to provide quality, evidence-based and clinically appropriate behavioral health services as a long-term strategy. Like Centene, payers should endorse provider coding with the new audio-only modifier to analyze utilization and outcomes data for audio-only and audio-visual TeleBH.
  - » Centene enables equitable access to care by providing assistance to community behavioral health providers to strengthen their technology resources to deliver telehealth services. Payers can help providers in underserved communities to implement tools such as a comprehensive telehealth platform that is interoperable with electronic health records. To this end, payers can serve a valuable role by offering provider and patient trainings and education programs designed to increase awareness, use, and comfortability with the technological features involving telehealth.
- » Centene strives to achieve whole health through physical and behavioral health integration, and as such, supports the Mental Health Parity and Addiction Equity Act (MHPAEA), which requires payers to ensure medical and behavioral health services are provided equally, eliminating historical inequities that served as a barrier to people with mental health and substance use conditions from accessing care. Currently, Medicare is not subject to the federal parity law, but Centene supports consideration of extending MHPAEA to Medicare through further analyses.
- » With 70% of behavioral health concerns being treated in a primary care office,<sup>33</sup> it is vital that primary care physicians (PCPs) feel knowledgeable and have the tools needed to identify and refer members to care if a mental health concern is present. Additionally, providing PCPs with seamless ways to access and consult behavioral health professionals as they help members navigate care improves coordination, while reducing stigma associated with seeking specialty behavioral



Centene's Provider Accessibility Initiative ranked

**No. 7 on FORTUNE's 2019 "Change the World"**

list and was awarded the

**CMS 2019 Health Equity Award**





health treatment. Support for these clinicians is essential to the adoption and implementation of a collaborative, whole health approach.

- » Like Centene, payers should support legislation that encourages expansion, adoption, and financing of technological capabilities that make health information sharing easier and reduce obstacles to provider collaboration. Additionally, payers should encourage amendments to existing privacy laws to improve and simplify care coordination. Centene supports continued efforts of leveraging interoperability to improve care and alignment between HIPAA and 42 CFR Part 2. Additionally, continued advancements in value-based contracting and adoption of CPT codes that promote behavioral healthcare coordination will advance physical and behavioral healthcare integration.

## Summary

As American populations continue to age into Medicare and the needs of dually eligible beneficiaries persist, payers have the responsibility to ensure access to culturally inclusive and generationally appropriate mental health benefits and treatment – which greatly impact overall health and quality of life. Through delivering improved access to high-quality individualized care, partnering with providers, and influencing important legislation, payers can help Medicare members achieve positive health outcomes and experience life to its fullest. With more than three decades of experience in managing the complex health needs of the nation’s most vulnerable populations, Centene continues to discover and embrace innovative approaches to healthcare that result in improved individual wellbeing. Through its continued commitment to its members, Centene is proud to deliver personalized care that promotes whole health and independence.

## REFERENCES

1. <https://www.cms.gov/research-statistics-data-systems/cms-fast-facts/cms-fast-facts-mobile-site>
2. [https://www.commonwealthfund.org/sites/default/files/2020-10/Medicare%20Data%20Hub\\_October2020.pdf](https://www.commonwealthfund.org/sites/default/files/2020-10/Medicare%20Data%20Hub_October2020.pdf)
3. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4193634/>
4. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4193634/>
5. [https://www.commonwealthfund.org/sites/default/files/2020-10/Medicare%20Data%20Hub\\_October2020.pdf](https://www.commonwealthfund.org/sites/default/files/2020-10/Medicare%20Data%20Hub_October2020.pdf)
6. <https://www.mathematica.org/-/media/publications/pdfs/opinsights2.pdf>
7. <https://medicareadvocacy.org/under-65-project/>
8. [https://www.heart.org/idc/groups/heart-public/@wcm/@sop/@smd/documents/downloadable/ucm\\_472923.pdf](https://www.heart.org/idc/groups/heart-public/@wcm/@sop/@smd/documents/downloadable/ucm_472923.pdf)
9. Abed MA, Kloub MI, Moser DK. Anxiety and adverse health outcomes among cardiac patients: a biobehavioral model. *J Cardiovasc Nurs* 2014;29(4):354–63.
10. <https://www.heart.org/en/news/2021/07/30/dementia-can-complicate-heart-recovery-and-treatment>
11. <https://link.springer.com/article/10.1007/s11606-019-05155-8>
12. <https://www.alz.org/media/Documents/alzheimers-facts-and-figures.pdf>
13. <https://www.heart.org/en/news/2021/07/30/dementia-can-complicate-heart-recovery-and-treatment>
14. <https://www.cdc.gov/diabetes/managing/mental-health.html>
15. <https://www.uspharmacist.com/article/polypharmacy-and-drug-adherence-in-elderly-patients>
16. <https://www.nap.edu/catalog/25663/social-isolation-and-loneliness-in-older-adults-opportunities-for-the>
17. <https://www.sciencedirect.com/science/article/pii/S0277953617306639#bib23>
18. <https://www.newyorker.com/magazine/2021/05/31/what-robots-can-and-cant-do-for-the-old-and-lonely>
19. <https://www.frontiersin.org/articles/10.3389/fpsy.2020.577427/full>
20. <https://www.cnn.com/2020/08/11/us/seniors-robotic-pets-loneliness-wellness-scn-trnd/index.html>
21. <https://www.homecaremag.com/form-embed/robotic-pets-shown-have-positive-impact-patients-and-their-families>
22. <https://www.cbinsights.com/research/robotic-pets-elder-care/>
23. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3726310/>
24. <https://www.commonwealthfund.org/publications/issue-briefs/2020/jul/medicare-mental-health-coverage-covid-19-gaps-opportunities#6>
25. <https://www.macpac.gov/topics/dually-eligible-beneficiaries/>
26. <https://medicareadvocacy.org/under-65-project/>
27. [https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/Downloads/MMCO\\_Factsheet.pdf](https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/Downloads/MMCO_Factsheet.pdf)
28. <https://www.chcs.org/resource/coordinating-physical-and-behavioral-health-services-for-dually-eligible-members-with-serious-mental-illness/>
29. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6918821/>
30. <https://www.chcs.org/resource/coordinating-physical-and-behavioral-health-services-for-dually-eligible-members-with-serious-mental-illness/>
31. D. Russell Crane and Scott H. Payne, “Individual Versus Family Psychotherapy in Managed Care: Comparing the Costs of Treatment by the Mental Health Professions,” *Journal of Marital & Family Therapy* 37, no. 3 (2011): 273-289.
32. <https://www.congress.gov/bill/117th-congress/senate-bill/168?q=%7B%22search%22%3A%5B%22S+168%22%5D%7D&s=1&r=1>
33. Collins, C., Hewson, D. L., Munger, R., & Wade, T. (2010). *Evolving models of behavioral health integration in primary care*. New York, NY: Milbank Memorial Fund.