

# Behavioral Health Resource Center (BHRC) Annual Report

2023

Dane County Department of Human Services

**Behavioral Health** 

## Introduction

Dane County's Behavioral Health Resource Center (BHRC) has been in operation since November 2020 and continues to serve residents across Dane County seeking resources, services, and support for mental health and substance use needs. The BHRC assists consumers and concerned others across the lifespan and professional partners in navigating the complexities of the behavioral health care system. The BHRC provides information about local resources, makes referrals to providers and other support services, and does outreach at community events, local businesses, and social service agencies. As the BHRC continues to expand their reach and connect more Dane County residents to services that match their needs, consumers, loved ones, and professionals are encouraged to reach out for consultation and partnership. For more information about BHRC's beginnings and growth, see the BHRC's <u>2021 and 2022 Annual Reports</u>.



Connecting with Dane County consumers and concerned others is the keystone service provided by the BHRC. Consumers and concerned others reach out daily and connect with staff in search for behavioral health services and support.



The BHRC offers individual case consultation with thirdparty professionals calling on behalf of their clients and families. The BHRC partners regularly with school staff, county and community social workers, case managers, and probation and parole officers. B

As the BHRC has grown, community outreach has become integral to connecting with vulnerable residents and underserved communities. The Outreach Coordinator and other BHRC staff frequently attend and present at community events.

Community

Outreach

The BHRC is a voluntary, person- and family-centered service designed to help any Dane County resident access behavioral health services in Dane County, regardless of insurance status, financial status, age, identity, ability, or legal status. The BHRC assists residents from all ages, backgrounds, and walks of life. BHRC services are consumer-led and consumer-driven, meaning that the individual and family are the expert regarding their needs.

# Community Impact since Opening: 2021-2023

6,770	7,356	20,500
People Served	Cases	<b>Referrals Made</b>

The BHRC's reach continues to grow each year. *In 2023, the BHRC served nearly 2,600 individuals and opened almost 3,000 new cases*, both of which are nearly 50% increases since the first full calendar year of operation in 2021. *Staff made over 9,000 referrals* to resources and services in the community in 2023, ranging across the behavioral health care continuum from community resources and support groups to withdrawal management and residential programs. Consumers, concerned others, and professionals in Dane County continue to rely on the BHRC to provide referrals and resources that honor each person's voice and choice on their journey to accessing behavioral health care in our community.



When an individual connects with the BHRC, staff complete general assessment to evaluate their clinical needs, preferences, and barriers they are facing. Using this information, staff are able to make referrals to services that will meet the consumer's needs, including provider preferences, location, and insurance status. The BHRC offers follow up to the consumer to determine if they pursued the referral(s), and if not, whether there are additional barriers that could still be resolved with the BHRC's assistance.

"You are absolutely incredible. The empathy you provided on the telephone helped me get through a rough few days. And, this follow-up is so thoughtful. Your organization provides essential services to the community." - Consumer



### Population Served and Consumer Needs, 2021-2023

#### 63% Consumers

A person seeking resources or services for themselves

#### 23% Concerned Others

A person seeking resources or services for someone they care about such as a partner, loved one, family member, or friend

#### 14% Third-Party Professionals

A professional (case manager, heal thcare provider, school staff, etc.) in the community seeking resources or services on behalf of their client or patient

"Thank you SO much for your help! I called [the provider] that same afternoon and got an appointment for the following Monday for my daughter. She met with a therapist and they hit it off well enough [to] schedule another appointment ...You really saved the day and I am sograteful for your help! Not only do I feel like I have a list of other resources to try if [it] doesn't quite click with this therapist, but I also feel good knowing that the [BHRC] could help me or other family members in the future. I don't feel so adrift. Thank vou!!!"-Concerned Other The BHRC primarily serves consumers and concerned others, who have made up 86% of individuals served since opening in 2021. BHRC staff guide individuals through an assessment, where their presenting concerns and needs are identified. These need types help BHRC staff identify what services and resources the individual may benefit from most. Consumers and concerned others primarily seek mental health services and resources year-over-year, followed by substance use services, and non-behavioral health and other needs, such as housing assistance, vocational resources, and economic support services.

### **Consumers' Needs Remain Consistent**

Consumers continue to identify mental health services as their primary need, followed by substance use services, and non-behavioral health services. The figure below lists the most common referrals to service categories by type of need.



