June 30, 2010

Pam Hyde, J.D.
Administrator
Substance Abuse & Mental Health Services Administration
U.S. Department of Health & Human Services
1 Choke Cherry Road
Rockville, MD 20857

Dear Administrator Hyde:

I am writing on behalf of the Association for Behavioral Health and Wellness (ABHW) to comment on SAMHSA’s draft document entitled “Description of a Modern Addictions and Mental Health Services System”. As you know, ABHW is an association of the nation’s leading behavioral health and wellness companies. These companies provide an array of services related to mental health, substance use, employee assistance, disease management, and other health and wellness programs to over 147 million people in both the public and private sectors.

Overall, ABHW believes that the paper lays out a comprehensive, desirable modern service system for behavioral healthcare. However, we would want to ensure that this does not become an unfunded mandate. Some of the services mentioned in the paper are not currently funded or covered under Medicaid or the private system. It is important for the paper to mention that appropriate funding goes hand-in-hand with the provision of these services. We also believe that while some of the services mentioned are important and necessary for a full recovery, they are not all medical care and therefore other financing mechanisms and organizations will need to be included to help provide for the full continuum iterated in the paper.

The paper clearly recognizes the value/need for the use of managed care to help provide a continuum of care while ensuring quality, access and containing costs. The paper should articulate some of the basic structures and processes that are core to a managed care delivery system and are needed to effectively achieve the stipulated vision. For example, the need for utilization management based on medical necessity criteria; the use of treatment guidelines to help provide evidence based care; and provider profiling to help enhance consumer knowledge.

ABHW supports the use of electronic health records and the aim of interoperable, integrated records that assist in care coordination across the entire spectrum of physical and behavioral health. The paper
recognizes the important goal of protecting patient privacy; however, it does not mention the equally important goal of allowing for the sharing of certain information to allow for appropriate, coordinated care between treating providers.

ABHW also received the following comments from its members:
- more needs to be included on the role of the consumer and an increased need for responsibility;
- the workforce section would benefit from added information on cultural diversity linked to community and individual needs;
- if the mechanics of blended and braided funding can be worked out this may be useful in some situations to allow for easier integration of care; and,
- included in the discussion of evidenced based practice should be the need to also consider cost-effective treatments.

Finally, there are two concurrent projects that SAMHSA is working on that should be referenced in this document because they are integral to the vision of a modern service system. The first project is the work that is being done on the service definitions. Common definitions will be useful for a variety of reasons including helping to align coding and payment. Additionally, to support the importance of performance metrics and outcomes a core common set, with a standardized instrument, is needed. SAMHSA’s activity in this area should also be mentioned.

Thank you for the opportunity to provide comment on this useful and important document. We would be happy to talk with you in more detail about the ideas expressed in this letter. We look forward to continuing to work with you and please feel free to reach out to us at any time.

Sincerely,

Pamela Greenberg, MPP
President and CEO

cc: John O’Brien, M.A.