



# CHRT

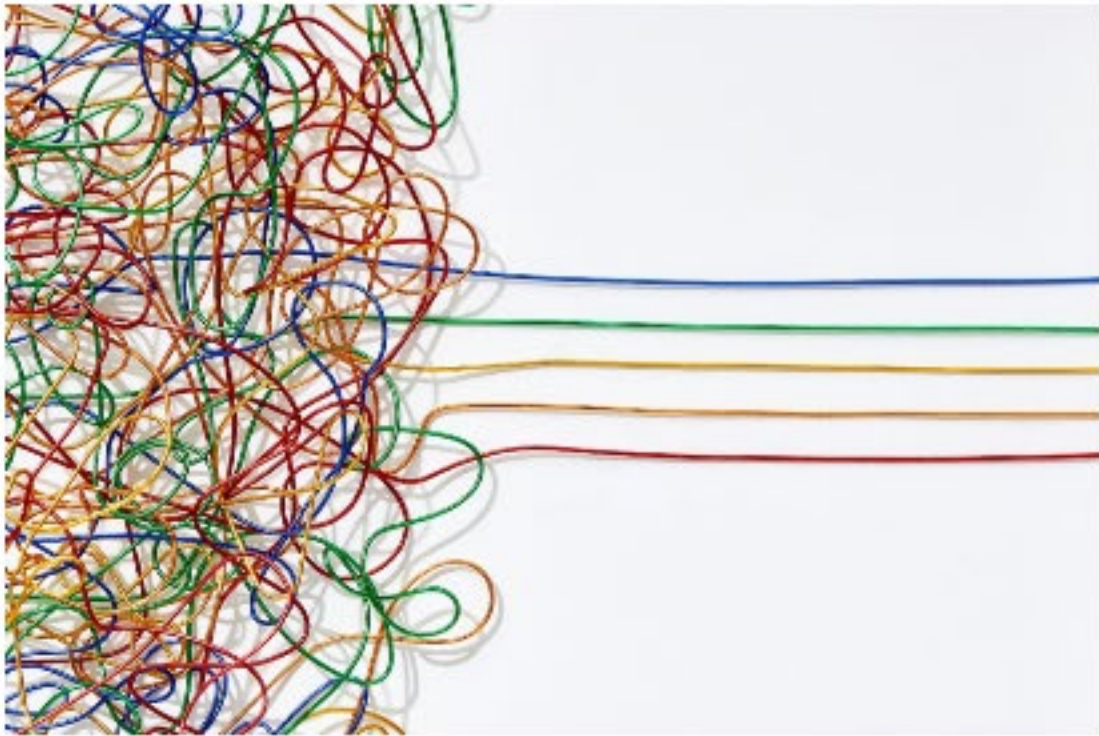
## Addressing gaps in the behavioral health workforce

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## The issues



- Insufficient numbers and maldistribution of behavioral health providers
- Rise in the prevalence of behavioral health needs in the population
- Leads to behavioral health crises, particularly in rural communities

## State and local efforts

- Increase supply of behavioral health workers
  - Short-term actions
  - Medium and longer-term actions
- Improve community services
  - Encourage appropriate, timely use of services
  - Reduce demand for emergency and inpatient services
    - Jail services





## Short-term actions



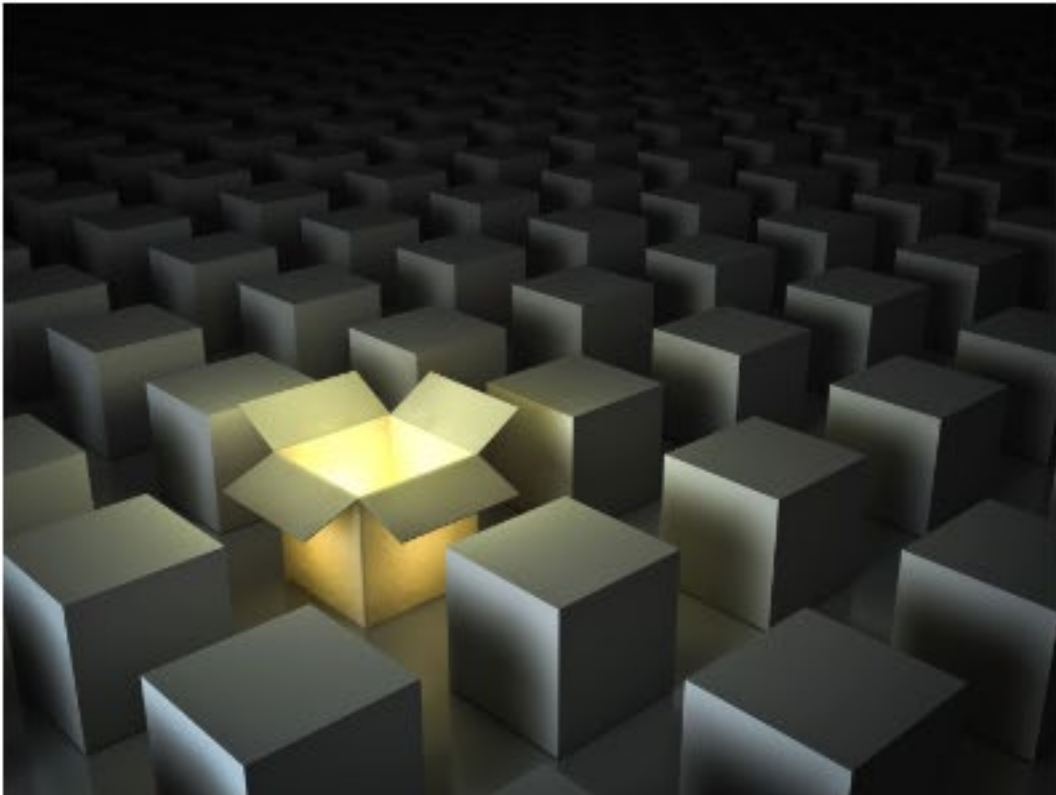
- Financial incentives
  - Loan repayment
  - Tax credits
- Visa waivers
- Telehealth expansion
- CHWs and peers as extenders
- Changes to scopes of work
  - Tiered certification
  - Psychologists prescribing medication
  - NPs and PAs prescribe Medication Assisted Treatment (MAT)

## Medium/longer-term actions

- Professional support for primary care providers delivering behavioral health services - curbside consultations
- Increase residency slots
- Pipeline programs
- Scholarships
- Tailored data collection



## Innovations



- Complex systems modeling – uses community-specific data to assess how system changes could impact ER boarding time and other factors
- Financial incentives for physicians to get waived to deliver MAT (BCBSM Michigan)
- Tiered certificates
- Public/private partnerships
- Statewide strategic planning – Led by DHHS

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# Discussion





# CHRT

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the health of the population,  
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