#### Consumer-Identified Needs, 2021-2023



## Trends in Referrals, 2021–2023

20,000+ Referrals Made Since Opening

#### Connections to 350+ Community Agencies

#### Over 1000 Referrals to Peer Support

"I was able to get placed with [a provider], one of your recommended locations. I was matched with a therapist there rather quickly & am having regular sessions. So far, it has been a great experience. Thank you so much for your help & recommendation! It made this process so much easier & less daunting for me. I'm truly grateful" - Consumer The BHRC has made over 20,000 referrals to hundreds of behavioral health care providers and community organizations across the county and state. These referrals span the behavioral health care array, from substance use support groups and residential treatment to outpatient and psychiatry services and more. *Since opening, the BHRC has made over 1,000 referrals for peer support and recovery coaching,* which serves as a crucial bridge to long-term care and connection for people seeking behavioral health care services of all kinds.

Most common referral types: Outpatient and Psychiatry 183 Referrals to Dane County CCS - 11% increase from 2022 Nearly 100 referrals to housing services in Dane County in 2023 1,600+referrals to nocost BH services in 2023

*In 2023, the BHRC made over 9,000 referrals* to consumers, concerned others, and professionals in Dane County. This represents the highest number of referrals made in one calendar year by the BHRC since opening, a 37% increase from 2022 and a 95% increase since the first full calendar year in operation in 2021. Referrals are documented by service type. Figure 1 shows the number of referrals by the most common service types each year. These stand out as key service types for which BHRC makes the most referrals. For those with needs beyond behavioral health care, the BHRC refers to local resources including other Dane County offices like the Job Center, the Disability and Aging Resource Center, and the Dane County Housing Authority and state resources like the <u>BadgerCare office</u> and the <u>Wisconsin</u> <u>Department of Health Services</u>.



#### Figure 1. Number of Referrals Made to Most Common Service Types by Year, 2021-2023

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## **Barriers to Accessing Care**

Consumers are asked to identify their barriers to accessing behavioral health services in Dane County. The BHRC has collected data on barriers to access since 2021. The following sections expand on persistent barriers to access that have been tracked across three years at the BHRC.

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### Waitlists

- •Varies by service type, especially specialized care
- •Impacted by compounding factors like acuity and co-occurring conditions
- •Waitlists as a barrier in 2023 was significantly lower than in 2022

# Complexities of Care

Waitlists in behavioral health care change frequently and vary significantly by service type. While some waitlists operate on a first-come, first-served basis, other waitlists for more intensive services are complex and nuanced. For example, residential substance use disorder (RSUD) waitlists are based on substance(s) used, acuity, co-occurring mental health conditions, and other complicating factors like medical needs. When a consumer is on a waitlist, BHRC staff often connect them to other supportive services like peer support programs and outpatient services to bridge the gap.

# Specialized Care

Specialized care like children's mental health services and psychiatry prescribing services are especially prone to long waitlists, as providers offering these services are limited and the demand continues to grow. Some consumers also seek care that extends beyond the modality, such as with a provider that identifies with their gender or sexual orientation, race or ethnicity, disability, or other sociocultural characteristics that are important to them. While there are many Dane County behavioral health resources, waitlists become an even greater barrier in specialized care and care from specific providers.

# Trends at the BHRC

In 2023, 20% of cases identified waitlists as a barrier to accessing care. Of those who identified waitlist as a barrier, 85% were seeking mental health services. The percentage of cases that identified waitlists as a barrier was lower in 2023 (20%) than 2022 (32%) and slightly higher than in 2021 (16%). Since 2021, the majority of consumers who identified waitlists as a barrier to access were seeking mental health services (72%). This has risen year-over-year, from 60% 2021 to 70% in 2022. Some of this can be attributed to better data collection over time at the BHRC since 2021, but the rise in proportion speaks to the growing demand specifically for mental health services that are backlogged by waitlists.

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## **Logistics to Access**

- Logistics to access include scheduling, transportation, location, childcare, and other non-financial aspects to care coordination.
- Primary barrier in this category was Transportation.
- Logistics of care as a barrier in 2023 was significantly higher than in 2022

# Physical Barriers

Time

**Barriers** 

Coordinating the logistics of care can be just as much – if not more – of a barrier to access as waitlists and cost. Physical factors – like the location of a provider's office – present one type of barrier to access. For example, consumers who live in rural communities outside the city of Madison and do not have their own vehicle or cannot drive may struggle to find ways to get to and from their provider's office in Madison. While there are behavioral health providers throughout Dane County in smaller cities and towns, most providers are in the Madison metro area, which can limit options for care for those living in rural communities in the county. Even so, consumers living in the Madison metro area that rely on public transportation have also identified transportation and location of services as a barrier to their access, as not all provider offices are near bus stops.

