Snapshot 2022



BEHAVIORAL HEALTH

LANDSCAPE

The incidence of mental health and substance abuse will remain elevated as a result of COVID-19 pandemic stressors, driving increases in long-term demand for both IP and OP care. Access barriers will persist in many markets due to this heightened demand, insufficient treatment availability and workforce constraints. Emergency departments will continue to face significant demand by both adult and pediatric patients with amplified acuity and suicidality. These challenges will require organizations to rethink and alter existing care models, including staff training, to ensure safety and improve throughput. Resourceful health systems looking to prevent avoidable utilization and address gaps in access will invest in low- and high-acuity outpatient services, identify community partnerships, and seize the opportunities presented through virtual technologies to broaden the availability of services.

ED Forecast, Behavioral Health

US Market, 2022-2027



TOP TRENDS

- Leading organizations are proactively assessing their behavioral health offerings to get ahead of demand for services in the emergency department and inpatient setting and across the System of CARE.
- Virtual behavioral health services will accelerate over the decade and extend beyond teleconferencing to include other digital technologies, such as prescribed clinical apps, patient web portals and remote patient monitoring.
- Innovative organizations with provider shortages have developed centralized telehealth services in areas where providers are more plentiful, opening opportunity for connectivity with more rural sites of care.
- Health systems are partnering with local agencies as well as national providers to deliver robust services, reducing the pressure of providing all services within their own walls.

- Inpatient demand for children and adolescents is being fueled by inadequate outpatient access—manifested through rising rates of suicidality, eating disorders and substance use among teenagers.
- Organizations are recognizing and acting on the connection between behavioral health and social determinants of health by addressing housing, transportation, food insecurity and more in their local communities.
- Fentanyl has driven rates of overdose deaths to new levels during the pandemic, signaling the need for more robust preventive and interventional care for people struggling with addiction.
- With the National Suicide Prevention Lifeline's 988 dialing code becoming available in July 2022, local providers are beginning to understand how this service might impact their patient flow and service offerings.

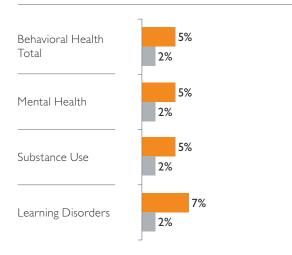
Note: Total ED includes emergent and urgent visits. Mental health includes adjustment disorders, anxiety and personality disorders, bipolar disorders, eating disorders, episodic and persistent mood disorders, psychosis, and trauma-related disorders. Substance use includes substance use disorders and poisonings—commonly abused drugs. Adult analysis excludes 0–17 age group. Pediatric analysis includes 0–17 age group only. CARE = Clinical Alignment and Resource Effectiveness. Sources: Impact of Change®, 2022; Proprietary Sg2 All-Payer Claims Data Set, 2019; The following 2019 CMS Limited Data Sets (LDS): Carrier, Denominator, Home Health Agency, Hospice, Outpatient, Skilled Nursing Facility; Claritas Pop-Facts®, 2022; Sg2 Analysis, 2022.



BEHAVIORAL HEALTH SNAPSHOT 2022

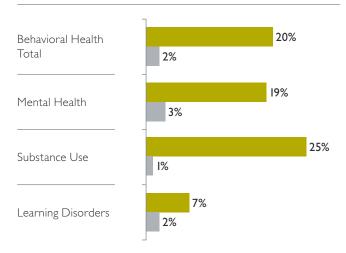
Inpatient Adult Behavioral Health Forecast

US Market, 2022-2027

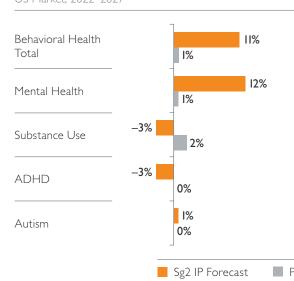


Outpatient Adult Behavioral Health Forecast

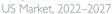
US Market, 2022-2027

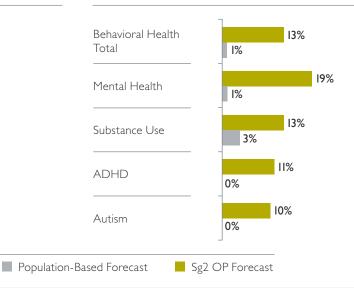


Inpatient Pediatric Behavioral Health Forecast US Market, 2022-2027



Outpatient Pediatric Behavioral Health Forecast





ACTION STEPS TO DRIVE VALUE

- Proactively screen for behavioral health conditions in all ages across health care practices to improve access to early treatment for low- and middle-acuity patients.
- Evaluate how expanded access and securing of payment impact the ability to adopt and implement telehealth and digital therapeutics for behavioral health.
- Leverage social workers and nurse practitioners to provide behavioral health services for patients and employ peer recovery specialists to work with patients with substance use disorders.
- Assess both inpatient and outpatient demand to understand the specific needs of patients in your market (geriatric, pediatric, adult, involuntary, voluntary, medically complex, etc).
- Examine partnerships with local community allies, and augment with national firms, to expand services without needing to house all services under the hospital umbrella.

Note: Adult analysis excludes 0-17 age group. Pediatric analysis includes 0-17 age group only. Total includes CARE Families not shown (Learning Disorders). Mental health includes adjustment disorders, anxiety and personality disorders, bipolar disorders, eating disorders, episodic and persistent mood disorders, psychosis, and trauma-related disorders. Substance use includes substance use disorders and poisonings—commonly abused drugs. Learning disorders also includes ADHD and autism. ADHD = attention deficit hyperactivity disorder: Sources: Impact of Change®, 2022; HCUP National Inpatient Sample (NIS). Healthcare Cost and Utilization Project (HCUP) 2019. Agency for Healthcare Research and Quality, Rockville, MD; Proprietary Sg2 All-Payer Claims Data Set, 2019; The following 2019 CMS Limited Data Sets (LDS): Carrier, Denominator, Home Health Agency, Hospice, Outpatient, Skilled Nursing Facility; Claritas Pop-Facts®, 2022; Sg2 Analysis, 2022.