Time factors – like scheduling and childcare – present another logistical barrier to access. Many provider offices are open during traditional Monday through Friday business hours. For those who also work during that time, carving out time away from work may be difficult or impossible, leaving them with few options for providers who offer night or weekend availability. Additionally, parents with children have identified struggling to find childcare during service times.

Trends at the BHRC

Logistics to access as a barrier – including transportation, location, scheduling, and childcare – increased from 21% in 2022 to 31% in 2023. Since 2021, more than half of consumers who identified at least one logistical barrier to access listed transportation as one of their barriers. Location (~30%), scheduling (~25%), and childcare (~8%) constraints remain consistent year-over-year. While the BHRCdoes not usually make formal referrals to resources beyond the behavioral health array, staff regularly provide information for services and supports available in the community that may help a consumer access behavioral health services, such as childcare funding options and connections to transportation assistance and public transportation programs.



## **Cost and Insurance**

- Many consumers struggle to navigate their insurance coverage policies
  Some insurance carriers do not cover behavioral health care services like
- other medical services, leaving consumers with out-of-pockete expenses • Costs and Insurance coverage remains the top barrier for consumers since
- •Costs and insurance coverage remains the top barrier for consumers since 2021

### Coverage and Unexpected Costs

Cost and insurance coverage are consistently identified as critical barriers to accessing behavioral health care by consumers reaching out to the BHRC. Many consumers call the BHRC because they are overwhelmed by trying to navigate their options for care. Many have anxiety and fear about unexpected out-of-pocket expenses once they begin services. This fear is not unfounded: while mental health parity laws<sup>1</sup> and the No Surprises Act<sup>2</sup> have attempted to regulate behavioral health equity with other medical care, consumers continue to share they have received unexpected out-ofpocket expenses and insurance denials for behavioral health care.<sup>3</sup> The BHRC reviews consumers' insurance policies and coverage and try to make referrals to in-network, affordable care when possible, but assistance with insurance billing and claims processing are beyond the scope of BHRC services.

# Trends at the BHRC

Cost and insurance barriers have remained consistent since 2021 (42%). Of those who identified cost and insurance as a barrier, the number of those with seeking mental health services has significantly increased, from 52% in 2021 to 70% in 2023.<sup>4</sup> Cost and insurance as a barrier has significantly decreased for those seeking substance use services, from 32% in 2021 to 17% in 2023.<sup>5</sup>

<sup>5</sup> z = 3.51, p = 0.0004

<sup>&</sup>lt;sup>1</sup> Centers for Medicare and Medicaid Services. "The Mental Health Parity and Addiction Equity Act (MHPAEA)". Nd. Accessed February 21, 2024. <u>https://www.cms.gov/marketplace/private-health-insurance/mental-health-parity-addiction-equity</u>

<sup>&</sup>lt;sup>2</sup> Wis consin Office of the Commissioner of Insurance. "No Surprises Act" November 22, 2023. Accessed February 21, 2024. <u>https://oci.wi.gov/Pages/Consumers/NoSurprisesAct.aspx</u>

<sup>&</sup>lt;sup>3</sup> David Wahlberg, Wisconsin State Journal. "Doctor's Questions During Preventative Visit Led to Extra Charge for Patient" November 13, 2023. Accessed February 21, 2024. <u>https://madison.com/news/local/business/health-care/medical-bill-health-care-surprise/article\_4d3ff05a-7bf8-11ee-8bc8-e398066d05a6.html</u>

<sup>&</sup>lt;sup>4</sup> z = 3.72, p = 0.0002

## Outreach

#### **Community Events**

Professional Partnerships

#### **Targeted Outreach**

The BHRC is focused on expanding its outreach efforts in several ways, including attending dozens of community events, presentations, and resource fairs, building partnerships with community organizations and peer-led groups, and targeted outreach to vulnerable and underserved groups, including consumers who are homeless or housing-insecure, LGBTQ+, have a disability, or who identify as older adults.

#### **Community Resource Events**

- MMSD Transition Fair
- JustDane ReEntry Fair
- Madison Senior Health and Resource Fair
- Mount Horeb Ceddar Center Wellness Fall Festival
- Waisman Disability Resource Fair
- Lussier Neighborhood Fair
- Ho-Chunk Nation Community Health Fair
- Marshall Mental Health Fair



Staff tables at a Resource Fair, providing BHRC info packets



#### Community Celebrations

- Hmong New Year Celebration
- Journey Mental Health Center 75th Anniversary Celebration
- Madison Magic Pride
- Verona Police National Night Out
- Sunshine Place Summer Block Party
- Sun Prairie Juneteenth Celebration

#### **Building Partnerships**

- Joining Forces for Families
- PHMDC
- Madison Men's Shelter
- Safe Communities
- Urban League
- The Beacon
- Madison Public Libraries
- Outreach, Inc.

Staff present BHRC tote bags with information packets to a local Fire Department



# **Outpatient Open Network**

When the BHRC notices gaps in the behavioral health system of care, they are able to draw attention to it, advocate for change and funding to address the gap, and partner with community agencies to meet the need. One example of this is the DCDHS *Outpatient Open Network*, which connects uninsured consumers to outpatient services. The BHRC is the hub for the network by screening uninsured consumers for eligibility and referring them to providers within the network for care. Providers in the network are reimbursed for their serves by DCDHS. The Outpatient Open Network is a targeted effort to meet the needs of a historically underserved population.

Do you know someone who is uninsured and looking for behavioral health care? Reach out to the BHRC:

(608) 267-2244 or bhrc@countyofdane.com

It is the culmination of collaboration and coordination between the human services system – both in direct consumer service and IT infrastructure – and community providers to offer this bridge to services.

Agencies interested in partnering with DCDHS and the BHRC on this endeavor can reach out to <u>bhrc@danecounty.gov</u> for more information.

The BHRC served 84 consumers who were uninsured in 2023. *Since opening, the BHRC has connected over 300 consumers without insurance to services and resources*. In addition to the newly established Outpatient Open Network, the BHRC works with several no-cost and low-cost/sliding scale providers to provide care to those



84 Uninsured Consumers Served in 2023

who are uninsured or underinsured, but these spots are limited and consumers can spend weeks or months on waitlists. The BHRC connects consumers without insurance to <u>Wisconsin's Capital Consortium</u>. The consortium is a partnership across eight Wisconsin Counties that connects consumers to state insurance options and other economic support benefits.

# Initiatives and Expansion in 2024

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#### Increasing Spanish and Hmong Language Access:

- Nearly 100 calls to the Spanish Language Line
- •Hmong Language Line to launch in 2024
- •2 Bilingual (Spanish and Hmong) Case Managers
- Targeted outreach efforts to Latino and Hmong community organizations and at local events

#### Systems of Care Partnerships:

- Complex Case Consultation: staff coordinate teaming and consultation opportunities with clinical staff to discuss cases with complex needs and barriers to access.
- •BH Consult within Systems of Care: BHRC staff offer behavioral health case consultation with intersecting systems of care, such as the Aging and Disability Resource Center (ADRC), Joining Forces for Families (JFF), and Child Protective Services (CPS), among others.

### Changing the Language of Behavioral Health Care

•The BHRC embraces changing language in the behavioral health care space. Best practice for inclusive, culturally competent language is changing in healthcare and the BHRC will advocate for and encourage our community providers and professionals in the behavioral health care space to use language that reduces stigma.<sup>6</sup>



- *Medication-Assisted Treatment (MAT) to Medications for Opioid Use Disorder (MOUD)*: MAT was first used to describe specific medications used to assist in recovery for folks with Opioid Use Disorder (OUD). Now, medical journals and other professional settings are transitioning to the acronym MOUD, as research shows these medications are shown to treat and reduce OUD even without other forms of treatment like therapy. These medications do not only "assist" with treatment - they *are* the treatment.<sup>7</sup>
- Detox to Withdrawal Management: Detox short for detoxification has historically been tied to alcohol detoxification programs. Detox carries cultural stigma for a medically necessary emergency service for those in need of medical withdrawal assistance for all substances, not only alcohol. Withdrawal Management is a more inclusive, accurate description of this service.

<sup>6</sup> National Institute on Drug Abuse. "Words Matter: Preferred Language for Talking About Addition" June 2021. Accessed February 26, 2024. <u>https://nida.nih.gov/research-topics/addiction-science/words-matter-preferred-language-talking-about-addiction</u>

<sup>7</sup> National Association of Counties (NACO). "Medication-Assistant Treatment ("MAT") For Opioid Use Disorder. nd. February 19, 2024. <u>https://www.naco.org/sites/default/files/documents/OSC\_Strategy\_MOUD\_References.pdf</u>